



**Board of Trustees Minutes
Wednesday, May 7, 2025**

The March meeting of the Board of Trustees of Kearney County Health Services met in the Functional Health Room of Kearney County Health Services, 727 East First Street, Minden, Nebraska on Wednesday, May 7th, 2025. Notice of the meeting was posted at Kearney County Health Services, Hospital, Minden Medical Clinic, Minden Post Office, Minden First Bank and www.kchs.org under Board of Trustees. A Board Packet with an agenda of the meeting, minutes, and other pertinent information was emailed to each board member prior to the meeting.

I. Call to Order and Roll Call

Chairman Dahlgren called the meeting to order at 12:01 PM and called attention to the Public Meeting Laws that are posted in the meeting room.

Present:

Board Members

AJ Dahlgren, Chairman
Jeff Hanson
Stephen Olson, Secretary
Sam Stadler
Andy Grollmes

KCHS Staff

Luke Poore, CEO
Gavin Blum, CFO
Rebecca Cooke, COO
Kendra Brown, CNO
Mark Klabunde, Director of Pharmacy Services
Sarah Halkyard, Directory of Radiology
Janell Shelton, Director of Primary Care
Anita Wragge, Marketing/Outreach Coordinator
Douglas Althouse, MD

County Board of Commissioners

Brent Stewart, County Liaison

Others

None

II. Public Comments/Communication

Luke Poore, CEO, mentioned a thank you note from St. Jude for an employee-driven donation, a sponsorship for the 2025 Good Samaritan golf Tournament, thank you cards for memorial gifts, and passed along several thank you notes from local organizations that KCHS Employee Jean donations were given.

III. Approval of Minutes

Action Taken: A motion was made by Jeff Hanson to approve the March 26, 2025 meeting minutes. The motion was seconded.

Voting Aye: Grollmes, Olson, Stadler, Dahlgren, Hanson
Motion Carried.

IV. Old Business

1. Website Development

This project will remain ongoing for the next several months as the new website is developed.

2. Anthrex Surgical Equipment Proposal

Equipment previously approved was partially delivered. This will remain ongoing as the remainder of the parts are shipped and delivered.

3. Rutt's Mechanical and Holmes Plumbing Proposal

This project will remain ongoing. A May 18th date to shut off water and install valves has been planned.

4. Phillips Ultrasound Probe (Urology)

This project has been completed.

V. New Business

1. Insurance Renewal (Proposal-Jones Group)

Gavin Blum, CFO, brought forward for premium changes to our insurance policies. The proposal included premium increases in the areas of property, commercial auto, cyber liability, general liability, and provider malpractice. Increases are currently the state of the industry. Increased cyber security and an increased limits on providers also contributed to the increases.

Action Taken: After discussion, Sam Stadler made a motion to approve the request as proposed. The motion was seconded.

Voting Aye: Grollmes, Olson, Stadler, Dahlgren, Hanson
Motion Carried.

VI. Reports

1. Kearney County Medical Fund

The Medical Fund did not meet in May due to scheduling conflicts. The group continues to work on the Annual Golf Tournament. Materials to sponsors and teams have been sent out. The group will meet again in June.

2. Financial/Statistical Reports and Update

a. Statistical/Financial Report/Bad Debt Analysis

Balance Sheet	March 2025	February 2025
Cash and Cash Equivalents	6,444,392	7,189,609
Total Current Assets	22,005,362	21,471,169
Net Capital Assets	12,656,339	12,772,721
Total Assets	34,661,701	34,243,890
Total Current Liabilities	1,673,671	1,539,853
Total Liabilities	4,039,573	4,100,722
Net Assets	28,948,456	28,603,315

Net Assets and Liabilities	34,661,701	34,243,890
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Statement of Profit & Loss	March 2025	Budget	YTD
Net Operating Revenue	1,842,639	1,572,992	14,406,554
Total Operating Expenses	1,577,289	1,526,405	13,859,683
Income (Loss) from Operations	265,350	46,587	546,871
Non-Operating Revenue	79,791	83,842	701,353
Net Earnings (Loss)	345,141	130,428	1,248,224

Profitability Indicators	August 2024	September 2024	October 2024	November 2024	December 2024	January 2025	February 2025	March 2025
Days of Cash on Hand	357	338	355	373	359	378	407	404
Days in Patient AR (Gross)	56	64	58	54	55	51	49	48
Costs Per Day								
Clinic	7,266	8,882	8,052	7,993	8,505	8,838	6,046	5,938
Hospital	37,947	40,046	39,141	36,578	38,289	37,295	38,555	39,841

