MINUTES OF A REGULAR MEETING OF THE BOARD OF DIRECTORS MONTGOMERY COUNTY HOSPITAL DISTRICT

The regular meeting of the Board of Directors of Montgomery County Hospital District was duly convened at 4:00 p.m., January 23, 2018 in the Administrative offices of the Montgomery County Hospital District, 1400 South Loop 336 West, Conroe, Montgomery County, Texas.

1. Call to Order

Meeting called to order at 4:00 p.m.

2. Invocation

Led by Mr. Spratt

3. Pledge of Allegiance

Led by Mr. Grice

4. Roll Call

Present:

Bob Bagley

Chris Grice

Mark Cole

Kenn Fawn

Sandy Wagner

Brad Spratt

Georgette Whatley

5. Public Comment

Dr. Mark Feanny, CEO of Americas ER made a public comment to the board.

6. Special Recognition:

January

Non-Field -Nivea Wheat

EMS Survey Plaque presented for MCHD #1 among Large EMS Providers in EMS Field -Customer Service for years, 2015, 2016 and 2017.

7. Texas Mutual presentation of 2017 Platinum Safety Award. (Mr. Grice, Treasurer -MCHD Board)

Ms. Cynthia Villarreal, Safety Consultant with Texas Mutual Insurance recognized and presented MCHD with the 2017 Platinum Safety Partner Award. This award goes to the top 200 of Texas Mutual policy holders and they have about 46,000, which says a lot about MCHD's safety and risk management.

8. CEO Report to include update on District operations, strategic plan, capital purchases, employee issues and benefits, transition plans and other healthcare matters, grants and any other related district matters. (attached)

Mrs. Melissa Miller, COO presented report to the board.

9. Presentation on the after action review for Hurricane Harvey. (Mr. Fawn, Chairman – MCHD Board) (attached)

Mrs. Shawn Henners presented the after action review for Hurricane Harvey to the board.

10. Presentation of Quarterly Employee Turnover Report. (Ms. Whatley, Chair – Personnel Committee)

Mrs. Melissa Miller, COO presented the Quarterly Employee Turnover Report to the board.

11. Consider and take action on the annual election of Board officers. (Mr. Fawn, Chairman – MCHD Board)

Mr. Cole made a motion to nominate Mr. Fawn for Chairman of the board. Mr. Grice offered a second and motion passed. Mr. Bagley abstained from vote

Mr. Fawn made a motion to nominate Mr. Cole for Vice Chairman of the board. Ms. Whatley offered a second and motion passed. Mr. Cole abstained from vote

Mr. Fawn made a motion to nominate Mr. Grice for Treasurer of the board. Mr. Cole offered a second and motion passed. Mr. Grice abstained from vote.

Mr. Fawn made a motion to nominate Mrs. Wagner for Secretary of the board. Ms. Whatley offered and second and motion passed unanimously.

12. EMS Director Report to include updates on EMS staffing, performance measures, staff activities, patient concerns, transport destinations and fleet.

Mr. Jared Cosper, EMS Director presented a report to the board.

13. Presentation of EMS Quality Core Measures. (attached)

Mr. Jared Cosper provided a copy of EMS Quality Core Measures to the board and advised the Department of Clinical group would answer any questions at the next month's board meeting.

14. COO Report to include updates on infrastructure, facilities, radio system, warehousing, staff activities, community paramedicine, emergency management, and purchasing.

Mrs. Melissa Miller, COO presented a report to the board.

15. Consider and act on approval of purchasing Interlocal agreement with the City of Conroe. (Mr. Cole, Chair - PADCOM Committee) (attached)

Mr. Cole made a motion to consider and act on approval of purchasing Interlocal agreement with the City of Conroe. Ms. Whatley offered a second and motion passed unanimously.

16. Health Care Services Report to include regulatory update, outreach, eligibility, service, utilization, community education, clinical services, epidemiology, and emergency preparedness.

Mrs. Ade Moronkeji, HCAP Manager presented a report to the board.

