

Mayers Memorial Hospital District

Chief Executive Officer

Matthew Rees, MBA

Board of Directors

Allen Albaugh, President Brenda Brubaker, Vice President Abe Hathaway, Treasurer Michael D. Kerns, Secretary Art Whitney, Director

BOARD of DIRECTORS

MEETING AGENDA

June 25, 2014, 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.

CALL MEETING TO ORDER – Allen Albaugh, President	
CALL FOR REQUEST FROM THE AUDIENCE: PUBLIC COMMENTS OR TO SPEAK TO AGI Persons wishing to address the Board are requested to fill out a "Request Form" prior to the beginning of the available from the Clerk of the Board (M-W), 43563 Highway 299 East, Fall River Mills, or in the Board Room documents to present for the members of the Board of Directors to review, please provide a minimum of nin President announces the public comment period, requestors will be called upon one-at-a time, please stand a and comments. Each speaker is allocated five minutes to speak. Comments should be limited to matter jurisdiction of the Board. Pursuant to the Brown Act (Govt. Code section 54950 et seq.) action or Board be taken on open time matters other than to receive the comments and, if deemed necessary, to refer the appropriate department for follow-up and/or to schedule the matter on a subsequent Board Agenda.	e meeting (forms are). If you have e copies. When the and give your name is within the I discussion canno
APPROVAL OF MINUTES: 3.1 Regular Meeting – May 28, 2014 (ATTACHMENT A)	ACTION ITEM
OPERATIONS C3 Report (CEO, CNO, CCO) (ATTACHMENT B) Facilities Management Report Support Services Report/EMR Report by Louis Ward, Director of Support Services Compliance by Caleb Johnson, Compliance Officer IHF Update − Marlene McArthur (Foundation CEO)	Information
5.1 Finance Committee — Chair Allen Albaugh 5.1.1 Committee Meeting Report 5.1.2 May 2014 Financial review and acceptance of financials (dispersed separately) 5.1.3 2014-2015 Budget Adoption (dispersed separately) 5.2 Strategic Planning Committee — Chair Abe Hathaway 5.2.1 Committee Meeting Report 5.2.2 Approval of 2014-2015 Strategic Plan (dispersed separately)	Information ACTION ITEM ACTION ITEM
5.3 Quality Committee – Chair Brenda Brubaker 5.3.1 Committee Meeting Report	
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6	6.1 July Regular Board Meeting Date	ACTION
7	7.1 AD HOC COMMITTEES: (Appoint) Employee Health Benefits Plan CEO Evaluation Process & Format	ACTION
8	8.1 INFORMATION/REPORTS/BOARD EDUCATION/ANNOUNCEMENTS ► Board Education – QHR Webinar 2 nd Tuesdays 2014, 10 a.m.	Information/ discussion
9	ANNOUNCEMENT OF CLOSED SESSION: 9.1 Government Code Section 54962 Quality Assurance: Quality Improvement Issues, Medical Staff Report (Dr. Dan Dahle, Chief of Staff) 9.2 Approve minutes of the May 28, 2014 Closed Session minutes	ACTION ITEM
	9.3 Government Code Section54957: Personnel: Employee Evaluation CEO (Quarterly)	
10	RECONVENE OPEN SESSION: REPORT ACTIONS TAKEN DURING CLOSED SESSION	
11	ADJOURNMENT: Next Regular Meeting (Pending) July 2014 – Fall River Mills, CA	

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

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

Posted/Distributed: 06/18/14

Attachment A DRAFT

Mayers Memorial Hospital District Board of Directors – Regular Board Meeting

Date: May 28, 2014 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 Allen Albaugh called the regular meeting to order at 1:01 p.m. on the above date with the following present:

Allen Albaugh, President Brenda Brubaker, Vice President Mike Kerns, Secretary Abe Hathaway, Treasurer

Board Members Absent: Art Whitney, Director

Staff Present: Matt Rees, CEO; Keith Earnest, CCO; Sherry Wilson, CNO; Valerie Lakey, Board Clerk; Travis Lakey, CFO; Erik Nielsen, Facilities Manager; Louis Ward, Director of Support Services; Caleb Johnson, Compliance

