

October 26, 2023, Board Packet Table of Contents

- 1 QUALITY COMMITTEE MEETING AGENDA 1:00
- 2 Quality Committee Meeting Attendance
- 3 Quality Committee Meeting Minutes
- 4 FACILITIES COMMITTEE MEETING AGENDA 1:30
- 5 Facilities Committee Meeting Attendance
- **6** Facilities Committee Meeting Minutes
- 7 FINANCE COMMITTEE MEETING AGENDA 1:45
- 8 Finance Committee Meeting Attendance
- 9 Finance Committee Meeting Minutes
- 10 Financial Packet as of month ended September 30, 2023
- 10.a. Local Agency Investment Fund (LAIF) September2023 Statement (separate attachment)
- 10.b. UBS Financial Services September 2023 Statement (separate attachment)
 - 11 BOARD OF DIRECTORS MEETING AGENDA 2:15
- 12 Board of Directors Meeting Attendance
- 13 Board of Directors Meeting Minutes
- 14 Policies submitted for Board Approval by email 10/16/2023
- 15 Acute Care Wing Project: Legal Counsel Evaluations
- 16 2023 Board Self-Evaluation
- 17 AHA Q&A call with Governance Expert -- November 1, 2023
- 18 AHA Leadership Matters: Role of Governance in Quality and Safety November 8, 2023
- 19 CSDA "Introduction to Special District Finances" -- November 17, 2023
- 20 AHA Rural Health Care Leadership Conference -- February 11-14, 2024
- 21 CLOSED SESSION 3:00



Quality Committee Meeting Thursday, October 26, 2023, 1:00 p.m. George M. Medak Conference Room, Suite 207

MCH Medical Office Building, 29099 Hospital Road, Lake Arrowhead, CA 92352

Or

Microsoft Teams meeting

Join on your computer, mobile app or room device

Click here to join the meeting

Meeting ID: 234 601 921 58 Passcode: MWdfbE

Download Teams | **Join on the web**

Or call in (audio only)

+1 951-384-1117,,605686207# United States, Riverside

Phone Conference ID: 605 686 207#

Members: Cheryl Moxley, Committee Chairperson Barry Hoy, Committee Member

Mark Turner, Chief Executive Officer Julie Atwood, Director of Human Resources

Terry Peña, Chief Operating Officer Leslie Plouse, Quality Director Don Larsen, MD, Community Member Gerry Hinkley, Community Member

OPEN SESSION 1:00 p.m.

CALL TO ORDER Cheryl Moxley, Committee Chairperson

PREVIOUS MINUTES Cheryl Moxley, Committee Chairperson

Action Probable

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 Committee Chairperson.

CLOSED SESSION - AGENDA ITEMS

(According to section: (54956.9)

1. Hospital Acquired Harm Leslie Plouse, Quality Director

Information Only

2. Event Reports – Level of Harm Leslie Plouse, Quality Director

Information Only

3. Complaints Leslie Plouse, Quality Director

Information Only

4. USACS Dashboard Leslie Plouse, Quality Director

Information Only

SAN BERNARDINO MOUNTAINS COMMUNITY HOSPITAL DISTRICT

Quality Committee Meeting Thursday, October 26, 2023, 1:00 p.m.

Page 2 of 2

RETURN TO OPEN SESSION

1. Closed Session Report Cheryl Moxley, Committee Chairperson

2. Public Report of Decisions Cheryl Moxley, Committee Chairperson

<u>OPEN SESSION – AGENDA ITEMS</u>

1. Performance Improvement Leslie Plouse, Quality Director

Information Only

2. Patient Surveys Leslie Plouse, Quality Director

Information Only

3. Regulatory Activity/Updates Leslie Plouse, Quality Director

Information Only

ADJOURNMENT

San Bernardino	Moun	tains (Comm	unity	Hospit	al Qua	ality C	ommit	tee Me	eetings	5	
Attendance Matrix - 2023												
Committee Members	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ост	NOV	DEC
Cheryl Moxley	1	1	V	1	Α	1	1	V	1			
Barry Hoy	7	√	√	V	√	V	√	√	V			(
Terry Peña	√	√	√	√	Е	√	√	√	V			D
Mark Turner	√	√	√	√	√	√	√	√	√			Α
Julie Atwood	7	√	V	7	V	V	√	V	7			R
Leslie Plouse	7	√	√	V	√	V	√	√	7			K
Don Larsen	7	√	V	V	V	V	A	A	V			• `
Gerry Hinkley	7	V	V	7	V	V	√	√	V			
Comment:												
	√	Pres	sent		Е	Excus	sed		Α	Abse	nt	



QUALITY COMMITTEE MEETING MINUTES

	ACTION/FOLLOW-UP
Cheryl Moxley, Committee Chairperson	Quorum present
· · · · · · · · · · · · · · · · · · ·	
Gerry Hinkley, Community Member	
Kristi McCasland, Executive Assistant	
Cheryl Robinson, Board Vice President	
1	
Yvonne Waggener, Chief Financial Officer	
John McLaughlin, Public	
Moxley called the meeting to order at 1:00 p.m.	The meeting was called to order
On a motion made and seconded, the Quality Committee Meeting	On a motion made and
Minutes of August 24, 2023 were approved as written.	seconded, the Quality
	Committee Meeting Minutes of
	August 24, 2023 were
	approved as written
	M (Hinkley) / S (Turner) / C
There was no public comment noted at this time.	None
The Quality Committee Adjourned to "Closed Session" at approximately 1:02 p.m.	None
	Barry Hoy, Committee Member Mark Turner, Member, Chief Executive Officer Julie Atwood, Member, Director of Human Resources Terry Peña, Member, Chief Operating Officer/Chief Nursing Officer Leslie Plouse, Member, Quality Director Don Larsen, MD, Community Member Gerry Hinkley, Community Member Kristi McCasland, Executive Assistant Cheryl Robinson, Board Vice President Barry Smart, Board Treasurer Yvonne Waggener, Chief Financial Officer John McLaughlin, Public Moxley called the meeting to order at 1:00 p.m. On a motion made and seconded, the Quality Committee Meeting Minutes of August 24, 2023 were approved as written. There was no public comment noted at this time. The Quality Committee Adjourned to "Closed Session" at

QUALITY COMMITTEE MEETING MINUTES

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
	CLOSED SESSION ATTENDEES:	
	Cheryl Robinson, Committee Chairperson	
	Barry Hoy, Committee Member	
	Mark Turner, Member, Chief Executive Officer	
	Julie Atwood, Member, Director of Human Resources	
	Terry Peña, Member, Chief Operating Officer/Chief Nursing Officer	
	Leslie Plouse, Member, Quality Director	
	Don Larson, MD, Community Member	
	Gerry Hinkley, Community Member	
	Kristi McCasland, Executive Assistant	
	Cheryl Robinson, Board Vice President Barry Smart, Board Treasurer	
	Yvonne Waggener, Chief Financial Officer	
	1 voinie waggener, emer i manerar officer	
6.0 Return to Open Session:	The Committee returned to "Open Session" at approximately 1:13 p.m.	None
6.1 Closed Session Report:	Per Moxley, the following items were reported on during "Closed Session" – Hospital Acquired Harm; Harm Events; Complaints; and USACS Dashboard.	Information only
7.0 Agenda Items	Plouse reported on the following PI Projects:	Information only
	1) Meds to Beds: Our target for 2023 is that 100% of IEHP members	·
7.1 Performance Improvement (PI)	who are discharged from an IP setting are offered the Meds to	
	Beds program. For the month of August 2023, we were at 75%.	
	2) <u>Breast Cancer Screening:</u> Our target for 2023 is that 55.29% of	
	female IEHP patients ages 52-74 receive a mammogram; as of	
	August 2023, we are at 49.60%.	
	3) <u>Colon Cancer Screening:</u> Our target for 2023 is that 50.38% of IEHP/MediCal patients ages 45-75 receive a screening for	
	colorectal cancer; as of August 2023, we are at 41.55%.	
	4) 2023 PI Priority #1: Hand Hygiene: Baseline data was collected in	
	August for Med/Surg, ED and RHC. Committee meetings have	



QUALITY COMMITTEE MEETING MINUTES

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
	 been stalled due to MediTech implementation. 5) 2023 PI Priority #2: Implementation of new EHR: Deferred; update will be given by COO/CNO at the September 28th Board of Directors meeting. 6) 2023 PI Priority #3: Patient Experience: E-surveys were initiated for ED patients in early September; response rates increased from 4.1% to 18.4%. E-surveys will be rolled out for Rural Health Clinic and Dental patients soon. Paper surveys will continue for Med/Surg (CMS requirement). Patient Journey Mapping will be rolled out in Med/Surg. Quality Director will assume management of the patient survey boxes in Radiology, RHC and Lab. 	
7.2 Patient Surveys	 Patient Satisfaction Surveys (Inpatient & ED) – Inpatient: In August 2023, there were four responses, with a 50% top box score (86.98 mean score). Verbatim comments were reviewed. ED: In July 2023, there were fourteen responses with a 67.63% top box score (85.91 mean score). Verbatim comments were reviewed. 	Information only
7.3 Regulatory Activity/Updates	 Regulatory Activities and Updates SNF Life Safety Survey 5/4/2023: Two fallouts were found in August; all issues were corrected. SNF CMS Recertification Survey 4/17/2023-4/20/2023: 100% compliance to plan of correction audits in August. TJC Lab Triennial Reaccreditation Survey 5/3/2022-5/5/2022: Critical Results documentation stalled due to Orchard report issues-will resume in September. CDPH Complaint Investigation 7/22/2022: Investigation remains open. 	Information only
8.0 Final Adjournment:	There being no further business to discuss, the meeting was adjourned at approximately 1:21 p.m.	Meeting adjourned



Facilities Committee Meeting Thursday, October 26, 2023, 1:30 p.m. George M. Medak Conference Room, Suite 207 MCH Medical Office Building, 29099 Hospital Road, Lake Arrowhead, CA 92352

Or

Microsoft Teams meeting

Join on your computer, mobile app or room device

Click here to join the meeting Meeting ID: 234 601 921 58

Passcode: MWdfbE

Download Teams | **Join on the web**

Or call in (audio only)

+1 951-384-1117,,605686207# United States, Riverside

Phone Conference ID: 605 686 207#

Members: Cheryl Robinson, Committee Chairperson

Terry Pena, Chief Operating Officer Mark Turner, Chief Executive Officer Gerry Hinkley, Community Member Cheryl Moxley, Committee Member Tom Madrigal, Facilities Manager Don Larsen, MD, Community Member

OPEN SESSION 1:30 p.m.

<u>CALL TO ORDER</u> Cheryl Robinson, Committee Chair

PREVIOUS MINUTES Cheryl Robinson, Committee Chair

Action probable

PUBLIC COMMENT 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 Committee Chairman.

AGENDA ITEMS

1. Hospital Campus Updates Tom Madrigal, Facilities Manager /

Mark Turner, Chief Executive Officer

2. Construction Projects Tom Madrigal, Facilities Manager /

Mark Turner, Chief Executive Officer

Action Possible

ADJOURNMENT

SAN BERNARDINO MOUNTAINS COMMUNITY HOSPITAL DISTRICT

San Bernardino Mountains Community Hospital Facilities Committee Meetings

Attendance Matrix - 2023

Allendance Mainx - 2023	1	1			1		1			1		
Committee Members	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ост	NOV	DEC
Cheryl Robinson	1	м	H U	1	м	H	1	м	H U			
Cheryl Moxley	V	A	М	V	A	М	√	A	М		M A	
Mark Turner	V	R K	A N	V	R K	A N	√	R K	A N		R K	D
Terry Peña	√	E	R	√	E	R	1	E	R		E	A R
Tom Madrigal	√	T I	E	√	T I	E	1	T I	E		T I	K
Don Larsen	V	N G	s o	V	N G	s o	Α	N G	s o		N G	
Gerry Hinkley	1		U	1		U	1		U			
0												
Comment:												
	L									A 1		
	\checkmark	Pres	sent		E	Excu	sed		Α	Abse	nt	

FACILITIES COMMITTEE MEETING MINUTES

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
1.0 Members Present:	Cheryl Robinson – Committee Chairperson Cheryl Moxley – Committee Member / Board Secretary Mark Turner – Chief Executive Officer Terry Pena – Chief Operating Officer / Chief Nursing Officer Tom Madrigal – Facilities Manager Gerry Hinkley, Community Member	Quorum present
Absent:	Don Larson, MD – Community Member	
Recording Secretary:	Kristi McCasland – Executive Assistant to Administration	
Guests:	Keith Burkart – Board President Barry Hoy – Board Trustee Barry Smart – Board Treasurer Julie Atwood – Human Resources Director Yvonne Waggoner – Chief Financial Officer Kim McGuire – Foundation / Community Development Director Leslie Plouse – Quality Director Steffanie Miller- Executive Assistant to Facilities Peter Venturini, Foundation President	
2.0 Call to Order:	Robinson called the meeting to order at 1:25 p.m.	The meeting was called to order.
3.0 Previous Minutes:	On a motion made and seconded, the Facilities Committee Meeting Minutes of April 28, 2023 were approved.	On a motion made and seconded, the Facilities Committee Meeting Minutes of April 28, 2023 were approved as written. M (Moxley) / S (Madrigal) / C
4.0 Public Comment:	None	None

FACILITIES COMMITTEE MEETING MINUTES

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
5.0 Agenda Items:	Madrigal gave an update on the following hospital campus projects:	Information Only
5.1 Hospital Campus	<u>Campus Cleanup</u> – Madrigal reported that they continue to focus on campus cleanup.	
5.2 Update: Construction Projects	Madrigal gave an update on the following construction projects:	Information Only
	 Pyxis Med/Surg Install – HCAI granted occupancy on June 16, 2023. The new area will house the House Supervisors and the Pyxis unit. The small conference room will remain as the Med/Surg nurses station. We plan to look into reconfiguring the small conference room to meet the nursing staff's needs. Registration Project – HCAI found the fire alarm drawings were incomplete. Revised drawings were submitted to HCAI on 6/16/2023. We expect to receive plan approval by 7/31/2023. Pharmacy Project – Two contractors attended the job walk on 6/6/2023; one bid was received for \$880k. Contract documents have been sent to our attorney to check for completeness. It is hoped that the contractor will start this project mid-September. The project is estimated to take around 1 year to complete. Lab Project – The main analyzer was moved and anchored in the Lab. Working with the contractor to install of the second smaller analyzer. Land Use Permit - New Acute Care Wing: All County Departments have recommended approval of the project. The Land Use Permit is scheduled for a public hearing with the County Zoning Administrator on August 10th. The County will send notices regarding the public hearing to all property owners within 300-feet of the property. 	

FACILITIES COMMITTEE MEETING MINUTES

July 27, 2023

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
6.0 Adjournment:	No further business to discuss, the meeting was adjourned at approximately 1:45 p.m.	Meeting adjourned.



Finance Committee Meeting Thursday, October 26, 2023, 1:45 p.m. George M. Medak Conference Room, Suite 207

MCH Medical Office Building, 29099 Hospital Road, Lake Arrowhead, CA 92352

Or

Microsoft Teams meeting

Join on your computer, mobile app or room device

Click here to join the meeting

Meeting ID: 234 601 921 58 Passcode: MWdfbE

Download Teams | Join on the web

Or call in (audio only)

+1 951-384-1117,,605686207# United States, Riverside

Phone Conference ID: 605 686 207#

Members: Barrick Smart, Committee Chairperson

Yvonne Waggener, Chief Financial Officer Mark Turner, Chief Executive Officer

Gerry Hinkley, Community Member

Barry Hoy, Committee Member

Terry Peña, Chief Operating Officer Don Larsen, MD, Community Member

OPEN SESSION 1:45 p.m.

