

Mayers Memorial Hospital District

Chief Executive Officer, Interim Louis Ward, MHA

Board of Directors

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

BOARD of DIRECTORS

<u>MEETING AGENDA</u>

September 23, 2015 1:00 PM

Board Room (Fall River Mills)

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 – Abe Hathaway, President	
2	Persons wishing to address the Board are requested to fill out a "Request Form" prior to the beginning of the available from the Clerk of the Board (M-W), 43563 Highway 299 East, Fall River Mills, or in the Board Room) documents to present for the members of the Board of Directors to review, please provide a minimum of nine President announces the public comment period, requestors will be called upon one-at-a time, please stand a and comments. Each speaker is allocated five minutes to speak. Comments should be limited to matters jurisdiction of the Board. Pursuant to the Brown Act (Govt. Code section 54950 et seq.) action or Board cannot be taken on open time matters other than to receive the comments and, if deemed necessary, to rematter to the appropriate department for follow-up and/or to schedule the matter on a subsequent Board Age	meeting (forms are . If you have copies. When the nd give your name s within the discussion fer the subject
	SPECIAL PRESENTATION — Resolution 2015-6 Assemblyman Dahle (Attachment 1)	ACTION ITEM
3	APPROVAL OF MINUTES: 3.1 Regular Meeting – August 26, 2015 (ATTACHMENT A)	ACTION ITEM
4	OPERATIONS ► Chief's Reports (CEO, CNO, CCO, IHF CEO) (ATTACHMENT B) WRITTEN REPORT PROVIDED — ADDITIONAL COMMENTS AS NEED VERBALLY	Information
5	5.1 Finance Committee – Chair Allen Albaugh 5.1.1 Committee Meeting Report 5.1.2 August 2015 Financial review, AP, AR and acceptance of financials	Information ACTION ITEM
	5.2 Strategic Planning Committee – Chair Abe Hathaway 5.2.1 Committee Meeting Report (no Sept. Meeting) 5.3 Quality Committee – Chair Mike Kerns	Information
	5.3.1 Committee Meeting Report	Information

6	NEW BUSINESS 6.1 Annual Board Bylaw Review — First Reading (Attached as PDF) 6.2 Board Assessment Process (ACHD)	Discussion Discussion
	6.3 November Board/December Board Meeting Dates	ACTION ITEM ACTION ITEM Discussion
7	 7.1 INFORMATION/REPORTS/BOARD EDUCATION/ANNOUNCEMENTS Board Education – QHR Webinar 2nd Tuesdays 2015, 10 a.m. HGA Site Visits –Sept. 22, Sept.28 (WebEx), Oct. 12 Measure D Oversight Committee Meeting – October 6 – 4:00 pm, Burney Med Staff – October 13 JPIA Meeting – October 14 SP Committee Meeting – October 13 – 11:00 am, Fall River Quality Committee Meeting – October 15 – 12 noon, Fall River 	Information/ Discussion
8	ANNOUNCEMENT OF CLOSED SESSION: 8.1 Government Code Section 54952 Quality Assurance: Quality Improvement Issues, Medical Staff Report (Dr. AJ Weinhold, Chief of Staff)	ACTION ITEMS
	Henry Patterson, OD, Reappointment	
	Rhett Wiggen, CRNA - Reappointment	
	Lloyd Pena, MD - New appointment	
	8.2 Government Code Section 54957: Personnel – Public Employee Performance Evaluation – Review Interim CEO Review	
	CEO Position	
9	RECONVENE OPEN SESSION: REPORT ACTIONS TAKEN DURING CLOSED SESSION	
10	ADJOURNMENT: Next Regular Meeting October 28, 2015 – 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 09/17/15

ATTACHMENT 1

Recognizing Assemblyman Brian Dahle AB1290 Resolution 2015-6

WHEREAS, it is Mayers Memorial Hospital District's sincere pleasure in recognizing Assemblyman Brian Dahle for his continued support of the district

WHEREAS, the Mayers Memorial Hospital District recognizes the efforts of Assemblyman Dahle and his staff for their efforts

