



**Riverside Medical Center Board of Commissioners
December 21, 2017
Thursday – 4:00 PM**

Commissioners Present:

Pamela Breland Tammy Magruder
Lavern Jenkins James Thomas
Richard Watts Eric Payne, M.D
John Nichols

Commissioners Absent:

Violet Tate
Gerald King
Lori Schilling

Guest

Peter Sullivan, CEO Riverside Medical Center
Brandon Anzaldua, CFO
Luis Alvarado, M.D., Chief of Medical Staff

CALL TO ORDER/OPENING PRAYER

A meeting of the Riverside Medical Center Board of Commissioners was convened on Thursday, December 21, 2017 at 4:04 p.m. The opening prayer was led by Board Member Nichols. The Pledge of Allegiance was led by Board Vice Chairman Jenkins.

WELCOME

APPROVAL OF MINUTES

The minutes of the November 30, 2017, Board of Commissioners meeting were presented for approval.

Action: A motion to approve the minutes with a correction to be made in the Medical Staff Report on page six, second paragraph, was made by Board Member Thomas, duly seconded by Board Member Magruder, unanimously approved.

CHIEF FINANCIAL OFFICER'S REPORTS

- Statistics/Financial Indicators; Year to Date
- Income Statement
- Balance Sheet
- Cash Flow Summary
- Capital Expenditures
- Bad Debt Summary
- Benefit Summary
- Payroll Summary
- Capital Budget Summary

Mr. Anzaldua provided graphs and charts.

ROOF REPAIR

Mr. Sullivan reported with the recent snow the roof on Riverside Medical Center was severely damaged in certain areas. Primarily in the physician office wing. Mr. Shad Jenkin's received a quote from Fussell Contractor to repair the damaged areas. This contract provides repair of the previous damaged areas, all of which have remained intact. That are mostly in the physician office wing. Mr. Shad Jenkin's received a quote from Fussell Contractor to repair the damaged areas. The quote is as follows:

- Patch spots that are leaking- No warranty: \$37,864.00
- Repair one whole section including extra spots that are leaking- With warranty: \$51,750.00

Action: A recommendation was brought to Riverside Medical Center's Board of Commissioner's by Riverside Medical Center's Finance Committee with an emergent warranty expenditure to approve the emergent roofing repair for physician office wing with warranty and repair leaking areas on other wings of the hospital in the amount of \$51,750, unanimously approved.

FMP

Mr. Sullivan reported, according to the information received by The Rural Hospital Coalition Riverside Medical Center should be receiving FMP payments for July, August, September, October, and possibly November by the last week of December.

MEDICAL BUILDING PURCHASE

Mr. Sullivan reported the medical building Riverside Medical Center is planning to purchase located at 711 Riverside Drive was inspected last Thursday. The structure of the building is very sound. The building needs a few minor repairs with the anticipation will be addressed by the current owners. The official report will be available within a week. The closing on the purchase is scheduled for December 29, 2017 at 2:00 p.m.

NEW BANK ACCOUNT FOR CERTIFICATION OF INDEBTEDNESS

Mr. Sullivan reported, purchase the Medical Building located at 711 Riverside Drive Washington Parish Bond Commission has issued two Certificates of Indebtedness, one to the Louisiana Public

Funding Authority in the amount of \$187,000.00, the second certificate being issued to Dr. Gerald Foret in the amount of \$564,000.00, totaling the amount of \$751,000.00. Riverside Medical Center will provide the down payment in the amount of \$84,000.00. LPFA will release funds into Riverside Medical Center's general account on the morning of the purchase closing. Riverside Medical Center will then issue a payment to Dr. Gerald Foret in the amount of the \$84,000.00 down payment, as well as the \$187,000.00 from LPFA. Riverside Medical Center then must create a new banking account that the scheduled monthly payments will be deposited. Whitney Bank, as Riverside Medical Center's payment authority, will release the funds twice a year.

Action: A recommendation was brought to Riverside Medical Center's Board of Commissioner's by Riverside Medical Center's Finance Committee to set up a bank account to service the certificates of indebtedness as obligated by the resolution that will be prepared by Attorney Matthew Brown, naming Peter Sullivan, CEO, Brandon Anzaldua, CFO, and Riverside Medical Center's Board of Commissioner's Vice Chairman as signatories on the account, unanimously approved.

