

Shelton Anthony, CEO MHA/MBA Administration Department 301 Memorial Drive Donaldsonville, LA 70346 (337) 290-0837 or (225) 473-7931 Shelton.anthony@westaph.org



West Ascension Parish Hospital Service District

Board of Commissioners Meeting Agenda

Date: July 31th, 2025

Time: 6:00pm

Location: West Ascension Parish Hospital – Board Room

301 Memorial Drive, Donaldsonville, LA

- 1. Call to Order
- 2. Roll Call
- 3. Invocation and Pledge of Allegiance
- 4. Approval of Minutes
 - Board Meeting held on June 26, 2025

5. Public Comment

Limited to agenda items; 3-minute time limit per speaker.

6. Reports of Standing Committees

- 1. Financial Report
- 2. Sales Tax Report
- 3. Medical Executive Committee Report (2nd Quarter)
- 4. Utilization Review Committee Report (2nd Quarter)
- 5. Operative and Invasive Procedures Committee Report (2nd Quarter)
- 6. Emergency Room and Quality Improvement Committee Report (2nd Quarter)
- 7. Safety and Environment of Care Committee Report (2nd Quarter)
- 8. Cybersecurity Committee Report
- 9. Leadership and Administrative Committee Report
- 10. Board of Commissioners Report

A. Chairman Report





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Old Business

(None to bring before the Board of Commissioners)

VII. New Business

- 1. Applications for Review and Approval
 - o Temporary Privileges, Full Privileges, and Reappointments for Medical Staff
- 2. Financial Statements & Independent Auditor's Report for Year Ending 8/31/2024
- 3. Budget FY26 Approval
- 4. Capital Budget FY26 Approval
- 5. Approval of Pharmacy Policies and Procedures (Items Policies 1–34)
- Prev1000 Mission Statement
- Prev1010 Pharmacy And Therapeutics
- Prev1030 Substitution
- Prev1040 Sales Reps
- Prev1050 Posting Of License And Permits
- Prev1070 Retention Of Records
- Prev1080 Confidentiality
- Prev1090 Security And Theft
- Prev1100 Formulary
- Prev1120 Competency Assessment
- Prev1130 Pharmacy Orientation Checklist
- Prev1140 Medication Errors
- Prev1150 Manufacturing And Packaging
- Prev1160 Disaster Plan
- Prev1180 Environmental Safety
- Prev1190 Infection Control RX
- Prev1200 Poison Antidote Information
- Prev1240 Medication Expiration Dates And OutDates
- Prev1250 Security and Storage Of Medications
- Prev1280 SOP IV Admixtures
- Prev1290 USP Chapter 797 Guidelines
- Prev1300 Power Of Attorney
- Prev 1320 Contrast Media Procurement And Storage
- Prev1330 Destruction Of Home Meds
- Prev1340 Dispensing Authority





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- Prev1380 Labeling Of IV Bags
- Prev1390 Inpatient Medication Procedure
- Prev1400 Labeling Medications Dispensed
- Prev1420 Medication Area Inspections
- Prev1430 Medication Expiration Date
- Prev1440 Medication Samples
- Prev1460 Recall Procedures
- Prev1470 Herbal Or Natural Products
- Prev1480 Medication Order Elements
- 6. Approval of Grievance Policies and Procedures (Items Policies 1-4)
- Suicide Prevention Program And Ligature Risk Reduction Policy QD 017
- Patient Rights, Advocacy, And Grievance Notification Policy QD 018
- Grievance Committee Oversight And Reporting Policy QD_019
- Grievance Committee Process QD 019b
- 7. Approval of Nursing Policies and Procedures (Items Policies 1-10)
- Patient Observation And Suicide Precautions Policy Nuse-011
- Pain Assessment And Management Policy Nurse 012
- Safe Injection Practices And Medication Administration Policy Nurse 013
- Patient Education And Health Literacy Policy Nurse 014
- Blood Administration And Transfusion Reaction Monitoring Policy 015
- Peripheral Intravenous (IV) Therapy And Maintenance Policy 016
- Central Line Maintenance And CLABSI Prevention Policy 017
- Patient Admission, Transfer, And Discharge Policy 018
- Nursing Documentation Standards Policy 019
- Nursing Scope Of Practice, Delegation, And Supervision Policy 020





