



Mayers Memorial Hospital District

Chief Executive Officer

Matthew Rees, MBA

Board of Directors

Allen Albaugh, President
 Brenda Brubaker, Vice President
 Abe Hathaway, Treasurer
 Michael D. Kerns, Secretary
 Art Whitney, Director

BOARD of DIRECTORS
MEETING AGENDA

September 24, 2014, 1:00 PM
 Board Room (Fall River Mills)

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.

1	CALL MEETING TO ORDER – Allen Albaugh, President	
2	CALL FOR REQUEST FROM THE AUDIENCE: PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS: 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 (M-W), 43563 Highway 299 East, Fall River Mills, or in the Board Room). 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.	
3	APPROVAL OF MINUTES: 3.1 Regular Meetings – August 27, 2014 (ATTACHMENT A) 3.2 Special Meeting – September 10, 2014 (Attachment B).....	ACTION ITEM ACTION ITEM
4	OPERATIONS ► C3 Report (CEO, CNO, CCO) FACILITIES MANAGEMENT, SUPPORT SERVICES, COMPLIANCE(ATTACHMENT C) WRITTEN REPORT PROVIDED – ADDITIONAL COMMENTS AS NEED VERBALLY	Information
5	REPORTS: Hospice , Earnest– Introduction of new Manager, Mary Ranquist, RN	Information
6	BOARD COMMITTEES: 6.1 Finance Committee – Chair Allen Albaugh 6.1.1 Committee Meeting Report 6.1.2 August 2014 Financial review and acceptance of financials (<i>dispersed separately</i>)..... 6.1.3 USDA Loan Update..... 6.1.4 Health Insurance Plan Recommendation..... 6.2 Strategic Planning Committee – Chair Abe Hathaway 6.2.1 Committee Meeting Report 6.3 Quality Committee – Chair Brenda Brubaker 6.3.1 Committee Meeting Report	Information ACTION ITEM Information ACTION ITEM
7	NEW BUSINESS 7.1 Information regarding appointment of trustee (Attachment D)..... 7.2 Biennial Review of Conflict of Interest Policy (Attachment E)..... 7.3 Annual Board Bylaws Review - first reading (Sent as PDF).....	Information ACTION ITEM ACTION ITEM

	7.4 Preliminary Report on data backup solutions (Ward, Johnson).....	<i>Information</i>
8	8.1 INFORMATION/REPORTS/BOARD EDUCATION/ANNOUNCEMENTS ▶ Board Education – QHR Webinar 2 nd Tuesdays 2014, 10 a.m. ▶ Board Assessments (will be due in October)	Information/ discussion
9	ANNOUNCEMENT OF CLOSED SESSION: 9.1 Government Code Section 54962 Quality Assurance: Quality Improvement Issues, Medical Staff Report (Dr. Dan Dahle, Chief of Staff) 9.2 Government Code Section 54957: Personnel 9.2.1 CEO Evaluation..... 9.2.1 Finalize CEO Bonus Criteria..... 9.3 Approve minutes of the August 27, 2014 Closed Session minutes.....	<i>ACTION ITEM</i> <i>ACTION ITEM</i> <i>ACTION ITEM</i>
10	RECONVENE OPEN SESSION: REPORT ACTIONS TAKEN DURING CLOSED SESSION	
11	ADJOURNMENT: Next Regular Meeting October 29, 2014 – Burney, CA	

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.

Posted/Distributed: 09/17/14

Date: August 27, 2014
Time: 1:01 P.M.
Location: Mayers Memorial Hospital
Fall River Mills, California

(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: President Allen Albaugh called the regular meeting to order at 1:04 p.m. on the above date with the following present:

Allen Albaugh, President
Brenda Brubaker, Vice President
Mike Kerns, Secretary
Abe Hathaway, Treasurer

Board Members Absent: Art Whitney, Director

Staff Present: Matt Rees, CEO; Keith Earnest, CCO; Valerie Lakey, Board Clerk; Travis Lakey, CFO; Louis Ward, Director of Support Services; Jeanette Rodriguez (for Sherry Wilson)

2. CALL FOR REQUEST FROM AUDIENCE TO SPEAK TO ISSUES OR AGENDA ITEMS: None

3. APPROVAL OF MINUTES – A motion/second (Kerns/Hathaway), and carried, the Board of Directors accepted the minutes for the regular meeting – July 30, 2014.

4. OPERATIONS REPORT:

In addition to the written operations report included in the board packet, the following verbal reports and discussions are summarized below:

► **Matt Rees, CEO:**

- Rees reported that he had a productive meeting with Partnership Health on August 26 – Open House, and then went to dinner with their CFO after. Talked about SNF rates; they were supposed to go from \$259 to \$251 – but now should go up to \$271 – would mean about \$500,000/year increase. We should find out in the next few days; it would have a huge positive financial impact. Partnership has an office in Redding now. They have been paying faster and more than Medi-cal if the claim is clean. There was discussion about across the board increases possibly every quarter – they would address an 1/8 of hospitals – so every 2 years there would be an increase.
- Getting ready for the fair.
- Life and Safety survey didn't go too well. There were audible fire alarms that did not go off in SNF.
- Dr. Syverson has started.
- Talked to people doing the Willows facility. Prevailing wage is not calculated in. With Design/Build – changes come later (change orders increase cost). Waiting to see what USDA comes back with. Haven't heard anything. Boxer's office contacted USDA. Not sure about the budget for the next fiscal year. Albaugh asked about the permits – some will have to be extended. We don't have construction permit from OSHPD yet.
- Lakey and Akin met with MVHC last week regarding surgery scheduling. We get \$70 each time Dr. Syverson sees a patient at MVHC.
- Working on marketing with Canby. Val Lakey set up September 4 for Rees and Akin to go visit the clinic.

► **Keith Earnest, CCO:**

- Complimented the staff under the direction of Sherry Wilson on the evacuation of the Burney Annex
- Brubaker asked who made the decision – Earnest said the Sheriff notified us to evacuate.
- Lab – Tuesday a traveler from Chester started. Trying to recruit permanently.

Another traveler will begin Oct. 1. One CLS is leaving and another will be retiring. Aiming for some Point of Care testing to limit on call people having to come in.

- Imaging – vascular sonographer is leaving. Parker is working with Mercy Mt. Shasta sonographer coming one day per week.
- Telemedicine – staff hours were reduced. Some of the neuro-psychotropic consults will happen via telemedicine.
- Hospice – new Hospice manager, Mary Ranquist. Gail Leonard – Social Worker. Michelle Peterson –is doing quality tasks.

▶ **Sherry Wilson, CNO:** (Jeanette Rodriguez reporting)

- Plan of correction has been submitted
- Any word on the Weed facility closing? Need to check into the situation.

