

**TAHLEQUAH HOSPITAL AUTHORITY
BOARD OF TRUSTEES**

Date: 06/12/2023

Time: 4:00 p.m.

Place: GH Memorial Boardroom

- I. CALL TO ORDER/CALLING OF THE ROLL** Dr. Gosnell
If there is any potentially known conflict of interest relevant to a matter requiring action by the Board, the trustee(s) shall call it to the attention of the Board at this time and said trustee(s) shall not vote on the matter.
- II. CONFIRMATION AND OATH OF OFFICE OF TRUSTEES APPOINTMENT TO TAHLEQUAH HOSPITAL AUTHORITY-** Discussion and Action Dr. Gosnell
- III. REVIEW AND APPROVAL OF MINUTES**
- A. Regular THA Board Meeting-May 8, 2023- Discussion and Action..... Dr. Gosnell
- IV. EXECUTIVE SESSION** Dr. Gosnell
- A. Motion to Exit Regular Session and Enter Into Executive Session. Information gained and topics discussed are to be held in strict confidentiality. Any dissemination of information discussed in executive session without proper authorization may lead to disciplinary action.
1. Possible Discussion on Legal Issues for items in Section VIII.A Finance/Compliance Committee – O.S. 25§307.B.4
 2. Possible Discussion on Legal Issues for items in Section VIII.B Personnel/Strategic Planning Committee, and for items in Section IV.C.3 Quality Assurance Committee – O.S. 25§307.B.1
 3. Possible Discussion on Legal Issues for Peer Review for Medical Staff and/or Medical Staff Credentialing – O.S. 25§307.B.7
- B. Motion to Exit Executive Session and Reconvene Regular Meeting
- C. Report and Possible Action from Executive Session:
1. Possible Action on Legal Issues for items in Section VIIIA Finance/Compliance Committee.
 2. Possible Action on Section VIII.B Personnel Matters for Personnel/Strategic Planning Committee.
 3. Possible Action on Quality Assurance Committee items:
 - a. Quality Assurance Committee Report-ActionDr. Nolan
 - b. Medical Staff Affairs Report-Action.....Dr. Winn
 - c. Medical Staff Committee Reports-Action.....Dr. Rotton
 4. Possible Action on Peer Review for Medical Staff and/or Medical Staff Credentialing for:
 - a. Initial Appointments.....Dr. Rotton
 - i. Gaskin, Christopher D.O. – Affiliate; No Privileges
 - ii. HefaziTorghabeh, Mehyar M.D. – Consulting; Diagnostic Imaging
 - iii. Morrow, Andrea APRN – Allied Health Professional; Nurse Practitioner
 - iv. Musumbi, Martin M.D. – Active; Hospitalist
 - b. Re-AppointmentDr. Rotton
 - i. Johnson, Jay D.O. – Consulting; Diagnostic Imaging
 - ii. Zubair, Saman M.D. – Courtesy; Neurology/TeleNeuro/TeleStroke
 - c. Change of Status/Privileges-Discussion and ActionDr. Rotton
 - i. Newnam, Sean M.D. – Consulting to Inactive
- V. REVIEW AND APPROVAL OF CONSENT AGENDA ITEMS** Dr. Gosnell
- A. All items listed under the Consent Agenda Items are deemed to be non-controversial and routine in nature by the Board of Trustees. The following items will not be discussed but will be approved by one motion of the Board of Trustees unless any Board member desires to discuss an item, at which time it will then be removed and thus placed as a Regular Agenda Item for consideration and approval on this Agenda. The Consent Agenda Items consists of the following items:
1. Cherokee Health Partners Financials
 2. Northeast Oklahoma Diagnostics Financials
 3. Northeast Oklahoma Heart Center Financials
 4. Northeast Oklahoma Management Services Organization Financials
 5. Northeastern Wound Management Financials
 6. Platte Dialysis, LLC Financials
 7. LifeCare Financials
 8. Tahlequah Hospital Foundation Financials
 9. Ameriprise

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- 10. Emergency Colors
- 11. Bomb Threat: Code Black Policy
- 12. Code Bronze: Lockdown Policy
- 13. Severe Weather: Code Gray Policy
- 14. Code Purple: Assistance for Disruption Policy
- 15. Code Quake Policy
- 16. MRSA Prevention and Decolonization Policy
- 17. Security Officer Firearms and Familiarization Policy
- 18. TB Protocol for Early Identification Policy
- 19. Service Animals Policy
- 20. Bloodborne Pathogens (BBP) & Other potentially infectious materials (OPIM) Exposure Control Plan
- 21. Infection Prevention & Control Program Plan 2023
- 22. NHS Performance Improvement Committee Charter
- 23. NHS Infection Prevention & Control Officer Appointment/Authority Statement

B. Possible Discussion and Possible Action on Items Removed from Consent Agenda.

VI. BUSINESS ITEMS

A. Trustee Recommendations-Discussion and Action.....Dr. Gosnell

VII. ADMINISTRATIVE REPORTS

A. Health System Report-Discussion and Action Mr. Woodliff

B. Hospital Report-Discussion and Action Mr. Berry

VIII. COMMITTEE REPORTS

A. Finance/Compliance Committee-DiscussionMr. Watkins

1. Financial/Statistical Report-Discussion and Action.....Ms. Leatherman

2. NHS Proposed Capital Budget-Discussion and Action.....Ms. Leatherman

3. NHS Proposed Operating Budget-Discussion and Action.....Ms. Leatherman

4. NHS Proposed JV Budget-Discussion and Action.....Ms. Leatherman

5. Capital Expenditures-Discussion and Action.....Ms. Leatherman

a. Remarkables Concrete

b. Labor and Delivery Beds

6. IBC Loan Modification Agreement-Discussion and Action.....Ms. Leatherman

7. Insurance Premiums-Discussion and Action.....Mr. Woodliff

8. Physician Independent Contractor/Medical Director Agreements:

Radiation Oncology-Discussion and Action.....Mr. Woodliff

9. Physician Employment Agreements: Family Medicine-

Discussion and Action.....Mr. Berry

10. Physician Independent Contractor Agreement Amendment: Orthopedics-

Discussion and Action.....Mr. Berry

11. Physician Employment Letter of Intent: Nephrology-

Discussion and Action.....Mr. Berry

12. Wound Care Proposal-Discussion and Action.....Mr. Berry

13. Unifirst Agreement-Discussion and Action.....Mr. Berry

B. Personnel/Strategic Planning Committee-Discussion Mr. Highers

1. Personnel Committee Report-Discussion and Action..... Mr. Highers

IX. NEW BUSINESS-Discussion and Action Dr. Gosnell

Any matter not known about and which could not have been reasonably foreseen prior to the posting of this agenda.

X. ADJOURN-Discussion and Action..... Dr. Gosnell

TAHLEQUAH HOSPITAL AUTHORITY

**By: _____
Assistant Secretary**

Posted at Meeting Site on: _____ at _____