

DECATUR COUNTY HOSPITAL BOARD OF TRUSTEES
MEETING MINUTES
March 24, 2021 – 5:30pm

PRESENT: Denise Elefson, Sheri Frost, Guy Clark, Linda Chastain, Teri Foster, Larry Griffin and Rebekah Mendenhall.

OTHERS PRESENT: Mike Johnston (CEO), Tara Spidle (CFO), Mark Mattes (CNO), Jo Beth Smith (CHRO), Shannon Erb (Director of Marketing and Business Development), Dr. Ed Wehling (Chief of the Medical Staff), and Dr. Erika Brown (CMO).

I. CALL TO ORDER

Denise Elefson called the meeting to order at 5:30 p.m.

II. AGENDA APPROVAL

Linda Chastain made a motion to approve the meeting agenda and Larry Griffin made the second. Motion carried unanimously.

III. PUBLIC COMMENT

Guy Clark commented on the extremely positive experience at Decatur County Hospital of a patient who is a close relative of his and specifically identified Dr. Wehling in his comments. The patient requested that their appreciation be expressed before the Board members.

IV. CONSENT AGENDA

Sheri Frost made a motion to approve the following Consent Agenda items with a second by Linda Chastain: (1) Regular Meeting Minutes February 2021 (2) February 2021 Accounts Payable (AP): \$1,268,333.00. (3) February 2021 Payroll: \$460,486.00 (4) Accounts Receivable Write-Offs February 2021: \$103,716. Motion carried unanimously.
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V. MEDICAL STAFF REPORT

Dr. Wehling discussed with the Board of Trustees relevant information from the meeting of the Active Medical Staff on March 16, 2021. The Board members received the minutes of that meeting as part of their Board packet for the month of March. Dr. Wehling reported the recommendations of the Active Medical Staff with respect to the appointments and reappointments of various providers and physicians as detailed on the Board meeting agenda. The Active Medical Staff of Decatur County Hospital approved each one at their regular meeting on March 16, 2021 and made the recommendation to the Board of Trustees that final approval be granted of the appointments et al as presented. Teri Foster made a motion to approve with a second received from Rebekah Mendenhall. Motion carried unanimously.
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Dr. Wehling updated the Board of Trustees on various initiatives of the Medical Staff currently in progress. He indicated that the current focus remains on nursing education to include procedural-based instruction for personnel in both the Emergency Department and the Med/ Surg floor. Responses to-date have been positive.

VI. MERCYONE REPORT

There was no MercyOne representative present at the meeting.
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VII. CEO UPDATE

Mike Johnston presented the CEO Update as follows:

Mike inquired of the Board members if there were any questions or follow-up needed from any of the weekly board updates which had been distributed since the previous regular meeting of the Board of Trustees. None were received.

In the interest of time, the remaining CEO update was reserved for the Closed Session as the subject material was directly pertinent to topic of discussion.

VII. FINANCIAL REPORT

Tara Spidle presented the financial report for February 2021:

Total gross revenue was \$2.35 million in February. February had an operating loss of \$239,619 with a net gain of \$1,244,330 that includes the release of funds from the Payroll Protection Program (PPP) loan forgiveness. Linda Chastain made a motion to approve the financial report for February 2021 with a second from Teri Foster. Motion carried unanimously.

Tara Spidle presented the Board of Trustees with the final audit report for Fiscal Year (FY) 2020 as received from Seim Johnson. The final document was unchanged from the draft report received in September of 2020. Rebekah Mendenhall made a motion to approve and accept the final report and Larry Griffin made the second. Motion carried unanimously.

