



TAHOE FOREST HOSPITAL DISTRICT

# Special Meeting of the Board of Directors

Apr 02, 2015 at 02:00 PM - 05:00 PM

Eskridge Conference Room

# Meeting Book - 2015 Apr 02 Special Meeting of the Board of Directors

## AGENDA

2015 Apr 02 Special BOD Agenda

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ITEMS 1 - 5 See Agenda

## 6. ITEMS FOR BOARD DISCUSSION AND POSSIBLE ACTION

6.1. Resignation Of Interim CEO And Consideration Of Transition Plan

Management Services / Interim Placement Firms  
Materials may be provided at the meeting

BE Smith

Quorum Health Resources

HFS Consultants

6.2. Engagement of Legal Counsel for Board Representation

6.3. Discussion and Potential Approval of Board Goals

TFHRetreat\_MeetingNoteUpdated

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ITEMS 7 - 11 See Agenda

## 12. MEETING EFFECTIVENESS ASSESSMENT

a) Meeting Evaluation Form

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# SPECIAL MEETING OF THE BOARD OF DIRECTORS OF TAHOE FOREST HOSPITAL DISTRICT

## AGENDA

Thursday, April 2, 2015 at 2 p.m.

Eskridge Conference Room,  
Tahoe Forest Hospital, 10121 Pine Avenue, Truckee, CA

**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 Board 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 Board cannot take action on any item not on the agenda. The Board 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. INPUT FROM EMPLOYEE ASSOCIATIONS**

This is an opportunity for members of the Employee Associations to address the Board on items which are not on the agenda. Please state your name for the record. Comments are limited to three minutes.

**6. ITEMS FOR BOARD DISCUSSION AND POSSIBLE ACTION**

**6.1. Resignation Of Interim CEO And Consideration Of Transition Plan** ◆ [90 minutes]..... \*ATTACHMENT

The Board will review and consider various options available to facilitate the transition of the interim CEO.

**6.2. Engagement of Legal Counsel for Board Representation** [30 minutes]

The Board will consider the engagement of legal counsel specifically for the purpose of representing the Tahoe Forest Board of Directors, separate from the District.

**6.3. Discussion and Potential Approval of Board Goals** ◆ [30 minutes]..... ATTACHMENT

The Board identified eight goals for focus by the Board over the next 12 months.

**7. CLOSED SESSION:**

**7.1. Approval of closed session minutes of 2/24/15**

**7.2. Government Code Section 54956.9(d)(2): Exposure to Litigation (1 item)**

**8. AGENDA INPUT FOR UPCOMING COMMITTEE MEETINGS**

**9. ITEMS FOR NEXT MEETING**

**10. BOARD MEMBERS REPORTS/CLOSING REMARKS**

**11. REPORT OF ACTIONS TAKEN IN CLOSED SESSION**

**12. MEETING EFFECTIVENESS ASSESSMENT..... ATTACHMENT**

The Board will identify and discuss any occurrences during the meeting that impacted the effectiveness and value of the meeting.

**13. ADJOURN**

*The next regularly scheduled meeting of the Board of Directors of Tahoe Forest Hospital District is April 28, 2015, 11603 Donner Pass Rd., Truckee, CA. A copy of the Board meeting agenda is posted on the District’s web site ([www.tfhd.com](http://www.tfhd.com)) at least 72 hours prior to the meeting or 24 hours prior to a Special Board Meeting.*

\*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 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 (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.

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## Tahoe Forest Hospital Board of Directors Retreat – Meeting Notes

March 18, 2015



## Agenda

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On March 18, 2015, the Tahoe Forest Board of Directors met to focus on strategic direction of the Board and the Hospital.

Agenda	
<b>Introduction &amp; Ground Rules</b>	<b>8:00 – 8:45 AM</b>
<i>Break</i>	
<b>SWOT Analysis</b>	<b>9:00 – 11:00 AM</b>
<i>Lunch</i>	
<b>Board Goals – 2015</b>	<b>11:30 – 2:00 PM</b>
<i>Break</i>	
<b>Summary &amp; Next Steps</b>	<b>2:15 – 3:15 PM</b>

## Established Ground Rules

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Meeting ground rules were established to ensure meeting success and a general sense of accomplishment.

