



MEMORANDUM

To: Board of Directors

Cc: Bill Boyles, Esquire
Aluino Ochoa, M.D.

From: George Mikitarian
President/CEO

Subject: Board/Committee Meetings – October 2, 2023

Date: September 27, 2023

The Investment Committee will meet at 11:00 a.m. in the first-floor conference room.

The Quality Committee will convene at 12:00 p.m., which will be followed by the Finance Committee, and then Executive Committee meetings.

The Board of Directors will meet in executive session no earlier than 1:30 p.m. Following the Board of Directors Executive Session, the Education Committee and Board of Directors regularly scheduled meeting will be held immediately following, however no earlier than 2:00 p.m.

The Ad Hoc Credentials Review Committee meeting has been canceled.

The Planning Committee meeting has been canceled.

Investment Committee:

Stan Retz, CPA, Chairman

Robert L Jordan, Jr., C.M. (ex-officio)

Herman A. Cole, Jr.

TENTATIVE AGENDA
INVESTMENT COMMITTEE
NORTH BREVARD COUNTY HOSPITAL DISTRICT
OPERATING
PARRISH MEDICAL CENTER
MONDAY, OCTOBER 2, 2023, NO EARLIER THAN 11:00 A.M.
EXECUTIVE CONFERENCE ROOM

CALL TO ORDER

- I. Review and approval of minutes May 1, 2023.

Motion: To recommend approval of the May 1, 2023 meeting minutes as presented.

- II. Quarterly Investment Performance Update – Anderson Financial Partners
- III. Adjournment

**NORTH BREVARD COUNTY HOSPITAL DISTRICT
OPERATING
PARRISH MEDICAL CENTER
INVESTMENT COMMITTEE
MAY 1, 2023
FIRST FLOOR CONFERENCE ROOM**

The Investment Committee of the North Brevard County Hospital District Board of Directors met on May 1, 2023 at 11:37 a.m. The following members were present:

Stan Retz, CPA
Robert L. Jordan, Jr., C.M.

Absent-Excused:

Herman A. Cole, Jr.

Others present:

Lester Eljaiek, CFO
Tim Anderson, Anderson Financial Partners
Tommi Middleton, Director Financial Planning
Pam Perez, Executive Business and Contract Specialist
Stephanie Parham, Executive Office Manager

Call to Order

Mr. Retz called the meeting to order at 11:37 a.m.

Election of Chairperson

Mr. Retz opened the floor for nomination of the Chairperson of the Committee. Mr. Jordan nominated Mr. Retz and moved to close the nominations which was unanimously approved.

Action Taken: Motion to approve the appointment of Stan Retz as Chairperson of the Investment Committee.

Review and Approval of Minutes

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

Action Taken: Motion to approve the minutes of the February 6, 2023 meeting as presented.

Operating Funds Performance Summary

Tim Anderson, Anderson Financial Partners, gave the quarterly performance update on the Operating Funds.

Adjournment

Investment Committee Meeting
May 1, 2023

There being no further business the meeting adjourned at 11:27 a.m.

Stan Retz, Chairperson

QUALITY COMMITTEE

Elizabeth Galfo, M.D., Chairperson
Maureen Rupe, Vice Chairperson
Robert L. Jordan, Jr., C.M. (ex-officio)
Billy Specht
Billie Fitzgerald
Herman A. Cole, Jr.
Jerry Noffel
Stan Retz, CPA
Ashok Shah, M.D.
Aluino Ochoa, M.D., President/Medical Staff
Greg Cuculino, M.D.
Kiran Modi, M.D., Designee
Francisco Garcia, M.D., Designee
Christopher Manion, M.D., Designee
George Mikitarian (non-voting)

**NORTH BREVARD COUNTY HOSPITAL DISTRICT
OPERATING
PARRISH MEDICAL CENTER
QUALITY COMMITTEE
MONDAY, OCTOBER 2, 2023
12:00 P.M.
FIRST FLOOR, CONFERENCE ROOM 2/3/4/5**

CALL TO ORDER

I. Approval of Minutes

Motion to approve the minutes of the August 7, 2023 meeting.

II. Vision Statement

III. My Story

IV. Dashboard

V. Stroke Program Update

VI. Infection Control Committee Minutes (FYI Only)

VII. Other

VIII. Executive Session (if necessary)

ADJOURNMENT

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

PERSONS WITH A DISABILITY WHO NEED A SPECIAL ACCOMMODATION TO PARTICIPATE IN THIS PROCEEDING SHOULD CONTACT THE ADMINISTRATIVE OFFICES AT 951 NORTH WASHINGTON AVENUE, TITUSVILLE, FLORIDA 32796, AT LEAST FORTY EIGHT (48) HOURS PRIOR TO THE MEETING. FOR INFORMATION CALL (321) 268-6110. 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.

DRAFT
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 August 7, 2023, in Conference Room 2/3/4/5, First Floor. The following members were present.

Robert L. Jordan, Jr., C.M.
Stan Retz, CPA
Herman A. Cole, Jr.
Ashok Shah, M.D.
Billie Fitzgerald
Jerry Noffel
Billy Specht
Christopher Manion, M.D.
Gregory Cuculino, M.D.
Aluino Ochoa, M.D., President/Medical Staff (12:05 p.m.)
George Mikitarian (non-voting)

Members absent:
Elizabeth Galfo, M.D., Chairperson (excused)
Maureen Rupe (excused)
Kiran Modi, M.D. (excused)
Francisco Garcia, M.D. (excused)

CALL TO ORDER

Mr. Jordan called the meeting to order at 12:03 p.m.

REVIEW AND APPROVAL OF MINUTES

Discussion ensued and the following motion was made by Mr. Cole, seconded by Dr. Shah, and approved (9 ayes, 0 nays, 0 abstentions). Dr. Ochoa was not present at the time the vote was taken.

ACTION TAKEN: MOVED TO APPROVE THE MAY 1, 2023, MINUTES AND JUNE 5, 2023, MINUTES OF THE QUALITY COMMITTEE, AS PRESENTED.

VISION STATEMENT

Ms. Cottrell summarized the committee's vision statement.

MY STORY

Ms. Cottrell shared the story of Jenna and the compassionate care she received at Parrish Medical Center.

QUALITY DASHBOARD REVIEW

Ms. Cottrell reviewed the Quality Dashboard discussing each indicator score as it relates to clinical quality and cost. Ms. Cottrell answered questions from committee members concerning the dashboard. Copies of the Power Point slides presented are appended to the file copy of these minutes.

CULTURE OF SAFETY SURVEY RESULTS

Ms. Cottrell shared the results of the recent Culture of Safety survey. The survey was last completed in 2021 and in the current survey positive results were noted in several areas.

Accreditation results

Ms. Cottrell reviewed the June 13-15, 2023, Joint Commission Triennial Survey, noting that the surveyors were very pleased and provided positive comments and feedback.

Ms. Cottrell also shared the results for the June 27, 2023, Commission on Cancer Accreditation Survey, adding that opportunities were noted and corrected, and that the surveyor was very complimentary. Ms. Gutierrez provided a brief history of PMC's COC Accreditation status and explanation of the accreditation process. Copies of the Power Point slides presented are appended to the file copy of these minutes.

OTHER

There was no other business brought before the committee.

ADJOURNMENT

There being no further business, the Quality Committee meeting adjourned at 12:33 p.m.

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

**PARRISH MEDICAL CENTER
INFECTION CONTROL COMMITTEE MEETING
MINUTES**

LOCATION: C/R 6

DATE: September 13, 2023

Present:

R. Wagner, K. Rusoff, K. Foreman, E. Leathers, A Reyes, MD, J. Watts, I. Perez,

AGENDA ITEM		DISCUSSION	ACTION
I.	CALL TO ORDER:	A meeting of the Infection Control Committee of Parrish Medical Center was called to order by Regan Wagner at 2:08 pm on September 13, 2023. <i>A quorum was not present.</i>	
II	Approval of Minutes	The minutes of June 21, 2023 were (later) distributed electronically for review.	The minutes were distributed electronically.
III.	Unfinished Business	None	

INFECTION CONTROL COMMITTEE MEETING

September 13, 2023

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AGENDA ITEM	DISCUSSION	ACTION
<p>IV.</p> <p>Surveillance Reports:</p> <p>A. Invasive Device Surveillance (ICU): VAE, BSI, UTI</p> <p>B. Invasive Device Surveillance (Non-ICU), BSI, UTI</p> <p>C. Clostridoides difficile: House- wide NHSN)</p> <p>D. MRSA: BSI House-Wide for NHSN</p> <p>E. Post Discharge Surveillance- Abd. Hysterectomy/Colon</p> <p>F. Hand Hygiene Monitors/Barrier Precautions</p> <p>G. SPD, Perioperative, Dialysis Test Reports</p>	<p>Qtr 2 2023 rate 0.00 (0/215) 2023 YTD 0.00 (0/593)</p> <p>Qtr 2 2023 rate: 0.0 (0/463) 2023 YTD 0.00 (0/1043)</p> <p>1 HO CDI in Q1/2023. SIR is 0.626</p> <p>Zero Hospital acquired MRSA Q2 2023</p> <p>Colon, None. 1 recorded site infection, returned <90 days post D/C.</p> <p>3, 4 and 5th, 200/month per 13, ICU and WC, 150/month per 7-9 OR/Special Procedures 200/month (per 400 procedures) Cath Lab 30/month per 60-119 ED 200/month per 2000 April Total Hospital Compliance 96% May Total Hospital Compliance 93% June Total Hospital Compliance 94%</p> <p>Dialysis Machine cultures: All in the green with the exception of May RD-71, Bacteria CFU/mL 1 (Yellow) June RD-6 Bacteria CFU/mL 10 (Yellow) June RO-6 Bacteria CFU/mL 1 (Yellow) June RO-17 Bacteria CFU/mL 2 (Yellow) B-14 June Bacteria CFU/mL 2 (Yellow)</p>	

INFECTION CONTROL COMMITTEE MEETING

September 13, 2023

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AGENDA ITEM	DISCUSSION	ACTION
<p>IV. H. Blood Culture Contamination</p> <p>New Business / Open Forum:</p> <p>Adjournment:</p>	<p>Apr Total Hosp 5.84%, Nursing 8.33%, ED 12.0%, Lab, .62% May Total Hosp 2.69%, Nursing 12.50%, ED 5.37%, Lab .29% June Total Hosp 2.66%, Nursing 0.0%, ED 7.08%, Lab .65%</p> <p>Next PI CLABSI. Planning stages. Policy Femoral > 24 hrs? Dressing kit improvements.</p> <p>There being no further business the meeting adjourned at 2:45pm.</p> <p>NEXT MEETING December 13, 2023 in CR/6</p>	

AGENDA ITEM	DISCUSSION	ACTION
Committee Chair: _____ Nimesh Naik, MD, Chair		



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Quality Agenda

October 2, 2023

1. Approval of Minutes
2. Vision Statement
3. My Story
4. Dashboard
5. Stroke program updates
6. Other

Quality Committee

Vision Statement

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



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My Story



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Desiree's Story

Desiree is a 25-year-old recent college graduate who works at home as a property analyst. She has a strong support system with her friends who are also her roommates. Desiree has struggled most of her life being overweight. When Covid started, Desiree stopped going out and had socially isolated herself. She had gained over 100 more pounds during that time. Desiree was 454 pounds.

Desiree had recently gone on a cruise with her friends. Shortly after the cruise she developed a slight cold that continued to get worse over the next 2 weeks. She could not get into see her local community provider for a month. She could not afford her co-pay for an urgent care, so she finally came to the Parrish ER. Desiree was so short of breath she had to stop multiple times from her car to the entrance of the ER. Once she made it into the ER, it was quickly realized this is now more than a cold. They immediately brought Desiree back into a room. Her oxygen saturations were very low and she had very labored breathing. Desiree quickly needed a BIPAP to help her breathe.

Desiree was found to have an enlarged heart, obesity hypoventilation syndrome, respiratory failure, a new diagnosis of diabetes and suspected severe sleep apnea that was the root cause of much of this. She was overwhelmed and scared.

Desiree's Story

Desiree was admitted to the ICU. She immediately made friends with her ICU nurses and respiratory therapist. The Respiratory therapist (Susan Houle) took the time in between many breathing treatments to get to know Desiree. She learned Desiree was motivated, had a great support system and was using this admission for motivation to get healthier. Every member of Desiree's care team all had the same comments about how sweet Desiree was and her motivation to get better.

To safely leave the hospital Desiree needed a CPAP machine to hold her over until she could get a sleep study. She also needed a new primary care. The team had to get creative to find Desiree a CPAP machine since insurance would not pay for one until her sleep study. Within 1 hour they were able to do that.

