

Chief Executive Officer
Louis Ward, MHA



Mayers Memorial Hospital District

Board of Directors
Beatriz Vasquez, PhD, President
Abe Hathaway, Vice President
Laura Beyer, Secretary
Allen Albaugh, Treasurer
Jeanne Utterback, Director

Board of Directors
Quality Committee
Minutes

Full Remote Teleconference
July 8, 2020 @ 12:00 PM
Fully Remote Zoom Meeting

These minutes are not intended to be a verbatim transcription of the proceedings and discussions associated with the business of the board's agenda; rather, what follows is a summary of the order of business and general nature of testimony, deliberations and action taken.

1	CALL MEETING TO ORDER: Board Chair Laura Beyer called the meeting to order at 12:00 pm on the above date.		
	BOARD MEMBERS PRESENT:		STAFF PRESENT:
	Laura Beyer, Secretary Jeanne Utterback, Director		Louis Ward, CEO Candy Vculek, CNO Travis Lakey, CFO Keith Earnest, CCO
	ABSENT:		Dawn Jacobson, Infection Control Jessica DeCoito, Board Clerk
2	CALL FOR REQUEST FROM THE AUDIENCE – PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS		
	None		
3	APPROVAL OF MINUTES		
	3.1	A motion/second carried; committee members accepted the minutes of June 10, 2020	Utterback, Hathaway Beyer – Y Utterback – Y
4	Environmental Sampling of Barrier Isolator Update: consulting with a microbiologist, she recommended a thorough cleaning and retest. Particulates from old filter could have been a factor. As of June 25 th , we have passed after a retesting. Back in business in our sterile compound. And a retest will take place in 6 months.		
5	Quality Facilities Reports: No reports submitted		
6	Quality Staff Reports: Written Reports submitted		
	6.1 Director of Human Resources: written report submitted. Manager training: is there a certificate for this that would be transferrable to another organization? – at this time there is not but will look into this further.		
	6.2 Workers Comp Quarterly: written report submitted.		
	6.3 Lab: written report submitted. Redraws are happening at Burney and we are working on trying to fix this. Meetings will need to take place for staff. Maybe the help of the Hospitalists will help. Meetings to be scheduled and resolutions will be found. Lab to report back in two months to Quality for update on project. CNO to provide short update in August if available.		
7	Quality Patient Reports: Written reports submitted		
	7.1	HIM: One Content is a huge success for the department. ROI is super quick turnaround for the offices. Documentation flow is more automated and less hands-on. Minor issues with documentation in ER, but we are addressing those as they come along.	
	7.2	Activities: Activity aide's starting an in room plant project for multiple plants. We have been able to work with Maintenance on a garden for those plants. 4 th of July parade of residents went really well. Working on a mock fair set up for residents. Technology has been added to things for residents to utilize – online shopping, games, Facetime calls, etc. Alzheimer Awareness activities being researched. Zoom Meetings have been utilized for residents in addition to window visits. Kudos to Activities for all that they do for our residents.	

7.3	Chief Nursing Officer Report: Discussion on organization for the goals to the Clinical Team. We cascade the goals so everyone is aligned. SNF has had some major updates and we have been successful with these changes and processes are moving efficiently. CNA workflows have been changed to help meet the needs of our residents, and after these two weeks of the new shifts, we will gather feedback to make adjustments as necessary. Assistant Lead on Acute: analyzing labor and delivery. And created educational handouts for the swing patients. LEAN facilitators are being trained so that multiple folks in our team can run these LEAN events facility wide.		
7.4	SNF Events/Survey: CDPH surveyor every 5 to 6 weeks with the focus to review how we are handling all the COVID-19 procedures we have in place. Every survey and visit has been great. And we can expect to see this happening through the COVID-19 timeline.		
7.5	Infection Control: employee and resident testing has been conducted. Residents are completed and results are received. Employee testing is going well and we have started to receive tests and should be completed by the end of the week.		
8	Quality Finances Reports: No Department Reports		
	8.1 Patient Access: written report submitted. No additional questions or comments.		
	8.2 Business Office: written report submitted. Offsite employees come in one day a week but work from home. And process is working well.		
	8.3 Chief Financial Officer – Finance Report: new time clock system was launched this last pay period and the process went smoothly. A much more automated process than previous process. The new controller is working out well thanks to a lot of training she had with the previous controller. But Travis has been able to step in and answer questions when needed. Tracking a lot of CARES Acts Payment.		
9	Quality Education: No information to be reported		
10	Quality Program Reporting and Initiatives		
10.1	Quality/Performance Improvement: tracking LEAN projects. Maintaining plan of correction audits.		
10.2	PRIME: we received on PRIME payment after last meeting. PRIME moving forward is a big question mark. PRIME is focused on primary care so we should see a benefit once our clinic is open.		
11	NEW BUSINESS:		
	11.1 Policies & Procedures: 1. Board Meetings – Location, Time, Date and Quorum 2. Discipline Corrective Action 3. Corrective Action Notice 4. HHS Poverty Guidelines – 75% MMH388	<i>Utterback, Ward</i>	<i>Beyer – Y Utterback - Y</i>
	11.2 New Report Template format: Infection Control, PRIME, Quality/Performance Improvement to have standing report format created. Current template needs some revisions to help managers provide comprehensive reports. Candy to take current template to some Directors for feedback and to share with Director Beyer and Director Utterback. Then we will come together for a template to create.		
12	ADMINISTRATIVE REPORT: COVID-19 cases in Shasta Co. are steadily climbing. And we continue to monitor those numbers. We have changed masking to N95's with staff members who have contact with patients. Some negative feedback but we are taking a very cautious approach to keep our patients and our staff safe. Because we are a small rural hospital in a small community, we have to take extra precautions to make sure we are protected. We continue to test, at this point we have had 3 positive tests resulted through Mayers lab. New Hospital Wing is coming along and we are getting close to completion. Once the Fire Alarm testing has been completed and signed off, we will begin to move equipment over and get ready. Lots of details inside are being set up and finalized right now. Our schedule has been pushed back slightly. Clinic is on schedule and on track. Dr. Saborido and his family have moved up here and ready to begin work on July 11 th .		
13	OTHER INFORMATION/ANNOUNCEMENTS: None		
14	ADJOURNMENT: 1:45 pm - Next Regular Meeting – August 12, 2020		

Public records which relate to any of the matters on this agenda (except Closed Session items), and which have been distributed to the members of the Board, are available for public inspection at the office of the Clerk to the Board of Directors, 43563 Highway 299 East, Fall River Mills CA 96028. This document and other Board of Directors documents are available online at www.mayersmemorial.com.