Chief Executive Officer Ryan Harris



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

Board of Directors **Regular Meeting Minutes** January 29, 2025 @ 1:00 PM Mayers Memorial Healthcare District Burney Board room 20647 Commerce Way Burney, CA 96013

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

CALL MEETING TO ORDER: Jeanne Utterback called the regular meeting to order at 1:00 PM on the above date.

BOARD MEMBERS PRESENT: Abe Hathaway, President Jeanne Utterback, Vice President Tami Humphry, Treasurer Lester Cufaude, Director ABSENT: Jim Ferguson, Director STAFF PRESENT: Ryan Harris, CEO Travis Lakey, CFO Valerie Lakey, CFO Libby Mee, CHRO Theresa Overton, CNO Jack Hathaway, Director of Quality Jessica DeCoito, Director of Operations Ashley Nelson, Board Clerk Dana Hauge, Director of Safety & Security Jeff Miles, IT Manager Alex Johnson, Maintenance Manager Kristen Stephenson, Keith Earnest, CCO

2	CALL	CALL FOR REQUEST FROM THE AUDIENCE - PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS: NONE.							
3	APPR	APPROVAL OF MINUTES							
	3.1	A motion made and carried; Board of Directors accepted the minutes of December 4, 2024.	Cufaude, Hathaway	Approved by All					
4	DEPA	EPARTMENT/OPERATIONS REPORTS/RECOGNITIONS							
	4.1	Resolution 2024.16- December 2024 Employee of the Month: Erica Baur, RHC	Humphry, Hathaway	Approved by All					
	4.2	Dana submitted her report. She reiterated the culture of safety and security being integrated into the MMHD culture.							
	4.3								
	4.4	Facilities and Engineering:							

Alex submitted his report.

4.5 Infection Control:

Kristen submitted her report. Kristen the Board that the staff will be holding a February hand hygiene event to encourage "foaming in and out" of patient rooms- including a competition between depts. The overall includes changing the culture, but the overall policy as well. She also confirmed that the UV light being requested is not enough to cover the entire district, but they are starting with 1.

5	BOARD COMMITTEES								
	5.1	Finance	Committee						
		5.1.1	Committee Report: Tami Humphry reported that the Nov and Dec 2024 financials were approved. The overall costs have increased 1.1% and Registry costs have decreased by 806k. Then IT and Nurse Call system quotes are being proposed to the full board. 296 days of cash on hand. Dec AR days are down by 1 point.						
		5.1.2	November 2024 Financial Review	Cufaude,	Approved by				
			Motion moved, seconded and approved.	Humphry	A				
		5.1.3	December 2024 Financial Review	Humphry,	Approved b				
			Motion moved, seconded and approved.	Hathaway	A				
	5.2	² Quality Committee							
			January Quality Meeting Committee Report:						
		5.2.1	Les Cufaude reported that Jack and Dr. Magno met regarding hand hygiene. M the W.H.O and it was discussed which entity (CDC) MMHD will be following goi Jack explained the medication error rate in SNF and the changes that Arnese- ir into place to lower this rate, including looking at the error rate daily instead of a Jack explained that he is pursuing a way to gauge our achievement value of QIF between meeting 2 versus 1 quality measures- PY8 will be attested in March 20 met the measures of PY7 by June 2025.	ng forward. hterim SNF Dire monthly. ?. He explained	ector- have put the difference				
6	NEW	NEW BUSINESS							
	6.1	Travis r ticket. Travis e Travis, I Jessica tickets,	Ticketing Process: eported that it has improved, average time is 38 days until the closing of a xplained the ticketing process to the board. .ibby and Ryan are in the process of implementation refunds. and Holly in IT are creating a system for depts to submit their own Cerner instead of having to go through IT. ency is reviewing the Revenue Cycle.						
	6.2	Theresa CDPH is a place The top	rGuard Door System for SNF quote: a reported that it is a safety system for all of the exit doors in the Burney facility. also requiring this update. The plan of corrections includes a plan for a putting in system. ic is tabled until next month to include the Westcall system quote- including prs- is explored.						
	6.3	IT licens A few e	ses quote: nd of life systems have expired. ard approved the GPO pricing of \$158,702.	Humphry, Cufaude	Approved by All				
	6.4	Nurse C Jessica installed dept. She will	Call System quotes: explained that the Fall River system was installed in the 1970's and Burney's was d in the 1990's. This specific nurse call system has already been put in the Acute also look into the GPO price quote. er quote is \$180,000 and Burney quote is \$239,000.	Cufuade, Hathaway	Approved by All				

