



# West Side Health Care District

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

## Board Meeting Agenda

Thursday, March 24, 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, February 24, 2022

### 4. Financial Review

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

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

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

A. West Side Family Health Care- Miscellaneous Policies and Procedures

B. West Side Health Care District -Miscellaneous Policies and Procedures

**6. Administrative Staff Reports**

- A. February 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**

**The next Regular Board Meeting is set for Thursday, April 28, 2022, at 4:00 pm**

# ITEM 3



# West Side Health Care District

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

## BOARD MEETING MINUTES

Thursday, February 24, 2022, at 2:00 pm

### 1. CALL TO ORDER

Board President, Eric Cooper, called the meeting to order at 2:05pm. Eric Cooper led the Pledge of Allegiance. Those present were:

Eric Cooper	Board President
Adele Ward	Board Vice President
Virginia Miler	Board Secretary/Treasurer
Jan Ashley	Board Member
Darren Walrath	Board Member
Ryan Shultz	Executive Director
Robyn Melton	District Manager

In attendance, Medical Director, Dr. Ron Ostrom, was present at the meeting.

### 2. PUBLIC INPUT- None

### 3. APPROVAL OF MINUTES

The meeting minutes were reviewed. After discussion, the Minutes of Thursday, January 27, 2021, were approved with corrections by the Board of Directors.

### 4. FINANCIAL REVIEW

The Financial Statements of January 2022 were discussed and reviewed by District CPA, Kelly Hohenbrink via telephone. A Motion was made by Adele Ward to approve the financial reports. Darren Walrath seconded. Motion carried.

### 5. ANNUAL REVIEW AND APPROVAL OF POLICY AND PROCEDURES

After review and discussion, Adele Ward made a Motion to approve the policies and procedures. Jan Ashley seconded. Motion carried. The District Policy and Procedures that were reviewed were:

Teleconference Requirements, Topics for Discussion at the Board Meeting, Conduct of Meetings, Minutes, Attendance at Meetings, Appointment to the District Board, Conduct Related to Elections, Remuneration and Reimbursement, Board Membership in Associations; Training and Educational Conferences, Term of Office, Bidding, and Public Record Request,

### 6. ADMINISTRATIVE STAFF REPORTS

January 2022, General Information- Attached for informational purposes only.  
No action.

7. **BOARD COMMITTEE REPORTS**

- a. Finance Committee- A Meeting will be scheduled for May 2022, for 2022-2023 Budget Planning.
- b. Facilities Committee- A Meeting will be scheduled soon to talk about landscaping and lighting issues.
- 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. **CLOSED SESSION**

The Board entered into Closed Session at 2:45pm.

9. **OPEN SESSION**

The Board returned to Open Session at 3:25pm. Board President, Eric Cooper announced that no action was taken during Closed Session.

10. **ITEMS FOR FUTURE AGENDA**

11. **ADJOURNMENT**

At 3:27 pm Eric Cooper made a motion to Adjourn, Adele Ward seconded. Motion carried. The Board Meeting of February 24, 2022 was adjourned.

