

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**  
September 27, 2023 @ 1:00 PM  
Fall River Lions Club  
44256 Highway 299  
McArthur, CA 96056

Microsoft Teams Meeting: [Click here to join the meeting](#)  
Meeting ID: 275 803 125 466      Passcode: 2FBKGb  
Phone Conference Line: 1-279-895-6380  
Phone Conference ID: 908 187 762#

**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.

				<b>Approx. Time Allotted</b>	
<b>1</b>	<b>CALL MEETING TO ORDER</b>				
<b>2</b>	<b>2.1</b>	<b>CALL FOR REQUEST FROM THE AUDIENCE - PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS</b>			
		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.			
<b>3</b>	<b>APPROVAL OF MINUTES</b>				
	3.1	Regular Meeting –August 30, 2023	<b>Attachment A</b>	<b>Action Item</b> 1 min.	
<b>4</b>	<b>DEPARTMENT/QUARTERLY REPORTS/RECOGNITIONS:</b>				
	4.1	Resolution 2023-13 – August Employee of the Month	<b>Attachment B</b>	<b>Action Item</b> 2 min.	
	4.2	Retail Pharmacy Kristi Shultz	<b>Attachment C</b>	Report 2 min.	
<b>5</b>	<b>BOARD COMMITTEES</b>				
	5.1	<b>Finance Committee</b>			
	5.1.1	Committee Meeting Report: Chair Humphry		Report 5 min.	
	5.1.2	August 2023 Financial Review, AP, AR and Acceptance of Financials		<b>Action Item</b> 5 min.	
	5.2	<b>Strategic Planning Committee – No August Meeting</b>			
	5.3	<b>Quality Committee – Sep. 27<sup>th</sup> Meeting</b>			
<b>6</b>	<b>NEW BUSINESS</b>				
	6.1	BOD Assessment Process	<b>Attachment D</b>	Discussion 2 min.	

6.2	By-Laws Review		Discussion	2 min.
6.3	Community Center		Discussion	5 min.
<b>7</b>	<b>ADMINISTRATIVE REPORTS</b>			
7.1	Chief's Reports – <i>Written reports provided. Questions pertaining to written report and verbal report of any new items</i>			
7.1.1	Chief Financial Officer – Travis Lakey		Report	5 min.
7.1.2	Chief Human Resources Officer – Libby Mee		Report	5 min.
7.1.3	Chief Public Relations Officer – Val Lakey	<b>Attachment E</b>	Report	5 min.
7.1.4	Chief Clinical Officer – Keith Earnest		Report	5 min.
7.1.5	Chief Nursing Officer – Theresa Overton		Report	5 min.
7.1.6	Chief Operation Officer – Ryan Harris		Report	5 min.
7.1.7	Chief Executive Officer – Chris Bjornberg		Report	5 min.
<b>8</b>	<b>OTHER INFORMATION/ANNOUNCEMENTS</b>			
8.1	Board Member Message: Points to highlight in message		Discussion	2 min.
<b>9</b>	<b>MOVE INTO CLOSED SESSION</b>			
	Medical Staff Credentials – Government Code 54962			
9.1	NEW APPOINTMENT		<b>Action Item</b>	2 min.
	1. Baowei Tang, MD, Rheumatology (Telemed)			
<b>10</b>	<b>RECONVENE OPEN SESSION</b>			
<b>11</b>	<b>ADJOURNMENT: Next Meeting October 25, 2023</b>			

Posted 09/22/2023

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**  
August 30, 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.

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**BOARD MEMBERS PRESENT:**

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

**ABSENT:**

Libby Mee, CHRO

**STAFF PRESENT:**

Chris Bjornberg, CEO  
Travis Lakey, CFO  
Ryan Harris, COO  
Theresa Overton, CNO  
Keith Earnest, CCO  
Valerie Lakey, CPRO  
Britany Hammons, SNF ADON  
Katie Young, CNA & Team Mayers MVP  
Amanda Harris, Telemedicine  
Samantha Weidner, Telemedicine  
Michele King, MHF Director  
Ivan Howes, MMH Intern  
Jessica DeCoito, Board Clerk

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**2 CALL FOR REQUEST FROM THE AUDIENCE - PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS:** KAREN VAN CLEAVE – COMMUNITY MEMBER AND BOARD MEMBER OF THE BURNEY FIRE DISTRICT. BOB MAY – BURNEY FIRE DISTRICT CHIEF.

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**3 APPROVAL OF MINUTES**

3.1	A motion/second carried; Board of Directors accepted the minutes of July 26, 2023.	<b>Utterback, Cufaude</b>	<b>Approved by All</b>
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**4 DEPARTMENT/OPERATIONS REPORTS/RECOGNITIONS**

4.1	A motion/second carried; Katie Young was recognized as July Employee of the Month. Resolution 2023-12. Started at MMHD in Dietary. Enrolled in our CNA program and is now a NOC shift employee on the Burney Annex floor. She has been a great team member. And is interested in continuing her education and career with MMHD.	<b>Utterback, Humphry</b>	<b>Approved by All</b>
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4.2 Hospice Quarterly: written report submitted. Researching the Dog Therapy program.

4.3 MHF Quarterly: written report submitted. Introduction of Michele King as the Program Director. The Golf Tournament went well, 22 sponsors, 45 donors for raffles, down in golfers but still came out successful. Approximately \$25,000 made. Already working on plans for next year. Mayers Employee Giving program is in planning mode. Northstate Giving Tuesday is next up on the list of events – Tuesday after Thanksgiving. Denim & Diamonds is set up for January 27<sup>th</sup> with Jared Hovis as the entertainer.

4.4 Skilled Nursing Facility: written report submitted. Census went up by 1. Residents really want some pet therapy introduced into their activities. Our Covid response to our latest event was really good. Some additional re-training and reminding of PPE, isolation and cleaning protocols was needed but our team did awesome.

