

EXHIBIT “A”

Texas County & District Retirement System
Preliminary Actuarial Study with Assumed Participation Date 08/01/2024
Winnie Stowell Hospital District

			Plan 1	Plan 2	Plan 3	Plan 4
Benefit Provisions	Employee Deposit Rate	1	4%	4%	4%	4%
	Employer Matching Rate	2	100%	150%	200%	250%
	Monetary Prior Service Percentage	3	0%	0%	0%	0%
	Savings Rate	4	8.0%	10.0%	12.0%	14.0%
Eligibility Options	Vesting & Retirement at Age 60					
	10 Years	5	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%
	8 Years	6	<input checked="" type="radio"/> 0.01%	<input checked="" type="radio"/> 0.01%	<input checked="" type="radio"/> 0.01%	<input checked="" type="radio"/> 0.01%
	5 Years	7	<input type="radio"/> 0.02%	<input type="radio"/> 0.02%	<input type="radio"/> 0.02%	<input type="radio"/> 0.02%
	Rule of 80	8	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%
	Rule of 75	9	<input checked="" type="radio"/> 0.01%	<input checked="" type="radio"/> 0.01%	<input checked="" type="radio"/> 0.02%	<input checked="" type="radio"/> 0.02%
	30 Years at Any Age	10	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%
20 Years at Any Age	11	<input checked="" type="radio"/> 0.02%	<input checked="" type="radio"/> 0.03%	<input checked="" type="radio"/> 0.04%	<input checked="" type="radio"/> 0.05%	
Other Options	Partial Lump Sum	12	<input type="checkbox"/> 0.03%	<input type="checkbox"/> 0.03%	<input type="checkbox"/> 0.03%	<input type="checkbox"/> 0.03%
Employer Contribution Rate	Normal Cost	13	3.13%	4.91%	6.70%	8.48%
	Unfunded Accrued Actuarial Liability (UAAL)	14	0.06%	0.08%	0.09%	0.12%
	Total	15	3.19%	4.99%	6.79%	8.60%
Unfunded Accrued Actuarial Liability	UAAL Amount	16	\$982	\$1,099	\$1,514	\$1,635
	Amortization Period in Years	17	20 Years	20 Years	20 Years	20 Years
Payment Upon Participation	Full UAAL Payoff Amount	18	\$1,012	\$1,133	\$1,560	\$1,685
	Actual Payment Amount	19	\$0	\$0	\$0	\$0
Elected Rate	Elected Rate	20	0.00%	0.00%	0.00%	0.00%

Other Information from the Preliminary Actuarial Study

Number of employees eligible for TCDRS membership	3
Average length of service of these employees (including "other system service")	0.61
Average age of these employees	35
Annualized payroll for the eligible employees	\$137,440
Payroll increase assumption	0.0%

Group Term Life Coverage		21	<input type="radio"/> None	0.00%		
	GTL Election	22	<input type="radio"/> Employees Only	0.04%		
		23	<input checked="" type="radio"/> Employees and Retirees	0.04%		
Estimated First Year Cost of Benefits*	Pension	24	\$4,384	\$6,858	\$9,332	\$11,820
	GTL	25	\$55	\$55	\$55	\$55
	Total	26	\$4,439	\$6,913	\$9,387	\$11,875

* The cost of benefits will vary depending on actual payroll. This estimate is based on the annual reported payroll.

Texas County & District Retirement System
Preliminary Actuarial Study with Assumed Participation Date 08/01/2024
Winnie Stowell Hospital District

			Plan 1	Plan 2	Plan 3	Plan 4
Benefit Provisions	Employee Deposit Rate	1	5%	5%	5%	5%
	Employer Matching Rate	2	100%	150%	200%	250%
	Monetary Prior Service Percentage	3	0%	0%	0%	0%
	Savings Rate	4	10.0%	12.5%	15.0%	17.5%
Eligibility Options	Vesting & Retirement at Age 60					
	10 Years	5	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%
	8 Years	6	<input checked="" type="radio"/> 0.01%	<input checked="" type="radio"/> 0.01%	<input checked="" type="radio"/> 0.01%	<input checked="" type="radio"/> 0.01%
	5 Years	7	<input type="radio"/> 0.02%	<input type="radio"/> 0.02%	<input type="radio"/> 0.02%	<input type="radio"/> 0.02%
	Rule of 80	8	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%
	Rule of 75	9	<input checked="" type="radio"/> 0.01%	<input checked="" type="radio"/> 0.02%	<input checked="" type="radio"/> 0.02%	<input checked="" type="radio"/> 0.03%
	30 Years at Any Age	10	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%	<input type="radio"/> 0.00%
20 Years at Any Age	11	<input checked="" type="radio"/> 0.03%	<input checked="" type="radio"/> 0.04%	<input checked="" type="radio"/> 0.05%	<input checked="" type="radio"/> 0.06%	
Other Options	Partial Lump Sum	12	<input type="checkbox"/> 0.03%	<input type="checkbox"/> 0.04%	<input type="checkbox"/> 0.04%	<input type="checkbox"/> 0.04%
Employer Contribution Rate	Normal Cost	13	3.92%	6.14%	8.37%	10.60%
	Unfunded Accrued Actuarial Liability (UAAL)	14	0.08%	0.09%	0.12%	0.14%
	Total	15	4.00%	6.23%	8.49%	10.74%
Unfunded Accrued Actuarial Liability	UAAL Amount	16	\$1,039	\$1,552	\$1,774	\$2,008
	Amortization Period in Years	17	20 Years	20 Years	20 Years	20 Years
Payment Upon Participation	Full UAAL Payoff Amount	18	\$1,070	\$1,599	\$1,828	\$2,070
	Actual Payment Amount	19	\$0	\$0	\$0	\$0
Elected Rate	Elected Rate	20	0.00%	0.00%	0.00%	0.00%

Other Information from the Preliminary Actuarial Study

Number of employees eligible for TCDRS membership	3
Average length of service of these employees (including "other system service")	0.61
Average age of these employees	35
Annualized payroll for the eligible employees	\$137,440
Payroll increase assumption	0.0%

Group Term Life Coverage		21	<input type="radio"/> None	0.00%		
	GTL Election	22	<input type="radio"/> Employees Only	0.04%		
		23	<input checked="" type="radio"/> Employees and Retirees	0.04%		
Estimated First Year Cost of Benefits*	Pension	24	\$5,498	\$8,563	\$11,669	\$14,761
	GTL	25	\$55	\$55	\$55	\$55
	Total	26	\$5,553	\$8,618	\$11,724	\$14,816

* The cost of benefits will vary depending on actual payroll. This estimate is based on the annual reported payroll.

EXHIBIT “B-1”

STANDARD FLOOD NON-BINDING QUOTE



Wright National Flood Insurance Company
 A Stock Company
 PO Box 33003
 St. Petersburg, FL, 33733
 Office: 800.820.3242
 Fax: 800.850.3299

AGENCY INFORMATION		QUOTE INFORMATION	
Agency Number	605611	Quote Number	42QT5380376699
Agency	J S EDWARDS & SHERLOCK INS AGENCY LLP	Applicant	WINNIE STOWELL HOSPITAL DISTRICT
Address	PO BOX 22237,	Current Date	07/01/2024
City, State, Zip	BEAUMONT, TX 77720-2237	Effective Date	07/31/2024
Phone Number	409.832.7736	Rating Method	Rating Engine

BUILDING INFORMATION			
Property Address	2626 HWY 124	Building Replacement Cost	\$558,168
City, State, Zip	WINNIE, TX 77665	Building Square Footage	4000 sq. ft.
Construction Date	07/01/2000	Occupancy Type	Non-Residential Building
Primary Residence	No	Foundation Type	Slab on Grade
Pre-FIRM	No	# of Floors	1
Newly Mapped Discount	No	Elevation Certificate	None
Machinery & Equipment	Not Elevated		
Building Flood Proofed	No		

COMMUNITY INFORMATION		COVERAGE/PREMIUM INFORMATION		
Program Type	Flood Regular Policies	Coverage	Limits	Deductible
Community	480119 - CHAMBERS COUNTY *	Building	\$250,000	\$1,250
Flood Risk/Rated Zone	X	Discount/Surcharge	\$0	
Zone Determination #	DRP00000000017356129	1 Year Premium	\$1,547	
Zone Reference #	1100409184			

IMPORTANT NOTES

THIS IS NOT AN OFFER FOR INSURANCE. THIS QUOTE IS NON-FIRM AND NON-BINDING AND SUBJECT TO REVIEW AND ADJUSTMENT.

Please submit the required documentation listed on your application summary for review and approval. If additional information is required to actuarially rate the risk, you will be contacted.

FLOOD INSURANCE WAIVER OF AGENT'S RESPONSIBILITY

I understand that, if I decline this protection, my agent and/or his/her agency will be held harmless and not liable in the event I suffer a flood loss. I have been made aware of the following facts:

- Homeowners insurance does not cover flood damage.**
- Federal disaster assistance is most typically an interest-bearing loan.**
- Flooding can and does occur in low-risk zones nationwide.**

(Initial next to the following. Sign and date at the bottom.)

_____ I reject building and contents coverage for flood protection.

_____ I reject contents coverage for flood protection.

_____ I understand that my building coverage is lower than the replacement cost of my structure.

Property Owner Signature: _____ Date: _____

This quote is issued by Wright National Flood Insurance Company 20240701153337

The online application process must be completed. *Please do not submit this form with your payment.*

Carefully review the quote being provided for accuracy. Price and terms associated with this quote are subject to underwriting review and may not be available if FEMA rates change. **Please refer to the policy for complete terms, conditions, and exclusions.** Please refer to www.ambest.com for rating, financial size category and additional information on the insurance carrier shown on this quote.

STANDARD FLOOD NON-BINDING QUOTE



Wright National Flood Insurance Company
A Stock Company
PO Box 33003
St. Petersburg, FL, 33733
Office: 800.820.3242
Fax: 800.850.3299

AVAILABLE DEDUCTIBLE/PREMIUM COMBINATIONS

Building	Contents	Discount/Surcharge	Total Premium
\$1,250	\$0	\$0	\$1,547
\$2,000	\$0	\$0	\$1,538
\$5,000	\$0	\$0	\$1,516
\$10,000	\$0	\$0	\$1,460
\$25,000	\$0	\$0	\$1,360
\$50,000	\$0	\$0	\$1,193

This quote is issued by Wright National Flood Insurance Company

20240701153337

The online application process must be completed. *Please do not submit this form with your payment.*

Carefully review the quote being provided for accuracy. Price and terms associated with this quote are subject to underwriting review and may not be available if FEMA rates change. **Please refer to the policy for complete terms, conditions, and exclusions.** Please refer to www.ambest.com for rating, financial size category and additional information on the insurance carrier shown on this quote.

EXHIBIT “B-2”

Hubert Oxford IV

From: Victoria Carlo <victoria@wshd-tx.com>
Sent: Friday, July 5, 2024 11:05 AM
To: Anthony Stramecki; Jeff Rollo
Cc: Hubert Oxford IV
Subject: Fwd: Estimate 1763 from Technology Solutions of Texas, L.L.C.

All,

Here are more details regarding the phones I mentioned at the last meeting. While our phone service is working fine, the actual handsets are giving us trouble. From what I understand from employees who have been here longer than myself, this has been an ongoing issue.

Currently, we face the problem of not being able to hear the incoming caller consistently. Many calls encounter broken-up conversations or we do not hear anything on our end.

The savings on the service is definitely a positive aspect. It seems like the quote includes totals for multiple handset options, so the final amount will depend on which option we choose.

Moving to this new system does not mean we have to go automated. Routing calls is an option, but it may not be the path we choose to take.

Thank you for your attention to this matter.

Kindly,

Victoria Carlo



Administrator

Office: (409)296-1003

Fax: (409)400-4023

Email: victoria@wshd-tx.com

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This message is intended only for the use of the individual to whom it is addressed and may contain information that is privileged, confidential, or prohibited from disclosure under applicable federal or state law. If the reader of this message is not the intended recipient or the employee agent responsible for delivering the message to the intended recipient, you are hereby notified that reading this communication or any dissemination, distribution, or copying of this communication is strictly prohibited. If you have received this communication in error, please call (409) 296-1003 and ask to speak with the sender. Also, you should delete the message from your system. Thank you.

----- Forwarded message -----

From: Ronald Husbands <ronnie@techsol-tx.com>
Date: Thu, Jun 27, 2024 at 4:24 PM
Subject: Re: Estimate 1763 from Technology Solutions of Texas, L.L.C.
To: Victoria Carlo <victoria@wshd-tx.com>

Do you have time for me to come by the District tomorrow? I can bring a couple of phones and can 'demonstrate' them to you.

The quote is a price list for different pieces of hardware. Realistically, you may want to have 4 CIP270's, one CIP230 for the Conference Area, and 2 Sangoma DC201's to carry around when needed... both connected to a single DC201 Base Station. We would need to determine exactly what you want for how you want to work. We can also add hardware at any time... so if you want to start with a single 270 and 2 DC201's, we can do that... and add another 1 or 2 270's later.

As for the monthly costs, there are two line items that have the word (recurring) in them. Both of those will be separate monthly charges: One is for a Cloud Hosted PBX at "VULTR" - that is similar to your "phone company". The second is for ClearlyIP Trunks - that is equivalent to your "phone lines". ...so, about \$50/ month. However, I think both of those are a little high, and would expect the average of the two to be about \$45/month. I am also assuming you will want to add phone management to the monthly support contract at \$4/month per phone. The overall goal is to reduce your monthly spend by 50% or more, and have the new system pay for itself in 4 to 12 months.

Thanks,

-Ronnie

Get [Outlook for iOS](#)

From: Victoria Carlo <victoria@wshd-tx.com>
Sent: Thursday, June 27, 2024 4:02:29 PM
To: Ronald Husbands <ronnie@techsol-tx.com>
Subject: Fwd: Estimate 1763 from Technology Solutions of Texas, L.L.C.

Few questions:

What all are we getting with the quoted amount?

What will be our monthly committed cost?

Kindly,

Victoria Carlo



Administrator

Office: (409)296-1003

Fax: (409)400-4023

Email: victoria@wshd-tx.com

PRIVACY NOTICE and DISCLAIMER:

This message is intended only for the use of the individual to whom it is addressed and may contain information that is privileged, confidential, or prohibited from disclosure under applicable federal or state law. If the reader of this message is not the intended recipient or the employee agent responsible for delivering the message to the intended recipient, you are hereby notified that reading this communication or any dissemination, distribution, or copying of this communication is strictly prohibited. If you have received this communication in error, please call (409) 296-1003 and ask to speak with the sender. Also, you should delete the message from your system. Thank you.

----- Forwarded message -----

From: **Technology Solutions of Texas, L.L.C.** <quickbooks@notification.intuit.com>

Date: Thu, Jun 27, 2024 at 3:34 PM

Subject: Estimate 1763 from Technology Solutions of Texas, L.L.C.

To: <victoria@wshd-tx.com>
Cc: <ronnie@techsol-tx.com>

ESTIMATE 1763



Technology Solutions of Texas, L.L.C.

\$1,826.75

Review and pay

Powered by QuickBooks

Dear Victoria Carlo,

Please review the estimate below. Feel free to contact us if you have any questions. We look forward to working with you.

Thanks for your business!
Technology Solutions of Texas, L.L.C.

Technology Solutions of Texas, L.L.C.

5725 Frost St Beaumont, TX 77706

(409) 554-5953

ronnie@techsol-tx.com

<http://www.techsol-tx.com>

EXHIBIT “C”



07.24.24 WSHD Regular Board Meeting Indigent Care Report

1) Active Client Count:

- a) Indigent Clients: **83** – DOWN by **7** from **90** in **May**
 - **25** Apps, [**12 Renewals**, **7 Previous**, **6 New**, and **9 ER Referrals**]
 - **9** Approved [**8 Renewals**, **0 Previous**, **1 New**, and **0 ER Referrals**]
 - **1** Withdrew / **2** Denied / **11** Incomplete / **2** Pending
- b) Youth Counseling: **12** – Remained the same as last Month
- c) Irlen Services: **1** UP by 1 from **0** in **May**
- d) Dental: **6** clients used their benefit in **June**
- e) Vision Services: **7** clients used their benefit in **June**

2) Riceland Hospital & Clinics:

The **June** charges were DOWN by **\$23,000.00 K** from **\$68,680.00 K** to **\$45,676.00 K**. **CT Scan, Lab and X-Ray charges were down from the previous month.**

3) UTMB Hospital & Clinics:

UTMB **MON** charges were DOWN by **\$403 K** from **\$468.6 K** to **\$65.6 K** Down due to last month having 3-months of charges billed at the same time. Which included extensive OP Services and 1 In-Patient Charge.

4) Our over-all YTD expenditure Charts:

We have expended **40%** of the overall Indigent Care Budget

- **67%** of the Pharmacy budget
- **45%** of the Riceland budget
- **53%** of the UTMB budget
- **10%** of the Youth Counseling budget
- **98%** of the Vision budget
- **78%** of the Dental budget
- **38%** of the Thompson Outpatient Clinic budget
- **02%** of the Charity Care
- **133%** of the Irlen

5) Other items of Interest:

We have made progress on getting the PAP applications submitted and are awaiting approval on several.



