

**MINUTES OF MEETING
BOARD OF COMMISSIONERS
CALCASIEU CAMERON HOSPITAL SERVICE DISTRICT
d/b/a WEST CALCASIEU CAMERON HOSPITAL
TUESDAY, FEBRUARY 22, 2022
12:00 Noon - BOARD ROOM**

A regular meeting of the Board of Commissioners of Calcasieu Cameron Hospital Service District d/b/a West Calcasieu Cameron Hospital was held on Tuesday, February 22, 2022, in the hospital Board Room. Mr. Bobby LeTard called the meeting to order at 12:00 p.m. and welcomed Mr. Chuck Kleckley.

COMMISSIONERS PRESENT: Bob Davidson; Frank LaBarbera; Bobby LeTard; Rick Watson

COMMISSIONERS ABSENT: Joe Devall

OTHERS PRESENT: Janie Fruge'; Jobie James; Christi Kingsley; Kris Lyons; JW Peloquin; Mike Klenke; Dondra Zaunbrecher;

GUESTS PRESENT: Chuck Kleckley; Dr. Brian Gamborg

Mrs. Christi Kingsley presented Board Education on our Workplace Violence Prevention Program. She reviewed the scope of the program which includes defining workplace violence, policies and procedures, leadership oversight, reporting and data, and training and education. Mrs. Kingsley also reviewed our implementation strategies along with the new Joint Commission requirements and expectations during the survey process. That concluded This Board's On Board Education.

Mrs. Janie Fruge' shared two (2) Patient Experience stories. The first was a letter received from Mr. Thom Hager expressing his gratitude for the efforts of WCCH staff in "coming together to save my life." The second story was a facebook post from the mother of a young patient expressing gratitude to the WCCH Emergency Department staff on the anniversary of the medical event. This particular story is being shared via video through the Louisiana Hospital Association. That concluded the Patient Experience report.

Mr. LeTard presented the minutes from the meeting of the Board of Commissioners held on January 25, 2022, for approval. Mr. Frank LaBarbera made a motion to approve the minutes as presented. Mr. Rick Watson seconded the motion. The motion passed unanimously. Mr. LeTard announced the next meeting of the Board of Commissioners will be held on March 22, 2022.

Mrs. Frugé presented the Chief Executive Officer's report. She began with a COVID19 update. She reported that COVID hospitalizations are down and currently there are 7 employees out due to positive or pending COVID results. Next, Mrs. Fruge' reported on

COVID stimulus funds. Some of the Federal funds initially intended for Hospitals were sent to Pharmaceutical companies. Discussions with Federal legislators regarding this issue are in the planning stages. That concluded the CEO report.

Mrs. Jobie James, Chief Financial Officer, presented the Financial Reports for the hospital through January 31, 2022. She reported a balance of \$16,919,583.93 in cash, compared to \$17,355,971.48 in December. Contributing factors include maintenance tax funds, Belfor payment, quarterly retirement payment, UPL, CEA, and the purchase of the 1110 Kent Drive property. Mrs. James explained that the days outstanding in A/R are at 50.56 for January, falling below the set goal of 55 days outstanding in A/R. Mrs. James continued by reporting \$15,519,802.81 in Gross Revenue in January, compared to a \$14,466,598.00 budget. Net Revenue was \$4,186,380.60. Mrs. James then reported Operating Expenses of \$6,366,075.99 compared to a budget of \$6,605,427.00. Net Income for January was (\$964,034.44), compared to a budget of \$174,087.00 and \$407,803.94 at this time last year. She continued by reporting that admissions were decreased with 181 admissions in January compared to a budget of 204 and 204 this time last year. Census Days were decreased with 820 compared to a budget of 1027. Average Length of stay was 4.5 days compared to 5.0 days budgeted and 5.0 in prior year; and Average Daily Census was decreased with 26.5 compared to 33.1 in prior year. Readmissions percentage was at 8.8% which is increased from last year. Next, Mrs. James reviewed the Monthly Dashboard stating as of the end of January in the area of Safety – Hospital Inpatient Readmissions, where patients are readmitted within 30 days of discharge for any reason, percentage is 8.8% for January with 16 readmissions and 8.8% YTD. The Annual Net Income is (\$964,034.00) with an YTD budget of \$2,000,000.00. In the area of Efficiency comparing Full Time Equivalents per Adjusted Average Daily Census to prior year, is 7.6 compared to 6.3 in prior year.

Next, Mrs. Kris Lyons reviewed the HCAHPS report for January. Scores indicate 78.9% positive comments for inpatients with 41 responses received; 70.7% positive comments for ED with 57 responses received; and 80% positive comments in ambulatory surgery with 26 responses received.

