

Chief Executive Officer  
Christopher R Bjornberg



**Board of Directors**  
Abe Hathaway, President  
Jeanne Utterback, Vice President  
Tom Guyn, M.D., Secretary  
Tami Humphry, Treasurer  
Lester Cufaude, Director

**Quality Committee  
Meeting Agenda**

June 22, 2023 1:00 PM

Microsoft Teams Meeting: [LINK](#)

Call In Number: 1-279-895-6380

Phone Conference ID: 832 561 829#

Meeting ID: 227 521 666 830

Passcode: Zjq7it

**Attendees**

Tom Guyn, M.D., Quality Committee Chair  
Les Cufaude, Director

Chris Bjornberg, CEO  
Jack Hathaway, Director of Quality

1	<b>CALL MEETING TO ORDER</b>	Chair Tom Guyn, M.D.			<b>Approx. Time Allotted</b>
2	<b>CALL FOR REQUEST FROM THE AUDIENCE - PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS</b>				
3	<b>APPROVAL OF MINUTES</b>				
	3.1	Regular Meeting – May 18, 2023	Attachment A	<b>Action Item</b>	2 min.
4	<b>HOSPITAL QUALITY COMMITTEE MINUTES 6.6.2023</b>		Attachment B	Report	10 min.
5	<b>DIRECTOR OF QUALITY</b>	Jack Hathaway		Report	10 min.
6	<b>OTHER INFORMATION/ANNOUNCEMENTS</b>			Information	5 min.
7	<b>ADJOURNMENT: Next Regular Meeting – June 19, 2023</b>				

Agenda Posted 6/19/2023

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

May 18, 2023 @ 1:00 PM  
Fully Remote Teams 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 Tom Guyn, M.D. called the meeting to order at 1:02 pm on the above date.		
	<b>BOARD MEMBERS PRESENT:</b>	<b>STAFF PRESENT:</b>	
	Tom Guyn, MD., Secretary Les Cufaude, Director	Jack Hathaway, Director of Quality Jessica DeCoito, Board Clerk	
	<b>Excused ABSENT:</b>		
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 April 21, 2023.	<b>Hathaway, Cufaude</b> <b>Guyn – Y Cufaude- Y</b>
4	<b>Hospital Quality Committee Report:</b> May meeting was pushed to June. This has allowed our group more time to pull their metrics and measures.		
5	<b>Director of Quality Report</b>		
	5.1	<p>We recently went through our relicensing survey with CDPH. Nine deficiencies came up to address, but none of them are life threatening issues. We have yet to get our Statement of Deficiencies and Form 2567. We were able to identify that our St. 2 floor and Burney Annex floor have some slight differences that will need to be realigned.</p> <p>The specific opportunities for our ACHC Project Plan have been assigned with Executive Leadership Team and their team members. They will work on addressing these opportunities to prepare for the survey for accreditation.</p> <p>Peer Review Tracking was reviewed.</p> <p>Fire Life Safety came the week after our Skilled Nursing Facility. There were 12 deficiencies found but nothing of high importance. The Statement of Deficiencies was received and a plan on correction is being worked on.</p>	
6	<b>OTHER INFORMATION/ANNOUNCEMENTS</b>		
7	<b>MOVE INTO CLOSED SESSION</b>		
	7.1	<p>MED STAFF CREDENTIALS GOVT CODE 54962</p> <p><b>STAFF STATUS CHANGE</b> Michael Dillon MD to Inactive Arun Kalra, MD to Inactive Dianesh Ravindran, MD to Inactive Mohamad Ghraawi, MD to Inactive Olivia Tong, MD to Inactive</p>	<b>Approved by All</b>

	<p>Ashok Dayananthan, MD to Inactive  Lewis Furber, JR, PA to Inactive  Adam Gardizi, CRNA to Inactive</p> <p><b>AHP REAPPOINTMENT</b>  Sharon Hanson, NP  Heather Corr, PA</p> <p><b>MEDICAL STAFF APPOINTMENT</b>  Thomas Edholm, MD- Emergency</p> <p><b>MEDICAL STAFF REAPPOINTMENT</b>  Sophia Teng, MD (UCD)  Kevin Keenan, MD (UCD)  Elizabeth Ekpo, MD (UCD)  Mustafa Ansari, MD (UCD)  Dan Dahle, MD  Chuck Colas, DO</p>		
8	<b>RECONVENE OPEN SESSION</b>		
9	<b>ADJOURNMENT:</b> at 1:42 pm Next Meeting is June 22, 2023 at 1:00 pm		

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).

