

- CALL TO ORDER The meeting was called to order at 5:30 pm by John Ungersma MD, Vice President.
- PRESENT John Ungersma MD, Vice President
M.C. Hubbard, Secretary
Mary Mae Kilpatrick, Treasurer
Phil Hartz, Member at Large
Kevin S. Flanigan MD, MBA, Chief Executive Officer
Kristina Gritsutenko, Chief Financial Officer
Carrie Petersen, Chief Accounting Officer
Evelyn Campos Diaz, Chief Human Resources Officer
Sandy Blumberg, Executive Assistant
- ABSENT Peter Watercott, President
Richard Meredith MD, Chief of Staff
Kelli Huntsinger, Chief Operating Officer
Tracy Aspel RN, Chief Nursing Officer
- OPPORTUNITY FOR
PUBLIC COMMENT Doctor Ungersma asked if any members of the public wished to speak on any items not on the agenda on any matters 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. Comments were heard from Pat West with Pioneer Home Health, who updated the Board on the services that Pioneer provides for this community.
- NEW BUSINESS
- LABORATORY POLICY
AND PROCEDURE
APPROVALS Chief Executive Officer Kevin S. Flanigan, MD, MBA called attention to the following Laboratory Department policies and procedures:
- *Gastric Occult Blood Testing*
- *Hemoccult Sensa – Fecal Occult Blood*
It was moved by M.C. Hubbard, seconded by Mary Mae Kilpatrick, and unanimously passed to approve both Laboratory policies and procedures as presented.
- EMERGENCY PAGING
POLICY AND
PROCEDURE Doctor Flanigan also called attention to a hospital wide policy and procedure titled *Emergency Paging*. It was moved by Ms. Kilpatrick, seconded by Phil Hartz, and unanimously passed to approve the *Emergency Paging* policy and procedure as presented.
- POLICY AND
PROCEDURE ANNUAL
APPROVALS Doctor Ungersma called attention to a list of hospital wide policies and procedures presented for annual approval, as listed on Attachment A to the agenda for this meeting. It was moved by Ms. Kilpatrick, seconded by Ms. Hubbard, and unanimously passed to approve all policies and procedures listed on Attachment A to the agenda as presented.

BOARD RESOLUTION 17-03	Doctor Flanigan called attention to District Board Resolution 17-03 which authorizes the Chief Executive Officer and Chief Financial Officer to deposit or withdrawal monies from the Local Agency Investment Fund (LAIF). The purpose of the Resolution is to replace outgoing Chief Accounting Officer Carrie Petersen as the person authorized to make LAIF fund transactions, in preparation for her retirement in the month of October. It was moved by Ms. Hubbard, seconded by Ms. Kilpatrick, and unanimously passed to approve District Board Resolution 17-03 as presented.
CONSENT AGENDA	<p>Doctor Ungersma called attention to the Financial and Statistical Reports for the period ending June 30 2017, requesting that they be removed from the consent agenda and added to the Chief Financial Officer (CFO) report for this meeting. It was moved by Mr. Hartz, seconded by Ms. Kilpatrick, and unanimously passed to approve moving the Financial and Statistical Reports for the period ending June 30 2017 off the consent agenda to include them as part of the Chief Financial Officer report for this meeting.</p> <p>Doctor Ungersma then called attention to the remaining 2 items listed on the Consent Agenda for this meeting:</p> <ul style="list-style-type: none">- <i>Approval of the minutes of the July 19 2017 regular meeting</i>- <i>2013 CMS Validation Survey Monitoring, August 2017</i> <p>It was moved by Mr. Hartz, seconded by Ms. Kilpatrick, and unanimously passed to approve both consent agenda items as presented.</p>
DATA AND INFORMATION COMMITTEE REPORT	Doctor Flanigan introduced Chief Financial Officer Kristina Gritsutenko as the new chairperson of the District's Data and Information Committee. Ms. Gritsutenko provided a Data and Information (D&I) Committee report which included stating that the D & I Committee will join forces with the Athena Implementation group to focus on the District's transition from the McKesson health information system to the AthenaHealth product.
QUARTERLY COMPLIANCE REPORT	Compliance Officer Patty Dickson provided a Quarterly Compliance Report, which included a comprehensive Compliance Program review including a summary of breaches, audits, and Compliance Department projects.
CHIEF EXECUTIVE OFFICER REPORT	Doctor Flanigan reviewed Medical Staff Administration Pillars of Excellence for July 1 2016 through June 30 2017, which will be provided on a quarterly basis going forward.
CHIEF OPERATING OFFICER REPORT	On behalf of Chief Operating Officer Kelli Huntsinger, Doctor Flanigan reported that the NIHD Lab recently underwent a Joint Commission survey, and was re-accredited as a result. He additionally noted that the NIHD Quality Department now reports to Ms. Huntsinger, and reported that the Dietary Department is implementing improvements to hospital food services.

