

**EASTERN PLUMAS HEALTH CARE DISTRICT
REGULAR MEETING OF THE BOARD OF DIRECTORS
Thursday, April 25, 2013
10:00 A.M.
EPHC Education Center, Portola, CA**

Agenda

REASONABLE ACCOMMODATIONS: In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting please contact the Clerk of the Board at (530) 832-6564. Notification 72 hours prior to the meeting will enable the Eastern Plumas Health Care to make reasonable arrangements to ensure accessibility.

	<u>Presenter(s)</u>	<u>I/D/A</u>	<u>Page(s)</u>
1. Call to Order	Gail McGrath	A	
2. Roll Call	Gail McGrath	I	
3. Consent Calendar	Gail McGrath	A	
(A) Agenda			1-3
(B) Meeting Minutes of 3.26.13 Standing Finance Meeting			4
(C) Meeting Minutes of 3.28.13 Regular Board Meeting			5-9
(D) Meeting Minutes of 4.3.13 Special QA Meeting			10
4. Board Chair Comments	Gail McGrath	I/D	
5. Board Comments	Board Members	I	
6. Public Comment	Members of the Public	I	
7. Auxiliary Report	Kathy Davis	I/D	
8. Outpatient Clinics Update	Mark Schweyer	I/D	11-31
9. Chief of Staff Report	Eric Bugna, MD	I/D	
10. Quality and Performance Improvement Plan	Gail McGrath	I/D/A	32-39
11. Resolution 240: Confidential Closed Session Minutes	Gail McGrath	I/D/A	40-42
12. Policies and Procedures Reviewed on 3.15.2013	Teresa Whitfield	I/D/A	
• Fentanyl Patch (Physician Order)			
• Infection Control Plan			
• Infection Control Committee			

- Emtala Patient Transfer Policy#AD22
- Light Sensitive Medications (addition to policy) #PH044
- Equianalgesic Table

- **HIM:**
 - Medical Record Abbreviations #HIM302
 - Release of Info Copying Costs #HIM313
 - Filing of Medical Records #HIM324

- **Dietary:**
 - Food Storage Policy
 - Calibration of Thermometer
 - Menus
 - Nutrition Screening and Assessment
 - General Food Preparation
 - Defrosting Meats
 - Food Storage
 - Emergency Services

- NPPA Standard Procedures
- CT Procedures Binder
- Laboratory Policy Binders:
 - OneTouch Service
 - Microbiology
 - Blood Bank
 - Hematology

- HCIS Disaster Binder
- Radiology Policy Binder
- Materials Management. Binder
- Hazardous Materials &Waste
- Instrument cleaning, clinic (processing instruments for autoclave sterilization)
- Inpatient cleaning procedures
- Policy and Procedure, Management of

13. Committee Reports

- Special QA Committee
- Standing Finance Committee

Board Members
McGrath/Kreth
Skutt/ McBride

I/D

14. Chief Financial Officer Report

- March Financials
- Other

Jeri Nelson

I/D

43-53

- | | | |
|---|--------------|-------|
| 15. Chief Executive Officer Report | Tom Hayes | I/D |
| <ul style="list-style-type: none"> • DP/SNF reimbursement cuts update • CT Scanner replacement update • Employee Satisfaction Committee update • Project List • California Department of Public Health Recertification Survey • Other | | |
| | | 54-57 |
| 16. Closed Session | Gail McGrath | I/D/A |
| <p>I. Closed Session, pursuant to Health and Safety Code 32155, to review reports on Quality Assurance.</p> <p>II. Closed Session, pursuant to Government Code Section 54957 to consider the following privileges and appointments to the medical staff:</p> <p style="padding-left: 40px;">A. Recommendation for Two Year Courtesy Privileges</p> <ul style="list-style-type: none"> • Peter Bloomfield, MD (ER/Hospitalist) • Marc Walter, MD (ER/Hospitalist) <p style="padding-left: 40px;">B. Update of Schedule 1 – Virtual Radiology</p> | | |
| 17. Open Session Report of Actions Taken in Closed Session | Gail McGrath | I |
| 18. Adjournment | Gail McGrath | A |

**EASTERN PLUMAS HEALTH CARE DISTRICT
SPECIAL MEETING OF THE STANDING FINANCE COMMITTEE
OF THE BOARD OF DIRECTORS
Tuesday, March 26, 2013
9:00 A.M.
EPHC's Administrative Conference Room**

Minutes

1. **Call to Order:** The meeting was called to order at 9:00 am by Jay Skutt
2. **Roll Call:**
Present: Jay Skutt and Janie McBride. Staff: Tom Hayes, Jeri Nelson, and Tiffany Williams
3. **Approval of Agenda:** The agenda was approved as submitted.
4. **Board Comments:** None.
5. **Public Comments:** None.
6. **CFO Report**
 - **February 2013 Financials:** Ms. Nelson gave a summary of February Financial results. She reported that our purchased services were up due to the CT rental as well as others items. Revenues were low while contractual adjustments and bad debt was higher than budgeted. It was also discussed that Portola Skilled Nursing Department needs to adjust staffing to reflect the lower volumes.
 - **Department of Health Care Service Letter:** A response from Department of Health Care Services regarding the DP/SNF cuts was provided and reviewed.
7. **DPSNF Cuts:** Mr. Hayes provided an update on the progress of discussions with DHCS on the DP-SNF cuts.

Adjournment: Mr. Skutt adjourned the meeting at 10:05 am.

Approved by

Date

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

Thursday, March 28, 2013

10:00 A.M.

EPHC Education Center, Portola, CA

Minutes

1. Call to Order.

The meeting was called to order at 10:02 am by Gail McGrath

2. Roll Call.

Present: Gail McGrath, Larry Fites, Janie McBride, and Jay Skutt

Absent: Lucie Kreth

Staff: Tom Hayes, CEO, Jeri Nelson, CFO, Dr. Eric Bugna, Chief of Staff, and Tiffany Williams, Administrative Assistant.

Visitors: Approximately 2 visitors were present at the start of the meeting

3. Consent Calendar.

Ms. McGrath stated that we need to remove two items from the agenda; under agenda item #10, Trauma Policies, and under agenda Item #16, Peter Bloomfield, both of which are not ready for approval.

Mr. Fites motioned to accept the consent calendar with the following change to the minutes: Page 7, #7 expansive should read “expensive”. Also, he asked to remove Item C from the consent calendar and to address it separately. A second was made by Ms. McBride. None opposed, the motion was approved.

Item C. Meeting Minutes of 2.28.13 Regular Board Meeting, Pages 5 & 6, #13, DP/SNF Reimbursement Cuts is missing the remainder of the paragraph. The Clerk of the Board stated that it is a printing error and that the remainder of the paragraph should read *DP/SNF cuts as well as our advocacy efforts. He also reported on a meeting that he had scheduled with Dianne Dooley, however she did not show up. In place of Ms. Dooley, Mr. Hayes along with six other hospitals and CHA staffers met with Ms. Dooley’s staff. Mr. Hayes has traveled to Sacramento several times and has been meeting with several different legislators including; Ted Gaines, Brian Dahle, and Dan Logue. CHA will be beginning a PR campaign to publicize the cuts. Mr. Hayes stated that Supervisor Kennedy has been very active in the process working on our behalf.* Mr. Fites motioned to approve Item C: Meeting Minutes of 2.28.13 Regular Board Meeting to include the paragraph above. A second was made by Ms. McGrath.

Ms. McGrath stated that we are going to skip to agenda item #8, Dr. Swanson’s report so he can get back to the ER.

- 8. ER Update.** Dr. Swanson, ER Director reported that the Hospitalist program has been going strong for 15 months. He stated that he has 10 doctors that are very comfortable in the role as hospitalists and are very committed to EPHC and the community. The volume of admissions is consistent with past years. During shift change, both Doctors visit patients together to go over their plan of care. Dr. Swanson reviewed the list of hospitalists as well a brief

background. He also stated that the CT scanner is in the process of being installed and we are currently using the mobile CT unit. He stated the images from the mobile unit are excellent.

Ms. McGrath stated that Ms. Nelson needed to leave so we are going to skip to agenda item #14.

14. CFO Report.

- **February Financials.** Ms. Nelson stated that the February graphs give a good picture of the month. Ms. Nelson reported that our purchased services are up due to the CT rental. Revenues remain low and contractual adjustments and bad debt are higher. The Portola Skilled Nursing Department needs to adjust staffing to reflect lower volumes. There is an average of \$124,000 per month in bad debt which is being investigated. There was a brief discussion regarding MediCal Managed Care. Mr. Hayes stated that we are reaching out to Mimi Hall, Director of Public Health for Plumas County to help us better understand how this program will be rolled out in Plumas County.
- **Department of Health Care Service Letter:** A formal response from Department of Health Care Services was provided and reviewed.

4. Board Chair Comments.

There was a brief discussion regarding the ACHD Annual meeting 5/22-5/24 in La Jolla, CA. Ms. McGrath stated that it would be beneficial if all Board members could attend but due to the location we should reduce the number of board members that attend to cut costs. Tom Hayes and Jay Skutt will attend and Ms. Williams, Executive Assistant will make the travel arrangements.

- **Board Self Evaluation Discussion:** Ms. McGrath reported that she and Mr. Skutt met and reviewed the Board Self Evaluation results. They created a list of main points that the board will focus on which include; community outreach on health issues and involve providers in this action, improved orientation for new Board members, be more specific on non-performance issues of Board members, continue Board development, more feedback on quality issues, greater emphasis on strategic issues and development of a Board succession plan.

5. Board Comments.

Mr. Skutt provided a brief report on the CHA Legislative day and Symposium which he attended last week as well as a Tahoe Forest Board Meeting.

6. Public Comment.

None

7. Auxiliary Report

Kathy Davis thanked everyone for the honor at last month's Board Meeting. Beginning in May, new Auxiliary President, Katie Tanner will be presenting the Auxiliary report. Ms. Davis reported they currently have \$245,000 in the bank of which \$4,800 is in the memorial

fund for employee scholarships. The Auxiliary has committed \$150,000 for the down payment on the CT scanner.

8. ER Report

Report provided earlier in meeting.

9. Chief of Staff

Dr. Bugna agreed with Dr. Swanson; patients are happier with their stays in the hospital because of the Hospitalist Program. He also stated that EPHC is ahead of the curve when it comes to technology and Telemedicine.

Dr. Bugna stated that he is not surprised that the State does not have answers regarding the changes in the MediCal managed care program.

10. Policies and Procedures

Ms. McGrath stated that she and Ms. McBride reviewed the following policies on March 18, 2013:

- Central Supply Policies
- Housekeeping/EVS Policies
- Nursing Policies
- MRI Policies
- Elder/Dependent Adult Abuse-new Policy
- Abuse Prevention-revision Policy
- Transfer within the facility Policy
- Confidentiality & Access to Medical Records Policy
- Sepsis Early Goal Directed Therapy Policy
- Acute Pain Management Policy
- VTE Prophylaxis Policy
- General Admission Med/Surg Policy

Ms. McGrath stated that all policies are reviewed in detail before coming to the Board for approval. Ms. McGrath motioned to approve the policies listed above. A second was provided by Ms. McBride. None opposed, the motion approved.

11. Resolution 239

Mr. Fites explained that Mr. Hayes is working more than the 30 hours per week that is written in his contract. He is being paid only the 30 hours. Resolution 239 amends the CEO agreement dated January 28, 2010 by increasing the monthly compensation to 33 hours per week at the existing hourly rate and shall be effective as of March 1, 2013. Mr. Fites states that this amendment must be made by a formal resolution approved by a roll call vote. Mr. Fites motioned to approve Resolution 239. As second was provided by Ms. McGrath.

Resolution 239 was approved by the following roll call vote:

Chairman McGrath	<u> Aye </u>	Vice Chairman Fites	<u> Aye </u>
Director McBride	<u> Aye </u>	Director Skutt	<u> Aye </u>
Secretary Kreth	<u> Absent </u>		

12. Quality and Performance Improvement Plan Update

Mr. Hayes reported that the Quality and Performance Improvement Plan was approved at last months Regular Board Meeting. He stated that after our recertification survey last week he would like the entire Board to be involved in reviewing the policy. Mr. Hayes along with Ms. Whitfield, Director of Quality and Acute Care Operations will review and edit the policy and will then go through the Medical Executive Committee before coming back to the Board for the final approval.

13. Committee Reports

• **Planning Committee**

Ms. McGrath stated that the Planning Committee is focusing on Master Planning, 2030 projections, as well as Boiler replacement.

• **Finance Committee**

Mr. Skutt stated that Ms. Nelson covered the Finance Committee report in her CFO report earlier in the meeting. No other report.

14. CFO Report

Report provided earlier in meeting.

15. CEO Report

- **DP/SNF Reimbursement Cuts:** Mr. Hayes reported that CHA is preparing a large media campaign for AB 900. He stated that access is a significant issue and we are challenging what the State is saying in comparing Plumas County to Ventura County. He also stated that the appeal on the CHA lawsuit has not yet been heard.
- **CT scanner replacement schedule:** Mr. Hayes reported that the CT Scanner arrived on Monday and is being installed and should be complete by next week. We had to renew the CT mobile rental for an additional week.
- **Employee Satisfaction Committee Update:** Mr. Hayes reported that we have had a good turn out at the Department meetings receiving approximately 130 surveys. We are awaiting results and an analysis from the outside consultant.
- **California Department of Public Health Recertification Survey:** Mr. Hayes reported that we had our CDPH Recertification Survey last week and it lasted four days with six surveyors in total. During the exit conference they stated that EPHC had made tremendous progress since the last survey and they are now raising the bar. They stated that they were here not to tell us how much we have improved but to tell us what we are doing wrong. Once we receive the Plan of Correction we have ten calendar days from the date of the letter to provide a response. Mr. Hayes also reported that the Life Safety surveyor is on campus now.
- **Other**
 - The 5 remaining patient rooms at Loyaton Skilled Nursing have been painted.
 - The Plan of Correction Life Safety modifications will be our number one priority.
 - The Portola Medical Clinic painting project will resume as soon as we complete the life safety modifications.
 - We have applied for an SB 1953 extension to 2030 for the boiler structure.

