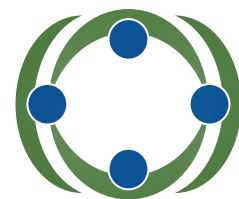




# Public Meeting

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**August 2024**



**community health  
center board**

*Multnomah County*

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July 08, 2024

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# AGENDA



**community health  
center board**

*Multnomah County*



# Public Meeting Agenda

## August 12, 2024

### 6:00-7:50 PM

### Virtual, ZOOM

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

**CHCB Board Members Present:**

**Tamia Deary** – Chair

**Brandi Velasquez** – Member-at-Large

**Alina Stircu** – Board Member

**Darrell Wade**- Treasurer

**Susana Mendoza**- Member-at-Large

**Harold Odhiambo** - Board Member

**Kerry Hoeschen** – Secretary

**Jenna Green - Interim Executive Director (Ex Officio)**

- Meetings are open to the public
- There is no public comment period
- Guests are welcome to observe/listen
- All guests will be muted upon entering the Zoom

Please email questions/comments to **the CHCB Liaison at [CHCB.Liaison@multco.us](mailto:CHCB.Liaison@multco.us)**. Responses will be addressed within 48 hours after the meeting

Time	Topic/Presenter	Process/Desired Outcome
6:00-6:05 (5 min)	<b>Call to Order / Welcome</b> <i>Tamia Deary, CHCB Chair</i>	
6:05-6:10 (5 min)	<b>Minutes Review - VOTE REQUIRED</b> <a href="#">July 8, 2024 Public Meeting Minutes</a>	Board reviews and votes
6:10-6:15 (5 min)	<b>HRSA Health Center Program Budget Period Renewal *Vote Required</b> <i>HD Grants Team</i>	Board reviews and votes
6:15-6:20 (5 min)	<b>Roots and Wings Grant Renewal *Vote Required</b> <i>Jenna Green, Interim ICS Director</i>	Board reviews and votes
6:20-6:35 (15 min)	<b>New Board Members *Vote Required</b> <i>Tamia Deary, CHCB Chair</i>	Board reviews and votes
6:35-6:45 (10 min)	<b>Annual Needs Assessment review</b> <i>HD Grants Team</i>	Board reviews
6:45-7:00 (15 min)	<b>Quarterly Vacancy Report</b> <i>Erin Murphy, Deputy Director HD Human Resources</i>	Board reviews
7:00-7:05 (5 min)	<b>Follow up from 7-8 Public Meeting:</b> <ul style="list-style-type: none"> <li>■ Retention rates per month of how many CareOregon members are staying and leaving each month</li> </ul> <i>Anirudh Padmala, Health Center Chief Information Officer</i>	Board reviews
7:05-7:10 (5 min)	<b>Break</b>	



<p><b>7:10-7:15</b> (5 min)</p>	<p><b>Committee Updates</b> Quality Committee: Tamia Deary, Quality Chair Executive Committee: Tamia Deary, Board Chair Nominating Committee: Tamia Deary, Board Chair</p>	<p>Board reviews</p>
<p><b>7:15 - 7:20</b> (5 min)</p>	<p><b>Department Updates/Strategic Updates</b></p> <ul style="list-style-type: none"><li>○ Interim Executive Director</li><li>○ Operations</li><li>○ Clinical</li><li>○ Quality</li></ul>	<p>Board reviews</p>
<p><b>7:20-7:50</b> (30 min)</p>	<p><b>Board Discussion (<i>Closed Executive Session</i>)</b> <i>Tamia Deary, CHCB Chair</i></p>	<p>Board receives updates in an Executive session and has discussion</p>
<p><b>7:50pm</b></p>	<p><b>Meeting Adjourns</b></p>	<p>Thank you for your participation</p>



# PUBLIC MEETING MINUTES



**community health  
center board**

*Multnomah County*



# CHCB Public Meeting Minutes

## July 8th, 2024

### 6:00-8:00 PM (In Person)

*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

**Jenna Green** - Interim Executive Director

**Board Members Excused/Absent: Alina Stircu**

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
<p><b>Call to Order / Welcome</b> Tamia Deary, CHCB Chair</p>	<p>Meeting called to order at 6:05pm</p> <p>We <u>do have a quorum</u> with 5 members present</p> <p>Absent: Alina</p> <p>Darrell joined at 6:25pm making 6 members present</p>			
<p><b>Patient Impact Story</b> <i>Introduction by Jenna Green, Interim Executive Director</i></p>	<p>A patient impact story was shared by Interim Exec Director Jenna Green. Jenna shared a patient’s story with permission as summarized below:</p> <p>The patient worked long hours Monday-Friday and could not access services during the work week. She was able to be seen for urgent tooth pain during one of our Mid County Health Center Saturday hours and without insurance. The patient said that dentist Emily Wineland, support staff, and service was excellent and made her feel at ease while having multiple teeth extracted.</p>			
<p><b>Minutes Review - VOTE REQUIRED</b> Tamia Deary, CHCB Chair</p>	<p>June 10th, 2024, Public Meeting minutes.</p> <p>No changes requested.</p>	<p><b>Motion to approve: Susana</b> <b>Second: Bee</b></p>		

