



C. L. Brumback

Primary Care Clinics

Health Care District Palm Beach County

BOARD OF DIRECTORS

November 28, 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
November 28, 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**
4. **Disclosure of Voting Conflict**
5. **Public Comment**
6. **Meeting Minutes**
 - A. **Staff recommends a MOTION TO APPROVE:**
Board Meeting Minutes of October 24, 2018. [Pages 1-6]

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:**
November 2018 Internet Posting of District Public Meeting.
<http://www.hcdpbc.org/index.aspx?recordid=2597&page=15>
 - 7A-2 **RECEIVE AND FILE:**
Attendance tracking.
[Page 7]

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

7A-3 **RECEIVE AND FILE:**

Proposed Schedule for 2019 Board Meetings.
(Belma Andric) [Pages 8-10]

B. **FINANCE**

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

C.L. Brumback Primary Care Clinics Finance Report September 2018.
(Dawn Richards) [Pages 11-29]

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

C.L. Brumback Primary Care Clinics Finance Report October 2018.
(Dawn Richards) [Under Separate Cover]

C. **CREDENTIALING AND PRIVILEGING**

7C-1 **Staff Recommends a MOTION TO APPROVE:**

Licensed Independent Practitioner Credentialing and Privileging.
(Sarah Gonzalez) [Pages 30-32]

8. **Regular Agenda**

A. **EXECUTIVE**

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

Executive Director Informational Update.
(Belma Andric) [Pages 33-34]

B. **OPERATIONS**

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

Operations Reports – October 2018.
(Terry Megiveron) [Pages 35-51]

C. **QUALITY**

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

Quality Council Reports – October 2018.
(Dr. Noelle Stewart) [Pages 52-69]

**C. L. Brumback Primary Care Clinics
Board of Directors
Meeting Agenda
November 28, 2018**

- 9. VP and Executive Director of Clinic Services Comments**
- 10. Board Member Comments**
- 11. Establishment of Upcoming Meetings**

December 12, 2018 (HCD Board Room)

12:45pm Board of Directors

- 12. Motion to Adjourn**

**District Clinic Holdings, Inc.
d.b.a. C.L. Brumback Primary Care Clinics
Board of Directors Meeting
Summary Minutes
10/24/2018**

Present: Bessie Brown, Chairperson; James Elder, Vice Chairperson; John Casey Mullen, Secretary, David Kendle; Shanti Howard; Joseph Morel, Joan Roude; Irene Figueroa (1:03 pm)
Excused: Frances Navarro, Cory Neering
Staff: Dr. Belma Andric; Valerie Shahriari; Terry Megiveron; Dr. Tamara-Kay Tibby; Dr. Noelle Stewart; Sarah Gonzalez, Dawn Richards, Robin Kish
Guest: Beth Mourelatos, Executive Director, Palm Beach County American Heart Association
Minutes Transcribed By: Marguerite Lynch
Meeting Scheduled For 1:00 PM
Meeting Began at 12:57 PM

AGENDA ITEM	DISCUSSION	ACTION
1. Call to Order 1A. Roll Call 1B. Affirmation of Mission	Mrs. Bessie Brown called the meeting to order. Roll call was taken. Mrs. Bessie Brown read the Affirmation of Mission	The meeting was called to order at 12:57pm.
2. Agenda Approval 2A. Additions/Deletions/ Substitutions 2B. Motion to Approve Agenda Items	Mrs. Bessie Brown called for an approval of the meeting agenda. No additions or deletions. The agenda for the October 2018 meeting was approved.	VOTE TAKEN: Ms. Roude made a motion to approve the agenda as presented. The motion was duly seconded by Mr. Kendle. A vote was called, and the motion passed unanimously.
3. Awards, Introductions and Presentations	Beth Mourelatos, Executive Director, Palm Beach County American Heart Association) presented two awards to the C.L. Brumback Clinics from her organization: Target Blood Pressure and Check,	No action necessary.

	Change, Control, Cholesterol Gold Award. She highlighted the outstanding achievements by the clinics in both areas of care and presented two plaques. Mr. Kendle added that all clinic staff should be congratulated and recognized. This award is due to their hard work. Dr. Andric recognized Dr. Stewart's efforts to implement and execute the workflow modifications needed in the clinics to achieve these results.	
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 September 26, 2018	<p>Ms. Brown had a few questions regarding the minutes dated September 26, 2018.</p> <p>Page 6 – Ms. Brown asked for additional clarification on 8.C.1. – behavior health are being sent from Jupiter to West Palm Beach due to low volume. At the present time any patient identified in Jupiter requiring mental health services are being referred to West Palm Beach Clinic to receive services. Dr. Andric advised that Telehealth will soon be an option for these patients. It is not live yet, but soon and access will then be available again.</p> <p>Page 8 – Ms. Brown asked if there was an update to proclamations to recognize the Health Care District 30 years of service. Dr. Andric advised that Ms. Davis and the Communications Department have met with Mr. Neering and will be creating an annual plan of recognition by Proclamation to all municipalities in the county.</p>	VOTE TAKEN: Mr. Kendle made a motion to approve the minutes of September 26, 2018 as presented. The motion was duly seconded by Mr. Elder. A vote was called, and the motion passed unanimously.
7. Consent Agenda – Motion to Approve Consent Agenda Items		VOTE TAKEN: Mr. Mullen 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: October 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.
7B. FINANCE		
7B-1. Staff Recommends a Motion to Approve: C. L. Brumback Primary Care Clinics Fiscal Year 2019 Proposed Budget	The 2019 proposed Clinics budget was included in the board package for review. The budget was reviewed in detail and approved at the Finance Committee meeting.	No further action necessary.
7C. CREDENTIALING AND PRIVILEGING		
7C-1. Staff Recommends a Motion to Approve: Revised Primary Care Delineation of Privileges Forms	A revised Primary Care Delineation of Privileges forms to include Substance Use Disorder treatment and management for MD/DO Family Medicine, MD/DO Internal Medicine, MD/DO Pediatric Medicine, ARNP Family Medicine, and ARNP Pediatric Medicine was included in the board package for review.	No further action necessary.
8. Regular Agenda		
A. EXECUTIVE		
8A-1. Receive & File: Executive Director Informational Update	Dr. Andric provided an update to the board. The Mobile Van between 8/1/2018 to 10/15/2018 served 805 patient. 114 were identified as being homeless and 252 depression screenings were performed. Management is strategically focusing on increasing volumes by identifying additional service locations in the county. Chandler Construction began demolition on 10/22/18 at the Lakeside Medical Center clinic area. It is anticipated that the medical and dental clinics can move into this new location by the end of March 2019. The clinic brochure has been updated and there will be a link on the website to the mobile clinic locations. It should be ready by the next meeting.	Received and filed.

8B. OPERATIONS		
8B-1. Staff Recommends a Motion to Approve: Operations Reports – September 2018	<p>Terry Megiveron, Director of Operations, presented the overall clinic productivity for September 2018.</p> <p>Mr. Kendle suggested a review of productivity targets. Dr. Andric advised that the management team has discussed this at length and conducted a comparison of other FQHCs and determined we are in line with our counterparts across the country. We continue to work on clinic flow and Dr. Andric is confident productivity goals can be met.</p> <p>Mr. Megiveron added that the changes and rightsizing of certain clinics over the past few months should start to show positive changes.</p> <p>Mr. Megiveron made a note to his report on page 40. The dental target should be changed to 2,140, which will increase it to 81%.</p>	VOTE TAKEN: Mr. Kendle made a motion to approve this agenda item. The motion was duly seconded by Ms. Mullen. A vote was called, and the motion passed unanimously.
8C. QUALITY		
8C-1 Staff Recommends a MOTION TO APPROVE: Quality Council Reports – September 2018	<p>Dr. Stewart presented a summary of September 2018 Quality Council minutes included in the board package: UDS measures had 9 metrics that met or exceeded goals. 5 did not met goals. These five are being addressed through training of staff and business associates to improve coordination of care and ensure same day appointments. The Florida Shots IT interface with the new Athena system has been challenged. IT is working with Florida Shots to resolve this. Also created a diabetes care plan it details our efforts to improve our rates to control diabetes.</p> <p>Peer review process will be automated in the RiskQual system and increase the number of charts being reviewed per provider.</p> <p>Dr. Stewart continues to investigate how to report Women's Health, Behavior Health and Medication Assisted Treatment metrics.</p> <p>Dr. Tibby and Mr. Megiveron will be attending the National Oral Health Association conference to accept an award for improved operations from the DentaQuest Foundation.</p>	VOTE TAKEN: Mr. Kendle made a motion to approve this agenda item. The motion was duly seconded by Mr. Morel. A vote was called, and the motion passed unanimously.

	<p>Dental received a grant from Delta Dental in the amount of \$98,717. This will be used to purchase new equipment and supplies.</p> <p>Behavioral Health (SUD) received a \$313,750 from HRSA. Several conditions come with this grant and a revised budget will be provided by 12/31/18.</p> <p>Peer review was conducted for new provider, Dr. Harberger. All were within standard of care.</p> <p>35 dental charts were peer reviewed for the second quarter of 2018. 35 were within standard of care with 13 requiring provider education required for documentation.</p> <p>8 Women's Health charts were peer reviewed with 7 were within standard of care and 1 was identified as provider education required for documentation.</p> <p>24 behavioral health cares were peer reviewed with 21 within standard of care and 3 evaluated as provider education required.</p> <p>8 psychiatric/MAT were peer review with 7 within standard of care and 1 evaluated as provider education required for documentation.</p> <p>Utilization – working on a 5 stage cycle time for medical. Goal is 30% no show rate in 2019.</p> <p>Patient relations for August 2018 saw 4 complaints, 6 grievances, and 23 compliments.</p> <p>Mr. Kendle recommended we be very cautious when reviewing complaints and grievances as patient's who do not get what they want usually escalate and do not treat out staff fairly.</p> <p>Ms. Brown agreed and thinks the cycle time review will assist with patient satisfaction.</p> <p>Mr. Morel pointed out that of the 11,000 patients seen in the last month the complaints are .02%, which speaks volumes to actual patient satisfaction.</p>	
<p>9. CMO, VP and Executive Director of Clinical Services Comments</p>	<p>Dr. Andric distributed to members present a tote bag with the clinic logo.</p>	<p>No action necessary.</p>

10. Board Member Comments	M. Mullins shared that he has personally experienced Lake Worth Clinic patients and many are rude and demanding. The wait time was lengthy, but all staff there were trying their hardest to meet the patient needs. Dr. Andric advised that Lake Worth Clinic is a focus of management to assist with flow and operations. An architect has been employed to review the current layout and design a better functioning clinic.	No action necessary.
11. Establishment of Upcoming Meetings	November 28, 2018 (HCD Board Room) <ul style="list-style-type: none"> • 12:45 p.m. Board of Directors December 12, 2018 (HCD Board Room) <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.	VOTE TAKEN: Mr. Kendle made a motion to adjourn and Mr. Mullen seconded. The meeting was adjourned at 1:51 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	X		
James Elder	X	X	X	X	X	C	X	X	X	X		
Frances Navarro	X	X	X	X	X	C	X	X	X	E		
David Kendle	X	X	X	X	X	C	X	X	X	X		
Irene Figueroa	X	X	X	E	X	C	X	X	E	X		
John Casey Mullen	X	X	E	X	X	C	X	X	X	X		
Mara Martinez	E	E	E	E	Termination							
Shanti Howard	X	E	X	E	X	C	E	X	X	X		
Cory M. Neering	E	X	X	A	E	C	X	X	X	E		
Joan Roude							X	X	E	X		
Joseph Morel									X	X		

X= Present

C= Cancel

E= Excused

A= Absent

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
November 28, 2018

1. **Description:** Proposed Schedule for 2019 Board Meetings

2. **Summary:**

This agenda item provides the Board with the proposed schedule for 2019 Board Meetings. The meetings have been scheduled for the last Wednesday of every month.

3. **Substantive Analysis:**

We would like to propose Strategic Planning in March on a Saturday morning. HRSA requires this every three years.

Please note the March meeting will be a joint meeting with The Health Care Board of Commissioners on the last Tuesday of the month.

Please also note that the last meeting of the year will be held on the Third Wednesday of the month due to the holidays.

January 30, 2019

- 12:45PM, District Clinic Holdings, Inc. Board Meeting

February 27, 2019

- 12:45PM, District Clinic Holdings, Inc. Board Meeting

March 9, 2019

- 9:00AM, District Clinic Holdings, Inc. Board Strategic Planning

March 26, 2019

- 2:00PM, Joint Meeting with The Health Care District Board of Commissioners

April 24, 2019

- 12:45PM, District Clinic Holdings, Inc. Board Meeting

May 29, 2019

- 12:45PM, District Clinic Holdings, Inc. Board Meeting

June 26, 2019

- 12:45PM, District Clinic Holdings, Inc. Board Meeting

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
November 28, 2018

July 31, 2019

- 12:45PM, District Clinic Holdings, Inc. Board Meeting

August 28, 2019

- 12:45PM, District Clinic Holdings, Inc. Board Meeting

September 25, 2019

- 12:45PM, District Clinic Holdings, Inc. Board Meeting

October 30, 2019

- 12:45PM, District Clinic Holdings, Inc. Board Meeting

November 27, 2019

- 12:45PM, District Clinic Holdings, Inc. Board Meeting

December 18, 2019

- 12:45PM, District Clinic Holdings, Inc. Board Meeting

4. Fiscal Analysis & Economic Impact Statement:

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

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

Dawn Richards
VP & Chief Financial Officer

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
November 28, 2018

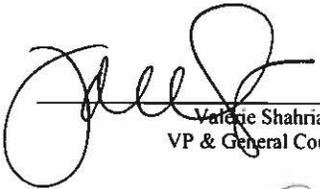
5. Reviewed/Approved by Committee:

<p>N/A</p> <hr style="border: 0; border-top: 1px solid black; margin: 0;"/> <p style="text-align: center; font-size: small;">Committee Name</p>	<p>N/A</p> <hr style="border: 0; border-top: 1px solid black; margin: 0;"/> <p style="text-align: center; font-size: small;">Date Approved</p>
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6. Recommendation:

Staff recommends the Board receive and file the Schedule for 2019 Board Meetings.

