



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

**November 13, 2012 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 Swella, President  
Director Cooper, Vice President  
Director Cole, Secretary  
Director Avels, Member-at-Large

Medical Staff: Dr. Andre Kasko

Excused Absence: Director Hoffman, Treasurer  
Dr. Prem Salhotra, Chief of Staff  
Tom Duda, CFO  
Bruce Oswald, Assistant Administrator of Ambulatory Services  
Barbara Staresinic, VP Human Resources

Administrative Staff: Lionel Chadwick, CEO  
Judy Austin, COO/CNO  
Dan McClure, CIO  
Joe Ruddon, VP Marketing and Business Development  
Avelina Ortiz, Director of Quality Resources  
Dean Moore, Foundation President  
Jackie Combs, Administrator, CCC  
Angela Walton, Executive Assistant

Other Staff: Alice Brown, Home Health/ Hospice Director  
Kathy Alkire, Director of Service Excellence  
James Walter, RHC Director  
Anne Clark, Home Health/Hospice Director  
Stan Joyce, Cardiopulmonary Director  
Brian Hughes, EVS Manager

Other Department Managers and Staff

Media No media present



Guests: Michael McBride

## CALL TO ORDER

Director Swella 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 Boy Scout Troop 77. Dr. Swella presented the boys with a check and certificates.

**Mission Statement:** Read by Director Cooper

**Vision Statement:** Read by Dr. Chadwick

**Core Values:** Read by Director Cole

## PUBLIC INPUT

There was no public input.

## APPROVAL OF MEETING AGENDA

►► **MOTION 12—47:** Director Cole made the motion to approve the agenda, and Director Avels seconded. Director Swella requested that three action items were pulled from the agenda:

- Replacement Lights for Operating Rooms 1 & 2
- Picture Archiving and Communication System (PACS) Upgrade
- Echocardiography scanner and Picture Archive and Communication System

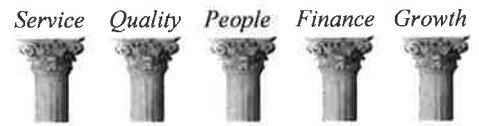
It was requested these three items be referred back to Finance Committee for further review as Mr. Duda and Mr. Hoffman were both absent this meeting. Dr. Chadwick also stated that management will provide more clarity with regard to funding and cost availability of the special projects in the actions items.

## SPECIAL PRESENTATION – BETA Symposium OB Trophy

- Judy Austin, CNO/COO

Ms. Austin gave an overview of BETA Healthcare Group and the Risk Management Initiative. The Risk Management Initiative for the District was OB. The District was recognized as one of 18 hospitals who were selected for this award. A contribution credit of \$45,000 was received for this project. A trophy was given to the team; Michelle Conroy was in attendance, and received a gift and certificate on behalf of the OB team. Dr. Kasko was also given a certificate and gift for his contribution to this effort. The OB team also received gifts and certificates.

At this time, Director Swella recognized Mr. Michael McBride for his candidacy for the District Board of Directors, and congratulated all members who were recently re-elected to the Board.



**BOARD EDUCATION - Quality Resources – Avelina Ortiz, Director**

Ms. Ortiz highlighted the responsibilities of the Quality Resources Department:

- Department is responsible for maintaining oversight of accreditation and compliance of all hospital programs
- Risk Management – entails all clinical and administrative activities performed to identify, assess and reduce the risk of harm, loss, and injury
- Full support of all activities performed by medical staff
- Overview of quality goals (accreditation readiness, core measures treatment guidelines, compliance with all government agency initiatives, maintain infection rates below national benchmarks, and reduce injury/harm, lawsuits and claims)
- Evaluating the District's performance is an on-going process
- Annual calendar of quality indicators
- Monitor medical records, observation, rounding, incident reports, patient and family complaints, medical staff peer review, indicators are reported to state, federal, independent agencies
- Ensures District complies with benchmarks set by state or federal agencies, and other hospitals
- Periodic performance review to The Joint Commission
- Average of 180 incident reports investigated and 12 patient complaints; 5 open claims/lawsuits – ongoing
- Reports core measures, infections, patient safety indicators, hospital acquired conditions and readmissions to various government agencies
- Continuing to educate staff on accreditation activities

Director Avelina commented that the Quality Department has been complimented by members of the community and is doing a great job in coordinating their many activities. Ms. Ortiz commented that Dr. Kasko is now a leader in patient safety efforts. Dr. Chadwick informed the public that there is a Joint Conference Committee that is responsible for going through all the quality and core measures. The committee is made up of senior management, Board members, and medical staff members.

