

PIONEERS MEMORIAL HEALTHCARE DISTRICT
207 West Legion Road, Brawley, CA 92227
REGULAR MEETING OF THE BOARD OF DIRECTORS

Tuesday, February 27, 2024
PMH Auditorium
5:00 pm

AGENDA

PMHD MISSION: Quality healthcare and compassionate service for families of the Imperial Valley

In compliance with the Americans with Disabilities Act, if you require special accommodations to participate in a board meeting, please contact the District at (760) 351-3250 at least 47 hours prior to the meeting.

- I. CALL TO ORDER** (*time: 5:00 pm – 5:15 pm*)
 - A. Roll Call
 - B. Approval of Agenda
- II. BOARD MEMBER COMMENTS**
- III. PUBLIC COMMENTS** – At this time, the Board will hear comments on any agenda item and on any item not on this agenda. If any person wishes to be heard, he or she shall stand; address the chairperson and state the subject, or subjects, upon which he or she desires to comment. Time limit for each speaker is 5 minutes. A total of 15 minutes shall be allocated for each item. (*time: 5:15 pm – 5:30 pm*)
- IV. MEDICAL STAFF REPORT** – Ramaiah Indudhara, MD, Chief of Staff, will present for Board consideration, the following matters: (*time: 5:40 pm – 6:00 pm*)
 - A. Recommendations from the Medical Executive Committee for Medical Staff Membership and/or Clinical Privileges, policies/procedures/forms, or other related recommendations
- V. POLICIES/PROCEDURES/REVIEW OF OTHER ITEMS** – The Board will consider and may take action on the following: (*time: 6:00 pm – 6:45 pm*)
 - A. Hospital Policies
 - 1. Per Diem Program
 - B. Update Reports
 - 1. Women's Auxiliary
 - 2. LAFCO
 - C. Human Resources Report

SECTION

- D. Authorize Professional Services Agreement with Joseph K. Bivens, M.D.
Contract Value: approx. \$300,000/yr.; Contract Term: Three (3) years; Budgeted: Yes; Budget Classification: Professional Fees
- E. Authorize Retro-approval of Order for Cerner CommunityWorks Fetal Link
Contract Value: \$70,997.³⁸; Contract Term: Ten (10) years; Budgeted: Yes; Budget Classification: Capital/Maintenance
- F. Approval of Revised Exhibit A: Monthly Time & Activity Log to the Lead Physician Advisor Agreements
Contract Value: N/A; Contract Term: N/A; Budgeted: N/A; Budget Classification: N/A
- G. Authorize Amendment to Hospital Services Agreement with Universal Care, In. dba Brand New Day Pending Legal Review
Contract Value: 100% Medicare; Contract Term: February 28, 2024-December 31, 2024; Budgeted: Yes; Budget Classification: Net Revenue

VI. MANAGEMENT REPORTS – The Board will receive the following information reports and may take action. (*time: 6:45 pm – 7:30 pm*)

- A. Operations Reports – Christopher Bjornberg, CEO
 - 1. CEO Report (Chief Executive Officer)
 - a) PMHD Email
 - 2. Hospital operations (Chief Nursing Officer)
 - 3. Clinics operations (Chief of Clinic Operations)
 - 4. Medical staff (Chief Nursing Officer)
 - 5. Finance (Chief Financial Officer)
 - 6. Information technology (Chief Nursing Officer/Director of Information Systems)
 - 7. Marketing (Director of Marketing)
 - 8. Facilities, logistics, construction, support
 - 9. Quality resources - (Director of Quality Resources)
 - 10. Board matters
- B. Legal Counsel Report – Sally Nguyen
 - 1. All matters to be discussed in Closed Session

VII. CLOSED SESSION – The following matters will be considered by the Board in closed session; the Board will reconvene in open session to announce any action taken on

SECTION

matters considered in closed session. (*time: 7:30 pm – 7:50 pm*)

A. QUALITY ASSURANCE – Safe Harbor: Health & Safety Code 32155 the Board will hear reports of a hospital medical audit committee relating to:

1. Quality Report/Scorecard

B. PENDING OR THREATENED LITIGATION – Safe Harbor: Subdivision (b) of Government Code Section 54956.9

1. Potential Cases: 1

C. CONSIDERATION OF MATTERS INVOLVING TRADE SECRETS – Safe Harbor: Health and Safety Code §32106, subparagraph (b)

1. Based on the Board's prior findings regarding Trade Secret classification, as contained in Resolution 2023-01, consideration and discussion of possible initiation of the following:

a. Updating Certain District Strategic Planning Initiatives

D. PENDING OR THREATENED LITIGATION – Safe Harbor: Subdivision (b) of Government Code §54956.9

1. Conference with Legal Counsel regarding threatened litigation involving possible facts or circumstances not yet known to potential party or parties, disclosure of which could adversely affect the District's position.

a. Compliance Issues

VIII. RECONVENE TO OPEN SESSION (*time: 7:50 – 8:00 pm*)

A. Take Actions as Required on Closed Session Matters

IX. ADJOURNMENT (*time: 8:00 pm*)



DATE: February 20, 2024

TO: Pioneers Memorial Healthcare District Board of Directors

FROM: Ramaiah Indudhara, M.D; Chief of Staff

SUBJ: Medical Staff Recommendations for Approval

ITEMS FOR CONSIDERATION: Recommendations from the Medical Executive Committee for Medical Staff Membership and/or Clinical Privileges, policies/procedures/forms or other related recommendations.

