District Clinic Holdings, Inc. d.b.a. C.L. Brumback Primary Care Clinics Board of Directors Meeting Summary Minutes 01/27/2021

Present: Mike Smith, Chairperson; Irene Figueroa, Secretary; Tammy Jackson-Moore, Treasurer; James Elder; John Casey Mullen; Julia Bullard

Excused: Melissa Mastrangelo, Vice-Chairperson; Marjorie Etienne

Absent: N/A

Staff: Darcy Davis, Chief Executive Officer; Dr. Belma Andric, VP & Chief Medical Officer; Valerie Shahriari, General Counsel; Tony Colby, Interim VP & CEO; Dr. Hyla Fritsch, Executive Director of Clinic and Pharmacy Services; Shauniel Brown, Risk Manager; Thomas Cleare, AVP of Strategy; Robin Kish; Hector Sanchez, Director of Security Services; Andrea Steele, Executive Director of Corporate Quality; Martha Hyacinthe, Director of Corporate Risk; David Speciale, Director of Patient Experience; Patricia Lavely, Interim CIO; Jonathan Dominique, Clinic Quality Analyst; Dr. Charmaine Chibar, FQHC Medical Director; Alexa Goodwin, Patient Relations Manager; Donald Moniger, Desktop Engineer; Heidi Bromley, Executive Assistant; Shannon Wynn, Administrative Assistant; Joshua Burrill, Compliance and Regulatory Director; Rosella Weymer, Associate VP, Human Resources; June Shipek, Business Logistics Manager; Nicole Glasford, Executive Assistant; Jesenia Bruno, Director of Accounting; Mina Bayik, Director of Finance;

Minutes Transcribed By: Shannon Wynn

Meeting Scheduled For 12:45 PM Meeting Began at 12:48PM

AGENDA ITEM	DISCUSSION	ACTION
1. Call to Order	Mr. Smith called the meeting to order.	The meeting was called to order at 12:48pm
1A. Roll Call	Roll call was taken.	
1B. Affirmation of Mission	Mr. Smith read the affirmation of mission.	

2. Agenda Approval	Mr. Smith called for an approval of the meeting agenda.	VOTE TAKEN: Ms. Jackson-Moore made a motion to approve the agenda. The motion
2A. Additions/Deletions/ Substitutions	None.	was duly seconded by Mr. Elder. A vote was called, and the motion passed unanimously.
2B. Motion to Approve Agenda Items	Mr. Smith called for an approval of the meeting agenda	
 3. Awards, Introductions and Presentations 3A. COVID-19 Testing Update 	Dr. Andric presented the board with updates on the testing and vaccination efforts. Of the 144,864 COVID tests were performed, 12,457 were positive. The number of positive results seem to have increased during the winter season. Age distribution and demographic overall positivity rate is 9 percent.	No action necessary.
	The West Palm Beach testing site has closed, and the team started operating at the Fit Team Ball Park.	
	The South County Civil Center testing Site moved to the Delray Clinic and is now testing full days. These moves were to provide better operational tools for the District and community we serve.	
	Ms. Jackson-Moore asked why females outnumber males in the numbers of testing and positive results. Dr. Andric explained that, females are more likely than males to seek medical attention and get checkups.	
	12,369 doses of COVID-19 vaccine have been administered as of 1/25/2021. Of which 10,593 have been first dose of Moderna and 12,420 first dose of Pfizer. 454 doses of Moderna vaccine have been provided for the second dose.	
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 October 28th, 2020 	There were no changes or comments to the minutes dated October 28 th , 2020	VOTE TAKEN: Mr. Elder made a motion to approve the Board meeting minutes of October 28 th , 2020 as presented. The motion was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously.		
6A-2. Staff Recommends a MOTION TO APPROVE: Board meeting minutes of December 16 th , 2020	There were no changes or comments to the minutes dated December 16 th , 2020	VOTE TAKEN: Mr. Elder made a motion to approve the Board meeting minutes of December 16 th , 2020 as presented. The motion was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously.		
7. Consent Agenda – Moti	on to Approve Consent Agenda Items	VOTE TAKEN: Ms. Jackson-Moore made a motion to approve the consent agenda as presented. The motion was duly seconded by Mr. Mullen motion passed unanimously.		
7A. ADMINISTRATION				
7A-1. Receive & File: January 2021 Internet Posting of District Public Meeting	The meeting notice was posted.	Receive & File. No further action necessary.		
7A-2. Receive & File: Attendance tracking	Attendance tracking was updated.	Receive & File. No further action necessary.		
7B. FINANCE				
7B-1. Staff Recommends a MOTION TO APPROVE: C. L. Brumback Primary Care Clinics Financial Report – December 2020	The YTD December 2020 financial statements for the District Clinic Holdings, Inc. presented for Board review. Management has provided the income statements and key statistical information for District Clinic Holdings, Inc.	Motion referenced above, no further action necessary.		

