

Mayers Memorial Hospital District

Chief Executive Officer, Interim Louis Ward, MHA

BOARD of DIRECTORS MEETING AGENDA August 26, 2015 1:00 PM Board Room (Burney)

Board of Directors

Abe Hathaway, President Michael D. Kerns, Vice President Allen Albaugh, Treasurer Beatriz Vasquez, PhD, Secretary Art Whitney, Director

Mission Statement

Mayers Memorial Hospital District serves the Intermountain area providing outstanding patient-centered healthcare to improve quality of life through dedicated, compassionate staff and innovative technology.

CALL FOR REQUEST FROM THE AUDIENCE: PUBLIC COMMENTS OR TO SPEAK TO AGE	NDA TTEMS:
Persons wishing to address the Board are requested to fill out a "Request Form" prior to the beginning of the available from the Clerk of the Board (M-W), 43563 Highway 299 East, Fall River Mills, or in the Board Room) documents to present for the members of the Board of Directors to review, please provide a minimum of nine President announces the public comment period, requestors will be called upon one-at-a time, please stand a and comments. Each speaker is allocated five minutes to speak. Comments should be limited to matters jurisdiction of the Board. Pursuant to the Brown Act (Govt. Code section 54950 et seq.) action or Board cannot be taken on open time matters other than to receive the comments and, if deemed necessary, to rematter to the appropriate department for follow-up and/or to schedule the matter on a subsequent Board Age	meeting (forms and . If you have to copies. When the and give your name to swithin the discussion of the subject.
APPROVAL OF MINUTES: 3.1 Regular Meeting – July 27, 2015 (ATTACHMENT A)	ACTION ITEM
Reports: 4.1 401K Annual Report	Information Information
OPERATIONS ► Chief's Reports (CEO, CNO, CCO) (ATTACHMENT B) INCLUDING REPORT ON ASSIGNMENT OF CHIEF DUTIES, EMERGENCY DEPARTMENT SSV STATUS	Information
BOARD COMMITTEES:	
6.1 Finance Committee – Chair Allen Albaugh 6.1.1 Committee Meeting Report (including update on USDA, IGT, Capital Campaign) 6.1.2 July 2015 Financial review and acceptance of financials (as electronic attachment) 6.1.3 FY16 Operational Budget: Resolution 2015-3 (ATTACHMENT C)	Information ACTION ITEM ACTION ITEM
6.2 Strategic Planning Committee – Chair Abe Hathaway 6.2.1 Committee Meeting Report (including update on JPIA)	Information
6.3 Quality Committee – Chair Mike Kerns 6.3.1 Committee Meeting Report	Information
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7	7.1 INFORMATION/REPORTS/BOARD EDUCATION/ANNOUNCEMENTS ▶ Board Education – QHR Webinar 2 nd Tuesdays 2015, 10 a.m. ▶ HGA Site Visits – August 28, Sept. 14, 28 ▶ Fair Booth September 3 – 7, 2015. Sign up with Val ▶ JPIA Meeting – September 9 – Alturas ▶ Board Quality – Thursday, September 10 - Burney ▶ Blood Drive – September 15 th ▶ Employee Appreciation Lunches – Sept 15 (FR), Sept 17 (Burney)	Information/ Discussion
8	ANNOUNCEMENT OF CLOSED SESSION: 8.1 Government Code Section 54952 Quality Assurance: Quality Improvement Issues, Medical Staff Report (Dr. AJ Weinhold, Chief of Staff)	ACTION ITEMS
9	RECONVENE OPEN SESSION: REPORT ACTIONS TAKEN DURING CLOSED SESSION ADJOURNMENT: Next Regular Meeting September 23, 2015 – Fall River Mills	

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, 43553 Highway 299 East, Fall River Mills CA 95028.

This document and other Board of Directors documents are available online at www.mayersmemorial.com.

Posted/Distributed 08/18/15

Attachment A DRAFT

Mayers Memorial Hospital District Board of Directors – Regular Board Meeting

Date: July 27, 2015 Time: 1:00 P.M.

