



## MINUTES

### SOUTHERN NEVADA COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING

September 19, 2023 – 2:30 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:** Donna Feliz-Barrows, Vice-Chair – Consumer Member (*in person*)  
Erin Breen – Community Member, UNLV Vulnerable Road Users Project (*via Webex*)  
Jasmine Coca – Community Member, Catholic Charities of Southern Nevada (*in person*)  
Luz Castro – Consumer Member (*via Webex*)  
Scott Black – Community Member, City of North Las Vegas (*via Webex*)  
Lucille Scott – Consumer Member (*in person*)
- ABSENT:** Jose L. Melendrez, Chair – Consumer Member  
Brian Knudsen – Consumer Member  
Father Rafael Pereira – Community Member, All Saints Episcopal Church
- ALSO PRESENT:** David Neldberg
- LEGAL COUNSEL:** Edward Wynder, Associate General Counsel
- EXECUTIVE DIRECTOR:** Fermin Leguen, MD, MPH, District Health Officer (*absent*)
- STAFF:** Tawana Bellamy, Andria Cordovez Mulet, Cassius Lockett, Cortland Lohff, Randy Smith, Donnie (DJ) Whitaker, Jonna Arqueros, David Kahananui, Kimberly Monahan, Luann Province, Merylyn Yegon, Bernadette Meily, Cassondra Major, Greg Tordjman, Jonas Maratita, Justin Tully, Kim Saner, Kyle Parkson, Merylyn Yegon, Beverly Cuasito, Miriam Lee, Renita Anderson, Patricia Quiroz, Itzel Ortega-Martinez, Claudette Farjado, Jennifer Loysaga, Randolph Lockett, Cherie Custodio, Wendy Mendoza, Maria Mendoza, Dennis Morala, Joannah Delarmente, Ina Fincher, Marites Navarro, Edna Del Rosario, Myra Santillan, Lilliana Dominguez

#### I. CALL TO ORDER and ROLL CALL

The Vice Chair called the Southern Nevada Community Health Center (SNCHC) Governing Board Meeting to order at 2:32 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. RECOGNITION

##### COVID-19 Testing and Vaccination Clinic Staff

The Vice Chair Feliz-Barrows recognized the COVID-19 Testing and Vaccination Clinic Staff. In July, 2023, the Southern Nevada Health District COVID-19 Testing Clinic, located at the north-side of the Decatur office along with the COVID-19 Vaccination Clinic, located just inside the main doors, closed. We had many staff that worked in these clinics, some of which have done so since the start of the COVID-19 pandemic. On behalf of the Southern Nevada Community Health Center and the Health Center Governing Board, we would like to extend our deepest gratitude for your dedication, and long

hours, to ensure that testing and vaccinations were accessible to Southern Nevadans, and countless visitors. Thank you for your service to our community.

### III. PLEDGE OF ALLEGIANCE

- IV. **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 Vice Chair closed the First Public Comment portion.

### V. ADOPTION OF THE SEPTEMBER 19, 2023 MEETING AGENDA *(for possible action)*

*A motion was made by Member Black, seconded by Member Castro and carried unanimously to approve the September 19, 2023 Meeting Agenda, as presented.*

- VI. **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:** August 15, 2023 *(for possible action)*

*A motion was made by Member Breen, seconded by Member Black, and carried unanimously to approve the Consent Agenda, as presented.*

### VII. REPORT / DISCUSSION / ACTION

1. **Receive, Discuss and Accept the July 2023 Year To Date Financial Report;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Donnie (DJ) Whitaker, Chief Financial Officer, advised that the Finance and Audit Committee did not meet to review the July financials. Ms. Whitaker presented the July 2023 Year to Date Financial report with the following highlights.

#### General and Special Revenue Funds

- Charges for Services – Currently the Pharmacy is generating more revenue than one twelfth of the budget, variance was a positive nine (9) percent.
- Total FQHC Revenue – Budget as of July was \$2.39M, actual was \$2.22M and variance was negative seven (7) percent.
- Salaries and Benefits – Budget as of July was \$1.14M, actual was \$876K and variance was positive twenty-four (24) percent. Some of this is due to unfilled positions that were budgeted for twelve months.
- Supplies – Budget as of July was \$1.09M, actual was \$1.55M and variance was a negative forty-two (42) percent.
- Net Position – Budget as of July was negative \$617K, actual was negative \$739K and variance of twenty (20) percent, a larger loss than what was budgeted. The indirect cost and cost allocations are generated by revenues and based on expenditure. This will level out as we move through the year as some of the federal expenditures come on and the allocations and the recovery of the indirect.

#### Patients by Department

- Total number of patient encounters through July 31, 2023: 3,364
  - Pharmacy – 36%
  - Sexual Health – 20%
  - Primary & Preventative Care – 16%
  - Ryan White – 12%

- Family Planning – 11%
- Behavioral Health – 3%
- Refugee Health – 2%

Ms. Whitaker further advised of the following:

- Revenue by Department
- Expenses by Department

At the request of Member Father Rafael, Ms. Whitaker provided an update to the 2023 fiscal year end budget. Adjustments were made in account receivables, supplies and indirect cost and cost allocations.

*A motion was made by Member Castro, seconded by Member Coca, and carried unanimously to accept the July 2023 Year to Date Financial Report, as presented.*

**2. Review, Discuss and Accept the transfer of associated budgeted funds with the Public Health Programs (Express STI Testing, Linkage to Care, Congenital Syphilis Case Management Program and Expedited Partner Treatment) from the Southern Nevada Community Health Center to the Primary and Preventive Care Division;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Ms. Whitaker provided some background information regarding the transfer of funds with the forementioned public health programs. Ms. Whitaker advised that a transfer of budget authority is necessary to move funds from the FQHC to the Primary and Preventive Care for SHOPP and public health grant activity resulting in a reduction to the previously approved fiscal year 2024 General Fund and Grant budgets for FQHC.

Ms. Whitaker recommended approval of the FY2024 FQHC Sexual Health budget transfer to the PPC Division, as presented.

- \$404,521 Grant Revenue Transfer from FQHC to PPC SHOPP
- \$404,521 Grant Expense Transfer from FQHC to PPC SHOPP
- \$332,254 General Fund Operating Expense Transfer from FQHC to PPC SHOPP
- Total Expense budget impact \$736,775 for General Fund & Grant Funds
- FTE impact of 2.10 General Fund positions and 4.9 Grant positions (7 FTE total)

*A motion was made by Member Coca, seconded by Member Scott, and carried unanimously to accept the transfer of associated budgeted funds with the Public Health Programs (Express STI Testing, Linkage to Care, Congenital Syphilis Case Management Program and Expedited Partner Treatment) from the Southern Nevada Community Health Center to the Primary and Preventive Care Division, as presented.*

SNCHC Governing Board

*Heard out of order.*

**7. Review and Discuss Health Center UDS Comparison and Patient Origin Reports;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Randy Smith, FQHC Operations Officer, presented the Patient Origin Report with the following updates:

- SNCHC's Service Area should reflect the geographic area from where the top 75% of health center patients reside.
- The current HRSA approved Service Area based on the CY22 Patient Origin Report includes 30 zip codes.
- Analysis of the CY23 UDS shows 75% of SNCHC's patients come from 22 zip codes.
- Zip codes to remove include:
  - 89074, 89081, 89113, 89118, 89123, 89129, 89139, 89148, 89183

- Zip code to add: 89117
- Proposed new Service Area includes the following zip codes:
  - 89030, 89031, 89032, 89101, 89102, 89103, 89104, 89106, 89107, 89108, 89110, 89115, 89117, 89119, 89121, 89122, 89128, 89142, 89146, 89147, 89156, 89169

Mr. Smith advised that he is seeking board approval to complete a Change in Scope request with HRSA to update SNCHC's Service Area based on the CY23 Patient Origin Report analysis.

Further to an inquiry from Member Coca regarding the location of the zip codes to be removed, Mr. Smith advised that the zip codes are all in Clark County. Patients from those zip codes as well as other zip codes will continue to receive services.

*A motion was made by Member Coca, seconded by Member Scott, and carried unanimously to approve to complete a Change in Scope request with HRSA to update SNCHC's Service Area based on the CY23 Patient Origin Report analysis, as presented.*

**3. Review and Discuss the Process of the Annual Executive Director Evaluation;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Randy Smith, FQHC Operations Officer advised the board of the process for the Executive Director's annual evaluation. Mr. Smith provided an overview of the following areas:

- **Four (4) Scored Questions - Scoring Guide**
  - 1 - Poor
  - 2 - Fair
  - 3 - Good
  - 4 – Outstanding
- **Two (2) Non-Scored Narrative Questions**
  - General Strengths
  - Areas for Growth
- **Weight of Each Question**
  - Question 1 – Weighted 20% of overall score
  - Question 2 – Weighted 50% of overall score
  - Question 3 – Weighted 10% of overall score
  - Question 4 – Weighted 20% of overall score

Further to an inquiry from Member Breen regarding input from staff, Mr. Smith advised that he will provide a tool to capture staff feedback and will provide that information to the board to help with Dr. Leguen's evaluation. Member Black commented that input from the District Board of Health may also be considered.

*Member Scott left the meeting at 3:08 p.m.*

**4. Review and Discuss the Executive Director FY23 Accomplishments and FY24 High Level Goals;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

This item was removed from the agenda and will be presented at a future meeting.

**5. Review and Discuss Interest in Officer and Committee Membership;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Mr. Smith presented an overview of the Office and Committee Membership list and noted a vacancy for the Second Vice Chair role. Member Coca expressed interest in the position. Mr. Smith advised that Member Coca will be presented to the Nominations Committee for consideration.

**6. Review and Discuss Calendar Year 2023 and 2024 Meeting Schedule;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Mr. Smith reviewed the results for a survey regarding the November 2023 meeting date and calendar year 2024 meeting schedule. Mr. Smith advised that based on the results of the survey, the board will continue to meet according to the current structure. If any of the potential new board member candidates are approved, this will give them an opportunity to vote on any changes needed.

**7. Review and Discuss Health Center UDS Comparison and Patient Origin Reports;** direct staff accordingly or take other action as deemed necessary (*for possible action*)

Mr. Smith presented the Nevada UDS Comparison Report and advised where the health center ranked in each quality measure.

**VIII. BOARD REPORTS:** 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.

**IX. EXECUTIVE DIRECTOR & STAFF REPORTS (*Information Only*)**

- Executive Director Comments

There were none.

- CEO Transition and Succession Planning

This item was removed from the agenda.

- Highlights from the August 2023 Operations Report

Mr. Smith presented highlights from the August 2023 Operations report.

**X. INFORMATIONAL ITEMS**

- Community Health Center (FQHC) August Operations Reports

**XI. 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 Vice Chair closed the Second Public Comment.

**XIII. ADJOURNMENT**

The Vice Chair adjourned the meeting at 3:49 p.m.

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

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## AGENDA

**SOUTHERN NEVADA COMMUNITY HEALTH CENTER  
GOVERNING BOARD MEETING  
September 19, 2023 – 2:30 p.m.  
Meeting will be 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**

## NOTICE

**WebEx Event address for attendees:**

<https://snhd.webex.com/snhd/j.php?MTID=m9bd9cadcdfb300f0fb53f2d1be9b1636>

To call into the meeting, dial (415) 655-0001 and enter Access Code: [2551 661 6655](https://snhd.webex.com/snhd/j.php?MTID=m9bd9cadcdfb300f0fb53f2d1be9b1636)

For other governmental agencies using video conferencing capability, the Video Address is:  
[25516616655@snhd.webex.com](mailto:25516616655@snhd.webex.com)

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### NOTE:

- Agenda items may be taken out of order at the discretion of the Chair.
- The Board may combine two or more agenda items for consideration.
- The Board may remove an item from the agenda or delay discussion relating to an item on the agenda at any time.

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### I. CALL TO ORDER & ROLL CALL

### II. RECOGNITION

- COVID-19 Testing and Vaccination Clinic Staff

### III. PLEDGE OF ALLEGIANCE

### IV. 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. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chairman or the Board by majority vote. **There will be two public comment periods. To submit public comment on either public comment period on individual agenda items or for general public comments:**

- **By Webex:** Use the link above. You will be able to provide real-time chat-room messaging, which can be read into the record by a Community Health Center employee or by raising your hand during the public comment period, a Community Health Center employee will unmute your connection. Additional Instructions will be provided at the time of public comment.
- **By email:** [public-comment@snchc.org](mailto:public-comment@snchc.org) For comments submitted prior to and during the live meeting. Include your name, zip code, the agenda item number on which you are commenting, and your comment. Please indicate whether you wish your email comment to be read into the record during the meeting or added to the backup materials for the record. If not specified, comments will be added to the backup materials.

- **By telephone:** Call (415) 655-0001 and enter access code 2551 661 6655. To provide public comment over the telephone, please press \*3 during the comment period and wait to be called on.

**V. ADOPTION OF THE SEPTEMBER 19, 2023 AGENDA** *(for possible action)*

**VI. 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:** August 15, 2023 *(for possible action)*

**VII. REPORT / DISCUSSION / ACTION**

Recommendations from the September 18, 2023 Finance & Audit Committee

1. **Receive, Discuss and Accept the July 2023 Year-To-Date Financial Report;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
2. **Review, Discuss and Accept the transfer of associated budgeted funds with the Public Health Programs (Express STI Testing, Linkage to Care, Congenital Syphilis Case Management Program and Expedited Partner Treatment) from the Southern Nevada Community Health Center to the Primary and Preventive Care Division;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

SNCHC Governing Board

3. **Review and Discuss the Process of the Annual Executive Director Evaluation;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
4. **Review and Discuss the Executive Director FY23 Accomplishments and FY24 High Level Goals;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
5. **Review and Discuss Interest in Officer and Committee Membership;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
6. **Review and Discuss Calendar Year 2023 and 2024 Meeting Schedule;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
7. **Review and Discuss Health Center UDS Comparison and Patient Origin Reports;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

**VIII. BOARD REPORTS:** The Southern Nevada Community Health Center Governing Board members may identify and comment on Health Center related issues or ask a question for clarification. Comments made by individual Board members during this portion of the agenda will not be acted upon by the Southern Nevada Community Health Center Governing Board unless that subject is on the agenda and scheduled for action. ***(Information Only)***

**IX. EXECUTIVE DIRECTOR & STAFF REPORTS** *(Informational Only)*

- Executive Director Comments
- CEO Transition and Succession Planning
- Highlights from the August 2023 Operations Report

**X. INFORMATIONAL ITEMS**

- Community Health Center (FQHC) August Operations Reports

**XI. 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 Chairman or the Board by majority vote. **See above for instructions for submitting public comment.**

**XII. ADJOURNMENT**

NOTE: Disabled members of the public who require special accommodations or assistance at the meeting are requested to notify Tawana Bellamy or Andria Cordovez Mulet in Administration at the Southern Nevada Health District by calling (702) 759-1201.

