



**Board of Directors**  
**Regular Board Meeting**  
**Monday November 24, 2025**

**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 - Absent	Rebecca Brandon, Director of Rural Clinic
Brian Jackson, Hospital Attorney	Amy Miramontes, Director of Quality
Kip Wood, Director EMS	Mark Salcone, DO - Absent
Jeff Deslaurier, Director IT/Compliance Officer	

- 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 October 27, 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:** The discussion about the Martin County Appraisal District Office Building will be rescheduled for the upcoming meeting to allow for readiness.
- V. **Medical Staff Report – Amy Miramontes:** The Medical Staff Committee met on November 20<sup>th</sup> and discussed changes in the radiology group coming in February 2026. Motion to approve medical staff report approved and seconded. Motion passed.
- VI. **Medical Staff Privileges – Medical Staff privileges were approved for the following providers:**
  - Mershad Hagigi, MD
  - Pradheep Shanker, MD
  - Charles Tsai, MD
  - Waleed Abdellatif, MD
  - Mohammad Ansari, MD
  - Peter Agomuo, MD
  - David Ho, DO
  - Mohammad Halaibeh, MD
  - Ali Baiomy, MD
  - Arthur Joseph, MD
  - Aftab Haq, MD
  - Eric David, MD

- Ryan Vancura, MD
- Mohammad Khalid, MD
- Michael Parker, MD

One provider with expired terms

- Matthew Carraway, DDS

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

- VII. Quality Assurance / Patient Safety Report - Amy Miramontes:** A new safety event reporting system is scheduled to go live December 8<sup>th</sup>. Managers are currently being trained on event follow-up, with staff training planned for the next two weeks. There is a change in terminology from “occurrence” to “event” in the new system with all events being recordable. The monthly quality reporting covered a range of topics including employee injuries, chest pain, ED departure times, stroke and CT/MRIs, and pain management. In October, the facility achieved a zero-fall rate and had no adverse outcomes. There were three ER related grievances, all resolved with patient communication and close out. Providers are completing discharge summaries and other reports efficiently. There was one employee injury reported. ER “left without being seen” rate increased to 3%, but follow-up calls are made to those patients. ED throughput time is strong at 124 minutes, and pain management documentation is positively assessed. Motion to approve Quality Assurance/Patient Safety Report approved and seconded. Motion passed.
- VIII. Discussion and Possible Actions on Policies, Policy Log - Amy Miramontes:** Three policies were approved and recommended by the medical staff, including new nursing documentation NSG 050 and a revised documentation NSG 041. Policy Adm 003 was revised to change the term “occurrence” to “event” in line with the updates in the event reporting system. Motion to approve Policy Log approved and seconded. Motion passed.
- IX. Strategic Initiatives – Nancy Cooke:**
- Update on Plans to Construct New Clinic and Other Space as needed for Hospital District growth:** Certificate of Occupancy for Building 2 was received on November 18<sup>th</sup> but work on the punch list is still ongoing. Landscaping will be deferred to the spring, but installation of the irrigation system is being prioritized for completion. GE will perform a pre-install inspection next week, with installation expected to occur the following week. Insurance was obtained on the same day as the issuance of the certificate of occupancy. A safety concern was identified with the cables around the open area. It is recommended to retrofit or install Plexiglas to prevent accidents. An Open House is scheduled for January 22<sup>nd</sup>. Medical building 2 includes over 3 miles of interior walls and spans 301,000 square feet. Mr. Menefee and Ms. Brandon are working with architects and construction teams to address the punch list, which includes minor fixes, but nothing obstructive to progress. Motion to approve update on plans to construct new clinic and other space as needed for hospital district growth approved and seconded. Motion passed.
  - Updates on other initiatives:** None
- X. Department Reports**
- Compliance - Jeff Deslaurier:** Recognition was given for awards received by the hospital, including Critical Access Digital Health Excellence and Supply Chain Management. Pharmacy compliance reported no diversions for the third quarter. A slight increase in breach attempts was noted linked to new digital display boards. The Privacy Officer reported that multiple individuals accessed personal records for training purposes; they have been educated to use training records. Health Information Management is maintaining full responsibility for managing records older than 30 days. Business office has increased adjustments due to cleanup of old issues; interim workaround for refund impacts implemented. Home health admissions data showed varying numbers across three months: July – 7, August – 5, and September – 10. Patient access total census decreased from 39 to 26, indicating improvement in staying compliant with stay durations. Motion to approve the Compliance Report and seconded. Motion passed.

- b. **EMS Report - Kip Wood:** Monthly numbers for transport and activations align with projections, indicating an increase in transports with fewer activations while managing multiple patients from accident scenes. Current staffing includes two open PRN positions and a new paramedic hire, with additional openings in other areas. One unit was donated to Howard College and is being used for training purposes. Unit 10 had an AC leak issue which has been resolved, regular maintenance is ongoing. A new rural ambulance service grant program starts January 1<sup>st</sup> but is not applicable until then. Funding and truck ordering need to align with fiscal timelines and must be completed within five years. A scheduled remount for an EMS unit with expected 90–120-day turnaround is planned for early December. Motion to approve the EMS Report and seconded. Motion passed.
- c. **CNO Report – Linda Pierce:** Several staffing updates including a full-time open position, recent OB training completion for nurses, and a new process for referrals improving patient access to specialists. New initiatives to start administering Reclast and iron infusions locally starting January 1<sup>st</sup>, minimizing patient travel. An internal committee confirmed nurse-to-patient ratios, reflecting staff feelings of safety and support with current levels during quarterly review. Efforts to maintain patient experience scores are ongoing despite survey data issues in October. Operational goals for fiscal year focus on reducing patient fall rates, increasing admissions and service volume, achieving financial goals, and reducing emergency department discharge time. Motion to approve the CNO Report and seconded. Motion passed.

