



Hi-Desert Memorial Health Care District dba
Morongo Basin Healthcare District
BOARD OF DIRECTORS REGULAR MEETING MINUTES
September 2, 2021 at 6:00 p.m.

Convened on site restricted to board members and staff; public invited to attend 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 pandemic.

- **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 Brown
- Director Evans
- Director Markle-Greenhouse
- Director Mondary
- Director Savitt

Guests:

- Linda Evans, Chief Strategy Officer, Desert Mkt, Tenet (*remote*)

Administrative Staff:

- Mitch Hall, CEO
- Karen Graley, Board Clerk
- Cindy Schmall, COO
- Deborah Anderson, CFO
- Joe Ruddon, Director Community Programming

- Beverly Scott, CHC board member (*remote*)
- Pat Cooper

CALL TO ORDER

Director Greenhouse called the meeting to order at 6:03 p.m. The meeting was convened on the La Contenta campus and by electronic platform using Go-To-Meeting.

ROLL CALL

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

OBSERVANCES

Director Savitt read the mission, vision, and core value statements.
Director Evans led the assembly in the pledge to the American flag.

PUBLIC COMMENT

No public comments were initially presented.

APPROVAL OF MEETING AGENDA

Motion 21-53: Director Evans motioned to approve the meeting agenda as presented; motion was seconded by Director Brown; the motion passed by unanimous vote.

APPROVAL OF MEETING MINUTES

Motion 21-54: Director Mondary motioned to approve the minutes the Board of Directors with changes; motion seconded by Director Savitt; motion passed by unanimous vote.

- Minutes: Regular meeting of the Board of Directors, August 5, 2021
- Minutes: Special meeting of the Board of Directors, August 24, 2021

DESERT CARE NETWORK UPDATE – *Linda Evans, Chief Strategy Officer, Desert Mkt, Tenet*
Ms. Evans thanked the board for the opportunity to provide an update about Hi-Desert Medical Center (HDMC), the Continuing Care Center (CCC) and Desert Care Network (DCN), on behalf of Karen Faulis, CEO, HDMC. She congratulated Director Savitt on being seated on the Board.



COVID-19 Update:

- HDMC acute hospital has five positive COVID-19 patients. COVID census peaked at 12 positives in hospital about ten days ago. The CCC has zero COVID-19 positive residents.
- DRMC currently has 35 positive COVID-19 patients. JFK currently has 17 positive COVID-19 patients.
- Personal Protective Equipment remains in adequate supply at all facilities.
- With new CDPH regulations which started mid-August, unvaccinated employees at our hospitals are being tested twice weekly.
- Mandated vaccinations for all healthcare workers by September 30. Desert Care Network hospitals have been obtaining vaccination status, providing education opportunities, vaccine clinics and receiving medical and religious exemptions for review.
- Vaccine clinics for employees and providers remain in place and have increased in frequency for easier access and convenience.
- Community: Hospitals are in discussions with the County(s) to determine vaccine allocation and potential for community clinics to offer the “third” dose, per State & CDC guidelines.

Capital Project Update:

- The Cerner EMR Long Term Care (LTC) Module for CCC work continues with an anticipated go-live early in 2022. This will allow for CCC to also be completely on Cerner documentation.
- The CCC flooring replacement project will begin September 7.
- The sterile processing department air handler replacement project is in process with an anticipated completion date in November.
- Completion of hospital roof project to follow.

Mitch Hall asked Linda about the CDPH mandate for healthcare workers and its impact on the hospitals’ staffing. She stated they are projecting a significant loss of healthcare workers across the state. Staffing was already a challenge, and now with the mandate even more so. There is a trend of healthcare workers leaving healthcare for new careers. Patient census is currently high for summer months and there is concern about staffing when flu season arrives. Because the loss is across the healthcare industry, their hope is that the mandate may be changed to alleviate the crisis.

Director Brown inquired about the mandate exemptions. She stated they are focused on validating exemption requests so they align with the state’s requirements. We want to respect staff exemptions but they have to meet the state’s criteria.

