

Chief Executive Officer
Chris Bjornberg



Board of Directors
Abe Hathaway, President
Jeanne Utterback, Vice President
Tom Guyn, M.D., Secretary
Tami Humphry, Treasurer
Lester Cufaude, Director

Board of Directors
Regular Meeting Agenda
April 27th, 2023 @ 1:30 PM
Mayers Memorial Fall River Boardroom
43563 HWY 299 E, Fall River Mills, CA

Microsoft Teams: [Click here to join the meeting](#) Meeting ID: 220 912 731 988 and Passcode: TWRpV5
Phone Number: 1-279-895-6380 and Phone Conference ID: 324 334 175#

Mission Statement

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

In observance of the Americans with Disabilities Act, please notify us at 530-336-5511, ext 1264 at least 48 hours in advance of the meeting so that we may provide the agenda in alternative formats or make disability-related modifications and accommodations. The District will make every attempt to accommodate your request.

| | | | | Approx. Time Allotted |
|----------|---|---|---------------------|--------------------------------------|
| 1 | CALL MEETING TO ORDER | | | |
| 2 | 2.1 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, 43563 Highway 299 East, Fall River Mills, or in the Boardroom). 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. | | |
| 3 | APPROVAL OF MINUTES | | | |
| | 3.1 Regular Meeting –March 29, 2023 | <i>Attachment A</i> | Action Item | 2 min. |
| 4 | DEPARTMENT/QUARTERLY REPORTS/RECOGNITIONS: | | | |
| | 4.1 Resolution 2023-05 – March Employee of the Month | <i>Attachment B</i> | Action Item | 2 min. |
| | 4.2 Safety Quarterly | Val Lakey | <i>Attachment C</i> | Report 2 min. |
| | 4.3 Food & Nutrition Services | Susan Garcia & Jen Taylor | <i>Attachment D</i> | Report 2 min. |
| 5 | BOARD COMMITTEES | | | |
| | 5.1 Finance Committee | | | |
| | 5.1.1 Committee Meeting Report: Chair Humphry | | Report | 5 min. |
| | 5.1.2 March 2023 Financial Review, AP, AR and Acceptance of Financials | | Action Item | 5 min. |
| | 5.2 Strategic Planning Committee | | | |
| | 5.2.1 Draft Strategic Priorities Pillars for FY24, Mission, Vision and Values | <i>Attachment E</i> | Action Item | 10 min. |
| | 5.3 Quality Committee | | | |
| | 5.3.1 Committee Report – DRAFT Minutes Attached | <i>Attachment F</i> | Information | 5 min. |
| 6 | OLD BUSINESS | | | |
| | 6.1 Ambulance Services | | Discussion | 10 min. |
| 7 | NEW BUSINESS | | | |

| | | | | |
|-----------|--|--------------------------------------|--------------------|---------|
| 7.1 | Policy and Procedure Summary March 31, 2023 | Attachment G | Action Item | 2 min. |
| | Policies and Procedures: | | | |
| | 1. Medical Staff Bylaws | | | |
| | 2. Standardized Procedures and Protocols for Midlevel Providers | | | |
| 7.2 | 3. Pathology Core Privileges | Sent as a separate attachment | Action Item | 2 min. |
| | 4. Physician Assistant Core Privileges for OP Med | | | |
| | 5. Rheumatology Telemedicine Core Privileges | | | |
| | 6. Medical Staff Rules | | | |
| 7.3 | Master Planning Services: DRAFT Options | Attachment H | Discussion | 10 min. |
| 8 | ADMINISTRATIVE REPORTS | | | |
| 8.1 | Chief's Reports – Written reports provided. Questions pertaining to written report and verbal report of any new items | | | |
| 8.1.1 | Chief Financial Officer – Travis Lakey | | Report | 5 min. |
| 8.1.2 | Chief Human Resources Officer – Libby Mee | | Report | 5 min. |
| 8.1.3 | Chief Public Relations Officer – Val Lakey | Attachment I | Report | 5 min. |
| 8.1.4 | Chief Clinical Officer – Keith Earnest | | Report | 5 min. |
| 8.1.5 | Chief Nursing Officer – Theresa Overton | | Report | 5 min. |
| 8.1.6 | Chief Operation Officer – Ryan Harris | | Report | 5 min. |
| 8.1.7 | Chief Executive Officer – Chris Bjornberg | | Report | 5 min. |
| 9 | OTHER INFORMATION/ANNOUNCEMENTS | | | |
| 9.1 | Board Member Message: Points to highlight in message | | Discussion | 2 min. |
| 10 | ADJOURNMENT: Next Meeting May 31, 2023 | | | |

Posted 04/21/2023

Chief Executive Officer
Chris Bjornberg



Board of Directors
Abe Hathaway, President
Jeanne Utterback, Vice President
Tom Guyn, M.D., Secretary
Tami Humphry, Treasurer
Lester Cufaude, Director

Board of Directors
Regular Meeting
Minutes
March 29, 2023 – 1:00 pm
Burney Boardroom

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.

CALL MEETING TO ORDER: Abe Hathaway called the regular meeting to order at 1:00 PM on the above date.

BOARD MEMBERS PRESENT:

Abe Hathaway, President
Jeanne Utterback, Vice President
Tom Guyn, M.D., Secretary
Tami Humphry, Treasurer
Lester Cufaude, Director

ABSENT:

STAFF PRESENT:

Chris Bjornberg, CEO
Travis Lakey, CFO
Ryan Harris, COO
Theresa Overton, CNO
Valerie Lakey, CPRO
Keith Earnest, CCO
Libby Mee, CPRO
Danielle Olson, Business Office Manager
Kim Westlund, RHC Manager
Rachel Morris, Purchasing Manager
Rowan Dietle, Acting Board Clerk

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

3 SPECIAL PRESENTATION

- 3.1 Annual Audit Summary: Summary presentation of the Required Communication, Financial Statement Review, Financial Analysis, and Accounting Standards update was provided. Another clean audit with no findings and Mayers continues to better its financial ratios to increase financial stability. Thank you to Eric Volk from Wipfli for the presentation. And a thank you to the Wipfli team for helping Mayers get to our financial standings today.

4 APPROVAL OF MINUTES

- | | | | |
|-----|--|-------------------------------|----------------------------|
| 4.1 | A motion/second carried; Board of Directors accepted the minutes of February 22, 2023. | <i>Humphry, Utterback</i> | <i>Approved by All</i> |
| 4.2 | A motion/second carried; Board of Directors accepted the minutes of March 3, 2023. | <i>Humphry, Utterback</i> | <i>Approved by All</i> |

5 DEPARTMENT/OPERATIONS REPORTS/RECOGNITIONS

- | | | | |
|-----|---|-------------------------------|----------------------------|
| 5.1 | A motion/second carried; John Bridgeman was recognized as February Employee of the Month. Resolution 2023-04. John is a great employee – always works hard and has a good attitude. Makes the workplace more pleasant. Ryan Harris stated that John is always working hard and always on task, stays busy all the time. | <i>Utterback, Humphry</i> | <i>Approved by All</i> |
| 5.2 | Business Office: written report submitted. Working on getting forms in English and Spanish. Working a lot of Cerner related projects. And we are bringing Hospice billing back in house, so lot's of training has been occurring. | | |

| | | | |
|----------|---|-------------------------------|----------------------------|
| 5.3 | Purchasing: written report submitted. Review of pillars took place. COO mentioned that a new yellow tagging process will help with inventory loss. CFO mentioned that we have a new GPO vendor that we will be working with. | | |
| 5.4 | Rural Health Clinic: written report submitted. Review of pillars took place. Pediatric patient numbers are up. | | |
| 6 | BOARD COMMITTEES | | |
| 6.1 | Finance Committee | | |
| 6.1.1 | Committee Report: Cash on hand is lower for February and expect to dip even more into March. We've received 2 applications for the Utilization Review Nurse, which will ultimately help increase collections. Working on self-funding of benefits. Pharmacy is managing inventory levels. Income statement shows increase in expenses with HVAC maintenance and solar project taking place. Mobile clinic inspection is scheduled and should still be on track for opening of July. AR days are less with is a positive note. | | |
| 6.1.2 | February 2023 Financials: motion moved, seconded and carried to approve financials. | Utterback, Cufaude | Approved by All |
| 6.1.3 | Annual Audit Summary Acceptance: motion moved, seconded and carried to approve. | Utterback, Cufaude | Approved by All |
| 6.2 | Strategic Planning Committee Chair Utterback: No February Meeting | | |
| 6.3 | Quality Committee Chair Guyn: DRAFT minutes attached | | |
| 6.3.1 | Creating a plan and timelines for completion. Looking at next year for accreditation. Not a negative, just need more time to complete our necessary updates. | | |
| 7 | NEW BUSINESS | | |
| 7.1 | Ambulance Services: there will be no gap in services provided to our community. We have made attempts to connect with Burney Fire with no success. Attempts have been made to connect with Modoc and Surprise Valley. We are waiting on a quote from REMSA – which there are two options for the structure of service. We will have service regardless in July, it just might be an operating loss. | | |
| 8 | ADMINISTRATIVE REPORTS | | |
| 8.1 | Chief's Reports: written reports provided in packet | | |
| 8.1.1 | CFO: no further questions. | | |
| 8.1.2 | CHRO: offer pending acceptance for last remaining ERRN positions – kudos to Theresa and Moriah. Acceptance for interim RN for Surgery Manager, which means we are close to surgery services being back open. Application is pending for Imaging Manager. Respiratory Therapist will be onsite for shadowing. New recruiter joining the team – full time at the hospital. Good results from the job fair. Discussed effects of new SB 130 regarding employee breaks. | | |
| 8.1.3 | CPRO: Spent time in Sacramento with the Legislative Strategy Group and CHA. We are the rural voice on the committee. Discussed SB 525 - \$25 minimum wage will and how it will affect all employers, vendors and workers. AB 242 progressing nicely. AB 869 still moving along. Web and intranet developers sent a new design app for employees – it streamlines the intranet access and saves money from not having to develop a whole new app. Retail Pharmacy gift shop is looking great. Discussed opportunities for the Board to participate in legislative activities. | | |
| 8.1.4 | CCO: IV pumps went live last week. They are working really well and it was a smooth transition and ease of use. | | |
| 8.1.5 | CNO: Fully staffed in the ER and no travelers starting in May. Very close to fully staffed on Acute side. Working on Outpatient Surgery – the OR is cleaned and an interim OR manager is hired. Mask mandate will be lifted beginning on April 3 rd . New CNA classes will start soon with 5 enrolled. | | |
| 8.1.6 | COO: HVAC costs increased and will continue to do so until after Master Planning is completed. Solar update – we received bids from other vendors for comparison and the decision was to work with Veregy. We are on track to complete the application process and paperwork submission by April 13 th deadline. Master Planning – Aspen Street Architects will present to the Board at the April Board Meeting. | | |
| 8.1.7 | CEO: Kudos to Ryan on his work with Master Planning. We are working with REMSA for an ambulance service quote. | | |
| 9 | OTHER INFORMATION/ANNOUNCEMENTS | | |