The care team spent a lot of time educating Desiree and setting her up with resources. Desiree's mom stated "Wow, you even support my daughter when she leaves the hospital?" Desiree's mom lived out of state. Tearing up in relief, Desiree's mom stated that "knowing Desiree has her own personal care navigator she can call to help her was like having a second mom who was here for her since she could not be."

Desiree's Story

Desiree was set up with a new primary care that she was able to see 2 days after her hospital visit, a sleep study this past Saturday and a session with the diabetes navigator. In addition to helping Desiree, the care navigator realized that her brother, who also lives with her, was also morbidly obese with no insurance needed a primary care and sleep study. He was successfully set up with Space Coast Health Centers, the business office for help finding insurance and a sleep study.

Desiree was not treated as a morbidly obese patient, or a disease or another room number. Desiree is a good example of how our Parrish care partners kept her calm, motivated for change and excited for this new beginning. Desiree was treated like a daughter, sister, friend...
A PERSON.

Dashboard



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Performance dashboard

Description	Definition	May-Jul	Aug 22-Jul 23	Opportunity
Stroke	Stroke management compliance	72%	86%	Goal: 100%
Sepsis	Severe Sepsis and Septic Shock Management bundle compliance	54%	53%	Goal: 76%
Early Elective Delivery	Percentage of elective deliveries among mothers with uncomplicated pregnancies at 37 and 38 weeks gestation	0%	0%	Goal: 0%
HAI	Hospital onset MRSA bacteremia	0.00	0.372	Goal: 0
Readmission	All cause 30 day readmissions	9.5%	9.4%	Goal: 8.0%
Person Centered flow	Inpatient and outpatient emergency department throughput	465	481	164 *weighted goal

Stroke Program



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**WORLD
STROKE
DAY 29TH
OCT**

Stroke Program

Mission and goals

- Provide quality stroke care
- Provide stroke-related education
- Monitor outcomes and performance improvement

Stroke program

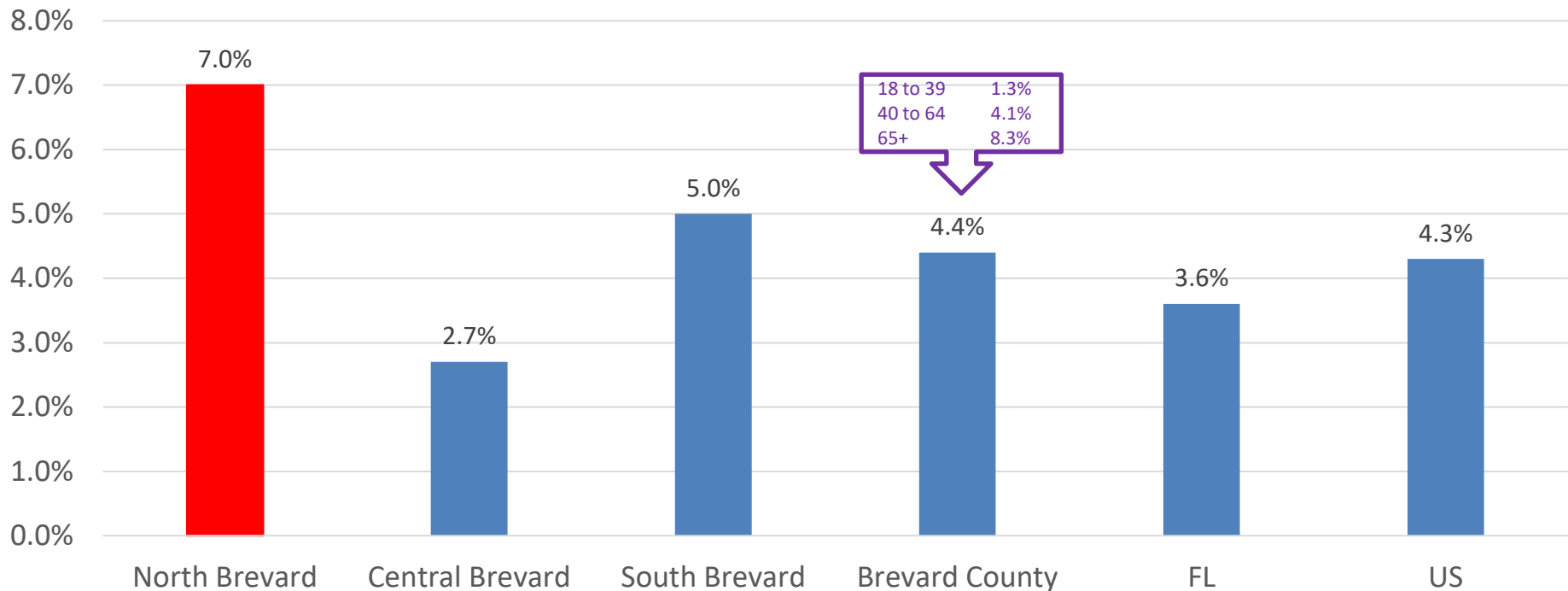
Benefits

1. Designation for excellence in the care of stroke patients
2. Consistent approach to care
3. Commitment to higher standard of clinical service
4. Framework to improve patient outcomes
5. Strengthens community confidence in quality and safety of care, treatment and services

Population served

Community Health Needs Assessment

Prevalence of Stroke



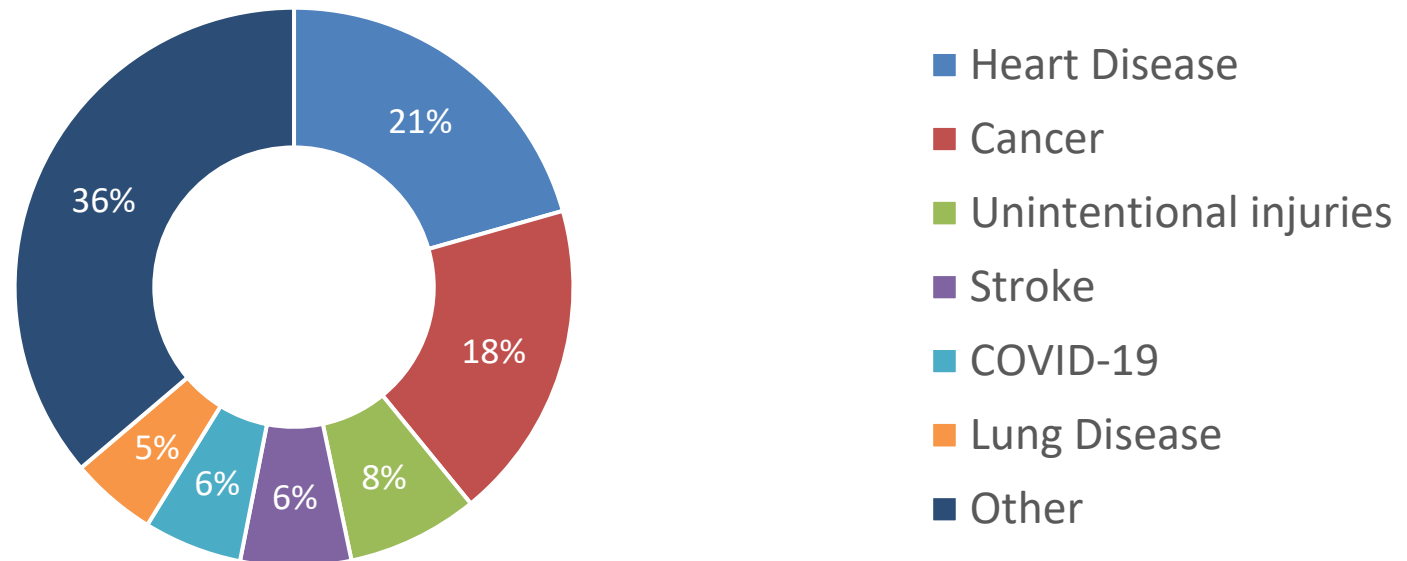
Sources: 2022 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 33]
Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia. United States Department of
Health and Human Services, Centers for Disease Control
and Prevention (CDC): 2017 Florida data.
2017 PRC National Health Survey, Professional Research Consultants, Inc.
Notes: Asked of all respondents.

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Distribution of Deaths by Cause

Leading Causes of Death Brevard County, 2020



TJC Stroke Survey

Primary Stroke Center

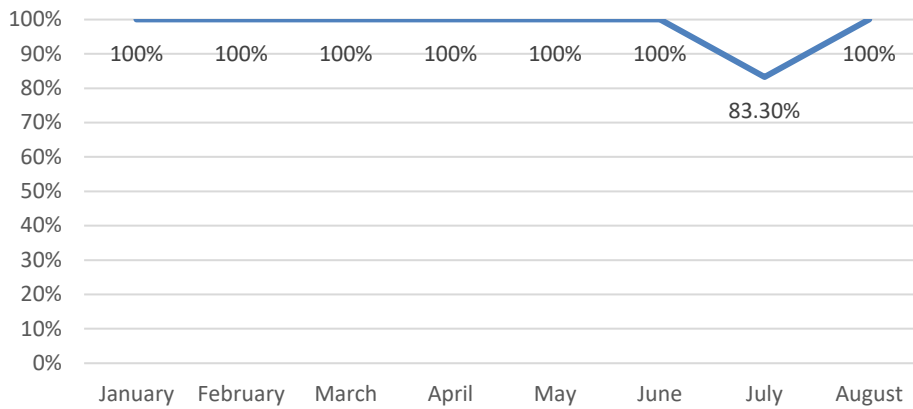
- Initial Certification in 2004
- On-site survey occurs every 2 years
- Window for visit opens October 23, 2023

TJC Stroke Performance Standards

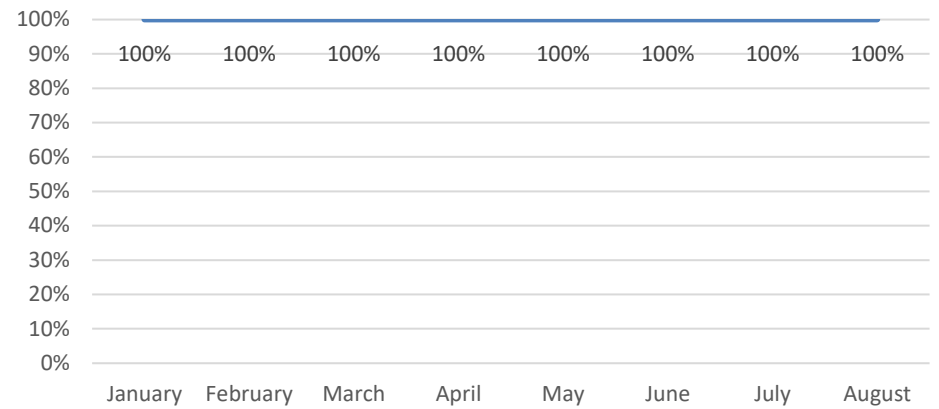
- Timely stroke assessment
- Time to transfer to another hospital
- Blood clot prevention
 - While in hospital
 - At discharge
- Time to clot busting medication
- Discharged on cholesterol lowering medication
- Stroke education
- Assessment for rehab needs

