



**Mayers Memorial Hospital District**

**Chief Executive Officer**  
Louis Ward, MHA

**Board of Directors**

Abe Hathaway, President  
Michael D. Kerns, Vice President  
Allen Albaugh, Treasurer  
Beatriz Vasquez, PhD, Secretary  
Art Whitney, Director

BOARD of DIRECTORS  
MEETING AGENDA  
July 27, 2016 1:00 pm  
Board Room (Fall River Mills)

*Mission Statement*

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

1	<b>CALL MEETING TO ORDER – Abe Hathaway, President</b>	
2	<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 (M-W), 43563 Highway 299 East, Fall River Mills, or in the Board Room). If you have documents to present for the members of the Board of Directors to review, please provide a minimum of nine copies. When the President announces the public comment period, requestors will be called upon one-at-a time, please stand and give your name and comments. Each speaker is allocated five minutes to speak. <b>Comments should be limited to matters within the jurisdiction of the Board.</b> Pursuant to the Brown Act (Govt. Code section 54950 et seq.) <b>action or Board discussion cannot be taken</b> 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	<b>3.1 Resolution 2016-08–June Employee of the Month (Exhibit 1)</b>	<b>ACTION ITEM</b>
4	<b>APPROVAL OF MINUTES:</b> 4.1 Regular Meeting – June 22, 2016 (ATTACHMENT A)	<b>ACTION ITEM</b>
5	<b>OPERATIONS</b> <ul style="list-style-type: none"> <li>▶ Chief's Reports (CEO, CNO, CCO, IHF CEO) (ATTACHMENT B) WRITTEN REPORT PROVIDED – ADDITIONAL COMMENTS AS NEED VERBALLY</li> <li>▶ AD HOC BUILDING COMMITTEE UPDATE</li> <li>SELECTION OF DESIGN-BUILD FIRM.....</li> </ul>	Information Information <b>ACTION ITEM</b>
6	<b>BOARD COMMITTEES:</b>  <b>6.1 Finance Committee – Chair Allen Albaugh</b> 6.1.1 Committee Meeting Report 6.1.2 June 2016 Financial review, AP, AR and acceptance of financials ..... <b>(Dispersed Separately)</b>  <b>6.2 Strategic Planning Committee – Chair Abe Hathaway</b> 6.2.1 Committee Meeting Report ..... 6.2.2 SEMSA Report.....  <b>6.3 Quality Committee – Chair Mike Kerns</b> 6.3.1 Committee Meeting Report.....	Information <b>ACTION ITEM</b>  Information Information  Information

<p>7</p>	<p><b>NEW BUSINESS</b></p> <p><b>7.1 Review DRAFT revised Emergency Operations Plan (PDF Attached)</b>          For presentation and review – the EOP will be going through Policy process beginning with Safety and Disaster.</p> <p><b>7.2 Authorization to Bind (SHIP Grant) (Attachment C).....</b></p> <p><b>7.3 Policy &amp; Procedure Approval... (PDF Packet Attached).....</b></p> <table border="0"> <tr> <td>Controlled Substance Medication Cart Count Procedure</td> <td>1-2</td> </tr> <tr> <td>Workers' Compensation Insurance</td> <td>2-5</td> </tr> <tr> <td>Transfer of PTO Hours Employee-to-Employee for Hardship</td> <td>6</td> </tr> <tr> <td>Termination at Will</td> <td>7</td> </tr> <tr> <td>Smokeless Policy</td> <td>8</td> </tr> <tr> <td>Renewals, Licensed or Certified Employees</td> <td>9-10</td> </tr> <tr> <td>Quality Review Report</td> <td>11-13</td> </tr> <tr> <td>Medication Error Analysis Tool</td> <td>14-15</td> </tr> <tr> <td>Oxygen Blowout Emergency</td> <td>16-17</td> </tr> <tr> <td>Medication Errors</td> <td>18-19</td> </tr> <tr> <td>Medical Device Reporting</td> <td>20-22</td> </tr> <tr> <td>Endorsement for Physician Reappointment</td> <td>23</td> </tr> <tr> <td>Endorsement for AHP Reappointment</td> <td>24</td> </tr> <tr> <td>Endorsement for AHP Appointment</td> <td>25</td> </tr> <tr> <td>Endorsement for Physician Appointment</td> <td>26</td> </tr> <tr> <td>Keys; Departmental &amp; Facility</td> <td>27</td> </tr> <tr> <td>Job postings, Transfers &amp; Promotions</td> <td>28-29</td> </tr> <tr> <td>Hazard Communication Program</td> <td>30-35</td> </tr> <tr> <td>Harassment; Non</td> <td>36-37</td> </tr> <tr> <td>Exit Interviews</td> <td>38-42</td> </tr> <tr> <td>Employee Relief Fund</td> <td>43-47</td> </tr> </table>	Controlled Substance Medication Cart Count Procedure	1-2	Workers' Compensation Insurance	2-5	Transfer of PTO Hours Employee-to-Employee for Hardship	6	Termination at Will	7	Smokeless Policy	8	Renewals, Licensed or Certified Employees	9-10	Quality Review Report	11-13	Medication Error Analysis Tool	14-15	Oxygen Blowout Emergency	16-17	Medication Errors	18-19	Medical Device Reporting	20-22	Endorsement for Physician Reappointment	23	Endorsement for AHP Reappointment	24	Endorsement for AHP Appointment	25	Endorsement for Physician Appointment	26	Keys; Departmental & Facility	27	Job postings, Transfers & Promotions	28-29	Hazard Communication Program	30-35	Harassment; Non	36-37	Exit Interviews	38-42	Employee Relief Fund	43-47	<p>Information</p> <p><b>ACTION ITEM</b></p> <p><b>ACTION ITEM</b></p>
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<p>8</p>	<p><b>8.1 INFORMATION/REPORTS/BOARD EDUCATION/ANNOUNCEMENTS</b></p> <ul style="list-style-type: none"> <li>• <b>Legislative Update – Val Lakey</b></li> <li>• <b>Board Comments, Upcoming Events, etc.</b></li> </ul>																																											
<p>9</p>	<p><b>ANNOUNCEMENT OF CLOSED SESSION:</b></p> <p><b>9.1 Government Code Section 54952</b>          Quality Assurance: Quality Improvement Issues, Medical Staff Report          (Dr. AJ Weinhold, Chief of Staff)</p> <p><b>STAFF STATUS CHANGE</b></p> <ol style="list-style-type: none"> <li>1. Maria Barton, CRNA – Move to Inactive</li> <li>2. Matthew Andres, DO – Move to Inactive</li> </ol> <p><b>MEDICAL STAFF REAPPOINTMENT</b></p> <ol style="list-style-type: none"> <li>1. Todd Guthrie, MD – Ortho. Surgery</li> <li>2. Dan Dahle, MD – Family &amp; Emergency Medicine</li> <li>3. Tom Watson, MD – Family &amp; Emergency Medicine</li> </ol>	<p><b>ACTION ITEMS</b></p>																																										

