



Stoughton Health

Governing Board Meeting
March 22, 2023

Agenda

Wednesday, March
22, 2023

Call to Order

New/Old Business

SSM Updates

Committee Updates

Administration Team Updates

Chief of Staff Report

Adjournment

Governing Board Meeting Minutes



**MEETING
MINUTES**

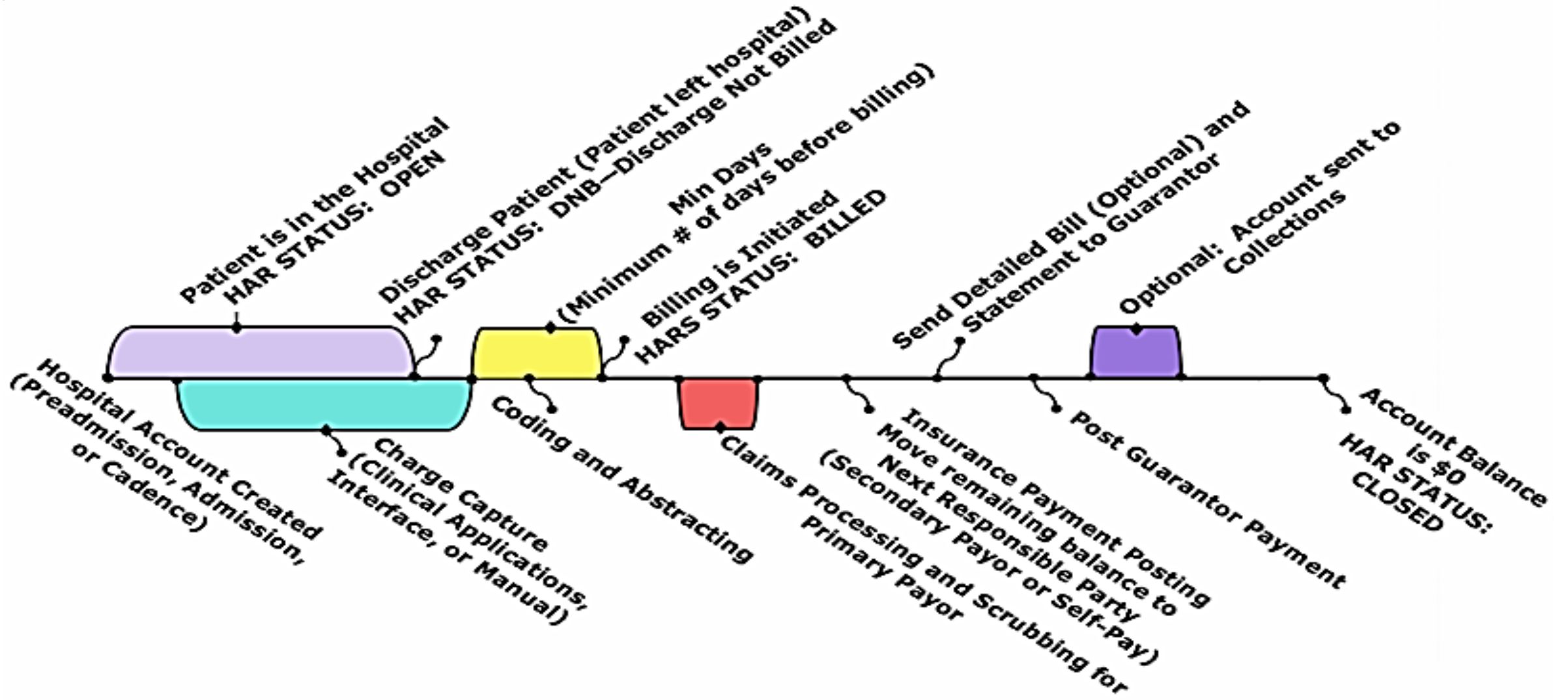
Request Motion to Approve January 25, 2023 Governing Board Meeting Minutes

Board Education

(Michelle Abey)

- HOSPITAL REIMBURSEMENT 101

Revenue Cycle Overview



Hospital Reimbursement 101

- ▶ **Revenue Cycle - Key Terms**
- ▶ HAR – Hospital Account Record (an EPIC term) meaning the individual service/visit a patient is here for
 - Hospitals are generally different than clinics because each service (i.e. visit) is given a separate account
 - Each adult patient (and any children or dependents) does have his/her own guarantor account number
- ▶ DNB – Discharged Not Billed
 - Waiting for charges to be put on
 - Coding
- ▶ Claims Processing
 - Two different type of claim forms – UB04 (facility fees) and CMS 1500 (professional fees)
 - Clearinghouse is used - EfficientC by OS, Inc.
- ▶ Insurance Processes
 - Receive Explanation of Payment (EOP)/Explanation of Benefit (EOB)
- ▶ Collections
 - Collection Agency – Professional Collectors Corporation (formerly Associated Collectors) - Janesville

Charges!

How Do They Get Into the System???

- Automatically – Room & Bed Charges
- Upon Action by a Clinician – Medications, Medical Imaging
- Charge Capture – someone has to remember
- Batch Entry

3RD Party Payment Protocols

Contract terms determine payment

- Lesser of charges or contract amount, subject to usual & customary
 - Contracts are of varying lengths

Hospital vs. Physician contracting

Example of Lesser of Charges or Contract Amount	Amount
Billed Charges – Inpatient Charges	\$12,067
DRG Reimbursement	\$12,404
Reimbursement	\$12,067
Lost Reimbursement	(\$337)

3RD Party Payment Protocols

Types of payments:

- Discounted fee for service (FFS)
- Diagnosis related group (DRG)
- Per diem
- Fee schedules

3RD Party Payment Protocols

Inpatient Example

Inpatient Example – DRG 872 – Septicemia or Severe Sepsis

Inpatient Example	Discounted Fee For Service (Anthem Blue Cross Blue Shield)	Diagnosis Related Group (Dean Health Plan)	Per Diem (Medicare)
# of nights	2	2	2
Total Charges	\$12,067	\$12,067	\$12,067
	86% of charges	DRG weight of 1.028 times case rate for payer (\$12,178)	Current per diem rate of \$3,133 per night*
Reimbursement	\$10,378	\$12,067	\$6,266

3RD Party Payment Protocols

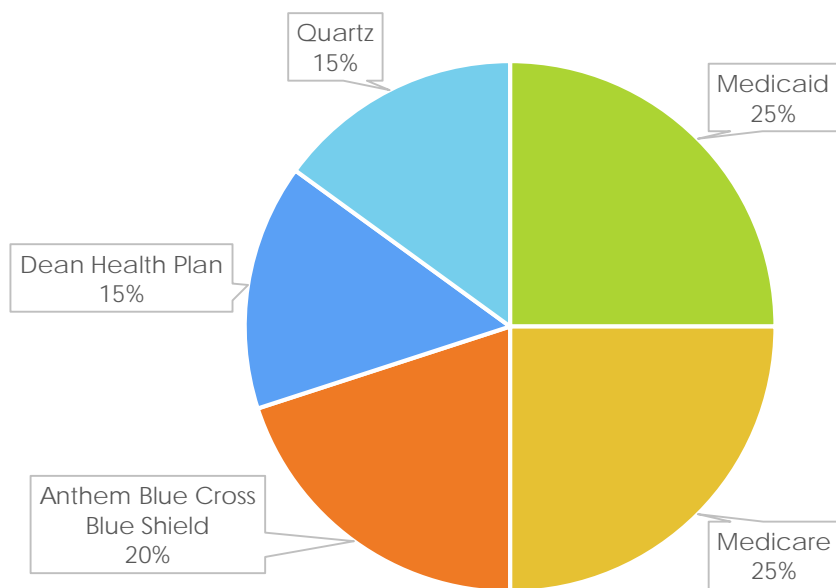
Urgent Care Example

Office Visit – Established Patient Level III – CPT 99213

	Medicaid – Traditional	Medicare	Anthem – Blue Cross Blue Shield	Dean Health Plan	Quartz
Gross Charge	\$374.14	\$374.14	\$374.14	\$374.14	\$374.14
	Fee Schedule	Fee Schedule	Fee Schedule	% of Charges	% of Charges
Reimbursement	\$28.91	\$73.93	\$98.42	\$125.29	\$201.78

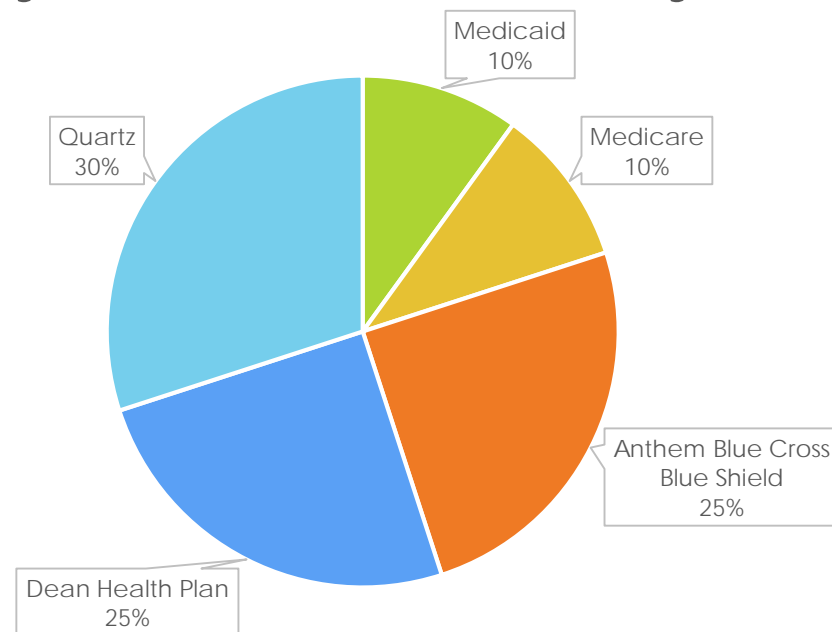
100 McFarland UC Visits Comparison

Reimbursement - 50% Gov't Payers/50% Commercial Payers



Reimbursement = \$9,445

Reimbursement - 20% Gov't Payers/80% Commercial Payers



Reimbursement = \$12,675

34% ↑

PATIENTS & TRANSPARENCY

▶ Tools Available for Consumers

- Estimates - Pricing Transparency Requirements – No Surprises Act!
- WHA PricePoint
- PARA Estimator Widget on SH Website
- Machine Readable Formatted Chargemaster on SH Website

New Business

(Amy Hermes)

- CAPITAL REQUEST, PANIC ALARMS
AND RAULAND RESPONDER 5
LOCATOR BADGES

Capital Request/Approval

Panic Alarms/Rauland Responder 5 Locator Badges:

- ▶ Workplace violence becoming increasing reality in healthcare settings.
- ▶ Number of occurrences related to behavior events with patients/visitors seen in almost all patient care areas.
- ▶ Recommend moving forward with unbudgeted purchase of Security Bundle not to exceed \$85,000 to be started in Q3.