- Use a “time-out” motion to refocus the group
- Put an idea on trial, not a person
- Use your inside voice
- Do not interrupt
- Stay on point
- Use reflective listening – repeat to understand
- Participate
- Maintain a written record

## Pre-Workshop Observations

Prior to the Board Retreat, ELTE spoke with each Board Member and the key Administrators at the Hospital. Here are the themes from those discussions:



*What does this mean?*



## Pre-Workshop Observations and Key Themes

The previously displayed infographic utilizes word emphasis to provide a visual of common topics and themes. The information is shared below in a more traditional format.



## SWOT Analysis

The Board of Directors took time to complete a SWOT analysis that focused on Tahoe Forest Hospital. After exhaustively completing the SWOT, each Director used stars to denote key items of greater importance. The results will be leveraged for future planning.



Create a baseline understanding of today’s reality. The output allows for future planning/goal setting.

*Note: The following four slides contain the SWOT information. Items in bold received between 1 & 4 stars of importance. Items in bold and larger font received 5 stars or greater.*



## Strengths

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- Highly skilled employees
- **Competent & dedicated staff**
- Longevity of employees
- **Patient experience**
- **Quality initiatives/results**
- **MD participation**
- Admin/Staff relationship
- **Commitment to community wellness**
- Best HR department
- **High care/satisfaction ratings**
- **New facilities/equipment**
- “State of the Art” cancer center
- Intelligent & capable retired community
- Bond ratings
- **Relative current financial position**
- **Strong reputation in community**
- Facilities seismically updated
- **UC Davis**
- Physician leadership
- **New leadership**
- Economic driver of community
- **21<sup>st</sup> Century healthcare**
- Modern technology
- **Nursing staff**
- Availability of consultants
- **Good emergency room**
- Robust tourism
- **Quality of care**
- **Innovation**
- **Nimble/agile**
- **Critical access**
- Public supported
- Support between medical staff & administration
- **Community support**
- Integral part of the community
- Continuum of care

## Weaknesses

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- **Data analytics**
- Public elected board
- Brown act
- **Price competition with other institutions (Reno Diagnostic)**
- Small population
- **Increasing MediCal**
- **Difficulty communicating value to community**
- Poor payer mix
- Difficulty in developing economies of scale
- **Difficulty attracting/retaining key highly skilled “single” job positions**
- Baggage from previous CEO’s legal issues
- **MD recruitment/retention**
- **Board dysfunction undermines public perception of TFHD**
- **MSC conflict**
- **EMR/IT**
- **Compliance**
- Education + current practices
- **Physician referrals**
- **Consumer referrals**
- Physician/patient demand (low)
- **Better communicate with the public – transparent, educate**
- Legal team
- **Mission/vision statements**
- **Cultural differences in community**
- **Communication in community (bi-lingual)**

## Opportunities

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- Board/C-suite relations
- **New relations with MDs**
- Capture market share of possible out migration
- Multiple community organization/partners
- **Keep patients from going off the hill**
- **Partnerships with others in our community/outside community**
- Innovation with regards to IT, HER, HIS, etc.
- **Chronic disease management = better health = better ACA**
- Overcome bad press from 2014
- **Use focus on TFHD to engage and involve community with our initiatives**
- **Build cancer and orthopedic volumes**
- **Enormous intellectual capital in community**
- **Community focus on substance abuse/mental health issues**
- **Include Hispanic population**
- **Affordable Care Act**
- **Increase revenue from non-traditional sources**
- **Community health needs**
- **Better financial consulting for patients**
- **MD education of economics of reimbursement**
- Strategic planning
- CEO search
- Board governance
- **Product line vs. community needs – educate the public**

## Threats

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- Investigative reporting
- **Declining insurance reimbursement**
- **Payer type/mix**
- **Public opinion perception**
- **Aging MDs**
- **Regulatory agencies, compliance (National)**
- **Governmental regulatory uncertainties**
- **Expense of compliance/legal impairs ability to provide healthcare**
- Ongoing distraction from 1090 investigation
- **Misinformation**
- Global warming
- Vocal anti-tax group in community
- Natural disasters
- Medicaid expansion program
- Economic trends
- Disease
- **Competitive threats**
- Poor snow conditions
- Covered California



## Board Goals/Priorities

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After completing the SWOT analysis, the Board directed their attention to identifying goals for themselves to achieve in the next 12 months. They worked to create realistic, strategic goals that were SMART (specific, measurable, attainable, realistic and timely). Eight areas of focus were identified.

