



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

July 9, 2013 at 6:00 p.m.

*Helen Gray Education Center Boardroom
6601 White Feather Road, Joshua Tree, CA 92252
760-366-6262*

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 Cole, President Director Avels, Vice President Director Hoffman, Treasurer Director Swella, Secretary Director Cooper, Member-at-Large
Medical Staff:	Dr. Prem Salhotra, Chief of Staff
Excused Absence:	Dean Moore, Foundation President
Administrative Staff:	Lionel Chadwick, CEO Judy Austin, COO/CNO Dan McClure, CIO Bob Tyk, CFO Avelina Ortiz, Director of Quality Resources Barbara Staresinic, VP Human Resources Joe Ruddon, VP Marketing and Business Development Jackie Combs, Administrator, CCC Angela Walton, Executive Assistant
Other Staff:	Kathy Alkire, Director of Service Excellence James Walter, RHC Director Shelly Vincent, Clinical Resources Management Director Adele Nafziger, Controller Other Department Managers and Staff Donna Johnson, Employee Health Jason Duckworth, FNS Sheila Hendricks, Emergency Department Jennifer Long, MedSurg



Guests Leadership Academy Class 2013

Media No media present

PLEDGE OF ALLEGIANCE & READING OF MISSION STATEMENT

The Pledge of Allegiance was led by the Leadership Academy Class 2013.

Mission – Read by Director Hoffman

Vision – Read by Director Cooper

Core Values – Read by Director Avels

PUBLIC COMMENTS

There were no public comments.

APPROVAL OF MEETING AGENDA

►► **MOTION 13—26:** Director Hoffman made the motion to approve the agenda, and Director Swella seconded. Director Cole, Director Cooper, and Director Avels were in favor, and the motion passed.

2013 LEADERSHIP ACADEMY PRESENTATION - Joe Ruddon, VP Marketing/Business Development

Mr. Ruddon reported there are seven graduates for 2013 consisting of community members and community health center Board members, as well as Foundation Board members. Mr. Ruddon described the curriculum the graduates undertake to become ambassadors of the District, and a new component is “Implications of Healthcare Reform”.

2013 Graduates (in attendance):

Jacquelyn Creps of FQHC Board
Robin Dalton of Copper Mountain Broadcasting Group
Christopher Johansing of FQHC Board

Graduates not in attendance were:

Susan Madavan, of FQHC Board
Shelly Licata, Pacific Western Bank
Mary Jane Binge, of FQHC Board
John Yonushonis, Foundation Board

BOARD EDUCATION

- Clinical Resource Management – Shelley Vincent, Director of Clinical Resource Management & Utilization Review
- Overview: Case Management is the catalyst for a collaborative, team-based, approach to care that is critical in meeting the complex clinical and psychosocial needs of patients and their families.



- The goal of the department is to maintain an optimal patient health status across the continuum of care in a manner that emphasizes both individual control over decisions and stewardship of resources.
- Staffing of the department includes 3 RNs, 2 Unit based, 1 ER, 1 Master of Social Work, and 1 Clerical support, Physician Advisor, 1 Internal PA, 1 External Physician Advisor Group (EHR)
- Duties of the department include, but are not limited to:
 - Pre-Screen
 - Medical Necessity (right order, right status)
 - Communication with Clinical Documentation Specialist
 - Identify High Risk Patients
 - Complex Discharge Assessment
 - ID potential 30 day readmits
 - Re-admission Assessment
 - Communicate with Patient Financial Services (PFS)
 - Provide Community Referrals
 - Observation awareness and real-time checks
 - Discharges
 - MD rounding
- Duties of the social worker include, but are not limited to:
 - Discharge planning: high risk/complex cases
 - Performing readmission interventions
 - Advanced directives
 - Participating in interdisciplinary rounds
 - Emotional responses to illness and disease
 - Arranging family meetings
 - Patient advocate
 - Psychosocial assessments and interventions
 - Intervention in care transitioning to psychiatric facilities for suicidal/homicidal patients
 - Abuse/Neglect reporting to appropriate authorities

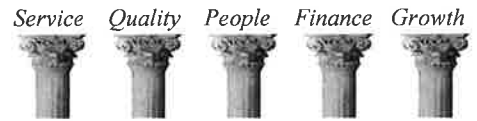
Ms. Vincent also described their high risk patient identifiers list and Executive Health Resources which began in January 2013.

