



**SONOMA VALLEY HEALTH CARE DISTRICT  
QUALITY COMMITTEE  
REGULAR MEETING AGENDA  
Wednesday, November 28, 2012  
5:00 p.m. Open Session  
(Closed Session will be held upon  
adjournment of the Open Session)**

**Location: Schantz Conference Room  
Sonoma Valley Hospital – 347 Andrieux Street, Sonoma CA 95476**

AGENDA ITEM	RECOMMENDATION	
<b>MISSION STATEMENT</b> <i>The mission of the SVHCD is to maintain, improve, and restore the health of everyone in our community.</i>		
<b>1. CALL TO ORDER</b>	Carruth	
<b>2. PUBLIC COMMENT SECTION</b> <i>At this time, members of the public may comment on any item not appearing on the agenda. It is recommended that you keep your comments to three minutes or less. Under State Law, matters presented under this item cannot be discussed or acted upon by the Committee at this time. For items appearing on the agenda, the public will be invited to make comments at the time the item comes up for Committee consideration. At all times please use the microphone.</i>	Carruth	
<b>3. CONSENT CALENDAR:</b> A. Prior Meeting Minutes – October 24, 2012 B. Tracking Report for Uncorrected Items	Carruth/Lovejoy	Inform/Action
<b>4. INTRODUCE NEW QUALITY COMMITTEE MEMBERS</b>	Carruth	Inform
<b>5. CONTRACT ADMINISTRATION</b>	Shannahan	Inform/Action
<b>6. ACKNOWLEDGEMENT CONCERNING CONFIDENTIAL INFORMATION</b>	Carruth	Inform/Action
<b>7. QUALITY TRAINING FOR THE BOARD AND COMMITTEES</b>	Carruth	Action
<b>8. QUALITY COMMITTEE CHARTER REVIEW FEEDBACK FROM COMMITTEE MEMBERS</b>	Carruth	Action
<b>9. QUALITY COMMITTEE REPORT TO THE BOARD FOR 2012</b>	Carruth	Inform/Action
<b>10. QUALITY COMMITTEE WORK PLAN FOR 2013</b>	Carruth	Inform/Action
<b>11. QUALITY REPORT</b>	Lovejoy	Inform
<b>12. DASHBOARD</b>	Lovejoy	Inform
<b>13. POLICIES &amp; PROCEDURES:</b> A. Adult Hypoglycemia (revisit)	Lovejoy	Action
<b>14. CLOSING COMMENTS</b>	Carruth	Inform
<b>15. ADJOURN</b>		

AGENDA ITEM	RECOMMENDATION	
<b>16. UPON ADJOURNMENT OF THE REGULAR OPEN SESSION</b>	Carruth	Inform
<b>17. CLOSED SESSION:</b> <u>Calif. Health &amp; Safety Code § 32155</u> – Medical Staff Credentialing & Peer Review Report	Smith/Amara	Inform/Action
<b>18. REPORT OF CLOSED SESSION</b>	Carruth	Inform

3.A.

MINUTES

10.24.12



**SONOMA VALLEY HEALTH CARE DISTRICT  
QUALITY COMMITTEE  
REGULAR MEETING MINUTES  
Wednesday, October 24, 2012  
Schantz Conference Room**

<b>Committee Members Present</b>	<b>Committee Members Absent</b>	<b>Community Members Present</b>	<b>Administrative Staff Present</b>
Kevin Carruth, Chair Dr. Jerome Smith Dr. Paul Amara Sharon Nevins Joel Hoffman Bob Burkhart Jane Hirsch		Dr. Howard Eisenstark	Dr. Robert Cohen, Chief Medical Officer Leslie Lovejoy, Chief Quality & Nursing Officer Lorna Gantenbein, Risk Management Manager

<b>AGENDA ITEM</b>	<b>DISCUSSION</b>	<b>CONCLUSIONS/ ACTION</b>	<b>FOLLOW-UP/ RESPONSIBLE PARTY</b>
<b>MISSION AND VISION STATEMENTS</b>	<i>The mission of the SVHCD is to maintain, improve, and restore the health of everyone in our community.</i>  <i>The vision of the SVHCD is that: SVH will be a nationally recognized, compassionate place of healing and known for excellence in clinical quality. We serve as the guide and indispensable link for our community's health care journey.</i>		
<b>1. CALL TO ORDER</b>	5:02 p.m.		
<b>2. PUBLIC COMMENT</b> <i>At this time, members of the public may comment on any item not appearing on the agenda. It is recommended that you keep your comments to three minutes or less. Under State Law, matters presented under this item cannot be discussed or acted upon by the Committee at this time. For items appearing on the agenda, the public will be invited to make comments at the time the item comes up for Committee consideration. At all times please use the microphone.</i>	There was no public comment.		
<b>3. CONSENT CALENDAR:</b> A. Prior Meeting Minutes 9.26.12 B. Tracking Report for		<b>MOTION:</b> by Nevins; seconded, to approve the Consent Calendar	

AGENDA ITEM	DISCUSSION	CONCLUSIONS/ ACTION	FOLLOW-UP/ RESPONSIBLE PARTY
Uncorrected Items		and carried. All in favor; none opposed.	
<b>4. PHYLLIS CARTER REQUEST</b>	<i>Dr. Robert Cohen</i>		
	Ms. Carter did not attend the meeting; therefore, Dr. Cohen reported that he, the Chief Quality and Nursing Officer, and the Risk Management Manager of SVH met with Ms. Carter to hear her story. Dr. Cohen assured her that the Hospital would take care of the issue and post information in the SVH website that would be educational for women regarding breast augmentation and/or reconstruction surgery after mastectomy and risks.		
<b>5. BOARD SOLICITING COMMITTEE MEMBERS</b>	<i>Kevin Carruth, Chair</i>		
	Mr. Carruth reported that the Board had been soliciting committee members for Quality, Finance, and the Citizens Bond Oversight Committees. The Board would conduct interviews on November 7, 2012. The Governance Committee had extended the deadline and would be on the November Board agenda.		
<b>6. QUALITY TRAINING FOR THE BOARD AND COMMITTEES</b>	<i>Kevin Carruth, Chair</i>		
	Mr. Carruth discussed the quality training for the Board and Quality Committee, including SVH's Chief Executive Officer, Chief Financial Officer, Chief Medical Officer, Chief Quality and Nursing Officer, Chief Human Resources Officer, and Chief of Medical Staff. This was discussed at a prior meeting and would like to discuss further on what should be done for a Board training session. How to create a baseline of understanding on commonality of language, terms, and concepts on which the Board and Committees could build.  He recommended having this discussed at next month's meeting.		
<b>7. QUALITY COMMITTEE CHARTER REVIEW AND ANNUAL REPORT TO THE BOARD</b>	<i>Kevin Carruth, Chair</i>		
	Mr. Carruth encouraged the Committee to review the Quality Committee Charter and give feedback at next month's meeting.  Ms. Nevins suggested she and Ms. Hirsch would like to contribute further information in the Charter that includes the ability of the Committee to look towards the future and be able to consider issues that are imminent and be prepared for.		

AGENDA ITEM	DISCUSSION	CONCLUSIONS/ ACTION	FOLLOW-UP/ RESPONSIBLE PARTY
<b>8. QUALITY REPORT</b>	<i>Leslie Lovejoy</i>		
	<p>Ms. Lovejoy reported the Hospital participated in the statewide disaster drill called the “Great Shake Out Part 3”, which would involve a major earthquake and loss of communication. The focus was to test communication with other agencies outside the Hospital and contact Public Health and all of the emergency responders. She also mentioned the Delivery System Reform Incentive Pool plan, which is a federally funded incentive program for Medical and the uninsured. It is part of the Affordable Care Act and the goal of the program is rewarding hospitals for improving health care in three of four projects over a three-year period of time. The plan would be submitted to CMS and if they agree, SVH would be accountable for three years, which one of those years is 2012. The first two projects that were put into plan involved the accurate access of race, ethnicity, language ability, and age in the demographics in order to capture the data through EHR.</p> <p>She announced the Leadership team received training in “Culture of Safety” at the Leadership Development Institute that took place on October 25. The focus was to build the safety initiatives that were already in place and move to the “Just Culture”, which provides transparency in terms of safety. The AHRQ Patient Safety Survey would be conducted in January 2013.</p> <p>Also, SVH received a notice from The Joint Commission of a complaint for lack of response from one department to the ICU. The suggested plans of action submitted by SVH had been accepted and The Joint Commission would not investigate further,</p>		
<b>9. POLICIES &amp; PROCEDURES:</b>	<i>Leslie Lovejoy</i>		
A. Adult Hypoglycemia	The Committee recommended the policy be amended and brought back at next month’s meeting.		
<b>10. DASHBOARD</b>	<i>Leslie Lovejoy</i>		
	<p>Ms. Lovejoy explained the performance indicators were used to create a monthly quality Dashboard. The goal was for greater transparency for the Hospital through the Board and educates the public and media.</p> <p>The recommendation from the Committee that this would be presented on a monthly basis.</p>		
<b>11. NOVEMBER AND DECEMBER MEETING DATES</b>	<i>Kevin Carruth, Chair</i>		
	Mr. Carruth announced a new meeting date for November scheduled on November 28 at 5:00 p.m. and December’s meeting scheduled on December 20 at 5:00 p.m.		

AGENDA ITEM	DISCUSSION	CONCLUSIONS/ ACTION	FOLLOW-UP/ RESPONSIBLE PARTY
<b>12. CLOSING COMMENTS</b>	<i>Kevin Carruth, Chair</i>		
	There was no closing comment.		
<b>13. ADJOURN</b>	6:20 p.m.		
<b>14. UPON ADJOURNMENT OF THE REGULAR OPEN SESSION</b>	<i>Kevin Carruth, Chair</i>		
	There was no comment.		
<b>16. REPORT OF CLOSED SESSION</b>	<i>Kevin Carruth, Chair</i>	<b>MOTION:</b> by Nevins; second by Hirsch to forward the Credentialing Report to the Board and carried. All in favor; none opposed.	

DRAFT

3.B.

# TRACKING REPORT



<b>Quality Committee</b>					
<b>Outstanding Items Log</b>					
<u>Item# &amp; Topic</u>	<u>Discussion</u>	<u>Follow-up</u>	<u>Date Due</u>	<u>Date Completed</u>	<u>Update/Comments</u>
082511-2 Central Sterile	A TJC citing regarding the potential for cross contamination of instruments. Requires physical plant structural changes in O.R.	Monthly report on progress in Quality Report until completed.	9/22/11		Completed & reported off to TJC & CDPH.
072512-1 Occupational Health & HR	CDPH returned a directed plan of action	Monthly report on progress in Quality Report until completed.	8/22/12		Work in progress; pending completion certificate.
072512-2 Dishwasher Drain	Drain pipes for diswasher in Nutritional Services	Monthly report on progress in Quality Report until completed.	8/22/12		Completed and reported off to CDPH.
072512-3	Skilled Nursing Broken Water Pipe	Monthly report on progress in Quality Report until completed.	9/15/12		Completed & report to CDPH pending.

5.

**CONTRACT  
ADMINISTRATION**



**Meeting Date:** November 28, 2012

**Prepared by:** Ellen Shannahan- Materials Management Director

**Agenda Item Title:** Contract Administration

**Recommendation:**

Per TJC and CMS standards, we are presenting the attached Contract Administration packet to the Board Quality Committee. Two reports are included which provide a synopsis of each contract housed and managed in the Materials Management Department, as well as Policy and Procedure LD8610-182 Contract Administration. All contracts meet the scope of work performance and expectations and there are no outliers for this year.

**Background:**

The Materials Management Analyst, under the supervision of the Materials Management Director, manages a contract database consisting of 103 clinical and 182 non-clinical contracts. Centralization of the contracts ensures consistency regarding the organization's oversight of care, treatment and services provided through contractual arrangements as well as ensure that contracts are authorized at the appropriate administrative level and executed in a consistent fashion throughout the hospital.

**Consequences of Negative Action/Alternative Action:**

By not having an organization policy in regard to contract administration as well as a contracts database to help manage the process, SVH could be out of compliance with the Public Contract Codes, Government Codes, and Civil Codes and TJC guidelines.

**Financial Impact:**

By not having proper procedures in place SVH could inappropriately enter into a contract that could have adverse financial impacts. Additionally, SVH could be open to negative legal ramifications.

**Selection Process and Contract History:**

N/A

**Board Committee:**

Quality Committee

**Attachments:**

Policy and Procedure LD8610-182 Contract Administration

Clinical Contracts Report

Non-Clinical Contracts Report



SUBJECT: Contract Administration	POLICY #LD8610-182
DEPARTMENT: All	PAGE 1 OF 5
APPROVED BY:	EFFECTIVE:
	REVISED: 8-23-12

**PURPOSE:**

To establish and maintain consistency regarding the organization’s oversight of care, treatment and services provided through contractual arrangements as well as ensure that contracts are authorized at the appropriate administrative level and executed in a consistent fashion throughout the hospital.

