

- CALL TO ORDER** Northern Inyo Healthcare District (NIHD) Quality Committee Chair Smith called the meeting to order at 3:00 pm.
- PRESENT** Laura Smith, Quality Committee Chair  
David Lent, Quality Committee Vice-Chair  
  
Christian Wallis, Chief Executive Officer  
Allison Partridge, Chief Operations Officer / Chief Nursing Officer  
Alison Murray, Chief Human Resources Officer / Chief Business Development Officer  
Adam Hawkins, DO, Chief Medical Officer  
  
Alison Feinberg, Manager of Quality and Survey Readiness, Quality Assurance  
Patty Dickson, Compliance Officer
- PUBLIC COMMENT** Chair Smith reported that at this time, audience members may speak on any items on the agenda that are within the jurisdiction of the Board.  
  
There were no comments from the public.
- MEETING MINUTES – AUGUST 4, 2025** Motion by Lent: Approve meeting minutes from August 4, 2025  
2<sup>nd</sup>: Smith  
Pass: 2-0
- BETA** Quality Manager Ali Feinberg and CMO Dr. Hawkins provided a brief update on the Beta Heart culture-of-safety initiative, noting that NIHD enrolled in January and is working toward validation in the first domain, which could result in a 2% reduction in insurance premiums. They explained that culture is being measured through the SCORE survey, followed by department-level debriefs and simple, achievable action plans created with staff input. This cycle will repeat annually, with progress reported to the executive team and a goal of improving culture and engagement scores year over year.
- QUALITY DASHBOARD** CEO Wallis and Quality Manager Feinberg presented the new Quality Dashboard, developed to give the Quality Committee and board a clearer, consolidated view of hospital performance across key clinical and operational metrics. The dashboard brings together data from multiple departments, including infection prevention, emergency services, inpatient units, clinics, and support areas. Leadership emphasized that the dashboard is designed to show trends over time, track improvement, and highlight areas needing additional focus.  
  
Feinberg reviewed the major indicators, noting strong performance in multiple safety categories. Recent quarters showed zero central line and catheter-associated infections, low emergency department transfer-out rates, no sentinel events, and no unexpected inpatient mortality. Patient satisfaction scores were mixed but generally close to national benchmarks, with the emergency department continuing to exceed national averages. The dashboard also included operational metrics such as average length of stay, discharge times,

ED wait times, and left-without-being-seen rates, all of which remain strong for a critical access hospital.

The employee engagement and culture scores from the SCORE survey were incorporated into the dashboard to support year-over-year tracking. Feinberg explained that leaders will continue working on targeted improvement plans tied to patient experience and staff engagement, with quarterly check-ins to monitor progress. Board members discussed the importance of using both the data and real patient stories to counter negative community perceptions and strengthen public trust. This item was informational, and the dashboard will be updated and presented regularly.

COMPLIANCE REPORT

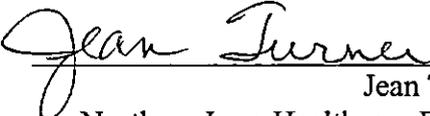
Compliance Officer Patty Dickson provided a summary of third-quarter compliance activities, reporting on required audits, privacy investigations, and unusual occurrences. She noted ongoing auditing in patient access, language services, coding, and Active Directory, along with progress on the annual HIPAA security risk assessment in collaboration with IT. The quarter included 131 unusual occurrence reports and strong performance in meeting the district's seven-day target for patient complaint response letters, with 95% completed within that timeframe. Dickson also reviewed current privacy investigations, public records requests, and ongoing vendor security assessments, emphasizing the significant time and financial impact of third-party breaches and regulatory inquiries. The full annual compliance report will be presented in January 2026.

COMMUNITY HEALTH  
NEEDS ASSESSMENT

CEO Wallis reported that Southern Inyo Healthcare District was overdue for its Community Health Needs Assessment (CHNA) and requested to partner with NIHD. Because NIHD already had an approved contract with Ovation, adding the additional South County communities required only minor adjustments and did not increase project costs. The updated questionnaire is now ready for release, and the CHNA survey will launch on Friday. NIHD will distribute it widely to capture input from residents across Inyo County, including the South County communities that frequently rely on NIHD for care.

ADJOURNMENT

Adjourned at 3:37

  
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Jean Turner  
Northern Inyo Healthcare District  
Quality Committee Chair

Attest:   
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Maggie Egan  
Northern Inyo Healthcare District  
Quality Committee Vice-Chair