<u>CALL TO ORDER</u> Barry Smart, Committee Chairperson

PREVIOUS MINUTESBarry Smart, Committee Chairperson

Action Probable

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 Committee Chairperson.

AGENDA ITEMS

1. Financial Statements Yvonne Waggener, Chief Financial Officer

Action Probable

2. Capital Purchases Yvonne Waggener, Chief Financial Officer

Action Possible

3. Investments Yvonne Waggener, Chief Financial Officer

Action Possible

ADJOURNMENT

SAN BERNARDINO MOUNTAINS COMMUNITY HOSPITAL DISTRICT

San Bernardino Mountains Community Hospital Finance Committee Meetings Attendance Matrix - 2023 **Committee Members** JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC 1 1 √ √ √ 1 **Barry Smart** 1 C A √ 1 1 1 1 **Barry Hoy** Ν D √ 1 1 1 1 Yvonne Waggener C 1 $\sqrt{}$ \checkmark $\sqrt{}$ 1 1 $\sqrt{}$ E **Mark Turner** R L 1 1 1 1 √ 1 √ Terry Peña E K L √ 1 1 $\sqrt{}$ $\sqrt{}$ Don Larsen 1 E A D $\sqrt{}$ $\sqrt{}$ Gerry Hinkley **Comment:** Present Excused Absent Е



TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
1.0 Members Present:	Barrick Smart, Committee Chairperson Barry Hoy, Committee Member Yvonne Waggener, Member, Chief Financial Officer Terry Peña, Member, Chief Operating Officer/Chief Nursing Officer Mark Turner, Member, Chief Executive Officer Don Larsen, MD – Community Member Gerry Hinkley, Community Member	Quorum present
Absent:		
Recording Secretary:	Kristi McCasland, Executive Assistant	
Guests:	Cheryl Robinson, Board Vice President Cheryl Moxley, Board Secretary Julie Atwood, Human Resources Director Kim McGuire, Community Development Director Leslie Plouse, Quality Director John McLaughlin, Public	
2.0 Call to Order:	Smart called the meeting to order at 1:40 p.m.	The meeting was called to order
3.0 Previous Minutes:	On a motion made and seconded, the Finance Committee Meeting Minutes of August 24, 2023 were approved.	On a motion made and seconded, the Finance Committee Meeting Minutes of August 24, 2023 were approved as written
		M (Hoy) / S (Turner) / C
4.0 Public Comment:	There was no public comment noted at this time.	None
5.0 Agenda Items:5.1 Financial Statements	Waggener presented the FY24 Financial Statements as of and for the two (2) months ended August 31, 2023. Comparative statistics and	A motion was made and seconded to recommend to the



FINANCE COMMITTEE MEETING MINUTES

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
	selected financial indicators were reviewed with the committee. Waggener noted that all outstanding AP invoices are being processed prior to the October 1, 2023 conversion to the new MediTech system.	Board to accept the Financial Statements as of two (2) months ended August 31, 2023.
		M (Turner) / S (Hinkley) / C
5.2 Capital Purchases	Waggener presented and reviewed the FY24 Capital Purchases for the two (2) months ended August 31, 2023. She noted that we have not spent a lot of money on capital purchases yet. Turner noted that we took ownership of the patient transport van, which was funded by the Foundation, last month. Peña reported that they are working to renegotiate the quotes for the tower for our surgery scopes. In the meantime, the vendors brought us trial equipment for us to utilize until November 16 th . Once the quotes are finalized, this item will be brought back to the Finance Committee/Board for review/approval.	Information only
5.3 Investments	Waggener presented and reviewed the LAIF and UBS statements as of August 31, 2023.	Information only
6.0 Adjournment:	No further business to discuss, the meeting was adjourned at approximately 2:01 p.m.	Meeting adjourned

Mountains Community Hospital Key Financial Indicators

			AUD	ITED					BENCH	MARKS
	06/30/17	06/30/18	06/30/19	06/30/20	06/30/21	06/30/22	06/30/23	09/30/23	FAR WEST CAH	CA CAH
LIQUIDITY				-		-				
Days cash on hand - All sources	161	240	344	523	490	490	452	418	173	222
Cash	909,787	944,823	625,817	15,242,086	8,242,632	4,168,498	3,476,666	266,842		
Board Designated	8,505,612	14,339,180	21,636,014	20,160,931	29,289,726	35,548,549	37,386,706	37,783,899		
Total	9,415,399	15,284,003	22,261,831	35,403,017	37,532,358	39,717,047	40,863,372	38,050,741		-
Days gross revenue in gross AR	58	57	55	49	62	52	57	60		
Days net revenue in net AR	41	33	43	33	41	37	32	32	59	41
Days expense in AP	32	23	25	29	29	42	23	14		
Current ratio	1.6	2.3	1.6	2.1	1.8	1.8	1.5	1.4		
Cash to debt	91%	154%	236%	303%	443%	498%	484%	450%		
CAPITAL STRUCTURE										
Long-term debt to capitalization	38%	28%	24%	25%	16%	14%	14%	15%		
PROFITABILITY										
Total margin	12%	26%	19%	17%	29%	14%	8%	-16%		
<u>OTHER</u>										
Paid full time equivalents (FTE's)	165.66	177.25	183.31	176.66	185.49	182.08	195.86	197.98		
BENCHMARK - FAR WEST	The Industry Ben			manac of Hospita	ıl Financial and Op	perating Indicator	s. The Benchmar	k Average is for		
BENCHMARK - CA	The California Benchmark is from the Flex Monitoring Team Data Summary Report #26, CAH Financial indicators Report: Summary of Indicators Medians by State, May 2022.									
Total Margin Goal	Based on Year-To	sed on Year-To-Date Budget								

Mountains Community Hospital Comparative Statistics

	Patient Days				Average	Daily Censu	IS	ER Vis	Surgery			
	Acute	Swing	Hospital	SNF	Acute	Swing	Hospital	SNF	Month	Day	Endo	Surg
Jul-22	45	7	52	589	1.5	0.2	1.7	19.0	841	27	18	24
Aug-22	46	28	74	605	1.5	0.9	2.4	19.5	814	26	20	19
Sep-22	50	14	64	585	1.7	0.5	2.1	19.5	760	25	3	7
Oct-22	30	38	68	594	1.0	1.2	2.2	19.2	786	25	-	1
Nov-22	80	56	136	562	2.7	1.9	4.5	18.7	802	27	-	6
Dec-22	47	4	51	558	1.5	0.1	1.6	18.0	786	25	-	12
Jan-23	46	39	85	585	1.5	1.3	2.7	18.9	712	23	-	9
Feb-23	44	46	90	532	1.6	1.6	3.2	19.0	565	20	-	11
Mar-23	56	45	101	584	1.8	1.5	3.3	18.8	497	16	-	9
Apr-23	54	27	81	535	1.8	0.9	2.7	17.8	602	20	-	14
May-23	81	43	124	513	2.6	1.4	4.0	16.5	692	22	-	9
Jun-23	55	48	103	548	1.8	1.6	3.4	18.3	774	26	4	7
	634	395	1,029	6,790	1.7	1.1	2.8	18.6	8,631	24	45	128
		Patie	nt Days			Average	verage Daily Census		ER Vis	its	Surg	ery
	Acute	Swing	Hospital	SNF	Acute	Swing	Hospital	SNF	Month	Day	Endo	Surg
Jul-23	41	54	95	589	1.3	1.7	3.1	19.0	874	28	4	7
Aug-23	59	13	72	607	1.9	0.4	2.3	19.6	786	25	7	16
Sep-23	80	38	118	570	2.7	1.3	3.9	19.0	725	24	2	17
	180	105	285	1,766	2.0	1.1	3.1	19.2	2,385	26	13	40
	•											
Budget Sept-23	69	60	129	585	2.2	1.9	4.2	18.9	720	23	7	16

Mountains Community Hospital Comparative Statistics

	Lab			Radiology	Exams			PT		Rural	Health Cli	nics	
	Tests	X Ray	СТ	Mammo	DXA	US	Total	Visits	LA Med	LA Dent	LA Tele	RS Med	Total
Jul-22	7,502	632	276	52	9	107	1,076	642	480	259	221	89	1,049
Aug-22	7,644	635	256	74	23	100	1,088	792	506	291	236	177	1,210
Sep-22	6,523	584	238	51	12	119	1,004	615	395	245	240	140	1,020
Oct-22	6,566	594	206	94	19	102	1,015	722	413	247	244	126	1,030
Nov-22	6,815	575	184	99	23	83	964	715	379	196	213	102	890
Dec-22	5,970	592	203	78	19	93	985	635	337	204	235	97	873
Jan-23	5,784	577	191	37	8	94	907	623	374	227	223	88	912
Feb-23	4,897	488	153	46	13	63	763	526	322	183	196	74	775
Mar-23	3,813	450	148	19	5	62	684	378	278	108	198	54	638
Apr-23	6,309	574	203	55	11	92	935	678	361	264	199	91	915
May-23	6,569	611	210	64	7	97	989	811	483	284	217	106	1,090
Jun-23	6,118	606	244	63	26	119	1,058	810	449	272	224	104	1,049
	74,510	6,918	2,512	732	175	1,131	11,468	7,947	4,777	2,780	2,646	1,248	11,451
	Lab			Radiology	Exams			PT		Rural	Health Cli	nics	
	Tests	X Ray	CT	Mammo	DXA	US	Total	Visits	LA Med	LA Dent	LA Tele	RS Med	Total
Jul-23	6,374	643	241	68	20	111	1,083	690	422	227	214	77	940
Aug-23	6,514	675	277	77	21	127	1,177	838	472	288	233	160	1,153
Sep-23	6,075	648	256	49	25	115	1,093	723	363	192	220	110	885
	18,963	1,966	774	194	66	353	3,353	2,251	1,257	707	667	347	2,978
Budget Sept-23	6,200	615	220	70	16	102	1,023	650	500	250	230	120	1,100

12:03

Statement of Revenue & Expenses

Page: 1

Application Code : GL

Through September 2023

Description	Actual	Budget	Variance	YTD Actual	YTD Budget \	Variance	FY Budget	Remaining
Revenue:								
Gross Patient Service Revenue	5,452,990	5,215,978	237,012	16,596,845	15,801,704	795,141	65,148,058	-48,551,213
Deductions from Revenue:								
Contractual Discounts	3,583,972	3,340,884	243,088	10,032,134	10,120,652	-88,518	41,944,608	-31,912,474
Bad Debt	82,000	79,000	3,000	235,000	239,000	-4,000	983,000	-748,000
Charity Care	13,994	6,000	7,994	26,897	18,000	8,897	72,000	-45,103
Supplemental Reimbursement	-2,736	-15,000	12,264	-87,690	-45,000	-42,690	-8,254,000	8,166,310
Net Patient Service Revenue	1,775,759	1,805,094	-29,335	6,390,505	5,469,052	921,453	30,402,450	-24,011,945
Other Operating Revenue	32,578	30,835	1,743	109,694	92,505	17,189	424,648	-314,954
Total Revenue	1,808,338	1,835,929	-27,591	6,500,199	5,561,557	938,642	30,827,098	-24,326,899
Expenses:								
Salaries and Wages	1,593,611	1,555,450	38,161	4,736,159	4,734,190	1,969	19,351,540	-14,615,381
Employee Benefits	301,667	312,930	-11,263	929,282	942,830	-13,548	3,948,200	-3,018,918
Professional Fees	225,631	190,325	35,306	662,719	596,845	65,874	2,683,885	-2,021,166
Supplies	239,559	289,945	-50,386	721,460	819,735	-98,275	3,257,650	-2,536,190
Purchased Services	78,187	77,110	1,077	216,091	227,720	-11,629	976,710	-760,619
Rent	26,745	16,435	10,310	68,731	49,305	19,426	199,220	-130,489
Repairs & Maintenance	89,963	69,240	20,723	238,067	210,285	27,782	858,579	-620,512
Utilities	63,384	58,630	4,754	176,192	178,890	-2,698	648,560	-472,368
Insurance	46,776	45,638	1,138	138,923	136,906	2,017	547,648	-408,725
Depreciation Expense	125,600	125,600	0	376,800	376,800	0	2,173,200	-1,796,400
Other Operating Expenses	112,646	113,585	-939	353,403	356,960	-3,557	2,010,594	-1,657,191

12:03 Statement of Revenue & Expenses

Application Code : GL

Through September 2023

Description	Actual	Budget	Variance	YTD Actual	YTD Budget	Variance	FY Budget	Remaining
Description	ne cuu i	Duaget	variance	TID Accual	TID Duaget	variance	TT Daaget	Tienia III III II
Total Expenses	2,903,768	2,854,888	48,880	8,617,828	8,630,466	-12,638	36,655,786	-28,037,958
-								
Income (Loss) from Operations	-1,095,431	-1,018,959	-76,472	-2,117,629	-3,068,909	951,280	-5,828,688	3,711,059
Non-Operating Rev (Exp):								
District Tax Revenue	258,000	258,000	0	774,000	774,000	0	3,096,000	-2,322,000
Investment Income	138,982	76,200	62,782	435,454	228,600	206,854	914,400	-478,946
Interest Expenses	-45,369	-45,329	-40	-136,966	-136,793	-173	-522,182	385,216
Non Capital Grants & Contr	0	0	0	0	0	0	952,000	-952,000
Other Non-Operating Revenue	42,388	36,110	6,278	118,720	108,180	10,540	432,570	-313,850
Other Non-Operating Expense	-34,490	-32,715	-1,775	-95,060	-97,495	2,435	-353,580	258,520
Gain/Loss On Disp of Property	0	0	0	0	0	0	0	0
-								
Non-Operating Revenue/Expense	359,512	292,266	67,246	1,096,149	876,492	219,657	4,519,208	-3,423,059
-								
Net Income (Loss)	-735,918	-726,693	-9,225	-1,021,480	-2,192,417	1,170,937	-1,309,480	288,000

12:03

User Login Name:waggeny Application Code : GL

September 2023

Page:1

	Beginning	Ending	
Description	Balance	Balance	Variance
Assets:			
Cash & Cash Equivalents	3,476,666	266,842	-3,209,824
Receivables: Patient - Net	2,704,200	2,760,566	56,366
Receivables: Other	106,034	1,118,613	1,012,579
Inventory	704,011	691,095	-12,916
Prepaid Expenses & Deposits	590,636	774,290	183,654
Total Current Assets	7,581,547	5,611,406	-1,970,141
Assets Limited As To Use	37,737,176	38,130,459	393,283
Capital Assets - Net	18,803,544	18,651,993	-151,552
Other Assets	1,982,928	1,982,928	0
Total Assets	66,105,196	64,376,786	-1,728,410
Liabilities:			
Long-Term Debt - CP	1,036,629	916,816	-119,814
AP & Accrued Expenses	946,787	552,310	-394,477
Patient Credit Balances	627,197	628,182	985
Accrued Interest	173,599	69,439	-104,159
Accrued Payroll	1,357,134	1,150,982	-206,152
Deferred Revenue	41,221	27,666	-13,555
Est Third-Party Settlements	753,815	791,318	37,503
Total Current Liabilities	4,936,382		
Long-Term Debt	8,445,994	8,449,894	3,900
Deferred Inflows-Leases	2,008,540	2,008,540	0
Total Liabilities	15,390,916		-795,768
Net Assets	50,714,280	49,781,638	-932,641
Total Liabilities & Net Assets	66,105,196		

