

Prevoist Memorial Hospital



301 Memorial Drive
Donaldsonville, LA 70346
Ph# 225-473-7931

Board of Commissioners:
Michel Hirsch, M.D., Chairman
Glenn Schexnayder, M.D., Vice-Chairman
A.J. Gomez, Treasurer
Michael Medine, Recording Secretary
John Marchand, Commissioner

Vince A. Cataldo
Administrator
Joint Commission Approved

September 29, 2022
Rescheduled to October 6, 2022

BOARD OF COMMISSIONERS MEETING AGENDA

- I. Call to Order
- II. Roll Call
- III. Public Comment
- IV. Reading and Approval of Minutes
- V. Reports of Standing Committees
 - A. Monthly Reports
 - 1. Financial Report
 - 2. Sales Tax Report
 - 3. Medical/Executive Committee
 - 4. Utilization Review Committee
 - 5. Operative and Invasive Committee
 - 6. Emergency Room Committee
 - 7. Safety Committee
 - 8. Administrative
 - B. Quarterly Reports
 - 1. None
 - C. Bi-Annual Reports
 - 1. None
- VI. Old Business
 - A. Recruitment and Retention
 - B. Electronic Medical Records/Promoting Interoperability Program
 - C. Radiology Services
 - D. Tele-Stroke
 - E. La. Health Care Quality Forum—La. Health Information Exchange (LAHIE)

- F. Hospital Improvements & Renovations
- G. West Ascension Parish
- H. MOB (214 Clinic Drive)
- I. Fuel Storage on Property for Disasters
- J. Emergency Room Roof Repair
- K. Ethics & Sexual Harassment Training
- L. Trustee Self-Assessment
- M. ER/Hospitalists (Physician coverage – Blue Angels Health)
- N. Laboratory (wall & door)
- O. EMTALA
- P. Medicaid Recall
- Q. Investments
 - 1. Edward Jones
 - 2. PMH’s Investment Policy
- R. Hospital Rooms – Minor Restoration
- S. Directed Payment Program (DPP)
- T. IT Room AC Addition

VII. New Business

- A. P&N Proposals
 - 1. Annual Independent Audit
 - 2. Statewide Agreed Upon Procedures Audit
- B. Louisiana Compliance Questionnaire (Quasi-Public)
- C. Related Party Questionnaire
- D. The Joint Commission Survey
- E. Budget Review (Quarterly)
- F. Appointment for full privileges
- G. Appointment for provisional privileges

VIII. Continuing Education

- A. Printed Material
 - 1. Tax breaks OK’d for \$4.2B trio of projects in Ascension, St. James (The Advocate, 8/25/22)
 - 2. Our Lady of the Lake names next president (The Advocate, 8/25/22)
 - 3. Hospital’s Pandemic Related Financial Strain Jeopardizes Access to Care (LHA Impact Weekly, 09/19/22)
 - 4. Mary Bird Perkins names new CEO (The Advocate, 9/23/22)

IX. Adjournment

**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 29, 2022 - Rescheduled to October 6, 2022

TIME: 12:00 Noon

PLACE: Prevost Memorial Hospital Conference Room

MEMBERS:

Dr. Michel Hirsch, Chairman
Dr. Glenn Schexnayder, Vice Chairman
Mr. John Marchand
Mr. Michael Medine, Recording Secretary
Mr. A.J. Gomez, Treasurer
Mr. Vince Cataldo, Administrator

OTHERS PRESENT:

Ms. Nobie Landry, CFO
Ms. Loretta Larvadain, DON

ABSENT:

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. All members were present.

III. Public Comment

A. None

IV. READING AND APPROVAL OF MINUTES:

A. There was no objection to the minutes of the August 25, 2022 meeting 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. A.J. Gomez, 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 was \$143,147.41. This total showed an increase from July 2021.

3. Medical Staff/MEC Meeting

a. Mr. Vince Cataldo read this report to the Board. On a motion by Mr. Mike Medine, this report was accepted as read.

