



Mayers Memorial Hospital

Chief Executive Officer
Louis Ward, MHA

Board of Directors

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

BOARD of DIRECTORS
MEETING AGENDA
November 29, 2017 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 – Mike Kerns, President	
2	CALL FOR REQUEST FROM THE AUDIENCE: PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS: Persons wishing to address the Board are requested to fill out a "Request Form" prior to the beginning of the meeting (forms are available from the Clerk of the Board (M-W), 43563 Highway 299 East, Fall River Mills, or in the Board Room). If you have documents to present for the members of the Board of Directors to review, please provide a minimum of nine copies. When the President announces the public comment period, requestors will be called upon one-at-a time, please stand and give your name and comments. Each speaker is allocated five minutes to speak. Comments should be limited to matters within the jurisdiction of the Board. Pursuant to the Brown Act (Govt. Code section 54950 et seq.) action or Board discussion cannot be taken on open time matters other than to receive the comments and, if deemed necessary, to refer the subject matter to the appropriate department for follow-up and/or to schedule the matter on a subsequent Board Agenda.	
3	APPROVAL OF MINUTES: 3.1 Regular Meeting – October 25, 2017 (Attachment A)	ACTION ITEM
4	Department/Operations Reports/Recognitions: 4.1 Resolution 2017-17 – October Employee of the Month (Attachment B) <i>*Please Note:</i> Chief reports will now be at the end of the agenda in order to expand on discussion or answer questions regarding items that were addressed on the full agenda. 4.2 Director of Operations Report – Ryan Harris (Attachment C) 4.3 IHF Director Report – Marlene McArthur (Attachment D)	ACTION ITEM Presentation Report Report
5	BOARD COMMITTEES: 5.1 Finance Committee –Chair Allen Albaugh 5.1.1 October 2017 Financial review, AP, AR and acceptance of financials (Dispersed Separately) 5.1.2 BOD Quarterly Finance Review 5.1.3 Cost Report Update 5.2 Strategic Planning Committee –Chair Mike Kerns 5.2.1 Committee Meeting Report	Discussion Information ACTION ITEM ACTION ITEM Information Discussion Information
	5.3 Quality Committee –Chair Beatriz Vasquez 5.3.1 Committee Meeting Report.....	Discussion Information

6	<p>NEW BUSINESS</p> <p>6.1 Policies for Approval (Attachment E)</p> <ul style="list-style-type: none"> • CEO Job Description • Chief Executive Officer Compensation <p>6.2 Annual Board By-law Review – Third Reading – Final approval at December meeting (Sent as PDF)</p> <p>6.3 Annual Board Assessment Process – Make process selection</p> <p>6.4 Appointment of Nominating Committee</p> <p>6.5 December Meeting Date</p> <p>6.6 Committee Meeting Schedule</p>	<p>ACTION ITEM</p> <p>Discussion</p> <p>ACTION ITEM</p> <p>Kerns</p> <p>ACTION ITEM</p> <p>ACTION ITEM</p>
7	<p>7.1 Administration Reports: *Note: <i>Chief reports will now be at the end of the meeting in order to expand on discussion or answer questions regarding items that were addressed on the full agenda. Written report are provided in board packet – additional comments as need verbally</i></p> <p>▶ Chief’s Reports (CEO, CNO, CCO, CFO, IHF CEO) (Attachment F)</p>	<p>Information</p>
8	<p>8.1 INFORMATION/REPORTS/BOARD EDUCATION/ANNOUNCEMENTS</p> <ul style="list-style-type: none"> • Board Comments, Upcoming Events, etc. • Legislative Update – Val Lakey 	<p>Information</p>
9	<p>ANNOUNCEMENT OF CLOSED SESSION:</p> <p>9.1 Government Code Section 54962: Quality Assurance: Quality Improvement Issues, Medical Staff Report (Dr. Tom Watson, Chief of Staff)</p> <p>AHP APPOINTMENT Gabe Garton, CRNA</p> <p>MEDICAL STAFF APPOINTMENT Tawana Nix, DO</p> <p>MEDICAL STAFF REAPPOINTMENT Lloyd Pena, MD Mark Goodwin, MD</p> <p>STAFF STATUS CHANGE Jessica Miller, PA-C Move to Inactive</p> <p>9.2 Personnel Government Code 54957 – CEO Review/Evaluation</p>	<p>ACTION ITEM</p> <p>Discussion</p>
10	<p>RECONVENE OPEN SESSION</p> <p>REPORT CLOSED SESSION ACTION</p>	<p>Discussion</p>
11	<p>ADJOURNMENT: Next Regular Meeting December 27, 2017 Burney</p>	

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 11/22/17

Date: October 25, 2017
Time: 5:00 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.)

CALL MEETING TO ORDER: President Kerns called the regular meeting to order at 5:00 p.m. on the above date with the following present:

Beatriz Vasquez, Vice President
Abe Hathaway, Secretary
Allen Albaugh, Treasurer
Laura Beyer

Moment of silence for Melanie Kerns

Board Members Absent: Mike Kerns, President

Staff Present: Louis Ward, CEO; Travis Lakey, CFO; Ryan Harris, Director of Operations; Valerie Lakey, DOPR/Clerk of the Board; Keith Earnest, CCO; Tonya Seefloth, Mary Ranquist, Theresa Overton, Marlene McArthur

CALL FOR REQUEST FROM AUDIENCE TO SPEAK TO ISSUES OR AGENDA ITEMS:

2.1 Public Comment – none

APPROVAL OF MINUTES – A motion/second and carried, the Board of Directors accepted the minutes of the September 25, 2017 Regular Board Meeting. **(Beyer, Hathaway) – Approved All**

Department/Operations Reports/Recognitions:

4.1 Resolution 2017-16–September Employee of the Month: Tonya Seefloth was recognized, as September 2017 TEAM MAYERS MVP. Presented by Laura Beyer **(Albaugh, Hathaway) Approved All**

***Please Note:** Chief reports will now be at the end of the agenda in order to expand on discussion or answer questions regarding items that were addressed on the full agenda.

