

REGULAR MEETING OF THE BOARD OF DIRECTORS AGENDA

Thursday, October 26, 2023 at 5:00 p.m. Portola Medical Clinic Conference Room, Portola, CA

The October 26, 2023 Board of Directors meeting will be held in both a virtual and an in-person setting for the general public. The Board meeting location at the Portola Medical Clinic Conference Room will be accessible to the public. The meeting is also accessible to the public via Zoom (See the connection information below). Public comment will be accepted on any item on the agenda as called for by the Board chair until the close of public comment for each item.

Any person with a disability may submit a request for reasonable modification or accommodation to the above-described means for accessing and offering comment at the meeting to Barbara Sokolov at barbara.sokolov@ephc.org who will swiftly resolve such request.

The Board meeting is accessible to the public via Zoom:

Meeting ID: 841 0499 5766 **Passcode**: 988920 **Dial In**: +1 669 900 6833 US (San Jose) https://us06web.zoom.us/j/84104995766?pwd=aVlvMjV2T3p2WHljOGVKNWtndDdxdz09

		Presenter(s)	I/D/A	Page(s)
1.	Call to Order	Augustine Corcoran	A	
2.	Roll Call	Augustine Corcoran	I	
3.	Board Comments	Board Members	I/D	

Deletions/Corrections to the Posted Agenda

4. Public Comment

There will be an opportunity for public comment on each agenda item listed with an "A" for action. Comments will be limited to three minutes per individual.

5.	Consent Calendar	Augustine Corcoran	I/D/A	1-2
	A. AgendaB. Meeting Minutes of 9.28.23 Regular	Board Meeting		3-7
6.	Auxiliary Report	Gail McGrath	I/D/A	
7.	 Staff Reports A. Chief Nursing Officer Report B. SNF Directors of Nursing Report C. Director of Clinics Report D. Chief Financial Officer 	Penny Holland Lorraine Noble/Tamara Santella Tracy Studer Katherine Pairish	I/D I/D I/D I/D	8 9 10
8.	Chief Executive Officer Report	Doug McCoy	I/D/A	11-12
9.	Policies		I/D/A	13-14

A. Policy Review

The CAH Committee recommends the following for approval by the Board of Directors: Annual Policy Review

 SNF, Nursing, EOCC, Administration, Nursing, Biomed, Infection Prevention, Clinic, EVS, HR

Regular Meeting of the Board of Directors of Eastern Plumas Health Care October 26, 2023 AGENDA - Continued

10. Committee Reports

Board Members

I/D/A

A. Finance Committee

11. Public Comment

Members of the Public

This is an opportunity for members of the public to address the Board on items which are not on the agenda. Comments are limited to three minutes ordinarily, unless the Board Chair indicates a different amount will be allotted. Comments should be limited to matters within the jurisdiction of the Board. The Board Chair may choose to acknowledge the comment, or, where appropriate, briefly answer a question, refer the matter to staff, or set the item for discussion at a future meeting. Like any other member of the hospital district, an employee or a contracted employee can address the Board in the proper forum at the proper time. However, the Board will not hear personnel issues or grievances, or matters that affect the employees personally.

12. Board Closing Remarks

Board Members

I/D

13. Closed Session

Augustine Corcoran

I/D/A

A. Hearing (Health and Safety Code 32155)

Subject Matter: Staff Privileges

Provisional 1 Year Appointments

o Adam Ouimet, MD

ED

Active 2 Year Appointments

o Irene Wojek, PMHNP

Clinic

o David Cohen, MD o Erik Olsen, MD

Tele Radiology Tele Radiology

o Debbie Chang, MD

Tele Psych

o Vasileios Panagopoulos, MD

Tele Psych

o Donghui Wei, MD

Tele Psych

B. Public Employee Performance Evaluation (Government Code Section 54957): CEO

14. Open Session Report of Actions

Augustine Corcoran

I

Taken in Closed Session

15. Adjournment

Augustine Corcoran

Α

The next regularly scheduled meeting of the Board of Directors of Eastern Plumas Health Care is December 7, 2023 at the Portola Medical Clinic Conference Room, 480 1st Avenue, Portola, CA 96122



EASTERN PLUMAS HEALTH CARE DISTRICT REGULAR MEETING OF THE BOARD OF DIRECTORS MINUTES

Thursday, September 28, 2023 at 5:00 p.m.

1. Call to Order

Meeting was called to order at 5:00 p.m.