- 4.5 Surgery: written report submitted. Dr. Schepps' is our surgeon and will begin on October 16<sup>th</sup>. We have worked on communication with local clinics for referrals. We continue to team up with Modoc Medical Center for scrub techs and surgery team members.
- 4.6 Telemedicine: written report submitted. Outpatient visits grew by 9% and we added two more specialties. The program will be transferred over to Samantha in the new year but has already been in training.

## 5 BOARD COMMITTEES

### 5.1 Finance Committee

5.1.1 **Committee Report:** Cash on Hand looks great. Great collections this past month. AR is down. New Accountant begins on next Tuesday. CHIC ( ) insurance broker that works for just rural hospitals throughout the country. Will save us 15-20% on our plan and no downstream affects to employees. GPO meeting yesterday and we can save 36.2% on our supplies. National Health Service Corp. application was approved to help expand our pool of clinical staff we can bring on. Working on phase 5 of the audit, that has gone very well so far.

5.1.2 **July 2023 Financials:** motion moved, seconded and carried to approve financials. **Guyn, Humphry** **Approved by All**

5.1.3 **Board Quarterly Finance Review –** Finance Committee reviewed the binder and found that everything was in order. **Humphry, Utterback** **Approved by All**

Motion moved, seconded and carried.

5.1.4 **Veregy Solar Project Update:** Public Notice was given in the newspaper, unfortunately the contract was not ready for approval. We are hoping for next month to provide that contract to you for review. The project will begin in April regardless of contract being approved.

5.2 **Strategic Planning Committee Chair Utterback:** No July Meeting

5.3 **Quality Committee Chair Guyn: DRAFT minutes attached**

5.3.1 Good progress is being made in the Hospital Quality Committee with the department managers. 83% completion of transfer information. September's meeting will be skipped due to Cerner

## 6 NEW BUSINESS

### 6.1 Policies and Procedures:

1. Board Meetings – Location, Time, Date and Quorum
2. Charting and Documentation for Outpatient Clinics
3. Clinic Appointment No-Show Late-Cancel Policy
4. HHS Poverty Guidelines MMH 389
5. Laboratory Reports
6. Multiple Specimen Collection
7. Unidentified Patient Arm Bands
8. Urine Drug Testing

**Guyn, Utterback** **Approved by All**

Motion moved, seconded and approved.

## 8 ADMINISTRATIVE REPORTS

### 8.1 Chief's Reports: written reports provided in packet

8.1.1 **CFO:** New accounting system being used – Multiview. The packet looks a little different than normal and we are working to get it to look like it has in the past.

8.1.2 **CHRO:** Because there is no Covid sick time required for employees, we will have to use the work comp. process to file any incident where an employee received covid from a work related setting.

8.1.3 **CPRO:** Call scheduled with CHA and Senator Dahle this afternoon on bill AB 40 – has to do with offloading times. Legislative Strategy Group call is scheduled for Friday afternoon to talk about the bills that were put on suspense. Some bills include SB 25 – minimum wage increase. Intern Program has been a great program where we can introduce our interns to all of the different departments in the hospital, including the MHF Golf Tournament. Fair is coming up this week and we are in full set up mode.

8.1.4 **CCO:** Gearing up for Cerner and doing a lot of interface testing.

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](http://www.mayersmemorial.com).

- 8.1.5 **CNO:** We no longer have any Covid positive residents. LTC Cerner timeline was released for a kickoff in November and go live in April. ED Interim Manager has begun her time with MMHD and has jumped right in. CNA program has been very good for filling the open positions, which is leading us to look into our LVN program starting up.
- 8.1.6 **COO:** Lots of water work being done at the lodge on the aging system. Air Exchanges are being tested in surgery today. HCAI is conducting more field visits with emphasis on non-permitted work. A project has begun on the HVAC unit replacement over the FR LTC DON office, Dietary and Dining Room.
- 8.1.7 **CEO:** Managed Care Organization (medicare products) will start being taxed. Legislation is being drafted on MCO and we are watching this closely. Additional redundancies are being set up for internet connection in the event we have another fiber issue. IGT's will hit in February and you will see more going out financially than historically.

**9 OTHER INFORMATION/ANNOUNCEMENTS**

- 9.1 Board Member Message: Employee of the Month, Golf Tournament highlights, Surgery being opened up, Telemedicine marketing, National Health Services approval, Farmers Market at the Pit River Lodge.

**10 ADJOURNMENT: 2:45 PM**

**Next Meeting September 27, 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 Healthcare District*

\_\_\_\_\_  
Board Member

\_\_\_\_\_  
Board Clerk



**RESOLUTION NO. 2023-13**

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

**Bridget Bernier**

**As August 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, Bridget Bernier is hereby named Mayers Memorial Healthcare District Employee of the Month for August 2023; and

**DULY PASSED AND ADOPTED** this 27<sup>th</sup> day of September 2023 by the Board of Trustees of Mayers Memorial Healthcare District by the following vote:

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

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

ATTEST:

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Jessica DeCoito  
Clerk of the Board of Directors



# Quality Service Pillar



Executive Leader: Keith Earnest  
 Director or Manager:  
 Department: Retail Pharmacy

Last Updated:

FY24 (July 1, 2023 - June 30, 2024)							
Priority:	Weight	Bonus Amount	Specific Plan & Estimated Completion Date	Driver	Current Actions	% Complete By FY End	Bonus Amount Awarded
Send customer surveys to obtain baseline. Implement plan for targeted improvement. Resurvey to be sent out in May			Send out Customer Service Survey 10/2023	Kristi	Digital Pharmacist App has went live as of 09/20/23. I will be sending out a survey 10/15/2023.		
			Analyze results 11/01/2023				
			Send out Customer Service Survey by 01/30/2024				
			Analyze results from December survey 02/30/2024				
			Final Customer Survey to be sent out by 05/15/2023				
			Provide final analysis by 06/30/2023				
<b>Priority Ideas for Next Year</b>							

