



C. L. Brumback

Primary Care Clinics

Health Care District Palm Beach County

BOARD OF DIRECTORS

October 24, 2018

12:45 P.M.

Meeting Location

1515 N. Flagler Drive, Suite 101

West Palm Beach, FL 33401

If a person decides to appeal any decision made by the board, with respect to any matter at such meeting or hearing, he will need a record of the proceedings, and that, for such purpose, he may need to ensure that a verbatim record of the proceedings made, which record includes the testimony and evidence upon which the appeal is to be based.



**BOARD OF DIRECTORS MEETING
AGENDA
October 24, 2018
1515 N. Flagler Drive
West Palm Beach, FL 33401**

1. **Call to Order – Bessie Brown, Chair**
 - A. Roll Call
 - B. Affirmation of Mission: To provide compassionate, comprehensive health services to all Palm Beach County residents, through collaboration and partnership, in a culturally sensitive environment.
 2. **Agenda Approval**
 - A. Additions/Deletions/Substitutions
 - B. Motion to Approve Agenda
 3. **Awards, Introductions and Presentations**
 - A. Target BP and CCCC Recognition Award
(Beth Mourelatos, Executive Director, Palm Beach County American Heart Association) [Pages 1]
 4. **Disclosure of Voting Conflict**
 5. **Public Comment**
 6. **Meeting Minutes**
 - A. **Staff recommends a MOTION TO APPROVE:**
Board Meeting Minutes of September 26, 2018. [Pages 2-9]
-
7. **Consent Agenda – Motion to Approve Consent Agenda Items**

All matters listed under this item are considered routine and action will be taken by one motion. There will be no separate discussion of these items unless a Commissioner or person so requests, in which the item will be removed from the general order of business and considered on its normal sequence on the Agenda.

 - A. **ADMINISTRATION**
 - 7A-1 **RECEIVE AND FILE:**
October 2018 Internet Posting of District Public Meeting.
<http://www.hcdpbc.org/index.aspx?recordid=2597&page=15>

7. **Consent Agenda – Motion to Approve Consent Agenda Items (continued)**

7A-2 **RECEIVE AND FILE:**

Attendance tracking.

[Pages 10]

B. **FINANCE**

7B-1 **Staff recommends a MOTION TO APPROVE:**

C. L. Brumback Primary Care Clinics Fiscal Year 2019 Proposed Budget.

(Dawn Richards) [Pages 11-18]

C. **CREDENTIALING AND PRIVILEGING**

8C-1 **Staff Recommends a MOTION TO APPROVE:**

Revised Primary Care Delineation of Privileges Forms.

(Sarah Gonzalez) [Pages 19-35]

8. **Regular Agenda**

D. **EXECUTIVE**

8A-1 **RECEIVE AND FILE:**

Executive Director Informational Update.

(Belma Andric) [Pages 36-37]

E. **OPERATIONS**

8B-1 **Staff Recommends a MOTION TO APPROVE:**

Operations Reports – September 2018.

(Terry Megiveron) [Pages 38-55]

F. **QUALITY**

8D-1 **Staff Recommends a MOTION TO APPROVE:**

Quality Council Reports – September 2018.

(Dr. Noelle Stewart) [Pages 56-74]

9. **VP and Executive Director of Clinic Services Comments**

10. **Board Member Comments**

**C. L. Brumback Primay Care Clinics
Board of Directors
Meeting Agenda
October 24, 2018**

11. Establishment of Upcoming Meetings

November 28, 2018 (HCD Board Room)

12:45pm Board of Directors

December 12, 2018 (HCD Board Room)

12:45pm Board of Directors

12. Motion to Adjourn



Target BP and CCCC Recognition Award

CL Brumback Primary Care Clinics has received the 2018 American Heart Association's Check.Change.Control.Cholesterol™ Gold award in recognition of their commitment to reducing the risk of heart disease and stroke through improved cholesterol management.

High cholesterol is one of the major controllable risk factors for heart disease, heart attack and stroke, estimated to cause nearly 2.6 million deaths annually. Yet, a survey from the American Heart Association shows that nearly two-thirds of people who have high cholesterol don't think they're at high risk for a heart attack or stroke. This program helps bring patients and healthcare providers together to recognize the issue, bring cholesterol under control, and help patients maintain control. The American Heart Association applauds CL Brumback Primary Care Clinics for their dedication and achievement of implementation.

Also, The American Heart Association (AHA) and American Medical Association (AMA) named CL Brumback Primary Care Clinics as one of the physician practices and health systems nationally recognized for a commitment to help patients improve blood pressure control through this year's Target: BP Recognition awards. Launched in 2015, Target: BP is a national initiative between the AHA and AMA aimed at addressing the growing burden of high blood pressure in the U.S.

More than 1,600 physician practices and health systems nationwide have joined Target: BP™, sharing a common goal to reduce the number of adult patients with uncontrolled blood pressure and improve health outcomes associated with heart disease. We salute your efforts to get people's blood pressure under control and reduce the number of Americans who have heart attacks and strokes each year.

The AHA would like to thank CL Brumback Primary Care Clinics medical staff. For the thousands of lives impacted every year, again, congratulations on a job well done!

**District Clinic Holdings, Inc.
d.b.a. C.L. Brumback Primary Care Clinics
Board of Directors Meeting
Summary Minutes
9/26/2018**

Present: Bessie Brown, Chairperson; James Elder, Vice Chairperson; John Casey Mullen (12:57 pm), Secretary; Frances Navarro, Treasurer; David Kendle; Cory Neering; Shanti Howard; Joseph Morel (1:04 pm)
Excused: Joan Roude; Irene Figueroa
Staff: Darcy Davis; Dr. Belma Andric; Valerie Shahriari; Thomas Cleare; Terry Megiveron; Dr. Tamara-Kay Tibby; Dr. Noelle Stewart; Sarah Gonzalez
Minutes Transcribed By: Marguerite Lynch
Meeting Scheduled For 1:00 PM
Meeting Began at 12:54 PM

AGENDA ITEM	DISCUSSION	ACTION
1. Call to Order	Mrs. Bessie Brown called the meeting to order.	The meeting was called to order at 12:54 pm.
1A. Roll Call	Roll call was taken.	
1B. Affirmation of Mission	Mrs. Bessie Brown read the Affirmation of Mission	
2. Agenda Approval	Mrs. Bessie Brown called for an approval of the meeting agenda.	VOTE TAKEN: Ms. Navarro made a motion to revise the agenda to move item A.8.2. to the first discussion item. The motion was duly seconded by Mr. Elder. A vote was called, and the motion passed unanimously.
2A. Additions/Deletions/ Substitutions	Mr. Kendle ask for a substitution to move the receive and file agenda item A.8.2. regarding upcoming vacant officer positions to a motion to Approve.	
2B. Motion to Approve Agenda Items	Agenda was revised as recommended by Mr. Kendle The agenda for the September 2018 meeting was approved.	

3. Awards, Introductions and Presentations	None.	No action necessary.
4. Disclosure of Voting Conflict	None.	No action necessary.
5. Public Comment	None.	No action necessary.
6. Meeting Minutes 6A Staff Recommends a Motion to Approve: Board Meeting Minutes of August 22, 2018	There was no discussion of the minutes dated August 22, 2018.	VOTE TAKEN: Mr. Elder made a motion to approve the minutes of August 22, 2018 as presented. The motion was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously.
7. Consent Agenda – Motion to Approve Consent Agenda Items		VOTE TAKEN: Mr. Elder made a motion to approve this agenda item. The motion was duly seconded by Mr. Kendle. A vote was called, and the motion passed unanimously.
7A. ADMINISTRATION		
7A-1. Receive & File: August 2018 Internet Posting of District Public Meeting	The meeting notice was posted.	No further action necessary.
7A-2. Receive & File: Attendance tracking	Attendance tracking was updated.	No further action necessary.
7A-3. Receive & File: CMO, VP & Executive Director of Clinical Services Annual Evaluation	Annual evaluation presented.	No further action necessary.
7B. FINANCE		
7B-1. Receive & File: C. L. Brumback Primary Care Clinics Finance Report August 2018	YTD Clinic volumes (medical, dental, and suboxone combined), are below budget by 12.8% or 17,447 visits. Suboxone clinic visits YTD of 3,398 were below budget of 14,109 by 10,711 or 75.9% due to unanticipated changes to the MAT strategy. All other medical clinics combined (net of suboxone) were slightly below budgeted volume by 143 visits or 0.2%. Mobile van visits YTD of 169 were below budget of 1,620 by 1,451 or 89.6%. Total	No further action necessary.

	revenues, year to date, are over budget by 13.5% or \$2.8M due to volume variance in medical clinics, including unbudgeted LIP payment and incentive payments. A year to date adjusting entry was made to segregate lump sum payments from individual patients and insurance payments to allow for more detailed tracking by payment type. Total operating expenses are under budget by 7.8%, or \$1.8M due to delayed strategy implementations. Net operating margin is a loss of \$1.0M compared to a budgeted loss of \$6.4M. YTD the Health Care District has subsidized the Primary Care Clinics with \$2.4M.	
7C. Quality		
7C-1. Receive and File: Targeted Survey – Nominal Charge for Dental Services	82% of patients agreed with the nominal fee amount they were charged of \$30.00 for dental.	No further action necessary
7D. Policies		
7D-1. Motion to Approve: Addiction Outpatient Treatment Program (AOTP) Policy updates	Staff recommends updates as presented for the following Addiction Outpatient Treatment Program policies: <ul style="list-style-type: none"> • 1401-17 Phases of Treatment • 1402-17 Positive Urine Drug Screens • 1403-17 Take-Home Dosing • 1404-17 Buprenorphine Product Management • 1405-17 Discharge and Transfer Criteria • 1406-17 Guidelines for Addiction Outpatient Treatment Program (AOTP) 	No further action necessary
8. Regular Agenda		
A. ADMINISTRATION		
8A-1. Motion to Approve: Nomination of New Board Member – Joseph Morel.	Staff recommends a motion to approve the nomination of new board member – Joseph Morel. Mr. Cleare introduced Mr. Morel to the board. After the vote was taken Mr. Morel thanked the board for the nomination and he looks forward to working with everyone.	VOTE TAKEN: Mr. Kendle made a motion to approve this agenda item. The motion was duly seconded by Ms. Howard. A vote was called, and the motion passed unanimously

<p>8A-2. Motion to Approve: Board Officer Positions</p>	<p>Mr. Cleare reviewed the potential open officer positions for 1/1/19 due to membership termination. Two positions will be open 1) Chair and 2) Treasurer. These two open positions will be for January 1, 2019 until the May 2019 annual election. Discussion took place and Mrs. Brown asked for volunteers for the Chair and Treasurer positions effective 1/1/19. Mr. Elder volunteered to be the Chair. Ms. Roude, who is not present, was recommended as Treasurer, since she is currently a member of the Finance Committee. With Mr. Elder moving to the Chair, the Vice Chair position will become vacant and this will require a volunteer to fill the open Vice Chair position. Mr. Morel volunteered to be the Vice Chair.</p>	<p>VOTE TAKEN: Mr. Kendle made a motion to approve the upcoming officer positions as follows:</p> <p>Mr. Elder – Chair Ms. Roude – Treasurer Mr. Morel – Vice Chair</p> <p>The motion was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously.</p>
<p>B. EXECUTIVE</p>		
<p>8B-1. Receive & File: Executive Director Informational Update</p>	<p>Dr. Belma Andric, CMO, VP & Executive Director of the Clinics presented the following informational update: Dr. Andric had a few verbal updates that have happened after the board package was mailed to you.</p> <ul style="list-style-type: none"> • Mobile Clinic ribbon cutting was held on August 30, 2018. Nice event and great opportunity to showcase the beautiful coach. • On 9/11/18 the HCD Board approved a new construction manager to begin the renovations at the Lakeside Medical Center to integrate our medical/dental clinics. Looking at a late spring 2019 completion. • Mental Health funding expanding access to substance use disorder and mental health services was awarded last week of \$313,000. This was \$30,000 more than we applied for. HRSA wants to support community health centers that are on the frontline of fighting opiate additions. This will support the expansion of the medication assisted treatment (MAT) clinic with a move to JFK North, expand staffing to increase patient volume from 100 to 200 patients, and renovations of the space. • American Heart Association awarded us target blood pressure award. They will present next 	<p>Received and filed.</p>

	<p>month at the board meeting. We are recognized for controlling blood pressure and cholesterol in our clinics.</p> <ul style="list-style-type: none"> National Association of Community Health Centers had a picture contest during National Community Health Centers week. The marketing department submitted a picture of the mobile van. We did not come in first, but we will be featured in the NACHC annual calendar. We will receive a canvas print of the photo to be displayed. <p>Mr. Neering asked how Dr. Andric feels after three months in her current position. Dr. Andric said it has been a seamless transition due to her administrative team and board support. It felt like a natural growth opportunity and she is comfortable with focusing the clinics moving forward with appropriate access to care. The Board offered their support to what they have seen in the last three months.</p>	
8C. OPERATIONS		
<p>8C-1. Staff Recommends a Motion to Approve: Operations Reports – August 2018</p>	<p>Terry Megiveron, Director of Operations, presented the overall clinic productivity for August 2018.</p> <p>Mr. Mullen asked about the lack of behavioral health in Jupiter. Patients are being sent to West Palm Beach for behavioral care.</p>	<p>VOTE TAKEN: Mr. Kendle made a motion to approve this agenda item. The motion was duly seconded by Ms. Navarro. A vote was called, and the motion passed unanimously.</p>
8D. CREDENTIALING & PRIVILEGING		
<p>8D-1 Staff Recommends a MOTION TO APPROVE: Licensed Independent Practitioner (LIP) initial credentialing and Privileging: Seneca Harberger, MD (Medical) & Paulo Oliveira, DDS (Dental)</p>	<p>Sarah Gonzalez, Director of Credentialing, presented the initial credentialing and privileging for Dr. Seneca Harberger, MD and Dr. Paulo Oliveira, DDS.</p> <p>Recredentialing and renewal of privileges for Dr. Claudia Montenegro.</p>	<p>VOTE TAKEN: Mr. Kendle made a motion to approve this agenda item. The motion was duly seconded by Mr. Elder. A vote was called, and the motion passed unanimously.</p>

<p>Licensed Independent Practitioner (LIP) Recredentialing and Renewal of Privileges – Claudia Montenegro, DO (Medical)</p>		
<p>8D-2 Staff Recommends a MOTION TO APPROVE: Modification of General Dentistry Clinical Privileges</p>	<p>Sarah Gonzalez, Director of Credentialing, presented modification of General Dentistry clinical privileges for the additional privilege to remove the sectioning of bridges to facilitate tooth removal:</p> <ul style="list-style-type: none"> • Dr. Zenaida Alonso, General Dentistry • Dr. Arwa Alwehaib, General Dentistry • Dr. Flora Bentsi-Enchill, General Dentistry • Dr. John Cucuras, General Dentistry • Dr. Robert Rotella, General Dentistry 	<p>VOTE TAKEN: Mr. Kendle made a motion to approve this agenda item. The motion was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously.</p>
<p>8E. QUALITY</p>		
<p>8E-1. Staff Recommends a Motion to Approve: Quality Council Reports</p>	<p>Dr. Stewart presented a summary of August 2018 Quality Council minutes included in the board package:</p> <ul style="list-style-type: none"> • Updating 48 hour metric report to be more comprehensive. • Retraining staff in the clinics regarding FIT test return rates. Award with a pizza party for the most returned. • American Cancer Society has asked to add some of our tools to their health center tool kit nationwide. • Updating referral institute. This is guide that details all procedures for referral clerks. • Peer review for new pediatric ARNP. Everything was appropriate standard of care • Peer review on new dentist in Delray. Additional training and supervision has begun. • Retraining for infection control in the clinics. • Baker act and utilization of the mobile crisis clinic will be added to the hospital follow up report. • Incident/Compliments/Complaints were review for the month of august. 	<p>VOTE TAKEN: Mr. Kendle made a motion to approve this agenda item. The motion was duly seconded by Ms. Navarro. A vote was called, and the motion passed unanimously.</p>

9. CMO, VP and Executive Director of Clinical Services Comments	None.	No action necessary.
10. Board Member Comments	<p>Mrs. Brown asked that there be an identifier added to the agenda, so she knows it is the end of the consent agenda.</p> <p>Mrs. Brown wanted to add a concern that she would like all patients treated the same as she met someone in the community, who didn't understand why he was denied for the District Cares program. Dr. Andric advised that there is a defined eligibility process for the District Cares program. Very often if all paperwork is not submitted to the Eligibility office the patient may be denied. The clinics will always see him for primary care services based on his income and placed on the appropriate sliding fee scale. He will never be denied primary care services at the clinics.</p> <p>Ms. Navarro complimented Dr. Andric for the terrific job she is doing. She also wanted to know if there are any plans for marketing material to promote the mobile clinic. Dr. Andric advised that the Communications Department is working hard to revise current marketing materials and promotion in the media. Ms. Navarro asked if the mobile van is going to Jupiter, and at this time they are not. Current focus is where the homeless are congregating.</p> <p>Mr. Kendle would like some updated brochures passed out at the next board meeting, so Board members can pass them out to locale schools and facilities to promote the clinics.</p> <p>Mr. Neering suggested reaching out to local municipalities to do proclamations to recognize the Health Care District 30 years of service and marketing the services in this way to the public. Communication is critical and have it read to the record. Ms. Davis likes the idea and she will take it back to the Communications Director.</p>	No action necessary.