2. Roll Call

Present: Paul Swanson, M.D., Board Member; Marcia Hughes, Board Member; Augustine Corcoran,

Board Chair; Gail McGrath, Board Member Absent: Linda Satchwell, Board Member

Staff in attendance: Doug McCoy, CEO; Penny Holland, Chief Nursing Officer; Tamara Santella,

Director of Nursing Loyalton; Tracy Studer, Director of Clinics; Jim Burson, Director of

Rehabilitation; Barbara Sokolov, Executive Assistant/Clerk of the Board

3. Board Comments

None

4. Public Comment

None

5. Consent Calendar

• ACTION: Motion was made by Director McGrath, seconded by Director Corcoran to approve the consent calendar.

Roll Call Vote: AYES: Directors Hughes, Swanson, McGrath, Corcoran

Nays: None

Not present: Director Satchwell

• Public Comment: None

6. Auxiliary Report

Director McGrath reported that the August balance of Memorial Fund was close to \$5k. \$10k in scholarships given to EPHC staff. \$165k balance in checking account before committing to contribute \$100k for lab analyzer.

7. Staff Reports

A. Chief Nursing Officer Report

Penny Holland

See September BOD report. Penny also shared that Kathy Barter had come on as new lab manager and that the next QA meeting was scheduled for October.

B. SNF Directors of Nursing

Lorraine Noble/Tamara Santella

See September BOD report. Tamara reported. She shared that Covid cases in the Portola SNF were at 8 residents/6 staff.

C. Director of Clinics

Tracy Studer

See September BOD report. Tracy thanked Doug for inviting Congressman Kiley to view the Loyalton Clinic. She and Christina Potter met him there and received a plaque of appreciation for the Clinic. Director McGrath noted that Kiley's assistant remarked on the cleanliness of the facilities during their Portola tour. She also said that at the Dental Clinic yesterday for her husband's appointment they were missing a hygienist but the doctors stepped in and he had a

Regular Meeting of the Board of Directors of Eastern Plumas Health Care September 28, 2023 MINUTES - Continued

great appointment. Tracy noted that she was working on the extension of Dr. Abate's contract for another year.

D. Director of Rehabilitation

Jim Burson

See September BOD report.

E. Chief Financial Officer

Katherine Pairish

Summary

These financials are in DRAFT status, as always, until the audit is complete. Our auditor will be onsite the first week of October to conduct the annual audit. Due to the Cerner transition, some accounting functions such as bank reconciliations and accounts receivable reconciliations were prepared manually. As a result, there may be some changes to accounts receivable and/or contractual adjustments, but we do not anticipate any material changes.

Revenues (Year-to-Date)

Net Patient Revenues were under budget by \$2,321,955. IGT payments were over budget by \$1,103,045 leaving our Net Operating Revenue under budget by \$778,062. Included in Non-Operating Income is the final recognition of COVID monies of \$3,118,505, Test to Treat Grant of \$433,928; ARP Ship Grant of \$258,376 and Workers Retention Pay of \$293,708.

Expenses (Year-to-Date)

Salaries and Benefits: Combined Salaries and Benefits were under budget by \$173,056.

Professional Fees: Professional Fees were over budget by \$192,594.

Repairs & Maintenance: Repairs & Maintenance were over budget by \$256,736.

Utilities: Utilities were under budget by \$218,355.

Supplies: Supplies were under budget by \$304,772.

Purchased Services: Purchased Services were over budget by \$1,820,143.

Depreciation Expense: Depreciation Expense was under budget by \$464,331.

Other Expenses: Other Expenses were under budget by \$129,131. These include training, travel, and dues and subscriptions.

Revenue Cycle

Gross Accounts Receivable as of June 30, 2023, was \$13.2 million. Gross Accounts Receivable days were 102. The uptick is due to the Cerner transition.

Balance Sheet

Total Assets decreased by 6.76%. Long Term Debt decreased by 6.52%.

Additional Information,

Days cash on hand on June 30, 2023, was 166. We projected 164. Our cash position is still very strong.

Doug reported for Katherine. He shared that the Cerner & Multiview interface continue to present challenges to financial reporting but improvements are underway. He also noted that we have been seeing lower Swing & ER volume. Doug also shared that changes to the Minimum Wage Bill are positive for rural hospitals with an initial raise across the board to \$18/hour (not \$25) with 3.5% increases annually until \$25/hour reach in 2034. Most EPHC employees are at or above \$18/hour.

Equity & Practice Transformation Payments Program through Medi-Cal, not a grant but has the potential to bring in about \$1 million per year. EPHC is applying in October.