SUMMARY AND BACKGROUND: The Medical Executive Committee, upon the recommendations of the Credentials Committee and the respective clinical services and/or chiefs and based on the completed credential files, policies, and procedures, recommends that medical staff membership and/or clinical privileges be granted as outlined below:

1. Recommendation for **Initial Appointment** to the **Provisional Staff effective March 1, 2024** for the following:

- | | |
|-----------------------------|---------------------------|
| • Mohamed, Omar, Yasser, MD | Internal Medicine |
| • Plotz, Zachary, MD | Teleradiology |
| • Shehata, Mina, MD | Internal Medicine |
| • Moore, Evan, PA | Physician Assistant |
| • Noriega, Christina, FNP | Family Nurse Practitioner |
| • Yomogida, Grace, PA | Physician Assistant |

2. Recommend **Reappointment** effective **March 1, 2024** for the following:

- | | |
|----------------------------|--------------------------------|
| • Anand, Veerinder, MD | Orthopedic Surgery |
| • Hahm, Susan, MD | General Surgery, Wound Care |
| • Kay, Brian, DO | Pathology |
| • Magit, Anthony, MD | Pediatric Otolaryngology |
| • Martin, Andrew, MD | Teleradiology |
| • Tehrani, Benjamin, DPM | Podiatry (Change to Affiliate) |
| • Yao, Yu, MD | Pathology |
| • Garcia, Daniel, CRNA, DP | Nurse Anesthetist |

3. Recommend Request for **Release from Proctoring and Advancement** effective **March 1, 2024:**

- | | |
|---------------------------------|--------------------------|
| • Anugu, Gautam, MD | Internal Medicine |
| • Nguyen, Truc, MD | Internal Medicine |
| • Reyes, Renato, MD | Internal Medicine |
| • Van Pratt Levin, Benjamin, MD | Family Medicine |
| • Crudo, Jeffrey, MD | Internal Medicine/Active |
| • Khayyat, Omar, MD | Internal Medicine/Active |
| • Kohan, James, MD | Internal Medicine/Active |
| • Martinez, Julio, MD | Family Medicine/Active |
| • Papp, Stephan, MD | Internal Medicine/Active |
| • Su, Peter, MD | Family Medicine/Active |
| • Wicomb, Kyle, MD | Internal Medicine/Active |
| • Zhu, Ru, MD | Internal Medicine/Active |

4. Recommend acceptance of the following **Resignations from Staff** effective March 1, 2024:

- | | |
|----------------------------|-----------------------|
| • Karachalios, Michael, MD | Voluntary Resignation |
| • Shrake, Robert, MD | Voluntary Resignation |
| • Castaneda, Patricia, FNP | Voluntary Resignation |
| • Fimbres, Rogelio, FNP | Voluntary Resignation |

5. Recommend acceptance of the following policies/forms:

- Amnioinfusion – (CLN-01249)
- Assessment and Management of a Patient at Risk for Suicide - (CLN-00628)

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- Assessment of Patients in Radiology – (CLN00-512)
- Bone Scintigraphy-WI – (CLN-00776)
- Breastfeeding – (CLN-02501)
- Care of Patient with Burn Injuries – WI – (CLN-00924)
- Colonoscopy or Sigmoidoscopy With or Without Polypectomy – Assisting with (work Instruction) – (CLN-01596)
- Compounding Sterile Preparations – (CLN-02979)
- Criteria for Recovery of Patient in ICU - (CLN-01573)
- CT Safe Injection of Contrast Media – (CLN-00514)
- Emergency Department Care – Vaginal Bleeding in Pregnancy – (CLN-01918)
- Fiberoptic Endoscopes: Care, Cleaning, and High Level Disinfection – (CLN-01618)
- Gallium Scintigraphy – WI – (CLN-00802)
- Gastric Emptying Scintigraphy – (CLN-00804)
- Group B Streptococcal Infection – Neonatal – (CLN-00204)
- Intensive Care Unit Admissions – (CLN-01102)
- Intermediate-NICU Inpatient Visitation (CLN-02522)
- IR Nephrostomy Tube Insertion – (CLN—02621)
- Leaving Against Medical Advice (AMA), Elopement, and Left without Being Seen – (CLN-00025)
- Neonatal Nursery Admission, Transfer, and Discharge Criteria – (CLN-02513)
- NICU Dietician Discharge Planning – (CLN-02512)
- NICU Discharge Planning/Multidisciplinary Rounds – (CLN-02510)
- Nuclear Medicine Technologist Performance Standards – (CLN-00848)
- Patient Skin Antisepsis – (CLN-01559)
- Perioperative Assessment of the Fetal Heart Rate and Uterine Activity in on-obstetric surgery – (CLN-02532)
- Pharmaceutical Services for Neonates in the NICU – (CLN-00295)
- Pneumonia Adult Inpatient Order Set – (MED-00203)
- Pre-Operative Testing/Screening Guidelines for Anesthesia Patients – (CLN-01496)
- Preventing and Managing Wounds – (CLN-00318)
- Radiology Quality Control – (CLN-00589)
- Respiratory Care for Neonatal Patients – (CLN-00294)
- Skin & Soft Tissue Infection Inpatient Order Set – (MED-00209)
- Technologist Requirements for Venipuncture – (CLN-00880)
- Urinary Tract Infection (UTI) Adult Inpatient Order Set – (MED-00206)
- White Blood Cell Scintigraphy – (CLN-00847)
- X-Ray-Abdomen/Pelvis Protocol-WI – (CLN-00504)
- X-Ray Survey Protocol-WI – (CLN-00515)
- X-Ray-Head Anatomical Region Protocol – (CLN-00547)
- X-Ray Lower Extremity Protocol-WI – (CLN-00554)
- X-Ray Spine Anatomical Region Protocol – WI – (CLN-00543)
- X-Ray Thorax Protocol – WI – (CLN-00551)
- X-Ray Upper Extremity Protocol – WI – (CLN-00553)
- X-Ray Urinary Tract Protocol – WI – (CLN-00532)
- Auto-Resolved Laboratory Orders – (LIS-109)
- Massive Blood Transfusion and Massive Transfusion Protocol (MTP) – (TRM-069)
- Admission of Patient to the Operating Room – (CLN-01489)
- Antimicrobial Stewardship Program – (CLN-02971)
- Automatic Stop Orders (ASO) – (CLN-02812)
- Enteral Feeding – (CLN-02130)
- Hazardous Drug Handling – (CLN-03005)
- Home BiPAP/CPAP Use – (CLN-01224)
- Introduction of a New Privilege or a New Privilege for a Specific Department or Specialty – (MSD-00085)
- Medical Staff Consultants – (MSD-00091)
- Medical Staff Professional Conduct – Prohibition of Disruptive or Discriminatory Behavior – (MSD-00095)

