

Chief Executive Officer
Ryan Harris



Board of Directors
Abe Hathaway, President
Jeanne Utterback, Vice President
Tami Humphry, Treasurer
Lester Cufaude, Director
James Ferguson, Director

**Quality Committee
Meeting Agenda**

April 22, 2024 at 3:00 PM
MMHD Boardroom
43563 HWY 299 E
Fall River Mills, CA 96028
Microsoft Teams
[Click Here to Join](#)

Meeting ID: 276 854 406 290 Passcode: G8LXXL
Call in Number: 1-279-895-6380 Phone Conf ID: 922 027 454#

Attendees

Les Cufaude, Director and Chair of Quality
James Ferguson, Director

Ryan Harris, CEO
Jack Hathaway, Director of Quality

1	CALL MEETING TO ORDER	Chair Les Cufaude		Approx. Time Allotted
2	CALL FOR REQUEST FROM THE AUDIENCE - PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS			
3	APPROVAL OF MINUTES			
	3.1	Regular Meeting – February 21, 2024	Attachment A	Action Item 2 min.
4	HOSPITAL QUALITY COMMITTEE REPORT			Report 10 min.
5	DIRECTOR OF QUALITY	Jack Hathaway		Report 10 min.
	5.1	QIP – Quarterly Report Jan-March 2024	Attachment B	
6	OTHER INFORMATION/ANNOUNCEMENTS			Information 5 min.
7	MOVE INTO CLOSED SESSION			
8	CLOSED SESSION ITEMS			
	8.1	HEARING (HEALTH AND SAFETY CODE § 32155) – MEDICAL STAFF CREDENTIALS		Action Item 5 min.
		STAFF STATUS CHANGE		
		1. Chuck Colas, DO – to Inactive		
		2. Saif Siddiqui, MD – to Inactive		

	<p>3. Tikoos Blankenberg, MD – to Inactive 4. Frederic Jones, PhD – to Inactive</p> <p>AHP APPOINTMENT</p> <p>1. Lewis Furber, NP (Pit River)</p> <p>MEDICAL STAFF APPOINTMENT</p> <p>1. Dale Syverson, MD – Gen. Surgery 2. Charles Westin, MD – Radiology 3. Alexander Vogel, MD - Radiology 4. Sanford Smoot, MD – Radiology 5. Masood Siddiqui, DO – Radiology 6. Shree Shah, MD – Radiology 7. Dishant Shah, MD – Radiology 8. Faranak Sadri-Tafazoli, MD – Radiology 9. Avez Rizvi, MD – Radiology 10. William Randazzo, MD – Radiology 11. Teppe Popovich, MD – Radiology 12. William Phillips, MD – Radiology 13. Benjamin Park, DO – Radiology 14. Ellen Johnson, MD – Radiology 15. Miriam Hulkower, MD – Radiology 16. James Haug, DO – Radiology 17. Mark Harshany, MD – Radiology 18. Jeffrey Grossman, MD – Radiology 19. Kenneth Edgar, MD – Radiology 20. Lillian Cavin, MD – Radiology 21. Courtney Carter, MD – Radiology 22. Dennis Burton, MD – Radiology 23. James Brull, DO – Radiology 24. John Boardman, MD – Radiology 25. Michael Bevern, MD – Radiology 26. Robert Berger, MD – Radiology 27. Troy Belle, MD – Radiology 28. David Bass, MD – Radiology 29. Daniel Baker, MD – Radiology 30. Asif Anwar, MD – Radiology 31. John Anderson, DO – Radiology 32. Sandeep Amesur, MD – Radiology 33. Batook Hussain, MD (UCD) - Neurology</p>		
9	RECONVENE OPEN SESSION		
10	ADJOURNMENT: Next Regular Meeting – May ?		

Agenda Posted 04/19/2024

Chief Executive Officer
Ryan Harris



Board of Directors
Abe Hathaway, President
Jeanne Utterback, Vice President
Tami Humphry, Treasurer
Lester Cufaude, Director

