

PIONEERS MEMORIAL HEALTHCARE DISTRICT
207 West Legion Road, Brawley, CA 92227
REGULAR MEETING OF THE BOARD OF DIRECTORS

Tuesday, January 24, 2023
PMH Auditorium
5:00 pm

Minutes

PMHD MISSION: Quality healthcare and compassionate service for families of the Imperial Valley

In compliance with the Americans with Disabilities Act, if you require special accommodations to participate in a board meeting, please contact the District at (760) 351-3250 at least 47 hours prior to the meeting.

I. **CALL TO ORDER** (time: 5:00 pm – 5:15 pm)

President Santillan called the meeting to order at 5:02 pm in the PMH Auditorium

A. Roll Call

BOARD MEMBERS:

Katy Santillan, President
Enola Berker, Vice President
Rachel Fonseca, Secretary
Linda Rubin, Treasurer
Nick Aguirre, Asst. Secretary/Treasurer

STAFF:

Damon Sorensen, Interim CEO
Carly Loper, CFO
Kristi Gillespie, CNO
Sally Nguyen, General Counsel
Ramaiah Indudhara, MD, Chief of Staff

GUESTS:

Ryan Kelley, Chief of Logistics & Support Services
Carly Zamora, Chief of Clinics
Carol Bojorquez, Director of Quality

B. Approval of Agenda

A motion was made to approve the agenda by Director Aguirre, seconded by Director Rubin. **The motion was unanimously carried.**

II. **BOARD MEMBER COMMENTS**

Director Rubin advised that she received a text by a community member who was very happy with the services they received at Pioneers today. Another member of the public spoke with her the other day about their experience at Pioneers and they had nothing but great reviews about the staff and services received. Director Rubin stated that every board meeting should begin with sharing something positive. She also noted that she listened to the County Board of Supervisors meeting this morning and felt Director Santillan and Mr. Sorensen did a good job speaking at that meeting.

III. **PUBLIC COMMENTS** – At this time, the Board will hear comments on any agenda item and on any item not on this agenda. If any person wishes to be heard, he or she shall stand; address the chairperson and state the subject, or subjects, upon which he or she desires to comment. Time limit for each speaker is 5 minutes. A total of 15 minutes

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shall be allocated for each item. *(time: 5:15 pm – 5:30 pm)*

Member of the public identified herself as Cristine Heredia, works at PMHD Physical Therapy. Ms. Heredia wanted to know who made the decision for Physical Therapy to be closed. She understands the Medi-Cal pays poorly for services rendered and doesn't know if that was ever addressed. She's really concerned and just wanted to know who was responsible for the decision and why it was made.

Mr. Sorensen stated that this was previously discussed with the Physical Therapy staff but realizes some may have not been present during the discussion. However, he provided some of the history of what occurred. This happened in late summer of 2022; PMHD began having serious financial difficulties. PT was one of those services that was losing money and the, then, CEO decided to close the service. Shortly thereafter is when that CEO left the organization. Leadership began to speak to various staff, like discharge planners, PT staff, etc. They discovered that there were other implications to closing the PT service than just eliminating the loss. After the previous CEO left, Leadership took those implications into consideration and decided to rethink that decision, which they did.

IV. OLD BUSINESS *(time: 5:30 pm – 5:40 pm)*

There was no old business.

V. MEDICAL STAFF REPORT – Ramaiah Indudhara, MD, Chief of Staff, will present for Board consideration, the following matters: *(time: 5:40 pm – 6:00 pm)*

A. Recommendations from the Medical Executive Committee for Medical Staff Membership and/or Clinical Privileges, policies/procedures/forms, or other related recommendations

Dr. Indudhara reported that all the recommendations for initial, appointments, reappointments and policies have gone through the appropriate committees. He noted that given the changes to the OB and pediatric services in El Centro, Pioneers is anticipating an increase in volumes. Thus far, the staff and physicians have been able to meet the need. However, it may be too soon to realize the impact. Some committees experienced some difficulties in onboarding the new hospitalists positions. The oncology service has been suspended. Patients are still being seen in the hospital, but then referred elsewhere. Dr. Indudhara mentioned that another issue discussed at MEC was regarding physician documentation. Documentation completion is always a problem for physicians, for whatever reason. However, it becomes a major issue when locum providers do not complete their charts then they leave. They are looking at possible solutions to this issue. Director Aguirre asked what the Medical Staff's process is for delinquent charts. Dr. Indudhara advised that when locums are onboarded, they are educated about their obligations. Staff go above and beyond to get physicians to complete their documentation, but physicians are just not compliant at times. Director Santillan recommended a process whereby if a physician has not completed their charts, then Accounting does not release payment. Mr. Sorensen stated that is what they are working on right now and looking at contract terms. A discussion ensued about the possible solutions to this issue. Director Santillan asked for the total number of transfers and how many were GI's. Dr. Indudhara reported that for November there were about 11 transfers that were for GI. For December, that number dropped off by a little bit, but not by much. Director

