



**Mayers Memorial Hospital District**

**Chief Executive Officer, Interim**  
Louis Ward, MHA

**Board of Directors**

Abe Hathaway, President  
Michael D. Kerns, Vice President  
Allen Albaugh, Treasurer  
Beatriz Vasquez, PhD, Secretary  
Art Whitney, Director

BOARD of DIRECTORS  
MEETING AGENDA  
October 28, 2015 1:00 PM  
Board Room (Burney)

*Mission Statement*

*Mayers Memorial Hospital District serves the Intermountain area providing outstanding patient-centered healthcare to improve quality of life through dedicated, compassionate staff and innovative technology.*

1	<b>CALL MEETING TO ORDER – Abe Hathaway, President</b>	
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 for the members of the Board of Directors to review, please provide a minimum of nine 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. <b>Comments should be limited to matters within the jurisdiction of the Board.</b> Pursuant to the Brown Act (Govt. Code section 54950 et seq.) <b>action or Board discussion cannot be taken</b> 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>Quarterly Hospice Report.....</b> <b>Mary Ranquist, Hospice Manager</b>	Information
4	<b>APPROVAL OF MINUTES:</b> 4.1 Regular Meeting – September 23, 2015 and Special Meeting, October 12, 2015( <b>ATTACHMENT A</b> ) .....	<b>ACTION ITEM</b>
5	<b>OPERATIONS</b> ▶ Chief's Reports (CEO, CNO, CCO, IHF CEO) ( <b>ATTACHMENT B</b> ) <b>WRITTEN REPORT PROVIDED – ADDITIONAL COMMENTS AS NEED VERBALLY</b>	Information
6	<b>BOARD COMMITTEES:</b>  <b>6.1 Finance Committee – Chair Allen Albaugh</b> 6.1.1 Committee Meeting Report 6.1.2 September 2015 Financial review, AP, AR and acceptance of financials ..... <b>(Dispersed Separately)</b> <b>6.2 Strategic Planning Committee – Chair Abe Hathaway</b> 6.2.1 Committee Meeting Report .....	Information <b>ACTION ITEM</b>
	<b>6.3 Quality Committee – Chair Mike Kerns</b> 6.3.1 Committee Meeting Report..... 6.3.2 MERP Plan Update/Survey..... 6.3.3 Policy & Procedure Quarterly Approval ( <b>Attachment C</b> )..... 6.3.4 Policies & Procedures (New Policies for Board Approval) ( <b>Attachment D</b> )..... ✓ TDAP Vaccination Declination Form ✓ Anesthesia Procedure/Block Record	Information Information <b>ACTION ITEM</b> <b>ACTION ITEM</b>

	<ul style="list-style-type: none"> <li>✓ General Documentation Guidelines, PT</li> <li>✓ Department Meetings, HIM</li> <li>✓ Hours of Operation/Accessibility of Medical Records</li> <li>✓ Introduction to the Health Record System</li> <li>✓ Mission Statement, HIM</li> <li>✓ MMR Vaccination Declination Form</li> <li>✓ Newborn Automatic Number Assignment</li> </ul>	
6	<p><b>OLD BUSINESS</b></p> <p><b>6.1 Annual Board Bylaw Review – Second Reading..... (Attached as PDF)</b></p> <p><b>6.2 Annual Board Assessment Update.....</b></p> <p><b>6.3 Building Project.....</b></p>	<p>Discussion</p> <p>Information</p> <p>Discussion</p>
7	<p><b>NEW BUSINESS</b></p> <p><b>7.1 Med Staff Bylaw Approval (Attached as a PDF).....</b></p> <p><b>7.2 Med Staff Rules Approval (Attached as PDF).....</b></p> <p><b>7.3 Appointment of Construction Ad Hoc Committee members.....</b></p> <p><b>7.4 Approval of Board Member Travel.....</b></p> <ul style="list-style-type: none"> <li>✓ Leadership Academy – January 21-22, 2016</li> <li>✓ Legislative Days – April 4 – 5, 2016</li> <li>✓ ACHD Annual Meeting – May 3-5, 2016</li> </ul>	<p><b>ACTION ITEM</b></p> <p><b>ACTION ITEM</b></p> <p><b>ACTION ITEM</b></p> <p><b>ACTION ITEM</b></p>
8	<p><b>8.1 INFORMATION/REPORTS/BOARD EDUCATION/ANNOUNCEMENTS</b></p> <p><b>8.1.1 Legislative Update – V. Lakey (Attachment E)</b></p> <p><b>8.1.2 Calendar</b></p> <ul style="list-style-type: none"> <li>▶ Board Education – QHR Webinar 2<sup>nd</sup> Tuesdays 2015, 10 a.m.</li> <li>▶ November 2, 2015 – Board Workshop</li> <li>▶ November 9, 2015 – Board Strategic Planning Committee</li> <li>▶ November 11, 2015- JPIA Meeting</li> <li>▶ November 12, 2015 – Board Quality Committee</li> <li>▶ November 17, 2015 – Employee Appreciation Lunch – Fall River</li> <li>▶ November 17, 2015 – Blood Drive</li> <li>▶ November 19, 2015 – Employee Appreciation Lunch - Burney</li> <li>▶ <b>NO NOVEMBER BOARD MEETING</b></li> </ul>	<p>Information/ Discussion</p>
9	<p><b>ANNOUNCEMENT OF CLOSED SESSION:</b></p> <p><b>9.1 Government Code Section 54952</b></p> <p>Quality Assurance: Quality Improvement Issues, Medical Staff Report (Dr. AJ Weinhold, Chief of Staff)</p> <p>Credentialing files: Reappointments: A. J. Weinhold, MD Tikoos Blankenberg, MD William Schmunk, DDS</p> <p>New appointment - Paul Johnson, MD - Emcare physician. Jose Barrios, MD</p>	<p><b>ACTION ITEMS</b></p>

	<b>9.2 Government Code Section 54957: Personnel – Public Employee Performance Evaluation – Review</b>	
10	<b>RECONVENE OPEN SESSION: REPORT ACTIONS TAKEN DURING CLOSED SESSION</b>	
11	<b>ADJOURNMENT:</b> Next Regular Meeting December 16, 2015 – Fall River Mills	

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, 43553 Highway 299 East, Fall River Mills CA 95028.

This document and other Board of Directors documents are available online at [www.mayersmemorial.com](http://www.mayersmemorial.com).

Posted/Distributed 10/22/15

Date: September 23, 2015  
Time: 1:00 P.M.  
Location: Mayers Memorial Hospital  
Fall River Mills, California

*(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:** President Hathaway called the regular meeting to order at 1:00 p.m. on the above date with the following present:

Abe Hathaway, President  
Mike Kerns, Vice President  
Beatriz Vasquez, Secretary  
Allen Albaugh, Treasurer  
Art Whitney

**Board Members Absent:** none

**Staff Present:** Louis Ward, Interim CEO; Valerie Lakey, Board Clerk; Travis Lakey, CFO; Sherry Wilson, CNO; Keith Earnest, CCO, Theresa Overton, Acute Manager, Marlene McArthur, IHF CEO

**2. CALL FOR REQUEST FROM AUDIENCE TO SPEAK TO ISSUES OR AGENDA ITEMS:**  
None

**SPECIAL PRESENTATION – Resolution 2015-6** Honoring Assemblyman Dahle for his dedication and commitment to MMHD and his work on AB1290 – Approved All (Kerns/Vasquez)

**3. APPROVAL OF MINUTES** – A motion/second and carried, the Board of Directors accepted the following minutes

**3.1 Regular Meeting – August 26, 2015 – (Kerns, Whitney)**

**4. OPERATIONS REPORT:**

***In addition to the written operations report included in the board packet, the following verbal reports and discussions are summarized below:***

- ▶ **Louis Ward, Interim CEO** – Working with HGA on building plans, we are working on needs versus wants list. There will be a Webex meeting and an on-site visit Sept. 22. We are working together well and hopeful the end result will be a great one. Currently, we are working with 2 different options. They are similar, but some unique differences. We would like to schedule a special meeting on October 12<sup>th</sup> with HGA.

Ward next made a special presentation to Travis Lakey for his work on the USDA funding. Albaugh commented that he appreciated the emailed CEO updates that Ward has been sending out.

- ▶ **Keith Earnest, CCO** – Earnest thanked Val Lakey for the fair booth organization and thanked all of the clinical staff for their involvement. In the Pharmacy, Earnest noted that we have signed with Safeway on 340B.
- ▶ **Sherry Wilson, CNO** – Wilson noted that we have received survey results. There were 23 state tags (10 were repeats) and 5 federal tags. The report was 113 pages long. POC was sent. We have also sent the Fire, Life & Safety POC. We had one level G tag. We have formed 5 committees as a part of the POC. Kerns asked for a summary of committee results at Quality. There will be a second visit; which may not be until spring.

Next Tuesday, Wilson and Mee will be meeting with Shasta College regarding the CNA program.

Shelley Lee is covering for Terry King.

Interviewed Emergency Dept nurse which will only leave one opening. We have another nurse

who will fill the spot – so we will need no registry. Met with the new manager last week and she should be here permanently mid-October.

We are getting a lot of intakes; we need to speed up process on the physician side. A hospitalist would help. Whitney suggested talking to a company by CMEC (Ron - CEO) Whitney will provide the information to Wilson.

- ▶ **Travis Lakey, CFO** – Discussed IGT – could be November before we receive funds.
- ▶ **Marlene McArthur, IHF CEO** – Reported on Foundation board meetings, handed out brochures.
  - The Foundation participated at Fair Booth. There was a donor list displayed.
  - Capital Expenditure plan will be to board soon. The list is used to match up grant criteria.
  - The Golf Tournament was successful – net \$18,612 went to fetal monitoring system and \$6204 to investment fund. Barb Spalding does a great job.
  - Capital Campaign – McArthur is drafting a letter to employees who are making contributions through their payroll. Will be doing some PR with Ward and Val Lakey.
  - No new grant projects at this time. Foundation and hospital staff will meet tomorrow regarding some of the current grant obligations.
  - Will be getting a storage container and will be rearranging. Kandie Dekker will be moving her office over to the thrift store.
  - Ellie Haydock, Tymber Wells received RN and EMT student's scholarships. McArthur will be doing a press release to announce the Violet B Hanna Scholarship for BSN student - \$15,000. 2 year commitment to MMHD.
  - Kudos to Barb for organizing the volunteer longevity luncheon which honored 4 ladies. Upcoming: Hawaii Condo and Pig raffle – one employee raffle.

## 5. BOARD COMMITTEES:

### 5.1 Finance Committee – Chair Allen Albaugh

**5.1.1 Committee Meeting** – Heard from HR and Surgery for department reports. Discussion about revenue and expense of surgery. We are down on registry. HR department has been making improvements.

**5.1.2 August 2015 Financials – (Albaugh, Whitney) – Approved All**

### 5.2 Strategic Planning Committee –Chair Abe Hathaway

**5.2.1 Committee meeting** – no meeting

### 5.3 Quality Committee – Chair Mike Kerns

**5.3.1 Committee Meeting Report** –There were presentations from Maintenance, HR, Dietary, purchasing, volunteer services, SNF survey, compliance. There was discussion about Imaging and MVHC communication (interface with PACS) – should be complete in early 2016. ICD-10 – hospital is technically ready for ICD-10. Noridian said they will be lenient within the first year. Green reported on quality. Cameras for safety in Burney. Burney safety committee has been established.

## 6. NEW BUSINESS

**6.1 Annual Board Bylaw Review** – The board directed the clerk to check on the legality of the portion removed from bylaws regarding removal of board members. Will report back at October meeting for second reading.

**6.2 Board Assessment Process** – The board directed the clerk to set up the ACHD Board Assessment process.

**6.3 November/December Board Meeting Dates** – The board chair called a special board meeting on October 12<sup>th</sup> so the board can see the final presentation from HGA and take any needed action. It

was decided to combine the November and December board meetings because of the holidays. The meeting will be scheduled for December 16<sup>th</sup> (*Albaugh, Whitney*) – **Approved All**

**6.4 Organizational Chart Updates – (Albaugh, Whitney) – Approved all**

**6.5 Emergency Department Updates** – October 4<sup>th</sup> will be going to a 12 hour shift for emergency room. Administration has been meeting with people over the last few months. Patient safety was a strong determining factor. The current structure is two 24 hour shift. (Work 16 hour – 8 hour sleep – repeat). The new schedule will help to allow MMHD to work with Burney Fire and community EMS Staff. We will be able to recruit with Burney Fire since we will have similar shifts. Financially this will reduce use of overtime. From an employee standpoint, they will know their schedule. This will also eliminate an ER nurse being alone in ER.

