

Regular Board Packet

October 3, 2024

Board Packet

Agenda

10.03.2024 - District Board Agenda 2

Consent Calendar Reports

October ONRC Board Report 8

Regular Board Meeting Minutes

9.05.2024 Board Meeting Minutes 9

Medical Staff Reports

10-03-2024 Open Session Memo 14

OUR MISSION

“We Focus on Personalized Quality Health Care and Wellness for Those We Serve”

OUR VISION

“Oak Valley Hospital District Will Continue as an Independent Locally Controlled and Governed Special District Hospital. To Accomplish This We Will Adhere to the Following Guidelines:
Being Fiscally Responsible in Our Decision Making Process
Maintain and Expand Services that Best Reflect Our Needs and Resources Available
Promote Positive Change in the Health Status of Employees and Area Residents.”

OUR VALUES

“Accountability; Being Responsible for Actions Taken and Not Taken
Integrity; Doing the Right Thing for the Right Reason
Respect; Valuing All People at All Times”

~~~~~

**REGULAR MEETING OF THE BOARD OF DIRECTORS  
OF OAK VALLEY HOSPITAL DISTRICT**

**October 3, 2024, 5:30p.m.,  
1425 West H Street, Oakdale, CA 95361  
Royal and Charter Oak Conference Rooms**

| <u>Time</u> | <u>Action</u> | <u>Item</u>                                                 |
|-------------|---------------|-------------------------------------------------------------|
| 5:30 p.m.   | Action        | <b>MEETING CALLED TO ORDER</b><br>Dan Cummins, Chair Person |

**PUBLIC COMMENT**

In compliance with the California Brown Act the District Board of Directors welcomes comments from the public.

This is the opportunity for members of the public to directly address the District Board of Directors on any item of interest to the public under the jurisdiction of the District including items on this agenda.

Persons wishing to make a presentation to the Board of Directors shall observe the following procedure:

1. A written request to the Board on the form provided at the meeting (optional)
2. Oral presentations are limited to three (3) minutes.
3. Members of the public will be afforded the opportunity to speak at the beginning of the public meeting during the general Public Comment section of the agenda on any item under the jurisdiction of the District as well as during the consideration of an individual item on the agenda for that public meeting, however the three-minute limit described in item 2, above, will be applied to an individual’s cumulative comments during the meeting.

The proceedings of the Board are recorded and are part of the public record.

Materials related to an item on this Agenda, submitted to the Oak Valley Hospital District after distribution of the agenda packet, are available for public inspection in the Secretary’s Office at 1425 West H Street, Suite 270, Oakdale, CA during normal business hours.

Action                    **1. FY2024 External Audit Report**  
                                 **External Auditors Presentation and Possible Acceptance of Audited**  
                                 **Financial Statements**  
                                 - Presented by Jerrel Tucker, JWT & Associates, LLP

Information/Action    **CONSENT CALENDAR ITEMS**  
Items 1-3 comprise the consent agenda, unless there is discussion by a member of the audience or Board Members, they may be approved in one motion.

1. **Oakdale Nursing and Rehabilitation Center Report**  
Will Pringle, V.P., Oakdale Nursing and Rehabilitation Center
2. **Approval of Administrative Forms and Policies**
  - None
3. **Approval of Minutes –**
  - September 5, 2024 – Regular Meeting

Action                    **MEDICAL STAFF REPORT – Andres Arellano, M.D., Chief of Staff**

**The Medical Executive Committee requests the District Board’s approval of the following items forwarded from the September 17, 2024 meeting.**

**A. POLICIES**

Forms: Pages 1-9

- Form0417 Potassium and Magnesium Replacement Protocols
- Form 0510 Physician Order Heparin Protocol
- Form0869 Alcohol Withdrawal (CIWA-Ar) Lorazepam
- Form1015 Heparin Infusion Flow Sheet

Administrative Manual Pages 10-14

