

Chief Executive Officer  
Louis Ward, MHA



**Mayers Memorial Hospital District**

**Board of Directors**  
Jeanne Utterback, President  
Beatriz Vasquez, PhD, Vice President  
Tom Guyn, MD, Secretary  
Abe Hathaway, Treasurer  
Tami Vestal-Humphry, Director

Board of Directors  
**Regular Meeting Agenda**  
April 28, 2021 at 10:30 am

**Due to COVID-19 shelter in place orders and under the authority of the Governor’s Executive Order N-29-20 and N-25-20, this meeting will be conducted entirely by teleconference. A physical location is set up for the Board Members, but due to social distance requirements, we ask that members of the public attend and provide public comment via teleconference at the following link and number:**

Zoom Meeting: [LINK](#)  
Zoom Call In Number: 1 669 900 9128, Meeting ID: 955 2799 5856

**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.

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 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 – March 31, 2021	<i>Attachment A</i>	<b>Action Item</b>	2 min.
	3.2 Emergency Meeting – April 1, 2021	<i>Attachment B</i>	<b>Action Item</b>	2 min.
	3.3 Special Meeting – April 14, 2021	<i>Attachment C</i>	<b>Action Item</b>	2 min.
<b>4</b>	<b>DEPARTMENT/QUARTERLY REPORTS/RECOGNITIONS:</b>			
	4.1 Resolution 2021-09 – March Employee of the Month	<i>Attachment D</i>	<b>Action Item</b>	2 min.
	4.2 Mayers Rural Health Clinic Update – Amanda Ponti, Manager	<i>Attachment E</i>	Report	2 min.
<b>5</b>	<b>BOARD COMMITTEES</b>			
	<b>5.1 Finance Committee</b>			
	5.1.1 Committee Meeting Report: Chair Hathaway		Report	5 min.
	5.1.2 March 2021 Financial Review, AP, AR and Acceptance of Financials		<b>Action Item</b>	5 min.
	5.1.3 Daycare Budget Increase: Recommendation from Finance Committee		<b>Action Item</b>	5 min.
	<b>5.2 Strategic Planning Committee</b>			

5.2.1	No April Committee Meeting – SP Session following Board Meeting at 1:00 pm			
5.3	<b>Quality Committee</b>			
5.3.1	April 14 <sup>th</sup> Meeting Report – DRAFT Minutes Attached	<b>Attachment F</b>	Report	5 min.
6	<b>NEW BUSINESS</b>			
6.1	Policy & Procedure Summary	<b>Attachment G</b>	<b>Action Item</b>	2 min.
6.2	Policy Manuals Requiring Signature	<b>Attachment H</b>	<b>Action Item</b>	2 min.
7	<b>ADMINISTRATIVE REPORTS</b>			
7.1	ED of Community Relations & Business Development – Val Lakey	<b>Attachment I</b>	Report	5 min.
7.2	Chief's Reports – <b><i>Written reports provided. Questions pertaining to written report and verbal report of any new items</i></b>	<b>Attachment J</b>	Reports	
7.2.1	Chief Financial Officer – Travis Lakey		Report	5 min.
7.2.2	Chief Clinical Officer – Keith Earnest		Report	5 min.
7.2.3	Chief Nursing Officer – Candy Vculek		Report	5 min.
7.2.4	Chief Operation Officer – Ryan Harris		Report	5 min.
7.2.5	Chief Executive Officer – Louis Ward		Report	5 min.
8	<b>OTHER INFORMATION/ANNOUNCEMENTS</b>			
8.1	Board Member Message: Points to highlight in message		Discussion	5 min.
9	<b>ANNOUNCEMENT OF CLOSED SESSION</b>			
9.1	<b>Pending Litigation Government Code 54596.9</b> Mediation Proposal		Discussion	10 min.
10	<b>RECONVENE OPEN SESSION – REPORT CLOSED SESSION ACTION</b>			
11	<b>ADJOURNMENT:</b> Next Regular Meeting – May 26, 2021			

Posted 4/23/2021

Chief Executive Officer  
Louis Ward, MHA



Mayers Memorial Hospital District

Board of Directors  
Jeanne Utterback, President  
Beatriz Vasquez, PhD, Vice President  
Tom Guyn, MD, Secretary  
Abe Hathaway, Treasurer  
Tami Vestal-Humphry, Director

Board of Directors  
Regular Meeting  
Minutes  
March 31, 2021 – 1:00 pm  
Teleconference Only

*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:** Beatriz Vasquez called the regular meeting to order at 1:02 pm on the above date.

**BOARD MEMBERS PRESENT:**

Jeanne Utterback, President  
Beatriz Vasquez, PhD, Vice President  
Tom Guyn, MD, Secretary  
Abe Hathaway, Treasurer  
Tami Vestal-Humphry, Director

**ABSENT:**

**STAFF PRESENT:**

Louis Ward, CEO  
Ryan Harris, COO  
Keith Earnest, CCO  
Travis Lakey, CFO  
Candy Vculek, CNO  
Val Lakey, ED of CR & BD  
Theresa Overton, Director of Nursing Acute  
Jack Hathaway, Director of Quality  
Amanda Ponti, Clinic Manager  
Jessica DeCoito, Board Clerk

**2 CALL FOR REQUEST FROM THE AUDIENCE - PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS: NONE**

**3 APPROVAL OF MINUTES**

3.1	A motion/second carried; Board of Directors accepted the minutes of February 24, 2021.	<i>Guyn, Vasquez</i>	<i>Guyn-Y Hathaway-Y Humphry-Y Utterback-Y Vasquez-Y</i>
3.2	A motion/second carried; Board of Directors accepted the minutes of March 24, 2021 Special Meeting.	<i>Hathaway, Guyn</i>	<i>Guyn-Y Hathaway-Y Humphry-Y Utterback-Y Vasquez-Y</i>

**4 DEPARTMENT/OPERATIONS REPORTS/RECOGNITIONS**

4.1	A motion/second carried; Jessica Cook was recognized as February Employee of the Month. Resolution 2021-08	<i>Vasquez, Humphry</i>	<i>Guyn-Y Hathaway-Y Humphry-Y Utterback-Y Vasquez-Y</i>
4.2	Director of Nursing Acute – EPIC is not a part of the hospital or Outpatient Medical (OPM) yet, but hopeful for the software to be something we can use district wide. Station 1 Acute is back in the original location and will remain there while construction takes place but we will be ready for all the disturbances that come with that. Lots of changes and adjustments, but we have a great team putting in all their effort to make things happen and keep patients safe. OPM will remain in the back building until we can remove the COVID ward from their original space. Surgery is back open but working on getting CRNA's scheduled to keep our schedules covered and keep Surgery open.		
4.3	Director of Quality: Star Rating for Acute Care: 6 measures following and adding in 3 more to make 9 metrics total. November should have more information for us for this and Infection Control has been a huge factor in it. Prime Audit		

has been signed off and moving forward with QIP in the clinic. The clinic EMR will make it easy to report the data that is required. Money from Prime is and will trickle in. Thank you to Jack for all his work on the Prime program. Congratulations on the great job done!

