



Public Meeting Minutes
February 14, 2022
6:00 - 8:00 pm (Virtual Meeting)

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:

Harold Odhiambo – Chair

Dave Aguayo – Treasurer

Aisha Hollands - Board Member

Pedro Sandoval Prieto – Secretary

Tamia Deary - Member-at-Large

Darrell Wade – Board Member

Susana Mendoza – Board Member (late?)

Brandi Velasquez – Board Member

Adrienne Daniels - Interim Executive Director, Community Health Center (ICS)

Board Members Excused/Absent: **Fabiola Areola** – Vice Chair, **Kerry Hoeschen** – Member-at-Large

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
Call to Order / Welcome <ul style="list-style-type: none"> Chair, Harold Odhiambo 	<p>The Board Chair called the meeting to order at 6:09 PM</p> <p>A quorum was established.</p> <p>Victor and Lucia in attendance (Spanish interpretation)</p>	N/A	N/A	N/A
Minutes Review - VOTE REQUIRED <ul style="list-style-type: none"> Review January Public Meeting minutes for omissions/errors 	<p>Chair Odhiambo asked for approval or changes to the minutes.</p>	<p>Motion to vote as presented: Tamia Second: David</p> <p>Yays: - 7 Nays: - 0 Abstain: - 0</p> <p>Decision: Approved</p>		
Chat with Commissioner Susheela Jayapal <ul style="list-style-type: none"> Chair, Harold Odhiambo 	<p>Commissioner Jaypal is in her first term over District 2 which covers the North/NorthEast Portland region. The Commissioner is committed to services in these areas and looking to potentially grow services. She provided an introduction to include her personal background, history and priorities she brings to the County.</p>			

	<p>Priority Highlights :</p> <ul style="list-style-type: none"> • Her goal is to ensure that we at the County are doing everything we can to support people to have an equitable recovery, that's covid housing, and houselessness. • Recognizing that Black, indigenous people of color, immigrants and refugees are having a completely different experience of Multnomah County during the pandemic. We must support these communities so they can thrive • Prioritize working to support the environment and clean air • Community Safety <p>Project Highlights on the PCC workforce center :</p> <ul style="list-style-type: none"> • Create a partnership to build a full service center • Opportunities to reach patients we need to serve, • Work with PCC students and create internships and workforce paths <p>The Commissioner expressed interest to partner and collaborate with the CHCB in the future</p>			
<p>Chair's Guest</p> <ul style="list-style-type: none"> • Chair, Harold Odhiambo 	<p>Special guest : Tasha Wheatt-Delancy</p> <p>Tasha shared that she has submitted resignation with the County</p> <p>The Board Chair expressed his gratitude and dedication on behalf of the Board. He spoke of Tasha's resilience, persistence and commitment to ensure that our community received health care services.</p> <p>The Board Chair shared a quote from Audrey Lorde, "See, when I dare to be powerful, to use my strength in the service of my vision, then it becomes less and less important whether I am afraid". He made a dedication of Black History month to Tasha to thank her for her contributions. sacrifice and hard work.</p> <p>Tasha expressed her appreciation to the board and how the work drives her.</p> <p>Additional Board members highlighted Tasha's responsiveness and communication, as well as her willingness to support the Board's needs and questions. The Board expressed their gratitude for Tasha's integrity and clarity of purpose at a challenging time. She provided leadership and the health centers are better off from her services to the Board.</p> <p>Tasha thanked the Board for the experience and shared her appreciation for each Board member's dedication to this work.</p>			

	<p>The Chair noted that the CHCB will begin to prepare for the search for the next CEO and partner with Multnomah County to recruit for the position.</p> <p>Adrienne Daniels will remain the interim CEO. The Board will assemble a recruitment committee led by Dr. Hollands and will make the final hiring decision for the new CEO.</p>			
<p>External Audit & 2021 Financial Statements</p> <p>●Eric Arellano, Chief Financial Officer, Multnomah County</p>	<p>Eric presented a high level review of the most recent 2021 audit report results that came out in December 2021</p> <p>The Board was provided in their packet the external audit reports for review</p> <p>Highlighted that audit planning and communication must be provided to the CHCB regarding the external audit. Every year, when the County completes the audit process, they will share the results with the CHCB and provide an opportunity for questions/follow up that is required out of the audit report.</p> <p>Comments :</p> <p>The highlight of the audit report is appreciated but the Board requested to be included in other pieces regarding the Health Centers Programs.</p> <p>HC grant is the biggest grant the County receives and gets audited in cycles. The Board requested more audit/grant communication.</p> <p>Eric committed to work with ICS CFO Perry and the Board.</p>			

