Meeting Title:	Board of Trustees Meeting	Chairperson:	James Moreau
Date/Time:	July 16, 2025/ 6:30 p.m.	Location:	Norton County Hospital

Norton County Hospital
Board of Trustees Meeting Minutes

Attended	Position
James Moreau	Board President
Jimmy Todd (via Zoom)	Board Vice President
Lee Jueneman	Board Secretary
Jerry Hawks	Board Member
Randa Vollertsen	Board Treasurer
Robert Wyatt	Board Member
Andrew Black	Board Member
Marvin Matchett	County Commissioner
Kevin Faughnder	NCH Chief Executive Officer
ReChelle Horinek (via Zoom)	NCH Chief Financial Officer
Shannan Hempler	NCH Human Resources Director
Klare Bliss	NCH Chief Information Officer
Amanda Kuxhausen	NCH Quality Control and Risk Management
Sarah Mohr	NCH Chief Nursing Officer
Tabetha Harris	NCH HR Assistant/ Public Relations/ Marketing
Caryl Hale	Norton Regional Health Foundation

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	Agenda Item	Action and/or Time
1.	**June 18th, 2025 Board Meeting Minutes** A motion was made to move agenda item #3.-Executive Session of Non-Elected Personnel, to the end of the meeting so non-essential personnel could head home.	Motion by **Lee Juenemann** to move agenda item #3 to the end of the meeting. Second by **Jerry Hawks.** Motion carries unanimously. Motion by **Robert Wyatt** to approve the minutes of the June 18th, 2025 meeting. Second by **Jerry Hawks.** Motion carries unanimously.
2.	**Consent Agenda Items:** a) Personnel Information b) Payroll Briefing c) Accounts Payable – Bills	Motion by **Randa Vollertsen** to approve the Consent Agenda Items as presented. Second by **Robert Wyatt.** Motion carries unanimously.
5.	**Executive Session: Risk Management**	**James Moreau** moved to enter into executive session: K.S.A. 75-4319(b)(5) for the discussion of of matters relating to actions adversely or favorably affecting a patient or person; with the Risk Management, the Board, CEO, and commissioner in attendance, not to exceed 10 minutes. Seconded by **Robert**

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		Wyatt. Motion passed. The executive session begins at **6:33 p.m.** Exit at **6:38 p.m.**
6.	**Board Action from Executive Session**	n/a
7.	**Risk Management/ Quality Assurance** Amanda Kuxhausen, the Risk Management and Quality Assurance Coordinator, presented the following updates: **Risk Management** A total of 52 incidents were reported this quarter, higher than usual but attributed to improved education and staff willingness to report, which is a positive trend. The board noted a decline in medication errors, previously the most frequent category. Amanda reminded the board that some numbers may be skewed due to incorrect categorization. **Quality** Twelve patient surveys were received through July 11, representing the ER, Outpatient Surgery, HST, and PSG departments. The stoplight report showed slightly more yellow than desired due to one survey scoring 4/5 rather than 5/5 across the board. Despite this, patient comments continue to reflect excellent care, such as: • "The nurses were exceptional! So much love & compassion. Was so blessed to have them. They took excellent care of my dad!" • "Excellent care. Excellent nurses. Excellent administration." • "Excellent nurses, NAs, staff — above and beyond. Very caring and compassionate facility." Amanda reviewed the NCH QAPI (Quality Assurance & Performance Improvement) program, noting that "Marketing" has been added as a tracked department. The current list of SQSS departments was provided for board review, with an invitation to suggest any additions. She presented regulatory requirement C-1300 and requested that a board member attend QAPI Committee meetings quarterly to demonstrate governance-level engagement. The board discussed their role as governance rather than operations and expressed that receiving these monthly QAPI updates satisfies their oversight responsibilities. The board deferred further QAPI governance to Kevin.	