**For Completion at Beginning of Fiscal Year**

_____	_____	_____
Name	Signature	Date
_____	_____	_____
Supervisor	Signature	Date
_____	_____	_____
Executive Leader	Signature	Date

**CEO Approval at End of Fiscal Year**

Christopher R Bjornberg	_____	_____
CEO	Signature	Date



# Growth Pillar



Executive Leader: Keith Earnest  
 Director or Manager:  
 Department: Retail Pharmacy

Last Updated: 07/18/2023

FY24 (July 1, 2023 - June 30, 2024)							
Priority:	Weight	Bonus Amount	Specific Plan & Estimated Completion Date	Driver	Current Actions	% Complete By FY End	Bonus Amount Awarded
Capture 340B Claims from specialists to 75%			MTM Certified by 06/01/2024	Kristi	Currently enrolled in PowerPak Pharmacy Technician Certificate program. Currently at 50% completion		
			Alesha to obtain CPhT License by 06/01/2024	Alesha Johnson\Kristi	Study materials have been provided to her and she is given 4 set hours a week to study. She has schedule her Exam for November 2023		
			Identify # of specialist referrals sent from Mayers Clinic 12/30/23	Kristi			
			Identify # of specialist claims 12/30/23	Kristi			
			Implement Referral tool to Capture Referrals 01/30/2024	Kristi			
			Analyze # of specialist referrals sent out and # of specialist Claims captured 03/30/24	Kristi			
			Increase our Referral claim capture < 50% 06/30/2024	Kristi			
Priority Ideas for Next Year							

For Completion at Beginning of Fiscal Year		
_____ Name	_____ Signature	_____ Date
_____ Supervisor	_____ Signature	_____ Date
_____ Executive Leader	_____ Signature	_____ Date

CEO Approval at End of Fiscal Year		
_____ Christopher R Bjornberg CEO	_____ Signature	_____ Date





# Finance Pillar



Executive Leader: Keith Earnest  
 Director or Manager:  
 Department: Retail Pharmacy

Last Updated:

FY24 (July 1, 2023 - June 30, 2024)							
Priority:	Weight	Bonus Amount	Specific Plan & Estimated Completion Date	Driver	Current Actions	% Complete By FY End	Bonus Amount Awarded
Increase our year end performance payment amount to 40% (2022 was 32.5%) by integrating payer performance efforts.			Gain a better understanding of how to use Performance tools and maximize our efforts for Optimal Profitability 12/01/2023	Kristi			
			Obtain MTM certification. Work with our new RPH to implement and integrate a process into our pharmacy workflow to perform TI's, CMR's, and TMR's for the MTM services.	Kristi			
			Obtain access to EQuIPP to increase our adherence scores, lower our contract rates, and properly report and document our MTM services performed to our patients. 01/01/2024	Kristi	Access has been obtained, will start reporting MTM services once I am certified as well as the Retail RPH.		
			Outcomes MTM Access 01/01/2024				
<b>Priority Ideas for Next Year</b>							

For Completion at Beginning of Fiscal Year		
_____ Name	_____ Signature	_____ Date
_____ Supervisor	_____ Signature	_____ Date
_____ Executive Leader	_____ Signature	_____ Date

CEO Approval at End of Fiscal Year		
_____ Christopher R Bjornberg CEO	_____ Signature	_____ Date

## BOD Assessment Questions 2022

<b>Section A</b>	1	Our organization has three to five year strategic plan or a set of clear long range goals and priorities.
	2	The Board's meeting agenda clearly reflects our strategic plan or priorities.
	3	The Board has insured that the organization also has a one-year operational or business plan.
	4	The Board gives direction to staff on how to acheie the goals primarily by setting or referring to policies.
	5	The Board ensures that the organization's accomplishments and challenges are communicated to members and stakeholders.
	6	The Board has ensured that members and stakeholders have received reports on how our organization has used its financials and human resources.
	7	Add together your ratings for Section A and select that matching overall rating
<b>Section B</b>	8	Board Members are aware of what is expected of them.
	9	The agenda of board meetings is well planned to that we are able to get through all necessary board meetings.
	10	It seems like most board members come to meetings prepared.
	11	We receive written reports to the Board in advance of our meetings.
	12	All Board members participate in important board discussion.
	13	We do a good job encouraging and dealing with different points of view.
	14	We all support the decisions we make.
	15	The Board has taken responsibility for recruiting new board members.
	16	The Board has planned and led the orientation process for new board members.
	17	The Board has a plan for director education and further board development.
	18	Our Board meetings are always interesting.
	19	Our Board meetings are frequently fun.
20	Add together your ratings for Section B and select the matching overall rating.	
<b>Section C</b>	21	There is a clear understanding of where the Board's role ends and the CEO's begin.
	22	There is good two-way communication between the Board and the CEO.
	23	The Board trusts the judgement of the CEO.
	24	The Board provides direction to the CEO by setting new policies or clarifying existing ones.
	25	The Board has discussed as communicated the kinds of information and level of detail it requires from the CEO on what is happening in the organization.
	26	The Board has developed formal criteria and a process for evaluating the CEO.
	27	The Board, or a committee of the Board, has formally evaluated the CEO within the last 12 months.
	28	The Board evaluates the CEO primarily on the accomplishment of the organization's strategic goals and priorities and adherence to policy.
	29	The Board provides feedback and shows its appreciation to the CEO on a regular basis.
	30	The Board ensures that the CEO is able to take advantage of professional development opportunities.
	31	Add together your ratings for Section C and select the matching overall rating.
<b>Section D</b>	32	I am aware of what is expected of me as a Board member.
	33	I have a good record of meeting attendance.
	34	I read the minutes, reports and other materials in advance of our Board meetings.
	35	I am familiar with what is in the organization's by-laws and governing policies.
	36	I frequently encourage other Board members to express their opinions at Board meetings.
	37	I am encouraged by other Board memebars to express my opinions at Board meetings.
	38	I am a good listener at Board meetings.
	39	I follow through on things I have said I would do.
	40	I maintain the confidentiality of all Board decisions.
	41	When I have a different opinion that the majority, I raise it.
	42	I support Board decisions once they are made even if I do not agree with them.
	43	I promote the work of our organization in the community whenever I have a chance to do so.
	44	I stay informed about issues relevant to our mission and bring information to the attention of the Board.
	45	Add together your ratings from Section D and select the matching overall rating.



