Chief Executive Officer
Ryan Harris



## **Board of Directors**

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

Board of Directors
Regular Meeting Minutes
March 26, 2025 @ 1:00 PM
Mayers Memorial Healthcare District
Burney Annex 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 Lester Cufaude, Director Jim Ferguson, Director

## **ABSENT:**

Jack Hathaway, Director of Quality Valerie Lakey, CPRO Tami Humphry, Treasurer **STAFF PRESENT:** 

Ryan Harris, CEO Travis Lakey, CFO

Libby Mee, CHRO Theresa Overton, CNO

Keith Earnest, CCO

Jessica DeCoito, Director of Operations

Ashley Nelson, Board Clerk

Kimberly Westlund, Rural Health Clinic Manager Danielle Olson, Director of Revenue Cycle

| 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 February 19, 2025.   | Cufaude,<br>Humphry  | Approved by<br>All |  |  |  |  |
| 4   | DEPARTMENT/OPERATIONS REPORTS/RECOGNITIONS |  |                      |                    |  |  |  |  |
|   | 4.1  | Resolution 2025.02- February 2025 Employee of the Month: June Martin.  | Hathaway,<br>Cufaude | Approved by<br>All |  |  |  |  |
|   | 4.2  | Business Office:  Danielle submitted her report. She added that long term billing has been a focus in the dept and claims are actively being worked on. She also highlighted that 5 out of the 7 billing staff passed the recent billing course they participated in. She also disclosed some of the issues being faced with Cerner's system, but the issues are less than 1 year ago. |                      |                    |  |  |  |  |
|   | 4.3  | Rural Health Clinic:  Kimberly submitted her report. She added that Dr. Sloat has been added as a RHC Provider so the staff is making sure the workflow is smooth for referrals, patients and providers. She mentioned that there are four Medical Assistant positions on the books for the following week.  |                      |                    |  |  |  |  |
| 5   | BOARD COMMITTEES                           |  |                      |                    |  |  |  |  |
|   | 5.1  | Finance Committee  |                      |                    |  |  |  |  |
| 300   |  | 5.1.1 Committee Report:  Abe reported that the AR days are high but Travis has a plan on decreasing the  | em without writi     | ng off debt.       |  |  |  |  |
|   |  | 5.1.2 February 2025 Financial Review   |                      |                    |  |  |  |  |