THIS AGENDA HAS BEEN PUBLICLY NOTICED on the Southern Nevada Health District's Website at <https://snhd.info/meetings>, the Nevada Public Notice website at <https://notice.nv.gov>, and a copy will be provided to any person who has requested one via U.S mail or electronic mail. All meeting notices include the time of the meeting, access instructions, and the meeting agenda. For copies of agenda backup material, please contact Tawana Bellamy or Andria Cordovez Mulet at 280 S. Decatur Blvd, Las Vegas, NV, 89107 or dial (702) 759-1201.





AT THE SOUTHERN NEVADA HEALTH DISTRICT

## MINUTES

### SOUTHERN NEVADA COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING

August 15, 2023 – 2:30 p.m.

Meeting was conducted via WebEx Event

**MEMBERS PRESENT:** Jose L. Melendrez, Chair – Consumer Member  
Donna Feliz-Barrows, Vice-Chair – Consumer Member  
Erin Breen – Community Member, UNLV Vulnerable Road Users Project  
Jasmine Coca – Community Member, Catholic Charities of Southern Nevada  
Brian Knudsen – Consumer Member  
Father Rafael Pereira – Community Member, All Saints Episcopal Church  
Luz Castro – Consumer Member  
Scott Black – Community Member, City of North Las Vegas

**ABSENT:** Lucille Scott – Consumer Member

**ALSO PRESENT:**

**LEGAL COUNSEL:** Heather Anderson-Fintak, General Counsel

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

**STAFF:** Tawana Bellamy, Jacques Graham, Edward Wynder, Cassius Lockett, Cortland Lohff, Randy Smith, Donnie (DJ) Whitaker, Jonna Arqueros, David Kahananui, Kimberly Monahan, Luann Province, Merylyn Yegon, Ryan Kelsch, Talibah Abdul-Wahid, Cassondra Major, Yin Jie Quinn

#### I. CALL TO ORDER and ROLL CALL

The Chair called the Southern Nevada Community Health Center (SNCHC) Governing Board Meeting to order at 2:31 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

*Member Feliz-Barrows joined the meeting at 2:33 p.m.*

**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 AUGUST 15 2023 MEETING AGENDA *(for possible action)*

*A motion was made by Member Feliz-Barrows, seconded by Member Knudsen and carried unanimously to approve the August 15, 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:** July 25, 2023 *(for possible action)*
- 2. Approve Credentialing and Privileging of Provider Zhulieta Todd, MPAS, PA-C;*(for possible action)***

*A motion was made by Member Black, seconded by Member Breen, and carried unanimously to approve the Consent Agenda, as presented.*

**VI. REPORT / DISCUSSION / ACTION**

Recommendations from the August 14, 2023 Finance & Audit Committee

- 1. Receive, Discuss and Accept the June 2023 Year-To-Date Financial Report;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

*Member Father Rafael joined the meeting at 2:36 p.m.*

Ms. Whitaker presented an overview of the June 2023 Year-to-Date Financial Report as of June 30, 2023. Ms. Whitaker advised an unaudited stamp was on most pages because it was a snapshot of the financials after the majority of the transactions were entered for year-end. Ms. Whitaker further advised that cost allocations and a lot of year-end activities still need to be recorded and reconciled.

Ms. Whitaker provided the following highlights.

- Net Actual Position as of June 30, 2023 was negative \$3.49M – This is a better position than the Net Budgeted Position of negative \$3.99M
- Charges for Services was budgeted at \$17.3M, the actual was \$18.5M, a positive variance of \$1.19M due to Pharmacy activity with higher percentage of commercially insured patients combined with an increase in the number of prescription medications per encounter.
- Total Salaries & Benefits were budgeted at \$7.86M, actual was \$8.26M, variance was \$405K.
- Total Other Operating - \$163K was budgeted for Capital Outlay, actual was \$63K, variance was \$100K due to equipment that initially was budgeted that has not been purchased on some of the grants.
- Contractual was budgeted at \$1.77M, actual was \$1.58M, variance was \$240K due to timing issues of where expenditures were budgeted.
- Patient Encounters – Of the 27,922 patients encounters through June 30, 2023:
  - Pharmacy - 39%
  - Primary & Preventative Care – 25%
  - Ryan White – 15%
  - Family Planning – 14%
  - Behavioral Health – 5%
  - Refugee Health – 2%

Ms. Whitaker further reviewed the following:

- Revenue by Department
- Expenses by Department

- Budget Augmentation Comparison

	<b>Budget Through June 2023 Pre-Augmentation</b>	<b>Budget Through June 2023 Post-2<sup>nd</sup> Augmentation</b>
<b>Net Position</b>	Negative \$4.89M	Negative \$3.49M

Ms. Whitaker advised again that June financial report is the unaudited financial performance to date.

Member Father Rafael commented that the information presented in the notes on the slides answered his questions and acknowledged that the numbers are unaudited.

Further to an inquiry from Member Father Rafael, Ms. Whitaker advised that this report is through June 30, 2023, noting that there are transactions that still need to be completed.

Member Father Rafael requested the final numbers for the fiscal year be presented at the next regular meeting. Ms. Whitaker advised that she could bring an update to the numbers and some of the numbers like the post-employment benefits will not be available until the end of the month. Ms. Whitaker further advised that she could provide the cost allocation and the only thing that would be missing would be any adjustments the auditor would request.

Further to an inquiry from Member Father Rafael, Ms. Whitaker advised that the new fiscal year financial report will be presented at the next meeting. It will include the Sexual Health Clinic and Behavioral Health.

Member Father Rafael commented that overall, the financials look great.

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

- VII. BOARD REPORTS:** 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)***

Chair Melendrez commented that as he travels across the United States, he recognized COVID-19 is still prevalent.

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

- Executive Director Comments

There were none.

- Overview of Federal Tort Claims Act (FTCA) Deeming Application

Randy Smith, FQHC Operations Officer provided an overview of the Federal Tort Claims Act (FTCA) program and deeming application.

- Highlights from the July 2023 Operations Report

Mr. Smith presented highlights from the June 2023 Operations report.

In addition to Mr. Smith's highlights from the operations report, Dr. Leguen advised that we are trying to address the need to break the silos between different programs to deliver the services that are needed for the organization to be successful.

*Member Knudsen left the meeting at 2:57 p.m.*

Member Coca inquired about adding additional hours to the clinic and possibly changing certain days and hours on which services are provided and if that would make an impact on services the health center is trying to build. Mr. Smith advised that there has not been specific conversation with staff regarding adding additional hours. Mr. Smith further advised that there has been some discussion with leadership on our workflows and our staffing at the Fremont site. Mr. Smith advised that there are some limitations on how late staff can work in the evening and on Saturdays. Mr. Smith commented that as opportunities for expansion or additional expanded hours come up, we can review them to see how we can leverage them to add value to our patients.

Dr. Leguen advised that Southern Nevada Health District (SNHD) is a hybrid organization, and the health center is a part of that. For the most part it is a great thing, and in some areas not that great. Dr. Leguen provided an example of that noting SNHD's core hours of operation and that some staff cannot be asked to start before or after those core hours. Dr. Leguen further advised that adding additional days at the Fremont location would be contingent on growth and demand for services which also would mean we need to hire additional staff.

Ms. Anderson-Fintak advised that the limitation of staff time is according to the union contract. All of the healthcare workers are part of the bargaining union, which means that we would have to bargain with the union for additional hours.

**IX. INFORMATIONAL ITEMS**

- Community Health Center (FQHC) July Operations Reports
- Risk Management Report

**X. 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.

**XIII. ADJOURNMENT**

The Chair adjourned the meeting at 3:34 p.m.

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

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# SNCHC Governing Board Meeting

September 19, 2023



**SOUTHERN NEVADA**  
*Community*  
**HEALTH CENTER**

**AT THE SOUTHERN NEVADA HEALTH DISTRICT**

# FQHC Financial Report

Results as of July 31, 2023

# All Funds/Divisions

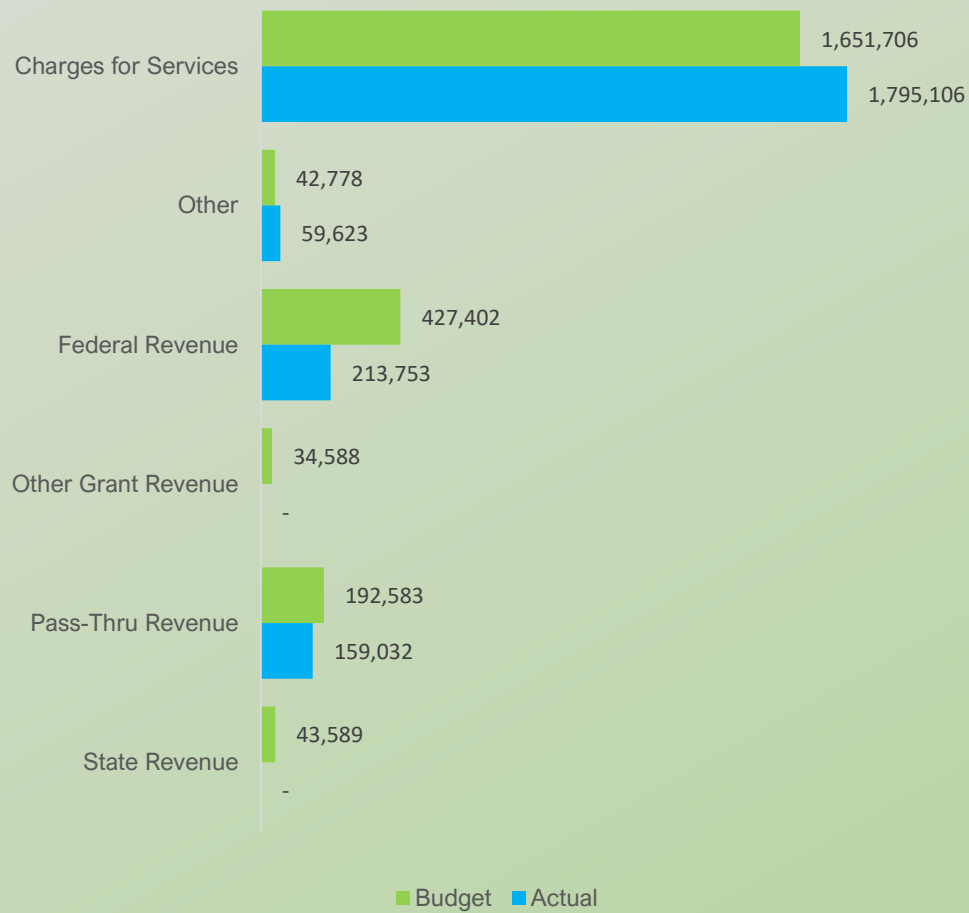
Activity	Budget as of July	Actual as of July	Variance	%
Charges for Services	1,651,706	1,795,106	143,400	9%
Other	42,778	59,623	16,844	39%
Federal Revenue	427,402	213,753	(213,649)	-50%
Other Grant Revenue	34,588	-	(34,588)	-100%
Pass-Thru Revenue	192,583	159,032	(33,550)	-17%
State Revenue	43,589	-	(43,589)	-100%
<b>Total FQHC Revenue</b>	<b>2,392,646</b>	<b>2,227,514</b>	<b>(165,132)</b>	<b>-7%</b>
Salaries	790,680	604,101	(186,579)	-24%
Taxes & Fringe Benefits	350,375	270,930	(79,446)	-23%
Travel & Training	7,881	1,159	(6,721)	-85%
<b>Total Salaries &amp; Benefits</b>	<b>1,148,936</b>	<b>876,191</b>	<b>(272,745)</b>	<b>-24%</b>
Supplies	1,094,132	1,556,262	462,130	42%
Capital Outlay	833	-	(833)	-100%
Contractual	192,972	57,766	(135,205)	-70%
<b>Total Other Operating</b>	<b>1,287,937</b>	<b>1,614,028</b>	<b>326,091</b>	<b>25%</b>
Indirect Costs/Cost Allocations	573,701	476,498	(97,203)	-17%
Transfers IN	(118,313)	(33,965)	84,348	-71%
Transfers OUT	118,313	33,965	(84,348)	-71%
<b>Total Transfers</b>	<b>573,701</b>	<b>476,498</b>	<b>(97,203)</b>	<b>-17%</b>
<b>Net Position</b>	<b>(617,928)</b>	<b>(739,203)</b>	<b>(121,275)</b>	<b>20%</b>

NOTES:

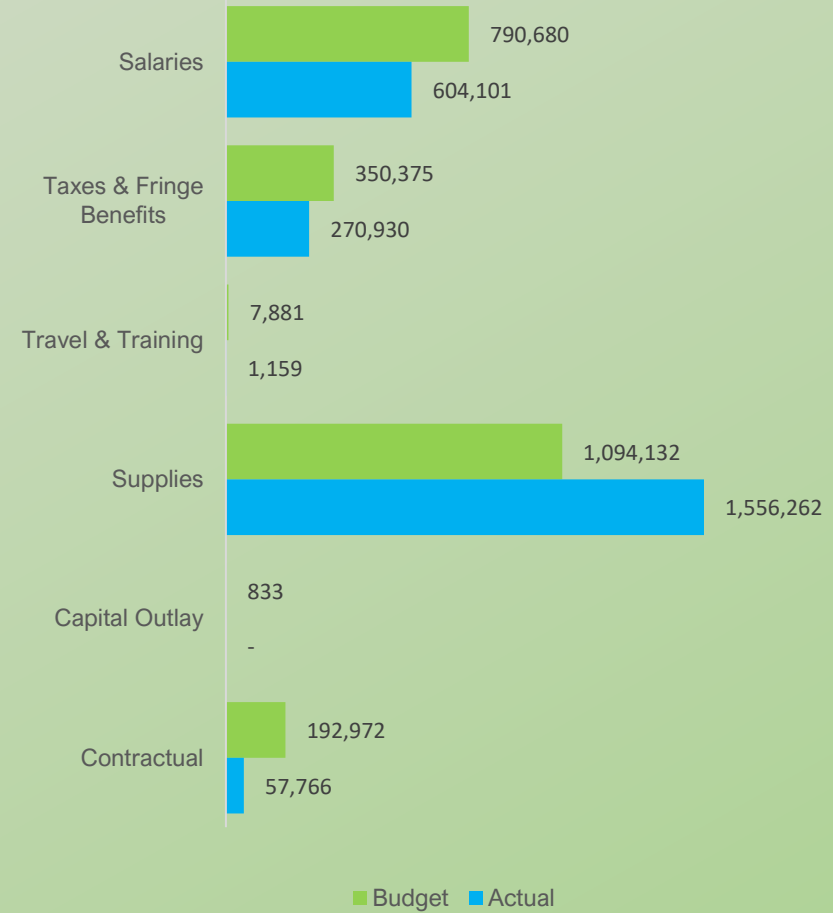
- 1) WRAP REVENUE POSTED TO ADMINISTRATION "OTHER REVENUE" CATEGORY SINCE IT IS NOT BROKEN DOWN BY PROGRAM/CLAIM.
- 2) GRANT REVENUES ARE TRAILING BUDGET DUE TO DELAYS IN RECOGNITION OF ASSOCIATED EXPENSES AND PENDING THE TRANSFER OF ACTIVITY FOR SEXUAL HEALTH CLINIC FROM FQHC TO PPC-SHOPP.
- 3) EMPLOYMENT BUDGET INCLUDES ANTICIPATED FY24 HIRING OF MULTIPLE POSITIONS (MEDICAL DIRECTOR, DENTIST, PHARMACIST, PHARMACY TECHNICIAN) WHICH WERE NOT FILLED AS OF JULY 2023.
- 4) PHARMACY MEDICATIONS CONTINUE TO DRIVE INCREASED SUPPLIES EXPENSE DUE TO INCREASED PATIENT ENCOUNTERS AND MEDICATION INFLATION.

# Revenues & Expenses

## FQHC Total Revenue by Type

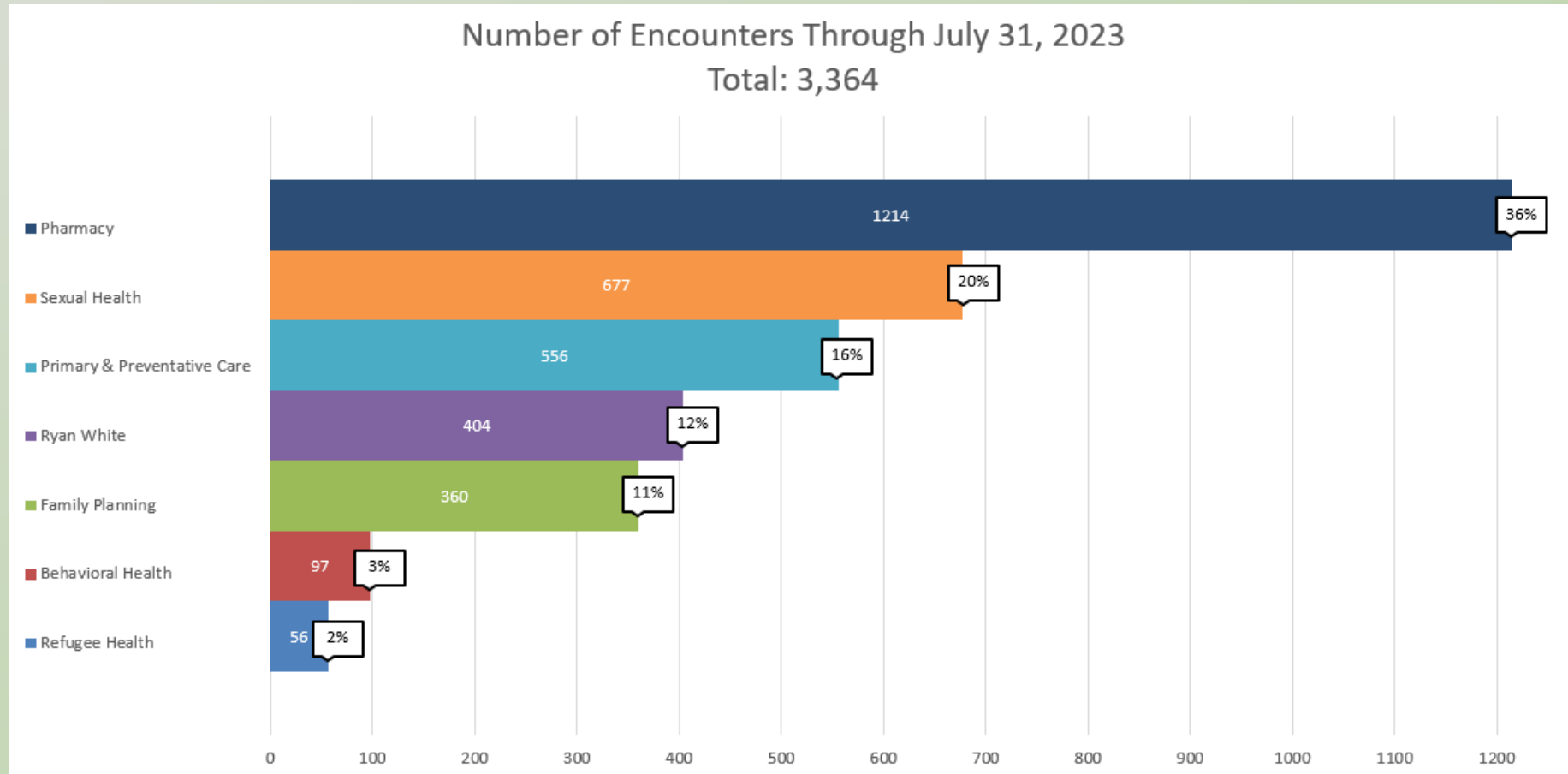


## FQHC Total Expense by Type





# Patients by Department



# Revenue by Department

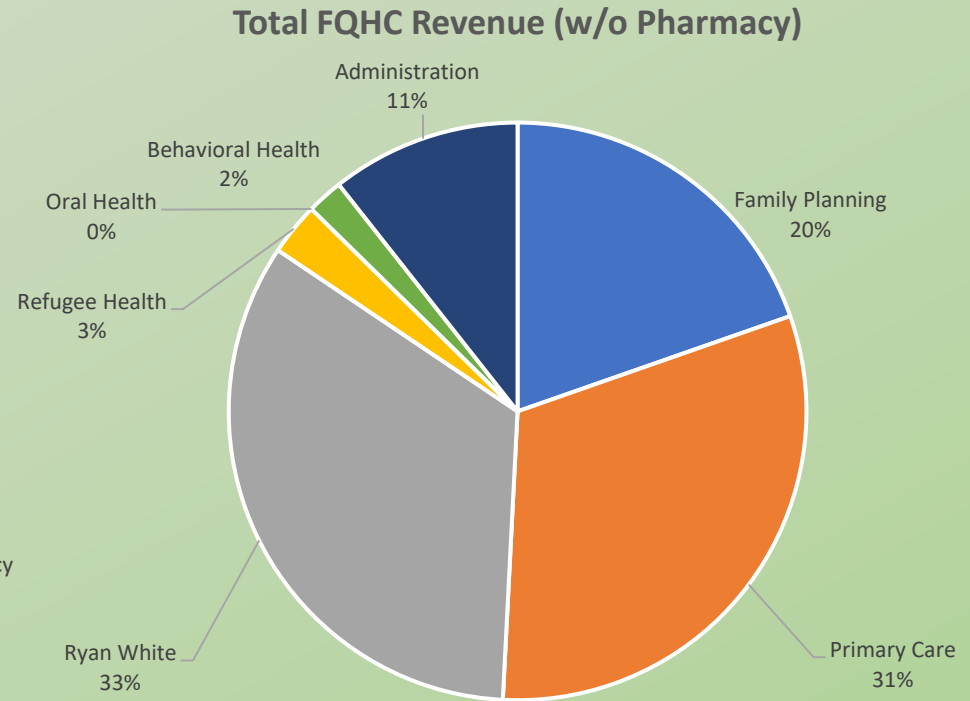
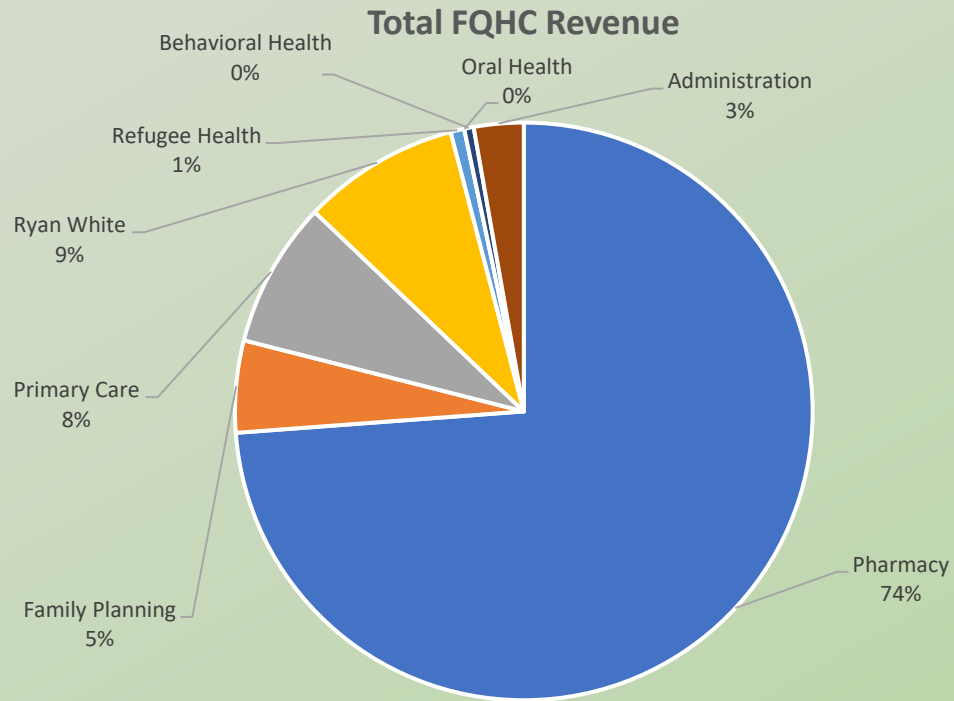
Department	Budget as of July	Actual as of July	Variance	%
<b>Charges for Services (+ Wrap)</b>				
Family Planning	37,528	49,328	11,801	31%
Pharmacy	1,240,666	1,582,835	342,169	28%
Oral Health (Dental)	12,438	-	(12,438)	-100%
Primary Care	164,324	32,775	(131,549)	-80%
Ryan White	34,216	37,412	3,196	9%
Refugee Health	10,623	1,048	(9,575)	-90%
Behavioral Health	43,409	11,363	(32,046)	-74%
Administration	41,776	59,623	17,846	43%
Sexual Health	109,505	80,345	(29,160)	-27%
<b>OPERATING REVENUE</b>	<b>1,694,485</b>	<b>1,854,729</b>	<b>160,244</b>	<b>9%</b>
<b>Grants</b>				
Family Planning	186,652	60,987	(125,665)	-67%
Pharmacy	-	-	-	0%
Oral Health (Dental)	-	-	-	0%
Primary Care	278,987	142,199	(136,788)	-49%
Ryan White	179,148	151,315	(27,833)	-16%
Refugee Health	21,139	15,400	(5,739)	-27%
Behavioral Health	-	-	-	0%
Sexual Health	32,236	2,884	(29,352)	-91%
<b>SPECIAL REVENUE</b>	<b>698,161</b>	<b>372,785</b>	<b>(325,376)</b>	<b>-47%</b>
<b>TOTAL REVENUE</b>	<b>2,392,646</b>	<b>2,227,514</b>	<b>(165,132)</b>	<b>-7%</b>

**NOTES:**

- 1) ADDITIONAL PATIENT ENCOUNTERS ARE DRIVING MORE REVENUE AND REIMBURSABLE EXPENSES VIA THE PHARMACY.
- 2) SERVICES NOT YET OPERATIONAL IN JULY 2023 BUT ANTICIPATED TO BEGIN IN FY 2024.
- 3) WRAP REVENUE POSTED TO ADMINISTRATION "OTHER REVENUE" CATEGORY SINCE IT IS NOT BROKEN DOWN BY PROGRAM/CLAIM.
- 4) GRANT REVENUES ARE TRAILING BUDGET DUE TO PENDING ONBOARDING OF GRANT-FUNDED POSITIONS AND ASSOCIATED REVENUE AND REIMBURSABLE EXPENSES.
- 5) NO BUDGETED GRANT ACTIVITY FOR FY 2024.
- 6) GRANT REVENUES ARE TRAILING BUDGET DUE TO DELAYS IN RECOGNITION OF ASSOCIATED EXPENSES AND PENDING THE TRANSFER OF ACTIVITY FOR SEXUAL HEALTH CLINIC FROM FQHC TO PPC-SHOPP.

