

Minutes Amended Mangum City Hospital AuthoritySession January 24, 2023 at 5:00 PM City Administration Building at 130 N Oklahoma Ave.

The Trustees of the Mangum City Hospital Authority will meet in regular session on January 24th, 2023, at 5:00 PM, in the City Administration Building at 130 N. Oklahoma Ave, Mangum, OK for such business as shall come before said Trustees.

# CALL TO ORDER

Chairman Vanzant called the meeting to order at 5:00pm.

# **ROLL CALL AND DECLARATION OF A QUORUM**

#### PRESENT

Trustee Carson Vanzant Trustee Cheryl Lively Trustee Ilka Heiskell Trustee Ronnie Webb Trustee Lisa Hopper

ALSO PRESENT Erma Mora, Secretary Corry Kendall, Attorney

## **CONSENT AGENDA**

The following items are considered to be routine and will be enacted by one motion. There will be no separate discussion of these items unless a Board member (or a community member through a Board member) so requests, in which case the item will be removed from the Consent Agenda and considered separately. If any item involves a potential conflict of interest, Board members should so note before adoption of the Consent Agenda.

- 1. Approve December 27, 2022 MCHA regular meeting minutes as presented.
- 2. Approve December 15, 2022 QAPI Committee meeting minutes as presented.
- 3. Approve December 20, 2022 Medical Staff meeting minutes as presented.
- 4. Approve December 2022 claims and February 2023 estimated claims.
- 5. Approve the following forms, policies and procedures approved through January 2023 by Cohesive Corporate, on 01/12/2023 by MRMC Quality Committee and on 01/19/2023 by MRMC Medical Staff.

Life Safety Policy Manual

Materials Management Policy Manual Amended Mangum City Hospital Authority January 24, 2023 Motion to approve consent agenda as presented.

Motion made by Trustee Vanzant, Seconded by Trustee Heiskell. Voting Yea: Trustee Vanzant, Trustee Lively, Trustee Heiskell, Trustee Webb, Trustee Hopper

### FURTHER DISCUSSION

None.

## REMARKS

Remarks or inquiries by the audience not pertaining to any item on the agenda.

None.

## REPORTS

6. December 2022 CEO Report

December 2022 CEO Report highlights by Dale Clayton.

Dale reports that the patient care continues to be outstanding and seeing a moderate increase in flu cases. In December 210 patients were served in the emergency department. Continuing to put an emphasis on the social media presence and plans are in motion to increase that year to date statistics. So far YTD numbers are, 1853 ER visits, 995 labs, 2638 radiology tests. States that the week before last, the case manager received some good testimonies. Dale read a few of them to the board and audience, saying that the staff go above and beyond and how helpful & kind the staff is. Also one particular one asking if "Whitney is an LPN or PA", because she is so educated and took the time to explain the patients labs and everything that was going on. Dale also states on a lady calling him for some business information and the lady told him that she was in the ER a few months prior and couldn't be treated any better.

Chairman Vanzant asks that without breaking HIPAA laws, if there is a disclosure release that may allow the public to also see those statements made. Dale answers saying it is a good idea and they will get with their social media person & get some corporate help involved as well to get something done.

7. December 2022 CCO Report

December 2022 CCO Report highlights given by Daniel.

For the month of December following the four pillars of success under excellent patient care, they are proud to report the rehab team says 100% improvement of the standardized assessment scores of all patients receiving therapy.

### **Excellent Patient Care**

- Monthly Education included: New Covid Meds and Treatments, AMA/LWBS Policy, and Emergency Evacuation Plans and MOUs.
- MRMC Rehab Team reports 100% improvement of Standardized Assessment Scores of all patients receiving Therapy.

 MRMC Wound Care Team reports ZERO Hospital Acquired Pressure Ulcers during the month of December.

