DECATUR COUNTY HOSPITAL BOARD OF TRUSTEES MEETING MINUTES

August 27, 2025 – 5:30pm

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

ABSENT: None

OTHERS PRESENT: Mike Johnston (CEO), Tara Spidle (CFO), Shannon Erb (COO), Brandi Oesch (CNO), and Feron Leonard (Med Surg/ ED Manager).

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. Rebekah Mendenhall made the second. Motion carried unanimously.

III. CONSENT AGENDA

Cheryl Zach made a motion to approve the Consent Agenda with a second by Larry Griffin. Motion carried unanimously. (1) Meeting Minutes – July 2025 (2) July 2025 Accounts Payable: \$1,847,266.00 (3) July 2025 Payroll: \$981,039.00 (3-payroll month). (4) July 2025 Accounts Receivable Write-Offs: \$66,099.00.

IV. PUBLIC COMMENT

Denise Elefson described a positive patient experience with Dr. Metzger (Podiatry). Teri Foster had similar comments with regards to Elizabeth Allen (Rheumatology/ Weight Loss/ Bone Health).

V. MEDICAL STAFF REPORT

Dr. Wehling was not present at the meeting and, as such, no Medical Staff Report was given. There was no meeting of the DCH Medical Staff in August 2025.

VI. CEO REPORT

Mike Johnston presented the CEO Report to the Board of Trustees as follows:

New Providers and Equipment:

- Dr. Ibrahim (spine) has his first clinic at DCH on August 29, 2025;
- Dr. Dubil (gyn/onc) begins her clinic on September 24, 2025. A meeting is scheduled for September 04, 2025 with representatives from Mission Cancer to discuss collaboration in the gynecological oncology effort;
- Dr. Reinhardt (ortho) will start on October 07, 2025;
- The DEXA (bone density) scanner is scheduled for delivery by the end of September 2025 though the exact date has not yet been determined;
- The HANA surgical table for Dr. Reinhardt will arrive the week of September 22, 2025;
- The new 24/7 orthopedics on-call program begins September 01, 2025. DCH Emergency Department (ED) providers will have near-immediate access to orthopedic surgeon consultations for ED patients; and
- Nuclear Medicine services will resume as of September 03, 2025 and will be offered three (3) days each week.

ATO Settlement:

The unresolved payments to ATO Builders stemming from the Outpatient Clinic (OPC) Construction Project have been successfully resolved between the parties without the need for court litigation. When Decatur County Hospital ceased payments to ATO in March of 2023 due to multiple outstanding issues and payments apparently not made to subcontractors by ATO, the balance owed at that time (including retainage) was \$286,280.64. The negotiated settlement resulted in the following payments made by the hospital with no admission of liability by any party involved:

Glosser: \$50,000; Breiholz: \$60,000;

ForSure Roofing: \$25,000; and

Philadelphia (ATO construction bond underwriter): \$61,280.64.

TOTAL: \$196,280.64.

The remaining \$90,000 in the overall balance was successfully retained by the hospital as part of the settlement.

VII. FINANCIAL REPORT

Tara Spidle presented the financial report for July 2025 as follows:

Total gross revenue was \$4.25 million in July 2025. An operating loss of \$197,110.00 and a net loss of \$65,722.00 were realized after tax revenue and other non-operating income in the month. This is largely due to the three (3) pay periods in the month of July 2025. Cheryl Zach made a motion to approve the July 2025 Financial Report and Teri Foster made the second. Motion carried unanimously.

VIII. HR UPDATES AND MARKETING REPORT

Shannon Erb provided the HR and Marketing Report as follows:

- July 2025 employee turnover data; and
- July 2025 new hires.

Shannon presented the marketing report for July/ August 2025 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 CARE AND QUALITY REPORT

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

Chest Pain Accreditation Measures for July 2025 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 (QFP) patients;
- QFP patients admitted for observation; and
- QFP patients admitted to acute.

Shannon Erb presented the Board of Trustees with updates and new processes for the quality improvement process as determined for fiscal year (FY) 2026.

As part of the Board's review of quality information, Sheri Frost commented on the results of the Outpatient Clinic (OPC) surveys. She commended, with the agreement of the other Trustees, the OPC staff in general, the operations of the clinic, and the patient experience that they have worked to create within that setting. The Board requested that the Chief Executive Officer pass this along to Julie Parmer (Outpatient Clinic Director) and her staff members.

X. MERCYONE REPORT

No MercyOne representative was present at the meeting.

XI. ADJOURNMENT

The meeting adjourned at 6:24pm.

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:

DRAFT Board Minutes – Regular – July 2025 Financial Report – July 2025 Pathology Turn-Around-Times (TAT) – July 2025 DRAFT Board Minutes – Special – July 2025 OPC Surveys – Full Packet – July 2025 MercyOne Liaison Report – July 2025

Attest:	
Sheri Frost, Secretary	-