# DECATUR COUNTY HOSPITAL BOARD OF TRUSTEES MEETING MINUTES

October 23, 2024 – 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 Manager), Jenny Keller (Quality), Randy Hoffman (Eide Bailey), and Mike Trachta (MercyOne).

#### L CALL TO ORDER

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

## II. AGENDA APPROVAL

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

## III. CONSENT AGENDA

Sheri Frost made a motion to approve the Consent Agenda with a second by Cheryl Zach. Motion carried unanimously. (1) Meeting Minutes – September 2024 (2) September 2024 Accounts Payable (AP): \$1,067,778.00 (3) September 2024 Payroll: \$581,215.00 (4) September 2024 Accounts Receivable Write-Offs: \$3,550.00.

# IV. PUBLIC COMMENT

Rebekah Mendenhall reported positive comments on the physical therapy (PT) department and staff.

## V. PRESENTATION OF THE FINAL FISCAL YEAR (FY) 2024 AUDIT REPORT

Randy Hoffman from Eide Bailey presented the Board of Trustees with the final audit report for FY 2024 and a brief discussion followed. Randy Hoffman departed the meeting following his presentation and the aforementioned discussion. Larry Griffin made a motion to accept and approve the FY 2024 final audit report as presented and Teri Foster made the second. Motion carried unanimously.

#### VI. MEDICAL STAFF REPORT

Dr. Wehling was not present due to a previously planned vacation.

#### VII. CEO UPDATE

Mike Johnston provided the following updates to the Board members:

<u>Cardiology Update:</u> Our second (2<sup>nd</sup>) Cardiologist, Dr. Ernesto Cruz, began his clinic this week. With this addition (and including the services of Dr. Mehta), DCH is able to offer cardiology services up to eight (8) days per month. We will begin transitioning Dr. Mehta to interventional procedures within the next month or two.

<u>New Clinics:</u> We are currently on schedule to add the following new or updated clinic services by the end of January 2025:

- Dermatology: Starting November 04, 2024, Dr. Oben Ojong will provide services for four (4) consecutive days each month to include surgery;
- Spine: Dr. Rebecca Kuo will start her new clinic and surgical practice for spine surgery on December 6, 2024; and
- Second (2<sup>nd</sup>) Neurologist: We will increase our Neurology clinic availability to three (3) weeks per month beginning January 27, 2024 with the addition of Dr. Basil Holoyda. Dr. Holoyda will work one (1) week per month adding to the two (2) weeks per month that Dr. Loutfi is currently on-site.

<u>Board of Pharmacy</u>: The Iowa Board of Pharmacy will conduct a routine survey at Decatur County Hospital on November 06, 2024.

<u>Trauma Recertification:</u> DCH received recertification as a Level IV trauma center by the State of Iowa this past week.

# **Action Items:**

- 1. <u>Replacement of Existing Heating Water Boilers:</u> Two (2) quotes were presented to the Board of Trustees for the replacement of the two (2) existing heating water boilers in the plant. Sheri Frost made a motion to approve the lower of the two quotes, from the Hildreth Company, for a total cost of \$144,942.00. Rebekah Mendenhall made the second and the motion carried unanimously.
- 2. <u>CloudWave Cybersecurity Services:</u> Mike Johnston presented the Board with a proposal to significantly increase the hospital's existing cybersecurity services at an additional cost of \$60,772.00 per year with our current vendor (CloudWave). Teri Foster made a motion to approve the proposal as presented and Cheryl Zach made the second. Motion carried unanimously.
- 3. November 2024 Regular Board Meeting: The regular meeting of the Board in November 2024 falls the night before the Thanksgiving holiday. Mike Johnston suggested that, due to the holiday, the meeting be held one (1) week later on December 04, 2024. Sheri Frost made a motion to move the date of the next regular Board meeting as indicated with a second from Guy Clark. Motion carried unanimously. The Board also advised that Chief Executive Officer (CEO) that when meeting schedules are set in each calendar year, and where a regular Board meeting in November falls right before Thanksgiving, to always advance the meeting one (1) week forward. Aside from the December 04, 2024 meeting noted above, there will be no additional regular meetings of the Board of Trustees in calendar year (CY) 2024.

## VIII. FINANCIAL REPORT

Tara Spidle presented the financial report for September 2024 as follows:

Total gross revenue was \$3.82 million in September 2024. An operating gain of \$106,777.00 and a net gain of \$332,867.00 were realized after tax revenue and other non-operating income in the month. Larry Griffin made a motion to approve the financial report for September 2024. Teri Foster made the second. Motion carried unanimously.

#### IX. HR AND MARKETING REPORT

Shannon Erb provided the HR and Marketing Report as follows:

- September 2024 employee turnover data; and
- New Hires.

Shannon presented the marketing report for September 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.

## X. CLINICAL AND QUALITY REPORT

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

Chest Pain Accreditation Measures for September 2024 to include:

- Door to EKG times:
- Troponin arrival to result times;
- Times for 2<sup>nd</sup> and 3<sup>rd</sup> 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 September 2024 to include:

- Adverse drug events/ medication errors;
- Patient falls;
- 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.

The quality scorecard with metric results to-date was reviewed with the Board members and a written copy of the same was provided in their Board packets for the meeting.

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;
- C.DIFF; and
- Blood culture contamination rates.

# XI. CLOSED SESSION – Iowa Code 21.5(1)(i)

At approximately 6:42pm, a roll call vote was called for the Board to enter closed session for discussion under the following exemption(s):

- Iowa Code 21.5(1)(i): Personnel. \*The closed session was requested by the individual/ personnel member to be discussed.

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 were Mike Johnston and Mike Trachta. Mike Johnston left the closed session at approximately 7:08pm.

With a consensus of the Board members obtained to do so, the Board returned to open session at approximately 7:25pm on the same date. The Board members present when the open session reconvened were Denise Elefson, Sheri Frost, Guy Clark, Teri Foster, Larry Griffin, Rebekah Mendenhall, and Cheryl Zach. Mike Trachta was also present when the Board reconvened in open session.

Following the return to open session, the Board accepted MercyOne's recommendation as to the CEO's compensation package for the coming year. Teri Foster made the motion to accept/approve with a second by Rebekah Mendenhall. Motion carried unanimously.

## XII. ADJOURNMENT

The meeting adjourned at 7:27pm.

## 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:

September 2024 Financial Report
September 2024 Medical Staff Minutes
OPC Patient Survey Results – Sept 2024
Blood Culture Contamination Report – Sept 2024
Hildreth Company – Boiler Replacement Quote
CloudWave Proposal
Eide Bailey – Final FY 2024 Governance Letter
Quality Scorecard – Through September 2024

DRAFT Board Meeting Minutes – September 2024 Quality Committee Meeting Minutes – Sept 2024 Mercy Pathology TAT Report – September 2024 Key Findings – Sept 2024 Child Care Report Baker Group – Boiler Replacement Quote Eide Bailey – Final FY 2024 Audit Report MercyOne October 2024 Liaison Report

Attest:	
Guy Clark, Secretary	