8. REGULAR AGENDA 8A. ADMISTRATION	Additional Management discussion and analysis are incorporated into the financial statement presentation.	
8A-1. Staff Recommends a MOTION TO APPROVE: Nomination of Robert Glass to the Clinic Board	Thomas Cleare brought to the Board a motion to approve Robert Glass to seat as a Board member. The nomination committee has forwarded its recommendation for approval to the Board of Directors.	VOTE TAKEN: Ms. Jackson-Moore made a motion to approve the nomination of Robert Glass to the Board of Director. The motion was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously.
8A-2. Staff Recommends a MOTION TO APPROVE: Bylaws Update	Mr. Cleare presented for a second time the following updates made to the bylaws for board approval: This agenda item presents a change to the District Clinics Holdings, Inc. Bylaws. Per the Bylaws, all changes must come before the Board for two meetings before final approval. The Bylaw Change below was initially approved at the December 2020 Board Meeting. If approved at today's meeting, we will officially update the Bylaws to reflect the change. The change, provided below, allows the Quality Council meetings to be postponed during a state of emergency.	VOTE TAKEN: Mr. Elder made a motion to approve the Bylaws Update as presented. The motion was duly seconded by Ms. Figueroa. A vote was called, and the motion passed unanimously.
	11.6 The Quality Council shall review and make recommendations for clinical services, monitor progress of Health Care Plan objectives, review Clinical Outcome measures audits, monitor and review Quality Assurance and Continuous Quality Improvement, Principles of Practice, credentialing, community needs survey data, patient satisfaction survey, and recommend new clinical programs. The Quality Council will meet	

	 on a monthly basis. <u>If there is</u> <u>a declared state</u> of emergency declared at the <u>local</u>, state, or federal level that impacts the <u>Clinics</u>, the <u>Quality</u> <u>Council meetings may be postponed unless the</u> <u>circumstances make it impossible to meet</u>, if so, <u>then it shall be postponed</u>. The Executive Director, or his/her designee, will serve as a non- voting, ex-officio member of this committee. Mr. Smith asked if exposure to Covid-19 would be considered a reason to use Zoom/video conferencing. Ms. Shahriari answered that it would fall under the with the state of the state	
8A-3. Receive and File: Summary of Board Member Self- Evaluations	criteria. A tally of the CL Brumback Board of Directors' Annual Self Evaluation was presented for review.	Receive & File. No further action necessary.
8B. EXECUTIVE		
8B-1. Receive and File: Executive Director Information Update 8C. CREDENTIALING	Dr. Hyla Fritsch, Director of Clinical Operations and Pharmacy Services presented updates on Key changes within the C.L. Brumback Primary Care Clinics. No questions were asked by any of the Board members.	Receive & File. No further action necessary.
8C-1. Staff Recommends a MOTION TO APPROVE: Licensed Independent Practitioner Credentialing and Privileging	The agenda item represents the licensed independent practitioner recommended for credentialing and privileging by the FQHC Medical Director. The LIP 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	VOTE TAKEN: Ms. Jackson-Moore made a motion to approve the Initial Credentialing and privileging of Dr. Zito as presented. The motion was duly seconded by Mr. Elder. A vote was called, and the motion passed unanimously. VOTE TAKEN: Ms. Jackson-Moore made a motion to approve the Recredentialing and privileging of Dr. Dessalines as presented. The motion was duly seconded by Mr. Elder. A vote was called, and the motion passed unanimously.

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	requested p	-			
• 1	Malpractice	history (NPDB que	ery)	
•	mmunizatio	on and P	PD status;	and	
•	_ife support	training	(BLS)		
Last Name	First Name	Degree	Specialty	Credentialing	
Zito	Amalinnette	MD	Internal	Initial	
Last Name	First Name	Degree	Medicine Specialty	Credentialing Credentialing	
			Pediatric		
Dessalines	Duclos	MD	Medicine	Recredentialing	
(CVO) was source veri Clinics utiliz medical D privileging West Palm She attende and also co Hospital. Di American E practice for Duclos Des in 2017 spe National F completed Medical Ce Medicine by	utilized to v ification. The zed internal irector to process. An Beach Clin ed the Tula ompleted he r. Zito is ce Board of Int fifteen year salines, MD cializing in P Polytechniqu his Reside enter. Dr. E y The Ame en in practi	erify the he C.L. Creden suppor malinnet ic specia ane Univer Reside ertified in ternal M rs and is) joined t Pediatric ue Insti ncy at 1 Dessaline rican Bc ce for o	elements r Brumback tialing staff t the cre te Zito, Mi alizing in In versity Sch ency at Ja Internal M edicine. S fluent in S he West Pa Medicine. itute, Mey the Mount es is certif pard of Peo ver nineter	on Organization equiring primary c Primary Care and the FQHC edentialing and D is joining the ternal Medicine. ool of Medicine ckson Memorial Medicine by The he has been in panish. Alm Beach Clinic He attended the kico and also Sanai Hospital ied in Pediatric diatric Medicine. en years and is	