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- Medications Brought Into Hospital by Licensed Independent Practitioner (LIP) – (CLN-03012)
 - Patient Self Ordered Testing – (LAD-034)
 - Physician Recommendation for Suspension for Non-Completion of Records – (DPS-00318)
 - Physician Notification of Complaints – (MSD-00100)
 - Practitioner Well Being Committee Guidelines – (MSD-00028)
 - Reporting Adverse Action to the Databank and the Medical Board of California – (MSD-00039)
 - Request for Verification of Expiring License/Registration for Practitioners – (MSD-00029)
 - Therapeutic Interchange Bactroban ® (Mupirocin) Brand Conversion to Mupirocin Ointment (CLN-03010)
 - Family Medicine Privilege Form
6. Ms. Bojorquez – Implementation of Cerner EMR – Ongoing, those present were reminded of the implementation of the new EMR. Go Live Date April 15, 2024. Sent out email to Medical Staff to book training prior to Go Live date.
7. Mr. Bjornberg reported – AB918 New Board established and was sworn-in about 4 weeks ago. New Board met for Healthcare entities to present their financials. A presentation from Avodahmed/AI software for transcription given. The application is customized by practice type and can customize the workflow. The program captures conversations from the provider and patients, it creates an assessment and codes the conversation.
8. The DaVinci Robot project 2-3 weeks of work for Robot. HCAI coming in on Monday, February 26 to approve outlet.
9. Utilization Management (UM)– 2 physicians have been identified, Peter Su, MD Chair and Mehboob Ghulam, MD Vice Chair to lead the UM Committee
10. Clinical Service and Committee Reports:
- Medicine – No meeting was held.
 - Emergency Medicine – A meeting was held.
 - Surgery/Anesthesia/Pathology – No meeting was held.
 - OB/GYN – No meeting was held.
 - Pediatrics – No meeting was held.
 - Medical Imaging – No meeting was held.
 - Ambulatory Services – Ms. Zamora reported Compliance team Survey was a two day survey, they returned last Thursday. It was brought up that there is a separate name for Women Health at Pioneers should be removed, all signage removed under Women's Health Center..
 - Credentials & Bylaws – A meeting was held it was presented at MEC.
 - Utilization Management – No report.

RECOMMENDATION: That Pioneers Memorial Healthcare District Board of Directors approves each of the recommendations of the Medical Executive Committee for medical staff membership and clinical privileges as outlined above, policies and procedures as noted and authorizes the chief executive officer to sign any documents to implement the same.

Respectfully submitted,
Ramaiah Indudhara, MD, MBA, FACS
Chief of Staff
RI/arc

POLICIES FOR APPROVAL AT MEC

	Policy	Policy No.	Page #	Revisions (see policy for full description)
1.	Amnioinfusion	CLN-01249	• 01-04	<ul style="list-style-type: none"> 1.2 added. Reference 6.3 Added.
2.	Assessment and Management of a Patient at Risk for Suicide	CLN-00628	• 05-39	<ul style="list-style-type: none"> Submitted without revisions
3.	Assessment of Patients in Radiology	CLN-00512	• 40-41	<ul style="list-style-type: none"> No Revision
4.	Bone Scintigraphy-WI	CLN-00776	• 42-44	<ul style="list-style-type: none"> Submitted for review without changes
5.	Breastfeeding	CLN-02501	• 45-61	<ul style="list-style-type: none"> Reviewed and submitted without changes
6.	Care of Patient with Burn Injuries – WI	CLN-00924	• 62-68	<ul style="list-style-type: none"> Updated references
7.	Colonoscopy or Sigmoidoscopy With or Without Polypectomy – Assisting With (Work Instruction)	CLN-01596	• 69-71	<ul style="list-style-type: none"> Reviewed and updated references
8.	Compounding Sterile Preparations	CLN-02979	• 72-171	<ul style="list-style-type: none"> Revised Attached C Created new SOP Attachment D & E Changed names of previous attachments to reflect correct alphanumeric order, due to new attachments revisions etc. Removed Attachments I & J, created new attachment R Revised attachment K to remove checkboxes and reflect upcoming USP regulations, attachment was a complete revision Added attachment S Environmental Control and Microbiological Monitoring Plan for Sterile Compounding
9.	Criteria for Recovery of Patient in ICU	CLN-01573	• 172-173	<ul style="list-style-type: none"> None
10.	CT Safe Injection of Contrast Media	CLN-00514	• 174-175	<ul style="list-style-type: none"> No Revision
11.	Emergency Department Care – Vaginal Bleeding in Pregnancy	CLN-01918	• 176-177	<ul style="list-style-type: none"> Updated references

