

Hi-Desert Memorial Health Care District dba **Morongo Basin Healthcare District**  
**BOARD OF DIRECTORS REGULAR MEETING MINUTES**  
**July 2, 2020 at 6:00 p.m.**

*Convened via GoToMeeting, an electronic, remote-site platform temporarily permitted as per the Executive Order issued by California's Governor in response to the COVID-19-19 pandemic. No physical site was available for the assembly.*

- **Mission Statement:** *To improve the health and wellness of the communities we serve.*
- **Vision:** *A healthy Morongo Basin.*
- **Core Values:** *Commitment, Collaboration, Accountability, Dignity, Integrity.*

Board of Directors:

- Director Doyle, President
- Director Evans, Secretary
- Director Markle-Greenhouse, Vice President
- Director Armstrong, Treasurer
- Director Sullivan, Member at Large

Guests:

- Paul Hoffman, CHC board member
- Beverly Scott, CHC board member
- Jenna Hunt, Hi-Desert Star, media

Administrative Staff:

- Jackie Combs, CEO
- Karen Graley, Board Clerk
- Debbie Anderson, Controller
- Cindy Schmall, Director Operations
- Michelle Zicarria, Performance Improvement Manager
- Janeen Duff, Manager Virtual Dental Home Program
  
- Cassidy Zimarik, Z107fm, media
- Linda Evans, Chief Strategy Officer, Desert Mkt, Tenet
- D. Dunkley, PhD, RN

## CALL TO ORDER

Director Doyle called the meeting to order at 6:01 p.m. The meeting was convened using the electronic platform of Go-To-Meeting; there was no physical assembly.

## ROLL CALL

Karen Graley, Board Clerk, conducted roll call and declared a quorum.

## OBSERVANCES

Director Armstrong read the mission, vision and core value statements.

Director Evans led the assembly in the pledge to the American flag.

Director Doyle asked Cindy Schmall, Director of Operations, to provide an overview of the, Go-To-Meeting electronic platform.

## PUBLIC COMMENT

Linda Evans, Chief Strategy Officer, Desert Market, Tenet addressed the board: Thank you for the opportunity to provide an update on Hi-Desert Medical Center (HDMC) and Continuing Care Center (CCC), on behalf of CEO, Karen Faulis,

- HDMC currently has one positive COVID-19 patient and one patient in-house and one patient waiting for test results; the CCC has NO positive residents at this time.
- In an effort to improve efficiencies, a business decision was made to consolidate radiology and lab services to the hospital campus and close the Airway Outpatient facility; all services remain the same (i.e. bone scan machine will now be servicing patients at the hospital).
- Following California Department of Public Health guidelines, we are accepting admissions to the subacute, SNF and long term care units at the CCC.
- Visitor restrictions remain in effect at both facilities as per regulations.



- **GREAT NEWS!** HDMC is now a rotation site for Desert Regional Medical Center’s General Medical Education program residents! Neuro residents are already rotating at the FCPP/Foundation clinic and will rotate at the hospital if the need arises on their clinic day. Rotations at both HDMC and CCC will start in August and will include Internal Medicine, Emergency Room, and Family Practice residents.

Director Doyle thanked Ms. Evans for her time and the report.

### **APPROVAL OF MEETING AGENDA**

**Motion 20-35:** Director Evans motioned to approve the meeting agenda as presented; motion was seconded by Director Armstrong; the motion passed by unanimous vote.

### **APPROVAL OF CONSENT AGENDA**

The Consent Agenda presented the following items for approval:

- Minutes: Regular Meeting of the Board of Directors, June 4, 2020.

Director Sullivan requested that the minutes be pulled for discussion. He stated that he was not at the June 4 meeting but feels compelled to comment:

1. The minutes on page 2 refer to a “policy” for wearing face masks. He clarified that we do not have a “policy” but we have a “practice.” Director Evans agreed to amend the minutes to change “policy” to “practice.”
2. Director Sullivan requested that the wearing masks be presented for discussion on the next agenda.
3. Director Sullivan asked for clarification on the hanging / incomplete phrase in that same paragraph. Director Evans clarified that it should read, “as healthcare leadership we should follow CDC guidelines.”
4. The June 4 meeting minutes will be amended to read: “Director Evans said she supports Director Doyle’s statement 100%. ~~District policy states those~~ *District practice has been those* coming onto District property will wear a cloth mask. And as leadership of the healthcare District, *we should follow CDC guidelines* (minutes amended at July 2, 2020 meeting).”

