

**MINUTES OF MEETING  
BOARD OF COMMISSIONERS  
CALCASIEU CAMERON HOSPITAL SERVICE DISTRICT  
d/b/a WEST CALCASIEU CAMERON HOSPITAL  
TUESDAY, JULY 26, 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, July 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; Carol “Bobbie” Fountain

COMMISSIONERS ABSENT: None

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

GUESTS PRESENT: Susie Pearson; Dr. Brian Gamborg

Mrs. Janie Fruge’ announced that Mrs. Susie Pearson was the recipient of the June CEO Shining Star Award. Susie has been diligent and persistent in her efforts to navigate the numerous supply shortages and issues we have faced over the past 2 years. Recent issues regarding tubes used by the Lab for specimen collections and the Omnipaque film used in Radiology had potential to disrupt quality patient care. Susie’s efforts and persistence have allowed us to stay ahead of these shortages and provide quality care consistently to our community.

Mrs. Janie Fruge’ then shared Patient Experience stories. (1) *“My husband had a procedure in the new cath lab earlier this week. He was the 3<sup>rd</sup> patient receiving care in the new lab. Our experience was incredible. Jana was superb – super nice – as was everyone else. It was really amazing and seemed to run so smoothly. I was really proud.”* (2) We had a patient here for a day surgery but was still groggy after the procedure and was being kept overnight for observation. The patient was a 90-something year old, retired nurse. She was a military nurse for 6-10 years, and worked as a nurse for over 60 years, moving all over the country, and in various nursing roles throughout her career. She said, *“Out of all the places I have been, WCCH is by far the best. All of the staff are caring and take their time explaining everything to me and my family. I have only good things to say about every department and every person.”* (3) Note left by a patient in his room for the staff – *“To my wonderful staff: Could not ask for any better care!! No one is better than ya’ll. You’re the best. Special thanks to the two (2) who did the most, Dani and Deidra. Thanks for being here when I needed you.”* That concluded the Patient Experience report.

Mr. LeTard presented the minutes from the meeting of the Board of Commissioners held on June 28, 2022, for approval. Mr. Bob Davidson made a motion to approve the minutes as presented. Mrs. Bobbie Fountain seconded the motion. The motion passed unanimously. Mr. LeTard announced the next meeting of the Board of Commissioners will be held on August 23, 2022. That concluded the Chairperson's Report.

Mrs. Frugé presented the Chief Executive Officer's report. She began with an update on the new Cath Lab. Now operational, our new GE Allia IGS 5 Cath Lab provides extremely detailed, real-time images of a patient's cardiac anatomy during procedures that require exacting precision. This innovative laser-guided imaging system is designed to support the most complex cases with greater precision and confidence. WCCH is the first hospital in the nation to install this technology. (Tour of the new Cath Lab at the conclusion of the Board meeting). In addition, the IVUS (Intra venous ultra sound) equipment has also been installed. Next, Mrs. Fruge' and Mr. JW Peloquin gave an update on the 3rd Floor Nursing Unit renovation. Cabinet bases were installed last week and installation of counter tops begins later today. Renovation in the Ward Clerk area will follow, along with painting and cleaning. The condensation issue is currently being addressed. Mrs. Fruge' announced that we have been placed on the Joint Commission schedule and expect our survey in the near future. Lastly, Mrs. Fruge' reported that Mr. Matthew Welsh, Marketing Director, recently received his Master of Arts in Strategic Communication and Digital Strategy from the University of Oklahoma's Gaylord College of Journalism and Mass Communication. He was a member of the first graduating class in this new program. That concluded the CEO report.