POLICIES FOR APPROVAL AT MEC

12.	Fiberoptic Endoscopes: Care, Cleaning, and High Level Disinfection	CLN-01618	• 178-182	• Reviewed and updated references
13.	Gallium Scintigraphy-Wi	CLN-00802	• 183-184	• None
14.	Gastric Emptying Scintigraphy	CLN-00804	• 185-187	• None
15.	Group B Streptococcal Infection – Neonatal	CLN-00204	• 188-193	• Added Attachment B • Updated references
16.	Intensive Care Unit Admissions	CLN-01102	• 194-196	• None
17.	Intermediate NICU Bioethics and Bioethics Consultation	CLN-02527	• 197-199	• Reviewed and submitted without change
17.	Intermediate NICU Inpatient Visitation	CLN-02522	• 200-209	• Reviewed and submitted without change
18.	IR Nephrostomy Tube Insertion	CLN-02621	• 210-212	• Submitted for review without changes
19.	Leaving Against Medical Advice (AMA), Elopement, and Left Without Being Seen	CLN-00025	• 213-218	• Changed author • Included Compliance, Risk and Case Management as collaborating departments.
20.	Neonatal Nursery Admission, Transfer, and Discharge Criteria	CLN-02513	• 219-223	• Reviewed and submitted without change
21.	NICU Dietician Discharge Planning	CLN-02512	• 224-225	• Submitted for review without changes
22.	NICU Discharge Planning/Multidisciplinary Rounds	CLN-02510	• 226-233	• Reviewed and submitted without change
23.	Nuclear Medicine Technologist Performance Standards	CLN-00848	• 234-246	• None
24.	Patient Skin Antisepsis	CLN-01559	• 247-250	• Added section 3.6 • Updated references
25.	Perioperative Assessment of the Fetal heart Rate and Uterine Activity in non-obstetric surgery	CLN-02532	• 251-254	• New Policy
26.	Pharmaceutical Services for Neonates in the NICU	CLN-00295	• 255	• Reviewed and submitted without change
27.	Pneumonia Adult Inpatient Order Set	MED-00203	• 256-260	• None
28.	Pre-Operative Testing/Screening Guidelines for Anesthesia Patients	CLN-01496	• 261-262	• Changed “primary care physician and cardiologist” to “Licensed Independent Practitioner” in section 5.8

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				<ul style="list-style-type: none"> Added 5.8.3 Updated Reference
29.	Preventing and Managing Wounds	CLN-00318	<ul style="list-style-type: none"> 264-274 	<ul style="list-style-type: none"> Changed author 5.1.6 – added 1st sentence in section and rephrased the rest.
30.	Radiology Quality Control	CLN-00589	<ul style="list-style-type: none"> 275-277 	<ul style="list-style-type: none"> No revision
31.	Respiratory Care for Neonatal Patients	CLN-00294	<ul style="list-style-type: none"> 278-279 	<ul style="list-style-type: none"> Reviewed and submitted without change
32.	Skin & Soft Tissue Infection Inpatient Order Set	MED-00209	<ul style="list-style-type: none"> 280-283 	<ul style="list-style-type: none"> None
33.	Technologist Requirements for Venipuncture	CLN-00880	<ul style="list-style-type: none"> 284-289 	<ul style="list-style-type: none"> None
34.	Urinary Tract Infection (UTI) Adult Inpatient Order Set	MED-00206	<ul style="list-style-type: none"> 290-291 	<ul style="list-style-type: none"> None
35.	White Blood Cell Scintigraphy	CLN-00847	<ul style="list-style-type: none"> 292-294 	<ul style="list-style-type: none"> No revision
36.	X-Ray Abdomen/Pelvis Protocol-WI	CLN-00504	<ul style="list-style-type: none"> 295-296 	<ul style="list-style-type: none"> Submitted for review without changes
37.	X-Ray Survey Protocol-WI	CLN-00515	<ul style="list-style-type: none"> 297 	<ul style="list-style-type: none"> Submitted for review without changes
38.	X-Ray Head Anatomical Region Protocol	CLN-00547	<ul style="list-style-type: none"> 298-299 	<ul style="list-style-type: none"> Submitted for review without changes
39.	X-Ray Lower Extremity Protocols-WI	CLN-00554	<ul style="list-style-type: none"> 300-301 	<ul style="list-style-type: none"> None
40.	X-Ray Spine Anatomical Region Protocol-WI	CLN-00543	<ul style="list-style-type: none"> 302-303 	<ul style="list-style-type: none"> Submitted for review without changes
41.	X-Ray Thorax Protocol-WI	CLN-00551	<ul style="list-style-type: none"> 304-305 	<ul style="list-style-type: none"> Submitted for review without changes
42.	X-Ray Upper Extremity Protocol-WI	CLN-00553	<ul style="list-style-type: none"> 306-307 	<ul style="list-style-type: none"> None
43.	X-Ray Urinary Tract Protocol-WI	CLN-00532	<ul style="list-style-type: none"> 308-309 	<ul style="list-style-type: none"> None
44.	Auto-Resolved Laboratory Orders	LIS-109	<ul style="list-style-type: none"> 310-311 	<ul style="list-style-type: none"> 2-year review; no changes 10/18/2023
45.	Massive Blood Transfusion and Massive Transfusion Protocol (MTP)	TRM-069	<ul style="list-style-type: none"> 312-320 	<ul style="list-style-type: none"> New Policy approved at MARCC 7/11/2023, never completed approval from Dr. Rodriguez. 3.5 added 10/06/2023
46.	Admission of Patient to the Operating Room	CLN-01489	<ul style="list-style-type: none"> 321-324 	<ul style="list-style-type: none"> Added timeframe to 5.1.1.3 Added to section 5.2.4 Updated references
47.	Antimicrobial Stewardship Program	CLN-02971	<ul style="list-style-type: none"> 325-398 	<ul style="list-style-type: none"> Revision of Attachments B, C, D, F, G, H, J, and K

