

DECATUR COUNTY HOSPITAL BOARD OF TRUSTEES

MEETING MINUTES

January 22, 2025 – 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), Shannon Erb (COO), Brandi Oesch (CNO), Feron Leonard (Med Surg/ ED Director), and Jenny Keller (Quality).

I. CALL TO ORDER

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

II. AGENDA APPROVAL

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

III. CONSENT AGENDA

Cheryl Zach made a motion to approve the Consent Agenda with a second by Rebekah Mendenhall. Motion carried unanimously. (1) Meeting Minutes – December 2024 and January 14, 2025 (2) November 2024 Accounts Payable (AP): \$1,445,412.00; December 2024 AP: \$1,515,168.00 (3) November 2024 Payroll: \$609,264.00; December 2024 Payroll: \$919,523.00 (three payroll month) (4) November 2024 Accounts Receivable Write-Offs: \$17,398.00; December 2024 Accounts Receivable Write-Offs: \$87,099.00.

IV. PUBLIC COMMENT

There was no public comment.

V. MEDICAL STAFF REPORT

Dr. Wehling was not present due to performing an emergency surgical procedure.

VI. CEO UPDATE

Mike Johnston provided the following updates to the Board members:

Dermatology: Our new Mohs surgical procedures are going very well. Dr. Ojong has 14 (with a possible 15th) scheduled for her next visit in February 2025.

Cardiology: Dr. Cruz performed our first outpatient cardioversion on January 22, 2025. These procedures will be available at DCH in the outpatient setting moving forward.

Neurology: Dr. Basil Holoyda starts his clinic next week giving the hospital neurology coverage for three (3) weeks of each month.

Other Items of Discussion and Review:

1. Feedback related to the special Board meeting on January 14, 2025;
2. Review and discussion of the public comments from the current Community Health Needs Assessment (CHNA) survey;
3. Early payoffs related to the financing of both the Nuclear Medicine camera and the MRI units;
4. A review of pricing information for the scheduled replacement of Ambulance 27-11 due in calendar year (CY) 2026; and

5. Estimates on additional equipment required for spine surgery.

Action Items:

Medical Staff Appointments and Reappointment: The following medical staff appointments, reappointments, and additional privileges were unanimously approved by the Active Medical Staff at their regular meeting on January 15, 2025 and presented to the Board for final approval:

Appointments:

Vilma Bramasco, ARNP (Urology);
Ernesto Cruz, MD (Cardiology);
Basil Holoyda, MD (Neurology);
Rebecca Kuo, MD (Spine Surgeon); and
Oben Ojong, DO (Dermatology).

Reappointments:

Randy Metzger, DPM (Podiatry)

Additional Staff Privileges:

Ernesto Cruz, MD (TEE Procedures); and
Denniz Zolnoun, MD (Additional speculum examination).

Teri Foster made a motion to approve the appointments and reappointments as presented and Cheryl Zach made the second. Motion carried unanimously.

Election of Board Officers for the Term January 2025 to January 2027:

Chairperson of the Board: Sheri Frost nominated Denise Elefson to continue in her current position of Chairperson of the Board with a second by Larry Griffin. Ms. Elefson accepted the nomination and hearing no others, the process closed. Teri Foster made a motion to approve Denise Elefson as Chairperson of the Board for the above-enumerated term of office. Rebekah Mendenhall made the second and the motion carried unanimously.

Vice-Chairperson of the Board: With the process open, Sheri Frost nominated Cheryl Zach to the position of Vice-Chairperson of the Board of Trustees for the 2025 to 2027 term. Larry Griffin seconded the nomination and Ms. Zach accepted. With no others made, the process closed. Sheri Frost made a motion to approve Cheryl Zach as Vice-Chairperson and Larry Griffin made the second. Motion carried unanimously.

Secretary/ Treasurer of the Board: Cheryl Zach placed Sheri Frost into nomination to serve as the Secretary/ Treasurer of the Board with a second by Larry Griffin. Hearing no others, the process closed. Rebekah Mendenhall made a motion to approve Sheri Frost as the Secretary/ Treasurer of the Board for the new term. Teri Foster made the second. Motion carried unanimously.

In accordance with Article V, Section 2 of the Board of Trustee Bylaws, officers of the Board “shall hold their respective offices until successors are elected...” As a result of the election held on January 22, 2025, Denise Elefson continued in her role as Chairperson of the Board of Trustees for Decatur County Hospital. Sheri Frost vacated the role of Vice-Chairperson immediately upon the election of her successor. Cheryl Zach assumed the role of Vice-Chairperson of the Board as of January 22, 2025. Guy Clark vacated the role of Secretary/ Treasurer immediately upon the election of his successor. Sheri Frost assumed the role of Secretary/ Treasurer for the Board of Trustees of DCH as of January 22, 2025.

Guy Clark is hereby removed from the signature cards and as a signing authority for every bank account of Decatur County Hospital at all places where they currently exist as described on the “Resolution Naming Depositories” as last approved by the Board of Trustees on July 24, 2024 and for any revisions of the same which may be lawfully approved by the Board of Trustees in the future. Sheri Frost, in her capacity as Secretary/ Treasurer of the Board is hereby added to, and Denise Elefson as Chairperson of the Board shall remain on, the signature cards and as signing authorities for every bank account of DCH at all places therein they currently exist as described on the “Resolution Naming Depositories” as last approved by the Board of Trustees on July 24, 2024 and for any revisions of the same which may be lawfully approved by the Board of Trustees in the future.

Board Committee Assignments for Calendar Year (CY) 2025:

In accordance with the Board Bylaws, Denise Elefson as Chairperson of the Board made the following standing committee appointments for CY 2025 in consultation with the Board as a whole:

Executive Committee:

Denise Elefson, Board Chairperson;
Cheryl Zach, Board Vice-Chairperson; and
Sheri Frost, Board Secretary/ Treasurer.