	FY24 CAPITAL BUDGET & ASSET ADDITI	ONS AS OF 0	9/30/23			
Department	Item Description (Construction)	Budget	Complete	<u>Actual</u>	Fundir	ng Source
FACILITIES	Pharmacy Relocation (Includes Hood)	900,000		19,571		
FACILITIES	Front of House & Gift Shop	565,000		59,591	Foundation	514,500
FACILITIES	Seismic NPC3 (Anchor Equipment) & SPC 4D	200,000		5,969		
	Minor Use Permit (Parking Structure, Education					
FACILITIES	Center, Acute Care Wing)	150,000		16,159		
FACILITIES	MOB Improvements	130,000				
FACILITIES	New Acute Care Wing	75,000		14,310		
FACILITIES	SNF Nurses' Station	50,000				
FACILITIES	Seal & Stripe Parking Lot	48,000				
FACILITIES	Keyless Entry Doors	45,000		6,055		
FACILITIES	Front of House & Med Surg HVAC	40,000				
FACILITIES	Chemistry Analyzers (2) Construction	25,000		895		
FACILITIES	Hospital Exterior Paint	25,000		9,984		
FACILITIES	OR Doors	20,000				
FACILITIES	MOB Electrical Panel	15,000				
FACILITIES	Med Surg Nursing Station (Pyxis)	10,000		500		
EVS	Soiled Linen Enclosure	6,500				
FACILITIES	RHC LA Interior Remodel/Retrofit	275,000		4,500	Foundation	50,000
FACILITIES	SNF Renovations	150,000				
FACILITIES	Surgery Water Filtration System Construction	20,000				
FACILITIES	Med Surg Windows	200,000				
FACILITIES	SNF Windows	200,000				
FACILITIES	Hospital & MOB Flooring	75,000				
FACILITIES	Parking Lot Expansion	100,000				
FACILITIES	SNF Fence	24,000				
FACILITIES	PFS Remodel	125,000				
FACILITIES	Second Floor Remodel	60,000				
FACILITIES	Education Center	-			Foundation	476,735
FACILITIES	Parking Solution	-				
		\$ 3,533,500		\$ 137,534		\$ 1,041,235

ED/MS/OR/SNF Tell IT EHI FACILITIES NUI IT Voi FACILITIES Hose ED/MS/OR/SNF IV F FACILITIES Fire FACILITIES Pat ED/MS/OR/SNF Det FACILITIES Chi LAB Coa FACILITIES Tra IT Me IT Mic IT Cisc IT Cisc ED Car RESP Blo IT Cisc DIET Wo FACILITIES ER LAB PhI EVS ECH EVS T1E EVS i-M FACILITIES Sto	em Description (Equipment) elemetry Monitoring Equipment HR System (Meditech Expanse) urses' Call System Dice & Messaging System Dispital Camera System Despital	Budget 700,000 600,000 285,000 165,000 150,000 104,000 90,000 85,000 80,000 56,000 55,000 35,000 30,000 25,000 8,000 7,000	X	<u>Actual</u> 29,060 88,839		Fundin Foundation Foundation	109,300 90,000
IT EHIT FACILITIES NUIT Voi FACILITIES Hose ED/MS/OR/SNF IV FACILITIES FIRE FACILITIES Patter ED/MS/OR/SNF Determine FACILITIES Chit LAB Coar FACILITIES Trail IT Medit IT Cisculti ED Carres Bloom Carr	HR System (Meditech Expanse) urses' Call System Dice & Messaging System Dispital Camera System Pumps The Suppression (Server Room) Distinct Transfer Vehicle Defibrillators (4) Diller Diagulation Analyzer Dispital Camera System Pumps The Suppression (Server Room) Distinct Transfer Vehicle Defibrillators (4) Dispital Camera System Dispital Cam	600,000 285,000 165,000 150,000 104,000 100,000 90,000 85,000 67,000 56,000 55,000 35,000 35,000 8,000 8,000 7,000	X				
FACILITIES NUIT VOI FACILITIES HOSED/MS/OR/SNF DEFACILITIES Chi LAB COAFACILITIES Tra IT MEIT CISCULT	urses' Call System Dice & Messaging System Dispital Camera System Di	285,000 165,000 150,000 104,000 100,000 90,000 85,000 67,000 56,000 55,000 35,000 30,000 25,000 8,000 8,000	X				
IT Voi FACILITIES Hos ED/MS/OR/SNF IV F FACILITIES Fire FACILITIES Pat ED/MS/OR/SNF Det FACILITIES Chi LAB Coa FACILITIES Tra IT Me IT Mic IT Cisc IT Cisc ED Car RESP Blo IT Cisc DIET Wo FACILITIES ER LAB PhI EVS ECH EVS T1E EVS i-M FACILITIES Sto	poice & Messaging System pospital Camera System Pumps re Suppression (Server Room) atient Transfer Vehicle efibrillators (4) miller pagulation Analyzer ractor ed Surg & SNF IDF Cabinets icrosoft Veem Cloud Backup sco Firewalls sco Catalyst Network Switches arbon Monoxide Monitor ood Gas Analyzer sco Wireless Controller	165,000 150,000 104,000 100,000 90,000 85,000 67,000 56,000 55,000 35,000 30,000 25,000 8,000 8,000 7,000	X	88,839			
FACILITIES HOSE ED/MS/OR/SNF IV F FACILITIES Fire FACILITIES Pat ED/MS/OR/SNF Def FACILITIES Chi LAB Coa FACILITIES Tra IT Me IT Mic IT Cisc IT Cisc ED Car RESP Blo IT Cisc DIET Wo FACILITIES ER LAB PhI EVS ECH EVS T1E EVS i-M FACILITIES Sto	Pumps re Suppression (Server Room) re Suppres	150,000 104,000 100,000 90,000 85,000 80,000 67,000 56,000 35,000 30,000 25,000 8,000 8,000 7,000	X	88,839			
ED/MS/OR/SNF IV FACILITIES Fire FACILITIES Pat ED/MS/OR/SNF Det FACILITIES Chi LAB Coa FACILITIES Tra IT Me IT Mid IT Cisc IT Cisc ED Car RESP Blo IT Cisc DIET Wo FACILITIES ER LAB PhI EVS ECF EVS T1E EVS i-M FACILITIES Sto	Pumps re Suppression (Server Room) retient Transfer Vehicle refibrillators (4) miller reagulation Analyzer rector red Surg & SNF IDF Cabinets ricrosoft Veem Cloud Backup sco Firewalls sco Catalyst Network Switches rebon Monoxide Monitor rood Gas Analyzer sco Wireless Controller rorktop Freezer	104,000 100,000 90,000 85,000 80,000 56,000 55,000 35,000 30,000 25,000 8,000 8,000	X	88,839			
FACILITIES Fire FACILITIES Pat ED/MS/OR/SNF Def FACILITIES Chi LAB Coa FACILITIES Tra IT Me IT Mid IT Cisc IT Cisc ED Car RESP Blo IT Cisc DIET Wo FACILITIES ER LAB PhI EVS ECH EVS T1E EVS i-M FACILITIES Sto	re Suppression (Server Room) atient Transfer Vehicle efibrillators (4) niller pagulation Analyzer ractor ed Surg & SNF IDF Cabinets icrosoft Veem Cloud Backup sco Firewalls sco Catalyst Network Switches arbon Monoxide Monitor ood Gas Analyzer sco Wireless Controller	100,000 90,000 85,000 80,000 67,000 56,000 35,000 30,000 25,000 8,000 8,000 7,000	X	88,839			
FACILITIES Pat ED/MS/OR/SNF Def FACILITIES Chi LAB Coa FACILITIES Tra IT Me IT Mid IT Cist IT Cist ED Car RESP Blo IT Cist DIET Wo FACILITIES ER LAB PhI EVS ECH EVS T1E EVS i-M FACILITIES Sto	efibrillators (4) miller pagulation Analyzer ractor ed Surg & SNF IDF Cabinets icrosoft Veem Cloud Backup sco Firewalls sco Catalyst Network Switches arbon Monoxide Monitor ood Gas Analyzer sco Wireless Controller	90,000 85,000 80,000 67,000 56,000 35,000 30,000 25,000 8,000 8,000 7,000	X	88,839	F	Foundation	90,000
ED/MS/OR/SNF Def FACILITIES Chi LAB Coa FACILITIES Tra IT Me IT Min IT Cisc IT Cisc ED Car RESP Blo IT Cisc DIET Wo FACILITIES ER LAB PhI EVS ECH EVS T1E EVS i-M FACILITIES Sto	efibrillators (4) niller pagulation Analyzer ractor ed Surg & SNF IDF Cabinets icrosoft Veem Cloud Backup sco Firewalls sco Catalyst Network Switches arbon Monoxide Monitor ood Gas Analyzer sco Wireless Controller	85,000 80,000 67,000 56,000 55,000 35,000 25,000 8,000 8,000 7,000	X	88,839	F	Foundation	90,000
FACILITIES Chi LAB Coa FACILITIES Tra IT Me IT Mid IT Cist IT Cist ED Car RESP Blo IT Cist DIET Wo FACILITIES ER LAB PhI EVS ECH EVS T1E EVS i-M FACILITIES Sto	niller Dagulation Analyzer	80,000 67,000 56,000 55,000 35,000 30,000 25,000 8,000 8,000 7,000					
LAB Coa FACILITIES Tra IT Me IT Mid IT Cisc IT Cisc IT Cisc ED Car RESP Blo IT Cisc DIET Wo FACILITIES ER LAB PhI EVS ECH EVS T1E EVS i-M FACILITIES Sto	pagulation Analyzer pactor ed Surg & SNF IDF Cabinets icrosoft Veem Cloud Backup sco Firewalls sco Catalyst Network Switches arbon Monoxide Monitor ood Gas Analyzer sco Wireless Controller forktop Freezer	67,000 56,000 55,000 35,000 30,000 25,000 8,000 8,000 7,000					
FACILITIES Tra IT Me IT Mid IT Cisc IT Cisc IT Cisc ED Car RESP Blo IT Cisc DIET Wo FACILITIES ER LAB Phl EVS ECH EVS T1E EVS i-M FACILITIES Sto	ed Surg & SNF IDF Cabinets icrosoft Veem Cloud Backup sco Firewalls sco Catalyst Network Switches arbon Monoxide Monitor ood Gas Analyzer sco Wireless Controller	56,000 55,000 35,000 30,000 25,000 8,000 8,000 7,000					
IT Me IT Mid IT Mid IT Cist IT Cist ED Car RESP Blo IT Cist DIET WC FACILITIES ER LAB PhI EVS ECH EVS T1E EVS i-M FACILITIES Sto	ed Surg & SNF IDF Cabinets icrosoft Veem Cloud Backup sco Firewalls sco Catalyst Network Switches arbon Monoxide Monitor ood Gas Analyzer sco Wireless Controller forktop Freezer	55,000 35,000 30,000 25,000 8,000 8,000 7,000					
IT Mid IT Cisc IT Cisc IT Cisc ED Car RESP Blo IT Cisc DIET WC FACILITIES ER LAB PhI EVS ECH EVS T1E EVS i-M FACILITIES Sto	icrosoft Veem Cloud Backup sco Firewalls sco Catalyst Network Switches arbon Monoxide Monitor ood Gas Analyzer sco Wireless Controller forktop Freezer	35,000 30,000 25,000 8,000 8,000 7,000					
IT Cisc IT Cisc IT Cisc ED Car RESP Blo IT Cisc DIET WC FACILITIES ER LAB Phl EVS ECH EVS T1E EVS i-M FACILITIES Sto	sco Firewalls sco Catalyst Network Switches arbon Monoxide Monitor ood Gas Analyzer sco Wireless Controller forktop Freezer	30,000 25,000 8,000 8,000 7,000					
IT Cisc ED Car RESP Blo IT Cisc DIET WC FACILITIES ER LAB PhI EVS ECH EVS T1E EVS i-M FACILITIES Sto	sco Catalyst Network Switches arbon Monoxide Monitor ood Gas Analyzer sco Wireless Controller forktop Freezer	25,000 8,000 8,000 7,000					
ED Car RESP Blo IT Cist DIET WC FACILITIES ER LAB PhI EVS ECH EVS T1E EVS i-M FACILITIES Sto	orbon Monoxide Monitor ood Gas Analyzer sco Wireless Controller orktop Freezer	8,000 8,000 7,000					
RESP Blo IT Cist DIET WC FACILITIES ER LAB PhI EVS ECH EVS T1E EVS i-M FACILITIES Sto	ood Gas Analyzer sco Wireless Controller orktop Freezer	8,000 7,000					
IT Ciscon DIET WC FACILITIES ER LAB PhI EVS ECH EVS T1E EVS i-M FACILITIES Sto	sco Wireless Controller orktop Freezer	7,000					
DIET WO FACILITIES ER LAB PhI EVS ECH EVS T1E EVS i-M FACILITIES Sto	orktop Freezer	•					
FACILITIES ER LAB PhI EVS ECH EVS T1E EVS i-M FACILITIES Sto		6.000					
LAB PhI EVS ECH EVS T1E EVS i-M FACILITIES Sto		6,000					
EVS ECH EVS T1E EVS i-M FACILITIES Sto	R Exam Lights	50,000					
EVS T1E EVS i-M FACILITIES Sto	nlebotomy Carts (2)	19,000					
EVS i-M FACILITIES Sto	CH20 Scrubber	12,500					
FACILITIES Sto	LB Scrubber for OR	7,300					
	Мор	6,700					
FACILITIES Uti	orage Containers	60,000					
	tility Vehicle	30,000					
OR End	ndoscopes	28,000					
ANESTH And	nesthesia Machines	146,000					
RESP EKO	KG Machine	15,000					
		\$ 3,030,500		\$ 117,899			\$ 199,300
		\$ 6,564,000		\$ 255,433			\$ 1,240,535
Not Budgeted							
	anket Warmer		X	8,740			
то			i e				



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

DISTRICT BOARD OF DIRECTORS MEETING

Thursday, October 26, 2023, 2:15 p.m.

George M. Medak Conference Room, Suite 207

MCH Medical Office Building, 29099 Hospital Road, Lake Arrowhead, CA 92352

Or

Microsoft Teams meeting

Join on your computer, mobile app or room device

Click here to join the meeting

Meeting ID: 234 601 921 58 Passcode: MWdfbE

Download Teams | Join on the web

Or call in (audio only)

+1 951-384-1117,,605686207# United States, Riverside

Phone Conference ID: 605 686 207#

Members: Kieth Burkart, President Cheryl Robinson, Vice President

Barrick Smart, Treasurer Cheryl Moxley, Secretary

Barry Hoy, Trustee

Staff Members: Mark Turner, Chief Executive Officer Terry Peña, Chief Operating Officer

Bijan Motamedi, M.D., MEC President Yvonne Waggener, Chief Financial Officer Julie Atwood, Human Resources Director Kristi McCasland, Executive Assistant

OPEN SESSION 2:15 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.

PREVIOUS MINUTES approval Kieth Burkart, President

Action probable

CONSENT AGENDA Kieth Burkart, President

Action Probable

SAN BERNARDINO MOUNTAINS COMMUNITY HOSPITAL DISTRICT

DISTRICT BOARD OF DIRECTORS MEETING Thursday, October 26, 2023, 2:15 p.m.

