

**Board of Directors Meeting Minutes**

*Friday, August 28, 2020*

*1:00 p.m.*

*GCHC*

*VIA ZOOM MEETING*

*Board Members Present via call in:*

Claudnyse Holloman, Chair; Rob Podlesak, Steve Schwartz, Kyle McCree, Sam Olson, Erica Thrash-Sall, Autumn Bagley

*Board Members Absent*

Deborah Duckett, Sam Olson (excused), Yolanda Oliver-Yancey

*Guests*

Brian Swiecicki, Executive Director; Jean Troop, GCHC Deputy Director; Glen Chipman, GHS CFO; Sandy Sweet, GHS Sr. Accountant

**Meeting called to order at 1:04 p.m. by Claudnyse Holloman, Board Chair.**

**I. Adoption of Agenda**

*S. Schwartz moved to accept the agenda as presented, A. Bagley supported.  
Motion carried*

**II. Welcome & Introductions**

Board Chair welcomed attendees via Zoom. Executive Director introduced Mrs. Shawn Edwards, GHS Senior Director for Engagement, Diversity, and Inclusion and invited her to share her new role with the Board.

Mrs. Edwards shared that they are looking forward to advancing into the future. She shared some of the things happening currently such as listening circles to discuss anything that may have presented as a traumatic experience and how to move forward to a better place and space. Currently, there are two listening circles-COVID and Racial Relations. From the listening circles we have developed a task force called RACE-Racial Allies Creating Equities. All participants are volunteers from both GHS and GCHC. We have had eight listening circles and five task force meetings to date. Also, all new employees undergo Cultural Competency training and then annually thereafter.

She also spoke of the continuing partnership with the police department and how they are beginning discussions to shift into what can be done to bridge the gap in the inequities being experienced at this time regarding race relations.

Board Chair commended S. Edwards and her team in taking the steps to move forward in having these honest conversations and addressing today's issues in an open forum.

**III. Public Participation and Community Feedback**

None

**IV. Approval of July 24, 2020 Minutes**

*R. Podlesak moved to approve the July 24, 2020 minutes as presented, S. Schwartz supported. Motion carried*

**V. Finance Committee Summary (The financial packet is on file with minutes).**

- a. July Financials*
- b. HRSA Notice of Award*
- c. Compliance Exam Report*

R. Podlesak summarized that we had another good month with a surplus of just over \$38,000 and a year to date surplus of \$669,685. He stated that the same things are holding true as were holding true last month in that we are down on revenue and up on our HRSA grants due to the special COVID grants. Expenses are down in certain areas; however, others such as medical supplies are up.

As far as the A/R performance, he noted that A/R over 120% and Days in A/R have ticked up slightly. He stated that the Finance Committee discussed the reasons and are satisfied with the explanation and what management is doing to combat the increase and expects to see an improvement in the coming months. The claim denial rate and average day submissions went up a little, but still under the goals.

Moving onto the Cost, Reimbursement & Productivity Statistics, he stated that the encounters had a slight increase from June. The Unique Patient Count was 162 and Medicaid Eligible Encounters were 1,10. The NP encounters on the healthcare side were 9.2 compared to 12 budgeted and on the behavioral health side, they were 6.9 compared to a budgeted 10. SW encounters per day did take a dip to 4.8, we had budgeted 6 and in June we were at 6.4. Overall, the cost per encounter did increase in July to \$337. R. Podlesak stated that productivity was discussed at Finance Committee and with the current challenges, the committee is satisfied with the outcome at this time.

The Treasurer continued to review the remaining pages of the financial which were discussed in depth at the Finance Committee meeting and noted that on the Alternative Funding Sources page the comment that they come in on a quarterly/yearly basis. The fact that they were low this month is not a concern. He stated that he is pleased with the financial situation of the health center and that based on what can be controlled, the staff are doing a fabulous job. He recommended approval of the financial to the Full Board.

G. Chipman added that we are looking good, we are controlling cost where we need to and utilizing grants where we can. He expects in the last two months of this fiscal year more costs will be shifted to grants as guidelines permit.

B. Swiecicki stated that even though we lost some productivity in areas, it was picked up in others. He said that we broke 90% of services pre-COVID and is happy that we are moving in a forward direction. He added that the Health Coaches are increasing services, and most are reaching out to an average of 20 people per day with contact of an average of 12-14 per day.

At this time, B. Swiecicki asked the Board to give him the authority to use a small amount of funds to do something nice for the staff in appreciation of the hard work being performed during this stressful and challenging time. The Board supported the staff appreciation.

*S. Schwartz moved to grant B. Swiecicki the discretion to give the staff a tangible remuneration that shows the Administration and Board's appreciation for them, K. McCree supported.  
Motion carried*

S. Schwartz reminded the Board that at the Finance Committee, that the administration will provide to the Board the status of the surplus funds to review monthly.

*K. McCree moved to approve the FY2020 July Financial packet as presented, A. Bagley supported.  
Motion carried*

#### HRSA Notice of Award

B. Swicicki presented that HRSA awarded the Center with \$220,203.00, about \$53,203 was in quality dollars and \$167,000 was in integrated behavioral health services funding. This is a good amount of funding in addition to the original grant. He is proud of the staff and their ability to achieve the level of quality of services and being recognized by HRSA.