CHART 1: 2024 YTD WSHD Services & Budget Status:

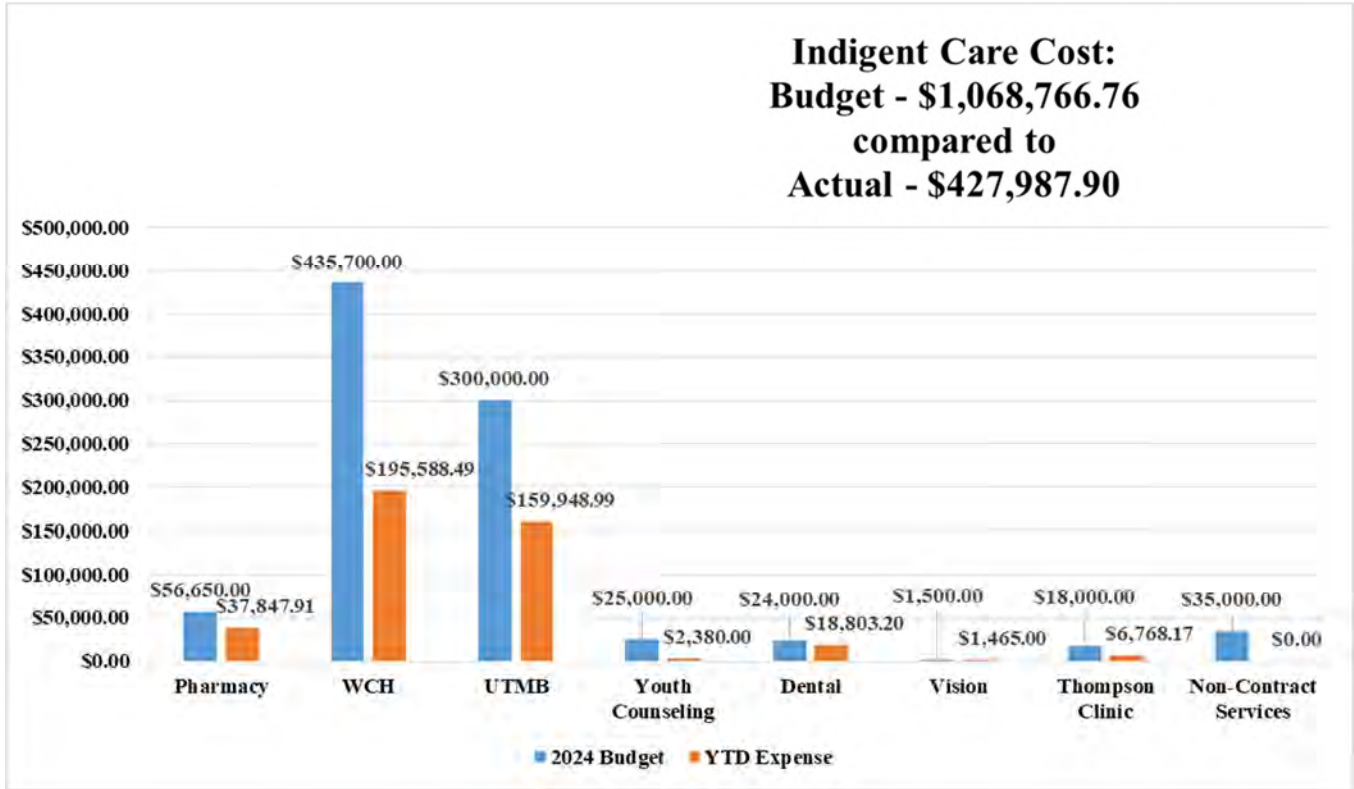
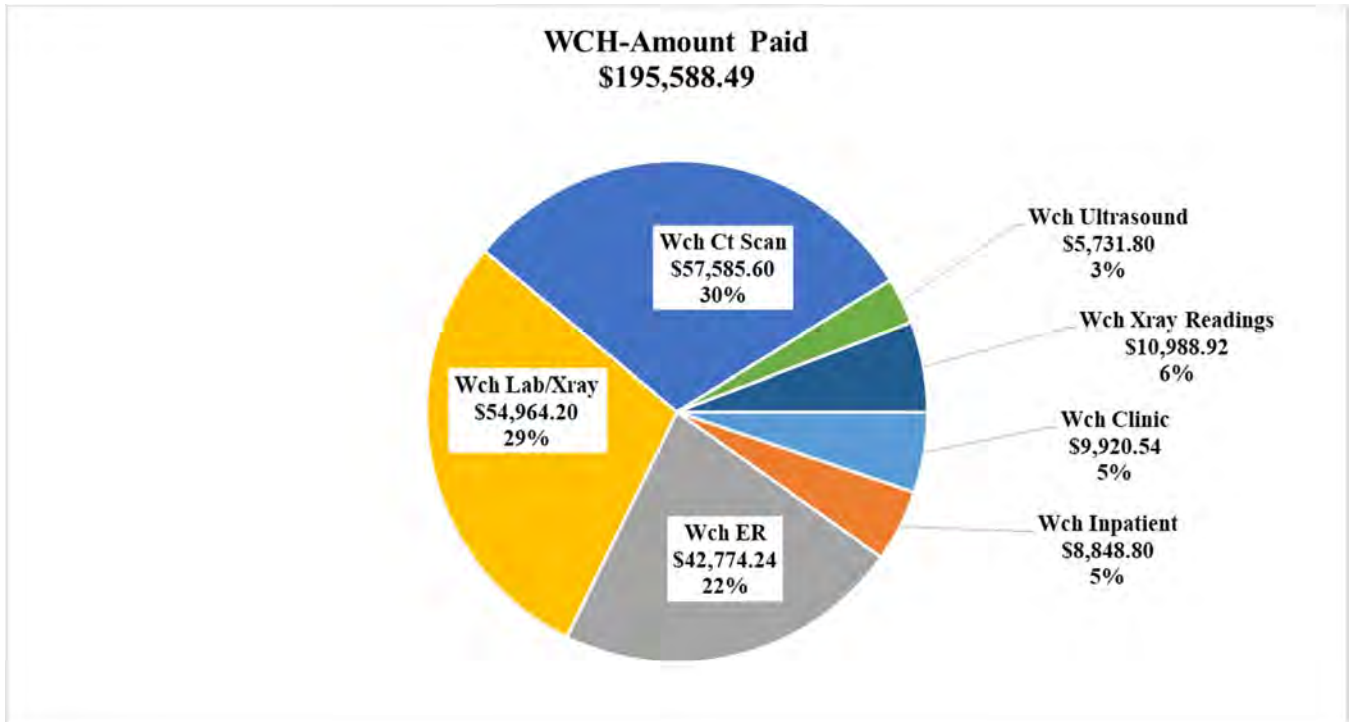


CHART 2: 2024 WCH Services Breakdown

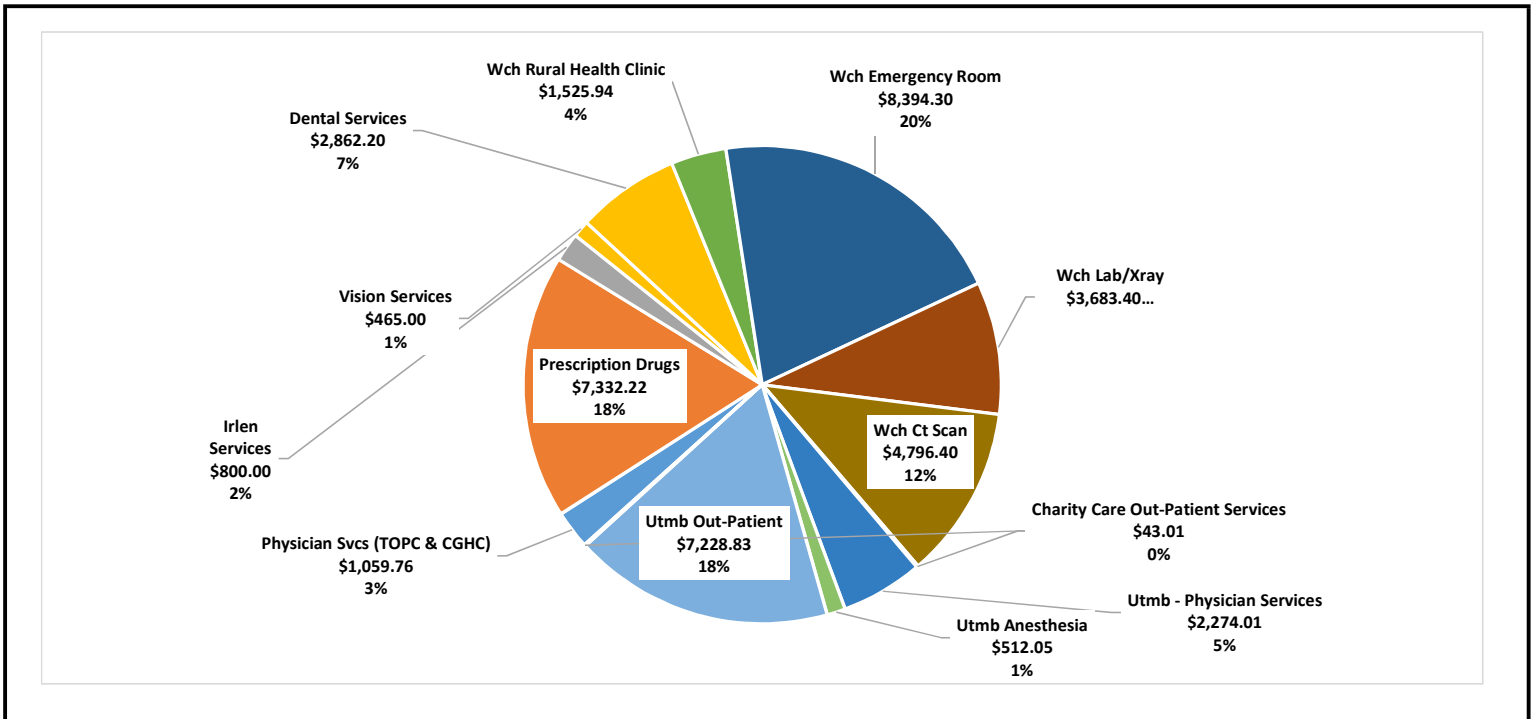


	May			June			2024 Year to Date		
Indigent Clients:	Indigent Clients:	90		Indigent Clients:	83		Clients Enrolled:	Total Unduplicated 116	Average 93
Youth Counseling:	Youth Counseling:	12		Youth Counseling:	12		YC Enrolled:	12	7
Irlen Services:	Irlen Services:	0		Irlen Services:	1		IS Enrolled:	1	0
PROVIDER TOTALS	Billed Amount	Contracted Rate	Actually Paid	Billed Amount	Contracted Rate	Actually Paid	Billed Amount	Contracted Rate	Actually Paid
Pharmacy									
Brookshire Brothers Pharmacy Corp	\$5,090.37	\$4,770.70	\$4,770.70	\$6,506.98	\$5,951.24	\$5,951.24	\$28,804.28	\$27,247.71	\$27,247.71
Wilcox Pharmacy	\$2,250.71	\$2,141.46	\$2,141.46	\$1,436.17	\$1,380.98	\$1,380.98	\$10,773.74	\$10,600.20	\$10,600.20
ADJUSTMENTS-Refunds/Credits									
Pharmacy Totals	\$7,341.08	\$6,912.16	\$6,912.16	\$7,943.15	\$7,332.22	\$7,332.22	YTD Refunds/Credits		\$0.00
							\$39,578.02	\$37,847.91	\$37,847.91
Winnie Community Hospital									
WCH Clinic	\$4,500.00	\$1,995.46	\$1,995.46	\$3,059.00	\$1,525.94	\$1,525.94	\$22,333.00	\$9,920.54	\$9,920.54
WCH Observation	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WCH ER	\$14,430.00	\$7,800.78	\$7,800.78	\$16,666.00	\$8,394.30	\$8,394.30	\$86,289.00	\$42,774.24	\$42,774.24
WCH Lab/Xray	\$19,065.00	\$11,439.00	\$11,439.00	\$6,139.00	\$3,683.40	\$3,683.40	\$91,607.00	\$54,964.20	\$54,964.20
WCH CT Scan	\$20,725.00	\$12,435.00	\$12,435.00	\$7,994.00	\$4,796.40	\$4,796.40	\$95,976.00	\$57,585.60	\$57,585.60
WCH Optional Services (Infusion)	\$1,561.00	\$215.69	\$215.69	\$491.00	\$67.37	\$67.37	\$2,589.00	\$375.88	\$375.88
WCH Xray (MRI)	\$3,851.00	\$159.31	\$159.31	\$7,702.00	\$318.09	\$318.09	\$42,952.00	\$1,918.71	\$1,918.71
WCH Lab/Xray Reading	\$2,327.00	\$321.04	\$321.04	\$421.00	\$57.48	\$57.48	\$11,200.00	\$10,988.92	\$10,988.92
WCH Inpatient	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$14,748.00	\$8,848.80	\$8,848.80
WCH Physical Therapy	\$1,420.00	\$852.00	\$852.00	\$0.00	\$0.00	\$0.00	\$4,133.00	\$2,479.80	\$2,479.80
WCH Ultrasound	\$801.00	\$480.60	\$480.60	\$3,204.00	\$1,922.40	\$1,922.40	\$9,553.00	\$5,731.80	\$5,731.80
WCH Totals	\$68,680.00	\$35,698.88	\$35,698.88	\$45,676.00	\$20,765.38	\$20,765.38	\$381,380.00	\$195,588.49	\$195,588.49
ADJUSTMENTS-Refunds/Credits	<i>Credit Adjustment</i>			<i>Credit Adjustment</i>			YTD Credit Adjustments		\$0.00
Balance on Contracted Amount (Lump Sum Payment of \$887,140.37)		\$712,317.26			\$691,551.88			\$691,551.88	
UTMB									
UTMB Physician Services	\$14,049.00	\$3,048.00	\$3,048.00	\$10,418.00	\$2,274.01	\$2,274.01	\$112,740.00	\$24,829.84	\$24,829.84
Barrier Reef (UTMB ER Physician)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,771.00	\$250.10	\$250.10
UTMB Anesthesia	\$1,586.00	\$916.30	\$916.30	\$2,720.00	\$512.05	\$512.05	\$17,602.00	\$8,440.75	\$8,440.75
UTMB In-Patient	\$21,727.07	\$1,178.94	\$1,178.94	\$0.00	\$0.00	\$0.00	\$215,368.13	\$16,776.55	\$16,776.55
UTMB Outpatient	\$403,841.15	\$63,385.55	\$63,385.55	\$36,251.28	\$7,228.83	\$7,228.83	\$670,067.07	\$99,393.41	\$99,393.41
UTMB Lab&Xray	\$25,034.83	\$5,507.66	\$5,507.66	\$15,905.11	\$2,713.42	\$2,713.42	\$49,810.94	\$9,785.94	\$9,785.94
CHARITY CARE @ UTMB	\$2,430.08	\$267.31	\$267.31	\$391.00	\$43.01	\$43.01	\$4,232.08	\$472.40	\$472.40
ADJUSTMENTS-Refunds/Credits						(\$60.61)	YTD Refunds/Credits		\$60.61
UTMB Totals	\$468,668.13	\$74,303.76	\$74,303.76	\$65,685.39	\$12,771.32	\$12,771.32	\$1,074,591.22	\$159,948.99	\$159,948.99
Local Community Clinics (601.04)									
Coastal Gateway Health Clinic	\$1,817.23	\$935.00	\$935.00	\$942.00	\$641.92	\$641.92	\$7,532.75	\$4,386.14	\$4,386.14
Physio Physical Therapy	\$1,369.00	\$677.59	\$677.59	\$260.00	\$108.00	\$108.00	\$4,881.00	\$2,087.46	\$2,087.46
Thompson Outpatient Clinic	\$5,472.00	\$1,400.77	\$1,400.77	\$2,008.00	\$417.84	\$417.84	\$27,716.00	\$6,768.17	\$6,768.17
Local Community Clinics	\$8,658.23	\$3,013.36	\$3,013.36	\$3,210.00	\$1,167.76	\$1,167.76	\$40,129.75	\$13,241.77	\$13,241.77
Non-Contracted Emergency Services (601.04)									
Non-Contract ER & In-Pt Services	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12,467.25	\$0.00	\$0.00
Winnie-Stowell EMS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Non-Contract Services Totals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12,467.25	\$0.00	\$0.00
Youth Counseling									
Benjamin Odom	\$850.00	\$850.00	\$850.00	\$255.00	\$255.00	\$255.00	\$2,380.00	\$2,380.00	\$2,380.00
Nicki Holtzman	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Youth Counseling Totals	\$850.00	\$850.00	\$850.00	\$255.00	\$255.00	\$255.00	\$2,380.00	\$2,380.00	\$2,380.00
Irlen Services									
Nancy Gaudet	\$0.00	\$0.00	\$0.00	\$800.00	\$800.00	\$800.00	\$800.00	\$800.00	\$800.00
Irlen Services Totals	\$0.00	\$0.00	\$0.00	\$800.00	\$800.00	\$800.00	\$800.00	\$800.00	\$800.00
Indigent Special Services									
Dental Services	\$17,829.90	\$5,618.80	\$5,618.80	\$10,239.97	\$2,862.20	\$2,862.20	\$57,008.53	\$18,803.20	\$18,803.20
Vision Services	\$0.00	\$0.00	\$0.00	\$465.00	\$465.00	\$465.00	\$1,465.00	\$1,465.00	\$1,465.00
Indigent Special Services Totals	\$17,829.90	\$5,618.80	\$5,618.80	\$10,704.97	\$3,327.20	\$3,327.20	\$58,473.53	\$20,268.20	\$20,268.20
Medical Supplies (601.04)									
Alliance Medical Supply (C-PAP)	\$330.00	\$230.00	\$230.00	\$0.00	\$0.00	\$0.00	\$790.00	\$575.00	\$575.00
Medial Supplies Total	\$330.00	\$230.00	\$230.00	\$0.00	\$0.00	\$0.00	\$790.00	\$575.00	\$575.00
Grand Totals	\$572,357.34	\$126,626.96	\$126,626.96	\$134,274.51	\$46,418.88	\$46,418.88	\$1,610,589.77	\$430,650.36	\$430,650.36

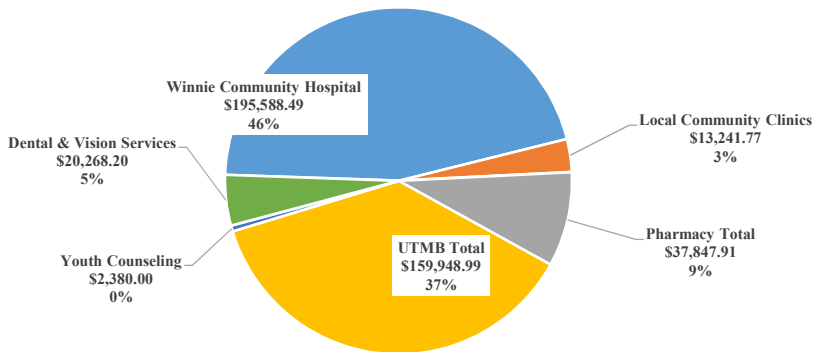
WSDH Indigent Care Director Report
June 2024 SOURCE CODE REPORT

Source	Description	Amount Billed	Amount Paid	% of Total
01	Physician Svcs (TOPC & CGHC)	\$2,950.00	\$1,059.76	2.29%
02	Prescription Drugs	\$7,943.15	\$7,332.22	15.82%
10	Optional Svcs	\$260.00	\$108.00	0.23%
12	Irlen Services	\$800.00	\$800.00	1.73%
13	Vision Services	\$465.00	\$465.00	1.00%
14	Dental Services	\$10,239.97	\$2,862.20	6.17%
21	Wch Rural Health Clinic	\$3,059.00	\$1,525.94	3.29%
24	Wch Emergency Room	\$16,666.00	\$8,394.30	18.11%
25	Wch Lab/Xray	\$6,139.00	\$3,683.40	7.95%
26	Wch Ct Scan	\$7,994.00	\$4,796.40	10.35%
27	Wch Optional Svcs (Infusion Therapy)	\$491.00	\$67.37	0.15%
28	Wch X-Ray (MRI)	\$7,702.00	\$318.09	0.69%
29	Wch Ultrasound	\$3,204.00	\$1,922.40	4.15%
44	Wch Xray Readings	\$421.00	\$57.48	0.12%
31	Utmb - Physician Services	\$10,418.00	\$2,274.01	4.91%
31-1	Utmb Anesthesia	\$2,720.00	\$512.05	1.10%
34	Utmb Out-Patient	\$36,251.28	\$7,228.83	15.59%
35	Utmb Lab/X-Ray	\$15,905.11	\$2,713.42	5.85%
39	Youth Counseling	\$255.00	\$255.00	0.55%
52	Charity Care Out-Patient Services	\$391.00	\$43.01	0.09%