## Operations Report September 2023

Statistics	August YTD FY24 (current)	August YTD FY23 (prior)	August Budget YTD FY24
Surgeries			
➤ Inpatient	0	0	TBD
➤ Outpatient	0	0	TBD
Procedures** (surgery suite)	0	0	TBD
Inpatient	318	416	203
Emergency Room	719	827	800
Skilled Nursing Days	4884	4728	4652
OP Visits (OP/Lab/X-ray)	2546	3136	2247
Hospice Patient Days	151	403	322
PT	387	458	459

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

\*\*Procedures: include colonoscopies

**Human Resource**  
**September 2023 Board Report**  
Submitting by Libby Mee – Chief Human Resource Officer

**Staffing and Recruitment**

*Surgery*

We are continuing our partnership with Modoc Medical Center to recruit a permanent, full time General Surgeon and CRNA. We will be work with the Delta Physician Placement group and they already have interested candidates.

Additionally, we have 11 employees that have applied for the in-house Scrub Tech certification program. The surgery team will be doing interviews soon, and 2 employees will be selected for the program.

*H1B Visa/International Recruitment*

In efforts to fill our last full time Laboratory CLS position, we have been working with a company and immigration attorney to place an interested applicant from the Philippines. We have found an interested applicant, and they have accepted our offer of employment. We are currently moving through the Visa process with the support and guidance of our immigration attorney.

*Employee Engagement Survey*

We are planning on doing an employee engagement survey early next year. In efforts to provide the best experience, and have trackable data, we are going to have an outside agency provide the survey. We are currently researching available systems.

*Career Fairs*

Members of the MMHD team are registered and scheduled to attend the below events:

- Health Resource & Services Administration Virtual Fair Wednesday September 20
- Smart Center Job Fair at Simpson University in Redding on October 3
- Burney High School Career Fair in Burney on October 6
- Colledge of the Siskiyou in Weed on October 17
- Oregon Tech in Klamath Falls on October 20
- Chico State University in Chico on October 25

**Employee Health and Wellness**

*Safe Patient Handling*

We are gaining momentum as we are formalizing our Safe Patient Handling Program. The program is being implemented as a safety culture change for employees and patients alike and will directly affect 6 departments. The committee is striving for implementation in November.

This program is another Employee Wellness Initiative from BETA, and with successful implementation, the district will receive a 2% decrease in premiums.

#### *Employee Assistance Program – Modern Health*

We are very excited to have finalized our partnership with Modern Health. Modern Health is a platform that we will launch in October to significantly expand our Employee Assistance Program. Available support topics include Emotional, Professional, Relationships, Physical and Financial. Employees can choose from one-on-one care, group care, or self-care options. Additionally, each participant will have direct access to 6 therapy and 8 coaching sessions. The program will be available to benefit eligible employee and their dependents.

#### *Work Related injury and Illness*

For 2023, we have had 8 reportable claims resulting in 42 days away from work. Of these claims, 4 were from employees that claimed they contracted COVID from work, resulting in 19 days away from work.

There have been 11 first aide injuries resulting in 3 days away from work.

#### **Events/Conferences**

##### *Shasta Health Rock Stars*

In partnership with the Shasta Health Assessment and Redesign Collaborative (SHARC) MMHD will be participating in the first ever Shasta Health Rock Stars Awards and Rural Health Celebration event on November 15<sup>th</sup> in Redding. MMHD has nominated multiple employees that have made outstanding contributions to our community.

##### *Reach Higher Shasta Summer Intern Program*

At our monthly SHARC meeting, the representative from Reach Higher Shasta brought up that they are wanting to build a summer internship program. I mentioned that MMHD has a program in place and that we would be happy to share any information with the group. Because of this, MMHD has been asked to speak about our program at a breakout session with education and community partners and a schooled event in November.

##### *BETA Healthcare Group Annual Symposium*

Dana Hauge, Safety Officer, and I will be attending the BETA Healthcare Group Annual Symposium on Thursday September 21 and Friday September 22. Additional details will be provided in the meeting.

Scheduled to attend the Trusted Leader Summit November 7<sup>th</sup>, 8<sup>th</sup> & 9<sup>th</sup>

