community health center board
Multnomah County

Health Center Mission: Bringing services to individuals, families, and communities that improve health and wellness while advancing health equity and eliminating health disparities.

Board Members:

Tamia Deary – Chair

Darrell Wade- Treasurer

Kerry Hoeschen – Secretary

Brandi Velasquez – Member-at-Large

Susana Mendoza- Member-at-Large

Alina Stircu – Board Member

Harold Odhiambo - Board Member

Darnell "DJ" Rhodes - Executive Director (Ex Officio)

Board Members Excused/Absent:

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
Call to Order / Welcome Tamia Deary, CHCB Chair	Meeting begins at 6:07 PM We <u>do have a quorum</u> with **6** members present. Harold arrived at 6:17pm At this point in the meeting all **7** members were present.			
Minutes Review - VOTE REQUIRED February 12, 2024 Public Meeting Minutes	Tamia requested the following edits: On page 1 under review of the minutes, it says the board meeting took place in person twice. Remove duplication On page 3 at the end of the question that Susana asked, it said our vacancy rate was good at 6% but I think it should say vacant rate	*Motion to approve Kerry Public meeting minutes as amended: Second: Kerry* Yays: 6 Nays: 0 Abstain: 0 **Decision:** **Approved**	CHCB Liaison to review previous minutes and make corrections	
AGN.10.03 ICS Fee Policy - VOTE REQUIRED	CHC Services Fee Policy	*Motion to approve*		

| Brieshon D'Agostini Quality and Compliance Officer | Establishes the sliding fee discount program for the Health Center and maintains HRSA compliance

Outlines our entire programming on how we administer our HRSA mandate sliding fee discounts including how it is applied. It does not outline our base fee schedule which is part of our finance system

We will be doing a broader review later this year. These are minor changes - including approver and contact names and titles, updating/clarifying language to align with other policies, aligning COVID vaccines charges with flu vaccine charges, removed reference to out of scope program

These changes were reviewed last month at the CHCB Quality Committee meeting prior to being brought here tonight

Questions/Comments:
What does the acronym MCFH stand for (Suzy) Maternal Child and Family Health What does it mean that there is a change in the language? Can you give us an example (Suzy) To clarify, when we say the language being changed, we are talking about the wording of the policy. For example, change 'Integrated Clinical Services' to 'Multnomah County Health Center' What changes to language for Ryan White fees are changing (Bee) There are redline changes in the board book | ***AGN.10.03 ICS Fee Policy As Presented: Suzy***
Second: Bee
Yays: 7
Nays: 0
Abstain: 0
Decision:
Approved | | |
| **Q4 Pt Experience Surveys** | Review of overall trends took place

Overall satisfaction is improving over time Overall satisfaction by service line shows all our service lines | | | |

Linda Niksich, Program Specialist Senior, Quality Team	right around the benchmarks
	• Appointment wait by service line shows just below the national benchmark across service lines (the time between requesting appointment and date of the appointment)
	• Improvements and upward trends over time took place
	• We have seen some disparities amongst our Cantonese and Russian speakers but some improvements of 10% or more in Q4 from Q3
	
	Questions/Comments:
	
	• What is it that we need in order to meet the national benchmarks (Suzy)
	   ○ We are actively working on strategies to improve our scores
	• Can you clarify more on what the national benchmark is (Suzy)
	   ○ Crossroads does our surveys as well as many other FQHC's surveys. They use the results to compare our scores with other FQHCs and to determine the national benchmark
	• How are these questions determined? How are we determining that Russian speakers are less satisfied with provider time spent (Harold)
	   ○ Everyone that gets asked these questions get asked the same questions regardless of demographic
	   ○ Linda looks at responses and compares how different demographics answer each question			

Q4 Incidents & Complaints	Review of patient incidents and complaints took place			

Kimmy Hicks, Project Manager	Incidents:
	● Total of 38 incidents that primarily happened in Primary Care
	● Types of incidents - leading 3
	  ○ Clinical care continues to be the leading category for these types of incidents
	  ○ Near miss
	  ○ Suicide attempts
	
	Patients complaints:
	● Total of 48
	● Type of complaints - top 3
	  ○ Scheduling appts
	  ○ Customer service
	  ○ Appointment cancellation
	
	Questions/Comments:
	● Have we gone away from providing context for the number of complaints based on how many patients are being seen at each location? (Tamia)
	  ○ We can add in how many patients are seen at each location moving forward			