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- 8. Moderate/ Conscious Sedation Nursing Policies and Procedures (Items Policies 1-6)
- Moderate Sedation Policy 021
- Nursing Services Moderate Sedation Audit Tool 021a
- Nursing Services ASA Physical Status Classification Guide 021b
- Nursing Services Moderate Sedation Documentation Form 021c
- Nursing Services Aldrete Recovery Scoring Tool 021d
- Nursing Services Moderate Sedation Education Module
- 9. Summer Health Discovery Presentation







VIII. Executive Session

IX. Adjournment





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WEST ASCENSION PARISH HOSPITAL BOARD OF COMMISSIONERS MEETING

This is a confidential report, as it is a report of this Board of Commissioners and the exercise of its functions.

DATE: July 31, 2025

TIME: 6:00 pm

PLACE: West Ascension Parish Hospital

MEMBERS:

Mr. William "Bill" Dawson, Chairman

Mr. Glen Price, Vice Chairman

Dr. Charie Mitchell Levy, Secretary/Treasurer

Ms. Tanya Scott Mitchell, Board Member

Mr. Falcon Mire, Board Member

Mr. Shelton Anthony, Administrator

OTHERS PRESENT:

Mr. Kevin Causey, Mr. James Breaux, Mrs. Anastasia Montgomery, Mr. Jason Leblanc (Lester, Miller, & Wells)

ABSENT: None

HOSPITAL ATTORNEY: Kenneth Dupaty

GUEST:

I. CALL TO ORDER

<u>Mr. Dawson</u> called the meeting of the West Ascension Parish Hospital Service District to order at <u>6pm.</u>





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By Roll Call of all Board Members, Mr. Wright asked for present, from Board Members:
Mr. Bill (Present) √, (Absent)
Mr. Glen (Present) √, (Absent)
Dr. Levy (Present) √_, (Absent)
Ms. Tanya Mitchell (Present)_ √, (Absent)
Mr. Falcon (Present) √, (Absent)
Mr. Shelton Anthony (Present) √, (Absent)

III. INVOCATION and PLEDGE of ALLEGIANCE

Pledge of Allegiance was led by Mr. Dawson. Prayer was led by Mr. Price.

IV. READING AND APPROVAL OF MINUTES: by Mr. Anthony

A. A motion by <u>Mr. Dawson</u> to dispense the reading of the minutes and approve the minutes of Thursday, June 26, 2025. The motion was seconded by <u>Mr. Mire</u> and the motion **passed**. The motion **passed** without any objections.

V. Public Comment Period

Mr. Anthony and Mr. Dawson Opened the floor to any public comments at this time, who noted that the Public Comment period was open for anyone who wishes to speak on behalf of any agenda topic, with a limit of 3 minutes per public member. Mr. Austin Wright asked Mr. Anthony to read the names of the listed speakers for Public Comment on the record and each topic: Mr. Anthony reported that 3 visitors were present; however, no one listed to speak on behalf of public comment section.

VI. Reports of Standing Committees

A. Monthly & Quarterly Reports were presented with the exception only, reading of meetings by **Mr. Anthony.**







A. Financial Report

The monthly financial report was presented by Mr. 1. Anthony. On a motion by Mr. Dawson and a second by Mrs. Mitchell, the financial report was accepted as presented. (Income Statement/ Balance Sheet/ Capital Analysis- available in attachments)

Income Statement:

	MTD Actual	MTD Budget	Change	Variance	YTD Actual	YTD Bdgt	Change	Variand
Group / Acc. Name	06/30/25	06/30/25	\$	96	06/30/25	06/30/25	\$	%
Revenue								
Net Patient Revenue	679,690	343,532	336,158	98%	5,337,544	3,435,316	1,902,228	559
Other Operating Revenue	230,531	219,148	11,383	5%	1,474,423	2,191,479	(717,056)	-339
Revenue	910,221	562,680	347,541	62%	6,811,968	5,626,796	1,185,172	219
Net Operating Expenses								
Employee Related Expenses	571,763	411,474	160,290	39%	3,325,523	4,114,737	(789,214)	-19
Purchased Services	382,200	168,856	213,343	126%	2,364,400	1,688,565	675,836	40
General Office	26,812	37,514	(10,701)	-29%	375,254	375,139	115	0
Occupancy	74,960	64,975	9,986	15%	508,117	649,746	(141,629)	-22
Supplies Detailed	68,726	63,018	5,707	9%	504,982	630,182	(125,200)	-20
Other	(407,555)	(201,221)	(144,562)	103%	(1,598,886)	(2,012,209)	413,323	-21
Net Operating Expenses	716,907	544,616	234,063	32%	5,479,391	5,446,160	33,231	1
Net Operating Performance	193,314	18,064	113,478	970%	1,332,577	180,635	1,151,941	638
Capital Related Revenue and Expenses								
Interest Income	359		359		2,729		2,729	
Capital Related Revenue and Expenses	359		359		2,729		2,729	
Net Income	193,672	18,064	113,837	972%	1,335,306	180,635	1,154,670	639







Balance Sheet:

	Month Ending 06/30/25	Month Endin 08/31/24
Assets		
Current Assets		
Cash and Cash Equivalents	25,058,344	24,485,899
Net Patient AR	4,056,609	2,517,261
Other Receivables	(0)	(0)
AR Other - Suspense	(3,298)	(15,530)
Inventory	350,308	310,158
Prepaid Expenses	359,075	315,467
Current Assets	29,821,038	27,613,255
Fixed Assets	6,713,174	5,998,169
Total Assets	36,534,212	33,611,424
Total Assets Liabilities and Unrestricted Earnings	36,534,212	33,611,424
	36,534,212	33,611,424
Liabilities and Unrestricted Earnings	36,534,212 928,285	33,611,424 295,208
Liabilities and Unrestricted Earnings Liabilities		295,208
Liabilities and Unrestricted Earnings Liabilities Current Liabilities	928,285	
Liabilities and Unrestricted Earnings Liabilities Current Liabilities Liabilities	928,285	295,208
Liabilities and Unrestricted Earnings Liabilities Current Liabilities Liabilities Unrestricted Fund Balance	928,285 928,285	295,208 295,208 34,062,478
Liabilities and Unrestricted Earnings Liabilities Current Liabilities Liabilities Unrestricted Fund Balance Fund Balance	928,285 928,285 35,412,254	295,208 295,208







Capital Analysis:

Acc.	Group / Acc. Name	MTD Actual 06/30/25	YTD Actual 06/30/25
	Capital Review		
	Amount Approved by WAPH Board		1,700,000
	Fixed Assets		
160000	Land Improvements -P P & E	-	
160010	Equipment -P P & E	13,337	373,087
160020	Furniture & Fixtures-P P & E	-	(0)
160030	Buildings -P P & E	13,800	168,857
160040	Ehr Implementation	-	-
160050	Computer Software	-	9,850
160060	Land-PP&E		332,578
160070	Water Well/Pump Shed-P P & E	-	-
160080	Automotive Equipment-P P & E	-	1,453
160090	Cip-PP&E	43,300	215,579
	Total Fixed Assets	70,437	1,101,404
	Remaining Capital Balance		598,596







2. Sales Tax Report The monthly Sales Tax Report was presented by Mr. **Shelton Anthony** and accepted by the Board. (Sales Tax- available in attachments)

West Ascension Parish Hospital Sales & Tax Collection Summary | Ascension Parish Sales and Use Tax Authority



As of Date: 6/30/2025

Location: 1--West Ascension Parish Hospital

S&UTA Report Period	Return Month	09/2023 - 08/2024	Deposit Date	09/2024 - 08/2025	Deposit Date
October	September	154,343		174,452	11/07/2024
November	October	160,022		224,973	12/09/2024
December	November	153,195		163,045	01/08/2025
January	December	175,574	02/07/2024	185,597	02/07/2025
February	January	155,489	03/07/2024	125,123	03/07/2025
March	February	166,907	04/08/2024	166,432	04/07/2025
April	March	155,505	05/07/2024	217,568	05/07/2025
May	April	139,527	06/05/2024	212,270	06/07/2025
June	May	126,616	07/09/2024	168,456	07/07/2025
July	June	151,109	08/07/2024		
August	July	151,021	09/09/2024		
September	August	148,756	10/07/2024		
	Total	1,838,064		1,637,916	

