Northern Inyo Healthcare District Board of Directors

Regular Meeting

January 18, 2017

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CALL TO ORDER

The meeting was called to order at 5:34 pm by Peter Watercott,

President.

PRESENT Peter Watercott, President

John Ungersma MD, Vice President

M.C. Hubbard, Secretary Mary Mae Kilpatrick, Treasurer Phil Hartz, Member at Large Joy Engblade MD, Chief of Staff

ALSO PRESENT Kevin S. Flanigan MD, MBA, Chief Executive Officer

Kelli Huntsinger, Chief Operating Officer

Maria Sirois, Chief Performance Excellence Officer Alison Murray, Interim Chief Human Relations Officer

Sandy Blumberg, Executive Assistant

ABSENT Carrie Petersen, Chief of Fiscal Services

Tracy Aspel RN, Interim Chief Nursing Officer

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 will be limited to a maximum of three minutes each. Comments were heard from Bishop Union High School Varsity Football coach Arnie Palu.

CONSENT AGENDA

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

- Approval of minutes of the December 14, 2016 regular meeting
- Financial and statistical reports for November 2016
- 2013 CMS Validation Survey Monitoring, January 2017

It was moved by Mary Mae Kilpatrick, seconded by Phil Hartz, and unanimously passed to approve all three Consent Agenda items as presented.

STRATEGIC PLAN OVERVIEW Chief Executive Officer Kevin S. Flanigan, MD, MBA provided an overview of the District's Strategic Plan, reviewing the purpose of the Workforce Experience Committee; the Data and Information Committee; and the Patient Experience Committee. The format for Board meetings going forward will include bi-monthly reports from each of these three Committees for the purpose of providing updates on progress made toward achieving the goals of the District's Strategic Plan.

WORKFORCE EXPERIENCE COMMITTEE REPORT Interim Chief Human Relations Officer Alison Murray provided a Workforce Experience Committee (WEC) report which included the following:

- An Employee Engagement survey has just been completed and

- the results will be tallied in the next month. Employee participation in the survey was excellent with 333 out of 427 employees participating.
- Next steps on Committee projects include: creating an employee empowerment and engagement program; developing manager training tools; holding a Human Relations Open House for all employees; improving communications with employees; improving the job posting process; and improving the on boarding and off boarding processes (already underway).
- Human Relations is also in the process of conducting an employee salary survey

## PATIENT EXPERIENCE COMMITTEE REPORT

Chief Performance Excellence Officer Maria Sirois reported the Patient Experience Committee (PEC) continues to focus on improving patient access at the Northern Inyo Healthcare District (NIHD) Rural Health Clinic (RHC) and is in the process of collecting data on patient service demand. A staff retreat for Clinic employees was recently held and customer service trainings for staff continue. The Clinic team is focused on finding ways to improve patient satisfaction, and additional support staff is being hired for RHC providers (now 10 practitioners total). Ms. Sirois also distributed information on AIDET interaction and assessment as it relates to patient encounters, and on medical practice profiles (models).

The Patient Experience Committee also continues to work on the following:

- Improving continuity of care across regional and local health care entities
- Pursuing telemedicine options
- Expanding community education opportunities

### CHIEF OF STAFF REPORT

POLICY AND PROCEDURE APPROVALS

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 and procedures:

- Management of Discharge Disputes from Medicare Patients
- Utilization Review Plan (annual approval)
- Pitocin Administration (superseding: Pitocin Induction or Augmentation of Labor)
- Certified Nurse Midwife Standardized procedures (changes highlighted)
- Procedural Sedation (changes highlighted)
- Patient Restraints (Behavioral and Non-Behavioral) Addition of Safety Vests
- Swing Bed Patient Restraints Addition of Safety Vests It was moved by Ms. Kilpatrick, seconded by M.C. Hubbard and unanimously passed to approve all 7 hospital wide policies and procedures as presented.