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8.	**CIO Report**
	Klare Bliss, the Chief Information Officer (CIO), provided the following comprehensive updates for the last month:
	Cerner EES
	• Lab Analyzer MDI interface successfully went live on July 7.
	• Antimicrobial Usage Reporting interface is complete.
	• Clinical Data Exchange (Seamless Exchange) kicked off July 9 and is expected to go live mid-August. This will automate patient data imports from outside facilities for more coordinated care.
	• Cerner Revenue Cycle Optimization is in planning and will be paired with Eide Bailly's audit to evaluate and improve the full revenue cycle while meeting USDA audit requirements.
	• Cerner OH Patient Accounting rollout remains scheduled for July–August 2026.
	• Ongoing optimization ideas under review:
	  o EKG interface
	  o Clinical AI Agent for documentation
	  o Quality Control on all lab devices
	• Clinical AI Agent demo received positive feedback from providers for ease of use and productivity. A 90-day trial is planned.
	Cerner Change Governance
	• Ongoing meetings with departments to identify needed Cerner changes and generate Service Requests (SRs).
	• Current project: Blood Bank Charges (collaboration between Nursing and Lab).
	• 12 open Support Requests:
	  o 9 for lab order sets and workflow adjustments
	  o 3 for functionality or training issues
	Additional Updates
	• Leadership Norton County's next session begins in August.
	• Internal policy manager system was upgraded and converted on July 10.
	• IT risk report with Arctic Wolf shows strong progress:
	  o Risks reduced to 694, with 764 already mitigated.
	  o Remaining inherent risks are actively monitored.
	  o Staff show improved awareness of phishing attempts.
	• Most Windows 10 computers have been upgraded. A few remain in use for legacy software compatibility.
		Motion by **Andrew Black** to approve the Oracle quote in the amount of $7,024. Second by **Lee Juenemann.** Motion carries unanimously.

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9.	**Medical Clinic Update** Klare Bliss reported for Mel DeWitt, the Norton Medical Clinic Manager, and shared the following Medical Clinic updates: **Clinic Visit Summary (June/May Comparison)** • Patient Visits: 930 / 958 • Acute/Same Day Appointments: 319 / 277 • Saturday Visits: 17 / 24 • Medicare Annual Wellness Visits: 16 / 18 • Follow-Up Visits: 125 / 140 • Established Care Visits: 26 / 28 • Physicals: 48 / 48 • Nurse Visits: 94 / 89 • DOT Physicals: 4 / 5 • No Shows: 37 / 37 • Wellness Visits: 24 / 25 • Well Child Checks: 11 / 6 • Procedures: 12 / 15 **Vytalize Program** • May payment has not yet been received. • April payment was $10,520.35. **Staffing** • Debra Ward began as the new receptionist on July 9. **Quality Initiative – KanSurvive 2.0** • The KanSurvive 2.0 program has launched, providing better education and processes to support patients with cancer diagnoses. • Data will be collected at 6, 9, and 12 months to monitor patients throughout their treatment journey.	
10.	**Ni2 Update** ReChelle Horinek, the Chief Financial Officer, provided the following comprehensive updates for Ni2 from last month: Administrative calls with Ni2 leadership will now take place every six months to support ongoing communication and oversight. She noted a significant increase in insurance revenue for May, attributed to strong pharmacy-related income. Days in Accounts Receivable remain excellent at 44 days from procedure to billing, compared to the national average of 55. Cash collections continue to meet monthly expense requirements, ensuring stable financial performance.	
11.	**2026 Operating Budget**	Motion by **Jimmy Todd** to approve the

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	Paper copies of the proposed FY 2026 operating budget, departmental budget breakdowns, and the current modernization list were distributed to board members at the last meeting for review throughout the month. ReChelle Horinek highlighted that the FY 2026 budget contains many moving parts, with several variables still unknown. Notably, the addition of the new pain management group is expected to drive higher outpatient revenue alongside increased professional fee expenses, although the exact referral volume remains uncertain. The revenue budget was developed based on prorated 2025 statistics, incorporating several key assumptions and updates: • "Other operating revenue" line reflects increased funds from the 340B program. • Deductions from revenue were budgeted at 49% of gross revenue, an increase from the 40–45% range in prior years, due to current Medicare rates. • Salaries include a 3% increase, while employee benefits were calculated using current FICA, KPERS, and health insurance rates. • Utilities were budgeted with a 5% increase, and facility insurance premiums were adjusted upward to reflect higher estimated liability and property coverage. • Nonoperating revenue from the sales tax was annualized for the full year. Additional points noted include: • A $300,000 payable to Medicare was booked anticipating current year adjustments; however, higher utilization of pain management services may help offset this expense next year. • Outpatient medication treatments involving high-dollar drugs have increased, but the persistence of this trend is unclear. • Clinic revenue was budgeted at FY 2025 levels, with some short-term decline expected as new medical staff transition in to replace a retiring APP. • Revised payer contracts have been negotiated to improve reimbursement rates. Professional fee expenses have increased due to anticipated costs for the pain management provider, CRNA coverage, Dr. Gable's monthly visits, and potential temporary ED coverage following Jonna's retirement. These expenses are considered "good" as they are expected to generate corresponding revenue. When asked about a cash flow projection for the anticipated revenue increases, ReChelle confirmed one was not included in the	operating budget for 2026. Second by **Lee Juenemann.** Motion carries unanimously.