4. Utilization Review Committee

a.

| SOCIAL SERVICES | August 2022 |
|------------------------|--------------------|
| Patient Visits | 2 |
| Consultations | 0 |
| Observations | 1 |
| Referrals | 1 |

b.

| MEDICAID REVIEW | August 2022 |
|------------------------|--------------------|
| Admits | 0 |

c.

| MONTHLY DENIALS | August 2022 |
|------------------------|--------------------|
| Denials | 0 |

d.

| PHYSICIAN QUALITY PROBLEMS | August 2022 |
|---|--------------------|
| Acute / Observation Chart | 0 |
| Hospice Charts | 0 |
| Swing Charts | 0 |
| An incomplete chart would be missing one or more of the following: H & P, Discharge Summary, Unsigned Orders. | |

e. Notice of Facility Quality Problems: None for August 2022.

f. Notice of Admission Denial: None for August 2022.

g.

| MEDICARE / LHCR REVIEW | August 2022 |
|---------------------------------------|--------------------|
| Acute | 0 |
| Swing | 0 |
| Hospice | 0 |
| Inpatient Charts Requested for Review | 0 |

h.

| QA/I REVIEW | August 2022 |
|---|--------------------|
| ADMISSIONS (observations not included) | |
| Acute Admissions | 0 |
| Swing Admissions | 0 |
| Hospice Admissions | 0 |
| DISCHARGES | |
| Acute Discharges | |
| • Acute Discharged - Home | 0 |
| • Acute Discharged – Another Facility | 0 |
| • Acute Discharged – Nursing Home | 0 |
| • Acute Discharged – Swing | 0 |
| • Acute Discharged – Hospice | 0 |
| • Acute Discharged – Left AMA (against medical advice) | 0 |
| Swing Discharges | 0 |
| Hospice Discharges | 0 |
| DEATHS | |
| Acute Deaths | 0 |
| Swing Deaths | 0 |
| Hospice Deaths | 0 |

The Board accepted this report as presented.

5. Operative and Invasive Procedures Committee

a. Wound Care Clinic

| WOUND CARE CLINIC | August 2022 |
|--------------------------|--------------------|
| Patients seen | 63 |
| Specimen submitted | 0 |

b. Emergency Department

| EMERGENCY DEPT. | August 2022 |
|------------------------|--------------------|
| Specimens received | 0 |

c. Pathologist Review

| PATHOLOGIST REVIEW | August 2022 |
|---------------------------|--------------------|
| Wound Care Specimens | 0 |
| OP/Emergency | 0 |
| Non-Gyn Cytologies | 0 |

The Board accepted this report as presented.

6. Emergency Room Committee
 - a. The Board reviewed the minutes of the Emergency Room Committee meeting covering statistics for the month of August 2022.

There were no objections to the minutes as presented. See attached

| August 2022 ER Stats | |
|--|-----|
| Total Patients | 538 |
| Admissions | 0 |
| Observations | 5 |
| Transfers to another facility | 24 |
| Codes | 1 |
| Positive Outcomes | 0 |
| Expired | 1 |
| AMA | 5 |
| Left without being seen (includes triage) | 7 |
| Left prior to triage | 2 |
| Eloped (LDTX) | 7 |
| Returns to ED within 72 Hours | 20 |
| Returns w/same symptoms | 10 |
| Returns w/different symptoms | 10 |
| Patients received x-rays | 113 |
| # of x-rays | 127 |
| Interpretations differed from radiologist (ER Physician (#14, #9 (2), #1) | 4 |
| # of Patients received CT Scans | 63 |
| # of CT Scans | 74 |
| Interpretations differed from radiologist (KK) | 1 |
| Cardiac Thrombolytic administrations | 0 |
| Stroke Thrombolytic administration | 0 |

The Board accepted this report as presented.

7. Safety Committee (08/01/22 to 08/31/22)

a. Committee Reports

1. Environment of Care

| | Environment of Care Plans | Date Tested /Checked |
|----|---|-----------------------------|
| 1. | Equipment Management Plan | |
| | ❖ Hear Radio Test | 08/05/22 |
| | ❖ Generator Test | |
| 2. | Safety/Risk Management Plan | |
| | ❖ No activity – will continue to monitor | On going |
| 3. | Utilities Management Plan | |
| | ❖ Line Isolation Test | 08/05/22 |
| | ❖ Medical Gas Testing | 08/05/22 |
| 4. | Fire Prevention Plan/Life Safety Management Plan | |
| | ❖ Fire Extinguisher Inspection | 08/05/22 |
| | ❖ Oxygen Cut Off Valves | 08/05/22 |
| | ❖ Fire Marshall Annual Visit | awaiting |
| | ❖ Ground Fault Testing & Hospital Electrical Panels | 08/05/22 |
| 5. | Security Management Plan | |
| | ❖ No activity – will continue to monitor | Ongoing |
| | ❖ Egress Lights Testing | 08/05/22 |
| 6. | Hazardous Materials and Waste Management Plan | |
| | ❖ Emergency Showers | 08/05/22 |
| 7. | Emergency Management Plan | |
| | ❖ No activity – will continue to monitor | On going |

2. Reports

a. Incident Reports

| INCIDENTS | No. of Incidents |
|------------------|-------------------------|
| ➤ Employee | 0 |
| ➤ Physician | 0 |
| ➤ Outpatient | 0 |
| ➤ Visitor | 0 |

b. Security Report

1. Security was reminded to always lock double doors leading into the Emergency Room.
2. Due to Safety Reasons the back door by the kitchen should be locked on weekends.

c. Recalls

1. There were no drug recalls reported by Pharmacy. Pharmacy reports recalls on a quarterly basis. Mr. James Breaux asked that every department return recall papers after they are informed.

