



MINUTES

SOUTHERN NEVADA COMMUNITY HEALTH CENTER QUALITY, CREDENTIALING & RISK MANAGEMENT COMMITTEE MEETING

April 13, 2023 – 1:00 p.m.

Meeting was conducted via Webex Event

MEMBERS PRESENT: Scott Black – Community Member (*via Webex*)
Jose L. Melendrez – Consumer Member (*via Webex*)

ABSENT: Erin Breen – Community Member

ALSO PRESENT: None
(In Audience)

LEGAL COUNSEL: Heather Anderson-Fintak, General Counsel

EXECUTIVE DIRECTOR: Fermin Leguen, MD, MPH, District Health Officer

STAFF: Tawana Bellamy, Andria Cordovez Mulet, Randy Smith, Edward Wynder,
Cassius Lockett, Cassondra Major, Kyle Parkson

I. CALL TO ORDER and ROLL CALL

Member Melendrez called the Southern Nevada Community Health Center Quality, Credentialing & Risk Management Committee Meeting to order at 1:02 p.m. Tawana Bellamy, Administrative Secretary, administered the roll call and confirmed a quorum.

II. PLEDGE OF ALLEGIANCE

III. FIRST PUBLIC COMMENT: A period devoted to comments by the general public about those items appearing on the agenda. Comments will be limited to five (5) minutes per speaker. Please clearly state your name and address and spell your last name for the record. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chair or the Board by majority vote.

Seeing no one, the Chair closed the First Public Comment portion.

IV. ADOPTION OF THE APRIL 13, 2023 MEETING AGENDA (*for possible action*)

A motion was made by Member Black, seconded by Member Melendrez, and carried unanimously to approve the April 13, 2023 Agenda, as presented.

V. REPORT / DISCUSSION / ACTION

1. Approve Quality, Credentialing & Risk Management Committee Meeting Minutes – July 27, 2022; direct staff accordingly or take other action as deemed necessary (*for possible action*)

A motion was made by Member Melendrez, seconded by Member Black, and carried unanimously to approve the July 27, 2022 Meeting Minutes, as presented

2. Nomination of Chair of the Quality, Credentialing & Risk Management Committee; direct staff accordingly or take other action as deemed necessary (*for possible action*)

Member Melendrez nominated Member Erin Breen to serve as Chair to the Quality, Credentialing & Risk Management Committee. Member Melendrez further explained that he would serve as chair if Member Breen was not able to.

Member Melendrez agreed to chair the remaining of the meeting.

A motion was made by Member Melendrez, seconded by Member Black, and carried unanimously to nominate Member Erin Breen to serve as Chair of the Quality, Credentialing & Risk Management Committee and Approve Recommendation to the Southern Nevada Community Health Center Governing Board on April 18, 2023.

3. Review and Discuss the Quality, Credentialing & Risk Management Charter and Approve Recommendation to the Southern Nevada Community Health Center Governing Board on April 18, 2023; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Randy Smith, FQHC Operations Officer presented the recommended changes to the Quality, Credentialing & Risk Management Charter. Most changes are to realign the activities to the essential activities that HRSA requires for the health center and FTCA programs. Other changes were related to language and grammar.

Member Black commented that having the charter updated to what we need to do is good.

A motion was made by Member Melendrez, seconded by Member Black, and carried unanimously to approve the Quality, Credentialing & Risk Management Charter and Approve Recommendation to the Southern Nevada Community Health Center Governing Board on April 18, 2023

4. Review and Discuss the Quality, Credentialing & Risk Management Meeting Schedule; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Mr. Smith advised the committee would meet at least four (4) times per year. Mr. Smith proposed that the committee would meet quarterly to assess each quarter's activities.

Month	Review
January	Quarter 4 activities
April	Quarter 1 activities
July	Quarter 2 activities
October	Quarter 3 activities

Member Melendrez commented about the meeting times aligning with the Governing Board meetings in order to be ready to present the recommendations. Mr. Smith agreed.

Mr. Smith advised that Ms. Bellamy will contact committee members to establish the meeting times.

5. Review, Discuss and Accept the Quality and Risk Management Activities Report and Approve Recommendation to the Southern Nevada Community Health Center Governing Board on April 18, 2023; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Cassandra Major, Quality Risk Management Coordinator presented the Quality and Risk Report with the following highlights:

- Quality Management Plan – no changes.
- Uniform Data Systems (UDS) – We are required to report on:
 - Patient Demographics
 - Clinical Services and Outcomes
 - Financial Costs

Mr. Smith commented that the final UDS report was accepted, and we met our requirements for this year. Mr. Smith further shared that staff attended a kickoff meeting of a new software, Azara, which will help to streamline the reporting process and improving clinical services.

Ms. Major continued with the following Quality and Risk Report highlights:

- Clinical Performance Measures
 - Required to report eighteen (18) measures to HRSA
 - Not reporting on three (3) of the measures because we do not have obstetric or dental services. Once we have those services, we will start reporting early entry to prenatal care, low birth weight and dental sealant for children between 6-9 years.
 - Quality of Care Measures – UDS data recently submitted to HRSA, there are improvement in several areas.
 - In the Childhood Immunization Status and Weight Assessment and Counseling, we had a pediatric nurse practitioner in 2020-2021. Most of the visits for that area now tend to be sick visits as opposed to well-child visits. It is a challenge to meet the criteria in those areas.

