



Meeting Title:
Meeting Date:
Meeting Time:

Board of Trustees - Clarinda Regional Health Center, Board Room
10/28/2025
5:00 PM

Advancing Exceptional Care

Time	Agenda Item / Topic	Presenter	Discussion	Conclusion / Action	1st	2nd	Responsible Person(s)	Expected Completion Date
17:00	Call to Order	BOT Chairperson	Call meeting to order	Called to Order at 5:00 PM			D Fulk	10/28/2025
17:01	Changes to Agenda	BOT Chairperson	No changes to the agenda	No action required			D Fulk	10/28/2025
17:02	Request for Forum	BOT Chairperson	N/A	N/A			D Fulk	10/28/2025
17:03	Voice of Patient/Employee (Public Comment)	BOT Chairperson	N/A	No Comments presented			D Fulk	10/28/2025
17:03	BOT Education	Brian Green	Education – FY2025 Audit Review Auditors Brian Green and Matt Schwartz presented the FY2025 audit, reporting clean opinions on financial statements and federal awards. They reviewed significant estimates, DPP impacts, revenue cycle performance, and key financial indicators. A difference in internal versus external A/R days calculations was identified, and the Board requested clarification to ensure ongoing accuracy in financial monitoring.	Trustees acknowledged the audit findings and appreciated the clarity of the financial review. No further questions were raised.			D Fulk	10/28/2025
17:30	Consent Agenda	BOT Chairperson	Trustees have reviewed and discussed the items of the consent agenda and no questions were brought forward. Regular Board of Trustees - 9/23/2025 Quality Council Report -No October Meeting Quality Reporting - 10/10/2025 Organizational Scorecard Grievance and Service Recovery Report HQIC Safety Scorecard Compliance Scorecard Chart Review Findings Infection Prevention -9/9/2025 Partners in Exceptional Care (PEC) Board Meeting - 10/14/2025	The Board reviewed all reports included in the consent agenda. Opportunity was provided to discuss trends, concerns, and action plans. A motion was made to approve the consent agenda as presented. Motion was approved unanimously.	Marsh	Boysen	D Fulk	10/28/2025
			Committee Reports presented and Reviewed by BOT Members Medical Staff Report (MEC) - 9/16/2025 Medical Staff Privileges Recommendations Policy Review and Approval (crosswalk): 1.01 - Customer Service 1.02 - Patient Pickup 2.01 - Returned Products 2.03 - Patient Counseling 2.04 - Methamphetamine Precursor Sales 2.07 - Expired Inventory or Returned Products 2.08 - Ordering and Receiving 2.09 - Refrigerator and Freezer Temperature Monitoring 2.09a - Receiving Prescription Orders 2.10 - Pharmacy Staff Ratios 2.12 - Transferring Prescriptions 2.14 - Manual Operations 2.15 - Disaster Preparedness and Recovery 2.16 - Pharmacist Administered Vaccination 2.17 - Adverse Drug Events 2.19 - Product Recall 2.20 - Third Party Transactions Waiting Bin 2.21 - Partial and Completion Fills 2.22 - Hazardous Drug Handling					