## **Excellent Client Service**

- Patients continue to rely on MRMC as their local hospital. Total Patient Days increased from 259 days in November 281 days in November. This represents an average daily census of 9.1. In addition, MRMC Emergency Department provided care to 210 patients in December.
- December COVID-19 Stats at MRMC: Swabs (63 PCR & 154 Antigen) with 12 Positive.
- Of the 281 patient days during December, MRMC Infection Preventionist reports ZERO Hospital Acquired MDRO (multidrug resistant organism). A concerning report from the CDC, states ... "the prevalence of MDROs in US hospitals and medical centers has increased steadily". MRMC's outstanding performance is likely due to excellent compliance in Hand Hygiene, Personal Protective Equipment and Strict Isolation practices. 1. Centers for Disease Control and Prevention. Epidemiology of MDROs.
- 8. December 2022 Quality Report

December 2022 Quality Report highlights by Denise.

### **Hospital Activity**

- Hospital Admission
  - Acute Care Admits: 16 up from November (12)
  - Swing-Bed Admits: 6 down from November (8) o Total Discharges: 17 down from November (19)
- Total Patient Days, ED Visits, ADC
  - Total Patient: 281 up from November (259)
  - ED Visits: 209 up from November (203)
  - Average Daily Census: 9.1 up from November (9) AMA/LWBS
- AMA: 2 down from November (4)
- LWBS: 0 no change from November (0)

### Care Management

- 30 Day Readmissions
  - $\circ$  2 for December

### **Risk Management**

- Incidents
  - Falls without Injury
  - AMA/LWBS
  - Other Events

### **Complaints and Grievances**

• 0 grievance

## Patient Falls

- Fall with no injury -2
- Fall with minor injury 0
- Fall with major injury 0

### **Mortality Rate**

- Acute/Swing-Bed Deaths  $\Box$  0 (0%) (YTD = 6%)
- Emergency Department Deaths

### □ 1 (0%) (YTD = (0%)

Organ Bank Notifications within 60 minutes of Death (Benchmark 100%)

o 1 notification within 60 minutes of death/1 death for reporting period

### Infection Control

- Catheter Associated Urinary Tract Infections (CAUTIs) 1
- Central Line Associated Primary Bloodstream Infections (CLABSIs) 0

### **Health Information Management**

- History & Physical Completion (Benchmark 100%) 24/24= 100%
- Discharge Summary Completion (Benchmark 100%) 19/19 = 100 %

### Nursing

- Code Blue o 1
- Transfers o Acute Transfers 2 o ED Transfers 17
- 9. December 2022 Hospital Financial Report

December 2022 Hospital Financial Report by Andrea.

### Statistics

- The average daily census in December was 8.65. This is an increase of .08 from the previous month and brings our YTD ADC to 9.86. As a reminder our target remains 11 ADC.
- Cash receipts for the month of December totaled \$1.7M, of this amount \$585K is related to a Medicare interim rate review settlement (Generally speaking there is approximately a one-two month lag between the net revenue generated each month & the majority of the cash collected).
- Cash disbursements totaled \$1.1M for the month. a HEALTHCARE Balance Sheet Highlights. The operating cash balance as of December is S1.4M. The Restricted Cash balance reflects 50.00 as all remaining COVID grant funds have been recognized and moved to operating cash in December.
- The Due from Medicare asset account reflects S73K. This amount is estimated per communications recently received from Novitas regarding the 2018 and 2019 cost report desk reviews currently in progress. c Accounts Payable has increased S5O9K from the previous month primarily due the monthly decrease of cash disbursements reflective of the increased balance in cash.

• The COVID grant fund liability has been reduced to zero as all funds have been recognized in December.

### **Income Statement Highlights**

- Net patient revenue is \$1.3M, with total operating revenue resulting in \$1.7M primarily impacted by the recognition of \$418K in COVID grant funds and 3408 in other revenues.
- $\circ~$  Operating expenses for the month of December reflect \$1.44M which in line with YTD monthly trends of \$1.42M
- December net income resulted in \$205K.

Chairman Vanzant asks what the total funds received for the year of 2022, how many million dollars passed through the hospital. Andrea answers saying cash receipts for the year came out to 15.5 million dollars. Chairman Vanzant then asks how much of that money did they pay down in total debt in 2022. Answered that about 9.4 million before 2019 were paid back.

