

PREVOST MEMORIAL HOSPITAL

BOARD OF COMMISSIONERS MEETING

This is a confidential report as it is a report of this Board of Commissioners and the exercise of its functions.

DATE: September 30, 2021

TIME: 12:00 Noon

PLACE: Prevost Memorial Hospital Conference Room

MEMBERS:

Dr. Michel Hirsch, Chairman

Dr. Glenn Schexnayder, Vice Chairman

Mr. Glenn Robert, Treasurer

Mr. Michael Medine, Recording Secretary

Attended by cell phone

Mr. A.J. Gomez, Commissioner

Mr. Vince Cataldo, Administrator

ABSENT:

Mr. A.J. Gomez

OTHERS PRESENT:

Ms. Nobie Landry, CFO

Ms. Loretta Larvadain, DON

HOSPITAL ATTORNEY

Mr. Larry Buquoi

GUEST:

I. CALL TO ORDER

A. The meeting was called to order by Dr. Michel Hirsch, Chairman at 12:00 Noon.

II. Roll Call

A. Mr. A. J. Gomez was not present.

III. Public Comment

A. None

IV. READING AND APPROVAL OF MINUTES:

A. There was no objection to the minutes of the August 26, 2021 as distributed. The minutes were accepted as individually read.

V. REPORTS OF STANDING COMMITTEES:

A. MONTHLY REPORTS

1. Financial Report

a. The monthly financial report was presented by Ms. Nobie Landry. On a motion by Dr. Glenn Schexnayder and a second by Mr. Glenn Robert, the financial report was accepted as presented.

2. Sales Tax Report

a. Ms. Nobie Landry gave this report to the Board. The total sales tax collected for the month of July 2021 was \$138,666.22. This total showed an increase from July 2020.

3. Medical Staff/MEC

a. Mr. Vince Cataldo read this report to the Board. Mr. Glenn Robert motioned to accept this report as presented. Dr. Glenn Schexnayder seconded the motion and the motion carried.

4. Utilization Review Committee:

a. Social Services: Ms. Jamekco Lewis reported 0 patient visits (0-Covid Patients) and 0 consultations in August 2021 on 1 Acute, 0 Hospice, and 0 Swing admissions.

b. Medicaid Review: There were 0 Medicaid admits in August 2021.

c. Monthly Report of Denials: None for August 2021.

d. Notice of Physician Quality Problems: There were 0 Acute/Observation Charts, 0-Hospice charts and 0-Swing charts that were incomplete for the month of August 2021.

e. Notice of Facility Quality Problems: None for August 2021.

f. Notice of Admission Denial: None for August 2021.

g. Medicare/LHCR Review: There were 2 Acute, 0 Swing and 0 Hospice hospital discharges in August 2021.

LHCR did not request any inpatient charts for review

this month.

- h. QA/I Review: There was 1 Acute, 0 Swing and 0 Hospice hospital admissions in August 2021. There were 2 observation admissions in August 2021. The acute inpatient admits were screened against the PI criteria and 0 variances were found, 0 Patients were transferred, 0 Patients were readmitted within 31 days of prior admit and 0 Patients exceeded the approved length of stay before being transferred to the Swing unit or discharged. There were 0 variances from July 2021 to review.

NOTE: These stats may reflect reclassifications.

- i. Discharges for the Month of August 2021: There were 2 Acute, 0 Swing and 0 Hospice discharges in August 2021.

There was 1 Acute transferred to another facility this month.

There was 1 Acute death this month.

There were 0 Hospice discharges this month.

There were 0 Hospice deaths this month.

There were 0 Swing discharges this month.

There were 0 Swing deaths this month.

The Board accepted this report as presented.

5. Operative and Invasive Procedures Committee

a. Wound Care Clinic

1. There were 60 patients seen in the wound care clinic in August 2021.

2. There were 0 specimens from the wound care clinic submitted in August 2021.

b. Emergency Department

1. There were 0 specimens received from the emergency department in August 2021.

c. Pathologist Review

1. There were 0 specimens received from the wound care clinic in August 2021.

There were 0 specimens from the OP/Emergency department.

There were no non-gyn cytologies performed this month.

The Board accepted this report as presented.

6. Emergency Room Committee:

- a. The Board reviewed the minutes of the September 2021 Emergency Room Committee meeting covering statistics for the month of August 2021. There were no objections to the minutes as presented.