Statistical Summary		Statistic
Acute Admissions	12	Tied for 2 nd most since August 2021
Acute Days	42	2 nd most since September 2016
Observation Days	22	2 nd most in at least 5 years
X-Rays	200	2 nd most this fiscal year
CT Scans	173	Most ever
ER Visits	119	Tied for 2 nd most ever
Specialty Clinic Visits	172	On track for 1,887 (1,887 in 2024)
Clinic Visits	725	On track for 9,228 (8,644 in 2024)
Providers		
Jordan Kohtz, APRN	28	ER visits, tied for most since Sept 2024
Diane Jackson, APRN	32	32 ER visits, 2 nd most this fiscal year

Accounts Payable Register (Gross)	March 2025
2 Payrolls & 2 Check Runs	1,287,099.03

Bad Debt Analysis				
March 2025	February 2025	January 2025	Fiscal Year Average (Current)	Fiscal Year Average (Prior Fiscal Year)
38,910.58	24,059.93	56,814.70	47,000	43,000

Action Taken: A motion was made by Sam Stadler to approve the Financial and Statistical Report, including the Bad Debt Report. The motion was seconded.

Voting Aye: Stadler, Dahlgren, Hanson, Grollmes, Olson
Motion Carried

Gavin also provided the group with a current Insurance Log Report. This report will be used at the end of the fiscal year to make decisions at renewal time.

3. Quality Assurance Report

Kendra Brown reported for Danielle Morgan (RN) on the Quality Assurance report for April. The following departments reported:

- Radiology
Current project is tracking how many MRI orders are being sent out of KCHS. Sarah requested ER stroke protocol patients to track and worked with Jen to create a report in Cerner to help pull stroke or stroke protocol patients. Radiology is also working on a project to measure how often low dose lung screen CT exams lead to early cancer diagnosis

and identify a way to ensure that patients are receiving follow-up scans. They will be starting a new project of implementing ALARA CT radiation monitoring

- **Central Sterilization**
Over the next 6 months, they will inventory all instruments and update all instruments lists for surgical trays. The back room has been organized and instruments have been gone through to see what should be kept and what should be discarded.
- **Business Office**
New project to track ER admissions to make sure that insurance, identification and all other important information has been collected. Outpatient Services is continuing their project on bar code scanning of medications for outpatients and treatment rooms. It was decided collectively that ALL outpatients coming in to register at hospital admissions will receive a scannable name bracelet.
- **Acute**
Acute care has implemented the PREPARE tool to gather Social Determinants of Health information on acute care patients. This is a new CMS measure that is a requirement for the 2025 reporting year.
- **Somnitech**
Project to create a cohesive effort between partnered facilities and the contract sleep lab services; to develop, implement, and maintain effective organization-wide performance improvement. Including the ongoing monitoring of client/patient grievances/satisfaction, the monitoring of function of sleep equipment, turnaround times, scoring reliability, clinical competency, and review patient records.
- **Clinic**
Current project to improve HgbA1C among clinic pts who come to their yearly wellness visit at 6/12 months. Another project is to decrease the amount of No-Show appointments per month to below 15. Plans to use newly written policy, education of policy to patients, tracking of follow up calls and sending No Show letters. The goal is to make sure that patients receive the appropriate care and helping assure that patients are able to receive timely care by not having open times in provider schedules.
- **Infection Control**
Handwashing compliance and monitoring continues. Goal is to have 90% hand hygiene compliance. Flu season has wrapped, but employees are urged to continue to use infection control practices when ill or caring for ill patients.
- **PT/OT/ST**
Handwashing project is started. Goal is to improve hand hygiene so that therapists are demonstrating hand hygiene before and after each patient treatment.
- **IT**
New project is to monitor internet connections, tracking up and down time.

Action Taken: A motion was made by Stephen Olson to approve the Quality Assurance Report
The motion was seconded.

Voting Aye: Hanson, Grollmes, Olson, Stadler, Dahlgren
Motion Carried.

4. Ancillary Services Report

Rebecca Cooke (COO) reported on the Operations Report for March 2025. The Senior Life Solutions Department currently has 10 patients enrolled.

Rebecca also reviewed some marketing data from her report as well as Human Resources as it relates to recruitment and termination.

Our Rater8 overall response rate is 25.17% of patients responding. KCHS has earned an overall 4.9 stars out of 5, with 2,698 total ratings. KCHS has a Google rating of 4.8 out of 5 with 251 total reviews.

The top page views on our website were for Home, Minden Medical Clinic, Careers, Department Directors, Primary Healthcare and Urology.