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 Director's documents are available online at www.mayersmemorial.com.

- 9.1 Board Member Message: Employee of the Month, Ambulance Services, Audit Findings, Wound Care – Dr. Magno, MHF Health Fair, Recruitment success, upcoming CNA class.

10 ANNOUNCEMENT OF CLOSED SESSION: 4:07 pm

10.1 Med Staff Credentials – Govt Code 54962

AHP APPOINTMENT

1. Shannon Davidson, CRNA
2. Ryan McNeely, LCSW – Telemed2U
3. Thelma Wadsworth, PA - MVHC

***Unanimously
approved to
accept Med
Staff
Credentials***

AHP REAPPOINTMENT

4. Brenna Oakes, NP – UC Davis
5. Erica Bauer, PA - MMHD

MEDICAL STAFF APPOINTMENT

6. Palak Parikh, MD – UC Davis
7. Nigel Pedersen, MD – UC Davis
8. Mona Rezael Mirghaed, MD – UC Davis
9. Doris Chen, MD – UC Davis
10. Shubhi Agrawal, MD – UC Davis
11. Kiranm Kanth, MD – UC Davis
12. Jack Lin, MD – UC Davis
13. Reena Nanjireddy, MD – UC Davis
14. Jonathan Snider, MD – UC Davis
15. Chen Zhao, MD – UC Davis
16. Kelsey Sloat, MD – MVHC
17. Daniel Kirkham, MD – TCR
18. Jean Claude Bassila, MD – Telemed2U

MEDICAL STAFF REAPPOINTMENT

19. Charles DeCarli, MD – UC Davis
20. Sunpreet Kaur, MD – UC Davis
21. Trinh Thi Nhat Truong, MD – UC Davis
22. Arthur De Lorimer, MD – UC Davis
23. Kelly Beth Haas, MD – UC Davis
24. Daphne Say, MD – UC Davis
25. Maheen Hassan, MD – UC Davis
26. Beatrice Akers, DO – UC Davis
27. Sindhura Batchu, MD – UC Davis
28. Orwa Aboud, MD – UC Davis
29. Marc Lenaerts, MD – UC Davis
30. Ryan Martin, MD – UC Davis
31. Lara Zimmerman, MD – UC Davis
32. Michelle Apperson, MD – UC Davis
33. Norika Malhado-Chang, MD – UC Davis
34. Jeffrey Kennedy, MD – UC Davis
35. Ricardo Maselli, MD – UC Davis
36. Kwan Ng, MD – UC Davis
37. John Olichney, MD – UC Davis
38. David Richman, MD – UC Davis
39. Ajay Sampat, MD – UC Davis
40. Masud Seyan, MD – UC Davis
41. Vicki Wheelock, MD – UC Davis

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- 42. Ge Xiong, MD – UC Davis
- 43. Lin Zhang, MD – UC Davis
- 44. Alan Yee, DO – UC Davis
- 45. Alexandra Duffy, DO – UC Davis
- 46. Javeed Siddiqui, MD – Telemed2U
- 47. Allen Morris, MD – Redding Path
- 48. Tommy Saborido, MD – MMHD
- 49. Aditi Bhaduri, MD – Telemed2U

10.2 Personnel – Govt Code 54597
Department Personnel

Discussion

11 RECONVENE OPEN SESSION: 5:09 PM

12 ADJOURNMENT: 5:09 PM
Next Meeting April 26, 2023

I, _____, Board of Directors _____, certify that the above is a true and correct transcript from the minutes of the regular meeting of the Board of Directors of Mayers Memorial Hospital District

Board Member

Board Clerk



RESOLUTION NO. 2023-05

**A RESOLUTION OF THE BOARD OF TRUSTEES
OF MAYERS MEMORIAL HEALTHCARE DISTRICT RECOGNIZING**

Melinda Reynoso

As March 2023 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, Melinda Reynoso is hereby named Mayers Memorial Healthcare District Employee of the Month for March 2023; and

DULY PASSED AND ADOPTED this 27th day of April 2023 by the Board of Trustees of Mayers Memorial Healthcare District by the following vote:

- AYES:
- NOES:
- ABSENT:
- ABSTAIN:

Abe Hathaway, President
Board of Trustees, Mayers Memorial Healthcare District

ATTEST:

Jessica DeCoito
Clerk of the Board of Directors



People Pillar



Executive Leader/Director

/Manager: *Valerie Lakey, CPRO*

Department: *PR/Safety*

Last Updated: April 21, 2023

| FY23 (Jul 1, 2022 - Jun 30, 2023) | Specific Plan & Estimated Completion Date | Driver | Current Actions |
|---|---|-----------------|--|
| <p>Priority:</p> <p>Develop a robust employee safety training and education program. Staff that is confident in a safe work environment will be more productive and committed to the organization. Achieve 80% compliance of staff for two key trainings and/or drills. Achieve 90% compliance of all management on quarterly assigned trainings.</p> | <p>Complete set up of FastCommand Emergency Preparedness System. Train and educate staff on the effective use of the program for resources, education and during an actual emergency.</p> | <p>Val/Dana</p> | <p>We have had two training calls with FastCommand. Dana has another one scheduled and will be working on the implementation process. This program will be used if we need to set up and incident command. FastCommand also has the capability to provide emergency notifications. We will be looking at possibly using this system to replace the text system we are currently using. Additionally, we will be able to keep all EP documents in this platform</p> |
| | <p>Completely revise the MMHD Emergency Operation Plan (EOP) and make all</p> | <p>Val</p> | <p>build and improve the EOP. As this is accomplished, the format will all be converted to digital with links.</p> |
| | <p>Plan and implement a TTX and "Functional" Active Shooter Drill.</p> | <p>Val/Dana</p> | <p>Completed November 2022</p> |
| | <p>Refresh the community Emergency Preparedness page on the website and</p> | <p>Val</p> | <p>In progress.</p> |
| | <p>Quarterly drill for staff</p> | <p>Dana</p> | <p>Dana is working on drills that align with our HVA.</p> |
| <p>Priority Ideas for Next Year</p> | | | |
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People Pillar



Executive Leader: *Ryan Harris, COO*

Director or Manager: *Susan Garcia*

Department: *Food & Nutritional Services*

Last Updated: 4/20/2023

| FY23 (Jul 1, 2022 - Jun 30, 2023) | Specific Plan & Estimated Completion Date | Driver | Current Actions |
|---|---|--------|--|
| Priority: | | | |
| By FYE 2023, increase average employment retention length by 15% year over year, for employees leaving the organization. | Get information on employee turnover in department from Libby | Susan | Still in process |
| | Develop a training and orientation program to improve retention in the department | Susan | Dietary orientation is 50% complete, SERVSafe was placed on Relias for Dietary Staff |
| | | | |
| Priority Ideas for Next Year | | | |
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Quality / Service Pillar

Executive Leader: *Ryan Harris*

Director or Manager: *Susan Garcia*

Department: *Food & Nutritional Services*

Last Updated: 4/20/2023

| Current Year | Specific Plan & Estimated Completion Date | Driver | Current Actions |
|---|--|--------|---|
| Priority: | | | |
| BY FYE 2023, have less than 4 Nursing Home citations for F800 through F811 tags. | | Susan | Revising the tasks around sanitation and cleanliness |
| | | Susan | Orientation binder now includes the policies & procedures focused around citation information |
| | | | |
| By FYE 2023, have an increase of 1 Star for resident diet survey score. | By January 1st, have a process and establish a base score. | Susan | First round of surveys were completed on Dec 31st - Next round is scheduled for May 2023 |
| | Increase score by 1 Star by FYE 2023. | Susan | |
| | | | |
| Priority Ideas for Next Year | | | |
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Current Mission, Vision, and Values Statement

MISSION

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

VISION

The vision of Mayers Memorial Healthcare District is to become the provider of first choice for our community by being a leader in rural healthcare.

VALUES

- Teamwork
- Leadership
- Commitment
- Quality
- Responsibility
- Safety

Proposed Revision of Mission, Vision, and Values Statement

MISSION

Leading rural healthcare for a lifetime of wellbeing.

VISION

To build the healthiest rural community through exceptional and accessible care.

VALUES

I-RESPECT

- Integrity
- Reliability
- Excellence
- Stewardship
- Partnership
- Equity
- Compassion
- Teamwork

Proposed FY24 Priorities

People – Employment turnover rate of 17.52% or lower.

