

- CALL TO ORDER** The meeting was called to order in the Northern Inyo Healthcare District Board Room at 2957 Birch Street, Bishop, California, at 5:30 pm by M.C. Hubbard, Vice President.
- PRESENT** M.C. Hubbard, Vice President
Mary Mae Kilpatrick, Secretary
Jean Turner, Treasurer
Robert Sharp, Member at Large
Kevin S. Flanigan MD, MBA, Chief Executive Officer
Kelli Huntsinger, Chief Operating Officer
John Tremble, Chief Financial Officer
Evelyn Campos Diaz, Chief Human Resources Officer
Allison Robinson MD, Chief of Staff
Sandy Blumberg, Executive Assistant
- ABSENT** Tracy Aspel RN, Chief Nursing Officer
- OPPORTUNITY FOR PUBLIC COMMENT** Ms. Hubbard 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. No comments were heard.
- ADJOURNMENT TO CLOSED SESSION** At 5:32 pm Ms. Hubbard announced the meeting would adjourn to Closed Session to allow the Board of Directors to:
A. Discuss Labor Negotiations; Agency Designated Representative: AALRR, Employee Organization: AFSCME Council 57 (*pursuant to Government Code Section 54957.6*).
- RETURN TO OPEN SESSION AND REPORT OF ACTION TAKEN** At 6:00 pm the meeting returned to open session. Ms. Hubbard reported the Board took no reportable action.
- WORKFORCE EXPERIENCE COMMITTEE REPORT** Human Resources Director Alison Murray provided a report from the Workforce Experience Committee, which was established to help accomplish the workforce-related goals of the District's Strategic Plan. The first objectives of the Committee are to address Northern Inyo Healthcare District (NIHD) staff turnover and churnover rates, and to assess District employee Staff Development opportunities. Ms. Murray's presentation included information on the following:
- Current completion rate for mandated employee trainings
- Review of career ladders now in place within many Hospital Departments
- Dollars spent on Staff Education and employee tuition assistance
Ms. Murray noted a baseline staff turnover rate has been determined (16%) and the Committee's goal is to reduce that rate of turnover to 12%. The goal for staff completion of mandatory trainings has been set at

100%. It was additionally noted that regular reports from the Workforce Experience Committee will be provided for the Board of Directors on a quarterly basis.

COMPLIANCE
DEPARTMENT
QUARTERLY REPORT

Compliance Officer Patty Dickson provided a quarterly Compliance Report which reviewed statistics on District information breaches; research requests; investigations of compliance concerns; and employee access audits. Ms. Dickson additionally provided an informational presentation titled "*Compliance and the Role of the Board of Directors*". It was then moved by Mary Mae Kilpatrick, seconded by Robert Sharp, and unanimously passed to approve the quarterly Compliance Report as presented.

POLICY & PROCEDURE
APPROVALS

Chief Executive Officer Kevin S. Flanigan MD, MBA called attention to approval of the following hospital wide Policy and Procedure approvals:

- *ICU Acutities*
- *Safe Patient Handling - Minimal Lift Program*
- *Acute/Subacute Care Services Method of Practice: Patient Coordinated Care*

It was moved by Ms. Kilpatrick, seconded by Jean Turner, and unanimously passed to approve all three Policies and Procedures as presented.

LANGUAGE ACCESS
SERVICES STRATEGIC
PLAN

Language Services Manager Jose Garcia presented a *Language Access Services Strategic Plan*, which is being established to help ensure effective communication and equal access to health care services for District patients with language or communication barriers, in accordance with State and Federal Law and Joint Commission standards. Mr. Garcia noted that the NIHD Language Services Call Center is now operational, and he provided an overview of interpreter service and language assistance technology available to District patients. It was moved by Mr. Sharp, seconded by Ms. Kilpatrick, and unanimously passed to approve the *Language Access Services Strategic Plan* as presented.

POLICY &
PROCEDURE:
STATISTICALLY VALID
SAMPLE SIZE

Chief Financial Officer John Tremble called attention to a proposed Policy and Procedure titled *Establishment of Statistically Valid Sample Sized for Business and Quality Process Analysis and Improvement*, which establishes statistically valid methods for looking at the organization's internal data. It was moved by Ms. Turner, seconded by Mr. Sharp, and unanimously passed to approve the Policy and Procedure titled *Establishment of Statistically Valid Sample Sized for Business and Quality Process Analysis and Improvement* as presented.

QUARTERLY
FINANCIAL AND
STATISTICAL REPORT

Mr. Tremble also called attention to the financial and statistical reports for the period ending June 30 2018, noting the following:

- The 2017/2018 fiscal year proved to be a growth year, and the District billed a significantly larger number of charges than expected
- Rural Health Clinic; Inpatient; Outpatient; and Surgery volumes were

- all significantly over budget for the year
- The District achieved its goal of having 90 days cash on hand by the end of the fiscal year
 - The District's bottom line net profit for the year was \$1,433,967

Mr. Tremble also noted the District's annual audit is taking place this week, and that volumes for the months of July and August 2018 appear to be lower. A four percent increase to the price of most patient services will be implemented in the month of August. Following review of the information provided it was moved by Ms. Turner, seconded by Ms. Kilpatrick, and unanimously passed to approve the quarterly financial and statistical reports as of June 30 2018 as presented.

