



## MEMORANDUM

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**To:** Board of Directors

**Cc:** Bill Boyles, Esquire  
Joseph Rojas, M.D.

**From:** George Mikitarian  
President/CEO

**Subject:** Board/Committee Meetings – August 5, 2019

**Date:** July 25, 2019

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**The Investment Committee will meet at 11:00 a.m. in the Executive Conference room.**

**The Ad Hoc Credentials Review Committee will meet at 11:30 a.m. where the Committee will review credentialing and privileging files as they relate to medical staff appointment/reappointment.**

**The Quality Committee will convene at 12:00 p.m., which will be followed by the Budget and Finance Committee, and then Executive Committee meetings.** City Manager, Scott Larese, if available, will be giving the City Council liaison report at the Executive Committee

**The Board of Directors will meet in executive session no earlier than 1:30 p.m.** Following the Board of Directors Executive Session, the Education Committee and Board of Directors regularly scheduled meeting will be held immediately following, however no earlier than 3:00 p.m.

The Planning Committee meeting has been canceled.

**Members:**

Jerry Noffel, Chairperson  
Peggy Crooks  
Stan Retz

**TENTATIVE AGENDA  
INVESTMENT COMMITTEE  
NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
MONDAY, AUGUST 05, 2019, 10:30 AM  
EXECUTIVE CONFERENCE ROOM**

CALL TO ORDER

- I. Public Comment
- II. Review and approval of minutes (May 6, 2019 and June 3, 2019)

*Motion: To recommend approval of the May 6, 2019 and June 3, 2019 meeting minutes as presented.*

- III. Pension Investment Assumption Rate
- IV. Adjournment

NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
INVESTMENT COMMITTEE  
MAY 06, 2019

An Investment Committee of the North Brevard County Hospital District Board of Directors met on May 06, 2019 in the Executive Conference Room. The following members, representing a quorum, were present:

Jerry Noffel, Chairperson  
Peggy Crooks  
Stan Retz

Others present:

Kent Bailey, Vice President-Finance  
Pam Perez, Administrative Assistant  
Tim Anderson, Anderson Financial Partners  
John Anderson, Anderson Financial Partners

**Call to Order**

Mr. Noffel called the meeting to order at 11:30 a.m.

**Public Comment**

No public comments presented.

**Review and Approval of Minutes**

The following motion was made by Ms. Crooks, seconded by Mr. Retz, and approved without objection.

*Action Taken: Motion to approve the minutes of the December 03, 2018 meeting as presented.*

**Investment Structure Assessment**

Table discussion for the next meeting.

**Investment Policy Annual Review**

Table review for next meeting.

**Adjournment**

There being no further business the meeting adjourned at 12:05 a.m.

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Jerry Noffel, Chairperson

NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
INVESTMENT COMMITTEE  
JUNE 03, 2019

An Investment Committee of the North Brevard County Hospital District Board of Directors met on June 03, 2019 in the Executive Conference Room. The following members, representing a quorum, were present:

Jerry Noffel, Chairperson  
Peggy Crooks (absent-excused)  
Stan Retz

Others present:

Kent Bailey, Vice President-Finance  
Pam Perez, Administrative Assistant  
Tim Anderson, Anderson Financial Partners  
John Anderson, Anderson Financial Partners

**Call to Order**

Mr. Noffel called the meeting to order at 11:05 a.m.

**Public Comment**

No public comments presented.

**Investment Structure Assessment**

Anderson Financial Partners discussed the below bullet points regarding the possible conversion of operating reserve portfolio to line-up of mutual funds:

- Highlights of Conversion
- Lowlights of Conversion
- Process for Conversion
- Fee Comparison
- Summary of Unrealized Gains and Losses

Anderson Financial will develop a plan to include risks associated with a conversion and present at the next scheduled meeting.

**Adjournment**

There being no further business the meeting adjourned at 12:00 p.m.

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Jerry Noffel, Chairperson

**QUALITY COMMITTEE**

Herman A. Cole, Jr. (ex-officio)  
Peggy Crooks  
Billie Fitzgerald  
Elizabeth Galfo, M.D.  
Robert L. Jordan, Jr., C.M.  
Jerry Noffel  
Stan Retz, CPA  
Maureen Rupe  
Ashok Shah, M.D.  
Joseph Rojas, M.D., President/Medical Staff  
Jeram Chapla, M.D., Designee  
Greg Cuculino, M.D.  
Christopher Manion, M.D., Designee  
Kiran Modi, M.D., Designee  
George Mikitarian (non-voting)

**NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
QUALITY COMMITTEE  
MONDAY, AUGUST 5, 2019  
NOON  
EXECUTIVE CONFERENCE ROOM**

**CALL TO ORDER**

- I. Approval of Minutes

*Motion to approve the minutes of the May 6, 2019, June 3, 2019 and June 24, 2019 meeting.*

- II. Vision Statement

- III. Public Comment

- IV. "My Story"

- V. Dashboard Review

- VI. Opioid Safety

- VII. Other

- VIII. Executive Session (if necessary)

**ADJOURNMENT**

NOTE: IF A PERSON DECIDES TO APPEAL ANY DECISION MADE BY THE QUALITY COMMITTEE WITH RESPECT TO ANY MATTER CONSIDERED AT THIS MEETING, HE/SHE WILL NEED A RECORD OF PROCEEDINGS AND, FOR SUCH PURPOSES, MAY NEED TO ENSURE A VERBATIM RECORD OF THE PROCEEDINGS IS MADE AND THAT THE RECORD INCLUDES TESTIMONY AND EVIDENCE UPON WHICH THE APPEAL IS TO BE BASED.

PERSONS WITH A DISABILITY WHO NEED A SPECIAL ACCOMMODATION TO PARTICIPATE IN THIS PROCEEDING SHOULD CONTACT MS. LISA CAVALLERO, EXECUTIVE DIRECTOR OF SUPPORT SERVICES, AT 951 NORTH WASHINGTON AVENUE, TITUSVILLE, FLORIDA 32796, AT LEAST FORTY EIGHT (48) HOURS PRIOR TO THE MEETING. FOR INFORMATION CALL (321) 268-6190 OR (321) 383-9829 (TDD). THIS NOTICE WILL FURTHER SERVE TO INFORM THE PUBLIC THAT MEMBERS OF THE BOARD OF DIRECTORS OF NORTH BREVARD MEDICAL SUPPORT, INC. MAY BE IN ATTENDANCE AND MAY PARTICIPATE IN DISCUSSIONS OF MATTERS BEFORE THE NORTH BREVARD COUNTY HOSPITAL DISTRICT BOARD OF DIRECTORS EDUCATIONAL, GOVERNMENTAL AND COMMUNITY RELATIONS COMMITTEE. TO THE EXTENT OF SUCH DISCUSSION, A JOINT PUBLIC MEETING OF THE NORTH BREVARD COUNTY HOSPITAL DISTRICT, BOARD OF DIRECTORS EDUCATIONAL, GOVERNMENTAL AND COMMUNITY RELATIONS COMMITTEE AND NORTH BREVARD MEDICAL SUPPORT, INC. SHALL BE CONDUCTED.

**NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
QUALITY COMMITTEE**

A regular meeting of the Quality Committee of the North Brevard County Hospital District operating Parrish Medical Center was held on May 6, 2019 in the Executive Conference Room. The following members were present.

Herman A. Cole, Jr., Chairman  
Peggy Crooks  
Billie Fitzgerald  
Elizabeth Galfo, M.D.  
Robert L. Jordan, Jr., C.M. (12:15 p.m.)  
Jerry Noffel  
Stan Retz, CPA (12:15 p.m.)  
Maureen Rupe  
Ashok Shah, M.D.  
Joseph Rojas, M.D., President/Medical Staff  
Christopher Manion, M.D.  
George Mikitarian (non-voting)

Members absent:

Jeram Chapla, M.D. (excused)  
Gregory Cuculino M.D. (excused)  
Kiran Modi, M.D. (excused)

**CALL TO ORDER**

Mr. Cole called the meeting to order at 12:14 p.m.

**REVIEW AND APPROVAL OF MINUTES**

Discussion ensued and the following motion was made by Dr. Galfo, seconded by Ms. Crooks and approved (9 ayes, 0 nays, 0 abstentions). Mr. Jordan and Mr. Retz were not present at the time the vote was taken.

***ACTION TAKEN: APPROVE THE MARCH 4, 2019 MEETING MINUTES, AS PRESENTED.***

**VISION STATEMENT**

Mr. Loftin summarized the committee's vision statement.

**PUBLIC COMMENTS**

There were no public comments.



**MY STORY**

Mr. Loftin presented to the committee *My Story*; a story about an elderly patient, her experience and her full recovery.

**QUALITY DASHBOARD REVIEW**

Mr. Loftin reviewed the Quality Care Initiatives included in the agenda packet and discussed each domain and definition. Copies of the Power Point slides presented are appended to the file copy of these minutes.

**CITY LIAISON**

The Quality Committee recessed at 12:38 p.m. and the Executive Committee convened for the purpose of the report from the City Manager. The Quality Committee resumed at 12:45 p.m.

**SAFE OPIOID PROGRAM**

Mr. Loftin noted there was no update at this time; however, there will be an update at next month's meeting.

**OTHER**

There was no other business brought before the committee.

**ADJOURNMENT**

There being no further business to discuss, the meeting adjourned at 12:55 p.m.

Herman A. Cole, Jr.  
Chairman

**NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
QUALITY COMMITTEE**

A regular meeting of the Quality Committee of the North Brevard County Hospital District operating Parrish Medical Center was held on June 3, 2019 in the Executive Conference Room. The following members were present.

Herman A. Cole, Jr., Chairman  
Billie Fitzgerald  
Elizabeth Galfo, M.D.  
Robert L. Jordan, Jr., C.M.  
Jerry Noffel  
Stan Retz, CPA  
Maureen Rupe (12:07 p.m.)  
Ashok Shah, M.D.  
Joseph Rojas, M.D., President/Medical Staff  
Christopher Manion, M.D.  
Gregory Cuculino M.D.

Members absent:

Peggy Crooks (excused)  
Jeram Chapla, M.D. (excused)  
George Mikitarian (non-voting) (excused)  
Kiran Modi, M.D. (excused)

**CALL TO ORDER**

Mr. Cole called the meeting to order at 12:05 p.m.

**REVIEW AND APPROVAL OF MINUTES**

Discussion ensued and the following motion was made by Mr. Jordan, seconded by Dr. Galfo and approved (10 ayes, 0 nays, 0 abstentions). Ms. Rupe was not present at the time the vote was taken.

***ACTION TAKEN: APPROVE THE APRIL 1, 2019 MEETING MINUTES, AS PRESENTED.***

**VISION STATEMENT**

Mr. Loftin summarized the committee's vision statement.

**PUBLIC COMMENTS**

There were no public comments.

## QUALITY COMMITTEE

JUNE 3, 2019

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### MY STORY

Mr. Loftin presented to the committee *My Story*; a story about a patient and his healing experience at PMC.

### OPIOID SAFETY

Mr. Loftin introduced Mr. Brizz with the Brevard Prevention Coalition, Brevard County Opioid Abuse Task Force. Mr. Brizz, along with colleagues Ms. Stahl, Ms. McCarthy and Ms. McElroy presented to the committee concerning the dangers and effects of opioid and substance abuse.

### CITY LIAISON

The Quality Committee recessed at 1:05 p.m. and the Executive Committee convened for the purpose of the report from the City Manager. The Quality Committee resumed at 1:14 p.m.

### QUALITY DASHBOARD REVIEW

Ms. Sellers spoke of recent articles concerning the LeapFrog grade and CMS star ratings, noting that our recent 'A' grade from LeapFrog is validation of Parrish Medical Center's focus on zero harm. Copies of the Power Point slides presented are appended to the file copy of these minutes.

### OTHER

There was no other business brought before the committee.

### ADJOURNMENT

There being no further business to discuss, the meeting adjourned at 1:43 p.m.

Herman A. Cole, Jr.  
Chairman

**NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
QUALITY COMMITTEE – SPECIAL MEETING**

A special meeting of the Quality Committee of the North Brevard County Hospital District operating Parrish Medical Center was held on June 24, 2019 in the Executive Conference Room, Second Floor. The following members were present:

Herman A. Cole, Jr., Chairman  
Billie Fitzgerald  
Elizabeth Galfo, M.D.  
Robert L. Jordan, Jr., C.M.  
Jerry Noffel  
Stan Retz, CPA  
Maureen Rupe  
Joseph Rojas, M.D., President/Medical Staff  
Christopher Manion, M.D.

Member(s) Absent:

Peggy Crooks (excused)  
Ashok Shah, M.D. (excused)  
Jeram Chapla, M.D. (excused)  
Gregory Cuculino M.D. (excused)  
Kiran Modi, M.D. (excused)  
George Mikitarian (non-voting) (excused)

A copy of the attendance roster of others present during the meeting is appended to the file copy of these minutes.

**CALL TO ORDER**

Mr. Cole called the meeting to order at 2:00 p.m. and stated the sole purpose of this meeting is to review the FHA educational webinar on House Bill 451, Non-Opioid Alternatives and how it will relate to the providers.

**PUBLIC COMMENTS**

There were no public comments.

**EDUCATIONAL FHA WEBINAR POST-LEGISLATIVE SESSION FOLLOW-UP  
HOUSE BILL 451 NON-OPIOID ALTERNATIVES**

FHA Vice President for Nursing and Clinical Care Policy, Martha DeCastro and FHA Senior Vice President, Kim Streit provided an overview of House Bill 451 Non-Opioid Alternatives.

Ms. DeCastro noted this bill, once signed will take effect July 1, 2019 and reviewed the anticipated new requirements. Ms. DeCastro opened the phone line to address any questions that listeners may have. The webinar concluded and discussion ensued.

**ADJOURNMENT**

There being no further business to discuss, the meeting adjourned at 3:20 p.m.

Herman A. Cole, Jr.  
Chairman

# August 2019 Quality Agenda

1. Vision Statement
2. My Story
3. Quality Dashboard
4. Opioid Safety
5. Executive Session

# PERFORMANCE DASHBOARD

## NBCHD/PMC

Description	June	ACTUAL YTD	Opportunity
Zero Harm	Green	Green	
HAI	Green	Green	
Readmission	Yellow	Yellow	COPD/Pnx
Person Centered Flow	Yellow	Yellow	ED, LOS
Person Experience	Yellow	Yellow	Care Transitions/MD Comm/Responsivness

Better than expected  
As expected  
Needs improvement

**HealthLeaders**  
ANALYSIS

# NEW YORK'S SEPSIS PROTOCOLS LOWER DEATH RATES

BY JOHN COMMINS | JULY 17, 2019

Research shows 'Rory's Regulations' are saving lives, but one physician urges other states to 'proceed with caution.'

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## KEY TAKEAWAYS

**Researchers found that sepsis mortality rates dropped 4.3% in New York and 2.9% in four control states.**

**Pitt researchers say their study is the first to conclusively link improvements in sepsis outcomes with the implementation of holistic, evidence-based regulations.**

**However, the researchers warn that aggressive sepsis protocols could lead to overtreating some patients, which apparently has happened in New York.**

New York's statewide sepsis protocols appear to be working, according to a new study out this week in *JAMA*.

The protocols—known as Rory's Regulations—became law in 2013, following the death of 12-year-old Rory Staunton from undiagnosed, untreated sepsis. The protocols mandate that all hospitals adopt evidence-based practices for the identification and treatment of sepsis.



University of Pittsburgh researchers examined more than a million sepsis admission records from New York and four control states—Florida, Maryland, Massachusetts, and New Jersey— in the years before and after Rory's Regulations took effect. They found that sepsis mortality rates dropped 4.3% in New York and 2.9% in the control states, according to the *JAMA* report.

The Pitt researchers showed that New York's sepsis death rate was 3.2% lower following the regulations than would have been expected, relative to the control states.

Lead author Jeremy Kahn, MD, says the study is the first to conclusively link improvements in sepsis outcomes with the implementation of holistic, evidence-based regulations.

Kahn spoke with *HealthLeaders* about the study findings, what they're doing right in New York state, and how that model might —or might not— work for other states.

**HLM: What specifically is it that they're doing in New York that is driving success?**

Kahn: Three things. One is all hospitals are mandated to implement protocols for evidence-based treatment and recognition, and more patients are getting these evidence-based therapies, specifically, early antibiotics and early resuscitation. That's really the core element of the protocols.

They're also educating staff at all hospitals in New York state so that people are going to recognize and treat sepsis better.

The third thing is they're just paying attention to it. Sepsis has been not on the public health radar for many years that focuses on heart attacks and strokes and other things that are easier to recognize, and perhaps easier to treat. Just by turning our lens to sepsis, we're able to think about it in new ways, recognize it earlier and treat it more effectively.

**HLM: Does the New York model shed any light on how people acquire sepsis in the first place?**

Kahn: That's still is a big unknown, and the regulations don't address that. We don't yet understand why two people get the same infection, but one gets horrible sepsis and one seems to do fine. That's a much stickier wicket and another pressing public health issue.

**HLM: How many states have these sepsis initiatives?**

Kahn: Two other states have pulled the trigger. One is Illinois and the others New Jersey. There are 10 to 12 states that are actively considering these regulations, including my own state, Pennsylvania. This study will prompt the rest of the states to take a harder look at whether this regulatory approach to sepsis care is useful, because we show that at least in New York, it appears to have been.

**HLM: As you note, sepsis is getting more attention, but the sepsis caseload also appears to be growing. What's going on?**

Kahn: Part of the answer is we're looking for it more. Whenever you look for something, you're more likely to find it. Another part is that healthcare is just shifting over the last few decades. We're doing more high-risk surgeries, doing more chemotherapy, creating more immunosuppressed patients, and those things all increase the risk of sepsis.

**HLM: Are you recommending that other states take up the New York model?**

Kahn: My belief is that we proceed with caution. We now have very rigorous evidence that these policies can work, but we don't yet know whether they will work in other states, and we don't yet know what makes them work so well in New York. It's reasonable for other states to proceed, but with abundant caution, because there are downsides to these policy-based approaches to sepsis care.

**HLM: What are those downsides?**

Kahn: There are two downsides. One is the straightforward risk of overtreatment. There's the concern that when you're forcing hospitals through regulatory mandate to do the right thing, that we will treat people too aggressively.

We found evidence of that in New York because more patients got invasive central venous catheters and those have risks. More patients were admitted to the ICU and admission to the ICU has risks.

Those things also carry costs. Are we giving too many people antibiotics? Are we giving too many people fluids? The antibiotic issue is such a sticky wicket because there's antibiotic resistance concerns.

The other downside is a bit more conceptual, which is that this is quite a heavy hand. We're mandating that hospitals adopted these evidence-based practices. In the United States, we've not been so aggressive with our health policies in the past. We use more gentle nudges to get providers to do the right thing; things like financial incentives in the form of pay for performance and value-based purchasing.

We use public reporting, which is a market-driven approach, to get providers to better adopt evidence-based practices. This is a much blunter approach. And it raises concerns because the evidence might change. These regulations need to be flexible enough to accommodate those changes.

It does give pause for us to ask if this is how we want to get providers to do the right thing? My personal belief is that physicians and hospitals have had decades to do the right thing on their own, and if there's any consistent observation in healthcare in the last 20 years, it's the gap between evidence and practice. Given that sepsis is a public health crisis, it's not unreasonable to at least try these somewhat heavy-handed policies if we go in with an open eye and make sure they're not causing more harm than good.

**HLM: What are some of the roadblocks to more widespread adaptation of aggressive sepsis measures?**

Kahn: We need more resources. This is an unfunded mandate. We're not asking hospitals. We're telling hospitals to engage in quality improvement, and that's very expensive. That is particularly concerning for small hospitals, rural hospitals, safety-net hospitals. My concern then is by incentivizing this very extensive quality improvement, we might be widening health disparities. There's some evidence of that in New York.

One way to change these regulations is to include provisions that create a regional quality improvement collaborative that facilitates hospitals working together so we make sure that this rising tide lifts all boats, as opposed to most of the quality improvement happening in only selected hospitals.

**HLM: How much did the New York model cost to implement? Is there a breakdown on the per-patient cost?**

Kahn: No, we don't have data on that. We don't know either for the patient level, or the overall cost. We did find evidence that that the regulations lead to more intensive treatment, and obviously there's a cost to implementing those.

The real cost for hospitals is the effort in developing and maintaining these protocols. A lot of hospitals use IT to support responding to the regulations if they build in a sepsis alert into their electronic health records. Those things are very costly.

We also found a lot of hospitals are hiring dedicated sepsis coordinators to oversee sepsis quality improvement and that's a very, very expensive thing. When a hospital can afford it, it's likely to have an impact. But those costs are typically absorbed by the

hospital, and that lowers overall margins. It's not to the point where it's threatening the financial health of any hospital, but it is important to consider that this is, at its core, an unfunded mandate.

**HLM: Where should other states start if they want to emulate the New York model?**

Kahn: The first thing is to get the right people at the table. One of the things that was most successful about the New York experience was that it wasn't just the regulators developing and implementing this policy. The health systems, the clinicians and the patients' advocates were all at the table in an exceptionally collaborative effort to develop and implement these policies.

