



# Stoughton Health

Governing Board Meeting  
January 24, 2024

# Meeting Agenda

Call to Order/Introduction of Andrea Luke

Review/Approve November 29, 2023 Meeting Minutes

Trustee Education – Solar Project

New Business / Old Business

SSM Updates

Committee Updates

Administration Team Updates

Chief of Staff Report

Open Discussion/Adjournment

# Welcome to the Stoughton Health Family!

Robert Jerome Polster Jr.  
(Bobby Jr.)  
5 lbs 9 oz  
18" long



# Introduction

Andrea Luke



# Governing Board Meeting Minutes



\*Request Motion to Approve November 29, 2023 Governing Board Meeting Minutes\*

# Trustee Education

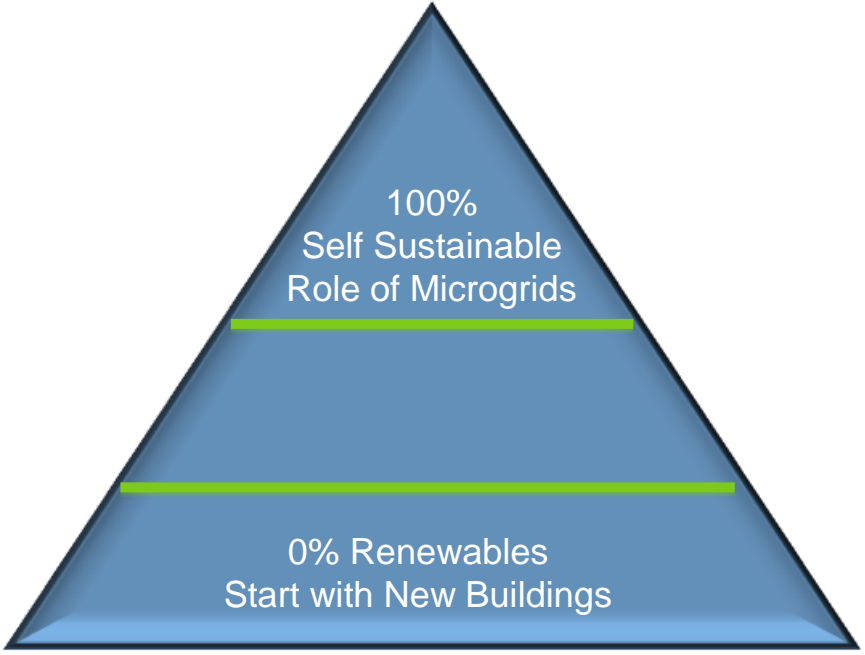
The image features a dark blue background with a large, abstract graphic on the right side. This graphic consists of several overlapping diagonal stripes in shades of green and blue, extending from the top left towards the bottom right. The stripes are semi-transparent, creating a layered effect. On the left side, the words "Trustee" and "Education" are stacked vertically in a bold, dark blue, serif font.



# Solar Project

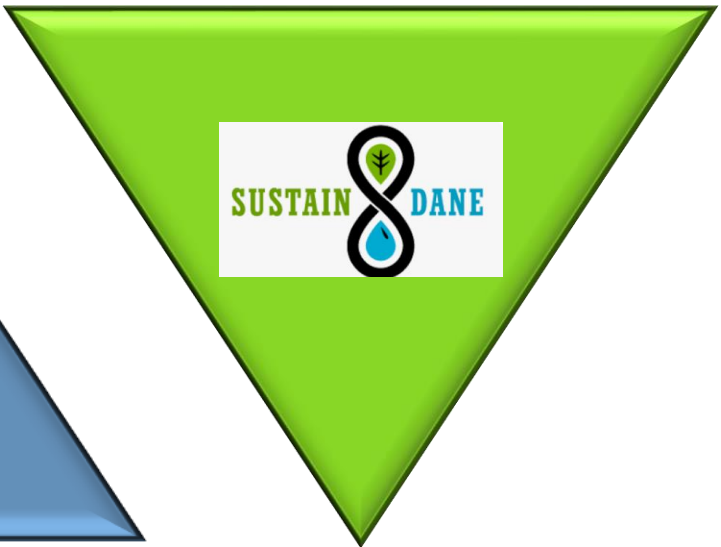
Chris Schmitz

# Move to Renewable





# Request from Stoughton Utility and Dane County for Master Energy Sustainability Plan

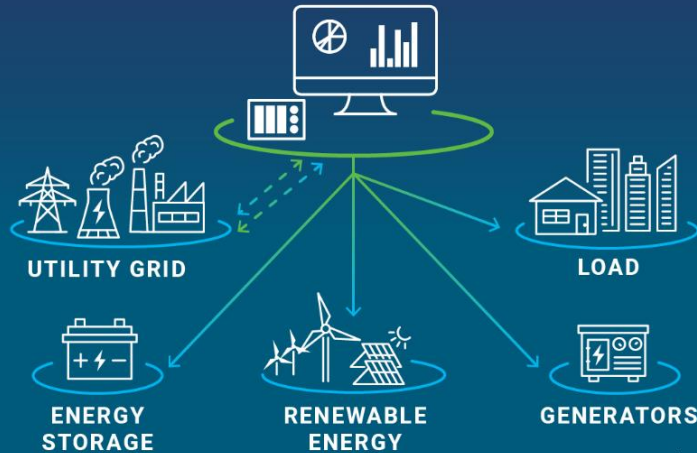


# Dawn of the Microgrid

## What is a microgrid?

A microgrid is a local energy system that can produce, store, and distribute energy to the facilities within the network. Because they can operate using local resources without external electricity supply, microgrids can strengthen community resilience.

### MICROGRID CONTROLLER



energy.gov/oe



## 1<sup>st</sup> Step: Our Solar Plan

### ■ Coordination:

- 1901
- JP Cullen
- Stoughton Hospital
- IMEG
- EUA

### ■ Net Investment

- Avoided Utility Cost: \$410,000
- Simple Payback: 13 years
- Realized Payback: <7 years
- Rate of Return: 8.4%
- Return on Investment: 260%

# Gamification of Investment



CITY NEWS

## Dane County becomes first in Wisconsin to achieve 100% renewable energy

Dane County paired with Alliant Energy and SunVest Solar to install 33,000 solar panels, resulting in Dane County becoming the first county in Wisconsin to achieve 100% renewable energy for its electric usage.

By **Marin Rosen**

# New Business

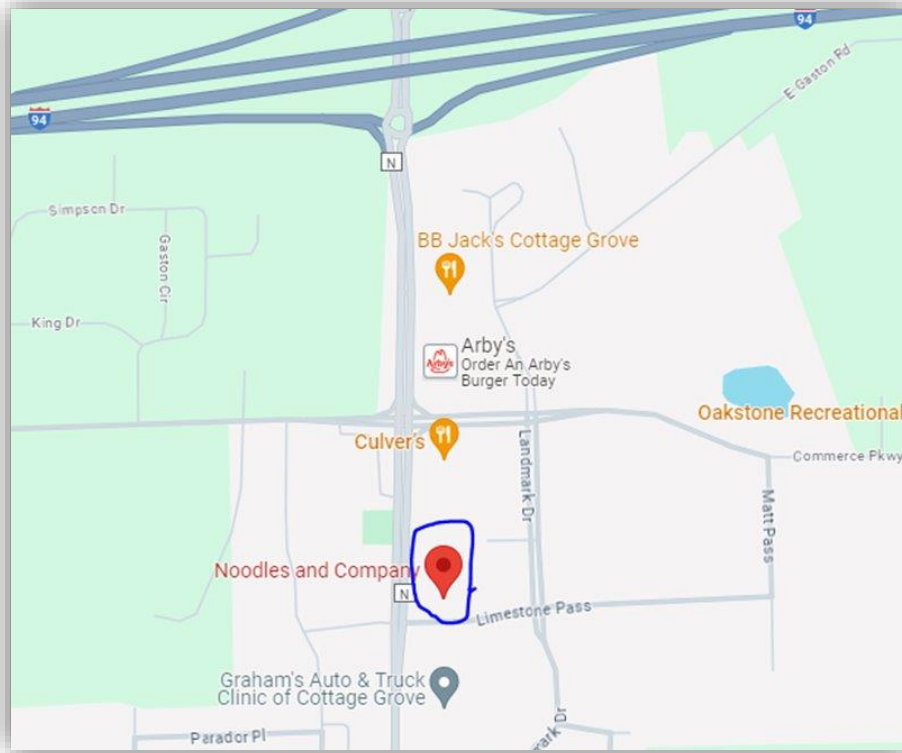


## Cottage Grove Urgent Care



**Address:**  
110 Limestone Pass,  
Cottage Grove

# Location, location, location



**Address:**  
110 Limestone Pass,  
Cottage Grove

# Cottage Grove Urgent Care Proposal

- Growing community (21.4% increase from 2020-2022)
  - Large Businesses
    - Summit Credit Union
    - Amazon warehouse distribution center
- No after-hours healthcare options available
- Model after McFarland Urgent Care plus 2 additional clinic rooms
- Addition of Occupational Health Services possible
- Breakeven number of patients/day, 19 patients