- Strategic Plan for Health Equity

Clinical Manual Pages 15-71

- Bedside Mobility Assessment Protocol
- Fentanyl Transdermal Patch
- Growth and development Process and Assessment of Age Specific Care Needs
- Guidelines for Magnesium Sulfate and Potassium Chloride Replacement

- Medication Errors
- Patient Controlled Analgesia (PCA)
- Pyxis Medication Station
- Safe Patient Handling and Mobilization Program
- Telemetry Management Procedure

Clinical / Pharmacy Manual

Pages 72-87

- Bowel Care Guidelines
- Formulary
- Therapeutic Drug Interchange

Infection Control Manual

Pages 88-109

- Animals in Healthcare Setting
- Donning and Doffing PPE
- Meningococcal Disease Exposure to
- Standard Precautions

ONRC

Pages 110-146

- Antibiotic Stewardship
- Behavior Management
- Comprehensive Nursing Assessment / Reassessment
- Elopement Risk Assessment & Security Monitoring System
- Falls Risk Assessment
- Heights for Immeasurable Residents
- Hydration
- Identification of Combative Residents
- Intake / Output
- Leave of Absence / Home Visits
- Nursing Communication to Dietary Regarding Nutritional Problems of Residents
- Oxygen Equipment
- Oxygen Tanks
- Personal Care Products
- Posting of Signs in Resident Rooms
- Psychotherapeutic Monitoring Committee

ONRC

Pages 147-149

- Resident Grooming
- Restorative Nursing Program

PACU Manual

Pages 150-152

- Post Anesthesia Admission and Care in the PACU

Pharmacy Manual

Pages 153-200

- Antimicrobial Stewardship
- Drug Recall
- Medication Error Reduction Plan (MERP)
- Sterile Compounded Preparations – LAFW
- Warfarin Therapy

**Policies & Forms (RETIRE)**

Forms:

Pages 201-204

- Form0562 Fentanyl Duragesic Patch Order (RETIRE)
- Form0906 Fentanyl Patch Dispensing Review (RETIRE)

Clinical Manual

Pages 205-268

- Crash Carts (RETIRE)
- Investigational Medications (From Another Institution) (RETIRE)
  - o Replaced with “Investigational Drug Policy”
- Medication Safety Plan (RETIRE)

Clinical / Pharmacy Manual

Pages 269-270

- Returned Medications (RETIRE)

Infection Control Manual

Pages 271-275

- Indwelling Urinary Catheter, Care of Patients With (RETIRE)

**FINANCE COMMITTEE – Edward Chock, M.D., Chairperson**

- Matt Heyn, President and C.E.O. and Ann Croskrey, CFO

Action

1. Financial Reports for August 2024  
Approval of August 2024 Financial Statements

**CHAIR PERSON REPORT**

- Dan Cummins Chair Person

Information

1. Chair Person Comments

**CHIEF EXECUTIVE OFFICER REPORT**

- Matt Heyn, President and Chief Executive Officer

- Information 1. Chief Executive Officer Report
- Information 2. Standard & Poor's (S&P) Bond Rating
- Action  
**Resolution  
2024-10** 3. District Board of Directors of Oak Valley Hospital  
Changing the January 2, 2025 Regular Meeting and Finance  
Committee Meetings of the Board to January 9, 2025
- Action  
**Resolution  
2024-09** 4. District Board of Directors of Oak Valley Hospital  
Renewal of \$3,000,000 Line of Credit  
- Ann Croskrey, Chief Financial Officer
- Action 5. General Obligation (GO) Bond Refinance  
- Ann Croskrey, Chief Financial Officer
- Information 6. Seismic Compliance and Cost Presentation  
- David Rodrigues and Don Pederson

**ADJOURN TO CLOSED SESSION**

- Action 1. **Approval of Closed Session Minutes –**
- August 1, 2024 - Regular Meeting
- (See attached Agenda for Closed Session)**

**RECONVENE TO OPEN SESSION**

Information **REPORT OF CLOSED SESSION**

Action **ADJOURNMENT**

**The next Regular meeting of the Board of Directors is scheduled on November 7, 2024 at 5:30p.m.**

Posted on: September 30, 2024

By: Sheryl Perry, Clerk of the Board

**OAK VALLEY HOSPITAL DISTRICT  
BOARD OF DIRECTORS  
AGENDA FOR CLOSED SESSION**

Pursuant to California Government Code Section 54954.2 and 54954.5, the board agenda may describe closed session agenda items as provided below. No legislative body or elected official shall be in violation of Section 54954.2 or 54956 if the closed session items are described in substantial compliance with Section 54954.5 of the Government Code.

**Regular Meeting of the Board of Directors of the Oak Valley Hospital District  
October 3, 2024, 5:30p.m.,  