POLICIES FOR APPROVAL AT MEC

48.	Automatic Stop Orders (ASO)	CLN-02812	<ul style="list-style-type: none"> • 399-403 	<ul style="list-style-type: none"> • Removed Meperidine and Aminoglycoside from ASO • Changed Anti-Infectives from 4 day to 7 day hard stop ASO. Revised the note under section 5.2.2 "ALL Anti-coagulants should not be automatically discontinued without first contacting the prescribing physician."
49.	Enteral Feeding	CLN-02130	<ul style="list-style-type: none"> • 404-407 	<ul style="list-style-type: none"> • Updated 5.4.1.2 • Updated 5.4.3 • Eliminated Ensure Enlive -discontinued • Updated 6.3
50.	Hazardous Drug Handling	CLN-03005	<ul style="list-style-type: none"> • 408-487 	<ul style="list-style-type: none"> • Changed to "Annual Review"
51.	Home BiPAP/CPAP Use	CLN-01224	<ul style="list-style-type: none"> • 488-489 	<ul style="list-style-type: none"> • BioMed safety check eliminated. These units operate with a 2-prong outlet, and patient isolated low voltage circuits. BioMed testing equipment is unable to test these.
52.	Introduction of a New Privilege or a New Privilege for a Specific Department or Specialty	MSD-00085	<ul style="list-style-type: none"> • 490-494 	<ul style="list-style-type: none"> • Revised Policy • Changed author • Title change
53.	Medical Staff Consultations	MSD-00091	<ul style="list-style-type: none"> • 495-498 	<ul style="list-style-type: none"> • Author changed
54.	Medical Staff Professional Conduct – Prohibition of Disruptive or Discriminatory Behavior	MSD-00095	<ul style="list-style-type: none"> • 499-505 	<ul style="list-style-type: none"> • Author changed
55.	Medications Brought Into Hospital by Licensed Independent Practitioner (LIP)	CLN-03012	<ul style="list-style-type: none"> • 506-507 	<ul style="list-style-type: none"> • NA
56.	Patient Self-Ordered Testing	LAD-034	<ul style="list-style-type: none"> • 508-510 	<ul style="list-style-type: none"> • Two year review submit without changes
57.	Physician Recommendation for Suspension for Non-Completion of Records	DPS-00318	<ul style="list-style-type: none"> • 511-518 	<ul style="list-style-type: none"> • Revised grammatical errors
58.	Physician Notification of Complaints	MSD-00100	<ul style="list-style-type: none"> • 519-520 	<ul style="list-style-type: none"> • Author Changed
59.	Practitioner Well Being Committee Guidelines	MSD-00028	<ul style="list-style-type: none"> • 521-549 	<ul style="list-style-type: none"> • Complete Revised Policy

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				<ul style="list-style-type: none"> • Change Author
60.	Reporting Adverse Action to the Databank and the Medical Board of California	MSD-00039	<ul style="list-style-type: none"> • 550-553 	<ul style="list-style-type: none"> • Revised policy • Author change
61.	Request for Verification of Expiring License/Registration for Practitioners	MSD-00029	<ul style="list-style-type: none"> • 554-55 	<ul style="list-style-type: none"> • Submitted for review without modifications
62.	Therapeutic Interchange Bactroban® (Mupirocin) Brand Conversion to Mupirocin Ointment	CLN-03010	<ul style="list-style-type: none"> • 556-561 	<ul style="list-style-type: none"> • Submitted for review without revisions

Pioneers Memorial Healthcare District

Title: Per Diem Program		Policy No. HRD-00040
		Page 1 of 2
Current Author: Charity Dale		Effective: 7/1/2007
Latest Review/Revision Date: 11/2/2023		Manual: HR / Compensation

Collaborating Departments: Nursing Admin; Administration		Keywords: per diem		
Approval Route: List all required approval				
MARCC 1/16/2024	PSQC	Other:		
Clinical Service _____	MSQC	MEC	BOD 2/2024	

Note: If any of the sections of your final layout are not needed do not delete them, write "not applicable".

1.0 Purpose:

- 1.1 The Per Diem Program is defined for new and/or existing staff (if approved by department director and based on departments needs) to provide qualified intermittent staff for various positions, and to allow staff to take part in a flexible work schedule.
- 1.2 Per-diem employees fall within a special classification of employees who are paid higher hourly wages than would otherwise be available. These employees receive higher wages in lieu of employer-sponsored benefits that can be waived under state and federal laws.

2.0 Scope: District-Wide**3.0 Definitions:**

- 3.1 BLS – Basic Life Support
- 3.2 ACLS – Advanced Cardiac Life Support
- 3.3 PALS – Pediatric Advanced Life Support
- 3.4 NALS – Neonatal Advanced Life Support
- 3.5 NRP – Neonatal Resuscitation Program

4.0 Policy:

- 4.1 The Per Diem Program is a program by which staff are called upon on an as-needed basis to supplement staffing
- 4.2 Orientation
 - 4.2.1 General orientation must occur prior to beginning Clinical (Unit) Orientation
 - 4.2.2 If an effort to accommodate the various needs of Per Diem staff and recognize the operational needs of the District, 2 Per Diem classes have been developed. The various options are based upon a clinical and non-clinical employee and have different requirements and pay options associated with the class.
- 4.3 Required Experience/Licensure/Certification for Per Diem Nursing Staff
 - 4.3.1 Current California licensure
 - 4.3.2 Current BLS, ACLS, PALS, NALS, NRP, if required by unit
 - 4.3.3 Unit certification or education requirements met, if applicable.
- 4.4 Per Diem One Non-Clinical / Clinical Non-Nursing– 5% Differential added to base rate.
 - 4.4.1 Work a minimum of 2 shifts per pay period.

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Title: Per Diem Program		Policy No. HRD-00040
		Page 2 of 2
Current Author: Charity Dale		Effective: 7/1/2007
Latest Review/Revision Date: 11/2/2023		Manual: HR / Compensation

4.4.2 Work 2 weekend shifts in 2 pay periods.

4.4.3 Work two holidays per year.

4.5 Per Diem Two Clinical – 17.5 % in addition to base rate

4.5.1 At least 2 years' experience in their discipline

4.5.2 Able to float to two or more units.

4.5.3 Work a minimum of 2 shifts per pay period.

4.5.4 Work 2 weekend shifts in 2 pay periods.

4.5.5 Work two holidays per year.

5.0 Procedure:

5.1 All available Per Diem positions must be posted online

5.1.1 Exception: During periods of staffing shortage, directors may offer per diem positions to eligible staff members who are otherwise unable to work regular, full-time positions.

5.2 Fulltime or Part time employees who change their status to Per Diem, will not be allowed to revert their status back to a full or part time for a period of 90 days.

