

Chief Executive Officer
Ryan Harris



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

Quality Committee

Meeting Agenda

April 23, 2025 @ 9:30 am
Mayers Memorial Healthcare
Burney Annex Boardroom
20647 Commerce Way
Burney, CA 96013

Attendees

Les Cufaude, Director and Chair of Quality
James Ferguson, Director

Ryan Harris, CEO
Jack Hathaway, Director of Quality
Ashley Nelson, Board Clerk

1	CALL MEETING TO ORDER	Chair Les Cufaude	
2	CALL FOR REQUEST FROM THE AUDIENCE - PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS		
3	APPROVAL OF MINUTES		
3.1	Regular Meeting – March 26, 2025	Attachment A	Action Item
4	DIRECTOR OF QUALITY REPORT	Jack Hathaway	Attachment B Report
5	OTHER INFORMATION/ANNOUNCEMENTS		Information
6	ADJOURNMENT: Next Regular Meeting – May 28, 2025		

Agenda Posted: 04/17/2025

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Board of Directors
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James Ferguson, Director

Board of Directors
Quality Committee
Minutes

March 26, 2025 @ 9:30 am
Mayers Memorial Healthcare
Burney Annex 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.

1	CALL MEETING TO ORDER: Les Cufaude called the meeting to order at 9:37 am on the above date.			
BOARD MEMBERS PRESENT:		STAFF PRESENT:		
Les Cufaude, Director Jim Ferguson, Director		Ryan Harris, CEO Jessica DeCoito, Director of Operations Keith Earnest, Chief Clinical Officer Ashley Nelson, Board Clerk		
Excused ABSENT: Jack Hathaway, Director of Quality				
2	CALL FOR REQUEST FROM THE AUDIENCE – PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS			
	None			
3	APPROVAL OF THE MINUTES:			
	3.1	Regular Meeting – February 19, 2025 A motion was moved, seconded and the minutes were approved.	Ferguson, Cufaude	Approved by All
4	DIRECTOR OF QUALITY: Jack submitted his report, Ryan reported. Ryan further explained our current mortality rates, which are below the CA average. RL6 reports have mainly been focused on the SNF so Ryan will be bringing in a consultant to address issues. Ryan further explained the report that Jack submitted.			
5	OTHER INFORMATION/ANNOUNCEMENTS: MRI technology have arrived to the Fall River campus- services will be every other Thursday, once they are up and running. Ryan explained that nursing staff approached him about adding a mid-shift position, however he did an audit of MMHD’s CA meal premium. The audit resulted is MMHD paying \$257,000 in meal premiums for this fiscal year. Ryan has put a plan in place for the managers to have conversations with staff, and report back to Ryan weekly. Ryan explained that leadership participated in an Ignite the Patient Experience meeting and they mapped out the first year of goals.			
6	MOVE INTO CLOSED SESSION: 10:08 am			
7	CLOSED SESSION ITEMS			
	7.1	HEARING (HEALTH AND SAFETY CODE § 32155) – MEDICAL STAFF CREDENTIALS MEDICAL STAFF REAPPOINTMENT 1. Allen Morris, MD 2. Kelsey Sloat, MD 3. Aditi Bhaduri, MD (T2U) 4. Jean-Claude Bassila, MD (T2U) 5. Mustafa Ansari, MD (UCD) 6. Lin Zhang, MD (UCD) 7. Ge Xiong, MD (UCD)	Cufaude, Harris	Approved by All

		<ol style="list-style-type: none"> 8. Sophie Teng, MD (UCD) 9. Massud Seyal, MD (UCD) 10. David Richman, MD (UCD) 11. Kwan NG, MD (UCD) 12. Ricardo Maselli, MD (UCD) 13. Marc Lenaerts, MD (UCD) 14. Jeffrey Kennedy, MD (UCD) 15. Alexander Duffy, DO (UCD) 16. Charles DeCarli, MD (UCD) 17. Norika Malhado-Chang, MD (UCD) 18. Michelle Apperson, MD (UCD) 19. Sindhura Batchu, MD (UCD) <p>MEDICAL STAFF APPOINTMENT</p> <ol style="list-style-type: none"> 1. Shravani Nalla, MD (T2U) 2. Manntej Sra, MD (Vesta) 3. Majid Maybody, MD (Vesta) 4. Caren Armstrong, MD (UCD) 5. Courtney Wusthoff, MD (UCD) 6. Vaishnavi Vaidyanathan, MD (UCD) 7. Neggy Rismanci, MD (UDC) <p>AHP APPOINTMENT</p> <p>STAFF STATUS CHANGE</p> <ol style="list-style-type: none"> 1. Howard Fellows, MD (Mercy Oncology) to Refer & Follow 2. Jorge Perez-Cardona, MD (Mercy Oncology) to Refer & Follow 3. Kyle Greene, MD (Mercy Oncology) to Refer & Follow 4. Farres Ahmed, MD – to Inactive 5. Bradley Clark, MD – to Inactive 6. John Erogul, MD – to Inactive 7. Jonathan Hester, MD – to Inactive 8. Daniel Kirkham, MD – to Inactive 9. Earljay Landrito, MD – to Inactive 10. Stephen Loos, MD – to Inactive 11. William Pace, MD – to Inactive 12. Thomas Powierza, MD – to Inactive 13. Ryan Redelman, MD – to Inactive 14. Gary Turner, MD – to Inactive 15. Keith Shonard, MD – to Inactive 16. Sandeep Amesur, MD – to Inactive 17. John Anderson, MD – to Inactive 18. Daniel Baker, MD – to Inactive 19. Troy Belle, MD – to Inactive 20. Robert Berger, MD – to Inactive 21. Michael Bevern, MD – to Inactive 22. John Boardman, MD – to Inactive 23. James Brull, DO – to Inactive 24. Courtney Carter, MD – to Inactive 25. Lillian Cavin, MD – to Inactive 26. Kenneth Edgar, MD – to Inactive 27. Mark Faltaous, MD – to Inactive 28. Jeffrey Grossman, MD – to Inactive 29. Rashmi Hande, MD – to Inactive 		
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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 Directors documents are available online at www.mayersmemorial.com.

		30. Mark Harshany, MD – to Inactive 31. James Haug, MD – to Inactive 32. Ellen Johnson, MD – to Inactive 33. Norman Malik, MD – to Inactive 34. Benjamin Park, DO – to Inactive 35. William Philips, MD – to Inactive 36. Teppe Popovich, MD – to Inactive 37. Faranak Sadri Tafozoli, MD – to Inactive 38. Dishant Shah, MD – to Inactive 39. Shree Shah, MD – to Inactive 40. Masood Siddiqui, MD – to Inactive 41. Sanford Smoot, MD – to Inactive 42. Alexander Vogel, MD – to Inactive 43. Asif Anwar, MD – to Inactive 44. Frederic Gorin, MD – to Inactive 45. Ryan Martin, MD – to Inactive 46. Lara Zimmerman, MD – to Inactive 47. Ajay Sampat, MD – to Inactive 48. Galen Church, DO – to Inactive 49. Matthew Moore, DO – to Inactive 50. Paula Amacker, NP – to Inactive 51. Haroon Rehman, MD – to Inactive 52. Alireza Abdolmohammadi, MD – to Inactive 53. Mark Ramus, MD – to Inactive 54. Allen Mendez, MD – to Inactive 55. William Hulkower, MD – to Inactive 56. William Randazzo, MD – to Inactive 57. Avez Rizvi, MD – to Inactive 58. Charles Westin, MD – to Inactive		
12	RECONVENE OPEN SESSION: 10:33 am			
13	ADJOURNMENT: at 10:33 am Next Meeting is April 30, 2025			

Board Quality Report April 2025

Mortality In the hospital

In an effort to explore mortality in the hospital, I thought it would be interesting to look at our providers and see what mortality rates were associated with them individually. While there are limitations on what the providers can do here, it might be instructive as a data point looking forward. I am only tracking the providers who have mortality rates; if there is no mortality associated with a provider, then I am not looking at them.