**POLICY:**

- Any contract involving a legally binding commitment between Sonoma Valley Hospital and another party, shall be prepared, reviewed, executed, and monitored in a consistent manner to ensure legal and financial viability.
- There shall be a written contractual agreement with each contract entity providing care, treatment, and service. The expectations of the contract entity, as well as the nature and scope of care, treatment, and services to be provided shall form part of the contractual agreement.
- All contracts must be approved by the Chief Financial Officer.
- Only the Chief Executive Officer has the authority to enter the hospital into contractual agreements.
- The Materials Management Contract Analyst shall insure proper review and coordination of all contracts that are housed in the Materials Management Department.
- Any services that are provided to patients via contractual agreement shall meet all applicable state and federal requirements. Contractors shall also meet Joint Commission requirements and/or other applicable regulatory body requirements, if appropriate.

**PROCEDURE:**

**Administration of Program:**

The program is administered by the Materials Management Contracts Analyst under the direction of the Director of Materials Management. The Materials Management Contracts Analyst will ensure that:



SUBJECT: Contract Administration	POLICY #LD8610-182
DEPARTMENT: All	PAGE 2 OF 5
APPROVED BY:	EFFECTIVE:
	REVISED: 8-23-12

- HIPAA language is included in the contract if clinical.
- If recommended by the CEO, legal reviews are performed to ensure applicable state and federal requirements are met.
- Insurance documentation is on file and current.
- Communication with all affected departments is maintained.
- Pertinent contract information is recorded and updated in the contracts database.
- Reviews of Contracted Services are performed.

**New Contract Initiation:**

The appropriate department manager identifies the need for a new contract. Upon receipt or development of a draft contract, the department manager will review the contract to ensure service performance guidelines and expectations are clearly defined. The department manager then completes the Flow Sheet for New Contracts (Exhibit A) located on the Intranet in the Forms Bin. The proposed contract is then sent to the Materials Management Contracts Analyst along with the completed Flow Sheet for New Contracts. The completed Flow Sheet must contain all required signatures for approval.

After the Materials Management Contract Analyst ensures the proposed contract meets standardized compliance guidelines, the contract is routed to the Director of Materials Management, Chief Financial Officer, and CEO for approval. After contract execution by the CEO, the Contracts Analyst ensures counter-execution, enters contract information into the database, files the original fully executed contract, and sends copies of the contract to the Department and Accounting Managers.

**Existing Contract Review:**

The Materials Management Contracts Analyst is responsible for sending out the Contract Review Sheet (Exhibit B) for all clinical contract service reviews annually, based on contract anniversary dates. The purpose of this review is to ensure that contract entities are providing the same level of high-quality care, treatment and service as that provided directly by the organization and that such care, treatment and service is provided in a safe and effective manner.

Contracts related to non-clinical services will be routed for reviews no less than every three years, unless requested by management.



SUBJECT: Contract Administration

POLICY #LD8610-182

DEPARTMENT: All

PAGE 3 OF 5

EFFECTIVE:

APPROVED BY:

REVISED: 8-23-12

**REFERENCE:**

TJC, California Hospital Association, HIPAA Guidelines, CHA Records Retention Guide for Health Care Providers (Eight Edition, March 2011).

Exhibit A



FLOW SHEET FOR NEW CONTRACTS

Department Director completes the following and submits this sheet to Materials along with contract:

Name of Service: \_\_\_\_\_

Nature of Service: \_\_\_\_\_

Main Contact: \_\_\_\_\_ Ph: \_\_\_\_\_

Continuous until cancelled?

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_  Yes  No

Compensation: \_\_\_\_\_

Contract Type:

- Contract Type options: Clinical Provider, Non-Clinical Provider, Education, Registry, Travelers, Medical Staff, Transfer Agreement, Administrative, Service Agreement, Consulting, Software Licensing, Equipment Rental, Property Lease.

To be completed by Materials Management

- Materials Management completion options: HIPAA Compliant, MD Ranger Percentiles (Physician Contracts Only), Reviewed by Legal, Insurance Required, Hourly, Annually, Per Diem, Service Hours.

Note: Department Director and Materials Management Director must sign prior to presenting to CEO.

Signatures and dates for Department Director, Materials Management Director, Chief Financial Officer, and President & CEO.



Exhibit B



CONTRACT REVIEW SHEET

Reviewer: \_\_\_\_\_ Complete Review by: \_\_\_\_\_

Name of Service: \_\_\_\_\_

This contract will automatically  renew  expire on: \_\_\_\_\_

Contract requires \_\_\_\_\_ days written notice to terminate.

Select at least TWO of the following:	Yes	No
Service provided has been timely, appropriate and effective	<input type="checkbox"/>	<input type="checkbox"/>
Contracted personnel have demonstrated competency in their job functions	<input type="checkbox"/>	<input type="checkbox"/>
Service has consistently met the requirements of a quality assurance program	<input type="checkbox"/>	<input type="checkbox"/>
The level of patient care has been comparable to the level of care provided by SVH staff	<input type="checkbox"/>	<input type="checkbox"/>
Direct observations of patient care has been consistently favorable	<input type="checkbox"/>	<input type="checkbox"/>
Input from patients, families, and organizational staff been consistently favorable	<input type="checkbox"/>	<input type="checkbox"/>
Input from clinical leaders and the medical staff been consistently favorable	<input type="checkbox"/>	<input type="checkbox"/>
There have been significant complaints or concerns regarding the quality of the service	<input type="checkbox"/>	<input type="checkbox"/>
There have been a significant number of negative incident reports	<input type="checkbox"/>	<input type="checkbox"/>
Contracted personnel have responded to concerns related to services rendered	<input type="checkbox"/>	<input type="checkbox"/>

Contract service has met expectations for the review period

Contract service has not met expectations for the review period

The following actions(s) have or will be taken:

- Monitoring and oversight of the contract service has been increased
- Training and consultation has been provided to the contract service
- Penalties or other remedies have been applied to the contract entity
- Terms of the agreement have been renegotiated without disruption in the continuity of patient care
- The contractual agreement has been terminated without disruption in the continuity of patient care
- Other: \_\_\_\_\_

Do you wish to continue using this service?  Yes  No

\_\_\_\_\_  
Department Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Materials Management Director

\_\_\_\_\_  
Date

# CLINICAL CONTRACTS

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**ADVANTAGE RN** Effective: 03/05/2012  
STAFFING SERVICE Expiration:

Manager: JAN PRESTON

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**AMERICAN RED CROSS** Effective: 12/08/1999  
COVERS EXCHANGE OF INFORMATION IN A DISASTER Expiration:

Manager: JACKIE LYONS

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**ANESTHESIOLOGY CONSULTANTS OF MARIN** Effective: 01/15/2009  
ANESTHESIOLOGIST AGREEMENT Expiration: 05/31/2014

Manager: ROBERT COHEN

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**AT HOME NURSING** Effective: 02/06/2003  
STAFFING SERVICE Expiration: 07/04/2013

Manager: JAN PRESTON

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**BLOOD CENTERS OF THE PACIFIC** Effective: 07/01/2011  
AGREEMENT FOR BLOOD BANK SERVICES Expiration: 06/30/2013

Manager: LOIS VALENZUELA

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**BOSTON REED COLLEGE - PHLEBOTOMY EXTERNSHIP** Effective: 07/01/2009  
EXTERNSHIP PROGRAM FOR PHLEBOTOMY TECHNICIANS Expiration:

Manager: LOIS VALENZUELA

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**BROOKS, PATRICIA - INTEGRATIVE MEDICINE** Effective: 03/01/2010  
BEHAVIORAL SERVICES Expiration: 02/27/2013

Manager: LESLIE LOVEJOY

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**CALIFORNIA ADVANCED IMAGING MEDICAL ASSOCIATES, INC.** Effective: 02/28/2005  
DIAGNOSTIC RADIOLOGY SERVICES Expiration: 12/29/2013

Manager: JACKIE LYONS

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**CALIFORNIA PACIFIC MEDICAL CENTER - STROKE TELEMEDICINE** Effective: 02/01/2010  
STROKE TELEMEDICINE Expiration: 12/31/2012

Manager: ROBERT COHEN

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**CALIFORNIA PACIFIC MEDICAL CENTER - TRANSFER AGREEMENT** Effective: 03/15/2005  
WITH SUTTER WEST BAY HOSPITALS Expiration: 12/31/2015

Manager: MARK KOBE

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**CALIFORNIA STATE UNIVERSITY, CHICO** Effective: 10/01/2008  
STUDENT NURSE PRECEPTOR PROGRAM Expiration: 02/28/2015

Manager: JAN PRESTON

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# CLINICAL CONTRACTS

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**CALIFORNIA TRANSPLANT DONOR NETWORK**

ORGAN DONATION

Effective: 06/19/2007

Expiration:

Manager: MARK KOBE

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**CARDIOVASCULAR ASSOCIATES OF MARIN AND SAN FRANCISCO**

RENTAL OF VNUS RADIOFREQUENCY GENERATOR EQUIPMENT FROM DR AQUINO

Effective: 05/12/2008

Expiration:

Manager: MICHELLE DONALDSON

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**CAREERSTAFF UNLIMITED, INC**

STAFFING SERVICE

Effective: 12/01/2005

Expiration:

Manager: DAWN KUWAHARA

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**CIRRUS HEALTHCARE, LLC - STAFFING**

STAFFING SERVICE FOR PHYSICAL AND OCCUPATIONAL HEALTH

Effective: 07/19/2010

Expiration:

Manager: DAWN KUWAHARA

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**COMPHEALTH MEDICAL STAFFING**

TEMPORARY STAFFING AGREEMENT

Effective: 05/16/2006

Expiration:

Manager: DAWN KUWAHARA

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**COMPREHENSIVE PHARMACY SERVICES (CPS)**

PHARMACY MANAGEMENT

Effective: 01/24/2011

Expiration: 01/23/2016

Manager: PAULA DAVIS

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**CONSENTRA HEALTH SERVICES, INC**

OCCUPATIONAL HEALTH AGREEMENT FOR EMPLOYEE PHYSICAL EXAMINATIONS

Effective: 04/20/2007

Expiration:

Manager: DAWN KUWAHARA

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**COUNTY OF SONOMA, DHS, RECEIVING HOSPITAL AGREEMENT**

AGREEMENT TO BE THE EMS RECEIVING HOSPITAL THROUGH 6/30/15

Effective: 06/21/2011

Expiration: 06/30/2015

Manager: ROBERT COHEN

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**COVERAGE SERVICES - AMARA, PAUL, MD**

OB &amp; GYN ON-CALL

Effective: 02/20/2008

Expiration: 04/04/2013

Manager: ROBERT COHEN

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**COVERAGE SERVICES - CLINTON, MARIANNE, MD**

PEDIATRIC ON-CALL

Effective: 07/01/2012

Expiration: 06/30/2014

Manager: ROBERT COHEN

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**COVERAGE SERVICES - DETORRES, CHARLES, MD**

PEDIATRIC ON-CALL

Effective: 05/19/2008

Expiration: 04/20/2013

Manager: ROBERT COHEN

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# CLINICAL CONTRACTS

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**COVERAGE SERVICES - MARIANO, ELPIDO, MD**

SURGERY ON-CALL

Effective: 02/01/2008

Expiration: 02/01/2013

Manager: ROBERT COHEN

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**COVERAGE SERVICES - PRICE, JAMES, MD**

SPECIALTY - CARDIOVASCULAR DISEASE

Effective: 06/02/2011

Expiration: 07/31/2014

Manager: ROBERT COHEN

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**COVERAGE SERVICES - SMITH, JEROME, MD**

PEDIATRIC ON-CALL

Effective: 02/20/2008

Expiration: 06/29/2014

Manager: ROBERT COHEN

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**COVERAGE SERVICES - SONOMA PLAZA PEDIATRICS**

PEDIATRIC ON-CALL

Effective: 04/20/2012

Expiration: 04/19/2014

Manager: ROBERT COHEN

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**COVERAGE SERVICES - VELUZ, CESAR, MD**

GENERAL SURGERY

Effective: 04/15/2008

Expiration: 02/21/2013

Manager: ROBERT COHEN

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**CRITICAL OPTIONS**

STAFFING SERVICE

Effective: 03/30/2005

Expiration: 09/26/2014

Manager: JAN PRESTON

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**CROSS COUNTRY STAFFING**

HEALTHCARE STAFFING SERVICE FOR OCC HEALTH

Effective: 06/08/2010

Expiration:

Manager: DAWN KUWAHARA

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**DIABLO VALLEY COLLEGE**

Effective: 09/01/2012

Expiration: 08/31/2015

Manager: LOIS VALENZUELA

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**FAST RESPONSE SCHOOL OF HEALTH CARE EDUCATION**

CLINICAL TRAINING AFFILIATION AGREEMENT

Effective: 07/10/2009

Expiration: 07/09/2013

Manager: MARK KOBE

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**FLEXCARE MEDICAL STAFFING**

STAFFING SERVICE

Effective: 03/14/2008

Expiration:

Manager: JAN PRESTON

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**FOOTHILL DE ANZA COLLEGE**

Effective: 07/15/2012

Expiration: 07/14/2017

Manager: JACKIE LYONS

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# CLINICAL CONTRACTS

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**HIGH TECH INSTITUTE (EDUCATION INSTITUTE)**  
EXTERNSHIPS FOR ENTRY LEVEL SURGICAL TECHS

