

Chief Executive Officer  
Louis Ward, MHA



Mayers Memorial Hospital District

**Board of Directors**  
Beatriz Vasquez, PhD, President  
Abe Hathaway, Vice President  
Laura Beyer, Secretary  
Allen Albaugh, Treasurer  
Jeanne Utterback, Director

Board of Directors  
**Regular Meeting Agenda**  
June 24, 2020 1:00 pm

**Due to COVID-19 shelter in place orders and under the authority of the Governor's Executive Order N-29-20, this meeting will be conducted entirely by teleconference. No physical location will be available. Members of the public can attend and provide public comment via teleconference at the following link and number:**

Zoom Meeting: [LINK](#)

Zoom Call In Number: 1 669 900 9128, Meeting ID: 967 7708 6359

**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.

In observance of the Americans with Disabilities Act, please notify us at 530-336-5511, ext 1264 at least 48 hours in advance of the meeting so that we may provide the agenda in alternative formats or make disability-related modifications and accommodations. The District will make every attempt to accommodate your request.

				<b>Approx. Time Allotted</b>
<b>1</b>	<b>CALL MEETING TO ORDER</b>			
<b>2</b>	<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, 43563 Highway 299 East, Fall River Mills, or in the Boardroom). 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. Comments should be limited to matters within the jurisdiction of the Board. Pursuant to the Brown Act (Govt. Code section 54950 et seq.) action or Board discussion cannot be taken 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.			
<b>3</b>	<b>APPROVAL OF MINUTES</b>			
	3.1 Regular Meeting – May 27, 2020	<b>Attachment A</b>	<b>Action Item</b>	2 min.
<b>4</b>	<b>DEPARTMENT/QUARTERLY REPORTS/RECOGNITIONS: NO DEPARTMENT REPORTS</b>			
	4.1 Resolution 2020-10 – May Employee of the Month	<b>Attachment B</b>	<b>Action Item</b>	5 min.
<b>5</b>	<b>BOARD COMMITTEES</b>			
	<b>5.1 Finance Committee</b>			
	5.1.1 June 17 <sup>th</sup> Finance Committee Meeting – DRAFT Minutes Attached	<b>Attachment C</b>	Report	5 min.
	<b>** May &amp; June 2020 Financials will be presented and approved on July 29<sup>th</sup> Regular Board Meeting.</b>			
	5.1.2 Resolution 2020-11: California Health Facilities Financing Authority (CHFFA) Authorizing Execution and Delivery of Loan and Security Agreement	<b>Attachment D</b>	<b>Action Item</b>	5 min.
	5.1.3 Annual Budget Hearing: 2021 Budget Approval	<b>Attachment E</b>		
	Resolution 2020-12: Recommendation of Approval of the FY21 MMHD Operating Budget	<b>Attachment F</b>	<b>Action Item</b>	10 min.
	<b>** To get back on quarterly reporting schedules, Board Quarterly Finance Review will be presented at July's Finance Committee Meeting.</b>			
	<b>5.2 Strategic Planning Committee</b>			
	5.2.1 No June Meeting			
	<b>5.3 Quality Committee</b>			
	5.3.1 June 10 <sup>th</sup> Meeting Report – DRAFT Minutes Attached	<b>Attachment G</b>	Report	5 min.

6	<b>OLD BUSINESS</b>			
6.1	Social Media & Board Messaging from Board Member		Discussion	5 min.
7	<b>NEW BUSINESS</b>			
7.1	Policy & Procedure Approval: No Policies or Procedures to approve			
7.2	Notice on Fall River Mills Fire Protection District & McArthur Fire Protection District Reorganization: Proposed tax exchange	<b>Attachment H</b>	Information	5 min.
7.3	LAFCO UPDATES: ELECTIONS & BUDGET	<b>Attachment I</b>	Information	5 min.
7.4	Appoint Ad Hoc Committee for CEO Evaluation		<b>Appoint By Chair</b>	5 min.
8	<b>ADMINISTRATIVE REPORTS</b>			
8.1	Chief's Reports – <b>Written reports provided. Questions pertaining to written report and verbal report of any new items</b>	<b>Attachment J</b>	Reports	
8.1.1	CCO – Keith Earnest		Report	10 min.
8.1.2	CNO – Candy Vculek		Report	5 min.
8.1.3	COO – Ryan Harris		Report	5 min.
8.1.4	CEO – Louis Ward		Report	5 min.
8.2	ED of Community Relations & Business Development – Val Lakey	<b>Attachment K</b>	Report	5 min.
8.3	Construction Change Orders – None			
9	<b>OTHER INFORMATION/ANNOUNCEMENTS</b>		Information	
10	<b>ANNOUNCEMENT OF CLOSED SESSION</b>			
10.1	<b>Real Property Government Code 54956.8:</b> APN 028-340-025 Property Negotiations			
10.2	<b>Government Section Code 54962:</b> Medical Staff Credentials <b>STAFF STATUS CHANGE</b> Tommy Saborido, MD – add Family Medicine/Move to Active Karuna Sharma, MD – Move to Inactive Steven Brown, CRNA – Move to Inactive <b>AHP REAPPOINTMENT</b> Ben Nuti, CRNA - Reappointment <b>MEDICAL STAFF REAPPOINTMENT</b> Robin Rasmussen, MD – Wound Care Todd Guthrie, MD – Orthopedic Surgery <b>MEDICAL STAFF APPOINTMENT</b> Gary Belaga, MD – Neurology – Telemedicine Andrew Lin, DO – Neurology - Telemedicine Joseph Trudeau, MD – Radiology – Telemedicine Frederick Jones, MD – Radiology – Telemedicine Suzanne Aquino, MD – Radiology – Telemedicine David Bass, MD – Radiology – Telemedicine Dennis Burton, MD – Radiology – Telemedicine			
11	<b>RECONVENE OPEN SESSION</b> – Report Closed Session Action		Information	
12	ADJOURNMENT: Next Regular Meeting – July 29 <sup>th</sup> , 2020			

Posted 06/19/2020

Chief Executive Officer  
Louis Ward, MHA



**Mayers Memorial Hospital District**

**Board of Directors**  
Beatriz Vasquez, PhD, President  
Abe Hathaway, Vice President  
Laura Beyer, Secretary  
Allen Albaugh, Treasurer  
Jeanne Utterback, Director

Board of Directors  
**Regular Meeting**  
**Minutes**

May 27, 2020 – 1:00 pm  
Teleconference Call – FULLY Remote

*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:** Beatriz Vasquez called the regular meeting to order at 1:01 pm on the above date.

**BOARD MEMBERS PRESENT:**

Beatriz Vasquez, President  
Abe Hathaway, Vice President  
Laura Beyer, Secretary  
Allen Albaugh, Treasurer  
Jeanne Utterback

**STAFF PRESENT:**

Louis Ward, CEO  
Ryan Harris, COO  
Keith Earnest, CCO  
Travis Lakey, CFO  
Candy Vculek, CNO  
Jessica DeCoito, Board Clerk

**ABSENT:**

**2 CALL FOR REQUEST FROM THE AUDIENCE - PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS: NONE**

**3 APPROVAL OF MINUTES**

3.1 A motion/second carried; Board of Directors accepted the minutes of April 22, 2020. *Albaugh/Utterback* *Beyer – Y*  
*Albaugh – Y*  
*Hathaway – Y*  
*Utterback – Y*  
*Vasquez – Y*

**4 DEPARTMENT/OPERATIONS REPORTS/RECOGNITIONS**

4.1 A motion/second carried; Vicki Moran de la Torre was recognized as April Employee of the Month. Resolution 2020-08 *Hathaway/Utterback* *Beyer – Y*  
*Albaugh – Y*  
*Hathaway – Y*  
*Utterback – Y*  
*Vasquez – Y*

4.2 Mayers Healthcare Foundation Quarterly Report- Marlene McArthur: written report submitted. Thrift Store volunteers are meeting up and discussing the opening up and what the rules are. Gift Shop at Pharmacy is open. Virtual Store is being created. 11 scholarships will be given out. A new website is being created for the Foundation. Anonymous Donor has given support to the new CNA classes being set up and starting in August. Golf Tournament is potentially not going to happen, but researching ideas for the fall. Health Fair options are being discussed to still provide our community with this service. Fundraising is at a standstill.

**5 BOARD COMMITTEES**

**5.1 Finance Committee**

5.1.1 **Committee Meeting Report:** CARES Funding was discussed. Retail Pharmacy accounting and supplies needs to be addressed.

5.1.2 **April 2020** Financial Review, AP, AR and acceptance of financials. *Hathaway/Utterback* *Beyer – Y*  
*Albaugh – Y*  
*Hathaway – Y*  
*Utterback – Y*  
*Vasquez – Y*

5.1.3 Cornerstone Bank Account: Recommendation from Finance Committee to full Board for approval to open an account. Need to separate the USDA loan from CHFFA Loan. *Hathaway/Albaugh* *Beyer – Y*  
*Albaugh - Y*  
*Hathaway – Y*  
*Utterback – Y*  
*Vasquez - Y*

5.2 **Strategic Planning Committee Chair Albaugh**

5.2.1 **Committee Meeting Report** – DRAFT minutes included in packet. SP Committee should be updated as to what’s happening now but also projecting the SP plan. With COVID-19, the future could look very different for the hospital. We need to start thinking about where this could take us and how we can prepare the hospital, strategic plan, etc for that future. Board Clerk to add to next SP Meeting Agenda.

5.3 **Quality Committee Chair Beyer**

5.3.1 **Committee Meeting Report** – DRAFT Minutes attached in Packet. No additional comments or questions.

**6 NEW BUSINESS**

6.1 **Policy & Procedure Approval** *Albaugh/Hathaway* *Beyer – Y*  
 1. Exclusions Screening Policy *Albaugh - Y*  
 2. Medication Administration in a Public Setting MMH672 *Hathaway – Y*  
 3. Reporting of Overpayments *Utterback – Y*  
*Vasquez - Y*

6.2 **Board Member Messaging:** attached write up provided by Director Beyer. Hesitations with social media were expressed. Conversations with Intermountain News for helping be the avenue for Mayers to share anything needs to continue to happen. Importance with being active in the social media posting was discussed. Directors and staff to research how other boards are handling social media posts and report back for a discussion at the next meeting.

6.3 **June & July Board Meeting Dates:** June will be the 24<sup>th</sup> – no change of date – we will not have financials to approve for June, those will be pushed to July for approval. July Finance and Board Meeting will be on July 29<sup>th</sup>.

6.4 **Board Member Elections: Resolution Calling for Election & Specification of the Election Order 2020-09. Approved** *Beyer/Utterback* *Beyer – Y*  
*Albaugh - Y*  
*Hathaway – Y*  
*Utterback – Y*  
*Vasquez - Y*

**7 ADMINISTRATIVE REPORTS**

7.1 **Chief’s Reports: written reports submitted.**

7.1.1 **CEO:** testing going on with COVID-19 everywhere. We have ordered antibody and antigen tests and our shipping date keeps getting pushed out. SNF Mitigation Plan was created and submitted to CDPH. Calls with other CEO’s have lessened. A lot of work being done on “How to Run My Hospital” Bill. Discussion about June & July Board Meetings being via in person or Zoom. Discussions with School Superintendent with how MMHD can help with the schools plans for masks, gloves, etc. Conversations will continue as the situation develops.

7.1.2 **CCO:** Retail Pharmacy is open for in person visits and following all COVID-19 measures. Flu shots have been pre-ordered and a plan is being put together for offsite clinics and staff will get through pharmacy in hospital.

7.1.3 **CFO:** working on the Chagemaster, CARES Act Payments, etc. We are tracking all COVID-19 expenses.

7.1.4 **CNO:** Staffing is almost full with just a few openings. COVID-19 Management Plan for Skilled Nursing Facility was required to be submitted. Five different components to the plan and much detail was added to the plan. Mandatory COVID-19 testing has come out of this plan – 100% employees and residents will be tested. The plan includes infection prevention, isolation areas, patient to employee interaction, PPE supplies, etc. Residents are experiencing some depression while in isolation but staff are doing everything they can – new activities, Zoom meetings, and window visits.

7.1.5 **COO:** NHW is getting closed to finishing up. July 7<sup>th</sup> is the targeted date for completion, and then we will work on licensure to occupy the building. Burney Clinic demo has begun. We have seen some unforeseen issues – as building drawings aren’t accurate to what has been found. But good progress is being made. Admin Bldg is coming along with completion by July 1<sup>st</sup>. Laundry facility is complete gutted and progress is being made. Grand Opening may not happen with NHW Open House because of COVID-19, but we are continuing to work on this and will update at June Board Meeting.

7.2 ED of Community Relations and Business Development: written report submitted. District Recertification was completed and submitted – has to be done every 3 years. EP: noted that working in the EOC (Emergency Operations Center) was very beneficial for our small hospital. All 5 hospitals worked together to create a document for resurgence plan. Director Vasquez provided a thank you to Val for all her work and efforts.

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7.3 **Construction Change Orders:** none

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8 **OTHER INFORMATION/ANNOUNCEMENTS:** ACHD ANNUAL MEETING WAS CANCELLED AND THE EDUCATION COMMITTEE IS LOOKING INTO OTHER AVENUES FOR EDUCATION. DIRECTOR UTTERBACK GAVE KUDOS TO ALL STAFF FOR ALL THE HARD WORK GIVEN ALL THE CURRENT COVID-19 CIRCUMSTANCES – SENTIMENT ECHOED BY ALL DIRECTOR AND CEO.

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9 **ANNOUNCEMENT OF CLOSED SESSION** – 2:59 pm

.2 **Real Property Government Code 54956.8:** Potential property purchase with new services offered: No actions to report.