# EMPLOYEE STATISTICS

As of September 20 2023

**288**

Total employees

**19**

Open Requisitions

**40**

Available Positions

## PAYCOM:

**19**

Active Applications

## RECRUITING AGENCIES:

**8**

Active applications



## RETENTION VS. LOSS

**5**

People hired/rehired total Sept 1-20th



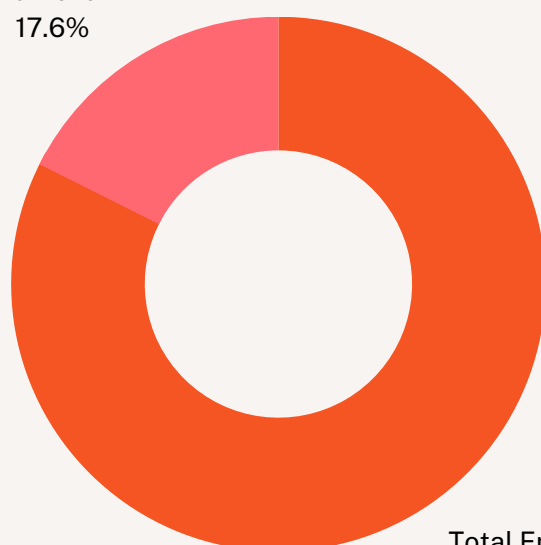
**6**

people terminated their employment Sept 1-20th

## 2023 HIRED VS. TERMED

64 employees hired & 61 termed for a total of 348 employees

Turnover  
17.6%



Total Employees  
182.4%



**Bolded** = Actively Recruiting

\*= Top Priority

**Positions:**

**# available:**

**Clinical Lab Scientist**

1 FT, PER DIEM

Emergency Dept Medical Director

1

**\*Emergency Dept Supervisor**

1

**\*Front Office Clerk- Rural Health Clinic**

1

**Hospice Home Health Aide**

PER DIEM

**\*Independent Retail Pharmacist**

1

**Med/Surg Acute RN**

1

**Med/Surg Acute Charge Nurse**

1

**\*Pharmacist**

1

Rural Healthcare EMT

PER DIEM

Rural Healthcare Paramedic

1 FT, PER DIEM

**\*Skilled Nursing CNA**

10





**Chief Public Relations Officer – Valerie Lakey**  
**September 2023 Board Report**

**Legislation/Advocacy**

The legislative session ended and the bills that have passed are awaiting the governor’s signature. The most notable is the last-minute amendments to SB 525 accepted by SEIU after it was looking like there were not enough votes to pass the bill.

**Health Care Worker Minimum Wage — *Passed***

Negotiated a legislative agreement that strikes a critical balance between supporting workers and protecting jobs and access to care in some of California’s most vulnerable communities. This solution includes time-limited preemption of local ballot initiatives setting both minimum wages and caps on executive compensation in several cities. ([Senate Bill 525](#))

The bill was divided into three categories, for MMHD, as a critical access, rural hospital the results of the bill look like this:

We will be at \$25 by 2033.

- For California’s most vulnerable communities, served by: 1) the 31 hospitals in the state that are not part of a health system and are rural; 2) the 39 hospitals in the state that are not part of a health system and have a government payer mix of 75% or more; and 3) the seven hospitals in the state that are part of a health system where both the hospital and the health system have a government payer mix of 90% or more:
- \$18 in June 2024
- Minimum wage after 2024 would be increased by 3.5% annually until it reaches \$25 in June 2034. It would be indexed thereafter to the lower of inflation or 3.5%.

**Ambulance Patient Offload Times — *Improved***

Secured amendments to a bill that would have implemented a statewide, 20-minute standard to require local emergency medical services agencies to establish standards of no more than 30 minutes 90% of the time. ([Assembly Bill 40](#))

**Workers’ Compensation Presumptive Eligibility — *Paused***

Passed a bill that would have created a rebuttable presumption that an infectious disease, respiratory disease, cancer, PTSD, musculoskeletal injury, or respiratory disease arose out of work for any hospital direct patient care worker. ([Assembly Bill 1156](#))

**Physician Choice for Critical Access Hospitals — *Passed***

Passed a bill that makes permanent the authority for critical access hospitals to hire physicians directly by eliminating the sunset to a pilot program that expires this year. ([Assembly Bill 242](#))

**Marketing/Public Relations/Communications**

We had a great time promoting our services at the Inter-Mountain Fair. Thank you to all that participated and helped. We were able to build our email list significantly, which will help with our new quarterly digital newsletter.

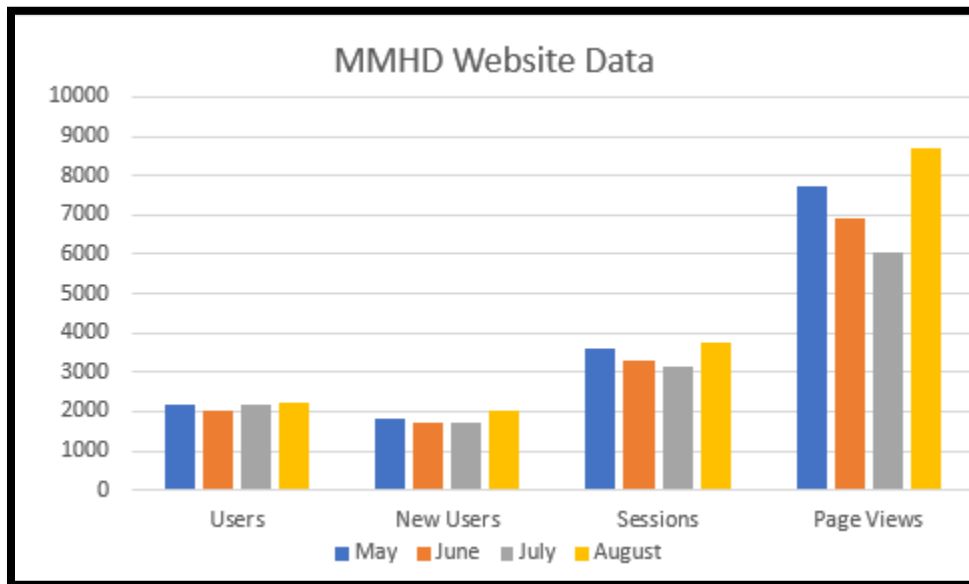
We had staff representation at the Fall River Elementary Open House. This was a great opportunity to promote our Rural Health Clinic to families at the Elementary School. We will also be having a table at the Fall Festival.

Marketing materials for the DOT Physicals have been put out to the community promoting provider Heather Corr and the availability of DOT physicals in the mobile clinic.