	<p>Mr. Morel asked about creating a mobile clinic app that would advise patients where the van it will be on what days.</p> <p>Mr. Kendle commented that people don't want to know what is going on around them and there will only be so much we can do to get them to take care of their health.</p>	
11. Establishment of Upcoming Meetings	<p>October 24, 2018 (HCD Board Room)</p> <ul style="list-style-type: none"> • 12:45 p.m. Board of Directors <p>November 28, 2018 (HCD Board Room)</p> <ul style="list-style-type: none"> • 12:45 p.m. Board of Directors <p>December 12, 2018 (HCD Board Room)</p> <ul style="list-style-type: none"> • 12:45 p.m. Board of Directors 	No action necessary.
12. Motion to Adjourn	There being no further business, the meeting was adjourned.	Mr. Kendle made a motion to adjourn and Ms. Navarro seconded. The meeting was adjourned at 2:05 p.m.

Minutes Submitted by: _____
Signature
Date

**C. L. Brumback Primary Care Clinics
Board of Directors**

Attendance Tracking

	1/24/18	2/28/18	3/27/18	4/25/2018	5/23/18	6/27/18	7/25/18	8/22/18	9/26/18	10/24/18	11/28/18	12/12/18
Bessie Brown	X	X	X	X	X	C	X	X	X			
James Elder	X	X	X	X	X	C	X	X	X			
Frances Navarro	X	X	X	X	X	C	X	X	X			
David Kendle	X	X	X	X	X	C	X	X	X			
Irene Figueroa	X	X	X	E	X	C	X	X	E			
John Casey Mullen	X	X	E	X	X	C	X	X	X			
Mara Martinez	E	E	E	E	Termination							
Shanti Howard	X	E	X	E	X	C	E	X	X			
Cory M. Neering	E	X	X	A	E	C	X	X	X			
Joan Roude							X	X	E			
Joseph Morel									X			

X= Present

C= Cancel

E= Excused

A= Absent

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
October 24, 2018

1. **Description:** C. L. Brumback Primary Care Clinics Fiscal Year 2019 Proposed Budget

2. **Summary:**

The fiscal year 2019 proposed budget for the C.L. Brumback Primary Care Clinics is presented for approval.

3. **Substantive Analysis:**

Management has provided the fiscal year 2019 proposed budget and supporting schedules. The budget includes total expenditures and capital of \$31,296,081, and District support of \$13,050,000.

4. **Fiscal Analysis & Economic Impact Statement:**

	Amount	Budget
Capital Requirements	\$1,221,688	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Annual Net Revenue	\$18,017,381	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Annual Expenditures	\$30,074,393	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:


 Dawn Richards
 VP & Chief Financial Officer

5. **Reviewed/Approved by Committee:**

District Clinic Holdings, Inc. Finance
 Committee

 Committee Name

October 24, 2018

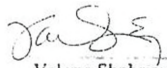
 Date Approved

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
October 24, 2018

6. Recommendation:

Staff recommends the Board approve the fiscal year 2019 proposed budget.

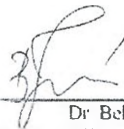
Approved for Legal sufficiency.



Valere Shahrian
VP & General Counsel



Dawn Richards
VP & Chief Financial Officer



Dr. Belma Andric
Chief Medical Officer, VP & Executive Director
of Clinic Services

District Clinic Holdings, Inc.



Fiscal Year 2019 Proposed Budget

Primary Care Clinics Trended Performance

	2015 Actual	2016 Actual	2017 Actual	2018	2019	Variance from 2018 Projected	
				Projected Actual	Proposed Budget	\$	%
Outpatient Revenue	\$ 12,756,737	\$ 14,839,521	\$ 18,878,041	\$ 22,432,150	\$ 24,192,958	\$ 1,760,808	7.85%
HCD Capitated Claims	4,214,884	3,948,941	-	-	-	-	-
Gross Patient Revenue	16,971,621	18,788,462	18,878,041	22,432,150	24,192,958	1,760,808	7.85%
Contractual Allowances	7,086,236	7,386,355	4,303,083	3,798,710	2,834,140	(964,570)	-25.39%
Charity	-	2,507,214	804,496	1,953,367	9,297,975	7,344,608	376.00%
Bad Debt	1,054,450	1,125,500	1,450,970	1,829,239	2,397,714	568,475	31.08%
Total Contractual Allowances and Bad Debt	8,140,686	11,019,070	6,558,549	7,581,316	14,529,829	6,948,513	91.65%
Net Patient Revenue	8,830,935	7,769,392	12,319,492	14,850,833	9,663,129	(5,187,704)	-34.93%
Collection Percentage (incl Unins Subsidy)	52.03%	53.80%	65.26%	66.20%	39.94%	-26.26%	
Grant Funds	5,957,586	6,645,901	6,665,844	7,560,063	8,169,515	609,452	8.06%
HCD Uninsured Subsidy	-	2,338,080	-	-	-	-	-
Interest Earnings	-	291	1,378	-	-	-	-
Other Revenue	147,001	184,549	692,114	249,373	184,737	(64,636)	-25.92%
Total Other Revenues	6,104,587	9,168,822	7,359,336	7,809,436	8,354,252	544,816	6.98%
Total Revenues	14,935,522	16,938,214	19,678,828	22,660,270	18,017,381	(4,642,889)	-20.49%
<i>Direct Operational Expenses:</i>							
Salaries and Wages	6,794,361	10,612,469	12,454,862	14,448,300	15,884,750	1,436,450	9.94%
Benefits	1,892,847	2,765,417	3,415,369	3,980,892	4,512,310	531,418	13.35%
Purchased Services	1,009,511	913,735	648,779	721,140	770,687	49,547	6.87%
Medical Supplies	-	189,616	382,918	479,264	537,905	58,641	12.24%
Other Supplies	347,775	299,858	328,060	163,496	336,384	172,888	105.74%
Contracted Physician Expense	729,019	24,225	49,534	15,355	-	(15,355)	-100.00%
Medical Services	-	-	-	-	750,000	750,000	-
Drugs	286,768	567,570	547,665	592,537	625,583	33,046	5.58%
Repairs & Maintenance	377,764	527,963	510,492	504,345	153,153	(351,192)	-69.63%
Lease & Rental	598,799	1,191,962	1,341,235	1,382,757	1,273,038	(109,719)	-7.93%
Utilities	24,175	35,917	42,433	71,280	74,999	3,719	5.22%
Other Expense	126,411	216,380	171,274	259,355	316,197	56,842	21.92%
Insurance	5,252	13,639	21,672	22,952	28,687	5,735	24.99%
Total Operational Expenses	12,192,682	17,358,750	19,914,294	22,641,673	25,263,693	2,622,020	11.58%
Net Performance before Overhead							
Allocations & Depreciation	2,742,840	(420,536)	(235,466)	18,597	(7,246,312)	(7,264,909)	-39065.83%
Depreciation	184,989	280,056	198,076	203,903	253,197	49,294	24.18%
Total Overhead Allocations	907,507	1,392,738	2,228,651	3,333,867	4,557,503	1,223,635	36.70%
Total Expenses	13,285,178	19,031,544	22,341,021	26,179,443	30,074,393	3,894,950	14.88%
Net Margin	\$ 1,650,344	\$ (2,093,330)	\$ (2,662,193)	\$ (3,519,174)	\$ (12,057,012)	\$ (8,537,838)	242.61%
Capital	-	-	-	87,400	1,221,688	1,134,288	1297.81%
General Fund Support/ Transfer In	\$ -	\$ 1,883,333	\$ 3,300,000	\$ 3,450,000	\$ 13,050,000	\$ 9,600,000	278.26%

Primary Care Clinics - Medical - Trended Performance

	2015	2016	2017	2018	2019	Variance from 2018 Projected	
	Actual	Actual	Actual	Projected Actual	Proposed Budget	\$	%
Outpatient Revenue	\$ 11,936,647	\$ 11,379,958	\$ 14,663,031	\$ 18,503,924	\$ 19,813,333	\$ 1,309,409	7.08%
HCD Capitated Claims	4,214,884	2,872,866	-	-	-	-	-
Gross Patient Revenue	16,151,531	14,252,824	14,663,031	18,503,924	19,813,333	1,309,409	7.08%
Contractual Allowances	6,760,436	5,627,256	4,077,566	4,523,442	2,990,687	(1,532,755)	-33.88%
Charity	-	1,877,128	622,432	1,365,134	7,262,482	5,897,348	432.00%
Bad Debt	1,054,450	960,464	1,384,286	1,851,799	2,206,082	354,283	19.13%
Total Contractual Allowances and Bad Debt	7,814,886	8,464,848	6,084,284	7,740,375	12,459,251	4,718,876	60.96%
Net Patient Revenue	8,336,645	5,787,976	8,578,747	10,763,549	7,354,082	(3,409,467)	-31.68%
Collection Percentage (incl Uninsured Subsidy)	51.62%	51.49%	58.51%	58.17%	37.12%	-21.05%	
Grant Funds	5,957,586	5,003,620	5,174,323	5,978,009	6,381,905	403,896	6.76%
HCD Uninsured Subsidy	-	1,550,280	-	-	-	-	-
Interest Earnings	-	291	1,378	-	-	-	-
Other Revenue	147,001	120,799	692,113	215,373	150,737	(64,636)	-30.01%
Total Other Revenues	6,104,587	6,674,990	5,867,814	6,193,382	6,532,642	339,260	5.48%
Total Revenues	14,441,232	12,462,966	14,446,561	16,956,931	13,886,724	(3,070,207)	-18.11%
<i>Direct Operational Expenses:</i>							
Salaries and Wages	6,256,936	8,310,144	9,867,841	11,830,252	12,952,765	1,122,513	9.49%
Benefits	1,798,282	2,235,531	2,693,652	3,210,497	3,659,988	449,491	14.00%
Purchased Services	997,899	844,386	540,028	619,504	634,300	14,796	2.39%
Medical Supplies	-	76,234	162,997	177,626	223,276	45,650	25.70%
Other Supplies	260,073	233,198	292,283	125,092	206,164	81,072	64.81%
Contracted Physician Expense	729,019	24,225	49,534	15,355	-	(15,355)	-100.00%
Medical Services	-	-	-	-	750,000	750,000	-
Drugs	255,684	489,298	530,842	573,063	603,616	30,553	5.33%
Repairs & Maintenance	344,110	429,209	438,168	442,794	94,946	(347,848)	-78.56%
Lease & Rental	539,030	871,282	1,017,188	979,998	958,930	(21,068)	-2.15%
Utilities	24,175	35,917	42,433	62,630	66,035	3,405	5.44%
Other Expense	122,034	200,800	152,591	222,854	275,150	52,296	23.47%
Insurance	5,252	13,083	20,356	20,900	27,982	7,082	33.89%
Total Operational Expenses	11,332,492	13,763,307	15,807,912	18,280,565	20,453,152	2,172,588	11.88%
Net Performance before Overhead Allocations & Depreciation	3,108,740	(1,300,341)	(1,361,351)	(1,323,634)	(6,566,428)	(5,242,795)	396.09%
Depreciation	176,767	145,284	48,699	54,208	72,864	18,656	34.42%
Total Overhead Allocations	829,251	1,090,430	1,783,043	2,631,374	3,671,292	1,039,918	39.52%
Total Expenses	12,338,510	14,999,021	17,639,654	20,966,147	24,197,309	3,231,162	15.41%
Net Margin	\$ 2,102,722	\$ (2,536,055)	\$ (3,193,093)	\$ (4,009,216)	\$ (10,310,585)	\$ (6,301,369)	157.17%
Capital	-	-	-	87,400	450,000	362,600	414.87%
General Fund Support/ Transfer In	\$ -	\$ 1,883,333	\$ 3,300,000	\$ 3,450,000	\$ 10,700,000	\$ 7,250,000	210.14%

Primary Care Clinics - Dental - Trended Performance

	2015	2016	2017	2018	2019	Variance from 2018 Projected	
	Actual	Actual	Actual	Projected Actual	Proposed Budget	\$	%
Outpatient Revenue	\$ 820,090	\$ 3,459,564	\$ 4,215,010	\$ 3,928,226	\$ 4,379,625	\$ 451,399	11.49%
HCD Capitated Claims	-	1,076,075	-	-	-	-	-
Gross Patient Revenue	820,090	4,535,638	4,215,010	3,928,226	4,379,625	451,399	11.49%
Contractual Allowances	325,799	1,759,099	225,517	(724,732)	(156,547)	568,185	-78.40%
Charity	-	630,087	182,064	588,233	2,035,493	1,447,260	246.04%
Bad Debt	-	165,036	66,684	(22,560)	191,632	214,192	-949.44%
Total Contractual Allowances and Bad Debt	325,799	2,554,222	474,265	(159,059)	2,070,578	2,229,637	-1401.77%
Net Patient Revenue	494,290	1,981,417	3,740,745	4,087,285	2,309,047	(1,778,238)	-43.51%
Collection Percentage (incl Uninsured Subsidy)	60.27%	61.05%	88.75%	104.05%	52.72%	-51.33%	
Grant Funds	-	1,642,282	1,491,521	1,582,054	1,787,610	205,556	12.99%
HCD Uninsured Subsidy	-	787,800	-	-	-	-	-
Other Revenue	-	63,750	1	34,000	34,000	-	0.00%
Total Other Revenues	-	2,493,832	1,491,522	1,616,054	1,821,610	205,556	12.72%
Total Revenues	494,290	4,475,248	5,232,267	5,703,339	4,130,657	(1,572,682)	-27.57%
<i>Direct Operational Expenses:</i>							
Salaries and Wages	537,425	2,302,325	2,587,021	2,618,048	2,931,985	313,937	11.99%
Benefits	94,565	529,886	721,718	770,396	852,322	81,926	10.63%
Purchased Services	11,612	69,349	108,751	101,636	136,387	34,751	34.19%
Medical Supplies	-	113,382	219,921	301,638	314,629	12,991	4.31%
Other Supplies	87,702	66,660	35,778	38,404	130,220	91,816	239.08%
Drugs	31,084	78,271	16,823	19,474	21,967	2,493	12.80%
Repairs & Maintenance	33,655	98,755	72,324	61,551	58,207	(3,344)	-5.43%
Lease & Rental	59,769	320,680	324,047	402,759	314,108	(88,651)	-22.01%
Utilities	-	-	-	8,650	8,964	314	3.63%
Other Expense	4,377	15,580	18,683	36,501	41,047	4,546	12.45%
Insurance	-	556	1,316	2,052	705	(1,347)	-65.64%
Total Operational Expenses	860,190	3,595,444	4,106,382	4,361,108	4,810,541	449,432	10.31%
Net Performance before Overhead Allocations & Depreciation	(365,900)	879,805	1,125,885	1,342,230	(679,884)	(2,022,114)	-150.65%
Depreciation	8,223	134,773	149,376	149,695	180,333	30,638	20.47%
Total Overhead Allocations	78,256	302,308	445,608	702,493	886,211	183,718	26.15%
Total Expenses	946,669	4,032,524	4,701,367	5,213,296	5,877,084	663,788	12.73%
Net Margin	\$ (452,379)	\$ 442,725	\$ 530,900	\$ 490,042	\$ (1,746,427)	\$ (2,236,469)	-456.38%
Capital	-	-	-	-	771,688	771,688	-
General Fund Support/ Transfer In	\$ -	\$ -	\$ -	\$ -	\$ 2,350,000	\$ 2,350,000	-

