

Chief Executive Officer  
Chris Bjornberg



**Board of Directors**  
Abe Hathaway, President  
Jeanne Utterback, Vice President  
Tom Guyn, M.D., Secretary  
Tami Humphry, Treasurer  
Lester Cufaude, Director

Board of Directors  
**Quality Committee**  
**Minutes**  
May 18, 2023 @ 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	<b>CALL MEETING TO ORDER:</b> Board Chair Tom Guyn, M.D. called the meeting to order at 1:02 pm on the above date.		
	<b>BOARD MEMBERS PRESENT:</b>	<b>STAFF PRESENT:</b>	
	Tom Guyn, MD., Secretary Les Cufaude, Director	Jack Hathaway, Director of Quality Jessica DeCoito, Board Clerk	
	<b>Excused ABSENT:</b>		
2	<b>CALL FOR REQUEST FROM THE AUDIENCE – PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS</b>		
	None		
3	<b>APPROVAL OF MINUTES</b>		
	3.1	A motion/second carried; committee members accepted the minutes of April 21, 2023.	<b>Hathaway, Cufaude</b> <b>Guyn – Y Cufaude- Y</b>
4	<b>Hospital Quality Committee Report:</b> May meeting was pushed to June. This has allowed our group more time to pull their metrics and measures.		
5	<b>Director of Quality Report</b>		
	5.1	<p>We recently went through our relicensing survey with CDPH. Nine deficiencies came up to address, but none of them are life threatening issues. We have yet to get our Statement of Deficiencies and Form 2567. We were able to identify that our St. 2 floor and Burney Annex floor have some slight differences that will need to be realigned.</p> <p>The specific opportunities for our ACHC Project Plan have been assigned with Executive Leadership Team and their team members. They will work on addressing these opportunities to prepare for the survey for accreditation.</p> <p>Peer Review Tracking was reviewed.</p> <p>Fire Life Safety came the week after our Skilled Nursing Facility. There were 12 deficiencies found but nothing of high importance. The Statement of Deficiencies was received and a plan on correction is being worked on.</p>	
6	<b>OTHER INFORMATION/ANNOUNCEMENTS</b>		
7	<b>MOVE INTO CLOSED SESSION</b>		
	7.1	<p>MED STAFF CREDENTIALS GOVT CODE 54962</p> <p><b>STAFF STATUS CHANGE</b> Michael Dillon MD to Inactive Arun Kalra, MD to Inactive Dianesh Ravindran, MD to Inactive Mohamad Ghraawi, MD to Inactive Olivia Tong, MD to Inactive</p>	<b>Approved by All</b>

	<p>Ashok Dayananthan, MD to Inactive  Lewis Furber, JR, PA to Inactive  Adam Gardizi, CRNA to Inactive</p> <p><b>AHP REAPPOINTMENT</b>  Sharon Hanson, NP  Heather Corr, PA</p> <p><b>MEDICAL STAFF APPOINTMENT</b>  Thomas Edholm, MD- Emergency</p> <p><b>MEDICAL STAFF REAPPOINTMENT</b>  Sophia Teng, MD (UCD)  Kevin Keenan, MD (UCD)  Elizabeth Ekpo, MD (UCD)  Mustafa Ansari, MD (UCD)  Dan Dahle, MD  Chuck Colas, DO</p>		
8	<b>RECONVENE OPEN SESSION</b>		
9	<b>ADJOURNMENT:</b> at 1:42 pm Next Meeting is June 22, 2023 at 1:00 pm		