

Community Health Council



Community Health Council Board Meeting Minutes

Date: Monday, December 10th, 2018

Time: 6:00 PM

Location: McCoy Building, 10th Floor Conference Room

Approved:

Recorded by: Rosalio (Lio) Espinoza

Attendance:

Board Members	Title	Y/N
Deborah Abney	Board Member	N
David Aguayo	Board Member	Y
Fabiola Arreola	Member-at-Large	Y
Sue Burns	Vice Chair	Y
Jon Cole	Member-at-Large	Y
Robyn Ellis	Board Member	Y
Iris Hodge	Board Member	Y
Tara Marshall	Chair	Y
Susana Mendoza	Board Member	Y
Pedro Sandoval Prieto	Secretary	Y
Wendy Shumway	Board Member	Y
Staff	Title	Y/N
Vanetta Abdellatif	Interim Health Department Co-Director	Y
Lucia Cabrejos	Interpreter, Passport to Languages	Y
Adrienne Daniels	ICS Deputy Director	Y
Fran Davison	Senior Management Auditor	Y
Rosalio Espinoza	Executive Specialist/Pharmacy	Y
Marty Grasmeder	ICS Medical Director	Y
Mark Lewis	Interim Business Services Director	Y
Ryan Linskey	Quality Project Manager	Y
Ritchie Longoria	Pharmacy and Lab Director	Y
Linda Niksich	Community Health Council Liaison	Y
Christine Palermo	Dental Program Manager	Y
Rosamaria Rosales	Dental Operation Supervisor	Y
Dawn Shatzel	Quality Director	Y
Tasha Wheat-Delancy	Primary Care Services Director	Y

Guests: Harold Odhiambo, Hannah Taube

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Action Items:

- Linda will bring back updated meeting ground rules, with suggested edits, next month.

Decisions:

- Approved the November 2018 Meeting Minutes

The meeting was called to order at 6:05pm by Chair, Tara Marshall.

The Meeting Ground Rules were presented by Board Member, Wendy Shumway.

Noted that quorum was met.

November 2018 Meeting Minutes Review

(See Document - November 2018 CHC Meeting Minutes)

No questions or comments were raised by CHC members.

Motion by Iris Hodge to approve the November 2018 Minutes.

Seconded by Susana Mendoza.

10 aye; 0 nay; 0 abstain

Motion carries

Licensing & Credentialing Report

(See Document - Credential Update 2018-12)

ICS Medical Director, Marty Grasmeder, presented to CHC board members the quarterly Licensing and Credentialing Report.

Staff Changes. Angela Amundson Nurse Practitioner is the Director of Nursing at Clackamas County Health Department and wants to do more direct patient care, hired 11/16/2018; Katie Au and Alyssa Colwill are both OBGYN Professors at OHSU and will be working at Mid County, both hired 10/02/2018; Shelly Dunlop started with the County as a CHW 8 years ago then transferred to HSC as a MA, she went back to school and is now a Physician Assistant, hired 11/16/2018; Steve Erwin, Dentist On-Call, hired 11/08/2018; Rian Johnson is a Nurse Practitioner and works at North Portland Clinic, hired 09/18/2018; Divneet Kaur is a Physician, she just finished residency in Wisconsin, speaks 3 languages, hired 09/27/2018; Janice Lee is a Physician, she finished her residency in Vancouver and will be working at Southeast Clinic and speaks Cantonese, hired 09/11/2018; Timothy Menza, is an Infectious Disease Specialist works for OHA and is going to work part time for MCHD, hired 11/16/2018; Todd Merendino, Director for Behavioral Health in Colorado State, was originally hired for Behavioral Health

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and Addictions but has recently turned down the position; Rochelle Paquette is a Nurse Practitioner who did her training at East County Clinic, hired 09/25/2018; Shayla Sorensen is a Dental Hygienist On-Call, hired 11/06/2018; Benjamin Smith is a Family Practice Physician, working on-call, hired 09/01/2018; Virginia Weeks is a Physician that just finished her fellowship at HIV Care in Seattle and is joining us full time at HSC which replaces Mike Macveigh, hired 09/11/2018; Matthew Wolpert is a Dentist On-Call, hired 09/18/2018; Keenan Yanit is an OBGYN Professor at OHSU and will be working at Mid County.

Future Staff, Meg O'reilly is an OBGYN physician who will be contracted, hire date 01/14/2019; DeAnn Dardis is a Dentist Hygienist who will be On-Call; There are two On-Call providers that will be working at the STD clinic, Heather Lorensen, Nurse Practitioner and Cassie Ryan-Mapolski, Physician Assistant who used to work at Rockwood and is now coming back. Both hired 11/16/2018.

Marty also reported that since September 2018, we have recredentialed 7 Primary Care providers. 5 Primary Care recredential applications and 22 Dental recredential applications have been submitted but not yet approved.

Questions and comments raised by CHC members:

- No questions

Monthly Budget Report

(See Document - Weekly billable Monthly Dashboard for October 2018)

Interim Director of Business Operations, Mark Lewis, presented the Monthly Budget Report. Mark reviewed the monthly dashboard through October and noted that Primary Care had an average of 523 billable visits with the target of 732. Dental had an average of 333 billable visits with the target of 365. School Health Centers had an average of 70 billable visits.

For Monthly Uninsured Visits; Primary Care had 15.1% with a target of 13.25%. Dental had 8.0% of uninsured visits with a target of 14.6%.

The Payer Mix for Primary Care; CareOregon came in at 58.6%, Self pay at 15.1%, DMAP/Medicaid at 12.9%, Medicare at 10%, Commercial at 2.0%.

Primary Care Member Assignments as of October 2018; 31,127 (84%) of our Primary Care patients are assigned to CareOregon. 6,451 (15.76%) of our Primary Care patients are assigned to Providence.

Mark also presented the FQHC Gross Collection Rate by Payer from March 2018 - October 2018. For Medicaid, we have collected 60% of Charges, CareOregon, 53% of charges and Commercial Insurance, 66%.

The end of October marks 33% of the fiscal year completed. So far, collectively, for the month of October, we show a loss of 903,000 but we are still at a surplus from Fiscal year to date.

Questions and comments raised by CHC members:

- Iris asked for clarification on the FQHC Gross Collection Rate by Payer Graph. Mark explained that we have Medicaid and CareOregon on this graph. As a FQHC, the state is entitled to pay FQHC rate per certain visits. Both Medicaid and CareOregon are Oregon Health Care payers. Therefore, we are entitled to additional revenue that is not simply the cost of sending out the visit charges.

