

Mayers Memorial Hospital

Chief Executive Officer
Louis Ward, MHA

Board of Directors

Michael D. Kerns, President Beatriz Vasquez, PhD, Vice President Abe Hathaway, Secretary Allen Albaugh, Treasurer Laura Beyer, Director

BOARD of DIRECTORS

MEETING AGENDA- Revised

August 23, 2017 1:00 pm

Board Room (Burney)

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 Mike Kerns, 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.
- **APPROVAL OF MINUTES:** 3.1 Regular Meeting – July 26, 2017 (Attachment A) ACTION ITEM **Department/Operations Reports/Recognitions:** 4 **ACTION ITEM** 4.1 Resolution 2017-14–July Employee of the Month (Attachment B) Presentation *Please Note: Chief reports will now be at the end of the agenda in order to expand on discussion or answer questions regarding items that were addressed on the full agenda. 4.2 Scheduled Director Report – Valerie Lakey, Director of Public Relations (Attachment C) Report 4.3 Director of Operations Report – Ryan Harris (Attachment D) Report **BOARD COMMITTEES:** 5 5.1 Finance Committee - Chair Allen Albaugh 5.1.1 Committee Meeting Report Information 5.1.2 July 2017 Financial review, AP, AR and acceptance of financials **ACTION ITEM** (Dispersed Separately) 5.1.3 Board Ouarterly Finance Review..... **ACTION ITEM** 5.1.4 2007 Revenue Bond. Discussion 5.2 Strategic Planning Committee - Chair Mike Kerns Report 5.2.1 Committee Meeting Report

-re all vie vie in an alma	5.2.2 Review of August 22, 2017 Special Meeting. 5.2.3 SMART Goals Presentation, Louis Ward	Discussion Presentation
	5.3 Quality Committee —Chair Beatriz Vasquez 5.3.1 Committee Meeting Report	Information
6	NEW BUSINESS	
	 6.1 Policies for Approval (Sent as PDF) Chief Executive Officer Compensation Payroll Direct Deposit Public Forum During Board Meetings and Request to be Heard 	ACTION ITEM
7	 7.1 Administration Reports: * Note: Chief reports will now be at the end of the meeting in order to expand on discussion or answer questions regarding items that were addressed on the full agenda. Written report are provided in board packet – additional comments as need verbally Chief's Reports (CEO, CNO, CCO, CFO, IHF CEO) (Attachment E) 	Information
8	8.1 INFORMATION/REPORTS/BOARD EDUCATION/ANNOUNCEMENTS • Board Comments, Upcoming Events, etc. • Legislative Update – Val Lakey	
9	ANNOUNCEMENT OF CLOSED SESSION: 9.1 Government Code Section 54962: Quality Assurance: Quality Improvement Issues, Medical Staff Report (Dr. Tom Watson, Chief of Staff) MD Reappointment Peter Halt, MD	ACTION ITEM
r or write on the sir	9.2 Personnel Government Code 54957 – CEO Review/Evaluation	Discussion/ ACTION

10	RECONVENE OPEN SESSION REPORT CLOSED SESSION ACTION	Discussion
11	ADJOURNMENT: Next Regular Meeting September 27, 2017 Fall River Mills	

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, 43553 Highway 299 East, Fall River Mills CA 95028.

This document and other Board of Directors documents are available online at www.mayersmemorial.com.

Posted/Distributed 08/17/17



Attachment A DRAFT

Mayers Memorial Hospital District Board of Directors – Regular Board Meeting

Date: July 26, 2017 Time: 1:00 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.)

CALL MEETING TO ORDER: President Kerns called the regular meeting to order at 1:00 p.m. on the above date with the following present:

Mike Kerns, President Beatriz Vasquez, Vice President Abe Hathaway, Secretary Allen Albaugh, Treasurer Laura Beyer

Board Members Absent:

Staff Present: Louis Ward, CEO; Travis Lakey, CFO; Ryan Harris, Director of Operations Valerie Lakey, DOPR/Clerk of the Board, Sherry Wilson, CNO, Keith Earnest, CCO; Jack Hathaway, DOQ: Linda Eastman, Mary Ranquist, Theresa Overton

CALL FOR REQUEST FROM AUDIENCE TO SPEAK TO ISSUES OR AGENDA ITEMS: 2.1 Public Comment – none