WHEREAS, Mayers Memorial Hospital District recognizes Assemblyman Dahle for authoring Assembly Bill 1290 and the promotion and passage of said bill

NOW, THEREFORE, BE IT RESOLVED, by Mayers Memorial Hospital District that we do hereby recognize Assemblyman Brian Dahle for the outstanding efforts in ensuring the residents of Shasta, Lassen and Modoc County have a quality healthcare facility

PASSED AND ADOPTED on September 23, 2015, by the following vote:

AYES:

NOES:

ABSENT:

ABSTAIN:

Abe Hathaway, President
Board of Directors
Mayers Memorial Hospital District

Beatriz Vasquez, PhD, Secretary Board of Directors Mayers Memorial Hospital District

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A.T.T.	
AYES:	
NOES:	
ABSENT:	
ABSTAIN:	
Abe Hathaway, President	Beatriz Vasquez, PhD, Secretary
Board of Directors	Board of Directors
Mayers Memorial Hospital District	Mayers Memorial Hospital District

PASSED AND ADOPTED on September 23, 2015, by the following vote:

Attachment A DRAFT

Mayers Memorial Hospital District Board of Directors – Regular Board Meeting

Date: August 24, 2015 Time: 1:00 P.M.

Location: Mayers Memorial Hospital

Burney, 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.)

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

Abe Hathaway, President Mike Kerns, Vice President Beatriz Vasquez, Secretary Allen Albaugh, Treasurer Art Whitney

Board Members Absent: none

Staff Present: Louis Ward, Interim CEO; Valerie Lakey, Board Clerk; Travis Lakey, CFO; Sherry Wilson, CNO; Keith Earnest, CCO

2. CALL FOR REQUEST FROM AUDIENCE TO SPEAK TO ISSUES OR AGENDA ITEMS: None

- **3. APPROVAL OF MINUTES** A motion/second and carried, the Board of Directors accepted the following minutes
 - 3.1 Regular Meeting July 27, 2015 (Kerns, Vasquez)

4. Reports

4.1 401K Annual Report — John Grimmet from Tri Counties Bank was present to give the annual 401k report. Written report provided. **(PDF Attachment)** There is \$4.75 million of assets in the plan — last year it was at \$3 million.

4.2 Workers Comp/Safety FYE15 Annual Report - FYE15

- ► First Aide Injuries: 24
- ▶ Reportable Injuries: 4 (2 still off, 1 claim denied, 1 doing sitting position so coordinating wages with Alpha)
- ▶ MOD rating went from 1.17 to .88 = savings of \$4263 a month
- Majority of claims are SNF Patient handling. Working with Terry King and PT for education and training.

5. OPERATIONS REPORT:

<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, Interim CEO — Highlighted items: Management meetings, TEAM MAYERS, Financial Advisory Committee. HR - Libby Mee is new manager. Hired an ER Manager — from UCSF; she is very qualified with a great resume. We have worked with Imaging to reduce cost and improve access to care for patients. We are in latter stage of USDA process. Hathaway noted he reviewed SSV contract — We need to look at language; some of it is outdated. Keith Earnest, CCO — Imaging Department is happy with outcome. Lab — working on diagnosis codes with lab and cleaning up our system. We are working with MVHC and trying to facilitate a smoother process. Technically we are ready for ICD-10. October 1 is the start date. There are new locks on lab door. We are also looking at opportunity to expand PT. Sherry Wilson, CNO — Surveyors are here. They will exit tomorrow, they arrived Monday. Star rating comes from the survey. There are some other criteria including quality for the entire facility. There is a new method of calculating the stars — relevancy of the stars was questioned. Our Immediate Jeopardy fell off in June so our rating should go up. We will send a copy of star criteria with the minutes. Albaugh asked about CNA class — we have applied to do the class

July 27, 2015 Page 2 of 2

again. It will take 30-90 days to get approval. We have to be recertified to have a class on our site. We will also work with Shasta College. There are 2 students that completed the last class that haven't tested yet. We have hired 8. We need 8-10 more. To be fully staffed we would have about 40 CNA's. There are over 500 hours of overtime in on PP in both facilities. Working of ways to retain CNA's.

