DECATUR COUNTY HOSPITAL BOARD OF TRUSTEES MEETING MINUTES

August 24 2022 – 5:30pm

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

ABSENT: None

OTHERS PRESENT: Mike Johnston (CEO), Tara Spidle (CFO), Kelly Barker (CNO), Shannon Erb (Chief Human Resources and Marketing Officer), and Kassi Hoxmeier (MercyOne).

L CALL TO ORDER

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

II. AGENDA APPROVAL

Larry Griffin made a motion to approve the agenda and Teri Foster made the second. Motion carried unanimously.

III. PUBLIC COMMENT

Linda Chastain voiced her appreciation to Shannon Erb for Shannon's hard work in organizing the DCH Auxiliary Golf Tournament this year. Rebekah Mendenhall mentioned the ending of the Senior Life contract in October 2022 and reiterated the Board's expectation that the hospital administration develop a replacement program of some form to implement the same as soon as possible following that date.

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 July 2022 (2) July 2022 Accounts Payable (AP): \$1,225,295.70 (3) July 2022 Payroll: \$483,972.00 (4) Accounts Receivable Write-Offs July 2022: \$65,552.69. Motion carried unanimously.

V. MERCYONE REPORT

Kassi Hoxmeier gave the MercyOne report.

VI. MEDICAL STAFF REPORT

Dr. Wehling was not able to attend the meeting due to pressing clinical matters.

VII. CEO UPDATE

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

- The Board received an overview of the status and content of our Certificate of Need (CON) application to the State of Iowa for the initiation of radiation therapy (radiation oncology) at Decatur County Hospital. The final application has one hundred sixty-two (162) pages comprised of written responses and attachments. The hospital's attorney at Davis Brown will submit the formal, written application on August 25, 2022 and the hearing before the CON Board is tentatively scheduled for October 19, 2022. We should have a decision on that date as to whether or not a Certificate of Need will be granted.
- Mike presented three-dimensional (3-D) renderings of the furniture design, colors etc. for the new Outpatient Clinic Building to the Board.
- FRSecure Report/ Network Vulnerability Study results; and
- The Senior Life program and replacement thereof.

Action Items:

- The Board reviewed an updated organizational chart for Decatur County Hospital with an effective date of August 2022. Sheri Frost made a motion to approve the chart as presented with a second from Teri Foster. Motion carried unanimously.
- Mike Johnston discussed with the Board of Trustees setting a formal service life and rotation schedule for the two (2) primary ambulances owned and operated by DCH. The proposed service life for each individual vehicle is six (6) years with a rotation schedule staggered such that one (1) ambulance is replaced every three (3) years. The two (2) current ambulances are from model years 2017 (Ambulance 27-10) and 2019 (Ambulance 27-11) respectively. In order to achieve the new schedule as described, Mike proposed to the Board that Ambulance 27-10 be replaced in 2023. Ambulance 27-11's service life will extend to 2026 (7 years total) and, after its replacement, the rotational schedule will be established. The Board received two (2) quotations – one from American Response Vehicles and one from Klocke's Emergency Vehicles – for the purchase of a new vehicle. The quote from Klocke's was determined to be the lower of the two at a total cost (including trade-in of the existing Ambulance 27-10) of \$202,353.00. Due to current market and supply conditions, the vehicle order is required this year such that the new ambulance is received by the summer of 2023. No payment of any kind is required until the new vehicle is delivered. Mike Johnston requested that the Board authorize purchase of the new ambulance and further allow him to submit the order as soon as possible to ensure delivery in 2023. Sheri Frost made a motion to authorize the overall purchase and the submission of the signed order. Rebekah Mendenhall made the second. Motion carried unanimously. Future ambulance purchases will be submitted to the Board as part of the hospital budget for the applicable year in the rotation schedule and formally approved as part of that annual process.

VIII. FINANCIAL REPORT

Tara Spidle presented the financial report for July 2022:

Total gross revenue was \$3.5 million in July 2022. July had an operating gain of \$132,217.00 with a net gain of \$225,231.00.

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

Tara presented the Board of Trustees with a resolution approving online banking access to the hospital's accounts at BTC Bank for both Tara Spidle and Angie Wells. After review, Linda Chastain made a motion to approve the resolution and Sheri Frost made the second. Motion carried unanimously.

IX. CLINICAL AND QUALITY IMPROVEMENT INITIATIVES

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

The American College of Cardiology scheduled our accreditation survey visit for September 12, 2022.

Chest Pain performance metrics for July 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.

Kelly reported to the Board of Trustees on the following quality indicators for July 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; and
- Blood culture contamination rates.

Other Updates:

- Code Blue Simulation scheduled for August 25, 2022; and
- STEMI Simulation scheduled for September 01, 2022.

X. HR AND MARKETING REPORT

Shannon Erb provided the HR and Marketing Report as follows:

- July 2022 employee turnover data.
- Welcome to Elizabeth "Libby" Allen, ARNP (Rheumatology and Weight Loss Clinic) and Robbie Gilliland, PRN Transportation Van Driver.

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. ADJOURNMENT

| The meeting adjourned | at 6:50pm. |
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| Guy Clark | , Secretary | |
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