

**BOARD OF TRUSTEES MEETING MINUTES  
November 14, 2018**

Present:

Rob Chestnut	Joanne Hurst	Marc Scarbrough, MD
Cindy Yulich	Russ Johnson	Brian Bradfield
Gina Pacumbaba-Watson	Sheryle D'Amico	Traci Hoopingarner
Mike Amyx	Janice Early	Andy Ramirez, Hospital Counsel
Bob Moody	Janette Kirkpatrick	
Jim Brooke	Michael Williams	
Larry McElwain	Jared Abel	
Beth Llewellyn	Everett Taylor	
Lee Reussner, MD, Advisor	Joe Pedley	

Also present: Danae Johnson and Cindy Fairchild.

**Call to Order**

The meeting was called to order at 5:52 pm by Rob Chestnut, Chairperson.

**Approval of Agenda**

The agenda was presented for review with approval requested.

MOTION: made by Bob Moody, seconded

by Mike Amyx to approve the agenda.

Motion carried.

**Consent Agenda**

The following were presented for approval as part of the consent agenda:

- Board of Trustees meeting minutes from October 17, 2018
- Community Compassion and Benefit Committee meeting minutes from November 9, 2018
- Medical Executive Committee Recommendations:

**MEDICAL & LMH HEALTH EMPLOYEE / ALLIED HEALTH PROFESSIONAL STAFF – Reappointments:**

**Ronald Burt, MD** (Active Non-Admitting, Family Medicine) – effective 12/1/18 not to exceed 2 years.

**Keelyn Ericson, MD** (Active Admitting, Internal Medicine) – effective 12/1/18 not to exceed 2 years.

**Mark Gelatt, MD** (Consulting, Pediatrics) – effective 12/1/18 not to exceed 2 years.

**Matthew Harms, MD** (Active Admitting, Internal Medicine) – effective 12/1/18 not to exceed 2 years.

**Kenneth Kimmel, MD** (Active Admitting, Internal Medicine) – effective 12/1/18 not to exceed 2 years.

**Joshua Korosac, DO** (Active Admitting, Emergency) – effective 12/1/18 not to exceed 2 years.

**Michal Magee, MD** (Active Admitting, Internal Medicine) – effective 12/1/18 not to exceed 2 years.

**Elizabeth Stamper, DO** (Active Non-Admitting, Family Practice) – effective 12/1/18 not to exceed 2 years.

**Ronald Stephens, MD** (Consulting, Internal Medicine) – effective 12/1/18 not to exceed 2 years.

**Stephanie Suber, MD** (Active Non-Admitting, Family Medicine) – effective 12/1/18 not to exceed 2 years.

**Svjetlana Tisma-Dupanovic, MD** (Consulting, Pediatrics) – effective 12/1/18 not to exceed 2 years.

**Jan Morey, APRN** (Lawrence OB/GYN Specialists, LMH Employee) – effective 12/1/18 not to exceed 2 years.

**Jennifer Schweda-Ficken, APRN** (Family Medicine of Baldwin, LMH Employee) – effective 12/1/18 not to exceed 2 years.

**FOCUSED PRACTITIONER PRACTICE EVALUATIONS:**

**Shabnam Arsiwala, MD** – Active Admitting; Pediatric Hospitalist – Initial for Circumcisions

**Ted Daughety, MD** – Consulting; Internal Medicine/Sleep Medicine – Initial

**Tyler Goetz, MD** j- Active Admitting; Anesthesia/Pain Medicine - Initial

**Blake Phipps, MD** – Active Admitting; Family Practice – Initial for Colonoscopy

**Caitlin Johnston, APRN/DNP** - LMH Employee; Sponsor: Internal Medicine Group - Initial

**PRIVILEGE &/or STATUS CHANGES & RESIGNATIONS:**

**Leslie Underwood, MD** – Active Admitting; OB/GYN – Requests privilege addition of “Robotic Laparoscopic Abdominal Surgery.”