4.2 Hospice Quarterly Report – Mary Ranquist was present for the quarterly report. Last quarter the department served 11 patients. LOS stay was down. There were 2 native Americans. Ranquist spoke with Dr. Nix about process. Grief meetings have been going well. Albaugh asked about working with the Foundation on a car. Ranquist said she needs to fine-tune the policy.

4.3 Director of Operations report – Ryan Harris (Written report provided in packet)
Holding weekly meetings to make sure things are on task for the building project. We continue to work on permits. We need a new air quality permit. We also need specs for a new generator. It was confirmed that the school fees do not apply to our construction. The building will be on two parcels. We are working on lot line adjustments. We continue to work on the water flow. Staff has met with water district and fire department. We will be drafting a letter to support the 1000 per minute instead of required 1500 gallons per minute. Harris met with OSHPD Fire Marshall. Each sprinkler head takes about 12 gal per minute; we can run about 83 at one time. Currently, there are 363 heads and will be adding 120. Albaugh asked about the sewer. We have an agreement with Big Valley Sanitation that they will respond within 2 hours if needed. We will have grinders to our system.

All of the new fire doors were signed off – OSHPD Fire Marshall will be a good resource.

Replacing external lights at the Annex.

Aramark is aware that we are unhappy with service and that we will not be renewing our contract.

4.4 Telemed Written Report – included in packet Looking at ancillary tracking. Around \$8000 came from the 15 patients. \$400-500 average from each patient. Albaugh asked what the average cost is. We will be working on commercial insurances.

5. COMMITTEE MEETINGS

5.1 Finance Committee – Personnel Report, Finances reviewed – expenses are up a little and revenue is down a little. The use of registry was addressed. Housing for registry is an expense of about \$8400/month in Fall River. Would need about 13 CNA employees to alleviate registry problem.

5.1.1 Committee Meeting Report - 401K report See Notes – will set up lunch time meetings

5.1.2 September 2017 Financials (Albaugh, Hathaway) – Approved All

5.2 Strategic Planning Committee

5.2.1 Committee Report – Chair Kerns – no report

5.2.2 Update on Merger Committee- (See Presentation) Physician recruitment Merger Meeting November 6

5.3 Quality Committee

5.3.1 Committee Meeting – Laundry issues with Aramark, Marketing, Cardiac, Safety Committee, Disaster Preparedness training. Mobile unit for imaging. Dietary – seasonal menus. PRIME obesity program. SNF policies for compliance, Infection control – hand hygiene reporting getting better. Flu vaccines. Submitting documentation for PRIME.

6. New Business (Hathaway, Kerns) – Approved All

6.1 Policies for Approval (Albaugh, Beyer)

- *Medication Error Report* – This is a plan that needs to be approved by the board.
- *Vasoactive Drips – Inotropic Nursing Administration*

6.2 Quarterly P & P Summary – (Albaugh, Hathaway) – Approved All

6.2 Annual By-Law Review – 2nd Reading – will bring back to next meeting for further review. Standing committees – check to see about other committee attendance. 4.2.3 – membership in the medical staff – mid-level. Duties (list all 5)

6.3 Annual Board Assessment Process - postpone to November

7. ADMINISTRATION REPORTS:

In addition to the written operations report included in the board packet, the following verbal reports and discussions are summarized below:

Louis Ward, CEO – In addition to the written report – A lot of time with SNF process and facility upgrades, improvements. Ward attended resident council meetings. Technology was at the top of the list. Music in rooms, television upgrades, New large television for dining room in FRM. Looking into buying iPads – Facetime, etc. Spoke with 11 staff members from SNF to get input on intake process, etc. HealthTech Mock surveyors will submit proposal to help us with a re-vamp of intake process

- DHLF – meeting attended with Travis Lakey – Distributes \$250 mil per year
- CCHAN Advisory Board Meeting in Sacramento
- CDPH – met earlier this month – discussed concerns regarding survey, licensing, etc. Relationship is getting better. Receiving a lot of help from CHA.

- Annex nominated for 2 awards by the Burney Chamber of Commerce
- Went to Adin for transitional care meeting.

Marlene McArthur, IHF Exec. Director – (Report by Earnest) Annual appeal will go out soon. Donations are coming in.

Travis Lakey, CFO - Notes were extensive. Audits went well. Loan closed.

Keith Earnest, CCO – *In addition to the written* – November will be precepting Lassen College phlebotomy students. We are in need a PT – one is leaving in December. October 19th was the Pharmacy survey. No need for the major remodel now due to changes. There will be some minor (floors and lights before next visit). Moving forward there will be no nurse access to pharmacy after hours. Earnest will come up with a plan to remedy this. Pysis anesthesia machine will arrive on Friday.

Sherry Wilson, CNO – *In addition to the written report:* Planning for Annex Christmas party. Census is at 76. There are 8 open beds. There are 4 pending patients at Station 1. Two in PCC pending insurance. Finishing 2576 POC. New 341 abuse self-report.

