

## **QUALITY COMMITTEE**

Herman A. Cole, Jr. (ex-officio)  
Peggy Crooks  
Billie Fitzgerald  
Elizabeth Galfo, M.D.  
Robert L. Jordan, Jr., C.M.  
George Mikitarian (non-voting)  
Jerry Noffel  
Stan Retz, CPA  
Maureen Rupe  
Ashok Shah, M.D.  
Pamela Tronetti, D.O., President/Medical Staff  
Patricia Alexander, M.D., Designee  
Greg Cuculino, M.D.  
Christopher Manion, M.D., Designee  
Aluino Ochoa, M.D., Designee

**NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
QUALITY COMMITTEE  
MONDAY, JUNE 4, 2018  
NOON  
EXECUTIVE CONFERENCE ROOM**

### **CALL TO ORDER**

I. Approval of Minutes

*Motion to approve the minutes of the April 2, 2018 meeting.*

II. Vision Statement

III. Public Comment

IV. Dashboard Review

a. HCAHPS Detail

V. CPOE Update

VI. Safe Opioid Program

VII. Mission Control

VIII. Other

IX. 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  
QUALITY COMMITTEE**

A regular meeting of the Quality Committee of the North Brevard County Hospital District operating Parrish Medical Center was held on April 2, 2018 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.,  
Christopher Manion, M.D.  
Jerry Noffel  
Aluino Ochoa, M.D. (12:27 p.m.)  
Stan Retz, CPA (12:47 p.m.)  
Maureen Rupe  
Patricia Alexander, M.D.  
Ashok Shah, M.D.  
Pamela Tronetti, D.O., President/Medical Staff

Members absent:

George Mikitarian (non-voting) excused  
Gregory Cuculino M.D. excused

**CALL TO ORDER**

Mr. Cole called the meeting to order at 12:04 p.m.

**REVIEW AND APPROVAL OF MINUTES**

Discussion ensued and the following motion was made by Mr. Cole, seconded by Dr. Shah and approved (11 ayes, 0 nays, 0 abstentions). Mr. Retz and Dr. Ochoa were not present when the vote was taken.

***ACTION TAKEN: MOTION TO APPROVE THE FEBRUARY 5, 2018 MEETING MINUTES, AS PRESENTED.***

**PUBLIC COMMENTS**

None

### **VISION STATEMENT**

Mr. Loftin summarized the committee's vision statement.

### **QUALITY DASHBOARD REVIEW**

Mr. Loftin reviewed the Value Dashboard included in the agenda packet and discussed each indicator score as it relates to clinical quality and cost. Copies of the PowerPoint slides presented are appended to the file copy of these minutes.

### **CITY LIAISON**

Mr. Scott Larese updated the committee on the Indian River Lagoon Project, Bike Trail Project, Baffle Box construction and addressed questions from the committee.

### **PATIENT SAFETY MOVEMENT FOUNDATION**

Mr. Loftin gave an overview of the Patient Safety Movement Foundations Actionable Patient Safety Solutions and highlighted the criteria.

### **TOP 10 2018 PATIENT SAFETY RISKS**

Mr. Loftin reviewed with the committee the 2018 patient safety risks and discussed diagnostic errors, workarounds and leadership engagement in patient safety.

### **SAFE OPIOID PROGRAM**

Mr. Loftin discussed the newly created HB 21 which is expected to be signed into law in July 2018. He noted mandatory physician training, management of acute pain versus chronic pain and a three day limit on prescribed opioids.

### **OTHER**



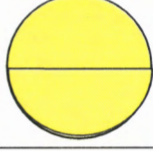
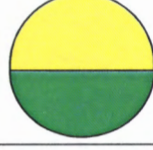
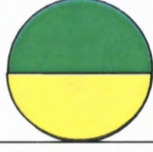
There was no other business brought before the committee.

### **ADJOURNMENT**

There being no further business to discuss, the meeting adjourned at 1:11p.m.

Herman A. Cole, Jr.  
Chairman

# Board Value Dashboard: June 2018

Core Measures*	
Hospital Acquired Conditions	
Patient Experience	
E.D. Care	
Readmission	

## CMS/IHI Triple Aim

- Better Care For Individuals
- Better Health for Populations
- Lower Costs Through Improvement

**Value= Quality/Cost**

(Most current 3 months of data; February, March, April)

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PMC  
Board Quality & Safety  
Committee

Value Dashboard

June 2018



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# Agenda

1. Vision Statement
2. Board Dashboard
  1. HCAHPS detail
3. CPOE Update
4. Safe Opioid Program
5. Mission Control

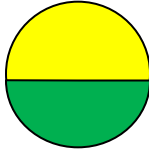
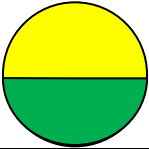
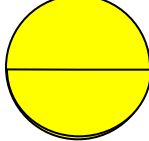
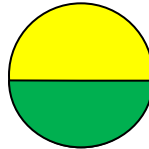
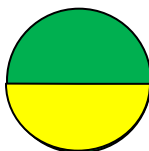
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# Quality Committee Vision Statement

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



# Board Value Dashboard: June 2018

Core Measures*	
Hospital Acquired Conditions	
Patient Experience	
E.D. Care	
Readmission	

## CMS/IHI Triple Aim

- Better Care For Individuals
- Better Health for Populations
- Lower Costs Through Improvement

**Value= Quality/Cost**

(Most current 3 months of data; February, March, April)





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# Updated May 2018

## What's New

July – September 2017 has been removed.

October to December 2017 is in final status.

January to March 2018 is in final status.

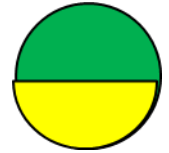
April to June 2018 is in concurrent status.

Updated Hospital compare data.



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# 1. Core Measures 2018



Conditions:

Sepsis

VTE

Stroke

Emergency Department Treatment Times

Influenza Immunization

Perinatal Care



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# FY 20/ CY 18 Core Measures

Indicator	Hospital Compare 90 <sup>th</sup> Percentile	Hospital Compare (Oct 16 – Sep 17)	Vizient Top Quartile	Vizient Report (APR 16 – Sep 17)	Final Oct – Dec 2017	Final Jan – Mar 2018	Concurrent Apr – June 2018
Stroke	-	-	96%	92%	97%	97%	100%
Immunization	100%	96%	99%	97%	97%	99%	N/A
Perinatal Care	100%	100%	96%	100%	100%	100%	100%
VTE	100%	100%	95%	100%	100%	100%	100%
ED-1 (minutes)	169	332	294	462	313	350	303
ED-2 (minutes)	35	196	123	319	170	187	155
Sepsis	76%	64%	55%	62%	64%	68%	44%

\*Immunization – Influenza only

\*VTE – hospital acquired only

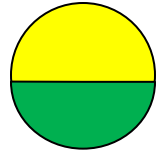
\*Stroke measures reported to TJC only.



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# 1. Core Measures

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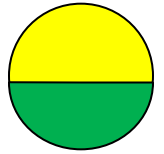


- ❑ Performance goals
  - ✓ Top 10% nationally for:
    - Overall (“bundle”) scores
    - Scores on individual components
  - ✓ No unresolved sentinel events
  - ✓ Compliance with related care processes

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# 1. Core Measures

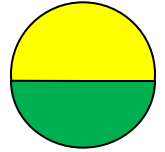
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## Quality Dashboard Scoring Criteria

- ❑ Green: All bundle and component scores in top 10%; no unresolved sentinel event or process variation
- ❑ Yellow: All bundle and component scores in top quartile; no unresolved sentinel event; minor unresolved process variation
- ❑ Red: Score(s) below top quartile and/or unresolved sentinel event and/or major process variation

# 1. Core Measures



## Cost Dashboard Scoring Criteria

Ratio of cost versus Medicare reimbursement for HF, AMI, PN/COPD/TJ\*

- ❑ Green: Cost within 90% of reimbursement
- ❑ Yellow: Cost within 75%
- ❑ Red: Cost below 75%

	Cost	DRG Payment	Ratio
HF/AMI/PN/ COPD/TJ <sup>1</sup>	\$9984	\$8,921	89%

1- Average/case

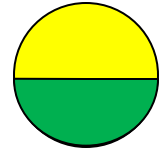
Source – Internal Cost/Reimbursement Review-TR and Treo



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# 2. Hospital Acquired Conditions

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## □ Conditions

### □ Domain 1-

- PSI-90 Complication/patient safety for selected indicators (composite)
- PSI-3 Pressure ulcer rate
- PSI-6 Iatrogenic pneumothorax, adult
- PSI-8 Postoperative hip fracture rate
- PSI-9 Perioperative hemorrhage or hematoma
- PSI-10 Postoperative acute kidney injury requiring dialysis
- PSI-11 Postoperative respiratory failure rate
- PSI-12 Post-operative pulmonary embolism (PE) or deep vein thrombosis (DVT)
- PSI-13 Postoperative sepsis rate
- PSI-14 Postoperative wound dehiscence
- PSI-15 Accidental puncture or laceration

Source – Internal Review (iCare) – AHRQ, TR,TJC

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## ❑ Domain 2-

- ❑ CLABSI Central line associate bloodstream infections
- ❑ CAUTI Catheter associated urinary tract infections
- ❑ SSI SSI-colon surgery
- ❑ SSI SSI-abdominal hysterectomy
- ❑ MRSA MRSA bacteremia
- ❑ CDI Clostridium Difficile (C.Diff)

## ❑ Processes: Clinical indication/assessment documentation



# FY 19/ CY 17 Domain 1/PSI-90

Indicator	Leapfrog Best Perform Rate	Hospital Compare National Rate	PMC Current Hospital Compare Data (July 14-Sept 15)	Concurrent February - April 2018 Observed Occurrences
PSI-90 Composite Rate	N/A	1.00	0.93	Unable to give composite rate
PSI # 3 Occurrence	0.03	0.26	0.12	0
PSI # 6 Occurrence	0.19	0.40	0.34	0
PSI # 8 Occurrence	N/A	0.10	0.10	1
PSI # 9 Occurrence	N/A	4.78	4.28	1
PSI # 10 Occurrence	N/A	1.12	1.09	0
PSI # 11 Occurrence	2.13	11.89	12.28	1
PSI # 12 Occurrence	1.39	4.35	4.46	0
PSI # 13 Occurrence	N/A	5.94	5.06	0
PSI # 14 Occurrence	1.18	2.26	2.13	0
PSI #15 Occurrence	0.32	0.88	0.85	0



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# Information regarding PSI Occurrences

Zero in February (validated)

2 in March (validated)

- PSI # 9 (Post op hemorrhage)
- PSI # 11 (Post of respiratory failure)

1 in April (**not** validated)

- PSI # 8 (Fractured hip from fall in hospital)



# FY 19/ CY 17 Domain 2/HAI

Indicator	Hospital Compare Best Perform Rate	Hospital Compare National Rate (4Q15-3Q16)	PMC Current Hospital Compare Data (4Q15- 3Q16)	Concurrent February – April 2018 Observed Occurrences
<b>Domain 2: CDC NHSN measures</b>	SIR rate	SIR rate	SIR rate	
CAUTI	0.0000	0.949	0.247	1
CLABSI	0.0000	0.941	0	0
SSI	0.0000	0.946	0	0
MRSA	0.0000	0.959	2.967	0
CDI	0.1280	0.941	1.066	1

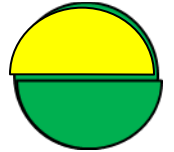


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# 2. Hospital Acquired Conditions

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## Performance Goals



- ❑ No infections
- ❑ No falls with harm or bed sores
- ❑ Compliance with major care processes

Source – Goals established from IHI and CMS standards

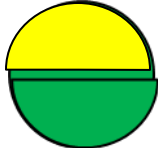


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# 2. Hospital Acquired Conditions

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## Quality Dashboard Scoring Criteria



- ❑ Green: rate of infections in “top” (i.e., fewest) 10%; rate of falls and bed sores in “top” (i.e., fewest) 10%; systematic compliance with care processes
- ❑ Yellow: rate of infections in top quartile; rate of falls and/or bed sores in top quartile; minor non-compliance with care processes
- ❑ Red: Hospital acquired infection and/or fall or bed sore rate outside of top quartile and/or major non-compliance with care processes



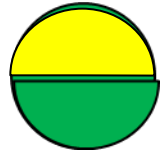
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# 2. Hospital Acquired Conditions

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## Cost Dashboard Scoring Criteria

Cost avoidance for one VAP, CLABSI, CAUTI, Fall with Injury



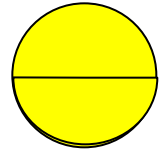
- Green: No HAC program penalty
- Red: HAC program penalty

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# 3. Patients' Hospital Experience

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## ❑ Components



- ✓ Patient perceptions of their inpatient experience; 9 indicators included in Value-Based Purchasing program

## ❑ Performance goals

- ✓ Proposed Value-Based Purchasing incentive payment parameters
  - **Full payment for 90th percentile**
  - **No payment below 70th percentile**



