



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

Thursday, January 27, 2022 at 9:30 a.m.

1. Call to Order

Meeting was called to order at 9:56 a.m.

2. Roll Call

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

Staff in attendance: Doug McCoy, CEO; Katherine Pairish, CFO; Shannon Harvey, Infection Prevention/ Employee Health; Penny Holland, CNO; Donna Dorsey, ED Manager; Paul Bruning, Director of Clinics; and Susan Horstmeyer, Executive Assistant/ Clerk of the Board.

3. Board Comments

A suggestion was made to change the order of the agenda and have the Auditor's Report after the consent calendar.

4. Consent Calendar

ACTION: Motion was made by Director Corcoran, seconded by Director McGrath to approve all items on the consent calendar and change the order of today's agenda, placing the auditor's presentation after the consent calendar.

AYES: Directors: McGrath, Swanson, Whitfield, Satchwell and Corcoran

Nays: None

Not present: None

5. Auditor Presentation

Jerrel Tucker

The auditor's report will be added to the next meeting as an action item for acceptance by the board.

Mr. Tucker reported the audit was completed remotely due to Covid precautions; all records were digitized. Katherine's team did a great job getting everything submitted in a timely manner. EPHC received an "A" on the audit. Pandemic relief funds bolstered EPHC's finances. The revenue cycle management is doing a great job. Director McGrath commented the very positive cushion is good timing as there are two big projects on the drawing board (Loyalton Clinic remodel and the new Therapy and Wellness Center building) which will be an enormous benefit to the community.

6. Auxiliary Report

Director McGrath reported things have been a little slow during the last month due to snowstorms, donations are still coming in. The revised By-Laws from 2020 need a vote for acceptance.

ACTION: Motion was made by Director McGrath, seconded by Director Corcoran, to approve the By-Laws.

Roll Call Vote: Ayes: Directors McGrath, Swanson, Whitfield, Satchwell & Corcoran

Abstain: None

Nays: None

7. Staff Reports

- A. Infection Control/ COVID-19 Shannon Harvey
Shannon did not have a report. Doug McCoy will report on this topic during his report.
- B. Chief Nursing Officer Report Penny Holland
Penny reported staffing in the lab has been difficult due to lack of a CLS for 1.5 weeks. We have travelers covering but will be losing 1 of 3 this weekend. Over half the radiology department is out with Covid as well as multiple nurses. Our per diems have been awesome filling in but they are getting Covid as well. Attended a Tri-county surge planning yesterday. Renee Balderas completed the wound certification course and is waiting to take the test. Kate Cooke is currently taking the wound course. The respiratory department is doing better with the addition of another therapist. Donna Dorsey thanked everyone who helped courier labs to Quincy while we were without a CLS.
- C. SNF Director of Nursing Lorraine Noble
Lorraine was not present/ out sick.
- D. HR Director Lori Tange
Lori was not present.
- E. Chief Financial Officer Report Katherine Pairish
See attached October financial reports. Katherine gave “kudos” to the business office for doing a great job. She is proud to be part of this organization.
Director McGrath commented that employees are making a difference, their efforts are reflected in the finances. She also pointed out what a relief it is to have local medical services, especially for the many seniors in the community.
Director Whitfield asked if there are strings associated with the Covid money coming in. Katherine responded that many Covid related items have already been purchased (screens for waiting areas, testing machines, tents, etc.). We have roughly \$3 million to spend on Covid specific needs.
- F. Director of Clinics Paul Bruning
Paul reported roughly 200 rapid Covid tests were received and delivered to businesses in town. The Covid testing drive-thru is booked about a week out. We are expanding point of care testing as 14% of labs ordered are not done by the patient, they left the campus and did not return to have labs completed. Overall, the clinics have been well above 3% growth, except for a couple months.
Director Whitfield asked about CLIA waivers. Paul responded we have CLIA waivers in all clinics.

