

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

Tuesday, April 25, 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 5:00 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
Sally Nguyen, General Counsel
Ramaiah Indudhara, MD, Chief of Staff

GUESTS:

Carly Zamora, Chief of Clinics
Ryan Kelley, Chief of Logistics & Support Services
Carol Bojorquez, Interim CNO
Jorge Reyes, HR Director

B. Approval of Agenda

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

II. **BOARD MEMBER COMMENTS**

Director Berker advised that she will be leaving on vacation starting May 15th and returning on May 27th. She will not be able to attend the Board meetings in May.

The Board members were asked if they wish to contribute to the Hospital Week events. Board members interested in doing so can reach out to Ms. Smith by end of day tomorrow.

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 shall

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

Employee who works at Medical Records, Lourdes Lackey, addressed the Board. She spoke about recruiting efforts that had been initiated a couple of months ago and then stopped. Ms. Lackey stated that she understands it is difficult times right now. But feels that if PMHD will not be hiring, then why post all these jobs. She advised that she is now doing two full-time jobs and a part-time job in her department. While the work is demanding and she has been told not to worry about it and go home without completing tasks, she cannot do that. If the charts are not completed and scanned, then the coders can't do their part so that billing can be processed. There are a lot of steps to complete a chart so that they are not filed incomplete; that is revenue that could be lost if we cannot keep up with the work. She has not been able to keep up and is asking the Board and Administration to reconsider hiring at least one full-time position to ease the workload.

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 mask restrictions have been relaxed and there have not been any significant issues due to this change. There have been some variants of COVID 19 reported in many parts of the world and the US; however, nothing has been seen in the Imperial County, thus far. He noted that there was a discussion regarding reviewing and revising the medical staff's existing bylaws. Dr. Indudhara mentioned that there was a slight decrease in overall transfer rates compared to January and February. However, the pattern of transfers made remains very similar to previous reports, mostly neuro, GI and pediatrics. He requested that the Board approve the medical staff recommendations. Director Santillan asked if the MEC was advised that the bylaws would be reviewed and agreed to that and to cover some of the cost? She also asked if PMHD General Counsel has had the opportunity to review the medical staff bylaws. Mr. Sorensen stated that the MEC was supportive of moving forward, but still must take the cost through the approval process. Medical Staff was asked to pay for half the cost of the consulting fee and PMHD would pay for the other half. Dr. Indudhara noted that it was discussed by the MEC and appreciated the Administration taking the lead as the bylaws are quite old and due for revision. Once the bylaws are drafted, they would be reviewed by Medical Staff, Med/Staff attorney, Senior Leaders, PMHD General Counsel and PMHD Board before they are adopted. A motion was made to approve the medical staff report by Director Rubin, seconded by Director Aguirre. **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. Approval of Minutes
1. 3/22/23 Special Meeting

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2. 3/28/23 Regular Meeting

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

B. Hospital Policies

1. Antimicrobial Stewardship Program
2. Chemical Materials & Waste Management Plan
3. Continuing Medical Education Standards for Commercial Support
4. Life Safety Management Plan 2023
5. Medical Equipment Management Plan 2023
6. Physician Wanting to Reapply to the Medical Staff
7. Safety Management Plan
8. Security Management Plan
9. Utilities System Management Plan

A motion was made to approve the hospital policies by Director Berker, seconded by Director Fonseca. **The motion was unanimously carried.**

C. Update Reports

1. Women's Auxiliary

Director Rubin advised that the Women's Auxiliary is not having the gigantic Attic Treasures event as planned. Instead, they had a smaller event outside the gift shop on April 15th and made about \$1,000. The general meeting will be on April 28th.

2. LAFCO

There was nothing to report.

3. Funding Requests Committee

There were no requests.

4. Compliance Evaluation
5. General Counsel Evaluation

Reminder given to Board members to turn in their revised evaluation ratings.

D. March Finance Report

Ms. Loper reported that there was an increase in outpatient revenue of about \$5 million. Unfortunately, outpatient reimbursement is not as good as we would like, but it was still a good month. There was a slight increase in expenses due to higher census across the board. There was a profit of \$1.5 million from operations. Ms. Loper advised that we have started to accrue for the District Directed Program, which is a new supplemental payment program. The profit amount does include that program. Without that program, there would still have been a profit of \$500,000 to the bottom line. This was the first real profit to the District that did not have a FEMA payment pick up to it. The District has

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received the CHW IGT's for rate range and QIP which brought days cash on hand up to 41.5 days. The District still expects to receive one from Molina and another supplemental program. She is very optimistic that 50 days cash on hand will be achieved by June 30, 2023. This decreases the fiscal loss to \$5.5 million for the year. There are still a couple of FEMA projects to complete, but they are no longer doing the expedited funds. Between the two, there is still about \$4 million in COVID expenses that need to be submitted. Co-pay collections were started and there has been minimal pushback. The budget process has begun, and the Board will see the draft next month. Director Santillan asked if a higher reimbursement could be obtained for providing radiology and laboratory services in the RHCs. It was noted that the visit is what is covered which includes any service provided. Director Aguirre asked if the "My Chart" app is working out well. Ms. Loper stated that it is working well and when patients come in to register, they are provided with a link via text so they can sign up for the app. It has been well received.