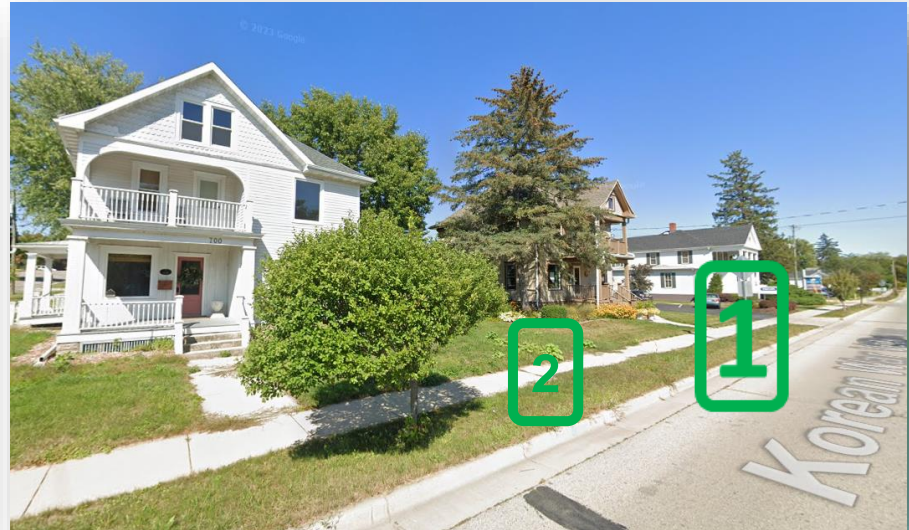
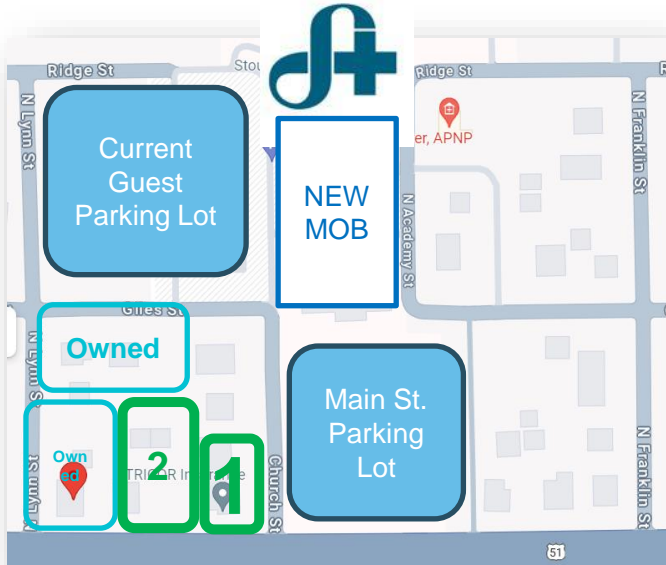
# Cottage Grove Urgent Care Financial Plan



- Cash to finance
- Estimated Capital Costs: \$1.1M

\*Request Motion to Approve Capital Expenditures up to \$1.1M to begin planning for the Buildout of Urgent Care in Cottage Grove in April 2024 – capital is above and beyond the \$3.5M of routine capital approved for FY2024\*

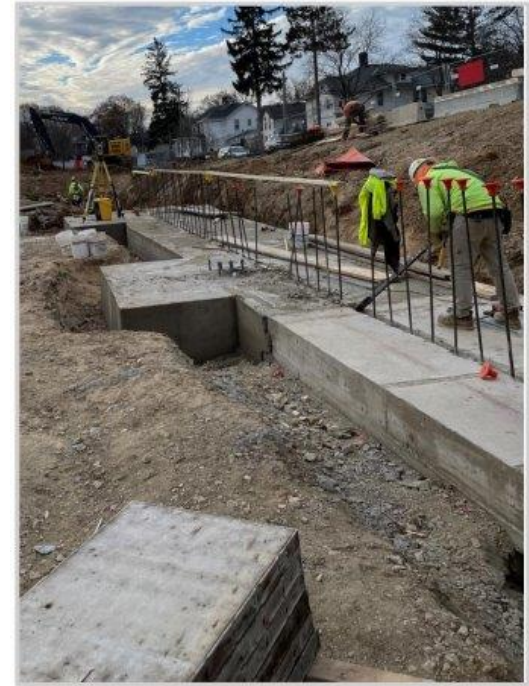
# Potential Tricor Building and Adjacent Property Acquisitions



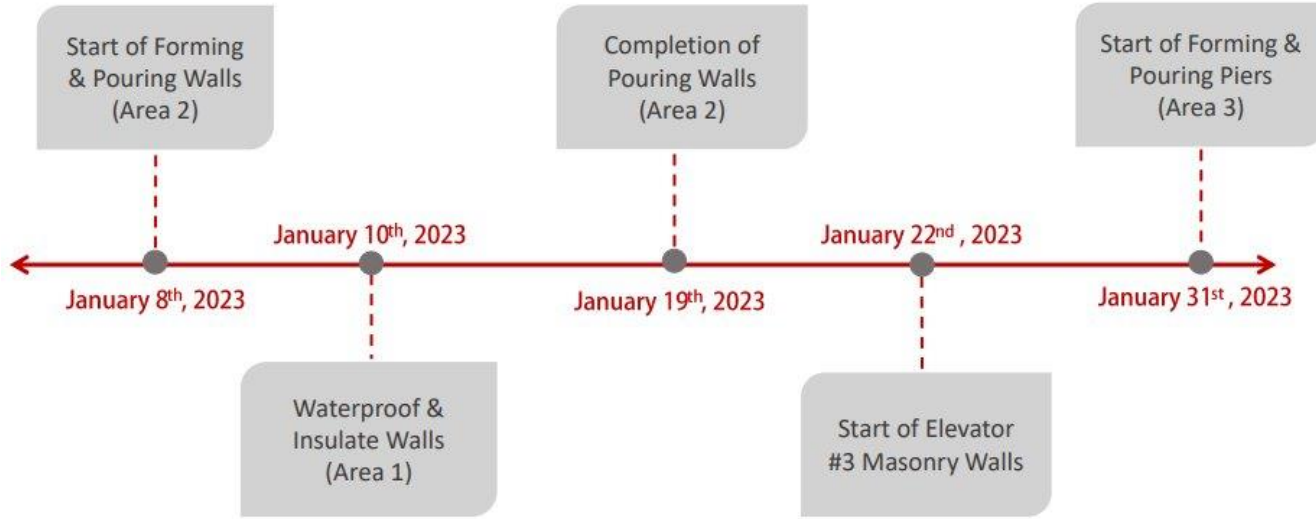
**Old  
Business**



# Medical Outpatient Building Updates

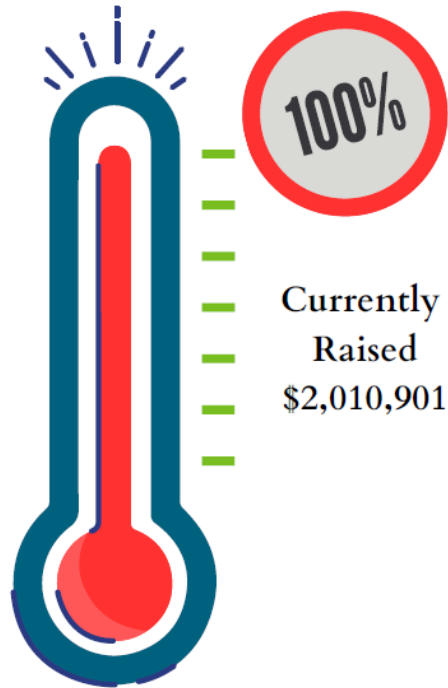


# Medical Outpatient Building Timeline Summary



# Medical Outpatient Building Capital Campaign Update

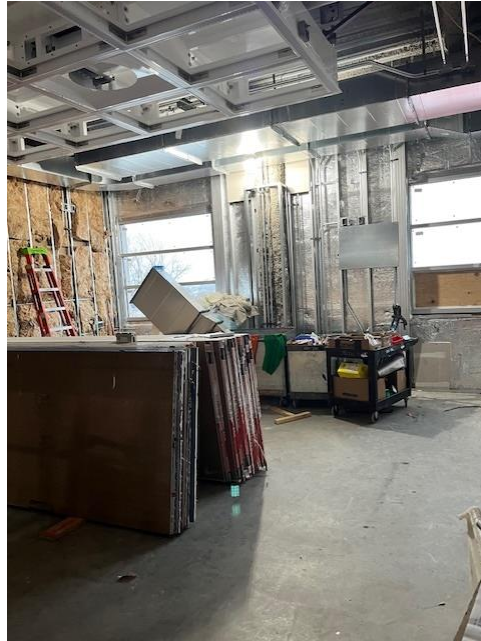
Goal to raise \$2,000,000







# 4<sup>th</sup> Operating Room





# SSM Health Updates

The background features a dark blue gradient on the right side. On the left, there are three overlapping diagonal stripes that extend from the bottom left towards the top right. The top stripe is a light green, the middle one is a medium green, and the bottom one is a bright cyan. These stripes overlap each other and the dark blue background.