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11 **RECONVENE OPEN SESSION: 3:19 pm**

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12 **ADJOURNMENT: 3:19pm**

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Next Regular Meeting: June 24, 2020

*I, \_\_\_\_\_, Board of Directors \_\_\_\_\_, certify that the above is a true and correct transcript from the minutes of the regular meeting of the Board of Directors of Mayers Memorial Hospital District*

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Board Member

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Board Clerk



**Mayers Memorial Hospital District**  
*Always Caring. Always Here.*

**RESOLUTION NO. 2020-10**

**A RESOLUTION OF THE BOARD OF TRUSTEES  
OF MAYERS MEMORIAL HOSPITAL DISTRICT RECOGNIZING**

**Jennifer Marks-Colledge**

**As May 2020 EMPLOYEE OF THE MONTH**

**WHEREAS**, the Board of Trustees has adopted the MMHD Employee Recognition Program to identify exceptional employees who deserve to be recognized and honored for their contribution to MMHD; and

**WHEREAS**, such recognition is given to the employee meeting the criteria of the program, namely exceptional customer service, professionalism, high ethical standards, initiative, innovation, teamwork, productivity, and service as a role model for other employees; and

**WHEREAS**, the MMHD Employee Recognition Committee has considered all nominations for the MMHD Employee Recognition Program;

**NOW, THEREFORE, BE IT RESOLVED** that, Jennifer Marks-Colledge is hereby named Mayers Memorial Hospital District Employee of the Month for May 2020; and

**DULY PASSED AND ADOPTED** this 24th day of June 2020 by the Board of Trustees of Mayers Memorial Hospital District by the following vote:

- AYES:
- NOES:
- ABSENT:
- ABSTAIN:

\_\_\_\_\_  
Beatriz Vasquez, President  
Board of Trustees, Mayers Memorial Hospital District

ATTEST:

\_\_\_\_\_  
Jessica DeCoito  
Clerk of the Board of Directors

Chief Executive Officer  
Louis Ward, MHA



**Mayers Memorial Hospital District**

**Board of Directors**  
Beatriz Vasquez, PhD, President  
Abe Hathaway, Vice President  
Laura Beyer, Secretary  
Allen Albaugh, Treasurer  
Jeanne Utterback, Director

Board of Directors  
**Finance Committee**  
**Minutes**

June 17, 2020 – 10:00 am  
Teleconference Call – FULLY Remote

*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	<b>CALL MEETING TO ORDER:</b> Abe Hathaway called the meeting to order at 10:01 am on the above date.		
	<b>BOARD MEMBERS PRESENT:</b>		<b>STAFF PRESENT:</b>
	Abe Hathaway, Committee Chair Allen Albaugh, Board Member		Candy Vculek, CNO Ryan Harris, COO Louis Ward, CEO Jessica DeCoito, Board Clerk
	<b>ABSENT:</b> Travis Lakey, CFO		
2	<b>CALL FOR REQUEST FROM THE AUDIENCE – PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS</b>		
	None		
3	<b>APPROVAL OF MINUTES</b>		
	3.1	A motion/second carried; committee members accepted the minutes of May 27, 2020	<i>Albaugh, Hathaway</i> All Approved Albaugh – Y Hathaway - Y
4	<b>DEPARTMENT REPORTS: No reports for the month of June</b>		
5	<b>FINANCIAL REVIEWS</b>		
	5.1	<b>2021 Budget Review:</b> COVID-19 really took a hit to our budget last year. So preparing how it could potentially hit us throughout this next year has been taken into account. With all things considered, we should have a positive FY21 if things stay on track. An over budgeted amount on Travelers was placed in the budget but we hope to see that number not realized with more staff hired on and the need for travelers not there. Increase in salaries is shown for the clinic onboarding of staff and change in per hour wages. Please note that Non-Operating Revenue is the CARES Fund that we have in our LAIF Account.  <b>Recommendation from Finance Committee to Regular Full Board for approval of the FY21 Budget.</b>	<i>Albaugh, Hathaway</i> All Approved Albaugh – Y Hathaway - Y
6	<b>ADMINISTRATIVE REPORT</b> – Burney Health Clinic is moving along very well. The whole construction team has been so great to work with. Inspections are passing with no problems. We continue to work on Retail Pharmacy reports and the 340B reporting and management. COVID-19 testing has begun with staff members here. Daycare is at a standstill with zoning and use permit for the building. Admin & Finance Bldg finish work is taking place now with a move in date for early July. PT & Cardiac Rehab Bldg plans will begin around October. Conversations with Dr. Grant, FRJUSD Superintendent, have occurred to help plan for a safe school year – partnering the schools and Mayers Memorial Hospital to provide a safe environment.		
7	<b>OTHER INFORMATION/ANNOUNCEMENTS: no announcement</b>		
8	<b>ADJOURNMENT – 10:39 AM</b>		
	Next Finance Committee Meeting: July 29, 2020		



**Mayers Memorial Hospital District**  
*Always Caring. Always Here.*

**RESOLUTION NO. 2020-11**

**A RESOLUTION OF THE BOARD OF TRUSTEES  
 OF MAYERS MEMORIAL HOSPITAL DISTRICT AUTHORIZING EXECUTION AND DELIVERY  
 OF A LOAN AND SECURITY AGREEMENT, PROMISSORY NOTE, AND CERTAIN ACTIONS IN  
 CONNECTION THEREWITH FOR THE CALIFORNIA HEALTH FACILITIES FINANCING  
 AUTHORITY HELP II LOAN PROGRAM**

**THE HELP II LOAN PROGRAM**

**WHEREAS, Mayers Memorial Hospital District** (the “Borrower”) has determined that it is in its best interest to borrow an aggregate amount not to exceed **\$1,500,000.00** from the California Health Facilities Financing Authority (the “Lender”), such loan to be funded with the proceeds of the Lender’s HELP II Loan Program; and

**WHEREAS, the Borrower** intends to use the funds for the following project: **Renovation of the rural health clinic located in Burney, California;**

**NOW, THEREFORE, IT IS RESOLVED** by the Board of Directors of the Borrower as follows:

Section 1. **Louis Ward, Chief Executive Officer** (an “Authorized Officer”) is hereby authorized and directed, for and on behalf of the Borrower, to do any and all things and to execute and deliver any and all documents that the Authorized Officer deems necessary or advisable in order to consummate the borrowing of moneys from the Lender and otherwise to effectuate the purposes of this Resolution and the transactions contemplated hereby.

Section 2. The proposed form of Loan and Security Agreement (the “Agreement”) dated as of **June 1, 2020** which contains the terms of the loan is hereby approved. The loan shall be in a principal amount not to exceed **\$1,500,000.00** and the loan shall bear interest at a rate of 2% per annum until **August 1, 2040** (the “Maturity Date”). The Authorized Officer is hereby authorized and directed, for and on behalf of the Borrower, to execute the Agreement in substantially said form that includes the Assignment of Anticipated Ad Valorem Operating Tax Assessment Collections in the event of default, with such changes therein as the Authorized Officer may require or approve, such approval to be conclusively evidenced by the execution and delivery thereof.

Section 3. The proposed form of Promissory Note (the “Note”) dated as of **June 1, 2020**, as evidence of the Borrower’s obligation to repay the loan is hereby approved. The Authorized Office is hereby authorized and directed, for an on behalf of the Borrower, to execute the Note in substantially said form, with such changes therein as the Authorized Officer may require or approve, such approval to be conclusively evidenced by the execution and delivery thereof.

Section 4. The proposed form of Environmental Compliance Certificate dated as of **June 1, 2020** certifying for the benefit of the Lender to the best knowledge of Borrower with regard to any violations of or claims regarding environmental laws or conditions, is approved.



The Authorized Officer is hereby authorized and directed, for and on behalf of the Borrower, to execute the Environmental Compliance Certificate in substantially said form, with such changes therein as the Authorized Officer may require or approve, such approval to be conclusively evidenced by the execution and delivery thereof.

Date of Adoption: \_\_\_\_\_

AYES:  
NOES:  
ABSENT:  
ABSTAIN:

\_\_\_\_\_  
Beatriz Vasquez, President  
Board of Trustees, Mayers Memorial Hospital District

ATTEST:

\_\_\_\_\_  
Jessica DeCoito  
Clerk of the Board of Directors

**MAYERS MEMORIAL HOSPITAL  
OPERATING BUDGET**

	<u>ACTUAL</u> <u>YTD APRIL 20</u>	<u>PROJ ACTUAL</u> <u>FYE 2020</u>	<u>BUDGET</u> <u>FYE 2021</u>	<u>INCREASE</u>	<u>INCREASE</u> <u>%</u>
<b>REVENUE:</b>					
IP Nursing Service					
Medical/Surgical	\$ 3,591,324	4,309,589	4,568,164	258,575	6.00%
Skilled Nursing	9,812,517	11,775,021	11,787,603	12,583	0.11%
Ancillary Services					
Inpatient	2,055,729	2,466,875	2,569,554	102,679	4.16%
OP Services	17,774,439	21,329,327	22,409,702	1,080,375	5.07%
Total Patient Revenue	33,239,813	39,887,142	41,335,023	1,447,881	3.63%
<b>DEDUCTIONS FROM REVENUE:</b>					
Contractual - Medicare/Medi-Cal	2,901,674	3,482,009	5,976,349	2,494,341	71.64%
Contractual - PPO	1,147,563	1,377,075	1,429,312	52,237	3.79%
Charity and Other Allowances	619,717	743,660	805,124	61,464	8.27%
Provision For Bad Debts	522,766	627,319	721,416	94,098	15.00%
Total Deductions	5,191,719	6,230,063	8,932,202	2,702,139	43.37%
Net Patient Revenues	28,048,094	33,657,079	32,402,822	(1,254,258)	-3.73%
<b>OTHER OPERATING REVENUE:</b>	435,936	475,566	452,336	(23,230)	-4.88%
Net Revenue	28,484,029	34,132,646	32,855,157	(1,277,488)	-3.74%
<b>OPERATING EXPENSES:</b>					
Productive Salaries	8,914,510	10,697,412	11,366,037	668,625	6.25%
Non-Productive Salaries	1,080,080	1,296,096	1,356,408	60,312	4.65%
Employee Benefits	2,505,793	3,006,952	3,286,597	279,645	9.30%
Supplies	2,518,308	3,021,969	3,160,939	138,970	4.60%
Professional Fees	1,466,339	1,759,607	1,829,991	70,384	4.00%
Acute/Swing Purch Serv	477,303	572,764	572,764	0	0.00%
SNF Purch Serv	1,825,040	2,190,048	2,277,650	87,602	4.00%
Ancillary Purch Serv	997,725	1,197,270	1,223,201	25,931	2.17%
Other Purch Serv	1,465,685	1,758,822	1,602,574	(156,248)	-8.88%
Repairs	239,571	287,486	302,521	15,035	5.23%
Utilities	545,308	654,370	684,700	30,330	4.63%
Insurance	235,252	282,302	289,395	7,093	2.51%
Other	541,072	649,286	707,525	58,238	8.97%
Depreciation	760,218	912,262	2,027,746	1,115,484	122.28%
Bond Repayment Insurance	0	0	0	0	#DIV/0!
Bond Repayment Interest	179,108	214,930	683,410	468,480	217.97%
Interest	23,283	27,940	28,875	935	3.35%
Rental & Leases	34,384	41,261	42,692	1,432	3.47%
Total Operating Expenses	23,808,980	28,570,776	31,443,025	2,872,249	10.05%
Net Operating Revenue (Loss)	4,675,049	5,561,870	1,412,132	(4,149,737)	-74.61%

NONOPERATING REVENUES AND EXPENSE:					
District and County taxes	897,850	979,472	1,150,750	171,278	17.49%
Interest Income	134,118	146,311	160,942	14,631	10.00%
Other Non-operating expense/rev	2,087,168	2,276,911	410,624	(1,866,287)	-81.97%
Total Nonoperating Revenue	<u>3,119,136</u>	<u>3,402,693</u>	<u>1,722,316</u>	<u>(1,680,378)</u>	-49.38%
NET EXCESS OF REVENUE	<u><u>7,794,185</u></u>	<u><u>8,964,563</u></u>	<u><u>3,134,448</u></u>	<u><u>(5,830,115)</u></u>	<u><u>-65.04%</u></u>

**MAYERS MEMORIAL HOSPITAL  
OPERATING BUDGET**

	ACTUAL	PROJ ACTUAL	BUDGET		INCREASE	Notes
	YTD APRIL 20	FYE 2020	FYE 2021	INCREASE	%	
<b>REVENUE:</b>						
IP Nursing Service						
Medical/Surgical	\$ 3,591,324	4,309,589	4,568,164	258,575	6.00%	An increase over this year as the last few months have been low due to COVID
Skilled Nursing	9,812,517	11,775,021	11,787,603	12,583	0.11%	A slight increase as it should be easier to admit in the future and we've had a good year in the SNF
Ancillary Services						
Inpatient	2,055,729	2,466,875	2,569,554	102,679	4.16%	An increase over this year as the last few months have been low due to COVID
OP Services	17,774,439	21,329,327	22,409,702	1,080,375	5.07%	Expect to get more outpatient referrals when our own clinic opens. The increase is much lower than it would be in typical years as I dialed it back to account for a slow ramp up back towards normal from Covid
Total Patient Revenue	33,239,813	39,887,142	41,335,023	1,447,881	3.63%	
<b>DEDUCTIONS FROM REVENUE:</b>						
Contractual - Medicare/Medi-Cal	2,901,674	3,482,009	5,976,349	2,494,341	71.64%	I expect an increase as the supplemental payments that offset this number will be lower in 2021. We won't receive the OP and DPNF Supplementals from Partnership next year and QAF is slightly down.
Contractual - PPO	1,147,563	1,377,075	1,429,312	52,237	3.79%	
Charity and Other Allowances	619,717	743,660	805,124	61,464	8.27%	With more people unemployed I expect Charity to increase
Provision For Bad Debts	522,766	627,319	721,416	94,098	15.00%	AR may increase with more patients being self insured
Total Deductions	5,191,719	6,230,063	8,932,202	2,702,139	43.37%	
Net Patient Revenues	28,048,094	33,657,079	32,402,822	(1,254,258)	-3.73%	Net Patient Revenue decreases due to the drop in Supplemental Payments
<b>OTHER OPERATING REVENUE:</b>						
Net Revenue	435,936	475,566	452,336	(23,230)	-4.88%	Forecasting a drop in Cafeteria Revenue
Net Revenue	28,484,029	34,132,646	32,855,157	(1,277,488)	-3.74%	Net Patient Revenue decreases due to the drop in Supplemental Payments
<b>OPERATING EXPENSES:</b>						
Productive Salaries	8,914,510	10,697,412	11,366,037	668,625	6.25%	Increase due to minimum wage changes and adding clinic employees
Non-Productive Salaries	1,080,080	1,296,096	1,356,408	60,312	4.65%	Increase due to minimum wage changes and adding clinic employees
Employee Benefits	2,505,793	3,006,952	3,286,597	279,645	9.30%	Expected premium increase plus more employees
Supplies	2,518,308	3,021,969	3,160,939	138,970	4.60%	Based off of historical averages
Professional Fees	1,466,339	1,759,607	1,829,991	70,384	4.00%	
Acute/Swing Purch Serv	477,303	572,764	572,764	0	0.00%	Historically all over the board and decreased last year from the prior year. I'm forecasting it to be static next year with current staffing levels
SNF Purch Serv	1,825,040	2,190,048	2,277,650	87,602	4.00%	Hasn't decreased since 2015 and is projected to be up 6% this year. With the new C.N.A class I'm projecting a smaller increase
Ancillary Purch Serv	997,725	1,197,270	1,223,201	25,931	2.17%	With Respiratory fully staffed I'm only expecting a small increase next year.
Other Purch Serv	1,465,685	1,758,822	1,602,574	(156,248)	-8.88%	The current year was higher than normal with software consulting costs so I expect this to be lower next year
Repairs	239,571	287,486	302,521	15,035	5.23%	Based off of historical averages
Utilities	545,308	654,370	684,700	30,330	4.63%	I expect higher utilities with bringing the new site online and still using the original building next year
Insurance	235,252	282,302	289,395	7,093	2.51%	Based off what I've seen of renewal rates so far
Other	541,072	649,286	707,525	58,238	8.97%	Ever increasing bed fees from CDPH and some increases for employee training
Depreciation	760,218	912,262	2,027,746	1,115,484	122.28%	This is based off finishing the ER Expansion, Clinic Building and other projects this year
Bond Repayment Insurance	0	0	0	0	#DIV/0!	
Bond Repayment Interest	179,108	214,930	683,410	468,480	217.97%	Based off of USDA and CHFFA debt schedules
Interest	23,283	27,940	28,875	935	3.35%	Based off this year's numbers with a slight growth factor
Rental & Leases	34,384	41,261	42,692	1,432	3.47%	Based off this year's numbers with a slight growth factor
Total Operating Expenses	23,808,980	28,570,776	31,443,025	2,872,249	10.05%	Most of the increase is based off salaries and depreciation
Net Operating Revenue (Loss)	4,675,049	5,561,870	1,412,132	(4,149,737)	-74.61%	Still expecting a gain in Operations which prior to the last 5 years was a rarity
<b>NONOPERATING REVENUES AND EXPENSE:</b>						
District and County taxes	897,850	979,472	1,150,750	171,278	17.49%	Based off of historical averages and GO Bond debt schedule
Interest Income	134,118	146,311	160,942	14,631	10.00%	Assuming a higher balance in our Local Agency Investment Fund
Other Non-operating expense/rev	2,087,168	2,276,911	410,624	(1,866,287)	-81.97%	Grants will be down significantly due to the hospital project being completed and I'm excluding CARES Act Funds as there hasn't been solid guidance on how to account for it. Also there's only half a year of Prime Funding this year. This number also includes a small gain on the Retail Pharmacy.
Total Nonoperating Revenue	3,119,136	3,402,693	1,722,316	(1,680,378)	-49.38%	
<b>NET EXCESS OF REVENUE</b>	<b>7,794,185</b>	<b>8,964,563</b>	<b>3,134,448</b>	<b>(5,830,115)</b>	<b>-65.04%</b>	This is a very conservative estimate in uncertain market conditions. Historically we always present the budget compared to the current year extrapolated. There are some outliers that make this year unique with the CARES Act and donations to the hospital expansion. Overall if we net 3 million we had a great year.



