



West Side Health Care District

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

Board Meeting Agenda

Thursday, November 17, 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, October 27, 2022

Facilities Committee Minutes- Thursday, November 3, 2022

Based on the Facilities Committee recommendations, Discussion/Approval of the following items.

- a. HVAC System Repairs and Upgrades
- b. Fencing for a portion of the District Campus
- c. Landscaping upgrades for District Campus

4. Financial Review

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

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

5. Discussion/Approval Authorization of a Process- Public Bidding for Renovations to Building B

6. Annual Review and Approval of Policy and Procedures

A. West Side Family Health Care- Miscellaneous Policies

7. Administrative Staff Reports

A. October 2022, General Information- Attached for informational purposes only.
No Action.

8. 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.

9. Items for Future Agendas

10. Adjournment

The next Regular Board Meeting is set for Thursday, December 15, 2022, at 2:00 pm

ITEM 3



West Side Health Care District

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

BOARD MEETING MINUTES

Thursday, October 27, 2022, at 2:00 pm

1. **CALL TO ORDER**

Board President, Eric Cooper, called the meeting to order at 2:02 pm. Summer Wood-Luper led the Pledge of Allegiance. Those present were:

Eric Cooper	Board President
Adele Ward	Board Vice President
Ginny Miller	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 and Clinic Director, Summer Wood-Luper.

2. **PUBLIC INPUT- None**

3. **APPROVAL OF MINUTES**

The Board meeting minutes were reviewed. After discussion, the Minutes of Thursday, September 22, 2022, were approved by the Board of Directors.

4. **FINANCIAL REVIEW**

The Financial Statements of September 2022 were reviewed by Executive Director, Ryan Shultz. After discussion, a motion was made by Adele Ward to approve the September 2022 financial statements. Ginny Miller seconded. Motion carried.

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

After review and discussion, Jan Ashley made a Motion to approve the policies and procedures. Ginny Miller seconded. Motion carried. The West Side Family Health Care Policy and Procedures that were reviewed were: Disaster Plan, Alternate Communication in Emergency Situations, Bomb Scare, Bioterrorism Threat, Disruption of Electrical Services, Exam Table and Exam Room Cleaning and Disinfection, External Hazmat Incident, Earthquake or Weather Emergency, Extreme Temperatures, Fire Safety, Kaiser Eligibility Verification, Medication Management Emergency Response to Power Failure, Sensitive Services, Mass Casualty Response, Storage, Handling, and Delivery of Medications, Volunteer Deployment, Threatening or Hostile Patient, and The Emergency Operations Plan.

7. ADMINISTRATIVE STAFF REPORT
 - A. September 2022, General Information- Attached for informational purposes only.
No action.
 - B. Review/Authorize Executive Director, Ryan Shultz to sign the Legal Representation Agreement with Young Wooldridge, LLP.
After discussion, Jan Ashley made a motion to approve the legal representation agreement. Darren Walrath seconded. Motion carried.
 - C. Discuss and Schedule Executive Director Evaluation
Blank copies of the evaluation were distributed to the Board members. The evaluation will be on the January 2023 Board meeting agenda once it has been completed by the Board of Directors.
 - D. Discuss/Update Strategic Plan
A presentation was viewed and discussed on past, future and completed strategic plan items.
The Board viewed a concept presentation of a dental clinic that may be added to the offered services within the Clinic. Executive Director, Ryan Shultz was authorized to move forward with seeking dental service proposals.
 - E. Discussion, Board Retreat.
The Board Retreat will be postponed until dental services can be further explored.
8. BOARD COMMITTEE REPORTS
 - a. Finance Committee-Nothing further at this time.
 - b. Facilities Committee- Nothing further at this time.
 - 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.
9. ITEMS FOR FUTURE AGENDA
Nothing at this time.
10. CLOSED SESSION
The Board did not enter into Closed Session.
11. ADJOURNMENT
At 3:36pm, the Board made a motion to Adjourn the Board Meeting of October 27, 2022.

Respectfully Submitted: _____
Adele Ward, Board Vice President

The next regular Board Meeting is scheduled for Thursday, November 17, 2022 at 2:00 pm



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

FACILITIES COMMITTEE MEETING

Thursday, November 3, 2022 at 8:00 am

1. CALL TO ORDER

The meeting was called the meeting to order at 8:02am, Board President, Eric Cooper led in the Pledge of Allegiance. Those present were:

Eric Cooper	Board President
Darren Walrath	Board Member
Ryan Shultz	Executive Director
Robyn Melton	Clerk of the Board

2. PUBLIC INPUT – None

3. WEST SIDE FAMILY HEALTH CARE FACILITY MAINTENANCE DISCUSSION

- a. HVAC SYSTEM-Tom Hartnett from Kern Mechanical presented a proposal for HVAC system repairs to help the current unit in the clinic work correctly and more efficiently. Proposal includes new duct work, new filters, labor, demolition and clean up. The proposed amount is \$105,715.00.

The Facilities Committee recommended this proposal will be presented at the November 2022 Board Meeting for discussion/ approval.

- b. FENCING- A proposal was reviewed from San Joaquin Fence to install a white 2 rail ranch style vinyl fence around a large section of the health campus. The Proposal estimate was \$31.00 a foot. The committee directed Executive Director, Ryan Shultz to seek an additional proposal from Lamont Fencing.

Both landscaping proposals will be presented at the November 2022 Board Meeting for discussion/approval.

- c. LANDSCAPING- Two proposals were reviewed for landscaping at the health care campus. Millan Landscaping submitted a proposal for \$26,530.00. Maranatha Landscaping submitted a proposal for \$ 20,775.00. After discussion the Committee asked Ryan Shultz to contact Millan Landscaping to make a few modifications to their proposal and clarify plant selections. Millan Landscaping proposal will be presented at the November 2022 Board Meeting for discussion/approval.

- d. GENERAL FACILITY MAINTENANCE UPDATES- Two bollards will need to be added to walk way directly across from the clinic, to clarify this in not a driveway. Committee also recommended purchasing outdoor furniture for the staff patio area.

4. COMMITTEE MEMBER INPUT- None

5. ADJOURNMENT

Being no further business, a Motion was made to Adjourn. The meeting was adjourned at 9:15 am.

