

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	8/26/2025
17:01	Changes to Agenda	BOT Chairperson	A motion was made to approve the agenda with the addition of an Infection Prevention report. Motion carried unanimously.	Motioned for Approval	Clark	Boysen	D Fulk	8/26/2025
17:02	Request for Forum	BOT Chairperson	N/A	N/A			D Fulk	8/26/2025
17:03	Voice of Patient/Employee (Public Comment)	BOT Chairperson	N/A	No Comments presented			D Fulk	8/26/2025
17:03	BOT Education	NaTausha Harvey & Jen McCall	<p>Infection Prevention Report – NaTausha Harvey, Infection Prevention Coordinator Reported an 83% reduction in hospital-acquired infections and an 80% reduction in surgical site infections compared to prior fiscal year. Reviewed new policies, education initiatives, antimicrobial resistance reporting, and environmental chemical updates.</p> <p>Community Engagement Report – Jen McCall Presented initiatives in partnerships, health equity, and community trust. Highlighted school programs (backpack food program, bicycle helmet initiative), workplace wellness, AED placements, patient ride/gas card support, and pantry/meal programs.</p>	Trustees acknowledged the report and positive community feedback. No further questions			D Fulk	8/26/2025
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 - 7/22/2025 Quality Council Report -8/4/2025 Quality Reporting - 8/8/2025 Organizational Scorecard Grievance and Service Recovery Report HQIC Safety Scorecard Compliance Scorecard Chart Review Findings Infection Prevention - 8/12/2025 Partners in Exceptional Care (PEC) Board Meeting - 7/10/2025	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.	Boysen	Clark	D Fulk	8/26/2025
			Committee Reports presented and Reviewed by BOT Members Medical Staff Report (MEC) - 7/19/2025 Medical Staff Privileges Recommendations Policy Review and Approval (crosswalk): Investment Risk Management Plan Age Requirements - Dietary Diet Order Guidelines Animal Bites - Guideline of Care Poisoning & Overdose – Guideline of Care Stab Wounds – Guideline of Care Stroke Program Policy EMS Documentation Submissions Confined Space Entry Smoke Detector Inspection					

17:30	Committee Reports:		Sprinkler Head Inspection Cleaning Baseboards Cleaning Blinds Cleaning Clinical Laboratory Cleaning Examination & Treatment Rooms Cleaning Furniture Cleaning Toilet Tissue Dispenser Damp Dusting Coding Professionals Confidential Communications Tobacco Free Workplace Ordering Emergency Items Provider Review (OPPE, FPPE, Peer Review) Tenecteplase STROKE Customer Service Internal DNV Audits Disclosure of Outcomes Provider Orders Dependent Adult Abuse Scope of Services Social Services Department Prescription Pads (VFHC) Obtaining a Culture Chart Review	Based on the recommendations of the medical staff of CRHC, the Board of Trustees Voted and Approved	Marsh	Clark	D Fulk	8/26/2025
17:40	Financial Report	Em Haffner, CFO and John Byland, CAO	Reported that July revenue was \$500,000 above budget, AR is at 35 days, and the bottom line improved by roughly \$600,000 despite a CMS billing hold. Auditors will present June financials in October. The Board approved transitioning to CSI/TruBridge financial statements for improved accuracy. They also reviewed productivity, noting one PT exceeded national RVU benchmarks and overall clinic productivity remains above MGMA averages.	No action was taken on the financials this month.	Clark	Whipp	D Fulk	8/26/2025
17:55	Check Run	Finance Committee Members: Bryon Whipp and Jeff Clark	Check Run: No check run was presented due to fiscal year-end	No action was taken regarding the check run this month.				
17:56	Quality Report	Lisa Haffner, VP of Quality, Accreditation & Care Management	Outpatient falls: 18; inpatient falls: 13 (goal met, no injuries). Readmission rate: 7.98%. Patient experience: 88.49% (above 85% target). No-show rates reviewed by clinic site. Compliance audits ongoing for consents, medication safety, infection prevention, and staff education.	Discussion Only, No Action Needed				
17:57	Clinics Report	Amy Roop, Chief Clinics Officer	Reported that CRHC is transitioning its chronic care management and remote patient monitoring services to Vital Health Links, which will provide seamless patient service, allow staff to be redeployed, and save approximately \$12,000 per month. She also reviewed progress on the mental health clinic renovation, which will separate therapy and medication provider spaces, add conference and office areas, and is expected to be completed in phases over the next 12–18 months, beginning with demolition this winter.	Discussion Only, No Action Needed				