Theresa Overton – Staffing – sharing Acute staff. LVN students from Shasta College. Working on surgery other week. OP Wound Care working with IT to build orders, etc.

8. Information/board education/announcements

Board comments, upcoming events, etc. –Future agenda items:

Move November board meeting to November 29th

9. Announcement of CLOSED SESSION – no closed session

9.1 Government Code Section 54957: (*Albaugh, Hathaway*)

Quality Assurance: Quality Improvement Issues, Medical Staff Report (Dr. Tom Watson, Chief of Staff)

9.3 Personnel Government Code 54957 – CEO Evaluation (post-poned)

10. Reconvene Open Session – no Closed Session

12. ADJOURNMENT: There being no further business, at the hour of 4:00 pm p.m., Vice President Vasquez declared the meeting adjourned. Next meeting Wednesday, November 29, 2017 – 1:00 pm–Fall River Mills



Mayers Memorial Hospital District
Always Caring. Always Here.

RESOLUTION NO. 2017-17

**A RESOLUTION OF THE BOARD OF TRUSTEES
OF MAYERS MEMORIAL HOSPITAL DISTRICT RECOGNIZING**

Vinicio Colon

As October 2017 EMPLOYEE OF THE MONTH

WHEREAS, the Board of Trustees has adopted the MMHD Employee Recognition Program to identify exceptional employees who deserve to be recognized and honored for their contribution to MMHD; and

WHEREAS, such recognition is given to the employee meeting the criteria of the program, namely exceptional customer service, professionalism, high ethical standards, initiative, innovation, teamwork, productivity, and service as a role model for other employees; and

WHEREAS, the MMHD Employee Recognition Committee has considered all nominations for the MMHD Employee Recognition Program;

NOW, THEREFORE, BE IT RESOLVED that, Vinicio Colon is hereby named Mayers Memorial Hospital District Employee of the Month for October 2017; and

DULY PASSED AND ADOPTED this 29th day of November 2017 by the Board of Trustees of Mayers Memorial Hospital District by the following vote:

AYES:
NOES:
ABSENT:
ABSTAIN:

Mike Kerns, CHAIRMAN
Board of Trustees, Mayers Memorial Hospital District

ATTEST:

Valerie L. Lakey
Clerk of the Board of Directors

Mayers Memorial Hospital District Operations Board Report

Respectfully Submitted by Ryan Harris, Director of Operations

November 2017

Hospital Expansion Project

1. Due to delays in the final drawings for the CT and R&F rooms our first back check submittal has been delayed from the week of 11/20 to the week of 12/4. This should not be a reason for concern and should not have any effect on our spring start date. In this back check we will be including the final drawings for both the CT and R&F room. We will also be including a letter (Attached) from the McArthur Fire Protection District. We are hoping that this letter will assist in us obtaining a rural exemption on our fire flows due to the fact that we are a rural area and small community where the development of full fire flow requirements are impractical.

Plant Operations, Maintenance, Other Construction Projects

1. I am currently looking into a Pelican wireless thermostat system. Our thermostats at both facilities are currently in the air returns and in Fall River the only access is from the roof. This new system will bring all thermostats back into the facility for easy access. We will also be able to manage all temperature remotely from a smart phone, tablet, or computer. The thermostats will also give us the ability to lock our temperature within our required range of 71 and 81 degrees while allowing staff to make adjustments within the range when necessary. It will also track historical trend data so we can look at which units are least energy efficient.
2. We currently have 5 rooms left to complete before phase 1 of the SNF refresh project is done. Materials have been ordered to setup a demo room to ensure residents and staff are happy with the new look of the rooms. Phase two of the project which includes new rigid sheet wall protection systems, baseboard, and chair rail will start in December of 2017.
3. Due to a new CMS requirement to reduce legionella risk in healthcare facilitates a team including Jack Hathaway, Dawn Jacobson, Sherry Rodriguez, Dave Burks and myself has been created to develop a water management strategy for our facilities. As this new requirement took effect immediately I have also requested quotes from companies that specialize in this in the event we are not able to get it completed in a timely manner.
4. I am pleased to announce that we are moving forward with Senior TV. This will more than double the amount of channels for our residents and patients, while providing them with high quality tv.

Dietary

1. Susan Garcia, Lani Martin RD, and I are busy working with Val Lakey and Jack Hathaway on our portion of the Prime 1.7.2 obesity prevention and healthier foods initiative project. This includes Nutrition Labeling, Food Marketing, Healthier Check out,

increasing fruit and vegetable spending, and increasing healthier beverage spending. We have a target of completing this by the end of the year.

Environmental Services

1. Our EVS team is working in conjunction with our maintenance staff on the SNF refresh project.
2. We are also completing our yearly deep cleaning of the floors.

Purchasing

1. We are currently working with Corning Ford and Mobility works on a new SNF Van. BJ Burks and her team came up with a design and I am awaiting quotes for this new vehicle.

Information Technology

1. With our go live date for paragon 14 on 12/5/17 the IT team and I are attending weekly calls and ensuring that everyone has had the proper training and is testing the system before going live.
2. Other projects the IT team is working on include a new anti-virus for our server, and additional backup for all our systems including our SQL server.
3. We are also looking into an intranet that will provide easier management and access to information that staff needs.