- 4.4 Mayers Rural Health Center: Introduction of Amanda Ponti provided by CEO Louis Ward. Clinic did pass the CDPH Survey on March 30<sup>th</sup> – very excited to keep moving forward. Discussion took place regarding the employees that are going through the onboarding. Looking forward to the opening, onboarding of patients, and team members.

**5 BOARD COMMITTEES**

**5.1 Finance Committee**

5.1.1 **Committee Meeting Report:** Met with Purchasing Manager and discussed the overstock of items and reducing that number, work with vendors that can help us save money. We also met with Respiratory who has seen a decline of patients due to COVID but working on marketing strategies to get out to community members, especially patients who enter into our new clinic.

5.1.2 **February 2020:** AR and AP are moving in the right direction, which is great considering our financial position in 2009. Retail Pharmacy consultant will be here in April to provide support on 340B and other retail pharmacy processes. Motion moved, seconded and carried to approve February 2020 Financials. *Hathaway, Guyn* *Guyn-Y*  
*Hathaway-Y*  
*Humphry-Y*  
*Utterback-Y*  
*Vasquez-Y*

5.1.3 **Board Quarterly Finance Review:** Motion moved, seconded and carried to approve Quarterly Finance Review. *Hathaway, Vasquez* *Guyn-Y*  
*Hathaway-Y*  
*Humphry-Y*  
*Utterback-Y*  
*Vasquez-Y*

**5.2 Strategic Planning Committee Chair Vasquez**

5.2.1 **Committee Meeting Report** – discussion took place at the SP meeting on April 28<sup>th</sup>.

5.2.2 **SP Planning Session:** Finance at 9:00 AM, Regular Board Meeting at 10:30 AM followed by SP Session at 1:00 PM. In person at the FR Boardroom. Individuals will cycle in an out of the room to keep social distancing a priority. A list of the submitted ideas will be shared.

**5.3 Quality Committee Chair Utterback**

5.3.1 **Committee Meeting Report** – Kudos provided to staff facility wide with regards to all the work put into moving departments, offices, spaces, etc. to prep for the COVID surge plans, preparation for construction projects, etc. The “needle” thermometer campaign to get individuals in the facility vaccinated has begun to work and we are seeing more employees sign up to receive the vaccine.

**6 ADMINISTRATIVE REPORTS**

6.1 **ED of Community Relations & Business Development:** Hazard Bill: identifies particular healthcare workers who can retroactively request pay for hazard work. This did go to print and we are watching this very closely. Very specific plan with the mailer everyone just received, including the launching of the new website, opening of the clinic and demolition construction beginning. Conversations with Supervisors, Assembly Woman Dahle, Senator Dahle, Rotary and other local organizations continue to take place with all the things going on.

**6.2 Chief’s Reports**

6.2.1 **CFO:** Brought up some of the future projects that we will discuss in SP Session and a round figure of what we could expect that to cost the district. IE: FR Clinic would cost around \$2 million. CARES Act will help with loss of revenues and COVID expenses.

6.2.2 **CCO:** Vaccinations are going well with more folks signing up for the Johnson & Johnson vaccine available. We did receive a large amount of vaccines that we are keeping in our ultra-low freezer. April 1<sup>st</sup> is opening up at 50 and over and on the 15<sup>th</sup> this opens up to anyone who wants the vaccine. Once the clinic is open and ready, we will move the vaccination clinics to that location from MMHD. We have provided opportunities to provide vaccination clinics on site with Sierra Pacific and other local entities. Telemedicine will be moving to the clinic site in Burney but will have services available in Fall River. A motor has arrived to fix the Barrier Isolator and we are working on getting the technician up to replace the motor.

Public records which relate to any of the matters on this agenda (except Closed Session items), and which have been distributed to the members of the Board, are available for public inspection at the office of the Clerk to the Board of Directors, 43563 Highway 299 East, Fall River Mills CA 96028. This document and other Board of Directors documents are available online at [www.mayersmemorial.com](http://www.mayersmemorial.com).

- 6.2.3 **CNO:** Mock Survey has taken place and flags were very minor and easy to fix. Comment from surveyor was that our facility has come a long way from her first visit 3 years ago and we have done a very good job at maintaining and surpassing the level of our patient's care. Director of Emergency Department and Ancillary Services will be leaving us this Friday. Our Assistant Manager in the ER is trained and ready to take on. Lab is prepping for a survey very soon and we have brought on a consultant to help us prepare for this survey, as well as help our new Lab Manager with department management. The LEAN process has helped us stay on top of the previously identified issues, all while we have managed the COVID environment changes brought on.
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- 6.2.4 **COO:** Big thank you to the Operations team (Maintenance, IT and Housekeeping) along with those moving, for keeping on top of the schedule for the month of March and full line up scheduling and projects. Demo project: pre-construction meeting took place yesterday with some minor changes to make on the Testing, Inspection Order (TIO). Our schedule has changed slightly with mobilizing on the 5<sup>th</sup> and construction prep on the 12<sup>th</sup>. Clinic: Licensure has been completed with the survey being completed on March 30<sup>th</sup>. Looking forward to the Ribbon Cutting on the 16<sup>th</sup> and opening on the 19<sup>th</sup>. Clarification provided on the Purchasing report from Finance: we will not be able to ever just use 1 vendor but if we can narrow down the list of vendors we use for all of our supplies, we may be able to better use our GPO and save money with cleaning up expired supplies from vendors who can only provide us a minimum which surpasses our actual use. Laundry Facility permit has been issued and things are starting to mobilize for a start in 30 days. Security updates will be occurring now. Landscaping and ground maintenance has picked up again with the nice weather.
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- 6.2.5 **CEO:** COVID: Shasta co. numbers are looking good right now. 177,000 tests have been administered in Shasta Co. since the pandemic started and we projected that we have probably administered at least 1/3 of those tests. Rural Health Clinic: we signed Dr. McKenzie and will begin orientation and work this next week. Dr. Saborido will be working in the ER and in the Clinic. Looking to add in another provider who can work in the clinic and in the hospital. Mock Surveyor made amazing comments towards our staff and the staff's work. We appreciate the staff in SNF, Quality and Pharmacy for their work. PG&E: emphasis on Val's role in telling the story about Rural Hospital's to keep the resources from PG&E with a back-up generator during power shutoff events.

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**9 OTHER INFORMATION/ANNOUNCEMENTS**

9.1 Board Member Message: Update on the clinic, vaccinations clinic, and Strategic Planning session.

9.2 Clinic Ribbon Cutting logistics are being finalized and we will make sure that you are aware of your role before the day.

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**10 ANNOUNCEMENT OF CLOSED SESSION – 3:04 pm**

10.1 **Pending Litigation Government Code 54596.9: Upcoming Mediation:** Nothing to report out of CLOSED Session.