1425 West H Street, Oakdale, CA 95361  
Royal Oak Conference Room**

**CLOSED SESSION AGENDA ITEMS**

**HEARINGS/REPORTS**

(Government Code §37624.3 & Health and Safety Code §§1461, 32155)

**Subject matter:** (Specify whether testimony/deliberation will concern staff privileges, report of medical audit committee, or report of quality assurance committee):

Medical Staff Credentials Report – Andres Arellano, M.D., Chief of Staff

Chief Executive Officer – Matt Heyn, President and Chief Executive Officer

**PUBLIC EMPLOYEE PERFORMANCE EVALUATION**

(Government Code §54957)

**Title:** President and Chief Executive officer

**ADJOURN TO OPEN SESSION**

In observance of the Americans with Disabilities Act, please notify us at 209-848-4102 prior to the meeting so that we may provide the agenda in alternative formats or make disability-related modifications and accommodations.

## October 2024 ONRC Board Report

ONRC is pleased to report our 10th consecutive month of operations above the budgeted census. In August 2023, ONRC averaged 68 patients per day, and we closed out this August with 94 patients, marking an impressive 38% increase in census compared to last August. Our custodial census remains stable, averaging 87. The census in TCU was down for the month, with 65% utilization—a 2% improvement over the prior month. That said, a positive correction is expected in September, where TCU performance is nearing 80%.

Regarding the physical plant, we replaced bathroom flooring in several patient rooms and received many compliments on the new floors.

Regarding staffing, we are focused on improving the turnover rate among the CNA group. We currently have no open management positions.

This concludes our October ONRC Board Report.

William Pringle II

VP of LTC



**REGULAR MEETING OF THE BOARD OF DIRECTORS  
OF OAK VALLEY HOSPITAL DISTRICT  
OPEN SESSION  
September 5, 2024 5:30p.m.  
1425 West H Street, Oakdale, CA 95361  
Royal Oak Conference Room**

**Board**

Dan Cummins, Chair Person  
Frances Krieger, Director  
Louise Sanders, Secretary

**Staff**

Matt Heyn, President & C.E.O.  
Ann Croskrey, CFO  
Will Pringle, V.P., Oakdale Nursing & Rehab. Center

Edward Chock, M.D., Director joined the meeting at 5:56pm

**Excused:** Jim Teter, Vice Chair Person

**CALLED TO ORDER**

The District Board of Directors Meeting was called to order by Dan Cummins, Board Chair Person at 5:32p.m.

**PUBLIC COMMENT**

Public Comment read. Public in attendance.

Sara Shipman announced her candidacy for the OVHD Board of Directors, expressing passion for the Oakdale community and the hospital. She inquired about ways to increase community engagement with the hospital and emphasized the importance of generating excitement and involvement. Sara suggested reintegrating the ROP (Regional Occupational Program) into the hospital's departments, noting its significant impact in providing career opportunities for students, particularly in health care fields like phlebotomy.

Mr. Heyn responded, confirming that the school district has reinstated the ROP program, which is now in its second term. The goal is to inspire students to pursue careers in health care.

**CONSENT CALENDAR**

The following items, 1-3, will be acted on by one action, with discussion, unless a director or other person requests that an item be considered separately. In the event of such a request, the item will be addressed, considered, and acted upon separately.

1. Oakdale Nursing and Rehabilitation Center Report  
Will Pringle, V.P., Oakdale Nursing and Rehabilitation Center
2. Approval of Administrative Policies – None
3. Approval of Minutes –
  - August 1, 2024 – Regular Meeting

Louise Sanders made the motion to approve all Consent Calendar items. Fran Krieger made the second. No public input.

Cummins – Aye  
Krieger – Aye  
Sanders – Aye  
Chock – did not vote, as he joined the meeting at 5:56 PM

Jim Teter - Absent