**MAYERS MEMORIAL HOSPITAL DISTRICT  
MEDICAL STAFF QUALITY COMMITTEE  
MEETING**

June 6, 2023 - 0900 - FRM Board room

**MINUTES**

**In Attendance:**

<b>SUBJECT</b>	<b>DISCUSSION</b>	<b>ACTION</b>
<b>I CALL TO ORDER</b>	The meeting was called to order at 0903	
<b>II NEW BUSINESS</b>	<p><b>FINANCE DIVISION</b></p> <p>Admitting – Amy Demographics</p> <ul style="list-style-type: none"> <li>• Accurately collected patient data spreadsheet reviewed.</li> <li>• Need a process/script for collecting the awkward data such as SOGI and health equity</li> </ul> <p>HIM – Lori</p> <ul style="list-style-type: none"> <li>• Have OPPE data and will be able to show it to the committee.</li> <li>• Also will look at providers number of cases in the ER per day</li> </ul> <p>Purchasing - Rachel</p> <ul style="list-style-type: none"> <li>• Has started a log of supply expiration dates. Jack is assisting with with putting in Excel. Expect Cerner will show expiration dates and flag.</li> </ul> <p>Business Office – Danielle</p> <ul style="list-style-type: none"> <li>• Talked about UR. Have hired an UR nurse. <ul style="list-style-type: none"> <li>○ Creating a baseline using data from the 1<sup>st</sup> half of 2023</li> </ul> </li> <li>• Also look at AR days. Split data to show AR days for LTC, clinic, hospital and swing</li> </ul>	<p>Amy will create a script for collecting SOGI</p>

## **OPERATIONS**

### Housing – Joey

- Using stay experience data from travelers collected through Survey Monkey
- Looking at turn around to to prepare rooms after check out
- Calculating the number of no shows and those who stay at the lodge, but don't show up for work.

### Environmental Services - Sherry

- Have raw data on cost per piece of linen vs. damaged linen by item.
- Starting a log of stain sources

### Dietary - Jennifer

- Skilled POC was accepted. Were 2 tags for kitchen.
- Jack will work with Susan on building a standard work for cleaning. Potentially overlap of 1 hour of morning and afternoon shifts to manage ongoing cleaning.

Jack will meet with Jennifer and Susan to set up standard cleaning schedules

### Maintenance - Alex

- Alex will bring fire/life/safety inspection data. Will have each piece met or not met and which tag they are associated with. Will have for next month's meeting.

### IT - Jeff

- System outages
- Ticket report. Pull monthly to look for trends

### Clinic - Kimberly

- Reviewed charts on hemoglobin, blood pressure control, childhood immunizations, colorectal cancer screening and cervical cancer screening. This is all data we are collecting for Partnership.

## **NURSING**

### Acute - Moriah

- Quietness of Hospital – trending down. Stop lights didn't work. Ask staff what we can do to help with noise.
- Discharge info – is at benchmark

OP Med - Michelle

- No data received

SNF - Britany

- Decreased ability with ADL (Active Daily Living)
- Decreased ability to move independently
- Falls with serious injury
- QISO (Nursing Questionnaire on Organizational Health) reports are pulled regularly

Staff Dev - Brigid

Activities – Sondra

Social Services - Marinda and Steven

- Tracking grievances.
- Reviewed 5-Star Report

Theresa

- Transfer doc – provider documentation is often missing or lost.
  - 68% decrease in accuracy over last Q of 2022.
  - Jack will review the last quarter. Trend is going the wrong direction.
- Moving forward with UR nurse, capturing data will be more in depth and appropriate.

**CLINICAL**

Lab - Sophia

- Hood did not meet specifications. Problem has been resolved
- Blood is quarterly. Can we look at micro-rate.

Telemedicine - Amanda

Physical Rehab - Daryl

Radiology

- In process of getting CT scan accreditation

Hospice - Lindsey

- Days and patient satisfaction
- Still need help with excel

Retail Pharmacy - Kristi

- Hazardous drug labelling process completed.
- Error tracking

Respiratory - David

- Sputum collection measures

Pharmacy - Keith

- Night shift pharm turn around time trending the wrong way. Has meeting set to brainstorm solutions.
- Med reconciliation is quarterly data – nothing to report this quarter
- Hood certification – did not pass certification
- Sterile processing – gone to hood down process.
- IV Pump – opportunity to report what was used

## **PUBLIC RELATIONS, HR & QUALITY**

PR - Val

- Targeted employee communication
- Web site views
- Social media
- Partnership pcp qip.for clinic

Libby

- Empl satisfaction.
- Communication surveys – finish this month.

Cassandra

- 1<sup>st</sup> quarter report of infection reviewed
- Hand hygiene numbers really low at beg in quarter

Chris reiterated – departments should have already sifted through data. Send info to Pam prior to meetings so she can put in a Power Point.

**III  
ADJOURNMENT**

The meeting was adjourned at 11:34