Approved for Legal sufficiency:



Valdie Shahriani
VP & General Counsel



Belma Andric, MD, MPH
CMO, VP & Executive Director of Clinical
Services

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
November 28, 2018

1. **Description:** C. L. Brumback Primary Care Clinics Financial Report September 2018

2. **Summary:**

The YTD September 2018 financial statements for the C.L. Brumback Primary Care Clinics are presented for your information.

3. **Substantive Analysis:**

Management has provided the income statements for C.L. Brumback Primary Care Clinics. Additional Management discussion and analysis is incorporated into the financial statements presentation.

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

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

N/A

 Committee Name

 Date Approved

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
November 28, 2018

6. Recommendation:

Staff recommends the Board receive and file the September 2018 financials.

Approved for Legal sufficiency:



Valerie Shahriari
VP & General Counsel



Dawn Richards
VP & Chief Financial Officer



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



MEMO

To: Finance Committee

From: Dawn L. Richards
Chief Financial Officer

Date: November 16, 2018

Subject: Management Discussion and Analysis of YTD September 2018 C.L. Brumback Primary Care Clinic Financial Statements (Unaudited)

The September statements represent the financial performance for the twelve months of the 2018 fiscal year for C.L. Brumback. Included below are year-to-date (YTD) explanations of volume, revenue and expense variances.

Summary

YTD Clinic volumes (medical, dental, and suboxone combined), are below budget by 16,552 visits or 11.1%. Suboxone clinic visits YTD of 3,763 were below budget of 15,392 by 11,629 or 75.6% due to unanticipated changes to the MAT strategy. All other medical clinics combined (net of suboxone) were above budgeted volume by 2,135 visits or 2.2%. Mobile van visits YTD of 416 were below budget of 2,070 by 1,654 or 79.9%. Total revenues, year to date, are over budget by \$2.0M or 8.7% due to volume variance in medical clinics, including unbudgeted LIP payment and incentive payments. Total operating expenses are under budget by \$1.8M or 7.4% due to delayed strategy implementations. Net operating margin is a loss of \$2.3M compared to a budgeted loss of \$6.9M. YTD the Health Care District has subsidized the Primary Care Clinics with \$2.4M.

Volume Analysis

Total medical clinic visits YTD in all adult and pediatric clinics of 101,579 were below budget of 111,073 by 9,494 or 8.5% but are over prior year of 86,878 by 14,701 or 16.9%. Dental visits YTD of 30,411 were under budget of 37,469 by 7,058 or 18.8% and below prior year of 33,445 by 3,034 or 9.1%. Suboxone clinic visits YTD of 3,763 were below budget of 15,392 by 11,629 or 75.6% due to unanticipated changes to the MAT strategy. Medical visits (net of suboxone) YTD of 97,816 were above budget of 95,681 by 2,135 or 2.2% and above prior year of 85,812 by 12,004 or 14.0%.

Net Revenue

Clinic net patient revenue YTD of \$15.3M exceeded budget of \$13.7M by \$1.6M or 11.4% and above prior year of \$12.3M by \$3.0M or 24.4%. Clinics received an unbudgeted LIP payment of \$2.2M. Other revenue exceeded budget by \$1.7M due to EHR incentives.



Grant revenue YTD of \$7.3M was below budget of \$8.6M by \$1.3M or 15.5% and above prior year of \$6.7M by \$645k or 9.7%. Due to the delayed relocation of the Belle Glade clinic to Lakeside Medical Center, the clinics were unable to recognize HRSA grant funding for construction at the site.

Expenses

Clinic operating expenses YTD of \$23.2M were under budget of \$25.0M by \$1.8M or 7.4% and above prior year of \$20.0M by \$3.2M or 16.3%. Most of this positive variance related to salaries (\$1.0M), repair and maintenance (\$675k), benefits (\$246k), drugs (\$137k), and medical supplies (\$95k). These are mainly due to unimplemented strategies in West Boca Dental, Lake Worth Dental and Lantana (Suboxone). Drugs are under budget due to use of the District in house pharmacy and 340B medications. Purchased services exceeded the budget by \$306k due to the Athena clinic EHR implementation.

DISTRICT CLINIC HOLDINGS, INC.
COMPARATIVE STATEMENT OF NET POSITION

	<u>Sep 30, 2018</u>	<u>Aug 31, 2018</u>	<u>Increase (Decrease)</u>
Assets			
Cash and Cash Equivalents	764,351	1,454,249	\$ (689,897)
Accounts Receivable, net	841,891	1,329,873	(487,982)
Due From Other Funds	-	-	-
Due from Other Governments	2,057,948	1,676,060	381,888
Other Current Assets	244,047	312,219	(68,172)
Net Investment in Capital Assets	663,074	755,881	(92,807)
Total Assets	<u>\$ 4,571,311</u>	<u>\$ 5,528,282</u>	<u>\$ (956,971)</u>
Liabilities			
Accounts Payable	320,744	170,790	149,954
Due To Other Governments	-	-	-
Deferred Revenue	98,769	-	98,769
Other Current Liabilities	879,309	861,824	17,485
Non-Current Liabilities	728,163	729,254	(1,091)
Total Liabilities	<u>2,026,985</u>	<u>1,761,869</u>	<u>265,117</u>
Net Position			
Net Investment in Capital Assets	663,074	755,881	(92,807)
Unrestricted	1,881,252	3,010,532	(1,129,280)
Total Net Position	<u>2,544,326</u>	<u>3,766,414</u>	<u>(1,222,087)</u>
Total Liabilities and Net Position	<u>\$ 4,571,311</u>	<u>\$ 5,528,282</u>	<u>\$ (956,971)</u>

Note: Amounts may not foot due to rounding.

District Clinics Holdings, Inc. Statement of Revenues and Expenses

FOR THE TWELVE MONTHS ENDED SEPTEMBER 30, 2018

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
1,686,293	1,937,631	(251,337)	(13.0%)	1,134,503	551,790	48.6%	22,427,858	22,916,606	(488,748)	(2.1%)	18,878,041	3,549,816	18.8%
711,444	561,663	(149,781)	(26.7%)	243,847	(467,597)	(191.8%)	9,844,789	6,589,849	(3,254,940)	(49.4%)	7,400,075	(2,444,714)	(33.0%)
412,318	189,162	(223,155)	(118.0%)	240,863	(171,455)	(71.2%)	4,444,727	2,125,825	(2,318,902)	(109.1%)	3,884,041	(560,685)	(14.4%)
120,750	35,429	(85,321)	(240.8%)	371,575	250,824	67.5%	2,296,913	451,371	(1,845,543)	(408.9%)	1,450,970	(845,943)	(58.3%)
1,244,512	786,254	(458,258)	(58.3%)	856,284	(388,227)	(45.3%)	16,586,429	9,167,045	(7,419,384)	(80.9%)	12,735,086	(3,851,343)	(30.2%)
\$ 346,880	\$ -	\$ 346,880	0.0%	\$ 361,035	\$ (14,155)	\$ (0)	\$ 9,480,710	\$ -	\$ 9,480,710	0.0%	\$ 6,176,537	\$ 3,304,173	\$ 1
788,662	1,151,377	(362,715)	(31.5%)	639,254	149,408	23.4%	15,322,138	13,749,561	1,572,578	11.4%	12,319,492	3,002,646	24.4%
46.77%	59.42%			56.35%			68.32%	60.00%		65.26%			
299,019	749,012	(449,994)	(60.1%)	589,038	(290,019)	(49.2%)	7,310,918	8,648,515	(1,337,597)	(15.5%)	6,665,844	645,074	9.7%
13,578	16,225	(2,647)	(16.3%)	1,878	11,700	622.9%	1,929,420	194,700	1,734,720	891.0%	693,492	1,235,928	178.2%
312,597	765,237	(452,641)	(59.2%)	590,916	(278,319)	(47.1%)	9,240,338	8,843,215	397,123	4.5%	7,359,336	1,881,002	25.6%
1,101,259	1,916,614	(815,355)	(42.5%)	1,230,170	(128,912)	(10.5%)	24,562,477	22,592,776	1,969,701	8.7%	19,678,828	4,883,649	24.8%
<i>Direct Operational Expenses:</i>													
1,110,064	1,245,795	135,730	10.9%	1,091,466	(18,598)	(1.7%)	14,600,308	15,647,843	1,047,534	6.7%	12,454,862	(2,145,446)	(17.2%)
312,415	353,494	41,079	11.6%	307,424	(4,991)	(1.6%)	3,966,692	4,213,050	246,358	5.8%	3,415,369	(551,323)	(16.1%)
130,280	59,582	(70,698)	(118.7%)	71,525	(58,755)	(82.1%)	1,001,218	694,533	(306,685)	(44.2%)	648,779	(352,439)	(54.3%)
58,368	58,641	273	0.5%	51,979	(6,390)	(12.3%)	489,562	584,201	94,639	16.2%	382,918	(106,644)	(27.9%)
79,964	16,276	(63,689)	(391.3%)	28,651	(51,314)	(179.1%)	218,830	166,175	(52,655)	(31.7%)	328,060	109,230	33.3%
-	-	-	0.0%	21,645	21,645	100.0%	15,355	-	(15,355)	0.0%	49,534	34,179	69.0%
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	-	-	0.0%
64,349	56,299	(8,051)	(14.3%)	84,581	20,231	23.9%	527,296	664,512	137,216	20.6%	547,665	20,370	3.7%
103,251	108,467	5,216	4.8%	66,509	(36,742)	(55.2%)	586,669	1,261,398	674,729	53.5%	510,492	(76,177)	(14.9%)
77,924	115,600	37,676	32.6%	209,369	131,445	62.8%	1,358,420	1,374,592	16,172	1.2%	1,341,235	(17,186)	(1.3%)
6,586	8,025	1,439	17.9%	4,492	(2,094)	(46.6%)	73,840	91,030	17,190	18.9%	42,433	(31,407)	(74.0%)
39,517	21,890	(17,627)	(80.5%)	(10,509)	(50,026)	(476.0%)	296,902	275,350	(21,552)	(7.8%)	171,274	(125,628)	(73.3%)
1,883	2,690	807	30.0%	1,778	(105)	(5.9%)	22,163	27,954	5,791	20.7%	21,672	(491)	(2.3%)
1,984,602	2,046,758	62,155	3.0%	1,928,908	(55,694)	(2.9%)	23,157,257	25,000,638	1,843,381	7.4%	19,914,294	(3,242,963)	(16.3%)
(883,344)	(130,144)	(753,200)	578.7%	(698,738)	(184,606)	26.4%	1,405,220	(2,407,862)	3,813,082	(158.4%)	(235,466)	1,640,686	(696.8%)