Regular Meeting of the Board of Directors of Eastern Plumas Health Care September 28, 2023 MINUTES - Continued

Despite unexpected challenges with Cerner and Meal Break Penalties it's been a good year and Doug applauds all!

8. Chief Executive Officer Report

Doug McCoy

OPERATIONAL OVERVIEW:

Congressman Kevin Kiley visited the Portola and Loyalton campuses on September 5th as part of his Plumas and Sierra County tour. The Congressman presented congressional recognition certificates to both the hospital and new Loyalton clinic, followed by a tour of both campuses. Included in the tour were discussions on pending federal legislation for Medicare and Medicaid funding bills, and a tour of the Portola Courthouse. We discussed potential community-based programs including multigenerational day care and CalAIM initiatives which could be operationalized if a site location, such as the courthouse, could be obtained by EPHC. Congressman Kiley also participated in a Loyalton town hall meeting to review the planned use of the appropriations funding request to make significant repairs to the city's water infrastructure. The Congressman plans to return for the Loyalton clinic ribbon cutting event and continued discussions on support for ongoing health care initiatives.

The EPHC Auxiliary has committed \$100,000 in funding to replace the hospital lab analyzer unit which will improve lab testing services. The Auxiliary also funded \$9,000 in scholarships this year for EPHC staff members to continue advanced education or certification programs. We appreciate the ongoing support from the EPHC Auxiliary to fund these important initiatives to benefit the community and our staff.

EPHC has received \$50,000 in funding from a USDA grant to assist with the cost for a new patient transportation van. We also received the final payment of the test-to-treat grant funding which will be applied to a new truck for towing of our disaster tent trailers which were also part of the grant funding program.

EPHC has enlisted the consultation support of Scott Coffin, President of Serrano Advisors, to assist with the collection of outstanding A/R from Anthem. Mr. Coffin had been an executive with Anthem, and we expect his involvement will expedite payment for outstanding claims dating back to January of 2022. His firm is providing this service at no charge to EPHC.

Our Cerner transition continues to be the top operational priority, but we are seeing consistent improvement in workflows and system utilization. Fiscal year 2022/23 draft financial statements have been completed, and statements for July and August are pending completion of cash posting. We have utilized a third-party consulting firm since early August, which has helped with process improvement and revenue cycle management.

We have completed the contracting process with Partnership Health Plan which will begin January 1, 2024. All MediCal recipients currently under California Health and Wellness and Anthem will convert to this plan as will our CalAIM ECM program.

PATIENT EXPERIENCE/EMPLOYEE ENGAGEMENT:

Through Q3 2023 our performance metrics include:

• Emergency Department: Recommendation rating - 65% top box, 85% favorable

Regular Meeting of the Board of Directors of Eastern Plumas Health Care September 28, 2023 MINUTES - Continued

- HCAHPS (Hospital): Hospital rating 67% top box with 100% favorable. Top scores include 100% top box rating for treatment by staff and assistance with call light response.
- CGCAHPS (Clinics): Recommendation rating 88% top box, 98% favorable
- Outpatient Therapy: Recommendation rating 100% top box
- Skilled Nursing: Recommendation rating 91% top box

EPHC employee engagement activities for the past 30 days have included the implementation of a revised new hire orientation program, two appreciation activities, and recognition of the Rehabilitation Services team.

The EPHC Foundation has decided to make securing funds for the ambulance remount its top priority along with continuing investigation into grants applicable to raising funds that align with EPHC's goals (e.g., capital grants, planning grants).

Doug also shared that he is working with Scott Coffin, former Anthem executive, to recoup monies owed to EPHC and that they are making headway with weekly meetings and accountability timetables. Discussion about how this happened (underpublicized form change and various delays in reprocessing) and assurance that it will be resolved.

Doug also reported that the night before, EPHC hosted the Community Supper at the Catholic Church. While there, a woman who was supporting the event shared with him how the hospital, and in particular Drs. Cox and Dhond, had saved her life. Doug also shared that EPHC had been commended by an out of state visitor/patient re: the care they received in the ED.

COMPLIANCE PROGRAM:

There were no compliance reviews initiated for the period of August 24th through September 22nd.

9. Policies

Public Comment: None.

ACTION: Motion was made by Director McGrath, seconded by Director Hughes to approve all policies.

Roll Call Vote: AYES: Directors McGrath, Hughes, Swanson, Corcoran

Nays: None

Not present: Director Satchwell

10. Committee Reports

Board Members

I/D/A

A. Finance Committee

Director Swanson reported that income statement showed patient revenue at \$2.3 million less but that EPHC was still in the black for the year. Next year would be a stretch but still very doable.