WORKFLOW AND
SUGGESTED
GUIDANCE FOR
FILLING DISTRICT
BOARD VACANCIES

Chief Human Resources Officer Evelyn Campos Diaz called attention the following:

- *Work Flow for Appointments to Fill NIHD Board Vacancies*
- Board of Directors Policy and Procedure approval: *Suggested Guidance to Fill a Board Vacancy by Appointment*

It was moved by Ms. Turner, seconded by Ms. Kilpatrick and unanimously passed to approve the *Work Flow for Appointments to Fill NIHD Board Vacancies*, and the Policy and Procedure titled *Suggested Guidance to Fill a Board Vacancy by Appointment* as presented. Director Turner thanked Ms. Campos Diaz for her hard work and many hours of effort toward the development of the process for filling and on boarding new members of the District Board.

UPDATE ON
PHARMACY
RELOCATION PROJECT

Doctor Flanigan stated following three years of effort to relocate the Northern Inyo Hospital Pharmacy and bring it into compliance with regulatory requirements, District leadership has determined that a Request For Proposal (RFP) should be issued in order to select a new architect for the project. Doctor Flanigan explained it is hoped that the RFP process will result in cost savings over the originally budgeted project cost by bypassing an interim Pharmacy project phase, and he noted the importance of moving forward with the project as quickly as possible. It was moved by Mr. Sharp, seconded by Ms. Turner, and unanimously passed to approve terminating the existing contract for the Pharmacy relocation and issuing an RFP to select a new architect for the project.

CONSENT AGENDA

Doctor Flanigan called attention to the Consent Agenda for this meeting, which contained the following items:

- *Approval of minutes of the July 18 2018 regular meeting*
- *2013 CMS Survey Validation Monitoring, August 2018*
- *Policy and Procedure annual approvals*

It was moved by Ms. Turner, seconded by Ms. Kilpatrick, and unanimously passed to approve all three Consent Agenda items as presented.

CHIEF OF STAFF
REPORT

Chief of Staff Allison Robinson, 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:

POLICY & PROCEDURE
APPROVALS

1. *Abuse Policy for Swing Bed Patients*
2. *Cepheid Xpert CT/NG PCR Assay*
3. *Coroner's Cases*
4. *Delayed Blood Bank Banding of Patients*
5. *Emergency Department Telephone Advice Information*
6. *Emergency Order and Shipment of Blood Components from UBS*
7. *Malignant Hypothermia Cart Check*
8. *Newborn Blood Glucose Monitoring*
9. *Scope of Service ICU*
10. *Sexual Assault Exam Policy*
11. *Surveillance for Hospital Acquired Infections (HAI's)*

It was moved by Mr. Sharp, seconded by Ms. Turner, and unanimously passed to approve all eleven hospital wide Policies and Procedures as presented.

MEDICAL STAFF
RESIGNATIONS

Doctor Robinson also reported that the Medical Executive Committee recommends approval of the following Medical Staff resignations:

1. Ryan Berecky, MD (*Tahoe Carson Radiology*) - effective July 11, 2018
2. Nicholas Carlevato, MD (*Tahoe Carson Radiology*) - effective July 11, 2018

It was moved by Ms. Kilpatrick, seconded by Mr. Sharp, and unanimously passed to accept both Medical Staff resignations as requested.

MEDICAL STAFF
APPOINTMENT /
PRIVILEGES

Doctor Robinson additionally reported following careful review and consideration the Medical Executive Committee recommends the following Medical Staff Appointment/Privileging:

1. Kevin M. Deitel, MD (*orthopedic surgery*) - Provisional Consulting Staff, on-call only

It was moved by Ms. Turner, seconded by Mr. Sharp, and unanimously passed to approve the Medical Staff Appointment and Privileging of Kevin M. Deitel MD as requested.

BOARD MEMBER
REPORTS

Ms. Hubbard asked if any members of the Board of Directors wished to report on any items of interest. Director Sharp reported the he, Director Hubbard, and Doctor Flanigan recently traveled to Southern Mono Healthcare District (SMHD) to meet with their leadership and hold an open discussion on possible collaboration of services in the future. The meeting was a positive experience that will hopefully constitute the first step toward developing a stronger working relationship between the two Districts. Director Turner mentioned the value of Directors reading the regular American Hospital Association publication titled *Trustee Insights*. No other comments were heard.

- CLOSED SESSION At 7:19 pm Ms. Hubbard announced the meeting would adjourn to Closed Session to allow the Board of Directors to:
- A. Discuss trade secrets, new programs and services (estimated public session date for discussion yet to be determined) (*pursuant to Health and Safety Code Section 32106*).
 - B. Confer with Legal Counsel regarding pending and threatened litigation, existing litigation and significant exposure to litigation, 2 matters pending (*pursuant to Government Code Section 54956.9*).
 - C. Discussion of a personnel matter (*pursuant to Government Code Section 54957*).
- RETURN TO OPEN At 8:55 pm the meeting returned to Open Session. Ms. Hubbard reported
SESSION AND REPORT the Board took action to authorize Doctor Flanigan to execute business
OF ACTION TAKEN documents on behalf of the District
- ADJOURNMENT The meeting was adjourned at 8:58 pm.

M.C. Hubbard, Vice President

Attest:

Mary Mae Kilpatrick, Secretary