**Mayers Memorial Hospital District**  
*Always Caring. Always Here.*

MAYERS MEMORIAL HOSPITAL DISTRICT  
BOARD OF DIRECTORS

**RESOLUTION 2020-12**

WHEREAS, the Governing Board of Directors is responsible for the preparation and adoption of a final budget, which provides a financial plan, including estimated revenues, expenditures and reserves, for operation during the fiscal year July 1 through June 30.

WHEREAS, the budget submitted is required by law to be a balanced operating budget for year July 1, 2020 through June 30, 2021; Total Net Patient Revenue \$32,402,822 with a bottom line of \$3,134,448.

NOW, THEREFORE, the undersigned certifies and attests that the above resolution was approved at a regular meeting of the Board of Directors, Burney, California, the 24<sup>th</sup> day of June 2020.

PASSED AND ADOPTED on June 24, 2020, by the following vote:

AYES:

NOES:

ABSENT:

ABSTAIN:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Beatriz Vasquez, President  
Board of Directors  
Mayers Memorial Hospital District

\_\_\_\_\_  
Date

\_\_\_\_\_  
Laura Beyer, Secretary  
Board of Directors  
Mayers Memorial Hospital District

FISCAL YEAR July 1, 2020- June 30, 2021  
BUDGET

APPROVED AND ADOPTED AT THE BOARD OF DIRECTORS' REGULAR MEETING  
THIS 24th DAY JUNE 2020.

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Beatriz Vasquez, President  
BOARD OF DIRECTORS  
MAYERS MEMORIAL HOSPITAL DISTRICT

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Laura Beyer, Secretary  
BOARD OF DIRECTORS  
MAYERS MEMORIAL HOSPITAL DISTRICT

Budget Prepared By:

MAYERS MEMORIAL HOSPITAL DISTRICT

(Attachment: FY2021 Operating Budget)

Chief Executive Officer  
Louis Ward, MHA



Mayers Memorial Hospital District

**Board of Directors**  
Beatriz Vasquez, PhD, President  
Abe Hathaway, Vice President  
Laura Beyer, Secretary  
Allen Albaugh, Treasurer  
Jeanne Utterback, Director

Board of Directors  
**Quality Committee**  
**Minutes**

Full Remote Teleconference  
June 10, 2020 @ 12:00 PM  
Fully Remote Zoom Meeting

*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	<b>CALL MEETING TO ORDER:</b> Board Chair Laura Beyer called the meeting to order at 12:00 pm on the above date.		
	<b>BOARD MEMBERS PRESENT:</b>		<b>STAFF PRESENT:</b>
	Laura Beyer, Secretary Jeanne Utterback, Director		Louis Ward, CEO Jack Hathaway, DOQ JD Phipps, Director of Ancillary Services Theresa Overton, DNO Acute Diana Groendyke, DNO Skilled Chris Hall, Manager of Laboratory Jessica DeCoito, Board Clerk
	<b>ABSENT:</b> Dawn Jacobson, Infection Control Preventionist Candy Vculek, CNO		
2	<b>CALL FOR REQUEST FROM THE AUDIENCE – PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS</b>		
	None		
3	<b>APPROVAL OF MINUTES</b>		
	3.1	A motion/second carried; committee members accepted the minutes of May 13, 2020	<b>Utterback, Hathaway</b> <b>Beyer – Y</b> <b>Utterback – Y</b>
4	<b>Quality Facilities Reports: No reports submitted</b>		
5	<b>Quality Staff Reports: No reports submitted</b>		
6	<b>Quality Patient Reports: Written reports submitted</b>		
	6.1	<b>Emergency Department:</b> no additional questions.	
	6.2	<b>Radiology:</b> challenges around some start up issues but have been resolved with primary facilities – UC Davis, Shasta Regional, etc. Portals have been created to send images to without the use of email addresses. Report should include all boxes and areas to be addressed - JD to follow up.	
	6.3	<b>SNF:</b> SNF has the most incredible staff and during the COVID-19 situation, they have been able to keep up the great attitudes and keep residents happy and taken care of. Admission process is going smoothly even with the COVID-19 measures that were put into place. Star Rating – focus has been a huge priority and we hope to get a 3 Star. Change will occur in shift times on June 21st and we should see an improvement with our resident's schedule, as well as staff hours. Streamlined the dashboard in Point Click Care database for all SNF staff to help with communication issues. Residents are having a tough time with the social distancing measures but new ideas have been started to keep residents engaged with activities, seeing family members, and socializing.	
	6.4	<b>Acute:</b> Shift change for nurses will happen in all departments. And constant communication with SNF and Acute is happening with regards to all staff members. Adapting to the Daily Management System (DMS). This will allow staff members to enter their shift with the most up to date information and status on the patient. Nurses will be giving two significant notes/updates/information on their patients twice a day – beginning of shift and end of shift. In addition to all significant updates throughout the shifts.	

	6.5	<b>Infection Control:</b> no report provided
	6.6	<b>SNF Events/Survey:</b> no report provided
7	<b>Quality Finances Reports: No Department Reports</b>	
8	<b>Quality Education:</b> Relias is working for all of our education. COVID-19 has been through Relias as well. CNA education has continued through videos.	
9	<b>Quality Program Reporting and Initiatives</b>	
	9.1	<b>Quality/Performance Improvement:</b> Mitigation Plan was a huge piece to work on and thank you to everyone that participated in that plan and getting it together. And thank you to the Acute Nursing team that will take part in the intake of SNF Residents through the new plan. The Mitigation Plan has been approved with 98% completion and we will now be tested on the plan – which could happen soon.
	9.2	<b>PRIME:</b> some changes could happen to Prime – those are really unknown at this point. We are continuing to follow our guidelines and submit what is required. And hope to hear of what those changes could be. We are hoping that we can continue to follow current Prime rules for another year.
10	<b>NEW BUSINESS:</b> none	
11	<b>ADMINISTRATIVE REPORT:</b> <p>COVID-19: 47 cases in Shasta Co. – 1 county resident being housed in a neighboring county hospital. Focus has been on hospitalized cases rather than all positive tests because more tests are being done right now. Research continues on asymptomatic cases. In house (MMHD) testing is being formulated and we have obtained tests. Testing will begin with MMHD employees starting on June 15th. SNF residents have been tested and results are pending. So far tests have not come back positive.</p> <p>Focus on moving to NHW - Equipment, workflows (what works today might not work in the NHW), etc.</p> <p>Dietary department has a full staff and less turnover for staff has been seen - a big part of the change has been closing the kitchen during lunch hours and allowing for staff to rework their workflows. We have been able to open up for online orders to MMHD Staff – starting slow with the new Point of Sale system but increasing menu options for a full menu soon.</p>	
12	<b>OTHER INFORMATION/ANNOUNCEMENTS:</b> Lab to report next month. Departments need to complete their reports in full – please do not leave boxes unfilled.	
13	<b>CLOSED Session Announcement at 1:10 pm: Approval of Credentials:</b> moved to approve by Utterback, Beyer seconded and approved – with credentials to be review on June 11 <sup>th</sup> for signature.	
14	<b>CLOSED Session Adjournment at 1:13 pm: Reconvene Open session</b>	
14	<b>ADJOURNMENT: 1:14 pm</b> - Next Regular Meeting – July 8, 2020	

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](http://www.mayersmemorial.com).





# Shasta County

## ADMINISTRATIVE OFFICE

MATTHEW P. PONTES  
COUNTY EXECUTIVE OFFICER

1450 COURT STREET, SUITE 308A  
REDDING, CALIFORNIA 96001-1673  
VOICE - (530) 225-5561  
(NORTH STATE) - (800) 479-8009  
FAX - 229-8238

May 27, 2020

To Affected Special Districts

Re: Fall River Mills Fire Protection District & McArthur Fire Protection District  
Reorganization

In accordance with the provisions of Revenue and Taxation Code section 99(b)(5), the Shasta County Administrative Office is providing to all affected special districts, notice regarding the proposed property tax exchange related to the jurisdictional change referenced above and an opportunity to comment on the proposed property tax exchange. Revenue & Taxation Code section 99(b)(5) states:

In the event that a jurisdictional change would affect the service area or service responsibility of one or more special districts, the board of supervisors of the county or counties in which the districts are located shall, on behalf of the district or districts, negotiate any exchange of property tax revenues. Prior to entering into negotiation on behalf of a district for the exchange of property tax revenue, the board shall consult with the affected district. The consultation shall include, at a minimum, notification to each member and executive officer of the district board of the pending consultation and provision of adequate opportunity to comment on the negotiation.

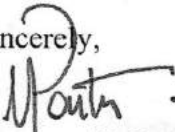
The Shasta County Administrative Office plans to present to the Shasta County Board of Supervisors, for their approval, a resolution for a property tax exchange for the proposed reorganization. In summary, the proposed tax exchange is as follows:

1. 100% of the base year property tax revenue and of the current and future annual property tax increment revenue allocated to the McArthur Fire Protection District will be allocated to the Fall River Mills Fire Protection District.
2. No other entities property tax revenue will be impacted by this proposed reorganization, including, but not limited to, the property tax revenue allocated to Shasta County Service Area # 1.

It is anticipated that the proposed resolution will be presented to the Board of Supervisors at its June 23<sup>rd</sup> meeting.

If you would like to comment on the proposed resolution, please submit written comments to [scinfo@co.shasta.ca.us](mailto:scinfo@co.shasta.ca.us) or to the above address by June 10th. You may also present your comments during the Board of Supervisors meeting on June 23<sup>rd</sup> or such other date when the matter is considered by the Board.

If you have any questions or would like to discuss this matter,, please do not hesitate to contact me at 225-5561.

Sincerely,  
  
Matthew P. Pontes  
County Executive Officer

**RESOLUTION NO. 2020 -**

**RESOLUTION OF THE BOARD OF SUPERVISORS  
OF THE COUNTY OF SHASTA  
PERTAINING TO AN EXCHANGE OF TAX REVENUE RELATED TO  
THE FALL RIVER MILLS FIRE PROTECTION DISTRICT & MCARTHUR FIRE  
PROTECTION DISTRICT REORGANIZATION**

**WHEREAS**, Revenue and Taxation Code Section 99, as amended, provides for the affected agencies to determine an appropriate property tax transfer for all jurisdictional changes of organizations occurring within Shasta County prior to the proposal being considered by the Shasta Local Agency Formation Commission (“LAFCO”); and

**WHEREAS**, in the event that a jurisdictional change would affect the service area or service responsibility of one or more special districts, the Board of Supervisors of the County in which the districts are located shall, on behalf of the districts, negotiate any exchange of property tax revenues; and

**WHEREAS**, the McArthur Fire Protection District (“MFPD”) and Fall River Mills Fire Protection District (“FRFPD”) submitted applications to Shasta LAFCO for a reorganization that would (1) consolidate the MFPD into the FRFPD, (2) dissolve the MFPD, and (3) annex a portion of County Service Area # 1. (hereinafter referred to as the “Fire Protection District Consolidation” or “Consolidation”); and

**WHEREAS**, the Fire Protection District Consolidation has been identified by Shasta LAFCO as “LAFCO #xxxx-xx”; and

**WHEREAS**, a map showing the proposed area to be consolidated and annexed into the FRFPD is attached as Exhibit A; and

**WHEREAS**, the phrase “area of Consolidation” shall refer to the area to be consolidated and annexed into the FRFPD; and

**WHEREAS**, the current distribution of property taxes for the affected properties within the area of the Consolidation has been determined and provided to each affected agency; and

**WHEREAS**, by law, the Board of Supervisors shall determine the distribution of property tax revenues in the area of Consolidation among the affected special districts, after having provided notice and an opportunity to comment to the affected special districts.

