

GRAHAM HOSPITAL DISTRICT
BOARD OF DIRECTORS MINUTES
June 24, 2021

The Board of Directors of Graham Regional Medical Center met in the Education Conference Room Thursday, June 24 at 12:00 P.M.

Board members present: Terry Bishop, Dr. Behr, Barrie Strickland, Sylvia Overton, and Jon Garvey

Board members absent: Wyatt Pettus and Suzy Graham

Members of management present: Shane Kernell, Jeff Casbeer, Sharon Hilliard, Terri Busey, Jeff Clark, Enoc Espinoza, Shelly Walls, Pamela Harvell, and Dana Price

Others present via Zoom: Curtis Rojas

Others present: Mike Williams with the *Graham Leader* and Erin Freeman

Presiding Secretary: Tammy Whittenburg

1. Call to Order and Record of Attendance

Vice President Behr called the meeting to order at 12:00 P.M. Invocation was given by Jon Garvey.

2. Public Comment

There were no public comments.

3. Meeting Minutes

The Directors were asked to review the minutes of the regular meeting on May 27, 2021, for any revisions or corrections.

Action

Motion by Sylvia Overton, second by Terry Bishop to approve the regular board minutes of May 27, 2021. Motion carried.

4. Finance Committee Report

May 2021 Financials – Jeff Casbeer

- Presented and reviewed were the Financial Highlights for May; Income and Expense Statements for the Month Ended May 31, 2021; Balance Sheet as of May 31, 2021; Statement of Sources and Uses of Cash Flow for May 2021; Scorecards for May 2021 showing Admissions, Patient Days, Observation, Surgery Procedures, Radiology Procedures, Laboratory Procedures, and Visits Statistics. Also presented was the Statistics Trended FY 2021 and 2020; Net Revenue to Cash Analysis; GRMC POS Cash Analysis; MD Save Tracker; FTE/AOB Analysis; Scorecards for May 2021 showing DCOH, EBIDA Margin, Debt Service Ratio, Average Payment Period, SWB/Net Patient Revenue, Salary % Net Patient Revenue, Days of Cash on Hand, EBIDA, Net Patient Revenue vs Cash Collections, FTEs/AOB Exclude Clinics, Total POS Cash, and Days of Cash on Hand.
- Curtis Rojas reviewed the Revenue Cycle charts and added a new chart showing Hospital AR.

Action

Motion by Terry Bishop, second by Jon Garvey to approve the financial statements as presented. Motion carried.

5. Action Items

a. Quality and Performance Improvement Plan

Pamela Harvell, Quality Director, presented the Quality Improvement Board Report; Quality Improvement Summary 2020-2021; Quality Improvement Plan for 2021; Organizational Quality Assessment/Performance Improvement (QAPI) Policy; Quality Dashboard for Graham Regional Medical Center, April 2021 Hospital Compare Update; and HCAHPS Top Box Trends. The purpose of the program is to provide a formal process to systematically monitor and objectively evaluate the quality, appropriateness, efficiency, effectiveness, and safety of the care and services provided to GRMC patients.

Action

Motion by Barrie Strickland, second by Sylvia Overton to approve the Quality and Performance Improvement Plan as presented. Motion carried.

b. Infection Control Plan

Dana Price, Infection Control Nurse, presented the Infection Prevention and Control Board Report 2021; Infection Prevention Summary 2021; Infection Prevention Plan for 2021; Infection Prevention Policy; Exposure Control Plan 2021; and Risk Assessment. The Infection Prevention and Control Program is implemented by the Infection Control Nurse/Infection Preventionist and monitored by the Infection Control Committee, a multidisciplinary team that includes a member of medical staff and our Chief Nursing Officer.

Action

Motion by Jon Garvey, second by Sylvia Overton to approve the Infection Control Plan as presented. Motion carried.

c. House Bill 3834 Completion of Cyber Security Training

HB House Bill 3834 states that local governments must complete Security Awareness Training by June 14 of each year and require periodic audits to ensure compliance. Local governments must annually certify their training compliance by June 15 of each year. Graham Regional Medical Center has successfully submitted the required annual Cybersecurity Training Certification for fiscal year 2021. The Board must sign the House Bill 3834 Certification document that states Graham Regional Medical Center is in compliance with the employee security awareness training and in compliance with the audit requirements of Section 2054.5191 Government Code.

Action

Motion by Sylvia Overton, second by Terry Bishop to approve the House Bill 3834 Completion of Cybersecurity Training and is in compliance with the audit requirements of Section 2054.5191 as presented. Motion carried.

