Chief Executive Officer Louis Ward, MHA



Board of Directors
Jeanne Utterback, President
Beatriz Vasquez, Ph.D., Vice President
Tom Guyn, MD, Secretary
Abe Hathaway, Treasurer
Tami Vestal-Humphry, Director

Board of Directors
Quality Committee
Minutes
March 10, 2021 @ 1:00 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	CALL	L MEETING TO ORDER: Board Chair Jeanne Utterback called the meeting to order at 1:01 pm on the above date.				
		BOARD MEMBERS PRESENT:	STAFF PRESENT:			
		Jeanne Utterback, President	Louis Ward, CEO			
Tom Guyn, MD., Secretary			Candy Detchon, CNO			
			Jack Hathaway, Director of Quality			
		ABSENT:	Dawn Jacobson, Infection Control			
			Jessica DeCoito, Board Clerk			
		Community Members Present:	Michelle Peterson, Outpatient Medical			
		Laura Beyer	Pam Sweet, Med Staff			
,			Theresa Overton, Director of Nursing – Acute			
			Moriah Padilla, Assistant Director of Nursing - Acute			
2	2 CALL FOR REQUEST FROM THE AUDIENCE – PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS					
	None	ON REQUEST FROM THE ADDIENCE - POBLIC COMMENTS ON	TO SPEAK TO AGENDATIENS			
	None					
3	APPR	ROVAL OF MINUTES				
	3.1	A motion/second carried; committee members accepted the	minutes of February 10,2021.	Guyn,	Guyn – Y	
				Hathaway	Utterback – Y	
					Ward – Y	
					Hathaway – Y	
					Beyer –	
					Abstain	
					(absent)	
4		eports for: Quality Facilities, Staff or Finances				
5	REPO	RTS: QUALITY PATIENT SERVICES				
	5.1	Outpatient Medical: First Wound Clinic with Dr. Syverson was Monday, March 8 th and went really well. MHF provided a \$16,000				
		grant to help us purchase new equipment for pressure relieving, for all MMHD patients (SNF and Acute are included). Working				
		on the process to streamline the referral process with patients from the clinic when it opens. Maintenance has been AMAZING in				
		all of our department moves due to COVID. And a BIG THANK YOU to MHF and the donors who have provided us the				
		opportunity to purchase equipment for better patient care. Thank you to the Pharmacy for the temporary set up of Pyxis so we				
		have quick access for our patient needs.				
	5.2	Med Staff: Concentration is on the COVID Vaccination scheduling. Practitioner Record Keeping process takes a lot of time to keep				
		up to date and it's always a priority.				
	5.3	Acute/Swing: COVID has been a common theme hospital wide and navigating the many changes that it has brought on.				
		December was our big surge in COVID which required our Stat	tion 1 Acute Wing to move to Stat	tion 3 to allow for	the COVID	