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Santillan stated that she has asked for the transfer report to be provided monthly. Ms. Gillespie advised that she would take care of submitting the transfer report on a monthly basis. A motion was made to approve the medical staff report by Director Aguirre, seconded by Director Fonseca. **The motion was unanimously carried.**

VI. POLICIES/PROCEDURES/REVIEW OF OTHER ITEMS – The Board will consider and may take action on the following: (*time: 6:00 pm – 6:45 pm*)

A. Hospital Policies

1. Computer Network and Email Usage (Acceptable Use)
2. Employee-Employer Organization Relations Resolution
3. Fentanyl
4. Financial Assistance Program, Charity Care Program
5. Funds Investment
6. Holiday Bonus/Supplemental Pay
7. In-House Registry
8. Meal and Rest Periods
9. Medical Equipment User Orientation and Training Program
10. Military Leave
11. Overtime Pay Hours of Work
12. Performance Appraisal System
13. Risk Management Plan
14. Supplemental Medical Leave
15. Use of Automobiles
16. Without Cause Termination and Severance

There was a question regarding what the difference between supplemental pay or gift was as listed in the Holiday Bonus/Supplemental Pay policy. There is no difference; however, the same term will be used to avoid confusion. Director Santillan advised that the “Without Cause Termination and Severance” policy needs to be revised. While the policy lists a certain amount of pay to be given as severance, it still has a clause that gives the discretion to the CEO to deviate from policy. The Board decided to pull the policy as there are a lot of questions. Mr. Sorensen noted that he would discuss with Human Resources to have it revised. A motion was made to approve the hospital policies with the exception of the “Without Cause Termination and Severance” policy by Director Aguirre, seconded by Director Berker. **The motion was unanimously carried.**

B. Update Reports

1. Women’s Auxiliary

Director Rubin reported that the Women’s Auxiliary is having a general meeting tonight to try and recruit members. They will be holding a Country Kitchen on February 9th, at 9am in the PMH Auditorium.

2. LAFCO

There was nothing to report.

3. Funding Requests Committee

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4. Compliance Officer Evaluation
5. General Counsel Evaluation

Ms. Smith advised the Board that the evaluation process for both positions will begin. Blank evaluation forms were provided to each Board member tonight to complete and turn in. Director Santillan asked if the same process as last year would be followed. Ms. Smith noted that she was told that at the December meeting the Board decided that the full board would participate in the evaluation process this year. Both Compliance and General Counsel can decide if they wish to have the discussion in open or closed session.

- C. Authorize Orthopedic Surgery Management Agreement between Christopher C. Lai, MD
Contract Value: capped at \$24,000; Contract Term: One (1) year; Budgeted: Yes; Budget Classification: Professional Fees
- D. Authorize Renewal of Medi-Cal Disproportionate Share Consulting Agreement with Steve Clark & Associates
Contract Value: \$44,600/yr + \$395/hr for other services; Contract Term: Three (3) years; Budgeted: Yes; Budget Classification: Purchased Services
- E. Authorize TelePharmacy Agreement with TelNet-Rx
Contract Value: \$633,600; Contract Term: Three (3) years; Budgeted: Yes; Budget Classification: Purchased Services
- F. Authorize Professional Service Agreement for Susan J. Hahm, MD
Contract Value: approx. \$160,000; Contract Term: Two (2) years; Budgeted: Yes; Budget Classification: Professional Fees

The Clerk of the Board mentioned that Director Berker will be recusing herself from the consideration of items C and F as there is a conflict of interest. A motion was made to approve items C and F by Director Aguirre, seconded by Director Rubin. InFavor=4; Opposed=0; Abstain=1. **Motion carried.**

A motion was made to approve items D and E by Director Rubin, seconded by Director Aguirre. **The motion was unanimously carried.**

VII. MANAGEMENT REPORTS – The Board will receive the following information reports and may take action. *(time: 6:45 pm – 7:30 pm)*

- A. Operations Reports – Damon Sorensen, Interim CEO
 1. CEO Report (Interim CEO)

Mr. Sorensen advised that LEMSA made a presentation to the Board at the last meeting for this Board to consider becoming the base station for Imperial County. He noted that it was taken into consideration and research was conducted about what needs to be done and what it means. Some outreach was done with some groups in the community on how we can partner together to make that happen.

