



**Board of Trustees Minutes  
November 27, 2024**

The September 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, November 27, 2024. 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](http://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 12:00 PM and called attention to the Public Meeting Laws that are posted in the meeting room.

Present:

**Board Members**

AJ Dahlgren, Chairman  
Jeff Hanson  
Dick McBride  
Stephen Olson, Secretary  
Sam Stadler

**KCHS Staff**

Luke Poore, CEO  
Gavin Blum, CFO  
Rebecca Cooke, COO  
Kendra Brown, CNO  
Mark Klabunde, Director of Pharmacy Services  
Janell Shelton, Clinic Director  
Anita Wragge, Marketing/Outreach Coordinator  
Shannon Kuehn, APRN

**County Board of Commissioners**

Brent Stewart, County Liaison

**Others**

None

**II. Public Comments/Communication**

Luke Poore, CEO, mentioned a thank you note from a family for the "Lift Up Thine Eyes" Memorial Book.

**III. Approval of Minutes**

**Action Taken:** A motion was made by Sam Stadler to approve the October 30, 2024 meeting minutes. The motion was seconded.

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

**IV. Old Business**

1. CT Scanner Update

The CT scanner project is completed. The trailer has been removed. During installation, a few unforeseen projects came up including the integrity of the floor.

2. Acute Recliners  
Recliners approved during the July meeting have been ordered. This project remains ongoing, waiting for a ship date.
3. Clinic Sub-Entrance  
The construction on clinic sub-entrance is running long. We are hopeful glass will be in at the end of next week to complete the project.
4. Operating Room Electrical Breaker  
This project is in the works. We are currently on the schedule for December 20<sup>th</sup>.
5. Website Development  
This project will remain ongoing for the next several months as the new website is developed.

## V. New Business

None

## VI. Reports

1. Kearney County Medical Fund  
The Medical Fund continues work on Give Big Minden, to be held on December 13<sup>th</sup>. There will be a social sponsored by First Bank Minden Exchange Bank at the Minden Opera House from 3-6PM on December 13<sup>th</sup>. There are 8 local organizations participating.
2. Financial/Statistical Reports and Update
  - a. Statistical/Financial Report/Bad Debt Analysis

Balance Sheet	October 2024	September 2024
Cash and Cash Equivalents	5,897,082	5,661,276
Total Current Assets	21,307,572	21,244,829
Net Capital Assets	12,761,903	12,827,849
Total Assets	34,069,475	34,072,677
Total Current Liabilities	1,727,277	1,679,938
Total Liabilities	4,310,753	4,364,632
Net Assets	28,031,444	28,028,107
Net Assets and Liabilities	34,069,475	34,072,677

Statement of Profit & Loss	October 2024	Budget	YTD
Net Operating Revenue	1,530,673	1,572,992	6,195,571
Total Operating Expenses	1,614,210	1,526,405	6,210,705
Income (Loss) from Operations	(83,537)	46,587	(15,134)
Non-Operating Revenue	86,874	83,842	346,346
Net Earnings (Loss)	3,337	130,428	331,212

Profitability Indicators	March 2024	April 2024	May 2024	June 2024	July 2024	August 2024	September 2024	October 2024
Days of Cash on Hand	405	363	389	348	399	357	338	355
Days in Patient AR (Gross)	54	62	58	68	62	56	64	58

Costs Per Day								
Clinic	6,850	9,854	7,371	9,963	7,791	7,266	8,882	8,052
Hospital	64,329	35,422	35,241	36,947	33,383	37,947	40,046	39,141

Statistical Summary		Statistic
Mammograms	46	Most since November 2023
Dexascans	11	Most since March 2024
Nuc Med Procedures	4	Most since April 2024
OP Physical Therapy	896	6 <sup>th</sup> most units ever
SLS Units	240	Most since January 2024
Specialty Clinic Visits	180	On track for 1,968 (1,811 in 2024)
Clinic Visits	778	On track for 9,198 (8,644 in 2024)
Providers		
Andy Craig, MD	150	2nd most clinic visits this fiscal year
Doug Wulf, APRN	42	Most monthly ER visits he's ever done

Accounts Payable Register (Gross)	October 2024
2 Payrolls & 3 Check Runs	1,499,380.93

Bad Debt Analysis				
October 2024	September 2024	August 2024	Fiscal Year Average (Current)	Fiscal Year Average (2023 Fiscal Year)
53,424.95	41,727.46	85,581.26	54,000,000	43,000

**Action Taken:** A motion was made by Dick McBride to approve the Financial and Statistical Report. The motion was seconded.

