

- CALL TO ORDER** The meeting was called to order at 5:30 pm by Robert Sharp, District Board Chair.
- PRESENT** Robert Sharp, Chair
Jody Veenker, Vice Chair
Mary Mae Kilpatrick, Secretary
Topah Spoonhunter, Treasurer
Jean Turner, Member-at-Large
Kelli Davis MBA, Interim Chief Executive Officer and Chief Operating Officer
Joy Engblade MD, Chief Medical Officer
Allison Partridge RN, MSN, Chief Nursing Officer
Vinay Behl, Interim Chief Financial Officer
Keith Collins, General Legal Counsel (Jones & Mayer)
- ABSENT** Sierra Bourne MD, Chief of Staff
- URGENT NEED TO ADD TO AGENDA** Northern Inyo Healthcare District (NIHD) Legal Counsel Keith Collins requested that the Board of Directors consider adding one item to the agenda for this week's meeting, due to the fact that an immediate need to discuss potential action exists and because this item came to the attention of District Administration following posting of the agenda for this meeting. The item is:
- *Litigation under Gov Code 54956.9(d)(2).*
- It was moved by Mr. Sharp, seconded by Jody Veenker, and unanimously passed to approve the addition of this agenda item as requested.
- OPPORTUNITY FOR PUBLIC COMMENT** Mr. Sharp announced that the purpose of public comment is to allow members of the public to address the Board of Directors. Public comments shall be received at the beginning of the meeting and are limited to three (3) minutes per speaker, with a total time limit of thirty (30) minutes being allowed for all public comments unless otherwise modified by the Chair. Speaking time may not be granted and/or loaned to another individual for purposes of extending available speaking time unless arrangements have been made in advanced for a large group of speakers to have a spokesperson speak on their behalf. Comments must be kept brief and non-repetitive. The general Public Comment portion of the meeting allows the public to address any item within the jurisdiction of the Board of Directors on matters not appearing on the agenda. Public comments on agenda items should be made at the time each item is considered. No comments were heard.

NEW BUSINESS

COVID 19 UPDATE

Chief Nursing Officer Allison Partridge, RN, MSN provided a monthly Covid 19 update which included the following:

- CalOSHA and CDC masking Guidelines update
- Inyo County Covid cases remain low
- NIHD continues to offer vaccinations to members of the public in the front lobby
- NIHD patient clinics are assisting by providing a flexible schedule to accommodate patient who need to schedule a second dose.

CERNER PROJECT UPDATE

Daryl Duenkel provided a Cerner update, now 4 weeks after Go Live, stating there has been no interruption in patient care and minimal impact to the District's revenue stream. Mr. Duenkel stated that three committees continue to meet weekly to identify issues as they arise, and they are coming up with solutions. Mr. Duenkel also reported that during these early days revenue is very likely to experience an impact in cash flow as billing discrepancies start being resolved. Materials Management is also being watched closely for discrepancies. Service requests are 65% resolved, continuing to work on 35%. Cerner staff is continuing to provide support remotely through the first quarter. Employees have demonstrated support in moving away from Athena. Mr. Duenkel stated that super users have been given extra training to provide support to new onboarding providers.

Jean Turner expressed appreciation for the update report.

COLOMBO CONSTRUCTION PROJECT UPDATE

Louis Vargas, provided a Building Separation project update report and stated that NIHD passed the OSHPD inspection. OSHPD is now reviewing the plans for final approval.

Mr. Vargas also provided updates on the Omnicell Project noting that the targeted goal is to have Omnicell installed in September.

2021 NIHD STRATEGIC PLAN PRESENTATION

Interim Chief Executive Officer and Chief Operating Officer Kelli Davis, stated that The Executive Team has been meeting regularly to discuss best solutions to address strategic concerns from the Board of Directors. David Sandberg provided an overview of the completed Strategic Plan for 2021-2023, and he explained how this plan would help address NIHD top priorities including; building strong leadership teams and providing transparency. He additionally discussed the importance of ensuring that departments are staffed appropriately.

Mr. Sharp commented that staffing in the HR department has been an ongoing concern. Ms. Davis reported that the executive team has been working with Allison Murray, HR Director for several months in recruiting positions for the HR department, and is pleased to report that several positions have been filled. The Executive Team is looking into hiring an HR consultant. Ms. Davis will apprise the board with more details at a future date.

Ms. Turner thanked Ms. Davis for the attention to the HR component to the Strategic Plan. Ms. Veenker also shared her appreciation for the work that went into this plan. Board members Turner, Veenker and Sharp mention the importance of sharing this information with the community. Mrs. Davis, concurred with board members. Discussion took place on how frequently reporting will occur, and final decision on this topic was not made.