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The Board approved both quotes. 6.5 Updated MMHD Staffing Plan: Ryan explained that the new staffing plans highlights all positions, including openings in each department. This is a living document and will be updated regarding openings. Libby explained that status' (FT,PT, Per diem) of each employee will be added to the staff, as well as contracted staff. Policies and Procedures: 6.6 Alternative Life Safety Measures Cufaude, Approved by Alternative Life Safety Measures Assessment Tool Humphry All **Master Staffing Plan Patient Medication Profile** Multi Drug Resistant Organism 7 **ADMINISTRATIVE REPORTS** 7.1 Chief's Reports: written reports provided in packet 7.1.1 DOO: Jessica submitted her report. Her update includes Aspen Street and Burney Fire District will be meeting on Friday morning. A site walkthrough will occur on Monday, regarding the most recent proposals for MMHD's project management firm. Solar panel pole digging will begin February 12th, regardless of the weather. There is an issue with the placement of the panels and making sure they do not obstruct the view of the Bluff. She also explained that each Chief owns their own binders for ACHC- 60 in total- for them to complete and then present to ACHC upon the survey date. She confirmed that Phase 3 in the TCCN building has been completed, and it is being confirmed before it is submitted to the county. The building code aspects were discussed between Ryan and the Board and the Board agreed that bringing all entities to the table is a proactive solution moving forward. 7.1.2 CFO: Travis explained that the USDA pre application is complete and he is awaiting their response. There are a couple items left on the Feasibility Study- projecting 5 years out. The audit will hopefully be presented in the February meeting. 7.1.3 CHRO: Libby submitted her report. She explained that "active employees" are the employees that we have interacted with in the past year, and "current" means employees that are currently employed at MMHD. She also confirmed that MMHD currently has 18 employees over 65 years of age. 7.1.4 CPRO: Val submitted her report. She explained that the Denim and Diamonds Gala was a huge success and the community member that won the car has stated they will now be a life-long donor to the Mayers Foundation. She explained that Laura, MMHD's grant writer, attended a 9-week class in grants regarding Rural Healthcare. Val has also discovered a new website that will assist with grants available to our district. 7.1.5 CCO: Keith submitted his report. Abe asked Keith about progress regarding prescription labels in the Retail Pharmacy- Kristi is working with our software vendor to access braille labels that can be readily accessible in the Retail Pharmacy. He explained the IV fluid shortage is positively progressing, however the fluids with potassium included are still lacking in availability. Mercy hospital in Redding has been replacing IV fluids that they have borrowed to MMHD- a direct result of the collaboration MMHD had with Mercy during the pandemic. The FUJI systems will integrate with Cerner and other entities in real time. He also explained with the Quantiferon system is- a state-of-the-art TB system that will benefit our staff compliance and members of the community. 7.1.6 CNO: Theresa submitted her report. No memory care bed are available in the Burney facility. The staff meet-andgreet with families have been successful in filling SNF beds in both Fall River and Burney. MMHD's Clinical

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Educator, Brigid Doyle, is retiring- resulting in a slight change to the job description going forward as an educator for all of the district, instead of just clinical.

An offer letter for a SNF DON candidate is out and Theresa is awaiting a response. She has extended the interim SNF DON to help the new perm SNF DON acclimate.

She explained that the CNA program waiver has been accepted and the team will now determine the steps that needs to be taken to start up the program again- Fall 2025 is the timeline goal of the restarting program. She explained that a policy is being revised so that our staff RN's can attend EMS staff on transfers needed.

7.1.7

CEO:.