17. Consider and act on Healthcare Assistance Program claims from Non-Medicaid 1115 Waiver providers processed by Boon-Chapman. (Mrs. Wagner, Chair - Indigent Care Committee)

Mrs. Wagner made a motion to consider and act on Healthcare Assistance Program claims from Non-Medicaid 1115 Waiver providers processed by Boon-Chapman. Ms. Whatley offered a second and motion passed unanimously.

18. Consider and act on ratification of voluntary contributions to the Medicaid 1115 Waiver program of Healthcare Assistance Program claims processed by Boon Chapman. (Mrs. Wagner, Chair – Indigent Care Committee)

Mrs. Wagner made a motion to consider and act on ratification of voluntary contributions to the Medicaid 1115 Waiver program of Healthcare Assistance Program claims processed by Boon Chapman. Ms. Whatley offered a second and motion passed unanimously.

19. Presentation of preliminary Financial Report for three month ended December 31, 2017 – Brett Allen, CFO, report to include Financial Summary, Financial Statements, Supplemental EMS Billing Information, and Supplemental Schedules.

Mr. Brett Allen, CFO presented financial report to the board.

20. Presentation of Investment Report for the quarter ended December 31, 2017.

Mr. Brett Allen, CFO presented Investment report to the board.

21. Consider and act on the recommendation to re-classify funds from the Committed – Capital Maintenance account to the Unassigned Fund Balance-MCHD account for the purchase of the HVAC system for the MDF/IT server room. (Mr. Grice, Treasurer - MCHD Board)

Mr. Grice made a motion to consider and act on the recommendation to re-classify funds from the Committed – Capital Maintenance account to the Unassigned Fund Balance-MCHD account for the purchase of the HVAC system for the MDF/IT server room. Mr. Fawn offered second and motion passed unanimously.

22. Consider and act upon recommendation for amendment(s) to the budget for fiscal year ending September 30, 2018. (Mr. Grice, Treasurer - MCHD Board) (attached)

Mr. Grice made a motion to consider and act upon recommendation for amendment(s) to the budget for fiscal year ending September 30, 2018. Mr. Cole offered a second and motion passed unanimously

23. Consider and act on ratification of payment of District invoices. (Mr. Grice, Treasurer - MCHD Board)

Mr. Grice made a motion to consider and act on ratification of payment of District invoices. Ms. Whatley offered a second and motion passed unanimously.

24. Consider and act on salvage and surplus. (Mr. Grice, Treasurer – MCHD Board) (attached)

Mr. Grice made a motion to consider and act on salvage and surplus as listed. Mr. Fawn offered a second and motion passed unanimously.

25. Secretary's Report - Consider and act on minutes for the December 5, 2017 Regular BOD meeting. (Mrs. Wagner, Secretary - MCHD Board)

Mrs. Wagner made a motion to consider and act on minutes for the December 5, 2017 Regular BOD Meeting. Mr. Fawn offered a second and motion passed. Ms. Whatley abstained from vote due to not being in attendance.

26. Adjourn

Meeting adjourned at 4:25 p.m.

Sandy Wagner, Secretary

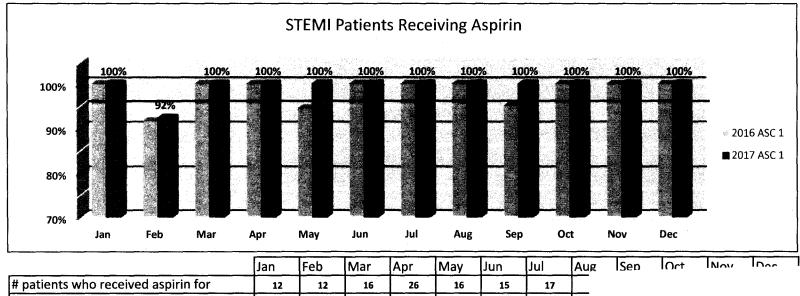


Montgomery County Hospital District
Board of Directors - Public Meeting
Request for Appearance

Speaker's Name	MARIL FERNNY
Address	
Representing Self	Group or Organization Name of Group (of 25 or more)
	FOR MCHD USE ONLY
Date of Meeting	Subject STOUPINGS
Program	
Presiding Officer	
	The state of the s

Indicator Name: Aspirin administration for STEMI patients **Objective**: An increase in the rate in terms of percentage

