



**Board of Directors**  
**Regular Board Meeting**  
**Monday January 26, 2026**

**Attendees:**

Morgan Cox, President - Absent	Nancy Cooke, CEO
Albert Garza, Vice President	Tonya Glisan, CFO
John Myrick, Secretary	Linda Pierce, CNO
Terry Franklin, Member	Jason Menefee - COO
Clay Parker, Member	Tina Columbus, Director Human Resources
Frances Hernandez, Member	Rebecca Brandon, Director of Rural Clinic
Brian Jackson, Hospital Attorney – Absent	Amy Miramontes, Director of Quality
Kip Wood, Director EMS	Mark Salcone, DO - Absent
April Salazar – Tax Appraisal Office	

- I. **Call to order:** Mr. Garza called the meeting to order at 11:30am.
- II. **Reading and Approval of Minutes – Regular Board Meeting:** Minutes were reviewed. Minutes from November 24, 2025, were examined, leading to a motion to approve them, seconded and passed.
- III. **Public Comment – None**
- IV. **Information on Martin County Appraisal District Office Building:** Ms. April Salazar attended the board meeting to discuss construction of the new building for the appraisal district, which does not generate revenue itself and will require funding from taxing entities. The cost is projected at \$3.5 million with a 27% contingency, totaling \$4.5 million. The board's share is 11.5%, amounting to \$517,500. After discussion, a motion to approve the resolution was made, seconded and passed.
- V. **Annual Adoption of Code of Conduct – Nancy Cooke:** The hospitals Code of Conduct has been in place since 2020 which applies to how patients, employees, and vendors are treated and requires annual acknowledgement by all employees and contractors. The electronic acknowledgment process through Paylocity ensures a record of acceptance. Motion to approve the annual adoption of Code of Conduct was approved and seconded. Motion passed.
- VI. **Medical Staff Report – Amy Miramontes:** The Medical Staff Committee met on January 21<sup>st</sup> addressing new business with a tele-radiologist group and policy revisions. High satisfaction scores shared, ongoing adherence to quality metrics, process innovations and required bylaws were highlights, Motion to approve medical staff report approved and seconded. Motion passed.
- VII. **Medical Staff Privileges – Amy Miramontes:** Medical Staff privileges were approved for the following providers:
  - Brinton Ross, CRNA
  - Suzanna Hewetty, FNP-BC

- Jonathan McDougal, MD
- Brandon Stroh, MD
- Aaron Benner, MD
- Tamara Carroll, MD
- Steven Larsen, MD
- Artur Narkiewicz-Jodko, DO
- Moayad Tarboush, MD
- Benjamin Yunk, MD
- David Cameron, MD
- Olufolajimi Obembe, MD
- John Waddell II, MD
- Mike Epstein, MD
- Bradford Bennett Jr, MD
- Joseph Letham, MD
- Kimberly Wright, MD
- Derik Kenworthy, MD
- Gene Weinstein, MD

Re-Appointments

- Matthew Carraway, DDS
- James Sikes, MD
- Katy Bagwill, CRNA
- Linda Pierce, NP
- Brian Middlebrook, DPM

One provider with expired terms and one resignation

- Chisom Nwoye, MD
- Abbie Estes, PA

Motion to approve Medical Staff Privileges approved and seconded. Motion passed.

**VIII. Quality Assurance / Patient Safety Report - Amy Miramontes:** Approval of various policies by the Quality Committee was noted, these policies were also approved by the Medical Staff Committee with a recommendation for board approval. Achievements highlighted in 2025 included meeting the fall rate goal set at less than 8 with the year ending at 6. A patient advocate program has been implemented with a new staff member joining in February to help reduce patient grievances during ER visits. Quality metrics for EKG processing within 10 minutes met targets, but 'left without being seen' patients still posed a challenge. This is expected to improve with the patient advocate role. The report noted full compliance with protocol requirements including ER codes and patient consent for sedation. Issues were acknowledged with transferring higher acuity patients that may be causing bottlenecks, affecting ER efficiency. Plans to alleviate pressure on ER include the opening of the Express care clinic. Motion to approve Quality Assurance/Patient Safety Report approved and seconded. Motion passed.

**IX. Discussion and Possible Actions on Policies, Policy Log - Amy Miramontes:** Six policies were revised in Safety (001, 0015, 0016, 0023, 0033, 0034) adding clinic to the policies. A new Elevator Safety policy 0047 has been created, and a new emergency operations plan for the clinic. The PTO Cash Out Policy was revised emphasizing that employees must use at least 40 hours of PTO in the past 12 months for full time employees and 20 hours for part-time employees, encouraging employee time off to prevent burnout. Motion to approve Policy Log approved and seconded. Motion passed.

**X. Strategic Initiatives – Nancy Cooke:**

**a. Update on Plans to Construct New Clinic and Other Space as needed for Hospital District growth:** The plans for ER and PT expansions have been submitted to MEP engineers, who requested a larger electrical room. The expansion plans are targeted to go out for bids in February, with the expectation of reviewing bids at the March board meeting. The suggestion to address building stucco issues involves replacing it with brick in areas of new construction, which would also reduce maintenance and

match existing structures. There is a need to consult with utility companies, Encore and Wes Tex, as well as address water and internet infrastructure before progressing with ER and PT expansions. There's interest in securing internet redundancy due to heavy reliance on internet services, exploring options beyond the current AT&T provider. It's important to confirm timing and schedule with Encore, noting that timelines could be 6-8 months or more. Motion to approve update on plans to construct new clinic and other space as needed for hospital district growth approved and seconded. Motion passed.

