

**MINUTES OF MEETING
BOARD OF COMMISSIONERS
CALCASIEU CAMERON HOSPITAL SERVICE DISTRICT
d/b/a WEST CALCASIEU CAMERON HOSPITAL
TUESDAY, APRIL 26, 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, April 26, 2022, in the hospital Board Room. Mr. Bobby LeTard called the meeting to order at 12:00 p.m. Mr. Rick Watson led the group in prayer.

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

COMMISSIONERS ABSENT: None

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

GUESTS PRESENT: Cathy Patton; Joe Andrepont; Woody Daigle

Mrs. Janie Fruge' announced that Mrs. Cathy Patton was the recipient of the March CEO Shining Star Award. Cathy was recognized for her leadership and accomplishments regarding the recent Cath Lab project. WCCH was selected as one (1) of only twenty (20) facilities in the U.S. to receive the latest version at no additional cost. Additionally, we will most likely be the first facility to receive it.

Mrs. Janie Fruge' then shared two (2) Patient Experience stories. She shared a message received from a teacher at WW Lewis Middle School: *"Shawna came to WW Lewis today and spoke with my class. Not only was she fantastic – and knowledgeable, she held the student's attention and they really liked her. Some of the other teachers heard students commenting very positively about her. I want to thank the Hospital for allowing Shawna to do this. It says a lot about the hospital's commitment and interest in our entire community to send employees out to speak with groups. It is especially important for our students to get this kind of experience. Please tell everyone how much we enjoyed Shawna. I hope to have her visit us more often."* The second experience came from a Google Review: *My sister was on the brink of death with Lupus complications, breathing problems, a UTI and days of colon issues that caused her 3 trips to another ER – who rehydrated her; sent her home though she was so weak. She decided to go to WCCH and it was the best thing that happened to her. They diagnosed her with severe C-Diff and sepsis from the UTI. They had to remove her colon, which saved her life. She was in ICU for 3-4 weeks. The nurses and doctors worked hard to save her life. She made it – she is in rehab now and doing better. Thank God she insisted on WCCH."* That concluded the Patient Experience report.

Mrs. Althea Tran presented Board Education on Section 1557 of the Affordable Care Act. Section 1557 is the nondiscrimination provision of the Affordable Care Act. It prohibits healthcare providers from discriminating against individuals on the basis of race, color, national origin, sex, age, or disability. Any healthcare program that receives federal funding from the Department of Health and Human Services is required to follow Section 1557. There are specific language access requirements within Section 1557 to ensure that individuals with limited English proficiencies can properly communicate with their healthcare provider and receive quality care. The different types of sex discrimination includes discrimination on the basis of pregnancy, false pregnancy, termination of pregnancy, or recovery therefrom, childbirth or related medical conditions, sex stereotyping, and gender identity. Disability means a physical or mental impairment that substantially limits one or more of the major life activities of such individual; having a record of such an impairment; or being regarded as having such an impairment. The U. S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR) enforces Section 1557 as to programs that receive funding from HSS. OCR is a neutral, fact-finding agency that receives, investigates and resolves thousands of complaints from the public alleging discrimination in health services and health coverage. The WCCH Administrative Policy on Section 1557 affirms our commitment to equally treat and respect all patients. The Section 1557 Coordinator, Mrs. Althea Tran, is designated to coordinate efforts of WCCH to comply with Section 1557. Complaints and concerns regarding discrimination are taken very seriously. Any person who believes someone has been subjected to discrimination on the basis of color, race, national origin, sex, age, or disability may file a grievance through our Grievance Process. The Section 1557 Coordinator conducts an investigation of the complaint and will issue a written decision on the grievance no later than 30 days. The person filing the grievance has the right to file a complaint directly to Office for Civil Rights. All information regarding Section 1557 and what our patients need to know are available on our website. The Patient Guide/Handbook provides the information as well. That concluded This Board's On Board Education.

Mr. LeTard presented the minutes from the meeting of the Board of Commissioners held on March 22, 2022, for approval. Mr. Rick Watson made a motion to approve the minutes as presented. Mr. Frank LaBarbera seconded the motion. The motion passed unanimously. Mr. LeTard announced the next meeting of the Board of Commissioners will be held on May 24, 2022. The meeting will begin at 11:00 a.m. and includes an Audit presentation.

