

# Regular Board Packet

June 5, 2025

Board Packet

**Agenda**

06.05.2025 - District Board Agenda (1) ..... 2

**Consent Calendar Reports**

June 25 Board Report ..... 7

**Regular Board Meeting Minutes**

05.01.2025 Board Meeting Minutes (1) ..... 8

05.22.2025 Special Board Meeting Minutes ..... 14

**Medical Staff Reports**

06-05-2025 Open Session Memo ..... 16

### **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”

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

**June 5, 2025, 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.

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 –**

- May 1, 2025– Regular Meeting
- May 22, 2025 – Special Meeting

Action                    **MEDICAL STAFF REPORT** – Gretchen Webb-Kummer, M.D., Chief of Staff

**The Medical Executive Committee requests the District Board’s approval of the following items forwarded from the May 20, 2025 meeting.**

**I. COMMITTEE REPORTS**

**A. Credentials Committee Meeting – 05/06/2025**

*Matthew Tilstra, MD, Chairperson*

i. Other

- Revised/New Medicine Privilege Set – **Approval**

**B. Department of Medicine Committee Report – 05/13/2025**

*Lee Horwitz, MD, Chairperson*

i. Summary Review – **Discussion**

ii. Other

**POLICIES and FORMS**

**Forms – Approval**

- Form 0092: Patient Controlled Analgesia

**Policies – Approval**

*Clinical Manual*

- Assessment of Alcohol and/or Drug Dependent Patient
- Child Passenger Restraint System/Release of Minors Under 8 Years of Age (**RETIRE**)
- Patient Private Duty Nurse or Companion (**RETIRE**)
- Physician Notification of Patient Admission
- Suicide Risk Screening, Monitoring and Assessment

*Infection Control Manual*

- Negative Pressure Room Isolation

- Negative Pressure Verification Log
- Personal Protective Equipment

iii. Radiology Job Descriptions – **Annual Review / Approval**

- Radiology Technologist
- Radiology Supervisor
- Radiology Manager
- CT Technologist
- MRI Technologist
- US Technologist
- Mammography Technologist
- ECHO Technologist

**C. Department of Surgery Committee Report – (Next Mtg 06/10/2025)**

*Matthew Tilstra, MD, Chairperson – Standing Item*

**D. Quality Council Report – (Next Mtg 06/12/2025)**

*Lee Horwitz, MD, Chairperson – Discussion*

**E. Interdisciplinary Practice Committee (IDPC) – (Next Mtg 07/01/2025)**

*Matthew Tilstra, MD, Chairperson – Standing Item*

**F. Credentials Committee Meeting – (Next Mtg 07/01/2025)**

*Matthew Tilstra, MD, Chairperson – Standing Item*

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**II. OTHER**

**A. Forms/Policy Review**

**Policies – Approval**

*Administrative Manual*

- Patient Safety Plan

*Clinical Manual*

- Hypothermia/Hyperthermia Protocol (**RETIRE**)

*Infection Control Manual*

- Infection Prevention and Control Plan

**FINANCE COMMITTEE** – Edward Chock, M.D., Chairperson  
- Matt Heyn, President/CEO & Interim CFO

- Action                    1. Financial Reports for April 2025  
                              Approval of April 2025 Financial Statements

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

- Information            1. Chair Person Comments

- Action                    2. CEO Interim CFO Pay Adjustment -  
                              Consideration of a pay adjustment for the CEO in recognition of fulfilling dual  
                              role as Chief Executive Officer and Interim Chief Financial Officer.

**CHIEF EXECUTIVE OFFICER REPORT**  
- Matt Heyn, President and Chief Executive Officer

- Information            1. Chief Executive Officer Report

- Action                    2. Approval to proceed with the PACS system upgrade, with total  
                              expenditures not to exceed \$150,000.

**ADJOURN TO CLOSED SESSION**

- Action                    1.     **Approval of Closed Session Minutes** –
- May 1, 2025 - Regular Meeting
  - May 22, 2025 – Special 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 July 3, 2025 at 5:30p.m.**

Posted on: June 2, 2025

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  
June 5, 5:30p.m.,  
1425 West H Street, Oakdale, CA 95361  
Royal Oak Conference Room**

**CLOSED SESSION AGENDA ITEMS**

**HEARINGS/REPORTS**

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

**Subject Matter:**

Discussion and review of Quality and Risk Management reports, including data related to patient safety, performance improvement, and organizational risk.