Request Motion to Approve unbudgeted Capital not to exceed \$85,000 for purchase of Security Bundle in Q3

New Business

(Teresa Lindfors)

- ORTHOPEDIC BUSINESS PLAN PROPOSAL

The Why

- ▶ Increased needs given provider changes in our area
- ▶ Aging Baby Boomers
- ▶ Community Volume Growth
- ▶ Enhanced Ortho Coverage
 - ▶ Increased diversity in procedures
 - ▶ Decreased risk of solo provider
 - ▶ Decreased on call pay to independent providers
- ▶ Increase market share
- ▶ Financial benefits

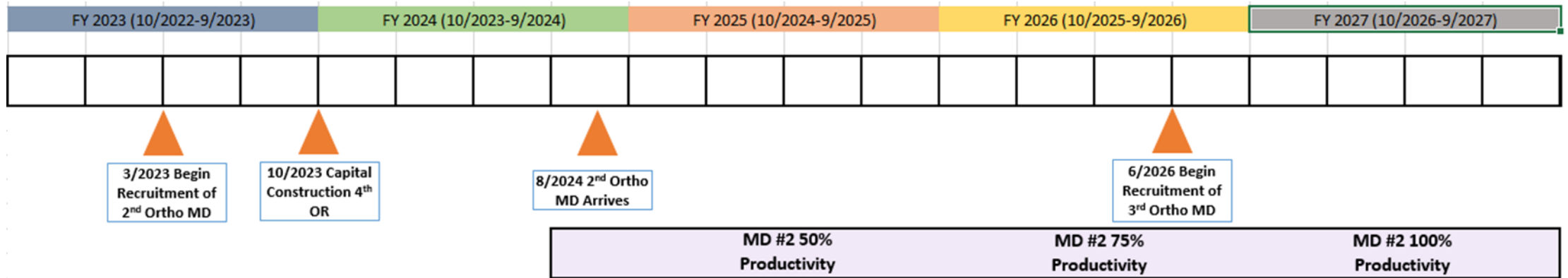
Orthopedic Service Line Business Plan

- ▶ Three Part Plan:
 - ▶ 1. Recruit additional orthopedic surgeon now

 - ▶ 2. Add 4th Operating Room to existing hospital campus (Fall, 2023)
 - ▶ Will need in future for Emergency cases & Inpatients

 - ▶ 3. Obtain robotics

Ortho Plan Timeline



Orthopedic Pro-Forma

Stoughton Hospital Association					
Orthopedic Pro-Forma					
	<u>FY 2021</u>	<u>FY 2022</u>	<u>Year 1</u>	<u>Year 2</u>	<u>Year 3</u>
Ortho Patient Service Revenue	\$4,429,817	\$5,344,886	\$8,788,215	\$10,944,559	\$12,071,492
Total Direct Operating Expenses	\$3,669,114	\$4,654,445	\$8,262,799	\$9,541,193	\$10,205,763
Operating Margin	\$760,702	\$690,442	\$525,416	\$1,493,366	\$1,865,730
Operating Margin %	17.17%	12.92%	5.98%	13.64%	15.46%

Financial Implications

- ▶ Recruitment & New Provider Staffing Costs Year 1
 - ▶ \$1,485,000
- ▶ 4th Operating Room & Staffing
 - ▶ \$2,200,000 Capital
 - ▶ \$500,000 OR Staff
- ▶ Robotics
 - ▶ TBD (Purchase or Lease)

Request for Approval

- ▶ 1. Begin recruiting for additional orthopedic surgeon now – Start by Late Summer, 2024
- ▶ 2. Add 4th Operating Room to existing hospital campus (Fall, 2023 to be completed by late summer, 2024)
- ▶ 3. Obtain robotics – Phase for later, timeline to be determined

****Request Motion to Approve the Orthopedic Business Plan Proposal as presented specifically the recruiting for and hiring of a second employed orthopedic surgeon***

****Request Motion to approve FY 2024 Capital Expenditure of \$2,200,000 to build a fourth operating room in the surgical services area of the hospital****

Old Business

(Amy Hermes)

- COVID UPDATES

COVID Updates

Public Health Emergency lifted May 11, 2023



Old Business

(Teresa Lindfors)

- MASTER FACILITY PLAN UPDATE

Master Facility Plan Update

- ▶ City Planning Commission Meeting Update
- ▶ Value Engineering in Process - \$25 million goal

SSM Update

(Margo Francisco /
Matt Kinsella)



- SSM WI AFFILIATE
EDUCATION/COMMUNICATION
PLAN



Update: Stoughton Health Board of Directors

March 2023

Meeting: Feb. 28, 2023
Issue: Expectations of Affiliation

Follow-up

- Margo met with SSM Health VPs of Ambulatory & Specialty Care to discuss issue
- Margo putting together a presentation about our Affiliate Hospital agreements and the “Expectations of Affiliation Partnership,” which includes:
 - - Dean/SSM philosophy is to keep care local when possible/feasible
 - Support use of local hospital – care delivery and ancillary services
 - Provide affiliate partners with preferential specialty coverage from Dean Clinic and PCP support.
 - DHP’s broad PCP network supports the local provision of care (including hospital services).
 - SSM ultimately bears the financial risk of DHP member costs
 - DHP provider network strategy and management – consistent with Dean/SSM vetting process
 - Key objectives – Triple Aim (satisfaction, quality and efficiency), volume-to-value transformation and ACO alignment
 - Affiliate partner hospitals generally participate with all payors/networks in the market
 - Affiliate partner hospitals generally desire to have DHP credential all specialists in the market
 - Feasibility of Dean Clinic specialty outreach is directly impacted by the saturation of same specialties in the market and an unlevel playing field regarding payor participation
 - Impact of health plans which exclude Dean/SSM providers on the SSM system and its ability to support the affiliate partners
 - -Participate in SSM’s value proposition, including providing the best quality healthcare at the lowest cost.



Follow-up

- Present to Medical Group Operations Council
- Present to Clinical Program leaders
- Incorporate into new clinic leader on-boarding process
- Check-in with Stoughton team quarterly to check on any issues



Committee Updates

- EXECUTIVE COMMITTEE
- FINANCE COMMITTEE
- QUALITY COMMITTEE
- GOVERNANCE COMMITTEE
- AUDIT COMPLIANCE/RISK MANAGEMENT COMMITTEE
- CEO EVALUATION/COMPENSATION COMMITTEE

Committee Updates

▶ Executive Committee

- ▶ Review February 22, 2023 Meeting Minutes
- ▶ Upcoming Meeting: Wednesday, April 26, 2023

▶ Finance Committee

- ▶ Upcoming Meeting: Friday, March 24, 2023

▶ Quality Committee

- ▶ Review QM Council Meeting Minutes
 - ▶ January 2023
 - ▶ February 2023
- ▶ Review QM Council Dashboards
 - ▶ Cohort B – January 2023
 - ▶ Cohort A – February 2023
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QM Council Meeting Minutes

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 - ▶ January 2023
 - ▶ February 2023

Cohort B QM Project Dashboard

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Dept	Owner	Indicator	Direction	2022 Quarterly Goal	Jan-23	Dec-22	Nov-22	Sep-22
Cardiac Rehab	Liz	Pulmonary Rehab Pilot	↗	1) 3 patients/ month (Dept) 2) Increase distance 40m/100ft for 6 min walk 3) 20 billable units per month of CPT 94625	1) 3 Pts in November 2) 2 patients in December 3) 13 units in November, 17 units in December		3 patients in November Patient KOM TBD Reimbursement KOM TBD	ND
Rehab	Liz	Shoulder Service	↗	1) 60% of surgical shoulder patients will be seen for pre-hab 2) 80% or more of post-op shoulder patients will see a detectable change of 13 points or more on the Shoulder Pain and Disability Index (SPADI)	1) 0% 2) not being tracked at this time		1) 0% 2) not being tracked at this time	1) 0% 2) ND at this time
CH&WC		Remote Therapeutic Monitoring (RTM)	↗	15 RTM units/quarter	12 RTM units (Oct-Dec 2022)			
		Health Risk Assessment (HRA) and Screening	↗	1 Community Screening and 1 Business screening per Quarter	TBD			
Surgical Services	Tracy	Decolonization for Total Joint Population	↗	100% Preop and Post OP Joint Population	100% PreOp and PostOp	ND	100% PreOp 86% Post Op	98% PreOp 70% Post Op
		Obtaining True OR Efficiency	↘	<45 minutes	47.6 minutes 40% of 15 patients had incision within	ND	44 minutes	43 minutes
Pharmacy	Pauline	Formulary Management	↘	1) By 3/31/2023, create a working formulary housed on the Intranet 2) By 7/31/2023, decrease the number of therapeutic duplications on formulary by 25 % 3) By 12/31/2023, decrease medication outdate value by 10%	1) 10% completed 2) TBD 3) outdates in December was \$3782.19	ND	1) In progress 2) TBD 3) outdates in October 2022 was \$5491.60	ND
		Tech Check Tech Program	↗	Full implementation by March 2023	3 out of 9 steps completed	ND	ND	ND
Specialty Clinic Wound Clinic Ortho Clinic CHWC	Ghadeer	Demand, Capacity and Access of the Multi-Specialty Clinics	↗	> 80% fill rate per day per provider	Gen Surg 53% Ortho SH 97% Ortho MSN 95% PA-J Ortho 100% C 98% 78% MD MD PA- Dr. Kaji	ND	Gen Surg 72% MD Ortho SH 97% MD Ortho MSN 93% PA-J Ortho 100% PA-C 96% Kaji 80% Dr.	Gen Surg 65% Ortho SH 89% Ortho MSN 93% PA-J Ortho 94% C 91% 78% MD MD PA Dr. Kaji
		No Stress" for Cardiology Diagnostic	↗	Average 30-35 patients per month	20	ND	ND	ND

Cohort B QM Project Dashboard (cont.)

EVS	Angie	Linen Project	⬇️	Reduce Bulk Linen orders to ≤ 1000 lbs per month	1198	1554	ND	ND
FNS	Dan Autumn	IDDSI - Dysphasia Diet	⬆️	Full implementation by March 2023	45% completed	In Progress	40% completed	In Progress
Material Services	Brian	Off Contract Purchase Reduction	⬆️	1) TBD 2) Review top 75% of break bulk changes from Aug-Dec	1) initial stages of implementation 2) 100%		1) initial stages of implementation 2) 100%	1) TBD 75.10% 2)
		Backorder Communication	⬆️	1) Implement communication processes for back orders from primary distributor (Owens and Minor) to all managers by 8/31/2022 2) Implement communication process to communicate backorder and out-of-stock in storeroom to departments by 9/30/2022	1) 100% 75% 2)		1) 100% 25% 2)	1) 90% 25% 2)
Accounting	Brian	UKG Kronos Implementation	⬆️	Go-live with new system by 06/30/2023	5% completed			
		Lease Accounting - Implementation of Accounting Standards Codification (ASC)	⬆️	Implement Lease Accounting Standard by 12/31/2022	40% completed		In progress	
Human Resources	Chris	Intranet Implementation	⬆️	1) Completion of Step 5 of 9 2) Full implementation completion of step 9 of 9	1) 100% completed to reach completion of step 5 50% completed to reach completion of step 9 2)		1) 20% completed to reach completion of Step 5 2) 11% completed to reach full implementation	ND
		New Hire Retention and Employee Engagement	⬇️	100% of department participation in Skip-level interviews by May 2023	0% Meeting cadence outline, interviews to start following communication of survey results in late January			
PR/Marketing	Laura	Promotional Items Storefront	⬆️	Full implementation by July 2023	10%			
		Increase Google Reviews	⬆️	50 Google Reviews for Dr. Schwaab by September 30, 2023	1	1	1	0

Cohort A QM Project Dashboard

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Owner	Direction	2021 Quarterly Goal	Jan-23	Dec-22	Nov-22	Oct-22	Sep-22
Heather	↗	95% face to face handoff at bedside	33%	ND	ND	ND	ND
Heather	↘	<60 minutes of admission or upon new identification of any communicable disease identified (Inpt) AND Zero SZP Events	61% compliant 4 SZP events	ND available 5 SZP events	ND available 3 SZP	ND available 4 SZP	ND available 4 SZP
Heather	↘	95% of all admission will be completed within 6 hours of admission	100%	100%	98%	86%	89%
Heather	↗	Increase average monthly inpatient survey response rate to > 60%	ND	36%	49%	27%	42%
Heather	↗	Full Implementation and 100% of NP testing	ND	ND	ND	ND	ND
Heather	↘	< 20 days for both AD and VD dx	No patients met criteria for AD and/or VD this month	AD = 27 days VD = 9 days	AD = 27 days VD = 0 days (no patient meeting criteria)	AD = 24 days VD = 18 days	No patients met criteria for AD or VD this month
Tina	↗	100%	98.3%	97.9%	98.0%	98.3%	97.5%
Tina	↗	>98%	68%	ND	ND	ND	ND
Tina	↗	>95%	100%	ND	ND	ND	ND

Cohort A QM Project Dashboard (cont.)