Finance Committee:

Sheri Frost, Committee Chairperson;
Teri Foster; and
Rebekah Mendenhall.

Building and Grounds Committee:

Cheryl Zach, Committee Chairperson;
Larry Griffin; and
Guy Clark.

Teri Foster made a motion to approve the standing committee assignments as enumerated by the Board Chairperson with a second by Sheri Frost. Motion carried unanimously.

Approval of Medical Staff Bylaws: The Active Medical Staff of Decatur County Hospital unanimously approved the bylaws following review at their regular meeting on January 15, 2025. The same were presented to the Board of Trustees for final approval and ratification. Sheri Frost made a motion to approve the Medical Staff Bylaws as presented. Teri Foster made the second and the motion carried unanimously.

Annual Review and Approval of Board of Trustee Bylaws: In accordance with Paragraph 3, Section 13 of the Board Bylaws, the Board of Trustees conducted an annual review of the same. No changes were required or made. Cheryl Zach made a motion to approve the Board Bylaws as presented with a second by Rebekah Mendenhall. Motion carried unanimously.

Annual Conflict of Interest Disclosure Form: The relevant forms were completed and signed by each member of the Board of Trustees. The documents were reviewed by the hospital administration and the Board Chairperson, signed, and filed in accordance with standing policy.

Resolution Ordering the Child Care Center Construction Project, a Public Hearing on the Plans, Specifications, Form of Contract and Estimated Total Cost of Construction, the Publication of Advertisement for Bids (Notice to Bidders) and Notice of Hearing and Setting the Time and Place for Receipt of Bids for Same: Sheri Frost made a motion to approve the resolution. Teri Foster made the second and the motion carried unanimously. In approving the resolution, the Board instructed the Chief Executive Officer to ensure that certain procedural issues to include, but not limited to, differences between state and federal procurement requirements were satisfactorily resolved prior to proceeding.

VII. FINANCIAL REPORT

Tara Spidle presented the financial reports for November 2024 and December 2024 as follow:

Total gross revenue was \$3.44 million/ 3.77 million in November/ December 2024. An operating gain of \$113,086.00 and a net gain of \$236,435.00 were realized after tax revenue and other non-operating income in November 2024. An operating loss of \$470,289.00 and a net loss of \$341,688.00 after tax revenue were realized in December 2024. Larry Griffin made a motion to approve the financial reports for both November 2024 and December 2024. Sheri Frost made the second. Motion carried unanimously.

VIII. HR AND MARKETING REPORT

Shannon Erb provided the HR and Marketing Report as follows:

- December 2024 employee turnover data;
- New Hires; and
- CHNA Town Hall – February 13, 2025.

Shannon presented the marketing report for December 2024 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.

IX. CLINICAL AND QUALITY REPORT

Brandi Oesch (CNO), Feron Leonard (Med Surg/ ED Manager), and Jenny Keller (Quality) presented the Clinical and Quality Report to the Board of Trustees as follows:

Chest Pain Accreditation Measures for November/ December 2024 to include:

- Door to EKG times;
- Troponin – arrival to result times;
- Median time between 1st and 2nd Troponin draws;
- Median time between 2nd and 3rd Troponin draws;
- Required reporting times following Troponin draws;
- Heart Score documentation compliance;
- Patients discharged from observation with non-invasive ischemia evaluation planned;
- “Door-In, Door-Out” Times for STEMI patients;
- “Door to Needle” Times;
- Number of qualifying chest pain patients; and
- Total STEMI patients.

Quality Improvement Metrics for November/ December 2024 to include:

- Adverse drug events/ medication errors;
- Blood incompatibility;
- Stage III and IV pressure ulcers;
- Correct antibiotic prescription rates;
- IV start attempts vs. successes (includes port access) for Med Surg/ ED, Surgery/ Infusion, and Laboratory;
- Total number of positive blood, wound, and urine cultures requiring antibiotics;
- Total number of appropriate antibiotic prescriptions; and
- Patient ambulation statistics.

A written report prepared by the Infection Prevention Nurse was presented to the Board of Trustees with respect to the following:

- Internal hand hygiene audits;
- Surgical Site Infections (SSI);
- Hospital Acquired Infections (HAI);
- CAUTI;
- CLABSI;

<ul style="list-style-type: none"> - C.DIFF; and - Blood culture contamination rates.
X. MERCYONE REPORT
There was no MercyOne representative present at the meeting.
XI. ADJOURNMENT
The meeting adjourned at 6:46pm.

Written Materials Presented to the Board of Trustees:

In addition to the meeting agenda, the Board members received the following written documentation prior to the meeting via email and as part of their packets at the meeting itself:

November 2024 Financial Report
 DRAFT Board Minutes – December 2024
 Medical Staff Bylaws
 Board Standing Committee Assignments
 Quality Meeting Minutes – December 2024
 Quality Scorecard (through December 2024)
 Pathology TAT Report – November 2024
 Blood Culture Contamination – November 2024
 OPC Survey Report – November 2024
 Mercy Board Liaison Memo – November 2024
 DRAFT Medical Staff Meeting Minutes – January 2024

December 2024 Financial Report
 DRAFT Board Minutes – January 14, 2025
 Board Bylaws
 Conflict of Interest Statement
 Chest Pain Committee Minutes – December 2024
 LifeServe Quality Report – 4th Quarter 2024
 Pathology TAT and Quarterly Quality – December 2024
 Blood Culture Contamination – December 2024
 OPC Survey Report – December 2024
 Mercy Board Liaison Memo – December 2024
 CHNA Public Comment Report - 2025

Attest:

 Sheri Frost, Secretary