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**“WE NOW HAVE VERY RIGOROUS EVIDENCE THAT THESE POLICIES CAN WORK, BUT WE DON'T YET KNOW WHETHER THEY WILL WORK IN OTHER STATES, AND WE DON'T YET KNOW WHAT MAKES THEM WORK SO WELL IN NEW YORK”**

*John Commins is a content specialist and online news editor for HealthLeaders, a Simplify Compliance brand.*



BOARD OF DIRECTORS  
QUALITY COMMITTEE PRESENTATION

*Healing Families – Healing Communities®*

[parrishmed.com](http://parrishmed.com)

# Board Quality & Safety Committee

**Value Dashboard**  
**August 2019**

# August 2019 Quality Agenda

1. Vision Statement
2. My Story
3. Quality Dashboard
4. Opioid Safety
5. Executive Session

# Quality Committee Vision Statement

“Assure affordable access to safe, high quality patient care to the communities we serve.”



# “My Story”

# Dashboard

# Performance Dashboard

Description	June	Apr-Jun	Actual YTD (CY)	Opportunity
Zero Harm	67%	49.5%	52.5%	Stroke, Sepsis, inpatient immunization
HAI	1 / 1.29	3 / 4.80	6 / 10.77	C-Diff
Readmission	8.44%	8.60%	8.84%	Overall
Person Centered Flow	235	227	256	ED Overall
Person Experience	75/83.3	73.5/69.4	73.3/69	Overall/Recommend

# Process of Care

## Definition:

Final quality measure scores that met benchmark.

Comprised of Stroke, Sepsis, and Early Elective Delivery.

## Performance improvement projects:

- Sepsis
- Stroke
- Early Elective Delivery

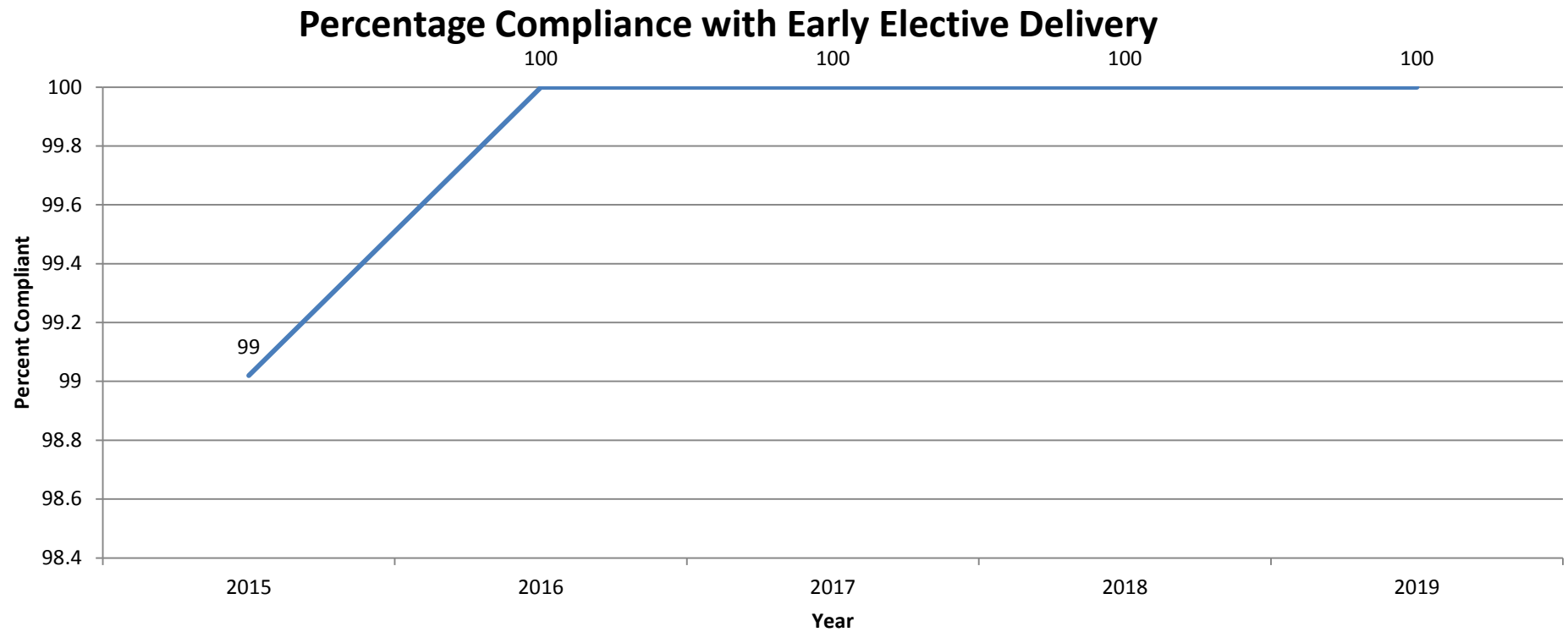
# Project Details

- **Early Elective Delivery**
  - Project initiated and hardwired in 2012
  - Must have medically necessary reason for early delivery documented
  - Maintained 0% since December 2012
- **Stroke**
  - Review of fall outs revealed root cause was not utilizing the “Code Stroke”
  - Fall outs can be prevented by utilizing “Code Stroke”
- **Sepsis**
  - Review of all fall outs for length of stay, readmissions, complications and mortalities
  - Outcomes (mortality /readmission/HAI) are proven to significantly improve by adherence to evidence based order set such as ours.

# Early Elective Delivery

# Zero Harm

## Early Elective Delivery



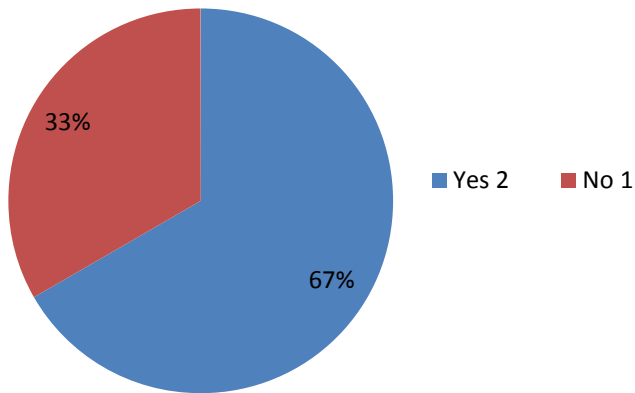
# Stroke



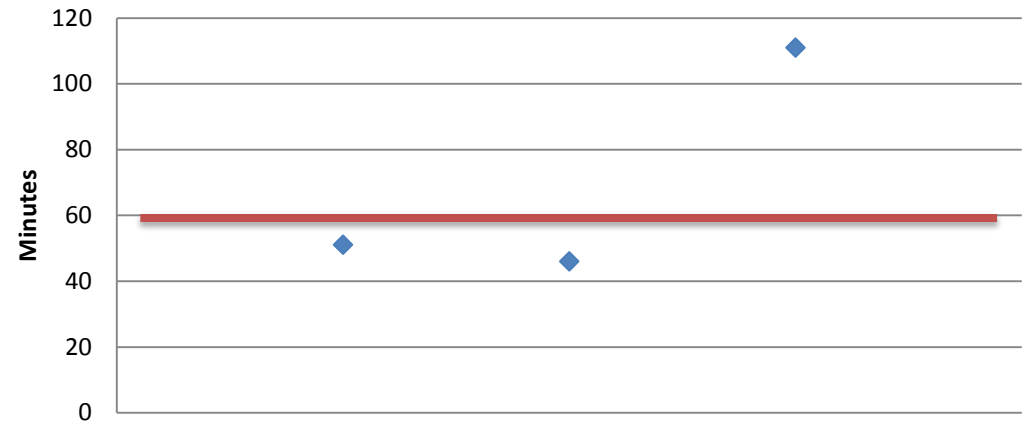
# TPA Stroke

## Golden Hour; TPA Order Set Usage

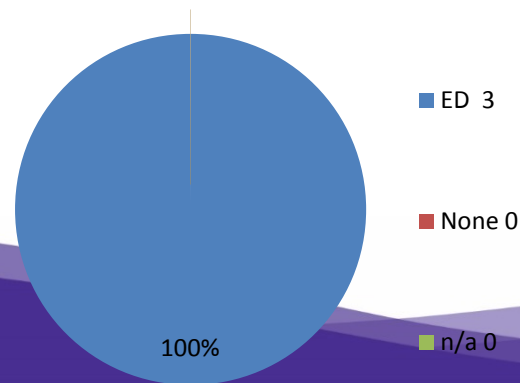
TPA given within 1hr of arrival (TPA n=3)



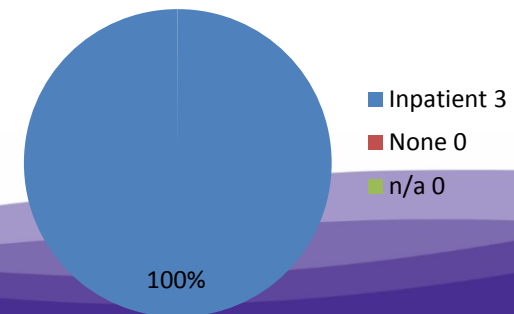
Minutes until TPA is given (TPA n=3)



ED Order Set Usage (TPA n=3)



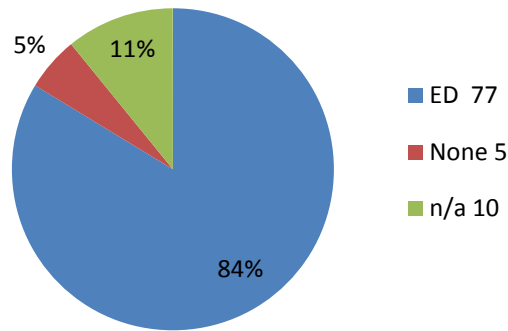
Inpatient Order Set Usage (TPA n=3)  
Qtr 1, 2019



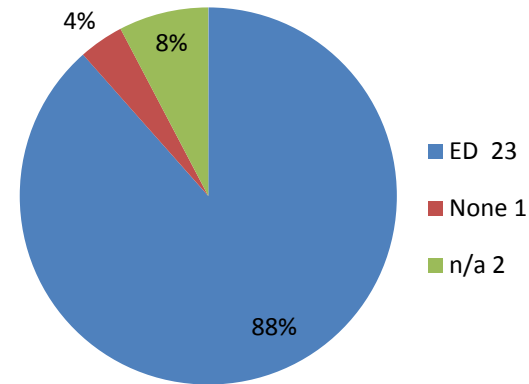
# Non-TPA Stroke

## Order Set Usage

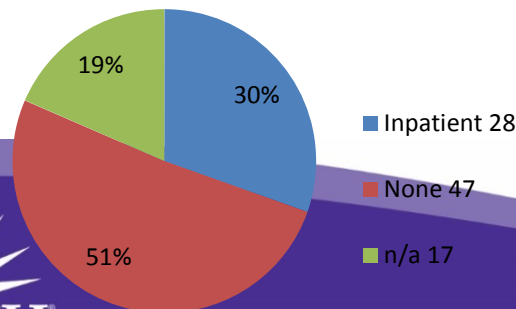
ED Order Set Usage (non-tpa n=92)



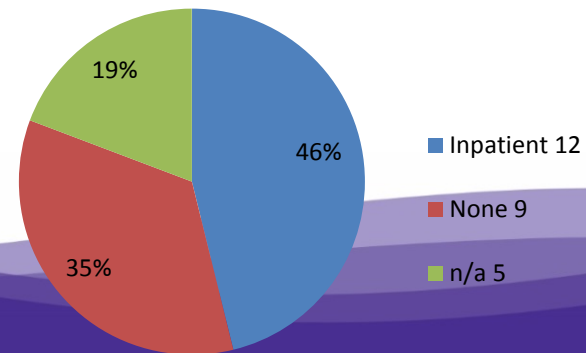
ED Order Set Usage (ICD-Code n=26)



Inpatient Order Set Usage (non-tpa n=92)

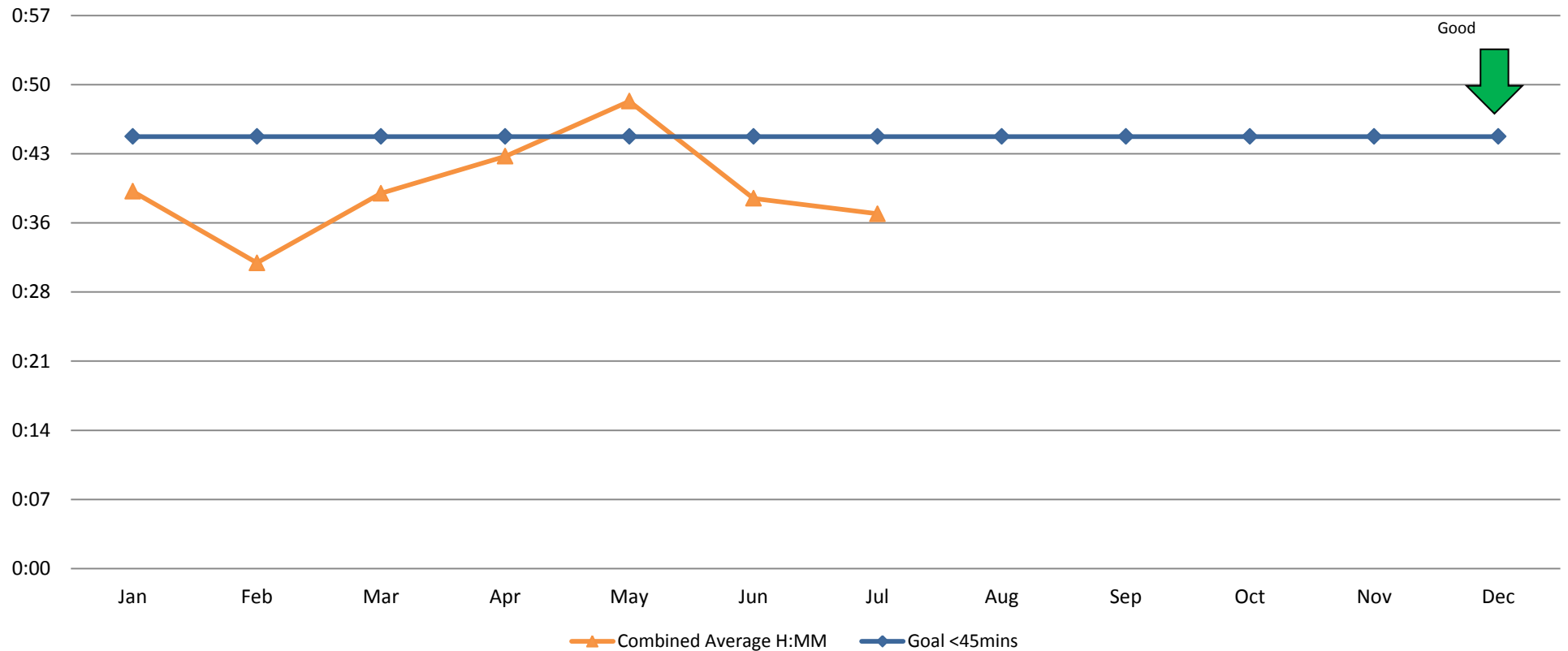


Inpatient Order Set Usage (ICD-Code n=26)



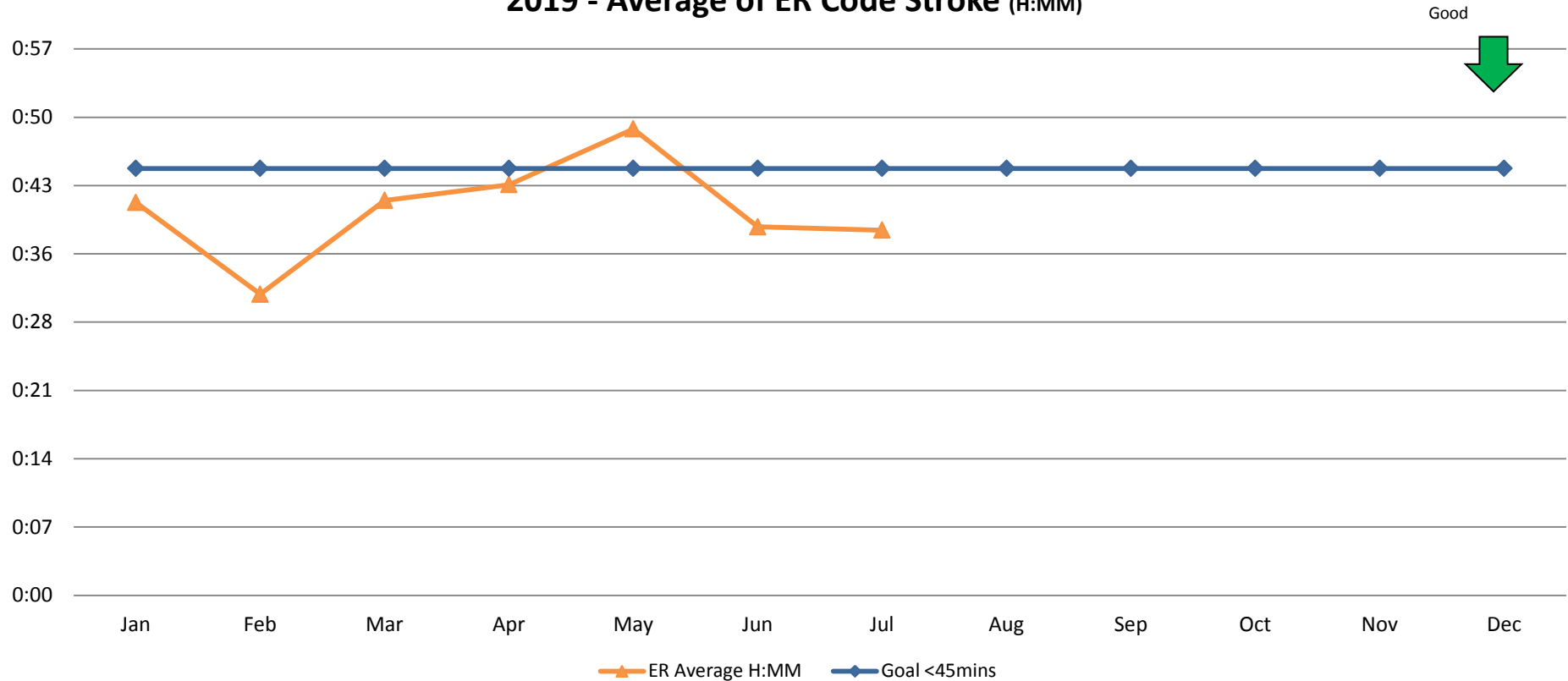
# Combined time to CT for Stroke

2019 - Combined Average of DI Code Stroke (H:MM)



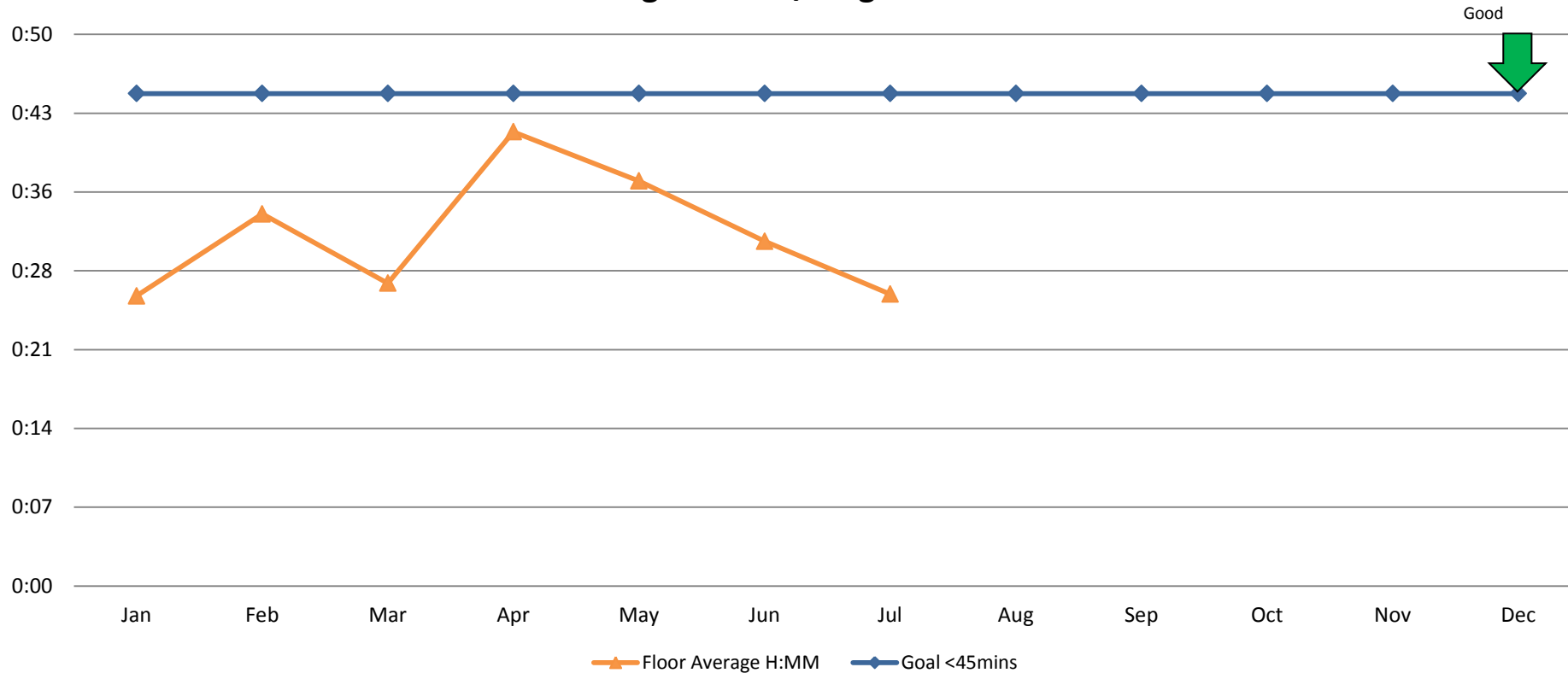
# Time to CT for ER Stroke

2019 - Average of ER Code Stroke (H:MM)



# Time to CT for Inpatient Stroke

2019 - Average of Med/Surg Code Stroke (H:MM)



# Sepsis

## HealthLeaders ANALYSIS

# NEW YORK'S SEPSIS PROTOCOLS LOWER DEATH RATES

BY JOHN COMMINS | JULY 17, 2019

Research shows 'Rory's Regulations' are saving lives, but one physician urges other states to 'proceed with caution.'

