

Town versus surgical gown on Holy Cross Hospital board

By Andrew Oxford

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If Taos County residents feel a bit of ownership over Holy Cross Hospital, it is not unjustified.

The community's role is evident at virtually each turn through its Weimer Road campus, making it a distinctly local institution. Many paintings on its walls were donated by renowned Taos artists. The walls themselves — the entire building, in fact — are owned by the county government, construction financed through a gross receipts tax approved by voters in 1991.

But amid turnover in the organization's board during recent years, the hospital's board members have come to include fewer people from outlying communities. Instead, those selected for open seats on the board last year were chosen amid what was described as a mandate for change. Thus it was their experience in health care or business rather than community of residence that led to their selection.

Now, as a longtime member of the Taos Health Systems board of directors steps down, there is renewed debate over the importance of geographic diversity among the nonprofit's decision makers.

Jeannie Masters, of Questa, is not seeking another term on the hospital's board.

But the seat she has held for more than 20 years has been intended for a resident of northern Taos County and is just one of two open for applicants this year.

The other position, held by Andy Torres, is traditionally intended for a resident of southern Taos County. Torres, the board's vice-chair, is expected to apply for another four-year term.

And geographic diversity is ensured by the spirit if not the letter of the organization's bylaws. But if last year's nominating process is any indication, the board could continue to see an overhaul perhaps best characterized as town vs. surgical gown.

The question facing a committee that will nominate candidates for both seats is whether a career in health care or business administration matters more than living in Questa or Pe-asco when it comes to running the community's hospital. And can the hospital cultivate a board with the knowledge needed to steer the nonprofit through a tumultuous time while keeping to the goal of also representing the diverse communities in its service area?

Last year, Questa resident and former state senator Charlie Gonzales lost his seat when a resident of Taos was selected in his place.

Meanwhile, a seat held by a resident of Pe-asco was filled by a resident of Ranchos de Taos.

A member of the committee that screened and recommended candidates for last year's open board seats said the choices were informed by an urgency to address mounting community concerns amid the hospital's financial losses, which totaled approximately \$5 million in the previous fiscal year.

The board has been criticized in the past, too, as self-perpetuating with members holding seats for multiple four-year terms. The positions are unpaid.

Thus, the nominating committee and board sought fresh perspectives in 2014, giving more weight to formal experience than address in selecting health policy expert Karen Matherlee, Harvard-educated businessman Bruce Coleman and town councilor Fred Peralta.

The move won praise from some longtime critics and indicated a commitment to heeding concerns about the board's engagement after allegations executive staff were the subject of too little oversight from directors.

Still, the portions of board meetings open to the general public are rarely venues for debate among directors as few questions are asked and votes rarely anything but unanimous.

But Masters maintains there is still a need for geographic diversity and hopes her seat will be filled by someone from Northern Taos County.

"When you get picked up by Taos County EMS, where do you end up?" she asked rhetorically. "It's a community hospital not just for people in Taos."

Taxpayers across the county have bought into the hospital, and their communities deserve to be represented on the board, Masters argued.

The hospital's leadership needs strong connections throughout the area, she posited. Political experience is also valuable, Masters added, referring to Gonzales, who is a former lawmaker.

"There are good minds all over Taos County," she said.

In this debate, however, are echoes of historic arguments against allowing the county's voters to select board members at the ballot box.

An elected board was proposed around the same time voters were considering a gross receipts tax to build Holy Cross.

A petition was unsuccessful, though. Peralta, a board member at the time, rejected the notion, telling a *Taos News* reporter in 1990 "it would be the same thing as making the county commissioners able to run the hospital. If you want to look at an inefficient operation, look at county government. For that matter, look at state government. You've got to get the politics out of it. Elected boards do not cut it."

And so the hospital's bylaws have attempted a delicate balance between community representation and expert engagement.

It is not an uncommon challenge.

The bylaws of Miners Colfax Hospital in Raton, a state facility, require two board members be “miners or their representatives.”

The appointment in 2012 of an engineer to one of those seats stirred criticism from a union representing mine workers.

The bylaws of Holy Cross require the board consist of between nine and 13 members. It is a goal though not a requirement one member be part of the hospital auxiliary, one be a financial professional and one represent a government entity in the hospital’s service area. The chief of staff serves on the board but can only vote if permitted to do so by a majority of a quorum of the board.

Another member is to represent the hospital’s physicians.

The remaining members “shall be selected, insofar as is reasonably possible, to reflect geographic diversity within the hospital’s service area.”

Board chairman Ron Burnham, of Red River, both defends geographic diversity while maintaining it is a policy best not enshrined formally in the bylaws.

“I think the bylaws encourage geographic representation but are permissive so the nominating committee has a lot of discretion,” he said. “You don’t want the bylaws to be too restrictive to prevent putting the best possible people on the board.”

Applications for the two open seats will be accepted through April 10.

A nominating committee, consisting of three current hospital board members, one member of the medical staff and five representatives of local governments will review the applications. The committee is expected to recommend candidates by the May board meeting during which board members will vote on applicants.