# Committee Updates

- Executive Committee
- Finance Committee
- Governance Committee
- Quality Committee
- Audit Compliance/Risk  
Management Committee

## Executive Committee



- Overview of December 20, 2023 Executive Committee Meeting Minutes
  - Capital Approval: Surgical Services Boom & Tower - \$390,000
  - Potential Cottage Grove UC Expansion Discussed
- Upcoming Meeting: Wednesday, February 28, 2024 at 7:15 a.m.

## Finance Committee



- Upcoming Meeting: Friday, February 16, 2024 at 7:15 a.m.

## Governance Committee



- Overview of January 18, 2024 Governance Committee Meeting Minutes
  - Conflict of Interest Statement Review
  - 2024 Board Education Cadence
  - 2024 By-law Changes
- Upcoming Meeting: Thursday, April 18, 2024 at 7:15 a.m.

## Quality Committee

### ■ QM Council Updates

- Review QM Council Minutes
  - November 2023
  - December 2023
- Review QM Council Dashboards
  - Cohort B – November 2023
  - Cohort A – December 2023

■ Upcoming Meeting: Tuesday, February 27, 2024  
at 9:00 a.m.

## QM Council – Recently Closed Projects

### ■ November 2023 – Cohort B

- Health Risk Assessment & Screening, Department: CHWC
- Suicide Screening, Department: Rehab
- Lease Accounting, Department: Accounting

### ■ December 2023 – Cohort A

- Neuropsychological (NP) Testing, Department: Geriatric Psychiatry
- Laboratory and Off-Site Urgent Cares (UC) Respiratory Virus Testing Standardization, Department: Lab
- Implementation of an 8 Module Cepheid GeneXpert 8 to Increase Respiratory Virus Testing Capacity, Department: Lab

# Audit Compliance/Risk Management Committee



- Upcoming Meeting: Friday, August 16, 2024 at 8:30 a.m.



# Administration Team Updates

The graphic features three overlapping diagonal stripes that run from the bottom-left towards the top-right. The top stripe is a light green, the middle stripe is a teal color, and the bottom stripe is a bright cyan. These stripes are set against a dark blue background that occupies the right half of the image. The stripes overlap in a way that creates a sense of depth and movement.



# CEO Summary Report

Dan DeGroot

# WHA Advocacy Day Attendance



- Angie will register all attendees.
- Please send your home address if you plan to participate in Legislative visits.

# 2024 Governing Board Retreat



- **Date:** September 11-13, 2024
- **Location:** Grand Geneva Resort, Lake Geneva, WI
- **Potential Topics**

December 31, 2024





# CFO Summary Report

Michelle Abey

# December Financials



**\*Request Motion to Approve December 2023 Financial Statements\***

# January Month to Date

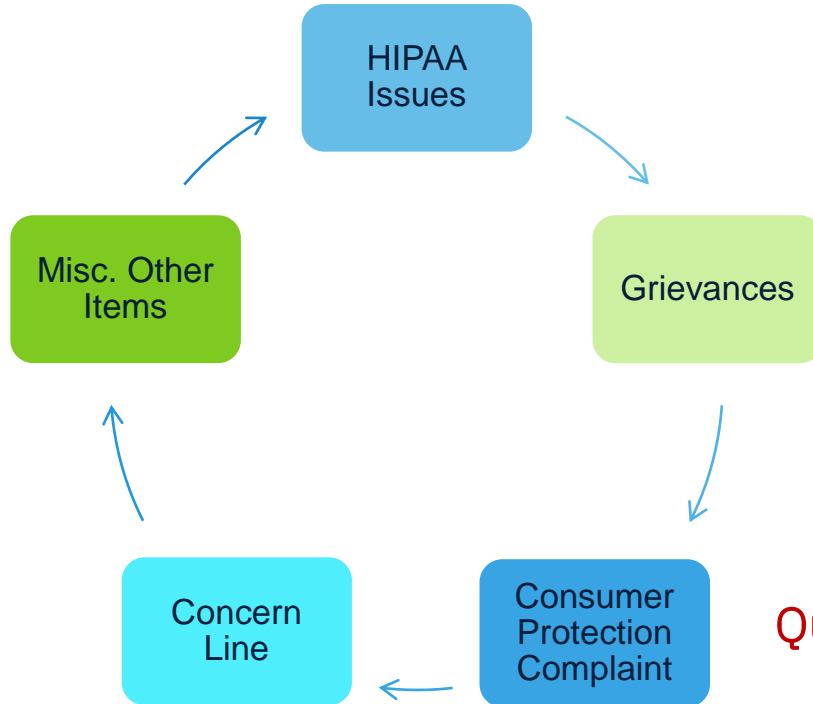
## Stoughton Health Projected Gross Revenues Variance to Budget 1/1/2024 through 1/22/2024

Red = Projected Variance to Budget Less than -10%, Yellow = Projected Variance to Budget Between -10% and 0%, Green = Projected Variance to Budget Greater than or Equal to 0%

		Revenues						
Department	Month to Date		Projected Month		Variance		PY Month	
	Actual	Budget	Actual	Budget	Amount	%	Actual	
▲ ER/UC Total	1,868,522	2,020,829	2,632,918	2,847,531	(214,614)	-7.5%	2,628,054	
● Geriatric Psychiatry	244,255	226,036	344,178	318,505	25,673	8.1%	280,519	
◆ Inpatient Total	548,424	686,355	772,779	967,137	(194,358)	-20.1%	930,458	
● Medical Imaging Total	2,994,714	2,554,734	4,219,824	3,599,852	619,972	17.2%	3,325,975	
◆ Other Ancillary Total	2,185,198	2,471,323	3,079,143	3,482,319	(403,176)	-11.6%	3,289,879	
▲ Rehab Services Total	671,131	744,195	945,684	1,048,638	(102,953)	-9.8%	987,175	
◆ Cardiology Clinic	8,325	10,029	11,730	14,132	(2,401)	-17.0%	10,115	
◆ Urology Clinic	92,035	201,577	129,686	284,040	(154,354)	-54.3%	50,164	
◆ OrthoTeam Clinic	334,067	564,875	470,730	795,961	(325,230)	-40.9%	765,347	
▲ General Surgery / Wound Clinic	147,066	147,721	207,230	208,152	(922)	-0.4%	200,146	
◆ Specialty Clinics	581,493	924,202	819,377	1,302,284	(482,907)	-37.1%	1,025,772	
◆ Surgical Services Total	1,385,117	1,796,614	1,951,755	2,531,593	(579,838)	-22.9%	2,246,633	
▲ Stoughton Health Total	10,478,854	11,424,231	14,765,658	16,097,779	(1,332,121)	-8.3%	14,714,386	



