Chief Executive Officer
Ryan Harris



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

Board of Directors

Regular Meeting Minutes

January 29, 2025 @ 1:00 PM

Mayers Memorial Healthcare District

Burney Boardroom

20647 Commerce Way

Burney, CA 96013

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

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

### **BOARD MEMBERS PRESENT:**

Jeanne Utterback, President Abe Hathaway, Vice President Tami Humphry, Treasurer Lester Cufaude, Secretary ABSENT:

Jim Ferguson, Director

## STAFF PRESENT:

Ryan Harris, CEO
Travis Lakey, CFO
Valerie Lakey, CPRO
Libby Mee, CHRO
Theresa Overton, CNO
Jack Hathaway, Director of Quality
Jessica DeCoito, Director of Operations
Ashley Nelson, Board Clerk
Dana Hauge, Director of Safety & Security
Jeff Miles, IT Manager
Alex Johnson, Maintenance Manager
Kristen Stephenson,
Keith Earnest, CCO

2	CALL FOR REQUEST FROM THE AUDIENCE - PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS: NONE.					
3	APPROVAL OF MINUTES					
	3.1	A motion made and carried; Board of Directors accepted the minutes of December 4, 2024.	Cufaude, Hathaway	Approved by All		
4	DEPARTMENT/OPERATIONS REPORTS/RECOGNITIONS					
	4.1	Resolution 2024.16- December 2024 Employee of the Month: Erica Baur, RHC	Humphry, Hathaway	Approved by All		
	4.2 Safety Quarterly:  Dana submitted her report. She reiterated the culture of safety and security being integrated into the MMHD culture.					
	4.3 IT: Jeff submitted his report. Les asked Jeff MMHD's plan regarding cyber security. Jeff is in the process of becoming certified in cyber security and how to apply it to the IT system- although many programs are already in place to protect the district's cyber security.					
	4.4	Facilities and Engineering:				

Alex submitted his report.
Infection Control:
Kristen submitted her report.
encourage "foaming in and ou
changing the culture, but the
to course the entire district has

4.5

Kristen the Board that the staff will be holding a February hand hygiene event to ut" of patient rooms- including a competition between depts. The overall includes overall policy as well. She also confirmed that the UV light being requested is not enough

BOARD COMMITTEES							
5.1	Finance	e Committee					
	5.1.1	Committee Report:					
		Tami Humphry reported that the Nov and Dec 2024 financials	were approved. The overall costs	s have			
		increased 1.1% and Registry costs have decreased by 806k. Then IT and Nurse Call system quotes are being					
		proposed to the full board.					
		296 days of cash on hand.					
		Dec AR days are down by 1 point.					
	5.1.2	November 2024 Financial Review	Cufaude,	Approved by			
		Motion moved, seconded and approved.	Humphry	Al			
	5.1.3	December 2024 Financial Review	Humphry,	Approved by			
		Motion moved, seconded and approved.	Hathaway	Al			
5.2	Quality	uality Committee					
		January Quality Meeting Committee Report:	·				
		Les Cufaude reported that Jack and Dr. Magno met regarding hand hygiene. MMHD will no longer be apart of					
		the W.H.O and it was discussed which entity (CDC) MMHD will be following going forward.					
	5.2.1	Jack explained the medication error rate in SNF and the changes that Arnese-interim SNF Director-have put					
		into place to lower this rate, including looking at the error rate daily instead of monthly.					
		Jack explained that he is pursuing a way to gauge our achievement value of QIP. He explained the difference					
		between meeting 2 versus 1 quality measures- PY8 will be at	tested in March 2025. MMHD wi	ll know if they			
		met the measures of PY7 by June 2025.					

#### 6.1 Cerner Ticketing Process:

Travis reported that it has improved, average time is 38 days until the closing of a ticket.

Travis explained the ticketing process to the board.

Travis, Libby and Ryan are in the process of implementation refunds.

Jessica and Holly in IT are creating a system for depts to submit their own Cerner

tickets, instead of having to go through IT.

Wifli agency is reviewing the Revenue Cycle.

#### 6.2 WanderGuard Door System for SNF quote:

Theresa reported that it is a safety system for all of the exit doors in the Burney facility. CDPH is also requiring this update. The plan of corrections includes a plan for a putting a place in system.

The topic is tabled until next month to include the Westcall system quote-including exit doors- is explored.

#### 6.3 IT licenses quote:

A few end of life systems have expired. The Board approved the GPO pricing of \$158,702. Humphry, Approved by Cufaude All

#### 6.4 Nurse Call System quotes:

Jessica explained that the Fall River system was installed in the 1970's and Burney's was installed in the 1990's. This specific nurse call system has already been put in the Acute

Cufuade, Approved Hathaway by All

She will also look into the GPO price quote.

Fall River quote is \$180,000 and Burney quote is \$239,000.

