



Mayers Memorial Hospital

Chief Executive Officer
Louis Ward, MHA

Board of Directors

Michael D. Kerns, President
Beatriz Vaupiez, PhD, Vice President
Abe Hathaway, Secretary
Allen Albaugh, Treasurer
Laura Beyer, Director

BOARD OF DIRECTORS
MEETING AGENDA
April 26, 2017 1:00 pm
Board Room (Burney)

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.

1	CALL MEETING TO ORDER – Mike Kerns, President	
2	<p>CALL FOR REQUEST FROM THE AUDIENCE: PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS: Persons wishing to address the Board are requested to fill out a "Request Form" prior to the beginning of the meeting (forms are available from the Clerk of the Board (M-W), 43563 Highway 299 East, Fall River Mills, or in the Board Room). If you have documents to present for the members of the Board of Directors to review, please provide a minimum of nine copies. When the President announces the public comment period, requestors will be called upon one-at-a-time, please stand and give your name and comments. Each speaker is allocated five minutes to speak. Comments should be limited to matters within the jurisdiction of the Board. Pursuant to the Brown Act (Govt. Code section 54950 et seq.) action or Board discussion cannot be taken on open time matters other than to receive the comments and, if deemed necessary, to refer the subject matter to the appropriate department for follow-up and/or to schedule the matter on a subsequent Board Agenda.</p>	
3	<p>APPROVAL OF MINUTES: 3.1 Regular Meeting – March 22, 2017 (Attachment A)</p>	ACTION ITEM
4	<p>Department/Operations Reports/Recognitions:</p> <p>4.1 Resolution 2017-05—March Employee of the Month (Attachment B)</p> <p>4.2 ACHD Certified Healthcare District Presentation, Ken Cohen ACHD.....</p> <p><i>*Please Note:</i> Chief reports will now be at the end of the agenda in order to expand on discussion or answer questions regarding items that were addressed on the full agenda.</p> <p>4.2 Scheduled Director Report – Adam Dendauw, Director of Clinical Services (Attachment C)</p> <p>4.3 Director of Operation Report – Ryan Harris (Attachment D)</p> <p>4.4 Hospice Quarterly Report – Mary Ranquist, Manager</p>	<p>ACTION ITEM Presentation</p> <p>Report Report Report</p>
5	<p>BOARD COMMITTEES:</p> <p>5.1 Finance Committee –Chair Allen Albaugh</p> <p>5.1.1 Audit Report Via Webex</p> <p>5.1.2 Committee Meeting Report</p> <p>5.1.3 March 2016 Financial review, AP, AR and acceptance of financials</p> <p>(Dispersed Separately)</p> <p>5.2 Strategic Planning Committee –Chair Mike Kerns</p> <p>5.2.1 Committee Meeting Report</p>	<p>ACTION ITEM</p> <p>Information ACTION ITEM ACTION ITEM Information</p>

Date: March 22, 2017

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

Mike Kerns, President
Beatriz Vasquez, Vice President
Abe Hathaway, Secretary
Allen Albaugh, Treasurer
Laura Beyer

Board Members Absent: none

Staff Present: Louis Ward, CEO; Travis Lakey, CFO; Libby Mee, Director of Human Resources; Theresa Overton, Director of Nursing; Adam Deridauw, Director of Clinical Services; Marlene McArthur, JHF Exec Director; Valerie Lakey, DOPR/Clerk of the Board

- 2. CALL FOR REQUEST FROM AUDIENCE TO SPEAK TO ISSUES OR AGENDA ITEMS:**
2.1 Public Comment – none

- 3. APPROVAL OF MINUTES** – A motion/second and carried, the Board of Directors accepted the minutes of the February 21, 2017 Regular Board Meeting. **(Vasquez, Beyer) – Approved All** Fix members of the board.

4. Department/Operations Reports/Recognitions:

4.1 Resolution 2017-4–February Employee of the Month **(Exhibit 1)** Dorothy Hutchison was recognized as February 2017 TEAM MAYERS MVP. Presented by Beatriz Vasquez (Hathaway, Beyer) **Approved All**

***Please Note:** Chief reports will now be at the end of the agenda in order to expand on discussion or answer questions regarding items that were addressed on the full agenda.

4.2 Director of Operations report – Ryan Harris (Written report provided in packet)

- Discussion of old clinic space in Burney, reviewed the initial diagram and information. Albaugh asked to see if we can utilize the space in the annex part of the building. Harris will bring Plan A and Plan B to next meeting
- SNF Refresh committee met last week to discuss color, materials, etc. We will bring in a design professional to help with interior design. Cost estimate is \$160,000. Most labor will be done in house.
- Project Overview list will be provided once a quarter.
- Environmental Services – looking at putting laundry in the Right Road building. Cost analysis was provided. See finance notes, Board agenda item for April.

4.3 Scheduled Director Report – Libby Mee, Director of Human Resources – (Written report provided in packet) In addition to the submitted written report: Last year we were using long term registry – have eliminated with permanent staff. We do have one CLS registry that may stay on permanently. Using an Ultra Sound tech traveler currently. Long-term travelers are through Medi-fice. Current – looking at lab CLS. CNA registry in SNF has been reduced. We have four CNA students from last class. There will be a new class beginning in August. Ward noted that he is working with other facilities in starting our own registry. Mee will be attending IOT Career Fair and the Community Center Career Fair in Burney. Mee also reviewed the new evaluation software.