6. BOARD COMMITTEES:

6.1 Finance Committee - Chair Allen Albaugh

- **6.1.1 Committee Meeting** CRNA's we are tracking all of their time at the facility. We are considering making the second CRNA an employee. All of the current CRNA's time that is an employee was allowed on report. (See Finance notes)
- 6.1.2 July 2015 Financials (Whitney, Kerns) Approved All
- 6.1.3 FY16 Operational Budget Resolution 2015-3 Roll Call (Albaugh, Vasquez) Approved All (5-0 vote)

6.2 Strategic Planning Committee - Chair Abe Hathaway

6.2.1 Committee meeting —There was a lot of talk about JPIA and physician recruiting. (See SP notes.)

6.3 Quality Committee – Chair Mike Kerns

6.3.1 Committee Meeting Report – Kerns reported on the Quality meeting. (See Quality notes.)

7. NEW BUSINESS

USDA LOAN APPROVED! Lakey spoke to Anita at USDA today. We just received approval today.

7. INFORMATION/BOARD EDUCATION/ANNOUNCEMENTS

- **▶** ACHD Committees
- ▶ Board Education QHR Webinar 2nd Tuesdays 2015, 10 a.m.
- HGA Site Visits
- ► Fair Booth September 3 7, 2015. Sign up with Val
- ► JPIA Meeting September 9 Alturas (cancelled)
- **▶** Board Quality Thursday, September 10 Burney
- ▶ Blood Drive September 15th
- ► Employee Appreciation Lunches Sept 15 (FR), Sept 17 (Burney)

8. ANNOUNCEMENT OF CLOSED SESSION: NONE

9. RECONVENE OPEN SESSION - NO CLOSED SESSION

10. ADJOURNMENT: There being no further business, at the hour of 3:10 p.m., President Hathaway declared the meeting adjourned. Next meeting September 23, 2015 – Fall River Mills



Mayers Memorial Hospital

Statistics	August YTD FY16 (current)	August YTD FY15 (prior)	August Budget YTD FY16
Surgeries (including C-sections)	20	14	13
> Inpatient	8	6	2
➤ Outpatient	12	8	11
Procedures (surgery suite)	13	7	8
Inpatient	362	245	357
Emergency Room	723	704	660
Skilled Nursing Days	4190	4572	444
OP Visits (OP/Lab/X-ray)	2707	2446	2822
Hospice Patient Days	255	220	166
PT	2013	1915	1920
Ambulance Runs	75	66	66

Operations District-WidePrepared by: Louis Ward, MHA, Interim Chief Executive Officer

On August 26th we received the call our community has been waiting on for the better part of a decade. On the other end of the call Anita Lopez from the Sacramento USDA Rural Development office delivered great news, the funding for our hospital expansion project was APPROVED. Since the call we have done a small amount of celebrating as it is important to celebrate your successes, but we have been actively working on the next steps of our journey to deliver our community a new Emergency Department, Imaging Department, Laboratory, and Patient areas. We welcomed HGA Architects and Engineers earlier this month; they are the firm we decided to deliver a design and space program which will be instrumental in the next leg of the process, the request for qualifications (RFQ) of reputable construction firms to actually construct the building. Allen and Abe joined us on their initial visit in which HGA's goal was to learn as much about our current building as well as our needs vs. wants. It was a great exercise for us all, one where I know we all learned a great deal about our current building as well as how an expansion will impact the mechanical, civil, structural, plumbing, and electrical systems. We look forward to working with them multiple times over the next 6 weeks to develop and finalize a conceptual plan and drawing of our community's new hospital expansion.