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### KEY TAKEAWAYS

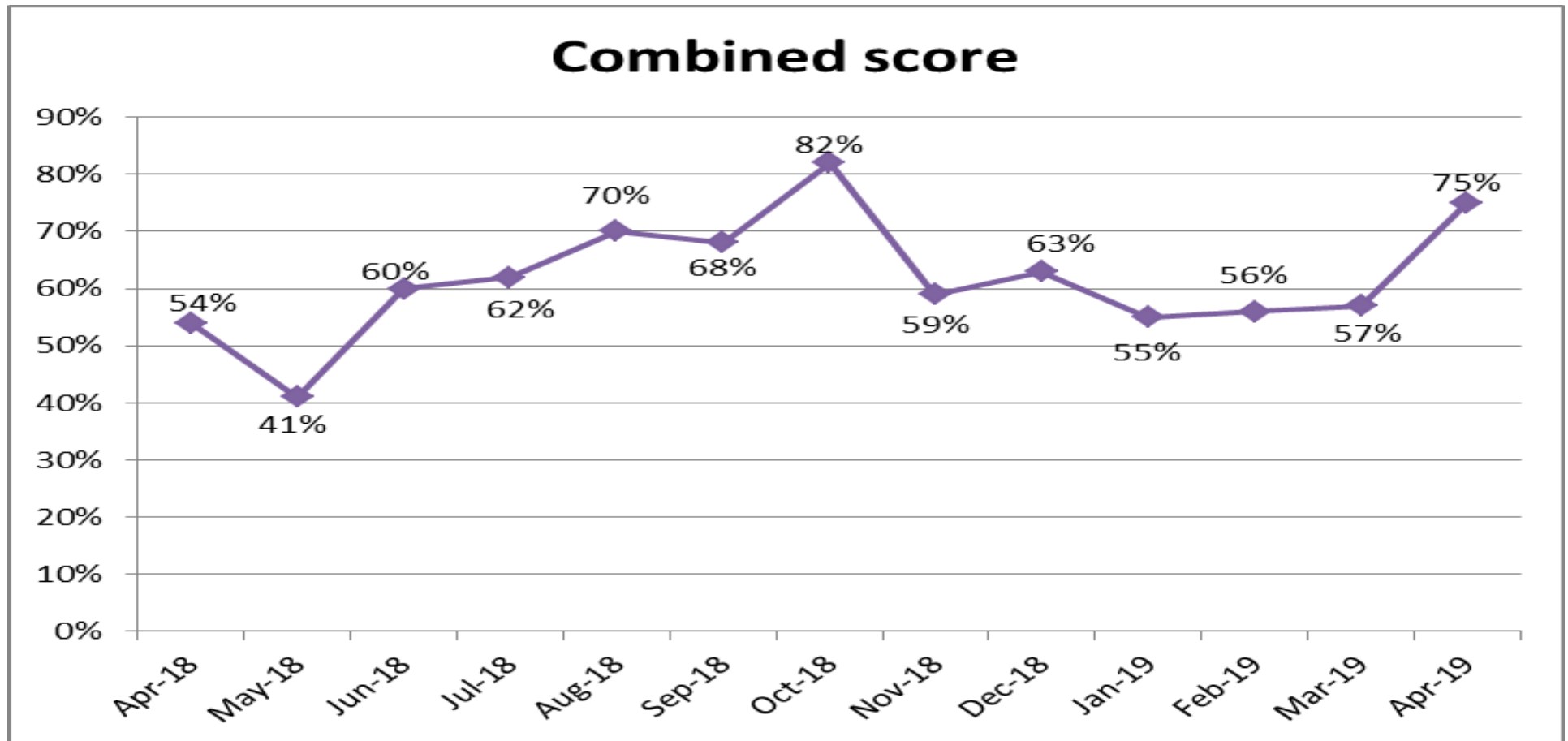
- Researchers found that sepsis mortality rates dropped 4.3% in New York and 2.9% in four control states.
- Pitt researchers say their study is the first to conclusively link improvements in sepsis outcomes with the implementation of holistic, evidence-based regulations.
- However, the researchers warn that aggressive sepsis protocols could lead to overtreating some patients, which apparently has happened in New York.

New York's statewide sepsis protocols appear to be working, according to a new study out this week in *JAMA*.

The protocols—known as Rory's Regulations—became law in 2013, following the death of 12-year-old Rory Staunton from undiagnosed, untreated sepsis. The protocols mandate that all hospitals adopt evidence-based practices for the identification and treatment of sepsis.

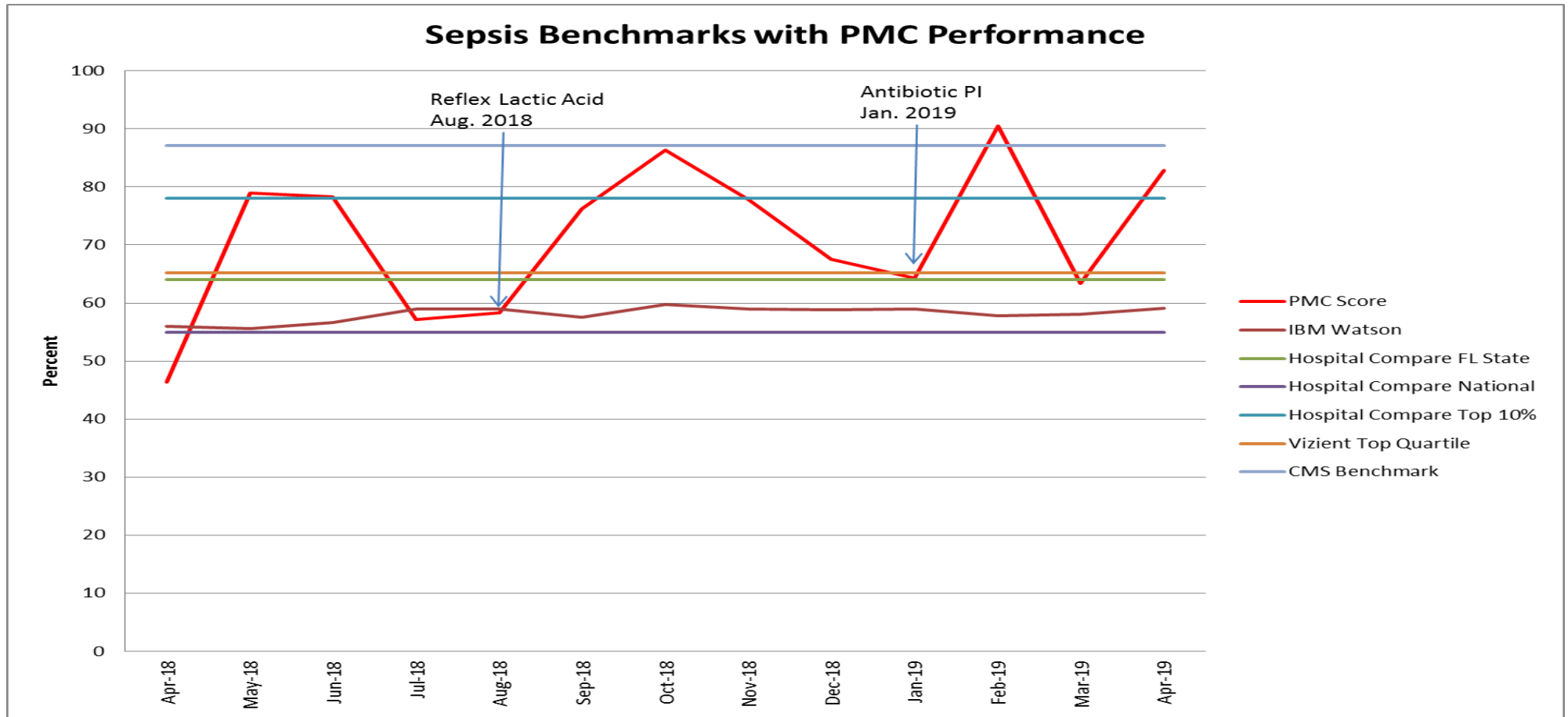
University of Pittsburgh researchers examined more than a million sepsis admission records from New York and four control states—Florida, Maryland, Massachusetts, and New Jersey—in the years before and after Rory's Regulations took effect. They found

# Sepsis Order Set Usage





# Benchmark Comparison Graph



# Questions?

# Opioids

**HB 451  
Nonopioid  
Alternatives**

Health care practitioners must:

- Provide information about non-opioid alternatives to all patients, except in the provision of emergency care, prior to anesthesia services or prior to prescribing, ordering, dispensing, or administering an opioid drug.
- Provide a hard copy of the Florida Department of Health's (DOH) nonopioid alternative educational pamphlet that will be available on the DOH website on July 1, 2019.
- Document in the medical record nonopioid alternatives considered by the patient.

# Questions?

FINANCE COMMITTEE MEMBERS:

Stan Retz, Chairperson  
Peggy Crooks, Vice Chairperson  
Jerry Noffel  
Elizabeth Galfo, M.D.  
Robert Jordan  
Billie Fitzgerald  
Herman Cole (ex-officio)  
Christopher Manion, MD.  
George Mikitarian, President/CEO (non-voting)  
Joseph Rojas, M.D., President/Medical Staff

**TENTATIVE AGENDA  
BUDGET & FINANCE COMMITTEE MEETING - REGULAR  
NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
MONDAY, AUGUST 05, 2019  
EXECUTIVE CONFERENCE ROOM  
(IMMEDIATELY FOLLOWING QUALITY COMMITTEE)  
SECOND FLOOR, ADMINISTRATION**

CALL TO ORDER

- I. Review and approval of minutes (May 6, 2019 and June 03, 2019)

***Motion: To recommend approval of the May 06, 2019 and June 03, 2019 minutes as presented.***

- II. Public Comments

- III. Financial Review – Mr. Bailey

- IV. Chiller Port St John Replacement \$358,700– Mr. Bailey

- V. CSI Equipment Leasing/Radiology – Mr. Bailey

***Motion: Recommend the Board of Directors approves the CSI Master Lease and Schedule 1 as presented.***

- VI. FY 2020 Capital Budget – Mr. Bailey

***Motion: Recommend the Board of Directors approve the FY 2020 Capital Budget in the amount of \$2,000,000.***

VII. FY 2020 Major Budget Volume Assumptions & Operating Budget – Mr. Bailey

*Motion: Recommend the Board of Directors approve the adjusted fiscal year 2020 Major Volume Assumptions and the 2020 Operating Budget with a hospital operating margin of 5.6% and total EBIDA margin of 6.6 % as presented.*

VIII. Public Hearing Dates (**For Information Only**) – Mr. Bailey

IX. Executive Session (if necessary)

ADJOURNMENT

NOTE: IF A PERSON DECIDES TO APPEAL ANY DECISION MADE BY THE FINANCE COMMITTEE WITH RESPECT TO ANY MATTER CONSIDERED AT THIS MEETING, HE/SHE WILL NEED A RECORD OF PROCEEDINGS AND, FOR SUCH PURPOSES, MAY NEED TO ENSURE A VERBATIM RECORD OF THE PROCEEDINGS IS MADE AND THAT THE RECORD INCLUDES TESTIMONY AND EVIDENCE UPON WHICH THE APPEAL IS TO BE BASED.

PERSONS WITH A DISABILITY WHO NEED A SPECIAL ACCOMMODATION TO PARTICIPATE IN THIS PROCEEDING SHOULD CONTACT MS. LISA CAVALLERO, EXECUTIVE DIRECTOR, AT 951 NORTH WASHINGTON AVENUE, TITUSVILLE, FLORIDA 32796, AT LEAST FORTY-EIGHT (48) HOURS PRIOR TO THE MEETING. FOR INFORMATION CALL (321) 383-9829 (TDD).

THIS NOTICE WILL FURTHER SERVE TO INFORM THE PUBLIC THAT MEMBERS OF THE BOARD OF DIRECTORS OF NORTH BREVARD MEDICAL SUPPORT, INC. MAY BE IN ATTENDANCE AND MAY PARTICIPATE IN DISCUSSIONS OF MATTERS BEFORE THE NORTH BREVARD COUNTY HOSPITAL DISTRICT BOARD OF DIRECTORS FINANCE COMMITTEE. TO THAT EXTENT OF SUCH DISCUSSIONS, A JOINT PUBLIC MEETING OF THE NORTH BREVARD COUNTY HOSPITAL DISTRICT BOARD OF DIRECTORS FINANCE COMMITTEE AND THE NORTH BREVARD MEDICAL SUPPORT, INC. SHALL BE CONDUCTED.

**NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
BUDGET AND FINANCE COMMITTEE**

A regular meeting of the Budget and Finance Committee of the North Brevard County Hospital District operating Parrish Medical Center was held on May 6, 2019 in the Executive Conference Room. The following members, representing a quorum, were present:

Stan Retz, Chairperson  
Peggy Crooks, Vice Chairperson  
Elizabeth Galfo, M.D.  
Robert Jordan, Jr., C.M. (1:05 p.m.)  
Billie Fitzgerald  
Herman A. Cole, Jr.  
Joseph Rojas, M.D.  
Christopher Manion, M.D.  
George Mikitarian (non-voting)

Member(s) Absent:

Jerry Noffel (excused.)

A copy of the attendance roster of others present during the meeting is appended to the file copy of these minutes.

**CALL TO ORDER**

Mr. Retz called the meeting to order at 1:04 p.m.

**REVIEW AND APPROVAL OF MINUTES**

Discussion ensued and the following motion was made by Mr. Cole, seconded by Ms. Crooks and approved (7 ayes, 0 nays, 0 abstentions). Mr. Jordan was not present at the time the vote was taken.

***ACTION TAKEN: MOTION TO APPROVE THE FEBRUARY 4, 2019 MEETING MINUTES, AS PRESENTED.***

**PUBLIC COMMENTS**

There were no public comments.

**QUARTERLY INVESTMENT REPORTS**

Messrs. John & Tim Anderson reviewed the 1st Quarter Performance for both the Operating and the Pension Funds. Mr. Tim Anderson presented a brief market update and Mr. John Anderson noted for the Operating Fund and Pension Fund the year-to-date and historical performance. Discussion ensued and the following motion was made by Ms. Crooks, seconded by Mr. Cole and approved (8 ayes, 0 nays, 0 abstentions).



***ACTION TAKEN: MOTION TO APPROVE THE REBALANCING OF THE INVESTMENTS HELD IN THE OPERATING ACCOUNT TO REDUCE THE ALLOCATION TO EQUITY BY 10% AND INVEST THE PROCEEDS INTO A SHORT TERM FIXED INCOME INVESTMENT AND FURTHER TO AUTHORIZE THE BUDGET AND FINANCE COMMITTEE CHAIRPERSON, THE HOSPITAL CEO AND HOSPITAL VICE PRESIDENT OF FINANCE TO REDEPLOY 10% BACK INTO EQUITIES IF MARKET CONDITIONS ARE APPROPRIATE AFTER CONSULTING WITH ANDERSON FINANCIAL PARTNERS.***

**INVESTMENT STRUCTURE ASSESSMENT**

Mr. Bailey noted this discussion is tabled until the June 2019 Finance Committee meeting.

**CORPORATE RESOLUTION PLAN**

Mr. Bailey summarized the Resolution contained in the packet relative to the Pension Plan and Trust Agreement. Discussion ensued and the following motion was made by Mr. Jordan, seconded by Ms. Crooks and approved (8 ayes, 0 nays, 0 abstentions).

***ACTION TAKEN: MOTION TO APPROVE THE RESOLUTION FOR THE PARRISH MEDICAL CENTER PENSION PLAN AND TRUST AGREEMENT AS PRESENTED.***

**INVESTMENT FUND SIGNATORY ADDITION FOR SCOUT INVESTMENTS**

Mr. Bailey summarized the memorandum contained in the packet relative to the Investment fund signatory addition for Scout Investments. Discussion ensued and the following motion was made by Mr. Jordan, seconded by Ms. Crooks and approved (8 ayes, 0 nays, 0 abstentions).

***ACTION TAKEN: MOTION TO APPROVE THE SCOUT INVESTMENTS RESOLUTION TO ADD KENT BAILEY, VP FINANCE, AS AN AUTHORIZED SIGNER.***

**MEMBERSHIP RENEWAL FOR MICHAEL ALLEN**

Mr. Bailey noted the action item from the Pension Committee earlier in the afternoon relative to the renewal of membership for Michael Allen. Discussion ensued and the following motion was made by Ms. Crooks, seconded by Mr. Jordan and approved (8 ayes, 0 nays, 0 abstentions).

***ACTION TAKEN: MOTION TO APPROVE THE RENEWAL OF MEMBERSHIP FOR MICHAEL ALLEN FOR A THREE-YEAR TERM FROM JULY 1, 2019 THROUGH JUNE 30, 2022.***

**MEMBERSHIP RENEWAL FOR JULIA REYES-MATEO**

Mr. Bailey noted the action item from the Pension Committee earlier in the afternoon relative to the renewal of membership for Julia Reyes-Mateo. Discussion ensued and the following motion was made by Ms. Crooks, seconded by Mr. Jordan and approved (8 ayes, 0 nays, 0 abstentions).

***ACTION TAKEN: MOTION TO APPROVE THE RENEWAL OF MEMBERSHIP FOR JULIA REYES-MATEO FOR A THREE-YEAR TERM FROM JULY 1, 2019 THROUGH JUNE 30, 2022.***

**AUDIT ENGAGEMENT LETTER MOORE STEPHENS LOVELACE**

Mr. Bailey summarized the letter contained in the packet relative to the audit engagement letter from Moore Stephens Lovelace. Discussion ensued and the following motion was made by Mr. Jordan, seconded by Ms. Crooks and approved (8 ayes, 0 nays, 0 abstentions).

***ACTION TAKEN: MOTION TO APPROVE THE MOORE STEPHENS LOVELACE ENGAGEMENT LETTER FOR THE FY19 AS PRESENTED.***

**FY20 MAJOR BUDGET VOLUME PRELIMINARY ASSUMPTIONS**

Mr. Bailey summarized for the committee the FY20 Major Budget Volume Preliminary Assumptions, noting that the final Major Budget Volume Assumptions will be presented with the FY20 budget for approval at the August 2019 Budget and Finance Committee meeting.

**FINANCIAL REVIEW**

Mr. Bailey summarized the March 2019 financial statements.

**ADJOURNMENT**

There being no further business to discuss, the meeting adjourned at 2:16 p.m.

Stan Retz  
Chairperson

**NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
BUDGET AND FINANCE COMMITTEE**

A regular meeting of the Budget and Finance Committee of the North Brevard County Hospital District operating Parrish Medical Center was held on June 3, 2019 in the Executive Conference Room. The following members, representing a quorum, were present:

Stan Retz, Chairperson  
Jerry Noffel  
Elizabeth Galfo, M.D.  
Robert Jordan, Jr., C.M.  
Billie Fitzgerald (1:54 p.m.)  
Herman A. Cole, Jr.  
Joseph Rojas, M.D

Member(s) Absent:

Peggy Crooks, Vice Chairperson (excused)  
Christopher Manion, M.D. (excused)  
George Mikitarian (non-voting) (excused)

A copy of the attendance roster of others present during the meeting is appended to the file copy of these minutes.

**CALL TO ORDER**

Mr. Retz called the meeting to order at 1:49 p.m.

**REVIEW AND APPROVAL OF MINUTES**

Discussion ensued and the following motion was made by Mr. Jordan, seconded by Mr. Cole and approved (6 ayes, 0 nays, 0 abstentions). Ms. Fitzgerald was not present at the time the vote was taken.

***ACTION TAKEN: MOTION TO APPROVE THE APRIL 1, 2019 MEETING MINUTES, AS PRESENTED.***

**PUBLIC COMMENTS**

There were no public comments.

**INVESTMENT STRUCTURE ASSESSMENT**

Mr. Retz noted the Investment Committee will meet again and will have a report for the Finance Committee at the August 2019 Finance Committee meeting.

**FINANCIAL REVIEW**

Mr. Bailey summarized the April 2019 financial statements.