**NOW, THEREFORE, BE IT RESOLVED AND ORDERED**, that the Board of Supervisors of the County of Shasta **DOES HEREBY ESTABLISH** the following distribution of property taxes generated in the area of the Consolidation after the effective date of the Consolidation:

1. Base Year Property Tax Revenue, as defined by the Revenue & Taxation Code, shall be distributed as follows:

- a. To the County Shasta, 100% of the base year property tax revenue allocated to the County of Shasta pursuant to the Tax Rate Allocation Factors established by law.
  - b. To FRFPD, 100% of the base year property tax revenue allocated to FRFPD pursuant to the Tax Rate Allocation Factors established by law.
  - c. To FRFPD, 100% of the base year property tax revenue allocated to MFPD pursuant to the Tax Rate Allocation Factors established by law.
  - d. To each Special District other than FRFPD and MFPD (as defined in Revenue & Taxation Code Section 95 (m)) affected by the Consolidation, 100% of the base year property tax revenue allocated to each Special District pursuant to the Tax Rate Allocation Factors established by law.
  - e. To FRFPD, 0% of the base year property tax revenue allocated to the County of Shasta and all other Special Districts (except MFPD) affected by the Consolidation.
2. Annual Property Tax Increment Revenue, as defined by the Revenue & Taxation Code, shall be distributed as follows:
- a. To the County Shasta, 100% of the current and future annual property tax increment revenue allocated to the County of Shasta pursuant to the Tax Rate Allocation Factors established by law.
  - b. To FRFPD, 100% of the current and future annual property tax increment revenue allocated to FRFPD pursuant to the Tax Rate Allocation Factors established by law.
  - c. To FRFPD, 100% of the current and future annual property tax increment revenue allocated to MFPD pursuant to the Tax Rate Allocation Factors established by law.
  - d. To each Special District other than FRFPD and MFPD (as defined in Revenue & Taxation Code Section 95 (m)) affected by the Consolidation, 100% of the current and future annual property tax increment revenue allocated to each Special District pursuant to the Tax Rate Allocation Factors established by law.
  - e. To FRFPD, 0% of the current and future annual property tax increment revenue allocated to the County of Shasta and all other Special Districts (except MFPD) affected by the Consolidation.

**BE IT FURTHER RESOLVED** the County Executive Officer, to the extent permissible by law, is hereby authorized to sign any documents pertaining to implementation of this resolution and to act as the Board of Supervisors representative in the above related tax exchange matter.

**DULY PASSED AND ADOPTED** this 23rd day of June, 2020 by the Board of Supervisors of the County of Shasta, by the following vote:

AYES:  
NOES:  
ABSENT:  
ABSTAIN:  
RECUSE:

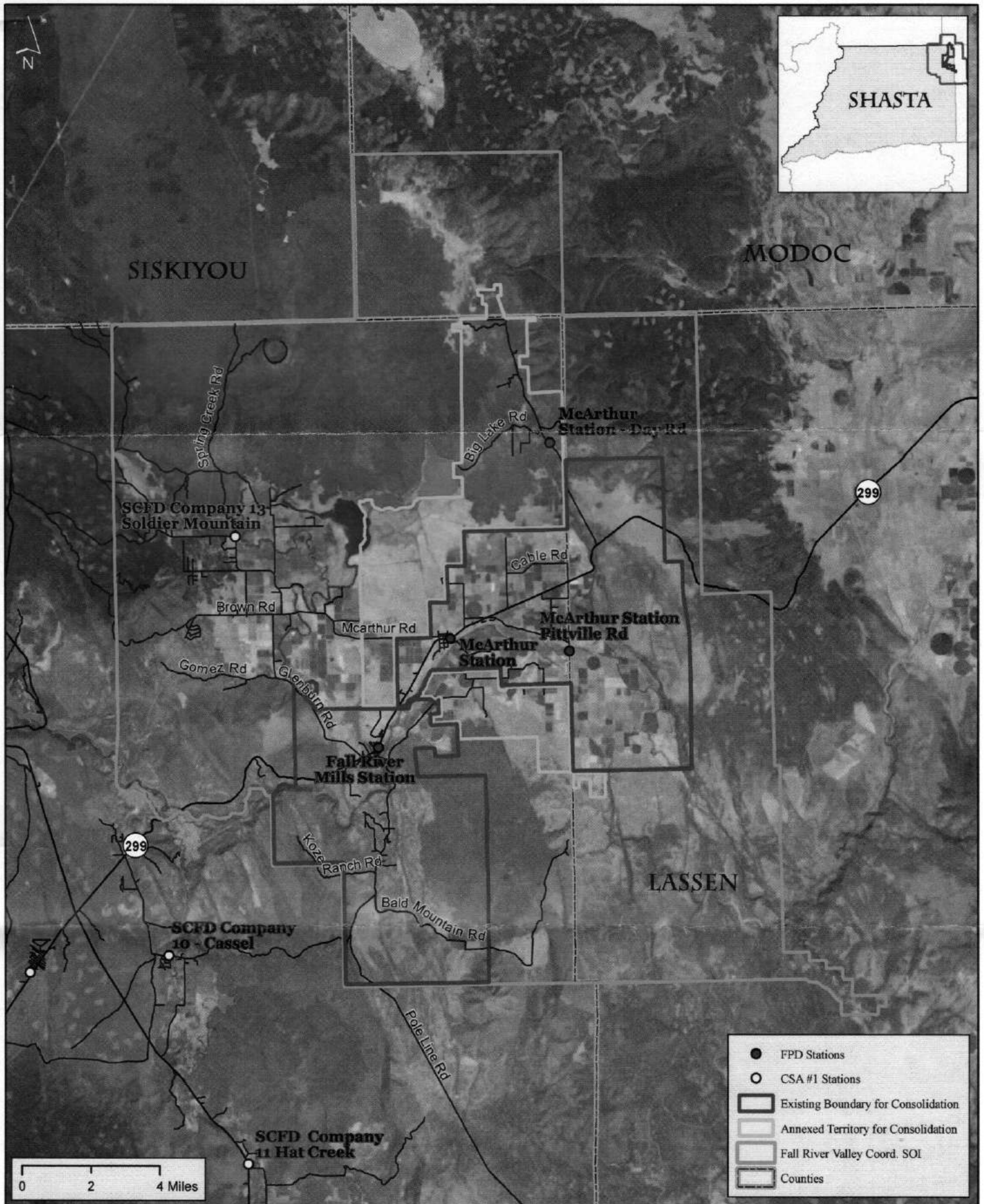
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MARY RICKERT, CHAIR  
Board of Supervisors  
County of Shasta  
State of California

ATTEST:

MATTHEW P. PONTES  
Clerk of the Board of Supervisors

By \_\_\_\_\_  
Deputy



# Fall River Valley Proposed Consolidated District

Figure

Les Baugh  
County Member  
Larry Farr  
City Member  
Stan Neutze  
City Member  
Michael Dacquisto  
City Member Alternate

Irwin Fust  
Special District Member  
Mary Rickert  
County Member Alternate  
Brenda Haynes  
Special District Member



Larry Russell  
Public Member  
Joe Chimenti  
County Member  
Patricia A. Clarke  
Special District Alternate

Katharine Ann Campbell  
Public Member Alternate  
George Williamson  
Executive Officer  
James M. Underwood  
General Counsel  
Kathy Bull  
Manager

**DATE:** June 11, 2020

Via E-mail and U.S. Mail

**TO:** County, City and Special Districts

**FROM:** Kathy Bull, Manager

**SUBJECT:** Shasta LAFCO Adopted Budget Fiscal Year 2020/2021

Pursuant to California Government Code Section 56381, on Thursday June 4, 2020, Shasta LAFCO conducted a public hearing and adopted Resolution 2020-05 establishing a Final Budget for Fiscal Year 2020/2021. There are no changes to contributions from participating local agencies for the purpose of LAFCO functions. Enclosed please find the Shasta LAFCO Adopted Budget for Fiscal Year 2020/2021 along with the corresponding signed Resolution 2020-05.

The Shasta County Auditor-Controller will be processing the Shasta LAFCO apportionment costs and you will be receiving an invoice shortly.

If you have any questions regarding the Shasta LAFCO budget, please feel free to contact Kathy Bull via e-mail at [manager@shasta.lafco.ca.gov](mailto:manager@shasta.lafco.ca.gov) or via telephone at (530) 242-1112.

cc: George Williamson, Executive Officer  
Jim Underwood, General Counsel

Enclosures: Exhibit A - Adopted Final Budget FY 2020/2021  
Exhibit B - Resolution 2020-05

**Shasta LAFCO Adopted Budget FY 2020/2021**

Categories	FY 2020/2021 Adopted Budget
<b>REVENUES</b>	
<b>Interest</b>	\$0
<b>Intergovernmental Revenue</b>	
Contribution from Cities	\$68,200
Contribution from Shasta County	\$68,200
Contribution from Special Districts	\$68,200
<b>Total Intergovernmental Revenue</b>	\$204,600
<b>TOTAL REVENUES</b>	<b>\$204,600</b>
<b>EXPENSES</b>	
<b>Salaries &amp; Benefits</b>	
<b>Employer Expense</b>	
Retirement - PERS - Previous EO	\$0
Retirement Contract Termination	\$62,620
<b>Total Employer Expense</b>	\$62,620
<b>Total Salaries &amp; Benefits</b>	<b>\$62,620</b>
<b>Services and Supplies</b>	
<b>Contract Employment Services</b>	
Contract Executive Officer	\$51,500
Contract LAFCO Personnel	\$44,650
<b>Total Contract Employment Services</b>	<b>\$96,150</b>
<b>Office Services &amp; Supplies</b>	
Bank & Transfer Fees	\$120
Communications	\$1,420
Info Tech Tools & Equip	\$400
Memberships	\$4,823
Mileage Reimbursement	\$300
Office Cleaning	\$420
Office Expense	\$500
Office Furnishings	\$0
Office Supplies	\$1,000
Postage & Shipping	\$500
Printing	\$100
<b>Total Office Services &amp; Supplies</b>	<b>\$9,583</b>
<b>Professional Services</b>	
<b>Misc Professional Services</b>	
Fiscal/Audit Services	\$3,000
InfoTech Services	\$250
InfoTech- Website	\$720
<b>Total Misc Professional Services</b>	<b>\$3,970</b>
<b>Legal Counsel</b>	
Misc Legal Services	\$10,000
PERL Legal Services	\$0
<b>Total Legal Counsel</b>	<b>\$10,000</b>
<b>Total Professional Services</b>	<b>\$13,970</b>
<b>Rents, Leases &amp; Misc</b>	
Property & General Liability	\$2,598
Publications/Legal Notices - Regular	\$800



**Shasta LAFCO Adopted Budget FY 2020/2021**

Categories	FY 2020/2021 Adopted Budget
Rents & Leases Equipment - Postage Me	\$400
Rents & Leases Equipment - Copier	\$4,765
Rents & Leases of Structures	\$6,000
Small Tools & Equipment	\$0
Software	\$0
<b>Total Rents, Leases &amp; Misc</b>	<b>\$14,563</b>
<b>MSR/SOI Expenses</b>	
GIS Services	\$2,520
Postage Printing	\$140
Public Hearing Notice	\$840
Misc. Other	\$14,000
<b>Total MSR/SOI Expenses</b>	<b>\$17,500</b>
Utilities	\$0
<b>Total Services &amp; Supplies</b>	<b>\$151,766</b>
<b>TOTAL EXPENSES</b>	<b>\$214,386</b>
<b>Appropriation for Contingency</b>	<b>-\$9,786</b>
<b>TOTAL BUDGET ALLOTMENT BALANCE</b>	<b>\$204,600</b>
<b>CONTINGENCY FUND BALANCE</b>	
<b>Contingency Deposit</b>	<b>-\$9,786</b>
<b>Contingency Withdrawal</b>	<b>\$0</b>
<b>Contingency Balance</b>	<b>\$69,338</b>

4. The nominee is encouraged to provide information requested on the Candidate Information Sheet. This information will be summarized on the final ballot but will be kept on file at the LAFCO office.
5. All qualified nominees will be listed on the final ballot.
6. The Nomination Form(s) must be returned no later than **August 3, 2020**. You may email the nomination forms to George Williamson, Shasta LAFCo Executive Officer at [exec@shasta.lafco.ca.gov](mailto:exec@shasta.lafco.ca.gov). If returning nominations by mail, please send to: Shasta LAFCO General Counsel, C/o Underwood Law Offices 1274 Court Street, Redding, CA 96001.

**Election Schedule**

Action	Date of Action
LAFCO request for nominations mailed to independent special districts via certified mail	Sent June 10, 2020
Nominations due to LAFCO	By 5:00 p.m. August 3, 2020
Ballots sent via certified mail to independent special districts	August 5, 2020
Ballots due to LAFCO	By 5:00 p.m. October 1, 2020
Ballots opened and tallied at LAFCO office; all candidates notified	October 1, 2020
Election results sent via certified mail to all districts	No later than October 5, 2020

**Independent Special Districts**

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>Anderson Cemetery District</li> <li>Anderson Fire Protection District</li> <li>Anderson-Cottonwood Irrigation District</li> <li>Bella Vista Water District</li> <li>Buckeye Fire Protection District</li> <li>Burney Basin Mosquito Abatement District</li> <li>Burney Cemetery District</li> <li>Burney Fire Protection District</li> <li>Burney Water District</li> <li>Castella Fire Protection District</li> <li>Centerville Community Services District</li> <li>Clear Creek Community Services District</li> <li>Cottonwood Cemetery District</li> <li>Cottonwood Fire Protection District</li> <li>Cottonwood Water District</li> <li>Fall River Valley Community Services District</li> <li>Fall River Mills Fire Protection District</li> </ul> | <ul style="list-style-type: none"> <li>Fall River Resource Conservation District</li> <li>Halcumb Cemetery District</li> <li>Happy Valley Fire Protection District</li> <li>Igo-Ono Community Services District</li> <li>Manton Joint Cemetery District</li> <li>Mayers Memorial Hospital District</li> <li>McArthur Fire Protection District</li> <li>Millville Fire Protection District</li> <li>Millville Masonic &amp; Odd Fellows Cemetery District</li> <li>Mountain Gate Community Services District</li> <li>Pine Grove/ Fall River Mills Cemetery District</li> <li>Pine Grove Mosquito Abatement District</li> <li>Shasta Community Services District</li> <li>Shasta Lake Fire Protection District</li> <li>Shasta Mosquito and Vector Control District</li> <li>Tucker Oaks Water District</li> <li>Western Shasta Resource Conservation District</li> </ul> |
|---|--|

**Other Information**

Information available at [www.shasta.lafco.ca.gov](http://www.shasta.lafco.ca.gov). Should you have any questions, please contact the Commission office, by phone at (530) 242-1112, or by e-mail at [exec@shasta.lafco.ca.gov](mailto:exec@shasta.lafco.ca.gov).

