**1. Call to Order**

Meeting was called to order at 9:28 a.m.

**2. Roll Call**

Board: Gail McGrath, Board Chair; Paul Swanson, M.D., Vice Chair; Nichole Johnson, Board Member; Teresa Whitfield, Board Member; Harvey West, Board Member

Staff in attendance: Doug McCoy, CEO; Eric Bugna, Chief of Staff; Lori Tange, Human Resources Director; Rhonda Grandi, Director of Clinics; Katherine Pairish, CFO; Donna Dorsey, ER Manager; Penny Holland, CNO; Jessica Folchi, Executive Assistant

**3. Board Comments**

No Board comment was received.

1. **Public Comment**

Chairman McGrath asked that the public keep their comment to 3 minutes to allow everyone a chance to speak.

Josh Hart and Carol Merro of Plumas Wired each presented against the purposed Verizon Cell Tower to be build in the City of Portola near the EPHC campus.

1. **Consent Calendar**

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

itemson the consent calendar.

AYES: Directors West, McGrath, and Johnson

Abstention: None

NAYS: None

1. **Auxiliary Report**

Chair McGrath reported that the Nifty Thrifty is currently open. August net income was approximately $10,000 and September month to date is about $5,000.

1. **Staff Reports**

 Staff reported on COVID-19 response, the affects of wildfires in the area, and actions being taken.

* Chief of Staff Report Dr. Bugna
* Chief Nursing Officer Report Penny Holland
* Clinic Director Report Rhonda Grandi
* HR Director Report Lori Tange
* Chief Financial Officer Report Katherine Pairish
* Management Reports – IT Rick Thomas
* SNF Director of Nursing Report Lorraine Noble
* Chief Executive Officer Report Doug McCoy

EXECUTIVE OVERVIEW:

Overall operations for August exceeded budgeted expectations for the third consecutive month. Net income has shown a significant improvement over that period without additional IGTs and was just under the break-even goal for August. SNF performance was slightly off plan due to the impact on new admissions from both COVID testing and the 3-day evacuation of the Loyalton campus. Clinic performance remained strong for August although slightly down from the prior month due to provider vacations impacting appointment availability.

Community COVID cases increased from 40 to 50 over the past 30 days, which was a reduction of 6 cases as compared to the prior 30-day period. DHS has issued directives to provide weekly testing to all SNF employees which previously was only required due to a positive employee or resident test result. We continue to prevent any acquired cases from occurring in both SNFs and the hospital patients. The rapid testing lab equipment has arrived, and we are awaiting reagent and supplies with an anticipated launch on October 1st.

Quality/Regualatory:

DHS on behalf of CMS was onsite to complete the resurvey process from deficiencies identified in January on 9/16/20 and placed the hospital back into substantial compliance. DHS and OSHPD were also onsite in August to review both campuses and provide their approval in order to return the evacuated residents back to the Loyalton SNF. There were no issues identified by either agency during that review.

Captial Projects:

Campus signage has been updated with new lighting and paint in preparation for installment of the new sign faces which are expected this week. The lobby renovation project update includes:

* Complete remodel of the entrance vestibule
	+ Paint and wood trim – completed
	+ Flooring – will be completed this week
* Replacement of carpet and patient chair furniture – on order
* Refinishing of all wood trims and new paint throughout the lobby - completed
* Patient privacy screen dividers to increase infection prevention – ordered and awaiting delivery and installation.

The SNF boiler will be repaired versus replaced due to cost and the delay to receive OSHPD approval (anticipated 6 months). We will be adding a replacement to the 2021/22 capital plan.

Pricing and electrical needs are under review to have smaller generators added to both the Loyalton and Graeagle clinics. Given electrical shutdowns due to the fire season, this will avoid any impacts to care delivery should power be lost in the future.

Upon completion of the lobby project, we will be focusing on the hospital corridors and patient care areas for refurbishment as well as Loyalton patient and activity room furniture identified during the August evacuation.

Corporate Compliance Program**:**

To ensure ongoing compliance with all applicable laws and regulations, the management team has reviewed EPHC’s Corporate Compliance Program which was revised in April 2020. To improve reporting and oversight, we will be recruiting a contract compliance officer to review monthly reporting, identify any areas of risk, and make recommendations as needed to both the Executive Team, Medical Executive Committee, and the Board of Directors. Copies of the Corporate Compliance Program will be distributed to members of various committees within EPHC, and a compliance committee will be established in conjunction with our revenue cycle and QA committees.

MEDICAL STAFF:

Dr. Robert Adams has agreed to start employment with EPHC as the Clinic Medical Director on November 1st. Dr. Adams has been a contracted ER physician with EPHC and will maintain one shift per month in that capacity. Given our opportunities to expand clinic operations, we will be recruiting for a physician to assist with SNF coverage and will not add those duties to Dr. Adams role.

On August 27th EPHC reinstituted the medical staff meeting with 12 providers in attendance. These meetings will be scheduled quarterly with agenda items determined by the medical staff and submitted through MEC. Feedback from the last meeting was provided to EPHC leadership with actions implemented to improve patient experience and provider efficiency.

1. **Policies**

 Discussion was held, approved with minor changes.

 **ACTION:** Motion was made by Director Whitfield, seconded by Director Johnson to approve the policies as submitted with minor changes.

AYES: Directors Whitfield, Swanson, and West

NAYS: None

1. **Committee Reports**

Finance Committee reported briefly on August financials.

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1. **Board Closing Remarks**

Board re-opened public comment to allow provider, Beth Hill, N.P. to make a comment.

**Open Session recessed at 10:19 a.m.**

1. **Closed Session**
2. Closed Session pursuant to Health and Safety Code 32155 – Hearing –

Subject Matter: Staff Privileges

Discussion was held on a privileged item.

1. Public Employee Performance Evaluation (Government Code Section 54957)

Subject Matter: CEO

Discussion was held on a privileged item.

1. **Open Session Report of Actions Taken in Closed Session**

 The Board returned at approximately 10:40 a.m. and reported meeting on three items. Item A was approved with a 5-0 vote:

 **Two Year Courtesy Privileges**

* Marc Walter, MD
1. **Adjournment**

Meeting adjourned at 10:45 a.m.