Goal: 95%

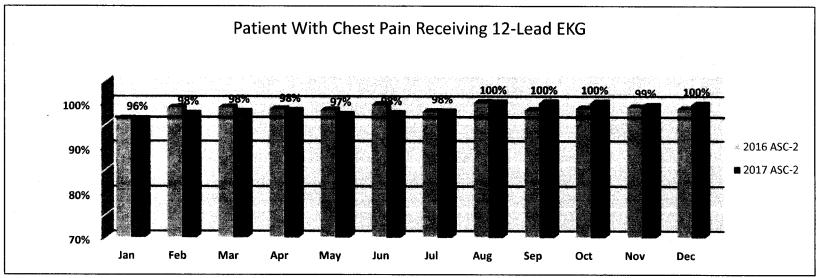


patients who received aspirin for 12 12 16 26 16 15 17 # of patients who had suspected STEMI 12 13 16 26 16 15 17 100% 92% 100% 100% 100% 100% 100%

Measure Set: Acute Coronary Syndrome Indicator Name: 12 Lead EKG Performance

Objective: An increase in the rate in terms of percentage.

Goal: 95%

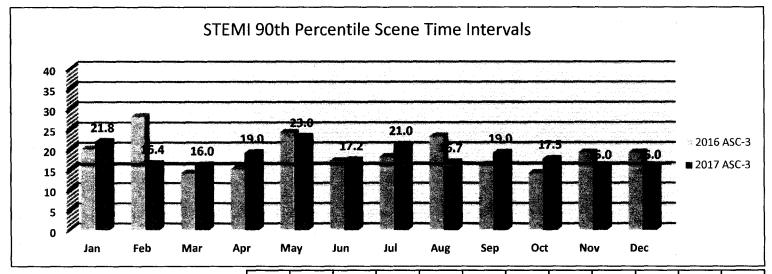


·	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
# patients with chest pain/discomfort										<u> </u>		
suggestive of AMI that received 12 lead											Ì	
EKG	260	314	288	324	217	236	284	95	224	288	273	256
# of patients who had cardiac chest												
pain/discomfort suggestive of AMI	270	322	294	330	223	242	290	95	224	288	275	257
Percentage of patients who received 12 lead EKG for cardiac chest												
pain/discomfort suggestive of AMI	96%	98%	98%	98%	97%	98%	98%	100%	100%	100%	99%	100%

Indicator Name: Scene time for suspected STEMI

Objective: Improve scene times over time

Goal: 15 minutes

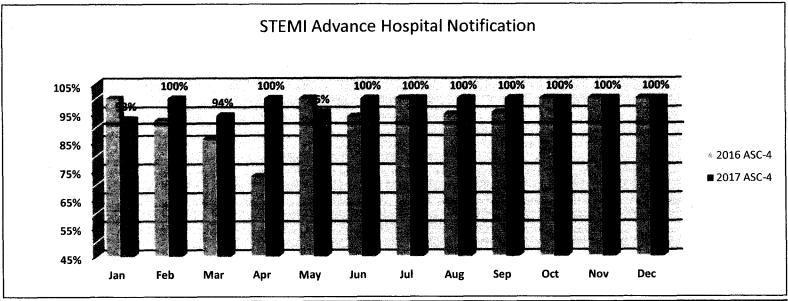


Mar May Oct Nov Jan Feb Apr Jun Jul Aug Sep Dec 90th percentile time interval in minutes (90% of the scene times are less than the presented value) 21.8 16.4 16.0 19.0 23.0 17.2 21.0 16.7 19.0 17.5 15.0 15.0