2.24 - Duty to Report
2.25 - Dispensing Records and Patient Profiles
2.26 - Pharmacy Delivery
2.27 - Required Notifications
2.28 - CQI and QA
2.30 - HIPAA Patient Privacy
2.32 - Anti-kickback
2.34 - Pharmacist in Charge Responsibilities
3.01 - CS PDMP
3.02 - CS Ordering and Receiving
3.03 - Theft of Controlled Substances
3.04 - Dispensing CII Controlled Substances
3.05 - Dispensing CIII–CV Controlled Substances
3.06 - Controlled Substance Inventory
3.07 - Disposing of Controlled Substances
3.08 - Purchasing and Receiving of CS
3.09 - Opioid Antagonist
3.10 - PMP AWA Rx E
4.03 - Medicare Part D
4.04 - Usual and Customary Charges
5.01 - Bloodborne Pathogen
5.02 - Cleaning Chemical Spills in Pharmacy
5.04 - Displaying Licenses
5.05 - Pharmacy Facilities
5.07 - Required Equipment
6.01 - Authorized Pharmacy Entry
6.02 - Burglary Procedure
6.03 - Key Control
6.04 - Alarm–Security Requirement
Abdominal Ultrasound Preparation Procedure
ABO Rh Typing
Adult Standard IV Infusion Concentration List
Advanced Directives
Advanced Practitioner Annual Trauma Care Evaluation
Alcohol; Immediate Intervention Guideline of Care
Ambulance Operations
Amendment of Protected Health Information (PHI)
Anesthesia Coverage Services Policy
Antepartum Hemorrhage
Appointment Scheduling
Arterial Blood Gas Collection Procedure
Artificial Intelligence Use Policy
BCG Bladder Instillation Procedure
Behavioral Health/Commitment/Suicidal Precaution
BiPap/Non-Invasive Ventilation Procedure
Blood Bank Return and Reissue of Blood
Blood Bank Transferring Blood With Patient
Breath Alcohol Testing
Building Description (VFHC)
Building Maintenance - Painting
Burns-Guideline of Care
CAH Annual Review Policy
Calling for Medical Assistance (Chain of Command)
Carbon Monoxide Diffusing Capacity Procedure
Cardiac Stress Testing (Nuclear and Non-Nuclear) Procedure
Cardiology -Vascular Clinic Procedure

17:30	Committee Reports:	<p> Carpet Cleaning Ceiling Work Permit Cerebral Spinal Fluid Cervical Spine Evaluation, Immobilization and Clearance Chaperone Policy Chemotherapy, Preparation, Administration, and Disposal of Antineoplastic Drugs Chest Physiotherapy (Airway Clearance Therapy) Procedure Chest Tube Insertion Clean Linen Room Cleaning Cleaning Computers Cleaning Doors and Door Jambs Cleaning Emergency Department Cleaning Glass Cleaning Light Fixtures Cleaning Walls and Ceilings Cleaning Waste Containers Clinical Protocols, Guidelines, Procedures & Processes Code Blue Code of Conduct Code Silver - Active Shooter Colposcopy Procedure - Gynecology Clinic Community Acquired Pneumonia: Empiric Antibiotic Selection in Adults Community Acquired Pneumonia: Inpatient Antibiotic Selection in Adults Competency Evaluation Compliance Policy Compressed Gas and Oxygen Use Procedure Concern Process Conservative Sharp Wound Debridement Policy and Procedure Consideration for Early Transfer for Trauma Patients Continuing Education (CE) Offerings Continuous Mechanical Ventilator Monitoring Procedure Contracting Policy Controlled Substance Management CRHC Assessment Of Risk Crisis Leave Critical Results D-Dimer Delivery Out of Hospital Destruction of Health Records Dimension Disclosure of Protected Health Information to Law Enforcement Dismissal of Patient From Hospital Documentation Policy Drug and Alcohol Free Workplace ED Diversion/Trauma Bypass Electrocardiograms (EKG) Procedure Emergency Management Plan Emergency Procedure Tornado (VFHC) Employee Classifications Employee Photographic Consent & Release for Media EMS Infection Control Policy EMS Pharmacy Agreement EMS Working Within the Hospital EMTALA (Transfer & Examination) </p>	<p>Based on the recommendations of the medical staff of CRHC, the Board of Trustees Voted and Approved</p>	Boysen	Clark	D Fulk	45923
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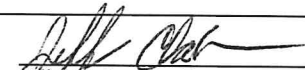
	Environmental Infection Prevention (EVIP) Scope of Services Policy			
	Equipment & Transport Vehicle Cleaning & Disinfection			
	Ergonomic Assessment			
	External Disaster Plan			
	Eyewash Station & Emergency Shower Testing			
	Failure of HVAC Systems			
	Fire Alarm System Monitoring & Testing.			
	Firefighter EMS Rehabilitation			
	Gastrografin Challenge			
	Grafix Application Procedure			
	Handheld Nebulizer Procedure			
	Hazard Medication Safety			
	Hazardous Drug List			
	Hazardous Pharmaceutical Waste			
	Health Eligibility - Active Employees			
	HIPAA EDI, Privacy, & Security			
	Home Respiratory Equipment Procedure			
	Hospital Incident Command System (HICS) Plan			
	Housekeeping - Med Surg			
	Identifying Patient at High Risk for Infection			
	Identifying, Screening, & Notification of Infectious Diseases			
	Inpatient Cardiopulmonary Rehabilitation			
	Insulin Pen Procedure			
	Interfacility Transfer Risk Assessment (IRAT) During Inclement Weather			
	Intravesical Chemotherapy Procedure			
	Isolation Precautions			
	IsoLyser Use			
	IV Push Dilutions and Push Rates			
	KOH Testing			
	Labetalol			
	Leave of Absence-Family Medical & Family Military			
	Legal Evidence-Chain of Custody			
	Licenses and Registration			
	Lidocaine			
	Lockdown Activation/Deactivation			
	LUCAS Device			
	Lumbar Puncture (Spinal Tap), Assisting			
	Maintenance and Repair of Plumbing and Drainage System			
	Manual Differential			
	Meal Breaks & Rest Periods			
	Medical Marijuana			
	Motor Vehicle Risk			
	Neonatal Ventilation Procedure			
	New Privileges			
	NM 3 Phase Bone Procedure			
	NM Gastric Emptying Study Procedure			
	NM General Exams Procedure			
	NM HIDA Procedure			
	NM Liver/Spleen Procedure			
	NM Lung Ventilation/Perfusion VQ Procedure			
	NM Meckel's Diverticulum Procedure			
	NM MUGA Procedure			
	NM Myocardial Perfusion Procedure			
	NM Myocardial Perfusion Rest/Stress Procedure			
	NM Thyroid Procedure			
	Non-Retaliation and Non-Intimidation			

