



Hi-Desert Memorial Health Care District dba
Morongo Basin Healthcare District
BOARD OF DIRECTORS REGULAR MEETING MINUTES
September 7, 2023, at 6:00 p.m.

Convened on the La Contenta campus; the public was invited to attend the meeting on campus or via Microsoft Teams, an electronic, remote-site platform.

- **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 Cooper
- Director Evans (*absent*)
- Director Markle-Greenhouse
- Director Savitt
- Director Stiemsma

Administrative Staff:

- Cindy Schmall, CEO
- Karen Graley, Board Clerk (*remote*)
- Joe Ruddon, Chief Community Programs Officer
- Tela Thornett, Administrative Assistant
- Kathy Alkire, Patient Educator

Guests:

Linda Evans, Chief Strategy Officer, Desert Market, Tenet (*remote*)
Jenna Hunt, Hi-Desert Star, reporter (*remote*)

CALL TO ORDER

Director Greenhouse called the meeting to order at 6:00 p.m. The meeting was convened on the La Contenta campus and by electronic platform using Microsoft Teams.

ROLL CALL

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

OBSERVANCES

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

PUBLIC COMMENT

No public comments were presented.

APPROVAL OF MEETING AGENDA

Motion 23-46: Director Cooper motioned to approve the meeting agenda as presented; the motion was seconded by Director Stiemsma and passed by unanimous vote.

APPROVAL OF THE CONSENT AGENDA

Karen Graley noted two corrections to the August minutes: the spelling of Jenna Hunt, reporter with the Star, and in the Outreach Update, the amount received for the LIFT program was \$25,000, not \$45,000.

Motion 23-47: Director Stiemsma motioned to approve the Consent Agenda with the two corrections identified; motion was seconded by Director Savitt and passed by unanimous vote.

- Minutes: Regular Meeting of the Board of Directors, August 17, 2023.



PRESENTATION

SPLIT ROCK PROJECT UPDATE

CEO Cindy Schmall used a PowerPoint presentation to provide the project update. The presentation showed an aerial view of the site relative to the neighborhood and a schematic of the site. The new building will be 5,000 square feet. The placement of the new building will create a courtyard relative to the existing buildings; benches for seating is planned for the space. A floor plan was presented showing the building divided into adult and pediatric services with separate entrances. The adult side of the building has four exam rooms, storage space, a provider office, a chiropractic office and exam rooms. An additional office is delegated to finance staff to meet with patients. The pediatric side of the building has five exam rooms and a provider office. Lab services is centrally located to serve both adult and pediatric populations.

Project cost to-date is approximately \$445,418. The balance due on the building is another \$447,334. The next step is to grade the property for building placement and parking lot. It's estimated that the overall cost will be in the range of \$900,000. Timeline is early 2024.

ACTION ITEMS

APPROVAL OF CAPITAL EXPENDITURE: DENTAL AUTOCLAVE

Cindy Schmall presented the action item. Dental Services has requested to purchase a new autoclave (sterilization) unit in the amount of \$8,000. The existing two units have exceeded their useful-life and require repairs; failure is imminent. The action item has been brought to the board for approval as policy FN-AP-104 specifies that items not listed on the approved capital budget are be presented to the Board of Directors for consideration.

- **Motion 23-48:** Director Cooper motioned to approve the capital expenditure to purchase the \$8,000 dental autoclave unit, second by Director Stiemsma; motion passed by unanimous vote.

POLICY REVIEW

The agenda packet presented policies for consideration. Cindy Schmall provided explanation for each policy.

- HR-228 Employee Classifications (revised)
This policy previously spoke to benefits packages and not to employee classification (full time, part time, per diem, exempt, nonexempt). The existing language was unclear. The changes adjust the language as per California law and clarifies benefit eligibility.
- HR-262 Tuition Reimbursement (revised)
This policy is an update to the tuition reimbursement program, changes are based on IRS code. The edits also clarify details of the program.

There was discussion about the classification and awarded benefits, the cost to the District and employee share-of-cost for benefits.

- **Motion 23-49:** Director Savitt motioned to approve policies HR-228, and HR-262 as presented; second by Director Stiemsma; motion passed by unanimous vote.

STRATEGIC PLAN DISCUSSION

Joe Ruddon presented an update of the current strategic plan, providing a handout as an overview of the plan with completed items grayed out. He reviewed new information.