Board of Directors
Quality Committee
Minutes

February 21, 2024 @ 4:30 PM
Microsoft 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 MEETING TO ORDER: Les Cufaude called the meeting to order at 4:30 pm on the above date.		
	BOARD MEMBERS PRESENT:	STAFF PRESENT:	
	Les Cufaude, Director Tami Humphry, Director	Ryan Harris, CEO Jack Hathaway, Director of Quality Jessica DeCoito, Board Clerk	
	Excused ABSENT:		
2	CALL FOR REQUEST FROM THE AUDIENCE – PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS		
	None		
3	APPROVAL OF THE MINUTES		
	3.1	Regular Meeting – January 24, 2024	<i>Harris, Cufaude</i> Approved by All
4	HOSPITAL QUALITY COMMITTEE REPORT: the departments meet monthly to review measures that they feel are necessary to the success in their patient or resident care, efficiencies, etc. While these could be measures aligned with ACHC, some may not but are not discounted in their importance to the department.		
5	DIRECTOR OF QUALITY: Hired a consultant to help with ACHC Accreditation and she has been great so far. She has set weekly goals to meet. This committee also needs 9 to 11 measures to understand, measure and report on to the full board. These include medication theory, infection control, surgical/invasive and manipulative procedures, blood product usage, data management, discharge planning, utilization management, complaints, restraint/seclusion use and mortality review. The vision is that we provide you with dashboards and graphs and narratives on the measures. Add in Plan on Action or Correction into the charts for measures requiring it. First step in our ACHC accreditation process is to get our physical environment up to par, establish risk assessments for the areas of concern, and evaluate the construction/remodel projects for current use versus master planning. QIP program will be more transparent with our staff and board members. It has been made a priority to make everyone more aware of each measure, how to meet them, and what kind of funds we could receive for meeting those measures. Physicians and staff will be at the table to help pick out the quality measures and incentives will be applied to meeting those measures to get the buy in and dedication from staff. We will have a list of those measures for the next Quality meeting.		
6	9XMed Discussion: Company with remote patient monitoring. Previous discussions brought about a proposal that will be shared with the Physicians in a meeting next week. Essentially, MMHD would be a pilot program for 9XMed.		
7	OTHER INFORMATION/ANNOUNCEMENTS: Community complaints received by Board members with regards to referrals not being sent properly, and records requested not being sent. MMHD team will take these complaints will work on process improvements and submit tickets to Cerner for functionality fixes.		
8	MOVE INTO CLOSED SESSION		
	8.1	HEARING – (Health and Safety Code §32155) – Medical Staff Credentials Staff Status Change: Jody Crabtree, PA to Inactive Kyung Lee, NP to Inactive Christopher Louisell, MD to Inactive Julia Mooney, MD to Inactive	Approved by All

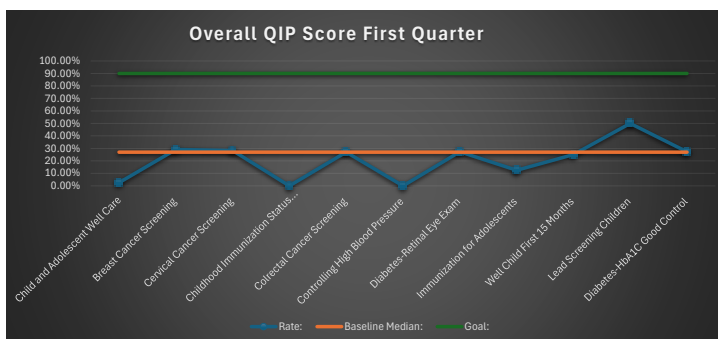
	Tommy Saborido, MD to Inactive Tyler Barr, MD to Inactive AHP Appointment Paula Amacker, NP – Oncology (Dignity) Medical Staff Appointment Ross Madeville, MD – Neurologist (Telemed2U) Galen Church, DO – Emergency Medicine	
9	RECONVENE OPEN SESSION	
10	ADJOURNMENT: at 5:36 pm Next Meeting is March 20, 2024 at 1:00 pm	

DRAFT

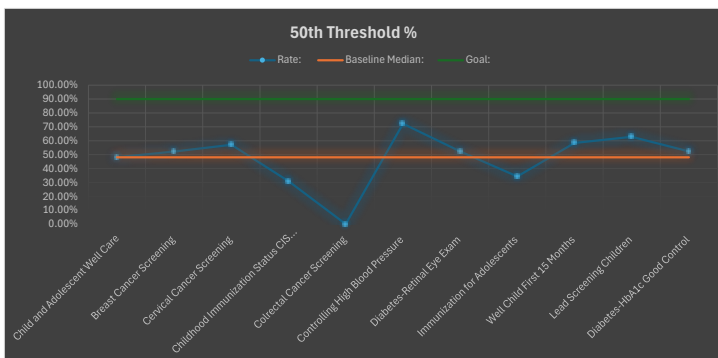
Public records which relate to any of the matters on this agenda (except Closed Session items), and which have been distributed to the members of the Board, are available for public inspection at the office of the Clerk to the Board of Directors, 43563 Highway 299 East, Fall River Mills CA 96028. This document and other Board of Directors documents are available online at www.mayersmemorial.com.

