



# **NOTICE**

## **NORTHERN INYO HEALTHCARE DISTRICT BOARD OF DIRECTORS – GOVERNANCE COMMITTEE MEETING**

**May 06, 2024 AT 8:00 AM**

**The Governance Committee will meet in person at 150 Pioneer Street Bishop, CA 93514 Administration Meeting Room (AMR). Members of the public will be allowed to attend in person or via zoom. Public comments can be made in person or via zoom:**

**TO CONNECT VIA ZOOM:** *(A link is also available on the NIHD Website)*

<https://us06web.zoom.us/j/82808945975>

**Meeting ID:** 828 0894 5975

**PHONE CONNECTION:**

888 475 4499 US Toll-free

877 853 5257 US Toll-free

**Meeting ID:** 828 0894 5975

- 
1. Call to Order (at 8:00 am).
  2. **Public Comment:** At this time, members of the audience may speak only on items listed on the Notice for this meeting, and speakers will be limited to a maximum of three minutes each. The Governance Committee is prohibited from generally discussing or taking action on items not included on this Notice.
  3. Approval of G.C. Meeting Minutes for April 1, 2024 (*Action item*)
  4. NIHD Board Calendar of Time Sensitive Business (*Agenda reference / information item*)
  5. 2024 NIHD Board Workplan (*Agenda reference / information item*)
  6. Open Session:
    - a. New Business:
      - i. Board Self-Assessment recommendations
    - b. Old Business:
      - i. Strategic Planning process
      - ii. Election Window Information
    - c. Standing Business:
      - i. Board Development and Education topics
      - ii. Marketing update
      - iii. Next meeting topic discussion
      - iv. G.C. Workplan updates

v. Board Calendar of Time Sensitive Business updates

7. Adjournment

*In compliance with the Americans with Disabilities Act, if you require special accommodations to participate in a District Board Governance Committee meeting, please contact administration at (760) 873-2838 at least 24 hours prior to the meeting.*

CALL TO ORDER	Northern Inyo Healthcare District (NIHD) Governance Committee member Jean Turner called the meeting to order at 8:00 a.m.
PRESENT	Jean Turner, G.C. Chair (Vice Chair, Board of Directors) Stephen DelRossi, MSA, Chief Executive Officer Patty Dickson, Compliance Officer Barbara Laughon, Manager of Marketing & Strategy Katie Manuelito, Board Clerk & CFO Assistant
PRESENT VIA ZOOM	David McCoy Barrett, G.C. Board Member (Treasurer, Board of Directors)
ABSENT	
OPPORTUNITY FOR PUBLIC COMMENT	<p>Governance Committee Chair Jean Turner reported that at this time, members of the audience may speak on any items not on the agenda on any matter within the jurisdiction of the District Board. Public comments shall be received at the beginning of the meeting and are limited to three minutes per speaker, with a total time limit of thirty minutes for all public comment unless otherwise modified by the Chair. The general Public Comment portion of the meeting allows the public to address any item within the jurisdiction of the Board of Directors on matters not appearing on the agenda. Public comments on agenda items should be made at the time each item is considered.</p> <p>There were no comments from the public.</p>
<b>NEW BUSINESS</b>	
DISCUSS REVIEW OF BOARD POLICIES/PROCEDURES	<p>G.C. Chair Turner called attention to the first agenda item.</p> <p>Discussion ensued. The committee agreed to review all Board policies &amp; procedures at one of the next upcoming G.C. Meetings.</p>
DISCUSS STRATEGIC PLANNING PROCESS AND HOW TO MAXIMIZE EFFECTIVENESS	<p>G.C. Chair Turner called attention to the Strategic Planning Process and how to maximize effectiveness.</p> <p>Discussion ensued.</p>
PLANNING DISCUSSION FOR BOARD SELF-ASSESSMENT RESULTS	<p>G.C. Chair Turner called attention to the Planning Discussion for Board Self-Assessment results.</p> <p>Discussion ensued.</p>
APPROVAL OF G.C. MEETING MINUTES FOR JANUARY 30, 2024	<p>G.C. Chair Turner called attention to the January 30, 2024 Meeting Minutes.</p> <p>Patty Dickson read the meeting minutes aloud. G.C. Chair Turner called</p>

for a motion to approve minutes with changes as discussed.

**Motion by:** David McCoy Barrett

**Seconded by:** Jean Turner

**Passed 2-0 vote**

APPROVAL OF G.C.  
MEETING MINUTES FOR  
FEBRUARY 05, 2024

G.C. Chair Turner called attention to the February 05, 2024 Meeting Minutes.

Patty Dickson read the meeting minutes aloud. G.C. Chair Turner called for a motion to approve minutes with changes as discussed.

**Motion by:** David McCoy Barrett

**Seconded by:** Jean Turner

**Passed 2-0 vote**

APPROVAL OF G.C.  
MEETING MINUTES FOR  
FEBRUARY 12, 2024

G.C. Chair Turner called attention to the February 12, 2024 Meeting Minutes.

Patty Dickson read the meeting minutes aloud. G.C. Chair Turner called for a motion to approve minutes with changes as discussed.

**Motion by:** David McCoy Barrett

**Seconded by:** Jean Turner

**Passed 2-0 vote**

APPROVAL OF G.C.  
MEETING MINUTES FOR  
FEBRUARY 26, 2024

G.C. Chair Turner called attention to the February 26, 2024 Meeting Minutes.

Patty Dickson read the meeting minutes aloud. G.C. Chair Turner called for a motion to approve minutes with changes as discussed.

**Motion by:** David McCoy Barrett

**Seconded by:** Jean Turner

**Passed 2-0 vote**

ADJOURNMENT

Adjournment at 08:49 a.m.

\_\_\_\_\_  
Jean Turner, Northern Inyo Healthcare District,  
Governance Committee Member

Attest:

\_\_\_\_\_  
David McCoy Barrett, Northern Inyo Healthcare  
District, Governance Committee Member



## Northern Inyo Healthcare District (NIHD) Board of Directors' Calendar of Time Sensitive Business

Time Frame	Action Item	Executive Leadership	Board of Directors
June	<ul style="list-style-type: none"> <li>• Hear annual budget presentation, and adopt budget for the upcoming fiscal year</li> <li>• Board reviews Board policies and procedures</li> </ul>	X	X  X
July	<ul style="list-style-type: none"> <li>• Board Chair contacts ACHD to initiate process for CEO Evaluation</li> </ul>		X
August	<ul style="list-style-type: none"> <li>• Board members complete CEO evaluation, using ACHD format, and each Board member sends his/her completed evaluation electronically by the due date to ACHD designee for compilation</li> </ul>		X
September	<ul style="list-style-type: none"> <li>• Board of Directors meets in closed session to discuss the results of the CEO evaluation, and to set CEO performance goals, and review CEO compensation</li> </ul>	X	X
October	<ul style="list-style-type: none"> <li>• Beginning in 2023, at a minimum, every three (3) years, the Board's Governance Committee reviews the New Board member Orientation Handbook, and makes recommendations to the full Board of Directors</li> </ul>		X
November	<ul style="list-style-type: none"> <li>• Chair prepares officer slate for approval by the Board at the December meeting</li> <li>• If not completed earlier, Board reviews and accepts the annual audit</li> </ul>	X	X X
December	<ul style="list-style-type: none"> <li>• Board approves officer slate for the upcoming year</li> </ul>		X
January	<ul style="list-style-type: none"> <li>• New Board officers begin their one-year terms</li> <li>• New Board Chair appoints members to Standing Committees and any known Ad Hoc Committees</li> <li>• Each Board Member reads and signs the Board Member Code of Conduct</li> </ul>		X X X
February	<ul style="list-style-type: none"> <li>• Board and Executive Team review and modify, as necessary the Strategic Plan, which then informs the upcoming fiscal year budget</li> </ul>	X	X
March	<ul style="list-style-type: none"> <li>• Board Self-Assessment Tool, developed by ACHD, is distributed to the Board with due date for submitting to ACHD designee for compilation</li> </ul>		X
April	<ul style="list-style-type: none"> <li>• Board discusses results of the Board Self-Assessment and possible goals for the coming year based on these results, including any results that may the inform the upcoming fiscal year budget</li> </ul>		X
May	<ul style="list-style-type: none"> <li>• CEO reports to Board regarding progress on the Strategic Plan and any CEO goals</li> </ul>	X	X



## 2024 Governance Committee Workplan

<b>January, February, March</b>
Committee 2024 Workplan
Discuss G.C. Terms
Review executive and Board strategic plans to prepare a strategic plan submission for the full board
Create Board Compliance Program Worksheet
Ensure Conflict of Interest Policy is being adhered to according to the form 700, complete annually for county
<b>April, May, June</b>
Review Board Policies and Procedures
Plan Board Self-assessment and strategic goals for coming year.
<b>July, August, September</b>
Governance Committee member contacts ACHD to initiate/plan the process for CEO evaluation by the full
Strategic plan mid-year review (current year)
<b>October, November, December</b>
Ensure Board Self-Assessment is complete
Review Board Compliance
Review 2025 GC Workplan (Submit to BOD in January 2025)
Oct - No less than every three years, will review new Board member orientation Handbook and make recommendations to full Board.
Nov -Prepares slate for rotation of elected officers for the Board Chair to present to the full Board for a vote.



# SUMMARY RESULTS

## Northern Inyo Healthcare District 2024 Governance Self-Assessment

Provided as a Member Service By



**ACHD**  
ASSOCIATION OF CALIFORNIA  
HEALTHCARE DISTRICTS

# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Self-Assessment Overview

In March 2024 the Northern Inyo Healthcare District Board of Directors assessed the board’s overall leadership performance. The board also identified issues and priorities for the future.

Board members assessed the board’s overall performance in ten leadership areas, including:

- Mission, values and vision;
- Strategic direction;
- Leadership structure and processes;
- Quality and patient safety;
- Community relationships;
- Relationship with the CEO;
- Relationships with the medical staff;
- Financial leadership;
- Community health; and
- Organizational ethics.

Board members rated 167 total criteria in these ten areas.

#### How the Self-Assessment Was Conducted

The governance self-assessment was conducted using an online survey. All five Northern Inyo Healthcare District board members completed the self-assessment.

Respondents rated a variety of statements in the ten areas above, using a scale ranging from “Level 5 (Strongly Agree)” to “Level 1 (Completely Disagree).” “Not Sure” and “Not Applicable” choices were also available for each statement.

Mean scores for each statement were calculated using a five point scale (Level 5 - Level 1). No points were assigned to “Not Sure” and “Not Applicable” ratings.

Finally, board members provided insights about their priorities for the board in the next year; defined the board’s strengths and weaknesses; identified key issues that should occupy the board’s time and attention in the next year; provided insights about the most significant trends the board must be able to understand and deal with in the next year; and identified critical factors that must be addressed for the organization to successfully achieve its goals.

#### Rating Methodology

The following rating scale was used to evaluate overall board performance:

- **Level 5:** I *strongly agree* with this statement. We always practice this as a part of our governance. Our performance in this area is *outstanding*.
- **Level 4:** I *generally agree* with this statement. We usually practice this as a part of our governance, but not always. We perform *well* in this area.
- **Level 3:** I *somewhat agree* with this statement. We often practice this in our governance, but we are not consistent. We perform *fairly well* in this area.
- **Level 2:** I *somewhat disagree* with this statement. We inconsistently practice this as a part of our governance. We *do not perform well* in this area.
- **Level 1:** I *disagree* with this statement. We never practice this as a part of our governance. We perform *very poorly* in this area.
- **N/S:** Not sure. I do not have enough information to make a determination about our performance in this area.
- **N/A:** Not applicable.

#### Reviewing This Report

Board member ratings of board self-assessment criteria are depicted throughout this report in graphs.

The criteria in each graph are displayed in order from highest to lowest mean score. The mean score for each individual rating criterion appears to the right of the graph.

To facilitate the identification of areas that may require governance and/or management attention, each graph includes the number of Level 5 - Level 1 responses to each statement in the color-coded bars. Responses are grouped and color coded, with “Level 5” appearing in dark green, “Level 4” in light green, “Level 3” in yellow, “Level 2” in orange, and “Level 1” in red. “Not Sure” responses appear in gray, and “Not Applicable” responses appear in white.

Longer lists of criteria have been separated into higher and lower rated sections for ease of display and analysis.

Board member responses to all open-ended questions appear throughout the report, where applicable, and on pages 28-29.



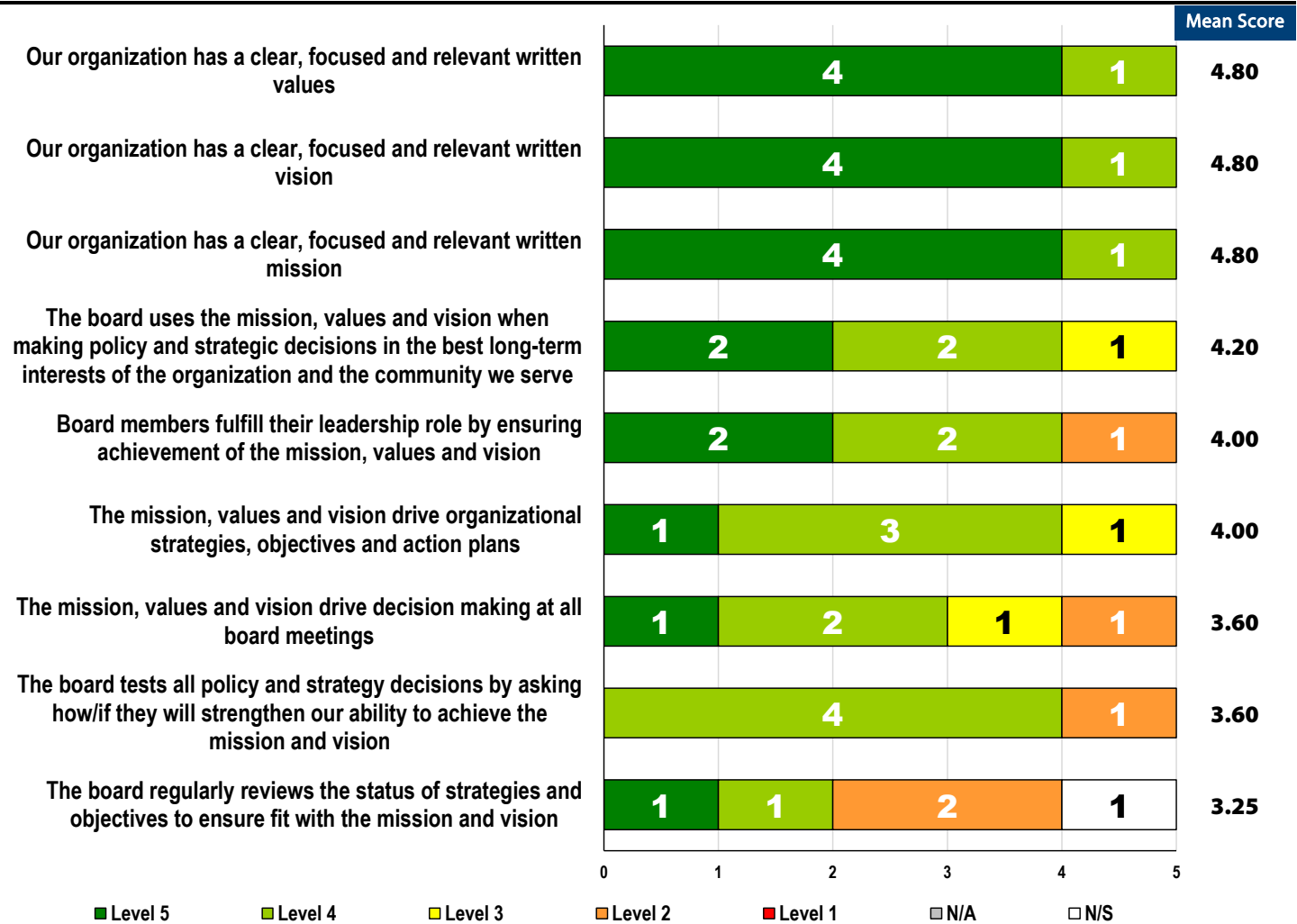
# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Mission, Values and Vision

#### Mission, Values and Vision

(sorted by highest to lowest mean score)



#### Suggestions for Governance Improvement

Board members provided the following suggestions for governance improvement in this section:

- Under our current leadership, I am confident that we will be measuring our achievement goals in the future.
- More accountability with industry standards presented. Then presentations by CEO as to how to achieve those benchmarks that get us operating at a profit in two years.
- More public awareness and reviewing of all three.
- Having a retreat.