H

Indicator Name: Advanced Hospital STEMI Notification

Objective/Goal: 90%

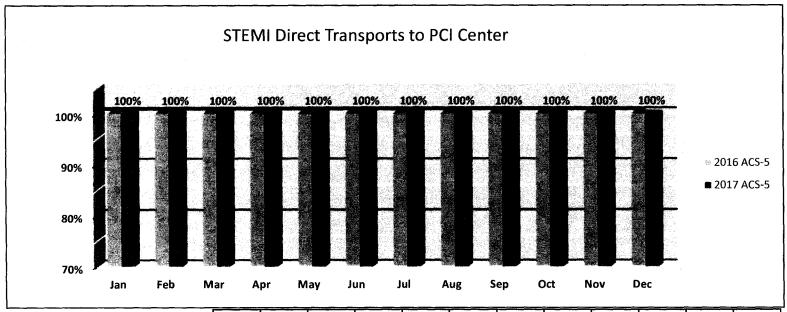


	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
# advanced hospital notification for patients with impression of suspected STEMI	13	13	16	26	20	15	20	14	18	15	8	7
# of patients with impression of suspected STEMI	14	13	17	26	21	15	20	14	18	15	8	7
Percentage of patients with suspected STEMI that had advanced hospital notification	93%	100%	94%	100%	95%	100%	100%	100%	100%	100%	100%	100%

Indicator Name: Direct Transport to PCI center for suspected STEMI patients.

Objective: An increase in the rate in terms of percentage.

Goal: 100%



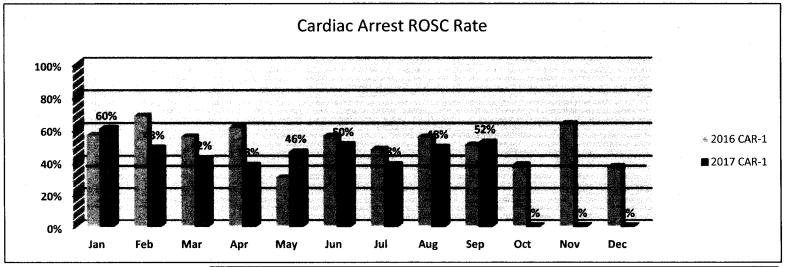
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
# Direct transport to PCI Center												
for patients with impression of	14	13	17	26	21	15	20	14	18	15	8	7
# of patients with impression of												
suspected STEMI	14	13	17	26	21	15	20	14	18	15	8	7
Percentage of patients with			1									
suspected STEMI that had direct	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Measure Set: Cardiac Arrests

Indicator Name: Cardiac Arrests with ROSC

Objective: An increase in the rate in terms of percentage

Goal: 35%



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
# cardiac arrest patients with												
ROSC	18	12	15	9	16	14	14	15	17	o	0	0
# of patients who had cardiac												
arrest with resuscitation				1								
attempted	30	25	36	24	35	28	37	31	33	0	0	0
Percentage of cardiac arrest												
patients with ROSC	60%	48%	42%	38%	46%	50%	38%	48%	52%	#####	#####	#####

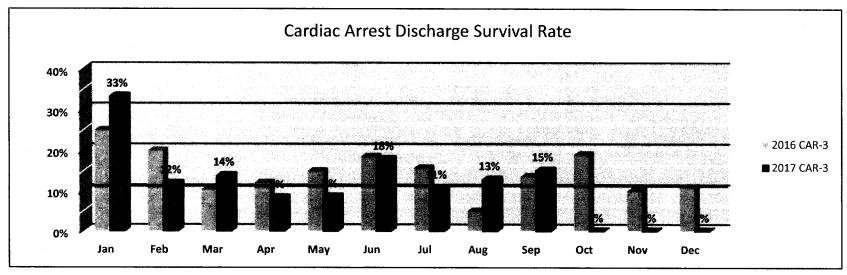
^{*}Cardiac Arrest Metrics are reported 3 months behind due to pending outcomes

Measure Set: Cardiac Arrests

Indicator Name: Cardiac Arrests Survival to Hospital Discharge

Objective: An increase in the rate in terms of percentage

Goal: 10%



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
# cardiac arrest patients who survive to												
hospital discharge	10	3	5	2	3	5	4	4	5	0	0	0
# of patients who had cardiac arrest and												
resucitation attempted	30	25	36	24	35	28	37	31	33	0	0	0
Percentage of cardiac arrest patients who												
survived to hospital discharge	33%	12%	14%	8%	9%	18%	11%	13%	15%	#####	#####	####