4.4 Workers Compensation Quarterly Report – see written report. We are doing well with overall performance. Patient handling in SNF is most common area of claims. We are looking at training, etc. Working with Jack Hathaway and meeting with BETA team. There are some recommendations for

equipment for housekeeping, etc. Mee will show Harris the things that were identified on facilities with BETA rep.

5. BOARD COMMITTEES:

5.1 Finance Committee – Chair Allen Albaugh

5.1.1 Committee Meeting – Albaugh reported on the Finance Committee meeting. Meeting minutes are available on the website. A handout from T. Lakey about where funds come from. (*Exhibit 1*) We have 93 days cash on hand!

5.1.2 February Financials – (Albaugh, Hathaway) – Approved All

5.1.3 Approval of Hospital Credit Card (Albaugh, Hathaway) – Approved All

5.2 Strategic Planning Committee – Chair Mike Kerns

5.2.1 Committee meeting – Kerns reported on the committee meeting. See minutes on the website. Discussion items included:

- Dave Jones from MVHC along with a board member – relationship of the two organizations. Looking at different ways to help make the two organizations more effective.
- Looking at a variety of options, contacting consultants to get some direction.
- In the data gathering phase – questions regarding the governance structure.

5.3 Quality Committee – Chair Beatriz Vasquez

5.3.1 Committee Meeting Report – Reported on dietary, Point Click Care (new EHR for SNF) the program will be of great benefit in the areas of quality, Purchasing report – tier pricing through Dignity Health. PRIME report.

6. NEW BUSINESS

6.1 Updated Compliance Plan – Questions for Jack regarding difference in Quality committees, will refer back to Quality committee for further discussion.

6.2 Updated Organizational Chart – Ryan/Ops will oversee IT dept (IT security/HIPAA under Jack); *Albaugh/Hathaway, all approve*

6.3 Policies for Approval – *Albaugh/Vasquez, all approved*

- Crisis Communications Plan – *Very large document, would like “key points” simplified for easy viewing*
- Administration of Cathflo Activase (Alteplase) in a CVAD
- Cardiac Stress Testing (CST) - Exercise
- Emergency Operations Plan
- Mopping the IV Room (Pharmacy)
- Floor Cleaning Log, IV Room MMH580
- Prompt Pay Discount

7. ADMINISTRATION REPORTS:

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

- **Louis Ward, CEO – *In addition to the written report:*** completed design development portion, going through USDA notes on Layton contract, contract expected by April; SEMSA transition is complete, working on ER staffing (ER tech or source nurse), construction of ambulance garage should be done April; PCC planning on-site visits, would like to send dietary and finance, Plumas will be here soon; MMHD has received Certified Healthcare District designation from ACHD, everyone contributed to process (ethics training); provided and explained handout from CHA.
- **Travis Lakey, CFO** – Audit will be returned next week.
- **Keith Earnest, CCO – *In addition to the written report: none***
- **Sherry Wilson, CNO – *In addition to the written report: none***
- **Marlene McArthur, IHF Director** – Campaign cabinet working hard on reaching goal before going to the public for donations; happy to be a part of the SNF refresh project, almost \$50k to go towards project, includes \$32k anonymous donation; current award cycle is open, over \$50k applied for, thrift store volunteers will look at applications and make recommendation, awarded in May; scholarship cycle open as well, due May 1st; IHF board had concerns about USDA loan but Ward reassured that we will have that; working with 2 property gifts at the moment; thank everyone for attending and contributing to choc festival, \$15k earned, goes towards SNF refresh project; meeting with donor recognition vendors about lobby, also discussing gift shop and if it's worth the space in the new lobby.

**8. INFORMATION/BOARD EDUCATION/ANNOUNCEMENTS
BOARD COMMENTS, UPCOMING EVENTS, ETC. –**

HEALTH FAIR – APRIL 8TH

Travis, Louis & Beatriz attended Rural Healthcare Symposium

Val & Louis attended CHA Leg Days

ACHD Leg Days soon – Val, Allen & Abe attending

FUTURE AGENDA ITEMS:

- IN-HOUSE LAUNDRY

9. Announcement of CLOSED SESSION – 3:14 pm – Approved All

9.1 Government Code Section 54957:

Quality Assurance: Quality Improvement Issues, Medical Staff Report (Dr. Tom Watson, Chief of Staff)

MEDICAL STAFF REAPPOINTMENT

Allen Morris, MD – Pathology
Scott Zittel, DO – Wound Care

MEDICAL STAFF APPOINTMENT -

Jesse Livingston, MD - Emergency

9.2 Real Property Government Code Section 54956.8

9.3 Personnel Government Code 54957

10. Reconvene Open Session - (Albaugh/Hathaway) All Privileges Approved

Continue discussion on property for staff housing - If advised, will need to post agenda w/one item (Beyer, Albaugh, Vasquez will attend)