**7. INFORMATION/BOARD EDUCATION/ANNOUNCEMENTS**

- ▶ **ACHD Committees**
- ▶ **Board Education** – QHR Webinar 2<sup>nd</sup> Tuesdays **2015, 10 a.m.**
- ▶ **HGA Site Visits**
- ▶ **Measure D Oversight Committee Meeting – October 6 – 4:00 pm, Burney**
- ▶ **Med Staff – October 13**
- ▶ **JPIA Meeting – October 14**
- ▶ **SP Committee Meeting – October 13 – 11:00 am, Fall River**
- ▶ **Quality Committee Meeting – October 15 – 12 noon, Fall River**

**8.1 Government Code Section 54952**

Adjourned to closed session 2:51 pm

Action taken:

Quality Assurance: Quality Improvement Issues, Medical Staff Report (Dr. AJ Weinhold, Chief of Staff) (Kerns, Vasquez) – **Approved All**

- ▶ Henry Patterson, OD, Reappointment
- ▶ Rhett Wigger, CRNA - Reappointment
- ▶ Lloyd Pena, MD - New appointment

**8.2 Government Code Section 54957: Personnel – Public Employee Performance Evaluation – Review**

- ▶ No Action

**10. ADJOURNMENT:** There being no further business, at the hour of 3:26 p.m., President Hathaway declared the meeting adjourned. Next meeting October 28, 2015 – Burney

Date: October 12, 2015  
Time: 2:00 P.M.  
Location: Mayers Memorial Hospital  
Fall River Mills, California

*(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:** President Abe Hathaway called the regular meeting to order at 2:03 p.m. on the above date with the following present:

Abe Hathaway, President  
Beatriz Vasquez, Secretary  
Allen Albaugh, Treasurer

**Board Members Absent:**

Mike Kerns, Vice President  
Art Whitney, Director

**Staff Present:** Valerie Lakey, Board Clerk; Marlene McArthur, IHF CEO; Louis Ward, Interim CEO; Travis Lakey, CFO; Keith Earnest CCO; Norm Imhoff, Imaging; Theresa Overton

**2. CALL FOR REQUEST FROM AUDIENCE TO SPEAK TO ISSUES OR AGENDA ITEMS:**  
No public comments.

**3. HGA Building Option Presentation**

HGA presented a slide show. We are currently 700 sq. ft over. We do have a contingency. Staff and managers have all agreed upon proposed design. The board heard from ED, Imaging and Lab. HGA will finalize the report. A project manager will need to be hired and an RFP will have to be put out. There will be different way to go about getting the RFP out and meet the requirements of the USDA loan requirements. Hope to have a project manager by December and possibly have an RFP out. Work with foundation on the capital campaign. Marketing rendering package.

April 1, 2017 – OSHPD approval

July 1, 2017 – Begin

October 1, 2018 - Seismic Wall

July 1, 2019 – complete

Discussion about OSHPD

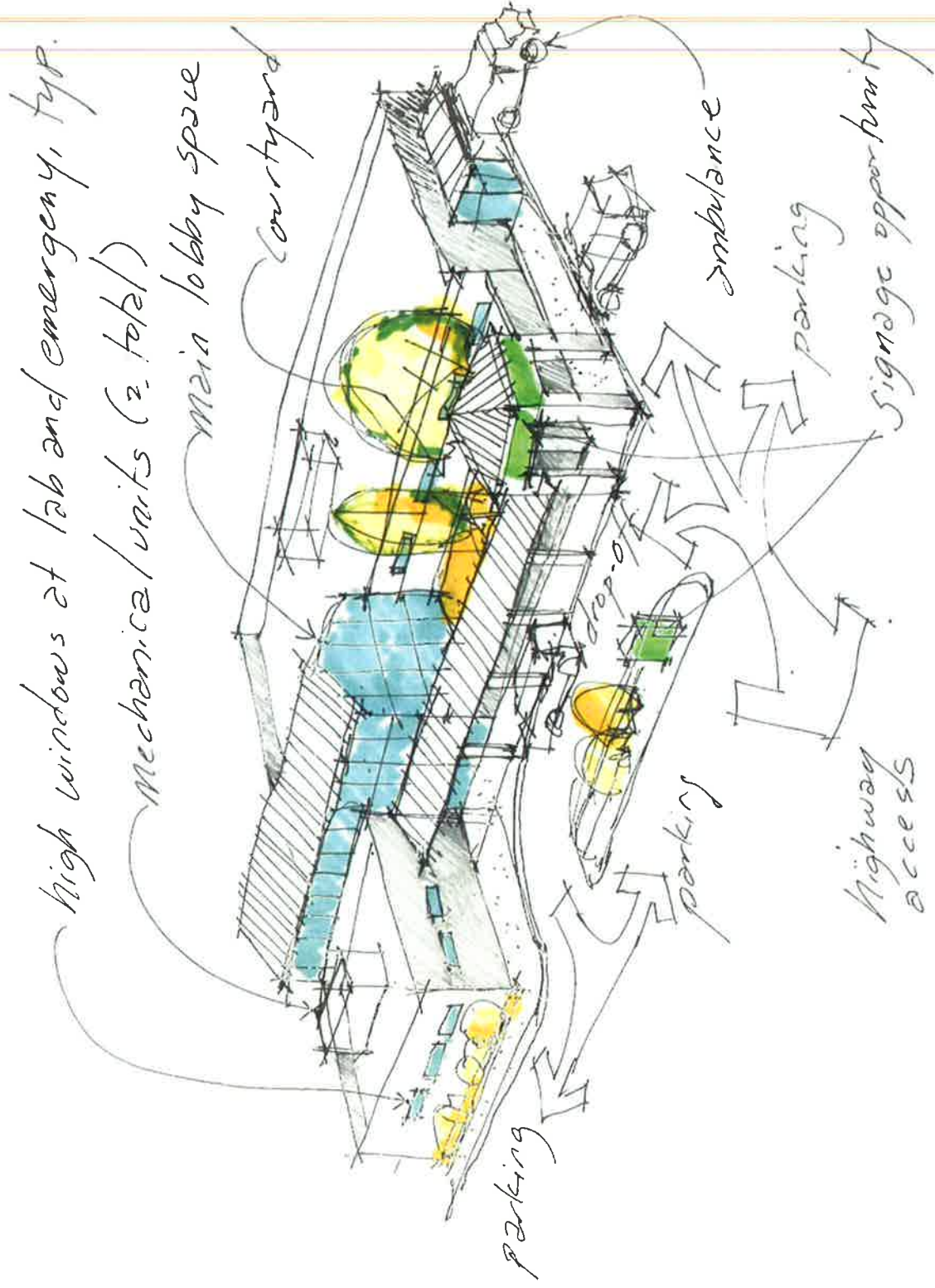
**4. STEPS TO PROCEED**

OPTION 1 C – FINALIZE WITH MINOR CHANGES **(ALBAUGH, VASQUEZ) APPROVED ALL** MOVED TO APPROVE EXPANSION OPTION 1 C WITH CHANGES MADE ON 10-12-15, STAFF IS DIRECTED TO MOVE FORWARD WITH USDA AND OSHPD. IT IS NOTED THAT THE DESIGN COST IS IN ALIGNMENT WITH USDA APPROVED LOAN AND LOAN PACKAGE CRITERIA SET FORTH BY USDA. DESIGN REFLECTS THE INTENT OF THE COMMUNITY.

**6. ADJOURNMENT:** There being no further business, President Hathaway declared the meeting adjourned. 3:49 p.m.









## Operations Report September 2015

Mayers Memorial Hospital

Statistics	September YTD FY16 <i>(current)</i>	September YTD FY15 <i>(prior)</i>	September Budget YTD FY16
Surgeries <i>(including C-sections)</i>	28	21	26
> Inpatient	12	6	3
> Outpatient	16	15	23
Procedures <i>(surgery suite)</i>	49	35	45
Inpatient	550	394	536
Emergency Room	1057	1051	990
Skilled Nursing Days	6326	6809	6666
OP Visits <i>(OP/Lab/X-ray)</i>	4101	3712	4187
Hospice Patient Days	255	220	166
PT	3190	3074	3020
Ambulance Runs	104	95	99

### **Operations District-Wide**

**Prepared by: Louis Ward, MHA, Interim Chief Executive Officer**

Over the past 6 weeks we have worked closely with many State and Federal agencies while surveyors from the respective agencies observed our processes and reviewed our policies and procedures. We have hosted survey teams at the hospital while we underwent our Federal SNF Survey, State SNF Survey, CDPH Fire Life & Safety Survey, State Board of Pharmacy Survey, Medication Error Reduction Plan (MERP) Survey, and a Radiological Survey. Overall, we did very well throughout all of the surveys but that is not to say that we can't improve and learn from the advice and requirements the survey teams left with us. It was extremely impressive to experience the heightened sense of teamwork on the part of all staff involved in the survey process. We are very proud of our hospital and our fantastic TEAM.

We have worked diligently with HGA team to develop a new hospital expansion design. The introduction of this new design was the culminating event of a multiple months of planning, tough decisions, and thorough discussion. At this point the team feels very comfortable with the design as we really feel we involved everyone we could as well as made decisions in a fair and equitable way. We look forward to continuing working as a group with HGA over the next few weeks while we work towards narrowing our timeline as well as establishing a request for qualifications (RFQ) package.

We have been working with Marlene McArthur to further develop our understanding of when we should begin the Capital Campaign. We all agree we would like to go out to the donors and the community with a clear message with clear goals. This means we are going to work closely with Marlene and those involved in the campaign over the next couple of months so we can all be confident in an early 2016 kick-off.

We have made many staffing changes in our Emergency Department; we have absorbed the duties of the Ambulance Manager into the responsibilities of our new ER Manager Donna Cova. She has extensive experience in transporting patients and managing teams, so we are very comfortable with this change. The staff is happy and ready to move forward with this change. We have hired 2 new Paramedics; this will give us 4 total Paramedics which will allow us to run Advanced Life Support (ALS) on all shifts beginning late October.

We met with Dr. Dahle and Dr. Dykes regarding the state of the ER. They were very happy with all of the changes and were very helpful with other ideas for us to consider. We stressed the importance of their support in our efforts of providing the highest quality of care as well as leave our patients feeling good about how they were treated by our staff. We also stressed there may be times that we need to council employees to ensure we are all on the same page and they should support us in these efforts as we need to show all staff that we need to operate as a team to succeed. They were very agreeable and are happy with the recent changes to the department and look forward to working with new staff members as well as work in a happy environment.

Our ER patients seem to be happy with changes that have been made also as reflected in our patient satisfaction surveys. We have changed the process of how the survey is being presented to the patient and built value in the importance of this data with the staff as we can learn how we can continue to improve. We have also introduced a new incentive program to the EMS staff; if they are named in a positive manner by a respondent to a survey we will pay them \$5. These incentives will be banked and paid with regular payroll, we hope to see our staff making an extra couple of hundred dollars a month with this program as it also means that our patients are leaving here feeling not only was their care superb but they we treated well by the staff, leaving a lasting memory that we care about them. Please see below for a few of the questions from the surveys collected in the month of September:

***How satisfied were you with the level of care shown by the nursing staff?***

Very Dissatisfied	0	0.00%
Dissatisfied	0	0.00%
Satisfied	10	14.08%
Very Satisfied	61	85.92%
Total	71	100.00%

***How satisfied were you with the level of care shown by your Doctor or Physician Assistant?***

Very Dissatisfied	0	0.00%
Dissatisfied	0	0.00%
Neither Dissatisfied or Satisfied	2	2.82%
Satisfied	9	12.68%
Very Satisfied	60	84.51%
Total	71	100.00%

***Would you recommend our Emergency Department, its doctors and staff to provide care to family and friends?***

No	0	0.00%
Yes	71	100.00%
Total	71	100.00%

I have been impressed with the data. I am hopeful that we can double the amount of monthly respondents by the end of the year.

Respectfully Submitted by,  
 Louis Ward, MHA  
 Interim CEO

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### **Chief Clinical Officer Report**

**Prepared by Keith Earnest, Pharm.D.--Chief Clinical Officer**

#### *Laboratory*

- The old analyzer will be decontaminated and removed the week of October 12.
- The new analyzer is fully functional and the interface is partially working. Chris Hall, CLS, Laboratory Manager, hopes to have the interface issues resolved soon so results do not need to be entered manually into Paragon.
- A new hire CLS is looking for housing and has a start date of mid November.

#### *Physical Therapy*

- Abbey Burnam will return from maternity leave November 9<sup>th</sup>, which will help with the work load.
- Daryl Marzan, PT manager, is looking into hosting internships for PT students (2 week, 6 week or 8 week periods) through the University of the Pacific. We are hoping this will benefit us in recruiting new therapists.
- Daryl is also reaching out to new PT graduates hoping to recruit a full time therapist.

#### *Respiratory Therapy*

- Post MERP survey, the Respiratory Therapists are dating inhalers to indicate expiration.
- Currently three patients are enrolled in pulmonary rehabilitation.
- Exploring funding options as current PFT machine approaches end of life.