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 11, 2013
- Minutes of the Special Board Meeting dated June 10, 2013
- Minutes of the Governance Committee Meeting dated June 12, 2013
- Minutes of Special Finance/Board Meeting dated July 2, 2013



CREDENTIALING

NEW APPOINTMENTS & REAPPOINTMENTS - July 2013

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

- **New Appointments**
- **Recommendation to appoint Rawel Randhawa, M.D.** to Provisional and approve privileges for Gastroenterology as submitted with no changes.
Service: **Medical.** Appointment Period: July 2013- July 2014
- **Recommendation to appoint Moheen Suna-Sitto, PA-C** to Allied Health Staff and approve privileges for Physician Assistant as submitted with no changes.
Service: **Medical.** Appointment Period: July 2013 – August 2014
- **Reappointments**
- **Recommendation to reappoint German Musch, M.D.** to Active Staff and approve privileges for Pediatrics as submitted with no changes.
Service: **Medical.** Appointment Period: July 2013 – June 2015
- **Recommendation to reappoint John Dedic, M.D.** to Consulting Staff and approve privileges for Radiology as submitted with no changes.
Service: **Medical.** Appointment Period: July 2013 – June 2015
- **Recommendation to reappoint Bohdan Olesnicky, M.D.** to Courtesy Staff and approve privileges for Emergency Medicine as submitted with no changes.
Service: **Medical.** Appointment Period: July 2013 – June 2015
- **Recommendation to reappoint Gerald Schultz, M.D.** to Active Staff and approve privileges for Ophthalmology as submitted with no changes.
Service: **Surgical.** Appointment Period: July 2013 – June 2015
- **Recommendation to reappoint Gerald Burnett, PA-C** to Allied Health Staff and approve privileges for Physician Assistant as submitted. (PA to Dr. Salhotra)
Service: **Medical.** Appointment Period: July 2013 – June 2015
- **Recommendation to reappoint Michelle Weaver, NP** to Allied Health Staff and approve privileges for Nurse Practitioner as submitted. (NP for Demiany/Smith)
Service: **Medical.** Appointment Period: July 2013 – June 2015
- **Recommendation to reappoint Bernard Cohen, M.D.** to Active Staff and approve privileges for Pediatrics as submitted with no changes.
Service: **Medical.** Appointment Period: July 2013 – July 2015
- **Recommendation to reappoint Edward Cooper, M.D.** to Active Staff and approve privileges for Emergency Medicine as submitted with no changes.
Service: **Medical.** Appointment Period: July 2013 – July 2015



- **Recommendation to reappoint Edith Jones-Poland, M.D.** to CCC Associate Staff and approve privileges for General Practice as submitted with no changes.
Service: **Medical.** Appointment Period: July 2013 – July 2015
- **Recommendation to reappoint Vincent Savarese, DC** to Allied Health Staff and approve privileges for Chiropractic as submitted with no changes.
Service: **Medical.** Appointment Period: July 2013 – July 2015
- **Recommendation to reappoint Nichole Wetherholt, PA-C** to Allied Health Staff and approve privileges for Physician Assistant - Emergency Medicine as submitted with no changes. Service: **Medical.** Appointment Period: July 2013 – July 2015
- **Terminations**
 - James Fountain, CRNA (Anesthesia)- *Letter on File*
 - Melissa Baxter, CRNA (Anesthesia) - *Letter on File*
 - Charles Joshlin, CRNA (Anesthesia)- *Moved away from Area*
 - Bryson Borg, M.D. (Tele-Radiology)- *Letter on File*
 - Alfred Hand, M.D. (Tele-Radiology)- *Letter on File*
 - Donald E. Jackson, M.D. (Tele-Radiology) - *Letter on File*
 - Robert Strecker, M.D. (Emergency Medicine) – *No Response*