- d. General Safety
 - 1. The annual Safety Skills electronic version are being monitored for completion by employees. This includes the Sexual Harassment and Ethics. We are about 95% complete.
- b. Old Business
 - 1. We are in a COVID 19 pandemic and are daily assessing the OEP and the President of the United States. We are following the visitor COVID-19 Policies. If any issues occur, contact our Infection Control Nurse.
- c. New Business for Safety Committee
 - 1. Policy in progress for mask usage in the hospital for patient areas only. The infection control nurse is creating the new policy.

The Board accepted this report as presented.

- 8. Administrative
 - a. Complaints
 - 1. There were zero (0) complaints received in August 2022.
 - b. Pending Litigation

| NAME | FILED | CLOSED |
|-----------------|----------|--------|
| Kaiden LeBlanc | 09/28/12 | |
| James Mulvey | 10/04/19 | |
| Lynn Landry | 08/19/20 | |
| Stephen Brandly | 09/28/20 | |
| Reavon Gasper | 02/21/22 | |

V. OLD BUSINESS

- A. Recruitment and Retention

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, newspapers and Indeed. Two contracts were signed with Advantage Medical Professionals for travel nurses. We are also utilizing some other part time contract nurses to fill the schedule. Ms. Nobie Landry and Mr. Vince Cataldo have been working with The Gallagher Company to do a salary survey for our region. They are preparing a sample for us to review. We want accurate and usable information. The cost for this study will be approximately \$370.00 per position requested. A follow up report will be given at the next regular meeting.
- B. Electronic Medical Records/Promoting Interoperability Program (Dr. Nagaratna Reddy) (CareSouth)
 - 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 was turned on and it

worked great. Dr. Reddy then wanted something more and the interface is off now. The teams are working on new request. CareSouth interface will not be done. An alternate solution is in progress. 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. Athena and LAHIE are still working on new CMS requirements. A follow up report will be given at the next regular meeting.

C. Radiology Services

1. Mr. Vince Cataldo gave this report to the Board.

| August 2022 | | |
|-------------------------|------------------------|---------------------|
| Service | No. of Patients | No. of Exams |
| X-rays ER | 113 | 127 |
| X-rays Out Patient | 133 | 166 |
| X-rays In Patient | 0 | 0 |
| CT Scan ER | 43 | 54 |
| CT Scan Out Patient | 20 | 20 |
| CT Scan In Patient | 0 | 0 |
| Bone Density | 17 | 17 |
| Cardiac Calcium Scoring | 1 | 1 |
| Lung Cancer Screening | 0 | 0 |
| Mammograms | 74 | 74 |

D. Tele-Stroke

1. There was one (1) mock stroke patient and zero (0) stroke patients seen in the emergency room in August 2022. Thrombolytics were not administered. The robot was not utilized. The Robot should be utilized on all stroke patients.

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

1. Mr. Vince Cataldo gave this report to the Board. LAHIE and Athena are continuing to work on new CMS requirements. A follow up report will be given at the next regular meeting.

F. Hospital Improvements & Renovations

1. Mr. Vince Cataldo gave this report to the Board. Mr. Henry Chauvin and Mr. Glenn Higgins are working on the specs for the underground drainage, retention ponds and the parking lots so this project can go out for bids. I spoke with Mr. Chauvin on August 12, 2022 and September 22, 2022 and we discussed ways to expedite this project. A follow up report will be given at the next regular meeting.

G. West Ascension Parish

1. Mr. Vince Cataldo gave this report to the Board. Ascension Parish and Donaldsonville Leaders are looking for advice on how to revitalize Donaldsonville and the West Bank of

Ascension Parish. There is no new information to report. A follow up report will be given at the next regular meeting.

H. MOB (214 Clinic Drive)

1. Electrical Work (Main Electrical Distribution Panel Replacement)
 - 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 will include a quick connection for a portable generator. At the November meeting, the board approved having this upgrade designed. On 7/25/22 a pre-bid meeting was held at the site. The bid was opened on August 9, 2022 at 2 pm. The bid was presented to the Board on 8/25/22. The Board accepted this bid as presented. All paperwork has been completed for the contractor (C.J. Electric). A follow up report will be given at the next regular meeting.
2. Hurricane Damage
 - a. Mr. Vince Cataldo gave this report to the Board. Garcia Roofing repaired the roof of the MOB on 9/15/22.