Performance

STK-1 VTE Prophylaxis 2023

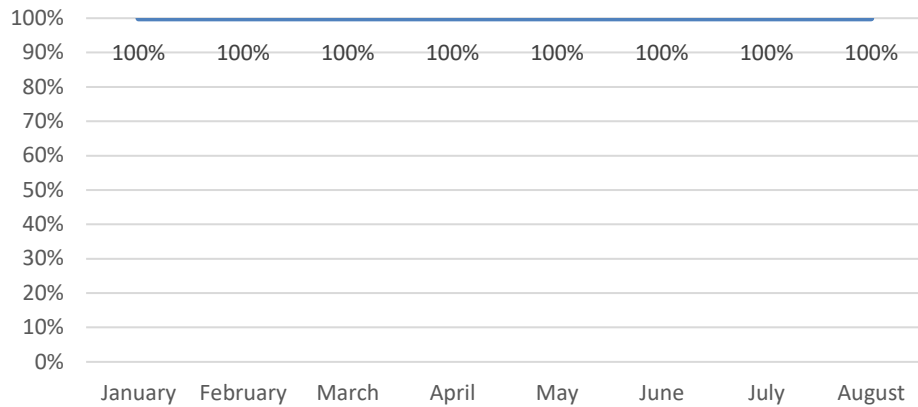


STK-2 Discharged on Antithrombotic 2023

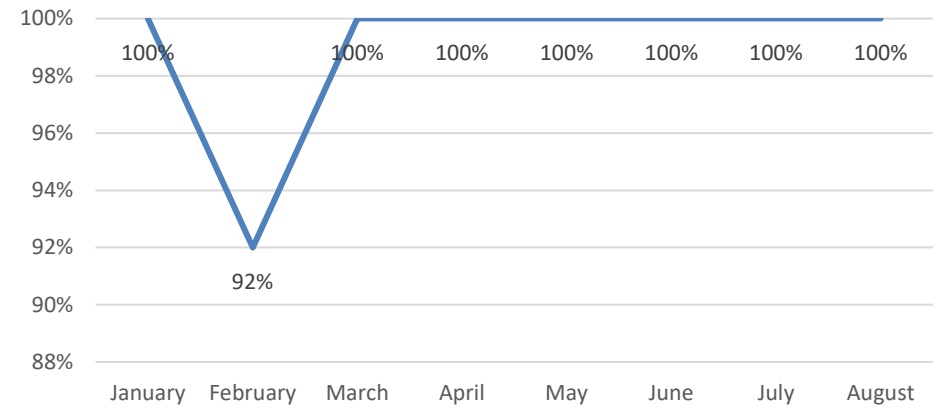


Performance

STK-5 Antithrombotic EOD2 2023

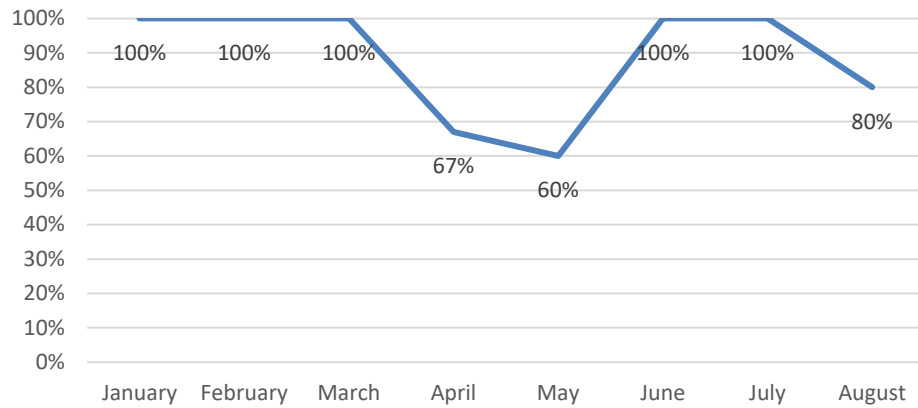


STK-6 Discharged with Statin 2023

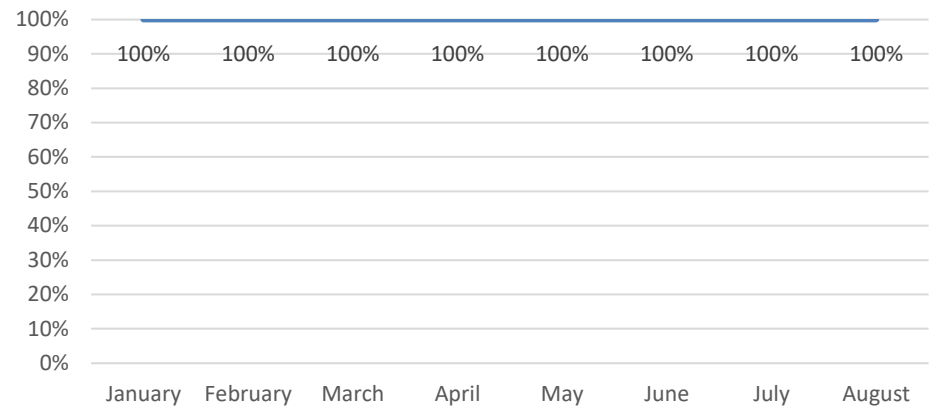


Performance

STK-8 Stroke Education 2023



STK-10 Assess for Rehab 2023



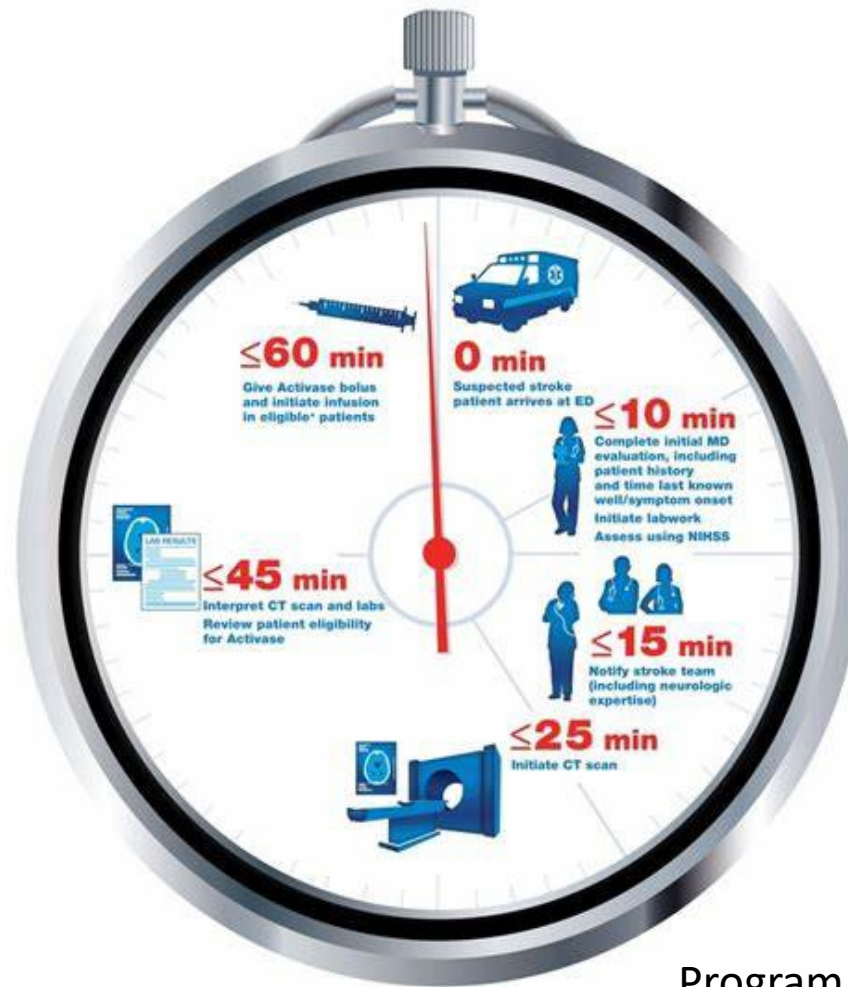
Performance Improvement Project



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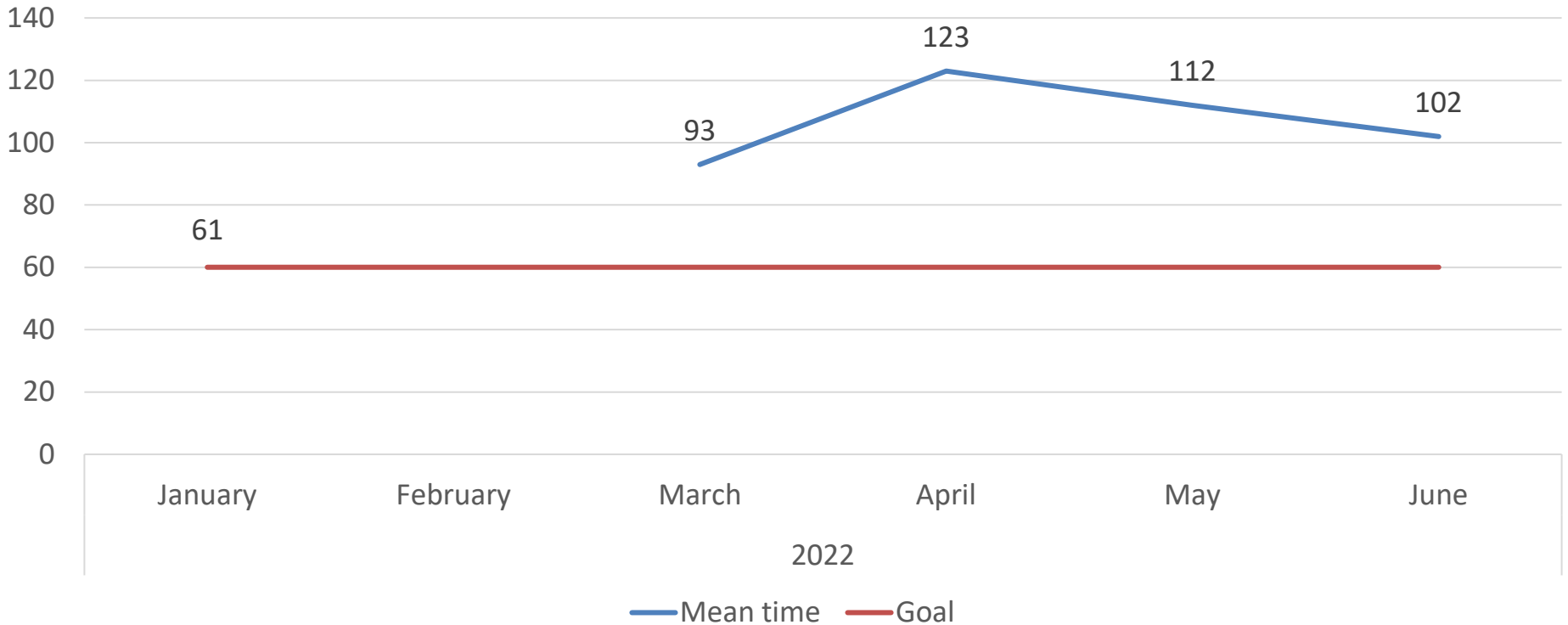
The Golden Hour



Program Goal – 50% within 60 minutes

Performance Improvement

Golden Hour - Baseline Data - 2022



Project Objectives

Performance metrics

- **Process measures**
 - Door-to-Code Stroke Called
 - Door- to- Provider
 - Door-to-lab results time
 - Door-to-CT results time
- **Outcome measures**
 - Door-to-TPA administration
 - % of stroke patients who received tPA

DMAIC

Improve

- Empower all care partners to call a Code Stroke
- BEFAST posters with clinical care partner at check-in
- Door-to-lab results:
 - Pink Cards “Laboratory Alert Code” to reduce transport delay
- Door-to-CT :
 - Partnering with CT to expedite patient placement on CT table
 - Order set usage to ensure timely orders

DMAIC

Improve

Patient Time Tracker for the Golden Hour added to nursing worklist

“Time saved is brain saved”



TARGET: STROKE PATIENT TIME TRACKER



The Joint Commission



American Heart Association
American Stroke Association

CERTIFICATION

Meets standards for
Primary Stroke Center



PARRISH HEALTHCARE



Patient Sticker

ACUTE ISCHEMIC STROKE TREATMENT GOAL: Door – to – tPA within 60 minutes or less

Documented by Charge Nurse or designated person. Name: _____ Date: _____

Document times as accurately as possible:

Last known well (LKW) Date: _____ Time: _____ Weight: _____ On blood thinners? Yes No

Patient RCT (from Meditech): _____

Name of witness for LKW _____

Code Stroke called: _____

MD at bedside: _____ Provider Name: _____

Stroke Order Set: (from Meditech – document later) _____

POC blood sugar: _____

Lab collected: (do not delay CT!) _____

Lab collected by: phlebotomist ED staff

Pt to CT: _____

Pt on CT table: _____

CT results: _____

Request of Mayo consult: _____

Telestroke at bedside: _____

Start of neurologist consultation: _____

End of neurologist consultation: _____

t-PA order: _____

t-PA administered: _____ Name of person who administered t-PA: _____

Order to transfer: _____

Pt transferred Date and time _____ |

TIME LOST IS BRAIN LOST. Learn more at heart.org/targetstroke.