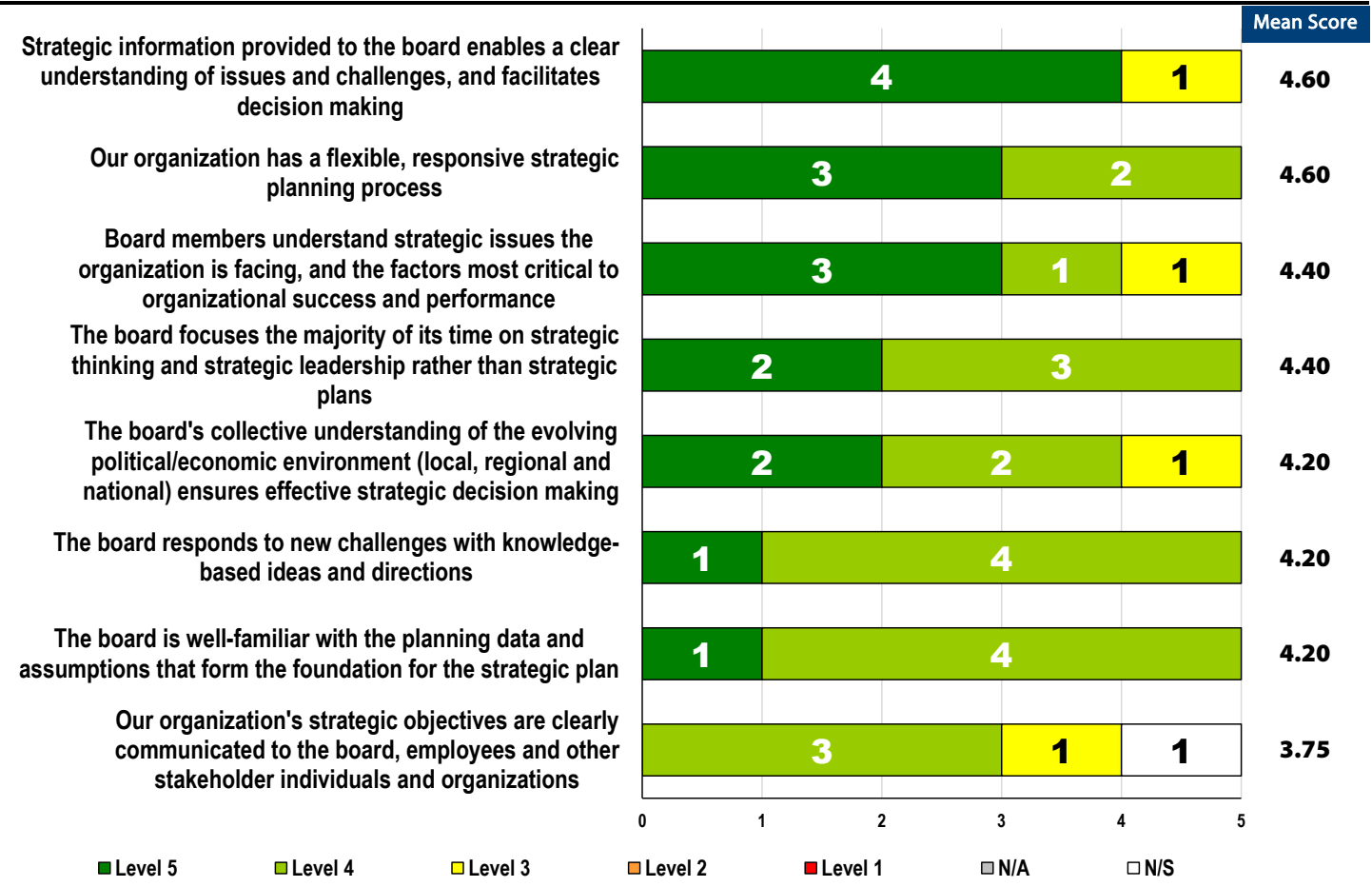
# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Strategic Direction

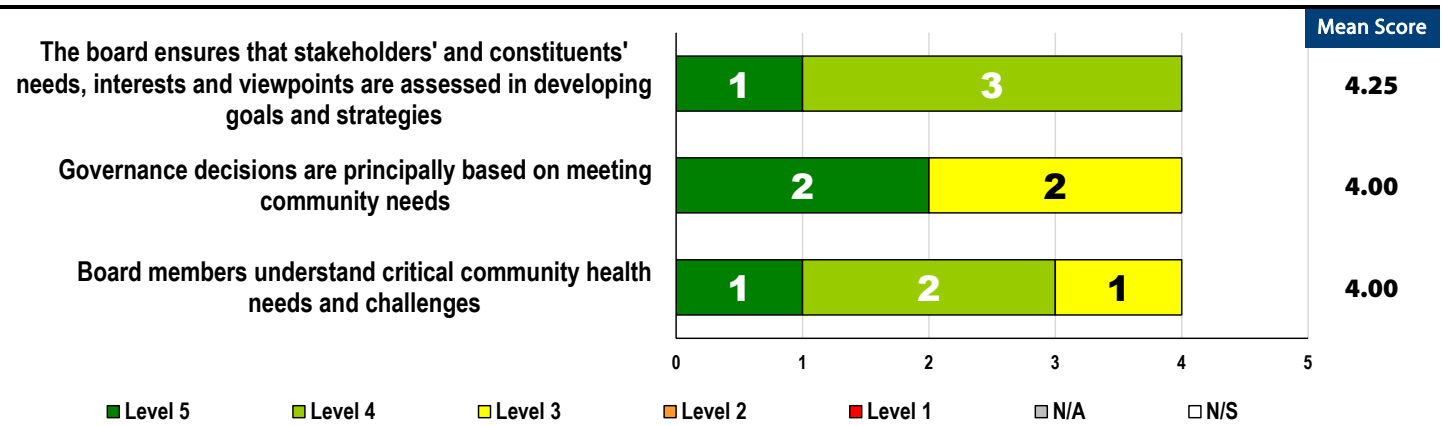
#### The Strategic Planning Process

(sorted by highest to lowest mean score)



#### Community and Stakeholder Perspectives

(sorted by highest to lowest mean score)

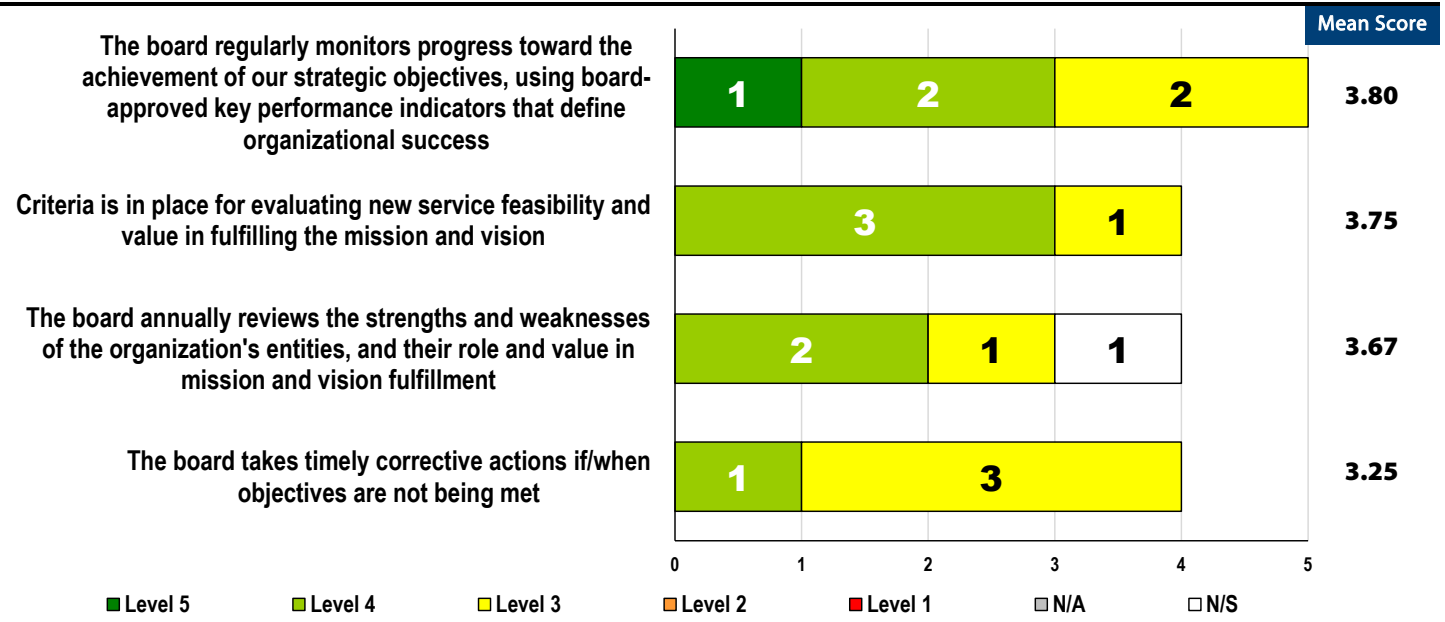


# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Monitoring Progress

(sorted by highest to lowest mean score)



### Suggestions for Governance Improvement

Board members provided the following suggestions for governance improvement in this section:

- Under current CEO leadership, these areas have been continuing to improve, and we have made great progress!
- We need more facts comparing us to industry standards. We need to know how far above the industry standards we must operate to stay in business the next two years. I want more accountability with each department and to know they understand what benchmarks they need to hit in order for the organization not to go bankrupt.
- Clear goals and monthly reporting.
- Review quarterly.

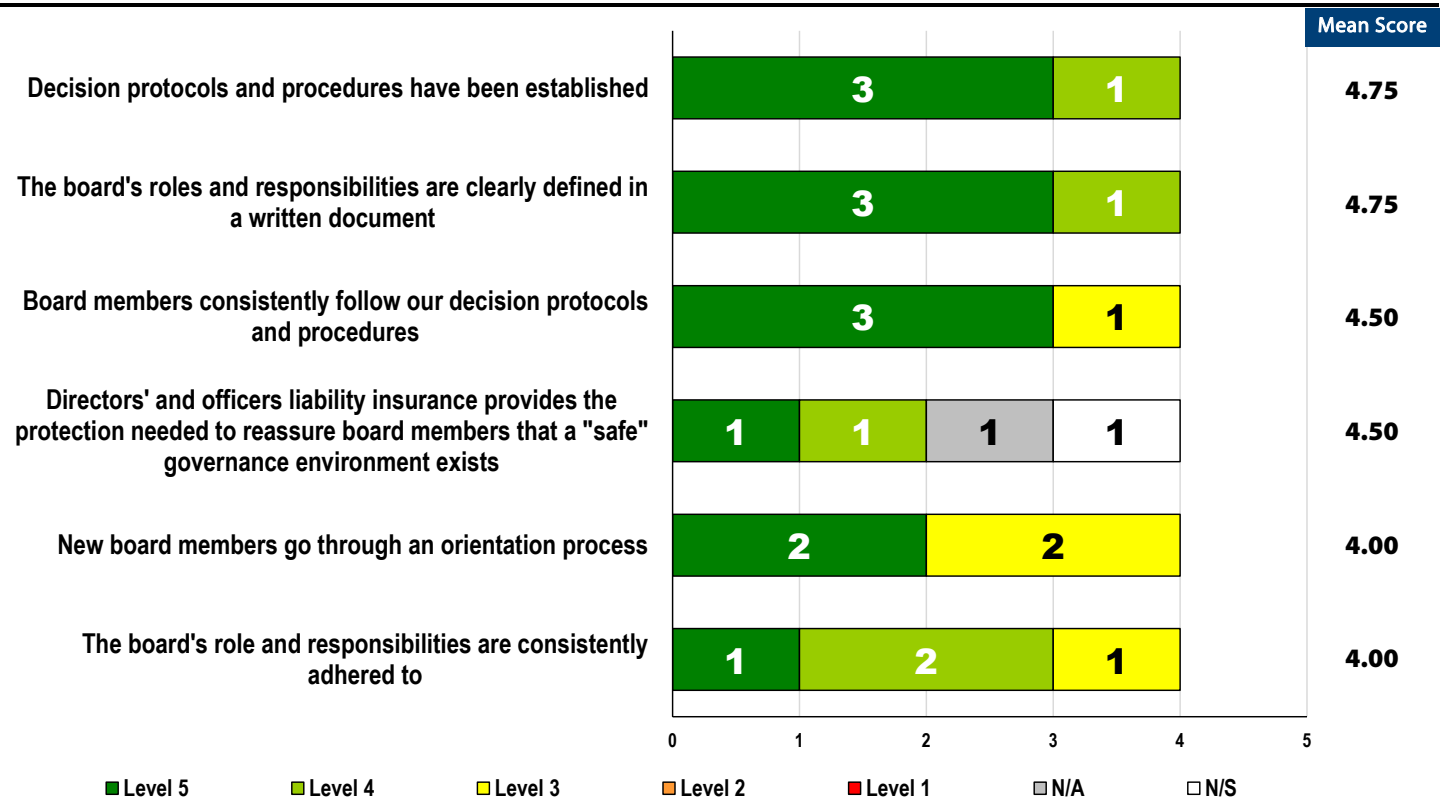
# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Leadership Structure and Processes