10. December 2022 Clinic Operations Report

December 2022 Clinic Operations Report highlights by Jeff.

## **Monthly Stats**

	Dec 21	Dec 22
Total Visits	160	167
Provider Prod	136	140
RHC Visits	160	150
Nurse Visits	na	6
Televisit	0	0
Swingbed (other) na		11
Provider Numbers		
Forster 150		
Payor Mix		
Medicare 43		
Medicaid 63		
Self 5		
Private 56		
Visits per Geography		

Mangum 118

Granite 13

Duke 8

Altus 7

Month Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec Total

Visits 154 97 150 160 180 160 158 262 182 198 219 167 2087

### **Clinic Operations:**

- Limited days due to inclement weather conditions, PTO, acute illness.
- PTO covered by Jeff Brand.

### Quality Report:

- No incidents to report.
- Chart reviews performed and meet all standards. Outreach:
- Continue with issuing Covid Home Testing. Minimal distribution. Summary: December was a difficult month in the clinic. Limited provider days, acute illness with staff, and resignation of the provider all led to decreased patient access which ultimately affected volume. Eagerly awaiting the arrival of the new clinic manager. Presently recruiting for provider replacement. January covered and working on February coverage.

Trustee Heiskell asks what is the current staffing. Answered that they have a rotating provider, Katie Hamilton has done a great job filling the schedule. New staff members coming in and rotating current staff. Trustee Heiskell also thanks for the added comments on the reports and them being super helpful. Heiskell asks about the minimal distribution regarding the covid home testing, if those are the tests that can be picked up at drugstores & pharmacies free of charge? Answered that it is a surplus of covid home tests that were shipped to them and not be needed as much as they used to be and other clinics are experiencing the same problem. Therefore they do have a surplus of covid home tests that are for anybody who wants them.

11. December 2022 Clinic Financial Report

December 2022 Clinic Financial Report highlights by Andrea.

## YTD FS PER GENERAL LEDGER

Gross Patient Revenue 275,833

Less: Revenue deductions 254,394

Net Patient Revenue 530,228

Other Income (if any) 2,604

Operating revenue 532,832

Operating Expenses:

Salaries 118,718

Benefits - - - - - -

Prof Fees 238,626

Contract Labor 10,559

Purch Serv 38,489

Supplies 7,015

Utilities 10,710

Repairs 176

Other 3,560

Insurance 2,462

Travels & Meals 450

Management Fee Direct Exp 138,484

Critical Access Hospital Overhead Allocation (a) - - -

Total Operating Expenses 590,553

Net Income (loss) (57,721)

## **OTHER ITEMS**

12. Discussion and possible action to approve the purchase of a replacement server.

Chad speaks on the server being super old and they have tried everything to keep it up and running. He states that it is very critical to have a working server. If the server fails, everything will go down as well. No internet, no phone system, no EMR will work, which is why it's critical it gets replaced. Chad has worked with Andrea and put together a 48-month plan to pay. Trustee Webb asks if the total cost of the server is approximately \$30,000. Answer being yes. Chairman Vanzant asks how long it will take to get and be installed. Answers, about a month to get and 2 days to install. Trustee Lively asks if they got the 3 different quotes needed. Chad answers that they only got one quote from the preferred vendor. Trustee Webb says if the vendor is on the list that they do not have to go through the bidding process and city attorney Corry Kendall confirmed.

Motion to approve purchase.

Motion made by Trustee Webb, Seconded by Trustee Heiskell. Voting Yea: Trustee Vanzant, Trustee Lively, Trustee Heiskell, Trustee Webb, Trustee Hopper

13. Discussion and possible action to approve the Granite Drug 340B agreement.

Motion to approve.

Motion made by Trustee Heiskell, Seconded by Trustee Lively. Voting Yea: Trustee Vanzant, Trustee Lively, Trustee Heiskell, Trustee Webb, Trustee Hopper

14. Discussion and possible action to approve the JCMH patient transfer agreement.

Daniel speaks that it is just a standard agreement between our facility and Jackson County to transfer patients that may need a higher level of definitive care.