On Wednesday September 2nd, 2015 I met with Congressman LaMalfa at a lunch setup by Suzanne Ness, VP of the Northern Hospital Council. He was very happy to hear of the USDA approval, as you know he has been a big supporter of preserving healthcare services in our area. He is very willing to assist us with whatever we may need in the future. As well as the Congressman, Mike Wiltermood (CEO of Enloe) was there. I spoke with him at length about the ER they just finished building, also a design build project. He was very helpful and also offered to send his project manager up to us to give us a few pointers on items they would have done differently if provided the information before hand. We will surely take him up on his generous offer. The California Department of Public Health fire life safety performed their annual survey of both facilities earlier this month. All systems were inspected including our new fire panel, all pull stations, strobes, sprinklers, kitchen hood, fire compartments, and inspector valves. We passed all inspections but did have some minor issues that we are currently writing a plan of corrections (POC) for. We did have some documentation issues

with the fire panel vendor (precision out of Redding) but they have already been onsite to do some follow up testing and produce documentation to satisfy CDPH.

We met with the EMS staff to roll out our plan to move to 12 hour shifts. The primary reason for this change from our current 48 hour shifts to that of 12 hour shifts is we feel strongly that this will improve our ability to provide a higher level of patient care as we intend to mitigate all risk of sleep deprived caregivers attending to patients. Along with a higher level of patient care this change seeks to improve the working conditions in our ER. We are hopeful this change will improve the morale as our employees will be more rested and have more time to be with family as it will be unnecessary to sleep multiple nights at the hospital away from home. We did not come to this change lightly, many of us have met with many current employees as well as many of the 14 employees we have lost in the past year and the resounding outcome of these meetings was if we were to change the working conditions including the long hours and broken sleep, many would be willing to come back in some capacity. This means that we can collaborate with the Burney Fire District (also on 12 hour shifts) to retain, recruit, and provide educational opportunities to a shared group of EMS staff.

I attended the town hall meeting earlier this month regarding the closure of the Fall River Cassel Road Bridge I shared with those that were in attendance that with this closure the ambulance response time to the Big Eddy Estates area will increase considerably. Generally the ambulance response time to the Hupa Court area is 6-8 minutes, with the 911 call to Physician time being less than 25 minutes. The bridge closure has doubled the response time, with the 911 call to Physician time for that area now being 45-50 minutes. All EMS staff have been alerted of the closure and have been educated on the new route to the area.

Respectfully Submitted by, Louis Ward, MHA Interim CEO

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

Laboratory

- Chris Hall, CLS, Laboratory manager, has been working with the architects on the design for the new lab.
- The new chemistry analyzer has been installed. It is up and running and will go live with the interface cable between the analyzer and Paragon is installed.
- We are working on CLS recruitment with agencies. Some interviews are pending this week.

Physical Therapy

- Daryl Marzan, Physical Therapist, will assume the role of PT manager as of October 1st.
- Referrals to the PT department have been steady.
- The PT department has been working with the surgery department to improve the continuum of care.
 Dr. Guthrie's orthopedic surgical patients are prescheduled for their post-op physical therapy prior to surgery. Often time a physical therapist is attending the pre-op appointment to meet the patient and evaluate their needs prior to surgery.

Pharmacy

• Elizabeth Carpenter, Pharm Tech, has joined the pharmacy team. She also is EMT working on Mayers ambulance.

Respiratory Therapy

- The Respiratory Therapists have worked Mountain Valley's Health Fairs and the InterMountain Fair performing screenings. Several patients were identified as needing further testing at these events. Referrals from their physicians have started to occur increasing our numbers.
- Did you know that the Respiratory Therapists travel on our ambulances while transferring an intubated patient? They are also present for c-sections. Evidence shows that having a RT present at C-sections reduces neonatal morbidity and mortality.

Imaging

- The imaging department led by manger, Doreen Parker, is working with the architects on the design for the replacement department in the expansion project.
- The new technologist schedule is in its third trial week and will be refined based on lessons learned.
- Doreen Parker, Imaging Manager, and Colleen Hickman, Financial Counselor, have been collaborating regularly to avoid write-offs and billing denials.

Cardiac Rehab/Telemedicine

- We will be saving \$700 per month as we are no longer contracting with UC Davis for telemedicine services.
- Trudi Burns, manager, and Michelle King, outpatient scheduler, are working with partnership on insurance authorizations for cardiac rehab. Currently four partnership patients qualify but we are unable to obtain authorization.