- **2. CALL FOR REQUEST FROM AUDIENCE TO SPEAK TO ISSUES OR AGENDA ITEMS:** No public comments.
- 3. APPROVAL OF MINUTES A motion/second (Brubaker/Kerns), and carried, (unanimous) the Board of Directors accepted the minutes for the regular meeting held April 23, 2014.
- **4. SPECIAL PRESENTATION:** Dean True, Shasta County Adult Health Services, Dr. Fredrick Jones, MVHC Director of Behavioral Medicine

Mr. True and Dr. Jones gave a report on the status of mental health issues and services in Shasta County. Highlights included:

- Shasta County –5150's are the county's responsibility. They are tracked MMHD has small numbers.
- There are various program available for those that need support
- Shasta County's clinic is open Monday Friday 8:00 am 5:00 pm on a walk-in basis
- Dr. Jones is on-call at MMHD for 5150
- Dr. Jones would like to see a more formal orientation for physicians at MMHD (Wilson will put together an orientation for Dr. Jones)
- MVHC focus on how to change behavior to make health better
- Consensus is there is a lack of mental health services available in county.

5. OPERATIONS REPORT:

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

- ► Matt Rees, CEO:
 - o Rees talked about CCHAN checking into a self-funded insurance plan
 - Introduced Dr. Syverson, the new surgeon who will be beginning at MMHD on August 11
 - Talked about the USDA Loan we are still addressing questions as presented by the federal level.

New Construction/Maintenance Update -Erik Nielsen, Facilities Manager

- Preparing for state survey
- The leach line at the Riverview house was plugged with roots; if it can be fixed it will save about \$20,000
- Building plans are still at OSHPD
- We are working with new people at ANOVA (Michael Ryan and Shannon have left the company)
- Generator shed is not in compliance with OSHPD; working with Michael Ryan to develop a plan and solution
- Pre-Bid meeting for construction site-work is June 6. Five contractors qualified one did

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not. Local contractor, Hat Creek Construction, is on the qualified list.

 Working on what to do about the steel – waiting on USDA approval. The steel is only manufactured periodically.

► Keith Earnest, CCO:

- Only addition to report was that the new CLS began work in the lab yesterday.
- ▶ Sherry Wilson, CNO: Nothing to add to written report.

► EMR – Louis Ward, Director of Support Services

- Ward presented the finished McKesson video
- Went over the Patient Portal
- Meaningful Use we are currently meeting 15 of 16 measures (report was distributed)

▶ Compliance – Caleb Johnson, Chief Compliance Officer

- Addressing billing issues
- o Revenue Cycle Meetings
- Working on Disaster Recovery Plan
- o Has attended several meetings and trainings recently

6. Presentations/Staff Reports: Hospice

Earnest reported:

- Hospice has a new contract with Lincare for DME services.
- o Billing for Hospice is being outsourced for the time being.
- o As of May 1 all Hospice medications had to be tracked
- Dinner fundraiser was a success

7. BOARD COMMITTEES:

7.1 Finance Committee – Chair Allen Albaugh

- **7.1.1** Committee met prior to board meeting and various issues were discussed including new facility financing
- 7.1.2 April 2014 Financial Reports (Brubaker/Hathaway) Approved (All) (Exhibit A)
- **7.1.3** Quarterly Finance Review (*Brubaker/Kerns*) *approved unanimous* to approve.
- **7.1.4** Transfer of Thrift Shop property to the Intermountain Healthcare Foundation. This will lower non-reimbursable space. Cal Mortgage will have to sign-off. *(Hathaway/Kerns) approved unanimous.*

7.2 Strategic Planning Committee – Chair Abe Hathaway

- **7.2.1** Committee Meeting Report Committee met on May 12, 2014. Staffing was reviewed. There was discussion about the policy & procedure software.
- **7.2.2** Balanced scorecard update some areas of responsibility have been shifted. Reports will be provided on a quarterly basis.

7.3 Quality Committee - Chair Brenda Brubaker

- **7.3.1** Committee Meeting Report: Chair Brubaker went over the highlights of the May 14, 2014 Quality Committee meeting. (see quality minutes as distributed)
- **7.3.2** Policy Approval –Annual Program Evaluation. It was moved to approve the said policy at the Board level. *(Kerns/Hathaway) approve unanimous.*

8. 1 Board of Director Election Resolution 2014-02

It was approved by the board to approve Resolution 2014-02 Board of Director Election – Two seats are up for re-election. *(Brubaker/Hathaway) Approved unanimous*

