



December 5, 2024

**HOSPITAL BOARD
OF TRUSTEES**

**WILLIAM NEWTON HOSPITAL
BOARD OF TRUSTEES AGENDA**

December 5, 2024

- 1) BOARD APPROVALS / CONSENT AGENDA
 - a. BOARD MEETING MINUTES
 - b. MEDICAL STAFF APPROVALS
 - c. MEDICAL EXECUTIVE COMMITTEE MINUTES

- 2) CEO REPORT (Brian)
 - a. Administrative Update

- 3) FINANCIAL REPORT (Kara)
 - a. Hospital Financials
 - b. Bad Debt/Charity Care Report

- 4) LEADERSHIP REPORTS
 - a. Operations Update (Brian)
 - b. Nursing Update (Laura)
 - c. Ancillary Update (Amber)
 - d. Support Update (Micah)
 - e. Human Resource Update (Tiffany)

- 5) MEDICAL STAFF REPORT (Dr. Shah-Haque)

- 6) * Executive Session Discussion
 - a. To discuss matters relating to Financial Affairs and Trade Secrets
 - b. To discuss data relating to Patients and Providers
 - c. To discuss matters relating to Non-Elected Personnel

- 7) TRUSTEE COMMENTS

WILLIAM NEWTON HOSPITAL

MEETING: WNH Board of Trustees

LOCATION: Lower Level Classroom

DATE: October 31, 2024

MEMBERS PRESENT: Gail Sawyer, Chair; Gary Brewer, Vice-Chair; Joan Cales; Steve McSpadden; Lucy Herlocker-Freeman

EXECUTIVE SESSION DISCUSSION

Ms. Cales made a motion to move into executive session for 50 minutes to discuss matters relating to Non-Elected Personnel. Motion seconded by Ms. Herlocker-Freeman. Motion carried. Executive session beginning at 8:30am and ending at 9:20am.

MEMBERS PRESENT: Gail Sawyer, Chair; Gary Brewer, Vice-Chair; Joan Cales; Steve McSpadden; Lucy Herlocker-Freeman

OTHERS PRESENT: Brian Barta, Chief Executive Officer; Kara Goff, Chief Financial Officer; Amber Seitzinger, Chief Ancillary Officer; Laura Frazier, Chief Nursing Officer; Leigh Ann Smith, Secretary; Tiffany Shinneman, Director of Human Resources; Micah Norris, Chief Support Officer; Sarah Johnson, Director of Marketing and Business Development and Public Information Officer; Rebecca McCutcheon, Winfield Assistant News Manager

Called to order by Ms. Sawyer at 9:31am.

1) MEDICAL STAFF REPORT

Dr. Shah-Haque reported no concerns from the medical staff. The Bi-Annual Medical Staff Meeting is on November 14 from 12:15pm to 1:00pm.

2) APPROVALS

MS. CALES MADE A MOTION TO APPROVE THE FOLLOWING CONSENT AGENDA. MOTION SECONDED BY MR. BREWER. MOTION CARRIED.

- a. **MINUTES OF SEPTEMBER 26, 2024 WNH BOARD MEETING**
- b. **MINUTES OF OCTOBER 9, 2024 EMAIL VOTE**
- c. **MEDICAL STAFF APPROVALS FROM OCTOBER 31, 2024 MEMO**

Provisional staff status on the Active Staff:

- Neal Kraus, MD – hospitalist, FreeState

Provisional staff status on the Consulting Staff:

- Wesley Goodrich, MD – DWC, (temps 10/11/24)

Provisional staff status on the Allied Health Staff:

- D'Ambra Hinsley, PA – ER Fast Track (Temps 10/18/24)
- Hope Guerrero, APRN – ER Fast Track (Temps 10/7/24)

Reappointment to the Consulting Staff:

- Shaker Dakhil, MD – Oncology (11/1/24 to 11/1/26)

Change of Status from Active Staff to Consulting Staff:

- Madhuresh Kumar, MD, Independent, ER privileges

Change of Status from Provisional to Consulting Staff:

- Lyle Noordhoek, MD – KS Pathology Services

Change of Status from Provisional to Allied Health Staff:

- Kayla Jensen, PA, AOA – Dr. Hendricks supervising

Resignations:

Bilawal S. Ahmed, MD – RPG

William L. Elzi, MD – RPG

Tee M. Jeter, MD – RPG

Jason T. John, MD – RPG

Owais Mufti, MD – RPG

Elvin T. Varughesekutty, DO – RPG

Mohammad A. Yunus, MD – RPG

Kenneth Kovach, MD – KS Nephrology

Monty John, CRNA

Elvin T. Varughesekutty, DO – RPG

- d. **MINUTES OF SEPTEMBER 3, 2024 MEDICAL EXECUTIVE COMMITTEE**

3) CEO REPORT

ADMINISTRATIVE UPDATE: Mr. Barta mentioned that he has been interviewing candidates for the COO position and noted that there are several very qualified individuals in the running. He also remarked that the recent Medicare education sessions were well-attended and informative. Additionally, Mr. Barta recently participated in a KHA workshop that focused on the Provider Assessment Program. He discussed the potential benefits of this program for hospitals and emphasized that the group is striving to find a solution that would not negatively impact small hospitals. Mr. Barta announced that the Foundation GALA event is scheduled for this Saturday, November 2. He also mentioned that the Auxiliary is hosting a Holiday Market on Friday and Saturday, November 1 and 2.

4) FINANCIAL REPORT:

Ms. Goff reviewed the statistics and financials for September. Admissions and patient days increased in September compared to August. There was a total of 1,011 ER and Fast Track visits during the month. However, both deliveries and outpatient visits experienced a decline. Ms. Goff reported 96 swing bed days for September, bringing the year-to-date total to 727 days. The total patient revenue for September amounted to \$8,822,830.46, with net patient revenue at \$4,097,203.48. Income from patient services was \$82,099.30, resulting in a total net income of \$95,987.94. Days cash on hand increased to 44 days in September, up from 40 days in August. Additionally, the days in gross accounts receivable increased from 95 to 97. It was noted that reports on bad debt and charity care are available for review.

5) LEADERSHIP REPORTS

- a. **OPERATIONS UPDATE:** Mr. Barta mentioned that he met with our Rural Health Clinics (RHC) last week to discuss the leadership transition. An interim RHC manager will begin on November 4. Our Clinic Billing Manager has been monitoring the RHCs to ensure their needs are met. We are still searching for a full-time provider for the Cedar Vale RHC. Additionally, Mr. Barta noted that we are in the process of conducting interviews for the Chief Operating Officer position.
- b. **NURSING UPDATE:** Ms. Frazier mentioned that our discharge planners recently attended a swing bed conference and are continuing to achieve great results. She reported a total of 220 swing bed days in October and 947 days for the year so far. Ms. Frazier noted that the defibrillators have been distributed and commented on the high acuity of our emergency room patients. She also stated that the minimally invasive mid-line IV placements are ready for implementation. Additionally, Ms. Frazier reported that our HCAHPS scores are improving.
- c. **ANCILLARY UPDATE:** Ms. Seitzinger mentioned that she has been meeting with the department leaders. She noted that the lab will soon transition to a new reference lab and they are currently working on the interface for this change. The pharmacy has recently hired a new technician, and the respiratory department has brought on board a couple of new therapists: one is PRN (as needed) and the other is seasonal. She also highlighted that Spring has worked hard to secure a grant for two new ventilators. Currently, the Pulmonary Rehab department has 16 patients on their waiting list. We have hired a new full-time physical therapy provider, which will help address the large number of inpatients requiring rehabilitation. We are still actively recruiting for a Radiology Sonographer. At present, we have hired a contract Sonographer primarily for echocardiograms. A while back, we temporarily limited the on-call hours to support the two sonographers we had at the time. Additionally, we will be looking to hire a new Radiology Director, as Deb Ward will be retiring in December. The Cath Lab is performing very well, and the Cardiac Rehab department recently received a grant to purchase new equipment.
- d. **SUPPORT UPDATE:** Mr. Norris stated he continues to work on the Lab interface for the Reference Lab transition. The SIM Lab project is progressing well, thanks to the significant support from IT and Maintenance during this process. Recently, we conducted a Hospital Incident Command System (HICS) training event, which was well attended by many hospital leaders. Mr. Norris also noted that we are addressing several tasks that emerged from the Infection Control Mock Survey. He praised Garret Randel for his leadership, highlighting the efforts of his team to help the hospital save money. Additionally, Mr. Norris discussed the installation of AC coils, stating that we are currently waiting for more favorable weather conditions to proceed.

