



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

**Thursday, January 26, 2023 at 9:30 a.m.**

**1. Call to Order**

Meeting was called to order at 10:02 a.m.

**2. Roll Call**

Augustine Corcoran, Board Chair; Linda Satchwell, Vice Chair; Gail McGrath, Board Member; Paul Swanson, M.D., Board Member; Marcia Hughes, Board Member.

Staff in attendance: Doug McCoy, CEO; Lorraine Noble, Director of Nursing Portola; Tamara Santella, Director of Nursing Loyaltan; Penny Holland, Chief Nursing Officer; Tracy Studer, Director of Clinics; Michelle Romero, Infection Prevention; Donna Dorsey, ER Manager; Joanna Garneau, Grant Program Manager; and Barbara Sokolov, Executive Assistant/Clerk of the Board.

**3. Board Comments**

Gail McGrath announced and welcomed Augustine Corcoran as the new Board Chair.

**4. Public Comment**

None

**5. Consent Calendar**

- **ACTION:** Motion was made by Director McGrath, seconded by Director Swanson to approve the consent calendar.

**Roll Call Vote:** AYES: Approved unanimously by the Board of Directors.

Nays: None

- **Public Comment:** None

**6. Auxiliary Report**

Director McGrath reported that winter weather had slowed down sales at the thrift store but overall it is in good financial shape. She voiced concern about the need for more volunteers as many are aging out.

**7. Staff Reports**

A. Grant Program Manager

Joanna Garneau

Reported on three programs benefitting EPHC: CalAIM; a Covid-19 Test to Treat Equity Grant; and a BHI Incentive. CalAIM is a DHCS initiative to improve quality of life and health outcomes for managed Medi-Cal members by addressing social determinants of health and improving health equity. A COVID-19 Test to Treat Equity grant from the California Department of Public Health awarded EPHC \$456,756. Funding will be utilized to prepare for future health emergencies and disaster response. Purchases covered by this funding include an exam room and two larger structures. These climate controlled, portable shelters provide additional expansion support and options for disaster response. Funding will also cover Eastern Plumas Health Care's purchase of a new truck and signage. A Behavioral Health Integration Incentive grant from the Department of Health Care Services awarded EPHC \$110,000, a multi-year initiative that ended in December 2022. This incentive was put into place to improve physical and behavioral health outcomes and patient experience. Joanna also

explained that she was in the process of creating a new department with a case manager for managed Medi-Cal. EPHC is the only Enhanced Care Management Provider in Plumas & Sierra Counties. She was thanked by the BOD for her excellent work obtaining and managing these programs and her clear presentation. She will be reporting to the BOD quarterly.

- B. Infection Control/COVID-19 Michelle Romero  
See attached report. No additional COVID-19 in the Portola SNF. Director McGrath praised Michelle for an exceptional job mitigating exposure.
- C. Chief Nursing Officer Report Penny Holland  
See attached report. Penny stated that her team was busy with Swing patients.
- D. SNF Director of Nursing Lorraine Noble  
See attached report. Lorraine introduced the new DON for Loyalton, Tamara Santella.
- E. Director of Clinics Tracy Studer  
See attached report. Tracy is excited about the gorgeous new clinic slated to open soon in Loyalton and how, over time, it will allow for additional service to be provided. Noted that recent training of frontline staff has been beneficial, and she sees growth and positive change. Training in billing and insurance also scheduled.

8. **Chief Executive Officer Report**  
**OPERATIONAL OVERVIEW:**

Doug McCoy

The Cerner EMR implementation project continues with our second implementation testing event (IT2) beginning January 23<sup>rd</sup>. This will be the final testing event to identify any further work needed to complete the build process and will be followed by user training which will start in mid-February for all staff. Cerner has acquired the implementation team for the SNF module build. After a review of our current resource availability and related projects, we have requested that the SNF module build commence approximately 90 days after our go-live event for the campus on April 3<sup>rd</sup>. In addition to the over EMR build process, we are also undergoing significant upgrades to our network infrastructure, wired and wireless systems to increase network speed, and computer equipment for clinical documentation. This has and continues to be an extensive undertaking by all EPHC staff, and I am very pleased with the efforts made by all of our key implementation stakeholders.

The seismic plan submitted by EPHC was accepted by HCAI (formerly OSHPD) and EPHC was also approved for the Small Rural Hospital Relief Program (SRHRP) through HCAI. This program will allow for funding requests to offset structural engineering assessments and other related planning costs. We are awaiting confirmation on the funding award amount from HCAI, and plan to have a structural engineering assessment completed this year. This assessment will identify the potential scope and cost for any required retrofit of the hospital to achieve compliance with the 2030 seismic requirement.

The Loyalton clinic construction project timeline was revised on January 20<sup>th</sup> with an estimated completion date of February 15<sup>th</sup>. Upon receipt of a certificate of occupancy we will then finalize the licensing process with CDPH and establish a date to begin services in the new location.