8D. OPERATIONS		
8D-1. Staff Recommends a MOTION TO APPROVE: Operations Reports	There were 7,453 visits in the month of November, which is down from the month prior, and all clinic locations except Mangonia did not reach the same volume of visits as in 2019. Our payer mix for the year to date is at 58% uninsured and the remainder have Medicaid, Medicare, or private coverage. Productivity targets for in-person visits were met for pediatrics. Adult telehealth visits continue to fall short of target.	VOTE TAKEN: Mr. Elder made a motion to approve the Operations Report as presented. The motion was duly seconded by Ms. Jackson-Moore. A vote was called, and the motion passed unanimously.
	The No Show rate November was slightly over 25% which is higher than that in October. Telehealth No Show rates remain low compared to in-person visits. In comparison, the year to date No Show rate is also 24%, of which in- person visits making up 85%.	
	A deep dive into Phreesia pre-registration revealed that No Show rates are even lower (only 17%) patients complete their pre-registration paperwork in advance of their appointment. Efforts continue to encourage pre- registration.	
	Ms. Jackson-Moore asked why the no show rate is higher than the previous months. Dr. Andric answered that the no-show rate is very low and actually is better than the prior years.	
	Ms. Jackson-Moore wanted to know if the no show rate was due to patient fear of COVID-19. Dr. Andric confirmed this.	
	Dr. Fritsch also stated that during the November- December months, patients tend to not see or make appointment because of the holidays.	

	Mr. Smith asked if the no-show rate has an effect on the productivity. Dr. Fritsch answered, Yes.Mr. Smith asked what the average time was for an inperson appointment. Dr. Fritsch answered that every visit lasts approximately Twenty minutes.	
8E. Quality		
8E-1. Staff Recommends a MOTION TO APPROVE Quality Reports	PATIENT SAFETY & ADVERSE EVENTSPatient 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 Quarter 3 data presented as separate agenda item. Progress has been made in the last year for our three PDCA's: Access, Communication & Referral Loop closure.QUALITY ASSURANCE & IMPROVEMENT In 2021, data for diabetes as well as screening and follow 	VOTE TAKEN: Ms. Jackson-Moore made a motion to approve the Quality Reports as presented. The motion was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously.

	Attached you will find the Diabetes Performance Analysis for our upcoming HRSA audit and our goals for the diabetes measure in 2021. <u>UTILIZATION OF HEALTH CENTER SERVICES</u> Individual monthly provider productivity stratified by clinic.	
8F-1. Staff Recommends a MOTION TO APPROVE Patient Relations Dashboard Q3	 Mr. David Speciale, Director of Patient Experience, presented the Quarter 3 patient relations dashboard. There were 76 Patient Relations Occurrences that occurred between 8 clinics, Clinic Administration and Warrior. Of the 76 occurrences, there were 16 Grievances and 60 Complaints. The top 5 categories were Communication, Care & Treatment, Physician Related, Finance and Environmental. The top subcategory with 31 Complaints and Grievances was Poor Communication. There was also 8 compliments received across 3 clinics, Pharmacy and Clinic Administration. Mr. Smith asked for more details on grievances and compliments. Dr. Andric stated that this is more for patient experience. Examples being wait time. Mr. Mullen shared that he had been to 4 different clinics for testing and every location was very well run and he enjoyed the service. 	VOTE TAKEN: Ms. Jackson-Moore made a motion to approve the Patient Relation Dashboard Q3 as presented. The motion was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously.
9. VP and Executive Director of Clinic Services Comments	Hyla informed the Board member's that the February 24 th meeting will be moved from 11:30 for the Finance meeting and 12:00 noon for the Board meeting. Reminders will be send via email.	No action necessary.
10. Board Member Comments	Mrs. Bullard's comments was directed to the School Board and not the HCD.	No action necessary.

12. Establishment of Upcoming Meetings	February 24, 2021 (HCD Board Room) 12:00pm Board of Directors	No action necessary.
	March 31, 2021 (HCD Board Room) 12:45pm Board of Directors	
	April 28, 2021 (HCD Board Room) 12:45pm Board of Directors	
	May 26, 2021 (HCD Board Room) 12:45pm Board of Directors	
	June 30, 2021 (HCD Board Room) 12:45pm Board of Directors	
	July 28, 2021 (HCD Board Room) 12:45pm Board of Directors	
	August 25, 2021 (HCD Board Room) 12:45pm Board of Directors	
	September 29, 2021 (HCD Board Room) 12:45pm Board of Directors	
	October 27, 2021 (HCD Board Room) 12:45pm Board of Directors	
	November 30, 2021 (HCD Board Room) 12:45pm Board of Directors	
	December 14, 2021 (HCD Board Room) 12:45pm Board of Directors	

13. Motion to Adjourn	There being no	further	business,	the	meeting	was	VOTE TAKEN: Mr. Smith made a motion to
	adjourned at 2:06	PM			Ē		adjourn. The motion was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously.

Minutes Submitted by:		DocuSigned by: INUM Figueroa	3/2/2021
	Signature	FB260D91263847C	Date