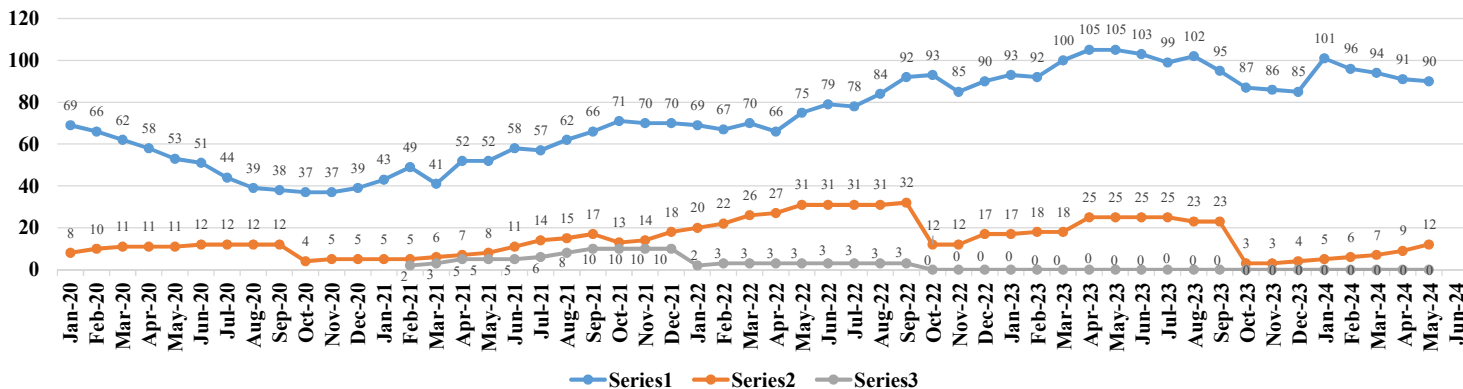
Expenditures	<u>\$134,274.51</u>	<u>\$46,418.88</u>	<u>100%</u>
	\$0.00	(\$60.61)	
Grand Total	\$134,274.51	\$46,358.27	100%



Year To Date Payments Incurred: \$430,650.36



Client Count Trending



PHARMACY SAVINGS = \$196,178.24

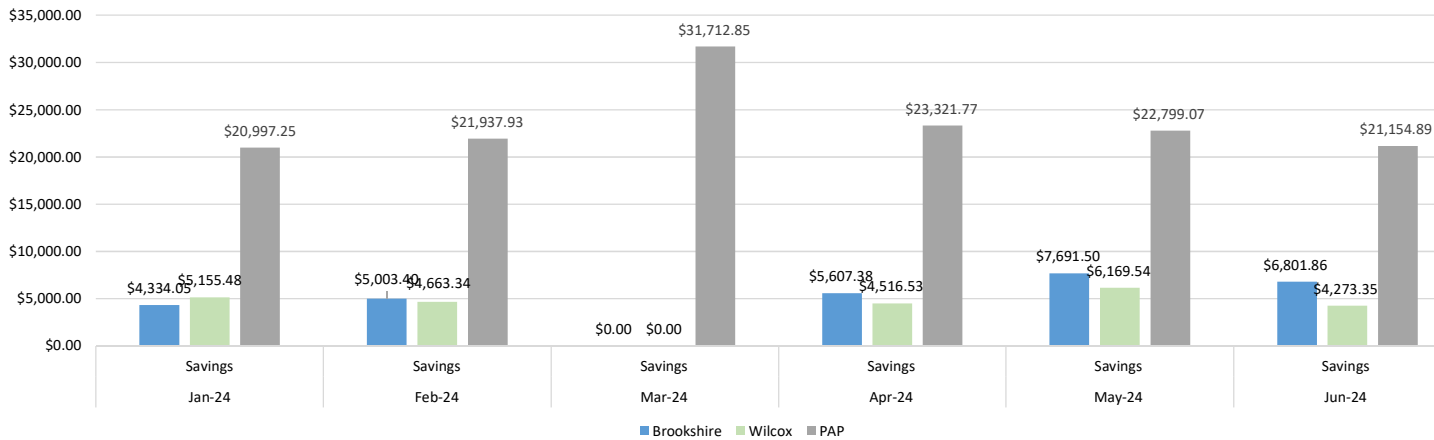


EXHIBIT “D”

Chambers County East Side Van Monthly Report



Commissioner PCT #1, Jimmy E Gore
 211 Broadway | PO BOX 260
 Winnie, Texas 77665
 409-296-8250

VEHICLE #1	EAST SIDE VAN #1	
TOTAL MILES DRIVEN		6955
TOTAL HOURS DRIVEN		320.08
TOTAL EXPENSES FOR MONTH		\$1,639.49
<i>FUEL COST</i>		\$1,639.49
<i>REPAIRS & MAINTENANCE COST</i>	_____	
<i>MISC EXPENSES</i>	_____	
TOTAL RIDERS		44
<i>TOTAL WSHD RIDERS</i>		3
TOTAL TRIPS		125
<i>TOTAL TRIPS FOR WSHD RIDERS</i>		2

VEHICLE #2	EAST SIDE VAN #2	
TOTAL MILES DRIVEN		3288
TOTAL HOURS DRIVEN		180.92
TOTAL EXPENSES FOR MONTH		\$899.62
<i>FUEL COST</i>		\$779.62
<i>REPAIRS & MAINTENANCE COST</i>	towing service _____	\$120.00
<i>MISC EXPENSES</i>	_____	
TOTAL RIDERS		31
<i>TOTAL WSHD RIDERS</i>		4
TOTAL TRIPS		67
<i>TOTAL TRIPS FOR WSHD RIDERS</i>		7

VEHICLE #3	RAV 4	
TOTAL MILES DRIVEN		1214
TOTAL HOURS DRIVEN		71.25
TOTAL EXPENSES FOR MONTH		\$1,064.51
<i>FUEL COST</i>		\$138.50
<i>REPAIRS & MAINTENANCE COST</i>	tires,labor _____	\$881.66
<i>MISC EXPENSES</i>	oil change _____	\$44.35
TOTAL RIDERS		18
<i>TOTAL WSHD RIDERS</i>		1
TOTAL TRIPS		20
<i>TOTAL TRIPS FOR WSHD RIDERS</i>		1

GRAND TOTALS		
MILES DRIVEN		11457
RIDERS		93
<i>WSHD RIDERS</i>		8
TRIPS		212
<i>WSHD TRIPS</i>		10
EXPENSES		\$3,603.62

Year to Date Details	2023-2024	1st Qtr Totals 2023-Nov 2023	Sept 2023	2nd Qtr Totals Dec 2023-Feb 2024	3rd Qtr Totals 2024-May 2024	Mar 2024	4th Qtr Totals 2024-Aug 2024	June	YTD DATE
ACCIDENT INSURANCE									
Number of Students Insured		1580		1595	1594				
Number of Claims Filed		46		27	16				89
CONTRACTED SERVICES (THERAPY)									
Number of Students Using:		331		321	345		0		997
Counseling		163		153	148				464
Occupational Therapy		83		74	82				239
Speech Therapy-provided by district speech pathologist		70		80	96				246
Physical Therapy		15		14	19				48
SCREENINGS									
Number of Students Screened:		0		801	276		0		1077
Vision		0		338	236		0		574
Hearing		0		293	10		0		303
Scoliosis		0		170	30		0		200
NURSE SALARY & BENEFITS, SUPPLIES, IMMUNIZATIONS, & MISC SERVICES									
Number of Nurses:		3		3	3		3		3
Number of Students:		2459		2169	2512				7140
Given First Aid		563		406	492				1461
Medication Administered		1275		1199	1363				3837
Injuries		31		20	12				63

2023-2024 Budget					
Category	Actual (YTD)	Budget	Budget Amend.	Difference	Balance
Insurance	\$ 45,827.00	\$52,000.00	\$52,000.00	\$0.00	\$6,173.00
Therapy and Related Contracted Services (Partial)	\$ 1,864.50	\$2,100.00	\$2,100.00	\$0.00	\$235.50
Speech Pathologist Salary (Partial)	\$ 54,815.84	\$23,310.00	\$23,310.00	\$0.00	(\$31,505.84)
*Nurse Salary/Benefits (Partial)	\$ 109,867.65	\$167,416.00	\$167,416.00	\$0.00	\$57,548.35
Nurse Supplies/Expenses (Partial)	\$ 15,383.73	\$20,000.00	\$20,000.00	\$0.00	\$4,616.27
Immunizations	\$ -	\$100.00	\$100.00	\$0.00	\$100.00
Total	\$227,758.72	\$264,926.00	\$264,926.00	\$0.00	\$37,167.28

*The district is now employing a full time speech pathologist in lieu of contracting those services out. We will pay a portion of that salary from hospital district funds until the Region 5 grant for the 3rd nurse expires. (March 2024).

Marcelous Williams Resource Center June 2024 Grant Report

Year to Date Details for 2024	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	YTD DATE
YTD WSHD REFERRALS	0	3	0	1	3	0	7
YTD Indigent Care (Medical, Dental & Vision)	0	0	0	1	1	0	2
YTD Prescription Assistance	0	0	0	0	0	0	0
YTD Youth Counseling	0	0	0	0	1	0	1
YTD Navigating Client Resources	0	3	0	0	1	0	4
YTD OTHER REFERRALS	1	5	1	1	0	0	8
YTD Gift of Life	0	3	0	0	0	0	3
YTD Work in Texas (Texas Workforce Commission)	0	0	1	0	0	0	1
YTD Chambers County Indigent or OmniPoint FQHC	0	0	0	0	0	0	0
YTD Chambers County Indigent Dental	0	0	0	0	0	0	0
YTD Transportation	0	0	0	0	0	0	0
YTD Medical Services (Other Than Indigent)	0	0	0	1	0	0	1
YTD G.E.T.-C.A.P.	0	1	0	0	0	0	1
YTD Misc. MWRC Available Services	1	1	0	0	0	0	2
YTD APPLICATIONS INITIATED/PROCESSED	23	34	28	17	27	16	145
YTD WSHD Indigent Care	0	0	0	0	0	0	0
YTD Prescription Assistance	0	0	0	0	0	0	0
YTD Social Security	2	4	1	5	6	2	20
YTD Medicare Savings Program	0	1	0	1	0	1	3
YTD Medicaid	6	8	9	2	5	3	33
YTD Food Stamps	15	17	16	9	15	10	82
YTD Home Repair	0	4	2	0	1	0	7
YTD G.E.T.-C.A.P.	0	0	0	0	0	0	0
YTD CLIENTS SERVED	18	27	20	16	24	15	120
YTD WSHD Clients	18	26	20	16	24	15	119
YTD New Winnie Clients	8	6	5	5	9	5	
*YTD Returning Winnie Clients	8	8	15	9	9	6	
*YTD Follow-ups New and Returning	2	13	5	2	6	4	
YTD Chambers County Residents	0	0	0	0	0	0	0
YTD Other County Residents	0	1	0	0	0	0	1
YTD OFFICE SUPPLIES EXPENSES	\$841.17	\$497.78	\$714.84	\$442.06	\$635.12	\$558.32	\$3,689.29
YTD STAFFING EXPENSES	\$1,330.00	\$3,015.67	\$8,335.51	\$5,430.84	\$5,424.34	\$5,106.17	\$28,642.53
YTD GRANT AMOUNT SPENT OF TOTAL \$77,590.00	\$2,171.17	\$3,513.45	\$9,050.35	\$5,872.90	\$6,059.46	\$5,664.49	\$32,331.82
YTD GRANT BALANCE REMAINING OF	\$75,418.83	\$71,905.38	\$62,855.03	\$56,982.13	\$50,922.67	\$45,258.18	\$45,258.18
OUTREACH ACTIVITIES/EVENTS ATTENDED	0	0	0	2	1	2	5

Jun-24										
MONTHLY REFERRALS & APPLICATIONS REPORT										
CLIENT DETAILS						APPLICATION(S) INITIATED WITH CLIENT				
DATE	REPEAT CLIENTS	Client Identifier	Client Residency Data			Social Security: Disability, SSI, Retirement	Medicare Savings Program	Medicaid	Food Stamps	G.E.T.-C.A.P.
	Enter "R"	Client Name: Example: Smi,J OR	Winnie Stowell Hosp Dist	Chambers County	Any Other County: ENTER					
	R FOR REPEAT CLIENTS	R FOR REPEAT CLIENTS								
6/4/2024	RF	Wil,J	X			X				
6/5/2024	RF	Cas,T	X					X		
6/5/2024	N	Har,J	X					X		
6/6/2024	RF	Gard,J	X			X				
6/6/2024	RF	Hya,P	X					X		
6/7/2024	RF	Roj,B	X				X	X		
6/7/2024	RF	Abs,L	X				X			
6/10/2024	RF	Hya,P	X					X		
6/13/2024	N	Dav,D	X				X			
6/13/2024	N	Mcc,J	X				X			
6/14/2024	RF	Cas,T	x					X		
6/14/2024	N	All,S	X					X		
6/20/2024	RF	Arm,L	X					X		
6/24/2024	RF	HYa,P	x					x		
		N-New								
		R-Repeat								
		NF-Followup/New								
		RF-Follow-up/Existing								
15	0	0	15	0	0	2	1	3	10	0

Jun-24		
OFFICE SUPPLY EXPENSES INCURRED		
DATE	EXPENSE DESCRIPTION	\$ AMOUNT SPENT
6/1/2024	Administrative Costs	\$558.32
TOTAL OFFICE SUPPLY EXPENSE FOR THE MONTH		\$558.32

WS VEMS June 2024 Grant Report



Winnie-Stowell Volunteer EMS
Winnie-Stowell Hospital District Report

Year to Date Details for 2024	Previous Year (2023) End	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	YTD DATE
CALL SUMMARY								
CALLS/TRANSPORTS REQUESTED	102	8	6	8	9	8	4	43
CALLS/TRANSPORTS MADE								
INSURED	60	5	3	5	5	7	2	27
SELF-PAY	17	0	2	2	3	1	1	9
TOTAL CALLS MADE	77	5	5	7	8	8	3	36
CALLS/TRANSPORTS DELAYED	3	0	0	0	0	0	0	0
TRANSPORTS NOT MADE	25	3	1	1	1	0	1	7
PERCENTAGE OF CALLS MADE	75%	62.5%	83.3%	87.5%	88.9%	100.0%	75.0%	83.7%
INVOICED/BILLED								
Insurance Billed during Month	\$79,777.63	\$5,738.67	\$3,838.01	\$8,008.43	\$7,977.39	\$12,205.28	\$3,113.07	\$40,880.85
Self-Pay Billed during the Month	\$29,969.41	\$0.00	\$1,395.93	\$1,766.12	\$2,827.32	\$723.13	\$1,281.35	\$7,993.85
Total	\$109,747.04	\$5,738.67	\$5,233.94	\$9,774.55	\$10,804.71	\$12,928.41	\$4,394.42	\$48,874.70
PAYMENTS RECEIVED								
Insurance Payments Rcvd during in the Month	\$31,939.70	\$1,616.98	\$1,022.13	\$2,887.50	\$2,206.18	\$1,245.56	\$0.00	\$8,978.35
Self-Pay Billed Rcvd during the Month	\$10,429.84	\$0.00	\$1,395.93	\$1,766.12	\$2,827.32	\$723.13	\$0.00	\$6,712.50
Total	\$42,369.54	\$1,616.98	\$2,418.06	\$4,653.62	\$5,033.50	\$1,968.69	\$0.00	\$15,690.85
ACCOUNTS RECEIVABLE-FUNDS OWED								
Owed by Insurance	\$21,466.99	\$2,249.92	\$1,798.20	\$2,390.12	\$2,716.73	\$10,827.98	\$3,113.07	\$23,096.02
Owed by Self-Pay	\$2,961.51	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,281.35	\$1,281.35
Total	\$24,428.50	\$2,249.92	\$1,798.20	\$2,390.12	\$2,716.73	\$10,827.98	\$4,394.42	\$24,377.37
STAFFING EXPENSES								
	\$120,580.00	\$12,418.14	\$12,052.90	\$12,939.91	\$12,522.49	\$12,679.02	\$12,279.00	\$74,891.46

Jun-24									
MONTHLY CALLS/TRANSPORTS REPORT									
CALLS REQUESTED			CALL RESULTS			BILLING DETAILS		TIMELY BILLING	
DATE	PICK UP LOCATION	DROP OFF LOCATION	MADE: M	DELAYED: D	REASSIGNED: R	WSEMS Incident#	Billing Identifier	Billing Date	Days from DOS to Bill
6/6/2024	Riceland	Hermann Memorial TMC	M			24-16770	2428	6/28/2024	22
6/10/2024	Riceland	Baptist Beaumont	M			24-17156	2402	6/19/2024	9
6/15/2024	Riceland	UTMB Galveston (No Paramedic Available)			R				N/A
6/25/2024	Riceland	HCA Houston TMC	M			CS-24-18675	2427	6/28/2024	3
TOTAL CALLS & RESULTS			4	3	0			AVERAGE DAYS TO BILL:	2

Jun-24													
MONTHLY TRANSPORT AMBULANCE EMPLOYEE SCHEDULE & PAYROLL													
DATE	EMPLOYEE NAME	SHIFT SCHEDULE	GRANT ALLOWED SALARY (SPR HR)	MAXIMUM HOURS	MAXIMUM PAY	HOURS WORKED	NOT STAFFED		GRANT FUNDED PAYROLL AMOUNT	ACTUAL		ACTUAL PAYROLL AMOUNT	GRANT vs ACTUAL SURPLUS or DEFICIT
							SURPLUS or DEFICIT	OVER-TIME HOURS		SURPLUS or DEFICIT	SURPLUS or DEFICIT		
6/1/2024	Kayla Callesto	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$16.00	\$384.00	\$33.42
6/2/2024	Jennifer Hafford	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$20.00	\$480.00	(\$62.58)
6/3/2024	Brad Eads	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$20.00	\$480.00	(\$62.58)
6/4/2024	Lori Peine	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$16.00	\$384.00	\$33.42
6/5/2024	Travis Delacerda	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$15.00	\$360.00	\$57.42
6/6/2024	Kayla Callesto	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$16.00	\$384.00	\$33.42
6/7/2024	Boyd Abshire	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$17.00	\$408.00	\$9.42
6/8/2024	Andrew Broussard	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$19.00	\$456.00	(\$38.58)
6/9/2024	Haley Brandin	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$16.00	\$384.00	\$33.42
6/10/2024	Brad Eads	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$20.00	\$480.00	(\$62.58)
6/11/2024	Lori Peine	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$16.00	\$384.00	\$33.42
6/12/2024	Andrew Broussard	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$19.00	\$456.00	(\$38.58)
6/13/2024	Haley Brandin	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$16.00	\$384.00	\$33.42
6/14/2024	Austin Isaacks	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$16.00	\$384.00	\$33.42
6/15/2024	Kayla Callesto	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$16.00	\$384.00	\$33.42
6/16/2024	James Eshlman	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$20.00	\$480.00	(\$62.58)
6/17/2024	Brad Eads	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$20.00	\$480.00	(\$62.58)
6/18/2024	Lori Peine	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$16.00	\$384.00	\$33.42
6/19/2024	Haley Brandin	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$16.00	\$384.00	\$33.42
6/20/2024	Andrew Broussard	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$19.00	\$456.00	(\$38.58)
6/21/2024	Austin Isaacks	8pm - 7am	\$17.39	24	\$417.42	11	(13.0)	0	\$191.32	(\$226.10)	\$16.00	\$176.00	\$15.32
6/22/2024	Kayla Callesto	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$16.00	\$384.00	\$33.42
6/23/2024	Joshua Wahleithner	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$30.00	\$720.00	(\$302.58)
6/24/2024	Brad Eads	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$20.00	\$480.00	(\$62.58)
6/25/2024	Lori Peine	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$16.00	\$384.00	\$33.42
6/26/2024	Kayla Callesto	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$16.00	\$384.00	\$33.42
6/27/2024	Haley Brandin	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$16.00	\$384.00	\$33.42
6/28/2024	Andrew Broussard	8am - 7am	\$17.39	24	\$417.42	23	(1.0)	0	\$400.02	(\$17.39)	\$19.00	\$437.00	(\$36.98)
6/29/2024	Mark Matak	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$17.00	\$408.00	\$9.42
6/30/2024	Austin Isaacks	7am -7am	\$17.39	24	\$417.42	24	0.0	0	\$417.42	\$0.00	\$16.00	\$384.00	\$33.42
TOTAL SALARY EXPENSE FOR THE MONTH:			\$17.39	720.00	\$12,522.49	706.00	(14.0)	0	\$12,279.00	(\$243.49)	\$17.70	\$12,517.00	(\$238.00)