Quality Service - To become ACHC accredited by FY24.

Growth - To increase provider-based clinic visits by 25% overall.

Communication - Host 4 quarterly Town Hall style community events and 12 monthly community events (e.g., education events (such as BLS), MMHD services, etc.) throughout FY24.

Finance - To increase improvement in clinical documentation for compliance by %(TBD) by FYE24.

Chief Executive Officer
Chris Bjornberg



Board of Directors
Abe Hathaway, President
Jeanne Utterback, Vice President
Tom Guyn, M.D., Secretary
Tami Humphry, Treasurer
Lester Cufaude, Director

Board of Directors
Quality Committee
Minutes

April 21, 2023 @ 1:00 PM
Fully Remote Teams 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 Tom Guyn, M.D. called the meeting to order at 1:00 pm on the above date. | | |
| | BOARD MEMBERS PRESENT: | STAFF PRESENT: | |
| | Tom Guyn, MD., Secretary Les Cufaude, Director | Chris Bjornberg, CEO Jack Hathaway, Director of Quality Jessica DeCoito, Board Clerk | |
| | Excused ABSENT: | | |
| 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 March 22, 2022 | Cufaude, Hathaway Guyn – Y Cufaude- Y |
| 4 | Hospital Quality Committee Report: written report submitted. Review of measures being gathered were discussed. Example graphs were shown. Specific example shown was Pharmacy Turn Around Times. Departments are working to gather all the data into digital logs to help them analyze the data, where paper logs didn't give us that capability. Some measures and metrics will align right along with ACHC standards. | | |
| 5 | Director of Quality Report | | |
| | 5.1 | ACHC summary was received. We have a list of opportunities of improvement to help us align with ACHC. We have identified 175 areas of improvement and each one has a driver to make sure we complete the solutions. A Project Plan is being created now. Cerner will help us keep metrics and measures aligned better because we will have better reporting technologies. Order sets will be created that will also keep metrics in line. This is going to take a lot of work, and hard work but our team is fully capable of handling this. | |
| 6 | OTHER INFORMATION/ANNOUNCEMENTS: Next Meeting is May 18, 2023 at 1:00 pm | | |
| 7 | ADJOURNMENT: at 1:42 pm | | |

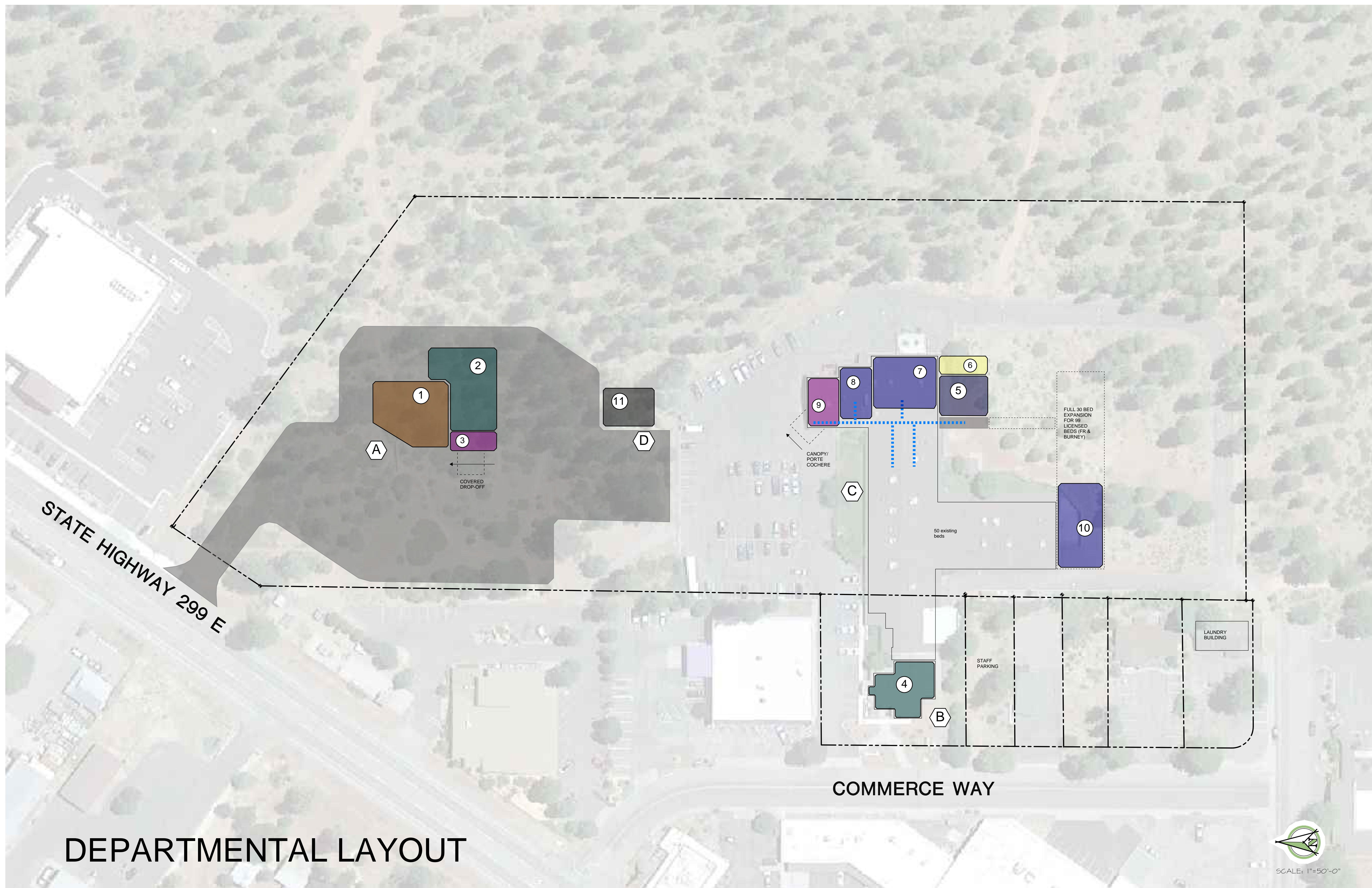
The following are the New, Revised and Retired Policies and Procedures that have been approved by the Policy and Procedure Process. These policies and procedures have been put in the appropriate hospital manuals.

Date:
April 4, 2023

For Quarter Ending
March 31, 2023

| Department | Document | New/Revised/Retired |
|------------------------|---|---------------------|
| Activities | Consent to Shop Policy | Revised |
| Activities | Consent to Shop-SNF MMH194 | Revised |
| Activities | Swing Bed Quality of Life (Activities) | Revised |
| Acute - Med Surg | Communication of Shift Report | Revised |
| Acute - Med Surg | Dressings, Surgical | Retired |
| Acute - Med Surg | Medication Administration Using Barcoding System | Revised |
| Acute - Med Surg | Pain Management MMH453 | Retired |
| Acute - Med Surg | Sewer Blockage P&P | Revised |
| Acute - Med Surg | Syringe Pump | Retired |
| Acute - Med Surg | Visitors, Patient | Revised |
| Administration | Mayers Organization Chart | Revised |
| Business Office | Charity Care Policy | Revised |
| Business Office | HHS POVERTY GUIDELINES - 75% MMH388 | Revised |
| Disaster | Alternate Sources of Energy | Revised |
| Disaster | Communication-Internal - Emergency Management | Revised |
| Disaster | Disclosure of Protected Health Information During Disaster Relief Efforts | Revised |
| Disaster | Hazard Communication and Management Program | Revised |
| Emergency Department | ER Culture Follow Up Form MMH603 | Revised |
| Emergency Department | Tetanus Vaccine Administration | Revised |
| Environmental Services | Closet Cleaning, Environmental Services | Revised |
| Hospice | Advance Beneficiary Notice of Non-Coverage | Revised |
| Hospice | Bereavement-Services | Retired |
| Hospice | Certification of Terminal Illness | Revised |
| Hospice | Change of Designated Hospice | Revised |
| Hospice | Consultation - Hospice | Retired |
| Hospice | Continuous Care | Retired |
| Hospice | Diversity | Revised |
| Hospice | Drug Disposal Form MMH641 | Revised |
| Hospice | Governing Body - Hospice | Retired |
| Hospice | Hospice Performance Improvement Program Template MMH671 | Revised |
| Hospice | Job Descriptions - Hospice | Retired |
| Hospice | Medication Errors - Hospice | Revised |
| Hospice | Medication: Pickup, Delivery and Destruction, Hospice | Revised |
| Hospice | On Call, Call Back | Revised |
| Hospice | Physician Orders, Hospice | Revised |
| Hospice | QAPI-Performance Improvement Activities and Projects | Revised |
| Hospice | Safety - Program | Revised |
| Hospice | Strategic Planning - Hospice | Retired |
| Hospice | Volunteers - Assignment | Retired |
| Hospice | Volunteers - Recordkeeping | Retired |
| Hospice | Volunteers - Retention, Support and Education | Retired |
| Hospice | Volunteers - Services | Retired |
| Hospice | Volunteers - Supervision | Retired |
| Human Resources | Equal Employment Opportunity | Revised |
| Human Resources | Medical Certification-Medical Exemption Covid 19 Vaccination MMH701 | Revised |
| Human Resources | Mileage & Expense Voucher | Revised |
| Human Resources | Religious Accommodation Request Form MMH702 | Revised |