8. Chief Executive Officer Report

Doug McCoy

Doug commented on EPHC’s plans for use of funds: budget to expand the hospital beds and skilled nursing, X-ray room remodel, new ED equipment, interior design for the ED, Loyalton skilled nursing facility and numerous other projects. The City has approved the new Loyalton Clinic office space, which we hope to have open in July. The new Therapy and Wellness building is roughly four weeks out from OSHPD/ HACL.

January has been the most significant month of impact from Covid in the county (198 positive cases/ week), mostly mild cases. We plan to add more lab equipment for Covid testing. The California Mandate for booster requirement has been extended to March. For EPHC 65% of

employees have tested positive for Covid. Nursing leadership has done a great job during this time, especially in regard to Penny and Donna's herculean efforts during the lab CLS shortage. BishFish and Cumulous Media are being utilized to assist in recruiting efforts. We are also adding to our recruiting efforts and use of travelers. Our Employee Satisfaction Survey is currently open to all employees.

Housing and childcare for staff continues to be quite challenging. We received positive feedback from the recent community advisory group. We also recently received a great testimonial from a pediatric speech therapy patient's grandmother regarding the success of the treatment. Thank you to the Board for approval last month of the additional holiday pay. Our team is doing a wonderful job.

OPERATIONAL PLAN OVERVIEW:

The mid-year operating performance for EPHC has exceeded budgeted expectations for both revenue and net income performance. Despite the increased costs related to the COVID pandemic, mid-year revenues exceeded expectations by 12.5% with net income over target by 1.12m. Revenue for the period was also 22% higher than the same time period in FY 2020/21, and 14% higher than FY 2019/20. The addition of clinic providers, outpatient rehabilitation service expansion, and increased community messaging have been key contributors to the YOY improvement.

The Omicron variant has led to a dramatic rise in positive case rates across the community. Although County case rates are at their highest levels since the beginning of the pandemic, we are seeing more mild symptoms and less hospitalizations over the past 4 weeks versus August through October. EPHC has expanded testing services and recently received home testing kits which we are providing to area business to assist with early detection and prevent transmission. Given availability and supply chain issues, we will continue to make these available to the community as we receive them. We will also be initiating antigen testing in our clinics to address the increasing need for community testing.

Booster vaccines were provided to our SNF residents in October, and although case rates have risen in the community, our clinical teams have done an outstanding job to prevent any patient exposure during the Omicron surge. We continue to follow all CDC and CDPH guidelines for employee testing and PPE use which has been key to this prevention success.

Due to staffing challenges across the State, we have had issues in our Lab Department during the month. Our nursing leadership team has done an outstanding job to address these challenges and recruit additional staff to stabilize the department. EPHC would like to thank Plumas District Hospital for their support in providing lab services during this period. Due to a significant challenge with power outages at PDH, EPHC was very happy to be able to assist with providing their hospital with beds temporarily to avoid service disruption. We continue to appreciate the collaborative working relationship with PDH as both systems work through various challenges over the past year.

CUSTOMER SERVICE INITIATIVE:

EPHC had planned for an onsite staff training from Custom Learning Systems to be held in early January after several months of postponement due to the COVID restrictions. Unfortunately, with the Omicron surge this was not able to be held as scheduled. However, two virtual sessions were completed with 40 managers and staff participating. Our next training session will be for our 14 Service Excellence Advisors and will be held virtually on February

3rd. Despite the pandemic impact on our strategic training plan, we have had ongoing success in our satisfaction results. For the quarter ending December 31st our outpatient rehabilitation team received a 94.8% excellence rating while our clinics received a 92-95% very good/excellent rating over the 308 patients surveyed. HCAHPS surveys for both the hospital and emergency department continue to be very positive, and another 13 customer reviews were posted during December.

