

Public Meeting Minutes July 11, 2022 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:

Harold Odhiambo – Chair Fabiola Arreola – Vice Chair Dave Aguayo – Treasurer Pedro Sandoval Prieto – Secretary Tamia Deary - Member-at-Large Kerry Hoeschen – Member-at-Large Darrell Wade – Board Member Brandi Velasquez – Board Member Aisha Hollands - Board Member

Susana Mendoza - Board Member

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

Board Members Excused/Absent:

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
Call to Order / Welcome Harold Odhiambo, CHCB Chair	The Board Chair called the meeting to order at 6:07 PM. A quorum was established with 10 members present Lucia Cabrejos and Carolina Loza Delgado in attendance (Spanish interpretation)	N/A	N/A	N/A
Consent Agenda -VOTE REQUIRED Harold Odhiambo, CHCB Chair		Motion to approve: Tamia Second: Fabiola Yays: - 10 Nays: - Abstain: - Decision: Approved		



Minutes Review - VOTE REQUIRED Review June 13 Public Meeting minutes for omissions/errors	Tamia requested the following comment be stricken from the meeting minutes as it is not in the style of the minutes to be included when no questions were raised. Page 4 under Cash Projections, "No questions were asked or raised about the cash projection report."	Motion to approve as amended: Tamia Second: KerryYays: - 8 Nays: - Abstain: -2 Decision: Approved
Quality Plan - VOTE REQUIRED Brieshon D'Agostini, Quality and Compliance Officer, ICS	 Brieshon reviewed the 2023 Annual Quality plan which consists of structure resources, quality assurance and quality improvement and then highlighted important changes. We will transition from a calendar year cycle to a fiscal year cycle We will clarify language in the description of quality key comments Changes in the work plan include updated key deliverables The work plan includes: OCHIN security tools and analysis Policy management framework Quality and safety software 	Motion to approve: David Second: BeeYays: - 9 Nays: - Abstain: - Decision: ApprovedKerry Hoeschen's vote not captured
Patient Experience Survey 2022 Q1 Report Linda Niksich, Program Specialist Sr Quality Committee	 Harold requests a more detailed report be moved to August's meeting. The full report will be provided in the board books in August. A pllot has began with Crossroads, we are working on a procurement to obtain a full time contract Additional languages were approved and will be added. Currently surveys for dental and pharmacy are being conducted in house, but we are working on a more uniform approach. 	



UDS Report Alex Lehr O'Connell, Sr Grants Management Specialist	 **Alex presented on Marc's behalf** Harold explains this report helps us understand the impact of our services UDS is a Uniform Data System and is reviewed from the prior calendar year, 2021. 2022 will be submitted in February of 2023. Demographics remain stable with 52,911 unique patients served. Continue to see a high proportion of BIPOC patients 22,486 were best served in a non-English language. The HRSA patient target number was 73,318, however in our SAC application we are proposing that number be modified to 66,170. Program costs were down \$5,445,855 due to the removal of some health center programs voted on by the board. Recent additions in quality measures for the UDS include depression remission at 12 months, HIV screening, breast cancer screening and statin therapy. Q. Harold asks what steps are being taken to show that we will reach the 66K level. A. Alex explains it is a tough climb, if we fail to meet the target there may be funding reductions, but they will be relatively minor and will not shut our doors. 		
Service Area Application Grant VOTE REQUIRED Adrienne Daniels, Interim Executive Director, ICS Alex Lehr O'Connell, Sr Grants Management Specialist **	 **Alex presented on Marc's behalf This is our main service grant. It is utilized to ensure we can maintain services for those who can't afford health care, including uninsured and underinsured patients. The \$9.8 million dollar fund is used to operate 7 health centers, 9 student health centers, 7 dental clinics, 7 pharmacies, and HIV health service centers. The majority of this grant is used for personnel, fringe benefits and indirect costs. This grant enables our health center to continue providing services and care to any person who needs healthcare. 	Motion to approve: Tamia Second: Darrell Yays: - 10 Nays: - Abstain: - Decision:	



