District Clinic Holdings, Inc.
d.b.a. C.L. Brumback Primary Care Clinics
Board of Directors Meeting
Summary Minutes
01/25/2023

Present: Melissa Mastrangelo, Chair; Mike Smith, Vice-Chair; Julia Bullard, Secretary; Joseph Gibbons, Treasurer; Robert Glass (ZOOM); William Johnson (Note: John Casey Mullen joined after roll call)
Excused: Tammy Jackson-Moore
Staff: Darcy Davis; Dr. Belma Andric; Bernabe Icaza; Candice Abbott;Alicia Ottmann; Dr. Charmaine Chibar; Alexa Goodwin; David Speciale; Marisol Miranda; Shauniel Brown; Andrea Steele; Lisa Hogans; Macson Florvil; Luis Rodriguez; Annmarie Hankins;Maria Chamberlin; Dr. Ana Ferwerda; Dr. Sandra Warren; Jon Van Arnam

Minutes Transcribed By: Shannon Wynn

The meeting is scheduled for 12:45 p.m.
Meeting Began at 12:52 p.m.

AGENDA ITEM	DISCUSSION	ACTION
1. Call to Order	Ms. Mastrangelo called the meeting to order.	**The meeting was called to order at 12:52 p.m.**
1A. Roll Call	Roll call was taken.	
1B. Affirmation of Mission	Ms. Mastrangelo read the affirmation of mission.	

2. Agenda Approval **2A. Additions/Deletions/ Substitutions** **2B. Motion to Approve Agenda Items**	None.	**VOTE TAKEN: Mr. Joseph Gibbons made a motion to approve the agenda. Mr. John Mullen duly seconded the motion. A vote was called and the motion passed unanimously.**
3. Awards, Introductions and Presentations	Dr. Andric introduced Alicia Ottman to the Board of Directors. Alicia Ottmann comes from an FQHC organization. The C.L. Brumback is excited to welcome Alicia to the organization. Alicia is exceptionally passionate about her work. Alicia will supervise the clinics and pharmacies. Alicia gave the Board a quick background of her experience as a patient, as a provider at a health center in Phoenix, AZ and about herself as a leader of an FQHC now and how excited she is to collaborate with the Board. Ms. Mastrangelo welcomed her. Dr. Andric also introduced Regina All to the Board. Gina, as she goes by, is our CNO. Ms. All added that she is here to help support and make any improvements needed. She is available to help. Dr. Andric introduced Lisa Hogans, Director of Nursing, and Maria Chamberlin, Assistant Director of Nursing.	**No action necessary.**

4. Disclosure of Voting Conflict	None.	**No action necessary.**
5. Public Comment	None.	**No action necessary.**
6. Meeting Minutes **6A-1 staff Recommends a MOTION TO APPROVE:** Board meeting minutes of December 13, 2022	There were no changes or comments to the minutes dated December 13, 2022.	**VOTE TAKEN: As presented, Mr. Gibbons made a motion to approve the Board meeting minutes of December 13, 2022. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.**
7. Consent Agenda – Motion to Approve Consent Agenda Items		**VOTE TAKEN: Mr.Gibbons motioned to approve the consent agenda. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.**
7A. ADMINISTRATION		
7A-1. Receive & File: January 2023 Internet Posting of District Public Meeting	The meeting notice was posted.	**Receive & File. No further action is necessary.**
7A-2. Receive & File: Attendance tracking	Attendance tracking was updated.	**Receive & File. No further action is necessary.**