▶ **EMR – Louis Ward, Director of Support Services**

- Fire Life Safety survey was August 13-14, 2014. The surveyor was all business, many items were found. Maintenance is working on the issues that were addressed. There were some documentation issues; some were internal according to policy and some that are with other vendors. A couple of major concerns. 1) Fire Panel 2) Oxygen filling stations do not meet code. Cylinders are being filled onsite; there are a lot of requirements and it would cost a lot to do. There are 2 possible solutions – NorCal or contract back out. 10 days to respond with POC. Rodriguez will help. Working on extension to complete the work.
- Fire watch beginning August 13, 2014. The panel is old – audible alarms are not working consistently. Used some volunteers along with staff for fire watch reporting which initially had to be done every 15 minutes; that has since been changed to every hour. Precision alarms came up to work on the system. We need a whole new panel (New business item 7.1 – see attachment) OSHPD has emergency fire replacement program – Precision can be here September 2. There is an inspector list on the OSHPD site, so Ward will find an inspector. We need to remember there is a possibility there may be other issues found.
- Generator shed, working with Michael Ryan – cost of about \$40,000
- There is water in the well – down about 75 feet. There is no pump. About \$4000 to get it up and functional.
- Albaugh mentioned we need to look for a gardener
- MVHC Collaborative Meeting Sept 8
- PACS go-live Sept 8
- October 1 –Meaningful Use Stage 2 – talk about the patient portal
- Northstate Health Connect HIE – Ward attends a meeting every other Friday

5. REPORTS

5.1 Surgery – Lisa Akin, Surgery Department Manager

- Akin said she is very excited. Dr. Syverson is a pleasure and joy to work with. He is getting his name out there – he is getting more referrals. Very patient oriented. Working with us on supplies. Double volume from last month to this month. Phone calls are made after surgeries and procedures – we are getting great reviews. There is some

equipment from Dr. Syverson – he is donating items to the hospital. He is in Alturas every Friday and every other Thursday. Burney clinic 3 days/month, BV – 1 day, FR 2 days– surgery at MMHD every Tuesday and Wednesday.

- Albaugh – questions about making it profitable - Akin is following up. There is a lot riding on it.
- Dr. Guthrie – did a total knee surgery last week. Akin said we will do 2-3 procedures to see if they are financially feasible. Reps are willing to work with us on supplying implants, etc on a case by case basis. Price cap on implants; which is a benefit to us.
- Will be needing more staffing soon
- Albaugh wants end of year income/expense (December)
- Sharing resources and building bridges with other facilities

5.2 Workers Comp – Travis Lakey, CFO – 2 claims last year, mod rate dropped from 1.41 to 1.17. Total incurred expense \$10,500. Received a \$7000 refund because of over-reserve. Attribute these positive changes to to employee satisfaction, purchase of lifts, staff is happy.

5.3 Safety Quarterly – Louis Ward, Director of Support Services – Will be using the recent evacuation/disaster as a model to plan, outfit disaster trailer, training on ICS and HICS. Safety committee will do class.

6. BOARD COMMITTEES:

6.1 Finance Committee – Chair Allen Albaugh

6.1.1 Committee meeting report – No meeting, but Albaugh sent out “homework.” He sent a 5 year comparison and asked for input from board members. Long Term Debt and fund equity. Lack of physicians. We need to look at trends more often. There is a lack of people to service – We are a BIG fish in a SMALL pond. Trying to provide services to keep us afloat – we are not trending well. Not a very rosy picture looking down the road. Focus on good ambulance/ER/Acute/LTC/Hospice – the rest if we can make money at it. Kerns said we need services for geriatric population. Doesn't think we need a huge facility that we cannot fund. We have a facility now that we are almost debt free on. The clinic keeps coming up – don't think we can be dependent on MVHC. We have to control primary care.

Hathaway thinks they need to meet with MVHC full board again.

Everything is moving toward population health. Working with wellness program, etc.

Possibility of a management contract with MVHC – Rees directed to set-up a joint meeting (Val Lakey will email a list of MVHC board to our board)

We have spent \$2.8 million on new building so far. Need to look at legalities if we decide to change plans

6.1.2 July 2014 Financial (M/S/C) (Kerns/Hathaway)

6.1.3 Quarterly Financial review (M/S/C) (Kerns/Hathaway)

6.1.4 USDA – see above

6.2 Strategic Planning Committee – Chair Abe Hathaway

6.2.1 Committee Meeting Report – No meeting in August

6.3 Quality Committee – Chair Brenda Brubaker

6.3.1 Committee Meeting Report – review of minute highlights: Volunteer Services software, close to buying new ambulance. Activities – POC Alzheimer’s activities. No Med errors in survey. Kathy Duncan’s final report. Chris Hall’s lab report was referenced.

6.3.2 Approval of HIPPA Policy (M/S/C) (Kerns/Brubaker) All

7. NEW BUSINESS

7.1 FIRE PANEL APPROVAL (Exhibit A)(M/S/C) As presented by Louis Ward (Hathaway, Kerns)

8. INFORMATION/BOARD EDUCATION/ANNOUNCEMENTS

▶ Board Education – QHR Webinar 2nd Tuesday each month, 10 a.m. PST

9. ANNOUNCEMENT OF CLOSED SESSION: 3:28 pm

9.1 Government Code Section 54962

Quality Assurance: Quality Improvement Issues, Medical Staff Report (Dr. Dan Dahle, Chief of Staff)

9.2 Government Code Section 54957: Personnel – CEO Bonus criteria/Evaluation

9.3 Reappointment – Dr. Dan Dahle, MD – pending his board certification renewal (Brubaker/Kerns)

9.4 Approve minutes of the July 30, 2014 Closed Session (Kerns/Hathaway) *Approved (All)*

10. RECONVENE OPEN SESSION: 4:45 PM - REPORT ACTIONS TAKEN DURING CLOSED SESSION

11. ADJOURNMENT: There being no further business, at the hour of 4:45 p.m., President Albaugh declared the meeting adjourned.



August 25, 2014

Mayers Memorial Hospital
43563 Highway 299 East
Fall River Mills , CA 96028

Louis Ward:

Re: Proposal for repairs to existing Fire Alarm Systems

Thank you for allowing Precision Alarm Systems the opportunity to offer our services in regards to the this project. Based upon our discussion and site review, we offer the following bid:

Scope of repairs:

Replacement faulty or obsolescent devices with current technology.

Repair notification circuits where applicable

Utilize all existing wiring and device locations

The following items are included in this bid: Please see attached for complete equipment list

Repair and replacement of main FACP and auxiliary power supplies and batteries

Repair and replacement of all notification devices (chimes)

Repair and replacement of all indicating devices (smoke detectors and manual pull stations)

Wiring and connection of client supplied phone lines for programming connection.

One year warranty on installation.

The following items are not included in this bid:

Modifications of existing wiring platform

Modifications of existing device locations

Additional installation of devices in new locations not covered by current wiring platform.