Patient Satisfaction Survey Results Report

(See Documents - Primary Care Year to Year Comparison)

Quality Project Manager, Ryan Linskey presented to CHC board member's, the Patient Satisfaction Survey results for ICS. There were certain parameters that needed to be met in order for the patient to take the survey. The survey was done in 6 languages: English, Spanish, Russian, Somali, Arabic, and Cantonese. The patient needed to be 18 years of age or older and have had an appointment in the last 6 months. For Primary Care, 1325 surveys were collected. Ryan presented the results for each survey question in comparison to the National Standard.

There were questions that weren't included in the results, and those were open ended feedback questions. Survey participants were asked what mattered or was valued most to them in healthcare. The top three results were; they want caring and understanding staff, good communication, and staff that listened to them.

For Dental, the same survey parameters were used as in Primary Care. There are no national standards with which to compare the data. Ryan compared the data to 2017's survey results.

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Dental Program Manager, Christine Palermo, shared with CHC board members what Dental has done so far with the results. These results were presented to all Dental staff at all Dental Clinics. They asked staff what they thought they can do to improve these scores. The Dental staff was very engaging and focused on the most concerning results. Dental leadership took all suggestions and starting in January they plan to implement the staff's suggestions.

Questions and comments raised by CHC members:

- David asked, how the questions were created. Ryan explained that they chose the questions from the National College of American Pathologists (CAP) Survey. The chosen questions were placed on the survey word-for-word so that they had equal representation for comparison.
- Sue Burns, asked why some of the percentages have dropped from 2017 to 2018. Dawn explained that they are investigating those results and will report back.
- Robyn Ellis, asked if all 1325 collected surveys were completed surveys. Ryan clarified that they included even partial surveys. Robyn followed by asking if the surveys were administered over the phone. Ryan answered yes, and included that they were performed in all 6 languages. Robyn followed by asking if there is a different number of surveys for each year. Ryan explained that each year they have 25 surveys per provider as a requirement from the state. Robyn asked if the Quality Department has thought about making this survey in written format. Dawn explained that in the past they have done written surveys but the return rate is very low.
- Wendy asked why the question, "How often does your dental provider review your health history with you?" is included in the survey when it's mandatory that your health history is reviewed at each visit. Christine explained that the question is included in the survey to better understand if staff are reviewing the health history at every visit.
- David asked if there is a timeframe for when the providers will have a response to the feedback and if responses will be different year to year. Primary Care Director, Tasha Wheatt-Delancy, explained that there are different stakeholders to consider; the provider group, and front desk for example. Sometimes we need to revise the information with the advisory groups and with the management group. Throughout the year, clinic managers will share this information with all staff.

Break for 10 minutes...

Ground Rules Updating Activity

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(See Documents - Meeting Ground Rules Updating Activity)

CHC Liaison, Linda Niksich, started by saying Happy Birthday to Pedro.

Next, Linda lead the activity of updating the meeting ground rules. She started by suggesting to have the rule about cell phones only state, "Silence your cell phones", and no longer include, "or put them on vibrate".

The group agreed on changing "Stick to topic/task and refrain from personal shares" to "...and limit personal shares".

Robyn suggested to group/bundle the rules that are similar.

Linda suggested changing the name "Meeting Ground Rules" to "Meeting Agreements".

Sue suggested changing, "Adopt a learner's mindset", to, "Be willing to learn", and agreed on grouping similar rules.

Jon suggested ranking the rules/agreements in order of importance.

The group agreed to revamp the rule "Be free to speak minds without fear of reprisal", Linda will make the edits and bring the updated meeting ground rules back to next CHC meeting.

Vanetta explained how the dynamic has changed. At the time the rules were created, it made sense to create rules that were balanced across the board so that everyone could speak courageously without worrying about reprisal.

Sue suggested combining "Be free to speak minds without fear of reprisal" and "Be respectful when others are speaking", Linda then suggested an idea of wording the ground rule to "Be free to speak minds knowing that your opinions will be respected".

Iris suggested not removing, "without fear or reprisal".

Wendy suggested adding, "Feel free to practice self-care". Self-Care can be excusing yourself for any reason. Wendy made the point of having that piece in the agreements so that new people that attend the meeting know that it's ok to do that.

Pedro suggested, once the ground rules have been updated, if the ground rules could be translated to Spanish.

Linda will bring back grounds rules with edits, next month.

Motion deferred until finalized.

ICS/Strategic Plan Updates

ICS Director and Health Department Interim Co-Director, Vanetta Abdellatif, shared ICS updates with board members.

For **"Person Centered and Culturally Relevant"**; Vanetta addressed an action item from last month's meeting: whether we have a process that inadvertently would make clients who are undocumented easily searchable. Vanetta clarified that we do not ask for anyone's immigration status as a condition of receiving services. We use a "dummy" code for patients that do not provide a SSN (Social Security Number), for any reason. There are multiple reasons why someone may not provide their SSN. Theoretically, we could get a subpoena for everyone who has a dummy code or no dummy code.

For **"Quality and Safety"**; Vanetta referred to the email "Facilities message - Winter Season and Holiday Decorating". County facilities has a policy around inclusive seasonal and holiday decorations. Facilities sent out a communication to all county employees. In the email, it mentions they do not regulate holiday decor and they want to ensure a safe environment for everyone.

For **"Engaged, Expert, Diverse Workforce"**; In September 2017, the Employees of Color developed the Workforce Equity and Strategic Plan (WESP), which the Health Department continues to make progress on, with our departmental WESP.

We are in the middle of recruitment for the Health Department Director. On December 14th, over 30 community members, multco staff and HD staff will engage in interviews with candidates. The decision maker is Chair Kafoury. We anticipate a decision by February 2019.

For **"Fiscally Sound and Accountable"**; Starting January 1st, there will be a system change in the county. It is primarily impacting Business Services and Human Resources. The system is changing from SAP to Workday. There hasn't been a system change in over 20 years. The system has to do with contracting and how employees enter their time. Clinics won't see any major operational changes but it will impact how the clinics order supplies.

We are starting the budget development process for Fiscal Year 20, which starts July 1, 2019 and goes through June 30, 2020. The budget plan will be discussed with the CHC Board in February 2019. It will be a tight budget year as County general funds will be constrained. We don't know how much the constraint will be, but it's estimated at 3%.

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If we have meetings during inclement weather, make sure to visit the Health Department website for closure information.

Questions or comments raised by CHC members:

- Pedro asked if there is any new info on the new McCoy building. Vanetta informed the board members that the current McCoy building was sold. We'll start moving to the new building in April. Clinics will move in first and then administration will follow. CHC meetings will be moved to the new building, in the conference room, on the first floor.