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**12 RECONVENE OPEN SESSION: 3:18 pm**

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**13 ADJOURNMENT: 3:18 pm**

Next Regular Meeting: April 28, 2021

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

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

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

Chief Executive Officer  
Louis Ward, MHA



Mayers Memorial Hospital District

Board of Directors  
Jeanne Utterback, President  
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Tom Guyn, MD, Secretary  
Abe Hathaway, Treasurer  
Tami Vestal-Humphry, Director

Board of Directors  
**Emergency Regular Meeting**  
**Minutes**

April 1, 2021 – 1:00 pm  
Teleconference Only

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**1 CALL MEETING TO ORDER:** Beatriz Vasquez called the regular meeting to order at 9:00 AM on the above date.

**BOARD MEMBERS PRESENT:**

Jeanne Utterback, President  
Beatriz Vasquez, PhD, Vice President  
Tom Guyn, MD, Secretary  
Abe Hathaway, Treasurer

**ABSENT:**

Tami Vestal-Humphry, Director

**STAFF PRESENT:**

Jessica DeCoito, Board Clerk

**Special Presenters:**

**2 CALL FOR REQUEST FROM THE AUDIENCE - PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS: NONE**

**3 OTHER INFORMATION/ANNOUNCEMENTS**

**4 ANNOUNCEMENT OF CLOSED SESSION – 9:01 AM**

4.1 **MEDICAL STAFF CREDENTIALS GOVERNMENT CODE 54962**

**STAFF STATUS CHANGE**

1. Robert Adams, DO to Inactive
2. Latisha Smith-Chase, MD to Inactive
3. Henry Patterson, OD to Inactive
4. Steven McKenzie – Add a Service Location

**AHP (Allied Health Professional) APPOINTMENT**

1. Serena Ackerman, CRNA
2. Andrew Ewell, CRNA
3. Craig Griffiths, CRNA
4. Shazmin Gangji, PA

**AHP (Allied Health Professional) REAPPOINTMENT**

1. David Nicholson, CRNA
2. Heather Corr, PA

**MEDICAL STAFF REAPPOINTMENT**

1. Lara Zimmerman, MD
2. Lin Zhang, MD
3. Alan Yee, DO
4. Ge Xiong, MD
5. Vicki Wheelock, MD
6. Massuc Seyal, MD
7. Ajay Sampat, MD
8. David Richman, MD
9. Katherine Park, MD

10. John Olichney, MD
11. Kwan Ng, MD
12. Ricardo Maselli, MD
13. Ryan Martin, MD
14. Norika Mallhado-Chang, MD
15. Marc Lenaerts, MD
16. Jeffre Kennedy, MD
17. Alexandra Duffy, DO
18. Charles DeCarli, MD
19. Ashok Dayananthan, MD
20. Matthew Chow, MD
21. Michelle Apperson, MD
22. Kevin Keenan, MD
23. Olivia Tong, MD
24. Tommy Saborido, MD
25. Aditi Bhaduri, MD
26. Allen Morris, MD

**MEDICAL STAFF APPOINTMENT**

1. Khalil Zahra, MD
2. Paul Guisler, MD
3. Sindhura Batchu, MD
4. Orwa Aboud, MD

Credentials Approved Unanimously.

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5 **RECONVENE OPEN SESSION: 9:08 AM**

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6 **ADJOURNMENT: 9:08 AM**

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Next Regular Meeting: April 28, 2021

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

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Board Member

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Board Clerk

Chief Executive Officer  
Louis Ward, MHA



Mayers Memorial Hospital District

Board of Directors  
Jeanne Utterback, President  
Beatriz Vasquez, PhD, Vice President  
Tom Guyn, MD, Secretary  
Abe Hathaway, Treasurer  
Tami Vestal-Humphry, Director

Board of Directors  
Emergency Regular Meeting  
Minutes  
April 14, 2021 – 9:00 am  
Teleconference Only

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**1 CALL MEETING TO ORDER:** Beatriz Vasquez called the regular meeting to order at 9:00 AM on the above date.

**BOARD MEMBERS PRESENT:**

Jeanne Utterback, President  
Beatriz Vasquez, PhD, Vice President  
Tom Guyn, MD, Secretary  
Abe Hathaway, Treasurer  
Tami Vestal-Humphry, Director

**STAFF PRESENT:**

Louis Ward, CEO  
Ryan Harris, COO  
Travis Lakey, CFO

**ABSENT:**

**Special Presenters:**

Lisa Dal Gallo, Hanson Bridgett  
David Buoncristiani, Hanson Bridgett

**2 CALL FOR REQUEST FROM THE AUDIENCE - PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS: NONE**

**3 OTHER INFORMATION/ANNOUNCEMENTS**

**4 ANNOUNCEMENT OF CLOSED SESSION – 9:01 AM**

4.1 **Pending Litigation Government Code 54596.9**  
Mediation Proposal

Report from Closed Session: Discussion took place. A consensus was reached unanimously.

**5 RECONVENE OPEN SESSION: 12:19 pm**

**6 ADJOURNMENT: 12:19 pm**

Next Regular Meeting: April 28, 2021

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

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

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





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

**RESOLUTION NO. 2021-09**

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

**Pamela Sweet**

**As March 2021 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, Pamela Sweet is hereby named Mayers Memorial Hospital District Employee of the Month for March 2021; and

**DULY PASSED AND ADOPTED** this 28th day of April 2021 by the Board of Trustees of Mayers Memorial Hospital District by the following vote:

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

\_\_\_\_\_  
Jeanne Utterback, President  
Board of Trustees, Mayers Memorial Hospital District

ATTEST:

\_\_\_\_\_  
Jessica DeCoito  
Clerk of the Board of Directors

Chief Executive Officer  
Louis Ward, MHA



Mayers Memorial Hospital District

Board of Directors  
Jeanne Utterback, President  
Beatriz Vasquez, Ph.D., Vice President  
Tom Guyn, M.D., Secretary  
Abe Hathaway, Treasurer  
Tami Vestal-Humphry, Director

## Board Meeting

Wednesday April 28, 2021

### Mayers Rural Health Center Report – Amanda Ponti, Clinic Manager

#### Ribbon Cutting and Dedication

Thank you all for attending the Ribbon Cutting and Dedication Ceremony. It was a pleasure to meet you all in person and recognize the individuals who have contributed to the success of this project. This department is extremely well supported.

#### Opening Statistics

The clinic opened to patients Tuesday, April 20<sup>th</sup> with 73 scheduled visits for weeks 1 and 2 and a total of 135 patients submitting to transfer their primary care.

#### Upcoming Surveys

In order to become RHC certified the clinic must pass The Compliance Team's Rural Health Clinic Survey. We are able to submit a request for this survey to be conducted once we are licensed by the state, have a valid CLIA waiver, and have seen 10 patients in the clinic. At this time, we are awaiting the CLIA license in order to submit our request for survey. Travis has been following up with the state in order to get an update on our CLIA license that was submitted in February. Wipfli has been providing mock survey readiness documents and auditing current policies to ensure a successful survey.