**Motion 20-36:** Director Greenhouse motioned to approve the minutes as amended; motion seconded by Director Evans; motion passed; Director Sullivan and Armstrong abstained from the vote because they were not present at the June 4 meeting.

### **ACTION ITEMS**

#### **DECLARATION REGARDING RACISCM – Director Evans**

Director Evans introduced the topic by reading Resolution #20-04 which is presented in the board packet. She thanked Jackie Combs, CEO, for her contribution to the resolution content.

Director Sullivan said he was looking for a reason to vote yes on the resolution and requested additional information toward that end. He presented his list of inquiries and comments.

1. The second paragraph reads: “**WHEREAS**, the Morongo Basin Healthcare District bylaws state within the limits of community district resources, to promote healthcare resources to the community, regardless of sex, race, creed, religion, color, or ancestry or national origin and any other legally protected class.” Why is it necessary to take up a subject for a particular race when we provide care to all races?
2. Paragraph 4 reads: “**WHEREAS**, Social Determinants of Health are defined by the Centers for Disease Control as ‘life enhancing resources, such as food supply, housing, economic and social



relationships, transportation, education, and healthcare, whose distribution across populations effectively determines length and quality of life.” We have a policy that deals with this.

3. Paragraph 5 reads: “**WHEREAS**, the Center for Disease Control states ‘Inequalities in the US are large, persistent, and increasing. Research documents that poverty, income and wealth inequality, poor quality of life, racism, sex discrimination, and low socioeconomic conditions are the major risk factors for ill health and health inequalities.’ And ‘these systematic, avoidable disadvantages are interconnected, cumulative, intergenerational, and associated with lower capacity for full participation in society. Great social costs arise from these inequalities including threats to economic development, democracy, and the social health of the nation.’” The CDC is addressing nation-wide data, but we focus on local populations.
4. Paragraph 6 reads: “**WHEREAS**, The American Public Health Association’s past president Camara Phyllis Jones stated ‘Racism is a system of structuring opportunity and assigning value based on the social interpretation of how one looks (which is what we call race), that unfairly advantages other individuals and communities, and saps the strength of the whole society through the waste of human resources.’” The American Public Health Association is again, addressing this on a national level, and policy on a national level, that is trying to be imposed on the local population.
5. Paragraph 8 reads: “**WHEREAS**, on June 9, 2020 San Bernardino County Board of Supervisors declared Racism a Public Health Crisis, and Leonard Hernandez, County Chief Operating Officer said ‘Racism is a Public Health Crisis which results in societal concerns and may result in measurable detriments to persons and communities of color in the delivery of and access to wellness, economic development, and opportunity, public safety, housing, and education.’” This paragraph addresses the regional population; we are a subdivision of San Bernardino County and it has an existing policy for this.
6. Paragraph 10 reads: “**WHEREAS**, ‘Race is a social construct with no biological basis’ as identified by a resolution passed by Franklin County Commissioners.” Who are the Franklin County Commissioners?
7. Paragraph 11 reads: “**WHEREAS**, on June 1, 2020 American Nursing Association President Ernest J. Grant said ‘Racism is a longstanding public health crisis that impacts both mental and physical health. The COVID19 Pandemic has exacerbated this crisis and added to the stress in the black community, which is experiencing higher rates of infection and deaths.’” We are not experiencing deaths in the Morongo Basin from COVID-19.
8. Paragraph 12 reads: “**WHEREAS**, the American Medical Association House of Delegates and Board of Trustees ‘recognizes that Racism in its systemic, structural forms is an urgent threat to public health, the advancement of health equity, and a barrier to excellence in the delivery of medical care.’” The American Medical Association is concerned about the national level and does not speak to the local level.
9. Paragraph 14 (Now, Therefore, be it Resolved...):
  - Regarding item #1: “Promote equity by enhancing studies and education aiming to understand, address, and reduce health disparities and racism.” Director Sullivan asked how are we going to achieve this goal. San Bernardino County has taken the lead on this which is appropriate at the county level.



