

MINUTES

SOUTHERN NEVADA COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING

October 15, 2024, 2024 – 2:30 p.m.

Meeting was conducted In-person and via Microsoft Teams

Southern Nevada Health District, 280 S. Decatur Boulevard, Las Vegas, NV 89107
Red Rock Trail Room A

- MEMBERS PRESENT:** Jose L. Melendrez, Chair (*via Microsoft Teams*)
Donna Feliz-Barrows, Vice-Chair (*in-person*)
Scott Black (*via Microsoft Teams*)
Erin Breen (*via Microsoft Teams*)
Ashley Brown (*via Microsoft Teams*)
Marie Dukes (*via Microsoft Teams*)
Sara Hunt (*in-person*)
Brian Knudsen (*via Microsoft Teams*)
Blanca Macias-Villa (*via Microsoft Teams*)
- ABSENT:** Luz Castro
Jasmine Coca
- ALSO PRESENT:** Donna Laffey
- LEGAL COUNSEL:** Edward Wyner, Associate General Counsel
- CHIEF EXECUTIVE OFFICER:** Randy Smith
- STAFF:** Emily Anelli, Tawana Bellamy, Todd Bleak, Donna Buss, Tabitha Johnson, David Kahananui, Ryan Kelsch, Fermin Leguen, Cassius Lockett, Cassondra Major, Jonas Maratita, Kimberly Monahan, Luann Province, Yin Jie Qin, Kim Saner, Felicia Sgovio, Justin Tully, Donnie Whitaker, Merylyn Yegon
- I. CALL TO ORDER and ROLL CALL**
The Chair called the Southern Nevada Community Health Center (SNCHC) Governing Board Meeting to order at 2:32 p.m. Tawana Bellamy, Senior Administrative Specialist, administered the roll call and confirmed a quorum.
- II. PLEDGE OF ALLEGIANCE**
- III. FIRST PUBLIC COMMENT:** A period devoted to comments by the general public about those items appearing on the agenda. Comments will be limited to five (5) minutes per speaker. Please clearly state your name and address and spell your last name for the record. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chair or the Board by majority vote.

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.

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

IV. ADOPTION OF THE OCTOBER 15, 2024 MEETING AGENDA *(for possible action)*

Chair Melendrez called for questions and there were none.

A motion was made by Member Feliz-Barrows, seconded by Member Knudsen, and carried unanimously to approve the October 15, 2024, 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: August 20, 2024 *(for possible action)*

~~**2. Approve Credentialing and Privileging of Provider Michelle Jordan, DO;** direct staff accordingly or take other action as deemed necessary *(for possible action)*~~

Item V.2 was removed from the Consent Agenda.

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

VI. REPORT / DISCUSSION / ACTION

Recommendations from the October 14, 2024 Finance and Audit Committee Meeting

1. Receive, Discuss and Accept the August 2024 Year to Date Financial Report; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Donnie Whitaker, Chief Financial Officer, presented the August 2024 Year to date Financial Report, unaudited results as of August 31, 2024.

Revenue

- General Fund revenue (Charges for Services & Other) was \$5.67M compared to a budget of \$4.69M, a favorable variance of \$978K.
- Special Revenue Funds (Grants) was \$1.49M compared to a budget of \$1.31M, a favorable variance of \$174K.
- Total Revenue was \$7.15M compared to a budget of \$6.00M, a favorable variance of \$1.15M.

Expenses

- Salary, Tax, and Benefits was \$2.26M compared to a budget of \$2.29M, a favorable variance of \$23K.

- Other Operating Expense was \$5.20M compared to a budget of \$4.04M, an unfavorable variance of \$1.17M.
- Indirect Cost/Cost Allocation was \$1.30M compared to a budget of \$1.28M, an unfavorable variance of \$20K.
- Total Expense was \$8.76M compared to a budget of \$7.60M, an unfavorable variance of \$1.16M.

Net Position: was (\$1.61M) compared to a budget of (\$1.60M), an unfavorable variance of \$11K.

Ms. Whitaker further reviewed the following:

- All funds and Divisions by Type (Budget to Actual)
- Revenue and Expenses by Department (graphical diagram)
- Revenue by Department
- Expenses by Department
- Patient Encounters by Department as of August 2024
 - FY2024 Total: 4,793
 - FY2025 Total: 6,282
 - 31% year over year growth

The Chair called for questions and there were none.

A motion was made by Member Black, seconded by Member Feliz-Barrows, and carried unanimously to accept the August 2024 Year to Date Financial Report, as presented.

