

Chief Executive Officer  
Ryan Harris



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

**Strategic Planning Committee**  
Meeting Agenda  
January 26, 2026 @ 1:00 pm  
Mayers Memorial Healthcare District  
Fall River Board Room  
43563 HWY 299E  
Fall River Mills, CA 96028

**Mission Statement**  
Leading rural healthcare for a lifetime of wellbeing.

**Attendees**  
Abe Hathaway, Committee Chair, Board Member  
Jeanne Utterback, Board Member  
Ryan Harris, CEO  
Lisa Neal, Board Clerk

In observance of the Americans with Disabilities Act, please notify us at 530-336-5511, Ext 1130, at least 48 hours in advance of the meeting so that we may provide the agenda in alternative formats or make disability-related modifications and accommodations. The District will make every attempt to accommodate your request.

				Approx. Time Allotted
1	<b>CALL MEETING TO ORDER</b>			
	This meeting will be conducted in accordance with Robert's Rules of Order and the Bylaws of Mayers Memorial Healthcare District.			
2	<b>CALL FOR REQUEST FROM THE AUDIENCE - PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS</b>			
	Persons wishing to address the Board are requested to fill out a "Request Form" prior to the beginning of the meeting (forms are available from the Clerk of the Board (M-W), 43563 Highway 299 East, Fall River Mills, or in the Board Room). If you have documents to present to the Board of Directors for review, please provide a minimum of 9 copies. When the President announces the public comment period, requestors will be called upon one at a time. Please stand and give your name and comments. Each speaker is allocated five minutes to speak. Comments should be limited to matters within the jurisdiction of the Board. Pursuant to the Brown Act (Govt. Code section 54950 et seq.), action or Board discussion cannot be taken on open time matters other than to receive the comments and, if deemed necessary, to refer the subject matter to the appropriate department for follow-up and/or to schedule the matter on a subsequent Board Agenda.			
3	<b>APPROVAL OF MINUTES</b>			
	3.1 Strategic Planning Committee Meeting – December 1, 2025	Attachment A	Action Item	2 min.
4	<b>CONSTRUCTION</b>			
	4.1 Master Planning Update		Discussion	10 min.
	4.2 Deferred Maintenance Projects		Discussion	10 min.
	4.3 Construction Projects Update		Discussion	10 min.
5	<b>STRATEGIC PLANNING PRIORITIES</b>			
	5.1 FY26 Priorities Update	Attachment B	Report	10 min.
6	<b>MEETING SCHEDULE MODIFICATION</b>			
	6.1 Reschedule March and May Meetings		Action Item	5 min.
7	<b>OTHER INFORMATION/ANNOUNCEMENTS</b>			
			Information	5 min.
8	<b>ADJOURNMENT: Next Strategic Planning Meeting is March 23, 2026</b>			

Posted 01.22.26

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**Attachment A**

**Board of Directors**

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

Board of Directors  
**Strategic Planning Meeting Minutes**  
December 1, 2025 @ 1:00 PM  
Mayers Memorial Healthcare District  
Fall River Boardroom  
43563 HWY 299 E  
Fall River Mills, CA 96028

*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:** Abe Hathaway called the Strategic Planning meeting to order at 1:02 PM in accordance with Robert's Rules of Order, which govern the conduct of the meeting.

**BOARD MEMBERS PRESENT:**

Abe Hathaway, Chair, Board Vice President  
Jeanne Utterback, Board President

**STAFF PRESENT:**

Ryan Harris, CEO  
Jessica DeCoito, Director of Operations  
Lisa Neal, Board Clerk

**ABSENT:**

- 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 Strategic Planning Committee Meeting minutes of July 28, 2025, as corrected.	Utterback/Hathaway	<b>Approved by All</b>
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- 4 CONSTRUCTION**

4.1 Master Planning Update: Jessica reported that the architect is preparing a cost estimate in phases.  
Phase 1 - new Administrative Building for non-code-required offices that would have a breezeway connection to the hospital.

Phase 2 - Acute Expansion for a remodel of Station 3 space for support services such as RT, Hospital Pharmacy, Materials Management, and Acute. Acute beds would be reduced to 10. Also includes moving the kitchen during Phase 2 to meet the 2030 seismic compliance requirements. Surgery would be remodeled for a new kitchen, placing it between SNF and Acute.

Phase 3 - SNF Expansion to include replacing plumbing and HVAC, and remodeling and updating the interior space to meet ADA requirements. The SNF hall would de-rate to OSPHD 2 space.

Phase 4 - new surgery building when funding is secured.

Once the plans are ready, they will go to WIPFLI for review.

For 2030 compliance, we must show we are working towards milestones.

Ryan and Val Lakey are planning a meeting with Senator Dahle in the near future regarding 2030 compliance.

The committee requested that Ryan and Jessica provide a high-level seismic update, including drawings and phases, at the December board meeting.

#### 4.2 Construction Projects Update

Annex - Brown Plumbing found massive breaks in the cleanout pipes and part of the sewer line under the building. Work is underway to install new lines.

Nurse Call – Fall River is approved and waiting for a status update on Burney.

FR Kitchen - Rented freezer units from K&K to use during maintenance work on the current units. Lassen Heating & Air advised that these units are very well-made and can still be maintained. New units would not work as well and do not have the same equipment lifespan.

Burney Kitchen – Replaced the reach-in fridge.

Once a general contractor has been selected, they can secure subcontractors, starting with these projects

- TCCN – estimating three months to complete once started; targeting the new school year for opening
- FR Clinic.

Internal projects

- Maintenance and IT are developing a project intake form for departments to determine cost, resources needed, etc.
- Installing countertops and cabinets in the Burney Activities space.