- Regarding item #5: “Study and evaluate existing District and community policies and practices through a lens of racial equity to promote and support changes that prioritize all areas of health in an equitable way, especially for people of color, and mitigates exposure to adverse childhood experiences.” Director Sullivan stated “We are carving out a specific group of people for special treatment; and, what does it mean to mitigate adverse childhood experiences.”
- Regarding item #6: “Based on community assessments, identify clear goals and objectives to improve community health disparities and periodically reports to the Board progress on the goals.” Director Sullivan referenced Dr. Martin Luther King and that he wanted blacks to be treated the same as other populations. To call for special treatment to blacks is a racist position. Director Sullivan noted that, “In order for this Resolution to be appropriate, it’s important to call out that it assumes the District has treated populations of color poorly.”

Director Doyle sought to clarify Director Sullivan’s reference to the District being a subdivision under San Bernardino County. “This is not true; we exist outside of County jurisdiction as a separate and distinct healthcare district; we are federally regulated; we exist in the County but are not a subdivision of the County; we are independent and they have no jurisdiction over us. We answer to LAFCO but not the County.” There was discussion about the legal position of the District without a concluding consensus.

Director Evans responded to Director Sullivan’s resolution comments.

“A health disparity refers to a higher burden of illness, injury, disability, or mortality experienced by one group relative to another.

“Yes, San Bernardino County and national organizations have recognized this health disparity for some time, based on data. This resolution says we need more data; it does not say that any member of the staff or community is racist. It presents a lot of data. In the medical field, many decisions and perspectives are driven by national data. We are responding locally to data from WHO, and other national organizations. We have a responsibility as a healthcare district to respond to the national data which is that more people of color are dying from COVID-19. It is not saying any person should have any special treatment over another. This resolution is saying that the national data needs to be taken into consideration in the care of all patients.

“I looked at our bylaws, the community needs assessment document, and – yes, we need more data. We don’t have enough data from Morongo Basin. The resolve of the resolution is stating we need more data, more studies. If it’s occurring nationally, it is occurring locally.

“Regarding adverse childhood experiences, the District is developing the women’s and children’s CPSP program to address some of the disparity in births and child development.

“Whether or not board members recognize regulatory agencies is not my responsibility to address; but the business of the District incorporates national regulatory-agency data. It’s more than national data. We solve health issues with collaboration; My intent for this resolution is to recognize the lack of data and how it is impacting members of our community.”

Director Greenhouse commented, “The initial COVID-19 data was based on senior citizen populations. As the virus expanded further into other communities, the data changed because larger populations were affected. San Bernardino County has the most up to date data in our region. The



disparity is now evident in Black and Latino communities, not just the senior population. I think what Director Evans is attempting to address is that there is a disparity.”

Director Armstrong complimented Director Evans, saying that she wrote an incredible resolution that shows her passion and is well constructed. “But, I find it amazing that five white middle-class people are going to weigh in on this topic,” he said. He continued by sharing an account of a local man.

“In 1976, there was a black man who had served with honors in the U.S. Air Force. He saved his money and moved to Yucca Valley. His intention was to open a car dealership and contacted three realtors who refused to show him properties. He saw a house being built and contracted to buy that house. He was then told that he couldn’t buy it because the CC&R stated property could not be sold to a person of color or Jewish faith. He went on to create the most productive car dealership in the Ford world and was featured in Forbes Magazine. He still lives in the Basin. He eventually built homes in our community. Those CC&Rs still exist at that Yucca Valley housing development; and he experiences prejudice even now in his current business because of his color.”

Director Armstrong proposed that instead of passing a resolution that has no teeth to make change within the community, suggested that we develop programs that are outside the box and really effect real change in the Basin. “This resolution is going to be archived and we’ll never address the issue again. Let’s really do something measurable about it.”

