



**EASTERN PLUMAS HEALTH CARE DISTRICT
REGULAR MEETING OF THE BOARD OF DIRECTORS
MINUTES
Thursday, March 23, 2023 at 9:00 a.m.**

1. Call to Order

Meeting was called to order at 9:00 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; Jim Burson, Director of Rehabilitation; Lorraine Noble, Director of Nursing Portola; Tamara Santella, Director of Nursing Loyalton; Stan Peiler, Director of Engineering; Donna Dorsey, ER Manager; DeeDee Clark, Safety Officer; 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 on the January - February 2023 Auxiliary Financials. For January, gross sales were \$10,685.02 and net profits were \$2,212.06. For February, gross sales were \$10,544.56 and net profits were \$6,373.70. Total net income for this year is \$8,586. There is \$120,780.12 in the Auxiliary's bank account. Gail added that business is good and that while donations have been slow, shoppers are active.

7. Staff Reports

- A. Infection Control/COVID-19 Michelle Romero
See attached report.
- B. Chief Nursing Officer Report Penny Holland
See attached report. Penny also noted that the CT machine should be back in service soon.
- C. Loyalton SNF Director of Nursing Tamara Santella
See attached report. Tamara reported for both Loyalton & Portola SNFs. At the time of the meeting the census was up to 57 and travelers were down to 4. Tamara also reported that the CNA class graduated the day prior, 3/22/23. Doug acknowledged Tamara & Lorraine for the great census and the 4-Star status on Nursing Home Compare. Director Satchwell added her congratulations as did the rest of the Board of Directors.

- D. Director of Clinics Tracy Studer
See attached report. In addition, discussed delays in the opening of the Loyalton Clinic due to change in census designation.
- E. Director of Rehabilitation Jim Burson
See attached report. Director McGrath added that voice therapy can aid in strengthening the muscles needed for swallowing and Jim noted that Speech Pathologists assess patients for cognitive problems as well. He also announced that his department was hiring for a full-time Physical Therapist.
- F. Chief Financial Officer Katherine Pairish
See attached report. Katherine added that the issue with the payer would be resolved in a matter of time and that the cash on hand situation was still much better than it was five years ago. She also noted that IGTs were delayed but should be coming in soon.

8. **Chief Executive Officer Report**
OPERATIONAL OVERVIEW:

Doug McCoy

The campus is in final preparation for the Cerner EMR transition on April 3rd. User training has continued throughout the end of February and first three weeks of March with positive results. As of March 15th the new system has been accessible to begin the data migration for clinic scheduling and patient information which is a manual process. More emphasis is being placed on the billing and claims testing as that process was delayed due to changes in Cerner personnel. Ongoing work will continue in the weeks following the go-live event to ensure that all systems are functioning correctly. There will be a team from Cerner onsite during the first two weeks of April to work directly with end users and address any issues immediately. This has been a long process for all of the EPHC team members, but their ongoing commitment to a successful launch provides a high level of confidence heading into the last three weeks of implementation.

With construction completed for the new Loyalton clinic, we are working with our external consulting firm for both state and federal licensure. Based on the reclassification of Loyalton as a non-rural area by CMS, we must have a reversal of that designation completed prior to the processing of our licensure application. Although Loyalton is clearly a rural area, this CMS change in classification status will mean a delay in application processing and opening of the clinic. We are using all options at our disposal to expedite our application, but this issue could take several months to resolve with CMS. Until we have more specific information from our application submission, we will be postponing the grand opening event. We will continue to update the Board with status information received from our consulting team.

Overall census in both the hospital and SNFs has continued to remain higher than our Q4 2022 trends. With a graduating class of new CNAs we anticipate further census increases to occur in Loyalton, while as of 3/17 the Portola SNF is at 100% occupancy. We continue our efforts to minimize the impact to clinic volume post go-live with Cerner on April 3rd. We anticipated some decrease in volume due to longer patient appointments as data was transferred and updated from the Centriq system to Cerner. However, we are making every effort to implement and manage workflows so that we can maintain as much consistency in daily visit volume as possible.

The EPHC foundation board recruitment process has been successful with all five board positions secured. We have an excellent group of individuals representing the community and bringing expertise including legal, fundraising, health care, and technology. The Board will be very influential in assisting EPHC with our strategic initiatives for program and organizational growth.

CUSTOMER SERVICE INITIATIVE:

We continue to receive positive patient feedback during the second half of Q1. For 2/6-3/19 we have received the following experience survey results:

- 100% recommendation rate for clinic services
- 84% recommendation rate for ED services
- 100% recommendation rate for hospital swing bed services
- 100% recommendation rate for outpatient therapy services
- 95% recommendation rate for lab services
- 100% recommendation rate for skilled nursing services

We will be having an in-person management training with CLS on March 30th focused on department project/system improvement planning. Patient feedback data for specific workflow areas will be reviewed to determine specific focus areas for a project improvement plan in each service area. Although we are pleased with the overall recommendation rates received in Q1, we want to ensure that individual feedback questions such as wait times, communication, discharge planning, etc.

COMPLIANCE PROGRAM:

There were no compliance reviews initiated for the period of February 18th through March 17th.

Doug added that there had been unexpected implementation challenges with Cerner but that a large team would be on site post 4/3 to assist with and support transition. There would be 25 meetings per week at minimum.

Doug also noted that Cerner would increase patient access to information and services. He shared that Barbara had been successful in recruiting 6 members to the EPHC Foundation Board and that they would be meeting at the end of April. He thanked Directors McGrath and Satchwell for sending him information about Congressman Kevin Kiley's call for appropriations request. Doug had requested \$5 million for the Loyalton water system and this proposal is one that Kiley will take to appropriations for possible funding. USDA grants are also in play.

Doug encouraged everyone to keep their spirits up and stay positive as we approach Cerner go-live on 4/3. Board Chair Corcoran expressed that this was such a positive moment, even with challenges all is moving forward. Director Swanson concurred. Director Satchwell commended Doug for the possible appropriations for the Loyalton water system. Doug said that the next step was to use leverage to push Loyalton Clinic licensure forward.

9. Policies

Public Comment: None.

Director Hughes remarked that the policies looked good and were also educational for her. Director McGrath concurred and asked about where conscious sedation was used. Donna replied that it was used in a variety of areas including colonoscopies, dislocated joints, fractures, and cardioversion.

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

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

Nays: None

10. Committee Reports

Board Members

I/D/A

A. Finance Committee

Director Swanson reported that much of what was discussed in the Finance Committee was also discussed here. He noted that the timing of IGTs impacts ups and downs and decreased revenue regarding Clinic volume remains an uncertain factor in the coming months.

11. Public Comment

None.

12. Board Closing Remarks

Board Chair Corcoran thanked everyone. Director Satchwell commended Barbara for her work on the Foundation.

Open Session recessed at 9:56 a.m.

13. Closed Session

A. Hearing (Health and Safety Code 32155)

Subject Matter: Staff Privileges

• Active 2 Year Appointments

- | | |
|---------------------|----------------------|
| ○ Abate, Martin DDS | Dental |
| ○ Hunt, Ben MD | Surgery/ Clinic |
| ○ Bertman, Jack MD | Emergency Department |
| ○ Kraemer, Eric MD | Radiology/ Telemed |

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 10:40 am.

A: ACTION- All providers approved for privileges

B: No Action taken

15. Adjournment

Meeting adjourned at 10:45 a.m.