12. ADJOURNMENT: There being no further business, at the hour of 3:28 p.m., President Kerns declared the meeting adjourned. Next meeting April 26, 2017 – 1:00 pm– Burney

Where MMHD's Operating Funds Originate

Payor	Total	%
Partnership/Medi-Cal	5,939,710	31.85%
Medicare	3,956,785	21.22%
Commercial	3,135,723	16.81%
Private Pay, Self Pay, SOC, Bad Debt	1,334,126	7.15%
HQAF	1,085,646	5.82%
Prime	750,000	4.02%
PHP OP Supplemental	599,425	3.21%
PHP IGT	573,449	3.07%
Property Taxes	472,022	2.53%
Miscellaneous (Rebates, Rent, Pharm)	424,035	2.27%
PHP Retro Rate DPNF	158,728	0.85%
Medicare Cost Report	124,388	0.67%
Traditional IGT	95,542	0.51%
Total	18,649,579	

Partnership is Medi-Cal Managed Care which is the majority of our Medi-Cal Population

Hospital Quality Fee

Partnership IGT

MMHD's portion of the 1% that Shasta County Collects on Property Taxes

Retro Payments for a new SHF

Rate

Note: Most Supplemental Payments are based off seeing Medi-Cal Patients. Calhenna is the second lowest seeing Medicaid state. Supplemental payments are meant to get you closer to your cost of providing care





Mayers Memorial Hospital District

Always Caring. Always Here.

RESOLUTION NO. 2017-5

A RESOLUTION OF THE BOARD OF TRUSTEES OF MAYERS MEMORIAL HOSPITAL DISTRICT RECOGNIZING

Christal Jimenez **As March 2017 EMPLOYEE OF THE MONTH**

WHEREAS, the Board of Trustees has adopted the MMHD Employee Recognition Program to identify exceptional employees who deserve to be recognized and honored for their contribution to MMHD; and

WHEREAS, such recognition is given to the employee meeting the criteria of the program, namely exceptional customer service, professionalism, high ethical standards, initiative, innovation, teamwork, productivity, and service as a role model for other employees; and

WHEREAS, the MMHD Employee Recognition Committee has considered all nominations for the MMHD Employee Recognition Program;

NOW, THEREFORE, BE IT RESOLVED that, Christal Jimenez is hereby named Mayers Memorial Hospital District Employee of the Month for March 2017; and

DULY PASSED AND ADOPTED this 26th day of April 2017 by the Board of Trustees of Mayers Memorial Hospital District by the following vote:

AYES:
NOES:
ABSENT:
ABSTAIN:

Mike Kerns, CHAIRMAN
Board of Trustees, Mayers Memorial Hospital District

ATTEST:

Valerie L. Lakey
Clerk of the Board of Directors



Chief Executive Officer
Louis Ward, MHA

Mayers Memorial Hospital District

Board of Directors
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Boutrix Vasquez, PhD, Vice President
Abe Lathaway, Secretary
Allen Albaugh, Treasurer
Laura Bayer, Director

Clinical Department Board Report

Cardiac: We have recently been the recipients of numerous exercise equipment donations or grant awards, this has helped to modernize the gym for cardiac rehab/maintenance patients, as well as allow employees to fully utilize the commercial grade treadmills. All articles of infrastructure are put in place to begin Cardiac Stress Treadmill Testing. Contracts for cardiology have been established with Dr. Khan, all charge codes and CPT codes have been built in our system and the Policy/Procedure has been approved by Medical Staff. We are awaiting Dr. Dahle to complete his secondary training on the stress tests in order to go live.

Cardiac rehab was a big draw at our health fair, as always. Trudi donated a healthy lifestyle raffle prize valued at over \$300 as well as screened blood pressures for the public. The winner of the basket was won by the generous community members who donated the newest treadmill.

Imaging: Ongoing assessment of future projects continues in the imaging department. Interventional Radiology (IR) is being researched and developed. Once in place IR could contribute to a noticeable increase in imaging revenue. Establishing this new service in the area will also allow us to capture increased imaging market shares in IR, ultrasound and CT services. Imaging equipment for the building project continues to be evaluated with multiple product demonstrations completed and future demos scheduled. Electronic physician orders recently went live between the local clinics and Mayers. This will allow providers to digitally input and send orders to the imaging department, similar to the laboratory system, thus reducing faxes and streamlining the process. The system is not without its faults, but it is my goal to use this as a means to strengthen the relationship between imaging and the clinics as we continue to work together to establish the process. Imaging personnel have been stable for the last six months with little registry needed in the department.

Laboratory: The Lab has completed all quality controls and parallel testing and is ready to go live with all panels of the BIOFIRE analyzer. The Biofire will allow us to rapidly screen, within 60 minutes, patients for a variety of viruses and bacteria. This will allow physicians to quickly determine the best patient care path for patients with specific respiratory, gastrointestinal, blood or spinal fluid infections. Upon building the financial aspect of the tests, a comprehensive study of the local lab pricing for these tests was conducted, we were able to price our testing below this and maintain a reasonable profit margin. As we go live, we will work closely with Val Lakey in

making this a huge marketing tool, as we are often criticized for lab prices. I would like to also use this marketing as a way to reintroduce lab services to the new providers at the local clinic, which can lead to increased referrals from the clinics as we are in a decline due physicians leaving. Chris Hall has been instrumental in helping with the design development portion of the new building project, helping with equipment planning, layout and regulations.

