



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

Thursday, April 27, 2023 at 9:00 a.m.

1. Call to Order

Meeting was called to order at 9:01 a.m.

2. Roll Call

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

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

3. Board Comments

None.

4. Public Comment

None

5. Consent Calendar

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

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

- **Public Comment:** None

6. Auxiliary Report

Director McGrath reported that donations are pouring in, sales are up, and shelves are half empty because items are selling so quickly.

7. Staff Reports

- A. Infection Control/COVID-19 Michelle Romero
See April BOD report. Michelle clarified that bivalent vaccines are more effective, even for those that have had COVID-19, which is why the monovalent vaccines had been phased out.
- B. Chief Nursing Officer Report Penny Holland
See April BOD report. Penny also noted that Jennifer Vimbor was implementing new menus as of 5/1. EPHC would be participating in a table-top re: chemical burns in Quincy and a “pseudo-care flight” drunk driving exercise with the High School.
- C. Loyalton SNF Director of Nursing Tamara Santella
See April BOD report. Tamara reported for both Loyalton & Portola SNFs. At the time of the meeting the census was up to 58. Highest ever.
- D. Director of Clinics Tracy Studer
See April BOD report. In addition, discussed Anthem audit, the fast-tracking of the Loyalton Clinic license and Clinic opening, and ongoing planning with Ken Munsterman at Tahoe Forest about OB Care at EPHC.

- E. Program Manager Joanna Garneau
See April BOD report. Discussion with Directors Swanson and Satchwell re: Managed Medical, mental health, and USDA \$50,000 grant for transportation van. Director Satchwell and Katherine Pairish commended Joanna on grant money obtained and quality of presentation. There was no public comment on the USDA van grant.
- F. Chief Financial Officer Katherine Pairish
See April BOD report. Katherine added that \$1.8 million in IGTs had come in this week and that delayed Anthem payments would be coming in at the end of the fiscal year – both of which would contribute to a stronger cash position and a decrease in AR days.

8. Chief Executive Officer Report
OPERATIONAL OVERVIEW:

Doug McCoy

EPHC successfully implemented the Cerner EMR transition on April 3rd. We anticipated some challenges with a variety of modules and staff education but had both the Cerner and ProTechnical implementation teams on campus for the first two weeks following the go-live event. Although we continue to work through some challenges including the revenue cycle and billing modules, overall the process went fairly smoothly considering the significant operational impact across the campus. We will continue provider training sessions, daily/weekly department debriefing meetings, and begin reviewing the reporting capabilities for implementation into our committee meetings.

On April 20th we announced that EPHC had received a grant from the State of California for a staff retention program. Eligible organizations submitted applications at the end of 2022 to qualify for funding to recognize health care workers who provided exceptional service during the COVID pandemic. EPHC received \$293,000 for the grant which was given directly to staff through retention bonuses. Eligibility criteria for staff included that team members had to work at least 100 hours during a review period of July-October 2022 and remain employed through November 28th, 2022. We have been very excited to hand deliver checks to over 240 of our talented staff in recognition for their service to our community through these challenging times.

As anticipated, April operations have been impacted by the Cerner EMR transition as departments migrate data into the new system and focus on new workflows. However, our SNF census has continued to remain at a 3 year high of 57 ADC, and we have also maintained a strong inpatient/swing bed ADC. The clinics have seen the largest decrease in volume, but we anticipate a return to pre-implementation levels within 60 days. Traveler expense has been decreasing with the hiring of additional lab and RN staff, and the recent graduation and certification of CNA students in Loyalton. After earlier delays in the processing of IGT funds, we are beginning to recoup additional program funding over the past 3 weeks. We anticipate the largest IGT to be received before the end of the fiscal year which will increase of overall days cash on hand.

The EPHC Foundation will hold their first meeting on April 28th. We are excited to reignite the Foundation activities, and our new Board members bring a strong knowledge and enthusiasm to assist EPHC in our strategic initiatives.

We continue to work with our external consulting vendor on the licensing of the Loyalton clinic through CMS and CDPH. We have provided all of the application materials and I have been in contact with Congressman Kiley and the California Hospital Association for assistance in expediting this process. The entry doors for the clinic were replaced as part of the final preparation for opening last week, and we look forward to the grand opening celebration once we receive a timeline for licensing from CMS.

After a long delay due to supply chain issues, our 3D mammography system installation began on April 20th. We look forward to beginning services within the next two weeks. Our x-ray room replacement is also in the final stages of OSHPD approval and equipment has been acquired from the vendor to begin construction as soon as the final permit is issued.

CUSTOMER SERVICE INITIATIVE:

We continue to receive positive patient feedback during the second half of Q1. For 3/1-4/20 we have received the following experience survey results:

- 10 out of 10 rating for inpatient hospital services
- 94% recommendation rate for clinic services
- 70% recommendation rate for ED services
- 100% recommendation rate for hospital swing bed services
- 100% recommendation rate for outpatient therapy services
- 100% recommendation rate for lab services
- 100% recommendation rate for skilled nursing services

Our goal for the next 90 days will be to educate and register our patients across all lines of service into the new Cerner system to increase their access to personal health care information, automated appointment scheduling, and test results.

COMPLIANCE PROGRAM:

There were no compliance reviews initiated for the period of March 18th through April 20th.

Doug also thanked Director Swanson, Lorraine, and Tamara for the great SNF census. Discussion with Director Satchwell about advertising for new 3D Mammography. Will connect with Lauren Westmoreland and Jan Buck to do a piece in local news outlets about it.

9. Discussion and Possible Action

on Amendment Number One to Chief Executive Officer Employment Agreement.

- **ACTION:** Motion was made by Director Corcoran, seconded by Director Satchwell to approve Amendment Number One to Chief Executive Officer Employment Agreement.

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

- **Public Comment:** None

10. Discussion and Possible Action

on designation of labor negotiators for negotiations with Chief Executive Officer pursuant to Government Code Section 54957.6

- **ACTION:** Motion was made by Director Corcoran, seconded by Director Swanson to approve designation of labor negotiators for negotiations with Chief Executive Officer pursuant to Government Code Section 54957.6

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

- **Public Comment:** None

11. Policies

Public Comment: None.

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

Roll Call Vote: AYES: Directors McGrath, Corcoran, Hughes, Swanson, Satchwell.

Nays: None

12. Committee Reports

Board Members

I/D/A

A. Finance Committee

Director Swanson reported that Katherine reviewed the financials and they discussed extracting IGTs from reports to get a better sense of day-to-day operations. Financial picture is very good overall.

13. Public Comment

None.

14. Board Closing Remarks

Board Chair Corcoran thanked everyone.

Open Session recessed at 9:58 a.m.

15. Closed Session

A. Hearing (Health and Safety Code 32155)

Subject Matter: Staff Privileges

- Provisional 1 Year Appointments
 - Sutherland-Stolting, Amina MD Telepsych/ ED
- Active 2 Year Appointments
 - Daniels, Trevor PsyD Telepsych/ Clinic

B. Pursuant to Government Code Section 54957.6, Conference with Labor Negotiations, District designated negotiators: As designated in agenda item 11, above; Unrepresented employee: Chief Executive Officer.

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

16. Open Session Report of Actions Taken in Closed Session

The Board returned at approximately 11:20 am.

A: ACTION- All providers approved for privileges

B: No Action Taken.

C: No Action Taken.

17. Adjournment

Meeting adjourned at 10:45 a.m.