40

Eliminating Missed Add-On Lab Orders	Kyle	↘	0 occurrences were Add-on orders are missed or delayed > 30 min	3	ND	4	ND	2
Alinity: General and Immunochemistry Analyzer Replacement	Kyle	↗	Full implementation (25 steps to complete)	16 of 25 steps completed	ND	ND	ND	ND
Medical Imaging								
Radiology Exposure Indicator (EXI)	Sara	↗	> 90% of all studies (ranges include 50-200 for Chest X-Ray; 125-500 for everything else)	88%	89%	90%	ND	ND
MRI Decision Support Appropriateness	Sara	↗	>85% of MRI exams score as Marginal or Indicated	81%	ND	ND	ND	ND
Plant Operations								
Fire Alarms	Jason	↗	100%	Heat detectors 100% found and labeled Smoke Detectos 100% found and labeled Duct detectors 100% found and labeled Pull Stations 0/52	ND	Heat detectors 100% found and labeled Smoke Detectos 100% found and labeled Duct detectors 79/99 Pull Stations 0/52	On Hold	On Hold
Above Ceiling Inspections	Jason	↘	100%	ND	ND	ND	ND	ND
HIM								
Natriuretic Peptide Denials for Medical Necessity	Sarah	↘	Reduce the number of BNP (83880) denials not meeting medical necessity *Need to determine by how much*	1% as of December 2022	ND	8% as of Oct 31st	ND	ND
Claim Edits	Sarah	↘	Reduce claim edits by 20% (368 or less per month)	ND	413 claims needing edits	542 claims needing edits	427 claims needing edits	ND
PFS								
Contract Building in EPIC	Sarah	↗	Complete EPIC Build of All Contracted Insurance Payers	2 plans moved to production 21 are in process	ND	2 plans moved to production 21 are in process	ND	2 plans moved to production 13 in process 8 not started
Registration								
Increasing Front end Collections (co-leading with PFS)	Sarah	↗	>50%	66 % Oregon Rehab 66% Surgery 66% SWAC 75% Specialty Clinics	ND	73 % Oregon Rehab 50% Surgery 67% SWAC 41% Specialty Clinics	ND	73 % Oregon Rehab 55% Surgery 67% SWAC 44% Specialty Clinics
Epic Work Queue and Claim Edit Management	Sarah	↘	< 7.5 hours per week	15 hours	ND	ND	ND	ND
Growth								
ON HOLD due to Expansion Project	Teresa					ND	ND	ND
Sleep								
Sleep Tech Intern	Kyle	↗	1) Intern will begin doing own studies by 01/31/2023 2) Intern will obtain AASM certification by 05/2023	1) In progress: 350 of required 546 hours completed. All modules have been completed 2) In progress	ND	1) In progress: 140 of required 546 hours completed. 27 on line modules have been completed. 2) in progress	ND	ND
Home Sleep Study Scheduling Turn Around	Kyle	↘	TBD	ND	ND	ND	ND	ND

Committee Updates

▶ **Governance Committee**

- ▶ Canceled Meeting on Thursday, April 20, 2023 (By-laws review not needed this year)
- ▶ Upcoming Meeting: Thursday, July 20, 2023 (Board self-evaluation)

▶ **Audit Compliance/Risk Management Committee**

- ▶ Upcoming Meeting: Monday, June 19, 2023

▶ **CEO Evaluation/Compensation Committee**

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Administration Team Updates

- CEO SUMMARY REPORT
- CFO SUMMARY REPORT
- CHIEF STRATEGY AND BUSINESS DEVELOPMENT OFFICER SUMMARY REPORT
- CNO SUMMARY REPORT
- VP, HR, CAMPUS PLANNING, OPERATIONAL SUPPORT SERVICES SUMMARY REPORT
- DIRECTOR ENGAGEMENT AND EXPERIENCE SUMMARY REPORT
- FOUNDATION/MARKETING/PR/BUSINESS DEVELOPMENT DIRECTOR SUMMARY REPORT

CEO Summary Report (Dan DeGroot)

- Advocacy Day Reminder
- WHA CEO/Board Education
- Board Retreat Reminder/Speaker Content Ideas
- Feedback on Governing Board Portal

Advocacy Day Reminder



The graphic features a background image of the Wisconsin State Capitol building. At the top center is a blue circular icon with a white megaphone. To the right is the WHA logo, which includes the text 'WHA WISCONSIN HOSPITAL ASSOCIATION' and the tagline 'ADVOCATE. ADVANCE. LEAD.' in a blue box. The main title 'ADVOCACY DAY' is in large red letters, with the date 'April 19, 2023' and location 'Monona Terrace | Madison, WI' below it. On the left, the text 'KEYNOTE ANNOUNCED' is in large blue letters, followed by a horizontal line and the text 'A discussion moderated by WHA President and CEO Eric Borgerding'. At the bottom are two circular portraits: the left one is of Governor Jim Doyle and the right one is of Governor Tommy G. Thompson, both in blue circles.

WHA WISCONSIN
HOSPITAL
ASSOCIATION
ADVOCATE. ADVANCE. LEAD.

ADVOCACY DAY

April 19, 2023
Monona Terrace | Madison, WI

KEYNOTE ANNOUNCED

A discussion moderated by
WHA President and CEO Eric Borgerding

Governor Jim Doyle

Governor Tommy G. Thompson

WHA CEO/Board Education



CEO/Board Education Registrants:

- ▶ Dan DeGroot (in-person)
- ▶ Donna Olson (in-person)
- ▶ Tim Rusch (in-person)
- ▶ Dr. Ashish Rawal (virtual, waitlisted as in-person attendee)
- ▶ Glenn Kruser (virtual, waitlisted as in-person attendee)
- ▶ Tom Fendrick (virtual)

Agenda

[Event Home](#) | [Conference Information](#) | [Registration Information](#) | [Featured Presenters](#) |

Thursday, May 04

9:00 AM-9:15 AM	Introductions and Overview
9:15 AM-10:00 AM	Health Care Environment in Wisconsin - Update
	<i>Kyle O'Brien</i> Sr. VP of Government Relations, WHA
10:00 AM-11:00 AM	Fiduciary Duties: Oversight of Operations, Compliance, and Quality
11:00 AM-12:00 PM	Legal Risks and Protections for Hospital Board Members
12:00 PM-12:30 PM	Lunch (provided)
12:30 PM-1:30 PM	Working With Your CEO - Governance vs. Management
1:30 PM-2:30 PM	Oversight of Medical Staff Credentialing and Corrective Action
2:30 PM-3:00 PM	Recruiting New Board Members - Keeping Your Board On Its Toes
3:00 PM-3:00 PM	Adjourn

Board Retreat Reminder/Speaker Content Ideas

- ▶ September 27-29, 2023 at Grand Geneva Resort in Lake Geneva
- ▶ Speaker Content Ideas/Requests?

Feedback on Governing Board Portal

STOUGHTON HEALTH

Timekeeper Login My Tools My Resources Human Resources Excellence Together Leadership Resources

Welcome to the Stoughton Health Governing Board Portal!

Strategic Goals

Growth Service People Quality / Safety Finance

Excellence Together

MISSION: The mission of Stoughton Health is to provide safe, quality health care with exceptional personalized service.

VISION: We grow to meet the changing needs of the communities we serve and become their health partner of choice.

VALUES: Our patients and community are our number one priority. Employees are committed to providing Excellence Together through:
*Attitude *Accountability *Appearance *Communication *Teamwork *Service

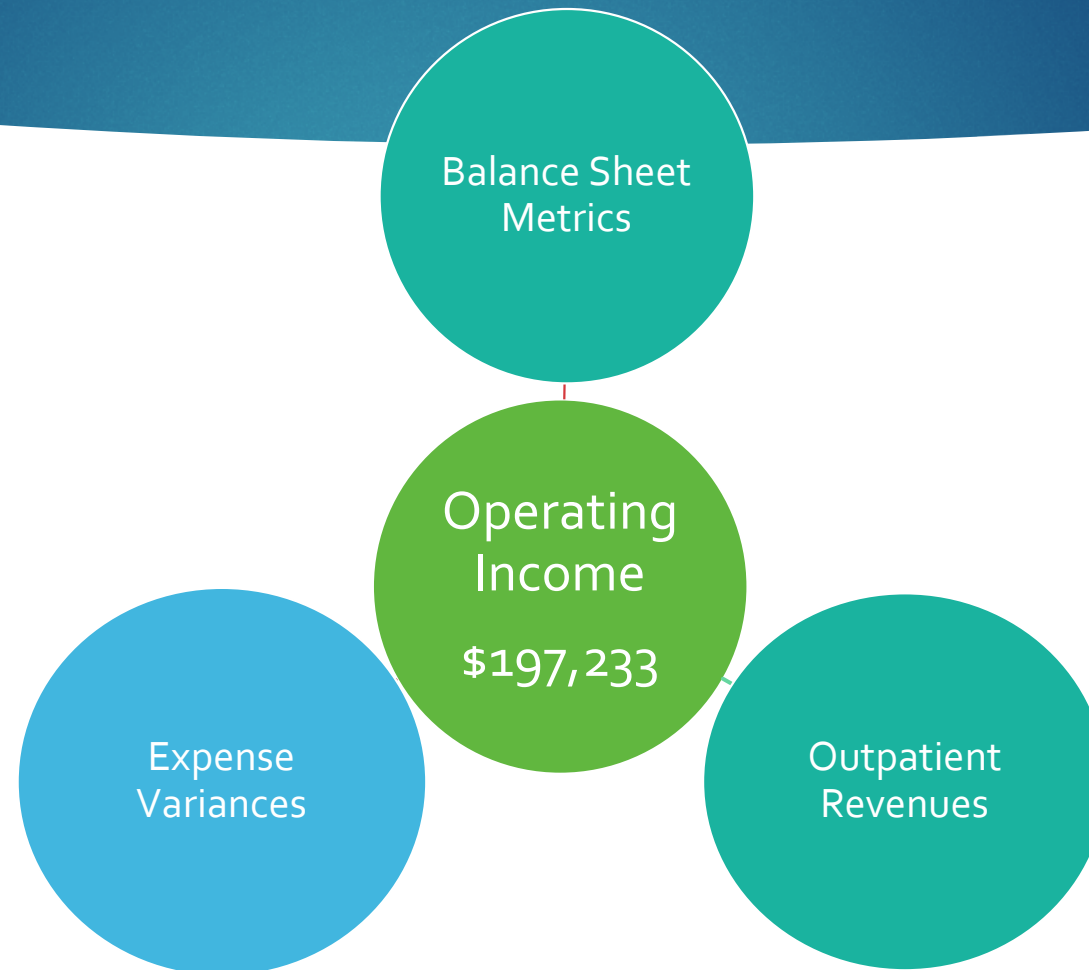
- C** Continuous Improvement of safety, quality and experience
- E** Efficiency: strive to make healthcare more affordable to provide and receive
- P** Partner with Payers and Providers
- P** Partner with People (Communities/Workforce)
- T** Utilize technology to maximize access, convenience and portals of entry to Stoughton Health

- Comments or feedback on the Governing Board portal?