Repairs to wall areas adjacent to or surrounding current FACP

Lump Sum Bid

\$33,500.00

Thank you for allowing us to bid on this project. If our bid meets your approval please contact me personally.

Thank You

Mike Carpenter

List of Mayers Memorial Hospital

Main Building

Quant.	Descrip.
1	Silent Knight 5820XL Addressable Fire Alarm Control
1	Silent Knight 5895 Power Supply
2	12.0 Amp Hour rechargeable batteries
2	10.0 Amp Hour rechargeable batteries
18	System Sensor CHR Fire Chimes
48	Silent Knight Addressable Photoelectric Smoke Detectors
16	Silent Knight Addressable Manual Pull Stations
1	All necessary conduit, cabling, boxes, fasteners and fittings.

This is a preliminary estimate and intended to comply with all repair parameters, final design may require substitution, deletion or replacement of some devices.

Payment terms as follows:

1st progress payment of \$11,000 due on acceptance of proposal

2nd progress payment of \$11,000 due thirty days (30) after acceptance of proposal

3rd progress payment of \$11,500 due sixty days (60) after acceptance of proposal

Accepted By _____ Date _____

Date: September 10, 2014
Time: 10:00 A.M.
Location: Mayers Memorial Hospital
Fall River Mills, California

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1. CALL MEETING TO ORDER: President Allen Albaugh called the special meeting to order at 10:00 a.m. on the above date with the following present:

Allen Albaugh, President
Brenda Brubaker, Vice President
Mike Kerns, Secretary
Abe Hathaway, Treasurer
Art Whitney, Director

Board Members Absent: none

Staff Present: Matt Rees, CEO; Valerie Lakey, Board Clerk; Louis Ward, Caleb Johnson, Marlene McArthur, Travis Lakey, Keith Earnest, Barb Spalding

2. CALL FOR REQUEST FROM AUDIENCE TO SPEAK TO ISSUES OR AGENDA ITEMS:

No public comments.

3. NEW BUSINESS – USDA LOAN APPLICATION

Review of USDA Proposal dated August 29, 2014. T. Lakey went over proposed costs and what they entail.

Source of funds –

- CDBG money is not guaranteed.
- They estimated high on tax revenue.

A comparison of the 8/29/14 USDA proposal to what MMHD turned in to USDA in July 2104. Before reviewing the comparison Rees noted that the USDA Loan is to help rural communities.

Janice Waddell from the USDA Rural Development Office in Davis spoke with T. Lakey on Friday, September 5, 2014 and said the state office would forward whatever proposal the MMHD Board approves on to the federal office; but the state would not necessarily endorse it.

Rees said he spoke with Doug LaMalfa's office today – they are waiting for the proposal to get to federal office and they will offer their support. We have also received support from Senator Boxer's office.

There was much discussion before a motion was presented.

- Submit proposal as amended "Reduce AB 8 Funds so that the district taxes will be covering 40% of proposed project." **Exhibit A**

Motion: Revised Proposal September 8, 2014 (Kerns/Hathaway) Approved unanimous.

4. ADJOURNMENT: There being no further business, at the hour of 11:28 am., President Albaugh declared the meeting adjourned.

Exhibit A



Mayers Memorial Hospital District

Chief Executive Officer

Matthew Rees, MBA

Janice Waddell
Community Programs Director
United States Department of Agriculture
Rural Development
430 G St. #4169
Davis, CA 95616-4169

Board of Directors
Allen Albaugh, President
Brenda Brubaker, Vice President
Michael D. Kerns, Secretary
Abe Hathaway, Treasurer
Art Whitney, Director

September 10, 2014

Janice,

At the September 10, 2014 Special Board Meeting of the Mayers Memorial Hospital District Board of Directors, a motion to approve the USDA Loan proposal for the funding of the facilities construction project was approved.

Motion – Trustee Michael Kerns

Second – Trustee Abe Hathaway

Passed – all ayes (Albaugh, Brubaker, Kerns, Hathaway, Whitney)

As recorded by the Board Clerk, Valerie Lakey.

Approved proposal is attached.

Thank you,

Matt Rees
CEO, MBA

Attachments: 2014.09.10 Special Board Meeting Agenda
Approved Proposal for funding to USDA

Mayers Memorial Hospital District
Board Approved Proposal

Revised Project Costs

<u>PROJECT COSTS</u>	<u>Revised</u>	
Admin/Legal	\$209,400	
Bond Counsel	\$104,100	
Moving Expenses	\$25,000	
Architectural Fees	\$2,295,000	
Other Arch Fees	\$1,392,000	
Project Inspection	\$1,005,000	
Construction Mgmt	\$3,904,775	
Construction	\$26,464,225	
Equipment	\$2,770,000	
Refinance Debt		\$10,222,950
2011 Series A GO	\$5,605,100	
Series 2007 Rev	\$1,435,661	
2011 COP	\$1,880,000	
EMR	\$1,302,189	
Interim Loan Interest	\$1,841,800	
Contingencies	\$2,928,000	
<u>Total Project Costs</u>	<u>\$53,162,250</u>	

Source of Funds

Borrower Contribution	\$6,000,000	11%
Series A GO (Refi)	\$5,642,300	11%
Series A Rev (Refi)	\$4,664,750	9%
Series B GO	\$3,891,813	7%
Series B Rev	\$32,963,387	
	<u>\$53,162,250</u>	

Tax Secured USDA Loans

Series A GO	\$5,642,300			
Series B GO	\$3,891,813			
Series A Rev AB 8	\$4,664,750			
Series B Rev AB 8	<u>\$7,251,930</u>			
	\$21,450,794	40%	45%	40%
Borrower Contribution	\$6,000,000	11%		11%
Revenue Secured USDA Loans - Series B	<u>\$25,684,352</u>	48%	54%	
	\$53,135,145	100%	100%	52%



Mayers Memorial Hospital

Operations Report August 2014

Statistics	August YTD FY15 <i>(current)</i>	August YTD FY14 <i>(prior)</i>	August Budget YTD FY15
Surgeries <i>(including C-sections)</i>			
➤ Inpatient	6	3	3
➤ Outpatient	8	8	6
Procedures <i>(surgery suite)</i>	17	19	6
Inpatient <i>(Acute/OB/Swing) Days</i>	245	358	326
Emergency Room	704	718	710
Skilled Nursing Days	4572	4566	4364
OP Visits <i>(OP/Lab/X-ray)</i>	2446	2767	2834
Hospice Patient Days	220	407	150
PT	1915	1698	1692
Ambulance Runs	66	58	68

Operations District-Wide

Matthew Rees, Chief Executive Officer

Administration/CEO activities during the past month.