**DISPOSAL OF SURPLUS PROPERTY**

Discussion ensued and the following motion was made by Mr. Jordan, seconded by Mr. Cole and approved (6 ayes, 0 nays, 0 abstentions). Dr. Rojas was not present at the time the vote was taken.

***ACTION TAKEN: MOTION TO RECOMMEND THE BOARD OF DIRECTORS TO DECLARE THE EQUIPMENT LISTED IN THE REQUESTS FOR DISPOSAL OF OBSOLETE OR SURPLUS PROPERTY FORMS AS SURPLUS AND OBSOLETE AND DISPOSE OF SAME IN ACCORDANCE WITH FS274.04 AND FS274.96.***

**ADJOURNMENT**

There being no further business to discuss, the meeting adjourned at 2:36 p.m.

Stan Retz  
Chairperson

## MEMORANDUM

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TO: Budget and Finance Committee  
FROM: Kent Bailey, Vice President, Finance  
SUBJECT: Replacement Chiller – Port St. John  
DATE: July 31, 2019

---

The current chiller can no longer be serviced and must be replaced to ensure continued safe operation of the Port St. John location. The Port St. John location includes physician practices, diagnostic and other health care services.

The replacement chiller is a 300 ton air-cooled chiller. The total cost includes: permitting, crane services, removal/installation, and the provision of a temporary chiller during the removal/installation process.

**TOTAL CAPITAL COSTS                      \$358,700**

If you should have any questions please do not hesitate to contact me at (321) 268-6351 or at [kent.bailey@parrishmed.com](mailto:kent.bailey@parrishmed.com).

## MEMORANDUM

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TO: Budget & Finance Committee  
FROM: Kent Bailey, Vice President, Finance  
SUBJECT: CSI Leasing, Inc. - Master Lease and Schedule One  
DATE: July 31, 2019

---

Parrish Medical Center will enter into a master lease with CSI Leasing, Inc. CSI Leasing is an equipment leasing company that finances technology and medical equipment. In conjunction with the execution of the master lease, Parrish Medical Center's Radiology Department will enter into a 60-month operating lease (Schedule One) to obtain a Canon Ultimix multipurpose radiology system.

The Board of Directors has approved to either purchase or lease the Canon Ultimix multipurpose radiology system. Below are the details of the CSI master lease and Schedule 1. I recommend the approval of the CSI Master Lease and Schedule 1.

Details of Schedule 1 under the master lease are as follows:

**Operating Lease**

Canon Ultimix Radiology System	\$517,432
Lease Term	60 Months
Monthly Payment	\$8,015
Discount Rate	3.88%

I recommend the approval of the CSI Master Lease and Schedule 1;

***Motion: Recommend the Board of Directors approves the CSI Master Lease and Schedule 1 as presented.***

If you should have any questions please do not hesitate to contact me at (321) 268-6351 or at [kent.bailey@parrishmed.com](mailto:kent.bailey@parrishmed.com).



## MEMORANDUM

---

**To:** Budget & Finance Committee  
**From:** Kent Bailey, Vice President, Finance  
**Subject:** **FY 2020 Capital Budget**  
**Date:** July 31, 2019

---

Attached is the FY 2020 Capital Budget item listing in department order. The total capital budget is \$2,000,000. As you will note, we highlighted four (4) items totaling \$974,233 which represent capital expenditures over \$150,000 per item. These two items will need to be brought back before the Board for approval before the purchase can be made in FY 2020 which is in accordance with Policy No. 9500-2.

The remaining sixteen (16) items total \$361,780 and will be purchased during our normal operating activities.

Any purchase that exceeds the approved amount or is not approved as part of the budget will be purchased utilizing the general contingency allocation of \$263,987, or the general allocations for equipment of \$200,000 or infrastructure improvements of \$200,000.

I recommend the approval of the attached capital budget.

***Motion: Recommend the Board of Directors approve the FY 2020 Capital Budget in the amount of \$2,000,000.***

Should you have any questions, please do not hesitate to contact me at [kent.bailey@parrishmed.com](mailto:kent.bailey@parrishmed.com).

Attachment

**Parrish Medical Center  
FY 2020 Capital Budget**

Proposal Name	Capital ID	Proposed Capital Budget
<b>Fiscal Year 2020 - Routine Equipment</b>		
Surgery - Large Volume Fluid Suction and Smoke Evacuation (NEPTUNE)	20-351-02	64,500
Surgery - Patient Warming System	20-351-03	40,347
Endoscopy Scope Drying Cabinet	20-352-01	53,843
Endoscopy CO2 Insufflators	20-352-02	9,655
Sterile Processing Cart Washer	20-375-01	180,360 *
Centrifuge urine	20-401-04	3,273
Microscope Urinalysis	20-401-06	8,870
Blood Bank plasma thawer	20-401-12	5,789
Badge access prox reader	20-410-01	2,890
Lab courier vehicle	20-410-02	20,639
Pathology Tissue Processor	20-412-01	63,574
Laminar flow hood for sterile compounding room	20-430-02	9,195
Mindray TE7 Ultrasound System	20-467-03	46,351
Induction Charger used to heat bases that the center plates sits on for patient meal service	20-651-01	8,914
Open Air Merchandising Cooler	20-651-02	6,287
Floor Scrubber	20-691-01	4,763
Riding Vacuum	20-691-02	12,889
Stretcher Replacement Project - Parrish Healthcare	20-773-01	169,463 *
Other Equipment	**	200,000
Other Infrastructure	**	200,000
Fiscal Year 2020 Contingency	19-702-01	263,987
		<b>1,375,590</b>
<b>Fiscal Year 2020 - Plant</b>		
PHC at PSJ Chiller Replacement	20-661-01	376,700 *
		<b>376,700</b>
<b>Fiscal Year 2020 - IS</b>		
Wireless Access Point Replacements	20-721-01	247,710 *
		<b>247,710</b>
<b>Total Capital Budget for FY 2020</b>		<b>\$ 2,000,000</b>

\* Items shaded in yellow exceed \$150,000 and will be presented for approval prior to purchase in accordance with Policy # 9500-2.

\*\* Allocation for projects presented during the year and approved in the same manner as the "Contingency" items.





MEMORANDUM

---

**To:** Budget & Finance Committee  
**From:** Kent Bailey  
Vice President - Finance  
**Subject:** **FY2020 Operating Budget**  
**Date:** July 31, 2019

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Attached please find the Major Budget Volume Assumptions and the budget overview information sheet.

**Major Budget Volume Assumptions**

The Major Budget Volume Assumptions are the key drivers of our budget; modeling to forecast future volumes based upon historical trends. The volume indicators drive the revenue and a majority of the expense items, including FTEs (Full-time equivalents). These volumes are linked to individual department's budget, so any change in the major assumptions will change all departments that would be impacted by that change.

**Operating Budget**

The Major Budget Volume Assumptions referred to above were the basis for the FY 2020 operating budget.

Therefore we propose the following motion:

***Motion: Recommend the Board of Directors approve the fiscal year 2020 Major Budget Volume Assumptions and 2020 Operating Budget as presented.***

Please feel free to contact me at 268-6164 or at [Kent.Bailey@Parrishmed.com](mailto:Kent.Bailey@Parrishmed.com) if you have any questions on the information presented.

KB/tfm  
Enclosures: as stated

**PARRISH HEALTHCARE**  
**BUDGET OVERVIEW INFORMATION SHEET**  
**FOR FY 2019 PROJECTION AND FY 2020 BUDGET**

	<b>PROJECTED 9/30/2019</b>	<b>BUDGET 9/30/2020</b>
<b>STATISTICAL DATA</b>		
Patient Days	26,958	24,776
Adjusted Patient Days	72,815	69,644
Admissions	6,113	6,194
Adjusted Admissions	16,511	17,411
Average Length of Stay (Days)	4.41	4.00
Average Daily Census	73.9	67.7
Emergency Department Visits	37,256	35,766
Outpatient Volumes	180,781	178,739
Deliveries	542	548
Surgical and Special Procedures	6,757	6,784
<b>STAFFING</b>		
Full Time Equivalents	868	866
<b>FINANCIAL OVERVIEW</b>		
Gross Patient Revenue	614,845,948	618,221,839
Deductions from Revenue	484,753,180	486,922,411
Operating Expenses	124,772,271	124,050,293
<b>Per Adjusted Patient Day:</b>		
Revenue	8,444	8,877
Deductions	6,657	6,992
Operating Expenses	1,714	1,781
<b>Per Adjusted Admissions:</b>		
Revenue	37,238	35,508
Deductions	29,359	27,967
Operating Expenses	7,557	7,125
<b>Summary of Deductions from Revenue:</b>		
Medicare	287,672,648	292,444,374
Medicaid	68,248,611	68,623,855
HMO/PPO	51,514,918	49,898,354
Community Care	14,531,099	14,472,197
Bad Debts	16,844,780	16,625,561
Other	45,941,124	44,858,069
Total Deductions from Revenue	484,753,180	486,922,411

**PARRISH HEALTHCARE  
MAJOR VOLUME ASSUMPTIONS  
FOR FY 2019 PROJECTION AND FY 2020 BUDGET**

	Actual 2018	Budget 2019	Actual 6 Months 2018	Actual 6 Months 2019	Projected 2019	Budget 2020	% Variance Projected to Budget
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**A. INPATIENT UTILIZATION HISTORY AND BUDGETED GOALS**

**1. Admissions by Service**

Med/Surg	6,003	5,868	2,969	3,008	6,079	6,161	
Peds	21	13	8	13	34	33	
<b>Total</b>	<b>6,024</b>	<b>5,881</b>	<b>2,977</b>	<b>3,021</b>	<b>6,113</b>	<b>6,194</b>	<b>1.3%</b>
Newborn	642	651	329	278	542	548	1.0%

**2. Admissions by Payor**

Medicare	3,609	3,513	1,784	1,804	3,650	3,700	
Medicaid	900	884	445	488	987	932	
Managed Care	901	844	445	398	805	888	
Other	615	640	304	332	671	674	
<b>Total</b>	<b>6,024</b>	<b>5,881</b>	<b>2,977</b>	<b>3,021</b>	<b>6,113</b>	<b>6,194</b>	<b>1.3%</b>

**2. Patient Days by Service**

Med/Surg	27,886	26,159	14,105	13,915	26,893	24,710	
Peds	41	29	17	27	65	65	
<b>Total</b>	<b>27,927</b>	<b>26,189</b>	<b>14,122</b>	<b>13,942</b>	<b>26,958</b>	<b>24,776</b>	<b>-8.1%</b>
Newborn	1,307	1,347	688	563	1,070	1,075	0.5%

**4. Patient Days by Payor**

Medicare	18,067	16,650	9,136	8,785	16,987	15,757	
Medicaid	3,661	3,500	1,851	2,058	3,979	3,312	
Managed Care	3,481	3,153	1,760	1,508	2,915	2,981	
Other	2,718	2,885	1,374	1,591	3,076	2,726	
<b>Total</b>	<b>27,927</b>	<b>26,189</b>	<b>14,122</b>	<b>13,942</b>	<b>26,958</b>	<b>24,776</b>	<b>-8.1%</b>

**3. Total Average LOS**

	<b>4.6</b>	<b>4.5</b>	<b>4.7</b>	<b>4.6</b>	<b>4.4</b>	<b>4.0</b>	<b>-9.3%</b>
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**4. Average Daily Census - Inpatient**

	<b>77</b>	<b>72</b>	<b>78</b>	<b>77</b>	<b>74</b>	<b>68</b>	<b>-8.3%</b>
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**4a. Average Daily Census - Observation**

	15	19	15	15	15	15	-2.0%
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**5. Inpatient Surgery**

	<b>1,388</b>	<b>1,384</b>	<b>704</b>	<b>713</b>	<b>1,406</b>	<b>1,396</b>	<b>-0.7%</b>
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**6. Inpatient Special Procedures**

	<b>845</b>	<b>767</b>	<b>381</b>	<b>456</b>	<b>1,011</b>	<b>1,009</b>	<b>-0.2%</b>
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**7. Inpatient Cardiac Caths  
(Includes PTCA's)**

	<b>631</b>	<b>620</b>	<b>313</b>	<b>338</b>	<b>681</b>	<b>695</b>	<b>2.0%</b>
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**B. OUTPATIENT UTILIZATION HISTORY AND BUDGETED GOALS**

**1. Observation Patients - Admits**

	<b>3,984</b>	<b>3,975</b>	<b>2,010</b>	<b>2,160</b>	<b>4,281</b>	<b>4,196</b>	<b>-2.0%</b>
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**2. Emergency Room Visits**

	<b>40,180</b>	<b>41,139</b>	<b>20,780</b>	<b>19,268</b>	<b>37,256</b>	<b>35,766</b>	<b>-4.0%</b>
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**3. Outpatient Diagnostics:**

PMC	41,619	41,286	21,324	19,811	38,666	38,163	
PSJ	17,892	18,242	8,976	7,985	15,917	15,121	
Port Canaveral	528	500	201	29	58	58	
Titus Landing	5,703	8,500	2,735	3,886	8,103	8,615	
Target	2,134	-	1,282	913	913	-	
<b>Total Diagnostics</b>	<b>67,876</b>	<b>68,528</b>	<b>34,518</b>	<b>32,624</b>	<b>63,657</b>	<b>61,957</b>	<b>-2.7%</b>

**3a. Other Outpatient Services**

PMC Rehab	2,424	2,402	1,140	1,449	3,081	3,054	
PSJ Rehab	601	625	304	278	550	571	
H&F Rehab	743	721	353	439	854	829	
Port Canaveral Rehab	980	1,135	447	1,002	2,197	2,241	
OTHER (Wound/Infusion)	1,069	1,356	674	319	638	638	

	Actual 2018	Budget 2019	Actual 6 Months 2018	Actual 6 Months 2019	Projected 2019	Budget 2020	% Variance Projected to Budget
<b>Total Other Outpatient Services</b>	<b>5,817</b>	<b>6,239</b>	<b>2,918</b>	<b>3,487</b>	<b>7,319</b>	<b>7,333</b>	<b>0.2%</b>

**3b. PMG Physician Operations**

Port Canaveral	3,966	5,907	2,190	1,968	3,936	3,936	
PMG / Omni	62,047	83,774	29,423	29,694	62,618	65,765	
PMG - Other (Hospitalist, etc.)	39,209	41,924	18,738	21,554	43,251	39,749	

<b>3. Ambulatory and Physician Operatio</b>	<b>178,915</b>	<b>206,372</b>	<b>87,787</b>	<b>89,327</b>	<b>180,781</b>	<b>178,739</b>	<b>-1.1%</b>
<b>4. Outpatient Surgery</b>	<b>2,369</b>	<b>2,624</b>	<b>1,236</b>	<b>1,121</b>	<b>2,149</b>	<b>2,041</b>	<b>-5.0%</b>
<b>5. Outpatient Special Procedures</b>	<b>1,777</b>	<b>1,500</b>	<b>771</b>	<b>1,074</b>	<b>2,191</b>	<b>2,337</b>	<b>6.7%</b>
<b>6. Outpatient Cardiac Caths (Includes PTCA's)</b>	<b>1,037</b>	<b>929</b>	<b>495</b>	<b>445</b>	<b>932</b>	<b>1,018</b>	<b>9.2%</b>

AD VALOREM TAXES  
PUBLIC HEARING DATES

1ST PUBLIC HEARING DATE

Regulations:

Must be conducted not before 65 days after 6/30/19 and within 80 days after 6/30/19.

Tentative date set for September 09, 2019 (Monday) at 5:01 p.m. in Conference Room 2345. The regular meetings of the Board of Directors and the Committees of the Board of Directors are also set for September 9th (Monday).

2ND PUBLIC HEARING DATE

Regulations:

Must be conducted not before two days after newspaper add and not more than five days after newspaper add.

Tentative date set for September 23, 2019 (Monday) at 5:01 p.m. in the Executive Conference Room, Administration, 2<sup>nd</sup> Floor.

Note: The newspaper ad for the 2nd public hearing is to be published within 15 days of the 1st public hearing. The tentative date for this publishing is set for September 19, 2019 (Thursday).

ATTACHMENT: Confirmation from Brevard County Board of County Commissioners re: Public Hearings on County and School Budgets.

July 31, 2019

✉ Jill Hayes , Director (mailto:Jill.Hayes@brevardfl.gov)

✉ Budget Office (mailto:Budget.Office@BrevardCounty.us)



[Home \(../Home\)](#) / [Budget Office \(../Budget\)](#) / [Budget Office Home](#)

## Budget Office

Re: Public Hearings on County and School Budgets

In accordance with the requirements of Florida Statutes, Chapter 200.065, notice is given concerning the dates of the scheduled public hearings on the ad valorem tax rates and budgets of the Brevard County School Board and the Brevard County Board of County Commissioners for the fiscal year beginning October 1, 2019.

The Brevard County School Board will hold public hearings on its ad valorem tax rates and budget: for the fiscal year beginning July 1, 2019 on:

Thursday – July 25, 2019 at 5:30 P.M. and

Tuesday - September 10, 2019 at 5:30 P.M.

The Brevard County Board of County Commissioners will hold public hearings on its ad valorem tax rates and budget for the fiscal year beginning October 1, 2019 on:

Thursday - September 12, 2019 at 5:30 P.M. and

Tuesday - September 24, 2019 at 5:30 P.M.

If there are any questions concerning these meetings, please call the Brevard County Budget Office at 321-633-2153.

## About the Budget Office

The Brevard County Budget Office is responsible for the development of the annual Operating and five year Capital Improvement Program budgets. Through coordination with departments and County Administration, we strive to present a budget that adheres to the vision and guidance of the Brevard County Board of County Commissioners while maximizing limited resources. Our goal on this website is to



*Healing Families – Healing Communities®*

[parrishmed.com](http://parrishmed.com)

# Finance Committee

## FYTD June 30, 2019 – Performance Dashboard

Indicator	Actual 2019	Budget 2019	FYTD 2018
IP Admissions	4,403	4,500	4,516
LOS	4.5	4.3	4.7
Surgical Proc	5,154	4,740	4,821
ED Visits	28,502	30,954	30,400
OP Volumes	134,517	153,224	133,375
Hosp Margin %	4.3%	3.6%	2.2%
Investment Inc \$	\$2.6 million	\$3.4 million	\$2.4 million
EBIDA Margin %	2.0%	4.0%	2.8%



**EXECUTIVE COMMITTEE**

Robert L. Jordan, Jr., C.M., Chairman  
Herman A. Cole, Jr.  
Peggy Crooks  
Stan Retz, CPA  
Elizabeth Galfo, M.D.  
George Mikitarian, President/CEO (non-voting)

**DRAFT AGENDA  
EXECUTIVE COMMITTEE  
NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
MONDAY, AUGUST 5, 2019  
2<sup>nd</sup> FLOOR, EXECUTIVE CONFERENCE ROOM  
IMMEDIATELY FOLLOWING FINANCE COMMITTEE**

**CALL TO ORDER**

- I. Approval of Minutes

*Motion to approve the minutes of the May 6, 2019 and June 3, 2019 meeting.*

- II. Reading of the Huddle

- III. Public Comment

- IV. Report from Titusville City Council Liaison – Scott Larese

- V. Code of Business Ethics and Business Conduct – Anual Jackson

*Motion to approve the Resolution to be presented to the Board of Directors of the North Brevard County Hospital District DBA Parrish Medical Center regarding the amendment and restatement of the Code of Business Ethics and Business Conduct of the North Brevard County Hospital District d/b/a Parrish Medical Center, as presented.*

- VI. Attorney Report – Mr. Boyles

- VII. Other

- VIII. Executive Session (if necessary)

**ADJOURNMENT**

NOTE: IF A PERSON DECIDES TO APPEAL ANY DECISION MADE BY THE BOARD WITH RESPECT TO ANY MATTER CONSIDERED AT THIS MEETING, HE/SHE WILL NEED A RECORD OF PROCEEDINGS AND, FOR SUCH PURPOSES, MAY NEED TO ENSURE A VERBATIM RECORD OF THE PROCEEDINGS IS MADE AND THAT THE RECORD INCLUDES TESTIMONY AND EVIDENCE UPON WHICH THE APPEAL IS TO BE BASED.

PERSONS WITH A DISABILITY WHO NEED A SPECIAL ACCOMMODATION TO PARTICIPATE IN THIS PROCEEDING SHOULD CONTACT MS. LISA CAVALLERO, EXECUTIVE DIRECTOR OF SUPPORT SERVICES, AT 951 NORTH WASHINGTON AVENUE, TITUSVILLE, FLORIDA 32796, AT LEAST FORTY-EIGHT (48) HOURS PRIOR TO THE MEETING. FOR INFORMATION CALL (321) 268-6190 OR (t21) 383-9829 (TDD).

THIS NOTICE WILL FURTHER SERVE TO INFORM THE PUBLIC THAT MEMBERS OF THE BOARD OF DIRECTORS OF NORTH BREVARD MEDICAL SUPPORT, INC. MAY BE IN ATTENDANCE AND MAY PARTICIPATE IN DISCUSSIONS OF MATTERS BEFORE THE NORTH BREVARD COUNTY HOSPITAL DISTRICT BOARD OF DIRECTORS EXECUTIVE COMMITTEE. TO THE EXTENT OF SUCH DISCUSSIONS, A JOINT PUBLIC MEETING OF THE NORTH BREVARD COUNTY HOSPITAL DISTRICT BOARD OF DIRECTORS EXECUTIVE COMMITTEE AND NORTH BREVARD MEDICAL SUPPORT, INC. SHALL BE CONDUCTED.

**NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
EXECUTIVE COMMITTEE**

A regular meeting of the Executive Committee of the North Brevard County Hospital District operating Parrish Medical Center was held on May 6, 2019 in the Executive Conference Room. The following members were present:

Robert L. Jordan, Jr., C.M., Chairman  
Herman A. Cole, Jr.  
Peggy Crooks  
Stan Retz  
Elizabeth Galfo, M.D.  
George Mikitarian (non-voting)

Members Absent:  
None

Also in attendance were the following Board members:

Ashok Shah, M.D.  
Billie Fitzgerald  
Maureen Rupe

A copy of the attendance roster of others present during the meeting is appended to the file copy of these minutes.

**CALL TO ORDER**

Mr. Jordan called the meeting to order at 12:39 p.m.

**CITY LIAISON**

The Quality Committee suspended its agenda and the Executive Committee convened at 12:39 p.m. for the purpose of the report from the City Manager, Mr. Scott Larese. Mr. Larese handed out the latest edition of Titusville Talking Points, and addressed questions from the committee. The Committee recessed at 12:45 p.m. to resume the Quality Committee.

**REVIEW AND APPROVAL OF MINUTES**

The Executive Committee reconvened at 2:28 p.m. Discussion ensued and the following motion was made by Mr. Cole, seconded by Dr. Galfo and approved (5 ayes, 0 nays, 0 abstentions).

***ACTION TAKEN: APPROVED THE MINUTES OF THE MARCH 4, 2019 MEETING AS PRESENTED.***

**READING OF THE HUDDLE**

Dr. Galfo read the Weekly Huddle.

**PUBLIC COMMENT**

There were no public comments.

**OPEN FORUM FOR PHYSICIANS**

No physicians spoke.

**ATTORNEY REPORT**

Mr. Boyles shared with the committee two bills that have recently been passed by the Florida Legislature but are not yet signed by the Governor. The first concerns importation of prescription drugs through Canada (in order to lower costs), and the second concerns telehealth/telemedicine. Mr. Boyles noted it was important to keep the committee aware of current healthcare related activity in the Legislature in Florida.

**ADJOURNMENT**

There being no further business to discuss, the committee adjourned at 2:55 p.m.

Robert L. Jordan, Jr., C.M.  
Chairperson

**NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
EXECUTIVE COMMITTEE**

A regular meeting of the Executive Committee of the North Brevard County Hospital District operating Parrish Medical Center was held on June 3, 2019 in the Executive Conference Room. The following members were present:

Robert L. Jordan, Jr., C.M., Chairman  
Herman A. Cole, Jr.  
Stan Retz  
Elizabeth Galfo, M.D.

Members Absent:

Peggy Crooks (excused)  
George Mikitarian (non-voting) (excused)

Also in attendance were the following Board members:

Ashok Shah, M.D.  
Billie Fitzgerald  
Maureen Rupe  
Jerry Noffel

A copy of the attendance roster of others present during the meeting is appended to the file copy of these minutes.

**CALL TO ORDER**

Mr. Jordan called the meeting to order at 1:05 p.m.

**CITY LIAISON**

The Quality Committee suspended its agenda and the Executive Committee convened at 1:05 p.m. for the purpose of the report from the City Manager, Mr. Scott Larese. Mr. Larese updated the committee concerning new developments around the City and addressed questions from the committee. The Committee recessed at 1:14 p.m. to resume the Quality Committee.

**REVIEW AND APPROVAL OF MINUTES**

The Executive Committee reconvened at 2:36 p.m. Discussion ensued and the following motion was made by Mr. Cole, seconded by Dr. Galfo and approved (4 ayes, 0 nays, 0 abstentions).

***ACTION TAKEN: APPROVED THE MINUTES OF THE APRIL 1, 2019 MEETING AS PRESENTED.***

**READING OF THE HUDDLE**

Dr. Galfo read the Weekly Huddle.

**PUBLIC COMMENT**

There were no public comments.

**OPEN FORUM FOR PHYSICIANS**

No physicians spoke.

**ATTORNEY REPORT**

No Attorney report was presented.

**ADJOURNMENT**

There being no further business to discuss, the committee adjourned at 2:40 p.m.

Robert L. Jordan, Jr., C.M.  
Chairperson

**Office of Corporate Compliance and HIPAA Privacy**  
**Code of Business Ethics and Business Conduct**  
**Summary of Changes**

July 2019

Page Number   Section	Additions/ Changes Revisions:
2	New Page
7 – Code of Business Ethics and Business Conduct	As part of Parrish Medical Center’s system-wide Compliance Program, our Code <del>lays out</del> <u>sets forth</u> the principles under which we operate, and helps us put policy into practice on the job every day.
7/8 – Gifts or Gratuities from Business	Infrequent gifts of a nominal value (\$100 annually) <del>and so long as such gifts are</del> not solicited may be accepted. When gifts or gratuities from businesses are unclear, seek clarification from your leadership or Corporate Compliance <u>before accepting the gift or gratuity</u> .
8 – Gifts from Patients	It is never <u>proper or</u> allowed to accept money from patients.
8 – Dealing With Vendors and Referring Providers	<i>Kickbacks and Rebates:</i> <u>This includes, but is not limited to, receiving gifts or money from a referring provider or paying money or giving gifts to a referring provider.</u>
9 – Common Potential Conflicts of Interest	<i>A Second Job:</i> A conflict of interest can also arise if you have outside employment that interferes with your ability to <del>do</del> <u>perform</u> your job here at Parrish Medical Center.
9 – <i>A Financial Interest:</i>	Investing in a business that offers, manufactures or sells products or services that compete with or are similar to <u>those of</u> Parrish Medical Center can present a conflict of interest.
9 – <i>Serving on a Board of Directors or Community Board:</i>	Before agreeing to serve as a member on any board <u>of directors or community board</u> , care partners should make sure their commitment won’t interfere with their Parrish Medical Center <del>job</del> responsibilities.
10 – <i>Political Activities:</i>	Never make a contribution or payment on behalf of Parrish Medical Center, and don’t express your political views in such a way that others <u>might think you’re you are</u> speaking on Parrish Medical Center’s behalf.
Page 11 – Confidentiality	Federal laws, Florida laws and Parrish Medical Center policies forbid you to seek, disclose or give <u>unauthorized sensitive information</u> that is not otherwise subject to disclosure under <del>state such</del> <u>laws or policies</u> .
Page 11 – HIPAA Privacy – HIPAA Security	Maintaining <u>the confidentiality of</u> protected health information <del>confidentiality</del> is the responsibility of every Parrish Medical Center care partner. Use only the appropriate amount of protected health information <u>minimally</u> necessary to meet the legally intended purpose. <u>If you have questions regarding whether information is protected health information, consult with management or corporate compliance prior to using or releasing such information.</u>  All care partners are required to know and comply with laws and/or policies about HIPAA (Health Information Portability and Accountability Act) privacy and security, and identity theft. Intentional violations of these laws and policies <u>concerning them</u> will not be tolerated and are grounds for disciplinary action, up to and including termination of employment, criminal and professional penalties per federal and state laws and Parrish Medical Center policies.
12 Reporting Compliance – HIPAA Privacy – HIPAA Security Issues	New Page

Strike through word = Deletion  
Underline word = Addition

# CULTURE OF CHOICE<sup>®</sup>

HEALING WORK ENVIRONMENT



**CODE OF BUSINESS  
ETHICS AND BUSINESS  
CONDUCT**



# CULTURE OF CHOICE<sup>®</sup>

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## HEALING WORK ENVIRONMENT

*“A healing work environment empowers people to aspire to be their very best (top performers) and **inspires** commitment to the Mission, Vision and Values.”*

— George Mikitarian, President/CEO  
Parrish Medical Center | Parrish Healthcare

*Mission*     Healing Experiences For Everyone All The Time<sup>®</sup>  
*Vision*        Healing Families—Healing Communities<sup>®</sup>  
*Values*        Safety | Loyalty | Integrity | Compassion  
                         Excellence | Stewardship

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Our commitment to ethical conduct and compliance depends on Parrish Medical Center care partners. If you find yourself in an ethical dilemma or suspect inappropriate or illegal conduct, use the reporting process identified in our Code of Business Ethics and Business Conduct (Code), including calling the Compliance hotline at 888-447-8653 or reporting online at [parrishmed.ethicspoint.com](http://parrishmed.ethicspoint.com). Reporting may be done anonymously.



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## *Parrish Medical Center Care Partners,*

Thanks to the continued efforts of Parrish Medical Center care partners (employees, physicians and volunteers), we have provided service to our community since 1958, and we look forward to many more. Caring is at the core of who we are and what we do. As caregivers to the most frail in our community, Parrish Medical Center's focus is on quality care, a healing environment, effective use of resources, and compliance with applicable laws and ethical standards.

Parrish Medical Center's reputation for integrity, quality service and fair dealings come down to one thing—you. Parrish Medical Center isn't ethical unless you are. We need the commitment of everyone—from every individual and department.

It is important that you read and live by our Code of Business Ethics and Business Conduct (Code). Be curious and ask questions or raise concerns about areas you don't understand. Engage in conversations about any ethical situations you encounter. I encourage you to have candid dialog about ethics and integrity.

If you are concerned about something you have observed, raise your concern with your manager, Corporate Compliance, Human Resources, or any director or senior executive.

To continue to be successful in the ever-changing and increasingly complex health care environment, we must manage our health system responsibly and in compliance with all applicable laws. Furthermore, we must hold ourselves to *high standards of integrity* in all that we do. *Our community* expects no less.

Our Code, mission, vision, values, and policies and procedures work together to provide guidance on how we should approach our work and operate with integrity. Our Code is not a prescription, but rather a framework for operating with integrity.

Of course, no compliance program is perfect. In organizations as complex as ours, some care partners may run afoul of the rules, often unintentionally. Our objective is to have a compliance system and culture that prevents such issues from arising. Big problems usually start small, but we can avert them if we identify and address them promptly when they do occur.

Our commitment to compliance means that we all understand our obligation to prevent issues of noncompliance. All of us have a duty to seek guidance when we are unsure about the right course of action, and to speak up when someone is not acting in compliance with our Code, policies or government regulations. Our Code applies equally to each of us, regardless of position. We should take pride in our conduct and never compromise our integrity.



Herman Cole Jr.  
*Chairman of the Board*



George Mikitarian  
*President/CEO*



Anual Jackson Sr.  
*Inspector General*  
*Chief Compliance Officer*  
*Chief Privacy Officer*

*Integrity: “Doing the **right thing** when nobody is watching.”*

— C.S. Lewis



## **COMPLIANCE AND BUSINESS ETHICS**

Parrish Medical Center established The Compliance and Ethics Program (Compliance Program) to reinforce our commitment to conduct business with integrity. People with integrity are honest, sincere, ethical, and act within legal boundaries at all times.

The Board of Directors supports our Code—Parrish Medical Center’s formal statement of standards and rules of ethics and conduct. The Compliance Program gives Parrish Medical Center a way to communicate standards of ethical conduct to its care partners, vendors and the community it serves.

### *Parrish Medical Center’s Compliance Program*

The Inspector General | Chief Compliance Officer | Chief Privacy Officer administers Parrish Medical Center’s Compliance Program. Corporate Compliance teams with department leaders and appropriate committees to ensure compliance with complex regulatory requirements.

Corporate Compliance is available to receive all reports of suspected violations of Parrish Medical Center’s policies, applicable laws and regulations. Suspected violations reported to Corporate Compliance, either directly or through the compliance hotline, are thoroughly investigated.

### *Application of Our Ethical Standards*

The number of guidelines Parrish Medical Center must follow is staggering. The fact that there are so many guidelines to follow, however, does not lessen our commitment to follow them according to our ethical standards.

### *Care Partners Take Responsibility*

As a care partner (employee, physician, volunteer), you have a responsibility to yourself, your coworkers and Parrish Medical Center to conduct business legally and ethically. Make sure you read our Code and understand the rules that apply to you.

### *Leaders Have Greater Responsibility*

Leaders set the tone for our ethical workplace and are expected to be in every respect a role model.

Parrish Medical Center looks to our leadership to set a good example and be familiar with our Code, the laws and policies that apply to your team.

Leaders must ensure that ethical, compliant behavior is never sacrificed during the pursuit of business objectives.

As leaders, you have a responsibility to listen to your care partners, and promote an open dialogue about ethical and compliance issues. When ethical issues are brought to your attention, we rely on each leader to report concerns through the appropriate channel. You must never respond in a retaliatory manner. Each leader is expected to create an environment where all care partners are encouraged to raise concerns and propose ideas.

## **CODE OF BUSINESS ETHICS AND BUSINESS CONDUCT**

Our Code is designed to provide you with a clear understanding of what is expected in the workplace. Our Code does not cover every situation. Instead, our Code provides broad guidelines that are detailed in policies and procedures.

Parrish Medical Center is committed to providing high-quality patient care in the communities we serve. Parrish Medical Center advocates a responsive management style and a patient-first philosophy based on integrity and competence. We treat our patients with respect and dignity. We provide quality, compassionate care in a clean, safe environment.

As part of Parrish Medical Center's systemwide Compliance Program, our Code ~~lays out~~ sets forth the principles under which we operate, and helps us put policy into practice on the job every day.

Our Code sets forth guidelines needed to support compliance with federal and state health care program requirements as we provide high-quality patient care.

Parrish Medical Center's compliance policies are in place to prevent unethical and unlawful behavior; to correct such behavior as soon as possible after it is discovered; and to discipline care partners who do not conform to the laws, regulations, policies or standards.

Parrish Medical Center's policy is to obey the law. Health care is a heavily regulated business, and it is important to get the details right by following our policies and procedures. Our Code does not discuss every law or policy that applies to your work, but Parrish Medical Center wants you to have all the information you need to do your work fairly, honestly and ethically. If you have questions or need advice about a specific situation, talk to your supervisor, management or the Compliance office.

### *The Compliance Program and the Code apply to us all.*

Compliance to regulations and policies is everyone's responsibility. No person's job or position at Parrish Medical Center is more important than preserving Parrish Medical Center's reputation for integrity.

Care partners are "the eyes and ears" of our Compliance Program. You are in the offices and on the floors; you see and hear what is going on. Care partners are held accountable to know enough about compliance to recognize an issue when it arises and report it.

### *Charitable Contributions and Gifts*

Parrish Medical Center is a public organization governed by the Florida Code of Ethics for Public Officers and Employees. Parrish Medical Center care partners are prohibited from soliciting or accepting anything of value that might influence the care partners' business judgment for any activity involving Parrish Medical Center.

### *Gifts or Gratuities from Businesses*

Care partners must decline any offer that is intended to gain favor with vendors or physicians for any activity involving Parrish Medical Center. Personal gifts of any kind from vendors conducting business with

Parrish Medical Center or wanting to conduct business with Parrish Medical Center are never acceptable under any circumstance, which includes gifts to immediate family members. Parrish Medical Center partners are never to accept gifts of money or money in kind from vendors who conduct business with Parrish Medical Center, or wish to conduct business with Parrish Medical Center. All monies and charitable contributions must be referred to the Jess Parrish Medical Foundation office. Infrequent gifts of a nominal value (\$100 annually) **and so long as such gifts are** not solicited may be accepted. Examples of these infrequent gifts are modest meals shared with the department during the holiday season, or a vendor providing a modest onsite working meal when the vendor is providing a necessary business-related educational session. Keep in mind that such business courtesies must be reasonable in value and infrequent. Care partners are not allowed to solicit funding or accept funding to support any parties or similar functions that are not business related. When gifts or gratuities from businesses are unclear, seek clarification from your leadership or Corporate Compliance **before accepting the gift or gratuity.**

Subsidies from vendors may not be accepted directly or indirectly to pay for the cost of travel, lodging, or other personal expenses. It is acceptable for faculty at conferences or meetings to receive reimbursement for travel, lodging and meal expenses, as long as any reimbursement complies with Parrish Medical Center policy and state laws. Any stipend given by a vendor must be turned in to the Finance department.

#### *Gifts from Patients*

Patients who want to make a financial gift to Parrish Medical Center should be referred to the Jess Parrish Medical Foundation office. Patients may insist on making a personal gift to a care partner. Small gifts may be accepted and shared with coworkers (e.g., flowers or a box of candy). It is never **proper or** allowed to accept money from patients.

#### *Government Personnel*

State, local and federal governments have strict rules describing government employees' accepting gifts. To avoid confusion, Parrish Medical Center care partners will not give or offer to give gifts to government employees.

### **DEALING WITH VENDORS AND REFERRING PROVIDERS**

Dealing with product and service vendors, as well as referring providers, can pose ethical and legal problems. The following guidelines are intended to help care partners make ethical decisions in potentially difficult situations.

*Kickbacks and Rebates:* Care partners or their families must not receive personal kickbacks (benefits) or rebates as a result of the purchase or sale of goods or services at Parrish Medical Center. If a care partner or family member stands to gain personally from a transaction, that transaction is prohibited. Such practices are unethical and often illegal. **This includes, but is not limited to, receiving gifts or money from a referring provider or paying money or giving gifts to a referring provider.**

*Reciprocity:* There are times when Parrish Medical Center purchases goods or services from vendors who also buy goods or services from Parrish Medical Center. This practice is normal and acceptable, but any form of pressure is not. Parrish Medical Center care partners must never ask vendors to buy Parrish Medical Center products or services in order to become a Parrish Medical Center vendor.

### **CONFLICTS OF INTEREST**

As members of the Parrish Medical Center family, we all have a responsibility to make business decisions and take actions that are in Parrish Medical Center's best interest.

A conflict of interest can happen when you are involved in an activity that affects your loyalty to Parrish Medical Center or your objectivity in making decisions as a Parrish Medical Center care partner.

Parrish Medical Center care partners should avoid outside activities that conflict with their obligation to Parrish Medical Center or negatively impact Parrish Medical Center's reputation in the community. Care partners who think they may have an actual or potential conflict of interest due to outside activities should submit a disclosure form to Corporate Compliance. Compliance will assess the disclosure and notify the care partner of the outcome and any actions that need to be taken.

Executive leadership, directors and care partners in designated departments are required to submit a completed disclosure form annually to Corporate Compliance.

All care partners must disclose actual or potential conflicts of interest to Corporate Compliance.

### *Common Potential Conflicts of Interest*

*A Second Job:* A conflict of interest can arise if you own, work for or provide services to a business that is a Parrish Medical Center competitor, vendor or customer. A conflict of interest can also arise if you have outside employment that interferes with your ability to deperform your job here at Parrish Medical Center. Speak with your management before accepting outside employment.

*A Financial Interest:* Investing in a business that offers, manufactures or sells products or services that compete with or are similar to those of Parrish Medical Center can present a conflict of interest.

*Supervising a Family Member or Partner:* Decisions about hiring and promoting can become difficult if the person you supervise is a close relative or partner. Even if you work to remain objective in your business dealings, the fact that you share a personal relationship can create the appearance of a conflict of interest.

*Public Service:* Volunteering your time and talents to public service is encouraged. You should not use Parrish Medical Center's name to further activities without appropriate approvals.

*Serving on a Board of Directors or Community Board:* Before agreeing to serve as a member on any board of directors or community board, care partners should make sure their commitment won't interfere with their Parrish Medical Center job responsibilities. Don't accept a board appointment for any corporation that supplies goods or services to Parrish Medical Center or purchases our products unless you obtain advance approval from the Compliance office.



*Political Activities:* Never make a contribution or payment on behalf of Parrish Medical Center, and don't express your political views in such a way that others might think ~~you're~~ you are speaking on Parrish Medical Center's behalf. Participation in political campaigns must be conducted on your personal time, using your personal resources.

*Doing Parrish Medical Center Business with Friends and Family:* A potential conflict can arise if a family member, partner, or close personal friend owns or works for a business that is a competitor, vendor or customer of Parrish Medical Center.

## **RESPONDING TO GOVERNMENT INQUIRIES**

Parrish Medical Center's policy is that care partners cooperate with government personnel who conduct audits and investigations. Government investigators have the right to contact you at work or at home for work-related issues. Immediately contact your supervisor, Corporate Compliance or the administrator on call at the start of any government investigation. Management will immediately contact Corporate

Compliance upon any written or in-person government investigations.

Care partners are expected to provide truthful and accurate information in a timely manner to a government request. Parrish Medical Center will not tolerate false statements by care partners to government agencies and will take action against care partners for violations.

## **FALSE CLAIMS ACT**

Parrish Medical Center devotes many resources to preventing and correcting billing errors to Medicare, Medicaid and other payers. The federal government and the state of Florida have enacted False Claims Act laws making it illegal to knowingly or recklessly present a false claim to the government for payment of a claim. The government has enacted laws to aggressively pursue billings that are fraudulent, wasteful and abusive. Care partners who suspect that billing errors are occurring have an obligation to report these to management or Corporate Compliance. Care partners who report, in good faith, compliance concerns will be protected from retaliation.





