

Board of Trustees

May 19, 2025

A meeting of the Board of Trustees of Crawford County Memorial Hospital was held on Monday, May 19, 2025, in Hospital Board Room D at Crawford County Memorial Hospital, Denison, Iowa.

Present on site during the meeting were Jay Mendlik, David Reisz, Vernon Sid Leise, Jon Schuttinga, Amy Schultz, Theresa Sheer (CNO), Heather Rasmussen (Chief Quality Officer), Rachel Melby (CFO), Erin Muck (CEO), Dr. Michael Luft (Chief Medical Officer arrived at 5:32 and left at 6:09) and Heather Wight (Recorder). Also in attendance was Bob Fink (Director of Plant Operations left at 5:59). Not in attendance was Dr. David Wright (Chief of Staff).

CALL TO ORDER: The Board of Trustees meeting was called to order at 5:30 p.m. by Mendlik.

APPROVAL OF MINUTES

A motion was made by Reisz, second by Schuttinga, to approve the April 28, 2025, minutes as presented. Motion carried unanimously.

QUALITY CARE AND SERVICES

Quality Committee Report

- Rasmussen gave a brief update of the Quality Committee activities including sharing March HCHAPS scores and noted that the lab department's overall score rated in the 93%tile for the month.
- Recommend Board action regarding Medical Staff Accountable Care Committee recommendations for approval of Medical Staff privileges and appointment/re-appointment applications.

Medical Staff Report

Rasmussen shared that standards of care meetings were held. Theresa is actively working with Horn Memorial regarding Cerner workflow issues and will continue to meet as needed.

PATIENT EXPERIENCE

5-Star Journey Update

Muck shared the 5 Star calendar for June and July. It was decided at the SEC meeting that since we are no longer participating with CLS, that we would update the acronyms used to more plain language to help with confusion such as renaming the SEC (Service Excellence Council) to Patient Experience Committee and SEA (Service Excellence Advisor) to 5 Star Trainer.

PEOPLE

Credentialing

A motion was made by Schuttinga, second by Schultz, to approve Medical Staff new appointments of Carver, Eveloff, Kumari, Lewis and Walker and the reappointment of Carlson and Linde. Motion carried unanimously.

Mission Committee Report

The updated accountability dashboard was reviewed, highlighting key developments across several areas. In patient experience, the updated 5-Star Journey Plan calendar for summer activities, including SEA training and graduation, was shared. On the growth front, hospital procedures increased by 1.23% from

Board of Trustees

May 19, 2025

last April, with significant gains in ER, radiology, lab, pulmonary rehab, and cardiac rehab, though surgical procedures and clinic visits declined. Strategic planning session insights were also reviewed. Financially, the \$5.19 million redemption of the 2020C bonds, approved in January, will be completed on May 30th, reducing days cash by approximately 45 days. Finally, an update from the AHA Annual Meeting in Washington, D.C., provided important context on pending legislative impacts on healthcare and Medicaid.

GROWTH

Department Reports

Plant Operations: EVS & Maintenance

The Maintenance Department is actively engaged in spring lawn and landscaping work, supporting the construction project through coordination of shutdowns, HVAC tasks, and electrical layout planning, while also conducting pre-summer preventative maintenance on the cooling system. The EVS team is fully staffed and performing strongly, as reflected in high Press Ganey scores, bolstered by the addition of a second morning shift worker. Notably, EVS completed 188 (March) and 202 (April) Care Say rounding sessions, which have positively impacted survey results. Quality initiatives underway include quarterly Legionella testing, development of a Barrier Protection Plan to meet new fire safety requirements, and monthly ATP testing in selected hospital areas to monitor cleanliness. Additionally, biweekly ICRA (Infection Control Risk Assessment) inspections are being conducted in collaboration with Heather R. to mitigate infection risks from construction activities.

CEO Report

Muck shared that over the past year and a half, the BioVigil Hand Hygiene System has led to significant improvements in infection control and staff health, with plans to expand its use after Phase II. Patient experience initiatives include moving away from acronyms to enhance staff understanding and launching three Organizational Improvement projects aligned with quality goals. A new safety project is also underway to address workplace violence, based on employee feedback. June features several key events, including 5-Star Trainer graduation and employee forums to discuss upcoming building changes. Hospital Week and other appreciation events recognized staff contributions, and eight new interns will begin this summer. Growth efforts include finalizing a strategic plan and progressing with clinic construction, aiming for an August opening for the rehab services department. On the advocacy front, Muck attended the AHA Annual Meeting to address potential Medicaid cuts and their impact on Iowa hospitals, continuing to engage lawmakers for support.

FINANCIAL STABILITY

Finance Committee Report

1. Total Payroll & Accounts Payable of \$3,551,156.08 for payment.

A motion was made by Reisz, second by Schultz, to approve the financial report, total payroll, and accounts payables in the amount of \$3,551,156.08. Motion carried unanimously.

COMMUNITY

Board Chair Comments

Mendlik stated that there is nothing too out of the ordinary to report but we need to make sure we don't get too complacent with the Medicaid DPP funds as we don't know if they will be available next year.

Board of Trustees

May 19, 2025

We've been making good choices and improvements, and we are looking forward to seeing them come to fruition.

EXECUTIVE SESSION PURSUANT TO IOWA CODE

Section 21.5 (1)(I) To discuss marketing and pricing strategies and proprietary information where public disclosure of such information would harm the hospital's competitive position. Open Session – Possible Action

The Board went into Closed Session at 6:09 p.m. with a motion made by Schuttinga, second by Leise. Motion carried unanimously. Members present during the closed session were Jay Mendlik, David Reisz, Vernon Sid Leise, Jon Schuttinga, Amy Schultz, Theresa Sheer (CNO), Heather Rasmussen (Chief Quality Officer), Rachel Melby (CFO), Erin Muck (CEO), and Heather Wight (recorder).

A summary from strategic planning brainstorming session which included discussions of service lines, financials, reimbursement challenges, and physician/staff recruitment were discussed.

A motion was made at 6:55 p.m. by Leise, second by Schultz, to return the Board to Open Session. Motion carried unanimously.

No action was taken.

ADJOURNMENT

A motion was made by Leise, second by Reisz, that the meeting be adjourned at 6:56 p.m. Motion carried unanimously.