Effective: 10/24/2002  
Expiration:

Manager: CHRIS KUTZA

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**HOSPICE BY THE BAY**  
DEVELOPMENT OF HOSPITAL'S PALLIATIVE CARE PROGRAM

Effective: 05/15/2012  
Expiration: 05/14/2013

Manager: ROBERT COHEN

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**INTELISTAF HEALTHCARE, INC. (aka MSN STAFFING)**  
STAFFING AGREEMENT

Effective: 03/03/2005  
Expiration:

Manager: JAN PRESTON

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**JOHN MUIR HEALTH - TRANSFER AGREEMENT**  
PATIENT TRANSFER AGREEMENT

Effective: 10/06/2006  
Expiration: 01/22/2015

Manager: MARK KOBE

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**LIFEWATCH**  
CARDIAC MONITORING

Effective: 04/01/2012  
Expiration:

Manager: KATHY COLE

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**LONDON HOUSE CONVALESCENT HOSPITAL**  
TRANSFER AGREEMENT

Effective: 05/11/2005  
Expiration:

Manager: MARK KOBE

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**MARIN HOSPITALIST MEDICAL GROUP, INC.**  
HOSPITALIST COVERAGE SERVICES AND MEDICAL DIRECTOR AGREEMENT

Effective: 12/01/2007  
Expiration:

Manager: ROBERT COHEN, MD

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**MARIN MEDICAL LABORATORIES**  
PATHOLOGY SERVICES & MEDICAL DIRECTOR AGREEMENT

Effective: 05/28/2011  
Expiration: 05/27/2014

Manager: ROBERT COHEN

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**MAXIM HEALTHCARE SOLUTIONS**  
STAFFING SERVICE

Effective: 04/27/2007  
Expiration:

Manager: JAN PRESTON

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**MEDEX HEALTHCARE, INC.**  
NETWORK AGREEMENT FOR OCC HEALTH REFFERALS IN RELATION TO WORKERS  
COMPENSATION

Effective: 03/07/2008  
Expiration:

Manager: DAWN KUWAHARA

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**MEDICAL DIRECTOR - CARDIOLOGY**  
JAMES PRICE, MD

Effective: 11/01/2005  
Expiration: 07/31/2014

Manager: ROBERT COHEN

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# CLINICAL CONTRACTS

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**MEDICAL DIRECTOR - HOME CARE**

WALTER PREHN, MD

Effective: 10/01/2007

Expiration: 06/27/2014

Manager: ROBERT COHEN

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**MEDICAL DIRECTOR - ICU**

DENNIS VERDUCCI, MD

Effective: 10/01/2007

Expiration: 04/24/2014

Manager: ROBERT COHEN

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**MEDICAL DIRECTOR - OB**

PAUL AMARA, MD

Effective: 10/01/2007

Expiration: 02/28/2014

Manager: ROBERT COHEN

---

**MEDICAL DIRECTOR - OCCUPATIONAL HEALTH**

JOHN ALCHEMY, MD

Effective: 06/01/2012

Expiration: 05/31/2014

Manager: DAWN KUWAHARA

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**MEDICAL DIRECTOR - PALLIATIVE CARE**

BRIAN SEBASTIAN, MD

Effective: 05/15/2012

Expiration: 05/14/2014

Manager: ROBERT COHEN

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**MEDICAL DIRECTOR - SKILLED NURSING FACILITY (1)**

CLINTON LANE, MD / CO-DIRECTOR

Effective: 02/01/2008

Expiration: 04/20/2014

Manager: ROBERT COHEN

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**MEDICAL DIRECTOR - SKILLED NURSING FACILITY (2)**

ROLF OLNESS, MD / CO-DIRECTOR

Effective: 04/20/2011

Expiration: 04/20/2014

Manager: ROBERT COHEN

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**MEDICAL DIRECTOR SUBSTITUTE 1 - OCCUPATIONAL HEALTH**

CARL SPEIZER, MD

Effective: 06/12/2012

Expiration: 06/11/2014

Manager: DAWN KUWAHARA

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**MEDICAL STAFF OFFICERS AGREEMENT, CHAIR DEPT OF MEDICINE**

DOUGLAS CAMPBELL, MD

Effective: 10/01/2007

Expiration: 06/30/2013

Manager: ROBERT COHEN

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**MEDICAL STAFF OFFICERS AGREEMENT, CHAIR DEPT SURGERY**

PAUL AMARA, MD

Effective: 10/01/2007

Expiration: 06/30/2013

Manager: ROBERT COHEN

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**MEDICAL STAFF OFFICERS AGREEMENT, PRESIDENT**

JEROME SMITH, MD

Effective: 07/01/2009

Expiration: 06/30/2013

Manager: ROBERT COHEN

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# CLINICAL CONTRACTS

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**MEDTOX LABORATORIES**

SPECIMEN TESTING FOR OCCUPATIONAL HEALTH

Effective: 03/08/2012

Expiration:

Manager: DAWN KUWAHARA

**MENDOCINO-LAKE COMMUNITY COLLEGE**

PARAMEDIC STUDENT INTERNSHIP EXPERIENCE

Effective: 03/16/2009

Expiration: 04/18/2015

Manager: MARK KOBE

**MGA HEALTHCARE**

STAFFING SERVICE

Effective: 02/24/2012

Expiration:

Manager: JAN PRESTON

**MUIRLAB**

LABORATORY SERVICES AGREEMENT

Effective: 04/01/2011

Expiration: 04/01/2016

Manager: LOIS VALENZUELA

**NAPA STATE HOSPITAL - CALIF. DEPT. OF MENTAL HEALTH**

SVH TO PROVIDE SERVICES TO NSH PATIENTS. VERBAL AGREEMENT TO CONTINUE SERVICES WHILE NEW AGREEMENT IS UNDER NEGOTIATIONS.

Effective: 07/01/2010

Expiration: 06/30/2012

Manager: RICK REID

**NAPA VALLEY COLLEGE**

NURSING STUDENT EDUCATION PROGRAM

Effective: 08/20/2001

Expiration:

Manager: PAULINE HEADLEY

**NORTH BAY EYE ASSOCIATES**

AGREEMENT TO PROVIDE SMALL INCISION CATARACT SURGERY TO PATIENTS OF SVH

Effective: 01/01/2010

Expiration:

Manager: MICHELLE DONALDSON

**NORTHERN CALIFORNIA TRANSPLANT BANK**

TISSUE DONATION

Effective: 09/11/2000

Expiration:

Manager: MARK KOBE

**ON ASSIGNMENT STAFFING SERVICES, INC.**

STAFFING SERVICE

Effective: 08/24/2007

Expiration:

Manager: JAN PRESTON

**ONWARD HEALTHCARE**

STAFFING AGREEMENT

Effective: 05/25/2004

Expiration:

Manager: JAN PRESTON

**PACIFIC UNION COLLEGE**

NURSING STUDENT AGREEMENT

Effective: 03/12/2007

Expiration:

Manager: PAULINE HEADLEY

# CLINICAL CONTRACTS

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**PER DIEM STAFFING SYSTEMS, INC.**

STAFFING AGREEMENT FOR TEMPORARY RESPIRATORY THERAPISTS

Effective: 02/01/2012

Expiration: 02/07/2015

Manager: KATHY COLE

**PETALUMA ICF-DDH, INC**

TRANSFER AGREEMENT

Effective: 09/10/2001

Expiration:

Manager: MARK KOBE

**PREFERRED HEALTHCARE**

TEMPORARY AND PERMANENT STAFFING SERVICE

Effective: 06/06/2008

Expiration:

Manager: DAWN KUWAHARA

**RCM HEALTH CARE SERVICES**

STAFFING SERVICE

Effective: 02/24/2012

Expiration:

Manager: JAN PRESTON

**REDWOOD EMPIRE SCHOOLS INSURANCE GROUP**

TESTING OCC HEALTH PROVIDES TO REDWOOD EMPIRE

Effective: 07/01/2008

Expiration: 06/30/2013

Manager: DAWN KUWAHARA

**REDWOOD REGIONAL MEDICAL GROUP**

FOR PROFESSIONAL B READING OF CHEST FILMS

Effective: 04/17/2007

Expiration:

Manager: DAWN KUWAHARA

**RESPONSE 1 MEDICAL STAFFING**

STAFFING AGREEMENT FOR NURSES

Effective: 04/10/2012

Expiration:

Manager: JAN PRESTON

**RHUDE, MARY ELLEN - PATHOLOGY TRANSCRIPTION**

PATHOLOGY TRANSCRIPTION SERVICE AGREEMENT

Effective: 03/01/2011

Expiration:

Manager: JACKIE LYONS

**RTG MEDICAL**

TEMPORARY STAFFING AGREEMENT

Effective: 07/16/2009

Expiration:

Manager: JACKIE LYONS

**RX REMOTE SOLUTIONS**

REMOTE PHARMACY SERVICES

Effective: 09/12/2012

Expiration:

Manager: CHRIS KUTZA

**SAMUEL MERRITT UNIVERSITY - PHY. THPY. EDUCATION**

PHYSICAL THERAPY EDUCATION AGREEMENT

Effective: 10/28/2009

Expiration:

Manager: DAWN KUWAHARA



# CLINICAL CONTRACTS

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**SAN JOAQUIN VALLEY COLLEGE** Effective: 10/18/2011  
EXPERIENCE FOR RESPIRATORY THERAPY PROGRAM Expiration:

Manager: KATHY COLE

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**SANTA ROSA JUNIOR COLLEGE** Effective: 07/01/2005  
NURSING STUDENT EDUCATION PROGRAM Expiration:

Manager: JAN PRESTON

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**SANTA ROSA MEMORIAL HOSPITAL - REFERENCE LAB** Effective: 05/08/2008  
AGREEMENT WITH SRMH AS REFERENCE LAB Expiration: 03/31/2015

Manager: LOIS VALENZULA

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**SANTA ROSA MEMORIAL HOSPITAL - TRANSFER AGREEMENT** Effective: 02/09/2009  
TRANSFER AGREEMENT Expiration: 03/27/2016

Manager: MARK KOBE

---

**SIERRA VALLEY CANCER REGISTRY SERVICES, INC** Effective: 12/01/2001  
CANCER REPORTING SERVICE Expiration: 10/16/2014

Manager: CELIA LENSON

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**SONOMA DEVELOPMENTAL CENTER - TRANSFER AGREEMENT** Effective: 04/15/1981  
PATIENT TRANSFER AGREEMENT. NO MONEY INVOLVED WITH CONTRACT Expiration:

Manager: MARK KOBE

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**SONOMA HEALTHCARE CENTER - TRANSFER AGREEMENT** Effective: 10/17/1994  
TRANSFER AGREEMENT Expiration:

Manager: MARK KOBE

---

**SONOMA STATE UNIVERSITY - NURSE TRAINING** Effective: 09/03/2008  
NURSING EDUCATION AGREEMENT Expiration: 09/03/2013

Manager: PAULINE HEADLEY

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**SONOMA VALLEY COMMUNITY HEALTH CENTER** Effective: 04/27/2009  
LAB AND RADIOLOGY TRANSFER AGREEMENT Expiration:

Manager: MARK KOBE

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**SPECIALTY LABORATORIES** Effective: 07/01/2007  
TESTING SERVICE Expiration:

Manager: LOIS VALENZUELA

---

**SSI - SURGICAL STAFF, INC.** Effective: 11/13/2007  
SURGERY STAFFING AGREEMENT Expiration:

Manager: MICHELLE DONALDSON

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# CLINICAL CONTRACTS

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<b>SURGISTAFF</b> TEMPORARY STAFFING FOR SURGERY	Effective: 10/12/2005 Expiration: 11/07/2013
Manager: JAN PRESTON	
<b>SUTTER MEDICAL CENTER OF SANTA ROSA - TRANSFER AGREEMENT</b> TRANSFER AGREEMENT	Effective: 06/01/2004 Expiration: 05/31/2014
Manager: MARK KOBE	
<b>SUTTER MEDICAL CENTER OF SANTA ROSA - HOSPITAL EXPERIENCE AND PRECEPTORSHIP</b> STAFF PRECEPTORSHIPS. NEW CONTRACT UNDER NEGOTIATION.	Effective: 10/15/2005 Expiration: 08/31/2012
Manager: PAULINE HEADLEY	
<b>TELEMED2U, LLC</b> AGREEMENT TO PROVIDE TELEMEDICINE CONSULTATION IN REGARDS TO INFECTIOUS DISEASES	Effective: 11/01/2010 Expiration: 02/28/2013
Manager: ROBERT COHEN, M.D.	
<b>TOURO UNIVERSITY PRECEPTORSHIP</b> PRECEPTORSHIP AGREEMENT	Effective: 07/01/2009 Expiration:
Manager: CHRIS KUTZA	
<b>UC DAVIS - PRECEPTORSHIP</b> PRECEPTORSHIP AGREEMENT FOR FAMILY NURSE PRACTITIONER AND PHYSICIAN ASSISTANT TRAINEES	Effective: 10/01/2010 Expiration:
Manager: JAN PRESTON	
<b>UC DAVIS - TELEMEDICINE</b> AGREEMENT TO PROVIDE IN-PATIENT AND OUT-PATIENT INFECTIOUS DISEASES CONSULTATION THROUGH THE USE OF TELEMEDICINE.	Effective: 06/15/2006 Expiration: 06/30/2013
Manager: ROBERT COHEN	
<b>UCSF PERINATAL/NEONATAL AGREEMENT</b> PRECEPTORSHIP AND CONSULTATION AGREEMENT	Effective: 07/01/2005 Expiration: 06/30/2019
Manager: PAULINE HEADLEY	
<b>UCSF, SCHOOL OF NURSING</b> NURSING EDUCATION AGREEMENT	Effective: 09/17/2009 Expiration: 09/16/2014
Manager: JAN PRESTON	
<b>UNIVERSITY OF SAN FRANCISCO</b> NURSING PRECEPTORSHIP	Effective: 02/16/2012 Expiration: 02/15/2014
Manager: PAULINE HEADLEY	
<b>VALLEY EMERGENCY PHYSICIANS MEDICAL GROUP, INC.</b> AGREEMENT TO PROVIDE PHYSICIAN SERVICES TO THE EMERGENCY DEPARTMENT.	Effective: 10/05/2005 Expiration: 02/28/2013
Manager: ROBERT COHEN	

# CLINICAL CONTRACTS

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**VERIHEALTH, INC**  
MEDICAL TRANSPORTATION

Effective: 12/01/2004  
Expiration:

Manager: MARK KOBE

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**V-RAD**  
SERVICE AGREEMENT FOR DIAGNOSTIC RADIOLOGY

Effective: 09/30/2008  
Expiration:

Manager: JACKIE LYONS

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**WORKWELL SYSTEMS, INC**  
AGREEMENT FOR SVH TO PROVIDE PRE-EMPLOYMENT SCREENING.