| Department | Document | New/Revised/Retired |
|---------------------|---|---------------------|
| Infection Control | Antibiotic Stewardship Program Commitment | Revised |
| Infection Control | Influenza Vaccine Consent - Employee-Volunteer MMH316B | Revised |
| Infection Control | Influenza Vaccine Consent - Public-Pharmacy MMH316A | Revised |
| Infection Control | Influenza Vaccine Consent - SNF MMH316C | Revised |
| Infection Control | Mandatory MRSA Screening | Revised |
| Infection Control | Medical Waste Management Guidelines Chart MMH70 | Revised |
| Infection Control | Medical Waste Management Plan & Certification | Revised |
| Infection Control | Medical Waste Management Plan Certification | Revised |
| Infection Control | Medical Waste Transport Log MMH651 | Revised |
| Infection Control | TB Testing, Employee | Revised |
| Infection Control | TDAP Vaccine Declination Form MMH545 | Revised |
| Infection Control | Tuberculin Skin Test and Consent MMH571 | Revised |
| Lab | Antibiogram | Retired |
| Maintenance | Bulk Oxygen Safety | Revised |
| Medical Staff | CRNA, Nurse Anesthetist, Certified Registered Core Privileges | Revised |
| Medical Staff | Manual Review & Approval Master MMH289 | Revised |
| Medical Staff | MEC-Governing Board Endorsement for Physician Appointment and Privileges | Revised |
| Medical Staff | Optometry Core Privileges | Revised |
| Medical Staff | Psychology Core Privileges | Revised |
| Medical Staff | Radiology Core Privileges, Vascular and Interventional | Revised |
| Outpatient Medical | Conservative Sharp Instrumental Wound Debridement | Revised |
| Outpatient Medical | Outpatient Forms - Nursing Documentation | Revised |
| Patient Access | Interpretation Services | Revised |
| Pharmacy | Pharmacy Pricing Schedule | Revised |
| Pharmacy - Retail | Controlled Substance Inventory - Retail Pharmacy | Revised |
| Pharmacy - Retail | Dispensing CIII - V Controlled Substances | Revised |
| Pharmacy - Retail | Drug Interaction Prevention - Retail Pharmacy | Revised |
| Pharmacy - Retail | Employee Impairment | Revised |
| Pharmacy - Retail | Identifying and Avoiding Questionable or Suspicious Prescriptions | Revised |
| Pharmacy - Retail | Pseudoephedrine | Revised |
| Pharmacy - Retail | Purchasing Receiving and Storage of Controlled Substances - Retail Pharmacy | Revised |
| Pharmacy - Retail | Temporary Absence of Pharmacist - Retail Pharmacy | Revised |
| Purchasing | Notification of Price Change | Retired |
| Respiratory Therapy | Compressed Gas & Oxygen Use | Retired |
| Respiratory Therapy | Portable Oxygen Cylinders SNF | Retired |
| Respiratory Therapy | Portable Oxygen Cylinders SNF | Revised |
| Respiratory Therapy | Pulmonary Function Testing (PFT) Order Form MMH273 | Revised |
| Skilled Nursing | Abuse Resident, SNF | Revised |
| Skilled Nursing | Call System - SNF | Revised |
| Skilled Nursing | Daily Nurse Staffing Form | Retired |
| Skilled Nursing | Dental Care Services - SNF | Revised |
| Skilled Nursing | Revised McGeer Criteria for GITI MMH625 | Revised |
| Skilled Nursing | Transport Supportive Aid Device, Arjo Stedy | Revised |
| Social Services | Resident Trust Account Authorization MMH596 | Revised |
| Social Services | Resident Trust Account Explanation MMH595 | Revised |
| Swing Bed | Care of Dietary and Nutritional Services for Swing Bed Patients | Revised |
| Volunteer | Volunteer Code of Conduct | Retired |

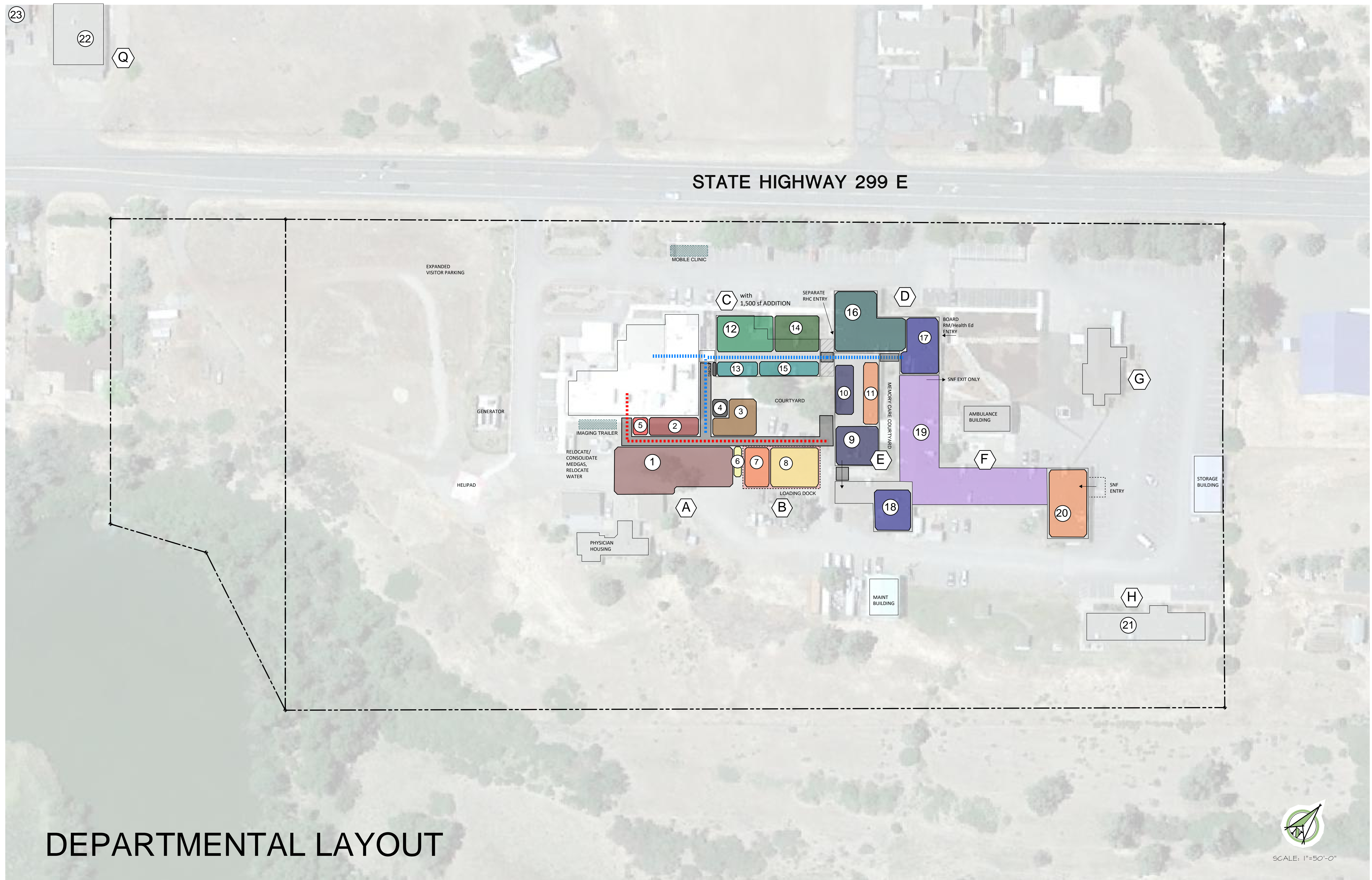


- A** NEW AMBULATORY SURGERY CENTER/RURAL HEALTH CLINIC BUILDING (OSHDP-3) ~11,000SF
 - ① AMBULATORY SURGERY CENTER
Approx. 5,000sf
1 Operating Room, 1 Procedure Room
6 Pre/Post Beds
 - ② RURAL HEALTH CENTER
Approx. 5,000sf
 - ③ PUBLIC ENTRY/CORE
Porte Cochere
- B** EXISTING CLINIC BUILDING (OSHDP-3) ~3,200SF
 - ④ OUTPATIENT MEDICAL/SPECIALTY CLINIC
Existing space, minor remodel
- C** EXISTING SKILLED NURSING FACILITY/ LONG TERM CARE (OSHDP-2) ~29,600SF
 - ⑤ REPLACEMENT KITCHEN ADDITION
Approx. 2,000sf
 - ⑥ NEW PURCHASING/STORAGE
Approx. 1,000sf
 - ⑦ REMODEL EXISTING DINING & ACTIVITY
 - ⑧ REMODEL PREVIOUS KITCHEN TO ACTIVITY
 - ⑨ REMODEL/NEW ENTRY, LOBBY
Includes Porte Cochere
 - ⑩ NEW SNF ADDITION
Approx. 4,500sf for 18-bed
Expansion possibilities
- D** NEW MAINTENANCE BUILDING (NON-OSHDP) ~2,000SF
 - ⑪ NEW BUILDING
Approx. 2,000sf
Pre-manufactured Metal Building