Council Business

Quality Committee Update

- Iris informed the board members that the Quality Committee met on the 29th with Vanetta and Dawn. They finalized committee charter. They started discussions about quality improvement and the patient satisfaction survey. Linda will be sending homework regarding information on what activities the Quality Team is already doing and how data and feedback is collected and captured. Iris also extended the invitation to to all CHC board members to join the Quality Committee as there is one seat open.

No questions or comments were raised by CHC members.

Nominating Committee Update:

- Tara informed the board members that the Nominating Committee has not met since her last update.

No questions or comments were raised by CHC members.

Executive Committee Update:

- Sue informed the board members that the Executive Committee met on Nov. 26th and drafted the 12/10/2018 agenda. They are also working on a Code of Ethics/Conduct, specifically for the board members and will bring it to board for review in it's final proposed draft form.

No questions or comments were raised by CHC members.

Meeting Evaluation:

- The food and desserts were delicious.

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- Pedro thanked everyone for the birthday wishes.

Meeting Adjourned at 8:00pm.

Signed: _____

Pedro Sandoval Prieto

Date: _____

1-14-2019

Pedro Sandoval Prieto, Secretary

Community Health Council
Public Meeting Agenda

Monday, December 10, 2018

6:00-8:00 pm

McCoy Building: 426 SW Harvey Milk
(formerly Stark) St., 10th Floor



Integrated Clinical Services Mission: "Providing services that improve health and wellness for individuals, families, and our communities."

**Our Meeting Process Focuses on
the Governance of Community Health Centers**

- Use Group Agreements (in English and Spanish) located on name tents
- Meetings are open to the public
- Guests are welcome to observe**
- Use timekeeper to focus on agenda
- Use note cards for questions/comments outside of agenda items and for guest questions

Council Members

"D"eb Abney; Dave Aguayo; Fabiola Arreola (Member-at-Large); Sue Burns (Vice-Chair); Jon Cole (Member-at-Large); Robyn Ellis; Iris Hodge; Tara Marshall (Chair); Susana Mendoza; Pedro Sandoval Prieto (Secretary); Wendy Shumway

Item	Process/Who	Time	Desired Outcome
Call to Order/Welcome Ice-Breaker Introductions	<ul style="list-style-type: none">• Chair, Tara Marshall• Ice-Breaker and Introductions	6:00-6:10 (10 min)	All attendees introduce themselves Review processes
Minutes VOTE REQUIRED	<ul style="list-style-type: none">• Review and approve November Minutes	6:10-6:15 (5 min)	Council votes to approve and Secretary signs
Licensing & Credentialing Report	<ul style="list-style-type: none">• ICS Medical Director, Marty Grasmeder	6:15-6:25 (10 min)	Council receives report
Monthly Budget Report	<ul style="list-style-type: none">• Interim Director of Business Operations, Mark Lewis	6:25-6:35 (10 min)	Council receives report
Patient Satisfaction Survey Results Report	<ul style="list-style-type: none">• Quality Project Manager, Ryan Linskey	6:35-7:05 (30 min)	Council receives report

BREAK	<ul style="list-style-type: none"> All 	7:05-7:15 (10 min)	Meet and greet
Ground Rules Updating Activity VOTE REQUIRED	<ul style="list-style-type: none"> CHC Liaison, Linda Niksich 	7:15-7:30 (15 min)	Finalize updated Meeting Ground Rules and approve
ICS/Strategic Plan Updates	<ul style="list-style-type: none"> ICS Director and Co-Interim HD Director, Vanetta Abdellatif 	7:30-7:45 (15 min)	Council receives updates
<u>Council Business</u> Committee Updates	<ul style="list-style-type: none"> Chair, Tara Marshall 	7:45-7:55 (10 min)	Council receives updates
Meeting Evaluation	<ul style="list-style-type: none"> Chair, Tara Marshall 	7:55-8:00 (5 min)	Discuss what went well and what needs improvement
Adjourn Meeting	<ul style="list-style-type: none"> Chair, Tara Marshall 	8:00	Goodnight!

Update:
Licensing and Credentialing
December 2018

Dr. Marty Grasmeder,
ICS Medical Director

Staff Changes

Name	Clinic	Provider	Hire Date	Specialty
Angela Amundson	Mid County	FNP	11/16/2018	
Katie Au	Mid County	MD	10/2/2018	Contracted OB
Alyssa Colwill	Mid County	MD	10/2/2018	Contracted OB
Shelly Dunlop	North Portland	PA	11/16/2018	
Steve Erwin	On Call	DMD	11/08/2018	Dentist
Rian Johnson	Northeast	FNP	9/18/2018	FNP
Divneet Kaur	Mid County	MD	9/27/2018	MD
Janice Lee	Southeast	MD	9/11/2018	MD
Timothy Menza	Health Services	MD	11/16/2018	Pediatrics
Todd Merendino	Administration		11/16/2018	BehaviorHealth Mgr
Rochelle Paquette	East County	FNP	9/25/2018	Family Practice

Staff Changes, continued

Name	Clinic	Provider	Hire Date	Specialty
Shayla Sorensen	On-Call	RDH	11/06/2018	Dental Hygienist
Benjamin Smith	On-Call	MD	9/1/2018	Family Practice
Virginia Weeks	Health Services	MD	9/11/2018	Family Medicine
Matthew Wolpert	On Call	DMD	09/18/2018	Dentist
Keenan Yanit	Mid County	MD	TBD	Contracted OB

Future Staff

[illegible]