Respectfully Submitted: \_\_\_\_\_  
Ginny Miller, Board Secretary/Treasurer

**The next regular Board Meeting is scheduled for Thursday, March 24, at 2:00 pm**

# ITEM 4

West Side Family Health Care Patient Census 2021-2022

	July 2021	Aug 2021	Sep 2021	Oct 2021	Nov 2021	Dec 2021	Jan 2022	Feb 2022	March 2022	April 2022	May 2022	June 2022
1	68	31	111	74	94	96	54	112	0	0	0	0
2	50	72	86	39	109	84	62	88	0	0	0	0
3	43	74	124	57	98	73	119	69	0	0	0	0
4	24	78	61	108	81	46	109	90	0	0	0	0
5	52	67	60	105	82	30	119	40	0	0	0	0
6	73	58	68	86	59	108	117	58	0	0	0	0
7	80	32	129	81	42	104	120	80	0	0	0	0
8	78	39	121	67	97	108	88	101	0	0	0	0
9	49	73	96	52	98	65	97	98	0	0	0	0
10	38	73	101	33	80	98	132	65	0	0	0	0
11	35	79	68	84	47	40	114	75	0	0	0	0
12	66	73	59	80	84	48	145	42	0	0	0	0
13	70	71	115	109	39	82	138	37	0	0	0	0
14	68	34	128	80	45	99	106	79	0	0	0	0
15	59	36	101	77	108	76	64	84	0	0	0	0
16	65	60	86	39	93	53	66	77	0	0	0	0
17	30	96	84	51	62	77	134	84	0	0	0	0
18	37	63	56	117	65	57	120	77	0	0	0	0
19	65	60	58	94	76	31	148	41	0	0	0	0
20	96	64	112	100	37	78	138	35	0	0	0	0
21	72	56	117	84	41	75	103	47	0	0	0	0
22	59	53	90	90	98	67	64	109	0	0	0	0
23	53	90	92	36	76	59	77	87	0	0	0	0
24	42	110	80	49	71	27	142	67	0	0	0	0
25	44	89	37	96	23	17	101	78	0	0	0	0
26	82	96	58	98	59	48	118	39	0	0	0	0
27	77	96	112	94	44	64	108	35	0	0	0	0
28	72	57	92	79	52	84	100	87	0	0	0	0
29	51	47	104	70	93	66	48	0	0	0	0	0
30	60	122	89	40	104	67	62	0	0	0	0	0
31	37	130	0	37	0	63	98	0	0	0	0	0
<b>M/AVG</b>	1795	2179	2695	2306	2157	2090	3211	1981	0	0	0	0
<b>D/AVG</b>	58	70	90	74	72	67	104	71	0	0	0	0
<b>NSOT</b>	10	6	12	10	7	14	31	21	0	0	0	0
<b>X-RAYS</b>	76	61	57	65	66	64	56	46	0	0	0	0
Year	July	August	September	October	November	December	January	February	March	April	May	June
2021	1200	1195	1097	1285	1343	1475	1533	1364	1436	1619	1723	1678
2020	1265	1204	1105	1320	1347	1530	1793	1679	1385	911	1150	1154
2019	1034	1188	1334	1440	1338	1565	1470	1554	1453	1150	1290	1024
2018	1002	1282	1284	1377	1187	1184	1632	1543	1347	1287	1310	1115
2017	1016	1166	1243	1410	1324	1421	1348	1238	1204	1199	1238	1168
2016	1084	1319	1289	1389	1248	1420	1364	1403	1288	1260	1236	1102
2015	836	989	1169	1276	1323	1411	1345	1063	1111	1090	987	833
2014	784	867	1046	1006	966	1021	1391	994	1080	968	959	868
2013	697	1009	834	883	812	925	926	975	1047	885	893	0
										YTD	M/AVG	M/AVG
										18414	2631	840
										606	87	788
										111	16	1250
										491	70.14	1286
										YTD	M/AVG	X-RAY
										16948	1412	840
										15843	1320	788
										15840	1320	1250
										15550	1296	1286
										14975	1248	974
										15402	1284	
										13433	1119	
										11950	996	
										9886	824	

# ITEM 5A





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

POLICY: <b>CULTURE TRANSMITTAL</b>	REVIEWED: 7/1/16; 6/25/17; 6/4/18; 4/2/20
SECTION: <b>CLINICAL</b>	REVISED: 6/25/17; 4/20/20; <u>03/17/22</u>
EFFECTIVE: <u>4/23/203/24/22</u>	MEDICAL DIRECTOR:

Subject: Culture Transmittal

**Objective:** To ensure correct handling of collected cultures.

**Acuity Rating: Mandatory**

**Procedure:**

1. The provider will enter an order for the collection and testing of the specimen.
2. The provider, nurse, or medical assistant will collect the specimen to be cultured. The clinical staff will document specimen collection elements in the EMR order requisition. Specimen collection elements will include: and ensure —proper labeling of the specimen to include:
  - a. Patient name
  - b. Patient date of birth
  - c. Date and time of collection
  - d. Provider ordering the culture
  - e. Source of culture.

Proper labeling of the specimen to include:

- a. Patient name
- b. Patient date of birth
- c. Date and time of collection

3. Clinical staff will print the laboratory requisition form and labels.
4. Culture will be placed in a laboratory biohazard bag with the requisition.
5. Specimen will be placed in appropriate laboratory basket~~basket~~ on counter for courier pick-up.  
~~in the laboratory refrigerator.~~Cultures are to be stored at room temperature (ambient).

~~Nursing staff will document the collection, type of culture, receiving laboratory, and specimen-~~

\_\_\_\_\_ number in the patient record.

6. At the end of each day, nursing staff will ensure that specimens have been picked up by the laboratory courier.

BIANNUAL REVIEW



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

POLICY: <b>Follow-up of Patients</b>	REVIEWED: 1/28/16; 2/16/17; 2/2/18; 11/19/18; 6/19/20, <u>03/02/22</u>
SECTION: <b>Clinical</b>	REVISED: 3/15/18
EFFECTIVE: <u>6/25/2003/24/2022</u>	MEDICAL DIRECTOR:

**Subject:** Follow-up of patients

**Objective:** Patients seen shall be followed up within a reasonable time.

**Response Rating:**

**Required Equipment:**

**Procedure**

1. If deemed necessary by the practitioner, persons receiving antibiotics will be given a return appointment when initially seen. Return visit will occur at the end of the course of antibiotic treatment.
2. Patients who are given antibiotics while febrile or vomiting shall be directed by the practitioner to return and be seen if not improving. Return visit may occur every 48-72 hours if clinically determined close follow up of the infection is required and then again at end of the ten days
3. During the office visit, the Health Care Provider shall instruct the patient regarding when to return for routine follow-up or to return if not improving. The Provider shall advise the patient to return to Clinic ASAP or go to the ER if at any time the infection becomes worse, new symptoms, (fever, chills nausea, vomiting, headache or increased pain redness swelling /red streaks around the wound)
4. Results and reports (laboratory, including pap smears, and x-ray) are to be given to the practitioner and the patient notified of the results and the need for further treatment, if indicated. This communication shall be documented in the patient's medical record.
5. Referrals and appointments made with other providers are to be followed up with a review of the written consultation report and, as required, a telephone call to the patient to discuss the results and to determine if further treatment is necessary.
6. Persons who fail to keep scheduled follow-up appointments shall have their charts documented NO SHOW for that day and a NO SHOW call placed by the AthenaNet system to the phone number of record provided by the patient. Should the patient fail to respond to the initial "NO SHOW" contact The staff member assigned to work with the provider that day will also attempt to contact the patient by



phone, at minimum two additional ~~contacts will be attempted, by phone, times.~~ Each attempt at contacting the patient will be documented within a patient case in AthenaNet ~~and will be available through the report aggregation process for review and confirmation.~~



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

POLICY: <b>FORMULARY</b>	REVIEWED: 1/28/16; 2/16/17; 2/2/18; 11/19/18; 4/2/20, <u>03/02/22</u>
SECTION: MEDICATION MANAGEMENT	REVISED: 2/2/18; <u>03/17/22</u>
EFFECTIVE: <u>4/23/2003/24/22</u>	MEDICAL DIRECTOR:

**Subject:** Formulary

**Objective:** A formulary for the Clinics will be developed, followed and updated.

**Response Rating:**

**Required Equipment:**

**Procedure**

1. A Clinic formulary will be developed, followed and updated after consultation with the Medical Director, Clinic practitioners, and other appropriate personnel, as required.
2. Additions, deletions, revisions to the formulary will be managed through the use of a chargemaster management form, as required by policy. At a minimum, the form will document who requested the change, item details, CPT code, charges, addition to chargemaster, staff training.
3. Clinic formulary will be approved by the Medical Director.
4. Strengths of medications will be limited to the smallest number of variations required to appropriately address patient needs.
5. Additions, deletions, and other changes to the Formulary will be discussed at the ~~Clinic Medical Director~~ Quality Assurance Performance Improvement meetings.
6. A copy of the current Fformulary will be available on the Shared Folder, Posted in the Medication Room, and provided to the in the Clinic for review by practitioners for their review, at their request.
7. Monthly Medication Management Pharmacy surveys of the Clinic will include inventory review using the Formulary as a resource.



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

POLICY: <b>INCIDENT REPORTS</b>	REVIEWED: 2/10/16; 2/17/17; 2/2/18; 9/21/18; 4/2/20, <u>03/02/22</u>
SECTION: <b>ADMINISTRATION</b>	REVISED: 9/21/18; 4/20/20; 03/17/22
EFFECTIVE: <u>4/23/203/24/22</u>	MEDICAL DIRECTOR:

**Subject:** Incident Reports

**Objective:** All unusual events shall be documented on an incident report form to provide proper documentation and follow-up and to support risk identification and trends.

**Response Rating:**

**Required Equipment:**

**Procedure:**

1. An incident report shall be completed promptly when any of the following events occur:
  - a. Medication error
  - b. Adverse drug reaction
  - c. Non-reconcilable narcotic medication inventory error
  - d. Patient accident
  - e. Employee accident
  - f. Visitor accident
  - g. Cardiac or respiratory arrest
  - h. Newborn delivery
  - i. Death
  - j. Hostile or threatening person
  - k. Theft of Clinic, patient, or employee possessions
  - l. Vandalism
  
2. The completed Incident Report will be ~~forwarded~~reviewed by the ~~to the Director of Clinical Operations~~Clinic Director — as soon as —possible after the event occurs, but no later than 24 hours after the event. The completed Incident Report will then be forwarded to the Executive Director. In the event the Clinic Director is unavailable the Front Office Manager, Registered Nurse, Licensed Vocational Nurse, or Lead Medical Assistant will be responsible for review of the report and submitting to the Executive Director.
  
3. The problem description will be precise, concise, and accurate. It is not necessary to include details regarding any patient care treatment rendered. The description should include the result of action(s) taken and disposition(s).



4. ~~All incident reports will be reported during the Quality Assurance Performance Improvement meeting. Non-personnel follow-up action(s) shall be recorded in the meeting minutes. All Incident Reports will be reviewed by theby the Medical Director, Clinic Director, and Executive Director. Director of Clinical Operations. Follow-up action(s) shall be recorded in the Quality Assurance Performance Improvement meeting minutes.~~
5. The Incident Report is a confidential document and ~~will be handled as such. Incident Reports are not~~ part of the patient's medical record and will not be filed therein.
6. Incidents resulting in hospitalization or death require notification to The Compliance Team within 48 hours at [QA@thecomplianceteam.org](mailto:QA@thecomplianceteam.org).