**XI. Equipment - Nancy Cooke:**

- a. **Cepheid GeneXpert Upgrade for Lab:** A renewal of Cepheid GeneXpert upgrade contract was discussed, which will maintain the current cost and will be able to increase from 8 bays to 16 bays, this upgrade will fit in the existing space. It is recommended to proceed with the upgrade as it involves no additional testing but enhances capabilities for target respiratory panels, GI panels, antimicrobial resistance and sepsis panel testing. Motion to approve the Cepheid GeneXpert Upgrade and seconded. Motion passed.
- b. **Additional Network Equipment for Building II:** Request for additional \$40,579 was made to acquire more network equipment for Building 2 due to earlier equipment rearrangements and movement. The state grant of \$100,000 had previously covered much of the equipment cost. Motion to approve the additional network equipment for building II and seconded. Motion passed.

**XII. Contracts:**

- a. **Angel Protection Services:** The contract for Angel Protection was discussed, initially costing \$19,500 but increasing to \$23,800 for renewal because of an increase in the number of cameras. The contractor has agreed to provide regular quarterly reports going forward. It is confirmed that Angel Protection would apply to the new building as well. Motion to approve Angel Protection Services and seconded. Motion passed.
- b. **Healthstream for Education Services:** The contract for a training platform to support various competency and medical education requirements was reviewed. The total cost over three years is \$44,514, or approximately \$14,000 a year. Motion to approve Healthstream for Education Services and seconded. Motion passed.
- c. **MOU with Texas Tech University regarding EMS Telehealth Equipment:** The MOU with Texas Tech University involves EMS allied health support and includes providing telehealth equipment at not cost. There are concerns about connectivity issues in the area affecting the telehealth service that have been raised, with potential solutions like utilizing Starling technology discussed. Motion to approve MOU with Texas Tech University regarding EMS Telehealth Equipment and seconded. Motion passed.

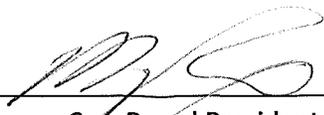
**XIII. CFO Report – Tonya Glisan:** The financial report detailed cash investments, net income, and projected fiscal outcomes for upcoming years, revealing overall financial health improvement and strategic planning for future periods.

- Cash on Hand: 662 days
- Total Cash & Investments: \$74 million
- Tax Revenue: \$36.3 million collected to date

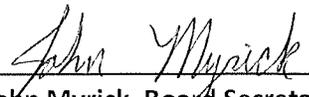
- Operating Loss: (\$626 million)
- Net Income: \$2.1 million year to date
- AR Days: 70

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

- XIV. Employee Retention Payment – Nancy Cooke:** Discussion on implementing employee retention payments, which have been conducted biannually for the last three to four years. The proposed payment includes \$500.00 for full-time employees and \$250.00 for part-time employees. Motion to increase retention pay to \$750.00 for full-time employees and \$400.00 for part-time employees. Motion to approve Employee Retention Payment and seconded. Motion passed.
- XV. Updated Organization Chart – Nancy Cooke:** The organizational chart updates indicated changes in leadership roles with Mr. Menefee assuming responsibility of imaging from Ms. Pierce. Motion to approve Updated Organization Chart and seconded. Motion passed.
- XVI. Annual Statement on Martin County Hospital District 457 (b) Plan Administration – Nancy Cooke:** Discussion of the Martin County Hospital Districts annual statement concerning the 457 (b) retirement plan, which is used instead of a 401K due to their status as a governmental entity. The plan includes a progressive contribution rate based on years of service: 5% for the first year, 6% for the second, and 7% thereafter. A request was made to provide data on the current percentage of employee participation in the retirement plan for the next meeting. The discussion included a comparison between the plan and other hospital district retirement plans such as the TCDRS plan and others where employees must contribute and the district matches at varying percentages. The discussion highlighted the differences between 401K like plans (like 457 (b) plan) and traditional pension plans, noting the benefit discrepancies and the guaranteed returns of the latter. Discussion on the possibility of increasing contributions to retirement savings, with suggestions to increase district matches or mandating a minimum percentage for all employees. A call to study the possibility of enhancing the current retirement plan to offer better incentives and support for long-term employees, including potential changes in matching contributions. Consideration was given to setting a mandatory contribution level for all employees to ensure retirement savings, potentially through automatic salary adjustments. Motion to approve Annual Statement on Martin County Hospital District 457 (b) Plan Administration and seconded with follow up information as requested. Motion passed
- XVII. Administrative Report – Nancy Cooke:** The Employee Service Awards will be held at the new Community Center on December 12<sup>th</sup> at 5:30 P.M. The Permian Basin Behavioral Center representatives are scheduled to present to the City of Stanton on December 8<sup>th</sup>, an agenda will be posted. The organization received two performance leadership awards from the Charter Center for Rural Health for quality and patient perspective. Employee town halls were held from November 3<sup>rd</sup> to November 7<sup>th</sup> and received positive feedback. The annual Thanksgiving lunch served over 500 meals to employees. Net Power remains interested in establishing a plant in Martin County, which could benefit the local tax base.
- XVIII. Executive Session:**
- Texas Government Code 551.071: Consultation with Attorney**
  - Texas Government Code 551.074: Personnel Matters**
- XIX. Return to Open Session: 1:53p.m.**
- XX. Adjourn Meeting: 1:55 p.m.**

  
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Morgan Cox, Board President

11-26-26  
Date

  
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John Myrick, Board Secretary

11/26/26  
Date