For encounters January 1, 2024, to March 31, 2025

- Denno: 803 Encounters; 9 deaths = 1.12%
- Dykes: 1083 Encounters; 2 deaths = 0.19%
- Leach: 1278 Encounters; 5 deaths = 0.4%
- Magno: 2368 Encounters; 4 deaths = 0.17%
- Riedeman: 62 Encounters; 1 death = 1.61%
- Watson: 1258 Encounters; 1 death = .08%
- Winter: 1967 Encounters; 6 deaths = .31%

Patient Experience

Most current data attached -

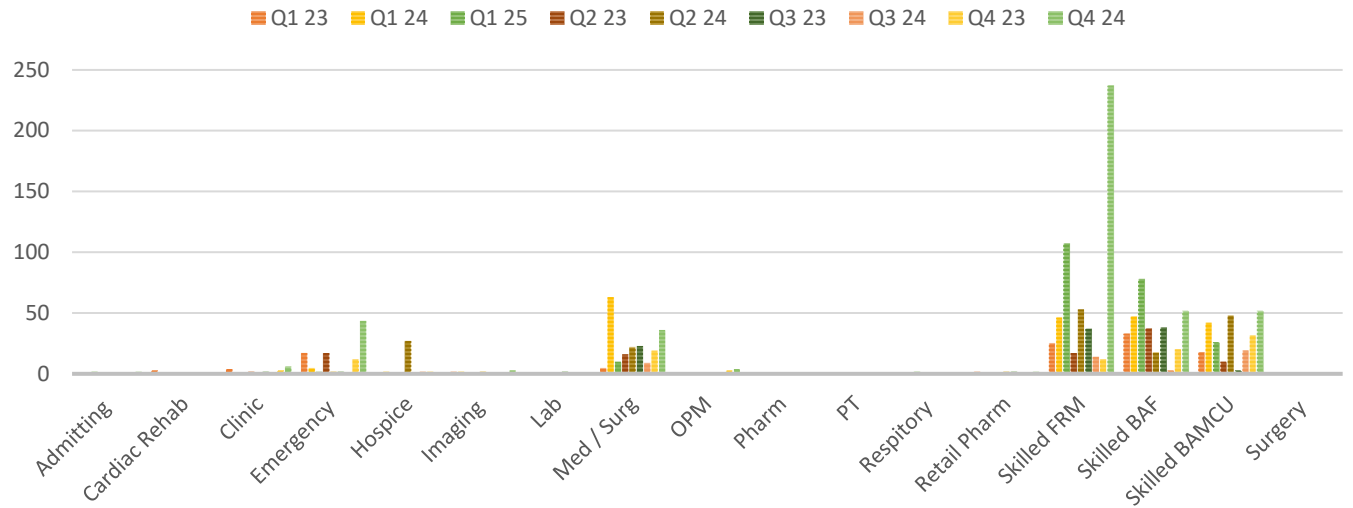
PI Review

We will review the most current PI data in Teams.