PROJECT UPDATE:

- Loyalton Clinic – All plans have been submitted to the City for approval. We have interested contractors prepared to bid the project once approval has been received.
- IT/SNF basement restroom installation – Architectural plans have been completed for the addition of two restrooms in the Portola SNF basement area. Once approved by HCAi (formerly OSHPD) this construction will allow for the implementation of an outpatient geriatric behavior health program through Senior Solutions to assist the needs of the community.
- Loyalton SNF windows – We have identified a need for replacement of the resident windows in the Loyalton SNF. Contractor bidding is in progress and replacement will commence once the bids are reviewed and approved.
- Hospital and Loyalton flooring projects – Our contracted interior design team has provided a recommendation for an alternative flooring product based on improved durability and presentation. We plan to have the project rebid due to this change followed by installation which is part of our capital improvement plan for the fiscal year.
- X-ray room replacement – Our architects and the Phillips project team will be holding a meeting on February 2nd to finalize the design plans for the replacement of our x-ray room. Once completed, the plans will go to HCAi for approval prior to construction.
- Cerner EMR implementation – We have confirmed that the EMR project build will start on June 1st with completion and go-live scheduled for late November.

Director Satchwell asked about Mental Health services for Seniors. Doug replied that the Senior Solutions program will be integrated once we have the space completed and a contract for services in place. This program will provide three days/ week of outpatient therapy on site.

Director Satchwell asked about Covid antigen tests.

Director Satchwell also asked about the possibility of childcare on the EPHC campus. Doug responded that we have the land and are looking into a possible partnership with the City or developing the land. He noted there is minimal availability in the area.

9. Approve Resolution

- Resolution 296-AMX4 Portable X-Ray Machine

ACTION: Director McGrath made a motion, which was seconded by Director Satchwell, to approve the resolution to classify the X-Ray machine as surplus.

Roll Call Vote: Ayes: Directors McGrath, Swanson, Whitfield, Satchwell and Corcoran

Nays: None

10. Policies

ACTION: Motion was made by Director Swanson, seconded by Director Whitfield to approve all policies.

Roll Call Vote: AYES: Directors McGrath, Swanson, Whitfield, Satchwell and Corcoran

Nays: None

11. Committee Reports

Finance Committee: Director Swanson stated the audit and financials look good with a net income of \$9 million. Director Swanson recommended the board accept the Audit report next month when it is on the agenda as an action item.

Director Corcoran stated he is impressed with EPHC's finances. Katherine responded that it has been a team effort.

12. Public Comment

Josh Hart of Plumas Wired commented on the City of Portola's approval of the new cell tower which would be placed near the hospital. Mr. Hart felt the City Council was given misinformation at the time regarding the City's rights. He noted there have been recent developments by the FCC and Aviation industry regarding this issue. He praised the board for speaking out against the cell tower. He is asking the City to revoke the cell tower permit, asking the EPHC Board of Directors to add this issue to the agenda and for the City to revisit it as well.

13. Board Closing Remarks

Director McGrath thanked everyone for their total dedication, the positive nature of employees is very much appreciated.

Director Corcoran commented he and his family had Covid a couple weeks ago and is seeing the impact on schools as well.

Open Session recessed at 11:11 a.m.

14. Closed Session

A. Hearing (Health and Safety Code 32155)

Subject Matter: Staff Privileges

- Provisional 1 Year Appointments
 - Howard, Kristy DO Ob/ Gyn
 - Molick, Royce DO Tele Psych
 - Hossain, Mahmood DO Tele Psych
 - Murphy, Kathleen PhD Tele Psych
 - Balian, Kareen DMD Dentistry
 - Landeck, Scott MD Emergency Medicine
 - Hermann, Matthew MD Tele Radiology
 - Klein, Michael MD Tele Radiology
- Provisional 2 Year Appointments
 - Lucchesi, Archana MD Tele Radiology
 - Katz, Marina MD Tele Psych
 - Sangdahl, Christopher MD Tele Psych
 - Zolcik, Wojciech MD Tele Psych
 - Trenkle, Darcy MD Tele Psych
 - Coll, Shawni DO Tele Psych

B. Public Employee Performance Evaluation (Government Code Section 54957)

Subject Matter: CEO

15. Open Session Report of Actions Taken in Closed Session

The Board returned at approximately 1:45 pm.

ACTION: All staff privileges were approved.

16. Adjournment

Meeting adjourned at 1:46 p.m.

DRAFT