



**Board of Trustees Minutes  
Wednesday, September 24, 2025**

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, September 24, 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](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  
Stephen Olson, Secretary  
Sam Stadler  
Jeff Hanson  
Andy Grollmes

**KCHS Staff**

Luke Poore, CEO  
Gavin Blum, CFO  
Rebecca Cooke, COO  
Kelli Carey, Director of Surgery  
Lenny Ginder, Director of Maintenance  
Emily Frey, Sterile Processing Technician  
Shannon Kuehn APRN  
Janell Shelton, Director of Primary Care  
Anita Wragge, Marketing/Outreach Coordinator

**County Board of Commissioners**

Brent Stewart, County Liaison, *Absent*

**II. Public Comments/Communication**

Luke Poore, CEO, mentioned thank you notes from Minden Opera House for a sponsorship, Minden Booster Club, First Bank, Minden TeamMates and a thank you for "Lift Up Thine Eyes"

**III. Approval of Minutes**

**Action Taken:** A motion was made by Sam Stadler to approve the August 27, 2025 meeting minutes. The motion was seconded.

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

**IV. Old Business**

**1. 220V Operating Room - Installation**

This project is ongoing. A panel has been ordered; we expect delivery around the end of November. The installation has been lined up for December.

## 2. HFG Architecture – Master Planning

This project remains ongoing.

## V. New Business

### 1. Rhino Group Proposals- Sterilizer & Sink Upgrade

Kelli Carey, Director of Surgery, and Emily Frey, Sterile Processing Technician, brought forward a proposal to upgrade our sterilization process. With a growing surgical services line and rapidly growing total joint program at KCHS, the need for our current practices to adapt to larger instruments and equipment has come up. Currently, our surgical equipment is being manually washed before sterilization. The proposal included 3 large sinks installed and a Skytron P1000 Washer. Additional costs for electrician, panel and plumbing will also be incurred. We can allow 90-120 days for shipping.

**Action Taken:** After discussion and questions, Stephen Olson made a motion to approve the Rhino Group Proposals for Sterilizer and Sink Upgrade as proposed. The motion was seconded.

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

Motion Carried.

### 2. Ziemba Roofing – Surgery Area Proposals

Lenny Ginder, Director of Maintenance, brought forward a proposal from Ziemba Roofing Company. Maintenance has been dealing with roofing issues above surgery. They have been keeping the problem at bay with yearly coating. As the roofing material is broken apart, the time has come to replace this section of the roof. There is a couple month waitlist for the project.

**Action Taken:** After discussion and questions, Jeff Hanson made a motion to approve the proposal to replace the surgery roof. The motion was seconded.

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

Motion Carried.

## VI. Reports

### 1. Kearney County Medical Fund

The Medical Fund will be moving forward with Harvest Lunches again this year. They will be held the week of October 20<sup>th</sup> in Hildreth, Keene and Minden. The group will also be moving forward with Give Big Minden this year with the hopes of passing along the project to the community in 2027.

### 2. Financial/Statistical Reports and Update

#### a. Statistical/Financial Report/Bad Debt Analysis

Balance Sheet	August 2025	July 2025
Cash and Cash Equivalents	6,724,206	6,575,641
Total Current Assets	21,388,947	21,171,755
Net Capital Assets	12,133,468	12,200,519
Total Assets	36,028,794	35,853,327
Total Current Liabilities	2,878,068	2,706,941
Total Liabilities	4,002,116	4,044,734

Net Assets	29,148,610	29,101,651
Net Assets and Liabilities	36,028,794	35,853,327

Statement of Profit & Loss	August 2025	Budget	YTD
Net Operating Revenue	1,695,333	1,715,063	3,420,046
Total Operating Expenses	1,746,943	1,685,439	3,471,240
Income (Loss) from Operations	(51,610)	29,623	(51,194)
Non-Operating Revenue	98,568	89,025	165,465
Net Earnings (Loss)	46,958	118,648	114,271