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
<ul style="list-style-type: none"> <li>June 10, 2024 Public Meeting Minutes</li> </ul>		Yays: 5 Nays: 0 Abstain: 0 <b>Decision: Approved</b>		
<b>Annual Quality Plan Review- VOTE REQUIRED</b> <i>Brieshon D'Agostini, Quality and Compliance Officer</i>	The Annual Quality Management Plan was presented to the full board after review and discussion at the recent Quality Committee Meeting. Two minor changes for this year were noted on pages 3 and 4. No questions or comments from board members.	<b>Motion to approve: Susana</b> <b>Second: Harold</b> Yays: 5 Nays: 0 Abstain: 0 <b>Decision: Approved</b>		
<b>C8E Capital Grant Extension - VOTE REQUIRED</b> <i>Debbie Powers, Interim Health Center Chief Operations Officer</i>	Debbie Powers presented the HRSA Capital Grant Extension request that started in 2021 through ARPA funding. Due to equipment ordering lag times for the generators, we are requesting a no-cost extension for the spend timelines. No questions or comments from board members.	<b>Motion to approve: Harold</b> <b>Second: Susana</b> Yays: 5 Nays: 0 Abstain: 0 <b>Decision: Approved</b>		



Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
<p><b>State of Oregon Workforce Ready Grant - VOTE REQUIRED</b>  <i>Debbie Powers ,  Interim Health Center Chief  Operations Officer  Jennifer Jako, Oral Health Equity Project Manager</i></p>	<p>Debbie Powers and Jennifer Jako Presented on the Workforce Ready Grant - they are still in the process of preparing for this grant submission but due to timelines of the submission date they are seeking approval to proceed.</p> <p><b>NOTE: Darrell joined at 625pm- during presentation</b></p> <p>Three distinct career programs will be funded through this one million dollar grant and those include: Medical assistant, Dental Assistant and EFDA Program.</p> <p>Comment from Susana: I think this is well organized and would like the ease of accessibility to be kept in mind.</p> <p>Question from Harold: Will job retention be looked at to determine if this is successful?</p> <p>Question from Harold: Can these funds be used for continuing education as well? Debbie replied that the CE costs are already included in our normal budget but these funds are for all new positions.</p> <p>Comment from Susana: Having this be a multicultural program would be great since there is such a need for Spanish-speaking providers.</p> <p>Question from Tamia: Will any childcare be covered? Debbie replied that she has not seen that in this project but the workforce for the MA program could have more needs like this of the staff member being met and Debbie can follow up if this could be a priority.</p> <p>Tamia mentioned looking for the childcare topic in future workforce development strategies.</p> <p>Tamia asked to come back to let us know about the process and how it is going.</p>	<p><b>Motion to approve: Harold</b>  <b>Second: Susana</b>  Yays: 6  Nays: 0  Abstain: 0  <b>Decision: Approved</b></p>		

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
<p><b>Q1 Complaints and Incidents</b> <i>Kimmy Hicks, Project Manager, Quality Team</i></p>	<p>Kimmy Hicks presented on Q4 (CY 2023) incidents and complaints. One complaint involved a patient complaint regarding an interpreter. New software has been implemented called RLDatix and will be presented soon.</p> <p>Questions from Harold: Going back to the incidents page, it looks like a lot of immunization errors? How is this being addressed? Kimmy answered: We have had a staff shortage and using agency staff has increased our immunization errors, these are being addressed with coaching and reviewing the layouts/locations of the immunizations. Brieshon: We have a standard process where we review the errors each time. Individual coaching and system level coaching are being implemented. A new immunization workflow is also being looked into to reduce errors. Question from Tamia: Tamia asked for Immunizations trend error report so that we can keep track in the future. Debbie: The immunization training took place as well as the barcode scanner project that will help us with immunization tracking and reducing entry errors - we are also a high volume of immunization administration. Question from Tamia: Tamia asked for numbers on total numbers of immunizations administered so that there is context when discussing errors to total given.</p>	<p><i>Immunization trend error report to provide at the next meeting</i></p>	<p>Debbie</p>	
<p><b>Q1 Patient Experience Surveys</b> <i>Brieshon D'Agostini, Quality and Compliance Officer</i></p>	<p>Q1 Patient Survey results presented by Brieshon as summarized below: Trends mainly are compared to a benchmark of 120 other FQHC's as previously asked in a prior board meeting. We are almost to the national benchmark. Q1 Work Highlights included the Northern Region going through extensive training in the environment of care, applying a quality lens and reviewing patient feedback. We exceeded the benchmark for provider wait times. Reception staff helpfulness was reported as high across all service lines Questions:</p>			