- e. **HUMAN RESOURCES UPDATE:** Ms. Shinneman reported that our headcount has increased with 103 new hires. She mentioned that we are awaiting feedback regarding the findings from our KPERS audit. In her discussion about staffing, she referred to her stoplight report. Ms. Shinneman also announced that our Occupational/Employee Health Nurse, Teresa Sherrard, will be retiring in December. Last week, we held a flu shot clinic, during which 196 people received their flu shots over the course of three days. Additionally, Ms. Shinneman attended a KHA Work Comp Conference recently and noted that we currently have three Work Comp claims.

6) EXECUTIVE SESSION DISCUSSION

Ms. Cales made a motion to move into executive session for 50 minutes to discuss matters relating to Financial Affairs and Trade Secrets. Motion seconded by Mr. McSpadden. Motion carried. Executive session beginning at 10:58am and ending at 11:48am. Motion extended by 27 minutes and ended at 12:15pm.

Mr. Brewer made a motion to accept the September financials as presented. Motion seconded by Ms. Herlocker-Freeman. Motion carried.

Ms. Herlocker-Freeman made a motion to move into executive session for 20 minutes to discuss matters relating to Patients and Providers. Motion seconded by Ms. Cales. Motion carried. Executive session beginning at 12:26pm and ending at 12:46pm. Motion extended by 22 minutes and ended at 1:08pm.

Mr. Brewer made a motion to move into executive session for 30 minutes to discuss matters relating to Non-Elected Personnel. Motion seconded by Ms. Cales. Motion carried. Executive session beginning at 1:13pm and ending at 1:43pm.

7) TRUSTEE COMMENTS

No comment or concerns were presented for discussion.

Meeting adjourned at 1:43pm.

Board of Trustees Summary:

Approvals given; Administrative update given; September Financials Reviewed and Approved; bad debt and charity care reports available for review; Operations update given; Nursing update given; Ancillary update given; Support Services update given; Human Resource update given; next Board of Trustees Meeting will be held in the Lower Level Classroom, December 5, beginning at 9:30am.

Respectfully Submitted,

Leigh Ann Smith, Secretary



EMAIL VOTE: WNH Board of Trustees

DATE: November 26, 2024

VOTING MEMBERS: Gail Sawyer, Chair; Gary Brewer, Vice Chair; Joan Cales; Steve McSpadden; Lucy Herlocker-Freeman

An email vote for November's medical staff activity was sent out since our November Board meeting will be held in December due to Thanksgiving. Approval was requested for the following reappointments that expire at the end of November.

REAPPOINTMENTS

The following application was reviewed for reappointment. The application included verification of current licensure, DEA registration, professional liability insurance, claims history and hospital affiliations. Also included was query to the National Practitioner Data Bank, Office of Inspector General (OIG) and System for Award Management (SAM).

1. The MEC has recommended to the Board of Trustees that the following physician be approved for **reappointment to the Active Staff**:
 - Alvin Bird, DO – Family Medicine, Hillside Clinic (12-01-24 to 12-01-26)
2. The MEC has recommended to the Board of Trustees that the following physician be approved for **reappointment to the Consulting Staff**:
 - Delane Vaughn, MD – Emergency Medicine, DWC (12-01-24 to 12-01-26)
 - Maha Assi, MD – Infectious Disease Consultants (12-01-24 to 12-01-26)
3. The MEC has recommended to the Board of Trustees that the following physician be approved for **reappointment to the Courtesy Staff**:
 - Stephen Hawks, DO – Ascension - Wellington (12-01-24 to 12-01-26)
 - Simon Patton, MD – Urogynecology, Ascension – Wichita (12-01-24 to 12-01-26)
4. The MEC has recommended to the Board of Trustees that the following physician be approved for **reappointment to the Allied Health Staff**:
 - Steven Newsome, CRNA (12-01-24 to 12-01-26)

Ms. Sawyer, Ms. Cales, Mr. Brewer, Ms. Herlocker-Freeman and Mr. McSpadden responded and approved the Medical Staff Activity as presented. Motion carried.

Respectfully Submitted,

Leigh Ann Smith
(Secretary)



MEMORANDUM

DATE: December 5, 2024

TO: Board of Trustees

FROM: Samantha Tomas-Miguel, Medical Staff Coordinator

SUBJECT: Medical Staff Activity and Updates

INITIAL APPOINTMENTS

The following applications were reviewed for initial appointment. The application included verification of medical education, work/practice history, medical staff membership, current licensure, DEA registration, professional liability insurance, claims history, and professional references. Also included was query to the National Practitioner Data Bank, Office of Inspector General (OIG), System for Award Management (SAM), and a Criminal Background Check.

1. The Medical Executive Committee has recommended to the Board of Trustees that the following physicians be approved for ***Provisional staff status on the Active staff***:
 - Sharon Breit, MD – OB Privileges, part-time coverage
 - Srinvas Bhadriraju, MD – Internal Medicine Hospitalist, FreeState Healthcare
2. The Medical Executive Committee has recommended to the Board of Trustees that the following physicians be approved for ***Provisional staff status on the Consulting staff***:
 - Jacob Lancaster, MD – Emergency Medicine, DWC (temporary privileges granted 11-05-24 for 11/28/24 shift)
3. The Medical Executive Committee has recommended to the Board of Trustees that the following physicians be approved for ***Provisional staff status on Allied Staff***:
 - Nikolas Ford, PA (Dr. Heger Supervising) – ER Fast Track (temporary privileges granted on 11-05-24 for 11-10-24 shift)
 - Ashley Eastman, APRN – ER Fast Track

REAPPOINTMENTS

The following application was reviewed for reappointment. The application included verification of current licensure, DEA registration, professional liability insurance, claims history and hospital affiliations. Also included was query to the National Practitioner Data Bank, Office of Inspector General (OIG) and System for Award Management (SAM).

1. The Medical Executive Committee has recommended to the Board of Trustees that the following physicians be approved for ***Reappointment to the Active Staff***:
 - Alvin Bird, DO – Family Medicine, Hillside Clinic (12-01-24 to 12-01-26)
 - Daniel Hein, MD – Emergency Medicine, Independent (01-01-25 to 01-01-27)
 - Thomas Lyman, DPM – Podiatry, Foot and Ankle (01-01-25 to 01-01-27)

2. The Medical Executive Committee has recommended to the Board of Trustees that the following physicians be approved for **Reappointment to the Consulting Staff**:
 - Delane Vaughn, MD – Emergency Medicine, DWC (12-01-24 to 12-01-26)
 - Maha Assi, MD – Infectious Disease Consultants (12-01-24 to 12-01-26)
 - Ward Newcomb, MD – KS Pathology Consultants (01-01-25 to 01-01-27)
 - Danielle Corbett, MD – Emergency Medicine, Indep.(01-01-25 to 01-01-27)

3. The Medical Executive Committee has recommended to the Board of Trustees that the following physicians be approved for **Reappointment to the Courtesy Staff**:
 - Stephen Hawks, DO – Ascension - Wellington (12-01-24 to 12-01-26)
 - Simon Patton, MD – Urogynecology, Ascension – Wichita (12-01-24 to 12-01-26)
 - Phillip Hagan, MD – Orthopedics, AOA (01-01-25 to 01-01-27)

4. The Medical Executive Committee has recommended to the Board of Trustees that the following physicians be approved for **Reappointment to the Allied Health Staff**:
 - Steven Newsome, CRNA (12-01-24 to 12-01-26)
 - Jessica Sloan, APRN (01-01-25 to 01-01-27)

*NOTE: December Reappointments were approved via email vote in November.