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B. Monthly Standing Committee Reports

1. Mr. Anthony read the MEC report to the Board. The MEC met on 07/15/2025 and <u>approved</u> the MEC Report to send to the Board of Commissioners for final approval. On a motion by <u>Mr. Dawson</u> and seconded by <u>Mr. Mire</u> the Board of Commissioners accepted the MEC report. Motion <u>approved</u> without objection.

2. Utilization Review

- Mr. Anthony presented to the Board the Utilization Review Report with 19 total patient visits from Social Services. 0 Medical Admits, 0 Denials and 0 Physician Quality Problems, 3 Consultations, 9 Observations, and 6 Referrals







REPORTS OF STANDING COMMITTEES

1. **Utilization Review Committee**

SOCIAL SERVICES	June 2025
Total Patient Visits	19
Admits	2
Consultations	3
Observations	9
Referrals	6

Community Outreach/ Summer Interns 25 Interns * 36hrs = 900Hrs

MEDICAL REVIEW	June 2025
Medicaid Admits	0

MONTHLY DENIALS	June 2025
Denials	0

PHYSICIAN QUALITY	June 2025
PROBLEMS	
Acute / Observation Chart	0
Hospice Charts	0
Swing Charts	0

An incomplete chart would be missing one or more of the following: H & P, Discharge Summary, Unsigned Orders. 0 Chart noted







Notice of Facility Quality Problems: None for June 2025

Notice of Admission Denial: None for June 2025

MEDICARE / LHCR REVIEW	June 2025
Acute	0
Swing	0
Hospice	0
Inpatient Charts Requested for Review	0

	Т			
QA/I REVIEW	June 2025			
ADMISSIONS				
(Observations not included	<u>d)</u>			
Acute Admissions	3			
Observations	13			
Swing Admissions	0			
Hospice Admissions	0			
DISCHARGES				
Acute Discharges				
 Acute Discharged – Home 	3			
 Acute Discharged – Another 	0			
Facility				
 Acute Discharged – Nursing 	0			
Home				
 Acute Discharged – Swing 	0			
 Acute Discharged – Hospice 	1			
 Acute Discharged – Left AMA 	0			
(against medical advice)				
Swing Discharges	0			
Hospice Discharges	0			
DEATHS				
Acute Deaths	0			
Swing Deaths	0			
Hospice Deaths	0			

The Medical Staff/MEC Approved this report as presented







Operative and Invasive Procedures Committee 2. Wound Care Clinic

WOUND CARE CLINIC	June 2025
Patients seen	42
Specimen submitted	0
Admits	4
Discharges	8

Emergency Department

EMERGENCY DEPT.	June 2025
Specimens received	0

Pathologist Review

PATHOLOGIST REVIEW	June 2025
Wound Care Specimens	0
OP/Emergency	0
Non-Gyn Cytologies	0

The Medical Staff/MEC approved this report as presented.





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3. Quality Committee

- a. The Medical Executive Committee reviewed the minutes of the Emergency Room Committee meeting. Motion to approve the minutes as presented by <u>Dr. Gruezke</u>, Second by <u>Dr. Punukollu</u>. There were <u>0</u> objections to the minutes as presented.
- Mr. Anthony called for approval of the MEC Report. On a motion made by <u>Mr.</u>
 <u>Dawson</u>, seconded by <u>Mr. Price</u> the MEC Report was <u>approved</u>.

ER STATS	June 2025
Total Patients Registered	434
Total Patients Seen	434
Admissions	3
Observations	13
Transfers to another facility	37
Code	1
Positive Outcomes	0
Expired (DOA)	1
AMA	8
Left without being seen (includes triage)	0
Left prior to triage	0
Eloped (LDTX)	3
Returns to ED within 72 Hours	6
Returns w/same symptoms	6
Returns w/different symptoms	0
Total # of X-rays	129
# of CT scans (ER)	112
Ultrasounds ER	0







Monthly ER Test Totals/Positive Results					
	June 2025				
Test Name Total orders Positive Results % Positive					
Flu A&B, Rapid	70	0	0%		
Strep A, Rapid	51	3	.058%		
RSV (≤18 yrs. &	12	0	0%		
≥60 yrs)					
COVID-19					
Swab,	82	7	0.85%		
PCR/NAA					

The lab also reported there were zero (0) patients without armbands.

