

## GCHC BOARD OF DIRECTORS MEETING MINUTES

May 27, 2021 @ 1:00 p.m.

VIA Zoom

### Board Members Present via Zoom:

Claudnyse Holloman, Chair; Autumn Bagley, Sam Olson, Steve Schwartz, Angela Essenburg, Yolanda Oliver-Yancey

### Board Members Absent:

Kyle McCree, Deborah Duckett, Erica Thrash-Sall

### Guests:

Jean Troop, Executive Director; Glen Chipman, GHS CFO; Sandy Sweet, GHS Accounting Manager

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

### **I. Adoption of Agenda**

J. Troop added two additions to the agenda – Credentialing and Privileging Policy and Form 5A Services. S. Schwartz added an item regarding the Executive Director for a closed session.

S. Schwartz moved to accept the Agenda as amended, supported by A. Bagley.

*Motion carried*

### **III. Public Participation**

None

### **IV. Approval of April 23, 2021 Board Minutes**

S. Schwartz moved to approve the April 23, 2021 minutes as presented, supported by S. Olson.

*Motion carried*

### **V. Finance Committee Summary**

#### **a. FY21 April 2021 Financial Report**

#### **b. FY21 Budget**

a. G. Chipman presented the April finance summary. As expected, due to continuing circumstances, the revenue is down. He noted that the total revenue for April 2021 was \$597,657 compared to budget of \$643,175, which is (\$45,519) under budget. The total expenses for April were \$605,388 compared to a budget of \$618,359, which is (\$12,972) less than the budgeted expenses. The deficit for the month of April was (\$7,731) with a budget of \$24,816. The total actual year-to-date deficit is (\$10,357) compared to the budget of \$173,713. G. Chipman explains that volume is still low due to COVID-19 and costs are constantly being reviewed.

The Other Expenses page showed that we are under budget by (\$12,972). The Contracted Services category was over budget by \$80,124. Machinery & Equipment was also over budget by (\$12,810) due to a purchase of a temperature kiosk. All costs were covered by grant dollars and did not have an effect on budget. G. Chipman reiterates volumes are still low and we are making a conscious effort to grow our Health Center. Currently we are over-staffed in preparation for growth.

The Balance Sheet shows assets of \$3,395,968 and total liabilities of \$863,208 which created a net position of \$2,532,759.

The Cost, Reimbursement & Productivity Statistics page showed Unique Patient Count is at 217 compared to budget of 750; the Medicaid eligible encounters is at 1,037 compared to the budget of 1,531. The productivity for health provider encounters decreased from March to April down to 7.2 per day compared to budget of 12.0; the behavioral health care provider encounters also decreased in April to 5.1 per day compared to a budget of 10.0. Social Worker encounters in April remained consistent from March at 5.1 encounters per day with a budget of 6.0. The total cost per encounter was \$386 compared to a budget of \$314. There were 20 working days in April 2021.

The total April 2021 revenue of base grants was \$134,081 and \$30,742 for the non-HRSA grants. There was \$32,700 of revenue from Meaningful Use dollars reported from Alternative Funding Sources.

The last page of the financials is the Reconciliation of Medicaid Wrap Advance Payments in Deferred Revenue sheet which shows the Medicaid Wrap deferred revenue balance is \$620,293. The Medicaid Wrap Balance totals \$613,032. The plan is to begin resuming the wrap payments at the beginning of the next quarter (October).

**S. Schwartz moved to accept the March 2021 Financial Packet as presented, supported by A. Essenburg.**

*Motion carried*

b. G. Chipman presented the Grant Year 2021 budget that begins May 1, 2021 through April 30, 2022. It outlines all Health Center grants.