Partnership Health Plan of California also requires a site survey in order to allow the clinic to become a facility at which their members receive care. This is a bi-annual survey and the first one will be conducted virtually on May 6<sup>th</sup>. This audit reviews the physical space where services are provided, employee and provider records, and policies. They have also provided a survey checklist in order to be appropriately prepared for this survey. The completion of this survey will allow us to apply with CDPH to become a member of the Child Health and Disability Prevention Program (CHDP) to register for the Vaccinations for Children (VFC) program and provide well child visits in the clinic.

#### Electronic Medical Record Implementation

Our partnership with OCHIN-EPIC is ongoing as we work through the first week of opening. EPIC has been successfully launched with minimal issues. The OCHIN team has provided tremendous support for go-live ensuring the system is functioning and issues are resolved timely. There have been no significant issues with the EMR go-live.

Outstanding items for the EMR include a few interfaces that are not complete yet. Hospital Lab and Radiology interfaces were unable to be completed in time for go-live. Our IT team, the EMR vendors at the hospital, and OCHIN have been working diligently to get these ready for use. The goal is for these to be completed by May 1<sup>st</sup>, more information on these will be available after the interface call occurring today. Additionally the SacValley Med Share HIE interface is not complete. It was decided early on that having this ready for go-live was not going to be obtainable. This working is continuing and we should see this interface operational in June.

Text messaging for the clinic is now live. Patients can text into the clinic at 530-335-6070 in order to reach a staff member any time during business hours to modify/cancel/confirm their scheduled appointments. We are still asking new patients to fill out the online patient form and wait to be contacted for an appointment. We have been able to get back to everyone within two business days currently. This allows us to have all the information needed to build the patients into the system without having staff members on the phone for long periods.

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Board of Directors  
Quality Committee  
Minutes

April 14, 2021 @ 1:00 PM  
Fully Remote Zoom Meeting

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1	<b>CALL MEETING TO ORDER:</b> Board Chair Jeanne Utterback called the meeting to order at 1:02 pm on the above date.			
	<b>BOARD MEMBERS PRESENT:</b>		<b>STAFF PRESENT:</b>	
	Jeanne Utterback, President Tom Guyn, MD., Secretary		Louis Ward, CEO Keith Earnest, CCO	
	<b>Community Members Present:</b> Laura Beyer		Jack Hathaway, Director of Quality Libby Mee, Director of Human Resources Amanda Harris, Telemedicine Jessica DeCoito, Board Clerk Jennifer Levings, Data Analyst	
	<b>ABSENT:</b> Daryl Schneider, Physical Therapy (with patient) Trudi Burns, Cardiac Rehab (with patient) Mary Ranquist, Hospice (with patient)			
2	<b>CALL FOR REQUEST FROM THE AUDIENCE – PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS</b>			
	None			
3	<b>APPROVAL OF MINUTES</b>			
	3.1	A motion/second carried; committee members accepted the minutes of March 10,2021.	<b>Guyn, Hathaway</b>	<b>Guyn – Y Utterback – Y Ward – Y Hathaway – Y Beyer – Y</b>
4	<b>No Reports for: Quality Facilities or Finances</b>			
5	<b>REPORTS: QUALITY STAFF</b>			
	5.1	<b>Workers Comp:</b> Got the ok to have Worker's Comp injury visits in our own Clinic with one of our own providers. Working with Amanda Ponti, Clinic Manager, to establish that provider and process. Employees do have the option to request their own provider after MMHD process has been followed – and would be a request with BETA. Working with Dana Hauge on innovative programs and things we can do with our employees.		
6	<b>REPORTS: QUALITY PATIENT SERVICES</b>			
	6.1	<b>Physical Therapy:</b> No registry staff being used in Physical Therapy. Treadmill was due to arrive Monday, April 12 <sup>th</sup> .		
	6.2	<b>Cardiac Rehab:</b> Routine maintenance on equipment is needed. Working on that equipment maintenance plan with our maintenance team. Some new equipment has been purchased specific for Cardiac Rehab patients like the dumbbells with adjustable weight dials.		

6.3	<b>Hospice:</b> Currently sitting at 9 patients and staff is quite busy. End of Life Visits had a bad quality rating – not due to actual patient care but due to tracking and recording of the data itself. Issue of reporting has been fixed and we will see better quality ratings for End of Life Visits. Hospice worked really well with the families for the patients in the “End of Life Care” stage during the COVID restrictions.
6.4	<b>Pharmacy:</b> RPH Reviews (drug regimen review) required to do monthly for the SNF Residents. Mock survey found some issues with the eye drops given, so a process was created to spell out “these drops first, wait five minutes, then provide these eye drops next.”
6.5	<b>Respiratory:</b> Pulmonary Rehab Clinic – we’re hopeful to get an arrangement with Shasta Regional to learn about pulmonary rehab training.
6.6	<b>Retail Pharmacy:</b> We’ve seen some fraudulent activity at retail pharmacies throughout the north state with narcotics. Luckily we caught it before any issues arose.
6.7	<b>Telemedicine:</b> Exceeded appointment total compared to last year’s appointment numbers. And anticipate it will only get better with the clinic opening. Alternative Education schools are not utilizing the services right now but busy with the other four schools. Burney Elementary has been experiencing staff issues and hope to see a resolution to this issue. Will be onboarding our first pediatric specialty doctor in GI services. Telemedicine will be located in the Burney Clinic as well.
6.8	<b>SNF Events/Survey:</b> SNF Mock Survey was conducted and everything went really well. Some minor things have been adjusted already. Lots of praise from Mock Surveyor on the work we’ve been doing and keeping up on. Mock Survey for the Acute Care side of the hospital will be scheduled for the near future so we can be prepared.
6.9	<b>Infection Control:</b> Plugging along with COVID testing and vaccinations. Employee testing has been improving with compliance. We are still testing those employees who have been fully vaccinated. Employee Physicals have picked up again every week.
7	<b>DIRECTOR OF QUALITY</b>
7.2	<b>Director of Quality Update:</b> Not many updates have occurred in the last month. Hospital QIP is normally around \$6700 and this year we were bumped up to \$25,000. Very much looking forward to that return. Prime is still working with a June 1 <sup>st</sup> deadline. We have some options and we should be able to find 2 options that will work for us, like an A1C program. Auditing has been going on in departments.
8	<b>ADMINISTRATIVE REPORT:</b> COVID numbers are lower than previous months. Established relationship and plan with Shasta Regional Medical Center for transfer of COVID patients and the plan is still working. We have administered 1193 vaccines to individuals within in Shasta County, and we are seeing anyone 16 years and older. Johnson and Johnson vaccine program has been suspended until further notice from CDC. Employee vaccinations are at 57% right now but we continue to have discussions on how to educate our employees about being vaccinated. Congratulations to the SNF staff and all support staff departments with the Mock Survey. Building Demo will be taking place soon. A fence will be placed up around the building and equipment will start to show up. Employee Meetings will occur on April 21 <sup>st</sup> in Burney and April 28 <sup>th</sup> in Fall River. A plethora of subjects will be discussed at these meetings. Employee Council meeting will take place April 15 <sup>th</sup> – non management employees who meet up once a month to discuss a plethora of subjects. Mayers Rural Health Center is set to open on April 19 <sup>th</sup> . Ribbon Cutting Ceremony is planned for the 16 <sup>th</sup> . Conducting a team building activity with the Clinic Staff tomorrow.
9	<b>OTHER INFORMATION/ANNOUNCEMENTS:</b>
10	<b>ADJOURNMENT: 2:16 PM</b> -- Next Regular Meeting – May 12, 2021

Public records which relate to any of the matters on this agenda (except Closed Session items), and which have been distributed to the members of the Board, are available for public inspection at the office of the Clerk to the Board of Directors, 43563 Highway 299 East, Fall River Mills CA 96028. This document and other Board of Directors documents are available online at [www.mayersmemorial.com](http://www.mayersmemorial.com).