Mrs. Jobie James, Chief Financial Officer, presented the Financial Reports for the hospital through June 30, 2022. She reported a balance of \$11,506,632.11 in cash, compared to \$11,185,396.39 in May. Contributing factors include IGT and UPL. Mrs. James explained that the days outstanding in A/R are at 42.27 for June, falling below the set goal of 55 days outstanding in A/R. Mrs. James continued by reporting \$16,131,262.81 in Gross Revenue in June, compared to a \$13,999,935.00 budget. Net Revenue was \$5,653,170.73. Mrs. James then reported Operating Expenses of \$7,213,250.95 compared to a budget of \$6,417,203.00. Net Income for June was \$883,038.02, compared to a budget of \$167,488.00 and at \$860,866.57 this time last year. She continued by reporting that admissions were decreased with 154 admissions in June compared to a budget of 190 and 190 this time last year. Census Days were decreased with 597 compared to a budget of 708. Average Length of stay was 3.9 days compared to 3.7 days budgeted and 3.7 in prior year; and Average Daily Census was 19.9 compared to 23.6 in prior year. Readmissions percentage was at 4.5% which is decreased from last year. Next, Mrs. James reviewed the Monthly Dashboard stating as of the end of June in the area of Safety – Hospital Inpatient Readmissions, where patients are readmitted within 30 days of discharge for any reason, percentage is 4.5% for June with 7 readmissions and 5.5% YTD. The Annual Net Income is \$1,836,400.00 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 7.4 compared to 7.4 in prior year. Contributing factor is adjustment for in-patient volume.

Next, Mrs. Robbin Odom reviewed the HCAHPS report for June. In the in-patient units, there continues to be an upward trend in overall hospital rating and responsiveness of hospital staff.

In the Emergency Department, upward trends continue in overall assessment, Communication with Nurse and Doctor, and likelihood of recommending. For Ambulatory Surgery, positive trending continues as well. That concluded the Financials report.

Mr. JW Peloquin then presented a Facilities report. He began with an update on the Carlyss Medical Clinic. The floors have been installed and the top-out for plumbing and electrical is in progress. The exterior brick is scheduled to be painted. We anticipate a final punch-list next week. Mr. Peloquin remains in discussion with the architect regarding options for the gully barrier in the rear parking lot. That concluded the Facilities report.

Mrs. Robbin Odom then gave a High Reliability & Performance Improvement Report. She presented a review of the 2022 Clinical Contract Indicators and performance scores. That concluded the High Reliability & Performance Improvement Report.

Mrs. Robbin Odom then gave an Ethics Training Completion update. We are currently at a 67% organizational completion rate with the Board of Commissioners at 100%. Mrs. Jobie James provided an internal audit schedule update and a summary of recent audit findings on the following: (1) ER E/M Audit; (2) Injection/Infusion Audit; and (3) TPA (Activase) Audit. That concluded the Compliance Report.

Mr. Mike Klenke presented and IT Report. He began by reporting that the circuit upgrade at the Johnson Bayou Rural Health Clinic has been completed. Next, Mr. Klenke reported that the network closet at the Carlyss Medical Clinic is being installed and the connection circuit should be completed around August 10<sup>th</sup>. 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 – July 26, 2022**

**(Approved/recommended by Medical Executive Comt. meeting held – July 19, 2022)**

**A. New Appointments**

Richard Hawkins, MD – Hospital Medicine (PEMM)

Lance Stone, APRN – Emergency & Hospital Medicine (PEMM);

Supervising Physicians: T. Quattrone, MD; A. Mullins, MD

**B. Report of Teleradiology Services**

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

Resignation: Eric Leonard, MD

**C. FPPE Report: 1. OB/Gyn**

2. Anesthesiology (R. Roe, MD)

**D. Administration Policy Management and Review (attached) – (Page 24 of Board packet)**

Mr. Rick Watson 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.

Mrs. Robbin Odom then presented the following policies for review. *Delegation of Authority; Policy Management and Review; and Organizational Functions, Responsibility and Accountability*. Mr. Bob Davidson made a motion to approve the three (3) policies as presented. Mrs. Bobbie Fountain seconded the motion. Motion passed unanimously.

Mr. Rick Watson made the motion at 12:53 pm, seconded by Mr. Frank LaBarbera 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 1:34 pm to move back into Regular Session. Mr. Bob Davidson seconded the motion. The motion passed unanimously.

There being no further business, Mr. Rick Watson made the motion, seconded by Mr. Bob Davidson to adjourn the meeting. The meeting was adjourned at 1:35 pm.

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Chairman of the Board

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Secretary of the Board