DEPARTMENTAL LAYOUT

MAYERS MEMORIAL HEALTHCARE DISTRICT BURNEY CAMPUS - MASTER PLAN





DEPARTMENTAL LAYOUT

- A** NEW ACUTE WING (OSHPD-1)
~12,800SF
 - ① NEW ACUTE (MED-SURG) DEPARTMENT
Approx. 6,000sf
10 patient rooms (5 private, 5 semi-private)
 - ② IMAGING DEPARTMENT ADDITION
Approx. 1,000sf
Suite for Ultra/Mammo/Bone Density
 - ③ PHARMACY DEPARTMENT
Approx. 1,400sf
w/ Office and Storage
 - ④ IT - IDF
Approx. 200sf
 - ⑤ EMERGENCY DEPARTMENT OFFICE / STORAGE
Approx. 300sf
 - ⑥ GENERAL STORAGE (code required)
Approx. 300sf
- B** NEW SUPPORT BUILDING (NON-OSHPD)
~3,200SF
 - ⑦ ADMIN EXPANSION
Approx. 1,000sf
 - ⑧ PURCHASING/MATERIALS
Approx. 2,200sf
w/ Office & Loading Dock
- C** 12-BED/PHARMACY BUILDING
- RECLASSIFY AS OSHPD-3/or -1R, ~5,300SF
 - ⑫ PHYSICAL THERAPY
Approx. 2,300sf
 - ⑬ RESPIRATORY THERAPY
Approx. 700sf
Exam Room/Lab, Office, Storage
 - ⑭ CARDIAC REHABILITATION
Approx. 1,900sf
 - ⑮ OUTPATIENT MEDICAL
Approx. 700sf
- D** ORIGINAL HOSPITAL BUILDING
- RECLASSIFY AS OSHPD-3/or -1R
 - ⑯ RURAL HEALTH CLINIC
Approx. 4,000sf
w/ Separate Entry/Waiting
 - ⑰ BOARD ROOM & HEALTH ED
Approx. 2,200sf
w/ new Public Entry
- E** SURGERY/OB BUILDING
- REUSE AS OSHPD-1, ACUTE-CARE
 - ⑨ DIETARY - KITCHEN
Approx. 1,800sf
 - ⑩ DIETARY - DINING
Approx. 1,100sf
w/ Courtyard Dining
 - ⑪ STAFF OFFICES
Approx. 1,200sf
- F** LONG TERM CARE BUILDING
- RECLASSIFY AS OSHPD-2
 - ⑱ SNF ACTIVITIES
Approx. 1,600sf
 - ⑲ REMODEL - FOR MEMORY CARE - 19 BEDS
 - ⑳ NEW SNF ENTRY, RECEPTION, FAMILY RM
Approx. 2,600sf
- G** ADMIN BUILDING - REUSE
- H** PREVIOUS CLINIC BUILDING
 - ㉑ CONSOLIDATE SERVICES - FINANCE & IT w/
BUSINESS
- Q** THIFT & ARTS BUILDING
 - ㉒ FOUNDATION & THIFT RELOCATION w/ STORAGE
 - ㉓ HOSPICE



MAYERS MEMORIAL
HEALTHCARE DISTRICT
FALL RIVER MILLS CAMPUS - MASTER PLAN





Operations Report April 2023

| Statistics | March YTD FY23 <i>(current)</i> | March YTD FY22 <i>(prior)</i> | March Budget YTD FY23 |
|-------------------------------------|------------------------------------|-------------------------------------|-----------------------------|
| Surgeries | | | |
| ➤ Inpatient | 0 | 0 | TBD |
| ➤ Outpatient | 0 | 0 | TBD |
| Procedures** <i>(surgery suite)</i> | 0 | 0 | TBD |
| Inpatient | 1410 | 1860 | 1304 |
| Emergency Room | 3200 | 3208 | 3165 |
| Skilled Nursing Days | 21570 | 20065 | 20565 |
| OP Visits (OP/Lab/X-ray) | 11900 | 15904 | 10560 |
| Hospice Patient Days | 800 | 1327 | 988 |
| PT | 1830 | 1883 | 1910 |

*Note: numbers in RED denote a value that was less than the previous year.

**Procedures: include colonoscopies

Human Resource

April 2023 Board Report

Submitting by Libby Mee – Chief Human Resource Officer

The Human Resource department currently supports 281 active employees

Full Time – 245

Part Time/Casual/Per Diem – 24

Leave of Absence –12

Staffing and Recruitment

We are actively recruiting and interviewing* for the below posted positions.

Administration

Director of Ancillary Services*

Skilled Nursing Facility Director of Nursing*

Foundation Program Director*

Nursing

Utilization Review RN

Emergency Department Manager

Med/Surg Acute RN*

Med/Surg Acute CNA

Skilled Nursing Facility CNA

Skilled Nursing Facility RN/LVN

Surgery Manager

Surgery Scrub Tech

Clinical

Imaging Manager*

Imaging Radiology Tech

Laboratory Manager

Laboratory CLS*

Pharmacist*

Support Services

Food and Nutrition Services Aide/Cook*

Stock Clerk*

Travel/Registry Staff

We continue to use registry for the following departments:

- Emergency Department RN – will stop when newly hired staff are onboarded
- Skilled Nursing Facility RN, LVN and CNA
- Med/Surge Acute RN
- Imaging CT/Radiology Tech
- Respiratory Therapy Therapist – will stop when newly hired staff are onboarded
- Laboratory CLS

In the last month, the Mayers team have attend employment fairs at Shasta College and Institute of Technology in Redding to speak with students that will be graduating from LVN and RN programs this spring. Due to this presence, we have received 5 new nursing applications. By attending recent fairs, we established new relationships with the career and employment services personnel at Shasta and Simpson Colleges.

MMHD is sponsoring the 2023 Spring Career Fair at the Intermountain Community Center on May 2nd. This is always a fun event that allow us to identify local job seekers.

We are also working with program specialists with our local Employment Development Department and SMART Business Resource Center to utilize their employment programs. If done effectively, the district may be able to get wage replacement benefits for employing local job seekers.

Employee Health and Wellness

Employee COVID Exposure

Total cases – 353

Isolation/Positive – 275

Quarantine – 78

Exposure related to work – 63

Work Related injury and Illnesses

To date, we have had 1 reportable claim resulting in 12 days away from work.

There have been 5 first aide injuries resulting in 1 days away from work.

Employee Safety and Wellness Initiatives

Slip Trip and Fall Prevention Program – A BETA representative was onsite on April 18th. Due to the hard work of Dana in Employee Wellness, Sherry in Environmental Service and Alex in Facilities, we obtain validation for the newly implemented program. By receiving validation, we will see a 2% reduction in our annual premium.

MMHD is the first BETA member to achieve validation this year, as well has the first member to validate three modules. We had previously received validation for our Workplace Violence Prevention and Ergonomics programs.

Safe Patient Handling Program – We are looking forward to re enrolling in this domain during the next fiscal year. We intent to only enroll in one domain instead of two so we can provide the attention this program would require.

Additional Projects

Worker Retention Payment Program

We received \$354,250 from the state for the Hospital and Skilled Nursing Facility COVID-19 Retention Payment program. These monies will be paid to employees with their paycheck on

April 28, 2023. Bonus amounts varied between \$750 and \$1,500 based on status and hours worked.

SB1334 – CA Meal and Rest Breaks Premium

We are continuing to manage the newly implemented CA Meal Rest Break premiums and have seen the premiums significantly decline.

PPE 03/11/2023 - \$22,088.00

PPE 03/25/2023 - \$10,534.47

PPE 04/08/2023 – \$6,422.84

2023 Allied for Health Compensation Practice Committee/Labor Roundtable

The primary discussion point in this month's call was the impacts of the potential \$25 healthcare minimum wage proposed by AB 525. Many members also worried about the financial affects as the bill raised the minimum wage for salaried employees. It is also now being proposed that the bill would apply to vendors that work with district and not just employees.

Shasta Health Assessment and Redesign Collaborative (SHARC)

We are in communication with the Assistant Director of Employer Partnerships at Shasta College about opportunities to collaborate. MMHD already hosts clinical students for preceptor programs, but Shasta College would like to explore using MMHD for non-clinical experience sites in departments like Medical Records, IT and Food and Nutrition Services.

Accreditation Commission for Health Care (ACHC)

Based on recommendations from Gap Analysis, we are working on building a job description for a Safety Officer.

Quality Assurance Metrics

We recently worked with Jack to establish the metrics we would be tracking for Quality Assurance and decided on Employee Turnover, Employee Engagement and Injury and Illness.

Trainings

The HR team recently attend at two day training from the California Chamber of Commerce on the state's complex leave of absence laws. We will use the information gleaned from this training to update policy and best practices.

We are also working with Huron to provide an Employee Customer Service Training that will be offered in June.

I will be virtually attending the Annual Conference for the Society of Human Resource Management in June.

Chief Public Relations Officer – Valerie Lakey
April 2023 Board Report

Legislation/Advocacy

SB 525 would create a statewide \$25 minimum wage for all health care workers in any health care setting, including contractors, starting Jan. 1, 2024. The minimum wage would also increase annually by 3.5% or the Consumer Price Index, whichever is greater.

Passed the Senate Labor, Public Employment and Retirement Committee on April 12. To be heard in the Senate Appropriations Committee.

SB 759 would extend the 2030 seismic deadline for hospitals to 2040.
April 26 hearing in the Senate Health Committee

The authority for critical access hospitals to hire physicians directly would become permanent under **AB 242** by eliminating the sunset to the pilot program that is set to expire this year.
To be heard by the full Assembly (on the Assembly consent calendar).

State Budget Request

CHA continues to advocate for a one-time state budget relief package for struggling hospitals. It would provide emergency funding to mitigate the impacts of rising medical inflation and systemic underfunding in the Medi-Cal system. Assembly Member Esmeralda Soria (D-Merced) and Sen. Anna Caballero (D-Merced) have each submitted letters to their respective budget committees supporting this request.

I am copying the information from Carmela Coyle below as it outlines what some California Hospitals are facing:

Following the release last week of the latest Kaufman Hall report showing that [1 in 5 California hospitals is at risk of closure](#), sharing the coverage that CHA's statewide media call on the report — and our push for state relief for hospitals — has generated. Many thanks to those hospital leaders who were willing to share their stories to drive home the impact of this crisis on patients. The coverage spans radio, TV, print, and digital media outlets and demonstrates the breadth of media interest in the crisis facing hospitals.

