

Chief Executive Officer
Ryan Harris



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

Board of Directors
Regular Meeting Minutes
September 17, 2025 @ 1:00 PM
Mayers Memorial Healthcare District
Burney Boardroom
20647 Commerce Way
Burney, CA 96013

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: Jeanne Utterback called the regular meeting to order at 12:59 PM on the above date.

BOARD MEMBERS PRESENT:

Jeanne Utterback, President
Abe Hathaway, Vice President
Lester Cufau, Director
Jim Ferguson, Director
Tami Humphry, Treasurer
Lisa Neal, Board Clerk

STAFF PRESENT:

Ryan Harris, CEO
Travis Lakey, CFO
Keith Earnest, CCO
Libby Mee, CHRO
Theresa Overton, CNO
Valerie Lakey, CPRO
Jessica DeCoito, Director of Operations
Jack Hathaway, Director of Quality
Kristi Shultz, Retail Pharmacy Manager
Daryl Schneider, Physical Therapy & Cardiac Rehab Manager
Michelle Peterson, Outpatient Medical Services Manager

2 CALL FOR REQUEST FROM THE AUDIENCE - PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS: NONE.

3 APPROVAL OF MINUTES

3.1 A motion was made and carried; the Board of Directors accepted the Regular Board Meeting minutes of August 27, 2025. **Cufau, Hathaway** **Approved by All**

4 DEPARTMENT/OPERATIONS REPORTS/RECOGNITIONS

- 4.1 Hospital Pharmacy:
Keith provided a written report. The hospital pharmacy is expanding the 340B program to include ER patients and Outpatient Services, which will lower drug costs to the hospital. The team is working with a new company that can bill Medicare B and deliver continuous glucose machines and sensors via email. A new hospital pharmacist, Gary Pinkley, will be onboarding on September 25, 2025.
- 4.2 Retail Pharmacy:
Kristi provided a written report. Shout out to her team for the excellent customer service they continue to deliver, as they welcome new customers following the closure of Rite Aid in Burney.
- 4.3 Physical Therapy & Cardiac Rehab:
Daryl provided a written report. Scottcare cardiac rehab monitoring equipment will be purchased.
- 4.4 Outpatient Medical:
Michelle Peterson provided a written report. Shout out to her team for working together while she was on LOA.

5 BOARD COMMITTEES

5.1 Finance Committee

5.1.1 Committee Meeting Report: Chair Humphry

Cash on hand looks good; AR days are at 71. Dr. Lewis, a locum, started in the clinic on Monday, and progress is being made with the CMO open positions. Due to H.R. 1, we are reviewing a phased modification approach over the next three years for our current programs, except for the retention programs, for which we see a direct correlation between the reduction in registry and traveler costs. The employee holiday bonus for this year was discussed, estimated to be \$320k. We will look for direction from the board on employee holiday bonuses at the October board meeting.

5.1.2	June 2025 Financial Review, AP, AR, and Acceptance of Financials – Motion moved, seconded, and approved	Humphry, Hathaway	Approved by All
5.1.3	July 2025 Financial Review, AP, AR, and Acceptance of Financials – Motion moved, seconded, and approved	Hathaway, Cufaude	Approved by All
5.1.4	Investment Proposal by Clear Wealth Strategies - Motion moved, seconded, and approved 7% in principal & interest that can be reinvested	Hathaway, Cufaude	Approved by All

5.2 **Quality Committee**

- 5.2.1 **September Quality Meeting Report:**
The Plan of Correction (POC) for SNF has been accepted, and there will not be a resurvey. Expecting the Denial of Payment for New Admissions (DPNA) to be lifted and admissions reinitiated effective Oct 15, 2025. For medication errors, staff education and tracking are in place. Next steps include aligning the medication errors with the corresponding medication name and nurse ID and determining an appropriate threshold. Theresa discussed nursing changes and implementations in SNF. In FR, a change has been implemented within PCC that requires nurses to answer based on a pain scale, and it is currently in a trial period at the Burney Annex. The nurse educator is doing 1x1 audits with nurses. Jack will include Quarterly Hospice Quality reporting and SNF Quality. Keith reported that for Hospice, the majority of funds are spent at the beginning of a stay, and discussed educating the community on the range of Hospice services that can be provided before the end-of-life period. Ryan reported that the lab survey identified a few issues ("tags"), while the clinic survey had no identified tags.

5.3 **Strategic Planning Committee Report**

- 5.3.1 Meeting moved to BOD Retreat on September 29, 2025

6 **NEW BUSINESS**

6.1	Resolution 2025-16 Authorizing Signatories for Clear Wealth Investment Account. Motion moved, seconded, and approved.	Ferguson, Hathaway	Approved by All
6.2	BOD Assessment Process Jeanne is attending the Annual ACHD meeting at the end of September and will share information on the ACHD member benefit for Board Self-Assessment.		
6.3	HR 1 Advocacy MMHD's advocacy regarding H.R. 1 has been steady, coalition-driven, and strategically aligned with statewide efforts to protect rural healthcare. Federal engagement included outreach to Congressman Doug LaMalfa's office, while state-level discussions have begun with Senator Megan Dahle, with further outreach pending. MMHD actively participates in the California Hospital Association's Legislative Strategy Group and collaborates with key organizations, including CHA, ACHD, and DHLF, to ensure unified messaging and a more substantial impact. Next steps include increasing direct legislative engagement and documenting advocacy outcomes for review by leadership.		