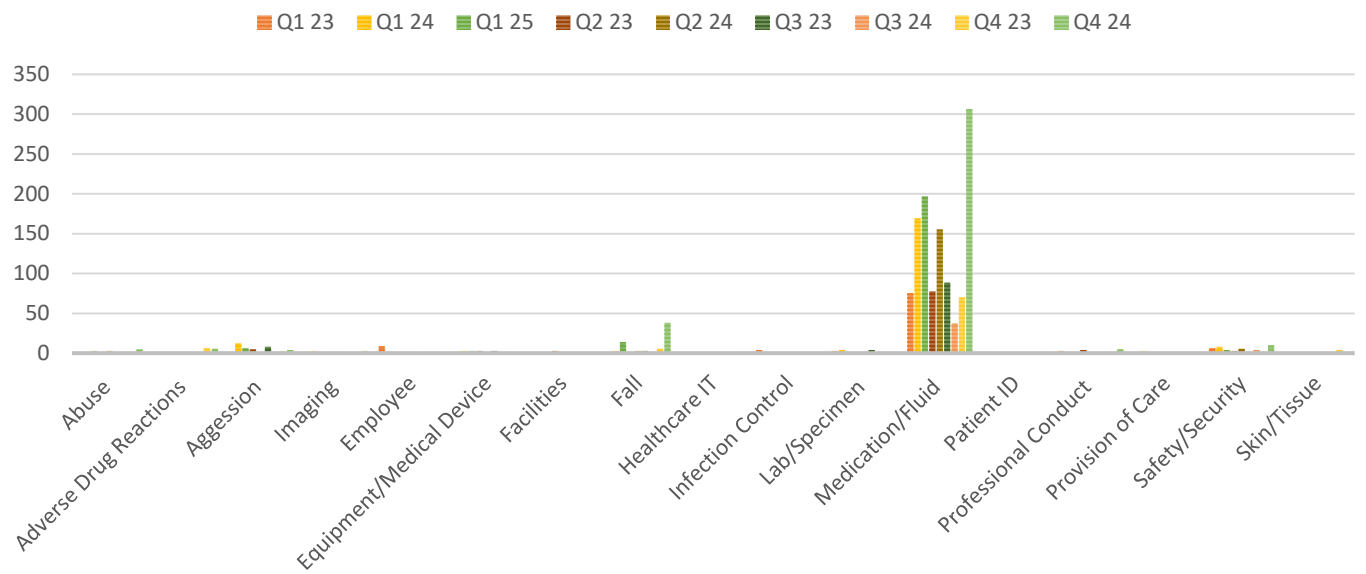
Risk (RL6) Review

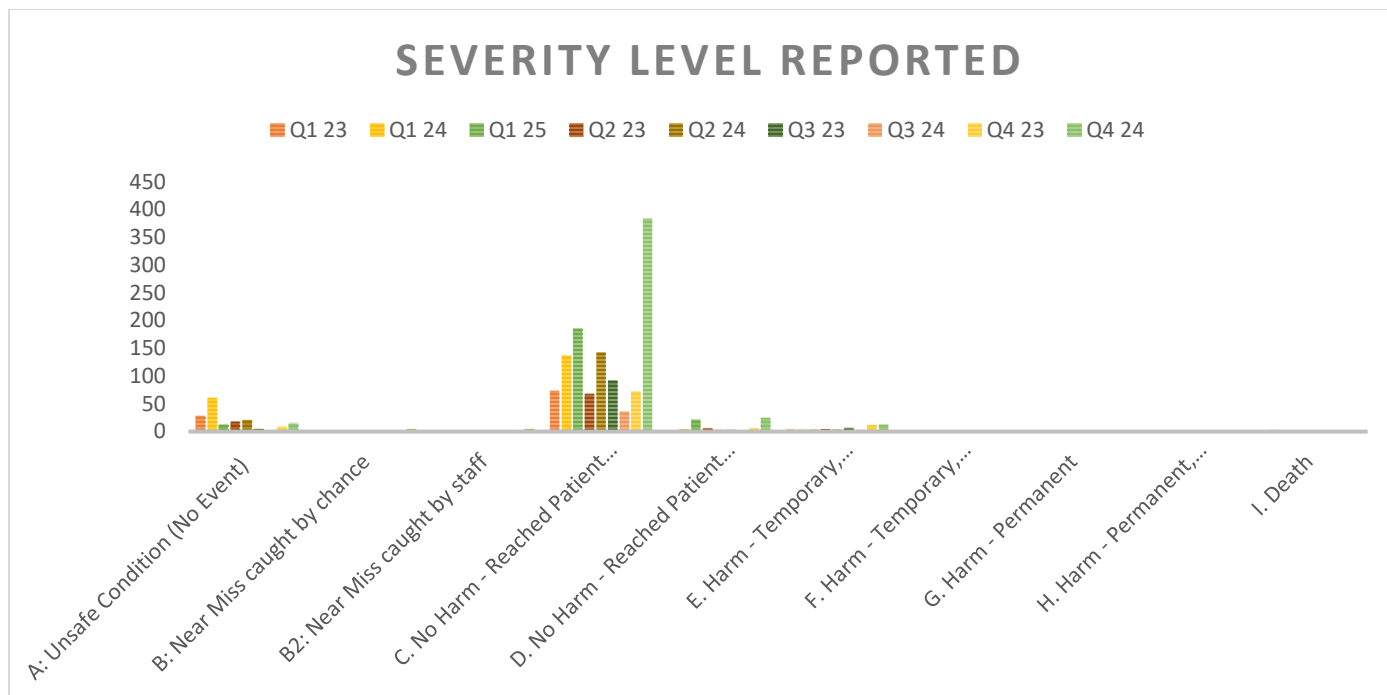
There are 1705 reports in RL6 covering January 1, 2024, to March 31, 2025, the period they break down in the following ways:

CARE/SERVICE AREA



GENERAL EVENT TYPE





State

We have had a state in for hospice annual recertification and licensure and in SNF for facility-reported incidents (FRIs) this month. We are awaiting the 2567 reports so we can respond with all necessary correction plans.

Complaints

Since we last met, we have received two complaints— both financial complaints that mentioned the care received was very good—they just had an issue with their bills.

DHCS QIP Program

We are currently tracking the following measures that have a possibility for success in PY7:

Here are the numbers:

Measure	PY6 - 2023	PY7 - 2024	PY7 PBM*	Targets^	Performance	AV
Q-WCV	11/41 or 26.82%	20/40 or 50%	42.99%	30.41%	+17.09% over Target	
Q-CMS 147	32/124 or 25.80%	165/337 or 48.90%	25.51%	30.78%	+18.32% over Target	

*PBM = Performance Benchmark—Each measure has a minimum performance benchmark that must be met in order to be used for reporting. We must show that we have met the PY7 PBM and had an increase of 10% over PY6 to get an achievement value (AV) of 1 and full payment.

Targets = target values are calculated in one of two ways: 1. using a formula found in the PY7 manual, or 2. using a formula built into the reporting portal for DHCS. Our WCV target was found using the formula in the manual because we have not done that measure before. Our CMS 147 target was calculated in the portal based on our PY6 performance.

All of this is pending the final audit in June, as always. However, the numbers that we have now look promising, and I have been working to validate all of the data that I have against the data that we received this month from Partnership Health Plan – I can say that I am sure of the QCS 147 numbers – they will be reported as is for QIP as I have each encounter on a spreadsheet and I have read every chart. *I will caution that I have more validation and verification that I have to do on the Well Child Visits* –verifying continuous enrollment for the Well Child Visits is much easier with the Partnership data – so I should have that soon. I plan on reporting all of this for QIP on May 16th as soon as the portal opens.

Conclusion

I look forward to seeing how the reporting for QIP plays out next month, and I will let you all know what I learn as I get those numbers in. Other than that, we have been working on a PIP around the admission process, and I plan on kicking that off and working through some standardization of workflows with the team over the next month or two, so I look forward to that in the coming months.

Respectfully submitted, Jack Hathaway - DOQ

FILTER BY All sections selected

● High Point

● Low Point

Survey Items ⬇	SECTION/DOMAIN	Survey Type ⬇	n ⬇	Top Box Score				Percentile Rank ⬇	Score Trendline
				Current (Q1 2025) ⬇	Previous (Q4 2024) ⬇	Goal ⬇	Change ⬇		
PG Overall	PG OVERALL	PG	39	62.84%	N/A	—	--	30	<div>Compare Trending</div>
Section: Arrival	ARRIVAL	PG	38	64.00%	N/A	—	--	72	<div>Compare Trending</div>
Comfort of waiting area	ARRIVAL	PG	37	56.76%	N/A	—	--	69	<div>Compare Trending</div>
Waiting time to treatment area	ARRIVAL	PG	38	71.05%	N/A	—	--	74	<div>Compare Trending</div>
Section: Nurses	NURSES	PG	39	67.18%	N/A	—	--	29	<div>Compare Trending</div>
Courtesy of nurses	NURSES	PG	39	69.23%	N/A	—	--	26	<div>Compare Trending</div>
Nurses took time to listen	NURSES	PG	39	66.67%	N/A	—	--	25	<div>Compare Trending</div>
Nurses' attention to your needs	NURSES	PG	39	64.10%	N/A	—	--	22	<div>Compare Trending</div>
Nurses' responses to quest/concerns	NURSES	PG	39	64.10%	N/A	—	--	22	<div>Compare Trending</div>
Section: Doctors	DOCTORS	PG	39	55.90%	N/A	—	--	7	<div>Compare Trending</div>
Courtesy of doctors	DOCTORS	PG	39	58.97%	N/A	—	--	7	<div>Compare Trending</div>
Doctors took time to listen	DOCTORS	PG	39	53.85%	N/A	—	--	3	<div>Compare Trending</div>
Doctors informative re treatment	DOCTORS	PG	39	56.41%	N/A	—	--	11	<div>Compare Trending</div>
Doctors' concern for comfort	DOCTORS	PG	39	58.97%	N/A	—	--	17	<div>Compare Trending</div>
Doctors include you trtmt decision	DOCTORS	PG	39	51.28%	N/A	—	--	3	<div>Compare Trending</div>
Section: Overall Assessment	OVERALL ASSESSMENT	PG	39	65.58%	N/A	—	--	38	<div>Compare Trending</div>
Overall rating of care	OVERALL ASSESSMENT	PG	39	66.67%	N/A	—	--	42	<div>Compare Trending</div>
Staff cared about you as person	OVERALL ASSESSMENT	PG	39	64.10%	N/A	—	--	32	<div>Compare Trending</div>
Likelihood of recommending	OVERALL ASSESSMENT	PG	37	67.57%	N/A	—	--	47	<div>Compare Trending</div>
Staff worked together care for you	OVERALL ASSESSMENT	PG	39	64.10%	N/A	—	--	31	<div>Compare Trending</div>