# Quarterly Corporate Compliance Committee Report



**\*Request Motion to Approve  
Quarterly Corporate Compliance  
Committee Report\***



# Chief Strategy and Business Development Officer Summary Report

Teresa Lindfors

# Growth Updates



ORTHOPEDIC SURGEON  
RECRUITMENT



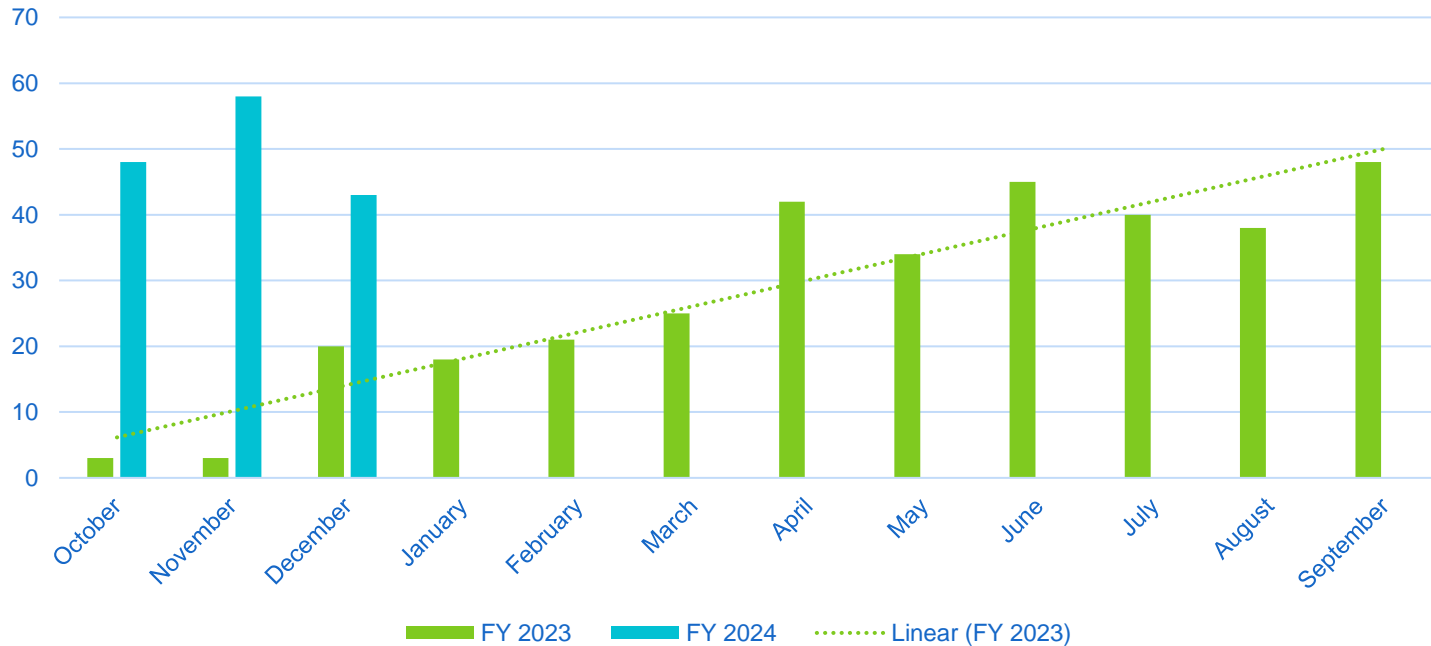
REVIEW OF NEWER  
PROVIDER TRENDS  
(VASECTOMY, TUBALS  
AND PODIATRY)



AZURA PROFESSIONAL  
SERVICE UPDATE

# Urology Clinic Volumes

## Vasectomy Volume Trends



# Gynecology Volumes



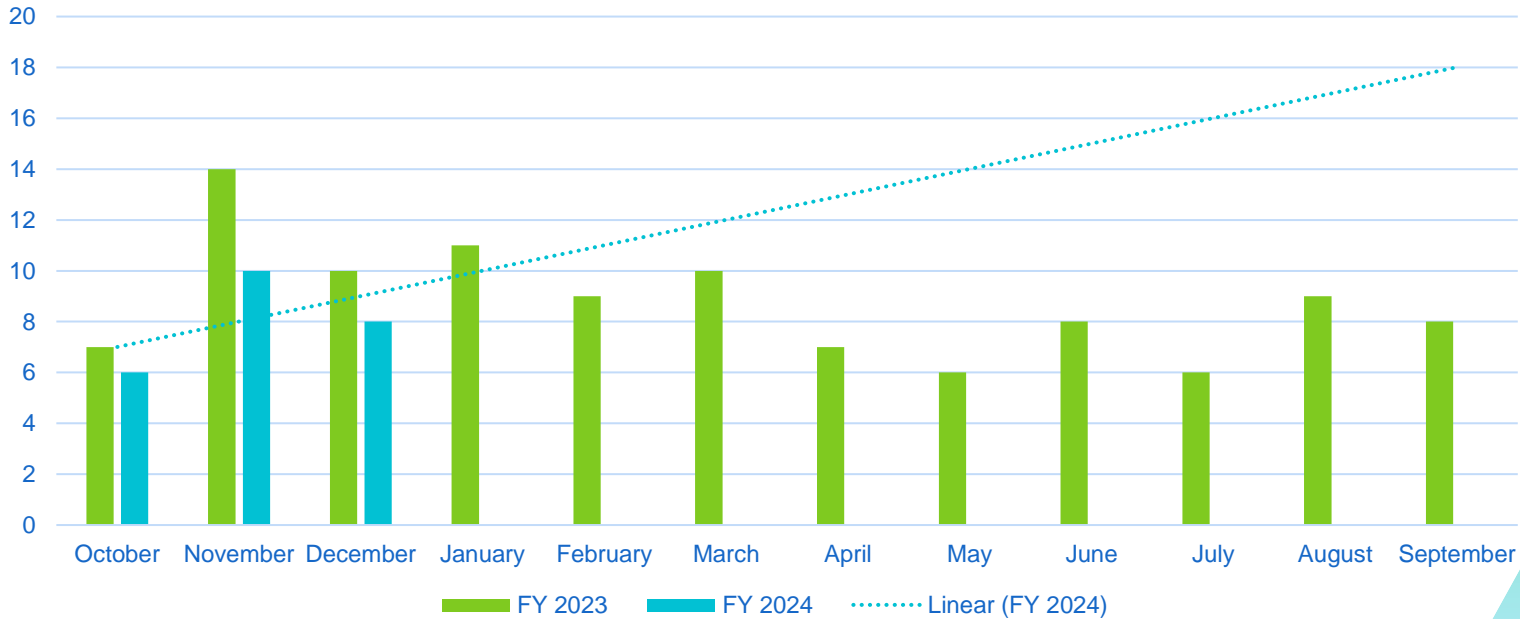
### Tubals Service Volume Trends



# Podiatry Volume Trends



## Podiatry Service Volume Trends





# CNO Summary Report

Amy Hermes

# MCE Meeting Minutes – November 2023 / January 2024



■ Dr. Schwaab/Amy Hermes

\*Request Motion to Approve November 2023/January 2024 MCE Meeting Minutes\*



## MEC Meeting Minutes – January 2024



■ Dr. Schwaab/Amy Hermes

\*Request Motion to Approve January 2024 MCE Meeting Minutes\*

# Quality Safety Report Card – Q4 FY2023

Quality Measures	Desired Direction	RWHC	National	GOAL	Jul-Sep 2023	Sep-23	Aug-23	Jul-23	Apr-Jun 2023	Jun-23	May-23	Apr-23	Jan-Mar 2023
<b>Global Immunization-Core Measure</b>													
Inpatient Influenza Vaccination Rate (Effective October-March only)	↗	75% Q4 2022	94% Q4 2019 Median	100%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	100%
<b>Pain Management</b>													
Pain Assessment and Reassessment (Inpatient Only)	↗	n/a	n/a	>90%	92%	92%	91%	93%	88%	90%	82%	91%	87%
<b>Patient Flow Measures</b>													
<b>Emergency Room to Admission (minutes) Core Measures</b>													
Decision to admit to transport to inpatient unit (median) - <i>previous project, continue to monitor</i>	↘	62	129	<RWHC	73	72	69	75	68	68	61.5	73.5	70
<b>Emergency Room to Discharge (minutes) Core Measures</b>													
Length of stay in ER for patients discharged (median)-excl MH and TX	↘	123	150	<National	155	161	140	160	133	118	134	138	139
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	0	0	1.5	2.5	2	3	2	1	0
<b>Key Patient Information Communicated with ED Transfer (All EDTC) - <i>public reporting</i></b>													
Columbia Suicide Screening completed in ED	↗	n/a	n/a	98%	99%	99%	99%	99%	98%	98%	98%	98%	98%

