



**Board of Trustees Meeting**  
**Regular Meeting**  
January 22<sup>nd</sup>, 2026  
Minutes  
10:00 am

**Members Present:**

Rod Waeckerlin, *President*  
Jerry Steele, *Vice President*  
Garry Goergen, *Treasurer*  
Lisa Engstrom, *Secretary*  
Dr. Stephanie Chiu, *Trustee*

**Absent Members:**

**Administration:**

Kerry Ashment, *Chief Executive Officer*  
Stephanie Hinkle, *Chief Operating Officer*  
Joy Coulston, *Chief Financial Officer*

**Guests:**

Abbi Forwood, *Legal Counsel* (via Zoom)  
Dr. Duane Abels, *DO*  
Charlie George, *Community Member, Hanna, WY*

Rod Waeckerlin, President, called the Memorial Hospital of Carbon County Board of Trustees meeting to order at 10:00 am. The Pledge of Allegiance and a moment of silence followed.

**Amendment and Approval of Agenda:**

Lisa Engstrom made a motion, and Jerry Steele seconded the motion to approve the agenda as presented. Motion carried unanimously.

**Approval of Consent Agenda Items:** Attachment (A)

Jerry Steele made a motion, and Garry Goergen seconded the motion to approve the Consent Agenda as presented. Motion carried unanimously.

Discussion: Mr. Goergen commented about the OR sharing staff throughout the facility.

**Approval of Board of Trustees Open Session Minutes from December 18<sup>th</sup>, 2025, and December 31st, 2025:**

Garry Goergen made a motion, and Lisa Engstrom seconded the motion to accept the minutes from the regular meeting on December 18<sup>th</sup>, 2025, and December 31st, 2025, as presented. Motion carried unanimously.

**Employee of the Month presented by Rod Waeckerlin, *Board President*:**

President Waeckerlin recognized Wendy Thorvaldson as Employee of the Month. Ms. Thorvaldson has driven successful quality assurance projects and is shaping the future of nursing through our nursing program.

### **Open Discussion/Citizen Participation**

- Mr. George asked the Board of Trustees to consider publicly streaming the board meetings to allow for attendance during the working hours. Mr. Waeckerlin stated the Board would take the request under advisement.

### **Operational Report: Kerry Ashment, *Chief Executive Officer* & Stephanie Hinkle, *Chief Operating Officer***

- Mr. Ashment presented his Operational Report. He noted that the hospital continues to work through turnover challenges as the organization works to fill positions with the right people. Mr. Ashment stated that turnover may be attributed to lack of training, accountability for one's actions, not the right fit, or personality conflicts. Leadership continues to prioritize staff morale and engagement, recognizing the significant demands placed on them over the last nine months. Workforce stability remains a top priority for leadership.

A brief update about the financials was presented. Mr. Ashment informed the Board that additional funds will be set aside to start saving for equipment, such as an MRI machine (it's reaching end of life).

Ms. Hinkle provided a Marketing update, stating that three project initiatives are in motion. Leadership put a "call to action" asking staff to join several new committees to help drive change, those committees are Recruitment and Retention, Training and Education, and Employee Engagement. A representative from Senior Leadership will be asked to participate in these meetings to serve as a resource. Ms. Hinkle will continue to provide future updates.

Ms. Hinkle reported the various community engagement meetings that MHCC is hosting, noting that the Business Breakfast remains well attended. She states that Stakeholder meetings continue to be ongoing and are opening lines of communication at various levels throughout the State. Mr. Ashment and Ms. Hinkle also had the opportunity to meet with CCCOG, where great dialogue was shared and both were able to connect with the community.

An update regarding the Rural Health Transformation Funds was shared with the Board.

Ms. Hinkle informed the Board that she is planning to hire a new Marketing Coordinator to assist with marketing and outreach efforts. The salary range was discussed and Ms. Coulston explained to the Board that she was able to identify savings that would support the organization's ability to hire someone for this position.