† Custom Question ^ Focus Question

Q4 2023

Q1 2024

Q2 2024

Q3 2024

Q4 2024

Q1 2025

■ At or Above Goal

■ <5 Points Below Goal

■ >5 Points Below Goal

□ No Goal

My Focus Items Summary

PG Overall				PG Overall		
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						39
Top Box Score	N/A	N/A	N/A	N/A	N/A	62.84%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	30th

Section: Arrival						Arrival
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						38
Top Box Score	N/A	N/A	N/A	N/A	N/A	64.00%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	72nd

Comfort of waiting area						Arrival
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						37
Top Box Score	N/A	N/A	N/A	N/A	N/A	56.76%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	69th

Waiting time to treatment area						Arrival
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						38
Top Box Score	N/A	N/A	N/A	N/A	N/A	71.05%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	74th

Section: Nurses						Nurses
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						39
Top Box Score	N/A	N/A	N/A	N/A	N/A	67.18%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	29th

Courtesy of nurses						Nurses
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						39
Top Box Score	N/A	N/A	N/A	N/A	N/A	69.23%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	26th

Nurses took time to listen						Nurses
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						39
Top Box Score	N/A	N/A	N/A	N/A	N/A	66.67%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	25th

Nurses' attention to your needs						Nurses
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						39
Top Box Score	N/A	N/A	N/A	N/A	N/A	64.10%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	22nd

Nurses' responses to quest/concerns						Nurses
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						39
Top Box Score	N/A	N/A	N/A	N/A	N/A	64.10%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	22nd

Section: Doctors						Doctors
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						39
Top Box Score	N/A	N/A	N/A	N/A	N/A	55.90%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	7th

Courtesy of doctors						Doctors
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						39
Top Box Score	N/A	N/A	N/A	N/A	N/A	58.97%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	7th

Doctors took time to listen						Doctors
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						39
Top Box Score	N/A	N/A	N/A	N/A	N/A	53.85%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	3rd

Doctors informative re treatment						Doctors
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						39
Top Box Score	N/A	N/A	N/A	N/A	N/A	56.41%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	11th

Doctors' concern for comfort						Doctors
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						39
Top Box Score	N/A	N/A	N/A	N/A	N/A	58.97%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	17th

Doctors include you trtmt decision						Doctors
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						39
Top Box Score	N/A	N/A	N/A	N/A	N/A	51.28%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	3rd

Section: Overall Assessment						Overall Assessment
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						39
Top Box Score	N/A	N/A	N/A	N/A	N/A	65.58%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	38th

Overall rating of care						Overall Assessment
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						39
Top Box Score	N/A	N/A	N/A	N/A	N/A	66.67%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	42nd

Staff cared about you as person						Overall Assessment
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						39
Top Box Score	N/A	N/A	N/A	N/A	N/A	64.10%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	32nd

Likelihood of recommending						Overall Assessment
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						37
Top Box Score	N/A	N/A	N/A	N/A	N/A	67.57%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	47th

Staff worked together care for you						Overall Assessment
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						39
Top Box Score	N/A	N/A	N/A	N/A	N/A	64.10%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	31st

FILTER BY All sections selected ● High Point ● Low Point

				Top Box Score					
Survey Items ⇅	SECTION/DOMAIN	Survey Type ⇅	n ⇅	Current (Q1 2025) ⇅	Previous (Q4 2024) ⇅	Goal ⇅	Change ⇅	Percentile Rank ⇅	Score Trendline
PG Overall	PG OVERALL	PG	82	87.52%	N/A	—	--	73	<i>Compare Trending</i> ●
Ease of scheduling appointments	ACCESS	PG	80	87.50%	N/A	—	--	84	<i>Compare Trending</i> ●
Ease of contacting	ACCESS	PG	81	79.01%	N/A	—	--	62	<i>Compare Trending</i> ●
Section: Moving Through Your Visit	MOVING THROUGH YOUR VISIT	PG	80	81.70%	N/A	—	--	79	<i>Compare Trending</i> ●
Information about delays	MOVING THROUGH YOUR VISIT	PG	73	83.56%	N/A	—	--	85	<i>Compare Trending</i> ●
Wait time at clinic	MOVING THROUGH YOUR VISIT	PG	80	80.00%	N/A	—	--	72	<i>Compare Trending</i> ●
Section: Nurse/Assistant	NURSE/ASSISTANT	PG	81	86.34%	N/A	—	--	60	<i>Compare Trending</i> ●
Concern of nurse/asst for problem	NURSE/ASSISTANT	PG	80	83.75%	N/A	—	--	49	<i>Compare Trending</i> ●
How well nurse/asst listen	NURSE/ASSISTANT	PG	81	88.89%	N/A	—	--	71	<i>Compare Trending</i> ●
Section: Care Provider	CARE PROVIDER	PG	81	91.29%	N/A	—	--	72	<i>Compare Trending</i> ●
CP explanations of prob/condition	CARE PROVIDER	PG	80	91.25%	N/A	—	--	71	<i>Compare Trending</i> ●
CP concern for questions/worries	CARE PROVIDER	PG	81	93.83%	N/A	—	--	84	<i>Compare Trending</i> ●
CP efforts to include in decisions	CARE PROVIDER	PG	80	88.75%	N/A	—	--	53	<i>Compare Trending</i> ●
Likelihood of recommending CP	CARE PROVIDER	PG	81	92.59%	N/A	—	--	77	<i>Compare Trending</i> ●
CP discuss treatments	CARE PROVIDER	PG	80	90.00%	N/A	—	--	68	<i>Compare Trending</i> ●
Section: Personal Issues	PERSONAL ISSUES	PG	79	87.26%	N/A	—	--	64	<i>Compare Trending</i> ●
Our concern for patients' privacy	PERSONAL ISSUES	PG	79	86.08%	N/A	—	--	56	<i>Compare Trending</i> ●
Section: Overall Assessment	OVERALL ASSESSMENT	PG	81	89.38%	N/A	—	--	66	<i>Compare Trending</i> ●
Staff worked together care for you	OVERALL ASSESSMENT	PG	80	85.00%	N/A	—	--	38	<i>Compare Trending</i> ●
Likelihood of recommending	OVERALL ASSESSMENT	PG	80	93.75%	N/A	—	--	89	<i>Compare Trending</i> ●

† Custom Question ^ Focus Question Q4 2023 Q1 2024 Q2 2024 Q3 2024 Q4 2024 Q1 2025
■ At or Above Goal ■ <5 Points Below Goal ■ >5 Points Below Goal □ No Goal

