

MEETING NOTICE

Governing Board

A regular meeting of the Board of Directors of the Southern Humboldt Community Healthcare District will be held on June 26, 2025, at 1:30 p.m., by teleconference and in-person. Members of the public may participate virtually via Webex or telephone, or appear in person at the Sprowel Creek Campus at 286 Sprowel Creek Road, Garberville, California 95542.

Call-In Information: Join by phone +1-415-655-0001 US Toll

Webex Link:

<https://shchd.webex.com/shchd/j.php?MTID=m65c1024281b4ef67076bbe032ec5f0d9>

Written comments may also be sent to boardcomments@shchd.org. Comments received no later than two hours prior to the start of the meeting will be provided to the Board or may be read aloud or summarized during the meeting. Members of the public may also comment in real time during the meeting by attending in person or via Webex or phone.

Agenda

Page

Item

- A. Call to Order
- B. Approval of the Teleconferencing of a Board Member
- C. Approval of the Agendas
- D. Public Comment on Non-Agendized Items
See below for Public Comment Guidelines
- E. Board Member Comments
Board members are invited to address issues not on the agenda and to submit items within the subject jurisdiction of the Board for future consideration. Please limit individual comments to three minutes.
- F. Announcements
- G. Consent Agenda – See Consent Agenda Packet

1. Approval of Previous Minutes
 - a. Special Governing Board Meeting May 23, 2025
 - b. Governing Board Meeting, May 29, 2025

2. SHCHD New and Updated Policies

Compliance:

- a. Preventing, Identifying, and Reporting Abuse

Infection Prevention:

- b. Authority Statement

Hospital Pharmacy:

- c. General Medication Room Operations

Nursing:

- d. Prescription Medication Refill

Radiology:

- e. Portable Radiography
- f. Quality Assurance (X-ray)
- g. General Safety in Radiology
- h. Corrective Action
- i. Quality Assurance Personnel

Optometry:

- j. Comprehensive Eye Exam
- k. Billing and Coding
- l. Contact Lens Fit, Training
- m. Diabetic Eye Exam
- n. Glaucoma Eye Exam
- o. Opticianry
- p. Refraction Only Exam
- q. Gland Expression
- r. Foreign Body Removal
- s. Infant and Child Eye Exam

Payroll:

- t. On-Call and Call-Back

IT:

- u. Information Technology Manual

HIM:

- v. Guidelines for Medical Record Entries
- w. Chart Organization, Maintenance, and Scanning

Lab:

- x. Laboratory Orders and Specimens
- y. Confidentiality in the Laboratory

- z. Laboratory Test Results
 - aa. Blood Banking and Transfusion Services
 - bb. Laboratory Quality Control
 - cc. Laboratory Facilities, Environment, and Safety
 - dd. Competency Assessment of Laboratory Personnel
3. Quarterly Reports - (Feb, May, Aug, Nov) – None
- a. Quality and Risk Management – Kristen Rees, Chief Quality and Compliance Officer and Risk Manager
 - b. Human Resources – Season Bradley Koskinen, HR Manager
 - c. Foundation – Chelsea Brown, Outreach Manager
 - d. Operations – Kent Scown, Chief Operations Officer

Approval of Consent Agenda

- H. Last Action Items for Discussion
- 1. Appointment and Swearing in of a New Board Member to Fill the Remaining Period Ending December 4, 2026
 - 2. Update on the Redwood Drive Properties and Approval of Revised Budget.
 - 3. Scheduling of Annual Board Quality and Compliance Training – Kristen
 - 4. Public Response to Theracon Comment Update
- I. Correspondence, Suggestions, or Written Comments to the Board
- J. Administrator's Report – Matt Rees, CEO
- 1. Department Updates
 - a. Milestones
 - b. July Employee Anniversaries – Pharmacy Technician Aditi Sharma, Occupational Therapist Katelyn Pagano, and Dr. Seth Miskin OD have reached their 1-year anniversary, and Laboratory Manager Adam Summers has reached his 5-year anniversary.
 - c. Approval of the May Financials and May 20, Finance Minutes – Paul Eves - See Report
 - d. CNO Report – Adela Yanez – See Report
 - e. Quality and Risk Management – Kristen Rees – Not Received
 - f. Family Resource Center – Amy Terrones – Mar and Oct - None