District Clinics Holdings, Inc. Statement of Revenues and Expenses by Month

	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Year to Date
Gross Patient Revenue	1,932,348	1,614,292	1,726,128	1,887,183	1,901,243	2,169,234	1,858,934	1,729,846	1,801,509	2,072,740	2,048,106	1,686,293	22,427,858
Contractual Allowances	787,418	59,317	337,720	278,529	555,200	399,431	2,339,528	828,230	529,647	2,256,497	761,828	711,444	9,844,789
Charity Care	311,552	(253,490)	167,151	218,711	2,463	65,773	2,052,688	259,306	353,313	446,784	408,156	412,318	4,444,727
Bad Debt	213,806	165,082	190,754	153,100	156,052	249,996	17,792	22,862	248,396	106,526	651,797	120,750	2,296,913
Other Patient Revenue	\$ 580,915	\$ (580,915)	\$ -	\$ 153,027	\$ 21,861	\$ 21,861	\$ 3,783,586	\$ 1,790,782	\$ 649,599	\$ 2,008,457	\$ 704,658	\$ 346,880	\$ 9,480,710
Net Patient Revenue	1,200,487	1,062,467	1,030,503	1,389,870	1,209,390	1,475,895	1,232,511	2,410,230	1,319,752	1,271,389	226,326	441,782	15,322,138
Collections %	62.13%	65.82%	59.70%	73.65%	63.61%	68.04%	66.30%	139.33%	73.26%	61.34%	11.05%	26.20%	68.32%
Grant Funds	581,399	570,025	610,755	694,423	646,404	601,484	633,222	706,398	590,251	586,159	791,380	299,019	7,310,918
Other Revenue	2,856	1,864	109,616	3,012	2,486	43,940	4,062	64,999	3,771	4,339	1,674,896	13,578	1,929,420
Total Other Revenues	584,255	571,889	720,371	697,436	648,890	645,424	637,284	771,396	594,022	590,499	2,466,276	312,597	9,240,338
Total Revenues	1,784,741	1,634,356	1,750,874	2,087,305	1,858,280	2,121,319	1,869,795	3,181,626	1,913,774	1,861,888	2,692,602	754,378	24,562,477
<i>Direct Operational Expenses:</i>													
Salaries and Wages	1,216,848	1,147,815	1,156,021	1,157,040	1,203,702	1,316,763	1,241,980	1,415,855	1,174,280	1,165,687	1,294,254	1,110,064	14,600,308
Benefits	302,737	307,341	306,130	339,069	334,301	350,911	339,579	357,361	345,001	328,226	343,621	312,415	3,966,692
Purchased Services	36,818	31,240	55,668	56,008	40,481	92,475	101,864	53,008	102,800	203,204	97,371	130,280	1,001,218
Medical Supplies	25,047	34,241	41,871	45,383	65,137	41,037	40,647	35,160	36,607	33,213	32,851	58,368	489,562
Other Supplies	5,129	8,001	5,444	8,044	14,369	10,848	12,495	44,476	16,237	7,092	6,730	79,964	218,830
Contracted Physician Expense	12,703	2,652	-	-	-	-	-	-	-	-	-	-	15,355
Medical Services	-	-	-	-	-	-	-	-	-	-	-	-	-
Drugs	39,087	60,113	48,821	50,181	48,344	52,837	42,549	40,454	26,793	26,987	26,779	64,349	527,296
Repairs & Maintenance	28,999	49,299	58,740	12,935	48,891	41,387	21,609	92,624	23,703	38,120	67,112	103,251	586,669
Lease & Rental	111,395	109,108	90,150	129,097	117,865	127,337	165,851	122,460	95,932	106,145	105,159	77,924	1,358,420
Utilities	2,097	8,470	8,236	5,588	5,756	4,661	6,556	9,388	5,547	4,134	6,822	6,586	73,840
Other Expense	29,001	31,159	9,617	20,430	22,501	28,627	29,722	11,680	21,355	33,817	19,476	39,517	296,902
Insurance	1,778	1,778	1,416	1,417	1,417	1,417	1,417	1,883	2,417	2,404	2,938	1,883	22,163
Total Operational Expenses	1,811,638	1,791,217	1,782,114	1,825,192	1,902,763	2,068,299	2,004,269	2,184,349	1,850,671	1,949,029	2,003,113	1,984,602	23,157,257
Net Performance before Depreciation & Overhead Allocations	(26,897)	(156,860)	(31,240)	262,113	(44,484)	53,020	(134,474)	997,277	63,104	(87,141)	689,489	(1,230,224)	1,405,220
Depreciation	17,505	16,479	16,992	16,992	16,992	16,992	17,540	16,972	16,722	15,335	21,163	17,256	206,940
<i>Overhead Allocations:</i>													
Risk Mgt	7,453	8,836	13,641	8,777	9,774	10,281	8,967	9,838	13,097	9,732	10,122	9,810	120,273
Rev Cycle	48,556	47,099	34,355	59,652	49,552	37,122	48,655	16,506	35,835	52,889	40,319	64,150	534,139
Internal Audit	5	-	580	1,967	5,809	5,377	5,377	5,328	5,328	5,281	5,528	40,581	40,581
Palm Springs Facility	20,677	21,156	20,813	20,281	41,731	15,176	27,667	36,418	19,871	17,709	17,494	16,675	275,668
Legislative Affairs	-	-	-	-	-	-	-	-	-	-	-	-	-
Administration	25,875	24,692	26,547	27,033	30,666	20,796	27,963	17,828	22,096	23,099	24,090	22,093	292,779
Human Resources	29,597	13,464	33,802	21,072	21,563	28,368	49,058	34,524	29,915	29,178	33,355	26,729	350,624
Legal	5,569	7,477	13,345	8,693	13,576	9,757	8,811	14,375	12,734	13,811	9,124	24,589	141,861
Records	4,860	4,152	3,963	4,751	10,058	6,632	9,240	10,701	5,944	6,255	6,722	(4,745)	68,534
Compliance	5,184	6,493	6,603	8,310	6,895	7,066	1,785	5,303	5,513	6,255	6,278	4,311	69,997
Planning/Research	1,666	1,204	1,163	1,248	1,111	1,207	5,733	1,250	1,093	1,225	1,353	(2,788)	15,464
Finance	26,706	21,729	22,431	24,720	24,201	43,417	29,974	30,126	24,580	25,476	26,114	28,382	327,857
Communications	-	-	-	-	-	-	-	-	-	-	-	-	-
Public Relations	5,778	7,688	7,362	5,198	13,328	3,213	6,360	8,045	7,531	8,785	9,972	10,985	94,244
Information Technology	68,942	137,669	80,805	37,467	76,905	67,776	75,088	110,642	65,435	74,684	93,958	122,873	1,012,243
Budget & Decision Support	2,141	2,508	2,397	2,616	84	(231)	3,602	-	-	-	-	-	13,118
Corporate Quality	4,089	3,976	1,372	3,565	2,776	4,069	3,662	3,945	3,675	3,762	3,957	(5,144)	33,706
Managed Care Contract	4,449	4,604	4,302	5,502	15,408	(1,070)	5,381	7,962	2,006	7,586	3,751	(1,958)	57,922
Total Overhead Allocations	261,549	312,747	272,899	239,466	319,593	259,338	317,325	312,840	254,648	285,225	291,890	321,487	3,449,008
Total Expenses	2,090,692	2,120,442	2,072,005	2,081,650	2,239,348	2,344,629	2,339,134	2,514,161	2,122,041	2,249,589	2,316,167	2,323,346	26,813,204
Net Margin	\$ (305,951)	\$ (486,086)	\$ (321,131)	\$ 5,655	\$ (381,068)	\$ (223,310)	\$ (469,339)	\$ 667,465	\$ (208,267)	\$ (387,701)	\$ 376,436	\$ (1,568,968)	\$ (2,250,728)
Capital	-	10,221	(10,221)	-	-	-	40,825	(40,825)	-	-	-	-	-
General Fund Support/ Transfer In	-	-	-	-	-	2,000,000	70,000	100,000	-	200,000	-	-	\$ 2,370,000

District Clinic Holdings, Inc.- Medical Statement of Revenue and Expenses

FOR THE TWELVE MONTHS ENDED SEPTEMBER 30, 2018

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
9,764	8,105	(1,659)	(20.5%)	4,999	(4,765)	(95.3%)	Depreciation	63,896	97,256	33,360	34.3%	48,699	(15,197)	(31.2%)
<i>Overhead Allocations:</i>														
7,696	9,782	2,086	21.3%	11,565	3,868	33.4%	Risk Mgt	94,355	116,222	21,867	18.8%	65,419	(28,935)	(44.2%)
49,719	42,483	(7,236)	(17.0%)	20,850	(28,869)	(138.5%)	Rev Cycle	413,981	503,990	90,009	17.9%	181,412	(232,569)	(128.2%)
4,337	4,137	(200)	(4.8%)	3,370	(966)	(28.7%)	Internal Audit	31,836	49,144	17,308	35.2%	45,759	13,923	30.4%
14,274	27,788	13,515	48.6%	-	(14,274)	0.0%	Palm Springs Facility	235,978	333,462	97,484	29.2%	-	(235,978)	0.0%
-	-	-	0.0%	-	-	0.0%	Legislative Affairs	-	-	-	0.0%	-	-	0.0%
17,332	20,148	2,816	14.0%	15,987	(1,345)	(8.4%)	Administration	228,535	239,363	10,828	4.5%	191,922	(36,613)	(19.1%)
20,171	25,138	4,967	19.8%	15,498	(4,674)	(30.2%)	Human Resources	267,014	295,559	28,545	9.7%	226,487	(40,527)	(17.9%)
19,290	10,213	(9,078)	(88.9%)	10,854	(8,437)	(77.7%)	Legal	111,578	121,333	9,755	8.0%	83,318	(28,261)	(33.9%)
(1,575)	4,739	6,314	133.2%	(2,996)	(1,421)	47.4%	Records	55,889	56,303	414	0.7%	23,666	(32,223)	(136.2%)
3,382	6,584	3,202	48.6%	6,744	3,362	49.9%	Compliance	55,458	78,223	22,765	29.1%	42,135	(13,323)	(31.6%)
922	1,159	236	20.4%	-	(922)	0.0%	Planning/Research	12,417	13,769	1,352	9.8%	-	(12,417)	0.0%
22,266	22,104	(162)	(0.7%)	17,996	(4,270)	(23.7%)	Finance	259,503	262,610	3,107	1.2%	191,290	(68,213)	(35.7%)
-	-	-	0.0%	-	-	0.0%	Communications	-	-	-	0.0%	-	-	0.0%
8,617	14,810	6,193	41.8%	3,997	(4,621)	(115.6%)	Public Relations	74,497	175,955	101,458	57.7%	61,738	(12,759)	(20.7%)
96,395	71,878	(24,518)	(34.1%)	89,663	(6,732)	(7.5%)	Information Technology	794,123	853,941	59,818	7.0%	637,307	(156,816)	(24.6%)
-	2,767	2,767	100.0%	2,529	2,529	100.0%	Budget & Decision Support	8,068	32,875	24,807	75.5%	32,589	24,521	75.2%
(2,993)	2,332	5,325	228.4%	-	2,993	0.0%	Corporate Quality	27,485	27,700	215	0.8%	-	(27,485)	0.0%
(1,518)	8,290	9,807	118.3%	-	1,518	0.0%	Managed Care Contract	44,893	98,343	53,450	54.4%	-	(44,893)	0.0%
258,317	274,352	16,035	5.8%	196,056	(62,261)	(31.8%)	Total Overhead Allocations	2,715,609	3,258,792	543,183	16.7%	1,783,043	(932,567)	(52.3%)
1,768,358	1,855,459	87,102	4.7%	1,780,814	12,456	0.7%	Total Expenses	21,412,335	23,121,924	1,709,589	7.4%	17,639,654	(3,772,681)	(21.4%)
\$ (1,012,400)	\$ (554,313)	\$ (458,087)	82.6%	\$ (1,089,841)	\$ 77,441	(7.1%)	Net Margin	\$ (2,615,252)	\$ (7,080,075)	\$ 4,464,823	(63.1%)	\$ (3,193,093)	\$ 577,841	(18.1%)
-	52,700	52,700	100.0%	-	-	0.0%	Capital	-	870,400	870,400	100.0%	-	-	0.0%
\$ -	\$ 800,000	\$ 800,000	100.0%	\$ 3,300,000	\$ 3,300,000	100.0%	General Fund Support/ Transfer In	\$ 2,370,000	\$ 9,600,000	\$ 7,230,000	75.3%	\$ 3,300,000	\$ 930,000	28.2%

District Clinics Holdings, Inc.- Dental Statement of Revenues and Expenses by Location

FOR THE TWELVE MONTHS ENDED SEPTEMBER 30, 2018

	Dental Clinic Administration	West Palm Beach Dental Clinic	Lantana Dental Clinic	Delray Dental Clinic	Belle Glade Dental Clinic	Lake Worth Dental Clinic	West Boca Dental Clinic	Total
Gross Patient Revenue	-	1,343,164	1,066,009	1,007,337	512,946	-	-	3,929,455
Contractual Allowances	-	387,233	277,529	271,615	142,365	-	-	1,078,743
Charity Care	-	469,752	421,329	471,399	180,493	-	-	1,542,973
Bad Debt	-	108,441	151,626	83,656	43,381	-	-	387,105
Total Contractual Allowances and Bad Debt	-	965,427	850,484	826,671	366,240	-	-	3,008,821
Other Patient Revenue	-	1,069,159	889,073	862,786	485,918	-	-	3,306,936
Net Patient Revenue	-	1,446,896	1,104,597	1,043,452	632,625	-	-	4,227,570
Collection %	-	107.72%	103.62%	103.59%	123.33%	0.00%	0.00%	107.59%
Grant Funds	224,714	416,188	331,323	317,148	214,450	-	-	1,503,823
Other Revenue	-	17,000	8,500	8,500	-	-	-	34,000
Total Other Revenues	224,714	433,188	339,823	325,648	214,450	-	-	1,537,823
Total Revenues	224,714	1,880,084	1,444,420	1,369,100	847,075	-	-	5,765,394
Direct Operational Expenses:								
Salaries and Wages	271,523	802,098	658,134	594,112	321,713	-	8,800	2,656,379
Benefits	58,369	268,563	166,865	189,545	94,374	-	698	778,414
Purchased Services	-	26,623	21,596	22,379	42,611	50,069	37,000	200,278
Medical Supplies	-	86,315	97,400	84,393	35,124	-	-	303,233
Other Supplies	480	14,731	16,330	11,925	7,117	-	-	50,583
Contracted Physician Expense	-	-	-	-	-	-	-	-
Medical Services	-	-	-	-	-	-	-	-
Drugs	-	3,933	2,983	2,224	1,869	-	-	11,009
Repairs & Maintenance	-	17,946	20,563	18,624	14,470	-	-	71,603
Lease & Rental	-	116,297	68,847	66,486	75,675	66,953	-	394,259
Utilities	-	1,686	3,657	1,915	2,735	-	-	9,994
Other Expense	9,339	10,613	6,709	6,200	14,795	-	-	47,656
Insurance	-	-	-	1,020	-	-	-	1,020
Total Operational Expenses	339,711	1,348,806	1,063,084	997,803	611,503	117,022	46,498	4,524,427
Net Performance before Depreciation & Overhead Allocations	(114,996)	531,279	381,336	371,297	235,572	(117,022)	(46,498)	1,240,967
Depreciation	-	78,621	19,333	25,171	19,919	-	-	143,044
Overhead Allocations:								
Risk Mgt	2,023	7,856	5,356	5,670	5,012	-	-	25,918
Rev Cycle	-	39,497	26,931	28,506	25,225	-	-	120,158
Internal Audit	683	2,651	1,807	1,913	1,690	-	-	8,745
Palm Springs Facility	39,690	-	-	-	-	-	-	39,690
Legislative Affairs	-	-	-	-	-	-	-	-
Administration	4,890	19,517	13,305	14,087	12,444	-	-	64,244
Human Resources	4,147	27,364	18,331	19,999	13,770	-	-	83,610
Legal	2,394	9,169	6,251	6,617	5,851	-	-	30,282
Records	1,207	3,755	2,562	2,709	2,411	-	-	12,645
Compliance	1,192	4,387	2,991	3,166	2,802	-	-	14,539
Planning/Research	250	918	626	663	590	-	-	3,047
Finance	5,578	20,635	14,069	14,892	13,179	-	-	68,354
Communications	-	-	-	-	-	-	-	-
Public Relations	1,601	5,965	4,067	4,305	3,809	-	-	19,747
Information Technology	17,028	66,123	45,078	47,725	42,166	-	-	218,120
Budget & Decision Support	160	1,612	1,098	1,164	1,016	-	-	5,050
Corporate Quality	594	1,848	1,260	1,333	1,186	-	-	6,221
Managed Care Contract	-	4,284	2,921	3,092	2,733	-	-	13,029
Total Overhead Allocations	81,437	215,581	146,653	155,842	133,885	-	-	733,398
Total Expenses	421,147	1,643,008	1,229,070	1,178,816	765,308	117,022	46,498	5,400,869
Net Margin	\$ (196,433)	\$ 237,077	\$ 215,350	\$ 190,284	\$ 81,767	\$ (117,022)	\$ (46,498)	\$ 364,524
Capital	-	-	-	-	-	-	-	-
General Fund Support/ Transfer In	\$ -	-	-	-	-	-	\$ -	-