Ms. Davis then called attention to approval of the proposed 2021 NIHD Strategic Plan as presented by Mr. Sandberg. It was moved by Ms. Kilpatrick, seconded by Ms. Turner, and unanimously passed to approve the 2021-2023 NIHD Strategic Plan as presented.

POLICY AND
PROCEDURE
APPROVAL PASSWORD
POLICY

Information Technology Services Director, Bryan Harper called attention to the revision to the proposed policy titled *Password Policy*, the policy has been revised to change passwords from 60 to 90 days which will be around same time as password changes for the Electronic Health Record system. A document will be sent out with instructions on how to change passwords. Mrs. Turner thanked Bryan for all his help.

It was moved by Ms. Turner, seconded by Ms. Veenker, and unanimously passed to approve the revised Password Policy as presented.

POLICY AND
PROCEDURE
APPROVAL, CELL
PHONE PROCUREMENT
AND ISSUANCE

Mr. Harper called attention a proposed policy titled *Cell Phone Procurement and Issuance*, which outlines the process for issuance of cell phones to meet the needs of the hospital team.

It was moved by Ms. Turner, seconded by Ms. Veenker, and unanimously passed to approve the Cell Phone Procurement and Issuance policy as presented.

POLICY AND
PROCEDURE
APPROVAL, LOST AND
FOUND ITEMS

Admission Services Manager, Tanya DeLeo called attention to a revised NIHD policy titled, *Lost and Found Items*, the policy which has been revised to designate the Admissions Services Department to be the recipient of lost and found items.

It was moved by Ms. Turner, second by Topah Spoonhunter, and

unanimously passed to approve the updated Lost and Found Items policy and procedure as presented.

POLICY AND
PROCEDURE
APPROVAL,
ENVIRONMENTAL
SERVICES RADIO
PROCEDURE

NIHD Facilities Manager Scott Hooker called attention to a proposed policy titled, *Environmental Services Radio Procedure*. The purpose of the policy is to provide constant communication within the NIHD Environmental Services Department (EVS) and between the EVS Department and all other departments.

It was moved by Ms. Turner, second by Ms. Kilpatrick, and unanimously passed to approve the Environmental Services Radio Procedure as presented.

POLICY AND
PROCEDURE
APPROVAL,
DEVELOPMENT
REVIEW AND
REVISION OF POLICIES
AND PROCEDURES

Patty Dickson, Compliance Officer called attention to the process on how to revise policy or procedure by leadership team depending on department compliance with CMS guidelines. Ms. Dickson provided a historical prospective on the need for this policy. Ensuring staff is provided with the support to be able to update current and future policies. Ms. Turner thanked Ms. Dickson and Tracy Aspel for their work in getting policies updated.

It was moved by Ms. Turner, seconded by Ms. Veenker, and unanimously passed to approve the proposed policy and procedure as presented.

COMPLIANCE
DEPARTMENT
QUARTERLY REPORT

Patty Dickson provided an overview of the Compliance Department Quarterly report, which included information on UOR's, summary work of 2020 & 1st part of 2021. Approval of the report was then tabled, pending an update being made to the attachments included in the packet.

It was moved by Mr. Spoonhunter, seconded by Ms. Veenker and unanimously passed to table approval of the Compliance Department Quarterly report as requested.

APPROVAL OF
DISTRICT BOARD
RESOLUTION 12-05,
APPROPRIATION LIMIT

Mr. Sharp called to attention to proposed District Board Resolution 12-05, which establishes the District's annual Appropriations limit for the year 2021-2022

It was moved by Ms. Veenker, seconded by Mr. Spoonhunter, and unanimously passed to approve District Board Resolution 12-05 as presented.

BOARD MEETING
VENUE DISCUSSION

District Legal Counsel Keith Collins provided an update on Brown Act requirements during the COVID-19 pandemic, and discussion took place on how to conduct Board of Directors meetings moving forward. Discussion on Hybrid meeting. At the conclusion of the discussion Mr. Sharp proposed that the Board and appropriate staff members resume meeting in person as of July 1st, with outside participants and members of the public being encouraged to participate via Zoom. All remaining board members concurred.

CHIEF OF STAFF
REPORT

On behalf of Chief of Staff Sierra Bourne, MD Ms. Davis and Joy Engblade, MD reported following careful review and consideration the Medical Executive Committee recommends approval of the following:

MEDICAL STAFF
APPOINTMENTS

1. Kevin Efros, MD (*anesthesiology*) – Active Staff
2. Michael Santomauro, MD (*urology*) – Courtesy Staff
3. Andrew Tang, MD (*internal medicine/hospitalist*) – Courtesy Staff

It was moved by Ms. Turner, seconded by Mary Mae Kilpatrick and unanimously passed to approve items 1-3 as requested.