|   |     | Motion moved, seconded and approved.  5.1.3 Acceptance of Annual Audit Summary:                             | Hathaway,            | Approved by     |  |  |  |  |  |  |
|---|-----|---|----------------------|-----------------|--|--|--|--|--|--|
|   |     | Motion moved, seconded and approved.  | Ferguson             | All             |  |  |  |  |  |  |
|   |     | 5.1.4 Board Quarterly Finance Review:   |                      |                 |  |  |  |  |  |  |
|   |     | Motion moved, seconded and approved.  |                      |                 |  |  |  |  |  |  |
|   | 5.2 |   |                      |                 |  |  |  |  |  |  |
|   |     | March Quality Meeting Committee Report:   |                      |                 |  |  |  |  |  |  |
|   |     | 5.2.1 Les reported that the errors in long term care and Ryan will be bringing a consul                     | ltant in to addre    | ess the issues. |  |  |  |  |  |  |
| _ |     | QIP is going well and on time. An answer from ACHC should be coming soon.                                   |                      |                 |  |  |  |  |  |  |
|   | 5.3 | March Strategic Planning Committee Report   |                      |                 |  |  |  |  |  |  |
|   |     | 5.3.1 March Strategic Planning Committee Report:  |                      |                 |  |  |  |  |  |  |
|   |     | Abe reported that MMHD received 7 proposals and once was chosen by the committee- CASA                      |                      |                 |  |  |  |  |  |  |
| _ |     | Healthcare Management.  |                      |                 |  |  |  |  |  |  |
|   |     | 5.3.2 Mayers Memorial Healthcare District Master Plan Construction Project                                  |                      |                 |  |  |  |  |  |  |
|   |     | <b>Management Firm:</b> Recommendation from Strategic Planning & Review Committee to Award Contract.        |                      |                 |  |  |  |  |  |  |
|   |     | No action was taken to allow for 5 days of protest time per the RFP/RFQ. A Special                          |                      |                 |  |  |  |  |  |  |
|   |     | Board Meeting will be set up for April 7th to vote on the Resolution 2025-06 Awarding                       |                      |                 |  |  |  |  |  |  |
| , | NFW | Contract for 2030 MMHD Expansion Project – Project Management Services.  NEW BUSINESS                       |                      |                 |  |  |  |  |  |  |
|   | 6.1 | Resolution 2025.03- Safety Officer:   | Cufaude,             | Approved b      |  |  |  |  |  |  |
|   | 0.1 | Resolution 2025.03 was approved.  | Hathaway             | All             |  |  |  |  |  |  |
|   | 6.2 | Service Excellence Initiative Committee:  |                      | 7111            |  |  |  |  |  |  |
|   |     | For the next 3 years, this committee is what was previously <i>Ignite The Patient</i>                       |                      |                 |  |  |  |  |  |  |
|   |     | Experience. Ryan is requesting 2 board members to be on the committee that meets                            |                      |                 |  |  |  |  |  |  |
|   |     | quarterly. The committee will then meet with the full board to report information.                          |                      |                 |  |  |  |  |  |  |
|   |     | Jeanne and Les volunteer for the committee-Ryan will send out calendar invites.                             |                      |                 |  |  |  |  |  |  |
|   | 6.3 | Review Revised Strategic Plan:  |                      |                 |  |  |  |  |  |  |
|   |     | Ryan further explained the changes in the Strategic Plan in the semi annual review.                         |                      |                 |  |  |  |  |  |  |
|   |     | Les suggested a road map outlining the Strategic Plan.  | Hathaway,            | Approved b      |  |  |  |  |  |  |
|   |     | Changing wording on page in <i>Monitoring</i> section from "The Committee will determine                    | Ferguson             | All             |  |  |  |  |  |  |
|   |     | whether any specific issues in the report from the CEO need to be reported                                  |                      |                 |  |  |  |  |  |  |
|   |     | to the Board of Directors"  |                      |                 |  |  |  |  |  |  |
|   | 6.4 | to "any specific issues under the CEO will be reported to the board of directors"  Policies and Procedures: |                      |                 |  |  |  |  |  |  |
|   | 0.4 | Board Compensation & Reimbursement  |                      |                 |  |  |  |  |  |  |
|   |     | Application for Inspection of Public Records MMH585   |                      |                 |  |  |  |  |  |  |
|   |     | Admission Criteria: Length of Stay Expectation  |                      |                 |  |  |  |  |  |  |
|   |     | Emergency Sewage and Waste Disposal   |                      |                 |  |  |  |  |  |  |
|   |     | Facility Closure – Notice in Advance  |                      |                 |  |  |  |  |  |  |
|   |     | Healthcare Worker Vaccination for Covid 19 – SNF  |                      |                 |  |  |  |  |  |  |
|   |     | Lippincott Procedures for Clinical Practices  | Hathaway,<br>Cufaude | Approved b      |  |  |  |  |  |  |
|   |     | LVNs in OPMedical   | Cujadae              | All             |  |  |  |  |  |  |
|   |     | Mass Casualty Incident Plan (MCI)   |                      |                 |  |  |  |  |  |  |
|   |     | OB-GYN Core Privileges  |                      |                 |  |  |  |  |  |  |
|   |     | Rapid Response to Clinical Deterioration  |                      |                 |  |  |  |  |  |  |
|   |     | Requirements For Swing Beds In Critical Access Hospital   |                      |                 |  |  |  |  |  |  |
|   |     | Sedation Assessment   |                      |                 |  |  |  |  |  |  |
|   |     |   |                      |                 |  |  |  |  |  |  |

Jublic 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 Director's documents are available online at <a href="https://www.mayersmemorial.com">www.mayersmemorial.com</a>.

Motion moved, seconded and approved.

## 7 **ADMINISTRATIVE REPORTS** 7.1 Chief's Reports: written reports provided in packet 7.1.1 DOO: written report submitted. Jessica received comments on the PIN 74 project that are being revised-dimension issues. Smoke dampers will be installed in Fall River- an ACHC regulation needed. Racks project presentation was last week and architect team recommended to move the Acute floor to a SNF OSHPOD status. The solar working crew is laying concrete currently- but timeline was moved to August 8th as the day of completion. 7.1.2 CFO: Travis updated that USDA will get back to him soon regarding the grant application. 7.1.3 CHRO: written report submitted. Libby updated that the FRJUSD Superintendent reached out regarding workforce programs for high school students, partnering with MMHD. Jeanne commended Libby regarding employee health and workplace injuries. Libby further explained MMHD's program that assists staff in continuing their education. 7.1.4 CCO: written report submitted. Keith updated that the Foam In, Foam Out campaign in Feb was successful and he is determined to continue the upward trend. He expanded on the Blood Culture Contamination rates for the Board. Keith also updated the board regarding the Visiting Nursing Program- Cerner has provided Lindsey Crum, Hospice Manager, with reps to better improve the Hospice Cerner system. Hospice nurses are currently crossing training to cover Acute and Outpatient, when needed. A Cardiac Ultrasound machine has been ordered. 7.1.4 CNO: written report submitted. Theresa reported the census is 78 patients, with a waiting list for the Memory Care unit. She reported that the Nursing Realignment Orientation went successfully. She further explained the gap in Home Health services and the difference between Home Health and the Visiting Nurses Program. Theresa explained that SNF has been creating Family Council meetings and the Ombudsman commended the staff strongly on their great council and engagement. 7.1.5 CEO: written report submitted. Ryan reported that the MRI was delivered to the FR campus yesterday and will be shared between 5 sites- Jack is working on adding to MMHD's license, as well as the CA license. He also further explained the issue with the CA meal premiums- resulting in \$257,000 being spent in this fiscal year. Ryan also mentioned that due to the unforeseen future with Medicare and Medicaid, he has placed a hiring freeze on new positions. 8 **OTHER INFORMATION/ANNOUNCEMENTS** Board Member Message: Feb EOM, successful audit (wording from last year), District is working towards offering new services, Dr. Sloat has 8.1 started in our RHC, TCCN and Payroll/Finance are now in the TCCN building- a few programs they're currently running. CNA classes will resume shortly. Board Education: Ch 11-15 and Enhancing Board CEO & Med Staff Collaboration-Ryan further explained the slides included in the packet- regarding provider burn out and appreciation. 8.2 Some board members expressed their interest in attending the Med Exec evening meetings, every other month. Jeanne requested New Board Member Orientation 9 MOVE INTO CLOSED SESSION: 3:45 pm Hearing (Health and Safety Code §32155) - Medical Staff Credentials