# MEDICAL STAFF APPOINTMENTS AND PRIVILEGING

Doctor Engblade also reported following careful review, consideration, and approval by the appropriate committees the Medical Executive Committee recommends approval of the Medical Staff appointment and privileging of Jennifer McKinley PA-C (RHC Family Practice). It was moved by John Ungersma, MD, seconded by Ms. Hubbard, and unanimously passed to approve the Medical Staff credentialing and privileging of Jennifer McKinley PA-C as requested.

### FPPE RECOMMENDATION

Doctor Engblade additionally reported the Medical Executive Committee recommends approval of the Focused Professional Practice Evaluation (FPPE) Recommendation Form for Amy Saft CRNA (Certified Registered Nurse Anesthetist), and recommendation for completion of FPPE based on six proctored cases and discussion with peers. It was moved by Mr. Hartz, seconded by Doctor Ungersma, and unanimously passed to approve the FPPE Recommendation Form for Amy Saft, CRNA.

HOSPITAL WIDE POLICY AND PROCEDURE ANNUAL APPROVALS Doctor Flanigan called attention to the list of Hospital Wide Policies and Procedures being presented for annual approval (Attachment A to the agenda for this meeting). It was moved by Doctor Ungersma, seconded by Mr. Hartz, and unanimously passed to approve all policies and procedures listed in Attachment A as presented.

AGENDA ITEMS RE-ORDERED

Doctor Flanigan requested that the agenda items for the remainder of the meeting be re-ordered to accommodate the schedules of individuals present to address specific topics. The Board agreed to addressing the agenda items for this meeting in an alternate order.

OCCUPATIONAL HEALTH CLINIC

Doctor Flanigan stated that the District is now at full capacity for primary care providers, however one service need remains unmet and that service is Occupational Health (Occ Med). He additionally stated that Ashvin Pandya, MD is certified for Department of Transportation physical exams, and he is interested in practicing at NIHD and providing both Occ Med and Urgent Care services. After receiving comments from Dr. Pandya (who was present at this meeting) it was moved by Ms. Kilpatrick, seconded by Ms. Hubbard and unanimously passed to approve the District moving forward to establish an Occupational Medicine and Urgent Care practice with Ashvin Pandya, MD.

BISHOP UNION HIGH SCHOOL CLINIC

Doctor Flanigan introduced Barry Simpson, Bishop Union High School (BUHS) Superintendent who was present for discussion of possibly establishing a student health clinic on the Bishop High School campus. The clinic would provide students with access to a variety of State authorized healthcare services, and provide education on sensitive issues such as addiction, reproductive health, general health, and emotional health issues. The concept of a school clinic has already been discussed (but not approved) by the BUHS Board of Directors. NIHD may

potentially provide a practitioner experienced in adolescent medicine for the clinic, who would be one campus one or two days per week. Following in-depth discussion of this issue it was moved by Ms. Hubbard, seconded by Doctor Ungersma, and unanimously passed to allow NIHD Administration to continue discussion with BUHS regarding the possibly of operating an on-campus student health clinic.

# REACH AIR MEDICAL SERVICES AGREEMENT

Doctor Flanigan introduced Jim Marchio with Sierra Life Flight, who informed the Board that Reach Air Medical Services has purchased Sierra Life Flight, the hospital's preferred patient air transport service provider for many years. Reach Air seeks to contract with the District to continue the relationship as preferred provider for this community. Following discussion of Reach services and programs (including a discount membership program for area residents) it was moved by Ms. Kilpatrick, seconded by Ms. Hubbard, and unanimously passed to approve the proposed contract with Reach Air Medical Services as presented.

## COLLABORATION WITH RIDGECREST HOSPITAL ON HER REVIEW

Doctor Flanigan requested Board approval to move forward to collaborate with Ridgecrest Hospital to review Electronic Health Record (EHR) options for the District. Following discussion it was moved by Doctor Ungersma, seconded by Ms. Kilpatrick, and unanimously passed to approve collaborating with Ridgecrest Hospital to review potential Electronic Health Record systems. The Board further recommended a Committee be formed for the purpose of reviewing potential EHR options for the District, and Director Hartz volunteered to serve as a member of that committee.