E. Human Resources Report

Mr. Reyes reported that HR continues to assist departments through their recruitment efforts. The turnover rate increased slightly in March to 1.2%. The number of employees with COVID went up to nine per week. At the end of March, PMHD had a total of 881 employees; however, at the end of April, that number should be closer to 1,000 with the addition of Imperial Heights. There are still staff from El Centro applying for PMHD positions; however, not as many as seen before. There have not been many RNs applying, even with a signing bonus offered. Director Santillan asked if there are enough RNs given that registry is going away. Ms. Bojorquez mentioned that Nursing is working on position control. They are reviewing how many nurses there are per department and evaluating what the need is for staffing. The assessment will determine if there is a true staffing shortage, or if processes need to be streamlined.

A motion was made to approve the finance and HR reports by Director Rubin, seconded by Director Aguirre. **The motion was unanimously carried.**

F. Authorize Renewal of Encompass Agreement with Roche Diagnostics

Contract Value: \$53,309.⁵⁷; Contract Term: Three (3) years; Budgeted: Yes; Budget Classification: Supplies

G. Authorize Master Pricing Agreement with Zimmer Biomet

Contract Value: based on utilization; Contract Term: Three (3) years; Budgeted: No; Budget Classification: Supplies

H. Authorize Statement of Work with Coker Group Consulting

Contract Value: not to exceed \$10,000; Contract Term: One (1) year; Budgeted: No; Budget Classification: Purchased Services

I. Authorize Addendum to Interim Revenue Cycle Service Agreement with Warbird Consulting Partners

Contract Value: not to exceed \$155,000 + travel expenses; Contract Term: Extending to end 12/31/23; Budgeted: No, but will for FY2024; Budget Classification: Purchased Services

J. Authorize Amendment to Professional Services Agreement with Christopher Lai, MD

Contract Value: based on volumes; Contract Term: One (1) year; Budgeted: Yes; Budget Classification: Professional Fees

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- K. Authorize Refinancing Lease Term Agreement for 3T MRI with Canon Medical Systems USA, Inc.
Contract Value: Two options - \$9,914/mo. or \$8,820/mo.; Contract Term: 48-month or 60-month lease; Budgeted: Yes; Budget Classification: Lease - Equipment
- L. Authorize Membership dues with American Hospital Association/California Association of Hospitals & Health Systems
Contract Value: \$30,139; Contract Term: One (1) year; Budgeted: Yes; Budget Classification: Dues
- M. Authorize Agreement to Update Medical Staff Bylaws with Cindy A Segar-Miller LLC
Contract Value: \$11,500; Contract Term: six (6) to nine (9) months; Budgeted: No; Budget Classification: Purchased Services
- N. Authorize Revisions to 2022-2023 Employee Benefits Plan
Contract Value: \$7,903,364; Contract Term: One (1) year; Budgeted: Yes; Budget Classification: Salaries, Wages & Benefits

ITEM I – Director Fonseca asked what the reason for the SoW was. Ms. Loper noted that there are a lot of projects that have come up that the consultant has expertise with that we do not have currently on campus. One of those projects is reviewing the materials management area for efficiencies. Consultant will also be assisting in the implementation of the Cerner project, related to revenue cycle, and completing the work being done on denials.

ITEM L – There was a question as to what AHA does for Pioneers. AHA is a group that lobbies on behalf of hospitals. Whether or not, PMHD is a member, they would still continue with their supportive activities. Mr. Sorensen supported the idea of taking one year off from paying membership.

A motion was made to approve items F through N, with the exception of L, by Director Aguirre, seconded by Director Rubin. **The motion was unanimously carried.**

Mr. Sorensen advised that a PTO accrual schedule was approved at the last meeting. It will be revised to make the language clearer. The changes are for new employees only.