BIANNUAL REVIEW



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

<b>POLICY: BLUE SHIELD ELIGIBILITY VERIFICATION</b>	REVIEWED: 2/10/16; 2/15/17; 2/28/18; 11/19/18; 4/2/20, <u>03,02,22</u>
<b>SECTION: ADMITTING</b>	REVISED: 4/2/20
EFFECTIVE: <del>4/23/20</del> <u>03/24/2022</u>	MEDICAL DIRECTOR:

**Subject:** Blue Shield Eligibility Verification

**Objective:** To ensure insurance eligibility for patients covered by Blue Shield.

**Response Rating:**

**Required Equipment:**

**Procedure:**

1. All patients who are identified as Blue Shield members must be verified at <https://www.blueshieldca.com/provider/account-tools/login/home.sp>
2. Patients will be identified by showing their health insurance card and a photo identification card. Both cards will be scanned into the electronic medical record.
3. Use the approved Blue Shield verification process
  - a. Log in on the Blue Shield website: <https://www.blueshieldca.com/provider/account-tools/login/home.sp>
  - b. Enter subscriber ID
  - c. Enter date of birth
  - d. Select Submit
  - e. Save eligibility information to patient chart
4. If a patient arrives at the Clinic with a life threatening or serious illness that requires immediate attention, treatment will begin immediately regardless of the patient's insurance status. The receptionist will verify the patient's benefits and notify the health plan of the patient's status after the patient's condition is deemed stable or upon receiving patient information from a person accompanying the patient.





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

POLICY: <b>EYE IRRIGATION</b>	REVIEWED: 2/5/16; 2/15/17; 2/27/18; 11/19/18; 4/2/20
SECTION: <b>CLINICAL</b>	REVISED: 2/27/18; 4/20/20; <u>3/17/22</u>
EFFECTIVE: <u>4/23/2023/24/22</u>	MEDICAL DIRECTOR:

**Subject:** Eye Irrigation

**Objective:** To flush secretions, chemicals and foreign bodies from the eye.

**Response Rating:** Minimal to Severe

**Required Equipment:** Irrigation solution, IV tubing, eye tray, towel, shampoo tray, and kick bucket.

**Procedure:**

1. Review written provider-practitioner order.
2. Tap water may be used initially in an emergency, but is not preferred. There are eyewash stations in all Exam Rooms, Vitals Areas, Laboratory, Medication Room, and Sterile Processing rooms, attached to the sink faucet.
3. The amount of solution used depends on the contaminant.
  - a. Secretions require only small amounts.
  - b. Chemical burns require copious amounts.
  - c. Use of IV tubing connected to an IV solution of normal saline. If utilizing Morgan lens utilize lactated ringers solution.
4. Adjust the flow of solution to ensure adequate, but not forceful flow.
5. Place the patient in a supine position with their head turned to the affected side on the shampoo tray that will drain into a kick-collection bucket.
6. Have patient hold a towel against affected side to catch excess solution.
7. Using the thumb and index finger of your non-dominant hand, separate the patient's eyelid.
8. Direct a constant gentle stream at the inner canthus so the solution flows over the cornea.
9. The physician-practitioner shall check the affected eye or eyes for effectiveness of the procedure.

10. Install medication and place eye pads if ordered by the physician/practitioner.
11. After completion of procedure, arrange for transportation home if needed, care and instructions and follow-up care.
12. Document the care rendered in the EMR.

ANNUAL REVIEW

**ITEM 5B**



# West Side Health Care District

## BYLAWS OF WEST SIDE HEALTH CARE DISTRICT ~~2020-2022~~

The name of the organization is West Side Health Care District. The organization shall have an office located at 119 Adkisson Way, Taft, California 93268, and at other places as shall be designated by the board of directors from time to time by resolution. The organization has not been formed for the making of any profit, or personal financial gain. The assets and income of the organization shall not be distributable to or benefit the directors, officers, or other individuals. The assets and income shall only be used to promote corporate purposes as described below. Nothing contained herein, however, shall be deemed to prohibit the payment of reasonable compensation to employees and independent contractors for services for the benefit of this organization. The organization is organized exclusively for charitable and educational purposes. This organization shall not carry on any other activities not permitted to be carried on by an organization exempt from federal income tax. The organization shall not participate in any political campaign in any manner. The organization shall not attempt to influence legislation. The organization is organized exclusively for charitable, and health care related services.

### ARTICLE 1-MEETINGS

**SECTION 1. ANNUAL MEETING.** An annual meeting shall be held each calendar year at the December board meeting for the purpose of electing directors, and the transaction of such other business as may properly come before the meeting. The annual meeting shall be held at the time and place designated by the Board of Directors.

