

DECATUR COUNTY HOSPITAL BOARD OF TRUSTEES

MEETING MINUTES

June 28, 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**

Mike Johnston requested two (2) amendments to the previously published agenda:

1. The addition of Iowa Code 21.5(1)(J) to the closed session; and
2. Under the “CEO Update”, the addition of an action item for “Disposal of Hospital Property – Chevrolet Cobalt”.

Teri Foster made a motion to approve the agenda as amended and Rebekah Mendenhall made the second. Motion carried unanimously.

**III. PUBLIC COMMENT**

There was no public comment.

**IV. CONSENT AGENDA**

Larry Griffin made a motion to approve the following Consent Agenda items with a second by Cheryl Zach: (1) May 2023 Regular Meeting Minutes (2) May 2023 Accounts Payable (AP): \$1,229,493.95.00 (3) May 2023 Payroll: \$553,545.00 (4) May 2023 Accounts Receivable Write-Offs: \$17,793.00. Motion carried unanimously.

**V. MEDICAL STAFF REPORT**

Dr. Wehling gave the Medical Staff Report. There was no regular meeting of the DCH Medical Staff in June 2023; however, Dr. Wehling provided updates on the following:

- The newly established “Joint Committee” for the review of total joint surgery cases prior to scheduling and, additionally, for post-operative quality assurance; and
- Continued staffing challenges for Emergency Department (ED) providers.

**VI. CLOSED SESSION – Iowa Code 21.5(1)(L) and Iowa Code 21.5(1)(J)**

At approximately 5:35pm, 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)(L); and
- Iowa Code 21.5(1)(J).

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

With a consensus of the Board members to do so, the Board returned to open session at approximately 6:32pm. Those present at the time were the same as listed above when the Board of Trustees entered closed session.

Following the return to open session, Sheri Frost made a motion to authorize the CEO to proceed as discussed in the closed session. Rebekah Mendenhall made the second. Motion carried unanimously.

## **VII. FINANCIAL REPORT**

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

Total gross revenue was \$3.45 million in May 2023. Operating gain of \$2,210.00. A net gain of \$106,995.00 was realized after tax revenue.

Larry Griffin made a motion to approve the financial report for May 2023 with a second from Teri Foster. Motion carried unanimously.

### **ACTION ITEMS:**

Approval of Eide Bailey to Conduct the FY 2023 Audit and to Prepare and Submit the FY 2023 Cost Report:

Larry Griffin made a motion to approve the engagement of Eide Bailey as stated for the FY 2023 Audit and Cost Report. Rebekah Mendenhall made the second. Motion carried unanimously.

Approval of the Hospital Budget for FY 2024: The Finance Committee of the Board of Trustees met with Mike Johnston and Tara Spidle on June 28, 2023 beginning at 3:30pm to review the proposed budget for Decatur County Hospital for FY 2024. The committee made a recommendation that the full Board accept and approve the budget as presented. Following review and discussion, Sheri Frost made a motion to approve the FY 2024 hospital budget with a second from Teri Foster. Motion carried unanimously.

## **VIII. CEO UPDATE**

Mike Johnston provided the Board of Trustees with the following updates:

- The Infusion Area project is now underway and demolition of the existing space is nearly complete. The project is on schedule with a designated date of November 29, 2023 for substantial completion and final completion is expected by December 20, 2023.
- New Providers: Dr. Cobb (Upper Extremity Ortho) and Dr. Mehta (Cardiology) will both begin new clinics here at DCH on July 21, 2023.
- Neurology: As of July 2023, Dr. Loutfi will begin two (2) full weeks of coverage per month. As of June 28, 2023, he already has one hundred twenty-seven (127) patients schedule for his July visit.

### **ACTION ITEMS:**

Approval of Revised Organizational Chart: Sheri Frost made a motion to approve the revised organizational chart and Teri Foster made the second. Motion carried unanimously.

Approval of Hospital Property Disposal – Chevrolet Cobalt: Mike Johnston requested that the Board of Trustees authorize the hospital administration to dispose of the currently-owned Chevrolet Cobalt in a manner consistent with legal and regulatory requirements applicable thereto. Sheri Frost made a motion to approve the disposal under the terms enumerated. Teri Foster made the second. Motion carried unanimously.

Hospital Insurance (Liability, Property, Automobile, etc.) for FY 2024: In accordance with the requirements of Article VI, Section 2B of the Board Bylaws, the Board of Trustees (acting as a committee of the whole), conducted an annual review of all insurance policies of Decatur County Hospital. Mike Johnston presented the Board with quotes from the hospital's current broker/ carriers as well as a second quote from a separate vendor for coverage that was substantially (though not exactly) the same as the present policies. After examination of the options and

some discussion, Guy Clark made a motion to accept the bid received from Jester Insurance and to direct the CEO to accept and bind the applicable coverage. A second part of this motion included the requirement that in each subsequent year moving forward, as in the current renewal for FY 2024, the hospital administration shall obtain no less than two (2) quotes from different brokers and to ensure to the extent reasonably possible that coverage amounts, deductibles etc. are similar. Sheri Frost made the second. Motion carried unanimously.

## **IX. 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 June 28 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 provided additional updates to include:

- The Quality Program “Master Scorecard” through the end of May 2023 was presented to the Board in written form for their review; and
- A discussion of the new Patient Experience Program just initiated in June 2023.

## **X. HR AND MARKETING REPORT**

Shannon Erb provided the HR and Marketing Report as follows:

- May 2023 employee turnover data.
- Welcome to Richard Barker (EVS), Amythist Harkins, CNA, Billie Sweerin, LPN, Raven Ameigh, CNA and Dakota McElderry (Patient Experience Representative).

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. MERCYONE REPORT**

There was no MercyOne representative present at the meeting.

<b>XII. ADJOURNMENT</b>
The meeting adjourned at 7:34pm.

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Guy Clark, Secretary