## REGULAR MEETING OF THE SAN GORGONIO MEMORIAL HOSPITAL BOARD OF DIRECTORS

## November 3, 2020

The regular meeting of the San Gorgonio Memorial Hospital Board of Directors was held on Tuesday, November 3, 2020. In an effort to prevent the spread of COVID-19 (coronavirus), and in accordance with the Governor's Executive Order N-29-20, there was no public location for attending this board meeting in person. Board members and members of the public participated via WebEx.

Members Present:	Phillip Capobianco III, Susan DiBiasi (Chair), Estelle Lewis, Ehren Ngo,
	Ron Rader, Steve Rutledge, Dennis Tankersley, Andrew Gardner

Absent: None

Required Staff: Steve Barron (CEO), Holly Yonemoto (CBDO), Annah Karam, (CHRO), Pat Brown (CNO), Steven Hildebrand, MD (Chief of Staff), Ariel Whitley (Executive Assistant), Karan Singh, MD (CQO)

AGENDA ITEM		ACTION / FOLLOW-UP
Call To Order	Chair Susan DiBiasi called the meeting to order at 4:03 pm.	
Public Comment	Members of the public who wished to comment on any item on the agenda were encouraged to submit comments by emailing <u>publiccomment@sgmh.org</u> prior to this meeting. No public comment emails were received.	
OLD BUSINESS		
Proposed Action - Approve Minutes	Chair DiBiasi asked for any changes or corrections to the minutes of the October 6, 2020 regular meeting as included on the board tablets.	The minutes of the October 6, 2020
October 6, 2020 regular meeting.	There were none.	regular meeting will stand correct as presented.
NEW BUSINESS	I	l

AGENDA ITEM		ACTION /		
		FOLLOW-UP		
Hospital Board Chair monthly report	Chair DiBiasi reported that the Ad Hoc Nomination Committee nominated an individual to fill the seat vacated by Ehren Ngo.			
November, December, and January Board/Committee meeting calendars	Calendars for November, December, and January were included on the board tablets.			
CEO Monthly report	Steve Barron, CEO reported that cash flow and hospital utilization is low. He also reported that the ED volume is down by around 25%. He reported that expenses are high and that there is another round of CARES Act Funding that we have applied for. We should have an answer as to if we qualified in the near future.			
Proposed Action – Approve Plan of Cooperation (POC) for the Paternity Opportunity Program (POP) between County of Riverside and San Gorgonio Memorial Hospital	Steve Barron, CEO mentioned that the purpose of the Plan of Cooperation (POC) for the Paternity Opportunity Program (POP) is to establish responsibilities and guidelines for an effective administration of the POP for the securing of financial support for minor children. This agreement is signed annually. BOARD MEMBER ROLL CALL:	M.S.C., (Rutledge/Rad er), the SGMH Board of Directors approved the Plan of Cooperation (POC) for the Paternity Opportunity		
For Review – Mission/Vision/ Values Statement	sion/Values Statement is included in the Board binder for review.tementIt was noted that previous District Board Director, Lanny			
	Swerdlow, suggested a few changes at the Strategic Board Meeting earlier this year. The Mission, Vision, and Value Statement is scheduled for its annual approval at the			

AGENDA ITEM					ACTION / FOLLOW-UP
	December Board meeting.				
Proposed Action – Approve 2021 Meeting Dates	Chair DiBiasi re list of suggested BOARD MEME Capobianco Lewis Rader Tankersley	M.S.C. (DiBiasi/Ngo), the SGMH Board of Directors approved the 2021 Meeting Dates as presented.			
For Review – Existing 2020 Slate of Officers	Chair DiBiasi noted that the 2020 Slate of Officers was included on the board tablets as informational. The proposed approval for the 2021 Slate of Officers is scheduled for the December 2020 meeting to be effective at the January 2021 board meeting.				
Bi-monthly Patient Care Services Report	Pat Brown briefly reviewed the Bi-monthly Patient Care Services report as included on the board tablets.				
Foundation monthly report – informational	Chair DiBiasi noted that the written Foundation monthly report was included on the board tablets. Dennis Tankersley joined the meeting at 4:36 PM				
Proposed Action – Approve 2021 Compliance Plan	Compliance Officer, Annah Karam, briefly reviewed the Corporate Compliance Plan for 2021 being submitted for annual Board approval. BOARD MEMBER ROLL CALL:				
	Capobianco Lewis	Yes Yes	DiBiasi Ngo	Yes Yes	2021 Compliance
	Rader Tankersley	Yes Yes	Rutledge       Motion carried	Yes	Plan as presented.
COMMITTEE REP	PORTS:				