#### *Pharmacy*

- The State Board of Pharmacy Sterile Compounding inspection was completed October 2<sup>nd</sup>. The plan of corrections has been submitted and accepted. The issues requiring a plan of corrections were Qualitative and Quantitative Analysis of compounded product and the Master Formula Binder.
- California Department of Public Health conducted a Medication Error Reduction Survey October 6<sup>th</sup> and 7<sup>th</sup>. Our team has already started on our plan of corrections. More details will be presented to the Quality Committee.

#### *Cardiac Rehab/Telemedicine*

- Trudi Burns, RN, manager recently completed patient surveys. The results were presented to the Quality Committee. Based on the comments she is making improvements in the areas of temperature, equipment and cleanliness.
- Mayers Cardiac Rehab program is still not being approved by Partnership. Mayers administration is working in hopes of fixing this issue.

### **Critical Access Hospital**

**Prepared by: Sherry Wilson CNO/Acute**

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- Surgery scheduling met with Dr. Syverson, Dr. Watson, Dr. Dahle, Dr. Weinhold, and MVHC staff to attempt streamlining of referral process.
- One endoscope was sent out for PM
- Continuing the search for funding an OR table ( Current table is becoming more and more unstable)
- We continue to search out ways to decrease expenses.

***Skilled Nursing***

October has been a very busy month for the Skilled Nursing staff, we have been working hard to complete and implement all of our Plans of Correction from our recent State/Federal survey. We are anticipating a second survey visit any day.

Our plans for the Alzheimer patio grant are moving along nicely and we expect work to begin within the next month. The total project came in at \$13,000; the grant was for \$6,000 which will leave the District covering about \$7,000 of the cost.

We met with Shasta College regarding the CNA program, we will be moving ahead with the intent of doing a program beginning January 2016, using our own staff as instructors.

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| <b>Manual Name</b>     | <b>Document Name</b>                                             |
|------------------------|------------------------------------------------------------------|
| Skilled Nursing        | Admission of Resident SNF                                        |
| Skilled Nursing        | Allergies                                                        |
| Anesthesia             | Anesthesia Procedure - Block Record MMH521                       |
| Acute - Med Surg       | Assessment and Reassessment of the Medical Surgical Patient      |
| Skilled Nursing        | Bladder Evaluation MMH127                                        |
| Skilled Nursing        | Bowel and Bladder Training Record MMH129                         |
| Skilled Nursing        | Bowel Evaluation MMH123                                          |
| CAH                    | Clinical Records - CAH                                           |
| Hospice                | Competency Assessment - Hospice                                  |
| HIM                    | Department Meetings - HIM                                        |
| Emergency Department   | Emergency Room Record MMH203                                     |
| Quality                | Fair Credit Reporting Act Policy                                 |
| Physical Therapy       | General Documentation Guidelines - PT                            |
| Pharmacy               | Geriatric Depression Scale MMH337                                |
| HIM                    | Hours of Operation-Accessibility of Medical Records              |
| Infection Control      | Infection Control Procedures for Pandemic Influenza              |
| Infection Control      | Influenza Immunization - SNF                                     |
| Skilled Nursing        | Informed Consents - Psycotropics                                 |
| HIM                    | Introduction to the Health Record System                         |
| Environmental Services | Keys to Dept & Facility                                          |
| Skilled Nursing        | MEDICATION RISK REVIEW MMH141                                    |
| HIM                    | Mission Statement - HIM                                          |
| Infection Control      | MMR Vaccination Declination Form MMH380 - Employee               |
| Skilled Nursing        | Neuro Check Sheet MMH154                                         |
| HIM                    | Newborn Automatic Number Assignment (NANA) MMH419                |
| Skilled Nursing        | Nurse Staffing, CMS, Daily                                       |
| Skilled Nursing        | NURSES RECORD ADMISSION ASSESSMENT MMH137                        |
| Skilled Nursing        | Nurses weekly update MMH133                                      |
| Surgery                | Patient Injury Due to Equipment                                  |
| Skilled Nursing        | Patient Prioritization Guidelines                                |
| Skilled Nursing        | Permission to use Restraints Supports in SNF MMH202              |
| Preprinted Orders      | Physician Orders - Preoperative and Postoperative Colonoscopy MM |
| Skilled Nursing        | Recertification SNF                                              |
| Skilled Nursing        | Respiratory Care and Treatment Cart, Emergency - SNF             |
| Skilled Nursing        | Restraints                                                       |
| Skilled Nursing        | Skin Breakdown, Prevention of                                    |
| Skilled Nursing        | Skin Evaluation and Risk Assessment Sheet MMH128                 |
| Employee               | Smoking                                                          |
| Infection Control      | TDAP Vaccine Declination Form MMH545                             |
| Skilled Nursing        | Theft and Loss of Personal Effects                               |
| Skilled Nursing        | Transfer and Discharge of Residents                              |
| Infection Control      | Varicella Vaccination Consent Form MMH381                        |
| Infection Control      | Varicella Vaccination Declination Form MMH376                    |

# HEALTHCARE ASSOCIATED INFECTIONS PROGRAM

## TDAP VACCINE Written Declination Form MAYERS MEMORIAL HOSPITAL

### I DO NOT WANT THE TDAP VACCINE.

I acknowledge that I am aware of the following facts:

- **TETANUS** causes painful muscle spasms, usually all over the body. Tightening of the jaw muscles can cause inability to open your mouth or swallow.
- **DIPHTHERIA** causes a thick covering in the back of the throat which can lead to breathing problems, paralysis, heart failure, and even death.
- **PERTUSSIS** (Whooping Cough) causes severe coughing spells, vomiting, and disturbed sleep. It can lead to weight loss, incontinence, rib fractures and passing out from violent coughing.
- Pertussis is on the rise in California and has been attributed to several infant deaths.
- I understand that pertussis can be spread from person to person through the air, and tetanus enters the body through cuts, scratches, or wounds.
- TDAP was licensed in 2005. It is the first vaccine for adolescents and adults that protects against all 3 diseases.

**Knowing these facts, I choose to decline vaccination at this time.** I may change my mind and accept vaccination later, if vaccine is available. I have read and fully understand the information on this declination form.

I **decline vaccination** for the following reason(s). Please check all that apply.

- I have been ill and want to wait until I have fully recovered before getting the vaccine.
- I do not like needles.
- My philosophical or religious beliefs prohibit vaccination.
- I have an allergy or medical contraindication to receiving the vaccine.
- I do not wish to say why I decline.
- Other reason – please tell us. \_\_\_\_\_

Print Name \_\_\_\_\_

Department \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

# MAYERS MEMORIAL HOSPITAL DISTRICT

| Anesthesia Procedure Billing Codes:                    |                                |                                 | Indication for Procedure(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Procedure # 2: Left/Right (circle)                                                                                                                                                                                                                                                                                       |
|--------------------------------------------------------|--------------------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                        | <b>Single</b>                  | <b>Catheter</b>                 | This procedure was performed at the request of the referring physician for postoperative pain control.<br><br>Scheduled Surgery: _____<br><br>Procedure Start Time: ____:____(hh:mm)<br><br>Procedure End Time: ____:____(hh:mm)<br>H&P/Consent/Site Verified. Risks discussed. Patient positioned, ASA monitors, O <sub>2</sub> via NC/FM. Sterile skin prep and technique.<br><br>Timeout Performed ____:____(hh:mm)<br><br><input type="checkbox"/> Correct Patient <input type="checkbox"/> Correct Procedure<br><input type="checkbox"/> Correct Site <input type="checkbox"/> Correct Position<br><input type="checkbox"/> Correct Equipment | Needle: ____gauge <input type="checkbox"/> Stim <input type="checkbox"/> Non-Stim<br>Technique: <input type="checkbox"/> Nerve Stimulation<br><input type="checkbox"/> Ultrasound-guided<br><input type="checkbox"/> Loss of resistance<br>Motor response lost at: _____ mA                                              |
| <input type="checkbox"/> Interscalene                  | <input type="checkbox"/> 64415 | <input type="checkbox"/> 64416  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Catheter Placement: _____<br>Depth at Skin: _____ cm                                                                                                                                                                                                                                                                     |
| <input type="checkbox"/> Axillary                      | <input type="checkbox"/> 64417 |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                          |
| <input type="checkbox"/> Femoral                       | <input type="checkbox"/> 64447 | <input type="checkbox"/> 64448  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Injectate: <input type="checkbox"/> Bupivacaine <input type="checkbox"/> Lidocaine<br><input type="checkbox"/> Ropivacaine<br>Site: _____ Conc (%): _____<br>Vol (ml): _____ <input type="checkbox"/> Epinephrine                                                                                                        |
| <input type="checkbox"/> Popliteal                     | <input type="checkbox"/> 64445 | <input type="checkbox"/> 64446  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                          |
| <input type="checkbox"/> Ankle/Wrist                   | <input type="checkbox"/> 64450 |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Continuous Infusion (ml/hr) _____<br><input type="checkbox"/> _____(mcg) (med) _____<br><input type="checkbox"/> _____(%) (med) _____                                                                                                                                                                                    |
| <input type="checkbox"/> Epid Lumbar (non-obstetric)   | <input type="checkbox"/> 62311 | <input type="checkbox"/> 62319  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                          |
| <input type="checkbox"/> Epid Thoracic (non-obstetric) | <input type="checkbox"/> 62310 | <input type="checkbox"/> 62318  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Procedure Complications</b><br><br><b>Action Taken</b><br>Pain on injection: <input type="checkbox"/> no <input type="checkbox"/> yes _____<br>Supplement: <input type="checkbox"/> no <input type="checkbox"/> yes _____<br>Blood Aspiration: <input type="checkbox"/> no <input type="checkbox"/> yes _____         |
| <input type="checkbox"/> Epid Lumbar (obstetric)       |                                | <input type="checkbox"/> 01967  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                          |
| <input type="checkbox"/> Epid Blood Patch              | <input type="checkbox"/> 62273 |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Procedure # 1: Left/Right (circle)</b><br>Needle: ____gauge <input type="checkbox"/> Stim <input type="checkbox"/> Non-Stim<br>Technique: <input type="checkbox"/> Nerve Stimulation<br><input type="checkbox"/> Ultrasound-guided<br><input type="checkbox"/> Loss of resistance<br>Motor response lost at: _____ mA |
| <input type="checkbox"/> Ultrasound                    | <input type="checkbox"/> 76942 | <input type="checkbox"/> 76942  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                          |
| <input type="checkbox"/> Other _____                   |                                |                                 | Catheter Placement: _____<br>Depth at Skin: _____ cm                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                          |
| <b>Pain Diagnosis Codes:</b>                           |                                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                          |
|                                                        |                                | <b>Code</b>                     | Injectate: <input type="checkbox"/> Bupivacaine <input type="checkbox"/> Lidocaine<br><input type="checkbox"/> Ropivacaine<br>Site: _____ Conc (%): _____<br>Vol (ml): _____ <input type="checkbox"/> Epinephrine<br><br>Continuous Infusion (ml/hr) _____<br><input type="checkbox"/> _____(mcg) (med) _____<br><input type="checkbox"/> _____(%) (med) _____                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                          |
| Shoulder                                               |                                | <input type="checkbox"/> 719.41 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                          |
| Arm/Upper Elbow                                        |                                | <input type="checkbox"/> 719.42 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                          |
| Forearm/Wrist                                          |                                | <input type="checkbox"/> 719.43 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                          |
| Hand                                                   |                                | <input type="checkbox"/> 719.44 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                          |
| Hip/Thigh                                              |                                | <input type="checkbox"/> 719.45 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                          |
| Knee/Leg                                               |                                | <input type="checkbox"/> 719.46 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                          |
| Foot/Ankle                                             |                                | <input type="checkbox"/> 719.47 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                          |
| Other: _____                                           |                                | <input type="checkbox"/> 719.40 | <b>Ultrasound Guided Procedure</b><br><br><input type="checkbox"/> Relevant anatomy identified (nerves, vessels, muscles)<br><input type="checkbox"/> Local anesthetic spread visualized around nerve(s)<br><input type="checkbox"/> Vascular puncture avoided<br><br>Ultrasound-guided catheter placed:<br><input type="checkbox"/> yes <input type="checkbox"/> no                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                          |
| <b>Procedure Notes</b>                                 |                                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                          |
|                                                        |                                |                                 | <b>Vital Signs</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                          |
|                                                        |                                |                                 | <b>Time:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                          |
|                                                        |                                |                                 | <b>BP:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                          |
|                                                        |                                |                                 | <b>HR:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                          |
|                                                        |                                |                                 | <b>SaO<sub>2</sub>:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                          |
|                                                        |                                |                                 | <b>RR:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                          |
|                                                        |                                |                                 | <b>ECG:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                          |
|                                                        |                                |                                 | <b>Temp:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                          |
|                                                        |                                |                                 | <b>Meds:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                          |
|                                                        |                                |                                 | <b>Versed:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                          |
|                                                        |                                |                                 | <b>Fentanyl:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                          |
|                                                        |                                |                                 | <b>Other:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                          |
| <b>Referring Physician:</b> _____                      |                                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                          |
| <b>Provider's Name:</b> _____                          |                                |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                          |
| Printed Name                                           | Signature                      | Date                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                          |



**MAYERS MEMORIAL HOSPITAL DISTRICT**

**POLICY AND PROCEDURE**

**GENERAL DOCUMENTATION GUIDELINES, PT**

Page 1 of 1

**DEFINITION:**

For all intents and purposes, the word “patient(s)” refers to all customers receiving health care services in our facilities, including inpatients, outpatients, residents and clients.