Mrs. Frugé presented the Chief Executive Officer's report. She began by reporting we are continuing our preparations for the Joint Commission Survey. Weekly readiness meetings are a part of these preparations. Next, Mrs. Frugé reported that our 3rd Floor Nursing Unit has been closed to patients and all activities moved to 2nd Floor. This was done so that cleaning and painting can now begin on 3rd Floor. The air scrubbers are being removed at this time and windows put back in customary form. Next, Mrs. Frugé reported that we continue our masking policy according to CDC guidelines. Lastly, Mrs. Frugé announced the Sulphur Health Unit ribbon cutting ceremony was held yesterday. They will be occupying leased space adjacent to the Community Health Center. This will allow the Health Unit to operate 5 days per week, rather than 2, and expand access to community services. That concluded the CEO report.

Mrs. Jobie James, Chief Financial Officer, presented the Financial Reports for the hospital through March 31, 2022. She reported a balance of \$17,322,722.35 in cash, compared to

\$17,537,810.12 in February. Mrs. James explained that the days outstanding in A/R are at 42.31 for March, falling below the set goal of 55 days outstanding in A/R. Mrs. James continued by reporting \$16,376,545.99 in Gross Revenue in March, compared to a \$14,466,598.00 budget. Net Revenue was \$4,133,666.73. Mrs. James then reported Operating Expenses of \$7,500,916.57 compared to a budget of \$6,587,576.00. Net Income for March was (\$1,362,230.67), compared to a budget of \$191,938.00 and (\$577,662.73) at this time last year. Contributing factor is related to supplemental payments since July 2021. She continued by reporting that admissions were decreased with 166 admissions in March compared to a budget of 188 and 194 this time last year. Census Days were decreased with 714 compared to a budget of 904. Average Length of stay was 4.3 days compared to 4.8 days budgeted and 5.1 in prior year; and Average Daily Census was 23.0 compared to 31.7 in prior year. Readmissions percentage was at 6.0% which is increased from last year. Next, Mrs. James reviewed the Monthly Dashboard stating as of the end of March in the area of Safety – Hospital Inpatient Readmissions, where patients are readmitted within 30 days of discharge for any reason, percentage is 6.0% for March with 10 readmissions and 7.2% YTD. The Annual Net Income is (\$3,065,860.00) 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 7.8 compared to 5.8 in prior year.

Next, Mrs. Kris Lyons reviewed the HCAHPS report for March. Scores indicate 68.0% positive comments for inpatients with 35 responses received; 62.7% positive comments for ED with 61 responses received; and 100% positive comments in ambulatory surgery with 14 responses received. That concluded the Financials report.

Mr. JW Peloquin then presented a Facilities report. He began by reporting a hot water leak on the Chiller system occurring earlier today as well as outage on two (2) pumps. Maintenance and repairs are in process. Next, Mr. Peloquin gave an update on the counter top change order for the Carlyss Medical Clinic. The anticipated cost was initially reported as approximately \$35,000.00; but will come in right around \$18,000.00. There is a delay on electrical switch gear and lighting at this facility. Mr. Peloquin then gave an update regarding the Cath lab project. There is a change order in the amount of \$17,527.69 for floor duct, saw-cut and AC. Lastly, Mr. Peloquin reported a small gas leak in the kitchen. A bypass was done on Friday. A permanent repair in the amount of approximately \$11,000.00 will be scheduled for a weekend. The repair will require a six (6) to ten (10) hour shutdown. There will be coordinated efforts to ensure all the daily meals can be prepared prior to the shutdown. That concluded the Facilities report.

Next, Mrs. Kristine Lyons presented the High Reliability and Performance Improvement Report. She began with a presentation of the 2021 Performance Improvement Evaluation. There was a motion by Mr. Joe Devall, seconded by Mr. Frank LaBarbera, to approve the 2021 Performance Improvement Evaluation as presented. Motion passed unanimously. Next, Mrs. Lyons presented the 2022 Performance Improvement Plan. There was a motion by Mr. Bob Davidson, seconded by Mr. Rick Watson, to approve the 2022 Performance Improvement Plan and the Quality and patient Safety Goals (Priority items) as presented. Motion passed unanimously. Mrs. Lyons then presented the Scope of Services. There was a motion by Mr. Joe Devall, seconded by Mr. Frank LaBarbera, to approve the Scope of Services with the additional of Clinical Nutrition Services. Motion passed unanimously. Next, Mrs. Lyons presented the High Reliability/Performance Improvement Report. Currently the Culture of