Foundation Report (dated 11/21/17):

The Mayers Intermountain Healthcare Foundation's board of directors met to conduct business November 20, 2016, with highlights listed below:

- 2018 Election of Directors/Officers.
- Fundraising:
 - North State Giving Tuesday November 28, 6am-6pm, online @ www.northstategives.org. Online giving can be from your home, office, or stop by the MMH (FRM lobby) and give online. PS: You can go online anytime at your convenience from now until the 28th—
 - Golf Tournament event held in August netted \$19,785—all proceeds will be going to the New Hospital Wing Campaign.
 - Christmas Gift Shop Sales held in November grossed \$4,300 (Burney & FRM).
 - Recruiting new volunteers! Campaigning to get volunteers to take just one day a month to work in one of the stores. See Barbara Spalding for volunteer application.
 - Employee Condo/Pig Raffle (condo donated by Dr. Dahle and pig donated by Crown Motors) underway with proceeds to benefit the Foundation's scholarship fund.
 - Annual Appeal newsletter is being finalized to go out for mailing to the community the last week in November. The annual appeal is best described as a campaign conducted each and every year to stimulate contributions, raise awareness of Mayers IHF and its responsibility to raise money, develop a base of knowledgeable volunteers, and cultivate prospects for future giving.
- New Hospital Wing Community Campaign is underway—with approximately \$270,000 to raise.
- Grants Report: Record-breaking grant year! \$1,298,937 was awarded this year to the District and Foundation through grants. This includes generous awards for the New Hospital Wing from The McConnell Foundation, The California Endowment, and the Sierra Pacific Foundation.
- Foundation Awards 2017: This year to date, the Mayers IHF funded hospital projects that totaled over \$200,000,000, equipping departments with new state-of-the-art equipment and in program support. The Intermountain Hospice program received over \$54,000 so far this year. The SNF Refresh Project was awarded \$43,386! This funding was generated from an anonymous donor and from the 2017 Chocolate Festival.

The Mayers IHF had a banner year of fundraising—and we are thankful for all the amazing support!

Respectfully submitted by,
Marlene McArthur, Executive Director
Mayers Intermountain Healthcare Foundation

**MAYERS MEMORIAL HOSPITAL DISTRICT
POLICY**

CHIEF EXECUTIVE OFFICER COMPENSATION

Page 1 of 2

POLICY:

Mayers Memorial Hospital District wants to ensure that the Chief Executive Officers compensation decisions are competitive, fair and equitable as well as compliant with appropriate regulatory guidelines and representative of best market practices. Compensation philosophy for all executives will tie to an overall organizational philosophy.

Guiding Principles

The Board of Directors of Mayers Memorial Hospital District recognizes that if we are to achieve our goal to be the best community health care system in the country that we must attract and retain exceptional leaders. As elected trustees we also have the duty to appropriately care for the resources of the Mayers Memorial Hospital District on behalf of the community. It is the responsibility of the Board to review executive compensation and to manage the Chief Executive Officer contract renewal process. In accordance with the California Brown Act, debate and decisions on executive compensation will be held in open and public meetings.

Total Compensation

Total compensation for the Chief Executive Officer position with MMHD may include:

1. Paid time off
2. Incentive bonus plan
3. \$20,000 life insurance benefit
4. Severance agreement

Markets

1. The Committee will review survey data from various sources including, but not limited to, the California Hospital Association Executive Compensation Survey and other targeted data. Reviews will take place one year prior to the contract expiration date of standing Chief Executive Officer and as needed for recruitment.
2. Survey comparisons will be to like size healthcare systems. Review of stand alone facilities and healthcare systems will include the size of the organization, scope of services offered, gross/net revenue, operating expenses, number of FTE's, number of beds and scope of responsibility (e.g. Bi-state organizations, Multi-specialty Clinic services) and other applicable information.

Target

1. The 50th percentile of current pay practices will be targeted to establish base compensation. "At Risk" compensation and other rewards will be targeted at above

industry standards to off-set base pay at the 50th percentile. It is our intention to provide total compensation comparable to industry standards with a focus on mountain community healthcare systems

2. The Board maintains the discretion to pay base compensation in excess of the 50th percentile based on other factors such as experience and results and to pay total compensation up to the 100th percentile based on extraordinary results.

Other factors

1. Other factors such as competitive market forces, each individual's job responsibilities are also considered in MMHD compensation and benefit decisions. These include:
2. Organizational complexity (the number and variety of services and/or organizational units).
3. Current and future management challenges (such as bankruptcies, major financing, construction projects, consolidations, increased competition, etc.).
4. The availability or lack of availability of staff experts.
5. The depth and breadth of the executive's knowledge and experience.
6. The rate of organizational growth.
7. The executive's value in the labor market as reflected, in part, by his/her salary history elsewhere.
8. The hospital's prior success in recruiting and retaining competent executive personnel.

COMMITTEE APPROVALS:

P&P: 5/11/2017

QI: 6/14/2017

BOD: 7/26/2017

MAYERS MEMORIAL HOSPITAL DISTRICT

POLICY AND PROCEDURE

JOB DESCRIPTION Chief Executive Officer

Page 1 of 3, plus the following Attachment(s):
Teamwork/Customer Service Responsibilities

POSITION SUMMARY

The President and Chief Executive Officer is responsible for planning, managing coordinating and controlling the overall operations of the Mayers Memorial Hospital District (MMHD); establishing a system for assuring that high quality care is provided; assuring the sound fiscal operation of the hospital while promoting services that are produced in a cost-effective manner; ensuring compliance with regulatory agencies and accrediting bodies while continually monitoring the organization's service and delivery system; ensure optimal fulfillment of the institutions charter, mission and philosophy in response to the identified needs of the community. Responds to Medical Staff, employees and patients. In addition, the President and Chief Executive Officer will work closely with the Board of Directors, leadership of the hospital departments, Foundation, volunteer corps, and organized Medical Staff in developing the strategic direction and major policies of the institution.