CHANGE OF STATUS FROM PROVISIONAL

The following providers were approved for Provisional status at initial appointment and are ready for change of status from Provisional to Active, Courtesy, Consulting, or Allied Health membership status. The following providers licenses, DEA, OIG, SAM, and Databank have been reviewed and there have been no concerns.

1. The Medical Executive Committee has recommended to the Board of Trustees that the following providers be approved for change of status from **Provisionary to Consulting staff**:
 - Michelle Kropatsch, MD – KS Pathology Consultants
 - Suhail Ansari, MD – SCK Orthopedics
 - Kyle Smothers, MD – Mid KS ENT

RESIGNATIONS

- Casandra Butler, MD – RPG

WILLIAM NEWTON HOSPITAL

MEETING: WNH Medical Executive Committee

LOCATION: Pavilion Lecture Room

DATE: October 1, 2024, 12:00 p.m.

MEMBERS PRESENT: Dr. Sapna Shah-Haque, Chief; Dr. Todd Peters;

MEMBERS PRESENT VIA ZOOM: Dr. Bryan Dennett; Dr. Patrick Bloedel

MEMBERS ABSENT: Dr. Thomas Lyman

OTHERS PRESENT: Brian Barta, Chief Executive Officer; Kara Goff, Chief Financial Officer; Brandy Cuevas, Chief Operations Officer, Laura Frazier, Chief Nursing Officer; Leigh Ann Smith, Administrative Assistant; Samantha Renteria, Medical Staff Coordinator; Natalie Bennett, Medical Staff Coordinator

A. Minutes

A MOTION WAS MADE AND SECONDED TO APPROVE THE MINUTES OF THE SEPTEMBER 3, 2024 MEETING AS PRESENTED. MOTION CARRIED.

B. Medical Staff

1. Provisional staff status on the Active Staff:
 - a. Neal Kraus, MD – hospitalist, FreeState
 - b. Thalia Lopez, MD – OB Provider (temps 9/27/24) ***TABLED** until peer references are received.
2. Provisional staff status on the Consulting Staff:
 - a. Wesley Goodrich, MD – DWC, (temps 10/11/24)
3. Provisional staff status on the Allied Health Staff:
 - a. D'Ambra Hinsley, PA – ER Fast Track (Temps 10/18/24)
 - b. Hope Guerrero, APRN – ER Fast Track (Temps 10/7/24)
4. Reappointment to the Consulting Staff:
 - a. Shaker Dakhil, MD – Cancer Center (11/1/24 to 11/1/26)
5. Change of Status from Provisional to Consulting Staff:
 - a. Lyle Noordhoek, MD – KS Pathology Services
6. Change of Status from Provisional to Allied Staff:
 - a. Kayla Jensen, PA, AOA – Dr. Hendricks supervising
7. Change of Status from Active Staff to Consulting Staff:
 - a. Madhuresh Kumar, MD, Independent, ER privileges
8. Resignations:
 - a. Bilawal S. Ahmed, MD – RPG
 - b. William L. Elzi, MD – RPG
 - c. Tee M. Jeter, MD – RPG
 - d. Jason T. John, MD – RPG
 - e. Owais Mufti, MD – RPG
 - f. Elvin T. Varughesekutty, DO – RPG
 - g. Mohammad A. Yunus, MD – RPG
 - h. Kenneth Kovach, MD – KS Nephrology
 - i. Monty John, CRNA

MOTION WAS MADE AND SECONDED TO APPROVE THE MEDICAL STAFF ACTIVITY AS PRESENTED. MOTION CARRIED.

D. Administration Report

1. Ancillary and Administrative Update – Mr. Barta stated the Radiology department is still down two sonographers, but we did hire an x-ray tech recently. Dr. Ali helped us modify our call schedule to support our sonographers better since we only have two right now. Mr. Barta stated the reference lab transition is set to go live on November 18. Our September ER volumes remain high and our Fast Track ER volumes have improved over the prior month. Mr. Barta stated the Bi-Annual Medical Staff Meeting is coming up on November 14.

2. Operations Update – Ms. Cuevas stated two of our RHC PAs, Wes Turner and Levi Lear, are no longer with us. Anna Kill, APRN, is working in Sedan and we are in the process of hiring another APRN to see patients in our RHCs. Dr. Lopez provided OB Call coverage for us last weekend. She stated we have another physician in addition to Dr. Moore that are willing to pick up some call coverage. She stated we are working hard to recruit an OB/GYN provider. She commented we are working with AOA to get a hand surgeon to come down. On November 4, Dr. Beard will be holding a monthly outreach clinic in Arkansas City.

3. Nursing Update – Ms. Frazier stated the defibrillator training is complete. She stated Swing Bed is doing well and our HCAHPS are improving also. The ER has been very busy. She commented our ICU is now fully staffed. Ms. Frazier stated we are in the early stages of doing mid-lines.

Meeting adjourned.

Next meeting: November 5, 2024, 12:00pm.

Summary: WNH Medical Executive Committee (MEC) October 1, 2024 – Approved September 3, 2024 Minutes; Medical Staff activity was approved; Administrative Update given; Ancillary Update given; Operations Update given; Nursing Update given.

Respectfully Submitted,

Sapna Shah-Haque, MD
(Leigh Ann Smith)