Proposed Capital Funding FY 2019

Primary Care Clinics

Item	Unit Cost	Units	Total	Department Total
Belle Glade Clinic				
Leasehold Improvements				
Belle Glade Medical Build Out**	450,000	1	450,000	450,000
Total Belle Glade Clinic				450,000
Lantana Dental Clinic				
Major Movable Equipment				
Dental Chair*	13,198	1	13,198	13,198
Total Lantana Dental Clinic				13,198
Belle Glade Dental Clinic				
Leasehold Improvements				
Belle Glade Dental Build Out**	629,900	1	629,900	
Major Movable Equipment				
Ultratrim Dental Chairs**	10,540	6	63,240	
M11 Ultraclave Autoclave & Sonic Cleaner**	13,398	1	13,398	
P32 Oil-Less Comp**	5,187	1	5,187	
Dental Compressor**	9,823	1	9,823	
GXS700 Senor Combo Kit**	13,471	2	26,942	
			118,590	
Computer Equipment				
Additional Computer Equipment for Move**	10,000	1	10,000	
Total Belle Glade Dental Clinic				758,490
GRAND TOTAL				\$ 1,221,688

* Offset by Delta Dental grant

**Offset by HRSA grant

2019 FTE Schedule – Primary Care Clinics

	Adopted 2017	Adopted 2018	Amended 2018	Budget Reductions	Budget Additions	Net 2018	Proposed 2019
Total Administration	19.00	15.00	15.00	-	-	-	15.00
Medical Clinics							
West Palm Clinic	29.10	31.20	29.60	-	1.40	1.40	31.00
Lantana Clinic	24.10	27.10	27.20	-	1.90	1.90	29.10
Delray Clinic	26.90	26.90	25.90	-	0.10	0.10	26.00
Belle Glade Clinic	19.00	15.00	15.00	-	-	-	15.00
Jerome Golden Clinic	3.00	4.00	4.00	(4.00)	-	(4.00)	-
Rams Clinic	3.00						
Lewis Center	4.00	4.00	5.00	-	-	-	5.00
Lake Worth Clinic	23.00	28.50	30.50	(1.90)	-	(1.90)	28.60
Jupiter Clinic	5.00	11.00	11.00	-	-	-	11.00
Mobile Van	-	4.00	4.00	-	-	-	4.00
West Boca Clinic	16.00	22.00	23.00	(4.00)	-	(4.00)	19.00
Suboxone Clinic	-	5.10	5.50	-	4.50	4.50	10.00
Total Medical Clinics	153.10	178.80	180.70	(9.90)	7.90	(2.00)	178.70
Total Dental Clinic Administration	3.00	3.00	3.00	(1.00)	-	(1.00)	2.00
Dental Clinics							
West Palm Dental Clinic	14.00	15.00	15.00	-	-	-	15.00
Lantana Dental Clinic	9.00	10.00	10.00	-	4.00	4.00	14.00
Delray Dental Clinic	10.00	11.00	11.00	-	-	-	11.00
Belle Glade Dental Clinic	6.00	7.00	7.00	(1.00)	-	(1.00)	6.00
Lake Worth Dental Clinic	7.00	10.00	-	-	-	-	-
West Boca Dental Clinic	-	7.00	-	-	-	-	-
Total Dental Clinics	46.00	60.00	43.00	(1.00)	4.00	3.00	46.00
Total Primary Care Clinics	221.10	256.80	241.70	(11.90)	11.90	-	241.70

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
October 24, 2018

1. Description: Revised Primary Care Delineation of Privileges Forms

2. Summary:

The following Primary Care Delineation of Privileges forms have been revised to include Substance Use Disorder (SUD) treatment and management:

- MD/DO Family Medicine Privileges
- MD/DO Internal Medicine Privileges
- MD/DO Pediatric Medicine Privileges
- ARNP Family Medicine Privileges
- ARNP Pediatric Medicine Privileges

3. Substantive Analysis:

Please see attached.

4. Fiscal Analysis & Economic Impact Statement:

	Amount	Budget
Capital Requirements	N/A	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Annual Net Revenue	N/A	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Annual Expenditures	N/A	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

Dawn Richards
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name

Date Approved

6. Recommendation:

Staff recommends the Board approve the revised MD/DO Family Medicine Privileges form.

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
October 24, 2018

Staff recommends the Board approve the revised MD/DO Internal Medicine Privileges form.

Staff recommends the Board approve the revised MD/DO Pediatric Medicine Privileges form.

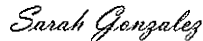
Staff recommends the Board approve the revised ARNP Family Medicine Privileges form.

Staff recommends the Board approve the revised ARNP Pediatric Medicine Privileges form.

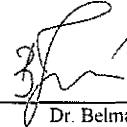
Approved for Legal sufficiency:



Valerie Shahriari
VP & General Counsel



Sarah Gonzalez, CPMSM, CPC
Director, Credentialing & Provider Services



Dr. Belma Andric
Chief Medical Officer, VP & Executive Director
of Clinic Services

DELINEATION OF PRIVILEGES

Initial Appointment Reappointment

Practitioner Name:	
Specialty:	

Clinic Privileges Eligibility Criteria:

1. Current active licensure to practice as a physician in the State of Florida
2. Completed additional education/training as follows: Successful completion of ACGME or AOA accredited residency program in Family Medicine and Board Certified or Board Eligible by the American Board of Family Medicine, American Osteopathic Board of Family Physicians, American Board of Preventive Medicine or American Osteopathic Board of Preventive Medicine

General Privileges - Core I Privileges

Family Medicine Core I privileges includes the evaluation and management of patients and the performance of medical procedures to correct or treat various medical conditions, illnesses and injuries. Privileges in Core I include those procedures and cognitive skills involving medical problems that are normally taught in residency programs. Physicians requesting privileges in this Core I will have documented experience, demonstrated ability and current competence in Family Medicine.

- Take, evaluate, and record medical histories
- Perform physical exams based on age and history
- Collect specimens for pathologic exams, including Pap smears
- Pelvic examination
- Differential diagnosis
- Analyze and interpret data, formulate problem list, and establish plans for clinical problems
- Order appropriate lab, x-rays and other diagnostic tests
- Order appropriate medications
- Order consultation for other specialty services
- Order nutritional consult
- Order social services consult
- Patient education and instruction

Requested by: _____
 (Applicant Signature)

Approved by: _____
 (Medical Director Signature)

Core II Privileges

Privileges in this Core may be granted to physicians who have acquired added experience and/or training, and who have special skills and knowledge in the specific areas. A representative but, of necessity, not complete list of Family Medicine Core II Privileges is stated below. It is assumed that other procedures and problems of similar complexity and risk will fall within the identified Family Medicine Core II Privileges.

Adult Core II Privileges:

Requested	Approved	
_____	_____	EKG
_____	_____	X-Ray interpretation
_____	_____	Laceration repair
_____	_____	Drainage of subungual hematoma
_____	_____	Incision and drainage of superficial abscess
_____	_____	Local anesthesia
_____	_____	Reduction of radial head subluxation
_____	_____	Nail resection
_____	_____	Trigger Point injection
_____	_____	Lesion destruction/removal
_____	_____	Joint aspiration
_____	_____	Tendon and bursa injection
_____	_____	Wound Care /Debridement
_____	_____	Foreign body removal (skin, cornea, conjunctiva ear, vagina, pharynx, nose)
_____	_____	Skin tag removal
_____	_____	Biopsy/Excision (Excisional/Incisional, Punch, Shave)
_____	_____	Substance use disorder (SUD) treatment and management

Pediatric Core II Privileges:

Requested	Approved	
_____	_____	EKG
_____	_____	X-Ray interpretation
_____	_____	Drainage of subungual hematoma
_____	_____	Laceration repair
_____	_____	Incision and drainage of superficial abscess
_____	_____	Joint aspiration
_____	_____	Local anesthesia
_____	_____	Reduction of radial head subluxation
_____	_____	Nail removal
_____	_____	Removal of foreign body: cornea, conjunctiva, ear, nose

*Application for Clinical Privileges MD, DO
 Specialty: Family Medicine*

_____ Skin tag removal

 _____ Substance use disorder (SUD) treatment and management

Applicant Attestation:

I attest by signature that I have requested privileges for which by education, training, current experience and demonstrated performance I am qualified to perform and for which I wish to exercise at the C.L. Brumback Primary Care Clinics to the extent services are available to be performed. I further agree to provide documentary evidence of clinical experience and performance of the past two (2) years if requested.

 Applicant Printed Name

 Specialty

 Applicant Signature

 Date

Medical Director:

The C.L. Brumback Primary Care Clinics' Medical Director accepts the above applicant's attestation and asserts that he/she meets the minimum criteria for the privileges requested.

 Medical Director

 Medical Director Signature

 Date

DELINEATION OF PRIVILEGES

Initial Appointment Reappointment

Practitioner Name:	
Specialty:	

Clinic Privileges Eligibility Criteria:

1. Current active licensure to practice as a physician in the State of Florida
2. Completed additional education/training as follows: Successful completion of ACGME or AOA accredited residency program in Internal Medicine and Board Certified or Board Eligible by the American Board of Internal Medicine or American Osteopathic Board of Internal Medicine

General Privileges - Core I Privileges

Internal Medicine Core I privileges includes the evaluation and management of patients and the performance of medical procedures to correct or treat various medical conditions, illnesses and injuries. Privileges in Core I include those procedures and cognitive skills involving medical problems that are normally taught in residency programs. Physicians requesting privileges in this Core I will have documented experience, demonstrated ability and current competence in Internal Medicine.

- Take, evaluate, and record medical histories
- Perform physical exams based on age and history
- Collect specimens for pathologic exams, including Pap smears
- Pelvic examination
- Differential diagnosis
- Analyze and interpret data, formulate problem list, and establish plans for clinical problems
- Order appropriate lab, x-rays and other diagnostic tests
- Order appropriate medications
- Order consultation for other specialty services
- Order nutritional consult
- Order social services consult
- Patient education and instruction

Requested by: _____
 (Applicant Signature)

Approved by: _____
 (Medical Director Signature)

Core II Privileges

Privileges in this Core may be granted to physicians who have acquired added experience and/or training, and who have special skills and knowledge in the specific areas. A representative but, of necessity, not complete list of Internal Medicine Core II Privileges is stated below. It is assumed that other procedures and problems of similar complexity and risk will fall within the identified Internal Medicine Core II Privileges.

Requested	Approved	
_____	_____	EKG
_____	_____	X-Ray interpretation
_____	_____	Incision and Drainage of Superficial Abscess
_____	_____	Laceration repair
_____	_____	Nail resection
_____	_____	Trigger Point injection
_____	_____	Lesion destruction/removal
_____	_____	Joint aspiration
_____	_____	Tendon and bursa injection
_____	_____	Wound Care /Debridement
_____	_____	Foreign body removal (skin, cornea, ear, vagina, pharynx, nose)
_____	_____	Biopsy/Excision (Excisional/Incisional, Punch, Shave)
_____	_____	Substance use disorder (SUD) treatment and management

Applicant Attestation:

I attest by signature that I have requested privileges for which by education, training, current experience and demonstrated performance I am qualified to perform and for which I wish to exercise at the C.L. Brumback Primary Care Clinics to the extent services are available to be performed. I further agree to provide documentary evidence of clinical experience and performance of the past two (2) years if requested.

 Applicant Printed Name

 Specialty

 Applicant Signature

 Date



C. L. Brumback
Primary Care Clinics
Health Care District Palm Beach County

*Application for Clinical Privileges MD, DO
Specialty: Internal Medicine*

Medical Director:

The C.L. Brumback Primary Care Clinics' Medical Director accepts the above applicant's attestation and asserts that he/she meets the minimum criteria for the privileges requested.

Medical Director

Medical Director Signature

Date

DELINEATION OF PRIVILEGES

Initial Appointment Reappointment

Practitioner Name:	
Specialty:	

Clinic Privileges Eligibility Criteria:

1. Current active licensure to practice as a physician in the State of Florida
2. Completed additional education/training as follows: Successful completion of ACGME or AOA accredited residency program in Pediatrics and Board Certified or Board Eligible by the American Board of Pediatrics or American Osteopathic Board of Pediatrics

General Privileges - Core I Privileges

Pediatric Medicine Core I privileges includes the evaluation and management of patients up to the age of 18 with common illnesses, injuries, or disorders. Privileges in Core I include those procedures and cognitive skills involving medical problems that are normally taught in residency programs. Physicians requesting privileges in this Core I will have documented experience, demonstrated ability and current competence in Pediatric Medicine.

- Take, evaluate, and record medical histories
- Perform physical exams to evaluate medical problems
- Collect specimens for pathologic exams
- Pelvic examination
- Differential diagnosis
- Analyze and interpret data, formulate problem list, and establish plans for clinical problems
- Order appropriate lab, x-rays and other diagnostic tests
- Order appropriate medications and immunizations
- Order consultation for other specialty services
- Order nutritional consult
- Order social services consult
- Patient education and instruction

Requested by: _____
 (Applicant Signature)

Approved by: _____
 (Medical Director Signature)

Core II Privileges

Privileges in this Core may be granted to physicians who have acquired added experience and/or training, and who have special skills and knowledge in the specific areas. A representative but, of necessity, not complete list of Pediatric Medicine Core II Privileges is stated below. It is assumed that other procedures and problems of similar complexity and risk will fall within the identified Pediatric Medicine Core II Privileges.

Requested	Approved	
_____	_____	EKG
_____	_____	X-Ray interpretation
_____	_____	Drainage of subungual hematoma
_____	_____	Laceration repair
_____	_____	Incision and drainage of superficial abscess
_____	_____	Joint aspiration
_____	_____	Local anesthesia
_____	_____	Reduction of radial head subluxation
_____	_____	Nail removal
_____	_____	Removal of foreign body: cornea, conjunctiva, ear, nose
_____	_____	Skin tag removal
_____	_____	Wound Care /Debridement
_____	_____	Biopsy/Excision (Excisional/Incisional, Punch, Shave)
_____	_____	Substance use disorder (SUD) treatment and management

Applicant Attestation:

I attest by signature that I have requested privileges for which by education, training, current experience and demonstrated performance I am qualified to perform and for which I wish to exercise at the C.L. Brumback Primary Care Clinics to the extent services are available to be performed. I further agree to provide documentary evidence of clinical experience and performance of the past two (2) years if requested.

Applicant Printed Name

Specialty

Applicant Signature

Date



C. L. Brumback
Primary Care Clinics
Health Care District Palm Beach County

*Application for Clinical Privileges MD, DO
Specialty: Pediatric Medicine*

Medical Director:

The C.L. Brumback Primary Care Clinics' Medical Director accepts the above applicant's attestation and asserts that he/she meets the minimum criteria for the privileges requested.

Medical Director

Medical Director Signature

Date

DELINEATION OF PRIVILEGES

Initial Appointment Reappointment

Practitioner Name:	
Specialty:	

Clinic Privileges Eligibility Criteria:

1. Current active licensure to practice as a nurse practitioner in the State of Florida
2. Completed additional education/training as follows: Advanced Practice Registered Nurse by the Florida State Board of Nursing and current certification by the American Nurses Credentialing Center (ANCC), American Academy of Nurse Practitioners (AANP), or an equivalent body as required by licensure

General Privileges - Core I Privileges

Privileges for Nurse Practitioners identified below are performed within the context of a collaborative management plan with physician credentialed at C.L. Brumback Primary Care Clinics that designate the scope of collaboration necessary to manage the care of patients. Privileges in Core I include those procedures and cognitive skills involving medical problems that are normally taught in Nurse Practitioner training programs. A practitioner requesting privileges in this Core I will have documented experience, demonstrated ability and current competence in Family Medicine.

- Take, evaluate, and record medical histories
- Perform physical exams based on age and history
- Collect specimens for pathologic exams
- Pelvic examination
- Differential diagnosis
- Analyze and interpret data, formulate problem list, and establish plans for clinical problems
- Order appropriate lab, x-rays and other diagnostic tests
- Order appropriate medications
- Order consultation for other specialty services
- Order nutritional consult
- Order social services consult
- Patient education and instruction

Requested by: _____
 (Applicant Signature)

Approved by: _____
 (Medical Director Signature)



Core II Privileges

Privileges in this Core may be granted to practitioners who have acquired added experience and/or training, and who have special skills and knowledge in the specific areas. A representative but, of necessity, not complete list of Family Medicine Core II Privileges is stated below. It is assumed that other procedures and problems of similar complexity and risk will fall within the identified Family Medicine Core II Privileges.