Hires

Position	Department	Status
Surgical RN	Acute/Surgery	Part Time
Environmental Services Tech	EVS	Full Time
Clinic LPN	Clinic	Full Time
Lab Tech (MT)	Lab	Full Time

Separations

Position	Department	Status
Acute RN	Acute/ER	PRN
Patient Care Tech	Acute	PRN
Surgical RN	Acute/Surgery	PRN

Recruiting

Position	Department	Status
Director of Surgical Services	Acute/Surgery	Full-Time
RN (Weekends Only)	Acute	Part-Time
RN (Night)	Acute	Full-Time
Nursing Externship/Internship	Acute	Temporary
EVS Tech/Housekeeper	Environmental Services	Part-Time

Turnover Rates

March 2025	FYTD	Prior FYTD
1.5%	1.5%	3.1%

Employment Numbers

March 2025	Total	Full-Time	Part-Time/PRN	FTEs
	137	90	43	108.64

Safety/Risk Incident reports were reported and shared with the Board of Trustees

5. CEO Report

a. Outpatient Services

Urology- Dr. Matthew Rutman, MD has officially started. There will be a marketing push in collaboration with inReach beginning soon, some things have begun on this front internally.

Orthopedics - Dr. Davis Hurley is both committed, and signed. He is planning to begin outreach in Minden in July 2025. Credentialing is underway, schedule is agreed on, now working on clinic space setup and preparation.

Cardiology- here is some discussion on Dr. John Waters, MD (NHI), Dr. Thomas Lanspa, MD (Bryan Health – Platte Valley Medical Group), and Dr. Ramakrishna Gorantla, MD (NHI), and specialty clinic utilization.

b. Strategic Planning Update

Medical Staff decided to hold approval a few weeks before their next meeting in May, on the Strategic Plan Review, to allow for further time to take a look. This will be brought for Board of Trustee approval when we meet in three weeks for our May 28th meeting.

c. Policies for Board Approval

- Cash Pay Services - Business Office *(New)*
- Prior-Authorization Workflows in Cerner - Business Office/Clinic *(Revised)*
- Medicare as a Secondary Payer - Business Office *(New)*
- Blood Glucose Monitoring, Infection Control Considerations - Infection Control *(Revised)*
- Tobacco Free Workplace - Human Resources *(Revised)*
- Drug-Free & Alcohol-Free Workplace - Human Resources *(Revised)*
- Admin Contract Media - Radiology *(Revised)*
- CT Calcium Score Screen - Radiology *(New)*
- Patient and Visitor Photography Guidelines -All Departments *(New)*

Action Taken: A motion was made by Sam Stadler to approve the policies as presented by Luke Poore, CEO. The motion was seconded.

Voting Aye: Grollmes, Olson, Stadler, Dahlgren, Hanson
Motion Carried.

6. Medical Staff Report

Dr. Douglas Althouse provided the Medical Staff Report. He reported that the clinic and ER groups are very strong, our specialty clinics are growing with new services added. He mentioned that it is a great model to have dedicated ER providers.

VII. Executive Session

Action Taken: At 1:01 PM, a motion was made by Jeff Hanson to enter into executive session for Credentials, Charity Care, Personnel and Legal. The motion was seconded.

Voting Aye: Stadler, Dahlgren, Hanson, Grollmes, Olson
Motion Carried.

The below applications were submitted for appointment, reappointment or termination to the KCHS Medical Staff by Janell Shelton, Clinic Office Director.

APPLICANT	SPECIALITY	FACILITY	STAFF CATEGORY	FIRST APPOINTMENT	RE-APPOINTMENT
KAITLYN CARLSON, APRN	FAMILY MEDICINE	KEARNEY COUNTY HEALTH SERVICES	ACTIVE APP	8/28/2024	5/1/2025
BRIAN TOALSON, MD	PATHOLOGY	PATHOLOGY MEDICAL SERVICES	CONSULTING	4/1/2011	5/1/2025
AARON BENNER, MD	RADIOLOGY	KEARNEY RADIOLOGY	CONSULTING	1/27/2021	6/1/2025
DONNA SMITH, MD	ANESTHESIA	KEARNEY ANESTHESIA ASSOCIATES	CONSULTING	9/30/2015	6/1/2025
BRYCE NOLL, MD	PATHOLOGY	PATHOLOGY MEDICAL SERVICES	CONSULTING	7/1/2025	
APPLICANT	SPECIALITY	FACILITY		PRIVILEGES TERMED	REASON
JENNIFER HUCKABEE, MD	RADIOLOGY	GRAND ISLAND RADIOLOGY		4/2/2025	HAS LEFT THE PRACTICE

Action Taken: A motion was made by Stephen Olson to approve the credential report. The motion was seconded

Voting Aye: Stadler, Dahlgren, Hanson, Olson, Grollmes
Motion Carried.

End of Executive Session: at 1:30 PM, a motion was made by Sam Stadler to end Executive Session.

Voting Aye: Hanson, Olson, Stadler, Dahlgren, McBride, Grollmes
Motion Carried

VIII. Other Comments/Communications

Next meeting will be Wednesday, May 28th, 2025 at Noon in the Functional Health Meeting Room.

IX. Adjournment

The meeting Adjourned at 1:31 PM.

AJ Dahlgren, Chairman

Stephen Olson, Secretary