

MINUTES

SOUTHERN NEVADA COMMUNITY HEALTH CENTER CHIEF EXECUTIVE OFFICER ANNUAL REVIEW COMMITTEE MEETING

October 8, 2025 - 3:00 P.M.

Meeting was conducted via Microsoft Teams

MEMBERS PRESENT: Donna Feliz-Barrows
Jose L. Melendrez

ABSENT: None

ALSO PRESENT: Erin Breen

LEGAL COUNSEL: Edward Wynder, Associate General Counsel

CHIEF EXECUTIVE OFFICER: Randy Smith

STAFF: Emily Anelli, Tawana Bellamy, Robin Carter, Andria Cordovez Mulet, Tabitha Johnson, David Kahananui, Ryan Kelsch, Cassius Lockett, Bernadette Meily, Kyle Parkson, Felicia Sgovio, Lourdes Yapjoco, Merylyn Yegon

I. CALL TO ORDER and ROLL CALL

The Southern Nevada Community Health Center (SNCHC) Chief Executive Officer Annual Review Meeting was called to order at 3:00 p.m. Tawana Bellamy, Senior Administrative Specialist, administered the roll call and confirmed a quorum. Ms. Bellamy provided clear and complete instructions for members of the general public to call in to the meeting to provide public comment, including a telephone number and access code.

II. PLEDGE OF ALLEGIANCE

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

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

IV. ADOPTION OF THE OCTOBER 8, 2025 AGENDA *(for possible action)*

A motion was made by Member Melendrez, seconded by Member Feliz-Barrow, and carried unanimously to approve the October 8, 2025 Agenda, as presented.

V. CONSENT AGENDA: Items for action to be considered by the Southern Nevada Community Health Center Chief Executive Officer Annual Review Committee 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 Executive Director Annual Review Meeting Committee Meeting – October 9, 2024; (for possible action)

There were no questions or requested changes to the consent agenda.

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

VI. REPORT / DISCUSSION / ACTION

1. Receive, Discuss and Accept the Summary of the Chief Executive Officer (CEO) Evaluation Results and Approve Recommendations to the Southern Nevada Community Health Center Governing Board on October 21, 2025; direct staff accordingly or take other action as deemed necessary *(for possible action)*

David Kahananui, FQHC Administrative Manager, provided an overview of the CEO Annual Evaluation process and reviewed the Governing Board's responsibilities under HRSA requirements. Mr. Kahananui noted that the annual CEO evaluation is a required governance activity and that documentation of Board and committee participation is reviewed by HRSA.

Mr. Kahananui reported that the CEO evaluation survey was distributed to ten Governing Board members, and seven completed responses were received. Mr. Kahananui explained that the evaluation tool utilizes a five-point rating scale, with one representing "Poor" and five representing "Outstanding." The survey also includes two narrative questions regarding the CEO's strengths and opportunities for growth. He further noted that each evaluation criterion is weighted, with the second criterion carrying the greatest weight in the overall score.

Mr. Kahananui stated that survey scores were compiled from participating Governing Board members, while narrative comments included feedback from both board members and staff who report directly to the CEO.

Mr. Kahananui informed the committee that one evaluation reflected lower ratings on three performance measures compared to the overall results. While the accompanying comments suggested the ratings may have been entered in error, Mr. Kahananui advised that all results would be presented as submitted to maintain the integrity and objectivity of the evaluation process.

Questions	Weighted	Average Score
Q1: The CEO consistently demonstrates equitable and fair treatment of SNCHC employees, contractors, and volunteers.	15%	4.71
Q2: The CEO consistently provides thorough administrative leadership and oversight of SNCHC's compliance with HRSA program requirements.	40%	4.43

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%	4.43
Q4: The CEO appropriately utilizes financial and utilization data to ensure SNCHC is maximizing budgetary and human resources to achieve health center goals.	15%	4.43
Q5: The CEO properly represents SNCHC in the community and fosters the establishment of new community partners and develops existing partnerships.	15%	4.43
“General Strengths” Narratives - 2025	Strong leadership, compliance focus, financial oversight, expansion of patient services, successful audits, and dedication to staff and community health	
“Areas for Growth” Narratives - 2025	Need to increase visibility in the community and additional engagement with clinic staff.	
2025 Chief Executive Officer Annual Review Overall Weighted Score:	4.48 - On a scale of 1 being poor to 5 being outstanding.	

Mr. Kahananui asked if there were any questions. There were none from the committee members.