16. Closed Session.

Ms. McGrath announced the Board would move into closed session at 11:40 am., pursuant to Health and Safety Code 32155 and Government Code Section 54957.

17. Open Session Report of Actions Taken in Closed Session.

The Board returned at approximately 12:40 pm and announced the following:

I. Health and Safety Code 32155, to review reports on Quality Assurance.

No reportable action.

II. Government Code Section 54957, to consider the following appointments to the medical staff:

A. Recommendation for Two Year Courtesy Privileges

- **Peter Taylor, M.D. (OB/GYN)**
- **Leon Jackson, M.D. (Radiology)**

Dr. Bugna, Chief of Staff presented the above recommendations for appointments to the medical as well as recommendation for privileges to the Board. The Board reviewed each Medical Staff file as submitted and approved the appointments to the medical staff and the recommendations for two year courtesy privileges.

18. Adjournment. Ms. McGrath subsequently adjourned the meeting at 12:40 p.m.

Approval

Date

EASTERN PLUMAS HEALTH CARE DISTRICT

Standing Quality Assurance Committee

Wednesday, April 3, 2012

2:00 P.M.

ACR, Portola, CA

Minutes

1. **Call to Order.** The meeting was called to order at 2:00pm by Ms. McGrath.
2. **Roll Call.**
Present: Gail McGrath. Staff: Tom Hayes, Teresa Whitfield, Mark Schweyer, and Tiffany Williams.
Absent: Lucie Kreth
Visitors: no visitors were present.
3. **Approval of Agenda.** The agenda was approved as submitted.
4. **Board Comments.** None.
5. **Public Comments.** None.
6. **Closed Session.** Ms. McGrath announced the Board would move into closed session at 2:05 pm
7. **Adjournment.** The Board returned to open session at 3:00pm and announced no reportable action taken. Ms. McGrath subsequently adjourned the meeting.

Approved by

Date



Eastern Plumas Health Care

“People Helping People”

Dear Patient,
 We would appreciate your views on your care experiences in our clinics. Your responses will be kept strictly confidential. Once you have completed the survey, please return it to our staff or mail it back. The address for all surveys is Portola Medical Clinic, 480 First Ave. Portola, CA 96122. Thank you for your help.

Clinic Location: _____ **Date of Service:** _____

Please rate your overall satisfaction with your clinic experience today by circling the appropriate response:

**PART 1
 OPERATOR AND SCHEDULING**

Making your appointment

Did you find it easy to schedule your appointment?

YES NO N/A

Where you able to reach the appropriate person without difficulty?

YES NO N/A

Were we polite and helpful on the telephone?

YES NO N/A

Were we timely in returning your calls?

YES NO N/A

Are our office hours convenient?

YES NO N/A



Any additional comments or suggestions you might have:

*****Optional*****

If you would like us to contact you regarding any part of this survey please leave your name and phone number.

Name: _____

(Only necessary if you would like us to call you)

Phone Number: _____

(Only necessary if you would like us to call you)



Eastern Plumas Health Care

“People Helping People”

Dear Patient,
We would appreciate your views on your care experiences in our clinics. Your responses will be kept strictly confidential. When you have completed the survey please return it to our staff or mail it back. Thank you for your help.

Clinic Location: _____ **Date of Service:** _____

Please rate your overall satisfaction with your clinic experience today by circling the appropriate response:

PART II FRONT DESK REGISTRATION

Moving through your visit



Was our check in process efficient?

YES NO N/A

Was our waiting area comfortable and pleasant?

YES NO N/A

Was your wait time before being called to the back office reasonable?

YES NO N/A

Did we keep you informed of problems or delays?

YES NO N/A

Did our front desk protect your privacy adequately?

YES NO N/A

Any additional comments or suggestions you might have about how we can improve our registration/check in process:

*****Optional*****

If you would like us to contact you regarding any part of this survey please leave your name and phone number.

Name: _____

(Only necessary if you would like us to call you)

Phone Number: _____

(Only necessary if you would like us to call you)



Eastern Plumas Health Care

“People Helping People”

Dear Patient,
 We would appreciate your views on your care experiences in our clinics. Your responses will be kept strictly confidential. When you have completed the survey please return it to our staff or mail it back. Thank you for your help.

Clinic Location: _____ **Date of Service:** _____
Provider: _____

Please rate your overall satisfaction with your clinic experience today by circling the appropriate response:

PART V
Follow up care

Was our check out process and obtaining a follow up appointment accomplished easily?

YES **NO** **N/A**

Did we have the appropriate medical records available for your appointment?

YES **NO** **N/A**

Was our referral process accomplished without difficulty?

YES **NO** **N/A**

Are you able to obtain prescription refills without difficulty?

YES **NO** **N/A**

Did your provider follow up with you regarding your lab and x-ray results in a timely manner?

YES **NO** **N/A**



Please take a moment to explain how we can improve our referral, prescription refill and lab or x-ray results process:

*****Optional*****

If you would like us to contact you regarding any part of this survey please leave your name and phone number.

Name: _____
(Only necessary if you would like us to call you)

Phone Number: _____
(Only necessary if you would like us to call you)



Eastern Plumas Health Care

“People Helping People”

Dear Patient,
 We would appreciate your views on your care experiences in our clinics. Your responses will be kept strictly confidential. When you have completed the survey please return it to our staff or mail it back. Thank you for your help.

Clinic: _____
Medical Assistant or LVN: _____

Date of Service: _____

Please rate your overall satisfaction with your clinic experience today by circling the appropriate response:

Part III

Nursing staff



Did you find that our nursing staff followed good infection control methods (masks, hand washing)?

YES NO N/A

Did our nursing staff show appropriate concern for your privacy?

YES NO N/A

Was our nursing staff sensitive to your problems and concerns?

YES NO N/A

Was your exam room clean?

YES NO N/A

Did our nursing staff spend enough time with you?

YES NO N/A

Any additional comments or suggestions you might have:

*****Optional*****

If you would like us to contact you regarding any part of this survey please leave your name and phone number.

Name: _____
 (Only necessary if you would like us to call you)

Phone Number: _____
 (Only necessary if you would like us to call you)



Eastern Plumas Health Care

“People Helping People”

Dear Patient,

We would appreciate your views on your care experiences in our clinics. Your responses will be kept strictly confidential. When you have completed the survey please return it to our staff or mail it back. Thank you for your help.

Provider you saw today: _____ **Date of Service:** _____

Please rate your overall satisfaction with your clinic experience today by circling the appropriate response:

PART IV Provider



Did your provider explain your medical problems, medication and treatment to you adequately?

YES NO N/A

Did your provider explain your follow up care to your satisfaction?

YES NO N/A

If your provider ordered labs today did he/she explain how your results would be communicated to you?

YES NO N/A

Were you satisfied overall with the amount of time your provider spent with you today?

YES NO N/A

Would you recommend your provider to family or friends?

YES NO N/A

Any additional comments or suggestions you might have:

*****Optional*****

If you would like us to contact you regarding any part of this survey please leave your name and phone number.

Name: _____
(Only necessary if you would like us to call you)
Phone Number: _____
(Only necessary if you would like us to call you)

Operator and Scheduling Areas Survey #1

03/07/2013 to 03/23/2013

Portola Medical Clinic

Sample size = 270

1) Did you find it easy to schedule your appointment?

Yes	262	97%
No	7	3%
N/A	0	0%
No Answer	1	0%

2) Were you able to reach the appropriate person without difficulty?

Yes	254	94%
No	9	3%
N/A	6	2%
No Answer	1	0%

3) Were we polite and helpful on the telephone?

Yes	261	97%
No	0	0%
N/A	9	3%
No Answer	0	0%

4) Were we timely in returning your calls?

Yes	207	77%
No	4	1%
N/A	56	21%
No Answer	3	1%

5) Are office hours convenient?

Yes	262	97%
No	2	1%
N/A	3	1%
No Answer	3	1%

- 1) "I think you do an outstanding job. That's why we come her. Keep up the great work."
- 2) "Thank you for being in Portola and giving us options in health care."
- 3) "We have been with many different Medical Clinics and found that the E Plumas H.C. clinics and hospital to be far more helpful, knowledgable, and professional. A pleasure and comfort in being able to put full trust in our health care."
- 4) "They do not know what meds I'm taking, should only be between doctors and nurse."
- 5) "Don't make me show up 15 minutes early and then make me wait over 1 hour. Has happen twice last 2 weeks! My time is just as valuable as yours!" **Reviewing this incident**
- 6) "Great staff!"
- 7) "Great job."
- 8) "I've never been to a clinic as helpful as this one. Don't change."
- 9) "They're great people."
- 10) "The Portola Medical and Dental Clinic is one of the best I've ever been to and with 5 kids I've been to not very friendly (ones)."
- 11) "Love Dr. Kim. Very thorough."
- 12) "Everyone is so nice."
- 13) "Everyone is nice".
- 14) "I love the staff. Very respectful."
- 15) "I just recently moved here from the Greenville/Quincy area and I've never had switching Dr's/ Pharmacies be any easier/faster - ever. They were so considerate, so quick - they didn't stop until it was done and no waiting! They always called me and kept me updated. Incredibly timely. They've gone over every angle with me. Asked and checked everything."
- 16) "All I would add is you are all very kind, caring, helpful people. Nowdays I look forward to my appts Thank you."
- 17) "Shannon is very kind and helpful."
- 18) "The phone service was a bit confusing. But ok."
- 19) "Very thoughtful group."
- 20) "Just the best. Thank you."
- 21) "I'm just thankful for Dr. Kim who has been very kind and understanding and helpful."

- 22) "Everyone was so nice and helpful."
- 23) "Always helpful setting appointments that are convenient for us."
- 24) "Dr. Ball is the best doctor ever."
- 25) "Always very good. Very caring always helpful and just plain nice and that's a good thing these days."
- 26) "Everything was great."
- 27) "Actually, all the staff here at the clinic are amazingly cheerful, pleasant, professional and very genuine. Of course, I have favorites though: Dr. Collins!!"
- 28) "Everyone there is great."
- 29) "The whole staff is very nice and very good at all their jobs."
- 30) "Dissatisfied with tele-med program. Poor scheduling, not timely returning call. Psychiatrist incompetent, psychologist is good, but can't get appointment. ****Under review****"
- 31) "Dr. Kim and Nicole are awesome!"
- 32) "I need help badly. I pray I can be helped. I have been a patient since 1997." Anonymous survey
- 33) "It would be nice if there was a water bottle setup with cups for patients that have a need to take meds or those with diabetes or small children."
- 34) "The staff and service at both Portola and Loyalton Clinics have been excellent over the past couple of years!. The personal attitudes of staff is excellent and really helps."
- 35) "Thanks!"
- 36) "Thank you."
- 37) "I wish Dr. Phem worked out at Graeagle some of the time." ***She is now scheduled twice a month in Graeagle.***
- 38) "Everyone is doing a great job here."
- 39) "Wonderful service!"
- 40) "(The staff) Makes things easy for us as sometimes we have trouble knowing when is a good time for appt."
- 41) "Very friendly place with efficient people."
- 42) "The ladies at the front desk "All of them" are very friendly and know their jobs, are efficient and if they don't know the answer they are very prompt in finding out. Represent very well."
- 43) "Dr. Collins and Mary Morrison are the absolute best docs in the world!!. The floor in room #7 is

sticky on my sneakers." ***This has been resolved***

44) "All the staff have been very polite, professional and informative."

45) "Amber's great!"

46) "I like the "STRONG" front office."

47) "Really like Dr. Collins. Very thorough."

48) "Jessica at scheduling is always a joy to deal with."

49) "All of the staff has been wonderful over 30 years for me."

50) "I've lived here 12 years and finally have the confidence in my Dr., the clinic, hospital. Keep up the good work."

51) "Its nice to have a clinic in my community. I appreciate how quickly I was seen today as that isn't always the case."

52) "When I call to make appointments, quite often and more so (since the gals have changed) they switch you around on the phone a lot and you need to explain all over again."

53) "Just need more availability to see the Dr."

54) "My appointment was moved 3 times, I prefer mornings..... You guys are great!" **Under review**

55) "I like Yvonne Scott's "Bedside Manner". She has my health needs at heart. Thank you!"

56) "Saturdays are hard, you guys should be open and if you are...open in the evenings."

57) "Your phone system is repetative and annoying."

58) "Saw Dr. in a timely manner. Everyone is very friendly."

59) "Everyone here has always been great."

60) "I was thrilled that we were able to be seen the same day we called."

61) "Helpful, friendly, clean."

62) "We love this clinic everyone is great!"

63) "Staff is very pleasant. Dr. Kim is great. Dr. Xiong is too."

64) "The staff here is very nice and ready to help in any way."

65) "My first visit. The people and service were great! Thanks."

66) "Staff did a wonderful job. Amber was very helpful and accomodating. Jessica scheduled my appt with no hiccups whatsoever. Same day appt. was easy as pie."

- 67) "I make my next appointment as I am leaving the clinic."
- 68) "Amber is awesome and very friendly! Thanks for putting up with me."
- 69) "Thank you for being open and in town."
- 70) "Always a pleasure."
- 71) "Penie is very pleasant on the phone."
- 72) "Confusion with dental and medical phone - reaching the correct dept. when using directory."
Under review.
- 73) "I think you and admin did the right thing when hiring Dr. Kim. She is so great. She listens to you and care about her patients. Good job."
- 74) "Does the patient have the right to refuse to having their medical information computerized?
Can this information be accessed by the government and used for Obamacare insurance negotiations?"
- 75) "Everyone is just great to me and my husband."
- 76) "Everyone is very polite and we (my wife and I) are very satisfied with our Doctors. We usually make our appointments for our next visit the day of our last visit monthly."
- 77) "When your primary care giver is gone all the time it would be helpful to be notified in advance so scripts can be updated and filled and another Dr. can be located and announcements made for care."

Operator and Scheduling Areas Survey #1

03/07/2013 to 03/23/2013

Portola Dental Clinic

Sample size = 23

1) Did you find it easy to schedule your appointment?

Yes	22	96%
No	1	4%
N/A	0	0%
No Answer	0	0%

2) Were you able to reach the appropriate person without difficulty?

Yes	22	96%
No	1	4%
N/A	0	0%
No Answer	0	0%

3) Were we polite and helpful on the telephone?