Adult Core II Privileges:

Requested	Approved	
_____	_____	EKG
_____	_____	X-Ray interpretation
_____	_____	Laceration repair
_____	_____	Drainage of subungual hematoma
_____	_____	Incision and drainage of superficial abscess
_____	_____	Local anesthesia
_____	_____	Reduction of radial head subluxation
_____	_____	Nail resection
_____	_____	Trigger Point injection
_____	_____	Lesion destruction/removal
_____	_____	Joint aspiration
_____	_____	Tendon and bursa injection
_____	_____	Wound Care /Debridement
_____	_____	Foreign body removal (skin, cornea, conjunctiva ear, vagina, pharynx, nose)
_____	_____	Skin tag removal
_____	_____	Biopsy/Excision (Excisional/Incisional, Punch, Shave)
_____	_____	Substance use disorder (SUD) treatment and management

Pediatric Core II Privileges:

Requested	Approved	
_____	_____	EKG
_____	_____	X-Ray interpretation
_____	_____	Drainage of subungual hematoma
_____	_____	Laceration repair
_____	_____	Incision and drainage of superficial abscess
_____	_____	Joint aspiration
_____	_____	Local anesthesia
_____	_____	Reduction of radial head subluxation
_____	_____	Nail removal
_____	_____	Removal of foreign body: cornea, conjunctiva, ear, nose



*Application for Clinical Privileges ARNP
 Specialty: Family Medicine*

_____ Skin tag removal
 _____ Substance use disorder (SUD) treatment and management

Applicant Attestation:

I attest by signature that I have requested privileges for which by education, training, current experience and demonstrated performance I am qualified to perform and for which I wish to exercise at the C.L. Brumback Primary Care Clinics to the extent services are available to be performed. I further agree to provide documentary evidence of clinical experience and performance of the past two (2) years if requested.

 Applicant Printed Name

 Specialty

 Applicant Signature

 Date

Medical Director:

The C.L. Brumback Primary Care Clinics' Medical Director accepts the above applicant's attestation and asserts that he/she meets the minimum criteria for the privileges requested.

 Medical Director

 Medical Director Signature

 Date

DELINEATION OF PRIVILEGES

Initial Appointment Reappointment

Practitioner Name:	
Specialty:	

Clinic Privileges Eligibility Criteria:

1. Current active licensure to practice as a nurse practitioner in the State of Florida
2. Completed additional education/training as follows: Advanced Practice Registered Nurse by the Florida State Board of Nursing and current certification by the American Nurses Credentialing Center (ANCC), American Academy of Nurse Practitioners (AANP), or an equivalent body as required by licensure

General Privileges - Core I Privileges

Evaluate, diagnose, and treat pediatric patients up to the age of 18 with common illnesses, injuries, or disorders. Privileges for Nurse Practitioners identified below are performed within the context of a collaborative management plan with physician credentialed at C.L. Brumback Primary Care Clinics that designate the scope of collaboration necessary to manage the care of patients. Privileges in Core I include those procedures and cognitive skills involving medical problems that are normally taught in Nurse Practitioner training programs. A practitioner requesting privileges in this Core I will have documented experience, demonstrated ability and current competence in Family Medicine.

- Take, evaluate, and record medical histories
- Perform physical exams based on age and history
- Collect specimens for pathologic exams
- Pelvic examination
- Differential diagnosis
- Analyze and interpret data, formulate problem list, and establish plans for clinical problems
- Order appropriate lab, x-rays and other diagnostic tests
- Order appropriate medications and immunizations
- Order consultation for other specialty services
- Order nutritional consult
- Order social services consult
- Patient education and instruction

Requested by: _____
 (Applicant Signature)

Approved by: _____
 (Medical Director Signature)

Core II Privileges

Privileges in this Core may be granted to practitioners who have acquired added experience and/or training, and who have special skills and knowledge in the specific areas. A representative but, of necessity, not complete list of Pediatric Medicine Core II Privileges is stated below. It is assumed that other procedures and problems of similar complexity and risk will fall within the identified Pediatric Medicine Core II Privileges.

Requested	Approved	
_____	_____	EKG
_____	_____	X-Ray interpretation
_____	_____	Drainage of subungual hematoma
_____	_____	Laceration repair
_____	_____	Incision and drainage of superficial abscess
_____	_____	Joint aspiration
_____	_____	Local anesthesia
_____	_____	Reduction of radial head subluxation
_____	_____	Nail removal
_____	_____	Removal of foreign body: cornea, conjunctiva, ear, nose
_____	_____	Skin tag removal
_____	_____	Wound Care /Debridement
_____	_____	Biopsy/Excision (Excisional/Incisional, Punch, Shave)
_____	_____	Substance use disorder (SUD) treatment and management

Applicant Attestation:

I attest by signature that I have requested privileges for which by education, training, current experience and demonstrated performance I am qualified to perform and for which I wish to exercise at the C.L. Brumback Primary Care Clinics to the extent services are available to be performed. I further agree to provide documentary evidence of clinical experience and performance of the past two (2) years if requested.

 Applicant Printed Name

 Specialty

 Applicant Signature

 Date

Medical Director:

The C.L. Brumback Primary Care Clinics' Medical Director accepts the above applicant's attestation and asserts that he/she meets the minimum criteria for the privileges requested.

Medical Director

Medical Director Signature

Date

**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
October 24, 2018**

1. Description: Executive Director Informational Update

2. Summary:

Updates on key changes within C. L. Brumback Primary Care Clinics:

- Mobile Clinic
- Lakeside Medical Center Clinic (Belle Glade)

3. Substantive Analysis:

Mobile Clinic for the Homeless

Between 8/1/2018 to 10/15/2018, the Mobile Clinic has served 805 patients, 114 identified as being homeless, and 252 depression screenings were performed.

Lakeside Medical Center Clinic (Belle Glade)

On 10/22/2018, Chandler Construction began demolition.

4. Fiscal Analysis & Economic Impact Statement:

	Amount	Budget
Capital Requirements	N/A	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Annual Net Revenue	N/A	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Annual Expenditures	N/A	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

Dawn Richards
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name

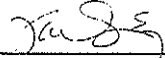
Date Approved

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
October 24, 2018

6. Recommendation:

Staff recommends Board receive and file the Executive Informational Update.

Approved for Legal sufficiency:



Valerie Shahriari
VP & General Counsel



Dr. Belma Andric
Chief Medical Officer, VP & Executive Director
of Clinic Services



Dr. Belma Andric
Chief Medical Officer, VP & Executive Director
of Clinic Services

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
 October 24, 2018

1. **Description:** Operations Reports – September 2018

2. **Summary:**

This agenda item provides the following operations reports for September 2018:

- Productivity Summary Report

3. **Substantive Analysis:**

See attached reports.

4. **Fiscal Analysis & Economic Impact Statement:**

	Amount	Budget	
Capital Requirements	N/A	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Annual Net Revenue	N/A	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Annual Expenditures	N/A	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

 Dawn Richards
 VP & Chief Financial Officer

5. **Reviewed/Approved by Committee:**

N A

 Committee Name

 Date Approved

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
October 24, 2018

6. Recommendation:

Staff recommends the Board Approve the Operations Reports for September 2018.

Approved for Legal sufficiency:



Valene Shahman
VP & General Counsel



Terry Megydon
Director of Practice Operations

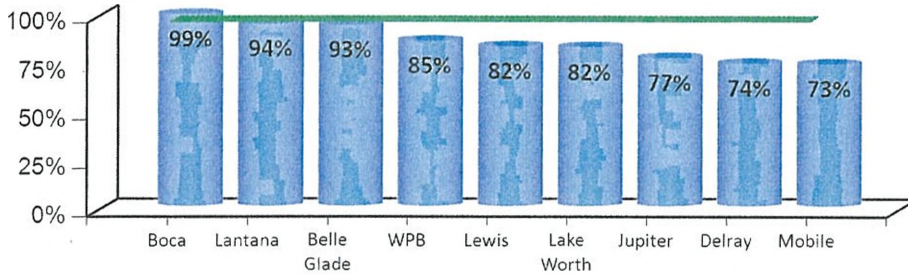


Dr. Belma Andric
Chief Medical Officer, VP & Executive Director
of Clinic Services

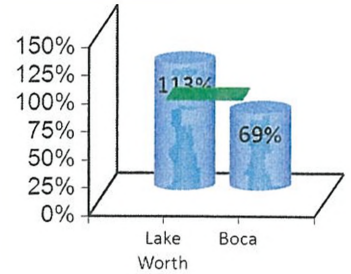
ALL CLINICS PRODUCTIVITY SEPTEMBER 2018

	Target	Total seen	% Monthly Target
ADULT CARE	6795	5754	85%
MENTAL HEALTH	1181	985	83%
PEDIATRIC CARE	1798	1392	77%
WOMEN'S HEALTH CARE	549	485	88%
SUBSTANCE ABUSE	165	248	151%
DENTAL HYGIENE	540	433	80%
DENTAL	2256	1712	76%

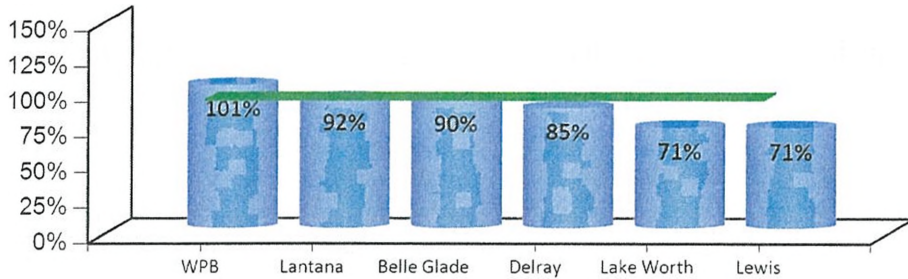
Adult care



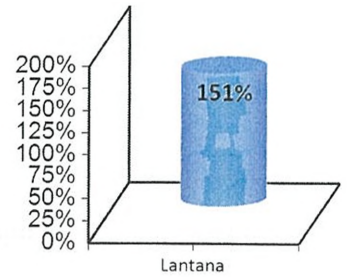
Women's Health



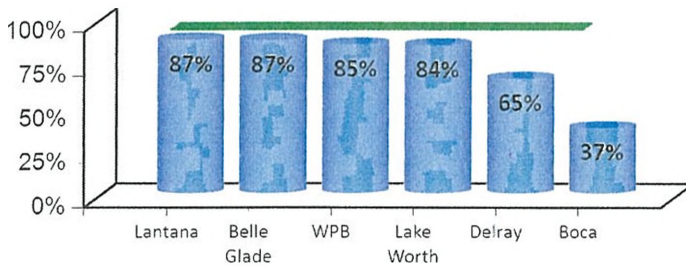
Mental Health



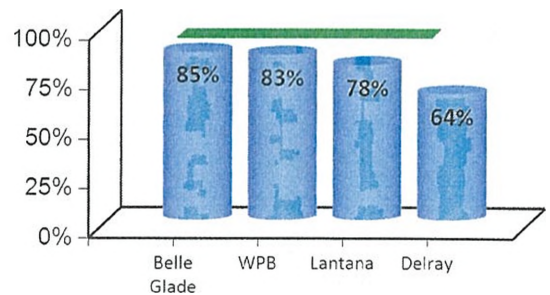
Substance Abuse



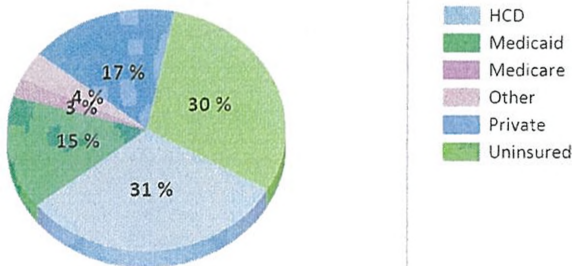
Pediatric Care



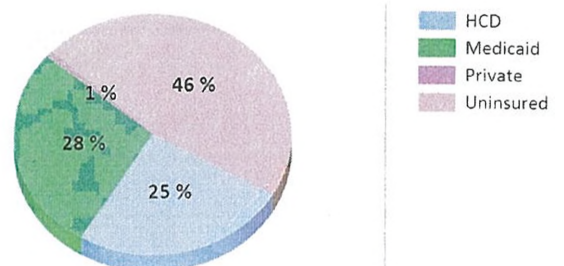
Dental & Dental Hygiene



Medical Payer Mix YTD



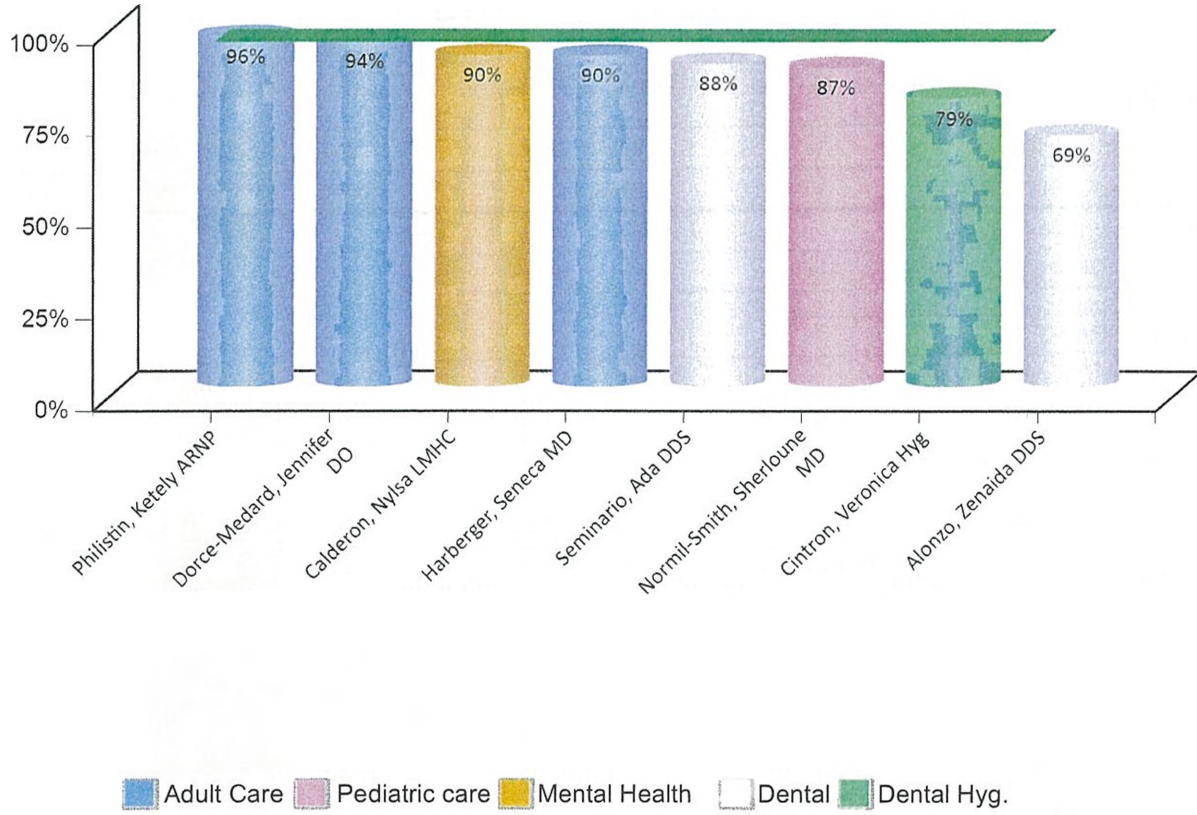
Dental Payer Mix YTD



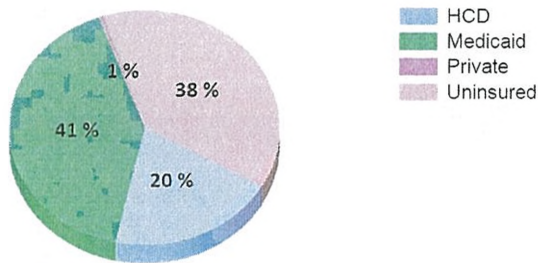
BELLE GLADE CLINIC TOTALS FOR SEPTEMBER 2018

