

DRAFT AGENDA

NORTHERN INYO HEALTHCARE DISTRICT BOARD OF DIRECTORS REGULAR MEETING

February 15, 2017 at 5:30 p.m.

In the Northern Inyo Hospital Board Room at 2957 Birch Street, Bishop, CA

1. Call to Order (at 5:30 pm).
2. At this time persons in the audience may speak on any items not on the agenda on any matter within the jurisdiction of the District Board. *(Members of the audience will have an opportunity to address the Board on every item on the agenda. Speakers are limited to a maximum of three minutes each.)*

Consent Agenda (action items)

3. Approval of minutes of the January 18, 2017 regular meeting
 4. 2013 CMS Validation Survey Monitoring, February 2017
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5. Quarterly Financial and Statistical Reports at December 31, 2016 *(action item)*
 6. Data and Information Committee Report *(information item)*
 7. Chief of Staff Report; Joy Engblade, MD:
 - A. Policies/Procedures/Protocols/Order Set approvals *(action items)*:
 - *Cesarean Delivery* (supersedes both *Cesarean Deliveries – Nurses Responsibilities in the OR* and *Cesarean Delivery – Emergency*)
 - *Falls Risk Prevention – Perinatal*
 - *Death – Disposition of Body*
 - *Pronouncement of Death*
 - *Scope of Services, Infusion Center*
 - *Scheduling Surgical Procedures*
 - *Patient Safety Attendant or 1:1 Staffing Guidelines*
 - *Credentialing Health Care Practitioners in the Event of a Disaster*
 - *Medical Staff and Allied Health Professional Application Fee Processing*
 - *Transfusion Criteria*
 - *New Transfusion Reaction Document*

B. Annual Approval of Critical Indicators (*action items*):

- Emergency Room Service
- Surgery, Tissue, Transfusion and Anesthesia
- Medicine/Intensive Care

C. Medical Staff Appointments/Privileging (*action items*):

- Saif Siddiqi, MD (Teleradiology)
- Robert James, MD (Pathology – Locum tenens)

D. Performance Monitoring Plan - Focused Professional Practice Evaluation (FPPE) – (*action item*):

- Sarah Zuger, MD (Family Medicine & OB/Gyn)
 - Evaluation methods to include direct observation, medical record review, and discussion with peers (including OB evaluation) for 5 procedures and 5 discharges. Plan set forth by Anne Gasior, MD.
- Cecilia Rhodus, MD (Pediatrics)
 - Findings: Practitioner has demonstrated competency in performing the clinical privileges granted. Evaluation completed by Charlotte Helvie, MD.
- Manish Pandya, MD (Internal Medicine/Hospitalist)
 - Findings: Practitioner has demonstrated competency in performing the clinical privileges granted. Evaluation completed by Joy Engblade, MD.

E. Other

- Addition of “Portacath Insertion” to interventional radiology privileges (*action item*)

8. Chief Executive Officer Report (*information items*)

- Pharmacy/OSHPD update
- Director of Diagnostic Imaging and Lab
- Electronic Health Record update
- 340B update

9. Chief Operating Officer Report (*information item*)

- Introduction of Amber Morin, Dietician

10. Chief of Fiscal Services Report (*information item*)

11. Chief Nursing Officer Report (*information items*)

- Nursing Department restructure
- Perinatal manager update

- Nitrox and the perinatal unit
- 12. Chief Human Relations Officer Report (*information item*)
- 13. Chief Performance Excellence Officer Report (*information items*)
 - Joint Commission Accreditation
 - General Survey Readiness Activities
 - Hospital wide Quality Assurance and Performance Improvement (QAPI) Plan
 - Service Excellence
 - TeamSTEPPS
 - Pillars of Excellence
 - Training & Education-Incident Reporting
- 14. District Compliance Report (*information item*)
- 15. Hospital Wide Policy and Procedure annual approvals (*action items*); Attachment A to agenda.
- 16. Old Business
 - A. Bishop Union High School student clinic update (*information item*).
- 17. New Business
 - A. Nursing Department Policy and Procedure approvals (*action items*):
 1. Admission of a Pediatric Patient
 2. Admission to the Acute/Sub Acute Department
 3. Care Plan, Inpatient
 4. Down Time Procedures for OP, PACU
 5. Fixed Floating
 6. Staffing Huddle
 7. Surgery Charges
 - Surgery Charges, Attachment
 - B. Hospital wide Policy and Procedure approval: *Exempt Employees (action item)*.
 - C. Hospital wide Personnel Policy approval: *Paid Absence (action item)*.
 - D. Hospital wide Policy and Procedure approval: *United States Postal Service Mail (action item)*.
 - E. Hospital wide Policy and Procedure approval: *Medicare Outpatient Observation Notice (action item)*.
 - F. Hospital wide Policy and Procedure approval: *Charge Master Procedures for Clinics (action item)*.