10	<b>RECONVENE OPEN SESSION: REPORT ACTIONS TAKEN DURING CLOSED SESSION</b>	
11	<b>ADJOURNMENT:</b> Next Regular Meeting August 24, 2016, Fall River Mills	

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, 43553 Highway 299 East, Fall River Mills CA 95028.

This document and other Board of Directors documents are available online at [www.mayersmemorial.com](http://www.mayersmemorial.com).

Posted/Distributed 07/22/16

***\*Quality, Strategic Planning & Finance Minutes attached***



**Mayers Memorial Hospital District**  
*Always Caring. Always Here.*

**RESOLUTION NO. 2016-08**

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

**Suzanne Mason, Fall River Mills**

**AS June 2016 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, Suzanne Mason is hereby named Mayers Memorial Hospital District Employee of the Month for June 2016; and

**DULY PASSED AND ADOPTED** this 27th day of July 2016 by the Board of Trustees of Mayers Memorial Hospital District by the following vote:

AYES:  
NOES:  
ABSENT:  
ABSTAIN:

\_\_\_\_\_  
Abe Hathaway, CHAIRMAN  
Board of Trustees, Mayers Memorial Hospital District

ATTEST:

\_\_\_\_\_  
Valerie L. Lakey  
Clerk of the Board of Supervisors

Date: June 22, 2016  
Time: 1:00 P.M.  
Location: Mayers Memorial Hospital  
Burney, California

*(These minutes are not intended to be a verbatim transcription of the proceedings and discussions associated with the business of the board's agenda; rather, what follows is a summary of the order of business and general nature of testimony, deliberations and action taken.)*

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

Abe Hathaway, President  
Mike Kerns, Vice President  
Beatriz Vasquez, Secretary  
Art Whitney

**Board Members Absent:**  
Allen Albaugh, Treasurer

**Staff Present:** Louis Ward, CEO; Valerie Lakey; Travis Lakey, CFO; Sherry Wilson, CNO; Keith Earnest, CCO; Ryan Harris, Jack Hathaway, Irma O'Brien

**2. CALL FOR REQUEST FROM AUDIENCE TO SPEAK TO ISSUES OR AGENDA ITEMS:**

None

**3.**

**3.1 Resolution 2016-06** May Employee of the Month *(Approved)* Kerns- Whitney

**4. APPROVAL OF MINUTES –** A motion/second and carried, the Board of Directors accepted the minutes of the May 25, 2016 Regular Board Meeting.

*(Kerns, Whitney) – Approved All*

**5. OPERATIONS REPORT:**

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

- ▶ **Louis Ward, CEO** – No written report, Ward presented a verbal Report.
  - Capital Campaign committee met. They are currently working on securing cabinet members and looking for some new faces. We lost some of the initial members, but there are some new faces. July 18<sup>th</sup> will be the cabinet meeting kickoff. We are working on brochures and campaign material. There was a piece of land donated in which we are determining the gift policy.
  - Partnership has offered MMHD a pilot program for RN recruitment and retention. (see Finance notes) We have received funds for OB training. We have one OB employee being trained down at Enloe in Chico.

Introduced Jack Hathaway – Director of Quality; Ryan Harris – Director of Operations  
Each gave a little background. Both are graduates of local high schools.

Ward recognized Val Lakey for being selected to speak at the California Disaster Conference in September.

USDA will be coming to present a certificate for the loan approval. It will be scheduled sometime in August.

Interviews will be July 15<sup>th</sup> for RFQ's. Will be meeting with contractor (Layton) tomorrow.

- ▶ **Keith Earnest, CCO** – Additions to notes – Traveling PT has last day tomorrow. Imaging is using registry.

▶ **Travis Lakey – CFO** EHR/Medi-cal audit is this week. Cash on hand days are up.

▶ **Sherry Wilson, CNO** – We had the CDPH re-visit and we are cleared. We received the waiver for the CNA clinical part of the class. We had a state and a federal fine. Staff traveled to Valley West Medical Center, a facility a lot like ours. A lot of great information came back. Staff will be visiting again. We will be implementing the Falling Star Program for SNF and Acute. Shelley Lee and Dawn Johnson attended a conference. New program - Music and Memory. Encouraged board members to look it up and view it online.

## 6. BOARD COMMITTEES:

### 6.1 Finance Committee – Vice Chair Art Whitney

**6.1.1 Committee Meeting** – Best cash on hand we have had. Finances are going in the right direction

**6.1.2 May 2016 Financials – (Whitney, Kerns) – Approved All**

**6.1.3 Adoption of the MMHD Operating Budget FY2017 and Resolution 2016-7 (Whitney/Kerns) – Approved All**

### 6.2 Strategic Planning Committee –Chair Abe Hathaway

**6.2.1 Committee meeting** – A lot of building review. Reviewed the scheduled for meetings and interviews. July 15<sup>th</sup> – we will review RFP's. Tyler Porter will attend that meeting. Two community members Mike Pasternak, Frank Germano.

