

CHCB Public Meeting Minutes April 14, 2025 6:00-8:00 PM In Person Gladys McCoy Building Room 708

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 (she/they) – Chair Kerry Hoeschen (she/her) – Vice Chair Darrell Wade (he/him)- Treasurer Brandi Velasquez (she/her/ella) – Member at Large Susana Mendoza (she/her) - Member at Large

Jenna Green (she/her)- Interim Executive Director (Ex Officio) Board Members Excused/Absent: Brenda Chambers (she/her) - Board Member José Gómez (el/ellos) - Board Member Monique Johnson (she/her) - Board Member Dani Slyman (she/her) - Board Member

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
<b>Call to Order /</b> <b>Welcome</b> Tamia Deary, CHCB Chair	Meeting called to order at 6:09pm. We <u>do have a quorum</u> with 8 members present Spanish Interpreters: Juan and Felipe Kerry joined at 6:29pm Brenda votes started capturing at 6:25pm Kerry, Monique and Brenda attended virtually			
<b>Minutes Review -</b> <b>VOTE REQUIRED</b> Tamia Deary, CHCB Chair	March 10, 2025, Public Meeting Minutes Review No edits	Motion to approve: Dani Second: Jose Yays: 7 Nays: 0 Abstain:		

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		Decision: Approved		
Grant Renewals - VOTE REQUIRED HRSA Ryan White Part D Year 2 Grant, Nick Tipton, Regional Manager Senior HRSA Behavioral Health Service Expansion Year 2 Grant, Kevin Minor, Integrated Behavioral Health and Addictions Manager	<ul> <li>Nick was present to answer any questions about the Ryan White Part D : Women and Youth Health Grant - Year 2</li> <li>Funding medical services and case management to approximately 350 women and youth receiving care at the HIV Health Center</li> <li>Women and youth account for 18% of HHC clients</li> <li>Important keystone in our funding strategy to ensure that we're providing effective wraparound services for clients living with HIV in the Portland transitional grant area and all over the State of Oregon</li> <li>Questions/Comments:</li> <li>Q: Jose - When you say HIV services, does that also include AIDS?</li> <li>A: Correct, as that is an advanced form of HIV, we just primarily refer to it as HIV services.</li> </ul>	Motion to approve Ryan White Part D: Jose Second: Bee Yays: 7 Nays: Abstain: Decision: Approved Motion to approve HRSA BHSE Expansion: Dani Second: Jose		
	<ul> <li>Kevin was present to answer any questions about the HRSA Behavioral HEalth Service</li> <li>Expansion Grant - Year 2 <ul> <li>Provides mental health and behavioral health services for our mobile clinics</li> <li>Mobile clinic provides accessible resources to patients that may have barriers or can't reach a health center</li> </ul> </li> <li>Questions/Comments: <ul> <li>Q: Jose - Do these services include all age groups? Does this also include suicide prevention?</li> <li>A: Yes, this includes all age groups in terms of behavioral health support. For medications, there is a recommendation that services are evaluated by a medical professional to</li> </ul> </li> </ul>	Yays: 7 Nays: Abstain: <b>Decision:</b> <b>Approved</b>		

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	<ul> <li>determine what is most appropriate, which could affect certain age groups. All mobile clinic patients accessing care receive a suicide assessment. Staff adhere to the suicidal ideation, mobile clinic protocol which includes accessing the crisis line, a safety plan and continued follow up by the provider until they have indicated that they are no longer at a high risk of suicide.</li> <li>Q: Jose - What age would be a limiting factor to receive medications?</li> <li>A: Medication treatment on clinical standard indicates 16 years old as the lowest age.</li> <li>However, that is not always a hard line. Factors are determined by pre-existing health conditions, medical providers' clinical evaluation and medical safety when providing</li> </ul>			
<ul> <li>Policy Approvals -</li> <li>/OTE REQUIRED</li> <li>Operations Hours Policy</li> <li>Health Center Purpose, Vision, and Values</li> <li>Policy Approval by the Co-Applicant Governing Board Policy, Brieshon D'Agostini, Quality &amp; Compliance Officer</li> </ul>	<ul> <li>medication are also considered.</li> <li>Brieshon was present for questions on the following policies after several reviews have been given to the Board <ul> <li>Operations Hours</li> <li>Health Center Purpose, Vision and Values</li> <li>Policy Approval by the Co-Applicant Board</li> </ul> </li> <li>No questions or comments</li> </ul>	Motion to approve Operations Hours Policy: Darrell Second: Bee Yays: 7 Nays: Abstain: Decision: Approved Motion to approve Purpose,Vision, Values: Bee Second: Susana Yays: 8 Nays:		