Page 2 of 3

(Motion will be made to include all items listed)

- 1. Approval of Quality Committee minutes, meeting held September 28, 2023
- 2. Approval of Facilities Committee minutes, meeting held July 27, 2023
- 3. Approval of Finance Committee minutes, meeting held September 28, 2023
- 4. Approval of the attached Policies and Procedures that was sent October 16, 2023

AGENDA ITEMS

Acute Care Wing Project: Legal Counsel Evaluations
 Mark Turner, Chief Executive Officer
 Gerry Hinkley, Community Member
 Action Possible
 2023 Board Self-Evaluations: Due by November 15, 2023
 Kieth Burkart, President

Information Only

Mark Transport

3. CEO Report

a. CA Legislative Updates:

Information Only

AB 242, CAH Physician Employment
 SB 525, Minimum Wage

b. Seismic Committee Information Only

4. COO/CNO Report Terry Peña, Chief Operating Officer Information only

5. Quality Committee Report Cheryl Moxley, Chairperson Report of Meeting held October 26, 2023 Information only

6. Facilities Committee Report Cheryl Robinson, Chairperson Report of Meeting held October 26, 2023 Information only

7. Finance Committee Report Barry Smart, Chairperson

Report of Meeting held October 26, 2023

a. Financial Statements

Action Probable

b. Capital Purchases

Action Possible

c. Investments

Action Possible

8. Board Education Kieth Burkart, President

a. 11/1/2023: AHA Q&A call with Governance Expert Action Possible
 b. 11/8/2023: AHA Role of Governance in Quality & Safety

c. 11/17/2023: CSDA "Introduction to Special District Finances"

d. 02/11-14/2024: AHA Rural Healthcare Leadership Conference, Orlando FL

9. Discussion Topic Suggestions

Kieth Burkart, President
Information only

ADJOURN TO CLOSED SESSION

SAN BERNARDINO MOUNTAINS COMMUNITY HOSPITAL DISTRICT

DISTRICT BOARD OF DIRECTORS MEETING Thursday, October 26, 2023, 2:15 p.m.

Page 3 of 3

CLOSED SESSION AGENDA ITEMS

(Closed session pursuant to Govt. Code Section 54954.5

1. <u>Hearings</u>
Subject matter: Staff Privileges
Re: Credentialing Recommendations
Bijan Motamedi, M.D., MEC President
Action Probable

Closed session pursuant to Cal. Health & Safety § 32155

Closed session pursuant to Cal. Health & Safety § 32155

Closed session under Cal. Health & Safety § 32106

Closed session under Cal. Gov. Code § 54957

2. Medical Executive Committee Report

Bijan Motamedi, M.D., MEC President

Subject Matter: Report of Medical Executive Committee Information only Meeting minutes

3. Strategic Initiatives/Services/Programs Update

Yvonne Waggener, Chief Financial Officer

4. Executive session Board Members & CEO Only

Subject Matter: Personnel Issues Action Possible
Re: CEO Compensation

RETURN TO OPEN SESSION

1. Closed Session Report Kieth Burkart, President

2. Public Report of Decisions Kieth Burkart, President

NEXT BOARD-ATTENDED MEETINGS

Thursday, November 30, 2023 at 1:00 p.m.

(Days & times are subject to change so please refer to the posted agenda for exact times)

Information Only

FINAL ADJOURNMENT

San Bernardin	o Mountains Community Hospital Board of Directors Meetings											
Attendance Matrix - 202	23			ı	ı	ı	ı	ı	ı	ı		
Board Members	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ост	NOV	DEC
Kieth Burkart	1	1	1	1	1	1	1	1	Е			
Cheryl Robinson	√	√	√	√	√	√	√	√	√			
Cheryl Moxley	√	√	√	√	Α	√	√	√	√			
Barry Smart	√	√	√	√	√	√	√	√	√			
Barry Hoy	√	√	√	√	√	√	√	√	√			D
												A
Staff Members												
Mark Turner	√	1	√	V	V	√	√	√	√			R
Terry Peña	√	√	V	√	Е	√	√	√	√			K
Yvonne Waggener	√	√	√	√	√	√	√	√	√			
Julie Atwood	√	√	√	√	√	Е	√	√	√			
Kim McGuire	1	√	√	√	√	√	√	√	√			
Kristi McCasland	√	√	√	√	4	√	√	1	√			
Bijan Motamedi, M.D.	Е	√	√	√	√	Е	√	√	√			
Walter Maier, M.D.	n/a	n/a	n/a	n/a	n/a	√	n/a	n/a	n/a			
Comment						1	1	1		1		1
	 √	Pres	sent		E	Excus	sed		A	Abse	nt	



TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
1.0 Call to Order:	Cheryl Robinson, Board Vice President, called the Board of Directors meeting to order at approximately 2:15 p.m.	The meeting was called to order
2.0 Board Members Present:	Cheryl Robinson, Vice President Cheryl Moxley, Board Secretary Barrick Smart, Board Treasurer Barry Hoy, Board Trustee	Quorum present
Members Absent:	Kieth Burkart, Board President	
Recording Secretary	Kristi McCasland, Executive Assistant	
Staff Members Present:	Mark Turner, Chief Executive Officer Terry Peña, Chief Operating Officer/Chief Nursing Officer Yvonne Waggener, Chief Financial Officer Julie Atwood, Human Resources Director Kim McGuire, Community Development Director Leslie Plouse, Quality Director Bijan Motamedi, M.D., MEC President	
Guests:	Don Larsen, MD – Community Member Gerry Hinkley, Community Member John McLaughlin, Public	
3.0 President's Comments:	Robinson wished Burkart well.	None
4.0 Board Member's Reports:	None	None
5.0 Public Comments:	None	None
6.0 Previous Minutes:	On a motion made and seconded the Minutes from the Board of Directors meeting of August 24, 2023 and Special Board of Directors meetings of September 5, 2023 and September 11, 2023 were approved as written.	On a motion made and seconded the Minutes from the Board of Directors meeting of August 24, 2023 and Special

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
		Board of Directors meetings of September 5, 2023 and September 11, 2023 were approved as written. M (Smart) / S (Moxley) / C 4 Ayes / 0 Nays / 0 Abstain / 1 Absent
7.0 Consent Agenda:	 The following Consent Agenda items were reviewed: Approval of Quality Committee minutes, meeting held August 24, 2023 Approval of Human Resources Committee minutes, meeting held June 30, 2023 Approval of Finance Committee minutes, meeting held August 24, 2023 Approval of the attached list of Policies and Procedures that was sent September 18, 2023 (see list attached to the September Board Packet). 	On a motion made and seconded, the Consent Agenda items were approved as presented. M (Hoy) / S (Robinson) / C 4 Ayes / 0 Nays / 0 Abstain / 1 Absent
8.0 Agenda 8.1 ATC Cell Tower Lease Purchase Agreement	Turner reported that the ATC Cell Tower Lease Purchase Agreement has been negotiated and is ready for approval; and the terms remained the same (\$850k buyout). He noted that Smart and Hoy were part of a subcommittee that reviewed the contract language and the financial aspects of the offer; and that MCH's legal counsel reviewed and approved the agreement. Once approved, MCH will execute the agreement first, and ATC will countersign. Once ATC countersigns, the 30-day clock starts ticking for the agreement to close.	On a motion made and seconded, the Board approved the execution of the ATC Cell Tower Lease Purchase Agreement. M (Smart) / S (Moxley) / C 4 Ayes / 0 Nays / 0 Abstain / 1 Absent
8.2 CEO Report a. Construction and Land Use Approval Update	 Turner reported on the progress of the construction project: Land Use Permit - New Acute Care Project: Turner reported that a public meeting was held on August 10, and that no community members attended. The San Bernardino County Zoning Administrator approved the Minor Use Permit Project No. PROJ- 	Information only

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
	2023-00047 to allow construction of the Acute Care Project on August 10, 2023. The Acute Care Project is final with the county; the initial approval is valid for a period of three years. Next steps will be to work with the architect and engineer on the final design and construction drawings that will be needed to obtain the actual construction permits.	
	• Land Use Approval (Education Center/Parking Solution): Turner will be working with Brent McManigal (Land Use Attorney) and our engineer to look at parking options to bring to the Board for approval. We are hoping to submit our application for the Education Center/Parking Solution by January 2024. He noted that the hospital needs additional parking now, and that we are looking into implementing carpooling incentives for staff in the meantime.	
	• Pyxis Med/Surg Install: HCAI granted occupancy on June 16, 2023. The new area will house the House Supervisors and the Pyxis unit. The small conference room will remain as the Med/Surg nurses station, and will be reconfigured to meet the nursing staff's needs.	
	• Registration Project: HCAI granted occupancy on September 8, 2023 and Registration staff moved into their new area. The final additions are being done on the waiting area; once completed, the front doors will open. Work has already begun on the new eligibility offices; it is estimated this project will be completed in 3-5 months.	
	Pharmacy Project: The construction contract was signed with Signature Construction. Asbestos abatement will need to be done before construction can begin.	
	Gift Shop/Solarium: This project has not started yet. The architect will be meeting with the interior designer to develop a game plan.	

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
	 Rural Health Clinic (RHC) Remodel/AHA Compliance: The architect's contract has been signed. The architect will be meeting with the interior designer and securing sub-contractors for the project. Construction will be planned in phases so it will not disrupt the clinic operations. 	
b. Seismic Committee	Turner reported that the California Hospital Association (CHA) is encouraging hospitals to develop a seismic committee to get support from community members to lobby the state on seismic issues. Committee members include Gerry Hinkley, Peter Venturini, Tom Madrigal and Charlie Harrison. Planning meetings will begin within the next 30 days.	Information only
c. SB525	Turner reported that SB525, the Health Care Worker Minimum Wage bill passed and is awaiting the Governor's signature. SB525 will increase the minimum wage of healthcare employees to \$25 an hour starting January 1, 2024. The amended bill included parameters for rural hospitals or hospitals with a high government payer mix, which includes Mountains Community Hospital (MCH). Starting in June 2024, MCH would have to pay workers \$18 an hour. The minimum wage after 2024 would be increased by 3.5% annually until it reaches \$25 in June 2033. Turner noted that because we are in close proximity to larger hospitals that are required to pay \$25 an hour, we will likely be paying higher than the required \$18 an hour in order to compete.	Information only
8.3 COO/CNO Report	 Peña reported on the following: The annual employee health screenings will be conducted October 16-20, 2023 from 7:30-11:30 a.m. Flu shots and COVID shots will be offered at no charge for employees, medical staff and Board members. MediTech: MediTech Go Live is scheduled for 12:01 a.m. on October 1, 2023. MediTech representative and IT staff will be on 	Information only

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
	site starting at 10 p.m. on September 30. Centriq will be taken off line at 10 p.m. on September 30, and staff will utilize down time procedures during that timeframe. Peña noted that the IT staff did an awesome job during the build and implementation of the new EMR system.	
	• Journey Mapping Project: We are working with WIPFLI on this project. The first committee meeting was held, and the charter and gates were developed. WIFPLI will be providing us a dialog to use when asking patients to participate in the journey-mapping project.	
	• BETA Heart: Six staff members recently attended the BETA Heart quarterly conference. A new employee engagement survey will be conducted at the beginning of 2024. Leadership rounding is going well and Senior Managers have received good input and engagement from staff during these rounds.	
	• Strikes: Kaiser RN's and Tenet Techs will be going on strike; MCH may receive potential diversions due to these strikes. MCH will be ready in the event patients are diverted here.	
	• SB County Public Health Update: San Bernardino County is expecting a spike in COVID infections following the Thanksgiving holiday.	
8.4 Quality Committee Report a. Report of meeting held	Moxley reported on the Quality Committee meeting:	Information only
September 28, 2023	Performance Improvement: a. Meds to Beds: Our target for 2023 is that 100% of IEHP members who are discharged from an IP setting are offered the	
	Meds to Beds program. For the month of August 2023, we were at 75%.	
	b. <u>Breast Cancer Screening</u> : Our target for 2023 is that 55.29% of female IEHP patients ages 52-74 receive a mammogram; as of	

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
	August 2023, we are at 49.60%.	
	c. Colon Cancer Screening: Our target for 2023 is that 50.38% of	
	IEHP/MediCal patients ages 45-75 receive a screening for	
	colorectal cancer; as of August 2023, we are at 41.55%.	
	d. 2023 PI Priority #1: Hand Hygiene: Baseline data was collected	
	in August for Med/Surg, ED and RHC. Committee meetings	
	have been stalled due to MediTech implementation.	
	e. 2023 PI Priority #2: Implementation of new EHR: Deferred;	
	update will be given by COO/CNO at the September 28th Board	
	of Directors meeting.	
	f. 2023 PI Priority #3: Patient Experience: E-surveys were initiated	
	for ED patients in early September; response rates increased from	
	4.1% to 18.4%. E-surveys will be rolled out for Rural Health	
	Clinic and Dental patients soon. Paper surveys will continue for Med/Surg (CMS requirement). Patient Journey Mapping will be	
	rolled out in Med/Surg. Quality Director will assume	
	management of the patient survey boxes in Radiology, RHC and	
	Lab.	
	Euo.	
	2. Patient Satisfaction Surveys (Inpatient & ED):	
	a. <u>Inpatient</u> : In August 2023, there were four responses, with a 50%	
	top box score (86.98 mean score). Verbatim comments were	
	reviewed.	
	b. <u>ED</u> : In July 2023, there were fourteen responses with a 67.63%	
	top box score (85.91 mean score). Verbatim comments were	
	reviewed.	
	2 Pagulatary Activities and Undates:	
	3. <u>Regulatory Activities and Updates:</u> a. <u>SNF Life Safety Survey 5/4/2023</u> : Two fallouts were found in	
	August; all issues were corrected.	
	b. SNF CMS Recertification Survey 4/17/2023-4/20/2023: 100%	
	compliance to plan of correction audits in August.	
	c. TJC Lab Triennial Reaccreditation Survey 5/3/2022-5/5/2022:	
	Critical Results documentation stalled due to Orchard report	

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
	issues-will resume in September. d. <u>CDPH Complaint Investigation 7/22/2022</u> : Investigation remains open.	
8.5 Human Resources Committee Report a. Report of meeting held September 28, 2023	 Smart reported on the Human Resources Committee meeting: Turnover: In Q3, our turnover was 3.16% (2-terminations; 1-RN quit; 3-moved/better job offer). Atwood reported that we are not utilizing travelers as much, and that the ED and MedSurg units are fully staffed. Currently HR is recruiting for a CLS, FT Hospital Supervisor and an Education Manager. Retirement Plan: We will be changing the eligibility criteria for employees to be able to participate in the hospitals retirement plans (currently employees have to wait 1 year before they can participate in the hospital's 401a & 457b plans). A request will be sent to Voya & UBS to change our employee eligibility dates to:	Information only
8.6 Finance Committee Report a. Report of meeting held September 28, 2023	Smart reported on the Finance Committee meeting: 1. <u>Financial Statements:</u> FY24 Financial Statements as of and for the two (2) months ended August 31, 2023. Comparative statistics and	On a motion made and seconded, the Financial Statements as of two (2) months ended August 31, 2023 were accepted as presented.

