

Chief Executive Officer
Louis Ward, MHA



Board of Directors
Beatriz Vasquez, PhD, President
Abe Hathaway, Vice President
Laura Beyer, Secretary
Allen Albaugh, Treasurer
Jeanne Utterback, Director

Board of Directors
Quality Committee
Minutes

March 13, 2019 - 12:00pm
Boardroom (Fall River Mills)

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 Beatriz Vasquez called the meeting to order at 12:01pm on the above date.

BOARD MEMBERS PRESENT:

Laura Beyer, Secretary
Jeanne Utterback, Director

ABSENT:

OTHERS PRESENT:

Susan Knoch, MVHC

STAFF PRESENT:

Louis Ward, CEO
Jack Hathaway, DOQ
Ryan Harris, DOO
Candy Vculek, CNO
Keith Earnest, CCO
Susan Garcia, Dietary
Alex Johnson, Maintenance
Steve Sweet, Purchasing
JD Phipps, D of ED and Ancillary Services (via phone)
Pam Sweet, 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; committee members accepted the minutes of February 12, 2019 Utterback/Beyer **Approved All**

4 **DEPARTMENT REPORTS**

4.1 Pharmacy

- Report attached
- Pharmaceutical labeling in the ED: Label is compliant with state law. Trial was in February and had spotty compliance. Now doing daily audits and JD is following up with the individuals. Potential impact to patient care is the printed expiration date of the drugs.

4.2 Dietary

- 2 initiatives – Hand washing and Tray accuracy.
- Tray Accuracy: Forms attached. Tray cards are managed with a Kardex.
 - The Tray Card follows the tray from the kitchen to the patient
 - Have discussed switching to an electronic process. We tried 1 system that didn't meet our needs. Don't know if an electronic system would be more efficient.

4.3 Maintenance

- Report attached
- Staffing is in focus
- Did a good job of involving the residents in colors and decoration of their spaces

4.4 Personnel

- Report attached
- A concern is that applicants were not getting any response to their applications. Now, every applicant gets some sort of contact

- Working on building a manager orientation program
- Travelers and Orientation:
 - 13 week travelers are oriented just like employees.
 - 1-time drop in travelers: Working with schedulers to orient.
- Doing pre-assessments on all new staff to determine training needs and learning styles
- Manager Orientation will be a formal process with more 1 on 1 training. Now working to assess our manager's current knowledge.

4.5 Purchasing

- Report attached
- This year, we issued more than 1,600 purchase orders with over 7000 lines.
- Have streamlined staffing from 7 people to 3 over the last 10 years

5 QUARTERLY REPORTS

5.1 Blood Transfusion

- Report attached
- Quarterly reporting is required by State
 - Blood transfusions are risky and getting more so. The standard keeps tightening up and the state wants to make sure we are monitoring

Compliance

- Report attached

CMS Core Measures

- Report attached
- HCAHPS puts us at 8th in the state inpatient satisfaction and 2nd in cleanliness, but we have a hard time helping patients help themselves after they go home.
- Premier pulls real time data from our EHR and reports to CMS. Have 1/3 of core measures met.

6 STANDING MONTHLY REPORTS

6.1 Quality/Performance Improvement:

- RL6 will greatly enhance our Quality Review reporting

6.2 PRIME:

- Reporting is due the 31st of March. It is going well. Expect to have the report submitted before it is due.

6.3 SNF Events/Survey:

- Shelley is at Director of Nursing training as part of our succession planning
- An interface between the Lab computer system and PCC has been purchased. It will resolve communication problems between the 2 systems. Should be installed in the next few months.
- Fire/Life/Safety Inspection discovered problem with a couple of doors blocked open by bedside tables. Relias training on this subject was distributed to all staff. Louis gave a short demonstration of the Relias training app.

6.4 Infection Control:

- Coleen is working with a consultant (Margaret) to learn the programs. Margaret has helped her build a program and tracking and reporting. We now meet state requirements. Margaret is still available as needed.
- SNF: performing McGeer Criteria on all antibiotics. That means we're not treating infections that don't exist.
 - Tracking monthly. Now at 50% compliance, but improving. Need to incorporate as part of the culture.

7 ADMINISTRATIVE REPORT:

- Mental Health: We are in the process of applying for a grant. It will be a collaboration with the school district.
 - Plan is to provide free mental health services to students via telemedicine
 - \$200,000 per year for 3 years
- Employee meetings were very successful. About 90 people attended
- Management meetings were also held
- See attached results of Manager's quiz. We have gotten a good idea of what trainings are needed. For instance, Workplace Violence Prevention is an obvious need.
- Have hired 3 nurses and an NP. We have offers out to 3 additional nurses
- Community Meetings: Have spoken to Hat Creek Fire and Rotary about what's happening at the hospital. Scheduled to talk at McArthur Lions club next week.

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.

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- SEMSA: in the last stages of contract negotiations
 - Uniforms: All support departments will be in uniforms by July 1st. Maintenance is already in uniforms.
 - Ryan is working on a policy to define how and when replacement uniforms are supplied
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8 **NEW BUSINESS:** None

9 **OTHER INFORMATION/ANNOUNCEMENTS:** None

10 **ANNOUNCEMENT OF CLOSED SESSION:**

10.1 **STAFF STATUS CHANGE**

1. Rhett Wiggen, CRNA to Inactive

AHP APPOINTMENT

1. Kirk Lott, CRNA
2. Kenneth Childers, CRNA
3. Erica Haedrich, PA
4. Thomas Peterson, FNP

MEDICAL STAFF APPOINTMENT

1. Robert Adams, DO – Emergency Medicine
2. Aditi Bhaduri, MD – Endocrinology, Telemedicine
3. Thomas Kurian, MD – Neurology, Telemedicine
4. Tommy Saborido, MD – Emergency Medicine
5. Baharak Bagheri, MD – Radiology, Telemedicine
6. Frank Snyder, MD – Radiology, Telemedicine
7. Shree Shah, MD – Radiology, Telemedicine

MEDICAL STAFF REAPPOINTMENT

Michael Dillon – Emergency Medicine

A motion/second carried; committee members approved all credentials

Beyer/Utterback

Approved All
Credentials

11 **RECONVENE OPEN SESSION:** Reported closed session action

12 **ADJOURNMENT:** 2:20 pm - Next Regular Meeting – April 10, 2019 (Fall River Mills)