Effective: 07/01/2010  
Expiration:

Manager: DAWN KUWAHARA

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**YWCA**  
STAFF TRAINING IN REGARDS TO DOMESTIC VIOLENCE

Effective: 08/19/1988  
Expiration: 06/30/2013

Manager: MARK KOBE

# NON-CLINICAL CONTRACTS

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**3M HEALTH INFORMATION SYSTEMS**

CODING SOFTWARE LICENSES FOR MEDICAL RECORDS.

Effective: 05/30/1995

Expiration: 07/21/2015

Manager: FE SENDAYDIEGO

**4PAWS WELLNESS & LEARNING**

SOCIAL THERAPY CANINES FOR SNF

Effective: 10/20/2010

Expiration:

Manager: MELISSA EVANS

**ABBOTT LABORATORIES - RUBY CELL-DYN**

SERVICE CONTRACT FOR RUBY CELL-DYN HEMATOLOGY

Effective: 05/11/2009

Expiration: 02/10/2014

Manager: SHANNAHAN/VALENZUELA

**ABBOTT NUTRITION**

PRICING AGREEMENT: SETS &amp; SOLUTIONS

Effective: 08/19/2011

Expiration:

Manager: NANCY ANGEL

**ABILITY**

NETWORK SERVICE AGREEMENT FOR MANAGED SERVICES FOR MEDICARE

Effective: 04/01/2010

Expiration:

Manager: RICK REID

**ACCESS MEDIQUIP**

MEDICAL EQUIPMENT AGREEMENT (3RD PARTY BILLING)

Effective: 04/08/2009

Expiration:

Manager: MICHELLE DONALDSON

**ACCLAIM CREDIT TECHNOLOGIES**

ASSIGNMENT OF ACCOUNTS, COLLECTION DUTIES, LITIGATION

Effective: 08/01/2012

Expiration:

Manager: RICK REID

**ACCORD LIMITED**

CONSULTANT/FACILITATOR FOR BOARD ASSESSMENT AND RETREAT

Effective: 03/31/2011

Expiration:

Manager: KELLY MATHER

**ACCOUNTEMP**

TEMPORARY STAFFING AGREEMENT FOR ACCOUNTING PROFESSIONALS

Effective: 04/02/2012

Expiration:

Manager: COLLEEN WILSON

**AGFA SERVICE MAINTENANCE AGREEMENT**

MAINTENANCE AGREEMENT FOR IMAGING EQUIPMENT

Effective: 08/01/2008

Expiration: 07/31/2013

Manager: JACKIE LYONS

**AIR LIQUIDE BULK OXYGEN**

PROVIDE BULK OXYGEN

Effective: 12/15/2007

Expiration:

Manager: FACILITIES

## NON-CLINICAL CONTRACTS

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**ALCON LABORATORIES** Effective: 07/06/2010  
PRICING AGREEMENT: CATARACT DISPOSABLES Expiration:

Manager: ELLEN SHANNAHAN

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**ALLSCRIPTS - MISYS HEALTHCARE SOFTWARE SUPPORT** Effective: 10/03/2005  
INFORMATION SYSTEMS FOR HOME CARE Expiration:

Manager: FE SENDAYDIEGO

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**AMERICAN CHILLER SERVICE, INC** Effective: 10/23/2008  
THIS IS CHILLER SERVICE FOR THE SIEMENS 64-SLICE CT, ASSET NUMBER 006005 Expiration:

Manager: FACILITIES

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**AMERINET - GPO** Effective: 04/14/2009  
PRICING AGREEMENT: BRACCO CONTRAST MEDIA Expiration:

Manager: ELLEN SHANNAHAN

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**AMERISOURCE BERGEN** Effective: 10/01/2012  
Expiration: 09/30/2017

Manager: CHRIS KUTZA

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**ANGELICA TEXTILE SERVICES, INC** Effective: 12/10/1988  
LINEN CONTRACT Expiration:

Manager: SHERYL STARR

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**APRIA** Effective: 05/29/2012  
PRICING AGREEMENT: CONSIGNMENT WALKERS, CANES, AND CRUTCHES Expiration:

Manager: ELLEN SHANNAHAN

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**ARCHER NORRIS** Effective: 10/01/2011  
LITIGATION/ADVERSARIAL SERVICES Expiration:

Manager: KELLY MATHER

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**AT&T LOCAL AND LONG DISTANCE** Effective: 05/20/2008  
SERVICE AGREEMENT FOR ILEC ISDN Expiration: 11/07/2014

Manager: BEVERLY SEYFERT

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**AT&T MANAGED INTERNET SERVICES** Effective: 10/27/2006  
AGREEMENT FOR MANAGED INTERNET SERVICES Expiration:

Manager: FE SENDAYDIEGO

---

**BAY ALARM - OFFSITE** Effective: 08/13/2007  
ONGOING BURGLAR ALARM SERVICE AND MONITORING FOR OFFSITE FACILITIES -  
WOMEN'S HEALTH AND HOMECARE Expiration:

Manager: FACILITIES

## NON-CLINICAL CONTRACTS

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**BD - SERVICE FOR BACTEC 9120** Effective: 07/08/2012  
SERVICE AGREEMENT FOR BACTEC 9120 Expiration: 07/06/2015

Manager: PAM WILEY

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**BDM, LTD** Effective: 03/27/2012  
INTERNATIONAL DEBT COLLECTION SERVICE Expiration:

Manager: RICK REID

---

**BEST - BETA EQUIPMENT SUPPORT & TECHNOLOGY** Effective: 07/12/2007  
INSURANCE COVERAGE FOR HEALTH CARE EQUIPMENT Expiration:

Manager: ELLEN SHANNAHAN

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**BETA HEALTHCARE** Effective: 08/24/2001  
LIABILITY INSURANCE Expiration:

Manager: JEANNETTE TARVER

---

**BRACCO DIAGNOSTICS** Effective: 12/31/2007  
PRICING AGREEMENT: CONTRAST MEDIA SUPPLIES Expiration: 12/31/2014

Manager: JACKIE LYONS

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**CAHHS - JOINT UNEMPLOYMENT INSURANCE PROGRAM** Effective: 01/01/1978  
AGREEMENT TO PARTICIPATE IN CALIFORNIA HOSPITAL ASSOCIATION JOINT  
UNEMPLOYMENT INSURANCE PROGRAM Expiration:

Manager: PAULA DAVIS

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**CALIFORNIA HEALTH COLLABORATIVE** Effective: 01/01/2005  
CANCER REGISTRY Expiration:

Manager: CELIA LENSON

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**CANTRELL DRUG COMPANY** Effective: 10/18/2012  
Expiration: 12/31/2015

Manager:

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**CARDIAC SCIENCE** Effective: 08/01/2009  
Expiration: 07/31/2013

Manager: KATHY COLE

---

**CHANCELLOR CONSULTING GROUP, INC.** Effective: 06/03/2011  
ASSESSMENT OF THE CURRENT HEALTH PLAN AGREEMENTS Expiration:

Manager: RICK REID

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**CINGULAR WIRELESS, LLC - ANTENNA LEASE** Effective: 01/27/1993  
LEASE AGREEMENT FOR CINGULAR TO UTILIZE SVH ROOFTOP FOR CELLULAR  
EQUIPMENT Expiration: 08/31/2013

Manager: FACILITIES

## NON-CLINICAL CONTRACTS

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**CINTAS - DOCUMENT SHREDDING**  
DOCUMENT SHREDDING AGREEMENT

Effective: 06/01/2011  
Expiration: 06/01/2014

Manager: SHERYL STARR

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**CINTAS - SCRAPER MATS**

Effective: 09/01/2012  
Expiration: 08/31/2015

Manager: SHERYL STARR

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**COMCAST, GUEST INTERNET SVCS.**  
INTERNET ACCESS

Effective: 01/10/2008  
Expiration:

Manager: FE SENDAYDIEGO

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**COMCAST, INTERNET SERVICES**  
INTERNET ACCESS

Effective: 05/04/2006  
Expiration:

Manager: FE SENDAYDIEGO

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**COMMERCIAL ENERGY OF CALIFORNIA**  
NATURAL GAS PURCHASE AGREEMENT

Effective: 02/01/2009  
Expiration: 06/30/2013

Manager: FACILITIES

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**CONMED LINVATEC**  
PRICING AGREEMENT: SERVICE PROGRAM

Effective: 12/10/2009  
Expiration:

Manager: ELLEN SHANNAHAN

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**COOK PAGING**  
PAGER SERVICE

Effective: 12/10/2007  
Expiration:

Manager: BEVERLY SEYFERT

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**COSCO FIRE PROTECTION**  
INSPECT AND TEST FIRE EQUIPMENT FOUR TIMES A YEAR.

Effective: 03/01/2012  
Expiration:

Manager: FACILITIES

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**COSS, KEVIN**  
CONTRACT CONSULTING

Effective: 06/26/2012  
Expiration: 08/16/2013

Manager: RICK REID

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**COUNTY OF SONOMA, DHS, EMERGENCY PLANNING & PREPAREDNESS AGREEMENT**  
MOU TO COLLABORATE WITH OTHER HEALTH ORGANIZATIONS, THE DHS, EMS AND COUNTY OF SONOMA IN THE EVENT OF A DISASTER.

Effective: 11/15/2005  
Expiration: 06/29/2013

Manager: MARK KOBE

---

**DANIELS SHARPSMART**  
MEDICAL WASTE DISPOSAL FOR SHARPS

Effective: 06/01/2011  
Expiration: 06/01/2014

Manager: SHERYL STARR

## NON-CLINICAL CONTRACTS

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**DELTA DENTAL OF CALIFORNIA** Effective: 01/01/2007  
DENTAL HEALTH PLAN FOR SVH EMPLOYEES Expiration: 12/31/2012

Manager: PAULA DAVIS

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**DEPUY ORTHOPAEDICS, INC** Effective: 11/01/2008  
PRICING AGREEMENT Expiration: 11/21/2014

Manager: ELLEN SHANNAHAN

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**DEZEMBER, ROBIN** Effective: 04/18/2011  
LEGAL CONSULTING IN RESPECT TO PATIENTS OF NAPA STATE HOSPITAL Expiration:

Manager: KELLY MATHER

---

**DIAGNOSTICA STAGO, INC** Effective: 02/12/2009  
ONE YEAR SERVICE AGREEMENT Expiration: 02/11/2013

Manager: VALENZUELA/SHANNAHAN

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**DIGNITY HEALTH** Effective: 12/01/2011  
AFFILIATE AGREEMENT FOR PREMIER PURCHASING Expiration:

Manager: RICK REID

---

**DISCOVERY OFFICE SYSTEMS** Effective: 07/02/2009  
PRICING AGREEMENT: PARTS, LABOR, DRUM, DEVELOPER AND TONER FOR THE KIP/KIP  
3100 Expiration:

Manager: FACILITIES

---

**DIVERSIFIED HEALTHCARE RESOURCES, INC.** Effective: 05/16/2011  
MEDI-CAL AND GOVERNMENT PROGRAM ELIGIBILITY Expiration: 05/15/2013

Manager: RICK REID

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**EMPIRE ELEVATOR** Effective: 03/30/2001  
ELEVATOR REPAIR CONTRACT Expiration: 12/31/2012

Manager: FACILITIES

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**EXIT-WRITER** Effective: 03/14/2008  
SOFTWARE LICENSE Expiration: 03/14/2014