5.3 If an employee changes from regular full or part time status to a per-diem status, the employee shall be treated as terminated as of the date of such change for purposes of reconciling his benefit status ie. PTO payout, medical, dental and vision and COBRA eligibility. Such employee shall be paid those vested benefits, if any, that are payable on termination of full or part time employment status.

5.4 All Per Diem Employees must sign and return the Per Diem Agreement

5.5 Per Diem employees who do not work the number and type of shifts required may be adjusted down and their differentials adjusted accordingly to be paid at their base rate of pay.

5.6 Per Diem Employees who are not scheduled and who do not work for 90 days will be terminated as of the 90th day after their last shift worked.

6.0 References: Not applicable

7.0 Attachment List:

7.1 Attachment A - Per Diem Agreement

8.0 Summary of Revisions:

8.1 Per Diem and requirements adjusted in 1.2 and 4.2.2

8.2 Added 4.4, 4.5, 5.2, 5.3



PER DIEM AGREEMENT

I have reviewed the Per Diem Policy HRD-00040 and understand my scheduling availability and obligations as outlined in the policy.

Please check one below:

_____ Per Diem One: No differential

- Work and/or scheduled a minimum of three shifts in 60 days

_____ Per Diem Two: 10% in addition to base rate

- Work and/or scheduled a minimum of four shifts in 60 days
- Have at least 2 years' experience

_____ (Nursing Only) Per Diem Three: 15% in addition to base rate

- At least 2 years' experience
- Able to float to two or more units* (_____ and _____)
- Work a minimum of 48 hours in four weeks
- Work 24 hours on weekend shift in four weeks
- Work two holidays per year

_____ (Nursing Only) Per Diem Four – 20% in addition to base rate

- At least 2 years' experience
- Able to float to three or more units* (_____, _____, and _____)
- Work a minimum of 72 hours in three weeks
- Work 24 hours on weekend shift in four weeks
- Must work 3 holidays per year, one of which must be a major holiday

Signature of Employee

Date

Signature of Department Director

Date

***Must have required certifications to work designated departments**

Copy of Policy to Employee



HUMAN RESOURCES REPORT: JANUARY 2024

LABOR SUMMARY

November Information

New Hires: 26

Terminations: 18

12 Voluntary, 6 Involuntary

Final Employee Count: 1018

HR UPDATES

PAY SCALES /WAGE ANALYSIS

HR is working with the Nursing Administration and a group of nursing leaders to revamp our Nursing classifications and rates. We are meeting weekly to discuss ideas for a more competitive nursing wage scale as well as a career ladder to retain and attract talent.

New Hire/ Termination Breakdown

SEE ATTACHMENT B

ADP IMPLEMENTATION

Updated Project Schedule attached as Attachment A

TRAINING AND EDUCATION:

We have an offer out to the Training and development Manager and hope to bring them on in the next 2 weeks.

We are updating Competencies and auditing education records in all employee files to ensure compliance before our DNV audit in May.

We recently created a new employee orientation process, which includes a new hire survey. This Survey is being conducted via email to all new employees to capture feedback to help us improve our orientation content and experience.

Employee Health Summary

We had 35 employee COVID illnesses in January (19 in December 25 in November, 24 in October). 25 of the positive employees were reported from our Skilled Nursing Center. No



HUMAN RESOURCES REPORT: JANUARY 2024

clusters identified in Acute Care. We are still pending TB screening compliance for 70 active employees reminder letters sent to employees in December. Reminder discusses at Safety Committee in February. Flu vaccine continues to be offered and encouraged for all healthcare workers. 71% of employees have participated in our flu program (59% of our employees have received flu vaccination; 11.5% have declined flu vaccine; 29.5% have not participated). Reminder emails were sent out during January.

BENEFITS/ LEAVE OF ABSENCE

FMLA/CFRA	30
INTERMITTENT FMLA	19
PERSONAL LEAVE	8
BONDING	4
WORKER'S COMP	9
MILITARY LEAVE	1
COVID	11
COVID W/C	7
SICK LEAVE LESS THAN 2 WEEKS	35

Workers' Compensation Summary

19 employee injuries were reported in January. 5 injuries from acute care, 14 injuries from SNF. Twelve COVID illness, three sharp injuries, one wrist sprain, one foot sprain, one shoulder sprain, one slip and fall. 15 of the injuries resulted in work comp claims to BETA; three injuries received first aid care; one injury required no medical care/reported for tracking purposes.

RECRUITMENT

For the month of January, we have 24 Students and 0 Volunteers

Recruiting for 73 open positions:

Nursing: 35

Clinical Professional (Allied Health) -16

Clinics- 5

Patient Services -8

Support Services -2

Skilled Nursing -7



HUMAN RESOURCES REPORT: JANUARY 2024

Travelers

TRAVELERS			
Department	SHIFT	END DATE	
L & D	DAY	3/2/2024	
L & D	DAY	3/9/2024	
L & D	DAY	6/15/2024	
L & D	DAY	3/17/2024	
L & D	DAY	3/23/2024	
L & D	DAY	5/20/2024	
L & D	NOC	3/9/2024	
L & D	29-Feb		
Med Surg	DAY	5/25/2024	
Med Surg	DAY	5/6/2024	
Med Surg	NOC	4/29/2024	

SERVICE RECOGNITION/ RETENTION

Both PAC and senior leaders are working on a recognition banquet for July, along with several ideas to recognize employees on a monthly basis.

UPCOMING EVENTS:

PAC committee will begin a fund raiser in March to help buy new toys for our daycare center.