9.1

Allen Morris, MD

2. Kelsey Sloat, MD

Approved by All

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| 9  | i                         |  |                                  |  |  |
|----|---------------------------|--|----------------------------------|--|--|
|    |                           | 3.   | Aditi Bhaduri, MD (T2U)          |  |  |
|    |                           |  | Jean-Claude Bassila, MD (T2U)    |  |  |
|    |                           | 5.   | Mustafa Ansari, MD (UCD)         |  |  |
|    |                           | 6.   | Lin Zhang, MD (UCD)              |  |  |
|    |                           | 7.   | Ge Xiong, MD (UCD)               |  |  |
|    |                           | 8.   | Sophie Teng, MD (UCD)            |  |  |
|    |                           | 9.   | Massud Seyal, MD (UCD)           |  |  |
|    |                           | 10.  | David Richman, MD (UCD)          |  |  |
|    |                           | 11.  | Kwan NG, MD (UCD)                |  |  |
|    |                           | 12.  | Ricardo Maselli, MD (UCD)        |  |  |
|    |                           | 13.  | Marc Lenaerts, MD (UCD)          |  |  |
|    |                           |  | Jeffrey Kennedy, MD (UCD)        |  |  |
|    |                           |  | Alexander Duffy, DO (UCD)        |  |  |
|    |                           |  | Charles DeCarli, MD (UCD)        |  |  |
|    |                           |  | Norika Malhado-Chang, MD (UCD)   |  |  |
|    |                           |  | Michelle Apperson, MD (UCD)      |  |  |
|    |                           | 19.  | Sindhura Batchu, MD (UCD)        |  |  |
|    | MEDICAL STAFF APPOINTMENT |  |                                  |  |  |
|    |                           | 1.   | Shravani Nalla, MD (T2U)         |  |  |
|    |                           | 2.   | Manntej Sra, MD (Vesta)          |  |  |
|    |                           | 3.   | Majid Maybody, MD (Vesta)        |  |  |
|    |                           | 4.   | Caren Armstrong, MD (UCD)        |  |  |
|    |                           | 5.   | Courtney Wusthoff, MD (UCD)      |  |  |
|    |                           | 6.   | Vaishnavi Vaidyanathan, MD (UCD) |  |  |
| _  |                           | 7.   | Neggy Rismanci, MD (UDC)         |  |  |
|    |                           | Real Estate Up                                 | odate (54956.8)                  |  |  |
|    | 9.2                       | Property: Mas                                  | onic Lodge, Fall River Mills CA  |  |  |
|    |                           | Real Estate Ne                                 | egotiator: Ryan Harris           |  |  |
|    |                           | APN: 018-200-                                  |                                  |  |  |
|    | 10.3                      |  | odate (54956.8)                  |  |  |
|    |                           | Property: Fall River Arts, Fall River Mills CA |                                  |  |  |
|    |                           | Real Estate Negotiator: Ryan Harris            |                                  |  |  |
| _  |                           | APN: 018-200-                                  | 044                              |  |  |
| 10 | RECC                      | NVENE OPEN SE                                  | SSION: 4:05 pm                   |  |  |
| _  |                           | 510  |                                  |  |  |

11 Adjournment: 4:05 pm. Next Meeting is April 30, 2025 in Fall River.

I, Tearne Utterback Board of Directors President certify that the above is a true and correct transcript from the minutes of the regular meeting of the Board of Directors of Mayers Memorial Healthcare District

ard Member Board

board clerk

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