We are currently developing more social media platforms including a YouTube channel which will feature department service videos, testimonials, healthcare content and features about the clinic, pharmacy, and hospital services. We have also started using a link tracking platform to monitor link clicks to better understand which content is effective in our marketing.

The television campaign is doing well. The views and interactions are on target. We are building other campaigns around the commercial theme.

For quality reporting we have been tracking analytics related to the website and social media and have seen an increase in several areas.



Other current Marketing and PR projects include reviewing all signage and branding within the facility to ensure consistency, full website reviews and requested department marketing.

## **Foundation**

The Mayers Healthcare Foundation is excited to present MMHD with funds from our annual golf tournament. The net profit for the tournament came to \$24,871.17. With our policy of awarding 75% to the designated cause – we will be awarding \$18,653.37 to the MMHD ambulance. Thank you to everyone that made this event such a remarkable success!

MHF is also please to announce that we have increased our department grant giving by over \$30,000 this year. We will be awarding \$80,480.99 to nine different MMHD departments. Last year MHF awarded \$50,000 in department grants. The department managers will be notified within the next couple of weeks.

MHF will be involved in Northstate Giving Tuesday scheduled for Tuesday, November 28, 2023. The MHF board has once again designated the funds to be used for the MMHD Certified Nurses Assistant Program. Information on how you can support this cause will be sent out over the next month.

The Denim and Diamonds Gala is scheduled for Saturday, January 27, 2024, at the Ingram Hall at the Inter-Mountain Fairgrounds. Jared Hovis will be the featured entertainment and there will be an exciting reverse raffle. Details will follow when we get the prize confirmed.

We have moved the Foundation Office into the Fall River Arts building and have staged the front area with Thrift Store furniture sales items. We will begin making plans for the eventual move of the Thrift Store over to the building.

Other projects at this time include preparing to send the Annual Appeal, converting the Thrift Store to a Point-of-Sale system, recruiting volunteers, organizing a volunteer luncheon and working on revising policies.

## **NURSING SERVICES BOARD REPORT**

**September, 2023**

### **CNO Board Report**

- Cassandra LaFave to start new role as Interim DON-SNF, Sept. 24<sup>th</sup>. She is currently our Infection Preventionist. She has played a significant role in Covid regulations in SNF and has an extensive background as DON in past years.
- In conversation with HR to increase efforts for LVN staff recruitment for SNF. Currently at St. 2 there are no LVN FTE. Utilizing registry.
- Pending SOC 341 self-reports reviewed and cleared by CDPH. One report pending review.
- Cerner GO-Live started Sept. 18. The nursing department have been positive and there have been no negative reports. Any issues fixed with ease. Some departments who had concerns have been very happy once in the system.

### **SNF**

- Census- (80) Fall River- 33 Burney Annex- 27 Memory Care- 20
  - Fall River – 2 Female bed, 2 Male beds, 1 Hospice or 2 M/F available.
  - Burney – 2 Female beds available.
- Cassandra LaFave new Interim DON started 9/25/23.
- Five students completed the CNA class 9/19/23. (one dropped out in week 5)
  - Next CNA class tentatively scheduled to start in January.
- Continuing to struggle with staffing in-house nurses. Medifis and NPH are meeting our needs at this time to maintain staffing ratios.
  - Shasta College reached out with a VN student that is interested in precepting in Burney. The student has expressed intent to apply after gaining licensure.
  - SNF & Acute Director will attend the Shasta College Job Fair on November 2<sup>nd</sup>.
- SOC 341 self-reports reviewed and cleared by CDPH. One report pending review.
- SNF Cerner implementation is due to start at the end of November.

### **Acute**

- August 2023 Dashboard
  - Acute ADC 3.19, LOS 6.18
    - i. Patient unable to go to swing due to insurance issues caused high LOS for month, similar result expected in September
  - Swingbed ADC 2.06, LOS 12.8
  - OBS: At time of report, data unavailable due to privilege issues
- August Staffing: Required 8 FTE RN/LVN's, 2 PTE RN's, 4 FTE CNA's & 2 FTE Ward Clerks
  - Utilizing 2 PTE NPH traveler
  - Open positions: 1 Noc RN

## Emergency Services

- August 23 Dashboard
  - Total treated patients: 337
  - Inpatient Admits: 21
  - Transferred to higher level of care: 13
  - Pediatric patients: 40
  - AMA: 3
  - LWBS: 2
  - LPTT: 0
  - Present to ED vis EMS: 56
- August Staffing: Required 8 FTE RN, 2 PTE RN's, 2 FTE Tech's
  - Utilized 4 FTE contracted travelers
  - RN Supervisor continues with temporary role of Clinic Project Manager for Cerner
    - Utilizing (1) contracted traveler to fill this open FTE position temporarily
  - Open positions: 2 FTE RN
  - Interim manager started August 21<sup>st</sup>

## Ambulance Services

- Ambulance Runs-- 54 ambulance runs for the month of August.
- We are still short one full time paramedic, but between our per diem paramedics, we have been able to maintain coverage and cover a second ambulance while one is out on a transfer, or when we have multiple calls.

## Outpatient Surgery

- Cerner: Weekly one hour meetings for Surgery build of EMR. 3 additional hours weekly on build. Surgeon preference cards added.
- Surgical Suites: Supplies stocked as received for surgical cases and colonoscopies.
- Sterile Supply Department: Organization of a Laparoscopic Cart, all supplies and instruments now on one cart. Cases for Colonoscopies picked and organized. Case for Laparoscopic Cholecystectomy and mass excision picked. A form was created as a communication tool for picking cases.
- Dr. Schepps and CRNA Ben Weaver confirmed for start date of October 16<sup>th</sup>.

## OPM

- The Outpatient Census (*110 approx. a month*) Census is increasing. July 167 procedures. August 138 procedures.