APPROVAL OF MINUTES — A motion/second and carried, the Board of Directors accepted the minutes of the June 28, 2017 Regular Board Meeting. (*Beyer, Vasquez*) — **Approved All**

Department/Operations Reports/Recognitions:

- **4.1 Resolution 2017-12**–*June Employee of the Month*: Linda Eastman was recognized, as June 2017 TEAM MAYERS MVP. Presented by Allen Albaugh (Vasquez, Hathaway) *Approved All*
- **4.2 ACHD Certified Healthcare District Presentation** Ken Cohen, CEO ACHD attended to present MMHD with the Certified Healthcare District designation. CEO Ward also showed the DRAFT Hwy 299 Collaborative Physician Recruiting Video for those in attendance.
- **4.3 Hospice Quarterly Report**, Mary Ranquist, Manager. Ranquist reported that since January we have had 21 patients. The length of stay is shorter; an average of 19 days. Other facilities are experiencing the same problems. We have connected with Pit River Health and the relationship is improving. We will be going to visit the Burney clinic to meet with the physicians. The Car Show fundraiser was successful. Hospice travel is about \$11,000 annually. We have looked at a possible vehicle purchase. Staff works in other departments when it is slow. There was also some discussion of a new service that links to Hospice that is covered by Medicare. (Palliative Care)
- *Please Note: Chief reports will now be at the end of the agenda in order to expand on discussion or answer questions regarding items that were addressed on the full agenda.
 - **4.4 Scheduled Director Report** *Theresa Overton, Director of Quality* Reviewed OP Medical department report as submitted in board packet. Overton reported that they are doing a lot of sharing of staff. She also reviewed the surgery referral process. In the ER, they are working on the flow of the resource nurse and tech position. SEMSA team is utilized at times. Average Daily Census is 2.43 Swing 11.56 days length of stay. Currently we have 11 full time licensed staff. There are two full time staff that will be starting soon. The acute department received a grant from the foundation for 2 new vitals carts.
 - **4.5** Director of Operations report *Ryan Harris* (Written report provided in packet) 100% of the construction documents and are submitted to OSHPD. Follow-up meeting with the FR Water District (See Finance notes)

July 26, 2017 Page 2 of 4

Also noted that he met with Hat Creek Construction on the reduced scope for the Annex Parking Lot bid.

Progress on the SNF project – door skins are being installed.

Painting of PT Building. Colors will be used on the new building.

Door replacements are scheduled.

Working on evaluating the HVAC system to determine what the scope of the project would be. Dietary staffing continues to be a challenge.

Working on the laundry study.

Noted purchasing's accomplishments over the last fiscal year.

IT has been working on Paragon update and Telemed program.

5. COMMITTEE MEETINGS

- 5.1 Finance Committee
- **5.1.1 Committee Meeting Report** Albaugh reported on the committee meeting. Noted the fiscal year was very positive. We collected a higher portion of patient revenue. Albaugh expressed that MMHD is doing the best he can remember.
 - 5.1.2 June 2017 Financials (Albaugh. Hathaway) Approved All
- **5.1.3 Resolution 2017-13** USDA Restricted Bond Debt Service *(Albaugh, Hathaway) Approved All*
- **5.1.4 Funded Depreciation** There was discussion on the topic. Lakey will continue with details on starting some option of this.

5.2 Strategic Planning Committee

5.2.1 Committee Report – Chair Kerns Kerns noted that most of the discussion revolved around Expanded Patient Services

5.3 Quality Committee

- 5.3.1 Beyer reported on the Committee Meeting Discussed the department reports.
- **5.3.2 Smoking Policy** clarification (Vasquez, Beyer) 4-1 Approved as amended.

6. NEW BUSINESS

6.1 Policies for Approval - All approved (Beyer, Hathaway) with Corrections

- Chief Executive Officer Compensation
- Disbursement of Funds
- Hand Sanitizing and Garbing Sequence Clean Room
- Imaging Competency Assessment
- Discontinued Medications and Controlled Substance Disposal:

SNF

- Controlled Substance Disposal Record Form MMH584
- Discontinued Medication Log MMH574
- Narcotic Control Sheet for 1/2 Tablets MMH582B
- Narcotic Control Sheet for Fentanyl MMH582D
- Narcotic Control Sheet for Liquids MMH582C
- Narcotic Control Sheet for Whole Pills and Tablets MMH582A
- Ultrasound Transducer (Probe) Cleaning