Mr. Smith questioned the accuracy of the board member count in the survey. Ms. Bellamy confirmed the count was correct at 10, noting Scott Black’s term had ended before the survey was distributed.

Mr. Smith initiated a discussion regarding the CEO evaluation process, noting that while the annual review is a HRSA-required activity, the board may wish to consider modifying the current process to increase participation and accountability. He explained that the current survey is anonymous, which limits the ability to follow up on responses, clarify concerns, or identify non-responding Board members. While the organization passed its OSV and is performing as expected, he noted that the inability to follow up on anonymous feedback leaves some concerns unresolved.

Ms. Feliz-Barrows acknowledged staff efforts to collect survey responses and stated that, since anonymity is not required, Board members should be identified on future evaluations. She expressed concern regarding the inability to determine why some Board members did not participate and suggested that completing the evaluation should be considered a Board responsibility.

Mr. Melendrez shared that other boards on which he has served require participation from all Board members during executive director evaluations and often utilize executive sessions to

discuss performance, concerns, and opportunities for growth. He stated that the CEO evaluation is a critical governance function and should involve full Board engagement.

Ms. Breen agreed that evaluations should not be anonymous and recommended that Board members stand behind their comments and feedback. She also supported providing a structured forum for Board members to discuss the CEO evaluation process and feedback.

The committee discussed several potential improvements, including:

- Requiring Board member identification on evaluation forms.
- Increasing follow-up efforts to improve participation.
- Holding an executive session to discuss evaluation results and CEO performance.
- Reviewing the evaluation process during a future Board retreat.
- Considering amendments to the bylaws to establish CEO evaluations as a required Board activity.

Mr. Kahananui confirmed that HRSA requires an annual CEO evaluation but does not prescribe the specific evaluation methodology. Mr. Wynder advised that the Board has the authority to amend its bylaws to incorporate additional requirements related to Board participation in the CEO evaluation process.

Mr. Smith stated that staff would document the discussion and prepare recommendations for consideration by the full Governing Board.

A motion was made by Member Melendrez, seconded by Member Feliz-Barrows, and carried unanimously to Accept the Summary of the Chief Executive Officer (CEO) Evaluation Results and Approve Recommendations to the Southern Nevada Community Health Center Governing Board on October 21, 2025, as presented.

2. Receive, Discuss and Accept the Chief Executive Officer (CEO) FY26 Goals and Approve Recommendations to the Southern Nevada Community Health Center Governing Board on October 21, 2025; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Randy Smith, Chief Executive Officer, presented the FY26 goals, noting that the goals were developed in collaboration with the management team and aligned with the Health Center's three-year strategic plan. Mr. Smith highlighted goals in the areas of quality, access, administration, governance, and finance.

Key goals included:

- Pursuing Patient-Centered Medical Home (PCMH) accreditation.
- Implementing Community Health Worker (CHW) Chronic Care Management Services.
- Increasing unique patients served by 5%.
- Reducing program silos through primary care training and integration.
- Increasing behavioral health encounters by five percent.
- Maintaining compliance with all funders.
- Increasing governance capacity through enhanced Board engagement and development.
- Increasing Medicaid encounters by five percent to improve financial sustainability.

- Reducing operational expenditures on supplies and services through cost-saving initiatives and strategic purchasing opportunities.

Member Melendrez inquired whether the committee's action was intended to approve the goals or simply recommend them to the full Governing Board. Mr. Smith clarified that the committee's role was to review the goals and forward a recommendation to the Governing Board for final consideration and approval.

Member Feliz-Barrows expressed support for the proposed goals and indicated she had no substantive concerns. Member Feliz-Barrows noted that any additional discussion could occur outside of the meeting and recommended moving the item forward for Board consideration.

Ms. Bellamy identified an error in the fiscal year dates displayed on the presentation slide. Mr. Smith acknowledged the correction and clarified that the goals reflected the FY26 period of July 1, 2025 through June 30, 2026.

Member Breen stated that the goals appeared comprehensive and well-aligned with the organization's priorities and offered her support for advancing them to the Governing Board.

There were no further comments or questions.

A motion was made by Member Feliz-Barrows, seconded by Member Melendrez, and carried unanimously to accept the Chief Executive Officer (CEO) FY26 Goals and Approve Recommendations to the Southern Nevada Community Health Center Governing Board on October 21, 2025.

- VII. 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 Second Public Comment portion closed was closed.

XIII. ADJOURNMENT

The Chair adjourned the meeting at 3:47 p.m.

Randy Smith
Chief Executive Officer - FQHC

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