Yes	22	96%
No	0	0%
N/A	1	4%
No Answer	0	0%

4) Were we timely in returning your calls?

Yes	17	74%
No	1	4%
N/A	5	22%
No Answer	0	0%

5) Are office hours convenient?

Yes	20	87%
No	3	13%
N/A	0	0%
No Answer	0	0%

- 1) "Dr. Blanco is amazing and my 5 year old daughter loves seeing her."
- 2) "Staff is always friendly, helpful and knowledgeable."
- 3) "Awesome front office staff. Returns calls promptly and always reminds me of appts. Works with my schedule - very important to me."

Operator and Scheduling Areas Survey #1

03/07/2013 to 03/23/2013

Graeagle Medical Clinic

Sample size = 71

1) Did you find it easy to schedule your appointment?

Yes	67	94%
No	4	6%
N/A	0	0%
No Answer	0	0%

2) Were you able to reach the appropriate person without difficulty?

Yes	64	90%
No	5	7%
N/A	0	0%
No Answer	2	3%

3) Were we polite and helpful on the telephone?

Yes	69	97%
No	0	0%
N/A	2	3%
No Answer	0	0%

4) Were we timely in returning your calls?

Yes	51	72%
No	1	1%
N/A	17	24%
No Answer	2	3%

5) Are office hours convenient?

Yes	70	99%
No	1	1%
N/A	0	0%
No Answer	0	0%

- 1) "Happy with location."
- 2) "This is an excellent addition for our community. Great staff."
- 3) "Really like Mary."
- 4) "Great service. We are so fortunate to have this clinic."
- 5) "Most friendly and helpful."
- 6) "Everyone is very polite and many times have gone out of their way to assist my wife and myself."
- 7) "All staff are very polite."
- 8) "Answer machine takes you in circles. No way to leave a message at Graeagle Clinic."
- 9) "The only concern due to being a cash patient. The rates seem to go up to get a discount due to cash payment. What changed?"
- 10) "Keeping the clinic open on more days! A lot of patients have to wait for an available day or travel to Portola. Keep Pearl here please. She is a great nurse to have here. Mary Morrison also! Great people and they know their work." Open the Graeagle Clinic more days of the week please!
- 11) "The staff at the Graeagle Clinic is the best. So grateful on the care and services provided. Keep up the good work."
- 12) "None. Everything is ok."
- 13) "Always have a very favorable experience. Good staff and excellent service."
- 14) "Outstanding service for our community."
- 15) "It's wonderful to have such a great clinic in our area!"
- 16) "Please keep the clinic here - we love this place."
- 17) "Wish you were open 5 days a week."
- 18) "Front office staff is always kind and compassionate. They are always helpful and prompt."
- 19) "Please stay open longer."
- 20) "I have been treated with a friendly and courteous manner. Mary Morrison is very friendly and very thorough and Pearl is a great assistant. It would be helpful for those who live in Graeagle if the clinic was open more than 3 days."
- 21) "Personal care given by Pearl and Mary Morrison is terrific."
- 22) "Pearl's the best!"

23) "I love this clinic. Everyone is always so helpful and concerned."

24) "Not fond of the new telephone system."

25) "It is a blessing to have my primary care physician so accessible."

26) "I called before the clinic was open but the answer service didn't say the office was closed. It just kept passing me around. A message stating the hours would be helpful. However, once I reached Mary Ann in Graeagle she was very helpful. I am grateful that Graeagle allows walk-ins! Very helpful!"

Operator and Scheduling Areas Survey #1

03/07/2013 to 03/23/2013

Loyalton Medical Clinic

Sample size = 57

1) Did you find it easy to schedule your appointment?

Yes	56	98%
No	0	0%
N/A	0	0%
No Answer	1	2%

2) Were you able to reach the appropriate person without difficulty?

Yes	56	98%
No	1	2%
N/A	0	0%
No Answer	0	0%

3) Were we polite and helpful on the telephone?

Yes	57	100%
No	0	0%
N/A	0	0%
No Answer	0	0%

4) Were we timely in returning your calls?

Yes	45	79%
No	0	0%
N/A	11	19%
No Answer	1	2%

5) Are office hours convenient?

Yes	57	100%
No	0	0%
N/A	0	0%
No Answer	0	0%

- 1) "I really like the staff at Loyalton, particularly Christina and Christine. We have a real good relationship."
- 2) "The staff in Loyalton is great."
- 3) "Thank you!"
- 4) "Your office is so convenient and helpful. I would come here anytime my kids or self is ill and I know I'll get top notch care. The staff really cares about us patients."
- 5) "The people in the clinic are really nice. They help me in what need."
- 6) "Christina and her staff are very polite and caring except (_____ staff member) is rude and seems angry." ***This complaint has addressed***
- 7) "Keep up the good work and thank you."
- 8) "Just that all the other clinics (Graegle - Portola) have been done up so nice. Couldn't we have a tiny upgrade (flooring). Loyalton clinic is so shabby and not chic! The staff here deserves better."
- 9) "I am always treated with respect and patience. Easy to work around my schedule."
- 10) "Good job!"
- 11) "We always feel so welcomed here. We love how everyone here is so nice and how they take the time with us. Thank you!"
- 12) "Christina rules. Found bladder stones when other docs had no clue!!!"
- 13) "Outstanding service; very impressed!"
- 14) "Sometimes they give me a sucker!"
- 15) "It's all good."
- 16) "Doctor and staff at Loyalton clinic were great. Seen quickly today. Thanks."
- 17) "Love the place. Girls are excellent."
- 18) "Very comfortable and care for by all."
- 19) "Thank you."
- 20) "I drive from Graegle (more than 35 mi. one way) to come to this clinic. Thank you!"
- 21) "Keep up the great customer service. You are all great."
- 22) "Loyalton clinic staff are great."
- 23) "Thanks!"

24) I live in Portola, CA and drive to Loyalton, CA. The staff is friendly and they take care of all of my medical needs."

Operator and Scheduling Areas Survey #1

03/07/2013 to 03/23/2013

Indian Valley Medical Clinic

Sample size = 115

1) Did you find it easy to schedule your appointment?

Yes	113	98%
No	0	0%
N/A	0	0%
No Answer	2	2%

2) Were you able to reach the appropriate person without difficulty?

Yes	113	98%
No	0	0%
N/A	2	2%
No Answer	0	0%

3) Were we polite and helpful on the telephone?

Yes	112	97%
No	0	0%
N/A	2	2%
No Answer	1	1%

4) Were we timely in returning your calls?


Yes	92	80%
No	0	0%
N/A	23	20%
No Answer	0	0%

5) Are office hours convenient?

Yes	112	97%
No	0	0%
N/A	1	1%
No Answer	2	2%

- 1) "I enjoy coming to the clinic. Everyone is nice and very helpful. Never had any problems with anyone. They are all very understanding and have patience with me. I highly recommend anyone coming to the clinic and giving them a try."
- 2) "John Evans and staff have provided excellent service and have referred me to a specialist in the field of my health. So much appreciated."
- 3) "I am extremely happy with everyone who are there."
- 4) "Good people!!!"
- 5) "My nurse was great, very nice and easy to talk to."
- 6) "I have been treated well here at this clinic all the time I have been coming."
- 7) "Everything is just great. Everyone is always so very nice and professional."
- 8) "If not broken, don't fix it. Good job everyone."
- 9) "Made me feel like the old days when my wife called the Doc on a Sat and he actually called back with concern. He gives us the feeling that he really cares in a world that has become all about #s instead of caring."
- 10) "Greenville citizens are very fortunate to have this service."
- 11) "Have always enjoyed and trusted the staff at IVC. My entire family comes here and adore John Evans. He's so good with children. Shirley and Chris are also pleasant and accomodating."
- 12) "Doing a great job. Good for our community. Hard working staff."
- 13) "Please remain in Greenville."
- 14) "All staff in front and everyone, Docs and nurses are all polite and very friendly. As far as I am concerned everyone is a '10'."
- 15) "Please stay the way you are right now. I feel that your staff needs to not change."
- 16) "We are very fortunate to have such good and caring staff in this clinic."
- 17) "I have nothing but good to say. Excellent staff all around."
- 18) "Relax your rules on cannabis. Some people don't want to take pills anymore. Someone must take a stand against the Feds."
- 19) "Everyone is awesome."
- 20) "Having the only male practitioner in Greenville is not convenient. Please rehire Lee Brooks for Portola/Graeagle."
- 21) "Thank you for being so helpful to me and getting me in ASAP."

- 22) "Thank you."
- 23) "All the staff at IVC is both efficient and friendly."
- 24) "Extend hours for blood work."
- 25) "Great doctors and nurses."
- 26) "I love everyone here! Dr. Evans is a wonderful Dr. The staff is welcoming and very kind. I have no complaints."
- 27) "Since I live in town, it's very convenient to not have to go to Portola. I'm very happy about the multiple offices."
- 28) "Thank you for having this clinic in Greenville."
- 29) "Thank you."
- 30) "I appreciate the promptness of your staff. I have never had a long wait in the waiting room or exam rooms. I feel like my needs are important to you."
- 31) "Worked very well!!!"
- 32) "As far as improving, you can't. Everytime my family and I need an appt. or anything you've been there."

 Eastern Plumas Health Care "People-Helping People"	SUBJECT: Quality and Performance Annual Improvement Plan
POLICY # AD066	Page 1 of 8
DEPARTMENT: Administration	EFFECTIVE: 7.29.2010
APPROVED BY: EPHC BOD 2.2013	REVIEWED: 11.2012, 2.2013 REVISED: 3.2013

I. Introduction and Purpose Statement

Eastern Plumas Health Care (EPHC) is committed to developing, implementing and maintaining an effective, ongoing, hospital-wide, data-driven quality and performance improvement program in order to assess and continuously improve the care and service we deliver to our patients. EPHC has created systematic mechanisms and methods to support this commitment to quality.

Performance Improvement is a continuous process and focuses on improving the outcomes of care, treatment and services while identifying and reducing medical errors. The purpose of this Quality and Performance Improvement Plan (QPIP) is two-fold: 1) to provide a framework using a scientific approach (FOCUS-PDCA Model) ~~to~~for identifying, assessing, and improving clinical care, service and safety to our patients and; 2) Assist hospital and medical staff members in understanding how ~~EPHC is organized around quality/performance improvement and~~ what their roles and responsibilities ~~would be~~ are to improve quality with the hospital.

An important aspect of improving organization performance is effectively reducing factors that contribute to unanticipated adverse events and/or outcomes. Unanticipated adverse events and/or outcomes may be caused by poorly designed systems, system failures, or errors. Reducing unanticipated adverse events and/or unanticipated outcomes requires an environment in which patients, their families, and EPHC hospital staff and leaders can identify and manage actual and potential risks to patient safety. Such an environment encourages the following:

- Recognizing and acknowledging risks and unanticipated adverse events
- Initiating actions to reduce these risks and unanticipated adverse events
- Reporting internally on risk reduction initiatives and their effectiveness
- Focusing on improving processes and systems
- Minimizing individual blame or retribution for involvement in an unanticipated adverse event
- ~~Investigating factors that contribute to unanticipated adverse events and sharing that acquired knowledge both internally and with other hospitals~~
-

II. Goals of Q/PI


The goals for Q/PI cascade from and are based on the strategic direction and goals of EPHC. These include:

1. Systematically collect, aggregate and analyze data on an on-going basis to assess operational performance and results of improvement activities
- ~~3.2.~~ Conduct timely and intensive assessments when sentinel adverse events occur and when there are undesirable trends or patterns in performance, and reduce risks for our patients we serve
- ~~4.3.~~ Evaluate remedial action and follow-up activities to determine if identified issues have been resolved or improved, and implement methods for sustaining improvement
- ~~5.4.~~ Implement and maintain mechanisms for appropriate ~~vertical and horizontal~~ communication of quality and PI findings and recommendations


III. Organizational Structure

The Quality Management functions ~~Department~~, under the direction of the Director of Quality & Operations. Functions include:

1. ~~Provides services a~~Assessing the quality of service, care and treatment provided to our ~~members~~patients.
2. Assists in tracking medical errors and adverse patient events, analyze their causes, and implement preventative actions and mechanisms that include feedback and learning throughout EPHC
3. Organizes and coordinates Root Cause Analysis (RCA) and Failure Mode and Effects Analysis (FMEA) team activities
4. Provides oversight and support to various quality and performance improvement (Q/PI) initiatives, Performance Improvement (PI) teams, and select committees
5. Coordinates readiness activities for ~~accreditation and~~ regulatory surveys.