CHANGE IN STAFF
CATEGORY

They additionally reported that the Medical Executive Committee recommends approval of the following

1. Michael Phillips, MD (*emergency medicine*)- change from Active Staff to Honorary Staff

It was moved by Ms. Kilpatrick, seconded by Mr. Spoonhunter, and unanimously passed to approve the Change In Medical Staff Category as requested.

POLICY AND
PROCEDURE
APPROVALS

Ms. Davis also reported following careful review, consideration, and approval by the appropriate Committees the Medical Executive Committee recommends approval of the following District-Wide Policies and Procedures:

1. *Dilation and Curettage or modified suction curettage procedures in the Emergency Department*
2. *Bloodborne Pathogen Exposure Control Plan*
3. *Nursing Care Guidelines in the PACU*
4. *Local Anesthesia in Surgery*
5. *PACU Discharge Criteria*
6. *Pathology Specimens in the Operating room*
7. *Patient Warmer (Warm Air Hyperthermia System)*
8. *Standards of Care in the Perioperative Unit: Pediatric Patient*
9. *Preoperative Preparation and Teaching*
10. *Scheduling Surgical Procedures*

11. *Scope of Service PACU*
12. *Sponge, Sharps, and Instrument Counts*
13. *Surgery Equipment and Routine Supplies*

It was moved by Mr. Sharp, seconded by Ms. Veenker, and unanimously passed to approve all 13 District-Wide Policies and Procedures as presented.

**MEDICAL EXECUTIVE
COMMITTEE REPORT**

Ms. Davis requested that an update on this item be tabled at next regular board meeting, pending update from Doctor Bourne.
It was moved by Ms. Turner, seconded by Ms. Veenker, and unanimously passed to table update of the Medical Executive Committee Report as requested.

CONSENT AGENDA

Mr. Sharp called attention to the Consent Agenda for this meeting which contained the following items:

- Approval of minutes of the May 19, 2021 regular meeting

It was moved by Ms. Kilpatrick, seconded by Ms. Veenker and unanimously passed to approve the minutes of the May 19, 2021 regular meeting as presented.

- Financial and Statistical reports as of April 30, 2021

It was moved by Ms. Veenker, seconded by Ms. Turner and unanimously passed to approve the Financial and Statistical reports of April 30, 2021 as presented.

**NIHD COMMITTEE
UPDATES FROM
BOARD MEMBERS**

Mrs. Sharp also asked if any members of the Board of Directors wished to report on their attendance at any NIHD Committee meetings Director Veenker shared her experience with the Wellness Committee. Ms. Tuner commented on her participation to ACHD, and discussed upcoming trainings. Mr. Spoonhunter commented that he recently participated in CEO Search Committee meeting, and reported the committee is actively searching. Discussion took place on the stake holder interview process, and Ms. Davis shared conversation with the search firm. Mr. Sharp shared his appreciation for the work being done on physician contracts.

**BOARD MEMBER
REPORTS ON ITEMS OF
INTEREST**

Mr. Sharp additionally asked if any members of the Board of Directors wished to report on any items of interest. No additional comments were heard.

ADJOURNMENT TO
CLOSED SESSION

At 7:57 pm Mr. Sharp reported the meeting would adjourn to Closed Session to allow the District Board of Directors to:

A. Conference with legal counsel, existing litigation (pursuant to Gov. Code 54956.9(d)(1)). One

case: NIHD v. SMHD.

B. Conference with legal counsel, anticipated litigation. Significant exposure to litigation

(pursuant to paragraph (2) of subdivision (d) of Government Code Section 54956.9) three cases.

C. Conference with legal counsel, existing litigation (pursuant to Gov. Code Section 54956.9 (d)(1)).

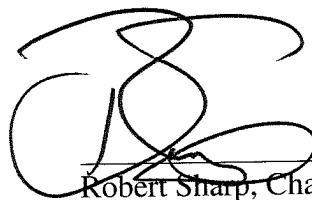
Mr. Sharp additionally noted that it was not anticipated that any action would be reported out following the conclusion of Closed Session.

RETURN TO OPEN
SESSION AND REPORT
OF ACTION TAKEN

At 9:15 pm the meeting returned to Open Session. Mr. Sharp reported that the Board took no reportable action.

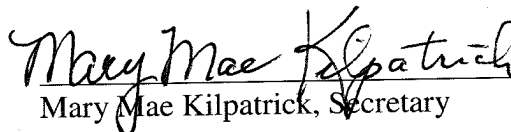
ADJOURNMENT

The meeting adjourned at 9:15 pm.



Robert Sharp, Chair

Attest:



Mary Mae Kilpatrick, Secretary