1. MUNICIPAL SERVICE REVIEW

Description of District

The Northern Inyo Hospital District was formed in 1946 and operates pursuant to the Local Health Care District Act (Health & Safety Code, Section 32000 et seq.).

The District occupies northern Inyo County. Its boundary and sphere of influence are coterminous.

A five-member board of directors, elected from divisions, governs the District. The Chief Executive Officer is responsible for administrative functions. There are 210 full time, 134 part time and seven contract employees.

An organization chart is attached as is the District’s Mission Statement.

District Services

The District provides hospital services.

Other Governmental Agencies within the District

The District overlaps the City of Bishop, Pioneer and Big Pine Cemetery Districts, Bishop Rural, Big Pine and Independence Fire Protection Districts, Eastern Sierra, Indian Creek, Lazy A, Mesa, Sierra Highlands, Starlite and Westridge Community Services Districts and the Inyo-Mono Resource Conservation District.

2. MSR DETERMINATIONS

This report addresses the MSR factors specified in LAFCO’s governing statute.

Infrastructure Needs and Deficiencies

This District is giving attention to its capital improvement needs. An extensive study was undertaken in 2004 in which the Hospital District goals, needs and evaluation of planned hospital replacement were studied. The potential improvements are not driven so much by growth of the community as it is by the age of current facilities, need to increase efficiency to lower operating costs and attract and retain professional staff.

These issues do not affect the District’s Sphere of Influence or boundaries.

Growth and Population Projections

Growth within the District will be limited due to general factors affecting development in Inyo County. The hospital is expected to be able to provide services as needed to the current and future population, especially if planned capital improvements are built.
Financing Constraints and Opportunities

Nearly all funding comes from revenues produced from the services rendered. Only 1% of its expenses is funded by District tax receipts. Like many public hospital and health care agencies the District faces challenges related to securing sufficient revenues to fund the services provided, including chronic underpayments from Medicare and MediCal.

Cost-Avoidance Opportunities

The District participates in a joint purchasing agreement with the Western Alliance of Healthcare.

It feels that in rebuilding facilities it can incorporate more energy efficient design and employ labor saving designs and technologies.

Opportunities for Rate Restructuring

The District has an extensive list of rates and charges, reflective of the array of services that are provided. Within statutory and funding agency regulations it has the opportunity to restructure rates with the adoption of rate ordinances.

Opportunities for Shared Facilities

There are no obvious opportunities for shared facilities due to the location of the hospital in relationship to other health care facilities.

Government Structure Options

There are no obvious government structure options, other than the possible consolidation of the two health care districts in Inyo County. The District has not expressed interest in a consolidation with the Southern Inyo Health Care District.

Management Efficiencies

The District exhibits the characteristics of a well-managed agency operating efficiently within complex regulations and serving its residents and customers effectively.

Local Accountability and Governance

The Board of Directors is elected by and accountable to voters who reside in the District. District agendas are distributed to local media and agendas and minutes are posted in the hospital cafeteria accessible to the public.
3. SPHERE OF INFLUENCE REVIEW AND UPDATE

Description of Current Sphere of Influence

The District’s boundaries and sphere of influence are coterminous. A map of the District and its sphere are included.

Proposed Sphere Changes

The District indicates that its boundaries are not correct and it plans to serve the Chalfant Valley and communities of Paradise and Swall Meadows in Mono County. Such an annexation will require an amendment to the District’s Sphere of Influence.

Sphere of Influence Determinations

Inasmuch as no changes in the sphere of influence are proposed at this time it is not necessary for the Commission to adopt or approve any determinations.

4. ACKNOWLEDGEMENTS & REFERENCES

The Inyo LAFCO staff prepared this Municipal Service Review. Responsibility for any errors or omissions rests with those who prepared the report.

The Northern Inyo Hospital District provided the information and documents upon which the evaluation is based. District staff, notably Chief Executive Officer John Halfen was instrumental in providing data. The District did an excellent job in providing information requested for this analysis and is commended for its effort.

Mapping services were provided by the County of Inyo.

Available Documentation

The “Request for Information for Municipal Service Reviews” submitted by the District and supporting documents referred to therein are available in the LAFCO office.

5. RECOMMENDATIONS

In consideration of information gathered and evaluated during the Municipal Service Review it is recommended the Commission affirm the current Sphere of Influence and that it not be expanded or revised at this time.