*Discussion:* The Board of Trustees shared ideas about purchasing an MRI machine and if it could be done through securing funds through grants or loans. Ms. Gulbrandson was asked to research if there would be funding through the Helmsley Charitable Trust Grant.

### **Commissioners Report: Gwynn Bartlett, *Carbon County Commissioner Liaison***

- Ms. Bartlett was absent; a report was not presented.

### **Financial Report: Joy Coulston, *Chief Financial Officer***

- Ms. Coulston presented the Financial Summary Report for the month ending December 31<sup>st</sup>, 2025.

The average census including Observation was 4.68, below the prior month of 4.93, and above the last 12 months average of 3.51. Ancillary Visits were up with ED, Ambulance, Lab and Clinic this month.

Gross revenue for December was \$5,593,650 versus the prior month of \$4,734,390, a difference of \$859,260. As compared to budget, gross revenue was above budget by \$371,902 or 7.1%. As compared to prior year, \$1,420,700 above December of 2024.

Deductions from revenue were 49.5% for the month. Our prior year historical average is 48.7%.

Net revenue was \$2,823,935 down from the prior month, and above budget by 5.6%. Net revenue remains above the fiscal year 2025 average of \$2,187,572.

Overall operating expenses were \$2,982,578 similar to the prior month of \$2,982,578 and also above the fiscal year average of \$2,858,919. As compared to budget, operating expenses are \$170,709 or 6.1% above budget. Mainly related to Health Claims.

Additional details related to expenses: Benefits are 87% over budgets. We continue to see high claims for our employee health plan and continued increase in our Workers' Compensation rate. Salaries are over budget due to Bonus paid and PTO buy out options for employees. Supplies are being impacted by implant cost and repairs are up due to generator repairs.

For the month of December, Ms. Coulston reported an Operating loss of \$63,316 and a Net loss of \$84,456.

Dr. Stephanie Chiu made a motion, and Lisa Engstrom seconded the motion to approve the Financial Summaries for the period ending December 31<sup>st</sup>, 2025, as presented. Motion carried unanimously.

Jerry Steele made a motion, and Lisa Engstrom seconded the motion to approve the vouchers for the period ending December 31<sup>st</sup>, 2025, as presented. Motion carried unanimously.

#### **Medical Staff Report: Dr. Lincoln Westfall, Chief of Staff**

- Dr. Westfall presented the Medical Staff Report. He reported that clinic volumes seem to have decreased across the board. He reported that Ms. Shue's last day is January 23<sup>rd</sup>, 2026, Mr. Keel's final day will be March 3<sup>rd</sup>, 2026, and a new provider will be onboarding in February. Dr. Westfall touched on the upcoming staffing changes in the Emergency Room (transition to Western Healthcare for ED provider staffing) and possible General Surgery coverage changes. Dr. Westfall stated he does not have data to report to the Board this month and is hopeful the Clinic Director will be able to assist with providing this once the position is filled.

**The Board of Trustees took a break from 11:00 – 11:07am.**

#### **New Business:**

- **Audit Report FY Ending June 2025, Mike Rowe & Courtney Vance, Sorren**  
Mr. Rowe opened the presentation with thanking Ms. Coulston and team for their great work. Ms. Vance reviewed the Governance Letter and Internal Control letter and answered questions from the Board of Trustees.

Ms. Vance reviewed the Financial Audit with the Board of Trustees for the fiscal years ending June 30, 2025 and 2024. Auditors issued an unmodified (clean) opinion, concluding the financial

statements fairly present the Hospital's financial position in accordance with GAAP. The auditors noted substantial doubt about the Hospital's ability to continue as a going concern, driven by ongoing operating losses, a working capital deficit, declining net position, and negative operating cash flow. FY2025 reflected an operating loss of \$4.52 million (improved from \$6.11 million in FY2024), with cost reductions partially offsetting lower patient revenue. Significant events included a sale-leaseback of clinic buildings, debt restructurings generating \$710,046 in gains, continued lease and IT subscription obligations, and outstanding balances owed to Ovation Healthcare and the Wyoming Department of Health. Management reported progress on leadership stabilization, revenue cycle improvement, expense controls, and implementation of a 2026–2028 Strategic Plan. The Board acknowledged the audit results and emphasized the importance of continued oversight of liquidity, debt, and financial recovery efforts.