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

**Date:**  
**April 6, 2021**

**For Quarter Ending**  
**March 31, 2021**

<b>Department</b>	<b>Document</b>	<b>New/Revised/Retired</b>
Acute - Med Surg	Adverse Event Report MMH304	Revised
Acute - Med Surg	ALCOHOL WITHDRAWAL SYNDROME PHYSICIANS ORDERS MMH687	Retired
Acute - Med Surg	Blood Glucose Monitoring - Roche ACCU-CHEK Inform II	Revised
Acute - Med Surg	Rounds Sheet, Physicians and Nursing Supervisor	Retired
Acute - Med Surg	Shampoo of Hair, In Bed	Retired
Acute - Med Surg	Unusual Events	Revised
Acute - Med Surg	Venipuncture Considerations for Infants and Small Children	Retired
Disaster	Emergency Procedure for Laboratory	Revised
Disaster	Severe Winter Storms	Revised
Emergency Department	Trauma Team Activation	Retired
Emergency Department	TRAUMA TEAM ACTIVATION LOG MMH356	Retired
Emergency Department	Umbilical Cord Gas, Drawing of	Retired
Hospice	Hospice Patients Bill of Rights/Informed Consent	Revised
Human Resources	Mileage & Expense Voucher Forms Policy	Revised
Human Resources	Reference Checks	Revised
Lab	Authorization to Perform	Retired
Lab	Fire Safety Management - Laboratory	Retired
Lab	Laboratory Staffing Plan Management	Retired
Lab	Laboratory Tests and Methods	Retired
Lab	Storage Instructions for Blood from Blood Bank Refrigerator	Retired
Medical Staff	Medical Staff Committee Structure	Revised
Pharmacy - Sterile Compou	Compounding Personnel MMH602	Revised
Physical Therapy	Outpatient Physical Therapy Referrals	Retired
Preprinted Orders	Physician Orders - Postpartum MMH15	Retired
Quality & Performance Im	Medication Error Reduction Plan	Revised
Safety	Serious Accidents in Laboratory	Revised
Skilled Nursing	Controlled Substance Medication Cart Count Procedure	Revised
Skilled Nursing	Discontinued Medications and Controlled Substance Disposal: SNF	Revised
Volunteer	Thrift Store Community Service	Revised
Volunteer	Volunteer Qualifications and Requirements	Revised

MAYERS MEMORIAL HOSPITAL DISTRICT

MANUAL REVIEW AND APPROVAL

MANUAL Dietary

 DATE: 4/7/21  
CHIEF EXECUTIVE OFFICER/DIVISION CHIEF

Jeanne Utterback DATE: \_\_\_\_\_  
GOVERNING BOARD

 DATE: 4/7/21  
CHIEF OF STAFF/MEDICAL DIRECTOR

 DATE: 3/17/21  
DEPARTMENT MANAGER

**I have reviewed this manual and the Policies and Procedures are in place regarding departmental operations.**

Approvals: P&P: 10/6/2016; MEC: 1/11/2017; Board: 1/27/2017  
MANUAL REVIEW AND APPROVAL MMH289

**MAYERS MEMORIAL HOSPITAL DISTRICT**

**MANUAL REVIEW AND APPROVAL**

MANUAL Board of Directors

  
\_\_\_\_\_  
CHIEF EXECUTIVE OFFICER/DIVISION CHIEF      DATE: 03/28/21

Abe Hathaway  
\_\_\_\_\_  
GOVERNING BOARD      DATE: \_\_\_\_\_

  
\_\_\_\_\_  
CHIEF OF STAFF/MEDICAL DIRECTOR      DATE: 4/7/21

  
\_\_\_\_\_  
DEPARTMENT MANAGER      DATE: 3/22/21

**I have reviewed this manual and the Policies and Procedures are  
in place regarding departmental operations.**

Approvals:      P&P: 10/6/2016; MEC: 1/11/2017; Board: 1/27/2017  
MANUAL REVIEW AND APPROVAL MMH289