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
	selected financial indicators were reviewed with the Board. All outstanding AP invoices are being processed prior to the October 1,	M (Hoy) / S (Moxley) / C
	2023 conversion to the new MediTech system.	4 Ayes / 0 Nays / 0 Abstain / 1 Absent
	2. <u>Capital Purchases:</u> The FY24 Capital Purchases for the two (2) months ended August 31, 2023. We have not spent a lot of money on capital purchases yet. It was reported that the hospital took ownership of the patient transport van, which was funded by the Foundation, last month.	
	Peña reported that they are working to renegotiate the quotes for the tower for our surgery scopes. In the meantime, the vendors brought us trial equipment for us to utilize until November 16 th . Once the quotes are finalized, this item will be brought back to the Finance Committee/Board for review/approval.	
	3. <u>Investments</u> : LAIF and UBS statements for month ended August 31, 2023 were presented and reviewed.	
8.7 Board Education	None	None
8.8 Discussion Topic Suggestions:	None	None
9.0 Adjourn to Closed Session:	The Board adjourned to "Closed Session" at approximately 3:19 p.m.	Information only
10.0 Return to Open Session:	The Board returned to "Open Session" at approximately 3:37 p.m.	Information only
10.1 Closed Session Report:	 Per Robinson, the following items were reported on during "Closed Session": Medical Staff Reports of September 28, 2023 and Credentialing from the September 26, 2023 Medical Executive Committee meeting. Risk Management Discussion: Case Name Unspecified Executive Session: Personnel Issues: CEO Compensation 	Information only



DISTRICT BOARD MEETING MINUTES

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
11.0 Public Report of Decisions	The Board accepted the Medical Staff Report of September 28, 2023,	On a motion made and seconded,
11.1 Hearings; Staff Privileges;	and Credentialing from the September 26, 2023 Medical Executive	the Medical Staff Reports of
Credentialing Recommendations	Committee meeting.	September 28, 2023, and
	Approvals were as follows:	Credentialing from the
	• New Appointments/Provisional Staff:	September 26, 2023 Medical
	o BINOR B. SAID, MD – Tele-Radiology (SOL via Chicago	Executive Committee meeting
	Teleradiology)	were accepted as recommended
	• Provisional Extensions:	by the MEC.
	 JASON L. MORRIS, MD – Emergency Medicine & Family 	
	Practice	M (Smart) / S (Moxley) / C
	 Advancement from Provisional Staff/Regular Staff: 	
	 JAYME LOPEZ, FNP – Nurse Practitioner-Psychiatry – 	4 Ayes / 0 Nays / 0 Abstain / 1 Absent
	MCH	
	 SHAYNA T. WALKER, MD -Psychiatry – MCH 	
	Rural/Telemedicine clinic	
	• Reappointments:	
	o LUDWIG J. CIBELLI, JR., MD – Emergency Medicine &	
	Family Practice	
	o MELINDA MUELLER, PsyD – Psychology – MCH	
	Rural/Telemedicine Clinic	
	• <u>Staff Status Changes</u> : None	
	• Revision/Increase of Privileges: None	
	• <u>Terminations/Resignations</u> :	
	o Tahir Alkhairy, MD	
	o Lee W. Beville, DO	
	o Anthony Bullard, MD	
	o Jeffrey Caverly, MD	
	o James Collins, MD	
	o Charles Davis, MD	
	Supriya Gupta, MD Christian Inqui, MD	
	o Christian Ingui, MD	
	David Ishimitsu, MDAaron Jun, MD	
	,	
	o Nicolaus Kuehn, MD	

DISTRICT BOARD MEETING MINUTES

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
	Surender Kurapati, MD Paul Lampert, MD Daniel Lucas, MD Kamiar Massrour, MD Patrick McCarthy, MD Gregory Orth, MD Jose Ospina, MD Atul Patel, MD Huma Qureshi, MD Peilin Reed, MD John Sanico, MD Faranak Sadri Tafazoli, MD Justin Shafa, MD Alix Vincent, MD David Wells, MD Lance Williams, MD Fervision of Privileges: None Leave of Absence Requests: None	ACHOIVI OLLOW-CI
	The Board accepted the 2023 Medical Bylaws as approved by the Medical Executive Committee on September 26, 2023.	On a motion made and seconded, the Medical Staff Bylaws 2023 were accepted as recommended by the MEC. M (Smart) / S (Moxley) / C
12.0 Next Board-Attended Meetings:	The next Regular Board of Directors meeting will be on <u>Thursday</u> , <u>October 26, 2023</u> at 1:00 p.m. Meeting to be held in the George M Medak Conference Room (Suite 207) in the Medical Office Building.	4 Ayes / 0 Nays / 0 Abstain / 1 Absent Information only



DISTRICT BOARD MEETING MINUTES

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
13.0 Final Adjournment:	There being no further business to discuss, the Board of Directors meeting adjourned at approximately 3:38 p.m.	Meeting adjourned

By: _		
	Cheryl Moxley, Secretary of the Board	
By:		
Бу	Kristi McCasland, Recording Secretary	_

Board of Directors Meeting - October 26, 2023 Policy Review/Approval

Board Approvals: (29 Documents)

- I. New Policies / Forms / Attachments: (1)
 - a. Leadership (LD) Policies: (1)

Business Courtesies Compensation to Physicians and their Family Members (Policy) - LD

- II. Updated Policies / Forms / Attachments: (0)
- III. Trienniel Renewal Only (no / minor changes): (28)
 - a. Environment of Care (EC) Policies: (3)

Air Conditioning, Air Handling Equipment and Systems - UT-015 (Policy) - EC

Equipment, Safe Medical Device Reporting - ME-014 (Policy) - EC

Key Control - SEC-011 (Policy) - EC

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

Disaster Plan - EP-008 (Policy) - EM

c. Life Safety Management (LS) Policies: (1)

Life Safety Management Plan Flow Chart (Attachment) - LS

d. Finance Department Policies: (1)

Hospital Credit Cards (Policy) - Finance Department

e. Purchasing Department Policies: (22)

Capital/Non-Capital Equipment (Policy) - Purchasing Department

Charge Master (Policy) - Purchasing Department

GL Code Determination (Policy) - Purchasing Department

Inventory, Annual Inventory (Policy) - Purchasing Department

Inventory-Central Inventory Control File (Policy) - Purchasing Department

<u>Issuing Stock From the Storeroom (Policy) - Purchasing Department</u>

New Product Committee (Policy) - Purchasing Department

Ordering Non-Stock & New Items (Policy) - Purchasing Department

Ordering of Hospital Forms-Evaluation of New or Changed Forms (Policy) - Purchasing Department

Ordering of Hospital Forms-Procedures for Ordering (Policy) - Purchasing Department

Ordering of Hospital Forms-Vendors (Policy) - Purchasing Department

Ordering Supplies (Policy) - Purchasing Department

Ordering Supplies-Procedure (Policy) - Purchasing Department

Procedure for Restocking Departments using PAR Sheet (Policy) - Purchasing Department

Purchase of Supplies From The Hospital (Policy) - Purchasing Department

Purchase Order Control and Packing Slips (Policy) - Purchasing Department

Receiving (Policy) - Purchasing Department

Request for Quotation (Policy) - Purchasing Department

Sales Representatives (Policy) - Purchasing Department

Scope of Service, Purchasing (Policy) - Purchasing Department

Storeroom Hours of Operation & After Hours/Emergency Supplies (Policy) - Purchasing Department

Storeroom Returns (Policy) - Purchasing Department

SAN BERNARDINO MOUNTAINS COMMUNITY HOSPITAL DISTRICT SENIOR MANAGEMENT TEAM MEMORANDUM

TO: Board of Directors

FROM: Mark Turner, Chief Executive Officer

DATE: October 23, 2023

SUBJECT: Evaluation and Selection of Project Legal Counsel

A Request for Proposal ("RFP") was sent to four firms who we (Gerry Hinkley, Gary Hicks, and myself) believed had particular areas of expertise and experience that would qualify them to provide needed legal services relating to the District's upcoming hospital construction project. A copy of the RFP is attached as **Exhibit A**. RFPs were sent to the following law firms on August 4, 2023: Best Best & Krieger, Goldfarb Lipman, Hansen Bridgett and Nave Law. Proposals were received from all four firms on or before August 23, 2023. A summary of the proposals received from each of the four firms are provided below and on **Exhibit B**.

LAW FIRM PROPOSALS, ANSWERS TO INITIAL QUESTIONS AND INTERVIEWS

Best Best & Krieger (BB&K): BB&K answered our questions and responded to the areas we requested responses to in our RFP. However, their proposal did not provide engagements with construction projects for other healthcare districts in rural communities, but they did provide several public projects where they assisted public agencies (a health plan, community college district, several cities, a winter park, school districts, airport authority, water districts and a flood control district) in the areas of entitlements, the selection of consultants, the drafting of contract documents, contract compliance, evaluation of designbuild vs. design, bid, build, project financings and tax measures. BB&K did provide details in describing the firm's experience in working with one healthcare district project that is similar to our project (Seneca Healthcare District) in their response to our initial questions after their proposal was submitted. Their proposal indicated that Mary Beth Coburn, Michael Maurer and Kimberly Byrens would provide approximately 50% of the work on our project if they are engaged, and that Lutfi Kharuf would provide 5% of the work and would be the lead attorney on the project. The proposal indicated that the remaining 45% of the work would be conducted by other attorneys at BB&K not specified in their proposal. In a subsequent response to initial questions, BB&K indicated that Mary Beth Coburn and Michael Maurer would serve as lead attorneys, would draft most of the documents required for procurement and construction matters and provide strategies for delivery of the project. Mary Beth is also licensed as a professional civil engineer and has experience in design and construction of public facilities. Although not included in the proposal, BB&Ks subsequent response to our initial questions indicated that Grant Orbach would provide support in drafting various construction documents and that Lutfi's role would be in the area of parcel tax measures, which is his area of expertise. However, none of the client references provided by BB&K were overseen by Mary Beth, Michael or Kimberly but instead were counseled by Noel Caughman, Jim Priest and Grant Orbach. Furthermore, during their interview when asked to discuss their recent healthcare projects over the past 7 years that were most similar to our project, they had difficulty naming even one healthcare district project. They did discuss the Seneca Healthcare project but seemed to be hesitant to provide details regarding that project.

All of the attorneys listed in BB&K's proposal are partners at the firm and their listed hourly rate is \$560. If any Of Counsel attorneys work on our project their hourly rate is \$525 per hour, and if any associates

work on our project, their rate is \$375 per hour and BB&K's estimate for their services for the entire project is \$400,000.

Goldfarb Lipman ("GL"): GL's proposal indicated little or no experience with respect to Healthcare District construction projects, HCAi project experience, and their proposal responses did not always directly answer questions contained in the RFP. Due to their limited experience in the areas that we were interested in hearing from them, we decided to eliminate GL from the selection process and not to interview their firm or their references.

Hanson Bridgett ("HB"): HB answered our questions and addressed the areas we requested responses to in our RFP. They provided several project engagements that were with healthcare districts in rural communities and critical access hospitals as well as a larger District Hospital (Last Frontier Healthcare District, Mayers Memorial Hospital District, Plumas Hospital District, Salinas Valley Memorial Healthcare District, Southern Mono Healthcare District and Surprise Valley Hospital District) where they assisted these districts in the areas of entitlements, the selection of consultants, the drafting of contract documents, contract compliance, evaluation of design-build vs. design, bid, build, and project financings. Hanson Bridgett provided the most comprehensive and complete proposal in describing their firm's experience in working on similar projects to our hospital construction project. Their proposal indicated that Lisa Dal Gallo, Alan Bishop and Sean Herman would provide approximately 90% of the work on our engagement. Their proposal indicated that Lisa would be the District's lead, that Alan would draft most of the documents required (RFPs, contracts, competitive bid documents, etc.) and that Lisa would review and assist in the finalization of those documents. Sean's role would be primarily in environmental areas. Lisa's experience as an attorney in construction law is extensive and she has specialized in design-build projects with hospital districts but also includes several years with Turner Construction in the areas of project management and construction engineering. All projects included in the proposal were overseen by Lisa and Allen and were started and/or were completed over the past seven years.

Lisa's hourly rate is \$675, Alan's hourly rate is \$585 per hour, and Sean's rate is \$490 per hour and their estimate for fees and expenses for the entire project is \$233,000. However, that estimate indicated that it excluded some services that would be difficult to estimate and therefore I think a more reasonable estimate is \$300,000.

Nave Law/Scott Nave ("NL"): NL answered our questions and addressed the areas we requested responses to in our RFP. His proposal provided several project engagements that were with other healthcare districts in rural communities and critical access hospitals (Tehachapi Valley Healthcare District, Bear Valley Community Healthcare District, Kern Valley Healthcare District and Southern Inyo Healthcare District) and he has assisted these districts in the areas of entitlements, the selection of consultants, the drafting of contract documents, contract compliance, evaluation of design-build vs. design, bid, build, project financings and tax measures. Our main area of concern was that Scott is a sole practitioner and whether he would have the breadth of knowledge, time, and experience to meet all of the District's needs in this engagement. His client references felt that he did have the experience and qualifications in meeting their needs on their projects that are similar to our project, and that he was also timely and responsive.

Scott's hourly rate is \$350 per hour and his estimate for his services for the entire project is approximately \$150,000.

LAW FIRM REFERECE INTERVIEWS

With respect to the interviews of law firm references, by and large all references were very complementary of all three firms, the attorneys they worked with and the quality of services provided.

Best Best & Krieger: Stephen DelRossi, the Interim CEO at Northern Inyo Healthcare District indicated that he had only been at the District for one year and had only limited contact with BB&K attorneys during their project due to his limited employment at Northern Inyo. Stephen indicated that he had worked with Noel Caughman as the District's general counsel and Jim Priest regarding tax issues pertaining to the District's tax measure. With respect to the two other reference interviews for BB&K (John Hennelly, CEO at Sonoma Valley Healthcare District and Shawn McKenzie, CEO at Seneca Healthcare District), the attorneys who worked on these two engagements were Noel Caughman as lead attorney and Jack Orbach who drafted most of the documents. All three of these individuals indicated that they were pleased with the work of Noel, Jim and Jack.

Hanson Bridgett: With respect to reference interviews for Hanson Bridgett, all three references (Ryan Harris, COO at Mayers Memorial, Darren Beatty, COO at Plumas and Kevin Kramer, CEO at Lost Frontier) were highly complementary of Lisa Dal Gallo, Allen Bishop and Shawn Herman, in particular of Lisa who all three believed was very knowledgeable and protected the District's interests in meeting state regulatory requirements, in the drafting of contracts, in protecting the District's interests and in the resolution of consultant and contractor issues. All three references made similar statements that Lisa, in particular, was aggressive in her approach to negotiating and drafting contracts, but very good.

Nave Law/Scott Nave: With respect to reference interviews for Scott Nave, all three references (Evan Rayner, CEO at Bear Valley, Peter Spiers, CEO at Southern Inyo and Tim McGlew, CEO at Kern Valley) were very complementary of Scott's work and they felt that he was easy to work with, that he was experienced and had knowledge in the handling of their project related issues, including all of the areas we asked about, including project matters, tax measures and financings and took ownership of the engagement. None of the references interviewed indicated that there was any area where they felt Scott was lacking or not qualified to handle issues on their projects, financings or tax measures.

CONCLUSION

Our conclusion is that we believe the District would be best served by engaging Hanson Bridgett to act as its project legal counsel but that it would be well served by engaging any of the three law firms being considered. We base our conclusion on the experience and background of Lis Dal Gallo, the lead attorney with HB, the input provided by that firm's references, our assessment of the firm's proposal (see **Exhibit B**), its answers to our initial questions and their virtual interview. Finally, their ratings were highest from all evaluations from the District's evaluation team (see **Exhibit C**). Although they may be more expensive than the other two firms, we believe that the District's interests would be best served by utilizing the services of HB in this process no matter the type of construction selected by the District (design-build or design, bid build). That being said, we believe that to the extent that cost is a major factor in the selection of its project counsel, we would want you to strongly consider Nave Law as the District's project legal counsel. Whomever is selected, we would want to be very careful in negotiating the engagement letter on the topics of budgets, invoicing, pass through of costs and lead staffing.

Our quantitative evaluation of the three law firms who were interviewed is contained in **Exhibit C**.

Proposals submitted by each firm, supplements to the initial proposals, their answers to our initial questions and/or notes regarding our interviews of the law firms and their references are all available from the administration office should you wish to review these materials in detail.