- G. Hospital wide Policy and Procedure approval: *Charity Care Program (action item)*.
 - H. Radiology RFP Process and proposed contract (*action item*).
 - I. Compliance Program for NIHD (*revised*)(*action item*).
 - J. Diet Manual approval, RD's for Healthcare (*action item*).
 - K. Letter of support for Critical Access and Rural Equity Act (CARE)(*action item*).
18. Reports from Board members (*information items*).
19. Adjournment to closed session to/for:
- A. Hear reports on the hospital quality assurance activities from the responsible department head and the Medical Staff Executive Committee (*Section 32155 of the Health and Safety Code, and Section 54962 of the Government Code*).
 - B. Confer with Legal Counsel regarding pending and threatened litigation, existing litigation and significant exposure to litigation, 3 matters pending (*pursuant to Government Code Section 54956.9*).
 - C. Discuss trade secrets, new programs and services (estimated public session date for discussion yet to be determined) (*Health and Safety Code Section 32106*).
 - D. Discussion of a personnel matter (*pursuant to Government Code Section 54957*).
20. Return to open session and report of any action taken in closed session.
21. Adjournment.

In compliance with the Americans with Disabilities Act, if you require special accommodations to participate in a District Board meeting, please contact administration at (760) 873-2838 at least 48 hours prior to the meeting.

ATTACHMENT A

FEBRUARY 15 2017 DISTRICT BOARD AGENDA

1. Annual approval, Hospital Wide Policy and Procedure: *Hospital District Credit Card Policy*

**POLICIES TO THE BOD
PHARMACY**

POLICY & PROCEDURES TO THE BOARD			
PHARMACY DEPT.			
	TITLE	TO BOD	APPROVED COMMENTS
1	Black Box Warnings	2/15/2017	
2	Automated Dispensing Unit	2/15/2017	
3	Automatic Stop of Medication Orders	2/15/2017	
4	Discharge Medications	2/15/2017	
5	Drug Orders	2/15/2017	

**POLICIES TO THE BOD
SECURITY AND MAINTENANCE**

POLICY & PROCEDURES TO THE BOARD			
SECURITY AND MAINTENANCE			
	TITLE	TO BOD	APPROVED
1	Policy on Risk Assessment for Safety	2/15/2017	
2	Policy on Action to Safety & Security Risk	2/15/2017	
3	Policy on Maintaining Grounds & Equipment	2/15/2017	
4	Policy on Identification of Individuals	2/15/2017	
5	Policy on Access to Security Sensitive Areas.doc	2/15/2017	
6	Code Gray Combative Patient	2/15/2017	
7	EOP ERP- Active Shooter EP-EM.02.01.01EP2	2/15/2017	
8	Policy on Product Recalls	2/15/2017	

**POLICIES TO THE BOD
CARDIO/RESPIRATORY**

POLICY & PROCEDURES TO THE BOARD OF DIRECTORS			
CARDIOPULMONARY/RESPIRATORY			
TITLE	TO BOD	APPROVED	COMMENTS
1 Nebulized Lidocaine	2/15/2017		
2 Continuous Bronchodilator with MiniHeart Hi-Flow Continuous Nebulizer	2/15/2017		

**POLICIES TO THE BOD
DIAGNOSTIC SERVICES**

POLICIES TO THE BOARD				
DIAGNOSTIC SERVICES				
	TITLE	TO BOD	APPROVED	COMMENTS
1	DI-Area Monitoring and Controls	2/15/2017		
2	DI-Communication of Mammography Results to the Patient	2/15/2017		
3	DI-CT Dose documentation	2/15/2017		
4	DI-Diagnostic Paravertebral Nerve Block	2/15/2017		
5	DI-MRI Safety Burn/Thermal Incident Reduction Policy	2/15/2017		
6	DI-NM Cisternogram	2/15/2017		