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K. Old Business - None

L. New Business

1. Presentation and Approval of the 2026 Fiscal Year Budget

M. Parking Lot

1. Sprowel Creek Campus parking

N. Meeting Evaluation

O. New Action Items

P. Next Meetings

1. Medical Staff Committee – Thursday, July 10, 2025, at 12:30 p.m
2. Medical Staff Policy Development Committee – Tuesday, July 15, 2025, 10:00 a.m
3. QAPI Meeting – Wednesday, July 9, 2025, at 10:00 a.m.
4. Finance Committee – July 25, 2025, at 10:00 a.m.
5. Governing Board Meeting – July 31, 2025, at 1:30 p.m.

Q. Adjourn to Closed Session

1. Closed Session
2. Update on Peer Review, Credentialing, and Appointment/Reappointments – Medstaff
3. Clinic Provider Credentialing List
4. Reports of Quality Assurance Committees [**H&S Code § 32155**]
5. Compliance and Risk - Kristen Rees, CQO
6. Quarterly Reports - Adela Yanez, CNO –
 - a. Patient Safety – Mar., June, Sept., Dec. See Report
 - b. Medication Error – Feb., May, Aug., Dec.
7. Approval of Medical Staff Appointments/Reappointments [**H&S Code § 32155**]
 - a. **Dr. Pierre Lanthiez, MD** Initial credentialing as Provisional status Teleradiology - Diagnostic Radiology privileges July 1, 2025 – June 30, 2026.
 - b. **Dr. Arun Kumar, MD** Initial credentialing as Provisional status Teleradiology - Diagnostic Radiology privileges July 1, 2025 – June 30, 2026.
 - c. **Dr. Clarence Davis III, MD** Initial credentialing as Provisional status for Teleradiology - Diagnostic Radiology privileges July 1,

2025 – June 30, 2026.

- d. Dr. **Michael Benanti, DO** Initial credentialing as Provisional status for Teleradiology - Diagnostic Radiology privileges July 1, 2025 – June 30, 2026.
- e. Dr. **Christian Joseph Ingui, MD** Reappointment as Active status Teleradiology - Diagnostic Radiology privileges August 1, 2025 – July 31, 2027.
- 8. Personnel Matter –Evaluation § 54957
 - a. CQCO Kristen Rees
 - b. Update on Previous Review and New Review Documents

R. Adjourn Closed Session; Report on Any Action Taken, If Needed

S. Resume Open Session

T. Adjourn

Abbreviations

<i>ACHD</i>	Association of California Healthcare Districts	<i>ACLS</i>	Advanced Cardiac Life Support Certification
<i>AR</i>	Accounts Receivable	<i>BLS</i>	Basic Life Support Certification
<i>CAIR</i>	California Immunization Registry	<i>CEO</i>	Chief Executive Officer
<i>CFO</i>	Chief Financial Officer	<i>CMS</i>	Centers for Medicare and Medicaid Services
<i>CNO</i>	Chief Nursing Officer	<i>COO</i>	Chief Operating Officer
<i>CPHQ</i>	Certified Professional in Healthcare Quality	<i>CQO</i>	Chief Quality and Compliance Officer
<i>EMR</i>	Electronic medical record	<i>ER</i>	Emergency Room
<i>FTE</i>	Full Time Equivalent/Full Time Employee	<i>HIM</i>	Health Information Management
<i>HRG</i>	Healthcare Resource Group	<i>HVAC</i>	Heating, Ventilation and Air Conditioning system
<i>IGT</i>	Intergovernmental transfer	<i>IT</i>	Information Technology
<i>JPCH</i>	Jerold Phelps Community Hospital	<i>LCSW</i>	Licensed Clinical Social Worker
<i>LVN</i>	Licensed Vocational Nurse	<i>MPH</i>	Master of Public Health
<i>OBS</i>	Observation	<i>PALS</i>	Pediatric Advanced Life Support Certification
<i>PFS</i>	Patient Financial Services	<i>QAPI</i>	Quality Assurance Performance Improvement
<i>QIP</i>	Quality Improvement Project/Program	<i>RN</i>	Registered Nurse
<i>SHCC</i>	Southern Humboldt Community Clinic	<i>SHCHD</i>	Southern Humboldt Community Healthcare District
<i>SNF</i>	Skilled Nursing Facility	<i>SWG</i>	Swing beds
<i>DO</i>	Doctor of Osteopathic Medicine		