CFO Summary Report (Michelle Abey)

- February Financial Statements

February Financial Statements



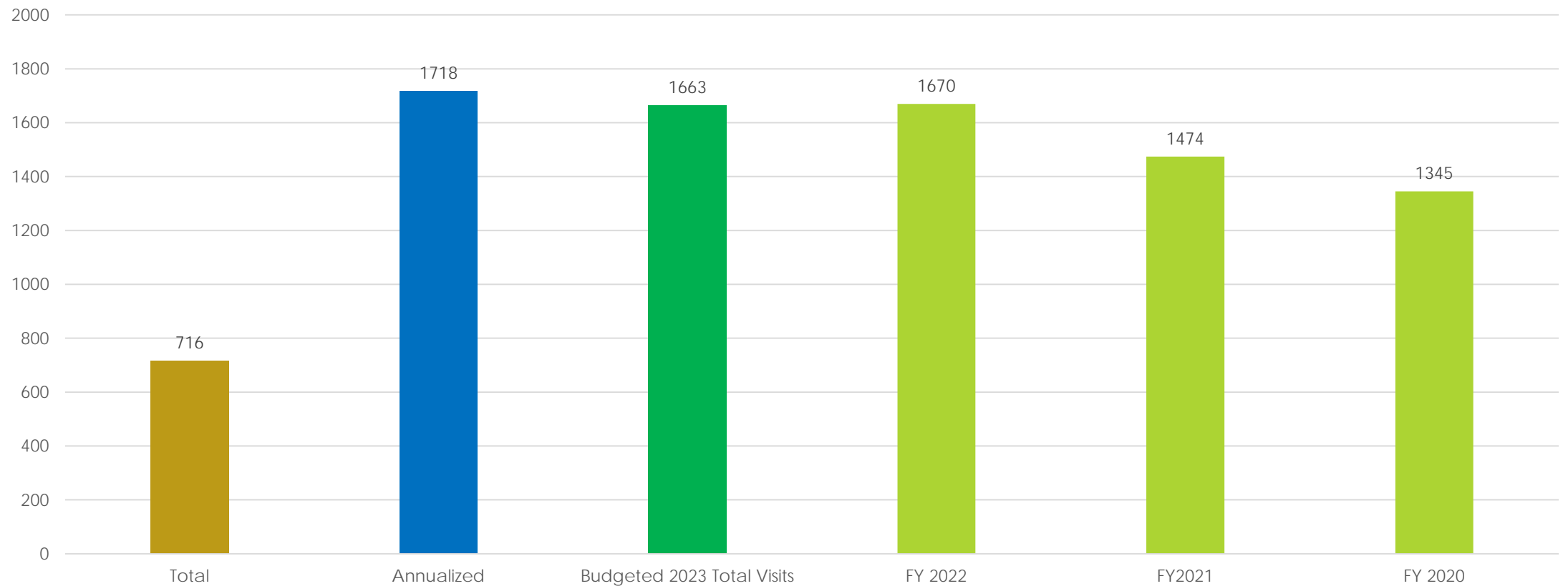
Request Motion to Approve February 2023 Financial Statements

Chief Strategy and
Business Development
Officer Summary
Report
(Teresa Lindfors)