ReCredential Approval since September 2018

- Primary Care = 7
- School Based = 0
- Dental = 0

Recredential Applications submitted (not yet approved) since September 2018

- Primary Care = 5
- Dental = 22

Multnomah County - Federal Qualified Health Center

Monthly Dashboard

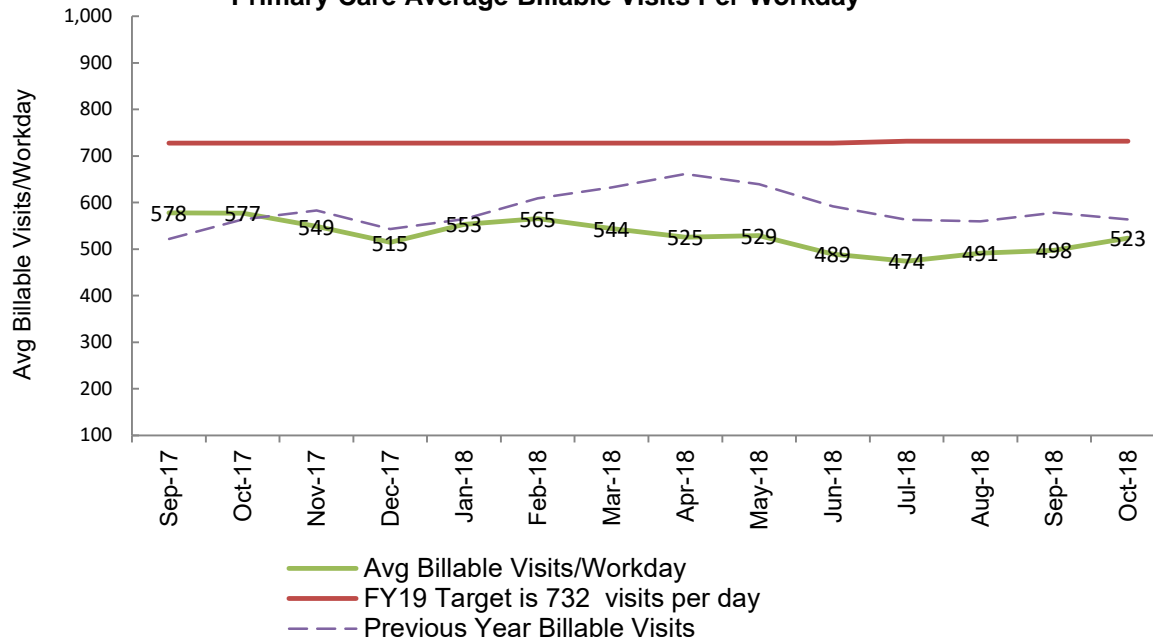
October 2018

Prepared by: [Larry Mingo](#)

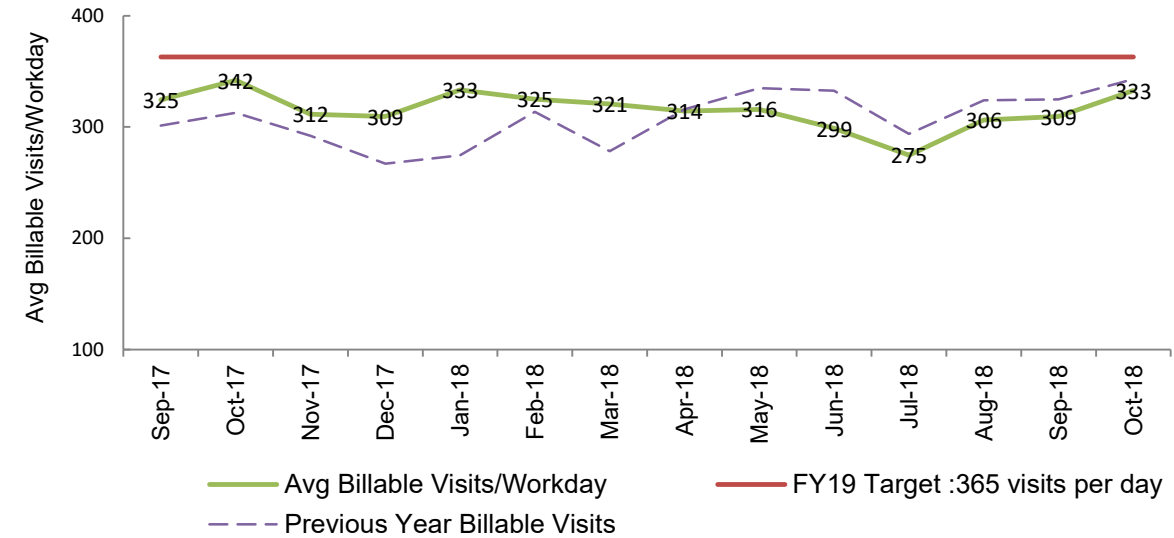


FQHC Weekly Billable Visits Per Department

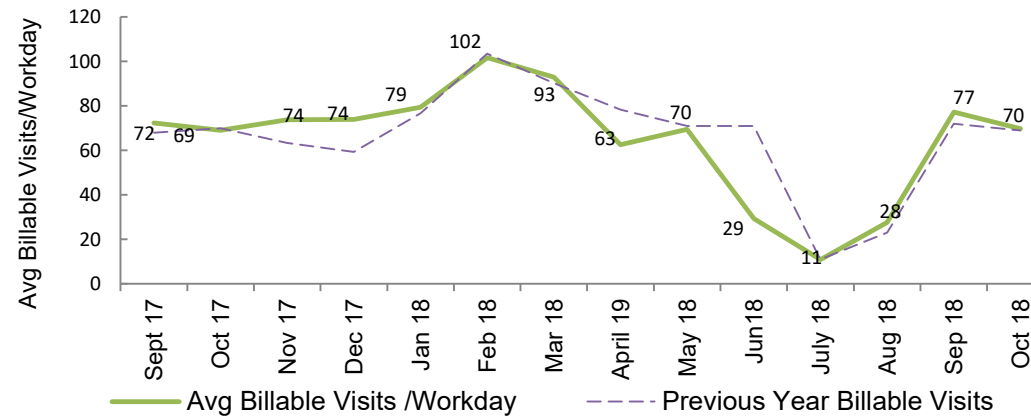
Primary Care Average Billable Visits Per Workday