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
	<p>Harold: Expand on the reconfiguration at the NE reception?</p> <p>Brieshon: NE reception reported that the reconfigure helped them see patients as they were walking up vs not being able to see them past the monitors the way that they were set up.</p> <p>Tamia: reported that she had an experience at the reception with not being able to set up an appointment that was an error and after 2 incidents like this, she was able to get help from another staff member to make her appointment. Tamia checked in with the clinic manager and let them know the positive and negative experience at the registration area.</p>			
<p><b>Monthly Financial Reporting Package</b> Paul Fogel, Finance Manager</p>	<p>Paul Fogel presented for Hasan Bader on the Monthly Financials as summarized below: Revenue is higher than expected and expenditures are lower but mainly due to staffing not being at fully budgeted capacity. 19 days is the average wait time for appointments. Finances can be better assessed by the YTD number rather than month to month because of the variances that occur in finance cycles. More patient volume could significantly increase our revenue. Our staffing numbers cannot keep up with the demand for appointments currently. Over the next few years the recruitment filling to meet the demand will be a priority. CareOregon membership has increased but then stabilized and decreased a bit. Paul mentioned that getting the retention rate of CareOregon patients is important.</p> <p>Questions/Comments: Susana commented that she liked the presentation. Harold also mentioned a great presentation. Tamia also liked the information and it will be easy to incorporate data into our strategic planning. Kerry asked if there was a change in the CareOregon numbers vs Trillium?</p>	<p><i>Anirudh commented that the slide provides information about the number of CareOregon and Trillium members we gained and lost in April and May and that he will work with Paul and BI to provide the details about the member retention and attrition and bring it to a</i></p>	<p>Anirudh</p>	

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
	<p>Paul mentioned yes the CareOregon numbers have decreased while the Trillium numbers have increased a bit.</p> <p>Kerry asked if CareOregon numbers have decreased overall- has Trillium taken some of the CareOregon numbers?</p> <p>Paul mentioned that this would be difficult to determine since both numbers have increased at the same time.</p> <p>Anirudh commented that the slide provides information about the number of CareOregon and Trillium members we gained and lost in April and May.</p> <p>Action item: get the retention rates per month of how many CareOregon members are staying and leaving each month.</p>	<p><i>future CHCB meeting</i></p> <p><i>Action item: get the retention and attrition rates per month of how many CareOregon members are staying and leaving each month</i></p>		
<p><b>Committee Updates</b></p> <p>Finance Committee: Darrell Wade, Finance Chair</p> <p>Quality Committee: Tamia Deary, Quality Chair</p> <p>Executive Committee: Tamia Deary, Board Chair</p> <p>Nominating Committee: Tamia Deary, Board Chair</p> <p>Bylaws Committee: Tamia Deary, Board Chair</p>	<p>Finance Committee- no updates, did not meet due to 4th of July holiday.</p> <p>Quality Committee- Brieshon mentioned that the project of the HRSA badge analysis was discussed, the public meeting items like the Quality Plan were also discussed.</p> <p>Exec Committee: Tamia discussed the grants upcoming for the public meeting, discussed the financials that have improved.</p> <p>Nominating Committee: Discussed processing new applications that have come in as well as updates on the community outreach areas, bylaws updates to be added that were voted on.</p> <p>Bylaws committee: All presented amendments were passed by the board via email vote and we are on track for compliance by our August 15th deadline</p>			

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
<p><b>Department Updates/Strategic Updates</b></p> <p>Interim Executive Director Operations Clinical Quality</p>	<p>Upcoming events presented as summarized below:            Hosting a Back to School fair at the Rockwood Plaza Downtown.            Hosting an optional family friendly staff event on August 3rd.            340B mock audit did not have any findings.            HRSA updates: much progress with changing our bylaws            HIPAA breach: all notifications and items have been completed as well as the laptop being recovered.            CHCB Memo recently added the newly requested information regarding our information systems program/cybersecurity and workforce development updates.            Tamia asked for updates on the Workforce Development for the next public meeting.            Debbie:            County has opened several cooling shelters that the county asked us to have Primary Care services via the mobile van during a Saturday cooling center event. Dr Bruno, Debbie and one MA were present for the cooling event at Central City Concern. Today we are at the BHRC and tomorrow we will be at one of our other cooling centers.</p>	<p><i>Add to Exec comm agenda for August Public Meeting: Workforce Development updates</i></p>	<p>CHCB Liaison</p>	
<p><b>Board Discussion (Closed Executive Session)</b>  <i>Tamia Deary, CHCB Chair</i></p>	<p>Closed Executive session started at 8:01 pm and ended at 8:20 pm</p>			<p>Next public meeting scheduled on Aug 12, 2024</p>
<p><b>Meeting Adjourns</b></p>	<p>8: 20pm</p>			

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Kerry Hoeschen, Secretary

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Tamia Deary, Board Chair

Scribe: // Email:  
Anna Johnston / [anna.johnston@multco.us](mailto:anna.johnston@multco.us)



# SUMMARIES



**community health  
center board**

*Multnomah County*

# Community Health Center Board Health Center Highlights



TO: Community Health Center Board  
FROM: Jenna Green, Interim Executive Director & Senior Leadership  
RE: Grant Renewal Request Summaries  
DATE: August 12, 2024 Public Meeting

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## **HRSA Health Center Program Budget Period Renewal (BPR) \*Vote Required**

*HD Grants Team: Amanda Hurley, Strategy & Grants*

The Health Center has received Health Center Program funds since 1980 commonly known as our Section 330 funds. This funding is our annual base amount (\$9,809,194) from HRSA that is used to fund the Health Center and Healthcare for the Homeless programs. We must submit a Service Area Competition (SAC) (a competing continuation) application every three years to HRSA. In non-SAC years, the Health Center submits Budget Period Renewal (BPR) applications. The most recent SAC was submitted two years ago. The next BPR is due August 16, 2024 to renew funding, and the next SAC is estimated to be due August 2025.