Manager: FE SENDAYDIEGO

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**FIRST AMERICAN LEASING** Effective: 08/23/2011  
MASTER LEASE FOR X-RAY ROOM/CARESTREAM Expiration: 08/22/2016

Manager: RICK REID

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**FIRST FINANCIAL HEALTHCARE SOLUTIONS** Effective: 04/12/2011  
MASTER LEASE AGREEMENT FOR ELECTRONIC HEALTH RECORDS Expiration: 03/31/2014

Manager: RICK REID

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## NON-CLINICAL CONTRACTS

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**FORT DOCS**

RECORD MANAGEMENT SERVICES

Effective: 07/01/2008

Expiration: 07/01/2013

Manager: CELIA LENSON

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**GE HEALTHCARE FINANCIAL SERVICES - LOAN**

LOAN

Effective: 03/04/2010

Expiration: 03/03/2016

Manager: JEANNETTE TARVER

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**GE HEALTHCARE FINANCIAL SERVICES - SECURED LOAN**

SECURED LOAN

Effective: 09/07/2010

Expiration: 09/06/2013

Manager: RICK REID

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**GE SERVICE - ANESTHESIA**

SERVICE OF ANESTHESIA MACHINES

Effective: 01/01/2008

Expiration: 12/31/2013

Manager: FACILITIES

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**GE SERVICE - ANESTHESIA MACHINES**

SERVICE AGREEMENT FOR DATEX-OHMEDA SERVICE ANESTHESIA MACHINES

Effective: 01/01/2011

Expiration: 12/31/2014

Manager:

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**GE SERVICE - C-ARM 9900**

5 YR SERVICE AGREEMENT FOR C-ARM 9900

Effective: 06/17/2011

Expiration: 06/16/2017

Manager: JACKIE LYONS

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**GE SERVICE - C-ARM ULTIMACARE**

ULTIMACARE WITH GLASS SERVICE CONTRACTS FOR C-ARMS 9800 &amp; 9900

Effective: 07/19/2010

Expiration:

Manager: JACKIE LYONS

---

**GE SERVICE - MOBILE MRI**

SERVICE CONTRACT FOR MOBILE MRI VAN

Effective: 07/06/2011

Expiration: 07/05/2018

Manager: JACKIE LYONS

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**GEMINI DIVERSIFIED SERVICES, INC.**

CREDENTIAL VERIFICATION SERVICE

Effective: 09/19/2011

Expiration:

Manager: LESLIE LOVEJOY

---

**GERBER LIFE INSURANCE CO. (VISION CARE)**

VISION CARE INSURANCE FOR EMPLOYEES

Effective: 01/01/2010

Expiration: 12/31/2012

Manager: RAYLENE WEST

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**GERSTMAN, PHYLLIS, RHIA, CCS**

MEDICAL RECORDS CODER

Effective: 02/21/2000

Expiration: 10/31/2013

Manager: CELIA LENSON

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## NON-CLINICAL CONTRACTS

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**GUARDIAN BIOMEDICAL SERVICES**

CONSULTANT AGREEMENT FOR PREVENTATIVE MAINTENANCE INSPECTION OF MEDICAL EQUIPMENT

Manager: FACILITIES

Effective: 08/01/2005

Expiration:

**HAROLD WELLS ASSOC., INC - APC UPS SYSTEM**

SERVICE AGREEMENTS FOR: UPS IN SERVER ROOM AND GALAXY 4000

Manager: FE SENDAYDIEGO

Effective: 09/10/2009

Expiration: 11/02/2013

**HEALTH SERVICES ADVISORY GROUP (HSAG) - HOMECARE**

REVIEW ORGANIZATION USED BY MEDICARE TO REVIEW HOSPITAL/SNF/HOMECARE CHARGES FOR MEDICARE PATIENTS

Manager: MARK KOBE

Effective: 11/24/2008

Expiration:

**HEALTHCARE ACADEMIES, LLC**

DEVELOPER OF RESEARCH, PUBLICATIONS, AND SERVICES

Manager: MARNI RICHARDS

Effective: 12/13/2011

Expiration: 12/12/2014

**HEALTHSTREAM**

MASTER SERVICE AGREEMENT FOR LEARNING CENTER LICENSES AND SOFTWARE

Manager: PAULA DAVIS

Effective: 03/10/2011

Expiration: 03/10/2014

**HOLOGIC, INC. - FLUOROSCAN**

OR X-RAY EQUIPMENT SERVICE PLAN

Manager: JACKIE LYONS

Effective: 01/22/2008

Expiration: 02/06/2015

**HONEYWELL INC**

HVAC TEMPERATURE CONTROL MAINTENANCE

Manager: FACILITIES

Effective: 09/11/1992

Expiration:

**HOSPIRA WORLDWIDE, INC.**

PRICING AGREEMENT

Manager: ELLEN SHANNAHAN

Effective: 09/15/2009

Expiration: 07/31/2014

**HUNTLEIGH HEALTHCARE**

PRICING AGREEMENT: ARJOHUNTLEIGH INTERMITTANT PNEUMATIC COMPRESSION (IPC) PRODUCTS

Manager: ELLEN SHANNAHAN

Effective: 05/15/2009

Expiration: 05/14/2014

**ICAD, INC. MAMMO SERVICE AGREEMENT**

DIAMOND SERVICE PLAN AGREEMENT FOR "TOTAL LOOK" (AT SVH) AND "SECOND LOOK" (AT WOMEN'S CENTER)MAMMOGRAPHY.

Manager: JACKIE LYONS

Effective: 10/21/2009

Expiration: 10/20/2013

**IDEA CONSULTING GROUP**

SOFTWARE LICENSE AND MAINTENENCE

Manager: JEANNETTE TARVER

Effective: 01/29/2009

Expiration:

## NON-CLINICAL CONTRACTS

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**IMPLANTIUM, LLC** Effective: 12/20/2007  
SUPPLIER OF SURGICAL IMPLANTS (SPINAL) Expiration: 12/20/2014

Manager: MICHELLE DONALDSON

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**INFO STOR, INFORMATION STORAGE CENTERS INC.** Effective: 09/24/2003  
STORAGE OF IS FILES Expiration:

Manager: FE SENDAYDIEGO

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**INTEGRITY DOCUMENT SOLUTIONS, INC** Effective: 11/01/2010  
AGREEMENT TO PROVIDE SVH WITH PERSONNEL TO PERFORM CLERICAL DUTIES IN REGARDS TO RELEASE OF INFORMATION REQUESTS (ROI) Expiration: 10/31/2013

Manager: CELIA LENSON

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**INTERACTIVATION HEALTH NETWORKS** Effective: 04/01/2010  
ACCESS TO THE PATIENT CHANNEL OFFERING HEALTH AND WELLNESS PROGRAMMING Expiration: 03/31/2015

Manager: MARK KOBE

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**IVANTAGE HEALTH ANALYTICS, INC.** Effective: 09/01/2012  
Expiration: 08/31/2014

Manager: KELLY MATHER

---

**JOHNSON & JOHNSON - STERRAD LEASE** Effective: 07/02/2011  
TWO YEAR SERVICE AGREEMENT OR STERRAD STERILIZATION SYSTEM Expiration: 07/01/2013

Manager: MICHELLE DONALDSON

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**JOURNAL WATCH** Effective: 02/10/2011  
MASSACHUSETTS MEDICAL SOCIETY WEBSITE SUBSCRIPTION AGREEMENT Expiration: 02/09/2013

Manager: RICK REID

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**JTEC HEALTHCARE CONSTRUCTION MANAGEMENT** Effective: 03/26/2009  
CONSTRUCTION MANAGEMENT: UTILITY PLANT, HVAC, MED & IS WIRING Expiration:

Manager: KELLY MATHER

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**KENTFIELD HOSPITAL** Effective: 08/01/2012  
Expiration: 07/30/2014

Manager: KELLY MATHER

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**KMA ASSOCIATES** Effective: 07/01/1996  
AGREEMENT TO PROVIDE DRG CODING AUDITS FOR MEDICARE PATIENTS Expiration:

Manager: CELIA LENSON

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**KRONOS, INC.** Effective: 12/01/2007  
MASTER LEASE AGREEMENT FOR WORKFORCE TIMEKEEPER Expiration: 02/09/2014

Manager: FE SENDAYDIEGO

## NON-CLINICAL CONTRACTS

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**KUEBLER, MELINDA - RADIOLOGY TRANSCRIPTION**  
AGREEMENT TO PROVIDE RADIOLOGY TRANSCRIPTION

Effective: 12/11/2007  
Expiration:

Manager: JACKIE LYONS

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**LABOR COMPLIANCE SPECIALISTS - CONSULTING**  
LABOR COMPLIANCE CONSULTING FOR FACILITY UPGRADE PROJECT

Effective: 12/01/2011  
Expiration: 08/04/2013

Manager: KELLY MATHER

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**LOVING ANIMALS PROVIDING SMILES (LAPS)**  
PET THERAPY FACILITY AGREEMENT

Effective: 03/14/2011  
Expiration:

Manager: MELISSA EVANS

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**MARIN GENERAL HOSPITAL - AFFILIATION**  
MANAGEMENT AND AFFILIATION AGREEMENT BETWEEN SVH AND MGH

Effective: 05/12/2011  
Expiration:

Manager: KELLY MATHER

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**MARIN GENERAL HOSPITAL - ANCILLARY SERVICES**  
COVERED SERVICES FOR MARIN EMPLOYEE MEMBERS

Effective: 01/01/2012  
Expiration:

Manager: KELLY MATHER

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**MARIN IPA (MIPA)**  
AGREEMENT FOR MANAGEMENT SERVICES PROVIDED TO SVH FOR NAPA STATE  
HOSPITAL PATIENTS

Effective: 09/01/2010  
Expiration:

Manager: DR. ROBERT COHEN

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**MCKESSON - VOLUME II PARAGON**  
CONTRACT SUPPLEMENT FOR PARAGON SOFTWARE

Effective: 12/21/2001  
Expiration:

Manager: FE SENDAYDIEGO

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**MCKESSON - VOLUME IV OR SCHEDULE/CHARGES**  
CONTRACT SUPPLEMENT FOR OR SCHEDULING AND CHARGING (INCLUDES DE LAGE  
LANDEN LEASE)

Effective: 09/09/2010  
Expiration: 09/08/2015

Manager: FE SENDAYDIEGO

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**MCKESSON - VOLUME V CCMD/CERMe**  
MASTER AGREEMENT FOR SOFTWARE LICENSES FOR CAREENHANCE CLINICAL  
MANAGEMENT (CCMS) AND CAREENHANCE REVIEW MANAGER ENTERPRISE (CERMe)

Effective: 03/28/2011  
Expiration:

Manager: LESLIE LOVEJOY

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**MCKESSON - VOLUME VI ELECTRONIC HEALTH RECORDS**  
INCLUDES FIRST FINANACIAL MASTER LEASE AGREEMENT AND MED ONE EQUIPMENT  
LEASE AGREEMENT

Effective: 04/12/2011  
Expiration: 03/31/2014

Manager: FE SENDAYDIEGO

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**MCKESSON - VOLUME VII CITRIX SERVICE**  
CITRIX SERVICE MAINTENANCE - SYSTEM CARE CONNECT 2000 BASIC

Effective: 12/12/2011  
Expiration:

Manager: FE SENDAYDIEGO

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## NON-CLINICAL CONTRACTS

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**MCN HEALTHCARE - ELLUCID POLICY MANAGER**

Effective: 03/17/2011

SOFTWARE LICENSES: ELLUCID POLICY MANAGER AND LIBRARY, AND STAY ALERT EMAIL

Expiration: 03/16/2014

Manager: LESLIE LOVEJOY

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**MD BUYLINE**

Effective: 10/27/2009

BENCHMARKING SERVICE FOR CAPITAL EQUIPMENT

Expiration: 12/31/2015

Manager: ELLEN SHANNAHAN

---

**MD RANGER INC.**

Effective: 01/26/2011

SUBSCRIPTION FOR COMPENSATION BENCHMARKING PHYSICIANS

Expiration:

Manager: RICK REID

---

**MED ASSETS NET REVENUE SYSTEMS (ACCURO)**

Effective: 01/31/2008

MEDICAL CODING SUBSCRIPTION

Expiration: 01/04/2013

Manager: RICK REID

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**MEDASSETS**

Effective: 03/20/2006

PRICING AGREEMENT: WOUND CLOSURE AND ENDO-MECHANICAL PRODUCTS

Expiration:

Manager: ELLEN SHANNAHAN

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**MEDISCRIBES, INC.**

Effective: 08/31/2010

MEDICAL TRANSCRIPTION SERVICE USED BY MEDICAL RECORDS

Expiration: 08/30/2013

Manager: CELIA LENSON

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**MEDTRONIC NEUROLOGICAL - PRICING AGREEMENT**

Effective: 06/15/2009

PRICING AGREEMENT: SPINAL CORD STIMULATION PRODUCTS

Expiration: 07/30/2014

Manager: ELLEN SHANNAHAN

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**MOSS-ADAMS LLP**

Effective: 09/12/2011

AUDITING THE 6/30/11 BALANCE SHEET

Expiration:

Manager: RICHARD REID, CFO

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**MUTUAL OF OMAHA - DISABILITY INSURANCE**

Effective: 01/01/2011

LONG TERM DISABILITY INSURANCE FOR SVH EMPLOYEES. INCLUDES BASIC AND ENANCED OPTIONS.