# Quality Safety Report Card – P4P – Q4 FY2023

Pay for Performance Measures	Desired Direction	GOAL	Jul-Sep 2023	Apr-Jun 2023	Jan-Mar 2023	Oct-Dec 2022	Jul-Sep 2022	Apr-Jun 2022
<b>Quality (Dean Insurance and/or Medicaid)</b>								
<i>DHP Reporting Period</i>								
Healthcare Personnel (HCP) Influenza Vaccination Rate	↗	98%	N/A	N/A	99%	99%	NA	N/A
Colon Surgical Site Infections (COLO)	↘	SIR ≤ .790	0%	0%	0%	0%	0%	0%
7Total Abdominal Hysterectomy Surgical Site Infections (HYST)	↘	SIR ≤ .930	ND	ND	ND	ND	ND	ND
Central Line-associated bloodstream infections (CLABSI)	↘	SIR ≤ .640	0%	0%	0%	0%	0%	0%
Catheter-associated Urinary Tract Infections (CAUTI)	↘	SIR ≤ .710	0%	0%	0%	0%	0%	0%
Clostridium Difficile Infections	↘	SIR <0.64	0%	0%	0%	0%	0%	0%
<b>Efficiency Measures (Dean Ins.)</b> <i>DHP Reporting Period 04/01/2022 - 03/31/2023</i>								
GOAL								
30 Day Readmissions - Dean Primary Ins (1 year rolling calendar)	↘	≤ 5.1%	8.30%	7.10%	0%	0%	0%	4.50%
1-day in-patient Medical Stays (1 year rolling calendar)	↘	≤ 10.0%	0%	7.70%	9.1%	7.1%	10.0%	5.30%
<b>Patient Satisfaction Measures (Dean Ins.)</b>								
<i>DHP Reporting Period</i>								
GOAL								
Overall Rank Hospital High (9-10 on a scale of 0-10)	↗	≥ 84%	77%	82%	83%	86%	87%	85%
Doctor's Communicated Well	↗	≥87%	85%	88%	88%	91%	91%	89%
Nurse's Communicated Well	↗	≥89%	84%	86%	88%	91%	89%	90%
Staff Provided Discharge Instructions	↗	≥94%	90%	93%	96%	95%	96%	93%
<b>Inpatient Psychiatric Services (Medicare) Core Measure</b>								
GOAL								
Hours of Physical Restraint Use per 1000 patient care hours **		0		0	0	0	0	0
Hours of Seclusion Use per 1000 patient care hours		0.05		0	0	0	0	0
2 or more Antipsychotic Meds with Justification - Overall Rate	↗	100%		100%	ND	83%	100%	ND
Influenza Immunization		100%		ND	100%	100%	ND	
Transition Record complete with 11 required elements (Started 01/2017)	↗	100%		87%	88%	90%	83%	78%
Timely Transmission of Continuing Care Plan (Started 01/2017)	↗	100%		87%	88%	90%	78%	78%
Alcohol Use Screening Completed (No longer reported but collected internally)	↗	100%		100%	100%	100%	100%	100%
Alcohol Use Brief Intervention Received or Refused (Effective January 2016)	↗	100%		ND	100%	ND	0%	100%
Alcohol Use received or refused a RX for tx of alcohol or drug use disorder or a referral for addictions treatment.	↗	100%		ND	ND	ND	100%	ND
Tobacco Use Screening Completed (No longer reported but collected internally)	↗	100%		100%	100%	100%	100%	100%
Tobacco Use Counseling and Treatment Received or Refused (TOB 2)	↗	100%		100%	100%	100%	100%	100%
Geriatric Psych Patient Influenza Immunization (Effective October-March only)	↗	100%		ND	100%	100%	NA	NA
Screening for Metabolic Disorders (Effective January 1, 2017)	↗	100%		100%	94%	91%	108%	103%

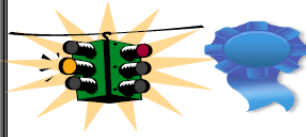
N/A- No cases in measure, Color Coding: Green- Goal met, Yellow- Below goal one quarter, Red- Below goal two quarters

# Balanced Score Card

**Current Indicator Status**  
Compared to Goals, Best in Class Benchmarks or Other Standards

Surpassed Stretch Goal	At or Above Goal	Caution < 5% Below Goal	Action Needed
------------------------	------------------	-------------------------	---------------

\* Corrective Action Plan required for scores in Red Zone. Score is greater than 5% from Goal.



4th Quarter  
Fiscal Year 2023 Results for  
09/30/2023

QUALITY AND SAFETY		SERVICE		SERVICE (Cont)		PEOPLE		GROWTH		FINANCES	
30 - Day Inpatient Readmission Rate  Goal: ≤ 6%	Current Qtr 4.6%	Inpatient HCAPHS Rank Your Hospital High (Overall 9/10)  Goal: ≥ 90%	Current Qtr 87.0%	Emergency Department Press Ganey Definitely Would Recommend (Loyalty)  Goal: ≥ 90%	Current Qtr 85.0%	Turnover (excluding Per Diems)  * measuring rolling 13 mo results each Qtr  Goal: ≤ 28%	Current Qtr 12.2%	New Patient Records  Goal: 385 or more (per Qtr)	Current Qtr 855	Operating Margin Year-to-Date  Goal: ≥ 7.4 %	Current Qtr 14.5%
	Recent Qtr 3.1%		Recent Qtr 89.0%		Recent Qtr 84.0%		Recent Qtr 13.5%		Recent Qtr 744		Recent Qtr 14.7%
	Prior Qtr 7.3%		Prior Qtr 89.0%		Prior Qtr 85.0%		Prior Qtr 13.3%		Prior Qtr 710		Prior Qtr 15.6%
Completion of Columbia Suicide Severity Rating Scale  Goal: = 98%	Current Qtr 99.0%	Outpatient Rehab & Medical Imaging Press Ganey Definitely Would Recommend (Loyalty)  Goal: ≥ 90%	Current Qtr 99.0%	Geriatric Psych Press Ganey Definitely Would Recommend (Loyalty)  Goal: ≥ 90%	Current Qtr 99.0%	New Hire Turnover  * measuring rolling 13 mo results each Qtr  Goal: ≤ 28%	Current Qtr 36.9%	Ancillary Hospital Outpatient Visits  Goal: 8441 or more (per Qtr)	Current Qtr 9562	Percentage of Departments Meeting or Progressing Toward Top Quartile Productivity Ranking  Goal: ≥ 80%	Current Qtr NO DATA
	Recent Qtr 98.0%		Recent Qtr 98.0%		Recent Qtr 91.0%		Recent Qtr 37.7%		Recent Qtr 8557		Recent Qtr NO DATA
	Prior Qtr 98.0%		Prior Qtr 99.0%		Prior Qtr 92.0%		Prior Qtr 40.1%		Prior Qtr 9015		Prior Qtr NO DATA
Quarterly Inpatient Fall Free Days/Injury Free Days  Goal: ≥ 180 days in Rolling 6 Months	Current Qtr 182	Ortho Clinic Press Ganey Definitely Would Recommend (Loyalty)  Goal: ≥ 90%	Current Qtr 85.0%	Ambulatory Surgery Press Ganey Definitely Would Recommend (Loyalty)  Goal: ≥ 90%	Current Qtr 78.0%	Worker's Compensation Loss Ratio  Goal: ≤ 10%	Current Qtr 16.7%	OR Procedures  Goal: 415 or more (per Qtr)	Current Qtr 432	Total Compensation As % of Net Patient Total Revenues  Goal: ≤ 47%	Current Qtr 41.6%
	Recent Qtr 181		Recent Qtr 99.0%		Recent Qtr 89.0%		Recent Qtr 24.6%		Recent Qtr 455		Recent Qtr 40.1%
	Prior Qtr 181		Prior Qtr 97.0%		Prior Qtr 73.0%		Prior Qtr 43.0%		Prior Qtr 432		Prior Qtr 40.7%
			General Surgery Clinic Press Ganey Definitely Would Recommend (Loyalty)  Goal: ≥ 90%	Current Qtr 88.0%	Current Qtr 10426	ER/UC Admissions  Goal: 7719 or more (per Qtr)	Current Qtr 10426	Non Clinical Fixed Cost  Goal: ≤ 37%	Current Qtr 31.7%		
			Recent Qtr 97.0%	Recent Qtr 10895	Recent Qtr 11040		Recent Qtr 31.3%				
			Prior Qtr 100.0%	Prior Qtr 11040	Prior Qtr 33.8%						

## 2024 Balanced Score Card Updates

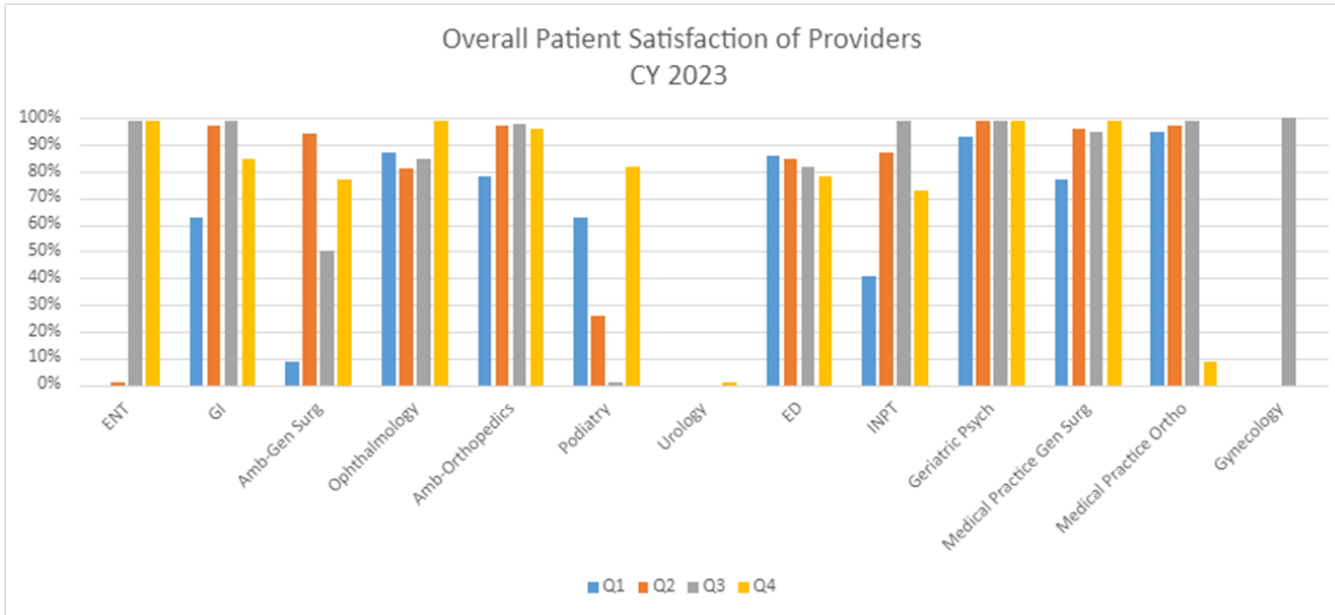
- Quality/Safety Pillar: No changes
- People Pillar: No changes
- Growth Pillar: Goals and stretch goals changed for all measures
- Finance Pillar: Goals and stretch goals changed for all measures
  - New Measure: Accounts receivable days
  - Retired Measure: Nonclinical fixed costs