Profitability Indicators	January 2025	February 2025	March 2025	April 2025	May 2025	June 2025	July 2025	August 2025
Days of Cash on Hand	378	407	404	348	367	319	371	<b>370</b>
Days in Patient AR (Gross)	51	49	48	55	60	60	54	<b>59</b>
Costs Per Day								
Clinic	8,838	6,046	5,938	6,883	6,516	8,684	7,373	<b>8,793</b>
Hospital	37,295	38,555	39,841	45,051	42,339	48,735	42,908	<b>42,371</b>

Statistical Summary		Statistic
SB Days	116	2 <sup>nd</sup> most in last 12 months
CT Scans	103	3 <sup>rd</sup> least in last 11 months
Cardiac Rehab	21	On track for 228 for FY (404 last year, 608 in '22)
ER Visits	92	Least since November 2024
SLS	225	Least since September 2024
Specialty Clinic Visits	178	On track for 2,292 (1,944 in 2025)
Clinic Visits	738	On track for 8,886 (9,099 in 2025)

Accounts Payable Register (Gross)	August 2025
2 Payrolls & 2 Check Runs	1,425,834.52

Bad Debt Analysis				
August 2025	July 2025	June 2025	Fiscal Year Average (Current)	Fiscal Year Average (Prior Fiscal Year)
39,583.77	50,059.89	47,838.53	45,000	47,000

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

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

### 3. Quality Assurance Report

Luke Poore reported for Danielle Morgan, Director of QA/IC on the Quality Assurance report for September. The following departments reported:

- Lab  
New EKG Machine implementation and process. Training provided to lab and acute staff. Currently awaiting IT integration to CHI. Goal of 100% training completion. New lab equipment implementation and process started. New Procal and Respiratory machines coming soon.
- Environmental Services  
No new report.
- Maintenance

Current project has been tracking work orders and making sure they are completed in a certain amount of time. New work system implemented several months ago. Since this was completed completion times have been improved.

- Pharmacy  
Project to track and monitor bar code scanning on acute/OBS/swingbed patients. On-going, continue to monitor monthly scanning reports. Current project is to monitor override medication being taken out in the Pxyxis. This excludes medications taken out in the ED/Surgery. Majority of override medications are unnecessary at this time. Plan is to get these unnecessary medications “locked” down in the Pxyxis to help improve this. This process to be implemented soon. Documenting narcotic project-Making sure nursing staff is documenting wasted medications within 30 mins of administration.
- Anesthesia  
Current project is making sure anesthesia is documenting appropriately and timely on all surgical and procedure cases.
- Material Management  
Current project started the Value Analysis Committee. Committee meets quarterly. Several products have been discussed. Cost comparison and usefulness discussed. New items and ideas to be discussed at the next meeting
- Restorix Wound Care  
2025 Sept Performance Improvement dashboard uploaded to quality folder.
- Informatics  
Project with the clinic for Annual Wellness visits to help tracking of patients for conditions being monitored.
- Surgery  
Currently project tracking and to decrease the amount of foot traffic in OR spaces during surgery days. Reorganizing and utilizing space better in OR spaces and updating preference cards. Audit has started for surgery patients and Anesthesia record and orders timed/dates/and signed appropriately per hospital survey action plan. Currently tracking follow ups for complications after OR procedures. Current colonoscopy project to follow up with patients post colonoscopy with needs for future follow up/procedure.

**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, Grollmes  
Motion Carried.

#### 4. Ancillary Services Report

Rebecca Cooke (COO) reported on the Operations Report for August 2025. The Senior Life Solutions Department currently has 8 patients enrolled.

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

Our Rater8 July response rate is 30.08% of patients responding. Overall, KCHS has earned an overall 4.9 stars out of 5, with 3,332 total ratings. KCHS has a Google rating of 4.8 out of 5 with 307 total reviews.

The top page views on our website were for Home, Rehabilitation, Minden Medical Clinic, Primary Healthcare Providers and Careers.