11. Public Comment

None.

12. Board Closing Remarks

Director Hughes noted that there was a date error in the agenda header and Barbara responded that it had been fixed. Director McGrath remarked that EPHC continues to provide excellent care for the community despite challenges with Cerner. Doug ended by saying that new ER docs who have come on board and recent hires of staff leaders and staff are all very high caliber and are contributing to the great performance of EPHC in delivering quality services to the community.

Open Session recessed at 5:55 p.m.

13. Closed Session

A. Hearing (Health and Safety Code 32155) Subject Matter: Staff Privileges

Provisional 1-year appointments

o Eisinger, Philip DO

Gonzales, Corey PhD

o Kuo, Kevin MD (temporary privileges approved by MEC on 9/10)

o Kopec, Marcin MD

Active 2-year reappointments

o Nielsen, Marc DO

Streit, Cara MD

Tele Radiology Psychology

Emergency Department Tele Radiology

Emergency Department Obstetrics/ Gynecology

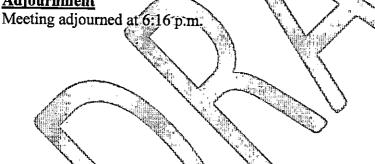
B. Public Employee Performance Evaluation (Government Code Section 54957): CEO

14. Open Session Report of Actions Taken in Closed Session

The Board returned at approximately 6:15

A: ACTION- The Board unanimously approved (with the exception of Director Satchwell who was not present) a motion to provide staff privileges to all persons listed on agenda item 13.A. B: No Action Taken.

15. Adjournment



Eastern Plumas Health Care Board Report Penny Holland CNO

10/26/2023

On October 11th we held our quarterly QA meeting with Director McGrath and Director Hughes. Most departments reported their quality measures with impressive work each department is working towards to improve patient/employee outcomes.

We held our annual drive through on the 24th

We have two students possibly three that will be doing their Senior Project with us in nursing.

We are doing our annual skills fair for clinical staff

DeeDee attended week long Emergency Preparedness training in Sacramento bringing back a lot of ideas on dealing with merging infectious diseases. She found that we can purchase emergency food that has a shelf life of 30 years which will save us money on not needing to rotate and throw away food that outdates.

Eastern Plumas Health Care Nursing Division Skilled Nursing Facilities Board Report 10/19/2023 by Lorraine Noble RN & Tamara Santella RN

CENSUS FOR 2023

JAN	FEB	MAR	APRIL	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC
99%	100%	105%	108%	109%	108%	98%	97%	98%	97%	0%	
53 Goal	53	53	53	53	53	59	59	59	59	59	59
52.51 Census	52.88	55.48	57.22	57.93	57.33	57.96	57.38	58	57		
		101%			108%			98%			
		Qtr 1			Qtr 1			Qtr 1			Qtr 1

Staffing:

- We are still using on traveling Nurses and C.N.A.s at the Loyalton campus.
- C.N.A. class scheduled to be March-April 2024
- 2nd Provider position has yet to be filled to support Medical Director

State Issues:

FYI: State Activity

7/31/23, date of state visit:

Portola Campus:

- 844364-no deficiencies, financial abuse from family
- 850653-no deficiencies, resident to resident abuse
- 845771-no deficiencies, RN used foul language with resident

Loyalton Campus:

- 845244-F600- Deficiency, resident to resident abuse
- 840956-no deficiencies, fall with injury
- 840098-F600-Deficiency, resident to resident abuse

8/23/23, date of state visit:

Loyalton Campus:

- · 855284-no deficiencies, complaint about staffing
- 855870-no deficiencies, fall with fx

9/19/23, date of state visit:

Loyalton Campus:

860250-No deficiencies regarding COVID outbreak in Loyalton

Eastern Plumas Health Care Board Report Tracy Studer Director of Clinics

October 26, 2023

The Loyalton Medical Clinic, Graeagle Medical Clinic and the Portola Medical Clinic were visited by Partnership Health for site audits on October 24th and October 25th.

The air balance testing for the new Loyalton Medical Clinic required re-testing which has been completed.

Most recent Wipfli meeting was on Monday, October 23, 2023 at 3 PM. Both the fire inspection and building inspection need to be signed off for the new building.

At the request of TFH, another OB Telehealth will be tried on November 8, 2023.

