

2021-11-12 Board Governance Committee

Friday, November 12, 2021 at 10:30 a.m.

Pursuant to Assembly Bill 361, the Board Governance Committee meeting for November 12, 2021 will be conducted telephonically through Zoom.

Please be advised that pursuant to legislation and to ensure the health and safety of the public by limiting human contact that could spread the COVID-19 virus, the Eskridge Conference Room will not be open for the meeting.

Committee Members will be participating telephonically and will not be physically present in the Eskridge Conference Room.

If you would like to speak on an agenda item, you can access the meeting remotely: Please use this web link: https://tfhd.zoom.us/j/89448486841

If you prefer to use your phone, you may call in using the following numbers: (346) 248 7799 or (301) 715 8592, Meeting ID: 894 4848 6841



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GOVERNANCE COMMITTEE REVISED AGENDA

(Agenda revised on 11/9/2021 at 3:35 p.m.)

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Public comment will also be accepted by email to <u>mrochefort@tfhd.com</u>. Please list the item number you wish to comment on and submit your written comments 24 hours prior to the start of the meeting.

Oral public comments will be subject to the three minute time limitation (approximately 350 words). Written comments will be distributed to the board prior to the meeting but not read at the meeting.

1. CALL TO ORDER

2. ROLL CALL

3. CLEAR THE AGENDA/ITEMS NOT ON THE POSTED AGENDA

4. INPUT – AUDIENCE

This is an opportunity for members of the public to address the Committee on items which are not on the agenda. Please state your name for the record. Comments are limited to three minutes. Written comments should be submitted to the Board Clerk 24 hours prior to the meeting to allow for distribution. Under Government Code Section 54954.2 – Brown Act, the Committee cannot take action on any item not on the agenda. The Committee may choose to acknowledge the comment or, where appropriate, briefly answer a question, refer the matter to staff, or set the item for discussion at a future meeting.

5. <u>APPROVAL OF MINUTES OF:</u> 07/13/2021

6. ITEMS FOR COMMITTEE DISCUSSION AND/OR RECOMMENDATION

6.1. Board Governance

6.1.1. Board Self-Assessment Tool	ATTACHMENT
Governance Committee will review and discuss updating the board self-assessment to	ol.
6.1.2. Governance Committee Charter Review	ATTACHMENT
Governance Committee will review and discuss the committee's charter.	
6.1.3. Board Vacancy Interview Questions	. ATTACHMENT
Governance Committee will review and discuss interview questions used during the be	oard vacancy

process.

7. REVIEW FOLLOW UP ITEMS / BOARD MEETING RECOMMENDATIONS

8. NEXT MEETING DATE

The Governance Committee will meet again as needed.

9. ADJOURN

*Denotes material (or a portion thereof) may be distributed later.

Note: It is the policy of Tahoe Forest Hospital District to not discriminate in admissions, provisions of services, hiring, training and employment practices on the basis of color, national origin, sex, religion, age or disability including AIDS and related conditions. Equal Opportunity Employer. The telephonic meeting location is accessible to people with disabilities. Every reasonable effort will be made to accommodate participation of the disabled in all of the District's public meetings. If particular accommodations for the disabled are needed or a reasonable modification of the teleconference procedures are necessary (i.e., disability-related aids or other services), please contact the Executive Assistant at 582-3481 at least 24 hours in advance of the meeting.



GOVERNANCE COMMITTEE DRAFT MINUTES

Tuesday, July 13, 2021 at 9:30 a.m.

Pursuant to Executive Order N-08-21, issued by Governor Newsom, the Board Governance Committee meeting for July 13, 2021 will be conducted telephonically through Zoom. Please be advised that pursuant to the Executive Order, and to ensure the health and safety of the public by limiting human contact that could spread the COVID-19 virus, the Eskridge Conference Room will not be open for the meeting. Board Members will be participating telephonically and will not be physically present in the Eskridge Conference Room.

1. CALL TO ORDER

Meeting was called to order at 9:31 a.m.

2. <u>ROLL CALL</u>

Board Members: Art King, Chair; Alyce Wong, RN

Staff in attendance: Harry Weis, President and Chief Executive Officer; Crystal Betts, Chief Financial Officer; Judy Newland, Chief Operating Officer; Ted Owens, Executive Director of Governance; Martina Rochefort, Clerk of the Board

Other: Pam Knecht of ACCORD Limited

3. CLEAR THE AGENDA/ITEMS NOT ON THE POSTED AGENDA

No changes were made to the agenda.