District Clinics Holdings, Inc.- Dental Statement of Revenues and Expenses

FOR THE TWELVE MONTHS ENDED SEPTEMBER 30, 2018

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
306,243	433,720	(127,477)	(29.4%)	251,212	55,031	21.9%	Gross Patient Revenue	3,929,455	4,768,058	(838,603)	(17.6%)	4,215,010	(285,555)	(6.8%)
89,486	53,378	(36,108)	(67.6%)	(114,901)	(204,387)	177.9%	Contractual Allowances	1,078,743	572,089	(506,654)	(88.6%)	1,208,917	130,174	10.8%
134,248	25,759	(108,489)	(421.2%)	98,063	(36,185)	(36.9%)	Charity Care	1,542,973	289,045	(1,253,927)	(433.8%)	1,484,964	(58,009)	(3.9%)
5,800	3,347	(2,452)	(73.3%)	(14,876)	(20,676)	139.0%	Bad Debt	387,105	34,143	(352,963)	(1,033.8%)	66,684	(320,421)	(480.5%)
229,533	82,484	(147,049)	(178.3%)	(31,715)	(261,248)	823.7%	Total Contractuals and Bad Debts	3,008,821	895,277	(2,113,544)	(236.1%)	2,760,565	(248,256)	(9.0%)
150,615	-	150,615	0.0%	141,000	9,615	6.8%	Other Operating Revenue	3,306,936	-	3,306,936	0.0%	2,286,300	1,020,636	44.6%
227,325	351,236	(123,910)	(35.3%)	423,927	(196,601)	(46.4%)	Net Patient Revenue	4,227,570	3,872,781	354,789	9.2%	3,740,745	486,825	13.0%
74.23%	80.98%			168.75%			Collection %	107.59%	81.22%		88.75%			
117,976	255,732	(137,756)	(53.9%)	115,270	2,706	2.3%	Grant Funds	1,503,823	2,576,146	(1,072,322)	(41.6%)	1,491,521	12,302	0.8%
-	8,500	(8,500)	(100.0%)	-	-	0.0%	Other Revenue	34,000	102,000	(68,000)	(66.7%)	1	33,999	3,207,447.2%
117,976	264,232	(146,256)	(55.4%)	115,270	2,706	2.3%	Total Other Revenues	1,537,823	2,678,146	(1,140,322)	(42.6%)	1,491,522	46,301	3.1%
345,301	615,467	(270,166)	(43.9%)	539,197	(193,896)	(36.0%)	Total Revenues	5,765,394	6,550,927	(785,533)	(12.0%)	5,232,267	533,126	10.2%
<i>Direct Operational Expenses:</i>														
231,003	278,377	47,374	17.0%	209,548	(21,455)	(10.2%)	Salaries and Wages	2,656,379	3,199,063	542,684	17.0%	2,587,021	(69,358)	(2.7%)
63,715	86,680	22,965	26.5%	63,446	(269)	(0.4%)	Benefits	778,414	942,350	163,936	17.4%	721,718	(56,696)	(7.9%)
98,845	11,743	(87,102)	(741.7%)	6,366	(92,479)	(1,452.8%)	Purchased Services	200,278	121,750	(78,528)	(64.5%)	108,751	(91,527)	(84.2%)
24,382	38,935	14,553	37.4%	20,877	(3,505)	(16.8%)	Medical Supplies	303,233	350,000	46,767	13.4%	219,921	(83,311)	(37.9%)
20,508	6,563	(13,945)	(212.5%)	6,563	(13,945)	(212.5%)	Other Supplies	50,583	51,000	417	0.8%	35,778	(14,806)	(41.4%)
-	-	-	0.0%	-	-	0.0%	Contracted Physician Expense	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Medical Services	-	-	-	0.0%	-	-	0.0%
33	3,351	3,318	99.0%	1,106	1,073	97.1%	Drugs	11,009	24,500	13,491	55.1%	16,823	5,814	34.6%
9,922	12,847	2,926	22.8%	14,040	4,118	29.3%	Repairs & Maintenance	71,603	126,460	54,857	43.4%	72,324	721	1.0%
27,524	31,786	4,262	13.4%	27,028	(496)	(1.8%)	Lease & Rental	394,259	368,819	(25,440)	(6.9%)	324,047	(70,212)	(21.7%)
865	1,794	929	51.8%	-	(865)	0.0%	Utilities	9,994	16,260	6,266	38.5%	-	(9,994)	0.0%
7,454	1,306	(6,148)	(470.6%)	68	(7,386)	(10,810.6%)	Other Expense	47,656	30,250	(17,406)	(57.5%)	18,683	(28,972)	(155.1%)
75	372	297	79.8%	108	33	30.3%	Insurance	1,020	4,310	3,290	76.3%	1,316	297	22.6%
484,325	473,755	(10,571)	(2.2%)	349,149	(135,177)	(38.7%)	Total Operational Expenses	4,524,427	5,234,762	710,335	13.6%	4,106,382	(418,045)	(10.2%)
Net Performance before														
(139,024)	141,713	(280,737)	(198.1%)	190,048	(329,073)	(173.2%)	Depreciation & Overhead Allocations	1,240,967	1,316,165	(75,198)	(5.7%)	1,125,885	115,081	10.2%

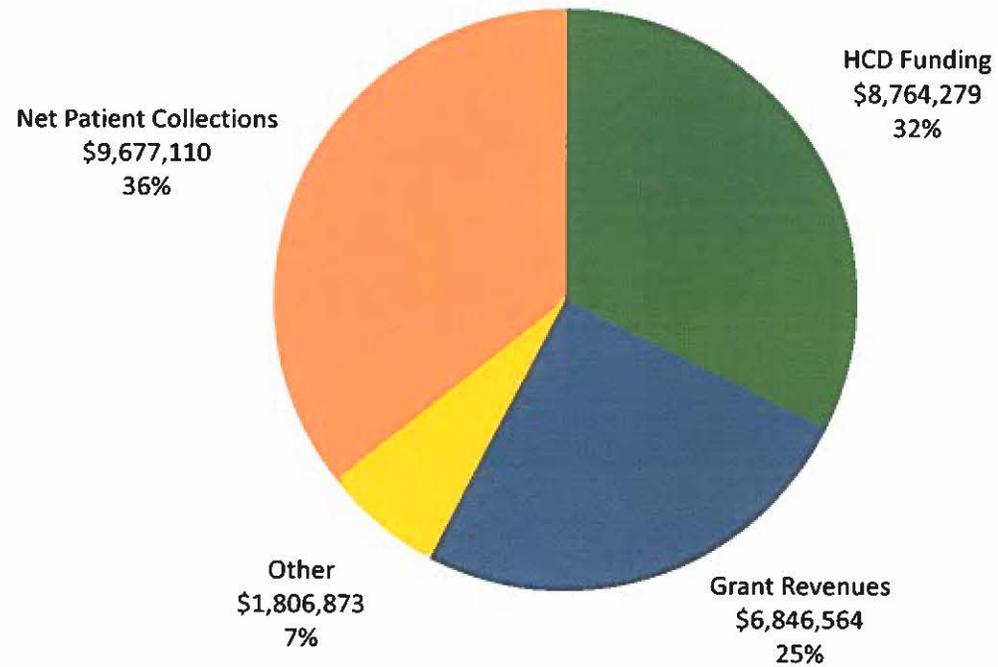
District Clinics Holdings, Inc.- Dental Statement of Revenues and Expenses

FOR THE TWELVE MONTHS ENDED SEPTEMBER 30, 2018

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
7,492	18,840	11,347	60.2%	12,506	5,014	40.1%	143,044	226,078	83,034	36.7%	149,376	6,332	4.2%
<i>Overhead Allocations:</i>													
2,114	2,950	836	28.3%	2,762	648	23.5%	25,918	31,922	6,004	18.8%	16,073	(9,845)	(61.3%)
14,430	13,632	(799)	(5.9%)	5,303	(9,127)	(172.1%)	120,158	146,271	26,112	17.9%	47,978	(72,181)	(150.4%)
1,191	1,248	56	4.5%	451	(740)	(164.2%)	8,745	13,498	4,754	35.2%	10,998	2,254	20.5%
2,401	4,674	2,273	48.6%	-	(2,401)	0.0%	39,690	56,086	16,396	29.2%	-	(39,690)	0.0%
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	-	-	0.0%
4,761	6,076	1,316	21.7%	3,819	(942)	(24.7%)	64,244	65,745	1,502	2.3%	47,605	(16,639)	(35.0%)
6,558	9,270	2,713	29.3%	3,762	(2,795)	(74.3%)	83,610	96,079	12,469	13.0%	57,378	(26,232)	(45.7%)
5,299	3,080	(2,218)	(72.0%)	2,593	(2,706)	(104.4%)	30,282	33,326	3,044	9.1%	20,859	(9,424)	(45.2%)
(3,170)	1,429	4,599	321.8%	(947)	2,223	(234.7%)	12,645	15,465	2,820	18.2%	5,488	(7,157)	(130.4%)
929	1,986	1,057	53.2%	1,611	682	42.3%	14,539	21,485	6,947	32.3%	10,424	(4,114)	(39.5%)
(3,710)	350	4,060	1,161.2%	-	3,710	0.0%	3,047	3,782	735	19.4%	-	(3,047)	0.0%
6,116	6,667	551	8.3%	4,299	(1,817)	(42.3%)	68,354	72,130	3,777	5.2%	47,650	(20,704)	(43.4%)
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	-	-	0.0%
2,367	4,467	2,100	47.0%	955	(1,412)	(147.9%)	19,747	48,329	28,582	59.1%	15,280	(4,467)	(29.2%)
26,477	21,678	(4,799)	(22.1%)	21,417	(5,060)	(23.6%)	218,120	234,550	16,430	7.0%	157,745	(60,375)	(38.3%)
-	835	835	100.0%	604	604	100.0%	5,050	9,030	3,979	44.1%	8,131	3,081	37.9%
(2,151)	703	2,854	405.8%	-	2,151	0.0%	6,221	7,608	1,387	18.2%	-	(6,221)	0.0%
(441)	2,660	3,100	116.6%	-	441	0.0%	13,029	28,542	15,513	54.4%	-	(13,029)	0.0%
63,170	81,703	18,533	22.7%	46,628	(16,542)	(35.5%)	733,398	883,849	150,451	17.0%	445,608	(287,790)	(64.6%)
554,988	574,298	19,310	3.4%	408,284	(146,705)	(35.9%)	5,400,869	6,344,689	943,819	14.9%	4,701,367	(699,503)	(14.9%)
\$ (209,687)	\$ 41,169	\$ (250,857)	(609.3%)	\$ 130,913	\$ (340,601)	(260.2%)	\$ 364,524	\$ 206,238	\$ 158,286	76.7%	\$ 530,900	\$ (166,376)	(31.3%)
-	-	-	0.0%	-	-	0.0%	-	2,155,696	2,155,696	100.0%	-	-	0.0%
\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	0.0%