**Request for more information from Executive Committee:** Budget slide was confusing as it referenced "Other Resources" unrelated to the grant.

**Answer:** The slide presentation has been updated to replace "Other Resources" with "Federal, State, and Private Grants; Medicaid, Medicare; Program (Patient) Income" to clarify in our total Health Center Budget which funding is related to the BPR and which is all other types of revenue. Additional information has been added to slides to offer more detailed information about patients/services and UDS quality measures will be covered in upcoming discussions related to the 2023 UDS report submission.

## **Roots and Wings Grant Renewal \*Vote Required**

*Jenna Green, Interim ICS Director*

This grant renewal is for a three year period for 2024-2027. \$105,000 is requested annually for the grant period and funding amount requested is based on historical payments from this foundation. The Health Center was invited to apply again and intends to use the unrestricted funding to cover wages of a medical assistant to administer immunizations in Student Health Centers. Through the grant period, the



Health Center will have the option for using the funds differently, if needed.

- Since 2021, the Health Center has allocated this grant funding to Student Health Centers and has previously funded an additional medical assistant to optimally staff the David Douglas SHC and staff vaccine clinics throughout the SHC network. This additional staffing has resulted in more than 2,000+ immunizations to be administered annually.
- This funding supports existing SHC operations and is not linked to specific or required additional patients.
- A small portion of the funds may pay wages of the Student Health Action Council (SHAC) program manager and interns to lead the SHACs at the nine SHCs.

**Request for more information during the Executive Committee:** Can we hear more about the Student Health Action Council and intern engagement? How is that going? Can we get more information about how the funding is used in that effort?

**Answer:** It is highly unlikely this funding will be used in the SHAC program, but may be used to cover expenses of the wages of the SHAC program manager and paid interns. In general, SHACs work on whatever issues they determine they want to meet at least once per week for at least 30 minutes.

Some examples of last years projects:

- Reynolds:
  - *Destress and friendship bracelet making table*
- David Douglas
  - *Art therapy event*
  - *Table and tea outreach during lunches*
- Cleveland
  - *Card and ornament making for the holidays*
  - *Period Taboo presentation*
  - *School facing SHC bulletin board update*
  - *SHC classroom presentation*

- Roosevelt
  - Stress and Mental Health zine
  - Destress and friendship bracelet making table
- Franklin
  - Card and ornament making for the holidays
- McDaniel
  - School facing SHC Bulletin Board updated
  - Card and ornament making for the holidays
  - Cards were brought to Meals on Wheels
- Centennial
  - Recipe Zine creation
- Jefferson
  - Fentanyl abuse awareness school presentation
- Parkrose
  - Mural outside clinic on school hallway
  - Created flyers with answers to SHC frequently asked questions and a map to where the SHC is located in the school
  - Paint a pumpkin, give a pumpkin event



# Budget Modification Approval Request Summary

## Community Health Center Board (CHCB) Authority and Responsibility

As the governing board of the Multnomah County Health Center, the CHCB is responsible for revising and approving changes in the health centers scope; availability of services, site locations, and hours of operations; and operating budget. Reviewing and approving the submission of continuation, supplemental, and competitive grant applications is part of this review and approval process.

An approval to submit a grant application will allow for budget revisions during the application development process within and between approved budget categories up to 25 percent without CHCB approval. All budget revisions that exceed the cumulative 25% budget revision cap will be presented to the CHCB for a vote prior to grant submission. Upon Notice of Award, the budget approved by the funder will be presented to the CHCB for a final approval.

Please type or copy/paste your content in the white spaces below. When complete, please return/share the document with **Board Liaison, CHCB.Liaison@multco.us**