**6.2.2 Strategic Plan – Final Reading (Kerns, Vasquez) Approved All**

### 6.3 Quality Committee – Chair Mike Kerns

**6.3.1 Committee Meeting Report** – No meeting

## 7. INFORMATION/BOARD EDUCATION/ANNOUNCEMENTS

### BOARD COMMENTS, UPCOMING EVENTS, ETC. –

- Legislative Update – Val Lakey gave a legislative report.
- California Special Districts – Little Hoover Committee will be meeting
- Transparency Program information is on the website, working on completing for ACHD

## 9.1 Announcement of Closed Session -1:50 p.m.

**9.1 Government code section §54957 personnel: CEO Contract**

1:50 p.m. adjourned to closed session

**10. ADJOURNMENT:** There being no further business, at the hour of 2:30 p.m., President Hathaway declared the meeting adjourned. Next meeting July 20, 2016 – Fall River Mills



Mayers Memorial Hospital

## Operations Report June 2016

Statistics	June YTD FY16 (current)	June YTD FY15 (prior)	June Budget YTD FY16
Surgeries (including C-sections)	101	121	141
> Inpatient	38	37	16
> Outpatient	63	84	125
Procedures (surgery suite)	210	212	211
Inpatient	2182	2126	2142
Emergency Room	4085	3995	3960
Skilled Nursing Days	27444	26548	2668
OP Visits (OP/Lab/X-ray)	16675	15592	16710
Hospice Patient Days	1792	1357	1029
PT	11006	13181	
Ambulance Runs	473	403	400

### Operations District-Wide

Prepared by: Louis Ward, MHA, Chief Executive Officer

#### **Building Project**

We are right on schedule with the Hospital Expansion project. This month we published and distributed a Request for Proposals (RFP) to the Design Build teams that initially submitted packages to our Request for Qualifications (RFQ). We received back submissions to our RFP which were reviewed by our newly formed building committee composed of 3 hospital staff, 2 District Board Members, 2 community members, and our Project Manager from Porter Consulting. Upon reviewing the RFPs, we then invited three Design Build Teams (Layton Construction, Modern Builders, and Clark Sullivan) to participate in an interview here at the hospital on July 15<sup>th</sup>. While interviewing the teams we were also scoring their responses per the USDA requirements. Travis and I visited a completed ED expansion project in Healdsburg, CA which was built by Clark Sullivan. By the time of the July BOD meeting we will have also visited a project built by Layton Construction. We will report at the meeting our observations.

#### **Obstetrics**

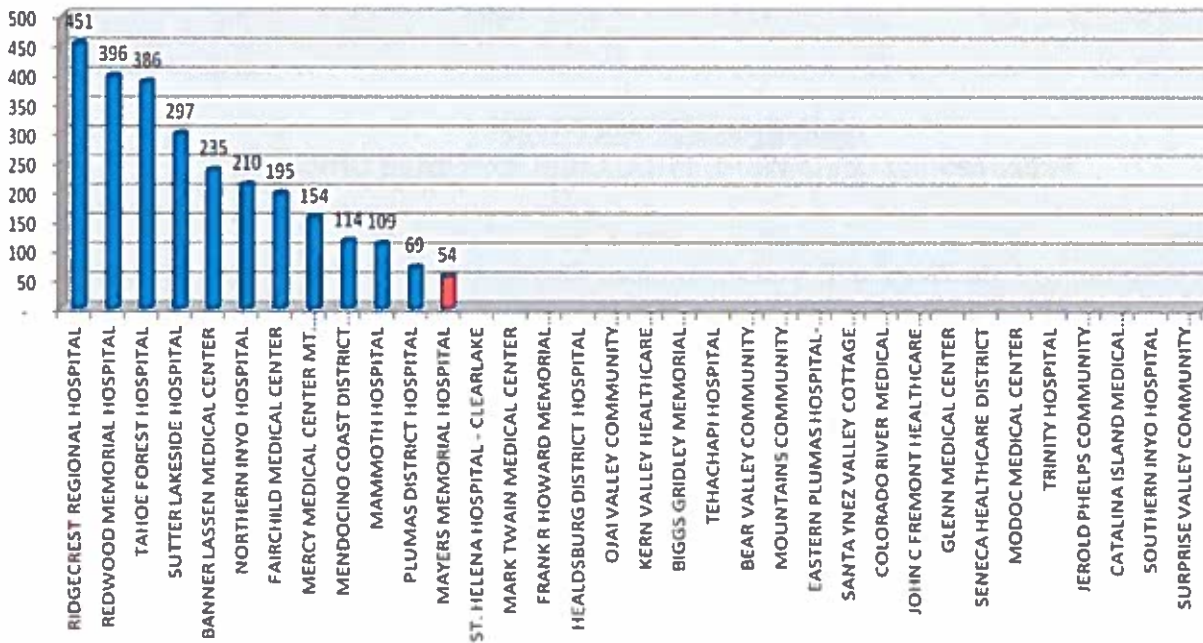
It is with great sadness and a heavy heart that I must recommend to the Board of Directors we discontinue providing obstetrical services at Mayers Memorial Hospital District. I seek the direction of the BOD on this matter. This decision has not been made lightly or hastily. The main reason for this decision is a continued decrease in newborn deliveries at Mayers over the past 5 years. This decrease has made it increasingly difficult to recruit OB trained Nurses to the area as well as continue to ensure MMHD is providing the highest level of care to expecting Mothers and Fathers. For the 3<sup>rd</sup> year in a row MMHD has been the lowest birth rate hospital in California. Please see below for visuals to better understand the trend we are seeing with regards to volumes. I will go into more detail at the July BOD meeting.



## Newborn Deliveries 2006 THRU 2015



## 2015 Total Live Births CA CAH Hospitals



### Emergency Medical Services

This month we were approached by the Sierra Medical Services Alliance (SEMSA). SEMSA is a private not-for-profit (501(c)3, Nevada based corporation. SEMSA's focus is on rural and small to reimbursement environment to provide the best services possible for the dollars available. They would like to work with us an integrated approach to out-of-hospital patient care by providing ground, air, and critical care transportation to our service district.

