

**BOARD OF COMMISSIONERS
MEETING MINUTES
JUNE 25, 2019**

The Board of Commissioners of Franklin Foundation Hospital, Hospital Service District No. 1, St. Mary Parish, met in regular session at 6:00 p.m., June 25, 2019.

MEMBERS PRESENT

Eugene Foulcard, Chairman
Clegg Caffery, Jr.
Robert Judice, Jr.
Robert Allain, II
Allen Randle, Sr.
Dr. Roland Degeyter

ALSO PRESENT

Stephanie Guidry, CEO
Ron Bailey, CFO
Lanzi Meyers, Legal Counsel
Russell Cremaldi, Legal Counsel
Ron Bailey, CFO
Michelle Skillings, CNO
Dr. Sharad Gunda, Chief of Staff
Tina Petry, Compliance
Collette Vaccarella, Director of Business
Office & Co-Director of Physician Services
Kevin Romero, Business Development/
Marketing/Co-Director of Physician Services
Sharon Procell, Exec. Assist.

MEMBERS ABSENT

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I. CALL TO ORDER

With a quorum present, the meeting was called to order by the Chairman, Mr. Eugene Foulcard at 6:01 p.m.

II. PUBLIC COMMENT

Public comments were made by Ms. Lori Leonard and Ms. Stephanie Broussard.

III. OLD BUSINESS

A. Approval of Minutes – May 30, 2019

Mr. Robert Judice, Jr. moved to approve the minutes of the Board of Commissioners meeting held May 30, 2019 with Mr. Clegg Caffery, Jr. seconding the motion. The motion carried unanimously.

IV. MEDICAL STAFF REPORT

A. Credentials & Medical Executive Reports – June 2019

Dr. Sharad Gunda reported on the following:

1. Dry Needling Update – A questionnaire will be developed to provide objective data/outcome of the therapy. A total of 55 patients were treated, 18 verbalized improvement.
2. Policy and Procedures approved by MEC and needs Board approval:
 - a. Radiology
 - b. ICU
 - c. Med/Surg

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- d. Pharmacy
 - e. Emergency Room
 - f. Nursery
 - g. Labor & Delivery
 - h. Respiratory Therapy
 - i. Environmental of Care
 - j. Nutritional Services
 - k. Antimicrobial Stewardship Policy
 - l. Screening of New Employee for Employee Health
 - m. HemoCue Policy
 - n. Emergency Coverage for Lab/Unanticipated Events
 - o. PPD/Mantoux Tuberculin Policy
 - p. Blood Culture Collection
 - q. Blood and Blood Product Administration
 - r. Infection Control Plan/Infection Control Risk Assessment
 - s. Quality Improvement Plan
3. Dr. Gunda included the recommendations of Medical Executive Committee to the Governing Board related to Credentialing and Privileging as following:
- a. Initial Appointment
 - i. Richard Vanbergen, MD – Consulting – Radiology
 - ii. Kelsey Morris, FNP – Advance Practice Professional – Women’s Clinic
 - b. Reappointments
 - i. GERALYNN REINE, MD – Consulting – Emergency Medicine
 - ii. STACIE MIGUES, FNP – Advance Practice Professional – Baldwin Clinic
 - c. MEC accepted Ochsner Telemedicine credentials to appoint
 - i. Mark Taylor, MD – Consulting - Psychiatry
 - ii. Omar Haque, MD – Consulting – Psychiatry
 - iii. Eric West, MD – Consulting – Psychiatry
 - iv. Nicole Washington, MD – Consulting – Psychiatry
 - v. Emily Shaw, NP – APP – Psychiatry
 - vi. Thomas Sprague, MD – Consulting – Psychiatry
 - vii. Maria Alvarado, MD – Consulting – Psychiatry
 - viii. Jonathan Hulkower, MD – Consulting – Psychiatry
 - ix. Erika Gerz, MD – Consulting – Psychiatry
 - x. Louis Cannizzaro, MD – Consulting – Neurology
 - d. MEC accepted Virtual Radiology credentials to reappoint
 - i. Dawood Malik, MD – Consulting- VRad
 - ii. Laurie Gutstein, MD – Consulting – VRad
 - e. MEC accepted Virtual Radiology credentials to remove
 - i. Kenneth Gaines, MD – Consulting – VRad
 - ii. Elaine Khatod, MD – Consulting – VRad

Rev. Allen Randle, Sr. moved to approve all Policies and Procedures and approve and accept the Credentialing and Privileges with Mr. Clegg Caffery, Jr. seconding the motion. The motion carried unanimously.

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Dr. Gunda distributed a letter, signed by some of the Medical Staff, in support of a former employee.

V. NEW BUSINESS

A. Environmental of Care/Safety – 1ST Qtr. 2019

Mr. Daniel Landry, Plant Operation Director, reported overall performance improvement for Environmental of Care/Safety for the 1st quarter of 2019 was 100% in compliant. He stated the goals set have been in place for some time and have stayed in compliant. He discussed he will be establishing new goals going into the next quarter.

