

## GCHC BOARD OF DIRECTORS MEETING MINUTES

July 23, 2021 @ 1:00 p.m.

VIA Zoom

### Board Members Present via Zoom:

Claudnyse Holloman, Chair; Autumn Bagley, Steve Schwartz, Erica Thrash-Sall, Yolanda Oliver-Yancey, Sam Olson

### Board Members Absent:

Kyle McCree, Deborah Duckett, Angela Essenburg

### Guests:

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

Meeting was called to order at 1:08 p.m. by Steve Schwartz, Secretary.

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

A. Bagley moved to accept the Agenda as presented, supported by S. Olson.

*Motion carried*

### **III. Public Participation**

None

### **IV. Approval of June 25, 2021 Board Minutes**

S. Olson moved to approve the June 25, 2021 minutes as presented, supported by A. Bagley.

*Motion carried*

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

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

#### **b. Audit Reports Presentation**

a. G. Chipman presented the FY21 June Financial Report that was approved by the Finance Committee. He stated that the total revenue for June 2021 was \$515,017 compared to budget of \$643,175, which is (\$128,158) under budget. The total expenses for June were \$498,420 compared to a budget of \$618,359, which is (\$119,939) less than the budgeted expenses. The surplus for the month of June was \$16,597 with a budget of \$24,816. The total actual year-to-date surplus is \$21,866 compared to the budget of \$223,346. Contracted Services is the only category that is above budget with all expenses being paid for by a grant.

The Other Expenses page showed the total expenses for June was \$17,229 which is \$4,068 less than budgeted.

The Balance Sheet shows assets of \$3,334,568 and total liabilities of \$788,185 which created a net position of \$2,546,383. G. Chipman expresses the balance sheet is staying somewhat consistent with a positive trend.

G. Chipman presented the dashboard graphs in detail. They days in A/R totaled 56 days for the month of June, which is up from 48 days in March. The goal for days in A/R is less than 30 days. J. Troop explains the issues for the length of days have been identified and solutions are being put into place. A/R % over 120 days was up to 65% in June which is an increase from 40% in March.

The Cost, Reimbursement & Productivity Statistics page showed Unique Patient Count is 210 compared to budget of 750; the Medicaid eligible encounters is at 1,093 compared to the budget of 1,531. The productivity for health provider encounters slightly decreased from May to June down to 7.3 per day compared to budget of 12.0; the behavioral health care provider encounters also decreased in June to 6.2 per day compared to a budget of 10.0. Social Worker encounters in June decreased from May to 4.6 encounters per day with a budget of 6.0. The total cost per encounter was \$311 compared to a budget of \$314. There were 20.5 working days in June 2021. G. Chipman states we are still over staffed for the volume we are currently seeing. Within the months to come we are hopeful volumes will increase.

The total June 2021 revenue of base grants was \$145,600. G. Chipman explains we continue to utilize these grants to the greatest ability and explore new grants and ways to use the funds.

Alternative Funding Sources page shows we received \$8,100 of incentive money with a total of \$85,952 for the year.

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 \$497,596. The Medicaid Wrap Balance totals \$464,329. G. Chipman states in July we began receiving Advanced Wrap Payments again.

**b.** G. Chipman presented in detail the Audit Report. He explained the audit detailed we are doing everything we should be doing to maintain in compliance financially with no incidences or significant deficiencies. He explained the net position was 22 million with a change of 39 million dollars. G. Chipman also explained Region 10 provided us with enough funding to fund our entire pension liability.

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

*Motion carried*

**S. Olson motioned to table the Audit Report until the August 2021 Finance meeting for more time to review the documents, supported by S. Schwartz.**

*Motion carried*

## **VI.**

### **Quality and Safety Summary**

- a. Access to Clinical Advice Policy
- b. Patient Satisfaction Survey Results
- c. 2<sup>nd</sup> Quarter Peer Review Social Workers
- d. Testing & Vaccines by Race and Ethnicity

**a.** J. Troop presented the Access to Clinical Advice Policy. She states the policy has only one minor change; “When unable to answer immediately, a return call for medical advice will occur in a timely manner. (Generally 15-30 minutes)”. Previously the policy stated 60 minutes.

