



BOARD OF DIRECTORS
BOARD MEETING MINUTES

AGENDA ITEM	DISCUSSIONS/CONCLUSIONS	ACTIONS/FOLLOW-UP/ RESPONSIBLE PARTY
PRESENT AT MEETING:	<p>Board Members: John Mohun, President; Larry Long, Vice President; Karen Sessler, M.D., Secretary; Dale Chamblin, Treasurer; Roger Kahn, Board Member</p> <p>Staff: Bob Schapper, Chief Executive Officer; Virginia Razo, PharmD, Chief Operating Officer; Crystal Betts, Chief Financial Officer; Janet Van Gelder, Director, Quality & Regulations; Judy Newland, CNO/IVCH Administrator; Michelle Cook, Executive Assistant</p> <p>Others: Steve Gross, Legal Counsel; Bill Abalona, Legal Counsel; Joe Deluca, IT Optimizers, Consultant; Gina Barta, M.D., Chief of Staff</p>	
1. Call to Order	Mr. Mohun called the meeting to order at 4:01 p.m.	
2. Roll Call	The Roll Call reflected that all Board members were present.	
3. Clear the Agenda/Items Not On the Posted Agenda	The agenda was cleared. No changes were made to the posted agenda.	
4. Input -- Audience Employee Associations	Audience input was asked, but none was offered.	
5. Closed Session:	The meeting proceeded into closed session at 4:02 p.m.	
A. Approval of closed session minutes of 2/25/14	A copy of the attachment is in the closed session packet.	<u>It was moved by Dr. Sessler and seconded by Mr. Long to approve the closed session minutes of 2/25/14 with minor changes. Motion carried unanimously.</u>
B. California Government Code Section 54956.9(d)(2): Potential Litigation (1 Case)	No discussion was held.	
C. California Government Code	Mr. Abalona and Mr. Deluca joined the meeting for this agenda	



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Section 54956.9(d)(4): Deciding whether to initiate litigation (1 Case)	item.	
D. Health & Safety Code Section 32155: Quality Report	Ms. Van Gelder and Ms. Newland joined the meeting for this agenda item.	
E. Government Code Section 54957: Chief Executive Officer Monthly Performance Evaluation	Discussion was held.	
F. Health & Safety Code Section 32155: Medical Staff Credentials	Dr. Barta joined the meeting for this agenda item. Dr. Barta presented the Medical Staff credentials as recommended for approval by the Medical Staff Executive Committee.	<u>It was moved by Mr. Kahn and seconded by Mr. Long to approve the Medical Staff Credentials items 1-2 on the Medical Staff Executive Committee agenda and listed in the closed session minutes, as presented and recommended for approval by the Medical Staff Executive Committee. Motion carried unanimously.</u>
6. Dinner Break	A dinner break was taken at 5:42 p.m.	
7. Open Session Call To Order	Mr. Mohun called the open session to order at 6:15 p.m.	
PRESENT FOR OPEN SESSION:	Board Members: John Mohun, President; Larry Long, Vice President; Karen Sessler, M.D., Secretary; Dale Chamblin, Treasurer; Roger Kahn, Board Member Staff: Bob Schapper, Chief Executive Officer; Virginia Razo, PharmD, Chief Operating Officer; Crystal Betts, Chief Financial Officer; Paige Thomason, Director, Marketing & Communications; Janet Van Gelder, Director, Quality and	



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	<p>Regulations; Linda Harman, Director, Surgical Services; Rick McConn, Director, Facilities; Mike Geney, Consultant; Alex MacLennan, Non-Clinical Educator; Gail Betz, Compliance Officer; Rebekah Shurtleff, Director, Children’s Center; Martha Simon, Director, Fund Development; Michelle Cook, Executive Assistant</p> <p>Others Present: Steve Gross, Legal Counsel; Joe Deluca, Consultant, IT Optimizers; Member of the Public, Gaylan Larson; Member of the Public, Lynne Larson; Pam Hobday, Orthopedic Advisory Council Chair</p>	
<p>8. Clear The Agenda/Items Not on the Posted Agenda</p>	<p>The agenda was cleared. No changes were made to the posted agenda.</p>	
<p>9. Input Audience</p>	<p>Audience input was asked.</p> <ul style="list-style-type: none"> • A member of the public introduced herself as Lynn Larson. She had her mammogram at 10:00 a.m. in the morning at Tahoe Forest Hospital. She was forced to walk through the parking lot to Briner Imaging because the sidewalk was blocked off for construction. She wrote a letter in January to the Board and the CEO voicing her concern and had recommended two parking spots for Briner Imaging patients be added into the parking plan. She is disappointed and discouraged that no one responded to her concerns and that she did not receive an acknowledgement for her letter; • Mr. Mohun responded that he appreciated Ms. Larson bringing her concerns to the Board’s attention. He indicated that parking has been tough because of the construction projects. He had not been copied on the letter. He and the Board will follow-up with management and a response will be made to Ms. Larson; • A member of the public introduced himself as Gaylan 	



