

CUERO REGIONAL HOSPITAL  
BOARD OF DIRECTORS MEETING

June 25, 2020

The Board of Directors of Cuero Regional Hospital held their regular monthly meeting, via conference call, on Thursday, June 25, 2020, Cuero Regional Hospital, DeWitt County, Texas, at 5:30 P.M. The agenda was posted in compliance with the Open Meetings Act. A board packet was posted online at cuerohospital.org, along with a dial in Toll-Free number and access code.

Board members present via conference call were:

Mrs. Faye Sheppard, Vice Chairman  
Mr. Charles Papacek, Secretary  
Dr. John Frels, DDS, Member  
Mrs. Cindy Sheppard, Member, joined after the minutes were approved

Board members not present were:

Mr. Richard Wheeler, Chairman

Leadership members present were:

Mrs. Lynn Falcone, Chief Executive Officer  
Mrs. Alma Alexander, Chief Financial Officer  
Mrs. Judy Krupala, Chief Nursing Officer  
Mrs. Denise McMahan, Assistant Administrator  
Dr. Paul Willers, II, Chief of Staff, arrived after financial report was given  
Dr. David Hill, Chief Medical Officer  
Mrs. Kathy Simon, Administrative Assistant

Guests via conference call: Ms. Allison Flores, Cuero Record, Mrs. Tamy Hackney, HR Director, Mrs. Judy Mazak, ED Director and Mrs. Ismelda Garza, IT Consultant

The Board Vice Chairman called the meeting to order at 5:35 p.m.

CALL TO  
ORDER

Community Input: None

COMMUNITY  
INPUT

Mr. Papacek moved, Dr. Frels seconded, to approve the minutes of the Annual meeting on May 28, 2020 and the Regular called meeting on May 28, 2020 as presented with the addition of clarifying on page 2 of the Regular minutes that it was Mrs. Faye Sheppard that made the note regarding the community support; the motion carried unanimously.

MINUTES

The Chief Financial Officer's Financial Statement and Statistical Report were provided. The Chief Financial Officer spoke on hospital financials and on clinic financials. The reports were accepted as presented.

FINANCIAL/  
STATISTICAL

Dr. Frels moved, Mr. Papacek seconded, based upon the recommendation of Medical Staff, to approve the initial appointments (limited to the privileges delineated) for the Rad

MEDICAL  
STAFF

Cuero Regional Hospital  
Board of Directors Meeting

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Partners Tele-Radiologists as presented on page 3 of the agenda (copy provided at the end of this document); the motion carried unanimously.

Mr. Papacek moved, Dr. Frels seconded, based upon the recommendation of Medical Staff, to approve the two year re-appointments (limited to the privileges delineated) as presented on the agenda for Thao Duong, MD, Tele-Cardiology, Chet Schwab, MD, Pathology, Fazila Siddiqi, MD, Psychiatry; the motion carried unanimously.

The Marketing and Development Director report was provided and consisted of a list of advertising and current events.

MARKETING

The Interim Clinic Administrator's report regarding operations was provided. Mrs. Falcone noted that Dr. Lemley and Dr. Dale Denton will start August 3, 2020.

CLINIC  
LEADERSHIP

The Assistant Administrator's report on Quality/Safety, Finance, and Community was provided.

ASST. ADMIN.  
REPORT

The Chief Nursing Officer's report on Quality/Safety, People, Growth and Community was provided. She also shared that a Root Cause Analysis (RCA) for patient falls was being performed. Jill Saenz is leading this team. The RCA is a structured facilitated team process to identify root causes of an event that resulted in an undesired outcome and develop corrective actions. The RCA process provides a way to identify breakdowns in processes and systems that contributed to the event and how to prevent future events. The purpose of this RCA is to find out what happened, why it happened, and determine what changes need to be made.

CNO REPORT

The Chief Executive Officer's report on Quality/Safety, People, Growth and Community was provided.

CEO REPORT

The Quality report was reviewed.

QUALITY

The Assistant Administrator reported that she completed a Compliance Program Self-Assessment and is currently working on the action plan for some deficiencies that were discovered. A copy of the Self-Assessment will be provided at next month's board meeting. She also reported that the hospital did have a HIPPA occurrence where a patient's lab work was faxed to the wrong nursing home. The lab had just received a new fax machine and the nursing home fax number was programmed to the wrong nursing home. This error has been corrected.

COMPLIANCE

Committee Reports: None

COMMITTEE  
REPORT

Old Business:

The Board Vice Chairman requested the board to again table the Annual Audit Report and board education by BKD, LLC until the board is able to meet in person. Dr. Frels moved, Mr. Papacek seconded, to table the BKD, LLC Annual Audit Report and board training until the board can meet in person or other arrangements can be made; motion carried unanimously.