Notice of Privacy Practices for Protected Health Information (PHI)					
Notification of Exposure to Infection Disease to Emergency Care Providers					
On-Call Policy					
Organ, Tissue, and Eye Donation					
Orthopedic Clinic Procedure					
Ostomy Cares Procedure					
Oxygen Delivery by Device Procedure					
Patient Assessment & Rounding					
Patient Family Advisory Council (PFAC) Bylaws					
Pediatric Crash Cart Supply List					
Peg Tube Site Basic Cares					
Pelvic Ultrasound Preparation Procedure					
Performance Appraisal and Performance Ladder					
Pharmacy Contingency Plan for Computer Downtime Procedure					
Physician Medical Director Responsibilities (VFHC)					
Platelet Apheresis (SDP)					
Point of Care INR Testing					
Post-Mortem/Mass Fatality Management Plan					
Power Failure					
Precipitous Delivery					
Preeclampsia & Eclampsia					
Pregnant Personnel					
Preoperative and Postoperative Provision of Care					
Prescribed Injectable Medication Storage and Administration					
Pressure Injury Assessment & Staging					
Promethazine (Phenergan)					
Proton Pump Inhibitor Interchange					
PRP Procedure					
PT/PTT					
Pulmonary Rehabilitation Program Criteria					
Radiation Safety Procedure All Departments					
Rapid HIV Testing					
Rapid Response Team Policy					
Rapid Sequence Intubation (RSI)					
Red Blood Cell Transfusion Guidelines					
Refrigerator and Freezer Temperature Checks and Documentation					
Refusal for Procedure/Treatment: Against Medical Advice (AMA)					
Remote Patient Monitoring					
Safe Haven for Newborns					
Scanning & Removing Documents into the Medical Record					
Scope of Service - Wound Care Department					
Scope of Services - EMS					
Scope of Services - Engineering					
Scope of Services - Human Resources					
Scope of Services - Med/Surg					
Scope of Services - Radiology					
Sedimentation Rate (ESR or SED Rate)					
Sentinel Event					
Sexual Assault Policy					
Social Media, Personal Blogging, and Confidential Information					
Spravato Administration and REMS Procedure					
Standing Protocols for Evaluation and Treatment of Wounds					
Surgical Hand Scrub					
Suspected Brain Death					
Telephone Advice					
Tracheostomy Care & Cleaning Procedure					

