Chief Executive Officer
Ryan Harris

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

MAYERS MEMORIAL HEALTHCARE DISTRICT

Board of Directors
Regular Meeting Minutes
May 27, 2026 @ 1:00 PM
Fall River Boardroom
43579 Hwy 299E
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:** Jeanne Utterback called the regular Board of Directors meeting to order at 1:01 p.m. on May 27, 2026, in accordance with Robert's Rules of Order and the Bylaws of Mayers Memorial Healthcare District, which govern the conduct of the meeting.

BOARD MEMBERS PRESENT:	**STAFF PRESENT:**
Jeanne Utterback, President	Ryan Harris, CEO
Abe Hathaway, Vice President	Jessica DeCoito, COO
Tami Humphry, Treasurer	Theresa Overton, CNO
Lester Cufaude, Secretary	Travis Lakey, CFO
Jim Ferguson, Director	Keith Earnest, CCO
	Val Lakey, CPRO
ABSENT:	Libby Mee, CPO
	Lisa Neal, Board Clerk

2 **CALL FOR REQUEST FROM THE AUDIENCE - PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS:** No public comments.

3 **APPROVAL OF MINUTES**

3.1	A motion to accept the Regular Board Meeting minutes of April 29, 2026, as corrected, was made, seconded, and carried.	**Cufaude / Ferguson**	**Approved by All**

4 **DEPARTMENT/OPERATIONS REPORTS/RECOGNITIONS**

4.1	Resolution 2026-11 April Employee of the Month: Shelby Sheppard - is recognized for her constant supportive presence and actions. She has stepped into a charge nurse role by making positive changes from a white rose to indicate hospice/comfort care and working on adding quiet hours to promote healing and calmness to our patients. She is always kind, says hi to everyone, and is professional. She creates workflow improvements which allows us to be compliant while at the same time providing great and safe patient care. She creates a positive work environment and is always eager to help a coworker. A motion to accept the April Employee of the Month was moved, seconded, and carried.	**Cufaude / Humphry**	**Approved by All**

4.2 Acute – written report submitted by Moriah Padilla, Director of Nursing, Acute Care. Theresa Overton was available to answer questions. The White Rose Program was a Service Excellence Initiative (SEI) Do-It project. Additional initiatives with visual cues include a quiet hours campaign, brain rest, and high fall risk awareness.

4.3	Emergency Department – written report submitted by Bridget Bernier, Emergency Department Manager. Successful HALO (High Acuity Low Occurrence) training was conducted last week.			
4.4	Outpatient Medical – written report submitted by Michelle Peterson, Outpatient Medical Services Manager. Staff education efforts continue with a focus on wound care best practices. Long-term care and acute care nurses and CNAs are being brought through the wound care clinic for hands-on training and review of standards of care, wound assessment, and appropriate dressing selection and application. This educational initiative will remain ongoing and will be incorporated into the orientation process for all new hires.			
4.5	Purchasing – written report submitted by Hollie Lappin, Purchasing Manager.			
4.6	Hospice Quarterly Update – written report submitted by Keith Earnest, Chief Clinical Officer. Keith clarified that the department move is to the new Hospice & Business Office building (former Thrift Store).			
5	**BOARD COMMITTEES**			
5.1	**Finance Committee**			
5.1.1	Meeting Report: Chair Humphry AR days and Cash on Hand are at a good level.			
5.1.2	April 2026 Financial Review, AP, AR, and Acceptance of Financials. A motion to accept the April 2026 Financials, AP, and AR was moved, seconded, and carried.	**Hathaway / Humphry**	**Approved by All**	
5.1.3	Quarterly Financial Review. A motion to accept the Quarterly Financials Binder was moved, seconded, and carried.	**Hathaway / Humphry**	**Approved by All**	
5.1.4	Nutanix 3-Year Renewal. A motion to approve the 3-yr renewal was moved, seconded, and carried.	**Hathaway / Cufaude**	**Approved by All**	
5.2	**Quality Committee**			
5.2.1	Meeting Report: Chair Cufaude The committee discussed the skilled nursing resident transfer tag and reported that the Plan of Correction (POC) has been accepted, and all required corrective actions have been completed. An update on the Quality Incentive Program (QIP) confirmed that Well Child measures have been successfully met. It was also noted that beginning in 2028, QIP funding is expected to transition to a risk-based model, with Intergovernmental Transfer (IGT) payments provided upfront. Progress on the Cerner process improvement project continues to advance successfully across multiple departments. Ongoing work in Radiology, Physical Therapy, and Outpatient Medical Services was discussed, with interim workarounds currently supporting operations where needed. The committee further reviewed a new fall-prevention initiative in the Skilled Nursing Facility (SNF) that uses visual door indicators for residents identified as at risk of falls, prompting staff to conduct safety checks and confirm that bed alarms remain activated. The new Director of Quality will begin on June 22 and work alongside Jack through June 30 to ensure a smooth transition and continuity of operations.			
5.3	**Strategic Planning Committee**			
5.3.1	Committee Meeting Report: Chair Hathaway Remodel work for a Fall River Clinic next to Physical Therapy. Mack Construction will start mobilizing equipment next week, and construction will begin on June 8.			
5.3.2	Strategic Plan FY2025-FY2029 First Read FY26 Goals have all been met for Quality Service, People, Growth, Communication, and Finance FY27 Goal Recommendations for completion by June 30, 2027 Quality Service: By June 30, 2027, Mayers Memorial Healthcare District will complete Year 2 of the Service Excellence Initiative in accordance with our established roadmap.		**No Action Taken**	

People: Implement a burnout reduction program that includes resilience training, peer support, and workload assessments. This goal depends on baseline information from the Burnout survey being distributed to all staff, with the results presented at the regular board meeting in June. The CEO will fine-tune the goal.