MAYERS MEMORIAL HOSPITAL DISTRICT

MANUAL REVIEW AND APPROVAL

MANUAL Maintenance

  
\_\_\_\_\_  
CHIEF EXECUTIVE OFFICER/DIVISION CHIEF  
Tami Vestal-Humphry

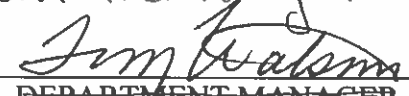
DATE: 3/18/2021

\_\_\_\_\_  
GOVERNING BOARD

DATE: \_\_\_\_\_

  
\_\_\_\_\_  
~~CHIEF OF STAFF/MEDICAL DIRECTOR~~

DATE: 3-18-2021

Department Manager  
  
\_\_\_\_\_  
~~DEPARTMENT MANAGER~~  
Chief of Staff

DATE: 4/7/21

**I have reviewed this manual and the Policies and Procedures are in place regarding departmental operations.**

MAYERS MEMORIAL HOSPITAL DISTRICT

MANUAL REVIEW AND APPROVAL

MANUAL Telemedicine

  
\_\_\_\_\_  
CHIEF EXECUTIVE OFFICER/DIVISION CHIEF DATE: 3/17/21

Jeanne Utterback  
\_\_\_\_\_  
GOVERNING BOARD DATE: \_\_\_\_\_

  
\_\_\_\_\_  
CHIEF OF STAFF/MEDICAL DIRECTOR DATE: 4/7/21

  
\_\_\_\_\_  
DEPARTMENT MANAGER DATE: 3-17-21

**I have reviewed this manual and the Policies and Procedures are in place regarding departmental operations.**

MAYERS MEMORIAL HOSPITAL DISTRICT

MANUAL REVIEW AND APPROVAL

MANUAL Hospice

Keith Earnest DATE: 3/17  
CHIEF EXECUTIVE OFFICER/DIVISION CHIEF

Jeanne Utterback  
\_\_\_\_\_  
GOVERNING BOARD DATE: \_\_\_\_\_

Jim Watson MD DATE: 4/7/21  
CHIEF OF STAFF/MEDICAL DIRECTOR

Mary Rongquist RN DATE: 3/17/21  
DEPARTMENT MANAGER

**I have reviewed this manual and the Policies and Procedures are in place regarding departmental operations.**

MAYERS MEMORIAL HOSPITAL DISTRICT

MANUAL REVIEW AND APPROVAL

MANUAL Employee

  
\_\_\_\_\_  
CHIEF EXECUTIVE OFFICER/DIVISION CHIEF      DATE: 03/17/21

Tom Guyn  
\_\_\_\_\_  
GOVERNING BOARD      DATE: \_\_\_\_\_

  
\_\_\_\_\_  
CHIEF OF STAFF/MEDICAL DIRECTOR      DATE: 4/7/21


  
\_\_\_\_\_  
DEPARTMENT MANAGER      DATE: 03/17/2021

**I have reviewed this manual and the Policies and Procedures are in place regarding departmental operations.**

MAYERS MEMORIAL HOSPITAL DISTRICT

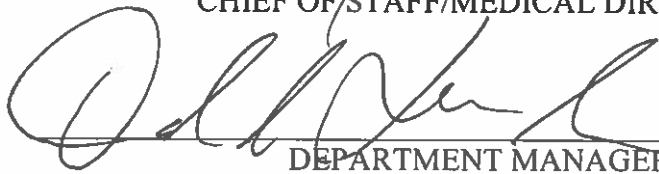
MANUAL REVIEW AND APPROVAL

MANUAL Respiratory Therapy

  
\_\_\_\_\_  
CHIEF EXECUTIVE OFFICER/DIVISION CHIEF      DATE: 3/17/21

Beatrice Vasquez  
\_\_\_\_\_  
GOVERNING BOARD      DATE: \_\_\_\_\_

  
\_\_\_\_\_  
CHIEF OF STAFF/MEDICAL DIRECTOR      DATE: 4/7/21

  
\_\_\_\_\_  
DEPARTMENT MANAGER      DATE: 3/17/21

**I have reviewed this manual and the Policies and Procedures are in place regarding departmental operations.**



## Mayers Memorial Hospital District

*Always Caring. Always Here.*

**Executive Director of Community Relations & Business Development – Valerie Lakey**  
**April 2021 Board Report**

### **Legislation/Advocacy**

There are several bills we are following very closely and working with CHA and ACHD on Advocacy efforts. At the forefront are AB650 “the hazard pay” bill, AB1130 the “office of healthcare affordability” bill, and Seismic, now being called “Disaster Response Modernization”.

Things are busy in Sacramento with committee hearings. Fiscal bills need to be out of committee by April 30<sup>th</sup> and the non-fiscal deadline is May 7<sup>th</sup>. I have a meeting scheduled with Assembly Member Dahle this week to discuss several bills. I have also been involved with many other phone calls and Zoom meeting with members regarding legislation that will affect rural healthcare.

I will be representing California Hospitals along with CHA by testifying in opposition to [AB650](#) at the Assembly Labor Committee hearing on April 22<sup>nd</sup>. I have been working with the AB650 opposition coalition and representing rural hospitals. The bill recently received amendments and now would require hospitals — except state and county hospitals — and private health care employers with 100 or more employees to pay quarterly “hazard pay retention bonuses” of \$2,500 for full-time employees, \$1,500 for part-time employees, and \$1,000 for other employees who provide direct patient care or services directly supporting patient care (including housekeeping staff, security guards, food services workers, laundry workers, non-managerial administrative staff, and physicians) if they are employees of a health care provider. These bonus payments would be required to be paid on the first day of January, April, July, and October in 2022. This bill is costly, arbitrary and inequitable. I can provide more information upon your request and will have an update at the board meeting.

[AB1130](#) would establish, within the Office of Statewide Health Planning and Development (OSHPD), an Office of Health Care Affordability. The office would analyze the health care market for cost trends and drivers, develop policies for lowering health care spending costs for consumers, set and enforce cost targets, and create a state strategy for controlling the cost of health care and ensuring affordability for consumers and purchasers. Also released by the administration on Feb. 18 was budget trailer bill language to establish an Office of Health Care

Affordability within OSHPD, which is similar to AB 1130. The bill passed the Assembly Health Committee on April 6 and now moves to the Appropriations Committee.

**Seismic** is now taking a focus on Disaster and is being referred to as **Disaster Modernization Response**. We were able to get language that supports rural and critical access hospitals. The DRAFT language is being reviewed and I will provide a full report at the meeting.

On the Federal front, we completed a request to Congressman LaMalfa's office to receive Member Designated "earmarked funds". The deadline was April 14<sup>th</sup> and we submitted all of the required documents, along with support letters from CHA, Hospital Council, ACHD, Senator Dahle, Assembly Member Dahle and OCHIN. Our request was for funding resources to upgrade clinical information system to a high-functioning, interoperable, health IT platform. I continue to be in contact with the Congressman's local and DC staff regarding the request and am available to them as they review our request.

### **Marketing/Public Relations/Recruiting**

The new website had a soft launch the first part of April and we are continuing to add, format and do some fine-tuning. Overall the functionality is much better and we have had good feedback as I work with managers to invigorate their pages. The build out on the Rural Health Clinic page has been helpful in collecting patient registration forms. Most of the first week appointments were scheduled through website forms.

PR for the Rural Health Center has featured information about providers, services and scheduling. We gave gift bags to the first scheduled appointments and have duffel bags, pens and note pads for patients. We are working on magnets, appointment cards and other marketing materials for the clinic. A simple brochure was developed and along with swag bags in the orientation training event for staff in which they went out and made contacts with Burney businesses.

The Ribbon Cutting and Dr. Watson Dedication event went very well. Thank you to all for attending. We will have a video of the event available soon. You can also access the ZOOM recording on request. [Click here to see the newscast.](#)

Public relations and messaging continues for the Building Demo project. I have met with all public officials and have presented to the Rotary Club.

Another project on tap is the revision of the Physician Resource Binder which can be used for current providers as well as used for recruiting efforts.

Marketing for CNA's (hiring and CNA class) is being worked on as well as for various MMHD departments.

We are marketing our “Planting Seeds, Growing Our Own” Intern program that is open to graduating seniors from Fall River, Big Valley and Burney, The application deadline is May 1<sup>st</sup>.

### **COVID Messaging/Vaccination Program**

We successfully completed on-site clinics at Driscoll’s and Sierra Pacific Industries. We have contacted local high schools, since the Pfizer vaccine can be used on 16 years + and that is now an option.

We are working with SCPH and Mercy to do an on-site vaccine clinic in the Johnson Park Community on May 6th. This will also include home bound residents that receive Meals on Wheels. Mayers has been coordinating all of the outreach and PR.

We have provided a flyer (in Spanish) and information to distribute to a meal delivery campaign that will be happening in McArthur.

### **Disaster/Emergency Preparedness/Safety**

We are updating the Employee Intranet to include new information regarding Injury and Illness Prevention Plan, Workplace Violence and Ergonomics. Dana Hauge has been working at implementing the Ergo Program and has had great response.

