

**Kimble County Hospital District  
"Healing the Hill Country"**

**349 Reid Road; Junction, Texas 76849 Phone:325-446-3321 Fax: 325-446-3769**

Notice is hereby given that in accordance with Governor Abbott's declaration of the COVID-19 public health threat and action to temporarily suspend certain provisions of the Texas Open Meetings Act, the Board of Directors of Kimble County Hospital District will meet at 6:00p.m. on Monday, August 16, 2021 or use a web browser with the link [www.bluejeans.com/325-446-3321](http://www.bluejeans.com/325-446-3321).

Copies of the August 16, 2021 meeting agenda and the board packet may be downloaded online at: <http://new.kimblecountyhospitaldistrict.org>. This meeting will be recorded and will be available by request from the District after the meeting.

**Agenda  
Monday, August 16, 2021**

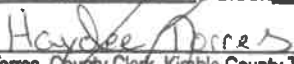
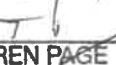
1. Call to order and establish quorum.
2. Public comment (limited to 5 minutes/participant or 15 minutes/organization).
3. Approval of prior meeting minutes: July 26, 2021
4. Discuss and consider update by Preferred Management on operation of KCHD medical facilities and administration.
5. Discuss and consider KCHD Treasurer's reports (financial and bill payments).
6. Discuss and consider 2021-2022 draft budget in preparation for tax rate calculations.
7. Discuss and consider updating Bylaws.
8. Discuss and consider proposed KCHD 2021-2022 M & O and I & S tax rates.
9. Discuss and consider State funded COVID19 available dollars.
10. Discuss and consider date and agenda items for next meeting(s).
11. Adjourn

  
William (Bill) Simon, Board President

**Notes to the Agenda:**

1. This notice is given pursuant to the Texas Open Meetings Act (the Act)
2. The Board may vote and/or act upon each item listed on the agenda.
3. The Board reserves the right to enter into executive session, closed to the public, concerning any of the agenda items when it is considered necessary and permissible under the Act.
4. Persons with disabilities who plan to attend this meeting and who may need assistance should contact the Kimble Hospital at (325)446-3321 prior to the meeting so appropriate arrangements can be made.
5. This is to certify that I, William Simon, posted this agenda on Thursday, August 12, 2021 at the Kimble County Courthouse, the bulletin board at Kimble Hospital, the glass window at the front entrance of the Junction Medical Clinic and online at: <http://new.kimblecountyhospitaldistrict.org>.

cc: KCHD Board members, Preferred Management, Kimble Hospital Foundation, KCHD Webmaster; <http://new.kimblecountyhospitaldistrict.org>. and the Junction Eagle.

Filed August 12, 2021  
at 1:18 o'clock P. M.  
  
Haydee Torres, County Clerk, Kimble County Texas  
By  Deputy  
KAREN PAGE

**Kimble County Hospital District  
DRAFT MEETING MINUTES  
Monday, July 26, 2021 at 6:00 p.m.**

Members present: Bill Simon, Bobby Chenault (via zoom), Barbara Conklin, Lewis Allen, Paul Bierschwale and Marshall Heap(via zoom) . Nicholas Lumbley was unable to attend. Preferred Hospital Leasing, Junction, Inc.; Duke Young PHLJ Hospital Administrator. Durbin & Company L.L.P; Steven M. Thummel, CPA (KCHD Auditor) (via zoom).

Visitors: Junction Eagle reporter: Sarah Harrison and husband Larry.

**1. Call to order and establish quorum.**

A quorum was established, 5 members present and later 6 (at 6:26 pm). The meeting was called to order by Board President Simon at 6:15 p.m. in the conference room of the Kimble Hospital. Mr. Allen opened the meeting with prayer.

**2. Public comment (limited to 5 minutes/participant or 15 minutes/organization).**

There was no public comment.

**3. Approval of prior meeting minutes: June 14, 2021.**

Board President Simon led the board to review and adopt the minutes presented.

After review of the June 14, 2021 minutes; *Mr. Allen made a motion to approve the minutes as written and Mrs. Conklin seconded the motion, the motion passed 4-0, one abstained (Heap abstained---he was not present at that meeting) .*

**4. Discuss and consider update by Preferred on operation of KCHD's medical facilities and administration.**

Mr. Young reported Hospital and Clinic numbers were in decline overall but Medicare was up and that is a positive. Young submitted this report on the activities at the Hospital and Clinic to date:

1. Hospital/ Clinic Reports.

a. Key Statistics

i.	Inpatient days	down	26%
ii.	Outpatient Services		
	1. Radiology	up	11%
	2. Laboratory	up	22%
iii.	ER Visits were	180	-----
iv.	Clinic Visits	up	4%
	1. JMC	405	
	2. RSMC	78	
v.	Patient Transfers	up	33%

2. Employee Appreciation: Young informed the Board that an employee appreciation event was being planned for hospital and clinic employees---thanking them for all the work and commitment they make. Date: August 28<sup>th</sup> at City pool.

