

**Chief Executive Officer**  
Louis Ward, MHA



**Mayers Memorial Hospital District**

**Board of Directors**

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

Board of Directors  
**Quality Committee**  
**Minutes**

September 19, 2018 - 12:00pm  
Boardroom (Fall River Mills)

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

- 1 **CALL MEETING TO ORDER:** Board Chair Beatriz Vasquez called the meeting to order at 12:11pm on the above date.

**BOARD MEMBERS PRESENT:**

Beatriz Vasquez, Vice President  
Laura Beyer, Director

**ABSENT:**

Louis Ward, CEO

**STAFF PRESENT:**

Jack Hathaway, DOQ  
Keith Earnest, COO  
Ryan Harris, DOO  
Diana Groendyke, DON SNF  
Candy Vculek, CNO  
Jessica Stadem, Board Clerk

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- 2 **CALL FOR REQUEST FROM THE AUDIENCE – PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS**

None

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- 3 **APPROVAL OF MINUTES**

3.1 A motion/second carried; committee members accepted the minutes of August 15, 2018. Hathaway/Beyer **Approved All**

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- 4 **DEPARTMENT REPORTS**

- 4.1 **Emergency Room:** Written report provided. The committee appreciated the format of report and content.
- 4.2 **HIM:** Not in attendance, will postpone.
- 4.3 **Sterile Compounding License Inspection:** Presented PowerPoint. Inspection in July, have since updated lighting and flooring, updated policies as requested, still working on compliant ER labels.

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- 5 **QUARTERLY REPORTS**

- 5.1 **Compliance:** Created training calendar for the next year for both employees and board, OIG wants to see that we offer training to staff, whether or not they accept the offer; will use most common compliance questions/issues as basis for training to maintain compliance and education.

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- 6 **STANDING MONTHLY REPORTS**

- 6.1 **Quality/Performance Improvement:** Orchestrated Healthcare (Paragon and EHR experts) hoping to come on site to train on systems, much like PCC consultants did; AllScripts was going to charge \$52k to send 2 nurses to train, \$15-17k is current quote through Orchestrated Healthcare; current paper QRR reporting system not good for tracking, looking into electronic reporting systems; PCC working on nutrition analytics for SNF.

- 6.2 **PRIME:** Have currently reported on every metric we have data for, still working on collecting some data, prime eligible population is 538, larger than last year; 1.7.1 BMI in adults, 1.7.2 healthy choices, Susan and Val completed first 5 metrics, will continue and complete rest in next year, most successful section, 1.7.3 children meet with PCP on nutrition and exercise.
- 6.3 **SNF Events/Survey:** SNF survey consultant on-site recently, worked with her for 2 days, focused on quality issues that affect star rating, doing audits on charts that could potentially be flagged by surveyor, expecting to see CDPH by next month for review on past surveys, full survey expected by January; posted for nurse educator to ensure nursing staff are getting adequate training; 2019 goals are all connected, have cascading effect so all staff must work together to achieve their goals; morale of staff has increased, appreciate new oversight because it shows that management care.
- 6.4 **Infection Control:** Keith Earnest reported. Continue working on McGreer criteria in SNF, working with Antibiotic Stewardship Committee in determining criteria for receiving antibiotics, most common bacterial infection is UTI, starting October 1 will start tracking criteria more thoroughly in a database any time an antibiotic is requested; many people have hand washing apps on phones now so more discreet hand washing audits can be done.

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7 **ADMINISTRATIVE REPORT:** Ryan Harris presented on behalf of Louis Ward. Crews have been on-site every day working, Ryan sending daily updates on status, first concrete pour today, tour of site during board meeting on Monday, working to make up the 44 days we lost; laundry facility roof is being put on, opening date should be February 1, will order equipment and linens next month; no security incidents since the fence has gone up, access control installation has begun, started handing out key cards, front doors will be open during business hours unless security issues arise; painting ceiling at annex in an effort to brighten up the facility, will paint walls as well; hired interim Director of Dietary Services, she is a registered dietician, will help with staffing and flow in the department, still struggling with staff; still negotiating price on building for retail pharmacy, working on permits and license applications, ADA requirements and parking lot are biggest concerns; working on finding architect to keep on retainer for three years for all future projects; \$12 increase seen by employees for employee benefits, looking into different dental options; SEMSA contact us about possibly wanting to move airbase to hospital.

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8 **NEW BUSINESS:** None.

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9 **OTHER INFORMATION/ANNOUNCEMENTS:** Beatriz attended ACHD annual meeting with Louis Ward and Theresa Overton, good meeting to network, a lot of useful information provided, will share information with appropriate staff (Ouchless ED, Sober Circle), ideas on better community outreach and programs; met with Robert David, Executive Director of OSHPD; reading materials will be available on ACHD website.

10 **ANNOUNCEMENT OF CLOSED SESSION:**

10.1 **Government Code Section 54962:**

Chief of Staff Report (Health & Safety Code §32155) Dr. Tom Watson, Chief of Staff Report

**Medical Staff New Appointments:**

Robin Rasmussen, MD – Wound Care

**Medical Staff Reappointments:**

Todd Guthrie, MD – Orthopedic Surgery

Thomas Watson – Emergency and Family Medicine

**Allied Health Professional Reappointments:**

Darla Schmunk, FNP

Ben Nuti, CRNA

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11 **RECONVENE OPEN SESSION:** Approved all credentials.

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12 **ADJOURNMENT:** 1:48pm - Next Regular Meeting – October 17, 2018 (Fall River Mills)

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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](http://www.mayersmemorial.com).