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

- ICU Nursing Manual 2013
- Infusion Nursing Manual 2013
- General Nursing Manual 2013
- Nursing Administration Manual 2013
- Diet Manual (*Nutrition*)
- Adverse Drug Events Policy (*P&T*)
- Pharmacy “Code Blue” Response Policy (*P&T*)
- Emergency Drug Supplies Policy (*P&T*)

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

▶▶ **MOTION 13—27:** Director Avels made the motion to approve the consent agenda with minor corrections to Board minutes, and Director Swella seconded. Director Avels, Director Swella, and Director Hoffman provided minor corrections; Director Cole, Director Cooper, and Director Hoffman were in favor of approving the consent agenda, and the motion passed.



BOARD COMMITTEE REPORTS:

Finance Committee Report

Paul Hoffman, Chair, & Bob Tyk, CFO

- Director Hoffman reported that a special Board/Finance meeting was held on July 2 to discuss May financial statements. A quorum was established with Director Hoffman, Director Avels, and Director Cooper being present. Director Hoffman reported that one item of the make up air unit for the CCC was an emergency item needing approval, previously approved at the special Board/Finance meeting, and is now being presented for ratification by the full Board.
- Director Hoffman reported on other items discussed in the special Board/Finance Committee including the collection policy, monthly year-to-date amounts up to May 31, low patient volumes, reduction in patient length of stay, recent Medicare payment received, and decreases in operational revenues. Director Hoffman also reported that supply costs increased by over \$87,000 due to snake bite patients. There was a loss on investment income in May, as well as increases in operating losses in May, amounting in a total loss for month of \$300,000. Management was instructed to review case mix index as the District continues to have large percentages of decreases in revenue. Director Hoffman asked the public to continue to help the hospital by asking their physicians to refer their patients HDMC for services.

Human Resources Committee Report

Patricia Cooper, Chair, & Barbara Staresinic, HR Director

- Director Cooper stated that Human Resources Committee is scheduled for their quarterly meeting on August 2.

Facilities & Technology Committee Report

Dianne Swella, Chair, & Dan McClure, CIO

- Director Swella reported that the committee has not met since their last quarterly meeting in April; no report, but is scheduled to meet July 23.

Governance Committee Report

Dianne Swella, Chair, & Lionel Chadwick, CEO

- Director Swella informed the Board of the Governance action item on tonight's agenda which includes a scheduled annual review bylaws and charters, as well as ethics training. The Governance Committee met on June 12 and developed the charter review process and ethics training recommendations for inclusion on this Board agenda. A regular Board member training schedule was also developed and scheduled to begin in October; this process will continue on rotating basis over the next 18 months. Director Swella reported the first training will be with Dimitrios Alexiou of HASC to review governance matters. Formal review of bylaws has begun, and the next meeting for Governance Committee will be August 14.



Exec. Performance/Comp. Committee Report Martie Avels, Chair

- Director Avels reported that the committee is scheduled to meet July 10, 9 am.

ACTION ITEMS:

▶▶ **1. Let's Clear The Air: Smoking Cessation Program Presentation** – Karen Graley, Marketing Specialist, Wellness Committee & Dr. Lionel Chadwick, CEO

- *This action directs staff to commence a 12 month transition to establish all District facilities as smoke-free effective July 1, 2014. The action further directs staff to consider all stakeholders in the process, and to implement such policy and procedural changes to effectuate the plan.*