<b>Grant Title</b>	FY25 Health Center Program Budget Period Report, Non-Competing Continuation		
<b>This funding will support:</b> <i>Please add an "X" in the category that applies.</i>			
<b>Current Operations</b>	<b>Expanded Services or Capacity</b>	<b>New Services</b>	
x			
<b>Date of Presentation:</b>	<b>August 12, 2024</b>	<b>Program / Area:</b>	<b>All Health Centers</b>
<b>Presenters:</b>	Claire Nystron & Amanda Hurley, Program & Grant Strategists, Strategy and Grants Development		
<b>Project Title and Brief Description:</b>			
<b>Health Center Program Budget Period Renewal (BPR)</b>			
<p>The Multnomah County Health Department (MCHD) has been receiving Health Center Program (Section 330) funds since 1980. Multnomah County is the grantee, but the program is fully overseen and managed by the Community Health Center Board (CHCB) and Integrated Clinical Services (ICS). As part of this award, MCHD receives Community Health Center and Healthcare for the Homeless funding. Health Center Program funds are used to operate the Health Center's seven Community Health Centers, nine student health centers, seven dental clinics, seven pharmacies, the mobile van clinic, and HIV Health Services Center. MCHD must submit a Service Area Competition (SAC) (a competing continuation) application every</p>			



three years. In non-SAC years, MCHD submits Budget Period Renewal (BPR) applications. The most recent SAC was submitted last year. The next BPR is due August 16, 2024.

**What need is this addressing?:**

MCHD’s Community Health Centers provide comprehensive primary care, dental, and behavioral health services for the 26% of the Multnomah County service area’s population that lives on incomes below 200% of the Federal Poverty Level (about 230,000). About 6% of the service area’s population is uninsured, 18% are covered by Medicaid, and over 6,000 people experience homelessness.

**What is the expected impact of this project? (#of patients, visits, staff, health outcomes, etc.)**

The patient goal for the project period is set at 66,171, requiring MCHD to serve a minimum of that many patients annually by 2025 (although the next SAC application submitted in 2025 will be based on 2024 patient numbers). In 2023, MCHD served 53,799 patients. (More information will be presented with the Needs Assessment presentation).

MCHD has also set goals for clinical and financial performance measures to track over the grant period to improve health outcomes for patients.

Grant funds support salaries for Health Center Program staff. Example staff include: Administrative Analysts, Administrative Specialists, Business Process Consultants, Clerical Unit Coordinators, Clinical Services Specialists, Community Health Nurses, Community Health Specialists, Data Analysts, Dental Assistants, Dental Hygienists, Eligibility Specialists, Finance Specialists, Finance Technicians, Laboratory Technicians, Licensed Practical Nurses, Medical Assistants, Nurse Practitioners, Nurse Practitioner Manager, Nursing Supervisors, Office Assistants, Operations Supervisors, Physicians, Physician Assistants, Program Coordinators, Program Specialists, Program Technicians, and Project Managers.

**What is the total amount requested: \$9,809,194**

*See attached budget*

Funds will be used for personnel, fringe benefits, and indirect costs. A full budget will be presented at the August CHCB public meeting.

**Expected Award Date and project/funding period:**

This budget period is for 1/1/2025 - 12/31/2025, which is the third of three years of the current grant period.

**Briefly describe the outcome of a “YES” vote by the Board:**

*(Please be sure to also note any financial outcomes)*

A “yes” vote means MCHD will submit the BPR application to the HRSA Bureau of Primary Health Care, allowing it to continue operating the Health Center Program. The board will continue to vote on annual budget appropriations and grant appropriations in accordance with the regular budget cycle.

**Briefly describe the outcome of a “NO” vote or inaction by the Board:***(Please be sure to also note any financial outcomes)*

A “no” vote means MCHD will not submit the BPR application and will not be eligible to receive continued funding.

**Related Change in Scopes Requests:***(only applicable in cases in which project will represent a change in the scope of health center services, sites, hours or target population)*

N/A

**Proposed Budget (when applicable)**

Project Name: Health Center Program Budget Period Renewal		Start/End Date: 1/1/2025-12/31/2025	
	Budgeted Amount	Comments (Note any supplemental or matching funds)	Total Budget
<b>A. Personnel, Salaries and Fringe</b>			
<b>Salaries</b> - including all Primary Care Clinics, Student Health Centers, Dental Program, Eligibility Outreach Program and other Enabling Services, HIV Treatment Program, Information and Referral Program, and Pharmacy Services	4,955,519	63,796,375	68,751,894
<b>Salary-related expenses</b> - FICA (7.65%), Retirement PERS (25.42%), PERS Bond (6.65%), Family Leave (0.4%), and Transit tax (0.82%) for a total of 40.94% of pay. Retirement for employees hired after August 03 is (21.99%) with a total expense of 37.51% of pay.	1,954,016	24,502,272	26,456,288
<b>Salary-related insurance benefits</b> - Includes workers compensation, liability, unemployment, long term/short term disability, retiree medical, and benefits administration for a total of 7.5% of base pay. Flat rate insurance benefits budgeted at \$21,457 per full-time employee. For Local 88 three-quarter time employees, it is \$16,093. For half-time employees, the rate is \$12,247 per employee.	1,480,846	18,915,086	20,395,932
<b>Total Salaries, Wages and Fringe</b>	<b>\$8,390,381</b>	<b>\$107,213,733</b>	<b>\$115,604,114</b>
<b>B. Supplies</b>			



