**Chief Executive Officer**Chris Bjornberg



**Board of Directors** 

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

## Board of Directors Quality Committee Minutes April 13, 2022 @ 1:00 PM Fully Remote Teams 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	LL MEETING TO ORDER: Board Chair Jeanne Utterback called the meeting to order at 1:01 pm on the above date.					
		BOARD MEMBERS PRESENT:	S	TAFF PRESENT:			
		Jeanne Utterback, President	Chris Bjornberg, CEO				
		Tom Guyn, MD., Director	Candy Detchon, CNO				
		Excused ABSENT:	Keith Earnest, CCO				
		Trudi Burns, Cardiac Rehab	Jack Hathaway, Director of Quality				
		David Ferrer, Respiratory	Libby Mee, Director of HR Daryl Schneider, PT Manager				
		COMMUNITY MEMBERS PRESENT:	Amanda Harris, Telemedicine				
		Laura Beyer	Jessica DeCoito – Board Clerk				
2	CALL	CALL FOR REQUEST FROM THE AUDIENCE – PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS					
	None			1			
3	APPF	ROVAL OF MINUTES					
	3.1	A motion/second carried; committee members accepted the	minutes of March 9, 2022	Guyn, Hathaway	Approved by All		
4	REPC	EPORTS: QUALITY STAFF					
	4.1	Employee Health & Workers Comp: No employees out on COV list smaller.	/ID leave currently. Working	on making the booste	er eligible employee		
5	REPORTS: QUALITY PATIENT SERVICES						
	5.1	Telemedicine: patients are really enjoying that they can see the program is ending, with some options to keep the program g and Rheumatology are a week to two weeks out – quick turn specialty providers.	oing with some leftover fun naround for specialists. Tele	ds. Current appointmemedicine is our key	nents for Neurology to getting access to		
	5.2	Cardiac Rehab: great to see that our issues can be solved from within our own organization. Departments helping departments.					
	5.3	Respiratory: very helpful to have the pulmonary services available for our community. Growing the program within our Cardiac Rehab, Retail Pharmacy and even in Modoc. Great work – can't wait to see this program grow.					
	5.4	Pharmacy: would like to report out to next month. Will present graphs and charts.					
	5.5	Physical Therapy: Congrats to PT on having a full staff with new are and tear is always something we are looking at. And rebrand-new piece of equipment ordered.					
	5.6						
		related to a hearsay issue that we are working with the state on getting waved. We are in survey season, so we are on our toes					
		waiting for their arrival. Another survey was done on Acute,			ursing Leadership is		
		working on. Green status in both facilities! Our team is busy v	vith admitting and getting o	ur numbers back up.			

6	DIREC	CTOR OF QUALITY				
	6.1	drop because our Hospitalist has found confusion in provider orders – white papers on parameters have been used as references to help correct these issues going forward. Analyzer challenge in the lab has been a priority to solve.				
7	OLD E	DLD BUSINESS				
	7.1	elements within that measure. An internal committee will be set up to manage all the quality measures and metrics with staff. Then the Director of Quality will report out to this Board Quality Committee meeting, with a dashboard of data and graphs, and follow all HIPPA guidelines for our residents and patients. Introduction for the new pieces will start to occur over the next few months. July is our goal for rolling out the new format. We will have a new time of meeting to have a provider available at the meeting. Staff will make sure this aligns with the bylaws and committee structures.				
8	OTHER INFORMATION/ANNOUNCEMENTS: RMOMS grant was submitted two weeks ago. We should hear back on this grant around August. Includes 10 partners in collaboration. Requested just under the grant amount and submitted one page short of the max page limit. Congrats to Laura on this amazing feat and good luck! Great job on the health fair!					
9		ANNOUCNEMENT OF CLOSED SESSION: 2:11 pm				
	9.1	MEDICAL STAFF CREDENTIALS GOVERNMENT CODE 54962  ACTION ITEM				
	GARY ANDR ERIC I STAFI NIME NICHO SHELL TIMO FARZI DAVIII ROBE	BERT BUSHELL, DO — INACTIVE RY BELAGA, MD — INACTIVE DREW LIN, DO — INACTIVE C KRAEMER, MD — INACTIVE  AFF APPOINTMENT MEKA PHILLIP, MD — FAMILY MEDICINE, PIT RIVER HEALTH CHOLAS SCHULACK, DO — EMERGENCY MEDICINE ELLEEN DENNO, MD — HOSPITALIST MOTHY FISHER, MD — RADIOLOGY RZIN IMANI, MD — RADIOLOGY VID KATZ, MD — RADIOLOGY BERT MURRAY, JR. MD — RADIOLOGY VID SARVER, MD — RADIOLOGY				
	DALE TYLER	F REAPPOINTMENT SYVERSON, MD – GENERAL SURGERY R BARR, MD – EMERGENCY & FAMILY MEDICINE staff credentials approved unanimously.				
10	RECO	NVENE OPEN SESSION: 2:13 pm				
11		URNMENT: at 2:14 pm Regular Meeting – May 11, 2022				

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 <a href="https://www.mayersmemorial.com">www.mayersmemorial.com</a>.