Location: Mayers Memorial Hospital

Fall River Mills, California

(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: Vice President Kerns called the regular meeting to order at 1:00 p.m. on the above date with the following present:

Abe Hathaway, President Mike Kerns, Vice President Beatriz Vasquez, Secretary Allen Albaugh, Treasurer Art Whitney

Board Members Absent: none

Staff Present: Louis Ward, Interim CEO; Valerie Lakey, Board Clerk; Travis Lakey, CFO; Sherry Wilson, CNO; Keith Earnest, CCO

2. CALL FOR REQUEST FROM AUDIENCE TO SPEAK TO ISSUES OR AGENDA ITEMS: None

- **3. APPROVAL OF MINUTES** A motion/second and carried, the Board of Directors accepted the following minutes
 - 3.1 Regular Meeting June 24, 2015 Kerns, Whitney
 - 3.2 Special Meeting July 16, 2015 Kerns, Albaugh (Vasquez abstain)
- **4. Annual Hospice Report** Mary Ranquist presented an annual report *(Exhibit A)* Keith Earnest added that billing is outsourced and is working well. Annual contributions \$10,658 from direct donations.

5. OPERATIONS REPORT:

<u>In addition to the written operations report included in the board packet</u>, the following verbal reports and discussions are summarized below:

- ▶ Louis Ward, Interim CEO Staff has been busy planning for state survey. Maintenance is preparing for Fire, Life Safety survey. Policies are in place. Albaugh asked about the generator building, OSHPD wants the building offline; we are trying to build that into the new project. We will have to make plans to put it in a seismically safe area. Conservation crew has been helping with clean-up. They have been contacted about helping with painting.
 - **IT** Working on obtaining cyber insurance, we currently have a \$2 mil policy. We will need to increase to \$5 mil for Sac Valley Med Share. We have updated the phone systems in Fall River and Burney.

Purchasing – year-end inventory has been completed– everything ended pretty well. Surgery was about \$21,000 off.

HIE – Grant through Hwy 299 collaborative.

Clinic – working on drawings for an ADA restroom – may end up working with HGA. We are continuing to look for providers. There should be a lot more new information by next month. Dr. Guthrie, Dr. Syverson and Darla Schmunk are potential providers. We need to look at the setup with Dr. Syverson and his clinic day in Susanville. Looking at Telemedicine in that clinic space. We have put in for a grant with USDA to obtain telemed equipment.

► **Keith Earnest, CCO** – Clinic and lab and diagnosis codes – pre-registering patients and screening before they get here. Working with clinic and trying to get through the process. We

Mayers Memorial Hospital District Board of Directors – Regular Board Meeting

> July 27, 2015 Page 2 of 3

are doing better on the MMHD side – need to have MVHC to help solve these challenges.
 Sherry Wilson, CNO - State is at Modoc. Our Immediate Jeopardy fell off the books as of June 25. We can now offer CNA classes. Terry King has started paperwork for our own CNA class. Hired 5 CNA's from the Feather River class. Some of them rest of them are re-testing this week.

Hired 5 CNA's from the Feather River class. Some of them rest of them are re-testing this week Collaborate with Modoc and possibly use some of those at higher rate and would still be better than registry rate. We are working on reducing registry. We have hired 2 RN's on acute floor. An LVN will be finishing classes at Institute of Technology.

6. BOARD COMMITTEES:

6.1 Finance Committee - Chair Allen Albaugh

- **6.1.1 Committee Meeting** See Minutes as distributed we are on pace for \$1.8 mil this month. 2014 IGT money should be received by December. Lakey went over the USDA status. Ward and Lakey have a meeting with USDA and Cal Mortgage on Wednesday. USDA wants to wrap up by end of August. Work by HGA should be done by Sept- Oct. We will be working out the timeline. Albaugh said we need to hire a project manager sooner than later. Also consider a steering committee.
- 6.1.2 June 2015 Financials (Whitney, Kerns) Approved All
- 6.1.3 Board Quarterly Finance Review (Albaugh, Kerns) Approved all
- **6.1.4 Building Options** See above
- **6.1.5 IGT Update** Will need a new letter signed. Ward and Lakey will meet with Cal Mortgage on Wednesday.

6.2 Strategic Planning Committee - Chair Abe Hathaway

- **6.2.1 Committee meeting** See minutes as distributed phone protocol will work on that.
- 6.2.2 Strategic Plan Approval (Kerns, Vasquez) Approved All

6.3 Quality Committee – Chair Mike Kerns

5.3.1 Committee Meeting Report – See minutes as distributed. The big success was the great report on Workers comp – Mod Rate was 8.8. We had four first aids with one reportable. This is saving us about \$4000 per month. Kerns suggests a big thank you to the staff.