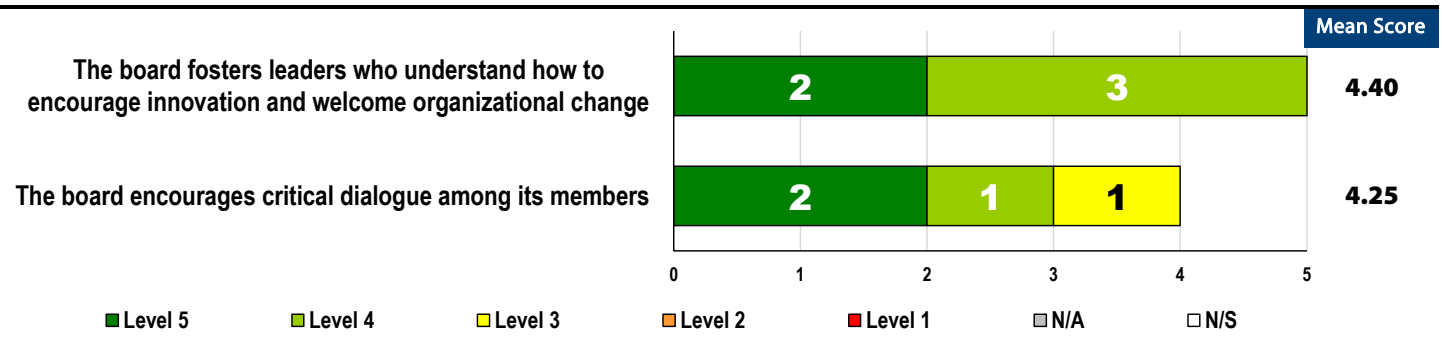
#### Board Roles and Responsibilities

(sorted by highest to lowest mean score)



#### Board Structure and Composition

(sorted by highest to lowest mean score)

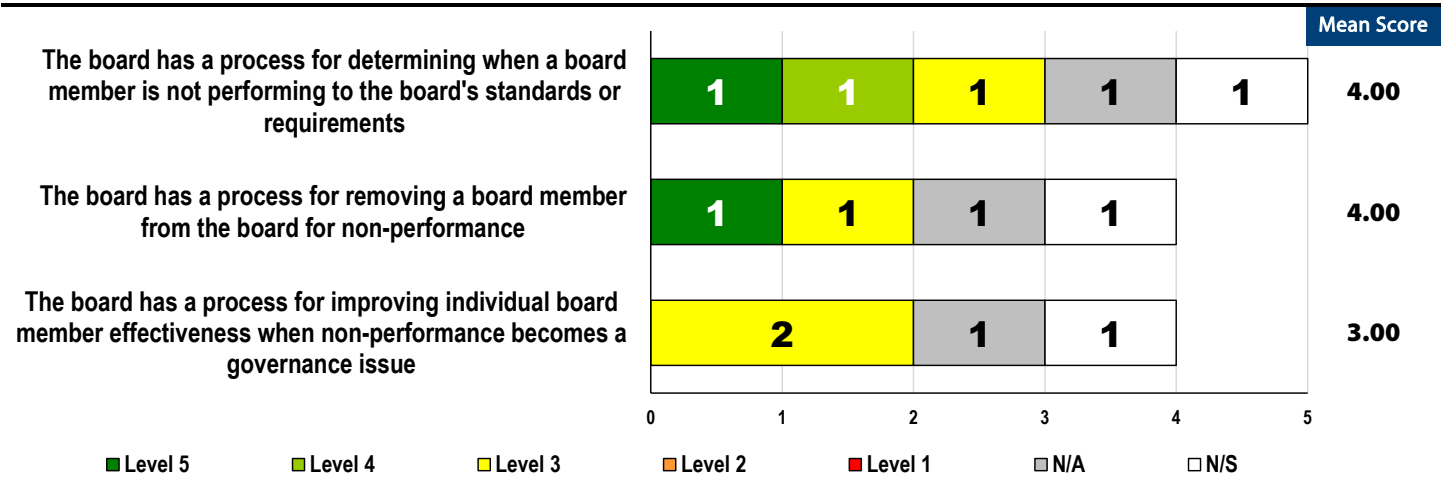


# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

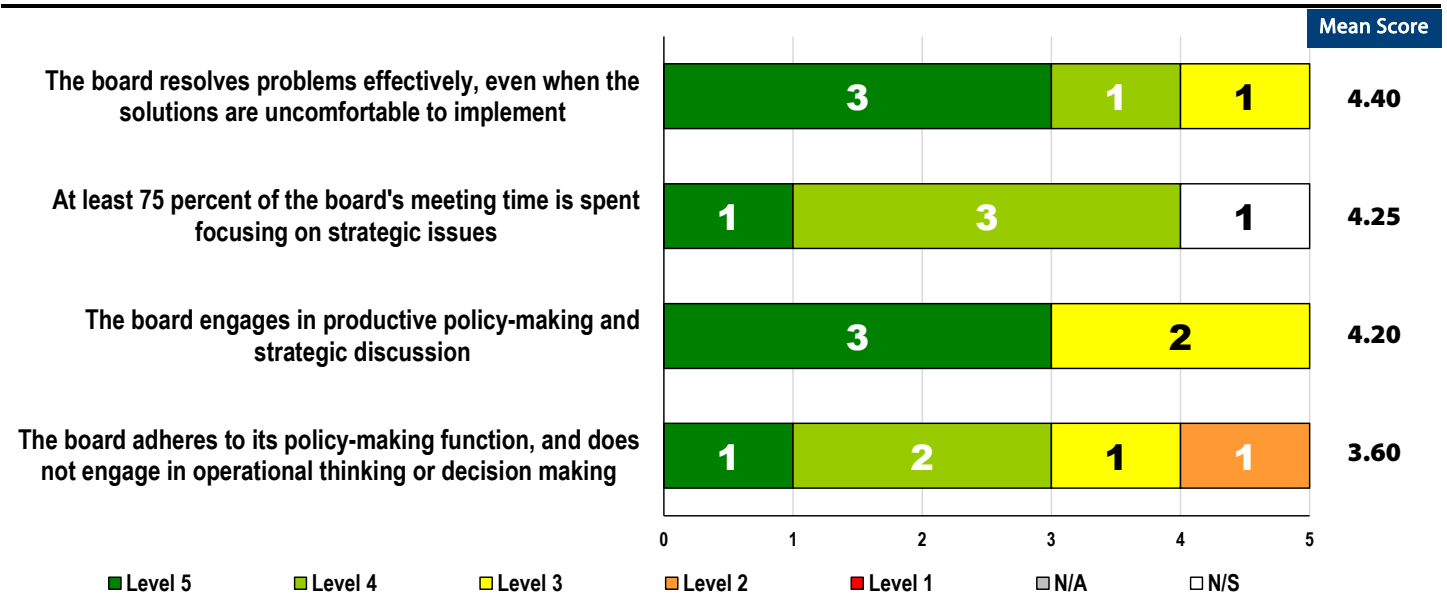
### Board Member Performance

(sorted by highest to lowest mean score)



### Strategic Focus

(sorted by highest to lowest mean score)

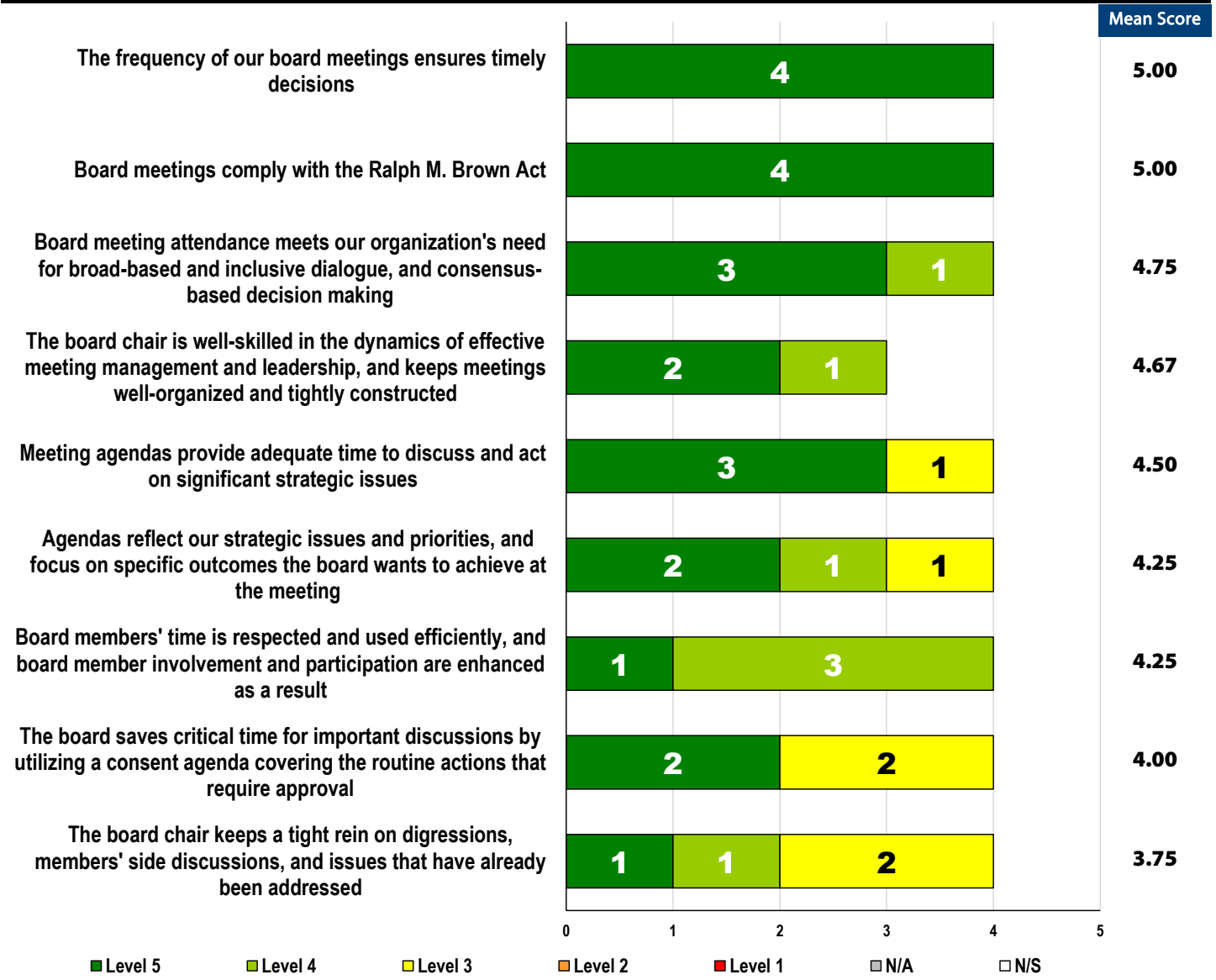


# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Board Meetings

(sorted by highest to lowest mean score)