Print & Digital:

- “20% of California hospitals at risk of closure: 4 leaders react,” *Becker's Healthcare*, April 12 ([Link](#))
- “One in five California hospitals at risk of closing: Report,” *Chief Healthcare Executive*, April 12 ([Link](#))
- “Sierra View, other hospitals face financial trouble,” *The Porterville Recorder*, April 13 ([Link](#))
- “After a rural California hospital closes, farmworkers pay the price,” *KVPR in partnership with PBS*, April 14 ([Link](#))
- “Dozens of California hospitals at risk of closure, industry leaders warn amid call for state aid,” *The Sacramento Bee*, April 14 ([Link](#))
- “Report: Hazel Hawkins among 200 hospitals in state facing closure,” *BenitoLink*, April 14 ([Link](#))

- “Layoffs, shuttered programs, disputes with insurers. San Diego County hospitals facing financial headwinds,” *San Diego Union Tribune*, April 16 ([Link](#))
- “A hospital closed its psychiatric ward and exposed the region’s fragile system,” *San Diego Union Tribune*, April 16 ([Link](#))
- “The only hospital in my rural county closed. Now, emergency care is 30 miles away | Opinion,” *The Sacramento Bee*, April 16 ([Link](#))
- “California hospitals and transit systems seek aid from deficit-ridden budget,” *CalMatters*, April 17 ([Link](#))
- “A proposal to get Madera’s hospital reopened deserves support of state lawmakers | Opinion,” *The Fresno Bee*, April 17 ([Link](#))

TV:

- KCRA-SAC (NBC), Sacramento, April 12 ([Link](#))
- KTXL-SAC (FOX), Sacramento, April 12 ([Link](#))
- KSBW (NBC), Monterey, April 12 ([Link](#))
- KSBW-SD (FOX), San Diego, April 12 ([Link](#))
- KGET (NBC), Bakersfield, April 13 ([Link](#))
- KRON-SF (MyTV), San Francisco, April 13 ([Link](#))

Radio:

- KFBK-AM, Sacramento, April 12 ([Link](#))
- KFBK-AM , Sacramento, April 12 ([Link](#))
- Northwest News, Seattle, April 13 ([Link](#))
- KABC-AM, Los Angeles, April 13 ([Link](#))

Marketing/Public Relations

We are preparing for the elementary school assemblies which will be the first part of May. We will be at Burney, Fall River and Big Valley Elementary Schools to do assemblies about healthcare and wellness. These are always fun events. COVID prevented this activity for a few years. We were able to get back into Fall River Elementary last year and are excited to be at the others as well this year.

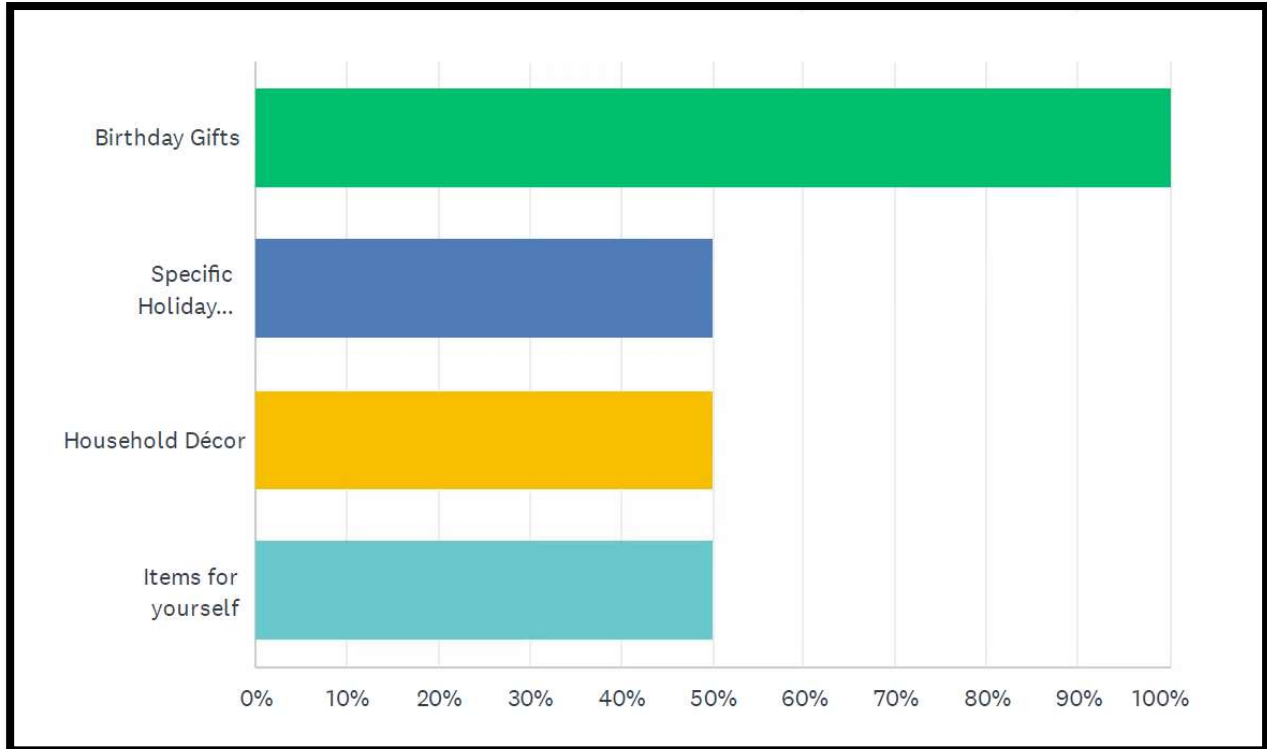
Applications are still being accepted for this year’s summer intern program. We are excited to review the applications and look forward to having our interns again this summer.

We are in the beginning stages of developing a full marketing plan for the Clinic services. This will be a big project designed to drive more clinic visits, promote the mobile clinic and other ancillary services.

We are working on a educational campaign for Hospice, as we have found that there is a significant lack of education around the service.

The Gift Shop continues to do well. We launched the survey at the health fair and will use it to plan our ordering and merchandise.

Here is a sample of the input we have received. You can take the Survey [here](#):



We have also been tracking the demographics of our audiences on social media. Currently we are reaching mostly 35-44 year old females the most.



Foundation

We have been working through the Foundation restructure and transition. We have been familiarizing ourselves with the processes, calendar of activities and regular duties. This has been a great process to learn the “foundation” of the Foundation and is allowing us to ensure processes are streamlined in order to provide maximum benefit for the hard work the Foundation staff puts in.

The Annual Health Fair was April 15th. There were 24 vendors and hospital departments with display tables. Traffic was a bit lighter due to the availability of vouchers that can be used until June 30th. The 5k Walk/Run that was hosted by MMHD was a success and fun was had by all participants.

April is Volunteer Appreciation Month. We hosted a thank you “Tea” for all of the current volunteers. We also used the opportunity to talk about the new structure of the Foundation and volunteer process. We are very excited about ideas to recruit new volunteers. The process will also be streamlined with Shay in HR handling all steps to keep things consistent and efficient.

Emergency Preparedness/Safety

We completed two ICS 100/200 classes in April. The staff was very engaged in the high level training for incident response.

Please see more detail in the Safety Report.

**April Board Report
Clinical Division
4/20/2023**

Retail Pharmacy

- The quote for Asteres prescription lockers was cost prohibitive. We are looking at iLocalBox which makes a similar product, and we are awaiting pricing information.
- Mayers is adding Premier Pharmacy, a specialty pharmacy, to provide high-cost hepatitis medication through the 340B program with a July 1 go live.
- With the end of the COVID19 state emergency, signatures will once again be required at the drive-up window. The pharmacy will be collecting signatures with an iPad.
- With the help of the Liberty Software Consultant, a tech bar code check step has been added to the workflow. Several improvements were made to reduce rework.

Laboratory

- Lab staff worked very hard drawing labs and processing results at Mayers for the Health and Wellness Fair. Thank you for all your hard work. Health Fair lab vouchers are still available.

Pharmacy

- COVID vaccine
 - Pfizer's Monovalent Covid vaccine was withdrawn as of 4/18/23. There will be a protocol in the future for a primary series with bivalent vaccine. As of right now, the county has instructed us not to schedule primary COVID series with bivalent Pfizer or Moderna.
 - Novavax remains available for primary series.
 - Moderna Bivalent will be available as soon as the new freezer is installed, and temperature is validated.
- Pharmacy presented quality reports on medication reconciliation, pharmacist turn-around time, and environmental sampling in the barrier isolator.
- Pharmacy staff in collaboration with retail pharmacy staff had a table at Mayers Health and Wellness Fair focusing on opioid safety and naloxone.

Respiratory Therapy

- David Farrer, RT, respiratory manager, created competencies for each piece of respiratory equipment and has completed those competencies with a proctor. The new hire RT will also complete the competencies.
-

Imaging

- Preventative maintenance on the CT and X-ray machine is scheduled for May 15th and 16th.
- Updated patient info and packaging for oral contrast. It will be distributed to clinics the week of the 24th.

Physical Therapy

- Tyson Wimer has completed his 10th week of his 16-week internship program through Shasta College.
- Daryl Schneider, PT manager, joined Regina Blower, LVN, and Brigid Doyle, MSN, in instructing the CNA skills renewal class on gait belts, transfer safety, and body mechanics.
- Cardiac Rehab patients are now registering through the PT department so that they do not have to go to the front desk

Cardiac Rehab

- Exploring adding ambulatory blood pressure monitoring to the outpatient monitoring available through Cardiac Rehab. It appears to be reimbursable through Medi-Care. Providers have requested this program. A proposal will be ready in the next month.
- ACHC GAP analysis found a deficit in the quality of Holter Monitor records and identified risks in the area of sending data cards to the cardiologist. An electronic solution to eliminate faxes and mailing is in the works with a target implementation in May.