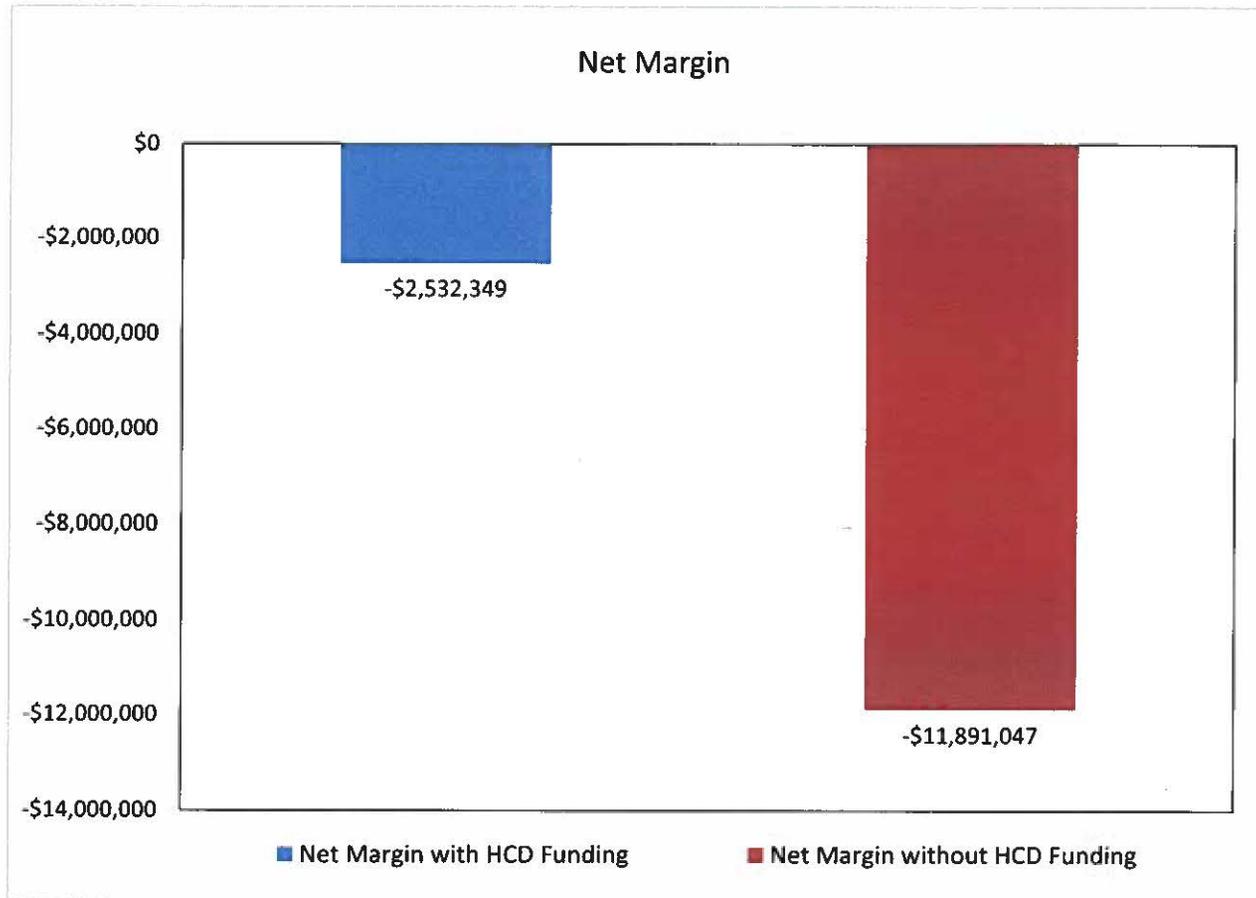
Clinic Visits - Adults and Pediatrics	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Current Year	Current YTD	%Var to	Prior Year
													Total	Budget	Budget	Total
West Palm Beach	1,678	1,467	1,614	1,583	1,648	1,561	1,681	1,300	1,579	1,635	1,719	1,322	18,787	17,088	9.9%	17,812
Delray	1,590	1,367	1,429	1,307	1,439	1,420	1,441	1,021	1,240	1,105	1,251	1,087	15,697	16,460	(4.6%)	17,415
Lantana	1,448	1,214	1,212	1,304	1,312	1,399	1,373	1,036	1,303	1,149	1,323	1,202	15,275	15,283	(0.1%)	14,885
Belle Glade	836	904	805	856	947	988	920	871	832	706	796	843	10,304	9,576	7.6%	9,849
Jerome Golden Center	294	214	238	206	239	278	310	235	246	155	-	-	2,415	3,251	(25.7%)	3,374
Lewis Center	197	169	205	166	203	212	218	191	257	325	243	243	2,661	2,360	12.8%	2,385
Lake Worth & Women's Health Care	1,540	1,431	1,497	1,527	1,554	1,690	1,557	1,251	1,520	1,409	1,458	1,335	17,739	16,488	7.6%	15,770
Jupiter Clinic	479	406	485	495	552	592	552	340	515	524	549	457	5,946	6,190	(3.9%)	2,557
West Boca	407	353	438	510	702	812	859	809	774	977	1,061	874	8,576	6,915	24.0%	1,765
Mobile Van	-	-	-	-	-	-	-	-	-	-	225	191	416	2,070	(79.9%)	-
Suboxone	199	269	216	214	308	352	383	384	324	414	452	248	3,763	15,392	(75.6%)	1,066
Total Clinic Visits	8,668	7,794	8,139	8,168	8,904	9,274	9,294	7,438	8,590	8,349	9,159	7,802	101,579	111,073	(8.5%)	86,878
Dental Visits																
West Palm Beach	1,085	816	926	870	803	858	987	897	754	746	828	745	10,315	11,181	(7.7%)	11,276
Lantana	833	711	699	697	671	754	749	709	623	649	675	548	8,318	8,935	(6.9%)	8,728
Delray	824	651	649	627	609	602	592	516	504	583	627	516	7,300	9,176	(20.4%)	8,948
Belle Glade	423	334	346	390	313	442	358	386	363	352	428	343	4,478	4,675	(4.2%)	4,493
Lake Worth	-	-	-	-	-	-	-	-	-	-	-	-	-	2,316	(100.0%)	-
West Boca	-	-	-	-	-	-	-	-	-	-	-	-	-	1,186	(100.0%)	-
Total Dental Visits	3,165	2,512	2,620	2,584	2,396	2,656	2,686	2,508	2,244	2,330	2,558	2,152	30,411	37,469	(18.8%)	33,445
Total Medical and Dental Visits	11,833	10,306	10,759	10,752	11,300	11,930	11,980	9,946	10,834	10,679	11,717	9,954	131,990	148,542	(11.1%)	120,323
Mental Health Counselors (non billable)																
West Palm Beach	80	61	63	94	105	110	111	97	150	123	172	124	1,290	-	-	924
Delray	84	94	95	86	78	71	90	79	138	126	105	111	1,157	-	-	1,071
Lantana	235	126	149	63	158	136	150	146	222	226	253	378	2,242	-	-	1,423
Belle Glade	17	7	21	7	17	15	16	15	18	16	21	19	189	-	-	211
Lewis Center	61	49	74	105	137	158	189	172	195	213	233	208	1,794	-	-	657
Lake Worth	112	105	65	114	145	183	177	195	166	151	189	145	1,747	-	-	1,025
Jupiter	23	24	21	34	36	38	42	23	27	39	8	-	315	-	-	103
West Boca	7	14	23	24	23	27	34	19	30	26	12	-	239	-	-	64
Mobile Van	-	-	-	-	-	-	-	-	-	-	13	-	13	-	-	-
Total Mental Health Screenings	619	480	511	527	699	738	809	746	946	920	1,006	985	8,986	-	-	5,478

Primary Care Clinics Funding Sources

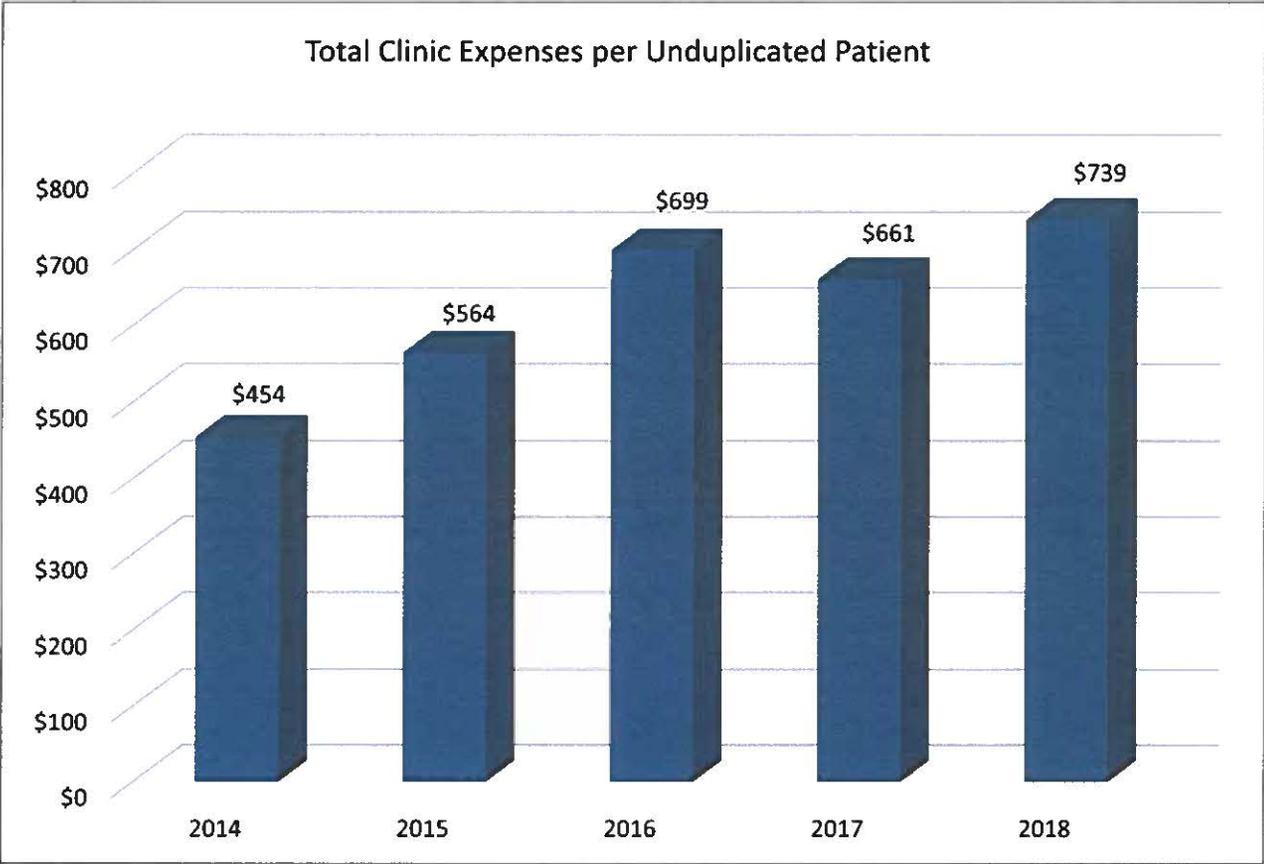


YTD September 2018 Total Expenses \$27,094,826

*Total expenses include overhead allocations and capital, and exclude depreciation.

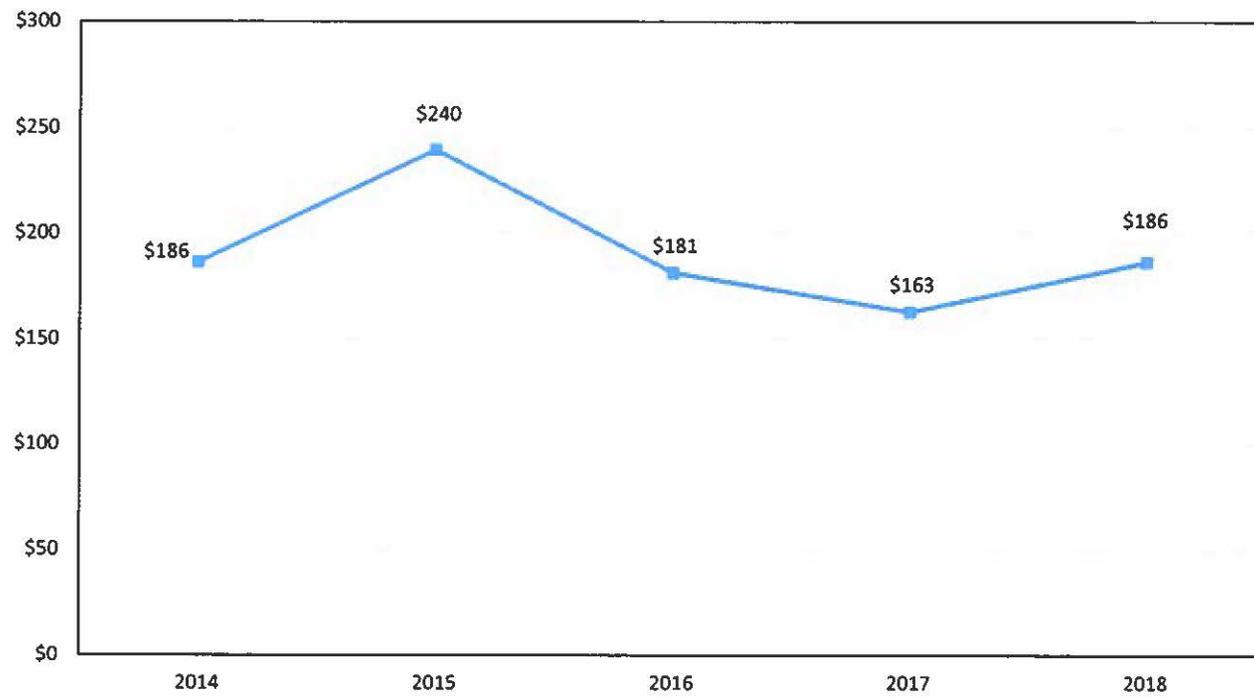


* Net Margin includes overhead allocations and capital, and excludes depreciation.



* 2018 data reflects fiscal year-to-date September expenses.

Total Clinic Revenue per Visit



DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
November 28, 2018

1. Description: Licensed Independent Practitioner Credentialing and Privileging

2. Summary:

The agenda item represents the licensed independent practitioner(s) recommended for credentialing and privileging by the FQHC Medical Director.

3. Substantive Analysis:

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

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

Last Name	First Name	Degree	Specialty	Credentialing
Santana	Delvis	MD	Family Medicine	Initial Credentialing

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

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

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"/>

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
November 28, 2018

Reviewed for financial accuracy and compliance with purchasing procedure:

N/A

Dawn Richards
VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

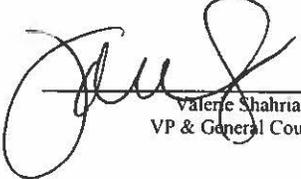
Committee Name

Date Approved

6. Recommendation:

Staff recommends the Board approve the initial credentialing and privileging for Dr. Delvis Santana, Family Medicine.