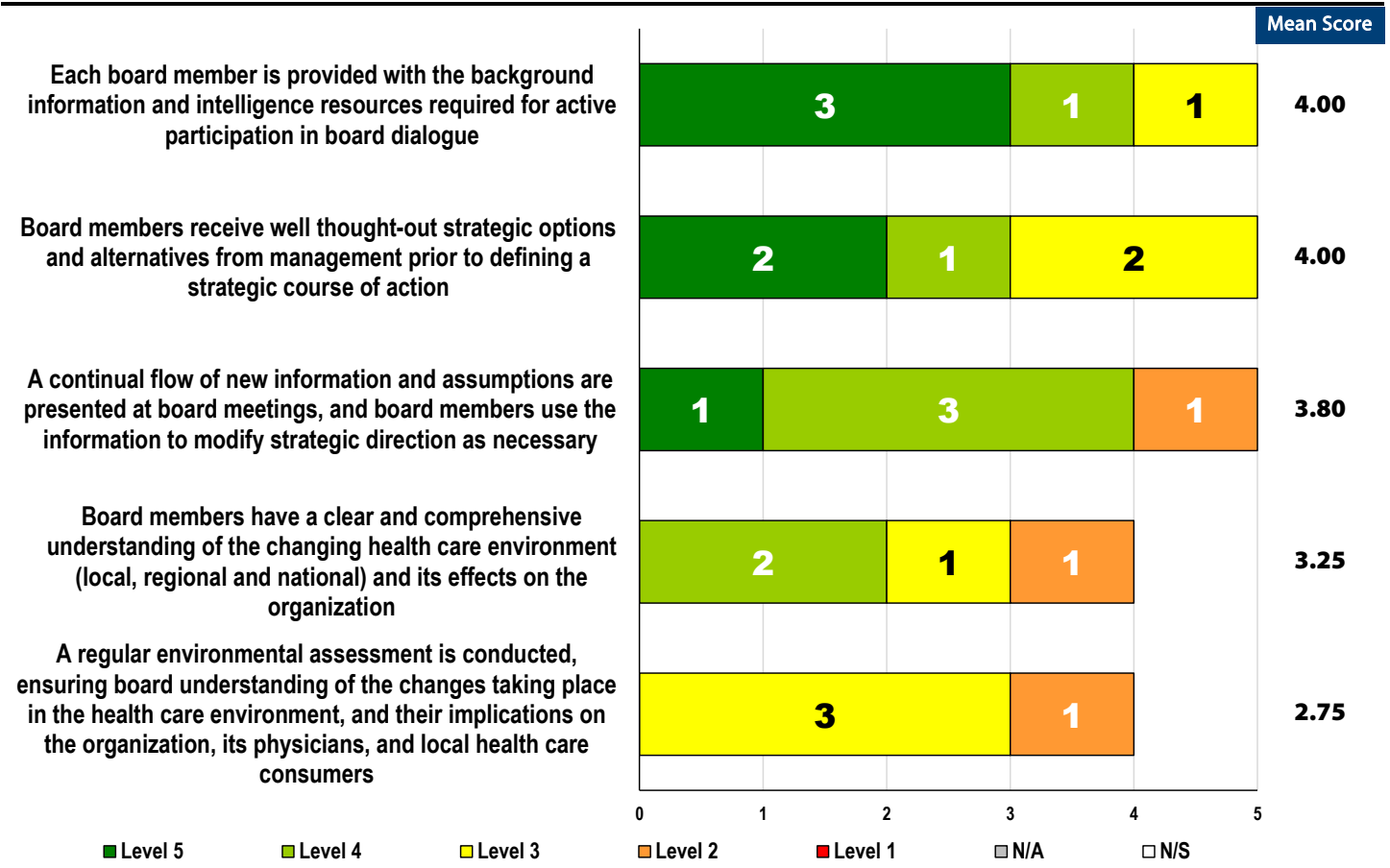


# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

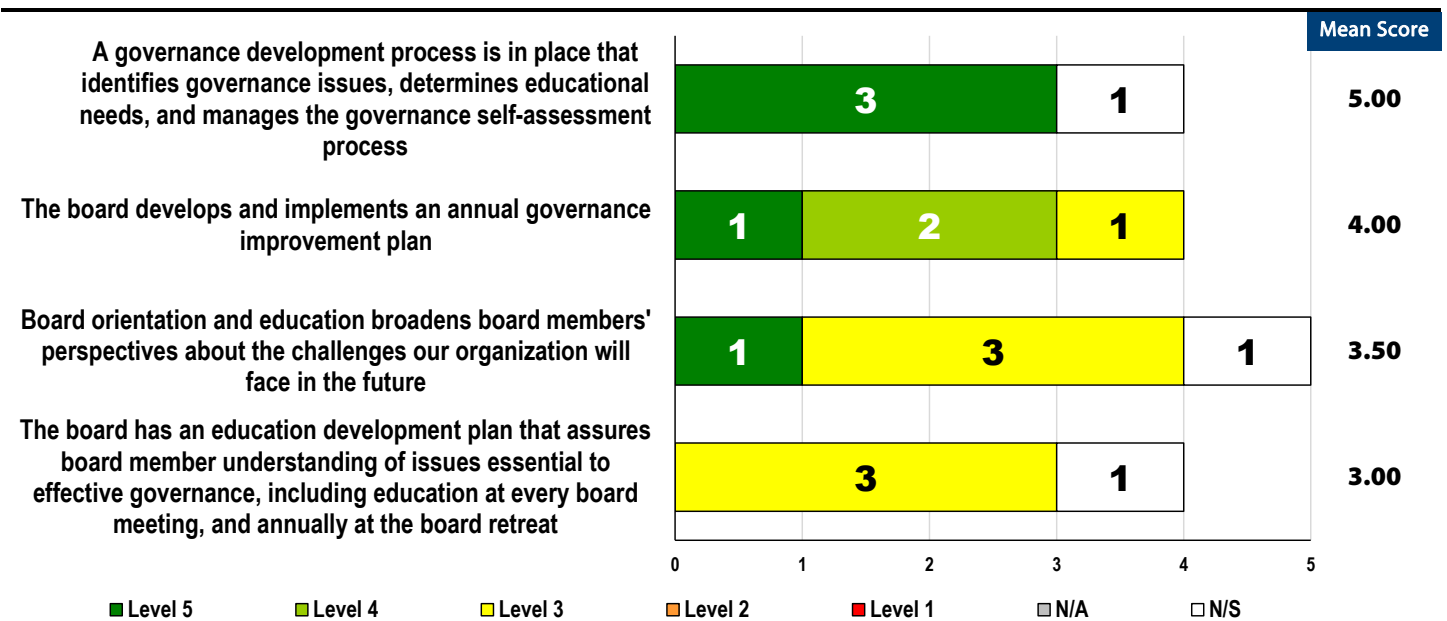
### Board Member Knowledge

(sorted by highest to lowest mean score)



### Governance Development

(sorted by highest to lowest mean score)

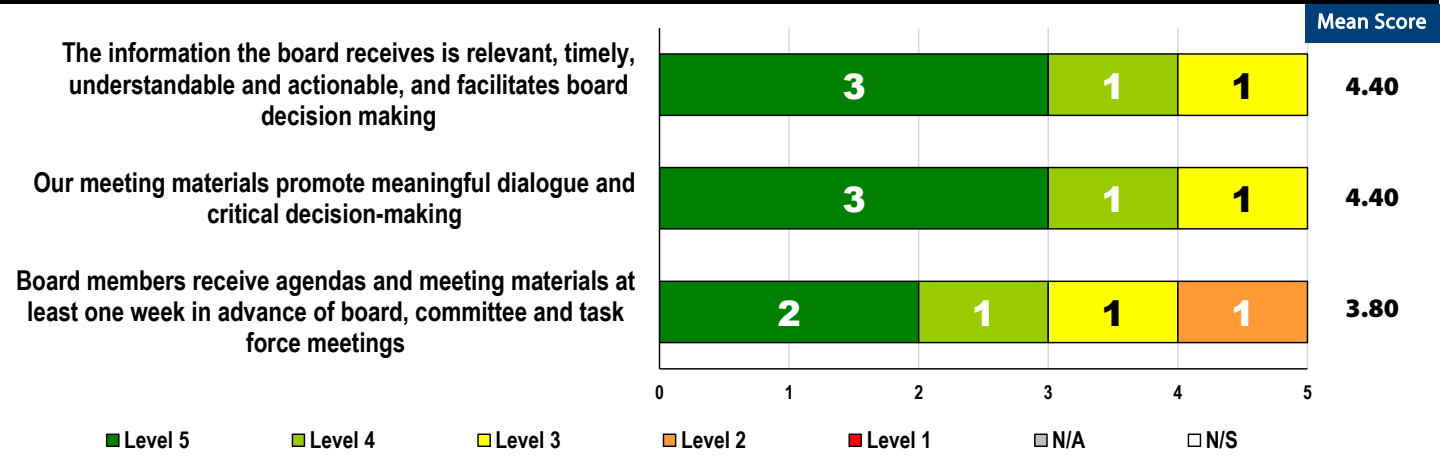


# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

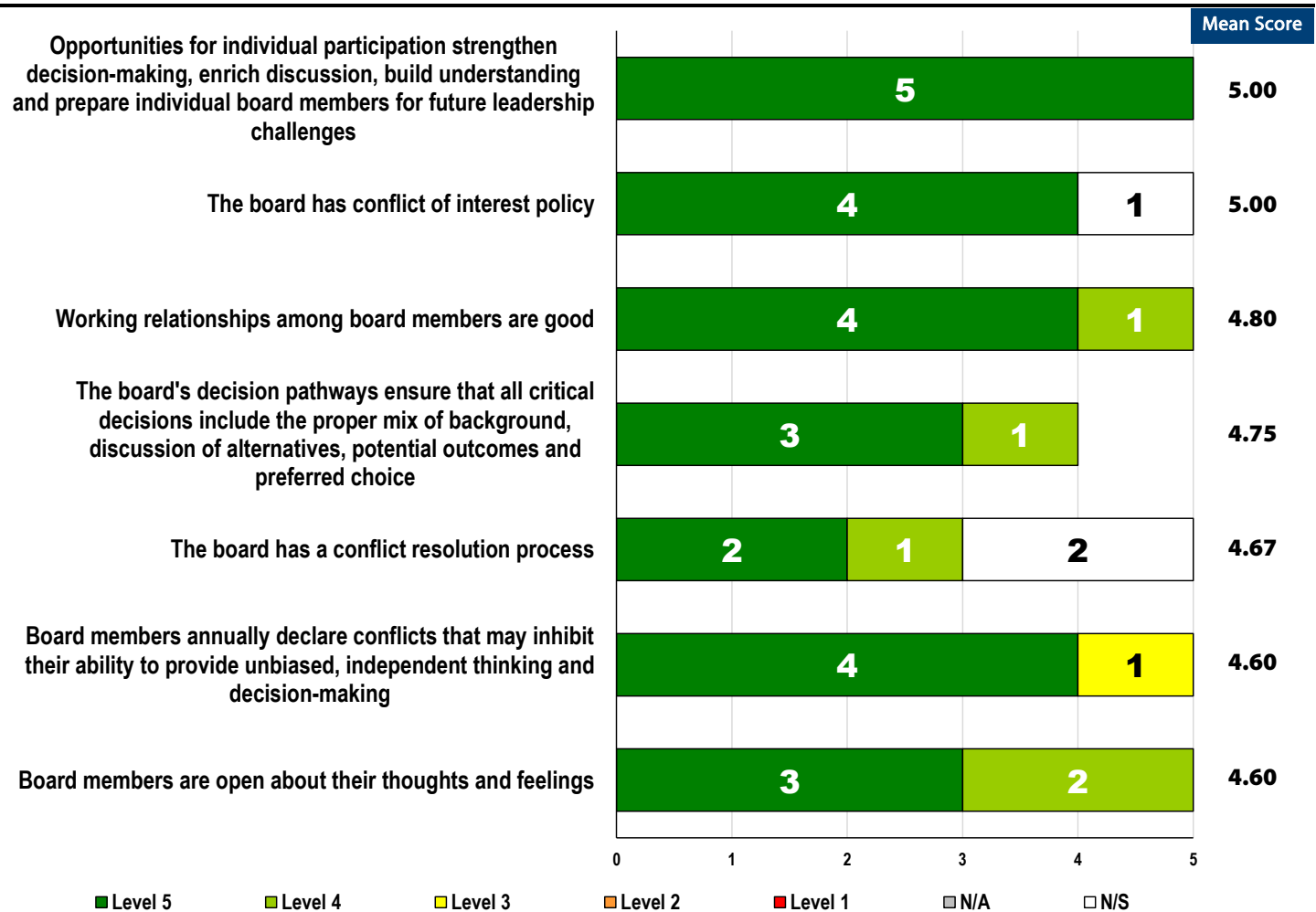
### Meeting Materials

(sorted by highest to lowest mean score)



### Board Relationships and Communication: Higher-Rated

(sorted by highest to lowest mean score)

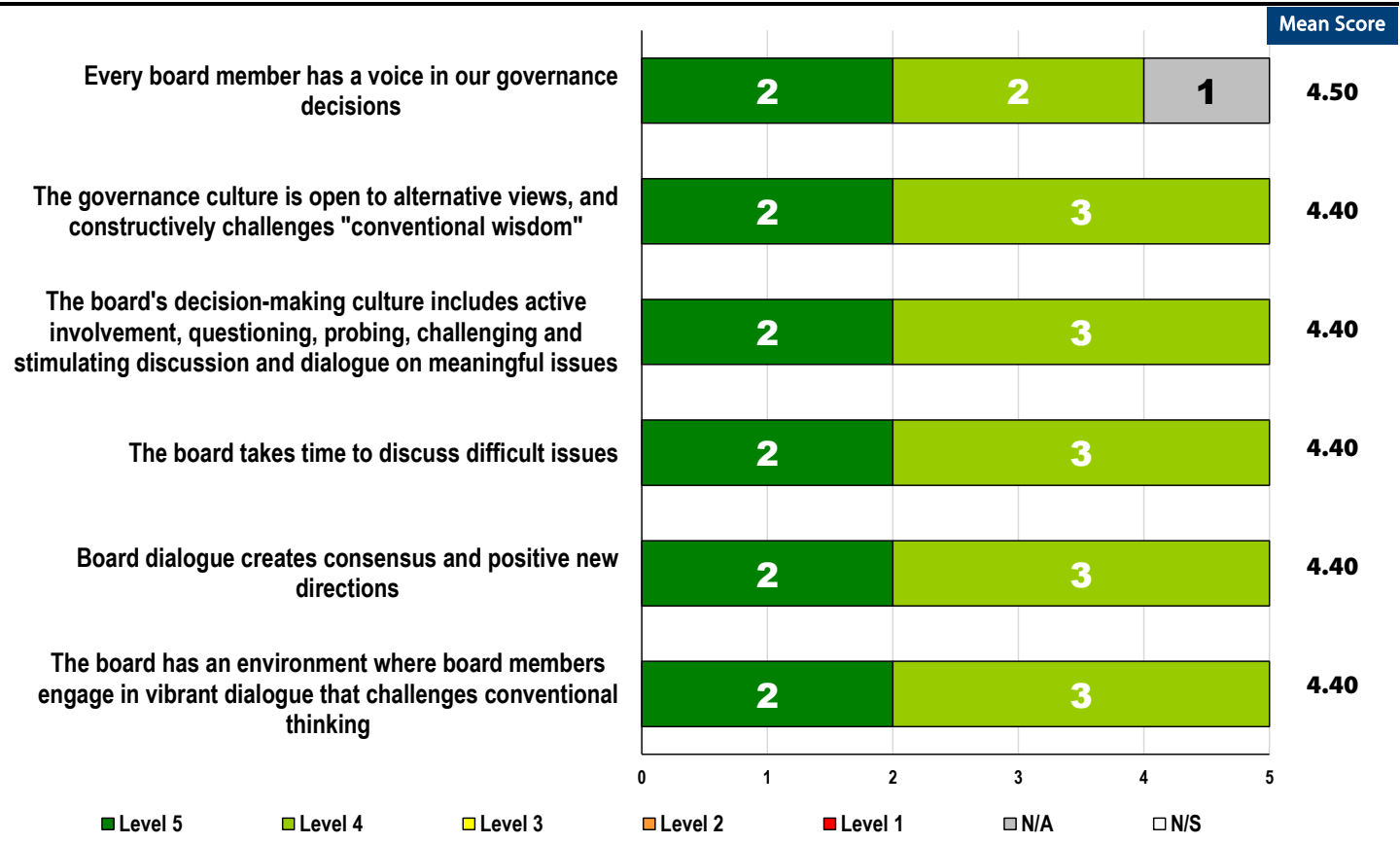




# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Board Relationships and Communication: Lower Rated (sorted by highest to lowest mean score)



### Suggestions for Governance Improvement

Board members provided the following suggestions for governance improvement in this section:

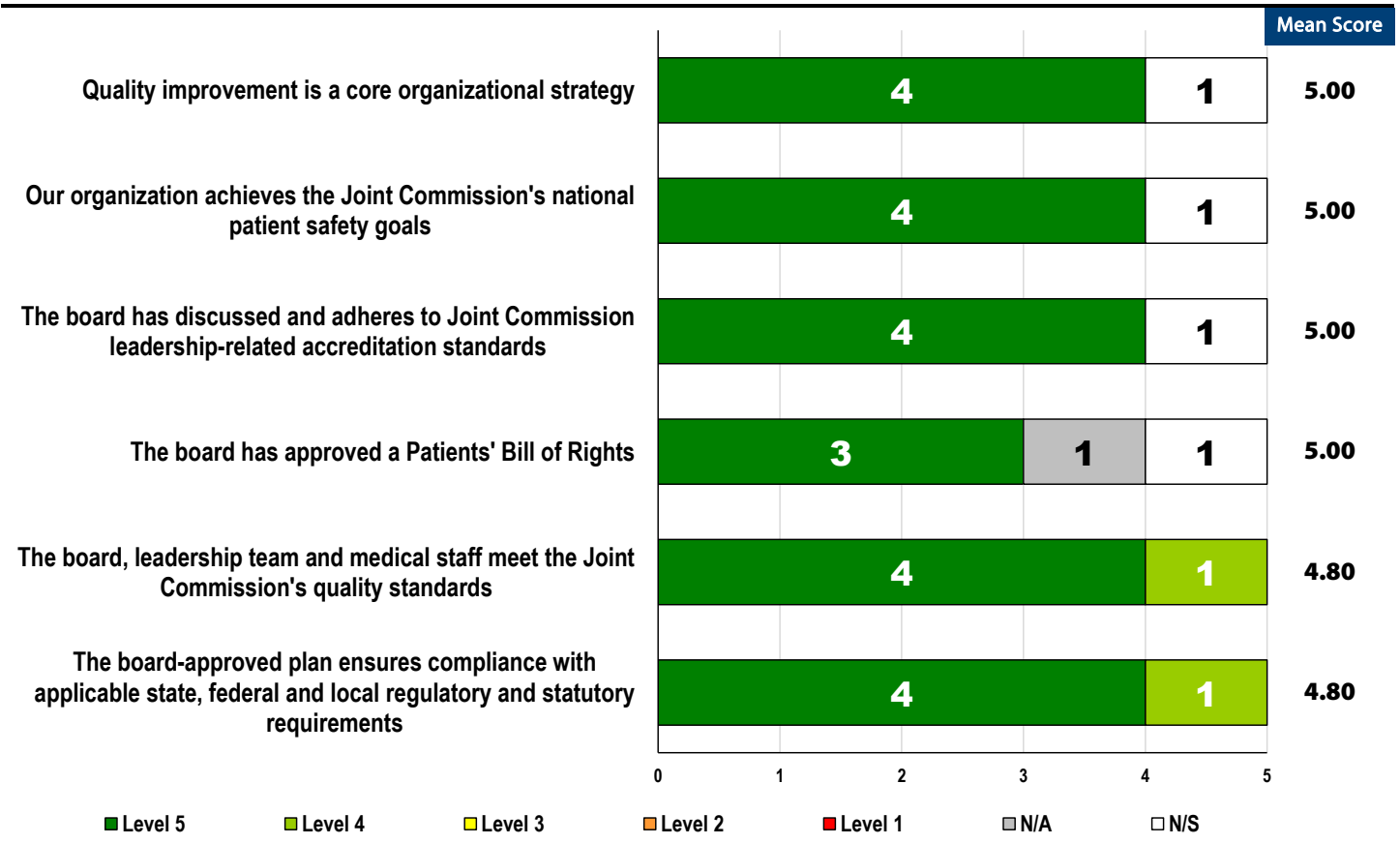
- The current Board members work well together in these areas.
- Again, having a retreat.

# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Quality and Patient Safety

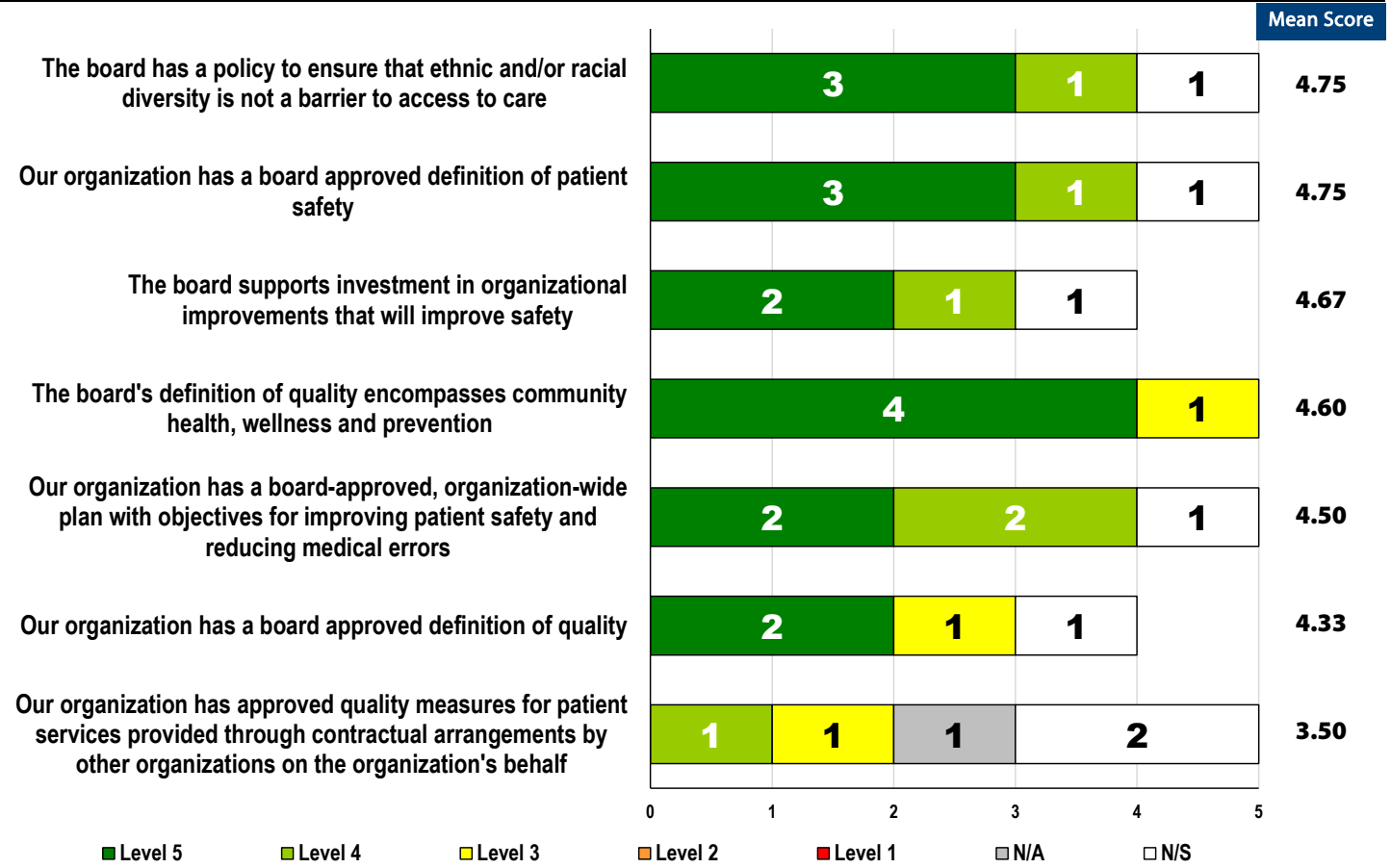
Defining and Understanding Quality and Patient Safety Issues: Higher-Rated  
*(sorted by highest to lowest mean score)*



# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Defining and Understanding Quality and Patient Safety Issues: Lower-Rated (sorted by highest to lowest mean score)

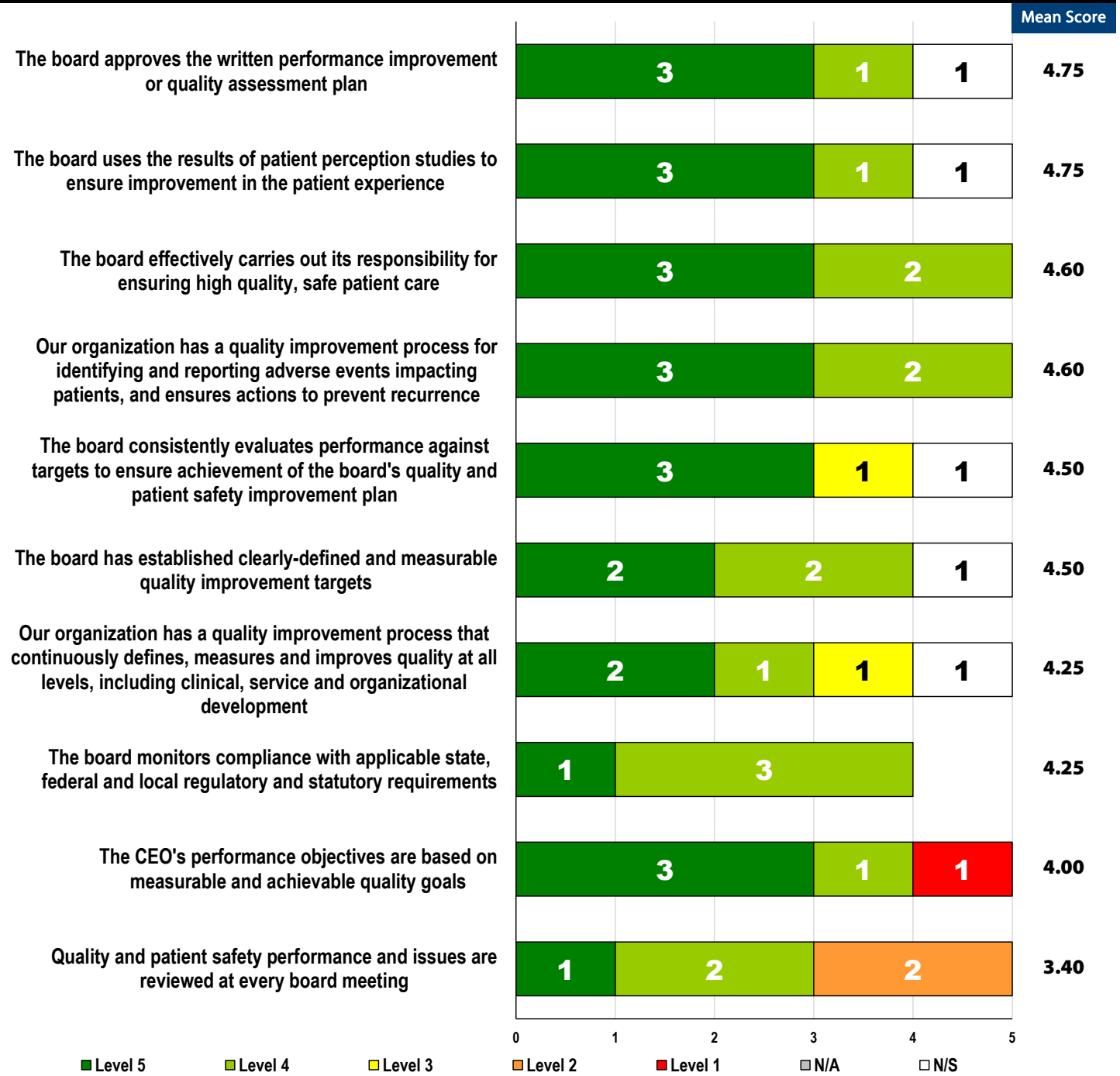


# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Monitoring Quality and Patient Safety

(sorted by highest to lowest mean score)



# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Ensuring a Workforce that Provides High Quality and Safe Care

*(sorted by highest to lowest mean score)*



### Suggestions for Governance Improvement

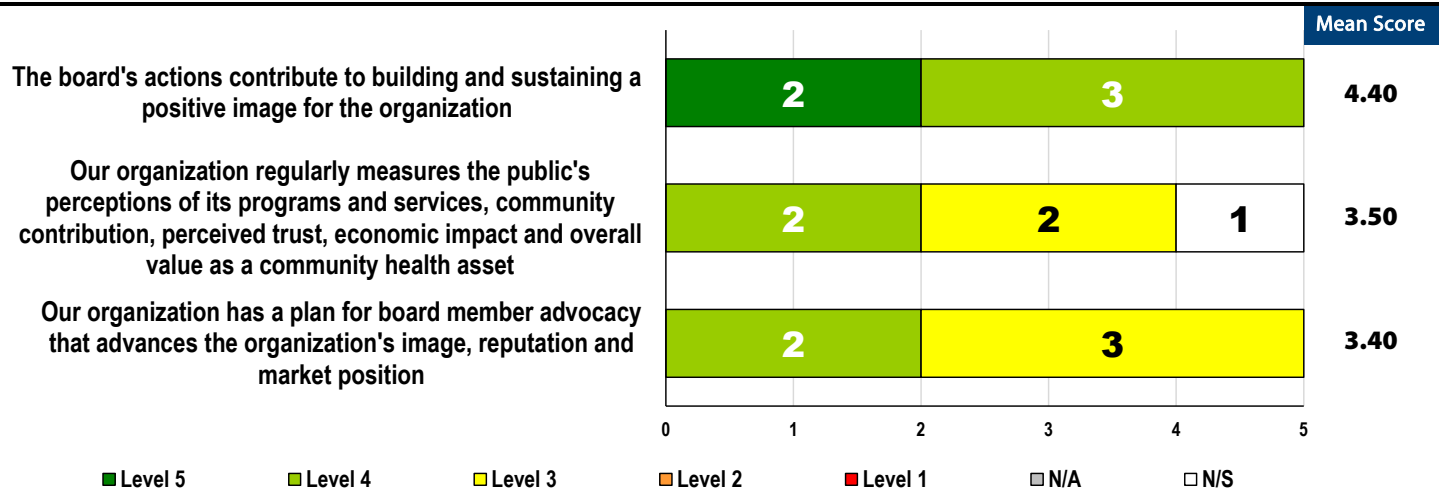
*No comments or suggestions for governance improvement were provided in this section.*

# SUMMARY RESULTS

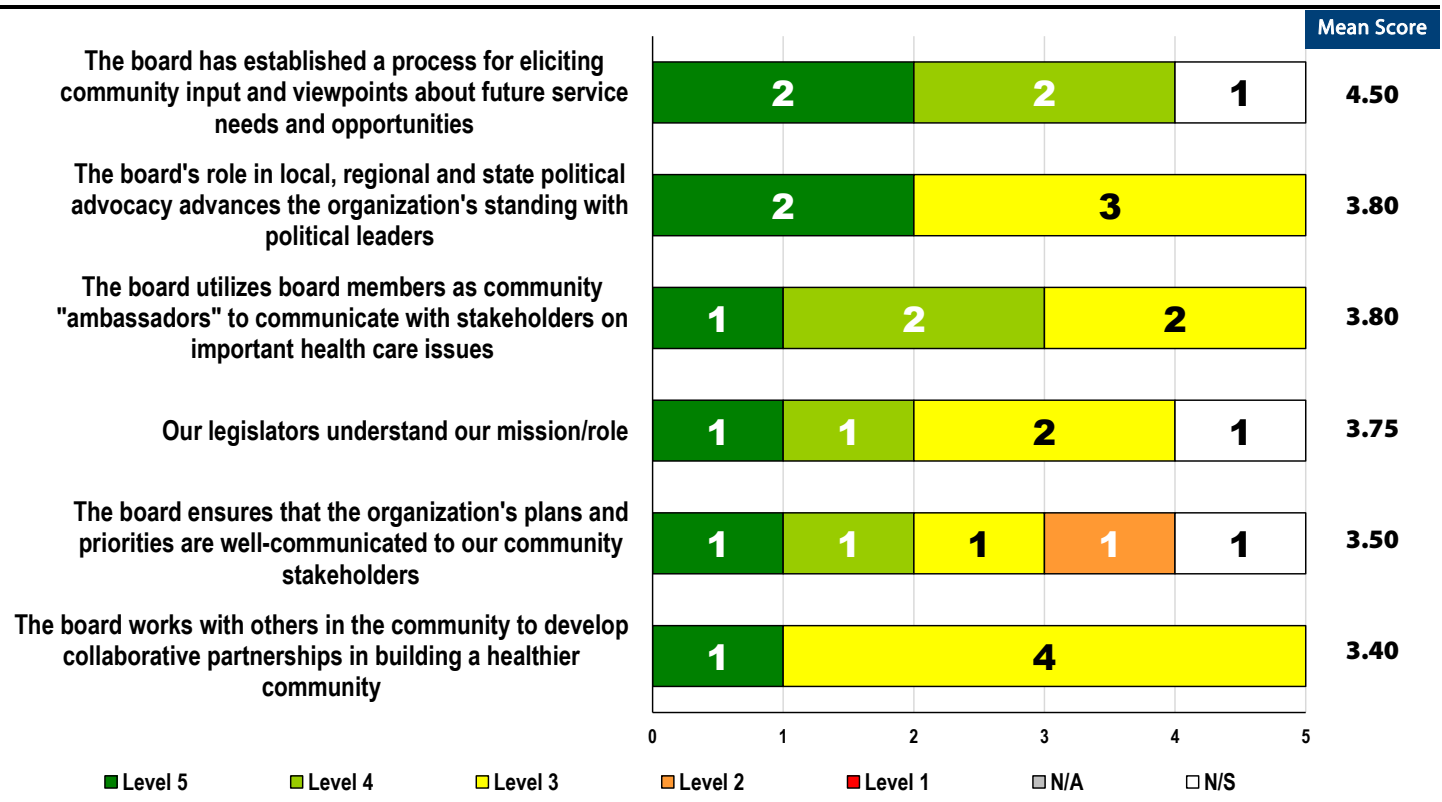
## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Community Relationships

#### Ensuring Public Trust and Confidence *(sorted by highest to lowest mean score)*



#### Ensuring Community Communication and Feedback *(sorted by highest to lowest mean score)*



# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Suggestions for Governance Improvement

Board members provided the following suggestions for governance improvement in this section:

- Much better marketing.
- Each Board member getting involved in some organization.