Director Savitt asked about vaccine boosters and if she had received information about the boosters being mandated. Ms. Evans stated there had been no communication about the booster.

PRESENTATION

CALIFORNIA DEPARTMENT OF HEALTH (CDPH) VACCINATION MANDATE FOR EMPLOYEE VACCINATION – Mitch Hall, CEO and Cindy Schmall, COO

Mitch Hall introduced the presentation stating compliance with the CDPH mandate is a challenge for the District. He stated that the District has consulted legal counsel three times looking for mandate relief, none is available. “We’re hoping the state modifies the mandate.



Because we are expecting changes from CDPH, we have not enacted a policy for the District. When there is conclusion to the issue, we will present a policy for approval.”

He said the District is working to improve its financials and increase patient access to care, but the mandate is compromising that effort with the threat of fewer employees. The exemptions are very strict and require justification. We’ve been implementing changes to comply with the mandate.

Cindy Schmall stated that the District has spent a great deal of time complying with the letter of the law as issued on August 5. All employees and contractors have received a document identifying their status: vaccinated or exempt by a religious belief or medical issue. We will then follow up with those requesting exemptions.

The mandate is quite specific for medical exemption requiring a documented allergy to an item in the vaccine. The religious exemption requires the employee’s faith organization to provide documented tenant to their exemption. The onus is placed on the employer to verify that the exemption is valid.

We have approximately 105 employees and contractors. We have received: 55 confirmations of vaccination; 11 exemption requests; and six refusing the vaccine without exemption. That leaves about 30 employees who have not identified their status. The COVID team is visiting each non-compliant employee as a point of education and to allay fears related to receiving the vaccination.

The mandate states that employees must comply with law by September 30, or they cannot work. Those out of compliance will be given unpaid leave until they come into compliance. The District will hold their position for a reasonable time in hopes that they will come into compliance. Cindy stated she knew of at least one provider who refuses the vaccine and will not request exemption. Some staff have volunteered they will change careers and leave healthcare.

As an employer, we must comply with the mandate. Employees must be vaccinated or meet one of the two exemptions; otherwise, they are not allowed to work. Exempt employees may continue to work but must be tested once a week.

She attended a meeting with county and local leadership to assess vaccinations in the Basin; only 44% of Morongo Basin is vaccinated. The county and local leadership are trying to educate the vaccination-resistant population.

Director Mondary asked if ACHD has attempted to connect with state leadership to request a modification to the mandate to extend the compliance timeframe for employees to receive the two Moderna shots. Director Evans serves on the ACHD board and advocacy committee and will reach out to see if they are taking a proactive effort. She suggested that we write a letter pleading our position that we are in a rural community where staffing is difficult.

He also asked if we have protective language in consultant contracts to protect the District from non-compliance. Mitch Hall stated there is general language about following company policy otherwise the contract would be terminated. Mitch said he has spoken with contacts in prestigious hospitals in the state of California about the mandate. Those institutions, with all their influence, are experiencing the same loss in staff and are pushing back with their high dollar lobbyists. The process requires time. In the meantime, the large facilities with bigger budgets are capturing available travelers and locums to alleviate their staffing crisis.



Director Mondary then asked if he could read a prepared statement:

I have heard several healthcare workers say they have formed the opinion that they are not getting the COVID vaccine.

What if an opinion turns out to be wrong? What if the vaccine that is required for us to take care of COVID 19 patients is our protection against contacting COVID 19? Will others who don't have the same opportunity to be shielded survive?

What if your repeated exposure to COVID 19 with PPE and a vaccine provides you even more protection against this virus but, will others who don't have the same, survive?

Did you know that the Gallup poll shows that nurses are the most trusted and respected profession 19 years running? Our patients, past, present, and future have faith in your profession and care...they value our opinion. What if an opinion against Covid 19 vaccinations happens to be wrong?

The nursing profession has worked hard to be seen as a profession based on science, research, and caring.