Respectfully Submitted: _____
Eric Cooper, Committee Member

**WEST SIDE FAMILY HEALTH CARE
ADD RETURN AIR TO EXISTING LOBBY HVAC SYSTEM
BUDGET COST ESTIMATE**

Project name	HVAC 1000 E. North Street Taft CA
Estimator	Russell Sherman
Bid date	10/27/2022
Bid Project No.	B022-064
Notes	Clarifications: - New Duct Through roof to be located adjacent to existing exhaust fan penetration in order to avoid installing new steel framing. This has been reviewed and approved by the Structural Engineer Michael Parolini - Demolition work to be performed after hours - All non demolition work work to be performed during normal working hours - Owner's janitorial staff to clean all construction dust and/or dirt created inside the buidling during work - Work to be peromed without a buidling permit

Group	Phase	Description	Takeoff Quantity	Total Cost/Unit	Total Amount
100.000		GENERAL REQUIREMENTS			
	1300.010	General Conditions			
		Superintendent	0.50 MO	14,500.00 /MO	7,250
	1510.010	Utilities: Temporary			
		Temp Toilet (1) & Wash Station (1)	1.00 MO	260.00 /MO	260
	1550.000	Travel Expenses			
		Superintendant Milage	400.00 MI	1.25 /MI	500
2000.000		SITWORK			
	2010.000	Demolition			
		Demolition Total	1.00 LS	4,775.00 /LS	4,775
		Remove Roofing and Insulation	1.00 LS	0.00 /LS	0
		Sawcut and Remove Concrete	1.00 LS	0.00 /LS	0
		Sawcut and Remove B Deck	1.00 LS	0.00 /LS	0
6000.000		WOOD & PLASTICS			
	6100.000	Rough Carpentry			
		Insulation Stops and Blocking	1.00 LS	750.00 /LS	750
7000.000		THERMAL & MOISTURE PROT.			
	7530.000	Single Ply Roof			
		Tie Existing Roofing into Curb For Duct	1.00 LS	2,000.00 /LS	2,000
9000.000		FINISHES			
	9510.000	Acoustical Ceilings			
		R&R Existing T-Bar Ceiling	100.00 SF	15.00 /SF	1,500
15000.000		MECHANICAL			
	15800.000	HVAC Systems			
		HVAC Total Amount	1.00 LS	78,320.00 /LS	78,320
		Install Return Air Duct Through Roof	1.00 LS	0.00 /LS	0
		Install Retrun Air Register	1.00 LS	0.00 /LS	0
		R&R Existing EF	1.00 LS	0.00 /LS	0
		Install Thermostat to Control Existing Unit	1.00 LS	0.00 /LS	0
		Reconfigure Exsting Controls	1.00 LS	0.00 /LS	0

Estimate Totals

Description	Amount	Totals	Rate
	95,355	95,355	
Overhead & Profit	9,536		10.000 %
Builders Risk	95		0.100 %
Liability Insurance	729		0.765 %
	10,360	105,715	
Total		105,715	



September 26, 2022

Wallace & Smith General Contractors
3325 Landco Dr
Bakersfield, CA 93308
Attn: Paul Cooper

Project: Westside Family Health Care

Convert 100% OSA unit to a OSA and return unit. The return air will come from the waiting room through the 99.7 efficient HEPA filters to the unit. We will modify existing exhaust duct. We will install return air ductwork. We will cut a return air register through the wall and install wall register. We will have 4,000CFM of return air and 2,000 CFM of OSA. We will remove and replace existing exhaust fan. The unit will be controlled with thermostat, supplied by unit manufacturer, in the waiting room. We will reconfigure control system. It will control temperature and humidity.

Total, \$78,320.00

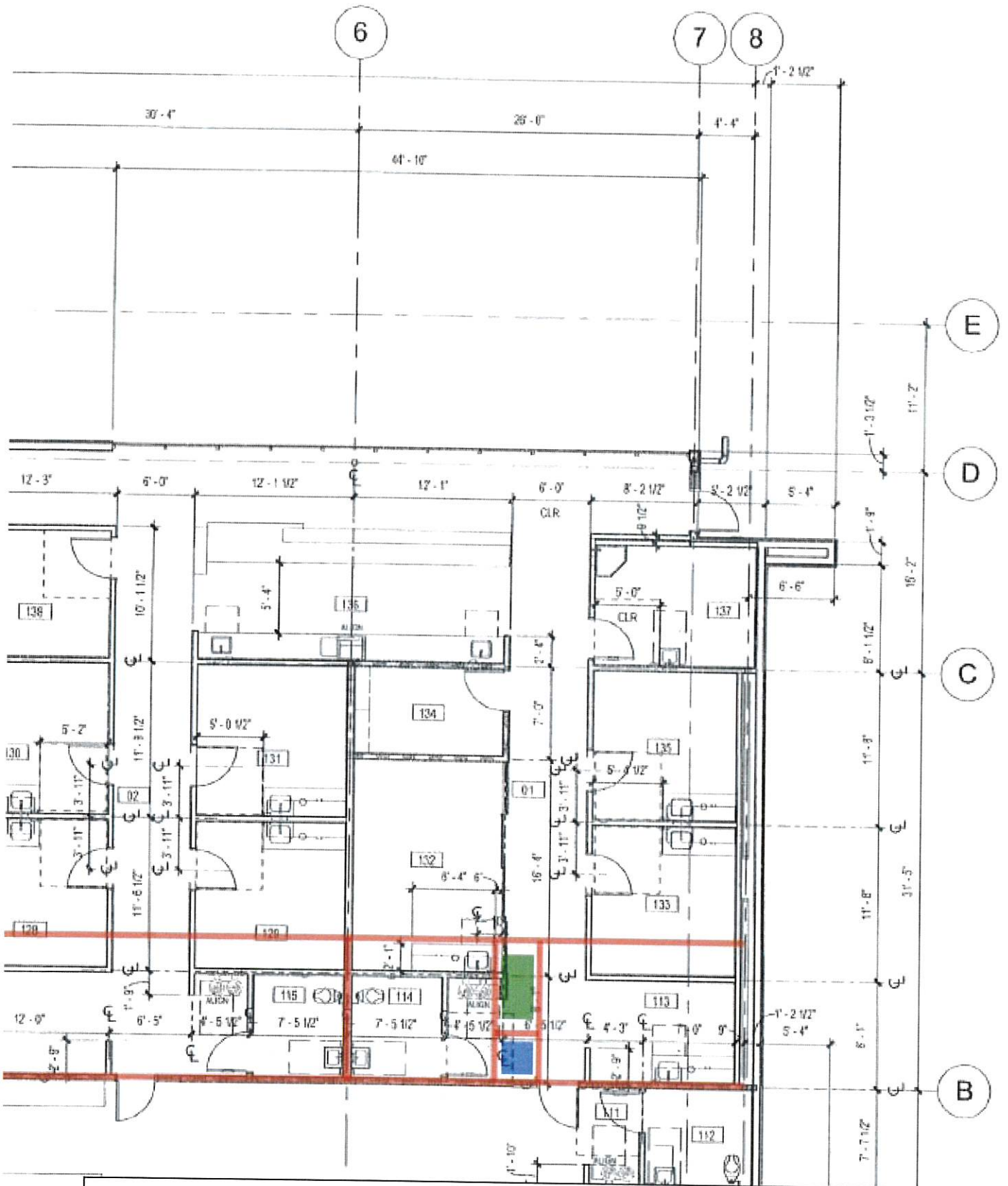
WORK NOT INCLUDED:







- a. permits and fees
- b. patching of existing roofing.

