

REGULAR MEETING OF THE BOARD OF DIRECTORS

Lompoc Valley Medical Center

June 27, 2024 5:00 p.m.

Board Room

Please contact the LVMC Administration Office at 805 –737 –3301 at least 24 hours prior to this meeting if you need a disability –related modification or accommodation, including auxiliary aids or services, in order to participate in this meeting.

AGENDA

Introductory Note: The acronym “I/D/A” next to an agenda item will indicate whether or not the item is a subject for information, discussion, action, or any combination of those options.

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| I. | <u>Call to Order</u> | I/D/A |
| II. | <u>Roll Call</u> | I |
| III. | <u>Public Communication</u>
The public may comment on any non –agenda item of interest to the public that is within the subject matter jurisdiction of the Board of Directors (Board) – limited to three minutes. The public is also welcome to comment – limited to three minutes – on any agenda item before the Board’s consideration of the agenda item. | I/D |
| IV. | <u>Consent Agenda</u> | |
| | A. Request for approval of Board of Directors’ meeting minutes: | |
| | 1. Regular Board of Directors Meeting – May 23, 2024 | I/D/A |
| | B. Request for approval of Committee meeting minutes: | |
| | 1. Building & Planning Committee –May 20, 2024 | I/D/A |
| | 2. Personnel Committee – May 20, 2024 | I/D/A |
| V. | <u>Departmental Annual Quality Improvement Reports</u> | |
| | A. Environmental Services (Deanna Hall) | I/D |
| | B. Rehabilitation Services (Aaron Poirier) | I/D |
| | C. Tabled Report | |
| | 1. Medical Surgical Department (Melinda DeHoyos) | I/D |
| VI. | <u>Request for Approval of Annual Quality Improvement Reports, Policy & Procedure Manuals</u> | |
| | A. Environmental Services Report and Policy & Procedure Manual | I/D/A |
| | B. Rehabilitation Services Report Policy & Procedure Manual | I/D/A |
| VII. | <u>Request for Approval of Policies, Guidelines and Procedures</u> | |
| | A. <u>General Nursing: (June 2024)</u> | I/D/A |
| | 1. Consent for Treatment of Patients that are Minors | |
| | 2. Refusal of Further Medical Treatment | |
| | 3. Education of Patient and Family | |
| | 4. Domestic Violence Screening and Reporting | |
| | 5. Perinatal Loss and Death Procedure Fetal Remains | |
| | B. <u>Quality Assurance Process Improvement (June 2024)</u> | I/D/A |
| | 1. Early Communication with Patient Family After a Harm Event & Appendix A | |
| | C. <u>Infection Prevention & Control Policies (June 2024)</u> | I/D/A |
| | 1. Admitting and Room Assignments Infection Control Policy | |

2. Alcohol-Based Hand Rub
3. Bioterrorism Plan
4. Cleaning, Disinfection, & Storage of Patient Care Equipment
5. Construction and Renovation Policy and Procedure
6. Contamination of Medical Records
7. Dietary & Cafeteria
8. Emerging Infectious Diseases (EID) Policy
9. Employee Screening at Entrances
10. Environmental Culturing
11. Environmental Services – Infection Prevention and Control
12. Facilities and Maintenance – Infection Control Policy
13. Hand Hygiene Program
14. Ice Machines: Care and Maintenance
15. Infection Prevention and Control Program
16. Infection Prevention and Control Subcommittee
17. Legionella Infection Control and Waterborne Pathogen Management Program
18. Monitoring of Refrigerators and Freezers
19. (MRSA) Precautions & Isolation Clearance for Methicillin Resistant Staphylococcus Aureus Infection/Colonized Patients/Admission Screening and Discharge Testing
20. Prevention & Control of Clostridium difficile (C. difficile) Infection
21. Protective (Neutropenic) Precautions
22. Response to an Influx of Infectious Patients
23. Standard Precautions
24. Surveillance Plan
25. Transmission-based Precautions
26. Transporting Patient with Communicable Disease
27. Ultrasound Gel Products in Imaging Services
28. Viral Hemorrhagic Fever: Triage of Patients IC Considerations
29. COVID-19 Policies
 - a. COVID-19 Specimen Collection
 - b. COVID-19 Vaccination Requirements
 - c. Discontinuation of Transmission-Based Precautions for Patients with COVID-19
 - d. EVS Guidelines for COVID-19
 - e. Management of Healthcare Providers with COVID-19 or Exposure to COVID-19
30. Employee Health Policies
 - a. Employee Health Policies
 - b. Occupational Exposure to Communicable Diseases

VIII. Reports to the Board

- A. Chief of Staff Report (K. Freeman) I/D
 1. Medical Staff Credentials - Medical Executive Committee
 - a. Request for Approval of Reappointment for period 07/01/2024 thru 06/30/2026 I/D/A
 - i. Hur, Jane L., MD - Diagnostic Radiology - Telemedicine
 - ii. Lowe, David D., MD - Anesthesiology - Active
 - iii. Mashreghi, Mitra, DMD - General Dentistry - Active
 - iv. Vineyard, Jennifer, DO - Internal Medicine - Active Office-Based
 - v. Zander, David A., MD - Internal Medicine - Active