I. Fuel Storage on Property for Disasters

1. Mr. Vince Cataldo gave this report to the Board. Mr. Cataldo is working with Mr. Frank Marcello and Mr. Taylor Marcello on this project. Mr. Frank Marcello called on August 19, 2022 to let me know that the tank is ready and he is working to secure the trailer. There is no new information to report. A follow up report will be given at the next regular meeting.

J. Emergency Room Roof Repair

1. Mr. Vince Cataldo gave this report to the Board. Cribbs Inc. was notified following the March Board meeting. Cribbs Inc. repaired the roof on 9/15/22.

K. Ethics & Sexual Harassment Training

1. Mr. Vince Cataldo gave this report to the Board. It is mandatory that all board members of public bodies and all hospital employees receive ethics and sexual harassment training annually. Mr. James Breaux prepared instructions for each Board member to receive this training utilizing a link. We need two members to complete both trainings. A follow up report will be given at the next regular meeting.

L. Trustee Self-Assessment

1. Board members are required to complete a self-assessment document annually. Mr. Vince Cataldo gave each Board member the document to complete and return. We need one member to complete his self-assessment. A follow up report will be given at the next regular meeting.

M. ER/Hospitalists Blue Angels Health (Physician Coverage)

1. Dr. Gruezke and Dr. Punukollu gave this report to the MEC on August 16, 2022. The August volume increased by 62 patients and there were zero (0) admits and 5 observation patients. Dr. Gruezke reported that he has a conference call once a month with ER Physicians. A follow up report will be given at the next regular meeting.

- N. Laboratory (wall & door)
1. Mr. Vince Cataldo gave this report to the Board. The project started on July 8, 2022 and is near completion. A follow up report will be given at the next regular meeting.
- O. EMTALA
1. On June 28, 2022, the Department of Health and Hospital representative returned for follow-up visit related to EMTALA violation survey findings on 04/25/22. Ten medical records from ED were reviewed for transfer procedures. One out of ten of the records was missing a transfer form. The transfer form was missing on a patient that was transferred from ED by car.
 2. On July 15, 2022, the hospital received a letter to submit a corrective plan of action about the missing transfer form.
 3. On July 18, 2022, the corrective plan of action was submitted and approved by DHH. The requirement was that all nurses and doctors be educated on the transfer policies. All patients that transfer out to another facility must have a transfer consent signed by doctor and patient. It appears that we will not receive a review on this corrective action.
- P. Medicaid Recall
1. At the June 30, 2022 meeting, Mr. Larry Buquoi offered to correspond with the parties involved to see if he could obtain a copy of the existing contract with amendments. On the July 25, 2022 at our regular quarterly meeting a proposal was presented to reduce our cost by \$34, 450/year (see attached Proforma). On July 28, 2022 a proposal was presented to reduce our cost by \$71,583/year. We did receive a copy of the contract and we were told that there was an unexecuted amendment. Following a discussion Mr. Mike Medine motioned to offer Restorix (the wound care provider) a 90% deal on reimbursed amount for wound care services. Mr. J. Marchand seconded this motion and the motion carried. This counter offer was rejected by Restorix. A follow up report will be given at the next regular meeting.
- Q. Investments
1. Ms. Nobie Landry reported to the Board Mr. Ben Glueck's recommendation. The Board discussed investing more out of the sales tax checking account. After discussion, the Board decided to move \$5,000,000 to Edward Jones to yield between 4.15% to 4.2% per Mr. Glueck. Mr. John Marchand made a motion to approve the recommendation. Dr. Glenn Schexnayder seconded the motion and the motion carried. A follow up report will be given at the next regular meeting.
- R. Hospital Rooms – Minor Restoration
1. Mr. Vince Cataldo gave this report to the Board. We need to repaint a few of the inpatient rooms. The ideal location for this project would be some of the rooms of the West Wing (Rooms 1 – 10). This area is in the first phase of the hospital renovations. The East Wing will put the inpatient further from the nursing station. I asked Mr. Glen Guitreau to get this work done for us. His company is currently working on the Lab wall. A follow up report will be given at the next regular meeting.
- S. Direct Payment Program (DPP)
1. Ms. Nobie Landry gave this report to the Board. Each Board member was given a copy of the projected amount that Prevost would receive per year from this new program. Ms. Landry explained that we would have to sign a Corporate Endeavor Agreement (CEA)

and open a new bank account at a designated bank. The Board had no objection. Everything has been completed including a new bank account. A follow up report will be given at the next regular meeting.

