



**Board of Trustees  
Minutes  
February 28, 2024**

The February 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, February 28, 2024. Notice of the meeting was posted at Kearney County Health Services, Hospital, Minden Medical Clinic, Minden Post Office, Minden First Bank & Trust 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 12:13 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 - *Absent*

**County Board of Commissioners**

Brent Stuart - *Absent*

**Others**

Cindy Ramsey (*Minden Courier*) - *Absent*

**KCHS Medical Staff**

Jon Becker, PA

**KCHS Staff**

Luke Poore, CEO  
Gavin Blum, CFO  
Kendra Brown, CNO  
Kylee Eckhardt, Director of Surgery  
Mark Klabunde, Director of Pharmacy  
Rebecca Cooke, COO  
Janell Shelton, Director of Primary Care  
Connie Jorgensen, Administrative Assistant

**II. Public Comments/Communication**

Luke Poore, CEO, commented on the correspondence received by Kearney County CASA, Minden Post-Prom Committee, and Franklin High School Post-Prom Committee for donations.

**III. Approval of Minutes**

**Action Taken:** A motion was made by Jeff Hanson to approve the January 31, 2024 meeting minutes. The motion was seconded.

Voting Aye: Hanson, McBride, Olson, and Dahlgren.

Absent and Not Voting: Stadler.

Motion Carried.

**IV. Old Business**

1. Mindray Telemetry Cerner Interface

Luke reported that the Cerner Interface was ongoing.

2. Reach-In-Freezer  
Luke reported that the freezer has arrived, and been installed.
3. R660 Servers  
Luke report that the servers have all arrived, and been installed.

**V. New Business**

1. Election of Officers

**Action Taken:** A motion was made by Jeff Hanson that the KCHS Board of Trustees Officers stay the same, with AJ Dahlgren as Chairman and Steven Olson as Secretary. The motion was seconded.

Voting Aye: Olson, Hanson, Dahlgren, and Hanson.

Absent and Not Voting: Stadler.

Motion Carried.

1. Olympus Endoscope Proposal  
Kylee Eckhardt (Director of Surgery) told the group that the Endoscope purchased in 2011 has a cracked lens and the cost to repair the scope would be \$11,000 to repair. A quote from Olympus was proposed for \$20,250.00 minus a trade-in value for the broken lens scope of \$2,950.00, leaving a balance of \$17,300.00.

**Action Taken:** After discussion a motion was made by Stephen Olson to approve the purchases of the GIF-H190 Gastroscope. The motion was seconded.

Voting Aye: Dahlgren, Hanson, McBride and Olson.

Absent and Not Voting: Stadler.

Motion Carried.

**VI. Reports**

1. Kearney County Health Services Medical Fund  
Luke Poore (CEO) reported that the annual KCHS Golf Tournament has been scheduled for June 7, 2024 at the Minden Country Club.
2. Financial/Statistical Reports  
Gavin Blum, CFO gave the Statistical/Financial Report for January 2024, along with the Bad Debt Report.

Balance Sheet	January 2024	December 2023
Cash and Cash Equivalents	6,854,474	7,294,596
Total Current Assets	19,955,725	19,529,552
Net Capital Assets	13,676,205	13,805,446
Total Assets	33,631,930	33,334,998
Total Current Liabilities	1,423,497	1,251,607
Total Liabilities	4,775,571	4,822,319
Net Assets	27,432,862	27,261,073
Net Assets and Liabilities	33,631,930	33,334,998

Statement of Profit & Loss	January 2024	Budget	YTD
Net Operating Revenue	1,524,383	1,524,833	9,283,636
Total Operating Expenses	1,413,344	1,448,623	8,836,755
Income (Loss) from Operations	111,038	76,211	446,881
Non-Operating Revenue	60,750	42,875	335,641
Net Earnings (Loss)	171,789	119,086	782,522

	July 2023	August 2023	September 2023	October 2023	November 2023	December 2023	January 2024
<b>Profitability Indicators</b>							
Days of Cash on Hand	335	353	380	353	379	352	402
Days in Patient AR (Gross)	62	54	53	49	47	49	49
<b>Costs Per Day</b>							
Clinic	7,815	8,743	6,685	6,820	6,949	9,547	7,128
Hospital	35,434	34,980	34,385	37,654	35,011	35,672	33,834