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

b. Bad Debt Report

**Action Taken:** A motion was made by Stephen Olson to approve the Bad Debt Report. The motion was seconded.

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

c. Health Insurance Update

Gavin Blum provided an update on Health Insurance. He explained reinsurance receivables. That level was chosen at the beginning. We get money back when one patient hits the threshold.

3. Quality Assurance Report

Kendra Brown gave the report for Danielle Morgan on the Quality Assurance meeting held on November 21, 2024. The following departments reported:

- Social Services  
Current project is tracking number of Swing Bed Referrals. The goal is to have a consistent number of swing bed patients in the hospital over the next 12 months.
- Dietary  
Project is to implement IDDS diets (International Dysphagia Diet Standardization Initiative) for Acute diet orders. Goal is to have 100% staff trained.
- Outpatient Specialty Clinic

Over the next year, patient diagnoses will be added to their visit upon completion/receipt of the provider's dictation.

- Treatment Room  
Current goal is to scan 90% of patient medications. This project is being collaborated with admissions services. This project continues.
- Human Resources  
Badge access project has been completed. Currently working on getting yearly forms and background checks completed. A new project is to have 100% of signatures completed on Confidentiality State, Corporate Compliance Policies, and Code of Attestation, and the Employee Certification of Compliance.
- HIM  
Needing a new project.
- Nuclear Med  
Project tracking the amount of time it takes from when an order placed for a patient to when the stress test gets completed continues. New project is to have printed EKG on chart for MD to compare to the resting EKG from the nuclear stress test.
- Cardiac Rehab  
Over the calendar year, the goal for cardiac rehab is to having 90% of all cardiac rehab patients who have been formally discharged to have optimal blood pressure.
- ER  
Goal to have 100% or greater of trauma patients each month will have a GCS documented, goal to be measure monthly and reevaluated at 12 months. Currently all trauma charts will be audited monthly for compliance. Another goal is to have 100% of ER patients will have provider notification and arrival times documented.
- Emergency Preparedness  
Project started to review, update and change red flip books located throughout the hospital. Hoping for 100% of flips books to be changed out with new by Jan 2025.
- Senior Life Solutions  
Project is coming to a close as absences are low or needed for situations. A new project is making sure audits done with appropriate information.

a. Stroudwater Published (Swing Bed)

Kendra Brown also presented a study that KCHS participated in called "Critical Access Hospital Swing Bed Programs Outperform Skilled Nursing Facilities on Quality Performance." KCHS submitted data from 2018-2023. Kendra Brown and KCHS were featured in the study for our progress in Risk-Adjusted Performance Improvement in Mobility. Improvement was shown in Q1 2022 at 31.7% and again for Q2 2022 at 64%. We will continue participating in the study.

b. National Rural Rating System

Kendra Brown also discussed our participation in the National Rural Ratings System. We haven't been able to participate in the CMS Star Rating System in the past because being a critical access hospital, we don't have enough patients to have data. A rural ratings system has

been created. We will be participating in the star ratings system, as we feel confident in our care at KCHS.

**Action Taken:** A motion was made by Sam Stadler to approve the Quality Assurance Report  
The motion was seconded.

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

#### 4. Ancillary Services Report

Rebecca Cooke, COO reported on the Operations Report for October 2024. The Senior Life Solutions Department currently has 9 patients enrolled.

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

We've started a new marketing project- a kickoff call is scheduled the first week of December to begin work on the new kchs.org website.

Our Rater8 overall response rate is 24.42% of patients responding. KCHS has earned an overall 4.8 stars out of 5, with 1916 total ratings. KCHS has a Google rating of 4.9 out of 5.

The top searches on our website were for Careers, Medical Clinic and Primary Care Providers.

