



**EASTERN PLUMAS HEALTH CARE DISTRICT
REGULAR MEETING OF THE BOARD OF DIRECTORS
MINUTES**

Thursday, May 27, 2021 at 9:30 a.m.

1. Call to Order

Meeting was called to order at 9:46 a.m. due to technical issues.

2. Roll Call

Board: Gail McGrath, Board Chair; Paul Swanson, M.D., Vice Chair; Teresa Whitfield, Board Member; Linda Satchwell, Board Member; and Augustine Corcoran, Board Member.

Staff in attendance: Doug McCoy, CEO; and Jessica Folchi, Executive Assistant

3. Board Comments

No comment was received.

4. Consent Calendar

ACTION: Motion was made by Director Whitfield, seconded by Director Swanson to approve all items on the consent calendar.

AYES: Directors McGrath, Satchwell, and Corcoran

NAYS: None

5. Auxiliary Report

Nothing new to report.

6. Staff Reports

A. Infection Control/COVID-19

Michelle Romero

Doug McCoy reported for Michelle Romero: COVID cases continue to decline, and we only have 1 staff member out with COVID right now. We plan on offering the Pfizer & J&J vaccine in our clinics in the next couple of weeks, possibly sooner. The doses will be given to us by PCPHA, and offered to all clinic patients. We are currently experiencing an outbreak of GI illness among PSNF staff and residents. Visitors are being restricted, and we are working with CDPH & PCPHA to mitigate the impact of this illness on our residents and staff.

B. Chief Nursing Officer Report

Penny Holland

Donna Dorsey reported on behalf of Penny Holland. The emergency department and administration has been working with Plumas County Sheriff's Department and other local hospital to create a procedure with 5150 patients. The VA is now referring local patients for endoscopy procedures.

C. Chief Financial Officer Report

Katherine Pairish

See attached April financial reports.

7. Chief Executive Officer Report

Doug McCoy

OPERATIONAL PLAN OVERVIEW: EPHC posted a second straight month of stronger revenue and net income performance for April with a net income over budget by 1.35M. Swing bed volume increased over the prior months after being reopened due to COVID surge preparation in mid-March. We continue to see strong performance in outpatient revenue, rehabilitation, and SNF revenue following a rate adjustment in March.

Our 'Ignite the Patient Experience' training on May 18-19 was very successful and included participation from several community members. Custom Learning Solutions which led the sessions will be providing us with a three year implementation plan focused on improvement of our HCAHPS scoring, a single customer service survey system for the campus, growth strategies across all service lines, improved EPHC branding, and employee engagement. Based on post-training feedback our management team supports utilizing CLS to assist us in implementing the strategies and continue ongoing education/training activities.

CMS notified EPHC that our SNFs have now been identified to be 3-star facilities. Prior to this announcement we were listed as a 1-star, so this new designation represents the significant work that Lorraine and her team have done to improve quality metrics, staffing, and other areas impacting this rating system. We are very excited for this announcement and recognition for the work done by our entire SNF team!

The Loyalton Clinic replacement building purchase should be completed by early June. Both the current tenants and community members have expressed excitement with our plans for expanding services in the community. Design plans have been completed and will double our exam rooms, increase provider space, and allow expansion for additional services to be delivered in Loyalton. Upon completion of the purchase we will complete the final design plans and begin the permitting and contractor selection process. Once that process is completed, we anticipate construction taking 4-6 months.

Our new patient experience/feedback program continues to grow with a new customer survey process initiated in several departments including rehab, lab, and all three clinics. Comment cards are shared with employees and included in review of employee of the quarter candidates and posted on the EPHC website. We look forward to continued growth in this program to share valuable feedback with the community and be part of our ongoing quality assurance process.

