

# **MINUTES**

## SOUTHERN NEVADA COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING July 25, 2023 – 3:30 p.m. Meeting was conducted In-person and via WebEx Event Southern Nevada Health District, 280 S. Decatur Boulevard, Las Vegas, NV 89107 Red Rock Trail Rooms A and B

MEMBERS PRESENT: ABSENT:	Jose L. Melendrez, Chair – Consumer Member ( <i>Webex/In person</i> ) Donna Feliz-Barrows, Vice-Chair – Consumer Member ( <i>In-person</i> ) Erin Breen – Community Member, UNLV Vulnerable Road Users Project ( <i>via Webex</i> ) Jasmine Coca – Community Member, Catholic Charities of Southern Nevada ( <i>In person</i> ) Brian Knudsen – Consumer Member ( <i>via Webex</i> ) Father Rafael Pereira – Community Member, All Saints Episcopal Church ( <i>In person</i> ) Lucille Scott – Consumer Member Luz Castro – Consumer Member
	Scott Black – Community Member, City of North Las Vegas
ALSO PRESENT:	
LEGAL COUNSEL:	Heather Anderson-Fintak, General Counsel
EXECUTIVE DIRECTOR:	Fermin Leguen, MD, MPH, District Health Officer
STAFF:	Tawana Bellamy, Andria Cordovez Mulet, Jacques Graham, Edward Wynder, Cassius Lockett, Cortland Lohff, Randy Smith, Kim Saner, Michael Johnson, Donnie (DJ) Whitaker, Justin Tully, Jonna Arqueros, Yin Jie Quinn, Jonas Maratita, Luann Province, Kimberly Monahan, David Kahananui, Cassondra Major, Lourdes Yapjoco, Randolph Luckett, Talibah Abdul-Wahid

## I. CALL TO ORDER and ROLL CALL The Chair called the Southern Nevada Community Health Center (SNCHC) Governing Board Meeting to order at 3:31 p.m. Tawana Bellamy, Administrative Secretary, administered the roll call and confirmed a quorum. Ms. Bellamy provided clear and complete instructions for members of the general public to call in to the meeting to provide public comment, including a telephone number and access code.

## 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 JULY 25, 2023 MEETING AGENDA (for possible action)

A motion was made by Member Feliz-Barrows, seconded by Member Father Rafael and carried unanimously to approve the July 25, 2023 Meeting Agenda, as presented.

- V. **CONSENT AGENDA**: Items for action to be considered by the Southern Nevada Community Health Center Governing Board which may be enacted by one motion. Any item may be discussed separately per Board Member request before action. Any exceptions to the Consent Agenda must be stated prior to approval.
  - 1. APPROVE MINUTES SNCHC Governing Board Meeting: June 20, 2023 (for possible action)

A motion was made by Member Father Rafael, seconded by Member Feliz-Barrows, and carried unanimously to approve the Consent Agenda, as presented.

#### VI. REPORT / DISCUSSION / ACTION

Recommendations from the July 5, 2023 Quality, Credentialing & Risk Management Committee Meeting

1. Review, Discuss and Accept the Quality and Risk Management Report; direct staff accordingly or take other action as deemed necessary (for possible action)

Cassondra Major, FQHC Quality Management Coordinator, presented the Quality and Risk Management Reports. Ms. Major advised of a request from the committee to enhance the data reporting process to include year-to-date, year-over-year and external benchmarks (e.g., UDS, HEDIS & Healthy People 2023). The focus areas will include FQHC Clinical Performance Measures, Patient Satisfaction Survey Results and Risk Management Goals. Ms. Major advised that future presentation would include the requested information.

Ms. Major advised that the FQHC selected five Uniformed Data System (UDS) measures to focus on for the remainder of 2023.

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

Ms. Major provided an overview of the January to June 2023 quality measures for the five (5) areas of focus. Ms. Major advised the number in parentheses is what was reported in 2022 for our UDS measures. Ms. Major further advised of a new population health platform called Azara, which allows for a deeper dive into the metrics and measures that has been implemented in the health center and staff are currently training. Ms. Major advised that for Poor Controlled Hemoglobin A1c, we want that number closer to zero than 100, as this is a reverse metric.