## Clinical Education Report

- **TRAINING CALENDAR--** The Inservice Training Calendar has been updated for the final quarter of 2023. The update is in the Relias platform and is reflected on the informational monitors throughout the facilities and posted on the units. Meanwhile,

some trainings have been held but the location has been changed i.e. BLS, ACLS, CNA orientation. BLS trainings are scheduled in the McArthur and Burney classroom through October at which time Cerner trainings will begin for LTC. The classroom in Burney is a training site option for us now that the NATP has ended.

- ALL staff requiring BLS, ACLS and PALS are currently certified.
- There are 2 participants for BLS renewal in September on the 20th.
- There are 6 participants for renewal in October on the 23<sup>rd</sup>.
- CNA Skills Fair is scheduled for October 23, 24, and 26.
- **Nurse Assistant Training Program (NATP)**-- The NATP ended on 9/19 with five students completing the course. They have been registered for CDPH testing for certification on 10/5 at the Burney Facility. We have been able to recruit the Credentia Organization to return to the Intermountain area after relocating to Redding for testing. This is a win for our students and other NATP programs in the area.
- **Credentia**-- We are very grateful that Credentia has agreed to test our students in Burney on 10/5/23.

Respectfully Submitted by Theresa Overton, CNO

## Chief Operating Officer Report

Prepared by: Ryan Harris, COO

### Facilities, Engineering, Other Construction Projects

- Our Criteria Document meetings have kicked off. Master Plan layout is on schedule for preliminary review in early October. The layout review with department stakeholders is scheduled for October 11<sup>th</sup> and 12<sup>th</sup>.
- The Burney Fire Alarm Panel has started. We are working toward completion and testing the system prior to HCAI signoff and returning the system to service. Our anticipated completion is by the end of October.
- We have engaged with an Architect and engineers to provide proposals for their service and scoping for the replacement of AC #10 which is currently out of service, AC #9 has failed several times in the long-term care dining room, the swamp cooler over the dietary space that does not heat or cool the space well enough and the nonconforming mini split unit. I anticipate this project will take 18 months to bid, permit and construct. Anticipated costs could exceed 1 million.
- The second nonconforming condition identified by HCAI field staff is access control in the Burney Long Term Care. We conducted a site visit with the HCAI FLSO to review the existing site conditions and how the system functions under normal operations. During the site no deficiencies were found in our system. The FLSO is going to review the findings with the HCAI Chief Fire life safety officer and clear any code deficiencies with our system with her approval.
- The final contract for the Solar Project has been agreed upon by both MMHD and Veregy Solar. The final contract and public hearing notice will be planned for the October board meeting.
- We have decided not to pursue a cable management system project as a permit is required which will not allow us to finish in time for ACHC accreditation. We will instead be removing unused cables and rerouting existing cables through existing hangers to meet the ACHC requirement.
- In addition to cleaning up existing cables we will be going through all surgery, acute and station 3 above ceiling spaces to ensure fire and smoke barriers are fully functional. I have submitted details for patching and fire stopping material to the FLSO for approval. This project does not require a permit but does require FLSO approval. This will be a maintenance project completed by our maintenance staff. Maintenance staff will need to be recertified as certified HILTI fire stop installers prior to starting the project. This project will need to be completed in order to meet ACHC requirements.
- Work continues on the design and permitting to replace casework in our dietary departments to provide a long-term solution to some of our survey citations. In the process of designing this project non-conforming conditions have been identified that will cause scope creep within the project. This project will continue to have a high risk of scope creep once existing conditions are exposed.
- We have engaged with Aspen Street Architects and Edge engineering to assist us with meeting the AB2511 requirement. This bill has back up power and cooling requirements for

Skilled Nursing Facilities in OSHPD 2 buildings. At this time, we will not be able to meet the January 1 deadline for this requirement but are looking at having it completed in 2024.

- Our emergency water rationing, and wastewater storage plan is due to HCAI on 1/1/24. We have also engaged with Aspen Street Architects and Nexus to assist us with the development of our plan.
- Annual compliance reporting will start at the end of this year. We have submitted the signage showing the locations of each non-compliant building on our campus to HCAI.
- We have also engaged with an electrical engineer for the relocation of the transformer outside of the Administration building. Primary estimates from the engineers to move it next to the metal shed are in excess of 400 thousand. We are discussing moving it into the landscaped area next to the ambulance garage to reduce costs.

## **IT**

- Our Cerner go live was a great success. I appreciate all of the hard work that was put into this project over the last 6 months as well as our team's willingness to overcome challenges during go live. Jessica, Bridgett, and Hollie did an excellent job managing this project, I was very impressed with the poise through the process and their ability to keep our staff positive.

## **Food & Nutrition Services**

- We have onboarded a new Registered Dietitian (RD) to back up our current RD during absences.
- The dietary department is continuing to work with maintenance on the Plan of Corrections from the survey with the casework being the focal point. This project has been delayed due to permitting requirements.
- Jen and Susan are working on receiving their SERV Safe Manager Certificate.
- Our left-over meal program has been a great success. In the two and a half months since we started, we have saved an astounding 868 meals from going in the trash. Of the 920 meals put out only 52 were throw away.

## **Rural Health Clinic**

- The focus for our Rural Health Clinic (RHC) staff has been the Cerner go live over the last month.
- We are currently going through our compliance team survey which requires an attestation that we are meeting all of their requirements.

## **Employee Housing**

- The new submersible pump has been working great and there has been no water issues since the installation.
- Cancellation of the farmer's market due to lack of producers with product. We will start back up in May 2024.
- Joey is doing research on water filtration systems that will help aid the longevity of our water system.
- Maintenance team and Joey are gearing up for fall and winter weather.



