



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

Thursday, September 22, 2022 at 9:30 a.m.

1. Call to Order

Meeting was called to order at 9:32 a.m.

2. Roll Call

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

Staff in attendance: Doug McCoy, CEO; Jim Burson, Rehab Director; Paul Bruning, Director of Clinics; Michelle Romero, Infection Prevention; Lorraine Noble, DON; and Susan Horstmeyer, Clerk of the Board.

3. Board Comments

None.

4. Public Comment

None

5. Consent Calendar

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

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

Nays: None

- **Public Comment:** None

6. Auxiliary Report

Director McGrath reported the thrift store has been very busy, there has been some great donations. The volunteers are doing a great job.

7. Staff Reports

A. Infection Control/ COVID-19

Michelle Romero

Michelle reported Covid is still present in the community, but cases are slowing down. The clinic is offering the Pfizer bi-valent vaccine, 50 were given in Graeagle last week. The regular and high dose Flu vaccine is now available at the clinics. We will be holding drive through Flu vaccination clinics at the Portola campus on October 7th and in Graeagle on October 4th, from 11am to 1pm. The Moderna bi-valent Covid vaccine will be available starting next week.

B. Chief Nursing Officer Report

Penny Holland

Penny was not present due to Cerner training. Doug reported on her behalf stating the Acute and ED are stable, three new RN's have been hired. Mammography started back up last week, and 3D mammography will be available in January or February of next year. We received the quote for a new central monitoring system.

C. SNF Director of Nursing

Lorraine Noble

Lorraine reported the census is 52, we have 27 in Loyaltown and 25 in Portola, with four admits coming soon. The most recent CNA class has produced six students who are orienting this

week and will be on their own next week. We want to start another class soon but need people who will stay on as employees. We have one open full-time day shift RN position, one full-time night shift position and an open per diem position. We have not had any residents test positive for Covid; we will be testing again next week due to one positive staff member. There have been many visitors at both facilities, and we continue to screen and complete antigen testing, which is time consuming. Doug noted the usual retention of CNA students is 15%, we are at 87%, great job by staff.

D. Rehab Director Report

Jim Burson

Jim reported that the outpatient pediatric occupational therapy clinic will open in the Loyalton skilled nursing building. The space is 500 sq ft, currently used for storage, has it's own entrance and is isolated from the rest of the building. We have had great response from the public regarding offering pediatric speech therapy and hope to begin offering this by the end of the year. Outpatient same day cancelations and no-show tracking has been added as a quality indicator. Reducing these numbers is a department goal and we are hopeful that the implementation of Cerner will be helpful in this area. Aspen Street Architects has moved the projected date for completed construction documents on the new Wellness Center to next month. We are still hoping to break ground next spring with an estimated build out of 12-24 months. August patient census reached a new high of 148 department wide. The T&WC had it's second highest daily patient treatment average since our opening in March 2020. Our same day cancellations/ no show daily average was 1/2, the lowest since we began operations. We are developing a rack card which will be placed in clinic lobbies and given to patients checking out of the medical clinics who have been prescribed therapy. The card briefly explains the benefits of therapy and will feature our clinicians. We continue our search for a Speech Language Pathologist and have offered a referral bonus to staff as well as a sign-on bonus. Completed an interview with Lauren from Plumas News last week. We had a nice conversation and the current and future offerings of the Rehab Services Department.

E. Chief Financial Officer Report

Katherine Pairish

See attached August financial reports. Katherine was not present, Doug reported on her behalf.

F. Director of Clinics

Paul Bruning

Paul reported that August exceeded our 5% goal by over \$80k. We received the final approval in Loyalton for the HPSA program and are in the preliminary stage for Portola and Greaeagle clinics. Construction on the Loyalton Clinic is a little behind due to a plumbing issue, which has created more work, in addition to supply chain issues. We hope to open the new clinic mid first quarter of next year. We are in conversation with Tahoe Forest Hospital regarding their obstetricians continuing to see patients at EPHC. The providers no longer want to travel to Portola as they don't see the value due to the volume of patients, we are exploring alternatives. The Service Excellence Workshops start next week and will continue into November. Urgent Access is doing very well, we have seen an average of 10 patients per day. We treated 22 patients on Monday at Urgent Access and often treat 16 per day.

Director Whitfield asked why HPSA is per clinic. Paul responded they are to be listed per location.

Director Satchwell expressed her concern regarding the impact on the community if we lose the Tahoe Forest Obstetricians at our clinics and asked how many patients see these providers per month. She noted there are three at PDH and asked if we would be able to create an agreement with them. Paul responded that we usually have 8-10 patients per month and are still in discussions with Tahoe Forest to try and maintain services, possibly by using Telemed.