Unless otherwise specified, this request for quotation will remain valid for thirty (30) calendar days. If you have any questions please do not hesitate to call.

Yours,

Tom Hartnett



	EXISTING STEEL ROOF FRAMING		351.2 FT
	EXISTING EF OPENING		1.0 EA
	NEW OPENING - 2'-6" X 5'-0"		1.0 EA



SAN JOAQUIN FENCE
1933 E. California Ave.
Bakersfield, CA 93307
(661) 322-9700 FAX (661) 322-9600
Contractors License #1012604 / DIR #1000037265

DATE: 9/30/2022

TO: WILSON INVESTMENTS
ATTN: DAVID R. WILSON
RE: FENCE QUOTE/ WEST SIDE HEALTH, TAFT, CA.

SAN JOAQUIN FENCE INTENDS TO BID THE FOLLOWING ITEMS.

SCOPE OF WORK

PROVIDE AND INSTALL APPROX 2725' OF 2- RAIL RANCH STLE WHITE VINYL FENCING, NO GATES.

NOTE: QUOTE BASED SITE UNSEEN/MEASURED.

\$31 Ft

BASE BID: \$ 85,875.00

EXCLUSIONS:

- ◆ UNDETECTED UNDERGROUND UTILITIES, SPRINKLERS
- ◆ STAKING & GRADING, CURBING, GATES.

SUBMITTED BY: DEAN CASTRO

ACCEPTED BY BUYER: _____
DUE UPON COMPLETION

**IF PAYING BY CREDIT CARD, A 3% SURCHARGE WILL BE ADDED TO THE TOTAL INVOICE*

PREVAILING WAGE

Y NO X

Estimate Date:



MILLAN LANDSCAPE

14520 MEACHAM RD. - BAKERSFIELD, CA 93314
(661) 747-3313 / (661) 889-3059
LIC: 1025521

NAME: WEST SIDE HEALTH CARE PHONE: _____

ADDRESS: 100 E NORTH ST

CITY/STATE/ZIP: TAFT, CA 93268

WEST SIDE FAMILY HEALTH CARE LANDSCAPE

NEW GREENERY

- (4) — 24" Box Tristania Tree
- (3) — 24" Box Japanese Blueberry Tree
- (10) — 15gal Japanese Blueberry Tree
- (30) — 5gal Kangaroo Paw
- (20) — 5gal Mexican Sage
- (25) — 5gal Bell of Fire Tecoma
- (10) — 5gal Mexican Bird of Paradise
- (10) — 5gal Foxtail Blue Agave
- (15) — 5gal Méerlo Lavender
- (30) — 5gal Bottle Bushes — **(ALSO TRANSPLANTING CURRENT BOTTLE BUSHES)**
- (15) — 5gal Trailing Lantana Purple
- (5) — 5gal Golden Agave
- (8) — 5gal Photinia Bushes

GROUND COVER

- (8) Large Boulders & 7 Cubic Yards of California Gold DG

IRRIGATION

- **ALL PLANTS WILL HAVE DRIP SYSTEM HOSE INSTALLED TO FEED PROPER WATER**

- **PLANT GUARANTEE** : We guarantee all of our plants & greenery for 30 days upon completion of job provided they have been watered & cared for according to our instructions. Please contact us **immediately** upon any first sign of distress of plants to take proper action.
- **PAYMENT PLAN** : A **\$5,000 deposit** will be required the day job is started. A **\$9,530 payment** will be done when greenery arrives. A **\$6,000 payment** will be required when planting & irrigation has been completed. **Final \$6,000 payment** will be required upon completion of DG & full project.

Estimate Cost: \$26,530.00

Date: NOV 3, 2022

Extras: N/A

Deposit: \$5,000.00

Signature: _____

MARANATHA LANDSCAPING INC. Lic# 812185

7617 Felipe Court
Bakersfield, CA 93307
(661) 363-9638
maranathalandscape@att.net
www.maranathalandscape.com



ADDRESS

West Side Family Health
Attn.: Dave Wilson
100 E North Street
Taft, CA 93268 USA

SHIP TO

West Side Family Health
100 E North Street
Taft, CA 93268 USA

Estimate 7877

DATE 10/24/2022

EXPIRATION DATE 11/24/2022

ESTIMATOR

Eric Henson

DESCRIPTION

AMOUNT

Install landscape per following specifications. Estimate prices are good for 30 days. All plants come with a 3 month warranty exclusive of frost, extreme wind or damage from people or animals and State Water Regulations. Due to the new water regulations set by the State of California, we are unable to warranty shrubs, trees, flower, and sod. Sprinkler system comes with a 6 month warranty. All measured areas will be re-measured on completion of job. It is your responsibility to know if you have a reflective issues that can cause turf to melt. Fiber shrinkage and melting due to exposure to reflective light from Low E Rated windows and other reflective objects is excluded from Maranatha's and SYNLawns warranty. Price subject to change. Payments to be made as follows: 10% of price or \$1000.00 whichever is less, due upon signing of the contract, 30% progress payment, and remaining balance due upon completion. Late fees of 18% will be applied if payment balance is not paid in full upon completion. Three day right to cancel upon acceptance of contact. We do not accept payment by credit cards. Job site hours range from 7:30-3:30 Monday - Friday. DUE TO THE PANDEMIC PRODUCTS AND MATERIALS MAYBE BACK ORDERED OR BECOME UNAVAILABLE. ITEMS MAY HAVE TO BE SUBSTITUTED. ANY ITMES THAT MAY BECOME UNAVAILABLE WILL BE DISCUSSED WITH OWNER.