- Attended the Inter-Mountain Fair and promoted our facility to surrounding areas.
- Went to Canby with Lisa Akin to discuss surgery and referrals with the Canby Clinic staff.
- MVHC Collaborative meeting--continuing to work with Mountain Valley's on integration of systems and recruitment of physicians.
- Met with Margaret Truan to discuss grant funds
- Met with a representative from American express. Discussed ways to stretch our cash flow, line of credit, and receiving money back on large purchases
- Met with Michael Ryan regarding the generator building and our building project
- We went into External Disaster under direction of Incident Commander Sherry Wilson. We received 6 patients from Shasta View Nursing Center in Weed, CA due to the Boles fire. I want to thank the staff for the great work that they did. Everyone worked well as a team.
- OP retreat last week to discuss cost savings, etc.
- Dr. Syverson was introduced to the Burney Chamber. He has been a great asset to our facility.

- USDA application was resubmitted after the special board meeting. We are continuing to work with Legislative office. With their assistance we are hoping for approval of this loan.
- Attended the AHA RPB89 meeting in Seattle.
- Continued revenue cycle team meetings.

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Critical Access Hospital

Keith Earnest, Pharm.D., Chief Clinical Officer

Laboratory

- A new registry CLS, Joe Earl has started in the lab. A second registry CLS is scheduled to start in October.
- Dr Julia Mooney has stepped down from being the laboratory director. Dr Morris (one of her partners) will be assuming the directorship role November 1st.
- We are in the research phase of implementing some point of care laboratory tests in the ER to prevent as many late night call backs of CLS staff. Surveys have gone out to the medical staff inquiring as to which tests would be most utilized.

Imaging

- The PACS install is continuing.
 - Phase 1—onsite server with access and shortcuts—Complete
 - Phase 2—Full integration with McKesson’s Paragon started September 8th.
 - Phase 3—Intergration with MVHC information system--pending
- Code Blue drills in the CT trainer are ongoing. Much has been learned from these drills. The CT trailer is now stocked with an AED and a clock.

Pharmacy

- Electronic Temperature Monitoring
 - The temperature monitoring system is live in all medication storage refrigerators except in the OR.
 - Temperature monitoring of controlled room temperature is also in place in the pharmacy.
 - If the temperature is out of range, the system sends a text message to inform the pharmacist and nurse supervisor of the issue so adjustments can be made
- After hours pharmacy
- Remote Solutions® is processing Mayers orders after hours.
- In the future, a pharmacist at Remote Solutions® will be verifying medications removed from the pharmacy after hours as well as examining home medications via remote video.

Telemedicine

- As part of the SNF plan of corrections, Kelly Schnieder is working to arrange neuropsych consults for skilled patients via telemedicine.

Hospice

- Mary Ranquist, RN, and the hospice staff are learning to maximize the computer system to report hospice quality measures electronically. She has been working closely with IT and Shelly
- Hospice Chair-ity Affair fundraiser is October 4, 2014 at the Vet's Hall in Burney. Evalee Nelson is organizing this event for Hospice.

Critical Access Hospital ***Submitted by: Sherry Wilson CNO/Acute***

Obstetrics

- The OB department had 4 deliveries in August, no Elective inductions of labor. Currently revising the Elective Induction Bundle so that no early deliveries occur before 39 weeks of gestation. Also revising the pitocin induction/augmentation bundle to assist with best clinical evidenced based practice regarding use of chemical induction or augmentation of labor. Established concise risk guidelines for MMH regarding OB risk and what we are equipped to manage therein. Attended the BETA Risk Management conference for risk management and assessment in obstetrics and perinatal care and looking forward to opting in and utilizing gnosis as an education tool for OB personnel. OB hemorrhage cart almost completed. Interviewing for L&D RN position. In the process of building Child Birth Preparation Classes to offer our community for MMH. Hearing and Newborn Screenings up to date now.

Emergency Department

August 2014:

Ambulance Calls total:	28
Inter facility transfers:	4
Big Valley Area	6

- 1 new Paramedic and 3 EMTs are through with orientation and ready to help out with transfers, vacation and sick relief.
- Sent Mayers 2 on a Strike Team for the Day Fire where Mayers 2 was threatened to be "RED Tagged" due to a fuel leak (when a piece of equipment is Red Tagged it is almost impossible to get it cleared for return to duty status). Don Chaix convinced Cal-Fire to allow us to replace Mayers 2 with Mayers 1. Mayers 2 was brought back to Double S shell where the fuel lines were inspected and found to be cracked due to age and wear and tear. It was repair and returned to service later that day. Meanwhile Modoc Ambulance sent an ambulance down to help cover our area on a Mutual Aid status while we were out of service.
- Mayers 1 had to be sent to Redding for major repairs (injectors and glow plugs) Broke down while on scene of a major trauma, was towed to Double S but they were unable to do the repairs so it was towed to Redding. We were down to one Ambulance for two days but back up and running with two.

- \$10,000 Grant from National Rotary that will is allocated to go towards a new ambulance!!
- Bob Jehn from our local Burney/Fall River Rotary proposed a fundraising challenge via a pledge system to local group trying to raise an additional \$10-15,000 toward the ambulance as well. Margret Truan, Terry King and Kathy Broadway were asked to attend the August 28th meeting and gave a presentation as to why we are in such need for the ambulance. Just a few days after this Bob reported he has steady pledges rolling in.
- Sherry Wilson, Kathy Broadway, Theresa Overton and Holly Green attended the Beta Risk Management Symposium in Long Beach September 8 & 9th. The ED staff was 100% compliant in completing the Tier One education tracks Two years in a row!!! Due to this we were given 4 free stops for attendees at the conference. We were also presented with another beautiful statue stop by Administration and take a peek!!

Surgery

- August of last year is the first month we were completely without a general surgeon. Budget has some significant changes reflecting this.
- Dr. Syverson scheduled every Tuesday and Wednesday for surgeries. He has performed emergency surgery several times saving the hospital \$ in transport to another facility, increased surgery revenue, and added to the positive patient encounter at MMH.
- Dr. Guthrie performed his first Total Knee Replacement at MMH – we will do 2-3 more and reevaluate if financially feasible to continue.

Infection Control

- Infection Control continues to work closely with CDPH and CDC with the Ebola virus crisis updates and mandates with reporting. Although this is not a major player in the intermountain area, it is required that we read updates and keep abreast of all activity occurring with this disease. Shasta County has had 1 death attributed to West Nile Virus, so precautions are being advised to use DEET, wear long sleeve shirts and pants if outdoors, and limit outdoor activities in dusk and dawn when the mosquitoes are most active.

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***Skilled Nursing Facility – Burney & FRM***  
*Submitted By: Sherry Wilson, RN, CNO*

- Census is at 71 with 6 evacuees.