## CONFIDENTIALITY

Care partners have access to various forms of sensitive, confidential and proprietary information. Parrish Medical Center collects information about the patient's medical condition, history, medication, and family illnesses in order to provide quality care. We realize the sensitive nature of this information and are committed to maintaining its confidentiality. Federal laws, Florida laws and Parrish Medical Center policies forbid you to seek, disclose or give unauthorized sensitive information that is not otherwise subject to disclosure under [state such laws or policies](#).

## HIPAA PRIVACY – HIPAA SECURITY

Parrish Medical Center has a long-standing commitment to the principle and practice of maintaining the confidentiality of protected health information. Maintaining [the confidentiality of](#) protected health information is the responsibility of every Parrish Medical Center care partner. Use only the appropriate amount of protected health information [minimally](#) necessary to meet the legally intended purpose. [If you have questions regarding whether information is protected health information, consult with management or corporate compliance prior to using or releasing such information.](#)

All care partners are required to know and comply with laws and [or](#) policies about HIPAA (Health Information Portability and Accountability Act) privacy and security, and identity theft. Intentional violations of these laws and policies [concerning them](#) will not be tolerated and are grounds for disciplinary action, up to and including termination of employment, criminal and professional penalties per federal and state laws and Parrish Medical Center policies.

## CARE PARTNER IDENTITY THEFT

Parrish Medical Center has implemented an Identity Theft Program aimed to lessen the exposure of risk to our care partners' collected and stored information. All care partners should do their part and keep private information private.

In the event that your identity has been compromised, Parrish Medical Center will assist you with any questions on reporting your unauthorized compromised identity. Parrish Medical Center will provide credit company surveillance for one year to monitor your credit.

We take identity theft seriously, and have zero tolerance for care partners violating someone's personal information. Care partners who are found to have violated the identity of a fellow care partner [or patient](#) will be disciplined accordingly, including termination and law enforcement notification.

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Parrish Medical Center approaches all infractions of our organization's rules with fairness and impartiality. Failure to comply with our Code will result in disciplinary action that may include suspension, termination, and reimbursement to Parrish Medical Center for any losses or damages resulting from violation and, where appropriate, referral to a governmental authority. Anyone charged with violation of our Code will be given an opportunity to explain his or her action before disciplinary action is taken. Our Code will be enforced at all levels, fairly and consistently.

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## REPORTING COMPLIANCE – HIPAA PRIVACY – HIPAA SECURITY ISSUES

**Any care partner who has knowledge of activities that he or she believes may violate laws, regulations or Parrish standards has an obligation, after learning of such activities, to report the matter via the Reporting System.**

- 1. Talk to your supervisor**
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*24 hours a day, 7 days a week. Reporting may be done anonymously.*

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**Compliance Hotline: 888-447-8653**

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I understand that I play a critical role in Parrish Medical Center's mission, vision, and values. I acknowledge that nonadherence to Parrish Medical Center's principles and standards may result in disciplinary action up to and including termination of my employment, consistent with Parrish Medical Center's Code of Business Ethics and Business Conduct and with Parrish Medical Center's Human Resources policies.

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**Q:** *Why do we need a Compliance and Ethics Program?*

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leading with honesty and integrity  
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**PARRISH**  
MEDICAL CENTER

PARRISH HEALTHCARE

951 N. Washington Ave.  
Titusville, FL 32796  
[parrishhealthcare.com](http://parrishhealthcare.com)

*Healing Families—Healing Communities®*

Date of Issue May 2019

**RESOLUTION OF THE BOARD OF DIRECTORS  
OF THE NORTH BREVARD COUNTY HOSPITAL DISTRICT  
REGARDING AMENDMENT AND RESTATEMENT OF THE  
CODE OF BUSINESS ETHICS AND BUSINESS CONDUCT OF THE  
NORTH BREVARD COUNTY HOSPITAL DISTRICT,  
d/b/a PARRISH MEDICAL CENTER  
("RESOLUTION")**

**RECITALS**

WHEREAS, the members of the Board of Directors (the "Board") of the North Brevard County Hospital District (the "District"), d/b/a Parrish Medical Center (the "Hospital"), a special hospital district in Brevard County, Florida, have previously adopted a Code of Business Ethics and Business Conduct; and

WHEREAS, the Code of Business Ethics and Business Conduct has been updated and amended and restated; and

WHEREAS, the Board has carefully considered the Amended and Restated Code of Business Ethics and Business Conduct.

**RESOLVED**

Resolved that the Board, pursuant to the terms of the District's enabling legislation in Chapter 2003-362, *Laws of Florida*:

1. determines that the District would be best served by amending and restating the Code of Business Ethics and Business Conduct to make the changes set forth therein.

2. hereby adopts the amendment and restatement of the Code of Business Ethics and Business Conduct attached hereto as Exhibit "A" and incorporated into this Resolution for the purpose of making the changes as set forth therein.

This Resolution shall take effect immediately upon its adoption.

PASSED, APPROVED AND ADOPTED this \_\_\_\_ day of August, 2019.

BOARD OF NORTH BREVARD COUNTY  
HOSPITAL DISTRICT

By: \_\_\_\_\_  
\_\_\_\_\_

ATTEST:

By: \_\_\_\_\_  
Peggy Crooks, Secretary

# CULTURE OF CHOICE<sup>®</sup>

HEALING WORK ENVIRONMENT



**CODE OF BUSINESS  
ETHICS AND BUSINESS  
CONDUCT**





# CULTURE OF CHOICE®

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## HEALING WORK ENVIRONMENT

*“A healing work environment empowers people to aspire to be their very best (top performers) and **inspires** commitment to the Mission, Vision and Values.”*

— George Mikitarian, President/CEO  
Parrish Medical Center | Parrish Healthcare

*Mission*    Healing Experiences For Everyone All The Time®  
*Vision*     Healing Families—Healing Communities®  
*Values*     Safety | Loyalty | Integrity | Compassion  
                  Excellence | Stewardship

---

Our commitment to ethical conduct and compliance depends on Parrish Medical Center care partners. If you find yourself in an ethical dilemma or suspect inappropriate or illegal conduct, use the reporting process identified in our Code of Business Ethics and Business Conduct (Code), including calling the Compliance hotline at 888-447-8653 or reporting online at [parrishmed.ethicspoint.com](http://parrishmed.ethicspoint.com). Reporting may be done anonymously.

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*Parrish Medical Center Care Partners,*

Thanks to the continued efforts of Parrish Medical Center care partners (employees, physicians and volunteers), we have provided service to our community since 1958, and we look forward to many more. Caring is at the core of who we are and what we do. As caregivers to the most frail in our community, Parrish Medical Center's focus is on quality care, a healing environment, effective use of resources, and compliance with applicable laws and ethical standards.

Parrish Medical Center's reputation for integrity, quality service and fair dealings come down to one thing—you. Parrish Medical Center isn't ethical unless you are. We need the commitment of everyone—from every individual and department.

It is important that you read and live by our Code of Business Ethics and Business Conduct (Code). Be curious and ask questions or raise concerns about areas you don't understand. Engage in conversations about any ethical situations you encounter. I encourage you to have candid dialog about ethics and integrity.

If you are concerned about something you have observed, raise your concern with your manager, Corporate Compliance, Human Resources, or any director or senior executive.

To continue to be successful in the ever-changing and increasingly complex health care environment, we must manage our health system responsibly and in compliance with all applicable laws. Furthermore, we must hold ourselves to *high standards of integrity* in all that we do. *Our community* expects no less.

Our Code, mission, vision, values, and policies and procedures work together to provide guidance on how we should approach our work and operate with integrity. Our Code is not a prescription, but rather a framework for operating with integrity.

Of course, no compliance program is perfect. In organizations as complex as ours, some care partners may run afoul of the rules, often unintentionally. Our objective is to have a compliance system and culture that prevents such issues from arising. Big problems usually start small, but we can avert them if we identify and address them promptly when they do occur.

Our commitment to compliance means that we all understand our obligation to prevent issues of noncompliance. All of us have a duty to seek guidance when we are unsure about the right course of action, and to speak up when someone is not acting in compliance with our Code, policies or government regulations. Our Code applies equally to each of us, regardless of position. We should take pride in our conduct and never compromise our integrity.



Herman Cole Jr.  
*Chairman of the Board*



George Mikitarian  
*President/CEO*



Anual Jackson Sr.  
*Inspector General*  
*Chief Compliance Officer*  
*Chief Privacy Officer*

*Integrity: “Doing the **right thing** when nobody is watching.”*

— C.S. Lewis



## **COMPLIANCE AND BUSINESS ETHICS**

Parrish Medical Center established The Compliance and Ethics Program (Compliance Program) to reinforce our commitment to conduct business with integrity. People with integrity are honest, sincere, ethical, and act within legal boundaries at all times.

The Board of Directors supports our Code—Parrish Medical Center’s formal statement of standards and rules of ethics and conduct. The Compliance Program gives Parrish Medical Center a way to communicate standards of ethical conduct to its care partners, vendors and the community it serves.

### *Parrish Medical Center’s Compliance Program*

The Inspector General | Chief Compliance Officer | Chief Privacy Officer administers Parrish Medical Center’s Compliance Program. Corporate Compliance teams with department leaders and appropriate committees to ensure compliance with complex regulatory requirements.

Corporate Compliance is available to receive all reports of suspected violations of Parrish Medical Center’s policies, applicable laws and regulations. Suspected violations reported to Corporate Compliance, either directly or through the compliance hotline, are thoroughly investigated.

### *Application of Our Ethical Standards*

The number of guidelines Parrish Medical Center must follow is staggering. The fact that there are so many guidelines to follow, however, does not lessen our commitment to follow them according to our ethical standards.

### *Care Partners Take Responsibility*

As a care partner (employee, physician, volunteer), you have a responsibility to yourself, your coworkers and Parrish Medical Center to conduct business legally and ethically. Make sure you read our Code and understand the rules that apply to you.

### *Leaders Have Greater Responsibility*

Leaders set the tone for our ethical workplace and are expected to be in every respect a role model.

Parrish Medical Center looks to our leadership to set a good example and be familiar with our Code, the laws and policies that apply to your team.

Leaders must ensure that ethical, compliant behavior is never sacrificed during the pursuit of business objectives.

As leaders, you have a responsibility to listen to your care partners, and promote an open dialogue about ethical and compliance issues. When ethical issues are brought to your attention, we rely on each leader to report concerns through the appropriate channel. You must never respond in a retaliatory manner. Each leader is expected to create an environment where all care partners are encouraged to raise concerns and propose ideas.

## **CODE OF BUSINESS ETHICS AND BUSINESS CONDUCT**

Our Code is designed to provide you with a clear understanding of what is expected in the workplace. Our Code does not cover every situation. Instead, our Code provides broad guidelines that are detailed in policies and procedures.

Parrish Medical Center is committed to providing high-quality patient care in the communities we serve. Parrish Medical Center advocates a responsive management style and a patient-first philosophy based on integrity and competence. We treat our patients with respect and dignity. We provide quality, compassionate care in a clean, safe environment.

As part of Parrish Medical Center's systemwide Compliance Program, our Code sets forth the principles under which we operate, and helps us put policy into practice on the job every day.

Our Code sets forth guidelines needed to support compliance with federal and state health care program requirements as we provide high-quality patient care.

Parrish Medical Center's compliance policies are in place to prevent unethical and unlawful behavior; to correct such behavior as soon as possible after it is discovered; and to discipline care partners who do not conform to the laws, regulations, policies or standards.

Parrish Medical Center's policy is to obey the law. Health care is a heavily regulated business, and it is important to get the details right by following our policies and procedures. Our Code does not discuss every law or policy that applies to your work, but Parrish Medical Center wants you to have all the information you need to do your work fairly, honestly and ethically. If you have questions or need advice about a specific situation, talk to your supervisor, management or the Compliance office.

### *The Compliance Program and the Code apply to us all.*

Compliance to regulations and policies is everyone's responsibility. No person's job or position at Parrish Medical Center is more important than preserving Parrish Medical Center's reputation for integrity.

Care partners are "the eyes and ears" of our Compliance Program. You are in the offices and on the floors; you see and hear what is going on. Care partners are held accountable to know enough about compliance to recognize an issue when it arises and report it.

### *Charitable Contributions and Gifts*

Parrish Medical Center is a public organization governed by the Florida Code of Ethics for Public Officers and Employees. Parrish Medical Center care partners are prohibited from soliciting or accepting anything of value that might influence the care partners' business judgment for any activity involving Parrish Medical Center.

### *Gifts or Gratuities from Businesses*

Care partners must decline any offer that is intended to gain favor with vendors or physicians for any activity involving Parrish Medical Center. Personal gifts of any kind from vendors conducting business with

Parrish Medical Center or wanting to conduct business with Parrish Medical Center are never acceptable under any circumstance, which includes gifts to immediate family members. Parrish Medical Center partners are never to accept gifts of money or money in kind from vendors who conduct business with Parrish Medical Center, or wish to conduct business with Parrish Medical Center. All monies and charitable contributions must be referred to the Jess Parrish Medical Foundation office. Infrequent gifts of a nominal value (\$100 annually) so long as such gifts are not solicited may be accepted. Examples of these infrequent gifts are modest meals shared with the department during the holiday season, or a vendor providing a modest onsite working meal when the vendor is providing a necessary business-related educational session. Keep in mind that such business courtesies must be reasonable in value and infrequent. Care partners are not allowed to solicit funding or accept funding to support any parties or similar functions that are not business related. When gifts or gratuities from businesses are unclear, seek clarification from your leadership or Corporate Compliance before accepting the gift or gratuity.

Subsidies from vendors may not be accepted directly or indirectly to pay for the cost of travel, lodging, or other personal expenses. It is acceptable for faculty at conferences or meetings to receive reimbursement for travel, lodging and meal expenses, as long as any reimbursement complies with Parrish Medical Center policy and state laws. Any stipend given by a vendor must be turned in to the Finance department.

#### *Gifts from Patients*

Patients who want to make a financial gift to Parrish Medical Center should be referred to the Jess Parrish Medical Foundation office. Patients may insist on making a personal gift to a care partner. Small gifts may be accepted and shared with coworkers (e.g., flowers or a box of candy). It is never proper or allowed to accept money from patients.

#### *Government Personnel*

State, local and federal governments have strict rules describing government employees' accepting gifts. To avoid confusion, Parrish Medical Center care partners will not give or offer to give gifts to government employees.

### **DEALING WITH VENDORS AND REFERRING PROVIDERS**

Dealing with product and service vendors, as well as referring providers, can pose ethical and legal problems. The following guidelines are intended to help care partners make ethical decisions in potentially difficult situations.

*Kickbacks and Rebates:* Care partners or their families must not receive personal kickbacks (benefits) or rebates as a result of the purchase or sale of goods or services at Parrish Medical Center. If a care partner or family member stands to gain personally from a transaction, that transaction is prohibited. Such practices are unethical and often illegal. This includes, but is not limited to, receiving gifts or money from a referring provider or paying money or giving gifts to a referring provider.

*Reciprocity:* There are times when Parrish Medical Center purchases goods or services from vendors who also buy goods or services from Parrish Medical Center. This practice is normal and acceptable, but any form of pressure is not. Parrish Medical Center care partners must never ask vendors to buy Parrish Medical Center products or services in order to become a Parrish Medical Center vendor.

### **CONFLICTS OF INTEREST**

As members of the Parrish Medical Center family, we all have a responsibility to make business decisions and take actions that are in Parrish Medical Center's best interest.

A conflict of interest can happen when you are involved in an activity that affects your loyalty to Parrish Medical Center or your objectivity in making decisions as a Parrish Medical Center care partner.

Parrish Medical Center care partners should avoid outside activities that conflict with their obligation to Parrish Medical Center or negatively impact Parrish Medical Center's reputation in the community. Care partners who think they may have an actual or potential conflict of interest due to outside activities should submit a disclosure form to Corporate Compliance. Compliance will assess the disclosure and notify the care partner of the outcome and any actions that need to be taken.

Executive leadership, directors and care partners in designated departments are required to submit a completed disclosure form annually to Corporate Compliance.

All care partners must disclose actual or potential conflicts of interest to Corporate Compliance.

### *Common Potential Conflicts of Interest*

*A Second Job:* A conflict of interest can arise if you own, work for or provide services to a business that is a Parrish Medical Center competitor, vendor or customer. A conflict of interest can also arise if you have outside employment that interferes with your ability to perform your job here at Parrish Medical Center. Speak with your management before accepting outside employment.

*A Financial Interest:* Investing in a business that offers, manufactures or sells products or services that compete with or are similar to those of Parrish Medical Center can present a conflict of interest.

*Supervising a Family Member or Partner:* Decisions about hiring and promoting can become difficult if the person you supervise is a close relative or partner. Even if you work to remain objective in your business dealings, the fact that you share a personal relationship can create the appearance of a conflict of interest.

*Public Service:* Volunteering your time and talents to public service is encouraged. You should not use Parrish Medical Center's name to further activities without appropriate approvals.

*Serving on a Board of Directors or Community Board:* Before agreeing to serve as a member on any board of directors or community board, care partners should make sure their commitment won't interfere with their Parrish Medical Center responsibilities. Don't accept a board appointment for any corporation that supplies goods or services to Parrish Medical Center or purchases our products unless you obtain advance approval from the Compliance office.





*Political Activities:* Never make a contribution or payment on behalf of Parrish Medical Center, and don't express your political views in such a way that others might think you are speaking on Parrish Medical Center's behalf. Participation in political campaigns must be conducted on your personal time, using your personal resources.

*Doing Parrish Medical Center Business with Friends and Family:* A potential conflict can arise if a family member, partner, or close personal friend owns or works for a business that is a competitor, vendor or customer of Parrish Medical Center.

## **RESPONDING TO GOVERNMENT INQUIRIES**

Parrish Medical Center's policy is that care partners cooperate with government personnel who conduct audits and investigations. Government investigators have the right to contact you at work or at home for work-related issues. Immediately contact your supervisor, Corporate Compliance or the administrator on call at the start of any government investigation. Management will immediately contact Corporate

Compliance upon any written or in-person government investigations.

Care partners are expected to provide truthful and accurate information in a timely manner to a government request. Parrish Medical Center will not tolerate false statements by care partners to government agencies and will take action against care partners for violations.

## **FALSE CLAIMS ACT**

Parrish Medical Center devotes many resources to preventing and correcting billing errors to Medicare, Medicaid and other payers. The federal government and the state of Florida have enacted False Claims Act laws making it illegal to knowingly or recklessly present a false claim to the government for payment of a claim. The government has enacted laws to aggressively pursue billings that are fraudulent, wasteful and abusive. Care partners who suspect that billing errors are occurring have an obligation to report these to management or Corporate Compliance. Care partners who report, in good faith, compliance concerns will be protected from retaliation.



## **CONFIDENTIALITY**

Care partners have access to various forms of sensitive, confidential and proprietary information. Parrish Medical Center collects information about the patient's medical condition, history, medication, and family illnesses in order to provide quality care. We realize the sensitive nature of this information and are committed to maintaining its confidentiality. Federal laws, Florida laws and Parrish Medical Center policies forbid you to seek, disclose or give unauthorized sensitive information that is not otherwise subject to disclosure under such laws or policies.

## **HIPAA PRIVACY – HIPAA SECURITY**

Parrish Medical Center has a long-standing commitment to the principle and practice of maintaining the confidentiality of protected health information. Maintaining the confidentiality of protected health information is the responsibility of every Parrish Medical Center care partner. Use only the appropriate amount of protected health information minimally necessary to meet the legally intended purpose. If you have questions regarding whether information is protected health information, consult with management or corporate compliance prior to using or releasing such information.

All care partners are required to know and comply with laws and/or policies about HIPAA (Health Information Portability and Accountability Act) privacy and security, and identity theft. Intentional violations of these laws and policies concerning them will not be tolerated and are grounds for disciplinary action, up to and including termination of employment, criminal and professional penalties per federal and state laws and Parrish Medical Center policies.