T. IT Room AC Addition

1. Mr. Robert Utley and Mr. Brandon Cortez have been working on a plan to add AC to the IT Room. The current system cannot get the temperature below 82° with all of the equipment in the IT Room. The engineers recommended a mini-split to resolve this problem. Pre-bid meeting was held on 9/12/22. Opening of the bids meeting was held on 9/27/22. Only one bid was received. The engineers will make a recommendation on this bid. A follow up report will be given at the next regular meeting.

V. NEW BUSINESS

A. P&N Proposals

1. Annual Independent Audit – The Board reviewed a proposal from P&N for the Annual Independent Audit for year 2021 and the statewide agreed upon procedures audit. The cost for the two audits is lumped together. The increase for the two audits is 15% from last year. Following a discussion, Mr. A. J. Gomez motioned to approve both audits. Dr. Glenn Schexnayder seconded this motion and the motion carried.
2. Statewide agreed upon Procedures Audit – This audit was cancelled for year 2020 and reinstated by Mr. Mike Waguespack for year 2021.

B. Louisiana Compliance Questionnaire (Quasi-Public)

1. Each Board member was given a copy of the compliance questionnaire for review. Following this review, Mr. A.J. Gomez motioned to approve this questionnaire as presented. Dr. Glenn Schexnayder seconded this motion and the motion carried.

C. Related Party Questionnaire

1. Each Board member was given a copy of the related party questionnaire to complete and return as part of the annual independent audit. A follow up report will be given at the next regular meeting.

D. The Joint Commission Survey

1. Mr. Vince Cataldo gave this report to the Board. TJC survey for the hospital was due on November 2021. Due to the COVID pandemic, the survey was postponed. Two surveyors were here between 9/13/22 and 9/15/22. One surveyor for 3 days and one for 2 days. The Hospital had some significant findings. The Board received one deficiency under leadership development. We are trying to figure out what they are looking for. The survey team will revisit Prevost Memorial Hospital in approximately 30 days. A follow up report will be given at the next regular meeting.

E. Budget Review (Quarterly)

1. Ms. Nobie Landry gave this report to the Board. The plan is to keep everything within 5%. Due to Medicaid Recall, adjustments to budget include decreasing Athena patient revenue and contractual adjustments. Increase Dispro to stay within 5% because of anticipated increase in revenue due. Mr. Mike Medine made a motion to approve the budget adjustments. Mr. John Marchand seconded the motion and the motion carried.

F. Application for Review and Approval of Provisional Privileges

| Name | Specialty |
|--------------------|-------------------------------------|
| AKM Muktadir | Consulting, Tele-stroke (Tulane) |
| Ryan Jean-Baptiste | Consulting, Teleradiology (StatRad) |

Following a review of the applicants, Mr. Mike Medine made a motion to approve the applicants for a four-month provisional status. Mr. John Marchand seconded the motion and the motion carried.

G. Applications for Review and Approval of Full Privileges

| Name | Specialty |
|--------------------|--------------------------------------|
| Clawson, Mark | Hospitalist/Emergency Medicine Staff |
| Howell, Nelson | Hospitalist/Emergency Medicine Staff |
| Idowu, Benedict | Hospitalist/Emergency Medicine Staff |
| Jackson, Darrin | Hospitalist/Emergency Medicine Staff |
| Johnson, Levie G. | Hospitalist/Emergency Medicine Staff |
| Taylor, James | Hospitalist/Emergency Medicine Staff |
| Wolfort, Ryan | Hospitalist/Emergency Medicine Staff |
| Punukollu, Sumanth | Hospitalist/Emergency Medicine Staff |

Following a review of the applicants, Dr. Glenn Schexnayder made a motion to approve the applicants for full privileges. Mr. Mike Medine seconded the motion and the motion carried.

VI. CONTINUING EDUCATION

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

1. Tax breaks OK'd for \$4.2B trio of projects in Ascension, St. James (The Advocate, 8/25/22)
2. Our Lady of the Lake names next president (The Advocate, 8/25/22)
3. Hospital's Pandemic Related Financial Strain Jeopardizes Access to Care (LHA Impact Weekly, 09/19/22)
4. Mary Bird Perkins names new CEO (The Advocate, 9/23/22)

VII. ADJOURNMENT

A. There being no further business to discuss, a motion for adjournment was made by Dr. Michel Hirsch.

Dr. Michel Hirsch, Board Chairman

Mr. Vince Cataldo, Administrator/Secretary