EXHIBIT “E”



Report to Winnie-Stowell Hospital District

July 26, 2024

Report prepared by: Kaley Smith, CEO; Coastal Gateway Health Center

- We heard back from HRSA regarding the Look Alike application. They requested some additional information and a couple of revisions to the Sliding Fee Discount Program document. THRIVE will be onsite within the next month conducting a Mock Site Visit sometime the week of August 12-16.
- There is a HRSA New Access Point (NAP) application that was just released last week. The first due date is August 15, 2024 (in grants.gov) and September 30, 2024 (in the HRSA EHB). Announcements and funding would not be available until June 2025. Planning to submit an application.
- Generator update. Centerpoint has not been helpful or responsive for us to be set up as a new customer and to have natural gas lines run at the clinic. I have about three (3) pages of documented correspondence with calls for assistance. I reached out to the company that will install the generator to ask about installing a converter (from natural gas to propane) and ordering a propane tank. Waiting to hear back from Kent Burch from Gulf Coast Generators.
- We officially have vaccines at the health center; both private stock (for commercial insurances) and state stock (Medicaid and uninsured). Registration is keeping a list of patients that have requested vaccines and will begin scheduling them within the next couple of weeks.
- A requirement of being a FQHC/FQHC LAL is to provide 'After Hours' call to patients. We are using a system called Night Nurse and the new system will be setup by/around the first part of August. We will also make some changes to our phone system around this time as well.
- The statistical report for June is attached.
- Recruitment of a full-time Finance Director will begin soon. We will be using DSHS Incubator grant funding for this position and is part of this grant timeline and project.
- Upcoming Events/Activities
 - We are participating again this year in the 2nd Annual Chambers County Back-to-School Bash on Saturday, July 20th. This is a community wide event with many vendors and agencies. We were asked to sit on the planning committee this year and joined representatives from the County, Riceland, and Chambers Health. We will have a booth at the event and are also partnering with Chambers Health to provide sports physicals to attendees at no cost; Dr. Lyons has volunteered to be the male provider.
 - Sports Physical Days: Thursday, July 25th from 8:30 to 10:30 am at High Island ISD and Monday, July 29th from 1:00 to 5:00 pm at the clinic.
 - Mobile Mammo Day: August 20th.
 - Programming is still ongoing with Winnie Square once a month.
- Congregate Meals program at the Methodist Church in Winnie. The health center is now responsible for the programming on the third Thursday of each month. Our programming for the month of June



included playing Bingo with the attendees. The health center has signed up to deliver Meals on Wheels to residents in the Winnie community once a month on Thursday's, we have been asked to help deliver on August 8th and September 12th.

- Grants.

- United Way of Greater Baytown and Chambers County FY 2024-2025 funding cycle—we were awarded the grant in the amount of \$60,142. This funding will be used to add our Eligibility Specialist.
- I submitted a Letter of Intent for a small grant request through the Methodist Community Benefits Grant Program for FY 2025. The grant request was in the amount of \$20,064 and is for breast cancer screening (for our Mobile Mammography program). I had an initial meeting with a representative and will have a second call within the next week. We will be recommended for funding, but not through the original program/request as they have funding specific for breast cancer screening and feel our project fits better under this program.

EXHIBIT ‘F’

Facility ID	Operator	Facility Name	May Metrics Met?				YTD Comp 1 Attainment					YTD Comp 2 Attainment				
			Comp 1	Comp 2: 4 Hrs	Comp 2: 8 Hrs	Comp 2: Staffing	Yes	Yes %	No	No %	Total	Yes	Yes %	No	No %	Total
5256	Regency	Spindletop Hill Nursing and Rehabilitation Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
5297	Regency	Hallettsville Rehabilitation & Nursing Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
5234	Regency	Monument Hill Rehabilitation & Nursing Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
5203	Regency	The Woodlands Healthcare Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
4154	Caring	Garrison Nursing Home & Rehabilitation Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
4376	Caring	Golden Villa	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
110098	Caring	Highland Park Care Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
4484	Caring	Marshall Manor Nursing & Rehabilitation Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
4730	Caring	Marshall Manor West	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
4798	Caring	Rose Haven Retreat	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
5182	Caring	The Villa at Texarkana	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
5166	Nexion	Oak Manor Nursing Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	25	92.6%	2	7.4%	27
5369	Gulf Coast	Oak Village Healthcare	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
5193	Gulf Coast	Corrigan LTC Nursing & Rehabilitation	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
4747	Gulf Coast	Parkview Manor Nursing & Rehabilitation	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
5154	Gulf Coast	Copperas Cove Nursing & Rehabilitation	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
5289	Gulf Coast	Winnie L Nursing & Rehabilitation	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
5240	Gulf Coast	Hemphill Care Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
5307	SLP	Oakland Manor Nursing Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
4028	SLP	Coronado Nursing Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
100790	HMG	Park Manor Conroe	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
4456	HMG	Park Manor Cyfair	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
101489	HMG	Park Manor Cypress Station	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
101633	HMG	Park Manor Humble	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
102417	HMG	Park Manor Quail Valley	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
102294	HMG	Park Manor Westchase	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
104661	HMG	Park Manor The Woodlands	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
103191	HMG	Park Manor of Tomball	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
5400	HMG	Park Manor of Southbelt	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
104541	HMG	Deerbrook Skilled Nursing and Rehab	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
4286	HMG	Friendship Haven Healthcare & Rehab Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
5225	HMG	Willowbrook Nursing Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
106988	HMG	Accel at College Station	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
102375	HMG	Cimarron Place Health & Rehabilitation Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
106050	HMG	Silver Springs Health & Rehabilitation Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
4158	HMG	Red Oak Health and Rehabilitation Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
5255	HMG	Mission Nursing and Rehabilitation Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
4053	HMG	Stephenville Rehabilitation and Wellness Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
103743	HMG	Hewitt Nursing and Rehabilitation	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
103011	HMG	Stallings Court Nursing and Rehabilitation	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
104537	HMG	Pecan Bayou Nursing and Rehabilitation	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
5372	HMG	Holland Lake Rehabilitation and Wellness Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
5387	HMG	Stonegate Nursing and Rehabilitation	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
102993	HMG	Green Oaks Nursing and Rehabilitation	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
103223	HMG	Crowley Nursing and Rehabilitation	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
103435	HMG	Harbor Lakes Nursing and Rehabilitation Center	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
101157	HMG	Arbrook Plaza	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
106566	HMG	Forum Parkway Health & Rehabilitation	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
105966	HMG	Treviso Transitional Care	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
100806	HMG	Gulf Pointe Plaza	MET	MET	MET	MET	9	100.0%	0	0.0%	9	27	100.0%	0	0.0%	27
4807	SLP	Sebreze Nursing and Rehabilitation	MET	MET	MET	MET	5	55.6%	4	44.4%	9	27	100.0%	0	0.0%	27
4584	SLP	Palestine Healthcare Center	MET	MET	MET	MET	5	55.6%	4	44.4%	9	27	100.0%	0	0.0%	27
4586	SLP	Paris Healthcare Center	MET	MET	MET	MET	6	66.7%	3	33.3%	9	27	100.0%	0	0.0%	27
4996	SLP	Overton Healthcare Center	MET	MET	MET	MET	4	44.4%	5	55.6%	9	27	100.0%	0	0.0%	27
5250	Caring	Oak Brook Health Care Center	MET	MET	MET	MET	5	55.6%	4	44.4%	9	27	100.0%	0	0.0%	27
5261	Caring	Gracy Woods Nursing Center	MET	MET	MET	MET	5	55.6%	4	44.4%	9	27	100.0%	0	0.0%	27
Total NSGO							480	95.2%	24	4.8%	504	1510	99.9%	2	0.1%	1512

Private to NSGO Mid-Year



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Winnie-Stowell Hospital District

Stephenville Rehabilitation and Wellness Center

2601 Northwest Loop
Stephenville, TX 76401

June 24, 2024

Facility Administrator: Jana Sanders

Stephenville Rehabilitation and Wellness Center is licensed for 122 beds and its current census is 80 residents including 12 skilled patients. Admissions and referrals have decreased this summer season, but the facility is working hard to find ways to capture more potential admissions. The facility is close to its budget census of 84 residents but has a goal to reach a total census of 90 residents.

Staffing is going well at the facility, and there are no issues at this time. There is one vacant LVN position for which the facility is recruiting and interviewing. Its CNA class is nearly wrapped up and has been a big help supporting staffing needs.

The facility has not had any recent visits from state surveyors. There are no new self-reports at this time.

Stephenville Rehabilitation and Wellness Center has a 5-star rating overall. The facility has a 4-star rating in Health Inspections, a 2-star rating in Staffing, and a 5-star rating in Quality Measures.

The facility had its QAPI meeting earlier this month. It is focusing on RTA and pressure ulcers. The interdisciplinary team reviews the residents who are at-risk or triggering at the start and end of each day. The team works well with its physician partners, but the facility has one doctor who often sends patients out to the hospital. The administrator and IDT team are working with the physician to find opportunities to keep patients in the facility longer where appropriate. Discussed the ways the facility manages this relationship and educates staff about reporting. The facility trains its staff in how to speak with the doctor and to provide all pertinent details. When the doctor has the whole, clear picture, he is able to be comfortable making a decision and is more comfortable keeping the resident at the facility when appropriate.

There is no COVID in the facility at this time.

Discussed recent grievances and the administrator's process for resolving issues. There are no trends reported at this time. When there are unhappy residents or family members, the team works to establish strong communication and partner with the individuals to a solution which is appropriate for everyone involved.

The project updating the shower room will be finished later this week. Discussed other ongoing maintenance efforts. The facility manages the needs of its PTAC units in the resident rooms and recently replaced some of the cages on various units where needed.



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Red Oak Health and Rehabilitation Center

101 Reese Drive
Red Oak, TX 74154

June 25, 2024

Facility Administrator: Lee Richard

Red Oak Health and Rehabilitation Center is licensed for 144 beds and its current census is 109 residents. There are several referrals under review and the facility hopes to reach a census of 115 residents by Friday.

The facility is recruiting to fill four CNA and three nurse vacancies. The team is scheduling interviews and has some promising candidates under review.

The state visited the facility last week to investigate some outstanding self-reports. The surveyor exited and all reasons for investigation were unsubstantiated. There are no new self-reports submitted at this time.

Red Oak Health and Rehabilitation Center has a 1-star overall rating. The facility has a 1-star rating in Health Inspections, a 1-star rating in Staffing, and a 4-star rating in Quality Measures.

Discussed the facility's recent monthly QAPI meeting. The interdisciplinary team is still focusing on falls and RTA. The facility admits many residents who are high fall risks. The team works to apply personalized interventions to meet the needs of the residents.

The administrator shared the facility's upcoming events and activities including its July 4 celebration. The facility invites residents to participate in activities and strives to offer new experiences all residents can enjoy.

The facility in-serviced staff today regarding customer service. Discussed some challenges working with certain residents and their family members. The administrator works to make sure staff display great customer service and communication skills. Staff should report to the administrator if they experience any issues.

The facility van is being worked on at this time to fix the air conditioning.



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Copperas Cove LTC Partners Inc
607 W. Avenue B
Copperas Cove, TX 76522

June 26, 2024

Facility Administrator: Nadeline Greene

This report is from the site visit to Copperas Cove LTC on June 26, 2024. A tour of the facility was provided and then a meeting was held with the administrator to provide an update on the facility.

Copperas Cove LTC is licensed for 124 beds and its current census is 71 residents. The facility had two admissions yesterday, and there are nine more admissions scheduled this week. The facility also has two residents in the hospital at this time who are expected to return when appropriate for discharge. The facility receives lots of referrals and has a strong marketer driving these efforts. The facility is able to admit most of the referrals it receives. It normally receives up to four new referrals each day.

Discussed staffing needs and opportunities at the facility. The team is currently seeking two day-shift and one night-shift nurses. The facility uses agency staffing when needed, but it is generally to cover a few shifts each week. The facility has great longevity in many of its staff members. Leadership in the building is very supportive of each other and the needs of the facility.

State surveyors visited the facility recently to investigate a self-report regarding a resident falling with injury. The investigation went well and resulted in the surveyor exiting and unsubstantiating the investigation. The facility does not have any self-reports open at this time.

Copperas Cove LTC has a 1-star rating overall. The facility has a 2-star rating in Health Inspections, a 1-star rating in Staffing, and a 1-star rating in Quality Measures.

Discussed the facility's recent QAPI meeting and focus areas. PIPs are ongoing at this time and no changes were reported. UTIs and falls have both seen recent improvements.

The facility does not receive grievances very often. Discussed this process and the administrator's methods to ensure residents are satisfied with the resolutions in place. The administrator makes themselves available to the facility's residents and can be contacted if the resident needs to speak with the administrator.

Discussed the facility's stand-up process and maintaining documentation on progress toward initiatives and goals. The facility holds stand-down meetings too where the team can check in on progress made toward goals at the end of each day. This is a great time the team leverages to discuss admissions and resident care plans.

The facility will be upgrading to fiber internet soon and it has installed a new water heater in the laundry department.

The facility is in the traditional wagon wheel shape with a central nurse station. Resident halls all stem from the central nurse station. The residents' rooms along the halls have shared bathrooms, but there are also showers in the bathrooms.

The facility has a large gym which capably supports the residents utilizing these services. The gym is spacious enough to allow several residents and staff to be on services simultaneously without interrupting each other. The tour also visited the secure unit which cares for residents with behaviors or other special needs.

Throughout the tour of the facility, residents and staff members were excited to see the administrator and met her with warm greetings. The facility is clean and has been maintained very well. The hallways and open areas were clear of debris and clutter. There were no odors throughout the building. The administrator is looking into making a proposal to repaint and update some interior parts of the facility to improve and modernize the aesthetic.



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The Villa at Texarkana
4920 Elizabeth St.
Texarkana, TX 75503

June 12, 2024

Facility Administrator: Lorraine Hayes
Director of Marketing and Admissions: Alexys Haynes

This report is from the site visit to The Villa at Texarkana on June 12, 2024. After receiving a tour of the facility, a meeting was held with facility staff to provide an update on the facility.

The Villa at Texarkana is licensed for 120 beds and its current census is 97 residents. The facility had one resident planned to admit today. The facility's census has been very strong, and it has been operating near its current functional capacity. Discussed the facility's impact in the community and process for building census and community relationships.

The facility recently attended the Texarkana Healthcare Marketing Professions 2nd Annual Health on the Line event. The event is open to the public and is an opportunity for attendees to share information and education regarding health and wellness to community members of all ages. The director of marketing and admissions attended on behalf of the facility and managed a booth sharing information about The Villa at Texarkana.

Discussed recruitment and retention efforts at the Villa at Texarkana. There have been very few staff openings recently and the facility is managing all coverage needs with full-time and PRN staff. The facility finds opportunities to recognize and celebrate staff. It celebrated nurses a few weeks ago during National Nurses Week.

The facility was visited by a state surveyor last Saturday. All reasons for investigation were unsubstantiated. No new self-reports were reported at this time.

The Villa at Texarkana has a 1-star rating overall. The facility has a 1-star rating in Health Inspections, a 3-star rating in Staffing, and a 3-star rating in Quality Measures. The facility expects its overall and health inspections star ratings to increase soon.

Discussed the facility's grievance system and process for resolving grievances. There were no trends in grievances reported at this time.

The facility presents a homelike environment for the residents who live at The Villa at Texarkana. As the tour was underway, staff and residents shared warm smiles and greetings welcoming visitors into their home. The facility was clean and there were no odors.

The facility has many offerings to facilitate the needs of those entrusted into their care. The facility has a secure unit for residents needing greater supervision and oversight. It also recently opened its sensory room which has been a very popular addition. The room is equipped with a variety of tools and equipment which allow residents to enter and explore activities which engage their five senses. Some of the equipment includes calming lighting and videos playing on a projector, toys and tools for fidgeting and comfort, and even cozy seats for relaxation. Case managers and residents have been excited about this newly added feature, and the facility intends to find new ways to expand the offerings in the sensory room.

The facility has a large dining room which also serves as a meeting area where large group activities are held. Many residents were gathered playing bingo in the dining room during the tour. The facility strives to have significant offerings from its activity department to keep residents engaged in a positive environment. The monthly activity calendar was posted on the wall of the facility and listed about four scheduled activities per day.

The facility has a large lounge as well as enclosed courtyards. These areas provide the residents with areas where they can relax alone or socialize with others.



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Mission Nursing and Rehabilitation Center

1013 S. Bryan Road
Mission, TX 78572

June 26, 2024

Facility Administrator: Daniel Rodriguez

Mission Nursing and Rehabilitation Center is licensed for 170 beds and its current census is 92 residents including 10 skilled patients. The facility is very close to its budget census. Discussed marketing efforts and strategies as well as referral management. The facility involves its medical director in their process to capitalize on their strengths and the needs in the community.

The facility is recruiting to fill four CNA vacancies. All other full-time positions are filled at this time. Mission Nursing and Rehabilitation Center continues to hire additional PRN staff and works to convert them to full-time when there are openings.

The facility's POC from the most recent survey visit was accepted and the facility is in substantial compliance. There are no new self-reports at this time.

Mission Nursing and Rehabilitation Center has a 3-star rating overall. The facility has a 3-star rating in Health Inspections, a 1-star rating in Staffing, and a 5-star rating in Quality Measures.