#### Hires

Position	Department	Status
Cardiac Monitor Tech/Clinical Support	Acute	Full Time

#### Separations

Position	Department	Status
RN	Acute	PRN

#### Recruiting

Position	Department	Status
Clinic LPN/RN (Addition to Staff)	Clinic	Full Time

#### Turnover Rates

August 2025	FYTD	Prior FYTD
1.5%	10.1%	15%

#### Employment Numbers

August 2025	Total	Full-Time	Part-Time/PRN	FTEs
	137	98	35	116.05

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

## 5. CEO Report

### a. Outpatient Services

- Orthopedics - Still on hold to hear confirmation with Dr. Davis Hurley for Orthopedics through inReach, to compliment Dr. Jeffrey Schopp. First total shoulder procedure is scheduled, first total hip replacement scheduled in November at this time.
- Pain Management - Dr. Pravardhan Birthi, MD has been coming once a month to KCHS for outreach, and sending a PA-C (Jennifer Leiting) as well twice a month. Due to busier days, also procedurally for Dr. Birthi, each will be coming once more each month on top of current schedule.
- Wound Care - Sally Farquhar, APRN has been providing outpatient wound care services in collaboration with Restorix Health. Discussion is occurring on expanding this to inpatient services, to cast a wider net on wound care patients for possible admission from outside referrals.

b. HFG Architecture – Master Planning Update

Follow-up meetings we held the last two weeks with various departments, concluding with administration this last week, wrapping up the interviews portion of the timeline below. Sampson Construction has been identified as the contractor that will provide high-level estimates based on costs in the market.

### Master Planning Services Schedule



c. Policies for Board Approval

InnoWave Ultra Sonic Irrigator – Sterile Processing (*Revised*)  
PureWick Female External Catheter Use – Acute/ER (*New*)  
Specialized Rehab: Occupational and Speech Therapy (*Revised*)  
Protection from Malicious Software – HIPAA/IT (*New*)  
Discharge Planning – Senior Life Solutions (*Revised*)  
Swing Bed Transfer & Discharge Rights – Behavioral Health/Swing Bed (*Revised*)  
340B Split Billing Software – Pharmacy (*Revised*)  
Triage in the Emergency Room – Emergency Room (*Revised*)  
KCHS Acute Care Clinical EMR and Documentation Policy – Acute/ER/Surgery (*Revised*)  
Patient Care Services at KCHS – Acute/ER/Surgery (*Revised*)  
Medication Documentation and Patient Identification – Acute/ER/Surgery/Medical Staff (*Revised*)  
Access to Secured Areas – HIPAA/HR/Safety (*Revised*)  
Acute Care Influenza Strategies – Acute/ER/OP, Infection Control (*Revised*)

**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: Stadler, Dahlgren, Hanson, Grollmes, Olson  
Motion Carried.

6. Medical Staff Report

Shannon Kuehn, APRN provided the Medical Staff Report. Our first total shoulder will be performed this week. This benefits not just our current patients, but patients who don't have a history with our facility. Kelli Carey is doing an excellent job.

### VII. Executive Session

**Action Taken:** At 12:48PM, a motion was made by Stephen Olson to enter into executive session for Credentials, Charity Care, Personnel and CEO Review. 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
Muneer Desai, MD	Radiology	Real Radiology	Consulting	9/25/2025	10/1/2025
Adham Shoujaa, MD	Radiology	Real Radiology	Consulting	7/30/2025	10/1/2025
Kimia Kani, MD	Radiology	Real Radiology	Consulting	9/25/2024	10/1/2025
Ramakrishna Gorantla, MD	Cardiology	Kearney County Health Services	Consulting	9/24/2025	
Jodie Scheele, PA	Radiology	Grand Island Radiology	Affiliate	1/30/2019	11/1/2025
Jennifer Leiting, APRN	Pain Management	Grand Island Pain Management Center	Affiliate	7/30/2025	11/1/2025
Sarah Guthard, PA	Otolaryngology	ENT Physicians of Kearney	Affiliate	9/27/2023	11/1/2025

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

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

**End of Executive Session:** at 2:01PM, a motion was made by Sam Stadler to end Executive Session.

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

**VIII. Other Comments/Communications**

Next meeting will be Wednesday, October 29<sup>th</sup>, 2025 at Noon in the Functional Health Meeting Room.

**IX. Adjournment**

The meeting Adjourned at 2:02 PM.

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AJ Dahlgren, Chairman

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Stephen Olson, Secretary