

CHCB Public Meeting Minutes September 9, 2024 6:00-8:00 PM (via ZOOM)

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 Jose Gomez - Board Member

Harold Odhiambo - Board Member **Monique Johnson** - Board Member

Jenna Green - Interim Executive Director Board Members Excused/Absent:

Topic/Presenter	Discussion / Recommendations	Action	Responsib le Party	Follow-up Date
Call to Order / Welcome Tamia Deary, CHCB Chair	Meeting called to order at 6:00pm. We do have a quorum with 8 members present. Absent: n/a Harold arrived at 6:07 Darrell joined at 6:08pm making 8 members present.			
Minutes Review - VOTE REQUIRED Tamia Deary, CHCB Chair • Aug 12, 2024 Public Meeting Minutes	August 12, 2024, Public Meeting minutes No changes requested.	Motion to approve: Kerry Second: Bee Yays: 7 Nays: 0 Abstain: 0 Decision: Approved		

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Temporary Adjustment to Billi Odegaard Dental Clinic Hours VOTE REQUIRED Daniel G. Martinez Tovar, Dental Senior Manager	Proposed Temporary Change: Currently, we are open Monday-Friday. We're proposing to close the clinic on Mondays and focus our efforts on Tuesday through Friday. This change is about making the best use of our staff and resources so everyone gets the care they deserve. Why This Change? Due to a recent dentist departure and current dental assistant vacancies, we need to adjust our schedule to maintain the highest quality of care for our patients. There is no dentist available at BODC on Mondays.	Motion to approve: Darrell Second: Bee Yays: 7 Nays: 0 Abstain: 1 Decision: Approved		
	Also, dental assistant vacancies at BODC cause dentists not to be able to see patients. Several reasons for vacancies include location, safety concerns, & parking expense makes recruitment difficult for this location.			
	Dental assistant training and recruitment is currently in-progress. Reference handouts to see staffing impacts. This decision is made in consultation with bargaining agreements.			
	All Monday staff will be relocated throughout the dental offices across the system. Alternative could be hiring a dentist without a dental assistant. That's bringing on a highest paid staff with the inability to see patients at full capacity. Relocating			
	another dentist to BODC would leave a service gap at other clinics. Once staffing issues are resolved, Monday hours will resume. "Yes" vote allows Monday closure for approximately nine months.			
	"No" vote means Mondays remain open and we hire a dentist who will remain without a dental assistant until staffing is resolved. Questions?			
	Is Monday closure at BODC for 9 mo.? Yes, that's the anticipated closure on Mondays. Dental Assistants are passing Board exams and we anticipate grads			

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	ready in Spring 2025. Do we recruit outside of the dental training subsidy program? Yes, through other emphasis on recruitment strategies like job fairs, outreach to dental assisting schools and sign on bonuses, LinkedIn, fliers, alumni lists, etc.			
FY24 Close Out Report Hasan Badar, Interim HC CFO	 June FY 2024 Close Out Report: Expenses and revenue, budgeted actuals and percentages by program. This FY24 close out includes the period July 1 2023-June 30, 2024. Reviewed expenses and revenue, budgeted actuals, and percentages by program. The surplus from FY24 can be rolled over to FY25 or used as fiscal reserve for FQHC. Questions? None. 	No action required.		
Annual Quality Overview Theresa Rice, Quality Manager	Theresa Rice presented on the 2023 quality and risk activities. It's an annual overview of items already presented to the Board on a quarterly basis. The Board packet contains a deeper dive on the higher level information presented today. The data includes 2022 for comparison. Summary of patient safety incidents (up due to additional reporting requirements) Sentinel events (remain low) Patient complaints summary HIPAA events summary Staff training completion summary Risk Management Activities for each clinic	No action required.		

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	 Quality Work Plan Questions? None. 			
Q2 Complaints and Incidents Kimmy Hicks, Quality Team	Presenting Q2 2024 Incidents and Complaints Incident and complaining management system changing data sources from Tableau to a system called RLDatix. Top complaint is access/making appointments Complaints around a staff, a service, or a procedure Reported incidents Incidents by type Risk event report Number of incidents for the quarter Questions?	No action required.		
	Susana - Why did we have a bigger number of incidents for the quarter, what's happening there? It's a hard topic and QI would like to defer to BHD Kevin Minor to talk more about suicide attempts. Tamia - Is this reporting system delivering all the detail we can receive? No, the detail will drill down as the tool details increase. Monique - Are the incidents for ONE person over several incidents, are they new or existing complaints? This is an additional data point of interest. Jose - a comment, not a question: When we are talking about MH and suicide attempts, these occurrences need to be differentiated between first time or recurrence. This will drive the preventative actions. In addition, we need more detail	ACTION Potentially invite Kevin Minor to speak to BH incident numbers		