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	<p>Larson. He asked about the December Finance Quarterly Report for 2013. He noted that the report showed the ICU admissions/hospital admission/total ultrasound exams all have decreased over the past nine years. Hospital expenses have doubled over this period with flat or decreasing services. He said the response by the Board was to have another increase in fees. ACOs reduce costs instead of using hospitals. With new Board members coming into office this may be a good time to relook at this topic;</p> <ul style="list-style-type: none"> • Mr. Mohun thanked Mr. Larson for his public comment. 	
10. Input From Employee Associations	Employee Associations input was asked, but none was offered.	
11. Medical Staff Report	Dr. Barta was not present to give a Medical Staff Report.	
A. Approval of Medical Staff Consent Agenda		<p><u>It was moved by Mr. Kahn and seconded by Dr. Sessler to approve agenda items 1-2 on the Medical Staff Consent Agenda. The motion was passed unanimously.</u></p>
<p>12. Consent Calendar:</p> <p>A. Minutes of Meetings of: 2/25/14</p> <p>B. Financial Report – February 2014</p> <p>C. Approval of Materials Management Policies</p>	Mr. Mohun asked if there were any items that need to be pulled from the consent calendar. No items were pulled.	<p><u>It was moved by Mr. Kahn and seconded by Mr. Long to approve Consent Agenda items 12 (A)–(C). A roll call vote was taken:</u></p> <p><u>Dr. Sessler, Aye,</u></p> <p><u>Mr. Mohun, Aye,</u></p> <p><u>Mr. Long, Aye,</u></p> <p><u>Mr. Chamblin, Aye,</u></p>



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		<p><u>Mr. Kahn, Aye.</u> <u>The motion was passed</u> <u>unanimously.</u></p>
<p>13. Executive Officer's Report A. Chief Operating Officer's Report B. Chief Nursing Officer's Report C. Incline Village Community Hospital Administrator's Report</p>	<p>Mr. Schapper stated in addition to his written Chief Executive Officer's Report:</p> <ul style="list-style-type: none"> • Commentary on Exos, formerly Athletes Performance, will be discussed in closed session at a different date. With Mr. Long on board with the Orthopedic Advisory Council's (OAC) business planning, the Board will be updated on these activities. <p>Ms. Razo gave the Chief Operating Officer's Report:</p> <ul style="list-style-type: none"> • Management and staff have been working with Jacobus Consulting on an evaluation and improving the revenue cycle process with goals and benchmarks. The kick-off meeting was successful; • 30 members of management and 3 physicians attended additional Just Culture training. Management will look to revise systematically the policies and procedures; • Under Ms. Van Gelder's leadership, management and staff are preparing for the upcoming Healthcare Facilities Accreditation Program (HFAP) survey. A small group of management are working on mock surveys; • Another big project is to identify the next steps for the Electronic Medical Records (EMR) optimization and stabilization. <p>Ms. Newland was not in attendance to give the Chief Nursing Officer's Report and IVCH Administrator's Report.</p>	
<p>14. Infection Control Update</p>	<p>Ms. Holmer stated that her Infection Control written report is in</p>	



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	<p>the Board packet. She asked if there were additional areas the Board would like her to track. Discussion was held on high touch areas such as keyboard and monitors. Ms. Holmer informed the Board that Staff are directed to clean these areas on a routine basis; however, according to the Center for Medicare and Medicaid Services (CMS), they are not high risk areas;</p> <ul style="list-style-type: none"> • Discussion was held on the process of tracking and reporting of employee falls through workers compensation and Occupational Health; • A brief discussion was held on immunizations and the percentage being lower this year since it was a mild flu season. 	
<p>15. Wellness Neighborhood Report</p>	<p>Mr. Schapper stated that Caroline Ford, Executive Director, Wellness Neighborhood was unable to attend this meeting. Her written report is included in the Board packet. Dr. Sessler, Ms. Ford, and Mr. Schapper will be meeting to discuss and coordinate for the next Wellness Neighborhood Update; A brief discussion was held on creating a reporting mechanism that would be meaningful for the Board;</p> <ul style="list-style-type: none"> • Dr. Sessler gave an update on the community response to the draft of questions. She reviewed the questions with the Board; <ul style="list-style-type: none"> ○ It was questioned if the five areas initially approved are what the community needs five years later; ○ It was noted that from the previous questions used from last time there is some data can be used for benchmarking; ○ Discussion was held; • Mr. Schapper said this will be completed by summer. We 	



