



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

Thursday, August 25, 2022 at 9:30 a.m.

1. Call to Order

Meeting was called to order at 9:30 a.m.

2. Roll Call

Gail McGrath, Board Chair; Teresa Whitfield, Board Member; Linda Satchwell, Board Member; and Paul Swanson, Board Member.

Not present: Augustine Corcoran, Vice Chair

Staff in attendance: Doug McCoy, CEO; Katherine Pairish, CFO; Penny Holland, CNO; Paul Bruning, Director of Clinics; Michelle Romero, Infection Prevention; Lorraine Noble, DON; and Susan Horstmeyer, Clerk of the Board.

3. Board Comments

Director McGrath stated she would have some public comments to read during the Public Comment section at the end of the meeting.

4. Public Comment

None

5. Consent Calendar

- **ACTION:** Motion was made by Director Swanson, seconded by Director Whitfield to approve the consent calendar.
AYES: Directors McGrath, Swanson, Whitfield, and Satchwell
Nays: None
Not present: Director Corcoran

- **Public Comment:** None

6. Auxiliary Report

Director McGrath reported things are going well, Nifty Thrifty has received many donations.

7. Staff Reports

A. Infection Control/ COVID-19

Michelle Romero

Michelle reported we are finally seeing less Covid in the community and among staff. We had one positive case in the SNF last month. The Omicron vaccine and high dose flu vaccine will be available at the Clinic by the end of September. Residents are testing twice a week if a staff member tests positive. Our newly admitted residents are tested again after 3 days.

B. Chief Nursing Officer Report

Penny Holland

Penny reported Mammography will start up again on Monday, we have roughly 200 patients signed up. The lab is more stable, we now have three full time phlebotomists. We have one traveler in nursing and 2 applicants for the open position.

C. SNF Director of Nursing

Lorraine Noble

Lorraine reported the census is 50 with 25 residents in each facility. We have two admits this week and another in Loyalton next week. One resident in Portola was positive for Covid last month. We will have another CNA class starting in three weeks. Six of the CNA's from the last class have been hired, five full-time. Our MDS coordinator left for PDH but Melanie Bates will be filling the position in a few weeks. We currently have two traveler LVN's and two traveler CNA's.

D. Chief Financial Officer Report

Katherine Pairish

See attached July financial reports. Director Satchwell asked if we will be receiving IGT's later. Katherine replied we will receive them later and they will be less. Director Whitfield asked if we have a plan or special offer related to the restart of Mammography. Doug replied we are waiting for the final certification of the 3D system, which was delayed due to a supply shortage. We anticipate starting 2D Mammography at the beginning of September.

E. Director of Clinics

Paul Bruning

Paul reported July came up a little short of our projections. The urgent clinic saw eight patients last Saturday and so far six are scheduled for this Saturday. We are seeing a large social media presence. The demo is almost complete for the Loyalton clinic remodel with construction slated to begin mid September. Our opening is projected for the 1st quarter of 2023. Working on updating our HPSA status. We have four new staff, two in clinical and two clericals. We are working on the Cerner implementation. Director Satchwell asked what HPSA is? Paul responded it is the Healthcare Provider Shortage Area, which works in conjunction with Wipfli, and allows us to accomplish loan and scholarship forgiveness.

8. Chief Executive Officer Report

Doug McCoy

OPERATIONAL PLAN OVERVIEW:

The Cerner EMR transition launch and trainings have been the primary operational focus area for the past six weeks. The leadership alignment and department management in services were completed and we are now conducting daily role specific education. A Cerner steering committee was formed at the beginning of August and continues to meet weekly to provide governance over various implementation decisions. The provider workflows and data migration are the current priority items under committee review. We have confirmed that all history demographic information from Centriq will be integrated into Cerner, however patient specific information (i.e. immunizations, social history, etc.) will require a manual entry. Workflow process options for gathering and uploading this information have been developed and are in review, and we anticipate an approved solution within the next few weeks. We do anticipate some impact to clinic revenues for the first quarter of 2023 as initial post-conversion patient visits will likely require more time for the provider and medical assistant staff. However, our research with other post-conversion hospitals has shown an offset through improved revenue cycle and chargemaster utilization.

To maximize the communication of our implementation progress and benefits to both employee workflows and patient experience, we have created a campus-based media campaign which will be initiated before the end of August. From the training modules we are expecting a significant improvement to workflows, data reporting, and patient access to medical information.

Two new providers were added to the clinics and we are planning to extend the urgent access days of operation in August. We also have another Emergency Department physician joining us this month.

EPHC has had a very successful month in hiring new team members in August. Through 8/19 we have hired nine new staff with another nine currently in the onboarding process. We also started our summer CNA class in Loyalton with 6 new students enrolled. The lab has hired three new phlebotomists which eliminated the traveler staffing expense for that position going forward. There were only three staff separations for the month for an annualized turnover of 13% which is significantly lower than the State or national average.