Gilstrap, Summer (Manager of Perinatal Department)

Area: Published

Ref #	Title	TO BOD	APPROVED	COMMENTS
618	Admission and Care of Newborn			
619	Admission Assessment of Obstetrical Patient			
620	Antepartum / Postpartum Patients Admission			
656	Antepartum/Postpartum Patient Discharge			
719	BiliChek Transcutaneous Bilirubin Testing			
718	Bili-Lite Pad Olympic			
1243	Certified Nurse Midwife-Standardized Procedures			
640	Cervical Culture Procedure			
636	Cesarean Deliveries Nurses Responsibilities in the			
983	Cesarean Delivery Emergency			
1118	Consent for Induction or Augmentation of Labor			
639	Cord Blood Procedures			
655	Discharge of Newborn			
1109	Drugs of Abuse Maternal and Infant			
659	Education for Perinatal Nurses			
701	Emergency Medication Boxes in Perinatal Unit			
660	Epidural Anesthesia: Management of the Laboring			
661	Epidural PCA for Obstetric Analgesic Services			
681	Ferning			
682	Fetal Fibronectin Testing			
666	Fetal Heart Rate Monitoring in OB			
280	Fetal Heart Rate Monitoring when not in the OB Unit			
668	Fetal Monitoring Internal			
686	Hearing Screening Program Newborn			
165	Hepatitis B Vaccination of Newborns			
1724	High Risk OB Patients			
1122	HIV Prevention Program Perinatal			
674	Infant Formula Preparation and Storage			
693	Infection Control Policy Perinatal*			
690	Intrapartum Care			
695	Intubation of an Infant			
613	Isolette Policy and Procedure			
651	LDRP Delivery			
700	Meconium Delivery			
1125	Medical Screening Exam for the Obstetrical Patient - Standardized Procedure			
704	Microscope Use for Ferning			
1102	Misoprostol for Cervical Ripening			
1103	Misoprostol For Induction of Labor Order Sheet			
657	Neonatal Death, Fetal Demise & Spontaneous			
694	Neonatal Intravenous Therapy: Initiation and			
731	Neonatal Resuscitation/Neonatal Code			
600	Newborn Blood Glucose Monitoring			
1317	Newborn Hearing Policy			

2185	Newborn Pulse Oximetry Screen			
1435	Newborn Screening Test			
766	Newborn Transport to XRay Department			
3984	Nitrous Oxide Use in the Intrapartum/Immediate			
2138	Overflow Placement of Perinatal Patients			
616	Pain Management of the Neonate			
99	Perinatal / Neonatal Unit Performance Improvement			
717	Phototherapy			
688	Pitocin Administration			
727	Placenta Disposal			
2140	Postpartum Hemorrhage Policy			
720	Postpartum Patient after Vaginal Delivery Care of			
728	Postpartum Recovery			
721	Pre-Eclamptic and /or Eclamptic Patient Care of			
722	Premature and/or High Risk Infant Care of			
723	Premature Infant with Order for "No Code" Care of			
663	Prophylactic Eye Treatment for the Newborn			
664	Prophylactic Eye Treatment of Infant Refusal			
251	Rhogam Administration			
733	Rooming In Protocol			
735	Safety Policy for Perinatal Unit Patients			
1152	Shoulder Dystocia			
742	Staffing Guidelines Perinatal Unit Including High Risk			
744	Standards of Patient Care in the Perinatal Unit			
1821	Standing Orders For Newborn Nursery			
745	Sterile Speculum Exam			
761	Sterile Vaginal Examination on Patients with Premature Rupture of Membranes and/or Premature			
743	Support Person for the Obstetrical Patient in the Birthing and Operating Rooms			
603	Surfactant (exogenous) Therapy in Preterm Infants			
3840	Telephone Triage			
1153	Ultrasound in the Perinatal Unit			
757	Unassigned Obstetrical Patients Policy			
649	Urinary Catheterization Neonate			
759	Vaginal Birth After a Cesarean Section (VBAC)			
641	Vaginal Culture Procedure			
652	Vaginal Delivery in the OR			
762	Vaginal Prep			
646	Video taping in Delivery			
764	Visiting Policy Perinatal Unit			
696	Vitamin K (Phytonadione) Administration			