There is evidence regarding COVID 19 vaccines that lives are being saved. Opinions are important and valued when it comes from a person we respect and trust. We all like to be heard, especially when being required to do something we don't want to do. However, an opinion is still an opinion. It is not evidence, and we should be all about evidence-based practice.

Over the course of my career, I have seen generational poverty, heck I have experienced it! I am a middle child of 5 siblings with divorced parents and an absentee father. I grew up on government subsidies. I was the first in my family to graduate High School, that includes my mother. I am the only member of my family with a college degree. My siblings have had illegal drug use problems. My younger brother and sister have served time in jail and prison, my father died in prison. I know what it means to get an education and to be a productive member of our community. I am not unlike many of our employees, maybe even like some of our Board Members. That I wanted to grow up and make a difference. I went to college and had a great career in law enforcement, and I know that people sought and respected my opinion, but my "opinion" did not endanger people's lives.

Because we do have the knowledge and experience our immediate and extended family look to us for our opinion and see what we are doing in these critical times. I ask our employees, especially our nurses, do you remember having to have vaccines to get into Nursing school? What was your opinion then? I have heard several nursing students say they will do whatever it takes to become a nurse. They want to get a degree, break the cycle of generational poverty, and help their community. Your families are still looking to you for your guidance and advice. This may not be the time to express your "Opinion" but instead look at the facts and look at the research and base your conduct on those facts and not opinion.

Having a 37-year law enforcement career I am sensitive to the personal rights of others. I don't like the government interfering with my life and giving mandates to people telling us what to do. But there are times that it is necessary. Speed limits, for example, are not based on opinion but based on studies and facts before they are set. A person driving 60 MPH through a 25 MPH school zone as school has ended, because he does not want the government telling him how fast he can drive, endangers our children and their families by not using common sense and following the available data. Are you not doing the same thing by dismissing the benefits of the vaccine? Does the vaccine prevent you from getting



COVID? No, it does not. But the symptoms are considerably less harmful, and the survival rate is exponentially higher for those with the vaccine.

As a Board Member I have a responsibility to the community, the Healthcare District and our employees to use best practices and sadly those decisions can infringe on individual rights, but these decisions are not made lightly and they are in the best interest of the employee, the District and the entire community, including your individual families.

So, you ask, who is vaccinated?? Donald Trump, and every other living President. All 50 Governors, 98% of Congress, 96% of physicians and nearly 80% of the military. Who is not vaccinated? 99.2% of all people currently dying of COVID 19.

An opinion that is voiced externally, verses internally, can have negative effects beyond your immediate struggles. I implore you please; Ask yourself, before you give advice to family, before you post on social media, what if my opinion happens to be wrong?

Director Greenhouse and Evans expressed appreciation for Director Mondary's statement. Director Evans stated, as a nurse, she focuses on the education process when advising patients about the COVID vaccination. She strongly recommends that the patient consult multiple quality sources to understand their decision. It is a personal and ethical question, and the public is not responding well to the mandate.

Mitch Hall said that District leadership is doing everything we can to be efficient with what we have. Staff is working on a county grant to be more proactive and educate the community members. Right now, from an operational perspective, we clearly have challenges in front of us. Our focus will be to mitigate the staffing crisis which is the outcome of the CDPH vaccination mandate.

ACTION ITEMS

RESOLUTION TO UPDATE BANK SIGNATURES

Director Greenhouse introduced Resolution 21-03 for consideration. There was no discussion regarding the action item.

- **Motion 21-55:** Director Evans motioned to approve Resolution 21-03 to remove Jackie Combs and Marge Doyle from bank signatures, second by Director Brown; motion passed by roll call vote, 5:0.

REPORTS

FINANCIAL REPORTS – Debbie Anderson, CFO

Mitch Hall stated that he and Debbie Anderson spent a great deal of time to refine the financial report to give a concise picture of District finances. Additional detail may be requested from Debbie Anderson if desired. The report shows a loss that has been accumulating for several months.

