CONCHO COUNTY HOSPITAL DISTRICT
MEETING MINUTES

STATE OF TEXAS
COUNTY OF CONCHO

I. **Call to Order**
The Concho County Hospital Board of Directors met in Eden, Texas at the Eden Public Library Conference Room on February 23, 2021 at 5:30 PM.

II. **Board of Directors:**

Brent Frazier	President
Leah Brosig	Vice President
Richard Doane	Member
Mary Castanuela	Member
Donna Magill	Member

Others Present:

Brian Lady	CEO
Priscilla Aguirre	Hospital Operations Manager
Melanie Lozano	Finance Manager
Lindee Pyle, BSN, RN	Director of Nursing
Sunny Sifuentes	Laboratory Manager
Lacye Crumpton	PharmD

III. **Open Forum for Public Comment**
There was no comment from the public.

IV.

- **Cancellation of At-Large Election**
The hospital received 3 applications for the 3 at-large positions on the Concho County Hospital District Board of Directors. Ms. Brosig made a motion to cancel the at-large election because the 3 applicants will fill the at-large positions. Mr. Doane seconded the motion, passed 5-0.

- **Approval of January 2021 Board Minutes**
Mrs. Magill pointed out a mistake on page 3 of 4 of the minutes, item G, the number contains an extra zero and should be $1,100. Ms. Brosig made a motion to accept the minutes with the correction of removing the extra zero on $1,100. Mrs. Magill seconded the motion. Motion passed 5-0.

- **Discussion of Pharmacy Policies (L Crumpton, PharmD, T Wells)**
Mr. Frazier asked if the issue Mr. Wells was for the pharmacy to count his prescriptions along side the pharmacy employees. Although on the agenda, Mr. Wells did not attend this meeting. Mrs. Crumpton replied, yes that he wanted the

pharmacy staff to count his pills in front of him. She stated that his issue was with a controlled drug and those are counted at least 3 times. The tech counts them once and they pour it out and count it one more time and they back count the bottle that's opened and write the amount that is left on the bottle and there is also a perpetual inventory in the computer so that every time a drug is dispensed, the computer keeps up with it. In essence, what is written on the bottle and what is in the computer should match. The perpetual inventory was put into place in February 2019. The bottle inventory has been in place since the pharmacy opened. C2 medications have an even tighter control per state board they are kept on the computer and on paper. Narcotics are counted twice by the technician but also once by the pharmacist before it leaves and are initialed by whoever counted them. Mr. Frazier reiterated that Mrs. Crumpton stated there are multiple safe guards in place to make sure what is dispensed is what is in the bottle. Mrs. Castanuela asked if she has ever had any other complaints. Mrs. Crumpton stated that she hasn't had any other complaints on controlled drugs, but there have been times that mistakes were made on legend drugs. The patients have called the pharmacy to bring it to their attention and the inventory was checked and the mistake was found and the patient is given the corrected medication. Ms. Brosig asked if Mrs. Crumpton felt that the pharmacy has done everything to accommodate him. Mrs. Crumpton stated that he has had other issues with this gentleman and has tried to accommodate his needs but not to his satisfaction. She stated that she did tell him that maybe he should find another pharmacy, because him asking for pills to be counted in front of her showed a lack of trust and that is a trust that she requires.

- **Overview of COVID Testing (Sunny Sifuentes)**
  Sunny Sifuentes stated that symptom based testing is done through the drive through. If someone wants to be tested without showing symptoms or exposure, they can go to their physician and obtain an order and can be tested as an outpatient. It is not a federal regulation for the testing to be symptom based. If the testing is not done through the drive through, the results are given to the physician, and they notify the patient of the results. Mrs. Sifuentes went through a time line for testing. In the beginning it took about 2 weeks to get results. The Covid antigen comes in a kit and doesn't need machines to run. The hospital placed it's order in August, but big hospitals were priority and a contract wasn't signed until end of September. The hospital received the first shipment October 7th and started testing inhouse on October 9th. Brady didn't start testing in house until June, before that all Covid test were going to Austin. The drive through testing didn't start until after Thanksgiving. The hospital has about 550 in house tests available. The BioFire will not be here until May or June 2021.

- **Overview of COVID Vaccinations (L Crumpton, PharmD)**
  Mrs. Crumpton stated that there are 2 accounts set up for the Covid Vaccine one for the hospital and one for the pharmacy. This upcoming Friday will be the 1st second round of people. She feels the feedback from this community and other communities has been good. The process is going well, setting up and doing 20 patients at a time. Today 300 doses were received with 100 of those doses being allocated to those ready for their 2nd dose. Mr. Doane asked if there was a difference in the 1st and 2nd doses. Mrs. Crumpton replied that they are exactly the same. She stated they carry the Moderna vaccine because of the storage requirements. Mrs. Castanuela asked if they

were having trouble getting people signed up, and Mrs. Crumpton replied that 210 doses were given just by word of mouth. Mrs. Crumpton stated that the hospital is listed on the website (vaccinefinder.org) and people can look up where to find the vaccine in a radius. The website is updated on a daily basis.

V. **Business Items**

A. Monthly Performance Improvements/QA Monitors

Mrs. Pyle stated that all QA looks good for January. Nursing is monitoring pre and post neb treatment documentation still. For January, 41.67% were correctly documented. Another item being monitored is insulin injection site not being documented. January had 15 doses of insulin given and 5 without the injection site. This will be continued to be monitored for 3 months. There were no nosocomial injections for the month. Mrs. Pyle informed the Board that 2 patient surveys were returned for the month and both spoke positively of their stay in the ER.

B. Billing & Revenue Cycle Management

Mrs. Aguirre went over the admission and aging reports for the month on January. She informed the Board that some of the CCA claims have been paid and the balance over 120 days has come down some. With no questions the Board moved on to the next agenda item.

C. Financial Statement and Accounts Payable for Jan 2021

Mrs. Lozano went over the financial summary. She stated that January wasn't a very good month for cash collections mostly because of the lack of patient days the month before. This resulted in expenses exceeding cash for the month of January. She then told the Board that the hospital showed an operating loss of $310,410 for the month, but $355,609 of non operating revenue was received and resulted in a net profit of $38,427.

D. Staff Appointments

There were no staff appointments needing approval.

E. Approval of Policies

There were no policies needing approval.

F. Approval of Additional user Licenses/Equipment for Contact Tracing

Mr. Lady is negotiating the price on the quote for the IT side of things and asked the Board to table this item until next month.

G. Approval of Signage at CMC East

Mr. Lady explained that the building that the hospital took over from Frontera is being called CMC East. He stated that 2 signs are needed on the front of the building and by the street. Ms. Brosig made a motion to allocate $20,000 to Titan Signs for the 2 proposed signs for CMC East. Mrs. Castanuela seconded, passed 5-0.

VI. **Administrator's Report**

- Mr. Lady informed the Board that hazard pay is being paid to employees instead retention pay. He went over items the hospital has purchased using the Covid money: robots, UV lights, contact tracing and equipment for the negative air pressure room. Weekly huddles are being done at shift change between Dr. Papillion and nursing staff. A consultant has been contracted to assist with compliance of the Director of Nursing duties.

VII. **Executive Session**

The Board went into Executive Session at 6:26pm.

VIII. **Action from Executive Session**

The Board came out of Executive Session at 6:47pm with no action being taken.

IX. **Adjournment**

Mrs. Magill made a motion to adjourn the meeting at 6:48pm. Mr. Doane seconded the motion, with everyone in favor.

BT J _____ Date 4/27/2021