 Eastern Plumas Health Care <i>"People Helping People."</i>	SUBJECT: Quality and Performance Annual Improvement Plan
POLICY # AD066	Page 2 of 8
DEPARTMENT: Administration	EFFECTIVE: 7.29.2010
APPROVED BY: EPHC BOD 2.2013	REVIEWED: 11.2012, 2.2013 REVISED: 3.2013

IV. Committees/Departments/PI Teams Vertical Reporting Structure


 Eastern Plumas Health Care "People Helping People."	SUBJECT: Quality and Performance Annual Improvement Plan
POLICY # AD066	Page 3 of 8
DEPARTMENT: Administration	EFFECTIVE: 7.29.2010
APPROVED BY: EPHC BOD 2.2013	REVIEWED: 11.2012, 2.2013 REVISED: 3.2013

IV. Committee Duties and Reporting Requirements Grid


Committee	Q/PI Duties	Frequency	Reports To
Standing Quality Board SubCommittee of the Board	Ultimate accountability for the quality of care and service delivery to all members Review and evaluate reports on quality of care and services and report such results to the Board of Directors. Ensure that an effective and ongoing quality program is in place	Matches the frequency of the Standing Quality Board Quarterly	Governing Body
Medical Executive Committee	<ul style="list-style-type: none"> Receive and act on reports from medical staff departments, committees, and other sources. and hospital leadership personnel Evaluate the medical care rendered to patients 	Scheduled 10 times/year	Governing Body
Quality Management Assurance Committee	<ul style="list-style-type: none"> Evaluate the quality of both clinical care and service across all settings and for the full spectrum of services provided Establish Ensure systems are in place to identify potential problems in patient care Refer priority problems for assessment and corrective action to appropriate departments or committees Prioritize, sponsor, approve and supervise quality and PI activities 	Scheduled 10 times/year	Medical Executive Committee
Nursing Operations Department (not committee) Environment of Care Committee	<ul style="list-style-type: none"> Receive and act on event reports from various sources. supporting a just culture Action Planning and Evaluation Refer priority problems for assessment and corrective action to appropriate depts. or committees 	Monthly BiMonthly minimum	Quality Committee

VI. Quality/PI Conceptual Model (FOCUS-PDCA)

F	Find an Opportunity
O	Organize a Team
C	Clarify Knowledge
U	Understand Variation
S	Select an Improvement
P	Plan
D	Do

 Eastern Plumas Health Care <i>"People Helping People."</i>	SUBJECT: Quality and Performance Annual Improvement Plan
POLICY # AD066	Page 4 of 8
DEPARTMENT: Administration	EFFECTIVE: 7.29.2010
APPROVED BY: EPHC BOD 2.2013	REVIEWED: 11.2012, 2.2013 REVISED: 3.2013

C	Check
A	Act

 Eastern Plumas Health Care "People Helping People"	SUBJECT: Quality and Performance Annual Improvement Plan
POLICY # AD066	Page 5 of 8
DEPARTMENT: Administration	EFFECTIVE: 7.29.2010
APPROVED BY: EPHC BOD 2.2013	REVIEWED: 11.2012, 2.2013 REVISED: 3.2013

VII. PI Projects

As part of our Q/PI program we identify and prioritize PI projects through various mechanisms. ~~Opportunities would be identified through various mechanisms including:~~

- ~~Nominations from~~ committee(s), ~~or~~ departments, and other sources/~~division level~~
- Ongoing rounds conducted throughout the facility
- Comparison of aggregated data against benchmarks and other reported data
- Reported problems from staff, medical staff, and patients.
- ~~Aggregated and analyzed data from regional activities~~


VIII. Prioritizing Opportunities

The ~~criteria-based~~ decision making model used by EPHC is based on PI activities that are high-risk, high-volume, or problem-prone areas or affect health outcomes, patient safety, and quality of care.


IXVIII. Collection and Organization of Quality Indicator Data

Data is collected from a variety of sources using indicators to monitor the effectiveness and safety of services, ~~and quality of care while identifying opportunities for improvement and making~~ EPHC will make ~~the~~ essential changes necessary for improvement in delivering quality care and reducing ~~e~~ the risks of sentinel events.

Activity	Reported To/Through
• Quality Control (Nursing and Ancillary Services Indicators)	• QM Committee
• Peer Review that supports credentialing and privileging	• QM then MEC Committee
• Operative and Invasive Procedures Review	• IC & QM Committee
• Blood and Blood Product Review (Including Confirmed Transfusion Reactions)	• IC & QM Committee
• Utilization Review/Medical Management	• UR & QM Committee
• Medication Management (Including Medication Errors and Adverse Drug Events)	• QM Committee
• Medical Record Reviews	• QM Committee
• Infection Control	• P & T/Infection Control Committee
• Sentinel Events	• QM Committee
• Risk Management	• QM Committee
• Medical Staff Indicators	• QM Committee Component of Peer Review
• Care Management Indicators/Core Measures	• Care Management UR &/ QM Committee
• Restraint	• Nursing Operations/ QM Committee
• Sedation	• P & T/Infection Control Committee
• Resuscitation and Its Outcomes	• Code Blue Committee &/ QM Committee
• Pain Management	• QM Committee
• Staffing Effectiveness	• Nursing Operations/ QM Committee
• Staff Opinions and Needs, Perceptions Risk/Safety to Patients and Willingness to Report Events	• Executive Committee through suggestion boxes and EE satisfaction surveys
• Patient Satisfaction	• QA Subcommittee of the Board & QM Committee

 Eastern Plumas Health Care <i>"People Helping People."</i>	SUBJECT: Quality and Performance Annual Improvement Plan
POLICY # AD066	Page 6 of 8
DEPARTMENT: Administration	EFFECTIVE: 7.29.2010
APPROVED BY: EPHC BOD 2.2013	REVIEWED: 11.2012, 2.2013 REVISED: 3.2013

Activity	Reported To/Through
<ul style="list-style-type: none"> • Patient Safety/ National Patient Safety Goals 	<ul style="list-style-type: none"> • QM Committee
<ul style="list-style-type: none"> • Environment of Care Rounding/QC 	<ul style="list-style-type: none"> • EOCC Committee/ QM Committee
<ul style="list-style-type: none"> • Organ Procurement 	<ul style="list-style-type: none"> • QM committee

 Eastern Plumas Health Care "People Helping People."	SUBJECT: Quality and Performance Annual Improvement Plan
POLICY # AD066	Page 7 of 8
DEPARTMENT: Administration	EFFECTIVE: 7.29.2010
APPROVED BY: EPHC BOD 2.2013	REVIEWED: 11.2012, 2.2013 REVISED: 3.2013

Hospital Compare Core active Measures reported through Quality Committee Net & Compare to CAH's through QHI	Indicators
<ul style="list-style-type: none"> Acute MI 	<ul style="list-style-type: none"> ASA Within 24 Hours of Arrival ASA Prescribed at Discharge Beta Blocker Within 24 hours of Arrival Beta Blockers Prescribed at Discharge Thrombolytics Within 30 Minutes of Arrival PCI Within 90 Minutes of Arrival Smoking Cessation Advice
<ul style="list-style-type: none"> Community Acquired Pneumonia 	<ul style="list-style-type: none"> Oxygenation Pneumococcal Screening/ Vaccination Flu Screening/ Vaccination Blood Cultures Before Antibiotic Smoking Cessation Advice Antibiotic Within 4 Hours of Arrival Antibiotic Selection Immunocompetent Patient
<ul style="list-style-type: none"> Heart Failure 	<ul style="list-style-type: none"> Discharge Instructions LVF Assessment ACEI for LVSD
<ul style="list-style-type: none"> Surgical Infection Prevention 	<ul style="list-style-type: none"> Pre-operative Antibiotic Timing Timeliness of Post-operative Antibiotic DC


XIX. Data Analysis

An analysis is performed for the following (in order to comply with state regulations):

- All confirmed transfusion reactions
- All serious adverse drug events, as defined by EPHC
- All significant medication errors, defined by EPHC
- All major discrepancies between preoperative and postoperative (including pathologic) diagnoses
- Adverse events or patterns of adverse events during moderate or deep sedation and anesthesia use
- Hazardous conditions

XIX. Education and Training

EPHC's strategic plan and goals are utilized as an approach to engage staff maximizing their talents and core competencies required for every job and linked to expectations that employees be involved with supporting the mission and philosophy, improving customer satisfaction, and improving quality of care and service. One on one training is provided to managers and teams focusing on indicator development, use of CQI tools, and understanding and use of FOCUS PDCA process. CQI and PI training and education are also available for medical staff members and encouraged for medical staff leadership. An introduction to CQI is provided to all new employees at orientation.

 Eastern Plumas Health Care "People Helping People."	SUBJECT: Quality and Performance Annual Improvement Plan
POLICY # AD066	Page 8 of 8
DEPARTMENT: Administration	EFFECTIVE: 7.29.2010
APPROVED BY: EPHC BOD 2.2013	REVIEWED: 11.2012, 2.2013 REVISED: 3.2013

~~XII. Reward and Recognition Activities~~

~~Facility and Organization Leaders recognize and celebrate improvement successes. Examples include:~~

- ~~• Employee "**Above and Beyond**" cards for recognition of exceptional demonstration of the organization's core values~~
- ~~• Employee years of service recognition~~
- ~~• Employee Forums~~
- ~~• Employee Luncheons~~
- ~~• Leadership Rounding—Spontaneous recognition of care/service practice~~

XIII. Program Effectiveness Evaluation

The effectiveness of the QA/PI program and this Plan are measured and assessed annually through discussion at the Subcommittee of the Board.

RESOLUTION NO. 211

Eastern Plumas Health Care District)
Resolution of the Board of Directors)
of the Eastern Plumas Health Care)
District stating its Intent to end)
the Practice of Recording the)
Closed Session Minutes of its)
Meetings.)
_____)

WHEREAS, the Board of Directors no longer wishes to retain a written record of matters discussed in Closed Session at all meetings, and

WHEREAS, the Board of Directors has conferred with counsel and are in agreement that ending the practice of keeping confidential records of Closed Session will not violate the EPHC Bylaws, the Ralph M. Brown Act, common practice, or any applicable sections of the California Government Code,

WHEREAS, the Board of Directors wishes to conserve staff time and allocate any additional resources to patient care.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Directors of Eastern Plumas Health Care District, in accordance with California Government Code Section 54957.2, does hereby *rescind Resolution No. 210*, and ceases the practice of keeping and retaining in a confidential written minute book a record of topics discussed and decisions made in Closed Session at all meetings.

Passed, approved and adopted by the Board of Directors of EASTERN PLUMAS HEALTH CARE DISTRICT, Plumas County, California at its Regular Meeting held on the 23rd day of August, 2007, by the following roll call vote:

Chairman Ward: aye Vice Chairman Folchi: aye Secretary McGrath: aye
Director Kreth: absent Director McBride: aye

ATTEST:

Ed Ward, Chairman

Gail McGrath, Secretary

RESOLUTION NO. 240

Eastern Plumas Health Care District)
Resolution of the Board of Directors)
of the Eastern Plumas Health Care)
District stating its Intent to begin)
the Practice of Keeping and Retaining)
Confidential Closed Session Minutes)
of its Meetings.)
_____)

WHEREAS, the Board of Directors wishes to retain a written record of matters discussed in Closed Session at all meetings, and

WHEREAS, the Board of Directors has conferred with counsel and are in agreement that keeping confidential records of Closed Session will not violate the EPHC Bylaws, the Ralph M. Brown Act, or any applicable sections of the California Government Code,

WHEREAS, the Board of Directors wishes to delegate the task of taking minutes to the Board Secretary, who may choose to dictate to the clerk of the board.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Directors of Eastern Plumas Health Care District, in accordance with California Government Code Section 54957.2, (a) *The legislative body of a local agency may, by ordinance or resolution, designate a clerk or other officer or employee of the local agency who shall then attend each closed session of the legislative body and keep and enter in a minute book a record of topics discussed and decisions made at the meeting. The minute book made pursuant to this section is not a public record subject to inspection pursuant to the California Public Records Act (Chapter 3.5 (commencing with Section 6250) of Division 7 of Title 1), and shall be kept confidential. The minute book shall be available only to members of the legislative body or, if a violation of this chapter is alleged to have occurred at a closed session, to a court of general jurisdiction wherein the local agency lies. Such minute book may, but need not, consist of a recording of the closed session.* does hereby rescind Resolution No. 211, and approve the practice of keeping and retaining in a confidential written minute book a record of topics discussed and decisions made in Closed Session at all meetings, delegating the aforementioned task to the Board Secretary, who may utilize the assistance of the Clerk of the Board, who will retain the Closed Session Minutes in the Administrative offices of the District.

Passed, approved and adopted by the Board of Directors of EASTERN PLUMAS HEALTH CARE DISTRICT, Plumas County, California at its Regular Meeting held on the 25rd day of April, 2013, by the following roll call vote:

Chairman McGrath _____ Vice Chairman Fites _____ Secretary Kreth _____
Director McBride _____ Director Skutt _____

ATTEST:

Gail McGrath Chairman

Lucie Kreth, Secretary

EASTERN PLUMAS HEALTH CARE DISTRICT

MEMORANDUM

Date: April 15, 2013

To: Board of Directors

From: Jeri Nelson, Chief Financial Officer

Subject: **Summary of Financial Results – March 2013**

Table 1. Consolidated Financial Results – March 2013

	Actual	Budget	Variance
Total Revenue	\$2,927,805	\$3,311,967	\$(384,162)
Contractual Adjustments	\$1,337,831	\$1,416,017	\$(78,186)
Bad Debt/Admin Adjustments	\$148,772	\$147,940	\$832
Net Revenue	\$1,441,201	\$1,748,011	\$(306,810)
Total Expenses	\$1,687,070	\$1,734,259	\$(47,189)
Operating Income (Loss)	\$(245,869)	\$13,752	\$(259,621)
Non-Operating Income(Expense)	\$201,756	\$49,758	\$151,998
Net Income (Loss)	\$(44,112)	\$63,510	\$(107,622)

Table 2. Consolidated Financial Results – Nine Months Ended March 2013

	Actual	Budget	Variance
Total Revenue	\$28,953,997	\$29,271,827	\$(317,830)
Contractual Adjustments	\$12,339,160	\$12,514,014	\$(174,854)
Bad Debt/Admin Adjustments	\$1,524,637	\$1,307,482	\$217,155
Net Revenue	\$15,090,200	\$15,450,331	\$(360,131)
Total Expenses	\$15,278,177	\$15,536,797	\$(258,620)
Operating Income (Loss)	\$(187,977)	\$(86,497)	\$(101,510)
Non-Operating Income (Expense)	\$723,052	\$597,825	\$125,227
Net Income (Loss)	\$535,075	\$511,358	\$23,717

The Hospital's acute and skilled average daily census continues to drag down our revenue. Bad debt year-to-date is 5.3% of patient revenue and we budgeted 4.5%. Expenses for the nine months have exceeded net revenue creating an operating loss of \$187,977. We received the contribution from our Auxiliary for the CT Scanner of \$151,674 which is included in March's non-operating income. With all this, we are just above our budgeted net income at March 31st. We had a good collection month on accounts receivables that maintained strength on the balance sheet. The clinics are collectively seeing patient volumes 7% higher than last year, and the hospital ancillary volumes have mixed ratings due to hospital services down and clinic services up. It seems we are at a turning point with patient care; in line with what the government is expecting of us.

