

- CALL TO ORDER                      The meeting was called to order at 5:30 pm by Mary Mae Kilpatrick, President.
- PRESENT                                Mary Mae Kilpatrick, President  
Jean Turner, Vice President  
Peter Tracy, Treasurer  
M.C. Hubbard, Member at Large  
Allison Robinson MD, Chief of Staff  
Kevin S. Flanigan MD, MBA, Chief Executive Officer  
Kelli Huntsinger, Chief Operating Officer  
John Tremble, Chief Financial Officer  
Tracy Aspel RN, Chief Nursing Officer  
Evelyn Campos Diaz, Chief Human Resources Officer
- ABSENT                                 Robert Sharp, Secretary  
Evelyn Campos Diaz, Chief Human Resources Officer (*exited meeting at 5:45 pm*)
- OPPORTUNITY FOR  
PUBLIC COMMENT                      Ms. Kilpatrick announced at this time person in the audience may speak on any items not on the agenda for this meeting on any matter within the jurisdiction of the District Board and speakers will be limited to a maximum of three minutes each. Comments were heard by Robbin Cromer-Tyler, MD.
- WIPFLI LLP ANNUAL  
AUDIT REPORT FYE  
JUNE 20, 2018                         Jeff Johnson with Wipfli LLP presented Northern Inyo Healthcare District's (NIHD's) audit results for the July 1 2017 through June 30 2018 fiscal year. Mr. Johnson's report reviewed the following:
  - Schedule of Sources and Uses of District Revenues
  - Required Communications/Overview of 2018 Audit results
  - Review of Audited Financial Statements
  - Net Pension Liability – Changes of Assumptions
  - Financial Analysis
  - Accounting and Auditing Update
  - Industry Update
  - Key Financial IndicatorsResults of the Wipfli annual audit reflected a bottom line increase in net position of \$1,711,000 for the year. It was moved by Jean Turner, seconded by M.C. Hubbard, and unanimously passed to approve the 2017/2018 NIHD fiscal year financial audit as presented.
- STRATEGIC PLAN  
UPDATE, PATIENT  
EXPERIENCE  
COMMITTEE REPORT                      NIHD Human Resources Assistant Michelle Garcia and NIHD Rehabilitation Services Director Raychel Hosch provided an update on work accomplished by the District's Patient Experience Committee established for the purpose of addressing the patient experience-related goals of the District's Strategic Plan. The Committee's report included information on the following:

- Action planning based on results of an in-house Patient Experience survey
- Input from District leadership regarding improving the patient experience in all departments of the District
- Additions of manager and physician members to the Patient Experience Committee
- Updates on training and education efforts for District staff, including the expansion of AIDET training

It was noted that the Committee will re-survey patients in the next several months in order to measure any improvement in patient experience scores. The Committee also continues to analyze patient satisfaction data collected by Press Ganey.

#### BREAST HEALTH SERVICES TEAM REPORT

NIHD Patient Navigator Rosie Graves provided a Breast Services Team report which included an overview of the history and development of the District's breast health and oncology patient navigation program. Ms. Graves' report included the following:

- NIHD's Cancer Patient Navigation program began in 2016, and addressed Breast Cancer services only. Breast program services continue to be provided by Stuart Souders MD and Jay K. Harness MD.
- Cancer patients are navigated from diagnosis through treatment, survivorship, post treatment, and long-term follow-up
- Summary statistics on patients treated were provided for 2016, 2017, and 2018, as well as surgery and clinic visit totals
- Community outreach programs for 2019 include Moonlight Mammograms; a Colorectal Walk/Run/Bike Ride; Employer Health Talks; and Colorectal Evening Screenings
- An overview of resources available to patients both locally and nationally was provided

#### LIFETIME ACHIEVEMENT AWARDS AND DISTRICT BOARD RESOLUTIONS 19-01 AND 19-02

Chief Executive Officer (CEO) Kevin S. Flanigan, MD, MBA called attention to a proposal to establish two Lifetime Achievement Awards to be presented by the District on an annual basis. The proposed awards are as follows:

- The *John A. Ungersma MD Lifetime Achievement Award* for achievement in healthcare leadership, intended to honor individuals whose lifetime achievements in healthcare have significantly benefited the citizens of this community
- The *Peter Watercott Lifetime Achievement Award* for service to the community in healthcare, intended to honor individuals whose lifetime achievements in service to the communities of the District have fulfilled a need of the citizens and resulted in the enhanced health status of the community

The proposed awards will be presented on an annual basis at the NIHD Foundation's *Avenue of Excellence* awards dinner. It was moved by Peter Tracy, seconded by Ms. Turner, and unanimously passed to approve the

establishment of both Lifetime Achievement awards, as well as District Board Resolutions 19-01 and 19-02 corresponding to those awards.

