



**CUERO  
REGIONAL  
HOSPITAL**

Quality Care.  
Close to Home.

**Lynn Falcone, CEO**

2550 N. Esplanade • Cuero, Texas 77954  
(361) 275-6191 • Fax (361) 275-3999 • [www.cuerohospital.org](http://www.cuerohospital.org)

**Board of Directors:**

Dr. John Frels  
Charles W. Papacek  
Cindy Sheppard  
Faye Sheppard  
Richard Wheeler

**NOTICE**

**BOARD OF DIRECTORS  
CUERO REGIONAL HOSPITAL**

The Board of Directors of the Cuero Regional Hospital will hold their regular monthly meeting via conference call, Thursday, March 25, 2021, at 5:30 P.M. Board packet will be available online for viewing. The public toll-free dial-in number and access code is 1-888-204-5987, Access Code 6265946 and will be available on the Cuero Regional Hospital website – [cuerohospital.org](http://cuerohospital.org):

The subjects to be considered at such meeting are:

- I. Call to Order
- II. Mission Statement - *"To provide compassionate care to those we serve with a commitment to excellence in all we do."*
- III. Community Input
- IV. Review of Minutes of the February 25, 2021 Regular Called Meeting
- V. Review of Financial Statement and Statistical Report
  1. Financial and Statistical Report
  2. Finance Committee Report
- VI. Report from Chief of Staff
  - Appointments:** Remigius Okea, MD, Emergency Medicine
  - Reappointments:** Douglas Webb, DPM, Podiatry, Joseph Zerr, MD, Radiology-On-Site
  - Additional Privileges:** Gregory Downing, MD, Radiology-On Site
- VII. Report from Marketing & Development Director – List of Advertising and Events
- VIII. Report on Quality/Safety, Finance and Community from Asst. Administrator
- IX. Report on Quality/Safety, People, Growth and Community from Chief Nursing Officer
- X. Report on Quality/Safety, People, Growth, Community and Clinic Operations from Chief Executive Officer
- XI. Report on Quality
- XII. Compliance
- XIII. Committee Reports
- XIV. Old Business
  1. Annual Review of the DeWitt Medical District By-Laws and Approve Any Amendments – Consider and Take Appropriate Action.
  2. Annual Review of the Plan for the Provision of Patient Care Services – Review and Take Appropriate Action
  3. Review of Recommended Language for Staff to Follow CDC Guidelines – Review and Take Appropriate Action

**CUERO HEALTH**

Cuero Regional Hospital • Cuero Home Health • Bfit Cuero Wellness Center  
Cuero Medical Clinic • Goliad Family Practice • Kenedy Family Practice • Parkside Family Clinic • Yorktown Medical Clinic

XV. New Business

1. Capital Expenditure Request for Additional US Probe for Transvaginal Patients – Review and Take Appropriate Action
2. Capital Expenditure Request to Replace Flooring at Goliad Family Practice – Review and Take Appropriate Action
3. Capital Expenditure Request to Replace Domestic Hot Water Boiler #1 – Review and Take Appropriate Action
4. Capital Expenditure Request for PACS Refresh for Radiology – Review and Take Appropriate Action
5. Receive and Accept the Certification of Unopposed Candidates – Consider and Take Appropriate Action
6. Issue and Adopt Cancellation Order/Ordinance of Election – Consider and Take Appropriate Action
7. Board Approval to Host April, July and October 2021 STB&TC Blood Drives – Consider and Take Appropriate Action
8. Update on Security Risk Assessment – Information Only

XVI. The Board reserves the right to retire into executive session concerning any of the items listed on this Agenda, whenever it is considered necessary and legally justified under the Open Meetings Act, for:

- 551.071 Consultation with attorney regarding pending, potential litigation involving the Hospital and/or Hospital District
- 551.072 Deliberations about Real Property to deliberate the purchase, exchange, lease, or value of real property if deliberations in an open session would have a detrimental effect on the position of the District
- 551.073 Deliberation Regarding Prospective Gifts or Donations
- 551.074 Personnel matters relating to the appointment, employment, evaluation, discipline or dismissal of an officer or employee
- 551.076 Deliberation regarding security devices
- 551.085 Discussion of pricing and/or financial planning information related to negotiation for the arrangement of provision of services or product lines for DeWitt Medical District and proposed new physician services for DeWitt Medical District, and any other non-profit health maintenance organizations under the umbrella of DeWitt Medical District.

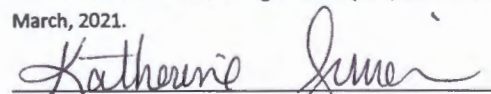
XVII. Communications

XVIII. Adjournment



Richard Wheeler, Board Chairman

I certify that, in compliance with the Texas Open Meetings Act, I provided this notice of this meeting to the DeWitt County Clerk and posted this agenda at the designated location at the DeWitt County Courthouse, Cuero, Texas, and also at the designated location for the City of Cuero and by the switchboard on the first floor of Cuero Regional Hospital, 2550 N. Esplanade, Cuero, Texas 77954 and online at cuerohospital.org by 5:00 p.m. on the 22nd day of March, 2021.



Signature of Person Posting Agenda

CUERO REGIONAL HOSPITAL  
BOARD OF DIRECTORS MEETING

February 25, 2021

The Board of Directors of Cuero Regional Hospital held their regular monthly meeting, via conference call, on Thursday, February 25, 2021, 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:

Mr. Richard Wheeler, Chairman  
Mrs. Faye Sheppard, Vice Chairman  
Mr. Charles Papacek, Secretary  
Dr. John Frels, DDS, Member  
Mrs. Cindy Sheppard, Member

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. Sheryl Harvey, Incoming Chief of Staff  
Dr. David Hill, Chief Medical Officer  
Mrs. Kathy Simon, Administrative Assistant

Guests via conference call: Ms. Jennifer Flores, Cuero Record, Mrs. Ismelda Garza, IT Director, Mr. Freddie Solis, EMS Director, entered at Financial Statement, Ms. Ciara McCarthy, Victoria Advocate

The Board Chairman called the meeting to order at 5:30 p.m.

CALL TO  
ORDER

Community Input: None

COMMUNITY  
INPUT

Mr. Papacek moved, Mrs. Faye Sheppard seconded, to approve the minutes of the regular called meeting on January 28, 2021, as presented; 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

Mr. Papacek moved, Dr. Frels seconded, based upon the recommendation of Medical Staff, to approve the initial appointments (limited to the privileges delineated) as presented on the agenda for Gregory Downing, MD, Radiology-Telemedicine, Leslie Jacobson, MD, Radiology-Telemedicine, Steve Nelson, MD, Radiology-Telemedicine, Elaina Zabak, MD, Radiology-Telemedicine; the motion carried unanimously.

MEDICAL  
STAFF

Mr. Papacek moved, Dr. Frels seconded, based upon the recommendation of Medical Staff, to approve the re-appointments (limited to the privileges delineated) as presented on the agenda for Russell Bartt, MD, Neurology-Telemedicine, Antonio Benavides, MD, General Surgery, Vicente Quintero, MD, Dermatology, Gary P Willers, DO, Family Practice/OB; the motion carried unanimously.

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

MARKETING

The Assistant Administrator's report on Quality/Safety, Finance, and Community was provided. Mrs. McMahan noted that the Med Spa Ribbon Cutting has moved to March 11<sup>th</sup> and that the Heart Walk was cancelled due to the weather.

ASST. ADMIN.  
REPORT

The Chief Nursing Officer's report on Quality/Safety, People, Growth and Community was provided. Mrs. Krupala noted that the hospital hosted its first EMS Coalition Luncheon.

CNO REPORT

The Chief Executive Officer's report on Quality/Safety, People, Growth, Community and Clinic Operations was provided. Mrs. Falcone noted some of the winter storm aftermath on our facility and rural clinics.

CEO REPORT

The Quality report was reviewed.

QUALITY

Compliance: Nothing to report.

COMPLIANCE

Committee Reports: The Physician Clinic committee met and discussed vaccine volume. Mrs. Falcone noted that we are somewhere less than 3,000 on the vaccine waiting list now.

COMMITTEE  
REPORT

Old Business:

The Chief Financial Officer presented the Investment Policy with no changes noted, a resolution to Adopt Investment Strategies of DeWitt Medical District with no changes noted, and the List of Approved Investment Brokers with no changes noted. Mrs. Alexander did not that there is interest on these investments. Mrs. Faye Sheppard moved, Mrs. Cindy Sheppard seconded, to accept the Investment Policy, and Approved Investment Brokers List as presented; the motion carried unanimously. Dr. John Frels moved, Mrs. Faye Sheppard seconded, that the board resolved to adopt the investment strategies of the DeWitt Medical District as presented; the motion carried unanimously.

INVESTMENT  
POLICY/INV  
STRATEGIES/  
INV BROKERS

New Business:

The Assistant Administrator, presented a capital expenditure request to replace 5-Ton A/C Package Unit for SE End of CMC. A quote from Buch Boyz for \$5,904.00 was recommended. Dr. Frels moved, Mrs. Cindy Sheppard seconded, to approve the capital expenditure purchase up to \$5,904.00 from Buch Boyz to replace the 5-Ton A/C Package Unit

5-TON A/C PKG  
UNIT for SE ENI  
Of CMC

for SE End of CMC; motion carried unanimously. This item was an emergency approved item by Mr. Rick Wheeler.

The IT Director, presented a capital expenditure request for Network Remediation-2 Upgraded Cisco Licenses. A quote from Edge for \$7,794.00 was recommended. Dr. Frels moved, Mr. Papacek seconded, to approve the capital expenditure purchase up to \$7,794.00 from Edge for Network Remediation – 2 Upgraded Cisco Licenses; motion carried unanimously.

NETWORK  
REMEDIAATION/  
CISCO LICENSE

The IT Director, presented a capital expenditure request for Wireless Main Campus Upgrade. A quote from Pivot for \$163,157.07 was recommended and for security purposes the quotes were sent to the board members separately from the board packet. Dr. Frels moved, Mrs. Faye Sheppard seconded, to approve the capital expenditure purchase up to \$163,157.07 from Pivot for Wireless Main Campus Upgrade; motion carried unanimously.

WIRELESS MAI  
CAMPUS  
UPGRADE

The IT Director, presented a capital expenditure request for Wireless Upgrade for all Remote Sites. A quote from Pivot for \$72,507.72 was recommended. Mrs. Faye Sheppard moved, Mrs. Cindy Sheppard seconded, to approve the capital expenditure purchase up to \$72,507.72 from Pivot for Wireless Upgrade for all Remote Sites; motion carried unanimously.

WIRELESS  
UPGRADE  
REMOTE  
SITES

The EMS Director, presented a capital expenditure request for EMS Communications (Radios). A quote from GCC for \$21,924.30 was recommended. Dr. Frels moved, Mrs. Faye Sheppard seconded, to approve the capital expenditure purchase up to \$21,924.30 from GCC for EMS Communications (Radios); motion carried unanimously. RAC monies of \$9,587.84 will be used towards this purchase. This item was brought back to the board with a corrected CER in place.

EMS  
COMMUNICATI  
RADIOS

The Assistant Administrator, presented a capital expenditure request for Roof Repairs to OB Waiting & Day Surgery. A quote from Cox Brothers for \$19,000.00 was recommended. Mr. Papacek moved, Mrs. Cindy Sheppard seconded, to approve the capital expenditure purchase up to \$19,000.00 from Cox Brothers for Roof Repairs to OB Waiting & Day Surgery; motion carried unanimously.

ROOF REPAIRS  
OB WAITING  
DAY SURGERY

The Chief Nursing Officer, presented a capital expenditure request for Glidescope Video Laryngoscope. A quote from Verathon for \$12,846.90 was recommended. Dr. Frels moved, Mr. Papacek seconded, to approve the capital expenditure purchase up to \$12,846.90 from Verathon for Glidescope Video Laryngoscope; motion carried unanimously. This item was an emergency phone approval by Mr. Wheeler on 1/25/2021.

GLIDESCOPE  
VIDEO  
LARYNGOSCOPI

The Chief Nursing Officer, presented a capital expenditure request for B Braun Infusion Pumps. A quote from B Braun for \$34,875.00 was recommended. Mrs. Faye Sheppard moved, Mrs. Cindy Sheppard seconded, to approve the capital expenditure purchase up to \$34,875.00 from B Braun for B Braun Infusion Pumps; motion carried unanimously. This item was an emergency phone approval by Mr. Richard Wheeler on 2/1/2021 and COVID funds would help offset this purchase.

B BRAUN  
INFUSION  
PUMPS

Cuero Regional Hospital  
Board of Directors Meeting  
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The Assistant Administrator, presented a capital expenditure request for Cardiac Holter Monitor System Replacement. A quote from Phillips for \$14,123.20 was recommended. Mr. Papacek moved, Mrs. Cindy Sheppard seconded, to approve the capital expenditure purchase up to \$14,123.20 from Phillips for Cardiac Holter Monitor Replacement; motion carried unanimously.

CARDIAC  
HOLTER  
MONITOR

The Chief Executive Officer, presented a resolution of support for the board to consider and take appropriate action regarding Cuero Regional Hospital providing the financial, human, and physical resources necessary to achieve and sustain designation as a Texas Department of State Health Services Basic (Level IV) Trauma Facility. Dr. Frels moved, Mrs. Cindy Sheppard seconded, to sign in support of the designation as a Texas Department of State Health Services Basic (Level IV) Trauma Facility.

TRAUMA  
PROGRAM  
RESOLUTION

The Chief Executive Officer, presented a resolution of support for the board to consider and take appropriate action regarding Cuero Regional Hospital providing the financial, human, and physical resources necessary to achieve and sustain designation as a Texas Department of State Health Services Level III Support Stroke Facility. Dr. Frels moved, Mrs. Cindy Sheppard seconded, to sign in support of the designation as a Texas Department of State Health Services Level III Support Stroke Facility.

