

Chief Executive Officer
Ryan Harris



Board of Directors
Abe Hathaway, President
Jeanne Utterback, Vice President
Tami Humphry, Treasurer
Lester Cufaude, Director

Quality Committee
Meeting Agenda
January 24, 2024 at 1:00 PM
MMHD Boardroom
43563 HWY 299 E
Fall River Mills, CA 96028

Attendees

Les Cufaude, Director and Chair of Quality
Ryan Harris, CEO
Jack Hathaway, Director of Quality

1	CALL MEETING TO ORDER	Chair Les Cufaude		Approx. Time Allotted
2	CALL FOR REQUEST FROM THE AUDIENCE - PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS			
3	APPROVAL OF MINUTES			
	3.1	Regular Meeting – December 13, 2023	Attachment A	Action Item 2 min.
4	HOSPITAL QUALITY COMMITTEE REPORT		Attachment B	Report 10 min.
5	DIRECTOR OF QUALITY	Jack Hathaway		Report 10 min.
6	OTHER INFORMATION/ANNOUNCEMENTS			Information 5 min.
7	MOVE INTO CLOSED SESSION			
8	CLOSED SESSION ITEMS			
	8.1	MEDICAL STAFF CREDENTIALS – GOVT CODE 54962 STAFF STATUS CHANGE 1. GILDA REED, LCSW TO INACTIVE 2. YELENA USMANOVA, MD TO INACTIVE 3. TOM WATSON, MD – ADD HOSPICE & PALLATIVE CARE PRIVILEGES 4. HEATHER CORR, MD – ADD HOSPITALIST PRIVILEGES AHP APPOINTMENT 1. BENJAMIN WEAVER, CRNA MEDICAL STAFF APPOINTMENT 1. CHRISTOPHER CAMPOS, DO (UCD) NEUROLOGY		Action Item 5 min.

		MEDICAL STAFF REAPPOINTMENT 1. EDWARD RICHERT, MD 2. ALIREZA ABDOLMOHAMMADI, MD WILLIAM DYKES, MD		
9	RECONVENE OPEN SESSION			
10	ADJOURNMENT: Next Regular Meeting – January 24, 2024			

Agenda Posted 01/17/2024

Chief Executive Officer
Chris Bjornberg



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

Board of Directors
Quality Committee
Minutes

December 13, 2023 @ 1:00 PM
Microsoft Teams Meeting

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: Board Chair Tom Guyn, M.D. called the meeting to order at 1:03 pm on the above date.		
	BOARD MEMBERS PRESENT:		STAFF PRESENT:
	Tom Guyn, MD., Secretary Les Cufaude, Director		Chris Bjornberg, CEO Jack Hathaway, Director of Quality Ryan Harris, COO Jessica DeCoito, Board Clerk
	Excused ABSENT:		
2	CALL FOR REQUEST FROM THE AUDIENCE – PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS		
	None		
3	APPROVAL OF THE MINUTES		
	3.1	Regular Meeting – October 18, 2023	Hathaway, Bjornberg Approved by All
4	HOSPITAL QUALITY COMMITTEE REPORT: Faxing issue within the facility – this will be followed up for every department. This information will then have to be scanned into the patient's chart/account. Faxing is an aging use of information transfer and looking at better modes of transfer will be researched.		
5	DIRECTOR OF QUALITY: Currently working through an exit survey with CDPH on reported issues for concerns in the Burney Annex. After CDPH was onsite last week with the reported issues with CDiff, Covid and Scabies, a tag was received to apply a plan of corrections to with regards to infection control. A Plan was submitted on Friday and accepted. Our MMHD team has been working hard to apply this plan of corrections with priorities on hand hygiene and proper cleaning in infected spaces. We will be putting a focus on proper hand hygiene for all hospital staff. eQuality checks are happening in a realistic timeframe with real time data. Cerner also gives us the real data to see how long it takes for our patients to go from door to provider, and other measures that matter to patient satisfaction and quality of services provided.		
6	OTHER INFORMATION/ANNOUNCEMENTS: None		
7	ADJOURNMENT: at 1:31 pm Next Meeting is January 24, 2024 at 1:00 pm		

**MAYERS MEMORIAL HEALTHCARE DISTRICT
MEDICAL STAFF QUALITY COMMITTEE
MEETING**

DATE January 9 - TIME 10:00 AM - 12:30 FRM Board Room & Teams

MINUTES

In Attendance:

Alex Johnson	Amy Parker	Bridget Bernier
Cassandra LaFave	Danielle Olson	Daryl Schneider
Harold Swartz	Jack Hathaway	Jeff Miles
Jennifer Taylor	Joey Marchy	
Keith Earnest	Kevin Davie	Kimberly Westlund
Kristi Shultz	Leanne Melang	Libby Mee
Lori Gibbons	Marinda May	Ryan Harris
Sherry Yochum	Sondra Camacho	Sophia Rosal
Steven Bevier	Susan Garcia	Theresa Overton
Travis Lakey	Valerie Lakey	Pam Sweet (Scribe)

SUBJECT	DISCUSSION	ACTION
I CALL TO ORDER	The meeting was called to order at 10:05 AM	