**POLICY:**

The purpose of this policy is to establish general rules of documentation to be employed by all Physical Therapy staff members when recording in the medical record.

**PROCEDURE:**

- All medical record entries will be completed in the electronic medical record.
- Only approved abbreviations will be used in the medical record.
- All chart entries will be clearly and concisely recorded, omitting any information that is not pertinent to plan.
- Special considerations or precautions for a patient's safety (e.g., code orders, weight bearing status) will be recorded on the initial evaluation and on the daily notes.
- All chart entries will be co-signed and dated by the supervising therapist when appropriate.
- Appropriate terminology, spelling, and punctuation will be utilized by all staff.
- Only approved forms will be used for medical chart entries.
- All chart entries will be legible.
- No medical chart entries will be removed from the hospital.
- All signatures will contain the title (initials) of the caregiver, i.e., PT Aide, PTA, PT, MPT or DPT.

**REFERENCES:**

Fairchild Medical Center, Yreka, CA. Rehabilitation Department Policy: 7770.727 5/2008

**MAYERS MEMORIAL HOSPITAL DISTRICT**

**POLICY AND PROCEDURE**

**DEPARTMENT MEETINGS**

**HIM**

Page 1 of 1

**POLICY:**

1. The Health Information Management Department personnel of Mayers Memorial Hospital District gather on a monthly basis. The director calls this meeting as the schedule allows. All discussion is based on pertinent information brought forth in the department manager's meeting and other topics or concerns a staff member would care to discuss.
2. This meeting may be called at any time by any Health Information Management department staff member in order to share thoughts of improvement, or concern, regarding the department, hospital and/or patient care.

# MAYERS MEMORIAL HOSPITAL DISTRICT

## POLICY AND PROCEDURE

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### HOURS OF OPERATION/ACCESSIBILITY OF MEDICAL RECORDS

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Page 1 of 1

#### **POLICY:**

The Health Information Management Department hours are five days a week, except holidays, from 0700 until 1530. Between the hours of 1530 and 0700, the Nursing Supervisor will provide medical record support services. After regular business hours or when staff is not present, the Health Information Management Department will remain locked. Should an individual need to gain access to the department after hours, he/she must contact the Nursing Supervisor for assistance.

#### **PROCEDURE:**

- During the hours of 0700 to 1530, the Health Information Management Department is open for business with medical records accessible by department staff. The Health Information Management Department cooperates with the public, physicians and other hospital staff.
- Public Access is routed through Admitting.
- From the hours of 1530 to 0700 appropriate requests may be made to the Nursing Supervisor.

# MAYERS MEMORIAL HOSPITAL DISTRICT

## POLICY AND PROCEDURE

### INTRODUCTION TO THE HEALTH RECORD SYSTEM

Page 1 of 2

#### Ownership of the Health Record

The health record is the property of the facility. It is not to be removed from the premises except under a subpoena or court order.

#### Definition of Health Record

The health record is chronological, documented evidence of the patient's initial database, initial evaluation; identified problems and needs; objectives of care; prescribed treatments and end results. The health record will reflect the high quality of care rendered in this facility. Upon completion, the health record must consist of "sufficient data written in a sequence of events to justify the diagnosis and warrant the treatment and end results."

#### Definition of Health Record Services

The health information management service is a well-organized department in the facility set-up to maintain the health records. Under the direction of facility administration, a full-time employee of the facility is assigned overall responsibility.

#### Purpose of the Health Record

A health record will be maintained for every patient admitted to the facility.

1. The health record is a measurement of care being rendered in the facility. It is utilized to plan, communicate and evaluate the quality of care being given to each patient.
2. The health record is "proof of work done." It contains documentation to meet federal, state, Joint Commission on Accreditation of Hospital standards and regulations and those for reimbursement and third party payer requirements.
3. The health record is maintained for medicolegal protection for the patient, facility, staff and physician.
4. The health record is used for research, compiling statistics, and medical care evaluation studies.

#### Purpose of Health Information Management Department

The health information management service will have sufficient staff, facilities, and equipment to assist in providing health records that are complete, accurately documented, readily accessible and systematically organized to facilitate retrieving and compiling information; meet regulatory agency and third party payor requirements.

The health information management department is staffed by a Health Record Designee Monday through Friday. A Health Record Consultant will visit and make a written report as outlined in the Health Record Consultant Contract, if such contract exists. The Health Record/Facility contract is filed in the Administrator's office.

#### Health Record Standard Practices

1. All entries in the health record will be recorded promptly at the time of occurrence. Entries will include the date (month, day, year) and time.
2. All entries will be complete, concise, descriptive, and accurate.
3. Signatures will include the first initial, last name, and title or signed electronically
4. All entries will be written in black ink and/or electronic.
5. Entries will be made by person(s) making the observation and/or administering the services.
6. Entries will be made in chronological order and similar forms will be filed chronologically.
7. A standardized electronic filing order for inpatient and discharged health record forms will be maintained.

#### Facilities and Equipment

The health information management department is located at the west end of the facility. There is sufficient room and filing space for the current and some discharged health records. The filing space is fire-resistant. Additional filing space is located above the ambulance garage and the shed. Administration will provide appropriate and adequate equipment needed to provide efficient processing of health records.

# **MAYERS MEMORIAL HOSPITAL DISTRICT**

## **POLICY AND PROCEDURE**

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### **MISSION STATEMENT - HIM**

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Page 1 of 1

#### **POLICY:**

The Health Information Department recognizes the vital role of information in all aspects of today's society, and especially in the healthcare professions. To that end, we are committed to providing the highest quality of service to our patients, physicians, staff and other healthcare information users by ensuring the accurate, dependable and secure collection, maintenance, and appropriate dissemination of information. As professionals, we are dedicated to unfailing reliability in meeting each request and duty asked of us. We empower our staff through continuous education and upgrading of our skills and thus enhance the quality of our communication, participation and interaction with physicians and others in meeting the health information needs of Mayers Memorial Hospital District and the communities it serves.

# HEALTHCARE ASSOCIATED INFECTIONS PROGRAM

## MMR Written Declination Form MAYERS MEMORIAL HOSPITAL

### I DO NOT WANT THE MMR VACCINE.

I acknowledge that I am aware of the following facts:

- Measles, mumps, and rubella are serious diseases.
- **MEASLES** can lead to ear infections, pneumonia, seizures, brain damage, and death.
- **MUMPS** can lead to deafness, meningitis, painful swelling of the testicles or ovaries, and, rarely, death.
- **RUBELLA** causes rash, mild fever, and arthritis. If a woman gets rubella while she is pregnant, she could have a miscarriage or her baby could be born with serious defects.
- I understand that these diseases are spread from person to person through the air.
- Generally, anyone 18 years of age or older who was born after 1957 should get at least one dose of MMR vaccine, unless they can show that they have had either the vaccines or the diseases.

***Knowing these facts, I choose to decline vaccination at this time.*** I may change my mind and accept vaccination later, if vaccine is available. I have read and fully understand the information on this declination form.

I **decline vaccination** for the following reason(s). Please check all that apply.

- I have been ill and want to wait until I have fully recovered before getting the vaccine.
- I do not like needles.
- My philosophical or religious beliefs prohibit vaccination.
- I have an allergy or medical contraindication to receiving the vaccine.
- I have already received the vaccine and will supply immunization records.
- I do not wish to say why I decline.
- Other reason – please tell us. \_\_\_\_\_

Print Name \_\_\_\_\_

Department \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

APPROVALS: IC: 10-26-10 M/P&T: 1/23/14 Safety: 11-2-10 P&P:  
MMH 380 / KD

MEC:  
Permanent Part of Medical Record

Page 1 of 1

**MMR VACCINATION DECLINATION FORM - Employee**

Attached to P&P Immunization Program, Employee

**MAYERS MEMORIAL HOSPITAL DISTRICT**

NOTICE TO PARENTS: Completion of this form in the hospital will enable you to receive a valuable service from the federal government. Federal law requires that a Social Security number be provided for all dependents listed on federal tax forms. A Social Security number is also necessary when applying for welfare or other public assistance benefits for your child. By completing this form and requesting a Social Security number for your new baby, the California Department of Health Services will transmit your request to the Social Security Administration, and a card will be mailed to you within six weeks, eliminating the need for you to personally visit a Social Security office with evidence of your child's identity, birth date, and citizenship.

If you choose to participate in this program to obtain a Social Security number for your child, at least one of the parent(s) Social Security numbers must be included on your child's birth certificate. Disclosure of the parent(s) Social Security number is required by 42 USC 405©(2) as amended by Section 1090(b) of Public Law 105-34. The Social Security number(s) will be used by the Internal Revenue Service solely for the purpose of administration of tax benefits based on support or residence of a child.

For further information, please contact the Social Security Administration at (800) 772-1213. For certified copies of your child's birth certificate, please contact the health department or the recorder's office of the county where the birth occurred, or you may also obtain certified copies through the state by FAXing your request to (800) 858-5553 or visiting the web site at [www.dhs.ca.gov](http://www.dhs.ca.gov).

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**NEWBORN AUTOMATIC NUMBER ASSIGNMENT  
(NANA)**

Baby's Name as Reported on Birth Certificate:

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(A Social Security number cannot be issued for a child that has not been named)

1. Do you want a Social Security number for your new baby?      \_\_\_\_\_ Yes      \_\_\_\_\_ No
  
2. May the Social Security Administration share it with the Department of Health Services?  
\_\_\_\_\_ Yes      \_\_\_\_\_ NO

---

Mother or Father's Signature

---

Mother's Name (Please Print)

---

Medical Record Number

---

Instructions to Birth Clerks: This consent form is to be completed and signed by the newborn's mother or father. After proper coding of Box F on the birth certificate, RETAIN THIS FORM in the mother's medical records



**MAYERS MEMORIAL HOSPITAL DISTRICT**

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**MESSAGE FROM SOCIAL SECURITY**

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**INFORMATION ABOUT WHEN YOU WILL RECEIVE YOUR BABY'S SOCIAL SECURITY CARD**

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**IMPORTANT: IF YOU HAVE NOT NAMED YOUR BABY, A SOCIAL SECURITY CARD CANNOT BE ISSUED.**

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You should receive your baby's Social Security card in about 6 weeks. In your State, it takes about 5 weeks before the information about your baby's birth is provided to the Social Security Administration. After the birth is registered, Social Security is given a computer tape which we use to issue your baby a Social Security card. The card will be mailed to you in about 1 week after we are notified by the State of your baby's birth.

If you are filing for Welfare or other public assistance benefits for your baby, you will need the following information completed before you leave the hospital.

This certifies that a Social Security number was requested for

---

Name of Child

---

Signature of hospital official

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Date

---

**NOTE. Notify your caseworker when you receive your baby's Social Security card.**

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Form SSA-2853-OP2 (6/89)

## October Legislative Report

### Signed by Governor

#### **SB225**      CHA Sponsored

Gov. Brown has signed SB 225 (Wieckowski, D-Fremont), a bill sponsored by CHA to clarify and streamline requirements of the Medical Waste Management Act. The bill took effect immediately upon signature by the Governor on Sept. 28. The bill:

- Clarifies the definition of biohazard bag.
- Requires a hazardous waste transporter of medical waste to maintain a tracking document, as specified, for the purpose of tracking medical waste from the point when the waste leaves the generator facility until the waste receives final treatment.
- Requires the tracking document to be maintained only by hazardous waste transporters, and not by generators transporting waste.
- Revises the container labeling requirements for specified medical wastes from "HIGH HEAT OR INCINERATION ONLY" TO "HIGH HEAT" or "INCINERATION ONLY."

[http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill\\_id=201520160SB225](http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201520160SB225)

#### **ABX2 15**      CHA OPPOSED

Gov. Brown has signed AB X2-15, the End of Life Option Act, which allows a "qualified" adult to request and be prescribed an aid-in-dying drug if specified conditions are met.

All hospitals will have work to do to comply with the End of Life Option Act, regardless of whether they choose to allow their staff to participate in prescribing aid-in-dying drugs. CHA is preparing detailed written materials for hospitals and will schedule a webinar before the end of this year.

[http://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill\\_id=201520162AB15&search\\_keywords=End+of+Life+Option+Act](http://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201520162AB15&search_keywords=End+of+Life+Option+Act)

#### **AB304**

Amends the paid sick leave law that went into effect July 1, 2015. Would alter the requirements for the rate at which paid sick leave is paid, as well as the accrual requirements when an employer relies on an existing paid time off policy.