The Medical Staff/MEC accepted this report as presented. The Board of Commissioners **approved** this report as presented.

Respiratory Therapy Stats

Respiratory	June 2025
Total ABG's	5
Pulmonary Functions	0
Oxygen Hours	504
Incentive Spirometry	3
Hand Held Neb Treatments	24
CPT	0
Sputum	0
Suction	0
Pulse Oximetry	7
Intubation	0
Extubation	0
Bipap Hours	3
Vent Hours	0
Total Respiratory Therapy Patients	0
EKG (Verified with book in E.R.)	103
Glide Scope	0







Blood Usage Report June 2025

Blood Transfusions

				_		
Units Procured	17					
	MEDICAL	SURGICAL	PEDIATRIC	OB-GYN	OTHER	TOTAL
Patient Crossmatch	0	0	0	0	0	0
Recipients of Transfusion	0	0	0	0	0	0
Units Crossmatched	0	0	0	0	0	0
Units Transfused	0	0	0	0	0	0









Safety Committee (6/01/2025 to 6/30/2025) 4.

a. Committee Reports

1. **Environment of Care**

	Environment of Care Plans	Date Tested/Checked
1.	Equipment Management Plan	On Going
	Kenwood HRSA Radio Test	Every Third Thursday
	Generator Test: 40KW, 40KW, 300KW	Done on
		Every Monday for 30 Minutes 6-30-25
2.	Safety/risk Management Plan	On Going
	No Activity -Continued Monitoring	ongoing
3.	Utilities Management Plan	On Going
	Line Isolation Test	Placed not in use
	Medical Gas Testing	6-30-25
4.	Fire Prevention Plan/ Life Safety Management Plan	On Going
	Fire Extinguisher Inspection	6-28-25
	Louisiana Fire Extinguisher Tagged all Fire Extinguishers Next inspection unless a problem occurs	Scheduled for quarterly sprinkler
	Oxygen cut off valves	6-30-25
	Fire Marshall Visit	Due for annual Visit
	Ground Fault Testing and hospital Electrical Panels	6-30-25
5.	Security Management Plan	On Going Security
	In-services for Lofton Workers	24 Hours a day
6.	Hazardous Materials and Waste Management Plan	On going Scheduled
	Emergency Showers	6-27-25
	Red Bags camaras ongoing	As of 7-7-25 completed
	Need to get more employees training to sigh for red bags	
	Emergency Management	On going
	Continuously Monitoring	All other aspects of Safety
	Exit Signs	Door Inspections 6-30-25





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Reports

a. Incident Reports

June 2025		
INCIDENTS	No. of Incidents	
Employee	0	
Physician	0	
Outpatient	0	
Visitor	0	
Occurrence	0	
Patient	0	
Complaint		

b. Security Reports

- 1. (New Crisis Reporting Document)
- 2. 24 Hour Security coverage with multiple shift rounds
- 3. Product Recall- No items listed

5. Cyber-Security Committee

a. No major changes to report

CEO Report:

- We've turned around a \$2.3 million deficit and are now sitting at a net positive of \$1.3 million year-to-date, with 11 straight months of positive financial gains.
- We've officially signed our agreement to bring in EPIC Community Connect as our electronic health record system, with rollout meetings beginning the first week of August.
- CT Scan

6a. Leadership Team

a. No issues are updated to report currently.







7. Complaints

1. There were zero patient complaints in June.

A. Chairman Report- Nothing to report at this time.

On a motion made by **<u>Dr. Levy</u>**, seconded by **<u>Mr. Price</u>**, the standing committee reports were accepted as presented.







4. OLD BUSINESS

- Mr. Anthony read that there were no items of Old Business to the Board without any discussion.