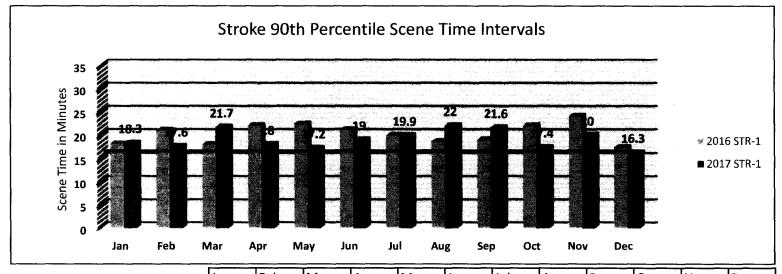
^{*}Cardiac Arrest Metrics are reported 3 months behind due to pending outcomes

Measure Set: Stroke

Indicator Name: Scene time for suspected stroke

Objective: Improve scene times over time

Goal: 15 minutes



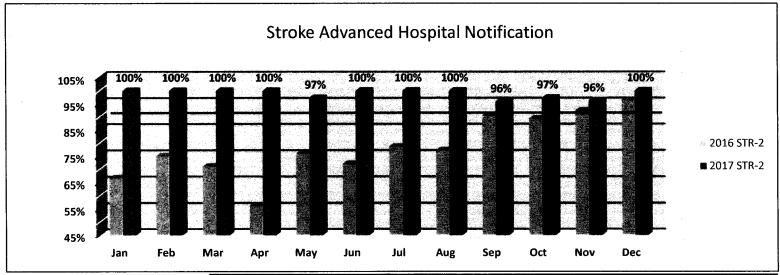
	ĮJan –	[Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
90th percentile time interval in												
minutes (90% of the scene			ļ	ļ.					1		ļ	
times are less than the										ľ	ŧ	
presented value)	18.3	17.6	21.7	18	17.2	19	19.9	22	21.6	17.4	20	16.3

Measure Set: Stroke

Indicator Name: Advanced Hospital Notification for Suspected Stroke

Objective: Improve percentage over time

Goal: 90%



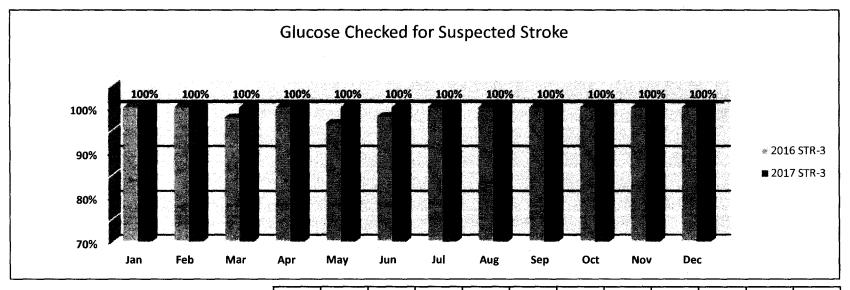
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
# of advanced hospital notification for suspected stroke	20	25	34	AG	26	22	20	10	22	26	35	20
# of suspected strokes	28	25 25	34 34	46 46	36 37	32 32	28	19 19	23	36 37	25 26	28
Percentage of advanced hospital notidfcations for suspected												
stroke	100%	100%	100%	100%	97%	100%	100%	100%	96%	97%	96%	100%

Measure Set: Stroke

Indicator Name: Glucose Testing for Suspected Stroke

Objective: Improve percentage over time

Goal: 100%



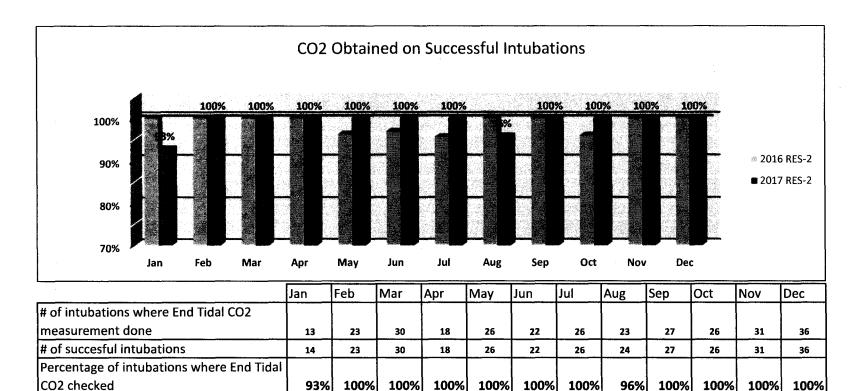
	_Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
# of glucose tests for suspected stroke	20	25	34	40	2-			40	24			
# of glucose tests for suspected stroke	28	25	34	46	37	32	28	19	24	37	26	28
# of suspected strokes	28	25	34	46	37	32	28	19	24	37	26	28
]				1						
Percentage of patients with suspected									<u>.</u>			
stroke that had glucose tested	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Measure Set: Respiratory