Expiration:

Manager: RAYLENE WEST

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**NATIONAL DISASTER MEDICAL SYSTEM (NDMS)**

Effective: 02/11/2002

MOA FOR DEFINITIVE MEDICAL CARE IN THE EVENT OF A NATIONAL DISASTER

Expiration: 11/30/2016

Manager: MARK KOBE

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**NAVISITE, INC**

Effective: 04/12/2005

EMAIL PROVIDER

Expiration: 12/01/2013

Manager: FE SENDAYDIEGO

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## NON-CLINICAL CONTRACTS

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**NEARTERM CORPORATION** Effective: 02/16/2012  
TO PROVIDE AN INTERIM BUSINESS OFFICE DIRECTOR / PATIENT ACCOUNTING MANAGER Expiration:

Manager: RICK REID

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**NOVASURE EQUIPMENT LEASE - AMARA** Effective: 04/01/2012  
EQUIPMENT LEASE FOR NOVASURE Expiration: 03/31/2013

Manager: MICHELLE DONALDSON

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**NUTRICOPIA** Effective: 06/01/2005  
DIETETIC CONSULTANT SERVICES Expiration: 01/31/2013

Manager: MARY FINKENBINDER

---

**OCCUPATIONAL HEALTH : FIRST HEALTH** Effective: 09/11/1989  
MEDICAL PROVIDER NETWORK Expiration:

Manager: DAWN KUWAHARA

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**OCS HOMECARE** Effective: 10/22/2009  
PATIENT SATISFACTION SURVEYS Expiration:

Manager: BARBARA LEE

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**OLYMPUS AMERICA, INC** Effective: 10/01/2006  
LEASE OF ENDOSCOPIC EQUIPMENT Expiration: 12/21/2013

Manager: MICHELLE DONALDSON

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**OPTIMAL PHONE INTERPRETERS** Effective: 04/16/2008  
LANGUAGE INTERPRETATION SERVICES Expiration:

Manager: LISA DUARTE

---

**ORKIN SERVICES OF CALIFORNIA, INC.** Effective: 12/15/2011  
PEST CONTROL Expiration: 12/31/2012

Manager: FACILITIES

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**ORTHO CLINICAL - VITROS 5600/SUPPLY - PURCHASING AGREEMENT** Effective: 07/13/2009  
PRICING AGREEMENT: VITROS 5600 SUPPLIES Expiration: 11/20/2013

Manager: ELLEN SHANNAHAN

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**OWENS & MINOR DISTRIBUTION, INC.** Effective: 05/01/2009  
DISTRIBUTION SERVICES Expiration: 02/28/2017

Manager: ELLEN SHANNAHAN

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**PACIFIC BIOMED** Effective: 02/01/2008  
MAINTENANCE AGREEMENT FOR VENTILATOR SERVICE Expiration: 06/13/2013

Manager: KATHY COLE

## NON-CLINICAL CONTRACTS

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**PALM DRIVE HOSPITAL** Effective: 07/01/2012  
SHARED SERVICES AGREEMENT Expiration:

Manager: KELLY MATHER

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**PAPERLESS PAY CORPORATION** Effective: 05/30/2012  
WEB SERVICE FOR ELECTRONIC PAY STUBS Expiration: 05/29/2015

Manager: JEANNETTE TARVER

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**PARA (PETER A RIPPER & ASSOCIATES)** Effective: 03/15/2004  
SERVICE AGREEMENT TO PROVIDE ASSISTANCE WITH ANALYSIS OF FINANCIAL OPERATIONS Expiration:

Manager: RICK REID

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**PETRAK & ASSOCIATES, INC.** Effective: 12/01/2011  
HEALTHCARE REIMBURSEMENT CONSULTING Expiration:

Manager: RICK REID

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**PhDX SYSTEMS, INC.** Effective: 01/14/2011  
SUBSCRIPTION AND SERVICE AGREEMENT FOR PHYSICIAN RESEARCH NETWORK - KNEE AND HIP ARTHROPLASTY. Expiration:

Manager: ROBERT COHEN

---

**PHILIPS MEDICAL SYSTEMS** Effective: 08/18/2006  
LICENSE AND SERVICE OF PHILIPS SYSTEM FOR VIEWING AND ARCHIVING MEDICAL IMAGES Expiration: 08/18/2013

Manager: JACKIE LYONS

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**PIRAMAL** Effective: 06/03/2011  
LEASE AGREEMENT FOR ANESTHESIA VAPORIZERS Expiration: 06/02/2014

Manager: CHRIS KUTZA

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**PITNEY BOWES - POSTAGE METER** Effective: 06/01/2006  
MAINTENANCE ON DIGITAL MAILING SYSTEM #PB DM 500 Expiration: 04/25/2017

Manager: MARNI RICHARDS

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**PLANTS PLUS** Effective: 03/17/2009  
RENTAL AND MAINTENANCE AGREEMENT FOR PLANTS IN THE LOBBY. Expiration: 03/01/2013

Manager: ELLEN SHANNAHAN

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**PRAXAIR HEALTHCARE SERVICES** Effective: 01/15/2007  
PRODUCT SUPPLY AGREEMENT FOR MEDICAL GASES Expiration:

Manager: FACILITIES

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**PRESS GANEY** Effective: 09/20/2010  
SHORT TERM CONTRACT FOR MEASUREMENT AND IMPROVEMENT SERVICES IN REGARDS TO SVH EMPLOYEES Expiration: 12/31/2013

Manager: PAULA DAVIS

## NON-CLINICAL CONTRACTS

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**PRIMA MEDICAL FOUNDATION - FUNDING AGREEMENT**

FUNDING AGREEMENT

Effective: 03/01/2011

Expiration:

Manager: KELLY MATHER

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**PRIORITY INTEGRATED MARKETING**

SERVICE AGREEMENT FOR MARKETING, ADVERTISING, SIGNAGE AND WEBSITE DEVELOPMENT

Effective: 05/20/2011

Expiration:

Manager: KELLY MATHER

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**PROPERTY LEASE 1151 BROADWAY, SONOMA**

HOME CARE OFFICE LEASE

Effective: 11/01/2005

Expiration:

Manager: BARBARA LEE

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**PROPERTY LEASE 19312 SONOMA HWY**

PROPERTY LEASE FOR 19312 SONOMA HWY FOR PT AND PATIENT ACCT.

Effective: 04/12/2011

Expiration: 04/11/2016

Manager: KELLY MATHER

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**PROPERTY LEASE 246 PERKINS ST., SONOMA**

WOMEN'S HEALTH & WELLNESS

Effective: 05/01/2008

Expiration: 05/01/2013

Manager: JACKIE LYONS

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**PROPERTY LEASE 651 FIRST STREET WEST**

PROPERTY LEASE FOR 651 FIRST STREET WEST SUITES H,J & L

Effective: 03/01/2011

Expiration: 02/28/2015

Manager: KELLY MATHER

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**PROPERTY LEASE SOUTH LOT**

LEASE FOR THE SOUTH PARKING LOT.

Effective: 09/01/2009

Expiration: 08/31/2013

Manager: KELLY MATHER

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**PROVATION - WOLTERS KLUWER HEALTH, INC.**

SUBSCRIPTION FOR PROVATION PHYSICIAN ORDER SETS FROM WOLTER KLUWER HEALTH. INCLUDES MASTER LEASE AGREEMENT WITH CREEKRIDGE CAPITAL

Effective: 03/31/2011

Expiration: 03/30/2016

Manager: ROBERT COHEN

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**PROVOX / ATRIX TECHNOLOGIES**

SOFTWARE SUPPORT AND MAINTENENCE AGREEMENT

Effective: 10/01/2001

Expiration: 04/30/2013

Manager: FE SENDAYDIEGO

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**PYXSIS - CAREFUSION**

MEDICATION DELIVERY SYSTEM MASTER SUPPORT AGREEMENT

Effective: 09/14/2007

Expiration: 03/31/2014

Manager: CINDY LAI

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**REACH IPS**

COLD SITE DATE STORAGE ASSESSMENT

Effective: 06/20/2012

Expiration:

Manager: RICK REID

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## NON-CLINICAL CONTRACTS

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**REDWOOD MEDNET, INC.** Effective: 06/30/2011  
HEALTH INFORMATION EXCHANGE SERVICE Expiration:

Manager: FE SENDAYDIEGO

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**RELAYHEALTH - ePREMIS** Effective: 09/30/2009  
CLAIMS MANAGEMENT CONTRACT Expiration: 09/29/2014

Manager: JEANNETTE TARVER

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**SEMPERMED USA, INC.** Effective: 01/01/2008  
PRICING AGREEMENT: SEMPERMED PRODUCTS THROUGH OWENS & MINOR Expiration:

Manager: ELLEN SHANNAHAN

---

**SEVENEX GROUP, THE** Effective: 10/15/2012  
Expiration: 04/14/2015

Manager: RICK REID

---

**SIEMENS MEDICAL SOL. - ACUSON SC2000** Effective: 06/08/2011  
GOLD SERVICE CONTRACT FROM END OF WARRANTY (6/8/2012) Expiration: 06/08/2016

Manager: JACKIE LYONS

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**SIEMENS MEDICAL SOL.- 64 CT** Effective: 02/25/2008  
SUPPORT SERVICES Expiration: 01/31/2014

Manager: JACKIE LYONS

---

**SIEMENS MEDICAL SOL.- MAMMO/SERVICE** Effective: 09/26/2009  
GOLD CONTRACT FOR ASSET # 106001 Expiration: 09/25/2014

Manager: JACKIE LYONS

---

**SIEMENS MEDICAL SOL.- MAMMOGRAPHY** Effective: 10/30/2008  
MASTER LEASE AGREEMENT FOR MAMMOGRAPHY LASER IMAGER Expiration: 10/30/2013

Manager: JACKIE LYONS

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**SIEMENS MEDICAL SOL.- RADIOLOGY INFO SYSTEM** Effective: 08/18/2006  
CONTRACT FOR RADIOLOGY INFORMATION SYSTEMS Expiration:

Manager: JACKIE LYONS

---

**SODEXO** Effective: 10/04/2010  
MANAGEMENT AGREEMENT FOR SODEXO TO MANAGE AND OPERATE THE AREAS OF  
PLANT OPERATIONS, ENVIRONMENTAL SERVICES AND NUTRITION. Expiration: 10/03/2015

Manager: KELLY MATHER

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**SOFTCHOICE** Effective: 08/11/2011  
MASTER SERVICES AGREEMENT FOR CITRIX CONSULTING Expiration: 09/21/2013

Manager: FE SENDAYDIEGO

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## NON-CLINICAL CONTRACTS

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**SONOMA COUNTY DEPARTMENT OF CHILD SUPPORT SERVICES- PATERNITY PROGRAM**  
TO PROVIDE UNMARRIED MOTHERS AND FATHERS A DECLARATION OF PATERNITY.

Effective: 01/01/1995  
Expiration: 09/30/2014

Manager: CELIA LENSON

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**SONOMA COUNTY OFFICE OF EDUCATION (SCOE)**  
STUDENT VOCATIONAL TRAINING

Effective: 08/24/1999  
Expiration: 06/30/2013

Manager: PAULA DAVIS

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**SONOMA VALLEY GREETING SERVICE**  
INFORMATION REGARDING SVH TO NEW RESIDENTS IN SONOMA

Effective: 08/07/2008  
Expiration:

Manager: HARMONY PLENTY

---

**SPACELABS - SOFTWARE SUPPORT**  
SOFTWARE SUPPORT AGREEMENT FOR ICS

Effective: 07/15/2011  
Expiration: 06/30/2013

Manager: FE SENDAYDIEGO

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**STANLEY SECURITY SOLUTIONS**  
SECURITY

Effective: 08/04/2010  
Expiration:

Manager: FACILITIES

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**STUDER GROUP, LLC**  
LEADERSHIP DEVELOPMENT CONSULTATION AND SOFTWARE

Effective: 03/01/2011  
Expiration: 02/28/2014

Manager: KELLY MATHER

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**SUTURE EXPRESS**  
PRICING AGREEMENT: SUTURES

Effective: 04/27/2010  
Expiration:

Manager: ELLEN SHANNAHAN

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**THOMSON REUTERS - KINETIDEX SUBSCRIPTION**  
KINETIDEX CD WIN A SYSTEM SUBSCRIPTION

Effective: 09/30/2011  
Expiration: 09/29/2013

Manager: FE SENDAYDIEGO

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**TOSHIBA / ZOOM IMAGING SOLUTIONS, INC**  
LEASE CONTRACT FOR COPIERS

Effective: 11/15/2008  
Expiration: 10/31/2013

Manager: ELLEN SHANNAHAN

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**TRANSUNION - OMNI SPOT CHECK**  
SERVICE FOR MED DATA / OMNI SPOT CHECK SYSTEM

Effective: 02/24/2006  
Expiration:

Manager: MARNI RICHARDS

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**TRILOGI, INC.**  
ACCOUNT RECOVERY SERVICES

Effective: 01/15/2012  
Expiration:

Manager: RICK REID

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## NON-CLINICAL CONTRACTS

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**TRISTAR** Effective: 01/01/1997  
ADMINISTRATION CONTRACT FOR WORKERS COMPENSATION Expiration: 06/30/2014

Manager: PAULA DAVIS

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**TULLY-WIHR** Effective: 07/11/2007  
PRICING AGREEMENT: FORMS Expiration:

Manager: ELLEN SHANNAHAN

---

**UCDAVIS -TELEHEALTH EQUIPMENT** Effective: 10/06/2011  
eHEALTH EQUIPMENT LOAN AGREEMENT Expiration: 06/30/2013

Manager: MARK KOBE

---

**UNITED HEALTHCARE - HMO A** Effective: 01/01/2010  
EMPLOYEE HEALTH PLAN - HMO A Expiration: 12/31/2012

Manager: PAULA DAVIS

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**UNITED HEALTHCARE - HMO B** Effective: 01/01/2010  
EMPLOYEE HEALTH PLAN - HMO B Expiration: 12/31/2012

Manager: PAULA DAVIS

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**UNITED HEALTHCARE INSURANCE CO. (PPO)** Effective: 01/01/2010  
EMPLOYEE HEALTH INSURANCE (PPO) - PART OF PACIFICARE CONTRACT Expiration: 12/31/2012

Manager: PAULA DAVIS

---

**UNIVERSAL PROTECTION SERVICE** Effective: 02/01/2012  
SECURITY PERSONNEL Expiration: 01/31/2013

Manager: FACILITIES

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**UP-TO-DATE, INC** Effective: 05/01/2010  
CLINICAL SUBSCRIPTION DATABASE Expiration: 04/30/2013

Manager: ROBERT COHEN

---

**VERA BERG & ASSOCIATES** Effective: 10/01/2011  
AGREEMENT FOR FUNDRAISING CAMPAIGN DIRECTOR Expiration: 07/06/2013

Manager: KELLY MATHER

---

**VERATHON - WARRANTY EXTENSION** Effective: 02/29/2012  
GVL - LARGE & MEDIUM BLADE PREMIUM FOUR YEAR TCC WARRANTY EXTENSION Expiration: 02/28/2013

Manager: MICHELLE DONALDSON

---

**WALDRON LANDSCAPING** Effective: 10/01/2007  
AGREEMENT FOR GROUNDS LANDSCAPING MAINTENANCE Expiration:

Manager: FACILITIES

## NON-CLINICAL CONTRACTS

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**WELLNESS NETWORK**

SUBSCRIPTION FOR ACCESS TO THE PATIENT CHANNEL

Effective: 03/17/2010

Expiration:

Manager: LESLIE LOVEJOY

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**WELLNESS PATHWAYS - LESLIE LOVEJOY**

CONSULTATION REGARDING QUALITY AND RESOURCE MANAGEMENT

Effective: 12/01/2010

Expiration: 05/30/2013

Manager: KELLY MATHER

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**WESTCON MEDICAL INDUSTRIES, INC**

PRICING AGREEMENT: AMSINO MEDICAL PRE-FILLED SYRINGES

Effective: 05/08/2008

Expiration:

Manager: ELLEN SHANNAHAN

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**WILDFIREWEB, INC**

HOSTING AGREEMENT FOR SVH.COM DOMAIN

Effective: 04/23/2009

Expiration:

Manager: BEVERLY SEYFERT

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**WINCARE**

SOFTWARE LICENSING AGREEMENT

Effective: 09/16/1994

Expiration:

Manager: FE SENDAYDIEGO

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**WYETH PHARMACEUTICALS**

RESEARCH PROJECT FOR DR. CHAGNON

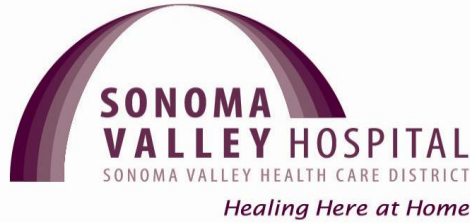
Effective: 08/12/2008

Expiration: 08/11/2013

Manager: ROBERT COHEN

6.

ACKNOWLEDGEMENT  
CONCERNING  
CONFIDENTIAL  
INFORMATION



**POLICY CONCERNING CONFIDENTIAL INFORMATION**

State and Federal laws, as well as ethical obligations, require that information concerning the care, condition and treatment of our patients be treated as confidential matters.

Accordingly, other hospital information including departmental, operational, statistical and financial data should be held in similar confidence. No confidential information may be used by any individual connected with the hospital for their own purposes.

Any and all inquiries by members of the media concerning the Hospital and/or its patients should be referred to the office of the President/CEO. Confidential material is not to be shared or communicated to the press, public or staff. Documents subject to disclosure pursuant to the California Public Records Act will not be deemed to be subject to this Policy. Questions concerning the applicability of the California Public Records Act to a document will be submitted to Administration for legal review.

Board members, committee members and staff are reminded that failure to adhere to this policy may result in possible employment or legal ramifications.

**ACKNOWLEDGEMENT**

I acknowledge that I understand my obligation to keep information concerning hospital business and patient information confidential.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

8.

QUALITY COMMITTEE  
CHARTER REVIEW  
FEEDBACK FROM  
COMMITTEE MEMBERS



*The Mission of the SVHCD is to maintain, improve and restore the health of everyone in our community.*

## **POLICY # 1**

### **POLICY TITLE**

Quality Committee Charter

### **PURPOSE**

Consistent with the Mission of the District the Board, with the assistance of its Quality Committee (QC), serves as the steward for overall quality improvement for the District. The QC shall constitute a committee of the District Board of Directors. The Board shall refer all matters brought to it by any party regarding the quality of patient care, patient safety, and patient satisfaction to the QC for review, assessment and recommended Board action. The QC makes recommendations and reports to the Board. It has no authority to make decisions or take actions on behalf of the District unless the Board specifically delegates such authority, as the Board has for Physician Credentialing (see below).

The QC shall assist the Board in its responsibility to ensure that the Hospital provides high-quality patient care, patient safety, and patient satisfaction. To this end the QC shall:

1. formulate policy to convey Board expectations and directives for Board action;
2. make recommendations to the Board among alternative courses of action, including but not limited to physician credentialing and oversight activities;
3. provide oversight, monitoring and assessment of key organizational processes, outcomes, and external reports.

### **SCOPE AND APPLICABILITY**

This is a SVCHD Board Policy and it specifically applies to the Board, the Quality Committee, the Audit Committee, the Medical Staff, and the CEO of SVH.

### **RESPONSIBILITY**

#### **Physician Credentialing**

1. The QC shall ensure that recommendations from the Medical Executive Committee and Medical Staff are in accordance with the standards and requirements of the Medical Staff



Bylaws, Rules and Regulations with regard to: completed applications for initial medical staff and allied health staff appointment; initial staff category assignment, initial department/divisional affiliation; membership prerogatives and initial clinical privileges; completed applications for reappointment of medical staff, staff category; clinical privileges; establishment of categories of allied health professionals permitted to practice at the hospital; the appointment and reappointment of allied health professionals; and privileges granted to allied health professionals.

2. The QC shall, in closed session on a case by case basis, fully, rigorously, and carefully review the recommendations of the Medical Staff regarding the appointment, reappointment, and privilege delineation of physicians and submit recommendations to the Board for review and action.

3. Initial Credentials and Privileges

- o The MEC recommends a new applicant for credentialing and privileges effective the first of the next month.
- o The QC votes to recommend to the Board that they grant privileges and credentials to the professional, pending Board approval at the next Regular Board Meeting.

4. Reappointments

- o The credentials and privileges of the professional in question are in effect at the time the QC meets to consider their approval.
- o That professional's credentials and privileges will expire before the next Regular Board meeting, and
- o The QC votes to recommend to the Board that they grant privileges and credentials to the professional, pending Board approval at the next Regular Board Meeting.

5. When the QC does not meet or for some other reason is unable to act as authorized above:

- o The two Board Members on the QC may act to temporarily grant credentials and privileges, pending Board approval at the next Regular Board Meeting, or
- o If one or both of these QC Board members are not available Board Chair may select temporary Board replacement(s) to meet and act to grant credentials and privileges, pending Board approval at the next Regular Board Meeting.

2.

**Develop Policies**

1. The QC shall submit recommendations for action to the Board on draft policies developed by the QC and those developed by the Hospital regarding quality patient care, patient safety, and patient satisfaction.

**Oversight**

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#### Annual Quality Improvement Plan

1. The QC shall review and analyze findings and recommendations from the CEO resulting from the Hospital's prior year Annual Quality Improvement Plan, including but not limited to a comparison of the plan to actual accomplishments, administrative review and evaluation activities conducted, findings and actions taken, system or process failures and actions taken to improve safety, both proactively and in response to actual occurrences.
2. The QC shall review the Hospital's Annual Quality Improvement Plan for continuously improving quality, patient safety, and patient satisfaction and submit the analysis with recommendations establishing priorities to the board for discussion and action. The Hospital's plans should include, but not be limited to, assessing the effectiveness and results of the quality review using metrics and benchmarks, utilization review, performance improvement, implementing and improving electronic medical/health records, professional education, risk management programs, and patient care related activities and policies of the Hospital and/or Medical Staff, as applicable.

#### Medical Staff Bylaws

1. The QC shall assure that the Medical Staff's Bylaws are reviewed and approved by the Board and are consistent with the District and Hospital Mission, Vision and Values, Board policy, and accreditation standard, prevailing standards of care, and evidence-based practices.
2. The QC shall review the Medical Staff's fulfillment of its responsibilities in accordance with the Medical Staff Bylaws, applicable law and regulation, and accreditation standards and make recommendations to the Board.

#### Quantitative Quality Measures

1. The QC shall assess and recommend quantitative measures to be used by our Board in assessing the quality of the Medical Staff's and Hospital's services and submit them to the Board for deliberation and action. The recommendations shall include descriptions that show how the organization measures and reports the improvement of patient care as well as management accountability.
2. The QC shall review all reports by and Hospital responses to accreditation organizations, e.g., Fire Marshals, Environmental Health, State Department of Health Services (DHS), and other external organizations conducting management, programmatic, physical plant audits/assessments/reviews that are directly or indirectly related to the quality of health care delivery in the Hospital (quality patient care, patient safety, and patient satisfaction). Track all uncompleted/open items until remedied/closed by the Hospital, and make recommendations and report to the Board for its action as appropriate. This includes the final OSHPD report on a construction project prior to licensing by DHS, but it does not include on-going OSHPD reviews/inspections/reports while a project is in design or construction. This does not include routine financial audits, unless the audit identifies quality patient care, patient safety, and/or patient satisfaction issues, in which case the Audit Committee shall refer the audit to the QC for its review and recommendations to the

Board.

3. The QC shall ensure there is an effective, supportive and confidential process for anyone (the Medical Staff, other health care professionals; Hospital administration; leaders and staff; patients and their families and friends; and the public) to bring issues to the QC directly or via the Hospital—as a group, personally or anonymously--in order to promote the reporting of quality and patient safety problems and medical errors, and to protect those who ask questions and report problems.
4. The QC shall review and assess the process for identifying, reporting, and analyzing “adverse patient events” and medical errors. The QC shall develop a process for the QC to address these quality deficiencies, in the most transparent manner possible, without unnecessarily increasing the District’s liability exposure.
5. The QC shall review the assessment of patient needs/satisfaction, and submit this assessment with recommendations to the Board for review and possible action. This may include but is not limited to CMS Value Based Purchasing information; Press Ganey surveys; reports and comparisons to other hospitals, state and national standards; and patient and/or family complements and complaints.
6. The QC shall review and assess the system for resolving interpersonal conflicts among individuals working within the Hospital environment that could adversely affect quality of care, patient safety or patient satisfaction and make recommendations to the Board.

#### Hospital Policies

1. The QC shall assure that the Hospital’s administrative policies and procedures are reviewed and approved by the appropriate Hospital leaders and that the policies and procedures are submitted to the Board for its action are consistent with the District and Hospital Mission, Vision and Values; Board policy; and accreditation standards.
2. The AC shall assure that the Hospital’s policies and procedures relative to quality, patient safety, and patient satisfaction are reviewed and approved by the appropriate Hospital leaders and the policies and procedures submitted to the Board for its action are consistent with the District and Hospital Mission, Vision and Values, Board policy, and accreditation standards, prevailing standards of care, and evidence-based practices.

#### Other

1. Perform other duties related to high-quality patient care, patient safety, and patient satisfaction as assigned by the Board.

#### **Annual QC Work Plan**

The QC shall develop an Annual QC Work Plan comprised of the required annual activities and additional activities selected by the QC. The Annual QC Work Plan shall be reviewed and acted on by the Board after considering the CEO's work plan to support the QC.

#### Required Annual Calendar Activities

##### For Calendar Year 2012

1. The QC shall submit the CY 2012 Work Plan to the CEO no later than the first week in January.
2. The QC shall submit its Work Plan and the CEO's Work Plan to the QC Board for its review and action no later than the February Board meeting.
3. The QC shall review the adequacy of financial and human resources currently allocated for maintaining high-quality care, patient safety, and patient satisfaction in April, in advance of the annual budget process and provide an assessment to the Board and CEO with recommendations for action.
4. The QC shall review and assess all Board policies regarding quality, including the QC Charter, and makes recommendations to the Board for action in December.