<b>Statistical Summary</b>		
Observation Admissions	6	Most since October 2023
X-rays	179	4 <sup>th</sup> Most this fiscal year
CT Scans	132	3 <sup>rd</sup> Most this fiscal year
MRIs	9	4 <sup>th</sup> Month Straight of >9
Senior Life Solutions	268	Most this Fiscal Year
Specialty Clinic Visits	130	On Track for 1,805 (1,781 in 2023)
Clinic Visits	680	On Track for 8,818 (8,810 in 2023)
<b>Providers</b>		
Doug Althouse, MD	142	2 <sup>nd</sup> Most Clinic visits since September
Renee Grams, APRN	72	Most Clinic visit this Fiscal Year
Diane Jackson, APRN	26	2 <sup>nd</sup> Most ER visits this Fiscal Year
Shelby Liesemeyer, MD	123	2 <sup>nd</sup> Most Clinic Visits Ever

Accounts Payable Register (Gross)	December 2023
2 Payrolls & 2 Check-Runs	1,279,156.28

<b>Bad Debt Report</b>		
January 2024	Average For Year	Average Last Year
47,496.91	\$43,000	\$48,000

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

Voting Aye: Dahlgren, McBride, Hanson and Olson.

Absent and Not Voting: Stadler.

Motion Carried.

### 3. Quality Assurance Report

Kendra Brown (CNO) gave the Quality Assurance Report for Danielle Morgan (Director of QA). Meeting was held on February 15, 2024. The following Departments reported:

- Social Services – Their current project is tracking the number of Swing Bed referrals.
- Human Resources- New project Compliance with our HIPAA Privacy Policy and Long Term Goal is to have 100% compliance of signed forms for each year. Action plan is to improve area that deemed improvement from the Employee Engagement Survey.

Other departments not attending the meeting were followed up by Danielle Morgan on ongoing projects. Kendra also reported on reports from CMS for 3<sup>rd</sup> Quarter of 2022 and 2<sup>nd</sup> Quarter of 2023 as well as the

NHA QA Scorecard last quarter of 2023 concerning measures of patient care in which KCHS above average. There was no infection control report for February.

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

Voting Aye: McBride, Olson, Dahlgren and Hanson.

Absent and Not Voting: Stadler.

Motion Carried.

4. Ancillary Services Report

Rebecca Cooke (COO) reviewed the Operations Report for February 2024. Rebecca started with the Senior Life Solutions Department, touching on the current program enrollment which is currently has seven (7) patients.

Rebecca reviewed some marketing data from her report, as well as with Human Resources as it relates to recruitment and termination. Rebecca reported that results of a patient satisfaction survey conveyed that KCHS is out performing patient satisfaction in both clinic and hospital and has a Goggle Rating of 5.0.

To conclude, Rebecca touched on incident reports for the month, sharing that there were 13 incident reports with the majority (6) being illness reports that were filed.

**Separations**

Position	Department	Status
Patient Care Tech	Acute	Full-Time
Maintenance Tech	Maintenance	Full-Time

**Recruiting**

Position	Department	Status
RN (Nights)	Acute	Full/Part-Time
APRN or PA	Emergency Room	Full-Time
Outreach/Marketing Coordinator (New)	Admin/Marketing	Full / Part-Time

**Turnover Rates**

January 2024	YTD
1.6%	1.6%

**Employment Numbers**

January 2024	Total	Full-Time	Part-Time/PRN	FTEs
	129	87	39	102.38

5. CEO Report

Luke provided the following updates within his report to the Board of Trustees.

a. Outpatient Services

Urology

- Dr. Stritt will change days to accommodate a Urology Clinic. Luke Poore explained that Specialty Clinic exam room availability is going to be become more and more of an issue due to only so many days in a month, and the struggle of accommodating more than 1 provider a day. For Urology however, this should be able to be accommodated.

#### Cardiology

- Dr. John Waters (Cardiologist) from Nebraska Heart Institute in Kearney is slated to begin outreach with KCHS in May 2024 which gives KCHS (3) Cardiologists and 2 APPs within Cardiology in Minden onsite.

#### Emergency Room Provider Recruitment

- Luke communicated that provider recruitment for the emergency room is ongoing. Luke stated that there have been some applicants, however a hire has not been made.