The overarching goal is to provide an organization that best meets the communities and hospital's needs for timely, appropriate and quality ground and air ambulance transportation services. By forming a collation of area hospitals, EMS services (air, ground, and Critical Care) under a simple model managed and financed through SEMSA and its air partner Air Methods the coalition's goals would be to:



- Purchase and move an Air Ambulance (helicopter) to Adin, at 15 minute response time to our ER. Our current Air response is roughly an hour out of Redding.
- Improve EMS responses and patient transports to tertiary care facilities through the addition of a Critical Care Helicopter centrally located in the Adin area, half-way between Mayers and Modoc hospitals for scene and inter-facility responses. In addition, adding a ground critical care transport ambulance so that when the helicopter cannot fly, the crew can still perform the transport by ground. Finally, the possibility of a shared BLS transport service throughout the region.
- Improve EMS and hospital resources through a unified ground and air ambulance management program overseen by SEMSA.
- Improve recruitment, retention, and scheduling of EMS and hospital staff through a unified coalition recruiting personnel and offering career opportunities, scheduling and transportation-to-work possibilities not currently available to the parties individually.
- Improve care and coordination through a unified approach of data collection, CQI, education activities and Medical Direction that promote team-work and approaches from a regional perspective and assisting in individual education needs or offerings.
- Stabilize and enhance funding for the operation of EMS services regionally through leveraging all available dollars from air and ground transport into the regional services along with veteran/experienced ambulance billing and collection services not otherwise available.
- Remove a major expense (EMS) from the hospital's book of business to improve the financial bottom-line.
- Minimize patient's out-of-pocket expenses through a combined air and ground ambulance membership program.
- Maintain and improve the participating hospital's public relations program by taking a regional and integrated approach to the vital EMS service while still maintaining branding and oversight of the service.
- Maintain, improve, and standardize the type and quality of medical equipment, vehicles, supplies etc., both through bulk not-for-profit purchasing which the hospitals could also take advantage of if desired.
- Having the back-up capabilities of the Lassen County EMS ground and air ambulance service that SEMSA already provides.
- Enhance timely critical transport of patients by air or ground resources depending upon a variety of factors to best meet the patients and communities needs by having multiple resources managed by one entity. This approach plays very well with CMS and HHS in delivering the right care, at the right time and the right price. By pooling resources, hospitals and patients now make one call to get the right resource at the right time and the right price based on their individual needs which are determined by the attending physician.
- Work with local educational institutions to promote and foster EMT, paramedic, and nursing education and assist in providing in didactic and clinical experiences.
- Work with local first responders to equip and better coordinate scene responses, training, protocols and care.
- Work with hospitals to review and improve helipad and related facilities at each of their locations.
- Work with hospitals to provide a regional/coordinated approach to disasters and mass-casualty situations.

## **Plant Operations**

This month Ryan Harris, DOO joined our Team and has already made a great impact. He and his maintenance team scheduled an entire clean out of the metal shed in the Fall River parking lot. All Managers were made aware of the date the cleanout was to happen, what process would be taken, and asked to schedule time to walk through the shed ensuring all items to be kept would be marked appropriately. The clean out was a great success as we have a great deal more room in the shed. Plans have already been put in place on how we are going to organize the shed to ensure to continue to be free from clutter. We finished our Burney SNF nurse station remodel this month. The station really looks great, the staff is very happy with the end result. Thanks to the maintenance team and Ryan for all of their work on these projects.

## **Survey Season**

Everyone is doing the part with regards to being Survey ready. We have connect Jack (DOQ) with the Mock Survey team in an effort for him to better understand their findings as well as how we can work with them more frequently while we implement new programs such as a Fall Prevention program, continued education for the staff, and mini mock surveys. Ryan has been working with the Maintenance Team to establish a schedule in an effort to ensure all Fire Drills, Facility Checklists, and projects are accounted for and scheduled. Pam has really done a great job championing our Policy revisions and completion project. We have cut our working policy list by 60% in the last few months all thanks to Pam and the management team putting in a great effort. This is not a fully comprehensive list of all that is occurring with the impending survey season upon us. EVS, Nursing Admin (SNF & Acute), Admin, Pharmacy, and Ancillary Departments are all working hard to ensure we are in compliance with all new regulations. Very proud of the entire TEAM as this is truly a TEAM effort.

## **Mayers Family BBQ**

We are looking forward to our first annual Staff and Family BBQ this summer (August 7<sup>th</sup>). We have secured the Fall River Lyons Park for the event. We will provide food, drinks, games, prizes, music, and fun. We hope to see you all and your families at the event. Thanks to the TEAM MAYERS committee for making this idea come to reality.

Respectfully Submitted by,  
Louis Ward, MHA  
Chief Executive Officer

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### **Chief Clinical Officer Report**

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

### ***July 2016 Board Report Clinical Division***

#### ***Respiratory Therapy***

- Pulmonary rehab program is going strong with two new patients. Three patients have graduated! Five patients are active currently.
- Respiratory students from Oregon Institute of Technology in Klamath Falls will start clinical experience at Mayers during their winter term.
- Referrals for pulmonary function testing have been consistently between 10 and 20 each month.

#### ***Laboratory***

- The one on one communication with MVHC concerning diagnosis codes is going well. Chris Hall reports that the number of invalid or missing diagnosis codes has dropped significantly by catching them early.

- Colene Hickman reports that by the end of July Mayers will be going live with the new client billing system inside of Paragon®. This will stream line the billing for labs ordered by Veterinarian Offices, drug screens and products sold to outside ambulance companies.