Telemedicine

See attached report

Telemedicine Program Update as of April 19, 2023

Respectfully submitted by Amanda Harris for Keith Earnest, CCO and Tommy Saborido, MD

We have completed a total of 2209 live video consults since August 2017 (start of program).

Endocrinology:

- Dr. Bhaduri saw 13 patients in March and has seen 12 so far this month. She has ten more on the schedule for the rest of the month
- We've had 747 consults since the start of this specialty in August 2017.

Nutrition:

- Jessica saw two nutrition patients in March, four so far in April and has five more on the schedule for the rest of the month.
- We've had 168 consults so far since we started this specialty in November 2017.

Psychiatry:

- Dr. Granese saw 14 patients in March and 8 in April. There are two more residents waiting to be scheduled in Fall River.
- We've had 624 consults since the beginning of the program in August 2017.

Infectious Disease:

- Dr. Siddiqui saw two patients in March and has two on the schedule this Friday.
- We've had 98 consults since the start of this specialty in September 2017.

Neurology:

- Dr. Levyim saw 14 patients in March and 9 so far this month. She has five more patients scheduled to be seen in the remainder of April.
- We've had 407 consults since the start of the program in November 2018.

Rheumatology:

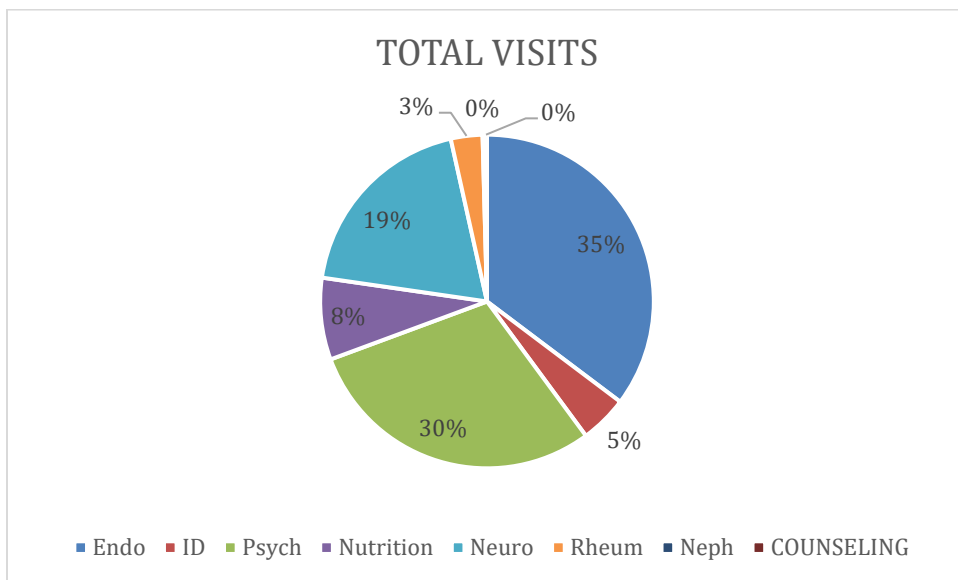
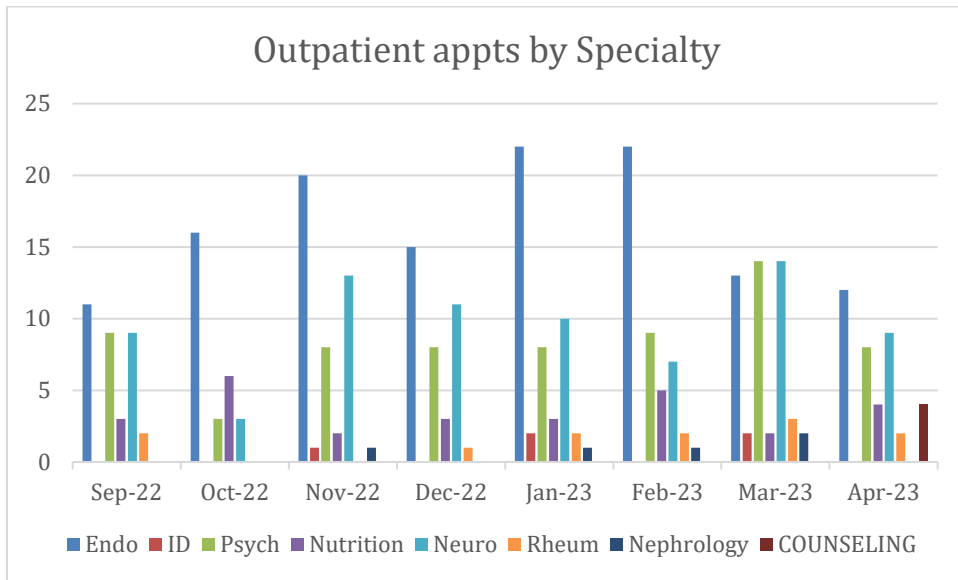
- Dr. Shibuya saw three patients in March, two so far this month and has three more on the schedule for next week. We now have regular time blocks with Dr. Shibuya every month.
- We've had 65 consults since the start of the program in May 2020.

Nephrology:

- Dr. Bassila saw two patients in March and has four on his schedule for this month
- We've had 3 consults since the start of the program in November 2022.

NEW Talk Therapy:

- We started talk therapy services this month and 4 appointments have taken place. This is a new service so we're starting out conservatively while Kim works on Carelon credentialing for the clinic. We currently have Ryan McNeel for two hours every Wednesday.



NURSING SERVICES BOARD REPORT

April, 2023

CNO Board Report

- Both Fall River and Burney Annex remain in green status.
- Mask mandate lifted throughout facility April 3rd. Staff very content with the lift and residents love being able to see our staff with their smiles.
- Interim DON-SNF has extended contract through April and is willing to stay on until a new DON is found. FT position being discussed.
- Collaborating with Quality Director for auditing practice and process for development of ACHC dashboard.
- Cerner implementation continuing with our Nurse leadership and SME's.

SNF Report

- Census- (81) Fall River- 33 Burney Annex- 28 Memory Care- 19
- Fall River & Burney are at Green Status.
- Admission reviews are ongoing.
- Four female beds and one male available in Fall River.
- 1 female and 1 male bed available in Burney Memory Care.
- CNA program starts back up May 8th.
- The Activities department is fully staffed.
- Two self-reports pending review by CDPH.
- Struggling to find NOC shift nurses at both sites. Needs sent to Medefis with several offers pending acceptance.

Acute

- March 2023 Dashboard
 - Acute ADC 1.83, LOS 3.35
 - Swingbed ADC 2.90, LOS 11.25
 - OBS: *At time of report, unable to obtain access for stats*
- March Staffing: Required 8 FTE RN/LVN's, 2 PTE RN's, 4 FTE CNA's & 2 FTE Ward Clerks
 - Utilizing 2 FTE contracted travelers and 1 PTE NPH traveler
 - Open positions: 1 FTE RN's
 - Interviews in progress
- Completed training for new IV System with 90% participation
- Launched new IV Infusion System
- Several staff members attended the PALS and NRP courses

Emergency Services

- March 23 Dashboard
 - Total treated patients: 298
 - Inpatient Admits: 21
 - Transferred to higher level of care: 10
 - Pediatric patients: 26
 - AMA: 3
 - LWBS:2
 - LPTT:2
 - Present to ED vis EMS: 50
- March Staffing: Required 8 FTE RN, 2 PTE RN's, 2 FTE Tech's
 - Utilized 3 FTE contracted travelers
 - Per Diem employees cover the PTE need
 - RN Supervisor continues with temporary role of Clinic Project Manager for Cerner implementation – Utilizing (1) contracted traveler to fill this open FTE position temporarily
 - Open positions: 0 – New RN tentative start date 5/1/23
 - Acute DON remains acting manager of unit until position is filled
- Completed training for new IV System with 92% participation
- Launched new IV Infusion System
- Several staff members attended PALS and NRP courses

Outpatient Surgery

- Department remains closed
- Hired Interim OR Manager with start date 5/15/23
- In contact with Modoc Surgery Manager for

OPM

- The Outpatient Census (*110 approx. a month*) 90 patients seen, 121 procedures. February 96 patients seen, 126 patients. March was 134 patients and 169 procedures. (We are currently getting more referrals for infusions for RA medications due to closure of Dr Reeder and Dr Peters RA Associates in Redding)
- LTC Residents started being seen as Medicare Part B starting September 6th. Residents will take activities van over on wound clinic days to see physician for wound clinics if needed. OPM staff to follow up if *complicated* wounds at Mayers Rural Clinic for Burney residents as an outpatient to reduce transportation and make easier on residents in Burney. Fall River residents will schedule appointment and be seen in OPM
- Part time OPM employee returned to OPM 2 and sometimes 3 days a week
- Dr Magno continues to conduct wound clinics every other Thursday
- Marketing: Would like to send constant reminders to discharge planners at Redding hospitals. There is a constant turnaround of discharge planners and they are unaware of our services. Starting to work on plan for this.