1. STRATEGY #2 Increase access to healthcare in the Morongo Basin.
 - a. Tactic 2.1 Explore opportunities to expand healthcare services.
 - 1 dermatologist was recruited and is now seeing health center patients.
 - 2 psychiatrists were recruited, one is an adolescent and child psychiatrist.
 - 1 LCSW has been hired.
 - Dental: A panoramic X-ray unit was purchased to improve quality imaging for detecting abnormalities.
 - b. Tactic 2.2 Improve school-based access to care – dental and childhood immunizations.
 - Mobile dental program provided care to 159 students with five campus visits. August begins the new school year and campus visits will continue.
 - The mobile medical unit (MMU) has hosted multiple immunization clinics leading up to the beginning of the new school year, as well as marketing promotions for immunization and school related physicals throughout the summer break, but parental response has been poor. The MMU will not be deployed for immunizations campaigns and childhood immunizations will be available through the health center.
 - c. Tactic 2.3 Reduce hypertension in the health center population.
 - The hypertension grant continues. 1,030 patients were contacted to participate in the program. We currently have 300 patients in the program.
 - Program compliance year 2 goal was 70% of the health center patients; UDS measurements reported 73% compliance.
 - d. Tactic 2.4.2 Increase HIV/STI testing for health center patients
 - The original HRSA grant was extended for another year, taking it through the end of 2024.
 - The goal was to distribute 150 HIV test kits per year; 719 kits have been distributed. We also distribute condoms but have difficulty keeping them in stock.
 - The program is now focusing on education for PrEP which is the prophylactic to prevent HIV.
 - e. Tactic 2.5 Explore new ways to improve the LIFT transportation program.
 - LIFT was awarded a grant of \$150,000 (\$75K over 2 years) in collaboration with Reach Out Morongo Basin. A grant application has been submitted for additional funding.
 - LIFT was awarded \$25,000 for the MBTA Transportation Assistance Grant; again, another application has been submitted for additional funding.
 - The proposed reimbursement for transporting Medi-Cal patients is not currently available due to IEHP requirements and limitations.
2. STRATEGY #3 Address racism as a public health issue.
 - a. Tactic 3.1.2 Solidify and establish alliances and partnerships with other organizations and groups to address health disparities caused by racism.
 - Healthy People 2030; census data reviewed for targets.
 - City of 29 Palms is form the Environment and Social Justice Committee.
 - Data and research is being conducted in preparation for creating our new strategic plan.



3. STRATEGY #4 Improve access to nutritious food to improve health outcomes.
 - a. Tactic 4.3.4 Provide “Food as Medicine” education to staff and patients.
 - Staff is working with the county Dept. of Public Health and Nutrition Program to identify opportunities to improve outreach and education.
 - Staff attends quarterly food statistics meeting to report local status. The goal is to correlate CalFresh enrollment to improve outcomes.
 - Partnering with SBC dietician to present at the health fair October 14.
 - b. Tactic 4.3.5 Explore healthy eating education collaboration opportunities.
 - Dialogue with Town of Yucca Valley and City of 29 Palms community leaders to address lack of healthy food choices beyond fast food and gas stations.
 - Considered recruiting a per-diem registered dietician for diabetes prevention program. Not pursued due to IEHP contract limitations.
4. STRATEGY #5 Improve Morongo Basin data relative to the social determinants of healthcare.
 - a. Tactic 5.1 Collaborate with county, state or other organizations to collect data related to social determinants of health for Morongo Basin.
 - Staff to review 2020 Census data in the fall.

There was discussion about District workforce development and the shortage of medical assistants. Ms. Schmall shared that staff have identified a training program for medical assistants. It requires hands-on training under the supervision of a physician. Once training is complete, there is a test to validate training and eventually the employee can test for state certification.

The intent at tonight’s meeting was to begin the process for creating a new strategic plan. However, with the absence of Director Evans, Ms. Schmall deferred that project to the next business meeting. She identified a website to help with the process: Healthy People 2030 and asked the board members to visit the site in preparation for the next meeting. “There are tools that we can use in creating the next strategic plan,” she said. “Their mission and vision are the same as our but on a national level. As we start to work on our next strategic plan, the material on the website will be helpful. Leading health indicators identified on the website may be applicable to our strategic plan.”

Ms. Schmall polled the Directors for a date to call a special meeting and begin the strategic planning process. Saturday, November 4 was identified as an available date. Board clerk, Karen Graley will confirm availability with Director Evans and confirm that date.