# NRC Screen Shot

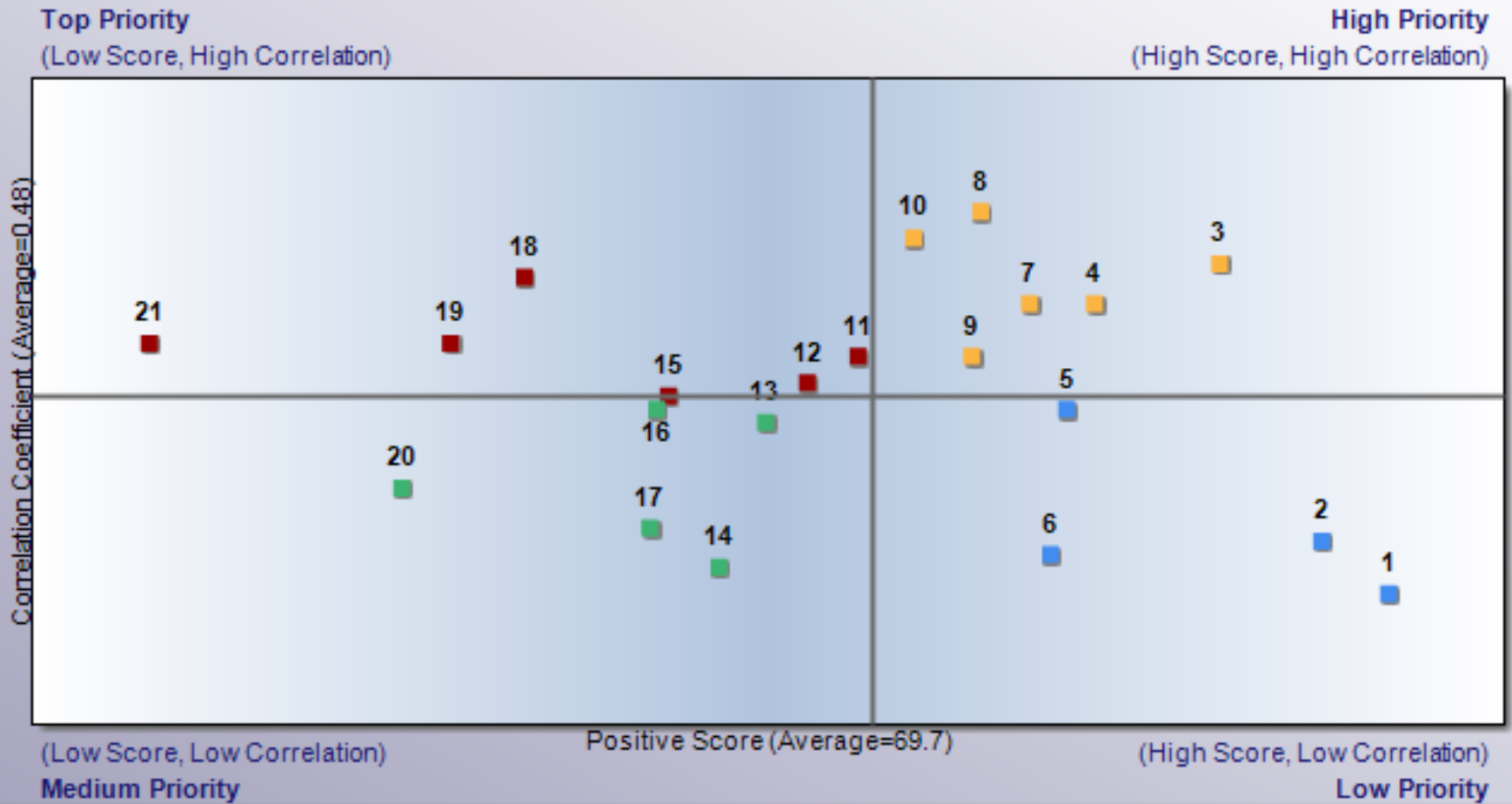
## Catalyst Trend by Questions - HCAHPS

May 31, 2018

	NRC Average	Jan 2018		Feb 2018		Mar 2018		Apr 2018		Total	
	Positive	Positive	n Size	Positive	n Size	Positive	n Size	Positive	n Size	Positive	n Size
HCAHPS: Drs explained things understandably	77.0	70.0	80	65.9	85	73.5	102	69.6	69	69.9	336
HCAHPS: Drs listened carefully to you	80.0	69.1	81	68.2	85	75.7	103	83.8	68	73.9	337
HCAHPS: Got help as soon as wanted	63.6	62.7	75	54.1	74	56.7	90	75.8	62	61.5	301
HCAHPS: Help going to bathroom as soon as wanted	69.1	61.1	54	65.4	52	60.7	56	75.0	40	64.9	202
HCAHPS: Nurses explained things understandably	75.7	71.6	81	74.1	85	79.8	104	75.4	69	75.5	339
HCAHPS: Nurses listened carefully to you	76.4	76.5	81	72.9	85	78.6	103	76.8	69	76.3	338
HCAHPS: Quiet around room at night	58.8	73.8	80	67.1	85	64.4	104	67.6	68	68.0	337
HCAHPS: Rate hospital	74.2	67.5	80	65.4	81	63.4	101	71.6	67	66.6	329
HCAHPS: Received info re: symptoms to look for	90.9	95.8	72	88.2	76	96.7	91	93.8	64	93.7	303
HCAHPS: Room kept clean during stay	72.6	78.5	79	71.1	83	81.2	101	71.0	69	75.9	332
HCAHPS: Staff described med side effects	50.8	55.0	40	38.5	39	60.8	51	51.6	31	52.2	161
HCAHPS: Staff talked about amount of pain	67.3	55.9	59	68.4	57	65.4	78	77.1	48	66.1	242
HCAHPS: Staff talked about how to treat pain	63.9	50.8	59	66.7	57	60.3	78	53.2	47	58.1	241
HCAHPS: Staff took preferences into account	46.3	35.1	77	34.6	81	36.7	98	36.9	65	35.8	321
HCAHPS: Talked about help you would need	86.2	88.9	72	86.8	76	93.3	90	90.5	63	90.0	301
HCAHPS: Told what medicine was for	78.0	80.0	40	71.8	39	90.4	52	71.9	32	79.8	163
HCAHPS: Treated w/courtesy/respect by Drs	87.5	79.0	81	77.1	83	81.2	101	89.9	69	81.4	334
HCAHPS: Treated w/courtesy/respect by Nurses	86.3	85.2	81	81.0	84	90.3	103	88.2	68	86.3	336
HCAHPS: Understood managing of health	54.3	40.5	79	51.9	81	63.0	100	49.3	67	52.0	327
HCAHPS: Understood purpose of medications	62.9	56.3	64	58.5	53	62.5	72	50.0	58	57.1	247
HCAHPS: Would recommend hospital to family	76.1	70.9	79	67.5	80	70.7	99	67.2	67	69.2	325

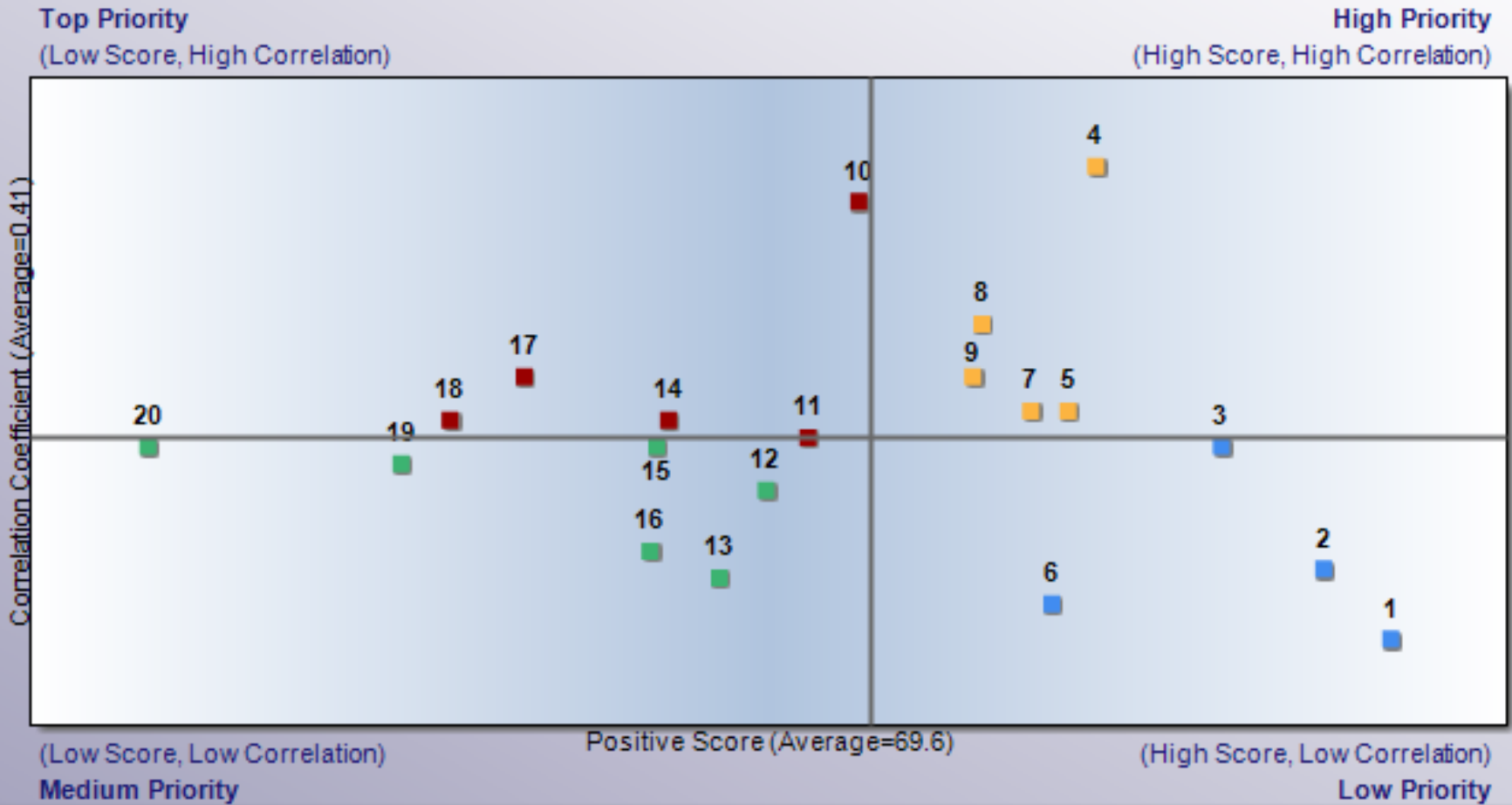


### Priority relationship to the question 'HCAHPS: Rate hospital'



1	HCAHPS: Received info re: symptoms to look for
2	HCAHPS: Talked about help you would need
3	HCAHPS: Treated w/courtesy/respect by Nurses
4	HCAHPS: Treated w/courtesy/respect by Drs
5	HCAHPS: Told what medicine was for
6	HCAHPS: Room kept clean during stay
7	HCAHPS: Nurses explained things understandably
8	HCAHPS: Nurses listened carefully to you
9	HCAHPS: Did everything to help your pain
10	HCAHPS: Drs listened carefully to you
11	HCAHPS: Drs explained things understandably
12	HCAHPS: Help going to bathroom as soon as wanted
13	HCAHPS: Staff talked about amount of pain
14	HCAHPS: Quiet around room at night
15	HCAHPS: Got help as soon as wanted
16	HCAHPS: Pain well controlled during stay
17	HCAHPS: Understood purpose of medications
18	HCAHPS: Staff talked about how to treat pain
19	HCAHPS: Understood managing of health
20	HCAHPS: Staff described med side effects
21	HCAHPS: Staff took preferences into account

### Priority relationship to the question 'HCAHPS: Drs listened carefully to you '



1	HCAHPS: Received info re: symptoms to look for
2	HCAHPS: Talked about help you would need
3	HCAHPS: Treated w/courtesy/respect by Nurses
4	HCAHPS: Treated w/courtesy/respect by Drs
5	HCAHPS: Told what medicine was for
6	HCAHPS: Room kept clean during stay
7	HCAHPS: Nurses explained things understandably
8	HCAHPS: Nurses listened carefully to you
9	HCAHPS: Did everything to help your pain
10	HCAHPS: Drs explained things understandably
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16	HCAHPS: Understood purpose of medications
17	HCAHPS: Staff talked about how to treat pain
18	HCAHPS: Understood managing of health
19	HCAHPS: Staff described med side effects
20	HCAHPS: Staff took preferences into account



### Priority relationship to the question 'HCAHPS: Nurses listened carefully to you'



1	HCAHPS: Received info re: symptoms to look for
2	HCAHPS: Talked about help you would need
3	HCAHPS: Treated w/courtesy/respect by Nurses
4	HCAHPS: Treated w/courtesy/respect by Drs
5	HCAHPS: Told what medicine was for
6	HCAHPS: Room kept clean during stay
7	HCAHPS: Nurses explained things understandably
8	HCAHPS: Did everything to help your pain
9	HCAHPS: Drs listened carefully to you
10	HCAHPS: Drs explained things understandably
11	HCAHPS: Help going to bathroom as soon as wanted
12	HCAHPS: Staff talked about amount of pain
13	HCAHPS: Quiet around room at night
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15	HCAHPS: Pain well controlled during stay
16	HCAHPS: Understood purpose of medications
17	HCAHPS: Staff talked about how to treat pain
18	HCAHPS: Understood managing of health
19	HCAHPS: Staff described med side effects
20	HCAHPS: Staff took preferences into account

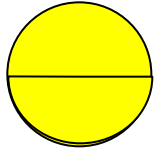


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# 3. Patients' Hospital Experience

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## Quality Dashboard Scoring Criteria



- ❑ Green: Aggregate score at/above 90th percentile
- ❑ Yellow: Aggregate score at/above 70th percentile
- ❑ Red: Aggregate score below 70th percentile

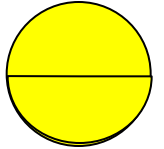
\* note- This will follow the final VBP rulings.

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# 3. Patients' Hospital Experience

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## Cost Dashboard Scoring Criteria



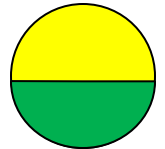
Financial impact on VBP

- ❑ Green: Positive return on VBP dollars
- ❑ Yellow: 0 to -1.00% of VBP dollars
- ❑ Red: > -1.00% of VBP dollars

\* note- This will follow the final VBP rulings.



# 4. Emergency Department Care



Definition	Actual		Goal
Pts Leave w/o Treatment	3.0%	↓	<2%
Pts return and admit in less than 48 hrs	.69%	↓	<2%
Door to Doc (Median)	19	↓	< 25 min
Door to D/C (Average)	163	↓	161
Decision to Bed (Median)	169	↓	115

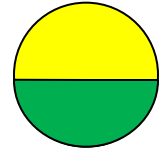
Source – Internal Review -CMS

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# 4. Emergency Department Care

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## Quality Dashboard Scoring Criteria



- ❑ Green: All performance goals met
- ❑ Yellow: Performance for all components at or below 1.5 times the target
- ❑ Red: One or more components above 1.5 times the target

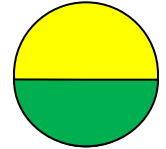
Source – Goals established from ACEP and ENA

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# 4. Emergency Department Care

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## Cost Dashboard Scoring Criteria



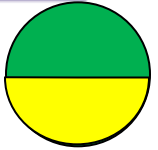
### Emergency Department Budget Score

- Green: 90 or greater
- Yellow: 75-90
- Red: less than 75

Source – Internal Cost/Reimbursement Review



# 5. Readmissions



## Quality Dashboard Scoring Criteria

% of HF, AMI, Pn, COPD, Total Joint Readmissions\*

- ❑ Green: Less than 8%
- ❑ Yellow: 8%-15%
- ❑ Red: > 15%

Feb	11.54
Mar	10.58
April	9.35
	10%



Source – HIS and DSC Review- AHCA, TJC-DSC

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Questions ?