Discussed the facility's most recent QAPI meeting held earlier this month. The facility continues to focus on RTA. There have been some weight changes, but the facility's scale was recently calibrated and there's a new restorative staff member taking the weights. The facility is monitoring weights to ensure consistency and desired outcomes are achieved. The facility is also monitoring nursing compliance which was written in the recent POC.

There was one staff member who was COVID positive a few weeks ago, but there are no positive cases at the facility now.

There are no trends in grievances at this time. Food service has been improving and staff have been pleased with some of the recent changes.

The facility's executive managers toured the facility and have identified some opportunities for renovation to take place in the next eight to nine months. These projects may include new flooring, a new roof, retexturing and painting of facility walls, and updating lighting where needed.



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Winnie L LTC Partners Inc
2104 N. Karnes Ave.
Cameron, TX 76520

June 26, 2024

Facility Administrator: Dennis Horsch

This report is from the site visit to Winnie L LTC Partners Inc. on June 26, 2024. After receiving a tour of the facility, a meeting was held with the administrator to provide an update on the facility.

Winnie L LTC is licensed for 105 beds and its current census is 41 residents. The facility has a few referrals under review. Census development is a major focus at this time. Once residents are admitted to the facility, they generally have a great experience and stay. There is a new building in the greater area which has made marketing and admissions more competitive.

Staffing is going well overall and there are only a few positions open at this time. There are a few weekday nurses, and weekday CNA positions open. There is also a weekend RN position open which is currently being filled with agency staffing.

The facility received an IJ during a recent investigation by the state. The incident involved a med aide not following the protocol when a resident fell. The state exited and the facility submitted its POC. The issue was not due to the fall prevention system and policies regarding falls, but that a staff member did not follow the facility's policy. There are no new self-reports at this time.

Winnie L LTC has a 2-star overall rating. The facility has a 3-star rating in Health Inspections, a 2-star rating in Staffing, and a 1-star rating in Quality Measures.

Discussed the facility's recent QAPI meeting which included falls due to the recent state visit and IJ. The team is retraining staff regarding falls. Monitoring is ongoing and is proving to be effective. Skins have been doing well and the facility physician comes weekly to consult on skins.

The facility is currently in a COVID outbreak, but those affected are doing well. The administrator expects the outbreak to be closed soon once all involved make their recovery.

The facility has a leaking water heater which is scheduled for replacement.

When entering Winnie L LTC, guests walk through a large open lobby where they are greeted by staff in the front offices. The lobby connects to the center of the building which houses the nursing station. The building has high ceilings which gives the facility a feeling of being open and not crowded. There are four resident halls stemming from the central nurse station. There is artwork decorating the hallways and lobbies of the facility promoting a homelike and comfortable environment.

Toured the dietary, nursing, housekeeping, laundry, activity, and therapy departments. The dining room was large and open with windows providing great lighting to the room. The facility strives to invite the residents to eat their meals in the dining room for better meal service and participation in a social environment. The team sometimes hosts activities in the dining room as well to make use of the large size.

The secure unit is also maintained and presents a calm atmosphere. The unit has its own activity room where residents can participate in personalized activities that meet their needs and interests.

The facility was clean and well-lit throughout the building. All equipment was put away in its place unless it was currently in use. Resident rooms are maintained, and repair needs are addressed and patched promptly. Staff encountered along the tour were kind and actively engaged in their duties.



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Dir. Kacey Vratiss

Scott Johnson, Nursing Facility Specialist
Winnie-Stowell Hospital District

Holland Lake Rehabilitation and Wellness Center

1201 Holland Lake Drive
Weatherford, TX 76086

June 27, 2024

Facility Administrator: Donna Tillman

Holland Lake Rehabilitation and Wellness Center is licensed for 120 beds and its current census is 87 residents including 27 skilled patients. There have been some recent discharges, but the facility has five admissions scheduled for today. There are four pending referrals under review. Discussed admission trends and opportunities for skilled census development like resident skill-in-place prospects when appropriate. Census has been trending up each month since March, and the facility exceeded its average census budget by ten residents last month. The facility is mostly bed locked on long-term care. The administrator attributes part of the census growth to some residents transferring to the facility from competing facilities. Holland Lake Rehabilitation and Wellness Center is known to have a great therapy team and people are coming from far and wide to receive these services.

The facility is seeking a few CNAs for its 2PM-10PM shift as well as a few staff for the weekend. The nursing team is hiring a total of six CNAs and one nurse. There are several staff members who have orientation scheduled and will begin employment soon.

The state came to the facility yesterday to investigate some complaints. After completing the investigations, the surveyor did not express any issues or concerns. There are no new self-reports at this time.

Holland Lake Rehabilitation and Wellness Center has a 4-star overall rating. The facility has a 3-star rating in Health Inspections, a 3-star rating in Staffing, and a 5-star rating in Quality Measures. Its staffing star rating increased from a 2-star rating.

Discussed the facility's recent QAPI meeting. The team is monitoring the slings used with its hoist lifts. This team is examining these slings as part of their new routine check-off process. The facility is ordering some new slings as well. There are no new PIPs reported at this time.

The facility had one positive case of COVID. The case was a resident who came back to the facility from the hospital, and she is expected to be recovered tomorrow.

There are no trends in grievances reported at this time. There was an incident of a missing phone which the facility replaced out of good will toward the resident.

The facility has ordered some new beds, mattresses, and some extra televisions. The administrator is looking into replacing the flooring in the carpeted rooms. There are 25 rooms that still have carpet.



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Stonegate Nursing and Rehabilitation

4201 Stonegate Blvd.
Fort Worth, TX 76109

June 27, 2024

Facility Administrator: Kristi Blackwell

Stonegate Nursing and Rehabilitation is licensed for 134 beds and its current census is 72 residents. The facility's census is down, but it has a new director of business development who recently started employment and is onboarding now. The new director has similar business development experience outside long-term care and skilled nursing. The administrator hopes to guide the new marketer and support transitioning their skills into this new role in long-term care.

The facility has a handful of positions open at this time. It is recruiting a new talent and learning supervisor as well as some PRN CNAs and one double weekend nurse. They have interviewed a strong prospect for the weekend position.

The state came to visit the facility two weeks ago to investigate some outstanding self-reports and complaints. The surveyor conducted a focused infection control survey to address the COVID reportable which had been submitted as a self-report a few months ago before the reporting requirements changed. The facility received zero deficiencies, and the residents reported to the surveyor they are happy at the facility.

Stonegate Nursing and Rehabilitation has a 3-star rating overall. The facility has a 3-star rating in Health Inspections, a 1-star rating in Staffing, and a 4-star rating in Quality Measures. The facility's overall star rating increased from a 2-star rating.

Discussed the facility's recent QAPI meeting. The interdisciplinary team is focusing on improving RTA. Due to the size of the facility's resident census, any readmission has a significant negative impact on RTA. The team is working with its physician partners to provide all appropriate care in the facility and to consult with specialists where possible. There are physicians or physician extenders in the facility roughly five days per week. The team puts a lot of effort to make sure residents are well and stable going into the weekend. The nursing team is also working to build up the weekend supervisor to be a strong leader and support for

the facility's care standards on the weekends. There has only been one RTA so far this month, which is a big improvement over last month.

The administrator shared updates on PIPs addressing falls, recruitment and retention. The team works to review the root cause and the needs of the residents. The team routinely educates staff to ensure they are aware of their duties, responsibilities, and expectations.

Discussed recent efforts with infection control and scabies which was briefly present in the facility. The administrator shared the team's efforts to address the affected resident and ensure no other residents became infected by the communicable disease. The efforts were successful and there are no more cases of scabies at the facility.

There was one employee who was COVID positive earlier this month, but the individual has recovered.

The facility has a new SNFist who has transitioned into the facility. The administrator expects to see value added in its quality measures and care outcomes. The new physician attended the facility's QA meeting this month and has been very supportive.

Discussed some opportunities with resident diets, call light response, and incontinence care timeliness, there were no trends in grievances reported at this time.



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Gulf Pointe Plaza
1008 Enterprise Blvd.
Rockport, TX 78382

June 19, 2024

Facility Administrator: Michael Higgins

Gulf Pointe Plaza is licensed for 120 beds and its current census is 77 residents including 11 skilled patients. The facility is working on some long-term care referrals. The director of business development is working out in the community to find new referral sources since the hospital census is still low.

The facility has one CNA vacancy at this time. All other direct care staff positions are filled. The social worker who started in April is no longer working at the facility due to wanting to pursue an easier job elsewhere. The facility has begun to recruit a new social worker again.

There were no visits from state surveyors this month. The administrator has not submitted any new self-reports.

Gulf Pointe Plaza has a 5-star overall rating. The facility has a 5-star rating in Health Inspections, a 1-star rating in Staffing, and a 5-star rating in Quality Measures.

Gulf Pointe Plaza held its QAPI meeting earlier today. It continues to maintain its performance improvement plan monitoring anti-anxiety utilization. Through this process, the facility has had several partial GDRs implemented successfully. Some residents have continued to have further reductions when appropriate. The facility evaluates its efforts to improve and deliver personalized care to the residents. The facility also has strong physician partners who are supportive and offer constructive feedback and criticism where appropriate.

There is no COVID in the facility at this time.

The facility had two grievances in May. Discussed the facility's process for reporting and resolving grievances. The administrator also rounds throughout the facility multiple times each day and residents often approach him to have a general conversation or to bring up any concerns or needs.



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Arbrook Plaza
401 West Arbrook Blvd.
Arlington, TX 76014

June 27, 2024

Facility Administrator: Jodi Scarbro

Arbrook Plaza is licensed for 120 beds and its current census is 97 residents including 30 skilled patients. Discussed the facility's recent marketing efforts and census trends.

There have been a few staff openings recently. The facility is seeking nine CNAs but has several PRN staff who cover vacancies where possible. The facility has utilized some agency when full-time and PRN staff were not able to cover vacancies.

The state visited the facility three times this month and has returned for a fourth visit today. Several of the investigations have been related to a patient who frequently calls the state to complain and make allegations. The facility has submitted several self-reports regarding allegations of abuse from this individual. The patient was admitted to the facility without having a discharge plan and continues to make allegations of abuse against various staff members. The patient ultimately called 911 herself and was admitted back to the hospital. All reasons for investigation by the state have been unsubstantiated.

Arbrook Plaza has a 5-star rating overall. The facility has a 4-star rating in Health Inspections, a 2-star rating in Staffing, and a 5-star rating in Quality Measures.

Discussed the facility's recent QAPI meeting and focus areas. The team is monitoring survey readiness in anticipation for its annual survey. The facility is reviewing handrails and door frames and adjusting any needing maintenance. The nursing department is working on improving RTA. Discussed best practices and strategies to reduce RTA and collaborate with attending physicians.

There is no COVID in the facility at this time.

Discussed recent grievances at Arbrook Plaza. There were several grievances due to resident family members wanting their loved one to receive more therapy. There were several

instances of family members not being present during therapy sessions which gave them the impression their loved one was not receiving enough therapy. The facility improved its communication to ensure residents and their family members are aware of when therapy sessions are occurring.



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Cimarron Place Health & Rehabilitation

3801 Cimarron Blvd.
Corpus Christi, TX 78414

June 21, 2024

Facility Administrator: Jennifer Steele

Cimarron Place Health & Rehabilitation Center is licensed for 120 beds and its current census is 75 residents with 24 skilled patients. The facility has a few residents who have been admitted to the hospital and are expected to return soon once they are appropriate for hospital discharge.

The facility is still experiencing some staffing challenges with its CNAs. Last month there were twelve CNA openings, and the facility has successfully filled four of those openings. There are still eight remaining CNA openings. Discussed the facility's continued recruitment and retention efforts including sign-on and referral bonuses. The facility's talent and learning supervisor has also begun employment recently. This person will be tasked with focusing on recruitment and retention efforts. This supervisor will also be a resource for employees to learn about other benefits and opportunities with the facility.

Discussed the facility's plans to partner with a nearby sister facility to begin offering a nurse aide training class. Both facilities expect this program to help provide more candidates to fill some of the nurse aide vacancies at the facility. The teams are looking for a CNA trainer for the class. The administrator hopes these potential students, as well as existing employees, will see educational advancement benefits offered by the facility for those pursuing further licensure in nursing.

The facility had a complaint survey earlier this month regarding a fall. There have also been two new self-reports, one of which is being investigated by a state surveyor today. The facility is continuing to monitor the findings and recommendations from the state's recent annual survey at Cimarron Place Health & Rehabilitation.

Cimarron Place Health & Rehabilitation Center has a 5-star rating overall. The facility has a 5-star rating in Health Inspections, a 1-star rating in Staffing, and a 5-star rating in Quality Measures.

The facility held its monthly QAPI meeting earlier this month and updated falls and RTAs. The team is working with HCA hospitals to provide education to facility staff regarding RTA related to anemia and respiratory issues. The administrator hopes this involvement with the hospital will identify new opportunities for both the hospital and nursing home to better meet the needs of anemic patients. The facility's medical director has also begun ordering STAT labs before sending patients out to the hospital to ensure there is up-to-date information to discuss and coordinate with the hospital.

There is no COVID in the facility at this time.

The sprinkler system has been repaired. There was no damage reported at the facility from the recent heavy storms, but the facility was able to conduct its tabletop disaster exercise with the recent weather.



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Green Oaks Nursing and Rehabilitation

3033 Green Oaks Blvd.
Arlington, TX 76016

June 28, 2024

Facility Administrator: Eric Johnan

Green Oaks Nursing & Rehabilitation is licensed for 142 beds and its current census is 94 residents. The facility has three potential admissions later today. There are two upcoming discharges, one this afternoon and one planned tomorrow. The facility has had a busy month which is reflected in recent census growth.

Discussed the facility and new administrator's efforts to market in the community. The administrator has been working hard to improve relationships with nearby hospitals including Medical City Arlington, which has recently doubled its referrals to the facility. The facility also has a new DON who started employment a week before the new administrator. The new DON has been very prompt at responding to the hospitals regarding referrals and if the referred patients are accepted to the facility for admission. The facility's marketer has also been working hard to be available and prompt in all correspondence with referral sources.

Discussed staffing needs and open positions at Green Oaks Nursing & Rehabilitation. The facility is recruiting one 6AM-2PM CNA, and one 2PM-2PM CNA. There are no other vacancies reported at this time.

State surveyors came to the facility earlier this month. The surveyors came to clear an old deficiency and for a self-report. There are no new self-reports at this time.

Green Oaks Nursing & Rehabilitation has a 2-star rating overall. It has a 2-star rating in Health Inspections, a 1-star rating in Staffing, and a 5-star rating in Quality Measures.

Green Oaks Nursing & Rehabilitation had its monthly QAPI meeting earlier this month. The team reviewed its outcomes and discussed ongoing PIPs. The administrator and DON are still relatively new to the facility and are still getting assimilated into the processes and workflows in place. The duo has been fostering better accountability and have seen staff respond well to the changes.

There have been occasional grievances related to meal service or medications, but no significant trends. The facility captures grievances and ensures they are resolved. The administrator is reviewing the grievance process to identify any opportunities to improve.

There is no COVID in the facility at this time.

The facility recently replaced its steam table. It is also working on installing some additional gutters on the building to improve drainage. There were some leaks in a few rooms. These rooms are closed and repairs in these areas should be done in a few weeks.

Discussed upcoming activities and engagement at the facility. The activity director offers meaningful and creative activities to residents. The facility had a car show this month where individuals from the community brought their hot rods out to the facility for residents to see while enjoying some barbeque food. The team is planning a luau for the residents next month.



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Crowley Nursing and Rehabilitation

920 East FM 1187
Crowley, TX 76036

June 25, 2024

Facility Administrator: Joe Matlock

Crowley Nursing and Rehabilitation is licensed for 120 beds and its current census is 99 residents including 18 skilled patients. The facility's census has been in the 100s recently. Discussed the facility's recent marketing and admissions trends. Admissions over the last few weeks have been consistent, and there have not been any trends with unplanned discharges.

The facility is fully staffed with no openings for frontline staff members. The facility is seeking a full-time social worker.

There have not been any visits to the facility by state surveyors. The facility received its 2567 from its recent fullbook survey. The surveyors wrote seven low-level tags. The administrator shared some life safety opportunities regarding lighting in the facility. The facility will be reviewing lighting in the facility tomorrow. The facility completed and submitted its POC for the fullbook survey. The POC was accepted, and desk reviewed. There are no new self-reports at this time.

Crowley Nursing and Rehabilitation has a 3-star overall rating. The facility has a 3-star rating in Health Inspections, a 1-star rating in Staffing, and a 5-star rating in Quality Measures.

Discussed the facility's recent QAPI meeting. The team is focusing on follow-up actions from their fullbook survey. The facility focuses on falls and fall prevention. The team reviews each occurrence of a fall to identify the root cause and fully address any issues. There are no performance improvement plans reported at this time, and existing PIPs are ongoing.

Discussed the VR equipment ordered for the therapy department. The equipment is in place and has become an engaging tool for residents on these services.

There is no COVID in the facility at this time.

Discussed upcoming activities and community events. The facility is planning on having a band perform for the residents and visitors on the 4th of July. The administrator will participate by playing bass guitar and the activity director will play drums. The activity director frequently plays instruments and plans musical events for residents. The administrator often joins in the musical activity by playing bass guitar on Fridays.



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Harbor Lakes Nursing and Rehabilitation Center

1300 2nd Street
Granbury, TX 76048

June 27, 2024

Facility Administrator: Calvin Crosby

Harbor Lakes Nursing and Rehabilitation Center is licensed for 142 beds and its current census is 72 residents. The facility has four admissions pending later today and has another six referrals under review at this time. The facility's census has decreased, but it is still above its budget census.

The facility has one staff vacancy for a medication aide position. There are no other vacant positions reported at this time.

The state has returned to the facility today to continue with the third day of this current investigation. There were no other visits from surveyors earlier this month. The surveyor seems to be clearing up old complaints and has been looking at catheter care today. The facility submitted one self-report two weeks ago due to the facility fire panel going out of commission due to a recent lightning strike near the facility. The service provider is rebuilding a motherboard for the fire panel, and the facility is completing fifteen-minute rounds for fire watch.

The facility also had its trust fund audit last week and received zero deficiencies.

Harbor Lakes Nursing and Rehabilitation Center has a 5-star rating overall. The facility has a 4-star rating in Health Inspections, a 3-star rating in Staffing, and a 5-star rating in Quality Measures.

Discussed the facility's recent QAPI meeting. The facility's outcomes are improving overall. Dining service complaints have improved and are down to only three last month. Discussed the facility's efforts to provide meaningful options and improve meal presentation. The facility is also focusing on falls. Discussed best practices and strategies for addressing falls.



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Hewitt Nursing and Rehabilitation

8836 Mars Drive
Hewitt, TX 76643

June 26, 2024

Facility Administrator: Ben Falls

This report is from the site visit to Hewitt Nursing and Rehabilitation on June 26, 2024. A meeting was held with the administrator to provide an update on the facility and a tour of the facility was given.

Hewitt Nursing and Rehabilitation is licensed for 140 beds and its current census is 77 residents. The facility has one admission planned for today, and a few more are expected later this week. The team has been working hard to transition skilled patients to long-term care where appropriate. The administrator is focusing on finding new ways to find patients. He is exploring options with physicians in the area and considering adding a new attending physician who would refer patients to the facility.