D RAFT

Mayers Memorial Hospital District Board of Directors – Regular Board Meeting

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9. INFORMATION/BOARD EDUCATION/ANNOUNCEMENTS

▶ Board Education – QHR Webinar 2nd Tuesday each month, 10 a.m. PST

10. ANNOUNCEMENT OF CLOSED SESSION: 2:06 pm

10.1 Government Code Section 54962

Quality Assurance: Quality Improvement Issues, Medical Staff Report (Dr. Dan Dahle, Chief of Staff) 10.2 Minutes of the April 23, 2014 meeting

10.3 Government Code Section54957: Personnel – CEO Evaluation

11. RECONVENE OPEN SESSION: REPORT ACTIONS TAKEN DURING CLOSED SESSION

4:11 pm Action taken – minutes of the April 23, 2014 meeting approved

12. ADJOURNMENT: There being no further business, at the hour of 3:08 p.m., President Albaugh declared the meeting adjourned. 4:15 pm



Operations Report May 2014

Mayers Memorial Hospital

Statistics	May YTD FY14 (current)	May YTD FY13 (prior)	May Budget YTD FY14
Surgeries (including C-sections)	54	115	79
➤ Inpatient ➤ Outpatient	19	26	17
	32	89	62
Procedures (surgery suite)	29	156	166
Inpatient (Acute/OB/Swing) Days	1509	1915	1495
Emergency Room	3238	3428	3520
Skilled Nursing Days	23882	24869	24563
OP Visits (OP/Lab/X-ray)	14937	14466	14561
Hospice Patient Days	2230	1466	1031
PT	9099	7279	6490
Ambulance Runs	378	324	312

Operations District-Wide

Matthew Rees, Chief Executive Officer

Administration/CEO activities during the past month:

- A crew was onsite to film the campaign video June 2nd. They interviewed staff, cabinet committee members and community members.
- Met with Dawn Fowler of Dignity Health on June 4th to discuss potential ways to improve communication and patient care between the two facilities. MMH will be added to their list of rehab facilities.
- Met with Dave Jones and Natalia from MVHC on June 4th to discuss Dr. Godzich and the med staff plan.
- On June 6th met with 5 individuals representing different contracting firms for sight walk and discuss bids for the upcoming construction of the new building.
- Attended the Western Region Flex Conference in Santa Fe, NM June 11th-13th. Topics of discussion included MBQIP and quality improvement in the Western Region, Affordable Care Act and market reforms, CAH and small rural hospital legislative updates, current issues in rural emergency medical services and community paramedicine, and Medicare reimbursement updates.
- Attended the Northern Sierra Section Meeting in Redding on June 17th. Some of the topics discussed were: SEIU/CHA resolution, 2014 ballot measures, modern pricing, California Physician Leadership Program, safe prescribing, MediCaid expansion, and key state issues.
- Attended the AHA RPB9 meeting in Sausalito, CA June 19th-20th. Topics of discussion included key legislative issues, principles for payment reform, and the two-midnight policy.
- Plan to attend the OSHPD town hall meeting in Redding on June 26th.

Critical Access Hospital

Keith Earnest, Pharm.D., Chief Clinical Officer

Physical Therapy

- Estimates have been obtained to soundproof the physical therapy gym and treatment rooms. Funding for this project will come from the workers compensation rebate.
- Physical therapy volumes remain strong. Through May of FY14 there have been 8853 patient visits. In FY13 there were 8000 visits total.
- Foam rollers, exercise balls and stretching devices are now sold in the gift shop for patients to work on strengthening and stretching at home.
- Jolene Platko, physical therapist, department manager, is working on getting the equipment needed to reimplement the fit for work program.
- Appointment reminder calls are going out and the no show/cancellation rate is at 15.5%. The department goal is to reduce that rate to <12%.

Laboratory

- The new hire CLS has returned to her home country for a family emergency and is not expected to return. Chris Hall, CLS, lab manager, is following up on a local CLS lead.
- The glucometers have arrived and training on the new machines started June 17th.

Imaging

- The week of June 16th we welcomed aboard two sonographers, Stephanie Baker and Garrett NeVille. Stephanie will be focusing on expectant mothers and Garrett will be performing vascular studies.
- The department is in the process of transferring images from the remote PACS system so they can be easily loaded into our new onsite PACS. Part way into this process we have encountered resistance from the company we are leaving, so we are exploring resolutions.

