



“Mountains Community Hospital makes possible essential quality medical services to the residents and visitors of the local mountains.”

SPECIAL DISTRICT BOARD OF DIRECTORS MEETING

Monday, January 30, 2023, 5:15 p.m.

Microsoft Teams meeting

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Meeting ID: 285 658 516 687

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Phone Conference ID: 474 821 881#

Members:	Kieth Burkart, President Barrick Smart, Treasurer Barry Hoy, Trustee	Cheryl Robinson, Vice President Cheryl Moxley, Secretary
Staff Members:	Mark Turner, Chief Executive Officer Bijan Motamedi, M.D., Chief of Staff Julie Atwood, Human Resources Director	Terry Peña, Chief Operating Officer Yvonne Waggener, Chief Financial Officer Kristi McCasland, Executive Assistant

OPEN SESSION

5:15 p.m.

CALL TO ORDER

Kieth Burkart, President

PRESIDENTS COMMENTS

Kieth Burkart, President
Action Possible

BOARD MEMBER REPORTS

All Board Members

PUBLIC COMMENTS

Government Code
Section 54954.3 Sections A & B

The public has the right to address the legislative body on any item of interest to the public.
A time restraint may be implemented at the discretion of the Board President.

CONSENT AGENDA

Kieth Burkart, President
Action Probable

(Motion will be made to include all items listed)

1. Approval of the attached Lists of Policy and Procedures that was sent January 25, 2023

**SPECIAL DISTRICT BOARD OF DIRECTORS MEETING
Thursday, January 30, 2023, 5:15 p.m.**

Page 2 of 2

AGENDA ITEMS

- | | |
|--|---|
| 1. Audited Financial Statements FY2022 | Kieth Burkart, President
Action Probable |
|--|---|

ADJOURN TO CLOSED SESSION

CLOSED SESSION AGENDA ITEMS

(Closed session pursuant to Govt. Code Section 54957 & Civil Code Section 3426.1)

- | | |
|----------------------|--------------------------|
| 1. Executive Session | Board Members & CEO Only |
| a. Personnel Issues | Action Possible |

RETURN TO OPEN SESSION

- | | |
|-------------------------------|--------------------------|
| 1. Closed Session Report | Kieth Burkart, President |
| 2. Public Report of Decisions | Kieth Burkart, President |

NEXT BOARD-ATTENDED MEETINGS

Thursday, February 16, 2023 at 1:00 p.m.
(Days & times are subject to change so please refer to the posted agenda for exact times)

FINAL ADJOURNMENT

MEC Approvals: (184 Documents)

I. New Policies / Forms / Attachments: (1)

a. Emergency Management (EM) Policies: (1)

[Guidelines and Protocol for the use of Buprenorphine in the Emergency Department \(ED\) \(Policy\)](#)

II. Updated Policies / Forms / Attachments: (14)

a. Emergency Management (EM) Policies: (1)

[Emergency Operations Plan \(EOP\) for COVID-19 Pandemic \(Policy\) - EM/PC](#)

b. Human Resources (HR) Policies: (1)

[COVID-19 Employee Vaccination, Surveillance and Testing Policy \(Policy\) - HR](#)

c. Infection Control (IC) Policies: (1)

[Infection Prevention and Control Plan \(Plan\) - IC](#)

d. Provision of Care Treatment & Services (PC) Policies: (3)

[Death of a Patient/Resident \(Policy\) - PC](#)

[Peripheral Intravenous \(IV\) Therapy: IV start, Saline flush, IV tubing, External Jugular \(EJ\) \(Policy\) - PC](#)

[Warmer, Fluid & Blanket Warmer \(Policy\) - PC](#)

e. Rights & Responsibilities of the Patient (RI) Policies: (1)

[Against Medical Advice/Elopement \(Policy\) - RI](#)

f. Emergency Department Policies: (3)

[Snake Bites / Antivenin Policy \(Policy\) - Emergency Department](#)

[Immunization Status For Children Birth through 18 Years of Age \(Policy\) - Emergency Department](#)