<p>Change of Scope - MAT/SUD Support- VOTE REQUIRED</p> <ul style="list-style-type: none"> Kevin Minor LCSW, Manager, Integrated Behavioral Health and Addiction 	<p>Multnomah County currently provides medication assisted treatment (MAT) and support for individuals experiencing substance use disorder (SUD) via a contracted community treatment provider. This was put in place at the start of these services due to perceived confidentiality concerns because of the nature of the services provided.</p> <p>Two staff are currently providing that service supported by a HRSA grant at the clinics in a contracted employee role which limits their to the consumer charts as well as hinders care team coordination and ability to document in charts.</p> <p>Changes in chart security enables ICS to provide this service “in house,” with county staff, to streamline documentation and enhance care coordination</p> <p>Providing MAT services “in house” requires a change the scope of how we provide services and requires a vote and approval CHCB</p> <p>This work is vital to the consumer and community we serve: MAT directly reduces opioid overdoses</p> <p>Current 2021 unintentional opioid overdose mortality data exceeds corresponding months of 2020 and 2019</p> <p>The proposed service change fosters patient-centered care and allow ICS to submit a change of scope request to HRSA on or before 12/31/2022 which would lead to more effective consumer care, as well as more seamless access.</p> <p>Questions?</p> <p>There was a question about why these services have not been “in-house” up til now.</p> <p style="padding-left: 40px;">There have been some changes in the privacy around substance use, disorder, treatment. Medication supported recovery and medication assisted treatment being are more integrated into primary care and so with that integration comes comfortability with the change.</p> <p>Should it be approved, what are the next steps?</p> <p style="padding-left: 40px;">The first step is to bring the 2 providers that were contractors. I think once that occurs we can evaluate this role within the clinic in terms of the immediate implication. In short, there are still some steps after this</p>	<p>Motion to vote as presented: David Second: Darrell</p> <p>Yays: - 7 Nays: - 0 Abstain: - 0</p> <p>Decision: Approved</p>		
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	<p>vote that require a communication with HRSA, and approval from HRSA, and other steps that include the creation of the role, posting, hiring, and so on. The hope is that it happens as soon as possible. but the reality of the situation is, many things outside of the control of the clinic</p> <p>Can you go back for a and share what the specific scope would be for staff? Currently we're using contracted staff. And so, if we were to go in-house, the role itself would change very little. The biggest change most likely would be that now since these individuals are within their primary care clinics they will be able continue to offer medication. assisted treatment patient support. They also may be able to provide behavioral health support for individuals that are struggling with both. The role itself would not change. Instead, it would be enhanced by being able to provide these services in our clinics and not from a contracted provider.,</p>			
4th Qtr Complaint & Incidents ●Kimmy Hicks, Project Manager, Quality Team (ICS)	<p>Kimmy gave an update to the Board on 4th quarter complaints and incidents. Total complaints that were presented are divided out by program area and also divided out by site.</p> <p>Comments/Suggestions :</p> <ul style="list-style-type: none"> ● The Board would like to see the outcome and resolutions of the complaints or incidents that occurred. Getting the full picture and what actions are taken to resolve the issues would be beneficial. <ul style="list-style-type: none"> ○ Kimmy to provide resolutions to the Board to present the full story and actions taken to resolve the complaints. 			
10 Minute Break				

HRSA Progressive Action Update

- Wendy Lear, Deputy Director, Multnomah County Health Department
- Eric Arellano, Chief Financial Officer, Multnomah County
- Jeff Perry, Chief Financial Officer, ICS

The County presenters provided the Community Health Council Board context with any adjustments to the General Fund sub-funds or any essentially transfer resources from the health center out or in providing that to the community health center.

- The County has moved into a new enterprise fund so all activity that used to be in these two general fund sub-funds are now within the Enterprise Fund, effective July 1st.
- What we refer to as any cash transfer which moves resources around from one fund to the other. Those have to be approved by our county board, but also if it impacts the health center.
- Any active movement of Health Center funds also needs to be approved by the CHCB. As of this date, any cash transfer that we had budgeted in are in this fiscal year. None of them impacted the health center.