AIRGAS

Mr. Sullivan presented a quote from Airgas to Riverside Medical Center's Board of Commissioner's. It was brought to Riverside Medical Center's attention that the current liquid oxygen reserve is not in compliance with OSHA standards and other regulatory requirements. The quote from Air Gas for the current tanks to be replaced and brought up to code standards are as follows:

List below highlights the major steps for you to follow for upgrading an existing system (500 Gal main / 10 Cylinder Reserve) to a 1,500gal Main and 500 Gal Reserve

1. **Tear down the existing concrete façade wall that is in the space where new concrete pad needs to go**
2. **Pour new concrete pad for the 1,500gal tank next to existing system (where façade wall is) – per layout/foundation drawings attached**
3. **Fence in the new pad area as shown on layout drawing, including gate access to front of tank area.**
4. **Re-Route 2 alarm wires from existing PCM to new PCM installed right next to it (see note on layout drawing). They just have to re land the wires on the new PCM switches.**
5. **Run new alarm wire to front of 1,500gal tank which will be for *Low Liquid Level – Main Tank*.**
6. **Relabel on their alarm panel(s) inside hospital the existing alarm for the 500 gal tank as the *Low Liquid Level – Reserve Tank*.**
7. **Bring in qualified 3rd party inspector to inspect the new 1,500gal tank and new PCM that APCI installs prior to us putting it online.**

Also, note there is a DRAIN near the front of the existing LOX system. Per NFPA 55, we have to keep the LOX system at least 8 ft. away from that drain. So for the new pad and new tank, we have to keep that in consideration to make sure we set the tank at least 8 ft. away from that drain.

PRICING BREAKDOWN:

Delivery/Hazmat: Currently \$70/delivery – 44 deliveries over the last 12 months

Cost over the last 12 months: \$3,080

New rate \$120/Delivery for 12 deliveries: \$1,440 (Annual savings of \$1,640)

MSC: MSC is currently \$474/month

Cost over last 12 months: \$5,688

New MSC \$650 = \$7,800/year (Annual increase of \$2,112)

Product: Currently \$15.87 (includes \$.60 surcharge) – Last year’s volume was 1,879mscf

Cost over last 12 months: \$29,819.73

New Product Price \$14.72 = \$27,658.88 (Annual savings of \$2,160.85)

Total annual costs to customer:

No changes to current contract = \$38,587.73 (There would be additional install costs for reserve upgrade, see below)

New contract: \$14.72 Unit Price, \$120 Delivery/ Haz Mat and \$650 MSC = \$36,398.88

Savings to RMC is \$1679.85

Action: A recommendation was made to Riverside Medical Center’s Board of Commissioner’s by Riverside Medical Center’s Finance Committee to approve the quote from Airgas as presented, unanimously approved.

RIVERSIDE MEDICAL CENTER MEDICAL STAFF MEETING December 2017

Medical staff conducted its monthly scheduled meeting on December 14, 2017. Those in attendance approved the minutes from the last scheduled meeting, which occurred on November 16, 2017. Dr. Fabre reviewed the Quality Council meeting and Quality Dashboard for the month of November. Dr. Nicholson reviewed the Surgery and Infection Control Committee report. Mr. Sullivan gave the administrative report.

Medical Staff recommends Approval for Recommendations for Change to the Medical staff Bylaws. Medical Staff Bylaws and related manuals were reviewed by CIHQ and recommendations for change were made.

INITIAL APPOINTMENTS:

Dr. Alvarado offered motion, seconded by Dr. Nicholson for the approval of the following initial appointments to Riverside Medical Center: The following have been recommended by the Medical Staff for approval of privileges.

- 1.) Paul Jackson, M.D.- Active- Radiology

REAPPOINTMENTS:

Dr. Alvarado offered motion, seconded by Dr. Nicholson for the approval of the following reappointments to Riverside Medical Center: The following have been recommended by the Medical Staff for approval of privileges.