- Growth Updates
 - Surgical Volume Trends

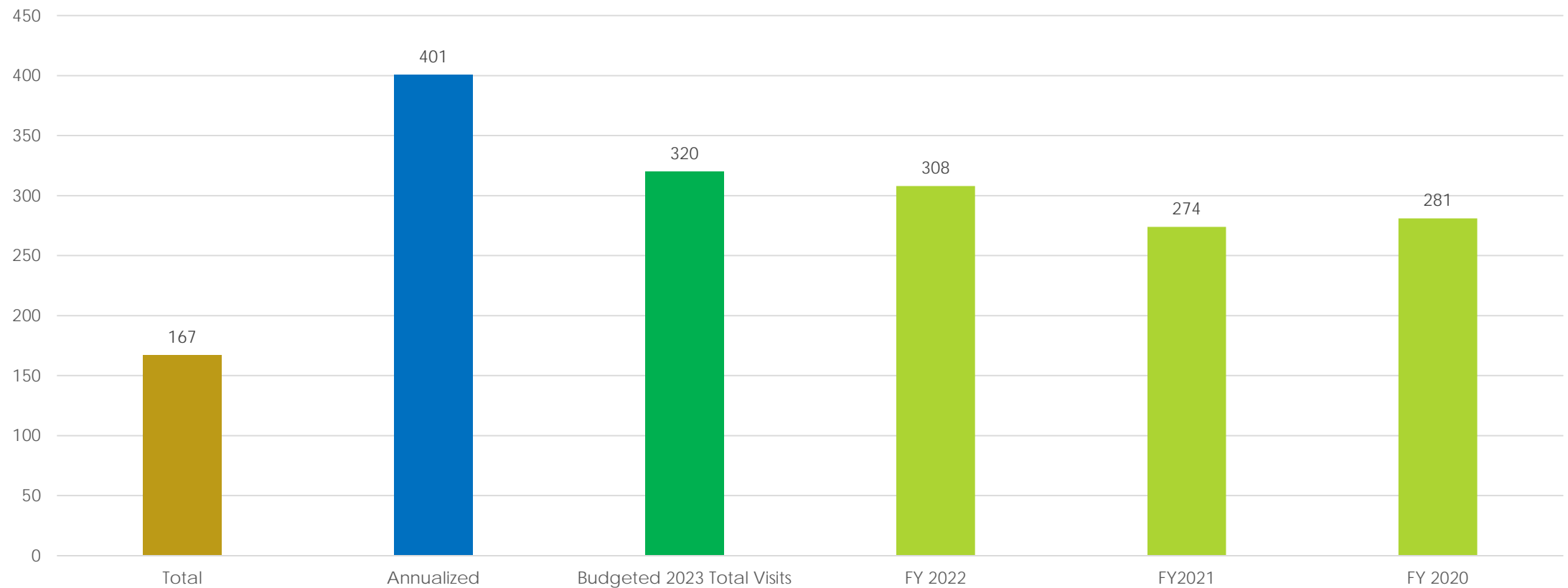
Overall Surgical Volume Trending

Total Operating Room Procedures



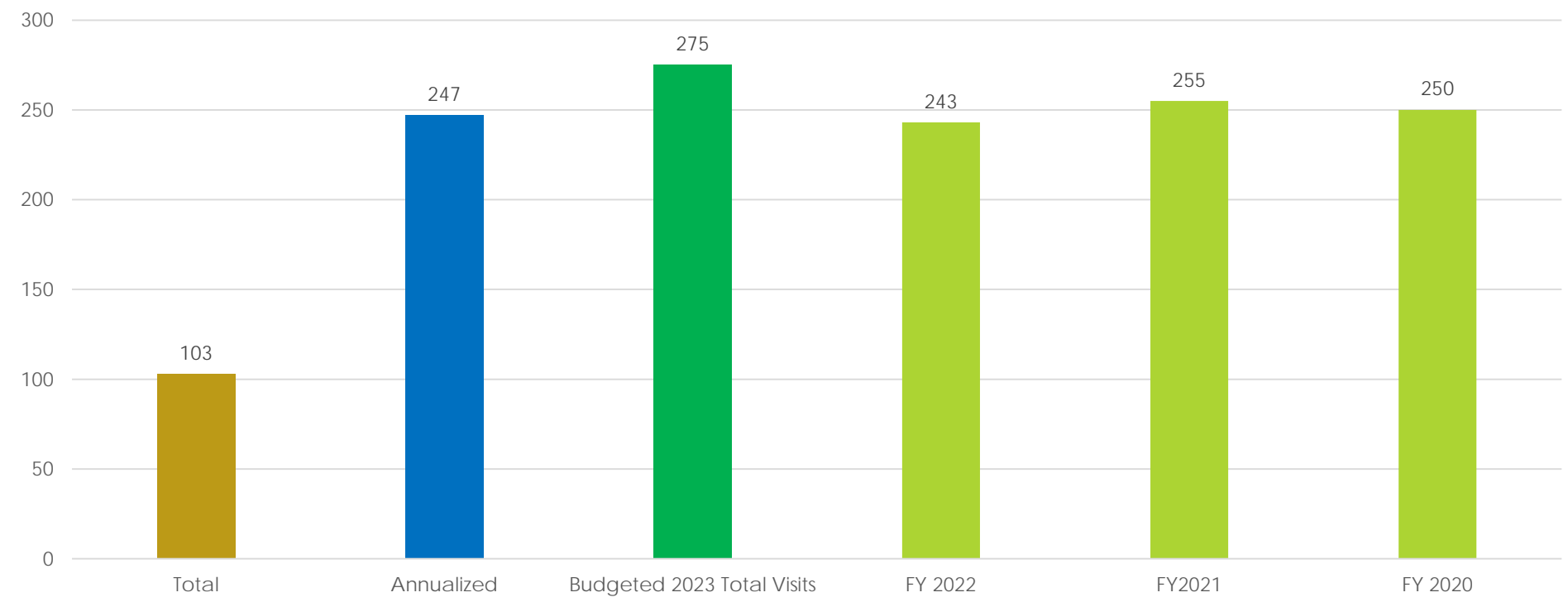
Orthopedic Surgical Volume Trends

Orthopedic Surgical Volume



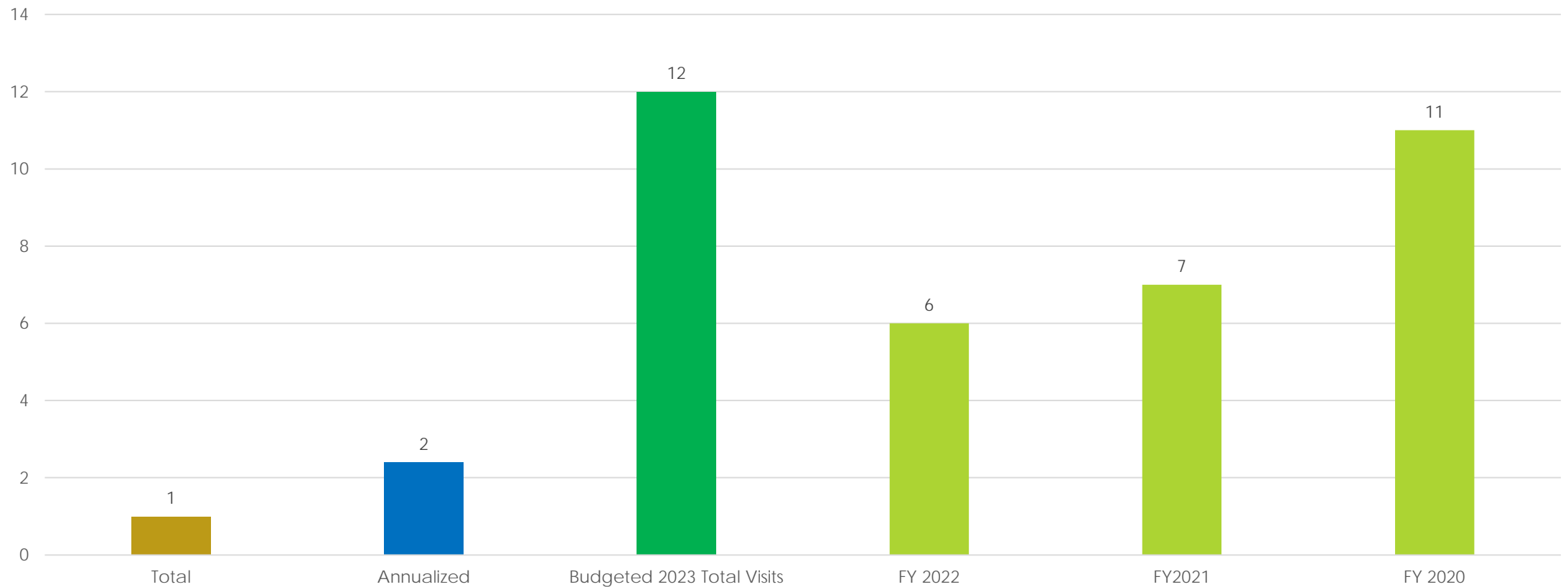
General Surgery Surgical Volume Trends

General Surgery Surgical Volume



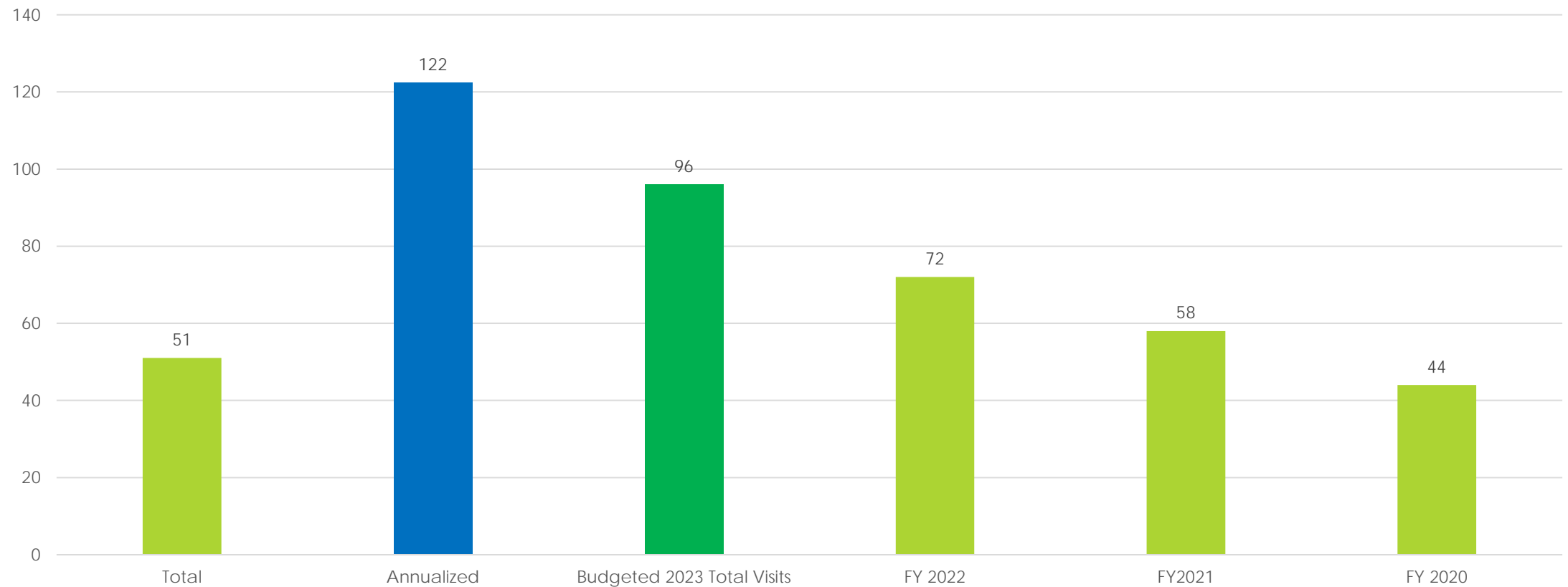
Urology Surgical Volume

Urology Surgical Volume



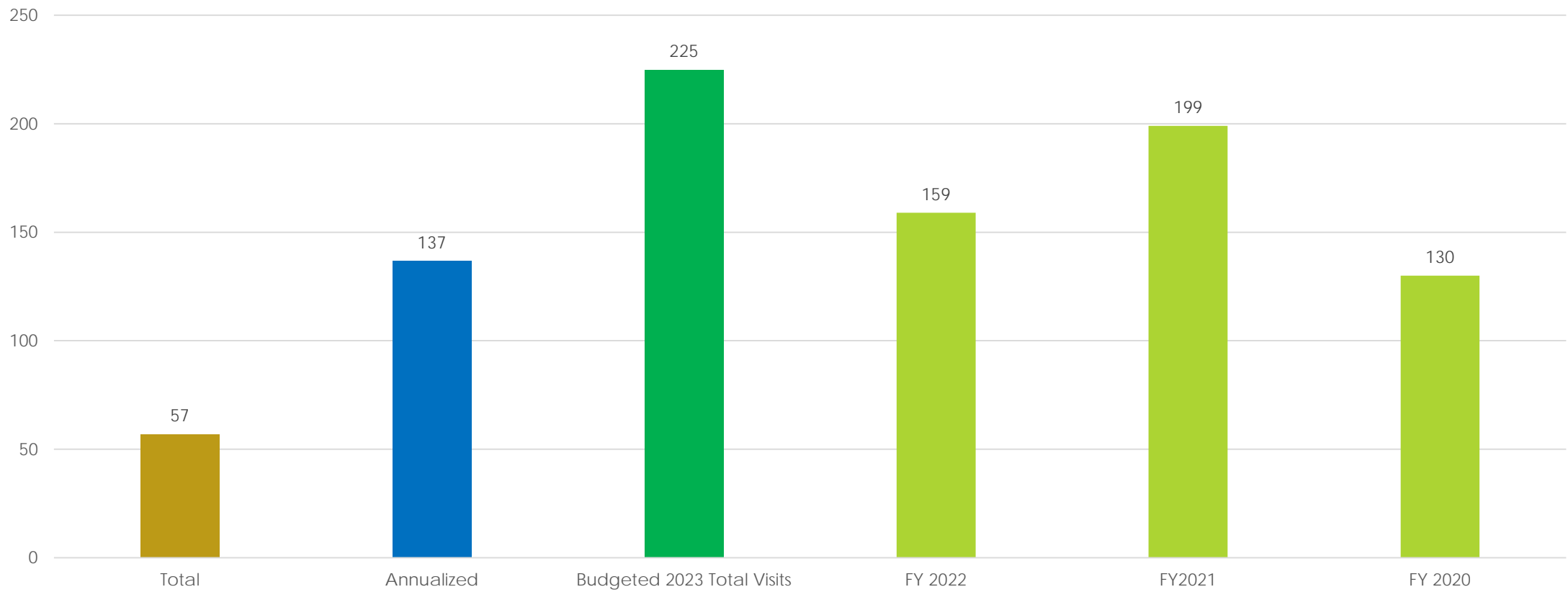
Podiatry Surgical Volumes

Podiatry Surgical Volume



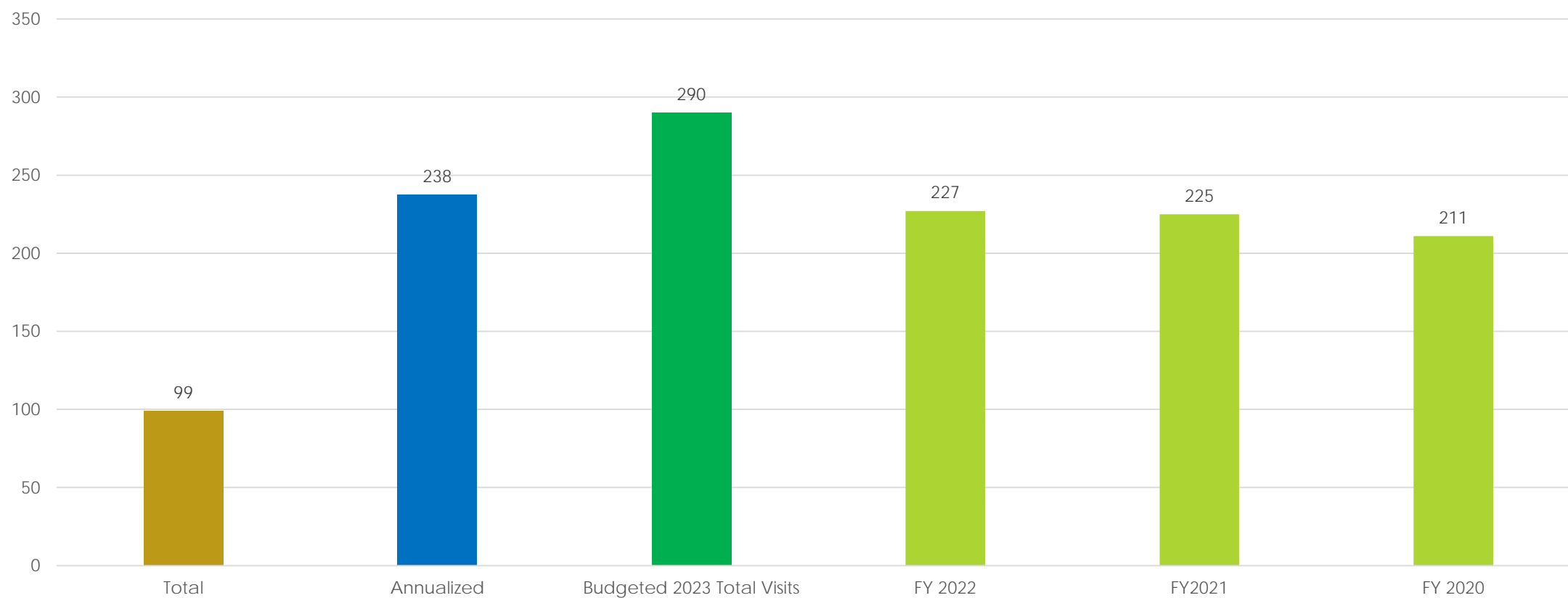
Dental Surgical Volumes

Dental Surgical Volume



Ophthalmology Surgical Volumes

Ophthalmology Surgical Volume



CNO Summary Report (Amy Hermes)

