

Memorandum

Date: February 4, 2020

To: Southern Nevada Community Health Center Board

From: Alfred McGugin, MPA, FQHC Operations Officer 
Fermin Leguen, MD, MPH, Executive Director 

RE: FQHC REPORT

I. General

January was another busy month for the Federally Qualified Health Center (FQHC), Southern Nevada Community Health Center (SNCHC). The SNCHC received the technical assistance (TA) report back from the Health Services Resources Administration (HRSA) review team and the Division has been working to correct the areas of concern that were identified before the Operational Site Visit. Each area, which are considered chapters had moderate to significant concerns to be addressed. Our senior leaders, staff and physicians has made an overwhelmingly effort to increase their aware of the clinical and administrative changes that accompany an FQHC. As we look to reduce waste and streamline our processes to be better aligned with the HRSA requirements, this effort can increase the demand on those that are required to contribute to the work of ensuring our compliance and preparedness.

II. FQHC Administration

A. Operational Site Visit

The operational site visit is scheduled for February 25, 26 and 27, 2020. Board members are invited to the entrance conference on February 25 from 9:00 to 10:00 am at SNHD. An important lunch meeting with members of the Operational Site Visit team is also scheduled for board members on Wednesday, February 26th from 12:00 to 1:00 pm. The exit conference is scheduled for Thursday, February 27th from 11:00 am to 12:00 pm. Due to open meeting regulations, no more than 7 board members may attend any one session. Please schedule your attendance so that it may be calendared and counted accordingly.

B. Staffing

Quality Management Coordinator position was posted in January and we are entering the interview phase of the process. It is expected this position will be filled within the next 4-6 weeks.

C. Marketing/Communication

We are working with the SNHD Advertising and Communications department to development the marketing strategy for the FQHC particularly for the ZIP 89107. Currently the strategy includes, bus ads, bus shelter ads, mass ZIP mailing to all households located in 89107, optimizing social media usage, such as Facebook and

Twitter. Further, the clinic signage and rebranding will be that of Southern Nevada Community Health Center. This signage will replace the current signage that currently states Sexual Health, Family Planning, etc. We are also devising a plan to use our televisions in the waiting areas as a part of our overall marketing strategy to include focusing on, board recruitment, highlight clinical successes including providers as well as community activities. Lastly, the facilities team working with the team to ensure external signage is visible and placed on the building siding and the marques located on S. Decatur and Meadows Lane.

D. Afterhours Call

Emergency afterhours call was rolled out February 3rd. As an FQHC we are required to provide emergency afterhours call for any patient that needs to reach clinical staff. Currently, SNCHC is taking the calls however we signed a contract to have this service provided by a 3rd party. Any patient that calls the following numbers 702 759 1000, 702 759 1810, 702 759 1800, 702 759 1039, and 702 759 0702 after the clinic has closed for the day will be forwarded to the afterhours line.

E. Contracts

Related to our Services Provided, the SNCHC has secured all necessary contracts that are required for Column II and Column III of the Form 5A. As required, those contracts and MOU's will be made available during the OSV.

III. Quality Management Program

A. Quality Management Committee

1. The Quality Management Committee convened on November 27, 2019. A Quality Management Plan, and Charter were drafted, reviewed and finalized for board adoption. Xandee Bernabe presented on a Patient Care Medical Home training. QI/QA training subcommittee was formed to facilitate training for FQHC staff. In-person (train the trainer) training is scheduled for March 2020.
2. The Quality Management Program policy was drafted, reviewed and finalized.
3. An on-going patient satisfaction survey was developed for all FQHC patients.