CHIEF FINANCIAL
OFFICER REPORT

Chief Financial Officer Kristina Gritsutenko reviewed the preliminary financial and statistical reports for the year ending June 30 2017, and noted the following:

- Wipfli LLP is on site this week to conduct the District's annual audit. The financial and statistical reports presented today will be adjusted as a result of their findings and some changes have already been made since the initial reports were published.
- The statement of operations for the fiscal year ending (FYE) 6/30/17 shows a significant loss for the year, and it appears that the loss may be adjusted even further to the negative. Significant negative adjustments have already been made relating to the employee pension plan and tax revenue adjustments.
- Gross patient revenue was under budget for the year and appears to be trending downward.
- Total expenses were over budget for the year by approximately 1 million dollars. Increases were also seen in bad debt and charity care, and inventory on hand seems very high.
- The District's overall financial picture has deteriorated significantly from the previous year. Leadership will address this immediately and determine if strategic changes need to be made.

At the conclusion of the financial report it was noted that budget workshops with the Board of Directors will likely be scheduled in the upcoming months. The Board indicated that philosophically, they are interested in expanding services rather than contracting them in order to improve the District's financial picture. It was then moved by Ms. Hubbard, seconded by Ms. Kilpatrick, and unanimously passed to approve the preliminary financial and statistical reports for the period ending June 30 2016, with the understanding that they will be adjusted as a result of the District's annual audit.

CHIEF NURSING
OFFICER REPORT

On behalf of Chief Nursing Officer Tracy Aspel RN, Doctor Flanigan reported the following:

- The District is implementing additional safety procedures involving patient IV's in order to prevent dirty needle sticks
- The District's Medication Errors Reduction Plan (MERP) is helping to reduce incidents of medication errors

CHIEF HUMAN
RELATIONS OFFICER
REPORT

Chief Human Relations Officer Evelyn Campos provided a bi-monthly Human Relations department report which included the following:

- Results of the Employee Satisfaction Survey are being rolled out to District employees
- 18 action plans have been put in place to engage the District workforce
- Consideration is being given to combining the PPAC and Workforce Experience Committees into one group

CHIEF OF STAFF
REPORT

On behalf of Chief of Staff Richard Meredick, MD, Doctor Flanigan reported following careful review, consideration, and approval by the

POLICIES,
PROCEDURES,
PROTOCOLS, AND
ORDER SETS

appropriate Committees the Medical Executive Committee recommends approval of the following hospital wide Policies, Procedures, Protocols, and order sets:

- *Childbirth Photography/Videotaping*
- *Plan to Eliminate or Substantially Reduce Medication-Related Errors – MERP 2017*
- *Anesthesia in Ancillary Departments*
- *Hydrotherapy Pool Lippincott Procedure with Critical Notes and Consent*
- *Fall Prevention and Management (with attachments)*
- *Patient Transfer/Discharge to Another Facility*
- *Medical Staff and Allied Health Professional Application Fee Processing*

It was moved by Ms. Hubbard, seconded by Ms. Kilpatrick, and unanimously passed to approve all seven Policies, Procedures, Protocols, and order sets as presented.