**Chief Executive Officer Report – Matt Heyn, President and CEO**

- **Quality Updates – Jennifer Cook, Director, Quality & Risk Management**
  - Quality Dashboard
  - Risk Management Report

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.



## June 2025 ONRC Board Report

ONRC has experienced a slight downturn in census in the prior month of operations where we achieved a census of 88. This represents a 3% drop from our prior month of operation when we closed at 91. This change also reflects a 1% variance to budget. The slight decrease can be contributed to slow referrals rates for our short-term rehab service line. Additionally, we experienced some disruption with the absence of our primary Admission Nurse. In June, the VP of LTC will be meeting with local skilled providers and initiating a custodial patient transfer plan to increase our population of LTC residents.

Regarding regulatory compliance, we recently received our approval of the CMS plan of correction. The state was highly satisfied with our plan and required no revisions following our submission. Similarly, our plan of correction for the Life Safety Survey portion of the annual survey was similarly approved.

Regarding staffing, we continue recruiting for a Director of Staff Development. This critical role provides education and supervision to our largest employee class, the Certified Nurse Aides or CNA's.

This concludes our June ONRC Board Report.

William Pringle II

**REGULAR MEETING OF THE BOARD OF DIRECTORS  
OF OAK VALLEY HOSPITAL DISTRICT  
OPEN SESSION  
May 1, 2025 5:30p.m.  
1425 West H Street, Oakdale, CA 95361  
Royal Oak Conference Room**

**Board**

Dan Cummins, Chair Person  
Frances Krieger, Vice Chair Person  
Edward Chock, M.D., Secretary  
Sara Shipman, Director  
Danielle Sanders, Director

**Staff**

Matt Heyn, President and C.E.O.  
Gretchen Webb-Kummer, M.D., Chief of Staff  
David Rodrigues, V.P., C.O.O.  
David Neal, V.P., Nursing Services  
Will Pringle, V.P., Oakdale Nursing & Rehab.  
Ann Croskrey, Chief Financial Officer

**CALLED TO ORDER**

The District Board of Directors Meeting was called to order by Dan Cummins, Board Chair Person at 5:35 p.m.

**PUBLIC COMMENT**

Public comment read. Public in attendance.

Nancy Podolsky suggested that the District consider establishing an urgent care center in the old hospital lobby area to help alleviate ER volume and retain local healthcare business. She also recommended repurposing the former gift shop space into a coffee shop to better serve staff and visitors.

**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 Forms and Policies**

- Interim Life Safety Measures
- Clinical Laboratory, Cleaning of – RETIRE
- Disaster Call-Back List – RETIRE
- Doors and Door Jambs, Cleaning of – RETIRE
- Cleaning Unoccupied Patient Room - RETIRE
- Laundry Security – RETIRE
- Laboratory Draw Area, Cleaning of – RETIRE
- Cleaning Patient Room – Discharge / Transfer – RETIRE
- Mopping Dust / Damp



- In-Service Education
- In-Patient Rehabilitation Services Department, Cleaning of – RETIRE
- Handling Clean / Soiled Linen
- Patient Age Related Hazards – RETIRE
- Standardized Procedures – RETIRE
- Nurse Extern Work Experience – RETIRE
- Hazardous Materials and Waste Nursing Department Service
- Form0327
- Radioactive Disaster

### **3. Approval of Minutes**

- April 3, 2025 – Regular Meeting

Edward Chock, M.D., made the motion to approve the Consent Calendar Items. Sara Shipman made the second. No public input.