Director Evans responded that she feels this Resolution is recognizing data and is putting forth a worthwhile action. “It was supposed to open up discussion as it cannot address the problem in its entirety; but it’s a huge thing that we would give our employees training, and collect data locally that medical decisions can be based on.”

Director Greenhouse commented that this Resolution is a springboard to effect change.

Director Doyle thanked the board for having the guts to have this important conversation in this public forum. “This is not an easy subject, it is difficult. Bob’s story illustrates that we still have active racism in our community. I agree that a piece of paper is empty without action. Inside healthcare there are many disparities, such as two different interpretations of kidney function: one for African Americans and another for other populations. It is based on medical data. My assumption had been that it’s based on physiology, but it is not. This Resolution suggests we hold staff accountable for information and training. As leaders of this healthcare district, it’s imperative that we set the tone appropriately.”

Director Sullivan commented, “I was looking for a reason to vote for the Resolution. I believe we do have racism in our society. Bob’s story is where the rubber meets the road. I don’t believe that the District holds prejudices against the black population. This Resolution is looking to address a problem that does not exist in our community.”

Director Evans stated, “For public benefit and the minutes, I want it put on the record that there’s a lot of opinion on this Resolution. All the information included in the Resolution is based on data. It does not say that any member of the District has treated any member of the community any differently from another. Its purpose is to acknowledge the disparities that exist and say that we will address those disparities within our community.”

Director Doyle called for the motion.



**Motion 20-37:** Director Greenhouse motioned to approve Resolution #20-04 Declaring Racism as a Public Health Crisis; second by Director Evans; a roll call vote was administered by the Board Clerk; the motion passed 3:2.

Director Armstrong:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Abstain	<input type="checkbox"/> Absent
Director Doyle:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Abstain	<input type="checkbox"/> Absent
Director Evans:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Abstain	<input type="checkbox"/> Absent
Director Greenhouse:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Abstain	<input type="checkbox"/> Absent
Director Sullivan:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Abstain	<input type="checkbox"/> Absent

## PRESENTATION

### FEEDING MORONGO BASIN – Jackie Combs, CEO

A video was shown depicting assembly of food boxes on the La Contenta campus and the two distribution events at Split Rock and Yucca Valley campuses, June 20. Ms. Combs narrated the video while it played. Additionally,

- The Hunger Help Line is taking calls and has received over 100 requests for delivery. LIFT Transportation drivers are making deliveries to residents' homes.
- Cindy Schmall orders the food from Stater Bros and US Foods. Ms. Combs stated it is amazing what's not available and that staff has improvised food box content based on what is available.
- The first "no-contact-drive-through" distribution event swas June 20 at Yucca Valley and 29 Palms health centers. Joshua Tree National Park ranger, Citizens Patrol and Navy and Marine volunteers assisted with the events.
- Staff has begun assembling the next round of boxes. It's a labor intensive process. We could have given out more boxes if we had them. We now plan for staff to assemble boxes every other Friday, and assemble boxes on Saturdays with community group volunteers.
- We've established the third Saturday of each month as the distribution date starting at 7 a.m. We've rerouted traffic to avoid congestion on Hwy 62 at both the Yucca Valley and Split Rock campuses.
- We've received thank you notes and Facebook comments about the project. "I want to thank my team for doing an excellent job."

Director Sullivan stated it was a terrific program. "This idea came from Director Armstrong and took immediate root. The merits were obvious to everyone involved. I'm very happy that the roll out has been successful; we can be very proud that the food is being delivered to the people who need it."

Director Armstrong stated he appreciates the board's and staff's commitment to the program; and that he was delighted to read the article in the Star. "This is something people will remember, that the healthcare District stepped up to meet a need in the community."

Director Evans thanked staff for their commitment, stated she was pleased that the different phases of the roll out were in place.

Director Greenhouse said, "I've never seen a vehicle so well packed," referring to the transport trucks at the delivery sites. "I had some minor concerns that there was some abuse of the system but it was minimal. Most of those at the distribution site were grateful."