T

****DUMP FEE \$58.00 PER TON WILL BE ADDED TO FINIAL INVOICE****

Clean up	
Demo and clean up - 3 men 1 day trim lower branches on trees	1,650.00
Irrigation	
Check system \$145 per hr. plus parts	
Add 2 valve drip for new plants around office	3,975.00
Remove grey rock for temporary irrigation and planting. Once finished re-install rock	1,800.00
Plants/Trees	
Install (95) 5-gallon in grey rock area - Vergated dianellas or blue dianellas	6,175.00
Install (40) 5-gallon iceberg	2,600.00
Install (10) 5-gallon red yuccas 2 on each cheese pistachio tree	650.00
Install (7) 15-gallon plants for pots	1,400.00

DESCRIPTION	AMOUNT
Install (30) 5-gallon red carpet rose entry bed \$1950	1,950.00
Transplant Pira cantharus	325.00
Install (2) yards of soil amendments Mix 15	250.00
Thank you for the opportunity to bid your project.	
SUBTOTAL	20,775.00
TAX	0.00
TOTAL	\$20,775.00

Accepted By

Accepted Date

ITEM 4

ITEM 6



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

POLICY: Appointment Scheduling	REVIEWED: 1/28/16; 2/15/17; 2/23/18; 8/18/18; 8/2/19; <u>11/03/22</u>
SECTION: Administration	REVISED: 2/15/17; 2/23/18; <u>10/12/22</u>
EFFECTIVE: <u>8/22/19</u> 11/17/22	MEDICAL DIRECTOR:

Subject: Appointment Scheduling

Objective: Patient appointments will be scheduled in an effort to manage/decrease patient waiting time, increase patient satisfaction, and manage clinic workflow.

Response Rating:

Required Equipment: EHR

Procedure:

1. Patients will be encouraged to schedule appointments in order to decrease wait time and improve workflow in the Clinic.
2. Patients will be scheduled in 15-minute intervals, unless otherwise indicated by the Provider, the visit type, or the patient's acuity.
3. When scheduling an appointment, staff will confirm the patient's address and telephone number as it is recorded in the Electronic Medical Record (EMR) and remind the patient that any co-payment required will be due.
4. If the patient has not been seen in the Clinic previously, staff will capture all patient demographic information, if time permits.
5. If the patient has not been seen in the Clinic previously, and their scheduled appointment is seven (7) or more days in the future, the Clinic will mail the new patient packet to the patient's mailing address with a note asking the patient to complete the enclosures and bring them to their scheduled appointment.
6. New patients will be asked to arrive at the Clinic before their scheduled appointment time, so that their demographic record and signed new patient documents may be entered into the EMR.
 - a. Patients who will bring completed paperwork with them should be asked to arrive 15 minutes before their scheduled appointment time.
 - b. Patients who will not bring completed paperwork with them should be asked to arrive 30 minutes before their scheduled appointment time.



7. All other scheduled patients not requiring paperwork will be asked to arrive 15 minutes before their scheduled appointment time.

7. Patients will be pre-registered the day before their appointment.

8. Patients that arrive late for their appointment ~~(15 minutes or more)~~ will be ~~treated~~ rescheduled or may be seen as a walk-in patients ~~—addressing one chief complaint that and will—~~ ~~be seen~~ as patient volume allows—
 - a. Patients will be offered an alternative appointment date and time after communicating the patient's late arrival to the rendering provider. advised of this change from scheduled to walk-in status upon their arrival at the Clinic.
 - b. Registration staff will notify the rendering provider of each late arriving patient prior to rescheduling the patient.
 - c. The rendering provider will decide if the late arriving patient will be accommodated or rescheduled.



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

POLICY: CONFLICT OF INTEREST	REVIEWED: 8/26/2016; 7/22/18; <u>10/12/22</u>
SECTION: ADMINISTRATION	REVISED:
EFFECTIVE: <u>11/17/228/23/18</u>	

Subject: Compliance

Objective: The purpose of this Board policy is to protect West Side Health Care District's interest when it contemplating entering into a transaction or arrangement that might benefit the private interest of a Board officer, director, committee member, or employee.

This policy is intended to supplement, but not replace, any applicable state or federal laws governing conflicts of interest applicable to nonprofit organizations.

Response Rating: Mandatory

1. Definitions:

- a. *Conflict of Interest*- occurs when a covered person ~~solicits~~solicits or accepts gifts, does business with the District and/or engages in prohibited employment or business relationships, accepts unauthorized compensation, misuse their position, or disclose or use certain information.
- b. *Covered Person*- Any District Board member, committee member, Executive Director or employee.
- c. *Contract*- means and includes any written agreement.
- d. *District*- the West Side Health Care District and its affiliated entities including, but not limited to, West Side Family Health Care
- e. *Exempt Employee*- ~~an employee employed executive, administrative, professional, computer or outside sales position and is not subject to the minimum wage and overtime provisions~~ Are not entitled to overtime pay and may also be exempt from minimum wage requirements pursuant to applicable federal and state laws.
- f. *Gift*- something which is paid or given by a person or entity to a Covered Person, directly or indirectly. This may include, but not limited to; real property, a preferential rate or terms on a loan, debt, goods or services, food or beverages, membership dues, entrance fees, admission fees, tickets to events, performances, facilities, parking or lodging.



2. Procedure:

- a. Duty to Disclose- In connection with any actual or possible conflict of Interest, an interested person must disclose the existence of the financial interest and be given the opportunity to disclose all material facts to the Board.
- b. Recusal of Self- -Any director may recuse himself or herself at any time for involvement in any decision or discussion in which the director believes he or she or may have a conflict of interest, without going through the process of determining whether a conflict of interest exists.
- c. Determining Whether a Conflict of Interest Exists- After disclosure of the financial interest and all material facts, and after any discussion with the interested person, he/she shall leave the Board meeting while the determination of a conflict of interest is discussed and voted upon. The remaining Board members shall determine if a conflict of interest exists.
- d. Procedure for addressing the Conflict of Interest- -An interested person may make a presentation at the Board meeting, but after the presentations, he/she shall leave the meeting during the discussion of, and the vote on, the transaction or arrangement involving the possible conflict of interest. The Board President shall, if appropriate, appoint a disinterested person to investigate alternatives to the proposed transaction or arrangement.

3. Violations of the Conflict of Interest Policy:

- a. Violations include, but are not limited to: Bribery, payments for appointments to offices, willful or corrupt misconduct in office, embezzlement, misuse of public funds, violation of Open Meeting Law/Brown Act, prohibited political activities, conviction of a crime.
- b. If the Board has reasonable cause to believe a member has failed to disclose actual or possible conflicts of interest, it shall inform the member of the basis for such belief and afford the member an opportunity to explain the alleged failure to disclose.
- c. If after hearing the member's response, the Board still determines the member has failed to disclose ~~the~~ actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action.

4. Record of Proceedings:

The minutes of the Board shall contain:

- a. The names of the person(s) who disclosed or otherwise were found to have a financial interest in connection with an actual or possible conflict of interest, the nature of the financial interest, any action take to determine whether a conflict of interest was present, and the Board decision as to whether a conflict of interest in fact existed.
- b. The names of the persons who were present for discussions and votes related to the transaction or arrangement, the content of the discussion including any alternatives to the



proposed transaction or arrangement, and any record of any votes in connection with the proceedings.