My Focus Items Summary

PG Overall						PG Overall
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						82
Top Box Score	N/A	N/A	N/A	N/A	N/A	87.52%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	73rd

Ease of scheduling appointments						Access
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						80
Top Box Score	N/A	N/A	N/A	N/A	N/A	87.50%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	84th

Ease of contacting						Access
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						81
Top Box Score	N/A	N/A	N/A	N/A	N/A	79.01%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	62nd

Section: Moving Through Your Visit						Moving Through Your Visit
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						80
Top Box Score	N/A	N/A	N/A	N/A	N/A	81.70%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	79th

Information about delays						Moving Through Your Visit
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						73
Top Box Score	N/A	N/A	N/A	N/A	N/A	83.56%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	85th

Wait time at clinic						Moving Through Your Visit
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						80
Top Box Score	N/A	N/A	N/A	N/A	N/A	80.00%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	72nd

Section: Nurse/Assistant						Nurse/Assistant
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						81
Top Box Score	N/A	N/A	N/A	N/A	N/A	86.34%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	60th

Concern of nurse/asst for problem						Nurse/Assistant
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						80
Top Box Score	N/A	N/A	N/A	N/A	N/A	83.75%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	49th

How well nurse/asst listen						Nurse/Assistant
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						81
Top Box Score	N/A	N/A	N/A	N/A	N/A	88.89%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	71st

Section: Care Provider						Care Provider
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						81
Top Box Score	N/A	N/A	N/A	N/A	N/A	91.29%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	72nd

CP explanations of prob/condition						Care Provider
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						80
Top Box Score	N/A	N/A	N/A	N/A	N/A	91.25%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	71st

CP concern for questions/worries					Care Provider	
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						81
Top Box Score	N/A	N/A	N/A	N/A	N/A	93.83%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	84th

CP efforts to include in decisions					Care Provider	
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						80
Top Box Score	N/A	N/A	N/A	N/A	N/A	88.75%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	53rd

Likelihood of recommending CP					Care Provider	
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						81
Top Box Score	N/A	N/A	N/A	N/A	N/A	92.59%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	77th

CP discuss treatments					Care Provider	
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						80
Top Box Score	N/A	N/A	N/A	N/A	N/A	90.00%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	68th

Section: Personal Issues					Personal Issues	
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						79
Top Box Score	N/A	N/A	N/A	N/A	N/A	87.26%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	64th

Our concern for patients' privacy					Personal Issues	
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						79
Top Box Score	N/A	N/A	N/A	N/A	N/A	86.08%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	56th

Section: Overall Assessment					Overall Assessment	
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						81
Top Box Score	N/A	N/A	N/A	N/A	N/A	89.38%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	66th

Staff worked together care for you					Overall Assessment	
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						80
Top Box Score	N/A	N/A	N/A	N/A	N/A	85.00%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	38th

Likelihood of recommending					Overall Assessment	
Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						80
Top Box Score	N/A	N/A	N/A	N/A	N/A	93.75%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	89th

COMPASSIONATE CONNECTED CARE

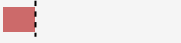



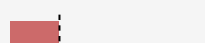

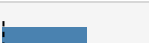
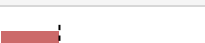

PERCENTILE THRESHOLD

All

50

Above Threshold Below Threshold

Compassionate Connected Care	Patient Need	Survey Type	Survey Items	n	Top Box Score	Percentile Rank	
Culture	Teamwork	PG	Staff worked together care for you†	37	70.27%	54	
Clinical	Discharge Prep	CAHPS	Staff talk about help when you left	48	83.33%	40	
		CAHPS	Info re symptoms/prob to look for	47	87.23%	44	
		CAHPS	Good understanding managing health	38	42.11%	17	
		CAHPS	Understood purpose of taking meds	36	52.78%	28	
Caring Behaviors	Personalize	CAHPS	Nurses listen carefully to you	51	68.63%	9	
		PG	Nurses' attitude toward requests†	39	66.67%	34	
		PG	Attention to needs	48	68.75%	58	
		CAHPS	Doctors listen carefully to you	50	74.00%	26	
		PG	Time doctors spent with you†	37	54.05%	77	
	Courtesy	CAHPS	Nurses treat with courtesy/respect	51	82.35%	23	
		CAHPS	Doctors treat with courtesy/respect	50	82.00%	25	
		PG	Courtesy of person cleaning room†	37	56.76%	8	
	Inform	PG	Nurses kept you informed	48	66.67%	61	
		CAHPS	Nurses expl in way you understand	50	68.00%	11	
		PG	Doctors kept you informed†	36	61.11%	74	
		CAHPS	Doctors expl in way you understand	48	72.92%	35	
		CAHPS	Tell you what new medicine was for	36	72.22%	33	
		CAHPS	Staff describe medicine side effect	34	52.94%	76	
	Privacy	PG	Staff concern for privacy†	38	57.89%	27	
	Choice	PG	Staff include decisions re:trtmnt†	37	56.76%	40	
		CAHPS	Hosp staff took pref into account	39	35.90%	15	
	Empathy	PG	Doctors' concern questions/worries	47	63.83%	61	
		PG	Staff addressed emotional needs†	37	51.35%	22	
	Service Recovery	PG	Response to concerns/complaints†	37	56.76%	35	
	Responsiveness	CAHPS	Call button help soon as wanted it	36	55.56%	36	
		CAHPS	Help toileting soon as you	n<30	N/A	N/A	

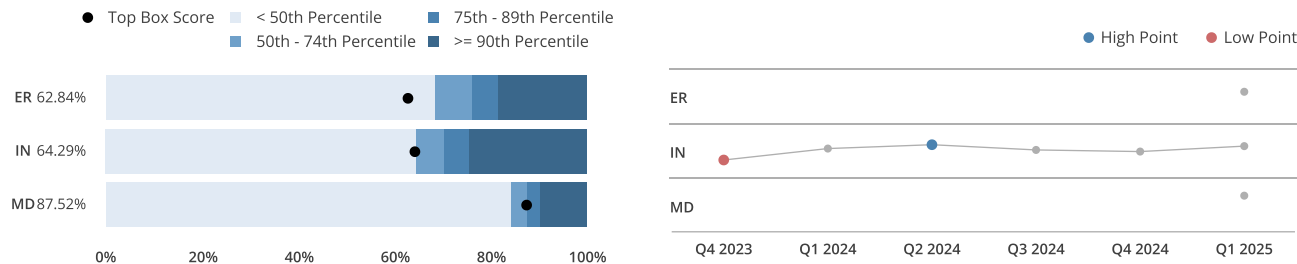
			wanted				
Operational	Environment	CAHPS	Cleanliness of hospital environment	47	70.21%	43	
		CAHPS	Quietness of hospital environment	48	43.75%	12	
		PG	Room temperature†	39	35.90%	11	
	Amenities	PG	Temperature of the food†	39	33.33%	21	
		PG	Quality of the food†	34	32.35%	39	
Global	Global	PG	Overall rating of care†	38	73.68%	68	
		CAHPS	Rate hospital 0-10	51	74.51%	69	
		PG	Likelihood of recommending†	36	63.89%	37	
		CAHPS	Recommend the hospital	51	62.75%	26	