OPTIONS FOR EXPANSION OF PHYSICIAN RECRUITING Doctor Flanigan requested Board approval of a philosophical change to how the District structures its physician recruitment packages, in order to improve its ability to attract new physicians to this area. New options might include a combination of sign on bonuses; student loan repayments; and student loan support for a portion of physician residency; and may also include requirements that incoming physicians provide service to the District for a minimum specified amount of time. Following discussion of the need to obtain providers for certain specialties it was moved by Doctor Ungersma, seconded by Mr. Hartz, and unanimously passed to approve expanding the variety of physician recruitment incentives currently offered by the District.

# HEALTHCARE COST SOLUTIONS AUDIT AND AGREEMENT

Doctor Flanigan reported following receipt of a report regarding unusual distribution of coding for patient services, the District enlisted Healthcare Cost Solutions (HCS) to conduct an audit and review of patient medical records for the purpose of verifying coding accuracy. The audit found serious inconsistencies in coding for services with an error rate of 30 to 70 percent for five physicians audited. Because of the importance of addressing the problem as quickly as possible hospital administration signed an agreement with HCS to address the problem immediately, and

now requests ratification of that agreement. It was moved by Doctor Ungersma, seconded by Mr. Hartz, and unanimously passed to ratify the agreement with Healthcare Cost Solutions as requested.

## NURSING DEPARTMENT POLICIES AND PROCEDURES

On behalf of Interim Chief Nursing Officer Tracy Aspel RN, Doctor Flanigan requested approval of the following Nursing Department Policies and Procedures:

- 1. Community Skills Session; Reservation, No Show or Cancellation Policy
- 2. Cross-Training RN Staff
- 3. Orientation-Cross Training Time Frame
- 4. Nursing Assessment and Reassessment
  a. Nursing Assessment Reassessment Chart Time Frames
- 5. Nursing Care Plan

It was moved by Ms. Hubbard, seconded by Ms. Kilpatrick, and unanimously passed to approve Nursing Policies and Procedures 1 through 5 as presented.

### BOARD MEMBER REPORTS

Mr. Watercott asked if any members of the Board wished to report on any items of interest. Director Ungersma encouraged his fellow Board members to attend the Association of California Healthcare Districts (ACHD) Leadership Academy in February, suggesting that they network with other District representatives as much as possible on the topic of EHR's. Director Hubbard also reported that she is working on completing the requirements for the District to obtain ACHD certification, and as part of that effort she will be developing (brief) Board member biographies for posting to the Northern Inyo Hospital (NIH) website.

#### **CLOSED SESSION**

At 8:27 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 (pursuant to Government Code Section 54956.9).
- C. Confer with Legal Counsel regarding pending and threatened litigation, existing litigation, and significant exposure to litigation (2nd case) (*pursuant to Government Code Section 54956.9*).
- D. Confer with Legal Counsel regarding pending and threatened litigation, existing litigation, and significant exposure to litigation (3rd case) (pursuant to Government Code Section 54956.9).
- E. Discuss trade secrets, new programs and services (estimated public session date for discussion yet to be determined) (*Health and Safety Code Section 32106*).

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RETURN TO OPEN	F. Discussion of a personnel matter (pursuant to Government Code Section 54957).			
SESSION AND REPORT OF ACTION TAKEN	At 9:29 pm the meeting returned to open session. Mr. Watercott report that the Board took no reportable action.		. Mr. Watercott reported	
ADJOUNRMENT	The meeting w	The meeting was adjourned at 9:30 pm.		
		Peter Watercott, President		
	Attest:			
	Titlest.	M.C. Hubbard, Secretary		