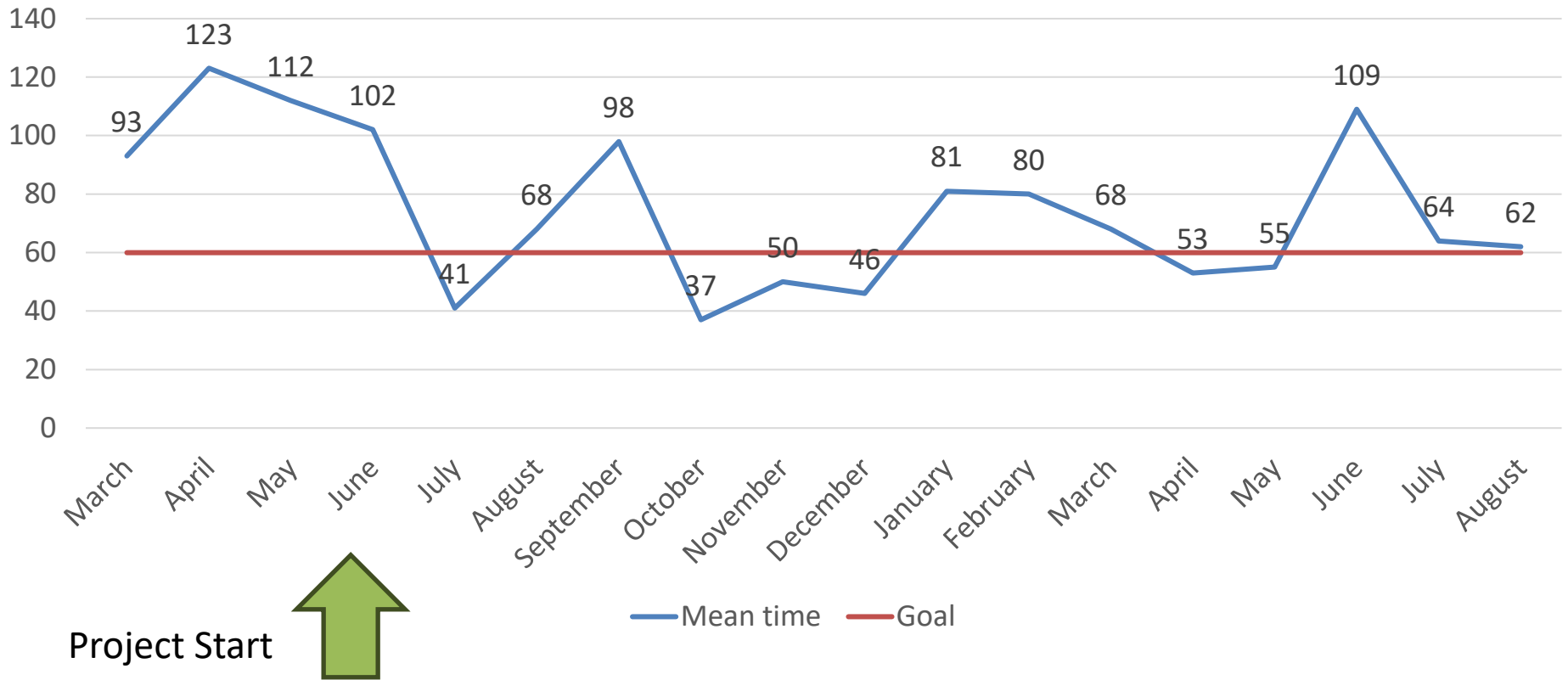
Outcomes: tPA Administration

Golden Hour – Goal 50% within 60 minutes

- 2022 success rate = 47%
- 2023 success rate = 53%
- Met goal 10 out of 14 months since PI initiated

Outcomes

Golden Hour – Outcome data 2022-23



Questions?



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FINANCE COMMITTEE

Herman A. Cole, Jr. Chairperson
Stan Retz, CPA, Vice Chairperson
Robert L. Jordan, Jr., C.M., (ex-officio)
Jerry Noffel
Billie Fitzgerald
Billy Specht
Maureen Rupe
Christopher Manion, M.D.
Aluino Ochoa, M.D., President/Medical Staff
George Mikitarian, President/CEO (non-voting)

**FINANCE COMMITTEE MEETING
NORTH BREVARD COUNTY HOSPITAL DISTRICT OPERATING
PARRISH MEDICAL CENTER
MONDAY, OCTOBER 2, 2023
FIRST FLOOR CONFERENCE ROOMS 2/3/4/5
(IMMEDIATELY FOLLOWING QUALITY COMMITTEE)**

CALL TO ORDER

I. Approval of minutes.

Motion: To recommend approval of the August 7, 2023 meeting.

II. Public Comments

III. Financial Review – Mr. Eljaiek

IV. FY 2024 Capital Budget – Mr. Bacon

Motion: To Recommend the Board of Directors Approve the FY 2024 Capital Budget in the amount of \$ 2,000,000.00

V. 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.

VI. Executive Session (if necessary)

ADJOURNMENT

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

A regular meeting of the Finance Committee of the North Brevard County Hospital District operating Parrish Medical Center was held on August 7, 2023, in Conference Room 2/3/4/5, First Floor. The following members, representing a quorum, were present:

Herman A. Cole, Jr., Chairperson
Stan Retz, Vice Chairperson
Robert Jordan, Jr., C.M.
Jerry Noffel
Billie Fitzgerald
Maureen Rupe
Billy Specht
Christopher Manion, M.D.
Aluino Ochoa, M.D.
George Mikitarian (non-voting)

Member(s) Absent:
None

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

CALL TO ORDER

Mr. Cole called the meeting to order at 12:54 p.m.

REVIEW AND APPROVAL OF MINUTES

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

ACTION TAKEN: MOVED THAT THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS APPROVE THE MAY 1, 2023, MEETING AND JUNE 5, 2023 MEETING MINUTES OF THE FINANCE COMMITTEE, AS PRESENTED.

PUBLIC COMMENTS

There were no public comments.

FINANCIAL REVIEW

Mr. Eljaiek summarized the June financial statements of the North Brevard County Hospital District and the year-to-date financial performance of the Health System. Mr. Eljaiek answered questions and received comments from the members of the committee.

AUDIT ENGAGEMENT LETTER MSL

Discussion ensued regarding the engagement of Moore Stephens Lovelace, CPA's as Auditors and the following motion was made by Mr. Jordan, seconded by Mr. Specht, and approved (9 ayes, 0 nays, 0 abstentions).

ACTION TAKEN: MOTION TO RECOMMEND THE BOARD OF DIRECTORS APPROVE THE MOORE STEPHENS LOVELACE ENGAGEMENT LETTER AS AUDITORS FOR THE FY23 AS PRESENTED.

DISPOSALS

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

ACTION TAKEN: MOTION TO RECOMMEND THE BOARD OF DIRECTORS TO DECLARE THE EQUIPMENT LISTED IN THE REQUEST FOR DISPOSAL OF OBSOLETE OR SURPLUS PROPERTY AS SURPLUS AND OBSOLETE AND DISPOSE OF SAME IN ACCORDANCE WITH FS274.05 AND FS274.96.

OTHER

There was no other business to come before the committee.

ADJOURNMENT

There being no further business to come before the committee, the Finance Committee meeting adjourned at 1:13 p.m.

Herman A. Cole, Jr.,
Chairman

MEMORANDUM

To: Budget & Finance Committee

From: Lester Eljaiek, CFO - Finance

Subject: FY 2024 Capital Budget

Date: September 19, 2023

For the FY 2024 Capital Budget, requesting the Board's approval to reserve \$2,000,000 in the general contingency funds for Strategic and Maintenance Capital.

All capital requisitions will be reviewed and approved by the Executive Management Committee (EMC). All Strategic capital requests will include a needs assessment and business case. All maintenance capital requests will be reviewed and approved on an individual need's assessment.

All requests greater than \$150,000 will be brought before the Board for approval, in accordance with Policy No. 9500-2.

I recommend the approval of \$2,000,000 for general contingency capital funds.

Motion: Recommend the Board of Directors approve the FY 2024 Capital Budget in the amount of \$2,000,000.

Should you have any questions or need additional information, please do not hesitate to contact me at Lester.Eljaiek@Parrishmed.com or (321) 268-6106. Thank you for your attention in this matter.

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. #
Siemens UF1000i Uranalysis System	KN030476	03/01/2017	14,375.00	CE 02523	Unit is End of life, trade-in for Beckmann Coulter system..	0.00	1.401

Requesting Department - Laboratory, Chemistry Department Director [Signature]
 Net Book Value (Finance) A. Franoy 6/7/23 EMC Member [Signature] 6/6/23
 Sr. VP Finance/CFO _____ President/CEO _____
 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 _____

KOGB 8/22/23 [Signature] 8/22/23

DATE: 06/07/23 @ 1605
USER: FRANZAL

Parrish Medical Center FA *Live*
CURRENT VALUES REPORT

CREATED BY USER: FRANZAL

FROM FACILITY: SYSTEM FROM ASSET NUMBER: KN030476 FROM ASSET CLASS: BEGINNING FROM DEPARTMENT: BEGINNING
THRU FACILITY: SYSTEM THRU ASSET NUMBER: KN030476 THRU ASSET CLASS: END THRU DEPARTMENT: END

FROM STATUS DATE: BEGINNING FROM ACQUIRED DATE: BEGINNING FROM RETIRE DATE: BEGINNING FROM RETIRE TYPE: BEGINNING FROM RETIRE TYPE DATE:
THRU STATUS DATE: END THRU ACQUIRED DATE: END THRU RETIRE DATE: END THRU RETIRE TYPE: END THRU RETIRE TYPE DATE:

FACILITY: SYSTEM
DEPARTMENT: 1.401 1 LAB

NUMBER	DESCRIPTION	LIFE	STATUS	STS DATE	ACQ DATE	RET DATE	COST	BOOK
CLASS: MEQ-HOSP MOVEABLE EQUIP - HOSPITAL								
KN030476	SIEMENS SYSMEX UF 1000 URINANALYSIS (LEASE BUYO		ACTIVE	04/06/17	03/01/17		14375.00	0.00
							14375.00	0.00
TOTAL FOR DEPARTMENT:							14375.00	0.00

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. #
Philips Skylight 3/8 special, Nuc Med camera	KN021405	2/25/2005	350,982.42	PMC01219	Unit is being replaced with new GE nuclear medicine camera. Scheduled install week of Sep 25	0.00	1.424

Requesting Department - Nuclear Medicine Department Director *[Signature]*
 Net Book Value (Finance) *A. Francis 8/4/23* EMC Member *[Signature] 8/2/23*
 Sr. VP Finance/CFO _____ President/CEO _____
 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 _____

KOPS 8/22/23 (M) 8/22/23

DATE: 08/04/23 @ 1025
USER: FRANZAL

Farrish Medical Center FA *Live*
CURRENT VALUE REPORT

CREATED BY USER: FRANZAL

FROM FACILITY: SYSTEM FROM ASSET NUMBER: KN021405 FROM ASSET CLASS: BEGINNING FROM DEPARTMENT: BEGINNING
THRU FACILITY: SYSTEM THRU ASSET NUMBER: KN021405 THRU ASSET CLASS: END THRU DEPARTMENT: END

FROM STATUS DATE: BEGINNING FROM ACQUIRED DATE: BEGINNING FROM RETIRE DATE: BEGINNING FROM RETIRE TYPE: BEGINNING FROM RETIRE TYPE DATE:
THRU STATUS DATE: END THRU ACQUIRED DATE: END THRU RETIRE DATE: END THRU RETIRE TYPE: END THRU RETIRE TYPE DATE:

FACILITY: SYSTEM
CLASS: MEQ-HOSP MOVEABLE EQUIP - HOSPITAL

NUMBER	DESCRIPTION	LIFE	STATUS	STS DATE	ACQ DATE	RET DATE	COST	BOOK
DEPARTMENT: 1.424 1 NUCLR MED								
KN021405	SKYLIGHT EPIC HP DUAL GAMMA CAMERA W/COLLIMATOR		ACTIVE	02/25/05	01/01/05		350982.42	0.00
							-----	-----
							350982.42	0.00
TOTAL FOR CLASS:							350982.42	0.00

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. #
Ultrasound machine, Toshiba Aplio	KN029715	03/28/2012	90,806.00	PMC04219	Unit is obsolete, End of life. Unit has been replaced with Philips CVx 3D system	0.0	1.427 DI

Requesting Department - Pt. St. John HC Diagnostic Department Director *[Signature]*

Net Book Value (Finance) *A. Franz 6/28/23* EMC Member *[Signature]*

Sr. VP Finance/CFO _____ 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 _____

KGA 8/22/23 (MP) 8/22/23

DATE: 03/08/23 @ 1214
USER: FRANZAL

Parrish Medical Center FA *Live*
CURRENT VALUE REPORT

CREATED BY USER: FRANZAL

FROM FACILITY: SYSTEM FROM ASSET NUMBER: KN029715 FROM ASSET CLASS: BEGINNING FROM DEPARTMENT: BEGINNING
THRU FACILITY: SYSTEM THRU ASSET NUMBER: KN029715 THRU ASSET CLASS: END THRU DEPARTMENT: END