#### b. Cerner Community Works

- Luke stated that Cerner will be notifying us of an onsite Optimization Meeting as we have finished one year with the new EMR conversion. Luke communicated that the plan is to wrap up current projects that are active with a Chargemaster Review and Medication Uplift with Pharmacy/Clinic before setting a date for Cerner to be onsite.

#### c. Community Needs Assessment

- Luke stated that the official report will be provided in March Board Meeting for the completed Community Needs Assessment.

#### d. Policies for Board Approval

- IV Therapy-Acute *-Revised*
- Patient Report-Acute *-Revised*
- Drug Diversion-Acute/Pharmacy *-Revised*
- Mammography QA/MQSA-Radiology *-Revised*
- Background Checks and Post Offer Employment-Human Resources *-Revised*
- Post Offer Pre-Employment Physical Process-Human Resources *-Revised*
- Hiring, Promotions & Transfers-Human Resources *-Revised*
- Breast Density Notification-Radiology *-Revised*
- INSIGHT Application-Senior Life Solutions- *Revised*
- Medication Waste Policy-Pharmacy *-Revised*
- Scheduling of Surgery *-Surgery -Revised*
- Cleaning and Maintenance of Dental Machine-Surgery *Revised*
- Shelter in Place Guidelines for KCHS Employees-Emergency Preparedness *-Revised*
- KCHS Evacuation for Staff-Emergency Preparedness- *Revised*
- Evacuation and Shelter in Place Guidelines for Incident Command-Emergency Preparedness- *Revised*
- Mass Casualty-Emergency Preparedness *-Revised*
- Mass Casualty and Patient Surge Naming Convention-*Revised*
- KCHS Reunification Policy-Emergency Preparedness-*Revised*
- Chemical Biological Radiation Nuclear Explosion (CBRNE) Plan-Acute- *Revised*
- KCHS Business Continuity Plan-Emergency Preparedness /Safety/Administration- *Revised*

**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: Olson, Dahlgren, Hanson and McBride.

Absent and Not Voting: Stadler.

Motion Carried.

#### 6. Medical Staff Report

Jon Becker (PA-C) voiced a concern about the emergency entrance location, making it difficult to find for a new patient. Jon communicated that as plans for facility changes are reviewed for the future, this should be a priority. Jon also shared his plans to retire in May.

## VII. Executive Session

**Action Taken:** A motion was made by Dick McBride to go into Executive Session for Personnel, Credentials, and Legal. The motion was seconded.

Voting Aye: Dahlgren, Hanson, Olson, and McBride.

Absent and Not Voting: Stadler.

Motion Carried.

Other staff left the meeting except Luke Poore, Gavin Blum, Janell Shelton Rebecca Cooke.

**End of Executive Session:** At 1:24 PM a motion was made by Jeff Hanson to end Executive Session.

Voting aye: Hanson, Dahlgren, McBride, and Olson.

Absent and Not Voting: Stadler.

Motion Carried.

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

Name	Title	Scope of Practice	Appoint	Reappoint	Term	Active Staff	Consulting Staff	Affiliate Staff	Locums Staff	Affiliation
John Waters	MD	Cardiology	X				X			CHI Health Clinic Kearney
Douglas Althouse	MD	Family		X		X				KCHS
Amanda Hall-Warburton	LMHP	Mental Health		X			X	X		KCHS
Jonathan Jaksha	MD	Radiology		X			X			GI Radiology
Matthew Stritt	MD	Pulmonology		X			X			Hastings Pulmonology
Todd Pankratz	MD	OBGYN		X			X			OBGYN Hastings
Scott Lowe	MD	Radiology		X			X			Plains Radiology
David Hadford	MD	Radiology		X			X			Plains Radiology
Cody Evans	MD	Radiology		X			X			Plains Radiology
Brooke Griesen	CRNA	Anesthesia		X			X	X		Kearney Anesthesia
Benjamin Huls	CRNA	Anesthesia		X			X	X		Kearney Anesthesia
Monjari Gillian	MD	Radiology			X					No longer employed
Shannon Calhoun	MD	Radiology			X					No longer employed

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

Voting Aye: McBride, Olson, Hanson, Dahlgren, and McBride.

Absent and Not Voting: Stadler.

Motion Carried.

## VIII. Other Comments/Communication

Next meeting will be March 27, 2024 at Noon in the Functional Health Meeting Room beginning at Noon. The meeting adjourned at 1:26 PM.

## IX. Adjournment

The meeting adjourned at 1:26 PM.