- b. Request for Approval of Category Change: I/D/A
 - i. Hur, Jane L., MD - from Provisional Telemedicine to Telemedicine
 - ii. Lowe, David D., MD - from Provisional to Active
- c. Request for Approval of Appointment for the period 07/01/2024 thru 06/30/2025 I/D/A
 - i. Collin, Carlos, MD – Psychiatry - Provisional Telemedicine
 - ii. Vangala, Hemalatha, MD - Internal Medicine - Provisional
 - iii. Khan, Gulam Ashfaq, MD - Diagnostic Radiology - Provisional Telemedicine
 - iv. Yusupov, Andrey, MD - Diagnostic Radiology - Provisional Telemedicine
- d. Resignations I/D
 - i. Sichi, Thomas M., DO - Emergency Medicine - not reappointing 6/30/2024
 - ii. Patel, Kirtika R., MD - Anesthesiology - not reappointing 6/30/2024
 - iii. Owoyele, Adeyinka, MD - TeleRadiology - resigning as of 6/30/2024
 - iv. Woliver, Thomas B., MD - Oncology - resigning as of 6/30/2024
 - v. Stoehr, Constance A., MD - Oncology - resigning as of 6/30/2024
- 2. Allied Health Professional (AHP) Credentials
 - a. Request for Approval of Reappointment for the period 07/01/2024 thru 06/30/2026. I/D/A
 - i. Chavez, Jose, PA-C - Physician Assistant - AH Office-Based
 - ii. Fry, Paul D., PA-C - Physician Assistant - AH Office Based
 - b. Resignations I/D
 - i. Wentling, Christopher T., PA-C - Physician Assistant - resigning as of 6/30/2024
 - ii. Moreno, Veronica L., NP - Nurse Practitioner - resigning as of 6/30/2024
 - iii. Fletcher, Tyisha R., FNP - Nurse Practitioner - resigning as of 6/30/2024
- 3. Request for approval of the following privileges forms: I/D/A
 - a. Tele-Radiology Privileges Form
 - b. Radiology Clinical Privileges Form
- B. Chief Medical Officer’s Report I/D
- C. Staff Reports
 - 1. Chief Executive Officer I/D
 - a. Request for approval to consent to Crestwood Behavioral Health’s use of CBRE for Champion Center appraisal. I/D/A
 - 2. Chief Operations Officer/Chief Nursing Officer I/D
 - 3. Administrator, Comprehensive Care Center I/D
 - 4. Chief Financial Officer (See report in Board Packet.) I/D
- IX. Committee Reports
 - A. Finance Committee (E. Novin, Chair; L. Kelly) I/D
 - 1. Request for approval of Financial Reports for the period ended May 31, 2024. I/D/A
 - 2. Capital
 - a. Request for approval to purchase for Information Systems, a server for i2i interface to Altera (QIP Program). I/D/A

3. Contracts
 - a. Request for approval of Memorandum of Understanding – Clinical Experience Preceptor with Katherine Regenhardt, D.O. I/D/A
 - b. Request for approval of Addendum 10 to Chief Medical Officer Agreement – Medical Staff with Randall G. Michel, M.D. I/D/A
 - c. Request for approval of Addendum 1 to Professional Services Agreement – Neurology with Phillip Ente, M.D. I/D/A
4. Fiscal Year 2025 Budgets
 - a. Presentation of Operating Budget and Capital Budget I/D
 - b. Request to Approve Operating Budget I/D/A
 - c. Request to Approve 1- and 3-year Capital Budgets I/D/A
- B. Building & Planning Committee (R. McConnell, Chair; D. McAninch) I/D
- C. Personnel & Retirement Committee (R. McConnell, Chair; D. McAninch) I/D
 1. Request for approval of three (3) Scholarship Loan Applications. I/D/A
- X. District Foundation (E. Novin) I/D
- XI. Directors' Corner I/D

During this agenda item, any Director may share information, express concerns, or request that items be added to future agendas. This item is for information only, without discussion.
- XII. Legal Counsel Report (L. Johnson, Esq.) I/D

See report in Board Packet.
- XIII. Closed Session
 - A. The Board shall meet in closed session in accordance with Government Code Section 54956.9(d)(2) to confer with legal counsel regarding pending litigation, because a point has been reached where, in the opinion of its legal counsel, based on existing facts and circumstances, there is significant exposure to litigation against Lompoc Valley Medical Center. Number of matters: 1 I/D/A
 - B. The Board shall meet in closed session in accordance with Government Code Section 54957 to discuss and take action regarding the employment of a new CEO. I/D/A
- XIV. Open Session I/D

The Board shall meet in open session to report any action taken in closed session.

 - A. Request for approval of Chief Executive Officer Employment Contract with Yvette Cope. I/D/A
- XV. Adjournment I/D/A

In compliance with SB 343, effective July 1, 2008, complete copies of the agenda packet materials and supplemental materials produced after the agenda packet was mailed are available at Lompoc Valley Medical Center, 1515 East Ocean Avenue, Lompoc, CA 93436.