3. Capital Equipment Update; Young updated board on Covid and status/ expenditures on capital equipment purchasing such as 32 slice CT scanner, flooring, AC units---work start dates.

4. Provider Relief Funds: June 30<sup>th</sup> this funding ended. Young spoke of other sources being studied.

(Mr. Bierschwale joined the meeting at this time 6:26 pm--- making the member attending count 6).

*No action was required and none was taken.*

**5. Discuss and consider KCHD Treasurer's reports (financial, budget, and bill payments).**

Mrs. Conklin presented the current financials through July 26, 2021 and also reported on bills to be paid and transfers needed to be made.

Board President Simon called for action on the presented financials and bills to be paid.

*Heap made a motion to approve the financials, the motion was seconded by Bierschwale and the motion passed 6-0.*

*Another motion was made by Allen to authorize bills to be paid; KCHD Website host Vivian Lumbley for \$65.00(2 months' work) and Durbin and Co. payment of \$14,417.93 for 2020 Audit work performed and submitted. Chenault seconded the motion and the motion passed unanimously 6-0.*

Conklin then discussed the need for funds to be transferred to make bond payment (which is auto-drafted) due August 15<sup>th</sup>.

Action required: *Conklin made a motion to authorize her (KCHD Treasurer) to make the fund transfer of \$393,574.87 to be added to current balance in the account of \$632,075 to make the total bond payment of \$1,025,150---plus \$ 200.00 paying agent fee and to leave \$300.00 in the account to keep it open. Allen seconded the motion and the motion passed 6-0.*

Other treasurers business needing action: Conklin expressed the need to take the \$40,000 that was taken in from PHLJ (as per contract) for CAPITAL RESERVES and the \$40,000 from KCHD M&O (matching PHLJ as per contract) and transfer these funds (\$80,000 in total) into Capital Reserves (as designated).

*Conklin made a motion to transfer this designated \$80,000 from M&O account into the Capital Reserves account and Beirschwale seconded the motion and the vote carried 6-0 in favor of authorizing the transfer. .*

**6. Discuss and consider 2021-2022 draft budget in preparation for tax rate calculations.**

Board President Simon opened discussion about creating a draft budget for 2021-2022. Conklin spoke on budget appropriations needing to coincide with taxes rendered from values set forth and determined by KCAD. Board President Simon and Conklin walked the board through each item on the current budget eliciting discussion among members and making adjustments the board deemed appropriate to make a draft outline. It was agreed that Conklin should get KCAD to calculate the "no new tax rate" and "voter approved rate" for KCHD.

*No action taken.*

**7. Executive session (personnel).**

Under the direction of Board President, at 7:05 the board went into executive session with all others leaving the room. At 7:50 the board returned from executive session.

*Allen moved to have the KCHD's auditor ---Durbin And Company, take over the hospital capital asset depreciation schedule. Conklin seconded the motion and the motion passed 6-0.*

**8. Discuss and consider updating Bylaws**

Board President Simon expressed the need for a committee or an individual to read through the existing KCHD Bylaws for possible updating. Some discussion ensued---Simon agreed to start the process with others to make an effort also.

*No action taken.*

**9. Discuss and consider Tobacco fund audit.**

Board President Simon informed the Board that a Tobacco Fund Audit had shown an overstated amount of \$23,000. The correction for this would be around \$468.00 ---the next fund check would be shortened by this amount.

*No action required.*

**10. Discuss and consider date and agenda items for next meeting(s).**

President Simon then led the board to set a date for the next regularly scheduled KCHD Board meeting for August 16<sup>th</sup> 2021 at 6:00 pm in the Kimble Hospital meeting room. Items were discussed to be placed on the agenda. After consideration and discussion, *Allen made a motion for the time and date mutually*

*agreed on by all (August 16<sup>th</sup> 2021 at 6:00 pm in the Kimble Hospital meeting room) and to adjourn the meeting and Conklin seconded the motion and the motion passed 6-0.*

**11. Adjourn.**

Simon made the motion the meeting be adjourned, seconded by Chenault.