Ms. Vance answered questions from the Board of Trustees. Overall, the Board was pleased with improvements compared to the prior year report.

Jerry Steele made a motion, and Garry Goergen seconded the motion to approve the Audit Ending FY June 2025 as presented. Motion carried unanimously.

- **Approval of Contracts:**

1. **Casper Medical Imaging Professional Service Agreement**, Jan Gulbrandson, *Director of Ancillary Services*

Ms. Gulbrandson presented the above contract to the Board. She informed the Board that RadPartners terminated the Radiology agreement with MHCC, and after vetting out Casper Medical Imaging, leadership is proposing to enter into an agreement with Casper Medical Imaging (CMI). There will be a one-time \$10,000 implementation fee and they will bill their own profees. Compared to RadPartners, there will be some savings. A transition timeline of approximately six to eight months was discussed.

Dr. Stephanie Chiu made a motion, and Lisa Engstrom seconded the motion to approve the Casper Medical Imaging Professional Service Agreement as presented. Motion carried unanimously.

2. **RadinformatiX, LLC PACS Use and Archive Agreement**, Jan Gulbrandson, *Director of Ancillary Services*

Ms. Gulbrandson presented the agreement to the Board. This agreement serves as a storage service for medical imaging and will cost \$3,000 monthly.

Dr. Stephanie Chiu made a motion, and Lisa Engstrom seconded the motion to approve RadinformatiX, LLC PACS Use and Archive Agreement as presented. Motion carried unanimously.

3. **Nectar Master Service Agreement**, Aimee Hickman, *Director of Human Resources*

Ms. Hickman presented the agreement to the Board and provided an overview of the employee engagement and recognition software. The monthly cost would be \$9,450 with a one-time \$500 implementation fee.

*Discussion:* Dr. Chiu expressed concern about the seemingly high cost of the program. Mr. Waeckerlin stated concerns about possible abuse of the program in regard to favoritism. Mr. Goergen inquired about who would oversee the program to which Ms. Hickman stated Human Resources would be responsible. The Board stated that they would like to receive updates about the program to ensure it's a service MHCC should continue to pursue after the initial term.

Lisa Engstrom made a motion, and Garry Goergen seconded the motion to approve the Nectar Master Service Agreement as presented. Motion carried with three yay votes and one nay vote.

4. **Cambay Healthcare Staffing Agreement**, Aimee Hickman, *Director of Human Resources*  
Ms. Hickman presented the staffing agreement and stated this is for temp to perm placement for Respiratory Therapy, Radiology and Pharmacy staff. There would be no upfront cost, MHCC would only be charged if there is a placement.

Dr. Stephanie Chiu made a motion, and Lisa Engstrom seconded the motion to approve the Cambay Healthcare Staffing Agreement as presented. Motion carried unanimously.

5. **P3SG Master Service Agreement**, Aimee Hickman, *Director of Human Resources*  
Ms. Hickman presented the agreement to the Board and stated this is for permanent placement for Respiratory Therapy, Radiology and Pharmacy staff. The intent of this agreement would be to replace traveling staff and there is no upfront cost.

Dr. Stephanie Chiu made a motion, and Lisa Engstrom seconded the motion to approve the P3SG Master Service Agreement as presented. Motion carried unanimously.

6. **Holistic Pain Management Agreement**, Kerry Ashment, *Chief Executive Officer*  
Mr. Ashment presented the agreement to the Board, noting this was a renewal to the existing agreement. The only change within the renewal is a decreased clinic rate.

Garry Goergen made a motion, and Dr. Stephanie Chiu seconded the motion to approve the Holistic Pain Management Agreement as presented. Motion carried unanimously.