LEVEL III  
SUPPORT STRO  
FACILITY  
RESOLUTION

The Assistant Administrator reviewed the Annual Quality Assessment Report for 2020 and the 2020 Risk Management Report. Dr. Frels moved, Mrs. Faye Sheppard seconded, to approve the Annual Quality Assessment Report for 2020 and the 2020 Risk Management Report; the motion carried unanimously.

ANNUAL QA/  
RISK MGMT/  
SAFETY RPT

The Risk Management Annual Approval of Data Collection & Frequency of Data Collection (employee, patient, visitor, security, physician incidents) was presented by the Assistant Administrator. Mrs. Faye Sheppard moved, Mr. Charles Papacek seconded, to accept the Annual Risk Management Data Collection and Frequency of Data Collection; the motion carried unanimously.

ANNUAL RM  
DATA COLL  
FREQ

The Assistant Administrator requested annual approval of the Number and Priority of PI Projects. Falls and Sepsis are hospital wide PI Projects. Dr. Frels moved, Mrs. Faye Sheppard seconded, to approve the annual Number and Priority of PI Projects; the motion carried unanimously.

ANNUAL  
NUMBER &  
PRIORITY OF PI  
PROJECTS

The Quality Assessment and Departmental Quality Assessment Annual Approval of Data Collection and Frequency of Data Collection were presented by the Assistant Administrator. The Quality Assessment report involves quality assessments on surgical cases, blood usage, drug usage, medical records, infection control and quality of care review. The Departmental Quality Assessment report involves departmental data to be collected. Dr. Frels moved, Mrs. Faye Sheppard seconded, to approve the Quality Assessment and Departmental Quality Assessment of Data Collection and Frequency of Data Collection; the motion carried unanimously.

ANNUAL APP  
DATA COLL  
FREQ OF DATA  
COLL

Cuero Regional Hospital  
Board of Directors Meeting  
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Mrs. Cindy Sheppard and Mrs. Faye Sheppard, as the District By-Laws Committee, reviewed the By-Laws and will present any amendments that they find to the board at the March meeting.

DISTRICT  
BY-LAWS

The Chief Executive Officer requested that the board table the Annual Review of the Plan for the Provision of Patient Care Services. Dr. Frels moved, Mr. Papacek seconded, to table the Annual Review of the Plan for the Provision of Patient Care Services; the motion carried unanimously.

ANNUAL RVW  
PLAN FOR PRO  
PATIENT CARE  
SVS

The Chief Financial Officer requested the board to approve a motion to authorize the CFO to execute all agreements related to QIPP Facilities and to Accept a New Diversicare Facility into the QIPP Program. Dr. Frels moved, Mrs. Faye Sheppard seconded, to approve the authorization that the CFO can execute all agreements related to QIPP facilities and to accept a new Diversicare facility into the QIPP Program; the motion carried unanimously.

CFO AUTHORIZ  
EXECUTE  
AGREEMENTS  
ACCEPT NEW  
DIVERSICARE I

The Chief Financial Officer, presented a resolution of support for the board to authorize the District to open a bank account with Prosperity Bank for DeWitt Medical District d/b/a Oakmont Healthcare and Rehabilitation Center of Katy, participating in the Texas Quality Incentive Payment Program for qualified nursing facilities, established by the Texas and Human Services Commission. Mr. Papacek moved, Mrs. Cindy Sheppard seconded, to sign in support to authorize the District to open a bank account with Prosperity Bank for DeWitt Medical District d/b/a Oakmont Healthcare and Rehabilitation Center of Katy, participating in the Texas Quality Incentive Payment Program; the motion carried unanimously.

BANK ACCT  
FOR OAKMONT  
QIPP

The Board Chairman discussed approval by the board for use of hospital property. Dr. Frels moved, Mr. Papacek seconded, the requirements and board approval needed for use of hospital property, the motion carried unanimously.

BOARD APPRO'  
HOSP PROP USI

The Board of Directors of DeWitt Medical District, recessed into Executive Session at 6:58 p.m. The Closed Session is being held pursuant to Section 551.074, Personnel Matters, of the Texas Government Code.

EXECUTIVE  
SESSION

The Board exited Executive Session at 7:12 p.m. and reconvened in open session. The Board of Directors is concerned about setting an example of following CDC guidelines regarding masking and being in crowds. The Board agreed to have Mrs. Faye Sheppard draft the language and send to Mr. Papacek for review by the Board. Mrs. Cindy Sheppard moved, Dr. Frels seconded, to have Mrs. Faye Sheppard draft the language per CDC guidelines for employees regarding masking and participating in gatherings; the motion carried unanimously.

Communications: The board reviewed the minutes from the January 2021 DeWitt Medical Foundation meeting.

COMMUNICATI

There was no further business; Mr. Papacek moved, Mrs. Cindy Sheppard seconded, to adjourn; the motion carried unanimously. The meeting adjourned at 7:19 p.m.

ADJOURN

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Richard Wheeler, Chairman

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Charles Papacek, Secretary



CUERO REGIONAL HOSPITAL  
FINANCIAL STATEMENT SUMMARY

<b>Financial Summary - FEBRUARY 2021</b>										
<b>Summary Measures</b>	<b>Current Month</b>	<b>Budget</b>	<b>VAR to Budget</b>	<b>Prior Year</b>	<b>VAR to PY</b>	<b>YTD</b>	<b>YTD Budget</b>	<b>VAR to Budget YTD</b>	<b>PY YTD</b>	<b>VAR to PY YTD</b>
EBIDA – Hosp. Only	\$884,238	\$830,816	\$53,422	\$625,484	\$258,754	\$6,820,507	\$9,373,129	(\$2,552,622)	\$7,165,910	(\$345,403)
Net Operating Income – Hosp. Only	(\$298,428)	(\$11,173)	(\$287,255)	\$5,474	(\$303,902)	(\$1,485,177)	\$2,513,181	(\$3,998,358)	\$580,845	(\$2,066,022)
Clinic - Net Operating Income	(\$202,803)	(\$72,189)	(\$130,614)	(\$20,337)	(\$182,466)	(\$684,804)	(\$217,873)	(\$466,931)	(\$24,551)	(\$660,253)
EBIDA Consolidated	\$681,435	\$758,627	(\$77,192)	\$605,147	\$76,288	\$6,135,704	\$9,155,256	(\$3,019,552)	\$7,141,359	(\$1,005,655)
Net Income - Consolidated	\$460,150	\$544,138	(\$83,988)	\$397,702	\$62,448	\$5,009,591	\$8,082,808	(\$3,073,217)	\$6,146,774	(\$1,137,183)
Net District Tax Revenue	\$530,817	\$315,000	\$215,817	\$310,776	\$220,041	\$4,183,509	\$4,225,000	(\$41,491)	\$4,203,331	(\$19,822)
Nursing Home Revenue	\$430,564	\$312,500	\$118,064	\$101,790	\$328,774	\$2,996,062	\$1,562,500	\$1,433,562	\$1,387,148	\$1,608,914
<b>Admissions</b>										
Admissions	65	77	(12)	59	6	292	400	(108)	408	(116)
Patient Days	252	252	0	201	51	1,021	1,320	(299)	1,297	(276)
ADC include Obs	11.2	10.8	0.4	8.7	2.5	8.7	10.9	(2.2)	10.7	(2.0)
Outpatient Visits (ex RHC & ED)	3,050	3,491	(441)	3,428	(378)	17,521	18,834	(1,313)	18,492	(971)
Clinic Visits	4,109	5,240	(1,131)	5,427	(1,318)	24,856	29,206	(4,350)	29,054	(4,198)
Births	9	17	(8)	12	(3)	53	81	(28)	63	(10)
ED Visits	634	780	(146)	865	(231)	3,262	4,172	(910)	4,582	(1,320)
Total Surgeries/less Endo	35	14	21	49	(14)	218	281	(63)	298	(80)
<b>Revenue/Net Revenue</b>										
Net Revenue	\$2,346,072	\$2,694,384	(\$348,312)	\$2,534,004	(\$187,932)	\$12,688,372	\$17,101,728	(\$4,413,356)	\$13,592,217	(\$903,845)
Net Revenue PAPD	\$2,614	\$2,447	\$168	\$2,869	(\$255)	\$2,884	\$2,965	(\$80)	\$2,360	\$524
Deductions as % of Gross	71%	66%	5%	68%	3%	67%	66%	1%	64%	3%
<b>Expenses</b>										
Total Expenses	\$2,644,500	\$2,705,557	\$61,057	\$2,528,530	(\$115,970)	\$14,173,549	\$14,588,547	\$414,998	\$13,011,372	(\$1,162,177)
Total Expenses PAPD	\$2,947	\$2,457	(\$490)	\$2,863	(\$84)	\$3,222	\$2,529	(\$693)	\$2,259	(\$962)
Total Staffing PAPD	\$1,494	\$1,229	(\$265)	\$1,477	(\$17)	\$1,717	\$1,301	(\$416)	\$1,185	(\$532)
Supplies PAPD	\$267	\$257	(\$10)	\$251	(\$16)	\$284	\$257	(\$28)	\$230	(\$55)
<b>Stats &amp; Ratios -</b>										
FTE's	237.42	214.77	22.65	229.92	7.50	227.68	230.71	-3.03	228.61	-0.93
FTE/EEOB	7.41	5.46	1.95	7.29	0.12	7.82	6.04	1.78	6.03	1.78
Avg Hourly Rate	\$26.69	\$29.56	(\$2.87)	\$24.02	\$2.67	\$29.43	\$28.65	\$0.78	\$24.48	\$4.95
Net A/R Days	26.3	17.4	8.9	19.2	7.1	26.2	14.8	11.4	18.7	7.5
Cash Net Revenue %	89.5%	100%	-11%	76.4%	13%	96.2%	100%	-4%	98.1%	-2%
Days Cash on Hand	384.86	180.00	204.86	290.49	94.37	384.86	180.00	204.86	290.49	94.37

EBIDA for the month of February at \$884K was higher than Budget by \$53K and PY by \$76K. Consolidated EBIDA at \$681K was lower than Budget by \$77K, but higher than PY by \$76K. Hospital Net Operating Loss at a negative \$298K, was higher than the Budgeted loss by \$287K, due to continued lower volume from the effects of COVID. The following factors contributed to the performance for the month:

#### NET REVENUE:

- Hospital Patient Net Revenue was lower than Budget by \$365K due to lower volume compared to Budget, driving a negative volume variance by \$476K (APD lower by 18.5% and ER lower by 18.7%). 340B Revenue at \$94K was lower than Budget by \$201K due to lower ER volume (down 146) and Clinic volume (down by 1,131). A positive rate variance of \$110K was driven by a slightly higher Case Mix of 1.12, compared to PY at 1.08 (Mcare Non Trad higher by .14 and BCBS higher by .17). Payor Mix was higher with Medicare up 7.9% and Self Pay/Indigent lower by 8.1%. Surgeries were higher than Budget by 21, but lower than PY by 14. Ortho cases were higher by 2, General Surgery cases were higher by 3 and Podiatry cases were up by 2. Note: Surgeries were budgeted lower due to anticipated start to OR HVAC replacement, which would close two ORs. The project is in design phase
- Bad Debt at \$863K was higher than Budget by \$228.7K due to higher deductible insurance plans
- Supplemental programs were higher than Budget by \$22.7K due to higher UC funds of \$97K and a negative CHAT Reserve of \$74.4K

#### EXPENSES:

- Total Expenses were lower than Budget by \$61K. Salaries were lower than Budget by \$2K. FTEs at 237.42 were higher than Budget by 22.7. Budgeted FTEs were reduced in the February budget by 16 due to reduced volume from the anticipated OR project. Included in Total FTEs were COVID FTEs at 5.87 (\$32K). Fringe Benefits were lower than Budget by \$27K due to higher PTO Expense by \$32.8K, lower Employee Medical expense by \$38K and Pension Expense by 15.7K. Payroll Taxes were higher than Budget by \$16K due to higher Workers Comp by \$22.6K and lower FICA by \$6.2K. Supplies were lower than Budget by \$43K due to lower expense for Pharmaceuticals by \$44.4K and higher Implants by \$3.8K. Purchased Services were higher than Budget by \$20.7K due to higher expenses in Professional Services - Reference Lab by \$36K, lower expense in Utilities by \$7K, Prof Services by \$6K, and Maintenance Contracts by \$2.9K. Professional Contracts were lower by \$4K with Phys Therapy lower by \$20.8K and ER Physician Services higher by \$16.6K. Interest Exp higher by \$5.6 due to PPP Loan interest. Other Operating Expense was lower by \$26K due to Indigent expense lower by \$7.8K, Travel and Meeting expense lower by \$5.7K, Equipment Rental lower by \$3.7K, and Appraisal Fees lower by \$6.3K

#### CLINICS:

- Clinic Net Operating Loss of \$202.8K was higher than Budgeted loss by \$131K. RHC Net Operating Loss at \$159K was higher than a Budgeted loss by \$133K due to lower volume compounded by lower paid phone visits (13% of Total visits) driving Revenue lower by \$216K. Expenses were lower than Budget by \$83K. Specialty Clinic Operating Loss of \$44K was lower than the budgeted loss by \$2.4K with higher cases compared to PY by 5

#### OTHER:

- Wellness Net Operating Income at \$11.3K was slightly lower than Budget by \$4.2K. Lower membership from COVID effects (down 450) drove revenue down by \$10.3K. Expenses were lower than Budget by \$6K in Salaries (\$2.1K), Utilities (\$1.8K), and Repairs & Maintenance (\$1.8K)
- 340B Net Operating Income was lower than Budget by \$158K, due to lower Revenue by \$201K and expenses lower by \$42K driven by lower ER and Clinic volume (see note above)
- Capital Expenditures - Computer Network Optimization - Microsoft Licensing going to Board in March - total \$250K. Ice Storm repairs for Chiller, Boiler and Sprinkler system awaiting projection. Insurance claim filed