ANNUAL  
AUDIT  
BKD, LLC

New Business:

The Board reviewed the Human Resources Annual Report for 2019. The report reflected the recruiting; turnover; terminations; resignations; credentialing; and patterns, issues and trends. Mr. Papacek moved, Mrs. Cindy Sheppard seconded, to accept the 2019 Human Resources Annual Report as presented; the motion carried unanimously.

ANNUAL HR  
REPORT

The amount disbursed for indigent care out-of-hospital expenses as of May 31, 2019 is approximately \$79,000.00. The program limit is \$100,000.00. The CFO made a request for the board to extend the program past the \$100,000.00 limit for this fiscal year. Dr. Frels moved, Mr. Papacek seconded, to extend the indigent care program expenses an additional \$50,000.00 for this fiscal year, raising the program limit to \$150,000.00; the motion carried unanimously.

EXT. INDIGENT  
CARE PROGRAI

The Chairman of the Board requested that we designate a representative to the Planning Commission for the Golden Crescent Regional Planning Commission. After discussion, Dr. Frels moved, Mrs. Cindy Sheppard seconded, for Mr. Papacek to continue as the hospital district's representative to the Planning Commission; motion carried unanimously.

GCRPC  
REPRESENTATI  
DESIGNATION

The Chief Executive Officer and Senior Leaders gave a revised informational overview regarding current Capital Risks and answered related questions from the board.

REVISED  
CAPITAL RISK

The Chief Nursing Officer requested the capital expenditure purchase for CAPRS/PAPRS – Powered Air Purifying Respirators. A quote from Owens & Minor for \$30,112.60 was recommended. Mrs. Cindy Sheppard moved, Dr. Frels seconded, to approve the capital expenditure purchase up to \$30,112.60 from Owens & Minor for Complete System Powered Air Purifying Respirators; motion carried unanimously.

PAPRS

The Assistant Administrator requested the capital expenditure purchase of High Flow Nasal Cannulas. A quote from Fisher & Paykel for \$11,994.90 was recommended. Mr. Papacek moved, Mrs. Cindy Sheppard seconded, to approve the capital expenditure purchase up to \$11,994.90 from Fisher & Paykel for 2 Airvo Fisher & Paykel high flow heat moisture exchange units with variable FIO2 for treatment of COVID patients; motion carried unanimously.

HIGHFLOW  
NASAL CANNU

The Chief Nursing Officer requested the capital expenditure purchase of a New Patient Telemetry Monitoring and Surveillance System for the ICU and ED. A quote from Spacelabs for \$169,651.83 was recommended. Mrs. Cindy Sheppard moved, Dr. Frels seconded, to approve the capital expenditure purchase up to \$169,651.83 from Spacelabs for a New Patient Telemetry Monitoring and Surveillance System; motion carried unanimously.

TELEMETRY  
SYSTEM

The Chief Financial Officer and Mrs. Ismelda Garza, IT, requested the capital expenditure purchase for Network Remediation – Implement Backup Solution for Disaster Recovery. This was a budgeted item as part of original request and is one part of Phase III of this project. A quote from Edge for \$273,420.94 was recommended. Mr. Papacek moved, Mrs. Cindy Sheppard seconded, to approve the capital expenditure purchase up to \$273,420.94 from Edge for Network Remediation – Implement Backup Solution for Disaster Recovery; motion carried

NETWORK  
REMEDIAION  
BACKUP FOR  
DISASTER  
RECOVERY

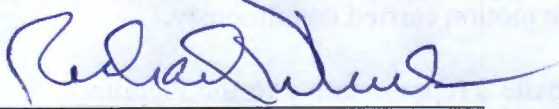
unanimously.

Mrs. Wilma Reedy, Childbirth Director, presented a resolution of support by the board to approve the Perinatal Program Plan for Maternal Designation. Mrs. Cindy Sheppard moved, Mr. Papacek seconded, to sign in support and approval of the Perinatal Program Plan for Maternal Designation. It was noted, that Mrs. Faye Sheppard did speak with Mrs. Reedy and Mrs. Judy Krupala and they made a few changes to the Perinatal Program Plan regarding "neonates post discharge." It was also noted the plan needed to be updated on current hospital letterhead.

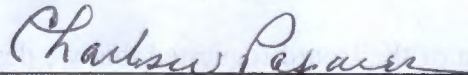
PERINATAL  
PROGRAM PLA  
MATERNAL  
DESIGNATION

ADJOURN

There was no further business; Mr. Papacek moved, Mrs. Cindy Sheppard seconded, to adjourn; the motion carried unanimously. The meeting adjourned at 6:22 p.m.



Richard Wheeler, Chairman



Charles Papacek, Secretary