



Morongo Basin Health Care District
Community Health Center
GOVERNING BOARD MEETING

MINUTES of Thursday, April 13, 2023, 6:00 p.m.

This meeting convened on the District's campus at 6530 La Contenta Road, Yucca Valley, suite 400. The meeting was also accessible by Microsoft Teams remote platform.

Mission Statement: *To improve the health and wellness of the communities we serve.*

Vision Statement: *A healthy Morongo Basin.*

Core Values: *Commitment, Collaboration, Accountability, Dignity, Integrity*

PRESENT:

- Cody Briggs (*not present*)
- Patricia "Pat" Cooper (*present*)
- Bryan Goldfarb (*present*)
- Nicola Keller (*present*)
- Alejandro Penalva (*not present*)
- Cecelia St. Clair (*not present*)
- Heidi Stiemsma (*present*)
- Jackie Todd (*present*)
- Jack Williams (*present*)

STAFF:

- Cindy Schmall, CEO
- Karen Graley, Board Clerk (*remote*)
- Debbie Anderson, CFO
- Joe Ruddon, Chief Community Programs Officer
- Tina Huff, Director Clinical Care
- Tela Thornton, Administrative Assistant
- Kathy Alkire (*remote*)
- Janeen Duff, Program Development Liaison
- Jenifer Rendon, community member (*remote*)

CALL TO ORDER: The meeting was called to order by Nicola Keller at 6:00 p.m.

ROLL CALL: Karen Graley, board clerk, conducted roll call and declared a quorum.

OBSERVANCES:

Pat Cooper led the assembly in the Pledge of Allegiance

Jack Williams read the mission and vision statements.

PUBLIC COMMENTS:

No public comments were presented.

APPROVAL OF MEETING AGENDA:

Motion 23-31: Motion by Heidi Stiemsma to approve the meeting Agenda as presented; motion seconded by Jack Williams; the motion passed by unanimous vote.

APPROVAL OF CHC CONSENT AGENDA:

Motion 23-32: Motion by Jack Williams, second by Jackie Todd, to approve the Consent Agenda as presented; the motion passed by unanimous vote. There was no discussion.

- Minutes of the Governing Board regular business meeting March 9, 2023

REPORTS

OUTREACH – Joe Ruddon, CCPO

Mr. Ruddon used a PowerPoint presentation to give his report for marketing and outreach accomplishments. The presentation covered marketing campaigns, campaign outcome statistics and new collateral materials. He also promoted the upcoming health fair at Yucca Valley Community Center on May 6. There were several questions by board members about the various campaigns.

QUALITY – *Cindy Schmall, CEO*

Ms. Schmall provided patient satisfaction information for the most recent quarter. At the last meeting we were unable to present patient satisfaction information because of technical difficulties but now have that update for review. Press Ganey is the third-party vendor. They randomly survey patients via text messages, phone calls and email. 3,062 surveys were distributed between January and March 31. Only 138 surveys were returned.

A sample of the survey was presented in the PowerPoint presentation. The survey is broken into several categories, such as safety and asks related question. A sample question for safety is, “Did your provider wash their hands?” The answers are summarized by category for a “top box score.” Departments are grouped as medical services (adult and pediatric), dental and behavioral health.

The company compares CHC top-box scores to national benchmarks from equal size clinics and assigns a ranking. The top box data is based on only those patients who scored the health center as “very good” on the survey. The report also makes recommendations on where to focus efforts to improve the top-box scores and increase patient satisfaction with their clinic experience.

She explained the survey scores and what staff is doing to improve patient satisfaction. An example is the introduction of the Call Center when the survey identified “ease of contacting” as an opportunity to improve. We had feedback from patients that they were frustrated with being unable to contact their doctor or reach someone in the health center. The call center is staffed with two nurses who are now available to answer patient calls and triage the issues. Patient response to this solution has been excellent. As a result of implementing the call center, “ease of contacting” staff is floating down the survey list of opportunities to improve.

