

Chief Executive Officer
Ryan Harris



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

Board of Directors
Quality Committee
Minutes
March 25, 2026 @ 9:30 am
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.

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- 1 CALL MEETING TO ORDER:** Les Cufaude called the Quality Board Committee meeting to order at 9:33 am on March 25, 2026, in accordance with Robert's Rules of Order and the Bylaws of Mayers Memorial Healthcare District, which govern the conduct of the meeting.
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BOARD MEMBERS PRESENT:

Les Cufaude, Committee Chair, Director
Jim Ferguson, Director

STAFF PRESENT:

Ryan Harris, CEO
Jack Hathaway, Director of Quality
Libby Mee, Chief People Officer
Theresa Overton, Chief Nursing Officer
Keith Earnest, Chief Clinical Officer
Lisa Neal, Board Clerk

ABSENT:

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- 2 CALL FOR REQUEST FROM THE AUDIENCE – PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS**
No public comment.
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3 APPROVAL OF THE MINUTES: February 25, 2026

3.1 Regular Quality Committee Meeting – February 25, 2026

A motion to accept the minutes, with changes, was made, seconded, and carried.

Ferguson /
Cufaude

Approved
by All

4 DIRECTOR OF QUALITY: Written report submitted by Jack Hathaway.

The Cerner Optimization Project focuses on refining workflows, improving system integrity, and addressing data and order management issues, including CPT code cleanup. The project remains on track for completion by December 31, 2026.

Medication Errors. Progress has been made in reducing medication errors in collaboration with Richter. Efforts are underway to establish a clear baseline and optimize roles to support sustained performance. While standardized national benchmarks for SNFs are limited, the team is developing internal tracking and visual reporting. The committee has requested quarterly reporting.

One QIP measure has been achieved, with final validation pending Partnership data.

Patient experience priorities within HCAHPS have been identified, with continued monitoring and refinement as measures are sustained.

5 OTHER INFORMATION/ANNOUNCEMENTS:

Ryan reported that he and other ELT members attended the CHA Rural Health Care Symposium in Sacramento, CA on March 23 & 24.

6 MOVE INTO CLOSED SESSION

The Board Committee moved to closed session at 10:28 a.m.

6.1 Hearing (Health and Safety Code §32155) – Medical Staff Credentials

MEDICAL STAFF REAPPOINTMENT

1. Tikoos Blankenberg, MD – Pathology
2. Ashley Delaney, DO – Emergency Med.
3. Shelleen Denno, MD – Internal Med.
4. Dale Syverson, MD - Surgery

AHP REAPPOINTMENT

1. Lewis Furber, Jr, NP – Family Medicine (Pit River)

AHP APPOINTMENT

1. Vanessa Ulibas, LPCC (T2U)

The Board Committee adjourned the closed session at 10:44 a.m.

**Ferguson /
Cufaude**

**Approved
by All**

8 RECONVENE OPEN SESSION

The Board Committee reconvened in open session at 10:44 a.m.
Motion to approve the medical staff credentials was made, accepted, and moved.

**Ferguson /
Cufaude**

**Approved
by All**

9 ADJOURNMENT: The committee chair declared the meeting adjourned at 10:47 a.m.
Next Quality Board Committee Meeting is April 29, 2026