4. <u>INPUT – AUDIENCE</u>

No public comment was received.

5. APPROVAL OF MINUTES OF: 03/02/2021

Governance Committee would like to strike list of lowest scoring items. Ted Owens, Executive Director of Governance will be added to list of staff in attendance.

Director Wong moved to approve the Board Governance Committee minutes of March 2, 2021 with the two modifications outlined, seconded by Director King.

6. ITEMS FOR COMMITTEE DISCUSSION AND/OR RECOMMENDATION

6.1. Board Governance

6.1.1. Board Self-Assessment Tool

Governance Committee reviewed and discussed the board self-assessment tool.

Pam Knecht of ACCORD Limited noted the following reasons to do a board self-assessment:

-comparison to past years

-benchmark

-identify areas to work on

If the board can determine why they are using the self-assessment, then it can be determined if there is a better tool.

The committee discussed the length of the tool. The survey could be shorter in length.

Director Wong does like the survey format and the questions touch on all of the areas the board is responsible for. Director Wong would like to modify language regarding actions of "other board members as the questions receive the most "I don't know" responses. Director Wong also suggested reviewing the questions that received an "I don't know" response and answer them at the retreat.

Questions should reference governance best practices.

President & CEO will conduct one on one meeting with board members once per year.

Director Wong suggested adding a review of the board self-assessment to new board member orientation.

Ms. Knecht offered to review the board self-assessment tool to assist the committee. Governance Committee would like to review the revised tool at the fall board retreat.

6.1.2. Board Education

Governance Committee reviewed the remaining board education topics.

Director Wong asked Ms. Knecht to look at "formal education" verbiage in the self-assessment questions.

Director Wong viewed education as global (i.e. what is happening at national and state level).

Governance Committee felt the remaining education topics were good and did not need to be updated.

6.1.3. Agenda Design

Governance Committee reviewed and discussed the current board agenda structure and content.

Director King felt the overall meeting length was fine and meetings were efficient. Director King suggested quarterly quality reports be reported every six months instead.

COO reminded the role of the board is to stay current on the District's quality matters. It is important for the quarterly reports to continue.

Ms. Knecht suggested putting as much as possible into consent agenda and creating a calendar for board education and topics.

Director King also suggested adjusting the timing of Medical Staff Credentialing approval to eliminate the start and stop nature of closed session.

Safety First was dropped from agenda because it was getting stale. It can always be added back if there was something important to address.

Ted Owens, Executive Director of Governance, reminded the committee that the Chair can add items to the consent calendar during agenda review.

6.1.4. Retreat Follow-Up

Governance Committee discussed the recent board retreat and reviewed the proposed Board Enhancement Goals.

General comments from retreat evaluations were shared with the committee. The first day of the board retreat was rushed. The Strategic Plan update took a lot of time. The board would have liked to have more time to discuss board goals.

A number of the items listed as board goals are already being worked on during this meeting.

The goal on community health needs may need to be revised to say "educate" board. Leadership can do more to educate board on this topic.

Ms. Knecht and COO may be able to create a linkage between suggested goals and what is already planned for strategic plan. Ms. Knecht will revise the language so it is more consistent with board goals. This can be the start of the discussion at the retreat.

6.1.5. Governance Committee Goals

Governance Committee discussed committee goals.

Director King suggested the following committee goals:

-Schedule meetings for the year

-Schedule policies to be updated

-Review board agendas

-Revise self-assessment tool

-Develop an education calendar

Director Wong reminded the charter helps guide the committee's work.

Ms. Knecht agreed that a work plan would be a good way to show the rest of the board what the committee will work on.

Pam Knecht departed the meeting at 11:12 a.m.

6.2. Policy Review

Governance Committee reviewed and discussed the following policies:

6.2.1. Conflict of Interest Policy, ABD-07

General Counsel reviewed and provided edits on Conflict of Interest Policy, ABD-07.

Governance Committee did not have any additional edits.

6.2.2. New Programs and Services, ABD-18

General Counsel reviewed and provided edits on the New Programs and Services policy.

Governance Committee did not have any additional edits.

6.2.3. Board of Director Qualifications, ABD-04

General Counsel reviewed and provided edits but recommended the board consider retirement of the policy as the content is reflected in other policies.

The Committee agreed with General Counsel's recommendation to retire Board of Directors Qualifications, ABD-04 policy.