Growth: Develop, launch, or expand 3 revenue-generating clinical service lines, such as but not limited to Visiting Nurse Program, Retail Pharmacy, ECHO, Occupational Therapy, Speech Therapy, or Podiatry. The CEO's recommendations include ECHO, the Visiting Nurse Program, and expanding retail pharmacy in Burney.

Communication: Develop and implement a Community Rounding strategy by creating a comprehensive calendar of a minimum of 20 local community events, ensuring active participation by at least 2 Operations Management Team (OMT) members at each event, coordinating sponsor table presence, and preparing standardized communication points to engage attendees effectively.

Finance: Complete a comprehensive audit of the hospital/clinic chargemaster to verify pricing accuracy, ensure regulatory compliance, and align with payer contracts.

The Board agrees with the goal alignment

5.4	**Governance Committee**			
5.4.1	Committee Meeting Report: Chair Hathaway The first meeting was held May 11			
5.4.2	CEO Evaluation Framework – Libby did some great work. The scoring is on a scale of 1-5 and is built from the job description. It will be ready for full board review in the June regular board meeting.			**No Action Taken**
6	**OLD BUSINESS**			
6.1	ACHD Accreditation For district transparency, the Board members and Executive Leadership will need to have current certificates for Ethics and Sexual Harassment Prevention training on file with the Board Clerk. Val would like to submit all the requirements for the accreditation by June 15, prior to her retirement.			
7	**NEW BUSINESS**			
7.1	Resolution 2026-12 Election Order A motion to accept the Election Order was moved, seconded, and carried.		**Humphry / Ferguson**	**Approved by All**
7.2	Resolution 2026-13 Authorizing Application for Day Care License A motion to accept Authorizing Application for Day License was moved, seconded, and carried.		**Cufaude / Hathaway**	**Approved by All**
7.3	Hazard Vulnerability Assessment (HVA)			
7.3.1	A motion to accept the Hazard Vulnerability Assessment for Fall River was moved, seconded, and carried.		**Cufaude / Humphry**	**Approved by All**
7.3.2	A motion to accept the Hazard Vulnerability Assessment for Burney was moved, seconded, and carried.		**Cufaude / Humphry**	**Approved by All**
8	**ADMINISTRATIVE REPORTS**			
8.1	**Chief Reports:** ***Written reports provided. Questions pertaining to the written and verbal reports of any new items.***			
8.1.1	Chief Operations Officer: Written report submitted by Jessica DeCoito.			

8.1.2	Chief Financial Officer: Written report submitted by Travis Lakey. Travis provided an update that MMHD recently hosted a site visit for representatives from the Office of Health Care Affordability (OHCA), including the Director of HCAI. The visitors expressed interest in collaborating with MMHD on Rural Health Transformation Program (RHTP) initiatives and working with the organization to develop and refine project ideas prior to formal submission for consideration.		
8.1.3	Chief People Officer: Written report submitted by Libby Mee. Hired a Director of Quality and an internal candidate for the Informatics position. Pulled back the Quality Analyst position for the new DOQ to hire once onboard. High school internship, 6 applicants, very impressive group; will place all of them. Received news that a visa for one of the lab scientists has been renewed. Attended the ASHHRA conference in Savannah, GA, last week and brought back some good information and ideas.		
8.1.4	Chief Public Relations Officer: Written report submitted by Valerie Lakey. Proceeds from the golf tournament will benefit Ambulance Services.		
8.1.5	Chief Clinical Officer: Written report submitted by Keith Earnest.		
8.1.6	Chief Nursing Officer: Written report submitted by Theresa Overton. SNF census is 72, and home visits are scheduled over the next several days.		
8.1.7	Chief Executive Officer: Verbal report given by Ryan Harris. DHLF Executive Board nominated Ryan to serve on the Board, and he accepted the appointment. The position carries a three-year term commitment. Hospital Week (May 10-16) activities concluded successfully and included several employee appreciation events, highlighted by an employee barbecue with approximately 60 tri-tip roasts prepared and served. An update on the Nurse Call System replacement project was provided. Plans have been submitted to the contractor who completed the organization’s previous installation, and the project is anticipated to cost approximately $1.5 million for the Skilled Nursing Facility in Fall River Mills and the Burney Annex. As an HCAI-related project, the estimated cost is approximately $500,000 higher than originally projected. The recommendation is to continue moving forward with the Request for Proposal (RFP) and Request for Qualifications (RFQ) process. An update was also provided regarding mobile MRI services. The CEO is currently in discussions with Southern Humboldt and Tahoe Forest to explore opportunities for securing additional MRI service days, which could potentially result in changes to the current service-sharing arrangement. It was further reported that recent MRI scans have shown image artifacts believed to be caused by external interference originating from the area surrounding the MRI trailer near the Ambulance building. A vendor representative was scheduled to be onsite to assess the issue and provide recommendations to mitigate the interference and improve image quality.		
9	**OTHER INFORMATION/ANNOUNCEMENTS:**		
9.1	Board Member Messaging: • Employee of the Month • Health Fair • Golf Tournament • TCCN events • MHF Awarded $32,500 McConnell Foundation Grant • Ryan’s DHLF Executive Board appointment • Travis’ OHCA Board appointment • White Rose and Quiet Time – Acute Initiatives • HALO • Wound Care Services • Congrats to Summer Interns • Recognize Kristi for being on the 340B panel		
10	**ADJOURNMENT:** A motion to adjourn at 3:25 pm was made, seconded, and carried. Next meeting is June 24, 2026.	**Cufaude / Ferguson**	**Approved by All**

I, ______________________, Board of Directors ______________________, 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