17:58	CNO Report	Stacy Pulliam, Chief Nursing Officer	Leadership Updates A change in Med/Surg Director role; position will be posted. Responsibilities have been redistributed temporarily for stability. Staff Engagement Beginning group meetings with Med/Surg staff to gather feedback and improvement ideas. Data will be reviewed to identify themes and opportunities for change.	Discussion Only, No Action Needed				
18:05	Operational Report	Tyler Hill, Chief Operating Officer	Reported that the Policy Committee meets weekly to standardize templates and introduced a new rubric to strengthen compliance with CMS/DNV standards. He also updated on the Professional Office Building, noting completion of exterior work, near-finished flooring and HVAC, cabinetry installation in progress, and anticipated state inspection. The project remains on track for spring 2026 occupancy, pending licensing and vendor coordination.	Discussion Only, No Action Needed				
18:10	CEO Report	Chuck Nordyke, Chief Executive Officer	Reported on ongoing strategic initiatives, including the transition of population health services to Vital Health Links, evaluation of a Senior Life Solutions proposal, and discussions with the University of Iowa regarding a multi-hospital partnership for telepharmacy and radiology services. He provided provider updates noting anticipated oncology coverage gaps, continued recruitment for surgical and clinic positions, and upcoming transitions in the Walk-In Clinic and Emergency Department. Facility updates included progress on the mental health clinic redesign, the professional office building, and the Brown House renovation. He also highlighted CRHC's recognition as the sole Iowa recipient of the national Community Stars Award, with upcoming events including the Annual Meeting in October and the HJ Alliance Governance Meeting in September.	Discussion Only, No Action Needed				
18:15	Old Business/Action Items	BOT Chairperson	No other business	No action required			D Fulk	8/26/2025
18:15	Announcements:	BOT Chairperson	Next Meeting: 8/27/2025 Next Finance Meeting: 8/19/2025	Information Only			D Fulk	8/26/2025
18:15	Closed Session	BOT Chairperson	Motion to enter closed session pursuant to Iowa Code Section 21.5(1)(I) to discuss patient care quality, process improvement initiatives, and proprietary information, including marketing and pricing strategies, where public disclosure could harm the hospital's competitive position. No final action will be taken during the closed session, and a recording will be retained for at least one year as required by law.	Roll Call Vote: Whipp, Clark, Marsh, Boysen and Fulk all Yay, no Nay			D Fulk	8/26/2025
			Return from Closed Session	Roll Call Vote:Marsh, Whipp, Clark, Boysen and Fulk all Yay, no Nay.			D Fulk	
19:04	Open Session Voting	BOT Chairperson	Upon returning to open session at 7:08pm, the Board noted that discussion was for informational and strategic purposes only. A subsequent motion to adjourn was approved, concluding the meeting.	No action required			D Fulk	8/26/2025
18:16	Adjournment	BOT Chairperson	Adjournment	Meeting adjourned at approximately 7:08 PM	Whipp	Clark	D Fulk	8/26/2025
Attendance:								
Jeff Clark	Kathy Boysen	Bri McCuen	Dr. Schaeffer	Stacy Pulliam	Amy Roop			
Bryan Whipp	Chuck Nordyke	Tyler Hill	Lisa Haffner	NaTausha Harvey	Jennifer McCall			
Robert Marsh	John Byland	Em Haffner	Maggie Brown	Dale Fulk				


Dale Fulk, Chairperson


Jeff Clark, Secretary/Treasurer