CUERO REGIONAL HOSPITAL  
 BALANCE SHEET  
 PERIOD ENDED 02/28/21

	CURRENT YEAR-TO-DATE	PRIOR YEAR YEAR-TO-DATE
ASSETS		
-----		
CURRENT:		
CASH	19,046,179.25	11,011,947.53
MARKETABLE SECURITIES	2,066,091.51	2,046,474.17
ACCOUNTS RECEIVABLE	14,597,898.26	11,541,387.03
ALLOWANCE FOR UNCOLLECTIBLES	(10,670,053.40)	(8,222,418.24)
INTER-COMPANY RECEIVABLE	0.00	0.00
OTHER RECEIVABLES	5,196,706.87	5,040,564.43
INVENTORY	813,665.97	613,571.08
PREPAID EXPENSES	9,450,237.92	6,320,974.17
	-----	-----
TOTAL CURRENT ASSETS	\$ 40,500,726.38	\$ 28,352,500.17
OTHER ASSETS:		
ASSETS WHOSE USE IS LIMITED	20,764,591.12	16,280,242.53
OTHER ASSETS		
	-----	-----
TOTAL OTHER ASSETS	\$ 20,764,591.12	\$ 16,280,242.53
PROPERTY, PLANT, & EQUIPMENT:		
LAND	1,139,140.08	1,139,140.08
BUILDING AND IMPROVEMENTS	22,689,292.87	22,300,245.22
EQUIPMENT	35,400,028.33	32,565,349.60
	-----	-----
TOTAL PROPERTY, PLANT, & EQUIPMENT	\$ 59,228,461.28	\$ 56,004,734.90
LESS ACCUMULATED DEPRECIATION	(37,424,056.40)	(35,041,913.91)
	-----	-----
NET PROPERTY, PLANT, & EQUIPMENT	\$ 21,804,404.88	\$ 20,962,820.99
	-----	-----
TOTAL ASSETS	\$ 83,069,722.38	\$ 65,595,563.69
	=====	=====

RUN DATE: 03/10/21  
 RUN TIME: 1448  
 RUN USER: BSERRANO

CUERO REGIONAL HOSPITAL  
 BALANCE SHEET  
 PERIOD ENDED 02/28/21

	CURRENT YEAR-TO-DATE	PRIOR YEAR YEAR-TO-DATE
LIABILITIES AND FUND BALANCE		
-----		
CURRENT:		
ACCOUNTS PAYABLE	(1,291,857.00)	(1,119,040.76)
ACCRUED SALARIES & WAGES	(1,322,548.43)	(1,473,172.75)
ACCRUED INTEREST	0.00	0.00
CURRENT PORTION LTD	(9,679,313.07)	(188,810.52)
DUE TO/FROM 3RD PARTY PAYORS	(1,609,995.48)	(474,222.78)
DUE TO/FROM AFFILIATES	(2,482,143.82)	(1,728,391.39)
	-----	-----
TOTAL CURRENT LIABILITIES	\$ (16,385,857.80)	\$ (4,983,638.20)
LONG TERM DEBT:		
NOTES/LEASES PAYABLE	(1,231,219.98)	(1,614,539.57)
BONDS PAYABLE	0.00	0.00
	-----	-----
TOTAL LONG TERM DEBT	\$ (1,231,219.98)	\$ (1,614,539.57)
FUND BALANCE	(60,443,053.88)	(52,850,612.25)
CURRENT YEAR (INCOME) LOSS	(5,009,590.72)	(6,146,773.67)
	-----	-----
TOTAL FUND BALANCE	(65,452,644.60)	(58,997,385.92)
	-----	-----
TOTAL LIABILITIES AND FUND BALANCE	\$ (83,069,722.38)	\$ (65,595,563.69)
	=====	=====

CUERO REGIONAL HOSPITAL  
 FINANCIAL STATEMENT  
 FEB 21

	ACTUAL	BUDGET	PR ACTUAL	YTD ACTUAL	YTD BUDGET	PY ACTUAL
<b>OPERATING REVENUE:</b>						
INPATIENT REVENUE	2,167,985	1,711,695	1,543,954	8,465,994	8,966,006	7,905,025
OUTPATIENT REVENUE	5,458,069	5,473,567	4,994,253	26,986,834	28,671,082	25,903,375
340B PROGRAM	94,155	294,838	245,599	1,024,383	1,544,390	1,261,730
<b>GROSS REVENUE FROM PATIENTS</b>	<b>\$ 7,720,208</b>	<b>\$ 7,480,100</b>	<b>\$ 6,783,806</b>	<b>\$ 36,477,210</b>	<b>\$ 39,181,478</b>	<b>\$ 35,070,130</b>
<b>REVENUE DEDUCTIONS:</b>						
CHARITY	(229,366)	(321,123)	(358,713)	(767,623)	(1,682,073)	(1,391,337)
DISCOUNTS	(1,471,774)	(1,403,866)	(1,436,656)	(6,789,929)	(7,353,578)	(6,188,881)
BAD DEBT	(862,698)	(634,031)	(880,219)	(4,348,302)	(3,321,117)	(3,135,451)
CONTRACTUALS	(2,951,089)	(2,550,244)	(1,964,925)	(12,495,420)	(13,358,420)	(11,830,719)
<b>TOTAL REVENUE DEDUCTIONS</b>	<b>\$ (5,514,927)</b>	<b>\$ (4,909,264)</b>	<b>\$ (4,640,513)</b>	<b>\$(24,401,275)</b>	<b>\$(25,715,188)</b>	<b>\$(22,546,387)</b>
<b>NET PATIENT REVENUE</b>	<b>\$ 2,205,281</b>	<b>\$ 2,570,836</b>	<b>\$ 2,143,293</b>	<b>\$ 12,075,935</b>	<b>\$ 13,466,290</b>	<b>\$ 12,523,742</b>
OTHER OPERATING REVENUE	38,126	43,548	58,798	240,746	3,235,438	296,895
SUPPLEMENTAL MCD PMTS	102,665	80,000	331,913	371,691	400,000	771,579
<b>TOTAL OPERATING REVENUE</b>	<b>\$ 2,346,072</b>	<b>\$ 2,694,384</b>	<b>\$ 2,534,004</b>	<b>\$ 12,688,372</b>	<b>\$ 17,101,728</b>	<b>\$ 13,592,217</b>
<b>OPERATING EXPENSES:</b>						
SALARIES AND WAGES	(1,013,795)	(1,015,809)	(1,024,825)	(5,782,329)	(5,704,195)	(5,344,099)
AGENCY PERSONNEL						
FRINGE BENEFITS	(233,442)	(260,429)	(210,459)	(1,314,870)	(1,364,148)	(1,084,855)
PAYROLL TAXES	(93,077)	(76,696)	(68,777)	(454,150)	(436,092)	(392,337)
SUPPLIES	(239,687)	(282,746)	(221,453)	(1,250,583)	(1,481,018)	(1,322,534)
PURCHASED SERVICES	(306,858)	(286,076)	(282,875)	(1,493,824)	(1,565,488)	(1,272,831)
PROFESSIONAL CONTRACTS	(434,069)	(438,041)	(434,029)	(2,215,879)	(2,308,855)	(2,131,389)
DEPRECIATION EXPENSE	(212,254)	(211,076)	(204,392)	(1,067,821)	(1,055,382)	(978,050)
INSURANCE EXPENSE	(18,547)	(21,352)	(19,684)	(91,879)	(106,767)	(91,137)
INTEREST EXPENSE	(9,031)	(3,413)	(3,053)	(58,292)	(17,066)	(16,535)
OTHER OPERATING EXPENSE	(83,740)	(109,919)	(58,985)	(443,923)	(549,536)	(377,603)
<b>TOTAL OPERATING EXPENSES</b>	<b>(2,644,500)</b>	<b>(2,705,557)</b>	<b>(2,528,530)</b>	<b>(14,173,549)</b>	<b>(14,588,547)</b>	<b>(13,011,372)</b>
<b>NET OPERATING INCOME (LOSS)</b>	<b>(298,428)</b>	<b>(11,173)</b>	<b>5,474</b>	<b>(1,485,177)</b>	<b>2,513,181</b>	<b>580,845</b>
NET DISTRICT OPERATING INCOM	530,817	315,000	310,776	4,183,509	4,225,000	4,203,331
NURSING HOME UPL	430,564	312,500	101,790	2,996,062	1,562,500	1,387,148
<b>NET INCOME (LOSS)</b>	<b>\$ 662,953</b>	<b>\$ 616,327</b>	<b>\$ 418,039</b>	<b>\$ 5,694,394</b>	<b>\$ 8,300,681</b>	<b>\$ 6,171,325</b>

CUERO REGIONAL HOSPITAL & CLINICS  
 FINANCIAL STATEMENT  
 FEB 21

	ACTUAL	BUDGET	PR ACTUAL	YTD ACTUAL	YTD BUDGET	PY ACTUAL
<b>OPERATING REVENUE:</b>						
INPATIENT REVENUE	2,167,985	1,711,695	1,543,954	8,465,994	8,966,006	7,905,025
OUTPATIENT REVENUE	5,458,069	5,473,567	4,994,253	26,986,834	28,671,082	25,903,375
340B PROGRAM	94,155	294,838	245,599	1,024,383	1,544,390	1,261,730
CLINIC REVENUES	588,628	818,771	786,784	3,769,514	4,718,443	4,412,912
<b>GROSS REVENUE FROM PATIENTS</b>	<b>\$ 8,308,836</b>	<b>\$ 8,298,871</b>	<b>\$ 7,570,590</b>	<b>\$ 40,246,724</b>	<b>\$ 43,899,921</b>	<b>\$ 39,483,042</b>
<b>REVENUE DEDUCTIONS:</b>						
CHARITY	(229,366)	(321,123)	(358,713)	(767,623)	(1,682,073)	(1,391,337)
DISCOUNTS	(1,471,774)	(1,403,866)	(1,436,656)	(6,789,929)	(7,353,578)	(6,188,881)
BAD DEBT	(862,698)	(634,031)	(880,219)	(4,348,302)	(3,321,117)	(3,135,451)
CONTRACTUAL ALLOWANCES	(2,951,089)	(2,550,244)	(1,964,925)	(12,495,420)	(13,358,420)	(11,830,719)
CLINIC ALLOWANCES	(173,466)	(194,206)	(174,559)	(1,129,560)	(1,162,495)	(1,119,107)
<b>TOTAL REVENUE DEDUCTIONS</b>	<b>\$ (5,688,393)</b>	<b>\$ (5,103,470)</b>	<b>\$ (4,815,072)</b>	<b>\$(25,530,834)</b>	<b>\$(26,877,683)</b>	<b>\$(23,665,494)</b>
<b>NET PATIENT REVENUE</b>	<b>\$ 2,620,443</b>	<b>\$ 3,195,401</b>	<b>\$ 2,755,518</b>	<b>\$ 14,715,890</b>	<b>\$ 17,022,238</b>	<b>\$ 15,817,547</b>
OTHER OPERATING REVENUE	38,126	43,548	58,798	240,746	3,235,438	296,895
SUPPLEMENTAL MCD PMTS	102,665	80,000	331,913	371,691	400,000	771,579
CLINIC OTHER OPERATING REV	0	0	0	0	0	0
<b>TOTAL OPERATING REVENUE</b>	<b>\$ 2,761,234</b>	<b>\$ 3,318,949</b>	<b>\$ 3,146,229</b>	<b>\$ 15,328,327</b>	<b>\$ 20,657,676</b>	<b>\$ 16,886,022</b>
<b>OPERATING EXPENSES:</b>						
SALARIES AND WAGES	(1,470,360)	(1,525,660)	(1,477,236)	(8,176,982)	(8,501,281)	(7,682,929)
AGENCY PERSONNEL						
FRINGE BENEFITS	(233,442)	(260,429)	(210,459)	(1,314,870)	(1,364,148)	(1,084,855)
PAYROLL TAXES	(128,243)	(109,482)	(99,463)	(602,355)	(607,520)	(534,679)
SUPPLIES	(255,326)	(313,654)	(249,538)	(1,399,104)	(1,652,103)	(1,510,617)
PURCHASED SERVICES	(326,593)	(302,951)	(298,469)	(1,593,541)	(1,658,258)	(1,366,686)
PROFESSIONAL CONTRACTS	(491,102)	(511,425)	(508,043)	(2,572,213)	(2,694,571)	(2,540,703)
DEPRECIATION EXPENSE	(212,254)	(211,076)	(204,392)	(1,067,821)	(1,055,382)	(978,050)
INSURANCE EXPENSE	(20,500)	(23,975)	(22,389)	(103,736)	(119,881)	(104,140)
INTEREST EXPENSE	(9,031)	(3,413)	(3,053)	(58,292)	(17,066)	(16,535)
OTHER OPERATING EXPENSE	(115,613)	(140,246)	(88,051)	(609,394)	(692,158)	(510,533)
<b>TOTAL OPERATING EXPENSES</b>	<b>(3,262,465)</b>	<b>(3,402,311)</b>	<b>(3,161,093)</b>	<b>(17,498,307)</b>	<b>(18,362,368)</b>	<b>(16,329,728)</b>
<b>NET OPERATING INCOME (LOSS)</b>	<b>(501,231)</b>	<b>(83,362)</b>	<b>(14,863)</b>	<b>(2,169,980)</b>	<b>2,295,308</b>	<b>556,294</b>
NET DISTRICT OPERATING INCOM	530,817	315,000	310,776	4,183,509	4,225,000	4,203,331
NURSING HOME UPL	430,564	312,500	101,790	2,996,062	1,562,500	1,387,148
<b>NET INCOME (LOSS)</b>	<b>\$ 460,150</b>	<b>\$ 544,138</b>	<b>\$ 397,702</b>	<b>\$ 5,009,591</b>	<b>\$ 8,082,808</b>	<b>\$ 6,146,774</b>

