

**MINUTES OF MEETING
BOARD OF COMMISSIONERS
CALCASIEU CAMERON HOSPITAL SERVICE DISTRICT
d/b/a WEST CALCASIEU CAMERON HOSPITAL
TUESDAY, JUNE 28, 2022
12:00 P.M. - 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, June 28, 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; Carol “Bobbie” Fountain

COMMISSIONERS ABSENT: None

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

GUESTS PRESENT: Matthew Welsh; Brian Bubb

Mr. Bobby LeTard introduced and welcomed Mrs. Carol “Bobbie” Fountain, Commissioner recently appointed by the Cameron Parish Police Jury to serve the remaining term of office (ending August 2024) vacated by Mr. Joe Devall.

Mrs. Janie Fruge’ announced that Mr. Brian Bubb was the recipient of the March CEO Shining Star Award. Brian continues leading the BioMed team in working collaboratively with all other departments and in establishing cohesive and proactive practices. He is successfully leading the installation of the new Nurse Call System house-wide (approx. 75% complete) and increased our equipment preventive maintenance plan to right at 100%.

Mrs. Janie Fruge’ then shared a Patient Experience story. She shared a letter sent to her by a local physician whose mother was recently a patient here. He expressed gratitude to many individuals for the exemplary care and kindness shown during his mother’s stay. *“All of the staff truly exemplifies the quality of care and individual patient concern for which the hospital has a well-deserved reputation.”* That concluded the Patient Experience report.

Mr. Matthew Welsh presented an overview of the Carlyss Medical Clinic Marketing Campaign. The key message of the campaign is *Providers you trust in a new location*. Drs. Kelly & Jason Fuqua, and Nurse Practitioner, Garrett Istre, will be relocating from their current 920 First Ave., Sulphur, location to the newly constructed Carlyss Clinic located at 151 Walker Road. Mr. Welsh outlined the marketing strategy which includes print ad, billboard, and social media placement as well as direct mail and in-office materials. A ribbon cutting ceremony will be planned in the near future. Next, Mr. Welsh reviewed plans for the mini-campaign

recognizing the One year Anniversary of the Community Health Center. That concluded This Board's On Board education.

Mr. LeTard presented the minutes from the meeting of the Board of Commissioners held on May 24, 2022, for approval. Mr. Bob Davidson 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 July 26, 2022. An appreciation dinner honoring Mr. Joe Devall is planned for July 28, 2022. That concluded the Chairperson's Report.

Mrs. Frugé presented the Chief Executive Officer's report. She began with a COVID-19 update. We have seen a slight increase in patients, between 1-4, on any given day in the past month and between 2-5 employees out due to a positive result. She spoke briefly about a new treatment, an IV Push infusion, which is a new, much quicker treatment option. Next, Mrs. Frugé gave an update on the Water Station Project, including a Transfer Switch. She has spoken briefly with Rep. Higgins about our project and will meet again with him in the near future. Our project is on Rep. Higgins list for funding approval. That concluded the CEO report.

Mrs. Jobie James, Chief Financial Officer, presented the Financial Reports for the hospital through May 31, 2022. She reported a balance of \$11,185,396.39 in cash, compared to \$12,883,429.05 in April. Contributing factors include payment of annual property insurance premium and an IGT. Mrs. James explained that the days outstanding in A/R are at 42.96 for May, falling below the set goal of 55 days outstanding in A/R. Mrs. James continued by reporting \$15,051,912.31 in Gross Revenue in May, compared to a \$14,466,598.00 budget. Net Revenue was \$3,927,891.16. Mrs. James then reported Operating Expenses of \$6,503,181.40 compared to a budget of \$6,578,487.00. Net Income for May was (\$509,525.29), compared to a budget of \$201,027.00 and at (\$76,457.66) this time last year. She continued by reporting that admissions were decreased with 161 admissions in May compared to a budget of 182 and 182 this time last year. Census Days were decreased with 530 compared to a budget of 804. Average Length of stay was 3.3 days compared to 4.4 days budgeted and 4.4 in prior year; and Average Daily Census was 17.1 compared to 25.9 in prior year. Readmissions percentage was at 1.9% which is decreased from last year. Next, Mrs. James reviewed the Monthly Dashboard stating as of the end of May in the area of Safety – Hospital Inpatient Readmissions, where patients are readmitted within 30 days of discharge for any reason, percentage is 1.9% for May with 3 readmissions and 5.7% YTD. The Annual Net Income is \$953,362.00 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 8.1 compared to 5.3 in prior year. Contributing factor is adjustment for in-patient volume.

Next, Mrs. Kris Lyons reviewed the HCAHPS report for May. Scores indicate 86.2% positive comments for inpatients with 41 responses received and a top-box score of 95.12%; 62.7% positive comments for ED with 44 responses received and a top-box score of 75.41%; and 80.0% positive comments in ambulatory surgery with 15 responses received and an 88.33% top-box score. Leadership rounding has resulted in a positive impact for patients and staff. That concluded the Financials report.