*A. Bagley moved to approve the HRSA Notice of Award in the amount of \$220,203.00, K. McCree supported.  
Motion carried*

G. Chipman reviewed the Compliance Audit with the Board (on file with minutes). This audit does not have an impact on the Health Center per se. It does review all the policies and procedures relating to the GHS Financial Status Report. There report stated that in the opinion of the auditors, the FSR prepared by GHS complied in all material respects as of September 30, 2019. There were no deficiencies reported.

S. Schwartz moved to accept the FY19 Compliance Audit as presented, K. McCree supported.  
Motion carried

## **VI. Contract Summary**

- a. OSIS-PCMH Toolkit
- b. MOU/Business Associated Agreement with Greater Flint Health Coalition

C. Holloman stated that the contracts were reviewed and discussed at the Finance Committee meeting.  
G. Chipman gave a summary of contracts.

R. Podlesak moved to approve the OSIS and MOU contract as presented in the summary, K. McCree supported.  
Motion carried

## **VII. Quality and Safety Summary**

- a. Quality June Minutes
- b. Chart total Kept Appointments for July 2020
- c. COVID-19 Encounters by Specialty for July 2020
- d. Provider Privileging
- e. Azara Depression
- f. Azara UDS Diabetes Measure
- g. UDS Quality Measures

J. Troop presented the summary from the July Quality meeting. She stated that the Depression Remission is a new measure and it was noted that the rates at this time are not too bad. We are still working on measuring it and making sure that correct steps are being taken to meet the needs. It was noted when

they reviewed the quarterly UDS measure that there were some decreases in some of the percentages which is a contributing factor of COVID and the telehealth sessions. HRSA is aware of the issues with the quality indicators due to the pandemic and it was addressed in the July Quality meeting. Plans are being put in place to correct and get back on track.

The Deputy Director stated that Dr. Phung's information and charts have been reviewed by Dr. Levine and it has recommended to give full privileging for the extended six months of Dr. Phung's contract.

The total kept appointment charts do show more in office visits for physical, behavioral and substance use health. Telehealth is also going up.

S. Schwartz expressed concern over peer review not being done. J. Troop explained that it did fall behind, and we are currently working on getting it caught up. In our new environment, it has presented a challenge, but we are working on a new method to get it caught up.

*A. Bagley moved to accept the Quality and Safety Committee summary as presented, R. Podlesak supported.*

*Motion carried*

*S. Schwartz moved to approve Dr. Phung's full privileging for the duration of the six-month contract extension, K. McCree supported.*

*Motion carried*

### **VIII. Executive Director Report**

The ED presented his report and brought the following things to the Board's attention:

◇Both Atherton and Center City sites were recognized and received the Person-Centered Medical Home Recognition by the MCQA. This is a national accreditation and shows that quality is being achieved on a regular basis.

◇As of last month, we were at 83% of pre-COVID numbers as far as the patients being seen. The majority, about 70%, is in telehealth.

◇Over 1,100 people have been tested through the testing sites. We continue to reach out to the underserved communities.

◇Several media links were sent for the Board's review. We continue to reach out and let the community know about the services and keep us visible in the community. Even though we were not able to do the onsite celebration for National Health Center Week as we have in the past, we were still able to reach out on social media sites to promote Health Centers and staff.

◇The Center is also doing Recovery for All virtual meeting and Narcan virtual trainings. We have even had people from out of state attend the virtual Narcan trainings so that they can obtain the kits in their state.

◇Several staff are being added: NP's, CMA and LPN. These are replacements as well as preparing to staff the new location. We are shooting to open the new location mid-September; however, there is red tape we are working through regarding permits and inspections, so this is a moving date.

B. Swiecicki presented a summary on the Strategic Plan progress and what is being done. The Strategic Plan with updates is in the packet and on file with the minutes, a few of the highlights are below:

- ✿ Workforce development continues
- ✿ Health Equity continues
- ✿ Partnerships with the Community (notably the partnership with Berkley Place)
- ✿ Managing quality and financial services
- ✿ Communication and Marketing continues
- ✿ Data Analytics-continuing to build to show reports on a regular basis

Board Chair congratulated the Center on the PCMH recognition. She thanked the executive team and staff for the work to keep the Strategic Plan goals moving forward.

S. Schwartz also applauded the administration and staff for keeping the services going during the pandemic, establishing a new center site, as well as the strategic plan goals being exceeded.

**IX. OSV!**

J. Troop presented Element D-Chapter 19 which is Board Authority. This chapter talks about adopting, evaluating, and updating health center's policies. Some of the questions that would be asked in this section would be: 1) Within the last three years, has the board adopted or evaluated health center policies in the following areas: Sliding Fee Discount Program, Quality Improvement Assurance Program and Billing and Collection policies. J. Troop stated that this board has completed this standard. 2) Is the health center able to provide 1 or 2 examples of how it modified or updated policies as a result of these evaluations. This happened when we reviewed the Sliding Fee Scale as it related to the nominal fee and a change was made.

The Strategic Plan is done every three years and is part of the Needs Assessment. The ED did a wonderful job presenting a review and update.

**X. Other**

None

**XI. Adjourn**

*S. Schwartz moved to adjourn, K. McCree supported.  
Motion carried*

*Meeting was adjourned at 2:18 p.m.*

Next Board Meeting is scheduled for:  
September 25, 2020 @ 1:00 p.m.  
Via ZOOM

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Claudnyse Holloman, Board Chair

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Date