### HUNT MEMORIAL HOSPITAL DISTRICT BOARD OF DIRECTORS

October 27, 2020

The Hunt Memorial Hospital District Board of Directors conducted a meeting on Tuesday, October 27, 2020 at 6:30 p.m. at Hunt Regional Medical Center, sixth floor Homer Horton, Jr. Boardroom, 4215 Joe Ramsey Blvd., E., Greenville, Texas.

Vice Chairman Nelson called the meeting to order.

#### **ROLL CALL:**

Mrs. Sarah Alderman

Dr. James Barr

Mr. John C. Nelson, Jr.

Mrs. Janet Peek

Dr. Scott Pierce

Mr. William Rutherford

Mr. Michael Taylor

Mrs. Julia Wensel

comprising a quorum of the Board; also,

Mr. Richard Carter, President/CEO

Ms. Leah Curtis, Hospital Counsel

Mr. Lee Boles, Vice President/CFO

Mr. Reese Hurley, MSN-Adm., RN, Vice President/CNO

Mr. John Heatherly, Vice President Operations/Support Services

Ms. Emily Sundeen, DNP, FNP-BC, Vice President Quality & Clinical Integration

James Sandin, M.D., Vice President Medical Staff Affairs

Mr. Leland Dixon, TRANE

Mr. Matt McMurphy, President/CEO Reliant at Home, Inc.

Mr. Jeffrey Constantino, Facilities Management Director

Ms. Lisa Hill, Foundation Development Marketing Communications Director

Mr. Andrew Lawrence, Senior Financial Analyst

Ms. Jamie Morgan, Accountant

HRMC Medical

There was no medical staff report.

Staff Report

Approval of

Dr. Barr moved, seconded by Mr. Rutherford, to approve the

Minutes

September 9, and September 22, 2020 minutes. The motion carried

unanimously.

**Citizens To** 

There were no citizens to be heard on non-agenda items.

Be Heard

#### Public Testimony

There were no members of the public present to address the Board of Directors regarding any item on the agenda before or during the Board's consideration of said items.

## Unfinished Business

There was no unfinished business.

## Election of Board Chairman

Ms. Curtis conducted the election for Board Chairman. She opened the floor for nominations. Mr. Rutherford nominated James Barr and the nomination was seconded by Mrs. Wensel. Mr. Taylor nominated Dr. Scott Pierce and the nomination was seconded by Mr. Nelson. Dr. Barr declined the nomination. There being no further nominations from the floor, members voted by show of hands for Dr. Pierce with Dr. Barr abstaining. Members thanked Mr. Nelson for serving as interim Chair over the past few months. Dr. Pierce thanked everyone. He stated this is a dynamic Board and he looks forward to leading the way to positive changes over the next year, doing the best job he can, and expects everyone's input as much as possible.

# New Business Consent Agenda

Mr. Rutherford moved, seconded by Mrs. Alderman, to approve the following consent agenda items as recommended. The motion carried unanimously.

To approve the recommendations for appointments, requests to change staff status, reappointments, and resignations for the Hunt Regional Medical Center Medical Staff and the Allied Health Professional Staff upon recommendation of the Credentials Review.

To approve a physician employment contract for Neurology upon recommendation of the Finance Budget Committee and the Executive Compliance Committee.

To approve the revised Neonatal Program Plan for the Provision of Care for Neonatal Intensive Care Unit (NICU) upon recommendation of the Medical Executive Committee and the Board Executive Committee.

To approve a Resolution of Hunt Regional Medical Center Medical Executive Committee and Hunt Memorial Hospital District Board of Directors to support the Hunt Regional Medical Center NICU upon recommendation of the Medical Executive Committee and the Board Executive Committee.

> To approve \$130,40 for the purchase of a Vitek System for the Hunt Regional Medical Center Laboratory upon recommendation of the Facilities Planning Committee and the Finance/Budget Committee.

> To approve \$170,000 for the purchase of the Mako Hip Software for the Hunt Regional Medical Center Operating Room upon recommendation of the Facilities Planning Committee and the Finance/Budget Committee.