CRH CLINICS PERIOD VS PRIOR YEAR  
FINANCIAL STATEMENT  
FEB 21

	ACTUAL	BUDGET	PR ACTUAL	YTD ACTUAL	YTD BUDGET	PY ACTUAL
OPERATING REVENUE:						
-----						
CLINIC REVENUES	588,628	818,771	786,784	3,769,514	4,718,443	4,412,912
GROSS REVENUE FROM PATIENTS	\$ 588,628	\$ 818,771	\$ 786,784	\$ 3,769,514	\$ 4,718,443	\$ 4,412,912
REVENUE DEDUCTIONS:						
CLINIC ALLOWANCES	(173,466)	(194,206)	(174,559)	(1,129,560)	(1,162,495)	(1,119,107)
TOTAL REVENUE DEDUCTIONS	\$ (173,466)	\$ (194,206)	\$ (174,559)	\$ (1,129,560)	\$ (1,162,495)	\$ (1,119,107)
NET PATIENT REVENUE	\$ 415,162	\$ 624,565	\$ 612,225	\$ 2,639,955	\$ 3,555,948	\$ 3,293,805
OTHER CLINIC REVENUE	0	0	0	0	0	0
TOTAL OPERATING REVENUE	\$ 415,162	\$ 624,565	\$ 612,225	\$ 2,639,955	\$ 3,555,948	\$ 3,293,805
OPERATING EXPENSES:						
-----						
SALARIES AND WAGES	(456,565)	(509,851)	(452,412)	(2,394,654)	(2,797,086)	(2,338,830)
AGENCY PERSONNEL						
FRINGE BENEFITS	0	0	0	0	0	0
PAYROLL TAXES	(35,166)	(32,786)	(30,686)	(148,205)	(171,428)	(142,342)
SUPPLIES	(15,640)	(30,908)	(28,085)	(148,521)	(171,085)	(188,083)
PURCHASED SERVICES	(19,735)	(16,875)	(15,594)	(99,717)	(92,770)	(93,855)
PROFESSIONAL CONTRACTS	(57,033)	(73,384)	(74,014)	(356,334)	(385,716)	(409,314)
DEPRECIATION EXPENSE						
INSURANCE EXPENSE	(1,953)	(2,623)	(2,706)	(11,857)	(13,114)	(13,003)
INTEREST EXPENSE						
OTHER OPERATING EXPENSE	(31,873)	(30,327)	(29,066)	(165,471)	(142,622)	(132,930)
TOTAL OPERATING EXPENSES	(617,965)	(696,754)	(632,563)	(3,324,758)	(3,773,821)	(3,318,356)
NET OPERATING INCOME (LOSS)	(202,803)	(72,189)	(20,337)	(684,804)	(217,873)	(24,551)

CRH RURAL HEALTH CLINICS  
 FINANCIAL STATEMENT  
 FEB 21

	ACTUAL	BUDGET	PR ACTUAL	YTD ACTUAL	YTD BUDGET	PY ACTUAL
OPERATING REVENUE:						
CLINIC REVENUES	479,010	705,645	665,918	3,011,843	3,918,504	3,557,555
GROSS REVENUE FROM PATIENTS	\$ 479,010	\$ 705,645	\$ 665,918	\$ 3,011,843	\$ 3,918,504	\$ 3,557,555
REVENUE DEDUCTIONS:						
CLINIC ALLOWANCES	(95,550)	(106,081)	(79,336)	(505,486)	(578,972)	(485,207)
TOTAL REVENUE DEDUCTIONS	\$ (95,550)	\$ (106,081)	\$ (79,336)	\$ (505,486)	\$ (578,972)	\$ (485,207)
NET PATIENT REVENUE	\$ 383,460	\$ 599,564	\$ 586,582	\$ 2,506,357	\$ 3,339,532	\$ 3,072,348
OTHER CLINIC REVENUE	0	0	0	0	0	0
TOTAL OPERATING REVENUE	\$ 383,460	\$ 599,564	\$ 586,582	\$ 2,506,357	\$ 3,339,532	\$ 3,072,348
OPERATING EXPENSES:						
SALARIES AND WAGES	(390,081)	(449,437)	(395,607)	(2,063,511)	(2,459,980)	(2,021,882)
AGENCY PERSONNEL						
FRINGE BENEFITS	0	0	0	0	0	0
PAYROLL TAXES	(30,064)	(27,870)	(26,433)	(132,692)	(152,028)	(125,608)
SUPPLIES	(15,326)	(30,382)	(27,614)	(144,693)	(165,788)	(183,398)
PURCHASED SERVICES	(18,453)	(16,875)	(15,594)	(98,411)	(92,391)	(93,536)
PROFESSIONAL CONTRACTS	(57,033)	(73,384)	(74,014)	(352,816)	(385,716)	(409,314)
DEPRECIATION EXPENSE						
INSURANCE EXPENSE	(1,953)	(2,623)	(2,706)	(11,857)	(13,114)	(13,003)
INTEREST EXPENSE						
OTHER OPERATING EXPENSE	(29,639)	(25,066)	(23,880)	(152,514)	(126,252)	(116,437)
TOTAL OPERATING EXPENSES	(542,549)	(625,637)	(565,847)	(2,956,494)	(3,395,269)	(2,963,177)
NET OPERATING INCOME (LOSS)	(159,089)	(26,073)	20,735	(450,137)	(55,737)	109,171



CRH SPECIALTY HEALTH CLINICS  
 FINANCIAL STATEMENT  
 FEB 21

	ACTUAL	BUDGET	PR ACTUAL	YTD ACTUAL	YTD BUDGET	PY ACTUAL
OPERATING REVENUE:						
CLINIC REVENUES	109,618	113,126	120,866	757,671	799,939	855,357
GROSS REVENUE FROM PATIENTS	\$ 109,618	\$ 113,126	\$ 120,866	\$ 757,671	\$ 799,939	\$ 855,357
REVENUE DEDUCTIONS:						
CLINIC ALLOWANCES	(77,916)	(88,125)	(95,223)	(624,074)	(583,523)	(633,900)
TOTAL REVENUE DEDUCTIONS	\$ (77,916)	\$ (88,125)	\$ (95,223)	\$ (624,074)	\$ (583,523)	\$ (633,900)
NET PATIENT REVENUE	\$ 31,702	\$ 25,001	\$ 25,643	\$ 133,597	\$ 216,416	\$ 221,457
TOTAL OPERATING REVENUE	\$ 31,702	\$ 25,001	\$ 25,643	\$ 133,597	\$ 216,416	\$ 221,457
OPERATING EXPENSES:						
SALARIES AND WAGES	(66,484)	(60,414)	(56,805)	(331,143)	(337,106)	(316,949)
AGENCY PERSONNEL						
FRINGE BENEFITS						
PAYROLL TAXES	(5,102)	(4,916)	(4,253)	(15,513)	(19,400)	(16,734)
SUPPLIES	(313)	(526)	(471)	(3,827)	(5,297)	(4,685)
PURCHASED SERVICES	(1,282)	0	0	(1,306)	(379)	(319)
PROFESSIONAL CONTRACTS	0	0	0	(3,518)	0	0
DEPRECIATION EXPENSE						
INSURANCE EXPENSE	0	0	0	0	0	0
INTEREST EXPENSE						
OTHER OPERATING EXPENSE	(2,234)	(5,261)	(5,187)	(12,958)	(16,370)	(16,493)
TOTAL OPERATING EXPENSES	(75,416)	(71,117)	(66,715)	(368,264)	(378,552)	(355,179)
NET OPERATING INCOME (LOSS)	(43,714)	(46,116)	(41,072)	(234,667)	(162,136)	(133,722)

BUDGET COMPARISON REPORT  
 WELLNESS CENTER 7085  
 FOR PERIOD ENDING 02/28/21

	ACTUAL	BUDGET	PR ACTUAL	YTD ACTUAL	YTD BUDGET	PY ACTUAL
REVENUE						
IN PATIENT REVENUE						
OUT PATIENT REVENUE	32,919	43,241	49,424	188,935	226,501	256,623
TOTAL REVENUE	<u>32,919</u>	<u>43,241</u>	<u>49,424</u>	<u>188,935</u>	<u>226,501</u>	<u>256,623</u>
DEDUCTIONS FROM REVENUE						
CHARITY						
DISCOUNTS						
PROVISION FOR BAD DEBT						
CONTRACTUAL ALLOWANCES						
CLINIC ALLOWANCES						
TOTAL DEDUCTIONS FROM REVENUE	<u>          </u>	<u>          </u>	<u>          </u>	<u>          </u>	<u>          </u>	<u>          </u>
OTHER OPERATING REVENUE						
OTHER OPERATING REVENUE	0	0	0	0	0	0
DISTRICT NET INCOME (LOSS)						
DISPRO-SHARE REVENUE						
CLINIC OTHER OPERATING REV						
TOTAL OTHER REVENUE	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
EXPENSES						
SALARIES	(9,615)	(11,796)	(12,609)	(65,696)	(59,676)	(61,555)
FICA	(724)	(868)	(870)	(4,748)	(4,685)	(4,314)
MED/SURG SUPPLIES	(12)	(13)	0	(71)	(68)	(57)
OFFICE SUPPLIES	(9)	(95)	(16)	(149)	(500)	(850)
OTHER SUPPLIES	(1,772)	(1,353)	(2,756)	(7,990)	(7,083)	(8,824)
CHEMICAL COST	0	(12)	0	0	(64)	0
FOOD	(796)	(637)	(1,069)	(3,316)	(3,336)	(4,336)
ELECTRICITY	(2,568)	(4,198)	(3,426)	(15,200)	(22,559)	(18,082)
FUEL & GAS	(109)	(210)	(113)	(805)	(1,128)	13,717
WATER	(129)	(156)	(165)	(718)	(835)	(831)
MAINTENANCE CONTRACTS	(55)	(92)	(55)	(275)	(496)	(710)
REPAIRS & MAINTENANCE	(202)	(2,098)	(5,297)	(2,966)	(11,279)	(11,980)
PROFESSIONAL CONTRACTS	(1,053)	(1,058)	(1,053)	(5,266)	(5,689)	(5,245)
PROFESSIONAL SERVICES	(3,139)	(3,358)	(2,066)	(12,967)	(18,047)	(13,744)

BUDGET COMPARISON REPORT  
 WELLNESS CENTER 7085  
 FOR PERIOD ENDING 02/28/21

	ACTUAL	BUDGET	PR ACTUAL	YTD ACTUAL	YTD BUDGET	PY ACTUAL
LICENSES	(228)	(51)	0	(457)	(254)	(355)
PHONE/CABLE/INTERNET	(683)	(541)	(566)	(3,180)	(2,708)	(2,244)
DUES & SUBSCRIPTIONS	0	(191)	0	(412)	(958)	(2,299)
ADVERTISING	0	(41)	0	0	(208)	(131)
TRAVEL & MEETING	0	(313)	0	0	(1,563)	(25)
POSTAGE	0	0	(1)	0	(2)	(2)
EQUIPMENT RENTAL	(15)	(6)	(12)	(30)	(31)	(26)
EDUCATION EXPENSES	0	0	0	(639)	0	0
PUBLIC EDUCATIONAL ACTIVITIE	0	(316)	0	0	(1,583)	(1,978)
DISASTER EXPENSE	(14)	(4)	0	(96)	(21)	0
LINEN PURCHES	(530)	(334)	0	(530)	(1,667)	(301)
TOTAL EXPENSES	<u>(21,652)</u>	<u>(27,741)</u>	<u>(30,072)</u>	<u>(125,510)</u>	<u>(144,440)</u>	<u>(124,170)</u>
NET PROFIT/(LOSS)	<u>11,267</u>	<u>15,500</u>	<u>19,352</u>	<u>63,425</u>	<u>82,061</u>	<u>132,452</u>

**CUERO REGIONAL HOSPITAL  
MEDICAL STAFF PRIVILEGES REVIEW SHEET**

**INITIAL APPOINTMENT**

APPLICANT NAME: Remigius Okea, MD DATE: 03/01/2021

The following has been verified by Administration:

- |  |                                      |                          |
|--|--------------------------------------|--------------------------|
| 1. Completed Application   | <input checked="" type="radio"/> YES | <input type="radio"/> NO |
| 2. Current Texas License   | <input checked="" type="radio"/> YES | <input type="radio"/> NO |
| 3. Board Certification<br>If No, explain _____   | <input checked="" type="radio"/> YES | <input type="radio"/> NO |
| 4. Current DEA Certificate<br>If No, explain _____   | <input checked="" type="radio"/> YES | <input type="radio"/> NO |
| 5. Evidence of Adequate Professional Liability Insurance<br>Expiration Date: <u>06/01/2021</u> | <input checked="" type="radio"/> YES | <input type="radio"/> NO |
| 6. Adverse information with Data Bank Query (MD/DO only)                                       | <input checked="" type="radio"/> YES | <input type="radio"/> NO |
| 7. Board of Medical Examiners Query  | <input checked="" type="radio"/> YES | <input type="radio"/> NO |
| 8. Current CPR/ACLS/ATLS for ER privileges<br>If No, explain _____                             | <input checked="" type="radio"/> YES | <input type="radio"/> NO |
| 9. Current ACLS or Board Cert. to perform cardiac stress tests<br>If No, explain _____         | <input checked="" type="radio"/> YES | <input type="radio"/> NO |
| 10. Evidence of Continuing Medical Education requirements<br>If No, explain _____              | <input checked="" type="radio"/> YES | <input type="radio"/> NO |
| 11. In good standing at other hospitals where privileged<br>If No, explain _____               | <input checked="" type="radio"/> YES | <input type="radio"/> NO |
| 12. Malpractice claims in the last ten years   | <input checked="" type="radio"/> YES | <input type="radio"/> NO |