Lisa Whedon from the Department of County Assets presented to talk at a high level about how to break down vacancy costs.

Questions :

Is there some way to display how the total square footage is determined/calculated for the health center?

- Yes, but the Health Department currently allocates costs based on the number of FTE as a proctor for school sq footage. But this question has come up, and we can certainly evaluate changing that methodology and going to a square footage methodology. We used to do that years ago, and moved to an allocation methodology based on FTE, because it was very comparable to square footage. Things have changed quite a bit over the last few years, and now, certainly with more people teleworking, and things like that.

For the buildings that are vacant, have there been any future thoughts leasing them out to other organizations at all to decrease the overall cost?

Generally vacancies are not for an entire building. Facilities in the midst of a space study due to the future of work/ teleworking. Working with a consultant on a long term project to evaluate space consolidation.

There are high schools listed here, and so help me to understand if the County owns the actual space, of justl renting the space out. Don't high schools typically own that space?

	<p>I think what this represents is least square footage, but it also has a cost associated there as well.</p> <p>If for whatever reason, we decide not to no longer use a HS space,, would that be a cost at all? I'm not saying remove services, I'm just saying looking at there's lots of high schools on this list.</p> <p>If the county and the Health Department made the decision to no longer be at a high school, and we were within the option of not renewing the lease, the County could consider getting out in that space and then there would be no costs I</p> <p>Has owning the buildings, rather than leasing them,been considered?</p> <p>If a department or program believes they will stay in a building long term, we do work with them on evaluating whether it makes sense to put an offer on the building or purchase another building nearby. Owning financially is a smarter approach.</p>			
HRSA Progressive Action Update (Executive Session)	<p>Pursuant to ORS 192.660, Subsection (2)(d) and (3), the CHCB called for a closed Executive Session to review HRSA mandated items that could impact bargaining. Contract bargaining is a protected and confidential process. So the CHCB retired to private Zoom room to receive the confidential report.</p>	<p><i>Motion to retire to Executive Session as presented: Tamia</i> <i>Second: David</i></p> <p>Yays: - 7 Nays: - 0 Abstain: - 0</p> <p>Decision: Approved</p>		
Committee Updates/Council Business ●Harold Odhiambo, CHCB Chair	<p>The Board Chair gave a few updates and highlights on Council Business.</p> <ul style="list-style-type: none"> ● HRSA Updates and to stay on priorities 			
Monthly Budget Report County Budget Update ●Jeff Perry, Chief Financial Officer, ICS	<p>Highlights :</p> <ul style="list-style-type: none"> ○ Period 6 YTD 50 percent complete <ul style="list-style-type: none"> ■ \$6,000,000 deficit year-to-day revenues are 60. ■ 8,000,000 and expenses are 63, point, \$4,000,000 <ul style="list-style-type: none"> ● This deficit It continues to be driven by a revenue shortfall, and it's not driven by an excess of spending <p>Questions:</p>			

	<p>Are the deficits pandemic driven?</p> <p>Staffing shortages across the board. There is a national shortage on EFDA's. Dental team is putting together new plans to get recruitments and projects into fruition. Understand we need to get productivity up and work toward those goals</p>			
<p>Strategic Updates</p> <ul style="list-style-type: none"> Adrienne Daniels - Interim Executive Director, ICS 	<p>Highlights :</p> <ul style="list-style-type: none"> We were featured on KATU News We have reached over 30k vaccines <ul style="list-style-type: none"> Planning a staff appreciation in March Officially submitted our uniform data system report Working closely with Francisco i'm making sure that we continue to recruit additional board members We have worked with the Board and completed requests <ul style="list-style-type: none"> Counsel Working with the data and privacy, consultant, contract completed and the work to start in spring Identifying additional media opportunities to highlight that our care Updating on our financial policies 			
<p>Meeting Adjourns</p>	<p>Meeting adjourned at 9:02pm</p> <p>The next public meeting will be on March 14, 2022</p>			

Signed: _____ Date: _____
Pedro Prieto Sandoval, Secretary

Signed: _____ Date: _____
Harold Odhiambo, Board Chair

Scribe taker name/email: Crystal Cook crystal.cook@multco.us