Attachments: Nomination Form (1)

Les Baugh  
County Member  
Larry Farr  
City Member  
Stan Neutze  
City Member  
Michael Dacquisto  
City Member Alternate

Irwin Fust  
Special District Member  
Mary Rickert  
County Member Alternate  
Brenda Haynes  
Special District Member



Larry Russell  
Public Member  
Joe Chimenti  
County Member  
Patricia A. Clarke  
Special District Alternate

Katharine Ann Campbell  
Public Member Alternate  
George Williamson  
Executive Officer  
James M. Underwood  
General Counsel  
Kathy Bull  
Manager

**Date:** June 10, 2020

**From:** George Williamson, Executive Officer & Kathy Bull, Office Manager

**Subject:** **NOTICE OF RE-NOMINATION PERIOD AND NOTICE OF INTENTION TO CONDUCT MAILED BALLOT ELECTION**

Due to recent extenuating circumstances, it is hereby noticed that the Shasta Local Agency Formation Commission (LAFCO) is seeking nominations for **two** special district members and **one** alternate member to serve on LAFCO. The two regular and one alternate member elected will serve the remaining four-year term ending in January 2024. The current special district members are provided below.

Designation	Current Special District Members on LAFCO	Term Ended
Member (Seat 1)	Irwin Fust, Clear Creek Community Service District	2020
Member (Seat 2)	Brenda Haynes, Anderson Cottonwood Irrigation District	2020
Alternate Member	Patricia A. Clarke, Anderson Fire Protection District	2020

The process for selecting special district members for LAFCO seats is set forth in Government Code Section 56332. This provides for a meeting to be convened among representatives of the 35 independent special districts in Shasta County, unless the Executive Officer determines that a meeting is not feasible. Based on Government Code Section 56332, it has been determined that an "Independent Special District Selection Committee" meeting to select special district members is not feasible at this time due to the likelihood that a quorum would not be achieved. As such, both the nominating process and election are being conducted on behalf of the Independent Special District Selection Committee by the LAFCO Executive Officer.

Your district is encouraged to participate in this election process. A schedule is enclosed together with a list of the 35 independent districts in Shasta County that area eligible to participate. If your district wishes to nominate a Board member(s) to be a candidate(s) for the LAFCO special district alternate member seat, the following rules for eligibility and for submitting nominations apply:

1. As there are three seats open, your Board may nominate up to three candidates. Please Note, there is now only a single nomination form. If your District has already submitted nomination(s) in 2020, they may be resubmitted using the attached form. Based on comments from special district representatives, all qualified nominees will be placed on a single ballot. The candidate receiving the most votes will serve as the seat 1 regular member. The candidate receiving the second most votes will serve as the seat 2 regular member. The candidate receiving the third most votes will serve as the alternate member. In the case of ties, a coin toss will decide which candidate is elected.
2. Nominees must be elected or appointed special district officers (members of a governing board) of an independent special district in Shasta County.
3. Selection of a nominee is to be approved by a majority of your governing board. The name of the nominee is to be submitted on the attached Nomination Form, and is to be signed by either the President/Chair or the Clerk of your governing board.

**Special District Independent Member  
NOMINATION FORM**

District Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

The Board hereby nominates \_\_\_\_\_ to fill a four-year term ending in January 2024 as a regular member of the Shasta Local Agency Formation Commission representing independent special districts in Shasta County.

Board action taken on the \_\_\_\_\_ day of \_\_\_\_\_, 2020 by the following vote:

Ayes: \_\_\_\_\_

Noes: \_\_\_\_\_

Abstain: \_\_\_\_\_

Absent: \_\_\_\_\_

\_\_\_\_\_  
Signature of Board President/Clerk

\_\_\_\_\_  
Printed Name

**This Nomination Form must be received by Shasta LAFCO no later than August 3, 2020**

\_\_\_\_\_  
Shasta LAFCO Date Stamp

**Irwin Fust**  
6774 Amber Ridge Dr  
Anderson, CA 96007  
(530) 351-8203 Cell - (530) 378-1801 Hm.

May 17, 2020

Mayers Memorial Hospital  
P.O. Box 459  
Fall River Mills, CA 96028

To: Mayers Memorial Hospital Chairman and Board Members

Re: Election of Special District Representative to LAFCO

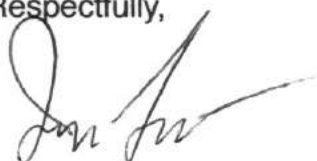
The election for your Special Districts Representative on LAFCO is coming up and you will be asked to vote on representatives. I am Irwin Fust and I am Vice Chairman of the Clear Creek Community Services District and presently your Special District Commissioner on LAFCO and chairman of LAFCO. I am asking for your vote to be your Regular Special District Member. My Clear Creek Community Services board has nominated me for both Seat One and Seat Two. I am asking for your vote to be your Regular Special District Member in Seat One.

As chairman of LAFCO for the past four years, I have seen growth in the many Special Districts we have in Shasta County. I believe Special Districts, such as yours, are the best providers of services to the people in the rural and suburban parts of our county; water, sewer, fire protection, cemetery, mosquito abatement, resource conservation, hospitals, etc.

Four years ago I became your Special Districts Representative and was elected chairman of LAFCO. Four years ago we wisely hired a part time contract Executive Officer who has run the commission's affairs efficiently and at a reasonable cost to you. We are on schedule with updating the Municipal Service Reviews and Spheres of Influence boundaries, and we continue to provide expeditious and efficient service to the contributing agencies who want to adjust their services and boundaries. It is my desire to see that this commission continues to operate in your interest and in an efficient manner in the next four years. I would appreciate your agency's vote for Special Districts Representative-Seat One.

Thank you for your consideration.

Respectfully,



Irwin Fust  
irwin378@gmail.com



## CANDIDATE INFORMATION SHEET

**Candidate Name** *Irwin H. Fust Jr.*  
**Address** *6774 Amber Ridge Dr. Anderson, CA 96007*  
**Telephone** *Hm. 530-378-1801 Cell 530-351-8203*  
**Email** *irwin378@gmail.com*  
**District** *Clear Creek Community Services District*  
**Title** *Vice Chairman*  
**Nominated for:** *Regular Special District Member - Seat 1*  
*Regular Special District Member - Seat 2*  
*My Board has nominated me for both seats to insure I will have a chance at one of the seats.*

**Length of service with the District:** *14 years.*

**Present Occupation:** *Certified Flight Instructor*

**Personal and Professional Background:** *Commercial radio station engineering, on-air personality and station management - 26 years. Commercial printing company owner - 16 years. Certified Flight Instructor - 14years.*

**Summarize your interest in serving on LAFCO:** *Special Districts are crucial to orderly growth and development in Shasta County because growth will be taking place within our special districts in the future. LAFCO is responsible for setting the boundaries for orderly extensions of service offered by Special Districts. It is critical that LAFCO work cooperatively and expeditiously with Special Districts to provide those services to our county.*

**Summarize your qualifications for serving on LAFCO:** *I have served on LAFCO for the past 14 years, the last four as chairman. I am completely familiar with the Cortese-Knox-Hertzberg Local Government Reorganization Act, the state law that governs LAFCO. I can bring knowledge of the needs of Special Districts to the commission.*

**List Local Government Involvement:** *Shasta County Planning Commissioner - 12 years. Shasta County Supervisor, District 2 - 12 years. Director, CCCSD - 14 years.*

**List Civic Organization Involvement:** *Redding Rotary. Redding Trade Club. Redding Elks. Redding Experimental Aircraft Association.*

**List Special Interests or Hobbies:** *Anything Aviation. I am a passionate pilot and Flight Instructor.*



## Operations Report June 2020

Statistics	May YTD FY20 <i>(current)</i>	May YTD FY19 <i>(prior)</i>	May Budget YTD FY20
Surgeries <i>(including C-sections)</i>	37	52	88
➤ Inpatient	5	2	22
➤ Outpatient	32	50	66
Procedures <i>(surgery suite)</i>	133	118	176
Inpatient	1323	1758	1857
Emergency Room	3630	3767	3685
Skilled Nursing Days	25859	25217	25428
OP Visits (OP/Lab/X-ray)	11489	13808	14673
Hospice Patient Days	911	1090	1287
PT	2344	2816	2750

### Chief Clinical Officer Report

**Prepared by: Keith Earnest, CCO**

#### *Physical Therapy*

- Taylor Sloat, DPT candidate, is completing his 13-week rotation at Mayers PT department.
- Patient numbers improved to May to 240 outpatient visits which is in line with past averages, however med/surg numbers have been minimal.
- Mayers was awarded a \$7000 grant from Redding Rancheria to go towards a Litegait machine (estimated cost \$18,000).

#### *Pharmacy*

- Policies and Procedures on Hazardous Drug Handling <USP800> are in draft form. Hazardous Drugs have been identified in the EMR and programmed for a warning to appear to nursing staff indicating that special handling is needed. Warnings have also been programmed to appear on the screen of the automatic dispensing cabinets to indicate the medication is a Hazardous Drug. Labels on the Pyxis pocket are a final warning. Pharmacy is working with Purchasing to acquire the best deal on compliant gloves and waste containers.
- Repairs to the barrier isolator were made on June 10<sup>th</sup> and microbiological testing results should be back the week of June 22<sup>nd</sup>.

#### *Retail Pharmacy*

- Efforts have been made to right size the inventory as we learn the 340B drug replacement process.



- Mailing of prescriptions is now free in order to compete with another pharmacy in our area that is mailing prescriptions for free.
- We are having some training in how to “sync” refills. It is more convenient for customers to get all their refills at the same time.

### ***Respiratory Therapy***

- David Farrer, RT, will be conducting mask fittings for Driscoll® the week of June 15th
- The respiratory department is working on the respiratory boxes for the new ED rooms.
- The high flow oxygen equipment is arriving and some of the rented ventilators will be returned once we go live with high flow oxygen.

### ***Cardiac Rehab***

- The Cardiac Maintenance Program is scheduled to resume June 22<sup>nd</sup>. Chairs and equipment are rearranged to allow social distancing and participants will be having their arrival times scheduled to limit the number in the cardiac gym.
- We currently have three monitored patients.

### ***Telemedicine – refer to Exhibit A***

#### **Chief Nursing Officer Report**

**Prepared by: Candy Vculek, CNO**

- Acute care and ED each have one registry staff member at this time. The Acute care registry RN will be departing as soon as orientation is completed for the last nurse hired. This will be several more weeks. All of the additional staff brought in for COVID are gone.
- LTC Staffing still has a number of vacancies, particularly C.N.A.’s.
- The plan to meet the new AFL requirements sent out by CDPH has been completed and approved by CDPH. This was an extensive amount of work that focused on keeping the SNF residents safe from a COVID outbreak.
- All SNF residents have been tested for COVID and are negative.
- Employee testing has just started. SNF employees first tests will be done by the end of June and the rest of the facility will be completed in July. After the initial testing, 25% of the SNF employees will be done weekly. This is an indefinite requirement and will continue until the regulations are changed by CDPH.
- COVID-19 Update
- As of Friday, Shasta County has reached Phase 3 for reopening of services. MMHD received guidance from Shasta County and the management team is reviewing what changes will be made in current processes related to the Phase 3 guidance

### ***SNF Report***

- Census = 80 Residents (Burney Annex = 46; Station 2 Fall River = 34); one female bed available in the Burney Annex Front and the Hospice Room is open (with two beds on reserve in Isolation Room). Memory Care Unit is completely full with a ‘waiting list’. At Station 2: one male bed

and one female bed open (plus Isolation Room with 2 beds on reserve). Plans are for admission of a husband and wife this week at Fall River

- The work done to streamline the admission process along with the addition of the hospitalist mid-levels has greatly improved the facilities ability to admit in a prompt manner.
- All CDC Guidelines and State mandates for Covid-19 prevention/protection remain in place.
- Residents continue to be screened morning and evening for fever and/or any changes in condition.
- CDPH continues to visit MMHD Station 2 and Burney Annex every four to six weeks as part of their "Focused Survey". They will be ensuring that MMHD is following the 'Mitigation Plan' submitted to them.
- In order to facilitate better communication between all caregiving Staff in Skilled Nursing, SNF leadership customized the 'Clinical Dashboard' in PCC and POC. SNF Nursing Care Staff have been trained to read their dashboard at the beginning of their shift and at the end to ensure being well-informed. This will be in addition to the Shift to Shift Report that is ongoing but will fill in the 'gaps' in communication that often occur.
- In order to improve our quality of resident care, new shift change times will be implemented on 6/21/20. CNA's Workflow revisions (as a result of LEAN Work) will be implemented at that time also.
- Two permanent RN's have been hired for the SNF. One works in Burney and the second is orienting in Fall River. This increases our RN staffing hours and will help increase our star rating. The registry RN's that have been in place to cover staffing will no longer be needed.

### ***Acute Care Report***

- Acute ADC 0.67, Swing ADC 2.07; LOS 6.89, OBS 0.64 Days. Census has been down related to COVID.
- Per recommendation from CDPH, SNF patients are being isolated in Acute for 14-days prior to admission to SNF. They are COVID tested prior and on the 10<sup>th</sup> day and then transferred to SNF on 14<sup>th</sup> day if negative.
- Last fulltime RN hire will complete orientation mid-July. At that time, we will be fully staffed with no registry.
- New nursing shift time begins 6/21/20. Change from 0445-1715/1645-0515 to 0630-1900/1830-0700. Some adjustments have been made to work flows to assist staff in the transition.

### ***Outpatient Surgery***

- Surgery resumed the week of May 19th.

### ***Emergency Department***

- The Emergency Department census has been down due to the COVID pandemic. This week numbers are starting to return to levels that are more normal. Unable to pull data at the time of this report due to the EHR being down but daily census has been looking much improved
- The E.D. has hired a per-diem RN who also works in Alturas. There is only one vacant position at this time that is being covered by a travel RN. Another applicant was recently interviewed but management declined to offer due to a lack of experience. Department staffing has been scaled back to pre-COVID levels.

- The operations for the disaster trailer and OPM unit for potential COVID patients is now a fairly comfortable new “norm”. Use of the trailer has been extended indefinitely.
- Room stock and par levels have been established. Order placed for bins. Decision made (thank you Steve) to order all new bins for rooms and use existing bins in supply room
- Since new ED will not be completely equipped prior to go live (transferring many existing items on move day) staff will have to know location of items that are not there. Discussed at staff meeting that this information will be coming their way

### ***Laboratory***

- Staffing – A candidate is in the process of interviewing for the Lab Manager position. He will be on site on July 13<sup>th</sup> for interviews.
- Point Click Care interface – This project has started to show movement again. The vendors for development had stalled. We should now be back underway.
- COVID Testing – respiratory panel that now includes COVID is up and running. No testing that is COVID only is available outside of County or Labcorp at this time
- Microbiology Allscripts – Now that COVID restrictions have lessened this is back underway for development. Allscripts person has been onsite doing build
- New wing equipment – Most equipment issues have been resolved. There are still significant issues with the hood. We are trying to resolve those and move forward with installation but have agreed that if needed we can remove the hood from the plans and certify without it. Micro is currently handled with a manual process (no hood) and can continue that way if need be until hood issues are resolved

### ***Radiology Board Report***

- The contract with MDI to replace the current radiology group has been signed. Working on HL7 interface. Once completed we will be able to execute a transition from Shasta Radiology to MDI
- The new wing construction is coming along well. New CT and RF rooms completed. Lead shielding testing was completed over the weekend. Our physicist is coming out for certification later this month
- Current issue regarding installation of injector. This is early on but new system doesn’t have hardware necessary to receive the injector. Alan is working with Siemens to rectify. Not something that would stop passing inspections but must be rectified

### **Chief Operating Officer Report**

**Prepared by: Ryan Harris, COO**

### ***Hospital Expansion Project***

- The New Hospital Wing (NHW) project is continuing to move forward with good progress being made every day. Layton continues to hit milestones to keep their July 8<sup>th</sup> NHW substantial completion date. I’ve attached our most current to do list schedule for your review (Exhibit C).