See attached.

a. Statistics (August Statistics)

692 Total Patients

3 Admissions/ 2 Observations

22 Transfers to another facility

2 Mortalities

2 Codes

0 Positive results

6 AMA

25 Left without being seen—includes triage

10 Left prior to triage

14 Eloped (LDTX)

19 Returns to ED within 72 Hours

(15 with same symptoms, 4 different symptoms)

120 Patients received 128 x-rays

1 Interpretation differed from radiologist

Physician #8 – 1 discrepancy

56 Patients received 74 CT Scans

1 Interpretation differed from radiologist

Physician S.R. – 1 discrepancy

0 Cardiac Thrombolytic administrations

0 Stroke Thrombolytic administration

The Board accepted this report as presented.

7. Safety Committee

Period Covered—August 1 - 31, 2021

a. Committee Reports

1. Environment of Care

a. Equipment Management Plan

1. The Hear radio test was completed successfully in August 2021.
2. The monthly generator test was performed on August 19, 2021.
3. The emergency power generator test was performed by Mr. Sidney Goetz.

4. Hurricane Ida

- Hurricane Ida made landfall on Sunday August 29, 2021 to the Louisiana coast as a category 4 storm with sustained winds of 150 mph.
- On August 29, 2021 approximately at 19:00 hours the 300 KW generator was started and was the main source of electricity for the hospital. The Ascension Parish Government has been our main source of fuel as of September 5, 2021.
- September 5, 2021 the 300 KW generator ran out of fuel and the power switched to the 40 KW for the hospital and 85 KW for the CT scanner and x-ray machine. This all occurred at approximately 04:30 hours.
- The Maintenance Director and the Hospital Administrator were contacted immediately.

The parish of Ascension re-fueled the 300 KW generator and stated they will return to top it off approximately every two hours.

- 07:30 hours –Even though more fuel was added to the 300 KW generator it failed to start. Cummings Generator Company was contacted by Mr. Sidney Goetz, the Maintenance Director.
- 07:56 hours – Waiting on Cummings Generator Company and the top off of fuel.
- 08:00 hours – Internet was not working properly and was limited in Lab, X-ray, ER and Respiratory. We continued to assess the situation and solutions were implemented as needed.

- Will continue to monitor all issues and work with the hospital Administrator and the Maintenance Director.
- 09:35 hours – The generator specialist from OEP assessed the generator and changed the battery which resulted in a successful generator start. The OEP of Ascension Parish also topped off the fuel in the generator. The 300 KW is now full.
- 09:45 hours – In direct contact with the hospital Administrator and Entergy account representatives.
- 09:45 hours – 11:00 hours – On September 5, 2021 the electricity was restored to the hospital. A few times the electricity was off then back on. The Maintenance and Safety Director decided it was best to allow the hospital to stay on generator power until Monday, September 6, 2021. This was to protect the CT scanner and other hospital equipment from damage due to power surges.
- September 6, 2021 – 07:30 hours The hospital is now on FULL electricity from Entergy Company.

NOTE: The 300 KW generator has an 850-gallon capacity – utilities

8 gallons/hour and

200 gallons/24 hours

b. Safety/Risk Management Plan

1. There was no activity to report at this time. We will continue to monitor.

c. Utilities Management Plan

1. The line isolation test was completed successfully on August 19, 2021.

d. Fire Prevention Plan/Life Safety Management Plan

1. There was no activity to report at this time. We will continue to monitor.

e. Security Management Plan

1. There was no activity to report at this time. We will continue to monitor.

f. Hazardous Materials and Waste Management Plan

1. There was no activity to report at this time. We will continue to monitor.

g. Emergency Management Plan

1. There was no activity to report at this time. We will continue to monitor.

2. Reports

a. Incident Reports

1. There was one employee incident during this time period.

1. A dietary worker tripped on a mat in the kitchen and fell face down into the mat. The employee required medical attention and was brought to the ER. The employee was discharged from the ER and told to follow up with her PCP.

Date of incident: 8/24/21

Employee# 00705

2. There were no physician incidents during this time period.

3. There were no outpatient incidents during this time period.

4. There were no visitor incidents during this time period.

b. Security Report

1. On August 19, 2021, Mr. Vince Cataldo was notified by lab personnel that the monitor at the security guard's desk in the ER was not operating. Mr. Austin Prejean was notified by Mr. James Breaux of the situation. It was found that the computer and the telephone were not working. Mr. Prejean was able to restore service to the equipment. We will continue to monitor.

c. Recalls

1. There were no drug recalls

reported by Pharmacy in August

2021. Pharmacy reports recalls on a quarterly basis.

There were no other recalls in any other department reported in August 2021.

d. General Safety

1. There was no activity to report at this time. We will continue to monitor.

b. Old Business

1. We are in a COVID-19 pandemic and are daily assessing the OEP portal. We are following the guidelines from the Governor of Louisiana and the President of the United States. We are still following the visitor COVID-19 Policies. Each department in the hospital is also checking daily temperatures on employees. This should be followed and if any issues occur contact our Infection Control Nurse.

c. New Business

1. None

The Board accepted this report as presented.