### ***Pharmacy***

- A consumer level recall of liquid docusate products was issued by the CDC and FDA on July 7<sup>th</sup> due to a multistate outbreak of *Burkholderia cepacia* contaminated products. Only one skilled nursing patient was on this product and a substitution was found. All liquid docusate products have been sequestered from patient use.
- Mayers OB/ER department received an award from Mayers IHF for a syringe pump. The replacement pump has arrived so the process of writing policy and compenancies has resumed.
- Pharmacy inventory for FY16 was completed on time. There are 1030 different products in the pharmacy with a purchase value of \$152,843. Almost \$70,000 of inventory is refrigerated items.
- Progress continues to be made to increase barcode rates. A Pharmacy Technician reviews the barcode overrides daily. We've been able to use this data to find flaws in the Paragon build and correct them. Paragon provided Mayers with a troubleshooting guide which has been helpful in finding some of the causes of barcodes not working.
- Solu-Medrol® a highly used injectable steroid has been on backorder for many months and we have just received a shipment. Our physicians have been using other agents to get through the shortage.

### ***Physical Therapy***

- A new hire Physical Therapist will be starting the beginning of September. He will be relocating from Alabama and is getting his California license.
- Daryl Marzan, PT manager, reports that accepting the paper records from the now defunct IMPT has gone well. Receiving the electronic records is still pending.
- With equipment for IMPT and equipment from storage we are well on our way to having the equipment we need to expand services to Burney once the building is ready.

### ***Imaging***

- A candidate for Imaging manager will have an onsite interview on July 18<sup>th</sup>. We are on target to have the imaging department fully staffed without registry by September 1<sup>st</sup>.

### **Skilled Nursing Facility – Burney & FRM** ***Submitted By: Sherry Wilson, RN, CNO***

- Census is at 80
- Registry usage has been up this month due to staff vacations , one nurse out on maternity leave and the shortage of CNA staff
- We have 5 students ready to start the CNA class through Shasta College in August
- Unfortunately our trip to Valley West Medical Center had to be canceled , we are rescheduling for a later date

**Critical Access Hospital**  
**Prepared by: Sherry Wilson CNO/Acute**

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***Surgery***

The beginning of this month we had Autoclave and Steris issues. The Autoclave control board completely stopped working, thankfully we had just been approved for the Grant \$\$ for this said board and was able to exchange boards without any ill effect on surgeries. The Steris also had complications and this was also fixed, however we were unable to do an Emergency Lap Chole and Pt chose to go down the hill to have this done. Both sterilizing machines have worked great since repaired.

We also purchased with Grant Money from Shasta Regional Community Foundation (besides autoclave control board), a Steam Sterilizer for Central Sterile, and 2 MEDEX Medfusion Pumps that will be used by our CRNA staff. All items have been received at this time.

We are in need of purchasing a Baby Warmer/Resuscitation Table for the OR, as the one we currently have does not have a working warmer unit. I have received permission from Theresa Overton RN, CNO to start the purchase process. I have enlisted the help of Holly Green RN, OB Manger in the choosing process to ensure that we get a Unit that meets all of the current NRP Guidelines. The approximate cost of the unit we are looking at is \$19,000-21,000. I received an email from Marlene McArthur in regards to the possibility of obtaining some additional monies to aide in the purchase of this unit, I will be getting her the requested paperwork.

The housekeeping position is still not filled and this has required extra hours by the current Scrub Tech and RN staff to pitch in and work together to get the cleaning done. I spoke with Libby in HR and we will be conducting interviews towards the end of next week and hopefully fill this position and start the training process.

As we finish up this fiscal year we budgeted for 211 Procedures for 2016, actual Procedures performed were 210, and actual Procedures performed in 2015 were 212. Budgeted surgeries for 2016 were 141, actual performed surgeries were 101, and actual surgeries performed in 2015 were 121. Starting off the 2017 FY, Dr. Syverson will be on vacation from 07-06 thru 07-12 and will return as scheduled on the 13<sup>th</sup>.

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## Mayers Memorial Hospital District

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Interim  
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### North State Nurse Recruitment and Retention Plan Proposed Pilot Program at Mayers Memorial Hospital District

#### Background:

Mayers Memorial Hospital District (MMHD) currently recruits new graduates from Nurse Programs throughout Northern California in an effort to employ, train, and retain good clinical talent in our district. MMHD is able to offer incentives to new graduates that other regional hospitals and clinics are unable to as we are designated as a Medically Underserved Physician Shortage Area, a designation that enables MMHD nurses eligible for loan repayment options. Loan repayment options provided by Health Resources Services Administration (HRSA) can be as much as 75% or more of eligible loans for a three (3) year commitment. We have had success with many candidates but feel strongly that with the collaboration of Partnership Health Plan, other local hospitals, and clinics within our region the area could become an even more attractive option for new graduates.

#### Objective:

Recruit, professionally develop, and regionally retain new nurse graduates by collaboratively working with Partnership Health Plan, regional hospitals, and clinics. MMHD will initially recruit and employ talented candidates in our effort to professionally develop said candidate. MMHD will gain at least a 2 year commitment from candidate as well as assist with all loan repayment HRSA documentation. MMHD will evaluate candidates skill set at the completion of one (1) year of employment within the district's Med/Surg or Skilled Nursing Facility. Upon completion of a successful evaluation process MMHD and Nurse will commit to a training program in one of the following specialties.

1. Obstetrics
2. Emergency Services (Certified Emergency Department Nurse)
3. O.R Circulator
4. Hospital Based Outpatient Services
5. Geriatrics

On the job training as well as outside training opportunities will be provided.

#### Goals:

Development of recruitment and regional retention plan encompassing an initial commitment between Partnership Health Plan and MMHD to collaboratively work on marketing materials targeting new nurse graduates. Marketing materials would be used in multiple fashions but would include direct mailing to accredited nursing programs, in person site visits by MMHD staff at career fairs, and online marketing efforts. We intend to partner with reputable nurse programs throughout the north state as part of our recruitment efforts.

At the completion of initial 2-3 year commitment MMHD will work with regional hospitals and clinic recruitment personnel to place professionally developed nurses with an interest in seeking employment opportunities elsewhere within the respective locations.

