Chief Executive Officer Louis Ward, MHA



Board of Directors
Jeanne Utterback, President
Beatriz Vasquez, Ph.D., Vice President
Tom Guyn, MD, Secretary
Abe Hathaway, Treasurer
Tami Vestal-Humphry, Director

Board of Directors
Quality Committee
Minutes
September 8, 2021 @ 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 Jeanne Utterback called the meeting to order at 1:00 pm on the above date. | | | | | |
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| | BOARD MEMBERS PRESENT: STAFF PRESENT: | | | | | |
| | | Jeanne Utterback, President Tom Guyn, MD., Secretary Louis Ward, CEO | Candy Detchon, CNO Jack Hathaway, Director of Quality Theresa Overton, DON, Acute Moriah Padilla, Asst. Manager, Acute | | | |
| | | ABSENT: Laura Beyer | Pamela Sweet, Substitute Board Clerk Dawn Jacobson, Infection Preventionist | | | |
| | | Community Members Present: N/A | | | | |
| 2 | CALL F | FOR REQUEST FROM THE AUDIENCE – PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS | | | | |
| | None | | | | | |
| 3 | APPRO | APPROVAL OF MINUTES | | | | |
| | 3.1 | A motion/second carried; committee members accepted the min | utes of August 11, 2021. | Guyn, Hathaway | Guyn – Y Hathaway – Y | |
| 4 | | O REPORTS: QUALITY FACILITIES, FINANCES, STAFF | | | | |
| 5 | | DRTS: QUALITY PATIENT SERVICES | | | | |
| | 5.1 | Surgery/Anesthesia Submitted written report Look to bring in an interim OR manager to guide our team. Have interview set up later this week. Doing best can with short staff | | | | |
| | 5.2 | Med-Surg/Swing Submitted written report Focus on Covid and staffing issues Utterback commended the team on identifying areas for further education and applying themselves to accomplishing it. Waiting for construction to be completed to get upgraded cardiac monitors. We have not been put in the position yet where we didn't have enough monitors. If it happens, we will pull the monitors out of OP Surgery | | | | |
| | 5.3 | Outpatient Services | | | | |
| | 5.4 | Submitted written report Blood Transfusion QuarterlyStill working with the Lab and Jack to | mainstream the flow Mot | getting reports from | n the lah | |
| | 3.4 | Attempting to make the transfusion form electronic so that it doe at next meeting. | | | | |

| | 5.5 | Infection Control | | | |
|---|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| | | Submitted written report | | | |
| | Covid cases are increasing, but both facilities are "green" now. | | | | |
| | Have influenza outbreak in Burney. Good success in getting staff vaccine for Covid as they ask for it. Supply of J&J vaccine: we have 15 doses and have ordered more to vaccine remainder of staff. | | | | |
| | | | | | |
| | | | | | |
| | | Discussed concern about community Covid after Fair. Louis will work with Dr. Watson to talk with school board | | | |
| | | ED is seeing spike in para-influenza as well as Covid | | | |
| | | and the state of t | | | |
| | 5.6 | SNF Events/Survey | | | |
| | | Finally have the CNA program approved. Meet next week to lay out the next steps. Need to involve HR to determine how much | | | |
| | | staff we need and sort out the admission process. Expect new CNA's will become our employees. | | | |
| | | Number one concern is the 30 th of September and reducing beds to match staff. We don't have the ability to abruptly drop the | | | |
| | | SNF population. Looking at registry, but there will be a smaller pool of registry to choose from. New admissions are on hold un | | | |
| | | we see where we are on the 30 th . | | | |
| | | Working on a program to reduce psychotropic use. Had hoped to be ready to kick it off the end of October, but Covid keeps | | | |
| | | getting in the way. | | | |
| | 5.7 | Med Staff | | | |
| | | Submitted written report | | | |
| | | Working on increasing the number doctors. Have just added Dr. Magno, who is getting glowing reviews from staff. Also have Dr. | | | |
| | | Barr as hospitalist as well as working in the ED. | | | |
| | | Will change credentialing packet to electronic format with fillable PDF's. | | | |
| 6 | DIREC | DIRECTOR OF QUALITY | | | |
| | | Director of Quality Update: | | | |
| | | Reported on SacValley Med Share | | | |
| | 6.1 | State came in to Burney re Covid protocols today. Will do walk through in FR tomorrow. On Friday, will have another meet with | | | |
| | 0.1 | state regarding a recent resident elopement. | | | |
| | | Submitted data for hospital star rating, including sepsis and Stroke & AMI. We are hopeful that as of November 1 st we should | | | |
| | | have everything submitted for a new base line report come out in April | | | |
| | | Compliance Quarterly | | | |
| | | Currently undergoing State mitigation survey for covid. It is going well. These are the 1 st 3 state visits this quarter. | | | |
| | | New reporting system for complaints and compliance is ready. Will work with Val to get on intranet so people can start | | | |
| | | reporting. | | | |
| | 6.2 | We had 6 complaints, but none dealing with quality of care. They were mostly about billing. All ended more positively than they | | | |
| | | began | | | |
| | | Currently doing a HIPAA investigation, but the complainant isn't being very helpful. Will have to do HIPAA training with staff | | | |
| | | again. | | | |
| | | ZenDesk, our electronic complaint filing system is complete. Will work with Val to put it on social media and the web site. | | | |
| 7 | | R INFORMATION/ANNOUNCEMENTS: | | | |
| | None | | | | |
| 8 | | ADJOURNMENT: at 2:37 pm | | | |
| | Next F | Next Regular Meeting – October 13, 2021 | | | |

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.