[http://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill\\_id=201520160AB304](http://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201520160AB304)

### Following

#### **ABX2 8**    Tobacco Use Programs    ACHD: recommend support

Extends current tobacco use prevention funding eligibility and requirements for county offices of education and school districts to include charter schools. Broadens the definition of products containing tobacco and nicotine, as specified, and prohibits their use in specified areas of

schools and school districts, regardless of funding. Requires specified signs to be prominently displayed at all entrances to school property.

This bill was introduced and heard in the Second Extraordinary Session. However it failed passage.

Other Tobacco related bills:

**ABX2 16**

[http://www.legislature.ca.gov/cgi-bin/port-postquery?bill\\_number=abx2\\_16&sess=CUR&house=B&author=bonta\\_%3Cbonta%3E](http://www.legislature.ca.gov/cgi-bin/port-postquery?bill_number=abx2_16&sess=CUR&house=B&author=bonta_%3Cbonta%3E)

**ABX2 19**

[http://www.legislature.ca.gov/cgi-bin/port-postquery?bill\\_number=abx2\\_19&sess=CUR&house=B&author=bonta\\_%3Cbonta%3E](http://www.legislature.ca.gov/cgi-bin/port-postquery?bill_number=abx2_19&sess=CUR&house=B&author=bonta_%3Cbonta%3E)

**AB 1300**

Mental Health

CHA Sponsor

ACHD Support

Makes numerous changes and specifies numerous aspects of the Lanterman-Petris-Short (LPS) involuntary detention process (known as "5150" for the Welfare and Institutions Code section in which the process is established).



# Key State Issues

Latest News on Key Bills in the State Legislature



October 2, 2015

This week, the Governor signed into law two CHA-sponsored bills – SB 225 (Wieckowski, D-Fremont) and AB 503 (Rodriguez, D-Pomona). CHA continues to focus its advocacy efforts on the Governor’s office, as hundreds of bills await final action with a deadline of October 11. Details on high-priority health care-related bills CHA is tracking this legislative session are provided below. For an online version of this report that can be filtered by topic and is updated daily, visit [www.calhospital.org/key-state-issues](http://www.calhospital.org/key-state-issues).

| Bill No.                  | Author                             | Location/Action                                                                                                                                                                                                                                                                                                             | CHA Position                                                                 | Staff Contact       |                                                               |
|---------------------------|------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|---------------------|---------------------------------------------------------------|
| <b>Care Coordination</b>  |                                    |                                                                                                                                                                                                                                                                                                                             |                                                                              |                     |                                                               |
| <b>SB 675</b>             | Liu<br>(D-La Cañada<br>Flintridge) | Would require hospitals to record the name of a family caregiver, if any; notify the caregiver upon patient discharge; and provide information and instructions on post-hospital care needs, as appropriate.                                                                                                                | Awaiting action on the Governor’s desk.                                      | Neutral, As Amended | Pat Blaisdell/<br>Barbara Glaser                              |
| <b>Community Benefits</b> |                                    |                                                                                                                                                                                                                                                                                                                             |                                                                              |                     |                                                               |
| <b>AB 1046</b>            | Dababneh<br>(D-Encino)             | Would align California’s community benefit requirements with the federal Affordable Care Act; would streamline reporting mandates and provide greater transparency and consistency in the reporting and disclosure of investments made by nonprofit hospitals to strengthen the health and well-being of their communities. | Two-year bill.                                                               | Sponsor             | Amber Kemp/<br>Kathryn Scott                                  |
| <b>SB 346</b>             | Wieckowski<br>(D-Fremont)          | Would rewrite California’s existing community benefit law to expand community benefit requirements to nonprofit multispecialty clinics; would limit charity care to a multiplier of Medicare reimbursement and exclude the unreimbursed cost to hospitals for providing services to Medi-Cal patients.                      | Failed passage in Senate Health Committee April 29. Reconsideration granted. | Oppose              | Amber Kemp/<br>Kathryn Scott                                  |
| <b>Emergency Services</b> |                                    |                                                                                                                                                                                                                                                                                                                             |                                                                              |                     |                                                               |
| <b>AB 172</b>             | Rodriguez<br>(D-Pomona)            | Would make an assault committed against a physician, nurse or other health care worker of a hospital or county jail, who is engaged in providing services within the emergency department, punishable by imprisonment in a county jail not exceeding one year, a fine not exceeding \$2,000, or both.                       | Awaiting action on the Governor’s desk.                                      | Support             | Gail Blanchard-<br>Saiger/<br>BJ Bartleson/<br>Connie Delgado |
| <b>AB 503</b>             | Rodriguez<br>(D-Pomona)            | Would permit hospitals to release patient-identifiable medical information to pre-hospital emergency medical services providers, to the California Emergency Medical Services Authority and to local emergency medical services agencies for quality assessment and improvement purposes.                                   | Signed by the Governor September 30 (Chapter 362).                           | Sponsor             | BJ Bartleson/<br>Connie Delgado                               |
| <b>AB 579</b>             | Obemolte<br>(R-Big Bear<br>Lake)   | Would create an exception to permit a general acute care hospital to operate an emergency department if all applicable licensure and building code requirements are satisfied.                                                                                                                                              | Two-year bill.                                                               | Sponsor             | BJ Bartleson/<br>Connie Delgado                               |

# California Hospital Association Key State Issues

| Bill No.                              | Author                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Location/Action                                                                | CHA Position        | Staff Contact                                  |
|---------------------------------------|---------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|---------------------|------------------------------------------------|
| <b>Emergency Services (continued)</b> |                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                |                     |                                                |
| <b>AB 658</b>                         | Wilk<br>(R-Santa Clarita) | Existing law establishes a default payment rate to be paid by local law enforcement to hospitals for noncontracted emergency health care services. Under AB 658, hospitals would have the option to use either the OSHPD cost-to-charge ratio or a current approved cost-to-charge ratio from the Medicare program for noncontracted emergency services, to calculate the rate to be paid by law enforcement agencies.                                                                                        | Signed by the Governor July 16 (Chapter 119).                                  | Sponsor             | Amber Ott/<br>Barbara Glaser                   |
| <b>End-of-Life/Palliative Care</b>    |                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                |                     |                                                |
| <b>ABX2 15</b>                        | Eggman<br>(D-Stockton)    | Introduced August 17, this special session bill enacts the End of Life Option Act authorizing an adult who meets certain qualifications, and who has been determined by their attending physician to be suffering from a terminal disease, to make a request for medication for the purpose of ending their own life. ABX2 15 is substantially the same as SB 128 (Wolk, D-Davis).                                                                                                                            | Awaiting action on the Governor's desk.                                        | Oppose              | Jackie Garman/<br>Barbara Glaser               |
| <b>SB 128</b>                         | Wolk<br>(D-Davis)         | Would enact the End of Life Option Act authorizing adults who meet certain qualifications, and who have been determined by their attending physician to be suffering from a terminal illness, to make a request for medication for the purpose of ending their own life. Would provide that such a death would have no effect on a will, health care service plan or health insurance contract, and would provide civil and criminal immunity.                                                                | To be heard in Assembly Health Committee.                                      | Oppose              | Jackie Garman/<br>Barbara Glaser               |
| <b>Health Coverage</b>                |                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                |                     |                                                |
| <b>AB 533</b>                         | Bonta<br>(D-Alameda)      | Attempts to address "surprise billing" by out-of-network providers. The introduced version of the bill contained ambiguities that could have been interpreted to impose obligations on network hospitals to provide information they do not have and/or cannot obtain for noncontracted physicians. Amended April 15 for clarification, the bill would apply only to noncontracting individual health professionals, not to hospitals.                                                                        | Two-year bill.                                                                 | Neutral, As Amended | Dietmar<br>Grellmann/<br>Tanya Robinson-Taylor |
| <b>AB 1027</b>                        | Gatto<br>(D-Glendale)     | Would require a health plan, at the consumer's request, to provide information on the contracted rate between the plan and a provider or supplier for a procedure or course of treatment.                                                                                                                                                                                                                                                                                                                     | Two-year bill.                                                                 | Oppose              | Dietmar<br>Grellmann/<br>Tanya Robinson-Taylor |
| <b>AB 1086</b>                        | Dababneh<br>(D-Encino)    | Would require health plans to honor a patient's assignment of benefits from a health plan to a physician if the patient is provided with a disclosure that the patient may be responsible for additional out-of-network costs.                                                                                                                                                                                                                                                                                | Failed passage in Assembly Health Committee April 28. Reconsideration granted. | Follow, Hot         | Dietmar<br>Grellmann/<br>Tanya Robinson-Taylor |
| <b>SB 137</b>                         | Hernandez<br>(D-Azusa)    | Would require health plans to maintain accurate online and paper provider directories. Plans are required to notify contracted providers annually about information that will be included in the directory, and the provider must confirm its accuracy or provide updated information. If the provider does not respond and specified efforts to contact the provider have failed, a one month claim payment delay may be imposed. The delayed payment must be made within three days of a provider response. | Awaiting action on the Governor's desk.                                        | Neutral             | Dietmar<br>Grellmann/<br>Tanya Robinson-Taylor |
| <b>SB 546</b>                         | Leno<br>(D-San Francisco) | Would require health plans and insurers in the large group market to submit rate filings to regulators. Would also require public disclosure of rate increases and supporting cost data.                                                                                                                                                                                                                                                                                                                      | Awaiting action on the Governor's desk.                                        | Follow              | Dietmar<br>Grellmann/<br>Tanya Robinson-Taylor |

# California Hospital Association Key State Issues

| Bill No.                 | Author                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Location/Action                                                | CHA Position | Staff Contact                               |
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| <b>Health Facilities</b> |                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                |              |                                             |
| <b>AB 81</b>             | Wood<br>(D-Healdsburg)           | Would extend the seismic safety deadline for a new hospital in Willits to Sept. 15, 2015, which would provide time to complete construction that is already 90 percent complete. Would allow the hospital to remain fully operational while meeting the new deadline, keeping health care accessible to rural communities within the county.                                                                                                                                                                                                                            | Signed by the Governor July 13 (Chapter 63).                   | Support      | Cheri Hummel/<br>Kathryn Scott              |
| <b>AB 232</b>            | Obermole<br>(R-Big Bear Lake)    | Existing law authorizes the Office of Statewide Health Planning and Development (OSHPD) to grant an additional two-year extension to the seismic mandate in specified circumstances. AB 232 would authorize a critical access hospital located in the City of Tehachapi to resubmit to OSHPD its application for an extension to January 1, 2020.                                                                                                                                                                                                                       | Awaiting action on the Governor's desk.                        | Support      | Cheri Hummel/<br>Barbara Glaser             |
| <b>SB 483</b>            | Beall<br>(D-San Jose)            | Would require a general acute care hospital to obtain approval to provide supplemental services in an observation unit. Would require hospitals to submit financial reports to OSHPD, designate observation beds, limit observation stays to 24 hours and establish staffing ratios for observation.                                                                                                                                                                                                                                                                    | Held on Suspense in Senate Appropriations Committee May 28.    | Oppose       | Debby Rogers/<br>Connie Delgado             |
| <b>Labor</b>             |                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                |              |                                             |
| <b>AB 304</b>            | Gonzalez<br>(D-San Diego)        | Would amend the paid sick leave law that went into effect July 1, 2015. Would alter the requirements for the rate at which paid sick leave is paid, as well as the accrual requirements when an employer relies on an existing paid time off policy.                                                                                                                                                                                                                                                                                                                    | Signed by the Governor July 13 (Chapter 67).                   | Follow, Hot  | Gail Blanchard-<br>Saiger/ Kathryn<br>Scott |
| <b>AB 850</b>            | Ridley-Thomas<br>(D-Los Angeles) | Would require general acute care hospitals to provide health care workers who enter the room of a specified patient with specified personal protection equipment and a powered air purifying respirator. Would exceed the protection requirements established by the CDC, CDPH and the Cal/OSHA Aerosol Transmissible Disease Standard.                                                                                                                                                                                                                                 | Two-year bill.                                                 | Oppose       | Gail Blanchard-<br>Saiger/ Kathryn<br>Scott |
| <b>SB 327</b>            | Hernandez<br>(D-Azusa)           | Would reject the adverse meal period decision in Gerard v. Orange Coast Memorial Medical Center, wherein the court invalidated the Industrial Welfare Commission (IWC) regulation allowing employees in the health care industry to waive one of their two meal periods, even when their shift exceeds 12 hours — a regulation in place since 1993. This bill would clarify that the IWC's regulation has been valid since October 2000, and that hospitals, other health care employers and employees may rely on the validity of their voluntary meal period waivers. | Awaiting action on the Governor's desk.                        | Sponsor      | Gail Blanchard-<br>Saiger/ Kathryn<br>Scott |
| <b>Medi-Cal</b>          |                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                |              |                                             |
| <b>AB 366</b>            | Bonta<br>(D-Alameda)             | Substantially amended in Assembly Appropriations Committee. The bill would now require the Department of Health Care Services to annually submit to the Legislature a monitoring report providing an assessment of access to care in Medi-Cal and identifying a basis to evaluate the adequacy of Medi-Cal reimbursement rates and the existence of other barriers.                                                                                                                                                                                                     | Held on Suspense in Senate Appropriations Committee August 27. | Support      | Anne McLeod/<br>Barbara Glaser              |