[Management and Care of a Spontaneous Abortion, Fetal Death and Non-Viable Live Birth \(Policy\) - Emergency Department](#)

g. Radiology Services Department Policies: (4)

[Mammography Quality Assurance Responsibility \(Policy\) - Radiology Services Department](#)

[Mammography Staff \(Policy\) - Radiology Services Department](#)

[Iodinated Contrast Agent Selection \(Policy\) - Radiology Services Department](#)

[Staffing Plan \(Policy\) - Radiology Services Department](#)

III. Tri-Annual Renewal Only (no / minor changes): (169)

a. Emergency Management (EM) Policies: (1)

[Evacuation Process for Patients-Residents & ED Patients \(Policy\) - EM / LS](#)

b. Medical Staff (MS) Policies: (2)

[Physician Well-Being Peer Review - Health Evaluation form-Appendix C 7-2014 \(Form\) - MS](#)

[Privileges, Otolaryngology \(Form\) - MS](#)

c. Provision of Care, Treatment & Services (PC) Policies: (2)

[IV Therapy: Central Venous Catheters \(CVC\) Management - \(Policy\) - PC](#)

[Nursing Responsibilities Shift Report \(Policy\) - PC](#)

d. Anesthesiology Services Department Policies: (10)

[Anesthesia Guidelines for Pre Op EKG \(Policy\) - Anesthesiology Department](#)

[Aspiration Prophylaxis \(Policy\) - Anesthesiology Department](#)

[Conscious Sedation Moderate Sedation Analgesia \(Policy\) - Anesthesiology Department](#)

[Intravenous Guidelines, Anesthesia \(Policy\) - Anesthesiology Department](#)

[Malignant Hyperthermia \(MH\) Emergency Protocol \(Policy\) - Anesthesiology Department](#)

[Post Anesthesia Care Protocol-Recovery From Local Sedation \(Policy\) - Anesthesiology Department](#)

[Pre Anesthesia Evaluation \(Policy\) - Anesthesiology Department](#)

[Protocol for CPR and DNR orders in OR, Anesthesia \(Policy\) - Anesthesiology Department](#)

[Standards of Care, Anesthesiology \(Policy\) - Anesthesiology Department](#)

[Upper Respiratory Infections \(URIs\), Anesthesia \(Policy\) - Anesthesiology Department](#)

e. Nutritional Services Department Policies: (1)

[Food Allergies and Intolerances \(Policy\) - Nutritional Services Department](#)

Special Board of Directors Meeting - January 30, 2023
Policy Review/Approval

f. Perioperative Services Department Policies: (4)

[Cleaning of the OR \(Policy\) - Perioperative Services Department](#)

[Formalin \(Policy\) - Perioperative Services Department](#)

[Procedural Sedation Analgesia Provided by an RN or Physician in the ED or Perioperative Services Department \(Policy\) - PC](#)

[Surgical Clippers \(Policy\) - Perioperative Services Department](#)

g. Radiology Services Department Policies: (147)

[Addenda or Corrected Reports \(Policy\) - Radiology Services Department](#)

[Ages of Patients Served \(Policy\) - Radiology Services Department](#)

[Air Embolism Due to Contrast Media Injection \(Policy\) - Radiology Services Department](#)

[Bio Hazardous Materials Needles and Other Sharps \(Policy\) - Radiology Services Department](#)

[Breast Implant Imaging \(Policy\) - Radiology Services Department](#)

[Cancelled Procedure Charting and Corporate Compliance \(Policy\) - Radiology Services Department](#)

[Care and Handling of Critically Ill Patients, Radiology \(Policy\) - PC](#)

[C-Arm, Mobile Equipment \(Policy\) - Radiology Services Department](#)

[Changes in Staff Notification Requirements \(Policy\) - Radiology Services Department](#)

[Clinical Indications for Exam \(Policy\) - Radiology Services Department](#)

[Comparison of Previous Images \(Policy\) - Radiology Services Department](#)

[Contrast Administration Procedures \(Policy\) - Radiology Services Department](#)

[Contrast Media Warmer Storage \(Policy\) - Radiology Services Department](#)

[Contrast Reaction Policy \(Policy\) - Radiology Services Department](#)

