



REGULAR MEETING OF THE BOARD OF DIRECTORS MINUTES

Thursday, March 28, 2024 at 4:00 p.m.
Tahoe Forest Hospital – Eskridge Conference Room
10121 Pine Avenue, Truckee, CA 96161

1. CALL TO ORDER

Meeting was called to order at 4:00 p.m.

2. ROLL CALL

Board: Alyce Wong, Board Chair; Mary Brown, Secretary; Dale Chamblin, Treasurer; Robert (Bob) Barnett, Board Member

Staff in attendance: Harry Weis, President & Chief Executive Officer; Matt Mushet, In-House Counsel; Dylan Crosby, Director of Facilities Management & Construction; Martina Rochefort, Clerk of the Board

Other: Mackenzie Anderson, General Counsel

Absent: Michael McGarry, Vice Chair

3. DELETIONS/CORRECTIONS TO THE POSTED AGENDA

No changes were made to the agenda.

4. INPUT AUDIENCE

No public comment was received.

Open Session recessed at 4:02 p.m.

5. CLOSED SESSION

5.1. Report Involving Trade Secrets (Health & Safety Code § 32106)

Discussion will concern: Proposed new facilities

Estimated Date of Disclosure: December 2025

Discussion was held on a privileged item.

5.2. Approval of Closed Session Minutes

5.2.1. 02/22/2024 Regular Meeting

Discussion was held on a privileged item.

5.3. Report Involving Trade Secrets (Health & Safety Code § 32106)

Discussion will concern: Proposed new services

Estimated Date of Disclosure: December 2024

Discussion was held on a privileged item.

5.4. TIMED ITEM – 5:30PM - Hearing (Health & Safety Code § 32155)

Subject Matter: Medical Staff Credentials

Discussion was held on a privileged item.

5.5. Hearing (Health & Safety Code § 32155)

Subject Matter: Quality Evaluation Summary Report

Discussion was held on a privileged item.

6. DINNER BREAK

7. OPEN SESSION – CALL TO ORDER

Open Session reconvened at 6:05 p.m.

8. REPORT OF ACTIONS TAKEN IN CLOSED SESSION

General Counsel noted there were five items considered in Closed Session. There was no reportable action on item 5.1. Item 5.2. Closed Session Minutes were approved on a 4-0 vote. Item 5.3. had no reportable action. Item 5.4. Medical Staff Credentials and item 5.5. Quality Evaluation Summary Report were both approved on a 4-0 vote.

9. DELETIONS/CORRECTIONS TO THE POSTED AGENDA

No changes were made to the agenda.

10. INPUT – AUDIENCE

Public comment was received from Dr. Jeffrey Fountain, Deirdre Henderson, and Dr. Tenille Bany.

11. INPUT FROM EMPLOYEE ASSOCIATIONS

No public comment was received.

12. MEDICAL STAFF EXECUTIVE COMMITTEE

12.1. Medical Executive Committee (MEC) Meeting Consent Agenda

MEC recommended the following for approval by the Board of Directors:

Policies – No Changes:

- *Quality Assessment/Performance Improvement (QA/PI) Plan*
- *Utilization Review Plan*
- *Risk Management & Patient Safety*
- *Discharge Planning, ANS-238*
- *Infection Control Plan*
- *Emergency Operations Plan, AEOC-17*
- *Emergency Management Plan, AEOC-14*
- *Medication Error Reduction Plan*
- *Trauma Performance Improvement Plan*
- *Home Health Quality Plan*
- *Hospice Quality Plan*
- *Employee Health Plan*

Policies with Changes:

- *Available CAH Services, AGOV-06*

New Policies:

- *Management of Disruptive Behavior, AGOV-2401*

Discussion was held.

No public comment was received.

ACTION: Motion made by Director Barnett to approve the Medical Executive Committee Meeting Consent Agenda as presented, seconded by Director Brown.

AYES: Directors Barnett, Chamblin, Brown and Wong

Abstention: None

NAYS: None

Absent: McGarry

13. CONSENT CALENDAR

13.1. Approval of Minutes of Meetings

13.1.1. 02/22/2024 Regular Meeting

13.2. Financial Reports

13.2.1. Financial Report – February 2024

13.3. Board Reports

13.3.1. President & CEO Board Report

13.3.2. COO Board Report

13.3.3. CNO Board Report

13.3.4. CMO Board Report

13.3.5. CIO Board Report

13.4. Approve Board Policies

13.4.1. Board Compensation and Reimbursement, ABD-03

13.4.2. Conflict of Interest, ABD-07

13.4.3. New Programs and Services, ABD-18

13.4.4. President & CEO Succession Policy, ABD-28

13.5. Approve Annual Quality Assurance Performance Improvement Plan

13.5.1. Quality Assurance Performance Improvement Plan, AQPI-05

13.6. Annual Policy Approval

13.6.1. Available CAH Services, TFH & IVCH, AGOV-06

ACTION: Motion made by Director Chamblin to approve the Consent Calendar as presented, seconded by Director Brown.

AYES: Directors Barnett, Chamblin, Brown and Wong

Abstention: None

NAYS: None

Absent: McGarry

14. ITEMS FOR BOARD DISCUSSION

14.1. Chief of Staff Update on Dyad Leadership Structure

Dr. Johanna Koch, Chief of Staff, provided an update on dyad leadership. Discussion was held.

Public comment was received from Dan Coll.

14.2. High Reliability Certification Update

Alex MacLennan, Chief Human Resources Officer, provided an update on the District’s High Reliability certification. Discussion was held.

15. ITEMS FOR BOARD ACTION

15.1. Fiscal Year 2024 Down Payment Assistance Program Increase

The Board of Directors reviewed and considered approval of an increase to the Fiscal Year 2024 Down Payment Assistance program. Discussion was held.

ACTION: Motion made by Director Chamblin to increase the spending limit to \$1,100,000 for the Fiscal Year 2024 Down Payment Assistance Program, an increase of \$200,000, as presented, seconded by Director Brown.
AYES: Directors Barnett, Chamblin, Brown and Wong
Abstention: None
NAYS: None
Absent: McGarry

16. DISCUSSION OF CONSENT CALENDAR ITEMS PULLED, IF NECESSARY

Not applicable.

17. BOARD COMMITTEE REPORTS

Director Wong shared a report from the March 5, 2024 Governance Committee meeting.

18. BOARD MEMBERS REPORTS/CLOSING REMARKS

Director Chamblin requested a presentation on the outcomes of emergency tests.

19. CLOSED SESSION CONTINUED

Not applicable.

20. OPEN SESSION

Not applicable.

21. REPORT OF ACTIONS TAKEN IN CLOSED SESSION, IF NECESSARY

Not applicable.

22. ADJOURN

Meeting adjourned at 6:58 p.m.