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Pioneers was met with a lot of positive response and support; therefore, he recommends that the Board approves PMHD becoming the base hospital for the Imperial County LEMSA. A motion was made to approve Pioneers Memorial Hospital becoming the base hospital for the Emergency Medical Services System of the County of Imperial by Director Rubin, seconded by Director Aguirre. **The motion was unanimously carried.**

Mr. Sorensen noted that he loves talking about the wins at the beginning of the meeting. He had just discussed this same practice at the Senior Leaders meeting. When we think about how we feel when we hear about the good work that is being done in our organization as opposed to a rant & rave; staff feels more energized. We do a lot of things well at Pioneers, but we do not speak about them. We only speak about the challenges we have. Mr. Sorensen thinks it is a great idea to begin all meetings with a win.

Mr. Sorensen advised that the ECRMC OB numbers discussed at the County meeting seems to be different depending on who you speak to. It was reported that there were 1,500 and this morning he was told about 590. Later was told about 800. With Pediatric volumes, he has also heard three different numbers. ECRMC has terminated its relationship with their CEO and CFO. This will be their last week. The City of El Centro has appointed one of their Board members, who is a UCSD employee, to be the interim CEO, while they recruit someone else. Mr. Sorensen stated that he did share with the El Centro leadership that it was not a good idea to have a UCSD employee be the interim. UCSD has an interest in the outcome of the current situation and may have a conflict of interest by serving in that capacity. He advised that he did make the Board of Supervisors aware of what is going on with Pioneers and that it does make sense to have one health system in the county. He would really like to see this happen from a positive perspective rather than with the negative social media perspective. A discussion ensued about the types of information that the community has and is tapping into about what is going on.

The Board had given Administration the go ahead with Imperial Heights. The status today is that CDPH has approved it; however, it is now stuck at CMS. It appears that the individual reviewing it at CMS is new to healthcare and spending time learning and reviewing how this would work. We are hopeful that this review will not take too long.

Mr. Kelley reported that a meeting will be held on Saturday with key community stakeholders to have a roundtable regarding the state of healthcare in the Imperial Valley. It is by invitation only to speak; those that do not receive an invitation cannot speak. It is open to the public to attend and listen only.

Mr. Sorensen noted that there was a lot of social media information this weekend and not all was true. There are tremendous inaccuracies being shared. One podcaster stated that PMH cannot take care of emergent patients. Mr. Sorensen did comment on the podcaster's site that it was an outright lie, and our legal team would be contacting him for defamation of character. He mentioned it would be nice to establish one or two trusted sources of information.

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Mr. Sorensen mentioned that a company reached out to him two weeks ago about providing Cath lab services. He is currently in preliminary discussions with them and working through the numbers.

2. Hospital operations (Chief Nursing Officer)

Ms. Gillespie expressed her sincere thanks to the Board for their consideration and approval of the base hospital designation at Pioneers. She noted that there was a significant drop in ED volumes from November to December. However, there was an increase in admissions. Inpatient admissions increased from 4% to 5% and observations increased from 1% to 2%. Case Management is working diligently to review the observations to make sure they meet criteria and provide guidance to the providers. There was a slight increase in OB. ICU has been busy, but the staff has been able to handle the load really well. Ms. Gillespie thanked the staff for all their hard work in providing services to the community and focusing on providing quality care. First Friday of every month, Livestream is here to do blood drives.

3. Clinics operations (Chief of Clinic Operations)

Ms. Zamora reported that there was a decrease in volumes across the board in the clinics for the month of December. This was due to a lot of providers being out for the holidays. There was a decrease in specialty referrals and there has not been the expected increase in OB referrals. Discussions are underway on how to market the services to the community. There are two nurse practitioner positions open. One is for pediatrics at the Calexico Health Center and the other one for GI services. There is one LVN opening for Urology and four medical assistant scribe positions open which is hoped will help the high-volume providers with their charting. One medical assistant did leave the organization due to pay. There were four new hires: one LVN, on part-time PT, one medical assistant and one per diem nurse practitioner. Work is being done with the Pharmacy to have the COVID vaccine available at the clinic daily. The newsletter will be restarted on a quarterly basis rather than monthly. The Clinics have been working closely with the Revenue Cycle consultant and are looking forward to the recommendations that come out of that review. The two grants that were awarded to the clinics should be received soon and positions will be posted as soon as the funding is available. Both grants are each in the amount of \$500,000.

Mr. Sorensen advised that PMHD does need to be able to keep up with market when it comes to compensation. When you don't have money is hard to do, but he feels given the different initiatives that are currently going on, PMHD's finances are starting to look up. Leadership has committed to reviewing compensation every 90-days to see what can be improved.

4. Medical staff (Chief Nursing Officer)

Nothing further to report.