Mayers Memorial Hospital District Board of Directors – Regular Board Meeting

> July 26, 2017 Page 3 of 4

7. ADMINISTRATION REPORTS:

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

Louis Ward, CEO - In addition to the written report -

- Spoke about employee meetings informal meetings, and were very productive rounds
 of meetings. There was a lot of employee input. We are doing the meetings quarterly.
 Safety was a topic in Burney. There were a few pressing concerns. A lot of questions
 about telemedicine. Went over the Capital Campaign and the building project with the
 staff. There will be signs displayed for the building project. Health insurance questions –
 rates will be going up.
- · Talked about the employee idea challenge
- Finishing up SMART Goals
- Visited Mendocino Coast Hospital
- New technology for SNF (televisions, new Apps)
- Telemedicine 3 scheduled appointments Had Lunch & Learn yesterday with MVHC
- Attended Town Hall meeting

Travis Lakey, CFO - We have no more medicare repayments – this is the first time since 2010.

Keith Earnest, CCO – *In addition to the written:* PT has been working to involve interested people in the community. We will have Taylor Sloat shadowing in PT. In the Pharmacy we were approached for being a "drug take back" – inspector has indicated it would not be approved. Portable x-ray machine arrived today. Vitamin Hydroxy levels – we will be able to do these in house now.

Sherry Wilson, CNO — *In addition to the written report:* Mock survey was completed. Focused on the Point Click Care. There were some areas identified. Ideas were given to Wilson and Hathaway on how to track. Music and Memory program is going well.

8. Information/board education/announcements Board comments, upcoming events, etc. –

Future agenda items:

SEPTEMBER 22, 2017 IS THE CAPITAL CAMPAIGN LAUNCH GOLF TOURNAMENT – AUGUST 19

EMPLOYEE BBQ - AUGUST 20

COST REPORT CONFERENCE SEPT 12 - 14 - RENO

VAL REPORTED ON HEALTHCARE DISTRICT LAW SUBCOMMITTEE.

9. Announcement of CLOSED SESSION – 3:20 pm – Approved All

9.1 Government Code Section 54957: (Vasquez, Albaugh) - Approved

Quality Assurance: Quality Improvement Issues, Medical Staff Report (Dr. Tom Watson, Chief of Staff)

AHP APPOINTMENT

Physician Reappointment: Rebecca Dyson, MD

AHP Appointment:

Heather Corr, NP

DRAFT

Mayers Memorial Hospital District Board of Directors – Regular Board Meeting

July 26, 2017 Page 4 of 4

Medical Staff Appointment Latisha Smith-Chase, MD

Medical Staff Status Change to Inactive

- 1. Ana J. Weinhold, MD Move to Inactive
- 2. Jesse Arnold, NP Move to Inactive
- 9.3 Personnel Government Code 54957 CEO Evaluation
- 10. Reconvene Open Session (Albaugh/Hathaway) All Privileges Approved
- **12. ADJOURNMENT:** There being no further business, at the hour of 3:45 p.m., President Kerns declared the meeting adjourned. Next meeting August 23, 2017 1:00 pm— Fall River



Mayers Memorial Hospital District

Always Caring. Always Here.

RESOLUTION NO. 2017-14

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

Wesley Wadsworth As July 2017 EMPLOYEE OF THE MONTH

WHEREAS, the Board of Trustees has adopted the MMHD Employee Recognition Program to identify exceptional employees who deserve to be recognized and honored for their contribution to MMHD; and

WHEREAS, such recognition is given to the employee meeting the criteria of the program, namely exceptional customer service, professionalism, high ethical standards, initiative, innovation, teamwork, productivity, and service as a role model for other employees; and

WHEREAS, the MMHD Employee Recognition Committee has considered all nominations for the MMHD Employee Recognition Program;

NOW, THEREFORE, BE IT RESOLVED that, Wesley Wadsworth is hereby named Mayers Memorial Hospital District Employee of the Month for July 2017; and

DULY PASSED AND ADOPTED this 23rd day of August 2017 by the Board of Trustees of Mayers Memorial Hospital District by the following vote:

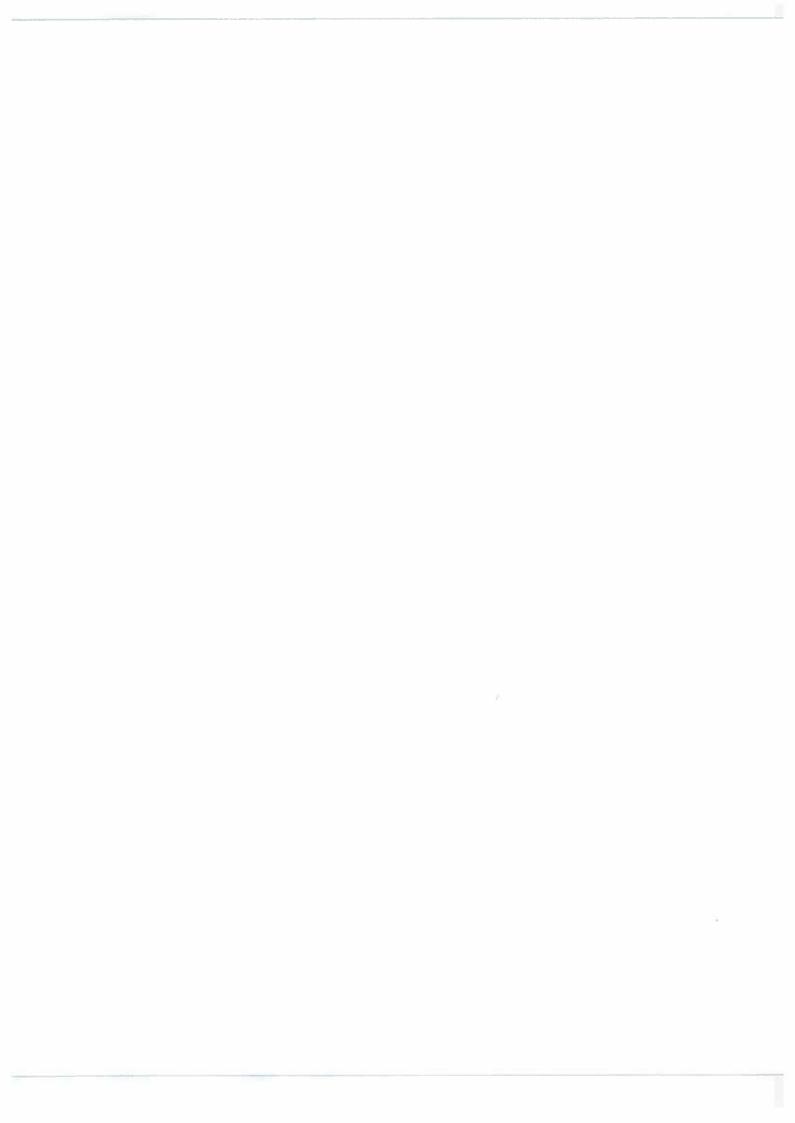
AYES: NOES:

ABSENT: ABSTAIN:

Mike Kerns, CHAIRMAN Board of Trustees, Mayers Memorial Hospital District

ATTEST:

Valerie L. Lakey Clerk of the Board of Directors





Mayers Memorial Hospital District

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Director of Public Relations Report – August 2017 Prepared by Valerie Lakey

Since reporting in February, many projects have come to completion and several new ones have begun. The position continues to be very diverse. Here is a review of some of the projects from over the last few months:

MMHD IMAGE

We continue to project a positive MMHD image into our communities. This has involved being a part of many community activities including:

Schools:

- Assemblies at all three local elementary schools during hospital week. We received a very
 positive response from these events. Many members of the staff from various departments
 participated.
- Hand Sanitizer stations at Elementary schools with supplemental educational materials and MMHD logo pencils.
- Health Career Days at all three local high schools. This was the second year of this project. It is
 very successful and provides the opportunity for department staffs to talk to students about
 potential healthcare careers. Dr. Watson, Chief of Staff participated in these events as well.
- The high school senior intern program is in the second year. We received many applications and have an intern form each of the three high schools. This is a very positive program that we will continue to grow. Next year we will conduct interviews as a part of the application process, as we are receiving more applications.

