

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  
Regular Meeting  
Minutes**

October 23, 2019 – 1:00 pm  
Boardroom (Burney)

*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:** Beatriz Vasquez called the regular meeting to order at 1:01 pm on the above date.

**BOARD MEMBERS PRESENT:**

Beatriz Vasquez, President  
Abe Hathaway, Vice President  
Allen Albaugh, Treasurer  
Jeanne Utterback

**ABSENT:**

Laura Beyer, Secretary

**STAFF PRESENT:**

Louis Ward, CEO  
Ryan Harris, COO  
Keith Earnest, CCO  
Candy Vculek, CNO  
Mary Ranquist  
Jessica DeCoito

Val Lakey, Board Clerk

**2 CALL FOR REQUEST FROM THE AUDIENCE - PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS**

**3 APPROVAL OF MINUTES**

3.1 A motion/second carried; Board of Directors accepted the minutes of September 25, 2019 *Hathaway/Utterback* **Approved All**

**4 DEPARTMENT/OPERATIONS REPORTS/RECOGNITIONS**

4.1 A motion/second carried; Regina Blowers was recognized as September Employee of the Month. Resolution 2019-13 *Utterback/Hathaway* **Approved All**

4.2 Director of ED Services – Move to next meeting

4.3 Hospice Quarterly Report – Mary Ranquist – 3.86 Average Daily Census. Target is 3.5. 13.5 average length of stay– 12 month 33 days. Numbers are based on averages. Education of families, from a financial perspective – most comes on admit day. Medicare looks for at least 4 weeks of hospice to provide a good service. Up to 6 months help to take better care of patients and families. Many end up being only 48 hours. Vasquez provided Ranquist with some Hospice info she received. Level of care required and plan of care depends on how busy the staff is. Designated by patient needs. Basically, Hospice does 1-2 visits per week, but some require more. Weekly IDT – each patient is discussed. There is continuous care if needed. Hospice is available 24 hours.

**5 BOARD COMMITTEES**

**5.1 Finance Committee**

5.1.1 **Committee Meeting Report:** Met October 23, 2019. Reports form HR and SNF. In-depth discussion about staffing and payscale, registry.

5.1.2 **September 2019 Financial Review, AP, AR and acceptance of financials.** *Hathaway/Albaugh* **Approved All**

**5.2 Strategic Planning Committee Chair Albaugh**

5.2.1 **Committee Meeting Report** – DRAFT minutes are attached. Beyer made updates to objectives and risks. More aggressive on targets for reducing registry.

5.2.2 **Strategic Plan Review/Approval**

*Albaugh/Utterback*

*Approved All*

5.3 **Quality Committee Chair Beyer**

5.3.1 **Committee Meeting Report** – DRAFT Minutes attached – nothing to add

## **6 NEW BUSINESS**

6.1 **Board Assessment Process** – Longer assessment without optional piece by consensus this is the one that will be used. Val will get it sent out to board next week.

6.2 **Policy & Procedure Summary** - Keith will talk to Pam Sweet about identifying the sunsetted policies. Discussed the policy regarding food from outside sources – an explanation was given. There is designated space for food that is brought in for residents. There are refrigerators, pantry and microwaves.

6.3 **Ad Hoc Nominating Committee** – Vasquez appointed an Ad Hoc committee for nominating next year's officers and committees. Hathaway/Vasquez

*Hathaway/Vasquez*

6.4 **Policy & Procedure Approval**

**ATTACHMENT**

*Hathaway/Utterback*

*Approved All*

1. Alternate Sources of Energy

2. Chemical Spill

3. Chemical Spill - Operating Room

4. Compressed Gas & Oxygen Use

5. Discount Payment Policy

6. Emergency Sewage & Waste Disposal Policy

7. Equipment Cleaning - CR

8. HHS POVERTY GUIDELINES MMH389

9. Internal Reporting Of Overpayments, Self-Disclosure, And Repayments For Federal Health Programs

10. Resident Transfer-Discharge Summary-Plan MMH609

## **7 ADMINISTRATIVE REPORTS**

7.1 **Chief's Reports**

7.1.1 **CEO** In addition to the written report, Ward reported additional information on the pharmacy. Reviewed the provided graph. Discussed prescription insurance. Good Rx app to purchase scripts (patients with no script insurance). Looking at opportunities for district loyalty. Ward explained the 340B program. It is a program which will likely be cut by the state.

Reviewed notes and answered any questions. Ward was asked to serve on the executive committee of DHLF. It will be a benefit which will allow for some rural representation on the committee.

Complimented staff on the recent survey. No support services tags.

Presented pictures of options for the Burney Clinic. RFQ will go out November 4.

Albaugh asked about SEMSA. There is currently not an ambulance in Big Valley. BFD has covered when Mayers ambulance is out because of larger geographic coverage.

Discussed AB5 - Handout was provided

7.1.2 **CCO:** In addition to the written report. Susan Reid was on site to help with 797 requirements. We will not be doing non-sterile compounds. Hood was tested. The USP 800 – handling of hazardous drugs. Will

affect staff the most – There are guidelines on how to roll this out.  
Brigid Doyle – nurse educator will be key in education of the staff.

Telemed grant is going great. (school)

Diabetic educator – via telemedicine.

7.1.3 CFO: In addition to the written. A/R day were down to 49 as of last Saturday. Chargemaster staff was here last week. There is room for growth in OP medical and lab. Questions on mileage reimbursement.

7.1.4 CNO: In addition to the report. Federal CMS survey – there were 5 tags (Fall River had one of them) D tags – no harm. There will be a CDPH Title 22 survey coming. One of the tags – if there were potential abuse – needs to be reported within 2 hours. Candy reviewed the tags and the plan for corrections.

Power point will be sent out regarding the LEAN process.

7.1.5 COO In addition to the written report: FLS – same day exit – went very well. Commended his staff on Survey and FLS.

There are drawings back for the helistop. Will be done in November

Utterback asked about One Content – there are a small percentage of files that need to be moved over by hand.

Ticketing system is going well.

Citrix will be tested next week.

7.2 Construction Change Orders: None

**8 OTHER INFORMATION/ANNOUNCEMENTS**

Legislative Update - Val Lakey gave a legislative report. See Attached

**9 ANNOUNCEMENT OF CLOSED SESSION – 3:00 pm**

9.1 Government Code Section 54962:

*Utterback/Hathaway*

**STAFF STATUS CHANGE**

1. Beverly Chang, MD to Inactive

**AHP APPOINTMENT**

1. Jill Reed, MSW – Social Worker
2. Marchita Masters, PsyD

**MEDICAL STAFF REAPPOINTMENT**

1. Aaron Babb, MD – Family Medicine

**MEDICAL STAFF APPOINTMENT**

1. Sarah Massatt, MD – Emergency Medicine

9.2 Real Property Government Code 54956.8 No action

9.3 Litigation Government Code 54956.9 – Change orders that have been rejected.

9.4 Personnel Government Code 54957 – No Action

**10 RECONVENE OPEN SESSION: 3:30 pm**

**11 ADJOURNMENT**

Next Regular Meeting: December 4, Burney , 1:00 pm

*Beatriz Vasquez*, Board of Directors *President*, certify that the above is a true and correct transcript from the minutes of the regular meeting of the Board of Directors of Mayer's Memorial Hospital District

*Beatriz Vasquez*  
Board Member

*Valerie Lakey*  
Board Clerk

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