Debbie Anderson reported that the consolidated financials show a negative variance to budget of **\$(148,478)**. The consolidated actual loss for July is **\$(130,831)**.

The non-clinic financials show a positive variance to budget of \$17,992, which is due to better-than-expected investment performance.

The July visits reflect the continuing variance, which is almost all due to lower than budgeted visits. This resulted in a negative variance to budget of **\$(166,469)**.



There were no questions from the board regarding the report. Board members commented that they liked the new report format.

Director Evans asked Mitch Hall to speak to the financial loss and the strategy to correct it. He stated that the clinics have an issue with volume. Overtime, there has been a reduced availability for appointments. We have providers with whom we need to modify agreements that are not advantageous to the District or the community (related to accessibility and availability). As we move forward, we are looking at provider availability. We have moved patient scheduling from providers back to central scheduling for better management. Cindy Schmall is working closely with the nurse managers to hold them responsible and accountable for patient volumes. Those are the big picture changes.

On the flip side, we are connecting with patients using personal telephone calls and texting to remind them of appointments and to schedule follow up procedures and screenings. We also are making outbound calls to patients who haven't been seen by a provider in a while, focusing on high-acuity patients. We have asked for dollars in the county grant application to hire more personnel to provide outreach and follow-up on non-compliant patients.

Director Savitt asked if a patient survey as to why the patients aren't compliant has been considered, for instance lack of transportation. Joe Ruddon stated that the District has done surveys at health fairs and during LIFT transport. Mitch Hall noted if the patient must wait for an appointment, they won't show for it. Therefore, we are focusing on our front office teams doing their job to ensure that the patient has a positive experience.

Director Evans stated she likes what staff is doing to mitigate the issues. She suggested that the employee performance evaluation goals be incorporated into the process. Additionally, Medi-Cal standards have been incorporated into the evaluation process for providers.

Mitch Hall praised Cindy Schmall for the changes she is implementing with the nurse managers.

- **Motion 21-56:** Director Mondary motioned to accept the financial report, second by Director Savitt; motion passed by unanimous vote.

DISTRICT UPDATE – Mitch Hall, CEO

Mitch Hall referred the board to the written report in the agenda packet. He stated that we will be providing the board a visit report related to finance. He also said we are looking at shifting staff around to put the right person in the right place to provide the best coverage and performance. Janeen Duff accepted a lateral move to grant and project administration. We will continue to focus on operations but also on pursuing grant funding.

Director Evans congratulated Janeen Duff on her new position.

CALENDAR REVIEW AND COORDINATION

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

- October is the District's health fair in 29 Palms at Luckie Park
- The ACHD Conference has been designated as a virtual meeting because of the forest fires in northern California.

DIRECTOR COMMENTS

- **Director Mondary:** Thanked Linda Evans for her Desert Care Network updates; he thanked staff for adapting to being understaffed, saying, "We really appreciate their efforts." He



thanked senior staff for their continuity in the transition of leadership. “I like what I’ve seen, you’re doing a good job. People have been responsive. I do appreciate Mitch’s effort in identifying the problems as well as solutions. I appreciate your availability and for your time.” He indicated that he may attend the October meeting remotely.

- Director Evans: Thanked Beverly Scott and Pat Cooper for attending tonight’s meeting. She thanked staff for their reports and is looking forward to the volume reports. She appreciates Mitch stepping right in and approaching things in a team-based effort. She expressed concern over the CDPH vaccination mandate and its impact on healthcare facilities and workers.
- Director Brown: “Good meeting.” He thanked staff for being proactive in resolving the issues presented. He asked if there was anything the board could do for staff. Mitch Hall responded not now but staff may need a more visible support in the future as we work through the issues.
- Director Savitt: Said she was really impressed with staff performance in resolving the identified issues.
- Director Greenhouse: “Thank you, staff, for all that you do; it is greatly appreciated by all the board members. It is reflected in all that the District does.”

MEETING ADJOURNED

The meeting was adjourned at 7:44 p.m.

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


Dianne Markle-Greenhouse
President


Greg Brown
Secretary