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Philistin, Ketely ARNP	16	19.0	304	291	96%	15.3
Dorce-Medard, Jennifer DO	18	12.3	221	208	94%	17.0
Harberger, Seneca MD	18	18.3	329	297	90%	16.3
BELLE GLADE ADULT CARE TOTALS		49.5	853	796	93%	
PEDIATRIC CARE						
Normil-Smith, Sherloune MD	18	3.0	54	47	87%	15.7
BELLE GLADE PEDIATRIC CARE TOTALS		3.0	54	47	87%	
MENTAL HEALTH						
Calderon, Nylsa LMHC	7	3.0	21	19	90%	6.3
BELLE GLADE MENTAL HEALTH TOTALS		3.0	21	19	90%	
DENTAL						
Seminario, Ada DDS	16	17.5	280	247	88%	14.1
Alonzo, Zenaida DDS	16	1.0	16	11	69%	11.0
BELLE GLADE DENTAL TOTALS		18.5	296	258	87%	
DENTAL HYGIENE						
Cintron, Veronica Hyg	8	13.5	108	85	79%	6.3
BELLE GLADE DENTAL HYGIENE TOTALS		13.5	108	85	79%	
BELLE GLADE TOTALS		87.5	1332	1205	90%	

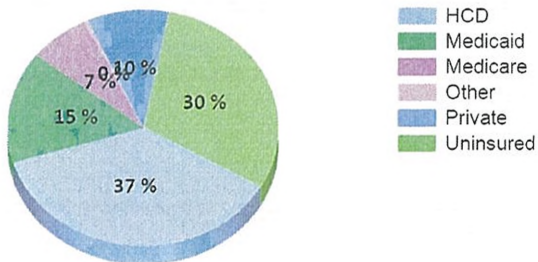
BELLE GLADE PROVIDER PRODUCTIVITY SEPTEMBER 2018



Dental Payer Mix YTD



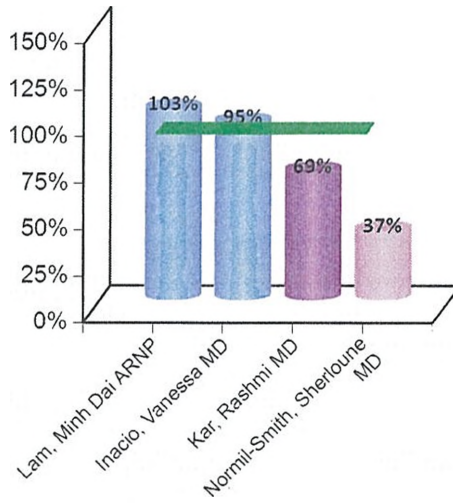
Medical Payer Mix YTD



BOCA CLINIC TOTALS FOR SEPTEMBER 2018

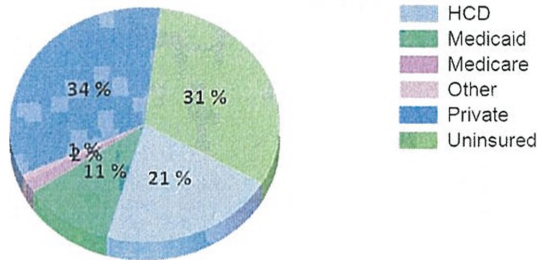
	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Lam, Minh Dai ARNP	16	19.0	304	312	103%	16.4
Inacio, Vanessa MD	18	17.0	306	292	95%	17.2
BOCA ADULT CARE TOTALS		36.0	610	604	99%	
PEDIATRIC CARE						
Normil-Smith, Sherlounne MD	18	10.0	180	67	37%	6.7
BOCA PEDIATRIC CARE TOTALS		10.0	180	67	37%	
WOMEN'S HEALTH CARE						
Kar, Rashmi MD	18	17.0	306	211	69%	12.4
BOCA WOMEN'S HEALTH CARE TOTALS		17.0	306	211	69%	
BOCA TOTALS		63.0	1096	882	80%	

BOCA PROVIDER PRODUCTIVITY SEPTEMBER 2018

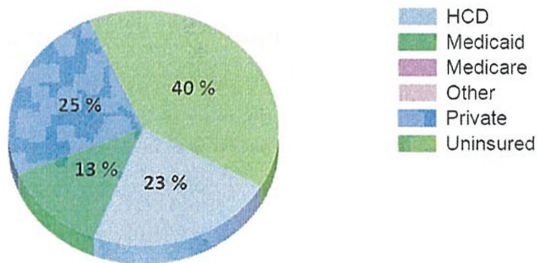


■ Adult Care
 ■ Pediatric care
 ■ Women's Health

Medical Payer Mix YTD



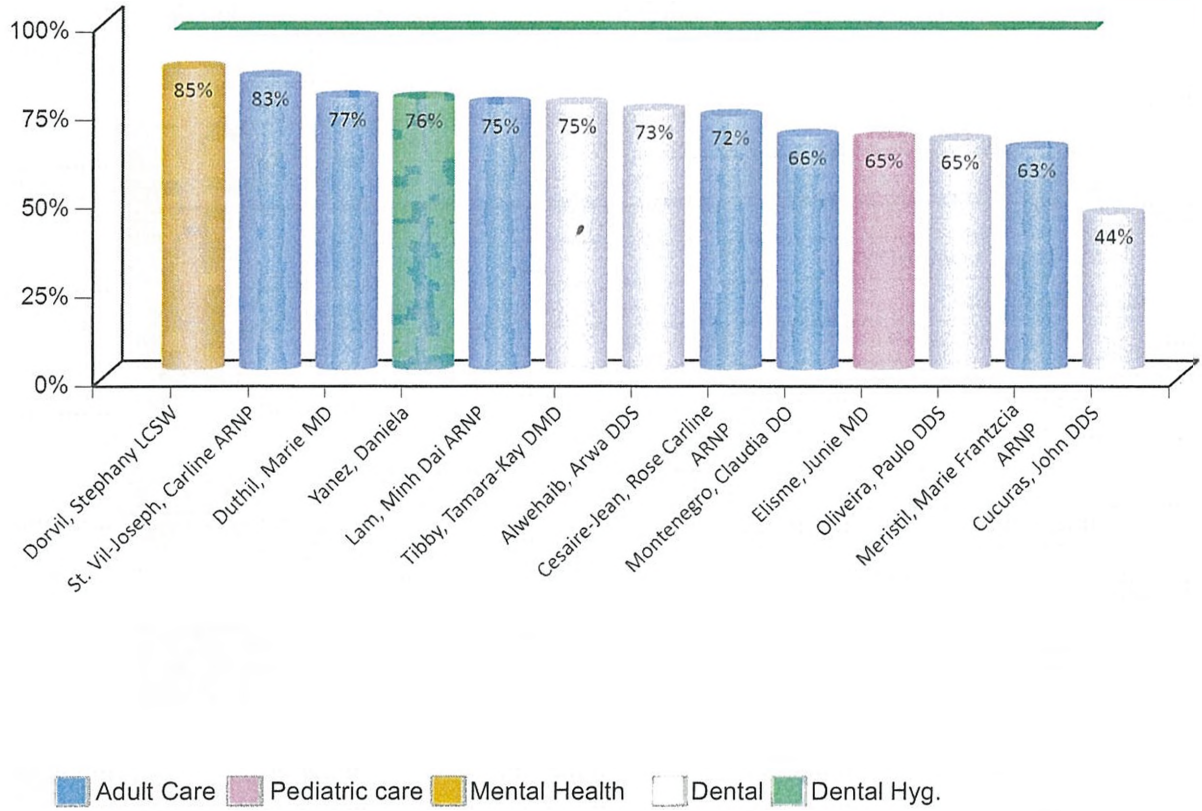
Womens Health Payer Mix YTD



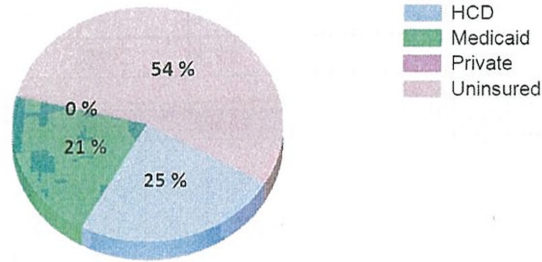
DELRAY BEACH CLINIC TOTALS FOR SEPTEMBER 2018

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
St. Vil-Joseph, Carline ARNP	16	16.5	264	218	83%	13.2
Duthil, Marie MD	18	17.0	306	235	77%	13.8
Lam, Minh Dai ARNP	16	1.0	16	12	75%	12.0
Cesaire-Jean, Rose Carline ARNP	16	18.5	296	212	72%	11.5
Montenegro, Claudia DO	18	17.0	306	202	66%	11.9
Meristil, Marie Frantzcia ARNP	16	2.0	32	20	63%	10.0
DELRAY BEACH ADULT CARE TOTALS		72.0	1220	899	74%	
PEDIATRIC CARE						
Elisme, Junie MD	18	16.0	288	188	65%	11.8
DELRAY BEACH PEDIATRIC CARE TOTALS		16.0	288	188	65%	
MENTAL HEALTH						
Dorvil, Stephany LCSW	7	18.6	130	111	85%	6.0
DELRAY BEACH MENTAL HEALTH TOTALS		18.6	130	111	85%	
DENTAL						
Tibby, Tamara-Kay DMD	16	0.3	4	3	75%	12.0
Alwehaib, Arwa DDS	16	18.0	288	211	73%	11.7
Oliveira, Paulo DDS	8	18.5	148	96	65%	5.2
Cucuras, John DDS	16	14.5	232	102	44%	7.0
DELRAY BEACH DENTAL TOTALS		51.3	672	412	61%	
DENTAL HYGIENE						
Yanez, Daniela	8	17.0	136	104	76%	6.1
DELRAY BEACH DENTAL HYGIENE TOTALS		17.0	136	104	76%	
DELRAY BEACH TOTALS		174.9	2446	1714	70%	

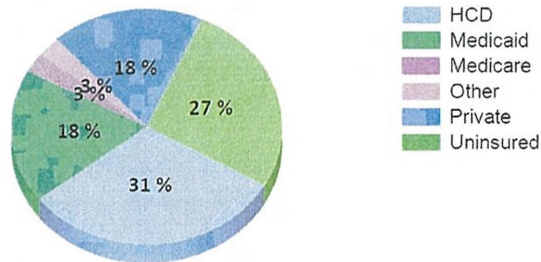
DELRAY BEACH PROVIDER PRODUCTIVITY SEPTEMBER 2018



Dental Payer Mix YTD



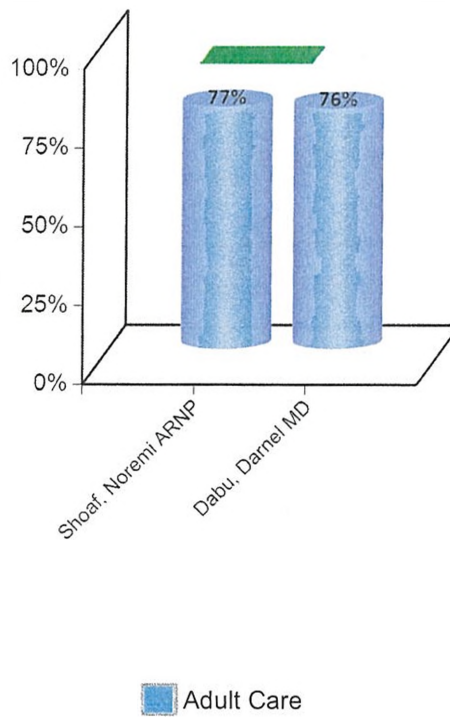
Medical Payer Mix YTD



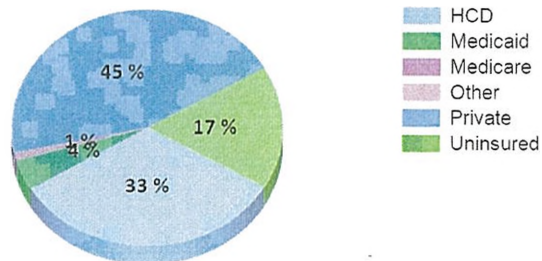
JUPITER CLINIC TOTALS FOR SEPTEMBER 2018

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Shoaf, Noremi ARNP	16	16.5	264	203	77%	12.3
Dabu, Darnel MD	18	18.5	333	254	76%	13.7
JUPITER ADULT CARE TOTALS		35.0	597	457	77%	
JUPITER TOTALS		35.0	597	457	77%	

JUPITER PROVIDER PRODUCTIVITY SEPTEMBER 2018



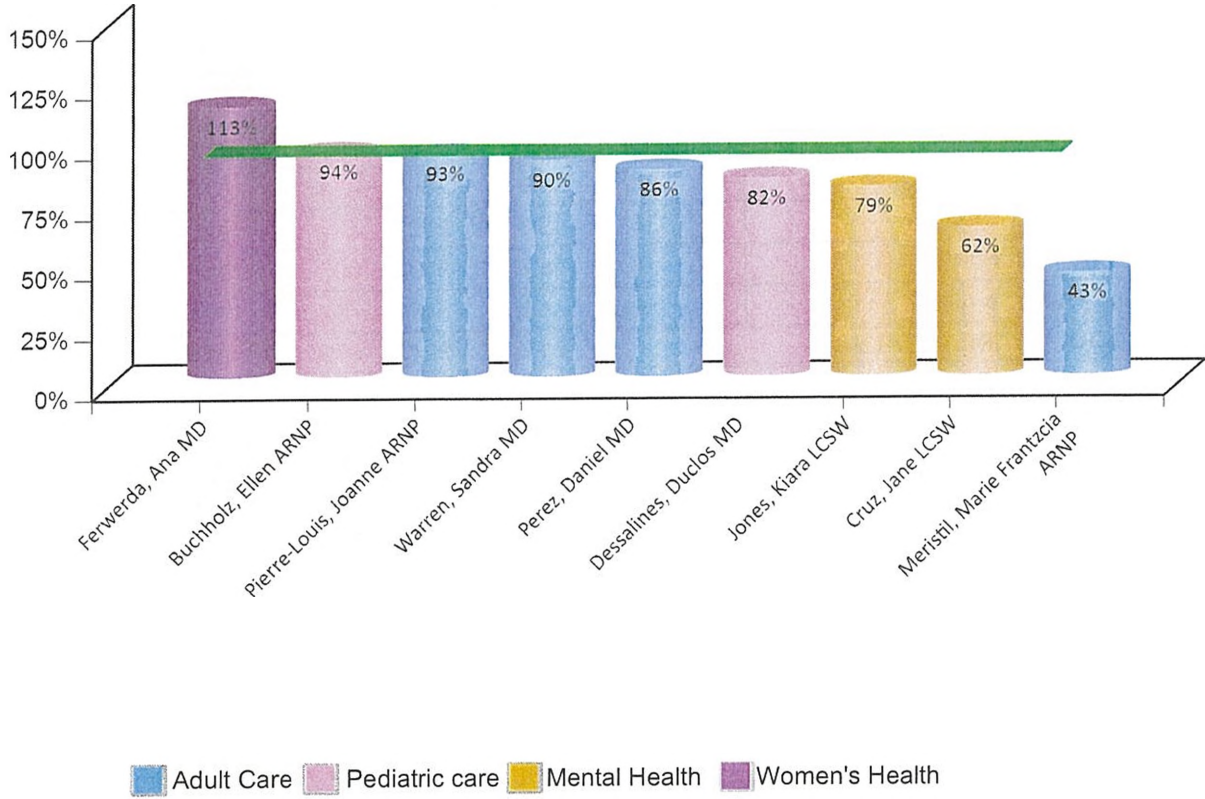
Medical Payer Mix YTD



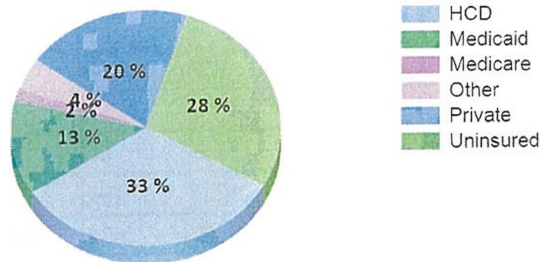
LAKE WORTH CLINIC TOTALS FOR SEPTEMBER 2018

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Pierre-Louis, Joanne ARNP	16	17.4	278	258	93%	14.9
Warren, Sandra MD	18	17.5	315	284	90%	16.2
Perez, Daniel MD	18	17.3	311	267	86%	15.5
Meristil, Marie Frantzcia ARNP	16	11.0	176	75	43%	6.8
LAKE WORTH ADULT CARE TOTALS		63.1	1079	884	82%	
PEDIATRIC CARE						
Buchholz, Ellen ARNP	16	3.0	48	45	94%	15.0
Dessalines, Duclos MD	18	13.5	243	200	82%	14.8
LAKE WORTH PEDIATRIC CARE TOTALS		16.5	291	245	84%	
WOMEN'S HEALTH CARE						
Ferwerda, Ana MD	18	13.5	243	274	113%	20.3
LAKE WORTH WOMEN'S HEALTH CARE TOTALS		13.5	243	274	113%	
MENTAL HEALTH						
Jones, Kiara LCSW	7	16.5	116	91	79%	5.5
Cruz, Jane LCSW	7	12.5	88	54	62%	4.3
LAKE WORTH MENTAL HEALTH TOTALS		29.0	203	145	71%	
LAKE WORTH TOTALS		122.1	1816	1548	85%	