# Revenue by Department

*(With and without Pharmacy)*



# Expenses by Department

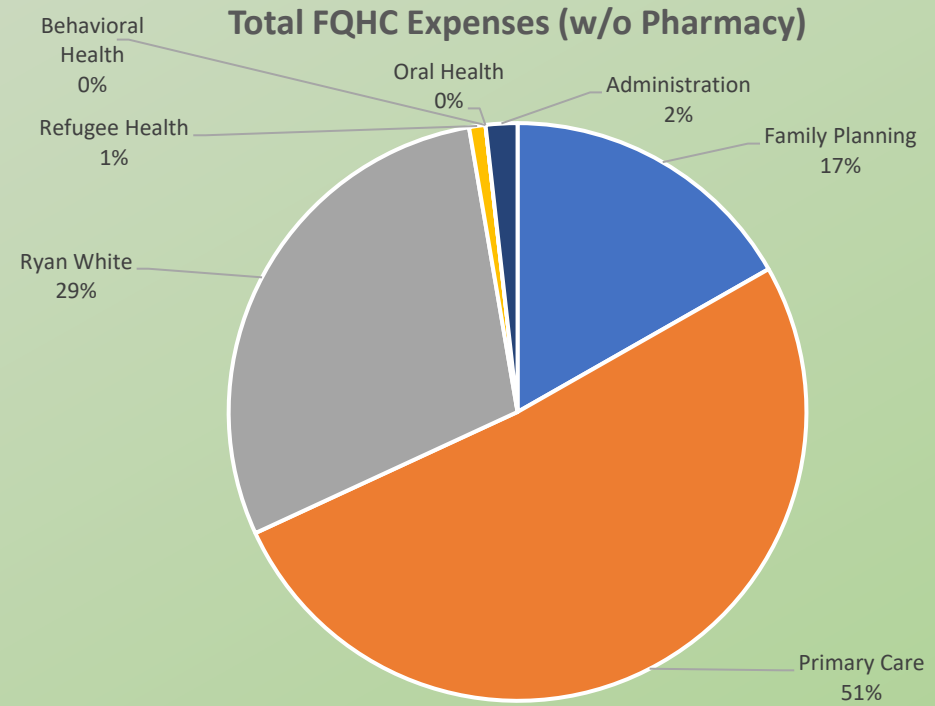
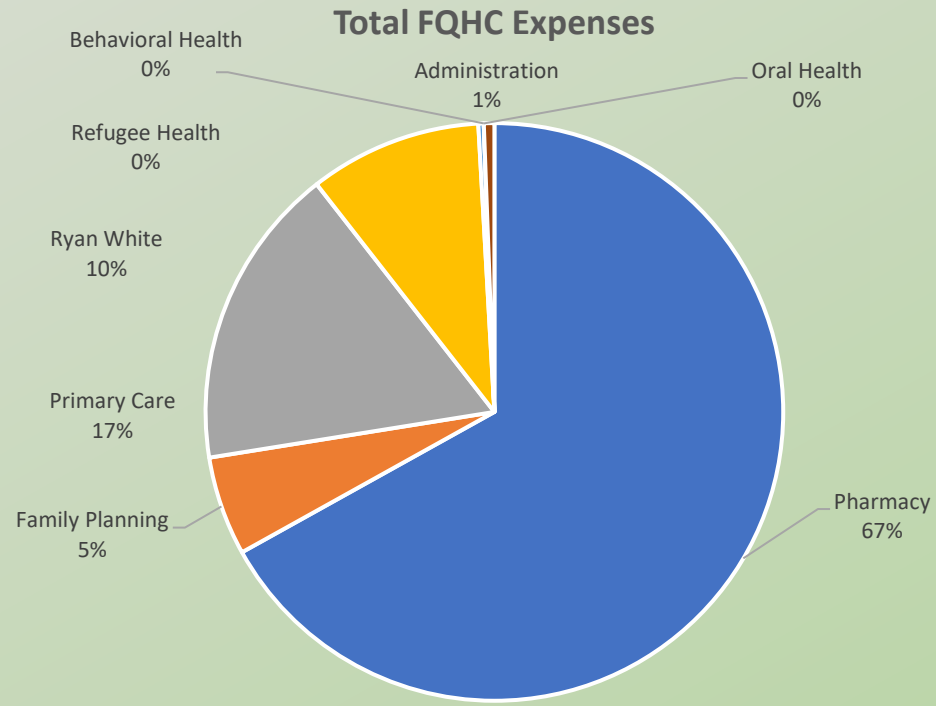
Department	Budget as of July	Actual as of July	Variance	%
<b>Employment (Salaries, Fringe, Training)</b>				
Family Planning	157,276	117,274	(40,002)	-25%
Pharmacy	44,907	21,875	(23,033)	-51%
Oral Health (Dental)	-	-	-	0%
Primary Care	439,951	347,531	(92,419)	-21%
Ryan White	205,753	205,045	(708)	0%
Refugee Health	14,909	6,833	(8,076)	-54%
Behavioral Health	27,931	-	(27,931)	-100%
Administration	18,927	9,161	(9,765)	-52%
Sexual Health	231,401	167,312	(64,089)	-28%
<b>Total Personnel Costs</b>	<b>1,141,055</b>	<b>875,031</b>	<b>(266,024)</b>	<b>-23%</b>
<b>Other (Supplies, Contractual, Capital)</b>				
Family Planning	51,084	11,044	(40,041)	-78%
Pharmacy	991,146	1,526,637	535,490	54%
Oral Health (Dental)	4,601	-	(4,601)	-100%
Primary Care	175,735	45,420	(130,314)	-74%
Ryan White	23,860	18,422	(5,438)	-23%
Refugee Health	14,555	203	(14,353)	-99%
Behavioral Health	1,050	-	(1,050)	-100%
Administration	6,753	4,393	(2,360)	-35%
Sexual Health	27,033	9,069	(17,963)	-66%
<b>Total Other Expenses</b>	<b>1,295,817</b>	<b>1,615,188</b>	<b>319,370</b>	<b>25%</b>
<b>Total Operating Expenses</b>	<b>2,436,873</b>	<b>2,490,219</b>	<b>53,346</b>	<b>2%</b>
Indirect Costs/Cost Allocations	573,701	476,498	(97,203)	-17%
Transfers IN	(118,313)	(33,965)	84,348	-71%
Transfers OUT	118,313	33,965	(84,348)	-71%
<b>Total Transfers &amp; Allocations</b>	<b>573,701</b>	<b>476,498</b>	<b>(97,203)</b>	<b>-17%</b>
<b>TOTAL EXPENSES</b>	<b>3,010,574</b>	<b>2,966,717</b>	<b>(43,857)</b>	<b>-1%</b>

NOTES:

- 1) EXPENSES ARE TRAILING BUDGETED EXPECTATIONS DUE TO ANTICIPATED GRANT-FUNDED, REIMBURSABLE EXPENSES NOT YET SPENT/OPERATIONALIZED.
- 2) SERVICES NOT YET OPERATIONAL IN JULY 2023.
- 3) PHARMACY MEDICATIONS CONTINUE TO DRIVE INCREASED SUPPLIES EXPENSE DUE TO INCREASED PATIENT ENCOUNTERS AND MEDICATION INFLATION.
- 4) GRANT REVENUES ARE TRAILING BUDGET DUE TO DELAYS IN RECOGNITION OF ASSOCIATED EXPENSES AND PENDING THE TRANSFER OF ACTIVITY FOR SEXUAL HEALTH CLINIC FROM FQHC TO PPC-SHOPP.

# Expenses by Department

*(With and Without Pharmacy)*



# Fiscal Year-End 2023 – Updated Position

<b>FQHC - COMBINED</b>	<b>Budget Through June 2023</b>	<b>Actual Through June 2023</b>	<b>Variance</b>	<b>+/- %</b>
<b>Revenues</b>				
Charges for Services	17,332,713	17,837,113	504,400	3%
Other	807,000	1,019,388	212,388	26%
Grants	6,546,047	7,063,260	517,213	8%
<b>Total Revenue</b>	<b>24,685,760</b>	<b>25,919,761</b>	<b>1,234,001</b>	<b>5%</b>
<b>Expenses</b>				
Salaries	5,518,840	5,900,205	(381,365)	-7%
Taxes & Fringe Benefits	2,342,092	2,365,850	(23,758)	-1%
<b>Total Personnel Costs</b>	<b>7,860,932</b>	<b>8,266,055</b>	<b>(405,123)</b>	<b>-5%</b>
Supplies	13,622,173	14,272,547	(650,374)	-5%
Capital Outlay	163,955	63,626	100,329	61%
Contractual	1,772,759	1,561,233	211,526	12%
Travel & Training	143,739	69,294	74,445	52%
<b>Total Other Operating</b>	<b>15,702,626</b>	<b>15,966,699</b>	<b>(264,073)</b>	<b>-2%</b>
Indirect Costs/Cost Allocations	5,507,606	6,559,228	(1,051,622)	-19%
Transfers IN	(1,423,602)	(1,522,401)	98,799	-7%
Transfers OUT	1,423,602	1,522,401	(98,799)	-7%
<b>Total Transfers &amp; Allocations</b>	<b>5,507,606</b>	<b>6,559,228</b>	<b>(1,051,622)</b>	<b>-19%</b>
<b>Total Expense</b>	<b>29,071,164</b>	<b>30,791,982</b>	<b>(1,720,817)</b>	<b>-6%</b>
<b>Net Position</b>	<b>(4,385,404)</b>	<b>(4,872,220)</b>	<b>(486,816)</b>	<b>11%</b>
<i>Unaudited General Ledger Data - July 1, 2022 to June 30, 2023</i>				

**NOTES:**

- 1) FISCAL YEAR-END BALANCES ARE UNAUDITED AND SUBJECT TO ANY AUDITOR ADJUSTMENTS.
- 2) HIGHLIGHTED POSITIONS WERE UPDATED BASED ON ADDITIONAL REQUIRED ENTRIES DURING FISCAL YEAR-END CLOSE, AUDIT PREPARATION, AND FINANCIAL STATEMENT PREPARATION. INDIRECT/COST ALLOCATION IS THE FINAL ADJUSTMENT BECAUSE IT REQUIRES ALL DIRECT EXPENSES TO BE POSTED BEFORE FINALIZATION OF CUMULATIVE ALLOCATION THROUGH THE END OF THE YEAR.

# Fiscal Year-End 2023 – Updated Position

Department	Budget as of June	Actual as of June	Variance	%
<b>Charges for Services (+ Wrap)</b>				
Family Planning	382,080	176,755	(205,325)	-54%
Pharmacy	16,336,148	17,320,179	984,031	6%
Primary Care	214,780	181,998	(32,782)	-15%
Ryan White	233,705	85,109	(148,596)	-64%
Refugee Health	89,000	22,248	(66,752)	-75%
Behavioral Health	84,000	57,249	(26,751)	-32%
Administration	800,000	1,012,964	212,964	27%
<b>OPERATING REVENUE</b>	<b>18,139,713</b>	<b>18,856,502</b>	<b>716,789</b>	<b>4%</b>
<b>Grants</b>				
Family Planning	1,948,140	2,367,047	418,907	22%
Primary Care	2,583,031	2,603,229	20,198	1%
Ryan White	1,866,081	1,949,159	83,078	4%
Refugee Health	148,795	143,825	(4,970)	-3%
<b>SPECIAL REVENUE</b>	<b>6,546,047</b>	<b>7,063,260</b>	<b>517,213</b>	<b>8%</b>
<b>TOTAL REVENUE</b>	<b>24,685,760</b>	<b>25,919,761</b>	<b>1,234,001</b>	<b>5%</b>

NOTES:

1) FISCAL YEAR-END BALANCES ARE UNAUDITED AND SUBJECT TO ANY AUDITOR ADJUSTMENTS.

# Fiscal Year-End 2023 – Updated Position

Department	Budget as of June	Actual as of June	Variance	%
<b>Employment (Salaries, Taxes, &amp; Fringe)</b>				
Family Planning	1,593,512	1,619,831	26,318	2%
Pharmacy	299,413	291,011	(8,402)	-3%
Primary Care	3,688,539	3,875,778	187,240	5%
Ryan White	2,002,285	2,187,113	184,828	9%
Refugee Health	133,295	124,101	(9,194)	-7%
Behavioral Health	4,250	3,905	(345)	-8%
Administration	139,638	164,316	24,678	18%
<b>Total Personnel Costs</b>	<b>7,860,932</b>	<b>8,266,055</b>	<b>405,123</b>	<b>5%</b>
<b>Other (Supplies, Contractual, Capital, Training)</b>				
Family Planning	901,390	1,008,431	107,041	12%
Pharmacy	12,853,769	13,447,784	594,015	5%
Primary Care	1,389,567	1,166,491	(223,076)	-16%
Ryan White	457,754	252,330	(205,424)	-45%
Refugee Health	63,200	68,479	5,279	8%
Administration	36,946	23,107	(13,839)	-37%
<b>Total Other Expenses</b>	<b>15,702,626</b>	<b>15,966,623</b>	<b>263,997</b>	<b>2%</b>
<b>Total Operating Expenses</b>	<b>23,563,558</b>	<b>24,232,678</b>	<b>669,119</b>	<b>3%</b>
Indirect Costs/Cost Allocations	5,507,606	6,559,228	1,051,622	19%
Transfers IN	(1,423,602)	(1,522,401)	(98,799)	7%
Transfers OUT	1,423,602	1,522,401	98,799	7%
<b>Total Transfers &amp; Allocations</b>	<b>5,507,606</b>	<b>6,559,228</b>	<b>1,051,622</b>	<b>19%</b>
<b>TOTAL EXPENSES</b>	<b>29,071,164</b>	<b>30,791,905</b>	<b>1,720,741</b>	<b>6%</b>

NOTES:

1) FISCAL YEAR-END BALANCES ARE UNAUDITED AND SUBJECT TO ANY AUDITOR ADJUSTMENTS.





AT THE SOUTHERN NEVADA HEALTH DISTRICT

Thank you.