Dr. Leguen inquired about what age group and immunizations are reported for the childhood immunization status. Ms. Major advised it is specific immunizations before a child's second birthday. Dr. Leguen commented that we may need to work with our informatics staff and Nevada's immunization system to be able to capture the information and provide an accurate report of the status. Ms. Major agreed with Dr. Leguen and commented that she will work with the Medical Assistants to help understand how to pull the data from WebIZ into our Human Resource System. Ms. Major further advised that was a huge component that was missing in capturing that data for the patients that were seen.

Dr. Leguen inquired about the cervical cancer screening, and that it is inconsistent with our planning in the future. Mr. Smith agreed and commented that they are working with some of the health plans. We have a list of patients who need this service and staff are actively reaching out to them. Mr. Smith further shared that Azara Population Health System, will help us to accurately identify gaps in care at the time patients are in the office to see us for something else or if we are engaging in an outreach effort using our medical staff.

Mr. Smith advised that of the eighteen (18) measures, the Health Center improved on eight (8).

Dr. Leguen inquired about benchmarking our current performance. Ms. Major advised that last year they were looking at how we ranked with other FQHC's in Nevada, and we have some work to do. In 2023, we are building towards being better in a lot of the areas. We will focus on some of the measures where we ranked low, and we are already building some of the processes out to ensure we can improve them. Mr. Smith commented that in the summer, we will benchmark our performance again relative to other FQHCs in Nevada once everything is finalized.

Ms. Major advised that the health center decided to focus on five (5) of the fifteen (15) measures. Work has already started to find ways to improve the outcomes of our patients in these measures:

- Controlling High Blood Pressure
- Poor Controlled Hemoglobin A1c (HbA1c)
- HIV Screening
- HIV Linkage to Care
- Tobacco Use Screening and Cessation Intervention

Ms. Major reviewed the measures for the first quarter, January – March of 2023.

- Controlling High Blood Pressure: 55.56%
- Poor Controlled Hemoglobin A1c (HbA1c): 0.00%*
- HIV Screening: 53.49%

- HIV Linkage to Care: 100%
- Tobacco Use Screening and Cessation Intervention: 0.00%*
*Data not calculated correctly

Ms. Major further shared the following highlights:

- Risk Management plan – no changes
 - Risk Management Reports January, February and March:
 - Medical Event(s) (Dr. Bluebird) – Four (4)
 - Patient Complaint(s)/Grievance(s) – Two (2)
 - Medication Error(s) – Zero (0)
 - Patient Issue(s) – One (1) – patient was discharged from our clinic
 - Employee Incident(s) – One (1)
 - Health Insurance Portability and Accountability Act (HIPAA) Violation(s) – Zero (0)
- Activities we are working on:
 - Clinical Practice Audits/Guidelines
 - Incident Reporting
 - Patient Complaints/Grievances
 - Patient Safety
 - Patient Satisfaction Surveys
 - Policies and Standard Operating Procedures
 - Workflows
- Standard Operating Procedure (SOP)
 - Working to provide clear-cut direction and instructions as to the steps necessary to complete a specific task or process.
 - Best Practices
 - Consistency and Efficiency
 - Quality
 - Proper Onboarding and Training
 - Maintains Organizational Knowledge
 - Reduces Misunderstandings
 - Improves Safety
 - Compliance
 - Finalized SOPs
 - Basic Infertility (Family Planning)
 - Bus Passes
 - Late Arrival, No-Show and Same Day Cancellation
 - Prescription Refill
 - Prevention, Detection and Control of High Blood Pressure
 - Ryan White Outpatient Ambulatory Health Services
 - Telehealth Process
 - Vaccine Administration

Mr. Smith thanked Ms. Major for writing all the SOPs.

Ms. Major provided an overview of the survey results for January, February and March of 2023. The survey was completed by patients in Family Health, Family Planning and Ryan White. The survey was offered in English and Spanish.

A motion was made by Member Melendrez, seconded by Member Black, and carried unanimously to Accept the Quality and Risk Management Activities Report and Approve Recommendation to the Southern Nevada Community Health Center Governing Board on April 18, 2023.

6. Review and Discuss the Credentialing and Privileging of Providers and Approve Recommendations to the Southern Nevada Community Health Center Governing Board on April 18, 2023; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Mr. Smith presented the following providers for Credentialing and Privileging:

- Chris Mariano, MSN, APRN, CPNP-PC
- Maria Arganoza-Priess, DO, MS
- Matthew Bonello, DO

A motion was made by Member Melendrez, seconded by Member Black and carried unanimously to approve the Credentialing and Privileging of Providers and Approve Recommendations to the Southern Nevada Community Health Center Governing Board on April 18, 2023.

VI. SECOND PUBLIC COMMENT: A period devoted to comments by the general public, if any, and discussion of those comments, about matters relevant to the Board's jurisdiction will be held. Comments will be limited to five (5) minutes per speaker. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chair or the Board by majority vote.

Seeing no one, the Chair closed the Second Public Comment portion.

XIII. ADJOURNMENT

The Chair adjourned the meeting at 2:48 p.m.

Fermin Leguen, MD, MPH
District Health Officer/Executive Secretary/CHC Executive Director

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