Mr. JW Peloquin then presented a Facilities report. He began with an update on the Carlyss Medical Clinic. Electrical power and Air Conditioning was turned on last week. Currently, ceiling tile is being installed and electrical trim-out is in progress. The final coat of paint is pending as well as receipt of counter-tops. There is a change order necessary for painting of the exterior brick. Our anticipated opening is August 1st. There was discussion regarding fencing or barrier to the drainage ditch behind the building. Mr. Peloquin plans meetings with the Police Jury and Gravity Drainage Board to discuss options. Next, Mr. Peloquin provided an update on the Cath Lab project. Construction has been completed and the equipment has been installed. Applications have been delayed due to a cracked grout pad that requires repair. We anticipate a 2-3 week timeframe for completion. Lastly, Mr. Peloquin reported on some issues regarding the panel on our fire alarm system. The panel will be changed which will bring that system to the latest platform and a new type of communication (cellular) with the 9-1-1- Service. That concluded the Facilities report.

Mrs. Robbin Odom gave a Patient Care Report. She reported a 75% completion on installation of the new Nurse Call System. Next, Mrs. Odom reported that tracer teams are progressing in patient care areas. Findings are reviewed and reported weekly. Progress continues on the Policy & Procedures project. That concluded the Patient Care Report.

Next, Mrs. Kristine Lyons presented the High Reliability and Performance Improvement Report. She began with a report and presentation of the Patient Safety and Quality Dashboard. The presentation included indicators for Hospital Acquired Conditions, Patient Safety Indicators, Adverse Events, Sepsis, Pathology, and Emergency Services. Next, Mrs. Lyons reported the Departmental Performance Improvement boards have been implemented and review/assessment rounding will begin later this week. That concluded the High Reliability and Performance Improvement Report.

Mr. Mike Klenke presented and IT Report. He began with a Workstation Update. Over 550 Windows Workstations have been upgraded to Windows 10. Eighty (80) new desktop workstations, Fifty Eight (58) laptops, and Sixty (60) refurbished desktop workstations were purchased. Some workstations which act as medical devices require FDA approved computers which can come only from the vendor. The backup scanning unit in Medical Records will remain Windows 7 due to the scanner being incompatible with Windows 10. That concluded the IT 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 – June 28, 2022
(Approved/recommended by Medical Executive Comt.
meeting held – June, 21, 2022)**

A. New Appointments

Roger Price, MD – Active Staff - Emergency Medicine/PEMM

Bose Cheeran, MD – Active Staff – Interventional Cardiology/
Cardiovascular Institute of the South

Bridget Loehn, MD – Courtesy Staff - Otolaryngology/Imperial Health

Sami Bourgeois, APRN - WCCH Clinics; Supervising Physicians: Clinics

Dean Chesson, APRN – Emergency Department/PEMM;
Supervising Physician: T. Quattrone, MD

B. Report of Teleradiology Services

Radiology Partners, Inc.: Physician Credentialing Agreement Schedule 1:
Telemedicine Providers; Agreement between WCCH and Access Radiology

Additional Providers: C. Erikson, MD; M. Mahan, MD; J. Pan, MD

Reappointments (for the period of 5/20/2022 - 5/01/2024):

W. Romani, Jr., MD; T. Russell, MD

C. Transfer of Staff Category

David McAlpine, MD - Transfer to Affiliate Staff

D. Resignations

Patrick Boyle, MD - Access Radiology (effective 5/23/2022)

Hari Bogabathina, MD - LCMH/Heart & Vascular Center (effective 6/30/2022)

Jamie Little, APRN - WCCH Clinics (effective 6/10/2022)

E. UPDATE: TeleStroke Providers – Neurology Telemedicine/

LOL Regional Medical Center, Board Approval 5/24/2022

F. UPDATE: APRN (Johnson Bayou Health Clinic) - Evaluation

G. FPPE Report

Mr. Bob Davidson made a motion to approve and accept the Medical Staff appointments, resignations, recommendations, and FPPE as submitted by the Medical Executive Committee. Mr. Frank LaBarbera seconded the motion. Motion passed unanimously.

Mr. Rick Watson made the motion at 1:12 pm, seconded by Mrs. Bobbie Fountain, 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. Frank LaBarbera made a motion at 2:26 pm to move back into Regular Session. Mr. Bob Davidson seconded the motion. The motion passed unanimously.

There being no further business, Mr. Frank LaBarbera made the motion, seconded by Mr. Bob Davidson to adjourn the meeting. The meeting was adjourned at 2:27 pm.

Chairman of the Board

Secretary of the Board