FROM STATUS DATE: BEGINNING FROM ACQUIRED DATE: BEGINNING FROM RETIRE DATE: BEGINNING FROM RETIRE TYPE: BEGINNING FROM RETIRE TYPE DATE:
THRU STATUS DATE: END THRU ACQUIRED DATE: END THRU RETIRE DATE: END THRU RETIRE TYPE: END THRU RETIRE TYPE DATE:

FACILITY: SYSTEM
CLASS: MEQ-PSJ DI MOVEABLE EQUIP-PSJ HC

NUMBER	DESCRIPTION	LIFE	STATUS	STS DATE	ACQ DATE	RET DATE	COST	BOOK
DEPARTMENT: 1.427 1 DIAG C/PSJ								
KN029715	APLIO MX CARDIOLOGY ULTRASOUND MACHINE		ACTIVE	04/04/12	03/28/12		90806.00	0.00
							-----	-----
							90806.00	0.00
TOTAL FOR CLASS:							90806.00	0.00

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. #
Microscope – AOC 10	KN003865	01/15/1983	\$4,423.00	0071-01641	Unit is obsolete, End of life.	0	1.401

Requesting Department - Laboratory Department Director *[Signature]*
 Net Book Value (Finance) *A. Francis 6/28/23* EMC Member *[Signature] 6/26/23*
 Sr. VP Finance/CFO _____ President/CEO _____
 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 _____

Keena 8/22/23 (MP) 8/22/23

CREATED BY USER: FRANZAL

FROM FACILITY: SYSTEM FROM ASSET NUMBER: KN003865 FROM ASSET CLASS: BEGINNING FROM DEPARTMENT: BEGINNING
 THRU FACILITY: SYSTEM THRU ASSET NUMBER: KN003865 THRU ASSET CLASS: END THRU DEPARTMENT: END
 FROM STATUS DATE: BEGINNING FROM ACQUIRED DATE: BEGINNING FROM RETIRE DATE: BEGINNING FROM RETIRE TYPE: BEGINNING FROM RETIRE TYPE DATE:
 THRU STATUS DATE: END THRU ACQUIRED DATE: END THRU RETIRE DATE: END THRU RETIRE TYPE: END THRU RETIRE TYPE DATE:

FACILITY: SYSTEM
 DEPARTMENT: 1.401 1 LAB

NUMBER	DESCRIPTION	LIFE	STATUS	STS DATE	ACQ DATE	RET DATE	COST	BOOK
CLASS: MEQ-HOSP MOVEABLE EQUIP - HOSPITAL								
KN003865	MICROSCOPE - AOC 110	GREY	ACTIVE	11/03/99	01/15/83		4423.00	0.00
							-----	-----
							4423.00	0.00
TOTAL FOR DEPARTMENT:							4423.00	0.00

**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 required.

Asset Description	Asset Control KN #	Purchase Date	Purchase Price	CE #	Reason for Disposal	Net Book Value (provided by Finance Dept)	Dept.
Convection steamer, gas	KN030970	11/20/20	15,051.69		Condition not worth cost of repairs	11,131.50	1.651

TOTAL BOOK VALUE \$11,131.50

Requesting Department:

Food + Nutrition 1.651

Net Book Value (Finance)

A. Franey 8/2/23

Sr. VP Finance/CFO

Board Approved (CFO Signature)

Requestor Notified Finance

Asset Disposed of or Donated

Removed from Asset List (Finance)

Requested Public Entity for Donation

Entity Contact

Telephone

Department Director

[Signature] 8-2-23

EMC Member

[Signature] 8/2/23

President/CEO

[Signature]

KOA 8/22/23 (MP) 8/22/23

DATE: 08/02/23 @ 0936
USER: FRANZAL

Parrish Medical Center FA *Live*
CURRENT VALUE REPORT

PAGE 1

CREATED BY USER: FRANZAL

FROM FACILITY: SYSTEM FROM ASSET NUMBER: KN030970 FROM ASSET CLASS: BEGINNING FROM DEPARTMENT: BEGINNING
THRU FACILITY: SYSTEM THRU ASSET NUMBER: KN030970 THRU ASSET CLASS: END THRU DEPARTMENT: END

FROM STATUS DATE: BEGINNING FROM ACQUIRED DATE: BEGINNING FROM RETIRE DATE: BEGINNING FROM RETIRE TYPE: BEGINNING FROM RETIRE TYPE DATE:
THRU STATUS DATE: END THRU ACQUIRED DATE: END THRU RETIRE DATE: END THRU RETIRE TYPE: END THRU RETIRE TYPE DATE:

FACILITY: SYSTEM
CLASS: MEQ-HOSP MOVEABLE EQUIP - HOSPITAL

NUMBER	DESCRIPTION	LIFE	STATUS	STS DATE	ACQ DATE	RET DATE	COST	BOOK
DEPARTMENT: 1.651 1 FOOD & NUTRITION								
KN030970	CONVECTION STEAMER, GAS		ACTIVE	01/29/21	11/20/20		15051.69	11131.50
							-----	-----
							15051.69	11131.50
TOTAL FOR CLASS:							15051.69	11131.50

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

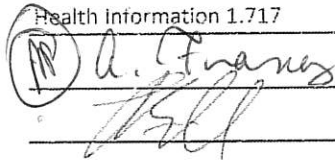
Request for Disposal of Obsolete or Surplus Property

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

Asset Description	Asset Control KN #	Purchase Date	Purchase Price	CE #	Reason for Disposal	Net Book Value (provided by Finance Dept)	Dept.
MICROFILM SCANNER - CANON MS400	KN021157	5/9/2000	14,980.88		Obsolete	0.00	1.717

TOTAL BOOK VALUE \$0.00

Requesting Department:

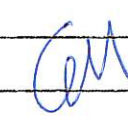
Health Information 1.717
 8/29/23

Department Director Beth Fields

Net Book Value (Finance)

EMC Member

Sr. VP Finance/CFO

President/CEO 

Board Approved (CFO Signature)

Requestor Notified Finance

Asset Disposed of or Donated

Removed from Asset List (Finance)

Requested Public Entity for Donation

Entity Contact

Telephone

KOP 8/29/23

DATE: 08/29/23 @ 1432
 USER: FRANZAL

Parrish Medical Center FA *Live*
 CURRENT VALUE REPORT

CREATED BY USER: FRANZAL

FROM FACILITY: SYSTEM FROM ASSET NUMBER: KN021157 FROM ASSET CLASS: BEGINNING FROM DEPARTMENT: BEGINNING
 THRU FACILITY: SYSTEM THRU ASSET NUMBER: KN021157 THRU ASSET CLASS: END THRU DEPARTMENT: END
 FROM STATUS DATE: BEGINNING FROM ACQUIRED DATE: BEGINNING FROM RETIRE DATE: BEGINNING FROM RETIRE TYPE: BEGINNING FROM RETIRE TYPE DATE:
 THRU STATUS DATE: END THRU ACQUIRED DATE: END THRU RETIRE DATE: END THRU RETIRE TYPE: END THRU RETIRE TYPE DATE:

FACILITY: SYSTEM
 CLASS: MEQ-HOSP MOVEABLE EQUIP - HOSPITAL

NUMBER	DESCRIPTION	LIFE	STATUS	STS DATE	ACQ DATE	RET DATE	COST	BOOK
DEPARTMENT: 1.717 1 HEALTH INFO MANAGEMENT								
KN021157	MICROFILM SCANNER - CANON MS400		ACTIVE	06/09/00	05/09/00		14980.88	0.00
							----- 14980.88	0.00
TOTAL FOR CLASS:							14980.88	0.00

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 required.

Asset Description	Asset Control KN #	Purchase Date	Purchase Price	CE #	Reason for Disposal	Net Book Value (provided by Finance Dept)	Dept.
ELECTRIC PALLET JACK-YALE	KN017362	09/13/93	\$3,244.05		OBSOLETE	0.00	1.751
PRINTER-HEWLETT PACKARD LASERJENT 4050N	KN021397	01/26/01	\$1,456.00		OBSOLETE	0.00	1.751
SCALE-ELECTRONIC 30# W/INTERFACED RATE CALCULATE	KN024273	01/05/99	\$2,291.15		OBSOLETE	0.00	1.751
DESKS-MATERIALS MANAGEMENT F GARRET/M REEVES	KN027748	11/01/02	\$1,234.44		REMOVED FROM AREA FOR CONFERENCE AREA	0.00	1.751

TOTAL BOOK VALUE \$0.00

Requesting Department:

Net Book Value (Finance)

Sr. VP Finance/CFO

Board Approved (CFO Signature)

Requestor Notified Finance


Asset Disposed of or Donated

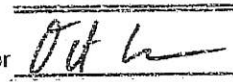

Removed from Asset List (Finance)

Requested Public Entity for Donation

Entity Contact

Telephone

1.751 - Materials Management
 A. S. Franey 8/29/23

Department Director 
 EMC Member
 President/CEO 

Handwritten: KPS 8/29/23

DATE: 08/29/23 @ 1433
USER: FRANZAL

Parrish Medical Center FA *Live*
CURRENT VALUE REPORT

PAGE 1

CREATED BY USER: FRANZAL

FROM FACILITY: SYSTEM FROM ASSET NUMBER: KN017362 FROM ASSET CLASS: BEGINNING FROM DEPARTMENT: BEGINNING
THRU FACILITY: SYSTEM THRU ASSET NUMBER: KN017362 THRU ASSET CLASS: END THRU DEPARTMENT: END

FROM STATUS DATE: BEGINNING FROM ACQUIRED DATE: BEGINNING FROM RETIRE DATE: BEGINNING FROM RETIRE TYPE: BEGINNING FROM RETIRE TYPE DATE:
THRU STATUS DATE: END THRU ACQUIRED DATE: END THRU RETIRE DATE: END THRU RETIRE TYPE: END THRU RETIRE TYPE DATE:

FACILITY: SYSTEM
CLASS: MEQ-HOSP MOVEABLE EQUIP - HOSPITAL

NUMBER	DESCRIPTION	LIFE	STATUS	STS DATE	ACQ DATE	RET DATE	COST	BOOK
DEPARTMENT: 1.751 1 MATRL MGT								
KN017362	ELECTRIC PALLET JACK - YALE		ACTIVE	11/03/99	09/13/93		3244.05	0.00
							-----	-----
							3244.05	0.00
TOTAL FOR CLASS:							3244.05	0.00

DATE: 08/29/23 @ 1433
USER: FRANZAL

Parrish Medical Center FA *Live*
CURRENT VALUE REPORT

CREATED BY USER: FRANZAL

FROM FACILITY: SYSTEM FROM ASSET NUMBER: KN021397 FROM ASSET CLASS: BEGINNING FROM DEPARTMENT: BEGINNING
THRU FACILITY: SYSTEM THRU ASSET NUMBER: KN021397 THRU ASSET CLASS: END THRU DEPARTMENT: END

FROM STATUS DATE: BEGINNING FROM ACQUIRED DATE: BEGINNING FROM RETIRE DATE: BEGINNING FROM RETIRE TYPE: BEGINNING FROM RETIRE TYPE DATE:
THRU STATUS DATE: END THRU ACQUIRED DATE: END THRU RETIRE DATE: END THRU RETIRE TYPE: END THRU RETIRE TYPE DATE:

FACILITY: SYSTEM
CLASS: MEQ-HOSP MOVEABLE EQUIP - HOSPITAL

NUMBER	DESCRIPTION	LIFE	STATUS	STS DATE	ACQ DATE	RET DATE	COST	BOOK
DEPARTMENT: 1.751 1 MATRL MGT								
KN021397	PRINTER - HEWLETT PACKARD LASERJET 4050N		ACTIVE	02/12/01	01/26/01		1456.00	0.00
							-----	-----
							1456.00	0.00
TOTAL FOR CLASS:							1456.00	0.00

DATE: 08/29/23 @ 1436
USER: FRANZAL

Parrish Medical Center FA *Live*
CURRENT VALUE REPORT

PAGE 1

CREATED BY USER: FRANZAL

FROM FACILITY: SYSTEM FROM ASSET NUMBER: KN024273 FROM ASSET CLASS: BEGINNING FROM DEPARTMENT: BEGINNING
THRU FACILITY: SYSTEM THRU ASSET NUMBER: KN024273 THRU ASSET CLASS: END THRU DEPARTMENT: END
FROM STATUS DATE: BEGINNING FROM ACQUIRED DATE: BEGINNING FROM RETIRE DATE: BEGINNING FROM RETIRE TYPE: BEGINNING FROM RETIRE TYPE DATE:
THRU STATUS DATE: END THRU ACQUIRED DATE: END THRU RETIRE DATE: END THRU RETIRE TYPE: END THRU RETIRE TYPE DATE:

FACILITY: SYSTEM
CLASS: MEQ-HOSP MOVEABLE EQUIP - HOSPITAL

NUMBER	DESCRIPTION	LIFE	STATUS	STS DATE	ACQ DATE	RET DATE	COST	BOOK
DEPARTMENT: 1.751	1 MATRL MGT							
KN024273	SCALE - ELECRONIC 30# W/INTERFACED RATE CALCULA		ACTIVE	11/09/99	01/05/99		2291.15	0.00
							-----	-----
							2291.15	0.00
							TOTAL FOR CLASS:	2291.15 0.00

DATE: 08/29/23 @ 1437
USER: FRANZAL

Parrish Medical Center FA *Live*
CURRENT VALUE REPORT

PAGE 1

CREATED BY USER: FRANZAL

FROM FACILITY: SYSTEM FROM ASSET NUMBER: KN027748 FROM ASSET CLASS: BEGINNING FROM DEPARTMENT: BEGINNING
THRU FACILITY: SYSTEM THRU ASSET NUMBER: KN027748 THRU ASSET CLASS: END THRU DEPARTMENT: END

FROM STATUS DATE: BEGINNING FROM ACQUIRED DATE: BEGINNING FROM RETIRE DATE: BEGINNING FROM RETIRE TYPE: BEGINNING FROM RETIRE TYPE DATE:
THRU STATUS DATE: END THRU ACQUIRED DATE: END THRU RETIRE DATE: END THRU RETIRE TYPE: END THRU RETIRE TYPE DATE:

FACILITY: SYSTEM
CLASS: MEQ-HOSP MOVEABLE EQUIP - HOSPITAL

NUMBER	DESCRIPTION	LIFE	STATUS	STS DATE	ACQ DATE	RET DATE	COST	BOOK
DEPARTMENT: 1.751 1 MATRL MGT								
KN027748	DESKS - MATERIALS MANAGEMENT F GARRET/ M REEVES		ACTIVE	02/03/03	11/01/02		1234.44	0.00
							-----	-----
							1234.44	0.00
TOTAL FOR CLASS:							1234.44	0.00

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 required.

Asset Description	Asset Control KN #	Purchase Date	Purchase Price	CE #	Reason for Disposal	Net Book Value (provided by Finance Dept)	Dept.
green touch screen hardware	KN029064	02/12/08	\$9275		obsolete	\$0	1731

TOTAL BOOK VALUE \$0.00

Requesting Department:

Net Book Value (Finance)

Sr. VP Finance/CFO

Board Approved (CFO Signature)

Requestor Notified Finance

Asset Disposed of or Donated

Removed from Asset List (Finance)

Requested Public Entity for Donation

Entity Contact

Telephone

Communications
A. J. J. 8/29/23
[Signature] 9/13

Department Director

EMC Member

President/CEO

[Signature]
[Signature]
[Signature] 9/15/23

K. J. J. 8/29/23

CREATED BY USER: FRANZAL

FROM FACILITY: SYSTEM FROM ASSET NUMBER: KN029064 FROM ASSET CLASS: BEGINNING FROM DEPARTMENT: BEGINNING
 THRU FACILITY: SYSTEM THRU ASSET NUMBER: KN029064 THRU ASSET CLASS: END THRU DEPARTMENT: END
 FROM STATUS DATE: BEGINNING FROM ACQUIRED DATE: BEGINNING FROM RETIRE DATE: BEGINNING FROM RETIRE TYPE: BEGINNING FROM RETIRE TYPE DATE:
 THRU STATUS DATE: END THRU ACQUIRED DATE: END THRU RETIRE DATE: END THRU RETIRE TYPE: END THRU RETIRE TYPE DATE:

FACILITY: SYSTEM
 CLASS: MEQ-PSJ DI MOVEABLE EQUIP-PSJ HC

NUMBER	DESCRIPTION	LIFE	STATUS	STS DATE	ACQ DATE	RET DATE	COST	BOOK
DEPARTMENT: 1.731 1 HOSP ADM								
KN029064	GREEN TOUCHSCREEN KIOSK FOR PSJ HC PROJECT		ACTIVE	03/11/08	02/12/08		9275.00	0.00
							-----	-----
							9275.00	0.00
TOTAL FOR CLASS:							9275.00	0.00

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 required.

Asset Description	Asset Control KN #	Purchase Date	Purchase Price	CE #	Reason for Disposal	Net Book Value (provided by Finance Dept)	Dept.
CANCER CTR-POLYCOM VIEWSTATION	KN028078	12/23/2003	6,944.00		no longer used; obsolete	0.00	1.450
INFOCUS PROJECTOR (DONATED FUNDS FROM CANCER PR	KN028419	4/14/2005	1,585.00		no longer used; obsolete	0.00	1.450

TOTAL BOOK VALUE \$0.00

Requesting Department:

Net Book Value (Finance)

Sr. VP Finance/CFO

Board Approved (CFO Signature)

Requestor Notified Finance

Asset Disposed of or Donated

Removed from Asset List (Finance)

Requested Public Entity for Donation

Entity Contact

Telephone

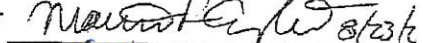
Oncology Service Line



A. Franz 8/24/23

 9/13

Department Director Matt Graybill

EMC Member  8/23/23

President/CEO  9/15/23

KDA 8/29/23

DATE: 08/24/23 @ 0846
USER: FRANZAL

Parrish Medical Center FA *Live*
CURRENT VALUES REPORT

CREATED BY USER: FRANZAL

FROM FACILITY: SYSTEM FROM ASSET NUMBER: KN028078 FROM ASSET CLASS: BEGINNING FROM DEPARTMENT: BEGINNING
THRU FACILITY: SYSTEM THRU ASSET NUMBER: KN028078 THRU ASSET CLASS: END THRU DEPARTMENT: END

FROM STATUS DATE: BEGINNING FROM ACQUIRED DATE: BEGINNING FROM RETIRE DATE: BEGINNING FROM RETIRE TYPE: BEGINNING FROM RETIRE TYPE DATE:
THRU STATUS DATE: END THRU ACQUIRED DATE: END THRU RETIRE DATE: END THRU RETIRE TYPE: END THRU RETIRE TYPE DATE:

FACILITY: SYSTEM
DEPARTMENT: 1.450 1 CANCER CARE PROGRAM

NUMBER	DESCRIPTION	LIFE	STATUS	STS DATE	ACQ DATE	RET DATE	COST	BOOK
CLASS: MEQ-HOSP	MOVEABLE EQUIP - HOSPITAL							
KN028078	CANCER CTR-POLYCOM VIEWSTATION		ACTIVE	01/08/04	12/23/03		6944.00	0.00
							----- 6944.00	----- 0.00
TOTAL FOR DEPARTMENT:							6944.00	0.00

DATE: 08/24/23 @ 0847
USER: FRANZAL

Parrish Medical Center EA *Live*
CURRENT VALUES REPORT

CREATED BY USER: FRANZAL

FROM FACILITY: SYSTEM FROM ASSET NUMBER: KN028419 FROM ASSET CLASS: BEGINNING FROM DEPARTMENT: BEGINNING
THRU FACILITY: SYSTEM THRU ASSET NUMBER: KN028419 THRU ASSET CLASS: END THRU DEPARTMENT: END
FROM STATUS DATE: BEGINNING FROM ACQUIRED DATE: BEGINNING FROM RETIRE DATE: BEGINNING FROM RETIRE TYPE: BEGINNING FROM RETIRE TYPE DATE:
THRU STATUS DATE: END THRU ACQUIRED DATE: END THRU RETIRE DATE: END THRU RETIRE TYPE: END THRU RETIRE TYPE DATE:

FACILITY: SYSTEM
DEPARTMENT: 1.450 1 CANCER CARE PROGRAM

NUMBER	DESCRIPTION	LIFE	STATUS	STS DATE	ACQ DATE	RET DATE	COST	BOOK
CLASS: MEQ-HOSP	MOVEABLE EQUIP - HOSPITAL							
KN028419	INFOCUS PROJECTOR (DONATED FUNDS FROM CANCER PR	ACTIVE		09/08/05	04/14/05		1585.00	0.00
							-----	-----
							1585.00	0.00
TOTAL FOR DEPARTMENT:							1585.00	0.00

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. #
GE T2000 Treadmill	KN022146	10/15/2002	4479.40	PMC01267	Unit is End of life, not functional and no longer repairable.	0.00	1.464
GE T2000 Treadmill	KN022145	9/9/2002	5439.80	PMC01282		0.00	1.464

Requesting Department EKG / Stress lab Department Director [Signature]
 Net Book Value (Finance) [Signature] 0/24/23 EMC Member [Signature] 8/23/23
 Sr. VP Finance/CFO [Signature] President/CEO [Signature] 9/15/23
 Board Approval: (Date) [Signature] 9/13 CFO Signature _____
 Requestor Notified Finance _____
 Asset Disposed of or Donated _____
 Removed from Asset List (Finance) _____
 Requested Public Entity for Donation _____
 Entity Contact _____
 Telephone _____

K99 8/29/23

DATE: 08/23/23 @ 0954
USER: FRANZAL

Parrish Medical Center FA "Live"
CURRENT VALUES REPORT

PAGE 1

CREATED BY USER: FRANZAL

FROM FACILITY: SYSTEM FROM ASSET NUMBER: KN022145 FROM ASSET CLASS: BEGINNING FROM DEPARTMENT: BEGINNING
THRU FACILITY: SYSTEM THRU ASSET NUMBER: KN022146 THRU ASSET CLASS: END THRU DEPARTMENT: END

FROM STATUS DATE: BEGINNING FROM ACQUIRED DATE: BEGINNING FROM RETIRE DATE: BEGINNING FROM RETIRE TYPE: BEGINNING FROM RETIRE TYPE DATE:
THRU STATUS DATE: END THRU ACQUIRED DATE: END THRU RETIRE DATE: END THRU RETIRE TYPE: END THRU RETIRE TYPE DATE:

FACILITY: SYSTEM
DEPARTMENT: 1.464 1 STRESS LAB

NUMBER	DESCRIPTION	LIFE	STATUS	STS DATE	ACQ DATE	RET DATE	COST	BOOK
CLASS: MEQ-HOSP MOVEABLE EQUIP - HOSPITAL								
KN022145	TREADMILL - SERIES 2000 W/HANDRAIL SET	CE	ACTIVE	10/10/02	09/09/02		5439.80	0.00
KN022146	TREADMILL - SERIES 2000 WITH HANDRAIL SET		ACTIVE	11/08/02	10/15/02		4479.40	0.00
							9919.20	0.00
TOTAL FOR DEPARTMENT:							9919.20	0.00



Healing Families – Healing Communities®

parrishmed.com

Finance Committee

FYTD August 31, 2023 – Performance Dashboard

Indicator	FYTD 2023 Actual	FYTD 2023 Budget	FYTD 2022 Actual
IP Admissions	4,102	4,936	4,449
LOS	4.8	4.7	5.6
Surgical Cases	5,070	5,168	5,364
ED Visits	27,534	27,688	27,178
OP Volumes	75,328	73,906	71,705
Hospital Margin %	0.82%	10.94%	4.51%
Investment Income \$	\$8.7 Million	\$3.1 Million	-\$7.3 Million

EXECUTIVE COMMITTEE

Stan Retz, CPA, Chairman

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

Herman A. Cole, Jr.

Elizabeth Galfo, M.D.

Maureen Rupe

George Mikitarian, President/CEO (non-voting)

**DRAFT AGENDA
EXECUTIVE COMMITTEE
NORTH BREVARD COUNTY HOSPITAL DISTRICT
OPERATING
PARRISH MEDICAL CENTER
MONDAY, OCTOBER 2, 2023
FIRST FLOOR, CONFERENCE ROOM 2/3/4/5
IMMEDIATELY FOLLOWING FINANCE COMMITTEE**

CALL TO ORDER

- I. Approval of Minutes.

Motion to approve the minutes of the August 7, 2023 meeting.

- II. Reading of the Huddle
- III. Attorney Report – Mr. Boyles
- IV. Other
- V. Executive Session (if needed)

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 THE ADMINISTRATIVE OFFICES, AT 951 NORTH WASHINGTON AVENUE, TITUSVILLE, FLORIDA 32796, AT LEAST FORTY-EIGHT (48) HOURS PRIOR TO THE MEETING. FOR INFORMATION CALL (321) 268-6110.

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 August 7, 2023, in Conference Room 2/3/4/5, First Floor. The following members were present:

Stan Retz, CPA, Chairman
Robert L. Jordan, Jr., C.M., Vice Chairman
Herman A. Cole, Jr.
Maureen Rupe
George Mikitarian (non-voting)

Members Absent:
Elizabeth Galfo, M.D. (excused)

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

CALL TO ORDER

Mr. Retz called the meeting to order at 12:37 p.m.