# California Hospital Association Key State Issues

| Bill No.                    | Author                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Location/Action                                               | CHA Position | Staff Contact                                |
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| <b>Medi-Cal (continued)</b> |                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                               |              |                                              |
| <b>SB 36</b>                | Hernandez<br>(D-Azusa)           | Would permit the director of DHCS to request one or more temporary waiver extensions to continue the operation of the current waiver, the "California Bridge to Reform Demonstration," until the approved effective date of the subsequent waiver.                                                                                                                                                                                                                                                           | Awaiting action on the Governor's desk.                       | Support      | Amber Kemp/<br>Barbara Glaser                |
| <b>SB 243</b>               | Hernandez<br>(D-Azusa)           | Would repeal implementation of prior year Medi-Cal rate reductions, which include the 10 percent reduction to Medi-Cal providers and the retroactive amount owed to the state by hospital-based SNFs; increase payment rates for outpatient health care providers to that of Medicare payment levels; increase hospital Medi-Cal DRG rates on a one-time basis and require annual increases thereafter; and require the state to reimburse Medi-Cal managed care plans at the upper end of their rate range. | Held on Suspense in Senate Appropriations Committee May 28.   | Support      | Anne McLeod/<br>Barbara Glaser               |
| <b>SB 566</b>               | Hernandez<br>(D-Azusa)           | Would eliminate the sunset of the "carve out" of the California Children's Services program from Medi-Cal managed care. Would require DHCS to contract with one or more Kids Integrated Delivery Systems to provide integrated care that includes existing CCS benefits and all other health care services provided under Medi-Cal.                                                                                                                                                                          | Two-year bill.                                                | Follow, Hot  | Anne McLeod/<br>Barbara Glaser               |
| <b>Medical Waste</b>        |                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                               |              |                                              |
| <b>SB 225</b>               | Wieckowski<br>(D-Fremont)        | Would clarify the type of bio-hazardous bag that can be used in hospitals and the type of shipping documents required for medical waste transport, and make other clarifying amendments to the Medical Waste Management Act.                                                                                                                                                                                                                                                                                 | Signed by the Governor September 28 (Chapter 352).            | Sponsor      | Cheri Hummel/Kathryn Scott                   |
| <b>Mental Health</b>        |                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                               |              |                                              |
| <b>AB 1193</b>              | Eggman<br>(D-Stockton)           | Would require each county to implement Laura's Law provisions unless it elects not to participate by enacting a resolution passed by the county board of supervisors that states the reasons for opting out and any facts or circumstances considered in the decision.                                                                                                                                                                                                                                       | Held on Suspense in Assembly Appropriations Committee May 28. | Support      | Sheree Kruckenberg/<br>Tanya Robinson-Taylor |
| <b>AB 1194</b>              | Eggman<br>(D-Stockton)           | Would clarify involuntary commitment laws and help county mental health departments, law enforcement jurisdictions, local county counsel and officers of superior courts to more consistently evaluate and determine an individual's level of dangerousness, including consideration of the historical course of a person's mental health disorder.                                                                                                                                                          | Awaiting action on the Governor's desk.                       | Support      | Sheree Kruckenberg/<br>Tanya Robinson-Taylor |
| <b>AB 1300</b>              | Ridley-Thomas<br>(D-Los Angeles) | Would modernize sections 5150, 5151 and 5152 of the Welfare and Institutions Code under the Lanterman-Petris-Short Act. Would clarify and better define the 5150 detention process to establish consistent application statewide and ensure patients receive the most appropriate care in the least restrictive environment.                                                                                                                                                                                 | Two-year bill.                                                | Sponsor      | Sheree Kruckenberg/<br>Tanya Robinson-Taylor |

# California Hospital Association Key State Issues

| Bill No.                | Author                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Location/Action                              | CHA Position | Staff Contact                              |
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| <b>Nursing Services</b> |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                              |              |                                            |
| <b>AB 1306</b>          | Burke<br>(D-Inglewood)       | Would remove the physician supervision requirement for certified nurse midwives (CNMs) by allowing them to manage a full range of primary health services, <del>perform peripartum care, provide emergency care</del> when a physician is not present, and perform and repair episiotomies in all practice settings. As amended May 28, the bill subjects CNMs to a ban on corporate practice. Such a ban would be an unwarranted and precedent-setting expansion of the corporate practice ban and would create an artificial and unnecessary barrier to employment options for CNMs. | Two-year bill.                               | Oppose       | Jackie Garman/David Perrott/Connie Delgado |
| <b>SB 323</b>           | Hernandez<br>(D-Azusa)       | Would allow nurse practitioners to practice to the full extent of their education and training to ensure access to health care delivery systems for millions of Californians who now have access to coverage under the ACA.                                                                                                                                                                                                                                                                                                                                                            | Two-year bill.                               | Support      | BJ Bartleson/<br>Connie Delgado            |
| <b>Pharmacies</b>       |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                              |              |                                            |
| <b>AB 258</b>           | Levine<br>(D-San Rafael)     | Would prohibit a hospital, physician or other participant in the organ transplant process from denying patients' eligibility as organ recipients based solely on their use of medical marijuana, unless the use is clinically significant to that decision.                                                                                                                                                                                                                                                                                                                            | Signed by the Governor July 7 (Chapter 51).  | Follow, Hot  | David Perrott/<br>Tanya Robinson-Taylor    |
| <b>Public Health</b>    |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                              |              |                                            |
| <b>AB 508</b>           | Garcia<br>(D-Bell Gardens)   | Would establish the California Maternal Quality Care Collaborative (CMQCC) within CDPH. Would require CMQCC to establish a statewide system for collecting and maintaining data related to, among other things, pregnancy-related maternal deaths. Would require hospitals that provide obstetrical services to submit information on maternal mortality to CMQCC each month.                                                                                                                                                                                                          | Two-year bill.                               | Follow, Hot  | David Perrott/<br>Tanya Robinson-Taylor    |
| <b>AB 521</b>           | Nazarian<br>(D-Sherman Oaks) | Would require hospitals to offer an HIV test to every patient who has blood drawn after being admitted to a hospital from the emergency department. If the patient consents, the hospital would be required to conduct the test and provide results before the patient leaves the hospital or, if that is not possible, by mail or telephone. In addition, the provider or person administering the test would need to ensure that the patient receives timely information and counseling, as appropriate, to explain the results and implications for the patient's health.           | Awaiting action on the Governor's desk.      | Oppose       | David Perrott/<br>Tanya Robinson-Taylor    |
| <b>SB 277</b>           | Pan<br>(D-Sacramento)        | Would eliminate the exemption from immunization based on personal beliefs, but would allow exemption from future immunization requirements deemed appropriate by CDPH for either medical reasons or personal beliefs. Would exempt students in home-based private schools and students enrolled in independent study programs from the prohibition.                                                                                                                                                                                                                                    | Signed by the Governor June 30 (Chapter 35). | Support      | David Perrott/<br>Tanya Robinson-Taylor    |



# California Hospital Association Key State Issues

| Bill No.                          | Author                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Location/Action                                                             | CHA Position        | Staff Contact                                      |
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| <b>Public Health (continued)</b>  |                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                             |                     |                                                    |
| <b>SB 792</b>                     | Mendoza<br>(D-Artesia)                  | Would protect children in day care centers and family day care homes from the threat of infectious diseases by requiring employees to be immunized in accordance with the CDC schedule for routine adult immunizations. Under the current mandate for immunizations for specific infectious diseases, the Legislature's intent was to provide a means to eventually achieve total immunization of appropriate age groups against several infectious diseases, including hepatitis B, measles, pertussis and others. | Awaiting action on the Governor's desk.                                     | Support             | David Perrott/<br>Tanya Robinson-Taylor            |
| <b>Skilled-Nursing Facilities</b> |                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                             |                     |                                                    |
| <b>AB 927</b>                     | McCarthy<br>(D-Sacramento)              | Would expand disclosure requirements for applicants for a license to operate a skilled-nursing facility. Would require an application be denied if a person named in the application was a director, officer, general partner or owner of even limited interest in a licensee or parent organization of a licensee of a facility, during the seven-year period prior to the application, during which that facility had a violation that resulted in specified actions or outcomes.                                 | Two-year bill.                                                              | Follow, Hot         | Pat Blaisdell/<br>Jackie Garman/<br>Barbara Glaser |
| <b>AB 1518</b>                    | (Committee on Aging and Long-Term Care) | Would increase access to the home and community-based Medi-Cal Nursing Facility/Acute Hospital Waiver by increasing the number of authorized waiver slots and requiring an expedited authorization process for patients in acute care hospitals who are awaiting discharge to a skilled-nursing facility.                                                                                                                                                                                                           | Two-year bill.                                                              | Support             | Pat Blaisdell/<br>Jackie Garman/<br>Barbara Glaser |
| <b>SB 779</b>                     | Hall<br>(D-Los Angeles)                 | Would require CDPH to develop staff-to-patient ratio regulations for certified nursing assistants in freestanding skilled-nursing facilities that would increase required nurse staffing to 4.1 hours per patient day.                                                                                                                                                                                                                                                                                              | Held on Suspense in Senate Appropriations Committee May 28.                 | Neutral, As Amended | Pat Blaisdell/<br>Jackie Garman/<br>Barbara Glaser |
| <b>Tobacco Tax Issues</b>         |                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                             |                     |                                                    |
| <b>ABX2 16</b>                    | Bonta (D-Alameda)                       | Would raise the cost of a pack of cigarettes by \$2 and would impose a tax on e-cigarettes. The tax increase is projected to raise about \$1.5 billion in the first year, with the money benefitting anti-smoking programs, health services for low-income families and tobacco-related medical research. This bill is one of several tobacco-related bills in the special session on health care.                                                                                                                  | To be heard in Assembly Public Health and Developmental Services Committee. | Follow, Hot         | Anne McLeod/<br>Barbara Glaser                     |
| <b>ABX2 19</b>                    | Bonta (D-Alameda)                       | Would establish a new managed care organization provider tax, to be administered by the Department of Health Care Services in consultation with the Department of Managed Health Care. The provider tax will be assessed by the department on licensed health care service plans and managed care plans contracted with the department to provide Medi-Cal services. Would require health plans to report to the department specified enrollment information on a quarterly basis.                                  | To be heard in Assembly Public Health and Developmental Services Committee. | Follow, Hot         | Anne McLeod/<br>Barbara Glaser                     |
| <b>SBX2 13</b>                    | Pan<br>(D-Sacramento)                   | SBX2 13 is identical to ABX2 16.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | To be heard in Senate Public Health and Developmental Services Committee.   | Follow, Hot         | Anne McLeod/<br>Barbara Glaser                     |

# California Hospital Association Key State Issues

| Bill No.                              | Author                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Location/Action                           | CHA Position | Staff Contact                  |
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| <b>Tobacco Tax Issues (continued)</b> |                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                           |              |                                |
| <b>ABX2 14</b>                        | Hernandez<br>(D-Azusa) | Would implement a \$2 per pack increase in the tobacco tax, estimated to generate more than a billion dollars annually, as well as an equivalent tax increase on e-cigarette products. A portion of the revenue would go toward increasing Medi-Cal reimbursement rates. The remainder would go toward existing tobacco-funded programs. Would also extend the tax on Managed Care Organizations to provide additional money for the health care system and an increase of \$230 million annually for regional centers and providers of services to the developmentally disabled. The MCO tax proposal generates \$1.3 billion annually. | On the Senate Floor<br>(Special Session). | Follow, Hot  | Anne McLeod/<br>Barbara Glaser |



### Legislative Update

The Legislature sent 941 bills to Governor Brown this year and he has until October 11 to act on them. To date, there are roughly 560 left to go. ACHD will prepare a final report on the Governor's actions on bills in the next few weeks.

Meanwhile, the two extraordinary sessions on transportation and healthcare funding remain open. Senate President pro Tempore Kevin DeLeon and Speaker Toni Atkins have named members to conference committees on both topics. While we don't anticipate any legislative activity on these matters until January, stakeholders continue to discuss potential solutions to these significant challenges. It is likely that Governor Brown will also weigh-in when the 2016-17 proposed budget is released in January.

ACHD is seeking your ideas on legislative proposals for the next legislative year. Please complete the 2016 Legislative Proposal Form, [here](#), and submit it to [Samantha Kesner](#), ACHD's Legislative Assistant, by October 23, 2015. Contact [Amber King](#), ACHD's Senior Legislative Advocate, with questions.



### ACHD's 2016 Events

Please mark your calendars for our events taking place in 2016! Registration is now open. To register for our events, please visit [ACHD](#).