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## 5 OTHER INFORMATION/ANNOUNCEMENTS

Strategic Priorities Update – Ryan

- SEI is on track to meet the Year 1 deadline in April 2026.
- HLI Leadership training – has good engagement. At the next meeting will share the 360 Assessments and DiSC assessment analyses.
- Growth – moving forward with calcium scoring, sending the first referral to PRHS for behavioral health with SNF; working towards cardiac stress testing, and will be meeting with the practitioner to discuss contract.
- Social Media programs and the website are on track to be completed by the end of the year.
- Accounts Receivable (A/R) - We are handling in-house with our own staff.
- Cerner Initiative
  - Jack is assigned to build workgroups, determine existing workflows, and develop improvements.
  - Brought in a Cerner team for optimization training to the providers and some staff.
- Provider Update
  - Renee Wadsworth started last week at the clinic, and good feedback has been received.
  - Dr. Munroe has expressed an interest in a permanent position. He has extended his contract into July, and Ryan will continue to have conversations with him.
  - New hospitalist, Dr. Rahimi, started today. He rotates coverage with Dr. Denno every other week.
  - New contract in place with Magno.
  - CMO candidate interview this afternoon.
  - Dr. Watson is currently the CMO and Burney SNF hospitalist. He isn't working in the ED.
  - Natalie Nelson returned from leave today.
- Clinic
  - Research underway for hiring someone to only answer phones at the clinic, would not be patient-facing.

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## 6 ADJOURNMENT: The committee chair adjourned the meeting on December 1, 2025, at 2:05 p.m.

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## Strategic Planning Priorities Update

Respectfully Submitted by Ryan Harris, CEO

### **Quality:**

By June 30, 2026, Mayers Memorial Healthcare District will complete Year 1 of the Service Excellence initiative in accordance with our established roadmap.

I am pleased to report that we are on track to meet this goal, and the progress made so far is a testament to the dedication and hard work of our entire team.

A significant amount of effort was invested in laying a strong foundation during Year 1, and our achievements reflect a collaborative and committed approach. Our Service Excellence Advisors, comprised of dedicated staff members, played a pivotal role in guiding and supporting our initiatives. Additionally, our Service Excellence Council, which includes staff from various departments and leadership, provided valuable oversight and strategic direction. Our OAISIS teams, composed of management and director-level staff, contributed their expertise and leadership to ensure the successful implementation of initiatives across the district.

Some key highlights from Year 1 include the highly impactful Service Excellence workshops conducted by our advisors, which fostered a culture of continuous improvement and exceptional service delivery. The GOAT Awards, recognizing outstanding contributions to service excellence, celebrated the achievements of individuals and teams who embody our values. Furthermore, comprehensive training programs were rolled out to enhance skills and knowledge in service excellence, equipping our staff with the tools to better serve our community.

Overall, the first year has set a strong foundation for continued progress, and we look forward to building on this momentum in the coming years to achieve even greater levels of service excellence throughout Mayers Memorial Healthcare District.

### **People:**

By June 30, 2026, an additional 13 leadership team members from the Mayers Memorial Healthcare District, including a combination of managers and directors, will complete the Healthcare Leadership Institute Management Training program.

To date, the group participating in this program has achieved full participation, and we are currently on track to meet this objective. Once this year's cohort completes the training, all Executives, Directors, and Managers will have undergone the same program, further strengthening the alignment of our leadership team.

**Growth:**

By June 30, 2026, Mayers Memorial Healthcare District will strategically enhance or introduce, at a minimum, three (3) new services, such as Cardiac Stress Testing, DOT Drug Testing, Calcium Scoring, DEXA Scans, Home Health PT, Occupational Therapy, Diabetic Eye Exams, Podiatry, MRI services, visiting nurse services, substance abuse treatment programs, behavioral health services, Burney Retail Pharmacy or care coordination.

I am pleased to inform you that as of today, we have commenced MRI for our community and behavioral health services for our skilled nursing residents. We have also hired a care coordinator who is currently preparing charts, focusing on quality measures, and following up on results and referrals. Initially, the care coordinator was assigned to Erica's patients due to her busy schedule, but we have also begun integrating Dr. Sloat's patients into the process. Our new Chief Operations Officer has been working on the logistics of establishing visiting nurse services, with the goal of launching by June 30. Our Director of Ancillary Services is making progress on implementing DOT drug testing procedures.

**Communication:**

By June 30, 2026, we will revamp our social media program and website to increase service visibility.

We have made substantial progress toward achieving this goal. The departmental photo shoot has been successfully completed, and all relevant information from the departments has been updated. We have completed a comprehensive website redesign, which now includes an AI component to enhance functionality as well as a board member section on the intranet.

We have also established a schedule for departmental YouTube videos and hired a consultant to assist with social media strategy, as well as the production of department-specific videos. These efforts are moving us closer to full completion of this priority.

**Finance:**

By June 30, 2026, we will reduce our overall accounts receivable (AR) days to 65 or fewer to improve financial performance.

Work continues steadily as we make progress toward this important priority. We are currently transitioning away from the third-party billing agency and have brought on additional in-house billing support to enhance efficiency and oversight. Our Director of Quality is actively addressing Cerner system issues at the departmental level to ensure smoother operations and reduce errors, making our billing timelier, and reducing denials.

Additionally, we have launched a provider optimization initiative aimed at improving documentation accuracy and streamlining workflows to boost provider productivity. To further support accounts receivable (AR) reduction, we are implementing targeted cross-training for staff on billing best practices and exploring a comprehensive payment model for our providers that ties their charting performance to compensation.

Since our revenue cycle is now more clinically driven, it is critical that we resolve issues within Cerner and maximize provider efficiency, as their performance directly impacts our financial health. These combined strategies are designed to improve collections, reduce AR days, and create a more sustainable and effective revenue cycle overall.