



**EASTERN PLUMAS HEALTH CARE DISTRICT
REGULAR MEETING OF THE BOARD OF DIRECTORS
MINUTES
Thursday, March 24, 2022 at 9:30 a.m.**

1. Call to Order

Meeting was called to order at 9:32 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; Michelle Romero, Infection Prevention/ Employee Health; Penny Holland, CNO; Lorraine Noble, DON; Lori Tange, HR Director; Paul Bruning, Director of Clinics; Jim Burson, Director of Rehab Services and Susan Horstmeyer, Executive Assistant/ Clerk of the Board.

3. Board Comments

Director Swanson requested another public comment section be added to the beginning of the agenda regarding comments for agenda items.

4. Consent Calendar

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

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

Nays: None

Not present: None

5. Auxiliary Report

Director McGrath reported January profits of \$1880.47, February profits of \$6842.34 with an ending balance of \$ 149,516. The amount allocated to the Memorial Fund is \$7233.00.

6. Staff Reports

A. Infection Control/ COVID-19

Michelle Romero

Michelle reported very low amount of positive Covid cases, 1.7% in comparison to 27% last month. A recent GI illness, possibly Norovirus, has impacted four residents in the Loyalton SNF as well as multiple employees.

B. Chief Nursing Officer Report

Penny Holland

Penny reported starting to prepare for the Cerner rollout with Charles in IT, meeting bi-weekly. The CLIA lab inspection went well with five deficiencies. We are preparing for a State inspection by doing CMS rounds. A former ED physician, Dr. Bertman, will be returning. Staffing is stable.

C. SNF Director of Nursing

Lorraine Noble

Lorraine reported the CNA class will be starting next month. We are down five nurses' aides and actively recruiting. We have two new LVN's.

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D. HR Director

Lori Tange

Lori reported many positive trends in the labor market as new unemployment claims are at their lowest level and current claims are at their lowest level since 1970. The labor market is tight with an increase in people looking for new jobs. Our organization seems to have been sheltered from the “Big Quit”, which was seen in the overall market. The preliminary results of the employee survey (60% response rate) show extremely positive overall data. The results will be shared with the Board at the next meeting.

E. Chief Financial Officer Report

Katherine Pairish

See attached February financial reports. Katherine reported EPHC is doing very well.

F. Director of Clinics

Paul Bruning

Paul reported the clinics had their best month of revenue last month due to having two dentists, our profits almost doubled. We are starting a bi-annual review as well as a review of policies in preparation for an anticipated site visit. Our clinical supervisor resigned and Joanna will be moving into a quality initiative program to work full time on metrics. We need a clinic support manager to work with Christina Potter to oversee staffing and day to day tasks. Will be attending the American College of meeting next week. We will be starting urgent access appointments at the clinics, Monday through Thursday from 12-7pm. We need more access for the community and the primary care providers are having a hard time getting appointments for their own patients. We will begin in office dispensing of “to go” medications through a computerized formulary with the ability to add or remove. Spot audits on coding, billing and revenue cycle will begin to improve efficiencies. The front desk is short staffed, Joanna is helping, and a new employee will start this week. Our highest demand for specialty is Cardiology, which is triple booked. Our cardiologist is adding days while he is on vacation from his other place of employment.

G. Director of Rehab Services

Jim Burson

Jim reported he will be updating the Board quarterly. The Rehab department is three years old and now has 14 employees. We received a commendation from a patient for Heidi, our PTA, stating Heidi made a huge difference and she was glad she went to therapy. Average number of patients per day is up 15% from last year. New referrals are up 66%. We are collaborating with BigFish for advertising. Our speech therapist, Tyson, has seen patient growth of 33% from last year. We will be passing out a list of internal bio’s and services which we will send to Reno Orthopedics. Thanks to Paul Bruning for his support. We met with Tahoe Forest’s joint replacement navigation team to formalize pre-op protocol, which will align with growth goals. PA’s from Tahoe Forest will make rounds at the clinic enabling patients to receive comprehensive care here. Total revenue is up 240k (18%), the addition of 2 full time Physical Therapists is paying off. A meeting with the architects regarding the new Therapy & Wellness Center plans revisions went well. Thanks to Doug we will have a larger pool which will provide the ability for community classes as well as one on one patient care. The pool will fit 4-5 people for classes.

Director McGrath commented that there is an overwhelming difference with our physical therapists over others. Our therapists want patients to improve and make patients want to work to improve; we have a wonderful physical therapy department.

Director Whitfield asked if we will be adding a lymphedema specialist. Jim replied this would be something we can consider.

7. **Chief Executive Officer Report**

Doug McCoy

OPERATIONAL PLAN OVERVIEW

February operating performance YTD continues to remain positive to both budget and year-over-year performance. Revenues are up over last year for the same period by 22% and include positive variances for all in-patient and out-patient classifications. Supply and traveler expense continue to be the key expense variances due to the ongoing pandemic. The Board approved annual COLA increases were well received as were the adjustments to the nursing staff hiring scales. Aggressive recruitment continues in order to reduce the traveler expense and increase our overall census. Our marketing efforts to increase community access for EPHC services in March include: a campus visit by the Tahoe Forest Orthopedic team, introduction of our new community newsletter 'Health Lifestyles' scheduled for an April 1 release, a 66% increase in new outpatient rehabilitation volume, and the addition of two new providers in April. Recruitment of new non-EPHC patients will be an emphasis in our strategic initiatives for the 2022/23 fiscal year along with a growth of 15% in skilled nursing census.

