



West Side Health Care District

119 Adkisson Way Taft, CA 93268 (661) 765 - 7234

Board Meeting Agenda Thursday, August 25, 2022 at 2:00 pm

1. **Call to Order/Pledge of Allegiance**

2. **Public Input**

This is the time for public comment. Members of the public may be heard on any item on the agenda. A person addressing the Board will be limited to five minutes unless the Chairperson grants a longer period of time. Comments by members of the public on an item on the agenda will only be allowed during consideration of the item by the Board. When the item is called, please raise your hand or stand if you desire to address the Board.

Members of the public may also, at this time only, address the Board on any non-agenda items, your comments will be limited to five minutes. You should raise your hand or stand at this time. Although Board Members may ask questions for clarification, the Board will not debate issues with the speaker. Non-emergency items may be rescheduled for a discussion at a later date. Please note, the Board may take action on non-agenda items only in emergency circumstances.

After the comments, the public is allowed to remain and listen or may leave at any time.

AMERICANS WITH DISABILITIES ACT (Government Code Section 54943.2) The West Side Health Care District is accessible to persons with disabilities. Disabled individuals who need special assistance to attend or participate in a meeting of the West Side Health Care District may request assistance at 119 Adkisson Way Taft, California, or by calling (661) 765-7234. Reasonable effort will be made to accommodate individuals with disabilities by making meeting materials available in alternative formats. Requests for assistance should be made five (5) working days in advance of a meeting whenever possible.

3. **Approval of Minutes**

Board Meeting Minutes – Thursday, July 28, 2022

4. **Financial Review**

District CPA's, Kelly Hohenbrink, will join the meeting via telephone.

A. Review and Discussion /Approval the July 2022 Financial Reports

5. **Annual Review and Approval of Policy and Procedures**

A. West Side Family Health Care- Miscellaneous Policies

6. Administrative Staff Reports

- A. July 2022, General Information- Attached for informational purposes only.
No Action.

7. Committee Updates

- A. **Finance Committee**
Eric Cooper or Ginny Miller
- B. **Facilities Committee**
Eric Cooper or Darren Walrath
- C. **Community Outreach**
Jan Ashley or Darren Walrath
- D. **Personnel Committee**
Adele Ward or Jan Ashley
- E. **Additional Board Member Input**

This Portion of the meeting is reserved for Board Members to present information, announcements, or other items that have come to their attention. A Board member may request that an item is placed on the agenda for consideration at a future meeting or refer an item to the Executive Director for a formal report. The Board will take no formal action at this time.

8. Items for Future Agendas

9. Adjournment

ITEM 3



West Side Health Care District

119 Adkisson Way, Taft, CA 93268 (661) 765-7234

BOARD MEETING MINUTES

Thursday, July 28, 2022, at 2:00 pm

1. CALL TO ORDER

Board Vice President, Adele Ward, called the meeting to order at 2:02pm. Adele Ward led the Pledge of Allegiance. Those present were:

Eric Cooper	Board President, via telephone
Adele Ward	Board Vice President
Jan Ashley	Board Member
Darren Walrath	Board Member
Ryan Shultz	Executive Director
Robyn Melton	District Manager

Board President, Eric Cooper joined the meeting via telephone. Board Secretary/Treasurer, Ginny Miller was excused from the meeting.

2. PUBLIC INPUT- None

3. APPROVAL OF MINUTES

The Board meeting minutes were reviewed. After discussion, the Minutes of Thursday, June 23, 2022, were approved by the Board of Directors.

PERSONNEL COMMITTEE MINUTES

The personnel Committee Minutes were reviewed. After discussion, a motion was made by Jan Ashley to approve the Committee Minutes of Wednesday, July 6, 2022. Darren Walrath seconded.

After discussion, Darren Walrath made a motion to approve the 7% Cost of Living raises for staff. The raises will go into effect August 1, 2022. Jan Ashley seconded. Motion carried.

FACILITIES COMMITTEE MINUTES

The Facilities Committee Minutes were reviewed. After discussion, Darren Walrath made a motion to approve the committee minutes of July 21, 2022. Jan Ashley seconded. Motion carried.

4. FINANCIAL REVIEW

The Financial Statements of June 2022 were reviewed by CPA, Kelly Hohenbrink. After discussion, a motion was made Eric Cooper to approve the June 2022 financial statements. Darren Walrath seconded. Motion carried.