Specialty: Emergency Medicine

Comments: Southwest Medical Associates

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**CUERO REGIONAL HOSPITAL  
MEDICAL STAFF PRIVILEGES REVIEW SHEET**

**REAPPOINTMENT**

**APPLICANT NAME:** Douglas Webb, DPM

**DATE:** 03/01/2021

The following has been verified by Administration:

1. Completed Application  YES  NO
2. Current Texas License  YES  NO
3. Board Certification  YES  NO  
If No, explain \_\_\_\_\_
4. Current DEA Certificate  YES  NO  
If No, explain \_\_\_\_\_
5. Evidence of Adequate Professional Liability Insurance  YES  NO  
Expiration Date: 07/06/2021
6. Adverse information with Data Bank Queried YES  NO
7. Board of Medical Examiners Queried  YES  NO
8. Current CPR/ACLS/ATLS for ER privileges YES  NO  
If No, explain Does not have ER privileges
9. Current ACLS or Board Cert. to perform cardiac stress test YES  NO  
If No, explain Does not perform cardiac stress test
10. Evidence of CME requirements  YES  NO  
If No, explain \_\_\_\_\_
11. In good standing at other hospitals where privileged  YES  NO  
If No, explain \_\_\_\_\_
12. Malpractice claims in the last ten years  YES  NO

Specialty: Podiatry

Comments: Clear Lake Family Foot Specialists-Webster, TX

\_\_\_\_\_

\_\_\_\_\_

**CUERO REGIONAL HOSPITAL  
MEDICAL STAFF PRIVILEGES REVIEW SHEET**

**REAPPOINTMENT APPOINTMENT**

APPLICANT NAME: Joseph Zerr, MD DATE: 03/01/2021

The following has been verified by Administration:

1. Completed Application  YES  NO
2. Current Texas License  YES  NO
3. Board Certification  YES  NO  
If No, explain \_\_\_\_\_
4. Current DEA Certificate YES  NO  
If No, explain not required for radiology
5. Evidence of Adequate Professional Liability Insurance  YES  NO  
Expiration Date: 07/01/2021
6. Adverse information with Data Bank Query YES  NO
7. Board of Medical Examiners Query  YES  NO
8. Current CPR/ACLS/ATLS for ER privileges YES  NO  
If No, explain Does not have ER privileges
9. Current ACLS or Board Cert. to perform cardiac stress test YES  NO  
If No, explain Does not perform cardiac stress test
10. Evidence of Continuing Medical Education requirements  YES  NO  
If No, explain \_\_\_\_\_
11. In good standing at other hospitals where privileged  YES  NO  
If No, explain \_\_\_\_\_
12. Malpractice claims in the last ten years YES  NO

Specialty: Radiology-On Site W/ Radiology Partners

Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**CUERO REGIONAL HOSPITAL  
MEDICAL STAFF PRIVILEGES REVIEW SHEET**

**ADDITIONAL DELINEATED PRIVILEGES REQUEST**

APPLICANT NAME: Gregory C Downing, MD DATE: 03/01/2021

The following has been verified by Administration:

- |   |                                      |                                     |
|---|--------------------------------------|-------------------------------------|
| 1. Completed Application  | <input checked="" type="radio"/> YES | <input type="radio"/> NO            |
| 2. Current Texas License  | <input checked="" type="radio"/> YES | <input type="radio"/> NO            |
| 3. Board Certification<br>If No, explain _____  | <input checked="" type="radio"/> YES | <input type="radio"/> NO            |
| 4. Current DEA Certificate<br>If No, explain <u>Not Required for Tele-Radiology/onsite</u>  | YES                                  | <input checked="" type="radio"/> NO |
| 5. Evidence of Adequate Professional Liability Insurance<br>Expiration Date: <u>07/01/2021</u>                                    | <input checked="" type="radio"/> YES | <input type="radio"/> NO            |
| 6. Adverse information with Data Bank Query (MD/DO only)  | <input checked="" type="radio"/> YES | <input type="radio"/> NO            |
| 7. Board of Medical Examiners Query   | <input checked="" type="radio"/> YES | <input type="radio"/> NO            |
| 8. Current CPR/ACLS/ATLS for ER privileges<br>If No, explain <u>Not Required, does not have ER privileges</u>                     | YES                                  | <input checked="" type="radio"/> NO |
| 9. Current ACLS or Board Cert. to perform cardiac stress test<br>If No, explain <u>Not Required, does not perform stress test</u> | YES                                  | <input checked="" type="radio"/> NO |
| 10. Evidence of Continuing Medical Education requirements<br>If No, explain _____   | <input checked="" type="radio"/> YES | <input type="radio"/> NO            |
| 11. In good standing at other hospitals where privileged<br>If No, explain _____  | <input checked="" type="radio"/> YES | <input type="radio"/> NO            |
| 12. Malpractice claims in the last ten years  | <input checked="" type="radio"/> YES | <input type="radio"/> NO            |

Specialty: Radiology-On Site Physician

Comments: Radiology Partners

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# Marketing and Development Board Report Feb. 2021

**Marketing Campaign Reporting/Analytics:** Review reporting for all campaigns and see the creative for January/February:

<https://www.dropbox.com/sh/szb00pbpgf6rce9/AADwY7NuXLWEeqiuuNuCRjX1a?dl=0>

## Video

- YouTube Preroll campaign with Wood Agency January report - the full report is in the dropbox  
Feb was fully dedicated to MedSpa, but keep in mind, we trimmed our spend by half, so that will be reflected in the audience numbers dropping in the coming months. We want to continue to target the ideal customer/patient and look at the view rate to determine if we are reaching them effectively. In January, we reached 18,714 with a 34% view rate. The MedSpa video wasn't able to fully spend the budget due to a limited audience caused by Google's medical content policy in mid-February. Wood Agency is working on getting this resolved for in order to fully promote the MedSpa video. We plan to replace this video with a cardiopulmonary rehab spot mid-March.

### Latest Videos:

Vaccine Update: <https://youtu.be/z0Q72z3ZREE>

Gala New Date: <https://www.youtube.com/watch?v=FfQeUog0CNq>

Dr. Shenoy: <https://www.youtube.com/watch?v=CR-SUCVGdpo>

Go Red Photos: <https://www.youtube.com/watch?v=WzXtn-yRCsk&t=7s>

## Social Media

- We saw great growth in the area of likes on CRH's Facebook page (up **114** new likes AND **3,116 likes!** We reached over **20.5K** during this time period – incredible!
- Twitter and Instagram continue hold their numbers.
- Continue to post all new videos to our YouTube channel. Links to videos mentioned are posted above.

## Website

- Reporting is included in the Dropbox link above.
- We anticipate traffic to surge in late March with the launch of the online scheduling for the vaccines. We will continue to offer a phone in scheduling option.

## Public relations:

- Press releases continue to result in great traction and coverage. Please see below for coverage in local papers and area TV.
- Currently not attending local events, unless able virtually or small gathering (like board meetings for various boards)

## Development:

- Received \$5,000 grant from ConoccoPhillips for Patient Communication Boards. Photo and release to be submitted to local media.



- Working on pieces to promote the addition of Tele-endocrinology at our Outpatient Clinic. We have print ads running promoting Dr. Shenoy, as well as video on this new addition, press release submitted and social media posts to promote.
- Working with Jennifer Janssen and the Cardiopulmonary team on a series of education videos with Dr. Craig, as well as a new :30 spot to help educate the public on this valuable service. We will see a first draft of this :30 mid-March.
- MedSpa – Virtual ribbon cutting was a success with just shy of 300 views of the FB live video. The Chamber ribbon cutting photo has reached 650+ as of 3.12.21 (day after the event). We saw huge jump in FB likes and, more importantly, received several appointment requests immediately after the event, as well as consults with Dr. Denton to explore botox.
- Top 100 Rural and Community Hospital. Responded immediately by preparing and sending a press release to all area media, posting to social media and sharing with the staff. Developing internal and external signage to help tout this incredible recognition.

#### **Signage:**

- Internal signage – with continuing our masking policy, we posted new signage specifically made for Bfit to educate members, sent out a press release on all Cuero Health facilities continuing masking and best practices from CDC.
- New signage in development to recognize our Top 100 designation.

#### **Print Ads:**

See Dropbox for creatives that ran.

#### **Coverage in February – early March:**

**To see all press releases submitted to area print, radio, TV, magazines, etc, visit:**

<https://www.cueroregionalhospital.org/news/>

**Cuero Record:** **NEW – I have downloaded pdfs of the actual tearsheet of specific articles or ads mentioned below to review in the Dropbox.**

Feb. 3, Front page – Heart Screening print ad, 2A - <https://www.cuerorecord.com/columns-opinions/message-mayor-february-2021>, 6A – National Wear Red Day – CRH Photo Contest – ran press release (included heart screening and heart walk details).

Feb. 10, 2A – Heart Walk - ran Heart Walk press release, 6A – CRH receives tablet part of COVID grant, 16 A – Heart Walk Print ad

Feb. 17 – 4A – MedSpa press release, 6A – Year in Review, 7A – CRH Online Waiting List press release

Feb. 24 –5A – Gala New Date press release, 12 A – Dr. Shenoy print ad

March 3 – Front page – Vaccine Update (continued on page 4A), 14A – Dr. Shenoy print ad

March 10 – 2A – Letter to the Editor on Vaccine Clinic, 3A – Picture Perfect Baby Contest Winners Announced press release and Patient Safety print ad, and 14A – Dr. Shenoy print ad

**KAVU/Crossroads Today:**

Feb. 5 - <https://www.crossroadstoday.com/cuero-hospital-offering-reduced-costs-on-elective-heart-screening/>

Feb. 15 - <https://www.crossroadstoday.com/cuero-health-clinics-will-reopen-soon/>

**Victoria Advocate:**

Feb 8 - [https://www.victoriaadvocate.com/premium/were-ready-after-almost-a-year-of-covid-19-victoria-residents-65-and-up-eager/article\\_bec67b98-6a69-11eb-b1c9-330cd37490e3.html](https://www.victoriaadvocate.com/premium/were-ready-after-almost-a-year-of-covid-19-victoria-residents-65-and-up-eager/article_bec67b98-6a69-11eb-b1c9-330cd37490e3.html)

Feb. 16 - [https://www.victoriaadvocate.com/news/local/weather-cancellations-in-the-crossroads/article\\_fe1bb312-708b-11eb-9dbf-97d4e5e2e063.html](https://www.victoriaadvocate.com/news/local/weather-cancellations-in-the-crossroads/article_fe1bb312-708b-11eb-9dbf-97d4e5e2e063.html)

Feb 23 - [https://www.victoriaadvocate.com/news/health/cuero-health-clinics-updates/article\\_5eb6c434-75e9-11eb-89f2-fb18258aa45e.html](https://www.victoriaadvocate.com/news/health/cuero-health-clinics-updates/article_5eb6c434-75e9-11eb-89f2-fb18258aa45e.html)

March 5 - [https://www.victoriaadvocate.com/covid-19/6-700-doses-of-covid-19-vaccine-allocated-to-crossroads-providers/article\\_27726a78-7e0e-11eb-a5b4-5f53280fc399.html](https://www.victoriaadvocate.com/covid-19/6-700-doses-of-covid-19-vaccine-allocated-to-crossroads-providers/article_27726a78-7e0e-11eb-a5b4-5f53280fc399.html)

March 8 - [https://www.victoriaadvocate.com/opinion/letter-cuero-health-continues-working-diligently-to-provide-covid-vaccines/article\\_d4c5576c-802f-11eb-8fe4-47ef6e3fd853.html](https://www.victoriaadvocate.com/opinion/letter-cuero-health-continues-working-diligently-to-provide-covid-vaccines/article_d4c5576c-802f-11eb-8fe4-47ef6e3fd853.html)

Assistant Administrator  
Board Report  
March 2021

**Quality/Safety**

1. Patient safety awareness week is March 14<sup>th</sup> -20<sup>th</sup>. Although we are using this week in March to celebrate our patient safety achievements and increase awareness, safe care is our organizations focus every day. We will be placing an ad in the newspaper and putting fliers around the organization. In addition the staff has been asked to submit their best patient safety catch during this past year and the winner will receive a \$50 Wishing Well gift certificate.
2. The security guard, which is an off duty Sheriff's deputy began on Monday, March 1<sup>st</sup>. They will be working Mon-Fri 8pm-6am and 24 hours a day on Saturday and Sunday. Staff is very appreciative and state that they feel having a uniformed officer in house will help tremendously.

**Finance**

1. We are working with the weight loss program "Ideal Protein". This program which offers food and counseling will be offered at the Wellness Center. Dr. Mills will be the program director and Bri Hodges will be doing the weekly counseling. We hope to start a small group of "focus patients" in the next few weeks.
2. Lynn and I listened in on a telephone conference between O'Connell Robertson and the Department of State Health Services regarding the OR HVAC project. According to the state, since this will be strictly a HVAC replacement and there will be no change in function to the OR suite, the state will not require that we bring the OR's up to meet current code requirements.

**Community**

1. The Med Spa ribbon cutting will be a virtual event and will be held on Thursday, March 11<sup>th</sup>.

**BOARD REPORT  
NURSING ADMINISTRATION 2-12-2021**

**Safety/Quality**

Falls: 1 total: visitor fall with no injuries

Sepsis: 100% (4/4)

**People**

The LVN students began their clinical rotations on 2-1-2021. Patrick Thiry, RN is their instructor.