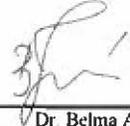
Approved for Legal sufficiency:



Valerie Shahrian
VP & General Counsel

Sarah Gonzalez

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



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

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
November 28, 2018

1. Description: Executive Director Informational Update

2. Summary:

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

- Lakeside Medical Center Clinic (Belle Glade)
- Farris Foundation
- John Rosetti Center of Excellence Award

3. Substantive Analysis:

Lakeside Medical Center Clinic (Belle Glade)

On 11/12/2018, Chandler Construction began long lead-time construction such as mechanical, electrical, plumbing (MEP). Permits are expected after Thanksgiving.

Farris Foundation

On 11/8/2018, we received notification from Farris Foundation that we were honored award of \$200,000 (2 years). We submitted this grant request to support an LCSW position for our Mobile Clinic.

John Rosetti Center of Excellence Award

On behalf of dental team, Dr Tibby and Terry Megiveron officially accepted the award for patient access and outcomes on 11/13/2018 at the annual NNOHA conference in New Orleans.

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

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
November 28, 2018

5. Reviewed/Approved by Committee:

N/A	
_____	_____
Committee Name	Date Approved

6. Recommendation:

Staff recommends Board receive and file the Executive Director 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
 November 28, 2018

1. Description: Operations Reports – October 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

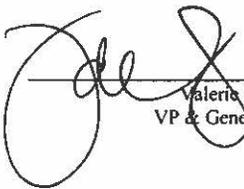
 Date Approved

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
November 28, 2018

6. **Recommendation:**

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

Approved for Legal sufficiency:



Valerie Shahriari
VP & General Counsel



Terry Megiveron
Director of Practice Operations

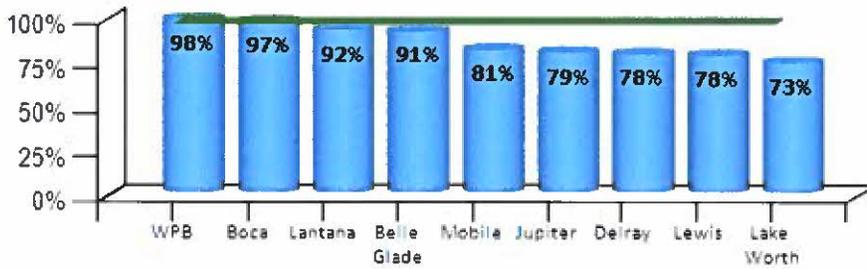


Dr. Belma Andric
Chief Medical Officer, VP & Executive Director
of Clinic Services

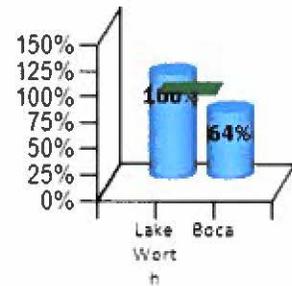
ALL CLINICS PRODUCTIVITY OCTOBER 2018

	Target	Total seen	% Monthly Target
PEDIATRIC CARE	2161	1738	80%
ADULT CARE	7807	6683	86%
MENTAL HEALTH	1362	1186	87%
SUBSTANCE ABUSE	308	361	117%
WOMEN'S HEALTH CARE	711	580	82%
DENTAL	2529	2114	84%
DENTAL HYGIENE	676	539	80%

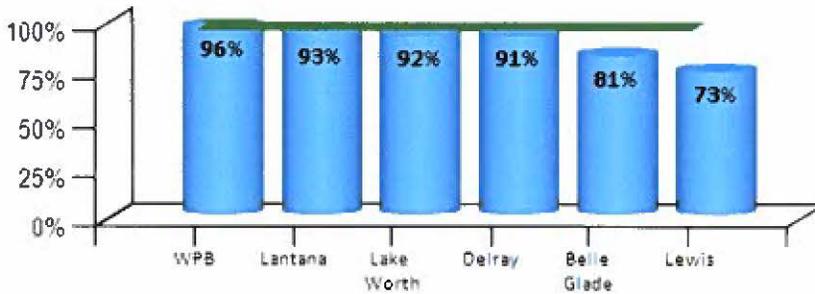
Adult care



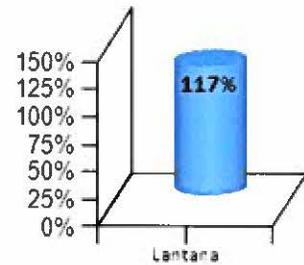
Women's Health



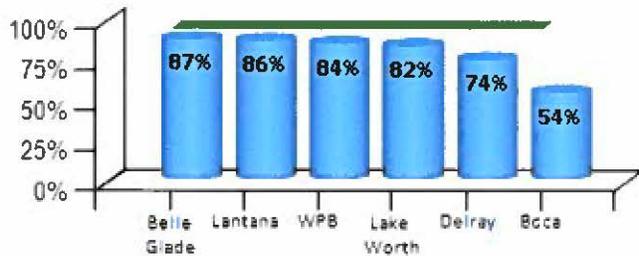
Mental Health



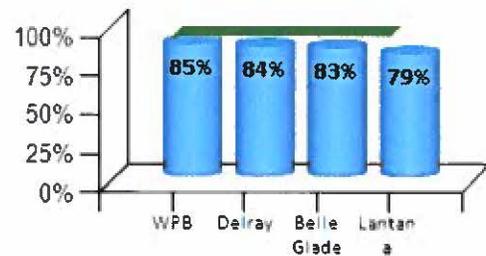
Substance Abuse



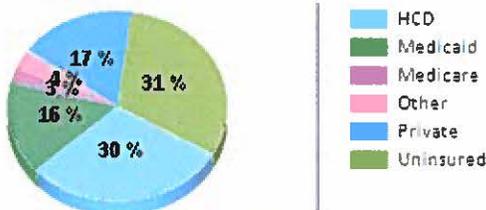
Pediatric Care



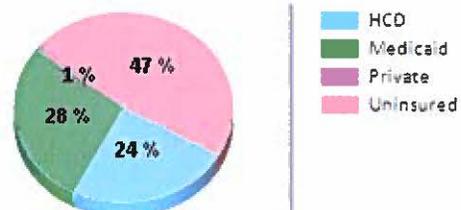
Dental & Dental Hygiene



Medical Payer Mix YTD



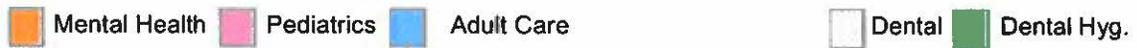
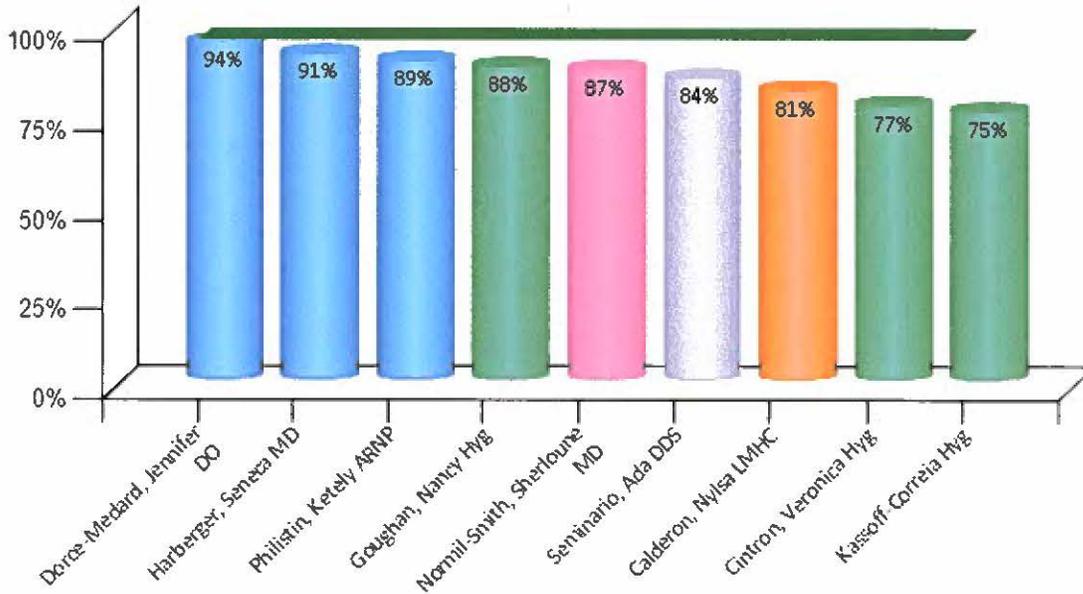
Dental Payer Mix YTD



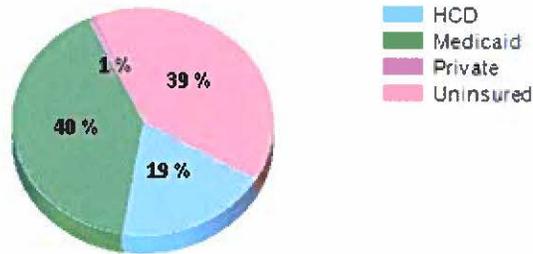
BELLE GLADE CLINIC TOTALS FOR OCTOBER 2018

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Dorce-Medard, Jennifer DO	18	14.5	261	246	94%	17.0
Harberger, Seneca MD	18	23.5	423	385	91%	16.4
Philistin, Ketely ARNP	16	22.5	360	321	89%	14.3
BELLE GLADE ADULT CARE TOTALS		60.5	1044	952	91%	
PEDIATRIC CARE						
Normil-Smith, Sherloune MD	18	5.0	90	78	87%	15.6
BELLE GLADE PEDIATRIC CARE TOTALS		5.0	90	78	87%	
MENTAL HEALTH						
Calderon, Nylsa LMHC	7	3.0	21	17	81%	5.7
BELLE GLADE MENTAL HEALTH TOTALS		3.0	21	17	81%	
DENTAL						
Seminario, Ada DDS	16	22.5	360	304	84%	13.5
BELLE GLADE DENTAL TOTALS		22.5	360	304	84%	
DENTAL HYGIENE						
Goughan, Nancy Hyg	8	1.0	8	7	88%	7.0
Cintron, Veronica Hyg	8	14.5	116	89	77%	6.1
Kassoff-Correia Hyg	8	1.0	8	6	75%	6.0
BELLE GLADE DENTAL HYGIENE TOTALS		16.5	132	102	77%	
BELLE GLADE TOTALS		107.5	1647	1453	88%	

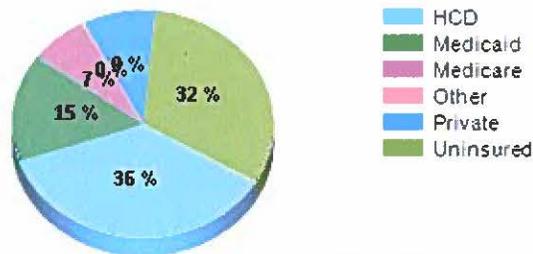
BELLE GLADE PROVIDER PRODUCTIVITY OCTOBER 2018



Dental Payer Mix YTD



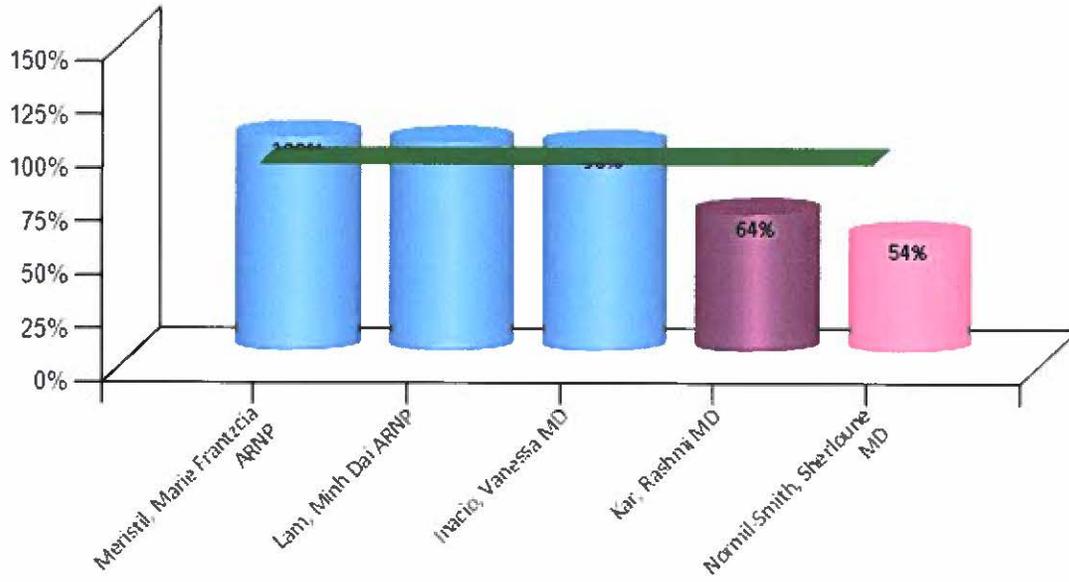
Medical Payer Mix YTD



BOCA CLINIC TOTALS FOR OCTOBER 2018

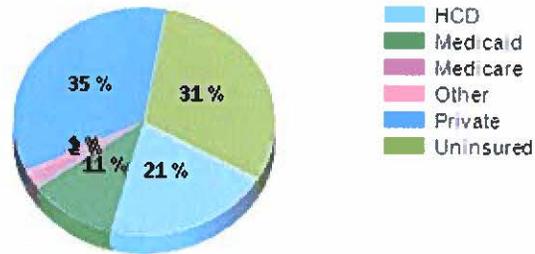
	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Meristil, Marie Frantzcia ARNP	16	1.0	16	16	100%	16.0
Lam, Minh Dai ARNP	16	20.5	328	320	98%	15.6
Inacio, Vanessa MD	18	20.5	369	354	96%	17.3
BOCA ADULT CARE TOTALS		42.0	713	690	97%	
PEDIATRIC CARE						
Normil-Smith, Sherlounne MD	18	8.5	153	82	54%	9.6
BOCA PEDIATRIC CARE TOTALS		8.5	153	82	54%	
WOMEN'S HEALTH CARE						
Kar, Rashmi MD	18	20.5	369	237	64%	11.6
BOCA WOMEN'S HEALTH CARE TOTALS		20.5	369	237	64%	
BOCA TOTALS		71.0	1235	1009	82%	