Karen Graley introduced the Wellness Task Force, the group in charge of coordinating the tobacco free initiative for the District. Ms. Graley presented statistics and stressed the harmful impact of smoking on the District's patients. The mission as ambassadors, project implementation is July 1, 2014. No tobacco products will be allowed on District properties. It will apply to employees, doctors, vendors, patients, etc. A steering committee will be led by Dr. Ayad Gharghoury (physician champion), Karen Graley (marketing specialist), Joe Ruddon (VP of marketing), Bill Bulkley (facilities), Donna Johnson (employee health), Barbara Staresinic (HR Director), Jackie Combs (CCC), Judy Austin (CNO/COO), James Walter (satellite offices). A plan and project roadmap will be developed and defined based on resources from other hospitals. Policies and procedures will be developed and communicated to staff and patients. External audiences (community) will be communicated with as well. Smoking cessation classes will be taught by Stan Joyce, cardiopulmonary director. Compliance will be monitored. Planning (timeline) for this project will be continuous, and Ms. Graley reported that communication has begun with the medical executive committee and will continue with department directors. Official announcement of the project to employees will be August 2013 by newsletter. October will begin open enrollment for employee benefits for smoking cessation. January 2014 communication plan and policies and procedures will be communicated by the official communication plan. July 2014 will be full implementation.

▶▶ **MOTION 13—28:** Director Hoffman made the motion to approve the action for the program implementation of a transition to a smoke-free facility, and Director Swella seconded. Director Cole, Director Cooper, and Director Avels were also in favor, and the motion passed.

2. Governance Charter Revisions – Director Dianne Swella, Chair, Governance Committee

- *The Governance Committee proposes the following revisions in its charter:*
 - *All committee charters will be reviewed annually in the 4th quarter of the calendar year*
 - *Ethics training will be completed during the 1st quarter of odd number years*



Director Swella reported that this change was designed to designate a specific time for review of committee charters after members have served on the committee for several months. Ethics training is to be completed every two years, and putting in a specific time for the training will lessen confusion.

►► **MOTION 13—29:** Director Hoffman made the motion to approve the agenda, and Director Avels seconded. Director Swella, Director Cooper, and Director Cole were also in favor, and the motion passed.

3. RATIFICATION: Installation of a new Make Up Air (MUA) unit of the Kitchen at CCC – Dan McClure, CIO

- *To direct management to proceed with the construction and installation of a new Make Up Air unit for the CCC kitchen, not to exceed \$180,000.00. Previously approved at special Board/Finance Meeting on July 2, 2013.*

Mr. McClure reintroduced the item; item was approved with the quorum in the special Board/Finance Committee meeting in July as the item required the Board's immediate attention. Director Cole asked if there was a facility maintenance plan, and Mr. McClure responded that there is a proactive maintenance plan in place. He also reminded the Board members of the history of the project, which was previously approved, but experienced problems which turned it into a major, OSHPD-approved project.

►► **MOTION 13—30:** Director Hoffman made the motion to ratify the action taken by Board at July 2 special Board/Finance meeting, and Director Swella seconded. Director Cole, Director Cooper, and Director Avels were also in favor, and the motion passed.

STANDING BUSINESS:

CHIEF OF STAFF REPORT (Service)

P. Salhotra, M.D., Chief of Medical Staff: thanked the Board for approving the smoke free facility. Dr. Salhotra commented that he is grateful the District has the new mental health contract, and he thanks the Board on behalf of the patients who would have lost the services otherwise. New GI physician will come on Board this month will help to keep the services at the District. Dr. Randhawa will be a huge asset. Dr. Salhotra commented the clinical documentation department does a great job.

ADMINISTRATIVE REPORT (Service)

Lionel Chadwick, Chief Executive Officer. Highlights:

- Joint Commission survey preparation is underway for survey planned in 2014.
- Mock survey in home health and hospice went well
- Ongoing CCC Medicare reduction update; he will continue to keep the Board updated
- Thanked Dr. Salhotra for his leadership



CLINICAL SERVICES REPORT (Service)

Judy Austin, Chief Operating Officer/Chief Nursing Officer. Highlights:

- New graduate orientation will begin in August instead of July

CONTINUING CARE CENTER REPORT (Service)

Jackie Combs, CCC Administrator: no questions were presented.