REPORTS

COMMUNITY PROGRAMS REPORT

Chief Community Program Office, Joe Ruddon referred the Directors to his written report in the agenda packet. He added that the mobile medical unit was deployed to the Wonder Valley Community Center in August to provide primary medical care. However, even though the community center had requested the visit, the community response was poor. He distributed copies of the 2022 annual report and noted that a copy of the annual report had been mailed to key community leaders and institutions. He also distributed copies of the employee newsletter.

FINANCIAL REPORT

Ms. Anderson reported in her written report that the consolidated financials for the month of July show income of \$59,667 and year to date income of \$59,667 (new fiscal year). The non-clinic



financials for the month of July show income of \$118,704 and year to date income of \$118,704. The clinic financials for the month of July show a loss of income of \$59,037 and year to date loss of income of \$59,037.

Cindy Schmall presented the verbal report and drew attention to the new table that gives a detailed overview of financial activity (year-to-date) for the entire organization.

The finance department is working through fiscal year-end for the upcoming single audit. It takes time for payments to come in and contractual/write-offs to occur, so the goal is to send information to the auditors roughly two to three months after fiscal year-end initial close. June financial numbers are updated for changes in the Employee Health Record at the beginning of September in anticipation of this. So far finance is on track for this audit.

Also, as an update to behavioral health rate setting audit by Department of Health Care Services, the auditor has informed us they had to take a break on our audit and will resume at the end of September.

The patient finance department was reorganized last year which appears to have worked well. The internal audit error rates on the sliding fee discount program is trending under 5%, which is a huge improvement from the previous year.

Motion 23-50: Director Cooper motioned to accept the financial reports as presented, second by Director Savitt; motion passed by unanimous vote.

CEO STAFF REPORT

Ms. Schmall presented a written report to the board.

- The HRSA 330 Service Area Competition (SAC) grant has been submitted and is in the review process with HRSA. The award amount is the same as previous years at around \$1.5 million annually.
- The Association of California Healthcare Districts (ACHD) Board self-assessment has been sent out to each of you. Please complete the assessment so that we can discuss education and orientation opportunities and include discussion of priorities in our strategic planning meetings.
- Some District board members and CEO will be attending the ACHD 71st annual meeting on September 13-15, 2023, in Lake Tahoe, California. The CHC meeting was changed September 21 to accommodate the absence of two board members.
- Congratulations to Joe Ruddon and Robin Schlosser from Reach Out Morongo Basin for the collaboration that led to the “Together We Can” Award from Basin Wide Foundation at the annual dinner in August.
- District staff and facilities weathered the Hurricane Hillary fairly well. We did experience power outages and had to reschedule patient visits due to road closures and providers not being able to get to the facilities.
- Following the CHC week festivities, administration received several requests from employees asking to meet more often to engage in education, team building and build comradery among employees. After discussion, the admin team unanimously agreed with staff and will begin holding quarterly meetings. A schedule for March, May, August and December is being developed now.
- Last Thursday we had an unexpected visit from Kaiser representatives related to potential contracts with us to serve their local patients.



- The Compliance Committee convened on August 22, 2023. While there are no incidents to report, the committee reviewed audit data from our billing team and are recommending the District contract to have a full audit of charting and documentation.
- We are looking at contracting with an auditing company that focuses on FQHC billing and coding. They are California based and will be able to provide training to providers once they have conducted the audits.
- HUMAN RESOURCES: August was a difficult month with five terminations-one retirement, three voluntary separations and one involuntary separation. The three voluntary terminations were military related.
- There were two new hires in the month. Currently, there are six positions available. Two providers, two leadership positions. The clinics have had limited success with hiring to replace personnel.
- We received two exit interviews which did not offer any trends. Overall, communication has been a theme in the past year. We will be working on implementing an Employee Engagement survey before the end of the year through Press Ganey.


There was discussion about a proposed contract between Kaiser Permanente and the District.

CALENDAR REVIEW AND COORDINATION

- ACHD annual conference begins September 13, the CHC board meeting has been rescheduled to September 21st as both Director Cooper and Stiemsma will be unavailable for the regular CHC board meeting date.
- September 22nd : Board of Directors self-assessment survey deadline
- October 14th : Community Health and Resource Fair at Freedom Plaza, 29 Palms
- November 4th : Strategic Planning special meeting, 10 a.m. - 2 p.m.

ADJOURN MEETING

The meeting was adjourned at 7:41 p.m.



Pat Cooper, Secretary of the Board

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