Trustee Hopper asks if something brought this official agreement between Mangum and Jackson County. Daniel answers saying that it is just a standard approach and rules and things like that seem to be common. Chairman Vanzant asks if there is anything in writing if our transfers will be returned to our hospital for our swing beds? Daniel says there's not anything in specific writing but in the agreement it does have some verbiage, along those lines.

Motion to approve.

Motion made by Trustee Vanzant, Seconded by Trustee Webb. Voting Yea: Trustee Vanzant, Trustee Lively, Trustee Heiskell, Trustee Webb, Trustee Hopper

15. Discussion and possible action to approve the BCBS – LOI.

Lori gives a quick update that back in May of 2022 Governor Stitt signed a law that required the state to issue requests for proposals to at least three Medicaid Managed Care contracts health plans. The plans would cover physical health, behavioral health, and prescription drug service. Blue Cross and Blue Shield is one of the plans that is submitting the proposal for that line of business. They sent a letter of intent that if they are awarded that business, they would like to contract directly with Mangum Hospital for those services. Trustee Heiskell asks if we are alright with the 'allowables'. Lori answers that until you have the direct information in paper or the contract in front of you, it's hard to really speak to that. Basically, they are saying that they are trying to allow the current "allowables" we have now.

Motion to approve.

Motion made by Trustee Heiskell, Seconded by Trustee Lively. Voting Yea: Trustee Vanzant, Trustee Lively, Trustee Heiskell, Trustee Webb, Trustee Hopper 16. Discussion regarding clarification as how Cohesive defines or categorizes a "core employee" and an "agency/staff employee".

Dale Clayton speaks on the question to define or explain the core employee and an agency staff employee. He says neither phrase is strictly defined term in either the health care industry or HR industry. Continues in saying that a core employee might generally in this case, refer to a W-2 employees of Health Care resources all of whom work at the Mangum Hospital or clinic. Dale states that it should be noted that this request or one very similar has been a topic of conversation on more than one occasion and the answer has always been the same. Trustee Heiskell responds by saying that the answer has "not" always been the same and she is the one who's posing the same questions since February of last year and they do not get a direct specific answer.

17. Discussion and possible action regarding the current composition of the compliance committee and removing Cheryl Lively and adding Lisa Hopper to that committee.

Motion to remove Cheryl Lively and add Lisa Hopper to committee.

Motion made by Trustee Heiskell, Seconded by Trustee Lively.

Voting yea: Trustee Heiskell Voting Abstaining: Trustee Lively, Trustee Hopper Voting Nay: Trustee Vanzant, Trustee Webb

Motion to table until next month.

Motion made by Trustee Vanzant, Second by Trustee Webb. Voting yea: Trustee Lively, Trustee Heiskell, Trustee Vanzant, Trustee Hopper, Trustee Webb

18. Discussion and possible action to be briefed by Cohesive Healthcare Mgmt. on HR matters, of actions taken, that require executive session, due to its nature. A potential public privacy violation warrants the need to enter into executive session.

Trustee Vanzant is asking if need to go into executive over an HR issue or is it to be briefed on HR issues. Trustee Heiskell states "how about both"? Trustee Heiskell states it is an HR issue that does need to go into executive session. Corry Kendall states we can not go into executive session because it was not properly listed on the agenda. Trustee Heiskell asks Corry that why didn't the proper wording get put on the agenda and he answers that we copied & pasted her request. Trustee Webb, suggests that if something needs to be properly worded that he would call Corry and ask how it should be worded.

19. Discussion and possible action with regard to Cohesive briefing the hospital board regarding HR-related issues.

No discussion.