WILLIAM NEWTON MEMORIAL HOSPITAL
STATEMENTS OF NET POSITION
AS OF OCTOBER 31, 2024, 2023, 2022, 2021

	<u>10/31/24</u>	<u>10/31/23</u>	<u>10/31/22</u>	<u>10/31/21</u>
ASSETS AND DEFERRED OUTFLOWS OF RESOURCES				
CURRENT ASSETS				
Cash	715,653.01	579,141.49	760,227.49	117,696.88
Gross Accounts Receivable	29,842,714.15	21,775,831.12	21,322,304.74	19,816,214.38
Less Allowances	<u>(20,746,392.34)</u>	<u>(13,718,773.61)</u>	<u>(13,061,383.46)</u>	<u>(12,901,598.82)</u>
Net Accounts Receivable	9,096,321.81	8,057,057.51	8,260,921.28	6,914,615.56
Other Receivables	412,508.13	468,771.22	101,140.75	215,187.24
Inventories	829,911.03	776,195.11	1,142,611.91	809,142.34
Prepaid Expenses	264,013.65	237,023.78	201,243.18	290,426.69
Estimated Third-Party Payor Settlements	<u>0.00</u>	<u>0.00</u>	<u>531,614.00</u>	<u>3,397,698.00</u>
TOTAL CURRENT ASSETS	11,318,407.63	10,118,189.11	10,997,758.61	11,744,766.71
CAPITAL ASSETS				
Land	101,702.39	101,702.39	101,702.39	101,702.39
Land Improvements	1,188,262.75	1,188,262.75	647,719.71	647,719.71
Buildings	33,261,726.75	32,946,292.43	32,563,917.52	32,526,233.08
Equipment	25,102,543.47	24,548,722.88	23,392,122.96	23,011,144.26
Construction-In-Progress	59,967.29	475,736.93	448,628.42	123,083.85
Leased Assets, net of accumulated amortization	<u>400,296.42</u>	<u>345,430.92</u>	<u>0.00</u>	<u>0.00</u>
Total Capital Assets	60,114,499.07	59,606,148.30	57,154,091.00	56,409,883.29
Less Accumulated Depreciation	<u>(43,976,821.18)</u>	<u>(41,545,655.09)</u>	<u>(39,268,162.39)</u>	<u>(36,697,161.11)</u>
TOTAL NET CAPITAL ASSETS	16,137,677.89	18,060,493.21	17,885,928.61	19,712,722.18
OTHER ASSETS				
Physician Advances Receivable	2,229.13	53,306.34	132,473.18	534,189.03
Development Fund	2,558,962.63	2,383,582.45	2,900,603.72	2,713,740.67
Assets Restricted Under Indenture Agreement	2,213,069.39	3,469,298.23	2,317,801.18	7,960,834.29
Foundation Restricted Assets	<u>3,234,686.83</u>	<u>2,871,480.22</u>	<u>3,442,060.42</u>	<u>3,371,116.08</u>
TOTAL OTHER ASSETS	8,008,947.98	8,777,667.24	8,792,938.50	14,579,880.07
TOTAL ASSETS	35,465,033.50	36,956,349.56	37,676,625.72	46,037,368.96
DEFERRED OUTFLOWS OF RESOURCES				
Pension Contributions Remitted				
Subsequent to Measurement Date	863,458.41	857,907.49	826,679.08	848,374.74
Changes in Proportion Related to Pension	<u>5,191,513.00</u>	<u>6,356,602.00</u>	<u>4,500,149.00</u>	<u>4,830,045.00</u>
TOTAL DEFERRED OUTFLOWS OF RESOURCES	6,054,971.41	7,214,509.49	5,326,828.08	5,678,419.74
TOTAL ASSETS AND DEFERRED OUTFLOWS OF RESOURCES	41,520,004.91	44,170,859.05	43,003,453.80	51,715,788.70
LIABILITIES, DEFERRED INFLOWS OF RESOURCES, AND NET POSITION				
CURRENT LIABILITIES				
Accounts Payable	5,746,397.28	6,326,053.58	3,770,475.06	1,972,968.89
Accrued Salaries & Wages	731,302.37	604,176.11	475,443.60	426,605.12
Accrued Employee Benefits & Payroll Taxes	196,977.63	325,103.29	249,985.85	260,410.34
Accrued PTO Payable	1,229,958.13	1,282,053.73	1,198,101.99	1,184,224.12
Accrued Health Insurance Claims	402,587.34	295,852.46	313,271.83	303,629.51
Estimated Third-Party Payor Settlements	<u>1,601,385.00</u>	<u>214,429.00</u>	<u>0.00</u>	<u>0.00</u>
TOTAL CURRENT LIABILITIES	9,908,607.75	9,047,668.17	6,007,278.33	4,147,837.98
LONG-TERM LIABILITIES				
Lease Purch Agreement Payable	5,157,084.75	6,596,816.54	7,662,932.64	9,566,351.92
Operating Leased Assets Liability	414,635.90	373,179.44	0.00	0.00
Net Pension Liability	<u>18,861,950.00</u>	<u>18,845,658.00</u>	<u>12,281,307.00</u>	<u>16,803,642.00</u>
TOTAL LONG-TERM LIABILITIES	24,433,670.65	25,815,653.98	19,944,239.64	26,369,993.92
DEFERRED INFLOWS OF RESOURCES				
Estimated Differences Between Expected and Actual Pension Investment Earnings and Pension Experience	1,231,592.00	889,199.00	4,512,412.00	397,257.00
Deferred Revenue	<u>0.00</u>	<u>0.00</u>	<u>837,132.71</u>	<u>5,195,463.80</u>
TOTAL DEFERRED INFLOWS OF RESOURCES	1,231,592.00	889,199.00	5,349,544.71	5,592,720.80
NET POSITION				
Balance Beginning of Year	1,933,331.64	7,136,247.55	12,047,283.64	9,057,271.65
Restricted Component Unit Fund Balance	3,234,686.83	2,871,480.22	3,442,060.42	3,371,116.08
Net Gain/Loss- Year to Date	<u>778,116.04</u>	<u>(1,589,389.87)</u>	<u>(3,786,952.94)</u>	<u>3,176,848.27</u>
TOTAL NET POSITION	5,946,134.51	8,418,337.90	11,702,391.12	15,605,236.00
TOTAL LIABILITIES, DEFERRED INFLOWS & NET POSITION	41,520,004.91	44,170,859.05	43,003,453.80	51,715,788.70

WILLIAM NEWTON MEMORIAL HOSPITAL
OPERATING / INCOME STATEMENT
FOR THE 10 MONTHS ENDING OCTOBER 31, 2024, 2023, 2022, 2021

	10/31/24	10/31/23	10/31/22	10/31/21	10/31/24 Y-T-D	10/31/23 Y-T-D	10/31/22 Y-T-D	10/31/21 Y-T-D
PATIENT REVENUES								
Inpatient Revenue	1,473,769.26	1,988,654.91	1,537,335.89	1,671,833.54	16,974,199.76	16,553,992.90	16,015,143.03	16,847,724.40
Swing Revenue	500,481.80	57,125.95	10,428.19	51,514.45	2,184,410.56	492,056.89	324,868.47	783,275.72
Outpatient Revenue	5,106,143.00	4,343,303.91	4,156,664.37	4,029,977.76	44,387,602.74	44,147,729.72	36,479,930.90	38,750,924.99
ER Revenue	1,991,136.44	2,054,307.79	1,527,320.72	1,826,675.04	20,906,522.94	18,928,683.72	16,681,398.06	18,118,911.74
Home Health	0.00	0.00	0.00	38,259.49	0.00	13,166.33	219,436.33	407,092.42
Rural Health Clinics	219,728.29	282,132.94	267,460.91	299,821.19	2,349,712.80	2,821,251.57	2,410,583.21	2,792,239.42
Physician Pavilion Clinics	483,438.49	471,236.31	350,371.04	244,172.92	4,489,578.50	4,266,051.72	2,840,042.04	2,457,034.27
TOTAL PATIENT REVENUE	9,774,697.28	9,196,761.81	7,849,581.12	8,162,254.39	91,292,027.30	87,222,932.85	74,971,402.04	80,157,202.96
DEDUCTIONS FROM REVENUE								
Policy Discounts & Allowances	9,256.27	21,357.82	19,462.41	25,257.65	114,156.51	104,450.26	217,139.69	178,136.23
Contractual Adjustments	5,350,012.65	4,823,986.29	3,993,791.31	4,181,703.21	47,528,216.92	45,177,379.75	37,846,257.33	41,793,760.91
Medicaid DSH Payments	(218,965.43)	(97,293.33)	(97,293.83)	(96,226.00)	(1,972,778.67)	(972,937.32)	(951,545.83)	(853,606.00)
Recovery Uncollectible Accounts	(111,194.37)	(77,191.15)	(116,021.44)	(90,842.16)	(1,318,026.39)	(1,275,096.19)	(1,178,471.53)	(1,173,420.97)
Provision for Uncollectible Accounts	315,156.39	421,193.72	523,119.53	667,299.79	5,267,118.91	5,304,700.19	4,299,851.23	4,370,183.91
Financial Assistance	97,187.20	35,163.55	59,349.88	94,070.48	478,105.68	408,912.19	430,872.40	436,747.87
TOTAL DEDUCTIONS FROM REVENUE	5,441,452.71	5,127,216.90	4,382,407.86	4,781,262.97	50,096,792.96	48,747,408.88	40,664,103.29	44,751,801.95
NET PATIENT REVENUE	4,333,244.57	4,069,544.91	3,467,173.26	3,380,991.42	41,195,234.34	38,475,523.97	34,307,298.75	35,405,401.01
OPERATING EXPENSES								
Salaries & Wages	1,809,097.82	1,775,911.49	1,754,710.11	1,626,575.84	17,591,923.54	17,287,317.45	16,202,370.29	15,905,518.67
Employee Benefits	454,721.26	389,135.71	350,897.34	540,920.81	5,002,558.56	5,077,963.86	3,952,357.39	4,758,047.57
Contract Labor & Services	833,043.78	860,125.66	863,346.12	779,418.09	7,957,085.43	8,497,725.57	9,661,986.86	6,200,541.45
Equipment & Supplies	638,645.25	579,047.17	671,151.66	746,250.26	5,725,001.06	5,638,336.39	5,475,583.97	6,176,769.14
Insurance & Utilities	122,002.73	98,676.73	138,809.03	119,808.81	1,106,011.85	1,084,186.53	1,306,288.20	1,168,796.92
Repairs & Maintenance	95,653.34	69,042.13	62,871.60	54,782.46	757,689.09	779,985.79	665,106.63	675,211.96
Rent & Operating Leases	17,424.42	18,860.55	34,311.58	18,646.81	184,293.21	106,687.65	255,557.80	219,164.40
Other Direct Department	51,927.97	67,063.73	66,897.99	71,626.98	607,726.24	673,914.53	651,899.96	629,247.98
340B Program	10,346.59	7,030.77	740.56	61,019.95	89,215.78	29,090.14	247,930.64	626,672.25
Interest	27,638.95	20,394.29	22,828.88	28,120.04	223,697.13	210,339.61	245,477.25	360,442.69
Depreciation	190,009.63	198,262.85	184,337.81	222,029.83	1,989,411.19	1,912,541.25	2,110,004.82	2,210,201.97
TOTAL OPERATING EXPENSE	4,250,511.74	4,083,551.08	4,150,902.68	4,269,199.88	41,234,613.08	41,298,088.77	40,774,563.81	38,930,615.00
OTHER OPERATING REVENUES								
Cafeteria	8,160.33	6,381.19	4,957.25	3,520.38	63,785.67	52,843.68	44,562.41	38,438.51
340B Program	0.00	0.00	0.00	64,228.93	0.00	0.00	217,931.70	846,026.30
Other	13,848.69	11,743.21	29,341.87	19,646.96	236,339.85	260,928.39	282,851.49	277,615.82
Electronic Health Record	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL OTHER OPERATING REVENUES	22,009.02	18,124.40	34,299.12	87,396.27	300,125.52	313,772.07	545,345.60	1,162,080.63
INCOME FROM PATIENT SERVICES	104,741.85	4,118.23	(649,430.30)	(800,812.19)	260,746.78	(2,508,792.73)	(5,921,919.46)	(2,363,133.36)
OTHER REVENUES & EXPENSES								
Grants	0.00	4,333.11	(145,657.58)	0.00	65,645.54	273,387.67	1,587,836.18	5,036,808.11
Contributions & Donations	50,565.00	127,724.28	0.00	55,928.71	370,006.14	603,758.81	542,095.55	493,498.84
Income from Investments	8,398.49	4,825.05	2,017.10	1,207.68	88,157.07	44,053.95	14,246.27	19,843.36
Other Expense	(62.39)	0.00	0.00	0.00	(6,439.49)	(1,797.57)	(9,211.48)	(10,168.68)
TOTAL OTHER REVENUES & EXPENSES	58,901.10	136,882.44	(143,640.48)	57,136.39	517,369.26	919,402.86	2,134,966.52	5,539,981.63
TOTAL NET INCOME	163,642.95	141,000.67	(793,070.78)	(743,675.80)	778,116.04	(1,589,389.87)	(3,786,952.94)	3,176,848.27