We are putting a focus on making the Emergency Preparedness documents digital and easily accessible noting which survey component they relate to.





## Operations Report April 2021

Statistics	March YTD FY21 <i>(current)</i>	March YTD FY20 <i>(prior)</i>	March Budget YTD FY21
Surgeries <i>(incl. C-sections)</i>	21	35	72
➤ Inpatient	1	5	18
➤ Outpatient	20	30	54
Procedures <i>(surgery suite)</i>	72	116	128
Inpatient	1,477	1,180	1,520
Emergency Room	2,841	3,140	3,015
Skilled Nursing Days	20,372	21,065	20,805
OP Visits (OP/Lab/X-ray)	16,234	10,206	11,967
Hospice Patient Days	847	818	1,053
PT	1,898	1,910	2,250

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

### Chief Clinical Officer Report

Prepared by: Keith Earnest, CCO

#### **Pharmacy**

- Most of my activity has surrounded acquiring and administering COVID vaccines.
  - We are vaccinating the general public ages 16 and above.
  - Vaccination sign ups have dropped off significantly.
  - We are partnering with Mercy Redding to have a vaccine event for home bound individuals and other underserve members of the community of Johnson Park. The event is scheduled for May 6.
  - As of April 19 we have given 1226 first doses and 1095 second doses of COVID vaccines.
- Mayers Rural Health Clinic
  - Freezer installed and monitored
  - Refrigerator is on order and expected to arrive by April 23.
  - Medication Room is set up and stocked. Par levels will be revised based on use.
  - Initiated the process to enroll in the Vaccines for Children Program
- The barrier isolator is out of service due to a motor failure on one of the fans. The certification technicians were on site to troubleshoot the issue on April 20 and the problem was different from what was initially thought. Parts are on order.

#### **Physical Therapy**

- The PT treadmill is in place. Big thank you to the maintenance staff for assembling and setting it up the same day it was received. The department was awarded \$5500 from a community member through the foundation for a treadmill.
- The PT department and Skilled Nursing in Burney worked with the foundation grant writer to obtain a grant for a NuStep for the Burney Annex. Mayers has been awarded the grant. This machine will give Burney SNF residents the same access that Fall River SNF residents already have.

### ***Retail Pharmacy***

- April 21-22 the 340B consultant will be on site. Main areas of review are the 340B contract and inventory control.
- Bay Alarm will be onsite April 21 to train and educate staff on the security system.

### ***Telemedicine***

- Telemedicine services are an integrated part of the Burney Clinic and appointments are being managed through the clinic software.

### ***Respiratory Therapy***

- David Ferrer, Respiratory Therapy Lead, is training at Shasta Regional Medical Center's Outpatient Pulmonary Rehab program the week of April 19<sup>th</sup>. Due to COVID, it has been difficult for David to have onsite training.
- The department looks forward to an increase in referrals from the new clinic to the Pulmonary Function Lab.

### ***Cardiac Rehab***

- Brochures and posters detailing the cardiac rehab program have been developed for the Burney Clinic.
- The new holter monitors are on their way. The ones that initially shipped were the wrong item and have been returned.

## **Chief Nursing Officer Report** **Prepared by: Candy Vculek, CNO**

- MMHD had a mock survey completed this month on the SNF. A few minor findings were rapidly corrected. This was good preparation as we move into survey season.
- An Acute Care mock survey is planned for May as MMHD is also in the window for an acute care survey
- The CLIA survey for the lab was completed this month with only a few minor findings.
- Both RN and LVN staffing remains stable. CNA staffing continues to be a primary focus. The current CNA program through the local college is not providing sufficient support or volume of new grads to stabilize the workforce at MMHD. The hospital clinical educator and the Director of quality are working together to stand up an in-house CNA program. The first step is to complete

all the CDPH requirements and submit an application to the state. This will be completed by May 1<sup>st</sup> and once the state has approved, the program will be operationalized.

- Resident visits have been going well. Initially the SNF opened to visits only at specific times and days. The plan is to return to our pre-COVID visitation hours within the next few days.

### ***SNF Report***

- Census = 73 Residents (Burney Annex = 45; Station 2 Fall River Mills = 28). There are 2 potential admissions for Station 2 Fall River Mills currently. There are a total of 10 beds open (7 female beds and 3 males) at Station 2. At the Burney Annex, the Memory Care Unit has one open bed. There are 3 male beds available in Burney Annex Front.
- STAFFING: Three new LVN Grads are now orienting at the Burney Annex and a returning former LVN will start soon at Fall River. We have 2 new Unit Assistants orienting at Station 2. Four CNA's from the recent CNA Class are orienting—3 in FRM Station 2 and 1 here at Burney Annex.
- Residents continue to be screened morning and evening for fever and/or any changes in condition.
- Staff continue to require weekly testing.
- MMHD-Skilled Nursing had a very successful 'Mock Survey' with Hunter Ambrose Consultant, Leslie Mahoney on March 29, 30, 31. The facility is now in the window for a survey.
- Activities put on a very nice Easter Parade for the staff at both facilities. Sondra is working on a number of upcoming special events for the residents.

### ***Acute Care Report***

- Stats were unavailable at time of report: Acute ADC, Swing ADC; LOS, OBS days:.
- Staffing. There are two RN vacancies on Acute Care. A current employee who finishes the RN program in June will fill one position. Another new hire RN is in orientation.
- There have been no inpatient COVID admissions this month. Any needing admission have been transferred to other facilities
- Acute care is in the survey window. In order to prepare for this, a mock survey is being planned.
- Outpatient Surgery
- Surgery is back in session with the every other week model. The acute care director is working with the new clinic to develop a patient referral process for Dr. Guthrie and Dr. Syverson.

### ***Emergency Department***

- The Emergency Department treated 310 patients in March. 23 patients were transferred to a higher level of care and 11 were admitted to MMHD acute care.
- Staffing - There are currently 3 positions being filled by travelers. One of the travelers has accepted full time employment and will transition to being an employee in June.
- COVID Operations update – Operations are smooth with use of the isolation room and rapid testing. Non-acute patients are being asked to wait in the car pending COVID swab if symptomatic when the isolation room is not available. MMHD has successfully worked with other Redding facilities and has been able to transfer any COVID patients requiring admission.

- ED Audits -The ESI scoring we are still falling short on but significant improvement has already occurred over baseline. The E.D. assistant manager is working with the quality director to develop guidelines and the presses to audit for Stroke, Sepsis, and STEMI patients.

### ***Laboratory***

- The new lab manager is settling into his new role well. MMHD has had a consultant working with the manager to bring the lab fully into compliance. This has gone very well. The consultant has also been working to reduce departmental costs and on call time by implementing point of care testing in the Emergency Department. He is also actively supporting the clinic staff as they learn their point of care processes
- The CLIA survey was completed on April 6<sup>th</sup>. There were no significant findings.

### ***Radiology Board Report***

- There have been some functionality issues with the radiology equipment this month. Both the portable x-ray machine and the new radiology machine have had significant problems. The software had to be reinstalled and this has resulted in some significant down time.
- Staffing- At present there is still one technologist vacancy that is being covered by a traveler.