COMPLIANCE  
PROGRAM UPDATE  
APPROVAL

Compliance Officer Patty Dickson called attention to an update to the *Compliance Program for Northern Inyo Healthcare District*, with the main update being the addition of clinical and nursing membership to the Compliance and Business Ethics Committee. It was moved by Ms. Hubbard, seconded by Ms. Turner, and unanimously passed to approve the updated *Compliance Program for Northern Inyo Healthcare District* as presented. The Board noted its appreciation of the contributions of the Compliance program to the quality of work provided by the District.

POLICY AND  
PROCEDURE  
APPROVAL,  
COMMUNICATING PHI  
VIA ELECTRONIC MAIL

Ms. Dickson also called attention to approval of a proposed Policy and Procedure titled *Communicating Protected Health Information Via Electronic Mail (Email)*, being established to delineate the procedures governing NIHD workforce member use of electronic mail. It was moved by Ms. Hubbard, seconded by Ms. Turner, and unanimously passed to approve the proposed Policy and Procedure titled *Communicating Protected Health Information Via Electronic Mail (Email)* as presented, including spelling out all of the acronyms included in the policy.

MEDICAL STAFF  
SERVICES PILLARS OF  
EXCELLENCE REPORT

Medical Staff Support Manager Dianne Picken called attention to the *Medical Staff Services Pillars of Excellence* quarterly report. The report for the 4<sup>th</sup> quarter of the 2018 calendar year reflects a high level of performance with efforts meeting or exceeding expectations in most areas.

CHIEF OPERATING  
OFFICER REPORT

Chief Operating Officer Kelli Davis provided a bi-monthly report which included updates on operations in the following District departments:

- Cardiopulmonary
- Diagnostic Services
- Lab
- Pharmacy
- Rehab Services
- Environmental Services and Laundry
- Dietary
- Health Information Management

Ms. Davis additionally reported on improvements implemented as a result of the NIHD Safety program, and on the development of Safety Coaches at NIHD.

CHIEF FINANCIAL  
OFFICER REPORT

Chief Financial Officer John Tremble provided a bi-monthly financial report which included the following:

- The Finance department was greatly affected by Athena implementation, and it is facing a greater number challenges than expected. As a result, many of the District's bills were paid late in the months following implementation.
- Finance will return to using the Paragon system in order to process

Accounts Payable in a more timely fashion

- Accounting is still determining how to integrate information into the Intaact general ledger in order to produce monthly financial reports as well as departmental financial reports
- Billed charges were good for the month of October, near plan in November, and 7% behind plan in December
- Now that the audit for the fiscal year ending 6/30/18 has been completed, Accounting will proceed with filing the Medi-Cal cost report

CHIEF NURSING  
OFFICER REPORT

Chief Nursing Officer Tracy Aspel RN, provided a bi-monthly update on Nursing Department activities including the following:

- The OB department is involved in a Beta project on patient safety
- Standardized procedures in the Emergency Department are being improved upon
- The District's first ICU RN trainee is currently training at Glendale Adventist
- The District has more permanent employees and fewer travelers in both the ICU and OB departments
- An OR nurse manager has been hired, and the District continues to grow its own OR RN's

Ms. Aspel also recognized the recent retirement of Lynn Lippincott RN, who worked for the District for 35 years. She additionally reported that Chief Operating Officer Kelli Davis recently earned her Master's degree in Business Administration, specializing in Healthcare Management.

ICU ACUITIES POLICY  
AND PROCEDURE  
APPROVAL

Ms. Aspel then called attention to proposed Policy and Procedure titled *ICU Acuties*. It was moved by Mr. Tracy, seconded by Ms. Hubbard, and unanimously passed to approve the *ICU Acuties* Policy and Procedure as presented.

CHIEF EXECUTIVE  
OFFICER REPORT

Doctor Flanigan provided a bi-monthly CEO report which included the following:

- The District is preparing the (newly acquired) Joseph House to house incoming and part-time physicians
- District Leadership is working on streamlining a management plan that may reduce the number of Directors and increase the number of Managers in the NIHD workforce

FISCAL ISSUES AND  
REDUCTION IN  
WORKFORCE

Doctor Flanigan additionally presented a report on fiscal issues, noting the following as of the end of the first half of the current fiscal year:

- Surgery cases are running 10 cases short of budget per month
- The daily inpatient census average is 8 patients, budgeted for 10
- ACA funding is now uncertain
- The District will realize a \$1.2M deficit vs budget if current trends hold

Doctor Flanigan stated District leadership will attempt to address the projected budget shortfall by implementing a reduction in workforce

(RIF) consisting of three phases: Phase I - reorganization/realignment of District Departments; Phase II - Consolidation and reduction of workforce responsibilities; and Phase III - develop an early retirement package for interested and eligible employees. He additionally noted that Phase I is expected to begin in the next 3 to 10 days.

CONSENT AGENDA

Ms. Kilpatrick called attention to the Consent Agenda for this meeting which included the following items:

- *Approval of minutes of the December 7 2018 special meeting*
- *Approval of minutes of the December 19 2018 regular meeting*
- *Policy and Procedure annual approvals*

It was moved by Ms. Hubbard, seconded by Ms. Turner, 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 District-Wide Policy and Procedure:

- *Discharge Planning for Homeless Patients*

POLICY AND  
PROCEDURE  
APPROVAL

It was moved by Ms. Hubbard, seconded by Ms. Turner, and unanimously passed to approve the *Discharge Planning for Homeless Patients* Policy and Procedure as presented.

