



**HI-DESERT
MEDICAL CENTER**
HI-DESERT MEMORIAL HEALTH CARE DISTRICT

**HI-DESERT MEMORIAL HEALTH CARE DISTRICT
BOARD OF DIRECTORS REGULAR MEETING
MINUTES**

July 12, 2011 at 6:00 p.m.

*Helen Gray Education Center Boardroom
6601 White Feather Road, Joshua Tree, CA 92252*

Mission Statement: *Hi-Desert Medical Center will provide superior service to improve the quality of life for people in the Morongo Basin*

Vision: *We are caring people providing extraordinary healthcare services.*

Core Values: *Integrity, Superior Service, Stewardship, Innovation, Teamwork, Dignity*

IN ATTENDANCE:

Board of Directors:

Director Hoffman, President
Director Swella, Vice President
Director Wilcox, Secretary (attending by phone)
Director Cooper, Treasurer
Director Cole, Member at Large

Medical Staff:

Dr. Kasko, Chief of Staff

Excused Absence:

Administrative Staff:

Lionel Chadwick, CEO
Judy Austin, COO/CNO
Tom Duda, CFO
Dan McClure, CIO
Avelina Ortiz, Director of Quality Resources
Barbara Staresinic, VP Human Resources
Esther Tomaszewski, Administrator, CCC
Joe Ruddon, VP Marketing and Business Development
Bruce Oswald, Assistant Administrator of Ambulatory Services
Angela Walton, Executive Assistant

Other Staff:

Jackie Combs, Director of Infection Control
Joan Senelick, Director CRM
Kathy Alkire, Education Director
Cindy Dietz, IT Director
Adele Nafziger, Controller
Donna Johnson, Emergency Department Director

Media:

Mike Lipsitz
Rebecca Unger



CALL TO ORDER

Director Hoffman called the meeting to order at 6:00 pm.

PLEDGE OF ALLEGIANCE & READING OF MISSION STATEMENT

The Pledge of Allegiance was led by members of the 2011 Leadership Academy.

Mission Statement: Read by Director Swella

Vision Statement: Read by Director Wilcox

Core Values: Read by Director Hoffman

PUBLIC INPUT

There was no public comment.

APPROVAL OF MEETING AGENDA

►► **MOTION 11—30: Motion made by Director Cooper and seconded by Director Swella to approve the agenda. The motion passed unanimously.**

PUBLIC STATEMENT – President Hoffman read a statement to the Board of Directors from Bob and Carolyn Burke. Mrs. Burke was a patient and received care at HDMC.

2011 LEADERSHIP ACADEMY GRADUATION – Mr. Ruddon presented the purpose of the academy; this is the second class. Director Hoffman extended graduation certificates to each graduate. The Leadership Academy was developed to create groups of community leaders who can become ambassadors familiar with the issues experienced by the District, operations of the District, and ready to advocate on the District's behalf.

Dr. Chadwick extended his appreciation to the organizations who allowed their people to spend time with the academy.

The graduates:

Gregory Brown, Copper Mountain College
David DiFalco, Yucca Valley Church of the Nazarene
Mike Lipsitz, Z107.7 FM
Tracy Stockman, Pacific Western Bank
Chris Fraser, Fraser Photography
Donna Munoz, Morongo Unified School District
Alan Rasmussen, Supervisor Neil Derry's Office
Rebecca Unger, Hi-Desert Publishing
Bob Armstrong, AFG Realty



BOARD EDUCATION

Lab Services – Sue Shinaver, Director

Ms. Shinaver gave an overview of laboratory services at HDMC. Highlights:

- The lab is CAP (College of American Pathologists) - accredited. The CAP survey is conducted every two years; the next survey will be a “self” survey.
- Dr. Stephen Bush is the Medical Director of the lab
- There are 11 state-licensed, ASCP-certified clinical laboratory scientists
- There are 10 phlebotomists; all have their California state certifications
- There are 2 histotechnicians with ASCP certifications and a histology assistant
- Future staffing is a concern; the number of accredited medical technology schools has dropped from 709 in 1975 to 229 in 2011
- The lab is part of the San Bernardino County Preparedness and Response Program

Ms. Shinaver thanked the various departments for the hospital.

APPROVAL OF CONSENT AGENDA

All Consent Agenda items listed below are considered to be routine by the Board of Directors and will be enacted upon by one motion. There will be no separate discussion of items unless a Board member or citizen so requests, in which event the items will be considered following approval of the Consent Agenda.