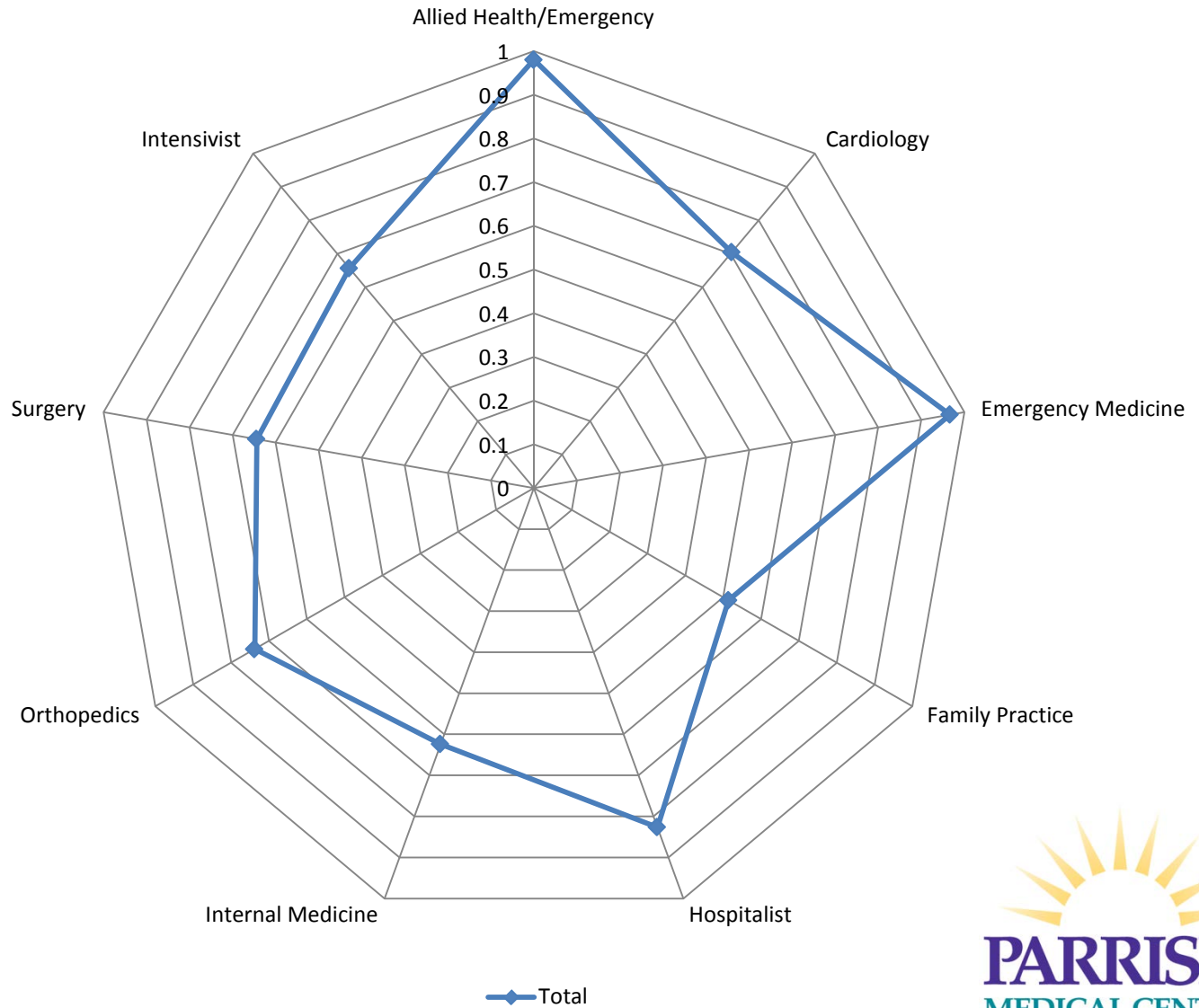


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CPOE

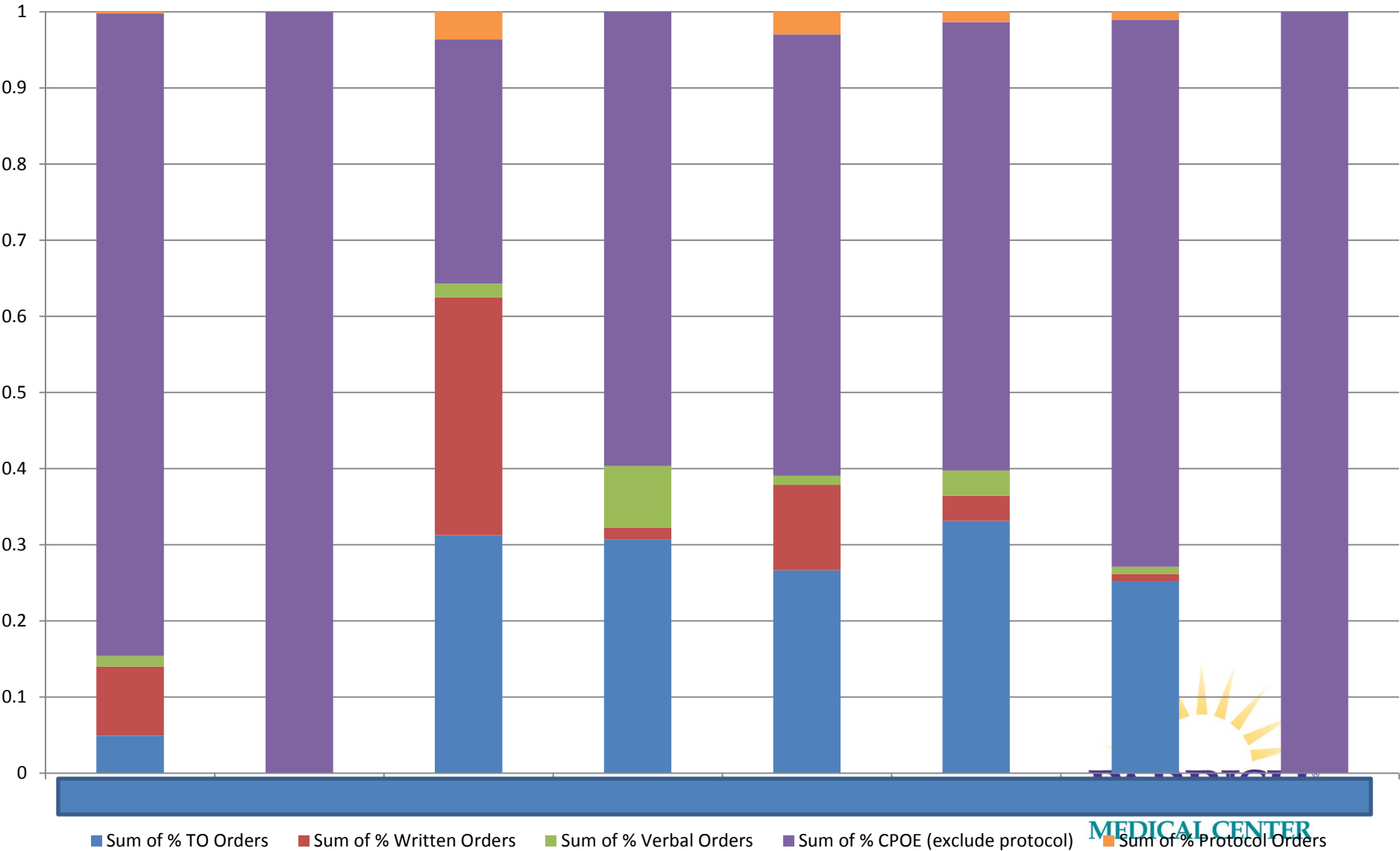


# (All) % CPOE (excluding Protocol)



# Cardiology

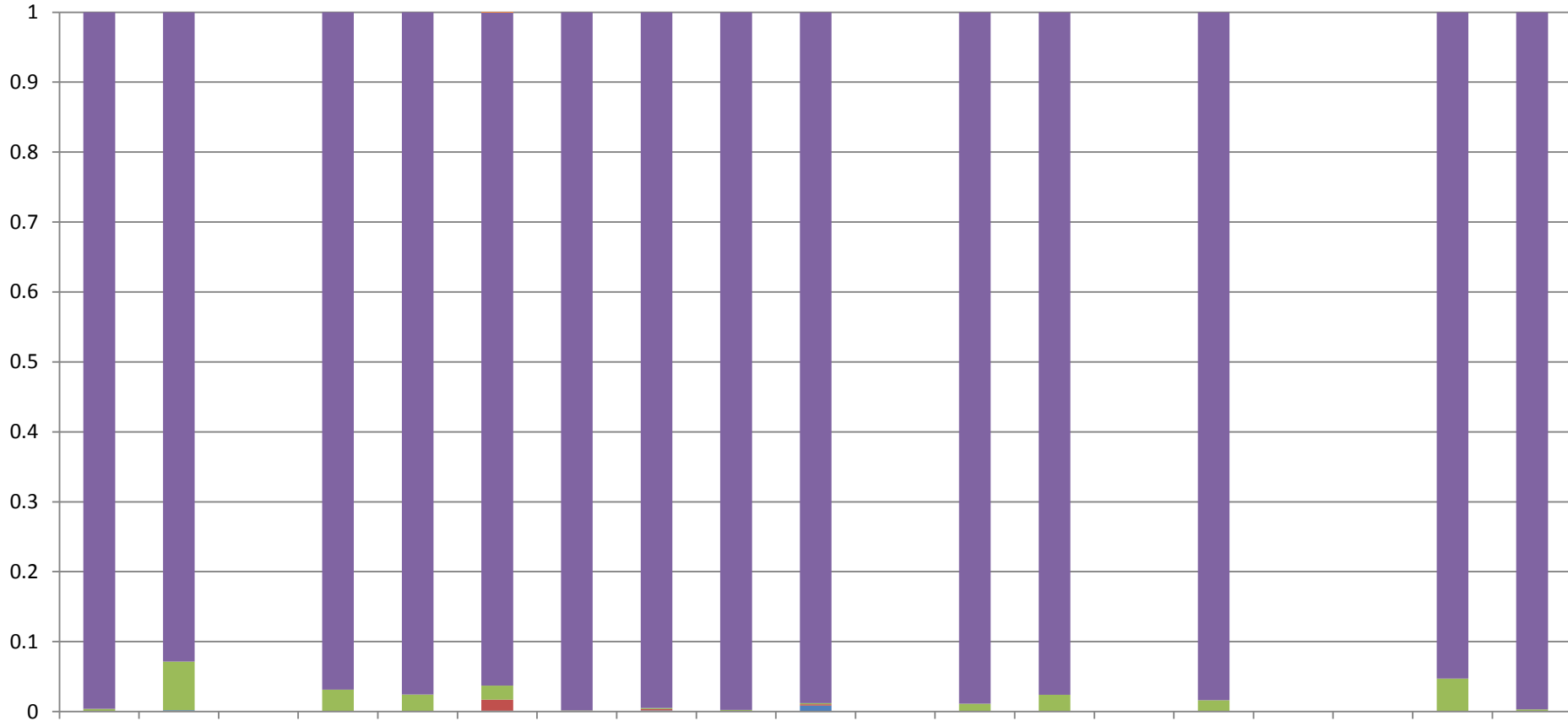
## Cardiology April All Order Types





# Emergency

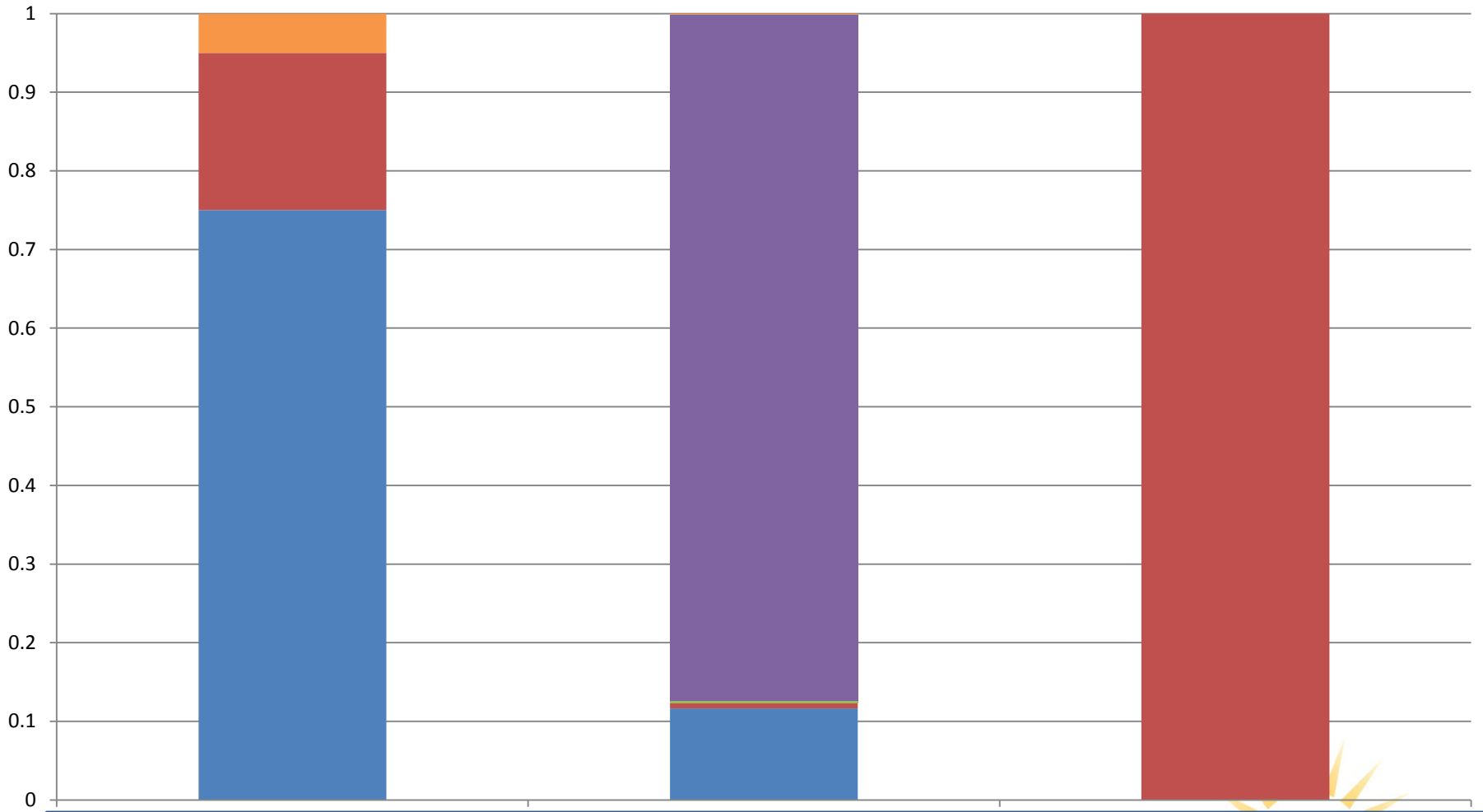
## (Multiple Items) April All Order Types



Sum of % TO Orders Sum of % Written Orders Sum of % Verbal Orders Sum of % CPOE (exclude protocol) Sum of % Protocol Orders

# Family Practice

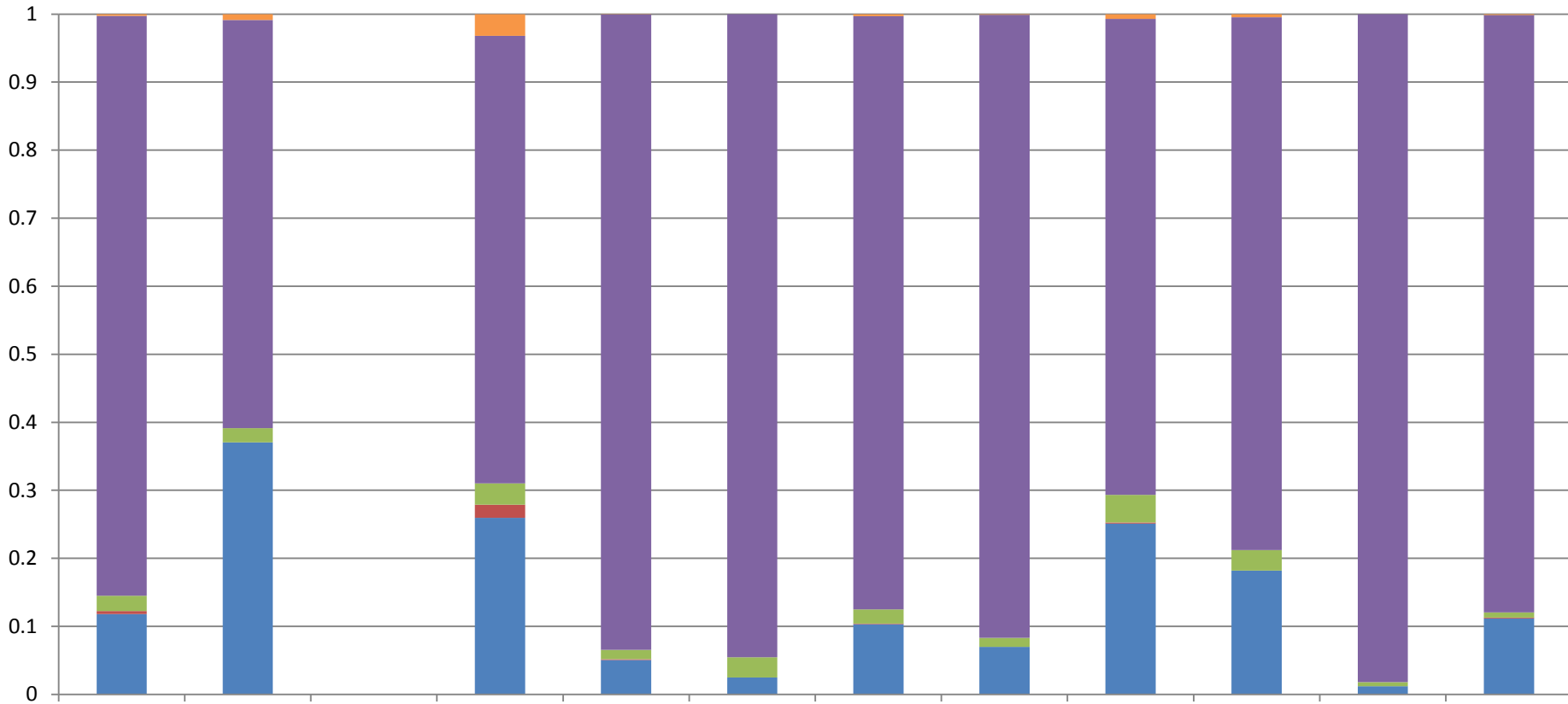
## Family Practice April All Order Types



■ Sum of % TO Orders ■ Sum of % Written Orders ■ Sum of % Verbal Orders ■ Sum of % CPOE (exclude protocol) ■ Sum of % Protocol Orders

# Hospitalist

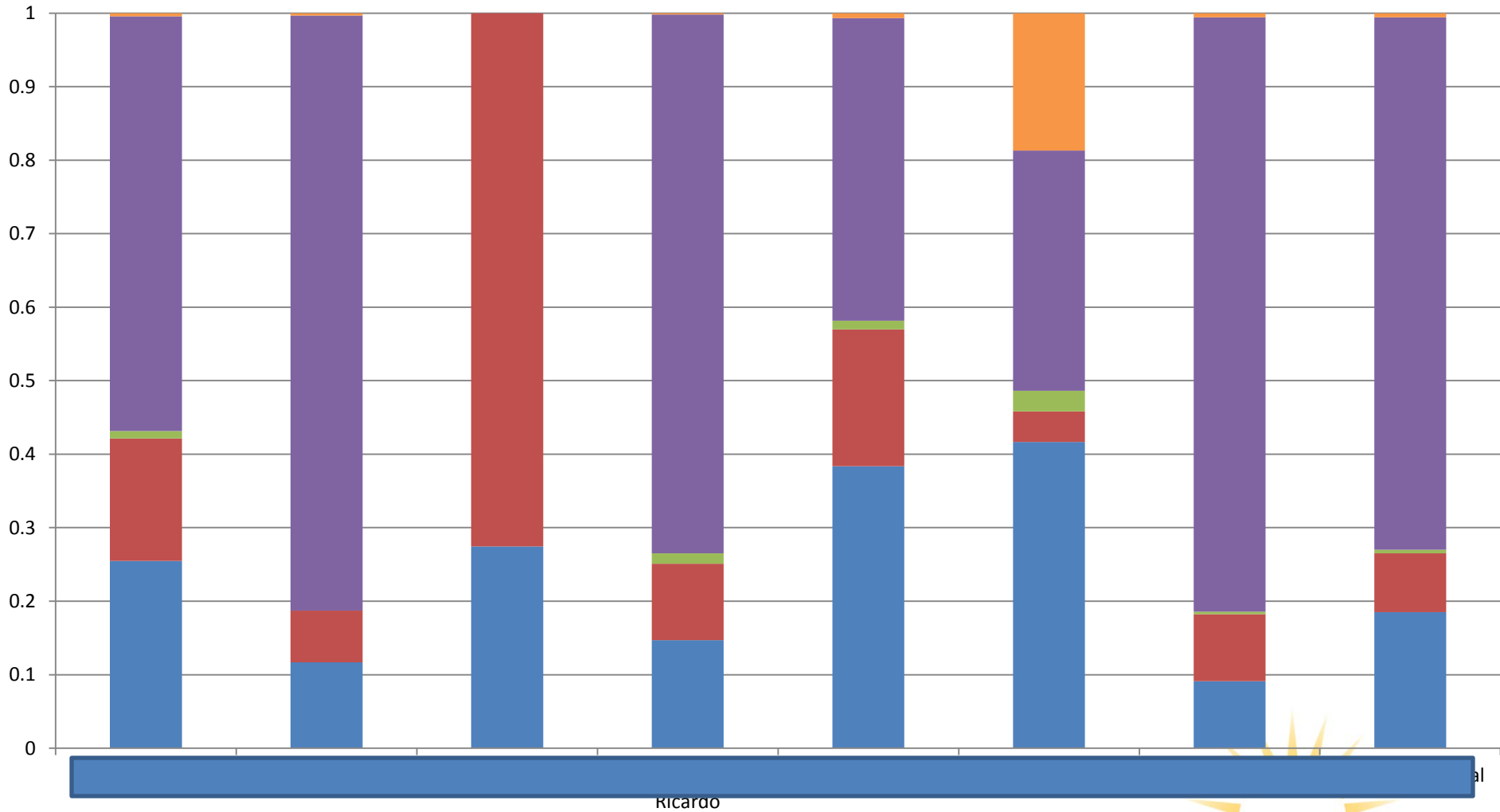
## (Multiple Items) April All Order Types



