

**TAHLEQUAH HOSPITAL AUTHORITY
BOARD OF TRUSTEES**

Date: 07/11/2022

Time: 4:00 p.m.

Place: MOB Classroom

- I. CALL TO ORDER/CALLING OF THE ROLL** Mr. Harrington
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. REVIEW AND APPROVAL OF MINUTES**
A. Regular THA Board Meeting-June 13, 2022- Discussion and Action Mr. Harrington
- III. EXECUTIVE SESSION** Mr. Harrington
- 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 III.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 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 VIII.A Finance/Compliance Committee
 2. Possible Action on Section VIII.B Personnel Matters for Personnel/Strategic Planning Committee
 3. Possible Action on this Section III.C.3 Quality Assurance for:
 - a. Medical Staff Affairs Report-Discussion and Action Dr. Winn
 - b. Quality Assurance Committee Report-Discussion and Action Dr. Nolan
 4. Possible Action on Peer Review for Medical Staff and/or Credentialing for:
 - a. Initial Appointment-Discussion and Action
 - i. Bidwell, Celeste APRN-CNP – Allied Health Professional; Cardiology NP
 - ii. Burton, Josh D.O. – Active; Emergency Medicine
 - iii. Gamble, Tandaleo APRN-CNP – Allied Health Professional; Emergency Medicine NP
 - iv. Hebroni, Frank M.D. – Consulting; Diagnostic Imaging
 - v. Khan, Gulam M.D. – Consulting; Diagnostic Imaging)
 - vi. Kim, David D.O. – Consulting; Pathology
 - vii. Sanders, Robert D.O. – Active
 - viii. Shaeffer, Catherine M.D. – Consulting; Diagnostic Imaging
 - b. Change of Status/Privileges
 - i. Pack, Jason M.D. – Consulting to Inactive
 - c. Completion of Provisional Period-Discussion and Action

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- i. Anthony, Ryan CNIM – Allied Health Professional; Intraoperative Monitoring Tech
- ii. Ballew, Jason M.D. – Active; Addiction Medicine
- iii. Bledsoe, Matthew M.D. – Consulting; Diagnostic Imaging
- iv. Burns, Allison PA-C – Adjunct Allied Health Professional; PA Orthopedic
- v. Cheema, Zahid M.D. – Consulting; Neurology
- vi. Cookson, Brian APRN-CNP – Allied Health Professional
- vii. Khan, Tehseen M.D. – Consulting; Neurology
- viii. Mathis, Jennifer M.D. – Active; Addiction Medicine
- ix. Moore, Jason D.O. – Active; Emergency Medicine

IV. REVIEW AND APPROVAL OF CONSENT AGENDA ITEMS..... Mr. Harrington

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
10. Biohazardous Medical Waste Policy
11. Coronavirus Guidance and Standard Operating Procedure
12. Hospital-Acquired Infections Reporting Policy
13. Infection Control Practice Standards Policy
14. Infection Control Surveillance Policy
15. Linen Management Policy
16. Mold Abatement Policy
17. Negative Pressure Machine Set up Policy
18. Patient Ethics Committee Policy
19. Surgical Site Infection Prevention Policy

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

V. BUSINESS ITEMS

A. Conflict of Interest Statements-Discussion..... Mr. Harrington

VI. ADMINISTRATIVE REPORTS

- A. Health System Report-Discussion and Action..... Mr. Woodliff
- B. Hospital Report-Discussion and Action.....Mr. Berry

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VII. MEDICAL STAFF COMMITTEE

A. Medical Staff Committee Reports-Discussion and Action..... Dr. Rotton

VIII. COMMITTEE REPORTS

- A. Finance/Compliance Committee-Discussion..... Mr. Watkins
1. Financial/Statistical Report-Discussion and Action Mr. Wagner
 2. Capital Expenditures-Discussion and Action Mr. Wagner
 3. Audit Engagement Letter Addendum-Discussion and Action..... Mr. Wagner
 4. 340B General Policies and Procedures Policy-Discussion and Action Mr. Wagner
 5. DrFirst Backline Software-Discussion and Action..... Mr. Wagner
 6. Management Agreement-Discussion and Action Mr. Woodliff
 7. Letter of Understanding: Emergency Services/VPMSA-
Discussion and Action Mr. Berry
 8. Physician Employment Agreement: Hospitalist-Nocturnist-
Discussion and Action Mr. Berry
 9. Letter of Understanding: Women’s Health-Discussion and Action Mr. Berry
- B. Personnel/Strategic Planning Committee-Discussion..... Mr. Highers
1. Personnel Report-Discussion and Action Mr. Highers

IX. NEW BUSINESS

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

X. ADJOURN