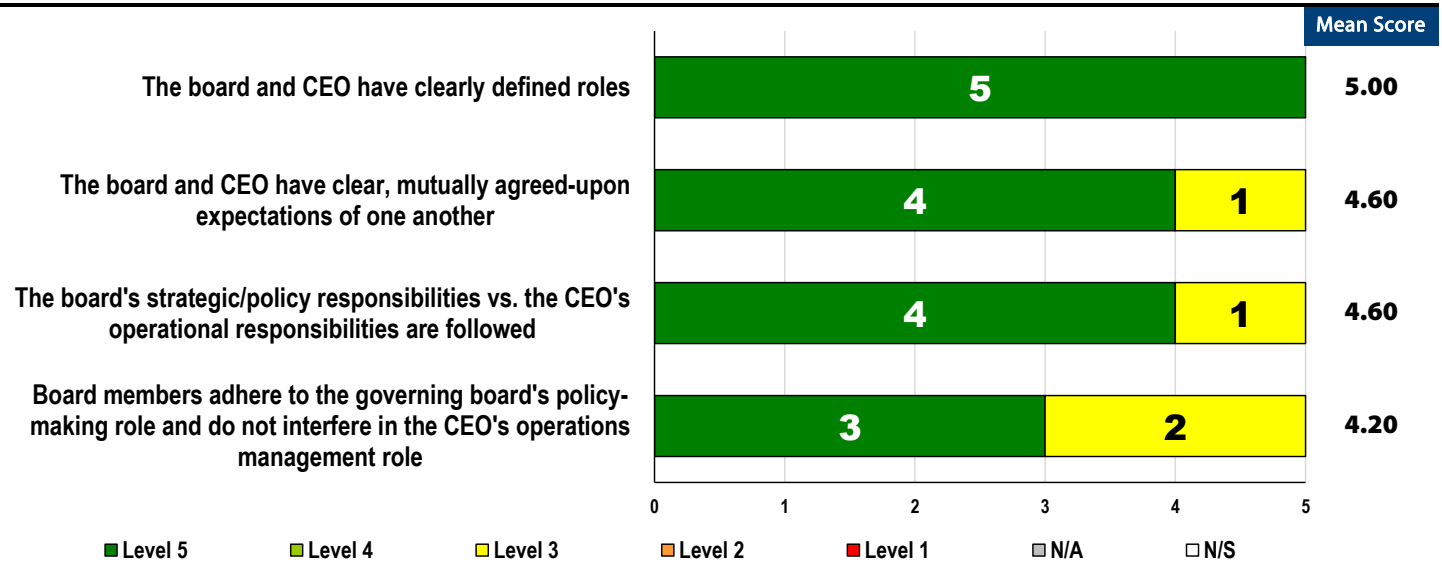
# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Relationship with the CEO

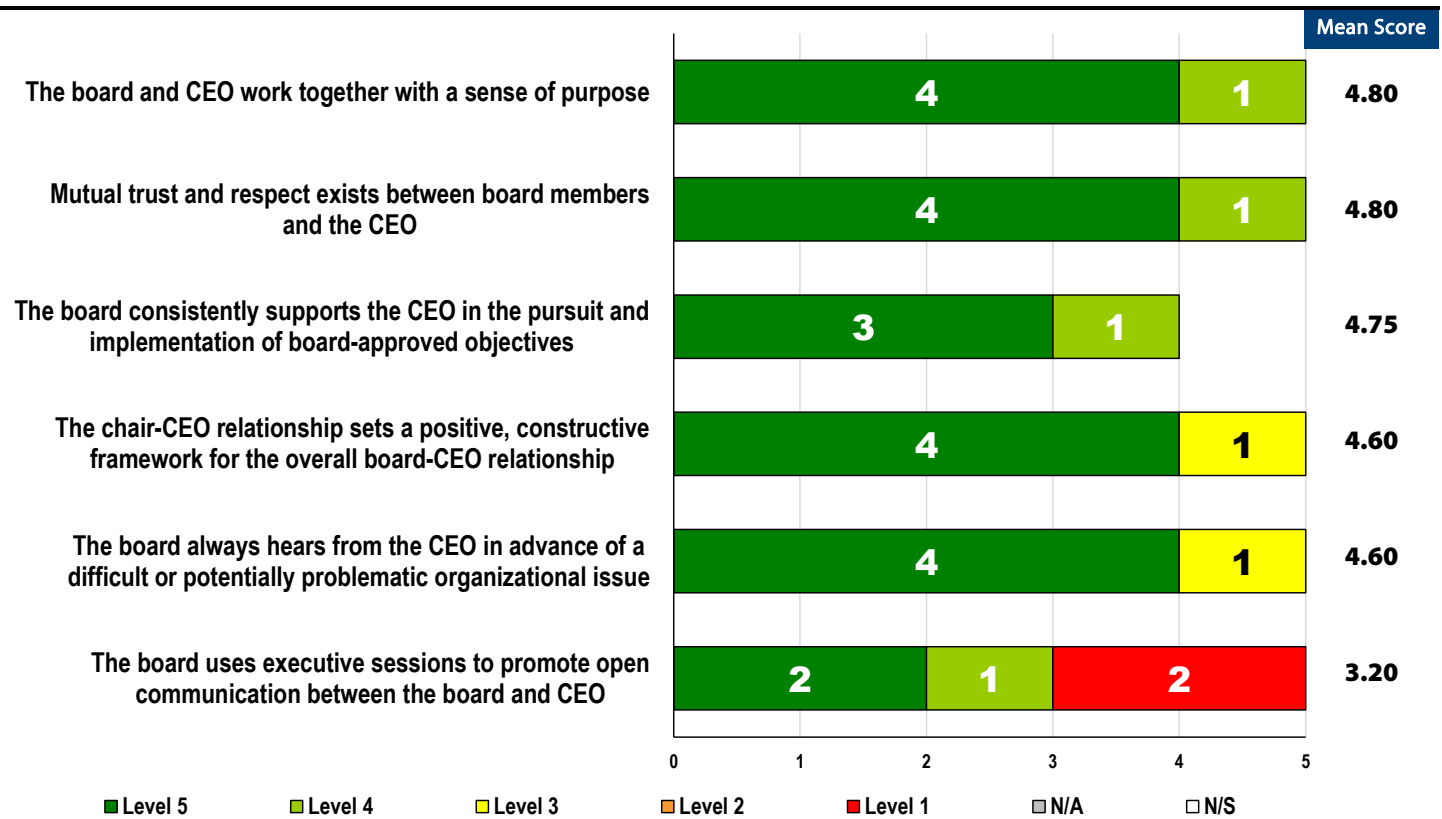
#### Board and CEO Roles

(sorted by highest to lowest mean score)



#### Communication, Support and Shared Goals

(sorted by highest to lowest mean score)



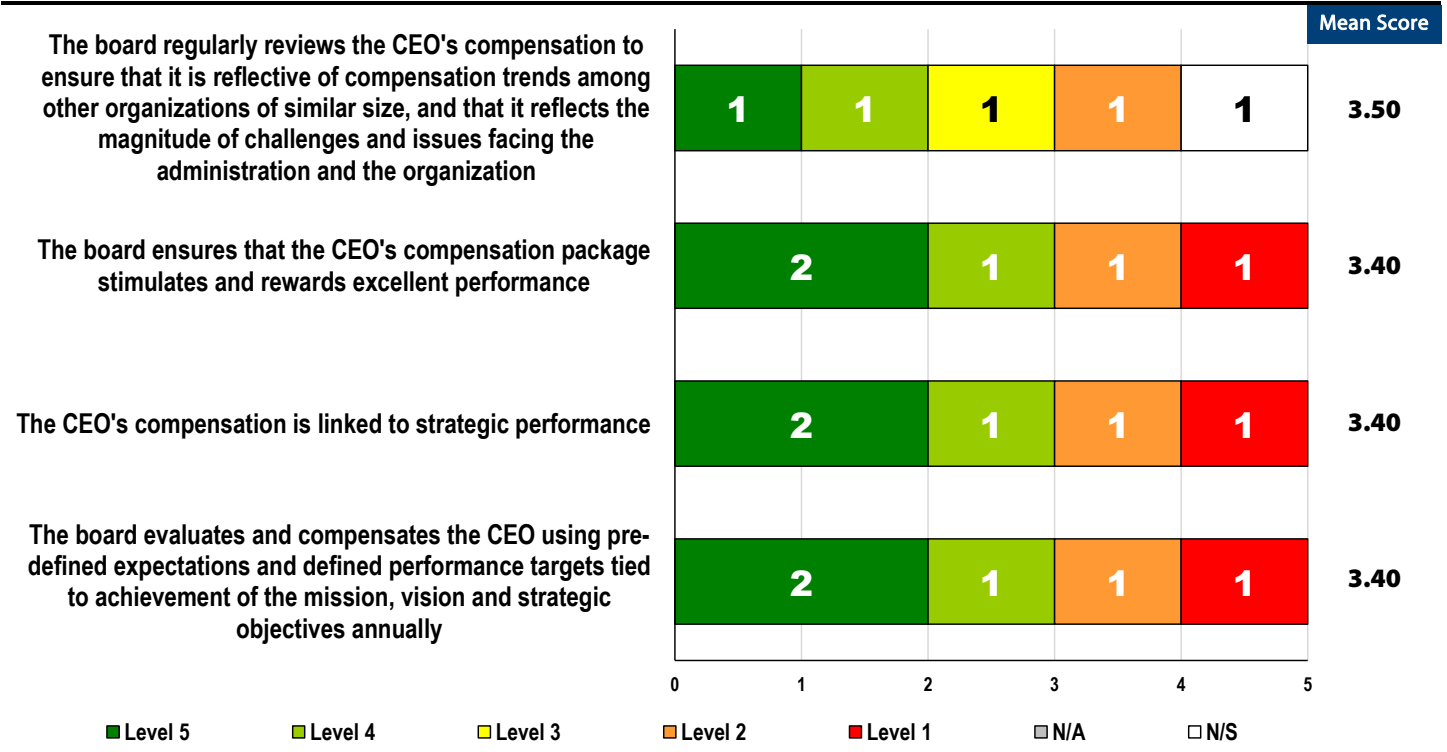


# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### CEO Evaluation

(sorted by highest to lowest mean score)



### Suggestions for Governance Improvement

Board members provided the following suggestions for governance improvement in this section:

- Having that conversation in a closed session would be helpful.
- Not sure HR regularly checks his compensation with other hospital districts of our size.

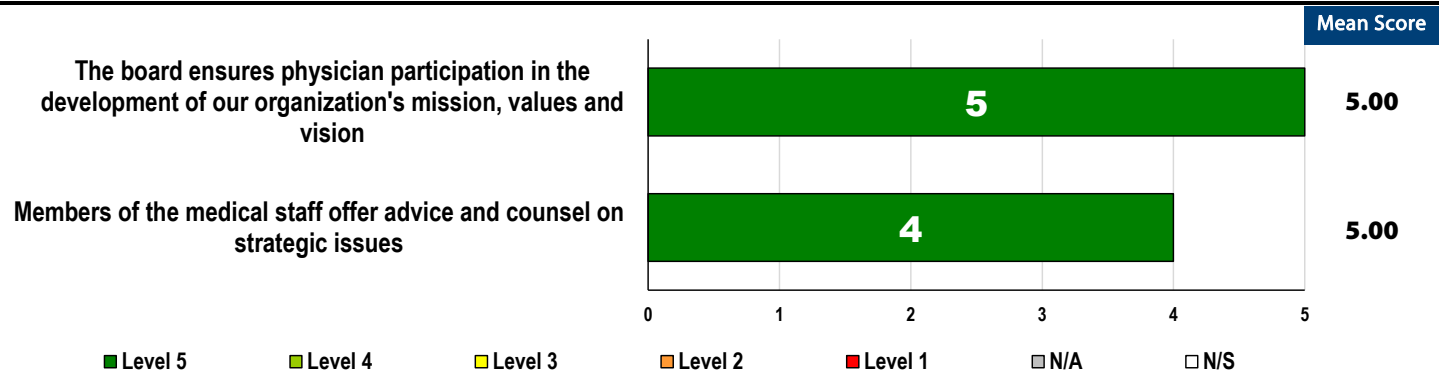
# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Relationships with the Medical Staff

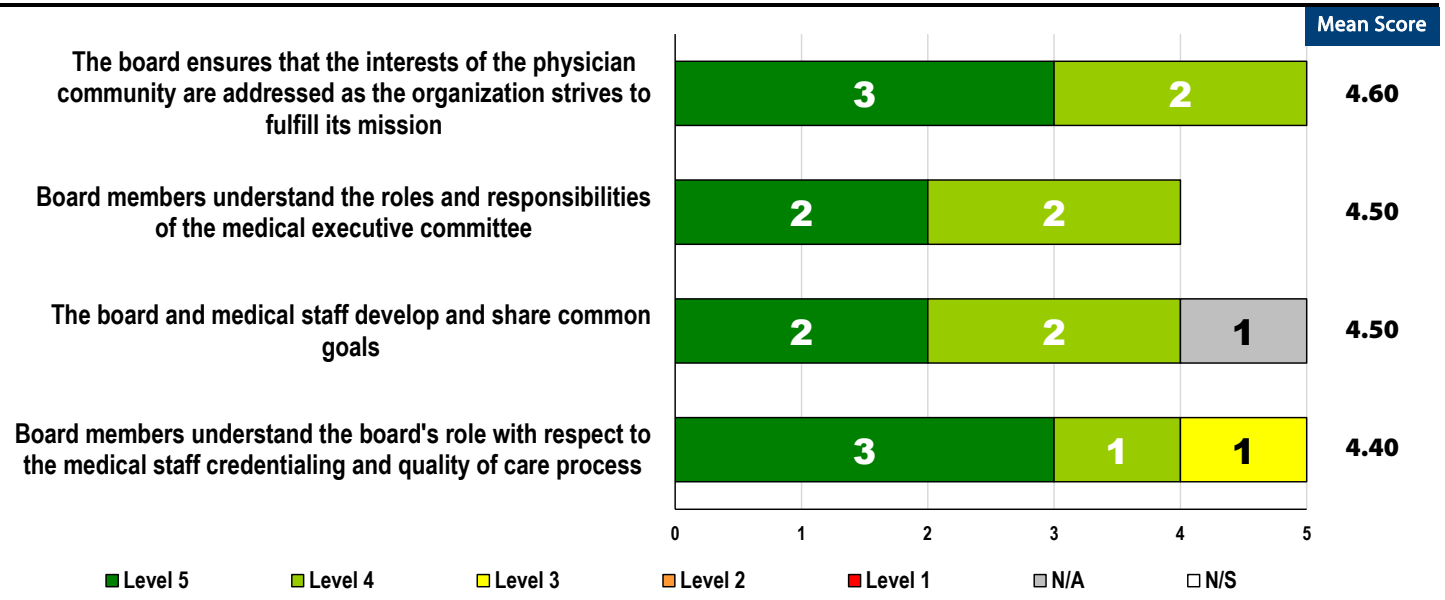
#### Physician Involvement in Decision Making