Pharmaceuticals, medical and dental supplies, office supplies	0	29,869,750	29,869,750
<b>Total Supplies</b>	<b>\$0</b>	<b>\$29,869,750</b>	<b>\$29,869,750</b>
<b>C. Contract Costs</b>			
Patient care and non-patient care contracts	0	4,408,949	4,408,949
<b>Total Contractual</b>	<b>\$0</b>	<b>\$4,408,949</b>	<b>\$4,408,949</b>
<b>D. Other Costs</b>			
<b>Travel and training</b>	0	133,611	133,611
<b>Internal services, education and training, and other costs</b>	0	30,197,486	30,197,486
<b>Total Other</b>	<b>\$0</b>	<b>\$30,331,097</b>	<b>\$30,331,097</b>
<b>Total Direct Costs (A+B+C+D)</b>	<b>\$8,390,381</b>	<b>\$171,823,529</b>	<b>\$180,213,910</b>
<b>Indirect Costs</b>			
<i>The FY25 Multnomah County Cost Allocation Plan has set the Health Department's indirect rate at 16.91% of Personnel Expenses (Salary and Fringe Benefits). The rate includes 4.11% for Central Services and 12.80% for Departmental. The Cost Allocation Plan is federally-approved.</i>			
<b>Total Indirect Costs (16.91% of A)</b>	<b>\$1,418,813</b>	<b>\$19,255,285</b>	<b>\$20,674,098</b>
<b>Total Project Costs (Direct + Indirect)</b>	<b>\$9,809,194</b>	<b>\$191,078,814</b>	<b>\$200,888,008</b>

	<b>Revenue</b>	<b>Comments</b> (Note any special conditions)	<b>Total Revenue</b>
<b>E. Direct Care Services and Visits</b>			
<b>Medicare</b>			
Description of service, # of visits			
<b>Medicaid</b>			
Description of service, # of visits			
<b>Self Pay</b>			
Description of service, # of visits			



<b>Other Third Party Payments</b>			
Description of Service, # of visits			
<b>Total Direct Care Revenue</b>			
<b>F. Indirect and Incentive Awards</b>			
Description of special funding awards, quality payments or related indirect revenue sources			
Description of special funding awards, quality payments or related indirect revenue sources			
<b>Total Indirect Care and Incentive Revenue</b>			
<b>Total Anticipated Project Revenue (E+F)</b>			

## Community Health Center Board (CHCB) Authority and Responsibility

As the governing board of the Multnomah County Health Center, the CHCB is responsible for revising and approving changes in the health centers scope; availability of services, site locations, and hours of operations; and operating budget. Reviewing and approving the submission of continuation, supplemental, and competitive grant applications is part of this review and approval process.

An approval to submit a grant application will allow for budget revisions during the application development process within and between approved budget categories up to 25 percent without CHCB approval. All budget revisions that exceed the cumulative 25% budget revision cap will be presented to the CHCB for a vote prior to grant submission. Upon Notice of Award, the budget approved by the funder will be presented to the CHCB for a final approval.

Please type or copy/paste your content in the white spaces below. When complete, please return/share the document with [chcb.liaison@multco.us](mailto:chcb.liaison@multco.us)

<b>Grant Title</b>	Roots and Wings FY25 Renewal		
<b>This funding will support:</b> <i>Please add an "X" in the category that applies.</i>			
<b>Current Operations</b>	<b>Expanded Services or Capacity</b>	<b>New Services</b>	
X			
<b>Date of Presentation:</b>	7/22/24	<b>Program / Area:</b>	Student Health Centers (SHC)
<b>Presenters:</b>	Jenna Green and Alexandra Lowell		
<b>Project Title and Brief Description:</b>			
Roots and Wings Foundation Grant			
<b>What need is this addressing?:</b>			
Opportunity to use flexible funding to support our work in childhood health programs in any of our clinical service programs. This funding has been allocated to Student Health Centers.			



**What is the expected impact of this project?** (#of patients, visits, staff, health outcomes, etc.)

This funding supports existing SHC operations and is not linked to specific or required additional patients. Currently, it funds an additional medical assistant to optimally staff the David Douglas SHC and staff vaccine clinics throughout the SHC network. Funds also partially support the Student Health Action Council program manager and interns who lead youth engagement.

**What is the total amount requested: \$**

*Please see attached budget*

\$105,000

**Expected Award Date and project/funding period:**

To be awarded in October 2024 for FY25 and FY26.

**Briefly describe the outcome of a “YES” vote by the Board:**

*(Please be sure to also note any financial outcomes)*

The health center could receive the funding and can use it towards current programs in SHC.

**Briefly describe the outcome of a “NO” vote or inaction by the Board:**

*(Please be sure to also note any financial outcomes)*

The health center would not accept the funding and would not have the medical assistant, fully funded.