SPECIFIC SKILLS NEEDED

Understanding of and appreciation for the culture and environment associated with managing a complex service organization. Evidence of the ability to develop and work with involved, Board members. Evidence of the ability to interact, relate to, work with, and support the activities of highly qualified, physicians as individuals and members of the organized Medical Staff. Knowledge and experience in establishing and/or developing productive relationships with existing and emerging healthcare financing entities both public and private. Ability to delegate responsibility to senior subordinates, allowing them the room to identify ways and means to accomplish specific goals and objectives.

EDUCATION/EXPERIENCE/TRAINING

Bachelor's Degree in hospital administration, public health business administration or management, or related field is required. A Master's Degree is preferred. At the discretion of the Board, a minimum of five (5) years experience as a chief executive officer or eight (8) years as a senior level executive of an acute-care hospital. Candidates with experience working in a critical access hospital is strongly preferred. Exceptional communications skills and the ability to build positive professional relationships within the organization.

DUTIES AND RESPONSIBILITIES

1. Is responsible for the daily operations of the hospital.
2. Participates with the Board, Medical Staff, and senior management in the development and implementation of strategic plans.

3. Establishes and attains challenging/achievable quality of patient care, safety, education, customer service and community service goals while ensuring financial viability.
4. Ensures development and approval of organization-wide policies and procedures to facilitate the kind and type of organization needed to accomplish the district's aims, objectives and programs.
5. Develop and implement new programs including: new sources of revenue, and medical staff to meet the needs of the community while being fiscally responsible.
6. Ensures accountability for demonstrated commitment to improving community health status and addressing societal issues that contribute to poor health, as well as personally working for the betterment of the community—at-large within the financial constraints of the hospital.
7. Ensures the attainment of hospital objectives through the selection, development, organization, motivation, management, evaluation, and promotion of human resources and through the establishment and maintenance of facilities, equipment, supplies and other required sources.
8. Establishes and maintains communications and relations with the Medical Staff and supports the development of business ventures with them, individually and collectively, that promote cooperation and coordinated effort in accomplishing mutual goals.
9. Complies with regulations governing hospitals and the rules of accrediting bodies, and represents the hospital in legal matters.
10. Ensures that the hospital's products and services are produced in a cost-effective manner.
11. Fosters a smoothly functioning, efficient organization through anticipating problems and the timely and effective resolution of disruptions.
12. Conducts all of the above consistent with established ideals, standards and policies of Mayers Memorial Hospital District and the ethics of the profession of hospital administration.
13. Represents the District and maintains effective working relationships with community leaders, service clubs, and organizations in the MMHD service area.
14. Provides effective advocacy with governmental institutions (Federal, State, & Local) in ensuring that the District is represented and informed of regulatory changes.
15. Provide effective leadership and support to the District's non-operational fundraising efforts including the Mayer's Intermountain Healthcare Foundation.
16. Maintains the confidentiality of all medical, departmental, and district records in accordance with federal and state law.

PERSONAL QUALITIES:

Professional and businesslike in demeanor; honest and of high integrity; self-confident; assertive; excellent negotiator; able to conceptualize and grasp the “big picture”; results oriented “hands-on” and present manager; energetic and enthusiastic; intelligent; articulate; diplomatic; flexible; a good listener who is open to new ideas; straightforward; and a “team player”. Is passionate about living and working in a rural community.



Operations Report November 2017

Statistics	October YTD FY18 <i>(current)</i>	October YTD FY17 <i>(prior)</i>	October Budget YTD FY18
Surgeries <i>(including C-sections)</i>	14	10	8
➤ Inpatient	3	1	2
➤ Outpatient	11	9	6
Procedures <i>(surgery suite)</i>	12	11	16
Inpatient	665	671	724
Emergency Room	1499	1369	1350
Skilled Nursing Days	9355	9773	8400
OP Visits (OP/Lab/X-ray)	5083	5046	5491
Hospice Patient Days	320	420	520
PT	1302	898	1080

Operations District-wide

Prepared by: Louis Ward, MHA, Chief Executive Officer

MMHD/MVHC Merger Committee

This month the committee charged with the task of developing ideas and actionable tasks in an effort to explore a merger between Mayers Memorial Hospital District and Mountain Valley Health Centers met to continue our discussions. A brief presentation to summarize the committees activities to date was developed and presented; however the meeting quickly changed course as Mayers Memorial Hospital staff were alerted to the fact the Mountain Valley Health Centers Board had voted at their October 30th Board meeting against moving forward with the only legal formal merger option the two entities have. It has always been the position of Mayers Memorial Hospital that working together, the clinic and the hospital would not only increase the financial viability of both organizations but also allow us to work collectively on ensuring we are providing the best possible patient care to our shared patient population. Mayers will continue to strive to work as close as we can with Mountain Valley Health Centers to achieve the goals mentioned above as well as explore all avenues in our efforts to ensure sustainability and advancing innovative patient care models in our community.