REQUEST FOR PROPOSALS

FOR

DISTRICT LEGAL SERVICES

SAN BERNARDINO MOUNTANS COMMUNITY HOSPITAL DISTRICT

August 4, 2023

SAN BERNARDINO MOUNTAINS COMMUNITY HOSPITAL DISTRICT REQUEST FOR PROPOSALS FOR DISTRICT LEGAL SERVICES

Submission Guidelines:

San Bernardino Mountains Community Hospital District (the "District") is seeking proposals from attorneys to act as special legal counsel to the District with respect to its planned hospital construction project and related financings. The District owns and operates a Critical Access Hospital facility with 17 licensed acute care beds and 20 licensed distinct part skilled nursing beds with two rural health clinics and various outpatient services. The District plans to expand its current hospital facility located in Lake Arrowhead to meet SB 1953 earthquake requirements and to meet the future needs of the community it serves (the "Project"). A preliminary Project description and a preliminary sources and uses of funds statement relating to the Project and its plan of finance are attached for your review and consideration. Also attached are the District's audit report for its fiscal year ended June 30, 2022, and its internally prepared financial statements for its recently completed fiscal year ended June 30, 2023. The services being requested relate to legal matters pertaining to the Project, including entitlement issues, state and local governmental approvals, the method of construction to design and construct the Project (design-build versus design, bid, build), the selection and engaging of various Project related consultants (project manager, environmental consultant, design architect, general contractor, etc.), the drafting and negotiation of construction related documents with the general contractor and other consultants, advising the District with respect to construction issues during and after construction of the Project, advising the District on a possible ad valorem or sales tax measure to provide additional funding and a source of repayment for the Project, and providing legal advice with respect to matters associated with the securing of USDA direct loans and possibly other tax-exempt financings (general obligation bonds, revenue bonds and/or municipal lease financing) as special counsel to the District. However, we are not seeking bond, disclosure, underwriter's or tax counsel services with respect to this engagement.

The District has engaged the services of G.L. Hicks Financial LLC as its municipal advisor to provide financial advisory services with respect to the USDA direct loan financing and any other financing programs needed to fund the Project and has engaged the services of John Ferguson, AIA, to provide criteria architectural services (programming, schematic design and design development) with respect to the Project (see the attached Project Design Process Chart overview). The District may consider going to voters for approval of either an ad valorem or sales tax measure to provide an additional source of funding for the Project in 2025 and to secure USDA direct loan financing in September of 2024, with commencement of construction of the Project to begin in 2025, subject to HCAI (previously OSHPD) review and permitting.

Proposals must be submitted via email clearly marked "Proposal to San Bernardino Mountains Community Hospital District for Special Legal Counsel Services." All proposals must be signed by an officer of the proposing firm who has the authority to commit the proposing firm to the services provided at the fees and expenses quoted therein.

Electronic copies of proposals are to be submitted to the following individuals:

San Bernardino Mountains Community Hospital District Mark Turner, Chief Executive Officer mark.turner@mchcares.com G.L. Hicks Financial LLC Gary Hicks, President gary@glhicks.com

All electronic copies of proposals must be received at both locations by 12:00 noon, August 23, 2023.

Proposal Format:

All proposals shall conform to the following format:

- 1. A brief letter of transmittal which summarizes your firm's proposal and qualifications in no more than 1 page.
- 2. Responses to each question or request for information (the "Proposal Requirements") should begin on a new page with the question repeated at the top of that page and your response contained fully thereafter with a total of no more than 9 pages. Responses to specific Proposal Requirements should be set forth in sequential order as indicated below.
- 3. Your proposal should not exceed a total of ten pages, including the transmittal letter and your responses to the Proposal Requirements, but excluding an exhibit listing your firm's experience in response to Proposal Requirement 3 below.

Proposal Requirements:

- 1. Describe your firm's organizational structure and its areas of practice as it relates to this proposal.
- 2. List the names and experience of attorneys to be assigned to this engagement. Only include those individuals who will be directly and actively involved on this engagement. Indicate each individual's estimated level of involvement as a percentage of your firm's total involvement relating to services to be provided and their area of expertise. Indicate if you will subcontract any work out to other firms and describe fully what work will be provided by others, if any.
- 3. Provide a listing of relevant experience in the providing of legal services to California Hospital/Healthcare Districts since 1/1/2015, including the dates of each engagement and a listing of the attorneys who worked on each engagement:
 - a. Indicate and describe where work included services provided on entitlement and state & local approvals.
 - b. Indicate and describe where work included services provided in drafting and negotiating construction documents.
 - c. Indicate and describe where work included advising on contract compliance during and after construction.
 - d. Indicate and describe where work included the design-build method of construction.
 - e. Indicate and describe where work included USDA direct loan financing or other tax-exempt financing (other than as bond, disclosure or underwriter's counsel).
- 4. Discuss your firm's plan and staffing for the providing of legal services in the following areas of expertise:
 - a. Project related entitlement issues and other state and local approvals required for the Project.
 - b. The method of construction considered to design and construct the Project (design-build versus design, bid, build).
 - c. Selection and engaging of various Project related consultants (including any public bid requirements).
 - d. Drafting and negotiation of construction related documents with the general contractor and other consultants.
 - e. Advising on construction issues during and after construction of the Project.
 - f. Advising on a possible ad valorem or sales tax measure to provide additional funding for the project.
 - g. Legal advice on matters associated with the securing of USDA and other tax-exempt financings.
- 5. Provide a firm quote of your hourly fees for each attorney and staff who you anticipate will work on this engagement and estimated expenses to provide the services needed for the engagement, as indicated above. Also, please provide an estimate of your total fees, based on the information provided above. Include any fees and expenses that will be paid to other firms that you plan to subcontract work out to as indicated in your response to Proposal Requirement 2 above.
- 6. Provide a listing of no more than three references for California Hospital/Healthcare Districts.
- 7. Provide specific reasons as to why your firm should be selected as special legal counsel for the District. Also provide any additional information or recommendations you believe to be important in our analyzing of your firm's proposal.

Questions and/or Requests:

All questions and/or requests for additional information should be referred to Gary Hicks, financial advisor to the District at (530) 903-9000 or to gary@glhicks.com. Proposals will be evaluated by the District as soon as possible after the above indicated due date of August 24, 2023. Interviews of firms submitting proposals are planned for either the week of August 28th or September 4th and each firm will be notified of the dates for interviews soon after proposals are received. Each proposer will be contacted after a selection has been made to inform each of the selection process results. All proposals received will be treated as confidential, to the extent as required by law, and will not be shared with anyone outside of the District's management, consultants and its financial advisor.

The District reserves the right to reject any and all proposals, to further negotiate any proposal, to request clarification of information submitted in any proposal and to request additional information from any proposer. The District further reserves the right to award the contract to the proposer or proposers it deems best able to meet its needs and objectives of the District with respect to this engagement. The District and its financial advisor will not be liable for any costs incurred by proposers in the preparation and production of proposals. All proposals and materials submitted in conjunction with proposals submitted will become the property of the District for their use, as it deems appropriate. The successful proposer agrees to indemnify and save harmless the District, its financial advisor, governing body, employees and its agents from and against all claims, suits, actions, damages or causes of actions, or judgments arising out of the performance or non-performance of services provided.

	Al	NALYSIS OF LEGAL COUNSEL PROP	OSALS	
	BEST BEST & KRIEGER	GOLDFARB & LIPMAN	HANSON BRIDGETT	NAVE LAW
Firm Size & Structure:	250 Attorneys 7 offices in So. CA & 2 offices in No. CA	33 Attorneys Offices in Oakland, Los Angeles & San Diego	200+ Attorneys 2 offices in So. CA & 4 offices in No. CA	Professional Corp. & Solo Practice Office in Westlake Village
Attorney, Involvement & Location:	Lutfi Kharuf (5%) San Diego Mary Beth Coburn (20%) San Diego Michael Maurer (20%) Los Angeles Kimberly Byrens (10%) Riverside Others Not Named (45%)	Jeff Streiffer (30%) Oakland Joshua Mason (30%) Oakland Gabrielle Janssens (30%) Oakland Others Not Named (10%)	Lisa Dal Gallo (40%) San Rafael Alan Bishop (30%) San Francisco Sean Herman (20%) San Francisco Christopher Karachale (10%) San Francisco	Scott Nave (100%) Westlake Village
District Clients Since 2015:	Referenced 28 Hospital & Healthcare Districts Seneca Healthcare District Sonoma Valley Healthcare District Northern Inyo Healthcare District	None Provided	Last Frontier Healthcare District Mayers Memorial Hospital District Plumas Hospital District Salinas Valley Memorial Healthcare System Southern Mono Healthcare District Surprise Valley Hospital District	Tehachapi Valley Healthcare District Kern Valley Healthcare District Southern Inyo Healthcare District Bear Valley Community Healthcare District
Construction Related Experience	Excellent	Not specific	Excellent	Very Good
Entitlement Staffing Construction & Procurement Staffing Tax Measure & Annexation Staffing USDA & Other Financing Staffing	Mary Beth Coburn & Michael Maurer Mary Beth Coburn & Michael Maurer Lutfi Kharuf & Kimberly Byrens Kimberly Byrens & Lutfi Kharuf	Gabrielle Janssens Jeff Streifffer & Joshua Mason No Response Jeff Streifffer	Sean Herman Lisa Dal Gallo & Alan Bishop Christopher Karachale Lisa Dal Gallo & Alan Bishop	Scott Nave Scott Nave Scott Nave Scott Nave
Hourly Rate(s) of Primary Attorneys Estimated Total Fees	\$375 to \$560 per hour \$400,000	\$475 per hour \$300,000	\$490 to \$725 per hour \$234,000 (more like \$300,000)	\$350 per hour \$150,000
References (no more than three)	Stephen DelRossi, Interim CEO (NIHcD) Shawn McKenzie, CEO (SHcD) John Hennelly, CEO (SVHcD)	County of Marin Santa Clara Stadium Authority San Bernardino Flood Control District	Kevin Kramer, CEO (LFHcD) Darren Beatty, COO (PHD) Ryan Harris, COO (MMHD)	Evan Rayner, CEO (BVCHcD) Tim McGlew, CEO (KVHcD) Peter Spiers, CEO (SIHcD)
Additional Information Provided:	Represented 5 HCD &10 Healthcare related May be lacking in Hospital District construction experience Has extensive experience in non-healthcare public construction projects	Primary areas of practive include affordable housing, economic dev., muni & employment No Hospital District or HCAi experience Little or no Special District experience Too Much Filler & Few Specifics	Represented 5 Hospital Districts &11 Hospitals with extensive experience in contruction law Numerous similar projects & rural healthcare Lead Legal Counsel on 6 similar health care district projects with various structures	Represented 6 Hospital Districts, 3 Hospitals 27 years of experience w/ public agencies Numerous public agencies, public works projects including CEQA/NEPA, Hospital Water Districts, Cities, etc.
Overall Quality of Proposal	Very Good	Fair but Not on Point	Excellent	Very Good
Recommendation:	Interview Law Firm & References	Removed From Consideration	Interview Law Firm & References	Interview Law Firm & References

LAW FIRM RANKINGS

Law Firm Responses	Gary	y Hicks Ran	king	Mar	k Turner Ra	nking	Gerry	Hinkley Ra	nking
to Initial Questions	BBK	НВ	NL	BBK	НВ	NL	BBK	НВ	NL
1	6	9	6	7	9	7	5	8	3
2	8	8	4	7	9	5	8	8	2
3	8	8	7	6	8	6	8	8	5
4	8	8	5	7	9	6	8	8	5
5	8	8	4	7	8	5	8	8	2
6	5	9	9	3	9	8	4	8	10
7	8	7	8	8	8	9	8	8	5
8	9	8	8	9	8	8	10	8	8
9	8	7	8	10	7	8	8	5	8
10	5	5	8	5	5	8	5	4	9
11	8	8	8	7	8	8	8	8	8
12	8	8	8	9	9	8	8	8	8
Law Firm Proposals	7	8	7	7	8	8	7	8	7
Law Firm Interviews	8	9	8	8	10	9	8	9	8
Reference Interviews	7	9	8	7	10	9	0	0	0
Overall Score	111	119	106	107	125	112	103	106	88

Law Firm Responses	Average	Combined	Rankings
to Initial Questions	BBK	НВ	NL
1	6.00	8.67	5.33
2	7.67	8.33	3.67
3	7.33	8.00	6.00
4	7.67	8.33	5.33
5	7.67	8.00	3.67
6	4.00	8.67	9.00
7	8.00	7.67	7.33
8	9.33	8.00	8.00
9	8.67	6.33	8.00
10	5.00	4.67	8.33
11	7.67	8.00	8.00
12	8.33	8.33	8.00
Law Firm Proposals	7.00	8.00	7.33
Law Firm Interviews	8.00	9.33	8.33
Reference Interviews	7.00	9.50	8.50
Overall Score	109.33	119.83	104.83

Weighting								
%								
100%								
100%								
50%								
50%								
50%								
100%								
75%								
75%								
50%								
100%								
25%								
50%								
100%								
100%								
50%								

Weighted	Combined	Rankings		
BBK	НВ	NL		
6.00	8.67	5.33		
7.67	8.33	3.67		
3.67	4.00	3.00		
3.83	4.17	2.67		
3.83	4.00	1.83		
4.00	8.67	9.00		
6.00	5.75	5.50		
7.00	6.00	6.00		
4.33	3.17	4.00		
5.00	4.67	8.33		
1.92	2.00	2.00		
4.17	4.17	4.00		
7.00	8.00	7.33		
8.00	9.33	8.33		
3.50	4.75	4.25		
75.92	85.67	75.25		

BBK - Best Best & Krieger

HB - Hanson Bridgett

NL - Nave Law

San Bernardino Mountains Community Hospital District - 2023 Board Self-Assessment

Please complete and turn in to the Executive Assistant for Administration by Wednesday, November 15, 2023

Sectio	n 1 - Planning Oversite	Excellent	Good	Fair	Poor	Unsure	Comments
A.	The board receives and adopts a strategic plan from management and approves modifications to keep it current.						
B.	The administration, medical staff, nursing service and other appropriate departments and advisors participate in our planning process.						
C.	The board regularly reviews progress toward meeting goals in the plan to assess the degree to which the hospital is meeting it's mission.						
	n 2 - Quality Oversite	Excellent	Good	Fair	Poor	Unsure	Comments
A.	Our board understands and accepts our responsibility - legal, moral and regulatory - for the actions of all physicians, nurses and other individuals who work in the hospital.						
B.	We appoint physicians to governing body committees and seek physician participation in the governance process to assist us in our patient quality assessment responsibilities.						
C.	We fully understand our responsibilities and relationships with the medical staff, and have effective mechanisms for communicating with them.						
D.	We carefully review recommendations of the medical staff regarding new physicians who wish to practice at our hospital and are familiar with our termination and fair-hearing policies.						
E.	We review and carefully discuss quality reports which provide comparative statistical data about our hospital's clinical services and patient care and set targets to ensure improvement.						
F.	We require, receive on a regular basis and discuss malpractice data reflecting our hospital experience, and the experience of individual physicians who we have appointed to the medical staff.						
G.	We regularly receive and discuss data about our medical staff to assure that future staffing will be adequate regarding ages, numbers, specialties and other demographic characteristics.						
H.	We periodically review and assess the attitudes and opinions of those who work in the hospital to identify our strengths, weaknesses and opportunities for improvement.						
Sectio	n 3 - Community Oversite	Excellent	Good	Fair	Poor	Unsure	Comments
A.	The board's policies and criteria for selecting new members of the board are clearly defined and followed to ensure continued leadership and appropriate representation.						
B.	The governing body requires mechanisms to assure that all patients with the same health problems are receiving the same level of care in the hospital.						
C.	The board members are active and effective in representing the community's interest and serve as a communication link between the hospital, government officials and others important to the provision of community health services.						
Sectio	n 4 - Financial Oversite	Excellent	Good	Fair	Poor	Unsure	Comments
Α	The board reviews and adopts an annual budget which sets revenue and expense targets and receives and discusses regular reports during the year to determine compliance.						
B.	The board receives and adopts a long-term capital expenditure plan which estimates projected sources, uses, and costs of future funds for buildings and equipment.						
C.	Our board approves specific targets and limits on items such as debt, liquidity, return on investment, profitability, and other financial rations to provide us with early warning signals of financial performance.						
D.	We receive and review follow-up reports on programs that were previously approved such as joint ventures. To assure that our original projections and expectations are being met.						