Attachments:

Finance Report

Summary Patient Data: January 2020

Patients by Race

Patient Best Served in a Language Other than English

Patients by Sexual Orientation

Patient by Gender Identity

Patient Characteristics

Staffing and Utilization

Southern Nevada Health District
Project Expenditure Status Report
as of 01/31/2020

Key: HCNAP_20 New Access Pt-Health Ctr Prgrm

Category - Description	<u>Budget</u>	<u>Actual</u>	<u>Encumbrance</u>	<u>Remaining</u>
PERSONNL - Personnel	540,011.00	167,623.51	0.00	372,387.49
EQUIPMNT - Equipment	0.00	0.00	10,167.82	(10,167.82)
SUPPLIES - Supplies	74,293.00	16.00	9,974.50	64,302.50
CONTRACT - Contractual	35,696.00	31.76	0.00	35,664.24
Total Key:	\$650,000.00	\$167,671.27	\$20,142.32	\$462,186.41

PATIENTS BY RACE	HISPANIC/ LATINO (a)	NOT HISPANIC/LATINO (b)	UNREPORTED/REFUSED TO REPORT (c)	TOTAL
1. Asian	5	59	0	64
2a. Native Hawaiian	2	13	0	15
3. Black/African American	20	314	0	334
4. American Indian/Alaska Native	7	8	0	15
5. White	498	289	0	787
6. More than one Race	9	51	0	60
7. Unreported/Refused to report	80	20	32	132
8. TOTAL PATIENTS (SUM LINES 1+2 + 3 TO 7)	621	754	32	1,407

**12 . PATIENTS BEST SERVED IN A LANGUAGE OTHER THAN ENGLISH
237**

Patients By Sexual Orientation	Number (a)
13. Lesbian or Gay	229
14. Straight (not lesbian or gay)	367
15. Bisexual	40
17. Don't know	49
18. Choose not to disclose	6
unknown	716
Total Patients (sum lines 13 to 18 + unknown)	1,407
Patients By Gender Identity	Number (a)
20. Male	461
21. Female	182
22. Transgender Male/Female-to-Male	2
23. Transgender Female/Male-to-Female	3
24. Other	49
25. Choose not to disclose	1
unknown	709
Total Patients (sum lines 20 to 25 + unknown)	1,407

Patient Characteristics

INCOME AS PERCENT OF POVERTY LEVEL		NUMBER OF PATIENTS (a)	
1. 100% AND BELOW		475	
2. 101% - 150%		179	
3. 151% - 200%		107	
4. Over 200%		228	
5. Unknown		418	
6. TOTAL (SUM LINES 1-5)		1,407	
Principal Third Party Medical Insurance Source		0-17 Years OLD (a)	18 and OLDER (b)
07. None/ Uninsured		27	670
08a. Regular Medicaid (Title XIX)		19	301
11. PRIVATE INSURANCE		4	386
TOTAL (SUM LINES 7 + 8 + 9)		50	1,357
CHARACTERISTICS - SPECIAL POPULATIONS		NUMBER OF PATIENTS -- (a)	
14. Migratory (330 grantees only)		3	
15. Seasonal (330 grantees only)		1	
16. TOTAL AGRICULTURAL WORKERS OR DEPENDENTS (ALL GRANTEES REPORT THIS)		4	
17. Homeless Shelter (330 grantees only)		1	
19. Doubling Up (330 grantees only)		1	
20. Street (330 grantees only)		2	
21. Other (330 grantees only)		1	
22. Unknown (330 grantees only)		1	
Unknown		6	
23. TOTAL HOMELESS (ALL GRANTEES REPORT THIS)		12	
26. Total Patients Served at a Health Center Located In or Immediately Accessible to a Public Housing Site (All Health Centers Report This Line)		4	

Staffing and Utilization

Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
1. Family Physicians		71	0	
3. Internists		1	0	
7. Other Specialty Physicians		87	0	
08. Total Physicians (Lines 1-7)		159	0	
9a. Nurse Practitioners		754	0	
9b. Physician Assistants		450	0	
10a. Total NP, PA, and CNMs (Lines 9a - 10)		1,204	0	
15. Total Medical (Lines 8 + 10a through 14)		1,363	0	1,227
34. Grand Total Lines (15+19+20+21+22+22d+23+29+29a+33)		1,363	0	1,227