**Related Change in Scopes Requests:**

*(only applicable in cases in which project will represent a change in the scope of health center services, sites, hours or target population)*

**Proposed Budget (when applicable)**

<b>Project Name:</b>		<b>Start/End Date:</b>	
	<b>Budgeted Amount</b>	<b>Comments</b>	<b>Total Budget</b>

		(Note any supplemental or matching funds)	
<b>A. Personnel, Salaries and Fringe</b>			
<b>Position Title</b>			
Position Description			
<b>Position Title</b>			
Position Description			
<b>Total Salaries, Wages and Fringe</b>			
<b>B. Supplies</b>			
Description of supplies			
<b>Total Supplies</b>			
<b>C. Contract Costs</b>			
Contract description			
<b>Total Contractual</b>			
<b>D. Other Costs</b>			
Description of training and other costs			
<b>Total Other</b>			
<b>Total Direct Costs (A+B+C+D)</b>			
<b>Indirect Costs</b>			
<p>The FY 2018 Multnomah County Cost Allocation Plan has set the Health Department's indirect rate at 12.16% of Personnel Expenses (Salary and Fringe Benefits). The rate includes 2.69% for Central Services and 9.47% for Departmental. The Cost Allocation Plan is federally-approved.</p>			
<b>Total Indirect Costs (12.16% of A)</b>			
<b>Total Project Costs (Direct + Indirect)</b>			

	Revenue	Comments (Note any special conditions)	Total Revenue
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<b>E. Direct Care Services and Visits</b>			
<b>Medicare</b>			
Description of service, # of visits			
<b>Medicaid</b>			
Description of service, # of visits			
<b>Self Pay</b>			
Description of service, # of visits			
<b>Other Third Party Payments</b>			
Description of Service, # of visits			
<b>Total Direct Care Revenue</b>			
<b>F. Indirect and Incentive Awards</b>			
Description of special funding awards, quality payments or related indirect revenue sources			
Description of special funding awards, quality payments or related indirect revenue sources			
<b>Total Indirect Care and Incentive Revenue</b>			
<b>Total Anticipated Project Revenue (E+F)</b>			

# Board Presentation Summary

<b>Presentation Title</b>	Annual Needs Assessment Update			
<b>Type of Presentation: Please add an “X” in the categories that apply.</b>				
<b>Inform Only</b>	<b>Annual / Scheduled Process</b>	<b>New Proposal</b>	<b>Review &amp; Input</b>	<b>Inform &amp; Vote</b>
X	X			
<b>Date of Presentation:</b>	August 12, 2024	<b>Program / Area:</b>	Health Center Program	
<b>Presenters:</b>	Claire Nystrom & Amanda Hurley, Program and Grant Strategist, Strategy and Grant Development Team			
<b>Project Title and Brief Description:</b>				
<p>Health Center Program Annual Needs Assessment Update</p> <p>Health Center Programs are required to review community needs assessment information for their service area each year. Because a comprehensive Needs Assessment is part of Service Area Competition (SAC) applications, we typically conduct the needs assessment review at the time of year when the SAC is being prepared, or in non-SAC years, when the Budget Period Renewal (BPR) application is being prepared. The most recent SAC was submitted in 2022. The next BPR application is due August 16, 2024. The BPR does not include a Needs Assessment, but at this time, we will do our annual needs assessment review, focusing on major changes since submission of the SAC two years ago.</p>				
<b>Describe the current situation:</b>				
<p>MCHD’s Community Health Centers provide comprehensive primary care, dental, and behavioral health services for the 26% of the Multnomah County service area’s population that lives on incomes below 200% of the Federal Poverty Level (about 230,000). About 6% of the service area’s population is uninsured, 18% are covered by Medicaid, and over 6,000 people experience homelessness.</p>				
<b>Why is this project, process, system being implemented now?</b>				
<p>As described above, the CHCB is required to review needs assessment information every year. SAC applications, which occur every three years include a comprehensive Needs Assessment, so they are good</p>				



opportunities to do the review. While BPR applications include little or no needs assessment information, they occur in annual increments between SAC applications, so they are logical points in time at which to do the needs assessment review during non-SAC years.

**Briefly describe the history of the project so far (*Please indicate any actions taken to address needs and cultures of diverse clients or steps taken to ensure fair representation in review and planning*):**

The MCHD Strategy and Grants Development Team has gathered existing data that either has changed significantly since submission of the SAC two years ago or was not available at the time. Local community health needs assessments that entail robust and diverse community engagement are among the data sources reviewed.

**List any limits or parameters for the Board’s scope of influence and decision-making:**

The Board may request additional data they would like to see.

**Briefly describe the outcome of a “YES” vote by the Board (*Please be sure to also note any financial outcomes*):**

N/A - No vote is required for this agenda item.

**Briefly describe the outcome of a “NO” vote or inaction by the Board (*Please be sure to also note any financial outcomes*):**

N/A - No vote is required for this agenda item.

**Which specific stakeholders or representative groups have been involved so far?**

ICS leadership has been involved in deciding the scope of the presentation. The 2023 Point-in-Time count of homelessness are among included data sources.

**Who are the area or subject matter experts for this project? (*Please provide a brief description of qualifications*)**

Claire Nystrom with MCHD’s Strategy and Grants Development Team has been compiling data and information for the annual needs assessment review, as well as writing Needs Assessments for SAC and, when required, BPR applications, for 13 years. She relies on Research and Evaluation Analysts throughout the Health Department, especially Community Epidemiology Services and Program Design and Evaluation Services for data access, analysis, and expertise.