Director Doyle thanked the staff for working very hard putting the boxes together. She thanked Cindy Schmall, complimenting her choice of foods that give a well-rounded nutritional value and can be sustained over time.

## **DISCUSSION**

### **VIRTUAL DISTRICT BOARD MEETINGS – *Director Doyle***

Director Doyle introduced the discussion because of board member concerns about the online meeting process and the ways in which we were conducting those meetings. She acknowledged that early on she was not skilled at insuring that all board members and community members had opportunity to speak at appropriate times. Because of the COVID-19 risk at local, county and state levels, she believes online meetings make sense. Acknowledging a previous conversation with Director Sullivan, she invited him to share ways we can improve online board meetings.

Director Sullivan stated that tonight's meeting is the exception to previous meetings. "I'm satisfied the way tonight's meeting is progressing. Previously, we did not have full transparency. Conversations with some people indicated that they missed opportunities to comment during the past remote meetings."

Director Armstrong, agreed that tonight's meeting was better. "I find online meetings to be exclusive, not inclusive. I raised the question about Brown Act compliance because the governor's executive order expired in June. I'm opposed to these online meetings; I think people need the opportunity to see each other when they participate."

Director Greenhouse acknowledged that the meeting seems to be working and that there is ample opportunity to speak up and be heard.

Director Evans stated, "The CEO checked with legal to make sure we are in compliance with the Brown Act; participants should speak up as desired. I'm happy we're setting the example of social distancing during the pandemic."

Director Doyle commented, "We are a healthcare district so the promotion of health is our priority. I also respect individuals who are not able to wear masks for whatever reason. But, to make sure we are not transmitting COVID-19, we're going to stay online for a while for our board meetings. I have checked in with legal, consulted with a specialist in the Brown Act, and we are well within the law to host meetings online at this time. When we have physical meetings we do not provide transportation to them, however, the majority of the community have a telephone and are able to call in to participate in the online meetings."

Director Armstrong asked to go on the record that he is in disagreement with that decision, and he encouraged the board to move to physical meetings as soon as possible.

## **REPORTS**

### **FINANCIAL REPORT – *Presented by Debbie Anderson, Controller***

Ms. Anderson reported that units are still down in May and will be reflected in the net patient service revenue, which is under budget. However, grant income has been recognized once again this month, making up for the loss of revenue due to service reductions. Recognition for prior months' losses have taken place in May, so even though this month clinics net income shows income, it accounts for losses that took place in February and March. Net income from February to May is essentially zero, due to the grants "filling in" for the missing revenue. As such, year to date net income for the clinics is about



\$87,500, where it was before the whole pandemic hit. Management feels this rationale for recognizing income is in line with the whole intent of the stimulus & grant moneys awarded.

Net Income Month	Clinics Net Inc	Net Income Month	Clinics Net Inc
July-19	(20,661)	February-20	(10,837)
August-19	12,343	March-20	(80,115)
September-19	57,617	April-20	39,199
October-19	44,539	May-20	51,420
November-19	(88,937)	June-20	-
December-19	(3,356)		(333)
January-20	85,996		
	87,541	YTD Clinic Net Income	87,208

Other highlights for the month include transportation starting up again toward the end of May as well as IT purchases to bolster telehealth capacity. Due to continuing restrictions on gatherings, no community in-person-outreach events have taken place, nor staff forum meetings, which have helped other direct expenses to be under budget. Finally, cash saw an increase due to a) grant moneys that were awarded and received from HealthNet in the amount of approximately \$125,000 to increase telehealth capacity and b) receipt of a HHS Rural Health Area payment for approximately \$725,000. Both have been placed into balance sheet liability accounts.

Consolidated May 2020 operating income after allocation came in at \$289,498, and the change in net position came in at \$253,311, both of which exceeded budgeted expectations. Year to date consolidated operating income after allocation came in at \$2,227,183, and the change in net position lands at \$1,790,491, both of which exceed budgeted expectations.

May 2020 operating income after allocation came in at \$233,127 and the change in net position came in at \$201,891, both of which exceed budgeted expectations. District operating income after allocation is coming in at \$2,105,705 and the change in net position came in at \$1,703,283 both of which continue to exceed budgeted expectations.