The meeting was adjourned at 8:00 pm.

Respectfully submitted:

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Bobby Chenault, Board Secretary



## Kimble Hospital District Board Meeting, July 2021 Review

1. Hospital / Clinic Reports	Total	From Prior Month
a. Key Statistics		
i. Inpatient Days	11	66%↓
ii. Outpatient Services		
1. Radiology	400	16%↑
2. Laboratory	1,944	4%↑
iii. ER Visits	227	26%↑
iv. Clinic Visits		
Junction	437	8%↑
Rocksprings	76	--

2. Vaccine update
3. Capital Equipment Update
4. Medical Staff Update

KIMBLE HOSPITAL

PATIENT WORKLOAD AND SERVICE REPORT

10/1/2020 - 09/01/2021

	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	FYTD 2021
<b>Total Patient Days</b>	27	67	83	86	77	32	28	30	23	11			464
Medicare	0	19	44	35	9	15	10	8	15	10			165
Medicare SB	0	14	3	28	39	7	4	9	1	0			105
Medicaid	3	3	0	6	4	0	3	4	0	0			23
Medicaid SB	0	0	0	0	0	0	0	0	0	0			0
Other	24	13	28	14	19	1	3	9	7	1			119
Other SB	0	18	8	3	6	9	8	0	0	0			52
<b>Average Pt Per Day</b>	<u>0.9</u>	<u>2.2</u>	<u>2.7</u>	<u>2.8</u>	<u>2.8</u>	<u>1.0</u>	<u>0.9</u>	<u>1.0</u>	<u>0.8</u>	<u>0.4</u>			<u>1.7</u>
<b>Occupancy Rate %</b>	6%	14%	18%	18%	17%	7%	6%	6%	5%	2%			11%
<b>Admissions</b>	6	13	17	21	14	8	7	9	8	6			109
Medicare	0	4	11	10	2	5	3	4	4	5			48
Medicare SB	0	3	1	5	3	1	1	1	1	0			16
Medicaid	1	1	0	1	2	0	1	1	0	0			7
Medicaid SB	0	0	0	0	0	0	0	0	0	0			0
Other	5	4	4	4	6	1	1	2	3	1			31
Other SB	0	1	1	1	1	1	1	0	0	0			6
<b>Discharges</b>	5	12	18	19	14	10	6	9	9	5			107
Medicare	0	3	11	9	4	5	3	4	5	5			49
Medicare SB	0	2	1	4	2	2	1	1	1	0			14
Medicaid	1	1	0	1	2	0	0	2	0	0			7
Medicaid SB	0	0	0	0	0	0	0	0	0	0			0
Other	4	5	5	4	6	1	1	2	3	0			36
Other SB	0	1	1	1	0	2	1	0	0	0			6
<b>Avg. Length Of Stay</b>	5.4	3.9	4.5	3.9	2.7	2.0	3.1	2.6	2.8	2.2			3
Medicare	0.0	6.3	4.0	3.9	2.3	3.0	3.3	2.0	3.0	2.0			3
Medicaid	3.0	3.0	0.0	6.0	2.0	0.0	0.0	2.0	0.0	0.0			2
Other	6.0	2.6	5.6	3.5	0.6	1.0	3.0	4.5	2.3	1.0			3
<b>SB Avg. Length of Stay</b>	0	10.5	5.5	3.1	22.5	4	6	9	1	0			6
<b>ER Visits</b>	143	175	162	174	183	169	157	179	180	227			1749
<b>Lab Total</b>	1774	1635	2031	2119	1632	1826	1612	1649	1869	1944			18091
<b>Radiology Total</b>	259	237	311	356	335	308	245	264	343	400			3058
CT Scans	89	77	98	112	109	100	65	68	137	108			963
<b>OBS Days</b>	9	13	18	12	14	11	6	9	6	6			104
<b>Junction Medical Clinic</b>	484	451	380	416	384	493	497	464	483	511			4563
<b>Physical Therapy</b>	529	486	649	419	443	639	677	609	554	322			5327
<b>GI Procedures</b>	1	1	3	0	2	2	3	3	0	4			19



## Junction & Rocksprings Medical Clinic - New Patients - 2021

### Junction

	Retainable* *includes patients not seen at clinic in three+ years, patients establishing new PCP and local newborns	Non-Retainable* * includes hunters/travelers and those working or living here temporarily	Total
January	16	11	27
February	10	4	14
March	27	1	28
April	22	8	30
May	13	3	16
June	21	10	31
July	23	8	31
August			
September			
October			
November			
December			
Total	132	45	177