5. Annual Statements:

1. Each Board member or Executive Director with delegating powers shall annually sign a statement which affirms such person:
 - a. Has received a copy of the conflict of interest policy,
 - b. Has read and understands the policy
 - c. Has agreed to comply with the policy.

2. Each voting member of the Board shall annually sign a statement called a “Statement of Economic Interests: with the Fair Political Practices Commission, when you begin your term, annually, or when you end your term.

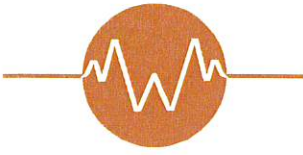
Resources:

<http://www.fppc.ca.gov/Form700.html>

FPPC Form 700 Reference Pamphlet (2015/2016)

Special District Board Member/Trustee Handbook

WEST SIDE HEALTH CARE DISTRICT



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

POLICY: DIFFICULTY BREATHING/ASTHMA	REVIEWED: 2/5/16; <u>11/03/22</u>
SECTION: CLINICAL	<u>-REVISED: 11/10/22</u>
EFFECTIVE: <u>2/25/16</u> 11/17/2022	MEDICAL DIRECTOR:

Subject: **Difficulty Breathing / Asthma**

Objective: To decrease wheezing and shortness of breath for patients with bronchospasm

Acuity Rating: Moderate to Severe

Required Equipment: Pulse oximeter, aerosol treatment machine, tubing, mouthpiece, T- tube and stethoscope

Procedure

When a patient arrives at the Clinic with asthma or severe COPD, you may note the following symptoms: non-productive cough, difficulty breathing, wheezing, chest tightness, or labored breathing.

1. Notify the attending provider.
2. Ask if the patient has used a personal inhaler, and if so, when and how many times.
3. If ordered by provider, obtain a peak flow measurement.
4. Obtain a pulse oximetry reading.
5. Set-up the nebulizer machine.
6. Obtain nebulizer solution ordered by the provider (albuterol, atrovent or xoponex), and pour the medicine into the receptacle of the "t-tube" that connects to the nebulizer.
7. Encourage the patient to breathe in and out with the mouth tightly sealed around the mouthpiece. If the patient is a child and is uncooperative, have the parent hold the tubing near the nose and mouth of the child while encouraging the child to inhale and exhale through the mouthpiece. A mask may also be used for small children.
8. Once the treatment is complete, repeat the peak flow measurement, if ordered by the provider, and pulse oximetry, reassess breath sounds and document whether or not there is any improvement.
9. Notify provider of results of the treatment, peak flow (if ordered) and pulse oximetry.

10. Document all results in the patient record.

11. Record all charges.



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

POLICY: Business Hours <u>and Clinic Opening Responsibility.</u>	REVIEWED: 1/28/16, 2/15/17; 2/22/18; 8/18/18; 8/2/19; 6/1/21
SECTION: Administration	REVISED: 2/15/17; 6/24/21; <u>10/13/22</u>
EFFECTIVE: <u>11/17/2022</u> 6/24/21	MEDICAL DIRECTOR:

Subject: Business Hours

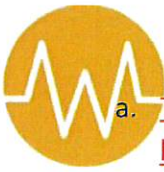
Objective: To ensure a predictable and organized ~~predictable, organized and safe~~ operation of the Clinic. ~~The~~ Clinic will maintain compliance with applicable Federal, State and local laws and regulations. ~~The Clinic will~~ ~~post~~ hours of operation and will report permanent revisions to District Administration and California Department of Public Health.

Response Rating:

Required Equipment:

Procedure:

1. The Clinic will be open Monday through Friday, between 7:00am and 9:00pm and Saturday and Sunday, between 10:00am and 9:00pm.
2. The Clinic will be opened for holidays with abbreviated hours of operation.
3. Business hours will be posted at the clinic.
4. A Physician, Nurse Practitioner, Physician Assistant, Certified Nurse-Midwife, Clinical Social Worker, or Clinical Psychologist is available to furnish patient care services at all times the clinic or center operates.
 - a. Should a licensed provider not be in the clinic, no clinic services may be provided until the provider arrives at the clinic.
 - b. Should an emergency take place and no licensed provider is present, staff should contact 9-1-1 and provide applicable first-aid according to the staff members scope of practice and training.
 - c. Patients may remain in the clinic lobby until a licensed provider is present in the clinic.
5. A Nurse Practitioner, Physician Assistant or Certified Nurse-midwife is available to furnish patient care services at least 50 percent of the time the clinic operates.
 - a. The Executive Director and/or their designee will be responsible for maintaining data showing, practitioner hours worked and will submit a report to the QAPI Committee for review and inclusion in the meeting minutes.
6. On scheduled staff training days, holidays, late opening days or early closure days, the hallway doors connecting Building A, Building B and the door to the Radiology Office will be locked until the clinic is opened.



a.

Tenants within the clinic may continue to operate outside of the clinic's business hours and hours where a licensed medical provider is not present in the clinic so long as unauthorized personnel do not have access to the clinic as described in #4 of this policy.

Pending Approval



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

POLICY: COVID-19 Vaccination Policy	REVIEWED: 04/06/2022; <u>11/03/22</u>
SECTION: Administration	REVISED: <u>10/04/22</u>
EFFECTIVE: <u>11/17/2022</u> 04/28/2022	MEDICAL DIRECTOR:

Subject: COVID-19 Vaccination Policy

Objective: To ensure the District and Clinic are in compliance with regulations requiring health care workers to be fully vaccinated for COVID-19.

Definition: **Health Care Workers (“Staff”)** – include all district or clinic staff who provide care, treatment, or other services for the district or clinic and/or its patients including but not limited to Clinic employees, District employees, Licensed Health Practitioners, Students, Trainees, Volunteers, or Contractors.

Fully Vaccinated Staff Member - staff are considered fully vaccinated if it has been 2 weeks or more since they completed a primary vaccination series for COVID-19.

Primary Vaccination Series - The completion of a primary vaccination series for COVID-19 is defined here as the administration of a single-dose vaccine, or the administration of all required doses of a multi-dose vaccine.

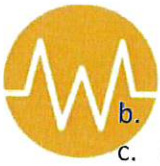
Booster-A booster for subsequent vaccination for COVID-19 is defined here as, an additional dose of a vaccine needed periodically to ‘boost’ the immune system.