BOCA PROVIDER PRODUCTIVITY OCTOBER 2018

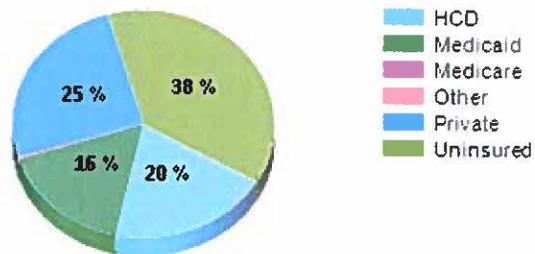


■ Pediatrics
 ■ Adult Care
 ■ Women's Health

Medical Payer Mix YTD



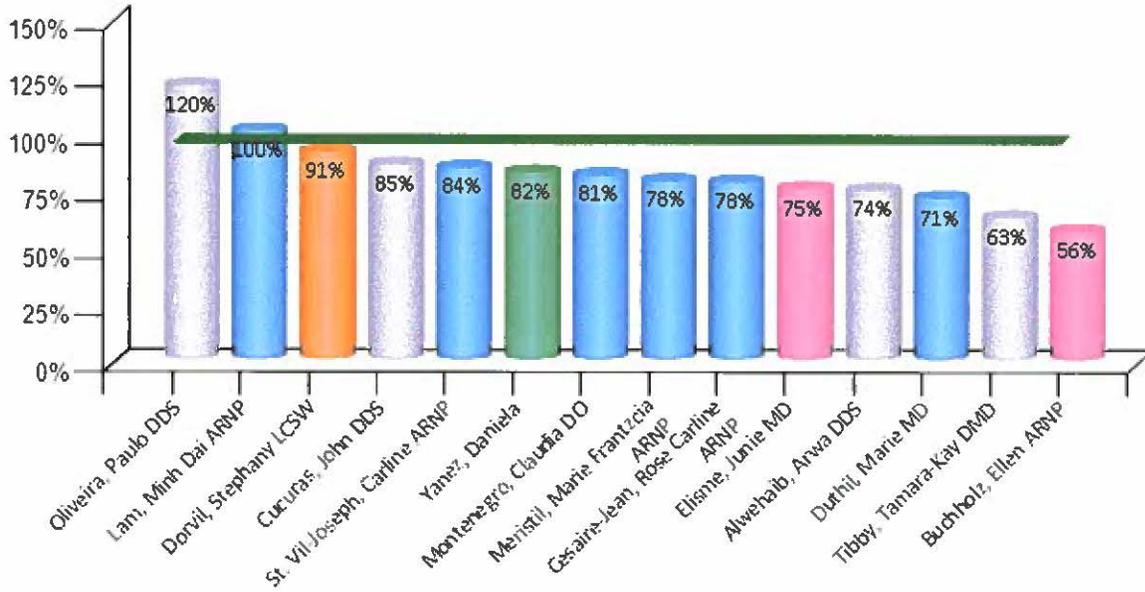
WOMEN'S HEALTH CARE Payer Mix YTD



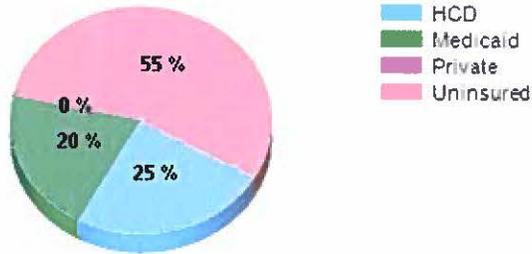
DELRAY BEACH CLINIC TOTALS FOR OCTOBER 2018

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Lam, Minh Dai ARNP	16	0.5	8	8	100%	16.0
St. Vil-Joseph, Carline ARNP	16	22.5	360	302	84%	13.4
Montenegro, Claudia DO	18	17.5	315	254	81%	14.5
Meristil, Marie Frantzcia ARNP	16	2.0	32	25	78%	12.5
Cesaire-Jean, Rose Carline ARNP	16	22.5	360	279	78%	12.4
Duthil, Marie MD	18	18.0	324	229	71%	12.7
DELRAY BEACH ADULT CARE TOTALS		83.0	1399	1097	78%	
PEDIATRIC CARE						
Elisme, Junie MD	18	18.5	333	249	75%	13.5
Buchholz, Ellen ARNP	16	1.0	16	9	56%	9.0
DELRAY BEACH PEDIATRIC CARE TOTALS		19.5	349	258	74%	
MENTAL HEALTH						
Dorvil, Stephany LCSW	7	21.5	151	137	91%	6.4
DELRAY BEACH MENTAL HEALTH TOTALS		21.5	151	137	91%	
DENTAL						
Oliveira, Paulo DDS	8	12.5	100	120	120%	9.6
Cucuras, John DDS	8	20.5	164	140	85%	6.8
Alwehaib, Arwa DDS	16	22.5	360	267	74%	11.9
Tibby, Tamara-Kay DMD	16	0.5	8	5	63%	10.0
DELRAY BEACH DENTAL TOTALS		56.0	632	532	84%	
DENTAL HYGIENE						
Yanez, Daniela	8	22.0	176	144	82%	6.5
DELRAY BEACH DENTAL HYGIENE TOTALS		22.0	176	144	82%	
DELRAY BEACH TOTALS		202.0	2707	2168	80%	

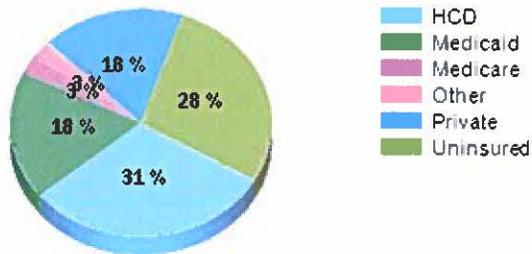
DELRAY BEACH PROVIDER PRODUCTIVITY OCTOBER 2018



Dental Payer Mix YTD



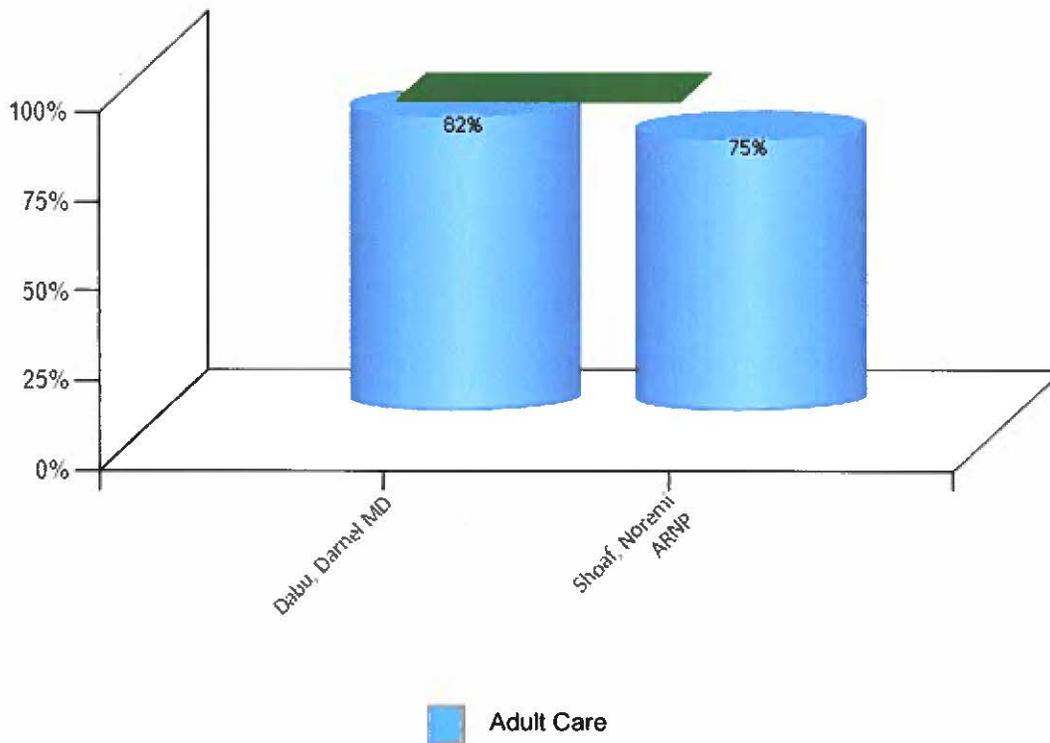
Medical Payer Mix YTD



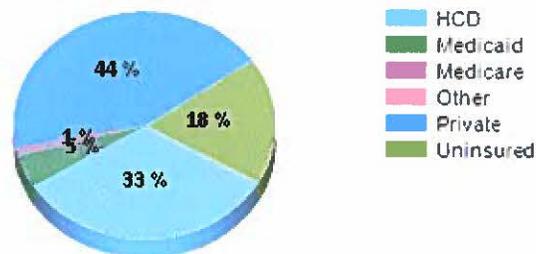
JUPITER CLINIC TOTALS FOR OCTOBER 2018

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Dabu, Darnel MD	18	17.5	315	258	82%	14.7
Shoaf, Noremi ARNP	16	13.5	216	163	75%	12.1
JUPITER ADULT CARE TOTALS		31.0	531	421	79%	
JUPITER TOTALS		31.0	531	421	79%	

JUPITER PROVIDER PRODUCTIVITY OCTOBER 2018



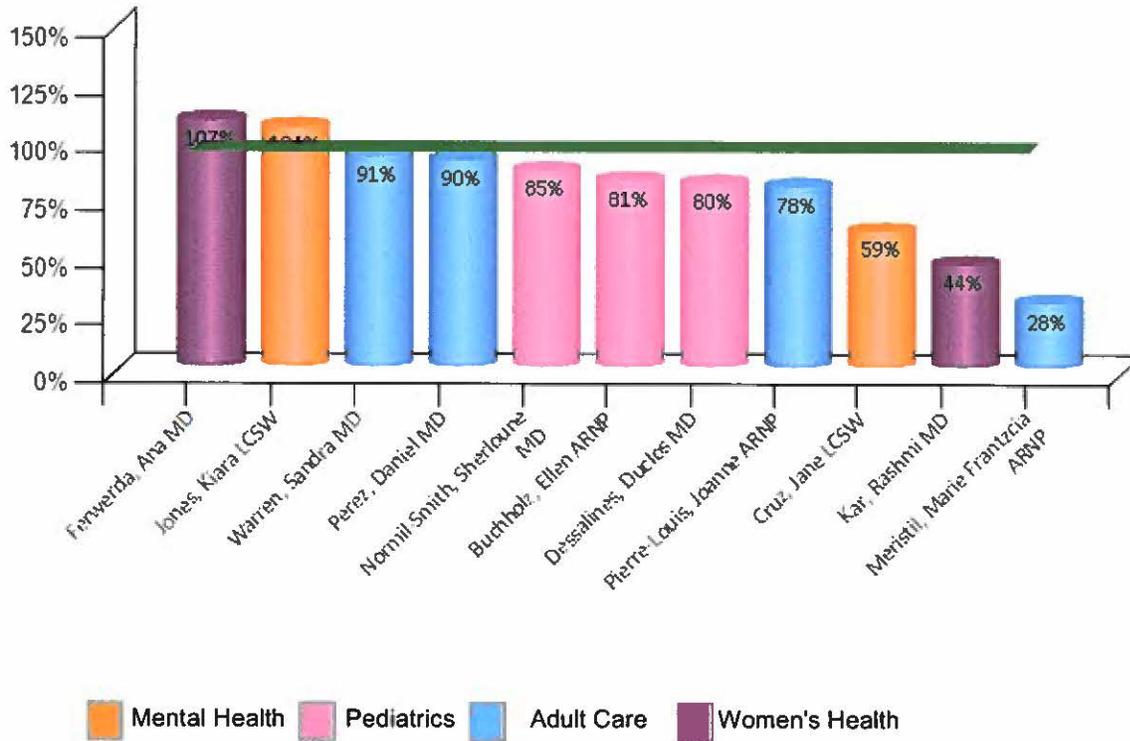
Medical Payer Mix YTD



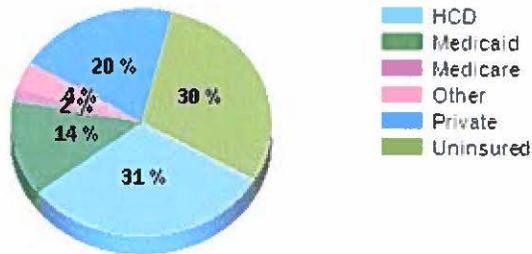
LAKE WORTH CLINIC TOTALS FOR OCTOBER 2018