(sorted by highest to lowest mean score)



#### Shared Understanding

(sorted by highest to lowest mean score)

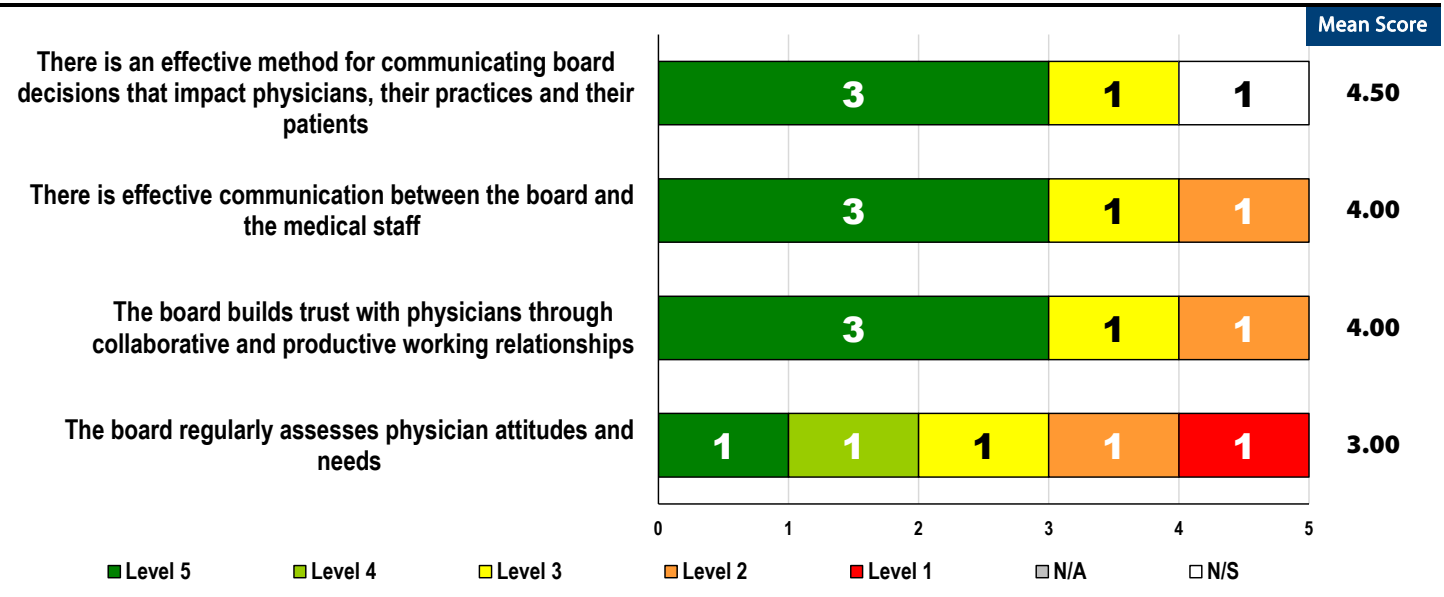


# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Communication and Interaction

(sorted by highest to lowest mean score)



### Suggestions for Governance Improvement

Board members provided the following suggestions for governance improvement in this section:

- Having the doctors present to us.
- Somehow find a way that the Board can meet with the physicians annually.

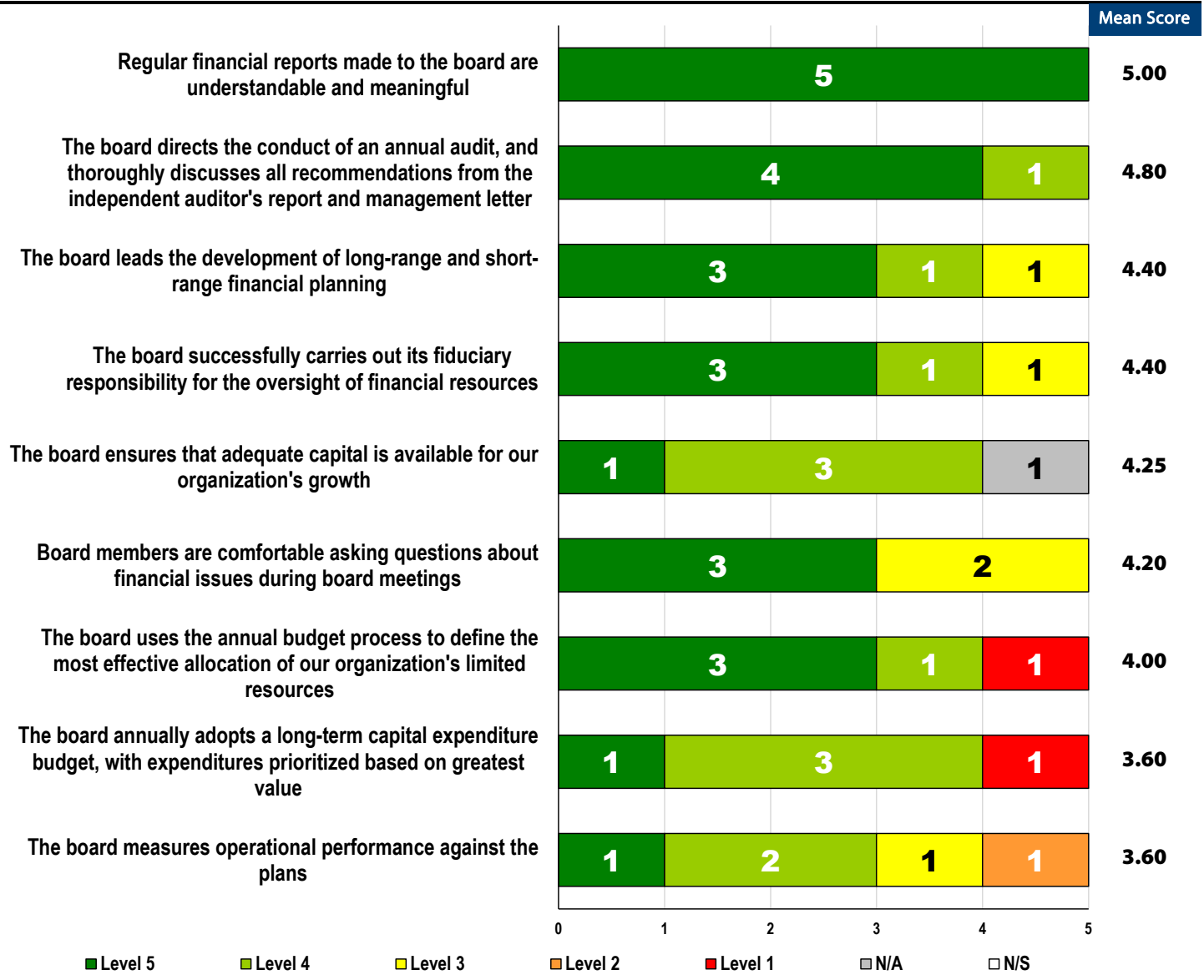
# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Financial Leadership

#### The Fiduciary Responsibility

(sorted by highest to lowest mean score)

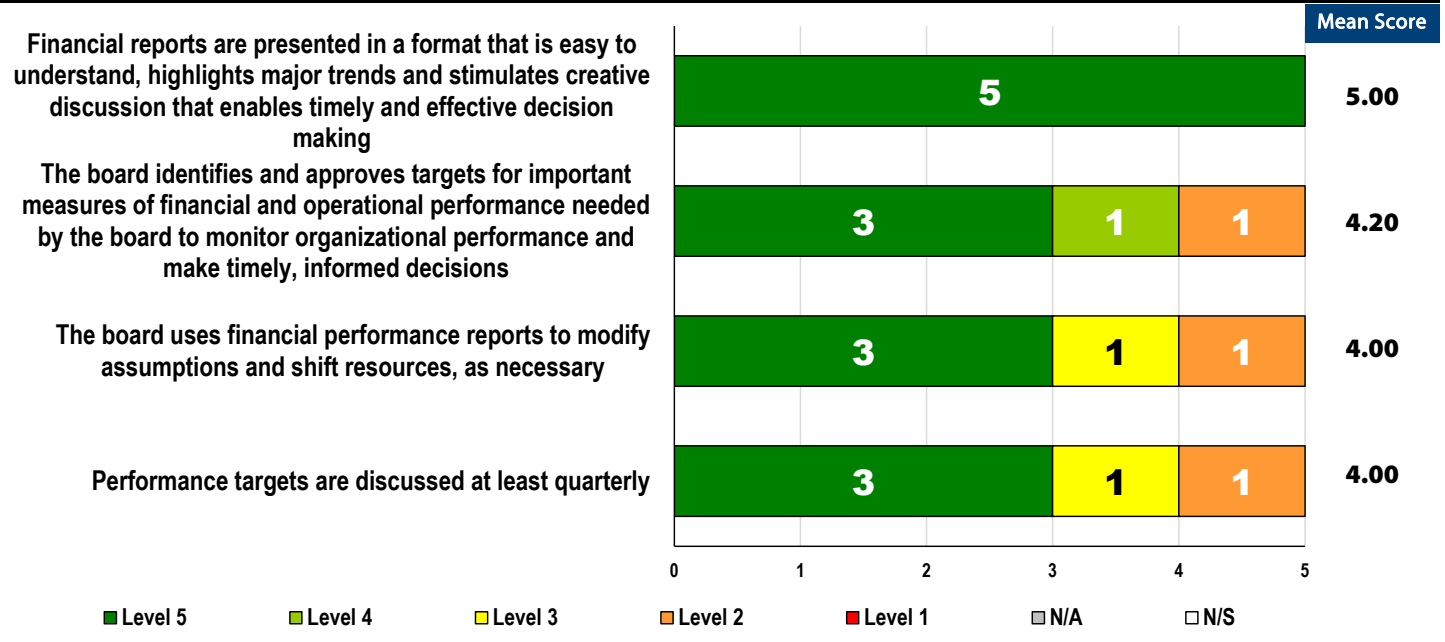


# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Monitoring Progress

(sorted by highest to lowest mean score)



### Suggestions for Governance Improvement

Board members provided the following suggestions for governance improvement in this section:

- This area has improved tremendously under our current CEO.
- Comparing us to industry standards.

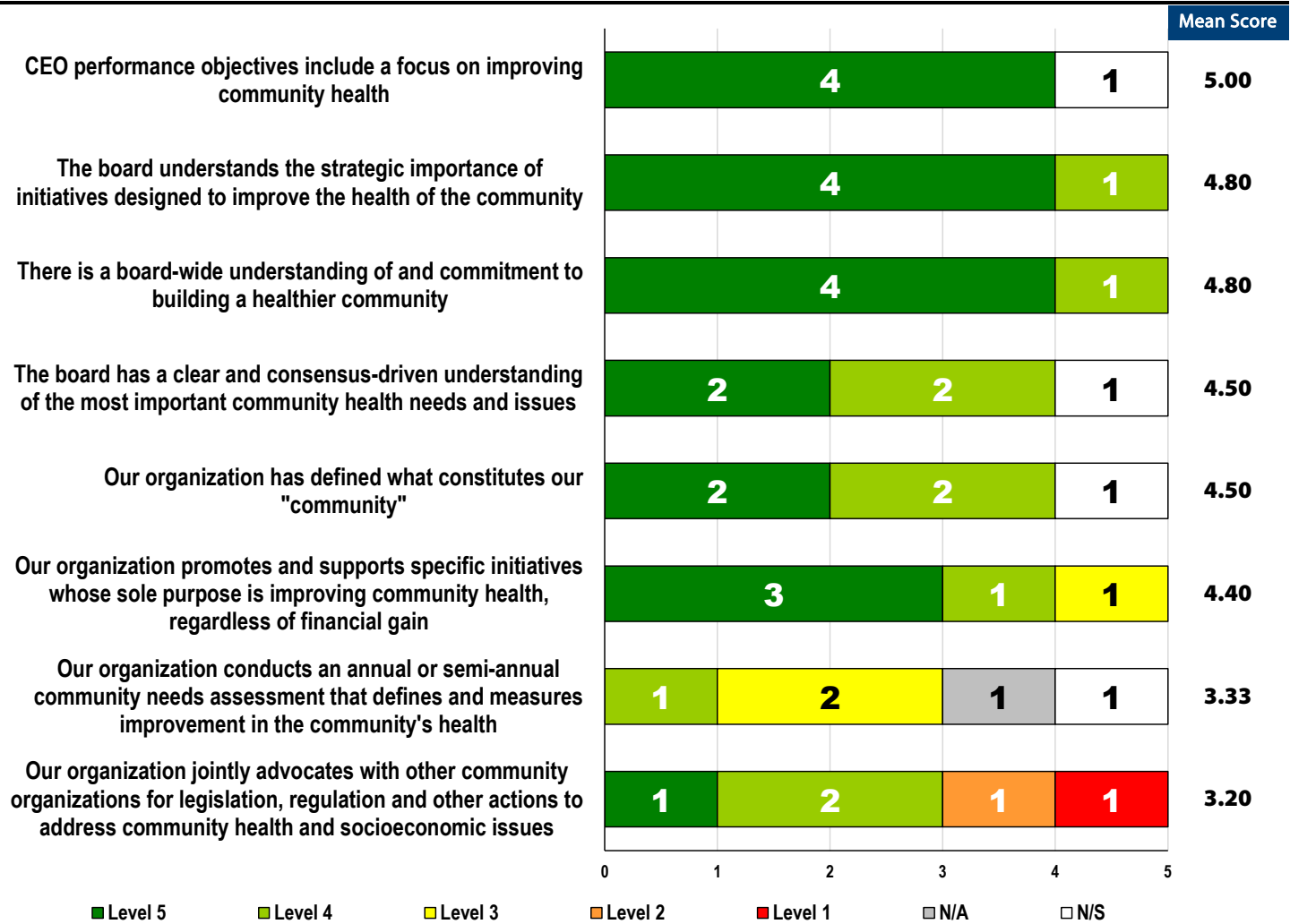
# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Community Health

