

DECATUR COUNTY HOSPITAL BOARD OF TRUSTEES
MEETING MINUTES
September 24, 2025 – 5:30pm

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

ABSENT: Rebekah Mendenhall

OTHERS PRESENT: Mike Johnston (CEO), Shannon Erb (COO), Brandi Oesch (CNO), and Dr. Ed Wehling (Chief of the Medical Staff)

I. CALL TO ORDER

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

II. AGENDA APPROVAL

Guy Clark made a motion to approve the meeting agenda as presented. Teri Foster made the second. Motion carried unanimously.
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III. CONSENT AGENDA

Larry Griffin made a motion to approve the Consent Agenda with a second by Cheryl Zach. Motion carried unanimously. (1) Meeting Minutes – August 2025 (2) August 2025 Accounts Payable: \$1,361,286.00 (3) August 2025 Payroll: \$625,472.00. (4) August 2025 Accounts Receivable Write-Offs: \$96,890.00.
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IV. PUBLIC COMMENT

Teri Foster described two (2) different inpatient experiences, both with very positive comments, which had been brought to her attention and specifically commended the care provided by Melissa Smith, PTA from the Rehab Department. Sheri Frost commented on a positive Emergency Department experience of which she was aware and made specific reference as well to Eugene Yoder, ARNP.
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V. MEDICAL STAFF REPORT

Dr. Wehling provided the Medical Staff report to the Board. He briefly reviewed the minutes of the regular meeting of the Medical Staff on September 17, 2025, a hard copy of which was provided to the Board members prior to the meeting via email. Dr. Wehling described the formation of a new “sepsis committee” with the intent to review and revise as needed the hospital’s algorithm, guidelines, and management procedures as they relate to sepsis patients. He further reported to the Board of Trustees on the September 24, 2025 meeting of the hospital’s Trauma Committee; specifically commending the job being done by Nick Horney (EMS Director) in his role as trauma coordinator. Finally, Dr. Wehling presented the Board with the Medical Staff Reappointments and Change from Provisional to Full Status as noted both on the meeting agenda and as follows:
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<u>Medical Staff Reappointments:</u>

Connie Barker, ARNP (Emergency Medicine/ Hospitalist);
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Tyson Cobb, MD (Orthopedics); and

Steven Mehta, MD (Cardiology).

<u>Provisional to Full Status:</u>

Mackenzie Woodyard (Telehealth Psych)

The above described medical staff reappointments and change from provisional to full status were unanimously approved by the Active Medical Staff at their regular meeting on September 17, 2025 and recommended to the Board of Trustees for final approval. Sheri Frost made a motion to approve all as detailed above with a second from Teri Foster. Motion carried unanimously.
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VI. CEO REPORT

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

- Dr. Dubil's (Gynecologic Oncology) new clinic began today (September 24, 2025);
- As of September 19, 2025, the new 24/7 ortho call program through the Emergency Department that began on September 01, 2025, has had four (4) total calls. Three (3) of the calls resulted in referrals to one of DCH's orthopedic providers and the fourth (4th) required transfer to a tertiary facility;
- The DEXA (bone density) scanner installation was completed today (September 24, 2025) with staff training scheduled for September 25, 2025. Following successful completion thereof, the new equipment will be operational;
- Update on the day care center construction project to include a change order necessitated by soil conditions at the site in the amount of \$45,955.80;
- The new (replacement) community transportation van should be ready for delivery in next couple of weeks;
- The HANA surgical table for Dr. Reinhardt's surgical practice was delivered on September 22, 2025;
- Dr. Reinhardt was on-site for orientation on September 16, 2025 and his first clinic day is scheduled for October 07, 2025;
- Frontline Dermatology, which will allow Decatur County Hospital to expand its availability of dermatological services will start on October 22, 2025. This will increase available days each month from the current four (4) to a total of six (6).
- The replacement project for the OR Sterilyzer has been moved up to November 2025; and
- Update on Dr. Ojong's Dermatology practice.

Action Items:

Quotes from Medtronic and IMP: Larry Griffin made a motion to approve both the quote from Medtronic for the purchase of a new cautery machine (\$21,445.90) and the quotation from IMP for the purchase of several pieces of orthopedic equipment for Dr. Reinhardt's clinic and surgical practice (\$13,889.00). Teri Foster made the second. Motion carried unanimously.

Revised Organizational Chart: Guy Clark made a motion to approve the September 2025 revision of the organizational chart with a second from Cheryl Zach. Motion carried unanimously.

Board Resolution – Appointment of Infection Prevention Nurse: The Board of Trustees received the recommendation of the CEO and the CNO, as well as a unanimously approved resolution of the Medical Staff, for the final confirmation of Feron Leonard, RN as the Infection Prevention Nurse for Decatur County Hospital. Teri Foster made a motion to approve the appointment and Cheryl Zach made the second. Motion carried unanimously.

VII. FINANCIAL REPORT

Mike Johnston presented the financial report for August 2025 as follows:

Total gross revenue was \$4.00 million in August 2025. An operating gain of \$34,423.00 and a net gain of \$165,745.00 were realized after tax revenue and other non-operating income in the month. Larry Griffin made a motion to approve the August 2025 Financial Report and Sheri Frost made the second. Motion carried unanimously.

VIII. HR UPDATES AND MARKETING REPORT

Shannon Erb provided the HR and Marketing Report as follows:

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

Shannon presented the marketing report for August/ September 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 presented the Clinical Report to the Board of Trustees as follows:

Chest Pain Accreditation Measures for August 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. A printed copy of the “Departmental Performance Improvement Scorecard” for FY 2026 was provided to the Board members prior to the meeting and reviewed with them as part of the quality report.

X. MERCYONE REPORT

No MercyOne representative was present at the meeting.

XI. ADJOURNMENT

The meeting adjourned at 6:29pm.

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 – August 2025
Financial Report – August 2025
Pathology Turn-Around-Times (TAT) – August 2025
Board Resolution – Appointment of IP Nurse
IMP Quote – Misc Ortho Surgical Equipment
Departmental PI Scorecard – FY2026

DRAFT Medical Staff Minutes – September 17, 2025
OPC Surveys – Full Packet – August 2025
MercyOne Liaison Report – September 2025
Medtronics Quote - Cautery
Organizational Chart Revision – September 2025

Attest:

Sheri Frost, Secretary