To approve \$88,358.95 for the purchase of cooling tower bypass valves and actuators for the Hunt Regional Medical Center Facilities Management Department upon recommendation of the Facilities Planning Committee and the Finance/Budget Committee.

To approve \$68,000 for the replacement of a mini C-Arm for the Hunt Regional Medical Center Interventional Radiology Department upon recommendation of the Facilities Planning Committee and the Finance/Budget Committee.

To approve the revised Hunt Memorial Hospital District Patient Complaint or Grievance Policy upon recommendation of the Risk Management Committee.

#### New Meeting Structure

Ms. Curtis reported due to reports received from the Texas Attorney General on meeting agendas governmental transparency, the agenda has been revised to meet guidelines of the Open Meetings Act. Changes include placing all action items together and outlining discussion topics for closed session to provide fair notice of items up for discussion.

#### **ACTION ITEMS**

Central Utility Plant Assessment Mr. Carter reported a major component of the overall expansion project is to modernize the central utility plant that will power our campus over the next five to fifteen years. During the evaluation of Jacobs designing and Robins & Morton overseeing the central utility plant build, it was determined it may be of value to have an alternative consideration. Three companies were contacted and Trane was selected as the preferred organization to provide an alternative quote. Trane will need sixty days to complete the design at a cost of \$198,000. The cost for Jacobs and Robins & Morton to do the Central Utility Plant is 6.25%

> and 3% of their final cost, respectively. Dr. Pierce reminded members to review the handouts presented by Robins & Morton (options 3 & 6) during their interview. Mr. Heatherly reported Jacobs has requested additional core drilling which will delay Robins & Morton completing the GMP in November and it is hoped to have it completed by the December Board meeting. Also since the Department of State Health Services shut down their operations during the COVID pandemic (March) all reviews are backlogged two to four months and it is not certain when the hospital's expansion project will be reviewed and approved. Thus, the option to self-certify may be considered if final approval by the State is not given timely. The plans will be submitted to the State for their review by November 6 and we are hopeful to receive notification from the State by early January 2021. Jacobs initially quoted costs would be between \$3 to \$41/2 million for the Central Utility Plant and after receiving the Trane quote if costs are significantly different, then all parties will come together to determine the cause of the variances. The State has indicated they will also want to review the plans for the Central Utility Plant and Mr. Heatherly noted the hospital will not self-certify the Central Utility Plant. Trane has a reputation for reliability, high quality and advanced innovation with their systems and, in the end, the hospital will have an exceptional system that will not only support the expansion but will carry us through the next ten to fifteen years. Following the presentation and discussion on the self-certifying process and completed third party reviews of the project, Mr. Rutherford, moved, seconded by Mrs. Peek, to approved \$198,000 for Trane to provide a Central Plant Utility assessment. The motion carried unanimously.

November/ December Board Meeting Dates There was discussion regarding the November and December Board meeting dates. Dr. Barr moved, seconded by Mrs. Wensel, to reschedule the November 24, 2020 Board meeting to November 30, 2020. The motion carried unanimously. The December Board meeting date will remain on December 22, 2020.

Financial Statements

Mr. Boles presented the preliminary September 2020 financial statements, noting admissions were short of budget and length of stay and case mix index increased. Following review of the data, statistical information, and care and treatment of COVID patients, Mr. Taylor moved, seconded by Mrs. Wensel, to accept the statements subject to audit. The motion carried unanimously.

#### **DISCUSSION ITEMS**

Strategic Initiatives

Strategic initiatives may be considered following the Executive Session.

#### President/CEO Report

#### Mr. Carter reported the following:

Congratulated Lisa Hill and staff for a successful Bras for the Cause event held virtually on October 8 that raised \$85,000.

The Union Pacific Foundation Board granted \$5,000 to the Healthcare Foundation on behalf of the Lone Oak Volunteer Fire Department.

The ribbon cutting scheduled for 10 a.m. on October 28, 2020 for the Leonard Family Practice office has been cancelled due to weather and COVID.

The hospital is hosting a Lung Health event on November 5 from 5:30 - 7:30 p.m. at the Warren Fletcher Civic Center in Greenville. Dr. Philip, Dr. Lay, Dr. Shreedhara and Dr. Emandi are scheduled to participate.