PUBLIC COMMENT ON MATTERS NOT ON THE MEETING AGENDA: Members of the public are welcome to address the Board on items not listed on the agenda and within the jurisdiction of the Board of Directors. The Board is prohibited by law from taking action on matters not on the agenda, but may ask questions to clarify the speaker's comment and/or briefly answer questions. The Board limits testimony on matters not on the agenda to three minutes per person and not more than ten minutes for a particular subject, at the discretion of the Chair of the Board.

PUBLIC COMMENT ON MATTERS THAT ARE ON THE AGENDA: Individuals wishing to address the Board regarding items on the agenda may do so after the Board has completed their initial discussion of the item and before the matter is voted on, so that the Board may have the

benefit of these comments before making their decision. Please remember that it is the Board's responsibility to discuss matters thoroughly amongst themselves and that, because of Brown Act constraints, the Board meeting is their only opportunity to do so. Comments are limited to three minutes per person per agenda item, at the discretion of the Chair of the Board.

OTHER OPPORTUNITIES FOR PUBLIC COMMENT: Members of the public are encouraged to submit written comments to the Board at any time by writing to SHCHD Board of Directors, 733 Cedar Street, Garberville, CA 95542. Writers who identify themselves may, at their discretion, ask that their comments be shared publicly. All other comments shall be kept confidential to the Board and appropriate staff.

IN COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT, if you require special accommodations to participate in a District meeting, please contact the District Clerk at 707-923-3921, ext. 1276 at least 48 hours prior to the meeting."

**Times are estimated*

COPIES OF OPEN SESSION AGENDA ITEMS: Members of the public are welcome to see and obtain copies of the open session regular meeting documents by contacting SHCHD Administration at (707) 923-3921 ext. 1276 or stopping by 291 Sprowel Creek Rd, Garberville, CA 95542 during regular business hours. Copies may also be obtained on the District's website, sohumhealth.org.

Posted June 20, 2025

“For many years, the Southern Humboldt Community Healthcare District has contracted with a Eureka-based company, Ther-a-Con, to provide physical therapy services in Southern Humboldt. Throughout this time, Martje VanWerkum-Glidden and her company have served our local patients well, offering a range of rehabilitation services for patients recovering from surgery, injury, and illness. SoHum Health is extremely grateful to have had this relationship in place. As part of our contractor agreement, SoHum Health provided space to Martje’s company rent-free, we provided commute time wages, mileage reimbursements, and we have collected no revenue for Ther-A-Con outpatient services offered at our location. We only billed for inpatient physical therapy (PT) charges provided to our Acute care patients.

In 2024, a new law was passed requiring hospitals, including Jerold Phelps Community Hospital, to have a physical therapist on staff for inpatient care. Happily, we were able to hire lifelong local Sierra Earley, PT, DPT, to come on board in a staff position. Now that SoHum Health has a physical therapist on staff, we can generate revenue for the services we now provide, and we are working to expand our team soon.

The Southern Humboldt Community Healthcare District remains loyal to our contractor, Martje, after all her years of service. In an act of good faith, she was offered a staff position at our organization. We have also offered to continue to provide the space at Jerold Phelps Community Hospital free of charge for Martje to offer her services through Ther-a-Con.

Due to the new legal requirements for Acute care facilities, we would like to inform the community and explain the Healthcare District’s decision to offer Physical Therapy Services from licensed therapists who have joined our staff team.”