† Custom Question ^ Focus Question

-40 -30 -20 -10 0 10 20
Difference to Threshold

Service Line Performance ⓘ

Primary Measure: PG Overall



Primary Measure: PG Overall

Service Line	n	Top Box Score	Percentile Rank	Peer Group
ER	39	62.84%	30	All PG Database
IN	16	64.29%	48	All PG Database
MD	82	87.52%	73	National Sites

Service Line: Emergency Department (ER) Peer Group: All PG Database

Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						39
Top Box Score	N/A	N/A	N/A	N/A	N/A	62.84%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	30

Service Line: Inpatient (IN) Peer Group: All PG Database

Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n	2	18	15	13	7	16
Top Box Score	8.82%	54.58%	69.96%	49.06%	42.57%	64.29%
Percentile Rank	1	25	87	5	2	48

Service Line: Medical Practice (MD) Peer Group: National Sites

Time Period	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
n						82
Top Box Score	N/A	N/A	N/A	N/A	N/A	87.52%
Percentile Rank	N/A	N/A	N/A	N/A	N/A	73

ED Scoreboard

Report Description:	The ED Scoreboard report gives an overview of the patients seen for a given time by Encounter Type, Disposition, Physician, and other statistical information.
Date Prompt(s):	Arrival Date & Time
Localization via Prompt(s)	Enter Tracking Group: Enter desired ED tracking group Enter ED Event for Triage: Enter site specific DTA for 'Triage' Enter ED Event for Dr Exam: Enter site specific DTA for 'Dr Exam'
Localization via Query Filter(s):	None
Additional Report Information:	Times between events are calculated using completed date and time for each given event.

Access the below links for more detailed reporting information:

Reference Pages: <https://wiki.ucern.com/display/reference/Operational+Reporting+Reference+Pages>

Help Pages: <https://wiki.ucern.com/display/cernerstandardreportsHP>

Client Forum: <https://connect.ucern.com/groups/operationalreportingclientforum>

Report Disclaimers:

- The reports do not automatically have content after package install.
- Reports are architected with Cerner recommended workflows and build. It is strongly suggested that you validate the report output before publishing to end users.

Note: To delete this page, right click on Report Instructions tab below and select 'Delete Report'.

ED Scoreboard

Report Date & Time: 04/16/2025 12:46 PM

Pages: 1 of 1

Arrival Date Range: 1/1/2024 12:00:00 AM to 12/31/2024 12:00:00 AM

Current User: MAYEJHATHAWAY

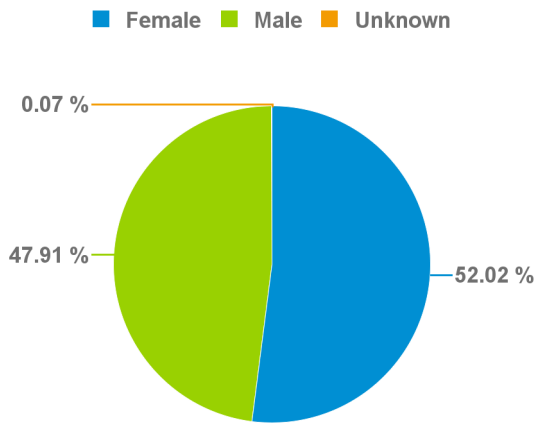
Tracking Group: MAYE ED

Visits for Period: 4,571

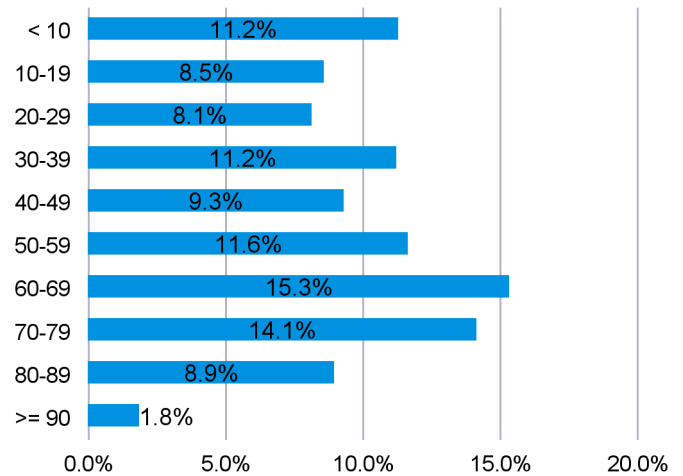
Overall Median LOS (min):

Overall IP Median LOS (min):