BREAK	**10 minute break from 6:58 pm to 7:08 pm**			
FY25 Health Center/ICS Budget Approval - **VOTE REQUIRED** Jeff Perry, Chief Financial Officer	Agenda: ● Budget process/timeline overview ● FQHC Total Budget ● Budgets by Program ● Q&A	*Motion to approve FY25 Health Center/ICS Budget As Presented: Darrell Second: Kerry*		

	We did not make any big changes from FY 24 to FY 25 except for a bigger emphasis on value based care
	
	Primary Care FY25 Budget 68.1 million
	● Primary Care Key Performance Indicators (high level metrics)
	   ○ FTE 307.9
	   ○ Visits 161,587
	   ○ Visit/Day 15
	
	Dental FY25 Budget 32.6 million
	● Dental Key Performance Indicators
	   ○ FTE 120.1
	   ○ Visits 75,-59
	   ○ Dentists 19
	   ○ Hygienists 12.8
	
	Questions/Comments:
	● Where is the growth in revenue coming from (Tamia)
	   ○ Growth is from visit counts
	● How is our revenue increasing if our FTE is still about the same (Tamia)
	   ○ We have been working on improving the utilization of the dental schedule to fill it to 100%. Due to performance improvement, we are now filling at above 100%. Still have a high no show rate but have a drive for improved efficiency. We also moved our
		Yays: 7
		Nays: 0
		Abstain: 0
		Decision:
		Approved		

	dentists to 2 chairs every day which came out of the recent dentist labor agreement
	
	Pharmacy FY25 Budget 43.7 million
	• Growth driven by prescription value
	  ○ FTE 62.7
	  ○ RX 410,00
	  ○ Capture Rate 58% (related to how many of our own internal patients come through and use Primary Care services and pharmacies too)
	
	Student Health Centers FY25 Budget 9.3 million
	• FTE 32.8
	• Visits 16,339
	
	Administrative & Support FY25 Budget 28.7 million
	
	Quality & Compliance FY25 Budget 5.3 million
	
	HIV Clinic FY25 Budget 8.5 million
	
	Lab Services FY25 Budget 2.5
	• The dip from FY23- FY24 is due to outsourcing our invoicing			

Monthly Financial Reporting Package Jeff Perry, Chief Financial Officer	As of right now: • Dental still shows a loss for the year • Pharmacy is showing a gain • Primary Care is showing a gain			

	● Student Health Centers is breaking even
	● HIV remains the same and breaking even for the year
	
	Questions/Comments:
	
	● Harold expressed concern about billable visits. The one for Primary Care - concerned about the target billable and what is actually there. Not even getting to half of the target visits. What is happening that we are not getting close to the target?
	    ○ Jeff stated as we look at the targets they were based on budgets. We wanted to get to a number that the org was able to obtain. We are not actually losing revenue though - as the APM rosters grow our revenue will also grow. Patients are still coming in and getting service
	● Harold- is that an annual target?
	    ○ Yes it is an annual target and the targets will be lower next year			

Committee Updates Finance Committee: Darrell Wade, Finance Chair Quality Committee: Tamia Deary, Quality Chair Executive Committee: Tamia Deary, Board Chair	Finance Per Darrell, the Finance committee met this month and Jeff gave monthly updates on the FY25 budget. Currently preparing for the budget presentation to the county commissioners - May 15th or 16th is the tentative date. We will confirm and follow back up with the date and time Quality/Exec Committee Per Tamia, the UDS report was turned in late. Met with staff and got a thorough explanation on what went wrong and how we can avoid this in the future. Next year we will work on better systems to make sure this doesn't happen again such as having a practice report. Also talked about the upcoming OSV on March 26th to 28th. The board is scheduled to interview on March 27th at 12pm. If board	Provide the full copy of the OSV agenda to Tamia once it is available Send board members date and time of budget presentation for Board of County Commissioners	Brieshon/Jacqueline/Alex CHCB Liaison	

	members have questions please reach out to Tamia or DJ Tamia requested a full copy of the OSV agenda when it is available Note: Executive director updates will take place in the closed Executive session Executive session began at 8:08pm	***Motion to go into executive session: Susana Second: Darrell*** Yays: 7 Nays: 0 Abstain: 0 **Decision:** **Approved**		
Executive Director's Strategic Updates Darnell "DJ" Rhodes Executive Director	Executive director updates took place in the closed Executive session			
Meeting Adjourns	Meeting adjourns 9:20 PM			Next public meeting scheduled on April 8, 2024

Signed:_____ Date:_____

     Kerry Hoeschen, Secretary

Signed:_____ Date:_____

     Tamia Deary, Board Chair

Minutes approved,at the April 08,2024 Public Meeting

Scribe:
Name: Shawna Williams // Email: shawna.williams@multco.us