8. Administrative

a. Complaints

1. There were two complaints received in August 2021.

a. There was a complaint received for an emergency room physician. This complaint was forwarded to the emergency room medical director on August 3, 2021. This complaint was resolved on August 11, 2021.

Date of complaint: 8/1/21

ER Physician: #53

Patient# 604499

b. There was a complaint received for a PBX operator. This complaint was forwarded to the PBX Department Head on August 6, 2021. This complaint was resolved on August 24, 2021.

Date of complaint: 8/6/21

Employee# 00224

Patient# 633042

b. Pending Litigation	FILED	CLOSED
1. Kaiden LeBlanc	09/28/12	
2. James Mulvey	10/04/19	
3. Lynn Landry	08/19/20	
4. Stephen Brandly	09/28/20	

B. QUARTERLY REPORTS

1. None

VI. OLD BUSINESS

A. Recruitment and Retention (Ms. Loretta Larvadain)

1. Ms. Loretta Larvadain gave this report to the Board. The nursing department has been having ongoing problems with staff shortages since December 2020. We are still struggling to fill shifts and work shorthanded for most shifts. Advertising on Facebook, the hospital website and newspapers has not provided any candidates. Ms. Larvadain said she is not utilizing any staffing agency at this time. They have been unable to find coverage for us. A follow up report will be given at the next regular meeting.

B. Electronic Medical Records/Promoting Interoperability Program

(Dr. Nagaratna Reddy) (Care South)

1. Electronic Medical Record

a. Mr. Vince Cataldo gave this report to the Board. Athenahealth go live was August 6, 2019. Dr. Nagaratna Reddy and CareSouth requested an interface with our electronic medical record system. Dr. Reddy's interface has been completed for Lab, but we are still working on the x-ray portion (VASO is showing errors with pending and finalized results). CareSouth's interface is still on hold. We are also checking with Athenahealth to see if an interface with Epic is possible. This is a request from OLOL Ascension Physicians. A follow up report will be given at the next regular meeting.

2. Promoting Interoperability Program

a. Mr. Vince Cataldo gave this report to the Board. We filed for exception for the 2020 Promoting Interoperability Program because we did not meet the requirements. We did receive an exception for 2020. We met the requirements for Promoting Interoperability in May, June and July. This was immediately locked in for 2021. A follow up report will be given at the next regular meeting.

C. C T Scan Services

1. Mr. Vince Cataldo gave this report to the Board. There were 95 CT Scans performed on 76 patients in August 2021. There were 56 emergency patients, 19 outpatients and 1 inpatient scanned. Of the 95 scans performed 74 emergency scans, 20 outpatient scans and 1 inpatient scan was performed. There was 1 patient scanned for cardiac calcium scoring. There were 12 bone density studies done in August 2021. There were no low dose CT lung cancer screenings.

D. Tele-Stroke

1. There was one (1) mock stroke patient and one (1) stroke patient seen in the emergency room in August 2021. Thrombolytics were not administered. The robot was not utilized.

E. La. Health Care Quality Forum/La. Health Information Exchange (LAHIE)

1. Mr. Vince Cataldo gave this report to the Board. They are still working on the interface. This interface also involves Orchard (Lab System). An update was made to the Athena/Orchard interface. We are waiting on LAHIE to complete their part. There is no new information to report at this time. Ms. Liz Simoneaux called Ms. Cindy Munn and Ms. Simoneaux is waiting for a response. A follow up report will be given at the next regular meeting.

F. Hospital Improvements and Renovations (Mr. Henry Chauvin & Mr. Glenn Higgins)

1. Mr. Vince Cataldo gave this report to the Board. There is no new information to report at this time. A follow up report will be given at the next regular meeting.

G. Adjacent Property

1. Mr. Larry Buquoi gave this report to the Board. Judge Cody Martin dismissed Mr. Claude Legendre's appeal on August 26, 2021. Mr. Steve Irving sent the necessary paper work to Mr. Richard Derbes to complete the title insurance. Mr. Derbes said this should be completed by next week. A follow up report will be given at the next regular meeting.

H. Detox Services (Inpatient Withdrawal Management)

1. Mr. Vince Cataldo gave this report to the Board. There is no new information to report at this time. A follow up report will be given at the next regular meeting

I. National Fitness Campaign

1. Mr. Vince Cataldo gave this report to the Board. All of the new signage was installed on September 24, 2021 and it looks great. A follow up report will be given at the next regular meeting.