**MOTION CARRIED**

**Financial Report for July 2024**

July is the first month in our fiscal year. In July, the District posted a profit from operations before new hospital expenses of \$414 thousand dollars. The profit from operations including new hospital expenses was \$28 thousand dollars. The difference is the new hospital expenses of interest and depreciation. As of the end of July, the year-to-date earnings before interest and depreciation (EBIDA), was 9.8%. Accounts receivable gross days decreased from 78 days to 70 days, and days of cash on hand decreased from 117 to 114 days.

Louise Sanders made the motion to approve the Financial Report for July 2024. Fran Krieger made the second. No public input.

Cummins – Aye  
Sanders – Aye  
Krieger – Aye  
Chock – did not vote, as he joined the meeting at 5:56 PM

Jim Teter - Absent

**MOTION CARRIED**

**CHAIR PERSON REPORT - Dan Cummins, Chair Person**

- No report

**Chief Executive Officer Report - Matt Heyn, President and Chief Executive Officer**

**Central California Surgery**

We have three new general surgeons that will be credentialed. All have visited our site, reviewed our equipment and supplies, and determined that minimal additional outlay is required to get them operational. They plan to perform their first surgeries in October. Bariatric surgeries are scheduled to begin later this year or early next year, which will enhance our surgical volume.

Dr. Chock has done an excellent job maintaining the surgery department, and Dr. Laghaee has contributed significantly by performing many GI procedures. The addition of these three surgeons is a positive development, and they have been cooperative and easy to work with.

Two of the surgeons are part owners of Stanislaus Surgical Hospital, which has been closed for some time. The facility is awaiting a Joint Commission survey later this year to determine whether it will reopen. Given their ownership interests, we have been cautious about working with them, as we anticipate they may prefer to bring the majority of their surgeries to their own facility. We have had direct conversations with the surgeons about their long-term plans, and they have expressed their desire to have another location for surgeries. Each of the three surgeons will rotate one day per week. We hope this will be a mutually beneficial relationship.

The bariatric surgery component remains an area we need to explore, as we have not performed these surgeries here before, and additional research is necessary.

### **Radiology Leadership**

We are continuing to work with an interim radiology leader, whose contract expires in the first week of October. While we can extend the contract, we have already interviewed several candidates for the interim position and a few for the permanent role. We are being very selective in our decision-making process.

Additionally, we are pushing our radiology group to improve turnaround times. We are transitioning to a new night-reading radiologist group, Vesta, which was recently approved by the Credentials Committee. We meet biweekly with local leaders and the owner of Radiologica, the company that handles our radiology readings, to ensure expectations are being met. There has been notable improvement, but it has been a significant effort for Melody in our medical staff office to continuously credential radiologists. We are hopeful that this change will yield positive results, but if not, we will consider other options.

### **Improved Communication in Patient Transitions**

To enhance communication during patient transitions from the Emergency Department (ED) to the inpatient unit, we have been collaborating closely with USACS (our ED providers) and RPG (our hospitalists). This partnership is aimed at improving patient handoffs, thereby enhancing the overall patient experience.

We have seen an increase in inpatient volume, and going forward, all potential transfers will be reviewed by both the ED physician and the hospitalist.