Community:

- Sponsored the Burney Chamber of Commerce Ham Run
- · Members of all three community chambers
- Sponsored Bulldog Sports Foundation Golf Tournament
- Sponsored Heritage Foundation/Inter-Mountain Fair
- Sponsored Community Softball Team
- Sponsored Burney and Fall River Youth Soccer Team
- Presentations at Chambers and Rotary

Other projects:

- your:life program continues to grow and have very positive results with employee participation, health and morale. I was asked to speak at the ACHD Wellness event about our project.
 Following that we were interviewed by BETA about our program and will be featured in a their publication and have been nominated for a BETA Gem Award.
- Achieved District Transparency through the ACHD Board Transparency Program
- New brochures will be meeting with each department manager
- Employee and Community communication
 - Bulletin Boards in Burney and Fall River
 - o Employee Payroll Newsletter
 - o Mayers Minute
 - Website weekly updates

- o Social media (including new features for your:life)
- o **TEAM HUDDLES**
- o Lunch and Learns
- o TEAM MAYERS
- Working with Hwy299 Collaborative Marketing Committee Physician Recruiting videos and brochures are near completion
- CHA Disaster Committee will be speaking at Disaster Conference. A 60 minute presentation on Rural Challenges in Emergency Management
- ACHD Governance Committee and the Healthcare District Law Committee
- Legislative Information, Education ,Advocacy
- Safety Training/Education Schedule
- Advertising/ Press Releases
 - o Note: in the last 6 months we received \$9000 + in bonus spots on KRCR

Mayers Memorial Hospital District Operations Board Report

Submitted by Ryan Harris, Director of Operations

August 2017

General

 August has been another very busy month for our operations departments. For this reason, I have asked the department managers to provide me with a portion of my report that comes directly from them. They are our front line managers in these departments and have been doing a great job with the multitude of projects we are asking of them.

Hospital Expansion Project

 Layton Construction is still in the process of compiling and receiving bids. There are a couple of trades that are coming in higher than expected including concrete and drywall. Porter consulting and Layton are reviewing them to determine the cause of the high bids and to figure out how to get these trades within budget. Greenbough Design is working with OSHPD and everything is going as expected with the plan review process.

Plant Operations, Maintenance, Other Construction Projects

- 1. I've received a follow-up bid for the Burney Annex parking lot project. By removing 13,000 sq. ft of asphalt and replacing it with base rock the price for the project went from \$171,399 to \$161,360. If we were to forego the base rock that would lower the price to \$144,443.
- 2. As you may have noticed we are moving forward with the SNF refresh project with new windows, fire doors and door skins currently going in.

Submitted by Dave Burks:

- 1. The maintenance department has been busy, not only with routine task and repairs. With the great weather we are experiencing there are a lot of outdoor projects that we have been able to work on.
- At the Burney Annex our parking lot lighting has been retrofitted with new (LED) type lights. This will save on energy cost and provide brighter lighting adding to the safety and security of our building.
- 3. In Fall River Mills work has begun on the installation of irrigation from the well at the Riverview House to the large grass area at the helicopter pad. We have a 1 ½ inch water line from the well to the north side of the maintenance shop. A sprinkler system will then be installed. We will be able to irrigate in the evening saving on utility cost.

4. We are currently painting the Physical therapy/Human Resources building. This long overdue project will enhance the beauty and professionalism of our Fall River Mills facility.

Dietary

Submitted by Susan Garcia:

- 1. Dietary Staff will be trained on Violence in the Workplace on Aug. 15th
- 2. Working with Barbara to prepare food and supplies for Golf tournament Aug. 19th
- 3. Working with Marlene to prepare food and supplies for the Kick Off on Sept. 22nd
- 4. Preparing for our yearly resident BBQ's in both facilities the week of Aug. 20th
- 5. We are in the process of moving our emergency food supplies to a room at the Burney Annex. Our food and water will be located in same room now.

Environmental Services

Submitted by Sherry Rodriguez:

- 1. The Housekeeping Department is fully staffed for Fall River and the Burney Facility. We have been very busy getting our monthly lists of various tasks done, which have all been completed for the last 3 months straight. We have been working together getting through the Mock surveys to ensure that we are in compliance with Title 22 regulations and also to make sure that we are prepared for our SNF survey.
- 2. We have 3 new hires that have not been through the survey process. We have been training and prepping them for this stressful time, making sure that they all are up to date with the Infection Control part of their job and know the importance of their role here at Mayers. Making sure that they all are in compliance with Policy and Procedures within the hospital and their role as Environmental Services as well.

Purchasing

Submitted by Steve Sweet:

1. These totals represent materials processed by the Purchasing Dept. during the month of July. There may have been additional items purchased through other departments.

Purchase orders:

139

Total \$ Purchased:

\$320,308.45

Returns are for many reasons. Some from order error, some from shipping error, damaged in transit and no longer needed.