Southern Humboldt Community Healthcare District
SoHum Income Statement
May 2025

Financial Row	Amount
Revenue	
Gross Patient Revenue	
Inpatient	\$303,060
Inpatient Ancillary	\$52,547
Outpatient	\$1,920,834
Outpatient Ancillary	\$799,758
Total Patient Revenue	\$3,076,199
Deductions from Revenue	
9060-913 - Supplemental Revenue	(\$1,392,805)
Contractual Allowances	\$865,597
Provision for Bad Debts	\$94,988
Other Allowances / Deductions	\$11,839
Cost Of Sales	\$0
Total Deductions	(\$420,381)
Net Patient Revenue	\$3,496,580
Other Operating Revenue	\$526,525
Total Operating Revenue	\$4,023,105
Expenses	
Salaries & Wages	\$957,918
Employee Benefits	\$428,048
Professional Fees	\$479,785
Supplies	\$450,549
Repairs & Maintenance	\$16,074
Purchased Services	\$127,429
Utilities	\$10,542
Insurance	\$18,539
Depreciation/ Amortization	\$61,038
Other	\$225,377
Total Operating Expenses	\$2,775,299
Operating Profit (Loss)	\$1,247,806
Tax Revenue	\$97,260
Other Non Operating Revenue (Expense)	\$177,254
Interest Income	(\$25)
Net Non Operating Revenue (Expense)	\$274,489
Net Income (Loss)	\$1,522,295

Southern Humboldt Community Healthcare District
SoHum Balance Sheet
End of May 2025

Financial Row	Amount
Assets	
Current Assets	
Cash - Checking & Investments	\$5,374,995.51
Patients Accounts Receivable (Net of Contractual Allowances)	\$6,183,650.94
Other Receivables	\$3,891,096.96
Inventories	\$727,970.46
Prepaid Expenses and Deposits	\$1,120,329.11
Total Current Assets	\$17,298,042.98
Property and Equipment	
Land	\$1,193,526.09
Land Improvements	\$553,251.44
Buildings	\$5,720,831.33
Equipment	\$8,411,269.98
Construction in progress	\$13,913,858.54
Less: Accumulated Depreciation	(\$9,670,111.15)
Net Property and Equipment	\$20,122,626.23
Total Assets	\$37,420,669.21
Liabilities & Fund Balance	
Current Liabilities	
Accounts Payable	\$304,902.32
Accrued Payroll & Related costs	\$954,973.12
Other Current Liabilities	
Deferred Revenue IGT	\$368,438.53
Loans & Current Portion of Lease Obligations	\$122,529.00
Reimbursement/Settlement	(\$265,298.71)
Other	
Accrued Purchases	\$6,516.36
Other Current Liabilities	\$6,516.36
Total Other Current Liabilities	\$232,185.18
Total Current Liabilities	\$1,492,060.62
Long Term Debt, Less Current Portion	
LEAF Data Backup Liability	(\$94.99)
Maple Lane Loan	\$195,197.01
ELGA Lease Loan	
2250-030 - ELGA Lease Loan	\$1,774,806.56
Total - ELGA Lease Loan	\$1,774,806.56
CHFFA Help II Loan	\$1,829,893.42
Lease Obligations	\$236,003.00
Net Long Term Debt	\$4,035,805.00
Equity	
Unrestricted Fund Balance - Prior Years	\$2,830,961.19
Retained Earnings	\$26,046,361.08
Net Income	\$3,015,481.32
Total Fund Balance	\$31,892,803.59
Total Liabilities & Fund Balance	\$37,420,669.21