Ms. Major further advised of the following:

- 2023 Quarter Two Risk Summary (April to June)
  - Medical Event(s) (Dr. Bluebird) Two (2)
  - Patient Complaint(s)/Grievance(s) Zero (0)
  - Medication Error(s) Zero (0)
  - Patient Issue(s) Zero (0)
  - Employee Incident(s) Zero (0)
  - HIPAA Violation(s) Zero (0)
- Risk Assessments
  - o Office Administration Risk Assessment completed on February 23, 2023
    - A few areas were identified as needing improvement. Most can be fixed with new or updated polices, standard operating procedures, or workflows.
      - Welcome packet (having it available for new patients)
      - Training plan
      - Translation services
  - o HIPAA Risk Assessment completed June 12, 2023
    - No findings for Decatur or Fremont

- Projects
  - Implementation of Azara DRVS
  - Develop New or Update policies and Standard Operating Procedures (SOP)
  - o Develop workflows for providers, medical assistants and nurses.
- Patient Satisfaction Survey Results

	Completed Surveys	Visit Count
April	324	867
May	245	869
June	172	1041

A motion was made by Member Feliz-Barrows, seconded by Member Father Rafael, and carried unanimously to accept the Quality and Risk Management Report, as presented.

2. Approve Credentialing and Privileging of Providers Carol Wingfield, APRN-CNP, Kikam Yun, APRN II and Stephanie Romano, APRN II; direct staff accordingly or take other action as deemed necessary (for possible action)

Randy Smith, FQHC Operations Officer, presented to the board for approval the credentialing and privileging of providers Carol Wingfield, Kikam Yun, and Stephanie Romano.

A motion was made by Member Feliz-Barrows, seconded by Member Father Rafael, and carried unanimously to approve the Credentialing and Privileging of Providers Carol Wingfield, APRN-CNP, Kikam Yun, APRN II and Stephanie Romano, APRN II, as presented.

Recommendations from the July 17, 2023 Finance & Audit Committee Meeting

3. Receive, Discuss and Accept the May 2023 YTD Financial Report; direct staff accordingly or take other action as deemed necessary (for possible action)

Ms. Whitaker presented an overview of the May 2023 Year-to-Date Financial Report as of May 31, 2023. Ms. Whitaker further advised that this budget does not include the budget augmentation that was approved in June as this report is as of May 31, 2023. The June financial report will include the budget augmentation.

#### **Highlights**

- All Funds for All Divisions as of May 31, 2023
  - Net Budget Position- negative \$4.475M
  - Net Actual Position negative \$4.414M
  - Net Position Variance \$60,833
- Revenue
  - Charges for Services was budgeted at \$14.30M, actual was \$16.74M, with a variance of \$2.4M increase is due to a good portion of pharmacy related activity.
- Supplies were budgeted at \$10.86M, actual was \$14.44 with a variance of \$3.58M is due to a good portion of pharmacy related activity.
- Other Grant Revenue is the WRAP reimbursement revenue.
- Total Transfers was budgeted at \$5.15M, actual was \$4.89M with a variance of negative \$256K.

Member Father Rafael inquired about the revenue for Administration (Revenue by Department). Ms. Whitaker advised that is generated by the WRAP reimbursement. Ms. Whitaker advised that this was not part of the initial budget. Ms. Whitaker further explained that the WRAP payment is Nevada Medicaid reimbursement. When the health center has a charge, the health center gets the difference between that and our Prospective Payment System (PPS) rate. It is revenue that if we are not collecting it in the charges for services, then we are reimbursed that amount. Ms. Whitaker advised that we are able to go back two years.

Ms. Whitaker further reviewed the Expenses by Department. Further, Ms. Whitaker advised on a question from the board at the June 2023 meeting regarding the budgeted and actual dollars for Administration under Employment (Salaries, Taxes & Fringe). Ms. Whitaker advised that the difference was due to payroll that was posted in a different area, and they were able to reclassify that activity to align to the correct area.

Member Father Rafael inquired if the Sexual Health Clinic is included with the FQHC now or will be in FY2024. Mr. Smith advised it will be in FY2024.

A motion was made by Member Feliz-Barrows, seconded by Member Father Rafael, and carried unanimously to accept the May 2023 Year-to-Date Financial Report, as presented.