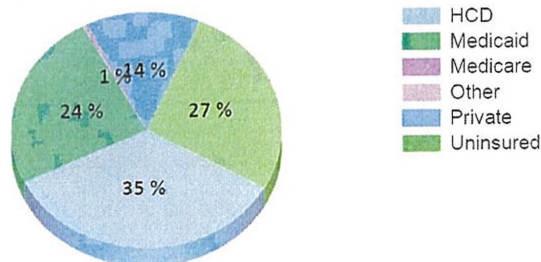
LAKE WORTH PROVIDER PRODUCTIVITY SEPTEMBER 2018



Medical Payer Mix YTD



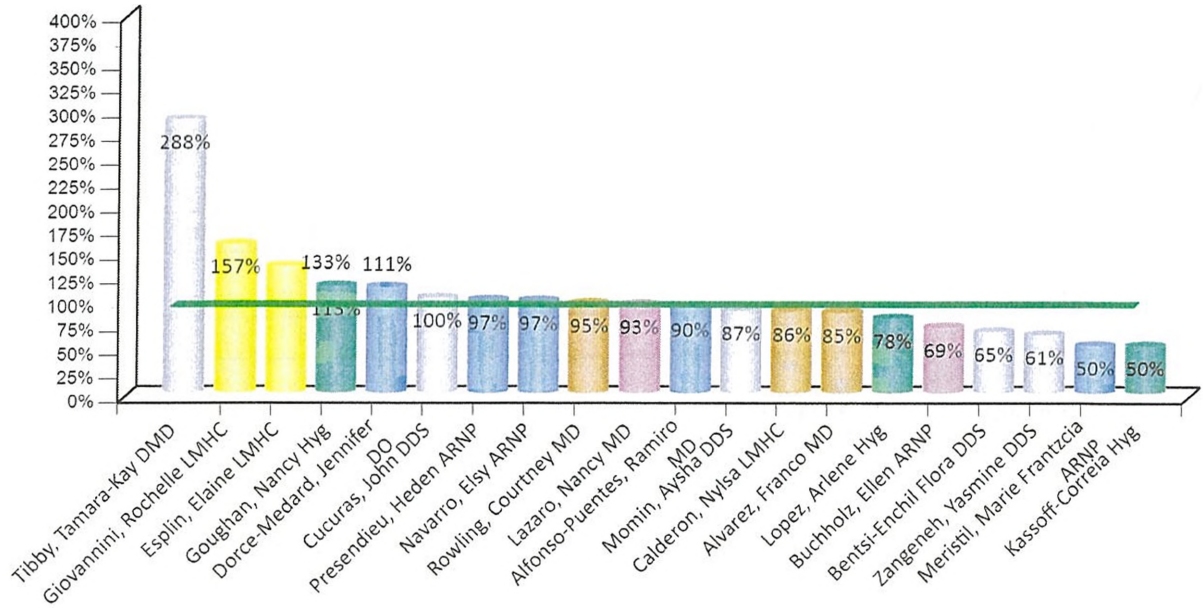
Womens Health Payer Mix YTD



LANTANA CLINIC TOTALS FOR SEPTEMBER 2018

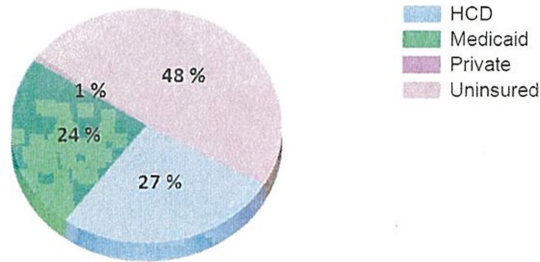
	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Dorce-Medard, Jennifer DO	18	0.5	9	10	111%	20.0
Presendieu, Heden ARNP	16	14.8	236	230	97%	15.6
Navarro, Elsy ARNP	16	18.3	292	283	97%	15.5
Alfonso-Puentes, Ramiro MD	18	18.8	338	305	90%	16.3
Meristil, Marie Frantzcia ARNP	16	1.0	16	8	50%	8.0
LANTANA ADULT CARE TOTALS		53.3	891	836	94%	
PEDIATRIC CARE						
Lazaro, Nancy MD	18	17.5	315	294	93%	16.8
Buchholz, Ellen ARNP	16	6.5	104	72	69%	11.1
LANTANA PEDIATRIC CARE TOTALS		24.0	419	366	87%	
MENTAL HEALTH						
Rowling, Courtney MD	18	15.8	284	268	95%	17.0
Calderon, Nylsa LMHC	7	11.0	77	66	86%	6.0
Alvarez, Franco MD	13	4.0	52	44	85%	11.0
LANTANA MENTAL HEALTH TOTALS		30.8	413	378	92%	
SUBSTANCE ABUSE						
Giovannini, Rochelle LMHC	7	17.5	123	192	157%	11.0
Esplin, Elaine LMHC	7	6.0	42	56	133%	9.3
LANTANA SUBSTANCE ABUSE TOTALS		23.5	165	248	151%	
DENTAL						
Tibby, Tamara-Kay DMD	16	0.5	8	23	288%	46.0
Cucuras, John DDS	16	0.5	8	8	100%	16.0
Momin, Aysha DDS	16	17.3	276	240	87%	13.9
Bentsi-Enchil Flora DDS	16	5.5	88	57	65%	10.4
Zangeneh, Yasmine DDS	16	12.0	192	118	61%	9.8
LANTANA DENTAL TOTALS		35.8	572	446	78%	
DENTAL HYGIENE						
Goughan, Nancy Hyg	8	1.0	8	9	113%	9.0
Lopez, Arlene Hyg	8	14.5	116	91	78%	6.3
Kassoff-Correia Hyg	8	0.5	4	2	50%	4.0
LANTANA DENTAL HYGIENE TOTALS		16.0	128	102	80%	
LANTANA TOTALS		183.3	2587	2376	92%	

LANTANA PROVIDER PRODUCTIVITY SEPTEMBER 2018

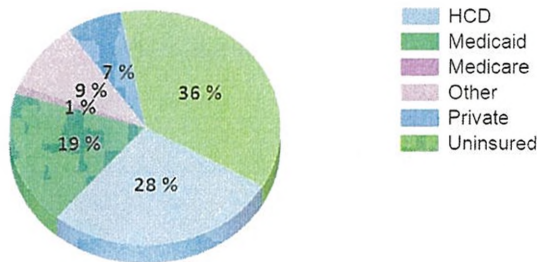


■ Adult Care
 ■ Pediatric care
 ■ Mental Health
 ■ Substance Abuse
 ■ Dental
 ■ Dental Hyg.

Dental Payer Mix YTD



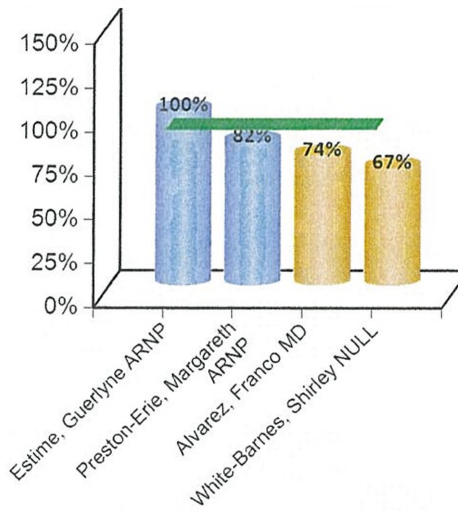
Medical Payer Mix YTD



LEWIS CENTER CLINIC TOTALS FOR SEPTEMBER 2018

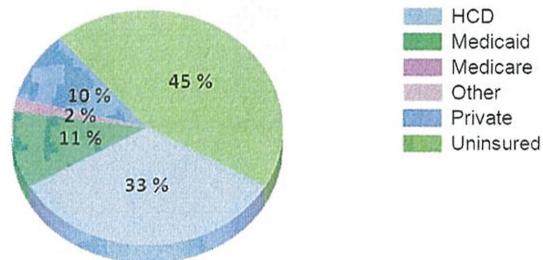
	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Estime, Guerlyne ARNP	16	0.3	4	4	100%	16.0
Preston-Erie, Margareth ARNP	16	18.3	292	240	82%	13.2
LEWIS CENTER ADULT CARE TOTALS		18.5	296	244	82%	
MENTAL HEALTH						
Alvarez, Franco MD	13	12.5	163	121	74%	9.7
White-Barnes, Shirley NULL	7	18.5	130	87	67%	4.7
LEWIS CENTER MENTAL HEALTH TOTALS		31.0	292	208	71%	
LEWIS CENTER TOTALS		49.5	588	452	77%	

LEWIS CENTER PROVIDER PRODUCTIVITY SEPTEMBER 2018



■ Adult Care
 ■ Mental Health

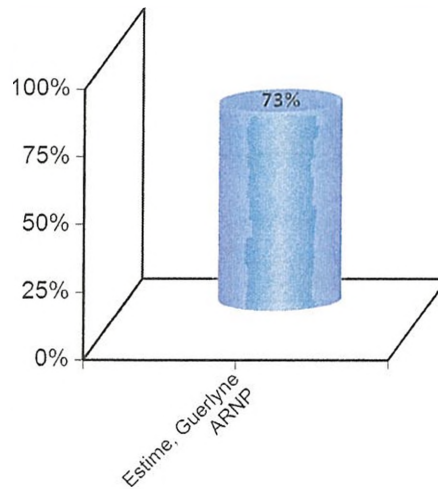
Medical Payer Mix YTD



MOBILE CLINIC CLINIC TOTALS FOR SEPTEMBER 2018

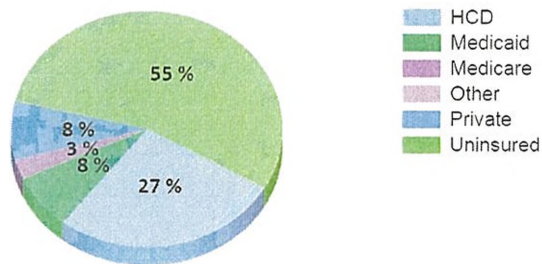
	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Estime, Guerlyne ARNP	16	16.3	260	191	73%	11.8
MOBILE CLINIC ADULT CARE TOTALS		16.3	260	191	73%	
MOBILE CLINIC TOTALS		16.3	260	191	73%	

MOBILE CLINIC PROVIDER PRODUCTIVITY SEPTEMBER 2018



■ Adult Care

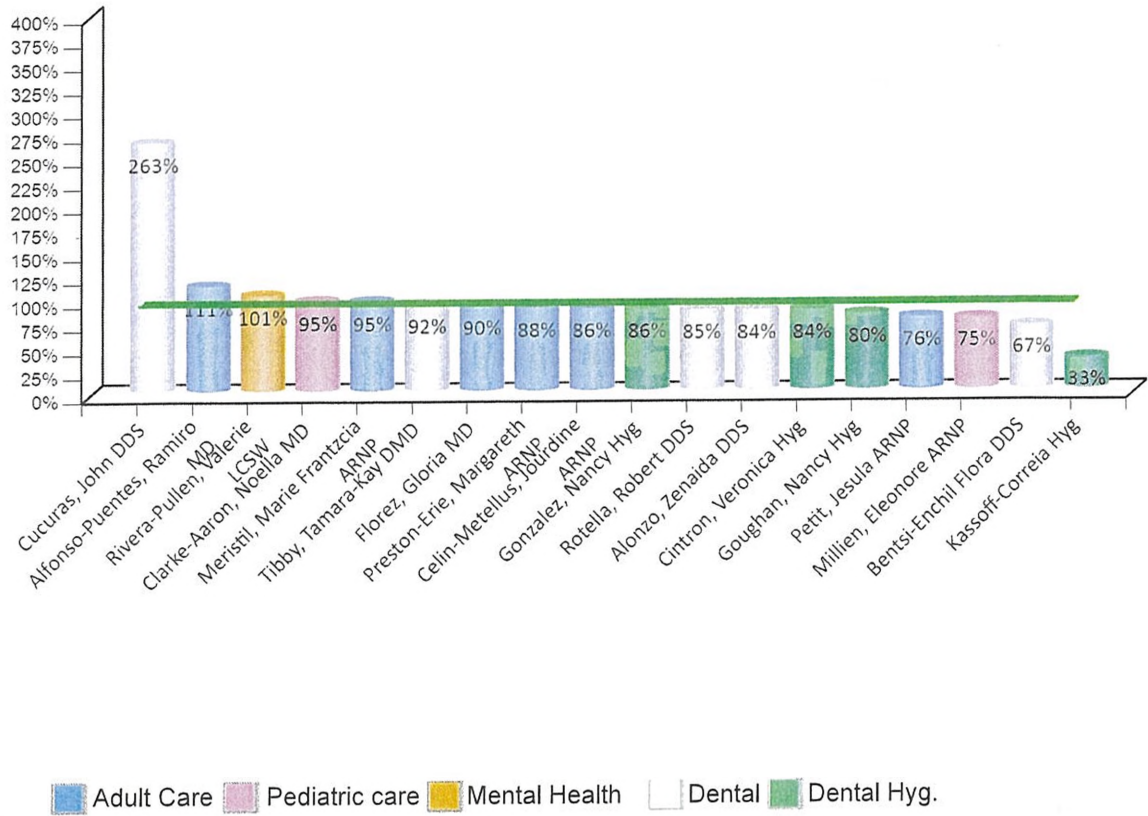
Medical Payer Mix YTD



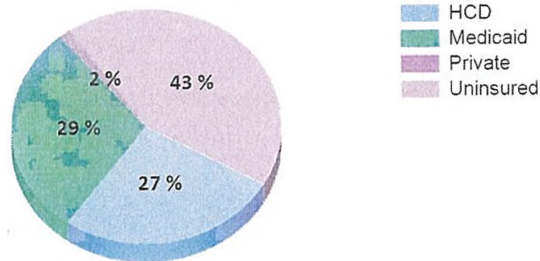
WEST PALM BEACH CLINIC TOTALS FOR SEPTEMBER 2018

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Alfonso-Puentes, Ramiro MD	18	0.5	9	10	111%	20.0
Meristil, Marie Frantzcia ARNP	16	3.5	56	53	95%	15.1
Florez, Gloria MD	18	18.3	329	296	90%	16.2
Preston-Erie, Margareth ARNP	16	0.5	8	7	88%	14.0
Celin-Metellus, Jourdine ARNP	16	18.0	288	249	86%	13.8
Petit, Jesula ARNP	16	18.8	300	228	76%	12.2
WEST PALM BEACH ADULT CARE TOTALS		59.5	990	843	85%	
PEDIATRIC CARE						
Clarke-Aaron, Noella MD	18	15.0	270	257	95%	17.1
Millien, Eleonore ARNP	16	18.5	296	222	75%	12.0
WEST PALM BEACH PEDIATRIC CARE TOTALS		33.5	566	479	85%	
MENTAL HEALTH						
Rivera-Pullen, Valerie LCSW	7	17.5	123	124	101%	7.1
WEST PALM BEACH MENTAL HEALTH TOTALS		17.5	123	124	101%	
DENTAL						
Cucuras, John DDS	16	0.5	8	21	263%	42.0
Tibby, Tamara-Kay DMD	16	0.8	12	11	92%	14.7
Rotella, Robert DDS	16	18.0	288	244	85%	13.6
Alonzo, Zenaida DDS	16	16.5	264	223	84%	13.5
Bentsi-Enchil Flora DDS	16	9.0	144	97	67%	10.8
WEST PALM BEACH DENTAL TOTALS		44.8	716	596	83%	
DENTAL HYGIENE						
Gonzalez, Nancy Hyg	8	16.0	128	110	86%	6.9
Cintron, Veronica Hyg	8	4.0	32	27	84%	6.8
Goughan, Nancy Hyg	8	0.6	5	4	80%	6.4
Kassoff-Correia Hyg	8	0.4	3	1	33%	2.7
WEST PALM BEACH DENTAL HYGIENE TOTALS		21.0	168	142	85%	
WEST PALM BEACH TOTALS		176.3	2562	2184	85%	

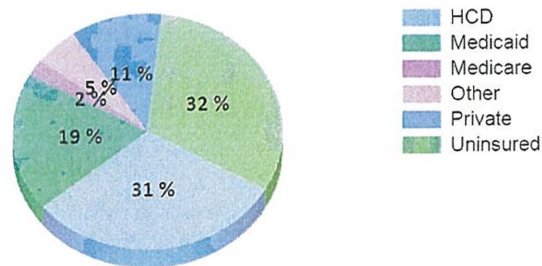
WEST PALM BEACH PROVIDER PRODUCTIVITY SEPTEMBER 2018



Dental Payer Mix YTD



Medical Payer Mix YTD



**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
October 24, 2018**

1. Description: Quality Council Reports – September 2018

2. Summary:

This agenda item provides the following:

- Quality Council Minutes
- UDS Report – YTD September 2018

3. Substantive Analysis:

See attached minutes and UDS report.