[CPR#1 Cardiac Respiratory Arrest \(Policy\) - Radiology Services Department](#)

[Critical Findings and Critical Test \(Policy\) - Radiology Services Department](#)

[CT Scans Prep Procedures \(Policy\) - Radiology Services Department](#)

[DEXA Imaging and Diagnostic Protocol \(Policy\) - Radiology Services Department](#)

[Diagnostic Mammography Examination \(Policy\) - Radiology Services Department](#)

[Digitizing Breast Imaging Exams \(Policy\) - Radiology Services Department](#)

[Disposal of Body Waste \(Policy\) - Radiology Services Department](#)

[Equipment Quality Control \(Policy\) - Radiology Services Department](#)

[Exam Appropriateness and Screening \(Policy\) - Radiology Services Department](#)

[Expected Reporting Data Elements \(Policy\) - Radiology Services Department](#)

[Fax Transmission of Patient Health Information \(Policy\) - Radiology Services Department](#)

[Films and Record Ownership and Patient Access \(Policy\) - Radiology Services Department](#)

[Foley Catheter Insertion Procedure \(Policy\) - Radiology Services Department](#)

[Gastrografin/Breeza Mixing Instruction \(Policy\) - Radiology Services Department](#)

[Guidelines for Radiology Usage in Other Areas \(Policy\) - Radiology Services Department](#)

[Hours of Operation and Staffing, Radiology \(Policy\) - Radiology Services Department](#)

[Image Availability \(Policy\) - Radiology Services Department](#)

[Image Copies \(Policy\) - Radiology Services Department](#)

[Image Storage \(Policy\) - Radiology Services Department](#)

[Images, Release of \(Policy\) - Radiology Services Department](#)

[Imaging Equipment Incoming Inspection \(Policy\) - Radiology Services Department](#)

[Imaging Equipment Purchase Evaluations \(Policy\) - Radiology Services Department](#)

[Imaging Patient Care Equipment Repair or Replacement \(Policy\) - Radiology Services Department](#)

[Infection Control Procedure \(Policy\) - Radiology Services Department](#)

[Instructions Concerning Pregnant Employees \(Policy\) - Radiology Services Department](#)

[IV Solutions, Use of or Changing \(Policy\) - Radiology Services Department](#)

[Latex Sensitive Patients, Alert System for \(Policy\) - Radiology Services Department](#)

[Latex Sensitive Patients, Room Preparation for \(Policy\) - Radiology Services Department](#)

[Latex Sensitivity, Employee's Responsibility Regarding \(Policy\) - Radiology Services Department](#)

[Magnification Views \(Policy\) - Radiology Services Department](#)

[Mammogram Exam Preparation \(Policy\) - Radiology Services Department](#)

[Mammogram Interpreting, Physicians' Qualifications \(Policy\) - Radiology Services Department](#)

[Mammogram Physicists' Qualifications \(Policy\) - Radiology Services Department](#)

[Mammogram Physicists' Responsibilities \(Policy\) - Radiology Services Department](#)

[Mammograms, Tracking of Abnormal Mammograms \(Policy\) - Radiology Services Department](#)

[Mammographic Image Identification \(Policy\) - Radiology Services Department](#)

[Mammography Lead Interpreting Physicians' Responsibilities \(Policy\) - Radiology Services Department](#)

[Mammography Medical Outcome Audit \(Policy\) - Radiology Services Department](#)

[Mammography Patients' Notification of Results \(Policy\) - Radiology Services Department](#)

Special Board of Directors Meeting - January 30, 2023
Policy Review/Approval

[Mammography Quality Assurance Program \(Policy\) - Radiology Services Department](#)

[Mammography Quality Control Program \(Policy\) - Radiology Services Department](#)

[Mammography Services \(Policy\) - Radiology Services Department](#)

[Mammography, Clinical Image Quality Review, MQSA Regulations \(Policy\) - Radiology Services Department](#)

[Mammography, Follow-Up for Abnormal Results \(Policy\) - Radiology Services Department](#)

[Mammography, Repeat Images Mammogram Images Deemed Inadequate \(Policy\) - Radiology Services Department](#)