Total \$ Returns:

\$605 = .0019%

Information Technology

Submitted by Chris Broadway:

- 1. The IT department is currently focused primarily on our upcoming Paragon 14 go live. This project has been delayed by both technical and training issues which have forced us to move this project completion date into September but the actual go live date has not been confirmed. Along with Paragon 14, is an update for our electronic prescription capabilities inside the electronic medical record software to be compliant with meaningful use stage 3 requirements. That is called EPCS. The EPCS implementation has started and we have resources allocated to it. We expect the go live to also be in September.
- 2. We are in the process of replacing one of our IT Tech staff. Our most recent hire left to work outside the IT field outside the facility. We have a couple of possible candidates and expect to be able to have a replacement in the next 2-3 weeks.





Operations Report August 2017

Mayers Memorial Hospital

Statistics	July YTD FY18 (current)	July YTD FY17 (prior)	July Budget YTD FY18
Surgeries (including C-sections)	9	6	8
> Inpatient	2	2	2
➤ Outpatient	7	4	6
Procedures (surgery suite)	8	13	16
Inpatient	120	154	180
Emergency Room	403	370	337
Skilled Nursing Days	2345	2513	2400
OP Visits (OP/Lab/X-ray)	1095	1234	1374
Hospice Patient Days	63	182	130
PT	336	233	270

<u>Operations District-Wide</u> Prepared by: Louis Ward, MHA, Chief Executive Officer

2017 SMART goals / 2021 Strategic Plan

The district has completed its review of all goals assigned to management for FY17. We have prepared a presentation for the board that will be presented in the August meeting. It will summarize goals assigned to management and staff and how they fit into the larger 2021 strategic plan. We are nearing the completion of developing and communicating FY2018 goals, we expect to be finished by the end of August.

MMHD/MVHC Joint Board Meeting

This month we look forward to a joint board meeting between Mountain Valley Health Centers and Mayers Memorial Hospital District. It has been over 2 years since both organizations have had the Board Members meet to discuss our shared mission of providing quality healthcare services to the communities we serve. We look forward to a positive and worthwhile discussion amongst the two boards. More information will be reported verbally on this matter as the meeting is scheduled for the evening before the August Board meeting.

Employee Health Benefits

This month Administration met with the hospital's insurance broker to discuss the medical and dental benefits we will offer district employees in 2018. We are examining a few minor changes to the insurance policy but it does not look like there will be any significant changes from that of the 2017 policy. Unfortunately, the cost of the policy is expected to increase by 6% for 2018 but as mentioned, we are examining minor changes, which aim to lessen the financial impact. More information will be reported verbally at the August board meeting.

JPIA Meeting

Late this month Mike Kerns, Board President and I travelled to Modoc Medical Center. We met with the administrators of Modoc Medical Center and Lakeview Healthcare District as well as Board Directors from each of the above facilities and a Director from Surprise Valley Healthcare District. We spoke of many topics while we met, specifically we aim to discuss areas where our districts can work together in an effort to reduce costs and provide additional services to the communities we serve. We spoke at length about a market study report the four districts worked to develop. The report outlines how each of the services a district provides is utilized as well as highlights areas of opportunities a district may further research.

Employee BBQ

At the time of writing this report we are only a few days away from the districts second annual Summer BBQ. This event is a special day hospital employees can bring their families to enjoy the sun, swimming, games, prizes, and of course each other. I would like to thank our TEAM Mayers Committee for organizing this great event for our hospital staff.

<u>Chief Clinical Officer Report</u> Prepared by Keith Earnest, Pharm.D.--Chief Clinical Officer

Laboratory

- Vitamin D hydroxy levels are the most common send out. The Siemans representative will be here August 16th to upgrade the analyzer to perform this test onsite.
- Mayers staffed a phlebotomist at MVHC homeless outreach and health fairs.
- New flooring is scheduled to be installed in the laboratory September 9 and 10.
- Sarah Moyer CLS is joining our laboratory team as an employee. She started at Mayers as registry.

Physical Therapy

- An Arjo lift was found in storage and the PT department and maintenance department are working to make it functional instead of acquiring a new one.
- Daryl Schneider, PT manager, is exploring how we can make the process to obtain DME as smooth as possible when a patient is discharged from Med-Surg/Swing.