### ***Facilities, Engineering, Other Construction Projects***

- Construction started on the Burney Clinic remodel on May 11<sup>th</sup>, 2020. The demo is complete and the reconstruction phase has begun. Production is moving along swiftly and we should be right on schedule with a completion date in January 2021. Milestones hit over the last month include. Footing formwork and rebar installation, under slab plumbing, footing pour, foundation formwork, rebar, and slab pour. Rough framing, structural steel, and in wall electrical and plumbing will start over the next couple of weeks.
- Construction on the Administration Building remodel is in the finishing stages. The new office space will house both the Administration and Finance departments. Our estimated completion date is July 10<sup>th</sup>. Finish work is currently ongoing in the building.
- The extension to the hospital demolition project has been approved by OSHPD. The new milestones that we must meet are as follows: Completion of the new hospital wing by 9/25/20, start partial demolition of the existing hospital by 4/15/21, completion of the demolition project by 12/15/21. We are working through HVAC issues as one of our HVAC units sits on two rooflines and after the building is demolished it will sit too close to the outside edge of the building per code. We have decided to remove the two older HVAC units that are close to what will now be the edge of the building. We will install a new unit to replace these two units on the other side of the building once installed and tested we complete the cut over to ensure minimal issues with heating and cooling in the building.
- The Riverview House is in the final stages of completion. Engineering is currently working on the final punch list items to complete the project. The house will not be available until after the NHW project is completed and the sewer line can be reconnected. This work is still on hold until after the temp power poles that are feeding Layton's trailer can be removed. Layton is working with PG&E to schedule this.
- Nurse Call Project has begun on June 22<sup>nd</sup> and should last about 4 weeks. The Acute Care wing will have a brand new Nurse Call at the completion of the project.
- SNF Refresh project will include the updating of all sinks to be ADA compliant. This project has also been put on hold because of the facility COVID-19 restrictions.
- We have decided to bring the helistop project in-house. We have received the drawings and are waiting until Layton's temporary power is out of the way to begin. We were anticipating starting this month but due to delays on the expansion project have been unable to do so.
- Facilities and engineering crews have been working closely with nursing leadership to ensure that our facilities can meet the demands of COVID-19 including rooms for a patient surge, isolation rooms, negative air pressure, monitoring, and HEPA filtration. To date, these measures are working appropriately.
- Facilities personnel are also staying on top of their normal daily tasks while minimizing the amount of facilities staff traffic in the hospital and skilled nursing facilities.
- Work has been begun on grounds projects and upkeep. Facilities still plans to start an irrigation project on the back lawn as well as the landscaping in front of Station 3 in the coming weeks.
- We are awaiting permits from the county for the Laundry facility project. A decision was made to proceed with Belfor doing the project. Once permits are received, restoration will begin. The estimated damage to the facilities, inventory, and equipment is \$200,000-\$300,000. The insurance company is sending an investigator to determine the cause of the fire.
- The church has applied for a use permit for the daycare in Fall River. We are still waiting for the result before we move any further into the project.
- No work was done on the Fall River HVAC project this past month due to several other projects starting and current workloads for staff.

## *IT*

### *Day To Day*

- IT has 3 FTEs
- IT received 445 new tickets
- Of 504 available hours, IT spent 182.25 Hours of their time on those tickets
- In that time, IT was able to resolve 441 of those tickets with:
  - Average of 7 tickets resolved per day per FTE
  - Average first response time of 11H05M *\*outlier ticket of 126 Hours skewed results*
  - Average overall response time of 3H22M *\*outlier ticket of 126 Hours skewed results*
  - Average resolution time of 1H52M
  - 87.3% resolved upon first contact
- Of those received, 12, 2.7%, had an impact on Patient Care, Business Continuity, Regulatory Compliance, or Security Posture
- Of those received, 99.1% were resolved within the SLA
- We received a total of 60 Satisfaction Surveys
  - 55, 91.67%, Replied 5/5 Stars
  - 3, 5%, Replied 4/5 Stars
  - 0 Replied 3/5 Stars
  - 2, 3.33%, Replied 2/5 Stars
  - 0 Replied 1/5 Stars

### *One-Offs*

#### *Projects*

- Backup and Disaster Recovery Revamp
  - What's been done this month
    - Received the Cohesity hardware
  - What's coming
    - P&P for updating our air-gapped password and critical documentation vault regularly
    - P&P for properly verifying recoveries Semi-Annually
    - Installation of Backup Appliance
    - Meeting with vendors to discuss Tape and Cloud options
- Internet speed upgrades
  - What's been done this month
    - Fall River upgrade to Gigabit Internet was cut over with no issues.
    - Burney upgrade to Gigabit Internet on track, site survey completed on 5/29
    - Retail Pharmacy 20 Megabit Internet upgrade delayed again, we need to cut out part of the parking lot to repair the conduit before Frontier can finish
- Admin Building
  - What's coming
    - Installation of network gear
- Clinic
  - What's been done this month
    - Discussed re-quoting Paragon Ambulatory
  - What's coming
    - Server room install

- Assisting in the selection of a Clinic EMR
- Ticketing System
  - What's been done this month
    - Completed Service Level Agreement Policy, started reviewing the metrics holistically and comparing them to the SLA. Will be closely monitoring these numbers to ensure the SLA is reasonable.
  - What's coming
    - Change Management process to help reduce the impact IT Changes have on daily business functions
- Patch Management
  - What's been done this month
    - This month saw us go from <30% compliant to >70%. This is a big deal for us and we hope to edge in on the 90% range.
  - What's coming
    - Once we iron out the bugs, patch compliance reports will be provided
    - Expanded patching policies to include other devices, including network hardware and hypervisors
- Network Infrastructure Refresh
  - What's been done this month
    - Moved the start date to 6/3 to keep up with NHW schedule
    - Started organizing racks in preparation for NHW
    - Completed prep work for WiFi install
  - What's coming
    - Installation of this equipment when they are able to come on site
- OneContent Enterprise
  - What's been done this month
    - Went live. Lots of workflow to cover but we are on a good track
  - What's coming
    - Ordering of PCs for purchasing to digitize their workflow further
- IT P&Ps/Training
  - What's been done this month
    - Continued work on Relias Training
    - Completed initial Service Level Agreement Policy
    - Continued work on Change Management Policy
- Security Initiatives
  - What's been done this month
    - Bancsec has started their external assessment
  - What's coming
    - End-User cybersecurity education via Knowbe4/Relias
    - Intrusion Detection and Prevention Tools
    - Revamp of all security roles in Paragon and Active Directory to align ourselves with the concept of Least Privilege Access
- Paragon 15 Upgrade
  - What's been done this month
    - Completed live migration, ran into a lot of snags with the backup process. Cohesity should resolve them.
    - Audit server in production now

- What's coming
  - Should be starting Paragon 15 in June
  - Estimated Go-Live for Version 15 is September right now
- MVHC Lab Interface
  - What's been done this month
    - Final document Pending our Lab
  - What's coming
    - Test interface should be coming soon
- NHW
  - I am spending most of my time since 5/22 on work related to the new wing, primarily around planning the rack layouts, equipment moves, and MPOE move. It is eating up a lot of time since I am working at it from scratch and may affect some other projects.
  - The power shutoffs are showing some flaws in our infrastructure, and causing a lot of tickets in the process. Hopefully this gets better but I have been hearing some complaints from staff because although the power has returned, the rest of the IT infrastructure takes a long time to bring back up properly.

### ***Purchasing***

- Purchasing has taken over inventory every quarter for departments using chargeable items; this includes ED, Acute, and Outpatient Medical. This was put on hold until COVID-19 restrictions are lifted in the facility. Purchasing will be completing the yearly inventory the end of this month.
- We are organizing the chargeable and non-chargeable items by first reviewing what we are currently charging for, what we should charge for, and what needs to be removed from the chargeable items list. We will then make the charging process more efficient and hope that this will capture missed revenue.
- Jessica DeCoito and Madison Kelly continue diligently in getting us daily inventory counts of PPE and other high demand items. They input this data into a burn rate calculator that the CDC provided. This shows us based on our usage of how many days' supply we have and which items we should be focusing on procuring. This has been a great tool for us to identify and prioritize PPE we are getting low on. There are still items such as procedural masks, gloves and toilet paper that are difficult to procure.
- We are constantly searching for PPE availability through various vendors.
- The purchasing team has also taken on the task of policing our inventory to reduce waste.
- We are also creating new workflows to supply patient rooms down Station 3 hall in the event of a surge.
- Steve and Madison are also actively engaged in One Content go live and establishing new workflows.
- Purchasing has done a wonderful job of ensuring we do not run out of PPE and I am pleased to announce that we have not run out of any PPE to date.
- Purchasing currently is working with Nurse Leadership and Finance on bundling supplies based on the procedure. If these supplies are used on this procedure everything the charge code will automatically drop for these items based on the procedure.
- Purchasing is also working with Nurse Leadership on new workflows in the NHW.

### ***Food & Nutrition Services***

- Dietary successfully installed and rolled out the new point of sale system through online ordering for MMHD Staff. Three weeks of meals have been offered to MMHD staff. Changes in menu options and an addition of more options have been added to the point of sale system. Plans to roll out the full menu on the online ordering system being discussed.
- The Food and Nutrition department is going through various changes to improve burnout, turnover and overall moral of the department. These changes including the addition to two leads to the department. This will ensure that there is leadership in the department at both facilities covering both shifts 7 days a week. The staff will also be going to 4 10's. Susan has worked very hard on coming up with a schedule that would allow her staff to go to 4 10's to give them more time away from work. Going to 4 10's will also cut back on overtime in the department.

### ***Environmental Services & Laundry***

- The arrangement with AlSCO to Launder our own linens is still going well. We have had some issues with linen shortages but Sherry Rodriguez was able to correct them right away.
- Sherry and her staff continue to be prepared for a possible surge of COVID-19 patients.
- Sherry and I have been reviewing workflows for housekeeping and floor maintenance in the new building. We are looking at staffing and best practices for the new materials in the new building.

## **Operations District-Wide** **Prepared by: Louis Ward, CEO**

### ***COVID – 19***

At the time of this report, here in Shasta County there are 58 cases, 1 hospitalized patient, and 39 quarantined residents. The numbers are still generally low however with the recent re-opening efforts and better weather there is a strong possibility we will see cases increase throughout the summer months. Mayers leadership has spent a great deal of time working on our testing strategies over the past few months and at this point we have moved the needle considerably regarding testing. Currently, we can and will test symptomatic patients who come to our ER using a 1-hour rapid respiratory panel test, we also continue to have the ability to collect the specimen and send a test to a reference lab or public health with results returning within 48 hours. We have begun testing all residents and employees with an approved CDPH plan and will continue to do this per said plan for the foreseeable future.

Hospital Administration is working with the School District Administration on a safe return to school plan for the students within the intermountain area. We have agreed to develop a committee who will work together throughout the summer months to discuss plans pertaining to infection prevention, disinfecting procedures, and equipment needed to ensure a safe school year. We look forward to a collaborative discussion with the school district over the coming months.

### ***Sac Valley Med Share HIE***

May was my last month as an active Board Member of Sac Valley Med Share health information exchange. With the additional responsibilities I have taken on with the District Hospital Leadership Forum Executive Committee, I made the choice to resign from for board role and allow someone else the opportunity to serve on this great board. I have enjoyed my time serving as a board member for the HIE, I



am committed to assisting when they are in need, and I wish them the very best in their efforts to ensure the right provider has the right information at the right time so the best care can be provided to patients.

### ***FY21 Scorecard Goals***

Over the next month, Administration will meet with all of management to discuss FY20 goals and develop new FY21 goals in alignment with the overall district strategic plan. A detailed report will be provided to the District Board at the August Board meeting.

### ***New Hospital Wing***

Again, a month of progress on the new hospital wing. Things are getting very exciting as the building is looking more and more complete each passing day. Staff is getting really excited about the prospect of the building being finished and moving in. We are providing daily tours to the staff so they can see a very near to completed project, all the feedback from the staff has been very uplifting. As always, Ryan Harris, COO will provide a detailed report on the progress of this this project and the 3 other construction projects the district is working on.

Telemedicine Update as of June 5, 2020

Respectfully submitted by Amanda Harris for Keith Earnest, CCO, Dr. Aaron Babb, Medical Director and Louis Ward, CEO (included quarterly)

We have completed a total of 742 live video consults via Telemedicine since August 2017.

Endocrinology:

- We had nine Endo consults in May. Dr. Bhaduri has clinic next on 6/11 with eight patients on the schedule.
- Endo is now the lead specialty in total ancillary revenue. Dr. Bhaduri has two clinic blocks per month. The Annex lab being closed due to COVID-19 is **greatly** affecting Telemed patients' ability to get their labs completed at this time.
- We've had 252 consults since the start of this specialty in August 2017.

Nutrition:

- We've had to cancel multiple Nutrition blocks due to lack of interest or willingness to leave the house during the shelter-in-place order. There is a general feeling from patients that Nutrition appointments aren't important enough to keep during the COVID-19 pandemic.
- I've now switched Jessica to a PRN schedule, meaning I'll request time when I need it for Nutrition instead of regular blocks.
- We've had 74 consults so far since we started this specialty in November 2017.

Psychiatry:

- We had 13 patients seen in May for Psychiatry. The next clinic is scheduled for June 30.
- We've had 243 consults since the beginning of the program in August 2017.

Infectious Disease:

- Dr. Siddiqui is next scheduled to see patients on June 11 with four patients on the schedule.
- We've had 71 consults since the start of this specialty in September 2017.