## **Louis Ward, Director of Support Services**

### **Facilities**

- The Plan of Corrections (POC) was submitted to the California Department of Public Health (CDPH) on September 6<sup>th</sup>. This plan encompasses 43 pages of deficiencies, building code, and corrections.
- I will be reporting on monthly and quarterly intervals to Board Quality on multiple topics including:
  - Fire Drills
  - Safety Reports
  - Fire systems inspections
  - General facility maintenance
  - Burney SNF rooms
- The CDPH has accepted the POC, notified of this on Sept 13<sup>th</sup>
- Filing all OSHPD permits for the Fire Systems in Fall River in accordance with the POC
- Fire Watch will continue until all permits and final inspections are received by CDPH
  - Expected Sept. 30<sup>th</sup>, 2014

### **Information Technology**

- EMR Stage 2 attestation is beginning Oct 1, 2014
  - 1 year reporting period
  - Final testing with State registries for reportable labs and immunizations is underway and expected to be completed by 9/30/14
  - Patient Portal continues to be a consideration as it seems unreasonable for many of our patients to be provided with 2 separate portals (Mayers, MVHC)
    - This continues to be a topic at Mayers/MVHC collaborative meetings.
    - Relay Health has proposed a solution to combine the portals
- Picture Archiving Communications (PACS) is LIVE
  - Working on Links with the Paragon system for Clinicians to access studies without leaving the Paragon environment.
  - Will be moving forward with interface with MVHC. Their administration just signed the contract with their EHR vendor allowing this project to move forward.
- Investigation vendors that will strengthen our backup solutions in times of information disasters.
  - Current workflow does allow for significant risks
  - With the introduction of offsite backup of medical information and data vital to business continuity we could significantly lower risks of critical information loss.
  - I would like to present a solution for the Boards consideration.

### **Dietary**

- With the introduction of electronic charting it is now necessary to provide Dietary access to electronic notes pertaining to diet plans and diet orders.
  - Lani Martin, R.D has been provided with a computer and will be able to access patients remotely.
  - Assessments have been built to meet the requirements of a nutritional risk assessment and likes/dislikes needed on all acute patients within a 48 hour window per policy. With new plan we will be able to get vital diet information within the first 8 hours.

### **Purchasing**

- No new information to report.



### ***Environmental Services***

- Currently short staffed in EVS, currently have Housekeeping position posted for both Fall River and Burney Facilities.

Compliance Report  
Caleb Johnson, Chief Compliance Officer

### ***Revenue Cycle***

- Revenue Cycle Health Report. Rough draft of report has been developed, puts on one page indicators and metrics that will help Committees and Managers assess the overall health of revenue cycle operations. Once complete, there will be an organization-wide report as well as department-level reports, to be distributed monthly.
- OB – Paragon – Revenue Cycle. OB, IT and Revenue Cycle have begun weekly meetings to improve OB utilization of Paragon. High priority items include: supply charge capture; labor & delivery charge review; using Paragon for documentation; and baby naming conventions in Paragon.
- Anesthesia Discount. Rough draft of policy has been written, will need review prior to submission for approval by Finance Committee. It is proposed that a \$250 discount will apply to non-covered anesthesia services provided to colonoscopy patients if the payor has determined it is patient responsibility AND the remaining balance is paid within 30 days from when the patient receives his/her first statement.

### ***Privacy & Security (HIPAA)***

- Security Asset Inventory Database. Questionnaires were sent out to all employees to determine to what extent each employee has direct and/or indirect access to protected health information. Responses will be entered into a database. In the future, database will be utilized by HR, IT and HIPAA staff to ensure only current employees will have physical and/or virtual access to PHI.
- Business Associate Agreements. BAAs were reviewed, updated and sent to Business Associates for signature. To date, 38 contracts have been sent, of which 7 have been signed and returned, 6 have been returned to sender, 3 are in negotiation, and 22 have not elicited a response. Additional attempts at contact will be made in the coming months.
- Disaster Recovery Plan. Currently reviewing and revising our Disaster Recovery Plan; have talked with Tri-Delta Resources, Corp to explore off-site backup and recovery services.

### ***Other***

- PACS – Paragon Integration. Initial testing of order and result messages between PACS and Paragon generally have been successful. Wrinkles surrounding image link functionality, “critical” result status, and automatic result processing in Paragon have been identified and are being ironed out. We are planning on going live with PACS – Paragon interface October 1, 2014.



# SHASTA COUNTY

**Cathy Darling, County Clerk / Registrar of Voters**

Allison Denofrio, Assistant County Clerk / Registrar of Voters

1643 Market St. / PO Box 990880 / Redding, CA 96099-0880 / [www.elections.co.shasta.ca.us](http://www.elections.co.shasta.ca.us)

PHONE: 530-225-5730 \* FAX: 530-225-5454 \* CA RELAY SERVICE: 711 or 800-735-2922

August 28, 2014

Allen Albaugh  
Mayers Memorial Health Care District  
PO Box 459  
Fall River Mills, Ca 96028

RE: Appointments in Lieu of Election for the General Election of November 4, 2014

Dear Allen Albaugh:

Attached is a copy of the Certified List of Qualified Candidates who filed for special district directors and will be appointed in-lieu of election by the Shasta County Board of Supervisors at their September 16, 2014 meeting per Election Code Section 10515.

If your District had no nominees or insufficient nominees for the position(s) available, please send a copy of your board meeting minutes making your appointee recommendations to the Clerk of the Board as soon as possible. The Board of Supervisors must make appointments in-lieu of election at a regular or special meeting held prior to Monday, November 24, 2014 for those appointees to serve as if elected.

Glenda Tracy, the Clerk of the Board of Supervisors, will issue certificates of appointment in lieu of election. If you have any questions, please contact our office at 225-5730 or the Board of Supervisors at 225-5550. Thank you for all of your help with this election.

Sincerely;

A handwritten signature in cursive script, appearing to read "Sarah Reynolds".

Sarah Reynolds  
Clerk/Elections Specialist I

Enclosures

**MAYERS MEMORIAL HOSPITAL DISTRICT**  
**BOARD POLICY AND PROCEDURE**  
**BOARD MEMBER APPOINTMENT PROCESS**

ORIGINATING DATE: 03/98  
EFFECTIVE DATE:  
REVISION DATE: 12/18/07, 3/8/10-BQC  
MANUAL(S): Board, Administration, Medical Staff

Page 1 of 2 plus the following Attachment(s)  
CERTIFICATE OF APPOINTMENT

**POLICY:**

Appointment of board members shall take place in open meetings per the Brown Act and Health Care District Law. The remaining members of the district board shall make the appointment within 60 days after either the date on which the district board is notified of the vacancy or the effective date of the vacancy, whichever is later.

**PROCEDURE:**

The district shall notify the Shasta County Elections office and the Board of Supervisor's Clerk's office of the vacancy no later than 15 days after either the date on which the District board is notified of the vacancy or the effective date of the vacancy, whichever is later.

A "Notice of Vacancy" is prepared and posted in at least three conspicuous places for at least 15 days including information required by Election Code 10515.

A regular or special board meeting is scheduled to conduct interview of all applicants. All interviews will be conducted according to a pre-set list of questions established by Board.