May 2020 operating income after allocation came in at \$56,370 and the change in net position came in at \$51,420, both of which were over budgeted expectations. Clinic operating income after allocation is coming in at \$121,478 and the change in net position came in at \$87,208, both of which exceeded budgeted expectations.

Balance Sheet: Cash is up due to receipt of monies from the HealthNet grant as well the HHS Stimulus money. Accounts receivable is down which reflects the past two months of reduced services. PTO liability is up, which reflects the lack of utilization that causes the fringe benefits to be over budget. Deferred revenue continues to increase current liabilities.

**Motion 20-38:** Director Evans motioned to accept the financial report as presented; motion seconded by Director Greenhouse; motion passed by unanimous vote.

MORONGO BASIN HEALTHCARE DISTRICT UPDATE, Jackie Combs, CEO

Ms. Combs referred the Directors to Tab 4 of the agenda packet for her written report and provided additional information as follows:

- Cindy Schmall has done a great job in turning open dental bays into individual rooms for compliance with COVID precaution standards. Dental is now providing the same level of patient services as pre-COVID-19.





- Congratulations to Kathy Alkire, our Diabetes Prevention Program has been awarded full recognition by the Center for Disease Control and Prevention (CDC) for the delivery of a quality, evidence-based program that meets all of the CDC standards for recognition, and for demonstrating a successful lifestyle change program in the prevention of type 2 diabetes. This process typically takes up to 36 months, but because of Kathy’s efforts, our program was recognized within 18 months.

There were no questions from the directors regarding Ms. Combs’ report.

### **CALENDAR REVIEW AND COORDINATION**

The calendars for the Board of Directors were reviewed and coordinated.

- The next food box distribution event is July 18, 2020;
- Director Evans asked when the next Foundation meeting is scheduled. Discussion about a date; resolved to meet August 20.

### **DIRECTOR COMMENTS**

- Director Armstrong: Thanked everyone for a good meeting. “We have elections coming up soon for District board; I’ve come to the conclusion that I find myself regularly in conflict with this board and I don’t want to tear down what I want to build, so I am announcing that I am not running for reelection in November.”
- Director Evans: “Thank you to board and staff. Our conversations tonight were not easy conversations, but our constituents have the right to hear those conversations. I’m happy that we were able to come together and pass this resolution. I’m looking forward to how this develops and how we will impact our community.”
- Director Greenhouse: Thanked staff and board members for the meeting.
- Director Sullivan: “It’s been my honor to represent the residents of the Morongo Basin for six years. I’ve met the challenges of the office ethically and spoke my conscience. I have plans that are in conflict with public service; thank you for the opportunity to serve. I will not be running on the November ballot.”
- Director Doyle: “I am saddened that our two gentlemen will not be running for reelection this next ballot. You will both be missed. We have been a better board working together; I believe in democracy and that a difference of opinion does not mean we are at odds. I appreciate the collaboration we’ve had in the past. Also, I want to thank District leadership and line staff as we have traveled the COVID-19 pandemic together.”

### **MEETING ADJOURNMENT TO CLOSED SESSION**

Director Doyle adjourned the open session at 7:50 p.m. for a brief break before convening the closed session.

### **MEETING ADJOURNMENT TO CLOSED SESSION**

Closed session convened at 7:59 p.m.

- *Pursuant to Government Code section 32106 of the Health and Safety Code: Report involving Trade Secret. Estimated date of public disclosure is projected for September, 2020.*
- *Pursuant to Government Code section 54957 of the Health and Safety Code: Report involving Personnel: Employee Performance Evaluation, CEO.*



**RECONVENE TO OPEN SESSION** at 9:10 p.m. to receive Closed Session report. Director Doyle reported that there was no report or follow-up action from the closed session for Trade Secrets. The CEO evaluation will be finalized and given to the CEO as discussed.

**MEETING ADJOURNMENT**

The meeting was adjourned at 9:12 p.m.

*Board meeting minutes recorded by K. Graley, Board Clerk.*



Marge Doyle, President



Misty Evans, Secretary