# FY 2024 FQHC Budget Update for Sexual Health Clinic (SHC) Activity

Presented by: Donnie (DJ) Whitaker, CFO



AT THE SOUTHERN NEVADA HEALTH DISTRICT

# Background information

- ✓ The Southern Nevada Community Health Center (SNCHC) governing board approved the Fiscal Year 2024 budget at the March 21, 2023 board meeting.
- ✓ The Sexual Health Clinic (SHC) in its entirety was included in that budget in anticipation of the transition of the program to the Federally Qualified Health Center (FQHC) on July 1, 2023.
- ✓ The SHC was formerly part of the Primary & Preventive Care division (PPC) of the Southern Nevada Health District (SNHD).
- ✓ The approved Fiscal Year 2024 budget for the FQHC included 100% of the activity for SHC including the Sexual Health Outreach and Prevention Program (SHOPP) and public health grant activity.
- ✓ SHOPP includes Express STI Testing, Linkage to Care, Congenital Syphilis Case Management Program and Expedited Partner Treatment. The public health grants included FOCUS and PHI. These activities were approved on June 20, 2023 to be transferred back to PPC SHOPP.
- ✓ A transfer of budget authority is necessary to move the funds from the FQHC to the PPC for the SHOPP and public health grant activity resulting in a reduction to the previously approved Fiscal Year 2024 General Fund and Grant budgets for the FQHC.

# RECOMMENDATION

- Approval of the FY 2024 FQHC Sexual Health budget transfer to PPC Division as presented.
  1. \$404,521 Grant Revenue Transfer from FQHC to PPC SHOPP
  2. \$404,521 Grant Expense Transfer from FQHC to PPC SHOPP
  3. \$332,254 Gen Fund Operating Expense Transfer from FQHC to PPC SHOPP
  4. Total Expense budget impact **\$736,775** for Gen Fund & Grant Funds
  5. FTE impact of 2.10 GF positions and 4.9 Grant positions (7 FTE total)



Questions



**SOUTHERN NEVADA**  
*Community*  
**HEALTH CENTER**

**AT THE SOUTHERN NEVADA HEALTH DISTRICT**

# Executive Director Annual Review Process

Presented by Randy Smith, FQHC Operations Officer

# Executive Director Review Committee

- HRSA required activity.
- The health center Governing Board is responsible for assessing the achievement of project objectives.
- The Governing Board is responsible for evaluating the performance Executive Director of the Southern Nevada Community Health Center.
  - The **Executive Director Review Committee** will evaluate performance and provide feedback and support to the Governing Board and the Executive Director as a part of the Executive Director's Annual Evaluation process.

# Evaluation Process

- ▶ An electronic survey tool will be emailed to you by Tawana the week of 9/24/23.
- ▶ Survey responses will be tracked and organized by Tawana.
- ▶ Survey results will be provided to the Executive Director Evaluation Committee.
- ▶ The Committee will meet to review the evaluation results, FY23 accomplishments and will provide a recommendation to the full board.
- ▶ The evaluation and high light of the accomplishments will be reviewed by the board with a request to approve its acceptance.
- ▶ The evaluation tool is the legacy process.



# Evaluation Tool

- **Four (4) Scored Questions - Scoring Guide**
  - 1 - Poor
  - 2 - Fair
  - 3 - Good
  - 4 - Outstanding
  
- **Two (2) Non-Scored Narrative Questions**
  - General Strengths
  - Areas for Growth
  
- **Weight of Each Question**
  - Question 1 - Weighted 20% of overall score
  - Question 2 - Weighted 50% of overall score
  - Question 3 - Weighted 10% of overall score
  - Question 4 - Weighted 20% of overall score

# Q1: CEO ensures that the agency has a long-range strategy which achieves its mission, and toward which it makes consistent timely progress through:

- Providing Leadership in Program development and org plans with BOD.
- Meets or exceeds program goals in quantity and quality.
- Evaluates how well goals and objectives have been met.
- Demonstrates quality of analysis and judgment in program planning, implementation, and evaluation.
- Shows creativity, and initiative in developing new programs.
- Maintains and utilizes a working knowledge of significant developments and trends in the field (such as healthcare legislation, public health concerns, health disparities, other disease and healthcare issues in communities served).

## Q2: Administration and Human Resource Management:

- Divides and assigns work effectively, delegating appropriate levels of freedom and authority.
- Establishes and makes use of an effective management team.
- Maintains appropriate balance between administration and programs.
- Ensures that job descriptions are developed, and that regular performance evaluations are held and documented.
- Ensures compliance with personnel policies and state and federal regulations on workplaces and employment.
- Ensures that employees are licensed and credentialed as required.
- Recruits and retains a diverse staff.
- Ensures that policies and procedures are in place.
- Encourages staff development and education.
- Maintains a climate which attracts, keeps, and motivates a diverse staff of top-quality people.



## Q3: When representing the organization in the communities the CEO:

- Serves as an effective spokesperson for the agency; represents the programs and point of view of the organization to the agencies, organizations and the general public.
- Establishes sound working relationships and cooperative arrangements with community groups and organizations.
- Welcomes and pursues opportunities to share organizational objectives and perspectives in local, regional, and national forums as strategically appropriate.

## Q4: The CEO exhibits sound knowledge of the financial management of the organization through the following demonstrated activities:

- Assures adequate control and accounting of all funds, including developing and maintaining sound financial practices.
- Works with the staff, Finance Committee, and the board in preparing a budget; sees that the organization operates within budget guidelines.
- Maintains official records and documents, and ensures compliance with federal, state, and local regulations and reporting requirements (such as annual information returns, payroll withholding and reporting, etc.).
- Executes legal documents appropriately.
- Assures that funds are disbursed in accordance with contract requirements and donor designations.

# Two Open Ended Questions

- ▶ General strengths
- ▶ Areas for improvement



**SOUTHERN NEVADA**  
*Community*  
**HEALTH CENTER**

**AT THE SOUTHERN NEVADA HEALTH DISTRICT**

Questions?

# Officer and Committee Membership Interest

<b><u>Chair</u></b>	<b><u>First Vice Chair</u></b>	<b><u>Second Vice Chair</u></b>
Jose Melendrez	Donna Feliz-Barrows	Vacant
<b><u>Executive Committee</u></b> Donna Feliz-Barrows Brian Knudsen Jose Melendrez	<b><u>Executive Director Annual Review Committee</u></b> Luz Castro Donna Feliz-Barrows Jose Melendrez Lucille Scott	<b><u>Finance and Audit Committee</u></b> Jasmine Coca (Chair) Donna Feliz-Barrows Father Rafael Pereira
<b><u>Quality, Credentialing &amp; Risk Management Committee</u></b> Scott Black Erin Breen (Chair) Jose Melendrez	<b><u>Nominations Committee</u></b> Luz Castro Donna Feliz-Barrows Erin Breen	<b><u>Strategic Planning Committee</u></b> Scott Black Luz Castro Father Rafael Pereira Jose Melendrez



# Calendar Year 2023 and 2024 Meeting Schedule



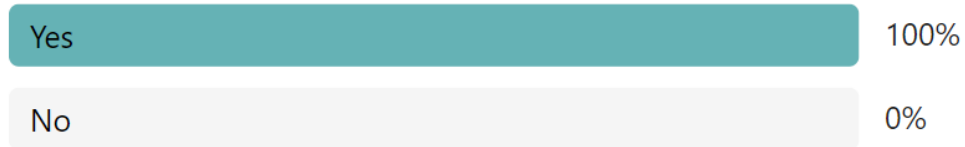
# 2023-2024 Governing Board Meeting Schedule

- Currently meet the third (3<sup>rd</sup>) Tuesday of the month at 2:30 p.m.
- Survey was sent to board members to confirm this schedule will work for calendar year 2024.



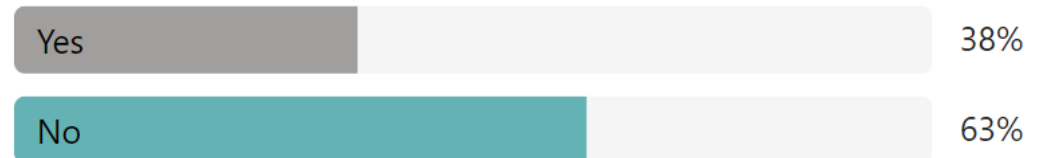
# 2023-2024 Meeting Survey Results

**Are you available to attend the Nov. 21, 2023, meeting? (7 out of 9 responses)**



**Do you have any issues with keeping the 2024 Governing Board meetings on the third Tuesday of the month? (7 out of 9 responses)**

- 3 members - Yes
- 4 members – No
- 2 members – No response



# Health Center UDS Comparison and Patient Origin Reports



# CY23 Patient Origin Report

- SNCHC's Service Area should reflect the geographic area from where the top 75% of health center patients reside
- The current HRSA approved Service Area based on the CY22 Patient Origin Report includes 30 zip codes
- Analysis of the CY23 UDS shows 75% of SNCHC's patients come from 22 zip codes
- Zip codes to remove include:
  - 89074, 89081, 89113, 89118, 89123, 89129, 89139, 89148, 89183
- Zip code to add:
  - 89117
- Proposed new Service Area includes the following zip codes:
  - 89030, 89031, 89032, 89101, 89102, 89103, 89104, 89106, 89107, 89108, 89110, 89115, 89117, 89119, 89121, 89122, 89128, 89142, 89146, 89147, 89156, 89169
- **Seeking Board approval to complete a Change in Scope request with HRSA to update SNCHC's Service Area based on the CY23 Patient Origin Report analysis.**

# Nevada FQHC Comparison Report

CY23 - FQHC Nevada Comparison Report -									
	Community Health Alliance*	First Person Care Clinic	First Med Health & Wellness Center	Hope Christma Health Center Corp	Nevada Health Centers#	Northern Nevada HIV Outpatient Program, Education & Services*	Silver State Health Services	Southern Nevada Health District	Southern Nevada Health District
Quality Measures									CY22
<b>Prenatal Health</b>									
Early Entry Into Prenatal Care (first visit in first trimester)	3		3		4	1			1*
Low Birth Weight	4				1				
<b>Preventive Health Screening &amp; Services</b>									
Cervical Cancer Screening	3	4	2	4	4	2	3	3	4
Breast Cancer Screening	2	4	2	3	2	1	4	4	4
Weight Assessment & Counseling for Nutritional & Physical Activity for Children & Adolescents	2	1	1	2	2	2	3	4	4
Body Mass Index (BMI) Screening & Follow-Up Plan	1	2	1	1	1	3	4	4	4
Adults Screened for Tobacco Use & Receive Cessation Intervention	2	4	1	2	2	3	4	4	4
Colorectal Cancer Screening	3	4	2	4	3	3	4	4	4
Childhood Immunization Status	3				3	2			
Screening for Depression & Follow-Up Plan	1	1	1	1	2	2	4	4	4
Depression Remission at Twelve Months	4		1	2	4			3	4
Dental Sealants for Children between 6-9 Years	2				1				
HIV Screening	2	4	1	4	3	1	2	2	4
<b>Chronic Disease Management</b>									
Statin Therapy for the Prevention & Treatment of Cardiovascular Disease	1	4	1	3	4	2	4	4	4
Ischemic Vascular Disease (IVD): Use of Aspiring or Another Antiplatelet	3	1	1	4	4	1		4	4
Controlling High Blood Pressure	1	4	2	3	4	1	4	4	4
Diabetes Hemoglobin A1c Poor Control	1	1	4	2	3	3	4	4	4
HIV Linkage to Care								2	
<b>Total First Quartile</b>									
	5	4	8	2	3	5	0	0	1*
<b>Total Patients Served</b>									
	25,266	9,804	5,162	5,326	44,609	12,452	5,894	6,343	7,050
<b>Cost per Patient</b>									
	\$ 957.99	\$ 607.75	\$ 2,330.17	\$ 1,492.01	\$ 1,180.34	\$ 3,530.93	\$ 1,024.98	\$ 3,262.77	\$ 2,464.01
*Northern Nevada									
#Northern & Southern Nevada									

# Board Reports



# Executive Director Comments

Fermin Leguen, MD, MPH





# Highlights from the August Operations Report

Presenter: Randy Smith, FQHC Operations Officer



AT THE SOUTHERN NEVADA HEALTH DISTRICT

# Board Recruitment

- One community member candidate ready to be reviewed through the Nominations Committee
- One patient member candidate scheduled for orientation
- One current board member 2<sup>nd</sup> term
- Nominations Committee meeting early October

# Service Milestones

At the All-Staff meeting held on September 12th, the health center celebrated employees who reached a Service Milestone between January and September of this year. Employees were acknowledged during the meeting and given badge lanyards, pins denoting years of service, and a signed certificate.

Twenty-four employees received recognition.

1 year = 16 employees

5 years = 6 employees

10 years = 1 employee

15 years = 1 employee

# Administrative

- Service Area Competition (SAC) grant submitted on 8/22/23
  - Renewed designation as a FQHC (2/24-1/27)
- FTCA Application Resubmitted on 8/31/23
  - NEW required annual training, ECRI: Women's Health Training
- Response from HRSA on 9/13/23 regarding Claims Process requires a new application submission
  - Correction has been made
- Ryan White Part B site visit scheduled for 10/25/23
- NEW HRSA COVID-19 funding received.
- Recruitment for a medical director, LCSW, and mid-level provider underway.

# Refugee Health Clinic

- New team began services at Fremont on 9/5/23
- Goals for the Program:
  - Increase Access to Refugee Health services
  - More fully integrate Refugee Health services with other health center services lines (e.g., primary care & behavioral health)
  - Create opportunity to establish a Medical Home

# August 2023 Patients Served

- 1,649 unduplicated patients served.
  - 678 new patients.
- 7,431 unduplicated patients served year-to-date.
  - CY23 patient goal = 10,500

# August 2023 Access Report

- 16% increase from July

Provider	Total Visi	Work Day	Visit/W	Dept
Team A	165	17	9.7	FP
Team B*	71	9	7.9	PC
Team C*	128	20	6.4	PC
Team D	133	13	10.2	FP
Team E	81	17	4.8	BH
Team F*	60	11	5.5	PC
Team G	222	19	11.7	SHC
Team H	112	11	10.2	PC
Team I*	127	18	7.1	PC
Team J	239	19	12.6	SHC
Team K	74	17	4.4	BH
Team L	192	17	11.3	PC
Team M	112	13	8.6	SHC
Team N	138	16	8.6	PC
Team O	187	17	11.0	SHC
<b>Total</b>	<b>2041</b>	<b>234</b>	<b>8.7</b>	

\*Indicates an intentional modification to appointment capacity/contractor

# Operations – Process Improvement

- Data Collection and Process Improvement
- Relationship between: No-Shows, Third Next Available Appointment, and Cycle Time
- Cycle Times: Where are patients spending time during their visit?
  - Lobby, Check-in, MA rooming and vitals, waiting in the exam room, with providers, check-out, etc.
  - Identifying choke points and prioritizing improvement activities
  - What is value added from the **patient perspective**?
    - Time with the provider, tests, case management, insurance enrollment assistance, etc.
    - Everything else might be necessary, but not value added from the patient perspective.
- Double-booking appointments
- Walk-ins and same day appointments
- Call Center operations



Thank You.



