

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
Regular Meeting
Minutes
December 6, 2023 – 1:00 pm
Tri Counties Community Network Boardroom

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.

CALL MEETING TO ORDER: Abe Hathaway called the regular meeting to order at 1:00 PM on the above date.

BOARD MEMBERS PRESENT:

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

ABSENT:

Keith Earnest, CCO

STAFF PRESENT:

Chris Bjornberg, CEO
Travis Lakey, CFO
Ryan Harris, COO
Theresa Overton, CNO
Valerie Lakey, CPRO
Libby Mee, CHRO
Brigid Doyle, Clinic Education
John Morris, Construction Management
Jessica DeCoito, Board Clerk

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

3 APPROVAL OF MINUTES

- | | | | |
|-----|---|---------------------------|--|
| 3.1 | A motion/second carried; Board of Directors accepted the minutes of October 25, 2023. | <i>Utterback, Humphry</i> | <i>Approved by All
Abstain - Cufaude</i> |
| 3.2 | A motion/second carried; Board of Directors accepted the minutes of November 6, 2023. | <i>Cufaude, Guyn</i> | <i>Approved by All</i> |

4 DEPARTMENT/OPERATIONS REPORTS/RECOGNITIONS

- | | | | |
|-----|--|---------------------------|------------------------|
| 4.1 | A motion/second carried; Sarah Skelly was recognized as October Employee of the Month. Resolution 2023-15. Burney native and recent graduate from IOT and hit the ground running with MMHD. Very positive and smiling. Works with our residents at the Burney Annex. Congrats to Sarah! | <i>Utterback, Humphry</i> | <i>Approved by All</i> |
| 4.2 | Hospice Quarterly. Written report submitted. Pet therapy program will include dogs most likely. | | |
| 4.3 | Mayers Healthcare Foundation Quarterly. Written report submitted. A Big thank you to the donors of the NorthState Giving Tuesday. Annual Appeals have gone out in the mail and we have already received some responses. Capital Expenditure Funds are being used for all of our departments that requested funds. Car Raffle Ticket sales are going well as well as the Gala Tickets. Wine Donations are being accepted by the Foundation for placing on sponsored tables at the gala. | | |
| 4.4 | Clinical Education. Written report submitted. We have four instructors providing educational opportunities to our staff. NATP – nurse assistance training program – is in its 2 nd year and has been very successful. Opportunities to provide community education for heart saving measures like CPR and Heart Saver. | | |
| 4.5 | Construction Management. Written report submitted and reviewed. | | |

5 BOARD COMMITTEES

5.1	Finance Committee		
5.1.1	Committee Report: Cash on Hand looks good, AR is a little bit up with transfer of new system. HQAF payment was received on October 31 st . Rate Range numbers came in higher than what was projected. We will get two QAF payments this year. QIP measures were not met and funds will not be received.		
5.1.2	October 2023 Financials: motion moved, seconded and carried to approve financials.	<i>Humphry, Cufaude</i>	<i>Approved by All</i>
5.1.3	Board Quarterly Finance Review: motion moved, seconded and carried to approved.	<i>Humphry, Utterback</i>	<i>Approved by All</i>
5.2	Strategic Planning Committee Chair Utterback: No November Meeting		
5.3	Quality Committee: No November Meeting		
6	OLD BUSINESS		
6.1	BOD Assessment Results: Board Member Educational opportunities would be a great piece to add. Board Clerk to research options and opportunities to present. Strategic Planning committee will research the options for changing up the assessment questions.		
6.2	By-Laws Approval: only update was on the mission, vision and values.	<i>Utterback, Guyn</i>	<i>Approved by All</i>
6.3	MVHC Discussion: continued disconnect between MVHC and MMHD. Efforts between CEO's have been consistent. And improvements are being made on both sides. Efforts to reach out by the Board Members will be made. J. Utterback and L. Cufaude have been appointed by the chair to meet with MVHC Board.		
7	NEW BUSINESS		
7.1	Policy & Procedures: 1. Laboratory Staff Competency 2. Quality Assurance Program – Lab 3. STAT List of Tests and Results Reporting Turn Around Time	<i>Guyn, Utterback</i>	<i>Approved by All</i>
7.2	Organizational Analysis: a future change will be to supply this after the fiscal year ends. One correction on "instructions" to "instructors". On page 45 Motion to approve with change on page 45.	<i>Utterback, Humphry</i>	<i>Approved by All</i>
7.3	Annual Organizational Process		
7.3.1	Board Calendar	<i>Utterback, Cufaude</i>	<i>Approved by All</i>
7.3.2	Officers & Committees to remain the same for the 2024 year		
7.4	Tri Counties Community Network Partnership: report provided. After meeting with TCCN Board and researching our opportunities, the partnership would be what has been provided in the report. Motion moved, seconded and approved.	<i>Utterback, Humphry</i>	<i>Approved by All</i>
8	ADMINISTRATIVE REPORTS		
8.1	Chief's Reports: written reports provided in packet		
8.1.1	CFO: Cost reports are in. Working on additional audit stuff. Partnership and DHLF meetings are being set up to getting more information/clarification for DPNF.		
8.1.2	CHRO: Five Unit Assistant program applications received this week – this shows how popular and great the program is. No Manager openings right now – first time in a long time.		
8.1.3	CPRO: We have been working on information packets that the managers can take over to the clinics and provide information on their services.		
8.1.4	CCO: No further questions		
8.1.5	CNO: Burney Annex is in a Red Status for Covid positive cases. CDPH in onsite for reviews on mitigations on self-reported incidents, Covid and scabies cases. CDPH was onsite in FR for incident reviews in the hospital that resulted in no tags nor additional follow-up.		

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 Director's documents are available online at www.mayersmemorial.com.

8.1.6 COO: The most up to date Criteria Documents is provided. Burney Fire Alarm Panel project has been delayed yet again for a possible code violation that is being appealed. In the meantime, our crew continues 24/7 fire watch. Air exchanges in the OR suite continue to be an issue and multiple avenues of corrections are being researched.

8.1.7 CEO: We met with Senior Life Solutions that is a group providing geriatric psychiatry services. A service that could be provided to the LTC residents and our community members needing this service. They are preparing a proforma for us to review and discuss for approval. Meeting with a group for pilot program for an Artificial Intelligence program that our providers could use.

9 OTHER INFORMATION/ANNOUNCEMENTS

9.1 Board Member Message: Employee of the Month, North State Giving Tuesday, Denim and Diamonds Gala, Thank You to Volunteers, TCCN message, Organizational Analysis, Master Planning Community Event, Clinic Patient Appreciation Event

10 MOVE INTO CLOSED SESSION: 3:43 PM

10.1 Personnel – Government Code 54957
CEO Applicants Review **No Action**

11 RECONVENE OPEN SESSION

12 ADJOURNMENT: 5:40 PM
Next Meeting January 25, 2024

I, Abe Hathaway, Board of Directors President, certify that the above is a true and correct transcript from the minutes of the regular meeting of the Board of Directors of Mayers Memorial Healthcare District

Abe Hathaway
Board Member

Jessica Decoy
Board Clerk