ATTACHMENT B

January New Hires

Position	Department	Classification	Status
Chief Executive Officer	Hospital Administration	Full Time	Regular
Clinic RN I	C-WHAP Clinic	Full Time	Regular
Coder I	Medical Records	Full Time	Regular
Dietary Aide - DPNF	Skilled Nursing Care	Full Time	Regular
Dietary Aide - DPNF	Skilled Nursing Care	Full Time	Regular
Medical Assistant I	WHAP	Full Time	Regular
NICU Nurse Manager	Neo-Natal ICU	Full Time	Regular
PA Follow Up Clerk	Patient Accounting	Full Time	Regular
PA Follow Up Clerk	Patient Accounting	Full Time	Regular
Physical Therapist Staff	Physical Therapy	Full Time	Regular
Professional Billing Mgr	Clinics Admin center	Full Time	Regular
Radiologic Technologist	Radiology Diagnostic	Full Time	Regular
RN - DPNF	Skilled Nursing Care	Full Time	Regular
RN I	Emergency Room	Full Time	Regular
RN I	LDRP	Full Time	Regular
RN I	Medical/Surgical	Full Time	Regular
RN I	ICU	Full Time	Regular
RN I	Medical/Surgical	Full Time	Regular
RN I	Medical/Surgical	Part Time	Per Diem
RN I	Surgery & Recovery	Part Time	Per Diem
RN I	Surgery & Recovery	Part Time	Regular
RN I	Medical/Surgical	Part Time	Seasonal
RN Permittee	Emergency Room	Full Time	Regular
RN Permittee	Medical/Surgical	Full Time	Regular
RN Permittee	Emergency Room	Full Time	Regular
Teacher (Day Care)	Child Care	Part Time	Regular

January Terminations

Department	Classification	Length Of Service	Departure Status
Admitting	Full Time	0.3	Involuntary Termination
C-WHAP Clinic	Full Time	0.0	Involuntary Termination
Inhalation Therapy	Full Time	32.4	Voluntary Resignation
IVC Grant	Part Time	8.9	Voluntary Resignation
LDRP	Part Time	1.0	Voluntary Resignation
LDRP	Full Time	0.8	Voluntary Resignation
Medical/Surgical	Full Time	0.5	Voluntary Resignation
Medical/Surgical	Part Time	0.1	Voluntary Resignation
Nursing Administration	Part Time	0.3	Voluntary Resignation
Patient Accounting	Full Time	1.9	Voluntary Resignation

REGULAR MEETING OF THE BOARD OF DIRECTORS - V. POLICIES/PROCEDURES/REVIEW OF OTHER ITEMS

Patient Accounting	Full Time	0.9	Voluntary Resignation
Radiology Diagnostic	Full Time	18.8	Involuntary Termination
Radiology Diagnostic	Full Time	31.1	Involuntary Termination
Radiology Diagnostic	Full Time	21.1	Involuntary Termination
Radiology Diagnostic	Full Time	17.3	Voluntary Resignation
Radiology Diagnostic	Part Time	1.8	Voluntary Resignation
Skilled Nursing Care	Full Time	0.7	Involuntary Termination

TRAVELERS

Department	SHIFT	END DATE	
L & D	DAY	3/2/2024	
L & D	DAY	3/9/2024	
L & D	DAY	6/15/2024	
L & D	DAY	3/17/2024	
L & D	DAY	3/23/2024	
L & D	DAY	5/20/2024	
L & D	NOC	3/9/2024	
L & D	29-Feb		
Med Surg	DAY	5/25/2024	
Med Surg	DAY	5/6/2024	
Med Surg	NOC	4/29/2024	

ATTACHMENT A

Date: 2/17/24 Company Name: Pioneers Memorial Healthcare Dual Maintenance began on 2/26. All new hires and changes created to all employee file are being tracked/maintained in ADP & UKG		
Tasks	Target Date	Owner
Submit Employee data files to Data Services for conversion	19-Feb	Jeff
Convert EE data files	Week of 2/19	Data Services
Confirm how checks/direct deposits/wage garnishments will be handled	Week of 2/19	Charity/Maria
Provide Request General Ledger info	Week of 2/19	Client
Advantage Follow-up call	Week of 2/19	John/Client
Provided converted employee data files to Client Team to review and confirm	By 2/23	Jeff
Review and confirm the converted files are complete and accurate	By 2/27	Charity/Juan
Give Data Services green light to move forward with upload of converted EE data files	By 2/29	Jeff
Data Services completed upload of EE data to WFN	By 3/5	Data Services
Benefits Review call	Week of 2/26	Alisha/Charity/Juan/ Estella
Sign off on Tax and Banking documents	Week of 2/26	Charity/Carly L
Provide GL Mapping Document	Week of 2/26	Jay
Payroll Validation and Learning call	Week of 3/4	Jeff/Charity/Payroll
Benefit Employee Dependent Import	Week of 3/4	Alisha/Charity/Juan/ Estella

Time off Analysis	Week of 3/4	Shamari/Charity
Validate all employee data is accurate and complete	Week of 3/11	Juan/Charity
Import sample API file from a prior payroll/process preview	Week of 3/11	Jeff/Juan/Charity
Employee Benefit Eligibility class Import	Week of 3/11	Alisha/Charity/Estella
Return GL Mapping Document	Week of 3/11	Juan/ Maria/Brianda
ADP Advantage Manager Training session	TBD	John/Charity
Benefit Employee Enrollment Import	Week of 3/18	Alisha/Charity/Estella
Provide YTD Balances	22-Mar	Data Services/Charity/Kim
Provide Time off balances	22-Mar	Juan/Charity/Kim
Benefit Validation	Week of 3/25	Alisha/Charity/Estella
Process first live payroll	3-Apr	Jeff/Charity/Payroll
Complete Recruitment Training	Week of 4/8	Charity/Marselle/Generlaists
Complete Onboarding Training	Week of 4/15	HR Team
Analytics and Utilization Scorecard Review	Week of 4/15	John/Charity
Recruitment Walkthrough	Week of 4/22	Alisha/Charity/Marselle/Generalists
Complete Performance Training	Week of 4/22	Charity/Kim/Estella
Onboarding walkthrough	Week of 4/29	Alisha/Charity/HR Team
Complete Document Cloud Training	Week of 4/29	HR Team
Performance Walkthrough	Week of 5/6	Alisha/Charity/Kim
Complete Compensation Management Training	Week of 5/13	Charity/Kim/Estella
Compensation Walkthrough	Week of 5/27	Alisha/Charity/Kim/Estella
Configure ACA settings	June	Alisha/Charity/Estella
Setup ACA measurement periods	June	Alisha/Charity/Estella
Run Employee ACA benefit status report if any employees are missing a status, we can import them into ADP WFN	June	Alisha/Charity/Estella
Review ACA report and answer any questions or concerns.	June	Alisha/Charity/Estella