CORE PRIVILEGE
FORMS BY SERVICE

Doctor Flanigan additionally reported that the Medical Executive Committee also recommends approval of the following Core Privilege Forms by Service:

- *Pediatrics*
- *Orthopedic Surgery*
- *General Surgery*

It was moved by Ms. Kilpatrick, seconded by Ms. Hubbard, and passed to approve all three Core Privilege Forms by Service, with Director Hartz abstaining from the vote.

ANNUAL REVIEW,
PEDIATRIC CRITICAL
INDICATORS

Doctor Flanigan also reported the Medical Executive Committee recommends annual approval of the *Pediatric Critical Indicators for 2017*. It was moved by Doctor Ungersma, seconded by Ms. Hubbard, and unanimously passed to approve the *Pediatric Critical Indicators for 2017* as presented.

MEDICAL STAFF
APPOINTMENT/
PRIVILEGING

Doctor Flanigan then reported the Medical Executive Committee recommends Medical Staff Appointment and Privileging of Arash Radparvar MD (*radiology – provisional active staff*). It was moved by Mr. Hartz, seconded by Ms. Kilpatrick, and unanimously passed to approve the privileging of Arash Radparvar MD as recommended.

MEDICAL STAFF
TEMPORARY
PRIVILEGES

Doctor Flanigan additionally reported following careful review, consideration, and approval by the appropriate Committees the Medical Executive Committee recommends approval of the following Temporary Privileges for 60 service days in calendar year 2017 (except where noted):

- William Feske, MD (*Bishop Radiology Group*) – 90 calendar days
- Brian Mikolasko, MD (*hospitalist – locums*)
- Kathy Burch, MD (*hospitalist – locums*)
- Louisa Salisbury, MD (*Pediatrics – locums*) – pending the submission of proof of insurance

It was moved by Ms. Hubbard, seconded by Ms. Kilpatrick, and unanimously passed to approve all four temporary privileges as requested.

EXTENSION OF
TEMPORARY
PRIVILEGES

The Medical Executive Committee additionally recommends extension of temporary privileges for Wilbur Peralta, MD (*hospitalist*) from 8/31/17 to 12/31/17 to provide necessary coverage of the hospitalist service. It was moved by Mr. Hartz, seconded by Ms. Kilpatrick, and unanimously passed to approve the extension of temporary privileges for Wilbur Peralta MD as requested.

MEDICAL STAFF
ADVANCEMENT

Doctor Flanigan also reported the Medical Executive Committee recommends advancement from provisional to full active staff for Jay K. Harness MD (*breast surgery*). It was moved by Ms. Kilpatrick, seconded by Ms. Hubbard, and unanimously passed to approve the Medical Staff advancement of Jay K. Harness MD as requested.

MEDICAL STAFF
RESIGNATIONS

Doctor Flanigan additionally reported the Medical Executive Committee recommends approval of the following Medical Staff resignations:

- Carolyn Saba, MD (*anesthesiology*) – effective 7/26/17
- Shruti Ramakrishna, MD (*family medicine*) – effective 9/5/17
- Manish Pandya, MD (*internal medicine/hospitalist*) – effective 9/1/17

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

BOARD MEMBER
REPORTS

Doctor Ungersma asked if any members of the Board of Directors wished to report on any items of interest. Director Hubbard reported she is pleased to hear that same day visits at the Rural Health Clinic are going well, and Jennifer Figueroa PA who provides those services is being well received by the community. Director Ungersma also commented that the District may want to look into the possibility of obtaining a USDA (United States Department of Agriculture) loan in order to fund construction of a new Rural Health Clinic building. No other comments were heard.

ADJOURNMENT TO
CLOSED SESSION

At 7:07 pm Doctor Ungersma 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, 2 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*).

D. Discussion of a personnel matter (*pursuant to Government Code Section 54957*).

RETURN TO OPEN
SESSION AND REPORT
OF ACTION TAKEN

At 8:09 pm the meeting returned to open session. Doctor Ungersma reported that the Board took action to settle one pending litigation.

ADJOURNMENT

The meeting adjourned at 8:10pm.

John Ungersma MD, Vice President

Attest:

M.C. Hubbard, Secretary