PRIME Conference

This month, Jack Hathaway - Director of Quality, Val Lakey – Director of Marketing & Public Relations, and I attended the annual PRIME conference in Sacramento. The conference was the first of its kind as the PRIME project is still in its infancy. It was great to meet the leaders of the PRIME project as well as other leaders from other hospitals working on similar projects. As reported in past Board Meetings the goal of the PRIME program is to bring more attention to population health while measuring actionable tasks performed by the hospitals. We are happy to be participating in the PRIME program and feel confident that our patients and community

will benefit from these efforts. More information to be reported verbally by Jack Hathaway, Director of Quality.

Chief Nursing Officer Search

The District has retained Hunter Ambrose, an Executive search firm to fill the vacant Chief Nursing Officer position. The agreement was very favorable and is already showing promising results. Originally, the District did perform the CNO search utilizing district staff but unfortunately, we were not able to locate a candidate who met the requirements for the position. More information will be reported verbally on this topic at the Nov. Board meeting.

Strategic Initiatives

The District staff are currently exploring a number of new initiatives / services in an effort to strengthen the healthcare services we provide. We are currently performing feasibility studies on services that include Dialysis, Retail Pharmacy, and Increased Outpatient Services in both Fall River and Burney. The District is also exploring the option of providing a childcare center in Fall River as employees have expressed a need considering the lack of childcare in Fall River. We believe by providing an affordable childcare option in Fall River we will be able to retain employees as well as attract talented staff into the future. More information will be reported verbally on the progress of these initiatives.

New Ultrasound Machine

The District has moved forward with the purchase of a new state-of-the-art Siemens Ultrasound machine. The machine surpasses the technology we are moving away from and opens up the door to increasing our service line, allowing for Echocardiograms. We are exploring the need for echo in the community but after speaking with a few of the area providers it seems the need is there. We will be learning more about the capabilities of the machine once it is delivered in late November, which will allow us to make informed decisions about advancing the services we are currently providing in our imaging department. More information will be reported verbally at the Nov. Board meeting by Chief Clinical Officer, Keith Earnest.

Christmas Party

The 3rd annual Mayers Holiday Party will be held on December 15th at the Fall River Vets hall. We have been very happy with the turnout at our first 2 holiday parties and have no doubt we will all have a great time again this year. As we have done in the past, we will announce the Employee of the Year at the event. The staff has chosen an 80's theme this year. We look forward to seeing staff and their spouses at the party.

Respectfully Submitted by:

Louis Ward, MHA

Chief Executive Officer

Chief Clinical Officer Report

Prepared by: Keith Earnest, Pharm.D., Chief Clinical Officer

Laboratory

- Chris Hall, CLS, Laboratory Manager, is working with Ryan Harris on CMS mandated environmental monitoring of legionella in the water supply.
- Emily Ash, CLS, is joining our team as registry staff.
- The laboratory department is working with several phlebotomy training programs (in addition to Lassen College) to train externs here.

Physical Therapy

- The department is recruiting a physical therapist.
- The schedule is booked out until mid-January.
- The department has received donations of two inversion tables.
- To improve quality on med-surg and swing we now have hip kits and leg lifters.
- Daryl Schneider is working with the gift shop to carry supplies such as canes and walkers to improve accessibility to patients on discharge.

Pharmacy

- The Pyxis® anesthesia machine has arrived and the team will be here to install on November 20th.
- The pharmacy department had its on-site sterile compounding inspection on October 19th. The plan of corrections was accepted and the renewed license issued. No citations and no fines resulted. A full report was made to Board Quality.

Imaging

- Mayers is acquiring a top of the line ultrasound machine that will allow us wider diagnostic capabilities including vascular. We will be using a loaner machine until the new machine arrives. The foundation received a substantial donation to go towards this purchase.

Respiratory Therapy

- Gina Lobo, RT, respiratory manager, is updating and re-launching the pulmonary rehab program with the goal of having an accredited pulmonary rehab program. She has been to Shasta Regional Medical Center to review their program and process.

- Gina is working with Healthstream to bring a comprehensive CPR, ACLS, and PALS education and training system to Mayers.

Cardiac Rehab

- The Automated External Defibrillator was replaced as the previous one had reached end of life.
- A replacement part for the stress treadmill machine has been received and patient testing can begin.
- Cardiac maintenance numbers remain strong.

Chief Nursing Officer Report

Prepared by: Sherry Wilson, Chief Nursing Officer

- Census is 77 as of 11/20/2017.
- Mandatory in-services were held at both the Fall River and Burney on November 1st and 2nd. They included the following topics: dehydration, abuse, Informed Consents, falls, and the use of the drug Haldol.
- We are very excited to welcome Shelley Lee into the role of ADON, having her be part of our team will only enhance the bridge of communication between both facilities.
- Work on the admission process continues, I have attached some graphs which display the number of residents that are screened for admission.
- Christmas parties will be held for our residents and their families on December 13th and December 20th.

Acute Care St. 1 Board Report November 2017

1. Acute ADC=2.42 and Swing ADC=3.26 with ALOS=7.21
2. Full census causing about a 2-week difficulty with being able to take in admits from the ER. Therefore, due to the influx, we staffed an additional licensed nurse to allow for 3-licensed nurses on each shift. This has allowed for direct admits or admits from the ER. This arrangement was made through Nov. 21, 2017. We will continue to monitor the census and the need to continue this further. The staff has been praised for their diligence during this busy time.

3. Hired a new full time licensed RN from out of the area via phone interview. Awaiting her to come for a visit and confirm the hire process. The BRN is backed up and so we are still waiting for approval for a licensed RN that was hired about 6 months ago. She is converting her Washington license to CA.
4. Continuing education provided with a Beginners EKG class Nov. 9 with advanced to take place on Nov. 30th.