- MCE Meeting Minutes – February 2023
- MEC Meeting Minutes – March 2023
- 2022 Annual Performance Evaluation
Emergency Management (EM)
- Clinical Performance Assessments
- Quality/Safety Report Cards and
Balanced Score Card – Q1 FY2023
- Patient Safety Meeting Minutes – January
2023
- Infection Prevention Meeting Minutes –
January 2023

MCE Meeting Minutes – February 2023

▶ Dr. Schwaab

****Request Motion to Approve February 2023 MCE Meeting Minutes****

MEC Meeting Minutes – March 2023

▶ Dr. Schwaab

****Request Motion to Approve March 2023 MEC Meeting Minutes****

Emergency Management

- ▶ 2022 Annual Performance Evaluation Emergency Management (EM)

****Request Motion to Approve 2022 Annual Performance Evaluation Emergency Management (EM)****

Clinical Performance Assessments

- ▶ 2022 Clinical Contract Evaluations

****Request Motion to Approve 2022 Clinical Contract Evaluations****

Quality/Safety Report Card – Q1 FY2023

Quality Measures	Desired Direction	RWHC	National	GOAL	Oct-Dec 2022	Dec-22	Nov-22	Oct-22	Jul-Sep 2022	Sep-22	Aug-22	Jul-22	Apr-Jun 2022	Jun-22	May-22	Apr-22	Jan-Mar 2022
Global Immunization-Core Measure																	
Inpatient Influenza Vaccination Rate (Effective October-March only)	↗	73% Q1 2021	94% Q4 2019 Median	100%	97%	96%	98%	98%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	99%
Pain Management																	
Pain Assessment and Reassessment (Inpatient Only)	↗	n/a	n/a	> 90%	79%	86%	66%	73%	71%	71%	71%	70%	79%	87%	94%	50%	86%
Patient Flow Measures																	
Emergency Room to Admission (minutes) Core Measures																	
Decision to admit to transport to inpatient unit (median) - <i>previous project, continue to monitor</i>	↘	73	129	<RWHC	74	75	64	75	81	75	84	85	75	75	68	80	102
Emergency Room to Discharge (minutes) Core Measures																	
Length of stay in ER for patients discharged (median)-excl MH and TX	↘	119	150	<National	144	140	128	170	161	151	202	158	144	164	147	107	169
Median Time to EKG for Chest Pain and Acute MI (minutes) No longer publically reported - <i>continue to monitor to ensure process is hardwired</i>	↘	n/a	n/a	<10	5.5	3	6	7.5	9	7	35	9	6	10	0.5	5	0
WI																	
National																	
GOAL																	
Key Patient Information Communicated with ED Transfer (All EDTC) - <i>public reporting</i>	↗	74%	75%	>53%	80%	67%	87%	87%	89%	80%	87%	100%	91%	87%	87%	100%	87%
Columbia Suicide Screening completed in ED	↗	n/a	n/a	100%	98%	98%	98.0%	98.3%	97.2%	97.5%	96.8%	97.2%	98.2%	98.5%	98.6%	97.7%	98.0%

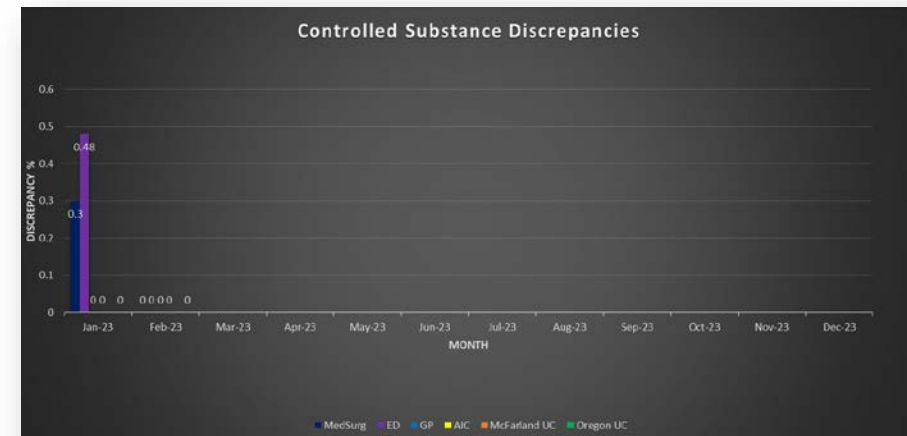
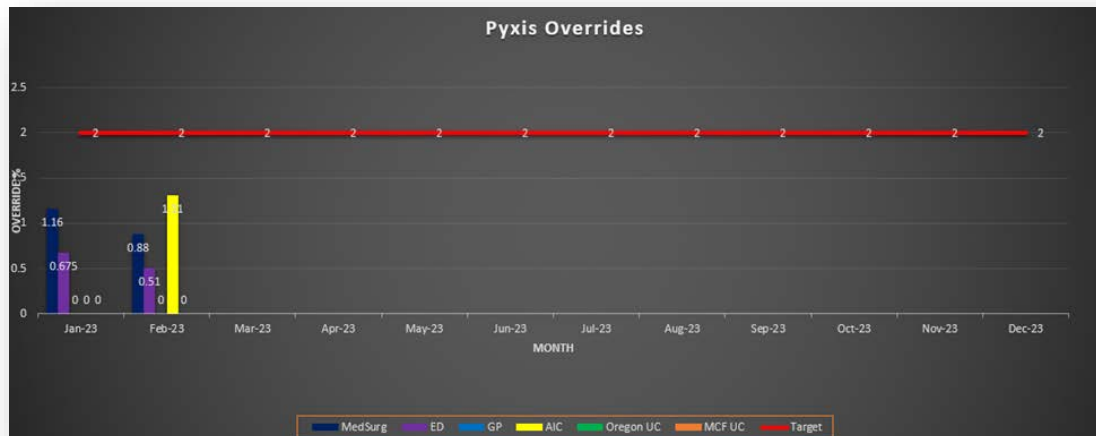
Quality/Safety Report Card – P4P Q1 FY2023

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Pay for Performance Measures	Desired Direction	GOAL	Oct-Dec 2022	Jul-Sep 2022	Apr-Jun 2022	Jan-Mar 2022	Oct-Dec 2021	Jul-Sep 2021	Apr-Jun 2021	Jan-Mar 2021
Quality (Dean Insurance and/or Medicaid) DHP										
<i>Reporting Period 10/01/2020 - 09/30/2021</i>										
Healthcare Personnel (HCP) Influenza Vaccination Rate	↗	98%	99%	NA	N/A	99%	99%	NA	NA	99%
Colon Surgical Site Infections (COLO)	↘	SIR ≤ .750		0%	0%	0%	0%	0%	0%	0%
7Total Abdominal Hysterectomy Surgical Site Infections (HYST)	↘	SIR ≤ .930	ND	ND	ND	ND	ND	ND	ND	ND
Central Line-associated bloodstream infections (CLABSI)	↘	SIR ≤ .570		0%	0%	0%	0%	0%	0%	0%
Catheter-associated Urinary Tract Infections (CAUTI)	↘	SIR ≤ .910		0%	0%	0%	0%	0%	0%	0%
Efficiency Measures (Dean Ins.) DHP		GOAL								
<i>Reporting Period 10/01/2020 - 09/30/2021</i>										
30 Day Readmissions - Dean Primary Ins (1 year rolling calendar)	↘	≤ 6.1%		0%	4.50%	8.3%	8.3%	4.0%	7.4%	6.7%
1-day in-patient Medical Stays (1 year rolling calendar)	↘	≤ 15.4%		10%	5.30%	5.60%	11.1%	6.7%	6.3%	5.3%
Patient Satisfaction Measures (Dean Ins.) DHP		GOAL								
<i>Reporting Period 07/20/2020 - 03/31/2021</i>										
Overall Rank Hospital High (9-10 on a scale of 0-10)	↗	≥ 86%		87%	85%	88%	88%	88%	Pass	Pass
Doctor's Communicated Well	↗	≥ 90%		91%	89%	90%	90%	89%	Pass	Pass
Nurse's Communicated Well	↗	≥ 89%		89%	90%	90%	90%	92%	Pass	Pass
Staff Provided Discharge Instructions	↗	≥ 94%		96%	93%	94%	94%	93%	Pass	Pass
Inpatient Psychiatric Services (Medicare) Core Measure		GOAL								
Hours of Physical Restraint Use per 1000 patient care hours **		0	0	0	0	0	0	0.5	0	0
Hours of Seclusion Use per 1000 patient care hours		0.05	0	0	0	0	0	0	0	0
2 or more Antipsychotic Meds with Justification - Overall Rate	↗	100%	83%	100%	ND	100%	100%	100%	ND	ND
Influenza Immunization		100%	100%	ety						
Transition Record complete with 11 required elements (Started 01/2017)	↗	100%	90%	83%	78%	92%	100%	97%	88%	92%
Timely Transmission of Continuing Care Plan (Started 01/2017)	↗	100%	90%	78%	78%	92%	100%	97%	88%	92%
Alcohol Use Screening Completed (No longer reported but collected internally)	↗	100%	100%	100%	100%	100%	100%	100%	100%	100%
Alcohol Use Brief Intervention Received or Refused (Effective January 2016)	↗	100%	ND	0%	100%	100%	100%	100%	ND	ND
Alcohol Use received or refused a RX for tx of alcohol or drug use disorder or a referral for addictions treatment.	↗	100%	ND	100%	ND	ND	ND	ND	ND	ND
Tobacco Use Screening Completed (No longer reported but collected internally)	↗	100%	100%	100%	100%	100%	100%	100%	100%	100%
Tobacco Use Counseling and Treatment Received or Refused (TOB 2)	↗	100%	100%	100%	100%	100%	100%	100%	100%	100%
Geriatric Psych Patient Influenza Immunization (Effective October-March only)	↗	100%	100%	NA	NA	96%	100%	ND	ND	100%
Screening for Metabolic Disorders (Effective January 1, 2017)	↗	100%	91%	100%	93%	100%	100%	100%	100%	100%

