

DECATUR COUNTY HOSPITAL BOARD OF TRUSTEES

MEETING MINUTES

May 24, 2023 – 5:30pm

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

ABSENT: None

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

I. 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 as presented and Teri Foster made the second. Motion carried unanimously.

III. PUBLIC COMMENT

Teri Foster described positive comments she received from three (3) different members of the community regarding the hospital in general and specific to nursing and the Emergency Department. Larry Griffin related that he thought the recent grand opening of the new OPC Building/ Community Open House was well organized and seemed to have a very good attendance. Attendance was approximately three hundred fifty (350) people. Cheryl Zach discussed the Dine with DCH program and asked when the hospital might hold another such event. A short discussion on this topic ensued. Denise Elefson discussed a general question regarding billing and relayed to the Board members that the school nurse position in Lamoni is open and currently seeking applicants.

IV. CONSENT AGENDA

Sheri Frost made a motion to approve the following Consent Agenda items with a second by Teri Foster: (1) April 2023 Regular Meeting Minutes (2) April 2023 Accounts Payable (AP): \$961,586.00 (3) April 2023 Payroll: \$548,292.00 (4) April 2023 Accounts Receivable Write-Offs: \$0.00. Motion carried unanimously.

V. MEDICAL STAFF REPORT

Dr. Wehling gave the Medical Staff Report. He presented the listed Medical Staff Appointments for approval by the Board of Trustees and noted that the Active Medical Staff had approved each at their regular meeting on May 17, 2023:

Appointments:

Cassidy Brown, ARNP (Oncology);
Nicholas Vellama, PA (Orthopedics);
Aaron Glenn, ARNP (Hospitalist); and
Richard Jacobson, CRNA (Pain Services).

Reappointments:

Maher Loutfi, MD (Neurology); and
Alva E. Yoder, ARNP (Hospitalist).

Provisional to Full Status:

Elizabeth Cain, ARNP (Hospitalist); and
Jill Konfrst, ARNP (Hospitalist)

Larry Griffin made a motion to approve the appointments, reappointments, and changes from provisional to full status as presented. Cheryl Zach made the second. Motion carried unanimously.

Dr. Wehling reviewed the regular meeting of the Active Medical Staff on May 17, 2023. A draft copy of the minutes from the aforementioned meeting was previously provided to the Board of Trustees prior to the Board meeting. He also discussed some current challenges regarding provider coverage in the Emergency Department.

VI. CEO UPDATE

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

- Infusion Area Renovation Project – construction start date is June 05, 2023;
- Dr. Tyson Cobb, upper extremity orthopedic surgeon, will be at Decatur County Hospital on Friday, May 26, 2023 from 8:30am until approximately noon for a site visit. An exact start date for Dr. Cobb's new clinic remains to be determined but will likely occur in July or August of 2023;
- Pulmonology will transition from a specialty-based clinic to provider-based effective June 02, 2023. As a result, the service will move from the existing hospital into the new OPC Building with their first visit under the new contract on June 22, 2023. The period between June 02 and June 22, 2023 will allow for marketing efforts once they shift to provider-based;
- A request has been received from Samantha Canon, the CEO at Infinity Health, that Decatur County Hospital consider selling the Morton storage building currently located on their property to Infinity. They own the land, but the hospital owns the building itself. Mike advised the Board that after internal discussion there was no objection by the hospital administration to exploring a potential sale. Assuming there was no objection from the Board of Trustees, an appraiser will be engaged to provide a fair market value (FMV) assessment of the building. Once complete, a potential selling price can be discussed and brought to the Board for final review and approval. No objection to this plan was received from any Board member; and
- Community Paramedicine Program: As of May 11, 2023, the new Chevrolet Tahoe for this program was picked up and is currently in operational use. As of May 24, 2023, twenty (20) patients are enrolled in Community Paramedicine with two (2) to three (3) new admissions pending.

Action Item: Mike presented the Board with the "Antimicrobial Stewardship Program – Letter of Commitment" (an advanced copy of this document was provided to the Board of Trustee members with their Board packet for the meeting) and requested their approval. Sheri Frost made a motion to accept and approve the Letter of Commitment with authorization for the Board Chairperson, Denise Elefson, to sign on the Board's behalf. Teri Foster made the second. Motion carried unanimously.

VII. FINANCIAL REPORT

Tara Spidle presented the financial report for April 2023 as follows:

Total gross revenue was \$3.35 million in April 2023. Operating gain of \$74,405.00. A net gain of \$178,828.00 was realized after tax revenue.

Guy Clark made a motion to approve the financial report for April 2023 with a second from Larry Griffin. Motion carried unanimously.

VIII. CLINICAL AND QUALITY IMPROVEMENT INITIATIVES

Kelly Barker presented a report to the Board on both clinical and quality improvement initiatives as follows:

Chest Pain performance metrics through May 24, 2023 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; and
- “Door to Needle” time.

Additional quality metrics through the end of April 2023 reported to the Board of Trustees include:

- Medical error tracking;
- Adverse drug events;
- Patient falls;
- Blood incompatibility;
- Foreign objects retained after surgery;
- Air embolisms;
- Stage III or IV pressure ulcers; and
- Blood culture contamination rates through April 2023.

Kelly reviewed current initiatives related to Infection Prevention as below:

- Antibiotic Stewardship; and
- Water Management Program/ Quarterly Legionella Testing Results: All random samples collected for testing in the second (2nd) calendar quarter of 2023 all returned as “below detectable limits”. With the opening of the new OPC Building, random locations sampled each quarter will be increased from the current three (3) to a total of five (5) beginning in the third (3rd) calendar quarter of 2023.

The next session of training for BLS and PALS is scheduled for June 05, 2023 beginning at 10:00am.

IX. HR AND MARKETING REPORT

Shannon Erb provided the HR and Marketing Report as follows:

- April 2023 employee turnover data.
- Welcome to Allyson Watson, PM (EMS) and Alayna Link, CMA.
- Congratulations to Kari Byrd for obtaining her Paramedic license.

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.

X. MERCYONE REPORT

There was no MercyOne representative present at the meeting.

The meeting adjourned at 6:10pm.