### Rocksprings

	Retainable* *includes patients not seen at clinic in three+ years, patients establishing new PCP and local newborns	Non-Retainable* * includes hunters/travelers and those working or living here temporarily	Total
January	15	0	15
February	27	0	27
March	27	0	27
April	33	0	33
May	25	0	25
June	34	1	35
July	27	0	27
August			
September			
October			
November			
December			
Total	188	1	189

**Kimble Hospital Heritage Program for Senior Adults  
Outpatient Behavioral Health  
July 2021 Monthly Status Report**

TO: Duke Young, Administrator

FROM: Alexis Fletcher, LCSW - Program Director

		Gero IOP/SOP
<b>Billable Units</b>	<b>Budget</b>	225
	<b>Actual</b>	211
	<b>Variance</b>	<b>-14</b>
<b>ADC</b>	<b>Budgeted ADC</b>	4.4
	<b>Actual ADC</b>	5.1
	<b>Variance</b>	<b>+0.7</b>
<b>Patients Admitted</b>		13
<b>Census Activity</b>	<b>Referrals</b>	6
	<b>Admissions</b>	0
	<b>Discharges</b>	3
	<b>Conversion Rate</b>	<b>0%</b>
	<b>Tot OutPt Census</b>	13
	<b>Days of Operation</b>	14

**I. Operations**

- Patient census at the end of July was 13, 12 group patients and 1 individual patient. We had 6 referrals, 0 admissions and 3 discharges. Actual billable units decreased from 308 in June to 211 in July. Medicare Days decreased from 86 in June to 71 in July 2021. In July, multiple marketing and Community Education contacts were made including:
  - PD attended 2 Director meetings on 7/1/21 and 7/29/21
  - PD attended Med Staff on 7/28/21
  - MHTs provided MOW with popcorn bags for patients on 7/14/21
  - MHTs did Bingo at United Methodist Church on 7/21/21
- Patient Compliance to treatment decreased from 80% in June to 69% in July.
- Staffing Needs: F/T therapist interview was on 7/22/21 for therapist position
- Environment (physical needs of unit): a “facelift” for clinic including painting all walls, new flooring throughout, new mini-blinds and curtains, etc (Duke given complete list per previous PD); Air conditioner went out in staff offices (replaced on 8/10/21)
- Interactions with DHC VP Operations & date of most recent site visit: Donna Tidwell, VPO, DHC, provides oversight support weekly and as needed; regular call with PD on Wednesdays at 9 am and monthly call with PD, VP, and Clinical Director. Donna’s most recent site visit was on 1/18 and 1/19/2021.
- Melissa Lehman, DHC Clinical Services Director, completed a Clinical Service Site Visit Review on 11/11/2020 (scored 94% compliance). Katherine Abernathy, the new DHC Clinical Services Director, is working on a planning a visit in the next couple of months either in-person.

**II. Clinical**

- Monthly Audit Results= QAPI indicators: 1)Suicide Assessment done at intake and within 3 programming days after admission 100%; 2) Informed Consent for Meds signed 100%; and 3) Master TX Plan Reviews every 30 days 100%
- Kimble Hospital (Heritage Program) Documentation: DHC Compliance Audit/Review—94%
- Outcome Measures (%) for 2nd quarter 2021 = PHQ9 37 % improvement; GAD7 24 % improvement, Columbia Suicide Screenings completed 100%, Substance Abuse Screenings completed 100%, No-show rate 11%, Patient Satisfaction 89%

(3)



III. **Referral and Outreach**

- Plans to reach budgetary targets in August 2021 include:
  - Provide Donuts for Frontera Healthcare
  - Provide MOW with goodie bags for patients
  - Bingo at First United Methodist Church on 8/21/21
  - Bingo at Menard Manor on 8/10/21
  - PD to attend Med Staff meetings / Director's meetings /QAPI meetings
  - Junction Newspaper Article
  - Follow up with the Duke concerning the **Facebook advertisement** that previous PD creased to help increase community awareness of The Heritage Program for Senior Adults
  - Follow up with Duke concerning the Heritage pages on the **Kimble Hospital website** that previous PD created
  - Update flyers/ pulltabs in local business
  
- **August 2021 outreach goals:**  
# of referrals = 5   # of billable units = 225   # of admissions = 2   # of discharges = 1

*Alexis Fletcher, LCSW*  
**Program Director**  
**Diamond Health Care Corporation**

*DONNA TIDWELL*  
**VP – Operations**  
**Diamond Health Care Corporation**