## MEMORANDUM

**Date:** September 19, 2023

**To:** Southern Nevada Community Health Center Governing Board

**From:** Randy Smith, FQHC Operations Officer *RS*  
Fermin Leguen, MD, MPH, District Health Officer *FL*

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**Subject:** Community Health Center FQHC Operations Officer Report – August 2023

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Division Information/Highlights: The Southern Nevada Community Health Center, a division of the Southern Nevada Health District, mission is to serve residents of Clark County from underserved communities with appropriate and comprehensive outpatient health and wellness services, emphasizing prevention and education in a culturally respectful environment regardless of the patient's ability to pay.

### August Highlights

#### Access

- 1,649 unduplicated patients served.
  - 678 new patients.
- 7,431 unduplicated patients served in CY23.
  - CY23 unduplicated patients served goal = 10,500

#### Administrative

- Service Area Competition (SAC) grant application submitted on 8/22/23.
- Federal Tort Claim Act (FTCA) deeming application corrected and resubmitted on 8/31/23.
- New required annual training for clinical staff added in women's health.
- Azara DRVS staff training in clinical and administrative features continues.
- Ryan White Part B on-site program audit scheduled for 10/25/23.
- New Family Medicine doctor started on 8/14/23.
- Recruitments for the Medical Director, Licensed Clinical Social Worker, and a mid-level provider are ongoing.
- Training continues in the Refugee Health Clinic (RHC) in preparation for the transfer of day-to-day operations to health center staff and the relocation of services to Fremont effective 9/5/23.

### HIV / Ryan White Care Program

- A. The Ryan White program received 44 referrals between August 1<sup>st</sup> and August 31<sup>st</sup>. There were three (3) pediatric clients referred to the MCM (Medical Case Management) program in August and the program received two (2) referrals for pregnant women living with HIV during this time.

- B. There were 717 total service encounters in the month of August provided by the Ryan White program (Linkage Coordinator, Eligibility Workers, Nurse Case Managers, Community Health Workers, and Health Educator). There were 299 unduplicated clients served under these programs in August.
- C. The Ryan White ambulatory clinic had a total of 425 visits in the month of August, of which 31 were initial provider visits, 181 were established provider visits, 11 were tele-visits (established clients). There were also 18 nurse visits and 195 lab visits provided. There were 37 Ryan White clients seen in Behavioral Health by the Licensed Clinical Social Worker (LCSW) and the Psychiatric APRN during the month of August.
- D. The Ryan White clinic continues to implement the Rapid stART project, which has a goal of rapid treatment initiation for newly diagnosed patients with HIV. The program continues to receive referrals and accommodate clients on a walk-in basis. There were 13 patients enrolled and seen under the Rapid stART program in August.

### Family Planning (FP)

Unduplicated Patients	August 2022	August 2023		FY 22-23	FY 23-24	
Number of Pt: Fremont PHC	84	215	↑	190	361	↑
Number of Pt: Decatur PHC	382	230	↓	653	402	↓

Duplicated Patients	August 2022	August 2023		FY 22-23	FY 23-24	
Number of Pt: Fremont PHC	85	226	↑	196	401	↑
Number of Pt: Decatur PHC	412	243	↓	735	442	↓
New Patients	112	99	↓	235	183	↓
Number of Pt: Fremont PHC	15	55	↑	45	94	↑
Number of Pt: Decatur PHC	97	44	↓	190	89	↓
APRN Visits	349	297	↓	673	555	↓
Number of Pt: Fremont PHC	60	144	↑	135	264	↑
Number of Pt: Decatur PHC	289	153	↓	538	291	↓

Client Encounters by Locations			
Location	Decatur PHC	ELV PHC	Total
Family Planning	243	226	469

Client Encounters by Location				
Location /Program	Aug-22	Aug-23	FY 22-23	FY 23-24
Family Planning	497	469	931	843

- A. FP Program services at the Fremont and Decatur Public Health Centers served 469 clients, of which 445 of them were unduplicated.
- B. The Fremont Family Planning Clinic served 226 clients: 215 of them were unduplicated.
- C. The Decatur Family Planning Clinic serviced 243 clients: 230 of them were unduplicated.

## Pharmacy Services

	Aug-22	Aug-23		FY23	FY24		% Change YTD
<b>Client Encounters (Pharmacy)</b>	1,245	1,457	↑	2,408	2,671	↑	10.9%
<b>Prescriptions Filled</b>	1,646	2,021	↑	3,163	3,702	↑	17.0%
<b>Client Clinic Encounters (Pharmacist)</b>	49	31	↓	144	67	↓	-53.5%
<b>Financial Assistance Provided</b>	9	21	↑	19	36	↑	89.5%
<b>Insurance Assistance Provided</b>	-	1	↑	3	1	↓	-66.7%

- A. Dispensed 2021 prescriptions for 1,457 clients.
- B. Pharmacist completed 31 client clinic encounters.
- C. Assisted 21 clients to obtain medication financial assistance.
- D. Assisted 1 client with insurance approvals.

## Eligibility Case Narrative and Monthly Report

As a team, the Eligibility Workers submitted a total of 76 applications for the month.

Applications	Status
55	Approved
22	Denied
49	Pending

## FQHC-Sexual Health Clinic (SHC)

- A. The FQHC-Sexual Health Clinic (SHC) clinic provided 1,086 encounters to 807 unduplicated patients in the month of August. There were 133 unduplicated patients seen at the All-Saints Episcopal Church (ASEC) Outreach Clinic. There are currently more than 100 patients receiving injectable treatment for HIV prevention (PrEP).
- B. The FQHC-SHC is participating in a research project in collaboration with the University of San Diego, California (UCSD) looking at STI's as a tool for HIV prevention. The clinic continues to collaborate with UMC on referrals for evaluation and treatment of neurosyphilis. The SHC is collaborating with the PPC-Sexual Health and Outreach Prevention Programs (SHOPP) with the Gilead FOCUS grant to expand express testing services for asymptomatic patients and provide linkage to care for patients needing STI, Hepatitis C or HIV treatment services.
- C. The FQHC-SHC Community Health Worker (CHW) attended training on Motivational Interviewing. Two of the SHC providers attended a training session, "Doxycycline for bacterial STI prevention," provided by the Pacific AIDS Education & Training Center Program. The training focused on the use and effectiveness of doxycycline use for prevention of chlamydia and syphilis.
- D. The SHC staff continues to see patients for Mpox evaluation and referral for vaccine.
- E. Two CHN nurses, one Medical Assistant, and one administrative assistant are continuing orientation in FQHC-SHC. FQHC-SHC has begun the process for filling one vacant CHN position.

## Tuberculosis Clinic/Refugee Health Program

Refugee Health Program for the month of August 2023.

Number of clients who required medical follow-up for communicable diseases	8
Referrals for TB issues	4
Referrals for Chronic Hep B	3
Referrals for STD	1
Pediatric Refugee Exams	8
Client encounters by program (adults)	57
Refugee Health screening for August 2023	57
<b>Total for FY22-23</b>	<b>114</b>

## Risk Management

- Medical Events (Dr. Bluebird) – 2
- Patient Complaints/Grievances – 0
- Medication Errors – 0
- Patient Issues – 0
- Employee Incidents – 1
- HIPAA Violation(s) – 0

## Patient Satisfaction: See attached survey results.

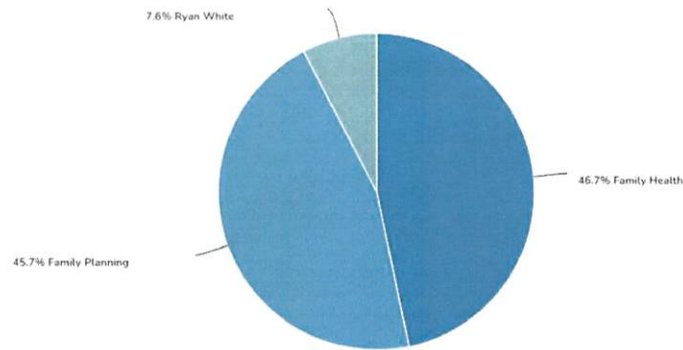
The Health Center continues to receive generally favorable responses from survey participants when asked about ease of scheduling an appointment, wait time to see their provider, care received from providers and staff, understanding of health care instructions following their visit, hours of operation, and recommendation of the Health Center to friends and family.

## Report for Southern Nevada Community Health Center (SNCHC) Patient Satisfaction Survey (English) August 2023

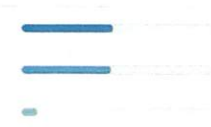
### Response Counts



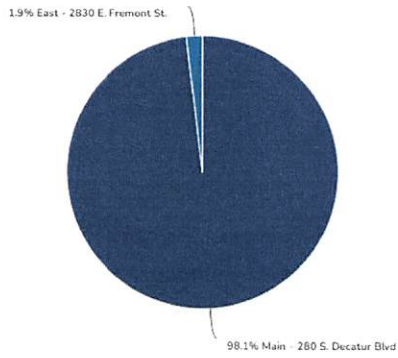
### 1. Service received during your visit



Value	Percent	Responses
Family Health	46.7%	49
Family Planning	45.7%	48
Ryan White	7.6%	8
<b>Totals:</b>		<b>105</b>

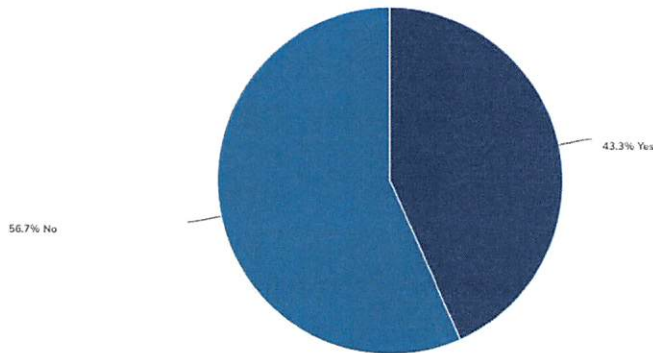


2. Southern Nevada Health District (SNHD) location



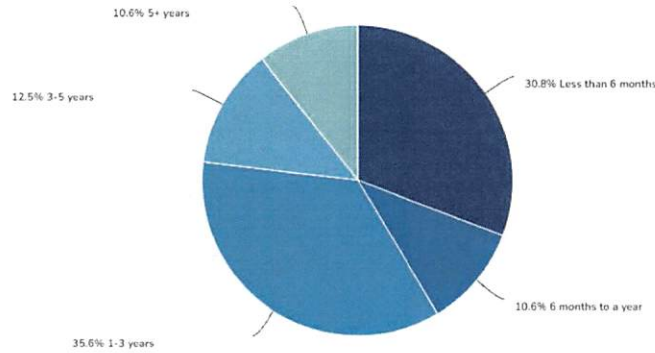
Value	Percent	Responses
Main - 280 S. Decatur Blvd	98.1%	102
East - 2830 E. Fremont St.	1.9%	2
		<b>Totals: 104</b>

3. Do you have health insurance?



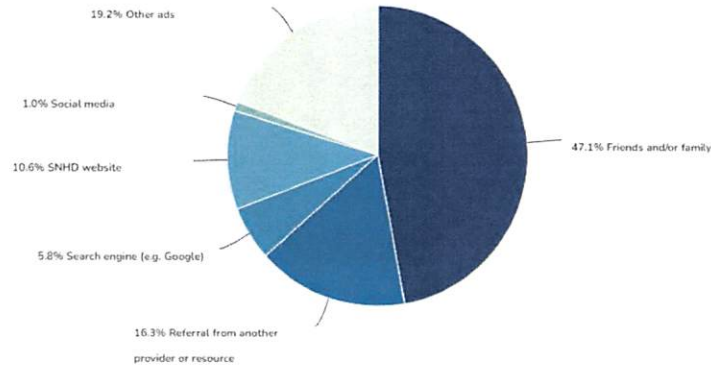
Value	Percent	Responses
Yes	43.3%	45
No	56.7%	59
		<b>Totals: 104</b>

4. How long have you been a patient at the Southern Nevada Health District/Southern Nevada Community Health Center?



Value	Percent	Responses
Less than 6 months	30.8%	32
6 months to a year	10.6%	11
1-3 years	35.6%	37
3-5 years	12.5%	13
5+ years	10.6%	11
		<b>Totals: 104</b>

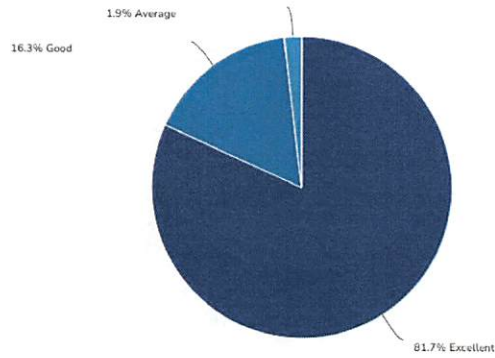
5. How did you hear about us?