- 1.) Damon Fortenberry, CRNA- Allied Health
- 2.) Chelsea Wood, FNP- Allied Health- Nephrology

Action: A motion was made to Riverside Medical Center’s Board of Commissioner’s by Riverside Medical Center’s Medical Staff to approve the recommendation of Initial Appointments and Reappointments as presented by Board Vice Chairman Jenkins, duly seconded by Board Member Breland, unanimously approved.

Riverside Medical Center Medical Staff Bylaws Review and Revisions December 2017

After a review this summer from CIHQ, Traci Burgkwist. Executive Director Survey Operations initiated a review of our current Bylaws and related manuals. Please see below the list of recommendations reviewed and recommended for change by Traci as well as the MEC.

Medical Staff Bylaws

- 1.) Recommendation to the Medical Staff to adopt the Medical Staff Policies and Procedures as well as the Credentialing Procedures Manual as part of the Medical Staff Bylaws.
- 2.) Recommendation to the medical staff to review and change Courtesy category for medical staff to affiliation staff.
- 3.) Recommendation and review of Provisions of Anesthesia Services.
- 4.) Recommendation for correction under section 5.6 Manner of Action. Typographical error in referencing Section 5.1, as it should be Section 4.1.
- 5.) Recommendation for change in Medical Staff Bylaws Committee of the staff shall review the Medical staff Bylaws at least every 3 years instead of 2 years.

Medical Staff General Rules and Regulations and Policies and Procedures.

- 1.) Section 1.2.3. - Dentist and Podiatrist. Recommendation to the Medical staff to add the phrase “through an active physician member of staff, with admitting privileges.”
 - i. Proposed change section 1.2.3, change from immediately to within 24-hours but before any surgical intervention.
- 2.) Recommendation in section 1.3.2 Emergency Cases (Proposed change to 24 hours after admission and prior to a procedure requiring anesthesia services.
- 3.) Recommendation in section 1.4.2 Admissions through the Emergency Department. (Proposed change to 24 hours after admission and prior to a procedure requiring anesthesia services.
- 4.) Recommendation in section 1.5 Timely Visitation after Patient Admitted. Proposed change: twenty-four hours. Vs 18- hours)

- 5.) Recommendation in section 5.2 Required Order Proposed change to add or his/her designee.
- 6.) Recommendation Standing Orders proposed change to reflect Electronic Medical Records.
 - i. Additions: Standing order shall be considered as a specific orders by the attending practitioner for that patient, however, cannot be initiated by a nurse without an order to do so, and orders cannot be initiated by a nurse without an order to so.; and shall be followed in the absence of other specific orders by the attending practitioner, inso far as the proper treatment of the patient will allow. Standing orders shall not be initiated except in cases of emergency.
 - ii. Patient care protocols may be initiated by a nurse, in the emergency room after the order is implemented to activate the protocol.
- 7.) Recommendation in section 7.2.1 change from 24 of admission to after admission.
- 8.) Recommendation in section 7.2.2 Use of reports prepared prior to current admission. Proposed change from 14 days to 30 days prior to admission.
- 9.) Section 7.2.3 Short Form Recommendation to add must be completed after admission and prior to a procedure requiring anesthesia services.
- 10.) Section 7.3.3 Recommendation as well as an airway assessment.
- 11.) Recommendation to remove section 7.8- Use of Symbols and Abbreviations.

Credentialing Procedures Manual

- 1.) Section 2.6.3.11- change to peer capacity.
- 2.) Section 5.10.2.2- Care of specific patients or performance of specific procedures. Such privilege shall be granted no more than 120 days in a calendar year.
- 3.) Section 7.1- Failure to complete medical records- add The Chief of Staff will assign an active member to follow and treat existing patients.

Action: A motion was made to Riverside Medical Center's Board of Commissioner's by Riverside Medical Center's Medical Staff to approve the recommendation of the revised Medical Staff Bylaws as presented by Board Vice Chairman Jenkins, duly seconded by Board Member Payne, unanimously approved.