The hospital flooring installation project was completed at the end of December, and engineering is now completing the wall treatment and handrail installation. This should be finished within the next couple weeks, and we will then begin work on the Loyalton SNF flooring project and some ancillary areas of the hospital.

Barbara Sokolov has done a significant amount of work on foundation development and is recruiting for new Board members and individuals interested in participating on various subcommittees. We will be revising the bylaws and organizational structure based on new strategic initiatives and needs for the campus.

In December, EPHC recognized 128 employees for milestone years of service. These employees represent 50% of total employees working for the organization, and awards were given for 5, 10, 15, 20, 25, and 30+ years of service to the community. 40% of the awards presented were for 10+ years of service, and more than a dozen employees were recognized for 30+ years. Marilyn Olsen was given a special recognition for 50 years of nursing service with EPHC. We are extremely proud of Marilyn's work and dedication to the members of our community as well as all those who received awards!

**CUSTOMER SERVICE INITIATIVE:**

An onsite training by Custom Learning Systems was held for all management, Service Excellence Council, and Service Excellence Advisors on January 12<sup>th</sup> and 13<sup>th</sup>. The focus of this training was on employee engagement activities/interactions and additional bite sized learning modules that will be presented during routine department meetings. Patient satisfaction survey responses continue to increase with the addition of electronic tablets added to the clinics. Surveys received over the last 60 days include:

- 96% recommendation rate for clinic services
- 90% recommendation rate for ED services
- 100% recommendation rate for hospital swing bed services
- 100% recommendation rate for outpatient therapy services

Provider training on the Service Excellence Advisor workshop was completed on January 19<sup>th</sup>, and all departments continue to review their survey metrics on a monthly basis as part of our quality assurance process. We are very pleased with the progress made across the organization for this important initiative as we continue our goal toward achieving national 5-star recognition status.

**COMPLIANCE PROGRAM:**

There were no compliance reviews initiated for the period December 1<sup>st</sup> through January 20<sup>th</sup>.

**9. Policies**

Public Comment: None

**ACTION:** Motion was made by Director McGrath, seconded by Director Hughes to approve all policies.

**Roll Call Vote:** AYES: Approved unanimously by the Board of Directors.

Nays: None

**10. Auditor Presentation**

Jerrel Tucker, JWT & Associates I/D

- Audit Results

Jerrel Tucker presented his findings from the June 30, 2022, audit stating EPHC had a good, consistent, and strong year. He thanked Katherine and her team for getting everything to him in a timely manner. He indicated that reasons EPHC was so strong, and had key financial markers of a very successful small hospital, included good governance by the BOD; a steady hand and consistency in administration, and prudent expense management. When asked if he had any advice going forward, he

Regular Meeting of the Board of Directors of Eastern Plumas Health Care  
**January 26, 2023 MINUTES - Continued**

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advised permanent staff would be a big plus in addition to looking at expanding in areas where additional services are needed

- 11. Committee Reports** Board Members I/D/A
- A. Finance Committee**
- Acceptance of Fiscal Year Audit Report

Director Swanson reported that an in-depth presentation of the Audit Report took place in the Finance Committee meeting. Looked good, finances are strong.

**ACTION:** Director Swanson moved to accept the fiscal year audit report, Director Corcoran seconded.

**Roll Call Vote:** AYES: Approved unanimously by the Board of Directors.

Nays: None

- 12. Public Comment**  
None.

- 13. Board Closing Remarks**  
Director McGrath stated that many projects were coming together to make for smoother functions and processes and that it was an exciting time at EPHC.

**Open Session recessed at 10:17 a.m.**

**14. Closed Session**

- A. Pursuant Hearing (Health and Safety Code 32155)**

*Subject Matter: Staff Privileges*

- Provisional 1 Year Appointments
  - Little, Amy MD ED
  - Jean-Baptiste, Ryan MD Tele Radiology
  - Fountain, Jeffrey DO Tele Radiology
- Active 2 Year Appointments
  - Stoll, Daniel MD Clinic
  - Cooper-Smith, Mindy MD ED
  - Cox, Charles MD ED
  - Klein, Michael MD Tele Radiology
  - Hermann, Matthew MD Tele Radiology
  - Molick, Royce DO Tele Psych

- B. Public Employee Performance Evaluation (Government Code Section 54957) Subject Matter: CEO**

- C. Pursuant to Health and Safety Code Section 32106, Report Involving Trade Secret, Report Will Concern Proposed New Facilities, Estimated Date of Public Disclosure June 2023**

**15. Open Session Report of Actions Taken in Closed Session**

The Board returned at approximately 10:41 am.

**A: ACTION-** All providers approved for privileges

**B: No Action taken**

**C: No Action taken**

**16. Adjournment**

Meeting adjourned at 11:00 a.m.