Mrs. Jobie James then presented the 2022 Utilization Review Plan which has been reviewed and approved by the Medical Executive Committee. That concluded the Financials report.

Mr. JW Peloquin then presented a report of the 2022 Environment of Care Plans reviewed and approved by the Safety Committee. There was a motion by Mr. Rick Watson, seconded by Mr. Frank LaBarbera to approve the following 2022 Environment of Care Plans: Safety Management, Security, Hazardous Materials, Fire Safety, Medical Equipment Management, and Utility Systems. Motion passed unanimously. Mr. Peloquin then gave an update on the Carlyss Medical Clinic. He reported the doors are being hung and the ceiling grid has been installed. Most of the painting has been completed. Installation of the storefront is pending, which should be done in the next 10 days. The Cath Lab project is currently in process. Concrete is being poured today. Delay of shipment of one of the equipment AC units will cause a short delay on completion time. That concluded the Facilities report.

Mrs. Janie Fruge' gave a Patient Care Report. She began by presenting the 2021 Infection Control Annual Evaluation and the 2022 Infection Control Risk Assessment. There was a motion by Mr. Bob Davidson, seconded by Mr. Rick Watson to approve the 2021 Infection

Control Annual Evaluation and the 2022 Infection Control Risk Assessment as presented. Motion passed unanimously. That concluded the Patient Care report.

Next, Mrs. Kristine Lyons presented the High Reliability and Performance Improvement Report. She began with a report on the Johnson Bayou Rural Health Clinic licensing survey. The informal dispute submitted to the Louisiana Department of Health was reviewed and accepted by LDH. The citation was removed. Patient Satisfaction – Press Ganey website was reviewed with the Directors of Surgery and ICU. Leadership rounding was discussed by the CNO at the Clinical Leadership Council. Survey flyers were created by Marketing using guidelines from Press Ganey. Flyers arrived on February 9th and were rolled out on February 14th. The Director of Surgery is working with the IT Analyst to have the Stoplight brochure included in the Paragon system. The Director of Surgery is researching scripting for post-op calls done 2-3 days post operatively. Managed Care Incentive Program – the Q4 LVC data review was completed and submitted. Performance Improvement Committee – February meeting was held and 4th Quarter reported for listed departments occurred. Joint Commission survey preparation – Hospital contracted with a Consultant to work with Quality and various Leaders for the upcoming survey. The focus was to review for completion or progress of completion for identified items on the June Vizient survey. Standards Scoring was completed by Chapter Leaders by February 4th, except for Leaders who were out. Vizient follow up survey will be March 23rd and 24th. Policy Transition – we have elected to delay the transition. Discussions on whether or not we move forward with PHP will be after the Joint Commission survey. PHP has moved to a new platform which has been the contributing factor in delaying the transition. IT will create a folder on the U-Drive entitled *Policies and Procedures*. The policies and procedures that are in the PHP transition folders will be copied into this folder. There will be limited access for editing. That concluded the High Reliability and Performance Improvement Report.

Mr. Mike Klenke gave an IT report. He began by reporting positive and successful results with the CISCO Security Software recently installed. Next, Mr. Klenke reported that following Hurricanes Laura and Delta, fiber has been run to the Hackberry and Johnson Bayou Rural Health Clinics. This infrastructure will allow for faster internet speeds, an increase from 1.5 mg to 50 mg each, and the ability to add workstations safely.

Moving into New Business, Mrs. Janie Fruge' presented the board with a list of Medical Staff Appointments, Reinstatements and Resignations:

**ITEMS REQUIRING APPROVAL FROM THE
BOARD OF COMMISSIONERS – February 22, 2022
(Approved/recommended by Medical Executive Comt.
meeting held – February 15, 2022)**

A. Appointments

Allied Health Practitioners

Amanda Blount, APRN – Supervising Physician: F. Siddiq, M.D. (Urology)

Celeste Brown, APRN – Supervising Physician: F. Siddiq, M.D. (Urology)

B. Report of Teleradiology Services

Radiology Partners, Inc.: Physician Credentialing Agreement
-Telemedicine Providers: Agreement between WCCH and Access Radiology

Reappointment (effective 1/24/2022 – 1/1/2024):

Ryan Geracimos, M.D.; Gregory Hall, M.D.; Cynthia Wallentin, M.D.

Reappointment (effective 2/1/2022 – 1/1/2024):

Jayanta Chaudhuri, M.D.; Jed Santa Maria, M.D.

