

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

May 3, 2022

The regular meeting of the San Gorgonio Memorial Hospital Board of Directors was held on Tuesday, May 3, 2022. In an effort to prevent the spread of COVID-19 (coronavirus), and in accordance with the Governor’s Executive Order N-29-20 (pending AB 361 implementation), 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, Ehren Ngo, Ron Rader, Steve Rutledge (Vice Chair), Randal Stevens, Dennis Tankersley, Siri Welch

Members Absent: Susan DiBiasi (Chair), Joel Labha

Required Staff: Steve Barron (CEO), Pat Brown (CNO/COO), Daniel Heckathorne (CFO), Sherif Khalil, MD (Chief of Staff), Annah Karam (CHRO), Ariel Whitley (Executive Assistant), Karan P. Singh, MD (CMO), Angie Brady (ED Director), Margaret Kammer (Controller), Susan Sommers (Infection Control Director), Peter Kim (Performance Improvement Director), Jayme Goodner (Surgical Services Director)

AGENDA ITEM		ACTION / FOLLOW-UP
Call To Order	Vice Chair, Steve Rutledge, called the meeting to order at 4:02 pm.	
Public Comment	Members of the public who wished to comment on any item on the agenda were encouraged to submit comments by emailing publiccomment@sgmh.org prior to this meeting. No public comment emails were received.	
GENERAL TOPIC		
da Vinci Robot Presentation	Jayme Goodner, our Surgical Services Director briefly explained her experience being a patient of a robotic surgery procedure. Dr. Singh presented on the da Vinci Robot, how it works, and why hospitals invest in equipment/services as such.	
OLD BUSINESS		
Proposed Action - Approve Minutes	Vice Chair, Steve Rutledge, asked for any changes or corrections to the minutes of the April 5, 2022, regular meeting as included on the	The minutes of the April 5, 2022,

AGENDA ITEM		ACTION / FOLLOW-UP
April 5, 2022, regular meeting.	board tablets.	regular meeting will stand correct as presented.
NEW BUSINESS		
Hospital Board Chair Monthly Report	No report.	
CEO Monthly Report	Steve Barron reported that census has been low. He also mentioned that we applied for a grant/earmark for about \$500,000 worth of equipment and should hear back soon.	
May, June, & July Board/Committee meeting calendars	Calendars for May, June, & July were included on the board tablets.	
Foundation Monthly Report	In the absence of Valerie Hunter, Steve Barron gave the Foundation Monthly Report as included on the board tablets.	
Patient Care Services Bi-Monthly Report	Vice Chair, Rutledge noted that the Patient Care Services Bi-Monthly report was included as a handout for review. Pat Brown reviewed the Patient Care Services Bi-Monthly Report.	
Format of Future Meetings – Discussion	Dennis Tankersley discussed returning to in-person meetings. We will return to in-person board meetings beginning on June 7, 2022.	
990 Filing (to be emailed) – Discussion	Dan Heckathorne noted that the Best On Board education module discusses the Form 990. Board members are required to look at the 990 before the hospital files. The 990 will be emailed to each board member. Dan would like a response by May 11 th . All questions should be addressed to Margaret.	
COMMITTEE REPORTS:		