The selection process is as follows:

1. Printed ballots will be distributed to board members. The ballots should be retained (in an envelope, one for each separate vote) in the event of questions or validation is necessary at a later time.
2. Board secretary (or Clerk to the Board) is to collect written ballots. (Note: The purpose of written ballots vs. oral is so that board members do not influence each other.)
3. Board secretary (or Clerk to the Board) reads the votes aloud, stating the board member's name and candidate name.

4. A majority vote of the board (not quorum) confirms one candidate. If vote does not result in a majority, only the top two vote-getters are advanced to a second vote. Board must keep balloting until one candidate receives a majority vote.
5. The newly-appointed board member is announced.
6. The district's Clerk to the Board will prepare the Affidavit/Oath of Office form.
7. The newly-appointed board member must sign the form in the presence of a Notary Public who will provide the oath of office.
8. The new board member is considered a voting member of the Mayers Memorial Hospital District Board of Directors.

**REFERENCES:**

Election Code (California Law)  
MMHD Bylaws (District)  
Ralph M. Brown Act  
Shasta County Elections Department

**COMMITTEE APPROVALS:**

BQC: 3/8/10  
BOD: 3/29/10

Author: Marlene McArthur  
File/Path Name: P:\Policies and Procedures\Administration

## CERTIFICATE OF APPOINTMENT

This certifies that, at a [special or regular] district meeting held on [date of meeting]

[name of newly-appointed Director]

was appointed to the office of Director, Mayers Memorial Hospital District, for the term ending [date]

IN WITNESS WHEREOF, I hereunto set my hand  
this \_\_\_\_\_ day of \_\_\_\_\_,

\_\_\_\_\_  
[name]<sup>1</sup>  
[title], Mayers Memorial Hospital District  
County of Shasta, State of California

STATE OF CALIFORNIA     )  
                                  ) ss  
County of Shasta         )

I, [name], do solemnly swear (or affirm) that I will support and defend the Constitution of the United States and the Constitution of the State of California against all enemies, foreign and domestic; that I will bear true faith and allegiance to the Constitution of the United States and the Constitution of the State of California; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties upon which I am about to enter.

\_\_\_\_\_  
[signature of newly-appointed Director]

Subscribed and sworn to before me, this \_\_\_\_\_ day of \_\_\_\_\_, 2010.

\_\_\_\_\_  
[name and title]<sup>2</sup>

<sup>1</sup> The appointment should be signed by the Chairman of the Board, the Secretary of the Board, or the Clerk to the Board.

<sup>2</sup> A notary public may witness the oath.



## 2014 Biennial Notice for Multi-County Agencies

The Political Reform Act requires every local government agency to review its conflict of interest code biennially.

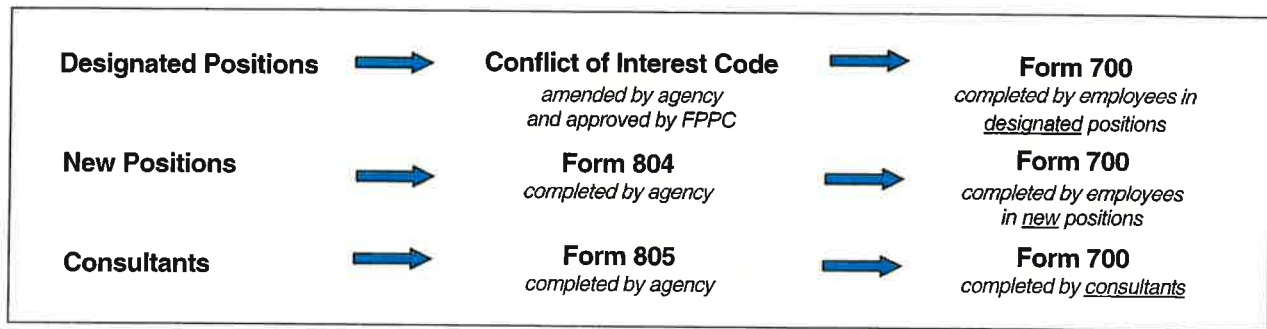
### OCTOBER 1, 2014 DUE DATE

Your agency must review its conflict of interest code and submit the attached notice to the FPPC indicating whether or not an amendment is necessary. You must return this notice to the FPPC regardless of how recently your agency's code has been approved, or even if the code is currently under review.

If amendments are necessary, the revised code must be forwarded to the FPPC for approval.

### FORMS 804 & 805

The chart below illustrates how the designated positions in the conflict of interest code and Forms 804 and 805 relate to the Form 700 and who completes each form. Forms 804 and 805 may be used to identify new positions and consultants that will make or participate in making governmental decisions on behalf of the agency. These forms are also used to identify the new position's or consultant's disclosure requirements which should conform to the range of their duties.



**EXAMPLE 1:** An agency hires a new IT Specialist. This is a brand new position, thus not listed in the agency's conflict of interest code. This individual will make decisions on purchasing software so the position must be added to the code. The agency completes and retains the **Form 804** to provide the individual with limited disclosure relating to IT interests. The individual files a Form 700 within 30 days of assuming office. The position will be added to the code when it is next amended.

**EXAMPLE 2:** An agency hires a firm to prepare an environmental impact report ("EIR") on airport expansion. It is determined that the consultant assigned to the project will participate in the decisions concerning where expansion may occur. The consultant who will prepare the EIR (not the consultant's firm) should be assigned a disclosure requirement that reflects the contract's scope of authority. A sample disclosure category in this case might include disclosure of "real property, investments and business positions in business entities, and income from only those sources engaging in air traffic or aviation goods or services." Alternatively, the agency may assign an existing disclosure category, if appropriate. The agency completes and retains the **Form 805** to provide the individual with limited disclosure relating to the appropriate interests. The consultant files a Form 700 within 30 days of assuming office.



**Technical  
Assistance  
Division**

## **Should You Amend Your Multi-County Agency's Conflict of Interest Code?**

---

A conflict of interest code tells public officials, governmental employees, and consultants what financial interests they must disclose on their Statement of Economic Interests (Form 700). It is the basis for the transparency that California's Political Reform Act requires of public officials. But how do you know if your agency's code is what it should be? And how do you go about amending it? The information below may help you with these issues.

### **THINGS TO THINK ABOUT ...**

- Is your current code more than five years old?
- Have there been any substantial changes to your agency's organizational structure since the last code was approved by FPPC?
- Have any positions been eliminated or re-named since the last code was approved by FPPC?
- Have any new positions been added to your agency since the last code was approved by FPPC?
- Have there been any substantial changes in duties or responsibilities for any positions since the last code was approved by FPPC?

If you answered yes to any of these questions, your agency's conflict of interest code will likely need to be amended. The first step in the amendment process is to complete the enclosed Biennial Notice and return it to the FPPC at [biennialnotice@fppc.ca.gov](mailto:biennialnotice@fppc.ca.gov) or at the address below by **October 1, 2014**. When we receive it, we will provide you with information and instructions on how to amend your code.