**EASTERN PLUMAS HEALTH CARE
COMPARATIVE BALANCE SHEET
FOR THE MONTHS ENDED**

	FEBRUARY 2013	MARCH 2013	CHANGE
ASSETS			
CURRENT ASSETS			
CASH	\$ 492,073	\$ 491,224	\$ (849)
LAIF SAVINGS	\$ 1,108,726	\$ 1,108,726	\$ -
ACCOUNTS RECEIVABLE NET	\$ 3,182,551	\$ 2,878,135	\$ (304,416)
ACCOUNTS RECEIVABLE OTHER	\$ 577,152	\$ 624,525	\$ 47,373
INVENTORY	\$ 215,316	\$ 215,316	\$ -
PREPAID EXPENSES	\$ 101,265	\$ 95,444	\$ (5,821)
TOTAL CURRENT ASSETS	<u>\$ 5,677,083</u>	<u>\$ 5,413,370</u>	<u>\$ (263,713)</u>
PROPERTY AND EQUIPMENT			
LAND AND IMPROVEMENTS	\$ 934,164	\$ 934,164	\$ -
BUILDINGS AND IMPROVEMENTS	\$ 10,080,726	\$ 10,080,726	\$ -
EQUIPMENT	\$ 10,437,694	\$ 10,589,711	\$ 152,017
IN PROGRESS	\$ 151,212	\$ 157,680	\$ 6,468
	<u>\$ 21,603,796</u>	<u>\$ 21,762,281</u>	<u>\$ 158,485</u>
ACCUMULATED DEPRECIATION	<u>\$ 13,814,203</u>	<u>\$ 13,883,951</u>	<u>\$ 69,748</u>
TOTAL PROPERTY AND EQUIPMENT	<u>\$ 7,789,593</u>	<u>\$ 7,878,330</u>	<u>\$ 88,737</u>
COSTS OF ISSUANCE NET	\$ 14,919	\$ 14,666	\$ (253)
TOTAL	<u>\$ 13,481,595</u>	<u>\$ 13,306,366</u>	<u>\$ (175,229)</u>
LIABILITIES AND FUND BALANCE			
CURRENT LIABILITIES			
LEASES PAYABLE	\$ 18,989	\$ 17,511	\$ (1,478)
ACCOUNTS PAYABLE	\$ 935,799	\$ 753,470	\$ (182,329)
ACCRUED PAYROLL/RELATED TAXES	\$ 924,405	\$ 1,019,054	\$ 94,649
OTHER CURRENT LIABILITIES	\$ 671,429	\$ 672,762	\$ 1,333
TOTAL CURRENT LIABILITIES	<u>\$ 2,550,622</u>	<u>\$ 2,462,797</u>	<u>\$ (87,825)</u>
LEASES PAYABLE	\$ 180,365	\$ 180,365	\$ -
CHFFA LOAN	\$ 87,013	\$ 80,419	\$ (6,594)
CITY OF PORTOLA	\$ 348,000	\$ 348,000	\$ -
USDA LOANS	\$ 4,608,799	\$ 4,572,101	\$ (36,698)
TOTAL LIABILITIES	<u>\$ 7,774,799</u>	<u>\$ 7,643,682</u>	<u>\$ (131,117)</u>
FUND BALANCE	\$ 5,127,609	\$ 5,127,609	\$ -
NET INCOME (LOSS)	\$ 579,187	\$ 535,075	\$ (44,112)
TOTAL	<u>\$ 13,481,595</u>	<u>\$ 13,306,366</u>	<u>\$ (175,229)</u>

**EASTERN PLUMAS HEALTH CARE
BALANCE SHEET
FOR THE MONTH ENDED
MARCH 31, 2013**

DESCRIPTION	CURRENT
ASSETS	
CURRENT ASSETS	
CASH	\$ 491,224
INVESTMENTS	\$ 1,108,726
ACCOUNTS RECEIVABLE NET	\$ 2,878,133
ACCOUNTS RECEIVABLE OTHER	\$ 624,525
INVENTORY	\$ 215,316
PREPAID EXPENSES	<u>\$ 95,444</u>
TOTAL CURRENT ASSETS	\$ 5,413,369
PROPERTY AND EQUIPMENT	
LAND AND IMPROVEMENTS	\$ 934,164
BUILDINGS AND IMPROVEMENTS	\$ 10,080,726
EQUIPMENT	\$ 10,589,711
IN PROGRESS	<u>\$ 157,680</u>
TOTAL PROPERTY AND EQUIPMENT	\$ 21,762,282
ACCUMULATED DEPRECIATION	<u>\$ 13,883,951</u>
NET PROPERTY AND EQUIPMENT	\$ 7,878,331
COSTS OF ISSUANCE NET	\$ 14,666
TOTAL	\$ 13,306,366
	=====
LIABILITIES AND FUND BALANCE	
CURRENT LIABILITIES	
LEASES PAYABLE	\$ 17,511
ACCOUNTS PAYABLE	\$ 753,470
ACCRUED PAYROLL/RELATED TAXE	\$ 1,019,054
OTHER CURRENT LIABILITIES	<u>\$ 672,762</u>
TOTAL CURRENT LIABILITIES	\$ 2,462,797
LEASES PAYABLE	\$ 180,365
USDA REPAIRS & DEFEASANCE	\$ 380,135
CHFFA - EMR & ENDO EQUIP LOAN	\$ 80,419
CITY OF PORTOLA- PROPERTY LOAN	\$ 348,000
USDA LOANS SNF	\$ 3,538,198
USDA LOAN REPAIRS	\$ 27,697
USDA LOAN LOYALTON	\$ 497,791
USDA LOAN LOYALTON & PORTOLA	<u>\$ 128,280</u>
TOTAL LIABILITIES	\$ 7,643,682
FUND BALANCE	\$ 5,127,609
NET INCOME (LOSS)	\$ 535,075
TOTAL	\$ 13,306,366

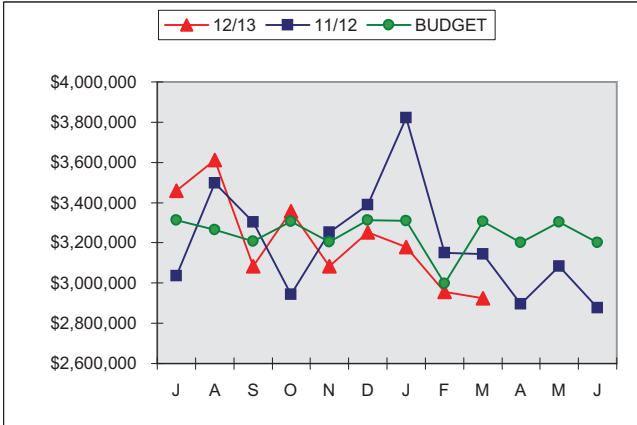
**EASTERN PLUMAS HEALTH CARE
STATEMENT OF REVENUE & EXPENSE
FOR THE MONTH ENDED
MARCH 31, 2013**

DESCRIPTION	CURRENT PERIOD			YEAR TO DATE			ANNUAL BUDGET
	ACTUAL	BUDGET	VARIANCE	ACTUAL	BUDGET	VARIANCE	
OPERATING REVENUE							
INPATIENT ROUTINE	\$ 184,467	\$ 223,479	\$ (39,012)	\$ 1,582,207	\$ 1,975,266	\$ (393,059)	\$ 2,631,285
INPATIENT ANCILLARY	\$ 234,679	\$ 261,455	\$ (26,776)	\$ 1,864,789	\$ 2,319,432	\$ (454,643)	\$ 3,087,405
TOTAL INPATIENT	\$ 419,146	\$ 484,934	\$ (65,788)	\$ 3,446,996	\$ 4,294,698	\$ (847,702)	\$ 5,718,690
SWING ROUTINE	\$ 20,000	\$ 61,490	\$ (41,490)	\$ 642,000	\$ 543,496	\$ 98,504	\$ 724,000
SWING ANCILLARY	\$ 10,309	\$ 49,676	\$ (39,367)	\$ 430,654	\$ 436,371	\$ (5,717)	\$ 579,962
TOTAL SWING BED	\$ 30,309	\$ 111,166	\$ (80,857)	\$ 1,072,654	\$ 979,867	\$ 92,787	\$ 1,303,962
SKILLED NURSING ROUTINE	\$ 436,248	\$ 493,362	\$ (57,114)	\$ 4,398,668	\$ 4,360,680	\$ 37,988	\$ 5,808,932
SKILLED NURSING ANCILLARY	\$ 55,999	\$ 86,291	\$ (30,292)	\$ 675,059	\$ 764,924	\$ (89,865)	\$ 1,018,367
TOTAL SKILLED NURSING	\$ 492,247	\$ 579,653	\$ (87,406)	\$ 5,073,727	\$ 5,125,604	\$ (51,877)	\$ 6,827,299
OUTPATIENT SERVICES	\$ 1,983,468	\$ 2,130,711	\$ (147,243)	\$ 19,315,032	\$ 18,822,127	\$ 492,905	\$ 25,078,792
TOTAL PATIENT REVENUES	\$ 2,925,170	\$ 3,306,464	\$ (381,294)	\$ 28,908,409	\$ 29,222,297	\$ (313,888)	\$ 38,928,743
OTHER OPERATING REVENUE	\$ 2,634	\$ 5,503	\$ (2,869)	\$ 45,588	\$ 49,530	\$ (3,942)	\$ 66,040
TOTAL REVENUE	\$ 2,927,805	\$ 3,311,967	\$ (384,162)	\$ 28,953,997	\$ 29,271,827	\$ (317,830)	\$ 38,994,783
DEDUCTIONS FROM REVENUE							
BAD DEBT/ADMINISTRATIVE ADJ'S	\$ 148,772	\$ 147,940	\$ 832	\$ 1,524,637	\$ 1,307,482	\$ 217,155	\$ 1,741,774
CONTRACTUAL ADJUSTMENTS	\$ 1,337,831	\$ 1,416,017	\$ (78,186)	\$ 12,339,160	\$ 12,514,014	\$ (174,854)	\$ 16,671,008
TOTAL DEDUCTIONS	\$ 1,486,603	\$ 1,563,957	\$ (77,354)	\$ 13,863,797	\$ 13,821,496	\$ 42,301	\$ 18,412,782
NET REVENUE	\$ 1,441,201	\$ 1,748,011	\$ (306,810)	\$ 15,090,200	\$ 15,450,331	\$ (360,131)	\$ 20,582,001
OPERATING EXPENSES							
SALARIES	\$ 813,157	\$ 805,964	\$ 7,193	\$ 7,110,735	\$ 7,190,385	\$ (79,650)	\$ 9,594,815
BENEFITS	\$ 190,839	\$ 215,787	\$ (24,948)	\$ 1,765,734	\$ 1,934,611	\$ (168,877)	\$ 2,580,428
SUPPLIES	\$ 150,341	\$ 151,106	\$ (765)	\$ 1,261,802	\$ 1,403,631	\$ (141,829)	\$ 1,857,037
PROFESSIONAL FEES	\$ 202,137	\$ 236,555	\$ (34,418)	\$ 2,028,807	\$ 2,100,405	\$ (71,598)	\$ 2,796,024
REPAIRS & MAINTENANCE	\$ 34,826	\$ 38,465	\$ (3,639)	\$ 387,745	\$ 346,180	\$ 41,565	\$ 461,574
PURCHASED SERVICES	\$ 89,467	\$ 61,738	\$ 27,729	\$ 831,112	\$ 555,915	\$ 275,197	\$ 741,129
UTILITIES/TELEPHONE	\$ 59,752	\$ 57,872	\$ 1,880	\$ 523,401	\$ 523,369	\$ 32	\$ 697,826
INSURANCE	\$ 33,215	\$ 33,280	\$ (65)	\$ 297,231	\$ 299,524	\$ (2,293)	\$ 399,366
RENT/LEASE EXPENSE	\$ 15,828	\$ 18,654	\$ (2,826)	\$ 170,432	\$ 167,884	\$ 2,548	\$ 223,846
DEPRECIATION/AMORTIZATION	\$ 70,001	\$ 75,748	\$ (5,747)	\$ 588,235	\$ 645,731	\$ (57,496)	\$ 872,975
INTEREST EXPENSE	\$ 20,415	\$ 26,098	\$ (5,683)	\$ 198,707	\$ 234,885	\$ (36,178)	\$ 313,180
OTHER EXPENSES	\$ 7,093	\$ 12,991	\$ (5,898)	\$ 114,237	\$ 134,277	\$ (20,040)	\$ 178,099
TOTAL EXPENSES	\$ 1,687,070	\$ 1,734,259	\$ (47,189)	\$ 15,278,177	\$ 15,536,797	\$ (258,620)	\$ 20,716,299
OPERATING INCOME (LOSS)	\$ (245,869)	\$ 13,752	\$ (259,621)	\$ (187,977)	\$ (86,467)	\$ (101,510)	\$ (134,298)
MISCELLANEOUS	\$ 2,709	\$ 2,383	\$ 326	\$ 47,447	\$ 21,450	\$ 25,997	\$ 28,600
CONTRIBUTIONS	\$ 151,674	\$ -	\$ 151,674	\$ 249,244	\$ 150,000	\$ 99,244	\$ 200,000
PROPERTY TAX REVENUE	\$ 47,373	\$ 47,375	\$ (2)	\$ 426,361	\$ 426,375	\$ (14)	\$ 568,500
NON-OPERATING INCOME (EXPENSE)	\$ 201,756	\$ 49,758	\$ 151,998	\$ 723,052	\$ 597,825	\$ 125,227	\$ 797,100
NET INCOME (LOSS)	\$ (44,112)	\$ 63,510	\$ (107,622)	\$ 535,075	\$ 511,358	\$ 23,717	\$ 662,802

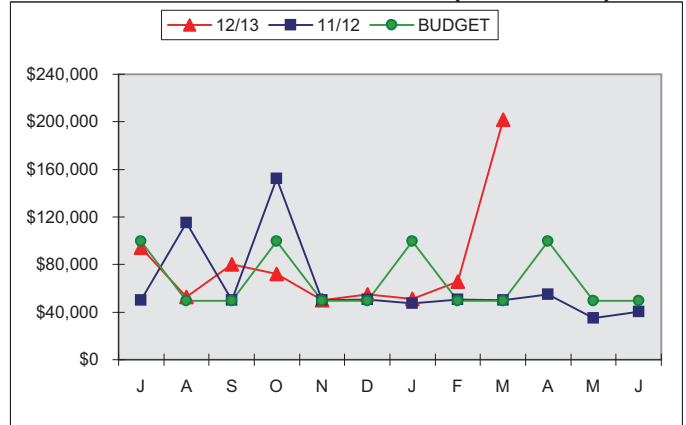
DESCRIPTION	CURRENT PERIOD			YEAR TO DATE			ANNUAL BUDGET
	ACTUAL	BUDGET	VARIANCE	ACTUAL	BUDGET	VARIANCE	
STATISTICAL DATA							
ACUTE INPATIENT ADMISSIONS	17	34	-17	178	309	-131	411
ACUTE PATIENT DAYS	69	83	-14	569	733	-164	975
SKILLED NURSING PATIENT DAYS	1314	1488	-174	13249	13152	97	17520
SWING BED DAYS	10	30	-20	321	272	49	362
E.R. VISITS	272	268	4	2616	2370	246	3160
CLINIC VISITS	2324	2315	9	20961	20438	523	27230