7A-3. Receive & File: HRSA Digest	Per the request of the clinic board, we will include the latest HRSA Digest as available.	**Receive & File. No further action is necessary.**
7A-4. Staff recommends a MOTION TO APPROVE: Board Member Reappointments	This agenda item presents the Board with a recommendation to reappoint eligible Board members to a second term. The Bylaws of District Clinic Holdings, Inc. state Board membership will be for a period of four (4) years, starting on the date membership is approved and terminating four (4) years from the date of approval. No Board member shall serve more than two (2) consecutive terms. If at any time there is a question concerning the length of the term of office for any Board member, the Governing Board will decide through any appropriate means the term of the questioned incumbent. This agenda item includes the recommendation to reappoint the following members to the Board: Reappointments: Ms. Julia Bullard is a current Board member (2019-present). Mr. Michael Smith is a current Board member (2019-present).	**VOTE TAKEN: Mr.Gibbons motioned to approve the Board Member Reappointments agenda. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.**
7B. FINANCE.		
7B-1. Recommends a MOTION TO APPROVE: District Clinic Holdings, Inc. Financial Report November 2022	The November financial statements represent the financial performance through the second month of the 2023 fiscal year for the C.L. Brumback Primary Care Clinics. On the Comparative Statement of Net Position, cash decreased by $333k as a result of normal operations, and the shortfall will be subsidized in the upcoming months. Due from Other Governments increased $1.1M as a result of grant and LIP revenue recognition. New financial line items are reflected for "Right of Use Assets" and "Lease Liability" following the fiscal year 2022 implementation of Governmental Accounting Standards Board (GASB) Statement No. 87, Leases (GASB 87) and GASB Statement No. 96, Subscription-Based Information Technology Arrangements (GASB 96). On the Statement of Revenues and Expenses, net patient revenue YTD was unfavorable to budget by ($18k) or (1.1%). Gross patient revenue YTD was unfavorable to budget by $448k. Total YTD revenue was unfavorable to budget by ($424k); this was partially due to a timing difference in PRF and grant funds recognized. Operational expenses before depreciation	**VOTE TAKEN: Mr. Gibbons motioned to approve the District Clinic Holdings, Inc. Financial Report for November 2022. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.**

	were favorable to budget by $1.8M due mostly to positive variances in salaries, wages, and benefits of $1.5M, purchased services of $53k, other supplies of $101k, repair and maintenance of $85k, and lease and rental of $136k. Total YTD net margin was ($2.8M) compared to the budgeted loss of ($4.5M) resulting in a favorable variance of $1.7M or (38.3%). Net patient revenue YTD for the Medical clinics was marginally unfavorable to budget by ($27k). The Medical clinic's YTD gross patient revenue was unfavorable to budget by ($471k). The Medical clinic's total YTD revenue was unfavorable to budget by ($425k). These unfavorable variances primarily resulted from a timing difference in revenue recognition for PRF and grant funds. Total operating expenses of $4.2M were favorable to budget of $5.7M by $1.5M or 26.6%. The positive variance is mostly due to salaries, wages, and benefits of $1.3M, other supplies of $84k, repair and maintenance of $87k, and lease and rental of $125k. Staffing shortages, as well as expense timing, are driving these favorable variances. Total YTD net margin was favorable to budget by $1.4M or (35.7%). Net patient revenue YTD for the Dental clinics was unfavorable to budget by ($43k) or (10.1%). The Dental clinic's total YTD gross patient revenue was unfavorable to budget by ($56k). Increased charity care and contractual allowances negatively impacted net patient revenue results. Total YTD operating expenses of $750k were favorable to budget by $272k. Total YTD net margin was ($303k) compared to a budgeted loss of ($577k) for a favorable variance of $274k or (47.5%).	
8. REGULAR AGENDA		
A. ADMINISTRATION		
8A-1.Staff Recommends a MOTION TO APPROVE: Approve the Committee Appointment	This agenda item presents an interim Committee Appointment for the Membership/Nominating Committee. The Clinic Bylaws require current Committee Appointments. Committee appointments do not limit how long a Board Member can serve on a committee. The current Committee Appointments are: Membership / Nominating Committee:	**VOTE TAKEN: Mr. Mullen motioned to approve the Committee Appointment. Mr. Smith duly seconded the motion. A vote was called, and the motion passed unanimously.**