The RN students will begin their clinical rotations on 3-22-2021. Susan Sullivan, RN will be the instructor.

Our patient census has fluctuated greatly in the last few weeks. On the Med Surg floor, we have seen a census of 17 patients. In OB, we have had 5 Moms/ 5 babies and one triage patient during a shift. In ICU, we have had 4 patients. In ER, we have had 34 patients in a 24 hour period.

Our STRAC nurse will be leaving March 31, 2021. We have hired a fulltime RN to fill that position.

Judy Mazak, ER Director, is applying for our Stroke Redesignation at this time.

Wilma Reedy, OB Director, has submitted our Neonatal Redesignation to the State. She will also be submitting our Maternal Redesignation this year.

Our LINC student, Emily Bertram, will be graduating 5-8-2021. She is working in our ER at this time.

Yours in service, Judy Krupala, CNO

### **Quality/Safety**

- We were made aware that CRH was named to Becker's Top 100 Rural and Community Hospitals – a great recognition based on inpatient and outpatient market share, quality, outcomes, patient perspective, cost, charge and financial efficiency
- Sepsis was maintained at 100% for February
- There were 0 IP falls and 1 OP fall with minor injury
- CRH continues to partner with DeWitt Health Department, CISD to administer vaccines to community members. Thus far it has been very successful and as of 3/10 – CRH has been a part of administration of 1440 doses with another 500 anticipated on 3/11
- The positivity rate between Mar 1 and Mar 8 was 7.9%; the cumulative positivity rate is 29.2%
- We continue to work on getting doses to homebound patients. All of the Cuero Home Health patients who were interested in being vaccinated have received their first dose
- CRH will maintain its existing masking policy despite the change to the statewide mask mandate being lifted
- CRH is still recovering from the freeze. Goliad Clinic floor replacement began 3.9.21 and should be complete by 3.19.21; Facilities is still working on repair/replacement of the air cooled chiller and the boiler. Insurance claims will be made for the hospital campus
- DeWitt County Sherriff's Deputies began covering key shifts to increase hospital security. Great feedback from staff about their increased feeling of safety and security

### **People**

- Instead of holding face to face forums a slide show and recording of the forum presentation was made for employees to view in February and March
- SLT helped staff celebrate Valentine's Day by greeting staff coming on shift and those going off shift with Valentine's goodies at the staff entrance
- Department Leadership and SLT taking part in the virtual THA conference 3/10-3/12
- Planning for a virtual training session with Methodist for our leadership team – 4/21/21

### **Growth**

- The O'Connell Robertson Architects have reviewed and set Master Plan Goals and have assisted the advertising for the Construction Manager at Risk role
- A feasibility conference was held with representatives from the State regarding our OR project. We will not be required to bring all aspects to current code because it is a mechanical based project and will not change functions within the space
- Endocrinology Clinic and MedSpa continue to grow nicely
- A virtual MedSpa ribbon cutting was held 3/11 with over 200 viewers

### **Rural Health Clinics**

- Clinic volumes continue to be lower than budget due to COVID
- We will begin to phase out phone visits due to loss of revenue and upfront collections; phone visits will be available for the appropriate patients
- Susan Mims, PA is working to get her wound certification to support a wound clinic in our outpatient area



FY 2021

GOAL

# Quality Improvement Dashboard

1Q2020

2Q2021

3Q2021

4Q2021

OCT

NOV

DEC

JAN

FEB

MAR

APR

MAY

JUNE

JULY

AUG

SEPT

## Quality/Patient Safety Metrics

Total RL Solutions Reported		17	24	13	15	11							
Near Miss		0	7	2	2	1							
Precursor		16	16	9	11	6							
Serious Safety		0	0	0	1	0							
Medication Error	0	2	2	0	1	0							
Hand Off Communication Incidents	0	1	0	0	1	1							
Identification Incidents	0	3	0	1	0	1							
Medication Override-Overall	<10%	8.2%	8.4%	7.2%	8.3%	7.9%							
% Provider order entry	70%	77%	72%	75%	76%	76%							
% Blood Transfusion Criteria compliance	100%	100%	100%	100%	100%	100%							
% Chart Delinquency	<15%	9%	10%	10%	18%	14%							
Total Falls	0	3	2	2	5	1							
Inpatient Fall Rate (# falls per 1000 pt days)	<2%	0%	6%	0%	12.3%	0%							
Other Fall Rate (# other falls per consolidated APD)	<0.1%	0.2%	0.1%	0.22%	0.2%	0.10%							

## Patient Satisfaction

### Press Ganey Texas Rank Percentile

HCAHPS: Overall Rating	75th	99	71	17	88	17							
HCAHPS: Would Recommend	75th	69	8	19	45	19							
OAS-CAHPS: Overall Rating	51st	99	71	56	79	11							
OAS-CAHPS: Would Recommend	51st	17	79	11	87	99							
HH-HCAHPS: Overall Rating	65th	1	45	19	99								
HH-HCAHPS Score: Would Recommend	65th	1	82	61	99								
Clinics Satisfaction: Overall Rating	51st	19	22	47	23	17							
Clinics Satisfaction: Would Recommend	51st	21	12	61	22	15							
ER Satisfaction: Overall Rating	75th	61	55	6	89	83							
ER Satisfaction: Would Recommend	75th	60	31	9	80	83							

## Infection Control

updated 3/12/2021

CAUTI	0	0	0	0	0	0							
CLABSI	0	0	0	0	0	0							
SSI	0	0	0	2	0	0							
Handwashing Compliance	95%	92%	91%	96%	95%	89%							

Goal Met



FY2021

GOAL

# Core Measures Dashboard

1Q2020

2Q2021

3Q2021

4Q2021

OCT

NOV

DEC

JAN

FEB

MAR

APR

MAY

JUNE


JULY

AUG

SEPT

## Core Measures


SEP-1 Sepsis Compliance	85%	100%	86%	100%	100%	100%							
PC-01 Elective Delivery	<2%	0%	0%	0%									
PC-02 Cesarean Birth	<33%	40%	50%	20%									
PC-03 Antenatal Steroids	97%												
PC-05 Exclusive Breast Milk Feeding	50%	37%	22%	38%									
OP-23 Head CT/MRI results interpreted within 45 min of ER arrival	100%												
OP-29 Appropriate follow up for Colonoscopy	100%	100%		100%									
VTE-1 VTE prophylaxis	95%	96%	100%	95%	100%	83%							
VTE-2 ICU VTE prophylaxis	95%	100%	100%	100%	100%	100%							
STK-2 DC'd on Antithrombotic Therapy	100%	100%		100%									
STK-3 Anticoagulation Therapy for Afib/Aflutter	100%												
STK-5 Antithrombotic therapy by end of hospital day 2	100%	100%		100%									
STK-6 DC'd on Statin Medication	100%	100%		0%									
<b>Goal Met</b>													

 FY2021	GOAL	Clinic Quality Measures Dashboard											
		1Q2020			2Q2021			3Q2021			4Q2021		
		OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT
<b>Quality/Patient Safety Metrics</b>													
Total RL Solutions Reported for Clinics		2	4	1	0	3							
Near Miss		0	0	0	0	0							
Precursor		2	2	0	0	1							
Serious Safety		0	0	0	0	0							
Other		0	2	1	1	2							
Handwashing compliance		93%	88%	91%	90%	90%							
<b>Core Measures</b>													
Wait Time- average time from check-in to check-out	<60 mins	55 mins	55 mins	48 mins	51 mins	52 mins							
Wait Time- average time from check-in to seeing nurse	<20 mins	9 mins	8 mins	7 mins	9 mins	11 mins							
NQF 0034- Colorectal Cancer Screening according to USPSTF for patients 50-75 years of age	85%	79%	82%	82%	81%	82%							
NQF 2372- Breast Cancer Screening with mammogram for women 50-74 years of age	75%	63%	65%	67%	55%	58%							
*NQF 0018- Controlling High Blood Pressure- patients 18-85 yrs of age w/dx of HTN & BP adequately controlled (<140/90) *	75%	49%	50%	50%	50%	46%							
NQF 0069- children 3mths to 18yrs who were diagnosed with URI and were not dispensed an antibiotic on or three days after episode	85%	97%	99%	98%	97%	98%							
NQF 0056- Diabetic Foot Exam for patients 18-75 yrs of age with diabetes (visual inspection, sensory exam w/mono filament, and pulse exam) during the measurement year	85%	94%	90%	94%	100%	100%							
NQF 0028- Smoking Cessation- patients age 18 & older who were screened for tobacco use & received tobacco cessation intervention if identified as tobacco user	85%	79%	81%	82%	85%	82%							
Gestational Diabetes Mellitus (GDM) Screening- in pregnant women between 24-28wks gestation	90%	100%	100%	100%	100%	91%							
Timely Chart Closure- percentage of charts open after date of encounter	<15%	23%	31%	24%	22%	31%							
Timely Review of Results- number of providers w/results outstanding for month 48hrs after month end	0	4	2	5	2	3							
<b>Goal Met</b>													

updated 3/9/2021

\*Controlling BP measure added for FY21



 <b>FY 2021</b>		GOAL	<h1 style="text-align: center;">Clinic Patient Satisfaction Improvement Dashboard</h1>											
			1Q2020			2Q2021			3Q2021			4Q2021		
			OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT
<b>Patient Satisfaction</b>														
<b>Press Ganey Texas Rank Percentile</b>														
Cuero Overall Satisfaction Score:	51st	5	25	26	86	24								
Cuero would recommend practice:	51st	7	36	45	77	44								
Goliad Overall Satisfaction Score:	51st	99	21	99	7	2								
Goliad would recommend practice:	51st	99	2	99	5	1								
Kenedy Overall Satisfaction Score:	51st	99	93	99	15	1								
Kenedy would recommend practice:	51st	19	1	99	99	1								
Parkside Overall Satisfaction Score:	51st	10	5	24	2	96								
Parkside would recommend practice:	51st	19	1	55	1	99								
Yorktown Overall Satisfaction Score:	51st	10	26	99	36	98								
Yorktown would recommend practice:	51st	19	36	99	1	1								
<b>Combined Clinics Overall Satisfaction Score:</b>	51st	15	21	51	24	18								
<b>Combined Clinics would recommend practice:</b>	51st	18	14	61	19	20								
<b>Goal Met</b>														

updated 3/9/2021

# **OLD BUSINESS AGENDA ITEM #1**

**Annual Review of the DeWitt Medical  
District By-Laws and Approve Any  
Amendments—Consider and Take  
Appropriate Action**

# **OLD BUSINESS AGENDA ITEM #2**

## **Annual Review of Plan for the Provision of Patient Care Services – Review and Take Appropriate Action**

**Attached:**

Plan for the Provision of Patient Care Services

Signoff sheet

**CUERO REGIONAL HOSPITAL**  
**PLAN FOR THE PROVISION OF PATIENT CARE**  
**SERVICES**

\_\_\_\_\_  
Administrator Date

\_\_\_\_\_  
Chief of Staff Date

\_\_\_\_\_  
Chairman, Board of Directors Date

# **OLD BUSINESS AGENDA ITEM #3**

**Review of Recommended Language for Staff  
to Follow CDC Guidelines – Review and Take  
Appropriate Action**

# **AGENDA ITEM #1**

## **Capital Expenditure Request for Additional US Probe for Transvaginal Patients – Review and Take Appropriate Action**

### **Attached:**

**Siemens**

**\$7,140.00 Recommended**

HOSPITAL/ENTITY <b>Cuero Regional Hospital</b>	
DEPARTMENT <b>Radiology</b>	DATE PREPARED <b>12/28/2020</b>
Is the requested purchase in compliance with the Healthtrust GPO?	