MOTION: made by Cindy Yulich, seconded  
by Joanne Hurst to approve the consent agenda.  
Motion carried.

**Executive Report**

- **Follow up to public comment from October 17<sup>th</sup> board meeting:** Sheryle D’Amico, VP Physician Division, reported on the actions that were taken after talking with the patient:
  - The day after the meeting, a team of key stakeholders gathered to review all aspects of her concerns
  - After that meeting, Susan May, Sr. Director of Business Office, reached out to the patient by phone to further discuss the patient’s concerns
  - The patient’s issues were clarified and/or resolved within that same week and the patient was satisfied with the outcome
- **Behavioral health ballot issue:** Russ Johnson, President and CEO, reported that Prop 1 passed with 71% of the votes. LMH Health will be engaged with Behavioral Health Leadership Coalition to help ensure we are taking a global approach to behavioral health.

**Business Items**

- **Proposed bylaw revisions:** Rob Chestnut presented the board with the following proposed Board of Trustee bylaw revisions:
  - Under section 3.2-2 Qualification:
    - 3.2-2 QUALIFICATION: Each Trustee shall be a resident of **Lawrence, Kansas** and shall be appointed by the Mayor of the City of Lawrence, Kansas subject to the advice and consent of the City Commission of the City of Lawrence, Kansas for their experience, relevant areas of interest and expertise, ability, and willingness to participate effectively in fulfilling the Board’s responsibilities.

OR

  - 3.2-2 QUALIFICATION: Each Trustee shall be a resident of **Douglas County, Kansas** and shall be appointed by the Mayor of the City of Lawrence, Kansas subject to the advice and consent of the City Commission of the City of Lawrence, Kansas for their experience, relevant areas of interest and expertise, ability, and willingness to participate effectively in fulfilling the Board’s responsibilities.
- Mr. Chestnut opened the floor for discussion. Good conversation ensued about the need for this revision in consideration of the expanded service area of the hospital which includes locations outside the Lawrence city limits. It was noted that many advocates live outside the city limits and

opening the residency requirement to include Douglas County gives the mayor a larger pool of board candidates to choose from.

- Mr. Chestnut called for a motion to approve the revisions that included the Douglas County residency requirement.

MOTION: made by Cindy Yulich, seconded by Joanne Hurst. Motion carried.

- Under section 5.1-1C Quality Committee:  
5.1-1C QUALITY COMMITTEE: The Quality Committee shall consist of four (4) Trustees appointed by the Chairperson of the Board, the President and Chief Executive Officer, ~~the Chief Operating Officer~~, the Vice President of Nursing, ~~the Associate Vice President - Clinical Excellence~~, the Medical Director of Quality Services. The Chairperson of the Board shall appoint the chairperson of the committee and the committee shall meet regularly. The Quality Committee's purpose is to assist Hospital leadership in its efforts to improve patient care using available resources while remaining consistent with achievable objectives. The objectives of the Quality Committee are to measure, assess, and improve outcomes related to patient care and other important functions of the Hospital.
- Mr. Chestnut explained that this is a clean-up amendment since the hospital no longer has a Chief Operating Officer.
- Mr. Chestnut called for a motion to approve the revisions to remove the title of Chief Operation Officer and replace it with Associate Vice President – Clinical Excellence.

MOTION: made by Bob Moody, seconded by Joanne Hurst. Motion carried.

### **Open Discussion**

- Bob Moody asked hospital administration to make sure to get board and committee meeting agendas out to the trustees and the city earlier so that there was ample time to review them and prepare for meetings. Additionally, Bob requested time for open discussion on each Board of Trustees meeting agenda. Hospital administration agreed and committed to support both of these requests.

### **Adjournment**

No further business was presented and the meeting adjourned at 7:00 pm.

Respectfully submitted,

Gina Pacumbaba-Watson, Secretary of the Board