

Chief Executive Officer
Louis Ward, MHA



Mayers Memorial Hospital District

Board of Directors

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Abe Hathaway, Secretary
Allen Albaugh, Treasurer
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Board of Directors
Quality Committee
FINAL Minutes

July 11, 2018 - 12:00pm
Boardroom (Fall River Mills)

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:** Board Chair Beatriz Vasquez called the meeting to order at 12:00pm on the above date.

BOARD MEMBERS PRESENT:

Beatriz Vasquez, Vice President
Laura Beyer, Director via phone

ABSENT:

STAFF PRESENT:

Louis Ward, CEO
Jack Hathaway, DOQ
Diana Groendyck
Candy Vculek
Libby Mee
Alex Johnson
Theresa Overton
Val Lakey
Keith Earnest
Travis Lakey
Jessica Stadem, Board Clerk

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- 2 **CALL FOR REQUEST FROM THE AUDIENCE – PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS**

None

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- 3 **APPROVAL OF MINUTES**

3.1 A motion/second carried; committee members accepted the minutes of June 6, 2018. Beyer/Harris **Approved All**

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- 4 **DEPARTMENT REPORTS**

- 4.1 **Maintenance:** In addition to written report. Alex Johnson started in January, now Manager since Dave has retired; reviewed projects completed since began working; created Engineering sub-department, they will handle all off-site building projects (laundry, staff housing); currently 2 staff in Engineering, 6 in Maintenance, will hire at least 1 more, also hire groundskeeper for summer; department moves (Outpatient and Telemed to old surgery space, surgery recovery now closer to OR, old nursery is now surgery office), a lot of office moving; will be installing fencing and access control on doors soon in Burney; Maintenance department received new uniforms (hats, shirts).
- 4.2 **Personnel:** In addition to written report. EverCheck tracking service for nursing licenses, DMV, BLS, ACLS, etc., notification system to remind staff and managers of upcoming expirations; Soft Skills training recently, 22 employees attended, verbal and non-verbal communication, compassion, will do more trainings during the year; HR committee meeting (Modoc, Seneca, Plumas), good platform to discuss HR issues and gain resources, compared benefit packages, evaluation process, staff housing; Code Lavender, program for staff to address compassion fatigue, on the job stress or personal issues.

5 **QUARTERLY REPORTS**

- 5.1 **Safety Committee:** Written report provided. IPG update, having meetings every other month, tabletop drill recently; MCI training, poorly attended but great training; FRAME training, normally held in Alabama, will be in Red Bluff; Val speaking at Disaster Conference in September; Safety Committee is well attended and participation and programs are growing, working on fire safety plan, mental health crisis training for staff; have done some publicity on IPG to community.
- 5.2 **Worker's Comp:** In addition to written report. No patient related first aid injuries, no trends; used BETA care funds to purchase emergency and first aid kits for vehicles, binders to hold important information and policies; special training for maintenance staff regarding security issues, de-escalation training.
- 5.3 **Blood Transfusion:** 6 transfusions in last quarter, all met criteria (proper order placed, consent, documentation by nursing), Acute and ER; discussed process of how transfusions are received from clinic, continue trying to teach clinic proper procedure.

6 **STANDING MONTHLY REPORTS**

- 6.1 **Quality/Performance Improvement:** Music and Memory program wrapped up in June, able to keep all equipment, not sure how equipment has been kept track of, program has worked great, will continue; ED transfer study, average response time for transfers out of Emergency Department; looking at new QAPI metrics such as imaging, may help improve numbers for star rating; switched HCAHPS to new company, only doing mail surveys now, 38% return is average; new BETA litigation rep, lots of free services available; job posted for Quality RN nurse, assists with data collection, chart review, implementation of Quality processes.
- 6.2 **PRIME:** Meet with Val and Susan soon, implemented criteria, no more requirements on numbers, only need to implement criteria, program doing well, \$225k received first payment.
- 6.3 **SNF Events/Survey:** Continue working forward on compliance for next survey, doing GAP analysis, education for staff, chart auditing, educating charge nurses on how to help staff minimize errors.
- 6.4 **Infection Control:** implementing Mcgeers criteria, educating staff (in-service training and test), process of documenting and observing patient before contacting doctor.

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- 7 **ADMINISTRATIVE REPORT:** May employee of the month was awarded to SNF, all staff involved in survey were given 8 hours of PTO; provided handout of scorecard goals, will be starting scorecard process for FY19; new boardroom table installed, finishing touches still needed, will be installing smartboard; August 15 & 16 employee meetings (building update, cost of living raise, goals), opportunity for staff to voice ideas; ER committee created, discuss issues in ER, this team will be involved in licensing of new ER building; telemedicine, new pediatric cart received, can be used for other services, will be making presentation at regular board meeting, do have new psychiatrist, will have services again by August; purchased imaging digitizer, will digitize all current radiology films, need to keep records for 10 years; cost of living increase starting FY19 on employee anniversary date, will keep up with minimum wage requirements; Hospital Council conference, presenting "Planting Seeds, Growing Our Own", in September; every other week surgery schedule going for about 7 months now, able to provide for same volumes; looking for registered dietician on interim basis, restructure processes, staffing issues, working with Susan and Lani; had to move entire building plan 4 inches to the west because of small error in plan, cost is one day but will make it up, steel will starting going up mid-September, will be working on article for newspaper explaining difference in building between us and new clinic.

8 **NEW BUSINESS**

No new business.

9 **OTHER INFORMATION/ANNOUNCEMENTS**

No announcements.

Public records which relate to any of the matters on this agenda (except Closed Session items), and which have been distributed to the members of the Board, are available for public inspection at the office of the Clerk to the Board of Directors, 43563 Highway 299 East, Fall River Mills CA 96028. This document and other Board of Directors documents are available online at www.mayersmemorial.com.

10 **ANNOUNCEMENT OF CLOSED SESSION** – 1:38pm

10.1 **Government Code Section 54962:**

Chief of Staff Report (Health & Safety Code §32155) Dr. Tom Watson, Chief of Staff Report

Reappointments:

Ben Nuti, CRNA

Darla Schmunk, FNP

New appointment:

Robert Boldy, MD

11 **RECONVENE OPEN SESSION** – 1:45pm

Committee approved the reappointments of Ben Nuti, CRNA and Darla Schmunk, FNP.

Committee did not approve the new appointment of Robert Boldy, MD.

12 **ADJOURNMENT:** 1:49pm

Next Regular Meeting – August 15, 2018 (Fall River Mills)