C. Request Transfer of Staff Category

Patrick Walkin, M.D (Otolaryngology) - Active to Honorary Staff (*Effective 2/2/2022*)

D. Resignation of Clinical Privileges

Medical Staff

Kenneth Jones, M.D. – Emergency Medicine (PEMM) (*Effective 1/21/2022*)

Allied Health Professionals

Gina Miller, APRN – Hackberry Rural Health Clinic (*Effective 1/19/2022*)

Rebecca Castleberry, APRN – Hackberry Rural Health Clinic (PRN) (*Effective 1/18/2022*)

E. Temporary Suspension of Clinical Privileges – (LIFTED)

Allied Health Professionals

Gina Miller, APRN – Hackberry Rural Health Clinic (*Effective 2/2/2022*)

F. Policy Approval

Review of Clinical Contract Services 2022

2020 Utilization Review Plan (No changes reported)

Mr. Bob Davidson made a motion to approve and accept the Medical Staff appointments, resignations, and recommendations as submitted by the Medical Executive Committee with two revisions: Item C – Request Transfer of Staff Category – Dr. Patrick Walkin – from Active to Honorary Staff. Otolaryngology was listed as the specialty area when Anesthesiology is the correct specialty. Item F – Policy Approval – the 2022 Utilization Review Plan was approved but incorrectly (typo) listed as 2020 Utilization Review Plan. Mr. Frank LaBarbera seconded the motion. Motion passed unanimously. The requested revisions will be forwarded to the Medical Staff Office.

Next, Mrs. Kris Lyons presented and reviewed the 2021 Clinical Contract Services Quality Clinical Indicators Evaluation and Action Plans. There was a motion by Mr. Frank LaBarbera, seconded by Mr. Bob Davidson, to approve the 2021 Clinical Contract Services Quality Indicators and Action Plans as presented. Motion passed unanimously.

Next, Mrs. Lyons presented and reviewed the 2022 Clinical Contract Services Quality Indicators. There was a motion by Mr. Frank LaBarbera, seconded by Mr. Bob Davidson, to approve the 2022 Clinical Contract Services Quality Indicators as presented. Motion passed unanimously.

The following capital requests were then presented for approval:

1. Re-pave Parking Lot – Home Health Building, Ste. 3: \$18,369.00

There was a motion by Mr. Rick Watson, seconded by Mr. Bob Davidson to amend the budget in the amount of \$18,369.00 and to approve the re-paving of the parking lot at the Home Health Building, Ste. 3 in the amount of \$18,369.00. Motion passed unanimously.

2. IT Equipment for Carlyss Medical Clinic: \$38,942.82

There was a motion by Mr. Frank LaBarbera, seconded by Mr. Bob Davidson to amend the budget in the amount of \$38,942.82 and to approve the purchase of IT Equipment for the Carlyss Medical Clinic in the amount of \$38,942.82. Motion passed unanimously.

3. 65W Holmium Laser: \$55,500.00

There was a motion by Mr. Frank LaBarbera, seconded by Mr. Rick Watson to approve the purchase of a 65W Holmium Laser in the amount of \$55,500.00. Motion passed unanimously.

4. Site Prep and First part of Professional Services for Professional Medical Office Building Project: \$124,273.00

There was a motion by Mr. Frank LaBarbera, seconded by Mr. Rick Watson to amend the budget in the amount of \$124,273.00 and to approve the Site Prep and First part of Professional Services for the Professional Medical Office Building Project in the amount of \$124,273.00. Motion passed unanimously.

Mr. Rick Watson made the motion at 1:19 pm, seconded by Mr. Bob Davidson, to move into Executive Session for the purposes of strategic planning, marketing, and personnel matters in keeping with Louisiana revised Statutes 42:6, 42:6.1, 46: 1073. The motion passed unanimously.

Mr. Rick Watson made a motion at 2:27 pm to move back into Regular Session. Mr. Bob Davidson seconded the motion. The motion passed unanimously.

Mr. Bob Davidson made a motion, seconded by Mr. Frank LaBarbera to add the following item to the agenda: Authorization for Hospital Directed Payment Certification. Motion passed unanimously. Next, Mr. Bob Davidson made a motion, seconded by Mr. Frank LaBarbera to authorize Mrs. Janie Fruge, CEO, to execute the Hospital Directed Payment certification with the exception of listing the IGT amount. Motion passed unanimously.

Mr. Rick Watson made the motion, seconded by Mr. Frank LaBarbera to adjourn the meeting. The meeting was adjourned at 2:30 pm.

Chairman of the Board

Secretary of the Board