San Bernardino Mountains Community Hospital District - 2023 Board Self-Assessment

Please complete and turn in to the Executive Assistant for Administration by Wednesday, November 15, 2023

Section	n 5 - Management Oversite	Excellent	Good	Fair	Poor	Unsure	Comments
Α.	A committee of the board conducts an evaluation of the CEO using specific targets agreed upon in advance with the CEO.						
B.	Our board members clearly understand the differences between the board's policy making-role and the CEO's management role.						
C.	Our board communicates effectively with the CEO regarding goals, expectation, and concerns.						
D.	Our board supports the CEO in providing support to the medical staff with it's responsibility to evaluate and resolve quality of patient care issues.						
E.	Our board periodically surveys CEO contract arrangements at other hospitals to assure our compensation, contract and conditions are reasonable and competitive.						
F.	We periodically review the hospital's top management succession plan to assure ourselves of leadership continuity.						
Section	n 6 - Board Effectiveness	Excellent	Good	Fair	Poor	Unsure	Comments
A.	The governing board evaluates its own performance, and the individual performance of each board member, to determine appropriateness of continued service on the board.						
В	We have a written conflict of interest policy that includes guidelines (or the resolution of) any existing or apparent conflict of interest of board members, physicians or administrators conducting transactions with the hospital that could appear to be self-dealing.						
C.	All members of the board understand and fulfill their responsibilities, and each board member has received written descriptions of the boards duties and reporting relationships.						
D.	All members of the board participate in an orientation program and regular program of continuing education.						
E.	The board periodically reviews its own structure to assess its size, committee structure, member tenure, turnover policy, and tenure of officers and committee chairs.						
F.	The frequency and duration of board and committee meetings are adequate to conduct the board's oversight/responsibilities, but do not discourage attendance and participation by misusing valuable trustee time.						
G.	Our chairperson exercises a firm and fair hand with individual board members to assure that all have equal opportunity to participate, time is not monopolized by a few.						
Н.	The board members receive the agenda and back-up materials well in advance of meetings, and come prepared.						
Section	n 7 - Individual Self-Assessment	Excellent	Good	Fair	Poor	Unsure	Comments
A.	Continuing Education: Participation in education opportunities outside the hospital to remain current on changing trends and issues affecting hospital governance.						
B.	<u>Demonstrated Interest:</u> Attendance, preparation and participation at board and committee meetings: assumption of a fair workload with my colleges.						
C.	Interpersonal Relations: Dealings with other board members, management and professional staff.						
D.	Relations with Management: Support for the CEO and recognition of the differences between the board's policy-making role and the CEO's day-to-day operations role.						
E.	Privacy: Maintain privacy issues and information discussed in board and committee meetings.						
F.	Board Recruitment: Identification of community leaders whose skills and knowledge may be useful to the hospital as potential board members.						
G.	Community Representation: Serve as a voice between the community and the hospital to identify and meet the healthcare needs of our geographic area						

San Bernardino Mountains Community Hospital District - 2023 Board Self-Assessment

Please complete and turn in to the Executive Assistant for Administration by Wednesday, November 15, 2023

Section	8 - Mission and Philosophy	Excellent	Good	Fair	Poor	Unsure	Comments
	The Board regularly reviews the Mission Statement of the hospital, ensuring that administration has methods in						
A.	place to communicate and make sure the mission is understood by the staff/employees.						
"	, , ,						
	The board receives reports on a periodic basis that indicate how well the Mission is understood by the Medical						
В	Staff, employees and the public that is served by the hospital.						
,	stan, employees and the public that is served by the hospital.						
Verbatii	n Comments:						
-							
-							
_							
-							
_							
-							
_							
_							
· <u>-</u>							
-							
-							
_							
-							
-							
_							
-							
-							

Kristi Mccasland

From: Mark Turner

Sent: Wednesday, October 11, 2023 1:57 PM

To: Kieth Burkart; Barry Smart; Barry Hoy; Cheryl Robinson; Cheryl Moxley

Cc: Kristi Mccasland

Subject: FW: *EXTERNAL* Save the Date: AHA Live Q&A Call with Governance Expert Jamie Orlikoff

Just FYI, in case you are interested and available.

Mark

From: AHA Trustee Services <trusteeservices@aha.org>

Sent: Wednesday, October 11, 2023 11:01 AM **To:** Mark Turner < Mark. Turner@mchcares.com>

Subject: *EXTERNAL* Save the Date: AHA Live Q&A Call with Governance Expert Jamie Orlikoff

View this email as a webpage



October 11, 2023

AHA Live Q&A Call with Governance Expert Jamie Orlikoff

Dear AHA Trustee Members:

The American Hospital Association's Trustee Services invites you to participate in a Live Q&A Call on:

Wednesday, November 1, 2023

1 p.m. – 2 p.m. ET | 12 p.m. – 1 p.m. CT | 11 a.m. – 12 p.m. MT | 10 a.m. – 11 a.m. PT

James E. Orlikoff, the national advisor on governance and leadership for the AHA, will answer your governance questions and share his insights.

Jamie is the president of Orlikoff & Associates Inc. and chair of the board of St. Charles Health System in Bend, Oregon.

This open forum call offers a great opportunity to discuss board development, challenges and strategy with a nationally recognized governance leader. These Q&A calls are stimulating, wide-ranging, well-received and highly evaluated by participants.

Please submit questions using the link below. You may enter multiple questions you would like Jamie to address in the last box, labeled "Questions for Jamie." Please note AHA will not personally identify the submitter.

Click here to register for the upcoming call. You will receive an Outlook invitation shortly thereafter.

Please note that this call will NOT be recorded.

If you experience any difficulties with registration, please contact trustees@aha.org. I hope you will join us.

Best Regards,

Sue Ellen Wagner

Sue Ellen Wagner Vice President, Trustee Engagement and Strategy American Hospital Association















Send to a Friend | Privacy Policy | Terms of Use

AHA Trustee Services

155 North Wacker Drive, Suite 400, Chicago, IL 60606 aha.org/trustees

© 2022 American Hospital Association The opinions expressed by authors do not necessarily reflect

the policy of the American Hospital Association. If you prefer not to receive these emails you may unsubscribe or manage your email preferences.

Kristi Mccasland

From: Mark Turner

Sent: Thursday, October 19, 2023 12:39 PM

To: Kristi Mccasland

Subject: FW: *EXTERNAL* Leadership Matters: Role of Governance in Quality and Safety

Please send to our board members and community members that serve on our board committees. Thanks.

Mark

From: AHA Trustee Services <trusteeservices@aha.org>

Sent: Thursday, October 19, 2023 12:16 PM **To:** Mark Turner <Mark.Turner@mchcares.com>

Subject: *EXTERNAL* Leadership Matters: Role of Governance in Quality and Safety

View this email as a webpage



October 19, 2023

AHA Webinar: Role of Governance in Quality and Safety

The American Hospital Association's Trustee Services is hosting a webinar in collaboration with

The Joint Commission on:

Wednesday, November 8, 2023

11 a.m. - 12 p.m. ET | 10 a.m. - 11 a.m. CT | 9 a.m. - 10 a.m. MT | 8 a.m. - 9 a.m. PT

Register for the AHA's Webinar

I hope you can join us for an important webinar on quality and patient safety with Jonathan B. Perlin, MD, PhD, MSHA, MACP, FACMI, President and CEO of The Joint Commission Enterprise and Kathryn L. Leonhardt, MD, MPH, CPHQ, CPPS, principal consultant for Joint Commission International. Participants will hear the importance of board involvement in ensuring high-quality and safe patient care. Please note, there will be time for Q&A.

Questions about this webinar should be directed to: trustees@aha.org.

Best Regards,

Sue Ellen Wagner

Sue Ellen Wagner Vice President, Trustee Engagement and Strategy American Hospital Association















Send to a Friend | Privacy Policy | Terms of Use

AHA Trustee Services

155 North Wacker Drive, Suite 400, Chicago, IL 60606 aha.org/trustees

© 2022 American Hospital Association The opinions expressed by authors do not necessarily reflect the policy of the American Hospital Association. If you prefer not to receive these emails you may unsubscribe or manage your email preferences.

FREE WORKSHOP

Board members/trustees, staff, and others welcome!



California Special Districts Association

Districts Stronger Together

SAN BERNARDINO COUNTY

INTRODUCTION TO SPECIAL DISTRICT FINANCES FOR BOARD MEMBERS

Friday, November 17, 2023 9:00 - 11:00 a.m. Mojave Water Agency 13846 Conference Center Drive Apple Valley, CA 92307

Instructor: Cindy Byerrum, CPA, CSDM

Sponsored by Local Agency Formation Commission (LAFCO) for San Bernardino County, this fast-paced and informative session covers all of financial basics that board members need to know to serve their district. Attendees will get the information they need to begin to assess the overall financial health of their district and steps needed to make positive changes.

SCHEDULE:

8:30 - 9:00 a.m.	Registration		
9:00 - 11:00 a.m.	Workshop		
REGISTRATION FORM (NO CH	HARGE)		
Name:			
Title:			
1100.			
District:			
Address:			
Address.			
City:		State:	Zip:
DI.		- "	
Phone:		Email:	

Mail or fax completed form to:

CSDA, 1112 | Street, Suite 200 , Sacramento, CA 95814 • fax: 916.520.2465

Register also at: www.csda.net Workshop: Introduction to Special District Finances

Questions?

Please contact us toll-free at 877.924.2732.



(https://www.aha.org)



Search...

O Search this site

O Search all of AHA



REGISTRATION IS NOW OPEN! (https://ruralconference.aha.org/registration)

The **2024 AHA Rural Health Care Leadership Conference, February 11-14** in Orlando, will gather more than 1,000 rural health leaders committed to advancing rural health and providing quality care for patients and communities. The conference will feature top rural practitioners sharing actionable strategies and resources aimed at improving access to care, leveraging unique workforce approaches, implementing digital technologies and prioritizing health equity.

We will explore the most significant challenges facing rural health care providers and present innovative approaches to transform care delivery and business practices.

VIEW AGENDA >> (https://web.cvent.com/event/09a2dee6-1afb-4cf8-95b4-023b12a1dd0b/websitePage:667458eb-1bd3-4a8b-a6a0-cf20803167f4)

Learning Objectives:

- Develop strategies for a more sustainable and flexible rural health care workforce.
- Promote the adoption of innovative approaches to improve quality, patient safety and performance in rural health care to enhance patient satisfaction, increase efficiency and reduce costs.
- Explore disaster preparedness and response plans specific to rural communities.
- Explore new models of care and payment that align with rural health care systems' needs.
- Elevate equity and eliminate disparities in treatment, access and outcomes.
- Advance community and population health and economic development in rural areas through collaborative efforts between health care organizations, public health agencies and community stakeholders.
- Share inventive approaches to mergers, joint ventures and affiliations to help improve financial stability, operational efficiency and clinical outcomes.

https://ruralconference.aha.org

- Learn how advances in telehealth, information technology and artificial intelligence are improving access in rural communities.
- Share best practices in health care delivery for American Indians and Alaskan Natives.
- Highlight best practices for achieving governance excellence in rural health care organizations, including effective leadership, stakeholder engagement and accountability.



(https://ruralconference.aha.org/#objectives)

(HTTPS://RURALCONFERENCE.AHA.ORG/#OBJECTIVES)

Who Should Attend

(https://ruralconference.aha.org/#objectives)

The conference is designed for health care leaders from rural hospitals, health care systems with a strong presence in rural communities, rural health clinics, associations and community health organizations. Participants include administrators, trustees, physician executives, nursing administrators, public health officials and community leaders.

(https://ruralconference.aha.org/#objectives)



(https://ruralconference.aha.org/hotel-travel)

WE'LL SEE YOU THERE! (HTTPS://RURALCONFERENCE.AHA.ORG/HOTEL-TRAVEL)

https://ruralconference.aha.org

Signia by Hilton Orlando Bonnet Creek (https://ruralconference.aha.org/hotel-travel)

14100 Bonnet Creek Resort Lane, Orlando, Florida, 32821, USA

(https://ruralconference.aha.org/hoteltravel)

Sponsors

Learn more (/sponsorship/sponsors) about our 2024 sponsors.









(https://www.wipfli.com/)

Join our Mailing List

Get AHA Rural Health Care Leadership Conference Updates & Announcements

First Name	Last Name Organization
Email	Select State ✓ Send Me Updates
RELATED TOPICS: AHA Rural issues (/topics/ru	Rural Health Care Leadership Conference (/topics/aha-rural-health-care-leadership-conference) ral-issues) Rural Workforce (/topics/rural-workforce)
	(/)
ALSO OF INTEREST	Multidisciplinary CAUTI Prevention Team (https://www.aha.org/websites/2016-02-29-cauti-prevention-team) Health Care for the Homeless (https://www.aha.org/websites/2016-02-29-health-care-homeless) Workforce (https://www.aha.org/workforce-home)

© 2023 by the American Hospital Association. All rights reserved.

Privacy Policy (https://www.aha.org/2022-07-14-privacy-policy)

Do Not Sell or Share My Personal Information (https://www.aha.org/2023-05-18-health-forum-inccalifornia-consumer-privacy-act-request-form)

Terms of Use (https://www.aha.org/2022-07-14-termsofuse)

- f (https://www.facebook.com/ahahospitals)

 ✓ (http://twitter.com/ahahospitals)
- (http://www.youtube.com/user/AHAhospitals)
 (https://www.instagram.com/ahahospitals/)

https://ruralconference.aha.org 3/4 Noncommercial use of original content on www.aha.org is granted to AHA Institutional Members, their employees and State, Regional and Metro Hospital Associations unless otherwise indicated. AHA does not claim ownership of any content, including content incorporated by permission into AHA produced materials, created by any third party and cannot grant permission to use, distribute or otherwise reproduce such third party content. To request permission to reproduce AHA content, please click here (https://www.aha.org/form/permission-request-form).

https://ruralconference.aha.org 4/4



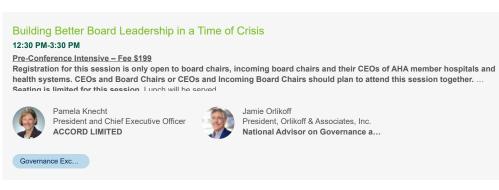
Agenda

Use the Filters button to search by topics and speakers.



February 11, 2024

12:30 PM ET



2:00 PM ET

Co-Designing Innovative Solutions to Advance Health Equity 2:00 PM-3:30 PM

Come prepared to roll up your sleeves as you work jointly to design plans for strategy, implementation, policies and practices to address





3:00 PM ET

Hosted Buyer Forum

3:00 PM-5:30 PM

Private session for AHA Organizational Members. By invitation only.

3:30 PM ET

Refreshment Break

3:30 PM-4:00 PM

4:00 PM ET

Closing the Gap on Youth in Distress: Virtual Training for Communities

4:00 PM-5:30 PM

Since the pandemic, schools have seen a dramatic spike in discipline problems, adverse student behaviors and cases of depression and anxiety, placing tremendous stress on school personnel to meet their students' needs. The Dartmouth Health Behavioral Health Workforce Development team received a grant from the Health Resources and Services Administration (HRSA) to promote ways to fill ...



Julie Balaban Assistant Professor of Psychiatry an... Dartmouth-Hitchcock Medical Cen...