**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 October 9, 2012
- ⌘ Minutes of the Facilities & Technology Committee meeting dated October 16, 2012
- ⌘ Minutes of the Finance Committee Meeting dated October 24, 2012
- ⌘ Minutes of the Human Resources Committee Meeting dated November 1, 2012



## CREDENTIALING

### NEW APPOINTMENTS & REAPPOINTMENTS– November 2012

#### A. New Appointments

- **Recommendation to appoint Malcolm Whitaker, M.D.** to Consulting Staff and approve privileges for Radiology as submitted.  
**Service: Medical.** Appointment Period: November 2012 - March 2014
- **Recommendation to appoint Richard Miller, M.D.** to Consulting Staff and approve privileges for Radiology as submitted.  
**Service: Medical.** Appointment Period: November 2012 – January 2014
- **Recommendation to appoint Jin Nam Baek, D.D.S.** to CCC Associate Staff and approve privileges for Dental as submitted.  
**Service: Medical.** Appointment Period: November 2012 – November 2014
- **Recommendation to appoint James Fountain, CRNA** to Allied Health Staff and approve privileges for Anesthesia as submitted.  
**Service: Surgical.** Appointment Period: November 2012 – November 2014

#### B. Reappointments

- **Recommendation to reappoint John Ritter, M.D.** to Consulting Staff and approve privileges for Tele-Radiology as submitted with no changes. Physician returning from a leave of absence requested 6/2012.  
**Service: Medical.** Appointment Period: November 2012 – June 2014
- **Recommendation to reappoint Maurice Peters, M.D.** to Consulting Staff and approve privileges for Tele-Radiology as submitted with no changes.  
**Service: Medical.** Appointment Period: November 2012 – October 2014
- **Recommendation to reappoint Bhaskararo Nalam, M.D.** to Active Staff and approve privileges for General Surgery as submitted.  
**Service: Surgical.** Appointment Period: November 2012 – November 2014
- **Recommendation to reappoint Jai Ghatnekar, M.D.** to Active Staff from Provisional and approve privileges for General Surgery as submitted with revisions and restrictions.  
**Service: Surgical.** Appointment Period: October 2012 – August 2014
- **Recommendation to reappoint Bryan Stone, M.D.** to Courtesy Staff and approve privileges for Nephrology as submitted with no changes.  
**Service: Medical.** Appointment Period: November 2012 – October 2014
- **Recommendation to reappoint Elliott Romero, M.D.** to CCC Associate Staff and approve privileges for Family Practice as submitted with no changes.  
**Service: Medical.** Appointment Period: November 2012 to October 2014



**The following Medical Staff policy recommendations are being submitted to the Board of Directors for approval:**

**CCC**

- CCC Administrative Manual – Policy List

**Infection Control**

- Methicillin Resistant Staphylococcus Aureus (MRSA) Active Surveillance Testing

**▶▶ Motion to approve the Consent Agenda as presented**

**▶▶ MOTION 12—48:** Motion made by Director Avels and seconded by Director Cooper to approve the consent agenda. Director Swella asked that Finance Committee minutes were pulled from the agenda to be referred back to Finance Committee for further review by Mr. Duda and Director Hoffman. The motion carried.

**BOARD COMMITTEE REPORTS:**

- Finance Committee Report

Paul Hoffman, Chair

- Director Hoffman was absent this meeting. Dr. Chadwick stated that the Finance Committee has received the annual audit report by the auditor at their October meeting, and the auditor will attend the December Board meeting to give a full report. Discussions resulted in the recommendation that the audit report be moved to December as Mr. Camp would not be available to attend the November Board meeting.

- Human Resources Committee Report

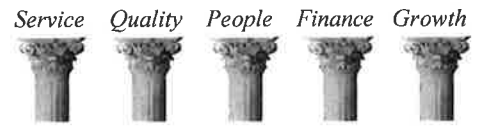
Korina Cole, Chair

- Director Cole reported the committee met on November 1, discussed new hires, terminations, exit review comments, reconstruction of comments, and viewed the “Lets Get Real” presentation given by Dr. Chadwick. This presentation was shared with staff members at an earlier staff meeting.

