



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

Thursday, May 23, 2024 at 5:00 p.m.

1. Call to Order

Meeting was called to order at 5:00 p.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: Lorriane Noble, Director of Nursing Portola; Tamara Santella, Director of Nursing Loyaltan; Tracy Studer, Director of Clinics; Barbara Sokolov, Foundation Manager/Executive Assistant/Clerk of the Board; and Heather Willis, Credentialing Coordinator.

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 Swanson, Satchwell, Hughes, McGrath, Corcoran.
Nays: None

- **Public Comment:** None

6. Auxiliary Report

Gail McGrath

Gross sales for April \$14, 445. Net sales this year \$23, 758. Doing great, very busy!

7. Staff Reports

A. Chief Nursing Officer

Penny Holland

See May BOD report. Penny was absent, Donna Dorsey tried reporting remotely but a bad connection made that unsuccessful.

B. SNF Directors of Nursing

Tamara Santella

See May BOD report. Tamara also reported that the guard rails had been corrected, the flooring replacement was starting, and that the EPHC's Skilled Nursing Facilities had received a 5 Star Facility Rating from CMS!! Congratulations all around.

C. Director of Clinics

Tracy Studer

See May BOD report. Tracy congratulated Lorraine and Tamara. In addition, Tracy shared that she was seeking a second dermatologist to meet need. Nurse Practitioners could be used for follow up care. Director Satchwell suggested contacting PDH. Tracy will reach out.

D. Chief Financial Officer

Katherine Parish

Summary

This report will cover the ten months ended April 30, 2024, compared to the ten months ended April 30, 2023.

Regular Meeting of the Board of Directors of Eastern Plumas Health Care
May 23, 2024 MINUTES - Continued

Net Patient Revenues were higher than last year \$3,160,500. Total Operating Revenue was higher than last year by \$2,598,928. Total Operating Expenses were higher than last year by \$394,031. Our bottom line improved over last year by \$155,160. Last year included \$2,665,773 in recognition of final Cares Act monies.

Revenues (Year-to-Date Current Year Compared to Year-to-Date Prior Year)

Total Inpatient Revenues were higher by \$1,254,132, with Skilled Nursing Revenues posting higher by \$1,419,268. Pro Fees were higher by \$105,463. Total Outpatient Revenues were higher by \$ 1,854,530 and Clinic Revenues were higher by \$60,691.

Expenses (Year-to-Date Current Year Compared to Year-to-Date Prior Year)

Salaries and Benefits: Combined Salaries and Benefits were higher by \$195,007.

Purchased Services: Purchased Services were lower by \$446,388.

Professional Fees: Professional Fees were higher by \$215,330.

Repairs & Maintenance: Repairs & Maintenance were higher by \$855.

Utilities: Utilities were higher by \$201,595.

Supplies: Supplies were lower by \$13,732.

Depreciation Expense: Depreciation Expense was higher by \$113,093.

Other Expenses: Other Expenses were higher by \$123,697. These include training, travel, and dues and subscriptions.

Revenue Cycle

Gross Accounts Receivable as of April 30, 2024 was \$13 million. This is a 29% increase over last year.

Balance Sheet

Total Cash decreased 21.30%. Net AR increased 22.91% and Net Fixed Assets increased 6.36%. Total Liabilities decreased 36.62%. Our Fund Balance increased by \$2,335,215 or 10.15%.

Additional Information

Days cash on hand on April 30, 2024, was 116. April 30, 2023, days cash on hand was 166. We have spent \$1,988,854 on capital equipment so far this year. We have funded \$3,632,466 in IGT's. Katherine also shared that there had been a 37% reduction in AR as of today, \$12 million. IGTs expected to come in at \$6 million.

8. Chief Executive Officer Report

Doug McCoy

Doug was not present so Director Swanson read Doug's report. Jim Burson thanked the Board of Directors, welcomed Max Barroso as the new Director of Rehabilitation, and expressed his confidence in him.

OPERATIONAL OVERVIEW:

After 30 years of excellent service, Jim Burson announced his retirement as our Rehabilitation Services Director effective June 29th. Jim has been an exceptional leader, and through his vision we have a 5-star rehabilitation team. Max Barroso has been promoted to the position and will be working with Jim through June for a seamless transition. Max will be a great addition to our team!

The EPHC Foundation Board hosted an appreciation luncheon for the volunteers from the EPHC Auxiliary on May 13th. We are very appreciative to both groups for their dedication and service to our organization and the community. Their support continues to help EPHC in our mission to deliver the highest quality care to our patients!

2024 STRATEGIC OBJECTIVES – UPDATE (Through April 30th)

For the 2024 calendar year we have several strategic objectives to improve operations and our care delivery to the community. These will be monitored monthly with progress reports provided to the Board.