VII. <u>BOARD REPORTS</u>: The Southern Nevada District Board of Health members may identify and comment on Health District related issues. Comments made by individual Board members during this portion of the agenda will not be acted upon by the Southern Nevada District Board of Health unless that subject is on the agenda and scheduled for action. *(Information Only)* 

There were no board reports.

### VIII. EXECUTIVE DIRECTOR & STAFF REPORTS (Information Only)

• Executive Director Comments

Dr. Leguen advised that COVID-19 testing ended at the Decatur office. Dr. Leguen commented that employees involved in that work will be recognized at a future meeting.

• Highlights from the June 2023 Operational Report

Randy Smith, FQHC Operations Officer presented highlights from the June 2023 Operations report.

Mr. Smith advised that Gary Costa formerly resigned, and we are grateful for his service. Mr. Smith further advised that with Mr. Costa's resignation, we are still in compliance with the bylaws and HRSA with nine (9) board members. Mr. Smith advised the board that he will need help identifying potential board members. Chair Melendrez agreed with Mr. Smith and advised the board members to search their networks and help identify potential patient board members. Mr. Smith advised of the gender, race and ethnicity the candidates would need to be to meet the population of the patients served at the health center. Ms. Anderson-Fintak further advised of the qualification needed for a patient board member.

Further to an inquiry from Member Coca on who should board members provide the information to once someone has been identified, Mr. Smith advised board members to send identified candidates to him.

Ms. Anderson-Fintak further advised of other board members' requirements in addition to being a patient board member. Chair Melendrez provided his experience in being a patient board member. Chair Melendrez further advised that the staff are doing an outstanding job.

Further to an inquiry from Member Coca regarding the State Incubator Grant, Mr. Smith advised that he is not sure why we did not receive the full amount as the state did not provide a lot of feedback.

Further to an inquiry from Member Coca on the resubmission of the State Incubator Grant, Mr. Smith advised that it has been resubmitted and we should hear back hopefully in the next few days.

Further to an inquiry from Member Coca regarding ongoing employment for staff members who were part of the COVID-19 testing, Mr. Smith advised that we have found a place for them.

Further to an inquiry from Member Coca on Azara DRVS ability to pull numbers for reports easier, Mr. Smith advised yes. The software will help provide data for mandated reporting.

Further to an inquiry from Member Coca regarding Medicaid being an impediment for patients if they need to be seen for three (3) different things, Mr. Smith advised that Medicaid is allowing us to bill for mor than one (1) medical service each day.

Further to an inquiry from Member Father Rafael on hiring staff to reach goals, Mr. Smith advised that the medical director position is vacant, and several candidates are moving through the recruitment process for the Licensed Clinical Social Worker (LCSW) position. Mr. Smith further advised that we are doing well with the support staff we have. There are a number of new providers that are still ramping up and we have not realized the full benefit of having them yet.

Further to an inquiry from Member Father Rafael on when the FY24 starts and if the FY24 goals will be tracked, Mr. Smith advised that the FY24 started July 1 and he plans to provide an update on the goals at each board meeting.

Further to an inquiry from Member Coco on the strategies and if they will be shared with the board, Mr. Smith advised that he would share them as educational information in future meetings.

Further to an inquiry from Chair Melendrez on the number of refugees we are expecting. Mr. Smith advised the existing team is seeing about twenty (20) per week. Productivity in part is predicated on the needs of the program and of the refugees coming into the system. The health center's goal is to increase capacity to see more refugee patients.

Further to an inquiry from Member Coco on medical examination for immigrant applicants, Dr. Leguen advised that we are referring to the traditional refugee health assessment. Immigration services are completely different and have certain requirements and have to be credentialed by a Civil Surgeon in order to be able to deliver that service. Dr. Leguen further advised that our initial approach is to start with the refugee service and then as we develop, we can incorporate all of the tools.

## IX. INFORMATIONAL ITEMS

- Community Health Center (FQHC) June 2023 Operations Reports
- X. <u>SECOND PUBLIC COMMENT</u>: 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.

## XIII. ADJOURNMENT

The Chair adjourned the meeting at 4:28 p.m.

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

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