

Chief Executive Officer
Louis Ward, MHA



Mayers Memorial Hospital District

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

Board of Directors
Quality Committee
Minutes

February 14, 2018 - 12:00pm
Boardroom (Fall River Mills)

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 Beatriz Vasquez called the meeting to order at 12:02 p.m. on the above date.

BOARD MEMBERS PRESENT:

Beatriz Vasquez, Vice President
Laura Beyer, Director

OTHERS PRESENT:

Susan Knoch, MVHC

STAFF PRESENT:

Jessica Stadem, Board Clerk
Sherry Wilson
Travis Lakey
Dawn Jacobson
Jack Hathaway
Ryan Harris
Theresa Overton

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- 2 **CALL FOR REQUEST FROM THE AUDIENCE – PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS**

None

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- 3 **APPROVAL OF MINUTES**

3.1 A motion/second carried; committee members accepted the minutes of January 10, 2018 Beyer/Hathaway **Approved All**

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- 4 **DEPARTMENT REPORTS**

- 4.1 **Staff Development:** Provided handout. Not a lot of change in the department this year, worked on trouble areas from last year, CNA excitement about trainings was unsuccessful, will try to bring in guest speakers; tried to reduce 8-hour inservices, more 4 hour inservices, attempt at morning and afternoon sessions was unsuccessful, staggering times; teleconference has been unsuccessful as well; quarterly skills training, one per quarter; CNAs and LVNs in LTC; hours are required for license or they must retake CNA test; trainings need to be proctored; low attendance in part due to inservices being on days off, working OT, CNAs don't want to come in; can utilize HealthStream when implemented.
- 4.2 **Business Office:** Provided handout. Billing clearinghouse has been bought by Experian, no longer support DSG so need to transition by May; working with partnership on payment for hospice patients LTC days; surpassed collections goal by \$200k in January.
- 4.3 **SNF:** Presented PCC Quality measures dashboard, able to compare to national averages and set goals; can filter by resident, look at trends and triggers; will be able to bring a dashboard report to the meeting from this point forward; will use the data from this quarter as a benchmark for all future quarters; for survey purposes, will have to have explanation for goals being different than national averages;

5 QUARTERLY REPORTS

- 5.1 **Patient Safety First:** 6 or so safety events reported; 1 report resulted in facility lockdown, followed workplace violence policy, everything went smoothly, same patient had been in facility a week prior with knife but nothing had been reported, if it had been, we would have been able to add that to report to Sheriff; vehicle break ins in Burney; capturing incidents more efficiently but need to continue training staff on what needs to be reported to who and when.
- 5.2 **CMS Core Measures:** Added to PCC quality dashboard; working with ER on capturing more accurate times of how long patients are in facility (wait time, triage, time to discharge); able to track everything internally, reporting to CMS, still missing volume requirements.

6 STANDING MONTHLY REPORTS

- 6.1 **SNF Events/Survey:** Annual survey, federal and state at same time, 16 tags, have not received 2567 from POC yet; no tags on psychotropics; most tags were minor, no medication errors; employees did very well with surveys this time.
- 6.2 **Quality/Performance Improvement:** Worked with Quality consultant, helped with QAPI plan, told to be more general with wording in plan.
- 6.3 **Infection Control:** Hand washing app to generate report, can be used by anyone; on lockdown in SNF during survey, did very well with precautions (gowns, masks, handwashing); zero surgical site infections.
- 6.4 **PRIME:** 1.7 project started (obesity); rollout has been fantastic, ahead of program; working with telemedicine nutrition consults; childhood obesity portion more difficult to track, need to find an appropriate case that meets criteria is difficult; on track to receive full payment at end of DY.

7 ADMINISTRATIVE REPORT

Ryan Harris reported for Louis Ward. Operations survey, one tag (build up in ice machine); fire life safety survey, 7 tags (compared to 20 the year before), all minor, all fixed day of survey; phone system failed on Sunday due to both system drives failing at same time, most service has been restored; IT working on list of critical infrastructure that will look at end of life and when to start budgeting for replacements; will run analog lines to front desk, St. 1 and St. 2 to be able to contact facility; replacing boxes in both facilities, 3 year warranty; ability to contact family of residents, will find out what went on and update at regular meeting.

8 NEW BUSINESS

- 8.1 **Employee Handbook Revisions:** Libby will be updating the employee handbook soon and wanted to know if she should bring it to this committee for review and suggestions before taking to full board for approval. Will put on agenda for next month.

- 8.2 **Policies of Approval** – It was noted that the committee has reviewed these policies before. Jack Hathaway will follow-up with Pam Sweet regarding the approval process.

No action taken

- Annual Employee Influenza Vaccination
- Drug Supply Chain Security Act Compliance Plan
- Patient Responsibility MMH452
- Post Fall Assessment and Documentation
- Restraint Log MMH578
- Restraints or Seclusion (Physical Restraints), Use of
- Succession Plan
- Unusual Events

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.

9 **OTHER INFORMATION/ANNOUNCEMENTS**

Will add blood transfusion reports quarterly (Theresa Overton) to the agenda.

10 **ANNOUNCEMENT OF CLOSED SESSION**

No closed session items

11 **RECONVENE OPEN SESSION**

No closed session items

12 **ADJOURNMENT:** 1:20 p.m.

Next Regular Meeting – March 14, 2018 (Fall River Mills)