MINUTES of the Board of Directors Meeting are approved as presented:

- Minutes of the Regular Meeting of the Board of Directors dated June 14, 2011
- Minutes of the Facilities & Technology Committee Meeting dated June 21, 2011
- Minutes of the Executive Performance Committee Meeting dated June 22, 2011
- Minutes of the Executive Performance Committee Meeting dated June 27, 2011
- Minutes of the Special Facilities & Technology Committee Meeting dated June 27, 2011
- Minutes of the Finance Committee Meeting dated June 29, 2011

CREDENTIALING

NEW APPOINTMENTS – June 2011

The following MEC credentialing and privileging recommendations are being submitted to the Board of Directors for approval:

A. New Appointments

REC: Appoint **Adam Weissman, M.D.** to Provisional Consulting Staff and approve privileges for Emergency Medicine as requested.

Service: Medical

Appointment Period: July 2011 to July 2012



REC: Appoint **Stephen Saponaro, M.D.** to Provisional Active Staff and approve for Radiology privileges for as requested.

Service: Medical

Appointment: July 2011 to July 2012

REC: Appoint **Michael Hovsepian, M.D.** to Provisional Consulting Staff and approve for Radiology privileges for as requested.

Service: Medical

Appointment: July 2011 to July 2012

REC: Appoint **Johnathon Hawkins, CRNA** the Specified Professional Personnel Staff and approve for Anesthesia privileges for as requested.

Service: Surgical

Appointment: July 2011 to July 2012

B. Reappointments

REC: Reappoint **Bernard Cohen, M.D.** to Active Staff and approve privileges for Pediatrics as submitted with no changes

Service: Medical

Appointment Period: July 2011 to July 2013

REC: Reappoint **Edith Jones-Poland, M.D.** to CCC Associate and approve privileges for Medicine Continuing Care Center as submitted with no changes

Service: Medical

Appointment Period: July 2011 to July 2013

REC: Reappoint **Edward B. Cooper, M.D.** to Active Staff and approve privileges for Emergency Medicine as submitted with no changes

Service: Medical

Appointment Period: July 2011 to July 2013

REC: Reappoint **Arun K. Kalra, M.D.** to Active Staff and approve privileges for Hematology/Oncology, ICU, Medicine, CCC as submitted with no changes.

Service: Medical

Appointment Period: July 2011 to July 2013

REC: Reappoint **Vincent Savarese, D.C.** to Allied Health Staff and approve privileges for Chiropractic Rural Health Clinic as submitted with no changes.

Service: Medical

Appointment Period: July 2011 to July 2013



C. Additional Privileges

REC: Approve additional privileges requested by **Bohdan Olesnicky, M.D.** as submitted for Internal Medicine.

D. Resignations

Paul Langford, CRNA- no longer with Dr. Asfaha 5/29/2011.

Moshe Engel, M.D.- (Emergency Medicine) no activity during provisional period and did not reapply.

Hares Ahmad Najand, M.D. (Emergency Medicine) no activity during provisional period and did not reapply.

Hans Saaty, M.D.- Contract ended 9/30/10. Appointment ends 7/31/2011.

The following recommendations from the June 13, 2011 MEC meeting are submitted to the Board of Directors for approval:

Privileging for Cardiac Imaging with Computed Tomography Interpretation

Privileging qualifications require physicians meet the ACC/AHA Level 2 criteria.

The following recommendations from July 11, 2011 MEC meeting are submitted to the Board of Directors for approval:

Infection Control Policies:

MRSA Active Surveillance Testing (Revised)

Prevention of intravascular Catheter- Associated Infections (Revised)

Prevention of Catheter Associated Urinary Tract Infections (new)

Clinical Resource Management Policy:

Utilization Review / Case Management Plan (Revised)

LDRP Policies:

Oxytocin Inductions-Augmentation of Labor (Revised)

Magnesium Sulfate Administration (Revised)

Neonatal Crash Cart Equipment and Supply List (Revised)

Medical Screening Evaluation Standardized Procedure (Revised)

Videotaping & Photography in Labor and Delivery (New)

LDRP Department Patient Care Organization Structure (New)

Assessment of OB Patient in the Emergency Department and Admission Placement in Hospital (Revised)



Manuals:

Environmental Services Manual (Revised)
Infusion Clinic Nursing Policy Manual (Revised)
General Nursing Policy Manual (Revised)
Pediatric Nursing Policy Manual (Revised)
Hospital Administration Manual (Revised)

Nursing, Environmental, and Administrative Policies & Procedures Lists

There were some changes to the Consent Agenda:

Director Hoffman: There were several corrections:

- Dr. Weissman should be removed from new appointments
- Dr. Olesnicky should be removed from of additional privileges
- Under clinical resources management policy, remove the term “oversight” from the policy. The Board of Directors is responsible for maintaining oversight.