<u>Critical Access Hospital</u> Prepared by: Sherry Wilson CNO/Acute

Quality Improvement

• The quality department has been making some progress in the file completion for HCAHPS surveys to be taken over by our vender Healthstream. Chris Broadway IT manager has been working diligently to produce a file that is securely up loadable to the vender with all of the necessary data present. It appears that there are just a couple minor changes needed to initiate the first file transfer and get the surveys initiated and results reported back to us and to CMS. This will be great for MMH in that we will start to see scores produced in Hospital Compare and find where we need to implement performance improvement by national standards. Also, Sherry Wilson CNO and I have finally obtained the access needed by QNET to be able to upload data for benchmarks required, follow trends, obtain reports, and gain insight on projected changes in healthcare quality initiatives. Lastly, we are making some progress in data collection and have ideas to plan, implement and evaluate the processes so that data transfer is smoother and done in a timely fashion. It is through trial and error that we will get the department running optimally, it is a process, and I look forward to seeing it grow and expand to make MMH a desirable CAH for our community to be proud to seek care in.

Thank you, Holly Green BSN, RNC/Quality Director

Outpatient Medical

• OPM Services will be providing a wound care clinic with Dr. Zittel once a month at the Burney Annex in the old urgent care area. The Burney wound care clinic will be open in October, Dr. Zittel will inform of us of his availability on September 24th.

Skilled Nursing Facility - Burney & FRM

Submitted By: Sherry Wilson, RN, CNO

Surgery

Census is at

- August was the first month without a full time employee, so two RN's had some overtime due to being short staffed on occasion.
- However, with Dr. Syversons vacation, surgery has seen a decrease in numbers slightly..... but it is trending up again
- One EGD scope was sent out for repair and maintenance.
- Dr. Guthrie has done a Total Knee Replacement every time he is here. J He is very happy with the newly purchased Precision saw.

*Bolded double-lined boxes indicate rotating Administrator On Call (AOC)

COMMITTEE MEETING MINUTES

Quality – August 13, 2015

Strategic Planning - August 24, 2015

Finance – August 26, 2015

DRAFT
Attachment A

QC Attendance

Mike Kerns, Board Chair

Beatriz Velasquez, PhD,

Committee

Louis Ward, Interim CEO

Laura Dolman-Beyer -

Community

Other Staff Present

Travis Lakey, CFO

Holly Green, Obstetrics Manager

Shelley Lee, RN, Infection

Preventionist

Bob May, Ambulance

Adam Dendauw, Respiratory Mary Ranquist, RN, Hospice

Keith Earnest, PhD, CCO

Pam Sweet

Absent

AJ Weinhold, Chief of Staff Sherry Wilson, RN, CNO

(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.)

SUBJECT	DISCUSSION	
CALL TO	The meeting was called to order at 12:00 pm by Chairman Kerns in Fall	
ORDER	River Mills	
Public Request	None	
to Speak		
Minutes	Minutes from the July 16, 2015 quality committee meeting were approved as presented M/S/C (Lee/Green). All Approved	Approved
Department Reports	Volunteer Services - Barbara Spalding - Move to August	Reports
	Respiratory Therapy Services (RT) - Adam Dendauw, RT - Dendauw	
	included a Power Point presentation (Attachment A). Dendauw reported	
	RT has received kudos from managers, physicians and other staff and	
	letters of thanks from patients and their family members for his excellent	
	care. He has been actively expanding the role of RT in the facility and ambulances.	
	Out of date equipment has been modernized to current standards as have policies and procedures.	
	Hospice - Mary Ranquist, RN - Ranquist discussed results of satisfaction	
	surveys (Attachment B) and the 5 core measures assessed. Results of the	
	surveys have been sent to CMS, but CMS has not begun to assimilate the	
	data and won't until 2017 or later.	
	Lab - Keith Earnest, PhD - Lab is working to resolve diagnostic code issues.	
	SNF - Shelley Lee, RN - There was 1 deficiency reported to the state in July	
	involving a resident who fell and was injured. The state determined there	
	were no Neurological checks done on the patient who had a previous	