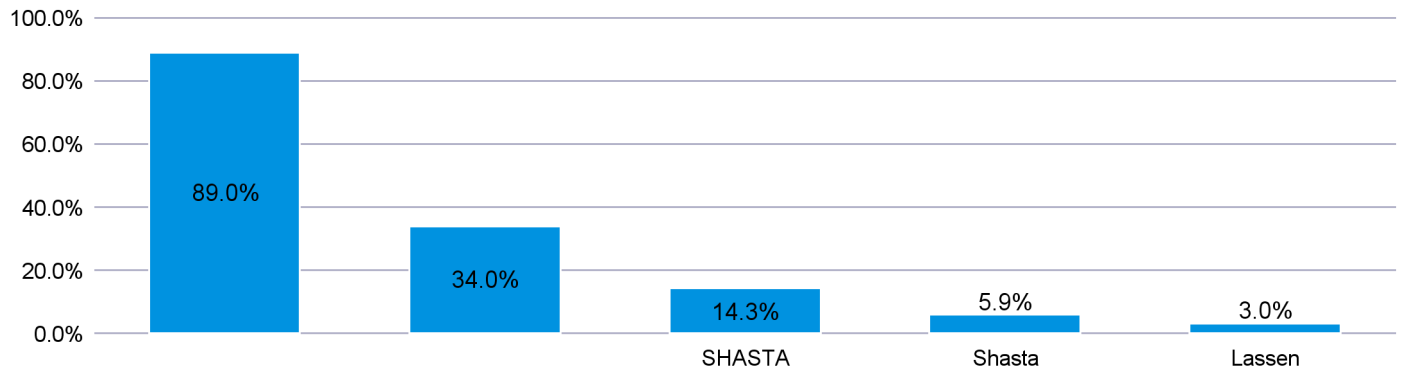
Patients by Gender



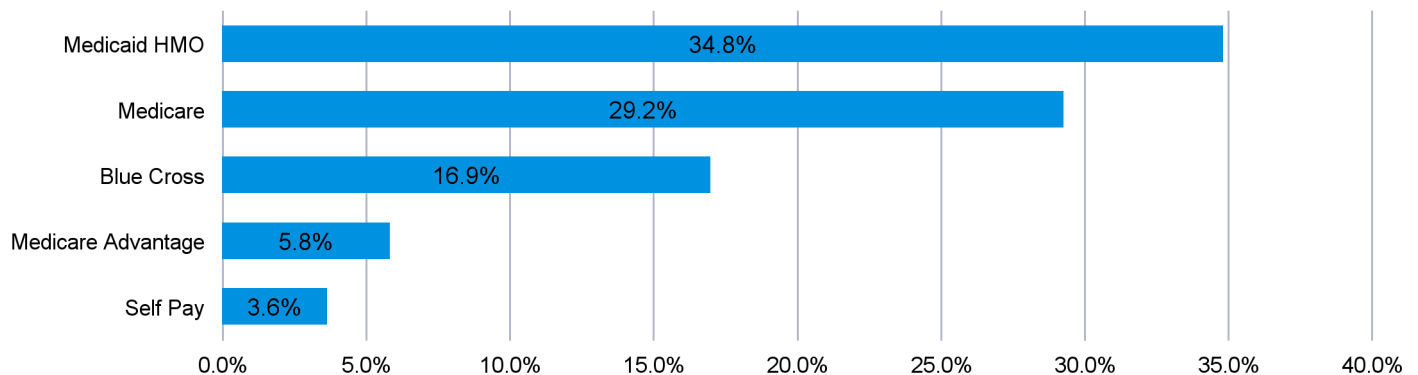
Patients by Age



Top 5 Counties



Top 5 Financial Classes



ED Scoreboard

Report Date & Time: 04/16/2025 12:46 PM

Pages: 1 of 1

Arrival Date Range: 1/1/2024 12:00:00 AM to 12/31/2024 12:00:00 AM

Current User: MAYEJHATHAWAY

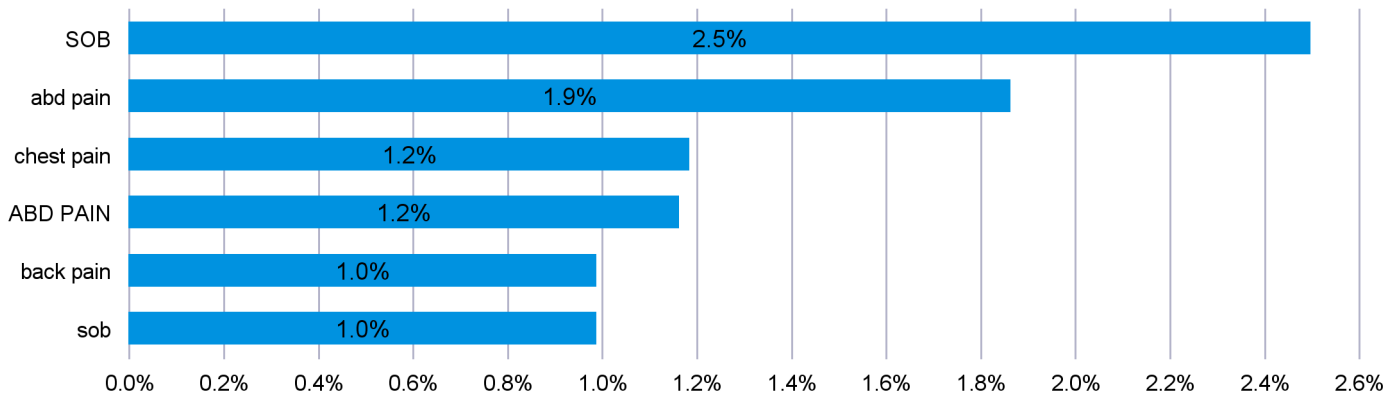
Tracking Group: MAYE ED

Visits for Period: 4,571

Overall Median LOS (min):

Overall IP Median LOS (min):

Top 5 RFV



Discharge Disposition -ED Specific	Count	Pct
Home or Self Care	3,778	82.7%
Discharge/Transfer - Other Type of Inst	289	6.3%
Admitted as Inpatient	209	4.6%
Home w/ Home Health Care	67	1.5%
Left Against Medical Advice	44	1.0%
Left Without Being Seen	42	0.9%
Skilled Nursing Facility	38	0.8%
Placed in Observation	35	0.8%
None Specified	21	0.5%
Expired	13	0.3%
Court/Law Enforcement	11	0.2%
Long Term Care Hospital	5	0.1%
Federal Healthcare Facility	4	0.1%
Left Without Treatment	4	0.1%
Other Type Healthcare Facility	4	0.1%
Hospice - Home	3	0.1%
Designed Disaster Care Site	2	0.0%
Psychiatric Facility/Unit	1	0.0%
Still a Patient	1	0.0%

ED Scoreboard

Report Date & Time: 04/16/2025 12:46 PM

Pages: 1 of 1

Arrival Date Range: 1/1/2024 12:00:00 AM to 12/31/2024 12:00:00 AM

Current User: MAYEJHATHAWAY

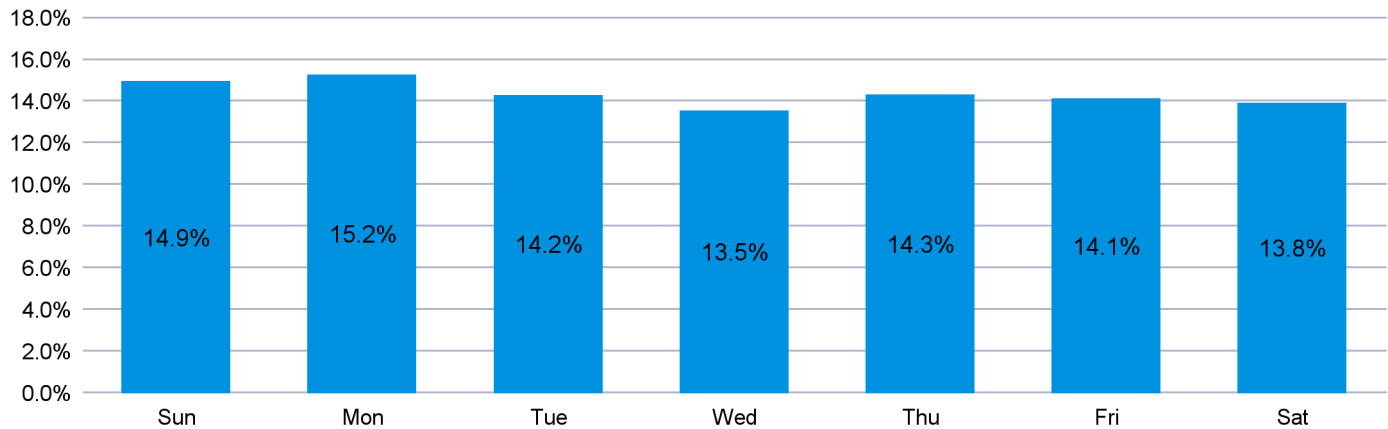
Tracking Group: MAYE ED

Overall Median LOS (min):