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May 23, 2024 MINUTES - Continued

- Reduce annualized turnover by 7% with emphasis on the reduction of turnover within the first 12 months of employment.
 - Through April we had 22 new hires and 24 terminations. This represents a 23.6% turnover percentage which decreased by 2% over the prior month. Terminations within 6 months trended lower through April and remains a focus for the organization. We have over 25 staff registered for the leadership/team building training scheduled for mid-June and look forward to the positive impact to our initiative. We are looking forward to our 2nd annual EPHC summer picnic at Lost Marbles Ranch in mid-June.
- Exceed the net income budget for the 2023/24 fiscal year and achieve positive net income performance.
 - Through April our net income performance is exceeding budget by \$450,000 and is \$155,000 over the same period last year. 3.26m in IGTs have been received through mid-May and we anticipate the remaining funds to be received before the end of the fiscal year. We continue to be on target to meet our financial objective for this year.
- Increase days cash on hand to the June 2023 performance level (200) by July 1, 2024.
 - April days cash on hand is 116. With the IGT receipts for May, we will see a significant increase in days cash for May. We continue to trend and expect to reach our 200-day goal by the end of the fiscal year.
- Secure grant funding for CalAim program expansion to include additional office/client meeting areas.
 - The path-cited grant application was submitted in February for funding to create CalAim office space on the second floor of the Nifty Thrifty building owned by the EPHC Foundation. We continue to wait for a response which is expected in the summer. Additional USDA equipment grants are being completed for an EMS storage facility and security hardening equipment. There are no additional updates for April.
- Add additional provider/community services to the Loyalton Clinic campus. Explore grant opportunities for dental services.
 - We had a very successful grand opening celebration and ribbon cutting event at LMC on May 15th. Attendees included three City Council representatives, a representative from the Sierra County Board of Supervisors, as well as a representative from Senator Dahle's office. It appears more likely that potential approval and funding for the dental grant submitted in April may be delayed until next year due to the budget deficit.
- Increase patient experience survey responses over 2023 totals and meet 4-5 star national certification standards.
 - 372 total surveys were received through April across all lines of service. This trend increases our annualized responses from 1,040 to 1,116 surveys on an annualized basis and would exceed our 2023 total of 953. Our emergency department and clinics continued to exceed 3 of 4 national benchmarks, with our SNF and radiology departments exceeding all national averages. We will be adding some additional representatives to our Service Excellence Council in June.
- Complete key projects – X-ray room replacement, Loyalton flooring project, EMS use of current Loyalton Clinic, MindRay installation, badge reader/security system, SNF basement project.
 - Two of the six projects have now been completed with the badge reader security system installation completed on May 13th. The Loyalton SNF handrails are fully installed, and we are getting closer to initiating the flooring replacement project. We are waiting for a secondary contractor bid for the x-ray room replacement in order to begin that project. Based on feedback from the Portola SNF family council, we are developing a plan to utilize the SNF basement area for family access and develop external areas for residents to enjoy with families. Based on patient/family feedback, we are reviewing options to increase lighting in the main parking lot and will be replacing the exterior hospital entry doors to provide easier access to the campus.
- Completion of all NPC/SPC seismic reporting requirements for 2024 and receipt of grant funding to offset costs through the SRHRP grant program.
 - SB 1432 which would delay the seismic standards is currently in discussion during this legislative session and supported by the California Hospital Association. We are monitoring this development closely before proceeding with the next phase of our seismic plan.

COMPLIANCE PROGRAM:

There was one external compliance concern raised in April which was resolved without any compliance findings.

9. Policies

Public Comment: None.

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

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

10. Committee Reports

Board Members

A. Finance Committee

Finance Committee Chair Swanson reported that we were on track to meet goal of rebuilding to 200 days cash on hand and noted that Katherine's presentation had reinforced the importance of IGTs.

11. Public Comment

None.

12. Board Closing Remarks

Director Corcoran, speaking as a representative of Sierra County, thanked EPHC for the new Loyalton Clinic – a huge and important benefit to the community! Director McGrath added that it was years in the making and that Loyalton had been very patient. Director Satchwell thanked Tracy for her positive impact on the Clinics. Tracy remarked that she had been a CNA in Loyalton in high school so opening the Loyalton Clinic is like coming full circle for her!

The Board also thanked Lorraine and her staff for including them in the Portola SNF's uplifting Employee Enrichment – chai tea, cookies, and a special "thank you for making a difference".

Directors Satchwell and Swanson thanked Jim Burson for his positive impact and expressed that he will be missed. They extended a warm welcome to Max Barroso.

Open Session recessed at 5:40 p.m.

13. Closed Session

A. Pursuant Hearing (Health and Safety Code 32155)

Subject Matter: Staff Privileges

Clinic

- Bugna, Eric M.D. 2 Year appointment
- Colpitts, Catherine D. O. 2 Year appointment
- Jaquez, Robin N.P. 2 Year appointment
- Morrison, Mary N.P. 2 Year appointment

Tele Radiology

- Drake Jr., Macarthur M.D. 2 Year appointment
- Moser, Michael M.D. 2 Year appointment
- Hur, Jane M.D. 1 year appointment
- Lotan, Roi M.D. 1 year appointment

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

14. Open Session Report of Actions Taken in Closed Session

The Board returned at approximately 6:10 p.m.

A: ACTION- The Board unanimously approved a motion to provide staff privileges to Bugna, Colpitts, Morrison, Drake, Moser, Hur, and Lotan.

B: No Action taken

15. Adjournment

Meeting adjourned at 6:15 p.m.