Jude has past her California Clinical Laboratory Scientist (CLS) exam and Candy, our current traveler, is interested in committing to Mayers as a regular employee once her contract is up. This will give Lab much needed CLS coverage, both reducing overtime and registry costs.

Lab personnel have been participating in various outreach programs, such as the high school career days, Mountain Valley health fair, and of course they are the corner stone to our spring health fair approximately 210 labs were drawn this year at the fair. At the Chocolate Festival, Lab employees pulled resources, put together and donated the grand prize raffle basket, which received many complements.

Respiratory: A respiratory therapy student for Oregon Institute of Technology will be completing her clinical extern here at Mayers Memorial Hospital. Pulmonary function testing referrals are beginning to increase again after the difficult winter and the shuffling of physicians at the clinics. I took a half day to meet and greet with the newer providers, introducing myself in order to reestablish relationships, providing them with literature and our easy to use referral form. A brief discussion was had about the referral process and the roadblocks they face on their end as it relates to referrals. Luckily there were no negative remarks about the referral process to the respiratory department, but there were other department referral processes that needed to be revisited and streamlined. As an organization we will be having another meeting with MVHC on April 11th where we can discuss the issues as a collective. I have also helped with various portions of the design development process for the new building, most notable being working with our equipment planner Ian in order to streamline the equipment selection process for the various departments and help facilitate discussion between him and our department managers.

Currently we are spear heading the PRIME Project anchoring it with the Million Hearts initiative. We are almost at 50% of our patient population goal with a great deal of time left in the year to complete the project. Upon reporting the completion of our metrics we stand to receive \$750,000 for these IGT funds by the end of the year. We will continue to collect data, patient statistics and assess the projects needs going into the next reporting year of the project.

The respiratory department has also participated in various community projects, such as the career days, MVHC health fair, hospice chairity, the chocolate festival and doing spirometries for patients at our spring health fair, where we saw a total of 22 patients.

Respectfully Submitted,

Adam Dendauw BSRC, RRT, AEC | Director of Clinical Services

Mayers Memorial Hospital District Operations Board Report

Submitted by Ryan Harris, Director of Operations

April 2017

Plant Operations & Maintenance

1. Burney Outpatient Services Analysis
 - a. I have received a schematic estimate from Porter Consulting for remodeling the old clinic at the Burney Annex for Burney Outpatient Services. They came back with an estimated cost per square ft. of \$167.96. This is in line with the rough estimate from Erdman of \$150 – 200 per square ft. We are currently verifying the square footage of the building and will present the total cost at the April or May board meeting.
 - b. Porter consulting is currently working on a construction estimate to put PT and other services in the existing Annex instead of the old clinic space. I am hoping to have that information by the May Board Meeting.
2. SNF Refresh Project
 - a. Greenbough Design has been brought on to assist in the design of the Skilled Nursing Refresh project. I am excited to get their expertise on this project and look forward finalizing the design in the next 4-6 weeks.
3. Building Heating and Air Units
 - a. AC 4 went down on April 17th and we are unable to get replacement parts. We have adjusted the adjacent heating units and are monitoring the temperature hourly to ensure we stay between the required temperature of 71° and 81°. Dave Burks and I are looking into replacement units and a HVAC contractor to do the install. We will be opening an OSHPD permit and are hoping to find a pre-approved OSHPD unit that will work for our facility. This issue has refreshed my concerns over our aging HVAC infrastructure and the difficulty getting parts for some of the older units.
4. Other projects completed
 - a. The SEMSA ambulance garage project, Telemed/IR room, new facility break room, additional security camera project, as well as complete routine maintenance on two patient rooms were completed over the past month. The maintenance team is also focusing on landscaping, grounds cleanup, spring cleaning of the storage shed, and reviewing Mock Survey results in preparation for state and Life Safety surveyors.

Hospital Expansion

1. We are currently working on tying up loose ends still pending from the design phase such as selecting a headwall vendor. These are non-critical decisions that do not delay the contractor from moving into construction documents (CD's). These decisions can be plugged into the plans at a later date, but need to be completed by the initial CD drawings submission of July 17, 2017. I am currently working on RFP's for all equipment over \$10,000 per the USDA requirement. Although this phase is slower for the Mayers team than the design phase, the architect and contractors are hard at work behind the scenes on the construction documents and keeping us on schedule. We are still speaking weekly to ensure our schedule is maintained and we are well informed of the progress being made.

Dietary

1. Susan Garcia and her staff are working on learning the assessments in Point Click Care and getting ready for another exciting Hospital Week in May.

Environmental Services

1. In-house Laundry Highlights
 - a. Improved linen quality for our patients and residents.
 - b. Additional jobs in the community.
 - c. Savings of up to \$1,177,000.00 in the first 10 years.
 - d. The EVS staff is very excited to move forward with this project and to provide a better linen service to our patients and residents.