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		Abstain: Decision: Approved Motion to approve Policy Approval by the Co-Applicant Board: Dani Second: Jose Yays: 8 Nays: Abstain: Decision: Approved		
Member at Large Special Election - VOTE REQUIRED Tamia Deary, CHCB Chair	Nominations Committee met and suggested Dani Slyman for the vacant Member at Large Position No self nominations were received Google form was sent to Board members requesting their vote prior to the Public meeting Dani was voted in as Member at Large to complete Susana's term (ending this year) Elections for the following positions will begin in November/December: • Secretary • (1)Member at Large • Board Chair			

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FY26 Budget Approval - VOTE REQUIRED Hasan Bader, Finance Manager	<ul> <li>EHR Budget has capacity to use the funds this fiscal year (Jenna sent updated email to Board members)</li> <li>High level details highlights: <ul> <li>Total drafted budget is \$216.34million</li> <li>\$15.05million beginning working capital (BWC)</li> <li>previous fiscal year used \$8.5million</li> <li>\$66.9million alternative payment methods (APM)</li> <li>\$12.8million incentives</li> </ul> </li> <li>Between FY22-FY26 <ul> <li>approximately 7% increase which reflects inflation and new investments</li> <li>FTE trends show an increase in staff</li> </ul> </li> <li>Questions/Comments : <ul> <li>Q: Dani - When will the IT scoping be finalized?</li> <li>A: The Privacy, Security and Trust Committee will get those updates and will be overseeing the EHR updates and Medcurity SRA. The Committee will provide the Board with updates.</li> </ul> </li> <li>Q: Jose - Seeking clarification and understanding of financial cycles. The funds that have been used this trimester, is that the 1st 3 months of 2025?</li> <li>A: We have not discussed that yet. This presentation is in advance for the upcoming Fiscal Year budget cycle, which runs July 01, 2025-June 30, 2026.</li> <li>Q: Jose - Is it possible to divide by quarters? To compare trends year by year and explain why the trends happen? Is that kind of analysis possible?</li> <li>A: Reports are submitted by month and quarterly. So you can compare month to month or quarter to quarter.</li> <li>A one page financial narrative would be helpful for the Board - Tamia to send Jose an example/template</li> </ul>	Motion to approve: Bee Second: Darrell Yays: 9 Nays: Abstain: Decision: Approved		

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Advanced Practice Clinician (APC) Fellowship Presentation Rockwood Fellows	<ul> <li>Mo, a current fellow at Rockwood, and Lauren, a previous APC Fellow and now a clinician, joined to inform their experience and program details</li> <li>Fellowship program is in it's 3rd year</li> <li>Currently there are 6 fellows (one at N/NE/RW/East/Mid/LC)</li> <li>In clinic 4 days week with 1 weekday of training</li> <li>The program is essential in providing patient care</li> <li>Experience to learn is valued</li> <li>Program proves to be successful as most fellows stay to work at our Health Center</li> <li>Fellows are recruiting through the OHSU the PA and NP program</li> </ul> Questions/Comments : <ul> <li>Q: Dani- What area would you think could take the program to the next level?</li> <li>A: More structure around procedures for increased experience. Most fellows get exposed to procedures that are based around each clinic and what providers at those clinics do.</li> </ul>			
Break				
<b>Quality Risk Report</b> <i>Theresa Rice,</i> <i>Quality Supervisor</i>	<ul> <li>Theresa gave a summarized presentation on 2024 Quality Risk Report and Review. A deeper dive of the data review was provided to board members in their monthly packet.</li> <li>Highlights : <ul> <li>Requirement for Federal Tort Claims Act (FTCA) coverage to provide an annual overview of quality and risk items.</li> <li>2023-2024 data comparison <ul> <li>Patient Safety total volume decreased 39%</li> <li>Patients Complaints decreased 13%</li> <li>Fewer HIPAA reported incidents and confirmed breaches</li> <li>Patient satisfaction increased in all categories with the exception of appointment access</li> <li>Lowest scores in satisfaction experience continue to be: Asian populations, Cantonese and Russian speakers</li> <li>Staff training completion rates increased overall since reports-out began in the summer 2023</li> </ul> </li> </ul></li></ul>			