Ryan submitted his report. A change includes the FRJUSD Superintendent, Mr. Nugent, is collaborating with MMHD regarding reinstating high school ROP programs- he is meeting with contractors regarding residential properties for educators. He is also interested in building additional housing on the MMHD Lodge property. Ryan is also collaborating with Pit River Health regarding Mental Health services- including talk therapy with the SNF residents. Modoc currently offers this service to their residents so we will mirror their model. He highlighted and thanked various depts.

MRI services are being resumed- they had previously ended in 2014. He will be approaching 2 local congressmen regarding potential monetary donations to the cause.

He highlighted the most recent Strategic Planning meeting- a mid-year review was completed due to readjustment and pivoting of goals. He explained in the "Quality of Service" goal adjustment includes the need for technology to assist in meeting the 80% compliance goal, however, is it very expensive. If the Board would like to see proposals Ryan can present them but he feels reaching 60% compliance with infection prevention is more realistic with the help of the IP staff.

Les proposed the idea of monetary incentives to staff, in lieu of dept lunches. Ryan explained the pros and cons of this suggestion.

Ryan proposed a revision to the Smart Goal in the Strategic Plan itself.

He proposed a revision to the Growth Goal from "overall 5% growth" to "dept specific" growth, due to the varying sizes in depts.

He proposed a revision to the Communication Goal, including patient surveys specific to the Clinic regarding the referral process and workflow process for Clinic staff.

The board approved Ryan to present the discussed revisions to the next regular board meeting.

8 OTHER INFORMATION/ANNOUNCEMENTS

Board Member Message: Ryan's highlights +

8.1 EOM, thanking volunteers at the Thrift Store, thank the gala donors/volunteers/ community members, thank donors of the car, restarting CNA program, stay tuned on MRI services and collaboration with agencies

Board Education:

Tami, Ryan and Jeanne agreed to be on the Ad Hoc committee regarding Robert's Rules of Order and the conditions of the Brown Act- and putting a policy in place for the future. Ashley will get this information to the Ad Hoc committee

8.2 members.

The Board discussed chapters 1-5 in the Board book, "52 ways to be a better board"- including the Mission, Vision and Values of MMHD. Ashley will update the Mission on the Board documents- including the agenda and minutes. Jeanne assigned the Board chapters 6-10 of the book for next meeting.

9 MOVE INTO CLOSED SESSION: 3:50 pm

Hearing (Health and Safety Code §32155) – Medical Staff Credentials

MEDICAL STAFF REAPPOINTMENT

- 1. David Panossian, MD (Pulmonary)
- 2. Jack Lin, MD (UCD)
 - 3. Reena Nanjireddy, MD (UCD)
 - 4. Alan Yee, DO (UCD)
 - 5. Trinh Truong, MD (UCD)
 - 6. Daphney Say, MD (UCD)
 - 7. Maheen Hassan, MD (UCD)
 - 8. Kelly Haas, MD (UCD)

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9. Arthur DeLorimier, MD (UCD) 10. Daniel Kirkham, MD (TCR)

MEDICAL STAFF APPOINTMENT

1. Lindsay Frye, DO 2. Hossein Mousavi, MD (UCD) 3. Sandy Lee, DO (T2U) 4. Howard Fellows, MD (Mercy Oncology) 5. Jorge Perez-Cardona, MD (Mercy Oncology) 6. Kyle Greene, MD (Mercy Oncology) 7. Arun Kalra, MD (Mercy Oncology) 8. Keith Shonnard, MD (TCR) AHP REAPPOINTMENT 1. Thelma Wadsworth, PA (MVHC) 2. Shannon Davidson, CRNA 3. Erica Bauer, PA AHP APPOINTMENT 1. Kevin Metz, CRNA Conference with real property negotiators (§54956.8) 9.2 43514 CA 299. Fall River Mills, CA 96028 9.3 Conference with legal counsel regarding pending litigation (§54956.9) **RECONVENE OPEN SESSION: 4:50 pm** Adjournment: 4:50 pm. Next Meeting is February 19, 2025 in Fall River.

_____, Board of Directors _____, certify that the above is a true and correct I,____ transcript from the minutes of the regular meeting of the Board of Directors of Mayers Memorial Healthcare District

Board Member

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Board Clerk

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