7. REVIEW FOLLOW UP ITEMS / BOARD MEETING RECOMMENDATIONS

Board policies will go to the full board next week for approval.

8. NEXT MEETING DATE

The Governance Committee will meet again before the next board retreat.

9. ADJOURN

Meeting adjourned at 11:22 a.m.

ACCORD LIMITED ORGANIZATIONAL CHANGE, STRATEGY AND GOVERNANCE

TAHOE FOREST HEALTH SYSTEM 2021 BOARD SELF-ASSESSMENT OCTOBER 29, 2021

Introduction

We look forward to the November 12, 2021, meeting of the Tahoe Forest Health System (TFHS) Governance Committee (GC) regarding the Board Self-Assessment (BSA) process and tool for 2021. The meeting will be conducted via Zoom and will take place from 10:30 am to 12:00 pm PT.

This document includes our assumptions about the desired BSA modifications, the draft work plan and schedule, and the proposed BSA introduction and questions. Once the GC agrees on the questions to be included in the BSA, **ACCORD** LIMITED (**ACCORD**) will develop the BSA in SurveyMonkey.

Preparation Assignment

Please review this document and come ready to discuss the following questions:

- 1. What, if any changes are needed to the assumptions regarding the needed modifications?
- 2. Do the work plan and timeline seem appropriate? If not, what needs to be changed?
- 3. What, if any, modifications do you have to the suggested BSA questions or introduction (e.g., additional areas to cover)?
- 4. How do you suggest the new Board member be engaged in the BSA process?

Assumptions About Assessment Modifications

During the July 13[,] 2021, meeting of the GC, the following desired modifications to the existing BSA tool were requested:

- Incorporate governance best practices.
- Revisit the number of questions to decrease time needed to complete the survey.
- Focus on key Board responsibilities and functions.
- Retain questions in each Board responsibility that are easiest to measure.
- Clarify the questions to facilitate response (e.g., adding examples).
- Utilize open-ended questions to garner qualitative comments.
- Ensure the ability to benchmark against assessment results from previous year.

As you review the revised BSA tool, please keep in mind that questions #1-16 were taken from the 2020 survey to allow benchmarking. Questions #17-23 were developed to cover new focus areas. A *Comments* section will be added to select questions.

Work Plan and Timeline

Here are the process steps and suggested timing of the overall project:

- October 14-22: Modify BSA to include approximately 25 questions using a Likert scale with the following response options: 1. Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree and 0 (zero) Don't Know
- October 22: Send proposed BSA to Ted Owens and Martina Rochefort for review
- October 27: Convene Zoom meeting with Ted Owens, Martina Rochefort, Pam Knecht and Joel Emrich to review draft BSA questions and work plan
- October 29: Send revised BSA questions and work plan to Ted and Martina
- **November 5:** Send revised BSA questions, work plan, and preparation questions to GC
- **November 12:** Convene GC and Harry, Crystal, Judy, Ted, Martina, Pam, Joel via Zoom to review/comment on modified BSA and work plan
- November 15-29: Finalize BSA and draft cover letter based on GC feedback
- **December 6-17:** Distribute BSA to Board electronically; encourage response within 14 days; send reminder(s); collect responses confidentially
- December 20 January 4: Analyze results and develop a report including graphic summary of results; quantitative ratings; 2020 results comparison; key themes from comments; ACCORD's observations and suggestions for enhancements. Also develop Power Point presentation to guide discussion on areas for improvement and relevant governance best practices for February 15-16, 2022, Board Retreat discussion
- January 4: Send the above to Ted and Martina for their review
- January 6: Meet with Ted and Martina to review the draft report
- January 11: Provide the final report and PowerPoint to the GC in preparation for their meeting
- January 18 or 19: Convene a Zoom meeting with GC to finalize report and presentation in preparation for Board Retreat
- February 8: Provide report to the Board in preparation for the Retreat
- **February 15 or 16 (2-4 hours)**: Present findings and facilitate discussion and action planning resulting in a limited number of Board Enhancement Goals
- March 2: Provide brief report including Board Enhancement Goals identified

Tahoe Forest Health System Draft 2021 Board Self-Assessment

Introduction

The purpose of this survey is to enable the assessment of Board performance as a whole in the following key focus areas and benchmark against 2020 results.