D E S C R I P T I O N	PROJECT NAME <b>Additional US Probe for Transvaginal Patients</b>	DESIRED DELIVERY/START DATE <b>ASAP</b>
	PROJECT DESCRIPTION <b>Obtain an additional endovaginal probe that is smaller in diameter to accommodate older and sensitive patients. Multiple bids not obtained due to machine compatibility.</b>	PURPOSE FOR REQUEST New Service <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Code Compliance <input type="checkbox"/>
	JUSTIFICATION <i>Indiate present situation, need for the item requested and alternative considerations.</i> <b>Less discomfort to patients.</b>	
	BUDGET REFERENCE	Amount Budgeted
	BUDGET LINE ITEM <i>IF NOT BUDGETED, WHY IS IT NEEDED AT THIS TIME?</i> <b>Line 35</b>	<b>\$10,000</b>

EQUIPMENT/PROJECT COSTS	Attach copies of proposals			ASSET DISPOSITION DATA	
	Bid #1	Bid #2	Bid #3	Description of Disposed Assets:	
Name of Bidder	Siemens				
Land and/or Acquisition					
Construction				BOOK VALUE OF DISPOSED ASSET	
Equipment	\$7,140.00			METHOD OF DISPOSITION	Trade In <input type="checkbox"/>
TOTAL COSTS	\$7,140.00				Sale <input type="checkbox"/>
Less Trade In					Abandonment <input type="checkbox"/>
NET CAPITAL REQUIRED	\$7,140.00				
RECOMMENDATION (Check one)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

A U T H O R I Z A T I O N	DEPARTMENT HEAD	DATE: <u>3/14/21</u>
	SLT LEADER	DATE: <u>3/16/21</u>
	CHIEF EXECUTIVE OFFICER or CHIEF FINANCIAL OFFICER	DATE: <u>3/16/21</u>
	Board Member Signature if greater than \$5,000	DATE: _____





HOSPITAL/ENTITY: CRH							
DEPARTMENT: Goliad Family Praticce				DATE PREPARED: 3/3/2021			
Is the requested purchase in compliance with the Healthtrust GPO?							
D E S C R I P T I O N	PROJECT NAME: Replace Flooring at Clinic			DESIRED DELIVERY/START DATE:			
	PROJECT DESCRIPTION Remove all furniture and equipment from Clinic floors to allow for the removal of the existing carpet. Once carpet is removed and new commercial grade vinyl flooring shall be installed. Once new flooring has been installed install new quarter round below all baseboards, and put all furniture back in it orginal location.			PURPOSE FOR REQUEST			
	JUSTIFICATION Indiate present situation, need for the item requested and alternative considerations.			New Service <input type="checkbox"/>			
				Replacement <input checked="" type="checkbox"/>			
Water pipe bursted during the winter freeze and flooded the entire Clinic			Code Compliance <input type="checkbox"/>				
BUDGET REFERENCE			Amount Budgeted				
BUDGET LINE ITEM IF NOT BUDGETED, WHY IS IT NEEDED AT THIS TIME?							
F I N A N C I A L	EQUIPMENT/PROJECT COSTS		Attach copies of proposals		ASSET DISPOSITION DATA		
			Bid #1	Bid #2	Bid #3	Description of Disposed Assets:	
	Name of Bidder		Ramirez	Kitchen	CRT		
	Construction					BOOK VALUE OF DISPOSED ASSET	
	Equipment (incl shipping)						
	Other					METHOD OF DISPOSITION	
	TOTAL COSTS		\$22,950.00	\$33,741.43	\$21,006.16	Trade In	<input type="checkbox"/>
	Less Trade In					Sale	<input type="checkbox"/>
	NET CAPITAL REQUIRED		\$22,950.00	\$33,741.43	\$21,006.16	Abandonment	<input type="checkbox"/>
	RECOMMENDATION (Check one)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	FOB Yes	<input type="checkbox"/>
					No	<input type="checkbox"/>	
A U T H O R I Z A T I O N	Department Head <u>Ricky Carson</u>			DATE: 3/3/2021			
	IT Director _____			DATE: _____			
	(Attach description of impact and IT costs)						
	Facilities Director <u>Ricky Carson</u>			DATE: 3/3/2021			
	(Attach description of impact and Facilities costs)						
SLT Leader <u>R. Falcone</u>			DATE: 3/4/21				
CEO/CFO <u>R. Falcone</u>			DATE: 3/4/21				
If greater than \$5000							
Board Member _____			DATE: _____				

3/3/21 Approved out of cycle by Rick Wheeler to proceed in order to get Goliad open again. CRT \$21,006.14  
Lynn Falcone, CEO

# **AGENDA ITEM #3**

## **Capital Expenditure Request to Replace Domestic Hot Water Boiler #1– Review and Take Appropriate Action**

### **Proposals:**

<b>TB&amp;BS</b>	<b>\$35,500.00</b>	<b>Recommended</b>
<b>STB</b>	<b>\$59,972.00</b>	
<b>SCB</b>	<b>\$46,614.71</b>	

HOSPITAL/ENTITY: CRH						
DEPARTMENT: Maintenance				DATE PREPARED: 3/10/2021		
Is the requested purchase in compliance with the Healthtrust GPO?						
D E S C R I B E T I O N	PROJECT NAME: Replace Domestic Hot Water Heater# 1			DESIRED DELIVERY/START DATE:		
	PROJECT DESCRIPTION Replace the Domestic Hot Water Heater that the water <i>Boiler</i> in the tubes froze and bursted during the freeze this past February			PURPOSE FOR REQUEST		
JUSTIFICATION <i>Indiate present situation, need for the item requested and alternative considerations.</i>						
Parts are no longer suported for this Boiler since the Boiler is in excess of 35 years of age						
BUDGET REFERENCE			Amount Budgeted			
BUDGET LINE ITEM # 127 <i>IF NOT BUDGETED, WHY IS IT NEEDED AT THIS TIME?</i>			\$45,000.00			
F I N A N C I A L	EQUIPMENT/PROJECT COSTS		Attach copies of proposals		ASSET DISPOSITION DATA	
			Bid #1	Bid #2	Bid #3	Description of Disposed Assets:
	Name of Bidder	TB&BS	STB	Clever Brooks		<i>SCB</i>
	Construction					BOOK VALUE OF DISPOSED ASSET
	Equipment (incl shipping)					
	Other					METHOD OF DISPOSITION
	TOTAL COSTS	\$35,500.00	\$59,972.00	\$0.00		Trade In <input type="checkbox"/>
Less Trade In					Sale <input type="checkbox"/>	
NET CAPITAL REQUIRED	\$35,500.00	\$59,972.00	\$0.00	46,614.71	Abandonment <input type="checkbox"/>	
RECOMMENDATION (Check one)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

3/10/21 spoke to Rick Wheeler regarding emergency purchase of 3540 Boiler damaged during the freeze. Approved. L Falcone

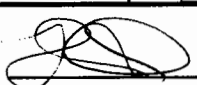
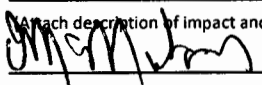
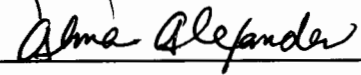
# **AGENDA ITEM #4**

## **Capital Expenditure Request for PACS Refresh for Radiology– Review and Take Appropriate Action**

### **Proposals:**

**Merge**

**\$ 93,093.90 Recommended**

HOSPITAL/ENTITY: <b>CRH</b>																																																												
DEPARTMENT: <b>Radiology</b>		DATE PREPARED: <b>3/9/2021</b>																																																										
Is the requested purchase in compliance with the Healthtrust GPO?																																																												
D E S C R I P T I O N	PROJECT NAME: PACS REFRESH  PROJECT DESCRIPTION <b>Originally, the plan was for a full refresh, but due to circumstances, we must move forward with the archival portion. The current archive is limited on space and needs to be refreshed ASAP. This will now be a multiphase project.</b>  JUSTIFICATION <i>Indiate present situation, need for the item requested and alternative considerations.</i> Needed for archival of Imaging studies  BUDGET REFERENCE Line 141 BUDGET LINE ITEM <i>IF NOT BUDGETED, WHY IS IT NEEDED AT THIS TIME?</i> Only part of the system will be upgraded at this time (archive)	DESIRED DELIVERY/START DATE:  PURPOSE FOR REQUEST New Service <input type="checkbox"/> Replacement <input checked="" type="checkbox"/> Code Compliance <input type="checkbox"/>  Amount Budgeted <b>\$350,000</b>																																																										
F I N A N C I A L	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th rowspan="2">EQUIPMENT/PROJECT COSTS</th> <th colspan="3">Attach copies of proposals</th> <th colspan="2">ASSET DISPOSITION DATA</th> </tr> <tr> <th>Bid #1</th> <th>Bid #2</th> <th>Bid #3</th> <th colspan="2">Description of Disposed Assets:</th> </tr> <tr> <td>Name of Bidder</td> <td>Merge</td> <td></td> <td></td> <td colspan="2"></td> </tr> <tr> <td>Construction</td> <td></td> <td></td> <td></td> <td colspan="2"></td> </tr> <tr> <td>Equipment (incl shipping)</td> <td>\$65,874.33</td> <td></td> <td></td> <td>BOOK VALUE OF DISPOSED ASSET</td> <td>\$0</td> </tr> <tr> <td>Other</td> <td>\$27,219.57</td> <td></td> <td></td> <td rowspan="2">METHOD OF DISPOSITION</td> <td>Trade In <input type="checkbox"/></td> </tr> <tr> <td>TOTAL COSTS</td> <td>\$93,093.90</td> <td>\$0.00</td> <td>\$0.00</td> <td>Sale <input type="checkbox"/></td> </tr> <tr> <td>Less Trade In</td> <td></td> <td></td> <td></td> <td>Abandonment <input checked="" type="checkbox"/></td> <td></td> </tr> <tr> <td>NET CAPITAL REQUIRED</td> <td>\$93,093.90</td> <td>\$0.00</td> <td>\$0.00</td> <td>FOB Yes <input type="checkbox"/> No <input type="checkbox"/></td> <td></td> </tr> <tr> <td>RECOMMENDATION (Check one)</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td colspan="2"></td> </tr> </table>	EQUIPMENT/PROJECT COSTS	Attach copies of proposals			ASSET DISPOSITION DATA		Bid #1	Bid #2	Bid #3	Description of Disposed Assets:		Name of Bidder	Merge					Construction						Equipment (incl shipping)	\$65,874.33			BOOK VALUE OF DISPOSED ASSET	\$0	Other	\$27,219.57			METHOD OF DISPOSITION	Trade In <input type="checkbox"/>	TOTAL COSTS	\$93,093.90	\$0.00	\$0.00	Sale <input type="checkbox"/>	Less Trade In				Abandonment <input checked="" type="checkbox"/>		NET CAPITAL REQUIRED	\$93,093.90	\$0.00	\$0.00	FOB Yes <input type="checkbox"/> No <input type="checkbox"/>		RECOMMENDATION (Check one)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
EQUIPMENT/PROJECT COSTS	Attach copies of proposals			ASSET DISPOSITION DATA																																																								
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Name of Bidder	Merge																																																											
Construction																																																												
Equipment (incl shipping)	\$65,874.33			BOOK VALUE OF DISPOSED ASSET	\$0																																																							
Other	\$27,219.57			METHOD OF DISPOSITION	Trade In <input type="checkbox"/>																																																							
TOTAL COSTS	\$93,093.90	\$0.00	\$0.00		Sale <input type="checkbox"/>																																																							
Less Trade In				Abandonment <input checked="" type="checkbox"/>																																																								
NET CAPITAL REQUIRED	\$93,093.90	\$0.00	\$0.00	FOB Yes <input type="checkbox"/> No <input type="checkbox"/>																																																								
RECOMMENDATION (Check one)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																									
A U T H O R I Z A T I O N	Department Head  IT Director _____ (Attach description of impact and IT costs) Facilities Director _____ (Attach description of impact and Facilities costs) SLT Leader  CEO/CFO  If greater than \$5000 Board Member _____	DATE: <b>3/9/2021</b>  DATE: _____  DATE: _____  DATE: <b>3/10/21</b>  DATE: <b>3/10/21</b>  DATE: _____																																																										

# **AGENDA ITEM #5**

## **Receive and Accept the Certification of Unopposed Candidates – Consider and Take Appropriate Action**

### **Attached:**

Certification of Unopposed Candidates

The Secretary of the Board for DeWitt Medical District certifies Mr. Richard Wheeler and Dr. John Frels as unopposed candidates in the election scheduled to be held on May 1, 2021.

Motion to receive and accept the Certification of Unopposed Candidate as presented.

AW12-1  
Prescribed by Secretary of State  
Section 2.051 – 2.053, Texas Election Code  
2/14

**CERTIFICATION OF UNOPPOSED CANDIDATES FOR  
OTHER POLITICAL SUBDIVISIONS (NOT COUNTY)  
CERTIFICACIÓN DE CANDIDATOS ÚNICOS  
PARA OTRAS SUBDIVISIONES POLITICAS (NO EL CONDADO)**

**To: Presiding Officer of Governing Body  
Al: Presidente de la entidad gobernante**

**As the authority responsible for having the official ballot prepared, I hereby certify that the following candidates are unopposed for election to office for the election scheduled to be held on May 1, 2021**

**Como autoridad a cargo de la preparación de la boleta de votación oficial, por la presente certifico que los siguientes candidatos son candidatos únicos para elección para un cargo en la elección que se llevará a cabo el 1 de mayo 2021**

**List offices and names of candidates:  
Lista de cargos y nombres de los candidatos:**

**Office(s) Cargo(s)**

Director  
Director

**Candidate(s) Candidato(s)**

Dr. John Frels  
Richard Wheeler

**Signature (Firma)**

Charles W. Papacek

**Printed name (Nombre en letra de molde)**

Board Secretary

**Title (Puesto)**

March 25, 2021

**Date of signing (Fecha de firma)**

**(Seal) (sello)**

**See reverse side for instructions  
(Instrucciones en el reverso)**

### **Instructions for certification of unopposed candidates:**

The authority responsible for preparing the ballot must certify the unopposed status to the authority responsible for ordering the election. This document is filed with the presiding officer of the political subdivision. The governing body must meet, accept this certification, and issue an order or ordinance declaring the election cancelled and the unopposed candidates elected. To complete the cancellation process, a copy of the order or ordinance canceling the election must be posted on Election Day at each polling place that would have been used in the election. See sample Order of Cancellation and outlines for additional instructions.

#### **An election\* may be cancelled if:**

- 1) The election is one in which a declaration of write-in candidacy is required; and
- 2) No opposed at-large race is on the ballot\* within that election;\*and
- 3) Each candidate whose name is to appear on the ballot\* is unopposed, with some exceptions;

#### **This means:**

- In an all at-large election\* (with no single-member districts), if there is one or more opposed at-large races, then all the races go on the ballot within that election.\*
- In an election\* in which any members of the governing body are elected from single-member districts, an election in a particular district may be cancelled if the candidate is unopposed and the election otherwise meets the above requirements (i.e., there is no at-large opposed race on the ballot).

**Note:** A general election (for full terms) or a special election (to fill a vacancy in an unexpired term) is considered a *separate election* with a *separate ballot* for purposes of these tests, even if held on the same election date. See our online Cancellation guide for details.