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	<ul> <li>Questions/Comments :</li> <li>Q: Susy - What are the indicators with patient disparities? What is the difference between them?</li> <li>A: Linda typically presents on that quarterly data, but can go back and get that information as well as presenting at a future Quality committee for a deeper conversation.</li> <li>Q: Jose - I wonder if we should be finding the hypothesis of why these specific cultures experience lower satisfaction? Why hasn't anything been done about it?</li> <li>A: We are actively trying to fine tune the ways we are asking questions and continue to make improvements on that process.</li> <li>Q: Jose - The 13% decline in complaints that was mentioned in the slide. Do you have the actual numbers vs. percentage?</li> <li>A:In 2024 the total number was 229 and in 2023 the total number was 264.</li> </ul>			
Monthly Financial Report Hasan Bader,	Hasan Bader presented a summary of the monthly financials. Highlights include:			
Finance Manager	<ul> <li>February we should be at 68%</li> <li>Revenue is 64% collected</li> <li>Expenses 63% spent</li> <li>\$3.36 million in the black at this time of the year <ul> <li>The number can change month to month because we receive checks for incentives</li> </ul> </li> <li>\$16.1million collected in revenue in February <ul> <li>Spent \$16.4million</li> <li>Resulted in deficit of \$310k</li> </ul> </li> <li>Self pay client fees was lower than expected <ul> <li>Due to less operating days due to weather events</li> <li>February is the shortest month</li> </ul> </li> <li>Internal services is at 68% <ul> <li>Jump in February but this was reconciled by the capital project we have at East and Mid County. The projects are almost completed and we are able to</li> </ul> </li> </ul>			

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	<ul> <li>bill</li> <li>Self-pay percentage or uninsured actual billable</li> <li>Primary Care approximately 5%</li> <li>Dental approximately 3%</li> </ul>			
	Questions/Comments : The Board Would appreciate a larger print out of the monthly reporting package			
Board Committee Updates	<ul> <li>EC: Have been receiving closed session updates in the federal landscape. Talked about shifting to rely more heavily on the Board receiving materials a week in advance to review.</li> <li>Finance: Met today (rescheduled from April 3rd) walked through monthly financials that Hasan presented today.</li> <li>Quality: N/A</li> <li>Nominating: Went through special elections process and nominations. Community engagement and board recruitment opportunities. Upcoming recruitment video details and information were sent to members via email.</li> <li>Bylaws: Some updated and will discuss more in the Executive Session.</li> <li>ED: Intro with new County COO. Informed about board priorities including; clarifying co-applicant definition and ED reporting structure</li> <li>PST: 2nd meeting took place earlier this month, committee is in progress. Medcurity project kick-off happened and reviewed EHR projects.</li> <li>PVV: Officially done. PVV was announced/unveiled at the ICS All Staff Meeting on April 10th. Strategic Planning: N/A</li> </ul>			
Department Updates/Strategic Updates	<ul> <li>Memo highlights:</li> <li>Advocacy was the theme of March</li> <li>Hosted a tour at Rockwood with State Representative Dexter and new County Commissioners</li> <li>OPCA Advocacy Day where Heath Centers came together in Salem with State Representatives</li> <li>Came together with our partner Health Center, Virginia Garcia for roundtable discussion with Representative Bonamici</li> </ul>			

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	All Staff event had 546 attendees			
	<ul> <li>CHCB tabled amongst 19 other tables</li> <li>Fernhill Grand Opening is confirmed for May 30th - formal invites to come</li> </ul>			
	• Termini orand Opening is commed for May Sour - format invites to come			
	Questions/Comments :			
	Comments that the All Staff was great and thank you for having the board			
Board Discussion	Classed Events in a section started at 0:11 and an diad at 0:27 mm			
'Closed Executive Session)	Closed Executive session started at 8:11 and ended at 8:37pm	Motion to		
Tamia Deary, CHCB		approve: Dani		
Chair		Second: Bee		
		Yays: Nays: 0		
		Abstain: 0		
		Decision:		
		Approved		
		Motion to leave		
		Executive		
		Session: Dani		
		Second: Jose		
		Yays:		
		Nays: 0 Abstain: 0		
		Decision:		
		Approved		
Meeting Adjourns	8:37 p.m			

Signed:\_\_\_\_\_Susana Mendoza /s/\_\_\_\_\_ Date:\_\_\_May 2025\_\_\_\_\_ Susana Mendoza, Secretary

Signed:\_\_\_\_\_Tamia Deary /s/\_\_\_\_\_ Date:\_\_\_\_ Date:\_\_\_\_\_May 2025\_\_\_\_\_\_ Tamia Deary, Board Chair

Scribe: Crystal Cook // Email: crystal.cook@multco.us