AGENDA ITEM		ACTION / FOLLOW-UP																				
<p>Finance Committee</p> <p>Proposed Action – Recommend Approval of the March 2022 Financial Statement (Unaudited).</p>	<p>Dan Heckathorne, CFO, reviewed the Executive Summary of the March 2022 Financial report which was included on the board tablet. A copy of the Finance Committee’s April 27, 2022, meeting minutes were also included on the board tablet. It was noted that the Finance Committee recommends approval of the March 2022 Financial report as presented.</p> <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="383 604 1250 793"> <tr> <td>Capobianco</td> <td>Yes</td> <td>DiBiasi</td> <td>Absent</td> </tr> <tr> <td>Labha</td> <td>Absent</td> <td>Ngo</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Tankersley</td> <td>Yes</td> </tr> <tr> <td>Welch</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>	Capobianco	Yes	DiBiasi	Absent	Labha	Absent	Ngo	Yes	Rader	Yes	Rutledge	Yes	Stevens	Yes	Tankersley	Yes	Welch	Yes	Motion carried.		<p>M.S.C., (Rader/Welch), the SGMH Board of Directors approved the March 2022 Financial Statement as presented.</p>
Capobianco	Yes	DiBiasi	Absent																			
Labha	Absent	Ngo	Yes																			
Rader	Yes	Rutledge	Yes																			
Stevens	Yes	Tankersley	Yes																			
Welch	Yes	Motion carried.																				
<p>Chief of Staff Report</p> <p>Proposed Action – Approve Recommendations of the Medical Executive Committee</p>	<p>Sherif Khalil, MD, Chief of Staff, briefly reviewed the Medical Executive Committee report as included on the board tablets.</p> <p>Approval Items:</p> <ul style="list-style-type: none"> • 2022 Annual Approval of Policies and Procedures • Approval of tPA Policy • Approval of Robotic-Assisted Privileges <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="383 1199 1250 1388"> <tr> <td>Capobianco</td> <td>Yes</td> <td>DiBiasi</td> <td>Absent</td> </tr> <tr> <td>Labha</td> <td>Absent</td> <td>Ngo</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Tankersley</td> <td>Yes</td> </tr> <tr> <td>Welch</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>	Capobianco	Yes	DiBiasi	Absent	Labha	Absent	Ngo	Yes	Rader	Yes	Rutledge	Yes	Stevens	Yes	Tankersley	Yes	Welch	Yes	Motion carried.		<p>M.S.C., (Welch/Stevens), the SGMH Board of Directors approved the Medical Executive Committee recommended approval items as submitted.</p>
Capobianco	Yes	DiBiasi	Absent																			
Labha	Absent	Ngo	Yes																			
Rader	Yes	Rutledge	Yes																			
Stevens	Yes	Tankersley	Yes																			
Welch	Yes	Motion carried.																				
<p>Proposed Action – Approve Policies and Procedures</p>	<p>There was one (1) policy and procedure included on the board tablets presented for approval by the Board.</p> <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="383 1612 1250 1801"> <tr> <td>Capobianco</td> <td>Yes</td> <td>DiBiasi</td> <td>Absent</td> </tr> <tr> <td>Labha</td> <td>Absent</td> <td>Ngo</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Tankersley</td> <td>Yes</td> </tr> <tr> <td>Welch</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>	Capobianco	Yes	DiBiasi	Absent	Labha	Absent	Ngo	Yes	Rader	Yes	Rutledge	Yes	Stevens	Yes	Tankersley	Yes	Welch	Yes	Motion carried.		<p>M.S.C., (Tankersley/Rader), the SGMH Board of Directors approved the policies and procedures as submitted.</p>
Capobianco	Yes	DiBiasi	Absent																			
Labha	Absent	Ngo	Yes																			
Rader	Yes	Rutledge	Yes																			
Stevens	Yes	Tankersley	Yes																			
Welch	Yes	Motion carried.																				

AGENDA ITEM		ACTION / FOLLOW-UP
Community Benefit events/Announcements/and newspaper articles	Miscellaneous information was included on the board tablets.	
Future Agenda Items	None.	
Adjourn to Closed Session	<p>Vice Chair, Rutledge reported the items to be reviewed and discussed and/or acted upon during Closed Session will be:</p> <ul style="list-style-type: none"> ➤ Recommend approval to the Healthcare District Board – Medical Staff Credentialing ➤ Receive Quarterly Performance Improvement Committee Report ➤ Receive Quarterly Infection Control/Risk Management Report ➤ Receive Quarterly Emergency Preparedness/Environment Safety Report <p>The meeting adjourned to Closed Session at 5:11 pm.</p>	
Reconvene to Open Session	<p>The meeting adjourned from closed session at 5:35 pm.</p> <p>At the request of Vice Chair Rutledge, Ariel Whitley reported on the actions taken/information received during the Closed Session as follows:</p> <ul style="list-style-type: none"> ➤ Recommended approval to the Healthcare District Board – Medical Staff Credentialing ➤ Received Quarterly Performance Improvement Committee Report ➤ Received Quarterly Infection Control/Risk Management Report ➤ Received Quarterly Emergency Preparedness/Environment Safety Report 	
Adjourn	The meeting was adjourned at 5:35 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