Value	Percent	Responses
Friends and/or family	47.1%	49
Referral from another provider or resource	16.3%	17
Search engine (e.g. Google)	5.8%	6
SNHD website	10.6%	11
Social media	1.0%	1
Other ads	19.2%	20
		<b>Totals: 104</b>

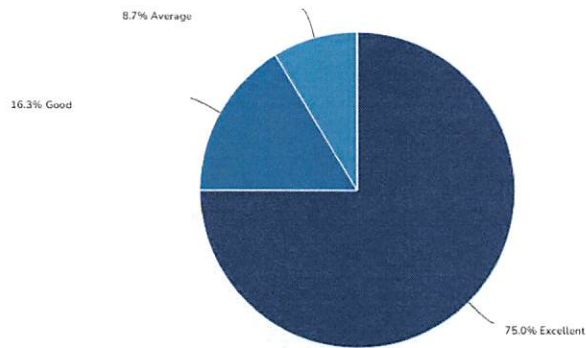


6. Ease of scheduling an appointment



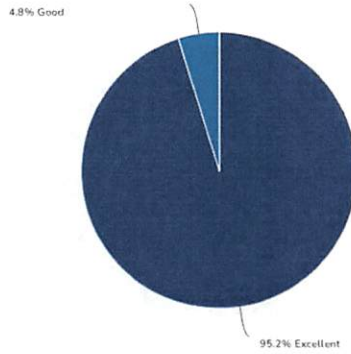
Value	Percent	Responses
Excellent	81.7%	85
Good	16.3%	17
Average	1.9%	2
		<b>Totals: 104</b>

7. Wait time to see provider



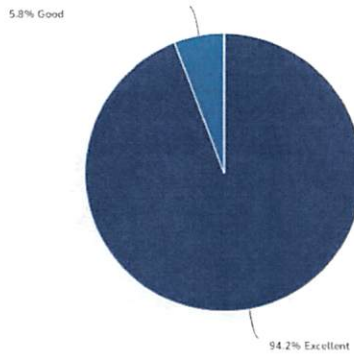
Value	Percent	Responses
Excellent	75.0%	78
Good	16.3%	17
Average	8.7%	9
		<b>Totals: 104</b>

8. Care received from providers and staff



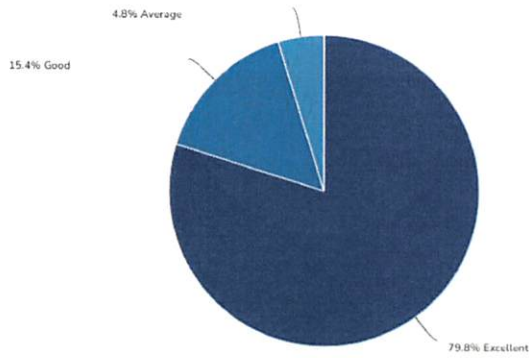
Value	Percent	Responses
Excellent	95.2%	99
Good	4.8%	5
		<b>Totals: 104</b>

9. Understanding of health care instructions following your visit



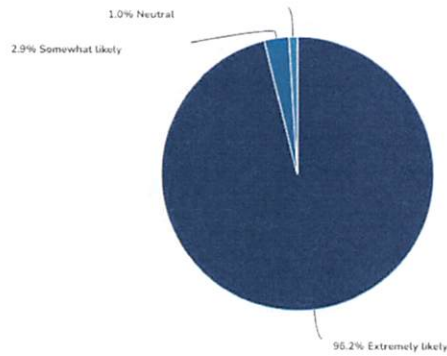
Value	Percent	Responses
Excellent	94.2%	98
Good	5.8%	6
		<b>Totals: 104</b>

10. Hours of operation



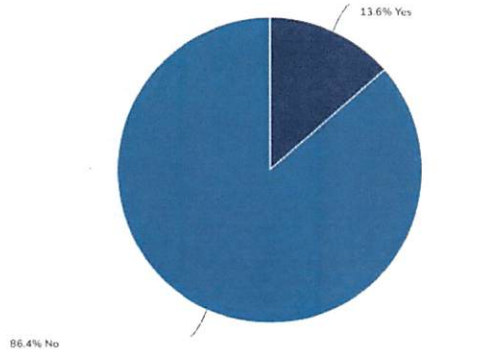
Value	Percent	Responses
Excellent	79.8%	83
Good	15.4%	16
Average	4.8%	5
		<b>Totals: 104</b>

11. Recommendation of our health center to friends and family



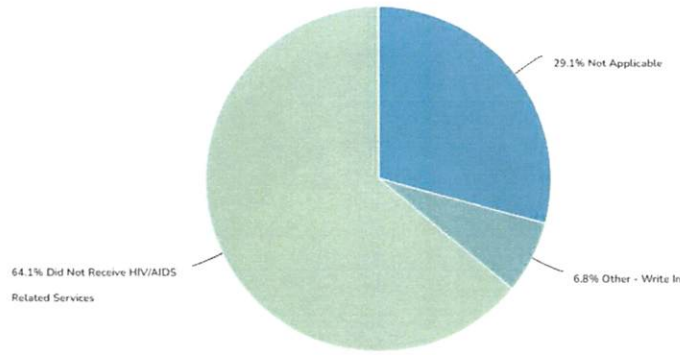
Value	Percent	Responses
Extremely likely	96.2%	100
Somewhat likely	2.9%	3
Neutral	1.0%	1
		<b>Totals: 104</b>

12. Are you visiting today for HIV/AIDS related prevention or treatment services or to received relate information?



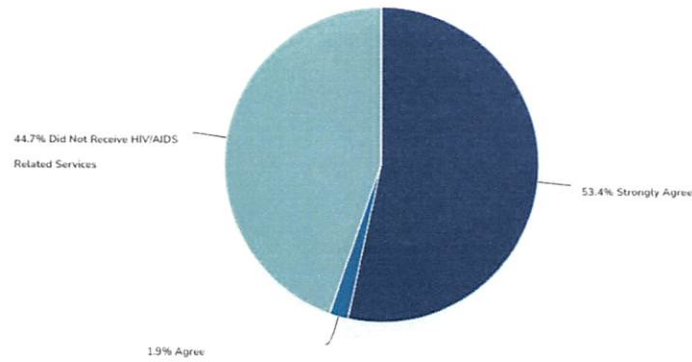
Value	Percent	Responses
Yes	13.6%	14
No	86.4%	89
		<b>Totals: 103</b>

13. Based on your HIV status, at any moment during your visit, did you feel...



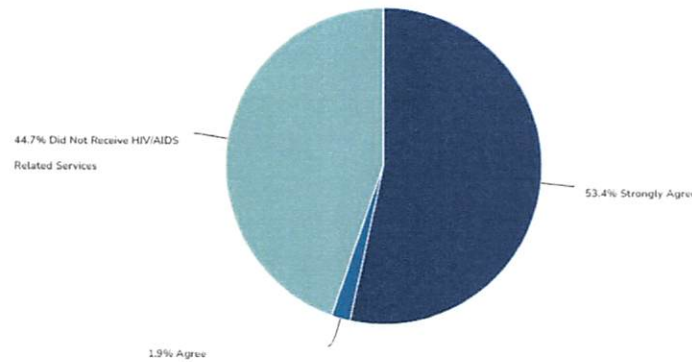
Value	Percent	Responses
Not Applicable	29.1%	30
<a href="#">Other - Write In (click to view)</a>	6.8%	7
Did Not Receive HIV/AIDS Related Services	64.1%	66
		<b>Totals: 103</b>

14. During your visit, did you feel that staff members treated you with care?



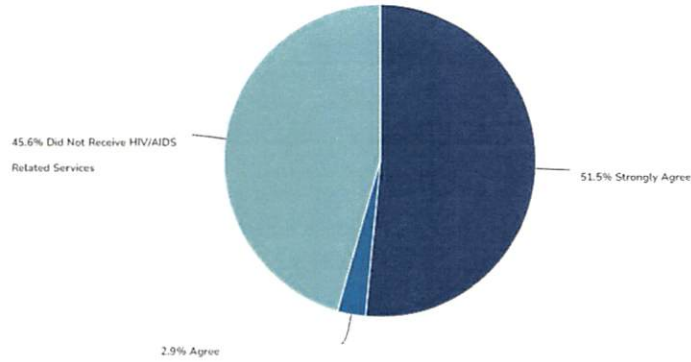
Value	Percent	Responses
Strongly Agree	53.4%	55
Agree	1.9%	2
Did Not Receive HIV/AIDS Related Services	44.7%	46
		<b>Totals: 103</b>

15. During your visit, did you feel that staff members treated you with respect



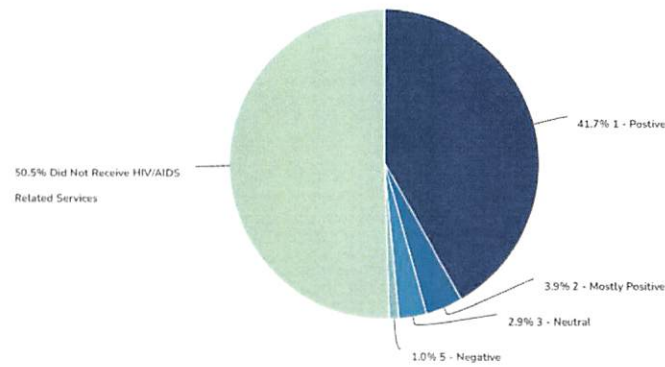
Value	Percent	Responses
Strongly Agree	53.4%	55
Agree	1.9%	2
Did Not Receive HIV/AIDS Related Services	44.7%	46
		<b>Totals: 103</b>

16. During your visit, did you feel that staff members were supportive?



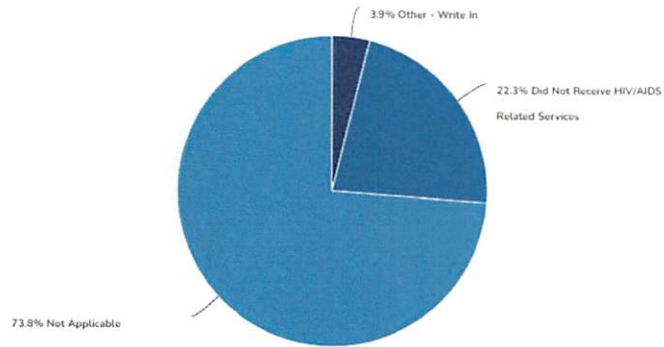
Value	Percent	Responses
Strongly Agree	51.5%	53
Agree	2.9%	3
Did Not Receive HIV/AIDS Related Services	45.6%	47
<b>Totals: 103</b>		

17. On a scale from 1-5, during your visit, did you feel that any staff interactions negatively or positively impacted your likelihood of remaining in care?



Value	Percent	Responses
1 - Positive	41.7%	43
2 - Mostly Positive	3.9%	4
3 - Neutral	2.9%	3
5 - Negative	1.0%	1
Did Not Receive HIV/AIDS Related Services	50.5%	52
<b>Totals: 103</b>		

18. Please provide any feedback that can help SNCHC staff reduce HIV/AIDS related stigma and create a more welcoming and supportive environment.



Value	Percent	Responses
<a href="#">Other - Write In (click to view)</a>	3.9%	4
Did Not Receive HIV/AIDS Related Services	22.3%	23
Not Applicable	73.8%	76
		<b>Totals: 103</b>

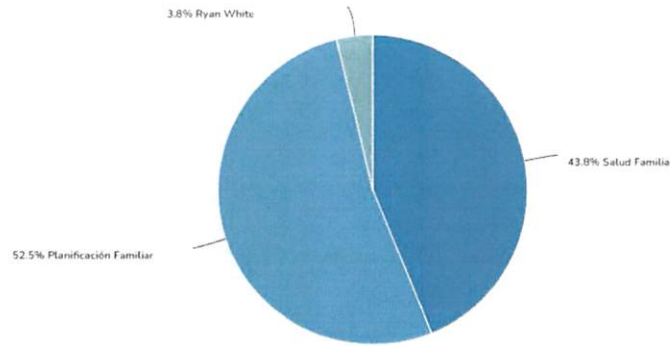
## Report for Distrito de Salud del Sur de Nevada Encuesta de Satisfacción del Paciente (SNCHC) (Spanish) August 2023

Report for Distrito de Salud del Sur de Nevada Encuesta de Satisfacción del Paciente (SNCHC)

### Response Counts



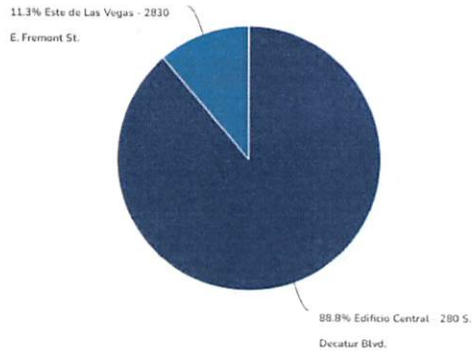
### 1. Marque los servicios recibidos durante su visita



Value	Percent	Responses
Salud Familiar	43.8%	35
Planificación Familiar	52.5%	42
Ryan White	3.8%	3
<b>Totals:</b>		<b>80</b>

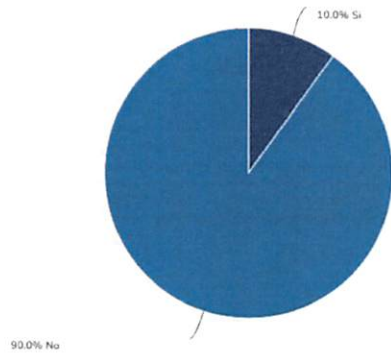


2. ¿En cuál de las localidades del Distrito de Salud recibió los servicios?



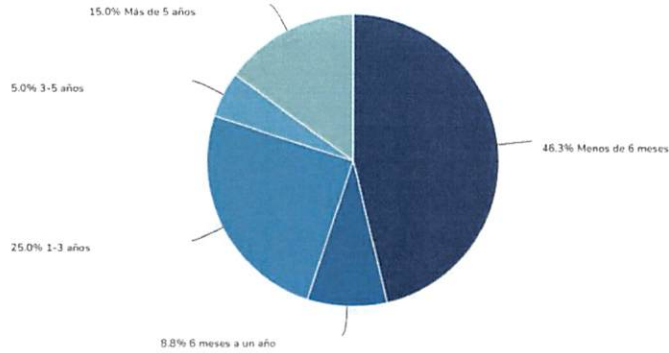
Value	Percent	Responses
Edificio Central - 280 S. Decatur Blvd.	88.8%	71
Este de Las Vegas - 2830 E. Fremont St.	11.3%	9
		Totals: 80

3. ¿Tiene seguro médico?