Neurology:

- We are still highly utilizing Neuro time. Dr. Belaga is currently booked out until August. He saw 8 patients in May. I expect this number to grow as more and more patients are follow-ups (15 min) instead of initial patients (30 min). It should be noted that Dr. Belaga does not prefer to be double booked so we're a little more spaced out.
- The patients very much enjoy his bedside manner and he and Vinni work very well together in clinic.
- We've had 83 consults since the start of the program in November 2018.

Rheumatology:

- Dr. Butts saw her first patient on May 6. It went well. Labs and imaging are being ordered and then the patient will be back. I've received no further referrals for Partnership patients at this time. I think further advertising is needed so that the community and providers are aware that

the service is available. I just haven't really had time to devote to this recently. Just yesterday I asked Val to update it on the website so that should be up soon.

#### ER UCD Cart:

- This cart hasn't been used regularly. I checked with JD (ER Director) and he would still like to keep the cart and Neuro service as it is now a part of our stroke protocol. We will continue to monitor its use.

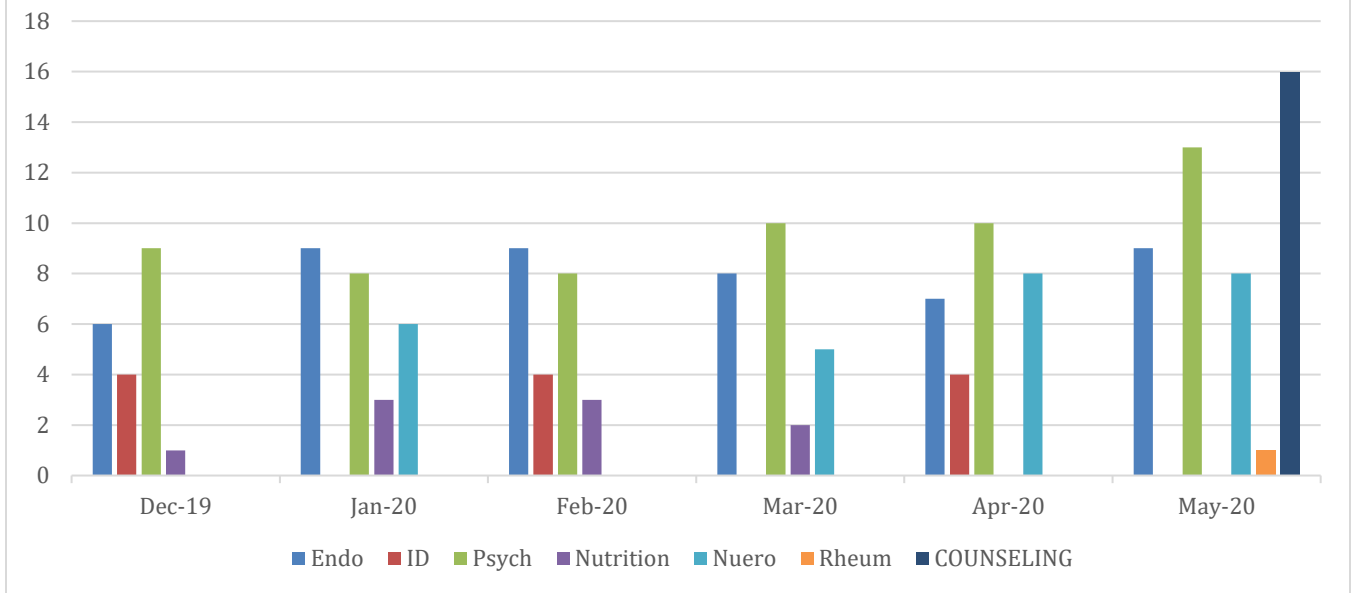
#### COVID-19:

- Outpatient Telemed services are now taking place out of exam room D in the Physical Therapy building. This is extremely helpful as far as patient reassurance (they don't want to come into the hospital). PT staff have been extremely helpful and accommodating and I greatly appreciate it!
- Sheba submitted the FCC funds request on May 1. She checked its status yesterday and it was still listed as pending. I asked that she call the helpline to see if we could get any more info.

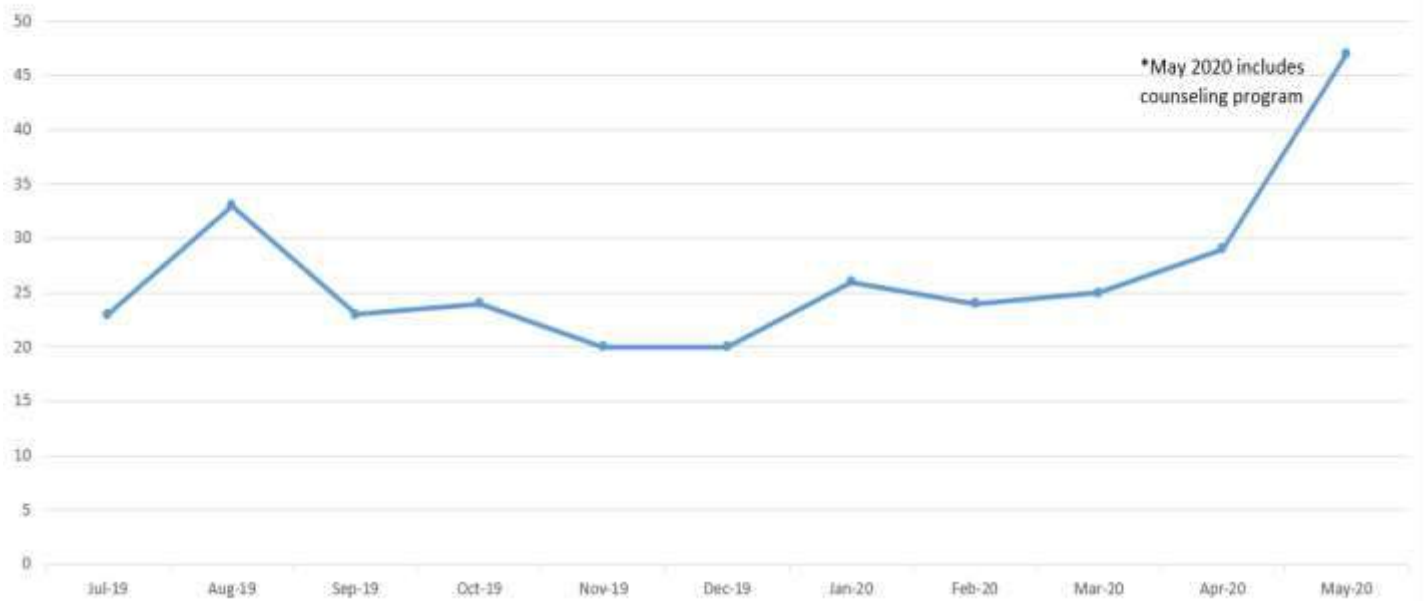
#### FRJUSD/Mayers/MVHC Grant:

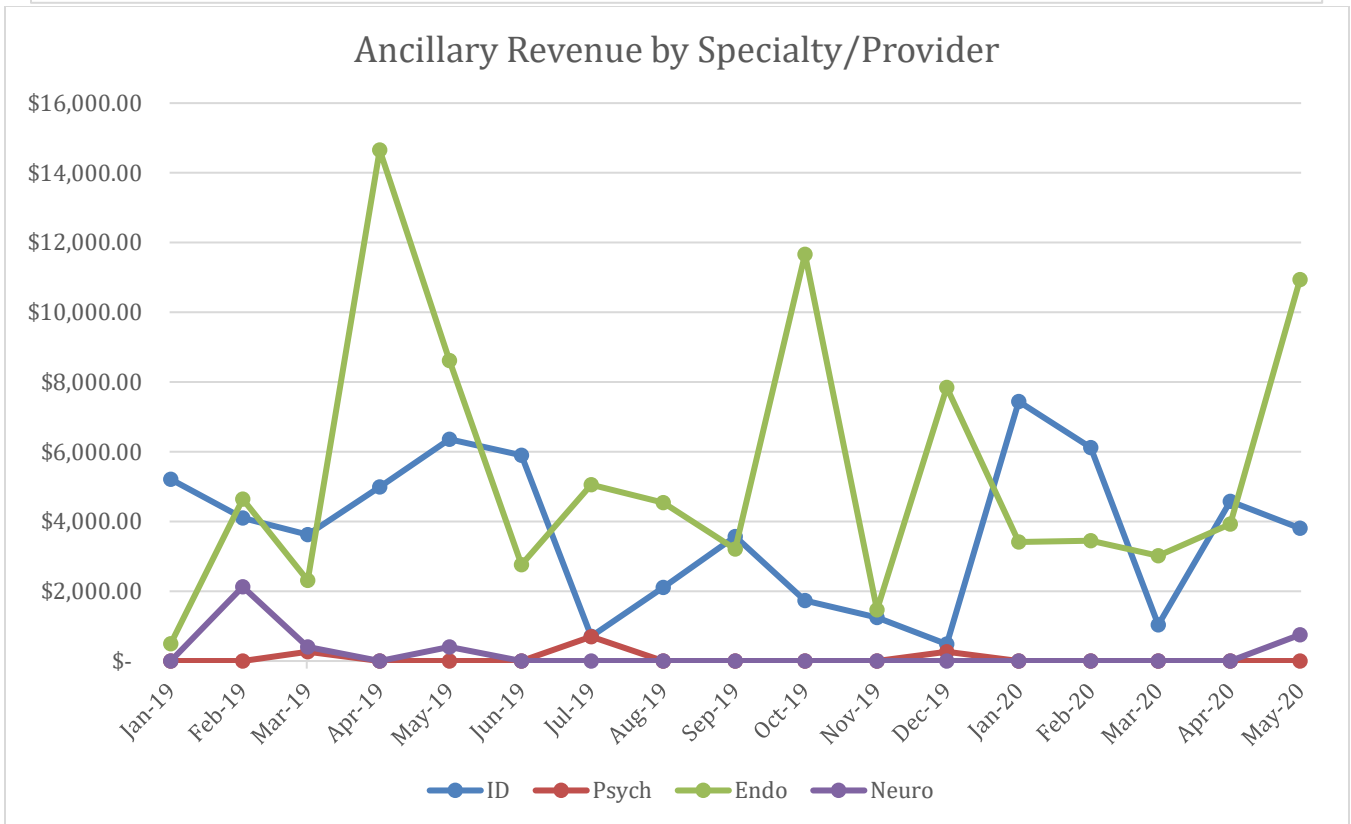
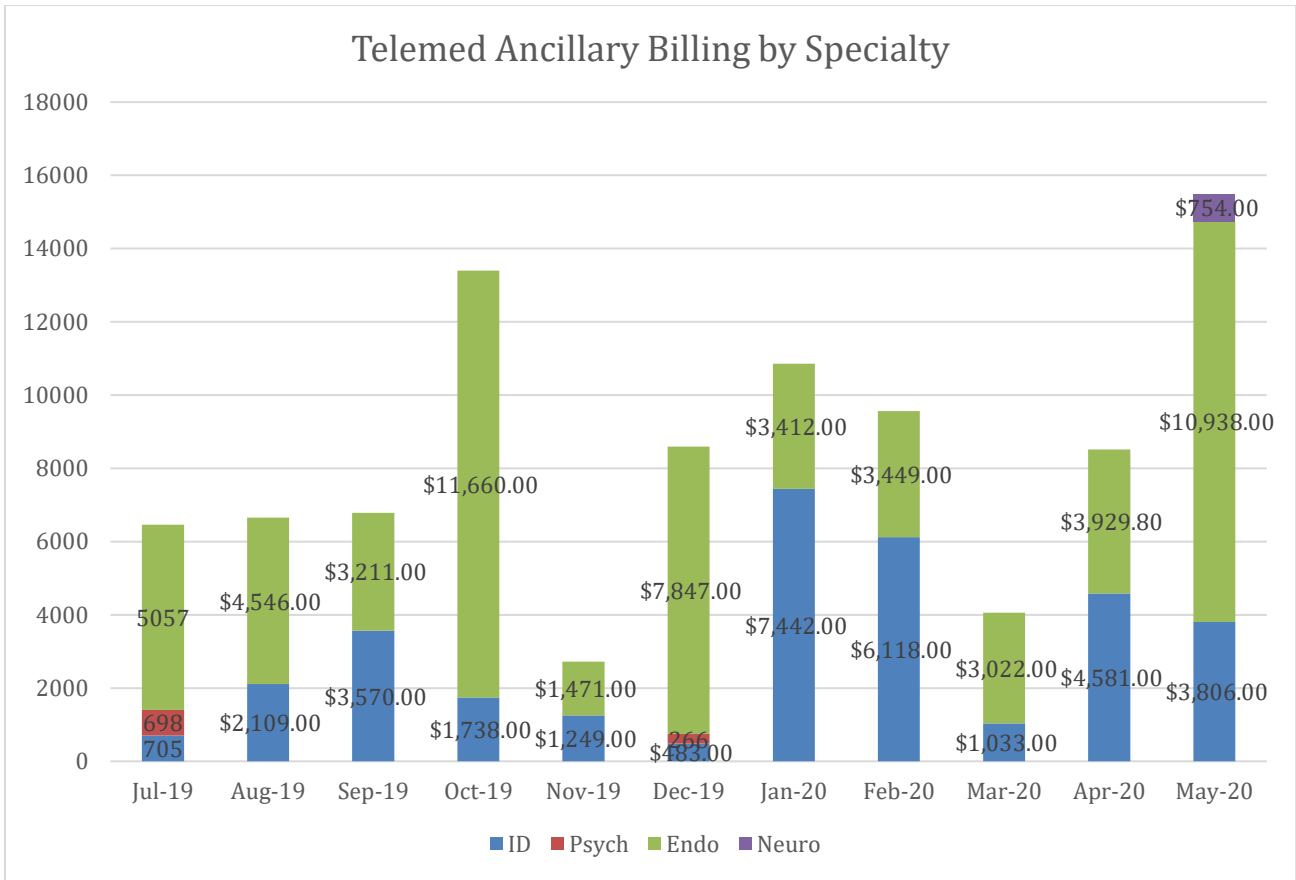
- To date, about 304 consults have taken place with this program. The last day services were offered at the school was March 12. We resumed services being offered at Mayers on May 1.
- Dr. Masters conducted 16 consults in May and Jill had her first block on May 29 with two students attending at MVHC in Burney.
- As of June 2 Jill is back in the office at MVHC so patients that see her will be with her in person for the course of the summer.
- We're bringing on one of our Site Coordinators, Sheri Crane, part time over the summer months to run the counseling program out of Mayers. She has more connections with the students and families because of her position in the school district and should be able to better reach out to students that weren't previously using the program. We look forward to her starting next week.
- I'm working on nailing down a date with the Superintendent for Dr. Masters to provide a webinar for staff and teachers at the schools. He already agreed that it would be a worthwhile educational resource for staff and requested that it happen in August.
- Sheba and I drew down grant funds again on April 3 in the amount of \$30,135.13. Our next draw down is scheduled for the end of July.
- Our quarterly Federal Financial Report – Cash Transaction was submitted on time on April 29<sup>th</sup>, again by Sheba and I.
- Our Noncompeting Continuation Report was successfully submitted on time and we received confirmation of Year 2 funding on May 18.