6. Reports

a. Medical Chief of Staff Report

- i. Dr. John Lucas was not in attendance.

b. CEO Report – Shane Kernell

- i. The business plan will be presented at the board meeting next month, the marketing plan will be presented in August, and the budget and tax rate in September. In the business plan, the core components are quality, growth, and operations.
- ii. The capital expenditure items approved by the board, for the most part, have been implemented. The badging access is almost complete. The nurse call add-on has been working out very well and is in place. LSI telemetry system for cardiac rehab is in place, fully implemented, and working well.
- iii. We are still working on the EMS building. We received an update, and it will probably not be here until August due to the supply chain disruption. They cannot get tires for delivery and waiting on a handicapped shower. It is that way for everyone. We will set up an escrow account for procurement of the building to meet the June 30 deadline for the CARES Act money.
- iv. The parking lot will go out to bid at the end of July. We have a contractor coming out in the middle of July to knock the building down and backfill it with some select road-grade material. When that is done, we can put it out to bid.
- v. We received the four-star designation from CMS, Medicare. We are four out of five stars which put us in the top quartile, 25th percentile of all hospitals in the nation as far as quality metrics are concerned. It is on the hospitalcompare.gov website. You can compare how we look to other hospitals in our area.
- vi. For the last two years, we have been on a mission for AHAR certification. We already do the work, we just wanted the gold stamp of approval. We work with the Joint Commission and the American Heart Association, and we got certified officially on June 1. We are certified for Acute Heart Attack Ready. If anybody comes in with a heart attack, we have standards of procedures to take care of people. We were under a microscope for six months and then got certified. It was a team effort. We are the only rural facility in Texas with this certification. We will be working towards acute stroke readiness and mammography certification. Those can take 18 to 24 months.
- vii. Melannie Stansell is now Certified National Operating Room (CNOR). She had to go through training and a credentialing test. This helps our standards to meet the needs of our OR. It also allows her to get help with problems.
- viii. The health fair is coming back this year. It will be Saturday, July 24. We anticipate a full health fair this year with our lab draws and booth setups.
- ix. We have had maybe one or two patients in the hospital for short stays with COVID-related illnesses. The numbers have been very small, averaging two to four every seven days in the county. We still collect numbers from all the facilities. We are still a mask facility. When you come in, you are asked to wear a mask and self-screen. We are still the predominant vaccinator for Young County. YCFC has been doing lots of vaccines, close to 7,000. We just have Moderna. Our Johnson and Johnson sat on the shelf and expired. People did not have a want for it. We have no word on boosters. We know the developers are working on it.
- x. The medical staff voted this week to offer the COVID vaccine to patients upon discharge.

7. Executive Session

Vice President Behr convened into Executive Session at 1:13 P.M.

Executive Session: The Board will meet in closed session pursuant to:

- a. Texas Health and Safety Code §161.032, deliberation of information from the Medical Staff regarding applications for appointment and/or reappointment to the Medical Staff and

information from the Compliance Officer to consider quality assurance/performance improvement reports

Executive Session adjourned at 1:58 P.M.

8. Open Session

The Board reconvened in open session at 1:58 P.M.

Action

Motion by Terry Bishop, second by Sylvia Overton to approve the reappointments and delegated credentialing of:

A. Reappointments:

- Active – Surgery
 - Donald Behr, MD
- Active – Family Medicine
 - Steve Jones, MD
 - John Lucas, MD
 - W. Patrick Martin, MD
 - Jared Mataska, MD
 - Pete Brown, MD
- Consulting – Neurology
 - Danny Bartel, MD
- Consulting – Otolaryngology
 - Cameron Godfrey, MD
- Consulting – Gastroenterology
 - Louis Wilson, MD
 - Timothy McClellan, MD
- Hospital Based – Anesthesiology
 - Kelly Matlock, MD
- Hospital Based – Pathology
 - David Flack, MD
 - Dennis Reinke, MD
- Allied – Anesthesiology
 - Jeffrey Hutson, CRNA
 - Esteban Vasquez, CRNA

B. Delegated Credentialing:

- Hospital Based – Teleradiology
 - Edgardo Agrait-Bertran, MD
 - Andrew Bennett III, MD
 - Mary Betterman, MD
 - Justin Boe, MD
 - Renee Bonetti, MD
 - Phoebe Dann, MD
 - Valerie Eckard, MD
 - Donald Eckard, MD
 - Stacy Greenspan, DO
 - Mark Halsted, MD
 - Stephanie Heinlen, MD
 - Christopher Hendrix, DO

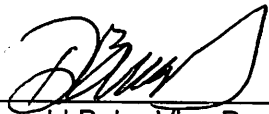
- Jeremie Karsenti, DO
- Nina Kottler, MD
- Robert Lapidus, MD
- Snehal Mehta, MD
- Giovanni Millare, MD
- Supratik Moulik, MD
- Barbara Newman, MD
- Sarah Orrin, MD
- Tara Otto, MD
- Stephen Parven, MD
- Jorge Ramirez-Gonzalez, MD
- Erik Richter, MD
- Samir Shah, MD
- Robert Stears, MD
- Jana Sulzer, MD
- Danit Talmi, MD
- Jay Tank, MD
- Benson Tran, MD
- Syed Zaidi, MD
- Roshon Amin, MD
- Aaron Ashton, MD
- Rebhi Awad, MD
- Solomon Bierman, MD
- Joel Carp, MD
- David Pilkinton, MD
- Mumtaz Syed, MD
- David Zorinsky, MD

Motion carried.

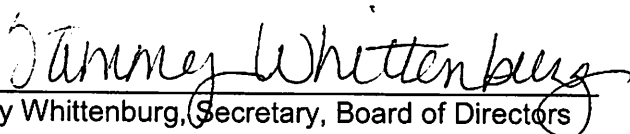
Action

Motion by Barrie Strickland, second by Sylvia Overton to approve the Quality Report as presented.
Motion carried.

There being no further business, the meeting adjourned at 1:59 P.M.



Dr. Donald Behr, Vice President, Board of Directors



Tammy Whittenburg, Secretary, Board of Directors