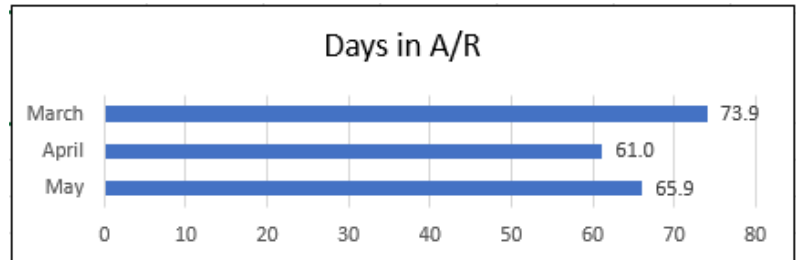
Southern Humboldt Community Healthcare District May 2025

EPIC

Overall A/R Health

- Overall AR:** Days in A/R increased 4.9 days. [-2.2 (Unbilled*) -0.3 (Self-Pay**) +7.5 (3rd-party***)]
- SoHum Target: **55 Days** April days in A/R: **65.9**

Total AR by Financial Class	May Total	April Total	Overall Decrease/Increase
Blue Cross	252,247.21	172,347.19	79,900.02
Blue Shield	206,192.85	150,985.17	55,207.68
Commercial	272,965.62	264,496.75	8,468.87
Medicaid	2,072,743.33	2,057,318.59	15,424.74
Medicare	2,208,138.22	1,800,409.79	407,728.43
Other	2,296.82	1,624.30	672.52
Self-Pay	1,356,186.46	1,364,688.84	(8,502.38)
Tricare	94,795.15	52,284.64	42,510.51
Worker's Comp	87,552.20	62,506.28	25,045.92
Undistributed	(61,733.07)	(25,642.82)	(36,090.25)
Grand Total	6,491,384.79	5,901,018.73	590,366.06



- **Self-Pay:** Self-pay decreased 0.3 days from April, we are reviewing potential opportunities to increase self-pay collections and reduce A/R including a review of the current payment plan policy.
- ***Third-Party (Insurance):** The outstanding issues mentioned as roadblocks below continue to contribute to the increase in this category. We continue to prioritize high dollar aged accounts and are actively working with payers on the roadblocks below.

Roadblocks

- Third-Party A/R:** In May, A/R increased across all payers. Although we haven't yet identified a specific cause for the increase we will begin weekly progress tracking in our revenue cycle calls. We hope to identify trends with that analysis which will help correct the days in A/R back to target.
- Anthem Issue:** We are almost complete with the Anthem repayment issue.
Original total: ~\$447,000 Remaining balance: ~\$5,230

Centriq

Overall A/R Health

We continue to successfully decrease Centriq AR balances. We are in the process of issuing refunds for remaining credit balances. 3rd Party AR at zero as expected. Could consider moving remaining payment plans into Epic.

Remaining A/R	May	April
3rd Party Payer	0.00	2,918.06
Self Pay	3,617.36	4,503.45
Totals	3,617.36	7,421.51



Finance Committee

Date: Friday, May 23, 2025

Time: 10:00 a.m.

Location: Sprowel Creek Campus-Rm 105 and via Webex

Facilitator: Governing Board President Corinne Stromstad

Minutes

Finance Committee Present: CEO Matt Rees (Webex), Kevin Church, and Corinne Stromstad

Not Present: None

Also Present: Administrative Assistant Darrin Guerra, PFS Manager Marie Brown, CFO Paul Eves, and PFS Lead Dustin Cunningham

By Webex: CEO Matt Rees and HIM Manager Remy Quinn

A. Call to Order – Kevin Church called the meeting to order at 10:03 a.m.

B. Public Comment (3-minute limit per person) – None

C. Announcements - None

D. Previous Meeting Minutes

1. Minutes from Friday, February 25, 2025

Motion: Corinne Stromstad moved to approve the February 25th, 2025, Finance Minutes.

Second: Kevin church

Motion Carried

E. Discussion and Review

1. Financials – Paul Eves, CFO

- Paul shared the March and April Income and Balance Sheets with the Board.

2. April 2025 HRG Report – Marie Brown, PFS Manager

- Marie shared the HRG report with the Committee.

