

CALL TO ORDER                      The meeting was called to order at 5:38 pm by Peter Watercott, President.

PRESENT                                Peter Watercott, President  
John Ungersma MD, Vice President  
M.C. Hubbard, Secretary  
Mary Mae Kilpatrick, Treasurer

ALSO PRESENT                      Kevin S. Flanigan MD, MBA, Chief Executive Officer  
Joy Engblade MD, Chief of Staff  
Kelli Huntsinger, Chief Operating Officer  
Carrie Petersen, Chief Accounting Officer  
John Tremble, Interim Chief Financial Officer  
Tracy Aspel RN, Chief Nursing Officer  
Alison Murray, Interim Chief Human Relations Officer  
Sandy Blumberg, Executive Assistant

ABSENT                                 Phil Hartz, Member At Large

OPPORTUNITY FOR  
PUBLIC COMMENT                      Mr. Watercott announced 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, and speakers are limited to a maximum of three minutes each. No comments were heard.

OLD BUSINESS                        Interim Chief Financial Officer John Tremble stated the Northern Inyo Healthcare District (NIHD) management team continues work on trimming the budget for the 2017 / 2018 fiscal year. He explained how sequestration and reductions to Medicare reimbursements continue to be among the biggest challenges to bringing in a positive budget, stating that if necessary NIHD administration will bring the lowest possible price increase to the Board when attempting to balance next year's budget. Current Medicare reimbursement reductions went into effect on a 'temporary basis' five years ago and have yet to be lifted, and they cost the District an average of \$450,000 per year in lost revenue.

NEW BUSINESS

NURSING  
DEPARTMENT  
POLICIES AND  
PROCEDURES                        Chief Nursing Officer Tracy Aspel called attention to approval of the following Nursing Department policies and procedures:  
- *Outpatient Infusion Charge Descriptions*  
- *Charge Sheet and Charge Description in the PACU*  
- *Dress Code in the OP PACU*  
It was moved by John Ungersma MD, seconded by Mary Mae Kilpatrick, and unanimously passed to approve all three nursing department policies and procedures as presented.

ANNUAL HOSPITAL  
WIDE POLICY AND  
PROCEDURE  
APPROVALS

Mr. Watcrott called attention to the list of policies and procedures being presented for annual approval as listed on Attachment A to the agenda for this meeting. It was moved by Doctor Ungersma, seconded by M.C. Hubbard, and unanimously passed to approve all policies and procedures included on Attachment A to the agenda as presented.

JOINT COMMISSION  
LAB SURVEY

Chief Operating Officer Kelli Huntsinger reported the Joint Commission recently conducted a 3-day survey of the NIHD Laboratory Department, and the Lab passed that survey with no significant deficiencies being noted. The District did receive several requests for minor improvements which will be addressed in advance of a June 30 deadline. Ms. Huntsinger noted the surveyor's report was complimentary and that the intent of the survey is education for the purpose of future improvement.

STATE SURVEY, NIHD  
RURAL HEALTH  
CLINIC

Doctor Flanigan reported the State of California recently conducted a California Health and Wellness survey at the NIHD Rural Health Clinic (RHC), and the Clinic received a 98th percentile overall score with no corrective action plans being requested. Doctor Flanigan noted this is an impressive accomplishment especially in light of the recent change to the leadership model at the RHC. He commended Stacey Brown MD; Tracy Drew NP; Dan David RN; Jannalyn Lawrence RN; and RHC staff on this accomplishment.

ELECTRONIC HEALTH  
RECORD NEXT STEPS

Doctor Flanigan provided an update on steps taken regarding potential replacement of NIHD's Electronic Health Record (EHR). He reviewed the work done to date by management and a "brain trust" of 50 to 60 District employees who are helping to assess the best EHR for the District moving forward. Doctor Flanigan stated the EHR vendors currently being considered are Athena Health; Cerner; and EPIC; noting an important element of the decision will be feeling comfortable that the company that is chosen will remain viable into the future. He additionally noted that the current market trend is going toward cloud-based systems. NIHD management and staff will continue to attend system demos and conduct a thorough assessment of the available options, and will report their findings back to the Board of Directors. It was additionally noted that implementation of a new electronic health record would take up to 9 months to accomplish.

POSSIBLE VENDOR  
CHANGE FOR  
BENEFITS MANAGER

Mr. Tremble called attention to a proposal to change NIHD's benefits manager to Keenan HealthCare and participate in a California Critical Access Hospital Network (CAAHN) group purchasing program. The goal of the group program is to reduce employee medical plan expenses, network access fees, and stop-loss costs for rural hospital participants. NIHD's current benefits manager is Pinnacle Claims Management, and a switch would create no change to employee benefits but would help to reduce the District's employee plan expenses. The proposal is being presented as an information item at this meeting, and it will be placed on

the June regular agenda as an action item. Mr. Tremble noted that if approved, the change in NIHD benefits manager would become effective January 1, 2018.

NIHD INPATIENT  
CHARGES  
COMPARISON

Mr. Tremble also called attention to an average charge per inpatient day comparison of NIHD's charges to the State of California as a whole; to Mammoth Hospital; and to other area hospitals. The comparison shows NIHD to be less expensive than the California state average and significantly less expensive than Mammoth Hospital, the District's nearest neighbor. If an increase to the price of patient services in the upcoming fiscal year becomes necessary in order to balance the budget, an increase of up to 10% would still keep NIHD under the state average and well below Mammoth Hospital's charges.