Sum of % TO Orders Sum of % Written Orders Sum of % Verbal Orders Sum of % CPOE (exclude protocol) Sum of % Protocol Orders

# Internal Medicine

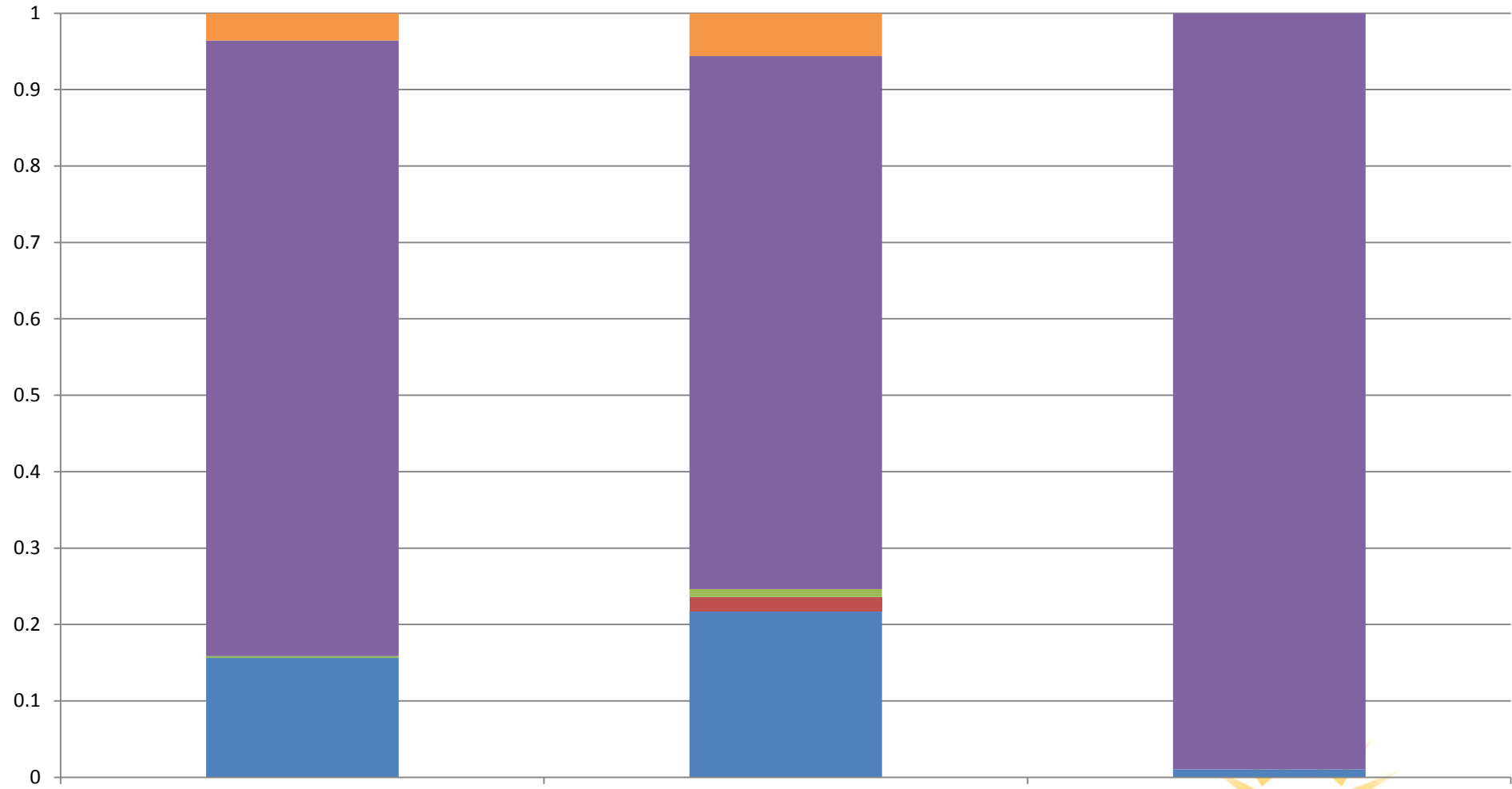
## (Multiple Items) April All Order Types



Sum of % TO Orders   Sum of % Written Orders   Sum of % Verbal Orders   Sum of % CPOE (exclude protocol)   Sum of % Protocol Orders

# Intensivist

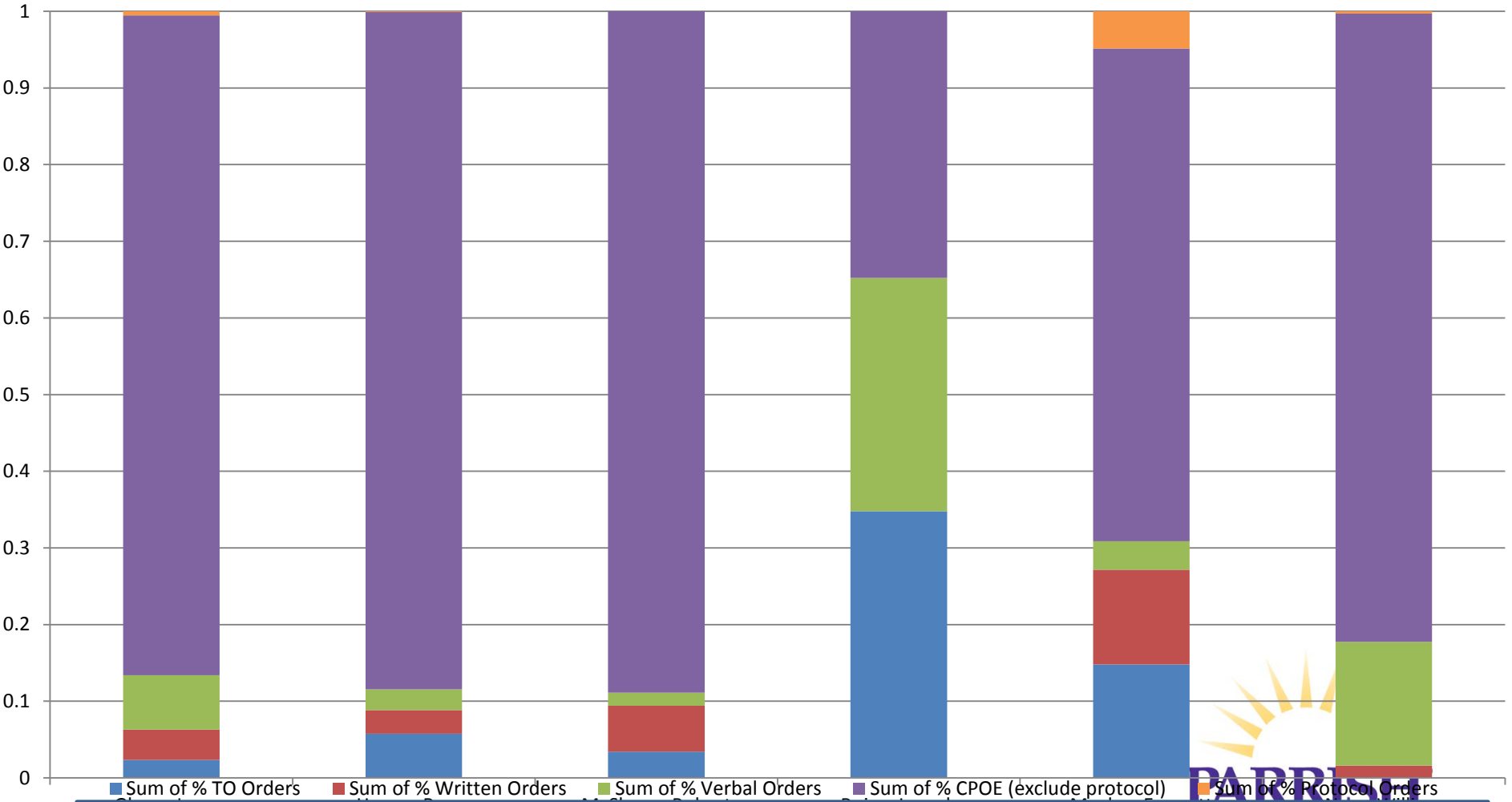
## (Multiple Items) April All Order Types



Sum of % TO Orders   Sum of % Written Orders   Sum of % Verbal Orders   Sum of % CPOE (exclude protocol)   Sum of % Protocol Orders

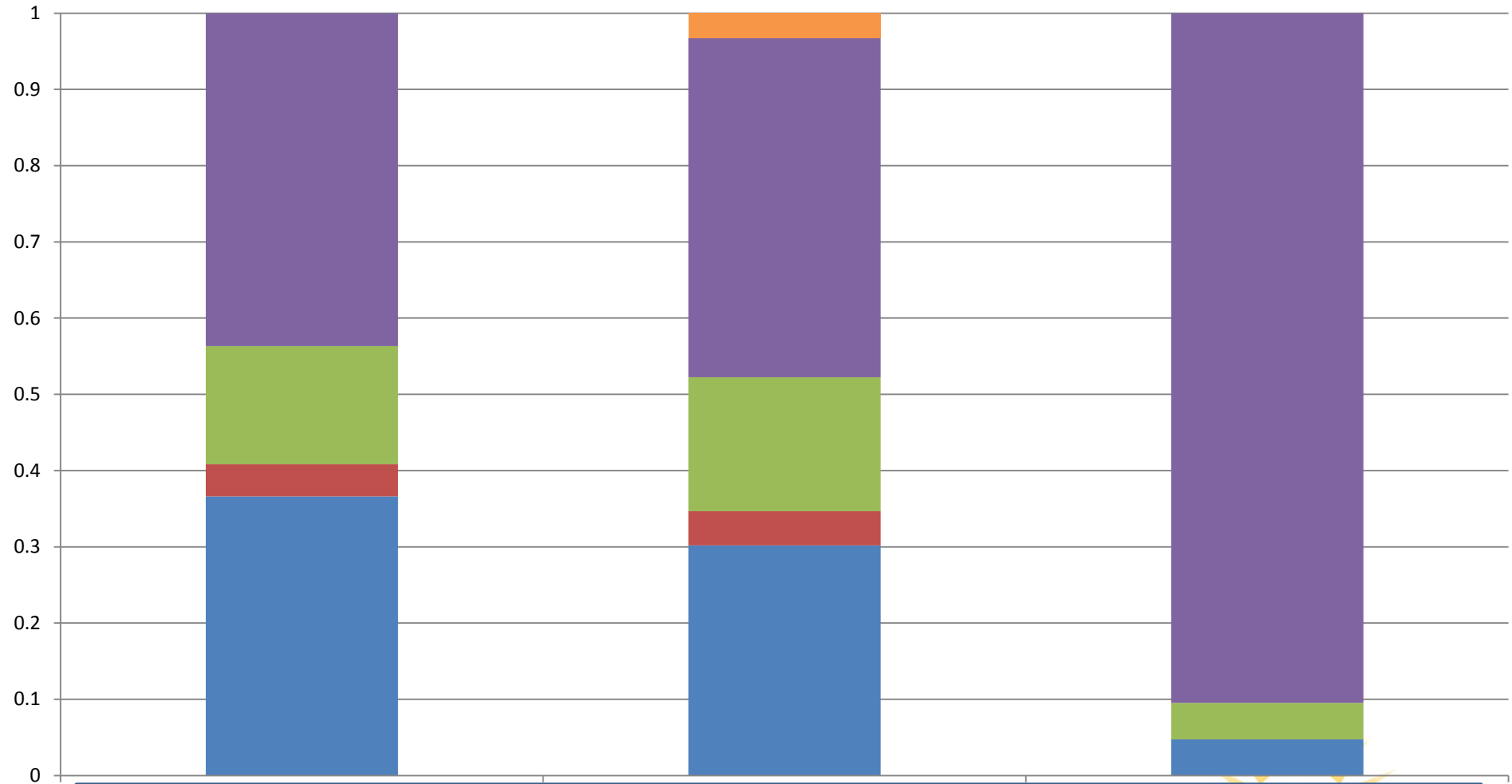
# Ortho

## Orthopedics April All Order Types



# Surgeon

## (Multiple Items) April All Order Types



Sum of % TO Orders   Sum of % Written Orders   Sum of % Verbal Orders   Sum of % CPOE (exclude protocol)   Sum of % Protocol Orders

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# Opioid Crisis in the Community we serve





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Questions ?



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# Mission Control



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)  
Pamela Tronetti, D.O., President/Medical Staff

**TENTATIVE AGENDA  
BUDGET & FINANCE COMMITTEE MEETING - REGULAR  
NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
MONDAY, JUNE 4, 2018  
EXECUTIVE CONFERENCE ROOM  
(IMMEDIATELY FOLLOWING QUALITY COMMITTEE)  
SECOND FLOOR, ADMINISTRATION**

CALL TO ORDER

- I. Review and approval of minutes (April 02, 2018)

***Motion: To recommend approval of the April 02, 2018 minutes as presented.***

- II. Public Comments

- III. US Bank resolution – Mr. Sitowitz

***Motion: To recommend to the Board of Directors approve the attached resolution as presented, related to US Bank.***

- IV. MRI Repair – Mr. Loftin

***Motion: To recommend to the Board of Directors to approve an increase in the capital budget for the replacement of the MRI hard drive tower at a total cost not to exceed \$93,000.***

- V. Financial Review – Mr. Sitowitz

- VI. Disposal

***Motion: To recommend to 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 FS274.05 and FS274.96.***

- VII. 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 April 2, 2018 in the Executive Conference Room. The following members, representing a quorum, were present:

Herman A. Cole, Jr.  
Stan Retz, Chairperson  
Peggy Crooks, Vice Chairperson  
Billie Fitzgerald  
Elizabeth Galfo, M.D.  
Robert Jordan  
Jerry Noffel  
Christopher Manion, M.D.  
Pamela Tronetti, D.O.

Member(s) Absent:

George Mikitarian (non-voting)

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 1:18 p.m.

**REVIEW AND APPROVAL OF MINUTES**

Discussion ensued and the following motion was made by Mr. Cole, seconded by Ms. Crooks and approved (9 ayes, 0 nays, 0 abstentions).

***ACTION TAKEN: MOTION TO APPROVE THE FEBRUARY 5, 2018 MEETING MINUTES, AS PRESENTED.***

**PUBLIC COMMENTS**

None

**FINANCIAL REVIEW**

Mr. Sitowitz summarized the February 2018 financial statements.

**QUARTERLY CQVA UPDATE**

Mr. Sitowitz shared with the committee the CQVA goal is \$450,000 and in the first five months in the year they have achieved \$221,000.

**DISPOSAL OF SURPLUS PROPERTY**

Discussion ensued and the following motion was made by Mr. Jordan, seconded by Mr. Cole and approved (9 ayes, 0 nays, 0 abstentions).