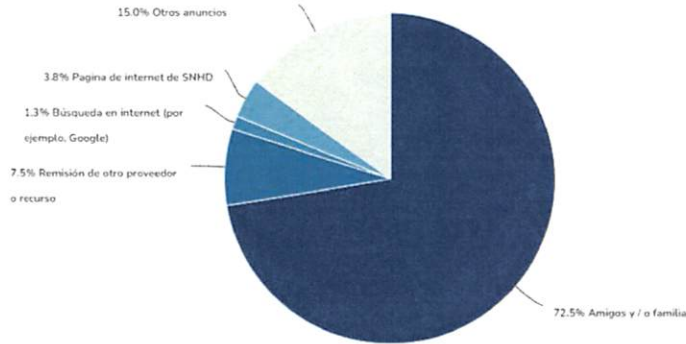
Value	Percent	Responses
Si	10.0%	8
No	90.0%	72
		Totals: 80

4. ¿Cuánto tiempo ha sido usted paciente en el Distrito de Salud del Sur de Nevada/Centro de Salud Comunitario del Sur de Nevada?



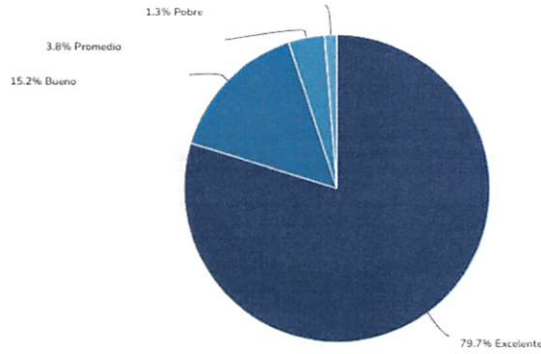
Value	Percent	Responses
Menos de 6 meses	46.3%	37
6 meses a un año	8.8%	7
1-3 años	25.0%	20
3-5 años	5.0%	4
Más de 5 años	15.0%	12
		<b>Totals: 80</b>

5. ¿Como usted supo de nosotros?



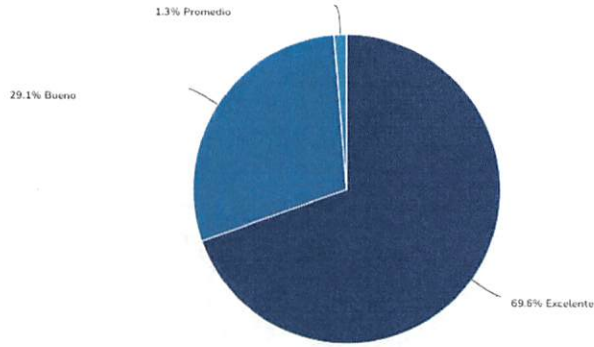
Value	Percent	Responses
Amigos y / o familia	72.5%	58
Remisión de otro proveedor o recurso	7.5%	6
Búsqueda en internet (por ejemplo, Google)	1.3%	1
Pagina de internet de SNHD	3.8%	3
Otros anuncios	15.0%	12
		<b>Totals: 80</b>

6. Facilidad para programar una cita



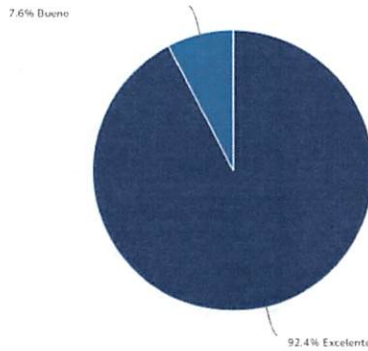
Value	Percent	Responses
Excelente	79.7%	63
Bueno	15.2%	12
Promedio	3.8%	3
Pobre	1.3%	1
<b>Totals: 79</b>		

7. Tiempo de espera para ver a un proveedor de salud



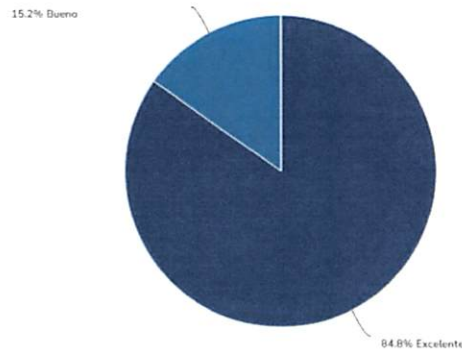
Value	Percent	Responses
Excelente	69.6%	55
Bueno	29.1%	23
Promedio	1.3%	1
<b>Totals: 79</b>		

8. Atención recibida de los proveedores y personal



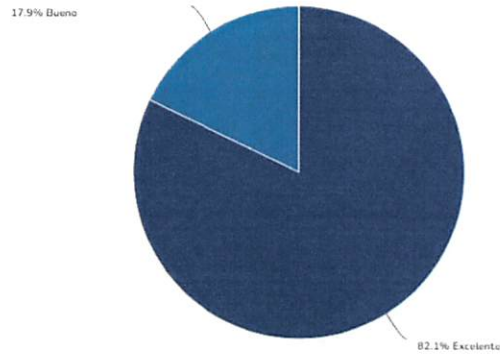
Value	Percent	Responses
Excelente	92.4%	73
Bueno	7.6%	6
		<b>Totals: 79</b>

9. Comprensión de las instrucciones del cuidado de salud después de su visita



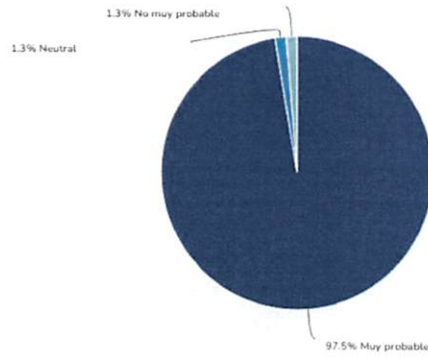
Value	Percent	Responses
Excelente	84.8%	67
Bueno	15.2%	12
		<b>Totals: 79</b>

10. Horarios de operación



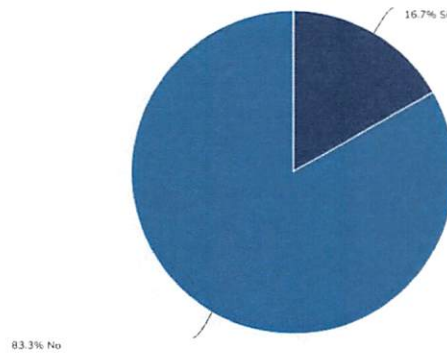
Value	Percent	Responses
Excelente	82.1%	64
Buena	17.9%	14
<b>Totals: 78</b>		

11. Recomendaría nuestro centro de salud a amigos y familiares



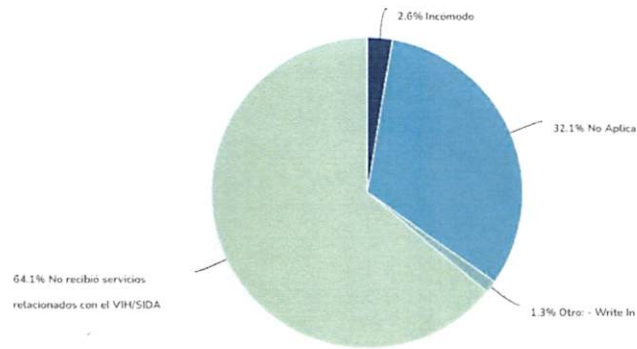
Value	Percent	Responses
Muy probable	97.5%	77
Neutral	1.3%	1
No muy probable	1.3%	1
<b>Totals: 79</b>		

12. ¿Está de visita hoy para recibir servicios de prevención o tratamiento relacionados con el VIH/SIDA o para recibir información relacionada?



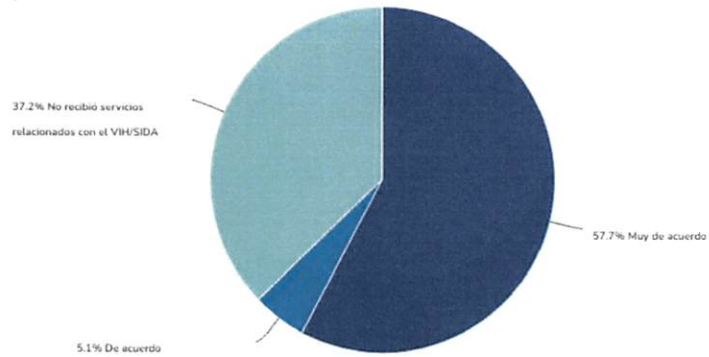
Value	Percent	Responses
Si	16.7%	13
No	83.3%	65
		<b>Totals: 78</b>

13. Con base en su estatus de VIH, en algún momento de su visita, se sintió...



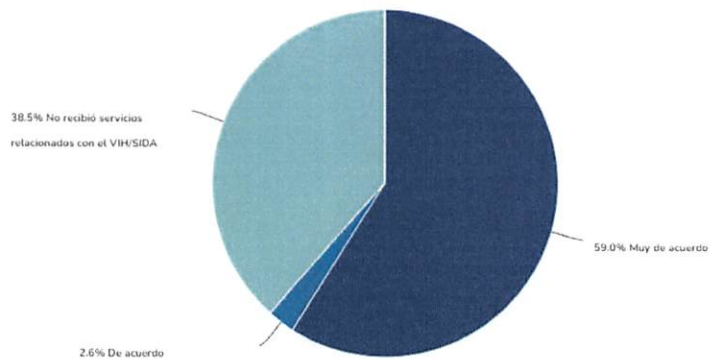
Value	Percent	Responses
Incomodo	2.6%	2
No Aplica	32.1%	25
<a href="#">Otro: - Write In (click to view)</a>	1.3%	1
No recibió servicios relacionados con el VIH/SIDA	64.1%	50
		<b>Totals: 78</b>

14. ¿Durante su visita, sintió que los miembros del personal lo trataron bien?



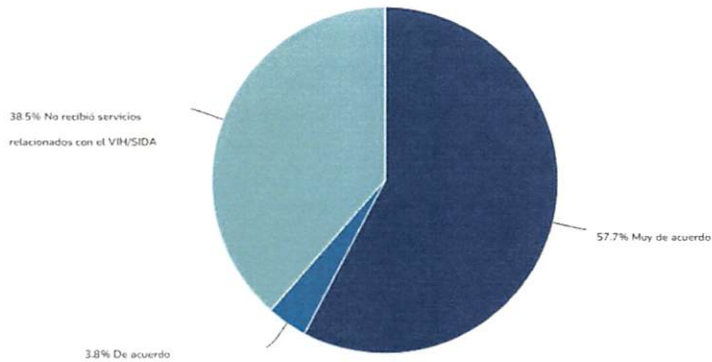
Value	Percent	Responses
Muy de acuerdo	57.7%	45
De acuerdo	5.1%	4
No recibió servicios relacionados con el VIH/SIDA	37.2%	29
<b>Totals: 78</b>		

15. ¿Durante su visita, sintió que los miembros del personal lo trataron con respeto?



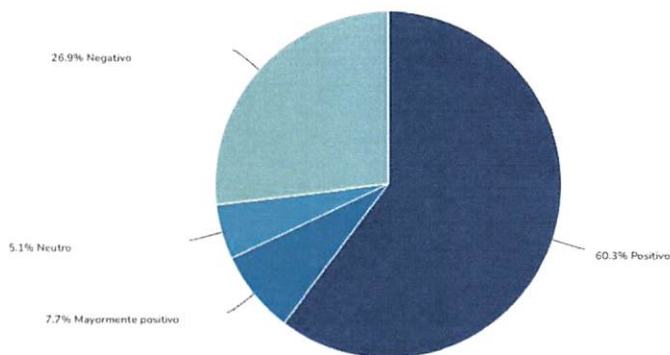
Value	Percent	Responses
Muy de acuerdo	59.0%	46
De acuerdo	2.6%	2
No recibió servicios relacionados con el VIH/SIDA	38.5%	30
<b>Totals: 78</b>		

16. ¿Durante su visita, sintió que los miembros del personal lo apoyaron?



Value	Percent	Responses
Muy de acuerdo	57.7%	45
De acuerdo	3.8%	3
No recibió servicios relacionados con el VIH/SIDA	38.5%	30
<b>Totals: 78</b>		

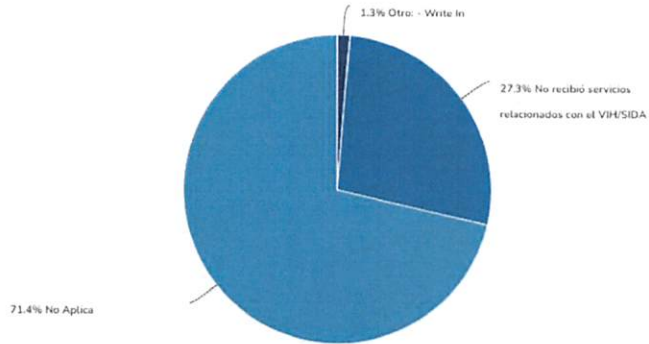
17. En una escala del 1 al 5, durante su visita, ¿sintió que alguna interacción del personal tuvo un impacto negativo o positivo en su probabilidad de permanecer bajo cuidado?



Value	Percent	Responses
Positivo	60.3%	47
Mayormente positivo	7.7%	6
Neutro	5.1%	4
Negativo	26.9%	21
<b>Totals: 78</b>		



18. Proporcione cualquier comentario que pueda ayudar al personal de SNHD a reducir el estigma relacionado con el VIH/SIDA y crear un ambiente mas agradable y de apoyo.



Value	Percent	Responses
<a href="#">Otro - Write In (click to view)</a>	1.3%	1
No recibió servicios relacionados con el VIH/SIDA	27.3%	21
No Aplica	71.4%	55
		<b>Totals: 77</b>