J. Drainage Impact Study (GSA Proposal)

1. Mr. Vince Cataldo gave this report to the Board. Ms. Kimberly Koehl (GSA) (Mckim & Creed) sent a supplemental agreement for Drainage Impact Study Revisions. Once this agreement was approved work resumed on this study. The study should be completed in two weeks. A follow up report will be given at the next regular meeting.

K. Mammography

1. Mr. Vince Cataldo gave this report to the Board. There were 37 mammograms performed in August 2021. We are continuing to send reminder letters and follow ups. A follow up report will be given at the next regular meeting.

L. COVID-19

1. Mr. Vince Cataldo gave this report to the Board. Currently all employees and patients are having a temperature screening at the 2 admit locations in the building. Face masks are also being provided to everyone. We will continue to monitor the COVID-19 situation and remain within all required regulations.

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2. Mr. Vince Cataldo gave this report to the Board. Prevost Hospital's lab is performing a Nucleic Acid Amplification test for COVID-19 in-house. Records reveal the following test results as of September 29, 2021.

NAA (Nucleic Acid Amplification) Commercial & In-house Testing

3846 Tests performed

898 Positive results

2946 Negative results

0 Pending

(23% positive findings)

In-House Testing (Antibody)

This in-house antibody testing was discontinued on

January 28, 2021. Total = 691

The lab has thus far obtained 4,537 tests. In-house Antibody testing began on April 4, 2020, commercial testing began on March 16, 2020 and in-house NAA testing began on September 24, 2020. The in-house antibody test is no longer available at Prevost.

M. Update PMH Hand Book (Ms. Stacey Nichols)

1. Mr. Vince Cataldo gave this report to the Board. There is no new information to report at this time. A follow up report will be given at the next regular meeting.

N. Get Updated Equipment

1. Ventilators/New Equipment

a. Mr. Vince Cataldo gave this report to the Board. Mr. James Breaux has decided to request a new pulmonary function machine for his department. Following a request for proposals Mr. Breaux purchased a new pulmonary function machine for his department. This machine was purchased on an emergency basis because our machine failed. The purchase will be published in our Journal of Record (The Donaldsonville Chief).

O. Employee Matters (Ms. Stacey Nichols)

1. Salary Survey

a. Mr. Vince Cataldo gave this report to the Board. Other adjustments to the payroll will be made as soon as time permits. There is no new information to report at this time. A follow up report will be given at the next regular meeting.

P. Surplus Property (Mobile Home)

1. Mr. Vince Cataldo gave this report to the Board. The mobile home has been demolished and will be moved to the adjacent property and burned a little at the time. We are waiting for the property to be cleared through the courts. The property should be cleared shortly after the August 26, 2021 deadline. A follow up report will be given at the next regular meeting.

Q. West Ascension Parish

1. Mr. Vince Cataldo gave this report to the Board. The wellness center feasibility study is in progress. Mr. A.J. Gomez and Mr. Vince Cataldo were part of this process. There is no new information to report at this time. A follow up report will be given at the next regular meeting.

R. Board Members' Terms

1. Two Board members' terms expired in June 2021. The Personnel Committee (APG) did virtual interviews on September 20, 2021 to appoint or reappoint to fill these vacancies. Board members' terms do not expire until replacements are chosen to replace the active members. The candidates must be approved by the full council at the next regular meeting in October. A follow up report will be given at the next regular meeting.

S. Postlethwaite & Netterville Engagement

1. Mr. Vince Cataldo gave this report to the Board. An engagement letter from Postlethwaite & Netterville for the Annual Independent Audit was received recently. Following a brief review by the Board Mr. Glenn Robert motioned to accept pending Mr.

Larry Buquoi's approval. Dr. Glenn Schexnayder seconded this motion and the motion carried. Mr. Buquoi had no problem with this engagement letter. This engagement letter was signed and sent to Postlethwaite & Netterville.

T. Applications for Review and Reappointment

1. The following medical staff members were reviewed by the Medical Staff on 8/17/21 and 9/21/21 and the Board on 8/26/21 for a mandatory two-year reappointment.

a. Joan H. Sutcliffe, M.D.; Virtual Radiology

b. Allen Missoi, M.D.; Virtual Radiology

c. Peerapod Chiowanich, M.D.; Virtual Radiology

The Board reviewed the medical staff members for the second time for a two-year reappointment. Dr. Glenn Schexnayder motioned to accept the applicants as presented. Mr. Glenn Robert seconded the motion and the motion carried.