**2 0 1 6**  
**REGISTER NOW!**

|                                                                |                                                             |                                                        |
|----------------------------------------------------------------|-------------------------------------------------------------|--------------------------------------------------------|
| <b>Leadership Academy</b><br>Jan 21-22, 2016<br>Sacramento, CA | <b>Legislative Day</b><br>April 4-5, 2016<br>Sacramento, CA | <b>Annual Meeting</b><br>May 7-5, 2016<br>Monterey, CA |
|----------------------------------------------------------------|-------------------------------------------------------------|--------------------------------------------------------|

[WWW.ACHD.ORG](http://WWW.ACHD.ORG)



### Opportunity To Become A Member Of Californians Allied for Patient Protection

The Association of California Healthcare Districts (ACHD) is a member of Californians Allied for Patient Protection (CAPP), the coalition created to protect access to health care and patient safety through California's Medical Injury Compensation Reform Act (MICRA). ACHD strongly supports the preservation of MICRA.

In 2014, California voters definitively rejected Proposition 46, an attempt by trial lawyers to quadruple MICRA's non-economic damages cap. Had this ballot measure passed, California would have seen higher health care costs



and decreased access to care, especially among vulnerable populations who are most in need. Despite this victory, the battle to protect MICRA continues and ACHD strongly encourages Healthcare Districts to become members of CAPP.

There is **no cost** to be a member of CAPP and you will be in good company. 17 ACHD member Healthcare Districts and individual hospitals are current CAPP supporters, as well as more than 1,000 other organizations representing community clinics, hospitals, physicians, nurses, EMTs, labor unions, local governments, dentists and other health care providers. A complete coalition list can be found on the [CAPP](#) website.

Please take a moment to complete the attached CAPP Coalition Sign-Up [Form](#). It can be returned to Marissa Allen, CAPP's Government Affairs Coordinator, via e-mail, fax or mail. For questions or concerns, please contact CAPP at (916) 448-7992.



### **Healthcare District Study**

ACHD is working with Via Consulting to collect valuable information about Healthcare Districts. Healthcare Districts are an essential part of California's health system and are among those most affected by the continually shifting landscape of health care. Governing a public entity in these challenging times can be difficult.

Compounding these challenges is a distinct lack of information regarding governance best practices specific to District boards to reference. To assist our Members in strengthening their ability to respond to these challenges, ACHD, in collaboration with Via Healthcare Consulting is conducting a study to identify effective governance practices particular to District boards. The objectives of the study include:

- Identify structures, tools, and practices which promote effective District governance;
- Elicit feedback on the barriers/challenges to effective governance, and;
- Collect data on real-life governance success stories as well as efforts that were not successful.

We would like to invite Board Chairs and Chief Executive Officers to participate in this study by taking part in a brief 20-30 minute telephone interview. Given your unique position within your Healthcare District, ACHD believes you are in an ideal position to give us valuable firsthand information on lessons learned and pitfalls to avoid. Your participation will be a valuable addition to study the findings of which we believe can become valuable District governance reference material.

To schedule a telephone interview, please contact [Sheila Johnston](#).



### **Healthcare District Data Survey**

ACHD is seeking information about your Healthcare Districts! At your earliest convenience, please complete the short, ten question [survey](#) regarding your District demographics. The answers you provide will allow ACHD to better represent your District.



### **ACHD Partners With Capella University**

ACHD has partnered with Capella University. Capella will extend a \$3000 tuition grant to all ACHD employees and Members and their immediate family members who enroll in and begin a bachelor's, master's, doctoral, specialist, or post-master's certificate program between now and August 2016. This is in addition to the 10% tuition discount. For all details simply visit [www.capella.edu/ACHD](http://www.capella.edu/ACHD).

Capella University, an accredited online university, offers a wide range of online bachelor's, master's, MBA, PhD, and certificate programs through its Schools of Healthcare and Nursing, Business and Technology, Education, Psychology, Human Services, and Public Service Leadership.

Teammates will also benefit from:

- **Complimentary nursing & professional development webinar series** which taps into the subject matter expertise of Capella faculty
- **Potential additional military discounts and benefits** to any ACHD teammate who is an Armed Forces veteran, Active Duty service member, or Reserve or National Guard – to include credit for military training, participation in the Yellow Ribbon program, and assistance with Post-9/11 GI Bill benefits
- **Disability services support** to any Member needing such services through Capella's Disability Services Department
- **Prior learning assessment options** for transfer credit including evaluation of technical knowledge and skills gained from real-world experience, training, certifications, and previous education may be eligible for credit, shortening the time to degree completion and reducing your costs
- **Over 140 degree and certificate program specializations** offered on the undergraduate and graduate levels



### **ACHD CEO Evaluation**

Available free of charge to all Member Healthcare Districts, ACHD offers an online Healthcare District CEO Evaluation Tool for assessing how each District Trustee perceives the CEO to be performing. There are two options; one for District CEOs no longer managing a hospital and one for District CEOs who do manage a hospital.

The ACHD Board strongly encourages each District Board to complete a CEO Evaluation on an annual basis.

Members interested in completing the CEO Evaluation may contact [Sheila Johnston](#).



### **ACHD Board Self-Assessment Tool**

ACHD makes available, at no charge to its Members, an on-line Board Self-Assessment Tool for assessing how each Trustee perceives the Board to be functioning. There are two Self-Assessment options; one for Districts no longer managing a hospital and one for Districts which do manage a hospital.



The survey takes about 35 minutes to complete, responses are anonymous and the results are only shared with the participating Board and Associations' Education Committee.

The ACHD Board strongly encourages each District Board to complete a Self-Assessment on an annual basis. For more information, please contact [Sheila Johnston](#).



### **ACHD Certified Healthcare District**

As public entities, Healthcare Districts have well-defined obligations for conducting business in a manner that is open and transparent. To assist ACHD Members in demonstrating compliance with these obligations, the ACHD Governance Committee has developed a core set of standards referred to as Best Practices in Governance. Healthcare Districts that demonstrate compliance with these practices will receive the designation of ACHD Certified Healthcare District.

Districts achieve Certification by demonstrating compliance with public agency reporting requirements in the following areas:

- Transparency
- Website Content
- Executive Compensation and Benefits
- State Agency Reporting
- Financial Reporting

To date, the following Healthcare Districts have achieved certification status:

- Antelope Valley Healthcare District  
November, 2014
- Beach Cities Health District  
October, 2014
- John C. Fremont Healthcare District  
March, 2015
- Palomar Health  
August, 2014
- Petaluma Health Care District  
May, 2015
- Sequoia Healthcare District  
August, 2014

Members interested in applying for Certified Healthcare District status should contact [Ken Cohen](#).

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# COMMITTEE MEETING

**DRAFT**

**MINUTES**

MAYERS MEMORIAL HOSPITAL DISTRICT  
 BOARD FINANCE COMMITTEE MEETING  
 MINUTES – SEPTEMBER 23, 2015 9:00 A.M.

BFC Attendance:  
 Louis Ward, Interim CEO  
 Travis Lakey, CFO

|                               |
|-------------------------------|
| <b>DRAFT<br/>Attachment A</b> |
|-------------------------------|

Valerie Lakey, Clerk to BODs –  
 Art Whitney  
 Allen Albaugh  
 Linda Carpenter  
 Other: Libby Mee, Lisa Akin, Sherry Wilson

*(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.)*

| SUBJECT                         | DISCUSSION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |
|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| CALL TO ORDER                   | The meeting was called to order by Albaugh at 9:00 AM in Fall River Mills.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |
| Requests from Audience to Speak | None                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                 |
| Minutes                         | The minutes from the BFC meeting held 08.26.15 were approved.<br><i>(Whitney, Albaugh)</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>Approved</b> |
| Department Reports              | <p><b>Personnel, Libby Mee (Exhibit A)</b><br/>           Registry was high in August (\$70,000) Working on bringing that number down. Looked closely at wages of CNA's, RN's and LVN's. Employees can get 15% increase in pay if all benefits (except Sick Leave) are declined.</p> <p>Talked about positions that will be needed: Home Health Aide in Hospice.</p> <p>Albaugh asked for job descriptions to be posted on the website</p> <p>Will be doing a wage scale and making it make it public information. Albaugh noted the importance of incentives</p> <p><b>Surgery, Lisa Akin (Exhibit B)</b><br/>           Albaugh asked about the payor mix; we need to look at patient mix and cost.</p> <ul style="list-style-type: none"> <li>• Get patients into Partnership.</li> <li>• Dr. Syverson is contract paid.</li> <li>• Met with MVHC yesterday regarding referrals</li> <li>• Discussion about joint replacements</li> <li>• Would be nice to have an Ortho available for emergencies</li> <li>• Went over revenue generation</li> <li>• Went over staffing</li> </ul> |                 |
| Financials                      | Approval of Financials. A/R, A/P <i>(Whitney, Albaugh)</i><br><b>Approved All</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |



MAYERS MEMORIAL HOSPITAL DISTRICT

BOARD FINANCE COMMITTEE MEETING  
MINUTES – SEPTEMBER 23, 2015 9:00 A.M.

|                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
|-------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
|                                                       | <p><b>Notes:</b></p> <ul style="list-style-type: none"> <li>• 54 days A/R – goal of 50</li> <li>• ICD-10 switchover – have been testing</li> <li>• Untimely's have gone down quite a bit</li> <li>• More cooperation from departments</li> <li>• Discussed Imaging's new schedule</li> <li>• IGT Update – could potentially get money – could be November</li> <li>• Quality Assurance Fee fund – received money before we paid in.</li> <li>• Will decrease \$60,000 in monthly obligations</li> <li>• USDA letter of conditions – some items will be negotiated.</li> <li>• Cost of McKesson - \$70,000 – monthly (\$60,000 drug); Terms 30 days. Whitney suggested to try to negotiate again</li> </ul>                          |  |
| <p>Building Project<br/>USDA<br/>Capital Campaign</p> | <ul style="list-style-type: none"> <li>• April 2017 start date, July 2019 completion</li> <li>• Working of square footage for plans</li> <li>• HGA has been on site and will continue to work on plans</li> <li>• All monies used have to be approved through USDA</li> <li>• Working on setting up the financial record system</li> <li>• Potentially set up 2 Foundation accounts (one for excess of funds over \$600,000)</li> <li>• USDA money available August 2, 2016</li> <li>• Working with Shasta County regarding when they will release the \$400,000</li> <li>• Whitney suggested a line of credit through the Foundation</li> <li>• Potential special meeting on October 12</li> <li>• Hire project manager</li> </ul> |  |
| <p>Emergency<br/>Department</p>                       | <ul style="list-style-type: none"> <li>• October 4<sup>th</sup> (PP begin) moving to 12 hour shifts. Currently working two 24 back to back. 16 hours on – 8 hours sleep with call back overtime. Cost savings – better patient care, quality. Nurse will always have an EMS on shift. Employee safety, patient safety. Interviewed employees that have left. Will potentially bring in more employees from Burney Fire District. Three month schedule is provided. Applications have increased.</li> </ul>                                                                                                                                                                                                                          |  |
| <p>Physician Recruitment</p>                          | <ul style="list-style-type: none"> <li>• Working with MVHC on recruitment – looking at ways to share cost structures.</li> <li>• Need to come up with some ideas – physician recruitment team</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| <p>Other</p>                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
| <p>Adjournment</p>                                    | <p>Meeting was adjourned at 11:01 am</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |

By: Valerie Lakey, Board Clerk

**MAYERS MEMORIAL HOSPITAL  
STRATEGIC PLANNING COMMITTEE MEETING  
MINUTES – OCTOBER 13, 2015 – FALL RIVER MILLS**

|                         |                            |  |
|-------------------------|----------------------------|--|
| <u>BSPC Attendance:</u> | <u>Staff Present:</u>      |  |
| Beatriz Vasquez, PhD    | Valerie Lakey, Board Clerk |  |
| Abe Hathaway            | Travis Lakey, CFO          |  |
| Louis Ward, Interim CEO | Sherry Wilson, CNO         |  |
|                         | Libby Mee, HR              |  |
| Other:                  | Marlene McArthur, IHF CEO  |  |