**b. Updates on other initiatives: None**

**XI. Department Reports**

- a. EMS – Kip Wood:** EMS calls and activations indicate 30 calls this year, which is consistent with previous trends. Administrative tasks are in progress for unit 14. Remounted equipment is scheduled to be delivered within 90-100 days. Staffing update with new PRN paramedic from Lubbock and ongoing interviews to reach the staffing goal. Education opportunities include EKG course and upcoming renewal of TE program with Texas Department of State Health Services. There has been discussion on protocols for carrying blood and the challenges with state funding and storage coordination. Motion to approve the EMS Report and seconded. Motion passed.
- b. Home Health – Linda Pierce:** Home Health reported on referrals, admissions, discharges, and the current census. The Star rating is at 3.4, and likelihood of recommending is in the 83<sup>rd</sup> percentile. The search for a Home Health administrator remains active. Motion to approve the Home Health Report and seconded. Motion passed.

**XII. Equipment - Nancy Cooke:**

- a. Railing in Building 2:** There are equipment and safety concerns for the railing in building 2, plans to replace existing railings with durable plexiglass estimated at \$48,540. Motion to approve the railing in building 2 and seconded. Motion passed.

**XIII. Contracts:**

- a. Amendment to Keith Gist, Anesthesia contract:** Considerations regarding contractual modification with Keith Gist, Anesthesia contract involves plans to increase allocation due to expanding orthopedic needs, which awaits legal finalization. Motion to approve Amendment to Keith Gist, Anesthesia contract and seconded. Motion passed.

**XIV. Prepayment to Permian Basin Mental Health Center - Nancy Cooke:** No action is required at this time, intended to contact the County Judge before the meeting to determine the county's stance but was unable due to the judge being unavailable. Will reach out to the county commissioners before the next board meeting.

**XV. Review and Consider Possible changes to Employee Retirement Plan – Nancy Cooke:** Focused on enhancing the employee retirement plan to increase participation, with current statistics showing a 56% participation rate. The average contribution rate is 7.3%. 65% of participants use target date strategies for their investments, managed by Empower, yielding an annual return between 13% and 17%. Two primary strategies to increase participation were discussed: automatic enrollment at hire with incremental contribution increases and changing the management of the plan to minimize participant fees. Consideration of employee perspectives, particularly lower-level employees, about mandatory contributions and the financial impact on them when newly hired. Explored options include employer covering administrative fees of approximately \$160 per participant per year. Also discussed was the option for a "profit sharing" plan. This could be structured to meet the need of the facility and would be discretionary. No immediate action or make specific recommendations but rather gather and consider more information for future decision-making.

**XVI. Updated Organization Chart– Nancy Cooke:** Presented changes to the organizational chart, specifically moving therapy services, lab and cardiopulmonary under Jason Menefee’s supervision. Motion to approve updated organization Chart and seconded. Motion passed.

**XVII. CFO Report – Tonya Glisan:** Senior leadership is coordinating a budget meeting with up to three members from the board, the members will be Morgan Cox, Terry Myrick, and Albert Garza. The financial report detailed cash investments, net income, and projected fiscal outcomes for upcoming years, revealing overall financial health improvement and strategic planning for future periods.

November

- Cash on Hand: 637 days
- Total Cash & Investments: \$73.8 million
- Tax Revenue: \$2.7 million collected to date
- Operating Loss: (\$733 thousand)
- Net Income: \$2 million year to date
- AR Days: 67

December

- Cash on Hand: 620 days
- Total Cash & Investments: \$73.4 million
- Tax Revenue: \$5.1 million collected to date
- Operating Loss: (\$500 thousand)
- Net Income: \$2.3 million
- AR Days: 71

Motion to approve CFO report was approved and seconded. Motion passed.

**XVIII. Administrative Report – Nancy Cooke:** The AI scheduling system attempted to be implemented by Becky Brandon and the IT staff is underperforming, leading to its cancellation effective March 31<sup>st</sup>. Bill Parsons and Randall Thompson from VGA architects will meet with department heads to discuss a revised master plan. Another meeting is scheduled for February 19<sup>th</sup> to involve all departments. A planned promotional video by Henry Schein was canceled due to weather conditions. An upcoming feature of MCHD in the Pioneer Co-op magazine will cover IT initiatives. There are proposed changes by the Texas Department of Transportation to access roads and overpasses, with a start in mid-2029. A suggestion was made to provide feedback on the access road plans, specifically to encourage the addition of an exit closer to the hospital. Shannon Medical Center’s acquisition of Scenic Mountain is expected to focus on primary care for 18 months, causing some concern due to current lack of OB services in Big Spring. The hospital’s open house was highly attended with approximately 200-250 attendees receiving positive remarks. Representatives from the FMH Foundation and the Broughton Family Foundation attended the open house, expressing positive views and maintaining interest in the hospitals undertaking. The hospital received a ‘Most Wired’ award, to be displayed in the trophy case.

**XIX. Executive Session:**

- a. Texas Government Code 551.071: Consultation with Attorney**
- b. Texas Government Code 551.074: Personnel Matters**

**XX. Return to Open Session: 2:02p.m.**

**XXI. Adjourn Meeting: 2:06 p.m.**



Morgan Cox, Board President

2-23-26

Date



John Myrick, Board Secretary

2/23/2026

Date