[Mammography, Screening Mammography for Self Referred Patient \(Policy\) - Radiology Services Department](#)

[Mandatory Reporting of Excessive Radiation Exposures on a Patient from CT Scanner \(Policy\) - Radiology Services Department](#)

[Mechanical Safety \(Policy\) - Radiology Services Department](#)

[Medical Radiation Physicist Responsibilities \(Policy\) - Radiology Services Department](#)

[Monitoring Imaging Patient Care Equipment Vendors \(Policy\) - Radiology Services Department](#)

[MQSA and California State Inspection \(Policy\) - Radiology Services Department](#)

[Non-Radiological Procedures Requiring Doctor's Order \(Policy\) - Radiology Services Department](#)

[Operation of Radiology Equipment \(Policy\) - Radiology Services Department](#)

[Orders or Request for Radiology Services \(Policy\) - Radiology Services Department](#)

[Orientation, Imaging Equipment, In-Service Training and Competency \(Policy\) - Radiology Services Department](#)

[Orientation, Mammography Technologist \(Policy\) - Radiology Services Department](#)

[Pain Management \(Policy\) - Radiology Services Department](#)

[Parts Requisition System \(Policy\) - Radiology Services Department](#)

[Patient Safety \(Policy\) - Radiology Services Department](#)

[Patient Selection Criteria \(Policy\) - Radiology Services Department](#)

[Patients with History of Allergies or Contraindications \(Policy\) - Radiology Services Department](#)

[Pediatric Preps for Diagnostic Procedures \(Policy\) - Radiology Services Department](#)

[Persons Permitted in X-Ray Rooms \(Policy\) - Radiology Services Department](#)

[Portable Equipment Disinfectant Cleaning \(Policy\) - Radiology Services Department](#)

[Power PICC and Power Central Venous Catheter Policy Infusion of Contrast Media \(Policy\) - Radiology Services Department](#)

[Pregnancy Questionnaire Determination for Patients Prior to Diagnostic Procedure \(Policy\) - Radiology Services Department](#)

[Preps for Diagnostic Procedure on Adolescents Over Age 12 and Adults \(Policy\) - Radiology Services Department](#)

[Preventive Maintenance \(Policy\) - Radiology Services Department](#)

[Processing Outside Images \(Policy\) - Radiology Services Department](#)

[Processing Patients During Planned Computer Down Time \(Policy\) - Radiology Services Department](#)

[Qualification Requirements for Radiology Staff \(Policy\) - Radiology Services Department](#)

[Quality Assurance Records \(Policy\) - Radiology Services Department](#)

[Quality Control / Assurance \(Policy\) - Radiology Services Department](#)

[Quality Control of Tele-Radiology Reports \(Policy\) - Radiology Services Department](#)

[Quality Control Test Results \(Policy\) - Radiology Services Department](#)

[Radiation Exposure and Monitoring for Pregnant Workers \(Policy\) - Radiology Services Department](#)

[Radiation Fluoroscopy Safety \(Policy\) - Radiology Services Department](#)

[Radiation Protection Plan \(Policy\) - Radiology Services Department](#)

[Radiation Protection to Patient Holders, State Regulations \(Policy\) - Radiology Services Department](#)

[Radiation Safety Committee \(Policy\) - Radiology Services Department](#)

[Radiation Safety of Patients \(Policy\) - Radiology Services Department](#)

[Radiation Safety Officer Duties and Responsibilities \(Policy\) - Radiology Services Department](#)

[Radiation Safety Rules for Portable Radiography \(Policy\) - Radiology Services Department](#)

[Radiation Safety Rules for Surgical Orthopedic Radiography \(Policy\) - Radiology Services Department](#)

[Radiation Safety to Personnel \(Policy\) - Radiology Services Department](#)

[Radiation Safety, General Rules of \(Policy\) Radiology Services Department](#)

[Radiographic Routine Protocols \(Policy\) - Radiology Services Department](#)

[Radiology Care of Service Delivery Method \(Policy\) - Radiology Services Department](#)

[Radiology Department Cleanliness \(Policy\) - Radiology Services Department](#)