Safety Survey is open until May 13, 2022. A total of 85 responses were received during the first week. Managed Care Incentive Payment Program (MCIP) – LSU’s MCIP Lead has transferred to a team. The Administrative Team visit to WCCCH was April 18th. First quarter milestone deadlines are in March, April, and May. Milestones for 4th quarter 2021 are in the process of being submitted. Two additional programs added for 2022 are: Breast Cancer Screening and Developmental Autism. Performance Improvement Committee – the new QAPI tool has been implemented and the quarterly indicator has been created. Joint Commission Survey preparation – The Vizient mock survey was completed on March 23rd and 24th. We continually work on findings of this survey. That concluded the High Reliability and Performance Improvement Report.

Mrs. Althea Tran gave a Compliance Report. She began with an Ethics Training completion report. Currently we are at a 46% completion rate. That concluded the Compliance Report.

Mr. Mike Klenke gave an IT report. He began by reporting on the Telcom provider issue that occurred last week. For a period of approximately 11 hours, incoming calls were not being received. Our Telcom product will be upgraded with no anticipated upfront cost. That concluded the IT report.

Mrs. Robbin Odom gave a Patient Care Report. She began with an update of the “Beds to Meds” process being implemented. This will allow surgery out-patients to have their medications filled in our out-patient/retail pharmacy. Medication prescriptions can be filled and delivered to the Day Surgery Unit so that patients can be discharged home with their medications. We are currently awaiting on the Medicaid approval for this program. Next, Mrs. Odom reported on the positive effect leader rounding (implemented in February) is having on patient satisfaction. In December, 2021, our Top Box score was 77% - and we were in the 79th percentile. In March, we were in the 97th percentile and in April, were we in the 98th percentile and our Top Box score is 87. Lastly, Mrs. Odom reported the Nurse Call system has been installed on 2nd Floor; installation is in progress in Maternal Child, Radiology and Cath Lab and will now begin on 3rd Floor. Additionally, railing installation will begin on 3rd Floor along with the other maintenance and repair. Periphery painting has been done in the ED. Mr. Peloquin added that we are currently gathering quotes for AC duct cleaning for those areas that our staff cannot access. That concluded the Patient Care Report.

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

**ITEMS REQUIRING APPROVAL FROM THE
BOARD OF COMMISSIONERS – April 26, 2022
(Approved/recommended by Medical Executive Comt.
meeting held – April 19, 2022)**

A. Appointments

Locum Tenens/Temporary Privileges

Bose Cheeran, M.D. (IM/Interventional Cardiology) Iberia Medical Center

*Coverage for C. Thompson, M.D. (Assignment date 4/1/2022 – 4/3/2022)

Allied Health Professionals

Jamie Little, APRN – WCCH Clinics

B. Request for Change of Privileges

Albert Hammett, M.D. – (IM/Cardiology) Heart & Vascular Center/LCMH

*(Relinquish Interventional & Invasive Cardiology privileges) (*effective immediately*)

C. Report of Teleradiology Services

Radiology Partners, Inc: Physician Credentialing Agreement

Schedule 1: Telemedicine Providers: Agreement between WCCH and Access Radiology

Additional Providers: J. Fox, MD; T. Flausner, MD; C. Govea, MD;

E. Insko, MD; R. Lile, MD; D. Swope, Jr., MD; J. Tomich, MD

Resigned Providers: M. Bradshaw, MD

Reappointed Providers for the period of 3/21/2022 - 3/01/2024:

J. Isaacson, MD; E. Leonard, MD; S. Rafie, MD; J. Sandoz, MD; M. Zwick, MD

D. Report of Tele Stroke Services

Agreement between WCCH and Our Lady of Lourdes Reg. Medical Center

Reappointed Provider(s) (for the period of 4/01/2022 - 3/31/2024):

L. Turkewitz, MD - **Temporary Privileges granted by WCCH effective 4/11/2022*

**Temporary Privileges granted by OLOL effective 4/13/2022*

Current Provider – K. Hargrave, MD

**Temporary Privileges granted by WCCH effective 4/11/2022*

**Temporary Privileges granted by OLOL effective 4/13/2022*

E. Resignation of Clinical Privileges

Medical Staff

Gerard Broussard, M.D. – Hospital Medicine/PEMM (*effective 4/5/2022*)

F. Request to Transfer Credentialing to Human Resources

Expanded Duty Dental Assistants:

Kristi Deranger, EDDA, Sponsored by Roger Grimbball, Jr., D.D.S.