II NEW BUSINESS	<p>PLEASE fix folders in Teams that will correlate with the month of the meeting that is being held. (ex: Jan. 9th mtg = January 2024) Please update the calendar invite to have the same Teams meeting information. Create the first one – copy it and paste into the other meeting invites so that it’s one Teams meeting and no need for individual Teams meeting invites.</p> <p>Yasmine is our Data Analyst – she will assist you with your data but not do the work for you. Jack and Travis to work on a plan to get Yasmine up to speed with Cerner reporting to help all team members in Cerner, extract the data they need.</p> <p>PUBLIC RELATIONS, HR, QUALITY & SAFETY PR – Val Great traction on the website from May to December. Want to look at the heat map of traffic from social media to website.</p>	<p>Val to set up a meeting with Ryan and Jack to sit down in the next week or two to get a better action plan on what we need to do for QIP measures for the clinic.</p> <p>Val to track social media posts on what type they were and for what dept.</p> <p>Libby to present the data on a fiscal year view rather than calendar view.</p>
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HR - Libby

Libby will be reviewing the trends of term reasons. Interested to see the impact from the Employee Engagement Survey. Workman's Comp claims must include Covid cases which has caused this to be our biggest year of claims thus far.

IC – Cassandra

Trends have shown that the falls occurred, were also with patients that had infections. Most likely related to the trifecta of issues we saw in Burney recently.

Survey results should be shared with staff and posted for public to see that we are taking hand hygiene measures very seriously and consistently monitoring it.

Safety – Dana

Still need to identify the measures and metrics that safety should be monitoring, analyzing and presenting. Workplace Violence, Training on Safety & Emergency Preparedness and Safe Patient Handling program for monthly reporting.

Quarterly = Security

Utilization Review - Jenna

OPERATIONS

Telemedicine – Amanda

Clinic – Kimberly

Provider Standards show what they saw versus what their time slots allowed but also take into account the meeting times, administrative task time, etc. Will start tracking the flu declination reports and numbers.

Housing – Joey

60 stays last month with \$100/night saved = \$12,000 saved in the month of December.

Environmental Services - Sherry

Trends from October to December that we are doing better in damaged linen coming into the laundry facility.

Dietary – Jennifer/Susan

Burney Reports -

Sicknesses were up at the end of December, including a positive Covid Case.

Cassandra will conduct an internal survey with staff about hand hygiene and then be able to identify the specific needs our team requires to meet the necessary hand hygiene requirements. CEO tasked CNO and DON SNF to review automatic hand hygiene systems that take out the human error factor.

Dana to email Pam & Jack to set up a meeting to go over measures and metrics identified in this meeting.

Jack wants to see data on the tray temps taken for both FR and Burney. Susan to share those forms used for October-December to track tray temps and times with Jack and Yasmine, so that they may be built into excel. Add in tray line start time and temp to the form for going forward.

Maintenance - Alex
HVAC cost was up in December for necessary repairs and maintenance.

IT - Jeff
Password audit showed that no new individuals have been on the failed password requirements list. 2 are travelers and 7 are in house who may not be active employees required to log in each day.

FINANCE

Patient Access – Amy
Steady improvement on admission process
Purchasing – Rachel
Tracking expiration dates hasn't be easy.

HIM & Business Office
Coding errors continue to happen and we need to address those, specifically in the clinic.

Discharge Not Final Billed – will be tracking this after an issue with Experian not sending files back. Files are coming over now.

NURSING

OP Med - Michelle

SNF - Cassandra
Add Restorative Modality to tracking board. Skin issues were at 11 for the month. Falls were at 15 for the month. Fall trends show that they occurred with those residents that were in isolation for infections. Some cases show alarm failure. Auditing of medication administering is taking place 24 hrs./day.

Activities – Sondra
On PTO – will be rebuilding the format of how the data will be organized

Social Services – Marinda/Steven
Two grievances in December.

Sherry and Bridget to work together on new set up to separate the linen coming in from the Ambulances.

Kimberly to look at how we can track the new patient numbers and those new Partnership lives.

Jack will send a sample survey for patients to use for patients input on portal use.

Alex to add in the HVAC temps in patient/resident rooms for tracking.

A Cerner Health Check needs to happen with all parties to help make forward progress Coding, Billing, workflows, etc.

Jack to work with Rachel on process improvements in the department to help get the department where it needs to be.

Jack, Moriah and Bridget to meet to talk about ED measures and metrics to track for 2024.

Acute – Moriah
Not able to get RL6 data that is needed.

Ambulance – Gonzalo

Clinical Education – Brigid

ED - Bridget

CLINICAL

Lab - Sophia
On PTO

Physical Rehab - Daryl
Auditing charts for missing documentation and charges. 12 total notes need to be made on patient encounters from this audit. Continue to have faxing issues out of Cerner, among other issues.

Retail Pharmacy - Kristi
Medication errors: 2 in November and 3 in December. Record day yesterday with 309 filled prescriptions and 61 to fill at the end of the day.

Respiratory - David
On PTO

Pharmacy - Keith
Antipsychotics score did not make sense with what was pulled. Our system spit out incorrect figures. December is really at 7.5% but still under the national benchmark. Turnaround Times have gone up and concerns are going to be addressed with Cerner.

Radiology - Harold
Provided data on Exposure Index for X-Ray. Other measures can be tracked for EComms.

Hospice – Lindsey
Will work with Pam on QAPIs – we are not getting a lot back from families.

CEO to get some oversight on Shasta County for elder abuse claims and processing.

Keith to address turn around times with Cerner.

Harold will be tracking CT dose alerts and rejection rates. Not able to pull that as of now.

**III
ADJOURNMENT**

The meeting was adjourned at

Committee Chair

Date

DRAFT