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 Chief Executive Officer)

The District received notification from CMS that it can take over the SNF as of April 1, 2023. This means all the revenue can now come to PMHD as of that date. The bad news is that staff have been scrambling to get everything set up on bringing them on board. The employees at Imperial Heights had a lot of questions. HR and Mr. Sorensen have rounded the facility and answered as many questions as possible. The staff is happy to be part of PMHD. Mr. Sorensen stated that the PMHD finances are improving nicely. While he is very optimistic and we've come a long way, there is still a long way to go. There is still a lot of opportunity to improve, and we will continue to do that. Despite that, we must still celebrate the progress that has been made. Discussions continue regarding GI and improving the hospitalist service. Mr. Sorensen reported that he had a

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leadership team building exercise with the Senior Leaders. He found the group to be very engaged and very interested in getting better and being a stronger team. A lot of the activities throughout the organization, like the ED Huddles and Safety Huddles, are breaking down all the silos that hindered performance and communication. There is still a lot of work to do, but we are seeing significant improvement in many ways. Mr. Sorensen advised that he will be speaking with the Department leaders next Thursday about shifting the focus to customer service. There were a couple of occasions where we felt as employees that we were empathetic, but our customers did not feel it. We must exercise some emotional intelligence to realize that we are not making the connection and adjust to becoming more empathetic and supportive. We are hearing a lot more good stories than bad ones, but there is still work to be done. Lastly, Mr. Sorensen announced the Mr. Ryan Kelley will be leaving the organization. The current leaders will take over different departments in his area. The Board and Mr. Sorensen thanked Mr. Kelley for all his years of service and support to Pioneers.

2. Hospital operations (Interim Chief Nursing Officer)

Ms. Bojorquez reported that March 6th is when the ED Huddle started. There are about 15 to 20 indicators on that scorecard having to do with the throughput process. When it first started, there was a lot of red on the dashboard. Through the work of a multi-disciplinary group, a lot of the reds have been turned green. The staff is very engaged and feel empowered at the frontline level; they can make changes and make an impact. The Safety Huddles started on March 16th, again, it is a multi-disciplinary team meeting. Through that work, we have identified 285 safety concerns and 228 of those have been resolved. The rest are still being addressed and followed-up on. The severity of issues reported vary from not very complex to high complexity. Ms. Bojorquez noted that the Base Station go-live date is set for July 1, 2023. The training for the staff has already started and they are already in their second week of training. Nursing is working on a couple of recruiting events. The IVC nurses will be graduating in June, so a luncheon will be held where the directors of the various departments will be joining the new nurses to talk about their areas. Mr. Bojorquez reported that there was a change in department leadership. Oscar Garcia will focus only on the ER and the Base Station project. Gerardo Ibarra will now be the Director of ICU and Med/Surg. Lupe Ruiz will now go back to solely directing the Case Management department. Ms. Bojorquez expressed her thanks to Ms. Ruiz for taking care of the Med/Surg department. Patricia Robles will now be the Interim Director for the OB department. Grace Gallardo rejoined Pioneers and she has agreed to take over as a clinical manager in that department. The providers and the staff have voiced their support for this move in the OB department.

3. Clinics operations (Chief of Clinic Operations)

Ms. Zamora reviewed her report regarding patient satisfaction with the providers. The one that stood out the most was the wait times at the clinics. The clinic staff will focus on improving that rating. These reports are discussed at the daily huddles with staff and providers, and they discuss what they want to focus on and improve. Ms. Zamora noted that she is really proud of the work that the Women's Clinic has done in reducing their no-show rate; it went down from 18% to 9%. This

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week, they have started having frontline staff direct the board huddles rather than the leadership. This has improved the engagement of the staff. Wait times are also reviewed in the clinics. The staff is getting the patient registered and ready for their appointment timely. The trend is that the wait time delays are mostly related to the providers. A meeting will be held with the providers next month to provide them with feedback and a month's worth of data that they can all discuss and provide their input. Just like huddles, it's not about what leadership is dictating. It is about what everyone is seeing, and they come up with some really good ideas on how to fix the issues. A list of the physician recruitment efforts was provided to the Board in the packet, so they can see what has been done and is still in progress.

4. Medical staff (Chief Nursing Officer)

Nothing further to report.

5. Finance (Chief Financial Officer)

Ms. Loper mentioned that through the revenue cycle project, they have been able to reduce the Xtend backlog from \$4 million down to \$1.4 million.

6. Information technology (Chief Nursing Officer)

Ms. Loper reported that we have finally received a Cerner implementation date of April 2024, which is a lot earlier than anticipated. Cerner will come on campus in June of this year and weekly calls will begin next week. Testing will begin in the Fall 2023. Mr. Sorensen advised that the April date works well since a lot of the major platform contracts that we will be doing away with will be ending around that time.

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

There was nothing to report.

8. Quality resources - (Director of Quality Resources)

Ms. Bojorquez provided an update on the Employee Engagement Score survey. It was completed in March. The organizational response rate was 47%. This was the lowest it has been since PMHD started conducting surveys back in 2017. A plan will be developed on how the results will be rolled out to everyone.

9. Board matters

There was nothing to report.

B. Legal Counsel Report – Sally Nguyen

1. All matters to be discussed in Closed Session

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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

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

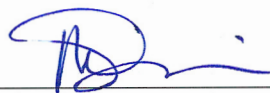
A. Take Actions as Required on Closed Session Matters

The Board approved opposing bill AB 918 unless it is amended.

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

The meeting was adjourned to the next meeting.


Board Secretary


Clerk of the Board