Cummins – Aye  
Krieger – Aye  
Chock – Aye  
Shipman – Aye  
Sanders - Aye

**MOTION CARRIED**

**MEDICAL STAFF REPORT** – Gretchen Webb-Kummer, M.D., Chief of Staff

**The Medical Executive Committee requests the District Board's approval of the following items forwarded from the April 15, 2025 meeting.**

#### **I. COMMITTEE REPORTS**

- A. The Department of Surgery Committee Report – (04/08/2025)  
Matthew Tilstra, MD, Chairperson
  - i. Summary Review
- B. The Quality Council Report – (Next Mtg 04/24/2025)  
Lee Horwitz, MD, Chairperson
- C. Interdisciplinary Practice Committee Meeting (IDPC) – (Next Mtg 05/06/2025)  
Matthew Tilstra, MD, Chairperson
- D. Credentials Committee Meeting – (Next Mtg 05/06/2025)  
Matthew Tilstra, MD, Chairperson
- E. The Department of Medicine Committee Report – (Next Mtg 05/13/2025)  
Lee Horwitz, MD, Chairperson

#### **II. OTHER**

- A. Forms/Policy Review

**POLICIES**

**Clinical Manual**

- i. Standardized Procedures **(RETIRE)**
- ii. Nurse Extern Work Experience (Level2, Level3, Level 4) **(RETIRE)**

Frances Krieger made the motion to approve the Medical Staff Report. Danielle Sanders made the second. No public input.

Cummins – Aye  
Krieger – Aye  
Chock – Aye  
Shipman – Aye  
Sanders - Aye

**MOTION CARRIED**

**Financial Report for March 2025**

Gross revenue was strong in March, with patient revenue exceeding budget by 6%. March closed with the District posting a profit from operations before new hospital expenses of \$967 thousand dollars. The profit from operations including new hospital expenses was \$581 thousand dollars. The difference is the new hospital expenses of interest and depreciation.

As of the end of March, the year-to-date earnings before interest and depreciation (EBIDA), was 17.4%. Accounts receivable gross days decreased from 64 days to 59 days, and days of cash on hand decreased from 86 to 71 days. The drop is due to sending out more intergovernmental transfers (IGT's) of \$3.5 million dollars. Those IGT's will be returned later this fiscal year along with Federal matching funds.

Danielle Sanders made the motion to approve the March Financial Report. Edward Chock, M.D. made the second. No public input.

Cummins – Aye  
Krieger – Aye  
Chock – Aye  
Shipman – Aye  
Sanders – Aye

**MOTION CARRIED**

**Charity Care Report – Ann Croskrey, Chief Financial Officer**

The Board was informed of a long-term custodial patient who passed away with no known family, no insurance, and total outstanding charges of \$310,861.21. Efforts to apply for Medi-Cal were unsuccessful due to lack of information. Staff noted that while no other similar cases exist currently, delays in Medi-Cal approvals continue due to staffing shortages at the County level.

Frances Krieger made the motion to approve the Charity Care Report. Danielle Sanders made the second. No public input.

Cummins – Aye  
Krieger – Aye  
Chock – Aye  
Shipman – Aye  
Sanders – Aye

**MOTION CARRIED**

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

The Chairperson shared their appreciation for the District's recent growth and success in key service areas, including long-term care and the surgery department. They emphasized the importance of continuing to address equipment needs, pursue new opportunities, and improve margins, while reaffirming the District's commitment to remaining a diversified, standalone acute care facility.

**Chief Executive Officer Report - Matt Heyn**

**Mental Health Awareness Month Presentation – Amanda Stepp, LCSW:**

Ms. Stepp, a longtime Oakdale resident and mental health professional, shared alarming local suicide statistics, noting Oakdale's suicide rate as the highest in the county based on 2023 data. She emphasized the need for increased community awareness and collaboration and encouraged participation in local mental health coalition meetings. Green ribbons were distributed in recognition of Mental Health Awareness Month.

**Chief Executive Officer Report**

The CEO reported that OVHD will fully vacate the Medical Office Building (MOB) by the end of July due to financial considerations, resulting in an estimated annual savings of \$1 million. Most departments will relocate to the old hospital building, with alternative arrangements underway for rehab services.

Discussions are ongoing with Valley Nephrology Associates to establish inpatient dialysis services. The District had previously purchased dialysis equipment, and a formal agreement is being drafted.

To address gaps in specialty coverage, OVHD is pursuing a partnership with Amplify MD for telemedicine services, beginning with cardiology and neurology by mid-June.

The CEO also reminded the Board of the upcoming community event on May 15th to introduce OVHD's new emergency and hospital medicine physician partnership. Lastly, notice has been given to OVHD's current radiology group, with plans to enhance standards for radiology services moving forward.