Barbara Dieckman Director of Knowledge Map and Pati... Dartmouth Health, Lebanon, N.H.

Behavioral Health Telehealth, IT an...

Creating Harmony in Health Care: How to Cultivate Strong Relationships with Vital Stakeholders

4:00 PM-5:30 PM

Fostering strong relationships with key stakeholders is paramount to the success and sustainability of any hospital or health system in the dynamic and ever-evolving governance landscape. Achieving this goal is easier said than done, however. This panel will explain the critical importance of building and nurturing connections with various key stakeholders, including the C-suite, employees, medical staff...



Benjamin Anderson VP for Rural Health and Hospitals Colorado Hospital Assocation



Todd Linden President Linden Consulting

Governance Exc...

February 12, 2024

7:00 AM ET

Continental Breakfast in the Sponsor Hall

7:00 AM-8:30 AM

8:30 AM ET

Plenary Session: Transforming Rural Health Care: Navigating the Digital Frontier

8:30 AM-10:00 AM

Conference Welcome

Fireside Chat with the American Hospital Association..



Joanne Conrov Chief Executive Officer and Presiden... Chair-Elect, AHA Board of Trustees



Geeta Navvar Former Chief Medical Officer, Salesf... Author of Dead Wrong: Diagnosin...

10:00 AM ET

Refreshment Break

10:00 AM-10:15 AM

10:15 AM ET

7 Minutes to Innovation: Building a More Flexible and Sustainable Workforce

In today's rapidly evolving health care landscape, rural hospitals face unique challenges when building and maintaining a flexible and sustainable workforce. Join us for a dynamic and fast-paced session where five rural hospital leaders will share their innovative strategies and experiences in addressing workforce challenges. Each leader will have just seven minutes to present their hospital's ..

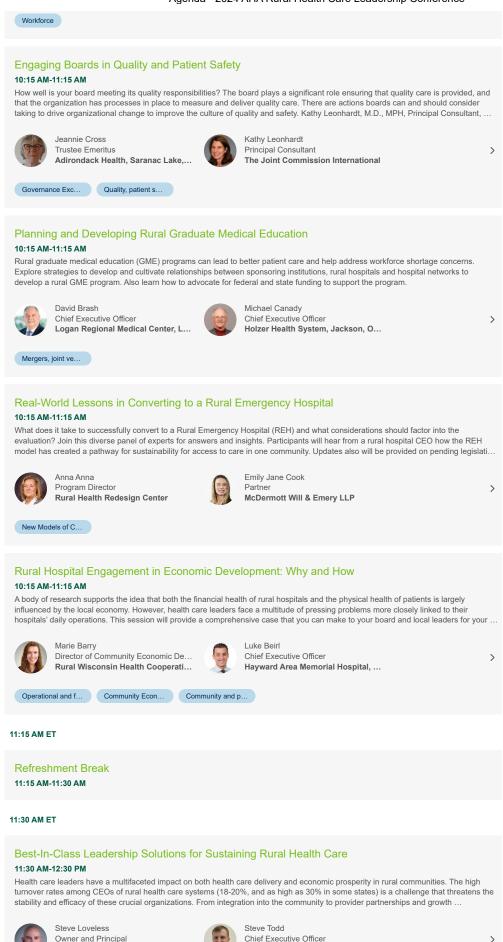


Elisa Arespacochaga Vice President, Clinical Affairs and American Hospital Association



Chief Medical Officer Bothwell Regional Health Center, ...

>



St. Luke Community Healthcare, P...

SoundMind Leadership

Workforce

Navigating Crises in Rural Health Care: Implementing a Comprehensive Response Plan

11:30 AM-12:30 PM

Rural health care facilities often face unique challenges when it comes to crisis management due to limited resources, geographical barriers and the need to build trust within their communities. By focusing on effective communication strategies, rural health care providers can enhance their crisis response capabilities and ensure timely and accurate information dissemination. To help you ...



Paige Marsolais-Heitman Marketing and Public Relations Dire... Phelps Health, Rolla, Mo.



Somer Overshon Associate Vice President of Strategi... Phelps Health, Rolla, Mo.

Planning and res...

Protect the Progress: Sustaining Health Equity in Rural Communities

11:30 AM-12:30 PM

Hospitals and health systems are facing financial and political pressures that make it challenging to focus on health care transformation and innovation. Increased expenses not only hurt hospital and health systems financially, but also impact patient access to quality care due to resulting cost cutting. Unfortunately, we often see health equity and DEI initiatives on the proverbial chopping block first. Hear ...

Health Equity

Strategies for Successful Collaboration Between a CAH and Academic Medical Center

11:30 AM-12:30 PM

This unique approach to partnership that did not involve a financial or governance merger has significantly improved access to care in the rural community, improved quality, patient satisfaction and financial strength. The speakers will share data and strategies that have worked — and failed — over the course of the unique 12-year clinical collaboration. Participants will learn joint strategic planning and …



James Heilman
Vice President of Strategic Outreach
Oregon Health & Science University



Erik Thorsen
Chief Executive Officer
Columbia Memorial Hospital, Asto...

Mergers, joint ve...

12:30 PM ET

Networking Lunch in the Sponsor Hall

12:30 PM-1:45 PM

1:45 PM ET

Plenary Session: Driving Innovation and Access in Rural Health Care

1:45 PM-3:00 PM



Chris DeRienzo
Senior Vice President and Chief Physician Executive
American Hospital Association

3:00 PM ET

Refreshment Break

3:00 PM-3:30 PM

3:30 PM ET

Mass Violence Incidents: Use of Simulation Training to Enhance Preparedness and Response C...

3:30 PM-4:30 PM

In response to the rising number of mass shootings, health care organizations must be equipped to respond rapidly to these types of incidents. This panel session will explore how simulation training can be used to enhance preparedness and response capabilities.

Garner invaluable insights and strategies for effectively navigating incidents of mass violence, with a focus on the unique circumstance..

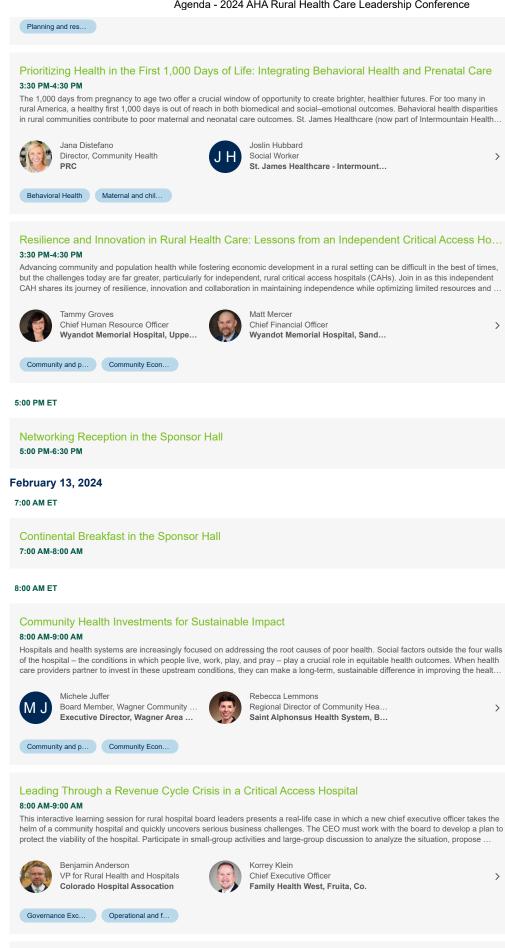


Elisa Arespacochaga Vice President, Clinical Affairs and .. American Hospital Association



Haru Okuda
Chief Executive Officer & Executive ...
Associate Vice President, Interpro...

/



Leading Together: The Importance of Building Strong CEO and Board Chair Relationships 8:00 AM-9:00 AM

In today's rapidly changing health care landscape, the ability of organizations to be able to adapt quickly to new challenges and opportunities is more important than ever. This flexibility requires strong and effective leadership, and the relationship between the CEO and the board chair is critical. This session will explore building trust, communication and mutual respect between the CEO and board ...



Annie Bass Chair, Board of Trustees Phelps Health, Rolla, Mo.



Jason Shenefield President and Chief Executive Officer Phelps Health, Rolla, Mo.

Governance Exc...

9:00 AM ET

Refreshment Break

9:00 AM-9:15 AM

9:15 AM FT

Plenary: Washington Update

9:15 AM-10:00 AM

Join American Hospital Association leaders for a discussion on the latest from Capitol Hill. Learn what policies Congress is considering and what it means for rural community hospitals.

Public Policy

10:00 AM ET

Refreshment Break

10:00 AM-10:15 AM

10:15 AM ET

7 Minutes to Innovation: Quality and Patient Safety in Rural Hospitals

In the fast-paced world of health care, innovation is essential, especially in rural hospital settings where unique challenges abound. Join us for an inspiring and informative session where you'll hear from five visionary rural hospital leaders who will share their compelling stories of success, transformation, and lessons learned in just seven minutes each. In these rapid-fire presentations, you'll gain valuab...

Quality, patient s...

Building a More Sustainable Rural Nursing Workforce with Technology and Al

To address the well-documented acute nursing shortage that is adversely impacting rural hospitals and health systems, a growing number of organizations are using technology and artificial intelligence-based programs to generate predictive analytics, remote nursing solutions like computerized vision and telemonitoring to strengthen retention and recruitment efforts. These tools are helping to improv.



Erica DeBoer Chief Nursing Officer

Sanford Health, Sioux Falls, S.D.

Telehealth, IT an... Workforce

Connecting with Compassion: Leveraging TelePalliative Care to Meet Rural Community Needs

The specialty of palliative care has grown significantly in recent years, particularly in urban and academic settings where there is a relative abundance of resources and staffing to provide in-person care. In rural America, however, access to this care often is limited and the population faces a higher probability of multiple serious illnesses. This can lead to disparities and misalignments between patient



Karl Bezak Assistant Professor of Medicine UPMC, Pittsburgh



Adrienne Goldberg TelePalliative Social Work Lead Providence Sacred Heart Medical ...

Telehealth, IT an...

How the Rehabilitation Department Transformed a Critical Access Hospital

Hear the story of how Family Health West, a critical access hospital in western Colorado, became one of the largest rehabilitation providers in the state. By dramatically growing its physical and occupational therapy/speech-language pathologist/wellness services, the hospital experienced shared growth in primary care, rehabilitation medicine and orthopedic surgeries. Gain insight into the hospital's



Innovative Care Delivery Models in Maternity Care Deserts

Many American Indian/Alaska Native (Al/AN) families reside in rural communities, where 12.8% deliver in maternity care deserts and 26.7% of AI/AN babies are born in areas of limited or no access to maternity care. The Indian Health Service (IHS) has adapted innovative delivery care models to increase access to care and decrease gaps in health equity. The IHS developed an Obstetric ..



Tina Pattara-Lau Maternal Child Health Consultant Indian Health Service



Stacey Dawson Women's Health Consultant Indian Health Service

New Models of C... Care for America... Maternal and chil...

11:15 AM ET

Refreshment Break

11:15 AM-11:30 AM

11:30 AM ET

Policy and Research Update: Financial Models for Rural Hospitals

Learn to assess the potential benefits and losses associated with transitioning to Rural Emergency Hospital status. Christina Campos, a rural hospital administrator, will discuss her hospital's decision points and transition process in becoming one of the country's first Rural Emergency Hospitals. George Pink and Keith Mueller, national leaders in rural health services research, will follow with their ..



Christina Campos Administrator Guadalupe County Hospital, Sant..



Kristen Dillon Chief Medical Officer Federal Office of Rural Health Poli...

>

New Models of C... Operational and f...

Preventing Workplace Violence in Rural Emergency Departments

11:30 AM-12:30 PM

Violence committed by patients and visitors against staff, Type II workplace violence (WPV), is prevalent in emergency departments (EDs) throughout the US and leads to trauma, burnout, attrition, and reduced quality of care. The WPV committee representing two community/rural hospitals of a large multi hospital system completed a gap analysis and action plan to address the growing problem of...



Carolyn Leja Chief Nursing Officer Corewell Health Big Rapids & Ree..



Beth Langenburg Chief Operating Officer Corewell Health Big Rapids & Ree...

Team-Based Care and Community Paramedicine: Outcomes-based Population Health Initiatives

11:30 AM-12:30 PM

In rural communities, team-based care and community paramedicine programs are growing in popularity to reduce barriers to care for patients suffering from chronic conditions and the cost of care. After implementing team-based care into a primary care setting, Fisher-Titus Health realized improved outcomes within one year including fall risk screening, influenza immunization, colorectal cancer ...



Ashlev Ballah Senior Director, Ancillary Services Fisher-Titus Medical Center, Norw.,



Jason Gahring Vice President for Ambulatory Servic... Fisher-Titus Medical Center, Norw...

Community and p...

The High Reliability Journey to Zero Harm

11:30 AM-12:30 PM

Commitment to a culture of zero harm is key for organizations that strive to deliver safe, high quality, patient-centered care. Pursuit of high reliability is an ongoing journey, and organizations must begin now in order to thrive in the future of health care. Creating a culture where vigilance and constant improvement is everyone's responsibility, the senior leadership team of two critical access hospitals will ...





>

12:30 PM FT

Networking Lunch in the Sponsor Hall with Conversation Starter Tables

12:30 PM-1:45 PM

Join a Conversation Starter table to connect for meaningful discussions with other attendees with similar roles or topical interests. Every Conversation Starter table will have a host to launch the talk. Topics may vary from perennial challenges like rural physician recruitment, tactics for leveraging telehealth, and building great boards, to creative workforce strategies.

1:45 PM ET

Plenary Session: Rural Hospitals at the Tipping Point

1:45 PM-3:00 PM

"Don't it always seem to go that you don't know what you got till it's gone?" Rural hospitals are closing services, and some are closing their doors; fewer than half of rural hospitals have maternity units, and more than 2 million women of childbearing age live in rural maternity deserts. The list goes on. Rural hospitals and the entire U.S. health care system are at an unprecedented inflection point wit...



Jamie Orlikoff

President, Orlikoff & Associates, Inc.

National Advisor on Governance and Leadership to the American Hospital Association

Governance Exc...

3:00 PM FT

Leisure Time - On Your Own

3:00 PM-8:00 PM

The Hilton by Signia Bonnet Creek and the adjacent Waldorf Astoria resort offer an array of activities and amenities for a delightful afternoon and evening. Whether your idea of a perfect afternoon involves unwinding by the pool, enjoying a round of golf, treating yourself to a spa day, savoring delectable cuisine, or embarking on a Disney adventure, these resorts offer many choices for enjoying ...

February 14, 2024

7:00 AM ET

Continental Breakfast

7:00 AM-8:00 AM

8:00 AM ET

Are You Ready to WRAP? Ways to Reduce Admissions Programs Deliver Results

8:00 AM-9:00 AM

When patients experience high hospital readmission rates, it is often a result of unmet or inadequately addressed co-occurring medical, behavioral and social needs. The WRAP (Working to Reduce Admissions Program) at this rural health care organization was designed to meet the complex needs of patients experiencing high utilization (defined as 4+ inpatient admissions in 365 days) of the acute care ...



Lindsay Morse

Vice President, Care Management

University of Vermont Health Network, Burlington, Vt.

Health Equity

Interactive Governance Clinic

8:00 AM-9:00 AM

Bring your thorniest governance issues to one of the nation's preeminent health care governance experts in this perennial favorite interactive session. You'll gain practical solutions and proactive ideas for improving governance performance. This session will be very interactive and no issue is off the table, so come prepared to talk, to question and be challenged!



Jamie Orlikoff

President, Orlikoff & Associates, Inc.

National Advisor on Governance and Leadership to the American Hospital Association

Governance Exc...