5. ANNUAL REVIEW AND APPROVAL OF POLICY AND PROCEDURES
After review and discussion, Jan Ashley made a Motion to approve the policies and procedures. Eric Cooper seconded. Motion carried. The West Side Family Health Care Policy and Procedures that were reviewed were:
Autoclave Use and Maintenance, Child Abuse-Reporting, Standardized Procedure for Strep A-Rapid, Compliance, Domestic Violence Reporting Suspicious Injury Reporting, Sterile Supplies and Instruments, Standardized Procedure for Visual Acuity Testing, Withdrawal of Care, Crash Cart, Sterile Shelf Life,
6. ADMINISTRATIVE STAFF REPORTS
June 2022, General Information- Attached for informational purposes only.
No action.
7. BOARD COMMITTEE REPORTS
 - a. Finance Committee-Nothing further at this time.
 - b. Facilities Committee- Nothing further at this time.
 - c. Community Outreach Committee- Nothing further at this time.
 - c. Personnel Committee- Nothing further at this time.
 - d. Additional Board Member Input- Nothing further at this time.
8. ITEMS FOR FUTURE AGENDA
Nothing at this time.
9. ADJOURNMENT
At 2:54 pm, the Board made a motion to Adjourn the Board Meeting of July 28, 2022 was adjourned.

Respectfully Submitted: _____
Adele Ward, Board Vice President

ITEM 4

ITEM 5



**WEST SIDE HEALTH CARE DISTRICT
WEST SIDE FAMILY HEALTH
POLICY AND PROCEDURES**

POLICY: Adverse Drug Reaction	REVIEWED: 2/5/16; 2/15/17; 2/28/18; 10/25/18; 9/27/19; 8/3/22
SECTION: Clinical	REVISED: 2/15/17; 2/28/18
EFFECTIVE: 8/25/22 10/24/19	MEDICAL DIRECTOR:

Subject: Adverse Drug Reaction

Objective: To establish guidelines in the event of an adverse medication reaction

Acuity Rating: Mild to Severe

Procedure:

1. It is the practitioner's responsibility to educate the patient regarding any expected or potential side effects of any medication being ordered.
2. The practitioner and nurse/medical assistant who is administering the medication will ensure the patient's understanding of the benefits, expected or potential side effects of the medication.
3. When a patient reports or a staff member observes signs of a medication reaction, staff will follow Clinic protocol for medication reactions. The ordering practitioner will be notified immediately and will give the instructions for the patient regarding the prescribed medication. The patient will be instructed by the practitioner or nursing staff of the plan of care.
4. The patient will be advised and expected to report any side effects to the practitioner, nurse, or medical assistant.
5. Adverse drug reactions are considered noxious and generally unintended and include undesired effects, allergic reactions, and idiosyncratic reactions.
6. Reactions may be exaggerated but are otherwise normal pharmacological action of a drug at usual dose. They may be an aberrant effect not expected at usual therapeutic doses.
7. Withhold any further administration of the medication if the patient reports an adverse drug reaction.
8. Notify the practitioner immediately and obtain written orders for treatment.
9. Advise patient and/or family of plan of care.



Documentation:

1. Documentation of all medication reactions/adverse effects will be recorded in the patient's record.
 - a. Symptoms
 - b. Time the practitioner was notified and what orders were given.
 - c. Patient notification and response.
 - d. Any follow up care or instructions given.
 - e. Record allergy in allergy section of patient record
 - f. Refer to clinical questions and guidance as posted in the nurses' station.

Reporting:

1. In the case of adverse reactions to medications, the practitioner or designee will report the data to MedWatch at <https://www.fda.gov/safety/medwatch-fda-safety-information-and-adverse-event-reporting-program><https://www.fda.gov/Safety/MedWatch/default.html>.
2. In the case of adverse reactions to vaccinations, the practitioner or designee will report the data to VAERS at VAERS.hhs.gov.

Notify Pharmacy

If patient is reporting a reaction that occurred from a medication that was filled at a pharmacy, the pharmacist at the pharmacy will be notified of the patient's reaction.

Medication Administered in the Clinic

1. If an adverse/reaction of medication occurs from medication given to the patient in the Clinic, the attending staff member will complete an incident report.
2. A copy of the patient's visit note will be attached to the incident report and it will be sent to the Clinic Director.
3. The Clinic Director will review the report with the Medical Director and it will be reviewed at the Quality Improvement Meeting and/or with the Medical Staff.



**WEST SIDE HEALTH CARE DISTRICT
WEST SIDE FAMILY HEALTH
POLICY AND PROCEDURES**

POLICY: Age Restriction	REVIEWED: 1/28/16; 2/15/17; 2/23/18; 10/25/18; 9/27/19; <u>8/3/22</u>
SECTION: Administration	REVISED:
EFFECTIVE: <u>8/25/22</u> 10/24/19	MEDICAL DIRECTOR:

Subject: Age Restriction

Objective: The Clinic does not discriminate on the basis of age in admission or access to its programs and activities.

