

MT. GRAHAM REGIONAL MEDICAL CENTER
Safford, Arizona

Board of Directors ~ MINUTES

Tuesday, September 8, 2020

0700 Hours - Board Room

Presiding: Debbie Watson, Vice Chair

Present:

Board Members

Cindy Bryce, Secretary/Treasurer *Via Phone*
Matthew Sampson, M.D.
Carolyn McCormies
Jean Reynolds
Steve Goodman
Eldon Woodall *Via Phone*
Bruce Stanfield *Via Phone*
Cecil L. Evans *Via Phone*
John Martin *Via Phone*
Susan Jones, M.D. *Via Phone*

Administration Staff

Roland Knox, President & CEO
Keith Bryce, VP & CFO
Eric Neal, VP & CPO
Lori Burress, VP & CNO

Excused:

Caro Gaethje, Chair
David Bryce, D.O.
Kim Mack
Bart J. Carter, M.D.
Tom Johnson

Guest: None

Public: None

Recording Secretary: Christi Allred, Administrative Assistant

A quorum of the Governing Board Present; Notice Posted 9/3/20

Call to Order and Welcome – The meeting was called to order at 7:00a.m., by Debbie Watson, Vice-Chair. A roll call of the directors was taken and a quorum was established.

Public Input-None.

Board Committee Report-

Board of Directors Minutes: August 11, 2020.

ACTION: Steve Goodman made the motion to approve the minutes of the August 11, 2020 Board of Directors meeting. Motion was seconded by Carolyn McCormies. A roll call vote was called; Motion passed unanimously.

Finance Committee Meeting Minutes: August 25, 2020

ACTION: Carolyn McCormies made the motion to approve the minutes of the August 11, 2020 Board of Directors meeting. Motion was seconded by Steve Goodman. A roll call vote was called; Motion passed unanimously

Executive Session regarding personnel matters and pending or contemplated litigation

ACTION: Jean Reynolds made the motion to enter Executive Session. Motion was seconded by Carolyn McCormies. A roll call vote was called; Motion passed unanimously.

Directors entered Executive Session at 7:06a.m.

Directors exited Executive Session at 7:08a.m.

Board Business

ACTION: Jean Reynolds made the motion to approve Margaret Vidales as the Director of Dietary. Motion was seconded by Steve Goodman. A roll call vote was called; Motion passed unanimously.

Lori Ray entered the meeting at 7:12am

Roland Knox reminded Directors that in preparation of the 990 tax form, the Conflict of Interest forms need to be turned into Christi Allred as soon as possible. For those that received a paper copy of the Board Packet the forms are in the packet, if Directors received only an electronic Board Packet forms were mailed. If you have any questions, please contact Ms. Allred.

Reports

District Report – None.

Foundation Report – Golf Tournament scheduled for September.

Auxiliary Report – None.

Education/Information

Roland Knox reviewed the revised Phased Plan for Hospital Operations and Gating Criteria. At this time, MGRMC meets criteria to enter phase 2, even though overall county numbers would not meet the criteria. Data shows that most positive patients are not being tested at the hospital, and are not seeking treatment at our Emergency Department. Mr. Knox stated that if more than 2 weeks have elapsed with evidence of worsening community spread, MGRMC might return to phase 1, with more restrictions.

CEO Report

Roland Knox updated Directors on the 2020 Operational Goals, Clinical Services Goals and

Organizational Projects. Mr. Knox highlighted the following Organizational Projects.

Medical Office Building: Drawings for new suite for Mt. Graham Surgical Associates almost completed. Proposed business plan for Copper Mountain Clinic to move into new building to be presented to the Board of Directors; Pima Heart interested in moving into RHC; provided financial information. Dr. Huish interested in moving into existing MOB; Dr. Elkins considering both properties.

Medical Staff Bylaw: Need to approve current Bylaws in MEC, once Bylaws approved by MEC they will be presented to Board of Directors for approval. This was one of six deficiency found during the recent CMS/ADHS Survey.

Quality Metrics: Quality Metrics and the engagement of the Department Directors, Medical Staff and Board of Directors was another deficiency found during the CMS/ADHS Survey. A discussion held regarding the need for process change and best options for ensuring compliance and reporting at all levels.

Conversion to Critical Access Hospital Status: Application for bed delicensing from 36 to 13 Inpatient Beds on the Medical Surgical Unit approved. Communication and commitment of employees and Medical Staff critical to moving forward. The CAH Conversion task force preparing CAH Application. Review and approval of all MGRMC policies, review and approval of all contracted services and Community Forum are require action from the Board of Directors

Mt. Graham Surgical Associates (MGSA): ADHS notified MGRMC that approval of license application would not be approved until a site inspection/survey completed. At first told clinic not to provide services, but ADHS acknowledges the clinic is essential to general surgical services in the community and will not close clinic at this time. Working with ADHS to complete needed survey.

Policy and Procedure Process: The CMS/ADHS survey found a deficiency with our current process of reviewing and approving policy A policy and procedure Committee formed; all policies will be approved by Policies & Procedures Committee, MEC and Board of Directors.

Contract Management Process: CMS/ADHS found a deficiency with the lack of a master contract list. Process in place to create master list and have Quality, MEC and the Board of Directors approve all policies.

Chairman's report

None at this time.

Adjournment – There being no further business, the meeting adjourned at 7:51a.m.

Respectfully submitted,

Debbie Watson, Vice-Chairman