MAYERS MEMORIAL HOSPITAL DISTRICT QUALITY COMMITTEE MEETING MINUTES – JUNE 14, 2017

FINAL Attachment A

QC Attendance

Beatriz Vasquez, PhD, Board

Chair

Laura Dolman-Beyer, BOD

Committee
Theresa Overton
Louis Ward

Dr. Tom Watson

Other Staff Present

Valerie Lakey Barbara Spalding

BJ Burks

Dawn Jacobson Marinda May Absent

(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.)

SUBJECT	DISCUSSION	
CALL TO	The meeting was called to order at 12:04 pm by Vasquez in Fall River	
ORDER	Mills	
Public Request to	None	
Speak		
Opening	None – changes to agenda (Volunteer services instead of Physical	
Remarks by	Therapy)	
Chairman		
Vasquez		
Minutes	Minutes from the May 17, 2017 Quality Committee meeting were	Approved
	approved. M/S/C (Beyer, Ward). All Approved	
Department	Volunteer Services, Barb Spalding:. Last report Spalding talked about	Reports
Reports	changing policies which is now complete. Reviewed the volunteer	
	recognition process. They had a recognition event on March 24, 2017.	
	Department Grants were provided through Thrift Store funds. There is a	
	volunteer dietary training so volunteers can help with feeding residents.	
	There will be annual refresh training.	
	Surgery, Theresa Overton: (written report – from Stacie Warnock,	
	Surgery Lead) Reported on Quality issues and provided information on	
	surgical "Time Out". Addressed some of the items that were found on the	
	survey. Referral process is the number one issue at the time. Working on	
	solving some transportation issues for patients on Partnership.	
	Acute Social Services, Marinda May: Marinda started in March.	
	Learning the system on the Acute side. Revamping the process on the	
	Acute side for Swing Intakes. May has training in mental health (5150).	
	Some staff training would be beneficial. Ward and Dr. Watson will be	

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	meeting with Shasta County (Dean True) in July. Discussed 5150 options and potential solutions. Ward will be talking to Dean True about some tele psych. SNF Social Services, BJ Burks: Socials Services split in March with SS in Acute and SNF. This has allowed a lot more needed time. Burks has been working on learning about the Point Click Care. This has made ease of charting and quality of charting better and more timely. We are also using the system for the admission process. This is streamlining the intake process. We have been meeting as a committee to make the process more efficient. Everyone is learning each part of the process. All four Chiefs are involved in this process. Aiming at getting tings complete within a few months and will require constant monitoring.	
Quarterly Reports	Quality - no report Hathaway at FLEX Conference	Reports
Standing Reports	SNF – Sherry Wilson: Absent Administrative – Louis Ward: We have been trying to facilitate a meeting with CDPH. Last surveys went well as far as interactions with staffs. Mock surveys have helped. There is a good model in Orange County were CDPH coordinates meetings with healthcare facilities. Chico office has agreed to attend a meeting at Enloe in Chico on July 11. We have worked with CHA and Northern Hospital Council Meeting and were able to organize this meeting. Management staffing goals are in the development process for FY18. Plan of Corrections was completed and submitted. Fire Life Safety Plan of Corrections have been approved. We are still waiting to hear on the Acute Plan of Corrections. June 22 Ryan Harris, Ward and Travis Lakey will meet with OSHPD in Sacramento and with architect on the SNF refresh. They will also be meeting with sign company. Employee meetings will be July 12 and 13 ^{th.} One topic will be employee evaluations. Meeting with Dean True and Dr. Watson on July 6 th to discuss 5150's and the ER. Infection Control – Dawn Jacobson: We recently purchased carts provided through Foundation Grant. Phlebotomy Carts also house the	

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New Business	supplies. Supplies were in the rooms and there was a lot of waste – now the supplies are in the cart and it makes things more efficient and helps with infection control. The board would like to hear regularly on hand washing statistics. We will be reporting UTI's as required – we only need to report the ones that we treat. PRIME – Adam Dendauw –we have met our numbers within the timeframe Policies for Approval: (Beyer, Ward) – Approved All • Sterility Monitoring Log, End Product Testing MMH41 • History and Physical Responsibility on Patients Admitted thru the Emergency Dept Procedure for • Discontinued Medications and Controlled Substance Disposal: SNF • Initial Application Process to the Medical Staff	
Announcements, Other, Future Agenda Items	Compliance Plan Code of Conduct	Discussion
Closed Session	Chief of Staff Report – Dr. Tom Watson	
Announcements;	Next meeting: Wednesday, July 12, 2017 in Fall River Mills	
Adjournment	Meeting adjourned 1:12 pm	
Minutes By: Valerie	T -1	

Minutes By: Valerie Lakey