unwitnessed fall. We have a policy in place stating we will do neuro checks under these conditions, but no checks were done. Nursing education is underway to satisfy the Plan of Correction. Finance - Travis Lakey - Report attached (Attachment C) Lakey reports he is still dealing with the 203 Medicare Audit. Noridian refuses payment on CRNA charges that Palmetto routinely paid. Noridian has been challenged in court 3 times and lost, but the ruling was overturned by CMS every time. Legal counsel contends it is not worth the time or cost to contest further. Committee asks that metrics be developed to assist them in responding when community members complain about incorrect billing. They would like to have statistics regarding incorrect billing. Lakey and Ward will work together to extract the data. Committee suggested the Quick Pay discount be made more noticeable in our social media, in the lobby and upon admission. Ambulance - Bob May - Report attached (Attachment E) May reported the new ambulance ran its first call this morning. The new ambulance is equipped with a Garmin GPS device. Committee discussed the trend toward phasing out Paramedics. Statistics show there is no difference in patient outcomes. Outcomes are mostly determined by the Ambulances distance from the incident than by the level of ambulance staff Ambulance staffing patterns are being reviewed. Under consideration is changing the shifts from 24 hours to 12. Most ambulance providers have gone to 12 hour shifts. Committee is asked to not discuss this subject outside the board room until the program is fully developed. Staff resistance is expected. Kerns asked that this topic be moved to the Finance Committee agenda. May is working with the P&P Coordinator to improve Ambulance policies and procedures. Quarterly **Core Measures** - Holly Green explained there are 8 Core measures we are required to report to the Stat. She is working with Louis to figure out the Reports best way to collect the data from Paragon. Patient Safety 1st - Green reported she has the OB and Surgical data and is waiting on the Infection Control data. The due date has been extended to the 18th.

	T	
	Health Screen patient satisfaction scores - C. Broadway is having trouble uploading the platform. Hope to have the problems resolved by the end of the month.	
	Early elective inductions (Attachment D) - Green presented graphs covering the most recent 3 year period which show the number of early elective inductions has decreased to a reasonable level. Committee would like to see graphs going back as far as possible. Green will provide.	
	Infection Control - Shelley Lee displayed and explained the pocket Antibiogram. It will be placed in the ER, nurses stations and clinics from Burney to Alturas.	
	1st Quarter 2015 Infection Report (Attachment E) distributed and discussed.	
	Lee discussed the respiratory infection outbreak in the Burney facility and explained the steps being taken to reduce the likelihood of the infection spreading.	
	New policies regarding pneumococcal vaccine for SNF were distributed and discussed.	
	Infection Control has been awarded a grant from the IHF to purchase biohazard waste cans that will comply with OSHA requirements. The cans were ordered today. Purchasing did a good job of shopping and we were able to purchase 44 more cans than expected, so there will be enough to supply the entire facility.	
	At the last meeting, Lee was asked to find data to compare MMHD's infection rates to other hospitals. So far, she has not been able to fid the data. She will continue researching.	
	Infection control reports are being overhauled.	
	Lee is working with the Grant Writer (Margaret Truan) to find funds to purchase hand hygiene stations for use in the event of a water outage. We currently have no plan in place. The goal is to purchase 5 stations.	
Standing	Monthly	Reports
Reports	EMR – Meaningful Use – Louis Ward – Ward met with representatives	
	from McKesson earlier today. They talked about ICD10 readiness for	
	10/1/2015 and have entered into 2 contracts for a library of codes and a compliance advisor to verify the tested ordered is consistent with the	
	diagnosis. The test system will be updated 9/1/15 and the live system will be updated 10/1/2015.	