If you have any questions, or you are still not sure if you should amend your agency's conflict of interest code, please consider participating in a free webinar or a seminar at the FPPC. For more information, visit <http://fppc.ca.gov/index.php?id=359>.



Technical Assistance Division

## 2014 Multi-County Agency Biennial Notice

Name of Agency: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone No: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Alternate E-Mail: \_\_\_\_\_

Counties Served: \_\_\_\_\_

No. of Employees: \_\_\_\_\_ No. of Form 700 Filers: \_\_\_\_\_

Form 700 Contact Person (if different from above): \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone No: \_\_\_\_\_

**Accurate disclosure is essential to monitor whether officials have conflicts of interest and to help ensure public trust in government. The biennial review examines current programs to ensure that the agency's code includes disclosure by those agency officials who make or participate in making governmental decisions.**

This agency has reviewed its conflict of interest code and has determined that (check one box):

- An amendment is required.** (check all circles that apply.)
  - Include new positions (including consultants) that must be designated
  - Revise the titles of existing positions
  - Delete positions that no longer make or participate in making governmental decisions
  - Revise disclosure categories
  - Other (describe) \_\_\_\_\_
- The code is currently under review by the FPPC.**
- No amendment is required.** (If your code is more than five years old, amendments may be necessary.)

### Verification

*This multi-county agency's conflict of interest code accurately designates all positions that make or participate in the making of governmental decisions. The disclosure categories assigned to those positions accurately require the disclosure of all investments, business positions, interests in real property, and sources of income that may foreseeably be affected materially by the decisions made by those holding designated positions. The code includes all other provisions required by Government Code Section 87302.*

\_\_\_\_\_  
*Signature of Chief Executive Officer*

\_\_\_\_\_  
*Date*

All multi-county agencies must complete and return this notice, including those agencies whose codes are currently under review. Please return this notice no later than **October 1, 2014** to the FPPC at [biennialnotice@fppc.ca.gov](mailto:biennialnotice@fppc.ca.gov), or mail to: Fair Political Practices Commission, 428 J Street, Suite 620, Sacramento, CA 95814.



Julie M Bustamante  
COUNTY CLERK-RECORDER  
REGISTRAR OF VOTERS  
CLERK OF THE BOARD OF  
SUPERVISORS



220 S Lassen St Suite 5  
Susanville CA 96130  
(530) 251-8217  
FAX (530) 257-3480  
Email [lcclerk@co.lassen.ca.us](mailto:lcclerk@co.lassen.ca.us)  
Website [www.lassencounty.org](http://www.lassencounty.org)

July 17, 2014

TO: Special Districts  
FROM: Susan Osgood, Deputy Clerk of the Board  
SUBJECT: 2014 Biennial Notice for Conflict of Interest Codes

Dear Board Members:

The Political Reform Act requires every local government agency to review its conflict of interest code biennially.

Please complete and return the enclosed "2014 Local Agency Biennial Notice" form to the Lassen County Clerk's office, 220 S. Lassen Street, Suite 5, Susanville CA 96130 as soon as completed.

If an amendment to your conflict of interest code is needed, please submit as soon as possible for County Counsel review and Board approval. If you submitted something since 2012, please make sure any proposed changes are included in this statement.

Please review the enclosed documents: "2014 Local Agency Biennial Notice", "2014 Biennial Notice for Clerks of the Board of Supervisors, County Clerks, and County Counsels", and "Should You Amend Your Agency's Conflict of Interest Code?".

Thank you.

Susan Osgood, Deputy  
Lassen County Clerk's office

[sosgood@co.lassen.ca.us](mailto:sosgood@co.lassen.ca.us)  
530-251-8427  
Fax 257-3480

## 2014 Local Agency Biennial Notice

Name of Agency: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone No: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Accurate disclosure is essential to monitor whether officials have conflicts of interest and to help ensure public trust in government. The biennial review examines current programs to ensure that the agency's code includes disclosure by those agency officials who make or participate in making governmental decisions.**

This agency has reviewed its conflict of interest code and has determined that (check one box):

**An amendment is required. The following amendments are necessary:**

*(Mark all that apply.)*

- Include new positions (including consultants) that must be designated
- Revise disclosure categories
- Revise the titles of existing positions
- Delete positions that no longer make or participate in making governmental decisions
- Other *(describe)* \_\_\_\_\_

**The code is currently under review by the code reviewing body.**

**No amendment is required.** (If your code is more than five years old, amendments may be necessary.)

---

### Verification

*This agency's conflict of interest code accurately designates all positions that make or participate in the making of governmental decisions. The disclosure categories assigned to those positions accurately require the disclosure of all investments, business positions, interests in real property, and sources of income that may foreseeably be affected materially by the decisions made by those holding designated positions. The code includes all other provisions required by Government Code Section 87302.*

\_\_\_\_\_  
Signature of Chief Executive Officer

\_\_\_\_\_  
Date

Complete and return this notice regardless of how recently your code was approved or amended. Please return this notice no later than **October 1, 2014**, or by the date specified by your agency, if earlier, to:

**LASSEN COUNTY CLERK  
220 S. LASSEN STREET, SUITE 5  
SUSANVILLE, CA 96130  
PLEASE DO NOT RETURN THIS FORM TO THE FPPC**



FAIR POLITICAL PRACTICES COMMISSION

428 J Street • Suite 620 • Sacramento, CA 95814-2329  
(916) 322-5660 • Fax (916) 322-0886

March 8, 2007

Jerald Fikes  
Mayers Memorial Hospital District  
PO Box 459  
Fall River Mills, CA 96028

RE: Conflict-of-Interest Code for the  
Mayers Memorial Hospital District

Dear Mr. Fikes:

Enclosed is the approved conflict-of-interest code for the **Mayers Memorial Hospital District** approved by the Fair Political Practices Commission on March 8, 2007. The code will become effective on April 6, 2007, which is 30 days after the Commission's approval of the code. No further action is required by the agency to make this code effective.

Also enclosed is a copy of Regulation 18730 which has been incorporated as the body of the agency's conflict-of-interest code and a Statement of Economic Interests, Form 700 which must be used by designated employees.

Please note that if you are not the filing officer for the statements of economic interests, it is imperative that this information be forwarded to the appropriate person. If you have any questions, please contact me at (916) 322-5660.