**A. Bagley moved to accept the FY21 Budget as presented, supported by S. Schwartz.**

*Motion carried*

## **VI. Quality and Safety Summary**

- a. March 2021 Meeting Minutes
- b. Quarterly Peer Review
- c. Quarterly Collaborative Review
- d. Diabetes Quality Improvement Project
- e. UDS Quality Measures
- f. Leann Luke Credentialing and Privileging
- g. Credentialing and Privileging Policy

a. J. Troop presented the Quality and Safety Summary. She presented that the Quality Committee met via email this month due to the meeting being scheduled the same day as the HRSA entrance conference. J. Troop submitted a list of seven licensed Providers that were due to be re-credentialed and the Quality Committee approved the list via email. There were no lawsuits or sanctions on their licenses, immunizations and life-saving trainings were up to date for each Provider on the list. J. Troop states Leann Luke was a new credential on the list who is a new hire RN.

b. c, d, e. J. Troop noted that all items were discussed and presented at the April Board of Directors Meeting.

**Y. Oliver-Yancey moved to approve Leann Luke credentialing and Privileging, supported by S. Schwartz.**

*Motion Carried*

g. J. Troop presented the Credentialing and Privileging Policy. She noted the changes to the policy with amended verbiage to remain in compliance with our Credentialing and Privileging Policy.

**A. Bagley moved to approve the Credentialing and Privileging Policy, supported by Y. Oliver-Yancey.**  
*Motion Carried*

**VII. Form 5A Services**

J. Troop presented Form 5A and explained the removal of “Coverage for Emergencies During and After Hours” and the addition of “Screenings” for labs.

**A. Bagley moved to approve the Form 5A Services, supported by Y. Oliver-Yancey.**  
*Motion Carried*

**VIII. Personnel Committee**

C. Holloman states the Board Member Applicant has rescinded her application that was presented in the packet. Board Member recruitment and possible leads for new members were discussed. It was also discussed the need for a more diverse Board.

**IX. Strategic Plan Update**

J. Troop presented the strategic plan update; states quality of care continues to be the driving force and the need to focus on our priority population. She explained community partnerships have strengthened and continue to increase. It was noted that COVID-19 has helped strengthen community partnerships. She also explains the continuous education of NexGen, the EHR system, to maximize the features to a full capacity. J. Troop stated all staff were required to attend an implicit bias training and that we continue to work on diversity through trainings and new staff. Our Provider staffing has become more diverse. J. Troop states marketing GCHC continues to be a priority.

**X. Executive Director’s Report**

J. Troop states Provider on-site times continue to increase at both locations. Patient volume at the Atherton location is continuing to rise and states the spot of the new location is helping. We are working at 82% capacity prior to COVID-19. J. Troop explains we continue to do COVID-19 testing twice a week at the Atherton location and administer COVID-19 vaccines multiple days a week at the Center City location. The numbers for both testing and vaccines have significantly fallen. She explains we need to get into the neighborhoods and educate individuals on the importance of the COVID-19 vaccine.

J. Troop announced an ABO nurse. Mary Kobet, has been contracted for the vaccination team. We are looking to hire another ABO nurse to assist her.

J. Troop announced Nurse Practitioner, Kyle Taylor, has put in his resignation. His last day will be June 30, 2021. He was not planning on resigning but an opportunity fell in his lap that was a better fit for his family.

J. Troop explained we are continually monitoring grants to relieve costs in other areas when possible.

**XI. Diversity, Equity, and Inclusion**

Tabled until June Board Meeting.

**XII. OSV!**

Tabled until June Board Meeting.

**XIII. Other**

C. Holloman wanted to thank GCHC management of their hard work and dedication while preparing for the HRSA On-Site Visit. C. Holloman requested the Board Members enter a closed session room without the GCHC staff on the call. Upon their return the Board presented a motion for Jean Troop to receive a bonus.

**S. Schwartz moved to approve Jean Troop receiving a bonus, supported by Y. Oliver-Yancey.**  
*Motion carried*

**XIV. Adjourn**

**S. Schwartz moved to adjourn the GCHC Board meeting, supported by Y. Oliver- Yancey.**

The meeting adjourned at 2:07 p.m.

The next Board Meeting is scheduled for: June 25, 2021 at 1:00 p.m. via Zoom

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Claudnyse Holloman, Board Chair

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Date