- CEO search
- Board/Administration relationship
- District sustainability
- Board/Community relationship
- Mission/Vision update
- Compliance
- Ethics
- Meeting strategy – decrease meeting time

## Board Goals/Priorities – CEO Search

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### Stated Goal: Confirm a CEO within 12 months

#### Tactics

1. The personnel committee will create a CEO search process plan
  - Commence on April 9
  - Communicate the plan/process
2. Personnel staff to establish CEO criteria with input from medical staff, employees, the community and Board (all stakeholder groups)
3. Vet a search firm/negotiate contract



## Board Goals/Priorities – Board/Administration Relationship

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### Stated Goal: Develop a Strong Partnership between the Board & CEO

#### Tactics

1. Establish a formalized/systematic CEO review process
  - Driven by the Personnel Committee
  - Commence on April 9
2. Friday Update provided to the Board by the CEO
3. No surprises – both directions

## Board Goals/Priorities – District Sustainability

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### Stated Goal: Ensure the Long-term Viability of the Hospital District

#### Tactics

1. Board to be educated and understand the necessary business models for the future
  - CEO to provide education materials on a consistent basis

## Board Goals/Priorities – Board/Community Relationship

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### Stated Goal: Improve the Relationship between the Board, Hospital and the Community

#### Tactics

1. Develop a plan to meet with small groups of concerned community members
  - Rotating Board Director and CEO to provide a feedback/communication loop
  - Breakfast meeting approximately every six weeks
  - Establish an “ears open, mouth closed” approach
2. Monthly Board Director/CEO rounding for staff
3. Board Directors to continue to engage in the community
  - Coordination with Ted and Paige

## Board Goals/Priorities – Mission/Vision Update

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### Stated Goal: Update the Mission and Vision Statements

#### Tactics

1. CEO will determine best practices and make a recommendation to the Board
2. Process will be completed prior to hiring a new CEO
3. Process will be collaborative with all stakeholders

## Board Goals/Priorities – Compliance

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**Stated Goal: Ensure Effective Compliance Program is a Priority of the Board**

Tactics

1. Work closely with Administration
2. Quarterly update report to the Board from the CEO
3. Review the consultant reports/recommendations

## Board Goals/Priorities – Ethics

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**Stated Goal: It is a Priority of the Board that TFHD Functions to the Highest Ethical Standards**

### Tactics

1. Review current ethics policies
2. Adopt the JUST Culture
3. Lead by example at the Board level
4. Ongoing education

## Board Goals/Priorities – Meeting Strategy

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**Stated Goal: Limit regular, open-session, Board meetings to 3-4 hours, once a month**

### Tactics

1. Limit presenters to 5 minutes
2. Develop a hard stop time limit (10:00 PM)
3. Move consent to the end of the agenda
4. No surprises

## Summary/Next Steps

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Over the course of the day, the Board successfully identified goals for the next 12 months. And, through a SWOT analysis, provided information to Administration regarding priorities for the Hospital.

- Next Steps
  - Review & adopt goals at March Board Meeting
  - Communicate goals and intent to stakeholders
  - Follow-up on goals in six months in a retreat style meeting



# Tahoe Forest Hospital District

## Board of Directors Meeting Evaluation Form

Date: \_\_\_\_\_

		Exceed Expectations		Meets Expectations		Below Expectations
1	Overall, the meeting agenda is clear and includes appropriate topics for Board consideration	5	4	3	2	1
2	The consent agenda includes appropriate topics and worked well	5	4	3	2	1
3	The Board packet & handout materials were sufficiently clear and at a 'governance level'	5	4	3	2	1
4	Discussions were on target	5	4	3	2	1
5	Board members were prepared and involved	5	4	3	2	1
6	The education was relevant and helpful	5	4	3	2	1
7	Board focused on issues of strategy and policy	5	4	3	2	1
8	Objectives for meeting were accomplished	5	4	3	2	1
9	Meeting ran on time	5	4	3	2	1

**Please provide further feedback here:**

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