4. Fiscal Analysis & Economic Impact Statement:

	Amount	Budget
Capital Requirements	N/A	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Annual Net Revenue	N/A	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Annual Expenditures	N/A	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

Dawn Richards
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

Committee Name


Date Approved

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
October 24, 2018

6. Recommendation:

Staff recommends the Board Approve the Quality Council Minutes and UDS Report.

Approved for Legal sufficiency:



Valerie Shahriari
VP & General Counsel



Dr. Noelle Stewart
FQHC Medical Director



Dr. Belma Andric
Chief Medical Officer, VP & Executive Director
of Clinic Services



Quality Council Meeting Minutes

Date: October 12, 2018

Time: 1:00pm – 2:30 pm

Attendees: Dr. Belma Andric – Executive Director / Chief Medical Officer, Dr. Noelle Stewart – FQHC Medical Director, Dr. Tamara-Kay Tibby - Dental Director, Terry Megiveron - Director of Practice Operations, Maria Chamberlin – Nurse Manager, David Speciale – Quality Manager, Nancy Fox-Goughan, Dental Quality Coordinator, Dr. Ana Ferwerda – FQHC Director of Women’s Health, Dr. Courtney Rowling - Director of Behavioral Health, Jane Cruz - Director of Social Services, Lisa Hogans - Corporate Quality Coordinator, Luis Rodriguez, Quality & Compliance Pharmacists, Kristine Macaya – Assistant Director of Pharmacy, Amy Walker – Director of Patient Access, Hector Munoz, Clinical Infomaticist, Francis Navarro – FQHC Board Member, Andrea Steele – Corporate Quality Manager (via WebEx)

Excused: None

Minutes by: Alena Ranucci

<u>TOPIC</u>	<u>DISCUSSION / RECOMMENDATIONS</u>	<u>ACTION ITEMS (AI)</u>	<u>RESPONSIBLE PARTY</u>	<u>DATE</u>
QUALITY				
48-Hour Metrics	<p><u>Medical:</u></p> <ul style="list-style-type: none"> Plan to select a random day once a week to run 48 report on labs and documents and provider average during workgroups and quality council. Have improved our Athena buckets. We have sent an updated role responsibility and train staff document. <p><u>Dental</u></p> <ul style="list-style-type: none"> Open Encounters are trending down from quarter 2, however we have addressed a new provider. Dexis Image bucket – more images are being found that aren’t labeled and providers are being retrained. ER Referral process is being updated. Waiting for approval of final procedure. Consider streamlining process across all Departments. 	Determine if a dentist can refer directly to ER and who is responsible for follow up	Dr. Stewart, Dr. Tibby, Dr. Rowling	11/9/2018

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TOPIC	DISCUSSION / RECOMMENDATIONS	ACTION ITEMS (AI)	RESPONSIBLE PARTY	DATE
UDS & Quality Metrics	<p>UDS Report - Dashboard January thru September (YTD) 2018. Of the 14 UDS Measures: 9 Exceeded the HRSA Goal and 5 were short of HRSA Goals. <i>(Clinic Score/ HRSA Goal)</i></p> <ul style="list-style-type: none"> • Childhood immunization: 44% / 70% Florida shots is still not crossing over in to the electronic medical record. Staff trained to document last vaccine administration instead of all administrations. • Cervical Cancer Screening: (59% / 60%) • Weight assessment, Children & Adolescent: (86% / 60%) • Adult Weight screening and follow up: (92% / 60%) • Tobacco use screening & cessation: (94% / 90%) • Asthma Pharmacologic Therapy: (98% / 97%) • Coronary Artery Disease CAD: (90% / 75%) • Ischemic Vascular Disease (IVD): (84% / 75%) • Colorectal Cancer Screening: (57% / 60%) <p>Providers retrained to document FIT/colonoscopy results and due date for next screening. Clinics will be incentivized with a clinic lunch for obtaining the highest rate of return for FIT tests and Poop on Demand.</p> <ul style="list-style-type: none"> • HIV linkage: (67% / 100%) <p>Centralize positive HIV scheduling. Provider will notify Medical director of positive results by phone and email as soon as they receive results. Medical director will inform Nurse Manager who will schedule time for return visit and coordinate posttest counseling with DOH HIV team.</p> <ul style="list-style-type: none"> • Depression screening: (90% / 80%) • Dental Sealant: 83% / 70%) • Hypertension: (69% / 65%) • Diabetes: (59% / 65%) <p>Currently working on our diabetes management plan. Trained staff on ensure A1C's are entered.</p>	<p>Resolve issues with Florida shots and EMR interface.</p>	<p>Dr. Stewart and IT Staff</p>	<p>ASAP</p>

TOPIC	DISCUSSION / RECOMMENDATIONS	ACTION ITEMS (AI)	RESPONSIBLE PARTY	DATE
	<p>Medical – UDS Data Merged w/HPV, UDS Provider Dashboard, HPV, Patient Navigators</p> <ul style="list-style-type: none"> • HPV – Reports in Athena show that patient is compliant although they are only up to date. Update reports to identify patients that are up to date with HPV versus completed. We are working towards sending out post card reminders to have patients return. • Women’s Health - reviewing the quality metrics in Athena and investing how to pull the reports. <p>Dental</p> <ul style="list-style-type: none"> • Information Technology Staff is working on uploading dental sealants into Tableau. • Dr. Tibby and Terry are attending the NNOHA conference. They are being acknowledged in November in New Orleans at the John Rossetti awards for improvements in operations and revenue cycle. There are only 3 programs receiving this nationally. • Instadose – September 2018 - the reporting was at 100% compliance <p>Behavioral Health</p> <ul style="list-style-type: none"> • MAT Program Census – September 2018 = 97 • New Patient Intakes in September 2018 = 11 • Treatment Phase for Current Census – September 2018 • Phase 1 - 55 • Phase 2 – 26 • Phase 3 – 6 • Phase 4 – 6 • Naltrexone Patients – 2 • Vivatrol Patients - 2 	<p>Create Diabetes Management Plan</p> <p>Review and Present Women’s Health Quality Metrics</p> <p>Generate and review dental quality metrics</p> <p>Generate, review and present Behavioral Health Metric reports and Pediatric Integration reports</p>	<p>Dr. Stewart</p> <p>Dr. Ferwerda, Hector Muniz, David Speciale</p> <p>Dr. Tibby, Hector Muniz, David Speciale</p> <p>Dr. Rowling, Hector Muniz, David Speciale</p>	<p>11/9/2018</p> <p>11/9/2018</p> <p>11/9/2018</p>

TOPIC	DISCUSSION / RECOMMENDATIONS	ACTION ITEMS (AI)	RESPONSIBLE PARTY	DATE
Grant Updates	<p>The MAT program has a 10% turnover rate. If patients do not call to cancel or do not participate in the program for 30 days, then patients can be discharged from the program but can be re-admitted.</p> <p>Human Resources – Turnover/New Hire/WC</p> <ul style="list-style-type: none"> • New hires = 6 • Termination = 1 • Workers Comp = 1 	<p>Begin tracking MAT program discharges & readmissions and National averages.</p>	<p>Dr. Rowling, David Speciale</p>	<p>11/9/2018</p>
	<p>American Cancer Society (Medical)- Tobacco initiative reports, CRC Roundtable, HPV, Incentives</p> <ul style="list-style-type: none"> • Awaiting reports from community partners regarding patient participation / enrollment in a smoking cessation program. • Clinics notified of the colorectal cancer screening incentive program. <p>SUD-MH (Behavioral Health) – Received grant for \$313,750.</p> <ul style="list-style-type: none"> • There are several conditions that come along with this grant. Revised budget due to HRSA by December 31st <p>Delta Dental - - Received Grant for \$98,717</p> <ul style="list-style-type: none"> • using for equipment and supplies in clinics 	<p>Order marketing materials through the Grant.</p>	<p>Dr. Stewart</p>	<p>11/9/2018</p>

<u>TOPIC</u>	<u>DISCUSSION / RECOMMENDATIONS</u>	<u>ACTION ITEMS (AI)</u>	<u>RESPONSIBLE PARTY</u>	<u>DATE</u>
Peer Review	<p>Adding an additional chart to Peer Review for all Departments to total 5 charts a quarter. Peer Review is in the process of being automated within the RiskQual System. November is the tentative target for training providers.</p> <p>Medical – Q2 summary</p> <ul style="list-style-type: none"> New provider, Dr. Harberger reviewed all 13 charts were within standard of care. <p>Dental - Q2 Summary</p> <ul style="list-style-type: none"> Developing formalized procedure to assess, review, and document provider competency through direct observation. 35 charts were peer reviewed of which: 35 were evaluated as within standard of care, 0 were evaluated as “Provider Self-Identified Remediation”, and 13 were evaluated as Provider Education Required for documentation. Description of Issues and Corrective actions presented. <u>September 2018</u> – 4 additional charts peer reviewed on New provider all w/in standard of care. 7 charts reviewed for treatment planning of which 2 failed due to no documentation of dental carries. For directly observed clinical care measures, all were acceptable. Provider will be relocated to WPB for additional training with Pediatric Dentist for additional direct observation. Dr. Tibby to present Dental Provider Clinical Competencies and reviewed template with all staff. Piloting the tool in WPB in October. Privileging / Credentialing – September 2018: 1 provider seeking privileges for pulpotomies. She has completed a CE course and will need to directly observe 8 pulpotomies with pediatric provider and perform 4 pulpotomies using 	Develop automated Peer Review Process	Dr. Stewart, David Speciale	11/9/2018
		Complete additional Peer Reviews on this provider.	Dr. Tibby	11/9/2018

TOPIC	DISCUSSION / RECOMMENDATIONS	ACTION ITEMS (AI)	RESPONSIBLE PARTY	DATE
	<p>the new provider privileging tool prior to obtaining privileges.</p> <p>Women’s Health - Q2 Summary</p> <ul style="list-style-type: none"> 8 charts were peer reviewed of which: 7 were evaluated as within standard of care, 0 were evaluated as “Provider Self-Identified Remediation”, and 1 was evaluated as “Provider Education Required for Documentation”. Discussion of implementation of a Pap application to assist providers learn about the most updated and simplified cervical cancer prevention methods. This will be integrated into the clinical manual and supported with a procedure for implementation. Plan to add to new provider onboarding and staff will purchase application through CME budget. <p>Behavioral Health – Q2 Summary</p> <ul style="list-style-type: none"> 24 charts were peer reviewed of which: 21 were evaluated as within standard of care, 0 were evaluated as “Provider Self-Identified Remediation”, and 3 were evaluated as Provider Education Required for missing mental health status, review of systems and completion of charting in a timely manner. Description of Issues and Corrective actions presented. <p>Psychiatric/MAT Health - Q2 Summary</p> <ul style="list-style-type: none"> 8 charts were peer reviewed of which: 7 were evaluated as within standard of care, 0 were evaluated as “Provider Self-Identified Remediation”, and 1 was evaluated as 	<p>Purchase Pap App, develop procedure, and train providers.</p>	<p>Dr. Ferwerda, Dr. Stewart</p>	<p>11/9/2018</p>

TOPIC	DISCUSSION / RECOMMENDATIONS	ACTION ITEMS (AI)	RESPONSIBLE PARTY	DATE
<p>Chart Review</p>	<p>Provider Education Required for documentation. Description of Issues and Corrective actions presented.</p> <ul style="list-style-type: none"> Recommended that all psych visits should have PHQ9 & GAD7 at intake. <p>Medical - Morbidity & Mortality Review</p> <ul style="list-style-type: none"> After general chart audit by medical director and women's health, we retrained staff on Social history questions, Clinical documentation, and cervical cancer screening recommendations. <p>Dental – September Report</p> <ul style="list-style-type: none"> For the new provider, two of seven charts had missed carries dx. One of Seven provider did not report proper level of bone loss. Dr. Tibby and Supervising provider is completing 100% review of provider assessment & charting in real time. After review, all staff retained on radiography expectations. Dental to now report on x-rays errors even if corrected with retakes and staff name that took the x-ray. 16 charts were reviewed. There was one specific provider that had 4 errors in comparison to other providers who have 1 or none regarding documentation. 	<p>Moving forward, review 2 director's charts on monthly basis in Quality Workgroups to gather second opinion on patient cases. If something is learned than that can be a provider-meeting topic. Implement monthly review of provider charts to review ER Referrals and Baker acts and identify trends among providers. Add to chart reviews.</p>	<p>All Clinical Directors</p>	<p>11/9/2018</p>
<p>Quality Items</p>	<p>Hospital Follow Up – September reports and Trends Over Time</p> <ul style="list-style-type: none"> Reviewing results of the report since changes in the procedure. Discontinued reporting through RiskQual as a quality event. Will remain as an incident when applicable. Will 			

TOPIC	DISCUSSION / RECOMMENDATIONS	ACTION ITEMS (AI)	RESPONSIBLE PARTY	DATE
	<p>now be reported through Athena which provides better report.</p> <p>Dental</p> <ul style="list-style-type: none"> • Clinic Consent Forms - There was an upward trend in unsigned consents. <ul style="list-style-type: none"> - Dentrax document center is being re-organized. All consents electronically based with touchscreen for ease of use by patient and staff. - Quarter 2, 2018: 180 charts reviewed and 4 consents missing - Quarter 3, 2018: 180 charts reviewed and 7 consents missing • Quality Walkthrough Report – September 2018. Trends and recommendations for improvement included: <ul style="list-style-type: none"> - Operatory Organization - Sterilization Room Maintenance - Infection Control and PPE wearing - Log Maintenance - Instadose procedures • Instadose – September 2018 <ul style="list-style-type: none"> - Wearing – 75% - Reporting – 100% - Guest Badges – 50% 	<p>Reorganize document Center</p> <p>Provide feedback to clinic staff on opportunities for improvement</p> <p>Retrain staff on Instadose wearing and Guest Badges</p>	<p>Nancy Fox-Goughan</p> <p>Dr. Tibby, Nancy Fox-Goughan</p> <p>Nancy Fox-Goughan</p>	<p>11/9/2018</p> <p>11/9/2018</p> <p>11/9/2018</p>

TOPIC	DISCUSSION / RECOMMENDATIONS	ACTION ITEMS (AI)	RESPONSIBLE PARTY	DATE
<p style="text-align: center;">Infection Control</p>	<p>Medical</p> <ul style="list-style-type: none"> • Diabetes Care Plan was reviewed. We will begin investigating the recommended activities for improvement. • Standard of Conduct Institute standard of conducts contracts for clinics to address teamwork, respect, communication, professionalism and accountability • Training – In-service sign off sheets have been standardized and will be used to acknowledge (training sign out sheet) for any updates, trainings or education given from admin to clinics. 	<p>Develop Standards of Conduct Institute</p> <p>Implement in-service sign-off sheets</p>	<p>Clinic Directors and Managers</p> <p>Clinic Directors and Managers</p>	<p>ASAP</p> <p>ASAP</p>
	<p>Behavioral Health - DCF Audit Follow up completed on 10/5/2018. Some minor findings regarding clinic procedures and EMR set up.</p>	<p>Provide corrective actions to DCF findings</p>	<p>Dr. Rowling, Lisa Hogans, David Speciale</p>	<p>ASAP</p>
	<p>Dental</p> <ul style="list-style-type: none"> • Inspections – Waterline Safety results – passed report. • Clinic Walkthrough Reports <ul style="list-style-type: none"> - Personal Protective Equipment: September assessment were improved. Additional training was provided on tray covers and utility gloves - Equipment & Sterilization (failed loads, biological indicators) – New biological indicator log sheet implemented in all dental clinics. - Biological Indicators- streamlining the biological indicators across clinics and departments (women’s health, dental) including equipment, logs, and workflow. 			