MEMORANDUM

DATE: December 5, 2024

TO: WNH Board of Trustees

FROM: Laura Frazier, CNO

SUBJECT: Overview of Nursing Services Departments

Nursing Services Administration Stoplight Report

The following Stoplight Report summarizes important updates and progress in the listed departments.

Respectfully Submitted,
Laura Frazier, BSN, RN
Chief Nursing Officer

STOPLIGHT REPORT

Note: The Stoplight Report is a way to communicate in writing how the ideas/concerns harvested in rounding are dealt with. It is excellent to post on communication boards. Green Light items are things that have been addressed and are complete. Yellow Light items are things in progress. Red Light items are those issues or ideas that cannot be done including the reason why.

Name: Laura Frazier Title: Chief Nursing Officer	Date: November 2024
---	----------------------------

GREEN/COMPLETE	YELLOW/WORK IN PROGRESS	RED/CAN'T COMPLETE AT THIS TIME AND HERE'S WHY
<p align="center">Nursing Service Administration</p> <p>Elizabeth Henderson – Interim Med Surg Manager, started on 11/18 in her new role.</p> <p>Multiple employees have continued to complete the telemetry/basic arrhythmia course – this will enable staff to float.</p>	<p align="center">Nursing Service Administration</p> <p>Education Reviewing new scheduler platform for clinical/ancillary staff.</p> <p>Annual Competency Fair in the works.</p> <p>Continue to work with staff on Blood education for the precision of documentation.</p> <p>Working on transitioning the blood transfusion back to electronic documentation.</p> <p>Streamline, and revamp the orientation process for nursing staff including competencies. Process improvement identified. Currently working on compliance and obtaining all initial competencies not present in the employee files.</p> <p>Working with the Clinical Educator to redevelop our clinical orientation processes.</p> <p>Completed Moderate Sedation Policy and check off lists for competencies. Awaiting CRNAs policy approval to move forward.</p> <p>In the process of staff completing age specific competencies.</p>	<p align="center">Nursing Service Administration</p> <p>Professional Achievement Structure Would like to develop a nursing career advancement program based on rewarding and recognizing high standards of professional performance within our organization that values quality patient care provided by expert nurses. The recognition targets RNs who seek advancement as skilled, competent clinicians who choose to dedicate their careers to hands on patient care.</p>

<p>2 East</p> <p>Education: A new barcode was added for glucometer results on the MAR – this will help to increase the scanning rates.</p> <p>Staffing: Currently, all nurse positions on MS are filled.</p>	<p>2 East</p> <p>Staffing: Working to decrease agency staff when possible.</p> <p>Reworking the schedule to eliminate the need for an agency.</p> <p>One RN planning to retire in December – will need to backfill that position.</p> <p>Wound Vac education in the process of getting set up.</p>	<p>2 East</p> <p>Equipment: In need of a new computer on wheels – currently the 4th C.O.W. is not working.</p> <p>In need of a bladder scanner.</p>
<p>ICU</p> <p>Currently fully staffed! Awaiting new hires to come off orientation.</p> <p>ICU-specific competencies: pressure lines, chest tubes, and pneumothorax emergencies have been completed.</p>	<p>ICU</p> <p>DKA order set and documentation is under review to make the process easier to follow.</p> <p>I telemetry pack is not working. BioMed aware.</p> <p>Currently with 1 travel contract through the end of November until new RN has completed orientation.</p>	<p>ICU</p> <p>ICU desk needs resurfacing.</p>
<p>Surgical Services</p>	<p>Surgical Services</p> <p>Medication scanners added to the 2024 budget.</p> <p>Compact rollers with laptops were added to the 2024 budget as the current carts and computers are aging out.</p>	<p>Surgical Services</p>
<p>ER</p> <p>Current Agency Staff: Nights – Janell Weeks starts 11/2 seasonal employee Julie D – External Contract (ends 12/21) will not renew</p>	<p>ER</p> <p>Open Needs: Night shift: 1FT Paramedic or EMT-A or LPN 1 PT RN 1 FT RN</p> <p>Goal to be external agency free by Jan 2025.</p>	<p>ER</p> <p>Mindray Portable telemetry (5) Goal to order for next budget year (Dec 2022)</p> <p>Viewed T-Systems: Audit completed. Multiple areas were identified to capture more revenue.</p>