	current budget but could be prepared if desired. Given the many variables and unknowns this year, estimates were intentionally conservative and balanced to reflect a mid-ground approach.	
12.	**CFO Report of Statistical/Financial Information** ReChelle Horinek, the Chief Financial Officer, presented comprehensive financial and statistical updates from June 2025: Books will be officially closed on Monday. • The Preliminary Net Operating (PNO) statement and balance sheet will be available next week for review. We had an exceptionally strong year statistically, with total patient days increasing from 973 last year to 1,135 this year. Additionally, numbers for total services showed a general increase across the board. During the discussion, Randa asked about the "Versa badge." This is a tracking system used by providers and nurses to log work hours by department. The data collected through Versa badges will help improve allocation of labor costs, which in turn supports more accurate reimbursement rates on the cost report.	
13.	**Financial Affairs of Non-Elected Personnel** Financial Assistance YTD: $14,241.51 Bankruptcy YTD: --	Motion by **Randa Vollertsen** to send an amount not to exceed $30,478.80 for attempted collections. Second by **Andrew Black**. Motion carries unanimously.
14.	**CNO Report** Sarah Mohr, the Chief Nursing Officer (CNO), presented comprehensive updates for the reporting period of June 1st to June 30th: **Activity Overview** • Avel E-Emergency Activations: 2 encounters in June • Daily Census: 2.7 patients, down from 4.2 in May (1.5 in June of last year) • Inpatient Admissions: 11 patients, down from 19 in May (3 in June of last year) • Inpatient Days: 82 days, down from 130 in May (38 in June of last year) • ER Visits: 162 visits, down from 191 in May (168 in June of last year)	

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	• Outpatient Visits: 227 visits, down from 243 in May (161 in June of last year) **Personnel Updates** • Kade Wessel started as a PRN lab technician **Operations Updates** • *Lab (Julie):* New analyzer went live June 27. Triage machine calibrated and ready as backup. Continuing COLA inspection preparations. • *Outpatient Therapy (Travis & Jay):* Healed several wounds last month; received referrals for new ones; ongoing promotion of services. • *Specialty Clinic (Jen):* Dr. Straub's last clinic in August; Dr. Asghar begins September 9, seeing patients first Monday monthly. • *Respiratory (Kayla):* Working on sleep lab recertification. • *Nursing (Stefanie):* Skills day planned for July 21. Discussed on-call security for mental health patients; county support appreciated. Continuing education to improve HCAHPS scores, focusing on patient education, empathy, and active listening. • *Radiology (Mitch):* New DEXA machine installed; staff training completed; implementation smooth. • *Holistic Pain Management (Judy):* First procedure day July 17. CRNA changed to Brad Wertz; Trent Blackwill covering including first clinic day. Dr. Wheeler and Dr. Gabel adjusted surgical days. • *Pharmacy (Charli):* Revamping intubation process; Sarah to present updates at medical staff meeting. **Education Initiatives** • OB packs revamped; emergency delivery and equipment training incorporated into nursing meetings. • Mock survey materials distributed to prepare departments. • Collaboration with High Plains Mental Health to offer free training on de-escalation and compassion fatigue. • Insights gained from a recent Citizen's Health survey to aid upcoming mock surveys. **Customer Service Focus** • Emphasis on active listening and showing empathy toward patient symptoms and concerns. **Staff Shout-Out** • Thanks to staff who responded on July 4 mass trauma event. Charge nurse Sierra Wahlmeier led an organized response. Despite the holiday, sufficient staffing ensured two nurses per patient, plus support from RTs, radiology	