CLINIC SERVICE MANAGEMENT REPORT

The Clinical Departments report for November 2017 is as follows:

Operational

- The cath lab performed 71 procedures on 43 patients.
 - *5-Device Removals/Implants
 - *38-Diagnostic Procedures
 - *28-interventions
- The OR performed 168 surgical procedures on 53 patients
 - *24-surgeries

*144-endoscopies

- Emergency Department visits were 1,214. Total length of stay was an average of 2 hrs 7 minutes. Door to Doc average time was 26 minutes. Those left without being seen rate was 2.2%.
- Telestroke Data: 5 patients. None of the patients met criteria for TPA administration. 1 was flown to Tulane Medical Center and 1 transferred to Lakeview Regional
- Swing Bed- 5 patients. A total of 51 benefit days were used in caring for these patients. Average length of stay was 10.2 days.

Education and Training

- Dr Fabre has been conducting mock surveys in various departments with Mr Mark Watson and Ms Brittany Dillon in preparation for Joint Commission Survey
- **CPOE:** Computerized Physician Order Entry: MTD for November is 94%. This is a great accomplishment and we appreciate the providers and nursing working so hard together to accomplish this. We will continue to track numbers daily with Cerner. If CPOE rates continue to be above the 90% mark for four consecutive months, along with other metrics determined by the HIMSS committee, our goal will be to attest in March 2018.
- **Flu Vaccinations:** 247 Team members received the flu vaccination and 23 team members refused. We had an overall participation rate of 86%. Those employees who did not receive the flu shot, or those who refused it, will be required to wear a mask while in clinical areas during flu season. This is in an effort to protect our employees as well as our patients.
- **Bivarus Scores**

HCAHPS
Riverside Medical Center
National Database Comparison

	Qtr2 2017 Percentages	National DB Percentages	Variance	Percentile	National Min Percentages	National Max Percentages
Q21 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest) • Patients who gave a rating of 9 or 10 (high)	88%	73%	19.9%	96	35%	99%
Q22 Patients who reported YES, they would definitely recommend the hospital • YES, patients would definitely recommend the hospital	53%	72%	-26.0%	2	13%	99%
Q8 Patients who reported that their room and bathroom were "Always" clean • Room was always clean	80%	74%	8.1%	76	36%	100%
Q9 Patients who reported that the area around their room was "Always" quiet at night • Always quiet at night	81%	63%	29.0%	95	30%	97%
COMP1(Q1,Q2,Q3) Patients who reported that their nurses "Always" communicated well • Nurses always communicated well	90%	80%	12.0%	95	49%	100%
COMP2(Q5,Q6,Q7) Patients who reported that their doctors "Always" communicated well • Doctors always communicated well	89%	82%	9.0%	88	47%	100%
COMP3(Q4,Q11) Patients who reported that they "Always" received help as soon as they wanted • Patients always received help as soon as they wanted	79%	69%	14.5%	86	36%	100%
COMP4(Q13,Q14) Patients who reported that their pain was "Always" well controlled • Pain was always well controlled	73%	71%	2.4%	65	38%	100%
COMP5(Q16,Q17) Patients who reported that staff "Always" explained about medicines before giving it to them • Staff always explained	83%	65%	26.2%	98	23%	98%
COMP6(Q19,Q20) Patients at each hospital who reported that YES, they were given information about what to do during their recovery at home • Yes, staff did give patients this information	90%	87%	3.8%	71	62%	100%

This report has been produced by Bivarus and does not represent official HCAHPS results, which are published on the Hospital Compare Web site.

Qtr2 2017

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Performance and Risk Management

- Post ED phone calls: 3% of patients were contacted. Overall satisfaction was 99%. 100% understood their discharge instructions and 100% were kept informed during their stay.
- Med verify rate was 96.8% with the threshold being 95%
- Blood administration was at 100% with the threshold being 100%
- Hand hygiene was 100% compliant.

MANAGEMENT REPORT

- Riverside Medical Center received acceptance for our Plan of Correction for the Laboratory Joint Commission bi-annual survey as well as our two year accreditation from TJC last week.
- Departmental Policies and Procedure reviews continue to update all policy for the organization. This same review is underway for the Board of Commissioners policies as

well and Mr. Sullivan will be bringing suggestions for revisions over the next few months.