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VII. New Business

1. Applications for Review and Approval of Privileges (Full & Temporary) Mr. Anthony presented the following to the Board of Commissioners for application review and approval.

Mr. Anthony asked for a motion to be made for: Dr. Everett Brown, Dr. Stephen Fischer, ER/Hospitalist, Blue Angels (Full Privilege)

- On a motion made by <u>Mr. Mire</u>, seconded by <u>Mr. Dawson</u>, without further discussion, approved of Full Privilege (2-year Approval Review)
- Mr. Anthony presents to the Board of Commissioners for application Review and Approval of Dr. Ali Sharif (Full Privilege), Radiology, Stat Rad.
- On a motion made by **Mr. Price**, seconded by **Mr. MIre**, without further discussion, <u>approved</u> for Full Privilege.

Doctor	Currently with	Specialty	Privileges
Dr. Everett Brown	Blue Angels	ER/Hospitalist	Full Privileges
Dr. Stephen Fischer	Blue Angels	ER/Hospitalist	Full Privileges
Dr. Ali Sharif	Stat Rad	Radiology	Full Privileges

Consideration and review of applications provided from MEC by Mr. Austin Wright and Mr. Shelton Anthony and presented to Full Board of Commissioners.

On a motion by Mr. Dawson seconded by Mr. Price to affirm physicians for Full Privileges.





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- 2. Financial Statements & Independent Auditor's Report for Year Ending 8/31/2024
 - Mr. Jason Leblanc (From Lester, Miller, and Wells) presented to the Board of Commissioners the Report and Findings of the Financial Statements with the Independent Auditor's Report For Year ending 8/31/2024. Mr. Leblanc reviewed the findings to the Board of Commissioners. Board of Commissioners were given time to ask questions in regards to the audit findings. Mr. Leblanc informed the Commissioners that this audit took longer than expected due to the turnover in leadership; however, all aspects have been addressed at this time. On a motion made by Mr. Dawson and seconded by Mr. Price the Audit Report was approved and accepted.

3. Budget FY26 Approval

- Mr. Anthony reviewed the Budget FY26 to the Board of Commissioners. Mr. Anthony allowed for the Board of Commissioners time to make questions in regards to the operational budget. On a motion made by Mr. Mire. Seconded by Mrs. Mitchell, the FY26 Budget was approved by Board of Commissioners, this operational budget is moved from Board of Commissioners to be presented to the Ascension Parish Council for final approval.

4. Capital Budget Approval

- Mr. Anthony reviewed the Capital Expenditure Budget and presented it to the Board of Commissioners. Mr. Anthony allowed for Board of Commissioners to discuss and ask questions in regards to Capital Expenditures. On a motion made by Mr. Mire, seconded by Dr. Levy. The Capital Expenditure Budget was approved by the Board of Commissioners. This Capital Expenditure Budget will move to the Ascension Parish Council were it will be presented for final approval.





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- 5. Pharmacy Services Policies and Procedures Approval
 - Mr. Anthony presented to the full Board of Commissioners Pharmacy Services Policies and Procedures (1-34) for annual review. These policies include the following:
 - Prev1000 Mission Statement
 - Prev1010 Pharmacy And Therapeutics
 - Prev1030 Substitution
 - Prev1040 Sales Reps
 - Prev1050 Posting Of License And Permits
 - Prev1070 Retention Of Records
 - Prev1080 Confidentiality
 - Prev1090 Security And Theft
 - Prev1100 Formulary
 - Prev1120 Competency Assessment
 - Prev1130 Pharmacy Orientation Checklist
 - Prev1140 Medication Errors
 - Prev1150 Manufacturing And Packaging
 - Prev1160 Disaster Plan
 - Prev1180 Environmental Safety
 - Prev1190 Infection Control RX
 - Prev1200 Poison Antidote Information
 - Prev1240 Medication Expiration Dates And OutDates
 - Prev1250 Security and Storage Of Medications
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- Prev1380 Labeling Of IV Bags
- Prev1390 Inpatient Medication Procedure
- Prev1400 Labeling Medications Dispensed
- Prev1420 Medication Area Inspections
- Prev1430 Medication Expiration Date
- Prev1440 Medication Samples
- Prev1460 Recall Procedures
- Prev1470 Herbal Or Natural Products
- Prev1480 Medication Order Elements

On a recommendation made by Quality and (MEC) for all 34 Pharmacy Services Policies and Procedures to be approved by the Board of Commissioners. Now, on a motion made by **Ms. Mitchell**, and seconded by **Mr. Dawson** the Board of Commissioners **approved** the 34 Pharmacy Services Policies and Procedures. Motion **passed** unanimously without objection.