***ACTION TAKEN: MOTION TO RECOMMEND TO 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 1:46 p.m.

Stan Retz  
Chairperson



## MEMORANDUM

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**To:** Finance Committee  
**From:** Michael Sitowitz, Controller  
**Subject:** US Bank Resolution  
**Date:** June 4, 2018

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The current physician practice EMR and billing system will sunset at the end of December 2018. Athenahealth has been selected to replace the current EMR and billing system. US Bank is the bank that Athenahealth uses for accounts receivable collections for all practices on their EMR platform.

Attached is a resolution authorizing the opening of bank accounts at US Bank for the Athenahealth EMR.

***Motion:*** *To recommend the Board of Directors approve the attached resolution as presented, related to US Bank.*

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

Attachment

**US BANK** Authorization of Corporation, Partnership, Limited Liability Company, Association or Other Entity to Utilize Deposit or Fee-Based Services.

At a meeting of the Board of Directors of North Brevard County Hospital District (the "Organization") held on the fourth day of June, 2018, at which a quorum, if applicable, was present, the following resolutions were adopted:

RESOLVED, that the Organization hereby authorizes US Bank (the "Bank") to provide accounts, products, and services as indicated below; and that the following resolutions shall remain in full force and effect until written notice of their amendment or rescission shall have been received by the Bank, and the receipt of said notice shall not affect any action taken by the Bank prior thereto:

RESOLVED, that the Bank be named as a depository of the Organization and any of the following individuals are hereby authorized to execute any and all signature cards and enter into any and all agreements, including, without limitation, the Custom Master Services Agreement, on behalf of the Organization to effect the opening of any deposit account(s) at Bank:

George Mikitarian  
NAME

CEO/President  
TITLE

Christopher Mcalpine

Sr. VP - CTO

Michael Sitowitz

Controller

The Organization hereby authorizes each of the foregoing individuals to be named an authorized representative (as such term is defined in the Deposit Agreement) on any deposit account(s) of the Organization at Bank. Each of the foregoing authorized representatives and any and all subsequently named authorized representatives is authorized to add and remove any other individual to any of the Organization's deposit accounts) at Bank as an authorized representative.

RESOLVED, that each of the authorized representatives is, authorized to enter into agreements with the Bank and to obtain any and all products or services offered by the Bank now or at any time hereafter and to do any and all other acts required for the Organization to obtain these products or services! These products and services including, but not limited to, Deposit Accounts, Treasury Management Services, all services effected through Automated Clearing house process (also known as ACH), money transfer and wire transfer services.

I hereby certify that:

- I am the duly elected and authorized Secretary of the Organization and that I have the authority to make the certifications contained herein;
- the foregoing is a complete and correct copy of the resolutions duly adopted and recorded as a part of the minutes of said meeting and that they affirmatively appear in and as a part of said minutes;
- if applicable, there is no provision in the organizational document(s) of the Organization restricting the power of the group passing the foregoing resolutions from so passing said resolutions, and that the same are in conformity with the provisions of said organizational documents;

Effective Date. This Resolution shall take effect immediately upon its adoption.

PASSED, APPROVED AND ADOPTED this 4th day of June, 2018.

(DISTRICT SEAL)

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





## MEMORANDUM

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**To:** Finance Committee

**From:** Edwin Loftin, Sr. VP Integrated and Acute Care Services/CNO

**Subject:** MRI hard drive tower replacement

**Date:** May 24, 2018

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This request is for the unbudgeted replacement of the MRI hard drive tower at Parrish Medical Center.

On Thursday, April 26, 2018 it was identified during daily quality checks of the existing MRI at PMC that it was not functioning properly. After thorough review from the original equipment manufacturer (OEM) and our clinical equipment team, it was identified that there were issues involving the MRI's hard drive tower. Multiple attempts were made to repair it and upload new configurations, but nothing was successful. This unit is 16+ years old and the issues being addressed come from natural use based upon the age of the technology. Ultimately, in order to get this unit back up and working as efficiently as possible, the best option we have is to completely replace the hard drive tower.

Long term, we have started reviewing several vendors and options to replace the MRI at PMC in addition to other imaging equipment needs throughout Parrish Health Care. With that said, replacing an MRI can take months to complete. As such, replacing the hard drive tower to get the MRI working again, is necessary to provide MRI studies for the people we serve.

Representatives from the Diagnostic Services, Clinical Engineering, Finance, Administration, and more have been involved in the analysis, evaluation, and the decision and we will continue their involvement as we work through getting the MRI back up and running and due diligence of a future unit.

***Motion: To recommend to the Board of Directors to approve an increase in the capital budget for the replacement of the MRI hard drive tower at a total cost not to exceed \$93,000.***

NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
TITUSVILLE, FLORIDA

**Request for Disposal of Obsolete or Surplus Property**

The assets listed below are considered obsolete, inefficient, or have ceased to serve any useful function. Board approval for disposal is requested.

Asset Description	Asset Control KN #	Purchase Date	Purchase Amount	CE #	Reason for Disposal	Net Book Value (Provided by Finance)	Dept. #
Intensive Care System, Neonatal	KN024763	8/1/2002	11,682.94	00594	Unit being used as trade in.	0.00	1336

Requesting Department Labor and Delivery Department <sup>manager</sup> Director Melinda Hodges *M. Hodges* 5-23-18  
 Net Book Value (Finance) 0.00 *Johnson 12-24-18* EMC Member *[Signature]* 4-23-18  
 Sr. VP Finance/CFO *Michael Anthony* 5-2-18 President/CEO *[Signature]*  
 Board Approval: (Date) \_\_\_\_\_ CFO Signature *[Signature]*  
 Requestor Notified Finance \_\_\_\_\_  
 Asset Disposed of or Donated \_\_\_\_\_  
 Removed from Asset List (Finance) \_\_\_\_\_  
 Requested Public Entity for Donation \_\_\_\_\_  
 Entity Contact \_\_\_\_\_  
 Telephone \_\_\_\_\_

NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
TITUSVILLE, FLORIDA

**Request for Disposal of Obsolete or Surplus Property**

The assets listed below are considered obsolete, inefficient, or have ceased to serve any useful function. Board approval for disposal is requested.

Asset Description	Asset Control KN #	Purchase Date	Purchase Amount	CE #	Reason for Disposal	Net Book Value (Provided by Finance)	Dept. #
Bed Listing	See attached	Various	\$1,007,128.24	See attached	End of useful life – leasing new beds	3.077.90	Various Nursing units

Requesting Department Nursing Admin \_\_\_\_\_ Department Director Robert Wildermuth – MM 751 (RW) 5/30/18

Net Book Value (Finance) \$3,077.90 Wasson 05-31-18 EMC Member [Signature]

Sr. VP Finance/CFO Michael Liberty 5-31-18 President/CEO Michael Liberty AOC for George [Signature] CEO

Board Approval: (Date) \_\_\_\_\_ CFO Signature \_\_\_\_\_

Requestor Notified Finance \_\_\_\_\_

Asset Disposed of or Donated Donated and disposed of \_\_\_\_\_

Removed from Asset List (Finance) \_\_\_\_\_

Requested Public Entity for Donation \_\_\_\_\_

Entity Contact Rob Wildermuth x7585 \_\_\_\_\_

Parrish Medical Center  
 Bed Listing  
 as of 05/30/18

3,077.90

KN Number (FA System)	Facility Asset # (Minute Man)	CE Number	Description	Life	Status	Status Date	Acquired Date	Acc Depr	Book Value	Cost
KN010331			BED - ADVANCE 2000 W/NURSE CALL PRIORITY FOO	15	ACTIVE	11/3/1999	2/15/1993	7,139.00	-	7,139.00
KN017049			BED - ADJUSTABLE W/MATTRESS 60 X 80 QUEEN SIZE	15	ACTIVE	11/3/1999	12/10/1992	1,500.00	-	1,500.00
KN018750		3139	BED - RETRACTABLE ADVANCE 1000 W/BUMPER,RAILS,	12	ACTIVE	11/3/1999	4/24/1996	6,987.05	-	6,987.05
KN019387	KN019387	3140	BED - CRITICAL CARE W/SCALE	12	ACTIVE	11/3/1999	3/25/1997	7,722.00	-	7,722.00
KN021104			BED W/SIMMONS MATTRESS,HEADBOARD,FRAME,NIGHTST	5	ACTIVE	3/2/2000	2/1/2000	1,158.90	-	1,158.90
KN021640	KN021640	3282	BIRTHING BED AFFINITY THREE K3700	15	ACTIVE	6/9/2001	5/16/2001	16,701.30	-	16,701.30
KN021641	KN021641	3283	BIRTHING BED AFFINITY THREE K3700	15	ACTIVE	6/9/2001	5/16/2001	16,701.29	-	16,701.29
KN023382	KN023382	3222	BED - PATIENT SECURE	12	ACTIVE	6/6/2002	5/30/2002	4,181.77	-	4,181.77
KN023383			BED - PATIENT SECURE	12	ACTIVE	6/6/2002	5/30/2002	4,181.77	-	4,181.77
KN023384			BED - PATIENT SECURE	12	ACTIVE	6/6/2002	5/30/2002	4,181.77	-	4,181.77
KN023385			BED - PATIENT SECURE	12	ACTIVE	6/6/2002	5/30/2002	4,181.77	-	4,181.77
KN023386	KN023386	3119	BED - PATIENT SECURE	12	ACTIVE	6/6/2002	5/30/2002	4,181.77	-	4,181.77
KN023387	KN023387	3181	BED - PATIENT SECURE	12	ACTIVE	6/6/2002	5/30/2002	4,181.77	-	4,181.77
KN023388	KN023388	3164	BED - PATIENT SECURE	12	ACTIVE	6/6/2002	5/30/2002	4,181.77	-	4,181.77
KN023389	KN023389	3193	BED - PATIENT SECURE	12	ACTIVE	6/6/2002	5/30/2002	4,181.77	-	4,181.77
KN023493	KN023493	3313	BED - ICU TOTAL CARE SPO2RT SYSTEM	12	ACTIVE	5/3/2002	4/1/2002	20,188.00	-	20,188.00
KN023494	KN023494	3311	BED - ICU TOTAL CARE SPO2RT SYSTEM	12	ACTIVE	5/3/2002	4/1/2002	20,188.00	-	20,188.00
KN023495	KN023495	3219	BED - ICU TOTAL CARE SPO2RT SYSTEM	12	ACTIVE	5/3/2002	4/1/2002	20,188.00	-	20,188.00
KN023496	KN023496	3312	BED - ICU TOTAL CARE SPO2RT SYSTEM	12	ACTIVE	5/3/2002	4/1/2002	20,188.00	-	20,188.00
KN023497	KN023497	3365	BED - ICU TOTAL CARE SPO2RT SYSTEM	12	ACTIVE	5/3/2002	4/1/2002	20,188.00	-	20,188.00
KN023498	KN023498	3316	BED - ICU TOTAL CARE SPO2RT SYSTEM	12	ACTIVE	5/3/2002	4/1/2002	20,188.00	-	20,188.00
KN023499	KN023499	3366	BED - ICU TOTAL CARE SPO2RT SYSTEM	12	ACTIVE	5/3/2002	4/1/2002	20,188.00	-	20,188.00
KN023500	KN023500	3329	BED - ICU TOTAL CARE SPO2RT SYSTEM (CE#03329)	12	ACTIVE	5/3/2002	3/27/2002	20,188.00	-	20,188.00
KN024395	KN024395	3132	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN024396	KN024396	3320	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN024397	KN024397	3126	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN024437	KN024437	3148	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN024438	KN024438	3260	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN024439	KN024439	3269	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN024440	KN024440	3322	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN024441	KN024441	3220	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN024442	KN024442	3113	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN024443	KN024443	3252	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN024445	KN024445	3201	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN024446	KN024446	3123	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN024447	KN024447	3114	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN024448	KN024448	3115	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN024449	KN024449	3182	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027179	KN027179	3279	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027180	KN027180	3258	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027181	KN027181	3141	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027182	KN027182	3112	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027183	KN027183	3195	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77

KN Number (FA System)	Facility Asset # (Minute Man)	CE Number	Description	Life	Status	Status Date	Acquired Date	Acc Depr	Book Value	Cost
KN027184			BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027185	KN027185	3226	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027186	KN027186	3118	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/8/2002	4,288.49	-	4,288.49
KN027187	KN027187	3158	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/8/2002	4,288.49	-	4,288.49
KN027188	KN027188	3190	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/8/2002	4,288.49	-	4,288.49
KN027189	KN027189	6928	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027190	KN027190	3199	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027191	KN027191	3199	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027192	KN027192	3149	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027193	KN027193	3161	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027194	KN027194	3333	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027195	KN027195	3276	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027196	KN027196	3125	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027197	KN027197	3334	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027198	KN027198	3121	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027199	KN027199	3274	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027200	KN027200	3326	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027201	KN027201	3150	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027202	KN027202	3168	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027203	KN027203	3162	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027204	KN027204	3202	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027205	KN027205	3176	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027206	KN027206	3175	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/8/2002	4,288.49	-	4,288.49
KN027207	KN027207	3179	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027208	KN027208	3363	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027209	KN027209	3216	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027210	KN027210	3331	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027211	KN027211	3248	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027212	KN027212	6906	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027213	KN027213	3191	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027214	KN027214	3129	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027215	KN027215	3281	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027216	KN027216	3233	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/8/2002	4,288.49	-	4,288.49
KN027217	KN027217	3262	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027218	KN027218	3122	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027219	KN027219	3128	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027220	KN027220	6884	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027221	KN027221	3186	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027222	KN027222	1689	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027223	KN027223	3230	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027224	KN027224	3271	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027225	KN027225	3277	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027226	KN027226	3183	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/8/2002	4,288.49	-	4,288.49
KN027227	KN027227	3256	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027228	KN027228	3253	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027229	KN027229	3138	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027230	KN027230	3145	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77

KN Number (FA System)	Facility Asset # (Minute Man)	CE Number	Description	Life	Status	Status Date	Acquired Date	Acc Depr	Book Value	Cost
KN027233	KN027233	3239	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027234	KN027234	3324	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027235	KN027235	3198	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027236	KN027236	3268	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027237	KN027237	3116	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027238	KN027238	3194	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027239	KN027239	3229	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027240	KN027240	3247	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027241	KN027241	3275	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027242	KN027242	332	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027243	KN027243	3177	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027244	KN027244	3278	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027245	KN027245	3111	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027246	KN027246	3180	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027247	KN027247	3172	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027248	KN027248	3185	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027249	KN027249	3359	BED - ICU TOTAL CARE SPO2RT SYSTEM	12	ACTIVE	12/11/2002	11/10/2002	20,188.00	-	20,188.00
KN027250	KN027250	3315	BED - ICU TOTAL CARE SPO2RT SYSTEM (CE#03315)	12	ACTIVE	12/11/2002	11/10/2002	20,188.00	-	20,188.00
KN027251	KN027251	3314	BED - ICU TOTAL CARE SPO2RT SYSTEM (CE#03314)	12	ACTIVE	12/11/2002	11/10/2002	20,188.00	-	20,188.00
KN027252	KN027252	3310	BED - ICU TOTAL CARE SPO2RT SYSTEM (CE#03310)	12	ACTIVE	12/11/2002	11/10/2002	20,188.00	-	20,188.00
KN027311	KN027311	3159	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027312	KN027312	3339	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027313	KN027313	3240	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027314	KN027314	3152	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027315	KN027315	3160	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027316	KN027316	3137	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027317	KN027317	3263	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027318	KN027318	3221	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027319	KN027319	3338	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027320	KN027320	3131	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027321	KN027321	3319	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027322	KN027322	3323	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027323	KN027323	3264	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027324	KN027324	3325	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027325	KN027325	3266	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027326	KN027326	3146	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027327	KN027327	3144	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027328	KN027328	3167	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027329	KN027329	3250	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027330	KN027330	3330	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027331	KN027331	3238	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027332	KN027332	3332	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027333	KN027333	3318	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027334	KN027334	3251	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027335	KN027335	3259	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027336	KN027336	3327	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027337	KN027337	3197	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77