Response Rating:

Required Equipment:

Procedure

1. It is the policy of the Clinic to extend services to persons under and over the age of 18.



**WEST SIDE HEALTH CARE DISTRICT
WEST SIDE FAMILY HEALTH CARE
POLICY AND PROCEDURES**

POLICY: Kern Health Systems Specialist Request	REVIEWED: 2/10/16; 2/16/17; 2/2/18; 11/15/18; 10/29/19; 7/7/20; <u>8/3/22</u>
SECTION: Registration	REVISED: 11/15/19
EFFECTIVE: <u>8/25/22</u> 11/21/19 ; <u>7/23/20</u>	MEDICAL DIRECTOR:

Subject: Kern Health Systems Specialist Request

Objective: To obtain authorization for Kern Family Health Care (KFHC) patients to see an in-network specialist provider

Response Rating:

Required Equipment:

Procedure:

1. After completion of physician document of patient care and treatment, print the current face sheet and provider's notes with diagnosis, corresponding ICD-10 code, reason for the referral, and pertinent labs/x-rays.
2. Using this information to, complete the KFHC Care Specialist Request form online via the Provider Portal at provider.kernfamilyhealthcare.com.
3. Scan/Fax provider notes, pertinent labs, EKGs and/or x-rays to the scan folder and upload it on the portal or fax to KFHC secure fax number 661-664-5190.
4. Document in the patient's medical record AND the Clinic Referral Log the date the request was made, the name of the specialist provider, specialist address, specialist phone number, and the purpose of the request.
5. Upon receipt of authorization, contact the Specialist provider to schedule an appointment then contact the patient to advise of the date, time, and location of the appointment.
6. Using the Referral Log as a reminder system, ensure receipt of Specialist provider's report of their care/treatment of the patient. If the report is not received within 10 days of the scheduled appointment, contact the Specialist and request the report, documenting the request on the Referral Log.



**WEST SIDE HEALTH CARE DISTRICT
WEST SIDE FAMILY HEALTH CARE
POLICY AND PROCEDURES**

POLICY: ORGANIZATION OF NURSING PERSONNEL	REVIEWED: 2/17/16; 2/16/17; 2/1/18, 12/20/18; <u>8/3/22</u>
SECTION: HUMAN RESOURCES	REVISED:
EFFECTIVE: <u>8/25/22/22/19</u>	MEDICAL DIRECTOR:

Subject: Organization of nursing personnel

Objective: Under the direction of the Clinic Director, who functions as the liaison between nursing personnel and the medical staff, nursing care is delivered according to policies and procedures which have been authorized by the Medical Staff and the Governing Body.

1. To clarify administrative and supervisory responsibilities for nursing personnel.
2. To delineate areas of responsibility.
3. To clarify determination of nursing care hours.
4. To determine the evaluation of patient care.
5. To identify the methods used for patient care delivery.

Response Rating:

Required Equipment:

Procedure:

1. Nursing hours are determined based on the Clinic's hours of operation. A physician or a nurse practitioner/physician assistant will remain in the Clinic during hours of operation.
2. Nursing staff is organized according to the details outlined in the approved job descriptions, which define staff relationships and details of responsibility for each category of nursing personnel.
3. Nursing Administrative personnel
 - a. The Clinic Director has 24-hour responsibility for the administration of the Clinic.
 - b. The Director's designee shall be appointed to act in the absence of the Director. The Medical Director and staff will be notified of the designee in the absence of the Director.
 - c. Staff, licensed nurses, and Medical Assistants are delegated nursing care responsibilities by the physician and the Clinic Director.



4. Evaluation of Nursing care to determine quality and appropriateness of nursing care will be completed using the following methods
 - a. Review of incident reports
 - b. Quality Assurance Program
 - c. Patient needs satisfaction (verbal and/or written)
 - d. Nursing staff needs satisfaction (verbal and/or written)
 - e. Medical Staff needs satisfaction (verbal and/or written)



**WEST SIDE HEALTH CARE DISTRICT
WEST SIDE FAMILY HEALTH
POLICY AND PROCEDURES**

POLICY: Preventative Maintenance Inspections	REVIEWED: 2/16/16, 9/14/16; 9/8/17; 7/22/18; 6/16/19; <u>8/3/22</u>
SECTION: Operations	REVISED: 9/14/16; 6/16/19; <u>08/18/22</u>
EFFECTIVE: <u>8/25/22</u> / 25/19	MEDICAL DIRECTOR:

Subject: Preventative maintenance inspections

Objective: The Clinic will interface with an appropriate Biomedical vendor to provide a Preventive Maintenance program that will ensure all equipment used in the diagnosis, treatment, and therapy of patients is properly maintained and will meet the standards required by Title 22 and community standards. Designated equipment in service for the care and treatment of patients will be inspected, safe and in good working order, inspected annually, with inspections and repairs documented.