**ICU Analysis - David Neal, Chief Nursing Officer**

Mr. Neal presented a comprehensive plan for reopening OVHD's ICU, highlighting improved patient volumes, community need, and alignment with strategic growth initiatives such as bariatric surgery and inpatient dialysis. He noted the current reliance on patient transfers due to limited critical care capacity and emphasized the positive impact reopening would have on community trust and service retention. Financial projections anticipate an initial operating loss, with long-term sustainability and margin growth. The plan includes staffing, infrastructure readiness, policy development, and a projected opening in October 2025, pending CDPH approval.

**CEO Remarks – Matthew Heyn**

Mr. Heyn reinforced the strategic importance of reopening the ICU, emphasizing that prior closure allowed OVHD to reset operations, build new partnerships, and improve ambulance capture rates. He acknowledged initial financial losses but expressed confidence in long-term viability and improved care delivery. He clarified timing around supplemental funding and the importance of continued collaboration and fiscal oversight.

**Additional Comments**

Board and staff members expressed strong support for the ICU reopening, noting increased ambulance transports, improved community perception, and opportunities for enhanced services including dialysis and infusions. Staff also highlighted efforts to expand infusion services locally and reduce outmigration of patients seeking specialty care.

Danielle Sanders made a motion to accept the ICU reopening analysis as presented. Sara Shipman seconded the motion. No public input.

Cummins – Aye  
Krieger – Aye  
Chock – Aye  
Shipman – Aye  
Sanders – Aye

**MOTION CARRIED**

**Approval to Hold Special Board Meeting – May 22, 2025:**

The Board was requested to consider holding a special meeting on Thursday, May 22, 2025, for the credentialing of new Sound Physicians associated with the upcoming Sound transition. Due to the volume of providers requiring privileges and the June 2nd start date, timely Board approval is necessary to avoid disruptions in billing and operations.

Edward Chock, M.D., made a motion to approve holding a Special Board Meeting on May 22, 2025, to credential the new Sound Physicians. Sara Shipman seconded the motion. No public input.

Cummins – Aye  
Krieger – Aye  
Chock – Aye  
Shipman – Aye  
Sanders – Aye

**MOTION CARRIED**

## **ADJOURNMENT**

Edward Chock, M.D., made the motion to adjourn to Closed Session. Fran Krieger made the second. No public input.

Cummins – Aye  
Krieger – Aye  
Chock – Aye  
Shipman – Aye  
Sanders – Aye

**MOTION CARRIED**

The Oak Valley Hospital District meeting was adjourned to Closed session at 6:30 p.m.

## **RECONVENE TO OPEN SESSION**

### **ANNOUNCEMENT OF CLOSED SESSION**

Approval of Board Meeting Minutes:

- April 3, 2025 – Regular Meeting (*Approved*)

Reports & Updates:

1. Report involving trade secrets (Gov. Code § 37606 & Health & Safety Code § 32106) regarding a proposed new arrangement for revenue enhancement and strategic planning. Estimated date of disclosure is June 2025.
2. Public employee performance evaluation (Gov. Code § 54957) – Title: Management Team Members.

## **ADJOURNMENT**

Sara Shipman made the motion to adjourn the Board of Directors meeting. Edward Chock, M.D., made the second. No public input.

Cummins – Aye  
Krieger – Aye  
Chock – Aye  
Shipman – Aye  
Sanders – Aye

**MOTION CARRIED**

The Board of Directors meeting was adjourned at 7:05 p.m.  
Recorder: Sheryl Perry, Clerk of the Board.

APPROVED: \_\_\_\_\_  
Edward Chock, M.D., Secretary

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

**SPECIAL MEETING OF THE BOARD OF DIRECTORS  
OF OAK VALLEY HOSPITAL DISTRICT  
OPEN SESSION  
May 22, 2025, 5:30p.m.  
1425 West H Street, Oakdale, CA 95361  
Royal Oak Conference Room**

**Board**

Frances Krieger, Vice Chair Person  
Edward Chock, M.D., Secretary  
Sara Shipman, Director  
Danielle Sanders, Director

**Staff**

Matt Heyn, President & CEO  
Gretchen Webb-Kummer, M.D., Chief of Staff  
David Rodrigues, COO  
David Neal, CNO

Excused: Dan Cummins, Chair Person

**CALLED TO ORDER**

The District Board of Directors Meeting was called to order by Vice Chair Person, Frances Krieger at 5:34p.m.