*(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.)*

| <b>SUBJECT</b>                    | <b>DISCUSSION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                 |
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| <b>CALL TO ORDER</b>              | The meeting was called to order by Hathaway at 11:04 am in Fall River Mills                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                 |
| <b>Requests Audience to Speak</b> | None                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                 |
| <b>Minutes</b>                    | August 24, 2015 Strategic Planning Committee meeting minutes. No objections – <b>Approved (no objections)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>Approved</b> |
| <b>Building Project</b>           | <ul style="list-style-type: none"> <li>• Special board meeting yesterday.</li> <li>• Process has been good with staff, managers, physicians – community</li> <li>• Community perception</li> <li>• Privacy for patients</li> <li>• Patient and Employee flow</li> <li>• Security – cameras, ability to lock doors, etc.</li> <li>• 10,700 sq ft building – needs versus wants list. Started with 13,000-14,000. Removed all Admin offices. Wanted to focus on ER. Keep lab and Imaging in close proximity to ER.</li> <li>• Planning for potential growth and expansion</li> <li>• Timeline</li> <li>• Capital Campaign – unified, educated approach to the donors</li> <li>• Hoping for opportunity to donate in this tax year</li> <li>• Will be working with the county on the windmill money</li> <li>• Develop a brochure – Cabinet meeting on the 21<sup>st</sup></li> <li>• Roll out campaign in January – working on named gift opportunities</li> <li>• Will be sending out annual appeal with building overview this fall.</li> <li>• Employee contributor letters were sent out.</li> <li>• Clear with the message</li> <li>• On hold with PGE – will have to move power lines – will need to work on how to cover costs. We need to get scheduled and approve the work when we are a little further down the process. Look at next at fall of 2016</li> <li>• Signage</li> </ul> | <b>Report</b>   |

**MAYERS MEMORIAL HOSPITAL  
STRATEGIC PLANNING COMMITTEE MEETING  
MINUTES – OCTOBER 13, 2015 – FALL RIVER MILLS**

|                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |
|------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
|                                    | <ul style="list-style-type: none"> <li>• Measure D fund – about \$2 mil of new funds</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |
| <b>Emergency Department Update</b> | <ul style="list-style-type: none"> <li>• SSV contract – looking at a modified base hospital contract. Needs to be signed by November 1, 2015. There are a few positions we may need to re-name to meet the terms of the contract. Required to have a quarterly meeting. Educational plan is required – training opportunities for staff members. Possibly collaborate with Burney or have a trainer designated. Contract has been reviewed by Chief team.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>Report</b>      |
| <b>ICD-10 Update</b>               | Travis Lakey reported on ICD-10 change as of October 1, 2015. A little hang-up with billing software – fixed now. Little bugs, we are getting through it. Waiting on IGT money that should show up- will give us cushion to help with ICD-10 billing issues. We will see a dip in a few weeks.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>Information</b> |
| <b>Disaster Management Update</b>  | Conference – new regulations Oct. 1, 2016. Val gave an update                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                    |
| <b>HR Update</b>                   | <p>Libby Mee was present to give an update: Will be ringing on a CLS. Ben Wershing will be staying until February. Jolene Platko will be here through November. Scott another year. Daryl new manager. Bring in new CNA's. ER – Bob – Casual EMT. Gonzo accepted lead Paramedic. Donna Cova will be the manager over the entire department. Another casual EMT, Tome Coe will be returning to work. New RN in the ER is doing great. Coleen resigned to casual status. We have one registry. There may be a couple of leads on RN's.</p> <p>Sherry, Sonya, Libby and Shelley went to Shasta college – Spring CNA class – 15 students. Use Burney Shasta College campus and clinical here. Will pay for 49% of instructor's wages. Will be using the SMART program. Students will be able to test at Shasta College. Home Health aide is included in the program.</p> <p>Career Fair at OIT in October (Tech staff)<br/>IOT in Redding<br/>Chico State<br/>Shasta College</p> <p>Will check with COS, Simpson, Butte and Feather River</p> <p>Retention strategies webinar this morning – completed by Libby.<br/>Looking at a finance clerk and lab clerk.<br/>Home Health Aide<br/>Libby M-F 8-4:30<br/>Employee Recognition</p> <p>Working with Modoc Medical Center – may have some opportunities to collaborate.</p> | <b>Information</b> |
| <b>Adjournment</b>                 | Meeting was adjourned at 12:25 pm                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                    |

By: Valerie Lakey, Board Clerk

MAYERS MEMORIAL HOSPITAL  
STRATEGIC PLANNING COMMITTEE MEETING  
MINUTES – OCTOBER 13, 2015 – FALL RIVER MILLS

**Healthcare District study**

**Future Agenda Items:**

Tele-medicine

DRAFT

**MAYERS MEMORIAL HOSPITAL DISTRICT  
QUALITY COMMITTEE MEETING  
MINUTES – OCTOBER 13 2015**

15

**DRAFT  
Attachment A**

QC Attendance

Beatriz Vasquez, PhD, Committee  
Louis Ward, Interim CEO  
Laura Dolman-Beyer - Community

Other Staff Present

Sherry Wilson, RN, CNO  
AJ Weinhold, Chief of Staff  
Libby Mee, Personnel  
Trudi Burns, RN, Cardiac Rehab  
Theresa Overton, RN, Med-Surg  
Pam Sweet (Scribe)

Absent

Travis Lakey, CFO  
Keith Earnest, PhD, CCO  
Mike Kerns, Board Chair  
Holly Green, Obstetrics  
Manager & Quality

*(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.)*

| <b>SUBJECT</b>          | <b>DISCUSSION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                 |
|-------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| CALL TO ORDER           | The meeting was called to order at 12:04 pm by Vasquez in Fall River Mills                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                 |
| Public Request to Speak | None                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 |
| Minutes                 | Minutes from the September 10, 2015 quality committee meeting were approved as with correction of board member Vasquez name <b>M/S/C (Wilson/Ward)</b> . All Approved                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>Approved</b> |
| Department Reports      | <p><b>Environmental Services - Move to Next Meeting</b></p> <p><b>Pharmacy - Report by Sherry Wilson</b> - Medication Error Reduction Plan (MERP) Survey team inspected Med-Surge side of the facility. They found our MERP plan was not satisfactory. It included all the required policies, but they wanted an actual working tool. A new plan will be created and brought to this committee for review. We will pick out areas where we see potential for errors and create plans for review.</p> <p style="padding-left: 40px;">In addition, they found 12 deficiencies (i.e., some outdated products in the crash cart, open vials in the ER) We have already changed policies to bring into compliance.</p> <p style="padding-left: 40px;">In Radiology, they expressed concern about the IV contrast in the warmer. A new policy has been written and the temperatures will be logged.</p> <p style="padding-left: 40px;">IV fluids were also a concern in the ER and a new warmer has been ordered to bring into compliance.</p> <p><b>Med-Surg - Theresa Overton</b> - Report attached (Attachment B)</p> <p><b>Cardiac Rehab - by Trudi Burns</b> - Results of the patient survey are complete. Trudy is generally very satisfied by the results, but patients did express a few concerns: 1) Temperature in the room was judged too hot and too cold. 2) Cleanliness in the area and bathroom - Trudy has worked with Environmental 3) Services to create a check list. Maintenance of the equipment - Maintenance does what they can, but Trudi is checking o find</p> | <b>Reports</b>  |

**MAYERS MEMORIAL HOSPITAL DISTRICT  
QUALITY COMMITTEE MEETING  
MINUTES – OCTOBER 13 2015**

|                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                       |
|---------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|
|                                 | <p>a vendor to service the treadmills.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                       |
|                                 | <p>Numbers are up.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                       |
|                                 | <p>Having problems with Partnership approving cardiac rehab services. Their policy states they do cover, but they are denying coverage. Trudi is working with the Business office and Keith to resolve.</p> <p>Recent safety inspection noted deficiencies for an extension cord. A new plug has been installed to resolve the problem.</p> <p><b>Imaging - Doreen Parker</b> - Report is attached (Attachment A)</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                       |
| <p><b>Quarterly Reports</b></p> | <p><b>Workers Comp - Libby Mee</b> - For the quarter that will end 10/31/15, we have had 3 1st aid incidents and no reportable injuries.</p> <p>For the last fiscal year, we have 5 open claims. Mee is tracking 4 of them. The 5th has become a legal matter.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                       |
| <p><b>Standing Reports</b></p>  | <p><b>Monthly SNF Events/Survey - Sherry Wilson</b> - Wilson reviewed the Federal, State and MERP surveys.</p> <p>The Federal survey It is 113 pages with 23 deficiencies. Among them are: 1) Chemical/physical restraints. A resident had a Barker pillow on, but there was no informed consent. Another resident was receiving Haldol, per a standing order. Orders for Haldol must be individual; standing orders are not acceptable. Inservice has been done 2)Pressure ulcer - inservices are ongoing 3) Medication errors - will be included in the MERP plan 4) Falls - 1 resident had multiple falls. Surveyors want them to have physical therapy consults, which have been ordered. 5) Informed consents - we are doing physician education. 6) Physician Orders - every medication must have a diagnosis. If patient is receiving a high risk drug, they want to see behaviors listed justifying the drug. 7) Temperature levels in the dining room are too cold. 8) Care plans do not include interventions. Logs have been created to resolve.</p> <p>The State survey is only 10 pages. Among their finders were 1) Chart face sheets are missing some information, i.e., doctor and responsible party contact information - we are working to incorporate those into the EMR and 2) Dietary was tagged for food temperature and the thickener used in liquids.</p> <p>The major deficiencies (falls, pressure ulcer, medication errors, dementia care) have been discussed at the quality Care Team meeting and a nurse has been assigned to each area to collect data and discuss at the monthly meetings. SNF will also be working more closely with H. Green and the Quality Director. Acute/and SNF will both fall under her authority.</p> <p>The Fire Life Safety survey was discussed by L. Ward. This survey covers inspections, fire drills, documentation, fire sprinklers, water and</p> | <p><b>Reports</b></p> |

**MAYERS MEMORIAL HOSPITAL DISTRICT  
QUALITY COMMITTEE MEETING  
MINUTES – OCTOBER 13 2015**

|                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |
|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
|                     | <p>policies and procedures. This survey was considerably better than last year. Deficiencies found were: 1) Penetrations in fire wall compartments; 4 areas were found with ½ inch penetrations through which smoke or flames could spread from 1 compartment to another. The holes have been patched. 2) Doors have to close and latch when the alarm sounds. 1 door didn't latch and it has been fixed. 3) Cobwebs, dust and paint spatter on the sprinkler heads. Maintenance and Housekeeping will do monthly inspections on these 3 items in the future. 4) Bulk oxygen tank had a manifold that was not working properly. The vendor has repaired it. 5) Extension cords and candle plates are not allowed. 6) The Burney facility failed the smoke sensitivity test of the fire/smoke detectors. It is an older system and did meet standards up until 2 years ago. We are applying for a 6 month waiver with CMS and the system should be grandfathered, anyway. It will cost about \$30,000 to correct. We should budget for a new system. 7) Surveyors want to see the hood in dietary connected to the panel. A switch has been installed on the hood and the vendor will be here soon to connect it to the panel. 8) The biggest problem was with the new fire panel. 1 pull station failed. The vendor has fixed it</p> <p><b>EMR – Meaningful Use Administrative Report - Louis Ward</b> – The committee requests that the name of this agenda be changed to "Administrative Report"</p> <p>ICD-10 has been implemented without major incidents. There are some payment issues, but no crashes and staff is adjusting.</p> <p>CMS has proposed changes to the requirements for Meaningful Use stage 2, year 1 have been finalized. We have a good idea what the new requirements are. The 1st date we can submit data is 1-4-2016.</p> <p><b>Quality - Performance Improvement - Holly Green</b> -No report</p> <p><b>Infection Control - Sherry Wilson</b> - Approximately 150 employees have received the flu vaccine and LTC has begun vaccinating residents.</p> <p>Burney SNF had an outbreak of gastro flu and RMV had a respiratory outbreak. Both have been lifted as of Monday, 10/12/15</p> <p>There was 1 catheter associated infection in August</p> |  |
| <p>New Business</p> | <p><b>MERP Plan - Sherry Wilson</b> - See above</p> <p><b>Organizational Analysis - Sherry Wilson</b> - Organizational Analysis is a neat presentation from each department manager covering quality, financial metrics, accomplishments and goals for the next year. The process has begun and is due November 15, 2015.</p> <p><b>CAH Annual Evaluation - Sherry Wilson</b> - Will be included with the Organizational analysis. It is a review of Numbers</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |

**MAYERS MEMORIAL HOSPITAL DISTRICT  
 QUALITY COMMITTEE MEETING  
 MINUTES – OCTOBER 13 2015**

|                           |                                                                                                                                                                                                                                                                                                                                                                                            |  |
|---------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
|                           | <p><b>Quality Committee Structure with Med Staff - Pam Sweet</b> - Because the Chief of Staff is so rarely available for this Quality meeting, it was proposed that the Medical Staff Quality Committee be reinstated. Sherry Wilson will research the viability and feasibility and work with Sweet.</p> <p>September Meeting - October 10th at 12 Noon - Fall River Mills Board Room</p> |  |
| Closed Session            | Board Member Vasquez announced closed session at 1:06 pm                                                                                                                                                                                                                                                                                                                                   |  |
| Reconvene to Open Session | <p>The meeting was reconvened to open session and reported the following action:</p> <p>Credentials - (Vasquez) Approved medical staff reappointments moved to the full Board.</p>                                                                                                                                                                                                         |  |
| Adjournment               | Meeting adjourned 1:50 pm                                                                                                                                                                                                                                                                                                                                                                  |  |

Minutes By: Pam Sweet

DRAFT