Focus Areas (In Alpha Order):

1.	Audit	7. CEO Performance	13. Qualitative
2.	Board Chair	8. Community	comments
	Performance	Health	14.Quality
3.	Board	9. Compliance	15.Risk
	Culture/Dynamics	10. Finance	16. Role of the Board
4.	Board	11.Legal	17.Strategy
	Education/Orientation	12. Mission	
5.	Board		
	Meetings/Materials		
6.	Board		
	Policies/Procedures		

<u>Scale</u>

Please use the following scale to answer each question:

- 1 Strongly Disagree
- 2 Disagree
- 3 Neutral
- 4 Agree
- 5 Strongly Agree
- 0 Don't know

The survey should take approximately 20 minutes to complete and all responses are considered confidential. Please contact Pam Knecht at pknecht@accordlimited.com with any questions.

Thank you.

Proposed Questions

- 1. The Board uses the following Mission statement to guide its decision making: "We exist to make a difference in the health of our communities through excellence and compassion in all we do."
- 2. The Board receives education on strategic external and internal environmental issues and trends at least once a year.
- 3. The Board has a formal plan for ongoing Board education.
- 4. The Board demands corrective action in response to underperformance on the quality and service goals (e.g., patient experience).
- 5. The Board annually approves the organization's compliance program/plan.
- 6. The Board regularly reviews the organization's performance against community health needs to ensure it is meeting its obligations as a healthcare district.
- 7. The Board monitors the organization's financial performance compared to its plans and relevant industry benchmarks.
- 8. The full Board is knowledgeable about the organization's audit and compliance performance.
- 9. All Board members respect the distinction between the role of the Board and the role of management.
- 10. There is a clear process in place for setting the CEO's annual goals.
- 11. Board meeting frequency and duration are appropriate.
- 12. The Board Chair runs Board meetings effectively. (Note to the GC: Should we add "respecting board members, staff and the public"?)
- 13. The Board has an effective orientation program in place for all new Board members.
- 14. Board members receive materials with sufficient time for review prior to meetings (e.g., in alignment with best practice of 4-7 days prior to meetings).
- 15. All Board members feel comfortable voicing opinions of concern regardless of how sensitive the issue may be.
- 16. The Board has in place sufficient written Board-level policies and procedures (e.g., written expectations, conflict of interest, code of conduct including confidentiality).

- 17. The Board is provided sufficient opportunities to engage in strategic discussion (e.g., in retreats, mini-retreats, educational sessions).
- 18. The Board is kept up to date on the results of enterprise risk management assessments (e.g., fire, cybersecurity, reputational, regulatory, operational).
- 19. Committees contribute effectively to the work of the Board (e.g. committee work is aligned with Board priorities; committees tee up discussions for the Board).
- 20. The Board as a whole is an effective working group (e.g., listens well, uses consensus decision making, is respectful of one another in deliberations, etc.)
- 21. What suggestions do you have to improve the effectiveness and efficiency of the Board?
- 22. What additional information or education do you need to help you as a Board member?

Introduction

Welcome to the Tahoe Forest Healthcare District 20XX Board Self-Assessment questionnaire. Responses to this survey will be used in conjunction with the board member interviews conducted by Via Healthcare Consulting to develop an assessment report that includes a prioritized list of issues, and recommendations for board consideration to be discussed at the upcoming Board Retreat. This survey will be administered electronically by sending an e-mail to board members that includes a secure link to the Survey Monkey website where board members will enter their responses to the questions. Answers will be sent only to Via Healthcare Consulting.

Instructions to Board Members Completing the Survey

Completing the survey will take approximately 30 minutes. You do not have to complete the survey in one sitting. You can close the survey at any time and return later to the section where you stopped by returning to the invitation email and clicking on the link again. However, once you have clicked "submit survey" on the final page, you will not be allowed to return to make changes.

Your candid responses are a key part of continued enhancement and improvement for the board; we encourage you to be honest and direct. Individual responses will *not* be shared; information gathered will be used in the aggregate only. Do not hesitate to indicate you "Don't Know" to any question if in fact you don't know. Also use the "Don't Know" answer if it is not clear to you how the board handles the practice. If a question refers to a practice that the board does not follow, please indicate "Not Applicable." When in doubt about your choice, select the more conservative response (e.g. if your response falls somewhere between "Strongly Agree" and "Agree," select "Agree.") It is important to note that this assessment process was designed to gauge the effectiveness and efficiency of the Board as a whole, not of the individual Board members.