#### Costs

- Marketing Materials - \$5,000 Annually
- Recruitment Allowance -\$2500 per nurse
- Educational Allowance -\$3500 per nurse

**Letter of Agreement**  
**Between**  
**Partnership HealthPlan of California and Mayers Memorial Hospital District**

**Recitals**

Whereas, on June 22, 2016 the Partnership HealthPlan of California (PHC) governing board approved a grant of \$25,000 to Mayers Memorial Hospital District to establish nurse training pilot program; and

Whereas, the funding for the proposal was based on the workforce needs of the rural area, including those of hospitals that have difficulty in bringing in new nurse graduates; and

Whereas, Mayers Memorial Hospital has proposed a training program that will allow participants to specialize in emergency services, operating room, hospital based outpatient or geriatric services; and

Whereas, the participations will need to commit at least two years to the program and will receive assistance in loan repayments eligible to those working in medically underserved areas; and

Whereas, these one-time monies will be used for the development of marketing materials and related outreach expenses, as well as a recruitment and educational stipend for the participants; now therefore, be it

Resolved that Mayers Memorial Hospital District will provide PHC with the documentation of enactment of the proposed services described in Attachment A at the completion of the project, within a year of this grant; and be it

Further Resolved that formalization of this Letter of Agreement shall be sufficient for PHC to issue the funds detailed above.

Signed:

Partnership HealthPlan If California

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Mayers Memorial Hospital District



Louis Ward, CEO

07/20/2016



Department Health Care Services  
Primary, Rural, and Indian Health Care Division

Small Rural Hospital Improvement Program  
Authorization to Bind

The Authorization to Bind permits the designee(s) listed below to negotiate and sign the Small Rural Hospital Improvement Program Application and/or Grant Agreement for any *payment requests that may result*.

The Board of Directors of **Mayers Memorial Hospital District**, in a duly executed meeting and held on **July 27, 2016** where a quorum was present, resolved to authorize:

<b>Louis Ward</b> (Typed Name)	And/or designee	<b>Travis Lakey</b> (Typed Name)
<b>Chief Executive Officer</b> (Title)		<b>Chief Financial Officer</b> (Title)
 (Signature)		 (Signature)

The undersigned hereby affirms he/she is a duly authorized officer of the corporation and statements contained in this application package are true and complete to the best of the his/her knowledge, and accepts as a condition of a grant award the obligation to comply with the applicable state and federal requirements, policies, standards, and regulations. The undersigned recognizes this is a public document and open for public inspection.

Authority to contract:

If someone other than the corporate board of director's chairperson is to negotiate and sign any resultant grant of this application, a letter of agreement and authorization must be signed and dated by the board of director's chairperson, indicating the name of such person and stating that person's area of responsibility in this matter.

Board Chairperson: **Abe Hathaway**  
(Typed Name)

(Chairperson's Signature)

**7/27/16**  
(Date)

Board Chairperson  
Mailing Address: **43563 Hwy 299 E**  
City: **Fall River Mills**  
Zip Code: **96028**

Please mail one original copy to Department of Health Care Services, Primary, Rural, and Indian Health Division, 1500 Capitol Avenue, Suite 72-338, MS 8502, Sacramento, CA 95899-7413 and [e-mail](#) or fax a duplicate copy - (916) 449-5777.

**Reset Form**

**Print Form**



## **COMMITTEE MEETING MINUTES**

- Quality
- Strategic Planning
- Finance

### **PDF ATTACHMENTS:**

- Emergency Operation Plan (EOP) plus extra work in progress
- Policies & Procedures for Approval

MAYERS MEMORIAL HOSPITAL DISTRICT

BOARD FINANCE COMMITTEE MEETING  
MINUTES – JUNE 22, 2016 9:00 A.M.

BFC Attendance:

Art Whitney  
Beatriz Vasquez  
Louis Ward, CEO  
Travis Lakey, CFO

**DRAFT  
Attachment A**

Valerie Lakey, Clerk of the Board

Other:

Daryl Marzan  
Dawn Johnson  
Adam Dendauw

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SUBJECT	DISCUSSION	
CALL TO ORDER	The meeting was called to order by Albaugh at 9:05 AM in Fall River Mills.	
Requests from Audience to Speak	None	
Minutes	The minutes from the BFC meeting held 05.25.16 were approved. <i>(Whitney, Vasquez)</i>	<b>Approved</b>
Department Presentation	<p><b>Dawn Johnson, Staff Development:</b> (see notes) Johnson was presented some questions about the CNA and LVN programs. There will be a CNA class beginning in August. This will reduce cost by reducing registry.</p> <p><b>Daryl Marzan, Physical Therapy:</b> Power point (see attached) Personnel has been an issue with the income/expense of the department. Cost of travelers has impacted budget. Revenue in Acute, Swing, SNF does not reflect on PT man hour revenue.</p> <p>PT spends 2-3 hours per week for fall assessments – which we are not paid for. Need to document time which could help in cost recoup eventually.</p> <p>Hopefully will have 3 permanent employees by the end of the year.</p> <p><b>Adam Dendauw, Cardiac Rehab:</b> Not a large revenue builder, the department hopes to utilize and help with PRIME project. They now have a contract with Partnership for cardiac rehab services. Dr. Dahle is getting certified for Cardiac Stress test program. This should be a good revenue generating service. The department received an \$11,500 grant to replace equipment from Sierra Health Foundation. Cardiac Maintenance numbers are up. Many referrals have come over after PT treatment is over.</p>	

MAYERS MEMORIAL HOSPITAL DISTRICT

BOARD FINANCE COMMITTEE MEETING  
MINUTES – JUNE 22, 2016 9:00 A.M.

