TRI-CITY HEALTHCARE DISTRICT AGENDA FOR A SPECIAL MEETING OF THE BOARD OF DIRECTORS

August 19, 2014 – 11:00 a.m.

Assembly Room 1 - Eugene L. Geil Pavilion (Lower Level)
Tri-City Medical Center
4002 Vista Way, Oceanside, CA 92056

The Board may take action on any of the items listed below, unless the item is specifically labeled "Informational Only"

	Agenda Item	Time Estimate
1	Call to Order/Roll Call/Pledge of Allegiance	3 min.
2	Approval of Agenda	
3	Public Comments – Announcement Members of the public may address the Board regarding any item listed on the Board Agenda prior to Board action on the agenda item. Per Board Policy 14-018, members of the public may have three minutes, individually, to address the Board of Directors	
4	Oral Announcement of Items to be Discussed During Closed Session (Government Code Section 54957.7)	
5	Motion to go into Closed Session	
6	Closed Session	
	(a) Conference with Legal Counsel – Potential Litigation Gov. Code Section 54956.9(d) (1 Matter)	30 min.
7	Motion to go into Open Session	
8	Report from Chairperson on any action taken in Closed Session (Authority: Gov. Code Section 54957.1)	
9	Open Session	
	(a) Discussion and action related to Board Policy 14-022- Maintenance of Confidentiality by Directors and Committee Members	30 min.
10	Adjournment	

Dated: August 18, 2014

Note: Any writings or documents provided to a majority of the members of Tri-City Healthcare District regarding any item on this Agenda will be made available for public inspection in the Administration Department located at 4002 Vista Way,

Oceanside, CA 92056 during normal business hours.

Note: If you have a disability, please notify us at 760-940-3347 at least 48 hours prior to the meeting so that we may provide reasonable accommodations.

TRI-CITY HEALTHCARE DISTRICT BOARD OF DIRECTORS POLICY

BOARD POLICY #14-022

POLICY TITLE: Maintenance Of Confidentiality By Directors and Committee Members

I. STATEMENT OF POLICY

Directors and Board Committee Members have access to private or confidential information. Both the law and sound business and legal practices require that confidentiality be maintained and protected for so long as it is necessary and appropriate in the interests of the District. In addition, such information is to be accessed and used by Directors and Committee Members only in their official capacity as public officials. It is important that Directors, Committee Members and staff be free to share confidential and/or privileged documents and information without concern for a breach of confidentiality. The use of a patient's protected health information is specifically addressed in the medical center's Notice of Privacy Practice and other HIPAA policies. These policies cover Medical Center employees, physicians, business associates as well as Directors and Committee Members. Moreover, improper disclosure of such a document or information by a Director or Committee Member may change the legal status of the matter disclosed, which may prejudice the District, the public, an employee, or a patient. That disclosure could also generate legal liability and/or financial penalties on the part of the District.

II. QUALITY MANAGEMENT

Effective peer review and quality management cannot be achieved unless the confidentiality of all discussions, deliberations, records and other information generated in connection with these activities is maintained, consistent with applicable law. Such confidentiality ensures the candid participation of staff members, Directors and Committee Members in these activities which are critically important for the evaluation and improvement of the quality of care rendered throughout the Tri-City Healthcare District (TCHD). Public officials must respect and maintain the confidentiality of all discussion, deliberations, records and information related to these activities. Such documents and information must be treated as confidential and must not be disclosed to or discussed with any person other than another Director or Committee Member without authorization by the Board or by the President/CEO.

III. PROTECTED HEALTH INFORMATION

Minimum necessary protected health information (PHI) required for Board actions may be provided to Board members. This will include access for treatment, payment, or operations. All others access must be authorized by the patient/patient representative. No re-disclosure of the PHI is allowed. Violations of this Section shall fall within the provisions of Sections VI and VII, herein.

IV. <u>LEGAL AND OTHER CONFIDENTIAL/PRIVILEGED DOCUMENTS AND INFORMATION</u>

Public officials may have access to documents and information which are confidential, private, or privileged under applicable law. Examples are documents and information related to pending litigation, personnel records and actions, and trade secrets. Such documents and information must be treated as confidential and must not be disclosed to or discussed with any person other than another Director or Committee Member without authorization by the Board or by the President/CEO. Medical staff applications and related records and information are confidential. Disclosure is prohibited without the prior written consent of the Chief of the Medical Staff or the applicant, unless specifically authorized in writing by the Board of Directors or the President/CEO.