- The Bond Commission approved the Certificates of Indebtedness at their meeting on December 14. The inspection of the building was completed on the 14th as well. The survey indicates that the building is in good condition with some minor repair issues, primarily to walls and ceilings where normal settling overtime have occurred and a P-trap that needs to be installed. These will be addressed by the current owner.
- The information we have related to our FMP payments is we should be receiving payments for July, August, September, and October, next week or the first week of January at the latest. We are still awaiting information from the Rural Hospital Coalition on exactly what our calculations and monthly expectations will be.
- Pioneer Health, our billing and collection company was sold on December 11th, to Lachey Memorial Hospital. Brandon and Mr. Sullivan will be meeting with Pioneer on January 4th. RMC is currently identifying the processes necessary to begin terminating the agreement and will do this as soon as possible. As soon as that is complete we will inform Riverside Medical Centers Board of Commissioners on the timeline to move forward with our commitment with Cerner and TrustHCS.
- Langlinais, Broussard and Kohlenberg will be on site at the end of next week to observe year-end inventory.
- We are receiving our Patient Safety Risk Assessment Performance by HSLI early this month. This will be provided to the Risk Management Committee and the Quality Improvement Committee. As with any survey of this type there are some improvements which they recommend we make regarding some policy wording changes, conduct specific fire drills for surgical fires, and Falls Protocols and Assessments. All are easily resolved with minor changes to policies, staff education and monitoring for compliance. Mark Watson will be spearheading these improvements along with the committees mentioned earlier.
- We will begin our LEAN Performance Improvement Education process formally tomorrow with an education conference call. At the end of the process we will have one Black Belt and four Greenbelt certified LEAN staff members and will have performed four LEAN projects directed at improving organizational performance. Over the next year we will also provide training to all department directors and supervisors in the LEAN process which will improve the overall individual department performance and aluminate waste in those areas as well.
- We have entered into a one year agreement with Doerle Foods, moving from Sysco Foods, which will achieve an approximate cost savings of \$300-400 per month on food products as well as introducing more name brand products into our inventory. Great work by Shad Jenkins and his team.
- Moving into 2018, we will direct some of our marketing efforts into providing more exposure of our providers to the community along with the continued efforts for particular services we offer.
- Riverside Medical Center has had a number of community events in the past several weeks with our presence at the Pioneer Days at the fairgrounds, Pics With St. Nick bringing in approximately 100 photos taken with Santa, along with other activities on December 14th. On December 15th we hosted seven disabled and immunocompromised

children at the Silent Knight Pics with Santa. The families were very appreciative. The families came from Washington Parish, New Orleans, Slidell and Folsom to participate and all had wonderful and positive things to say about this event.

- Riverside Medical Center also had a Volunteer Appreciation Christmas Lunch last week. Volunteers will be presented with new jackets to wear when performing services here at the facility.
- The hospital conducted its annual Christmas party on Saturday, December 9, from 6 to 9 PM at the Franklinton Country Club. Several of our board members participated and a good time was had by all in attendance.

PUBLIC PARTICIPATION

Board Vice Chairman Jenkins opened the floor for public participation at this time.

Mrs. Clair Maguire expressed her appreciation to Riverside Medical Center's staff and Board of Commissioners for their hard work and achievement's in 2017.

Mr. Sullivan reported to Riverside Medical Center's Board of Commissioners that a notice was received from Louisiana Board of Ethics with regard to the annual disclosure statement. Board of Commissioner Member or CEO that has any immediate relatives employed by Riverside Medical Center or any clinics affiliated with Riverside Medical Center must report it to the Louisiana Board of Ethics by January 31, 2018.

Action: A motion to close public participation was made by Board Member Thomas, duly seconded by Board Member Watts, unanimously approved.

There being no need for Executive Session Board Member Thomas made a motion to adjourn, duly seconded by Board Member Breland, unanimously approved at 5:25 p.m.

Date: _____

2/22/18

Respectfully Submitted,

By: _____

Angella M. Loup
Angella Loup
Executive Assistant

Gerald B. King

Gerald B. King Chairman

Peter Sullivan CEO/Secretary

Riverside Medical Center

(All Resolutions, Affidavits, Correspondence and Attachments in its entirety are available of the Board at Riverside Medical Center 1900 South Main Street, Franklinton, LA) This meeting was held in accordance with the Americans Disabilities Act, if you need special assistant please contact Angella Mayfield Loup, Clerk to the Board at 985-839-4431 describing the assistance that is necessary.