### **Meditech Clinic Module**

Our rural health clinics have been using the Meditech Ambulatory Module for some time. However, we have been informed that Meditech will phase out this product by the end of 2025. As a result, we have initiated the process of finding a replacement electronic health record (EHR) system. This is a lengthy process, but we are starting early to ensure we have a new system in place to support the 55,000 patient visits we handle each year. We are confident that we will find a more user-friendly platform for our providers.

### **Assembly Bill 869: Hospital Seismic Safety Compliance**

Assembly Bill 869, which focuses on hospital seismic safety compliance, has moved past the committee with overwhelming support and now awaits Governor Newsom's approval. Initially, the bill mandated compliance by 2030, but the revised version would extend the deadline to 2035.

As a reminder, our new hospital building is compliant, but the older one is not. If approved, the extension would provide much-needed relief for hospitals across the state, including ours. We, along with many other district hospitals, have signed a letter of support for this bill. At an appropriate time, I would

like David Rodrigues to present to the Board on Seismic Compliance and related costs, ensuring they are well-informed for future decisions.

**Public Comment**

Sara Shipman inquired about potential funding options for the Seismic Assembly Bill compliance project, specifically asking if a bond could be used to finance the required upgrades. The Chairperson responded by explaining that, while bond funding is an option, past experiences with reaching out to the community for support have often resulted in negative feedback. There is concern that a bond initiative may not receive the necessary backing from the community, given previous challenges in gaining support for similar efforts.

**Cyber Security Update - Ann Croskrey, CFO**

In July 2023, we were informed of attempts by unauthorized individuals to access our system. As a precaution, we had to temporarily shut down the system to implement comprehensive protective measures. Although we did not experience a ransomware attack and cannot confirm that any data was compromised, we took extensive steps to secure the hospital's information.

We have received a letter regarding a class action lawsuit involving multiple parties, which has been consolidated. Currently, we have a tentative settlement that is within the limits of our insurance policy. The website for this class action is Oak Valley Class Action. The final approval hearing for the settlement is scheduled for December 19th.

The positive news is that the measures we implemented during the shutdown were effective in preventing further issues. As a result, the Office of Civil Rights did not impose a fine or require a corrective action plan, which is a rare outcome. Successfully obtaining final approval for the settlement would represent a significant achievement for us.

**OVHD Human Resources Statistics Report - Ann Croskrey, CFO**

You all should have a copy of the HR Statistics covering the first six months of the year. At the beginning of January, we had 49 job openings, and as of June 30th, we have reduced that number to 36. Despite this progress, we continue to face shortages, particularly in the areas of Certified Nursing Assistants (CNAs), Licensed Vocational Nurses (LVNs) for the clinics, and Registered Nurses (RNs). On the second page of the report, you will find a breakdown of hires and terminations by job title over the six-month period. Unfortunately, our turnover rate remains high, which is why improving retention is a key priority on our Strategic Map.

Director Sanders inquired whether this level of turnover is typical for Oak Valley Hospital District (OVHD). Ann confirmed that it is, explaining that as a rural facility, we often lose staff to nearby areas where higher wages are available. Will has arranged for students from three different schools to come and receive training, which could potentially strengthen our workforce pipeline.