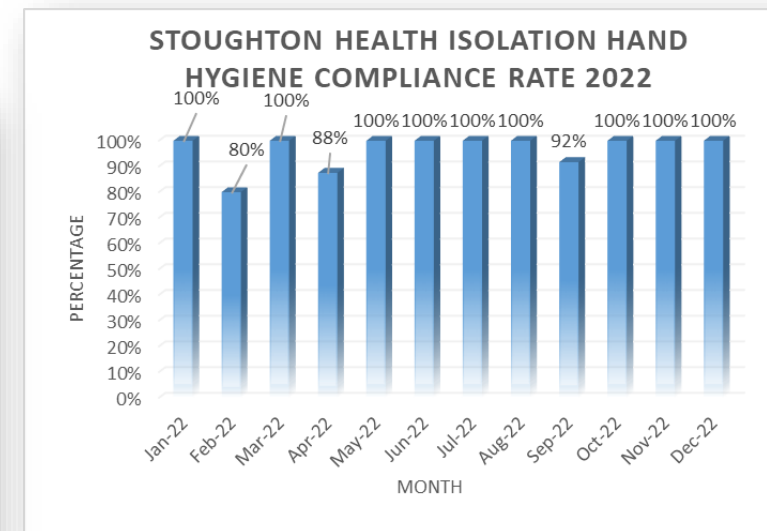
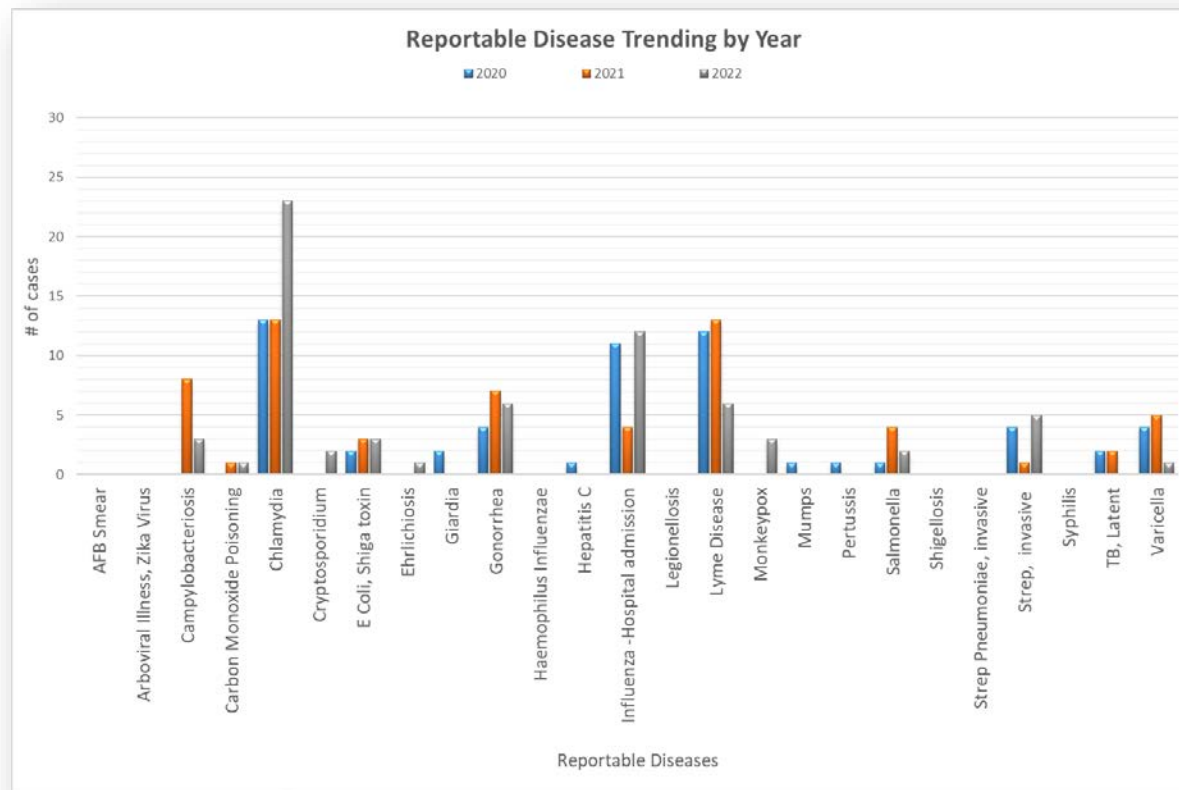
Patient Safety – January 2023

- ▶ Review Meeting Minutes – January 25, 2023
 - ▶ Additional Code Blue/Rapid Response alarms being installed in Sleep, Cardiac Rehab and Geriatric Psychiatry
 - ▶ DNV Stroke Certification is being worked on. Will be adding TnK to the pharmacy formulary



Infection Prevention – January 2023

► Review Meeting Minutes – January 25, 2023



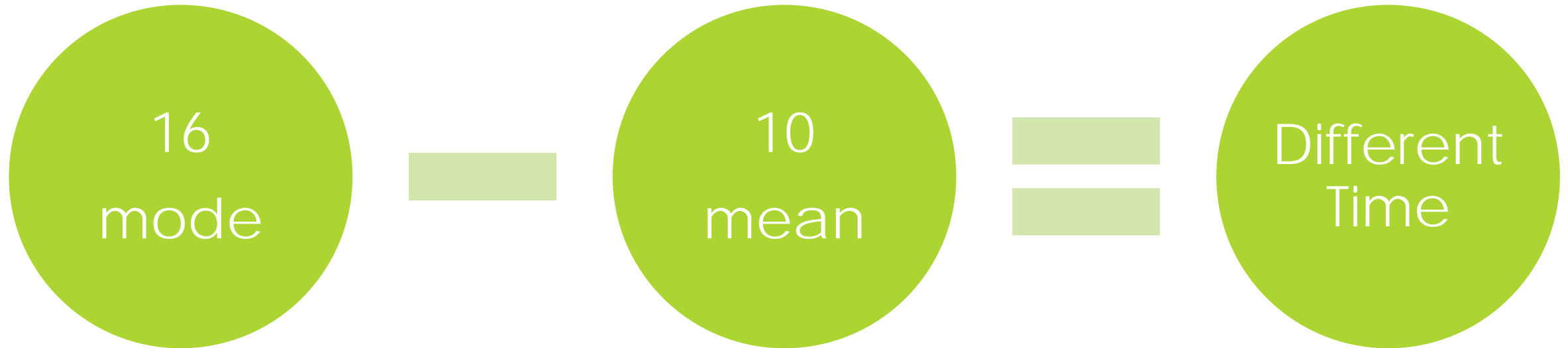
VP HR, Campus
Planning, Operational
Support Services
Summary Report
(Chris Schmitz)

- HR/Facilities Updates
- Staffing Updates

HR/Facilities Updates

- ▶ Compromised roof and impact to Med/Surg and Pharmacy departments
 - ▶ How it occurred
 - ▶ Impact
 - ▶ Cost
- ▶ Staffing
 - ▶ Succession planning for EVS leadership
- ▶ Launch of United Kronos Group software upgrade
- ▶ Performance evaluations due April 14th
- ▶ In-service education due April 30th

Staffing Updates



- ▶ Turnover trending downward (a positive indicator!)
- ▶ Step-Level department interviews with all departments

Director, Engagement
and Experience
Summary Report
(Mary Hermes)

- Social Determinants of Health
- Skip Level Meetings
- February Leadership Day

Director of Engagement and Experience Updates

- Employee Well-Being Resources Hub now on the Intranet
- Link: <https://intranet.stoughtonhealth.com/well-being-resources/>

Enhancing Employee Well-Being and the Social Determinants of Health Framework

Education Resources

Workforce Development Fund

Tuition Advancement

Tobacco Use Resources

Smoking Cessation

Education Resources

Workforce Development Fund

Stoughton Health offers Workforce Development Grants to current employees looking to further their career through educational opportunities. [See linked policy for more information and eligibility criteria.](#)

Tuition Advancement

Director of Engagement and Experience Updates

- Department Skip Level Meetings
 - **Purpose:** Gain additional context into unique needs of individual departments in relation to the 15 culture drivers
 - Incorporate into individual department Action Plans
- Progress and Reflection:
 - 15 out of 32 complete, all complete mid April
 - Very productive and informative, capturing good ideas for individual departments and organizational efforts

Director of Engagement and Experience Updates

- Leadership Development Days
 - **Purpose:** Time to participate in shared learning and learn from one another
 - Quarterly, off-site with Forum + Coordinators
 - **February Leadership Development Day:**
 - Modeled using Engagement Survey feedback to build action plan with SMART goals
 - Provided resources and work time with coordinators, if applicable.

Foundation/Marketing/
PR/Business
Development Director
Summary Report
(Laura Mays)

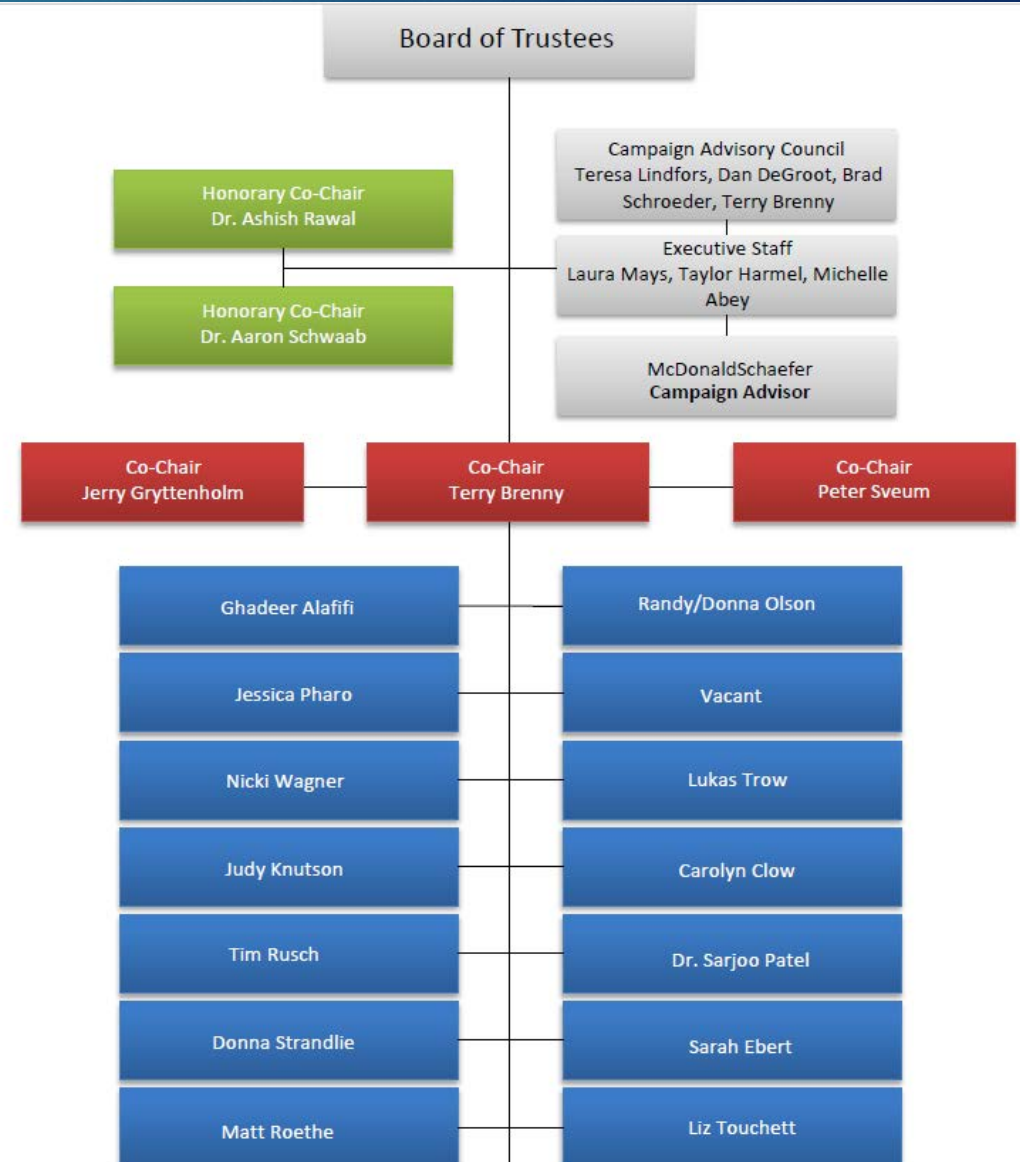
- Capital Campaign
- Upcoming Events
- Foundation Dashboard
- PR/Marketing Report

Capital Campaign



A COMMUNITY CAMPAIGN TO ENHANCE CARE NOW AND INTO THE FUTURE

Capital Campaign Goal → \$2 M



Upcoming Events

STOUGHTON HOSPITAL FOUNDATION

MARCH MATCHNESS

ARE YOU A FAN OF YOUR LOCAL HOSPITAL?