		surge plan. Teamwork played into the move and set up for our patients. We will be moving back into Station 1 area this next				
		week with a new and improved Nurse Call System. Visiting hours have been established for visits on the Acute floor.				
	5.4 Outpatient Surgery: Hit hard with closure due to COVID. We closed November and just opened back up this last week wi					
		Orthopedic and Scope surgeries. Our Steris Hot Water machine has been repaired during the closure. CRNA coverage has				
		continued to be difficult. Thank you to Jeanette our Scrub Tech for keeping the Surgery Department prepped and ready to go				
		when the closure ended. And thank you to Maintenance for all the help with all the moves we've made. Requested total				
		surgeries and total cancellations to be reported.				
	5.5	Blood Transfusion Quarterly: The Blood Transfusion process has been in a changeover cycle with the departure of our lab				
		manager. But Nurse Administration and HIM are working on streamlining the process and working on getting everything ready				
		to go. Lab: we've been searching for a Lab Manager for over a year now, and we hired an Interim Manager that diligently				
		worked on updating our policies and procedures in the lab. We are hiring a lab consultant to mentor a current team member to				
		become a lab manager and to help close up any gaps the lab currently has.				
	5.6	SNF Events/Survey: The most recent survey went really well and was very in depth. In April, we plan to see CDPH picking back up				
		on surveys. Leslie, our survey consultant, will come in and provide mock surveys for us so that we are prepared and ready for the				
		next survey season to begin. In the process of opening up for SNF visitations with restrictions still in place, but new regulations				
		coming out are starting to relax.				
	5.7	Infection Control: Focus is on COVID vaccinations. And employees have been great about completing their weekly testing.				
		Changes in the weekly testing requirements could be changing with regards to employees outside of the clinical departments.				
6	DIREC	TOR OF QUALITY				
		Compliance Quarterly: Very on point with all the survey reports. Self-reports have raised the bar and we will continue to				
	6.1	perform those so we make solutions and adjustments in house. RL6 is an electronic reporting platform for accidents, issues,				
		concerns.				
		Director of Quality Update: Thank you to Jack for writing out all the abbreviations. Last Prime report is due at the end of the				
	6.2	month and the program will end. Looking forward to the QIP4 because we have the clinic and it will have a positive impact to the				
		community. And the new EMR for the clinic will be an easier platform for us to maintain the reporting on this.				
7	ADM	NISTRATIVE REPORT: Vaccination compliance poster will be shared throughout the hospital to reach a MMHD Facility wide goal				
	of 809	of 80% Vaccinated. Denominator could change with certain classes of declined responses, ie. Medical, have already tested positive for				
	COVII	OVID, pregnancy, etc. Incentive if goal is reached is being talked about with ideas around PTO, gift cards, etc. and would go to each				
		nployee at MMHD regardless of receiving the vaccine or not. Focus is on the \$1.9 trillion bill just approved – Rural Hospitals are				
	addre	dressed in the bill for funding. Once the text is available, we will be reading it to understand what and how we are affected. Epic demo				
	is beir	eing scheduled for the hospital EMR. Clinic Construction Fire Inspection went well with one condition and we should meet that this				
	1	ek. Next week will be the county inspection and then we should have both documents in hand to file for Licensure. Jobs are posted				
	1	applications are starting to come in. Demo project bids were received and under review currently. We will have a Special Board				
		ting on the 24 th to award the contract. Lots of in house moves taking place to prepare for the demolition project.				
8		R INFORMATION/ANNOUNCEMENTS: Bring up at Board Meeting with regards to Strategic Planning – mobile lab clinic and tie it				
	1	into Home Health Care and enhancing the Imaging department. Ask if there are other ideas to research or review before the Strategic				
		nning Review session.				
9	ANNO	DUNCEMENT OF CLOSED SESSION				
	Medi	Medical Staff Credentials: Government Code 54962				
	STA	STAFF STATUS CHANGE				
	1	Robert Adams, DO to Inactive				
	2. Latisha Smith-Chase, MD to Inactive					
	3. Henry Patterson, OD to Inactive					
	1	4. Steven McKenzie – Add a Service Location 4. Steven McKenzie – Add a Service Location				
		AHP (Allied Health Professional) APPOINTMENT				
	1	2. Andrew Ewell, CRNA				
	3.	· ·				
	3. 4.	Shazmin Gangji, PA				
		(Allied Health Professional) REAPPOINTMENT				
1		prince recent reference in the relativistic				

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.

David Nicholson, CRNA

2. Heather Corr, PA

MEDICAL STAFF REAPPOINTMENT

- 1. Lara Zimmerman, MD
- 2. Lin Zhang, MD
- 3. Alan Yee, DO
- 4. Ge Xiong, MD
- 5. Vicki Wheelock, MD
- 6. Massuc Seyal, MD
- 7. Ajay Sampat, MD
- 8. David Richman, MD
- 9. Katherine Park, MD
- 10. John Olichney, MD
- 11. Kwan Ng, MD
- 12. Ricardo Maselli, MD
- 13. Ryan Martin, MD
- 14. Norika Mallhado-Chang, MD
- 15. Marc Lenaerts, MD
- 16. Jeffre Kennedy, MD
- 17. Alexandra Duffy, DO
- 18. Charles DeCarli, MD
- 19. Ashok Dayananthan, MD
- 20. Matthew Chow, MD
- 21. Michelle Apperson, MD
- 22. Kevin Keenan, MD
- 23. Olivia Tong, MD
- 24. Tommy Saborido, MD
- 25. Aditi Bhaduri, MD
- 26. Allen Morris, MD

MEDICAL STAFF APPOINTMENT

- 1. Khalil Zahra, MD
- 2. Paul Guisler, MD
- 3. Sindhura Batchu, MD
- 4. Orwa Aboud, MD
- 10 **RECONVENE OPEN SESSION REPORT CLOSED SESSION ACTION:** Medical Staff Credentials were moved, seconded and carried. Unanimous consent to approve credentials.
- 11 ADJOURNMENT: Next Regular Meeting April 14, 2021

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