7. NEW BUSINESS

- 7.1 Policy & Procedure Approval (Kerns, Whitney) Approved All
- **7.2 Approval of HGA Proposal (Kerns, Albaugh) Approved All –** Pre-design work and RFP, did not receive quote from ANOVA or Michael Ryan.
- **7.3 Approval of Resolution 2015.4 (Albaugh, Kerns) Approved All –** Change from Rees to Ward
- **7.4 Approval of Interim CEO (Albaugh, Kerns) Approved All –** Appoint Louis Ward, MHA as Interim CEO
- **7.5 Approval of Secured Line (Whitney, Vasquez) Approved Ali –** Letter for Cal Mortgage with board Approval

8. INFORMATION/BOARD EDUCATION/ANNOUNCEMENTS

► ACHD Committees

9. ANNOUNCEMENT OF CLOSED SESSION: 2:54PM

10. RECONVENE OPEN SESSION - ANNOUNCE ACTION TAKEN IN CLOSED SESSION -

Mayers Memorial Hospital District Board of Directors – Regular Board Meeting

DRAFT

July 27, 2015 Page 3 of 3

CREDENTIALS APPROVED

11. ADJOURNMENT: There being no further business, at the hour of 3:10 p.m., President Hathaway declared the meeting adjourned. Next meeting August 26, 2015 – Burney

Closed Session

Credentials - (Kerns, Whitney) Approved



Mayers Memorial Hospital

Statistics	July YTD FY16 (current)	July YTD FY15 (prior)	July Budget YTD FY16
Surgeries (including C-sections)	9	9	5
> Inpatient	3	5	1
➤ Outpatient	6	4	4
Procedures (surgery suite)	13	7	8
Inpatient	103	107	172
Emergency Room	343	372	330
Skilled Nursing Days	2163	2266	2222
OP Visits (OP/Lab/X-ray)	1271	1347	1495
Hospice Patient Days	109	118	84
PT	878	996	1000
Ambulance Runs	30	38	33

<u>Operations District-Wide</u> Prepared by: Louis Ward, MHA, Interim Chief Executive Officer

We have had 2 management meetings over the past few weeks. The first, we had a theme of "transparency" specifically financial transparency. We tasked the group to be mindful of ways to cut unnecessary costs as well as always have a general sense of being cost conscious. The second management meeting, the theme was "Teamwork". We stressed the need for all of us to operate as a team to achieve the goals we all look to achieve as well as take on the many challenges and complexities we face in healthcare. We are very happy with the outcome of the 2 meetings, we have received good ideas from the staff on how we can look to cut costs without impacting patient care, as well as the staff seems to feel empowered to share their thoughts with the group on how we can all work as a team to improve ourselves every day, a great thing.

This month we kicked off a new initiative, TEAM MAYERS. Val, Libby Mee, Keith, and I are meeting weekly to discuss, plan, and implement much of the input that we have obtained through questions posed to the Managers at Management meetings. We are very excited with the progress we have made in the first TEAM MAYERS meeting. We will surely be involving others, including non-managers in subsequent meetings to ensure staff feels very involved in the process as well as ensuring ownership in our vision of (TEAM MAYERS, WHERE PATIENTS COME FIRST!)

We are in the early stages of developing a Financial Advisory Committee here at the hospital. At the moment the Committee will be made up of 6 individuals, Travis, Lisa Akin RN, Adam Dendauw RT, Marlene, Libby Mee, and Louis Ward. This committee will be tasked with reviewing all contracts that will tie the district to a financial obligation of 5K or more, which is almost all contracts. This will be very important as the more eyes on a document the more likely we are to fully understand it. Secondly the committee will be tasked with assisting department managers through a budgetary process which will ensure that all managers have assistance while making staffing and equipment decisions. Much of this committees work can done through email which allows us to continue to keep our busy managers available to perform their many other tasks while providing them a vehicle to get more involved with the financial side of the hospital. We will likely meet once a month as a

group, maybe a bit more often throughout budget season (Apr-June). A member from this committee will also be tasked with reporting to BOD Finance monthly and the full BOD once a quarter.