**\*Request Motion to Approve Changes to the 2024 Balanced Score Card\***

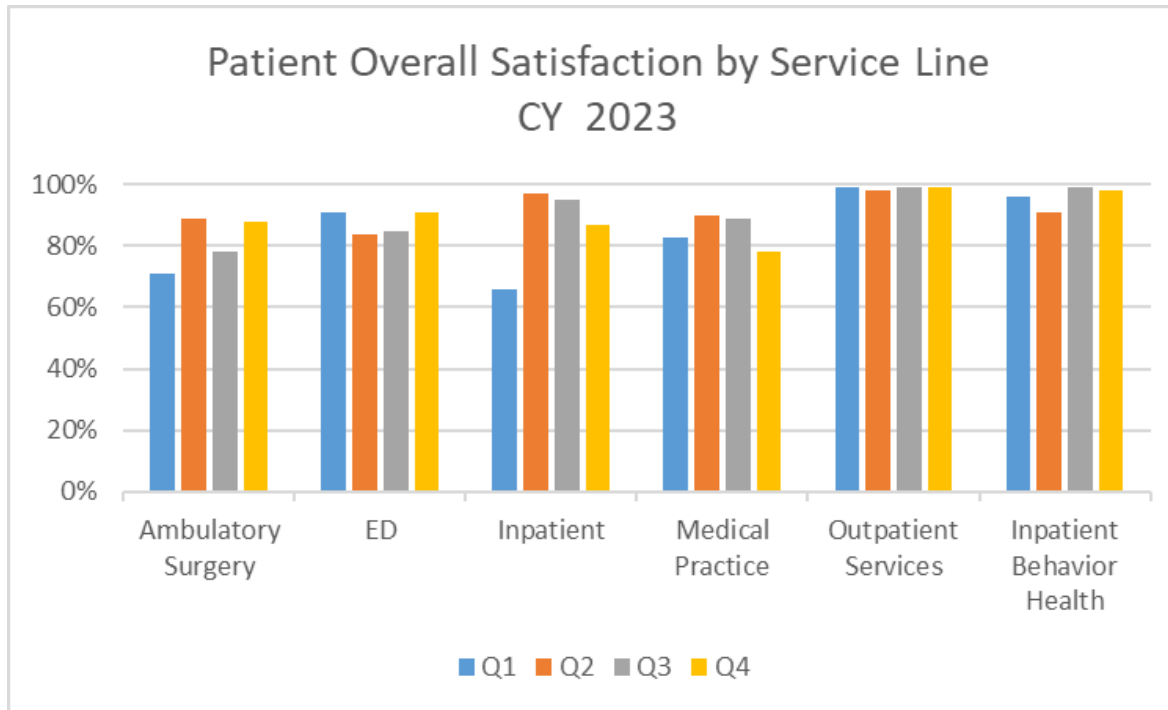
# DVC Hospital Scorecard – November 2023

Performance Summary					DVC Performance			
DVC Reporting Period	February	May	August	November	Total Score Ranges		2023/24 Escalator	
					Quality Domain (40% Max)	40.0%	40.0%	40.0%
Satisfaction Domain (20% Max)	20.0%	17.6%	16.4%	11.3%	80.0%	89.9%	3.5%	
Efficiency Domain (40% Max)	40.0%	40.0%	35.0%	35.0%	70.0%	79.9%	3.0%	
					60.0%	69.9%	2.5%	
					50.0%	59.9%	2.0%	
					40.0%	49.9%	1.0%	
					0.0%	39.9%	0.0%	
Total Score (100% Max)	100.0%	97.6%	91.4%	86.3%	<b>Average</b>		<b>93.8%</b>	<b>4.0%</b>

# Patient Satisfaction Rankings



# Patient Satisfaction Rankings





## Patient Safety Committee – November 2023



### ■ Review Meeting Minutes – November 2023

- Monitoring Medication Events and trying to find a benchmark comparison
- Continued discussions on security and completion of our Security Vulnerability Analysis
- Working on opportunities for improvement identified by DNV along with ISO standards

**\*Request Motion to Approve November 2023 Patient Safety Committee Meeting Minutes\***

# Infection Prevention Committee – November 2023

- Review Meeting Minutes – November 2023
  - Discussion regarding Blood Culture Contamination Rate. New goal will be <1%
  - Discussed upcoming ICRA's (Infection Control Risk Assessments) for upcoming projects
  - Working on reviewing different equipment/products that will enhance infection prevention measures

\*Request Motion to Approve November 2023 Infection Prevention Committee Meeting Minutes\*

## Root Cause Analysis

- Patient with right ankle osteoarthritis was admitted for right ankle arthroscopy. Surgical Tech, not assigned to the case, entered the OR and placed tourniquet on left leg then the left leg was clipped and prepped. RN for the case caught that the wrong leg was prepped. The Surgeon was notified, and they promptly stopped draping and removed the tourniquet (not inflated). Attention was then turned to the right leg where the tourniquet was placed, hair was clipped and prepped.



# VP, Human Resources Operations/Facilities Summary Report

Chris Schmitz

## Upcoming HR Related Projects

### ■ Late Winter

- Compensation Market Adjustments
- Annual Performance Evaluations hosted by UKG

### ■ Spring

- Annual Compensation Adjustments
- Employee Climate Survey

### ■ Summer

- CEO Recruitment
- Budget Forecasting for 2025

## Facility Related Projects

- Installation of Nurse Servers
- Point of Sale System for FNS and Gift Shop
- 4<sup>th</sup> Floor OR
- Oregon Urgent Care
- Cottage Grove Urgent Care
- Future of (2) Main Street Acquisitions
- Parking Demands
- Solar Project and Move Toward Sustainable Energy Plan
- Lower Level Carpet Replacement

# Security Risk Vulnerability Assessment

■ See attachments

\*Request Motion to Approve  
Security Risk Vulnerability  
Assessment\*

Stoughton Health security walk-through 10-10-23.

Participants:

Dan Jenks- Stoughton Chief of Police

Todd Dovichi- Detective, Stoughton PD

Todd Kane- Safety Specialist for Cummins-Corporate office in Stoughton

Tim Rusch- Vice Chair- Board of Directors

Tina Strandlie RN-BSN ED Manager/Cardiopulmonary Manager

Chris Schmitz- VP Human Resources, Facility Operations and Campus  
Planning

Jason Schoville- Facility Manager



# Director, Engagement and Experience Summary Report

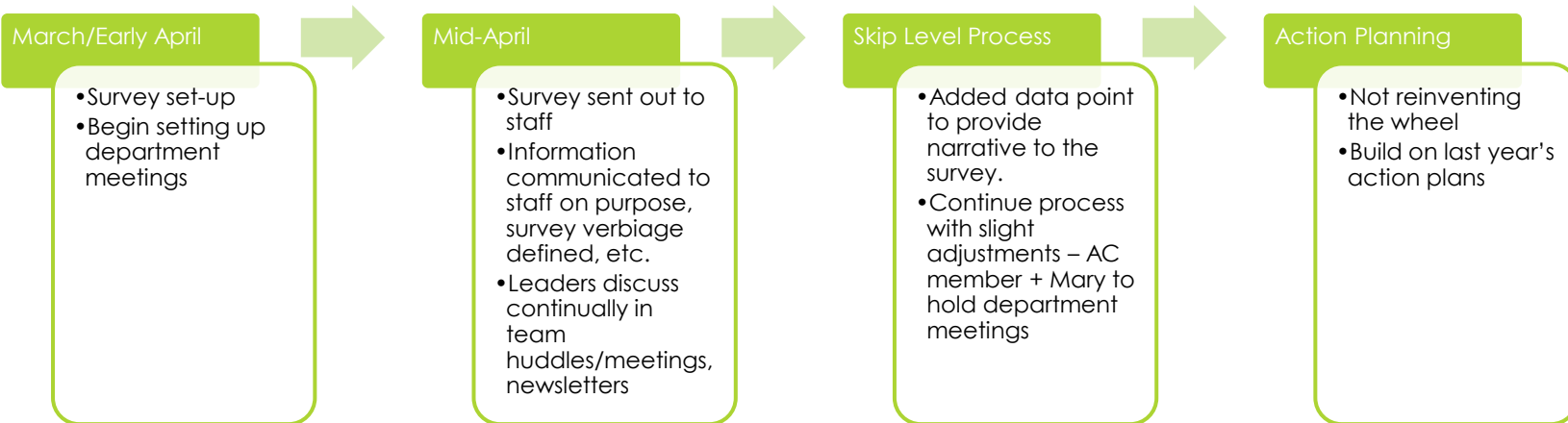
Mary Hermes



# Director of Engagement and Experience Updates

- ▶ 2024 Engagement Survey Timeline
- ▶ Coming Soon: Employee Recognitions –DAISY and BEE
- ▶ Patient and Family Advisory Council
- ▶ Employee Well-Being Initiatives