VII. NEW BUSINESS

A. Applications for Review and Approval of Provisional Privileges

1. The following applicant was presented to the Board for review and approval of provisional privileges.

a. Kerry Sullivan, D.O.; Virtual Radiology

Following a review of the applicant, Mr. Glenn Robert motioned to approve the applicant for provisional privileges. Dr. Glenn Schexnayder seconded the motion and the motion carried.

B. Applications for Review and Approval of Full Privileges

1. The following applicant was presented to the Board for review and approval of full privileges.

a. Mary Alfidi, M.D.; Virtual Radiology

Following a review of the applicant, Dr. Glenn Schexnayder motioned to accept the applicant for full privileges. Mr. Glenn Robert seconded the motion and the motion carried.

C. Application for Review and Reappointment

1. The following medical staff members completed a reappointment packet to begin the mandatory process for a two-year reappointment. The medical staff members' reappointment packets were given to each Board member for review.

a. Glenn Barras, M.D.; Family Medicine

b. William Mazlewski, D.O.; Emergency Medicine/Hospitalist

This will be voted on next month following MEC approval.

D. Quarterly Budget Review (June, July & August)

1. Ms. Nobie Landry gave this report to the Board. Ms. Landry reported minor adjustments to the Quarterly Budget. Following a discussion Mr. Glenn Robert motioned to accept the budget adjustments as presented. Dr. Glenn Schexnayder seconded this motion and the motion carried.

E. MOB (214 Clinic Drive)

1. Beau Box Proposal

a. Beau Box has proposed the following:

- Close off door from server/data room to the restroom
- Install badge access on the server/data room door, which
will remain locked after completion
- Add a restroom door from the opposite hallway

(See Attached)

Following a discussion, Dr. Glenn Schexnayder motioned to approve the Beau Box proposal. Mr. Glenn Robert seconded this motion and the motion carried.

2. Electrical Work (Exterior)

a. The main electrical box to the rear of the building is equipped with fuses and needs to be upgraded. Mr. Brandon Cortez (Electrical Engineer) with Castagnos, Goodwin & Utley did a site review and agrees that this needs an upgrade. This upgrade could include a quick connection for a portable generator. Following a discussion, Dr. Glenn Schexnayder motioned to have Mr. Brandon Cortez design this upgrade. Mr. Glenn Robert seconded this motion and the motion carried.

3. Hurricane Damage

a. Mr. Vince Cataldo gave this report to the Board. Prior to the hurricane the City of Donaldsonville removed 3 large shrubs from the servitude to the rear of the property and we were cleaning up the remainder of the property. The hurricane hit and caused damage to the canopy, the trees and the roof. One of the dormers has a shingle missing and this was repaired temporarily by Vaughn Roofing. Part of the canopy was attached to the building. When this section of the canopy pulled off the building it caused damage to the fascia board. This section of the canopy is resting on the top of the canopy.

Proposals to replace and repair are in progress. The remaining portion of the canopy is in good condition with just one post that needs to be replaced to include a down spout. Most of the broken branches in the trees and on the ground have been removed. A follow up report will be given at the next regular meeting.

F. Fuel Storage on Property for Disasters

1. Mr. Michael Medine suggested having diesel fuel stored on hospital property to support our generators. Mr. Vince Cataldo will speak with our regular supplier. A follow up report will be given at the next regular meeting.

VIII. EXECUTIVE SESSION

A. No executive session was called.

IX. CONTINUING EDUCATION

A. A copy of the following articles was given to each Board member.

1. Printed Material

- a. Louisiana Department of Health makes third doses of
COVID-19 vaccine available for people with moderately to
severely compromised immune systems
(Louisiana Department of Health 8/14/21)
- b. 13 charged in fake vaccine card scam
(The Advocate 9/2/21)
- c. Hospitals hit with nurse staffing crisis amid COVID-19
(The Advocate 9/3/21)
- d. La.'s bayou region lost over 200 hospital beds
(The Advocate 9/6/21)
- e. CDC finds unvaccinated 11 times more likely to die of
COVID-19
(The Advocate 9/11/21)
- f. Biden's vaccine rule ignites instant GOP opposition
(The Advocate 9/11/21)
- g. FDA experts among group opposing U.S. booster shot
(The Advocate 9/14/21)
- h. Pope says not getting a vaccination is 'suicide'
(The Advocate 9/18/21)

X. ADJOURNMENT

- A. There being no further business to discuss, a motion for adjournment was made by Mr. Glenn Robert. The motion was seconded by Mr. A.J. Gomez.

Dr. Michel Hirsch, Board Chairman

Mr. Vince Cataldo, Administrator/Secretary