Mr. Heyn added that during a recent town hall meeting, one employee mentioned that they could earn more money working at a fast food restaurant than at a healthcare facility. This highlights a significant challenge we face in competing with wages in other sectors. While a bill was passed establishing a \$25 minimum wage for healthcare workers, rural and district hospitals like ours are exempt from this

mandate. We will be gradually moving toward that wage rate, but the reality is that we currently compete with fast food restaurants in terms of pay.

We need to place a strong emphasis on improving our workplace culture and highlighting the benefits we offer, as these are key areas that can help us retain staff. While wages are a challenge in our rural setting, our pension plan is very competitive and should be a focal point in our efforts to retain employees. Promoting these strengths—our positive culture, comprehensive benefits, and excellent pension plan—will be crucial in persuading current and potential employees to see the long-term value of staying with us.

**ADJOURNMENT**

There being no closed session Edward Chock, M.D. made the motion to adjourn the Board of Directors meeting. Louise Sanders made the second. No public input.

Cummins - Aye  
Chock - Aye  
Krieger - Aye  
Sanders - Aye

Jim Teter - Absent

**MOTION CARRIED**

The Board of Directors meeting was adjourned at 6:09p.m.

Recorder: Sheryl Perry, Clerk of the Board.

APPROVED: \_\_\_\_\_  
Louise Sanders, Secretary

DATE: \_\_\_\_\_

**MEMO:**       **October 3, 2024**  
**TO:**           **Members of the District Board**  
**FROM:**       **Medical Executive Committee**  
**RE:**           **Approval items to be reviewed in open session**

**The Medical Executive Committee requests the District Board’s approval of the following items forwarded from the September 17, 2024 meeting.**

**A. POLICIES**

Forms:

Pages 1-9

- Form0417 Potassium and Magnesium Replacement Protocols
- Form 0510 Physician Order Heparin Protocol
- Form0869 Alcohol Withdrawal (CIWA-Ar) Lorazepam
- Form1015 Heparin Infusion Flow Sheet

Administrative Manual

Pages 10-14

- Strategic Plan for Health Equity

Clinical Manual

Pages 15-71

- Bedside Mobility Assessment Protocol
- Fentanyl Transdermal Patch
- Growth and development Process and Assessment of Age Specific Care Needs
- Guidelines for Magnesium Sulfate and Potassium Chloride Replacement
- Medication Errors
- Patient Controlled Analgesia (PCA)
- Pyxis Medication Station
- Safe Patient Handling and Mobilization Program
- Telemetry Management Procedure

Clinical / Pharmacy Manual

Pages 72-87

- Bowel Care Guidelines
- Formulary
- Therapeutic Drug Interchange

Infection Control Manual

Pages 88-109

- Animals in Healthcare Setting
- Donning and Doffing PPE
- Meningococcal Disease Exposure to
- Standard Precautions

ONRC

Pages 110-146

- Antibiotic Stewardship
- Behavior Management
- Comprehensive Nursing Assessment / Reassessment
- Elopement Risk Assessment & Security Monitoring System
- Falls Risk Assessment
- Heights for Immeasurable Residents
- Hydration
- Identification of Combative Residents
- Intake / Output
- Leave of Absence / Home Visits
- Nursing Communication to Dietary Regarding Nutritional Problems of Residents
- Oxygen Equipment
- Oxygen Tanks
- Personal Care Products
- Posting of Signs in Resident Rooms
- Psychotherapeutic Monitoring Committee

ONRC

Pages 147-149

- Resident Grooming

- Restorative Nursing Program

PACU Manual

Pages 150-152

- Post Anesthesia Admission and Care in the PACU

Pharmacy Manual

Pages 153-200

- Antimicrobial Stewardship
- Drug Recall
- Medication Error Reduction Plan (MERP)
- Sterile Compounded Preparations – LAFW
- Warfarin Therapy

**Policies & Forms (RETIRE)**

Forms:

Pages 201-204

- Form0562 Fentanyl Duragesic Patch Order (RETIRE)
- Form0906 Fentanyl Patch Dispensing Review (RETIRE)

Clinical Manual

Pages 205-268

- Crash Carts (RETIRE)
- Investigational Medications (From Another Institution) (RETIRE)
  - o Replaced with “Investigational Drug Policy”
- Medication Safety Plan (RETIRE)

Clinical / Pharmacy Manual

Pages 269-270

- Returned Medications (RETIRE)

Infection Control Manual

Pages 271-275

- Indwelling Urinary Catheter, Care of Patients With(RETIRE)