Recommendations from the October 9, 2024 Quality, Credentialing & Risk Management Committee Meeting

- 2. Receive, Discuss and Accept the Third Quarter Risk Management Report;** direct staff accordingly or take other action as deemed necessary (*for possible action*)

David Kahananui, FQHC Administrative Manager provided an overview of the Third Quarter Risk Management Report, including year to date performance. Mr. Kahananui advised that goal number 5 was added to align with FTCA's focus on clinical safety regarding obstetric care.

The Chair called for questions and there were none.

A motion was made by Member Feliz-Barrows, seconded by Member Breen, and carried unanimously to accept the Third Quarter Risk Management Report, as presented.

- 3. Receive, Discuss and Accept the Third Quarter Risk Management Assessment;** direct staff accordingly or take other action as deemed necessary (*for possible action*)

Mr. Kahananui provided an overview of the Third Quarter Risk Management Assessment. Mr. Kahananui shared that quarterly risk assessments are required by the Health Resources and Services Administration (HRSA) for annual Federal Tort Claims Act (FTCA) Redeeming.

Mr. Kahananui further shared that the Q3 assessment was conducted with the Risk Assessment and Mitigation Tool, Infection Prevention and Control (IPC). Mr. Kahananui advised the tool is

provided by the Emergency Care Research Institute (ECRI), which is the organization recommended by HRSA for FTCA & Risk Management training and support. Mr. Kahananui further advised the IPC Risk Assessment will be performed annually to help prevent and mitigate potential malpractice liabilities that could result from poor infection prevention and control. Mr. Kahananui advised there were twenty-nine findings during the assessment.

Mr. Kahananui outlined three goals that would address and correct the findings.

- Goal 1: Create an Infection Prevention and Control Policy that address all components required to resolve the deficiencies identified in the HRSA Risk Assessment and Mitigation Tool: Infection Prevention and Control (IPC).
- Goal 2: Name a new IPC Officer and a backup IPC Officer
- Goal 3: IPC daily procedures to be developed, documented, trained, and implemented with measurable metrics and a process for ongoing IPC monitoring and quality control.

Further from an inquiry from Member Feliz-Barrow, Mr. Kahananui shared there has not been an IPC Officer or an IPC policy for the health center.

A motion was made by Member Feliz-Barrows, seconded by Member Breen, and carried unanimously to accept the Third Quarter Risk Management Assessment, as presented.

Recommendations from the October 9, 2024, Executive Director Annual Review Committee Meeting

4. Receive, Discuss and Approve the FY24 Summary of Accomplishments and FY25 Goals for the Chief Executive Officer; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Mr. Smith provided a high-level review of the FY24 Summary of Accomplishments and FY25 Goals for the Chief Executive Officer.

The Chair called for questions and there were none.

A motion was made by Member Feliz-Barrows, seconded by Member Hunt, and carried unanimously to approve the FY24 Summary of Accomplishments and FY25 Goals for the Chief Executive Officer, as presented.

5. Receive, Discuss and Approve the FY24 Evaluation Results of the Chief Executive Officer; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Mr. Kahananui advised of the FY24 Evaluation Results of the Chief Executive Officer. Mr. Kahananui further advised the survey scores were compiled from participating Governing Board Members, but comments were provided by a mixture of Governing Board Members and Southern Nevada Health District staff.

Out of eleven board members, seven completed the evaluation survey.

Questions	Weighted	Average Score
Q1: The CEO consistently demonstrates equitable and fair treatment of SNCHC employees, contractors, and volunteers.	15%	4.85

Q2: The CEO consistently provides thorough administrative leadership and oversight of SNCHC’s compliance with HRSA program requirements.	40%	4.71
Q3: The CEO ensures that the SNCHC has a viable long-range strategy to achieve its mission and utilizes data to measure progress towards achieving programmatic, clinical, and financial goals	15%	5
Q4: The CEO appropriately utilizes financial and utilization data to ensure SNCHC is maximizing budgetary and human resources to achieve health center goals.	15%	4.85
Q5. The CEO properly represents SNCHC in the community and fosters the establishment of new community partners and develops existing partnerships.	15%	4.57
“General Strengths” Narratives - 2024	<ul style="list-style-type: none"> • Mr. Smith is an asset to the SNCHC. He has exhibited strong leadership skills as well as a clear vision of how to make the clinic even better. • Mr. Smith's dedication and passion of the SNCHC is demonstrated when presenting to the board. He is extremely knowledgeable, always prepared, and demonstrates team ownership of the success and challenges of growing a successful FQHC. 	
“Areas for Growth” Narratives - 2024	<ul style="list-style-type: none"> • Mr. Smith could be stronger in properly representing SNCHC in the community and fostering the establishment of new community partners and developing existing partnerships. 	
2024 Chief Executive Officer Annual Review Overall Weighted Score:	4.78 on a scale of 1 being poor to 5 being outstanding.	