**SECTION 2. SPECIAL MEETINGS.** Special meetings of the Board may be called by the Board President or a majority of the Directors.

**SECTION 3. NOTICE.** Written notice of all meetings shall be provided under this section or as otherwise required by law. The Notice shall state the place, date and hour of the meeting, and if for a special meeting, the purpose of the meeting. Such notice shall be emailed or hand-delivered to all the directors of record at the address/email address on file in the corporate office, seventy-two (72) hours prior to the meeting. The time will be calculated in business hours and does not count weekend or legal holidays.

**SECTION 4. PLACE OF MEETING.** Meetings shall be held at the District's principal place of business unless otherwise stated in the notice.

**SECTION 5. QUORUM.** A majority of the directors shall constitute a quorum at a meeting. If after a meeting is convened, the number of Directors present drops below the number required for a quorum, no further action may be taken except that less than a quorum of the Board may adjourn the meeting to a future date and time. If a quorum is represented at an adjourned meeting, any business may be transacted that might have been transacted at the meeting as originally scheduled. The Directors present at a meeting represented by a quorum may continue to transact business until adjournment, even if the withdrawal of some directors results in a representation of less than a quorum.

**SECTION 6. INFORMAL ACTION.** Any action required to be taken, or which may be taken, at a meeting, may be taken without a meeting and without prior notice if a consent in writing, setting forth the action so taken, is signed by the directors with respect to the subject matter of the vote.

## **ARTICLE II-DIRECTORS**

**SECTION 1. NUMBER OF DIRECTORS.** The West Side Health Care District Board of Directors will consist of five (5) directors.

**SECTION 2. ELECTION AND TERM OF OFFICE.** The directors shall be elected at the annual meeting in December. Each director shall serve a term of four (4) years, or until a successor has been elected and qualified.

**SECTION 3. QUORUM.** A majority of directors shall constitute a quorum.

**SECTION 4. ADVERSE INTEREST.** In the determination of a quorum of the directors, or in voting, the adverse interest of a director shall not disqualify the director or invalidate his/her vote.

**SECTION 5. ORGANIZATIONAL MEETING OF THE BOARD.** The Board of Directors shall meet immediately after the election for the purpose of electing its officers, appointing new committee chairpersons and for transacting such other business as may be deemed appropriate.

**SECTION 6. REGULAR MEETING.** The Board of Directors shall have regular meetings on a monthly basis. The regular meeting of the Board shall be held on the fourth (4th) Thursday of every month at 2:00 p.m. at the District office, 119 Adksson Way, Taft Ca.

**SECTION 7. SPECIAL MEETING.** Special meetings may be requested by the President, Vice President, Secretary, or any two directors. Minutes of the meeting will be presented at the next regularly scheduled Board meeting.

**SECTION 8. PROCEDURES.** The vote of a majority of the directors present at a properly called meeting at which a quorum is present shall be the act of the Board of Directors unless the vote of a greater number is required by law or by these by-laws for a particular resolution. A director of the organization who is present at a meeting of the Board of Directors at which action on any corporate matter is taken shall be presumed to have assented to the action taken unless their dissent shall be entered in the minutes of the meeting. The Board shall keep written minutes of its proceedings in its permanent records.

**SECTION 9. EMERGENCY ACTION.** Should action be required due to a community, facility or Administrative Team emergency and it is not possible to assemble the Board of Directors in a properly called meeting, written or oral approval of the proposed action by a board majority may be obtained in a poll of the entire Board of Directors authorized by the President. Any action so taken shall be recorded in the minutes in the next properly called board meeting.

**SECTION 10. INFORMAL ACTION.** Any action required to be taken at a meeting of directors, or any action which may be taken at a meeting of directors or of a committee of directors, may be taken without a meeting if a consent in writing setting forth the action so taken, is signed by all of the directors or all of the members of the committee of directors, as the case may be.

**SECTION 11. REMOVAL/VACANCIES.** A director shall be subject to removal, with or without cause, at a meeting called for that purpose. Any vacancy that occurs on the Board of Directors, whether by death, resignation, removal, or any other cause, may be filled by the remaining directors. A director elected to fill a vacancy shall serve the remaining term of his or her predecessor, or until a successor has been elected and qualified.

**SECTION 12. STANDING COMMITTEES.** There shall be four (4) standing committees of the organization: Finance Committee, Facilities Committee, Personnel Committee, and the Community-Outreach Committee. The President shall appoint the chairpersons of all committees from the membership of the Board of Directors of the organization with the approval of the Board of Directors. All committee appointments shall terminate upon the election of a new President unless specifically determined otherwise at the Annual meeting. All committees shall function within the guidelines and budgets established by the Board of Directors.