Pharmacy

- The pharmacy department in conjunction with nursing management has been working to keep our crash carts in compliance.
- Several glitches in Paragon® making it difficult for out-patient medical to chart medications have been resolved.
- We are still awaiting the arrival of the replacement Pyxis® anesthesia machine.

Imaging

- As we are building a foundation for interventional radiology, referrals for lower extremity arterial dopplers have doubled since March.
- The mobile x-ray unit is in use. It has superior portability and quality. The resolution allows it to be used for images that are not traditionally portable.

Respiratory Therapy

Mayers has retained a registry Respiratory Therapist, Gina Lobo.

Skilled Nursing Facility - Burney & FRM

Submitted by: Sherry Wilson, RN, CNO

Critical Access Hospital

Submitted by: Sherry Wilson CNO/Acute

Acute Care

- Acute: ADC- 1.35. Swing Average LOS-11.14.
- I attended the Partnership Healthcare Plan--Quality Symposium with Jack Hathaway and Amanda Harris for Telemedicine. I attended the round table for "Improving the Discharge process for better health outcomes". I came away with many ideas that I think could improve our quality regarding discharge care and readmissions. I look forward to sharing these ideas and hopefully put in to effect.

ER

- Krissy Eades, RN has accepted the position of ER Lead Supervisor and we are excited to welcome her to this position. Krissy will continue to work as Supervisor in the ER and take 1-day Admin to improve the quality and standard of our ER. She has many great ideas and is excited to take on this role.
- We were notified by IMHF that a donor wanted to donate \$10,000 for the new ER expansion but would like the equipment to be utilized now in our current ER. Therefore, we have looked at the equipment list and have made choices of what will benefit our ER currently. This equipment has been ordered and we look forward to using it.

Submitted by: Theresa Overton, RN Acute Care Manager

Surgery

Outpatient Surgery -- 7 (Syverson - 6, Guthrie - 1)
Inpatient Surgery -- 2 (Guthrie)
Procedures -- 8

Referral Report for July, submitted by Jennette S.

21 – Referrals (17 – Dr. Syverson; 2 – Dr. Guthrie; 1 – MVHC Provider; 1 – Hill Country Clinic)

14 – Scheduled (1 patient cancelled)

4 - Have not received insurance clearance vet

1 - Patient wants called back in September

2 -Left messages for patients, have not had reply

There were four Outpatient surgical procedures that were added onto the schedule with very short notice and no pre-op appointment per the request of Dr. Syverson.

- Patient seen in ED for bleeding ulcerated lip cancer, patient was sent home but scheduled for a biopsy procedure which was done the following day.
- Lap Chole Seen in ED, patient was put onto the schedule for the next day following the already scheduled scopes (Wednesday, which is not a normal general surgery day). This patient was cancelled on day of procedure as Ultrasound showed stones making her not a surgical candidate at this time.
- Hernia Repair Seen in ED, patient was sent home and scheduled for the next day. CRNA evaluated patient on day of procedure and cancelled patient due to poor renal function (patient refusal of dialysis) and dementia, not a surgical candidate at MMHD from an anesthesia perspective.
- Vasectomy Patient seen in Clinic by Dr. Syverson with a failed attempt at vasectomy, patient could not tolerate pain and was in need of sedation for procedure. Dr. Syverson told patient that he could do procedure the following day at MMHD. Patient was not cleared by insurance for this procedure by the next day and since this is not an "emergent" issue the patient will be schedule for pre-op visit and procedure. Scheduler has been unable to contact patient to reschedule.

Ben Nuti CRNA will be on vacation August 8-17 and will be covered by Rhett Wiggen CRNA We continue to utilize Acute RN Staff on our OP surgery days for admission, recovery and discharge for more than one scheduled surgery. Shelley Lee RN has taken over the Wednesday scope days as the Admit/Discharge RN. A huge thank you to those who continue to offer to help with our staffing needs.

Sherry Rodriguez continues to help as she is able on our heavy scheduled days (like Dr. Guthrie) with the housekeeping at the end of the day. We have not had a department housekeeper in over 1 year, therefore the cleaning is mostly done by Jennette Spezio and Brandon Wolter. I also assist with the cleaning as soon as my patient is either discharged or care is transferred over to the recovery RN. After cleaning I then attend to my patient charting for the day.

We had a long, but very successful Ortho Day with Dr. Guthrie doing two total joint replacement surgeries and a carpal tunnel release.