### **Instrucciones para la certificación de una elección con candidatos únicos:**

*La autoridad a cargo de preparar la boleta de votación debe certificar los candidatos únicos sin oposición a la autoridad encargada de ordenar la elección. Este documento se debe presentar al presidente de la subdivisión política. La entidad gobernante debe reunirse, aceptar esta certificación y emitir una orden o una ordenanza en la que declara la cancelación de la elección y la elección de los candidatos únicos sin oposición. Para completar el proceso de cancelación, se debe exhibir el Día de la Elección una copia de la orden u ordenanza de cancelación de la elección en todos los sitios de votación que se hubieran utilizado en la elección. Vea el ejemplo Orden de Cancelación y el resumen para más instrucciones.*

#### **Una elección\* puede ser cancelada si:**

- 1) *la elección es una en la que se requiere una declaración de candidatos por escrito en la boleta de votación; y,*
- 2) *no hay oposición para la carrera por acumulación en la boleta\* de votación dentro de esa elección\* y*
- 3) *Todos los candidatos cuyos nombres deben aparecer en la boleta\* de votación no tienen oposición, con unas excepciones;*

#### ***Esto significa:***

- *En una elección\* por acumulación (sin ningún distrito con miembro único), si se encuentra una o más de una carrera por acumulación con oposición, entonces todas las carreras estarán en la boleta dentro de esa elección\*.*
- *En una elección\* en la que cualquiera de los miembros de la entidad gobernante se eligen de distritos con un solo miembro, se puede cancelar una elección en un distrito específico si hay oposición para el candidato y la elección cumple con los requisitos que anteceden (ej. no hay oposición para la carrera por acumulación en la boleta).*

**Nota:** *Una elección general (con términos completos) o una elección especial (para llenar una vacante de un término no vencido) es considerada como una elección distinta con una boleta distinta con los propósitos de estas pruebas, aunque se lleven a cabo en la misma fecha electoral. Vea nuestra guía de cancelación en línea para más detalles.*



# AGENDA ITEM #6

## Issue and Adopt Cancellation Order/Ordinance of Election – Consider and Take Appropriate Action

### Attached:

1. Order of Cancellation of Election for DeWitt Medical District
2. Statement of Elected/Appointed Officers for Mr. Richard Wheeler and Dr. John Frels

The Secretary of the Board for the DeWitt Medical District requests the election scheduled to be held on May 1, 2021, be canceled in accordance with Section 2.053 of the Texas Election Code, and the unopposed candidates, Mr. Richard Wheeler and Dr. John Frels, be certified as elected.

**Motion** to adopt the Cancellation Order/Ordinance of Election to cancel the election scheduled for May 1, 2021, in accordance with Section 2.053 of the Texas Election Code and to declare Mr. Richard Wheeler and Dr. John Frels elected.

Mr. Richard Wheeler and Dr. John Frels will each complete the Statement of Elected Officer.

The Order of Cancellation will be furnished to the Election Administrator and will be posted at the voting location, County Annex, on Election Day as required by law.

**SAMPLE ORDER OF CANCELLATION**  
**EJEMPLO DE ORDEN DE CANCELACIÓN**

The DeWitt Medical District hereby cancels the election scheduled to be held on  
(official name of governing body)  
May 1, 2021 in accordance with Section 2.053(a) of the Texas  
(date on which election was scheduled to be held)  
Election Code. The following candidates have been certified as unopposed and are hereby  
elected as follows:

El DeWitt Distrito Medico por la presente cancela la elección que, de lo contrario,  
(nombre oficial de la entidad gobernante)  
se hubiera celebrado el 1 de mayo de 2021 de conformidad, con  
(fecha en que se hubiera celebrado la elección)  
la Sección 2.053(a) del Código de Elecciones de Texas. Los siguientes candidatos han sido  
certificados como candidatos únicos y por la presente quedan elegidos como se haya indicado  
a continuación:

**Candidate (Candidato)**

Dr. John Frels  
Richard Wheeler

**Office Sought (Cargo al que presenta candidatura)**

Director  
Director

A copy of this order will be posted on Election Day at each polling place that would have  
been used in the election.

*El Día de las Elecciones se exhibirá una copia de esta orden en todas las mesas electorales  
que se hubieran utilizado en la elección.*

\_\_\_\_\_  
President (Presidente)

\_\_\_\_\_  
Secretary (Secretario)

(seal) (sello)

March 25, 2021  
Date of adoption (Fecha de adopción)

See reverse side for instructions  
Instrucciones en el reverso

### Instructions for sample order of cancellation:

To cancel an election, the governing body must first receive and accept the Certification of Unopposed Candidates form (or the authority may create its own form) from the authority responsible for preparing the ballot. The cancellation order/ordinance must be adopted in an open meeting. The candidates are not required to be present. Certificates of election should be prepared for each unopposed candidate; however, the certificates of election should not be issued until after Election Day, as follows. Section 2.053 provides that the certificate of election shall be issued "in the same manner and at the same time" as for a candidate elected at an election. Therefore, the candidates, who have been declared "elected" at the meeting ordering the cancellation, must wait until after the official election day (even though no election is held) and no earlier than the prescribed canvassing period (even though no canvass is held) to be sworn in and assume their duties. Candidates may complete the Statement of Elected Officer prior to Election Day. The Statement should be kept locally; it does not need to be sent to the Secretary of State's Office. Copies of this order/ordinance must be posted on Election Day at each polling place that would have been used had the election not been cancelled.

---

#### An election\* may be cancelled if:

- 1) The election is one in which a declaration of write-in candidacy is required; and
- 2) No opposed at-large race is on the ballot\* within that election;\*and
- 3) Each candidate whose name is to appear on the ballot\* is unopposed, with some exceptions;  
This means:
  - In an all at-large election\* (with no single-member districts), if there is one or more opposed at-large races, then all the races go on the ballot within that election.\*
  - In an election\* in which any members of the governing body are elected from single-member districts, an election in a particular district may be cancelled if the candidate is unopposed and the election otherwise meets the above requirements (i.e., there is no at-large opposed race on the ballot).

**Note:** A general election (for full terms) or a special election (to fill a vacancy in an unexpired term) is considered a *separate election* with a *separate ballot* for purposes of these tests, even if held on the same election date. See our online Cancellation guide for details.

### Instrucciones para el ejemplo de orden de cancelación:

*Para cancelar una elección, la entidad gobernante primero debe recibir y aceptar, de la autoridad responsable para preparar la boleta, el formulario de Certificación para Candidatos Sin Oposición (o la autoridad puede crear su propio formulario) de la autoridad responsable para preparar la boleta. La orden/ordenanza de cancelación debe ser adoptada en una reunión abierta. No se requiere que los candidatos estén presentes. Se debe preparar un certificado de elección para cada candidato sin oposición; sin embargo, los certificados de elección no se deben emitir hasta el Día de las Elecciones, así como se detalla a continuación. La sección 2.053 indica que el certificado de elección será publicado "en la misma manera y al mismo tiempo" para un candidato elegido en una elección. Por lo tanto, los candidatos que hayan sido declarados "elegido" en la reunión de la cancelación, deben esperar hasta después del día oficial de elecciones (aunque no se hayan llevado una elección) y no antes del período prescrito de la campaña política (aunque no se lleve a cabo la campaña política) a ser jurados y asumir sus deberes. Los candidatos pueden llenar la Declaración de Funcionario Elegido antes del Día de las Elecciones. Este documento se debe mantener en los archivos locales. No es necesario enviarlo a la Oficina del Secretario de Estado. El Día de las Elecciones se debe exhibir una copia de esta orden/ordenanza en todos los sitios de votación que se hubieran utilizado en la elección si no hubiera sido cancelada.*

---

#### Una elección\* puede ser cancelada si:

- 1) *la elección es una en la que se requiere una declaración de candidatos por escrito en la boleta de votación; y,*
- 2) *no hay oposición para la carrera por acumulación en la boleta\* de votación dentro de esa elección\* y*
- 3) *Todos los candidatos cuyos nombres deben aparecer en la boleta\* de votación no tienen oposición, con unas excepciones;*  
*Esto significa:*
  - *En una elección\* por acumulación (sin ningún distrito con miembro único), si se encuentra una o más de una carrera por acumulación con oposición, entonces todas las carreras estarán en la boleta dentro de esa elección\*.*
  - *En una elección\* en la que cualquiera de los miembros de la entidad gobernante se eligen de distritos con un solo miembro, se puede cancelar una elección en un distrito específico si hay oposición para el candidato y la elección cumple con los requisitos que anteceden (ej. no hay oposición para la carrera por acumulación en la boleta).*

*Nota: Una elección general (con términos completos) o una elección especial (para llenar una vacante de un término no vencido) es considerada como una elección distinta con una boleta distinta con los propósitos de estas pruebas, aunque se lleven a cabo en la misma fecha electoral. Vea nuestra guía de cancelación en línea para más detalles.*

# STATEMENT OF ELECTED/APPOINTED OFFICER

I, John H. Frels, do solemnly swear, that I have not directly or indirectly paid, offered, promised to pay, contributed, or promised to contribute any money or thing of value, or promised any public office or employment for the giving or withholding of a vote at the election at which I was elected or as a reward to secure my appointment or confirmation, whichever the case may be, so help me God.

Title of Position to Which Elected/Appointed: Director, DeWitt Medical District,  
City of Cuero, DeWitt County, Texas

***UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING STATEMENT AND THAT THE FACTS STATED THEREIN ARE TRUE.***

Date: March 25, 2021

Signature: \_\_\_\_\_

# STATEMENT OF ELECTED/APPOINTED OFFICER

I, Richard Wheeler, do solemnly swear, that I have not directly or indirectly paid, offered, promised to pay, contributed, or promised to contribute any money or thing of value, or promised any public office or employment for the giving or withholding of a vote at the election at which I was elected or as a reward to secure my appointment or confirmation, whichever the case may be, so help me God.

Title of Position to Which Elected/Appointed: Director, DeWitt Medical District,  
City of Cuero, DeWitt County, Texas

***UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING STATEMENT AND THAT THE FACTS STATED THEREIN ARE TRUE.***

Date: March 25, 2021

Signature: \_\_\_\_\_

# **AGENDA ITEM #7**

## **Board Approval to Host April, July and October 2021 STB&TC Blood Drives – Consider and Take Appropriate Action**

**Motion to approve the April 15<sup>th</sup>, July 15<sup>th</sup> and October 21<sup>st</sup> South Texas Blood & Tissue Center remaining dates for 2021 blood drives and the use of the education classroom to do so.**

# **AGENDA ITEM #8**

**Update on Security Risk Assessment –  
Information Only**

## **DEWITT MEDICAL FOUNDATION BOARD OF TRUSTEES MEETING**

The Board of Trustees of the DeWitt Medical Foundation met on Thursday, February 11th at 8:00 a.m. at Cuero Regional Hospital. Some members called in via conference line number.

### **MEMBERS PRESENT**

Holly Hickey, Trustee  
Randall Jochim, Treasurer  
Martin Leske III, President  
Dr. John Frels, Trustee  
Katy Nagel, Trustee  
Sandra Simon, Trustee  
Charles Papacek, Trustee  
Cliff Foulds, Trustee  
Mary Sheppard, Trustee  
Rita Davis, Trustee  
Suzanne Bell, Vice President  
Lynn Falcone, CRH CEO  
Nikki Lantz, Coordinator

### **MEMBERS ABSENT:**

Michael Chavez, Secretary  
Megan Boehl, Trustee  
Greg Freeman, Trustee  
Amanda Freeman, Trustee  
Emily Montgomery, Trustee  
Joe Olive, Trustee  
Lee Ann Solis, Trustee

### **MONTHLY MEETING**

Martin Leske called the meeting to order and opened with a prayer.

### ***Minutes***

Minutes from the January 2021 meeting were presented for approval. Charles Papacek moved that they be approved as presented; seconded by Randy Jochim; motion carried.

### ***Treasurer's Report***

The December 2020 treasurer's report was presented for review by Randall Jochim. Suzanne Bell moved that the Treasurer's Report be accepted as presented; Cliff Foulds seconded; motion carried. Randy reported David Scott will be attending our next meeting to answer any questions the board might have. Martin Leske asked that the investment committee meet in person prior to our next meeting.



### ***Executive Director Report***

Lynn Falcone reported there has been a jump in the census lately. The hospital is working diligently to get vaccines for the community but it has been very challenging. She reported the new Teleendocrinologist starts Friday. They are looking for ICU specialists as well. Lynn reported they have seen an increase in mental health patients especially during the pandemic. They are looking to add security on nights and weekends at the hospital and will be partnering with off duty sheriff's department to assist.

### ***Committee Reports***

*Gala:* Suzanne Bell reported that Katy Nagel, Nikki Lantz, herself and Martin Leske discussed keeping the Gala in April versus postponing it. Although we don't want to postpone, everyone agrees it is in the best interest of the community and our Gala guests to move the date. Martin Leske added that with a lot of our sponsorship funds coming from the older generation who aren't comfortable yet getting out in large groups, as well as the CTHM donor match that is currently underway that could have a negative effect on our donations, we are better off postponing. Suzanne proposed September 25, 2021 as the new Gala date. She mentioned they have checked with entertainment, caterer, bar, tent etc. and everyone has that date open. She also said Katy checked the Longhorn and Texas A&M football schedule and both games are away. Cliff Foulds mentioned we only get one shot at raising money and agrees it is smart to wait. Randy Jochim felt everyone will be much more comfortable gathering in large groups by September. Dr. John Frels said the decision to move the gala is prudent and agrees it is a good decision. Charles Papacek agreed with everyone's comments as well. The board all agreed unanimously to move the Gala date to Saturday, September 25, 2021.

### ***Old Business***

The board continued to discuss having aggregate put down on the gala site at the hospital. Martin Leske reported he and Kenny Schreiber with Dunn Services are going to meet again to look at the tent site and move forward from there.

With no other business, a motion for adjournment was made by Randy Jochim and seconded by Cliff Foulds; motion carried.

Respectfully submitted,

Michael Chavez, Secretary (pending approval)