EPHC will meet again with Stacy Olson and Scott Bakker from Tahoe Forest Hospital on Thursday, 10/30/2023. I'm looking forward to the meeting to iron out details of having a TFH orthopedic physician assistant work at PMC twice per month and possibly LMC once per month.

Four EPHC clinic front office employees students have started a Medical Assistant program with US Career Institute. I receive weekly updates on their success and each one is doing great.



Eastern Plumas Health Care Board Report Executive Summary

Date: October 26, 2023

OPERATIONAL OVERVIEW:

The California legislature has concluded with over 900 bills signed by Governor Newsom. Several have implications to EPHC and rural hospitals across the state including:

- SB 525 establishes a minimum wage for health care workers under three specific parameters. For the 77 hospitals to include EPHC under one of the three parameters, the minimum wage will be set at \$18 beginning in June of 2024 with a 3.5% annual adjustment to the minimum wage floor until at rate of \$25 per hour is met in 2033.
- SB 616 increases the required sick time allocation to employees from 24 hours annually to 40 hours.
- AB 242 permanently allows CAHs to hire and employ physicians directly, sunsetting a pilot program that was set to expire this year. There was also federal legislation enacted to add California and Texas as the final states to participate in physician loan forgiveness programs through HSRA.
- AB 40 requires emergency medical services (EMS) to establish a patient offload time standard not to exceed 30 minutes. This legislation does not impact EPHC as our ambulance offload times are immediate but does prevent extended delays in acceptance of ambulance patients to the ER in metropolitan areas.
- AB 977 approval is still pending on this bill, but it would extend the penalties
 for violence committed against first responders and emergency room personnel. It
 would also allow for the posting of notices that a threat or assault against hospital
 personnel is a crime and could result in a felony conviction. The Hospital
 Association supports this bill as a deterrent to potential threats against hospital
 personnel across the state.

EPHC has submitted two program grants in October which will benefit the organization and our patients. The first is a CALOES grant for funding to enhance security hardening on campus. This would include additional exterior lighting, camera installation, and expanded door security for both the Portola and Loyalton campuses. The second is a 5-year program to enhance health care equity and access to MediCal recipients. This funding would come through our upcoming contract with Partnership Health Plan and include focused HEDIS measures, data collection, and patient outreach. We hope to have an approval for both programs by the end of the year as funds would be initiated in 2024.

The support from Serrano Associates for the collection of outstanding claims from Anthem is proceeding well. We anticipate collection of commercial accounts dating back to January 2022 to be resolved including interest payments by December of this year.

The EPHC Foundation Board conducted their October meeting with an emphasis on fundraising for the remounting project for our ambulance. The Board also authorized a contribution of funds for the SNF angel tree program which provides Christmas gifts to the residents of both the Portola and Loyalton campuses. An extensive discussion was held reviewing the development of a community needs assessment for grant funding opportunities. The Board continues to develop long range goals to assist EPHC in continuing and expanding services to the community, and we are very excited with the work they have accomplished in a short period of time.

PATIENT EXPERIENCE/EMPLOYEE ENGAGEMENT:

EPHC received 774 patient experience surveys during the first three quarters of the calendar year. This level of feedback provides statistically significant information and evaluation of our services and opportunities for improvement. Overall performance was provided to the QA Committee on October 11th, and the results indicate a high level of patient satisfaction across all service lines.

Our Service Excellence Council has continued to implement and monitor our strategic initiatives for both patient experience and employee engagement. The Council implemented a process improvement reporting system on our employee intranet site to gather improvement activities that have been implemented by various departments which can be used by the entire organization. These will be reported to the Board on an annual basis. The Council will also be implementing an employee enrichment site which will gather feedback and recommendations from staff regarding our engagement activities in support of our recruitment/retention strategies. Four Service Excellence Advisors have been added for 2024 and will continue to act as liaisons for all staff for future initiatives.

COMPLIANCE PROGRAM:

There were no compliance reviews initiated for the period of September 23rd through October 20th.