Purchasing

1. Steve Sweet and I are finalizing our Paperless PO process. We no longer print out all of the documentation for signature, instead everything is digitally signed by myself and I review orders in McKesson's material management before they are ordered and a PO assigned. Steve also brings to my attention any orders out of the norm that I need to review. We have set up a process for Amazon orders, which come to me for approval. This process has cut down on waste and provided more scrutiny on orders being placed.

Information Technology

1. Chris Broadway, the IT staff and I have numerous projects we are in the process of implementing. The projects we are working on are listed below as well as the current status of the project.
 - a. Paragon 14 build (Status Ongoing) – It is the beginning of our implementation. McKesson is working on the upgraded servers and setting up the Paragon version 14 in the EMR test environment this week.
 - b. MVHC Radiology Interface (Status Hold) – We have a request in for additional interface licenses because we cannot continue without them.
 - c. Point Click Care Hardware (Status Pending) – The equipment order was placed last week. We have confirmed rollout details. Unknown delivery date.
 - d. Network and Camera Upgrade in the Burney Annex (Status Ongoing) – We have received the missing equipment for the wireless network and will be installing it this week. There is outstanding configuration on the new cameras needed and we are waiting for an upgraded server to complete adding new cameras. Unknown server delivery date.
 - e. Wireless Upgrade Fall River (Status Pending) – equipment was ordered to upgrade existing wireless connection points to improve bandwidth and performance.
 - f. Server upgrade (Status Ongoing) – in the next two weeks we will be setting up a replacement server for one of the older MMHD infrastructure pieces.
 - g. Telemed Camera and System Upgrade and Build (Status Mixed) – Apex will be taking over the problem with the ED telemed cart on 4/20. The upgraded telemed room equipment order is still on hold.
 - h. Outpatient Services EMR Enhancement (Status Ongoing) – We met with Outpatient Services last week to begin the process of improvement for their assessments, billing, and charting for nurses and physicians.

- i. Pharmacy RX30 migration (Status Pending) – migration of RX30 software to a new Linux VM for higher availability and disaster recovery. We will be in contact with their support team this week to complete the setup process and then stage the migration.

The following are the new and revised Policies and Procedures that have been approved by the Policy and Procedure Process. These policies and procedures have been put in the appropriate hospital manuals.

Date: March 31, 2017

For Quarter Ending March 31, 2017

Manual Name	Document Name/Policy	New/Revised
Emergency	Telephone Follow Up Progress Note MMH499	New
Purchasing	Training for New Personnel - Purchasing	New
Acute - Med Surg	Admission Information MMH460	Revised
Acute - Med Surg	Admission Policy, Acute	Revised
Acute - Med Surg	Admissions Forms Checklist MMH459	Revised
Acute - Med Surg	COMPREHENSIVE PAIN ASSESSMENT FORM MMH138	Revised
Acute - Med Surg	Conditions of Admissions MMH458	Revised
Acute - Med Surg	Consent, Informed Patient	Revised
Acute - Med Surg	Discharge Planning Record - MMH228	Revised
Acute - Med Surg	EKG Policy, Fall River	Revised
Acute - Med Surg	Fall Interventions, Standard and High Risk	Revised
Acute - Med Surg	Foley Catheter Irrigation	Revised
Acute - Med Surg	IC Brochure MMH456	Revised
Acute - Med Surg	Identification, Patient	Revised
Acute - Med Surg	Important Message from Medicare CMS-R-193 01-2003	Revised
Acute - Med Surg	Medication Administration Using Barcoding System	Revised
Acute - Med Surg	Medication Reconciliation	Revised
Acute - Med Surg	Pain Management Flow Sheet MMH143	Revised
Acute - Med Surg	Pain Management MMH453	Revised
Acute - Med Surg	Patient Assessment Record MMH157	Revised
Acute - Med Surg	Patient Care Plan - Interdisciplinary MMH274	Revised
Acute - Med Surg	Patient Care Plan Interdisciplinary Guidelines	Revised
Acute - Med Surg	Patient Responsibility MMH452	Revised
Acute - Med Surg	Physician Orders - Medication Reconciliation & Order Form MMH156	Revised
Acute - Med Surg	Pre-op Clinic	Revised
Acute - Med Surg	Proctorship Program - Non-Surgical MMH528	Revised
Acute - Med Surg	Restraint Record, Med-Surg Acute Care FORM MMH250	Revised
Acute - Med Surg	Tablets, Splitting	Revised
Acute - Med Surg	Transfer Report, Intrafacility MMH239	Revised
Acute - Med Surg	Transfer Report, Transfer in Level of Care - Intrafacility	Revised
Acute - Med Surg	Utilization Review and Discharge Planning	Revised
Acute - Med Surg	Venipuncture Considerations for Infants and Small Children	Revised
Business Office	HHS POVERTY GUIDELINES - 75% MMH388	Revised
CAH	Scope Of Services MMHD	Revised
Disaster	Burney Facility Map	Revised
Disaster	Disaster Call Tree	Revised
Disaster	Disaster Plan Callback Roster	Revised
Disaster	Fatality Management Plan - Mortuary Services	Revised
Disaster	Fire, Fire Drill - Internal Disaster Plan	Revised
Disaster	FRM Facility Map	Revised
Emergency	Blood and Body Fluid Spill Kit, Guide for Use	Revised
Emergency	FOCUS PDCA Handout2	Revised
Emergency	Medicare Outpatient Observation Notice (MOON)	Revised