<p>New Hires/Staff Changes/Concerns</p> <p>Shayla Cornell, LPN II - PRRN hired for the Fast Track</p> <p>Pediatric-specific training was completed at the November staff meeting.</p> <p>ER Numbers:</p> <p style="text-align: center;">Oct:</p> <p>Total ED/FT patients = 939 Daily Avg = 31 Daily Admit Avg = 2 Daily Transfer Avg = 1</p>	<p>Fast Track</p> <p>Goal is to expand the FT hours in January. Working on schedules with the providers that have been hired.</p> <p>Beginning stages of reviewing requirements for a Level 3, 4, 5 Trauma Center.</p>	<p>UPDATE: Changes in documentation coming so this is delayed till we decide which way to go (Sept 2023)</p> <p>Working with Nanci, Michelle, and Taylor to start electronic charges. Meeting 2/8 with parties above and Jenny B who has taken this project on.</p> <p>UPDATE – Nanci is working on attaching charges to items in interventions and other area. Hope to have go live by May 2023 (March 2023)</p> <p>UPDATE: Nanci still working on this. With changes to web based CPSI may be delayed (June 2023)</p> <p>i-Stat in ER to help relieve lab staff and allow for quicker turnaround times. Spoke with Brenda that stated that she does not see this happening any time soon. (Dec. 2022)</p> <p>UPDATE – Chris Stated this might be something do to later this year after inspection in May (March 2023)</p>
<p style="text-align: center;">OB</p> <p>Post Birth Warning Signs staff education completed. PBWS patient education rolled out 10/14/24.</p>	<p style="text-align: center;">OB</p> <p>Safety</p> <p>Met with IT, Maintenance on possibilities of a locked unit for the safety of the staff, patients, and newborns. Quotes received are showing approximately \$32,000. Will review with Senior Leaders and the Foundation.</p> <p>The bed in 311 will intermittently get stuck in a raised position and not able to lower (big patient safety issue). The bed in 325 does not lock, biomed and maintenance have both looked at it and can't fix it (another big pt safety issue) (08/24)</p> <p>Maintenance has looked at the bed in 325 and has not been able to come up</p>	<p style="text-align: center;">OB</p>

	<p>with a solution yet. Budgeting for 2 new delivery beds for 2025. (11/24)</p> <p>Safe Medication Process: In need of an Omnicell</p> <p>Staffing: Need to hire 1 day shift nurse and two full-time night-shift labor and delivery nurses. Having difficulty recruiting, matching salary requests and obtaining agency nurses.</p> <p>Processes: Rachel working with Tonya on meeting the CMS Maternal Morbidity Structural Measure- a new requirement coming and will be new data reporting.</p>	
<p style="text-align: center;">Swing Bed</p> <p>Activity Cart has been started 11/4. Going well, just working out some kinks. We had a Volunteer donate \$200 to the activity cart and we are SO thankful for their generosity!</p>	<p style="text-align: center;">Swing Bed</p> <p>Swing Committee. First meeting scheduled in August: Plan to adjust the program to ensure all rules/guidelines are being followed per State. Delegation of duties to appropriate departments. Improve referral process which include timeframes for physicians to review.</p> <p>Creating a Swing Bed survey for patients. Questions developed and sent to Marketing for creation of document.</p> <p>Current review of options for an Activity Room.</p>	<p style="text-align: center;">Swing Bed</p>
<p style="text-align: center;">Case Management</p>	<p style="text-align: center;">Case Management</p> <p>InterQual pricing. Help prevent so many IP denials. Average about 10 per month. Before hospital admit, InterQual can be completed to see if pt meets IP criteria, and if so, the appropriate level of care. OBS vs IP vs ICU. Currently locked in under contract with Milliman HCG.</p>	<p style="text-align: center;">Case Management</p> <p>Guardianship Grant funding- to assist in decreased LOS in hospital which will decrease unnecessary hospital days, which the hospital will not be reimbursed. This is an innovation idea that needs the appropriate contacts, approvals etc.</p>

	<p>Would like to work on community projects in the upcoming year or so regarding education on chronic disease management from a CM standpoint, and SWB benefits.</p> <p>Due to the limitations of our current office phones, which are unable to function on the East side because they are “out of range,” we are required to be in the office to receive calls. This setup leads to frequent missed calls with insurance companies, family members, and outlying facilities, resulting in delays and inefficiency. Additionally, we often spend more than 30 minutes on hold while trying to schedule peer-to-peer (P2P) consultations. Providing Ashley and Janci with cell phones would allow them to have a direct line to case management (CM) and others mentioned above, improving accessibility and communication. This change would help reduce delays, streamline workflows, and enhance overall efficiency.</p>	
<p>SANE Kaitlyn has resigned from the coordinator position.</p> <p>We currently have 2 RNs who have completed SANE/SART training and competencies</p>	<p>SANE</p> <p>Review of the entire program as it is. Would like to complete a review of the program to determine the growth needed.</p>	<p>SANE</p>
<p>House Supervisors</p>	<p>House Supervisors</p> <p>Assisting Employee Health with Flu vaccination administration around the hospital to ensure compliance.</p> <p>Currently have one shift a week on nights creating OT. In need of PRN or Part-time HS to fill open shifts/vacations/sick time to reduce OT.</p>	<p>House Supervisors</p>

Infection Control	Infection Control	Infection Control
<p>Processes Real-time education is provided to staff with isolation patients.</p> <p>All NEW required data collection and notification is being completed</p>	<p>Antibiotic Stewardship Data collection has begun. We hope to have results soon to start this program.</p> <p>Survey Readiness Working with QI and department managers to prioritize mock survey results.</p>	<p>Equipment Review of ATP Surface Hygiene Monitoring Device. Cost prohibited at this time.</p>

Swing Bed Days over the last 12 months

October 2023 through October 2024





MEMORANDUM

DATE: November 25, 2024

TO: WNH Board of Trustees

FROM: Amber Seitzinger, Chief Ancillary Officer

SUBJECT: Overview of Ancillary Department Operations

Ancillary Department Stoplight Report:

The following Stoplight Report summarizes important updates and progress in the ancillary departments.

Respectfully Submitted,
Amber Seitzinger, MHA, OTR/L
Chief Ancillary Officer

STOPLIGHT REPORT

Note: The Stoplight Report is a way to communicate in writing how the ideas/concerns harvested in rounding are dealt with. It is excellent to post on communication boards. Green Light items are things that have been addressed and are complete. Yellow Light items are things in progress. Red Light items are those issues or ideas that cannot be done including the reason why.

Name: Amber Seitzinger Title: Chief Ancillary Officer	Date: 11/25/2024
--	-------------------------

GREEN/COMPLETE	YELLOW/WORK IN PROGRESS	RED/CAN'T COMPLETE AT THIS TIME AND HERE'S WHY
<p>Laboratory</p>	<p>Laboratory</p> <ul style="list-style-type: none"> -Continue to work with Quest on interface with CPSI – new go-live date the week of 12/10/24. -Continue to work with Heartland Pathology on building interface with CPSI -Working with Nanci Richardson on getting blood bank back to electronic process. 	<p>Laboratory</p> <ul style="list-style-type: none"> -Need to replace Coag analyzer and ABG analyzer
<p>Pharmacy</p> <ul style="list-style-type: none"> -Heparin drip order set has been updated. Nursing is utilizing titration functionality in CPSI. -Pharmacy updated pain medications to flag nursing for reassessing pain per the pain policy. 	<p>Pharmacy</p> <ul style="list-style-type: none"> -IV Cleanroom was inspected in November. There is repair needed on the IV hood. We also need to install ports above the HEPA filter to aid in testing the filter. Parts have been ordered and maintenance will install. -Reviewing thrombolytic screening tools and orders for TNKase for Pulmonary Embolism. -Working with Nanci Richardson on update the DKA orders so they can be put in electronically. 	<p>Pharmacy</p> <ul style="list-style-type: none"> -We have an extension on DSCSA compliance due to pharmacy size - continue to monitor requirements to ensure we are in compliance when required.
<p>Respiratory</p> <ul style="list-style-type: none"> -We have ordered two new batteries for the V60 machines 	<p>Respiratory</p> <ul style="list-style-type: none"> -Will be looking into getting new ABG machine in 2025 as the current one is 6 years old and did not pass the last 	<p>Respiratory</p> <ul style="list-style-type: none"> -2 GE EKG machines are at end of life.