Construction has begun on the Loyalton clinic project with both interior and exterior concrete removal. We have been advised that there are supply chain delays for the contractor with electrical equipment and the generator which may cause a delay in opening until after the first of the year.

Our current mammogram unit is receiving a final inspection this week and we anticipate reinitiating mammography services on August 22nd. Our 3D replacement system is being built by the vendor and we expect delivery in November due to the national microchip shortage. The UPS battery backup system for our CT scanner has been received and will be installed the week of 8/23. This will prevent any equipment damage or excessive down time should we have ongoing fluctuations in power.

Our fire prevention tree removal project was completed this month, and staff have been offered access to the firewood.

CUSTOMER SERVICE INITIATIVE:

With COVID cases continuing in the community, we have decided to complete the service excellence workshops for all staff virtually. While this is not optimal, we do not want to delay this further and also conflict with the Cerner training for staff. The workshops will be changed to two 1-hour sessions versus the original 2.5 hour in-person training to accommodate employee schedules, etc. Our Oasis team has completed their phone response project and will be training managers on the new program August 23rd. We have also revised our phone system to improve efficiencies for patients contacting the campus.

COMPLIANCE PROGRAM:

There were no compliance reviews initiated for the period July 20th-August 20th

There are two significant legislative issues coming up at the end of this month. There is a proposal between the hospital association and the labor unions to adjust the minimum wage for health care systems based on a geographic tiered system. Metropolitan areas would increase to \$25 per hour while rural areas would adjust to \$19 per hour in 2023 and \$20 per hour in 2024. Annual adjustments to the minimum wage rate would be based on the inflationary rate or 3.5%, whichever is lower. Concerns have been raised by the hospital association that MediCal funding has not been increased in the past 10 years and the current Medicare annual adjustment is 2.3-2.7% which would not be enough to offset the increase in labor expenses. The proposal would also include adjustments to the seismic requirements to include an extension for completion from 2030 to 2037. Additional proposed language would provide an annual waiver process for rural facilities based on financial hardship. A grant is available to assist rural facilities to cover the assessment costs for meeting the SPC4D requirements which EPHC plans to apply for.

A meeting with Congressman LaMalfa's office took place last week and we will be attending a meeting with Assemblywoman Dahle tomorrow. Director Satchwell stated the seismic waiver is a positive for us. Doug replied that challenges for rural hospitals have been recognized.

9. Policies

Public Comment: None

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

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

Nays: None

Absent: Director Corcoran

10. Committee Reports

A. Finance Committee: Director Swanson reported we are staying in the black and will keep our belt tight.

B. Medical Executive Committee (MEC): Doug McCoy stated the committee revised the Temporary Privilege section of the By-Laws, which was approved by the committee. Director Swanson stated the verbiage was antiquated and needed to be updated.

Motion: Director Swanson made a motion to approve the revisions to the Temporary Privilege section of the Med Staff By-Lays, which was seconded by Director McGrath.

Public Comment: None

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

Nays: None

Absent: Director Corcoran

11. Public Comment

Director McGrath stated she received three letters regarding the removal of a provider at the Graeagle Medical Clinic. Director McGrath read portions of the letters which stated support for the services provided by the provider and requested a reconsideration for the decision by EPHC. The letters also included concerns regarding impact to the patients in having to be moved to a different provider.

The provider, who did not state her name but was recognized by EPHC employees, shared comments as a member of the public regarding the dismissal. She stated her concerns with the decision and felt the decision by EPHC was not made appropriately. She requested that the Board review the situation.

A member of the public commented that she was upset with the decision and angry that she would have to find another provider, she may look outside the county for medical services. She stated she was very dissatisfied with provider changes which have also occurred in the past at that location.

12. Board Closing Remarks

Director McGrath stated the Board has heard the public's comments and will have a discussion.

Open Session recessed at 10:23 a.m.

13. Closed Session

A. Hearing (Health and Safety Code 32155)

Subject Matter: Staff Privileges

Regular Meeting of the Board of Directors of Eastern Plumas Health Care
August 25, 2022 MINUTES - Continued

- Active 2 Year Appointments
 - Punzalan, Raymundo MD
 - Hethumuni, Gamini MD
 - Sherman, Judith MD

Tele Endocrinology
Tele Endocrinology
Tele Psychiatry

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

14. Open Session Report of Actions Taken in Closed Session

The Board returned at approximately 11:39 am.

A. ACTION: Staff privileges were approved by a vote of four Ayes.

B. ACTION: None

15. Adjournment

Meeting adjourned at 11:40 a.m.

DRAFT