

Audubon County Memorial Hospital Board of Trustees

Meeting Minutes

May 27, 2021 at 12 Noon

Board Room

ATTENDANCE

Board Members Present: Brett Irlmeier, Michelle Sprague, Marlene Ballou, Anne Miller, Mark Kessler, Rev. Philip Beisswenger

Board Members Absent: Vicky Robinson

Staff Present: Suzanne Cooner, Kolton Hewlett, Melinda Alt, Paul Topliff, Dr. Michelle Rebelsky, Haillie Bruch

Others Present:

I. CALL TO ORDER

Board Chair, Brett Irlmeier, called the meeting to order at 12:01 p.m.

II. AGENDA APPROVAL

Mark Kessler made a motion, seconded by Michelle Sprague to approve the agenda with approval in accordance with the Code of Iowa Open Meetings Law. Motion carried.

III. PUBLIC COMMENTS

No public comments.

IV. CONSENT AGENDA

It was moved by Michelle Sprague and seconded by Mark Kessler to approve the Meeting Minutes of April 22, 2021. Motion carried.

VII. FINANCIAL REPORT

Melinda Alt, CFO, reviewed the financial reports and budget scorecard. The financial report for the month of February Operating Statement "excess of revenue over expenses" for the month was \$11,792.17. YTD is a positive \$465,358.72 compared to budget of \$84,094.21.

CD #612585 for \$1,074,923.32 matured at Exchange State Bank 05/06/2021. Rates at Exchange State Bank 0.05%, Audubon State Bank and Landmands passed on bidding. The CD was reinvested at the highest rate of 0.05% at Exchange State Bank for another 12 months.

Eide Bailey was on site at ACMH on Tuesday, May 25, 2021 and Wednesday, May 26, 2021 for the Revenue Cycle Compliance Audit. The audit was engaged through our legal firm of Dentons Davis Brown Law Firm and the final report. No compliance concerns were identified. The Revenue Cycle department will make a few process changes based on recommendations by the auditor. The final report will be completed within the next few weeks.

Michelle Sprague made a motion, second by Mark Kessler to approve the financials. Motion carried.

VIII. MEDICAL STAFF REPORT AND CREDENTIALING

Dr. Michelle Rebelsky gave the medical staff report and credentialing recommendations. The following appointments, reappointments, and resignations from the medical staff were reviewed:

Reappointment to Consulting Medical Staff:

1. Jackie Wilson, ARNP (ACMH – ED)
2. Brian Jacobs, CRNA (Midwest Integrated Pain Care, P.C.)
3. Mikal Rasmussen, ARNP (Wapiti Medical Staffing)
4. Shannan Schoening, CRNA (M&M Anesthesia)

Resignation from Active Medical Staff

1. James Cooper, MD (AFHC)

Stephen Smith, D.O. is currently on leave of absence until further notice.

Board members reviewed the application, the supporting documentation, the recommendations from the Medical Staff, and information received during the credentialing and privileging processes.

Based on this review, it is the Board's opinion that the above applicant meets the requirements for Medical Staff Reappointments, Resignations, and Leave of Absence.

Mark Kessler made the motion and seconded by Marlene Ballou to approve the above credentialing. Motion carried.

Dr. Michelle Rebelsky, M.D., gave the medical staff report. She discussed opportunities to improve chronic care management, patient satisfaction, and safety measures. This will be a focus of the medical staff in the coming months.

Dr. Rebelsky continues to work on the provider recruitment. She currently has a candidate she will be interviewing next week for a nurse practitioner position in the Emergency Department.

Dr. Rebelsky discussed the Saturday/Sunday care in the Rural Health Clinic. Her recommendation is to try extending the weekday hours, during the evening, in the clinic to 6 pm first. This could benefit the clinics by allowing more patients to be seen and could not be seen previously due to working later hours than what the clinic was open. Dr. Rebelsky brought to the Board of Trustees the idea of having a provider on call for the clinic during the weekend hours. This could also benefit patient satisfaction ratings and patient experience.

Dr. Rebelsky presented the Medical Staff By-Law additions of Locums Tenens Section 4.9. (attached).

IX. COMPLIANCE/QUALITY/RISK MANAGEMENT REPORT

Kolton Hewlett, Senior Director of Administration/Compliance Officer provided the quality, patient safety, and risk management report.

- The Quality Committee met on Tuesday, May 19, 2021, and received reports from rehab services, nutrition services, nursing services, emergency department, trauma, care coordination, pharmacy, antibiotic stewardship, and infection prevention.
- We have engaged Eide Bailly to conduct an external revenue cycle and billing review. The review included an assessment of our revenue cycle processes, provide education to staff for an overall understanding of billing rules and regulations, provide staff with education and training for compliance with third party billing, and assist staff to improve workflows within the revenue cycle process.
- April was the first month surveying patient satisfaction in the outpatient specialty clinics and radiology services. For the first month radiology was above the 70th percentile and outpatient specialty clinics was almost to the 60th percentile. As this is just one month of data, these rankings might change after there is more data included. Inpatient services continues to be above the 80th percentile and the emergency department continues to be above the 60th percentile. Dr. Rebelsky is working on some initiatives to improve patient satisfaction in the primary care clinics.

X. REVIEW AND APPROVALS

The following were presented to the board for approval.

- PAC Policy
 - Interoperability and Patient Access Compliance – New

- Visitor Restriction Policy – Updated

Reverend Beisswenger asked to clarify visitation for clergy. Clergy should be added as members of the care team and allowed to visit. They must still follow the same rules regarding mask wearing as required by staff.

Action: Anne Miller made a motion seconded by Mark Kessler to approve of the PAC policies presented with addition to Visitor Restriction Policy. Motion Carried.

- Dr. Simons, MD, Professional Services Employment Agreement with Audubon County Memorial Hospital for ED/Hospitalist services.

Action: Mark Kessler made a motion and second by Marlene Ballou to approve the Professional Services Employment Agreement for Dr. Simons. Motion carried.

- Medical Staff By-Laws addition of Tenens Locum coverage Section 4.9. (attached).

Action: Brett Irlmeier made a motion and seconded by Mark Kessler to approve all of the Medical Staff By-Laws addition of the Locums Tenens. Motion Carried.

Housing – Board members did not approve housing options presented.

XII. ADJOURNMENT:

The meeting adjourned at 2:08 p.m. with a motion by Marlene Ballou and seconded by Michelle Sprague. Motion carried.

Brett Irlmeier, Board Chair

Marlene Ballou, Board Secretary/Treasurer

PAC POLICIES REVIEWED AND APPROVED:

- Visitor Restriction – Updated
- Interoperability and Patient Access Compliance – New