Discussed the facility's staffing expectations and strategies. The previous facility leadership did not follow a clear staffing PPD ratio. The administrator has been addressing these issues and right-sizing staff ratios. Despite some hardship with the change, the team has been evolving and showing more commitment as a culture of accountability is developing. To manage some open shifts, the facility utilizes a service called Valid Shift. All staff members are in the program and can view open shifts and sign up to cover openings. The team is also working on its employee orientation efforts to make sure new staff are well informed about their role and the facility while feeling welcomed upon starting their new job.

The facility's POC from the recent IJ was accepted. A state surveyor returned to review the POC and the changes implemented at the facility. There are three outstanding self-reports at this time. Two were submitted last month, and one new one submitted last week regarding a resident with an unwitnessed fall with fracture.

Hewitt Nursing and Rehabilitation has a 1-star rating overall. The facility has a 2-star rating in Health Inspections, a 1-star rating in Staffing, and a 4-star rating in Quality Measures. Its

overall and health inspections star ratings decreased from a 3-star and 4-star rating respectively.

Discussed the facility's QAPI process and monthly meetings. The facility is focusing on falls which increased to 8.7% recently. The team is doing a falling star program and is reviewing care plans and interventions for residents. Pressure ulcers have slightly increased as well, so the team is monitoring rounding efforts and call light or call bell responses. The call lights should be repaired by the end of this week.

There have been some recent grievances regarding dietary services due to a change in the menu. The facility made some further changes in response to the grievances and discussed these changes at resident council.

The facility is planning to have a new roof installed soon.

Upon entering the facility, visitors are welcomed into a large open lobby which leads directly to the facility's nurse station located in the middle of the building. The center of the facility housing the nurse station has high ceilings and feels very large and open. The facility's four hallways all branch off the central core of the building. The halls facing north and south from the nurse station are the long-term care halls. Both of these halls are almost fully occupied. The back two diagonal halls are largely where skilled patients reside and there is a therapy gym at the end of each of these two hallways.

On the other side of the nurse station there's an open lounge area for residents to relax or gather to socialize. There's a small library of books as well. The dining room is just beyond the lounge area and is a very large room with lots of natural lighting. The large room also facilitates group activities as needed.

The facility is maintained well and maintenance needs are managed and resolved promptly. The floors were clean and there were no odors in the facility. The two therapy gyms had open floor plans allowing some flexibility in the activities taking place therein. All equipment throughout the building was put away unless it was being utilized.



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Pecan Bayou Nursing and Rehabilitation

2700 Memorial Park Drive
Brownwood, TX 76801

June 20, 2024

Facility Administrator: Josie Pebsworth

Pecan Bayou Nursing and Rehabilitation is licensed for 90 beds and its current census is 63 residents including 17 skilled patients. The facility has two residents in the hospital with one expected to return today. An admission is planned for this afternoon and there is one pending discharge.

The facility is seeking one day-shift CNA and one night-shift CNA. The facility is also recruiting an additional PRN nurse, an MDS coordinator, and a housekeeping supervisor. The facility recently hired a social worker, an activity director, and a maintenance director who all started employment. All three of these hires are new to long-term care, so the administrator is working to ensure they have adequate training and support as they assimilate into their new roles.

State surveyors visited the facility earlier this month on June 12. The surveyors cleared the outstanding self-reports as well as four complaints. Two complaints were related to a resident who was in the facility for only two days and left AMA. The resident and the resident's primary care physician both complained to the state since the resident was not discharged with medications due to the individual leaving AMA. The facility followed protocol and the surveyor investigating confirmed the facility took the correct course of action. The surveyor was investigating for two days, and all reasons for investigation were cleared with no issues. The facility expects surveyors to return soon to conduct the facility's annual fullbook survey.

Pecan Bayou Nursing and Rehabilitation has a 5-star rating overall. The facility has a 5-star rating in Health Inspections, a 3-star rating in Staffing, and a 5-star rating in Quality Measures. Both its staffing and quality measures star ratings have increased from 2-star and 4-star ratings respectively.

The facility held its QAPI meeting earlier this month on June 12. There are no new performance improvement plans reported at this time. The facility is still working on

indwelling catheters which is 0% for long-stay residents. The facility's 6-month look back average on this measure is trending down.

The facility had a staff member test positive for COVID earlier this morning. The facility is monitoring residents and staff and testing accordingly to ensure adherence to infection control protocol.

There are no trends in grievances at this time. The facility is looking to work on CNA reinforcement, setting higher expectations, and holding staff accountable to the facility's standards. This will be a focus for all staff members as an opportunity to continuously evaluate and improve. The leadership team has begun in-servicing staff to iterate that everyone has a role to play in the facility. All staff members are expected to maintain a clean home and support the residents in meeting their needs.

The administrator is planning a Fourth of July cookout next month for residents and staff.



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Treviso Transitional Care Center
1154 East Hawkins Parkway
Longview, TX 75605

June 14, 2024

Facility Administrator: Matt Mewborn

This report is from the site visit to Treviso Transitional Care on June 14, 2024. After meeting with the administrator to provide an update on the facility, a tour of the building was provided.

Matt Mewborn is the new administrator at Treviso Transitional Care Center. His first day of employment at the facility was June 3, 2024. Matt has had a great career as a licensed administrator and has been in Longview for the past several years. His experience and community connections should support his efforts to improve the reputation of the facility.

Treviso Transitional Care Center is licensed for 140 beds and its current census is 73 residents including 21 skilled patients. The new administrator expects to see significant census growth over the upcoming months. He is working with facility leadership to improve systems throughout the facility and become a premier healthcare provider for new patients and residents alike. The team is also working to improve its efforts to transition skilled patients to long-term care where appropriate.

The administrator is working with the social worker to improve the facility's relationships with the local ACOs. As these relationships develop, the facility plans to be prompt and thorough in all correspondence with referring partners. These efforts should make the facility a quick and reliable partner and a prime avenue for new referrals from the local hospitals.

The facility has a new DON who started employment earlier this week. Facility leadership has been making some changes to place staff members in the right position where their strengths can be leveraged to provide better care for the residents. Some of these changes have included wound care and unit manager positions.

The state visited the facility recently to begin investigating several reportables and two complaints. The surveyor left without closing its investigation and has not returned to finish. The facility leadership has been providing a lot of reeducation to staff members. The team is

including these efforts and follow-up items in its QAPI process. It intends to show these recent efforts to the state surveyor when they return to complete the investigation.

Treviso Transitional Care Center has decreased to a 1-star overall rating. The facility has a 1-star rating in Health Inspections, a 1-star rating in Staffing and a 4-star rating in Quality Measures.

The administrator plans on observing its upcoming QAPI meeting while asking questions about existing processes. One opportunity being addressed is to reduce gaps in the admissions process. The facility is also working to improve its relationship with its medical director and nurse practitioner.

The administrator shared some changes made recently to ensure appropriate staff and department heads are accessible to residents, visitors, and other staff members where appropriate. Some offices have swapped locations to facilitate these needs. Despite some sudden changes, the team is excited about the future and has been supportive of the new direction.

Treviso Transitional Care is a beautiful facility which provides a warm and welcoming environment to those visiting or living in the building. It has great lighting, high ceilings, and wide hallways throughout the common areas. Cleanliness is maintained and the building did not have any odors. There are several common areas and places where residents and visitors can relax alone or socialize as a group. In the center of the facility is a large courtyard.

The tour went through the administration, social services, nursing, activities, dietary, and the therapy departments. Staff and residents encountered throughout the tour were friendly and happily shared greetings with the administrator. There was a large group of residents and staff preparing for an activity before lunch meal service in the dining hall.

There was no clutter throughout the facility, and all equipment was in use or put away in its designated location. The administrator shared plans to move certain furniture throughout the facility to ensure everything in the building serves a purpose or is contributing to the homelike environment.

The therapy department is housed in a massive gym with an open floor plan. There is plenty of room for many staff members and residents to be engaged in therapy services simultaneously. The therapy gym is large and will support the expected census growth the facility is pursuing.



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Silver Spring

1690 N. Treadway Blvd.
Abilene, TX 75551

June 27, 2024

Facility Administrator: Jackie Lowe

Silver Spring is licensed for 120 beds and its current census is 69 residents. The facility's census has been low recently, but it has two admissions planned today. There are also three residents in the hospital who are expected to return soon once appropriate for hospital discharge.

Staffing is going well at the facility and its turnover rate in May was 0%. The team is recruiting one night-shift CNA at this time. The new admissions coordinator started recently, and the new marketer will start next week. These two new staff members have experience working in the community having done these roles at a competing skilled nursing facility.

There have not been any recent visits from state surveyors. The administrator submitted a self-report due to an unwitnessed fall.

Silver Spring has a 2-star rating overall. The facility has a 1-star rating in Health Inspections, a 1-star rating in Staffing, and a 5-star rating in Quality Measures.

Discussed the facility's recent QAPI meeting. Falls are a focus area as the facility has some residents who are triggering for repeat falls. The team has been addressing each resident individually to identify appropriate interventions. There have been some improvements, but there are still opportunities to support fall prevention efforts. Skins and RTA have had strong outcomes in recent months. The facility was at 0% for UTIs recently.

The facility's remodel project is progressing. The facility has reopened eight rooms so far. New furniture has been received for affected rooms and offices. The team is setting up the new beds and wallpapering some parts of the facility. Privacy curtains have been ordered and are pending delivery.

There are no trends in grievances reported at this time.



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Forum Parkway Health & Rehabilitation

2112 Forum Parkway
Bedford, TX 76021

June 25, 2024

Facility Administrator: Dylan Gadberry

Forum Parkway Health & Rehabilitation is licensed for 139 beds and its current census is 82 residents including 19 skilled patients. The facility has six pending admissions today. The administrator has seen referral volumes dropping across the region. Despite recent trends, the facility currently has fifteen pending referrals and is working to capture and admit as many as they can.

Staffing at Forum Parkway Health & Rehabilitation is in great shape. There are three open positions on the weekends, and the facility is replacing a night-shift nurse as well. The administrator is working through an employee issue where a staff member alleged a co-worker put their hand on her back. The administrator suspended the alleged perpetrator in order to investigate the allegation. Discussed staff conduct and policies.

There have not been any recent visits to the facility by state surveyors. The facility submitted one self-report regarding a resident with a fall. The facility x-rayed the individual and found an L1 fracture that was reportedly age indeterminate. The resident had a camera in the room, and it was confirmed she fell by herself in her room.

Forum Parkway Health & Rehabilitation has a 5-star rating overall. The facility has a 4-star rating in Health Inspections, a 2-star rating in Staffing, and a 5-star rating in Quality Measures.

Discussed the facility's recent QAPI meeting. The team has been focusing on anti-hypnotics. It currently has zero anti-psychotics in use. Falls have been decreasing, but the facility still flagged at 6.9% and needs to be at or below 6%. The facility has closed some action plans for marketing after revamping its efforts.

There is no COVID in the facility at this time.

The facility received some grievances regarding meal service. The facility's AIT is spending a lot of time in the kitchen to help with oversight and to ensure meal service improves for the facility's residents.

The facility completed some maintenance on its generator and steam table. It is planning to revitalize the courtyard to make it look nice. The facility is looking to make adjustments which are sustainable and manageable without requiring large landscaping or upkeep budgets.

EXHIBIT “G”

Propane Bids

<u>Company/Vendor</u>	<u>Location</u>	<u>Price/Gallon</u>	<u>Delivery Fee/ Surcharge</u>	<u>500 gallon</u>	<u>500-Rental</u>	<u>1,000 gallon</u>	<u>1,000 Rental</u>	<u>Comments/Notes</u>
Pico Propane and Fuels	Beaumont	\$ 2.90	\$ -	\$ 3,548.00	None	\$ 4,848.00	None	Includes 2 regulators, trench, and copper piping. 3-4 week lead time. They also have refurb tanks available (only 1,000g tank in stock @ \$4,248). Discount on fuel after 100 gallons (@\$2.85/gallon).
Sandifer's LP Gas	Port Arthur	\$ 3.35	\$ 10.00	\$ 4,574.00	\$ 1,497.74	\$ 7,099.03	\$ 1,588.81	First available appointment to deliver is September 6th.
Hill's Butane	Winnie	\$ 3.00	\$ -	\$ 3,850.00	None	\$ 8,000.00	None	2 week lead time. No additional information on fittings, install, etc. Discount on fuel/gallon over 300 gallons.
T. Neale Propane	Dayton	\$ 2.95	\$ -	\$ 4,482.00	None	\$ 7,302.00	None	2-3 week lead time. Includes 2 regulators at \$115 each, 5/8 copper at \$7.00 and has to be 10 feet from electrical source (~\$70), fittings, blocks, and labor. \$2.85/gallon for 300 gallons and more.
Gore Propane	Wallisville	\$ 3.55	0	\$ 5,227.00	None	None	None	2-week lead time. Includes 15 ft trench, regulators/fittings, and tank set on blocks. Stated they would price match for our area.

EXHIBIT ‘H-1’

Winnie-Stowell Hospital District

Balance Sheet

As of June 30, 2024

07/24/24

Accrual Basis

	Jun 30, 24
ASSETS	
Current Assets	
Checking/Savings	
100 Prosperity Bank -Checking	483,879.03
102 First Financial Bank	
102b FFB #4846 DACA	3,595,206.73
102c FFB #7190 Money Market	13,508,576.59
Total 102 First Financial Bank	17,103,783.32
105 TexStar	756,638.90
108 Nursing Home Banks Combined	5,818,042.02
Total Checking/Savings	24,162,343.27
Other Current Assets	
110 Sales Tax Receivable	157,171.65
114 Accounts Receivable NH	72,875,432.92
115 Hosp Uncomp Care Receivable	1,324,704.97
116 - A/R CHOW - LOC	
116.07 GC LOC Clute	357,380.35
116.08 GC LOC Creekside	203,551.08
116.09 GC LOC Wells	39,934.78
116.10 GC LOC Shepard	947,364.31
116.11 HMG LOC Treviso	1,500,000.00
116.20 SLP LOC Coronado	1,678,797.47
116.21 SLP LOC Paris	910,616.97
116.22 SLP LOC Palestine	901,471.06
116.23 SLP LOC Overton	917,424.85
116.24 SLP LOC Seabreeze	1,894,665.99
116.30 C LOC Oak Brook	446,800.28
116.31 C LOC Gracy Woods	683,694.87
116.50 PS LOC Mont Belvieu	119,346.64
Total 116 - A/R CHOW - LOC	10,601,048.65
117 NH - QIPP Prog Receivable	14,495,263.58
118 Prepaid Expense	1,000.00
119 Prepaid IGT	34,674,833.48
Total Other Current Assets	134,129,455.25
Total Current Assets	158,291,798.52
Fixed Assets	
120 Equipment	140,654.96
121 Office Building	129,483.00
122 Highway 124 Property	1,197,231.85
123 Highway 124 Building	757,595.48
125 Accumulated Depreciation	-159,212.64
Total Fixed Assets	2,065,752.65
Other Assets	
118.01 Prepaid NH Fees	11,475.00
Total Other Assets	11,475.00
TOTAL ASSETS	160,369,026.17
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
190 NH Payables Combined	6,006,855.07
201 NHP Accounts Payable	3,993,789.89

Winnie-Stowell Hospital District

07/24/24

Balance Sheet

Accrual Basis

As of June 30, 2024

	<u>Jun 30, 24</u>
206 FFB Loan (11 Mth) (24)	10,342,869.97
206 FFB Loan 25	29,290,000.00
235 Payroll Liabilities	3,035.44
240 Accounts Payable NH Oper.	81,827,107.18
Total Other Current Liabilities	<u>131,463,657.55</u>
Total Current Liabilities	<u>131,463,657.55</u>
Total Liabilities	<u>131,463,657.55</u>
Equity	
300 Net Assets, Capital, net of	121,283.00
310 Net Assets-Unrestricted	11,219,913.13
315 Committed for Capital Proj	450,000.00
Retained Earnings	13,911,358.30
Net Income	3,202,814.19
Total Equity	<u>28,905,368.62</u>
TOTAL LIABILITIES & EQUITY	<u><u>160,369,026.17</u></u>

Winnie-Stowell Hospital District Profit & Loss Budget vs. Actual

07/24/24

Accrual Basis

January through June 2024

	Jan - Jun 24	Budget	\$ Over Budget	% of Budget
Ordinary Income/Expense				
Income				
400 Sales Tax Revenue	422,539.64	850,000.00	-427,460.36	49.7%
405 Investment Income	505,930.85	150,000.00	355,930.85	337.3%
407 Rental Income	21,000.00	42,000.00	-21,000.00	50.0%
409 Tobacco Settlement	16,772.64	15,000.00	1,772.64	111.8%
415 Nursing Home - QIPP Program	33,664,913.15	93,098,874.94	-59,433,961.79	36.2%
Total Income	34,631,156.28	94,155,874.94	-59,524,718.66	36.8%
Gross Profit	34,631,156.28	94,155,874.94	-59,524,718.66	36.8%
Expense				
500 Admin				
501 Admin-Administrative Salary	59,752.43	105,000.00	-45,247.57	56.9%
502 Admin-Administrative Assnt	13,758.00	35,000.00	-21,242.00	39.3%
503 Admin - Staff Incentive Pay	288.68	4,000.00	-3,711.32	7.2%
504 Admin-Administrative PR Tax	7,492.70	16,800.00	-9,307.30	44.6%
505 Admin-Board Bonds	0.00	250.00	-250.00	0.0%
515 Admin-Bank Service Charges	1,581.76	1,400.00	181.76	113.0%
521 Professional Fees - Accntng	5,731.25	11,000.00	-5,268.75	52.1%
522 Professional Fees - Audit	0.00	30,000.00	-30,000.00	0.0%
523 Professional Fees - Legal	49,704.20	75,000.00	-25,295.80	66.3%
550 Admin-D&O / Liability Ins.	24,926.98	16,000.00	8,926.98	155.8%
560 Admin-Cont Ed, Travel	2,190.00	5,250.00	-3,060.00	41.7%
562 Admin-Travel&Mileage Reimb.	383.05	2,500.00	-2,116.95	15.3%
569 Admin-Meals	1,267.93	1,500.00	-232.07	84.5%
570 Admin-District/County Prom	0.00	5,000.00	-5,000.00	0.0%
571 Admin-Office Supp. & Exp.	9,427.42	10,000.00	-572.58	94.3%
572 Admin-Web Site	510.00	1,000.00	-490.00	51.0%
573 Admin-Copier Lease/Contract	1,730.31	3,000.00	-1,269.69	57.7%
575 Admin-Cell Phone Reimburse	1,114.77	1,800.00	-685.23	61.9%
576 Admin-Telephone/Internet	1,726.36	3,500.00	-1,773.64	49.3%
577 - Admin Dues	1,895.00	1,895.00	0.00	100.0%
591 Admin-Notices & Fees	930.60	4,000.00	-3,069.40	23.3%
592 Admin Office Rent	2,040.00	4,080.00	-2,040.00	50.0%
593 Admin-Utilities	1,698.80	4,000.00	-2,301.20	42.5%
594 Admin-Casualty & Windstorm	0.00	2,800.00	-2,800.00	0.0%
597 Admin-Flood Insurance	0.00	1,800.00	-1,800.00	0.0%
598 Admin-Building Maintenance	7,535.00	6,000.00	1,535.00	125.6%
Total 500 Admin	195,685.24	352,575.00	-156,889.76	55.5%
600 - IC Healthcare Expenses				
601 IC Provider Expenses				
601.01a IC Pmt to Hosp-Indigent	186,103.97	435,700.00	-249,596.03	42.7%
601.01b IC Pmt to Coastal (Ind)	4,849.22	25,000.00	-20,150.78	19.4%
601.01c IC Pmt to Thompson	7,689.90	18,000.00	-10,310.10	42.7%
601.02 IC Pmt to UTMB	147,177.67	300,000.00	-152,822.33	49.1%
601.03 IC Special Programs				
601.03a Dental	16,621.00	24,000.00	-7,379.00	69.3%
601.03b IC Vision	1,220.00	1,500.00	-280.00	81.3%
601.04 IC-Non Hosp Cost-Other	3,613.04	35,000.00	-31,386.96	10.3%
601.05 IC - Chairty Care Prog	0.00	25,000.00	-25,000.00	0.0%
Total 601.03 IC Special Programs	21,454.04	85,500.00	-64,045.96	25.1%
Total 601 IC Provider Expenses	367,274.80	864,200.00	-496,925.20	42.5%
602 IC-WCH 1115 Waiver Prog	48,146.73	129,340.00	-81,193.27	37.2%
603 IC-Pharmaceutical Costs	34,141.87	56,650.00	-22,508.13	60.3%
605 IC-Office Supplies/Postage	337.89	2,000.00	-1,662.11	16.9%
611 IC-Indigent Care Dir Salary	14,944.64	45,000.00	-30,055.36	33.2%
612 IC-Payroll Taxes -Ind Care	73.85	5,125.00	-5,051.15	1.4%
613 IC-Contract Services	39,825.00	75,000.00	-35,175.00	53.1%
615 IC-Software	9,396.00	14,500.00	-5,104.00	64.8%
616 IC-Travel	60.66	600.00	-539.34	10.1%
617 Youth Programs				
617.01 Youth Counseling	2,380.00	25,000.00	-22,620.00	9.5%
617.02 Irlen Program	0.00	600.00	-600.00	0.0%
Total 617 Youth Programs	2,380.00	25,600.00	-23,220.00	9.3%
Total 600 - IC Healthcare Expenses	516,581.44	1,218,015.00	-701,433.56	42.4%

