



October 18, 2023

BOARD OF DIRECTORS

MEETING MINUTES

Members	Present	Virtual	Attendees	Present	Virtual
Connie Werbelow, Chair	X		Joel Jackson, Chief Executive Officer	X	
Trudy Craft, Board Member	X		Tamara Sawyer, JD, Human Resource, Compliance and Risk	X	
Janet Evans, Treasurer	X		Diane Heine, DNP, RN, CEN, Interim Director of Nursing		
Jeff Petty, Board Member	X		Mark Schlattmann, Director of Plant Operations		
Fred Werner, Board Member	X		Michael Garza, Finance Department Manager	X	
			Kelsey Sullivan, Director of Clinic and Ancillary Services		
Billings Clinic Advisory Members			Dr Christopher Robertson, MD, Chief of Staff		
Patrick McConnell, Regional Controller	X				
Nicole Hobbs, VP Regional Operations			Guests		
Tracey Walker, RRT, Director of Regional Operations	X		Greybull Standard/Basin Republican		X

TOPIC	DISCUSSION	PRESENTER	ACTION ITEM
CALL TO ORDER			
	Call to order 5:36 P.M.	Connie Werbelow, Chair	
	Approve amend agenda to add credentialing and privileging files and discussion item for 2023 audit	Connie Werbelow, Chair	Moved by Jeff Petty 2 nd by Fred Werner Approved amend agenda to include credentialing and privileging files and items for 2023 audit.
	Elect Vice Chair Position, Jeff Petty nominated.	Connie Werbelow, Chair	Janet Evans Nominated 2 nd by Trudy Craft



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MINUTES			
	Board minutes from September 2023 meeting	Connie Werbelow, Chair	Fred Werner Motioned 2 nd by Janet Evans Approved September 2023 board minutes.
FINANCIAL REPORT			
	Financial report for September 2023: Three Rivers Health had a loss of \$171,329 for the month. Days in cash are 37 which includes all unrestricted accounts, however this is largely due to the grant money in the operating account for the Lawson/Cerner conversion owed to Billings Clinic. The September Mill Levy was \$11,544.82 which brings the Service District Account to \$100,909.97 at month end. Accounts Payable total is \$3,076,941 as of 09/30/2023. Average Gross Patient Revenue per day for September was \$39,745 versus \$37,987 for August. The Contractual for the month is comparable to last months at 32%. Bad Debt for the month was \$142,591.	Michael Garza, Finance Department Manager	Jeff Petty Motioned 2 nd by Janet Evans Approved financials as presented for September 2023.
EXECUTIVE REPORTS			
	CEO Report: Line of Credit –waiting for audit results Board Vacancy – Trudy appointed in September – Orientation on 10/9. Board By-Laws – amended draft for Board third/final reading CEO Goals – In process Priority work Strategic Planning – Draft plan completed during October 13 th work session. Trudy and Jeff attended with Tamara, Mike and I. We spent about five	Joel Jackson, CEO Tamara Sawyer, CTO, Compliance and Risk Diane Heine, Interim DON Mark Schlattmann, Director of Plant Ops Kelsey Sullivan, Director of Clinic and Ancillary Services	

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	<p>hours in total discussing areas of focus and tactics to address each. We plan on presenting the draft for the Boards review in October with the intent of voting on accepting the plan in November or December.</p> <p>Community Health Needs Assessment – Steering Committee and Public Forum groups identified and held meetings on August 29th. Fred was at both meetings and by all accounts they were well attended with active participation. The Steering Committee met on 9/25 to identify 3 goals and associated strategies to meet those. A draft plan was available during the strategic planning session. The draft will be reviewed again by the Steering Committee in early November with the final draft plan being presented to the Board for review/approval during our November meeting.</p> <p>Human Resources, Compliance and Risk: The employee of the month of October is Curtis Benson. Curtis has been with the organization since 2005 as our Maintenance Tech. We would like to recognize him for all his dedication and hard work.</p> <p>We currently have five registered nurses positions open, an infection control/employee health position, DON, two Laboratory MT and a PRN C.N.A. position vacant.</p> <p>Compliance Report: Policy and procedure- discussed the policy tracking workbook to show the board how policies are</p>		
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	<p>implemented and review to ensure timeliness and tracking. Compliance Program Administration- I received the annual assessment report of our compliance program from Billings Clinic. The report shows many areas we have improved over the year along with other areas to focus on. I have included the report in this packet. We will be incorporating the areas identified in this assessment into our risk assessment and work plan. Education, Training and Communication- This quarter we provided training on HIPAA and compliance reporting. During the skills fair there were training details on HIPAA including what HIPAA is, what an employee's role is, unpermitted access situations and how to report a possible breach. As part of the October employee newsletter, there was material provided discussing compliance reporting. This material included examples of what situations may warrant an employee to report a compliance concern and how to report the concern. We offer multiple different methods including an anonymous hotline. Evaluation and Screening- The Office of the Attorney General maintains a database of all excluded individuals and entities from Medicare and Medicaid. We are required to ensure the employees and entities we conduct business with are not listed on the OIG exclusion database. OIG exclusion screening was performed on all employees, travelers, contractors, and vendor, with no hits being detected. Monitoring, auditing, and reporting- We are currently working on creating a risk assessment and work plan. This information will</p>		
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	<p>be provided in the Q4 compliance Board report. Responding to Issues- We have a new anonymous hotline for employees, visitors, and patients to report compliance concerns too. The information on this hotline will be posted in a visible place in the hospital and in the clinic waiting room. Each quarter I will report on any concerns received from this hotline or other methods available for employees to report concerns.</p> <p>Director of Clinic and Ancillary Services: Clinic: Kristi Bonnel-Phillips is scheduled to begin seeing patients November 6th. Flu clinic went well, we provided approximately 78 vaccines compared to 79 last year. Radiology: No updates. Laboratory: No updates. Pharmacy: No updates</p>		
CHIEF OF STAFF			
	No Present	Christopher Robertson, MD Chief of Staff	
BILLINGS CLINIC REPORT			
	<p>Met with TRH Leadership and Joel with strategic planning. There has been a restructure with Nicole and her team as Nicole is now the Vice President over the entire region. Regional Chief Medical Officer is Dr. Polley and Dr. Smith. Joel Jackson is up for his 6-month evaluation, it is due in November. There will be evaluation sheets going out for board and leadership to fill out.</p>	Tracey Walker, RRT, Director of Regional Operations	
NEW BUSINESS			



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	Strategic Planning How do we know we have improved? Public Feedback Capital Budget Joel wants an approved Strategic plan by end of calendar year. This will be good for 3 years.	Joel Jackson, CEO	
	2023 Audit- obtained signatures for the Annual Report summary and board training requirements for the state.	Michael Garza-Finance Department Manager	
OLD BUSINESS			
	Third Reading of Board Bylaws- Tabled the Board bylaws until next month's meeting	Connie Werbelow, Chair	
	Approve credentialing and privileges for: Steven Gard, PA-C Emergency Room and Hospitalist Tammy Ballant, FNP Emergency Room and Hospitalist		Trudy Craft Motioned 2 nd by Fred Werner Approved credentialing and privileging files for Steven Gard and Tammy Ballant.
PUBLIC COMMENTS			
EXECUTIVE SESSION			
	WY § 16-4-405 – Personnel and legal	Connie Werbelow, Chair	
ADJOURN			
	Adjourned at 7:16 P.M.	Connie Werbelow, Chair	Fred Werner Motioned 2 nd by Jeff Petty Approved