PERSONNEL CHANGES: EPHC is pleased to announce the addition of two new providers joining our clinic team. Dr. Catherine Colpitts will start as a new provider at the Graeagle Clinic on June 1st. Dr. Colpitts grew up in the Squaw Valley area and was recently a provider with Tahoe Forest Hospital. She will be providing services in Graeagle 3 days per week and we are looking forward to having her serve the patients in the community. Dana Culp is a Nurse Practitioner coming to us from the Bay area and lives in Graeagle. She will be working full time starting June 1st at the Portola Clinic and assist with same day/walk in appointments as well as established care visits. We are very excited to be welcoming both Dana and Catherine to our team!

After 23 years of service, Rick Boyd will be retiring at the end of this month. Rick had provided outstanding support in building and managing our IT systems during his tenure and supported the transition to ProTechnical last year. We also will be celebrating the retirement of Julie Walker who leaves EPHC after 13 years of service. Julie has held several roles with us including her most recent role as our clinical informatics specialist. Julie has been invaluable in her support of our physician and department IT workflows. Both Julie and Rick will be missed and we sincerely appreciate their excellent service to our campus!

EMR/IT: Our EMR demonstration projects continued during the month with an initial presentation by EPIC on 5/20 and a full department system demo by Cerner on 5/25. The

primary goal is to determine a single use platform for all EPHC business lines and financial functions. We have received a financial cost analysis and implementation proposal from Cerner for their system and continue to research third party hosting options with EPIC as they do not directly host their platform. Additional considerations include onsite versus cloud-based hosting, SNF functionality, ease of provider access/documentation, patient portal support, and monthly subscription costs.

EPHC will initiate the migration from Google to Microsoft 365 beginning the 1st of June. This migration will increase individual user access, provide additional software platforms for staff use, and increase overall security management. The migration will be done by department and has been carefully communicated to staff to avoid any confusion.

EPHC is pleased to announce the launch of a new cardiac monitoring program starting this month. The Zio Patch system will replace the use of Holter monitors and provide patients with cardiac monitoring at home for up to 14 days. This system will allow providers with remote monitoring over a longer period versus the prior system, and improve the delivery of results to both primary care providers and cardiology.

On May 6th we submitted a 1.2 million dollar grant request to the FCC for the procurement of both campus and remote telemedicine monitoring systems as well as enhanced network equipment.

QUALITY/REGULATORY: CMS notified EPHC on May 21st that we were in excess of the 96-hour in-patient requirement for the 2018/19 fiscal year. EPHC will be required to submit a plan of correction within 20 days to address this issue. Based on internal review both the 2019-20 and 2020-21 fiscal years are under the 96-hour threshold. We anticipate acceptance of our plan and ongoing compliance with this issue.

An abbreviated standard SNF survey was conducted on May 17th. No deficiencies were identified.

8. Policies

Director Whitfield questioned the minor policy details to be reviewed.

ACTION: Motion was made by Director McGrath, seconded by Director Corcoran to approve the policies as submitted.

AYES: Directors Whitfield, Satchwell, and Swanson.

NAYS: None

9. Committee Reports

A. Finance Committee: Director Swanson reported that patient volumes are improving, and we have a great amount of cash on hand.

10. Ignite the Patient Experience Seminar

Discussion was held on the recent Ignite the Patient Experience Seminar on May 18 and 19. Director Satchwell and McGrath shared their positive perspective from their participation in the seminar. EPHC will move forward with the long-term program.

11. Public Comment

No comment was received.

12. Board Closing Remarks

Director McGrath apologized for the technical difficulties at the beginning of the meeting but was happy to be hosting the meeting in the Loyalton Skilled Nursing for the first time in over a year and a half.

Open Session recessed at 10:27 a.m.

13. Closed Session

- A. Public Employee Performance Evaluation (Government Code Section 54957)
Subject Matter: CEO
Discussion was held on a privileged item.

14. Open Session Report of Actions Taken in Closed Session

The Board returned at approximately 11:10 am. No action was taken.

15. Adjournment

Meeting adjourned at 11:12 a.m.

DRAFT