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Date: March 31, 2017

For Quarter Ending March 31, 2017

Manual Name	Document Name/Policy	New/Revised
Emergency	Performance Improvement Plan ER Nursing Services	Revised
Emergency	Tetanus Vaccine Administration	Revised
Employee	Check Request	Revised
Employee	Complaint (Non-Employee)	Revised
Employee	Discipline Corrective Action	Revised
Employee	Discrimination; Non	Revised
Employee	Hours Reduction Policy	Revised
Employee	Inservice Education Program	Revised
Employee	MMH60-General Rules of Conduct (Discipline Correction Action p&p)	Revised
Employee	Paid Sick Leave	Revised
Employee	Reporting Concerns and/or Filing a Grievance Brochure	Revised
Employee	Smoke and Tobacco Free Campus	Revised
Employee	Stop Smoking Contract MMH61	Revised
Employee	Wage Administration	Revised
Employee	Workshop Request Form MMH242	Revised
HIPAA	Administrative Safeguard - Assigned Security Responsibility	Revised
HIPAA	Authorization and or Supervision - HIM/HIPAA	Revised
HIPAA	Implementation Specification Unique User Identification	Revised
HIPAA	Request to Amend Protected Health Information Policy	Revised
HIPAA	Standard Workstation Use	Revised
Hospice	Complaint Resolution - Hospice	Revised
Hospice	Coordination of Services	Revised
Hospice	Core Services	Revised
Hospice	Death of a Hospice Patient	Revised
Hospice	Dietary - Services	Revised
Hospice	Discharge from Hospice Care	Revised
Hospice	Infection Control - Bag Technique	Revised
Hospice	Infection Control - Biohazardous Waste Management	Revised
Hospice	Transfer of a Hospice Patient	Revised
Hospice	Traveling Hospice Patients	Revised
Hospice	Written Agreements	Revised
Housekeeping	CT Trailer-Scanner Cleaning	Revised
Imaging	Consent Form for CT-IVP MMH206	Revised
Imaging	Contrast Media for Imaging Examinations, Administration of Intravenous IV	Revised
Imaging	Forearm X-Ray	Revised
Imaging	PATIENT PREPARATION FOR RADIOLOGY PROCEDURES	Revised
Imaging	Soft Tissue Lateral Neck X-Ray	Revised
Imaging	Voiding Cystourethrogram	Revised
Infection Control	Communicable Illness, Employee Reporting and Surveillance	Revised
Infection Control	Pneumococcal Vaccination Documentation - SNF MMH444	Revised
Infection Control	Scabies in SNF Facilities	Revised
Infection Control	Sterilizing/Disinfecting and Hand and Body Hygiene Agents Approved	Revised
IV-Med	Dopamine Administration in Renal Doses	Revised

The following are the new and revised Policies and Procedures that have been approved by the Policy and Procedure Process. These policies and procedures have been put in the appropriate hospital manuals.

Date: March 31, 2017

For Quarter Ending March 31, 2017

Manual Name	Document Name/Policy	New/Revised
IV Med	Scope of Service Pharmacy	Revised
Medical Staff	Application for AHP Appointment	Revised
Medical Staff	Bylaws, Medical Staff	Revised
Medical Staff	Manual Review and Approval MMH289	Revised
Obstetrics	Physician Orders Newborn MMH12	Revised
Outpatient Medical	Central Venous Catheter Removal	Revised
Outpatient Medical	Charge Sheets, Out Patient Medical Services	Revised
Outpatient Medical	Integration of Services Outpatient to Inpatient and ER	Revised
Outpatient Medical	Negative Pressure Wound Therapy VAC	Revised
Outpatient Medical	Outpatient Forms - Nursing Documentation	Revised
Outpatient Medical	Outpatient Services- Ostomy Care Documentation Sheet MMH477	Revised
Outpatient Medical	Scheduling, Outpatient Medical	Revised
Outpatient Medical	Scope of Services, OP Medical Services	Revised
Outpatient Medical	Transparent Film Dressing - Wound Care	Revised
Outpatient Medical	Types of IV Access MMH386	Revised
Pharmacy	Action Notice, Pharmacy Nursing	Revised
Pharmacy	Controlled Substance Storage	Revised
Pharmacy	Floor Stock Access Form-Sign Out Sheet MMH243 (SNF)	Revised
Pharmacy	Glucose Schedule, Finger Stick	Revised
Pharmacy	High Alert Medication Flow Sheet MMH326	Revised
Preprinted Orders	Physician Orders - Community Acquired Pneumonia Adult MMH20	Revised
Preprinted Orders	Refusal of Care (AMA) Transfer Information and Release Form MMH393	Revised
Preprinted Orders	REFUSAL OF TRANSFER, AGAINST MEDICAL ADVICE, INFORMATION AND RELEASE FORM for OB MMH393 OB	Revised
Quality	DEPARTMENTAL QI REPORTING FORM MMH56	Revised
Respiratory Therapy	Concentrator Maintenance Log MMH51	Revised
Respiratory Therapy	Oxygen Concentrator Maintenance	Revised
Skilled Nursing	Alarms, Exits And Entrances, ADCU	Revised
Skilled Nursing	Bed Cleaning	Revised
Skilled Nursing	Bladder Assessment	Revised
Skilled Nursing	Care Plan - Fall With Injury MMH130P	Revised
Skilled Nursing	Dental Emergencies	Revised
Skilled Nursing	EKG Policy, SNF, Burney Annex	Revised
Skilled Nursing	FALL RISK ASSESSMENT Form MMH186	Revised
Skilled Nursing	Minimal Patient Lift Policy	Revised
Skilled Nursing	Pain Management SNF	Revised
Skilled Nursing	Restorative Care Flow Sheet MMH125	Revised
Skilled Nursing	Restorative Nursing Flow Sheet	Revised
Skilled Nursing	Scheduling, Nursing Staff SNF	Revised
Skilled Nursing	SKIN EVALUATION AND ASSESSMENT MMH128	Revised
Skilled Nursing	Whistleblower Report Form MMH255	Revised
Surgery	Esophagogastroduodenoscopy Procedure EGD	Revised
Surgery	On Call Surgical Staffing	Revised