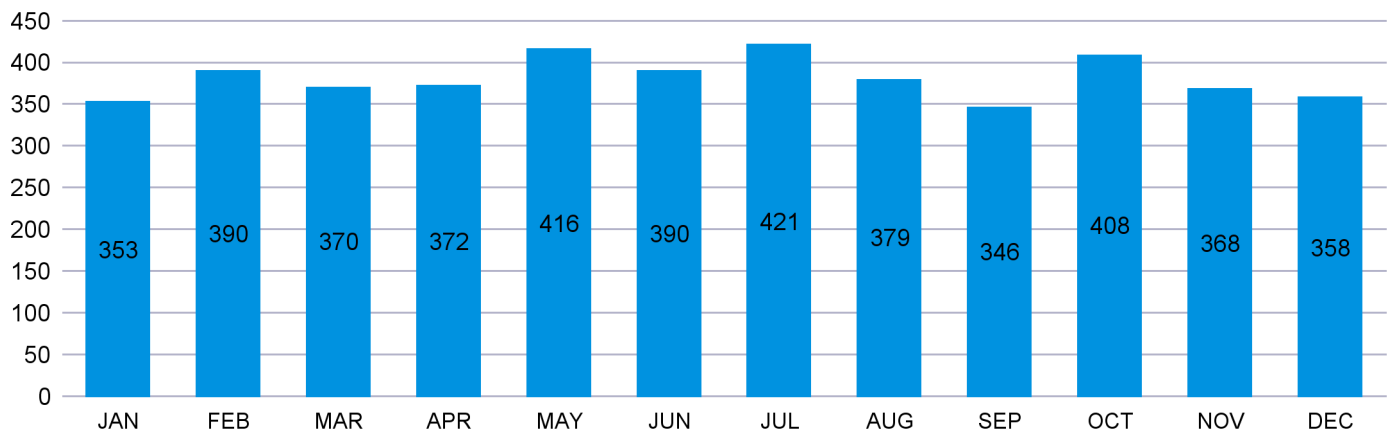
Visits for Period: 4,571

Overall IP Median LOS (min):

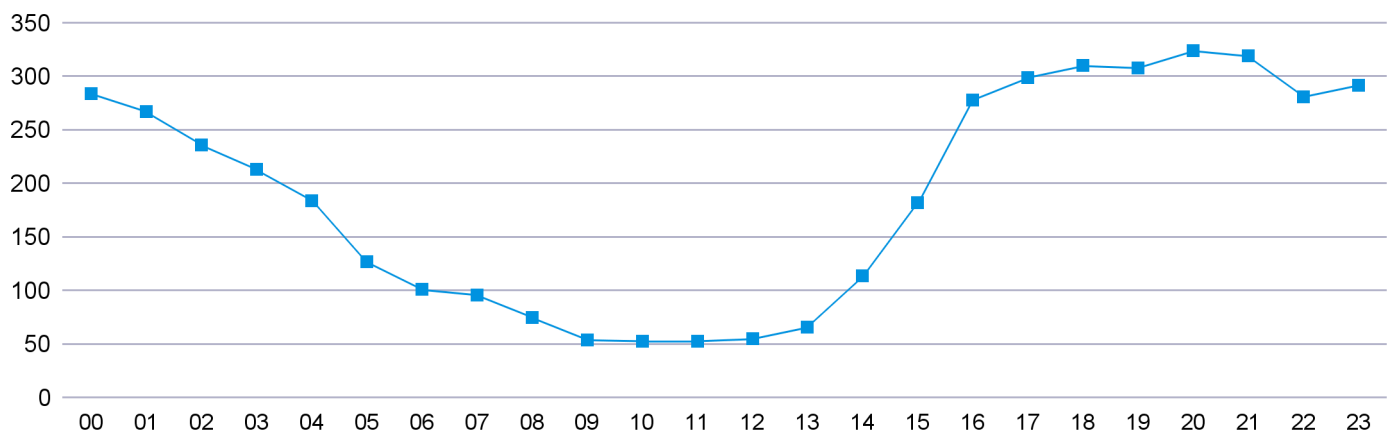
Arrivals by Day



Arrivals by Month



Arrivals by Hour



ED Scoreboard

Report Date & Time: 04/16/2025 12:46 PM

Pages: 1 of 1

Arrival Date Range: 1/1/2024 12:00:00 AM to 12/31/2024 12:00:00 AM

Current User: MAYEJHATHAWAY

Tracking Group: MAYE ED
Visits for Period: 4,571

Overall Median LOS (min):
Overall IP Median LOS (min):

Patients by Acuity

Acuity Level	Arrive-Triage	Triage-Exam	Arrive-Depart
Total:			

ED Scoreboard

Report Date & Time: 04/16/2025 12:46 PM

Pages: 1 of 1

Arrival Date Range: 1/1/2024 12:00:00 AM to 12/31/2024 12:00:00 AM

Current User: MAYEJHATHAWAY

Tracking Group: MAYE ED

Overall Median LOS (min):

Visits for Period: 4,571

Overall IP Median LOS (min):

Physician / Day	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Total
Delaney, Ashley DO	13	0	0	0	0	44	51	108
Dykes, William MD	22	29	287	258	69	24	41	730
Edholm, Thomas W MD	195	53	8	7	24	92	207	586
Leach, Richard MD	208	290	130	59	51	45	59	842
None Specified	10	11	17	12	14	16	6	86
Saborido, Tommy MD	0	19	7	0	0	0	0	26
Schulack, Nicholas DO	15	34	23	7	9	9	3	100
Watson, Thomas MD	100	70	50	161	192	66	64	703
Winter, George D NP	118	189	128	113	293	347	202	1390
Total	681	695	650	617	652	643	633	4571

ED Scoreboard

Report Date & Time: 04/16/2025 12:46 PM

Pages: 1 of 1

Arrival Date Range: 1/1/2024 12:00:00 AM to 12/31/2024 12:00:00 AM

Current User: MAYEJHATHAWAY

Tracking Group: MAYE ED

Visits for Period: 4,571

Overall Median LOS:

Overall IP Median LOS:

Physician / Day	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Total
Bernier, Bridget	16	13	7	9	11	3	3	62
Blair, Dana RN	3	4	14	8	9	14	13	65
Braden, Tanner RN	0	2	0	4	7	0	5	18
Consiglio, Lillian	5	29	29	22	13	9	0	107
Cureton, Alexis	43	60	34	49	32	20	56	294
Denniston, Ryan RN	7	6	11	0	12	14	10	60
Drenon, Cathy	84	65	80	41	32	86	62	450
Gibson, Christina	77	160	158	116	29	14	16	570
Horton, Rodney A	64	46	64	39	63	60	48	384
Hoyos, Julia RN	18	18	15	7	6	8	12	84
Kew, Andrea N	63	26	7	22	78	119	107	422
Lee, Michael	3	4	4	11	10	9	7	48
Leneave, Kelly	3	9	5	6	14	0	7	44
Light, Camille	51	29	29	36	49	20	33	247
Marks, Jeanette	13	17	11	6	13	11	10	81
McGowan, Mikii RN	82	21	13	26	74	89	100	405
None Specified	10	11	16	19	12	27	10	105
Padilla, Moriah	0	0	0	0	0	3	0	3
Rice, Bryan A	94	69	65	82	93	96	104	603
Robb, Jennie	10	10	11	11	11	0	0	53
Roca, Jed-Ian	7	0	0	2	7	9	6	31
Sawyer, Linda	9	22	17	14	7	4	10	83
Wellemeyer, LuAnn	11	58	51	64	44	8	1	237
West, Sara	3	7	5	0	3	1	1	20
Wilson, Jon	5	9	4	23	23	19	12	95
Total	681	695	650	617	652	643	633	4571