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		The Boa	ard approved both quotes.			
	6.5	Update	d MMHD Staffing Plan:			
		Ryan ex	plained that the new staffing plans highlights all positions, including openings			
		in each	department. This is a living document and will be updated regarding openings.			
		Libby e	xplained that status' (FT,PT, Per diem) of each employee will be added to the			
		staff, as	well as contracted staff.			
	6.6	Policies	and Procedures:			
		Alterna	tive Life Safety Measures			
			tive Life Safety Measures Assessment Tool	Cufaude,	Approved by	
			Staffing Plan	Humphry	All	
			Medication Profile			
			rug Resistant Organism			
7	ADMI		VE REPORTS			
	7.1	Chief's Reports: written reports provided in packet				
		7.1.1	DOO:			
			Jessica submitted her report. Her update includes Aspen Street and Burney	Fire District will I	oe meeting on	
			Friday morning. A site walkthrough will occur on Monday, regarding the mo	st recent propos	als for MMHD's	
			project management firm. Solar panel pole digging will begin February 12th,	regardless of the	e weather. There	
			is an issue with the placement of the panels and making sure they do not ob	struct the view	of the Bluff.	
			She also explained that each Chief owns their own binders for ACHC- 60 in to			
			then present to ACHC upon the survey date. She confirmed that Phase 3 in t	he TCCN buildin	g has been	
			completed, and it is being confirmed before it is submitted to the county.			
			The building code aspects were discussed between Ryan and the Board and	the Board agree	d that bringing	
			all entities to the table is a proactive solution moving forward.			
		7.1.2	CFO:			
			Travis explained that the USDA pre application is complete and he is awaiting their response. There are a			
			couple items left on the Feasibility Study- projecting 5 years out. The audit v	ill hopefully be ر	presented in the	
			February meeting.			
		7.1.3	CHRO:			
			Libby submitted her report. She explained that "active employees" are the			
			interacted with in the past year, and "current" means employees that are co		ed at MMHD. Sh	
			also confirmed that MMHD currently has 18 employees over 65 years of age	2		
		7.1.4	CPRO:			
			Val submitted her report. She explained that the Denim and Diamonds Gala			
			community member that won the car has stated they will now be a life-long	donor to the M	ayers	
			Foundation.			
			She explained that Laura, MMHD's grant writer, attended a 9-week class in		Rural Healthcar	
			Val has also discovered a new website that will assist with grants available to	o our district.		
		7.1.5	CCO:			
			Keith submitted his report. Abe asked Keith about progress regarding presci	,		
			Pharmacy- Kristi is working with our software vendor to access braille labels		,	
			the Retail Pharmacy. He explained the IV fluid shortage is positively progress			
			potassium included are still lacking in availability. Mercy hospital in Redding			
			they have borrowed to MMHD- a direct result of the collaboration MMHD h	ad with Mercy o	luring the	
			pandemic.			
			The FUJI systems will integrate with Cerner and other entities in real time.			
			He also explained with the Quantiferon system is- a state-of-the-art TB system	em that will bene	efit our staff	
			compliance and members of the community.			
		7.1.6	CNO:			
			Theresa submitted her report. No memory care bed are available in the Bur	ney facility. The	staff meet-and-	

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greet with families have been successful in filling SNF beds in both Fall River and Burney. MMHD's Clinical

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

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

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

### 7.1.7 **CEO**:

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

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

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

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

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

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

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

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

### 8 OTHER INFORMATION/ANNOUNCEMENTS

Board Member Message: Ryan's highlights +

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

**Board Education:** 

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

8.2 members.

9.1

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

# 9 MOVE INTO CLOSED SESSION: 3:50 pm

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

### **MEDICAL STAFF REAPPOINTMENT**

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

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

## **MEDICAL STAFF APPOINTMENT**

- 1. Lindsay Frye, DO
- 2. Hossein Mousavi, MD (UCD)
- 3. Sandy Lee, DO (T2U)
- 4. Howard Fellows, MD (Mercy Oncology)
- 5. Jorge Perez-Cardona, MD (Mercy Oncology)
- 6. Kyle Greene, MD (Mercy Oncology)
- 7. Arun Kalra, MD (Mercy Oncology)
- 8. Keith Shonnard, MD (TCR)

### **AHP REAPPOINTMENT**

- 1. Thelma Wadsworth, PA (MVHC)
- 2. Shannon Davidson, CRNA
- 3. Erica Bauer, PA

### **AHP APPOINTMENT**

- 1. Kevin Metz, CRNA
- 9.2 Conference with real property negotiators (§54956.8) 43514 CA 299. Fall River Mills, CA 96028
- 9.3 Conference with legal counsel regarding pending litigation (§54956.9)
- 10 RECONVENE OPEN SESSION: 4:50 pm
- 11 Adjournment: 4:50 pm. Next Meeting is February 19, 2025 in Fall River.

transcript from the mightes of the regular meeting of the Board of Directors of Mayers Memorial Healthcare District

Board Member

Certify that the above is a true and correct

transcript from the mightes of the regular meeting of the Board of Directors of Mayers Memorial Healthcare District

Board Clerk

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