Use the "Comments" field at the end of each section to explain your answers, particularly for those which you answered 'Neutral', 'Disagree', 'Strongly Disagree' or 'Don't Know.' There is also a final comments section included at the end of the survey and we encourage you to use this to provide any general feedback you may have on the survey. Individual phone interviews to be conducted after this survey will allow you to provide additional clarification if necessary. Written comments will be kept anonymous and confidential.

If you have any questions, please contact Karma Bass (760-814-8578, kbass@viahcc.com) or Erica Osborne (760-683-8303, eosborne@viahcc.com) at **Via Healthcare Consulting**. Thank you in advance for your time and thoughtful responses.

This survey is broken down into the following areas of board responsibilities/activities:

- Section I Mission and Planning Oversight: Setting Strategic Direction
- Section II Quality Oversight: Monitoring Service, Safety and Quality
- Section III Legal and Regulatory Oversight: Ensuring Organizational Integrity
- Section IV Finance and Audit Oversight: Following the Money
- Section V Management Oversight: Enhancing Board-Executive Relations

Section VI Board Effectiveness: Optimizing Board Functioning

Section I Mission and Planning Oversight: Setting Strategic Direction

		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know	Not Applicable
1.	There is consensus about and clear understanding of the organization's Mission.	5	4	3	2	1	DK	NA
2.	Board members appear to be in agreement on the purpose of the organization and why it exists.	5	4	3	2	1	DK	NA
3.	The board uses the Mission statement to guide its decision- making.	5	4	3	2	1	DK	NA
4.	The board is appropriately involved in establishing the organization's strategic direction (e.g. creating a long-range vision, setting strategic priorities, and developing/approving the strategic plan).	5	4	3	2	1	DK	NA
5.	The board spends a sufficient amount of time in its meetings on strategic (vs. operational) issues.	5	4	3	2	1	DK	NA
6.	The board monitors management's implementation of the strategic plan on a regular basis.	5	4	3	2	1	DK	NA
7.	The board receives education on strategic, external and internal environmental issues and trends at least once a year.	5	4	3	2	1	DK	NA

Section II	Quality Oversight: Monitoring Service, Safety and Quality
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	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know	Not Applicable
8. The board is well-informed about the quality of care and patient safety provided by TFHD.	5	4	3	2	1	DK	NA
 The board receives adequate information regarding quality improvement programs undertaken at TFHD. 	5	4	3	2	1	DK	NA
 The board oversees setting annual goals for the organization's performance on quality and service. 	5	4	3	2	1	DK	NA
 The board receives adequate information regarding quality improvement programs undertaken at TFHD. 	5	4	3	2	1	DK	NA
 The board demands corrective action in response to under-performance on the quality and service goals. 	5	4	3	2	1	DK	NA
 All board members receive education at least once a year on the Board's responsibilities for quality oversight and/or TFHD's quality metrics. 	5	4	3	2	1	DK	NA

Section III	Legal and Regulatory Oversight: Ensuring Organizational Integrity
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		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know	Not Applicable
14.	The board has knowledge of all reasonably available and relevant information before taking action on any significant issue.	5	4	3	2	1	DK	NA
15.	All board members adhere to TFHD board policies.	5	4	3	2	1	DK	NA
16.	All board members adhere to their duty of loyalty to the organization ahead of the interests of any particular constituency group.	5	4	3	2	1	DK	NA
17.	All board members keep closed-session board discussions confidential.	5	4	3	2	1	DK	NA
18.	The board members responsible for overseeing executive compensation all are 'independent' (i.e. free from any conflicts of interest).	5	4	3	2	1	DK	NA
19.	The board annually approves the organization's compliance program/plan.	5	4	3	2	1	DK	NA
20.	The board regularly reviews the organization's performance against community health needs to ensure it is meeting its obligations as a healthcare district.	5	4	3	2	1	DK	NA

Section IV	Finance and Audit Oversight: Following the Money
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		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know	Not Applicable
	The board establishes realistic financial goals and objectives for the organization.	5	4	3	2	1	DK	NA
	The board monitors the organization's financial performance compared to its plans and relevant industry benchmarks.	5	4	3	2	1	DK	NA
	The board demands corrective action in response to under- performance on the financial and capital plans.	5	4	3	2	1	DK	NA
	The full board is adequately informed of the organization's current financial position.	5	4	3	2	1	DK	NA
t	The board members responsible for audit oversight meet with the external auditors, without management present, at least annually.	5	4	3	2	1	DK	NA
	The full board is knowledgeable about the organization's audit and compliance performance.	5	4	3	2	1	DK	NA