	John Mullen Irene Figueroa The New Appointed Membership/Nominating Committee members are: <u>Membership / Nominating Committee:</u> Joseph Gibbons William Johnson	
8A-2.Staff Recommends a MOTION TO APPROVE: Nomination of New Clinic Board Members	This agenda item recommends the appointment of Boris Seymore and Alcolya St. Juste to the Clinic Board. Mr. Boris Seymore has submitted an application for consideration for appointment to the District Clinic Holdings, Inc. Board of Directors. Mr. Seymore can contribute experience, energy, and passion for his knowledge of food and nutrition to the Board. Ms. Alcolya St. Juste has submitted an application for consideration for appointment to the District Clinic Holdings, Inc. Board of Directors. Ms. Alcolya St. Juste can contribute knowledge of the law to the Board. A copy of Mr. Seymore's and Ms. St. Juste's applications is attached to this agenda.	**VOTE TAKEN: Mr. Gibbons recommended the motion to approve the Nomination of the New Clinic Board Members. Mr. Smith duly seconded the motion. A vote was called, and the motion passed unanimously.**
8A-3.Staff Recommends a MOTION TO APPROVE: FY2023 Ending HIV Epidemic Grant Abstract & Budget	Total Funding for West Palm Beach, FL: $350,000 per year for three years • Community Health Center (CHC) Amount: $145,915 • Migrant Health Care (MHC) Amount: $167,055 • Health Care for the Homeless (HCH) Amount: $37,030 HRSA uses a two-tier submission process for SAC applications via Grants.gov and HRSA Electronic Handbooks (EHB). • Phase 1 - Grants.gov submitted January 17, 2022: The Grants.gov application must be completed, submitted, and assigned an HRSA tracking number before the applicant is allowed to access the phase two application. Once phase one is successfully processed, applicants receive a series of emails confirming this and that they have been given	**VOTE TAKEN: Mr. Gibbons recommended the motion to approve the FY23 Ending the HIV Epidemic. Mr. Smith duly seconded the motion. A vote was called, and the motion passed unanimously.**

access to phase two. Typically, this takes a few hours, but it may take up to 48 hours during peak volumes. You will receive four emails from Grants.gov.

- Phase 2 - HRSA EHB due February 16, 2023: After phase one is successfully processed, the phase two application will show up as a new project in your EHB profile with the appropriate due date.

Total $350,000 per year, CHC $ 145,915, MCH $167,055, HCH $37,030

Since 1988, the Health Care District of Palm Beach County (the District) operates a dynamic health care network that is a local government, ad valorem tax supported safety net health care system. It includes a public hospital, skilled nursing facility, school health program, nationally recognized rapid air emergency transport & care unit & a vibrant Federally Qualified Health Center (FQHC) program. A 7-member governing board leads the District in managing its $242.8 million budget in a fiscally responsible manner, with 73.2% allocated to the provision of direct health care services. Initial 330 (e)(g)(h) funding was secured in 2013 to support 4 FQHCs & was named the C. L. Brumback Clinics in honor of the county's first Health Department Director. District Clinic Holdings, Inc. was created as a wholly owned subsidiary to manage clinic operations to comply with governance requirements. This has since grown to include a robust system of 10 fixed & 3 mobile FQHC locations that provide a comprehensive range of primary and preventative care including adult, pediatric, women's health, dental, mental health, substance use disorder services & COVID testing. The target service area ID 031 West Palm Beach includes 46 Palm Beach County ZIP codes, 7 Health Professional Shortage Areas & 8 Medically Underserved Population areas. In 2021, 34,854 unduplicated patients were served over 104,194 clinic visits & 11,341 virtual visits comprising 29,786 medical, 9,033 dental, 3,951 mental health, 1,443 SUD patients. Of these, 5,953 were persons experiencing homelessness, 1,524 farmworkers & 153 veterans. The co-applicants plan to continue to provide vitally needed services targeting underserved individuals & families, and migrant/seasonal farmworkers & persons experiencing homelessness. The program outlined will provide access for those seeking care while targeting the unmet need in the community such as those with economic, cultural, social & linguistic barriers to care. The target population in the service area is 53% uninsured