- Facilities & Technology Committee Report

Martie Avels, Chair

- Director Avels reported that the committee met in October, and received status reports on several items, including but not limited to scanning/archiving, telephones, patient discharge instructions, Pyxis, and anesthesia carts. Director Avels reported the three action items that were removed from tonight’s Board agenda had received approval from Facilities Committee. Dr. Chadwick asked Mr. McClure for an update on meaningful use, which Mr. McClure provided, stating the majority of the 24 measures have been met. Ninety consecutive days of data have to be compiled and submitted, and it was originally projected that the data would be completed and



submitted by December, however, the measure of computer order entry fell short of the expectation. Mr. McClure expects for June 2013 to be the next submission/completion date.

- Governance Committee Report Patricia Cooper, Chair
  - Director Cooper reported the committee next meeting is November 26.
- Executive Performance Committee Report Dr. Dianne Swella, Chair
  - Dr. Swella reported that the committee will meet in early December.

### INFORMATION ITEMS

- Strategic Plan & Transportation Needs Assessment: Presentation  
Dean Moore, President, HDMC Foundation

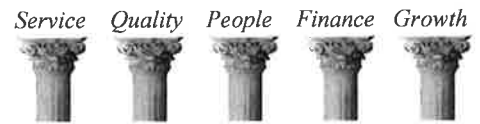
Mr. Moore shared the Foundation's Strategic Plan:

- Mission Statement: To support a healthy Morongo Basin by raising money and community awareness to further the healthcare District's mission of providing quality healthcare services to the residents of Morongo Basin.
- Vision Statement: A Healthy Morongo Basin
- Data collection and methodology for developing the plan was described
- Critical areas for the Foundation Board to consider when developing the plan included:
  - Grants
    - Multiple options for securing grants to support the efforts of the healthcare District and development of the Foundation
      - Contract with a grant writer
      - Implement a system for identifying, securing and managing grants
      - Electronically gather data essential to successful completion of grant applications
  - Philanthropy
    - Secure funding for the healthcare District and Foundation through charitable giving
      - Develop a comprehensive planning giving program
      - Create partnerships to assist donors to set up estate gifting
      - Re-launch and manage the Employee Assistance Program
      - Re-launch and manage nursing scholarship program
  - Community Partners
    - Engrain the healthcare District and Foundation in the fabric of the Morongo Basin
      - Actively participate in community programs and events that present the opportunity to promote the District and Foundation
      - Seek out opportunities to interact with elected and civic leaders



- Develop a comprehensive marketing program to promote the Foundation
- Seek opportunities to participate in appropriate events in the Coachella Valley and elsewhere in the County and State
- Awareness
  - Create awareness of the mission while promoting healthcare services offered by the healthcare District
    - Develop a comprehensive marketing program to promote the Foundation
    - Seek opportunities to participate in appropriate events in the Coachella Valley and elsewhere in the County and State
    - Consistently interact with other healthcare philanthropic organizations
    - Explore the feasibility of creating a speakers bureau / ambassador program
- Board Members
  - Recruit additional board members to advocate on behalf of the Foundation and healthcare District, and effectively govern the activities of the Foundation
    - Develop a comprehensive board member recruitment, development and retention program
    - Expand the number of board members to a level that will allow for the effective governance of the Foundation
    - Create a functioning committee structure that supports the goals and effective governance of the Foundation
- Finances
  - Assure that all financial matters are handled with the utmost importance and integrity
    - Develop an system for presenting Foundation finances to the Board of Directors
    - Implement a comprehensive gift acceptance policy
    - Create an investment policy for Foundation funds
    - Create and manage donor advise funds
    - Devise a systematic approach for assuring regulatory compliance and reporting (Federal, State, HDMHCD, etc.)
    - Prepare and manage an annual operating budget
- Staff
  - Retain staff that can effectively carry out the mission and established goals
    - Develop a program for staff recruitment, retention, training and evaluation
    - Consider options for satellite office(s)
    - Explore feasibility of telecommuting, flex scheduling and other creative workplace programs

Mr. Moore explained that the method of delivery on the status of these objectives will be quarterly reports to the District Board of Directors. Director Cooper asked who is responsible for handling the



Foundation financials, and Mr. Moore stated that he is working with the District Finance Department.