Dental Average Billable Visits Per Workday



School-Based Health Center Average Billable Visits Per Workday

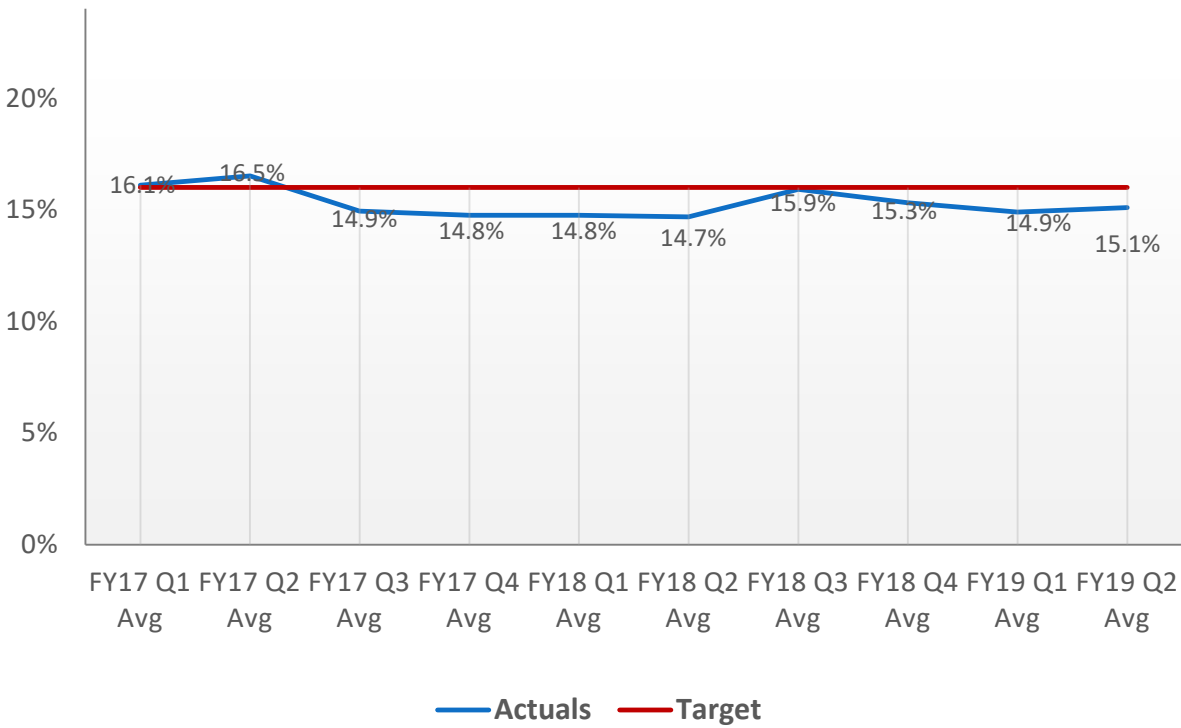


* SBHC clinics are closed during the month July except Parkrose SBHC

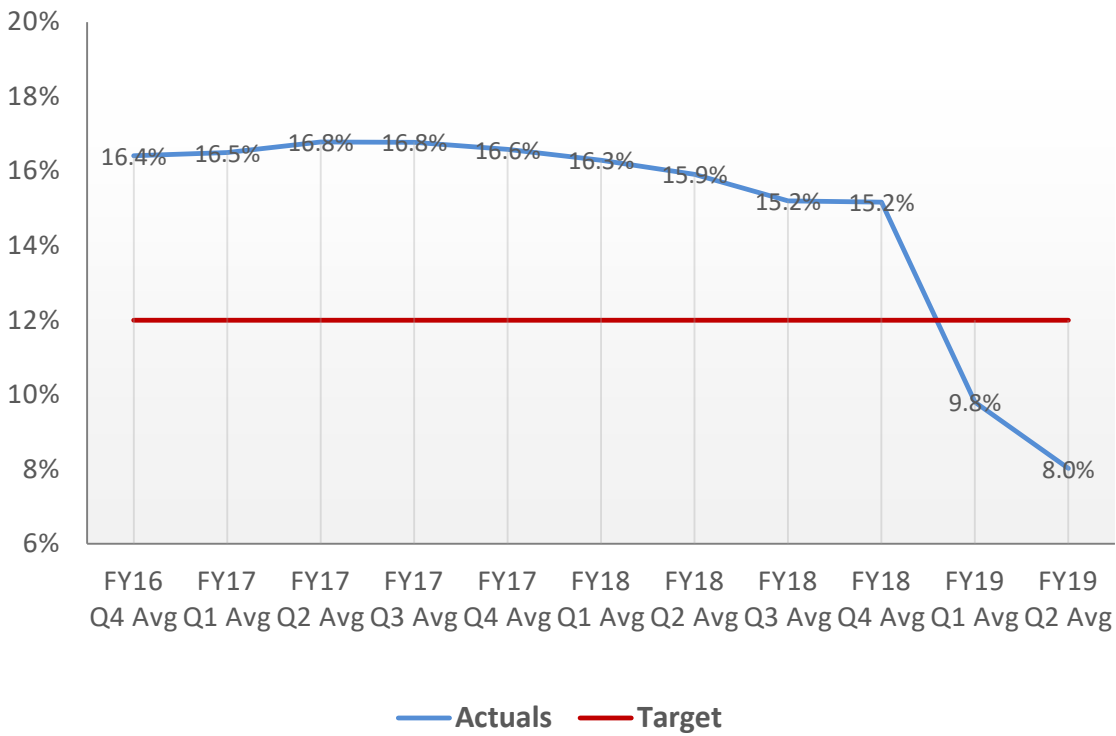
Notes: Primary Care and Dental visit counts are based on an average of days worked.
School Based Health Clinic visit counts are based on average days clinics are open and school is in session.

Monthly Percentage of Uninsured Visits for FQHC Centers

Percentage of Uninsured Visits in Primary Care



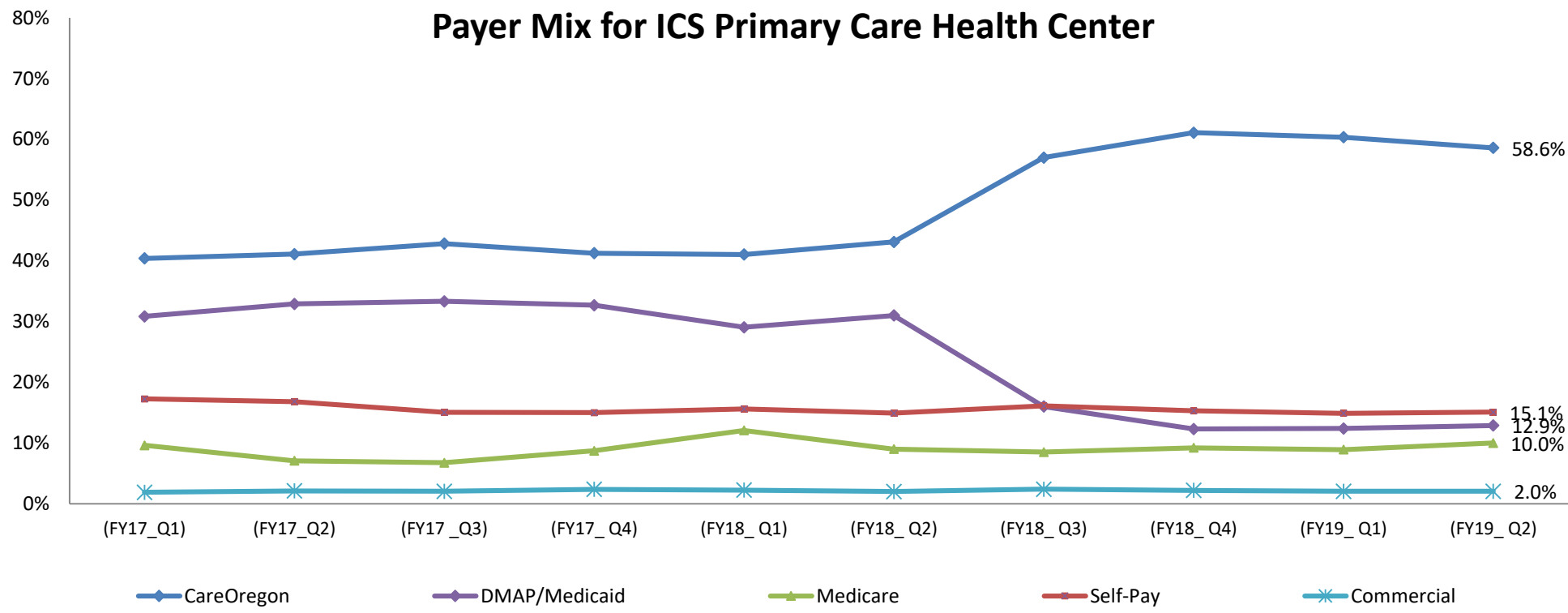
Percentage of Uninsured Visits in ICS Dental