	with disproportionately high rates of diabetes, obesity, heart disease, asthma, TB, HIV, & STDs. Our current HIV screening rate is 37% as of December 2022 and HIV Linkage to Care rates are at 82%. In 2021, 75% of patients reported incomes below 100% while 12% live between 101% & 200% of the Federal Poverty Level. Approximately 48% of patients required services in a language (Spanish and Creole) other than English. All services are provided on a sliding fee discount basis, regardless of ability to pay, as well as, through various public & private payors. The objective is to meet the needs of the community by providing a seamless integrated continuum of care across an established, trusted network of health centers. Services to be provided through our vast network of collaborative partners including infectious disease & additional enabling/supportive services. We will continue to reduce health disparities while continuing to provide access to affordable, high quality health services, available to all, across Palm Beach County. The proposed $350,000 per year "Ending HIV Epidemic" PCHP project monies will be used to increase the number of patients counseled and offer free testing for HIV and increase the percentage of patients newly diagnosed with HIV who are linked to care and treatment within 30 days of diagnosis through workforce development including training, testing, and outreach.	
8B. EXECUTIVE		
8B-1. Receive & File: Executive Director Informational Update	The Primary Care Clinics created dashboards to benchmark themselves against the State of Florida and the Nation. FY2023 Expanding COVID-19 Vaccination Grant On 12/2/2022, the clinics were awarded $361,336 in funding for allowable vaccine-related activities. EHB application was submitted on 1/8/2023, and the Prior Approval to change the Project Director was submitted on 1/9/2023.	**Receive & File. No further action is necessary.**
8B-2. Staff Recommends a MOTION TO APPROVE: Health Care District recommendation for replacement of Executive Director	Dr. Belma Andric was appointed by the District Clinic Holdings, Inc., d/b/a C. L. Brumback Primary Clinics ("Clinics") Board of Directors ("Board") as the permanent Executive Director in August of 2022. Since that time, she has served the clinics diligently in her role. Alicia Ottmann was hired and began working on 1/17/2023. The clinic staff is recommending Alicia Ottmann be made the Executive Director of the Clinics (HRSA Project Director).	**VOTE TAKEN: Mr. Mullens motioned to approve the Health Care District recommendation for replacing the Executive Director. Mr. Gibbons duly seconded the motion. A vote was called, and**

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<td>The Health Care District of Palm Beach County (“HCD”) and the Clinics entered into a co-applicant arrangement in 2012 to transition the responsibility for operating the four existing Federally Qualified Health Centers (“FQHC”) from the State of Florida Department of Health to the HCD. To maintain the FQHC status and to receive grant funding from the Health Resources and Services Administration (“HRSA”), certain authorities were delegated to the Board as requirements of the HRSA rules and regulations. Several of the key components of these responsibilities include:

• Establishment of general policies for operating the FQHC’s
• Approval for the selection and dismissal of the Executive Director
• Evaluation of the clinic activities, including productivity, patient satisfaction, achievement of project objectives and services utilization patterns
• Assuring that the clinics are operated in compliance with applicable federal, state and local laws and regulations
• Maintaining infrastructure agreements and contracts regarding sites, services and outreach
• Strive for the top quartile of Uniform Data System quality awards

Also, there is an agreement between the HCD and the Clinics, which further outlines the role of each party in operating the clinics. The HCD has a robust infrastructure that provides necessary operational support and employs the Clinics’ personnel. Additionally, both parties have agreed to jointly review and approve a budget and financial plan each year.

To maintain continuity and stability in these unprecedented times, as well as maintain transparency into any proposed changes to the delivery of care at the FQHCs, we believe that it would be in the best interest of the Clinics to allow Alicia Ottmann to step into this role. She can work with existing staff and leadership, as well as the Board and HCD Board, to develop suggestions to optimize care to patients of the FQHC’s in a cost-effective, sustainable manner.</td>
<td>the motion passed unanimously.</td>
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8C. CREDENTIALING

8C-1.Staff Recommends a MOTION TO APPROVE: Licensed Independent Practitioner Credentialing and Privileging

The agenda item represents the licensed independent practitioners recommended for credentialing and privileging by the FQHC Medical Director.