Shelby Pickard, EDDA, Sponsored by Roger Grimbball, Jr., D.D.S.

G. FPPE/OPPE Review: FPPE Assessment Review – Completed

Matthew Ayo, M.D. – SSC / General Surgery & TV

H. WCCH Scope of Service (updated April 2022)

I. Delineation of Privilege form – Internal Medicine (General) [*attached*]

Mr. Bob Davidson made a motion to approve and accept the Medical Staff appointments, resignations, recommendations, and Delineation of Privileges – Internal Medicine (General) as submitted by the Medical Executive Committee. Mr. Joe Devall seconded the motion. Motion passed unanimously.

The following capital requests were then presented for approval:

1. Overbed Tables: \$17,038.44

Mr. Rick Watson made a motion, seconded by Mr. Bob Davidson to amend the budget in the amount of \$17,038.44 and to approve the purchase of the overbed tables in the amount of \$17,038.44. Motion passed unanimously.

2. Cardiology Bedside Monitors (4): \$18,621.99

Mr. Frank LaBarbera made a motion, seconded by Mr. Joe Devall, to amend the budget in the amount of \$825.99 and to approve the purchase of the Cardiology Bedside Monitors (4) in the amount of \$18,621.99. Motion passed unanimously.

3. Two (2) Replacement Defibrillators: \$30,879.08

Mr. Joe Devall made a motion, seconded by Mr. Bob Davidson, to approve the purchase of Two (2) Replacement Defibrillators in the amount of \$30,879.08. Motion passed unanimously.

4. Replace worn and damaged Millwork – 2nd and 3rd Floor Nursing Stations:
\$58,535.00

Mr. Bob Davidson made a motion, seconded by Mr. Frank LaBarbera, to amend the budget in the amount of \$16,868.00 and to approve the replacement of Millwork in the 2nd and 3rd Floor Nursing Stations in the amount of \$58,535.00. Motion passed unanimously.

In the next order of business, Mrs. Jobie James presented the Ad Valorem Tax – Millage Rate requesting the adoption of the Operations/Maintenance rate at 6.95.

The following RESOLUTION was read in full:

BE IT RESOLVED, that the following millage is hereby levied on the 2022 tax roll on all property subject to taxation by the Calcasieu Cameron Hospital Service District of the Parishes of Calcasieu and Cameron, Louisiana

	<u>MILLAGE</u>	
Tax for Maintenance/Operations		6.95 mills

BE IT FURTHER RESOLVED that the proper administrative officials of the Parishes of Calcasieu and Cameron, State of Louisiana, be and they are hereby empowered, authorized, and directed to spread said taxes, as hereinabove set forth, upon the assessment roll of said Parish for the year 2022, and to make the collection of the taxes imposed for and on behalf of the taxing authority, according to law, and that the taxes herein levied shall become a permanent lien and privilege on all property subject to taxation as herein set forth, and collection thereof shall be enforceable in the manner provided by law.

A roll call vote was held:

Mr. Davidson – Yes

Mr. Watson – Yes

Mr. LaBarbera – Yes

Mr. Devall – Yes

Mr. LeTard – Yes

The foregoing RESOLUTION was adopted by unanimous, roll call vote.

Mrs. Janie Fruge' then presented an updated Organizational Chart. Ms. Angela Ames has assumed the role of 2nd and 3rd Floor Nursing Supervisor. No other changes were made. There was a motion by Mr. Rick Watson, seconded by Mr. Frank LaBarbera, to approve the Organizational Chart as presented. Motion passed unanimously.

Mr. Rick Watson made the motion at 1:14 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. Bob Davidson made a motion at 2:30 pm to move back into Regular Session. Mr. Frank LaBarbera seconded the motion. The motion passed unanimously.

There being no further business, Mr. Rick Watson made the motion, seconded by Mr. Frank LaBarbera to adjourn the meeting. The meeting was adjourned at 2:31 pm.

Chairman of the Board

Secretary of the Board