Response Rating:

Required Equipment:

General Information:

1. All equipment in the Clinic will be evaluated for inclusion in a preventative maintenance program that will:
 - a. Prolong the life or improve the operation of the device.
 - b. Identify a failure or discrepancy not readily apparent to the normal user.
 - c. Assure that the items in electrical-sensitive patient locations meet the requirements of ANSI/AAMI, safe current limit stands, as specified by California Title 22.
 - d. Provide management reporting of equipment history reports and failure modes.
2. A current accurate inventory of all diagnostic and therapeutic equipment utilized within the facility will be available.
3. A Preventative Maintenance process will be developed for each equipment type that is available to the Clinic. Each process will:
 - a. Identify inspection frequency.
 - b. Include manufacturer recommended specifications, where applicable.
 - c. Verify compliance with JCAHO and/or Title 22



4. All service to equipment will be documented.
 - a. A copy of all service work will be kept in the department.
 - b. A summary of service history will be provided periodically to help identify failure trends.
 - c. Repairs that may affect the calibration, operation, or electrical integrity of any device will have an inspection completed after the repair, and such will be documented.

- ~~5.~~ 5. Inspection and request for repair of equipment is the responsibility of the ~~Director of Clinical Operations~~ Clinic Director and/or designee.
- ~~6.~~ 6. All Biomedical Equipment used in the diagnosis, treatment and therapy of patients will be approved by the Clinic Director, and be calibrated by the Bio-Medical Vendor if applicable, prior to its use for patient care.

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Procedure:

1. The Bio-Medical Vendor will make annual inspections on all Clinic equipment.
2. New or borrowed equipment will be inspected by the Bio-Medical Vendor and tagged as inspected.
3. The Clinic Director will insure new equipment is added to the asset equipment list and retired equipment removed from the asset equipment list, as the asset list must be accurate at all times.
- ~~5-7.~~ 7. Defective equipment discovered by personnel is to be marked defective, removed from use and reported to the ~~Director of Clinical Operations~~ Clinic Director.
- ~~6-8.~~ 8. ~~Director of Clinical Operations~~ The Clinic Director or their designee will ~~contact~~ complete a Maintenance Request form and contact the appropriate vendor.
- ~~7-9.~~ 9. Equipment requiring service or repair will be assigned to personnel or vendor(s) with appropriate training and any necessary credentials.



WEST SIDE HEALTH CARE DISTRICT
WEST SIDE FAMILY HEALTH
POLICY AND PROCEDURES

POLICY: Late Arriving Unscheduled Patients	REVIEWED: 3/17/16; 3/7/17; 6/1/17; 6/4/18; 4/22/19; 7/7/20; <u>8/3/22</u>
SECTION: Admitting	REVISED: 3/27/17; 7/10/18, <u>08/18/22</u>
EFFECTIVE: <u>8/25/22</u> 7/23/20	MEDICAL DIRECTOR:

Subject: Late Arriving Patients

Objective: To ensure effective operations of the Clinic and to reduce unnecessary overtime costs, the Clinic will not schedule patients' appointments after 8:30pm and will not register patients for care after 8:30pm unless the patient has a medical emergency.

Response Rating: Mandatory

Required Equipment: None

Procedure:

1. The Clinic electronic scheduling module will support the scheduling of physical examinations, appointments for acute illness, follow-up, and health maintenance visits.
2. Adult and Child comprehensive physical examinations will not be scheduled after 5:00pm unless approved by the practitioner. Sports physicals may be performed after confirmation with the practitioner.
3. Patients arriving at the Clinic without an appointment after 8:30pm will be assessed by the registered licensed nurse on duty who will:
 - a. Document of chief complaint
 - b. Take and document vital signs
 - c) Exception: Patients will be assessed by a licensed nurse earlier if an early registration closure has been put in place.In absence of a registered nurse, the licensed vocational nurse or medical assistant will document chief complaint and vital signs.
4. The registered nurse, licensed vocational nurse, or medical assistant will consult with the practitioner and present chief complaint and vital signs information.

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5. Patients with urgent medical complaints will be seen by the practitioner.

Note: Examples are listed below but the decision is not limited to just these examples.