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	<p>did a new needs assessment and used a mechanism to use evidenced based education to set priorities and report to the Board. Ms. Schneider still works for us on a part time basis and she owns the community organization piece. The Board will be engaged in the process so the outcomes of this Board take us to the next level. Dr. Sessler is engaged with the community to bring back to them the value associated with the tax dollar being spent.</p>	
<p>16. Board Committee Reports/ Recommendations</p>		
<p>A. Finance Committee – 3/25/14 a. Review Finance Committee Goals - 2014</p>	<p>Mr. Chamblin stated:</p> <ul style="list-style-type: none"> • The Finance Committee met today; • The February Report is in the consent agenda; • The volumes mimic the ski resorts; • The committee was impressed b the Jacobus Consulting presentation on the revenue cycle; • Mr. Schapper said there will be an educational session for the Board on the revenue cycle process; • Discussed Finance Committee goals but will defer until they have completed the strategic goals for the entire Board; • The committee recommended staying for three years with the Audit Firm -Matson and Isom and to shift the auditor to have a fresh set of eyes. 	
<p>17. Items for Board Discussion And/ Or Action</p>		
<p>A. Appointment of Compliance Officer</p>	<p>Mr. Mohun recommended Appointment of Gail Betz as the Compliance Officer. Discussion was held; Ms. Betz stated that she has Bachelors degrees in Clinical Psychology/ Sociology and Nursing and a law degree from Loyola Law School. She is currently certified in clinical nurse</p>	<p><u>It was moved by Dr. Sessler and seconded by Mr. Long to Appoint Gail Betz, RN, JD as the Compliance Officer for TFHD. A roll call vote was</u></p>



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	<p>management and was certified previously in the process of Healthcare Compliance in reinstating. Her nursing background is primarily in ICU and as a Hospital Supervisor. She has a varied background in clinical research trials and infection control compliance. She was out-house council for a while and worked as medical malpractice defense. Most recent work experience is in risk and claims compliance. She is interested in working in a small place and is very impressed with the team. Her goal is a successful and robust compliance program. She will be bringing education to the Board.</p>	<p><u>taken:</u> <u>Dr. Sessler, Aye,</u> <u>Mr. Mohun, Aye,</u> <u>Mr. Long, Aye,</u> <u>Mr. Chamblin, Aye,</u> <u>Mr. Kahn, Aye,</u> <u>The motion was passed</u> <u>unanimously</u></p>
<p>B. Orthopedic Advisory Council Update</p>	<p>Ms. Hobday gave an Orthopedic Advisory Council (OAC) Update, highlights as follows:</p> <ul style="list-style-type: none"> • The presentation is in the Board packet; • The new working name is Tahoe Lifestyle and Sports Center; • She reviewed their Position Statement and Elevator Speech in order to speak about who they are. Discussed how they differentiate themselves; • Explained the Collaboration and Education flow chart. Carl Gerlach, Consultant, has been doing a lot of business modeling with their efficiencies. The OAC is very impressed with our orthopedic surgeons; • Discussed collaboration with Exos (formerly Athletes Performance); • Explained the Subcommittee Structure; • She briefly updated the Board on the Business Modeling Committee and the next steps; • Benchmarking Best Practices were discussed; • Branding Sub Committee has established a collaborative relationship with High Fives and want to integrate 	