	IT is working in tandem with Radiology to create an interface with MVHC similar to the lab interface to allow electronic ordering of imaging through Success EHS.	
	Sacramento Valley Med Share or HIE - C. Broadway and Ward are working together to create an interface. A contract has been signed, but requires some tweaks to comply with our cyber insurance contact.	
	Meaningful Use - Looking much better than a few months back.	
	SNF - Shelley Lee for Sherry Wilson - Still expecting the State Survey Team any day.	
	Quality – Holly Green - Wording on updating policies to meet current standards	
	Green and Wilson are looking at clinical pathways to help in the upload. Looking for a method to identify each diagnosis and hope to take the information out of the patient chart.	
	Performance Improvement in OB	
New Business	Policies & Procedures (Vasquez/Ward) Approved All – • Approval of Fair Credit Reporting Act	
	September Meeting - September 10th 12 Noon - Burney Board Room	
Closed Session	No closed session	
Adjournment	Meeting adjourned 1:57 pm	
A 4'		

Minutes By: Pam Sweet

MAYERS MEMORIAL HOSPITAL STRATEGIC PLANNING COMMITTEE MEETING MINUTES — AUGUST 24, 2105 — BURNEY

BSPC Attendance:

Staff Present:

Mike Kerns

Valerie Lakey, Board Clerk

Abe Hathaway

Travis Lakey, CFO

Louis Ward, Interim CEO

Libby Mee, HR

Other: Beatriz Vasquez, PhD

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	testimony, deliberations and action taken.)	
SUBJECT	DISCUSSION	
CALL TO ORDER	The meeting was called to order by Hathaway at 11:00 am in Burney	
Requests Audience to Speak	None	
Minutes	July 27, 2015 Strategic Planning Committee meeting minutes. No objections – <i>Approved (Kerns, Hathaway)</i>	Approved
HR Department Report	 Libby Mee was present to talk about direction of HR department. See Power Point (attached) Contract staff connection - goes to over 700 agencies. More for temporary assignments. Val will send Libby contact for job email Include job descriptions on web site What skills do we need in the next 5 years? Retainment and retention – establish and utilize wage scale, employee incentives, looking at individual departments. Kerns – sees need for leadership development Mandatory management training, training in specific general areas. Training schedule – annually. Went over duties and responsibilities Hathaway inquired about minimum wage bump – currently at 9.25 for lowest – minimum wage is going to \$10 – will have to equitable Kerns would like to see a monthly 5 minute report (every other month in Fall River) Look at why we do things? Should we still be doing it this way? 	Report
JPIA Report	 Kerns and Ward attended the JPIA meeting in Alturas. Still in the developmental process. What is important in each district? Physician recruitment is one area – Lakeview has hired a recruiter. Only pay when there is a successful recruitment. Discussion about registry and CNA's. Work collaboratively. Potentially have the class rotate through the facilities. Potentially use the same external HR resource 5 member board for JPIA (one at-large) 	Report
Other/USDA	 Question on state level as to if AB8 revenue is secured. USDA state level sent to Federal with strong state approval Sept 10 for federal meeting – hope to get approval at that 	Information

MAYERS MEMORIAL HOSPITAL STRATEGIC PLANNING COMMITTEE MEETING MINUTES — AUGUST 24, 2105 — BURNEY

	 meeting Meeting days and topics 299 Collaborative – Physician recruitment, HIE 	
Adjournment	Meeting was adjourned at 12:15 pm	

By: Valerie Lakey, Board Clerk

Future Agenda Items:

Emergency Room SSV Contract

MAYERS MEMORIAL HOSPITAL DISTRICT

BOARD FINANCE COMMITTEE MEETING MINUTES — AUGUST 26, 2015 9:00 A.M.