*FY19 –Quarter#2 in progress (only includes Oct 18 Data)

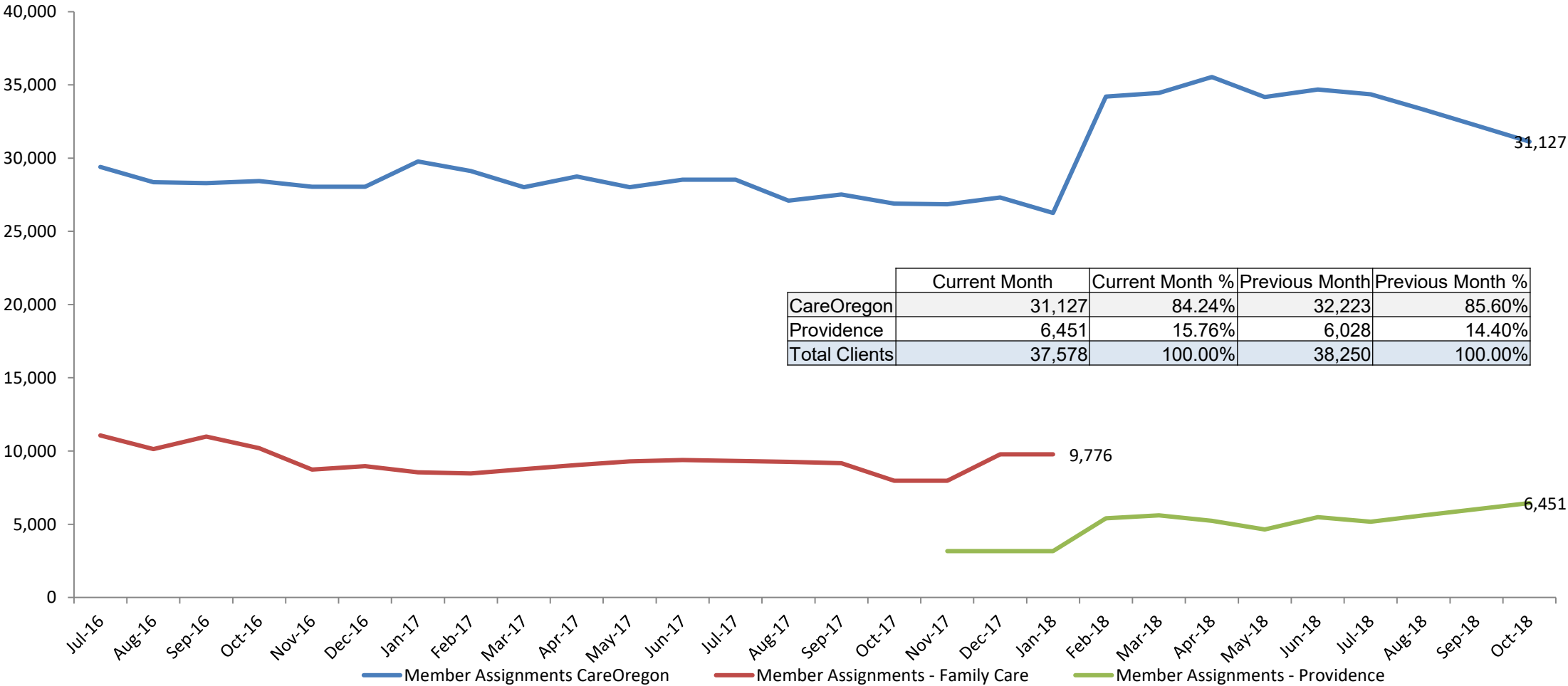
Comments:
Primary Care % of Uninsured Visits for FY18: 16%; for FY19: 13.25%
Dental % of Uninsured Visits for FY18: 12%; for FY19: 14.85%

FQHC Monthly Percentage of Visits by Payer for ICS
Primary Care Health Centers



Notes: Payer Mix for Primary Care Health Service Center shows the percentage of patient visits per payer and per Quarter