AGENDA ITEM					ACTION / FOLLOW-UF			
Ad Hoc	The Ad Hoc Nominating Task Force is presenting Andrew				M.S.C.,			
Nominating Task		-	at on the Hospita	-	(Rader/Ngo),			
Force	noted that And	the SGMH						
	with an initial te	Board of						
Proposed Action –		Directors						
Approve proposed	BOARD MEME	BOARD MEMBER ROLL CALL:						
new Board					Andrew			
member.	Capobianco	Yes	DiBiasi	Yes	Gardner to fill			
	Lewis	Yes	Ngo	Yes	the vacant			
	Rader	Yes	Rutledge	Yes	seat on the			
	Tankersley	Yes	Motion carried	l.	Hospital			
					Board.			
Finance	Holly Yonemote	o, CFO, revie	ewed the Executi	ve Summary of	M.S.C.,			
Committee			al report which w		(Rader/Rutled			
	1		he Finance Comm		ge), the			
Proposed Action –		1.0	vere also include		SGMH Board			
Recommend	tablet. It was no	oted that the	Finance Committ	tee recommends	of Directors			
Approval of the	approval of the	September 20	20 Financial repo	ort as presented.	approved the			
September 2020		approval of the September 2020 Financial report as presented.						
Financial	BOARD MEME	BER ROLL C	CALL:		2020			
Statement.		Financial						
	Capobianco	Yes	DiBiasi	Yes	Statement as			
	Gardner	Abstain	Lewis	Yes	presented.			
	Ngo	Yes	Rader	Yes				
	Rutledge	Yes	Tankersley	Yes				
	Motion carried.							
Chief of Staff	Steven Hildebra	und, MD, Ch	ief of Staff brief	ly reviewed the	M.S.C.,			
Report	Medical Execut	tive Commit	tee report as in	ncluded on the	(DiBiasi/Rade			
	Board Tablets.	r), the SGMH						
	Dourd Tuorets.							
Proposed Action –					Board of			
Approve	Approval Items:				Directors			
Approve Recommendations	Approval Items:				Directors approved the			
Approve Recommendations of the Medical	Approval Items:		s and Procedure	s	Directors approved the Medical			
Approve Recommendations of the Medical Executive	Approval Items: Annual Approv	al of Policie		\$	Directors approved the Medical Executive			
Approve Recommendations of the Medical	Approval Items:	al of Policie		8	Directors approved the Medical Executive Committee			
Approve Recommendations of the Medical Executive	Approval Items: Annual Approv BOARD MEME	v <b>al of Policie</b> BER ROLL C	ALL:		Directors approved the Medical Executive Committee recommended			
Approve Recommendations of the Medical Executive	Approval Items: Annual Approv BOARD MEME Capobianco	v <b>al of Policie</b> BER ROLL C No	CALL:	Yes	Directors approved the Medical Executive Committee recommended approval			
Approve Recommendations of the Medical Executive	Approval Items: Annual Approv BOARD MEME Capobianco Gardner	v <b>al of Policie</b> BER ROLL C <u>No</u> Abstain	ALL: DiBiasi Lewis	Yes Yes	Directors approved the Medical Executive Committee recommended			
Approve Recommendations of the Medical Executive	Approval Items: Annual Approv BOARD MEME Capobianco	v <b>al of Policie</b> BER ROLL C No	CALL:	Yes	Directors approved the Medical Executive Committee recommended approval items as			

ACENDA ITEM					ACTION /
AGENDA ITEM					FOLLOW-UP
Proposed Action – Approve Policies and Procedures	There were twe the board tablets BOARD MEMI	M.S.C., (/), the SGMH Board of Directors approved the			
	Capobianco Gardner Ngo Rutledge Motion carried.	Yes Abstain Yes Yes	DiBiasi Lewis Rader Tankersley	Yes Yes Yes Yes	policies and procedures as submitted.
Community Benefit events/Announcem ents/and newspaper articles	Miscellaneous in Ron Rader ann Beaumont Char Morning Beaun The guest spea Sheriff.				
Adjourn to Closed Session	Chair DiBiasi re and/or acted upo Proposed Healthca Credenti Receive Committ Receive Prepared Receive report The meeting adj				
Reconvene to Open Session	At the request o actions taken/in as follows: Recomm Board – Received Commit	f Chair DiBia formation rec lended approv Medical Staff	closed session at si, Ariel Whitley eived during the val to the Healthc Credentialing erformance Impro-	reported on the Closed Session are District	

AGENDA ITEM		ACTION / FOLLOW-UP
	<ul> <li>Preparedness/Environment Safety report</li> <li>Received Quarterly Corporate Compliance Committee report</li> </ul>	
Future Agenda Items	None	
Adjourn	The meeting was adjourned at 5:18 pm.	

In accordance with The Brown Act, *Section 54957.5*, all reports and handouts discussed during this Open Session meeting are public records and are available for public inspection. These reports and/or handouts are available for review at the Hospital Administration office located at 600 N. Highland Springs Avenue, Banning, CA 92220 during regular business hours, Monday through Friday, 8:00 am - 4:30 pm.

Respectfully submitted by Ariel Whitley, Executive Assistant