CONSENT AGENDA

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

- *Approval of minutes of the March 1, 2017 special meeting*
- *Approval of minutes of the April 19, 2017 regular meeting*
- *Approval of minutes of the May 5, 2017 special meeting*
- *2013 CMS Validation Survey Monitoring for May 2017*
- *Financial and Statistical Reports for the period ending March 31, 2017*
- *Hospital Wide Pillars of Excellence quarterly report, July 1 2016 to June 30 2017*

It was moved by Ms. Kilpatrick, seconded by Doctor Ungersma, and unanimously passed to approve all consent agenda items as presented, with a housekeeping change being made to the minutes of the May 5 2017 special meeting.

PATIENT EXPERIENCE  
COMMITTEE REPORT

Chief Nursing Officer Tracy Aspel RN provided a Patient Experience Committee report which outlined the Committee's progress made toward achieving the goals of the District's Strategic Plan. Ms. Aspel outlined plans for continuous improvement to patient satisfaction scores, noting NIHD is currently utilizing patient satisfaction data compiled by Press Ganey Inc..

WORKFORCE  
EXPERIENCE  
COMMITTEE REPORT

Interim Chief Human Relations Officer Alison Murray provided an update on work accomplished by the Workforce Experience Committee, which seeks to identify opportunities for improvement to the employee experience. Ms. Murray noted that the Employee Satisfaction Survey is now complete, and data collected in that survey is currently being reviewed with managers.

COMPLIANCE OFFICER  
REPORT AND POLICY  
AND PROCEDURE  
APPROVAL

Compliance Officer Patty Dickson provided a Compliance Department quarterly report which reviewed the number and types of information breeches that have occurred at the District year-to-date. The report additionally provided an update on Public Records requests; and an overview of internal audits conducted. Ms. Dickson also called attention

to approval of an updated Compliance Department policy and procedure titled *False Claims Act Employee Training and Prevention*. Following review of the information provided it was moved by Ms. Hubbard, seconded by Ms. Kilpatrick, and unanimously passed to approve the updated policy and procedure titled *False Claims Act Employee Training and Prevention* as presented.

CHIEF OF STAFF  
REPORT

Chief of Staff Joy Engblade MD reported following careful review, consideration, and approval by the appropriate Committees the Medical Executive Committee recommends approval of the following hospital wide policies, procedures, protocols, and order sets:

POLICY AND  
PROCEDURE  
APPROVALS

- *Venous Blood Collection*
- *Insulin Continuous Subcutaneous Infusion Self Management of the Patient in the Acute Setting*
- *Consent Form: Videotaping, Voice Recording, and Photography in the Perinatal Unit*

It was moved by Ms. Hubbard, seconded by Doctor Ungersma, and unanimously passed to approve all three policies, procedures, protocols, and order sets as presented.

PERINATAL CRITICAL  
INDICATORS

Dr. Engblade also called attention to approval of *Perinatal Critical Indicators for 2017*. It was moved by Doctor Ungersma, seconded by Ms. Hubbard, and unanimously passed to approve the proposed *Perinatal Critical Indicators for 2017* as presented.

MEDICAL STAFF  
APPOINTMENT/  
PRIVILEGING

Dr. Engblade additionally reported following careful review, consideration, and approval by the appropriate Committees the Medical Executive Committee recommends approval of the Temporary Medical Staff appointment and privileging of John Franklin MD (internal medicine), temporary assignment until December 31 2017. It was moved by Ms. Hubbard, seconded by Ms. Kilpatrick, and unanimously passed to approve the Temporary Medical Staff appointment and privileging of John Franklin MD as requested.

ADDITIONAL  
PRIVILEGES

Doctor Engblade also reported the Medical Executive Committee recommends approval of additional surgical privileges for Richard Meredith MD (orthopedic surgery) as follows:

- *Biopsy*
- *Excision Biopsy Tumors (including ganglion, etc.)*
- *Pathological Fracture Fixation*

It was moved by Ms. Kilpatrick, seconded by Doctor Ungersma, and unanimously passed to approve the additional surgical privileges for Richard Meredith MD as requested.

BOARD MEMBER  
REPORTS

Mr. Watercott asked if any members of the Board wished to report on any items of interest. Director Kilpatrick commented that she is thrilled with the direction things are going at the District, and she appreciated the

recent Daisy Award presentation and recognition of hospital staff during Hospital Week. Ms. Kilpatrick is also very impressed with Infection Prevention efforts and the many performance improvement projects currently underway at NIHD. No other comments were heard.

CLOSED SESSION

At 7:33 pm Mr. Watercott announced the meeting would adjourn to closed session to allow the Board of Directors to:

- 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, 4 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*).

RETURN TO OPEN  
SESSION AND REPORT  
OF ACTION TAKEN

At 8:30 pm the meeting returned to open session. Mr. Watercott reported the Board took action to reject a Claim Against the District filed by Jennifer Scott, MD. He additionally acknowledged settlement of a lawsuit filed by Margaret Egan for an amount within a limit previously determined by the District Board.

ADJOURNMENT

The meeting adjourned at 8:31 pm.

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Peter Watercott, President

Attest:

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M.C. Hubbard, Secretary