Requirement: 42 CFR §491.8 Staffing and staff responsibilities (d) COVID-19 Vaccination Staff

Response Rating:

Procedure:

1. All WSHCD and WSFHC Staff must submit all required documents and information included in the ~~New~~ Employee Onboarding and Annual Training including proof of COVID-19 Vaccination Status and ~~or~~ Approved COVID-19 Vaccination Exemption.
2. Exempted staff include:
 - a. Staff who exclusively provide telehealth or telemedicine services outside of the clinic and/ or district setting
 - b. Staff who do not have any direct contact with patients and/or other staff specified in this policy
 - c. Staff who provide support services for the clinic and/or district that are performed exclusively outside of the clinic and/ or district setting.
 - d. ~~policy.~~
3. The District Office will secure all documentation related to Staff COVID-19 Vaccinations including:
 - a. Vaccination Cards
 - i. Including booster information if applicable



- b. Required COVID-19 Testing
- c. COVID-19 Vaccination Exemptions.

4. Per Federal and State Law, The District will consider (2) vaccination exemptions Medical and Religious. Staff

may submit an exemption form to the District Office for review. The District will have sole discretion over approving or denying COVID-19 Vaccination Exemptions.

- a) Medical Exemption must include – A signed statement from a physician, nurse practitioner, physician assistant, or other licensed medical professional practicing under the license of a physician. The Medical Exemption must state, that the staff member qualifies for a medical exemption (but the statement should not describe the underlying medical condition or disability) and indicates the probable duration of the worker’s inability to receive the vaccine (or if the duration is unknown or permanent)).
 - a) Religious Exemption must include – A staff signed affidavit stating the conflict between the staff members sincerely held religious beliefs, practices, and/or observances as defined in Title VII of the Civil Rights Acts of 1964.
- 5. Once an exemption is filed the Executive Director and Human Resources will evaluate the exemption request and respond in writing to the staff member notifying them of the status of their exemption.
- 6. Temporary Exemptions may be granted to staff members who are either ineligible to be fully vaccinated or have recently received a positive COVID-19 test result from an FDA EUA approved COVID-19 test.
 - a) Ineligible staff members will be notified of their vaccination deadline according to CDC guidelines and provided a (15) day grace period to become fully vaccinated.
 - b) Staff members who are eligible to be fully vaccinated, but have tested positive for COVID-19 according to the CDC will be given (90) days from their eligible return to work date and a (15) day grace period to become fully vaccinated.
- 7. The District will provide COVID-19 vaccines to staff members at no-cost.
- 8. Staff members granted vaccination exemptions will be required to comply with all federal, state and local requirements to be eligible to work. complete a specified testing regime using an FDA EUA- Approved COVID-19 test according to current Federal and State guidelines.
 - a) The District will provide a no-cost testing option to staff members. Should testing be required by federal, state or local authorities the District will provide staff members access to testing at no charge.
- 9. ~~Staff members who fail to comply with the COVID-19 Vaccination requirements will be ineligible to work at WSHCD or WSEHC. All employee, provider, or contractor participating in direct patient care and working in the Clinic will observe established District Policies and Procedures related to proper use of Personal Protective Equipment. Violation of these safety protocols may result in disciplinary actions up to and including termination.~~
 - a. ~~Approved facemasks are to be worn by all employees and providers at all times when inside the clinic.~~
 - b. ~~We will enforce the use of face masks in accordance with government orders.~~
- 10. All employees and contractors participating in direct patient care and/or working in the clinic will adhere to all established District Policies and Procedures related to the proper use of Personal Protective Equipment and Infection Control.



11. During the declared Public Health Emergency all employees, contractors, patients and guests will adhere to Federal, State or Local Public Health Care Offices orders related to infection control.
 - a. These requirements may include but not limited to face mask or face covering requirements, social distancing.
 - b. All orders specific to patients and guests will be posted in the clinic.
12. Staff members who fail to comply with the COVID-19 Vaccination and/or testing related requirements will be ineligible to work at WSHCD or WSFHC.

Pending Approval



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

POLICY: Section 504 Notice of Program Accessibility	REVIEWED: 2/5/16; 2/16/17; 2/21/18; 1/17/19; 7/2/21; <u>11/03/22</u>
SECTION: Administration	REVISED:
EFFECTIVE: <u>11/17/2022</u> 8/26/21	MEDICAL DIRECTOR:

Subject: Section 504 Notice of Program Accessibility

Objective:

The Clinic will post a Section 504 Notice of Program Accessibility in the Clinic waiting area. Such notice will state:

The regulation implementing Section 504 requires that an agency/facility "*...adopt and implement procedures to ensure that interested persons, including persons with impaired vision or hearing, can obtain information as to the existence and location of services, activities, and facilities that are accessible to and usable by disabled persons.*" **(45 C.F.R. §84.22(f))**

The Clinic and all of its programs and activities are accessible to and useable by disabled persons, including persons who are deaf, hard of hearing, or blind, or who have other sensory impairments. Access features include:

- Convenient off-street parking designated specifically for disabled persons.
- Curb cuts and ramps between parking areas and buildings.
- Level access into first floor level.
- Fully accessible offices, meeting rooms, bathrooms, public waiting areas, patient treatment areas, including examining rooms.
- A full range of assistive and communication aids provided to persons who are deaf, hard of hearing, or blind, or with other sensory impairments. There is no additional charge for such aids. Some of these aids include:
 - Qualified sign language interpreters for persons who are deaf or hard of hearing.
 - A twenty-four-hour (24) telecommunication device (TDD) which can connect the caller to all extensions within the facility , for use by persons who are deaf, hard of hearing, or speech impaired.
 - Large print materials for the visually impaired.
 - Alphabet boards and other communication boards.
 - Assistive devices for persons with impaired manual skills.

If you require any of the aids listed above, please let the receptionist or your medical assistant know.



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

POLICY: Electronic Protected Health Information (ePHI)	REVIEWED: 2/14/18; 10/24/18; 10/29/19; <u>11/03/22</u>
SECTION: Administration	REVISED: 11/15/19; <u>11/09/22</u>
EFFECTIVE: <u>11/21/19</u> 11/17/2022	MEDICAL DIRECTOR:

Subject: Electronic Protected Health Information (ePHI)

Objective: To ensure compliance with standards to ensure security of protected health information

Response Rating: Mandatory

Required Equipment:

Definition: Electronic protected health information (ePHI) refers to any protected health information (PHI) that is covered under Health Insurance Portability and Accountability Act of 1996 (HIPAA) security regulations and is produced, saved, transferred or received in an electronic form. The following are examples of PHI: Names, Address, Social Security number, Family History, Telephone number, Fax number, Account numbers, Medical Record numbers, Dates (birthday, discharge, admission), Certificate/license numbers, Vehicle ID, Personal Assets, Device identifiers, Biometric (finger or voice print), Photographs, Any unique identifying number, code or characteristic.