- OPM moved to new space 1/17/23. Things are running better. Working towards a process of getting patients access to the OPM door when the timing is right for multiple Outpatient departments.
- Health Fair-Shared OPM services
- Future planning at MMHD-OPM has concerns over placement of OPM in Burney location. This doesn't make operational sense for our current model. We would like to share again what works best for our current model before it goes to the board. It would be on location at FR with the other outpatient services that offer inpatient and outpatient services and utilize pharmacy, lab and supportive services for the hospital.
- LTC wound reports available upon request

Clinical Education Report

- NATP
 - The last NATP session enrollment was 3 students. One student left the program for personal reasons before completion. The remaining 2 students passed the CDPH exam on 3/8/23 and are currently working as CNA staff.
 - The next NATP session has 5 students enrolled.
 - Passing rate for course and certification remains 100% for all sessions.
- Priorities
 - Annual Training Calendar was posted on April 1.** Participants are encouraged to enroll in training in Relias. Enrollment is currently occurring concurrently on sign up sheets on the clinical units that are monitored by nursing leadership and Clinical Educator. Enrollment in Relias is the preferred practice and training is being done on the process in class and by Clinical Educator individually and in group meetings and staff meetings on the unit(s).
 - Increase the Number of Trainings offered and Post on a single Calendar** (one document)
The Annual Training Calendar offerings were increased by 50% and posted on a calendar that is displayed on every Clinical Unit and Work area(s).
- CNA Mandatory Trainings Abuse and Dementia Trainings in March/April were well attended with 20 and 18 staff respectively. Make up sessions will be added as needed.
- CNA recertification compliance is 100% recertification rate, CEU's previously assigned in Relias 2020-2022, now in-class trainings resumed
- Nursing Skills Fair scheduled for 4/18/23 Competency Rates to follow.
- Modules & trainings monitored and reports submitted to department leadership
 - "Trips slips and Falls" "Ladder Safety" Dana Hauge, Beta Safety Project

Respectfully Submitted by Theresa Overton, CNO

Chief Operating Officer Report

Prepared by: Ryan Harris, COO

Facilities, Engineering, Other Construction Projects

- We have received payments for the construction cost of the Burney Clinic Water damage claim. Disruption of business claims for the outsourced laundry cost is still pending.
- We continue to have weekly meetings with Aspen Street Architects, Inc. The Executive Leadership Team and Department Managers met with Aspen Street Architects on April 17th and 18th to receive final comments on proposed layouts that will then be presented to the Board.
- The nurse call and demo project are being held up by additional fire stopping that needs to be completed. John is working with maintenance to complete this work. The closeout of these projects continues to be held up by code violations in the area of work that happened years earlier but need to be corrected.
- John is working towards getting the Burney Fire Alarm, Med Gas alarm and transformer relocation projects started.
- There is a growing need to expand our access control and security cameras in our facilities to improve the overall security needs of our organization.
- We have submitted our application with PG&E for their Healthcare Energy Fitness Initiative (HEFI). The next step is to obtain finalized pricing from the contractor to design and install the equipment. We have begun our weekly project calls.
- Alex will be attending the ASHE Academy in Ohio the first week of May. This academy specializes in training for facilities and construction. And prepares you for a certification in facilities management.
- Alex is working on recreating the logs he keeps to meet the standards required by ACHC.
- The facilities team is also working on updating all the handrails in the Burney Annex.
- Alex is working with Infection Control and Housekeeping to set up environmental rounds on a consistent timeline. They are also researching software to keep all the rounding organized.
- I was notified the week of 4/17 of AB 2511 which passed on December 12th, 2022. This bill requires that Skilled Nursing Facilities that are in an OSHPD II building have emergency power for life safety devices, oxygen devices, and maintain safe temperatures between 71 and 81 degrees. This will require us to put our Air conditioning units on backup power at the Burney Annex. How I am interpreting this bill is that Fall River will not be required to do so because it is in an OSHPD 1 hospital building. Once it is reclassified as OSHPD II through our master planning we will need to put the air conditioners on backup power. I have reached out to HCAI to ensure that this is the correct interpretation. This work has to be completed by January 1, 2024, which is going to be difficult due to sourcing generators and how long HCAI projects take to complete.

IT

- Cerner Wi-Fi updates are complete, and this has improved our Wi-Fi at both facilities.
- IT has implemented upgrades to our phone servers.
- IT is fully engaged in the Cerner implementation and is excited that work has begun on the project.

Purchasing

- Rachel has posted a job for the open Stock Clerk position and has already received applicants.
- A new assistant buyer/lab clerk is also being explored to fill needs in both departments.

- The purchasing team has started the Cerner Jumpstart calls to prepare for the Workflow & Integration event.
- Rachel is working to set up the contact for the new GPO.
- The team is also working on getting the supplies list for the mobile clinic to be prepared for when it's open.
- The purchasing department is creating and implementing an inventory check process for the items that expire.

Food & Nutrition Services

- The Burrito Bar was a great success, and the department received a lot of compliments.
- We are continuing to work on updating the menus for all of the residents. So far, the feedback has been great.
- We are starting to work through the process of our plan of corrections for the ACHC Survey.
- Dietary is prepping for the Hospital Week activities.

Environmental Services & Laundry

- We are working on getting Linen Helper set up for the Laundry Facility. This will help manage inventory and tracking of all linens.
- The laundry facility has switched out the bags used for linens to smaller ones. This lightens the load per bag. Springs have also been added to carts. Both updates are to help reduce workplace injuries.
- Sherry is conducting Infection Control training within her department for her staff.
- Sherry is working with Maintenance and Infection Control to schedule environmental rounding.

Rural Health Clinic

- All training for Family Pact has been completed and Dr. Watson attended an in-person training/provider orientation in Sacramento on April 13th. We should receive our welcome letter soon.
- DOT Drug Testing certification has been received by all 3 MA's and we are open to taking DOT testing.
- We have completed and passed our Housing and Community Development inspection and received our Insignia. We are now focused on the CDPH survey. The goal is still to be operational by end of the fiscal year.
- Mobile Clinic workflow meetings are taking place and supply setup is occurring to help prepare for the opening of the mobile clinic.
- Mental Health services are up and running at the RHC via telemedicine.
- MMHD is in talks with another MD that may join the team and provide care in the mobile clinic as well as other departments.

Employee Housing

- Shasta College Nursing students are starting their clinical rotations and will be staying at the lodge starting this weekend.
- Joey and Maintenance are starting to assess the trees that need trimming, in addition to the necessary ground maintenance.
- Spring and summer projects will include new roofs for the houses and a new water filtration system.

CEO Board Report April 2023

Highlights for April:

Let's start off with ambulance. We reached out to SSV and got set up with our licensing although it looks like we may have to do this with NorCal instead which we are told is much easier. We will have that information back to them this coming week as well so that we can get that moving forward. Along with that I reached out to the SEMSA CEO again (Nancy) and asked her to clarify with us what their intentions were with the ambulances and the equipment associated with them. I received the email back from Nancy Toy from SEMSA stating that we were going to get our ambulances back as well as some of the equipment, but she wasn't sure how much of the equipment. I explained to her that we left them with fully operational vehicles, and we expect to get fully operational vehicles back in return which would mean we need the monitors as well. She also stated that they aren't planning on selling their ambulance, but I reminded her of our contract which states if they're unable to perform their duties and they pull out then we have the right to purchase or repurchase as it were any ambulance or equipment associated with that. I asked her to provide us with current fair market value for the second ambulance that has been in use here. I have yet to hear anything back but hopefully by the board meeting I will have more information for you.

Ryan, Travis, and I met with REMSA to work out some of the details to the proposal that they've put together for us. REMSA is currently working on the contract, and we are hoping to have this in the next week so that we can move forward with it. We may need to have a special meeting to sign the contract so that it is in place before the next board meeting.

We also received the letter from Burney Fire stating that their board made the decision not to move forward with us. We will continue to move forward and give them the opportunity in the future. Hopefully we'll still be able to work with them and make things better for Burney as well.

- This Month I attended the Becker's Annual Health Care Conference. If you remember, I presented at this conference as well. The presentation went well, and the conference overall went very well. Lots of good information coming out. There was a very common theme yet again of financial struggles and staffing. There were several good things that I'm looking to bring back and see what we can do with them.

On an exciting note, I had the opportunity to ask a question to Larry Bird. The question that I asked him was to do something for our team and introduce our Mayer's Minute. He said he would do it and now we have a clip of Larry Bird saying, "This is your Mayer's Minute. Good luck!" I was pretty excited about that!

- Travis, Ryan, and I went to Sacramento to the Rural Health Care symposium that CHA put on. It was a little bit disappointing as far as the agenda is concerned. There still isn't much that they're doing in the way of truly helping rural hospitals. In fact, we asked the question point blank to them about what they're doing specifically for a rural hospitals, and we got the dance around answer. I spoke with T who is the hospital council rep for our area, and we agreed to bring this up at the next Council board meeting in May.

- We had a couple of meetings for our strategic planning committee this month. One of the big differences is that we're adding another pillar, the finance pillar. Or at least that's what we will propose. I believe that it's going to be necessary as we move forward, to focus on some specific financial things and so adding the pillar makes sense. I felt that it was a good session, and we had a lot of good information and participation. I feel good about the priorities as well as some new direction for our mission vision and values that we will present to the board. Looking forward to hearing your feedback at the meeting.
- We wrapped up another big master planning session this past week. We took all the data that was presented and made adjustments to the plan and presented it to the team again to make sure we're moving in the right direction. That is the information that we will be presenting to you at the board to make sure that you feel we are on the right direction. From there we'll take that information and try to wrap everything up so that you guys can approve it in June.
- We had our first big quality meeting post ACHC gap analysis. We had a lot more data this time around but it's still very evident that many of our team doesn't understand their role in quality and so Jack and I will be working with them individually to help them feel more comfortable with it as we move forward. I'm excited about the data that will be able to start providing to the board quality committee as well as the board as a whole. If you talk to our staff, they tell you that they do a great job taking care of residents and patients (which they do) and the quality report is what will prove it, so I'm excited to have you see the great work that our team is doing.
- We had an opportunity to meet with inner West captive the folks that handle our benefits. This time we had a more in-depth discussion about self-funding insurance. It looks like it could be a fairly feasible option for us, so we are going to look more into that. They'll be more information to come on this.

Thank you,
Chris Bjornberg