BFC Attendance: Louis Ward, Interim CEO Travis Lakey, CFO

DRAFT
Attachment A

Valerie Lakey, Clerk to BODs Art Whitney

Allen Albaugh

Other: Marlene McArthur, Beatriz Vasquez

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CHRIEGE	taken.)	
SUBJECT	DISCUSSION	
CALL TO ORDER	The meeting was called to order by Albaugh at 9:00 AM in Fall River Mills.	
Requests from Audience to Speak	None	
Minutes	The minutes from the BFC meeting held 07.27.15 were approved. (Whitney, Albaugh)	Approved
Financials	 July Financials – (Whitney, Albaugh)- Approved All – Notations/Comments: Revenue was poor, but tracks with revenue for prior year. Surgery was slow as Dr. Syverson was on vacation. We will pay off EHR loan when we get IGT. This will lower our debt obligation by about \$60,000/month which is about our current monthly deficit. Registry spend is high. We looked at it this week. We reviewed one year of invoices - \$72/Nurse, \$58/LVN, \$42/CNA. We are trying to fill in shifts – let our people pick up more shifts at double time. Trying to recruit more staff. We are about \$13 – Redding is \$15-18/hour. Whitney said it is the geographic area. Talked about having a scheduler to schedule ACUTE/SNF – will save a lot on registry. Give an incentive for reducing hours on registry. Currently, Theresa does acute, Kathy does ER, Nola – FR staff, Sharon Sonya – Burney SNF. This is the fastest and easiest way to cut into the deficit. A Scheduler would be a low cost position with a high return Hired a new ER manager- 6 years at UCSF. Great resume. Let her know about current environment. Currently October 1 start date – hoping for sooner. Ward will stay in contact with her once a week until then. Work with her when she is in town. There is an ER meeting on September 9 – looking at changing ambulance shifts. Been researching payroll records. Checked around with other facilities to see what they are doing. There is potential to work collaboratively with Burney Fire. Looking at 12 hour shifts. Looking at impact on patient care. 	Approved

MAYERS MEMORIAL HOSPITAL DISTRICT

BOARD FINANCE COMMITTEE MEETING MINUTES - AUGUST 26, 2015 9:00 A.M.

	 MINUTES — AUGUST 26, 2015 9:00 A.M. For cash flow – Albaugh asked for a projection on obligations and collections. Members of Financial Advisory Committee – will begin meeting. (Travis, Louis, Marlene, Libby. Adam, Lisa) We have made a schedule for department presentations. Will work with FAC prior to board committee report. Staff incentives were discussed NO fair animals will be purchased Accounts Payable/Accounts Receivable (Whitney, Albaugh) – Approved All FY 2016 Budget Recommendation for Approval to full board (Whitney, Albaugh) – Approved All 	
Building Project USDA Capital Campaign	 Anita at USDA is recommending approval of our USDA Loan and is sending it to the national office. There is a loan meeting on Sept. 10 Marlene McArthur, IHF CEO reported on the Capital Campaign – She said it is still sensitive area as we don't know where we are going with the campaign. There is about \$276,000 in the bank. Need to contact all of the donors. Room naming sponsors, etc. Needs to be assessed carefully before moving forward with the community. Need to be able to bring information to employees. All needs to be consistent and positive. Albaugh would like to set something separate up for the new building. (Revenue and expense) Project financials. HGA meetings August 31, Sept 14 and Sept 28. There service is \$95,000 – they will help us find a project manager. We have paid them for some work on the PAR. Whitney asked when we can use Capital Campaign funds – after we have USDA approval and contact with donors. County funds - \$400,000 – hasn't gone to supervisors because the project hasn't been approved yet. Agreement need to be re-written, presented to MMHD board and then Board of Supervisors. Lakey said he was told county money was last money, not first like we were previously told. USDA has questions about AB8 being guaranteed money. McArthur said once there is approval she will get things realigned. Community as a whole hasn't really been approached yet. 	
IGT Documents/Credit Line	Waiting on state (DHCS) for letter – then Tri Counties will transfer the money. Should be the first week of September. Should get funds back between October –	
Other	December. • Donations from our vendors for Foundation, etc.	

MAYERS MEMORIAL HOSPITAL DISTRICT

BOARD FINANCE COMMITTEE MEETING MINUTES — AUGUST 26, 2015 9:00 A.M.

	Questions about how much we spend with Aramark	
	Golf Tournament - \$25,000 net - \$7000 more than last year - \$6000 to IHF investment account - \$18,000 to fetal	
	monitoring equipment.	
	Update on resale and thrift store.	
	Hanna scholarship - \$17,000 for BSN student	
Adjournment	Meeting was adjourned at 10:41 am	

By: Valerie Lakey, Board Clerk