#### Hires

Position	Department	Status
Radiology Technologist	Radiology	PRN
APRN	Emergency Department	Full Time
Patient Care Tech	Acute	Full Time

#### Separations

Position	Department	Status
Utilization Review Coord	Business Office	Full Time
EVS Tech/Housekeeper	Environ. Services	Part Time

#### Recruiting

Position	Department	Status
LPN	Clinic	Full Time
Director of Surgical Services	Acute/Surgery	Full Time
RN (Night)	Acute	Full Time

#### Turnover Rates

October 2024	FYTD	Prior FYTD
0.7%	21.6%	15.0%

#### Employment Numbers

October 2024	Total	Full-Time	Part-Time/PRN	FTEs
	136	90	43	101.96

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

## 5. CEO Report

### a. Outpatient Services

Urology- Dr. Matthew Rutman, MD is planning to begin his outreach in Minden starting in April 2025.

Orthopedics -We are trying to move Dr. Pravardhan Birth i's clinic/procedure day as the final piece to accommodating the second Orthopedist. I should have more to report on this during our meeting, as Dr. Birthi is working to accommodate our request.

### b. Cerner “Community Works” Program

We have had a kick-off with Cerner with the optimization of our entire Cerner platform pertinent to all areas throughout the organization. During the kick-off, it was discussed around focus areas with workflows/processes, sharing a list of the high-priority areas we would like to have them focus on, as well as the format for how this will take place.

For reference, there are currently (32) issues open with Cerner Support, as of November 22nd . Speaking with Jen Soderquist (Informatics), we have been hanging around this number the past couple months, with approximately (10) being critical status.

### c. Strategic Planning Update

Rob Bloom (Wintergreen Consulting) and Alex Burhop (CHI CAH Network Representative) along with Senior Administration held a kick-off meeting on Wednesday, October 23<sup>rd</sup>. Originally, we planned on Early-December for a follow-up including Board Members, Medical Staff, and Departmental personnel.

Due to some scheduling issues, we are now moving this meeting to Monday, January 13<sup>th</sup>. The tentative schedule is below:

9:00 AM - 10:00 AM - Senior Administration  
 10:00 AM - Noon - Board Members  
 Noon - 2:00 PM - Medical Staff  
 2:00 PM -4:30 PM - Department Directors

### d. Board of Trustees – Bylaws Update

Each year we are obligated to fill out a Quality Assessment for CMS on behalf of our organization. On this assessment, it goes into detail regarding board of trustee oversight with quality initiatives in the delivery of our care. We currently have this in place with our monthly quality assurance report, and board presence in those meetings, however it is not mentioned in our bylaws. I would like to see if there are any reservations to proceeding with this addition in our bylaws.

Our bylaws have not been revised since 2017, but this would be a simple addition.

e. Policies for Board Approval

- Vitros XT 3400 Chemistry-General Operation - Laboratory (*New*)
- Butterfly Ultrasound Probe -Acute/Radiology (*New*)
- Hazardous Medication Policy (USP 800)-Acute/Pharmacy (*New*)
- Transporting with Cardiac Monitor - Radiology (*Revised*)
- Infection Control - Radiology (*Revised*)
- Product Evaluation - Materials Management (*Revised*)
- Fall Prevention - Radiology (*Revised*)
- Mobile Truck Code Blue - Radiology (*Revised*)
- Equipment Failure - Radiology (*Revised*)
- Newborn Testing and Newborn Screening Program - Laboratory (*Revised*)
- Quality Assurance - Laboratory (*New*)
- HIPAA Privacy Training- HIPAA (*Revised*)
- New Employee Training & Orientation - Human Resources (*New*)

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

Voting Aye: McBride, Olson, Stadler, Dahlgren, Hanson

Motion Carried.

6. Medical Staff Report

Shannon Kuehn, APRN reported that Samantha Rogers, APRN has started in the ER. She is orienting with existing providers and will work alone near the end of December. She mentioned that cold and flu season are hitting, making the clinic busy.

**VII. Executive Session**

**Action Taken:** A motion was made by Sam Stadler to enter into executive session for Credentials, Charity and Personnel. The motion was seconded.

Voting Aye: Stadler, Dahlgren, Hanson, McBride, Olson

Motion Carried.

**Action Taken:** A motion was made by Steven Olson to approve Charity. The motion was seconded.

Voting Aye: Dahlgren, Hanson, McBride, Olson, Stadler

Motion Carried.