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PARRISH HEALTHCARE

951 N. Washington Ave.  
Titusville, FL 32796  
[parrishhealthcare.com](http://parrishhealthcare.com)

*Healing Families—Healing Communities®*

Date of Issue May 2019

**EDUCATION COMMITTEE**

Billie Fitzgerald, Chairperson  
Herman A. Cole, Jr. (ex-officio)  
Elizabeth T. Galfo, M.D.  
Maureen Rupe  
Ashok Shah, M.D.  
Joseph Rojas, M.D.  
George Mikitarian, President/CEO (Non-voting)

**NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
EDUCATIONAL, GOVERNMENTAL AND COMMUNITY RELATIONS COMMITTEE  
MONDAY, AUGUST 5, 2019  
IMMEDIATELY FOLLOWING EXECUTIVE SESSION  
FIRST FLOOR CONFERENCE ROOM 2/3/4/5**

**CALL TO ORDER**

I. Review and Approval of Minutes

*Motion to approve the minutes of the May 6, 2019 and June 3, 2019 meeting.*

II. Partners in Healing – Chaplain Jerald Smith

III. Other

IV. Executive Session (if necessary)

**ADJOURNMENT**

**NOTE: IF A PERSON DECIDES TO APPEAL ANY DECISION MADE BY THE EDUCATION COMMITTEE WITH RESPECT TO ANY MATTER CONSIDERED AT THIS MEETING, HE/SHE WILL NEED A RECORD OF PROCEEDINGS AND, FOR SUCH PURPOSES, MAY NEED TO ENSURE A VERBATIM RECORD OF THE PROCEEDINGS IS MADE AND THAT THE RECORD INCLUDES TESTIMONY AND EVIDENCE UPON WHICH THE APPEAL IS TO BE BASED.**

**PERSONS WITH A DISABILITY WHO NEED A SPECIAL ACCOMMODATION TO PARTICIPATE IN THIS PROCEEDING SHOULD CONTACT MS. LISA CAVALLERO, EXECUTIVE DIRECTOR OF SUPPORT SERVICES, AT 951 NORTH WASHINGTON AVENUE, TITUSVILLE, FLORIDA 32796, AT LEAST FORTY-EIGHT (48) HOURS PRIOR TO THE MEETING. FOR INFORMATION CALL (321) 268-6190 OR (321) 383-9829 (TDD).**

**THIS NOTICE WILL FURTHER SERVE TO INFORM THE PUBLIC THAT MEMBERS OF THE BOARD OF DIRECTORS OF NORTH BREVARD MEDICAL SUPPORT, INC. MAY BE IN ATTENDANCE AND MAY PARTICIPATE IN DISCUSSIONS OF MATTERS BEFORE THE NORTH BREVARD COUNTY HOSPITAL DISTRICT BOARD OF DIRECTORS EDUCATIONAL, GOVERNMENTAL AND COMMUNITY RELATIONS COMMITTEE. TO THE EXTENT OF SUCH DISCUSSION, A JOINT PUBLIC MEETING OF THE NORTH BREVARD COUNTY HOSPITAL DISTRICT, BOARD OF DIRECTORS EDUCATIONAL, GOVERNMENTAL AND COMMUNITY RELATIONS COMMITTEE AND NORTH BREVARD MEDICAL SUPPORT, INC. SHALL BE CONDUCTED.**



**NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
EDUCATIONAL, GOVERNMENTAL AND COMMUNITY RELATIONS  
COMMITTEE**

A regular meeting of the Educational, Governmental and Community Relations Committee of the North Brevard County Hospital District operating Parrish Medical Center was held on May 6, 2019 in the Executive Conference Room, Second Floor. The following members were present:

Billie Fitzgerald, Chairperson  
Herman A. Cole, Jr.  
Elizabeth T. Galfo, M.D.  
Maureen Rupe  
Ashok Shah, M.D.  
Joseph Rojas, M.D.  
George Mikitarian (non-voting)

Member(s) Absent:  
None

A copy of the attendance roster of others present during the meeting is appended to the file copy of these minutes.

**CALL TO ORDER**

Ms. Fitzgerald called the meeting to order at 3:09 p.m.

**REVIEW AND APPROVAL OF MINUTES**

The following motion was made by Dr. Galfo, seconded by Mr. Cole, and approved (6 ayes, 0 nays, 0 abstentions).

***ACTION TAKEN: MOTION TO APPROVE THE MINUTES OF MARCH 4, 2019, AS PRESENTED.***

**HEALTHCARE REGULATIONS OVERVIEW**

Attorney John Kancilia of GrayRobinson, P.A. presented a PowerPoint presentation concerning Healthcare Regulations Fraud and Abuse Update. Mr. Kancilia presented an overview of the Medicare Anti-Kickback Statute, "Stark" Law and False Claims Act and the implications of each for providers such as the Parrish Medical Center and its affiliates. He also discussed several recent cases in which these laws have been applied to hospital operations and transactions. A lively discussion with the Board ensued.

EDUCATIONAL, GOVERNMENTAL AND COMMUNITY RELATIONS  
COMMITTEE

May 6, 2019

PAGE 2

**OTHER**

No other items were presented.

**ADJOURNMENT**

There being no further business to discuss, the meeting adjourned at 3:52 p.m.

Billie Fitzgerald  
Chairperson

**NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
EDUCATIONAL, GOVERNMENTAL AND COMMUNITY RELATIONS  
COMMITTEE**

A regular meeting of the Educational, Governmental and Community Relations Committee of the North Brevard County Hospital District operating Parrish Medical Center was held on June 3, 2019, at 3:00 p.m. in the Executive Conference Room, Second Floor. The following members were present:

Billie Fitzgerald, Chairperson  
Herman A. Cole, Jr.  
Elizabeth T. Galfo, M.D.  
Maureen Rupe  
Ashok Shah, M.D.  
Joseph Rojas, M.D.

Member(s) Absent:

George Mikitarian (non-voting) (excused)

A copy of the attendance roster of others present during the meeting is appended to the file copy of these minutes.

**CALL TO ORDER**

Ms. Fitzgerald called the meeting to order at 3:00 p.m.

**ETHICS AND THE SUNSHINE LAW PRESENTATION**

Mr. Boyles introduced Thomas Wilkes, Esquire, from the firm of GrayRobinson, who presented a PowerPoint presentation and training for the Board concerning Ethics, the Sunshine Law, and the Public Records Law. Mr. Wilkes summarized the ethics rules; described prohibited acts with examples; described voting conflicts with examples; described competing financial interests pointing the Members to examples set forth in the District Bylaws; addressed the propriety of gifts and the disclosure of any gifts; described financial disclosure required of Members of the Board, including what, where and when to disclose; provided an overview of the Sunshine Law and rules most likely applicable to Members of the Board; described permissible closed session meetings; and provided an overview of the Public Records Law and its applicability to the District. Copies of the PowerPoint slides are appended to the file copy of these minutes.

**OTHER**

No other items were presented.

EDUCATIONAL, GOVERNMENTAL AND COMMUNITY RELATIONS  
COMMITTEE  
JUNE 3, 2019  
PAGE 2

**ADJOURNMENT**

There being no further business to discuss, the meeting adjourned at 3:43 p.m.

Billie Fitzgerald  
Chairperson

# Partners in Healing

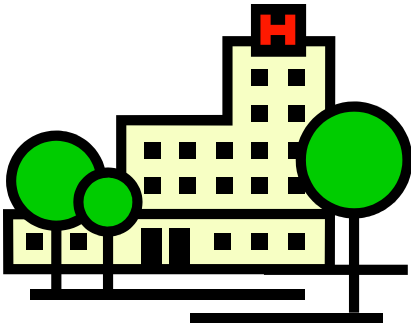
## Parrish HealthCare



*Healing Families – Healing Communities®*

[parrishmed.com](http://parrishmed.com)

# A Continuum of Healing



Hospital

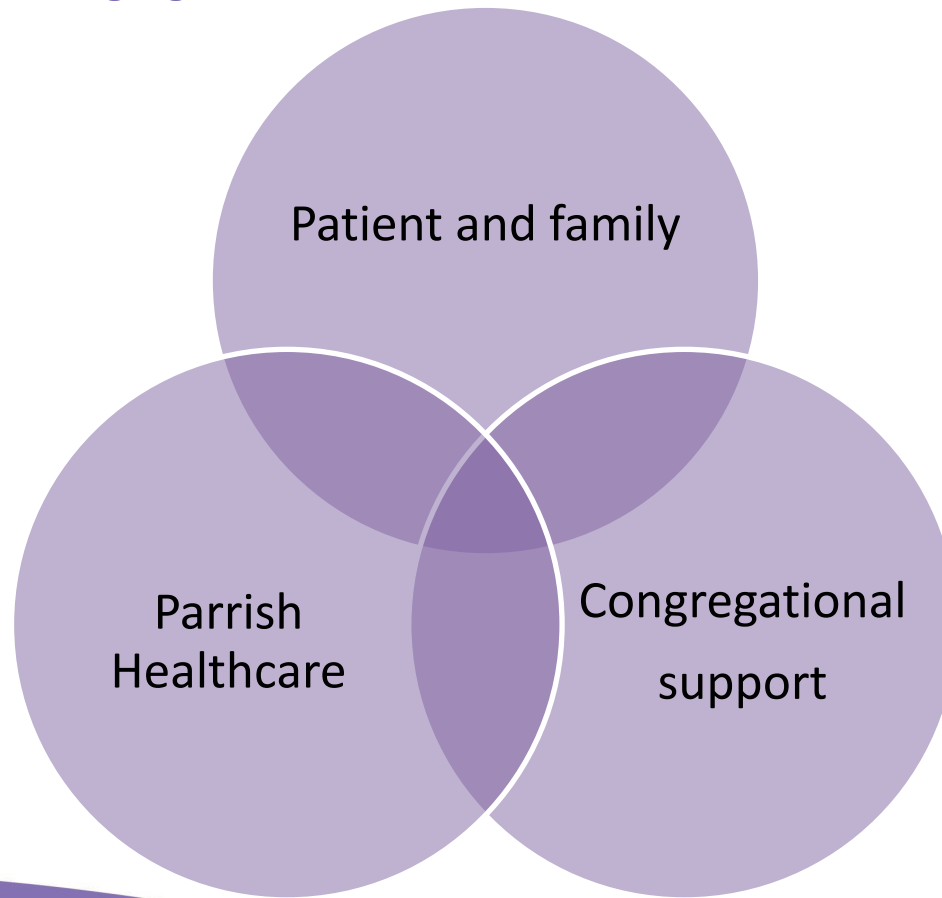


Home



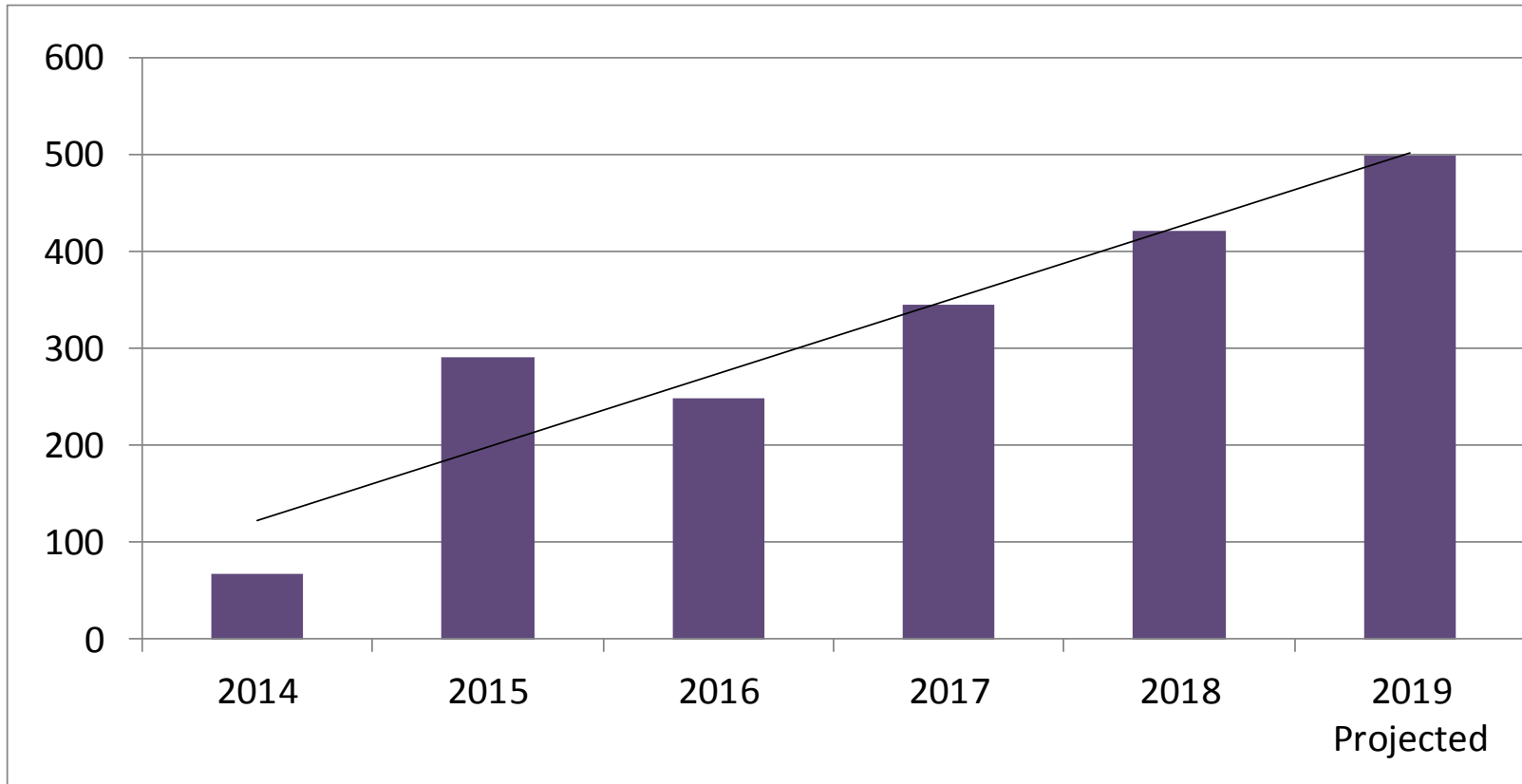
Congregation

# A Team Approach to Care



# Program Growth

## PIH Enrollments





# No One Hungry/Giving Hope

November 2018



# Giving Hope Food Deliveries

## Good Food is Essential to Recovery

- **December 2018** - 5 patients 50 LBS of food
- **First Quarter 2019**
  - 10 Patients
  - 8 additional household members
  - 105 LBS of food

# Giving Hope Food Deliveries

## Good Food is Essential to Recovery

- **Second Quarter 2019**

20 Patients

200 LBS of food

- **July 2019**

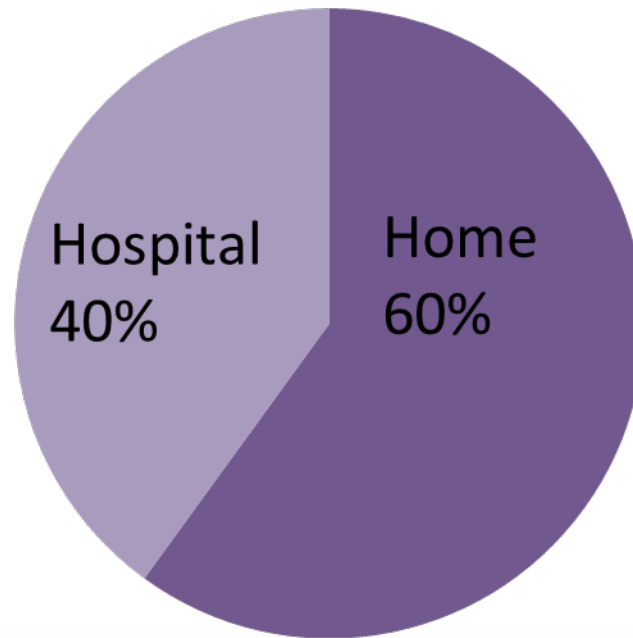
12 Patients and 1 pending discharge from Rehab

170 LBS of food

# Giving Hope Food Deliveries

## Good Food is Essential to Recovery

Deliver to Hospital or Home



# Giving Hope Food Deliveries

## Patient's Bag Contents

- 1 Can of Tuna or Can of Chicken**
- 1 Can No Salt Vegetable**
- 1 Can Low-Sodium Tomato Sauce**
- 1 Lb Pasta**
- 1 Crispy Rice Cereal Bowl**
- 1 Package Low Sugar Instant Oatmeal**
- 2 1% Milk 8oz carton**
- 1 Can Chicken Noodle or Chicken Rice Soup**
- 1 4-pack Jell-O "Sugar Free"**
- 1 2 sleeve Box Saltine**
- 2 Snack Cups Fruit in Water**
- 1 Loaf Fresh Bread**
- 2 Pieces Fresh Fruit i.e.; apple, orange, banana**

*These items approved by Parrish Medical Center's Dietitian. Any substitution of product needs approved by NOH Director.*

# Giving Hope and Partners in Healing

## A Partnership that Works!

### ***“Giving Hope”*** **During Home Recovery**

No One Hungry, in partnership with Parrish Medical Center’s *Partner’s in Healing* program, has provided this nutritional and easy to prepare food as a way of “Giving Hope” for a speedy home recovery.

*“Reducing Hunger...Giving Hope”*

**No One Hungry is a 501c3 Non-Profit Corporation**

Contact us at: **321-567-4408**



**No One Hungry, Inc.**  
**P.O. Box 981**  
**Titusville, FL 32781**



01/07/2019

**DRAFT AGENDA**  
**BOARD OF DIRECTORS MEETING - REGULAR MEETING**  
**NORTH BREVARD COUNTY HOSPITAL DISTRICT**  
**OPERATING**  
**PARRISH MEDICAL CENTER**  
**AUGUST 5, 2019**  
**NO EARLIER THAN 3:00 P.M.,**  
**FOLLOWING THE LAST COMMITTEE MEETING**  
**FIRST FLOOR, CONFERENCE ROOM 2/3/4/5**

**CALL TO ORDER**

- I. Pledge of Allegiance
- II. PMC's Vision – *Healing Families – Healing Communities*
- III. Approval of Agenda
- IV. Review and Approval of Minutes (May 6, 2019 and June 3, 2019)
- V. Recognitions(s)
  - A. Moment of Silence for Dr. Juan Perez – Chaplain Jerald Smith**
  - B. Ms. Rupe, 2019 Women Who Make a Difference Honoree**
  - C. Mr. Jordan, Viera Charter School expansion**
- VI. Open Forum for PMC Physicians
- VII. Public Comments
- VIII. Unfinished Business
- IX. New Business
- X. Medical Staff Report Recommendations/Announcements – Dr. Rojas
  - Resignations – **For Information Only**
    - 1. Richard Lartey, DO (deceased)**
    - 2. Juan Perez, MD (deceased)**
- XI. Public Comments (as needed for revised Consent Agenda)
- XII. Consent Agenda
  - A. Finance Committee
    - 1. Recommend the Board of Directors approve the CSI Master Lease and Schedule 1 as presented.
    - 2. Recommend the Board of Directors approve the FY 2020 Capital Budget in the amount of \$2,000,000.

3. Recommend the Board of Directors approve the adjusted fiscal year 2020 Major Volume Assumptions and the 2020 Operating Budget with a hospital operating margin of 5.6% and total EBIDA margin of 6.6 % as presented.

B. Executive Committee

1. Motion to approve the Resolution of the Board of Directors of the North Brevard County Hospital District DBA Parrish Medical Center regarding the amendment and restatement of the Code of Business Ethics and Business Conduct of the North Brevard County Hospital District d/b/a Parrish Medical Center, as presented.

XI. Committee Reports

- A. Quality Committee – Mr. Cole
- B. Budget and Finance Committee – Mr. Retz
- C. Executive Committee – Mr. Jordan
- D. Educational, Governmental and Community Relations Committee – Ms. Fitzgerald
- E. Planning, Physical Facilities & Properties Committee (Did Not Meet)

XII. Process and Quality Report – Mr. Mikitarian

- A. Other Related Management Issues/Information
- B. Hospital Attorney - Mr. Boyles

XIII. Other

XIV. Closing Remarks – Chairman

XV. Executive Session (if necessary)

XVI. Open Forum for Public

**ADJOURNMENT**

NOTE: IF A PERSON DECIDES TO APPEAL ANY DECISION MADE BY THE BOARD WITH RESPECT TO ANY MATTER CONSIDERED AT THIS MEETING, HE/SHE WILL NEED A RECORD OF PROCEEDINGS AND, FOR SUCH PURPOSES, MAY NEED TO ENSURE A VERBATIM RECORD OF THE PROCEEDINGS IS MADE AND THAT THE RECORD INCLUDES TESTIMONY AND EVIDENCE UPON WHICH THE APPEAL IS TO BE BASED.

PERSONS WITH A DISABILITY WHO NEED A SPECIAL ACCOMMODATION TO PARTICIPATE IN THIS PROCEEDING SHOULD CONTACT MS. LISA CAVALLERO, EXECUTIVE DIRECTOR OF SUPPORT SERVICES, AT 951 NORTH WASHINGTON AVENUE, TITUSVILLE, FLORIDA 32796, AT LEAST FORTY-EIGHT (48) HOURS PRIOR TO THE MEETING. FOR INFORMATION CALL (321) 268-6190 OR (321) 383-9829 (TDD).

THIS NOTICE WILL FURTHER SERVE TO INFORM THE PUBLIC THAT MEMBERS OF THE BOARD OF DIRECTORS OF NORTH BREVARD MEDICAL SUPPORT, INC. MAY BE IN ATTENDANCE AND MAY PARTICIPATE IN DISCUSSIONS OF MATTERS BEFORE THE NORTH BREVARD COUNTY HOSPITAL DISTRICT BOARD OF DIRECTORS. TO THE EXTENT OF SUCH DISCUSSIONS, A JOINT PUBLIC MEETING OF THE NORTH BREVARD COUNTY HOSPITAL DISTRICT AND NORTH BREVARD MEDICAL



**NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
BOARD OF DIRECTORS – REGULAR MEETING**

A regular meeting of the Board of Directors of the North Brevard County Hospital District operating Parrish Medical Center was held on May 6, 2019 in Conference Room 2/3/4/5, First Floor. The following members were present:

Herman A. Cole, Jr., Chairman  
Stan Retz  
Peggy Crooks  
Billie Fitzgerald  
Robert L. Jordan, Jr., C.M.  
Elizabeth Galfo, M.D. (4:06)  
Maureen Rupe  
Ashok Shah, M.D

Member(s) Absent:

Jerry Noffel (excused)

A copy of the attendance roster of others present during the meeting is appended to the file copy of these minutes.