CITY LIAISON

City Manager Larese provided the latest edition of Titusville Talking Points and addressed questions from the committee regarding the city of Titusville. The Executive Committee recessed at 12:53 p.m. for his report.

REVIEW AND APPROVAL OF MINUTES

The Executive Committee reconvened at 1:13 p.m. to continue its agenda. Discussion ensued and the following motion was made by Mr. Cole, seconded by Mr. Jordan, and approved (4 ayes, 0 nays, 0 abstentions).

ACTION TAKEN: MOVED TO APPROVE THE MAY 1, 2023, MEETING AND JUNE 5, 2023 MEETING MINUTES OF THE EXECUTIVE COMMITTEE OF THE BOARD, AS PRESENTED.

READING OF THE HUDDLE

Mr. Specht read the Weekly Huddle.

ATTORNEY REPORT

Mr. Boyles indicated that the Attorney report will be given during the Education Committee meeting.

OTHER

There was no other business to come before the committee.

ADJOURNMENT

There being no further business to discuss, the committee adjourned at 1:20 p.m.

Stan Retz, CPA
Chairman

EDUCATION COMMITTEE

Billie Fitzgerald, Chairperson
Maureen Rupe, Vice Chairperson
Robert L. Jordan, Jr., C.M. (ex-officio)
Ashok Shah, M.D.
Stan Retz, CPA
Elizabeth Galfo, M.D.
Herman A Cole, Jr.
Jerry Noffel
Billy Specht
Aluino Ochoa, M.D.
George Mikitarian, President/CEO (Non-voting)

**NORTH BREVARD COUNTY HOSPITAL DISTRICT
OPERATING
PARRISH MEDICAL CENTER
EDUCATIONAL, GOVERNMENTAL AND COMMUNITY RELATIONS COMMITTEE
MONDAY, OCTOBER 2, 2023
IMMEDIATELY FOLLOWING EXECUTIVE SESSION
FIRST FLOOR CONFERENCE ROOM 2/3/4/5**

CALL TO ORDER

- I. Review and Approval of Minutes

Motion to approve the minutes of the August 7, 2023 meeting.
- II. Board Self-Assessment – Mr. Lifton
- III. Burrell College of Osteopathic Medicine – Mr. Boyles
- IV. Other
- V. 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 THE ADMINISTRATIVE OFFICES AT 951 NORTH WASHINGTON AVENUE, TITUSVILLE, FLORIDA 32796, AT LEAST FORTY-EIGHT (48) HOURS PRIOR TO THE MEETING. FOR INFORMATION CALL (321) 268-6110.

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

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

A regular meeting of the Educational, Governmental and Community Relations Committee of the North Brevard County Hospital District operating Parrish Medical Center was held on August 7, 2023, at 1:38 p.m. in Conference Room 2/3/4/5, First Floor. The following members were present:

Billie Fitzgerald, Chairperson
Maureen Rupe, Vice Chairperson
Robert L. Jordan, Jr., C.M.
Ashok, Shah, M.D.
Stan Retz, CPA
Billy Specht
Herman A. Cole, Jr.
Jerry Noffel
Aluino Ochoa, M.D
George Mikitarian (non-voting)

Member(s) Absent:

Elizabeth Galfo, M.D (excused)

CALL TO ORDER

Ms. Fitzgerald called the meeting to order at 1:38 p.m.

REVIEW AND APPROVAL OF MINUTES

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

ACTION TAKEN: MOVED TO APPROVE THE MINUTES OF THE MAY 1, 2023, AND THE JUNE 5, 2023, EDUCATIONAL, GOVERNMENTAL, AND COMMUNITY RELATIONS COMMITTEE MEETINGS, AS PRESENTED.

COMMUNITY MESSAGE REGARDING POOL CLOSURE

Ms. Sellers shared a presentation regarding the discontinuation of the indoor pool operations at the Cheney Highway location and addressed questions from the committee.

Ethics and Sunshine Law

Ms. Ramos presented a training and PowerPoint presentation for the Board concerning Ethics, the Sunshine Law, and the Public Records Law. Ms. Ramos summarized the ethics rules; described prohibited acts with examples; described voting conflicts with examples; described competing financial interests pointing the Members to examples set forth in the District Bylaws; addressed the propriety of receiving gifts and the disclosure of any gifts received; described financial disclosure required of Members of the Board, including what, where and when to disclose; provided an overview of the Sunshine Law and rules most likely applicable

to Members of the Board; described permissible closed session meetings; and provided an overview of the Public Records Law and its applicability to the District and its records. Copies of the PowerPoint slides are appended to the file copy of these minutes.

OTHER

No other items were presented for consideration by the committee.

ADJOURNMENT

There being no further business to come before the committee, the Educational, Governmental and Community Relations Committee meeting adjourned at 2:18 p.m.

Billie Fitzgerald
Chairperson



Board Self-Assessment Introduction and Overview

October 2, 2023

Context for the Self-Assessment

- Specified in PMC bylaws
 - Every odd year
 - Educational Committee responsibility
- Element of good governance
- Consider if/how governance might be improved
- Three previous assessments facilitated by Lifton Associates

Overview of the Process

- Questionnaire; return by October 9
- Individual interviews
- Review of bylaws, minutes
- Compare to prior assessments, peer hospitals
- Results at November 6 meeting
 - Discussion
 - Follow-up, if necessary

Interview Format

- Review notes from 2021 interview
 - Clarification
 - Current observations
- Changes in professional status, board role
- Discuss open-ended questions
 - Challenges facing PMC
 - Reflections on the Pandemic
- Additional thoughts about PMC governance

James Lifton, LFACHE
Lifton Associates, LLC
305 S. Chester
Park Ridge, Illinois 60068
847.518.0141

jim@liftonassociates.com
www.liftonassociates.com

**DRAFT AGENDA
BOARD OF DIRECTORS MEETING - REGULAR MEETING
NORTH BREVARD COUNTY HOSPITAL DISTRICT
OPERATING
PARRISH MEDICAL CENTER
OCTOBER 2, 2023
NO EARLIER THAN 2:00 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. Recognitions(s)
- V. Review and Approval of Minutes (August 7, 2023 Regular Meeting)
- VI. Open Forum for PMC Physicians
- VII. Public Input and Comments***₁
- VIII. Unfinished Business***
- IX. New Business***
- X. Medical Staff Report Recommendations/Announcements
 - A. **Motion to Recommend the Board of Directors approve to appoint Regan Wagner as Content Expert on the Infection Control Committee as required by JC IC.01.01.01 EP6.**
- XI. Public Comments (as needed for revised Consent Agenda)
- XII. Consent Agenda***
 - A. Finance
 1. **Motion to Recommend the Board of Directors Approve the FY 2024 Capital Budget in the amount of \$ 2,000,000.00**
 2. **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.

***1 Pursuant to PMC Policy 9500-154:

- non-agenda items – 3 minutes per citizen
- agenda items for board action -- 3 minutes per citizen, permitted prior to board discussion for regular agenda action items and prior to board action on consent agenda
- 10 minute total per citizen
- must be related to the responsibility and authority of the board or directly to an agenda item [see items marked ***]

XIII. Committee Reports

- A. Quality Committee
- B. Finance Committee
- C. Executive Committee
- D. Educational, Governmental and Community Relations Committee
- E. Planning, Physical Facilities & Properties Committee

XIV. 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)

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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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.

ANY MEMBER OF THE PUBLIC THAT WILLFULLY INTERRUPTS OR DISTURBS A MEETING OF THE BOARD OF DIRECTORS IS SUBJECT TO REMOVAL FROM THE MEETING BY AN OFFICER AND SUCH OTHER ACTIONS AS MAY BE DEEMED APPROPRIATE AS PROVIDED IN SECTION 871.01 OF THE FLORIDA STATUTES.

DRAFT
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 (the District) was held at 2:21 p.m. on August 7, 2023 in Conference Room 2/3/4/5, First Floor. The following members were present:

Robert L. Jordan, Jr., C.M., Chairperson
Stan Retz, Vice Chairperson
Herman A. Cole, Jr.
Ashok Shah, M.D.
Billie Fitzgerald
Maureen Rupe
Jerry Noffel
Billy Specht

Member(s) Absent:

Elizabeth Galfo, M.D. (excused.)

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

CALL TO ORDER

Mr. Jordan called the meeting to order at 2:21 p.m. and determined a quorum was present per Article 1.1.4 of the District Bylaws.

PLEDGE OF ALLEGIANCE

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

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

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

APPROVAL OF MEETING AGENDA

Mr. Jordan requested approval of the meeting agenda in the packet as revised. Discussion ensued and the following motion was made by Mr. Cole, seconded by Mr. Specht, and approved (8 ayes, 0 nays, 0 abstentions).

ACTION TAKEN: MOVED TO APPROVE THE REVISED MEETING AGENDA OF THE BOARD OF DIRECTORS OF THE DISTRICT AS PRESENTED.

RECOGNITIONS

There were no recognitions.

REVIEW AND APPROVAL OF MINUTES

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

ACTION TAKEN: MOVE TO APPROVE THE MINUTES OF THE MAY 1, 2023, AND JUNE 5, 2023, REGULAR MEETINGS, 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

There was no new business.

MEDICAL STAFF REPORT RECOMMENDATIONS/ANNOUNCEMENTS

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

ACTION TAKEN: MOVED THAT THE BOARD OF DIRECTOR'S OF THE NORTH BREVARD COUNTY HOSPITAL DISTRICT APPROVED THE RESOLUTION APPROVING AND RATIFIED THE ADOPTION OF THE AMENDED MEDICAL STAFF BYLAWS AND THE ADOPTION OF THE AMENDED MEDICAL STAFF RULES AND REGULATIONS AS EXECUTED BY THE CHAIRPERSON OF THE BOARD OF DIRECTORS ON THE 14TH DAY OF JUNE 2023.

CONSENT AGENDA

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

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

Consent Agenda

A. Finance

1. **Motion To recommend the Board of Directors approve the Moore Stephens Lovelace Engagement Letter as Auditors for the FY23 as presented.**
2. **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.**

COMMITTEE REPORTS

Quality Committee

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

Finance Committee

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

Executive Committee

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

Educational, Governmental and Community Relations Committee

Ms. Fitzgerald reported that all items were covered during the Educational, Governmental and Community Relations Committee meeting.

Planning, Physical Facilities and Properties Committee

Mr. Jordan reported the Planning, Physical Facilities and Properties Committee did not meet.

PROCESS AND QUALITY REPORT

Mr. Mikitarian shared that Lisa Dickerson will be joining PMC on September 11th as the new Vice President, Nursing Administration/CNO.

Hospital Attorney

Legal counsel had no report.

OTHER

There was no other business to come before the Board.

CLOSING REMARKS

There were no closing remarks.

ADJOURNMENT

There being no further business to discuss, the Parrish Medical Center Board of Directors meeting adjourned at 2:27p.m.

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

**NORTH BREVARD COUNTY HOSPITAL DISTRICT
OPERATING PARRISH MEDICAL CENTER
MEDICAL EXECUTIVE COMMITTEE MEETING – REGULAR SESSION MINUTES
September 19, 2023 @ 5:30pm**

Present: A. Ochoa, MD, G. Mikitarian, M. Navas, MD, C. Jacobs, MD, B. Mathews, MD, P. Carmona, MD, K. Patel, MD, H. Cole, G. Cuculino, MD, C. Manion, MD, C. Fernandez, MD,

Absent: K. George, MD, C. Rajan, DO, C. McAlpine

The meeting of the Medical Executive Committee of the North Brevard County Hospital District operating Parrish Medical Center was called to order on September 19, 2023 at 5:30pm in the Conference Center. A quorum was determined to be present.

CALL TO ORDER.

Dr. Ochoa called the meeting to order at 5:32 pm.

I. REVIEW AND APPROVAL OF MINUTES

Motion to approve the Regular Session minutes of August 15, 2023 as written and distributed *was made by Dr. Manion, seconded by Dr. Carmona, and unanimously approved.*

2. Guest Presenter: Lee Scheinbart, MD, Chief Health Affairs Officer Burrell College of Osteopathic Medicine, Melbourne, FL *The Role of Medical Education in Community*

Retention rates are highest among physicians who completed both UME and GME in same state. Florida 78.8%

Burrell graduated a total of 560 physicians from 2020 – 2023.

152 Internal Medicine
121 Family Medicine
44 Pediatrics
25 Psychiatry
17 OG/GYN

Burrell COM is currently affiliated with Steward and Health First thru the FIT campus Melbourne

Supervision on the floors?