Cardiac Rehab/Cardiac Services

- Trudi Burns, RN, department manager is exploring options for physicians for the cardiac stress treadmill.
- New referrals to cardiac rehab have been steady with four new patients in the last two weeks.

Pharmacy

- Revisions have been made to the medications stocked on the crash carts.
- Keith Earnest, Kelly Schnieder and Kathy Broadway recently attended a stroke training class at Mercy Mount Shasta. The class involved learning patient assessment, learning protocols to give thromobolytics, and the ability to obtain neurology consult via tele-medicine.
- New policies on infusion of a type of iron that is faster and on treatment of anaphylaxis have been written.

Respiratory Therapy

- An on-call schedule has been implemented for respiratory therapists to respond after hours for emergencies.
- Jackie Crum, RT, respiratory therapy manager, is exploring performing sleep studies on site.

<u>Acute</u> Prepared by Sherry Wilson, RN, Chief Nursing Officer

Outpatient Medical

- April saw an increase in patient census, returning to our normal average at 110. In May we experienced a slight decline.
- Outpatient Department is participating with other outpatient services of MMHD (Pharmacy, Cardiac Rehab,
 Respiratory, etc.) in ongoing meetings with MVHC staff, in order to facilitate smooth referral processes
 between facilities. Areas for discussion have included who is to obtain insurance authorizations for referred
 services, order specifics for given procedures (to include necessary labs, diagnostic tests, specific diagnostic
 and CPT codes etc.). Also reviewed, is a means of communication about patient status post referral. Next
 meeting is scheduled for 7/2/14. At MVHC's request we will be submitting our pre-printed order sheets, as
 they would like the required data to be built into their EMR. As a result, updating these forms has been a
 priority for management.
- Statistical Reports are being run weekly and reviewed by the Billing Office staff (Anita Botorff) and the OP manager (Kay Shannon RN). We have cooperatively decided to dedicate our time to this as charges in need of correction can be caught and corrected prior to a patient's bill being sent out. This effort resulted in found revenue of nearly \$10,000 that had not been captured. It brought to light the need for further education among ED/Acute nursing staff when EMR charting on OPM patients. Training has been provided and is available ongoing to date for any nursing staff providing outpatient services. It also helped us identify an "internal" computer problem, where in the proper codes needed to be "tied" to nursing documentation. These were corrected by the Compliance Manager Caleb Johnson.
- The EMR documentation for OPM has been upgraded to accurately capture the assessments, procedures, and charges that occur in OPM, thanks to Sean Sanders. He has taken his computer skills training and combined with his nursing experience in OPM, he has built an EMR program that now works for us! Thank you Sean!

Surgery

- Dr. Syverson performed his first surgery at MMH. It was a gallbladder and it all went well.
- Disposable supplies have been ordered for gall bladders. (Previous supplies had expired and were not reordered for cost saving practices).
- More disposable supplies will need to be ordered once he becomes more available.
- Dr. Guthrie did one day of surgery in May.

- Still investigating the possibility of doing total joints at MMH. Financially, we have a great price cap with the Smith and Nephew rep for the implants. Just waiting on Dr. Guthrie to see patients who need a total done.
- Will send staff to Mt Shasta for training once we have the commitment.
- All surgery staff work part time in other departments during our down time.
- Surgery full time housekeeper/equipment processor position was posted in anticipation of Dr. Syverson's busy schedule so that training could be done prior to his arrival.

Infection Control

- Infection Control has been working closely with Public Health the past few months to monitor measles and
 pertussis cases in our area. Luckily, the intermountain area has not noticed increased activity with either of
 these diseases although strep infections have seen a sharp increase in our area in all age groups.
- As of May 8th, <u>59</u> confirmed measles cases with onset in 2014 have been reported to the California
 Department of Public Health, but only <u>1</u> of the 59 cases has been in Shasta County. In 2013, only <u>5</u> measles
 cases had been reported by this date.
- As of May 28th, <u>2,649</u> cases of pertussis have been reported to CDPH for 2014, more cases than were reported in <u>all</u> of 2013. Elementary, middle and high school outbreaks have been reported from counties all over California. Over 800 cases have occurred in April 2014 which is the highest monthly case count since the 2010 pertussis epidemic.
- The best way to prevent these infections is to be up to date with your immunizations and, as always, practice good hand hygiene.....WASH YOUR HANDS!!

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

- Census is at 70
- Verbal Report