FINANCE REPORT (Finance)

Bob Tyk, CFO: no questions were presented.

MARKETING REPORT (Growth)

Joe Ruddon, Vice President, Marketing & Business Development:

- Auxiliary gifted \$12,000 to the Foundation for the memorial rose garden

FOUNDATION REPORT

Dean Moore, Foundation President: absent his meeting.

COMMUNITY HEALTH CENTERS REPORT

James Walter, RHC Director:

- New PA will begin working next Monday
- Status of FQHC application will be presented at next month's meeting if notice is received from HRSA, only the ineligible entities have been notified at this point
- Transportation – 469 one way trips have been completed to date, 34% are trips to 29 Palms, 30% is Yucca Valley; in process of incorporating behavioral health transportation of patients
- Behavioral health officially opened July 1, and on the first day they saw 19 patients, and have been visited by county representatives. Mr. Walter reported they received furniture from the county.
- Mr. Walter will be attending upcoming 29 Palms Rotary meeting
- New GI physician will be an asset

BOARD CALENDARS /NEWSLETTERS AND ARTICLES

- EPC will be on July 16 instead of July 10
- Finance – will have one more special Board/Finance meeting, and will only have the August 7 meeting, the Finance Committee meeting will be cancelled for August 28

ITEMS FOR NEXT AGENDA

None were presented.

DIRECTORS' COMMENTS

Director Hoffman – thanked Cooper for flowers, Auxiliary for donation, Dr. Salhotra and medical staff, Dr. Salhotra for taking the lead with the medical staff

Director Cooper – thanks to Dr. Salhotra, to all presenters

Director Avels – congratulated Shelly Vincent for her work in her department, and said that she is excited about mental health services



Director Swella – thanked Shelly for presentation, and thanked all for their hard work
Director Cole – thanks to all

ADJOURNMENT TO CLOSED SESSION AND CLOSED SESSION REPORT

CLOSED SESSION – 7:30 pm

- Pursuant to section 32155 of the Health and Safety Code
Report Involving Quality Assurance Matters
- Pursuant to section 32106 of the Health and Safety Code
Report Involving Trade Secret
Estimated date of public disclosure: August 2013
- Pursuant to Government Code section 54956.9(b)(1) – Potential Litigation (1 case)

ADJOURNMENT TO CLOSED SESSION AND CLOSED SESSION REPORT – 9:30 pm

The Board of Directors met in closed session to receive information on a quality matter, and a trade secret matter, as well as a potential litigation issue. The Board took no action at this time.

ADJOURNMENT:

On motion duly made and seconded Director Cole adjourned the meeting at 9:31 pm.

Minutes recorded by A. Walton, Board Clerk



Korina Cole, President, Board of Directors



Dianne Swella, DC, Board Secretary



Service Quality People Finance Growth



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

July 22, 2013 at 4:00 p.m.

Helen Gray Education Center Boardroom
6601 White Feather Road, Joshua Tree, CA 92252
760-366-6262

**Please turn all cell phones/pagers to off or vibrate.*

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.*

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Conflict of Interest Advisement

Hi-Desert Memorial Health Care District Board members please be advised: If an item on the meeting agenda relates to the provision of services by you, your immediate family, the entity you represent, or any person who has made \$250 in campaign contributions to you during the last 12 months, or if approval or disapproval of an agenda item would have a foreseeable material affect on an economic interest of you, your immediate family, or the entity you represent, then please follow these procedures:

“When the agenda item is first introduced, please immediately announce that you are recusing yourself from participating in the agenda item, and then refrain from discussing, voting on, or otherwise influencing the Board of Directors’ consideration of the agenda item.”