Happy Thanksgiving!

Respectfully submitted,

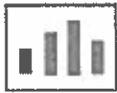
Theresa Overton, RN
Director of Nursing

ER November 2017 Report

- We treated 362 patients in the Emergency Department in the month of October.
- I attended the Pediatric Telehealth Conference in late October at UC Davis. It was a very informative conference and provided an opportunity for me to connect with our telehealth contacts there.
- After receiving an invitation from UC Davis, we submitted an application to participate as an affiliate site in the Pediatric Readiness Quality Collaborative, a national initiative that will begin in January of 2018 if we are selected. Our participation in this Collaborative has great potential to increase the resources we have to offer the pediatric population we serve.
- I attended the 299-Collaborative Transitions of Care Workshop in Adin, along with several other Mayers team members, in late October. We have made a plan to continue to meet with representatives from Mountain Valleys to continue efforts to improve continuity of care between our facilities. I'm especially interested in the potential this group has to positively impact patients seen in the ER by providing better follow-up after discharge. The collaborative is scheduled to meet again in December.
- I will be working with Val Lakey and Jeanette Rodriguez to involve the ER further in Disaster Preparedness planning. There will be a group compiled of members from several Intermountain agencies meeting in early December to discuss the potential for developing a Coalition for Emergency Preparedness in the area.
- In efforts to provide higher quality of care and ensure appropriate treatment, we have implemented a new process to review culture results on lab orders generated in the ER. We have a new form we are using in the ER that we initiate when a culture order is obtained

during the patient visit. The lab is now bringing the culture results to us when they are complete so our nurses can review the report and compare it to the treatment rendered.

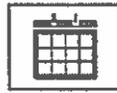
If the treatment was appropriate based on the results, no action is needed and the report is being passed along to the infection control nurse for review and reporting purposes. If an adjustment to treatment is indicated, the ER doctor on duty is notified, so a new order can be obtained and the patient notified. This process has potential to prevent unnecessary return visits to the ER and is a standard of care in many other emergency departments.