Member Feliz-Barrows commented that Mr. Smith has done an excellent job and it showed by the comments that were made and the board really appreciates the dedication and passion Mr. Smith has for the position.

Mr. Smith thanked Member Feliz-Barrows and shared it is a privilege to be here and enjoys working with the board. Mr. Smith further shared that he enjoys how the health center board is structured and how it comes together as a community to set the direction of health center that is designed to care for those who are using it. Mr. Smith shared that he has a lot of gratitude for his team.

Chair Melendrez shared that it has been a pleasure and honor to work with Mr. Smith, under his have his guidance, leadership, and full support of everything. Chair Melendrez further shared he

appreciates Mr. Smith’s leadership style and his engagement with the board members, staff, and community partners.

The Chair called for any further questions or comments and there were none.

A motion was made by Member Feliz-Barrows, seconded by Member Hunt, and carried unanimously to approve the FY24 Evaluation Results of the Chief Executive Officer, as presented.

SNCHC Governing Board

6. Receive, Discuss and Approve Governing Board Chair, 1st Vice Chair and 2nd Vice Chair Officer Appointments; direct staff accordingly or take other action as deemed necessary *(for possible action)*

The board was provided a summary of the Officer Appointment nominations.

The Chair called for any further questions or comments and there were none.

A motion was made by Member Breen, seconded by Member Macias-Villa, and carried unanimously to approve the Governing Board Chair, 1st Vice Chair and 2nd Vice Chair Officer Appointments, as follows.

CALENDAR YEAR 2025 OFFICER APPOINTMENTS		
Chair	First Vice Chair	Second Vice Chair
Donna Feliz-Barrows	Jasmine Coca	Sara Hunt

7. Review, Discuss and Approve Committee Memberships; direct staff accordingly or take other action as deemed necessary *(for possible action)*

The board was provided a summary of the Committee Participation Interest Forms.

A motion was made by Member Feliz-Barrows, seconded by Member Breen, and carried unanimously to approve the Committee Memberships, as follows.

CALENDAR YEAR 2025 COMMITTEE ASSIGNMENTS					
Executive Committee	Executive Director Annual Review Committee	Finance and Audit Committee	Quality, Credentialing & Risk Management Committee	Nominations Committee	Strategic Planning Committee
Donna Feliz-Barrows	Scott Black	Marie Dukes	Sara Hunt	Sara Hunt	Scott Black
Brian Knudsen	Donna Feliz-Barrows	Ashley Brown	Jose Melendrez	Donna Feliz-Barrows	Jasmine Coca
Jasmine Coca	Jose Melendrez	Jasmine Coca	Erin Breen	Jose Melendrez	Blanca Macias-Villa
		Blanca Macias-Villa		Erin Breen	

- 8. Review, Discuss and Approve the 2025 Governing Board Meeting Schedule;** direct staff accordingly or take other action as deemed necessary (*for possible action*)

The Governing Board was advised that the proposed meeting schedule for calendar year 2025 would be on the third Tuesday of each month at 2:30 p.m. except for December 2025.

Further to an inquiry from Chair Melendrez, Mr. Smith advised that there should be enough time to reschedule the October 21, 2025, meeting if we needed to cancel the meeting.

The Chair called for any further questions or comments and there were none.

A motion was made by Member Feliz-Barrows, seconded by Member Breen, and carried unanimously to approve the 2025 Governing Board Meeting Schedule, 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 shared the Nevada Minority Health & Equity Coalition (NMHEC) Impact Summit is on November 15, 2024, he hopes people can attend.

- IX. CEO & STAFF REPORTS** (*Information Only*)

- CEO Comments

Mr. Smith shared an update on the Governing Board Retreat. Mr. Smith advised Ms. Bellamy will send the final details, including parking information and dietary needs, to the board members.

Further to an inquiry from Member Feliz-Barrows, Mr. Smith shared Dr. Cassius Lockett, Deputy Health Officer, Administration, may be able to attend the retreat on behalf of Fermin Leguen.

- X. INFORMATIONAL ITEMS**

- Community Health Center (FQHC) September 2024 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 period.

- XII. ADJOURNMENT**

The Vice Chair adjourned the meeting at 3:50 p.m.

Randy Smith
Chief Executive Officer - FQHC

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