Director Whitefield commented that these services are not just pregnancy related and other physicians can refer for other services.

8. Chief Executive Officer Report

Doug McCoy

OPERATIONAL PLAN OVERVIEW:

The Cerner EMR implementation project is continuing with train the trainer workshops scheduled for the week of September 19th. Due to challenges with labor resources for the Cerner Implementation team, the SNF module will not be part of the go-live process on January 9th. We anticipate implementation of the SNF EMR to occur in late Q2 or early Q3 of 2023. The current EMR platform for the SNFs will remain fully operational and is not impacted by the sunseting of our current Centriq program used by the hospital and clinics so we do not anticipate any impact to business operations during that time.

Construction continues on the new Loyalton clinic with concrete removal and plumbing completed in September. We continue to monitor potential supply chain delays with electrical and generator equipment, but still anticipate an opening in Q1 2023. The hospital renovation plan is also moving forward with wall treatment and handrail installation being completed in advance of the delivery of the flooring material. The ER and Lab areas are in the process this month followed by the inpatient areas in the beginning in October. The x-ray room replacement, 3D mammogram system, central monitoring system, IT bathroom project, and hospital badge reader installation projects are all in process as scheduled.

The urgent access clinic days/ hours were expanded in mid-August to include the addition of Saturday hours. We have received a positive response from the community and strong utilization of the program in the first few weeks of operation. We will be having a leadership change in the clinics with Paul Bruning leaving EPHC to take an advanced position with another organization. We have a transition plan in place and expect minimal impact to workflows during the period. I would like to thank Paul for the work he has done to expand and improve our clinic services including the addition of the urgent access program. Paul's last day with EPHC will be October 21st.

The Legislature completed their session without an agreement being reached between the Hospital Association and the labor unions regarding modifications to the seismic standards and health care minimum wage proposal. We had hoped to see changes in the requirement impacting rural facilities, but as of now the standards remain unchanged to include the 2030 compliance date. We do anticipate a ballot measure to be added in 2023 regarding the minimum wage for hospitals and hospital-based services (i.e. SNFs, clinics, etc.) but it will likely be a statewide proposal and not include modifications for rural areas. We will continue to work with the hospital council and association on proposals based on the specific needs of critical access hospitals and rural providers in advance of the next legislative session.

CUSTOMER SERVICE INITIATIVE:

We have been able to modify our in-person training option for the Service Excellence Advisors based on COVID guidelines so we will be able to avoid conducting the workshops in a virtual format. This will be much more effective and the trainings are expected to begin in October. Our Oasis management team has completed their project for customer service interaction and provided training to the management staff on 9/16. The program training will now be provided to all current and new staff beginning in October. The other two Oasis team projects on retention/ recruitment and community communication will be completed before the end of the

year. We will have the CLS implementation specialist on campus 9/30 to do the next phase of staff training for the October workshop sessions.

COMPLIANCE PROGRAM:

There were no compliance reviews initiated for the period for the period August 21st-September 16th.

Our HR department has had a very positive Q1 with 33 new hires: 4 in July, 14 in August and 14 in September. Our turnover rate is also improving with 4.5% in July, 2.6% in August and 1.1% in September.

9. Policies

Public Comment: None

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

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

10. Committee Reports

A. Finance Committee: Director Swanson reported there was lengthy discussion regarding the upcoming seismic retrofit and minimum wage increase for healthcare.

B. Medical Executive Committee (MEC): Director Swanson stated the MEC committee has approved the proposed changes to the By-Laws regarding the elections of a Chief of Staff and Vice Chief. The process would change to nominations and ballot via email. Director Swanson requested the Board's approval of these changes.

Motion: Director Whitfield made a motion to approve the changes to the Med Staff By-Lays, which was seconded by Director Swanson.

Public Comment: None

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

11. Public Comment

None.

12. Board Closing Remarks

Director McGrath stated it has been a very busy time around here and is amazed at how our CEO is keeping up.

Director Satchwell noted her appreciation for Jim Burson's report and how exciting it is to hear about the growth in the Rehab department.

Director Whitfield stated she would like to be fully present at the meetings and would find it helpful to have written reports from staff included in the Board packet. Doug responded that we would start including the staff reports in the next meeting's packet.

Open Session recessed at 10:20 a.m.

13. Closed Session

- A. 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 10:45 am.

No Action taken

15. Adjournment

Meeting adjourned at 10:45 a.m.

DRAFT