**SECTION 13. EXECUTIVE COMMITTEE.** The Executive Committee shall be composed of the officers of the organization, as specified herein, and shall have the full authority to undertake the duties and powers of the board except as these by-laws specifically state otherwise. All actions of the Administrative Team shall be reported to the board at its next meeting.

**SECTION 14. AD HOC COMMITTEES.** The President may establish ad hoc committees at any time. All ad hoc committees are subject to the same rules and operating procedures as standing committees and shall report to the President and the Board and shall give a progress report at the scheduled monthly board meeting.

**SECTION 15. BUDGETS.** The Board of Directors shall approve the annual budget of the organization during the first quarter before June 1<sup>st</sup> of each calendar year upon recommendation of the Financial Committee.

**SECTION 16. PERSONNEL RESPONSIBILITIES.** The Executive Director, with the approval of the Board President, may employ and discharge employees of the organization and may prescribe their duties and compensation. The Board will have Policy and Procedures and set guidelines and give authority to the Administrative team who will have the duty of managing the employees. A contracted Human Resource company will be used to assist with all Human Resource Issues. The Board shall discharge its duties with respect to personnel matters in accordance to all applicable state and federal laws and without regard to age, sex, race, color, creed, sexual orientation, or the national origin of any person.

**SECTION 17. RECORDS.** Every Director shall have the absolute right at any reasonable time to inspect and copy all books, records, and documents of every kind in relation to the operation of the West Side Health Care District but must remain in compliance with all organizational Confidentiality regulations and HIPPA rules and regulations. Directors shall also have the absolute right to inspect all physical properties of the organization.

**SECTION 18. COMPENSATION.** No board member receives at any time any of the net earnings or profits from the organization. However, this shall not prevent the payment to any such person of reasonable compensation for services rendered to or for the organization. Such compensation shall be fixed by the Board of Directors and shall be one hundred dollars (\$100.00) per meeting.

### **ARTICLE III OFFICERS**

**SECTION 1. NUMBER OF OFFICERS.** The officers of the West Side Health Care District shall be a President, Vice-President and Secretary/Treasurer. Two or more offices may be held by one person.

- a. **PRESIDENT.** The President shall be the chief executive officer and shall preside at all meetings of the Board of Directors.
- b. **VICE PRESIDENT.** The Vice President shall perform the duties of the President in the absence of the President and shall assist that office in the discharge of its leadership duties.
- c. **SECRETARY/TREASURER** The Secretary shall have the authority to certify any records, or copies of records, as the official records of the organization. The Treasurer shall be responsible for conducting the financial affairs of the organization as directed and authorized by the Board of Directors and shall make reports of corporate finances as required, but no less often than at each meeting of the Board of Directors.

**SECTION 2. TERM OF OFFICE.** The officers shall be elected annually by the Board of Directors at the December Board of Directors meeting. Each officer shall serve one (1) term until a successor has been elected and qualified.

**SECTION 3. ELECTIONS.** Nominations will be made by the Board of Directors at least thirty (30) days prior to the next scheduled meeting when a director's position whose terms are to expire or are vacant. Following the report of the nominations, any director of the organization may nominate other candidates for the available director positions, provided that the nominees agree to serve if elected. At the conclusion of nominations, the Board of Directors shall vote for each position by secret written ballot.

**SECTION 4. REMOVAL OR VACANCY.** The Board of Directors shall have the power to remove an officer or agent of the district. Any vacancy that occurs for any reason may be filled by the Board of Directors.

**ARTICLE IV  
CORPORATE SEAL, EXECUTION OF INSTRUMENTS**

West Side Health Care District shall have a corporate seal, which shall be affixed to all deeds, mortgages, and other instruments affecting or relating to real estate as well as all government related forms. All instruments that are executed on behalf of the corporation which are acknowledged and which affect an interest in real estate shall be executed by the President or any Vice President, and the Secretary/Treasurer or Board Clerk. All other instrument(s) executed by the district, may be executed by the President or Vice President. Notwithstanding the preceding provisions of this section, any written instrument may be executed by any officer(s) or agents that are specifically designated by resolutions of the Board of Directors.

**ARTICLE V  
AMENDMENT TO BYLAWS**

The bylaws may be amended, altered, or repealed by the Board of Directors by a majority of a quorum vote at any regular or special meeting. The text of the proposed change shall be distributed to all board members at least ten (10) days before the meeting.

**INDEMNIFICATION**

Any director, officer or agent who is involved in litigation by reason of his or her position as a director or agent of the West Side Health Care District shall be indemnified and held harmless by the district to the fullest extent authorized by law as it now exists or may subsequently be amended (but, in the case of any such amendment, only to the extent that such amendment permits the district to provide broader indemnification rights).



**CERTIFICATION**

I certify that the foregoing is a true and correct copy of the bylaws of the West Side Health Care District, duly adopted by the Board of Directors on March 24, 2022.