QIP-Quarterly Report- Jan-March 2024

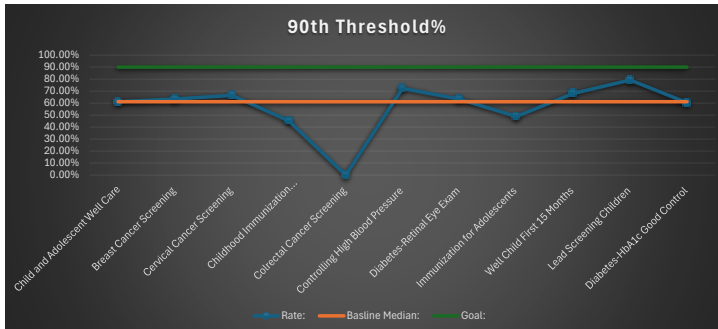
Measure:	Rate:	Baseline Median:	Goal:
Child and Adolescent Well Care	2.60%	26.97%	90.00%
Breast Cancer Screening	29.17%	26.97%	90.00%
Cervical Cancer Screening	28.26%	26.97%	90.00%
Childhood Immunization Status CIS 10	0.00%	26.97%	90.00%
Colorectal Cancer Screening	26.97%	26.97%	90.00%
Controlling High Blood Pressure	0.00%	26.97%	90.00%
Diabetes-Retinal Eye Exam	27.27%	26.97%	90.00%
Immunization for Adolescents	12.50%	26.97%	90.00%
Well Child First 15 Months	25.00%	26.97%	90.00%
Lead Screening Children	50.00%	26.97%	90.00%
Diabetes-HbA1C Good Control	27.27%	26.97%	90.00%



Measure:	Rate:	Baseline Median:	Goal:
Child and Adolescent Well Care	48.07%	48.07%	90.00%
Breast Cancer Screening	52.20%	48.07%	90.00%
Cervical Cancer Screening	57.11%	48.07%	90.00%
Childhood Immunization Status CIS 10	30.90%	48.07%	90.00%
Colorectal Cancer Screening	0.00%	48.07%	90.00%
Controlling High Blood Pressure	72.22%	48.07%	90.00%
Diabetes-Retinal Eye Exam	52.31%	48.07%	90.00%
Immunization for Adolescents	34.31%	48.07%	90.00%
Well Child First 15 Months	58.38%	48.07%	90.00%
Lead Screening Children	62.79%	48.07%	90.00%
Diabetes-HbA1c Good Control	52.31%	48.07%	90.00%



Measure:	Rate:	Baseline Median:	Goal:
Child and Adolescent Well Care	61.15%	61.15%	90.00%
Breast Cancer Screening	63.37%	61.15%	90.00%
Cervical Cancer Screening	66.48%	61.15%	90.00%
Childhood Immunization Status CIS 10	45.26%	61.15%	90.00%
Colorectal Cancer Screening	0.00%	61.15%	90.00%
Controlling High Blood Pressure	72.22%	61.15%	90.00%
Diabetes-Retinal Eye Exam	63.33%	61.15%	90.00%
Immunization for Adolescents	48.80%	61.15%	90.00%
Well Child First 15 Months	68.09%	61.15%	90.00%
Lead Screening Children	79.26%	61.15%	90.00%
Diabetes-HbA1c Good Control	60.34%	61.15%	90.00%



Measure	QIP Score	Numerator	Denominator	50th Threshold %	50th Target/Achieved	90th Threshold %	90th Target/Achieved	90th Threshold %	90th Target/Achieved
Child and Adolescent Well Care 2024	2.60%	2	77	NA	NA	48.07%	38/77	61.15%	48/77
Breast Cancer Screening 2024	29.17%	7	24	NA	NA	52.20%	15/27	63.37%	16/27
Cervical Cancer Screening 2024	28.26%	35	122	NA	NA	57.11%	53/92	66.48%	62/92
Childhood Immunization Status CIS 10 2024	0.00%	0	4	NA	NA	30.90%	2/6	45.26%	2/6
Colorectal Cancer Screening 2024	26.97%	24	89	NA	NA	NA	NA	NA	NA
Controlling High Blood Pressure 2024	0.00%	0	28	NA	NA	67.22%	16/24	72.22%	21/24
Diabetes - HbA1C Good Control 2024	27.27%	6	22	NA	NA	52.31%	12/23	60.34%	14/23
Diabetes - Retinal Eye Exam 2024	27.27%	6	22	NA	NA	52.31%	12/23	63.33%	14/23
Immunization for Adolescents 2024	12.50%	1	8	NA	NA	34.31%	3/8	48.80%	4/8
Well Child First 15 Months 2024	25.00%	1	4	NA	NA	58.38%	3/5	68.09%	3/5
Lead Screening Children 2024	50.00%	1	2	NA	NA	62.79%	2/3	79.26%	2/3

QIP DATA: FIRST QUARTER JAN-APRIL 2024

Measure:	QIP Score:	50th Threshold %	90th Threshold %
Breast Cancer Screening	29.17%	52.20%	63.37%
Child Adolescent Well Care	2.60%	48.07%	61.15%
Cervical Cancer Screening	28.26%	57.11%	66.48%
Childhood Immunization Status	0.00%	30.90%	45.26%
Colorectal Cancer Screening	26.97%	61.31%	0.00%
Controlling High Blood Pressure	0.00%	61.31%	72.22%
Diabetes-HbA1C Good Control	27.27%	52.31%	60.34%
Diabetes-Retinal Eye Exam	27.27%	52.31%	63.33%
Immunization for Adolescents	12.50%	34.31%	48.80%
Well Child First 15 Months	25.00%	58.38%	68.09%
Lead Screening	50.00%	62.79%	79.26%