Winnie-Stowell Hospital District Profit & Loss Budget vs. Actual

07/24/24

Accrual Basis

January through June 2024

	Jan - Jun 24	Budget	\$ Over Budget	% of Budget
620 WSHD - Grants				
620.01 WCH/RMC				
620.01b WCH/RMC - Other	79,901.52	300,000.00	-220,098.48	26.6%
Total 620.01 WCH/RMC	79,901.52	300,000.00	-220,098.48	26.6%
620.03 WSVEMS	75,813.25	152,774.40	-76,961.15	49.6%
620.05 East Chambers ISD	132,462.78	253,693.56	-121,230.78	52.2%
620.06 FQHC(Coastal)	563,824.34	1,001,803.00	-437,978.66	56.3%
620.07 Marcelous Williams	38,795.00	77,590.00	-38,795.00	50.0%
620.08 Future Grants	0.00	209,139.04	-209,139.04	0.0%
620.09 Admin-Cont Ed-Med Pers.	4,964.28	5,000.00	-35.72	99.3%
Total 620 WSHD - Grants	895,761.17	2,000,000.00	-1,104,238.83	44.8%
630 NH Program				
630 NH Program-Mgt Fees	9,954,512.64	34,887,661.12	-24,933,148.48	28.5%
631 NH Program-IGT	15,849,297.66	43,153,006.29	-27,303,708.63	36.7%
632 NH Program-Telehealth Fees	180,904.26	300,870.04	-119,965.78	60.1%
633 NH Program-Acctg Fees	51,581.25	85,000.00	-33,418.75	60.7%
634 NH Program-Legal Fees	163,457.37	350,000.00	-186,542.63	46.7%
635 NH Program-LTC Fees	2,436,000.00	4,938,000.00	-2,502,000.00	49.3%
637 NH Program-Interest Expense	844,963.72	3,043,548.33	-2,198,584.61	27.8%
638 NH Program-Loan/Bank Fees	303,555.00	655,734.76	-352,179.76	46.3%
639 NH Program-Appraisal	3,622.00	96,000.00	-92,378.00	3.8%
641 NH Program-NH Manager	3,020.00			
Total 630 NH Program	29,790,913.90	87,509,820.54	-57,718,906.64	34.0%
674 - Property Acquisition	29,400.34	2,200,000.00	-2,170,599.66	1.3%
675 HWY 124 Expenses				
675.01 Tony's BBQ Bldg Expenses	0.00	25,000.00	-25,000.00	0.0%
675.02 Clinic Expenses	0.00	10,000.00	-10,000.00	0.0%
675.03 - Clinic Property Ins	0.00	17,405.00	-17,405.00	0.0%
Total 675 HWY 124 Expenses	0.00	52,405.00	-52,405.00	0.0%
Total Expense	31,428,342.09	93,332,815.54	-61,904,473.45	33.7%
Net Ordinary Income	3,202,814.19	823,059.40	2,379,754.79	389.1%
Other Income/Expense				
Other Income				
416 Nursing Home Operations	178,725,775.02			
Total Other Income	178,725,775.02			
Other Expense				
640 Nursing Home Oper. Expenses	178,725,775.02			
Total Other Expense	178,725,775.02			
Net Other Income	0.00			
Net Income	3,202,814.19	823,059.40	2,379,754.79	389.1%

EXHIBIT ‘H-2’

WSDH Treasurer's Report

Reporting Date: Monday, July 22, 2024						
Pending Expenses		For	Amount	Funds Summary		Totals
Brookshire Brothers Pharm.	Indigent Care		\$5,951.24	Prosperity Operating (Unrestricted)		\$1,993,011.17
Wilcox Pharm.	Indigent Care		\$1,380.00	First Financial DACA (Unrestricted)		\$3,837,772.44
UTMB Family Group Practice	Indigent Care		\$2,786.06	First Financial DACA (Restricted)		\$3,562,481.51
UTMB Galveston	Indigent Care		\$9,985.26	First Financial Money Market		\$10,108,576.58
Thompson Outpatient	Indigent Care		\$417.84	TexStar (Restricted)		\$4,156,638.90
Coastal Gateway HC	Indigent Care		\$641.92	FFB CD Balance		\$0.00
Gaudet Solutions	Indigent Care		\$800.00	Total District Funds		\$23,658,480.60
Bayside Dental	SP Program		\$1,100.00	Less First Financial (Restricted)		(\$3,562,481.51)
Winne Family Dental	SP Program		\$1,762.20	Less TexStar Restricted Amount		(\$500,000.00)
Caba Therapy (Physio)	SP Program		\$108.00	Less LOC Outstanding		\$0.00
Dr. June Stansky	SP Program		\$180.00	Less First Financial Money Market		\$0.00
\$25 Optical	SP Program		\$285.00	Less Committed Funds (See Total Commitment)		(\$754,668.19)
Kalos Counseling	YC Program		\$255.00	Cash Position (Less First Financial Restricted)		\$18,841,330.90
Indigent Healthcare Solutions	Inv# 77950		\$1,566.00	Pending Expenses		(\$221,628.38)
Technology Solutions	Inv# 1869		\$95.00	Ending Balance (Cash Position-Pending Expenses)		\$18,619,702.52
Function 4	Inv# 82848933		\$229.18	*Total Funds (Ending Balance+LOC Outstanding+QIPP Funds Outstanding+Outstanding Chow Loans)		\$27,892,461.87
Blue Cross Blue Shield	Inv# 0254		\$3,837.08	Prior Month		
Hubert Oxford	Legal Retainer		\$1,000.00	Prosperity Operating (Unrestricted)		\$270,838.38
Benckenstien & Oxford, L.L.P	Inv# 51098		\$19,700.00	First Financial (Unrestricted)		\$3,078,531.85
Vidal Accounting	Inv# 00061		\$9,485.00	First Financial (Restricted)		\$3,815,096.04
Graciela Chavez	Inv# 965973		\$160.00	First Financial Money Market (Restricted)		\$13,464,298.71
Felipe Ojeda (Yard Maintenance)	Inv# 1048		\$350.00	TexStar (Restricted)		\$753,350.38
Patricia Ojeda (Consultant)	Inv# 3007		\$10,050.00	FFB CD Balance		\$0.00
Function 4	Inv # 5913		\$45.14	Total District Funds		\$21,382,115.36
Coastal Gateway HC	Grant- (7 of 12 pmts)		\$83,483.58	Less First Financial (Restricted)		(\$3,815,096.04)
US Department of Education	Grant B.Odom- Student Loan		\$720.62	Less TexStar Reserve Account		(\$753,350.38)
Curtis Scott Johnson	Inv# 202405		\$1,190.00	Less LOC Outstanding		\$0.00
Adondis Contracting	Riceland Floor Remodel		\$30,200.00	Less First Financial Money Market (Restricted)		\$0.00
D&C Audit	2023 Audit Inv# 12606		\$33,757.50	Less Committed Funds (See Total Commitment)		(\$917,649.63)
One24 Apparel	Office Door Signs- Inv#D570		\$106.76	Cash Position (Less First Financial Restricted)		\$15,896,019.31
				Pending Expenses		(\$252,460.30)
				Ending Balance (Cash Position-Pending Expenses)		\$15,643,559.01
				Total Funds (Ending Balance+LOC Outstanding+QIPP Funds Outstanding+Committed Funds)		\$27,324,242.64
Total Pending Expenses:			\$221,628.38			

First Financial Bank Reconciliations					
FFB Balance	\$7,746,751.72				
	Restricted Funds	Total Scheduled Payment	Balance Received	Balance Due	Due to District
Gross Yr. 6 & 7, Component 1-IGT 12					
January (1st) - YR7		\$2,276,717.25	\$2,232,173.08	\$44,544.17	\$0.00
February (1st) - YR7		\$2,562,996.87	\$2,469,946.69	\$93,050.18	\$0.00
March (2nd) - YR7		\$2,589,370.52	\$2,524,712.52	\$64,658.00	\$0.00
April (2nd) - YR7		\$2,604,095.08	\$2,544,232.74	\$59,862.34	\$0.00
May (2nd) - YR7		\$2,635,147.77	\$2,594,158.13	\$40,989.64	\$0.00
Total Component 1, IGT 11	\$0.00	\$14,951,630.98	\$14,648,526.65	\$303,104.33	\$0.00
11 Month Set Aside (FFB)					
January (1st Half)		\$2,276,717.25	\$2,232,173.08	\$44,544.17	\$0.00
February (1st Half)		\$2,562,996.87	\$2,469,946.69	\$93,050.18	\$0.00
March (2nd Half)		\$2,589,370.52	\$2,524,712.52	\$64,658.00	\$0.00
April (2nd Half)		\$2,604,095.08	\$2,544,232.74	\$59,862.34	\$0.00
May (2nd Half)	\$2,585,717.49	\$2,635,147.77	\$2,594,158.13	\$40,989.64	\$0.00
Total Loan Set Aside	\$2,585,717.49	\$14,951,630.98	\$14,648,526.65	\$303,104.33	\$0.00
Yr. 7, Component 2 (Public & Private)					
Q3-Comp. 2-March	\$504,006.38	\$738,663.88	\$720,009.12	\$18,654.76	\$216,002.74
Q3-Comp. 2-April	\$494,793.57	\$723,650.95	\$706,847.96	\$16,802.99	\$212,054.39
Q3-Comp. 2-May	\$533,477.67	\$774,116.76	\$762,110.95	\$12,005.81	\$228,633.29
Total Component 2 due to MGRs.	\$998,799.96	\$4,285,355.22	\$4,195,733.47	\$89,621.75	\$1,030,086.76
Yr. 6, Component 3 (Public & Private)					
Yr. 7, Component 3 Q2 (Dec. to Feb.)	\$29,118.96	\$130,742.12	\$41,598.51	\$89,143.61	\$20,799.26
Total Component 3 due to MGRs	\$29,118.96	\$130,742.12	\$41,598.51	\$89,143.61	\$20,799.26
Yr. 6, Component 4 (Public Only)					
Yr. 7, Component 4 Q2 (Dec. to Feb.)	\$22,573.91	\$111,588.85	\$32,248.44	\$79,340.41	\$9,674.53
Total Component 4 due to MGRs	\$22,573.91	\$111,588.85	\$32,248.44	\$79,340.41	\$9,674.53
Yr. 6, Lapse Funds					
Yr. 7, Component Lapse Q2 (Dec. to Feb.)	\$11,197.98	\$59,040.26	\$15,997.12	\$43,043.14	\$4,799.14
Total Lapse Funds 4 due to MGRs	\$11,197.98	\$59,040.26	\$15,997.12	\$43,043.14	\$4,799.14
Variance Payments (Component 1, 2, 3, 4, and Lapsing Funds)					
Variance December	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Variance January	(\$19,011.37)	-\$82,143.06	(\$27,159.10)	(\$54,983.96)	(\$8,147.73)
Variance February	(\$81,420.65)	-\$119,542.55	(\$116,315.21)	(\$3,227.34)	(\$34,894.56)
Variance March	\$15,505.23	\$22,150.33	\$22,150.33	\$0.00	\$6,645.10
Variance April	(\$9,907.87)	-\$14,383.80	(\$14,154.10)	(\$229.70)	(\$4,246.23)
Variance May	(\$18,115.22)	-\$26,409.48	(\$25,878.89)	(\$530.59)	(\$7,763.67)
Variance Payment Totals	(\$84,926.79)	-\$179,535.28	(\$121,323.98)	(\$58,211.30)	(\$36,397.19)

Non-QIPP Funds	\$346,497.77
Restricted	\$3,562,481.51
Unrestricted	\$3,837,772.44
Total Funds	\$7,746,751.72

Committed Funds			
Commitment	Total Initial Commitment	YTD Paid by District	Committed Balance
1. FQHC Grant Funding-2023	\$1,001,803.00	\$584,385.06	\$417,417.94
2. Coastal Marketing Grant	\$276,040.00	\$117,611.79	\$158,428.21
3. WSEMS Grant	\$152,774.40	\$114,580.80	\$38,193.60
4. Marcelous Williams	\$77,590.00	\$58,192.50	\$19,397.50
5. East Chambers ISD	\$253,693.56	\$132,462.62	\$121,230.94
Total Commitments	\$1,761,900.96	\$1,007,232.77	\$754,668.19

Hospital - DY 8 Repayment			
	Amount Advanced by District	IC Repayment by RMC	Balance Owed by RMC
June 28, 2023	\$147,856.73		\$147,856.73
July 19, 2023	\$147,856.73		\$295,713.46
August 16, 2023	\$147,856.73		\$443,570.19
September 20, 2023	\$147,856.73		\$591,426.92
October 18, 2023	\$147,856.73	\$29,635.54	\$709,648.11
November 15, 2023	\$147,856.73	\$51,690.12	\$805,814.72
December 20, 2023	\$147,856.73	\$37,938.73	\$915,732.72
December 20, 2023 - state payoff	\$591,426.89	\$0.00	\$1,507,159.61
January 17, 2024	\$0.00	\$34,294.40	\$1,472,865.21
February 20, 2024	\$0.00	\$40,089.30	\$1,432,775.91
March 20, 2024	\$0.00	\$31,699.18	\$1,401,076.73
April 17, 2024	\$0.00	\$23,814.81	\$1,377,261.92
May 15, 2024	\$0.00	\$34,036.42	\$1,343,225.50
June 26, 2024	\$0.00	\$35,698.88	\$1,307,526.62
July 22, 2024	\$0.00	\$20,765.38	\$1,286,761.24
	\$1,626,424.00	\$339,662.76	\$1,286,761.24

CHOW Interim Working Capital Loan					
	Initial Advance Allowed	Total Amount Advanced	Advance Remaining	Amount Paid Back to Date	Amount Due to District
Gulf Coast (10 Months-Nov. 1, 2024)					
Gulf Coast - Clute	\$1,000,000.00	\$702,060.69	\$297,939.31	\$589,997.53	\$112,063.16
Gulf Coast - Creekside Village	\$1,000,000.00	\$559,082.57	\$440,917.43	\$545,627.14	\$13,455.43
Gulf Coast - Wells	\$1,000,000.00	\$681,911.77	\$318,088.23	\$681,911.77	\$0.00
Gulf Coast - Shepard	\$1,000,000.00	\$826,853.14	\$173,146.86	\$74,512.97	\$752,340.17
Balance Owed by Gulf Coast	\$4,000,000.00	\$2,769,908.17	\$1,230,091.83	\$1,892,049.41	\$877,858.76
Health Mark Group (10 Months-May 1, 2024)					
HMG -Treviso			\$0.00		\$0.00
Balance Owed by Health Mark Group			\$0.00		\$0.00
Senior Living Properties (SLP) (10 Months-Nov. 1, 2024)					
SLP - Coronado	\$1,000,000.00	\$1,678,797.47	(\$678,797.47)	\$0.00	\$1,678,797.47
SLP - Paris	\$1,000,000.00	\$910,616.97	\$89,383.03	\$613,982.77	\$296,634.20
SLP - Palestine	\$1,000,000.00	\$901,471.06	\$98,528.94	\$147,721.10	\$753,749.96
SLP - Overton	\$1,000,000.00	\$917,424.85	\$82,575.15	\$439,133.61	\$478,291.24
SLP - Seabreeze	\$1,000,000.00	\$1,894,665.99	(\$894,665.99)	\$606,595.60	\$1,288,070.39
Balance Owed by Senior Living Group	\$5,000,000.00	\$6,302,976.34	(\$1,302,976.34)	\$1,807,433.08	\$4,495,543.26
Caring (10 Months-Nov. 1, 2024)					
Caring - Oak Brook	\$1,000,000.00	\$581,972.99	\$0.00	\$135,172.71	\$446,800.28
Caring - Gracy Woods	\$1,000,000.00	\$726,914.84	\$0.00	\$326,498.55	\$400,416.29
Balance Owed by Caring	\$2,000,000.00	\$1,308,887.83	\$0.00	\$461,671.26	\$847,216.57
Pillarstone (10 Months-March 1, 2024)					
Pillarstone - Mont Belvieu	\$1,000,000.00	\$361,998.82	\$638,001.18	\$0.00	\$361,998.82
Balance Owed by Pillarstone	\$1,000,000.00	\$361,998.82	\$638,001.18	\$0.00	\$361,998.82
Total CHOW Loan Outstanding	\$12,000,000.00	\$10,743,771.16	\$565,116.67	\$4,161,153.75	\$6,582,617.41