The LIPs listed below satisfactorily completed the credentialing and privileges process and met the standards set forth within the approved Credentialing and Privileging Policy. The credentialing and privileging process ensures that all health center practitioners meet specific criteria and standards of professional qualifications. This criterion includes, but is not limited to:

- Current licensure, registration or certification
- Relevant education, training and experience
- Current clinical competence
- Health fitness, or ability to perform the requested privileges
- Malpractice history (NPDB query)
- Immunization and PPD status; and
- Life support training (BLS)

Last Name	First Name	Degree	Specialty	Credentialing
Ottmann	Alicia	PA	Physician Assistant	Initial Credentialing
Fidler	Lisa	APRN	Nurse Practitioner	Initial Credentialing
Dessalines	Duclos	MD	Pediatrics	Recredentialing

Primary source and secondary source verifications were performed for credentialing and privileging elements in accordance with state, federal and HRSA requirements. A Nationally accredited Credentials Verification Organization (CVO) was utilized to verify the elements requiring primary source verification.

The C.L. Brumback Primary Care Clinics utilized internal Credentialing staff and the FQHC Medical Director to support the credentialing and privileging process.

VOTE TAKEN: Ms. Bullard motioned to approve the initial credentialing and privileging of Alicia Ottmann and Lisa Fidler and the re-credentialing and privileging of Dessalines Duclos. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.

	Alicia Ottmann, PA, joined the West Palm Beach Clinic in 2023 as a Physician Assistant. She attended Midwestern University of Arizona and is certified as a Physician Assistant by the National Commission on Certification of Physician Assistants. She has been in practice for eight years and is fluent in Spanish. Lisa Fidler, APRN, joined the Lantana Clinic in 2023 as a Family Nurse Practitioner. She attended the West Virginia University School of Medicine and is certified as a Family Nurse Practitioner by the American Nurses Credentialing Center. Duclos Dessalines, MD, joined the Lantana Clinic in 2017, specializing in Pediatrics. He attended National Polytechnic University and completed his residency at Mount Sanai Hospital. Dr. Dessalines is certified in General Pediatrics by the American Board of Pediatrics. He has been practicing for twenty-five years and is fluent in Creole, French and Spanish. Mr. Smith asked with will Ms. Ottmann plan to practice in the clinics. Ms. Ottmann stated she would like to go out to the clinics and take some walk-in patients to see how the clinics run.	
8D. QUALITY		
8D-1. Staff Recommends a MOTION TO APPROVE: Quality Reports	This agenda item presents the updated Quality Improvement & Quality Updates: • Quality Council Meeting Minutes January 2023 • UDS Report – YTD • Provider Productivity – December 2022 PATIENT SAFETY & ADVERSE EVENTS Patient safety and risk, including adverse events, peer review and chart review, are brought to the board "under separate cover" on a quarterly basis. PATIENT SATISFACTION AND GRIEVANCES Patient relations are to be presented as a separate agenda item.	**VOTE TAKEN: Mr. Smith made a motion to approve the Quality Reports as presented. Mr. Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.**

	QUALITY ASSURANCE & IMPROVEMENT Cervical Cancer Screening: Robust cleanup effort was undertaken to improve our cervical cancer screening metric. Staff reviewed patients' charts, including our old EHRs, to search for pap results in the chart that were not being pulled into our UDS report. Due to this effort, we discovered an additional 544 patients so far who did complete their cervical cancer screening, which contributed to an increase in our cervical cancer screening metric from 53% to 58% completed. UTILIZATION OF HEALTH CENTER SERVICES Individual monthly provider productivity is stratified by the clinic.	
8E. OPERATIONS		
8E-1. Staff Recommends a MOTION TO APPROVE: Operations Reports-December 2022	This agenda item provides the following operations reports for December 2022: Clinic Productivity, Demographics and Payor Mix. In December, the clinics had 11,142 visits which was 7% higher than the month prior and 9% more than in December of 2021. 40% of patients were from adults Primary Care, 23% from Dental and 13% from Pediatrics. The Mangonia Clinic had the highest volume, with 1,755 visits, followed by Lantana, with 1,676 visits. Our payer mix for December was 53% uninsured, which was 1% less than the previous month. 41% of patients were Managed Care and 5% were Medicaid. 60% of patients were female. 51% of patients reported as White and 40% as Black or African American. Of those patients, 40% reported as Hispanic. Our largest age group was those between 30-39 and 50-59. In December, the average English speaking was reported at 47%, 32% Spanish and 19% Creole. Patient population languages spoken vary between clinics. • In our Lantana Clinic, Spanish was the prominent language at 47%	**VOTE TAKEN: Mr. Gibbons made a motion to approve the Operations Reports- December 2022 as presented. Mr. Johnson duly seconded the motion. A vote was called, and the motion passed unanimously.**