F. Discussion Items to Report to the Board –

1. The February Financials will be submitted to the Governing Board for approval.
2. The Board has requested that the Admin team create a report indicating the approved budget and our current cost analysis for the Redwood Drive Properties.
3. Additionally, they would like a benefit analysis of the District's rental properties, detailing our expenses and savings.

G. Next Meeting: Friday, June 20, 2025.

H. Adjourned at 10:33 a.m.

Infection Prevention:

As of May 1, we are pleased to announce that the requirement for mandatory masking within the Acute Skilled Nursing Facility (SNF) and across the hospital and clinic has been lifted. This decision aligns with the latest CDC and county guidelines following the conclusion of the flu season. The Infection Prevention Department remains steadfast in its commitment to maintaining the highest safety standards. We achieve this through regular hand hygiene surveillance, compliance audits with transmission-based isolation precautions, and the facilitation of ongoing meetings for the Infection Prevention Committee (IPC) and antibiotic stewardship.

Emergency Department/Acute Care:

In May, our Emergency Department (ED) skillfully managed the care of 348 patients, including eight swing-bed patients and ten inpatient admissions. We are proud to report an expansion in our capacity for swing-bed patients, and we now have the necessary nursing staff to care for over five acute patients effectively. Our staffing model, which includes one registered nurse (RN) and one licensed vocational nurse (LVN) for each shift, ensures that we meet the required nurse-to-patient ratio standards.

Our unwavering commitment to providing exceptional care is complemented by our efforts to create a supportive environment for patients needing external medical care during their recovery.

Laboratory:

Adam, our laboratory manager, reports that the “laboratory is actively pursuing several important initiatives:

- Sustainability Efforts:

We are making notable progress in our sustainability initiatives, which involve cross-training staff, documenting processes, and expanding the roles and responsibilities of our laboratory personnel. Each team member is enthusiastically engaged in enhancing their skills and capabilities.

- Accreditation Change:

The presurvey conducted on April 10 with our new accrediting agency, ACHC, yielded encouraging results. We look forward to the formal survey scheduled for June 18 and 19, and we are diligently preparing to ensure a favorable outcome.

- New Testing for Spinal Fluid:

We are well-equipped with the necessary tools and reagents for conducting cerebrospinal fluid (CSF) cell counts, glucose, protein, and cultures. We are currently developing protocols that incorporate simulated patient testing methodologies.

- New Testing for Blood Cultures:

Our Laboratory is fully prepared for blood culture testing, and finalized protocols are in place. Although the electronic medical record (EMR) test build is progressing at a measured pace, our collaboration with SoHum, OCHIN, and Quest experts is proving fruitful.

- New Testing for Carboxyhemoglobin:

We have identified a qualified vendor and analyzer, and initial cost comparisons appear promising. We are preparing a proposal for administrative review.

- Chain-of-Custody Process:

We are committed to upholding compliance by proactively identifying all submitters (such as local employers) with past or existing relationships with the district. This approach ensures that our services remain contemporary and aligned with established standards.

-EDSP Support:

The Laboratory is dedicated to enhancing testing and case management related to the EDSP grant, which focuses on screening adults in the ED for HIV, hepatitis C, and syphilis. We are collaborating with the CDPH to adopt best-practice workflows for the Epic EMR, drawing insights from the experiences of other EDSP grant recipients.

- Rural MOUD (Buprenorphine) Study:

The Laboratory has completed its preparations for the study and is poised to provide essential lab services to participants.”

Skilled Nursing:

Katherine has accepted the Director of Nursing (DON) role at the Skilled Nursing Facility (SNF) and is diligently preparing for the upcoming survey process. This preparation includes thoroughly reviewing our procedures, documentation, care plans, and reporting requirements. Katherine has implemented quarterly care conferences to enhance resident care, goals, and progress communication. These conferences have benefited residents, their families, and caregivers in addressing challenges and planning necessary adjustments.

Feedback from residents and their families has been overwhelmingly positive, with many expressing gratitude for the opportunity to engage directly with their care teams. The care conferences involve professionals from therapy (PT/OT), licensed clinical social work (LCSW), activities, nursing, and dietary services if requested. It is important to note that these conferences are separate from our Interdisciplinary Team (IDT) meetings.