# 2024 Employee Engagement Survey



# DAISY Awards

## (Diseases Attacking the Immune System)

- ▶ **WHAT:** International DAISY Award is a recognition program to celebrate recognize nurses through nominations from patients/families and/or colleague
- ▶ **WHY:** Honor our nurses for living our mission and values, opportunity for patients/families to show appreciation, remind nurses of their 'why'.
- ▶ **WHO:** DAISY is specific for nurses which includes LPN and RN. The Customer Experience Team serves as our DAISY Committee.
- ▶ **HOW:** 1. Paper nomination form 2. Online webpage accessible via QR code and our website 3. If/When appreciations are shared directly with you – share information about the award and prompt them to nominate the staff member.
- ▶ **WHEN:** Roll out the DAISY Award to staff at February Town Hall



# DAISY Award Recipients and Ceremonies

All nominees receive a special DAISY award pin.

Additionally, 2x/year, our DAISY Committee will select 1 nominee to receive the DAISY Award, which also includes:

- A certificate commending them for being an "Extraordinary Nurse"
- A hand-carved Shona sculpture titled "A Healer's Touch"
- A tote bag
- Recognition on the National DAISY Foundation website and Sto Health platforms
- 8 hours PTO added to employee bank



All nominees and individual(s) who submitted nominations will be invited to the celebration where we present the award and enjoy a cinnamon roll in honor of Patrick Barnes.

## Bi-Annual Award Ceremony Dates:

- Nurse's Week in May (Nomination deadline: April 1)
- Second Week in October (Nomination deadline: September 1)

*\*All nominations will remain eligible for selection for 1 year.*

# BEE Awards (**B**e **E**xceptional **E**veryday)

- ▶ *'You can't have a Daisy without the Bee'*
- ▶ Coming Soon May 2024
- ▶ Same process and format as the DAISY
- ▶ Recognize non-nursing staff for the role they play in creating an exceptional, personalized patient experience





# Patient & Family Advisory council (AMY or MARY)



- ▶ Orientation held on January 16<sup>th</sup>
- ▶ Diverse membership representing many communities we serve:
  - ▶ Left to Right:
    - Lori Devine, Stoughton
    - Michelle Solverson, Stoughton
    - Michelle Walker, Stoughton
    - James Nowicki, Brodhead
- ▶ Continuing to look for a few more members.

# Employee Well-Being Survey Themes

- ▶ Ages of participants representational of our workforce demographics
- ▶ Interest in all Domains, see some examples below:
  - ▶ **Employee Benefits:** increase PTO accrual, lower premiums, increase 403b employer match
  - ▶ **Financial Support:** Student loan forgiveness
  - ▶ **Education:** Job shadow opportunities, clinical ladder
  - ▶ **Diet and Exercise:** Stipend for memberships and/or equipment, keep employee gym available, other exercise opportunities
  - ▶ **Family Support:** Childcare support, classes related to life transitions for self and family
  - ▶ **Other:** Pet insurance, PTO for volunteer day



Social Determinants of Health	Programs and initiatives (S= Systemic, T= Team, I= Individual)	Responsible Individual or Team	Associated Costs
Tobacco Use	1.Smoking Cessation Access through insurance provider (I) 2.QuitLine (I) 3.Community Health and Wellness classes (I)	1.Well-Being Team 2.Community Health and Wellness	1.No associated costs
Diet & Exercise	1.Monthly Well-Being activities and stipend program (I) 2. Monthly Lunch n' Learn Sessions 3.Health Risk Assessment and Individual Coaching (I) 4.Partnership w/ FNS to provide education and healthy meal options (S) 5. Employee CSA - Eugster's (I)	1.Well-Being Team 2.Well-Being Team/Occ Health RN, Community Health and Wellness Coordinator 3.Well-Being Team, dietitian, FNS manager 4. Well-Being Team 5. Director of Engagement and Experience	1. Challenges: \$50/month/eligible employee 2.WellSource: \$2,700 annually 3. no cost 4.10% total cost (\$300) x total employee participants
Alcohol & Drug Use			
Access to Care	1.Dual Insurance option (S) 2.Co-Pay waived for services w/in Stoughton Health (S) 3.Explore Insurance Cost Reducing Measures (S)	1.Human Resources and Administrative Team	
Quality of Care			
Education	1.Workforce Development Fund Grants (WDG) (S, I) 2.Tuition Advancement (I) *combine with WDG	1. Director of Engagement and Experience 2.Human Resources	1.WDF: \$75,000/year 2.Advancement: Up to \$1,500 year/employee
Employment	1.Growth through WDF (I) 2.Leadership Development Days and Curriculum (T) 3) Employee Engagement process and action planning (S) (T)	1-3. Director of Engagement and Experience	1 See WDF above
Income	1.Extend Gainshares when fiscally possible (S) 2.Increase Minimum Wage (S) 3.Community Health and Wellness Classes (I)	1.Human Resources and administrative team 2.Human Resources and Administrative team 3. Community Health and Wellness	1. Dependent on profit margins 2.Minimum wage increase 2022: 3.Summit: no cost
Family and Support	1.Partner Up! Child Care Grant (I) 2.EAP, ITP, Embrace Health (I)	1.Director of Engagement and Experience 2. Human Resources and Administrative Team	1.% of True Cost of Care x # of employees 2.ITP and Embrace:
Community Safety	1.SafeSitter programs (I)	1.Community Health and Wellness	1.Cost paid by participant
Air & Water Quality			

## Lifestyle Spending Account (LSA)

# Lifestyle Spending Account (LSA)

- ▶ Employer-funded accounts that provide after-tax funds for employees' everyday needs
- ▶ Managed by Employee Benefits Corporation (FSA and HSA vendor)
- ▶ Employees can use LSA funds on expenses not covered by traditional benefits
  - Fitness
  - Work From Home Expenses
  - Professional Development
  - Return to Office Incentives
  - Work Uniforms or Equipment
  - Convenience Services
  - Financial Services
  - Care Services
  - Pet Care
- ▶ Provides an individualized approach to supporting each of the domains
- ▶ Currently doing a cost-analysis of various program structures.



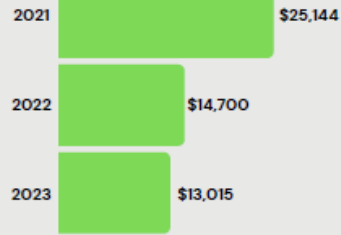
# Foundation/Marketing/ PR/Business Development Director Summary Report