Minutes: Facilities & Technology meeting on June 21 – the meeting was called to order called by Director Cole, not Director Cooper.

Director Cole: wants assessment of OB patients in the Emergency Room policy and MSE policy pulled for discussion and vote.

▶▶ MOTION 11—31: Motion made by Director Cooper and seconded by Director Swella to approve the consent agenda as amended. Motion passed unanimously.

Discussion: On the Assessment of OB patients in the Emergency Room policy, Director Cole discussed her concerns with the gestational age listed in the policy, and she commented that she has discussed her concern with Dr. Kasko and Michelle Conroy. Director Cole wants the gestational age should remain at 20 weeks, not changed to 18.

Director Cole made a motion to change the gestational age back 20 weeks in the Assessment of OB patients in the Emergency Room policy.

▶▶ MOTION 11—32: Motion made by Director Cole and seconded by Director Wilcox to approve changing the gestational age back to 20 weeks.

**VOTE: Directors Cole - Yes
Director Wilcox – Yes
Director Swella – No
Director Cooper – No
Director Hoffman - No**



Motion failed.

In the Medical Screening Evaluation policy, Director Cole asked to change routing pregnant patients to the Emergency Room for non-pregnancy related issues instead of LDRP. Director Cole's belief is that if a patient is less than 18 weeks pregnant and comes into the hospital with a medical complaint that is not related to the pregnancy, the patient should go to the Emergency Department rather than labor and delivery; to continue to route pregnant patients directly to LDRP for non-pregnancy related issues will become a drain on the hospital's resources.

▶▶ MOTION 11—33: Motion made by Director Cole and seconded by Director Wilcox to approve routing pregnant patients to Emergency Department if presenting with a non-pregnancy related issue up to 18 weeks. If more than 18 weeks, patient will be sent to LDRP (as approved by Medical Staff).

**VOTE: Directors Cole - No
Director Wilcox – No
Director Swella – Yes
Director Cooper – Yes
Director Hoffman - Yes**

Motion carried.

BOARD COMMITTEE REPORTS:

- Finance Committee Report

Patricia Cooper, Chair
Tom Duda, CFO

Director Cooper: Finance Committee met June 29; inpatient acute care budget below by 9%. There were three action items presented: the make-up air unit for CCC, two classroom trailers for additional storage at CCC, and the installation of nurse call system for CCC. All three were approved by the committee and are recommended for Board approval.

- Human Resources Committee Report

Dennis Wilcox, Chair
Barbara Staresinic, HR Director

Director Wilcox: the Human Resources Committee met May 5. Turnover is 5%, 18% annualized. This is consistent with state-wide California turnover rates.

- Facilities & Technology Committee Report

Korina Cole, Chair
Dan McClure, CIO



Director Cole: the committee met twice (June 21 & June 27) last month. Status reports on go-live dates for various projects, patient televisions, 50 parking spaces maintenance building were issues brought before the committee. There was a special meeting on June 27 for construction of the maintenance building; however, this issue was pulled from Finance Committee and will be presented at a later date.

- Governance Committee Report

Dianne Swella, Chair
Lionel Chadwick, CEO

Director Swella: The Governance Committee was cancelled for the month of June – the committee is meeting in July and she will report to the Board next month.

- Executive Performance Committee Report

Paul Hoffman, Chair

Director Hoffman: the committee met on June 22 and 27: there was a CEO performance matrix discussion and the committee discussed the CEO compensation report. Director Hoffman read the memo regarding the findings of the CEO compensation report (memo also included in packet).

INFORMATIONAL ITEMS & UPDATES:

- Executive Compensation Study: Report – Paul Hoffman, Committee Chair (included in Executive Performance Committee report)
- Co-Management Project Presentation – Lionel Chadwick, CEO – Dr. Chadwick introduced this initiative to the Board of Directors that is being explored by administration with medical staff. A new entity would be created that would allow Hi-Desert to co-manage the surgical and medical service lines (a management company). The co-management company ownership would be divided between Hi-Desert and the physicians. Governance of the company would also be shared. This business enterprise is not linked into the medical staff structure already in place. Dr. Chadwick discussed the pros and cons of the venture. Director Hoffman asked if this has been presented to the medical staff. Dr. Chadwick stated that members of the company met with the medical staff at their staff meeting in May.