Jack Williams asked about survey results where patients ranked the clinic as “poor” or “very poor” and why staff wouldn’t focus on improving those outcomes. Ms. Schmall stated the data for lower rankings of the survey were available to staff for review and staff does seek to improve in those areas. In reality, there are few “poor” rankings on the survey, maybe one or two; not much data to work with. We focus on the areas where most of the results are.

Mr. Williams acknowledged that if he were satisfied with health center services, he probably wouldn’t respond to the survey. But if he had a negative experience, he would likely use the survey to express his dissatisfaction. “That low response percentage is probably an indication that things are pretty good in delivering patient care.”

Janeen Duff who works with the Press Ganey survey results, noted that we are aware of sensitive information that we cannot present in a board meeting. Patient comments on the surveys sometimes reveal weaknesses and staff is focused on those opportunities to improve. The survey data allows us to drill down to the specific provider and work with them to implement improvements. Our overall goal is to keep the board as well informed as we can.

There was additional discussion about the delay in provider access, especially in dental and behavioral health departments. Ms. Schmall spoke to the difference between seasoned providers who are more effective in processing patient visits versus new providers who are slower in processing patient visits. She spoke to provider recruitment efforts. Press Ganey identified “ease of getting an appointment” as an area for improvement.

In every one of these categories we want to make sure that staff is able to respond timely to patient needs.

FINANCE REPORT – *Debbie Anderson, CFO*

Ms. Anderson reported that the clinic financials for the month of February show income of \$48,504 and year to date income of \$696,690.

Due to the finalization of the financial statements, GASB 87 was implemented. As discussed previously, an operating lease (a lease whereby you acquire and/or grant an asset for some period of time, but don't purchase/sell the asset, such as renting space in a building) wasn't placed on the Statement of Net Position; now it is. Thus, we have new categories on the Statement of Net Position for the Tenet lease. We now have a lease receivable, accrued interest income and a corresponding deferred inflow of resources.

On the Statement of Revenues & Expenses, we have lease income (that hasn't changed) as well as interest income. These amounts are not the same. With a note, interest is front loaded into the payments, and very little goes against principle in the early years. In the waning years, most of the payment received goes against principle, and very little is interest income. This means early in the lease (where we are now), we will have higher amounts recognized on the Statement of Revenues & Expenses (more interest income and lease revenue) than just the straight lease amount of two million. But in later years, despite the same two million coming in, there will be less lease revenue and interest income recognized.

This same principle applies also to the leases we pay. We recognized leases payable for various building & equipment leases. On the Statement of Net Position, we now have additional capital assets, called right to use assets, and corresponding liabilities, long term debt. On the Statement of Revenues & Expenses, we now have additional amortization as well as interest expense. This means in the early years, you have more expense on the Statement of Revenues and Expenses, and in the waning years, we have less expenses.

Due to the above changes, the actual to budget comparisons do not read in the same manner as they have in past and the budget to actual comparisons will be off for the remainder of the year.

Jack Williams asked for clarification about the variances represented in the report. Ms. Anderson gave a summary of managed care reimbursement and interim payments.

- **Motion 23-33:** Motion by Heidi Stiemsma to accept the financial report; second by Jack Williams; motion passed by unanimous vote.

BOARD CALENDAR:

The calendars were reviewed.

- The May 6 health fair was emphasized; Joe Ruddon handed out flyers to board members.


MEMBER COMMENTS:

- **PAT COOPER:** Thanked Debbie Anderson for the comprehensive report; thanked Joe Ruddon for his report.
- **HEIDI STIEMSMA:** "I'm glad to see we have patient satisfaction data. It's a good baseline and we will be able to look at that down the road and see how it's being addressed."
- Cindy Schmall introduced guest Jennifer Rendon who attended the meeting remotely.

MEETING ADJOURNMENT

The meeting was adjourned at 7:15 p.m.

Minutes recorded by Karen Graley, Board Clerk



Cecelia St. Clair, Secretary