We have made a change in our HR department. Libby Mee will take on the role and responsibilities as our HR Manager; we feel confident in her skill set and will work with her throughout her professional growth here at Mayers. We plan to start working with our Management Team as well as inquire with external sources regarding outside Human Resources assistance to better assist the HR department. We as the Executive Team do have a framework of what we would like from the department but feel strongly that we engage our Managers and Employees in our efforts to revamp this very valuable department.

Recently we were alerted that Hospitals were not going to be exempted from the State's mandatory water reduction plan. This means we are challenged with reducing our water usage by over 25%. Last year Allen asked if we could get the Riverview House Well on the hospital site working again. I am happy to report that working with Claude Morris we have an operational well on the property that we will be using for irrigating lawns and flower beds. This will drastically reduce our Fall River CSD water bills (500/ month or more). I will go in depth at BOD finance on this topic.

We have negotiated a solution with the Imaging Staff to assist in reducing costs within the department as well as preserve access to imaging services in Burney and increase access to services in Fall River. We did this by staggering the start times of the 2 regularly scheduled imaging techs. The imaging department hours were 7:30-6:00. We have worked with the staff to extend the hours to 7:30-8:00; this allows for additional access to services for our patients as well as reduces the potential for call back pay at a rate or 1.5 times the regular salary. We will work with Val to ensure the community is aware of extended evening hours. As well as providing additional access to scheduling patients for later appointments, we also have brought back the access to standby Ultrasound with no additional cost to the hospital unless the services are needed. The Emergency Room Doctors and the imaging staff are very happy with this decision.

Respectfully Submitted by, Louis Ward, MHA Interim CEO

<u>Chief Clinical Officer Report</u> Prepared by Keith Earnest, Pharm.D.--Chief Clinical Officer

Laboratory

- The new chemistry analyzer is being installed and interfaced the week of August 17th.
- A task force to brainstorm concerning diagnosis codes and screening for lab tests has been assembled and met on August 11th. Task lists were made and many people are working on the issues. The ultimate goal is pre-registration and collecting co-pays upfront with smooth patient experience.
- Mayers laboratory provided services to Mountain Valleys' Health Fairs.

Physical Therapy

• The sound proofing materials for the PT gym have arrived and will be installed this fall.

Respiratory Therapy

- We've received referrals for two new pulmonary rehab patients.
- Respiratory Therapists are standing by for all c-sections.
- The department participated at three of the Mountain Valleys' Health Centers' Health Fairs. We have potentially 5 new patients referred for pulmonary function testing.

Pharmacy

• We are experiencing shortages and backorders of many important antibiotics such as Zosyn®. We are doing our best to use what we have in the most appropriate ways possible.

Imaging

- The imaging department is experimenting with an new schedule that will allow for more evening appointments and a reduction in call back for x-ray and CT.
- A workable call schedule for ultrasound has been developed.

Cardiac Rehab

- Four new patients have been referred and will start as soon as insurance authorization is obtained.
- The patients are enjoying having Mariah Maier, a high school student, volunteering in the department.

<u>Critical Access Hospital</u> Prepared by: Sherry Wilson CNO/Acute

Obstetrics

The OB department has been very busy the month of July delivering 8 babies to healthy mothers. The OB committee met August 6th and worked on some much needed issues in practice and was able to obtain some resolution for issues at hand. This is a HUGE success as there has been much controversy surrounding EIOL (early inductions of labor) and the national standards that we are accountable for reporting on. Also, the OB department was awarded a \$1500 grant from First 5 Shasta for the purchase of Halo sleep sack swaddlers to gift to our patients at delivery. We are very honored to have received the Good Neighbor Grant and happy to put it to great use for the families in our community. Lastly, the up and coming golf tournament funds with assist the OB department in obtaining an Electronic Fetal Monitoring System which will not only assist nursing in safe monitoring practice for mom and baby, but it will provide access to monitor more than one mom in labor, allow more patient privacy, and adequately place OB in compliance for EMR archiving fetal heart strips electronically. This will be a HUGE step towards optimal care delivery in the Obstetrical Department. It is my goal to continue to strive to make the OB department at MMH a safe and pleasant experience for the families in the community and I look forward to many years and generations of babies being born right here in the comfort of the home town hospital.