∞ Non-Emergency Medical Transportation (NEMT) Needs Assessment

Mr. Moore gave an update on the recent grant that was received for the transportation grant. He highlighted the following:

- Morongo Basin Transit Authority's transportation assistance grant (TAG) program
- Provides analysis of HDMC transportation services
- Potential demand for NEMT at HDMC
- Details alternative service models
- Recommendation for mobility needs of HDMC patients

Currently, HDMC staff provides MBTA bus vouchers, taxi service, and private transportation providers (DCTS). HDMC Staff report found the following issues:

- An increase of patients with limited transportation
- Discharged patients (ER and Inpatient) with no transportation are difficult and expensive to get home
- Missed medical appointments because no transportation (readmissions)
- Special groups with unique transportation needs (Veterans, visitors/tourists)
- FY 2011, HDMC generated 294,793 one-way trips
- Using a variety of national models regarding transportation needs along with local data:
  - Estimated 31,000 one-way trip gap (cannot be met with personal transportation)
  - Approximately 10,000 of those trips are filled by MBTA and HDMC
  - Estimated 21,000 one-way trips are going unfulfilled

The anticipated outcome of the program:

1. Improved access to HDMC healthcare for rural residents
2. Improved access to regional healthcare facilities (HDMC, Arrowhead, Colorado River Medical Center)
3. Reduced inappropriate use of emergency services (911 and HDMC emergency room)
4. Cost savings to HDMC: reduced need for outside transportation

Director Avels inquired if there are similar programs already in operation. Mr. Moore informed the Board that there are currently other programs in operation and that the Foundation program will supplement the transportation programs already providing services. \$83,500 is for the first year of the program. Timeline for the project is January – December 2013.

**ACTION ITEMS:**

**First three action items pulled:**

1. Replacement Lights for Operating Rooms 1 & 2
2. Picture Archiving and Communication System (PACS) Upgrade
3. Echocardiography scanner and Picture Archive and Communication System





**4. ►► Utilization of External Expert Advisor(s) – Lionel Chadwick, CEO**

- *This action recommends that the Board of Directors endorse and support all reasonable and necessary management action to solicit and retain such outside experts that may be necessary to advise the District management and/or Board of Directors of options, actions, and initiatives that may be available in the near to mid-term to return the District to financial solvency and long term viability. The Board directs that all such advisory work be completed by January 31<sup>st</sup>, 2013 with a summary report to the Board at its February meeting and directs management to make monthly progress reports to the Finance Committee of the Board at their December and January meetings.*

Dr. Chadwick informed the Board that at its October meeting, the Finance Committee recommended approving this action to concur with management's plan to look for outside consultants to assist in improving operations; the action is a managerial request to contract with independent consultant firms to examine areas to review, including case management, documentation for physicians, and all other areas for education opportunities to improve the current revenue stream. Ms. Austin stated that this action has been shared with the physicians at their medical executive committee meeting, and Dr. Kasko voiced his support on behalf of the medical staff on this endeavor. Director Avels asked the cost limit for this project, and Dr. Chadwick stated he will have to look further into this project before providing definitive figures. It is expected that once the project begins, it will be completed in 90 days with a full report back to the Board, at the February 2013 Board meeting. The report will be taken to Finance Committee prior to presentation to full Board.

**►► MOTION 12—50:** Director Avels made the motion to approve, and Director Cooper seconded. Director Cole opposed; motion carried.

**5. ►► CEO Employment Agreement – Resolution – Dr. Dianne Swella, Chairperson**

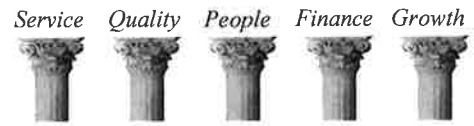
- *The Board of Directors agrees to authorize and direct its President to execute a new employment agreement with Dr. Chadwick in the form that has been agreed upon by the parties, which will become effective upon the expiration of the existing agreement on October 31<sup>st</sup>, 2013.*

Director Swella read the resolution in its entirety.

**►► MOTION 12—50:** Director Cooper made the motion to approve, and Director Cole seconded.

**Roll call vote:**

Director Avels – yes  
Director Cole – yes  
Director Hoffman – absent  
Director Cooper – yes  
Director Swella- yes



### **CHIEF OF STAFF REPORT (*Service*)**

Dr. Prem Salhotra, Chief of Staff: Absent; Dr. Andre Kasko attending. Dr. Kasko congratulated all newly re-elected Board members on behalf of medical staff.