EASTERN PLUMAS HEALTH CARE
 MONTHLY FINANCIAL GRAPHS
 FOR THE YEAR ENDED JUNE 30, 2013

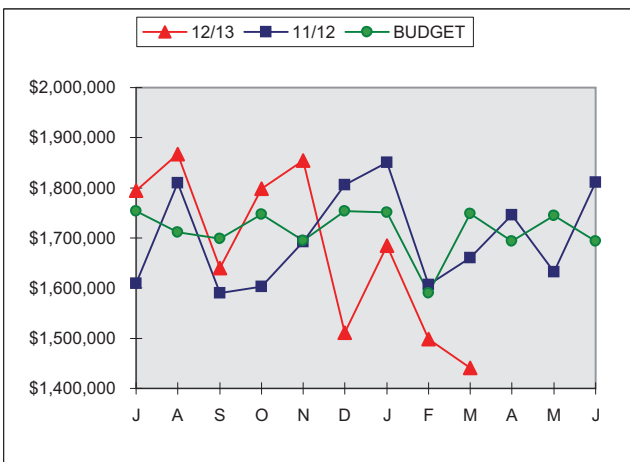
1. GROSS PATIENT REVENUE



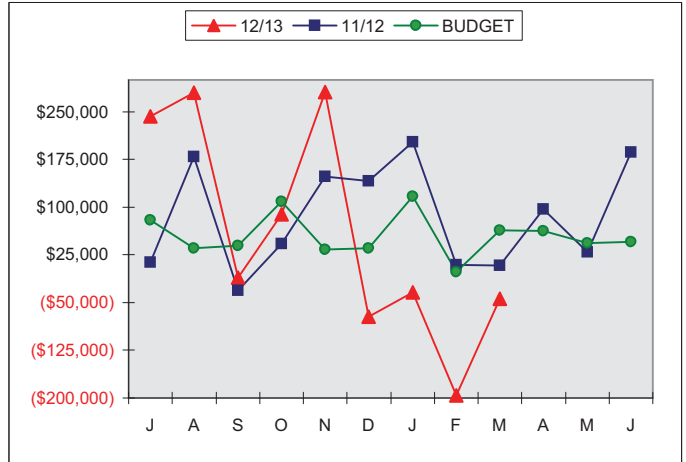
4. NON-OPERATING INCOME (EXPENSE)



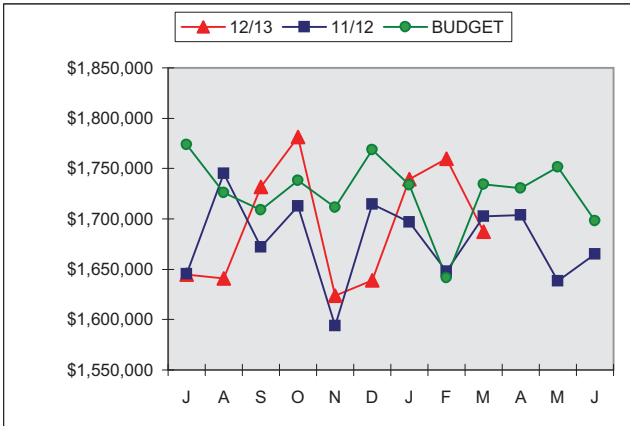
2. ESTIMATED NET REVENUE



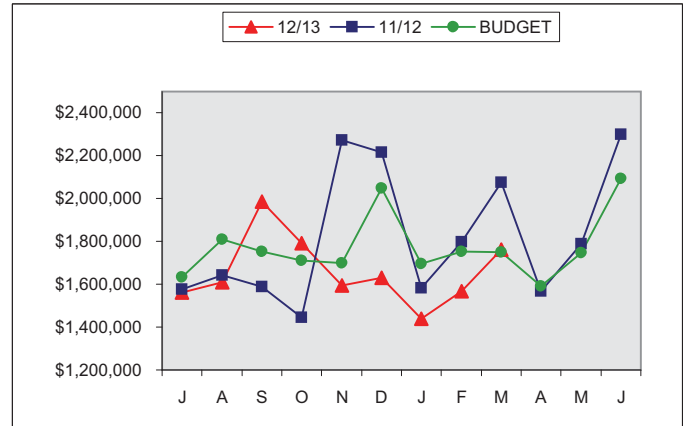
5. NET INCOME (LOSS)



3. OPERATING EXPENSES

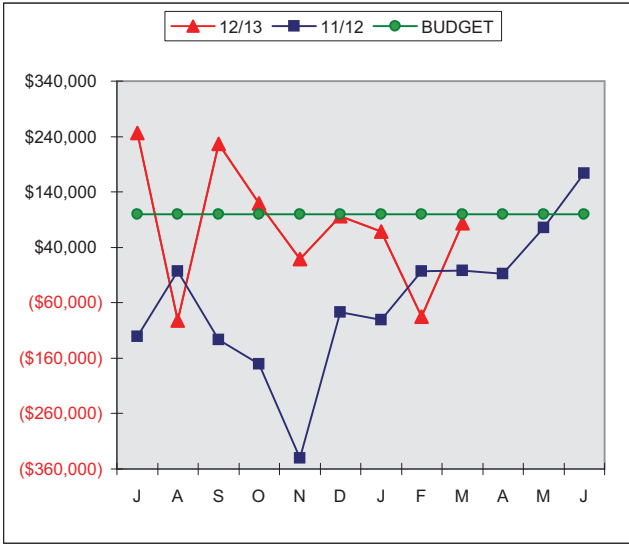


6. CASH RECEIPTS

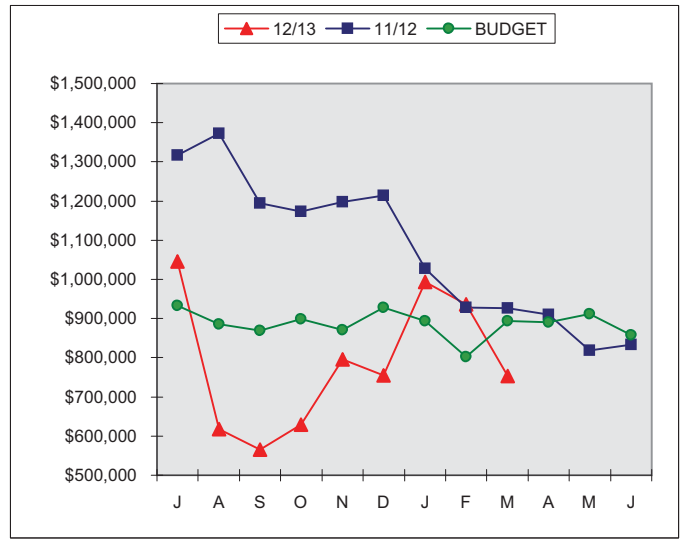


EASTERN PLUMAS HEALTH CARE
MONTHLY FINANCIAL GRAPHS
FOR THE YEAR ENDED JUNE 30, 2013

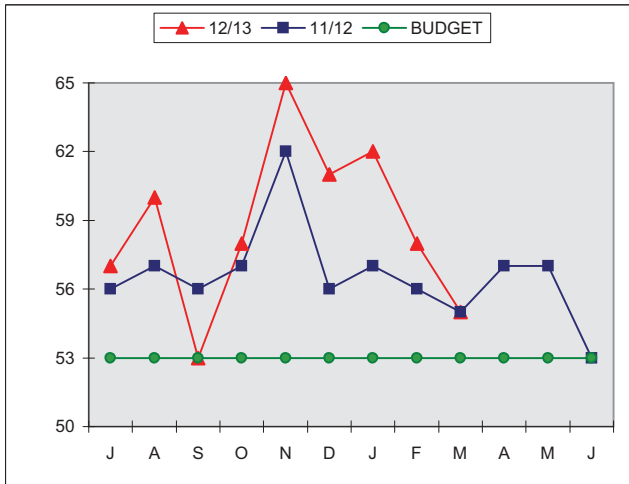
7. OPERATING CASH



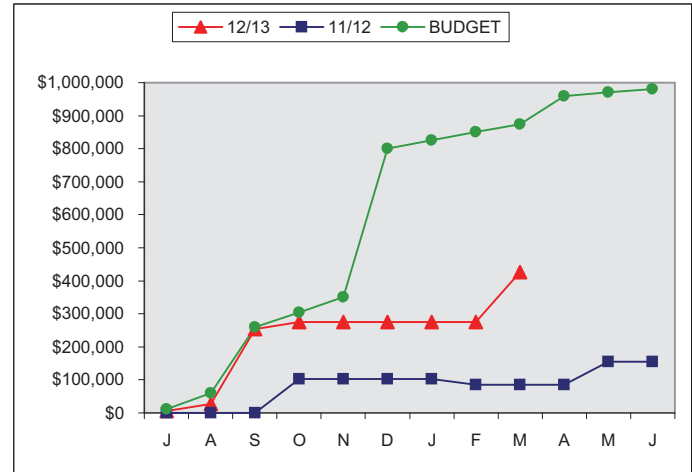
10. ACCOUNTS PAYABLE



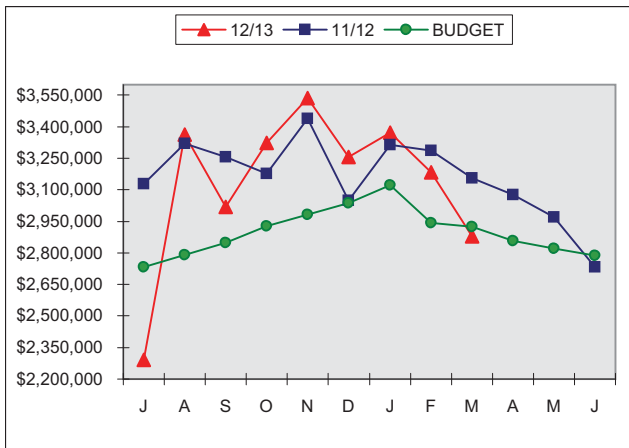
8. ACCOUNTS RECEIVABLE-DAYS



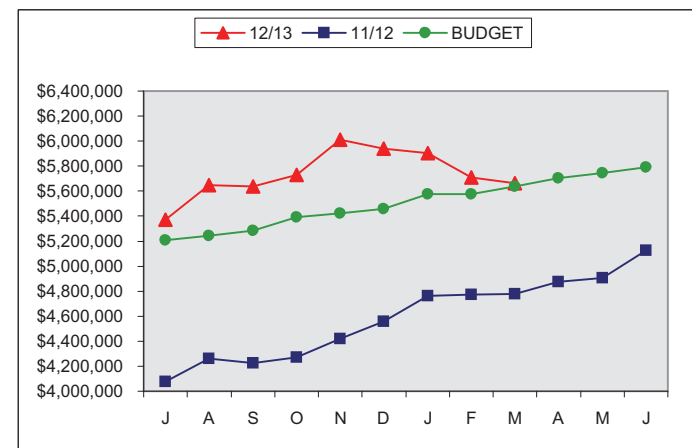
11. CAPITAL EXPENDITURES-YTD



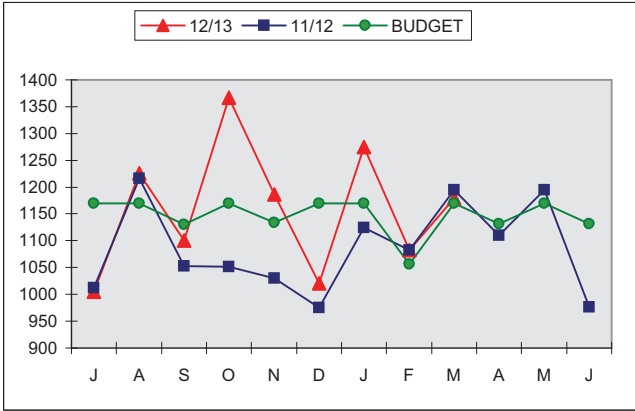
9. ACCOUNTS RECEIVABLE, NET



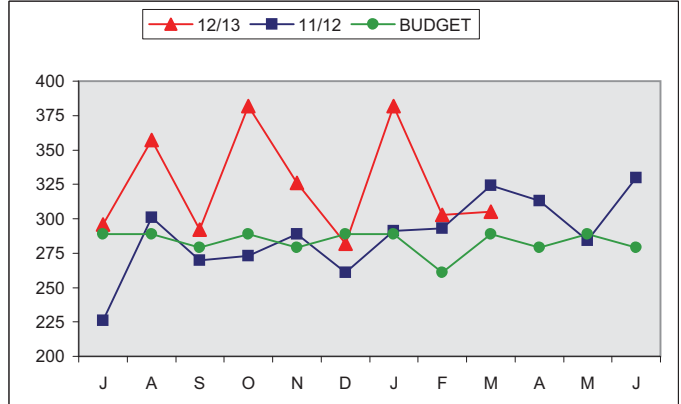
12. FUND BALANCE + NET INCOME (LOSS)