Procedure:

1. Electronic Protected Health Information, (herein referred to as **ePHI**), must be protected at all times from deliberate, accidental or incidental disclosure to any unauthorized entity or person.
2. Access to **ePHI** will only be granted to those District employees who have a specific "**need to know**" to fulfill their work responsibilities. Employees who are granted access to **ePHI** will have reviewed and acknowledged the necessary training in information security and policies and procedures pertaining to Protected Health Information.
3. Requests for access to **ePHI** by external Health Care entities will be submitted in writing and will be granted by the District Executive Director ("Director") or his/her representative. If medical circumstances exist that make this impractical or detrimental to a patient, verbal confirmation by either the Director or his/her representative will suffice.
4. As a general rule of thumb, **ePHI** should **not** be transferred electronically but rather by registered mail, return receipt requested or transferred directly by the patient. If it must be transferred electronically, it must be transmitted utilizing a District approved encrypted email system with a return receipt requested. Additionally, all electronic transmissions will contain a District approved disclaimer which is intended to provide an additional level of awareness to the recipient that they may be in possession of a document containing **ePHI** and as such are responsible for safeguarding that information until it is destroyed.



5. The use of external or cloud based storage devices by District employees is totally discouraged and not permitted unless approved by the Director or his/her representative. All such devices pose a serious threat to ePHI and as such will be disposed of in a manner consistent to ensure that all data has been removed and that the device is rendered totally unreadable.
6. ~~All ePHI data stored on the District's server will be backed-up on a weekly basis using either magnetic tape or other approved means. Once the back-up is complete, it will be transferred to the District Office where it will be stored in a fire proof safe until such time that it is replaced by the most current version. After this occurs, the replaced back-up will be returned to the clinic where it will be stored in a secure area with the server until it is ready to be erased and reused.~~
7. All ePHI data stored on the District's Family Health Care Server will be backed-up weekly. This will be done at minimum by utilizing an approved method which requires the data to be secured either physically on site within a fire proof safe or electronically within the "Secure Internet Cloud".
8. ~~All workstations will be configured so that user inactivity of 10 minutes or more will require that the user re-enter their password to log back into the workstation. All workstations will be configured so that inactivity of 10 minutes or more will require the user to re-enter their password to log back into the workstation/ network.~~
9. All workstations that could be in the line of vision of unauthorized personnel will have a privacy screen installed on it.
10. Users may access patient information only as it relates specifically to the user's workplace roles and responsibilities.
 - a. Users may not access personal information within the Clinic EMR or healthcare partner, vendor, and/or payor website
 - b. Users may not access information regarding family members or friends within the Clinic EMR or healthcare partner, vendor, and/or payor website access
 - c. Users seeking PHI regarding themselves will utilize the patient portal or the current medical records request form and follow Clinic policy regarding completion and submission of the request.
 - d. Users seeking PHI regarding family members or friends will utilize the patient portal or the current medical record request form and follow Clinic policy regarding completion and submission of the request, assuming the user is legally allowed access to the requested information.
11. Employees who fail to comply with these obligations and responsibilities, shall be subject to disciplinary action up to and/or including termination.



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

POLÍTICA: SECCIÓN 504 AVISO DE ACCESIBILIDAD DEL PROGRAMA	REVISIÓN: 5/2/16; 1/2/17; 2/2/18; 1/1/19; 7/2/21; <u>11/03/22</u>
SECCIÓN: LA ADMINISTRACIÓN	REVISADO:
EFICAZ: <u>8/26/2111/17/2022</u>	DIRECTOR MÉDICO:

Asunto: Artículo 504 Notificación de Programa de Accesibilidad

Objetivo:

La Clínica publicará un aviso Sección 504 del Programa de Accesibilidad en el área de espera de la clínica. Dicha notificación indicará:

El reglamento de aplicación de la Sección 504 requiere que una agencia / instalación "... adoptar e implementar procedimientos para asegurar que las personas interesadas, incluidas las personas con dificultades de visión o audición, puede obtener información en cuanto a la existencia y ubicación de servicios, actividades e instalaciones que son accesibles y puedan ser utilizados por personas con discapacidad ". **(45 C.F.R. §84.22 (f))**

La clínica y todos sus programas y actividades son accesibles y utilizables por personas con discapacidad, incluidas las personas sordas, con problemas de audición, o ciegos, o que tienen otras deficiencias sensoriales. características de acceso incluyen:

1. Conveniente aparcamiento en la calle designada específicamente para personas con discapacidad.
2. Rampas en las aceras y rampas entre las áreas de estacionamiento y edificios.
3. Nivel de acceso a la primera planta.
4. Oficinas totalmente accesibles, habitaciones, baños, salas de espera públicas, zonas de tratamiento del paciente, incluyendo salas de examen reuniones.
5. Un conjunto de ayudas de asistencia y comunicación proporcionados a las personas sordas, con problemas de audición, o ciegos, o con otras deficiencias sensoriales. No hay ningún cargo adicional para este tipo de ayudas. Algunas de estas ayudas son:
 - a. Los intérpretes de lengua de signos cualificados para las personas sordas o con problemas de audición.
 - b. Veinticuatro (24) horas dispositivo de telecomunicación (TDD) que se puede conectar la persona que llama a todas las extensiones dentro de la instalación, para su uso por personas sordas, con problemas de audición, o del habla.
 - c. Los materiales de impresión ciegos y grandes para los discapacitados visuales.
 - d. Tableros del alfabeto y otras plataformas de comunicación.
 - e. Dispositivos de asistencia para personas con habilidades manuales deteriorados.

Si usted requiere alguna de las ayudas mencionadas anteriormente, por favor, deje que el recepcionista o el asistente médico saben.



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

POLICY: Ownership and Governance Statement	REVIEWED: 5/17/16; 8/2/17; 7/6/18; 6/16/19; 9/7/19; <u>11/03/22</u>
SECTION: Administration	REVISED: 8/22/16; 7/6/18; 6/16/19; 9/7/19; <u>11/10/22</u>
EFFECTIVE: <u>9/26/19</u> <u>11/17/2022</u>	MEDICAL DIRECTOR:

Subject: Clinic Ownership and Governance

Objective: To make available to the public a clear and concise statement of Clinic ownership and governance.

Response Rating:

Required Equipment:

Procedure:

The District was formed in 1947 and governance is comprised of a Board of five members who are elected during the general election or appointed as/if required in accordance with Sec 32000 et. seq of the State Code. Board members serve staggered two-year terms. As of July 1, 2019, Board Members are:

Eric Cooper, Board President

Adele Ward, Board Vice President

Virginia Miller, Board Secretary

Janice Ashley, Board Member

Darren Walrath, Board Member

The District has appointed a District Executive Director who is responsible for the overall supervision of the District and clinical operations.