Laura Mays

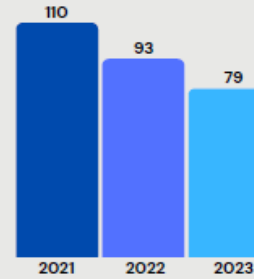
# Fundraising Update

## Annual Appeal

### Total Dollars

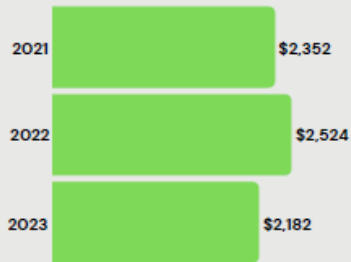


### Total Donors

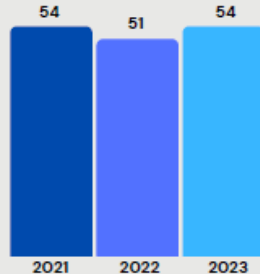


## Giving Tuesday

### Total Net Dollars

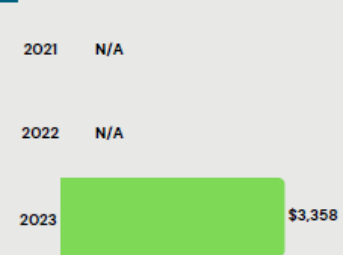


### Total Donors

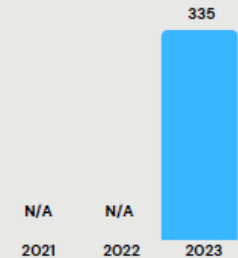


## Calendar Raffle

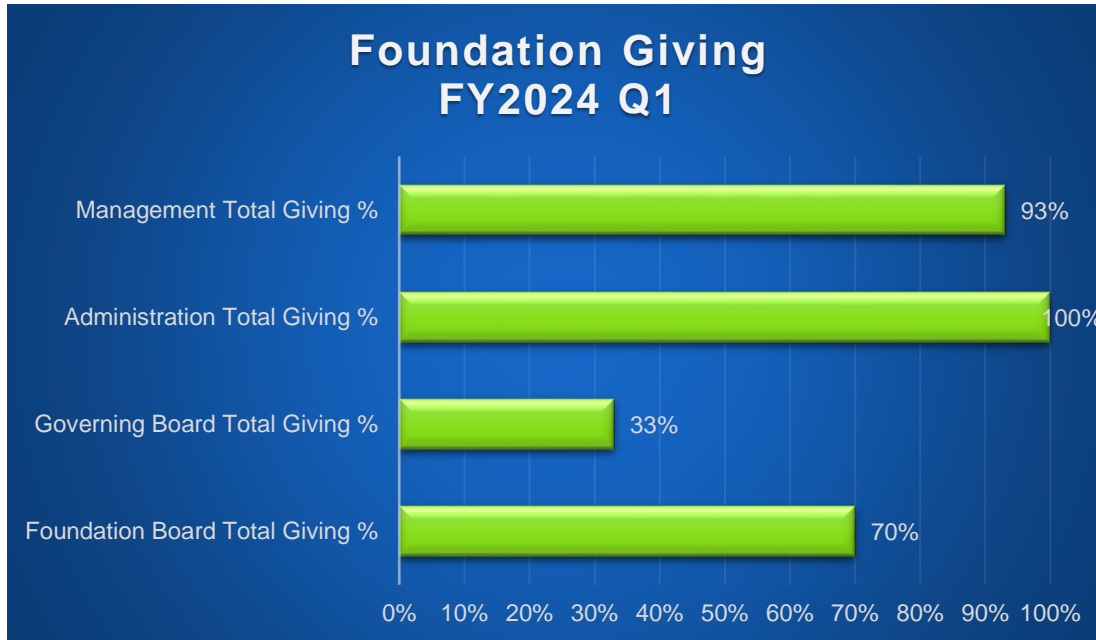
### Total Net Dollars



### Total Calendars Sold



# Foundation Dashboard



# PR/Marketing Report

## Complete Shoulder Care



Stoughton Health OrthoTeam Clinic accepts over 160 area insurance plans including Dean Health Plan and Quartz. Please check your individual plan regarding coverage of services.

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

900 Ridge Street, Stoughton  
(608) 877-3419



A Clinic of Stoughton Health • [orthoteam.com](http://orthoteam.com)  



**Urgent Care**  
**StoughtonHealth.com**

## GENERAL SURGERY CLINIC

**STOUGHTON**  
HEALTH  
[Stoughtonhealth.com](http://Stoughtonhealth.com)



Aaron Schwaab, M.D.

**APPOINTMENTS AVAILABLE WITHIN A WEEK!**

LAMAR

## Dietitian Approved Grocery Store Tour



Join a Stoughton Health Registered Dietitian Nutritionist for a hands-on education session to learn what healthy shopping looks like aisle by aisle.

**Tuesday, January 9th**  
**11 a.m. to noon or 6 to 7 p.m.**  
**Aldi - 1399 US Highway 51, Stoughton**

To register for this free event, please go to [stoughtonhealth.com](http://stoughtonhealth.com) and click on "Classes & Events." Space is limited so please register early. Questions? Please call (608) 877-3498.



[stoughtonhealth.com](http://stoughtonhealth.com)





# Chief of Staff Report

Dr. Aaron Schwaab

## One Year Appointments

### ■ One Year Appointments:

- 1) Steven Rembalski, APNP, SWEA, Allied Health Professional
- 2) Nicole Reilly, MD, Cardiology, UW Health, Courtesy
- 3) Nicholas Reason, MD, Radiology, Madison Radiology, Courtesy
- 4) Noreen King, MD, OBGYN, SSM Health, Courtesy
- 5) Tyler Boschuetz, MD, OBGYN, SSM Health, Courtesy
- 6) Michael Berger, CRNA, Stoughton Hospital, Allied Health Professional
- 7) Marissa Decker, MD, OBGYN, SSM Health, Courtesy
- 8) Tara Kane, APNP, ITP, Allied Health Professional
- 9) Oluwabukola Shoaga, MD, Hospital Medicine, Beam Healthcare, Active

### ■ Flagged Files: None at this time.



# Two Year Re-Appointments

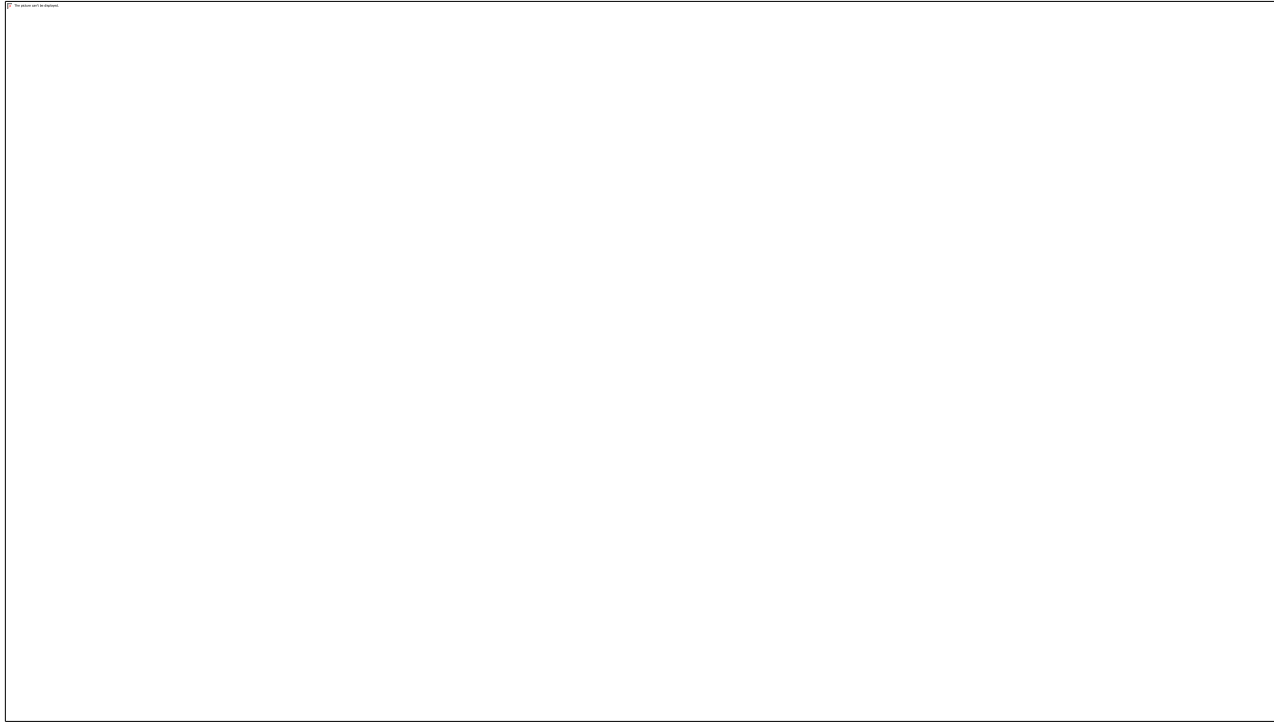
## Two Year Re-Appointments:

- 1) Parah Tipnis, MD, Cardiology, UW Health, Courtesy\*
- 2) Alexia Hammond, MD, Cardiology, UW Health, Courtesy
- 3) Morgan Lively, DO, Family Medicine, SSM Health, Courtesy
- 4) Christopher Taylor, MD, Family Medicine/Vasectomy, SSM Health, Courtesy
- 5) Sarjoo Patel, MD, Hospital Medicine, Beam Healthcare, Active\*
- 6) Dana Irrer, MD, Pediatric Cardiology, UW Health, Courtesy
- 7) Mila Quinn, MD, Radiology, Madison Radiology, Courtesy
- 8) Gretchen Foltz, MD, Radiology, Madison Radiology, Courtesy
- 9) Harold Bennet, MD, Radiology, Madison Radiology, Courtesy
- 10) Daniel Hoefler, MD, Radiology, Madison Radiology, Courtesy
- 11) Cenon Buencamino, Radiology, Madison Radiology, Courtesy

## Flagged Files: None at this time.

\*Expedited privileges required due to expiration prior to the Governing Board meeting on January 24, 2024.

# Medical Outpatient Building Timelapse







# Adjournment

Thank you!