<p>-We have discontinued the use of Simple Masks. We have moved forward with Oxymasks. These masks allow flow from 1-15L of O2. This will help staff to provide great care and increase patient safety as well as help financially – we will not be changing supplies as often. -Continue to work on survey readiness.</p>	<p>Proficiency Testing. Will test again in January. Lab will be taking over management of the new machine. -We are in need of six batteries for the PB 980 vents. -Continue to work with ER, Eagle med, and the Foundation on the pediatric ventilator project. -We are looking to replace Treadmill system for stress tests. The Foundation may be interested in purchasing the treadmill portion of the unit.</p>	<p>-Checking on Difficult Intubation course for staff. Course is only offered in May of each year. -Questions surrounding a possible negative air-flow treatment room as well as where RT and Stress Testing will be located during and after the ER renovation. -Would like to open a part-time position. -Limited on space to bring in additional therapist for Pulmonary Rehab.</p>
<p style="text-align: center;">Rehab Services</p> <p>- New full-time physical therapy assistant Cody Barnes starts December 2nd. We are excited to add him to the rehab team. He has experience in both IP & OP, as well as inpatient rehab. He has multiple certifications; concussion rehab, vestibular, and balance. He has experience in massage therapy as well. -Oct. OP Stats: PT – 1742 units OT – 239 units ST – 14 units -Pct. IP & SSB Stats: PT – 337 tx OT – 214 tx ST 15 tx</p>	<p style="text-align: center;">Rehab Services</p> <p>- Recurrent water leak in PT treatment room. Maintenance is attempting to contact roofing company; roof is under warranty. -Need for increased OT staffing to cover increase SB patients and increase OP referrals -Updating how notes are entered into CPSI for ease of access for physicians and nursing -Reviewing process for obtaining/clarifying prior authorizations</p>	<p style="text-align: center;">Rehab Services</p> <p>- Wall of clean utility has extensive water damage (old); maintenance reports the entire wall needs replaced. This project will have to be contracted out. Maintenance provided a temporary/cosmetic fix.</p>
<p style="text-align: center;">Radiology</p> <p>-Exam count for screening CT for lung cancer: 60 in 2023, currently at 69 exams YTD for 2024</p>	<p style="text-align: center;">Radiology</p> <p>-Currently hiring for a sonographer – have updated the job description to hopefully attract more candidates</p>	<p style="text-align: center;">Radiology</p> <p>-Will look into marketing of radiology services</p>

	-Deb, Radiology Director, will be retiring on 12/16/24 – have held interviews for this position	-Update/refresh to exams rooms – look to paint some rooms in 2025
<p style="text-align: center;">Cardiovascular Cath Lab</p> <p>-2022 patients: 217 procedures: 258 -2023 patients: 317 procedures: 481 TEEs: 51 -2024 patients: 267 (11/21/24) procedures: 478 (11/21/24) -As of 11/2024: **have inserted 2 AVEIR leadless dual chamber pacemakers **have used Shockwave on 5 patients successfully **5 STEMIs this year</p>	<p style="text-align: center;">Cardiovascular Cath Lab</p> <p>-Working on adding a new procedure for hypertension (renal denervation). Planning to move forward with this service. -Looking into another new procedure for PAD.</p>	<p style="text-align: center;">Cardiovascular Cath Lab</p> <p>-ACIST – budget prohibited -Omnicell – budget prohibited -CA Scoring for CT – budget prohibited</p>
<p style="text-align: center;">Cardiac Rehab</p> <p>-Busy – booked out until the 3rd week of December **Phase 2 – 20 patients **Phase 4 – 35 patients -2 new pieces of equipment through the Snyder Foundation – a NuStep recumbent bike and a NuStep cross trainer should be arriving before the new year.</p>	<p style="text-align: center;">Cardiac Rehab</p> <p>-PACE quality project – increase Phase 2 participants completion of the program (36 sessions) by 10% - currently collecting data. -Working on budget for FY 2025</p>	<p style="text-align: center;">Cardiac Rehab</p>
<p style="text-align: center;">Education</p> <p>-Currently have Butler nursing students on campus Wednesdays. -Southwestern College nursing program was approved by KSBN and accreditation was obtained. The first cohort will start in the fall of 2025.</p>	<p style="text-align: center;">Education</p> <p>-Tracking of student on WN campus has improved through use of spreadsheet -Continue to work on the SIM lab. Beds have ben donated by SCKMC, audio/visual equipment is being installed. Plan to have available for the spring 2025 class for BCCC.</p>	<p style="text-align: center;">Education</p>



MEMORANDUM

DATE: December 5th, 2024

TO: WNH Board of Trustees

FROM: Micah Norris, Chief Support Officer

SUBJECT: Overview of Support Departmental Operations

Support Service Department Stoplight Report:

The following Stoplight Report summarizes important updates and progress in the listed departments.

Respectfully Submitted,
Micah Norris, MBA
Chief Support Officer

STOPLIGHT REPORT

Name: Micah Norris Title: Chief Support Officer	Date: 12/5/2024
--	------------------------

GREEN/COMPLETE	YELLOW/WORK IN PROGRESS	RED/CAN'T COMPLETE AT THIS TIME AND HERE'S WHY
<p style="text-align: center;">IT</p> <ul style="list-style-type: none"> VPN Issues: Addressed and fixed VPN problems for Quest Diagnostics and Heartland Pathology interfaces. Lab Printer: Installed a new label printer in the lab. Surgery Endo Cart: Replaced expensive Sony printers with more cost-effective HP models on Endo carts. PCs: Replaced several PCs and configured new devices for the new APRN at Hillside. 	<p style="text-align: center;">IT</p> <ul style="list-style-type: none"> PC Assessment: Ongoing evaluation of outdated computers impacting workflow across departments. Sim Lab: Working with Butler/Southwestern College on the upcoming Sim Lab deployment. MDR Quotes: Gathering quotes for a new MDR solution to replace AppRiver/Vipre. Quest & Heartland Pathology Interfaces: Coordinating with Quest Diagnostics and Heartland Pathology for interface integration. Office 365: Preparing quotes for migrating from on-prem Exchange to Office 365, with a deadline of October 2025. NSGP Grant: Identified a new NSGP grant opportunity and planning to submit an application for \$150k in cybersecurity funding. 	<p style="text-align: center;">IT</p> <ul style="list-style-type: none"> Phone System: Upgrading the phone system, contingent on budget and potential grant funding. Campus Security: Recognizing the rising need for security cameras, though a full rollout is currently cost-prohibitive.
<p style="text-align: center;">Sterile Processing</p> <ul style="list-style-type: none"> Sterilizer: Secured an updated service agreement with STERIS. 	<p style="text-align: center;">Sterile Processing</p> <ul style="list-style-type: none"> Inventory: Preparing for the end-of-year inventory process. 	<p style="text-align: center;">Sterile Processing</p>

	<ul style="list-style-type: none"> • Budget: Preparing for upcoming budget meetings. • Instrument Truck: Preparing the 2025 calendar for instrument truck scheduling. 	
<p style="text-align: center;">EP/Safety</p> <ul style="list-style-type: none"> • Lighting Failure: Coordinated between Maintenance and Radiology regarding the emergency lighting failure in the MRI area. Battery replacement is on order to resolve the issue. • EP Committee: Attended the Local Emergency Planning Committee meeting, followed by the Integrated Preparedness Planning Workshop on 11/15. • Safety Committee: Safety Committee meetings are now scheduled for the 2nd Thursday of every even-numbered month. 	<p style="text-align: center;">EP/Safety</p> <ul style="list-style-type: none"> • Window Film: Selected window film for the 2nd floor. Presentation to be made at the upcoming Safety Committee meeting. • Severe Weather: Expanded the Severe Weather Annex beyond tornadoes and thunderstorms; currently in the drafting stage. 	<p style="text-align: center;">EP/Safety</p> <ul style="list-style-type: none"> • Mental Health Plan: Revisions to the Mental Health Plan are delayed due to a system error in PolicyTech.
<p style="text-align: center;">Dietary</p> <ul style="list-style-type: none"> • Dietitian: Transitioned from part-time to PRN status for the dietitian. 	<p style="text-align: center;">Dietary</p> <ul style="list-style-type: none"> • Education: Providing training to nursing staff on special diets and food intake charting procedures. • Food Temp Tracking: Monitoring food temperature data for the PACE report. • Food Fair and Healthy Alternatives: Collaborating with Ben E. Keith to organize a food fair for employees and expand healthy alternatives in the café. • Budget: Preparing for the upcoming budget meeting. 	<p style="text-align: center;">Dietary</p> <ul style="list-style-type: none"> • Fire Doors: New kitchen fire doors are awaiting approval. • Food Cart: Replacement of the food cart with one featuring doors is also pending approval.