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	<p>Navigation model with ours. Continue to build a branch architecture that will differentiate us locally and regionally, especially with second home owners;</p> <ul style="list-style-type: none"> • Economic Development/ Community Outreach Subcommittee – Group put a plan together and will come back to the Board as a plan before launching it; • Innovation and Technology Subcommittee. Scope is to invent technology that does not exist. Presentation will be made in closed session; <p>Discussion was held on:</p> <ul style="list-style-type: none"> • The challenges both the orthopedics and OAC will have with fee for service; • The OAC funding – The funding will be freestanding through capital partner and/or a venture partnership; • There will need to be rethinking on how we deliver certain services and how to adapt new systems; <p>Mr. Long commented that he attended the Business Modeling all day meeting. He indicated there is a lot of talent, energy, and creative thought process going on at these meetings.</p>	
<p>C. Facilities Development Plan and Other Hospital Projects Quarterly Update</p>	<p>Mr. McConn stated in addition to the Facilities Development Plan written report:</p> <ul style="list-style-type: none"> • This is the Quarterly Update for December 31, 2013; • They added the ICU Renovation, CT Scanner Replacement, and OR Replacement to the non-Measure C Projects; • Overview of the Facilities Development Plan (FDP) is similar to the prior quarter, \$95 million for Measure C and \$104.1 million totaled; <p>Mr. Geney stated:</p> <ul style="list-style-type: none"> • He reviewed the TFHD FDP Status Summary Sheet; • They are wrapping up the dietary project and are almost 	



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	<p>complete with the kitchen. They working on sign off with Nevada County and Office of Statewide Health Planning and Development (OSHPD for the Dietary and ED projects;</p> <ul style="list-style-type: none"> • They are under construction for the interim birthing center; the project is running well and is ahead of schedule. The project is in the painting phase and they are wrapping up with OSHPD; • The projects are still on budget; • ICU is moving forward administratively with contracts, bonding, and working with OSHPD on two approvals for relocation of 3 sprinkler heads and 3- 4 fire alarms. They have been working with Jim Sturtevant, Director of Inpatient Services, and staff on the phasing schedule; • CT Replacement Project: They will be adding another ADA compliant restroom and are making modifications to the drawings; • Mr. Mohun asked if we are still using the CT scanner; • Mr. Geney said we are still using the CT Scanner because the vendor did not provide the new scanner as rapidly as needed; • Mr. McConn said in the interim we do have a trailer to utilize in a room; • Mr. McConn asked about the change out time frame; • Mr. Geney responded 3 -5 months; • The final project is the OR exam light replacement scan light. They are getting ready to bring forth the request for approval on the permitting process on this project; • Mr. Chamblin asked about the contingency and if anything has been blocked out for dispute resolution; • Mr. Geney said these are accounted for and they are 	
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	making some progress.	
D. Board Education and Development a. Education Session: Industry Update on Electronic Medical Records (EMR) / EMR Strategic Plan	Mr. Deluca gave a Board Education session on the Overview of Health Care Trends, Meaningful Use and Implication for Information Systems, and presented "A Development of an Information Services Plan (2014-2017)". Discussion was held.	
E. Strategic Plan Update a. Board 1/2 Day Planning Retreat/ Mission Statement Discussion and Facilitation b. Possible Strategic Plan Objectives Review	Mr. Schapper stated that based on the feedback from the Strategic Workshop the Strategic Plan has been updated. The updated version is in the Board packet. A timeframe needs to be established by the Board for the half day retreat on the Mission Statement and then an additional couple of hours to finalize the remainder of the inputs for the Strategic Plan. Mr. Owens is in contact with Karma Bass, ACHD Consultant, to get a revised retreat proposal. Steve Chihos, Consultant, may join in facilitating that later portion on the Strategic Plan; <ul style="list-style-type: none"> The Board recommended the Board Retreat be in late April/early May. They requested from management that Mr. Schapper, Ms. Razo, Ms. Betts, and Ms. Newland attend the Board Retreat. 	
F. Discussion, Recommendation, and Approval of Board Ad Hoc Community Benefit Committee	Mr. Mohun appointed an Ad Hoc Community Benefit Committee and Board members Mr. Kahn and Dr. Sessler to serve on the committee.	
18. Agenda Input For Upcoming Committee Meetings	Board Policies Grid and Board Policies and Developing a Board Compliance Education Plan - Governance Committee	
19. Items for Next Meeting	Attachment is in packet.	



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20. Board Members Reports/Closing Remarks	There were none.	
21. Closed Session Continued, If Necessary	The meeting reconvened into closed session at 9:26 p.m.	
22. Open Session	The meeting reconvened into open session at 9:36 p.m.	
23. Report of any Reportable Actions Taken in closed session	There were no reportable actions taken in closed session.	
24. Adjourn	The meeting adjourned at 9:37 p.m.	

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