### Outpatient Consults by Specialty



### Total Telemed consults





**Helpdesk At A Glance**

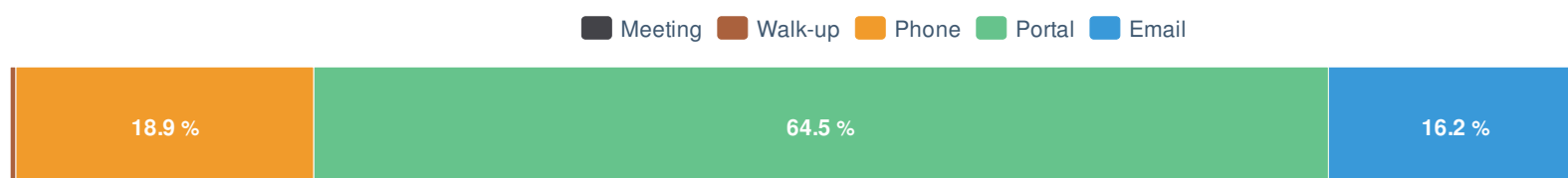
May 1, 2020 - May 31, 2020

Filtered by: Time Period: **May 1, 2020 - May 31, 2020**

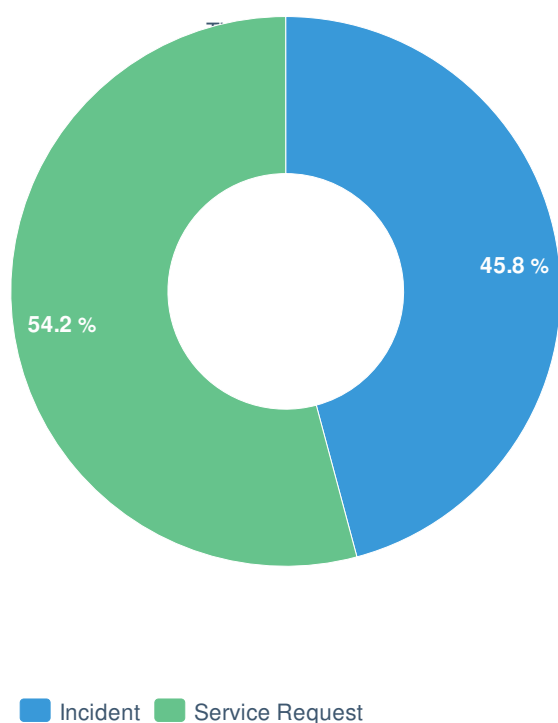
**Summary**

<b>445</b> ▼ 0.89%	<b>441</b> ▼ 2.65%	<b>34</b> ▲ 61.90%	<b>03:22</b> ▲ 181.67%	<b>11:05</b> ▲ 184.53%	<b>01:52</b> ▼ 29.74%
RECEIVED TICKETS	RESOLVED TICKETS	BACKLOG TICKETS	AVERAGE RESPONSE TIME (IN HRS)	AVERAGE FIRST RESPONSE TIME (IN HRS)	AVERAGE RESOLUTION TIME (IN HRS)
<b>1.3</b> ▼ 2.23%	<b>0.6</b>	<b>49</b> ▲ 2.08%	<b>140</b> ▲ 508.70%	<b>99.1%</b> ▲ 0.65%	<b>87.3%</b> ▲ 0.89%
AVERAGE CUSTOMER INTERACTIONS	AVERAGE AGENT INTERACTIONS	NUM. OF REOPENS	NUM. OF REASSIGNS	SLA %	FCR %

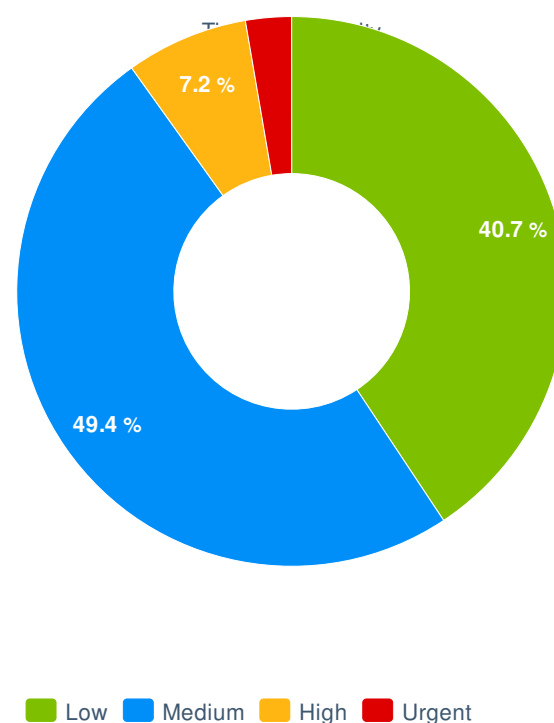
**Ticket by source**



**Tickets By Type**



**Tickets By Priority**



Activity ID	Activity Name	Orig Dur	Start	Finish	2020				
					Jun	Jul	Aug	Sep	Oct
<b>Mayers Memorial Hospital</b>									
<b>Executive Summary</b>									
<b>Project Overview &amp; Milestones</b>									
<b>Milestones</b>									
A4020	ED Expansion Construction Substantial Completion Date	0d		08-Jul-20*					
T11810	OWNER; Install Owner FF&E	0d	16-Jul-20						
T11900	Electrical Backfeed Completion	0d		20-Jul-20					
A3750	RFP Final Completion Date	0d		05-Aug-20					
<b>Construction</b>									
<b>Remaining Civil Site Work Scope</b>									
A5360	Landscaping	15d	26-May-20 A	29-Jun-20					
A5380	Set Flag Pole	2d	24-Jun-20*	25-Jun-20					
A5450	Slurry Coat over Asphalt	2d	28-Jun-20*	29-Jun-20					
A4750	Parking Lot Striping	1d	30-Jun-20	30-Jun-20					
<b>Exterior Finishes</b>									
<b>IMPACT 10: Existing Scope</b>									
A5040	Install Gutter and Drainpipe at Ambulance Canopy	2d	18-Jun-20*	19-Jun-20					
<b>Interior Finishes</b>									
<b>Existing Scope</b>									
<b>Lab Area</b>									
T11770	LCC Install of Owner Furnished Equipment (OFE)	2d	21-May-20 A	19-Jun-20					
T12100	Owner Installed FF&E	5d	09-Jul-20	15-Jul-20					
<b>Imaging Area</b>									
A5940	Owner Installed FF&E	5d	09-Jul-20	15-Jul-20					
<b>Emergency Area</b>									
A6210	LCC Install of Owner Furnished Equipment (OFE)	2d	11-Jun-20 A	19-Jun-20					
A6230	Owner Installed FF&E	5d	09-Jul-20	15-Jul-20					
<b>Lobby Area</b>									
A6500	LCC Install of Owner Furnished Equipment (OFE)	2d	11-Jun-20 A	19-Jun-20					
A6425	Install Sliding Glass Doors	4d	15-Jun-20 A	19-Jun-20					
A6520	Owner Installed FF&E	5d	09-Jul-20	15-Jul-20					
<b>Existing Hospital Re-Feed</b>									
A6730	Electrical Shutdown #1 EMA & EMB (TBD)	1d	09-Jul-20	09-Jul-20					
A6740	Electrical Shutdown #2 ICU & EME (TBD)	1d	10-Jul-20	10-Jul-20					
A6750	Electrical Shutdown #3 C & D (TBD)	1d	13-Jul-20	13-Jul-20					
A6790	Electrical Shutdown #7 PT & PT-B (TBD)	1d	14-Jul-20	14-Jul-20					
A6760	Electrical Shutdown #4 H & J (TBD)	1d	15-Jul-20	15-Jul-20					
A6770	Electrical Shutdown #5 EMC & EMD & DP (TBD)	1d	16-Jul-20	16-Jul-20					
A6780	Electrical Shutdown #6 E & L (TBD)	1d	17-Jul-20	17-Jul-20					
A6800	Electrical Shutdown #8 Existing AHUs (TBD)	1d	20-Jul-20	20-Jul-20					
A4960	Demo Existing Electrical Shed	5d	21-Jul-20	27-Jul-20					
<b>Mechanical / Commissioning</b>									
A6600	Commissioning of Security/Telecom	8d	29-May-20 A	22-Jun-20					
T12480	Med Gas Certification Report	8d	02-Jun-20 A	19-Jun-20					
A6580	Door & Hardware Adjustments	3d	04-Jun-20 A	19-Jun-20					
A6620	Generate Test & Balance Report	5d	08-Jun-20 A	18-Jun-20					

	Remaining Level of Effort		Mile...
	Actual Level of Effort		No...
	Actual Work		Co...
	Remaining Work		
	Critical Remaining Work		

**Data Date: 17-Jun-20**  
**Run Date: 18-Jun-20**  
**Project: 16234**

**Mayers Memorial Hospital**  
**Layton Construction Company**  
**18-Jun-20 - Schedule**  
**To Do**



Activity ID	Activity Name	Orig Dur	Start	Finish	2020				
					Jun	Jul	Aug	Sep	Oct
T12280	Generator Load Bank Test	3d	15-Jun-20 A	18-Jun-20					
A6630	Subcontractor Worklist Complete	3d	15-Jun-20 A	22-Jun-20					
T12500	Commissioning of Lighting Control System	3d	17-Jun-20 A	19-Jun-20					
T12520	Nurse Call Testing	5d	17-Jun-20 A	19-Jun-20					
A6660	Fire Alarm Testing with IOR	2d	18-Jun-20	19-Jun-20					
A6830	Electrical Testing (Simulate Loss of Power)	1d	19-Jun-20	19-Jun-20					
A6640	MEOR Review Test & Balance Report	2d	19-Jun-20	22-Jun-20					
T12490	MEOR Review Med Gas Certification	1d	22-Jun-20	22-Jun-20					
T11800	GBD Punchlist	3d	22-Jun-20	24-Jun-20					
T11850	Commissioning Final with RSA Cx	5d	23-Jun-20	29-Jun-20					
T11820	OSHDP Inspection & Closeout (Occupancy)	10d	24-Jun-20	08-Jul-20					
A6650	GBD Punchlist Complete	5d	25-Jun-20	01-Jul-20					
T11870	OSHDP Document Close-Out	5d	30-Jun-20	07-Jul-20					
T11880	CDPH Review (Licensing)	20d	09-Jul-20	05-Aug-20					





## Mayers Memorial Hospital District

*Always Caring. Always Here.*

### **Executive Director of Community Relations & Business Development – Valerie Lakey June 2020 Board Report**

#### **Legislation/Advocacy**

The State Budget has been a large part of our advocacy. We have been in contact with all of our representatives helping to promote CHA's advocacy of funds directed to California hospitals to help ease the burden of COVID. The budget passed on June 15<sup>th</sup> by the Legislator did not include that ask. Recent reports by the California Healthcare Foundation and the consulting firm, Kaufman Hall project that the losses for California Hospitals could be \$15 billion by the end of the year.

Although the budget was submitted by the legislator, that was out of necessity due to deadline. It is a placeholder budget and negotiations will continue. With the tax deferrals to July 15, much depends on state tax collections and what federal assistance will look like. The one bright note is that the legislator rejected the administration's proposal that would cut the amount of managed Medi-cal care plans that would pay for patient care. That proposed cut was \$500 million. It is expected the budget process could go clear into August.

AB2537, the PPE bill has made it to the Senate. This is an "Opposed – unless amended position". CHA and ACHD are working hard to advocate for amendments that would make the PPE bill "do-able". There is rumor that there will be other bills of the same nature put out, specifically one by SEIU which would address all frontline workers and PPE, not just healthcare. We are following this closely as a part of the statewide advocacy.

There is also an effort to see if we can get waivers issued during COVID regarding bed space, licensure and staff extended through March 31, 2021. In addition to the potential resurgence of COVID, we will also be up against a regular flu season this fall. There should be some news on this within the next week.

We continue to follow and advocate for all bills that would have significant effects on healthcare.

#### **Marketing/Public Relations/Recruiting**

The last month has been busy playing catch-up with various projects for hospital departments. Specifically, we have been working with the Hospice Department to develop a comprehensive brochure titled "Having the Conversation". We are also working on developing a Hospice website and new Hospice logo.

In the Respiratory Department we have been working on a letter to local businesses, a flyer highlighting services and putting a plan together to educate the public with what we can do at MMHD in the department. The goal is to increase PFT's and other services.

For the Retail Pharmacy we have been highlighting the ease of transferring a prescription and that the storefront is again open.

Other marketing work is happening with Outpatient Services, Cardiac and overall MMHD image.

On the Recruiting front, we are working together to “market” our community to potential employees. We have a visit in July in which we will be setting up community visits, real estate tours and appealing to the interests of the candidate and spouse. We have a good system now in which Human Resources connects me with candidates and we are able to see what the candidate is interested in and cater to those interests.

COVID didn’t help our “Planting Seeds, Growing Our Own” projects this spring as we were not able to get into the schools. We did, however, select two interns for the summer with our Senior Intern Program. We have Natalie Osborne from Fall River High School and Cassie Stevenson from Big Valley High School. Both interns are rotating in a few different departments and will also contribute volunteer hours to the Foundation.

This fall we will be doing a website re-design, so we are working through ideas for appearance and functionality.

#### **Disaster/Emergency Preparedness**

We are excited to be near completion of the new Emergency Preparedness Phone App. It has been a lengthy project that was partially stalled by all of the COVID activity. I look forward to showing you all how this will work. It will be a great resource that will allow staff to have all the Emergency Preparedness information they need on a phone. Also included on the App is survey readiness and infection control information.

Our FastCommand System that is connected to our website will be functional next month. This is a portion that will assist in emergencies. I will provide a demonstration within the next couple of months.

The Shasta County EOC is still operating. Plans continue for an ACS if needed. The County has put together a dashboard with current data showing COVID risks within the county. You can view the dashboard at [www.shastaready.org](http://www.shastaready.org). It is updated daily.

We have reduced the frequency of the COVID Memos, but feel it is still important for staff to be informed. Throughout the state we are seeing 65,000 +/- tests conducted daily. Shasta County is averaging over 100. The state has gone from an initial positivity result of 40.8% to a current positivity rate of 4.5%. There has been a decrease in ICU patients and the hospitalization rate is steady. Of the 3000 +/- patients all but about 200 are in the southern part of the state.

If you have any questions, please let me know.