Outpatient Medical

- Updates:
- Position posted for part time RN for OPM- Currently we have 3 days of coverage in OPM besides
 Lead (M, Th, F)
- OPM is in compliance from MOC survey. Medication cart, treatment cart and new locking cabinets have made a large difference.
- OPM was awarded \$5,100.00 from IHF for a bariatric bed. Working on purchasing bariatric treatment chair with the help of Operations/OPM additional funds.
- June- 90 patients seen; 111 procedures. This is low with an average of 100 patients a month.
- July- 78 patients seen; 99 procedures. This continues to be a low average of 100 patient a month.

Continuing Work:

- IT/OPM working toward a custom build for EMR charting for OPM. Currently for Dr. Zittel visits we still do paper charting. We are waiting for a contract to be signed by Mayers and the IT Consulting Company. Next steps are putting licenses on a laptop so the consultant can remotely set up custom screens. Dr. Zittel and other Departments will join in after this has been done.
- Referrals- Continuing to send out email reminders and stop by MVHC with packets of order sets and goodies to encourage referrals. New privileged providers Heather Corr, PA; Sharon Hanson, NP; Dr. Babb and Dr. Smith-Chase. Jesse Arnold did not renew. Working toward streamlining Mayers referral process.
- Dr. Zittel has agreed to do a lunch and learn or a talk. It is on my list to organize. Providers have mentioned that they would like to meet him numerous times.

• Wound care room in Burney- OPM has ordered a new crash cart, tables and stools to relieve maintenance from transporting equipment back and forth. IT has now placed a computer in the room instead of using a laptop. **Issues/Needs:**

None at this time. I appreciate the support I have been getting from Directors/C-team.

Michelle Petersen, OPM Lead



Telemedicine Update as of August 16, 2017
Prepared by Amanda Harris for Board Members of Mayers Memorial Hospital District

Outreach:

- The Lunch and Learn on July 25 was well attended and went well. There were quite a few staff members from both MMH and MVHC in attendance and they had great questions for Dr. Siddiqui, CMO at Telemed2You.
- I was invited to give an overview of Telemed at Mayers to the group at the MVHC staff meeting on August 8. It was all staff and providers from their Burney, FR and Big Valley clinics and a few from Dorris and Tulelake.
- Telemed was well represented at the Mountain Valley Wellness Week on Monday and Tuesday of this week in Burney and Fall River.

Clinic operations:

- Our first Telemed clinic was held on August 1 for Endocrinology with Dr. Bhaduri. Thank you to the
 Chief team for coming by to greet her before our first appointment. We saw two patients with positive
 input from patients afterwards.
- The first Psychiatry clinic will be held tomorrow, August 17, at the SNF at the Burney Annex. We have three patients lined up. It was a bit of a process getting the referrals and insurance issues sorted out but we're working on ways to streamline this process in the future. Both the nurses at the Annex and Dr. Watson are very excited for these patients to be able to receive Psychiatry services.
- We have offered a trial block of both Hep C and Psychiatry specialties to MVHC after they showed interest.
- MVHC had a couple of Endocrinology patients that they wanted seen in Tulelake. They suggested that
 we organize the clinic as we would here at Mayers, with the referral process and scheduling with
 Telemed2You, but then their staff would connect to our Endocrinologist and conduct the appointment
 there. They would pay us the facility fee in exchange for this service. We decided to pass on this
 opportunity for now as we're just getting up and going here at our own site.

Grant activity:

- Our refund check (\$25,650) from the USDA for the other half of our Telemed equipment has been sent and should be arriving this week for deposit.
- Our first check (\$10,000) for the utilization grant we have through Partnership Healthplan arrived earlier this week. For now through the end of the year I will be sending them input regarding patients that we see via Telemedicine and based on those numbers they will distribute funds every six months.
 This initial amount is given to offset coordinator cost.
- We were approached by UCD regarding a Family Planning project in which we would see patients for pre and post-op care, but it was decided that we would pass on this project at this time.
- UCD also approached us about a grant to designate a nurse liaison in the ER to promote Pediatric treatment education. It's a small grant (\$3,500) and it aligns well with our Telemed cart that we'll have in the ER for Peds with UCD. Theresa Overton has taken over this project and is moving forward with it.
- The California Telehealth Network and HRSA are working on a drug treatment grant with Tarzana Treatment Center in Southern California. We're still working out the details as to where Shasta County falls regarding a medical waiver and if said waiver applies to Telemed as well.

