

DECATUR COUNTY HOSPITAL BOARD OF TRUSTEES

MEETING MINUTES

July 27, 2022 – 5:30pm

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

ABSENT: Linda Chastain

OTHERS PRESENT: Mike Johnston (CEO), Tara Spidle (CFO), Kelly Barker (CNO), Shannon Erb (Chief Human Resources and Marketing Officer), Dr. Ed Wehling (Chief of the Medical Staff) and Kassi Hoxmeier (MercyOne).

I. CALL TO ORDER

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

II. AGENDA APPROVAL

Sheri Frost made a motion to approve the agenda and Teri Foster made the second. Motion carried unanimously.

III. PUBLIC COMMENT

Guy Clark reported on positive comments received from members of the public about the Outpatient Clinic. Dr. Gallagher (Urologist) and Julie Parmer were specifically mentioned. Larry Griffin related some positive comments on the progress and appearance of the new Outpatient Clinic building currently under construction.

IV. CONSENT AGENDA

Larry Griffin made a motion to approve the following Consent Agenda items with a second by Rebekah Mendenhall: (1) Regular Meeting Minutes June 2022 (2) June 2022 Accounts Payable (AP): \$1,170,887.46(3) June 2022 Payroll: \$444,727.00 (4) Accounts Receivable Write-Offs June 2022: \$27,696.05. Motion carried unanimously.

V. MERCYONE REPORT

Kassi Hoxmeier gave the MercyOne report.

VI. MEDICAL STAFF REPORT

There was no meeting of the Decatur County Hospital Medical Staff in July 2022. The next regular meeting is scheduled for September 14, 2022.

Dr. Wehling reported on a mock trauma drill that was conducted in the previous week with the Surgical staff. He indicated that the drill went very well and additional such activities are planned for the future in other clinical areas/ departments. .

VII. CEO UPDATE

Mike Johnston presented the CEO Update to the Board of Trustees as below:

- The Board reviewed performance data to include hospital-wide revenues and expenses, HCAHPS scores, as well as revenues and patient volumes in the Outpatient Clinic for fiscal year (FY) 2022.

Concurrently, the Board received comparative data from previous fiscal years in each category mentioned above.

- Mike reported to the Board of Trustees after receiving the formal, written report on an information security test conducted June 30, 2022. In this test, the hospital engaged its information technology vendor, Iowa Solutions, to provide an intern/ staff member who had not previously been to Decatur County Hospital and who, as such, was unknown to hospital employees. This intern was to wear non-descript clothing and no visible identification whatsoever. He entered the hospital and moved around to various departments portraying himself as a copier technician while attempting to access computers, get passwords or other login information from hospital staff, and download information to flash drives for removal from the facility. The test results were a mix of both positive and negative. Areas for improvement and/ or additional training were identified. Mike indicated to the Board that this test, or variations thereof, would be conducted with increased regularity at the hospital.

VIII. FINANCIAL REPORT

Tara Spidle presented the financial report for June 2022:

Total gross revenue was \$3.7 million in June 2022. June had an operating loss of \$64,964.00 with a net gain of \$818,670.00.

Larry Griffin made a motion to approve the financial reports for June 2022 with a second from Teri Foster. Motion carried unanimously.

IX. CLINICAL AND QUALITY IMPROVEMENT INITIATIVES

Kelly Barker updated the Board as to current clinical and quality improvement initiatives as follows:

Chest Pain performance metrics for June 2022 were reviewed with the Board of Trustees. These metrics include the following:

- Door to EKG time less than ten (10) minutes;
- Door to Troponin Accession;
- Heart score documentation;
- Non-invasive ischemia evaluation discussion with the primary care provider;
- “Door-In, Door-Out” times for STEMI patients;
- “Door to Needle” time; and
- Review of any thirty (30)-day episodes of readmission.

The first of two (2) mock-STEMI drills is scheduled for August 2022. As part of the chest pain accreditation requirements, DCH will complete at least two (2) such drills annually.

Kelly reported to the Board of Trustees on the following quality indicators for June 2022:

- Quality Assurance/ Performance Improvement (QAPI) departmental-specific quality measures;
- 30-day readmissions;
- Medical error tracking;
- Adverse drug events;
- Patient falls;
- 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);
- Clostridioides difficile (C-DIFF) infections;
- Antibiotic “time-outs” performed during morning patient rounds;
- Hand hygiene monitoring; and
- Interdisciplinary Bedside Rounding

Kelly Barker reviewed the Quality Assurance/ Performance Improvement departmental scorecard with the Board of Trustees. A written copy of the scorecard was provided to the Board of Trustees.

X. HR AND MARKETING REPORT

Shannon Erb provided the HR and Marketing Report as follows:

- June 2022 employee turnover data.
- Welcome to Ryan King (EMT), Shelley Sapper (Purchasing Assistant), Cynthia Johnson (RN), Mavery Fraker (EVS Tech), Jenny Keller (CNA), and Dr. Lonny Miller (full-time ED/ Hospitalist).

Shannon 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 approximately 6:38pm, a roll call vote was called for the Board to go into closed session for discussion under the following exemptions:

- Iowa Code 21.5(1)(A); and
- Iowa Code 21.5(1)(L).

The vote results were: Denise Elefson – aye; Sheri Frost – aye; Guy Clark – aye; Teri Foster – aye; Larry Griffin – aye; and Rebekah Mendenhall – aye. Those present in addition to the Board members were Mike Johnston, Tara Spidle, Kelly Barker, Shannon Erb, Dr. Wehling, and Kassi Hoxmeier.

With a consensus of the Board members obtained to do so, the Board returned to open session at approximately 7:20pm. The Board members present when the open session reconvened were Denise Elefson, Sheri Frost, Guy Clark, Teri Foster, Larry Griffin, and Rebekah Mendenhall. Others present were the same as listed above when the closed session convened. No action of the Board was required after the return to open session.

XII. ADJOURNMENT

The meeting adjourned at 7:21pm.