



Morongo Basin Health Care District
Community Health Center

GOVERNING BOARD MEETING
MINUTES of Thursday, June 8, 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 (*not 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
- Tela Thornton, Administrative Assistant
- Janeen Duff, Program Development Liaison

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:

Heidi Stiemsma 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 23-40:** Motion by Pat Cooper to approve the meeting Agenda as presented; motion seconded by Jack Williams; the motion passed by unanimous vote.

APPROVAL OF CHC CONSENT AGENDA:

Motion 23-41: Motion by Cody Briggs, 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 May 11, 2023

BOARD ORIENTATION

GOVERNING BOARD BYLAWS AND CO-APPLICATION AGREEMENT

CEO Cindy Schmall noted that the annual business calendar called for board orientation at the June meeting. She referred the board members to tab 2 in the agenda packet where copies of the bylaws and the co-application were presented.

She began with a review of the Governing Board Bylaws and called attention to Article 3 and the structure of the board. Because we are a federally qualified health center, HRSA requires that the majority of members seated on the governing board be patients of the health center. The intent is that

patients have a voice in the operations of the health center. Board members are seated for three-year terms. There were questions about repetitive terms and filling vacancies. Ms. Schmall stated that when a vacancy occurs, clinic staff assist in recruiting patients to serve on the board. She also explained that two board members from the elected district board sit on the governing board to facilitate communication between the two boards to work collaboratively.

She reviewed the job description for the board officers (chair, secretary, etc.). Officers serve one-year terms. She explained the purpose of the executive committee which is comprised of the board officers to address urgent issues and make recommendation to the board for intervention. Also, ad hoc committees may be appointed by the board to address special issues, such as working with the district board for the CEO annual performance review.

The board moved on to the co-application agreement. Ms. Schmall explained that this document defines the relationship and responsibilities between the two boards. Cecelia St. Clair asked about Hi-Desert Memorial Health Care District (HDMHCD) and its relationship to the boards. Ms. Schmall explained that we kept the original name of HDMHCD to minimize initial confusion during the transition away from the hospital, to facilitate reimbursement payments from insurances, and for securing grants.

The co-application agreement assigns oversight of the health centers to the governing board. Jack Williams asked what the district board did. Ms. Schmall explained there are other district service lines than the clinics, such as the LIFT Transportation program, community outreach (ie health fairs), the enrollment counselor, grant requisition and management, and multiple departments such as finance, facilities, human resources, etc. The mobile medical unit (MMU) visits community locations to provide services, the CHC supports the MMU by scheduling doctors and clinical staff, but the vehicle is owned by the district who is responsible for all maintenance and providing drivers. Also, the district receives tax dollars through the county, on average around \$800,000 a year. There was discussion about the portion of tax dollars distributed to the district and its application.

The conversation transitioned to district properties, the relationship between the district and the medical center (the district is the landlord) and that the lease agreement includes a “no competition” clause which limits the governing board from introducing some service lines, such as an urgent care service which would compete with the hospital emergency room services.

REPORTS

COMMUNITY NEEDS ASSESSMENT – *Cindy Schmall, CEO*

Ms. Schmall noted that the health center conducted a community survey at the 29 Palms and Yucca Valley health fairs to garner community opinion for new services. 50% of those completing the survey were not patients at the health center.

Three services were identified for implementing in both communities. The first is acupuncture. Ms. Schmall noted that the district has been recruiting for an acupuncturist for quite a while but have had little success.

Women’s Health was also identified for a new service. However, CHC already provides a women’s health line, so perhaps the issue is about educating the community about available services.

Lastly, an urgent care facility was identified as a needed service. However, an urgent care facility would compete with hospital services which is prohibited in then the lease agreement with the medical center. Ms. Schmall stated there were other options to be explored, such as a clinic with extended hours to provide care into the evening.

She noted that staff will continue to pursue recruitment of an acupuncturist and investigate the possibility of opening a clinic with extended hours.

FINANCE REPORT – *Debbie Anderson, CFO*

The clinic financials for the month of April show income of \$118,311 and year to date income of \$158,108.

In the printed report you will find an update of the year-to-date change in net position by service line. Please note that the grants line in Table 1 shows positive income because some items paid for with grant funds needed to be capitalized, and thus those costs have been accounted for on the balance sheet. As we prepare for the new FY 23-24 budget, this information is provided to the board to further understanding of what the income and losses are for each service line. Takeaways from this information include:

- 1) Significant expenses were charged to grants this last year. In table 2, the grants line is further expanded so that grant income and grant expenses can be seen.
- 2) Within the grant's income line, the ARP grant (which completed March 31) paid for approximately \$900,000 of expenses that were not charged to various services (IE: the \$900,000 since it was charged to the grants line meant these expenses were charged to adult/peds/BH/Dental, etc.).
- 3) The largest service line losses come from Behavioral Health and dental.
- 4) For behavioral health, year after year the main causes of the losses can be attributed to high patient no shows, patient volumes, and high salary costs necessary to attract and retain qualified providers.

There was considerable discussion around the behavioral health service line and that it is operating at a loss. One factor presented was the patient no-show trend despite all the systems in place to ensure patients make their appointment. Cindy Schmall assured the board that staff has already launched interventions to reduce the patient no-show rate.

5) Dental has struggled due to high lease costs (which have now been eliminated), no shows, and the diversion of staff to cover the mobile medical program (which means not as many patients can be seen in the clinics on those days).

- **Motion 23-42:** Motion by Jack Williams to accept the financial report; second by Heidi Stiemsma; motion passed by unanimous vote.

STAFF REPORT – *Cindy Schmall, CEO*

Ms. Schmall referred the board members to her report in the agenda packet. She noted that staff is working diligently on the renewal application for the three-year HRSA operations grant. Also, that the Yucca Valley clinic lobby is being modified for better use of space and will improve patient flow.

She reminded the board members of the National Community Health Week coming in August and shared what is being planned to celebrate the milestone.

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 conference.

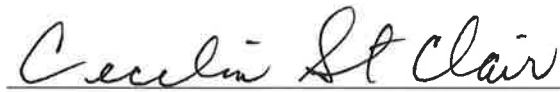
MEMBER COMMENTS:

Board members were very complimentary of the work being accomplished by staff.

MEETING ADJOURNMENT

The meeting was adjourned at 7:40 p.m.

Minutes recorded by Karen Graley, Board Clerk



Cecelia St. Clair, Secretary