First Financial Bank-11 Month Outstanding Short Term Revenue Note-Loan 24 (Acct #79067) (December 1, 2023-November 1, 2024) 2nd Half of Year 7

Annual Interest Rate:	8.25%	Payments Per Year:	11	Origination Fee:	\$154,210.00
Years:	1	Amount:	\$15,421,032.78		
Amortization Table	Component Payment	Principle	Interest	Payment	Balance
1-December 31, 2023			(\$112,873.39)	(\$112,873.39)	\$15,421,032.78
2-January 31, 2024			(\$112,873.39)	(\$112,873.39)	\$15,421,032.78
3-February 28, 2024			(\$105,591.24)	(\$105,591.24)	\$15,421,032.78
4-March 31, 2024			(\$112,873.39)	(\$112,873.39)	\$15,421,032.78
5-April 30, 2024			(\$109,232.32)	(\$109,232.32)	\$15,421,032.78
6-May 31, 2024 (March, Comp. 1)	\$2,533,748.79	-\$2,533,748.79	(\$101,950.16)	(\$2,635,698.95)	\$12,887,283.99
7-June 30, 2024 (April, Comp. 1)	\$2,544,414.02	-\$2,544,414.02	(\$91,284.93)	(\$2,635,698.95)	\$10,342,869.97
8-July 31, 2024 (May, Comp. 1)	\$2,585,717.49	-\$2,585,717.49	(\$77,571.52)	(\$2,663,289.02)	\$7,757,152.48
9-August 31, 2024 (June, Comp. 1)	\$2,585,717.49	-\$2,585,717.49	(\$58,178.64)	(\$2,643,896.14)	\$5,171,434.99
10-September 30, 2024 (July, Comp. 1)	\$2,585,717.49	-\$2,585,717.49	(\$38,785.76)	(\$2,624,503.25)	\$2,585,717.49
11-October 31, 2024 (August, Comp. 1)	\$2,585,717.49	-\$2,585,717.49	(\$19,392.88)	(\$2,605,110.37)	\$0.00
Amount Paid	\$15,421,032.78	-\$15,421,032.78	(\$940,607.63)	(\$16,361,640.41)	

**First Financial Bank-11 Month Outstanding Short Term Revenue Note-Loan 25 (Acct #57635) (May 31, 2024 - May 25, 2025)
1st Half of Year 7**

Annual Interest Rate:	8.25%	Payments Per Year:	12	Origination Fee:	\$302,900.00
Years:	1	Amount:	\$29,290,000.00		
Amortization Table	Component Payment	Principle	Interest	Payment	Balance
1-June 25, 2024			(\$162,722.22)	(\$162,722.22)	\$29,290,000.00
2-July 25, 2024			(\$162,722.22)	(\$162,722.22)	\$29,290,000.00
3-August 25, 2024			(\$162,722.22)	(\$162,722.22)	\$29,290,000.00
4-September 25, 2024			(\$162,722.22)	(\$162,722.22)	\$29,290,000.00
5-October 25, 2024			(\$162,722.22)	(\$162,722.22)	\$29,290,000.00
6-November 25, 2024			(\$162,722.22)	(\$162,722.22)	\$29,290,000.00
7-December 25, 2024			(\$162,722.22)	(\$162,722.22)	\$29,290,000.00
8-January 25, 2024			(\$162,722.22)	(\$162,722.22)	\$29,290,000.00
9-February 25, 2025 (YR8 Q1)	\$14,645,000.00	-\$14,645,000.00	(\$162,722.22)	(\$14,807,722.22)	\$14,645,000.00
10-March 25, 2025	\$0.00	\$0.00	(\$100,684.38)	(\$100,684.38)	\$14,645,000.00
11-April 25, 2025	\$0.00	\$0.00	(\$100,684.38)	(\$100,684.38)	\$14,645,000.00
12-May 25, 2025 (YR8 Q2)	\$14,645,000.00	-\$14,645,000.00	(\$100,684.38)	(\$14,745,684.38)	\$0.00
Amount Paid	\$29,290,000.00	-\$29,290,000.00	(\$1,766,553.11)	(\$31,056,553.11)	

District's Investments

	Balance	Interest Paid	Reporting Period	Paid this Reporting Period	Interest Paid YTD
Money Market-First Financial Bank	\$10,108,576.58	\$0.04	May 2024	\$45,179.51	\$213,274.24
Texstar C.D. #1110	\$4,156,638.90	5.3126	June 2024	3,288.52	\$19,719.39

TO THE BEST OF MY KNOWLEDGE, THESE FIGURES IN THE WSHD
TREASURER'S REPORT AND SUPPORTING DOCUMENTS CORRECT AND
IN COMPLIANCE WITH THE DISTRICT'S INVESTMENT POLICY.

Edward Murrell,
President

Robert "Bobby" Way
Treasurer/Investment Officer

Date: _____

Date: _____

*Italics are Estimated amounts

EXHIBIT ‘H-3’

Winnie-Stowell Hospital District
Bank Accounts Register
As of June 26, 2024 to July 24, 2024

Type	Date	Num	Name	Memo	Clr	Amount	Balance
100 Prosperity Bank -Checking							247,423.18
Check	06/26/2024	4243	Brookshire Brothers	BAtch 5/4/2024		(4,770.70)	242,652.48
Check	06/26/2024	4244	Wilcox Pharmacy	BAtch 5/3/2024		(2,141.46)	240,511.02
Check	06/26/2024	4245	UTMB Faculty Group Practice	BAtch Date 5/1/2024		(3,964.30)	236,546.72
Check	06/26/2024	4246	UTMB at Galveston	BAtch Date 5/1/2024		(70,339.46)	166,207.26
Check	06/26/2024	4247	Thompson Outpatient Clinic, LLC	BAtch 5/11/2024		(1,400.77)	164,806.49
Check	06/26/2024	4248	Coastal Gateway Health Center	BAtch 5/11/2024		(935.00)	163,871.49
Check	06/26/2024	4249	Alliance Medical Services	BAtch 5/10/2024		(230.00)	163,641.49
Check	06/26/2024	4250	Bayside Dental	BAtch 5/8/2024		(4,136.00)	159,505.49
Check	06/26/2024	4251	Winnie Family Dental	BAtch 5/8/2024		(1,482.80)	158,022.69
Check	06/26/2024	4252	CABA Therapy Services dba Ph...	BAtch 5/10/2024		(677.59)	157,345.10
Check	06/26/2024	4253	Kalos Counseling	BAtch 5/2/2024		(850.00)	156,495.10
Check	06/26/2024	4254	Indigent Healthcare Solutions, ...	Inv# 77950		(1,566.00)	154,929.10
Check	06/26/2024	4255	Technology Solutions of Texas, ...	Inv 1869		(95.00)	154,834.10
Check	06/26/2024	4256	Funcion 4-Lease fka Star Grap...	Inv# 82713429	X	(222.76)	154,611.34
Check	06/26/2024	4257	The Seabreeze Beacon	Inv# 7299		(300.00)	154,311.34
Check	06/26/2024	4258	Hubert Oxford	Legal Retainer		(1,000.00)	153,311.34
Check	06/26/2024	4259	Benckenstein & Oxford	Inv# 51088		(28,790.00)	124,521.34
Check	06/26/2024	4260	Makayla Vidal	Inv# 00058		(9,187.50)	115,333.84
Check	06/26/2024	4261	Graciela Chavez	Inv# 965972	X	(120.00)	115,213.84
Check	06/26/2024	4262	Felipe Ojeda	VOID: Inv# 1050	X	(350.00)	114,863.84
Check	06/26/2024	4263	Patrica Ojeda	Inv# 3006		(8,250.00)	106,613.84
Check	06/26/2024	4264	J & W A/C & Heating	Inv # 855953		(3,800.00)	102,813.84
Check	06/26/2024	4265	Coastal Gateway Health Center	Grant- (6 of 12 pmts)		(83,483.58)	19,330.26
Check	06/26/2024	4266	US Department of Education	Acct #177877792-1		(720.62)	18,609.64
Check	06/26/2024	4267	Curtis Scott Johnson	Inv# 202405		(1,740.00)	16,869.64
Check	06/26/2024	4268	Coastal Gateway Health Center	Marketing- Grant Pmt (2) 2024		(21,906.76)	(5,037.12)
Liability C...	06/27/2024		QuickBooks Payroll Service	Created by Payroll Service on 06/26/2024	X	(6,119.59)	(11,156.71)
Check	06/27/2024	4262		Draft, Withdrawal, Processed		(350.00)	(11,506.71)
Paycheck	06/28/2024	DD1355	Walters, Reagan D	Direct Deposit	X		(11,506.71)
Paycheck	06/28/2024	DD1356	Carlo, Victoria M	Direct Deposit	X		(11,506.71)
Paycheck	06/28/2024	DD1357	Davis, Tina R	Direct Deposit	X		(11,506.71)
Check	06/28/2024	4269	Felipe Ojeda	Inv# 1050		(350.00)	(11,856.71)
Deposit	06/28/2024			Memo:ACH PaymenWinnie-Stowell HCCD 1611500560 Payee:ACH Pa...	X	500,000.00	488,143.29
Deposit	06/28/2024			Deposit, Processed	X	350.00	488,493.29
Check	06/28/2024			ACH, Withdrawal, Processed	X	(4,741.88)	483,751.41
Deposit	06/30/2024			Interest	X	79.35	483,830.76
Deposit	06/30/2024			Deposit, Processed	X	48.27	483,879.03
Check	07/03/2024	4270	J. S. Edwards and Sherlock Ins.	Commercial Property- Policy#427590175345S01		(10,533.06)	473,345.97
Check	07/10/2024	4271	Winnie-Stowell Volunteer EMS	3rd Quarter Grant Check		(38,193.60)	435,152.37
Check	07/10/2024	4272	Marcelous-Williams Resource C...	July Grant Check (3rd Qtr)		(19,397.50)	415,754.87
Liability C...	07/12/2024		QuickBooks Payroll Service	Created by Payroll Service on 07/11/2024		(8,311.26)	407,443.61
Paycheck	07/15/2024	DD1358	Norris, Sherrie	Direct Deposit			407,443.61
Paycheck	07/15/2024	DD1359	Walters, Reagan D	Direct Deposit			407,443.61
Paycheck	07/15/2024	DD1360	Carlo, Victoria M	Direct Deposit			407,443.61
Paycheck	07/15/2024	DD1361	Davis, Tina R	Direct Deposit			407,443.61
Check	07/24/2024	4273	Brookshire Brothers	06/04/24		(5,951.24)	401,492.37
Check	07/24/2024	4274	Coastal Gateway Health Center	6/11/2024		(641.92)	400,850.45
Check	07/24/2024	4275	Gaudet Solutions	6/7/2024		(800.00)	400,050.45
Check	07/24/2024	4276	Kalos Counseling	6/2/2024		(255.00)	399,795.45
Check	07/24/2024	4277	\$25 Optical	6/8/2024		(285.00)	399,510.45
Check	07/24/2024	4278	Bayside Dental	6/8/2024		(1,100.00)	398,410.45
Check	07/24/2024	4279	CABA Therapy Services dba Ph...	6/10/2024		(108.00)	398,302.45
Check	07/24/2024	4280	Dr. June Stansky, Optometrist	6/8/2024		(180.00)	398,122.45
Check	07/24/2024	4281	Winnie Family Dental	6/8/2024		(1,762.20)	396,360.25
Check	07/24/2024	4282	Thompson Outpatient Clinic, LLC	6/11/2024		(417.84)	395,942.41
Check	07/24/2024	4283	UTMB Faculty Group Practice	6/1/2024		(2,786.06)	393,156.35
Check	07/24/2024	4284	UTMB at Galveston	6/1/2024		(9,985.26)	383,171.09
Check	07/24/2024	4285	Wilcox Pharmacy	7/10/2024		(1,380.00)	381,791.09
Check	07/24/2024	4286	Kalos Counseling	6/2/2024		(255.00)	381,536.09
Check	07/24/2024	4287	Winnie Community Hospital, LLC	Adonis Contracting Reim- Floor Remodel		(30,200.00)	351,336.09
Check	07/24/2024	4288	Benckenstein & Oxford	Invoice 51098		(19,700.00)	331,636.09
Check	07/24/2024	4289	Blue Cross Blue Shield of Texas	Invoice 0254		(3,837.08)	327,799.01
Check	07/24/2024	4290	D&Co. LLP	Invoice 12606		(33,757.50)	294,041.51
Check	07/24/2024	4291	Felipe Ojeda	Invoice 1052		(350.00)	293,691.51
Check	07/24/2024	4292	Funcion 4-Lease fka Star Grap...	Invoice 82848933		(229.18)	293,462.33
Check	07/24/2024	4293	Funcion 4	Invoice 1135913		(45.14)	293,417.19
Check	07/24/2024	4294	Graciela Chavez	Invoice 965973		(160.00)	293,257.19
Check	07/24/2024	4295	Coastal Gateway Health Center	7 of 12 Payments		(83,483.58)	209,773.61
Check	07/24/2024	4296	US Department of Education	Acct #177877792-1		(720.62)	209,052.99
Check	07/24/2024	4297	Hubert Oxford	Legal Retainer		(1,000.00)	208,052.99
Check	07/24/2024	4298	Indigent Healthcare Solutions, ...	Invoice 78119		(1,566.00)	206,486.99
Check	07/24/2024	4299	Makayla Vidal	Invoice 00061		(9,485.00)	197,001.99
Check	07/24/2024	4300	Curtis Scott Johnson	Invoice WSHD202406		(1,190.00)	195,811.99
Check	07/24/2024	4301	One24 Apparel	DS70		(106.76)	195,705.23
Check	07/24/2024	4302	Technology Solutions of Texas, ...	Invoice 1878		(95.00)	195,610.23
Total 100 Prosperity Bank -Checking						(51,812.95)	195,610.23
102 First Financial Bank							20,357,024.97
102b FFB #4846 DACA							6,893,627.90
Deposit	06/28/2024			Memo:ACH PaymenWinnie-Stowell HCCD 1611500560 Payee:ACH Pa...		(500,000.00)	6,393,627.90
Check	06/28/2024					(162,722.22)	6,230,905.68
Check	06/28/2024			Customer Transfer Request per Michael		(2,635,698.95)	3,595,206.73
Total 102b FFB #4846 DACA						(3,298,421.17)	3,595,206.73
102c FFB #7190 Money Market							13,463,397.07
General Jo...	06/30/2024	MV 06.24-09		post interest for MM account	X	44,414.49	13,507,811.56
General Jo...	06/30/2024	MV 06.24-09		post interest for MM account	X	765.03	13,508,576.59
Total 102c FFB #7190 Money Market						45,179.52	13,508,576.59
Total 102 First Financial Bank						(3,253,241.65)	17,103,783.32
TOTAL						(3,305,054.60)	17,299,393.55

EXHIBIT ‘I’

AUTHORIZING RESOLUTION
FIRST FINANCIAL BANK-CLEARING ACCOUNT

At a duly constituted meeting of the Board of Directors of Winnie-Stowell Hospital District (“District”), a political subdivision of the State of Texas established pursuant to CHAPTER 286 OF THE TEXAS HEALTH & SAFETY CODE, held on July 24, 2024, the following resolution was adopted:

WHEREAS, at the July 24, 2024 Regular Meeting, the Board unanimously voted to establish a “Clearing Account” at First Financial Bank (“Bank”) for the purpose of segregating deposits incorrectly made to a District Nursing Facility account until the deposit can be reconciled and to enter into a Treasurer Management Agreements as required.

NOW, THEREFORE, BE IT RESOLVED that the Board of Directors of the District hereby adopts the following resolutions:

- (1) First Financial Bank is authorized to open a “Clearing Account” to segregate deposits incorrectly made to a District Nursing Facility until the deposit can be reconciled.
- (2) The following employee of the District, listed below is authorized to enter into execute Treasury Management Services Agreements with Bank; signature cards; other necessary account agreements; and wire transfer funds or ACH Funds to or from the Account subject to any agreement with the following: a) Bank; b) Managers of each Facility; c) Accounts Receivable Lenders; or d) Landlords, including but not limited to: a) Management Agreements; b) Security Agreements; c) Depository Account Instruction and Service Agreements (“DAISA”); d) Inter-creditor Agreements; Collateral Agreements; or e) Depository Account Control Agreements (“DACA”):

Name	Title	Signature
Edward Murrell	President	_____
Anthony Stramecki	Vice President	_____
George Robert Way, Jr.	Treasurer	_____

- (3) The following employee of the District, listed below is authorized to enter into execute Treasury Management Services Agreements with Bank; signature cards; other necessary account agreements; and wire transfer funds or ACH Funds to or from the Account subject

to any agreement with the following: a) Bank; b) Managers of each Facility; c) Accounts Receivable Lenders; or d) Landlords, including but not limited to: a) Management Agreements; b) Security Agreements; c) Depository Account Instruction and Service Agreements (“DAISA”); d) Inter-creditor Agreements; Collateral Agreements; or e) Depository Account Control Agreements (“DACA”):

Name	Title	Signature
Victoria Carlo	Administrator	_____
Mrs. MaKayla Lynn Vidal	District Certified Public Account	_____

- (4) The Administrator of the District, or the District’s General Counsel, are authorized and directed to deliver for and on behalf of the District, a certificate of this resolution to the bank.
- (5) The Bank is authorized to rely upon this Resolution until the bank has received written notice of any amendment or recession of the resolution.
- (6) The District is authorized to enter into Treasurer Management Agreements for the newly established account, subject to this Resolution on behalf of the Facilities.

I further certify that the District is duly organized and existing and has the power to take the action called for by the foregoing resolutions.

IN WITNESS WHEREOF, I have hereunto set my hand as Secretary this 24th day of July 2024.

Edward Murrell, President

CERTIFICATE

I, the undersigned, Jeff Rollo, Secretary of the Winnie Stowell Hospital District, hereby certify that that the foregoing Resolution to establish a clearing account to be used, among other things, to segregate deposits incorrectly made to a District Nursing Facility until the deposit can be reconciled is a full, true, and correct copy of a resolution duly adopted by the Board of Directors of the Winnie Stowell Hospital District at its Regular Meeting held on **Error! Reference source not found.**4 and at the place therein specified, at which a majority of the members were present and voted. I further certify that the resolution is entered in the minutes and has not been amended or repealed.

IN WITNESS WHEREOF, I have hereunto set my hand as Secretary this **Error! Reference source not found.**th day of July 2024.

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Secretary, Board of Directors

SECRETARY CERTIFICATE

I, the undersigned, Raul Espinoza, Secretary of the Winnie Stowell Hospital District, hereby certify that that the foregoing Resolution to establish a "Clearing Account" at Post Oak Bank is a full, true, and correct copy of a resolution duly adopted by the Board of Directors of the Winnie Stowell Hospital District at its Regular Meeting held on March 21, 2018, held on the day and at the place therein specified, at which a majority of the members were present and voted. I further certify that the resolution is entered in the minutes and has not been amended or repealed.

IN WITNESS WHEREOF, I have hereunto set my hand as Secretary this 21th day of March, 2018.

Raul Espinoza, Secretary
Board of Directors

Exhibit "A"
April 19, 2017 Authorizing Resolution