### **Chief Operating Officer Report**

**Prepared by: Ryan Harris, COO**

#### ***Facilities, Engineering, Other Construction Projects***

- The Mayers Rural Health Center has completed the landscaping portion of the conditional occupancy from the county. The County has been notified that the landscaping is finished and is ready for inspection. The Mayers RHC project came in on time and under budget.
- The Demo project is moving along with demo prep work occurring. Fences will be set up starting April 20<sup>th</sup>. Employees have been notified of the demo/construction areas as well as parking lot closures. We've set up weekly meetings with the Contractor, Architect, Inspector of Record, and MMHD to keep everyone up to date with the project's completion and to address any issues or questions that come up. The contractor is optimistic that they can get substantial completion of the project by mid-September.
- SNF Refresh project will include the updating of all sinks to be ADA compliant. This project has also been put on hold because of the facility's COVID-19 restrictions. No changes to this project.
- Laundry facility drawings have been approved by the county. The general contractor has started procuring materials for the project. We requested that the contractor use local subs on the project and they are trying to coordinate with those subs to get a start date. Belfor spoke with MEP trades again on 4/12 to check their schedule. Unfortunately, we still don't have committed dates but they are all aware of the push. Most have indicated they are running a few weeks out but are working to get this handled as soon as possible. Also, windows are expected to arrive on May 10th and doors are expected to arrive on April 29th. Belfor's insulation and drywall crews are ready to go as soon as the MEP trades and framing have passed inspections.

- Alex Johnson and the Maintenance team have finished working on the minor updates in the church for the Daycare. We also passed our fire inspection on April 6<sup>th</sup> and TCCN submitted that to their licensure. After much back and forth with the county, a Tenant Improvement permit will be required. The plans must be stamped by a California licensed architect or engineer and designed to meet the 2019 California Codes. The designer will need to provide a detailed scope of work including a code analysis identifying occupancy group, type of construction, occupant load analysis, fixture counts, and accessibility. This of course was not expected and I will be requesting additional funds at board finance to complete the project. This will also hurt the project's schedule and I now anticipate the project will not be completed until September or October of this year. This has also made licensure kick back TCCN application until construction is complete.

## ***IT***

### **Helpdesk**

- Since March 25<sup>th</sup>, we have seen a 9% decrease in received tickets and an 11% decrease in resolved tickets. Our backlog has increased 11%. We are slipping a bit on our volume, however, we have seen decreases in response time and resolution time by 46% and 15% respectively. This is great as we are delivering quality over quantity.
- We received a survey response on 14% of our tickets. 94% of our responses were 5/5, and 6% 4/5. We received no 3/5, 2/5, or 1/5.

### **Projects**

- We are maintaining our focus on the clinic and demolition projects and are providing 2 staff members for on-site go-live support the week of the 19<sup>th</sup>. The demolition has given us many hurdles but we are down to only a few services left in there with a plan to move each. We are also continuing testing for our Office 365 Migration.

## ***Purchasing***

- A focus this past month was insuring the Clinic was prepped for opening and seeing patients.
- Delaney Harr the Purchasing manager and I will also be attending a Supply Chain Diversity Requirement Webinar put on by OSHPD on April 22. This webinar is to give guidance and instruction for hospitals on the recent requirement to report on their minority, women, LGBT, and disabled veteran business enterprise procurement efforts by July 1<sup>st</sup>, 2021.

## ***Food & Nutrition Services***

- Nothing new to report at this time.

## ***Environmental Services & Laundry***

- Nothing new to report at this time.

## ***Security***

- The site-walk for Access Control went well, and there will be minimal infrastructure replacement needed if we select them. We are waiting on a quote from the vendor.

- We are looking to schedule our Annual security audit and penetration testing in June. This is dependent on the vendor’s availability but we should be able to lock in dates by the end of the month.
- Val and I have discussed adding cybersecurity topics to the Safety Committee agenda. Jeff Miles will be attending these meetings moving forward to report on these topics.
- There has been 1 suspicious person safety event at the Fall River Campus in the last month.

***Rural Health Clinic***

- Amanda Ponti our Clinic Manager will be giving a more detailed monthly report to the board.

**Operations District-Wide**

**Prepared by: Louis Ward, CEO**

**Dr. Thomas D. Watson Campus at Mayers Memorial Healthcare District**

Upon the recommendation of staff and approval of the District Board, the campus known, as the “Burney Annex” which houses our Burney Skilled Nursing and Memory Care and now our Rural Health Center will be renamed the Dr. Thomas D. Watson Campus. It was with great delight for the Board and staff of Mayers to be able to recognize a Doctor who has served the district’s patients for over 32 years in such a memorable and meaningful way. The naming recognition occurred at the Rural Health Center’s ribbon cutting which took place on April 16<sup>th</sup>. We have been so fortunate to have Dr. Watson on staff of the hospital for all of these years and now we hope he and his family know how much we appreciate him and them for their contributions to Mayers Memorial Hospital District.

**Mayers Memorial Healthcare District**

The administration is working with the Association of California Healthcare Districts and the state of CA to determine a process to rename the district from Mayers Memorial Hospital District to Mayers Memorial Healthcare District. Over the past few years we have opened new lines of business outside of the hospital such as the retail pharmacy and most recently the Rural Health Center which lead us to consider the process to move from a “hospital” district to a “healthcare” district. A full report of the process will be reported to the district board in the coming months.

**COVID – 19**

Covid-19 in Shasta County has slowed down considerably over the past few months, which has translated into lower covid related hospital admissions at all three of the counties hospitals. We are keeping an eye on notices coming from the state of CA that does alert a mid-May surge is likely expected however the state has also alerted we likely will not see hospital admissions as

high as the past 3 surges considering the vaccine efforts. Mayers leadership has elected to keep our isolation space for the potential of covid patients in need of inpatient care however we are also working closely with Shasta Regional Medical Center on transferring covid patients when is medically necessary, we will continue these efforts throughout the summer months until more is known.

On the vaccine front, we have suspended the use of the Johnson & Johnson vaccine due to the CDC recommendations released in early April. We will not begin to use the J&J vaccine until the CDC deems it safe and provides further clarity on how to move forward. The hospital still has a good supply of the Pfizer vaccine and we are currently vaccinating anyone older than 16 years of age.

### **Rural Health Clinic**

I am delighted to report the Mayers Rural Health Clinic officially opened on April 19<sup>th</sup>. It has been great to be a part of the progress over the past 2 years bringing another clinic to the intermountain area. The clinic providers had full schedules all throughout the first week it has been open and when speaking with patients they have been very happy with the flow within the clinic and the care they received. We have also heard instant feedback from patients of the clinic, they are reporting how easy it is now to get the labs, imaging, and medications taken care of considering the district now operates all of the entities ensuring a smooth transition of information which the patients have been very pleased with. More information on the first days of the clinic's activities will be reported verbally.