Section V Management Oversight: Enhancing Board-Executive Relations

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know	Not Applicable
27. All board members respect the distinction between the role of the board and the role of management.	5	4	3	2	1	DK	NA
28. The board currently has a productive working relationship with the CEO.	5	4	3	2	1	DK	NA
29. All board members ask appropriately challenging questions of the CEO and senior management.	5	4	3	2	1	DK	NA
30. There is a clear process in place for setting the CEO's annual goals.	5	4	3	2	1	DK	NA
31. The full board participates in the annual evaluation and review of the CEO's performance.	5	4	3	2	1	DK	NA
32. The full board approves all elements of the CEO's compensation.	5	4	3	2	1	DK	NA
 Individual board members invest time between board meetings to keep current and assist the CEO and other board members, as requested. 	5	4	3	2	1	DK	NA

Section VI Board Effectiveness: Optimizing Board Functioning

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know	Not Applicable
34. The board has set written expectations of its members regarding attendance, committee service, etc.	5	4	3	2	1	DK	NA
35. The board meeting frequency and duration are appropriate.	5	4	3	2	1	DK	NA
36. The board chair runs board meetings effectively.	5	4	3	2	1	DK	NA
37. The board has an effective orientation program in place for all new board members.	5	4	3	2	1	DK	NA
38. All board members come to meetings well prepared to discuss agenda items.	5	4	3	2	1	DK	NA
39. The board members receive materials with sufficient time for review.	5	4	3	2	1	DK	NA
40. All board members display professional courtesy and respect when interacting with other board members.	5	4	3	2	1	DK	NA
41. All board members feel comfortable voicing opinions of concern regardless of how sensitive the issue may be.	5	4	3	2	1	DK	NA
42. The board has in place sufficient written board-level policies and procedures.	5	4	3	2	1	DK	NA
43. The board has a formal plan for on-going board education.	5	4	3	2	1	DK	NA

Additional Comments

Please include any additional comments you may have below. These comments (as well as this entire questionnaire's responses) will be kept confidential and anonymous.

Conclusion

Thank you for your contributions and commitment to TFHD Healthcare. Your time, dedication, and experience serving TFHD's mission are tremendously valued. Thank you for also taking the time to complete this survey.

If you have any questions about the survey questions or the process, please contact Karma Bass (760-814-8578, kbass@viahcc.com) or Erica Osborne (760-683-8303, eosborne@viahcc.com) at Via Healthcare Consulting. Thank you again.

<u>Charter</u>

Governance Committee Board of Directors Tahoe Forest Hospital District

Purpose:

The purpose of this document is to define the charter of the Governance Committee of the District's Board of Directors and, further, to delineate the Committee's duties and responsibilities.

Responsibilities:

The Governance Committee of the Board shall function as a standing committee of the Board responsible for addressing all governance-related issues. The Committee shall develop, maintain, and implement the necessary governance-related policies and procedures that define the Hospital's governance practices.

Duties:

- 1. Conduct at least a biennial review of the Bylaws and Board policies.
- 2. Submit recommendations to the Board of Directors for changes to Bylaws and Board policies as necessary.
- 3. Develop new Board policies and procedures as necessary or as directed by the Board of Directors.
- 4. Advance best practices in board governance.
- 5. Ensure the annual board self-assessment is conducted no later than December 1.
- 6. Ensure a board goal setting process is conducted no later than April 30 and reviewed at the October board retreat.

Composition:

The Committee shall be comprised of two (2) Board members appointed by the Board Chair.

Meeting Frequency:

The Committee shall meet as needed.

Candidate Questions

**Refer to each candidate's Statement of Interest and Qualifications for their reason(s) for interest in serving as a Board Member and details of experience, training, education, and/or background that would bring value to the Board.

Questions provided to candidates in advance

Do you currently own, invest in or sit on a board of any competing health care entities?

Do you have the availability to meet the time requirements to serve on this board?

Do you do any business within the District?

Have you had any relationships with Tahoe Forest Hospital District in the past? (business or committees?)

Have you attended or watch any of the TFHD board meeting?

Questions to be asked at interview

What qualities do think make an effective board member?

What achievement in your work/board experience are you most proud?

What in your view should be the focus health issue the district should be addressing to improve the health of the community?

What thoughts would you have if a resident, patient, family member contacted you regarding what he/she sees as a healthcare/service problem with an expectation that as a director you can fix it?

What do you see as a significant challenge for the hospital district in providing health care and services to the community?

What has your experience with strategic planning for an organization?