##### For Subsequent Calendar Years

1. The QC shall review the adequacy of financial and human resources currently allocated for maintaining high-quality care, patient safety, and patient satisfaction in April, in advance of the annual budget process and provide an assessment to the Board and CEO with recommendations for action.
2. The QC and CEO Work Plans shall be submitted to the Board for its review and action no later than December.
3. The QC shall report on the status of its prior year's work plan accomplishments by December.
4. The QC reviews and assesses all Board policies regarding quality specifically including the QC Charter, and makes recommendations to the Board for action in December.

#### **QC Membership and Staff**

The QC shall have 7 voting members and three non-voting public member alternates appointed pursuant to Board policy. Pursuant to Health and Safety Code Section 32155, based on the need for Medical Staff quality assessments, Physician Credentialing and Privileges are discussed and action is taken in Closed Session without the QC public members and alternates. Hospital employees who staff the QC are not voting members of the QC. QC membership is:

- Two Board members one of whom shall be the QC chair, the other the vice-chair. Substitutions may be made by the Board chair for Board QC members at any QC meeting--for one or both Board members.
- Two designated positions from the Medical Staff leadership, i.e., the President and the President-Elect. Substitutions may be made by the President for one Medical Staff member at any QC meeting.
- Three members of the public. In addition, substitutions may be made at all QC meetings from three prioritized non-voting members of the public as alternate public members. Alternates shall attend closed session QC meetings and vote as QC members when substituting for a voting public member. Alternates may attend QC meetings as non-voting alternates and fully participate in the open meeting discussions.

Staff to the QC include the Hospital's Chief Medical Officer (CMO), Chief Nursing Officer (CNO), and the Director of Quality and Resource Management who shall be the lead staff in support of the QC Chair for meetings, documents, and activities. Staff is expected to attend the QC meetings. The CEO may attend all QC and subcommittee meetings and shall be a resource at the QC meetings upon request of the QC Chair.

#### **Frequency of QC Meetings**

The QC shall meet monthly, unless there is a need for additional meetings.

#### **Public Participation**

All QC meetings shall be announced and conducted pursuant to the Brown Act. Physician Credentialing and Privileges are discussed and action is taken in QC Closed Session without the QC public members and alternates, or the general public.

The general public, patients and their families and friends, Medical Staff, and Hospital staff are always welcome to attend and provide input. Other Board members may attend but may not comment as it may be a Brown Act violation.

Narrowly focused and short term ad hoc subcommittees may meet to address specific issues that will be brought to the QC for review and referral to the Board for its deliberation and action. Subcommittee meetings are not subject to the Brown Act.

#### **FREQUENCY OF REVIEW/REVISION**

This shall occur annually or more often if required. If revisions are needed they will be taken to the Board for action.

#### **POLICY HISTORY**

December 1, 2011--Board Policy regarding the QC was first adopted.

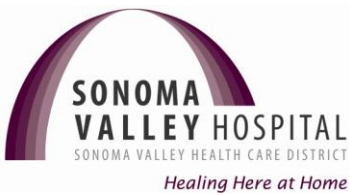
March 1, 2012—Charter amended.

July 5, 2012—Charter amended.

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11.

# QUALITY REPORT



TO: Sonoma Valley Hospital Care District Board Quality Committee  
 FROM: Leslie Lovejoy, Director, Quality and Resource Management  
 DATE: 11/21/2012  
 SUBJECT: Quality Report

November Priorities:

- 1) CMS Follow-Up Survey for Skilled Nursing
- 2) Summary of Citations for State Pharmacy Survey
- 3) Joint Commission Complaint

1. The Skilled Nursing Facility participated in a second round of surveys to validate the state survey that took place a few months ago. It was conducted by state surveyors on behalf of the Centers for Medicare Services and went well. The surveyors were here for 4 days and found very few deficiencies. This was followed by an Interim Life Safety survey that addressed the environment of care which lasted two days and identified some opportunities for improvement. I will bring the summary of cited deficiencies to the committee when I receive their written report.

2. We received the written statement of deficiencies and have submitted our plan of correction. Dr. Christensen called me with questions; however, we have not been able to connect so I am unclear as to whether the plan has been accepted.

Deficiency	Action (s) Initiated	Expected Completion Date
Warfarin Dosing Protocol	Update to meet requirements and take through Committee.	12/15/12
Improper storage of warmed fluids for Surgery	Change policy and develop quality assurance checklist to monitor.	10/30/12
Multiple concerns regarding Crash Carts, Malignant Hyperthermia Tray, and Lipid Rescue Tray	Standardize carts and trays.  Post inventories on the outside of each.  Update policies and procedures to meet guidelines.	Began work 10/30/12; expected completion is 12/15/12.
Found disinfectant and cleaner on top of medication storage area	Removed and staff educated.	11/02/12
EVS cleaning unsupervised near IV fluid bags	Med Exec approved that EVS staff have access to medication areas for cleaning under supervision.  EVS staff Educated Documentation of supervision on Crash Cart checklist.	11/15/12
Expiration date issues with IV fluids in Pharmacy	Staff educated to new process.	11/9/12



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3. We received notice from The Joint Commission of a complaint that was sent to them regarding a patient experience in the Emergency Department. I have attached the complaint and our response, which will be filed on November 14th. They have accepted our response to this one and to the one that I reported on last month.

Topic for Discussion: Annual Contract Process Review



## Organization response to a complaint

**Incident Number:** 172160  
**Incident Date:** 10/14/2012  
**Programs:** HAP

### Complaint Summary

We arrived in the ED at 816 pm as she, Katherine DiStefano, had a severe sore throat (hx of strep) and flu like symptoms. She was feeling quite lousy and having a difficult time breathing as her throat was so sore. There was no one at the desk so she rang the bell and an ER Assistant (I believe either Matt or Tom) asked what was wrong, she told him and then the registration clerk came up. She was checked in by Marisa (not given copies of her consent) and then told to take a seat. At approximately 9pm I went to the desk to ask when an RN would triage her and to find out what the hold-up was, as from check in to this point we had absolutely no conversation with anyone other than the 15 seconds with the ER Asst and the reg clerk. We were told that they were very busy and that they had no room in the back. I told them that a little bit of information goes a long way and that they could have/should have kept us informed. I then told the clerk that she was feeling short of breath and at that point again, the ER Asst came out and took her O2 sats. It fluctuated between 96-98 and he said this was fine and that they would get her back as soon as possible and that 3 ambulances had come in. During this period multiple patients came into the ED where the registration clerk asked multiple questions regarding their reasons for coming in with little or no regard for patient privacy or HIPPA. The entire waiting room heard all about the patient coming in for withdrawals, why she was withdrawing and what her symptoms were and what she was withdrawing from. Besides the fact that this was completely inappropriate the registration clerk had no way to assess the patient's medical condition. At around 930p the ER assistant, brought Katie back to a gurney in the hallway(which was absolutely fine) and starting taking her medical history. Again at this point, no RN in site to do any triage assessment. He took her vital signs asked a few other questions, any meds?, etc.. this took all of 2-3 minutes. At around 945pm-950pm the ER Asst came over to culture her throat to r/o strep. He did not have gloves on, nor did we see him wash his hands prior to obtaining the cultures. After he removed the culturettes from Katie's throat, she asked him "was that payback", being that he shoved the 2 culturettes into her throat. He laughed, smiled and said "kinda". This was completely inappropriate behavior for anyone working in an ED to have. He then walked back into the RN station with the culturettes in mid-air through the department and at approximately 10-15 minutes later they were brought down to the lab as we witnessed being in the hallway. At 1015pm, Marissa (registration clerk) came into the hallway to discuss and retrieve Katie's insurance card. At this point she still had not seen an ED RN or the ED MD. As I am sure you know, EMTALA is very strict about discussing any financial information prior to a MSE. She stated that she was leaving and needed to get this taken care of prior to her leaving as they could not collect any copays as the CC machine was being closed out and that we could not leave a check as the box was locked and closed for the night. I am sure you can see our frustration at this point, as she still had not seen either an MD or RN. When Marissa was speaking to us, she asked Katie to sign the 2nd part of the COA, however she had not even seen the ED MD at this time. Again, completely inappropriate. At approximately 1025pm the ED MD (I believe Dr Cohen was his name), however her paperwork states Dr Berenson, came up, introduced himself, looked in her throat, felt her glands and said they were waiting for the Rapid Strep culture to come back, however he felt that this was viral. At 1040pm, Dr Cohen advised Katie that the Rapid Strep culture was negative and that they would further test and let her know by Tuesday if the culture grew out anything. Again, short and sweet which was fine, however still no ED RN in sight. A few minutes later Leslie W. (ED RN) approached the gurney, she handed Katie a packet of 6 Vicodin, and a prescription without ever checking her armband to see that she had the right patient. She never asked if Katie had taken Vicodin before, if she had any questions, she just handed her the meds and prescription, asked her to sign. For me, this was really the final final. I could not believe that we had been there for close to 3 hrs and this was our only encounter with an RN, who clearly had no concern for this patient. Katie is new to the area, has no PCP and works for one of the largest employers in Sonoma. It is unfortunate that her first encounter with SVH was so disappointing. I went to your website and others and it looks like your ER Asst is just another word for your registration clerk and that all they are required to have is

a BLS card. This causes me concern, as they (the ER Assistant) do not have the proper training to triage and assess patients, however for Katie's visit that was all she saw except in the last 45 seconds or so. After doing some research, Title 22 states that "only registered nurses shall be assigned to triage patients. Someone with only BLS training is not a substitute for an RN. Clearly this is not within the scope of practice for a ED Assistant. Please also feel free to contact Katherine at katieadistefano@gmail.com or myself (Amy DiStefano) at amydistefano@gmail.com We emailed again today (10.26.12) advising SVH that we were disappointed that we had not even received back even an acknowledgement of the initial complaint. Our original complaint went to Mark Kobe, ED Manager at SVH and Administration at SVH. Thank you for your attention to this matter

### **Comments and Analysis**

The patient entered a very busy emergency department with limited bed capacity (7). The patient presented at 2016 with a complaint of a sore throat to the Registration Clerk. The Clerk relayed this information to the team (ED Tech, RN and MD). Unbeknownst to the patient, there was constant communication between team members regarding who and what cases were waiting in the waiting room and there was consensus that this patient could wait until the ambulance and current patients were assessed and stabilized. There were three ambulance admissions from 2016 when the patient registered until the ED Tech took the patient to hallway gurney to collect triage data (vitals signs and background information) and the RN performed and documented the triage assessment, within 30 minutes of presentation, and updated the electronic record for allergies and home medications. The ED Tech talked with team and the RN receives a verbal order for a strept screen . At that point the Registration Clerk requested insurance information and had the patient sign the conditions of admission. At no time did the Clerk ask for money upfront. The strept screen was obtained by the ED Tech with gloves on. The EDMD then completed his assessment. Two and a half hours after presenting to the ED, the patient's screen is negative. The physician educated the patient and explained the plan. The patient was discharged with aftercare instructions at 2250. On 10/15/2012 The patient's mother, and author of the complaint, talked with the ED Director, expressed her concerns; and appeared to be relieved when her questions and concerns were answered. The Director also contacted the patient and apologized to her for not meeting her expectations and addressed her concerns. 1. Medical Technician: by hospital policy is allowed to collect triage data and to perform waived testing and demonstrates competency for doing so. We do require a BLS care for this position. They do not serve as substitutes for RN's. The Registration clerk by policy greets the patient as they present and initially collects their name and presenting complaint which she then provides to the team (RN, MD) 2. Triage did occur but in light of the business of the ED may not have been communicated well to the patient or the mother. 3. The ED RN clearly did not introduce herself or communicate with the patient such that they believed that the first contact was on discharge. 4. Patient Privacy: the hospital has worked to improve the privacy issues in this ED and recognizes it needs to do better. We are opening a brand new ED in the fall of 2013. At that time there will be a dedicated triage room and improved privacy at the registration desk. Until then we have put into place as many privacy strategies to reduce the potential for violations. It is also not uncommon for inebriated patients to be loud when they present to the Clerk. 5. Lack of communication in the waiting room by the team. Clearly an opportunity for improvement and the first thing that is put on hold with a very full acutely ill patient population in the beds.

### **Conclusions**

Opportunities for Improvement: 1. Communication: ensure that patients know who is providing care and their role in the process. Provide more effective communication between waiting area and the treatment area regarding wait times and the reason for prolonged waits. 2. Privacy practices review 3. Triage process review

### **Follow-Up Actions**

1. Communication: During staff meetings and shift changes, reminded ED staff and physicians to introduce themselves and their roles when providing care to our patients and their families. Shared this complaint as a learning opportunity for the team and looked at ways to improve waiting room communication. RN coaching for more effective patient engagement was done. 2. ED Director worked with ED registration clerk to identify strategies to improve or bolster current privacy practices. 3. ED Director reviewed the Triage process, policies and procedures with the ED Team.

**Date Printed:**

Wednesday, November 14, 2012

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