



Morongo Basin Health Care District
Community Health Center

GOVERNING BOARD MEETING

MINUTES of Thursday, August 10, 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 (*present*)
- Patricia "Pat" Cooper (*present*)
- Bryan Goldfarb (*not present*)
- Nicola Keller (*present*)
- Jennifer Rendon (*present*)
- Cecelia St. Clair (*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, Chief Clinical Operations Officer
- Tela Thornton, Administrative Assistant
- Janeen Duff, Program Development Liaison
- Kathy Alkire, Patient Educator

CALL TO ORDER: Before beginning the meeting Nicola Keller expressed appreciation for the volunteer board members and district leadership. 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:

Nicola Keller led the assembly in the Pledge of Allegiance
Cody Briggs read the mission and vision statements.

PUBLIC COMMENTS:

No public comments were presented.

APPROVAL OF MEETING AGENDA:

- **Motion 23-48:** Motion by Heidi Stiemsma to approve the meeting Agenda as presented; motion seconded by Jennifer Rendon; the motion passed by unanimous vote.

APPROVAL OF CHC CONSENT AGENDA:

Motion 23-49: Motion by Jennifer Rendon, second by Heidi Stiemsma, 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 July 13, 2023

ACTION ITEMS

APPROVE POLICY CHC-QA-102

Cindy Schmall introduced the policy CHC-QA-102 that updates the health center patient rights and responsibilities. The revision is based on industry standards. The primary changes were under patient

responsibilities. She reviewed the redlined changes as presented in the agenda packet. There was extensive discussion about various patient scenarios and the health center's responses and processes.

- **Motion 23-50:** Motion by Cecelia St. Clair to approve policy CHC-QA-102 Patient Rights and Responsibilities; second by Cody Briggs; motion passed by unanimous vote.

ACCEPT HRSA CAPITAL GRANT

Cindy Schmall reminded the board that the board chose to decline the capital grant because of the required lien on the property title. However, HRSA advised that if we change the grant purpose rather than decline the monies, it could be used to purchase equipment for the Split Rock expansion project. Staff brainstormed and identified about \$200,000 in potential equipment purchases. She listed possibilities such as replacement of the ageing sterilizer unit; exam tables for the new building; diagnostic retina scanner for diabetes patients; possibly a support vehicle for the school-based dental program; a 3D printer to produce dentures for patients. The proposed action is to accept the capital grant of \$602,322 and then continue to identify needed equipment. It is a three-year grant, and we are one-year into the timeframe. Staff recommends accepting the grant to purchase equipment.

- **Motion 23-51:** Motion by Cecelia St. Clair to accept the HRSA capital grant #C8E44351 Health Center Infrastructure Support in the amount of \$602,322 for the Split Rock expansion project; second by Jennifer Rendon; motion passed by unanimous vote.

REPORTS

SPLIT ROCK PROJECT UPDATE – *Cindy Schmall, CEO*

Ms. Schmall presented a brief PowerPoint showing architectural drawings of the site location, building elevations and floor plan. The building will be divided into two departments: adult and pediatric services. She walked the board through the floor plan explaining the flow of patients through the departments. Lab services will be near the entrance to provide services to both adult and pediatric patients. The existing space currently being used for adult medical services will be used as office space for ancillary departments. Jennifer Rendon asked about activities for pediatric patients in the waiting area. The new lobby will be able to accommodate kid-friendly items. Nicola Keller asked about projected patient volumes and if the budget took the new building into consideration; Debbie Anderson stated that because the new building project had not started at the time the budget was created and the timeframe for completion of the project was not determined, the new budget does not project increased patient volumes for Split Rock facilities.

QUALITY ASSURANCE REPORT – *Cindy Schmall, CEO*

Ms. Schmall introduced Angie Villanueva, Senior Manager, Quality. She reported:

- 13 IEHP grievances were received: they were mostly patient misunderstanding of CHC processes. As resolution to the grievances, the care coordinator will provide clear instructions to patients regarding their medication and prescription needs. Staff will continue to monitor patient satisfaction. Cindy Schmall noted that a new support position was created to assist providers in processing patient requests and thereby improving communications with patients.
- Incident reports: a couple reports were received for a dental patient who was disruptive; staff handled the patient appropriately.

Joe Ruddon presented data on patient satisfaction for the second quarter of 2023. The third-party vendor, Press Ganey administers random surveys to patients. Response is 7.9% (3,302 surveys/234 responses). Health center performance is compared to facilities of similar function and size. Press Ganey calculates percentages only for "very good" or "always," not using responses of good, fair, poor or very poor.

- **MEDICAL SERVICES:** Last quarter score was 44th percentile; this quarter is 17th percentile; this means we scored better than 17% of our peer group, but 83% of our peer clinics scored better than we did this quarter.
- **DENTAL SERVICES:** Last quarter score was 99th percentile; this quarter is at 71st percentile, meaning 29% of peer clinics are doing better than we are.

Mr. Ruddon provided survey questions for each service area and provided patient comments from the survey.

STAFF REPORT – *Tina Huff, Chief Clinical Operations Officer*

Ms. Huff referred the board to her written report in the agenda packet. She highlighted the Community Health Center Week celebratory activities. She reviewed her written report with the board.

FINANCE REPORT – *Debbie Anderson, CFO*

The clinic financial report for the month of June shows income of \$2,663 and year to date income of \$331,997. Because June is the last month of the fiscal year, closing the month's data is extended. This is so that subsequent activity for patient receivables can be captured allowing for a better estimate at June 30. As such, the numbers for June are not final – they are interim numbers only.

GASB 96 implementation took place in FY22-23. Like GASB 87, which capitalized operating leases, GASB 96 capitalizes software leases. Leases that meet these criteria have been reclassified in the financial statements for June.

- **Motion 23-52:** Motion by Jack Williams to accept the financial report; second by Pat Cooper; motion passed by unanimous vote.

BOARD CALENDAR:

The calendars were reviewed. Ms. Schmall noted that the September board meeting will convene on the third Thursday rather than the second Thursday as both Pat Cooper and Heidi Stiemsma will be away at a conference. The meeting was moved so that achieving a quorum was not at risk.

MEMBER COMMENTS:

CECELIA ST. CLAIR: "I'm so impressed with administrative staff. At yesterday's luncheon, the level of staff satisfaction in our clinics is very high. Also, the information staff provides to the board is so interesting."

PAT COOPER: She thanked Angie Villaluz for her quality report.

NICOLA KELLER: She thanked staff for their work and for preparing the meeting information; "It's remarkable what you achieve."

MEETING ADJOURNMENT

The meeting was adjourned at 7:33 p.m.

Minutes recorded by Karen Graley, Board Clerk



Cecelia St. Clair, Secretary