The District has contracted with a Board Certified Emergency Medicine physician (DO) to serve as Medical Director/Laboratory Director. The Medical Director, Ronald Ostrom, DO will provide patient care and Medical Staff leadership, including supervision of the mid-level practitioners (nurse practitioner, physician assistant) and licensed physicians providing medical care to patients.

~~The District has appointed a Director of Clinical Operations and a Clinic Director who, in cooperation with the Executive Director and Medical Director, are responsible for the daily operation of the Clinic and the supervision of the non-provider staff members.~~



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

POLICY: Declaración de propiedad y gobierno	REVISADO: 5/17/16; 8/2/17; 7/6/18; 6/16/19; 9/1/19
SECCIÓN: Administración	REVISADO: 8/22/16; 7/6/18; 6/16/19; 9/7/19; <u>11/7/22</u>
VIGENTE: 9/26/19 <u>11/17/2022</u>	DIRECTOR MÉDICO: Dr. Ostrom

Subject: Propiedad y gobernanza de la clínica

Objective: Poner a disposición del público una declaración clara y concisa de la propiedad y el gobierno de la clínica.

Response Rating:

Required Equipment:

Procedure:

El Distrito se formó en 1947 y el gobierno está compuesto por una Junta de cinco miembros que son elegidos durante la elección general o nombrados como / si es necesario de acuerdo con la Sec. 3200 et. Seq del Código del Estado. Los miembros de la junta sirven períodos de dos años por etapas. A partir del 1 de julio de 2019 los miembros de la Junta son:

Eric Cooper, Board President

Adele Ward, Board Vice President

Virginia Miller, Board Secretary

Janice Ashley, Board Member

Darren Walrath, Board Member

El Distrito ha designado un Director Ejecutivo del Distrito que es responsable de la supervisión del Distrito y las operaciones clínicas.

El Distrito ha contratado con un Certificado Emergencia Medicina medico (DO) para servir como Director Médico / Director de Laboratorio. El Director Médico, Ronald Ostrom, DO proporcionará atención al paciente y liderazgo del personal medico, incluida la supervisión de los profesionales de nivel medio (enfermero practicante, asistente medico) y medicos con licencia que licencia brinden atención medico a los pacientes.

~~El Distrito ha designado un Director de Operaciones Clínicas y un Director de la Clínica que, en cooperación con el Director Ejecutivo y el Director Médico, son responsables de la operación diaria de la Clínica y la supervisión de los miembros del personal que no son proveedores.~~



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

POLICY: Waived Testing - Urine Pregnancy Testing	REVIEWED: 2/22/16; 2/16/17; 3/4/18; 9/20/18; <u>11/03/22</u>
SECTION: Waived Testing	REVISED: 2/16/17
EFFECTIVE: <u>11/17/2022</u> 10/25/18	MEDICAL DIRECTOR:

Subject: Urine pregnancy testing using OSOM waived testing kit

Objective: Accurate, timely point-of-care testing to determine pregnancy

Response Rating:

Required Equipment: Gloves, test stick, timer, urine specimen, paper towel

Procedure:

1. Test dipsticks must be stored in their original container, tightly capped, in a room whose temperature range is 59-86 degrees F.
2. Before use, ensure test sticks have not passed their expiration date.
3. Don gloves.
4. Obtain collected specimen from the patient. Label specimen with two patient identifiers (e.g. name and date of birth).
5. Remove a test stick from the container and tightly re-cap the container immediately.
6. Dip the absorbent end of the test stick into the urine specimen up to the sample line marked on the stick for at least three seconds.
 - a. False results may occur if urine level goes above sample line.
7. Remove the test stick from the specimen cup. Place it on a clean, flat, dry disposable surface such as a paper towel. Set the timer for 4 minutes.
8. Read results. Positive results can be read as soon as the red control line appears. Confirm negatives at five (5) minutes. Results read after five (5) minutes are invalid.



9. A blue test line and a red control line is a positive result and the sample contains hCG. Note that the blue line can be any shade of blue, or can be lighter or darker than the example line in the package insert.
10. A red control line but no blue test line is a negative result and the sample contains no detectable hCG.
11. If after five (5) minutes no red control line appears, or background color makes reading the red control line impossible, the result is invalid and the test should be repeated with a new test stick.
12. Urine collected any time may be used for testing purposes. Urine specimens may be refrigerated (36-46 degrees F) and tested within 48 hours.
13. If refrigerated before testing, specimen and control material must be at room temperature (59-86 degrees F) prior to testing.
14. Record test results in the EMR.



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

POLICY: Waived Testing - Urine Pregnancy Testing	REVIEWED: 2/22/16; 2/16/17; 3/4/18; 9/20/18; <u>11/03/22</u>
SECTION: Waived Testing	REVISED: 2/16/17
EFFECTIVE: <u>11/17/2022</u> 10/25/18	MEDICAL DIRECTOR:

Subject: Urine pregnancy testing using OSOM waived testing kit

Objective: Accurate, timely point-of-care testing to determine pregnancy

Response Rating:

Required Equipment: Gloves, test stick, timer, urine specimen, paper towel

Procedure:

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

POLICY: Waived Testing - Urine Pregnancy Testing	REVIEWED: 2/22/16; 2/16/17; 3/4/18; 9/20/18; <u>11/03/22</u>
SECTION: Waived Testing	REVISED: 2/16/17
EFFECTIVE: <u>11/17/2022</u> 10/25/18	MEDICAL DIRECTOR:

Subject: Urine pregnancy testing using OSOM waived testing kit

Objective: Accurate, timely point-of-care testing to determine pregnancy

Response Rating:

Required Equipment: Gloves, test stick, timer, urine specimen, paper towel

Procedure:

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14. Record test results in the EMR.

ITEM 7



November 10, 2022

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

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 September.

- **The clinic reported more than 2300 patient encounters and a Rural Health Clinic Payer Mix of 71%.**
- The Facilities Committee met on November 3rd and considered proposals for landscape, HVAC and site fencing. The committee made recommendations to be presented to the board at its regular meeting on November 17th for approval.
- Houchin Community Blood Bank will host a community blood drive at the clinic on November 15th.
- District and Clinic successfully completed its Rural Health Clinic Re-Accreditation Survey on November 8th earning 100% compliance!
- The District's Formal Appeal of its FY 17-18 Reconciliation Audit has been moved to a date to be determined in February. State Audits has requested additional information from the district related to the appeal.
- Effective November 7th, WestPac Laboratories has extended its hours. New business hours are 7am-4pm Monday-Friday.