VIII. CLINICAL SERVICES AND QUALITY REPORT

Mark Mattes provided the Board with a report and update on current clinical initiatives as follows:

- The new Clive Behavioral Health Hospital is now open and accepting patients in a limited capacity. Mark provided the Board with additional, written information concerning the new facility;
- A review of COVID-19 vaccinations for hospital staff members;
- Mock Code Blue Drills will continue to be scheduled on various shifts and rotating through the applicable providers in the Emergency Department (ED);
- A process for mock trauma drills is currently under development;
- Mark Mattes discussed current education projects for staff;
- Decatur County Hospital received the bicycle helmet distribution grant from the Iowa Advisory Council on Brain Injuries. As previously discussed with the Board of Trustees, the grant provides funding for the acquisition of forty (40) bicycle helmets. DCH will match the grant and purchase an additional 40 helmets at the hospital's expense, thus raising the available number to eighty (80) in aggregate. These helmets will be distributed free of charge in both Leon and Lamoni at community events currently being planned; and
- Nominations for the annual Daisy Award are currently being solicited from the hospital staff and the public at large. This annual award recognizes nurses who provide skillful and compassionate care "every day, every time".

Quality Report:

The Quality Committee approved current quality assurance/ performance improvement (QAPI) measures as of March 23, 2021. The measures reviewed were based upon high volume, high-risk, and/ or departmental problem-prone areas.

Mark Mattes reported to the Board of Trustees on the following performance metrics:

- Medical error tracking;
- Adverse drug events;
- Blood incompatibility;
- Foreign objects retained after surgery;
- Air embolisms;
- Stage III or IV pressure ulcers;
- Catheter-associated urinary tract infections (CAUTIs);
- Central line-associated bloodstream infections (CLABSIs);
- Surgical Site Infections (SSIs);
- Hospital-Acquired Infections (HAIs); and
- Clostridioides difficile (C-DIFF) infections.

In furtherance of the hospital's antibiotic stewardship program, an antibiotic "time-out" is now being performed as part of morning patient rounds to evaluate the patient's need for continued antibiotic treatment on a daily basis.

Mark reviewed for the Board a synopsis of the most recent meeting of the hospital's pharmacy and therapeutics (P & T) committee.

IX. HR UPDATES

Jo Beth Smith provided the HR Update as follows:

- Wellness Week is underway in the current week. We are experimenting with a new patient-flow pattern for this event that, thus far, seems to be working well. A total of forty-three (43) individuals have come through between Tuesday and Wednesday.
- The Employee Engagement survey will open on April 26, 2021 and close on May 17, 2021. The results will likely be available in late summer of the current year.

X. MARKETING REPORT

Shannon Erb presented the marketing report to the DCH Board of Trustees. She provided the Board with an overview of current and planned marketing efforts as well as the results of previous campaigns.

XI. CLOSED SESSION

At 6:32pm, a roll call vote was called for the Board to go into closed session to discuss the following:

- Marketing Strategies and Similar Proprietary Information: Iowa Code 21.5(1)(L)

The vote results were: Denise Elefson – aye; Sheri Frost – aye; Guy Clark – aye; Linda Chastain – aye; Teri Foster – aye; Larry Griffin – aye; and Rebekah Mendenhall – aye. Those present in addition to the Board members were Mike Johnston (CEO), Tara Spidle (CFO), Mark Mattes (CNO), Jo Beth Smith (CHRO), Shannon Erb (Marketing and Business Development), Dr. Erika Brown (CMO), and Dr. Ed Wehling (Chief of the Medical Staff).

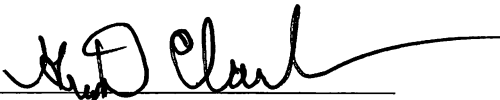
With a consensus of the Board members to do so, the Board returned to open session at 7:32pm. The Board members present when the open session reconvened were Linda Chastain, Denise Elefson, Sheri Frost, Guy Clark, Teri Foster, Larry Griffin, and Rebekah Mendenhall. The additional hospital personnel listed immediately above were also all present when the open session reconvened.

After the return to open session, the Board of Trustees took the following the actions:

- Linda Chastain made a motion to approve the Chest Pain Accreditation Agreement with a second from Teri Foster. Motion carried unanimously.
- Sheri Frost made a motion to approve the Fiscal Year (FY) 2022 Strategic Plan and Guy Clark made the second. Motion carried unanimously.

XI. ADJOURNMENT

The meeting adjourned at 7:34 p.m.



Guy Clark, Secretary