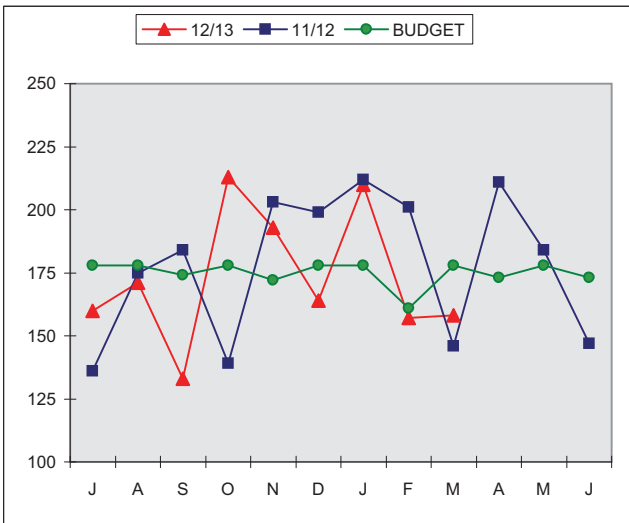
13. PORTOLA MEDICAL CLINIC VISITS



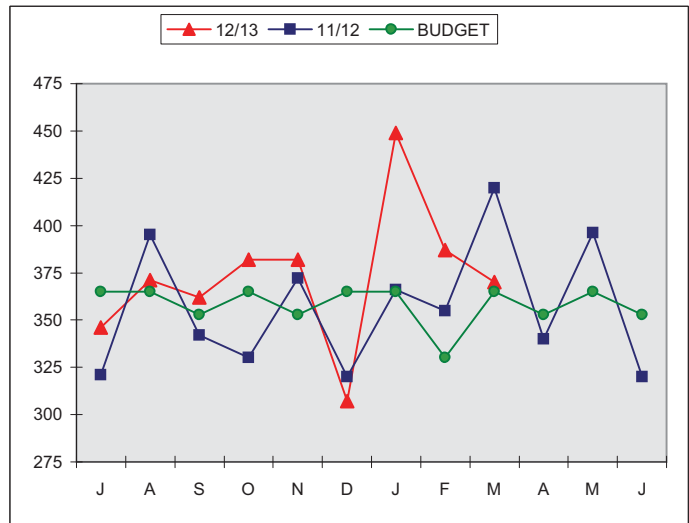
16. LOYALTON MEDICAL CLINIC VISITS



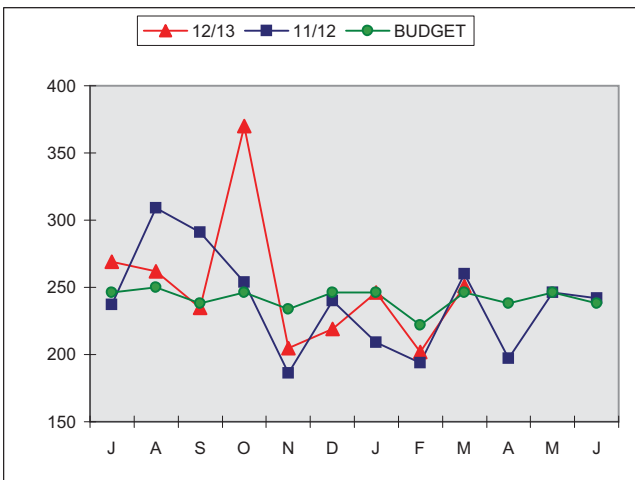
14. PORTOLA DENTAL CLINIC VISITS



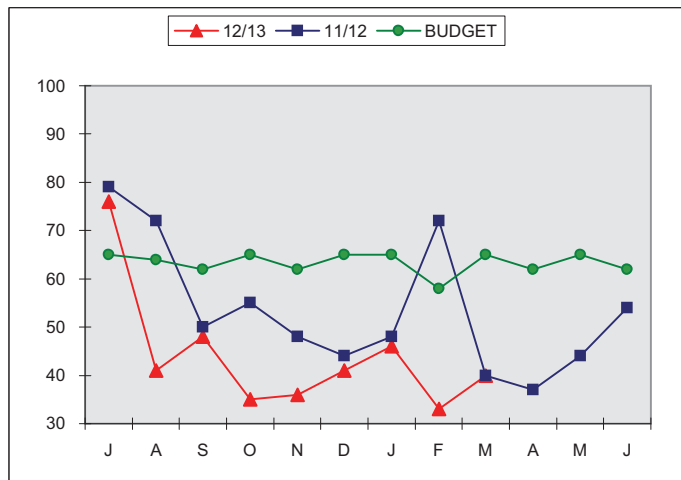
17. INDIAN VALLEY MEDICAL CLINIC VISITS



15. GRAEAGLE MEDICAL CLINIC VISITS

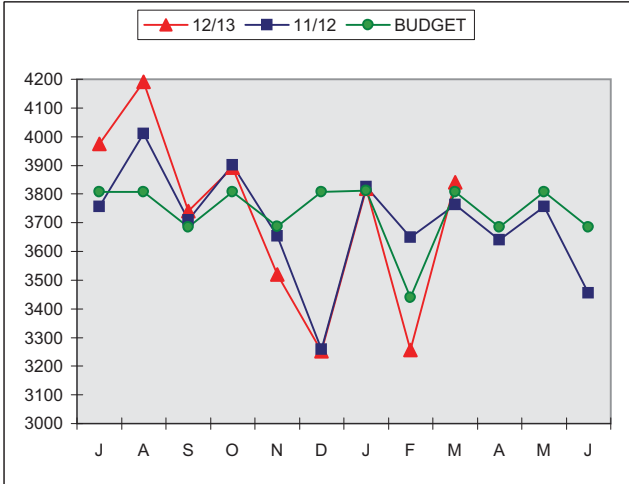


18. PORTOLA ANNEX VISITS

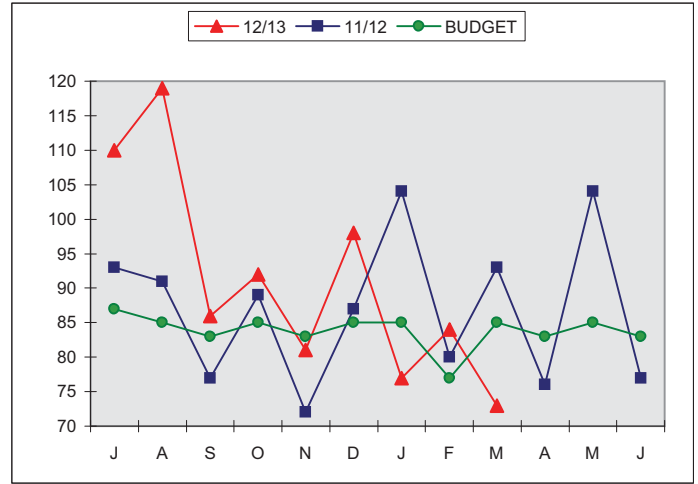


EASTERN PLUMAS HEALTH CARE
 MONTHLY FINANCIAL GRAPHS
 FOR THE YEAR ENDED JUNE 30, 2013

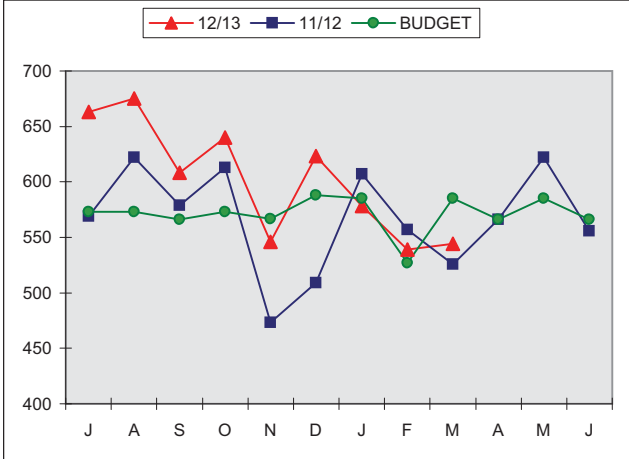
19. LABORATORY PROCEDURES



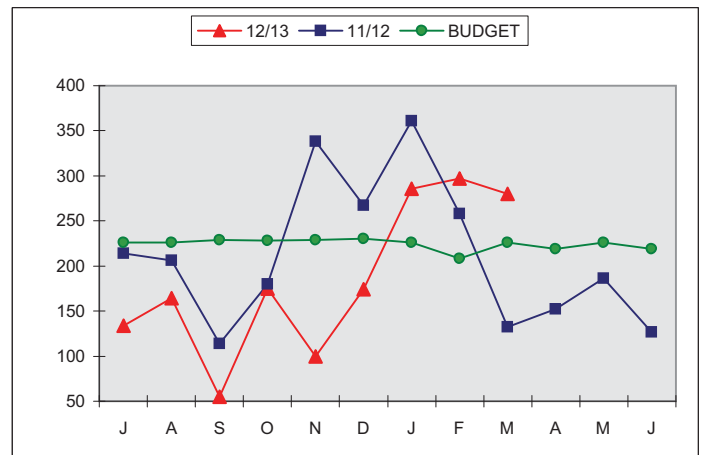
22. AMBULANCE RUNS



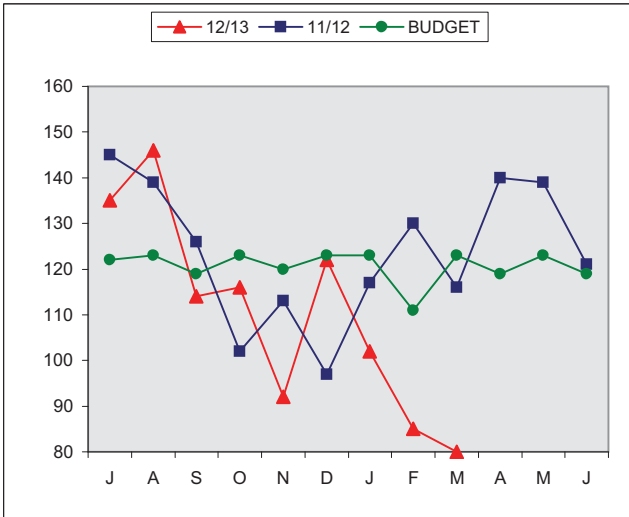
20. RADIOLOGY PROCEDURES



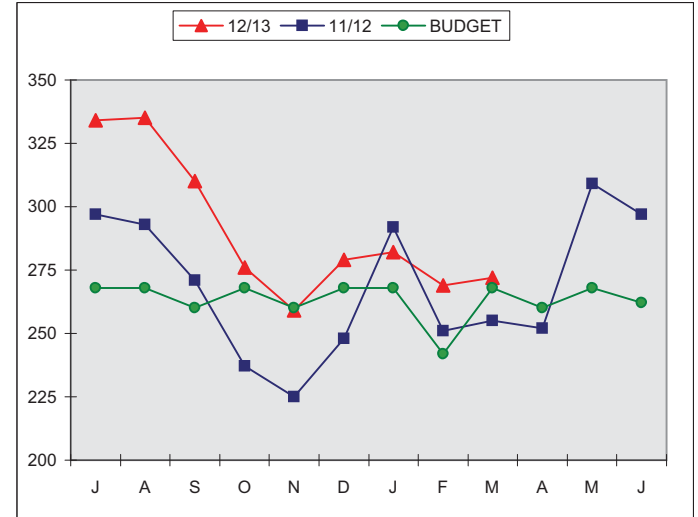
23. RESPIRATORY PROCEDURES



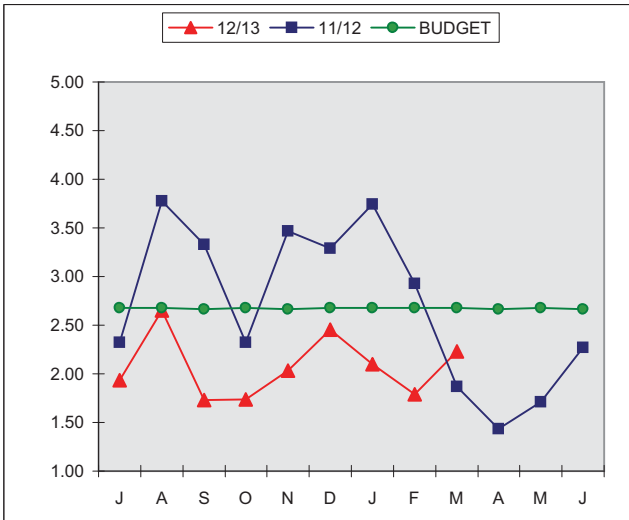
21. ECGS



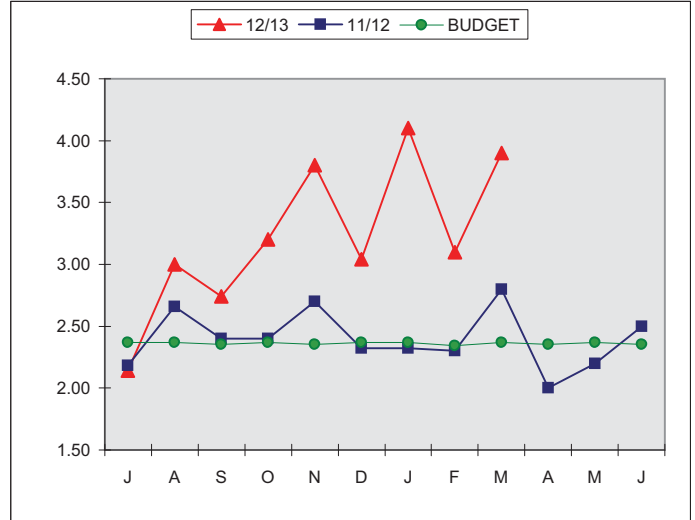
24. EMERGENCY ROOM VISITS



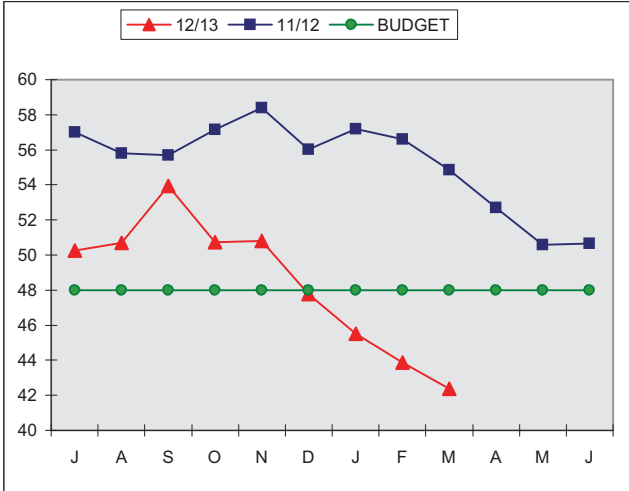
25. AVERAGE DAILY CENSUS - ACUTE



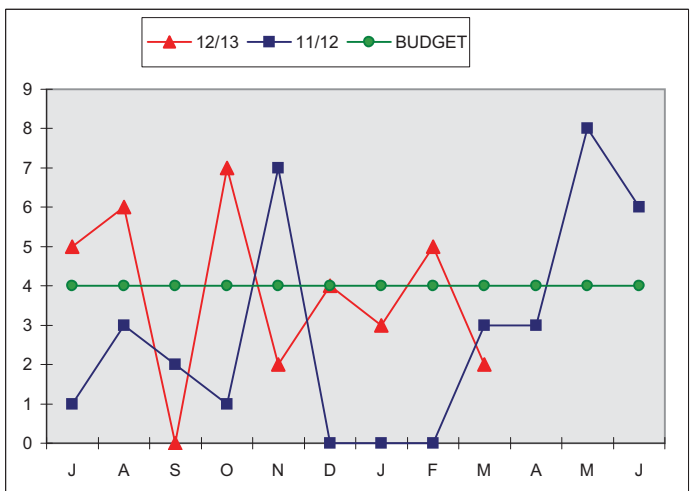
28. AVERAGE LENGTH OF STAY - ACUTE



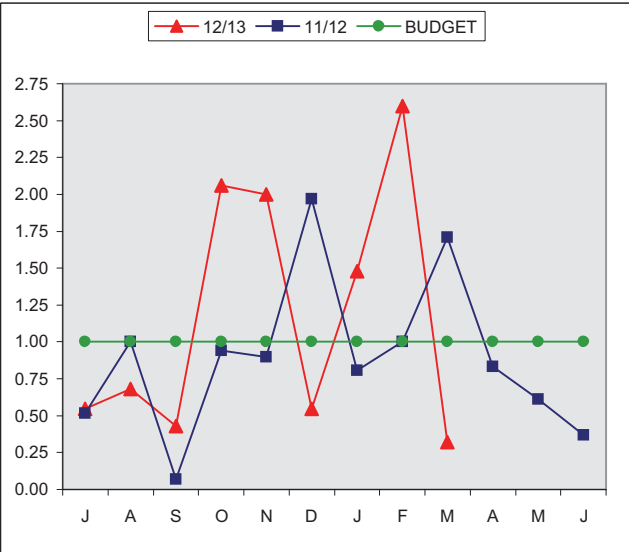
26. AVERAGE DAILY CENSUS - SNF



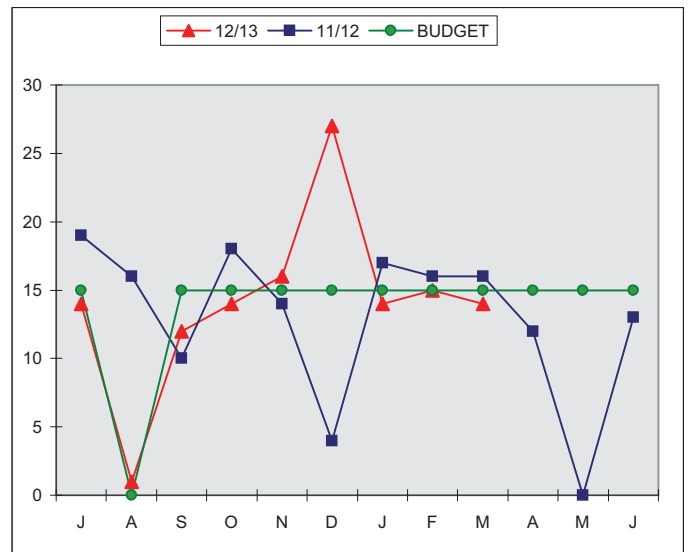
29. SURGERIES - IN & OUTPATIENT



27. AVERAGE DAILY CENSUS-SWING

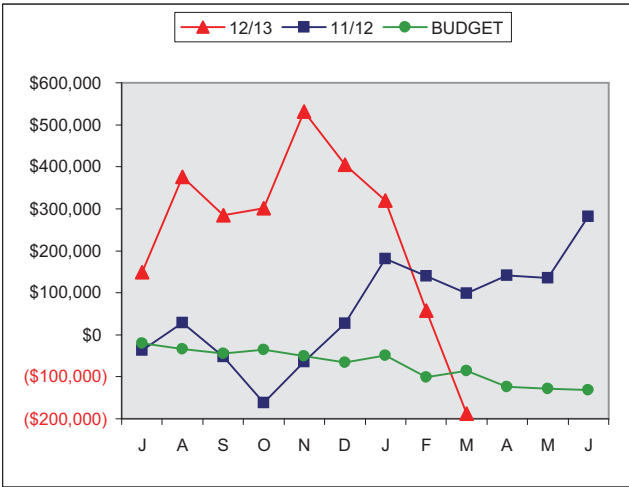


30. ENDOSCOPY PROCEDURES

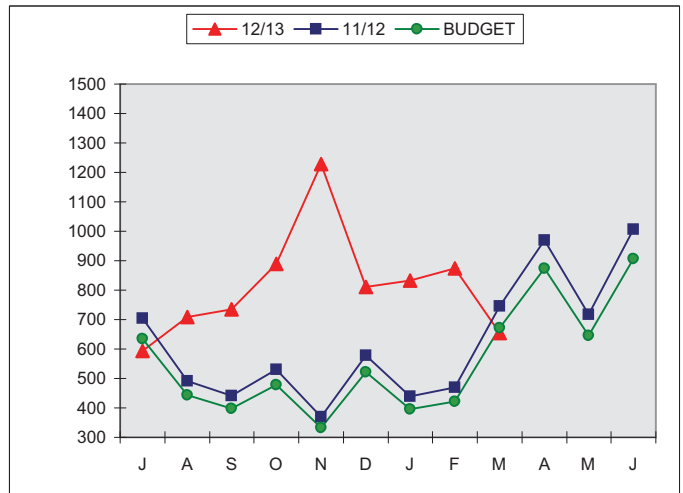


EASTERN PLUMAS HEALTH CARE
MONTHLY FINANCIAL GRAPHS
FOR THE YEAR ENDED JUNE 30, 2013

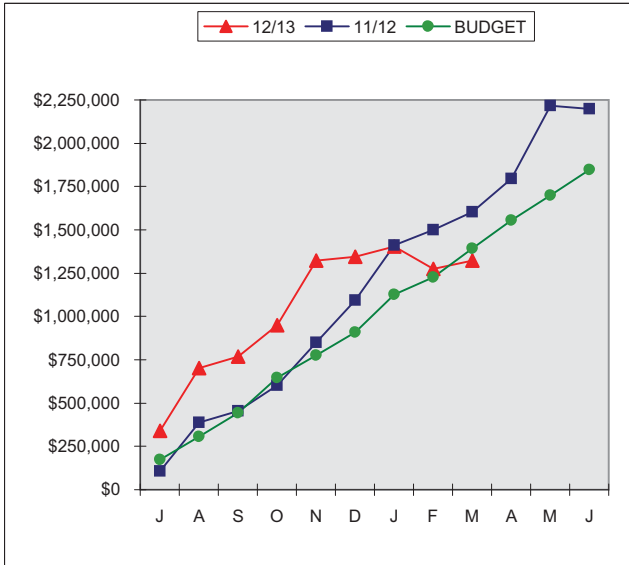
31. YEAR TO DATE OPERATING INCOME (LOSS)



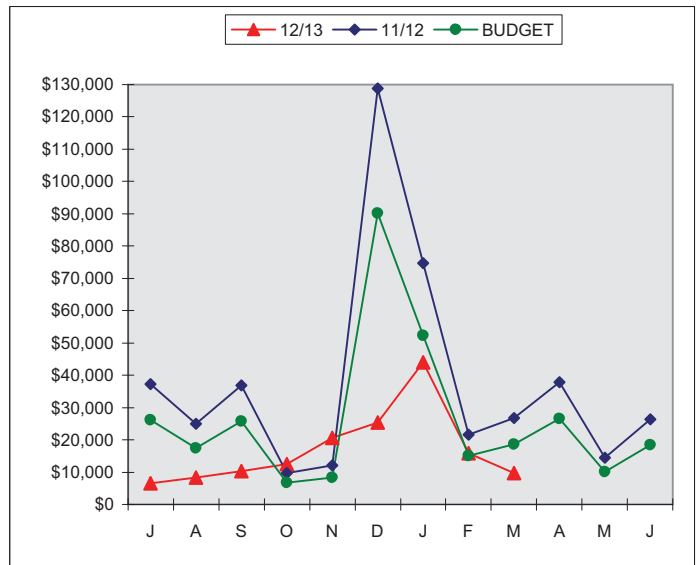
34. OVERTIME HOURS



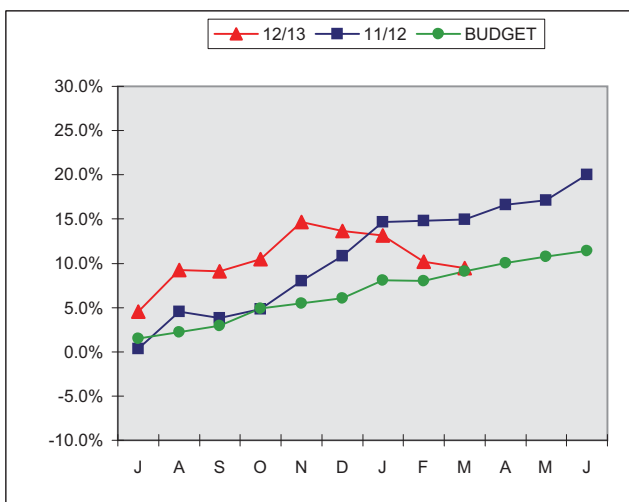
32. EARNINGS BEFORE INTEREST, DEPRECIATION & AMORTIZATION



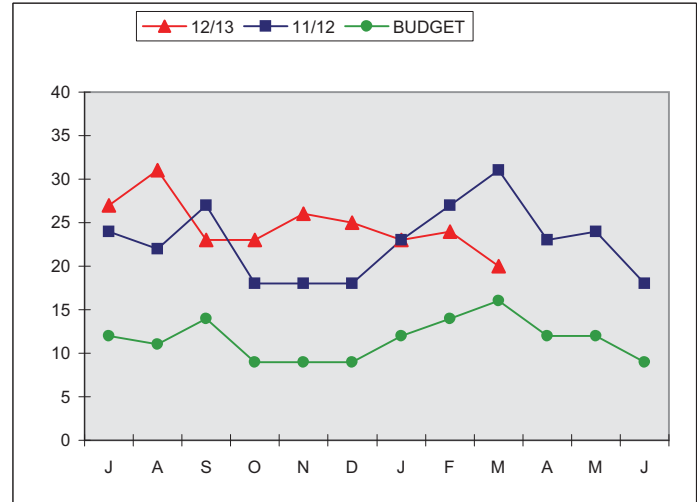
35. DENIALS



34. RETURN ON EQUITY



36. EMERGENCY DEPARTMENT TRANSFERS



**EPHC Project List
Portola**

Project Description	Projected Completion date	Approximate Cost	Update
Removal of ambulance barn for OSHPD NPC compliance on boiler building.	OSHPD deadline 12/31/2012 extended to 2015	\$75,000-100,000	OSHPD extension granted to 2015. Applying for extension to 2030.
Install Generators or UPS backup at clinics:	Summer 2013(Portola)	\$2,000.00	Adding UPS backup batteries in Loylton and Graeagle. Portola generator to be installed in Summer 2013.