March COVID rates have dropped dramatically both statewide and in our area. Our campus rate has decreased from 27% to 2% month over month. We have not had any positive resident cases and with the lack of staff cases, we have resumed activities and visitations based on CDPH guidelines. Staffing waivers for CNAs and training classes have been extended by the State until June 30th. Some in-person meetings will resume to include the upcoming CLS patient experience training scheduled for March 28th and 29th.

Our bi-annual lab CLIA recertification survey was completed on March 8th with some isolated findings that will be corrected through a written plan of correction. Our interim lab manager continues to update our policy and procedures to ensure full compliance with all regulatory requirements. We will be purchasing a new lab analyzer to increase our testing capabilities and result times through a California State grand opportunity. Installation of the new equipment is anticipated to be complete by the end of April. We received confirmation of the survey results from the February SNF visit. No deficiencies were identified. We anticipate our annual recertification survey to be conducted in the next 90 days. Life safety and environment of care rounds have been completed to reduce any potential regulatory issue. Ongoing mock reviews will continue to ensure we are well prepared for the survey.

The 2022/23 budget planning process has been initiated and will continue over the next 3 months. After two years of impact from the pandemic, our objectives will include targeted growth above the 22% from this year, the addition and expansion of services specifically in the RHCs, and normalizing expenses given the anticipated reduction of expenses due to COVID. After a lengthy delay in permit approvals for the new Loyaltan clinic, we are prepared to place the bid out for contractor review and initiate the construction process. Our target had been a July opening date but may be moved given the unforeseen delay in receipt of City approval on the project. The Loyaltan SNF window project was approved, and the contractor completed all measurements and ordering last month. We anticipate completion of this project in late April due to supply chain delays.

Customer Service Initiative:

On March 28th and 29th, we will hold an onsite leadership training with Custom Learning Systems. The sessions will include a leadership briefing on our establishment as the hospital of choice initiative, an orientation and launch for our Service Excellence Council members,

and a training launch of our Leadership Oasis teams. The three Oasis teams will be focused this year on repatriating patients back to EPHC, onboarding/ recruitment, and patient interaction initiatives. The scheduled April training will be for all Service Excellence Advisors and include development of our 'team bragging' video highlighting our 3-year strategic initiative.

Paul has done a great work with designs for the clinic. Jim has seen great growth with the Rehab department. The hospital is looking at many upgrades, we are excited for the next year and rolling out a newsletter (to be mailed April 1st). We are cautiously optimistic with lowered Covid numbers. Custom Learning Systems/ ITPE training will be next Monday and Tuesday, launching 13 front line service excellence advisors. The Board members are invited to attend the CLS training on March 28th from 8-12am. Thanks to Penny, Donna and Neil for their work preparing for the CLIA inspection. Thank you to the Board and Finance committee for approval of the COLA and nursing wage scales.

8. Policies

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

Roll Call Vote: AYES: Directors McGrath, Swanson, Whitfield, Satchwell and Corcoran
Nays: None

9. Committee Reports

Finance Committee: Director Corcoran cited discussion about housing and potential upcoming hospital retrofit.
Director Swanson stated there was discussion as to the different types of possible employee housing (modular or cottages), which would allow for privacy.

Director McGrath thought these ideas were excellent.

Doug McCoy commented that 2030 is still currently the deadline for a hospital retrofit. There is a CHA proposal to modify the current requirements or delay the deadline, more information will be available by the next Board meeting following an upcoming meeting in Sacramento.

Jim Burson commented that a child day care on campus would be very valuable. Director McGrath agreed this would be a critical component of taking care of our workers.

10. Public Comment

None.

11. Board Closing Remarks

Director Satchwell commented how impressed she is with the clinic and Therapy & Wellness Center services and how the directors are thinking outside the box. The new ideas and use of PR are very exciting.

Open Session recessed at 10:40 a.m.

12. Closed Session

A. Hearing (Health and Safety Code 32155)

Subject Matter: Staff Privileges

• Provisional 1 Year Appointments

- Abate, Martin DDS Dental
- Bertman, Jack MD Emergency
- Evans, Brian MD Tele Radiology
- Kraemer, Eric MD Tele Radiology

• Provisional 2 Year Appointments

- Fletcher, Sarah MD OB/ Gynecology
- Hibler, John DO Dermatology
- Hoffman, Daniel DDS Dental
- Potter, Christina NP Clinic
- Sapir, Leora NP Clinic

**B. Conference with Legal Counsel-Exposure to Litigation (Government Code Section 54956.9(d)(2):
2 Matters**

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

13. Open Session Report of Actions Taken in Closed Session

The Board returned at approximately 11:15 am.

ACTION: A motion was made by Director Swanson, seconded by Director Whitfield to approve all staff privileges.

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

Nays-None

Not present-None

ACTION: A litigation claim letter was approved.

14. Adjournment

Meeting adjourned at 11:20 a.m.