The following are the new and revised Policies and Procedures that have been approved by the Policy and Procedure Process. These policies and procedures have been put in the appropriate hospital manuals.

Date: March 31, 2017

For Quarter Ending March 31, 2017

Manual Name	Document Name/Policy	New/Revised
Surgery	Preoperative Surgical Site Hair Removal	Revised
Surgery	Scope of Services - Surgical Services Department	Revised
Surgery	Site Verification Correct Surgery	Revised
Surgery	Steris Endoscope Processing	Revised
Surgery	Steris Monitoring	Revised



Mayers Memorial Hospital

Operations Report April 2017

Statistics	March YTD FY17 <i>(current)</i>	March YTD FY16 <i>(prior)</i>	March Budget YTD FY17
Surgeries (including C-sections)	74	101	90
➤ Inpatient	19	38	16
➤ Outpatient	55	63	74
Procedures (surgeries only)	146	210	229
Inpatient	1644	1603	1588
Emergency Room	3038	3043	2700
Skilled Nursing Days	20746	20160	21600
OP Visits (OP Lab X-ray)	11379	12468	13015
Hospice Patient Days	671	1291	1368
PT	8453	8132	8821
Ambulance Runs	327	335	333

Operations District-Wide

Prepared by: Louis Ward, MHA, Chief Executive Officer

SEMSA

As reported in past Board meetings, the Sierra Medical Services Alliance (SEMSA) took over the day-to-day operations of the Mayers Ambulance service on March 1st. The Operations Team for the district has kept a close eye on our new relationship with SEMSA over the past month. Over the past month, the Team has observed a real sense of partnership as well as many new small tests of change that will surely benefit the residents of the district long-term. The EMS staff now have new sleeping accommodations as well as new kitchen and day room facilities on the Mayers campus, located only steps from the Emergency Room. In addition to the updated facilities, there are two newly staffed ambulances in the intermountain area. The Southern Cascades Ambulance District also operated by SEMSA now staffs and ambulance based in Adin, which is assisting in increased coverage within the entire region. The second new ambulance is a critical care ground transport unit which, when needed will be staffed with a critical care nurse and a paramedic. The staff at Mayers looks forward to continued collaboration as onboard new community benefits with the team from SEMSA over the coming months.

POINT CLICK CARE

The Electronic Medical Record (EMR) implementation project continued to move forward this month. The first components of the EMR went live in late March allowing staff to now document within the new system. In conversations with the staff using the EMR, they have responded by saying it is very user friendly and it will eventually save time on documenting, allowing them to spend more time focusing on patient care. Another notable item this month, Ryan Harris, DOO joined the implementation team as co-project manager.

HILL-ROM CUSTOMER EXPERIENCE CENTER VISIT

Theresa Overton -Director of Nursing, Ryan Harris – Director of Operations and I made the trip to Batesville, Indiana where the Hill-Rom CEC is located. The opportunity to take the trip came at a great time as we plan to

publish a series of RFP's in our efforts to select equipment for the new hospital expansion. It was great to see much of the equipment the district is in need of, presented in such a way where it was easy to imagine it located in our new ER rooms, Lobby and other areas of our hospital.

HIGH SCHOOL HEALTH CAREER FAIRS

For the 2nd year in a row, Mayers organized and sponsored health care career fairs at our three local high schools. A great deal of thanks to Val Lakey and Libby Mee for spearheading this fun and worthwhile initiative as well as the many staff who participated in these events. We thank the schools for working with us and allowing us to spend time to educate the students on all of the careers available to them right here at home.