MEDICAL STAFF  
APPOINTMENTS AND  
PRIVILEGES

Doctor Robinson also reported the Medical Executive Committee recommends approval of the following Medical Staff appointments and privileges:

1. Jon Bowersox, MD (*general surgery*) - appointment to locum tenens/temporary staff
2. Paul Schneider, MD (*internal medicine*) - appointment to locum tenens/temporary staff
3. Michael Rhodes, MD (*internal medicine*) - appointment to locum tenens/temporary staff
4. Stefan Schunk, MD (*internal medicine*) - appointment to locum tenens/temporary staff

It was moved by Mr. Tracy, seconded by Ms. Turner, and unanimously passed to approve all four Medical Staff appointments and privileging as requested.

REAPPOINTMENT TO  
NEW STAFF  
CATEGORY

Doctor Robinson also stated following careful review and consideration the Medical Executive Committee recommends the following reappointment to a new Medical Staff category:

- *Atashi Mandal, MD (internal medicine)* - appointment from Temporary Staff to Provisional Active Staff for a term not to exceed two years (through December 31, 2020)

It was moved by Ms. Hubbard, seconded by Mr. Tracy, and unanimously passed to approve the reappointment of Doctor Mandal as requested.

TEMPORARY  
PRIVILEGES

Doctor Robinson additionally reported the Medical Executive Committee recommends the extension of temporary privileges for:

- Akash Rusia, MD (*internal medicine*) - extension of temporary/locum tenens privileges for the provision of hospitalist services through June 30, 2019 to fill an important patient care need

It was moved by Ms. Hubbard, seconded by Ms. Turner, and unanimously passed to approve the temporary privileges of Akash Rusia, MD as requested.

MEDICAL STAFF  
ADVANCEMENTS

Doctor Robinson also stated following careful review and consideration the Medical Executive Committee recommends the following Medical Staff advancements from Provisional Staff, following satisfactory completion of introductory focused professional practice evaluations:

1. Kristen Irmiter, MD (*pediatrics*) - advancement from Provisional Active Staff to Active Staff
2. Daniel Firer, MD (*family medicine/emergency medicine*) - advancement from Provisional Active Staff to Active Staff

It was moved by Ms. Hubbard, seconded by Ms. Turner, and unanimously passed to approve both Medical Staff advancements as requested.

MEDICAL STAFF  
RESIGNATIONS

Doctor Robinson additionally reported the Medical Executive Committee recommends acceptance of the following Medical Staff resignations:

1. Leon Kujmanian, MD (*endocrinology*) - effective 12/3/18
2. Zarmen Israelian, MD (*endocrinology*) - effective 12/3/18
3. Amikjit Reen, MD (*internal medicine*) - effective 12/6/18

It was moved by Mr. Tracy, seconded by Ms. Hubbard, and unanimously passed to approve all three Medical Staff resignations as requested.

PROPOSAL FOR  
EXPANDED CHIEF OF  
STAFF ROLE

Doctor Robinson also provided an update on the Medical Staff proposal to expand the Chief of Staff role, stating the membership prefers establishing a permanent Chief of Staff rather than designating a Chief Medical Officer (CMO), and that they will draw up a proposed job description for the Chief of Staff and present it at the next regular Board meeting. She additionally noted that the Chief of Staff will be elected by the Medical Staff, and that an analysis of the impact on the District's budget will be provided when approval of the new Chief of Staff model is requested.

BOARD MEMBER  
REPORTS

Ms. Kilpatrick asked if any members of the Board of Directors wished to report on any items of interest. She then stated that she recently attended the NIHD Rehab Department's Healthy Lifestyles talk, which she felt was outstanding. She additionally noted the passing of former Board member Mr. Phil Hartz, expressing the Board's condolences. Ms. Kilpatrick additionally stated that Mr. Hartz at one time requested that a new sound system be installed in the NIHD Board Room, and that it is also her wish that a new sound system be installed in order to improve the acoustics in the room. No other reports were heard.

ADJOURNEMTN TO  
CLOSED SESSION

At 8:28 pm Ms. Kilpatrick announced the meeting would adjourn to Closed Session to allow the Board of Directors to:

- A. Confer with Legal Counsel regarding threatened litigation, 1 matter pending (*pursuant to Government Code Section 54956.9(d)(2)*).
- B. For discussion of a personnel matter (*pursuant to Government Code Section 54957*).

RETURN TO OPEN  
SESSION AND REPORT  
OF ACTION TAKEN

At 9:02 pm the meeting returned to Open Session. Ms. Kilpatrick reported the Board took no reportable action.

ADJOURNMENT

The meeting adjourned at 9:02pm.

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Mary Mae Kilpatrick, President

Attest:

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Jean Turner, Vice President