KN Number (FA System)	Facility Asset # (Minute Man)	CE Number	Description	Life	Status	Status Date	Acquired Date	Acc Depr	Book Value	Cost
KN027338	KN027338	3174	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027339	KN027339	3188	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027340	KN027340	3143	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027341	KN027341	3270	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027342	KN027342	3223	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027343	KN027343	3163	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027344	KN027344	3200	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027345	KN027345	3165	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027346	KN027346	3134	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027347	KN027347	3228	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027348	KN027348	3184	BED - PATIENT SECURE II	12	ACTIVE	12/11/2002	10/1/2002	4,181.77	-	4,181.77
KN027565	KN027565	3317	BIRTHING BED	12	ACTIVE	12/11/2002	8/1/2002	16,957.00	-	16,957.00
KN027664	KN027664	3151	BED - PATIENT	15	ACTIVE	1/6/2003	12/4/2002	4,179.13	-	4,179.13
KN027665			BED - PATIENT	15	ACTIVE	1/6/2003	12/4/2002	4,179.13	-	4,179.13
KN027666	KN027666	3153	BED - PATIENT	15	ACTIVE	1/6/2003	12/4/2002	4,179.13	-	4,179.13
KN027667	KN027667	3254	BED - PATIENT	15	ACTIVE	1/6/2003	12/4/2002	4,179.13	-	4,179.13
KN027668			BED - PATIENT	15	ACTIVE	1/6/2003	12/4/2002	4,179.13	-	4,179.13
KN027886			BED SECURE II	12	ACTIVE	8/6/2003	5/6/2003	4,907.76	-	4,907.76
KN027887			BED SECURE II	12	ACTIVE	8/6/2003	5/6/2003	4,907.76	-	4,907.76
KN027963			BED SECURE II	12	ACTIVE	8/6/2003	5/6/2003	4,907.76	-	4,907.76
KN027964			BED SECURE II	12	ACTIVE	8/6/2003	5/6/2003	4,907.76	-	4,907.76
KN027965	KN027965	3187	BED SECURE II	12	ACTIVE	8/6/2003	5/6/2003	4,907.76	-	4,907.76
KN027966			BED SECURE 11	12	ACTIVE	8/6/2003	5/6/2003	4,907.76	-	4,907.76
KN027967	KN027967	3196	BED SECURE II	12	ACTIVE	8/6/2003	5/6/2003	4,907.76	-	4,907.76
KN027968	KN027968	3328	BED SECURE II	12	ACTIVE	8/6/2003	5/6/2003	4,907.76	-	4,907.76
KN027969	KN027969	6923	BED SECURE II	12	ACTIVE	8/6/2003	5/6/2003	4,907.76	-	4,907.76
KN027970	KN027970	3136	BED SECURE II	12	ACTIVE	8/6/2003	5/6/2003	4,907.76	-	4,907.76
KN027971	KN027971	3231	BED SECURE II	12	ACTIVE	8/6/2003	5/6/2003	4,907.76	-	4,907.76
KN027972			BED SECURE II	12	ACTIVE	8/6/2003	5/6/2003	4,907.76	-	4,907.76
KN027973	KN027973	3232	BED SECURE II	12	ACTIVE	8/6/2003	5/6/2003	4,907.76	-	4,907.76
KN027974			BED SECURE II	12	ACTIVE	8/6/2003	5/6/2003	4,907.76	-	4,907.76
KN027975	KN027975	3142	BED SECURE II	12	ACTIVE	8/6/2003	5/6/2003	4,907.76	-	4,907.76
KN028787	KN028787	3737	STRYKER SECURE II EX BED (07-999-01A)	12	ACTIVE	2/9/2007	1/24/2007	5,232.71	307.79	5,540.50
KN028788	KN028788	3738	STRYKER SECURE II EX BED (07-999-01A)	12	ACTIVE	2/9/2007	1/24/2007	5,232.71	307.79	5,540.50
KN028789	KN028789	3739	STRYKER SECURE II EX BED (07-999-01A)	12	ACTIVE	2/9/2007	1/24/2007	5,232.71	307.79	5,540.50
KN028790	KN028790	3740	STRYKER SECURE II EX BED (07-999-01A)	12	ACTIVE	2/9/2007	1/24/2007	5,232.71	307.79	5,540.50
KN028791	KN028791	3741	STRYKER SECURE II EX BED (07-999-01A)	12	ACTIVE	2/9/2007	1/24/2007	5,232.71	307.79	5,540.50
KN028792	KN028792	3743	STRYKER SECURE II EX BED (07-999-01A)	12	ACTIVE	2/9/2007	1/24/2007	5,232.71	307.79	5,540.50
KN028793	KN028793	3742	STRYKER SECURE II EX BED (07-999-01A)	12	ACTIVE	2/9/2007	1/24/2007	5,232.71	307.79	5,540.50
KN028794	KN028794	3744	STRYKER SECURE II EX BED (07-999-01A)	12	ACTIVE	2/9/2007	1/24/2007	5,232.71	307.79	5,540.50
KN028795	KN028795	3745	STRYKER SECURE II EX BED (07-999-01A)	12	ACTIVE	2/9/2007	1/24/2007	5,232.71	307.79	5,540.50
KN028796	KN028796	3746	STRYKER SECURE II EX BED (07-999-01A)	12	ACTIVE	2/9/2007	1/24/2007	5,232.71	307.79	5,540.50

## Wildermuth, Robert

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**From:** Wasson, Jamie  
**Sent:** Wednesday, May 30, 2018 3:46 PM  
**To:** Wildermuth, Robert  
**Cc:** Sitowitz, Michael  
**Subject:** RE: Bed listing  
**Attachments:** Bed Listing from FA vs. Minute Man.xls

Attached is the analysis I did regarding the beds. It appears that FA has more active beds than Minute Man.

Jamie

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**From:** Wildermuth, Robert  
**Sent:** Tuesday, May 29, 2018 4:54 PM  
**To:** Wasson, Jamie  
**Subject:** Bed listing

Jamie,

Attached is the Bed Inventory provided to me by Kathryn Robinson from the Minuteman system. Mike asked that I get a listing from either Minuteman or the Fixed Asset system for all beds (Med/Surg, ICU, Labor & Delivery) so we can provide the request to the Board for obsolete equipment for this Monday's Board meeting. Kathryn's listing is missing KN #'s for 12 beds. Do you have a more complete list than Kathryn does? Thanks.



NORTH BREVARD COUNTY HOSPITAL DISTRICT  
 OPERATING  
 PARRISH MEDICAL CENTER  
 TITUSVILLE, FLORIDA

**Request for Disposal of Obsolete or Surplus Property**

The assets listed below are considered obsolete, inefficient, or have ceased to serve any useful function. Board approval for disposal is requested.

Asset Description	Asset Control KN #	Purchase Date	Purchase Amount	CE #	Reason for Disposal	Net Book Value (Provided by Finance)	Dept. #
McKesson Hardware Refresh	KN030017	10/09/13	\$697,912		Obsolete Clarion NS480 (Storage array)	0.00	IS

Requesting Department Information Systems Department Director \_\_\_\_\_

Net Book Value (Finance) \$0 Jamie C. Wasson 5/29/18 EMC Member  5-29-18

Sr. VP Finance/CFO Michael Potent 5/29/18 President/CEO \_\_\_\_\_

Board Approval: (Date) \_\_\_\_\_ CFO Signature 

Requestor Notified Finance \_\_\_\_\_

Asset Disposed of or Donated \_\_\_\_\_

Removed from Asset List (Finance) \_\_\_\_\_

Requested Public Entity for Donation \_\_\_\_\_

Entity Contact \_\_\_\_\_

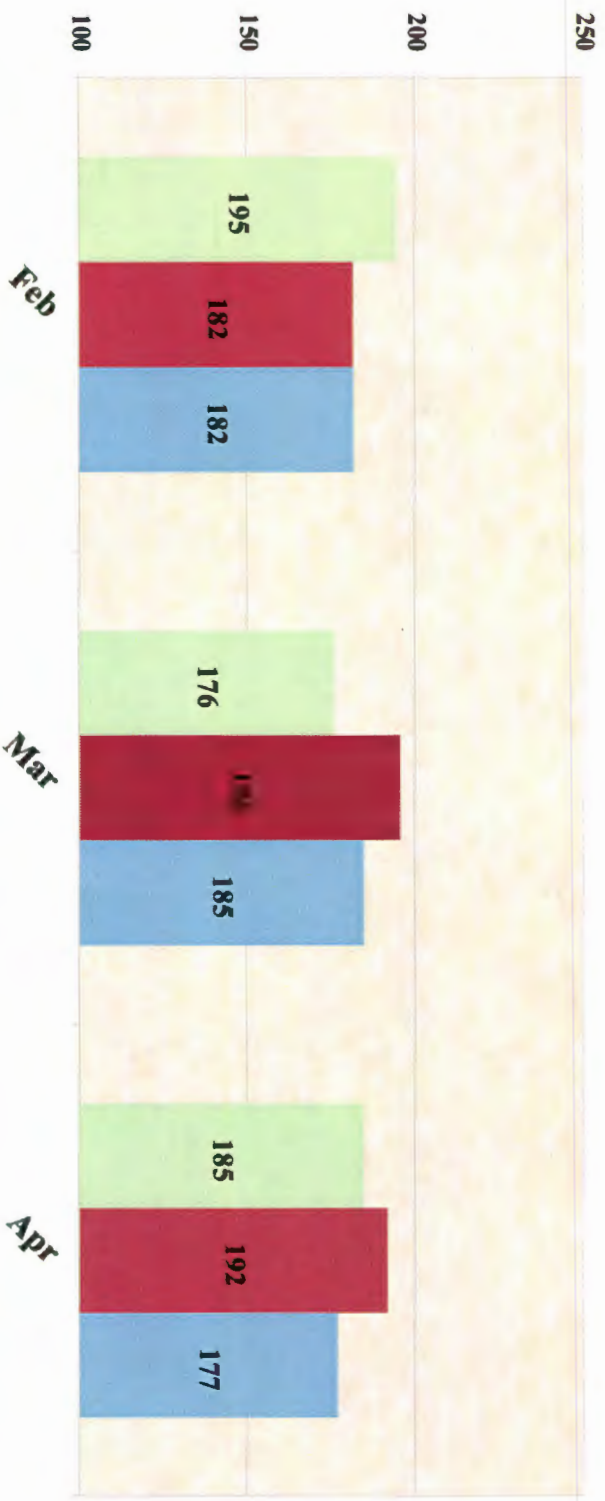
Telephone \_\_\_\_\_

# Finance Committee Meeting

## Financial Review- April 2018

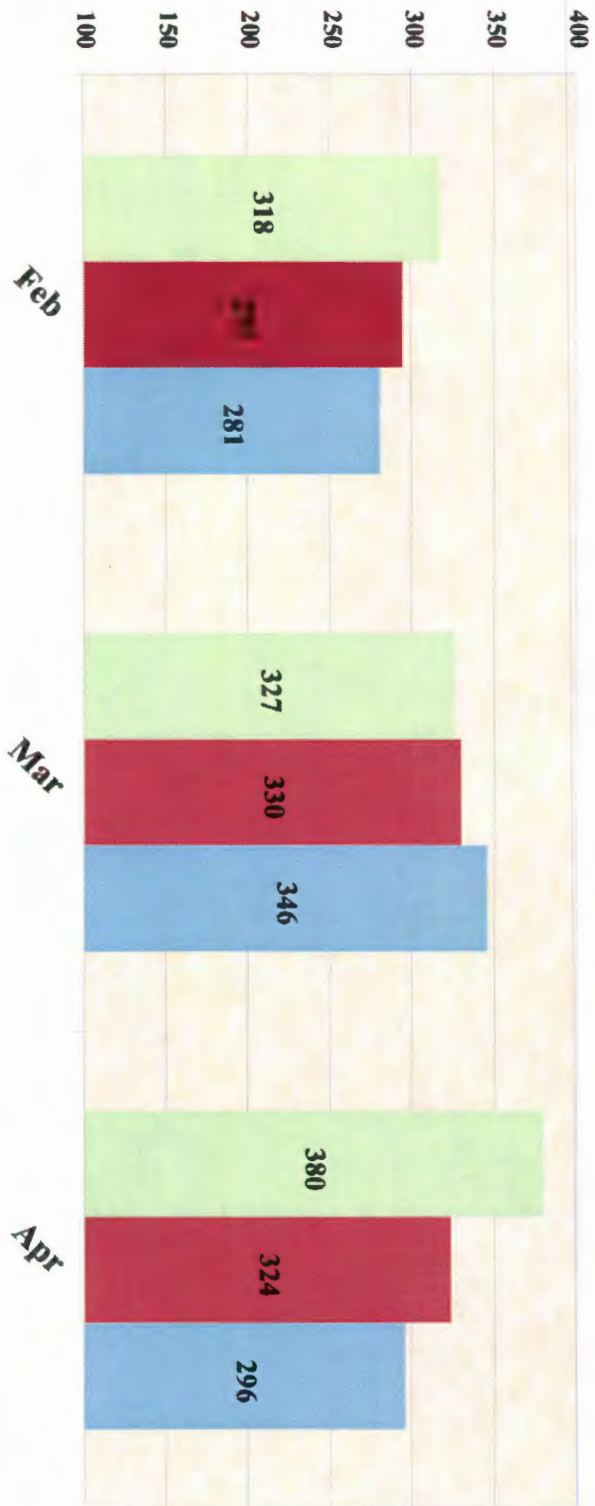
Meeting Convene: June 4, 2018



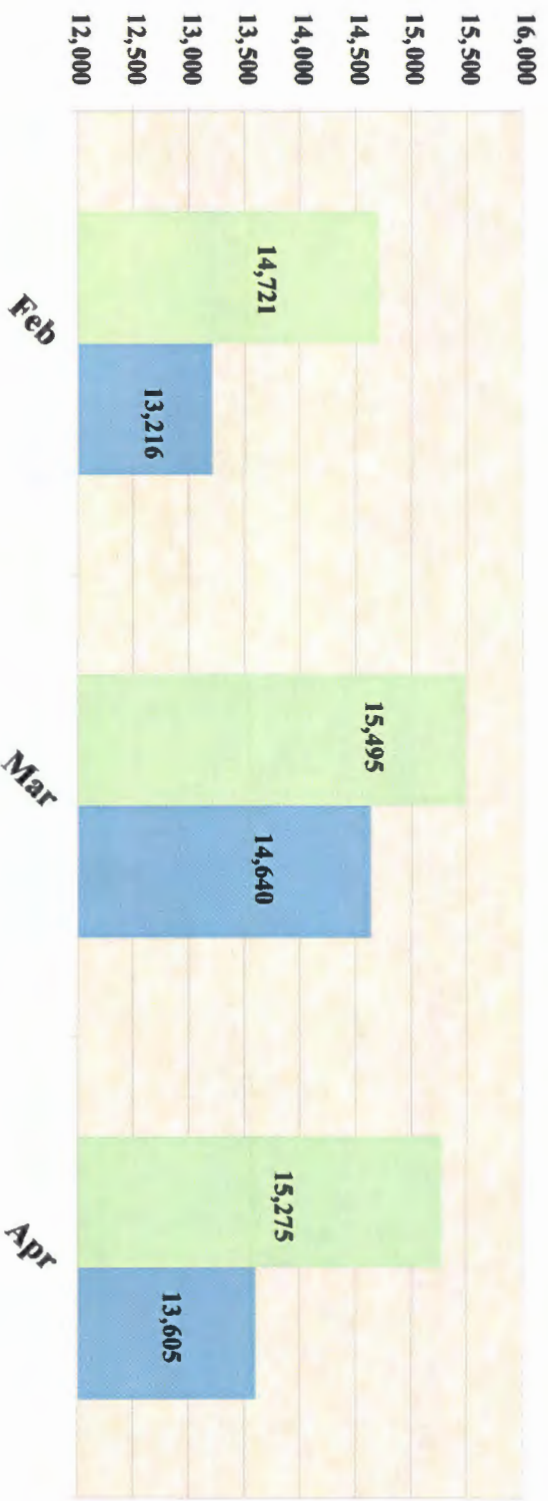


■ Actual
 ■ Budget
 ■ Prior Year

YTD	Actual	Budget	Prior Year
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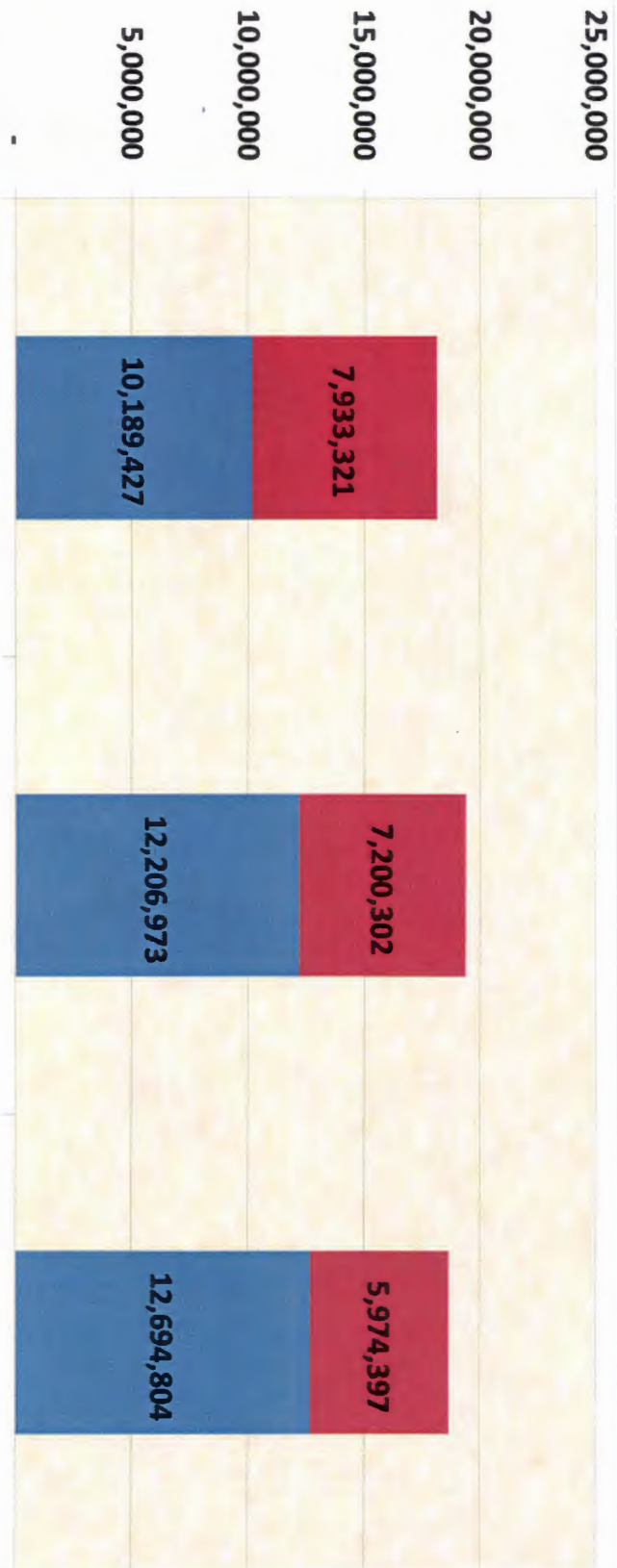