LUNCH & LEARN

This month we continued our efforts to work more closely with the staff from Mountain Valley Health Centers. As reported in past Board meetings we have established a new series of meetings called Lunch and Learns. The purpose of these meetings are to educate the MVHC staff on the activities of the district, particularly any changes to patient services. The topic of this month's meeting was our surgery referral process. We have made many changes to the referral process that we wanted to make MVHC and the providers aware of which we hope will achieve our shared goal of providing a better patient experience. These meetings provide more than just an opportunity to share district activities, it provides staff from both organizations to get together to enjoy each other's company as well as a bite to eat. These meetings have proven to be very successful.

Respectfully Submitted by,
Louis Ward, MHA
Chief Executive Officer

Chief Clinical Officer Report

Prepared by Keith Earnest, Pharm.D.--Chief Clinical Officer

Laboratory

- The laboratory department has drawn, processed and reported the health fair labs. Employee and volunteer lab draws is ongoing. The health fair is a very large volume of labs and the department rises to the occasion every year.
- We are providing patient demographics for billing purposes to LabCorp® for billing purposes.
- Chris Hall, CLS, Laboratory Manager, is working on analyzing outsourced labs volumes versus the cost of bring them in house. Initial reviews shows revenue-enhancing potential.
- Our CLIA license is renewed and all deficiencies identified by the inspector have been corrected.
- The planned upgrade to Paragon® version 14 will have major implications for the laboratory department. Orientation to the new version and planning for implementation has begun.

Physical Therapy

- Two physical therapists are working towards becoming Orthopedic Certified Specialists to best serve our patients.
- The department is working to provide clearer and consistent information to patients on their insurance coverage for physical therapy services.

Respiratory Therapy

- Our first 14 patients have been enrolled in Mayers Million Hearts program (minimum goal of 30 patients). Respiratory Therapy Manager and Clinical Director, Adam Dendauw, RT, is heading up this project.
- Adam Dendauw, RT, is reaching out to new providers in the area concerning the Million Hearts program and the services provided by the respiratory therapy department.

Cardiac Rehab

- The department has already received referrals to the maintenance program from information given out at the health fair.

Pharmacy

- The pharmacy department is working closely with the Point Click Care implementation team in Skilled Nursing to have a smooth product roll out.
- Due to equipment delivery delays the Pyxis® upgrade install has been delayed.

Imaging

- Dr. Anwar, Interventional Radiologist, is scheduled to be at Mayers on April 12th to develop the plan to launch interventional radiology.
- Imaging Manager, Alan Northington, has been focusing on the department's communication with the referring clinics and much progress has been made in the areas of referrals and reporting results.

Skilled Nursing Facility – Burney & FRM

Submitted by: Sherry Wilson, RN, CNO

Census is at 70.

- We are currently in the process of implementing our Point Click Care system.
- We have several modules that are being implemented in pieces.
- The C.N.A.'s and the MDS are up and running.
- We are using the CRM (customer relationship management) modules that will help us track and completed our intake process for admits.
- We have the equipment ordered and waiting for it to come in so the nurses will be able to go live 6/1/17. The aides are currently using the rolling carts that were in OB for charting.

Critical Access Hospital

Submitted by: Sherry Wilson CNO/Acute

Surgery

- OP surgery has provided "Prep Kits" to the Mountain Valley Clinics in BV, FRM, and Burney.
- Dr. Syverson will continue to disperse these kits for Patients who are appropriate for procedure WITHOUT a pre-op Visit
- Some hesitancy from the clinic providers in regards to dispersing "kits" they do not want to be "held accountable" for wrong information or bad preps
- Jennette Spezio is working with Burney Clinic, Robbie and Theresa in creating a more user friendly referral form for both general surgeries and scopes. When completed this will make the referral process go smoother at the Clinic end of the process, as the idea is to have all of the clinics doing referrals to MMH OP surgery the same way.
- Michelle King will begin calling patients on April 1st with a "courtesy call", letting them know that MMH has just received their Referral and that we will begin the process of insurance clearance. Along with the information, she will let them know that they should be receiving a call from the surgery scheduler within the next 4-10 business days (depending on how long it takes for approval from their insurance carrier)
- OP Surgery has also extended the no pre-op visit option to EGD patients (CRNA will look over chart notes for these patients prior to procedure day and determine if they will need a pre-op visit).
- So far for the month of April we have already preformed procedures on 4 patients that have not needed pre-op visits, with another 4 scheduled for this upcoming week.

Acute Care St. 1

- Acute Average Daily Census 1.7 and Swing 2.6 with Length of Stay at 16 days.
- Acute has been sharing staff with ER, Outpatient Medical and Outpatient Surgical therefore have recently hired 2-new full time RN's to orient on Acute. We are working towards developing our nurses to be versatile in all departments.
- Preparing for Skills day for all nursing staff and CNA's.
- Working with Carolyn St. Charles and Jack Hathaway for compliance with Mock Survey.

ER

- Most difficult issue in the ER is staffing for the Resource RN and Tech for night shift. Working together with Acute to develop nursing for this position. The transition with SEMSA has been going well with requesting help from EMS staff when needed.

Submitted by:

Theresa Overton, RN
Acute Care Manager