Financials	<p>Approval of May Financials, A/R, A/P (<i>Whitney/Vasquez</i>) <i>Comments as follows:</i></p> <ul style="list-style-type: none"> <li>• Cash on hand days look good</li> <li>• OSHPD (prior and current projects) payable will be tagged separately, but depreciated together. We will begin payments after USDA funding. Made a “good faith” payment</li> <li>• 51 A/R Days</li> <li>• Credit balance is now \$200,000</li> </ul>	Approved
Budget	<i>(Vasquez/Whitney)</i> – Approved to recommend the FY2017 budget to the full board for approval	Approved
Administrative Report	<ul style="list-style-type: none"> <li>• Update on Capital Campaign Cabinet. Kickoff meeting in July. There are new members.</li> <li>• July 16 – there will be a visit to Healdsburg to look at a building that was constructed by one of the RFQ (Clark/Sullivan) applicants. Planning to look at the others. Layton will be here tomorrow for an on-site</li> <li>• Recent campaign gifts that bring us to \$1 million. A donation of a piece of land was recently made.</li> <li>• Audit was presented (on file in administration)</li> <li>• Recruiting and retaining nurses – Ward submitted a pilot program to Partnership which looks like it will be funded. We will also try to work with other facilities to find out about training programs.</li> <li>• Housing is an issue for travelers, new employees, etc.</li> </ul>	
Adjournment	Meeting was adjourned at 9:25 am	

By: Valerie Lakey

**MAYERS MEMORIAL HOSPITAL DISTRICT  
QUALITY COMMITTEE MEETING  
MINUTES – MAY 11, 2016**

<b>DRAFT Attachment A</b>
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QC Attendance

Mike Kerns, Board Chair  
Louis Ward  
Sherry Wilson  
Theresa Overton

Other Staff Present

Adam Dendauw  
Dawn Johnson  
Mary Ranquist  
Libby Mee  
Daryl Marzan  
Justin Sears

Absent

Beatriz Vasquez, PhD, Committee  
Laura Dolman-Beyer, Community  
BJ Burks  
Holly Green  
Shelley Lee

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SUBJECT	DISCUSSION	
CALL TO ORDER	The meeting was called to order at 12:00pm by Kerns in Fall River Mills	
Public Request to Speak	None	
Opening Remarks by Chairman Kerns	None	
Minutes	Minutes from the May 11, 2016 quality committee meeting were approved. <b>M/S/C (Ward, Wilson)</b> . All Approved	<b>Approved</b>
Department Reports	<p><b>Hospice:</b> A few years ago during 1<sup>st</sup> state survey for hospice, found mistake in admit packet (incorrect address); were fixing little things at a time; last year decided to go through packet and change everything; did not have a new copy (book) from printers yet, will present when it is available; have streamlined into one book (used ideas from other hospices, will have table of contents, all forms/consents); provided table of contents as example.</p> <p><b>OB:</b> No report.</p> <p><b>PT:</b> no injuries, working on updating facility (painting inside); still working on wait time (37 evals waiting, August 24 earliest date); new PT starting in Sept and one in Jan; updating local facilities every 2 weeks, informing of wait times; purchased back door last year but hasn't been installed yet, will be having an outside company install; after state survey, purchased lockbox for medication; sending birthday and thank you notes to residents/patients; received new step (leg and arm machine) from IHF grant and 2 weeks until leg/arm bike combo machine arrives; as Burney facility is updated (Right Roads), will have enough staff and equipment to cover; conservator of records for intermountain PT; will be 2 times per month in Burney and focus on falls.</p>	<b>Reports</b>



**MAYERS MEMORIAL HOSPITAL DISTRICT  
QUALITY COMMITTEE MEETING  
MINUTES – MAY 11, 2016**

	<p><b>Activities:</b> Provided handout.</p> <p><b>Business Office:</b> Patient refund issue, sent copies of checks to incorrect patients, have contacted patients, getting some back; offered to pay for cost of opening new bank account; patient payments \$1.4 mil ahead of last year (2011 \$16 mil, \$20.8 mil in 2016); 2016 is 56 days in AR, 2014 was 90; 2016 57% of revenue collected, 2015 was 56%, may bump up goal of 2017 to 59%; Business Office in best shape in past 10 years; in house billing more economical than outsourcing.</p> <p><b>Respiratory:</b> PowerPoint presentation; PFT testing environment and procedure has improved; used to take 1.5-2 hours, now is 45 minutes, getting results in 3 tests, instead of 8 in the past; test results much easier to read; better patient interaction (focus on patient, not machine now); pulmonary rehab (18 week program, 2, 1-hour appointments per week); quality of life improvement for patients (showed example of one particular patient that improved 300%); plan on offering rehab in Burney at Right Roads when open; 6 patients in program, 4 have recently graduated.</p> <p><b>Staff Development:</b> On track with all mandatory trainings, staff keeping up with it for licenses; looking for more exciting ways to present same info each year (utilizing TV and PowerPoint, will be able to mirror presentation to Burney board room); outside trainings are valuable for all staff; providing wider variety brings in more participation (rotate non-mandatory trainings yearly); assisting with yearly/quarterly competencies, acute policies.</p>	
<p>Quarterly Reports</p>	<p><b>Worker's Comp:</b> Provided handout; 4 first aid injuries; only 3 days lost from work (lower back x2, right shoulder not pt related, hand injury); received notice from ALPHA about employee that has been off work, will not be able to return; violence in the workplace conference, continued education will help continue good stats.</p> <p><b>CMS Core Measures:</b> Jack working/learning on how to collect them; goal is to have everything in current and do it monthly; will work on quality scorecard.</p> <p><b>Compliance:</b> Purchased updated 2016 compliance binders; charge master increase, did differently than in past years, looked at each item instead of overall increase; more info next quarter; didn't increase lab; hard to decrease services; how to make quality and compliance info easy to understand and find for community.</p>	<p>Reports</p>