Indicator Name: End Tidal CO2 on all successful intubations

Objective: Improve percentage over time

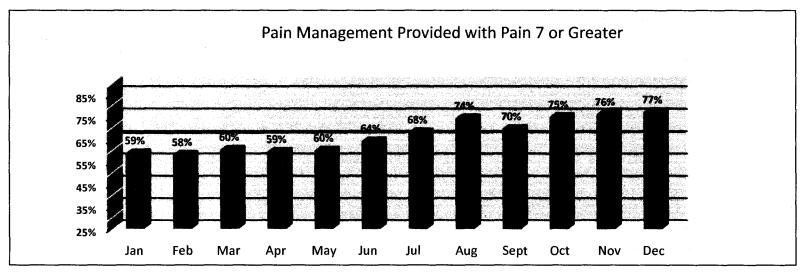
Goal: 99%



Measure Set: Pain Intervention **Indicator Name**: Pain Intervention

Objective: Improve percentage over time

Goal: 65%



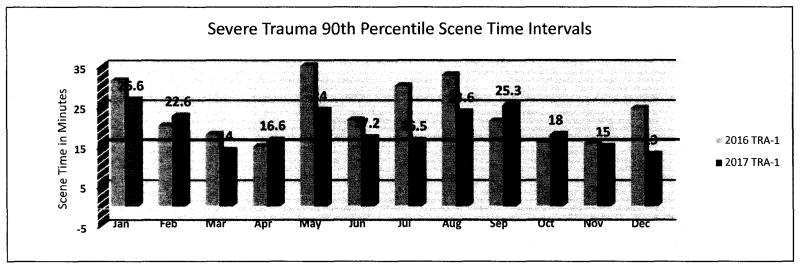
	Jan	Feb	Mar	Apr	May	Jun	lut	Aug	Sep	Oct	Nov	Dec
# of patient who received pain												
management	321	324	336	301	345	339	341	377	447	485	492	439
# of patients pain 7 or greater	545	557	556	506	575	528	501	507	642	647	646	569
Percentage of pain managed	59%	58%	60%	59%	60%	64%	68%	74%	70%	75%	76%	77%

Measure Set: Trauma

Indicator Name: 90th Percentile scene time for trauma patient

Objective: Improve scene times over time

Goal: 15 minutes



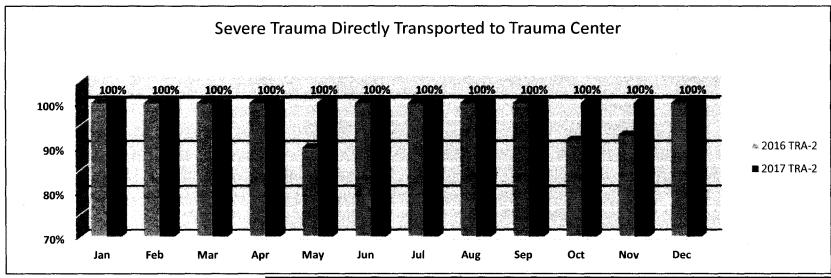
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
90th percentile time interval in										1		
minutes (90% of the scene times are										-		
less than the presented value)	26.6	22.6	14	16.6	24	17.2	16.5	23.6	25.3	18	15	13