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	on the indents to tell us where we are moving and making progress.			
UDS Report Alex Lehr O'Connell, Senior Grants Management Specialist	Alex oversees HRSA compliance. This team may want to consider how long this presentation should be in the future - it may require longer than 15 min. As a HRSA FQHC, we are required to submit a comprehensive report annually on services provided, clinical quality measures, patient demographics, costs, revenues, and other key information. This is the Uniform Data System (UDS) Report, and the information required is dictated by HRSA, with minor changes each year.			
	UDS data for Calendar Year 2023 has been accepted and published on HRSA's UDS site. We share UDS data with the CHCB to inform about changes in who we serve, how we serve them, and what services we provide, in order to help guide strategic decision making.	ACTION presentation took 7:10-7:40p and needs to be 30 min on the		
	The UDS Report does not require CHCB vote for approval; however it encompasses all costs/revenues/services/staff of the FQHC scope, which is defined by CHCB. Highlights:	agenda ACTION: The Board would like		
	 Patient counts: UDS only counts patients with a visit that meets their definition during the calendar year. UDS does not include visits that were only for immunizations or health screenings. Patients with a UDS-countable visit during the calendar year dropped in 2020 due to COVID, and are gradually returning to expected counts. 	copies of these slides (Completed) ACTION for Alex,		
	gradually returning to expected counts.	please add a slide on the national and		

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 Demographics: Continue to see a transition toward the East. Demographics are fairly consistent year to year. Some data collection challenges due to COVID. Languages: There was a slight drop in patients best served in a language other than English during COVID due to challenges in data collection. Federal Poverty Level (FPL): data consistent over time and we continue to see a very high proportion of low income clients, higher than state and national averages for FQHCs: % of patients at or below 200% FPL, CY2023 Oregon health centers: 88% Health centers nationally: 90% % of patients at or below 100% FPL, CY2023 Foregon health centers: 64% Health centers nationally: 67% Insurance coverage: increase in Medicaid and reduction in Uninsured. Our health center significantly increased OHP Eligibility Assists in 2023. Housing status: UDS definition of "homelessness" includes many types of unstable housing, such as doubling up, permanent supportive housing, etc. Data in 2021 and 2022 for housing status dropped due to data collection challenges. 2023 returned to expected levels. UDS Clincal Quality Measures (CQMs): UDS CQMs measure performance in Access, Preventive Screenings, and Chronic Disease Management. UDS CQMs are separate from other types of CQMs (such as CareOregon metrics), though there is some overlap. UDS CQM performance does not impact HRSA grant funding. UDS CQM Quartile Rankings: "Quartiles" compare our health center to 1400 other health centers in the country. 1st Quartile = top 25%, 2nd Quartile = 	Oregon poverty level rates	le Party	Date

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	 activities on: Depression screening and follow up, Tobacco Cessation, Controlling High Blood Pressure, and HIV screening. HRSA Badges: Badges are based on UDS data/performance compared to previous years. They are not tied to funding, but are an opportunity to celebrate achievements. Our health center received three badges for CY2023: Advancing HIT (Health Information Technology), Addressing social risk factors, and maintaining Patient Centered Medical Home (PCMH) status. This presentation summary is in the Board book. Questions? Tamia - Can you add a slide on the Oregon and National Averages of the poverty level in the slides you send to us? Yes. 			
Workforce Development updates Debbie Powers, Interim HC COO	 MA Apprenticeship Program On the job training Related training and Instruction Journey level mentor or journeyperson Supportive services Three of six positions in recruitment have been filled. NE, Mid County, & La Clinica locations. Opportunity to promote six medical assistants into lead positions. State of Oregon Grant award hasn't been awarded yet and will be communicated at a later meeting. Questions? None. 	No action required.		

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Finance Committee: Darrell updated the Board that the Finance Committee will resume regular scheduled meetings this month, went over monthly financial review last meeting, and scheduled to meet again in Oct. Exec Committee: Tamia updated the Board that the Executive Committee has been very busy. There hasn't been a Quality Committee or Bylaws Committee since the last public meeting. Nominating Committee: Tamia updated the Board that theNominating Committee met today and interviewed another prospective member. Bylaws committee: No updates.	No action required.		
Jenna Green, Interim Executive Director, provided department updates. Referenced the full September CHCB Memo in Board packet, photos and events from the past month: National Community Health Worker Awareness Week Aug. 24-30. Fernhill Health Center Board & Staff Tour/PCC Opportunity Center on Aug 22. National Health Center Week Aug. 4-10 celebration, including mobile van offering some free services at the Back-to-School Fair in Rockwood on Aug. 8. Jenna shared recognitions and highlights from the CHCB memo: HRSA accepted our submission related to Health Center Board membership and the grant condition has been lifted! Elwood, Health Services Center Program Supervisor, selected to lead a	No action required.		
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	 Dental recruitment started for part-time hygienists Six pharmacy techs selected to new lead roles for expanded career pathway Development of accredited postgraduate clinical pharmacy residency program started with go-live July 2025 Questions? None. 			
Board Discussion (Closed Executive Session) Tamia Deary, CHCB Chair	Closed Executive session started at 7:53 pm and ended at 8:14pm	Motion to move into Exec Session: Kerry Second: Bee Yays: 8 Nays: 0 Abstain: 0 Decision: Approved No action required.		Next public meeting scheduled in-person on Oct 14, 2024
Meeting Adjourns	8: 14pm			

Signed:_		Date:	
	Kerry Hoeschen, Secretary		
Signed:_		Date:	
_	Tamia Deary, Board Chair		

Scribe: // Email: Jodi Shaw /jodi.k.shaw@multco.us