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**Eric Cooper, President**

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**Adele Ward, Vice President**

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**Virginia Miller, Secretary/Treasurer**

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**Jan Ashley, Board Member**

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**Darren Walrath, Board Member**



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

POLICY: MISSION STATEMENT	REVIEWED: 2/22/16; 2/16/17; 2/1/18; 12/20/18, 1/22/19, 11/19/20, 3/24/22
SECTION: ADMINISTRATION	REVISED:
EFFECTIVE 1/1/2004	MEDICAL DIRECTOR: Dr. Ron Ostrom

**Subject:** West Side Health Care District Mission Statement

**Objective:**

**Response Rating:**

**Required Equipment:**

**Procedure:**

- 1.1 As a rural health care district dedicated to the healing arts, we are committed to meeting the challenges of the future by preserving quality health care services for the need of the West Side Community we serve.
- 1.2 West Side Health Care District will meet the goals of this mission by:
  - a. Providing Health Care Services to the residents of the West Side Community and by enhancing and providing services and by supporting, developing, and encouraging programs and activities of the West Side Community, its agencies and community service groups to achieve health care for its residents.
  - b. Being proactive in identifying the most pressing healthcare needs of the community and outlying areas while not replicating the efforts of others.
  - c. Coordinate the healthcare resources, private and public, to achieve the goal of meeting priority health care needs.



**WEST SIDE HEALTH CARE DISTRICT**  
**Policy and Procedures**

<b>CATEGORY: Administration</b>		<b>Page 1 of 1</b>
<b>POLICY: Reimbursement</b>		<b>POLICY NUMBER: 20</b>
<b>EFFECTIVE DATE:</b> 7/24/2017	<b>REVIEW DATE:</b> 9/27/18, 10/26/17, 5/23/19, 3/24/22	<b>REFERENCE</b>

- 15.1** Directors shall serve without compensation except that the Board of Directors, by a resolution adopted by the majority vote of the members of the WSHCD Board, (May 30<sup>th</sup>, 2002). WSHCD may authorize the payment to the Director(s) of not to exceed one hundred dollars (\$100.00) per regularly noticed meeting, including but not limited an any meeting(s) mandated by contract, not to exceed five (5) meetings per month as compensation to each member of the Board of Directors.
- 15.2** The District shall reimburse Directors for actual necessary traveling and incidental expenses incurred in the performance of official duties as member of the District Board, subject to the requirements of these Policies and Procedures and the law.
- 15.3** The following types of occurrences qualify for reimbursement if attended in the performance of official duties as members of the WSHCD Board and if prior approval is obtained as set forth in Policy 16.2:
- a. Training workshops, seminars, and conferences
  - b. Educational workshops, seminars, and conferences
  - c. Meetings of or sponsored by ACHD (Association of California Health Care Districts), the CSDA (California Special District Association), and by other state or national organizations relevant to the purpose of the District.
  - d. Meetings of local government entities and bodies and committees thereof.
  - e. Meetings of local nonprofit organizations.
  - f. Meetings of community or civic groups or organizations.
  - g. Meetings of advisory groups and committees organized or conducted by District staff.
  - h. Meetings with District consultants, advisors, contractors, or other professionals.
  - i. Any other activity approved by the Board in advance of attendance, whether the request for attendance was initiated by the Board or Board member.
- 15.4** Except as otherwise set forth in policies 15.5, 15.6, and 15.7 and subject to policies 15.8 and 15.9, reimbursement for travel, meals, lodging, and other actual and necessary expenses require the Board member to submit an expense report with receipts. Mileage shall be reimbursed at the rate established by the Internal Revenue service rate published in Publication 463 or successor publications.

- 15.5** Board members shall obtain lodging at the group rate provided in connection with a conference or organized educational activity or other authorized occurrence, if the group rate is available to the Board member at the time of booking, in which case, reimbursement shall be at the group rate obtained by the Board member.
- 15.6** Board members shall use government group rates offered by providers of transportation if available, in which case, reimbursement shall be at the government or group rate obtained by the Board member.
- 15.7** Subject to policy 15, if there is no Internal Revenue Service Rate established for an expense and such expense is not reimbursable under policies 15, such expense shall not be reimbursed unless the District Board approved such an expense in a public meeting before the expense was incurred.
- 15.8** No expense shall be reimbursed except pursuant to an expense report meeting the requirements of this policy and submitted by the Board member to (and received by) District staff, within four (4) weeks after the final date the expense was incurred. The expense report shall document that the expenses meet the requirements of Policies 15 and 16 and shall include receipts for all expenses for which reimbursement is being requested.
- 15.9** No reimbursement shall be paid unless, an expense report with receipts was submitted, and the Board member submitting the expenses makes a brief report on the ~~occurrence~~ event they attended.