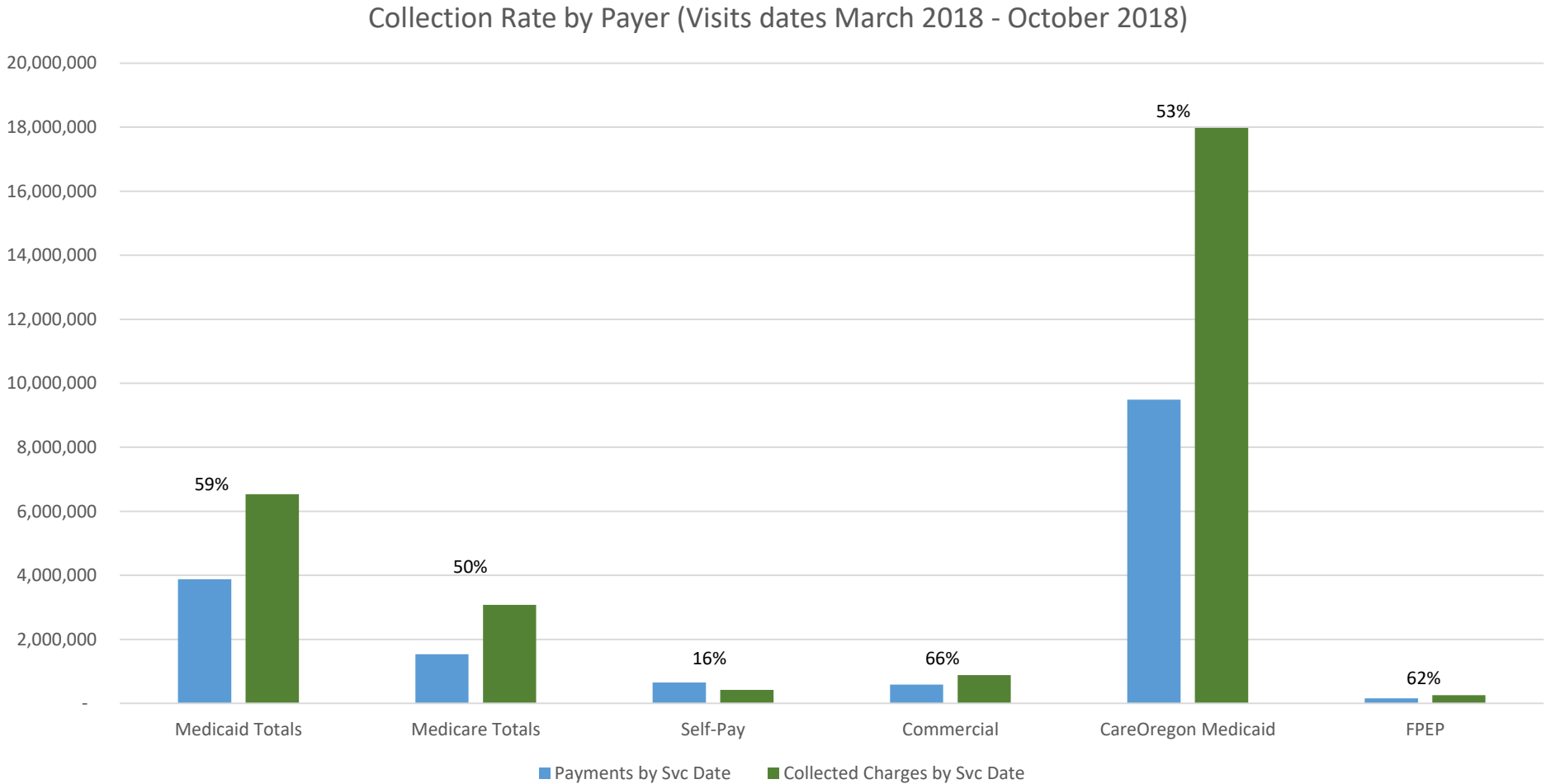
Primary Care Member Assignments



FQHC Gross Collection Rate by Payer

March 2018 – October 2018

	Medicaid Totals:	Medicare Totals:	Self-Pay	Commercial	CareOregon Medicaid	FPEP
Payments by Svc Date	3,877,718	1,532,292	654,320	585,538	9,486,355	158,616
Collected Charges by Svc Date	6,538,451	3,073,872	4,233,985	884,140	17,976,244	257,582
Gross Collection Rate %	59%	50%	15%	66%	53%	62%





Multnomah County Health Department
Federally Qualified Health Center Financial Statement
For Period Ending October 2018

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October Target:

33%

	Revised Budget	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18
Revenue							
Behavioral Health	\$ 5,394,614	\$ 395,899	\$ 395,357	\$ 386,929	\$ 392,315	\$ -	\$ -
General Fund	\$ 10,497,645	\$ 880,918	\$ 882,684	\$ 992,021	\$ 924,144	\$ -	\$ -
Grants - BPHC	\$ 9,967,847	\$ -	\$ -	\$ 1,710,117	\$ 781,367	\$ -	\$ -
Grants - Incentives	\$ 7,326,480	\$ -	\$ 1,068,109	\$ 2,340,693	\$ 498,640	\$ -	\$ -
Grants - All Other	\$ 9,415,223	\$ 384,509	\$ 370,555	\$ 862,642	\$ 1,015,074	\$ -	\$ -
Health Center Fees	\$ 96,332,757	\$ 7,807,405	\$ 9,042,004	\$ 8,052,219	\$ 7,717,611	\$ -	\$ -
Self Pay Client Fees	\$ 1,127,294	\$ 86,553	\$ 100,907	\$ 76,035	\$ 105,026	\$ -	\$ -
Total	\$ 140,061,860	\$ 9,555,284	\$ 11,859,615	\$ 14,420,656	\$ 11,434,177	\$ -	\$ -
Expense							
Personnel	\$ 94,257,953	\$ 7,027,910	\$ 7,335,971	\$ 7,174,182	\$ 8,172,851	\$ -	\$ -
Contracts	\$ 4,952,788	\$ 234,197	\$ 178,587	\$ 897,067	\$ 217,171	\$ -	\$ -
Materials and Services	\$ 13,973,151	\$ 1,065,843	\$ 1,191,908	\$ 1,327,446	\$ 1,512,088	\$ -	\$ -
Internal Services	\$ 26,382,068	\$ 1,167,854	\$ 2,089,623	\$ 2,117,172	\$ 2,425,022	\$ -	\$ -
Capital Outlay	\$ 495,900	\$ -	\$ -	\$ 17,730	\$ 10,116	\$ -	\$ -
Total	\$ 140,061,860	\$ 9,495,803	\$ 10,796,090	\$ 11,533,597	\$ 12,337,248	\$ -	\$ -
Surplus/(Deficit)	\$ -	\$ 59,481	\$ 1,063,526	\$ 2,887,058	\$ (903,071)	\$ -	\$ -

Note: Financial Statement for Fiscal Year 2019 (July 2018 - June 2019). Columns are blank/zero until the month is closed



	Revised Budget	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Year to Date Total	% YTD
Revenue									
Behavioral Health	\$ 5,394,614	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,570,500	29%
General Fund	\$ 10,497,645	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,679,767	35%
Grants - BPHC	\$ 9,967,847	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,491,484	25%
Grants - Incentives	\$ 7,326,480	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,907,441	53%
Grants - All Other	\$ 9,415,223	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,632,780	28%
Health Center Fees	\$ 96,332,757	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 32,619,239	34%
Self Pay Client Fees	\$ 1,127,294	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 368,520	33%
Total	\$ 140,061,860	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 47,269,732	34%
Expense									
Personnel	\$ 94,257,953	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 29,710,913	32%
Contracts	\$ 4,952,788	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,527,022	31%
Materials and Services	\$ 13,973,151	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,097,285	36%
Internal Services	\$ 26,382,068	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,799,671	30%
Capital Outlay	\$ 495,900	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27,846	6%
Total	\$ 140,061,860	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 44,162,738	32%
Surplus/(Deficit)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,106,994	

Note: Financial Statement for Fiscal Year 2019 (July 2018 - June 2019). Columns are blank/zero until the month is closed



Primary Care Year To Year Comparison

Green: Meets Target (80%-100%)

Yellow: Watch (70%-79%)

Red: Needs Improvement (0%-69%)

Q3. & Q4 separated out in 2018.