**CALL TO ORDER**

Mr. Cole called the meeting to order at 4:05p.m.

**PLEDGE OF ALLEGIANCE**

Mr. Cole led the Board of Directors, staff and public in reciting the Pledge of Allegiance.

**PMC'S VISION – *Healing Families – Healing Communities*®**

Mr. Cole led the Board of Directors, staff and public in reciting PMC's Vision – *Healing Families – Healing Communities*®.

**APPROVAL OF AGENDA**

Mr. Cole asked for approval of the agenda in the packet. Discussion ensued and the following motion was made by Mr. Jordan, seconded by Mr. Retz and approved (7 ayes, 0 nays, 0 abstentions). Dr. Galfo was not present at the time the vote was taken.

***ACTION TAKEN: MOTION TO APPROVE THE AGENDA AS PRESENTED.***

**REVIEW AND APPROVAL OF MINUTES**

Discussion ensued and the following motion was made by Mr. Jordan, seconded by Mr. Retz and approved (8 ayes, 0 nays, 0 abstentions).

***ACTION TAKEN: MOTION TO APPROVE THE MARCH 4, 2019 MEETING MINUTES AS PRESENTED.***

**RECOGNITIONS**

Mr. Cole noted this was National Nurses Week and shared a proclamation for nurses signed by the Board of Directors. Mr. Cole expressed his appreciation for the fantastic group of nurses at PMC, thanking them for all that they do.

Mr. Crooks shared that she recently attended an event sponsored by Gray Robinson, and took this time to thank Mr. Boyles and Gray Robinson for their community involvement, noting she is proud to have them as partners with Parrish Medical Center. Mr. Boyles stated it has been an honor to work with Parrish Medical Center as they are such an important part of North Brevard.

**OPEN FORUM FOR PMC PHYSICIANS**

There were no physician comments.

**PUBLIC COMMENTS**

There were no public comments.

**UNFINISHED BUSINESS**

There was no unfinished business.

**NEW BUSINESS**

There was no new business.

**MEDICAL STAFF REPORT RECOMMENDATIONS/ANNOUNCEMENTS**

Dr. Rojas summarized the motion from the Medical Executive Committee seeking approval of the Medical Staff Rules and Regulations. Discussion ensued, and the following motion was made by Ms. Crooks, seconded by Mr. Jordan and approved (8 ayes, 0 nays, 0 abstentions).

***ACTION TAKEN: MOTION TO APPROVE THE MEDICAL STAFF RULES & REGULATIONS AS PRESENTED.***

Resignations – **For Information Only**

1. Sean Crowley – Emergency Medicine

**PUBLIC COMMENTS**

There were no public comments regarding the revised consent agenda.

**CONSENT AGENDA**

Discussion ensued regarding the consent agenda, and the following motion was made by Ms. Crooks, seconded by Mr. Jordan and approved (8 ayes, 0 nays, 0 abstentions).

***ACTION TAKEN: MOTION TO APPROVE THE FOLLOWING REVISED  
CONSENT AGENDA ITEMS:***

**A. Finance**

1. Recommend the Board of Directors approve the Resolution for the Parrish Medical Center Pension Plan and Trust Agreement as presented.
2. Recommend the Board of Directors approve the Scout Investments Resolution to add Kent Bailey, VP Finance, as an authorized signer.
3. Recommend the Board of Directors approve the renewal of membership for Michael Allen for a three-year term from July 1, 2019 through June 30, 2022.
4. Recommend the Board of Directors approve the renewal of membership for Julia Reyes-Mateo for a three-year term from July 1, 2019 through June 30, 2022.
5. Recommend the Board of Directors approve the Moore Stephens Lovelace Engagement Letter for the FY19 as presented
6. **Recommend the Board of Directors approve the rebalancing of the investments held in the Operating account to reduce the allocation to equity by 10% and invest the proceeds into a Short Term Fixed Income Investment and further to authorize the Budget and Finance Committee Chairperson, the hospital CEO and the hospital Vice President of Finance to redeploy 10% back into equities if market conditions are appropriate after consulting with Anderson Financial Partners.**

## **COMMITTEE REPORTS**

### **Quality Committee**

Mr. Cole reported all items were covered during the meeting.

### **Budget and Finance Committee**

Mr. Retz reported all items were covered during the meeting.

### **Executive Committee**

Mr. Jordan reported all items were covered during the meeting.

### **Educational, Governmental and Community Relations Committee**

Ms. Fitzgerald reported the Planning Committee did not meet.

### **Planning, Physical Facilities and Properties Committee**

Mr. Jordan reported the Planning Committee did not meet.

## **PROCESS AND QUALITY REPORT**

Mr. Mikitarian took this time to recognize and congratulate care partners on Parrish Medical Center's recent Cancer Care Certification. Mr. Loftin added he would like to thank everyone involved, noting the surveyor shared very positive comments.

Mr. Mikitarian also recognized LeeAnn Cottrell for her work during the Downtime Data Conversion. Mr. Loftin added that LeeAnn and team along with IT were onsite for 28 hours working through any issues. He noted they did a remarkable job as patient safety and patient care were uninterrupted.

### **Hospital Attorney**

Legal counsel had no report.

### **OTHER**

No other business was discussed.

## **CLOSING REMARKS**

There were no closing remarks.

BOARD OF DIRECTORS  
MAY 6, 2019  
PAGE 5

**OPEN FORUM FOR PUBLIC**

No members of the public spoke.

**ADJOURNMENT**

There being no further business to discuss, the meeting adjourned at 4:17 p.m.

Herman A. Cole, Jr.  
Chairman

**NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
BOARD OF DIRECTORS – REGULAR MEETING**

A regular meeting of the Board of Directors of the North Brevard County Hospital District operating Parrish Medical Center was held on June 3, 2019 in Conference Room 2/3/4/5, First Floor. The following members were present:

Herman A. Cole, Jr., Chairman  
Stan Retz  
Jerry Noffel  
Billie Fitzgerald  
Robert L. Jordan, Jr., C.M.  
Elizabeth Galfo, M.D.  
Maureen Rupe  
Ashok Shah, M.D

Member(s) Absent:

Peggy Crooks (excused)

A copy of the attendance roster of others present during the meeting is appended to the file copy of these minutes.

**CALL TO ORDER**

Mr. Cole called the meeting to order at 3:00p.m.

**PLEDGE OF ALLEGIANCE**

Mr. Cole led the Board of Directors, staff and public in reciting the Pledge of Allegiance.

**PMC'S VISION – *Healing Families – Healing Communities*®**

Mr. Cole led the Board of Directors, staff and public in reciting PMC's Vision – *Healing Families – Healing Communities*®.

**APPROVAL OF AGENDA**

Mr. Cole asked for approval of the agenda in the packet. Discussion ensued and the following motion was made by Dr. Galfo, seconded by Mr. Jordan and approved (8 ayes, 0 nays, 0 abstentions).

***ACTION TAKEN: MOTION TO APPROVE THE AGENDA AS PRESENTED.***

**REVIEW AND APPROVAL OF MINUTES**

Discussion ensued and the following motion was made by Mr. Jordan, seconded by Dr. Shah and approved (8 ayes, 0 nays, 0 abstentions).

***ACTION TAKEN: MOTION TO APPROVE THE APRIL 1, 2019 MEETING MINUTES AS PRESENTED.***

**RECOGNITIONS**

Mr. Loftin and Ms. Gutierrez introduced the 2019 Karla Foster scholarship recipient, Parrish Medical Center Nurse Emily Hurley. Mr. Loftin presented Ms. Hurley with her certificate of award and check for three thousand dollars. Ms. Hurley addressed the Board, thanking them and Parrish Medical Center for the opportunity to continue her education.

**OPEN FORUM FOR PMC PHYSICIANS**

There were no physician comments.

**PUBLIC COMMENTS**

There were no public comments.

**UNFINISHED BUSINESS**

There was no unfinished business.

**NEW BUSINESS**

There was no new business.

**MEDICAL STAFF REPORT RECOMMENDATIONS/ANNOUNCEMENTS**

Resignations – **For Information Only**

1. Jennifer Traverso, APRN – Gastroenterology
2. Kathryn Brennick, DO – Hospitalist

**PUBLIC COMMENTS**

There were no public comments regarding the revised consent agenda.

**CONSENT AGENDA**

Discussion ensued regarding the consent agenda, and the following motion was made by Mr. Jordan, seconded by Ms. Fitzgerald and approved (8 ayes, 0 nays, 0 abstentions).

***ACTION TAKEN: MOTION TO APPROVE THE FOLLOWING REVISED  
CONSENT AGENDA ITEMS:***

**A. Finance**

1. Recommend the board of directors to declare the equipment listed in the requests for disposal of obsolete or surplus property forms as surplus and obsolete and dispose of same in accordance with FS274.04 and FS274.96.

**COMMITTEE REPORTS**

**Quality Committee**

Mr. Cole reported all items were covered during the meeting.

**Budget and Finance Committee**

Mr. Retz reported all items were covered during the meeting.

**Executive Committee**

Mr. Jordan reported all items were covered during the meeting.

**Educational, Governmental and Community Relations Committee**

Ms. Fitzgerald reported all items were covered during the meeting.

**Planning, Physical Facilities and Properties Committee**

Mr. Jordan reported the Planning Committee did not meet.

**PROCESS AND QUALITY REPORT**

No additional information was presented.

**Hospital Attorney**

Legal counsel had no report.

**OTHER**

No other business was discussed.



**CLOSING REMARKS**

Mr. Cole noted there is no Board meeting in July and will see everyone at the August meeting.

**OPEN FORUM FOR PUBLIC**

No members of the public spoke.

**ADJOURNMENT**

There being no further business to discuss, the meeting adjourned at 3:52 p.m.

Herman A. Cole, Jr.  
Chairman

**NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
MEDICAL EXECUTIVE COMMITTEE MEETING – REGULAR**

**June 18, 2019**

**Present:** D. Barimo , G. Cuculino, M. Sorbello, V. Hate', C. Manion, B. Mathews, K. Modi, A. Ochoa, R. Patel, J. Rojas, V. Williams, G. Mikitarian, H. Cole, E. Head  
**Absent:** P. Carmona, M. Storey, P. Tronetti

The regular meeting of the Medical Executive Committee of the North Brevard County Hospital District operating Parrish Medical Center was held June 18, 2019, at 5:30 PM in the Conference Center. A quorum was determined to be present.

**CALL TO ORDER**

Dr. Joseph Rojas, called the meeting to order at 5:35 pm.

**REVIEW AND APPROVAL OF MINUTES**

The following motion was made, seconded, and unanimously approved:

*ACTION TAKEN:* Motion to approve the previous meeting minutes (May 21, 2019) as written and distributed.

**UNFINISHED BUSINESS**

**Hospital Consumers Assessment of Healthcare Providers and Services (HCAHPS) --**

The Committee reviewed the current Hospital Consumers Assessment of Healthcare Providers and Services (HCAHPS) report.

*ACTION TAKEN:* Noted by the Committee. A request was made to see a run chart of trended physician HCAHPS metrics over the past 5 years. MSS office will compile for the next MEC meeting.

**Quality**

The Committee reviewed the Board Quality minutes (April 1, 2019), and the Quality Value Dashboard for June 2019. Copies are appended to the file copy of these minutes.

*ACTION TAKEN:* Noted by the Committee.

**FOLLOW-UP MEC ITEMS**

- A. Lumbar Puncture policy- the ad hoc committee provided edits that were reviewed. Discussion ensued and the following action was taken:

*ACTION TAKEN:* Ad hoc committee will make additional edits to the policy and they will be submitted for review at the next MEC meeting.

**NEW BUSINESS-** None

**INFORMATION/EDUCATION:**

**Joint Commission Perspectives – June 2019** – Information was emailed for review prior to meeting.

*ACTION TAKEN:* Noted by Committee

**Information /Education items to the Medical Staff to Be Noted in Minutes –**

1. **Meditech Enhancements** – Information was emailed for review prior to meeting.

*ACTION TAKEN:* Noted by Committee.

**REPORT FROM ADMINISTRATION:** Nothing to report.

**REPORT FROM THE BOARD:** Nothing to report.

**CONSENT AGENDA:**

Discussion ensued and a motion was made, seconded, and approved unanimously:

- A. Policy: 9500-6003- Abbreviations Management
- B. Policy: 9500-6005- Administrative Closure of Incomplete Medical Records
- C. Policy: 9500-2018- Automated Dispensing Machine
- D. E174: Cesarean Section – Preoperative. Blood Products – Type and Screen Only has been added to this Order set. Requested by Melinda Hodges.
- E. E290: L&D Admission. Blood Products – Type and Screen Only has been added to this Order set. Requested by Melinda Hodges. Dr. Hate approved at OB/GYN but did not sign

F. E3479: Neurosurgery PCA orders. Approval to inactivate as we have a standard PCA order set that is used. Approved by Surgery June 2019.

**MEDICAL STAFF RESIGNATIONS:**

A. Richard Lartey, DO (Emergency Medicine) 6/10/19 (deceased)

*ACTION TAKEN:* Noted by Committee.

**Medical Staff Leave:**

A. Return from leave of absence- Benjamin Nettleton, MD (Family Medicine/Refer and Follow)- 5/15/19-5/30/19

B. Return from leave of absence- Jibril Skaden, MD (Family Medicine/Refer and Follow)- 5/8/19-6/17/19

*ACTION TAKEN:* Accepted by Committee.

**General Medical Staff meeting:**

A. June 4, 2019

*ACTION TAKEN:* Noted by Committee

**COMMITTEE REPORTS:**

A. Cancer Committee- 6/4/19

*ACTION TAKEN:* Noted by Committee.

**CLINICAL DEPARTMENT REPORTS:**

A. Surgery- 6/4/19

*ACTION TAKEN:* Noted by Committee.

**OPEN FORUM**

Discussion ensued regarding the creation of an Advanced Practice Clinician (APC)/Allied Health Professionals (AHP) Committee to discuss clinical and operational items.

*ACTION TAKEN:* Noted by Committee. No action taken.

Discussion ensued regarding lab results that are faxed to the ordering provider. Sometimes fax machines are not working and they do not receive results.

*ACTION TAKEN:* Noted by Committee. President/CEO will discuss with the Lab.

Discussion ensued regarding the peer review data that is to be sent to department meetings.

*ACTION TAKEN:* Noted by Committee. President/CEO will discuss with the Risk Manager.

Discussion ensued regarding the “manage transfer” workflow in Meditech for orders.

*ACTION TAKEN:* Dr. Cuculino shared a screenshot of the workflow for orders for patients admitted from the ED. Noted by Committee.

**ADJOURNMENT**

There being no further business, the meeting adjourned to the executive session at 6:19 PM.

Joseph Rojas, MD  
President/Medical Staff

Christopher Manion, MD  
Secretary - Treasurer

**NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
MEDICAL EXECUTIVE COMMITTEE MEETING – REGULAR  
July 16, 2019**

**Present:** J. Rojas, M. Storey, P. Tronetti, D. Barimo, P. Carmona, G. Cuculino, V. Hate, C. Manion, B. Mathews, K. Modi, A. Ochoa, R. Patel, M. Sorbello, V. Williams, E. Loftin (for G. Mikitarian), H. Cole  
**Absent:**

The regular meeting of the Medical Executive Committee of the North Brevard County Hospital District operating Parrish Medical Center was held July 16, 2019, at 5:30 PM in the Conference Center. A quorum was determined to be present.

**CALL TO ORDER**

Dr. Joseph Rojas, called the meeting to order at 5:34 pm.

**REVIEW AND APPROVAL OF MINUTES**

The following motion was made, seconded, and unanimously approved:

*ACTION TAKEN:* Motion to approve the previous meeting minutes (June 18, 2019) as written and distributed.

**UNFINISHED BUSINESS**

**Quality**

There were no Quality Minutes to review at this meeting.

*ACTION TAKEN:* Noted by the Committee.

**FOLLOW-UP MEC ITEMS**

A. Lumbar Puncture policy- The policy edits were reviewed as presented.

*ACTION TAKEN:* Ad hoc committee will make additional edits to the verbiage in the policy and they will be submitted for review at the next MEC meeting.

B. Treasurer's Report was presented.

*ACTION TAKEN:* Noted by Committee.

**NEW BUSINESS**

Quality Review – Quality Data will now be presented at all department meetings for monitoring trends and performance improvement. Data was introduced and reviewed with the MEC.

*ACTION TAKEN:* Noted by Committee. Request that future charts be made larger for easier visibility.

**INFORMATION/EDUCATION:**

**Joint Commission Perspectives – June 2019** – Information was emailed for review prior to meeting.

*ACTION TAKEN:* Noted by Committee

**Information /Education items to the Medical Staff to Be Noted in Minutes –**

1. **Meditech Enhancements** – Information was emailed for review prior to meeting.

*ACTION TAKEN:* Noted by Committee.

**REPORT FROM ADMINISTRATION:** Nothing to report.

**REPORT FROM THE BOARD:** Discussed an upcoming meeting with Board Chair and local EMS leadership.

*ACTION TAKEN:* Noted by Committee.

**CONSENT AGENDA:**

Discussion ensued and a motion was made, seconded, and approved unanimously:

A. E1074 Intent to Discharge. Approval to add RT Exercise Oximetry order. Requested by Jenn Quigg on behalf of Dr. Ochoa. Approved at Department of Medicine July 2019.

B. E3435 Eclampsia, Pre-Eclampsia, and Hypertension in Pregnancy. This order set was previously titled Magnesium Sulfate – Eclampsia and Pre-Eclampsia. Several edits have been made to this order set. Requested by Melinda Hodges, approved at OB/GYN April 2019.

- C. E1213: Postpartum Hemorrhage Order Set. Multiple revisions have been made. Requested by Melinda Hodges, approved at OB/GYN April 2019.
- D. E3510: Postpartum Hemorrhage Protocol. Requested by Melinda Hodges. Multiple revisions have been made. Requested by Melinda Hodges, approved at OB/GYN April 2019.
- E. E672: Labor Epidural Analgesia. Approval to default catheter type to Foley Catheter. Requested by Anesthesiology. Approved by Anesthesiology July 2019.
- F. E760: Pre-Assessment Evaluation and Post-Op Note. Dr. Williams has requested this be deleted as they are using a different form for this. Approved by Anesthesiology July 2019.
- G. E3361ab: ED Acute Stroke Protocol. Numerous edits have been made to this order set. Requested by Dr. Ratzel/Stroke Committee. Emergency Medicine providers have approved and signed off.
- H. E1183. Medication Uses and Side Effects: Stroke Meds. Requesting to Inactivate as this is no longer used per Stroke Committee and Pharmacy. Approved at Department of Medicine July 2019.
- I. E1095ad Hemorrhagic Stroke. Reviewed by Stroke team and several edits have been made.
- J. E3340ab tPA (Activase) Administration. Reviewed by Stroke team and several edits have been made.
- K. E784ad tPA (Activase) Admission Order. Reviewed by Stroke team and several edits have been made.
- L. E774ab Acute Stroke Evaluation Protocol. Reviewed by Stroke team and several edits have been made.
- M. E785ad Ischemic Stroke / TIA. Reviewed by Stroke team and several edits have been made.
- N. E287ad. Hemodialysis Standing Orders. Several edits have been made, requested by Imee Perez.

**MEDICAL STAFF RESIGNATIONS:**

A. Juan Perez, MD (June 30, 2019) (deceased)

*ACTION TAKEN:* Noted by Committee. A flyer will be distributed to inform medical staff of his passing.

**MEDICAL STAFF LEAVE:**

A. Begin leave of absence- Laura Costa, APRN- 7/2/19-8/7/19

*ACTION TAKEN:* Accepted by Committee.

**COMMITTEE REPORTS:**

A. EMR Governance- 6/20/19

*ACTION TAKEN:* Noted by Committee. A request has been made to have EMR Clinical Analyst come to department meetings to discuss resources and tools within the EMR and how to utilize them to improve efficiency.

A. Pharmacy and Therapeutics- 6/26/19

*ACTION TAKEN:* Noted by Committee.

**CLINICAL DEPARTMENT REPORTS:**

A. Medicine- 7/16/19 – No peer review.

*ACTION TAKEN:* Noted by Committee.

**OPEN FORUM**

An issue was reported with non-medical staff parking in the Medical Staff Only parking spaces.

*ACTION TAKEN:* Noted by Committee. Discussion ensued regarding options to specify parking is Physician Only. This will be addressed by Administration.

Radiology reports include a disclaimer regarding potential dictation anomalies. This does not instill confidence in the accuracy of the reports.

*ACTION TAKEN:* Noted by Committee. Discussion ensued; this will be taken back to Diagnostic Imaging department for review.

Some patients are being referred to BHA rather than to the primary care physician.

*ACTION TAKEN:* Noted by Committee. This will be discussed in ER Department.

Discussion ensued on the process for peer reviews when departments meet quarterly and MSRC meets monthly.  
*ACTION TAKEN:* Noted by Committee. Administration and Risk Management to develop a definitive plan for timely reviews.

**ADJOURNMENT**

There being no further business, the meeting adjourned to the executive session at 6:48 PM.

Joseph Rojas, MD  
President/Medical Staff

Christopher Manion, MD  
Secretary - Treasurer