YTD Actual Budget Prior Year  
 2,387 2,196 2,058

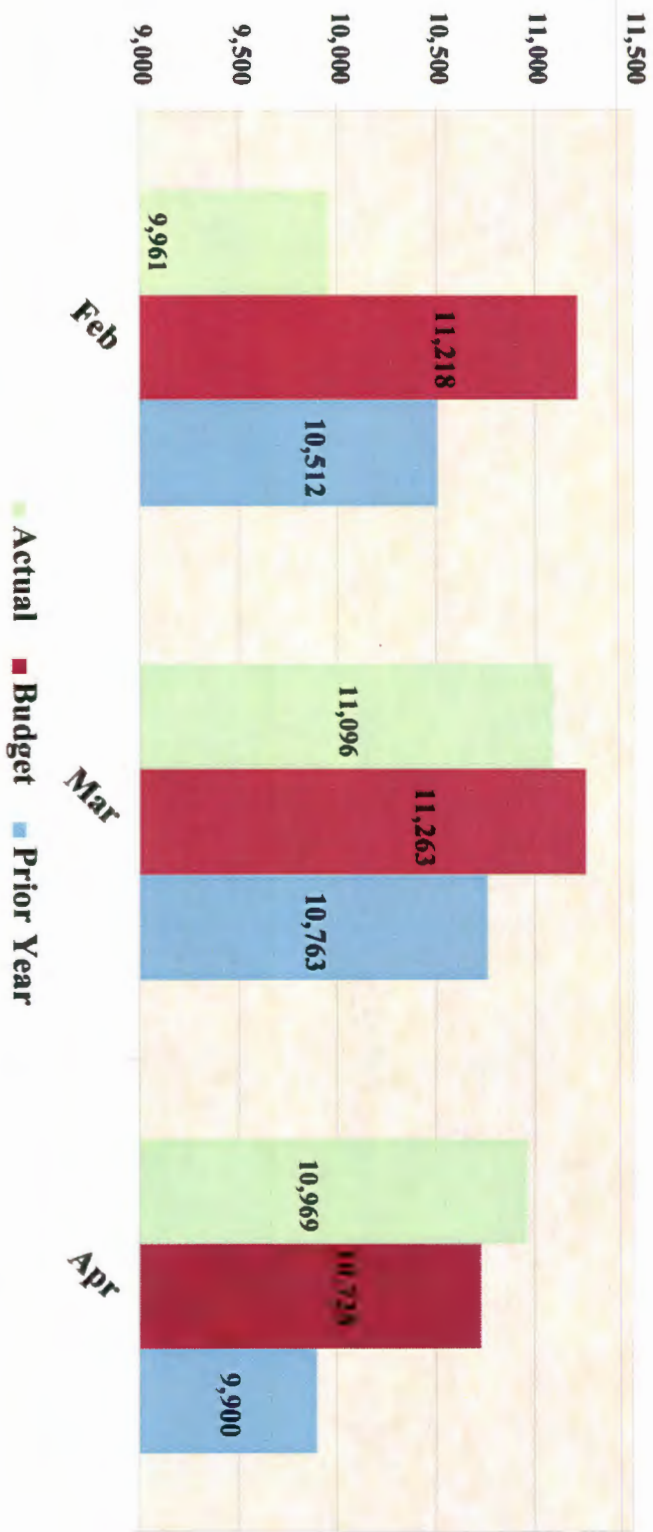


**YTD**  
**Actual**  
 103,062

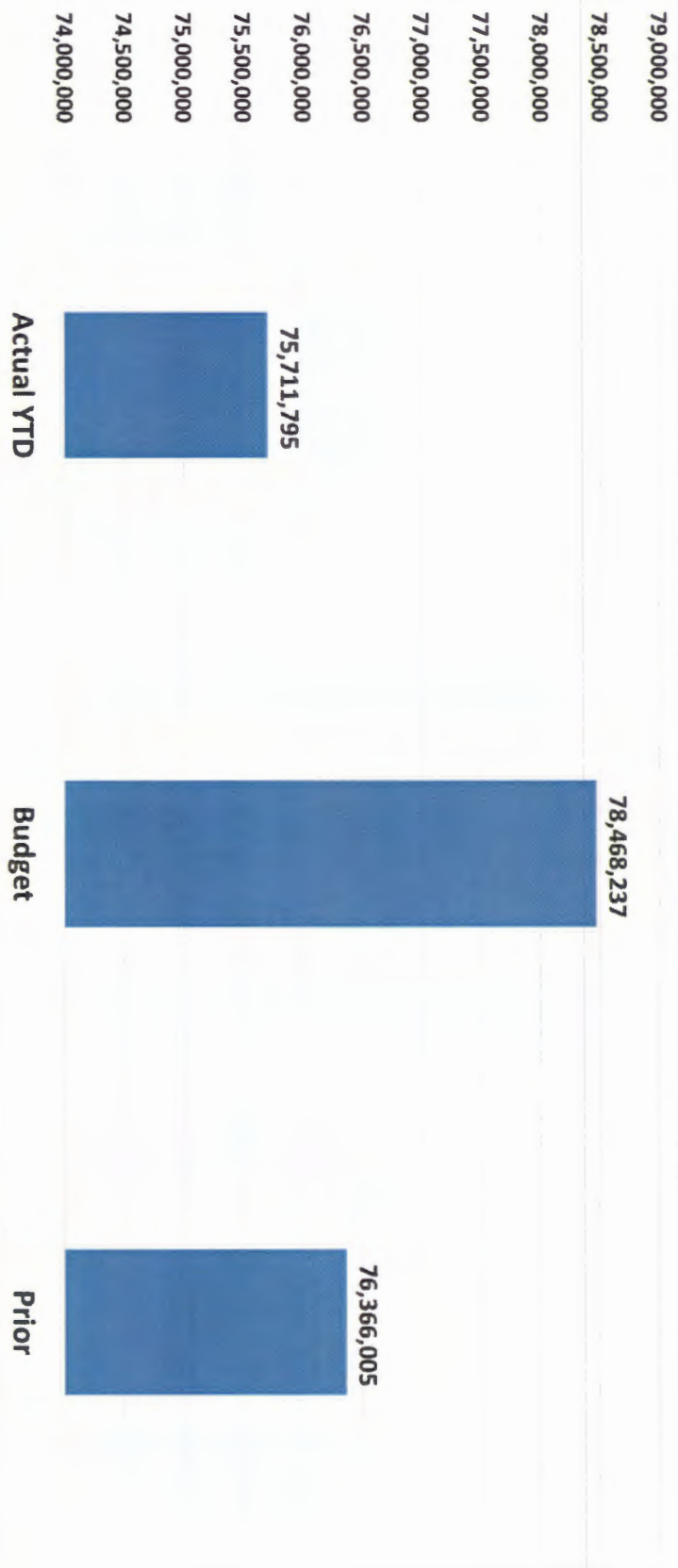
**Prior Year**  
 92,256



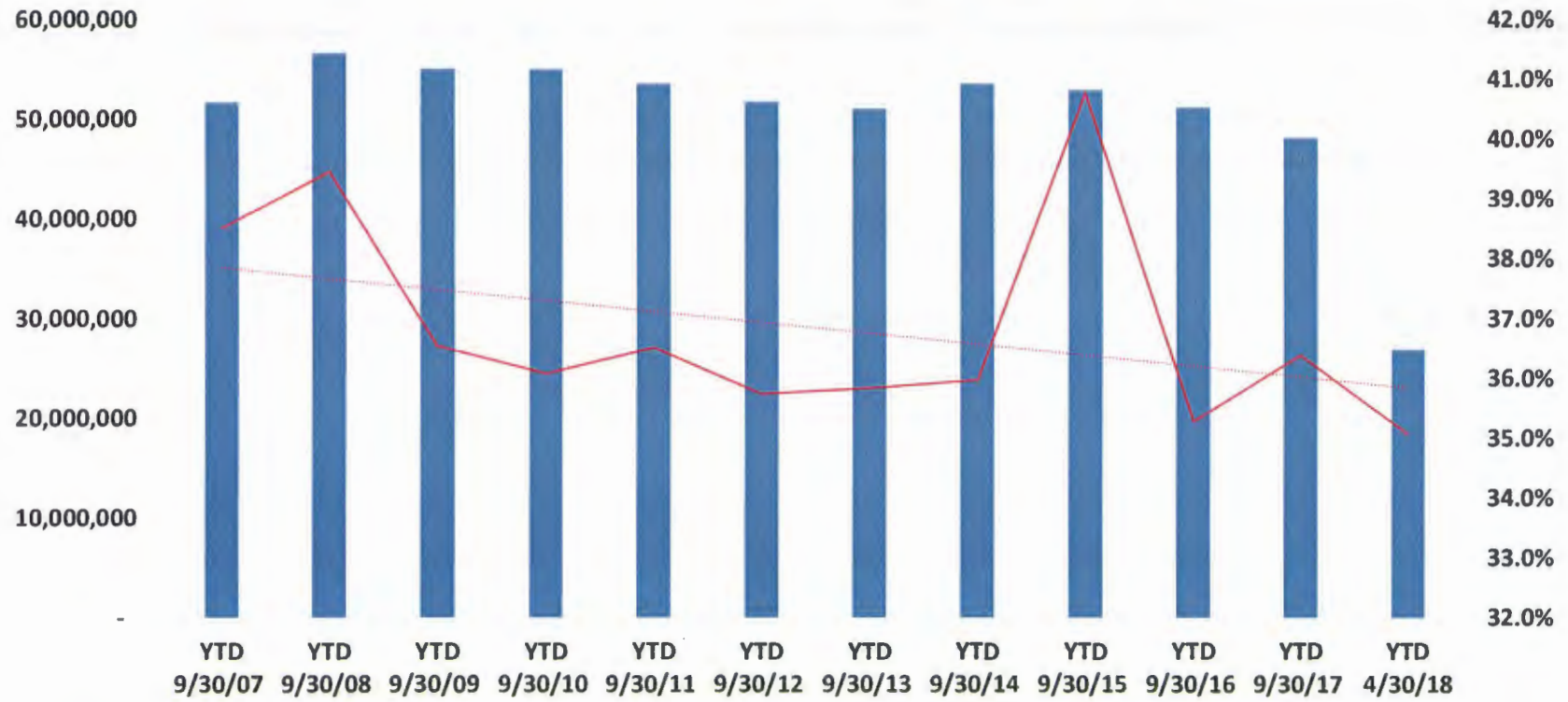
YTD	Actual	Budget	Prior Year	YTD	Actual	Budget	Prior Year
	\$18.1M	\$19.4M	\$18.7M		5.0%	5.2%	5.1%

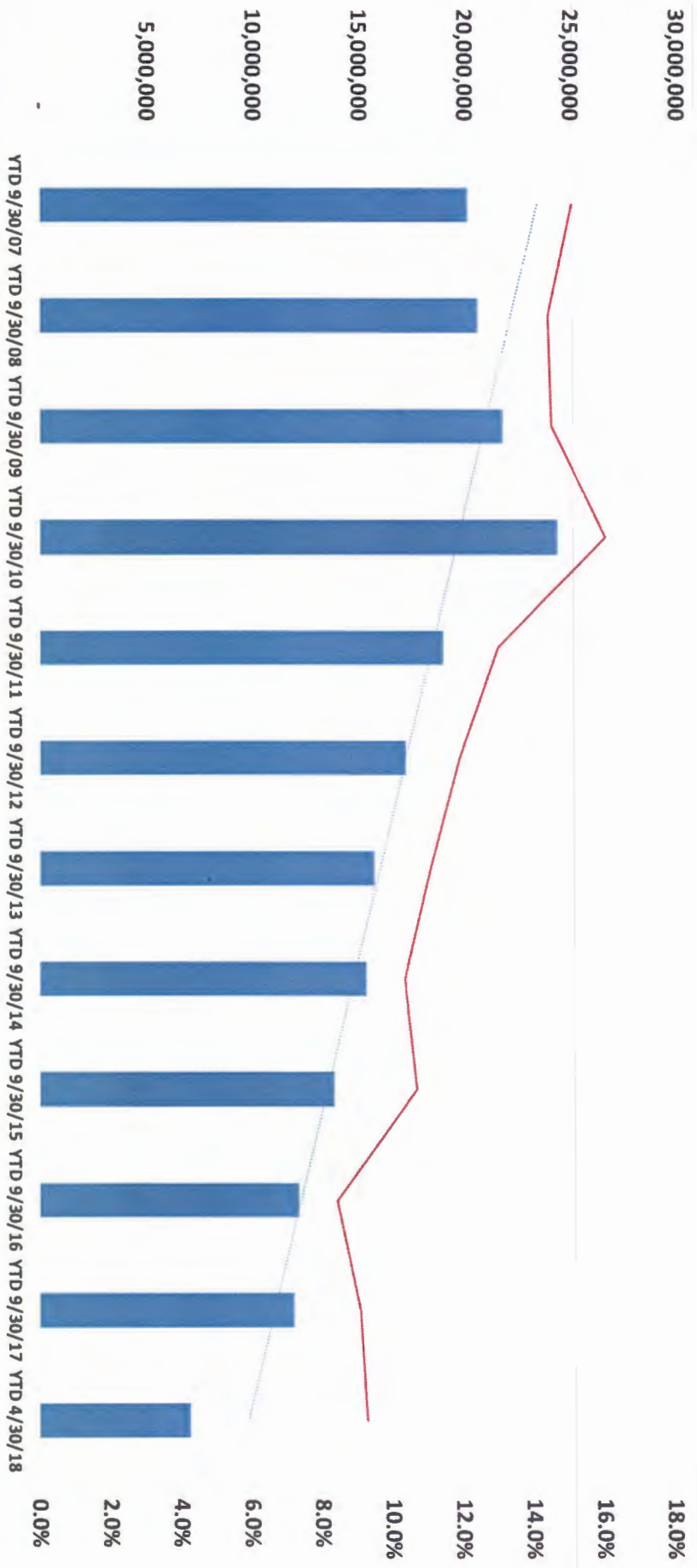


YTD	Actual	Budget	Prior Year
	\$75,712	\$78,469	\$76,366









# QUESTIONS?



**EXECUTIVE COMMITTEE**

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

**DRAFT AGENDA  
EXECUTIVE COMMITTEE  
NORTH BREVARD COUNTY HOSPITAL DISTRICT  
OPERATING  
PARRISH MEDICAL CENTER  
MONDAY, JUNE 4, 2018  
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 April 2, 2018 meeting.*

II. Reading of the Huddle

III. Public Comment

IV. Open Forum for PMC Physicians

V. Attorney Report – Mr. Boyles

a. Attorney David Doyle

VI. Parrish Lifelong Learning Center – Mr. Waterman

*Motion: To Recommend the Board of Directors authorize management moving forward with development and operation of the Learning Center.*

VII. July Board of Directors Meetings – Mr. Cole

VIII. Other

IX. 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 (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 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 April 2, 2018 in the Executive Conference Room.