Boiler replacement	12/31/14	\$700,000 +	Aspen architects completing master plan which includes analysis of infrastructure needs. Once Master Plan is complete they will analyze options for boiler replacement. Requesting another extension to 2030. Also, investigating CDBG and USDA for funding of project.
Complete Life Safety modifications required in recent inspection	5/13	\$1,500.00	Maintenance staff completing modifications as required.

**EPHC Project List
Portola**

Project Description	Projected Completion date	Approximate Cost	Update
Backup Boiler: Determine if boiler is repairable. If so, make necessary repairs. If not, explore options for installation of a replacement. Bury fuel lines.	12/31/2012	\$6,000.00	11/18/12 Boiler repairs completed. Fuel lines to be buried in Summer 2013.
Portola Clinic Painting	6/13	Minor	Paint interior of Portola Clinic. Project started. To be complete by June 2013.
Prevent water leakage into server room	10/13	\$5,000.00	Temporarily sealed pipes with silicone. Will look at digging out pipes to repair leak. Delay project to fall 2013.
Install eaves on Business Office structure. Repair windows.	Spring/Summer 2013	?	Minor repairs completed to seal leaks to get us through winter season. Permanent fix (extend roof) to be evaluated in summer 2013.
Replace loading dock poles	6/13	\$1,000.00	Project delayed until 2013.

**EPHC Project List
Portola**

Project Description	Projected Completion date	Approximate Cost	Update
ED Center, Kitchen: Removal of old equipment, painting and repair of cabinets.	8/13	Minor	Removal of old kitchen equipment completed. Painting and repair of cabinets in kitchen area to be completed as time permits.
<i>Nifty Thrifty Windows-Replacement</i>	2/13	<i>Under warranty</i>	<i>Complete. Eleven windows replaced on 1/24/13.</i>
Medical Records: Minor remodel, painting	9/13	Minor	Miscellaneous remodel, painting, etc. to be completed in 2013.
Portola Hospital walkway repair	9/13	Minor	Repair broken concrete path from ER to Admin. To be done by in house staff in Summer 2013.

**EPHC Project List
Loyalton**

Project Description	Project Completion Date	Approximate Cost	Update
Patient rooms: Painting of patient rooms. (5 rooms remaining)	Winter, 2012/2013	Minor	Complete 4/12/13.
Repair damage to main entrance overhang.	Spring 2013	minor	Not urgent. To be completed in 2013.
Relocate Clinic to hospital. Remove old radiology equipment. Misc. remodel.	6/13	?	Still developing scope of project and specific OSHPD requirements.
Chiller: replacement or other alternative	Undetermined	\$275,000.00	Future project.