## CEO REPORT SEPTEMBER 2023

Another busy month. We are officially on Cerner now, we had a great booth at the fair, SB525 passed, had conversations with TCCN about the community center and its future, survived the earthquake, represented rural health at the RCRC convention, and attended the ACHD annual conference. These are just a few highlights for this busy month. More detail below:

- We had a great booth at the fair this year. The backdrops are phenomenal. Val did an excellent job with them. We had a lot of good things to talk to people about. We're trying to get people to help us by volunteering with the foundation, we're also trying to get people signed up for communications via email. We had a lot of positive feedback for our booth as well as people coming by very appreciative about the work that we're doing in the direction that we're going. It was nice this year because I didn't really have any negative comments and I was in the booth every day. Last year we had some negative comments and things we had to talk through, but this year was different. Hopefully we'll continue to do those things that will keep the community aware of all the great things they're going on so that can be a regular occurrence at the fair.
- I had conversations with CHA this month about their lack of rural hospital support. In a zoom meeting with multiple rural hospital CEO's, we asked Carmela the CEO, about what they were doing for rural and critical access hospitals, and she could not produce an answer again. This was the same thing that happened at the rural symposium. I told her that this is why we have issues and that we want to see changes moving forward. Their idea of what rural is, is very different and I pointed that out. We understand that we make up less than 10% of all the hospitals in California that they represent but we can't always just be giving, we need to receive help from CHA as well, otherwise it doesn't make sense for us to be part of that organization.

As you can imagine it was not necessarily received very well by CHA. When I finished many of the other CEOs direct messaged me telling me how they were appreciative of me stepping up and saying those things that most people will only think about. I also received emails and phone calls about it as well. Most all the CEO share the same feelings that I expressed. I knew that was true for many of the folks in our hospital council because I've spoken to them about it as their representative, but these were CEO's that are not from our hospital council.

While at the groundbreaking for Plumas Health Districts new Nursing Facility, I spoke with Peggy from CHA about the issue. I also spoke with T Abraham with the hospital council. We all agree we are at a tipping point for CHA and rural/Critical Access Hospitals. I am going to keep pushing on this matter and be a disrupter unless you all tell me otherwise. I think it's important that we are not just used by CHA when it meets their narrative but that we are supported by them.

- Legislatively, things wrapped for this session and as expected SB525 was approved. There were some significant changes to the bill that were beneficial to rural hospitals. They are starting our minimum wage at \$18 with a 3.5% annual increase until it hits \$25

which will be 2033. This will have an affect on us to the tune of about \$600,000 as opposed to \$5.5million at the \$25 mark.

- Then there was the earthquake. At 10:24 on September 8th we had a 5.2 magnitude earthquake that was almost directly in-between Burney and Fall River. It shook the staff up a bit but there are no structural issues that we are aware of. Some small cracks in a wall and some other areas (mostly the lodge). We had some things fall off shelves and walls but that was about it. We will continue to watch and monitor our facilities and see if we find anything. Overall, we held up very well.
- This month was busy with Cerner, we did our Go live readiness check the first full week of this month. This was done both with Cerner and internally. We believed we were ready, and Cerner believe that we were ready as well. We followed that with provider education and training and then we tweaked things here and there as we got ready for the 18th.

Fast forward to the evening of the 17<sup>th</sup> and we had Cerner setup in our hospital ready for the kick over at midnight. Overall, things went very well with the implementation. We had some hiccups here and there, but the team did a great job working through them. PT and Lab seem to have the most difficulties. Lab did a great job working through those difficulties and are doing much better. PT struggled more. This is an area I feel that Cerner really dropped the ball. They had multiple lead during the implementation process and never truly had the “area expert” that the rest of the team had. They were troopers and have kept pushing through the issues and I am sure in time they will feel much better about it.

Our project management team did a phenomenal job which is why we're on track and on time. The team as a whole, has also done a great job making sure things are done and being where we need to be. Overall, despite the issues that we've had with Cerner with the implementation it's very impressive that we are where we are right now. We have a phenomenal team and I'm grateful to be a part of it.

- Travis and I met with TCCN down in Burney. They told the community that they were going to have to close on the 8th of September because of funding issues. We sat down with them to go over what some of those issues are and to see what could be done. We found out that basically they're right around \$4,000 every month in the whole with what they have going on. They did have a group of donors swoop in at the last moment give them \$60,000 so they could keep operating past the 8<sup>th</sup>.

They were not aware that the building would come back to us if they closed it down and they were pretty happy about that because members of their board thought they were going to have to pay for insurance and utilities personally which again is right around \$4,000 a month just to keep the building going in case they were able to get funding to open again. They were very relieved that there was something in play to be able to not lose the building entirely.

We talked with them about the possibility of collaborating. Basically, the idea would be that the hospital district would take it back over again, but they would continue to have a board like they do now to look at services provided to the community. There is also potentially more availability for daycare that we might be able to use from Fall River. We talked about the ability to maybe bus some kids up and back. The setup would be pretty much like our foundation where Val would be over that and would work on making sure that they had an executive director in place, and we worked on finances and other things and then reported to their board. This would work out well from that perspective because they are a non-profit organization. It would also increase our ability to get grants and other things as well.

- Finally, I attended both the ACHD conference (with Jeanne), and the RCRC (Rural County Representatives of California) conference. Both were good conferences. ACHD had a lot of great information specific to districts and I think Jeanne would agree is well worth the time spent there. RCRC was a quick in and quick out meeting. They asked me to come and speak to them about, "The Plight of Rural Healthcare". It was a 90-minute session that I spoke to all of the rural county supervisors and other representatives about the issues facing rural healthcare in the state of California. I also shared our issue with ambulance and how it is a county responsibility and how our county dropped the ball on this so we had to pick it up and run with it despite the fact that we will be losing \$250k-\$300k.

There were several people who came up afterward and thank us for the remarks and educating them about our issues. One of our own county supervisors found me and gave me his card and told me to call him so we could discuss the ambulance situation further. Hopefully there will be some good news to report after I have had that conversation.