- a. Acute chest pain
 - b. Acute abdominal pain
 - c. Active labor

 - d. Disabling headache
 - e. Fever
 - i. Temp >100 in an infant younger than 2 months
 - ii. Temp >101 for any patient
 - iii. Temperatures in infants younger than 4 months should be obtained rectally.
 - f. Uncontrollable vomiting
 - g. Uncontrollable bleeding
 - h. Possible fracture
 - i. Head trauma
 - j. Shortness of breath
 - k. Altered mental status
6. Patients whose complaints are not deemed medically urgent will be scheduled for an appointment on the next available day. ~~following day~~.
7. Patients requesting medication refills will be scheduled for an appointment on the following day~~next available day~~.
8. Patients requesting physician "school notes" will have their medical record researched to determine whether they were seen by a Clinic practitioner during the timeframe in question. If the patient was seen, the previously provided note will be re-printed. If the patient was not seen, the Clinic will decline to provide a "school note", but will offer an appointment for the next available day.



**WEST SIDE HEALTH CARE DISTRICT
WEST SIDE FAMILY HEALTH
POLICY AND PROCEDURES**

POLICY: Waived Testing – Bilirubin Meter	REVIEWED: 7/13/16; 6/25/17; 7/6/18; 6/16/19; <u>8/3/22</u>
SECTION: Waived Testing	REVISED:
EFFECTIVE: <u>8/25/22</u> / 7/25/19	MEDICAL DIRECTOR:

Subject: Waived Testing – Bilirubin Meter

Objective: Waived Testing using the BiliChek device

Response Rating: Mandatory

Required Equipment:

Procedure:

1. Apply a new BiliCal tip to the hand-held unit. Firmly press it on the unit to ensure proper seating.
2. Select **Done** to begin calibration. The unit will beep and the display will indicate calibration successful.
 - a. The unit will not beep if the sound is set to level 0.
3. Pull on the BiliCal tab and peel away the protective covering and calibration material from the tip and dispose, leaving only the clear film on the BiliCal tip. Press the (Enter) key to select **Done**.
4. Gently press the BiliCal tip against the patient’s forehead or sternum. The measurement number on the display will change from yellow to green when proper pressure is applied. Do not increase pressure. The number will return to yellow if excessive pressure is applied.

Lift the BiliCal tip from the patient’s forehead or sternum and then repeat the process four more times.
5. A single tone sounds after each reading to indicate that it was successful. If an error occurs during the reading, a yellow error screen will appear with a description of the error. Follow the on-screen troubleshooting instructions to correct the problem.
 - a. The unit will not beep if the sound is set to level 0.
6. When the readings are complete, the BiliChek displays and saves all entered information.
7. Remove and dispose of the BiliCal tip and return the hand-held unit to the charger base.
8. Provider will document results in the patient’s medical record.

Reference: Philips BiliChek User Manual, 2015 page 23

ITEM 6



August 18, 2022

TO: Board of Directors
FROM: Ryan Shultz, Executive Director
SUBJECT: July General Information

A handwritten signature in black ink, appearing to be "RS", is written over the "FROM:" line.

The enclosed information highlights notable activities and projects of West Side Health Care District (WSHCD) and West Side Family Health Care (WSFHC) for the month of July.

- Providers and staff continue to work extremely hard to delivery patient care services. **The clinic reported more than 2100 patient encounters and a Rural Health Clinic Payer Mix of 68%.**
- Management continues to investigate the performance of the HVAC system servicing the clinic lobby. **Kern Mechanical Engineering working on the project and maintaining the HVAC unit.**
- **The radiology software and the imaging detector plate are scheduled to be updated and replaced in September.**
- Management has engaged two consultants to assist with studying the feasibility of adding new RHC services to the clinic. Management will prepare options and proposals for the board to consider later this year.
- Recently Management received notification that the State of California rejected the Clinic's Informal Appeal of its RHC Reconciliation Audit. Management has engaged an attorney to assist with preparing a Formal Appeal of the State's ruling.
- **Management are preparing reporting documents for the Rural Health Clinic Covid-19 Testing and Mitigation Grant totaling \$100,000.** Reporting documents are due December 31, 2022.
- **The Clinic recently received a \$75,000 grant from Kern Health Systems to help expand its Enhanced Care Management Program.** Funds will be earned according to completed benchmarks with the grant period ending December 31, 2023.
- **Management are preparing reporting documents for the Rural Health Clinic Vaccine Confidence Grant totaling \$50,000.** Reporting documents are due September 30, 2022.
- **Houchin Community Blood Bank will be at the clinic on September 20th between 12-6pm for a community blood drive.**
- Management staff attended the California Association of Rural Health Clinics conference in Folsom, California July 25th through July 27th.