Survey Parameters:

- Languages: English, Spanish, Russian, Somali, Arabic, Cantonese
- Ages: 18+
- Had an appt in the last 6 months

Collected: 1,325 Primary Care Surveys

	Year			National Standard
	2016	2017	2018	
1. In the last 6 months, when you made an appointment for a check-up or routine care with this provider, how often did you get an appointment as soon as you needed?			65%	73%
2. In the last 6 months, when you contacted this provider's office during regular office hours, how often did you get an answer to your medical questions within 24 hours?	61%	65%	65%	60%
3. In the last 6 months, how often did this provider listen carefully to you?	91%	92%	86%	86%
4. In the last 6 months, how often did this provider show respect for what you had to say?	91%	92%	89%	89%
5. In the last 6 months, how often did this provider spend enough time with you?			82%	83%
6. In the last 6 months, how often did this provider seem to know the important information about your medical history?		89%	84%	78%
7. How often does your provider seem informed and up-to-date about care you received from specialists?	79%	81%	76%	62%
8. In the last 6 months, when this provider ordered a blood test, x-ray, or other test for you, how often did someone from this provider's office follow up to give you those results?	75%	77%	70%	75%
10. How often does your health care team explain things in a way that is easy to understand?	80%	92%	84%	85%
11. In the last 6 months, how often did the provider's office talk to you about the				

Primary Care Year To Year Comparison

Green: Meets Target (80%-100%)

Yellow: Watch (70%-79%)

Red: Needs Improvement (0%-69%)

Q3. & Q4 separated out in 2018.

Survey Parameters:

- Languages: English, Spanish, Russian, Somali, Arabic, Cantonese
- Ages: 18+
- Had an appt in the last 6 months

Collected: 1,325 Primary Care Surveys

	Year			National Standard
	2016	2017	2018	
How often did someone from this provider's office follow up to give you those results?				
10. How often does your health care team explain things in a way that is easy to understand?	80%	92%	84%	85%
11. In the last 6 months, how often did the provider's office talk to you about the prescription medicines you were taking?			79%	66%
12. In the last 6 months, did someone from this provider's office ask you if there are things that make it hard for you to take care of your health?			63%	43%
13. In the last 6 months, how often did your health care team show concern about your emotional well-being and how you were feeling?		88%	76%	
15. In the last 6 months, how often were front desk staff at this provider's office as helpful as you thought they should be?	79%	85%	77%	73%
16. In the last 6 months, how often did front desk staff at this provider's office treat you with courtesy and respect?		91%	83%	85%
17. When you visit the clinic, how often are you treated in a way that respects your cultural needs, language needs and /or individual needs?		87%	88%	
18. In the last 6 months, how often did the health care team consider or include your cultural practices as part of your health goals?		66%	66%	67%
I would recommend my health care team to family and friends who need health care.		88%	77%	

Dental Year To Year Comparison

Clinic
Combined

Green: Meets Target (80%-100%)

Yellow: Watch (70%-79%)

Red: Needs Improvement (0%-69%)

Survey Parameters:

- Languages: English, Spanish, Russian, Somali, Arabic, Cantonese
- Ages: 18+
- Had an appt in the last 6 months

Collected: 428 Dental Surveys

	Year			
	2015	2016	2017	2018
Q1. How often can you get an appointment when you need one?	53%	52%	62%	63%
Q2. When you call with a question, how often do you hear back from someone within two business days?	62%	85%	71%	81%
Q3. How often does your Dental provider review your health history with you?	71%	79%	74%	74%
Q4. How often does your Dental provider explain any exams or procedures before starting?	82%	88%	87%	85%
Q5. How often does your Dental provider use words you do NOT understand?	55%	74%	65%	77%
Q6. How often does your provider listen to you? (provider could be dentist or hygienist)	80%	88%	85%	88%
Q7. Do you feel your Dental provider cares about you as a person?	74%	96%	84%	82%
Q8. During your appointment, how often did clinic staff treat you with courtesy and respect?		89%	87%	88%
Q9. Would you recommend this clinic to your friends and family? (methodology changed in 2017 to yes, no instead of likert scale)		78%	91%	79%
Q10. The care you get at our Dental Clinic?			68%	68%

Dental Year To Year Comparison

Clinic
Combined

Green: Meets Target (80%-100%)

Yellow: Watch (70%-79%)

Red: Needs Improvement (0%-69%)

Survey Parameters:

- Languages: English, Spanish, Russian, Somali, Arabic, Cantonese
- Ages: 18+
- Had an appt in the last 6 months

Collected: 428 Dental Surveys

	Year			
	2015	2016	2017	2018
Q4. How often does your Dental provider explain any exams or procedures before starting?	82%	88%	87%	85%
Q5. How often does your Dental provider use words you do NOT understand?	55%	74%	65%	77%
Q6. How often does your provider listen to you? (provider could be dentist or hygienist)	80%	88%	85%	88%
Q7. Do you feel your Dental provider cares about you as a person?	74%	96%	84%	82%
Q8. During your appointment, how often did clinic staff treat you with courtesy and respect?		89%	87%	88%
Q9. Would you recommend this clinic to your friends and family? (methodology changed in 2017 to yes, no instead of likert scale)		78%	91%	79%
Q10. The care you get at our Dental Clinic?			68%	68%
Q11. Your experiences with the front desk staff at our Dental Clinic?			70%	74%
Q12. Are you satisfied w/ the care you received from your dental assistant?			81%	80%
Q13. The cleanliness of the clinic?			88%	85%

Meeting Ground Rules

Updating Activity



Best Practices/Suggestions for Meeting Agreements

- *Co-create the rules of engagement (or etiquette); they should clearly set the tone for professional and courteous meetings*
- *Put the interest of the Health Center above any personal or other business interest*
- *Maintain confidentiality of board information*
- *Exercise common courtesy, kindness, and respect*
- *Use Time Wisely; it shows that everyone and their time are valuable*
- *Review information and data provided to the board and make informed decisions*
- *Exercise reasonable business judgment in the conduct of board business*
- *Attend board meetings regularly and participate actively*
- *Parking Lot; "Thank you for that point, Mary. However, it goes beyond the purpose of this meeting. Let me write down that item in the 'parking lot' and I will include it in the meeting notes that I will*

send out by email so we can explore that point at the right time.”

- *Be mindful of the objective and outcome for each agenda item and don't stray from them*
- *Don't dominate the conversation; make a point of asking others for their ideas; be public about it, “We appreciate your contributions, but now we need input from others before making a decision.”*
- *Ban technology; don't just put your phone on vibrate, put it away for the entire meeting*

Meeting Ground Rules

Updating Activity



- Start and end meetings on time
- Raise your hand to speak
- Silence cell phones or put them on vibrate
- Review meeting materials before each meeting
- Share time so that all can participate
- Be free to speak minds without fear of reprisal
- Be respectful when others are speaking
- Use the note cards for additional questions
- Adopt a learner's mindset or "Be willing to learn"
- Work toward problem-solving and shared understanding
- Ask questions
- Stick to topic/task and refrain from personal shares