**End of Executive Session:** at 1:30 PM, a motion was made by Dick McBride to end Executive Session.

Voting Aye: Hanson, Olson, Stadler, Dahlgren, McBride

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
JOHN CRAIG, MD	FAMILY MEDICINE	KEARNEY COUNTY HEALTH SERVICES	ACTIVE	11/24/2014	12/1/2024
JON STEINHAUER, MD	PATHOLOGY	PATHOLOGY MEDICAL SERVICES	CONSULTING	6/26/2024	1/1/2025
YUYANG ZHANG, MD	RADIOLOGY	GRAND ISLAND RADIOLOGY SERVICES	CONSULTING	9/25/2024	1/1/2025
RENEE GRAMS, APRN	FAMILY MEDICINE	KEARNEY COUNTY HEALTH SERVICES	ACTIVE	9/1/2005	12/1/2024
MICHELLE CRAIG, PA-C	ORTHOPEDIC SURGERY	KEARNEY COUNTY HEALTH SERVICES	AFFILIATE	4/28/2021	12/1/2024
TROY KLUTHE, CRNA	ANESTHESIA	KEARNEY ANESTHESIA	AFFILIATE	4/27/2011	1/1/2025
JODIE SCHEELE, PA-C	RADIOLOGY	GRAND ISLAND RADIOLOGY SERVICES	AFFILIATE	1/30/2019	1/1/2025
NING ZHANG, MD	RADIOLOGY	GRAND ISLAND RADIOLOGY SERVICES	CONSULTING	6/30/2021	1/1/2025
KEVIN MARCUM, MD	RADIOLOGY	GRAND ISLAND RADIOLOGY SERVICES	CONSULTING	7/28/2021	11/27/2024
NICK HARTL, MD	HEMATOLOGY & ONCOLOGY	NEBRASKA MEDICINE HEARTLAND HEMATOLOGY & ONCOLOGY	CONSULTING	6/28/2023	1/1/2025
JEFFREY HUBERT, MD	RADIOLOGY	GRAND ISLAND RADIOLOGY SERVICES	CONSULTING	NOT APPROVED	
JESSE KNIGHT, MD	RADIOLOGY	GRAND ISLAND RADIOLOGY SERVICES	CONSULTING	11/27/2024	
KEVIN CARRANZA, CRNA	ANESTHESIA	KEARNEY ANESTHESIA	AFFILIATE	11/27/2024	
SEAN CHANG, MD	RADIOLOGY	GRAND ISLAND RADIOLOGY SERVICES	CONSULTING	11/27/2024	
KYLE HIRSCHMAN, DO	RADIOLOGY	GRAND ISLAND RADIOLOGY SERVICES	CONSULTING	11/27/2024	
MICHELLE SCHIEL, APRN	PAIN MANAGEMENT	GRAND ISLAND PAIN MANAGEMENT CLINIC	AFFILIATE	11/27/2024	
JONATHAN REED, MD	RADIOLOGY	GRAND ISLAND RADIOLOGY SERVICES	CONSULTING	11/27/2024	
VERONICA RUVO, DO	RADIOLOGY	GRAND ISLAND RADIOLOGY SERVICES	CONSULTING	11/27/2024	
DOUGLAS GREEN, MD	RADIOLOGY	GRAND ISLAND RADIOLOGY SERVICES	CONSULTING	11/27/2024	

APPLICANT	SPECIALITY	FACILITY	PRIVILEGES TERMED	REASON
KELLY STEVENSON, PA-C	PAIN MANAGEMENT	GRAND ISLAND PAIN CLINIC	11/2/2024	NO LONGER EMPLOYED WITH GRAND ISLAND PAIN CLINIC
STEVEN MCCORMACK, MD	RADIOLOGY	GRAND ISLAND RADIOLOGY	7/12/2024	NO LONGER WITH GRAND ISLAND RADIOLOGY
ROBERT JAMES, CRNA	ANESTHESIA	KEARNEY ANESTHESIA	11/1/2024	NO LONGER WITH KEARNEY ANESTHESIA

**Action Taken:** A motion was made by Dick McBride to approve the Credential Report. The motion was seconded.



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

**VIII. Other Comments/Communications**

Next meeting will be Monday, December 23<sup>rd</sup>, at Noon in the Functional Health Meeting Room.

**IX. Adjournment**

The meeting Adjourned at 1:31 PM.

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AJ Dahlgren, Chairman

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Stephen Olson, Secretary