	techs, registration, and maintenance. The team's dedication during this challenging time is highly commendable.	
15.	**CEO Report** Kevin Faughnder, the Chief Executive Officer, provided a comprehensive report on various initiatives and updates: **Physician Recruiting** • Interviewed a perspective provider on June 9. After meeting with providers, it was decided not to extend him a job offer. • Held a follow-up call with our recruiter at Elite 365 on July 10. They now have two recruiters working on our behalf and will also assist with recruiting an APP at no charge. • Signed a contract with Kansas University Medical Center's Kansas Recruitment & Retention Center to assist with recruiting a new physician and APP. **Security Officers** • The County Commissioners approved our plan to create a pool of security officers for staff to call as needed. • Lacey Ninemire developed and delivered an excellent presentation on June 23. The commissioners agreed to raise the mill levy by 0.01% to help cover costs. • NCH will pay the hourly fee when a security officer is called. Finalizing guidelines for when officers should be called, and will post positions once ready. **Communications Campaign** • The fourth *Destination Health* event is scheduled for July 30, focusing on heart and vascular services at NCH. • Drafted a newspaper article about how the 1% tax money is being used; waiting for some project invoices before finalizing and publishing. **Multi-Vehicle Accident Response** • On July 4, NCH initiated Incident Command for an MVA west of town. • Charge Nurse Sierra sent a secure message immediately after EMS dispatch. • The team quickly mobilized a surge team and applied lessons learned from the May MVA. • Staff handled the situation with calm professionalism under challenging circumstances. **Modernization Projects** • Received a $23,000 donation from the Baird Memorial to purchase a segmented pressure machine. The machine arrived last week; training scheduled July 22–24 for Amy	

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	and Marla. Outreach letters sent to NW Kansas facilities about the new service. • Holistic Pain Management (HPM) began overseeing our pain clinic this month. With local NW Kansas providers, reliability has improved compared to the prior provider. Physical Therapy already reports increased referrals from HPM. • Radiology received and trained on the new DEXA machine, which is a significant upgrade over the prior system. • Don's Flooring installed new blinds this month, and the maintenance team began work on the whirlpool project, expected to finish by month's end. • The Employee Committee created a "Healing Garden" near the Outpatient area. Employees are scheduled to water and maintain it, providing a relaxing space for patients and staff. **Community Engagement** • On June 25, Sarah and I participated in the Norton Community Foundation's "Match Day." Thanks to the support of the Norton Regional Health Foundation, enough funds were raised to replace all IV pumps at NCH. • On June 26, met with six other NW Kansas hospital CEOs to discuss improving collaboration across facilities. **Grant Submission** • Submitted a Letter of Intent (LOI) to the Patterson Foundation on June 30, requesting assistance to update the sprinkler system and oxygen tanks. If approved, we will submit a full application with quotes by July 25. **Employee Appreciation** • The Employee Committee hosted a cookout on July 2 to thank staff for their hard work. Desserts were ordered from Pizza Hut to support donations to Officer Geade's family. **Lab Analyzer Upgrade** • The Vitros lab analyzer is now fully operational. The Roche machine will be removed, and Roche has confirmed termination of the extended service contract. The savings from ending that contract essentially funded the new analyzer. **Legal Counsel** • Selected Catherine Walberg of Goodell Stratton Edmonds and Palmer, LLC, as our new attorney for complex employee and healthcare matters. John McClymont will	

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	continue to handle local issues. Letters were sent to John and Frankie notifying them of the change.	
16.	**Commissioner Report** Garrett was unable to attend, Marvin Matchett presented. The board voted to advance the county budget to the next state-mandated 3.35% increase, allocating an additional 0.01% to the hospital to help cover the cost of a security officer for the facility during emergency situations. Thank you to the commissioners for their quick action and for ensuring we have the support needed to keep our employees safe.	
17.	**Board Member Reports** James added that city police have also agreed to stay with a combative patient until they are calm or until they receive another call.	
18.	**Other Business** Caryl Hale presented the final tally from the Match Day fundraising effort, reporting $17,900 raised to replace the IV pumps. Thank you to all the donors who contributed to support this important project.	
3.	**Executive Session: Non-Elected Personnel**	**Jerry Hawks** moved to enter into executive session: K.S.A. 75-4319(b)(1) for the discussion of personnel matters of non-elected personnel; with the Board, CEO, and County Commissioner in attendance, not to exceed 20 minutes. Seconded by **Andrew Black**. Motion passed. The executive session begins at **8:20 p.m.** Exit at **8:40 p.m.**
4.	**Board Action from Executive Session**	n/a
	Executive Session: Non-Elected Personnel	**Jerry Hawks** moved to enter into executive

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		session: K.S.A. 75-4319(b)(1) for the discussion of personnel matters of non-elected personnel; with the Board, CEO, and County Commissioner in attendance, not to exceed 30 minutes. Seconded by **Andrew Black**. Motion passed. The executive session begins at **8:40 p.m.** Exit at **9:03 p.m.**
	Board Action from Executive Session	n/a
19.	**Adjourn**	Meeting adjourned at **9:03 p.m.**

Lee Jueneman, Secretary