<u>TOPIC</u>	<u>DISCUSSION / RECOMMENDATIONS</u>	<u>ACTION ITEMS (AI)</u>	<u>RESPONSIBLE PARTY</u>	<u>DATE</u>
Policy & Procedure	Policy & Procedure Committee - met to review the following Policies and procedures: <ul style="list-style-type: none"> Review & Revision - Patient dismissal protocols, Hospital Tracking (Dental & BA) New - Product Recall 	Finalize ER Referral and Tracking, Patient Dismissal Procedures	Clinic Directors	11/9/2018
Director Updates	Medical <ul style="list-style-type: none"> Investigating the pharmacy collaborative model for Diabetes and Hep C Pursuing PCMH (2017) Accreditation for Boca and Jupiter Clinics. Referral Institute Manual is in progress Registration Manual in progress to include how to cancel vs. no show 	Complete the Referral Institute and Registration Manuals	Terry Megiveron, Dr. Stewart	ASAP
UTILIZATION				
Productivity	<ul style="list-style-type: none"> Medical provider productivity report – in process Group therapy productivity report – in process Dental Triage - # of patients who have been seen for triage received emergency care - 92.99% (345 of 371 patients). <ul style="list-style-type: none"> Belle Glade - 52/55, Delray Beach – 117/126, Lantana – 62/70, West Palm Beach – 114/120 	Provide Productivity reports for all Clinic Departments	Terry Megiveron	11/9/2018
Cycle Time	<ul style="list-style-type: none"> Working on a 5 stage cycle time report for medical to include: <ul style="list-style-type: none"> Total Check In Total check out Arrival Delay Wait time in lobby 	Provide Cycle time reports	Terry Megiveron	11/9/2018

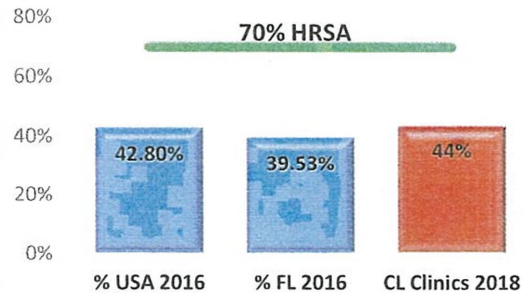
TOPIC	DISCUSSION / RECOMMENDATIONS	ACTION ITEMS (AI)	RESPONSIBLE PARTY	DATE
<p>No Shows</p> <p>3rd Next Available</p> <p>Walk-Ins</p>	<ul style="list-style-type: none"> - Wait time for exam - Total Intake - Total Exam - Total visit time <ul style="list-style-type: none"> • 2019 Goal: 30% no show rate overall • Standouts- Pediatric as a whole has high no show rates all over 42% • Interventions: <ul style="list-style-type: none"> - Reminders for non-english speaking patients - Pre-visit planning and robust call back from clinic teams - Real-time access- by providing sooner appointments and not booking so far out. • Report in Process <ul style="list-style-type: none"> • Report in process 	<p>Provide (via URF) Amy Walker, Director access to Athena reports.</p>	<p>Andrea Steele</p>	<p>ASAP</p>
PATIENT SATISFACTION				
<p>Patient Relations</p>	<p><u>Patient Relations – August 2018</u></p> <ul style="list-style-type: none"> • Complaints – Total of 4, of which: <ul style="list-style-type: none"> ▪ 1 – Finance / Billing – Behavioral Health (Delray) ▪ 1 – Respect / Attitude – Dental (Delray) ▪ 1 – Other – Dental (Lantana) ▪ 1 – Pharmacy – Pharmacy (Lantana) • Grievances – Total of 6, of which 			

TOPIC	DISCUSSION / RECOMMENDATIONS	ACTION ITEMS (AI)	RESPONSIBLE PARTY	DATE
	<ul style="list-style-type: none"> ▪ 2 – Care & Treatment - MAT (Lantana) & Medical (Delray) ▪ 2 – Respect / Attitude – Medical (Delray) ▪ 2 – Other / Wait time - Medical (WPB) & MAT Program (Lantana) • Compliments – Total of 23 across 7 locations, of which <ul style="list-style-type: none"> ▪ 21 – Primary Care ▪ 2 – Dental • Trends over time for CY 2018 presented. 			
PATIENT SAFETY B& ADVERSE EVENTS				
Patient Safety & Adverse Events	Occurrences – September 2018 <ul style="list-style-type: none"> • There were a total of 114 reported occurrences: <ul style="list-style-type: none"> ▪ Medial – 76 ▪ Dental – 18 ▪ Behavioral Health – 13 ▪ Women’s Health - 7 • Report presented by occurrence category & by Clinic location. • Trends over time for each category presented. 			
Meeting Adjourned – 2:30pm				



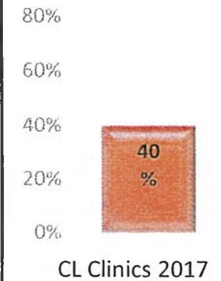
C. L. BRUMBACK PRIMARY CARE CLINICS
YTD SEPTEMBER 2018

CHILDHOOD IMMUNIZATION

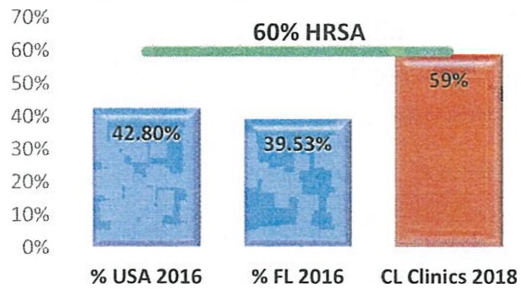


Findings: 1. Florida shots is still not crossing over. 2. Staff is only documenting last vaccine administration instead of all administrations.

Interventions: 1. IT is working with Florida Shots to get updates and improve interface. 2. Train staff on reconciling vaccines and historically documenting.



CERVICAL CANCER SCREENING

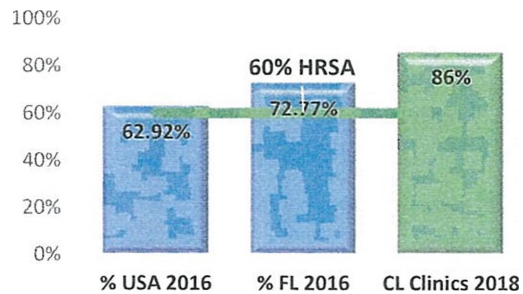


Findings: 1. Providers are not performing PAP on all visits regardless of reason for visit. 2. Records of previous screening are missing. 3. Providers failing to document pap smear results and due date for next screening.

Interventions: 1. Retrain staff on performing PAP whenever due, regardless of reason for visit. 2. Retrain staff on using medical record request order and check follow up "bucket" when records have not be received. 3. Investigate best method for documenting due date for next screening (history section vs QM tab section)



WEIGHT SCREENING AND COUNSELING FOR CHILDREN AND ADOLESCENTS

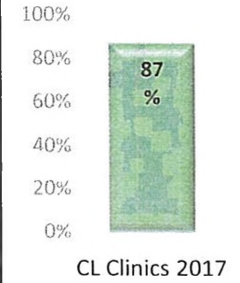
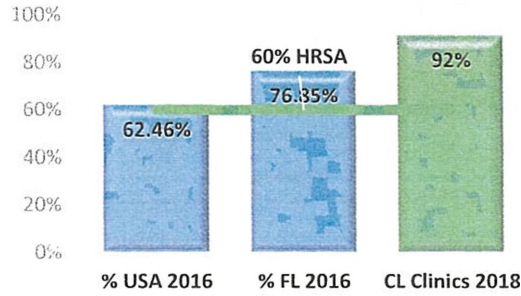


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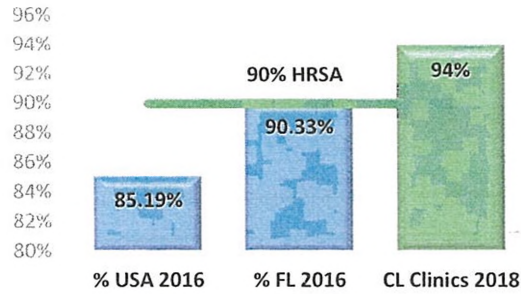


C. L. BRUMBACK PRIMARY CARE CLINICS
YTD SEPTEMBER 2018

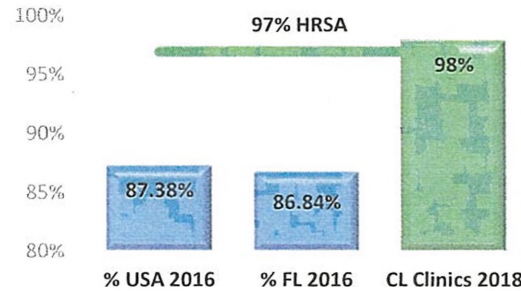
ADULT WEIGHT SCREENING AND FOLLOW UP



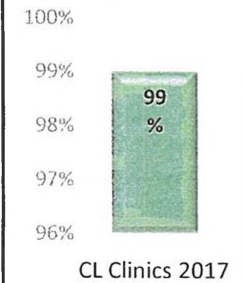
TOBACCO USE SCREENING AND CESATION INTERVENTION



ASTHMA PHARMACOLOGIC THERAPY



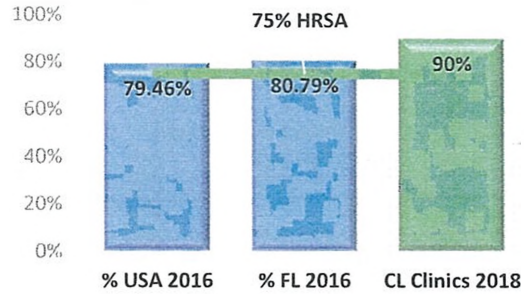
Findings: 1.
Interventions: 1.



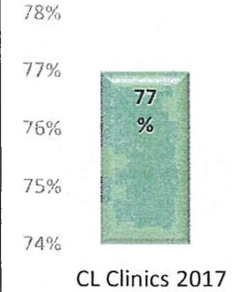


C. L. BRUMBACK PRIMARY CARE CLINICS
YTD SEPTEMBER 2018

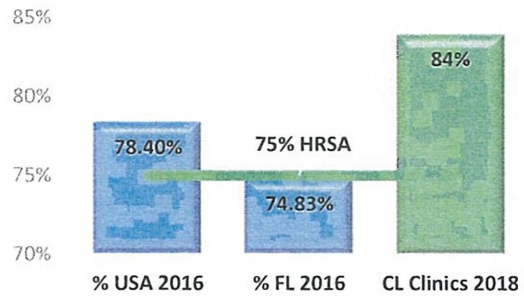
CORONARY ARTERY DISEASE (CAD): LIPID THERAPY



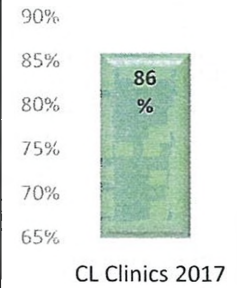
Findings: 1.
Interventions: 1.



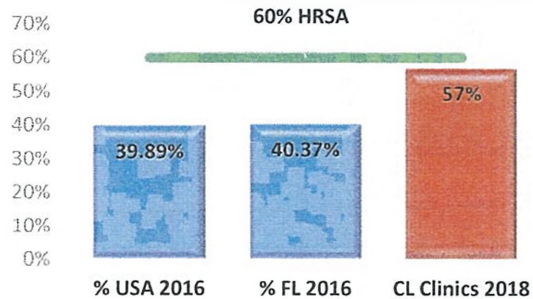
ISCHEMIC VASCULAR DISEASE (IVD): Antiplatelet Therapy



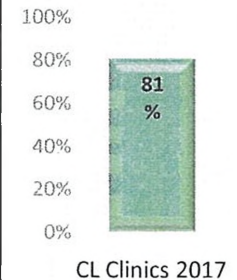
Findings: 1.
Interventions: 1.



COLORECTAL CANCER SCREENING



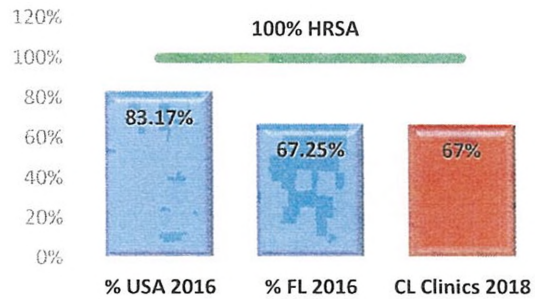
Findings: 1. Low specimen return rate. 2. Low rates for POD
Interventions: 1. Reducate staff on importance of colon cancer screening and patient education. Remind staff of screening script. 2. Incentivise staff with highest POD rates.



C. L. BRUMBACK PRIMARY CARE CLINICS

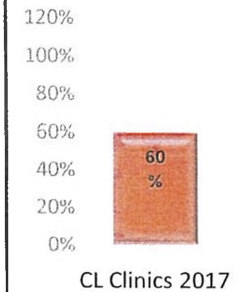
YTD SEPTEMBER 2018

HIV LINKAGE TO CARE

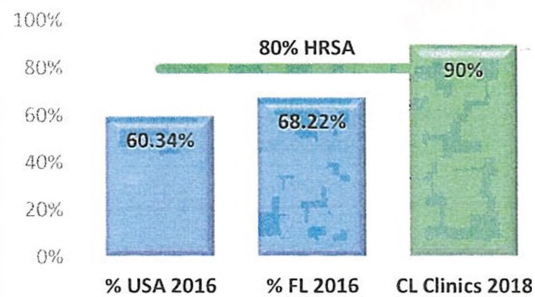


Findings: 1. Patients are lost to follow up

Interventions: 1. Partner with DOH's HIV Disease Intervention Service to join provider during follow up visit to discuss positive test results. This will ensure that patient is linked to care as soon as results are shared.

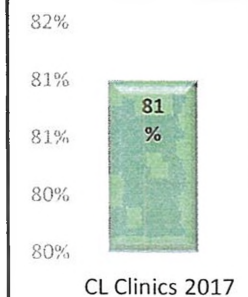


PATIENTS SCREENED FOR DEPRESSION AND FOLLOW-UP

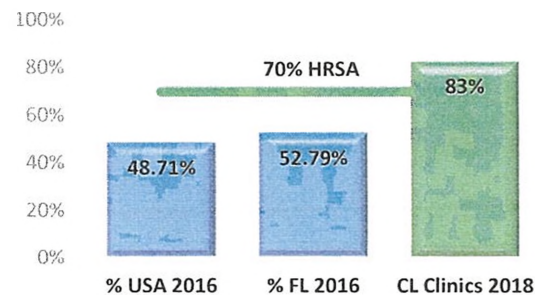


Findings: 1.

Interventions: 1.

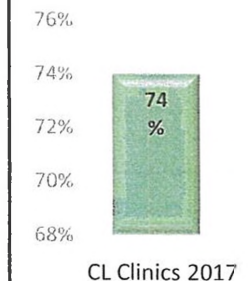


DENTAL SEALANTS



Findings: 1.

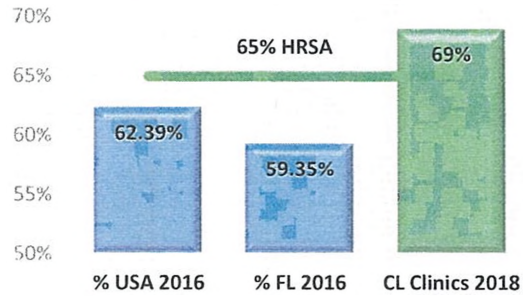
Interventions: 1.





C. L. BRUMBACK PRIMARY CARE CLINICS
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HYPERTENSION

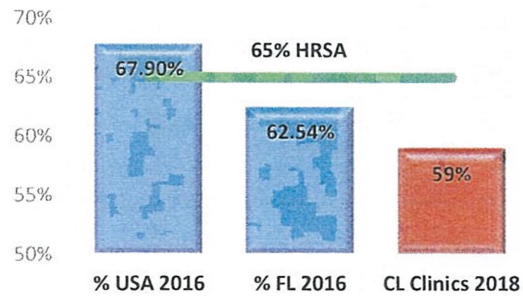


Findings: 1.

Interventions: 1.



DIABETES



Findings: 1. Patient A1c result is not in the chart. 2. Evidence of clinical inertia and failure to advance medical therapy in patients with high A1c

Interventions: 1. Retrained all staff on how to document A1c that are not reported through lab interface (i.e specialist report or result in ALLSCRIPTS). 2. Develop Diabetes Plan to be in line with HRSA diabetes initiative.