Dr. Chadwick mentioned that this was only an introduction to the idea of the model; this matter would be brought back to the Board after more structure for the program has been developed.



- Strategic Plan Update – Administrative Leadership Team – Dr. Chadwick stated that the Strategic Plan is included for review. Dr. Chadwick reminded the Board that the next year's strategic plan will be starting soon.

ACTION ITEMS:

1. The procurement and installation of a new Make Up Air (MUA) unit of the Kitchen at CCC (Dan McClure, CIO)

This action item recommends directing management to proceed with the expenditure of budgeted capital funds for the purchase and installation of a new Make Up Air unit for the CCC kitchen, not to exceed \$163,000.00.

Discussion: Mr. McClure and Ms. Tomaszweski presented this item, stating that the system is antiquated and needs constant repair. It is at the point where it needs to be replaced. This item has been approved by both the Finance and Facilities committees.

▶▶ MOTION 11—33: Motion made by Director Wilcox and seconded by Director Swella to approve the installation of a new Make Up Air (MUA) unit at CCC. Motion passed unanimously.

2. Purchase and installation of two (2) new 24'x40' classroom type trailers at CCC (Dan McClure, CIO)

This action item recommends directing management to proceed with the purchase and installation of two (2) new 24'x40" classroom type trailers for storage at the CCC, with project costs not to exceed \$137,913.44.

Discussion: This item has also been approved through the Facilities and Finance committees. The trailers will provide for additional storage space at the continuing care center. Director Wilcox asked for the various amounts for the trailers (\$30,000 per trailer, 2 trailers). Director Cooper stated that the trailers have been approved in both committees and staff members have been diligent in their reporting. A cost breakdown will be provided to those who request it.

▶▶ MOTION 11—34: Motion made by Director Swella and seconded by Director Cooper to approve purchase and installation of two (2) new 24'x40' classroom type trailers at CCC. Motion passed unanimously.



**3. Purchase of a new nurse call system for the residents and staff at CCC
(Dan McClure, CIO)**

This action item recommends directing management to contract for the purchase and installation of a new Rauland Responder 4000 nurse call system for the Continuing Care Center at the projected cost of \$159,547.44.

Discussion: Mr. McClure and Ms. Tomaszewski commented that the current nurse call system is a very old system and does not meet the needs of the patients or medical staff at the CCC. The current system is not able to be upgraded; it needs to be replaced. This action item has also been approved by both the Facilities committee and Finance committee.

Director Cole: addressed the costs of the presented projects; staff should know that in light of cuts in benefits, freezes on increases and bonuses for employees, funds were already budgeted for these projects. Director Hoffman commented that these action items also have a great bearing on quality of care.

▶▶ MOTION 11—35: Motion made by Director Cooper and seconded by Director Swella to approve a new nurse call system for the residents and staff at CCC. Motion passed unanimously.

**4. CEO Performance Matrix – Executive Performance Committee Presentation
(Lionel Chadwick, CEO)**

The intent of the CEO Performance Matrix is to outline specific performance expectations that, if met, will satisfy or exceed Board of Directors' CEO performance expectations for calendar year 2011.

Dr. Chadwick presented the performance objectives for calendar year 2011. Dr. Chadwick defined the goals of the matrix. Director Hoffman informed the Board that this process was put in place in 2008. Dr. Chadwick discussed the objectives and measurable indicators:

- Service Quality (30%)
- Reported Satisfaction (30%)
- Financial Performance (25%)
- Leadership (10%)
- Growth and Community (5%)

Director Hoffman recommends approving the 2011 CEO performance objectives.

▶▶ MOTION 11—36: Motion made by Director Cooper and seconded by Director Swella to approve the CEO performance objectives. Motion passed unanimously.



CHIEF OF STAFF REPORT (*Service*)

Andre Kasko, D.O., Chief of Medical Staff – Dr. Kasko thanked Mr. McClure and his staff their help on recent projects. Dr. Kasko reported that MEC was educated on restraint policies at their last meeting.