The Partners of Stoughton Hospital are **MATCHING DONATIONS** up to a total of **\$10,000** during March Matchness!

All donations will be going towards a new monitor for the sleep lab. It will be used to continuously track the oxygen and ventilation levels of patients.


 Make a donation March 14th - April 4th
 Give online at stoughtonhealth.com



Pick up your free basketball stress ball donated by JP Cullen in the lobby of our hospital and clinics!

2023 Partners of Stoughton Hospital

Pansy Sale

All Sales are Pre-Order and Pre-Pay
\$10 Each

Order Online with Your Credit Card
<https://stoughtonhealth.com/partners-of-stoughton-hospital/pansy-sale/>

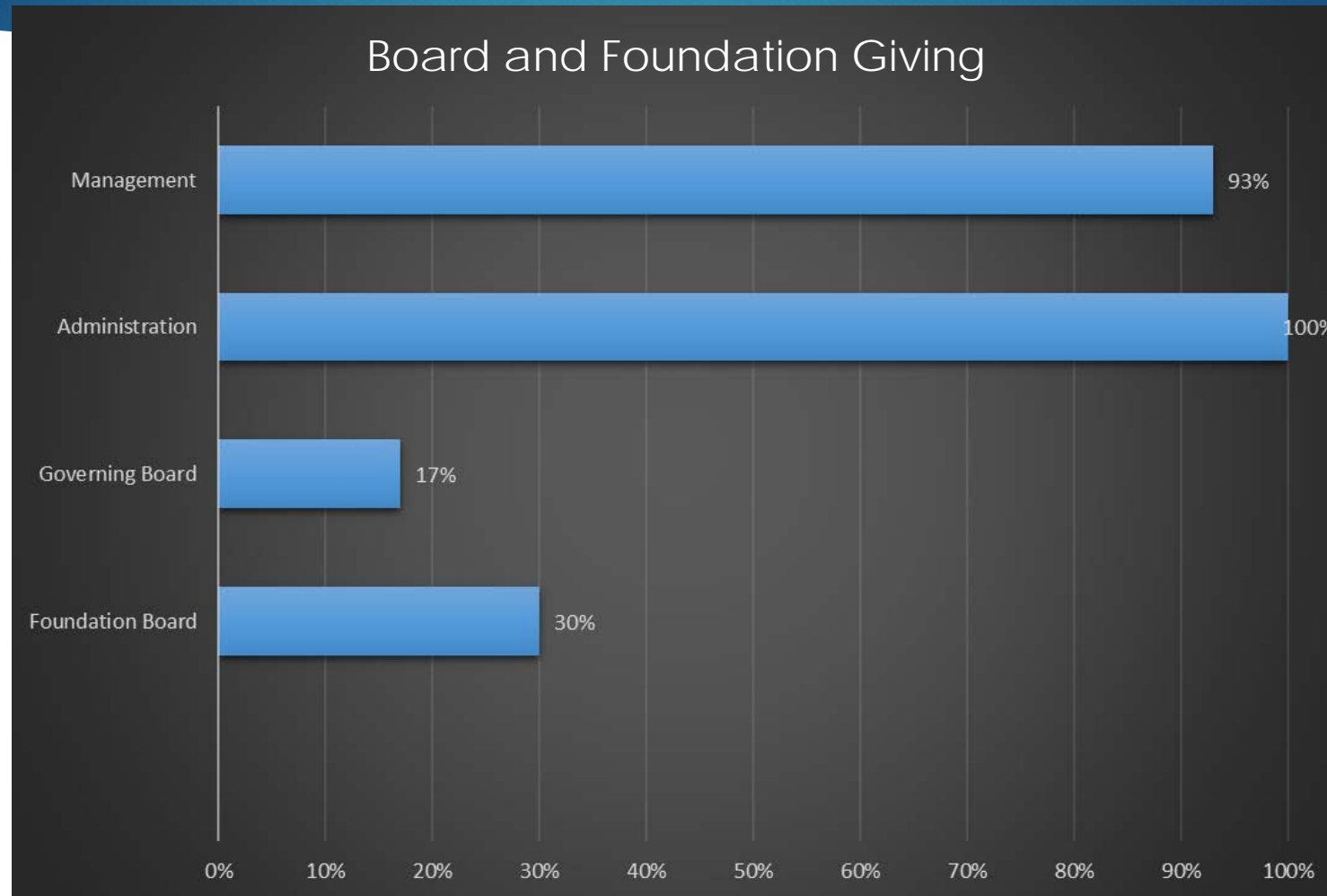
Pansy Pick-up
Contact-Free Drive-Through Pick-up
Thursday, April 13th from 3 to 5 pm
Stoughton Health
Community Health & Wellness Center
3162 County Road B, Stoughton
(Please take Page Street or Highway N to County Road B to avoid traffic.)

Questions about your order?
Please contact Becky at (608) 873-3387,
(608) 675-7796 or beckygreiber@gmail.com

Thank you for supporting Partners of Stoughton Hospital!



Foundation Dashboard



PR/Marketing Report

Ask for Stoughton Health

Stoughton Health accepts over 160 area insurance plans: Anthem Blue Cross Blue Shield, Cigna, Dean Health Plan, Humana, Quartz, United Healthcare and more.



If you need a general surgery procedure, stay close to home and ask for Stoughton Health Board Certified General Surgeon Dr. Aaron Schwaab.

- Appendectomy
- Biopsy & Surgical Removal of Cysts & Masses
- Breast, Colon & Skin Cancer Surgery
- Gallbladder Surgery
- Hemorrhoid Removal
- Laparoscopic Hernia Repair
- LINX treatment for GERD (acid reflux)
- Small & Large Bowel Procedures
- Vein treatment
- And many more

Board Certified General Surgeon
Aaron Schwaab, M.D.
General Surgery Clinic
(608) 873-2266



stoughtonhealth.com

Ask for Stoughton Health Pulmonary Rehab



Breathe Easier

- Asthma
- Chronic Bronchitis
- Emphysema
- Long COVID
- Lung Cancer
- Pulmonary Hypertension

[Learn More](#)



Free Skin Screenings



Dr. Aaron Schwaab, Stoughton Health Board Certified General Surgeon, is providing free skin screenings to the public. Skin screenings can detect melanoma and other skin cancers early, when they are easiest to treat.

This screening is open to anyone, regardless of insurance.

Monday, March 6th from 9 a.m. to noon
Stoughton Hospital
900 Ridge Street, Stoughton

To register for a FREE skin screening appointment, please go to stoughtonhealth.com and click on "Classes & Events." Questions? Please call (608) 877-3498.



stoughtonhealth.com

Complete Shoulder Care



Stoughton Health and OrthoTeam Clinic Shoulder Center accept over 160 area insurance plans including Dean Health Plan and Quartz.

OrthoTeam Clinic
Shoulder Center
2 Science Court, Madison
(608) 231-3410

900 Ridge Street, Stoughton
(608) 877-3419



A Clinic of Stoughton Health • orthoTEAM.com

End Your Pain with Custom Knee Replacements



"I was given a thorough explanation of what was going on with my knee, and the options available." - Gerald



Join Dr. Ashish M. Bawaal to learn how the Conformis custom knee implant may be the solution to end your knee pain. Dr. Bawaal is board certified in both orthopedic surgery and sports medicine.

Free Online Talk

Thursday, April 6, 2023
5:30 p.m.

To register for this free online class, please go to stoughtonhealth.com and click on "Classes & Events." Participants will receive a class link (Zoom meeting) and call-in phone number.

Questions? Please contact Stoughton Health Community Education at (608) 877-3498. Please note this is an informational screen, not intended to take the place of professional medical advice.



orthoTEAM.com - A Clinic of Stoughton Health

BEST
100 HOSPITALS
WOMEN'S CHOICE AWARD
PATIENT EXPERIENCE
2023

Arthritis Pain?
Stoughton Health Rehabilitation & Sports Medicine

Chief of Staff Report

(Dr. Aaron Schwaab)

- ONE YEAR APPOINTMENTS
- TWO YEAR RE-APPOINTMENTS

One Year Appointments

1. Dr. Jessica Chuang, MD, Occupational Medicine, Beam Healthcare, Active
2. Dr. Anna Frishman, MD, Emergency Medicine, SWEA, Active

Flagged Files: None at this time

****Request Motion to Approve One Year Appointments****

Two Year Re-Appointments

1. Dr. Brian Bachhuber, MD, Cardiology, SSM Health, Courtesy
2. Dr. William Ehrhardt, MD, Gastroenterology, SSM Health, Active
3. Dr. Anne Kilby, MD, Ophthalmology, SSM Health, Active
4. Dr. Aaron Schwaab, MD, General Surgery, Sto Health, Active
5. Brad Johnson, PA, Emergency Medicine, SWEA, AHP
6. Dr. Abigail Dahlberg, MD, Emergency Medicine, SWEA, Active
7. Dr. Billie Kontny, MD, General Surgery, Fort Healthcare, Active
8. Dr. Mary Hickner, DPM, Podiatry, Independent, Active
9. Dr. Maria Fassari, MD, Hospital Medicine, Beam Healthcare, Active
10. Maria Cada, APNP, Psychiatry, ITP, AHP
11. Dr. Mary Embrescia, MD, Psychiatry, ITP, Courtesy
12. Dr. Neza Bharucha, MD, Psychiatry, ITP, Courtesy
13. Brian Martinson, PA, Emergency Medicine, SWEA, Active
14. John Hoopes, CRNA, Anesthesia, Sto Health, AHP
15. Dr. Amanda Boone, MD, Hospital Medicine, Beam Healthcare, Active
16. Dr. Frank Italiano, MD, Infectious Disease, Beam Healthcare, Active
17. Dr. Andrea Rock, MD, Pediatric Cardiology, SSM Health, Courtesy
18. Dr. Cassandra Sung, MD, Pediatric Cardiology, SSM Health, Courtesy
19. Constance Morrison, APNP, Psychiatry, ITP, AHP
20. Dr. Thomas Teelin, MD, Cardiology, UW Health, Courtesy
21. Mark Belligan, PA, Emergency Medicine, SWEA, AHP
22. Ryan Smith, MD, Hospital Medicine, Beam Healthcare, Active
23. Dr. Vincent Nerine, MD, Pulmonary Medicine, Beam Healthcare, Active
24. Sherifat Forcey, APNP, Psychiatry, ITP, AHP
25. Marc Romano, APNP, Psychiatry, ITP, AHP

Flagged Files: None at this time

****Request Motion to Approve Two Year Re-Appointments****

Additional Privileges

- ▶ Tina DeGroot, APNP, requesting additional privileges doing stress test monitoring.

****Request Motion to Approve Additional Privileges****



Adjournment

(Donna Olson)