**b.** J. Troop presented the Patient Satisfaction Survey Results. She stated the responses have increased to 19%. The survey is now sent out through text and email. The variety is helping the number of surveys being received and survey incentives are being discussed.

**c.** J. Troop presented the 2<sup>nd</sup> Quarter Social Workers Peer Review. She explained Bridgette Cavette, Supervisor of Behavioral Health, performs the peer review. 12 charts were reviewed from March-May 2021 with all satisfactory standards reported.

**d.** J. Troop presented the Testing and Vaccines by Race and Ethnicity graphs. She states these graphs help show how we are providing health equity and areas we need to focus on. She also explained data from the State is

being used to plan outreach efforts for low vaccine areas. A.Bagley explains she appreciates the visual graphs and likes that we are using the data for outreach efforts.

**A.Bagley moved to approve Access to Clinical Advice Policy, supported by S. Schwartz.**  
*Motion Carried*

**VII. Personnel Committee**

J. Troop explained there were no grievances filed. The Board members discussed new Board Recruitment ideas. S. Schwartz detailed he visited the Atherton location and spoke with the Provider and Health Coach to ask for assistance with recruitment. A.Bagley discussed the need for the Front Desk staff at both locations to continue asking patients whom they think would be a good candidate.

**VIII. Executive Director's Report**

J. Troop announced medical providers were on-site full time starting July 1, 2021. Social Workers will begin a hybrid schedule beginning September 1, 2021. Due to office space they will be working in person only 3 days a week. Currently 21% of all clinic appointments are via telehealth.

J. Troop states we continue to work on vaccination resistance and education within the community. She announced we are still teaming up with GCARD two times a week for the Meet Up Eat Up events. Every week there is a lottery winner for a \$100 gift card drawing for people who received the vaccine during the Meet Up Eat Up events.

J. Troop discussed 14 community events we have participated in providing vaccines and vaccine education in the month of June. She explained we continue to visit areas in need with low vaccination rates, using data from the State to help these efforts. 1,906 COVID-19 vaccines have been administered from GCHC to date and 2,300 COVID-19 tests have been completed to date. She discussed events that are being planned with Genesee Health Plan with MPCA grant money we received.

J. Troop announced new employee Jori Reigle, Family Nurse Practitioner, will begin at the end of July. The Psych NP position has been posted again due to the last candidate rescinding the offer. She also explained that the Integrated Care Director position is still being evaluated.

J. Troop discussed National Health Center Week plans. Described the street event like prior years will take place again on August 11, 2021. She detailed sponsorship money will cover all costs for the event. She also announced that Region 10 gave all staff a \$500 bonus for working through the pandemic.

J. Troop discusses current marketing efforts currently through social media and radio. Discussed we are in the process of looking at bus wraps and billboards. She states we are tracking all referrals from new patients and tracking where they found us.

J. Troop announced an LPN and Health Coach are now offering blood pressure checks at Berkley Place apartments. She also announced COVID-19 testing is still being performed at Carriage Town every other week.

**IX. Diversity, Equity, and Inclusion**

E. Thrash-Sall led the conversation on Diversity, Equity, and Inclusion. She discussed the importance of voting on a consultant before the fall and arranging a date for training. She explained we need to focus on one topic to begin the process but to note we are not prioritizing one group over another. She stated we need in-depth training per-group with focus on one at a time. It was discussed and agreed upon by Board Members to hire a consultant for Racial Diversity first and then hire a LBGT consultant next. It was discussed to have a group training for Board Members after a Board Meeting, hopefully in the late fall or early winter, depending on consultants scheduling. J. Troop also discussed meetings she has attended regarding the LBGT community

and their needs and possible leads she may have for a consultant in that area. Everyone was directed to fill out the Google Document to update possible consultant leads.

**X. OSV!**

Tabled until August Board Meeting.

**XI. Other**

S. Schwartz expressed his concern of GCHC needing a full-time marketing employee. His concern is we are not branded enough and his concern over low unique patient counts. J. Troop explained we are in the process of an RFP for a marketing company. G. Chipman stated they are looking into finances to see if we can add into the marketing budget.

**XII. Adjourn**

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

The meeting adjourned at 2:12 p.m.

The next Board Meeting is scheduled for: August 27, 2021 at 1:00 p.m. via Microsoft Teams.

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Claudnyse Holloman, Board Chair

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Date