Dashboard



Leads



Activities



Accounts



Contacts



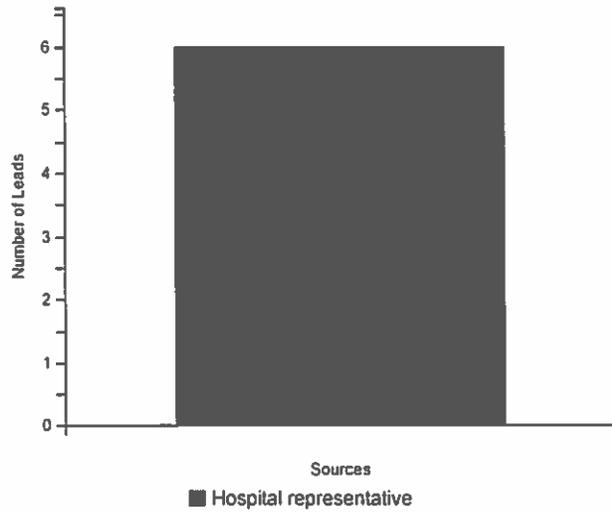
A & O



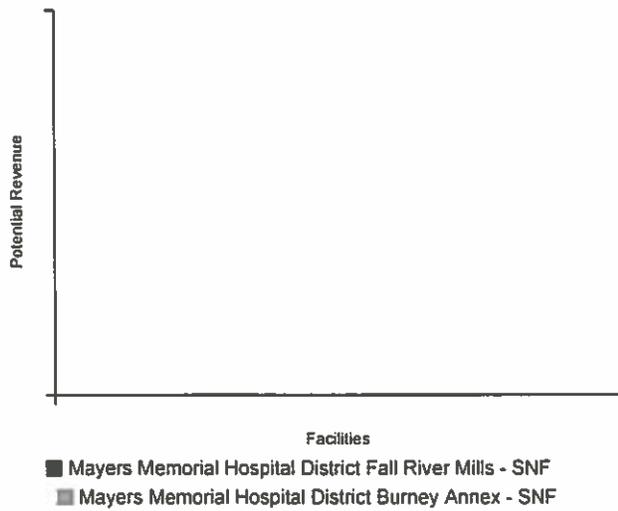
Reports

Dashboard

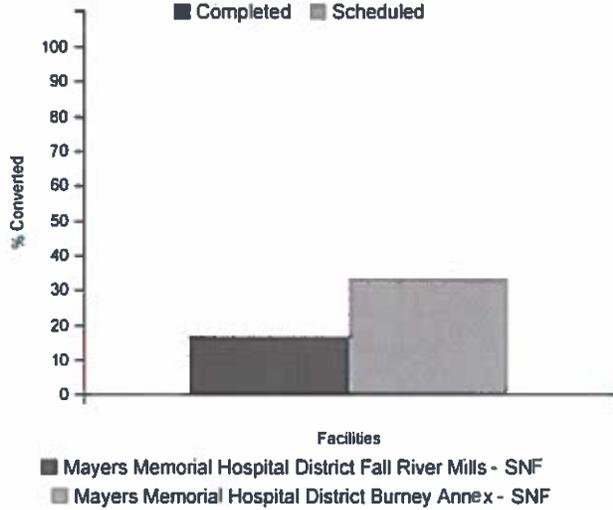
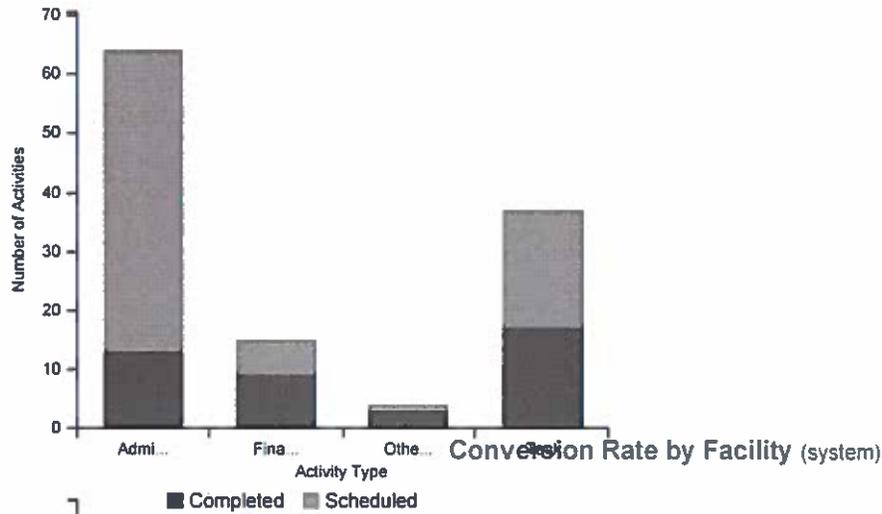
Leads by Source (system)



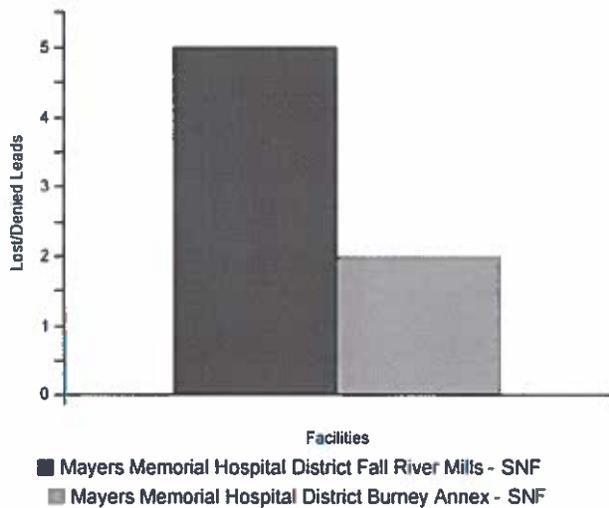
Potential Revenue by Facility (system)



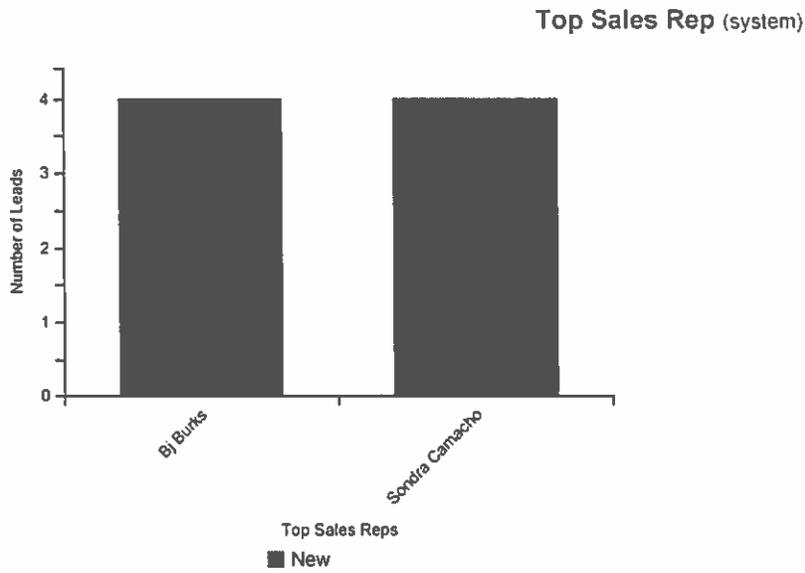
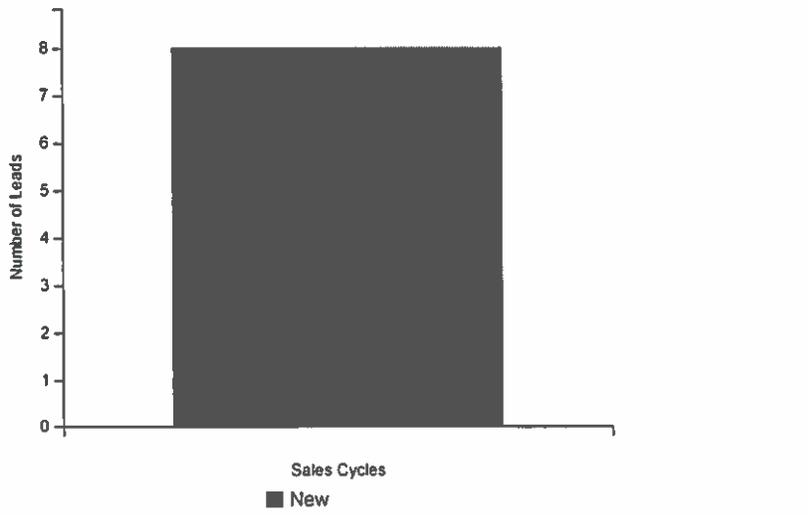
Activities by Status (system)



Lost/Denied Leads by Facility (system)



Leads by Referral Account (system)



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