Sincerely,

Carla Wardlow  
Chief, Technical Assistance Division

By: Ashley Clarke  
Student Assistant

Enclosures

05 JUN 20 AM 12:15

**CONFLICT OF INTEREST CODE FOR THE  
MAYERS MEMORIAL HOSPITAL DISTRICT**

APPENDIX

| <u>Designated Position</u>                           | <u>Assigned Disclosure Categories</u> |
|------------------------------------------------------|---------------------------------------|
| Directors                                            | 1, 2                                  |
| Chief Executive Officer                              | 1, 2                                  |
| Chief Financial Officer                              | 1, 2                                  |
| <del>Chief Operations Officer</del>                  | <del>1, 2</del>                       |
| <del>Director of Quality &amp; Risk Management</del> | <del>1, 2</del>                       |
| <del>Human Resources Director</del>                  | <del>1, 2</del>                       |
| <del>SNF Director of Nurses</del>                    | <del>1, 2</del>                       |
| <del>Attorney</del>                                  | <del>1, 2</del>                       |
| *Consultant                                          |                                       |

Disclosure Categories

Category 1:

Investments and business positions in any business entities and sources of income of the type which, within the last two years, has contracted with this District to provide services, supplies, materials, machinery or equipment.

Category 2:

Interests in real property, located in whole or in part within two miles of any land owned, used or contemplated for use by the District.

\*Consultants shall be included in the list of designated employees and shall disclose pursuant to the broadest disclosure category in the code subject to the following limitations:

The Executive Officer may determine in writing that a particular consultant, although a "designated position", is hired to perform a range of duties that are limited in scope and thus is not required to fully comply with the disclosure requirements described in this section. Such written determination shall include a description of the consultant's duties and, based on that description, a statement of the extent of the disclosure requirements. The Executive Officer's determination is a public record and shall be retained for public inspection in the same manner and location as this Conflict of Interest Code.

**CONFLICT OF INTEREST CODE**  
**FOR**  
**MAYERS MEMORIAL HOSPITAL DISTRICT**

**I**

**Adoption**

In compliance with the Political Reform Act of 1974, California Government Code § 81000, et. seq., the Mayers Memorial Hospital District, hereby adopts this Conflict of Interest Code, which shall be applicable to all designated employees of the Mayers Memorial Hospital District, as specifically required by California Government Code § 87300.

This Code has the force and effect of law. Designated employees violating this Code are subject to the sanctions provided in Chapter 11 of the Political Reform Act. Government Code § 91000, et. seq.

**II**

**Designated Employees**

Government Code § 87302 (a) requires that persons (including Governing Board Members) who occupy positions within the Mayers Memorial Hospital District, which involve the making, or participation in the making, of decisions, which may foreseeably have a material effect on any financial interest, shall be designated employees.

All persons who hold the positions enumerated in Section III, below, are designated employees and must disclose all economic interests set forth in the Section.

### III

#### Designated Positions

Persons occupying the following positions are designated employees and must disclose the following economic interests. The manner of reporting reportable items shall be as provided by Government Code § 87200.

Directors, Attorney for the District, District Chief Executive Officer, District Chief Operations Officer, Director of Human Resources, Directory of Quality & Risk Management, and SNE Director of Nurses and \*consultants shall disclose:

1. Investments in any business of the type which, within the last two years, has contracted with this district to provide services, supplies, materials, machinery or equipment. See Government Code §§ 82034, 87103, 87206.
2. Income from any source of the type within the last 12 months, has contracted with the District to provide services, supplies, materials, machinery or equipment to the District. See Government Code §§ 82030, 98103, 87207.
3. Interests in real property, located in whole or in part within two miles of any site owned or used by the District or any land owned, used or contemplated for use by the District including any leasehold, beneficial or ownership interest or option to acquire such interest in real property. See Government Code §§ 82033, 87103, 87206.

### IV

#### Statement of Economic Interests – Filing

##### A. Initial Statement:

An initial statement shall be filed by each designated employee within 30 days after the effective date of this Conflict of Interest Code disclosing investments in business entities and interests in real property made reportable by Section III, above. All new designated employees shall file statements not less than ten days before assuming office or, if subject to confirmation, ten days before being confirmed, unless an earlier assumption of office is required by emergency circumstances. Government Code § 87302 (b).

## IV

### **Statement of Economic Interests – Filing (continued)**

#### **B. Annual Statement:**

Thereafter, each designated employee shall file an annual statement during the month of January, disclosing reportable investments in business entities, interests in real property, and income held or received in the period since the closing date of the employee's previously filed statement and December 31<sup>st</sup>.

#### **C. New Positions:**

Designated employees appointed, promoted, or transferred to designated positions within the agency shall file initial statements disclosing property within 30 days after assuming office. Government Code § 87302 (b).

#### **D. Leaving Office:**

Any designated employee whose employment with the Mayers Memorial Hospital District is terminated, voluntarily or involuntarily shall, within 30 days after termination, file a statement disclosing reportable investments in business entities, interest in real property, and income, covering the period between the closing date of the previous statement of economic interests and the termination date.

#### **E. Filing with the Agency:**

The statement shall be filed with the person acting as the filing officer for the agency, who is the Chief Executive Officer. In the case of Directors, the filing officer shall make and retain a copy of the statement and transmit the original to the code reviewing body within five days of receipt.

## V

### **Manner of Reporting**

The manner of reporting reportable interests shall be on forms provided by the District pursuant to Government Code § 87206 and 87207.

VI

Disqualification

A designated employee must disqualify himself or herself from making or participation in the making of any decisions which will foreseeably have a material financial effect, distinguishable from its effect on the public generally, on any reportable economic interest (except gifts of less than \$250) or on the principal residence of the filer, or upon any business entity in which the designated employee holds a position of management or is a director, officer, partner, sole owner, trustee, or employee. No member shall be prevented from making or participating in the making of any decisions to the extent his or her participation is legally required for the decision to be made.

VII

Definitions

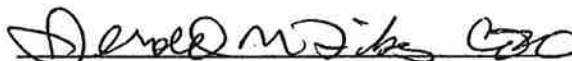
Unless otherwise indicated, the definitions contained in the Political Reform Act of 1974, Government Code § 81000, et. seq., the Regulations of the Fair Political Practices Commission adopted pursuant thereto, and any amendments to the Act and Regulations are incorporated into this Conflict of Interest Code.

VIII

Effective Date of Code

This Conflict of Interest code shall become effective 30 days after approval by the Fair Political Practices Commission.

The proposed Conflict of Interest Code specifically enumerates each of the positions within the agency, which involve the making or participation in the making of decision, which may foreseeably have a material financial effect on any financial interest.



Jerald M. Fikes  
Chief Executive Officer  
Mayers Memorial Hospital District

5/26/05

Date



This is the last page of the conflict-of-interest code for the **Mayers Memorial Hospital District**.



**CERTIFICATION OF FPPC APPROVAL**

Pursuant to Government Code section 87303, the conflict-of-interest code for the **Mayers Memorial Hospital District** was approved on **March 8, 2007**. This code will become effective on **April 6, 2007**.

A handwritten signature in cursive script, appearing to read "Mark Krausse", written over a horizontal line.

Mark Krausse  
Executive Director  
Fair Political Practices Commission