	- The highest percentage of Creole-speaking patients were also in the Lantana Clinic at 30% - Jupiter, Boca and Mangonia had the lowest percentages of Creole-speaking - The Boca clinic had the highest percentage of Portuguese-speaking patients at 10%. Delray, Lake Worth and Lantana also have a small percentage of Portuguese-speaking patients at 1%. 97% of the patients in Mangonia reported as English speaking, followed by Jupiter with 69% English speaking. Mr. Smith asked how the No-Show rate was doing. Ms. Miranda stated it is consistent and she can bring it back to the Board if needed. Ms. Mastrangelo asked if the clinics are still using the translator machines. Ms. Miranda stated that the translator machines are used on a daily basis at the clinics.	
8F. PATIENT OPERATIONS		
8F-1. Staff Recommends a MOTION TO APPROVE: Patient Relations Dashboard Report - Q4 2022	This agenda item provides the following: Quarterly Patient Relations Dashboard Q4 - 2022 For Quarter 4 2022, 42 Patient Relations Occurrences occurred between 7 Clinics and Clinic Administration. Of the 42 occurrences, there were 6 Grievances and 36 Complaints. The top 5 categories were Care & Treatment, Referral Related, Communication Related, Respect Related and Finance Related issues. The top subcategory was Poor Communication, with 6 occurrences. There was also a total of 53 Compliments received across 7 Clinics and Clinic Administration. Of the 53 Compliments, 44 were patient compliments and 9 were employee-to-employee Thumbs-Up compliments. Mr. Gibbons asked how one measures "lack of compassion?"	**VOTE TAKEN: MS. Bullard motioned to approve the Patient Relations Dashboard Report Q4 2022 as presented. Mr. Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.**

	Mr. Speciale stated it's about perception. Dr. Andric stated the patient is always right. Ms. Mastrangelo asked for examples of refusal of treatment. In the example Mr. Speciale gave, a patient entered the clinic late in the day wanting a specific provider. The provider requested was not available, and the patient was triaged.	
9. AVP and Executive Director of Clinic Services Comments	Dr. Andric apologized for the late start of the meeting due to the lack of quorum, but Ms. Bullard could come in person so we could have a quorum.	**No action necessary.**
10. Board Member Comments	Mr. Johnson toured Mangonia Park and West Palm Beach Clinic and was greeted by Ingrid Barlett and Kim Bush. He hopes to tour other locations soon. Mr. Mullen praised Dr. Harberger for being a great provider. Mr. Smith thanked the staff for adding the HRSA Digest to the Consent agenda.	**No action necessary.**
11. Establishment of Upcoming Meetings	**February 22, 2023 (HCD Board Room)** 12:45 p.m. Board of Directors **March 29, 2023 (HCD Board Room)** 12:45 p.m. Board of Directors **April 26, 2023 (HCD Board Room)** 12:45 p.m. Board of Directors **May 24, 2023 (HCD Board Room)** 12:45 p.m. Board of Directors **June 28, 2023 (HCD Board Room)** 12:45 p.m. Board of Directors	**No action necessary.**

	<u>July 26, 2023 (HCD Board Room)</u> 12:45 p.m. Board of Directors **<u>August 23, 2023 (HCD Board Room)</u>** 12:45 p.m. Board of Directors **<u>September 27, 2023 (HCD Board Room)</u>** 12:45 p.m. Board of Directors **<u>October 25, 2023 (HCD Board Room)</u>** 12:45 p.m. Board of Directors **<u>November 28, 2023 (HCD Board Room)</u>** 12:45 p.m. Board of Directors **<u>December 13, 2023 (HCD Board Room)</u>** 12:45 p.m. Board of Directors	
12. Motion to Adjourn	Ms. Mastrangelo motioned to adjourn the public meeting. There being no further business, the meeting was adjourned at 1:46 p.m.	**VOTE TAKEN: Mr. Gibbons made a motion to adjourn. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.**

Minutes Submitted by: Julia Bullard 2/22/23

Signature **Date**