<p style="text-align: center;">Environmental Services</p> <ul style="list-style-type: none"> • Budget: Completed budget meetings for 2025. • Carpet Cleaner: Purchased a new carpet cleaner and have begun addressing outstanding tickets. • Testing: All employee testing has been successfully completed. 	<p style="text-align: center;">Environmental Services</p> <ul style="list-style-type: none"> • Linens: Acquiring quotes for a new linen provider to enhance service quality. • Training: Training a new hire to assist with C-Section rooms in the surgery department. • Sunday Staffing: Developing a new on-call schedule to add additional support on Sundays during high-census days. 	<p style="text-align: center;">Environmental Services</p>
<p style="text-align: center;">Materials Management</p> <ul style="list-style-type: none"> • IV Allocation: Increased IV allocations with Medline to meet demand. 	<p style="text-align: center;">Materials Management</p> <ul style="list-style-type: none"> • Item Allocation: Collaborating with Medline to adjust allocations for other high-use items. • Policy Update: Working with EP, Nursing, and Pharmacy to update the allocation and rationing policy for critical supplies during shortages. • End-of-Year Inventory: Preparing staff for end-of-year inventory, with a tentative date of 12/20. 	<p style="text-align: center;">Materials Management</p>
<p style="text-align: center;">Plant Operations</p> <ul style="list-style-type: none"> • Boilers: Completed balancing of Boiler 1 to ensure optimal performance. • Budget: Finalized and submitted the maintenance budget for 2025. • Chiller Bids: Collected and reviewed bids for the replacement of the lead chiller. • ICU AC Coil: Successfully installed the new AC coil in the ICU. 	<p style="text-align: center;">Plant Operations</p> <ul style="list-style-type: none"> • Fuel Gas Repairs: Identified issues during the annual test (a CMS requirement) that prevent the boilers from operating on diesel fuel. Ongoing repairs are needed. • Sim Lab: Coordinating efforts on the simulation lab project in the WHC basement. • Heating/Cooling Roadmap: Gathering quotes to evaluate and develop a comprehensive heating 	<p style="text-align: center;">Plant Operations</p> <ul style="list-style-type: none"> • Pavilion Roof: Project on hold due to funding shortages. • Boiler Retubing/Replacement: Pending budget approval for necessary repairs or replacement. • Fan Coils: Replacement of several faulty units is contingent on budget approval.

<ul style="list-style-type: none"> Compressor Replacement: Replaced the AC compressor in the Quincy unit to restore proper airflow in the building's HVAC system. 	<p>and cooling strategy for the hospital.</p> <ul style="list-style-type: none"> Winter Weather Plan: Developed a plan to switch from sand to salt for hospital parking lot treatment. Awaiting approval to proceed with equipment orders. Chiller Bid Review: Currently reviewing and evaluating bids for chiller replacement. Front Grate Replacement: Working on replacing metal grates at the hospital's main entrance for improved safety and functionality. Ambulance Bay Door: Evaluating damage to the Ambulance Bay door and obtaining repair quotes for Eagle Med. 	
--	--	--



MEMORANDUM

DATE: November 26, 2024

TO: WNH Board of Trustees

FROM: Tiffany Shinneman, Director of Human Resources

SUBJECT: Overview of Human Resources, Employee and Occupational Health Services, and Workers Compensation

Human Resources Stoplight Report

The following Stoplight Report summarizes important updates and progress of Human Resources departments.

Respectfully Submitted,
Tiffany Shinneman
Director of Human Resources

STOPLIGHT REPORT

Note: The Stoplight Report is a way to communicate in writing how the ideas/concerns harvested in rounding are dealt with. It is excellent to post on communication boards. Green Light items are things that have been addressed and are complete. Yellow Light items are things in progress. Red Light items are those issues or ideas that cannot be done including the reason why.

Name: Tiffany Shinneman Title: Director of Human Resources	Date: 11/26/2024
---	-------------------------

GREEN/COMPLETE	YELLOW/WORK IN PROGRESS	RED/CAN'T COMPLETE AT THIS TIME AND HERE'S WHY
<p style="text-align: center;">Human Resources</p> <ul style="list-style-type: none"> • 2024 Turnover: 29.1% • 2024 w/o PRN Turnover: 20.7% • 2024 Headcount: 367 • Average Tenure: 5.8 • 2024 Growth Rate: 4% • 2024 New Hires: 116 <p>KPERS 2022 & 2023 audit completed. Two minor deficiencies were found due to the dates when payroll cycles fell.</p> <p>Leadership training on how to review application/resumes completed. Leaders have also been provided a copy of Studer based interview questions to utilize when creating their department specific interview questions. The goal of this training is to reduce turnover within an employee's first year of employment by making the "right" hire.</p> <p>Annual Retention survey completed. Received 33% response rate.</p> <p>Compiling data from the annual retention survey to put into a stoplight report for staff. To be completed by 7/12. Sent out to staff via Exchange on 7/25.</p>	<p style="text-align: center;">Human Resources</p> <p>2025 wage scale review and new longevity compensation proposal.</p> <p>Updating the employee handbook.</p> <p>Review all job description and orientation guides to turn into evaluation guides for 2024. Working Conditions section of all job descriptions are being updated and disbursed for staff signatures as completed.</p> <p>Following is a recruitment list of open positions within our facility and clinics.</p> <p>Leadership</p> <ul style="list-style-type: none"> • Chief Operating Officer • RHC Manager (permanent) • Diagnostic Imaging Director • EH/OH Nurse Coordinator • Patient Financial Services Director <p>Nursing Services</p> <ul style="list-style-type: none"> • RFT L&D RN • RFT 2E RN • RFT Telemetry Tech • RFT ER RN <p>Ancillary Services</p> <ul style="list-style-type: none"> • RFT MT/MLT/MLS (x2) • Sonographer/Echo Tech (x2) • RPT Radiology Tech 	<p style="text-align: center;">Human Resources</p>

<p>2022 insurance claims have been paid. Any outstanding claims will be paid on an as-needed basis. 7/1</p>	<p>Support Staff</p> <ul style="list-style-type: none"> • EVS Specialist – Dexter • PAR – Clinic Billing • Registrar/PBX Operator <p>Clinics</p> <ul style="list-style-type: none"> • OB/GYN Physician • Medical Assistant – Moline & Cedar Vale • Medical Assistant – HPW • Medical Asst/Phleb – HPW • RPT APP/PA – Sedan • RFT APP/PA – Cedar Vale 	
<p style="text-align: center;">Occupational Health</p>	<p style="text-align: center;">Occupational Health</p> <p>Cowley County is wanting to renew our OHS agreement for the 2024-2025 year. Currently waiting on signatures.</p>	<p style="text-align: center;">Occupational Health</p>
<p style="text-align: center;">Employee Health</p> <p>Overall EH has been consistently busy with new hires, October currently holds the record at 17.</p> <p>TB screenings are up to date.</p> <p>Body Mechanics in-service for EVS was completed. 4/25</p> <p>Flu shot clinics completed. As of 11/25 270 employee flu shots have been given.</p>	<p style="text-align: center;">Employee Health</p>	<p style="text-align: center;">Employee Health</p>
<p style="text-align: center;">Workers Compensation</p> <p>Workers comp audit was completed and submit to KHA.</p> <p>Previously discussed potential claim is no longer of high concern and should not result in any legal action.</p> <p>Claim that was under review for pre-existing condition was denied.</p>	<p style="text-align: center;">Workers Compensation</p> <p>Currently have three outstanding claims.</p>	<p style="text-align: center;">Workers Compensation</p>

William Newton Hospital



www.wnhcares.org