### **ADMINISTRATIVE REPORT (*Service*)**

Lionel Chadwick, Chief Executive Officer. Dr. Chadwick highlighted the following:

- First meeting of Community Health Center Board of Directors will meet November 14 in Helen Gray; District Board Chair will attend
- Congratulations to all Board members on their re-elections and thanks to Mr. McBride for his candidacy for the District Board
- Prop. 30 has passed; would have significantly hurt the District had failed to pass.
- Paul Cook has been elected to Congress and he is a friend of the District
- Article regarding property tax trends was shared
- Tax measures will also be investigated once more information has been gathered
- Thursday – medical disaster drill will be held that will affect state-wide medical centers
- Met with new DRMC CEO Carolyn Caldwell – looking forward to building a new relationship based upon previous relationship with Karolee Sowle, the previous CEO.
- Judy Austin – appointed one of 13 NRHA Fellows for 2013
- Director Swella – Oasis agreement secured due to Ms. Austin's diligence

### **CLINICAL SERVICES REPORT (*Service*)**

Judy Austin, Chief Operating Officer. Highlights:

- Recognized Brian Hughes as newly-appointed manager of Environmental Services; will report to Kathy Alkire, Director of Service Excellence
- Jennifer Long – manager for Med/Surg and Infusion Center – newly appointed to the position

### **AMBULATORY SERVICES (*Service*)**

Bruce Oswald, Ambulatory Services Director, was absent this meeting.

### **CONTINUING CARE CENTER (*Service*)**

Jackie Combs, CCC Administrator. Highlights:

- Food for night staff - mobile cart from Auxiliary
- Postponed evening meals, new go-live date is January 14

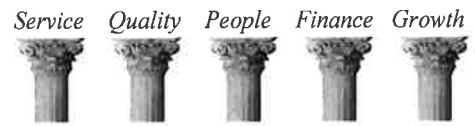
### **FINANCE REPORT (*Finance*)**

Tom Duda, Chief Financial Officer, was absent this meeting.

### **MARKETING REPORT (*Growth*)**

Joe Rudden, Marketing/Business Development Director. Highlights:

- Fall community health education series are off to good start
- December 8 will be Breakfast with Santa – 9 – 11 am
- Director Swella – briefly reported on Pioneer Days parade



## FOUNDATION REPORT

Dean Moore, Foundation President. Highlights:

- Gift chart for Rose Garden has been developed
- Foundation is now set up to accept credit card contributions; website donations will also be available soon
- Will be attending MBTA Board meeting to present transportation
- Friend Raiser – November 28; Director Swella and Director Cooper have attended planning meeting

## BOARD CALENDARS:

Finance Committee correction – meeting will be at 4 pm on November 28

## Items for Next Board Agenda:

- Audit Report
- Consultant Report
- Foundation Action Item – Strategic Plan
- 3 Action Items
  - Replacement Lights for Operating Rooms 1 & 2
  - Picture Archiving and Communication System (PACS) Upgrade
  - Echocardiography scanner and Picture Archive and Communication System

**Director Avels** – thanks to Kathy Alkire for the recent LDI meeting. Director Avels congratulated staff on its BETA award, thanks all members who ran for re-election.

**Director Cole** – Happy Thanksgiving – invited Board and staff to a Thanksgiving meal with a group she works with that provides dinners for 100 young Marines.

**Director Hoffman** – absent

**Director Cooper** – thanks for all presentations, congratulations to Ms. Austin on the awards.

**Director Swella** – thanks to all presenters, congratulations to Dr. Kasko and the OB team, and to all staff – Happy Thanksgiving.

At this time, Dr. Chadwick stated that he is honored to continue to work with the District and with the people of the Morongo Basin. Director Cooper informed the public and staff that Dr. Chadwick sacrificed to continue on with the District.

## ADJOURNMENT TO CLOSED SESSION – 8:03 pm

At this time, the Board adjourned the open meeting and moved into Closed Session.

## CLOSED SESSION – 8:13 pm

- ⌘ Pursuant to section 32155 of the Health and Safety Code  
*Report Involving Quality Assurance Matters*



**ADJOURNMENT TO OPEN SESSION AND CLOSED SESSION REPORT – 9:00 pm**

In closed session, the Board discussed a quality assurance matter. The Board directed the management team to take appropriate action.

**ADJOURNMENT:**

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

*Minutes recorded by A. Walton, Board Clerk*

  
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*Dianne Swella, President, Board of Directors*

  
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*Korina Cole, Board Secretary*