		Approved
Change of Scope - Rockwood Health Center - VOTE REQUIRED Adrienne Daniels, Interim Executive Director, ICS	 Fred presented and asked the board to consider a change in the hours of operations. Requests to change the hours to 5 days a week 8:00am - 5:00pm due to staffing shortages. 3 of 7 providers have resigned, the minimum should be no less than 4 providers. With the expected number of staff, we are unable to offer late hours as previously supported. This change is expected to be temporary. The impact to patient care is expected to be minimal as we will continue to still serve patients. Q: Harold asks if we expect that within 6 months the issues of providers will be resolved. A: Fred answered yes, we believe that would be the time it takes to recruit and onboard new providers. Current patient panels would be sustained. Q: Pedro asks if this will affect dental and pharmacy. A: Fred responds no. Q: Pedro requests to meet Fred in person. 	Motion to approve:BeeSecond:FabiolaYays: - 9Nays: -Abstain: -Decision:ApprovedDavid Aguayo'svote not captured
Financial Operational Reserve Policy - VOTE REQUIRED Jeff Perry, Chief Financial Officer, ICS	Harold introduced that this policy will help us establish our first ever official reserve as part of the Enterprise Fund. Jeff presents the new operational financial reserve policy. Jeff explained there may be minor changes for the board to consider in the future, but the actual framework will remain the same. Funding has all been moved to our enterprise fund. There is a need to maintain adequate levels of reserve that will support the health centers in the event of unplanned shortfalls. These funds are not expected to replace a permanent loss of funds or budget gaps.	Motion to approve: Tamia Second: Fabiola Yays: - 9 Nays: - Abstain: - Decision: Approved
		David Aguayo's



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		vote not captured	
10 Minute Break			
10 Minute Break Patient Suicide and Behavioral Health Programs Update Kevin Minor LCSW, Manager, Integrated Behavioral Health and Addiction	Kevin reports a decline in suicide rates nationally. However, there were still 46,000 lives lost. Oregon has he 13th highest suicide rate, but the youth numbers dropped from the 11th to 18th in 2020. Specific to ICS from 2019-present we had 9 completed suicides. Numbers continue to rise across the BIPOC demographic. Possibly due to accessibility or communication, suicide is becoming less taboo. What are we doing to help? Kevin presented an overview of work in the health center to support behavioral health. This includes: Expanding the workforce with a complex mental health focus, focusing on transition of care, utilizing integrated peers (currently working with 4), #988, partnering with culturally specific resources and providing a racial equity support line. Q: Tamia asks if the support peers are paid. A: Kevin answers no, we are contracting with Lutheran Community Services (LCS) NW whose peers are certified but need to continue to receive working hours for certification. It was later clarified during the meeting that LCS does pay the support peers. Q: Aisha asks if demographics were provided regarding geographic areas where locally we are seeing a higher or lower level of suicide. A: Kevin answers no, but will work on providing that information. Q: Tamia asks if we have taken any surveys requesting information on what	N/A	
	other resources our clients are using. A: Kevin answers not currently, but will follow up.		
	other resources our clients are using. A: Kevin answers not currently, but will follow up. Tamia requests more information about the cultural resources and the equity		
	support line.		



Labor Relations Updates Adrienne Daniels, Interim Executive Director Bargaining and Negotiation	CHCB received confidential reports in a separate meeting room related to bargaining and labor agreements.	Motion to approve: Tamia Second: David	
Updates(Executive Session) CHCB to receive confidential report in separate Zoom		Yays: - 10 Nays: - Abstain: - Decision: Approved	
Monthly Budget Report and Financial Reports Jeff Perry, Chief Financial Officer, ICS Adrienne Daniels, Interim Executive Director	 JJeff and Adrienne presented the monthly health center financial reports. The CHCB continues to receive the full financial reporting packet, including balance sheets, journal entries, cash projections, and vacancies reports. Upon the request of the executive committee, a separate financial pdf called "financial essentials" is also included in the board packet for easier printing from home. Jeff presented the highlights of the financial reports through period 10. Revenue \$149,967,221 Expenditures \$120,934,818 Surplus \$29,032,405 Jeff highlighted a BudMod from May 11th authorizing a cash transfer to the new enterprise fund of \$9.3 million. The health center will need to close the fiscal year after the June month pending final grant spending and anticipates needing to utilize surplus funds to cover deficits in the dental program. Adrienne presented on health center vacancies for July 	N/A	