**MAYERS MEMORIAL HOSPITAL DISTRICT  
QUALITY COMMITTEE MEETING  
MINUTES – MAY 11, 2016**

<p><b>Standing Reports</b></p>	<p>SNF – Will implement Falling Star program soon (golden star on wall next to fall risk patients, any staff that see a patient with a star up they need to go into room and press call light; will be training all staff); one fall with injury, reportable; verbal abuse by staff to resident; starting 26<sup>th</sup> separate Quality meeting for just LTC, Dr. Watson, Jack in Quality, Infection Control, board member (3<sup>rd</sup> Tuesday), will discuss falls; visit to Valley West LTC on 21<sup>st</sup>; census is above 77; hired new ward clerk for Station 2, offered charge nurse to Jennie Robb, have been short so this will help; survey due anytime, still working with mock survey people; will start reporting non-employee complaints;</p> <p><b>Admin:</b> Building project update, have 3 RFPs, recommendation to board on 27<sup>th</sup>; will look at Marysville, Healdsburg and one other place (possible Hanford) next week; Thursday at 4pm committee to meet to talk about RFPs, interviews on Friday starting at 8am; capital campaign cabinet meeting on Monday; CCAHN and Medi-Cal management task force meeting on Tuesday; quality transition Holly to Jack has been smooth (changing users, email, etc. is time consuming but working); Ryan in Operations working well on projects so far (shed cleanout).</p> <p><b>Outpatient Surgery:</b> Provided handout; OR infant warmer is broken, not in compliance, needed in OR, grant request has been turned in, need to find grant; approx \$20k; no other quality issues in surgery.</p> <p><b>Infection Control:</b> 257 pt days with no reported infections</p> <p><b>Other:</b> PRIME projects were approved (Million Hearts and antimicrobial stewardship); will run sample reports to make sure we can get what we need (will report to quality to make sure we are on schedule, <b>add recurring report to Quality agenda</b>); will do semi-annual public meetings; Adam and Shelley will report to Jack, who will report to Quality.</p>	<p><b>Reports</b></p>
<p><b>Policies and Procedures</b></p>	<p><b>(Hathaway, Wilson) – Approved All</b></p>	<p><b>Action</b></p>
<p><b>Closed Session</b></p>	<p><b>No actions taken</b></p>	
<p><b>Announcements;</b></p>	<p>Next meeting: Wednesday, August 10, 2016 in Fall River Mills</p>	
<p><b>Adjournment</b></p>	<p>Meeting adjourned 2:03pm</p>	

Minutes By: Jessica Stadem

**MAYERS MEMORIAL HOSPITAL  
STRATEGIC PLANNING COMMITTEE MEETING  
MINUTES – JULY 11, 2016 – FALL RIVER MILLS**

**BSPC Attendance:** **Staff Present:**  
 Abe Hathaway      Travis Lakey  
 Mike Kerns         Justin Sears  
 Louis Ward  
 Other:

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<b>SUBJECT</b>	<b>DISCUSSION</b>	
<b>CALL TO ORDER</b>	The meeting was called to order by Hathaway at 1106 am in Fall River Mills	
<b>Requests Audience to Speak</b>	None	
<b>Minutes</b>	June 13, 2016 Strategic Planning Committee meeting minutes. <i>Approved (Hathaway, Ward) (no objections)</i>	<b>Approved</b>
<b>Management Goals/Scorecard</b>	<ul style="list-style-type: none"> <li>Presented list of goals, explained purpose of goals and scorecard (initially a pilot program, ended at FY, will renew with new FY); need to find new goals for those completed, will roll over some goals; Operations will spend next few meetings discussing new goals; showed specific management meeting tracking (asking managers to turn in short agenda on what was discussed with their staff) and 1-8 scorecard goal information (managers are held accountable to due dates); will need to rework some of the instructions (eg. departments of one need to attend a meeting with another department); will report next month to SP what exactly was met, money saved, details/specifics of goals, will use summary to show full board.</li> </ul>	<b>Update</b>
<b>Building Report</b>	<ul style="list-style-type: none"> <li>Talked with Tyler, RFPs delivered to Porter, should be here by tomorrow; will review and get out to building committee as soon as possible; committee will meet Thursday at 4pm and interviews Friday at 8am (Layton, Clark, Modern) – need to formulate questions beforehand (eg. how much labor do they expect to hire locally? Where does project manager plan to stay?) (invited USDA but aren't allowed to be a part of selection process); working on setting up site visits week of 18<sup>th</sup> (Marysville, Healdsburg); <b>need to have discussion/action item for regular board meeting.</b></li> </ul>	<b>Update</b>
<b>Administrative Report</b>	<ul style="list-style-type: none"> <li>EMS: Met with SEMSA (based out of Susanville) about air and ground transport agreements; talked with Plumas county about their experience with similar company; watched partial video of ambulance service in Merced County (also operated by SEMSA), another rural California area; the dispatch center to be placed in Susanville will probably be more important than a air ambulance, will receive pre-hospital care (stay on phone until ambulance arrives, currently talk to Cal Fire dispatch); Adin is</li> </ul>	<b>Update</b>

**MAYERS MEMORIAL HOSPITAL  
STRATEGIC PLANNING COMMITTEE MEETING  
MINUTES – JULY 11, 2016 – FALL RIVER MILLS**

	<p>the central location for an air ambulance (ground in Burney, Fall River, Big Valley and Modoc); when on scene of a call, need to “helicopter shop” to see who is closest and available, air ambulance in Adin would cut down response time; contract with SEMSA to manage emergency services, district’s EMTs and paramedics would be employed by SEMSA but staffed in our ER; Gonzo attended meeting and was excited about the plan (concern with SEMSA employment requirements, SEMSA will train); #1 concern is making sure staff who have been with district for many years feel taken care of with new agreement (pay, benefits, etc); community would benefit from ground and air ambulance package; current ambulance/fire district vehicles would keep signage (add small “operated by SEMSA”); Mayers and Modoc need sign preferred provider agreement in order for full plan to work; will use old Adin elementary as dorm for staff; will save district money; will contact Modoc medical center; funding is secured for air ambulance; bring to regular board agenda, agreement by board to allow continued negotiations and discussions about air and ground ambulance, will invite Mike Williams or another supervisor to meeting;</p> <ul style="list-style-type: none"> <li>• OB services: After much thought, might need to close OB services due to operational and safety concerns, equipment is needed asap, too many staffing issues (no coverage); still want to train nurses on ER OB to cover the emergencies; bring to board, invite Dr. Watson, in closed session;</li> </ul>	
<p><b>Board Education Legislation, Advocacy, CEO Report</b></p>	<ul style="list-style-type: none"> <li>• No discussion</li> </ul>	<p><b>Report/ Discussion</b></p>
<p><b>Adjournment</b></p>	<p>Meeting was adjourned at 1252 pm</p>	

By: Jessica Stadem