B. Emergency Preparedness – 1st Qtr. 2019

Mr. Daniel Landry, Plant Operation Director, reported being very involved and/or active in the following interagency activities as follow:

- St. Mary Parish LEPC (Louisiana Emergency Response Commission) - discussed Teir II Hazardous Material reporting of the Parish and discussed planned Drill activities in the Parish
- St. Mary Parish PEMAC (Parish Emergency Advisory Committee) – received reports of grant fund expenditures throughout St. Mary parish as it applies to Law Enforcement
- LDH Region 3 Healthcare Coalition Meeting – participating in planning of Drill Activities scheduled for Q2 and discussed the need for Plain Language in our Emergency Operation Plans in order to keep the public fully informed during an emergency; includes clinical emergency codes.

Mr. Landry reported that the Hospital instituted a newly required Continuity of Operations Plan. He stated this plan is required by CMS of all healthcare facilities. He noted the plan includes emergency communication contacts, lists of contracts and Memorandums of Understanding with other agencies, succession plan for incident command posts.

C. Discuss and Approve a Resolution authorizing the CEO to sign documents from Louisiana Health Care Cooperative in Rehabilitation (“LAHC”) as part of a proposal settlement plan for release of partial payments due to the Hospital from LAHC.

Mr. Ron Bailey stated the Board needs to give approval for a Resolution authorizing for the CEO to sign documents from Louisiana Health Care Cooperative in Rehabilitation (“LAHC”) as part of a proposal settlement plan for release of partial payments due to the Hospital from LAHC. He stated the partial settlement claim is roughly around \$6900.00. Mr. Bailey requests that the Board approve the resolution.

Mr. Robert Allain, II made a motion to approve a Resolution authorizing the CEO to sign documents from LAHC as part of a proposal settlement plan for release of partial payments due to the Hospital from LAHC with Mr. Robert Judice, Jr. seconding the motion. The motion carried unanimously.

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D. Review and Approve Organizational Policy & Procedures

Note: This was presented and approved as part of the Medical Executive Report.

VI. FINANCE COMMITTEE REPORT

A. Financials – May, 2019

Mr. Clegg Caffery, Jr. moved to approve the Finance report with Dr. Roland Degeyter seconding the motion. The motion carried unanimously

VII. QUALITY COMMITTEE REPORT

A. Ratification of minutes and all actions taken at the Quality Committee Meeting – June 21, 2019 – Dr. Roland Degeyter

Mr. Robert Judice, Jr. moved to approve the Quality Report and all actions taken at the meeting held on June 21, 2019 with Mr. Allen Randle, Sr. seconding the motion. The motion carried unanimously.

B. Organizational Quality Data – Michelle Skillings, CNO

Ms. Michelle Skillings reported Dr. Gunda and Dr. Degeyter reported the majority of the quality report. She stated one of the things that was going to be presented, was a dashboard of quality by Ms. Bonnie Kester. Ms. Skillings stated Ms. Bonnie took ill and will present at next scheduled Board meeting.

VIII. MANAGEMENT REPORT

A. Administration Report – Ms. Stephanie Guidry, CEO

Ms. Guidry reported on the following:

- Joint Commission Readiness; scoring on survey has changed drastically, “see it sight it”. FFH will have a higher number of sightings. Went from 1.5 day survey to 4 day survey.
- FY 2020 budget preparation for the operating and capital budgets are in progress
- Dr. Buechter has agreed to do surgical consults on weekends for ER and Hospitalist
- Sent a formal letter to Restorix Wound Care to terminate the contract, effective September 1st; wound care patient’s will be referred to Dr. Buechter

B. Nursing Report – Ms. Michelle Skillings, CNO

Ms. Skillings reported on the following:

- It’s was a busy month for May; no flexing
- Hired a Director of Surgery – Ms. Jeanette Dempsey
- Hired a fulltime Physical Therapist – this will reduce contract time
- Have a direct hire in Speech Therapy
- Moral from staff is good

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C. Clinic Report – Ms. Collette Vaccarella, Co-Director of Clinics

Ms. Collette Vaccarella began the presentation of the clinic report for the month starting with clinic accounts receivable. She discussed the slight decrease in clinic accounts receivable and noted that cash collections were improving. She then discussed clinic visit activity for the month of May 2019 as compared to May 2018. She noted that May 2019 clinic visits were down just a bit over the prior year month. Mr. Bailey presented the consolidated clinic cost center report noting that the clinics posted a consolidated loss for the month. Mr. Bailey also discussed the Hospital activity generated by the clinic physicians.

**D. QHR Management Report – Mr. Jodi Pigg, QHR VP
No Report**

IX. EXECUTIVE SESSION

Mr. Clegg Caffery, Jr. made a motion to go into Executive Session at 7:01 pm with Dr. Roland Degeyter seconding. The motion carried unanimously.

- A. Strategic Planning
- B. Termination of OB/GYN Service Agreement

With no further business to discuss in Executive Session, a motion was made by Mr. Robert Judice, Jr. and seconded by Rev. Allen Randle, Sr. to exit Executive Session at 7:21 pm. The motion carried unanimously.

X. ACTION(S) TAKEN

- A. Termination of OB/GYN Service Agreement

Mr. Robert Allain, II made a motion to terminate the OB/GYN Service Agreement with Mr. Robert Judice, Jr. seconding. The motion carried with five (5) to one (1) votes with Dr. Roland Degeyter abstaining.

XI. ADJOURN

With no further business to discuss, Dr. Roland Degeyter moved with Mr. Robert Judice, Jr. seconding the motion to adjourn at 7:24 p.m. The motion carried unanimously.

Eugene Foulcard - Chairman

Stephanie A. Guidry, CEO