#### Development and Support of Community Health Initiatives

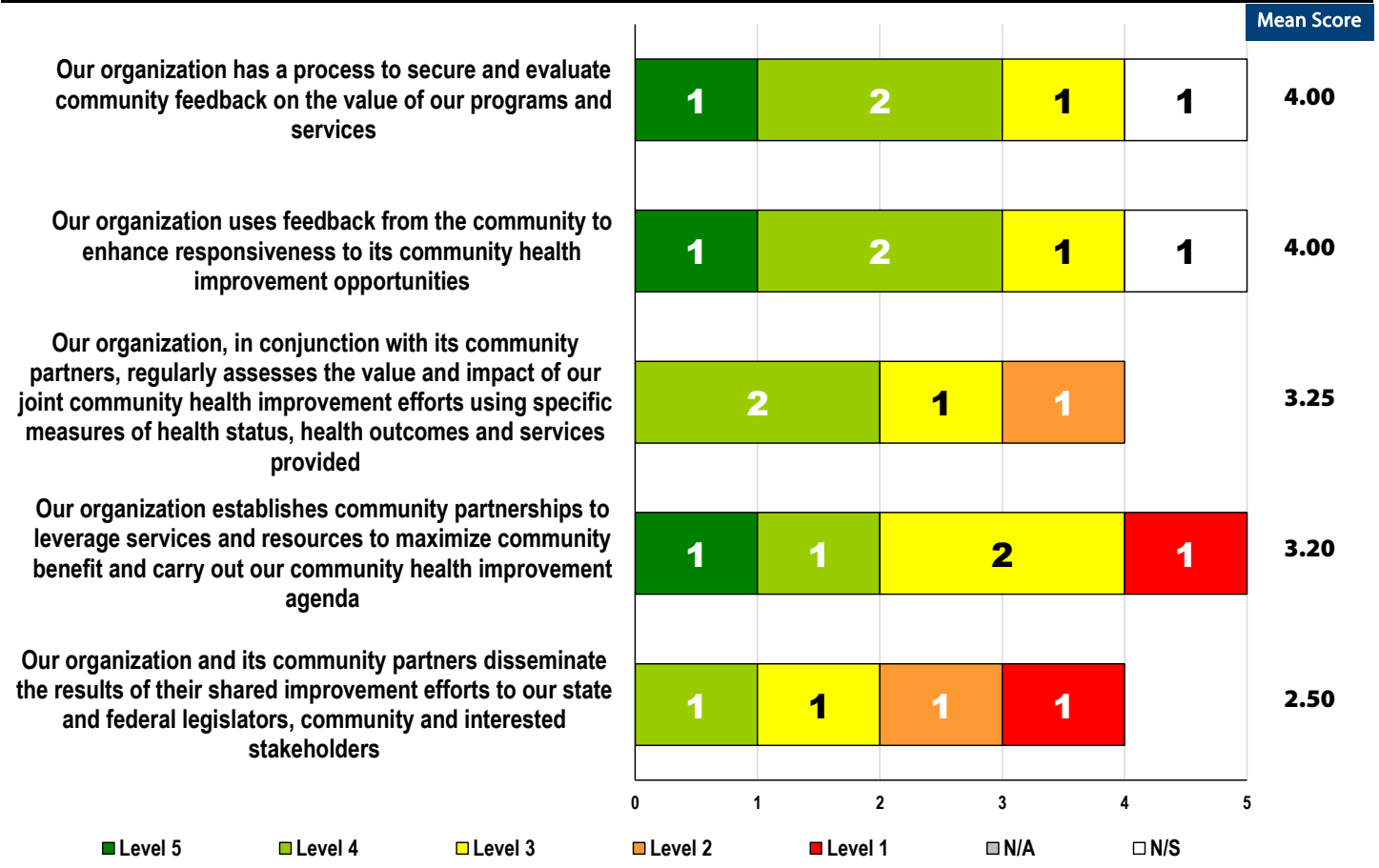
(sorted by highest to lowest mean score)



# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Community Involvement and Communication (sorted by highest to lowest mean score)



### Suggestions for Governance Improvement

Board members provided the following suggestions for governance improvement in this section:

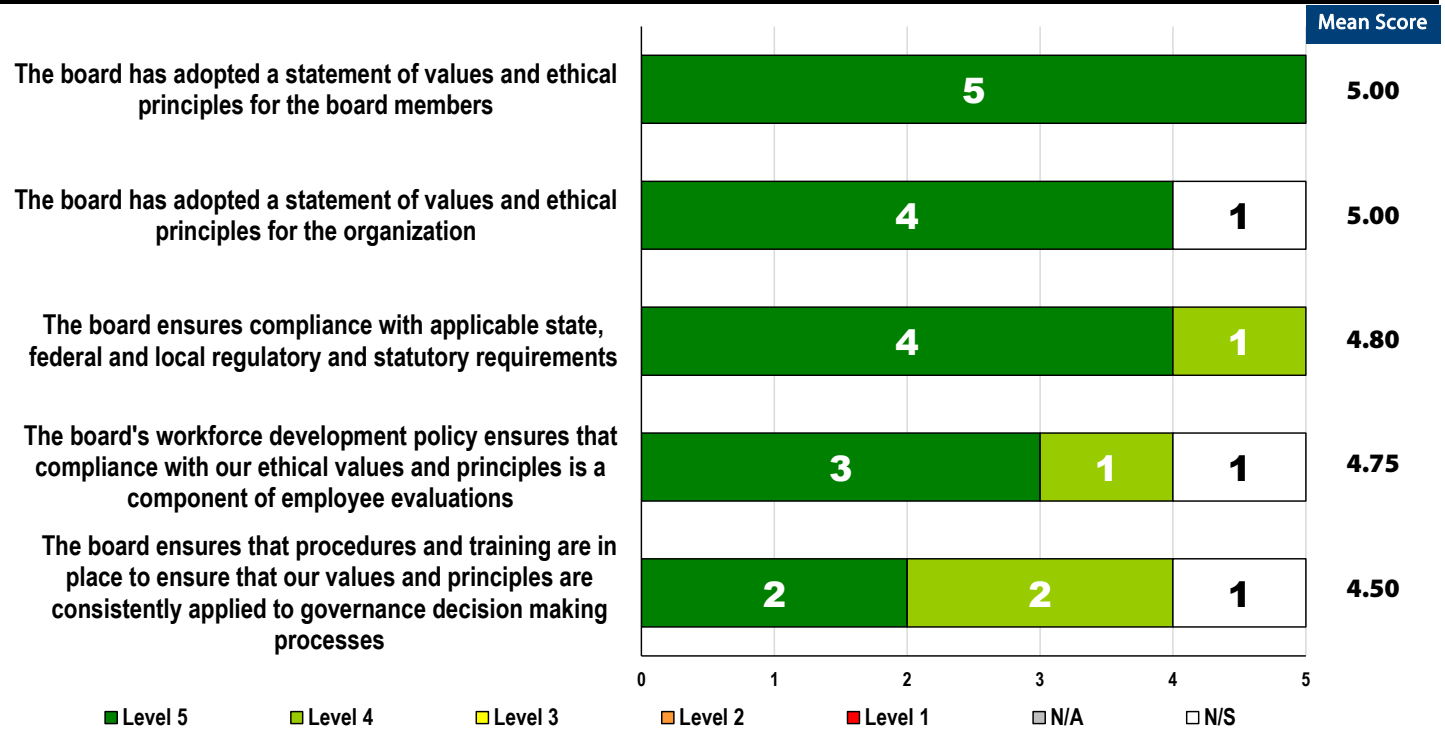
- We could work more on partnering with other entities around service delivery, gap assessment, political advocacy, etc.
- CEO has Town Halls for the community. It really allows the community to ask questions and receive answers.

# SUMMARY RESULTS

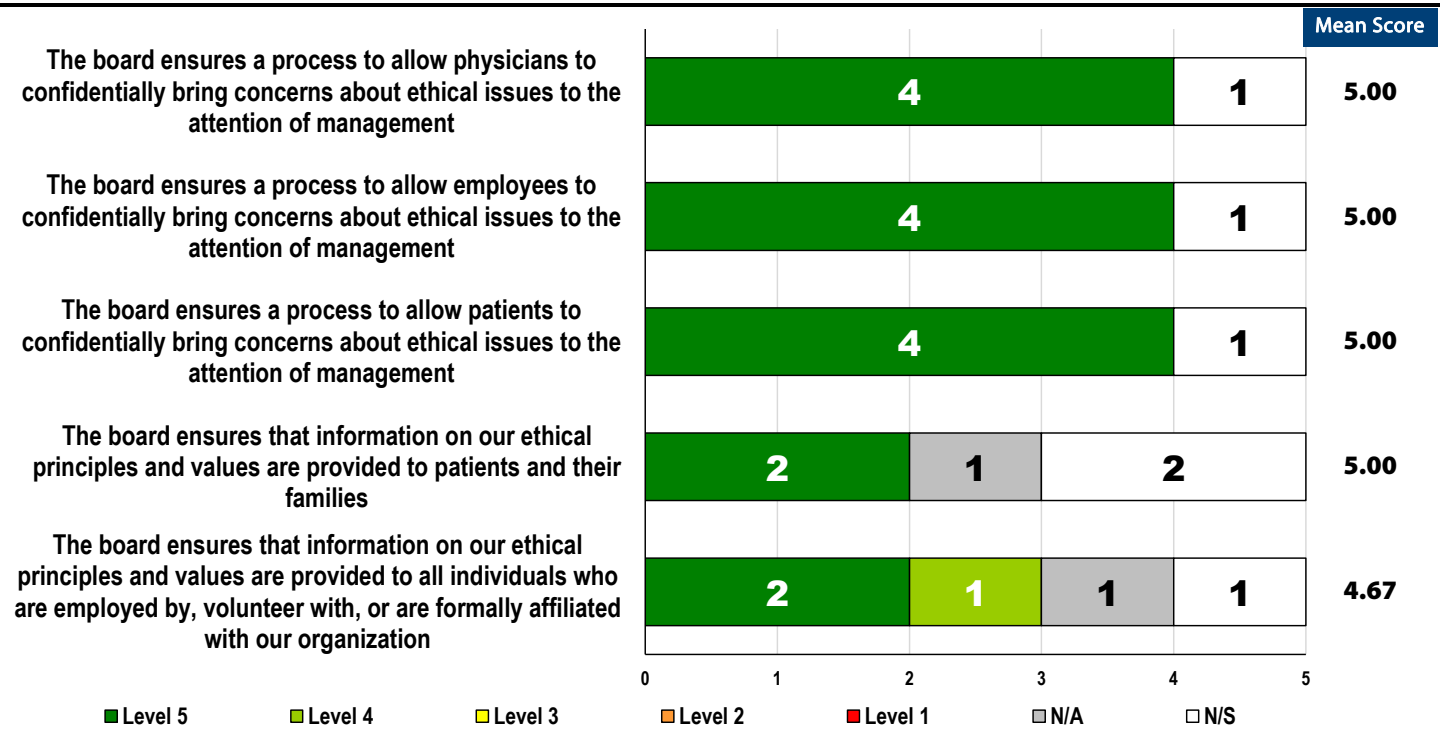
## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### Organizational Ethics

#### Ensuring Development and Implementation of Organizational Ethics (sorted by highest to lowest mean score)



#### Awareness of Ethical Issues (sorted by highest to lowest mean score)





# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

### **Suggestions for Governance Improvement**

*No comments or suggestions for governance improvement were provided in this section.*

# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

# Issues and Priorities

### Highest Priority for the Board in the Next Year

**Question: What is your single highest priority for the board in the next year?**

- Improving the cash on hand number of days!
- To get us operating at a profit.
- Keeping our doors open.
- Working with neighboring health care providers to strengthen the services available to our communities.
- To provide the best service to our community, so they aren't traveling out of town to get it.
- To turn the perception of the hospital around.
- To make sure all providers are inspired both mentally and financially in solving our financial and perception issues.
- To make sure we are not life fighting patients out unnecessarily.
- To make sure our community gets appointments in a timely manner.

### Most Significant Strengths

**Question: What are the board's most significant strengths?**

- Everyone has a different background, different priorities, and different connections in the community.
- Engaged, respectful Board members all subscribe to a culture that supports spirited discussion and disagreement, while still finding a path to consensus decision-making.
- The board is committed and there is a real enthusiasm to solving the issues together.
- There is much respect among the board members.
- Knowledge of the community and history of the hospital.
- Listening to our leadership team and the CEO putting our patients first.

### Most Significant Weaknesses

**Question: What are the board's most significant weaknesses?**

- Not finding a way to be able to discuss important issues. Brown Act seems to hamper this.
- The Brown Act.
- Different understanding of transparency.
- For the most part, this is a really good elected Board, with diverse backgrounds and areas of expertise. We could use more ethnic/racial diversity on the Board to ensure we match the population we serve.

### Key Issues for Board Focus in the Next Year

**Question: What key issues should occupy the board's time and attention in the next year?**

- Number of days of cash on hand, and ensuring the current financial trajectory continues in a positive direction.
- Financial - finding a way to raise money for an RHC building.

# SUMMARY RESULTS

## 2024 Northern Inyo Healthcare District Governance Self-Assessment

- Finances and grant opportunities.
- Partnerships for service delivery.
- Working with other health care partners.
- Looking at services needed.
- Staying abreast of patient care.
- Benchmarks of industry standards and holding the CEO accountable for the success rate in which we achieve the goals.
- Becoming more engaged with our Foundation Board members and staff.
- Greatly enhanced marketing of many of the District's operational strengths.
- Being good ambassadors.

### Significant Trends the Board Must Understand and Deal with in the Next Year

**Question: What do you see as the most significant trends that the board must be able to understand and deal with in the next year?**

- Closely monitor and provide course correction, as needed, with our fiscal picture.
- Define a path towards the goal of a new building for the RHC.
- Begin to change the community perception of our hospital services.
- Cash flow and billing
- Closing of rural hospitals.
- Partnerships.

### Critical Factors to Address to Successfully Achieve Goals

**Question: What factors are most critical to be addressed if the hospital is to successfully achieve its goals?**

- Continue to strengthen all aspects our fiscal operations and oversight (revenue cycle, collections, denials, etc.).
- Billing and providing the right services. Once the service is provided, making sure there are enough employees to service the customer. I am not happy with the negotiated days for our providers. Recruiting is going to be key.
- Finances and transparency.
- Ensuring the Foundation's Board and Executive Director are fully engaged with District goals and strategic planning, and that they set appropriate goals for ensuring our collective success.
- Following our strategic plan.
- Improve the community perception about our services.
- Keep our current CEO, CMO, and COO!