Katherine aims to improve the efficiency and patient-centered focus of both meeting formats.

Recently, the activity director participated in a district-sponsored training course for activity leaders. This course provided valuable insights into California's regulatory requirements, including program development, leadership, management skills, documentation standards, and quality expectations for our activity initiatives. Recent activities for residents have included weekly movie nights, group dice games, a pizza party, an egg-decorating event, and an excursion to the Eureka Zoo. Our resident census is eight, with no beds available currently. The Skilled Nursing Facility remains committed to providing exceptional care and serving our community. Our dedicated nursing staff is focused on delivering high-quality care, creating an environment where residents can thrive and engage fully in life. Daily activities are thoughtfully organized to keep residents

active and involved, and we are reviewing the waiting list to welcome the next resident into our SoHum family and the SNF community.

Clinic:

Shawna, our clinic manager, reports that the SoHum team is diligently working to secure enrollments with various insurance companies and payers for our providers. She is pleased to announce that our waiting list for new patients has significantly decreased from over 200 to 80. A few weeks ago, the clinic saw the first patient as part of the clinical trial, and the clinic committed to further enhancing our visiting nurse program.

One new Medical Assistant (MA) is transitioning from Patient Financial Services (PFS) to our clinic.

Additionally, our behavioral health department is set to begin seeing Medicare and Skilled Nursing Facility (SNF) patients in the clinic, collaborating with SLS and the clinical trial team. We also engage with other departments, such as Health Information Management (HIM), Skilled Nursing Facility (SNF), and SWING, to refine our visit documentation and medication management workflows.

Our clinic is fully staffed, featuring Dr. Murphy, Dr. Rasoni, Linda Candiotti (Physician Assistant), and Heather Grant (Family Nurse Practitioner). Please note that our ongoing efforts to enroll additional providers with various insurance companies and payers may temporarily limit some providers to specific patient groups. We appreciate your understanding during this transitional period, and we assure you that you will be attended to by one of our experienced and qualified providers. Remembering that a patient's insurance may influence the assigned provider is also essential.

Our new patient navigator is progressing well in his training and is ready to assist with any MyChart-related concerns. Furthermore, we are thrilled to announce that Linda Candiotti has decided to postpone her retirement, allowing her to continue making invaluable contributions to our community through June, with the possibility of an extension. Dr. Murphy has thoughtfully agreed to extend his tenure by six months and is considering a more permanent role with our team.

We are excited to report the successful operation of our optometry mobile unit. With our entire staff now in place, we look forward to promptly addressing the waiting list for new patients.

Radiology: In May, the Radiology department conducted 184 X-ray exams, 87 CT scans, 19 ultrasounds, and 23 mammograms. To ensure optimal performance, we have scheduled preventative maintenance for our ultrasound equipment in May. Additionally, our physicist will conduct annual surveys on the CT and mammography systems.

Pharmacy:

Our pharmacist PJ reports that the inpatient pharmacy collaborates with local schools to establish an immunization clinic. Additionally, I am working with the team to assess our daily storage and weekly inventory requirements. We are also processing ongoing JIRAs with OCHIN to ensure Epic functions correctly. Our responsibilities include verifying override reports, assisting with the new clinic trial, researching and updating pharmacy charge tables, and addressing medication shortages.

Physical Therapy:

We are excited to announce the launch of outpatient physical therapy services for our community. We currently accept specific insurance plans and encourage patients to contact us with any questions regarding their coverage. If your insurance approval is still pending, please provide us your name and contact number. We will contact you once the enrollment process is complete, allowing you to begin receiving care from our exceptional therapists.

Sierra and Katelyn are committed to delivering high-quality rehabilitation services to our inpatients and residents, ensuring that we effectively meet the needs of our community. Additionally, Susan continues to provide valuable speech therapy services to skilled nursing facility (SNF) residents and acute care patients.

Thank you for your continued support and collaboration.

Adela Yanez, RN, BSN, CNO