ADMINISTRATIVE REPORT (*Service*)

Lionel Chadwick, Chief Executive Officer, presented the Administrative Services Report. Highlights:

- Temporary parking lot; addressed water main break emergency at the hospital last week.
- Congratulations to Sue Shinaver and the work she does in the Lab

CLINICAL SERVICES REPORT (*Service*)

Judy Austin, Chief Operating Officer, presented the Clinical Services Report. Highlights:

- Ms. Austin recognized the Director of Obstetrical Services, Michelle Conroy
- Thanked Dr. Kasko for supporting Ms. Conroy in LDRP

AMBULATORY SERVICES (*Service*)

Mr. Oswald highlighted the following:

- Mr. Oswald stated that a new CLS has been hired for the lab.
- Introduced Alice Antone, new director of Medical Imaging.

FINANCE REPORT (*Finance*)

Mr. Duda introduced the financial statements.

Discussion: Director Hoffman queried why MRI was 53% below budget. Mr. Duda stated that part of the loss of volume was due to patients visiting another facility, but that most of the loss comes from military service members going elsewhere for services. Director Hoffman stated that the MRI unit was purchased primarily to take care of the area military members and their families. He stated that he would like to see more diligence on the part of staff in finding out why the military members are going elsewhere for this service and suggested bringing issue to the attention of the new Commanding General of the local base. Mr. Oswald and Dr. Kasko provided some insight on some possible reasons for the decline in patient use of MRI.

Director Cole asked about the decline in Home Health. Dr. Chadwick stated that Oasis has begun their own home health entity and it provides competition for the home health agency at HDMC.



MARKETING REPORT (*Growth*)

Mr. Ruddon presented the marketing report. No questions were presented.

Director Hoffman addressed the time he spent at the local high school's recent job fair; he stated that helping the students go through the job interview process is of great help to them and he encourages more community members to engage in the process.

CALENDARS:

There were no changes presented.

ITEMS FOR NEXT AGENDA:

- None were presented

DIRECTORS' COMMENTS:

Director Hoffman: Mr. Hoffman addressed having additional parking spaces due to the new construction. He offered congratulations to Sue Shinaver and her work in the lab. Director

Hoffman also reported that HDMC won for the top fund-raising team in Relay for Life, collecting more than \$11,000.

Director Swella: Director Swella told Sue Shinaver that she gave a great presentation. Thanks to Joe Ruddon for the Leadership Academy. Director Swella reported that she attended the 4th of July employee barbeque with her husband and that they had a great time. Director Swella also thanked Ms. Walton for her work.

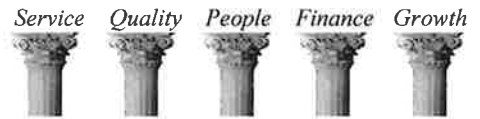
Director Cooper: Director Cooper thanked all presenters.

Director Wilcox: Thanked Sue Shinaver for her presentation (said it was the best Board education he has encountered in Board meetings).

Director Cole: Thanked the staff for their work in the policy revisions. Director Cole thanked the Cardiopulmonary Rehabilitation staff for their work and the recent open house, and thanks to Sue Shinaver for her work in the lab.

ADJOURNMENT TO OPEN SESSION AND CLOSED SESSION REPORT

- *Pursuant to section 32106 of the Health and Safety Code
Report Involving Trade Secret
Estimated date of public disclosure: September 2011*
- *Pursuant to section 32155 of the Health and Safety Code
Report Involving Quality Assurance Matters*
- *Pursuant to Government Code section 54956.9(b)(1) – Potential Litigation (1 case)*



ADJOURNMENT TO OPEN SESSION AND CLOSED SESSION REPORT:

Director Hoffman adjourned the meeting to closed session at 8:07 pm. Closed session began at 8:15 pm.

Director Hoffman adjourned the meeting to open session at 8:58 pm.

The Board of Directors reviewed information regarding a quality assurance matter. The Board of Directors directed administrative staff to take appropriate action on a litigation matter.

On the matter involving a trade secret, the Board of Directors is in receipt of an inquiry from a private third party who is exploring the possibility of divestiture of our public district medical center. The four board members in attendance (Dr. Wilcox was absent) unanimously voted not to consider divestiture of substantial District assets or programs at this time or anytime ever in the foreseeable future. The Board has complete faith and confidence in the Management, Leadership, Operations, and the Financial Performance of the District.

ADJOURNMENT:

On motion duly made and seconded Director Hoffman adjourned the meeting at 9:00 pm.

Minutes recorded by A. Walton, Board Clerk



Paul Hoffman, President, Board of Directors



Dennis Wilcox, Board Secretary