*Discussion:* Mr. Ashment provided an update on a plan for Orthopedic services by way of information to the Board. Leadership is working with inReach to provide interim PA-C coverage in the Orthopedic clinic and within the OR to continue support for Dr. Allred. A PRN agreement for a Certified Scrub First Assist. This will be a contingency plan until MHCC can secure its own orthopedic PA.

**Lunch Break from 12:012 pm to 1:01 pm.**

- **Approval of Policies**

1. Environmental Cleaning Intraoperative Areas Including Operating and Procedures Areas, Josephine Stratton, *OR Manager*

Garry Goergen made a motion, and Lisa Engstrom seconded the motion to approve the Environmental Cleaning Intraoperative Areas Including Operating and Procedures Areas policy as presented. Motion carried unanimously.

2. Photographic Documentation During Surgical Procedures, Josephine Stratton, *OR Manager*

Lisa Engstrom made a motion, and Dr. Stephanie Chiu seconded the motion to approve the Photographic Documentation During Surgical Procedures policy as presented. Motion carried unanimously.

3. Surgical Attire, Josephine Stratton, *OR Manager*

Dr. Stephanie Chiu made a motion, and Lisa Engstrom seconded the motion to approve the Surgical Attire policy as presented. Motion carried unanimously.

4. Death in the OR, Josephine Stratton, *OR Manager*

The Board stated the policy was unclear about who would be responsible for contacting the coroner and when it should occur. They asked for Legal Counsel to review and provide feedback. This policy will be tabled until Legal Counsel can provide feedback.

Discussion: Ms. Hinkle asked the Board what policies would be considered appropriate to bring for approval. Per the discretion of the Board during previous meetings, they wanted all policies to be approved, however, she would like to revisit the topic again. Legal Counsel provided feedback stating that any personnel, compliance or legal policies should be brought before the Board for approval; it is not necessary to bring medical policies before the Board to approve. The Board stated they also found that appropriate.

**Old Business:**

- There was nothing brought before the Board.

**Motion to Move to Executive Session & Recess Board of Trustees Public Meeting**

Jerry Steele made a motion, and Garry Goergen seconded the motion to move the Board of Trustees to Executive Session. Motion carried unanimously.

The Board convened to Executive Session at 1:19 pm to discuss personnel issues and to consider or receive any information classified as confidential by law.

**Motion to Move to Board of Trustees Public Meeting & Recess Executive Session:**

Jerry Steele made a motion, and Lisa Engstrom seconded the motion to resume the Board of Trustees Public Meeting at 2:38 pm. Motion carried unanimously.

**Credential Request for Memorial Hospital of Carbon County Privileges**

• **Initial Appointments**

1. Michael Miller, MD: Rural Physicians Group Hospitalist: Active Staff
  - Recommend appointment as a Hospitalist as Active Staff

Jerry Steele made a motion, and Lisa Engstrom seconded the motion to approve the Initial Appointment requests as presented. Motion carried unanimously.

• **Provisional Reviews**

1. Kara Willenburg, MD: Rocky Mountain Infectious Disease: Telemedicine Staff
  - Recommend transition to full unrestricted Telemedicine Staff
2. Ghazi Ghanam, MD: Rocky Mountain Infectious Disease: Telemedicine Staff
  - Recommend transition to full unrestricted Telemedicine Staff
3. Alexandru David, MD: Rocky Mountain Infectious Disease: Telemedicine Staff
  - Recommend transition to full unrestricted Telemedicine Staff
4. Mark Dowell, MD: Rocky Mountain Infectious Disease: Telemedicine Staff
  - Recommend transition to full unrestricted Telemedicine Staff

Jerry Steele made a motion, and Garry Goergen seconded the motion to approve the Provisional Review request as presented. Motion carried unanimously.

**Adjournment:**

Lisa Engstrom made a motion, and Garry Goergen seconded the motion to adjourn Board of Trustees public meeting at 2:39 pm with no further business coming before the Board. Motion carried unanimously.

The next Board of Trustees meeting is scheduled for February 26<sup>th</sup>, 2026

Respectfully submitted.

Abbie Webster, *Executive Assistant*

Lisa Engstrom, Board of Trustees, *Secretary*