The following members were present:

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

Members Absent:

George Mikitarian (non-voting)

Also in attendance were the following Board members:

Billie Fitzgerald  
Jerry Noffel  
Ashok Shah, M.D.  
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 1:51 p.m.

**REVIEW AND APPROVAL OF MINUTES**

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: MOTION TO APPROVE THE MINUTES OF THE FEBRUARY 5, 2018 MEETING AS PRESENTED***

**READING OF THE HUDDLE**

Dr. Galfo read the Weekly Huddle.

**PUBLIC COMMENT**

There were no public comments.

**RECESS**

Mr. Boyles requested the committee convene in Executive Session to discuss litigation matters.

The committee recessed at 1:57 p.m.

**RECONVENE**

The committee reconvened at 2:28 p.m.

**OPEN FORUM FOR PHYSICIANS**

Dr. Tronetti noted the upcoming March 30, 2018 Doctor's Day celebrations. She thanked the hospital and Administration for the activities planned and the recognition to physicians.

**HALIFAX IT PARTNERSHIP**

Mr. Loftin introduced Tom Stafford, VP and CIO of Halifax, who gave an overview of the Halifax history and experience. He discussed successful change initiatives, rounding, infrastructure and project management. Copies of the Power Point slides presented are appended to the file copy of these minutes.

Mr. Retz left the meeting at 3:27 p.m.

**ATTORNEY REPORT**

Mr. Boyles noted he would be sending to Board members the CEO evaluation, and asked that they be completed and returned.

**OTHER**

There was no other business to discuss.

**ADJOURNMENT**

There being no further business to discuss, the committee adjourned at 3:45 p.m.

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



**MEMORANDUM**

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**To:** Executive Committee  
**From:** Drew Waterman, VP Ambulatory Services  
**Subject:** Parrish Lifelong Learning Center  
**Date:** May 30, 2018

---

At the NBMS Board of Directors meeting, I had discussed and received approval for the development opportunity of a learning center to replace the Caladium Learning Center for our North Brevard community. The main drivers for the need are to fill the gap left behind by PBS change in services leaving 47 children without fulltime support.

Goal: To provide a nurturing, supportive environment for school-aged children with autism and developmental disabilities to gain functional skills necessary to live a successful, independent life to the fullest extent possible.

- Functional Skills Training
- Social Skills Training
- Behavioral Skills Training
- Functional Academic Skills Training

Total Projected Net Revenue	\$2,805,125
Total Expenses	\$2,269,190
<b>Operating Margin</b>	<b>\$635,935</b>
Overhead Expense Allocation	\$260,303
<b>Net Profit</b>	<b>\$375,632</b>
<b>Estimated Profit per Patient</b>	<b>\$13,531</b>

We recommend the approval of the development of the Learning Center.

***Motion: Recommend the Board of Directors authorize management to move forward with development and operation of the Learning Center.***

Should you have any questions, please do not hesitate to contact me at 321-268-6103 or email me at [drew.waterman@parrishmed.com](mailto:drew.waterman@parrishmed.com).

Attachments



## Medicaid Behavior Analysis Fee Schedule

HCPC S	Mod I	Mod II	Description	Rate
H0031	BA		Behavior Assessment	\$385.19/once per year
H0032	BA		Behavior Reassessment	\$192.59/end of each authorization period
H2019	BA		Behavior Analysis-Lead Analyst	\$19.05/quarter hour (\$76.20/hour)
H2012	BA		Behavior Analysis-Assistant Behavior Analyst	\$15.24/quarter hour (\$60.96/hour)
H2014	BA		Behavior Analysis-Technician	\$12.19/quarter hour (\$48.76/hour)
H2014	BA	GK	Behavior Analysis-Group (up to 6)	\$7.58/quarter hour (\$30.32/hour)

We would need to apply with Medicaid [www.mymedicaid-florida.com](http://www.mymedicaid-florida.com) to be a type 39 provider of Behavior Analysis Services. Per our contact the process for a new provider could take up to 6 months. As we are already a Medicaid provider and a large entity we may be able to request this be expedited.

The Medicaid Type 39 provider program is for The Agency for Health Care Administration has developed the Behavior Analysis (BA) service for Medicaid recipients under 21 years of age. The new service will be delivered by a specific provider type created for BA services (Provider Type 39). eQHealth authorizes for BA and just took this over from Beacon so it is a bit of a bottle neck.

Here is the Medicaid Behavior Analysis Fee Schedule:

Do you want to start this process?

Thanks

Timeline - TLC							
Activities	5-May	May 10 - June 1	May 10-June 30	1-Jul	30-Jul	August	
Apply for private school code- DOE	complete						
Job Descriptions/Contract development		X					
Organizational Chart - The Children's Center		X					
Hiring - Admin staff		5-Jun					
Hiring - educational/clinical staff			X				
Operational Set up in PMC/CC Department			X				
DOE scholarship participation checklist; Including building inspections, radon testing , fingerprints, etc.			X				
DOE Approval					15-Jul		
Gardner Application to DOE submit					18-Jul		
Medicaid Provider 39 Application submit			X				
Provide clinical services (will bill retroactive to date of app. Submittal once number is approved.				X			
Set up voice/computers/physical space at PMO			X				
APD Application submittal (adult program)					X		
Operational Policies/Procedures					X		
New enrollments for educational services					X		
Enrollment deadline - all students entered in system						2-Aug	
Transition to PMO building					27-Jul		
Clean out of Caladium Building on HWY 50					30-Jul		
First day of school						6-Aug	
<b>Question for PBS:</b>							
Will they agree to continue clinical services through June 30 (ie: summer camp) if PMC agrees to cover costs of facility/space and salaries for nonbillables?							

**DRAFT AGENDA**  
**BOARD OF DIRECTORS MEETING - REGULAR MEETING**  
**NORTH BREVARD COUNTY HOSPITAL DISTRICT**  
**OPERATING**  
**PARRISH MEDICAL CENTER**  
**JUNE 4, 2018**  
**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 (April 2, 2018)
- V. Recognition(s)
- VI. Open Forum for PMC Physicians
- VII. Public Comments
- VIII. Unfinished Business
- IX. New Business
- X. Medical Staff Report Recommendations/Announcements – Dr. Tronetti
- XI. Public Comments (as needed for revised Consent Agenda)

Consent Agenda

A. Finance Committee

1. Recommend to 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 FS274.05 and FS274.96.
2. Recommend to the Board of Directors approve the attached resolution as presented, related to US Bank.

3. Recommend to the Board of Directors to approve an increase in the capital budget for the replacement of the MRI hard drive tower at a total cost not to exceed \$93,000.

B. Executive Committee

1. Recommend the Board of Directors to authorize management moving forward with development and operations of the Learning Center.

XIV. 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 (Did Not Meet)
- E. Planning, Physical Facilities & Properties Committee (Did Not Meet)

XV. Process and Quality Report – Mr. Mikitarian

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

XVI. Other

XVII. Closing Remarks – Chairman

XVIII. Executive Session (if necessary)

XIX. 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.

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**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 April 2, 2018 in Conference Room 2/3/4/5, First Floor. The following members were present:

Herman A. Cole, Jr., Chairman  
Peggy Crooks  
Billie Fitzgerald  
Robert L. Jordan, Jr., C.M.  
Jerry Noffel (4:08)  
Maureen Rupe  
Pamela Tronetti, D.O.

Member(s) Absent:

Elizabeth Galfo, M.D.  
Stan Retz  
Ashok Shah, M.D

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 4:06 p.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 Ms. Crooks and approved (5 ayes, 0 nays, 0 abstentions). Mr. Noffel was not present when 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 Ms. Crooks and approved (5 ayes, 0 nays, 0 abstentions).

***ACTION TAKEN: MOTION TO APPROVE THE FEBRUARY 5, 2018 MINUTES AS PRESENTED.***

**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**

Mr. Cole provided the North Brevard Medical Support Liaison Report on behalf of Mr. Retz.

**MEDICAL STAFF REPORT RECOMMENDATIONS/ANNOUNCEMENTS**

None

**PUBLIC COMMENTS**

There were no public comments as there was no 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 (5 ayes, 0 nays, 0 abstentions).

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

A. Finance Committee

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 FS274.05 and FS274.96.

### **COMMITTEE REPORTS**

#### **Quality Committee**

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

#### **Budget and Finance Committee**

Ms. Crooks 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 Education Committee did not meet.

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

Mr. Jordan reported the Planning Committee did not meet.

### **PROCESS AND QUALITY REPORT**

None

#### **Hospital Attorney**

Legal counsel had no report.

#### **OTHER**

No other business.

### **CLOSING REMARKS**

Mr. Cole shared that the JPMF annual golf tournament will be held April 13, 2018 at La Cita Country Club and The Great Outdoors; this benefits The Children's Center.

BOARD OF DIRECTORS  
APRIL 2, 2018  
PAGE 4

**OPEN FORUM FOR PUBLIC**

No members of the public spoke.

**ADJOURNMENT**

There being no further business to discuss, the meeting adjourned at 4:09 p.m.

Herman A. Cole, Jr.  
Chairman



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

**May 15, 2018**

The regular meeting of the Medical Executive Committee of the North Brevard County Hospital District operating Parrish Medical Center was held May 15, 2018, at 6:00 pm in the Conference Center. A quorum was determined to be present.

**CALL TO ORDER**

Dr. Pamela Tronetti, President, called the meeting to order at 6:04 pm.

**REVIEW AND APPROVAL OF MINUTES**

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

***ACTION TAKEN:*** Motion to approve the previous meeting minutes (April 17, 2018) as written and distributed.

**The Joint Commission**

The Committee reviewed the 2018 Hospital National Safety Patient Goals. The 2018 Hospital National Safety Goals will remain included in the packet each month as a resource. A copy is appended to the file copy of these minutes.

***ACTION TAKEN:*** Noted by the Committee.

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

The Committee reviewed the current Hospital Consumers Assessment of Healthcare Providers and Services (HCAHPS) report. The questions related to physicians were highlighted. Dr. Tronetti noted that the results were not quite as good as March. The question regarding being treated with respect by physicians is currently at 87% with a goal of 88%. Dr. Tronetti reminded the committee to keep everyone focused on the patient experience.

***ACTION ITEM:*** Noted by the Committee.

**Quality**

The Committee reviewed the Board Quality minutes (March 5, 2018), and the Quality Value Dashboard for March 2018. Copies are appended to the file copy of these minutes.

***ACTION TAKEN:*** Noted by the Committee.

**New Business**

Dr. Tronetti welcomed Dr. Vidya Hate as the new chair of the department of Obstetrics and Gynecology.

***ACTION TAKEN:*** Noted by the Committee.

MEDICAL EXECUTIVE COMMITTEE – REGULAR

May 15, 2018

PAGE 2

Dr. Tronetti asked the committee if there is a need to address medical staff resignations in the Medical Staff Rules and Regulations to ensure proper notice is received for updating the Medical Staff files.

**ACTION TAKEN:** Motion to add to the Medical Staff Rules and Regulations that notice of resignation should be given to the Medical Staff Services office at least one month prior to leaving Parrish Medical Center.

The authorization requirements for in-hospital radiologic studies discussion was tabled until the next meeting where Dr. Manion will present.

**ACTION TAKEN:** Noted by the Committee.

**For Information Only**

The Committee noted the following for the Committee’s review. Copies are appended to the file copy of these minutes.

1. Joint Commission *Perspectives* – May 2018
2. Pharmacy Drug Shortages memo- May 2018
3. Meditech Enhancements- May 2018

**ACTION TAKEN:** Noted by the Committee. Copies are appended to the file copy of these minutes.

**REPORT FROM ADMINISTRATION - Board of Directors Minutes, Game Plan Score Card, and Financials/Budget**

The Committee reviewed the Board of Directors Regular Board of Directors Meeting minutes (March 5, 2018) from the Board of Directors packet. Copies are appended to the file copy of these minutes.

**ACTION TAKEN:** Noted by the Committee.

Drew Waterman discussed our current Leapfrog safety score and emphasized the importance of the hospital’s HCAHPS scores in determining our performance.

**ACTION TAKEN:** Noted by the Committee.

**CONSENT AGENDA**

- A. Approval of revisions to ED Code Stemi Protocol (E3344). Removal of I Stat Lab and replacing the order for a BMET with an order for a CMET. Approved by Dr. Cuculino and Dr. Ratzel April 2018.

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

**1.ACTION TAKEN:** Motion to approve the ED Code Stemi Protocol as presented.

- B. Approval of hospital policy 9500-35, “Clinical Research Activities”

**1.ACTION TAKEN:** Motion to send the policy out for review by the MEC and table approval to the next MEC meeting.

- C. Approval of hospital policy 9500-2022, “Use and Management of Patient Restraints”

**1.ACTION TAKEN:** Motion to send the policy out for review by the MEC and table approval to the next MEC meeting.

- D. Approval of hospital policy “Medical Records Completion”

**1.ACTION TAKEN:** Discussion ensued and the committee made a motion for an ad hoc group of Dr. Rojas, Dr. Barimo, and Dr. Modi to review the policy in comparison to the Rules and Regulations. The purpose of this group is to see which elements of the policy need to be addressed/added to the Rules and Regulations.

#### Medical Staff Resignations

The Committee reviewed the list of Medical Staff resignation of the following:

- a. Dr. Bryan Peterson- Diagnostic Imaging- April 2018
- b. Marc Hull, PA-C- Emergency Dept.- April 2018
- c. Dr. Lena Weinman- OB/GYN- May 2018
- d. Dr. Sandra Ogata-Keefe- Family Practice- May 2018
- e. Gregory Crosby, PA-C- Emergency Dept.- May 2018
- f. Dr. Kenneth McElynn- Family Practice- June 2018

**ACTION TAKEN:** Noted by the Committee.

#### COMMITTEE REPORT(S)

The Committee reviewed the committee minute(s) of the following committees:

1. P&T committee April 25, 2018
2. Ethics committee May 11, 2018

A copy is appended to the file copy of these minutes. The following motion was made, seconded and unanimously approved.

**ACTION TAKEN:** Motion to accept the committee report(s) as presented.

#### CLINICAL DEPARTMENT REPORT(S)

The Committee reviewed the department minute(s) of the following departments:

- A. OB/GYN April 18, 2018
- B. Pediatrics April 20, 2018
- C. Emergency April 24, 2018
- D. Anesthesia May 9, 2018

Copies are appended to the file copy of these minutes. The following motion was made, seconded and unanimously approved.

**ACTION TAKEN:** Motion to accept the department report(s) as presented.

#### OPEN FORUM

Dr. Mathews would like more information on how medications are determined for certain indications during shortages. He would like to discuss further with the Pharmacy and Therapeutics committee.

***ACTION TAKEN:*** Noted by the Committee.

Dr. V. Williams would like the OB/GYN department to better communicate STAT requests to the anesthesia team.

***ACTION TAKEN:*** Noted by the Committee. Dr. Hate will discuss with the OB/GYN department.

Dr. R. Patel would like to remind the Emergency department to address post-operative patients using best practices for wound healing and follow up.

***ACTION TAKEN:*** Noted by the Committee. Dr. Cuculino will discuss with the Emergency department.

Dr. Cuculino provided an update on the opioid initiative requirements. All prescribing physicians will have to register with the Prescription Drug Monitoring Program (PDMP) and check the database each time opioids are prescribed effective July 1, 2018. There are CME courses available online that provide education on this subject.

***ACTION TAKEN:*** Noted by the Committee. Dr. Cuculino will present further information at the June 5 General Medical Staff Meeting.

### **MEETINGS**

Upcoming meeting schedules are posted and available in the Medical Staff

***ACTION TAKEN:*** Noted by the Committee.

### **ADJOURNMENT**

There being no further business, the meeting adjourned at 7:25 pm.

Pamela Tronetti, DO  
President/Medical Staff

Pedro Carmona, MD  
Secretary - Treasurer



## MEMORANDUM

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**To:** Board of Directors

**Cc:** Bill Boyles, Esquire  
Pamela Tronetti, D.O.

**From:** George Mikitarian  
President/CEO

**Subject:** Board/Committee Meetings – June 4, 2018

**Date:** May 22, 2018

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**New ID badges will be issued on June 4, 2018. Those attending Ad Hoc Credentials Review Committee are asked to arrive at 11:00 a.m. All other will be issued during Quality Committee.**

**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 Quality 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 Board of Directors regularly scheduled meeting will be held immediately following, however no earlier than 3:00 p.m.

The Education and Planning Committee meetings have been canceled.