			Transitional Care Discharge Planning Transportation and Storage of Clean or Sterile Instruments Procedure Trauma Alert Treating Self or Family Tuberculosis (TB) Exposure Control Plan Umbilical Cord Prolapse UniCel DxH 600 Calibration Unicel DxH 600 Pedilute Samples UniCel DxH 600 Quality Control UniCel DxH 600 Repeatability UniCel DxH 690T Uniform Measure of Nursing Continuing Education Credit Urinary Catheterization and CAUTI Prevention Urine Culture Urology Clinic Procedure USP Cleanroom Suite Troubleshooting Procedure Weapons Workplace Violence Xpert CT/NG Assay Xpert MRSA NxG					
17:40	Financial Report	Em Haffner, CFO and John Byland, CAO	John and Emilee reviewed the monthly financial performance, including revenue variances, clinic growth, strong A/R days, purchased services and pharmacy adjustments, CD investment options, the denied tax abatement request, and delays in DPP payments due to the federal shutdown. The Board evaluated these results within its responsibility for fiscal and operational oversight.	Approved the Financial Report as presented	Whipp	Clark	D Fulk	10/28/2025
17:55	Check Run	Finance Committee Members: Bryon Whipp and Jeff Clark	Check Run: Reviewed without issues.	Upon recommendation from the Finance Committee, the Board acknowledged receipt and review of the check run for the reporting period. No further action was required. The check run was accepted as presented by unanimous consent.	Whipp	Clark		
17:56	Quality Report	Lisa Haffner, VP of Quality, Accreditation & Care Management	Quality reviewed department quality projects for October and reported continued progress on the prescription indication documentation project (22% → 80%), ongoing 100% SDOH screening compliance in inpatient areas, and opportunities to streamline documentation between departments.	Discussion Only, No Action Needed				
17:57	Clinics Report	Amy Roop, Chief Clinics Officer	No Report	Discussion Only, No Action Needed				
17:58	CNO Report	Stacy Pulliam, Chief Nursing Officer	Nursing reported on the mass-casualty drill, ongoing DNV documentation coaching, staffing improvements, and new provider onboarding.	Discussion Only, No Action Needed				
18:05	Operational Report	Tyler Hill, Chief Operating Officer	Tyler reported that the pharmacy project received Fire Marshal occupancy approval and is preparing for Board of Pharmacy inspection. Updated cafeteria remodel renderings are pending, and parking lot redesign concepts are in progress to improve safety and access. The organization completed 261 policy reviews as part of ongoing regulatory compliance and DNV readiness.	Discussion Only, No Action Needed				
18:10	CEO Report	Chuck Nordyke, Chief Executive Officer	Chuck provided an update on organizational initiatives, including advancement of the AI communication platform, facilities updates involving ongoing projects and building considerations, continued provider recruitment efforts, recent environmental safety testing, legislative discussions impacting rural healthcare, and community engagement activities. He also noted the Iowa Hospital Association leadership recognition awarded to Board Chair Dale Fulk.	Discussion Only, No Action Needed				
18:15	Old Business/Action Items	BOT Chairperson	No other business	No action required			D Fulk	10/28/2025
18:15	Announcements:	BOT Chairperson	Next Meeting: 11/25/2025 Next Finance Meeting: 11/18/2025	Information Only			D Fulk	10/28/2025

18:16	Adjournment	BOT Chairperson	Adjournment	Meeting adjourned at approximately 6:25 PM	Clark	Marsh	D Fulk	10/28/2025
Attendance:								
Dale Fulk	Kathy Boysen	Em Haffner	Stacy Pulliam					
Jeff Clark	Chuck Nordyke	Bri McCuen	Dr. Mahoney					
Bryan Whipp	Tyler Hill	Lisa Haffner	Amy Roop					
Robert Marsh	John Byland	Maggie Brown						


Dale Fulk, Chairperson


Jeff Clark, Secretary/Treasurer