ADMINISTRATIVE REPORTS

7.1	Chief Reports: Written reports provided in packet		
7.1.1	DOO: Written report submitted. Operations continue to progress across key areas. The Solar Project has received final approval from PG&E, with completion expected by October 25. TCCN Phase 3 and FR RHC permits have been secured, while PIN 74 Lot Line Adjustments await county approval. A seismic retrofit strategy is underway with architectural support to meet SPC and NPC compliance. The team is preparing to present construction project recommendations at the October 29 workshop. In IT, a printer contract refresh is in progress, leveraging GPO vendor engagement. Environmental Services is focused on implementing corrective actions following a recent relicensing survey, with long-term plans to enhance bathroom cleanliness and floor maintenance.		

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.

- 7.1.2 **CFO:** Written report submitted.
The fiscal year is off to a strong start, with the Emergency Room achieving a record-breaking July and Swing services recording their third-best July in 16 years, contributing to one of the highest daily gross revenue months on record. Accounts Receivable (AR) days increased slightly due to elevated revenue levels from ER and inpatient services. The CFO participated in a webinar hosted by HCAI outlining the Rural Health Transformation Program's application process and timelines, which includes feedback from 279 RHCs, 151 FQHCs, and 76 rural hospitals. Surveys are being distributed to guide program focus, and internal efforts are underway to submit responses and narratives that best support rural hospital reimbursement.
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- 7.1.3 **CHRO:** Written report submitted.
Human Resources, Payroll, and Benefits Department supported 307 employees and actively managed 18 job requisitions to fill 32 open positions across multiple departments, with significant staffing needs in Skilled Nursing. Recruitment efforts included participation in regional career fairs to strengthen MMHD's talent pipeline. All 292 annual employee evaluations were completed on time, with 69% of staff meeting expectations and 31% exceeding them. Compliance initiatives such as Relias Re-Orientation and Employee Health tracking are underway. Additionally, MMHD launched a Leadership Academy in partnership with the Healthcare Leadership Institute, engaging 18 leaders in DiSC and 360-degree assessments to foster a high-performing leadership culture.
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- 7.1.4 **CPRO:** Written report submitted.
MMHD continues to focus on sustained advocacy around H.R. 1, with coordinated efforts at both federal and state levels to protect rural healthcare interests, including active participation in statewide coalitions. The Mayers Healthcare Foundation celebrated a successful 25th Anniversary Golf Tournament, raising \$15,000 for the relocation of the Lucky Finds Thrift Store, which is nearing completion. Scholarship and departmental award initiatives are underway, alongside preparations for North State Giving Tuesday and the 2026 Denim & Diamonds Hospice Gala. Public relations efforts remain focused on website updates, while the Tri-County Community Network continues to engage in community outreach through clothing giveaways and ACEs Aware services. Additionally, the BOTVIN program received a \$4,000 grant to expand school-based prevention efforts.
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- 7.1.5 **CCO:** Written report submitted.
The Clinical Division continues to advance key initiatives across departments, with strong engagement in Service Excellence workshops and Oasis team projects targeting synergy and outcomes for full implementation by April 2026. Respiratory Therapy remains fully staffed with travelers while recruitment for a manager is underway. Infection Prevention completed its Exposure Control Plan and is launching a fall-themed hand hygiene campaign aligned with National Infection Prevention Week. The Laboratory successfully underwent a dual-cycle CLIA inspection with fewer citations than average, while Imaging celebrated a successful MRI launch and is evaluating service expansions and vendor contracts. The Rural Health Clinic achieved 100% compliance in its OB-related site review, and Care Coordination welcomed a new specialist.
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- 7.1.6 **CNO:** Written report submitted.
Nursing services maintained strong census levels across SNF, Acute, and Outpatient departments, despite ongoing staffing challenges, mitigated by new hires and agency support. Regulatory compliance remains a focus, with corrective actions underway following CDPH citations and continued progress on EMTALA and ACHC Plans of Correction. Clinical education advanced with telemetry and defibrillator training, while Ambulance Services launched monthly crew reviews. The Emergency Department sustained high patient volumes and achieved strong patient follow-up rates. Surgery improved scheduling efficiency and addressed facility compliance issues. Across departments, staff development, patient engagement, and operational resilience continue to drive quality care and service excellence. SNF has a wait list: 2 for Memory Care and 4 for the general population
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- 7.1.7 **CEO:** Written report submitted.
MMHD is in ongoing negotiations with Pit River Health Services to enhance mental health support for residents. Advocacy efforts are intensified to address seismic compliance, healthcare affordability, and funding for rural hospitals with state and federal leaders. The Service Excellence Initiative continues to impact staff culture positively, and recruitment remains a priority with locum tenens filling key roles temporarily. Strategic planning is underway for construction projects and financial sustainability, including potential participation in the Small Rural Hospital Relief Program. The district is also reassessing benefits programs for long-term viability. A completed Plan of Corrections (POC) following the August relicensing survey has led to new training initiatives aimed at improving compliance. Lastly, in response to public concern following a KRCR report on rural hospital closures, internal communication was shared to ensure staff can accurately address community questions.

8 OTHER INFORMATION/ANNOUNCEMENTS

Board Member Message:

MRI

Physical Therapy & Cardiac Rehab

Retail Pharmacy – get your prescriptions filled

8.1 TCCN

Octoberfest

ECM Services

Thank you to our MHF Tournament golfers, donors, volunteers, and Foundation board members

Gala – Sparkling with Gratitude

Board Education: Chapters 36-41

8.2 The team engaged in a discussion on the assigned chapters and plans to complete the book and hold a final review during the October board meeting.

9 MOVE INTO CLOSED SESSION: 3:42 pm

9.1 Pending Litigation (\$54956.9) (Discussion/Action)

No Action
Taken

10 RECONVENE OPEN SESSION: 4:05pm

11 Adjournment: 4:05 pm. Next meeting is October 29, 2025

I, Jeanne Utterback, 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


Board Member


Board Clerk