Measure Set: Trauma

Indicator Name: Direct Transport to Trauma Center

Objective: Improve percentage over time

Goal: 100%



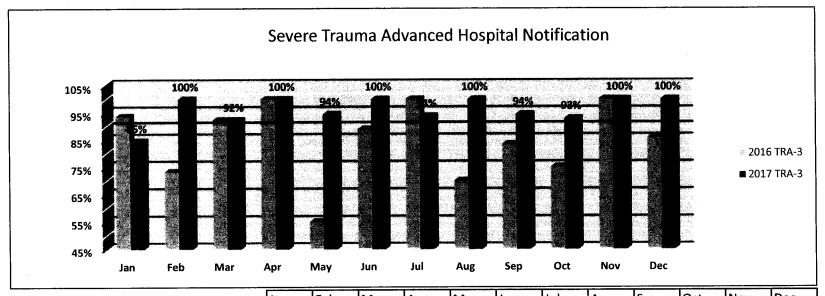
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
# of trauma patients meeting trauma criteria that were transported directly to a												
trauma center	13	9	13	9	18	10	16	9	18	14	11	14
# of trauma patients meeting trauma criteria for transport from the scene	13	9	13	9	18	10	16	9	18	14	11	14
Percentage of trauma patients transported directly to a trauma center	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Measure Set: Trauma

Indicator Name: Advance Notification to Trauma Center

Objective: Improve percentage over time

Goal: 90%



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
# of trauma patients meeting trauma criteria that had advance notification to												
trauma center	11	9	12	9	17	10	15	9	17	13	11	14
# of trauma patients meeting trauma												
criteria for transport from the scene	13	9	13	9	18	10	16	9	18	14	11	14
Percentage of trauma patients that had advance notification to the trauma center	85%	100%	92%	100%	94%	100%	94%	100%	94%	93%	100%	100%

AGENDA ITEM: 22

CONSIDER AND ACT UPON RECOMMENDATIONS FOR AMENDMENTS TO BUDGET FOR FISCAL YEAR ENDING SEPTEMBER 30, 2018

BUDGET AMENDMENT - SEPTEMBER 30, 2018

THAT WHEREAS, therefore on September 12, 2017 the Board heard and approved the budget for the year 2017/2018 for the benefit of Montgomery County Hospital District; and

WHEREAS, to meet unusual and unforeseen conditions, which could not by reasonable and diligent thought and attention, have been included in the budget for 2017/18 adopted on September 12, 2017, or a line item transfer has been requested with no impact on the original budget, or a line item transfer has been requested with a positive impact on the original budget; and

WHEREAS, the Board by and through this budget amendment intends to reflect the funding provided and expenses incurred as a result of its operation and management of the Montgomery County Hospital District for the year 2017/2018 pursuant to its contractual responsibilities therefore.

NOW, THEREFORE, BE IT RESOLVED	that upon motion of <u>UR. GRICE</u>	, seconded
by MR. Cole	and duly carried by the following vote: AYES:	NAYS:
the following amendment(s) to said budge	et is/are hereby authorized:	