[Radiology Department Overview \(Policy\) - Radiology Services Department](#)

[Radiology Follow-Up in the Emergency Room for Discrepancy \(Policy\) - Radiology Services Department](#)

[Radiology Orders and Referrals \(Policy\) - Radiology Department](#)

[Radiology Report Distribution General Guidelines \(Policy\) Radiology Services Department](#)

[Radiology Staff Routine Rounds \(Policy\) - Radiology Services Department](#)

[Reason for Requested Radiology Examination \(Policy\) - Radiology Services Department](#)

[Recording Fluoroscopy Exam Time \(Policy\) - Radiology Services Department](#)

[Repeat Exams \(Policy\) - Radiology Services Department](#)

[Report for Incomplete Examination \(Policy\) - Radiology Services Department](#)

[Report Turnaround Time \(Policy\) - Radiology Services Department](#)

[Request Order Changes and Errors and Corporate Compliance \(Policy\) - Radiology Services Department](#)

Special Board of Directors Meeting - January 30, 2023
Policy Review/Approval

[Requesting and Returning Outside Mammogram Images and Films \(Policy\) - Radiology Services Department](#)
[Retrieval of Outstanding Films \(Policy\) - Radiology Services Department](#)
[RIS PACS Down Time \(Policy\) - Radiology Services Department](#)
[Scheduling Appointments \(Policy\) - Radiology Services Department](#)
[Scheduling CT Scan Procedures \(Policy\) - Radiology Services Department](#)
[Scheduling Mammography Patients \(Policy\) - Radiology Services Department](#)
[Scheduling of Patients with a Known Latex Allergy \(Policy\) - Radiology Services Department](#)
[Scheduling Outpatients \(Policy\) - Radiology Services Department](#)
[Scope of Service, Radiology \(Policy\) - Radiology Services Department](#)
[Self-Referral Patients \(Policy\) - Radiology Services Department](#)
[Standard Infection Control Precautions Policies \(Policy\) - Radiology Services Department](#)
[Standard Precautions Soiled or Used Linens \(Policy\) - Radiology Services Department](#)
[State of California Radiation Safety Instructions \(Policy\) - Radiology Services Department](#)
[Suctioning Oropharyngeal and Nasopharyngeal \(Policy\) - Radiology Services Department](#)
[Supplies and Accessories \(Policy\) - Radiology Services Department](#)
[Suspected Spinal Fracture Patients, Care Handling of \(Policy\) - Radiology Services Department](#)
[Technical Literature \(Policy\) - Radiology Services Department](#)
[Technologist Performance Requirements \(Policy\) - Radiology Services Department](#)
[Technologist Qualification Requirements \(Policy\) - Radiology Services Department](#)
[Technologist Restrictions \(Policy\) - Radiology Services Department](#)
[Transportation of Critically Ill Patient \(Policy\) - Radiology Services Department](#)
[Transportation Patients with IV's \(Policy\) - Radiology Services Department](#)
[Transportation Policy Infants \(Policy\) - Radiology Services Department](#)
[Transportation Policy Isolation Patients \(Policy\) - Radiology Services Department](#)
[Transportation Policy Mode of Transport \(Policy\) - Radiology Services Department](#)
[Transportation Requisition Information \(Policy\) - Radiology Services Department](#)
[Transportation Sign Out Procedure \(Policy\) - Radiology Services Department](#)
[Treatment of Reaction to Contrast Media and Reaction Kits \(Policy\) - Radiology Services Department](#)
[Types of Services \(Policy\) - Radiology Services Department](#)
[Ultrasound Worksheet \(Policy\) - Radiology Services Department](#)
[Verbal Orders \(Policy\) - Radiology Services Department](#)
[Waste Management Precautions Waste Disposal \(Policy\) - Radiology Services Department](#)
[X-Ray Room Care \(Policy\) - Radiology Services Department](#)

h. Rehabilitation Services Department Policies: (1)

[Outpatient Rehabilitation Services Payments \(Policy\) - Rehabilitation Services Department](#)

i. Respiratory Services Department Policies: (1)

[Oxygen Administration \(Policy\) - Respiratory Department](#)