**PUBLIC COMMENT**

No public comment read – no members of the public in attendance.

**EMERGENCY ITEM – ADDITION TO AGENDA**

Vice Chairperson Krieger, presiding in the absence of the Chair Person, announced that pursuant to Government Code Section 54954.2(b)(2), there is a need for immediate action by the Board. The need to act came to the District's attention after the agenda was posted. The matter pertains to the removal of three former authorized signers on the District's LAIF account and the addition of the current CEO, COO, and Chairperson. This action requires the adoption of a new LAIF Resolution.

A motion was made by Edward Chock, M.D., and seconded by Sara Shipman to add the item to the agenda.

AYES: Krieger, Chock, Shipman, Sanders

NOES: None

**MOTION CARRIED**

**ACTION ITEM**

**Resolution – LAIF Account Authorized Signers Update**

The Board considered and adopted the resolution to update the authorized signers on the District's LAIF account.

AYES: Krieger, Chock, Shipman, Sanders

NOES: None

**MOTION CARRIED**

**ADJOURNMENT TO CLOSED SESSION**

**RECONVENE TO OPEN SESSION**

The Board reconvened to Open Session at 5:38 p.m.

**ANNOUNCEMENT OF CLOSED SESSION ACTION**

**Approval of Credentialing Report:** Approved.

**ADJOURNMENT**

Danielle Sanders made the motion to adjourn the Board of Directors meeting. Edward Chock, M.D., seconded the motion.

AYES: Krieger, Chock, Shipman, Sanders

NOES: None

**MOTION CARRIED**

The Oak Valley Hospital District meeting was adjourned to closed session at 5:42p.m.

Recorder: Sheryl Perry, Clerk of the Board

APPROVED: \_\_\_\_\_  
Edward Chock, M.D., Board Secretary

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

**MEMO:** June 5, 2025  
**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 May 20, 2025, meeting.**

**I. COMMITTEE REPORTS**

- A. Credentials Committee Meeting –05/06/2025  
Matthew Tilstra, MD, Chairperson
- i. Other
    - Revised/New-Medicine Privilege Set **Approval**
- B. The Department of Medicine Committee Report – 05/13/2025  
Lee Horwitz, MD, Chairperson
- i. Summary Review **Discussion**
  - ii. Other
    - POLICIES and FORMS
    - Forms **Approval**
    - Form0092 Patient Controlled Analgesia **Approval**
    - Policies
    - Clinical Manual
      - Assessment of Alcohol and/or Drug Dependent Patient
      - Child Passenger Restraint System/Release of Minors Under 8 Years of Age (RETIRED)
      - Patient Private Duty Nurse or Companion (RETIRED)
      - Physician Notification of Patient Admission
      - Suicide Risk Screening, Monitoring and Assessment
    - Infection Control Manual
      - Negative Pressure Room Isolation
        - Negative Pressure Verification Log
      - Personal Protective Equipment
- iii. Radiology Job Descriptions – Annual Review **Approval**
  - Radiology Technologist
  - Radiology Supervisor
  - Radiology Manager
  - CT Technologist
  - MRI Technologist
  - US Technologist
  - Mammography Technologist
  - ECHO Technologist
- C. The Department of Surgery Committee Report – (Next Mtg 06/10/2025)  
Matthew Tilstra, MD, Chairperson **Standing**
- D. The Quality Council Report – (Next Mtg 06/12/2025)  
Lee Horwitz, MD, Chairperson **Discussion**
- E. Interdisciplinary Practice Committee Meeting (IDPC) – (Next Mtg 07/01/2025)  
Matthew Tilstra, MD, Chairperson **Standing**
- F. Credentials Committee Meeting –(Next Mtg 07/01/2025)  
Matthew Tilstra, MD, Chairperson **Standing**



II. **OTHER**

A. Forms/Policy Review

POLICIES

Administrative Manual

- i. Patient Safety Plan

Clinical Manual

- i. Hypothermia/Hyperthermia Protocol (RETIRED)

Infection Control Manual

- i. Infection Prevention and Control Plan

**Approval**