5. Finance (Chief Financial Officer)

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December was the lowest revenue month. January revenues are increasing slightly, so we are starting to see a positive. Expenses are being reviewed and lot of it is in the benefits side. We are speaking with our benefits consultants to see if there are any opportunities for savings. Work continues to be done to decrease the registry costs, a well.

6. Information technology (Chief Nursing Officer)

Ms. Teague advised that they are still looking at a 7/2023 kick-off and a go-live date of 7/2024 for the Cerner system.

7. Facilities, logistics, construction, support – (Chief of Logistics and Support Services)

Mr. Kelley announced that we will not have to lose a restroom in the main corridor due to the lab draw station project.

8. Quality resources - (Director of Quality Resources)

There was nothing to report.

9. Board matters

There was nothing to report.

B. Legal Counsel Report – Sally Nguyen

1. All matters to be discussed in Closed Session

VIII. CLOSED SESSION – The following matters will be considered by the Board in closed session; the Board will reconvene in open session to announce any action taken on matters considered in closed session. *(time: 7:30 pm – 7:50 pm)*

A. CONSIDERATION OF MATTERS INVOLVING TRADE SECRETS – Safe Harbor: Health and Safety Code §32106, subparagraph (b)

1. Based on the Board's prior findings regarding Trade Secret classification, as contained in Resolution 2023-01, consideration and discussion of possible initiation of the following:
 - a. Updating Certain District Strategic Planning Initiatives

B. PENDING OR THREATENED LITIGATION – Safe Harbor: Subdivision (b) of Government Code §54956.9

1. Conference with Legal Counsel regarding threatened litigation involving possible facts or circumstances not yet known to potential party or parties, disclosure of which could adversely affect the District's position.
 - a. Compliance Issues

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IX. RECONVENE TO OPEN SESSION *(time: 7:50 – 8:00 pm)*

A. Take Actions as Required on Closed Session Matters

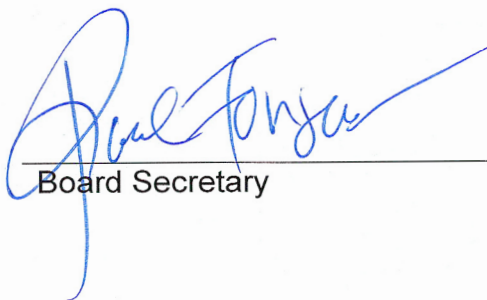
The Board acted by approving Resolution 2023-02; A Resolution approving a preliminary application to the Imperial County Local Agency Formation Commission for the potential expansion of the Pioneers Memorial Healthcare District. (Copy of resolution attached at the end of these minutes).

X. ADJOURNMENT *(time: 8:00 pm)*

The meeting was adjourned to the next regular meeting.



Clerk of the Board



Board Secretary

**Pioneers Memorial Healthcare District
RESOLUTION NO. 2023-02**

**RESOLUTION APPROVING A PRELIMINARY APPLICATION TO THE IMPERIAL COUNTY
LOCAL AGENCY FORMATION COMMISSION FOR THE POTENTIAL EXPANSION OF THE
PIONEERS MEMORIAL HEALTHCARE DISTRICT**

WHEREAS, Pioneers Memorial Healthcare District is a healthcare institution in Imperial County and dedicated to improving patient care in the community, and

WHEREAS, Pioneers Memorial Healthcare District and El Centro Regional Medical Center are the only receiving hospitals in Imperial County, and that each agency is experiencing economic challenges, and that each campus is critical to the medical services delivery, and

WHEREAS, Imperial County Citizens are better served by a single Healthcare District System, by delivering efficiencies of scale, by elimination of service duplication, and by maximizing reimbursements for an estimated 45% Medi-Cal patient population, and

WHEREAS, Pioneers Memorial Healthcare District seeks the expansion of the special district boundaries to include all areas of Imperial County, and to prepare a new governance structure of all areas within the new district boundaries of Imperial County, and

NOW, THEREFORE, BE IT RESOLVED, that the Pioneers Memorial Healthcare District Board of Directors, in consideration of the special district expansion, approves the Resolution and pending Imperial County Local Agency Formation Commission application for the expansion of the district.

**PASSED, ADOPTED AND APPROVED BY UNANIMOUS VOTE OF THE BOARD THIS
24th DAY OF JANUARY 2023**

**Catalina Alcantra-Santillan, President, Board of Directors
of the Pioneers Memorial Healthcare District**

s/ _____
(Signature)

Certification

I, Aracely Smith, duly appointed and acting secretary to the Board of Directors of Pioneers Memorial Healthcare District, hereby certify that the foregoing is a true and correct copy of Resolution No. 2023-02, adopted by unanimous vote of the Board on January 24, 2023.

Aracely Smith, Clerk of the Board

Signature: _____
Date: _____, 2023