The Nurse and PCA of the Year for 2020 were selected in September. Mr. Hurley announced Taryn Davis, RN, was named Nurse of the Year and Shelby Cassidy, named PCA of the Year. Congratulations to Ms. Davis and Ms. Cassidy!

The OB/GYN candidate discussed last month did not accept the recruitment offer.

Hunt County is having a COVID spike noting 48 positive results reported this past Friday and 27 positive results yesterday. The overflow of positive COVID patients from El Paso are being relocated to Dallas and he asked for prayers for staff as the stress level of the pandemic is creating staffing dilemmas.

Expressed appreciation to the Board for attending the special board meeting on October 20 regarding the sale of the bonds. He was pleasantly surprised to know the financial market has strong confidence in our hospital when \$82 million orders were received on our \$28 million bonds.

Quality Performance Report

Ms. Sundeen reported the State conducted an unannounced survey at Hunt Regional Medical Center on October 13, 2020 for two complaints. One complaint related to an emergency department patient with appendicitis and found to be unsubstantiated. The second

complaint related to a daughter's disagreement with her mother's care plan. Unrelated to the complaint, a medication error occurred with the patient and disclosed. Nursing Services and Pharmacy investigated the medication error at the time of the event and the employee appropriately coached. The hospital received a deficiency cited under the Medication Management chapter of the Conditions of Participation because the patient did not receive the right dose at the right time. Since September 22, 2020, the State is conducting focus COVID assessment/ inspection surveys. The hospital received a second recommendation for improvement to provide active screening of our employees as we do for our visitors. The hospital went to passive screening (temperature kiosks) after furloughed staff who were providing the active screening went back to their hospital positions. The hospital has hired six staff to provide active employee screening at the Emergency Department employee entrance and dock entrance. The hospital received the State report on Friday and CMS has twenty days to review the report and list either as a Standard or Condition Level. If a Standard Level is given, the hospital will submit a written plan of correction and if it a Condition Level, the surveyors will return to review the deficiencies cited.

#### Customer Service

Mr. Potter presented the October Service Report outlining the Q3 2020 HCAHPS results, the ER and Outpatient Surgery scores, and the Google Online reviews for the period November 2019 through October 2020. The online review responses increased 303% with a 545% increase in positive reviews. He reported for 2019 the staff donated over 400 Thanksgiving boxes including 130 frozen turkeys to Greenville ISD, Commerce ISD, Quinlan ISD, Cancer Center, Lone Oak Food Pantry, Commerce Food Pantry, Leonard Food Pantry, Farmersville Food Pantry, Cumby Food Pantry, Wolfe City Food Pantry, FISH, Women In Need and Boles Home. Over the past three years, over 1,000 Thanksgiving boxes and 300 frozen turkeys have been donated by the staff. Following the presentation, the Board accepted the report.

#### Compliance Report

Mr. Heatherly presented the Compliance Report for July through September 2020. Compliance training completed on 119 employees and 408 sanction checks completed prior to start dates and all were negative. Under investigations/hotline reports there were no concerns for the quarter (Note – an amendment was made to the report last quarter as there was one report in May investigated and addressed; there was one exit interview question with concern in July and was an Human Resource issue and addressed and there were no concerns in August or September; and for the quarter there were no physician compensation agreements approved. Following the review, the Board accepted the

report.

## Executive Session

An Executive Session held under Texas Government Code §551.071 (1) and (2): Consult with Attorney Concerning any Pending or Contemplated Civil or Administrative Litigation by or against Hunt Memorial Hospital District and discussion of action related to said litigation.

- a. Anderson, et.al. v. Hunt Memorial Hospital District.
- b. Acree v. Hunt Regional Medical Partners.
- c. Hunt Memorial Hospital District v. American Mechanical Partners.
- d. Hunt Memorial Hospital District v. GPA.

Following the Executive Session there was no action taken.

Strategic Initiatives

There was no action taken.

Adjournment

There being no further business, the meeting adjourned at

8:25 p.m.

James Barr, Ph.D.

Secretary

slt