You will NOT have a student unless you are appointed to the teaching faculty of BCOM and undergone the requisite training.

Is there any compensation for the physician?

These are voluntary physician positions paid for by the college.

Does having a Medical Student with you slow you down?

Yes, it can, but for the better. It keeps you sharp, it keeps you current, but if you don't enjoy doing it, it will not be a good fit. However, if successful and you can retain 1 or 2 to join on, that's a big win/win.

Studies show that patients like having a student with the physician. The added conversation, the ability to have a little more time with the physician is a positive for both patient and student.

There is no financial gain to the hospital.

Graduate Medical Education – a hospital in a *recognized GME program* gain higher reimbursement for ALL patients who come to that hospital, not just those who have a student encounter.

Do you need to undergo Osteopathic training if you are a MD?

No. Today's Osteopathic Medical training virtually mirrors that of the MD with the one exception being the Osteopathic Manipulative Medicine, however that training is accomplished on campus.

Does having a student have any affect on metrics like length of stay.

No. There is no documented evidence of such.

To have a successful program the hospital must:

1. Have physicians on board, faculty must be all in
2. Nurses on board. The Nursing staff plays an integral role
3. Administration

Students on hospital campus are beholden to the Bylaws, Rules & Regulations and all governing policies of the hospital.

What exactly can the students do, is there a delineated set of privileges provided before hand.

There is NOT a list of "can" and "cannot" do, however there is a framework provided. They can ASSIST, but they CANNOT do. These guidelines are all reviewed in the Physician Development prior to the programs launch.

Once our guest had left, Mr. Mikitarian invited post presentation discussion.

1. Mr. Mikitarian expressed “tactical” concerns. Space, time and resources.
 2. We are a non-profit, Burrell being for profit, AND incorporated in another state could pose a problem. We cannot extend taxpayer dollars to aid in the education of a for-profit school population.
 3. Dr. Stuart referenced the State of Hawaii and its Osteopathic model.
 4. Dr. Mathews pointed out that these are medical students, NOT residents, and all Osteopath schools in the country are for profit.
 5. Could Burrell possible pay some sort of “stipend” per student to meet the demand for public justification of tax payors dollars?
 6. Dr. Carmona expressed the unanimous opinion of the Medical Staff leadership to pursue opportunity. Dr. Carmona asked Mr. Cole to represent the Medical Staff at the next Board Meeting and present the program accordingly.
 7. Mr. Mikitarian noted the he will review with legal counsel and provide update at the next Board Meeting.
3. **OLD Business:** None
4. **Committee Reports:**

The Infection Control Committee – June 21, 2023 – *attached*

MOTION TO APPOINT REGAN WAGNER AS CONTENT EXPERT ON THE INFECTION CONTROL COMMITTEE AS REQUIRED BY JC IC.01.01.01 EP6 WAS MADE BY DR. MANION, SECONDED BY DR. CUCULINO AND UNANIMOUSLY APPROVED.

Pharmacy & Therapeutics Committee – August 30, 2023 *attached*

There was a motion to approve 9900-17 Rules Governing the Hospital Formulary however, as indicated in the minutes, the policy requires that it be reformatted to current standards, initiator updated and workflow changed. The policy will route thru the system AND back thru the MEC for second review once complete. Tabled.

5. Department Reports:

The ICU Committee – August 24, 2023 *attached* NO MOTIONS RECORDED requiring further action.

Department of Medicine – August 29, 2023 NO MOTIONS RECORDED requiring further action.

General Medical Staff Quarterly Meeting – September 5, 2023 NO MOTIONS RECORDED requiring further action.

THERE BEING NO MOTIONS RECORDED INDIVIDUALLY, A MOTION WAS MADE BY DR. JACOBS TO APPROVE THE ICU, DEPARTMENT OF MEDICINE and GENERAL MEDICAL STAFF MEETING MINUTES AS WRITTEN AND DISTRIBUTED, THE MOTION WAS SECONDED BY DR. MATHEWS AND UNANIMOUSLY APPROVED.

6. Policies requiring MEC approval:

MOTION TO APPROVE THE FOLLOWING POLICIES IN BLOCK WAS MADE BY DR. CUCULINO, SECONDED BY DR. MANION AND UNANIMOUSLY APPROVED.

Continuing Medical Education (CME) – *the policy was reformatted, workflow changed, however there were no edits to the content.*

Department Policy on Financial Interest, 9900-67 – *the policy was reformatted, workflow changed, however there were no edits to the content.*

Department Policy for Requirements for Establishment of Competency in Obstetrics, 9950-36 – *the policy was reformatted, workflow changed, and reviewed for content by Rosanne Henry, MD.*

Department Procedure for Temporary Privileges: Locum Tenens, 9900-56 – *the policy was reformatted, workflow changed however there were no edits to the content.*

Guidelines for Resolving Medical Staff/Hospital Personnel Communications Problems – *the policy was reformatted, workflow changed however there were no edits to the content.*

Department Procedure for Admission/Discharge/Transfer Criteria for ICU, 9900-23 – *the policy was reformatted, workflow updated and content reviewed by K. Foreman, ICU.*

Department Procedure for Criteria for Independent Clinical Privileges for Percutaneous Coronary Intervention Procedures, 9950-25 – *the policy was reformatted, workflow updated and content reviewed by Melchor Gonzalez, MD without edits.*

Standard Administration Times – *the policy was reformatted, workflow updated and the content reviewed by K. Patel, MD and H. Grolet, PharmD. without edits.*

Infusion of Vasoactive Medications – 9900-36 – *the policy was reformatted, workflow updated and the content reviewed by K. Patel, MD and AJ Janardhan, MD without edits.*

Policy Established Guidelines for Potassium I.V. Therapy – Limits of Administration 9900-1 – *the policy was reformatted, workflow updated and the content reviewed by K. Patel, MD and S. Verma, MD without edits.*

Do Not Resuscitate (DNR) During Surgery, 9900-58 – *the policy was reformatted, workflow updated and the content reviewed by J. Ford, MD without edits.*

Criteria for Medical Fluoroscopy, 9950-38 – *the policy was reformatted, workflow updated. The content was reviewed by C. Fernandez, MD without edits.*

Physician (LIP) Credentialing & Staffing During all Disasters, 9900-73 – *policy was reformatted, workflow updated and the content was edited to delete any reference to Code Purple.*

Hazardous Drugs, 9900-27 – *the policy was reformatted, workflow updated and the content reviewed by H. Grolet, PharmD. And H. Petrie, PharmD, without edits.*

Medication Use Without Supporting Use Documentation, 9900-11 – *the policy was reformatted, workflow updated and the content reviewed by K. Patel, MD without edits.*

Criteria for Polysomnography/MSLT Interpretation, 9950-31 – *the policy was reformatted, workflow updated and the content reviewed by A. Ochoa, MD without edits.*

Policy: Requirements/Qualifications for Nuclear Medicine and Radiologic Technologists, 9900-98 – *the policy was reformatted, workflow updated and the content reviewed by David Duisberg, Supervisor, Nuclear Medicine with edits attached.*

Department Procedure for Medical Staff Hurricane (Shelter in Place) Response Procedure, 9900-75 – *the policy was reformatted, the workflow changed, removed any reference to Code Purple.*

7. **CONSENT AGENDA - STANDING ORDERS**

- Pain Management Preoperative (E3751ab) - New Order Set

MOTION TO APPROVE THE CONSENT AGENDA AS WRITTEN AND DISTRIBUTED WAS MADE BY DR. CARMONA, SECONDED BY DR. STUART AND UNANIMOUSLY APPROVED.

8. Report from Administration:

Mr. Mikitarian noted the reopening of the 5th floor, nursing recruitment, and subsequent staffing is getting better. This will help with ER Holds, and as a result patient experience/satisfaction.

9. Report from the Board: None

10. Open Forum:

Dr. Cuculino asked about the Oral & Maxillofacial Facial Surgeon recently having joined the Medical staff and would he consider taking call?

The Physician was granted Consulting privileges and has no obligation to take call, however Medical Staff Services will reach out and extend the offer noting the coverage (7a/7a) and response times required.

Dr. Cuculino touched upon the “Bridging” orders. In an effort to expedite patient from ED to admitted, the Bridging order would allow the ED admitting rights, whereby they did not have these privileges prior. Will require CMEC review to change delineated privileges language for ED. Dr. Kevat Patel and Dr. Ochoa both agreed that anything that can help with thru-put will help while mindful that the bridging orders must time-out at which time the Hospitalist is assigned and responsible for ongoing care.

There being no further business the meeting adjourned at 6:32pm.

Aluino Ochoa, MD
President, Medical Staff

Christopher Manion, MD
Secretary/Treasurer, Medical Staff

**PARRISH MEDICAL CENTER
INFECTION CONTROL COMMITTEE MEETING
MINUTES**

LOCATION: C/R 2/3/4/5

DATE: June 21, 2023

Present:

Regan Wagner, Kristin Rusoff, Kristie Foreman, Emily Leathers, K. Patel, MD, B. Burstein, MD, H. Petrie

AGENDA ITEM		DISCUSSION	ACTION
I.	CALL TO ORDER:	A meeting of the Infection Control Committee of Parrish Medical Center was called to order by Regan Wagner at 5:12pm on June 21, 2023. A quorum was present.	Noted for the minutes.
II	Approval of Minutes	The minutes of March 8, 2023 were distributed for review.	K. Foreman motioned for approval of the minutes as written and distributed, Dr. K. Patel seconded, unanimously approved.
III.	Unfinished Business	None	

INFECTION CONTROL COMMITTEE MEETING

June 21, 2023

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AGENDA ITEM	DISCUSSION	ACTION
<p>IV.</p>		
<p>Surveillance Reports:</p>		
<p>A. Invasive Device Surveillance (ICU): VAE, BSI, UTI</p>	<p>Qtr 1 2023 rate 0.00 (0/378)</p>	
<p>B. Invasive Device Surveillance (Non-ICU), BSI, UTI</p>	<p>Qtr 1 2023 rate: 0.0 (0/463)</p>	
<p>C. Clostridoides difficile: House- wide NHSN)</p>	<p>3 Hospital onset C. diff in Q1 2023</p>	
<p>D. MRSA: BSI House-Wide for NHSN</p>	<p>Zero Hospital acquired MRSA Q1 2023</p>	
<p>E. Post Discharge Surveillance- Abd. Hysterectomy/Colon</p>	<p>None</p>	
<p>F. Hand Hygiene Monitors/Barrier Precautions</p>	<p>3, 4 and 5th, 200/month per 13, ICU and WC, 150/month per 7-9 OR/Special Procedures 200/month (per 400 procedures) Cath Lab 30/month per 60-119 ED 200/month per 2000 January Total Hospital Compliance 94% February Total Hospital Compliance 93% March Total Hospital Compliance 91%</p>	
<p>G. SPD, Perioperative, Dialysis Test Reports</p>	<p>Dialysis Machine cultures: All in the green with the exception of January Bacteria CFU/mL RD37 and B-05 were yellow. January Endotoxin EU/mL RD-22, RD37, RO17, B05 February Bacteria CFU/mL RO-17 February Endotoxin EU/mL RD22, RD37 March Bacteria CFU/mL, RD22, RD35, RD37 March Endotoxin EU/mL RD-22</p>	

INFECTION CONTROL COMMITTEE MEETING

June 21, 2023

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AGENDA ITEM	DISCUSSION	ACTION
<p>IV. H. Blood Culture Contamination</p> <p>New Business</p> <p>Open Forum:</p> <p>Adjournment:</p>	<p>Jan Total Hosp 3.1%, Nursing 0.0%, ED 6.61%, Lab, .39% Feb Total Hosp 3.06%, Nursing 5.88%, ED 5.43%, Lab .45% Mar Total Hosp 3.47%, Nursing 13.33%, ED 5.9%, Lab .68%</p> <p><i>Dr. Kevat Patel motioned to name Regan Wagner content expert as outlined in JC IC.01.01.01 EP6;</i> For hospitals that use Joint Commission accreditation for deemed status purposes: An individual(s) who is qualified through education, training, experienced, or certification in infection prevention and control is appointed by the governing body to be responsible for the infection prevention and control program. The appointment is based on recommendations of medical staff leadership and nursing leadership. <i>The motion was seconded by K. Foreman and unanimously approved.</i></p> <p>None</p> <p>There being no further business the meeting adjourned at 5:37pm.</p> <p>NEXT MEETING September 13, 2023 in CR/6</p>	

INFECTION CONTROL COMMITTEE MEETING

June 21, 2023

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AGENDA ITEM	DISCUSSION	ACTION
Committee Chair: _____ Nimesh Naik, MD, Chair		