	 Currently have an increase of vacancies from the past month Average number of vacancies that are not yet posted or active recruitment stage increased from the previous month. The average number of vacancies that are in the final offer stage decreased from the past month, as a result of closed and completed offers overall. Approximately \$2M in lost revenue is estimated. 		
Board/Committee Updates Harold Odhiambo, CHCB Chair Dr Aisha Hollands, CHCB CEO Search Committee Team Lead Tamia Deary, CHCB Member at Large and Quality Committee Lead David Aguayo, CHCB Treasurer	 Dr. Hollands presented on CEO recruitment : We have identified a recruiting firm, and will post the position by July 20th. Tamia presented on the Quality Committee: Explains their focus was on the quality plan but they continue to do work so reports are timely. Dave was unable to access audio, so Adrienne spoke on his behalf: the Finance committee had reviewed the operational reserve policy. In addition, Dave has decided to step aside from his board member duties and will be working with Adrienne and Harold on a transition plan. He intends to remain on the board through the end of the year. We thank Dave for his hard work and commitment to the health center! Harold presented on the Executive Committee: Hearing updates on the board stipend options and ability to receive public comments. Information is in the board packets. 	N/A	



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Strategic Updates Adrienne Daniels - Interim	Adrienne Daniels, Interim ICS Executive Director, presented on the strategic update for the health center. The updates include:	
Executive Director, ICS	1. Patient and community voice:	
	-	
	a. Rx to Play has launched – this allows providers to "prescribe"	
	play time to parents and kids as part of pediatric care	
	b. We will be distributing free lego playsets for families this	
	summer	
	2. Workforce:	
	a. We have onboarded four new peer health interns to our	
	behavioral health team– partnership training program with	
	Lutheran Community Services to support refugee families (at	
	Midcounty and NE Health Center)	
	b. Primary Care teams will receive new COVID-19 vaccine	
	trainings this month to focus on pediatric vaccines	
	3. Fiscal responsibility:	
	a. Infrastructure for new reserve account is in development–	
	account will be mechanism for tracking funds and the policy	
	defines how the funds can be accessed	
	b. FY22 Budget year has now been completed –all funding is	
	now fully tracked and reported within the Enterprise Fund for	
	FY23	
	c. Negotiations with our CCO partners are in process for annual	
	contracts - including incentives and metrics for how well we	
	perform as a system, including for pt populations at higher	
	risk of adverse health outcomes	
	4. Equitable treatment:	
	a. Pediatric vaccines for ages 6 months - 5 years have arrived.	
	Vaccines will be available at our primary care clinics. We	
	continue to offer vaccines at all regular appointments and	
	hold COVID-19- specific vaccine appointments.	
	b. Reviews of our booster outreach effectiveness has shown that	
	postcard reminders were successful- will be repeating this	
	process this month	
	c. New patient "recall" system will begin on 7/20 for five of our	
	main locations. This system helps remind patients when they	

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	 are due for an appointment so patients don't have to remember on their own. 5. Noted Board priorities and projects: a. Facilities Costs i. Facilities director completed analysis and presented to executive committee and full board in June ii. Vacant space costs to be credited back in FV22 and FY23. b. Discretionary Fund i. Finance committee to develop recommendation, policy reviewed on 7/11 b the full board c. FTCA Coverage i. Document gathering phase and project plan is being mapped - anticipated submission by Fall 2022. Board Members should refer to the memo included in their board packets d. Legal Counsel Contract - completed! e. Data and Privacy Consultant i. Interviews completed, consultant working on recommendations f. Media and Advocacy Opportunities i. Multiple media interviews on the importance of pediatric COVID-19 vaccines (Univision, KOIN, Portland Tribune) g. Financial Policy Updates - completed! 	
Meeting Adjourns	Meeting adjourned at 8:33 PM	Next public meeting scheduled on 8/8/22

Signed:_____ Date:_____



Pedro Prieto Sandoval, Secretary

Signed:_____Date:_____Date:_____

Harold Odhiambo, Board Chair

Minutes approved, virtually, at the August 8, 2022 Public Meeting

Scribe taker name/email: Edie Honesto / Edie.honesto@multco.us