Additional items - pending details		
Process first live payroll	Week of 3/25	
Complete Recruitment Training	Week of 4/8	
Complete Onboarding Training	Week of 4/8	
Analytics and Utilization Scorecard Review	Week of 4/15	
Recruitment Walkthrough	Week of 4/15	
Complete Performance Training	Week of 4/22	
Onboarding walkthrough	Week of 4/22	
Complete Document Cloud Training	Week of 4/29	
Performance Walkthrough	Week of 4/29	
Complete Compensation Management Training	Week of 5/6	
Compensation Walkthrough	Week of 5/13	
Configure ACA settings	Week of 5/27	
Setup ACA measurement periods	June	
Run Employee ACA benefit status report if any employees are missing a status, we can import them into ADP WFN	June	
Review ACA report and answer any questions or concerns.	June	

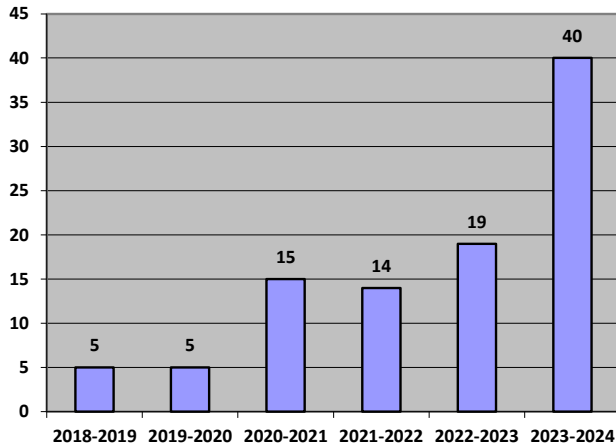


Workers' Compensation Scorecard

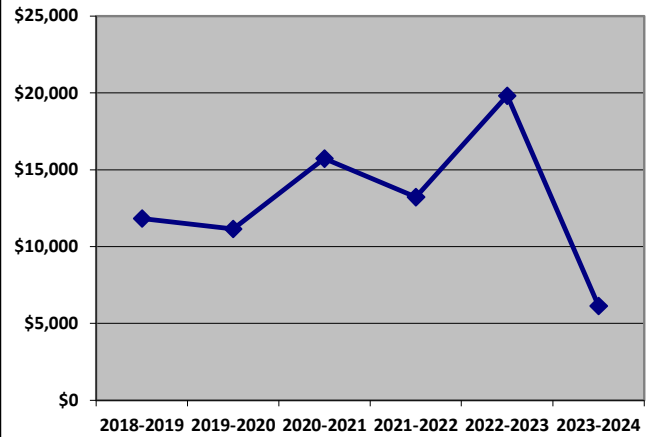
January 2024

Pioneers Memorial Healthcare District

Open Claims by Fiscal Year



Avg Cost Per Claim



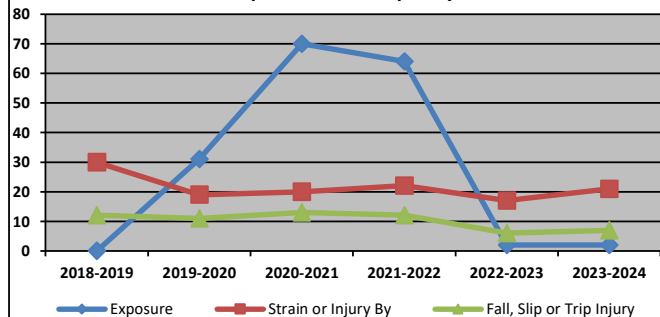
Claim Activity by Month

Month	Current Fiscal Year		Last 5 Years
	Count	Closed	
Jul	15	9	3
Aug	7	6	6
Sep	12	12	5
Oct	12	5	10
Nov	10	6	11
Dec	12	5	8
Jan	15	-	9
Feb	-	-	-
Mar	-	-	-
Apr	-	-	-
May	-	-	-
Jun	-	-	-
Total 2023-2024	83	43	52

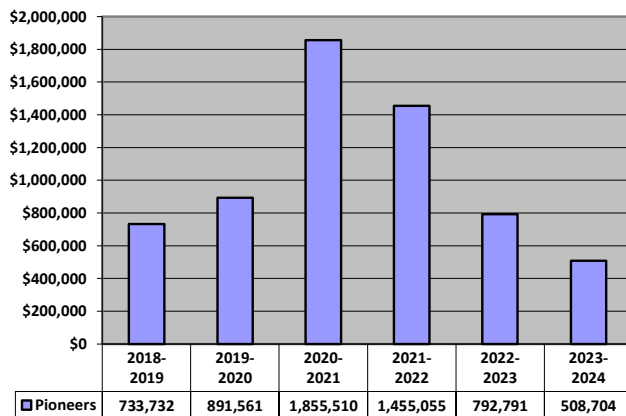
Cause of Injury by Claim Type

Cause of Injury by Claim Type	Dating Back to Fiscal Year 2018-2019	
	Indem	Medical
Strain or Injury By	22.6%	37.2%
Fall, Slip or Trip Injury	8.6%	24.0%
Strain or Injury By	22.6%	37.2%
Struck or Injured By	2.2%	5.8%
Exposure	45.4%	0.0%
All Other	-1.3%	-4.1%

Top 3 Causes - Frequency



Incurred Losses by Year



Ex Mod History

