

Chief Executive Officer
Louis Ward, MHA



Mayers Memorial Hospital District

Board of Directors
Beatriz Vasquez, PhD, President
Abe Hathaway, Vice President
Laura Beyer, Secretary
Allen Albaugh, Treasurer
Jeanne Utterback, Director

Board of Directors
Quality Committee
Minutes

November 11, 2020 @ 1:00 PM
Fully Remote Zoom Meeting

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 Laura Beyer called the meeting to order at 1:00 pm on the above date.			
	BOARD MEMBERS PRESENT:		STAFF PRESENT:	
	Laura Beyer, Secretary Jeanne Utterback, Director		Candy Vculek, CNO Jack Hathaway, Director of Quality Jessica DeCoito, Board Clerk Val Lakey, ED of CR & BD Brigid Doyle, Staff Development Barbara Spaulding, Volunteer Services Sondra Camacho, Activities	
	ABSENT:			
2	CALL FOR REQUEST FROM THE AUDIENCE – PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS			
	None			
3	APPROVAL OF MINUTES			
	3.1	A motion/second carried; committee members accepted the minutes of October 14, 2020	Utterback, Hathaway	Beyer – Y Utterback – Y
4	REPORTS: QUALITY FACILITIES: NO DEPARTMENT REPORTS			
5	REPORTS: QUALITY FINANCES: NO DEPARTMENT REPORTS			
6	REPORTS: QUALITY			
	6.1	MARKETING: A lot of education and messaging on COVID has been the focus. Community Newsletter goes out every Wednesday with a lot of links for more information, county information – 5 people in last week and now we are up to 52 people from around the community who are receiving this newsletter. Text message group with updates has been created. Helping Social Services and Activities and all other departments to help keep our residents, resident families, patients and community members up to date.		
	6.2	SAFETY QUARTERLY REPORT: COVID report is completed each day of the week. PPE Bill AB2537 will go into effect soon and we must have reports available and stock pile set up soon. Dana Hauge has been a huge help in the safety planning for employees. Installing a PANIC button in certain locations throughout the facility.		
	6.3	VOLUNTEER SERVICES: Not a whole lot going on because of the COVID restrictions. Keeping everyone up to date with things. Worries are what our volunteer numbers will look like after COVID restrictions are taken down.		
7	REPORTS: QUALITY STAFF			
	STAFF DEVELOPMENT: 100% re-certified with our CNA staff. Lots of adjustments in trainings and learning have been made with COVID restrictions. COVID content is provided and required for staff and it has been seen in the data that staff choose more			

		COVID modules than the others. New Staff Orientation was created through Relias to help with COVID restrictions in on boarding.		
8	REPORTS: QUALITY PATIENT SERVICES			
	8.1	ACTIVITIES: Hand glove visit is a huge success with residents and families. A lot of parades have been set up so we can provide an activity and an opportunity to families to see their loves ones from afar. Still doing window visits, Zoom calls and we now have a lap top set up for families and residents to send emails back and forth. Competency assessment and validation has been a huge priority.		
	8.2	SOCIAL SERVICES: no questions or comments from submitted written report.		
	8.3	SNF Events/Survey: Hope to begin communal in person visits with residents and families. Still lots of restrictions that will have to be followed. Plans are being put into place. Prepping for survey – double checking and working through new processes. With more COVID positives in the area, we are being extra careful and planning on extra staff with the help of Registry.		
	8.4	INFECTION CONTROL & EMPLOYEE HEALTH: High participation in the flu shot for employees.		
9	DIRECTOR OF QUALITY			
	9.1	CMS Core Measures: HCAHPs is the persistent issue and getting it worked out. Our HCAHPS numbers look really good. STARS: made it to 3 stars!! Great job team! To get to 4 stars we have three measures we are going to focus on 1) Residents with a decline in Activities of Daily Living 2) Antipsychotics prescribed 3) loss of mobility. So close to 4 Stars – just need to focus on making more improvements.		
10	New Business			
	10.1	Policies: Conflict of Interest	<i>Utterback, Beyer</i>	Beyer – Y Utterback – Y
	10.2	Patient Safety First: complete some more research and return to next meeting with additional thoughts. Is this required? Are we already reporting on this in another report?		
11	ADMINISTRATIVE REPORT: NO REPORT THIS MONTH. LOUIS WARD IS IN A HOSPITAL COUNCIL MEETING.			
12	OTHER INFORMATION/ANNOUNCEMENTS:			
13	ADJOURNMENT: 2:24pm - Next Regular Meeting – December 9 th			

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.