## **EXECUTIVE SESSION**

20. Discussion and possible action regarding the review and approval of medical staff privileges/credentials/contracts of the following providers with possible executive session in accordance with 25 O.S. § 307(B) (1):

Mary Holmboe, MD - Recredentialing - Pathologist

Ruth Oneson, MD – Recredentialing - Pathologist

Rick Reaves, MD – Recredentialing - Pathologist

Barry Rockler, MD - Recredentialing - Pathologist

Sherrita Wilson, MD - Recredentialing - Pathologist

DIA-Associates, INC (Radiologist Consultants)

Schedule 1 List of Providers – 12/08/2022 – Credentialing/Recredentialing (Attached)

## **OPEN SESSION**

21. Possible action as a result of executive session, if any.

Motion to approve.

Motion made by Trustee Vanzant, Second by Lively.

Voting Yea: Trustee Lively, Trustee Heiskell, Trustee Vanzant, Trustee Hopper, Trustee Webb.

## **EXECUTIVE SESSION**

22. Discussion and possible action regarding the review and approval of medical staff privileges/credentials/contracts of the following providers with possible executive session in accordance with 25 O.S. § 307(B) (1):

Amy Sims, APRN – Clinic Provider

Jamal informs the board before entering in executive session that they interviewed Amy Sims. She is a nurse practitioner and has 18 years' experience. Trustee Vanzant also says that she is amazing and is local & seems very excited for this clinic. Jamal states that Amy has accepted the position and they will be speaking with her after tonight. Trustee Lively asks how many applicants they got? Jamal answers that they had 3 applicants. Trustee Webb asks why the other 2 applicants didn't get called in for an interview. Jamal states that Amy had the skill set and experience that they were looking for.

Motion to approve Amy Sims credentials.

Motion made by Trustee Vanzant. Seconded by Trustee Lively.

Voting Yea: Trustee Lively, Trustee Heiskell, Trustee Vanzant, Trustee Hopper, Trustee Webb.

### **OPEN SESSION**

23. Possible action as a result of executive session, if any.

Motion to approve Amy Sims credentials.

Motion made by Trustee Vanzant. Seconded by Trustee Lively. Voting Yea: Trustee Lively, Trustee Heiskell, Trustee Vanzant, Trustee Hopper, Trustee Webb.

### **EXECUTIVE SESSION**

24. Discussion and possible action with regard to an update from Doerner Saunders Daniel & Anderson about the ongoing litigation in combined case number CJ-2019-04 (Greer County) involving the previous management company and other joint venturers that, with the advice of its attorney, public disclosure may impair the Hospital Authority to adjudicate the claim, with possible executive session in accordance with 25 O.S. s 307(B)(4).

Motion to enter into executive session at 6:07pm

Motion made by Trustee Vanzant, Seconded by Trustee Webb.

Voting Yea: Trustee Lively, Trustee Heiskell, Trustee Vanzant, Trustee Hopper, Trustee Webb.

Declared out of executive session at 7:05pm

### **OPEN SESSION**

25. Possible action as a result of executive session, if any.

No action

## EXECUTIVE SESSION

26. Discussion and possible action with regard to a patient complaint wherein disclosure of information would violate confidentiality requirements under state or federal law with a possible executive session in accordance with 25 O.S. 307(B)(7).

Motion to enter into executive session at 7:06pm.

Motion made by Trustee Vanzant, Seconded by Trustee Webb.

Voting Yea: Trustee Lively, Trustee Heiskell, Trustee Vanzant, Trustee Hopper, Trustee Webb.

Declared out of executive session at 7:32pm.

### Amended Mangum City Hospital Authority January 24, 2023

### **OPEN SESSION**

27. Possible action as a result of executive session, if any.

No action.

### STAFF AND BOARD REMARKS

Remarks or inquiries by the governing body members, Hospital CEO, City Attorney or Hospital Employees

None.

### NEW BUSINESS

Discussion and possible action on any new business which has arisen since the posting of the Agenda that could not have been reasonably foreseen prior to the time of the posting (25 O.S. 311-10)

None.

ADJOURN Motion to Adjourn at 7:34pm.

Motion made by Trustee Vanzant, Seconded by Trustee Heiskell

Voting Yea: Trustee Lively, Trustee Heiskell, Trustee Vanzant, Trustee Hopper, Trustee Webb.

Carson Vanzant, Chairman

Erma Mora, City Clerk