Holly Green B\$N, RNC Obstetrical Department Manager

Quality Improvement

• The Quality department has been actively focusing on data upload to various organizations to meet deadlines for core measures. Also, we have been working with Healthstream to build the necessary platform for data upload and have been experience minor IT problems along the way. We are hoping to have the issues at hand resolved soon so that our pt experience surveys can begin using this outside vendor. We will continue to research, plan, implement, and evaluate our trends in the National measures set by CMS and obtain the goals to remain under the allotted nationally recognized percentages of error. It is our goal to strive at making quality of care #1 in our everyday practice for our community.

Holly Green BSN, RNC Director of Quality

Outpatient Medical

- A trial run of our new KCI billing process was successful, fulfilling all of the communication needs between departments/agencies involved in acquiring, applying, and billing for wound VACs.
- We are working with BJ Macy, Social Services, to provide guidelines for patient referrals for Outpatient Services vs. Home Health care services. We hope to work together with the new home health agency now available in the intermountain area.
- The Outpatient Manager is beginning the set up of the wound care clinic in Burney, in the old
 urgent care area. The targeted spring time opening was delayed due to the Outpatient Managers
 time away d/t family health concerns. A Burney Wound Care Clinic will be available starting
 September/October; at least once a month with Dr. Zittel is our goal.

Surgery

- Dr. Syverson had 2 week vacation in July, so the referrals dropped. They are now coming in as before.
- In an effort to keep costs down. 4 Surgery staff members took vacation time during Dr. Syverson's absence.
- The last week of July I think we made up for all the rest of July! Lots of surgeries!
- Received grant funds for a DPM6 cardiac monitor and a Precision saw for Dr. Guthrie. They are in the process of ordering
- Surgery was represented at the Pit River Health Fair.

Infection Control

 Infection Control has completed the draft policy and procedure and consent forms for pneumococcal vaccine PCV13 in addition to PPSV23, for Mayers skilled nursing population.
 Dr. Weinhold, Watson and Dahle all have given authorization for their residents to receive both of the vaccines.* Our current population have received the PPSV23 and now will receive the PCV13 after consent has been obtained. We are following the guidelines/recommendations of the CDC and APIC. Future residents admitted to SNF will have an order to receive both again following the guidelines of the CDC and APIC.

Shelley Lee RN

Census is at

<u>Skilled Nursing Facility – Burney & FRM</u> Submitted By: Sherry Wilson, RN, CNO

MAYERS MEMORIAL HOSPITAL DISTRICT BOARD OF DIRECTORS

RESOLUTION 2015-3

WHEREAS, the Governing Board of Directors is responsible for the preparation and adoption of a final budget, which provides a financial plan, including estimated revenues, expenditures and reserves, for operation during the fiscal year July 1 through June 30.

WHEREAS, the budget submitted is required by law to be a balanced operating budget for year July 1, 2015 through June 30, 2016; Total Net Patient Revenue \$21,907,000 with a bottom line of \$1,190,900.

NOW, THEREFORE, the undersigned certifies and attests that the above resolution was approved at a regular meeting of the Board of Directors, Burney, California, the 26th day of August 2015.

PASSED AND ADOPTED on August 26, 2015, by the following vote:

AYES:

NOES:

ABSENT:

ABSTAIN:

Date

Abe Hathaway, President
Board of Directors
Mayers Memorial Hospital District

Beatriz Vasquez, PhD, Secretary
Board of Directors

Mayers Memorial Hospital District

MAYERS MEMORIAL HOSPITAL DISTRICT FISCAL ENDING 6/30/2016 BUDGET

OPERATING INCOME

Net Patient Revenue (including bad debt expense) Other Revenue	\$ \$	21,907,000 1,653,200
Total Operating Income	\$	23,560,200
OPERATING EXPENSES		
Salaries	\$	10,288,900
Employee Benefits	\$	3,008,200
Professional Fees	\$	2,194,700
Supplies & Other Expenses	\$	3,252,100
Purchased Services	\$	2,145,300
Rent & Leases	\$	156,800
Insurance, Licenses and Taxes	\$	399,200
Interest	\$	765,000
Depreciation & Amortization	\$	1,357,100
Total Operating Expense	\$	23,567,300
Net Operating Income		
(LOSS)	\$	(7,100)
Capital Cont / Investment	\$	1,000
Other Non-Op Income	\$	118,800
AB 8 Property Taxes	\$	721,500
GO Special Tax	\$	356,700
Total Non Operating Income	\$	1,198,000
Net Income (Loss)		
	\$	1,190,900