AGENDA ITEM COVER SHEET

RESPONSIBLE PARTY Donna Dorsey, RN, BSN Emergency Room Manager For Board Action BACKGROUND: During the September 27, 2023 CAH Committee meeting, the committee made the following consent agenda item recommendations to the Board of Directors. SUMMARY/OBJECTIVES: Approval of the following consent agenda items: Annual Policy Review: SNF ECCC Administration Nursing Biomed Infection Prevention Clinic EVS HR SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented.	ITEM						
ACTION REQUESTED? BACKGROUND: During the September 27, 2023 CAH Committee meeting, the committee made the following consent agenda item recommendations to the Board of Directors. SUMMARY/OBJECTIVES: Approval of the following consent agenda items: Annual Policy Review: SNF ECCC Administration Nursing Biomed Infection Prevention Clinic EVS HR SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented.			CAH Committee Consent Agenda				
ACTION REQUESTED? Emergency Room Manager For Board Action BACKGROUND: During the September 27, 2023 CAH Committee meeting, the committee made the following consent agenda item recommendations to the Board of Directors. SUMMARY/OBJECTIVES: Approval of the following consent agenda items: Annual Policy Review: SNF EOCC Administration Nursing Biomed Infection Prevention Clinic EVS HR SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented.	RESPONSIBLE PARTY		Donna Dorsey, RN, BSN				
BACKGROUND: During the September 27, 2023 CAH Committee meeting, the committee made the following consent agenda item recommendations to the Board of Directors. SUMMARY/OBJECTIVES: Approval of the following consent agenda items: Annual Policy Review: SNF ECCC Administration Nursing Biomed Infection Prevention Clinic EVS HR SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented.							
BACKGROUND: During the September 27, 2023 CAH Committee meeting, the committee made the following consent agenda item recommendations to the Board of Directors. SUMMARY/OBJECTIVES: Approval of the following consent agenda items: Annual Policy Review: SNF ECCC Administration Nursing Biomed Infection Prevention Clinic EVS HR SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented.	ACTION REQUESTED?						
During the September 27, 2023 CAH Committee meeting, the committee made the following consent agenda item recommendations to the Board of Directors. SUMMARY/OBJECTIVES: Approval of the following consent agenda items: Annual Policy Review: SNF ECCC Administration Nursing Biomed Infection Prevention Clinic EVS HR SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented.			For Board Action				
SUMMARY/OBJECTIVES: Approval of the following consent agenda items: Annual Policy Review: SNF ECOC Administration Nursing Biomed Infection Prevention Clinic EVS HR SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented.							
Approval of the following consent agenda items: Annual Policy Review: SNF ECCC Administration Nursing Biomed Infection Prevention Clinic EVS HR SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented.	During the September item recommendation	· 27, 2023 CAH Committee med is to the Board of Directors.	eting, the committee made the following consent agenda				
EOCC Administration Nursing Biomed Infection Prevention Clinic EVS HR SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented.	SUMMARY/OBJECTIV Approval of the following Annual Policy Review:	ES: ng consent agenda items:					
EOCC Administration Nursing Biomed Infection Prevention Clinic EVS HR SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented.	• SNI	<u>:</u>					
Administration Nursing Biomed Infection Prevention Clinic EVS HR SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented.							
Nursing Biomed Infection Prevention Clinic EVS HR SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented. IST OF ATTACHMENTS:							
Biomed Infection Prevention Clinic EVS HR SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented. IST OF ATTACHMENTS:							
Infection Prevention Clinic EVS HR SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented. IST OF ATTACHMENTS:		_					
Clinic EVS HR SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented. IST OF ATTACHMENTS:							
EVS HR SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented. IST OF ATTACHMENTS:							
SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented. IST OF ATTACHMENTS:							
SUGGESTED DISCUSSION POINTS: None SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented. IST OF ATTACHMENTS:							
SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented. IST OF ATTACHMENTS:							
SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented. IST OF ATTACHMENTS:	SUGGESTED DISCUSSION						
Move to approve CAH Committee Consent Agenda as presented. IST OF ATTACHMENTS:		JN POINTS:					
Move to approve CAH Committee Consent Agenda as presented. IST OF ATTACHMENTS:	SUGGESTED MOTION/	ALTERNATIVES:					
			s presented.				
	IST OF ATTACHMENTS: List attached.						

Care Planning	Nursing
Change in Condition and Alert Charting	SNF
Code Blue/White	EOCC
Code Gray: Combative Person	EOCC
Code Green	EOCC
Code Orange: Hazardous Material Spill	EOCC
Code Red: Fire and Smoke	EOCC
Code Triage: Internal and External	EOCC
Contracts: Processing & Execution Thereof	Administration
Emergency Department Log	Nursing
Equipment Management Program	Biomed
Helicopter Transport of Patients	EOCC
Infection Prevention Construction/Renovation Guidelines	Infection Prevention
Late Patient	Clinic
Linen Management	EVS
Patient and Visitor Electrical Equipment	BioMed
Patient Family Education, Plan for	Nursing
Prohibited Harassment, Discrimination and Retaliation	HR
Use of Personal Electronics	HR