			FY 2018	FY 2018	Increase / (Decrease) Net Revenue	
	Account	Account	Annual	Amended	Over	
Line	Number	Description	Budget	Budget	Expenses	
1	10-001-54350	Employee Health & Wellness-Admin	1,500.00	0.00	(1,500.00	
2	10-004-57100	Professional Fees-Radio	400,583.25	375,840.25	(24,743.00	
3	10-005-51100	Regular Pay-Accounting	278,897.00	322,814.00	43,917.00	
4	10-005-51200	Overtime Pay-Accounting	7,600.00	8,660.00	1,060.00	
5	10-005-51300	Paid Time Off-Accounting	24,000.00	26,463.00	2,463.00	
6	10-005-51400	Stipend Pay-Accounting	0.00	1,030.00	1,030.0	
7	10-005-51500	Payroll Taxes-Accounting	23,751.00	27,464.00	3,713.00	
8	10-005-51650	TCDRS Plan-Accounting	21,101.00	24,398.00	3,297.00	
9	10-005-51700	Health & Dental-Accounting	12,846.00	12,960.00	114.0	
10	10-007-58700	Uniforms-EMS	0.00	218,500.00	218,500.0	
11	10-008-51100	Regular Pay-Materials Management	334,180.00	212,352.00	(121,828.00	
12	10-008-51200	Overtime Pay-Materials Management	8,665.00	6,487.00	(2,178.00	
13	10-008-51300	Paid Time Off-Materials Management	40,800.00	32,401.00	(8,399.00	
14	10-008-51400	Stipend Pay-Materials Management	1,199.00	169.00	(1,030.00	
15	10-008-51500	Payroll Taxes-Materials Management	29,441.00	23,356.00	(6,085.00	
16	10-008-51650	TCDRS Plan-Materials Management	26,159.00	20,749.00	(5,410.00	
17	10-008-51700	Health & Dental-Materials Management	16,512.00	14,424.00	(2,088.00	
18	10-008-53900	Disposable Medical Supplies-Materials Management	1,237,435.28	1,159,087.28	(78,348.00	
19	10-008-54000	Drug Supplies-Materials Management	171,934.78	45,656.27	(126,278.5	
20	10-008-54200	Durable Medical Equipment-Materials Management	551,978.00	96,279.71	(455,698.29	
21	10-008-58700	Uniforms-Materials Management	285,714.95	67,214.95	(218,500.00	
22	10-009-51100	Regular Pay-Clinical	950,083.00	988,996.00	38,913.0	
23	10-009-51200	Overtime Pay-Clinical	21,364.00	23,003.00	1,639.0	
24	10-009-51300	Paid Time Off-Clinical	21,100.00	25,910.00	4,810.0	
25	10-009-51500	Payroll Taxes-Clinical	68,094.00	71,562.00	3,468.0	
26	10-009-51650	TCDRS Plan-Clinical	64,061.00	67,146.00	3,085.0	
27	10-009-51700	Health & Dental-Clinical	24,642.00	25,686.00	1,044.0	
28	10-009-54000	Drug Supplies-Clinical	38,125.00	164,403.51	126,278.5	
29	10-009-54200	Durable Medical Equipment-Clinical	15,000.00	470,698.29	455,698.2	
30	10-015-53050	Computer Software-Information Technology	644,657.07	620,657.07	(24,000.00	

AGENDA ITEM: 22 CONSIDER AND ACT UPON RECOMMENDATIONS FOR AMENDMENTS TO BUDGET FOR FISCAL YEAR ENDING SEPTEMBER 30, 2018

1				İ	
31	10-016-52754	Capital Purchases-Equipment-Facilities	361,000.00	284,000.00	(77,000.00)
32	10-025-51100	Regular Pay-Human Resources	246,801.00	231,921.00	(14,880.00)
33	10-025-51200	Overtime Pay-Human Resources	3,431.00	2,910.00	(521.00)
34	10-025-51300	Paid Time Off-Human Resources	9,500.00	10,626.00	1,126.00
35	10-025-51500	Payroll Taxes-Human Resources	19,875.00	18,779.00	(1,096.00)
36	10-025-51650	TCDRS Plan-Human Resources	17,662.00	16,690.00	(972.00)
37	10-025-51700	Health & Dental-Human Resources	10,758.00	11,688.00	930.00
38	10-025-59350	Worker's Compensation Insurance-Human Resources	605,165.00	528,165.00	(77,000.00)
39	10-040-52725	Capital Lease Expense-Buildings	0.00	457,611.00	457,611.00
40	10-040-55025	Interest Expense-Buildings	0.00	28,858.00	28,858.00
41	10-043-53050	Computer Software-BAU	190,128.00	40,128.00	(150,000.00)
				·	, , , , ,
		Subtotal - Expenses	6,785,743.33	6,785,743.33	0.00
1					
İ		Increase / (Decrease) Net Revenue over Expenses			0.00
1					5.55
		FY 2018 Annual Budget Change in Fund Balance			(3,562,680.00)
					(=,===,===,==,==,
		FY 2018 Amended Budget Change in Fund Balance			(3,562,680.00)
					, ,, , , , , , , , , , , , , , , , , , ,
L					

BUDGET AMENDMENT - SEPTEMBER 30, 2018

BOARD MEETING DATE: January 23, 2018

APPROVED BY:

Kenn Fawn, Chairman

Mark Cole, Vice-Chairman

Chris Grice, Treasurer

Sandy Wagner, Secretary

Brad Spratt, Member

Georgette Whatley, Member

Bob Bagley, Member