6. Grievance Services Policies and Procedures Approval

Mr. Anthony presented to the full Board of Commissioners Grievance Services Policies and Procedures (1-4) for annual review. These policies include the following:

- Suicide Prevention Program And Ligature Risk Reduction Policy QD 017
- Patient Rights, Advocacy, And Grievance Notification Policy QD 018
- Grievance Committee Oversight And Reporting Policy QD 019
- Grievance Committee Process QD 019b

On a recommendation made by Quality and (MEC) for all 4 Grievance Services Policies and Procedures to be approved by the Board of Commissioners. Now, on a motion made by **Mr. Price**, and seconded by **Mr. Dawson**, the Board of Commissioners **approved** the 4 Grievance Services Policies and Procedures. Motion **passed** unanimously without objection.





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7. Nursing Services Policies and Procedures Approval

Mr. Anthony presented to the full Board of Commissioners Nursing Services Policies and Procedures (1-10) for annual review. These policies include the following:

- Patient Observation And Suicide Precautions Policy Nuse-011
- Pain Assessment And Management Policy Nurse 012
- Safe Injection Practices And Medication Administration Policy Nurse 013
- Patient Education And Health Literacy Policy Nurse 014
- Blood Administration And Transfusion Reaction Monitoring Policy 015
- Peripheral Intravenous (IV) Therapy And Maintenance Policy 016
- Central Line Maintenance And CLABSI Prevention Policy 017
- Patient Admission, Transfer, And Discharge Policy 018
- Nursing Documentation Standards Policy 019
- Nursing Scope Of Practice, Delegation, And Supervision Policy 020

On a recommendation made by Quality and (MEC) for all 10 Nursing Services Policies and Procedures to be approved by the Board of Commissioners. Now, on a motion made by **<u>Dr. Levy</u>**, and seconded by **<u>Mr. Dawson</u>**, the Board of Commissioners **approved** the 10 Nursing Services Policies and Procedures. Motion **<u>passed</u>** unanimously without objection.





Shelton Anthony, CEO MHA/MBA Administration Department 301 Memorial Drive Donaldsonville, LA 70346 (337) 290-0837 or (225) 473-7931 Shelton.anthony@westaph.org



8. Moderate/ Conscious Sedation Nursing Services Policies and Procedures Approval

Mr. Anthony presented to the full Board of Commissioners Moderate/ Conscious Sedation Nursing Services Policies and Procedures (1-6) for annual review. These policies include the following:

- Moderate Sedation Policy 021
- Nursing Services Moderate Sedation Audit Tool 021a
- Nursing Services ASA Physical Status Classification Guide 021b
- Nursing Services Moderate Sedation Documentation Form 021c
- Nursing Services Aldrete Recovery Scoring Tool 021d
- Nursing Services Moderate Sedation Education Module

On a recommendation made by Quality and (MEC) for all 6 Moderate/ Conscious Sedation Nursing Services Policies and Procedures to be approved by the Board of Commissioners. Now, on a motion made by **Mr. Mire**, and seconded by **Ms. Mithcell**, the Board of Commissioners **approved** the 6 Moderate/ Conscious Sedation Nursing Services Policies and Procedures. Motion **passed** unanimously without objection.

- 9. Summer Health Discovery Presentation
 - Mr. Anthony presented Summer Health Discovery (Recap) to the Board of Commissioners







Executive Session

None Required

VII. Adjournment







A. There being no further business to	discuss, a motion for adjournment was made by Mr.
Mire, seconded by Ms. Mitchell, and the	motion <u>passed</u> at <u>7:30PM.</u>
William "Bill" Dawson, Chairman.	Mr. Shelton Anthony, CEO