V. <u>CLOSED SESSION DOCUMENTS AND INFORMATION</u>

Pursuant to Government Code section 54950, et seq. and other applicable law, the District is permitted to maintain the confidentiality and/or privilege of documents and information distributed, discussed, or prepared in a closed session of the Board or Committee. Such documents and information must be treated as confidential and must not be disclosed to or discussed with any person other than another Director or Committee Member without authorization by the Board. Any written materials, documents, or records distributed during the session or prior to the closed session for consideration at the session will be collected during the session and may not be removed by any Director, Committee Member, or other persons attending the session, from the session without authorization by the Board or the General Counsel.

- A. Members of the Board and other persons admitted to closed sessions of the Board or its Committees shall not make or attempt to make any audio or video recording of any portion of the closed session. They also shall not make or attempt to make any verbatim copy (whether by long hand or other method) of any confidential or privileged materials without the authorization of the Board. A verbatim copy is defined as a copy which corresponds at least approximately word for word with the closed session material or any portion thereof.
- B. It is the responsibility of any person in attendance during a closed session of the Board or its Committees who, at or after the session, notes or records his/her understanding or recollection of any matter discussed, distributed or available during the session, to maintain the confidentiality and security of the note or record. It is also that person's responsibility to refrain from discussing or disclosing the contents of any such note or record with anyone outside of a closed session of the Board or the Committee, without the authorization of the Board.
- C. This Policy applies to any recording, copy, note or other record in any form regarding any action taken, oral statement made, or confidential or privileged document or other written material discussed or distributed at or available during the closed session, including but not limited to, an overhead transparency or computer projection or audio or video playback.

D. Directors may inspect Closed Session materials in the Administrative offices subject to this Policy relating to the maintenance of confidentiality by Directors. In the Administrative offices, Directors must sign-in and sign-out, including the date and time of inspection of Closed Session materials. Directors, in reviewing the Closed Session materials, cannot take any verbatim copy (whether by long hand or other method), notes, copies, or photographs of the Closed Session materials, or bring recording devices into the Administrative offices, including but not limited to, a camera, cellphone, or other handheld electronic devices. Any materials inspected pursuant to this Section is subject to the confidentiality requirements set forth in this Policy.

VI. CONSEQUENCES OF VIOLATIONS

TCHD is entitled to undertake such actions as are deemed appropriate to ensure that the confidentiality and/or privileged status of documents and information, including a patient's protected health information (PHI), is preserved. If a Director or Committee Member is in doubt about the status of any document or any item of information, the Director shall consult the Gneral Counsel for clarification and agree to follow that direction pending consideration by the Board. Any breach of this Policy or threatened breach may subject a Director or Committee Member to disciplinary action, including public censure. Additionally, the improper use or disclosure of PHI may subject a Director or Committee Member to any or all of the civil and criminal penalties specified under HIPAA.

VII. ACKNOWLEDGMENT OF OBLIGATIONS

Each Board and Committee Member shall sign and return to the Board Secretary a copy of the attached Form acknowledging receipt of a copy of this policy and the Notice of Privacy Practice, and agreement thereto, immediately following initial assumption of office and following any material change to the policy.

VIII. <u>APPLICABILITY OF LAW</u>

This Policy and its implementation are subject to applicable state and federal laws relating to the privacy, confidentiality and/or privileged status of any District documents and information, including a patient's protected health information. Violations of this confidentiality policy may be addressed by the District by the use of such remedies as are currently available by State and Federal laws, including but not limited to, Government Code section 54963.

FORM

Tri-City Healthcare District Confidentiality Acknowledgement and Agreement

PRINT NAME OFFICE/COMMITTEE:			
persons of any confidential patient quality and peer review, and District	we personal liability for the release to unauthorized medical information, personnel information, medical trade secret information ("confidential information" result of my membership on the Board or on a		
affiliation with the District. I also a confidential information to the Di	confidential information I receive as a result of my gree that after it is no longer needed, I will return al strict for proper disposal or destruction, or I wil by shredding or equivalent means, whether the electronic or other form.		
3. I understand that my obliga continues after termination of my after	tion to maintain confidentiality under these policies filiation with the District.		
Signature	Date signed		

Reviewed by the Gov/Leg Committee: 8/10/05 Approved by the Board of Directors: 9/22/05 Reviewed by the Gov/Leg Committee: 11/8/06 Approved by the Board of Directors: 12/14/06 Reviewed by the Gov/Leg Committee: 10/10/07 Approved by the Board of Directors: 12/13/07 Reviewed by the Gov/Leg Committee: 12/01/10 Approved by the Board of Directors: 12/16/10 Reviewed by the Gov/Leg Committee: 10/12/11 Approved by the Board of Directors: 10/27/11 Reviewed by the Gov/Leg Committee: 4/01/14 Approved by the Board of Directors: 4/24/14