**TAB
LOCATION**

IN ATTENDANCE:

Board of Directors: Director Cole, President
Director Avels, Vice President
Director Hoffman, Treasurer
Director Swella, Secretary
Director Cooper, Member-at-Large
Lionel Chadwick, CEO
Angela Walton, Board Clerk

CALL TO ORDER – 4:04 pm

PUBLIC COMMENTS

The public comment portion of this agenda provides an opportunity for the public to address the Board of Directors on items not listed on the agenda that *are of interest to the public at large* and are within the subject matter jurisdiction of this Board. The Board of Directors is prohibited by law from taking action on matters discussed that are not on the agenda, and no adverse conclusions should be drawn if the Board does not respond to public comments at this time. Comments that concern individual incidences of patient care are welcome, however we encourage doing so only after other administrative avenues for redress

▶▶ Indicates an agenda item to be considered for action by the Board of Directors.

have been fully exhausted. In all such instances we will be unable to ever respond publicly due to patient confidentiality obligations. In all cases, your concerns will be referred to the Chief Executive Officer for review and a timely response.

A "Request to Speak" form shall be submitted to the clerk of the Board and can be found at the entrance to the board room. Comments are to be limited to three minutes per speaker and shall not exceed a total of 20 minutes. All comments are to be directed to the Board of Directors and shall not consist of any personal attacks. Members of the public are expected to maintain a professional, courteous decorum during their comments. Public input may be offered on an agenda item when the item comes up for discussion and/or action. Members of the public who wish to speak shall proceed to the podium when called by the President of the board. Please state your name and community of residence for the record.

There were no public comments.

APPROVAL OF MEETING AGENDA – The agenda was approved as presented.

ADJOURNMENT - CLOSED MEETING – 4:05 pm

- Pursuant to section 54957 of the Government Code
Conference involving personnel/benefits issue

ADJOURNMENT- OPEN SESSION & CLOSED SESSION REPORT – 6:15 pm

CLOSED SESSION REPORT:

In closed session, the Board received and discussed information regarding a personnel/benefits matter. The Board took no action at this time.

DIRECTORS' COMMENTS

Director Cole: no comment

Director Avels: no comment

Director Hoffman: no comment

Director Swella: no comment

Director Cooper: no comment

ADJOURNMENT – 6:15 pm

Minutes recorded by A. Walton, Board Clerk



Korina Cole, President, Board of Directors



Dianne Swella, DC, Board Secretary





HI-DESERT MEDICAL CENTER

HI-DESERT MEMORIAL HEALTH CARE DISTRICT
Quality Health Care Happens Here

Service Quality People Finance Growth



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

July 31, 2013 at 12:00 p.m.

Helen Gray Education Center Boardroom
6601 White Feather Road, Joshua Tree, CA 92252
760-366-6262

Teleconference Location for Director Swella:
44 Marricopa Court, Palm Desert, CA 92211
760-401-0563

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IN ATTENDANCE:

Board of Directors:

Director Cole, President
Director Avels, Vice President
Director Hoffman, Treasurer
Director Swella, Secretary (attending by phone)
Director Cooper, Member-at-Large
Angela Walton, Board Clerk

CALL TO ORDER – 12:02 pm

PUBLIC COMMENTS

None.

▶▶ Indicates an agenda item to be considered for action by the Board of Directors.

APPROVAL OF MEETING AGENDA – The agenda was approved as presented.

ADJOURNMENT - CLOSED MEETING – 12:03 pm

- Pursuant to section 54957 of the Government Code
Conference involving personnel/benefits issue

ADJOURNMENT- OPEN SESSION & CLOSED SESSION REPORT – 1:05 pm

CLOSED SESSION REPORT:

In closed session, the Board received and discussed information regarding a personnel/benefits matter. The Board took no action at this time.

DIRECTORS' COMMENTS

Director Cole: no comment

Director Avels: no comment

Director Hoffman: no comment

Director Swella: no comment

Director Cooper: no comment

ADJOURNMENT – 1:05 pm

Minutes recorded by A. Walton, Board Clerk



Korina Cole, President, Board of Directors



Dianne Swella, DC, Board Secretary