**WEST SIDE HEALTH CARE DISTRICT**  
Policy and Procedures

<b>CATEGORY:</b> Administration		<b>Page 1 of 1</b>
<b>POLICY:</b> Request of Public Funds		<b>POLICY NUMBER: 21</b>
<b>EFFECTIVE DATE:</b> 05/23/19	<b>REVIEW DATE:</b> 10/26/2017, 10/25/18, 3/24/22	<b>REFERENCE</b>

- 21.1 Under the law, West Side Health Care District may provide assistance to health care programs, services, facilities, and activities for the benefit of the District and the people served by the District and to nonprofit groups or community groups functioning in the community in order to provide for adequate health services to communities served by the District. (California Health and Safety Code Sections 32121(j) and 32126.5)
- 21.2 The annual process for determining compensation is as follows: The District full board shall evaluate the Executive Director on his/her performance, and ask for his/her input on matters of performance and compensation.
- 21.3 As allowed by the District's financial condition, the District may have a Community Grants program to address identified community healthcare needs as envisioned by the Mission Statement and the strategic plan. In conjunction with setting the District's annual budget each year, the District shall determine whether to fund the Community Grants program for that budget year and, if so, in what amount. District staff shall administer the program with the Executive Director and the Board of Directors making the final decision regarding grant recipients. The Board President shall appoint an ad hoc Community Grants Committee to review grant applications and make recommendations to the Board. The Grants Committee shall include two Board members, District staff, and community members who shall serve without compensation. Information regarding the availability of the Community Grants and the application process shall be posted on the District's website and publicized appropriately so that eligible programs may make timely applications.
- 21.4 Requests for major program funding (in excess of \$100,000) and capital investments shall be made directly to the Board and presented in an open meeting. Such requests will be evaluated for consistency with the District's Mission Statement and strategic plan and by community needs. Funding requests for programs that are located or offer services outside of District boundaries must be able to demonstrate how services to District residents will be documented. Grants normally will be memorialized with a Memorandum of Understanding. Funding may be made in phases and may be subject to such conditions as the Board may impose.

Grants for the acquisition, leasing or substantial improvement of real property or other facilities shall be secured so that, if the facility is sold or leased to others for purposes that are not consistent with the original grant, the District may recover its funds for reinvestment in other programs or facilities.



**WEST SIDE HEALTH CARE DISTRICT**  
Policy and Procedures

<b>CATEGORY: Administration</b>		<b>Page 1 of 1</b>
<b>POLICY: REIMBURSEMENT REPORT</b>		<b>POLICY NUMBER: 22</b>
<b>EFFECTIVE DATE:</b> 10/26/2017	<b>REVIEW DATE:</b> 10/26/2017, 10/25/18, 06/27/2019, 3/24/22	<b>REFERENCE</b>

**Objective:**

In accordance with Government Code 53065.5: Each Special District, as defined by subdivision (a) of Section 56036, shall at least annually, disclose any reimbursement paid by the District with the immediately preceding fiscal year of a least one hundred (\$100.00) dollars for each individual charged for services or product received. "Individual charge" includes, but is not limited to, one meal, lodging for one day, transportation, or a registration fee paid to any employee or member of the governing body of the district. The disclosure requirement shall be fulfilled buy including the reimbursement information in a document published or printed at least annually by a date determined by that district and shall be made available for public inspection.

The Account Payable records for the fiscal year ~~June 30, 2020~~, **June 30, 2021** and the following charges are subject to disclosure.

July 1, 2020 – June 30, 2021 – July 1, 2021 – June 30, 2022

<b>Individual</b>	<b>Description</b>	<b>Amount Paid</b>

\*No reimbursements were paid to any employee or Board Member as of ~~April 2021.~~ April 2022

# ITEM 6





March 17, 2022

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

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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 February.

- Providers and staff continue to work extremely hard to delivery patient care services. **The clinic reported more than 1900 patient encounters and a Rural Health Clinic Payer Mix of 67%.**
- Covid-19 Vaccine Schedule: Wednesdays 10am-7pm Moderna, Fridays Pfizer 12+yr 1-2pm & 6-7pm, and Fridays Pfizer 5-11yr 3-4pm. Patients can make an appointment by visiting [wshcd.org](http://wshcd.org) and selecting the "Schedule Your COVID-19 Vaccine" link or visiting [myturn.ca.gov](http://myturn.ca.gov) and searching for West Side Family Health Care.
- **The Clinic will bring awareness to National Kidney Awareness Month in March.** Patient education materials and health screening will be provided to primary care patients through the month of April. Clinic providers and staff will participate in the Taft Chamber Sit-n-Sip scheduled for March 23<sup>rd</sup>.
- Management is gathering information for the **WSFHC Rural Health Clinic Bi-Annual Evaluation Report**. This report is a requirement of all RHC's and will be presented at the April Board Meeting.
- Management received notice from Quest Imaging that contract imaging service support will end May 15, 2022. Management is actively seeking alternate Radiologist services.