**What have been the recommendations so far?**



Recommendations have been to continue presenting comprehensive needs assessment information during years where a SAC is submitted and presenting updates and major changes during years when a BPR is submitted.

**How was this material, project, process, or system selected from all the possible options?**

This process is standard for an annual needs assessment review.

Board Notes:



# Department Updates

# Strategic Updates

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- Interim Executive Director
- Finance
- Operations
- Clinical
- Quality



**community health  
center board**

*Multnomah County*

# Community Health Center Board Health Center Highlights



TO: Community Health Center Board  
FROM: Jenna Green, Interim Executive Director & Senior Leadership  
RE: Public Meeting Memo - **Monthly Update (July data)**  
DATE: August 12, 2024 Public Meeting

## **Executive Director Highlights** - System level information and updates

- Our Health Center teams participated in the Portland Pride Festival and Pride Parade July 20-21. At the Pride Festival, we interacted with hundreds of community members and spoke to the services of our clinics. At the Pride Parade, our Health Center mobile van served as the Health Department float!



- Our next community events this summer and fall include our National Health Center Week celebration and "Cully Fest" to provide educational information about our local clinics and celebrate health center services.
  - National Health Center Week and Back to School Event on August 8:  
Rockwood Plaza 11:00am-2:00pm
  - [Cully Fest](#) on September 21: Cully Five Corners

## **Capital Projects** - Facilities updates, high cost projects

- Generator project - Northeast Health Center has begun staging for the generator installation project and the parking lot will be impacted from July-Mid August. Most of the project will impact areas outside of the Health Center and is not expected to



have any major impact on operations. Mid County staging has not begun yet.

### **Strategic Program Updates** - Topics related to the strategic plan/direction of the Health Center

- Preparing for the 2025 Legislative Session: Our health center is working to elevate our top policy concerns for the next Oregon legislative session with Multnomah County's government relations team, including:
  - Protecting Medicaid services
  - Helping expand support for refugee and immigrant health
  - Supporting pharmacy access through the 340B program
- Starting to evaluate recent judicial interpretation and possible regulatory impacts from the Chevron Doctrine ruling.

### **Risk and Compliance Updates** - Compliance events, major incidents/events updates

- HRSA Off-Cycle Condition (Board Composition): Board member recruitment in process; resolution response to HRSA due August 15.
- State School Based Health Center certification site visits scheduled for December.

### **Quality/Process Improvement** - Improvement events and activities

- New immunization incident improvement project has started to more proactively identify and address errors.

### **General Program Updates** - Program/Service-line specific updates

- Primary Care:
  - **Autism Assessment Pilot at East County Health Center-** In response to a regional shortage of qualified autism assessment providers, two pediatricians at the East County Health Center were selected to participate in a state-sponsored program to gain certification to be able to assess for and diagnose autism for clients who meet criteria. This pilot will start in late July. If successful, the program will help to reduce the wait times for kids to receive the appropriate diagnosis needed to access Autism therapy and resources. At this time the pilot is internal to East County and we hope to expand to other sites.
  - **APC Fellowship Update:** Recruitment for the class of 2024-2025 has closed, all six of our offers were accepted. We are thrilled to announce that in September 2024, we will welcome an APC fellow at Northeast, North, Mid, Rockwood, East and La Clinica de Buena Salud Health Centers. In September

2024, the current fellows will graduate. We have two applications already for a permanent position among the current cohort.

- **Dental**

- The dental team is in the process of hiring sterile techs, which is a new entry-level position on the clinical team.
- Starting in September, Mid County Dental Clinic will have availability on Saturdays for families to bring their children under 3 to receive care; the team is currently building this schedule.
- Due to challenges in recruiting new dental hygienists, we are piloting flexible schedules for dental hygiene positions that are 9am -2pm as a recruitment option.

- **Pharmacy**

- The pharmacy clerks in the pharmacy technician workforce development program have passed their 6-month mark and are now applying to become licensed pharmacy technicians in order to further their training.

- **Information Systems**

- Our Electronic Health Record (EHR) team is working with Primary Care, County IT, and our EHR vendor, OCHIN, to kick off a pilot program called DAX Copilot aimed to reduce provider burnout. DAX Copilot uses artificial intelligence to easily create summaries of patient conversations during exams and telehealth visits. These summaries are then reviewed and approved by the clinician before being added to the EHR.
- In early July, our Business Intelligence (BI) team and the Student Health Center (SHC) leadership team partnered to present at the National School Based Health Center Conference in Washington, DC highlighting their collaboration to develop a SHC dashboard. Using a live demonstration of the dashboard, they showcased how SHC uses data to make informed decisions and improve the quality of care to over 100 attendees.
- Global Microsoft Windows downtime: The Health Center successfully managed the CrowdStrike downtime event in collaboration with County IT. This ensured that all affected computers were restored to full functionality. There were zero client appointment impacts due to this downtime.