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Warren, Sandra MD	18	20.0	360	329	91%	16.5
Perez, Daniel MD	18	22.0	396	355	90%	16.1
Pierre-Louis, Joanne ARNP	16	17.0	272	213	78%	12.5
Meristil, Marie Frantzcia ARNP	16	19.5	312	87	28%	4.5
LAKE WORTH ADULT CARE TOTALS		78.5	1340	984	73%	
PEDIATRIC CARE						
Normil-Smith, Sherloune MD	18	7.5	135	115	85%	15.3
Buchholz, Ellen ARNP	16	9.5	152	123	81%	12.9
Dessalines, Duclos MD	18	3.0	54	43	80%	14.3
LAKE WORTH PEDIATRIC CARE TOTALS		20.0	341	281	82%	
WOMEN'S HEALTH CARE						
Ferwerda, Ana MD	18	17.0	306	327	107%	19.2
Kar, Rashmi MD	18	2.0	36	16	44%	8.0
LAKE WORTH WOMEN'S HEALTH CARE TOTALS		19.0	342	343	100%	
MENTAL HEALTH						
Jones, Kiara LCSW	7	19.5	137	142	104%	7.3
Cruz, Jane LCSW	7	7.5	53	31	59%	4.1
LAKE WORTH MENTAL HEALTH TOTALS		27.0	189	173	92%	
LAKE WORTH TOTALS		144.5	2212	1781	81%	

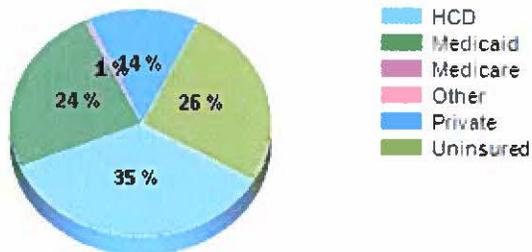
LAKE WORTH PROVIDER PRODUCTIVITY OCTOBER 2018



Medical Payer Mix YTD



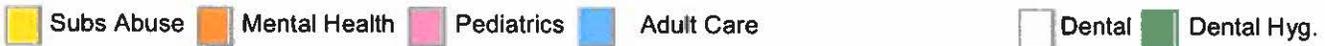
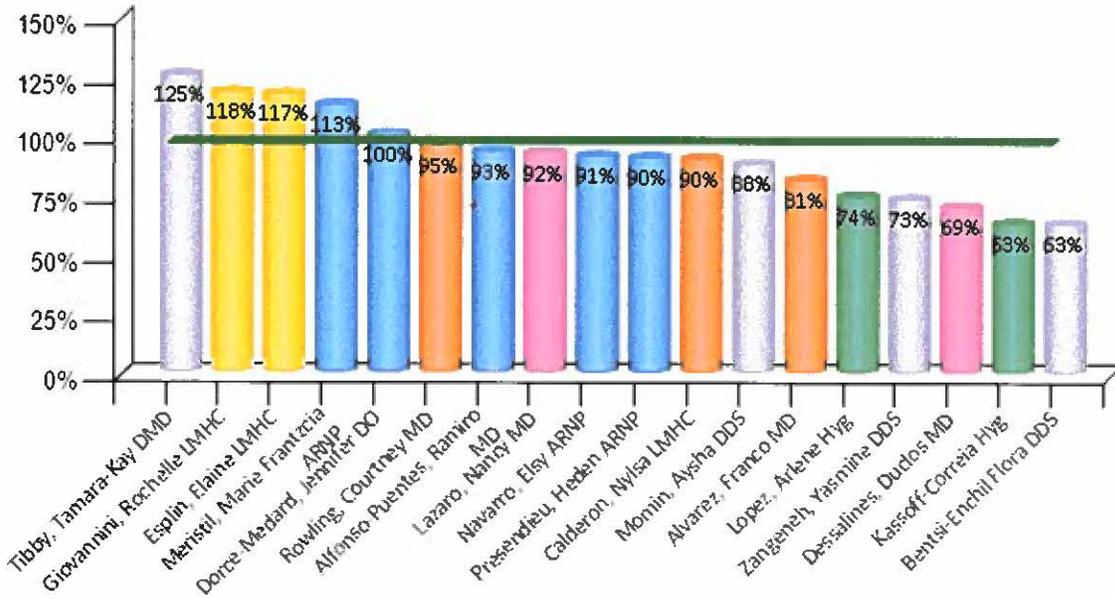
WOMEN'S HEALTH CARE Payer Mix YTD



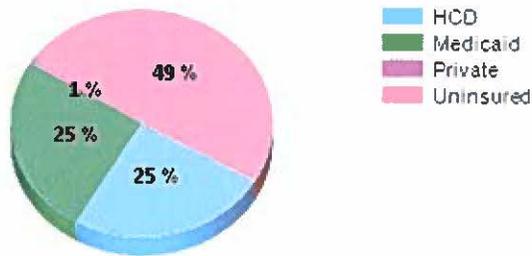
LANTANA CLINIC TOTALS FOR OCTOBER 2018

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Meristil, Marie Frantzcia ARNP	16	0.5	8	9	113%	18.0
Dorce-Medard, Jennifer DO	12	3.0	36	36	100%	12.0
Alfonso-Puentes, Ramiro MD	18	22.5	405	376	93%	16.7
Navarro, Elsy ARNP	16	21.0	336	305	91%	14.5
Presendieu, Heden ARNP	16	17.0	272	245	90%	14.4
LANTANA ADULT CARE TOTALS		64.0	1057	971	92%	
PEDIATRIC CARE						
Lazaro, Nancy MD	18	20.5	369	340	92%	16.6
Dessalines, Duclos MD	18	8.0	144	100	69%	12.5
LANTANA PEDIATRIC CARE TOTALS		28.5	513	440	86%	
MENTAL HEALTH						
Rowling, Courtney MD	18	19.5	351	334	95%	17.1
Calderon, Nylsa LMHC	7	14.5	102	91	90%	6.3
Alvarez, Franco MD	13	4.0	52	42	81%	10.5
LANTANA MENTAL HEALTH TOTALS		38.0	505	467	93%	
SUBSTANCE ABUSE						
Giovannini, Rochelle LMHC	7	21.5	151	177	118%	8.2
Esplin, Elaine LMHC	7	22.5	158	184	117%	8.2
LANTANA SUBSTANCE ABUSE TOTALS		44.0	308	361	117%	
DENTAL						
Tibby, Tamara-Kay DMD	16	1.0	16	20	125%	20.0
Momin, Aysha DDS	16	21.0	336	294	88%	14.0
Zangeneh, Yasmine DDS	13	15.0	195	142	73%	9.5
Bentsi-Enchil Flora DDS	16	6.5	104	65	63%	10.0
LANTANA DENTAL TOTALS		43.5	651	521	80%	
DENTAL HYGIENE						
Lopez, Arlene Hyg	8	21.5	172	127	74%	5.9
Kassoff-Correia Hyg	8	1.0	8	5	63%	5.0
LANTANA DENTAL HYGIENE TOTALS		22.5	180	132	73%	
LANTANA TOTALS		240.5	3214	2892	90%	

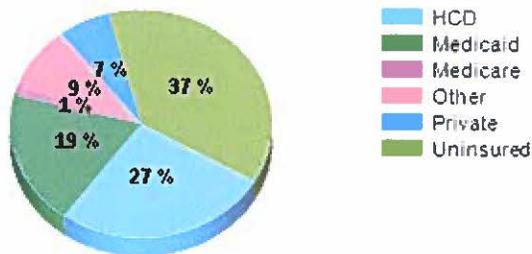
LANTANA PROVIDER PRODUCTIVITY OCTOBER 2018



Dental Payer Mix YTD



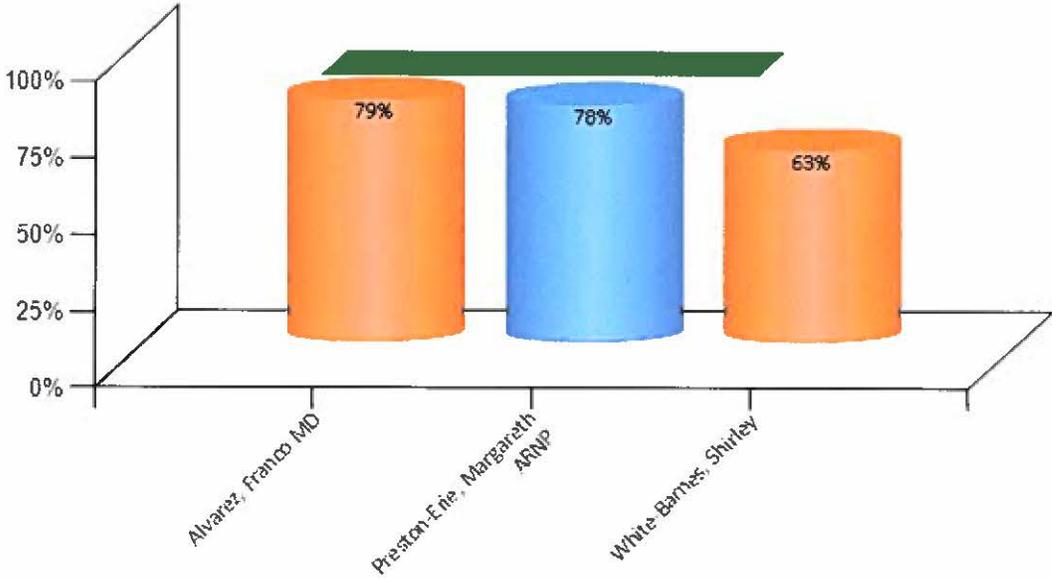
Medical Payer Mix YTD



LEWIS CENTER CLINIC TOTALS FOR OCTOBER 2018

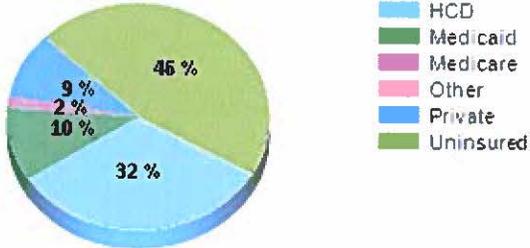
	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Preston-Erie, Margareth ARNP	16	21.5	344	267	78%	12.4
LEWIS CENTER ADULT CARE TOTALS		21.5	344	267	78%	
MENTAL HEALTH						
Alvarez, Franco MD	13	17.5	228	180	79%	10.3
White-Barnes, Shirley	7	20.0	140	88	63%	4.4
LEWIS CENTER MENTAL HEALTH TOTALS		37.5	368	268	73%	
LEWIS CENTER TOTALS		59.0	712	535	75%	

LEWIS CENTER PROVIDER PRODUCTIVITY OCTOBER 2018



Mental Health
 Adult Care

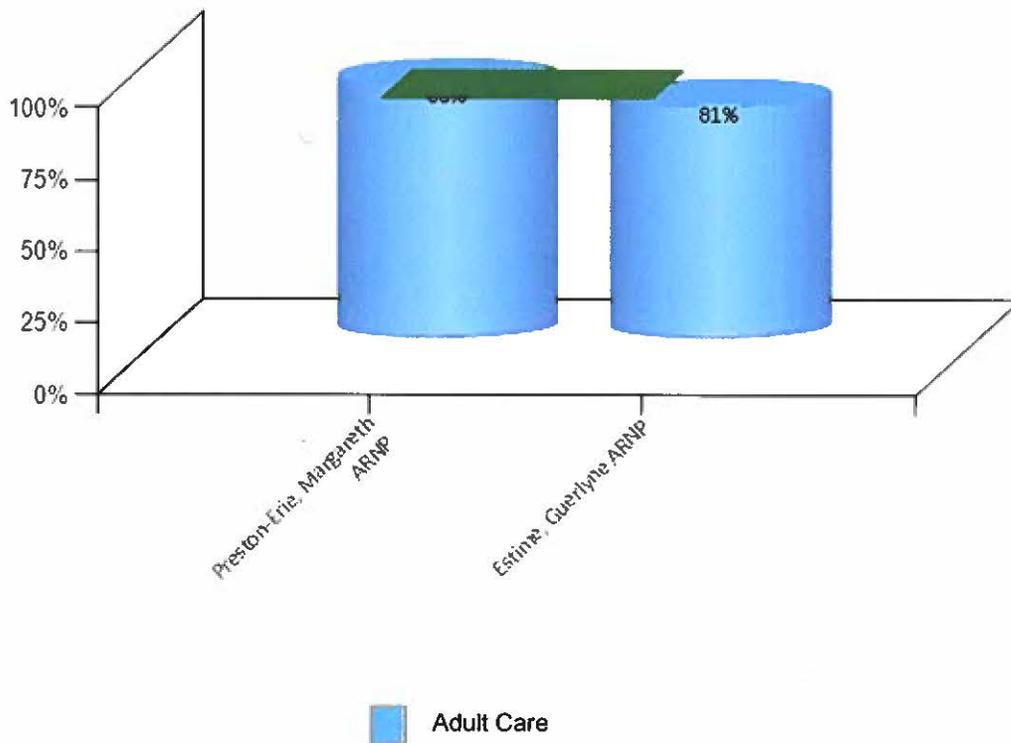
Medical Payer Mix YTD



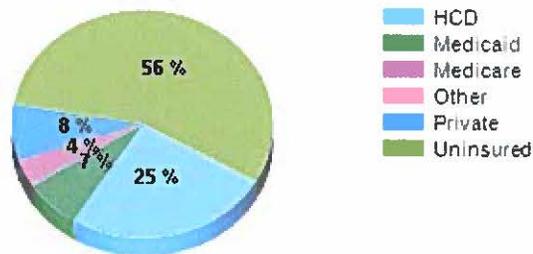
MOBILE CLINIC TOTALS FOR OCTOBER 2018

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Preston-Erie, Margareth ARNP	16	0.5	8	7	88%	14.0
Estime, Guerlyne ARNP	16	18.0	288	232	81%	12.9
MOBILE CLINIC ADULT CARE TOTALS		18.5	296	239	81%	
MOBILE CLINIC TOTALS			18.5	296	81%	

MOBILE CLINIC PROVIDER PRODUCTIVITY OCTOBER 2018



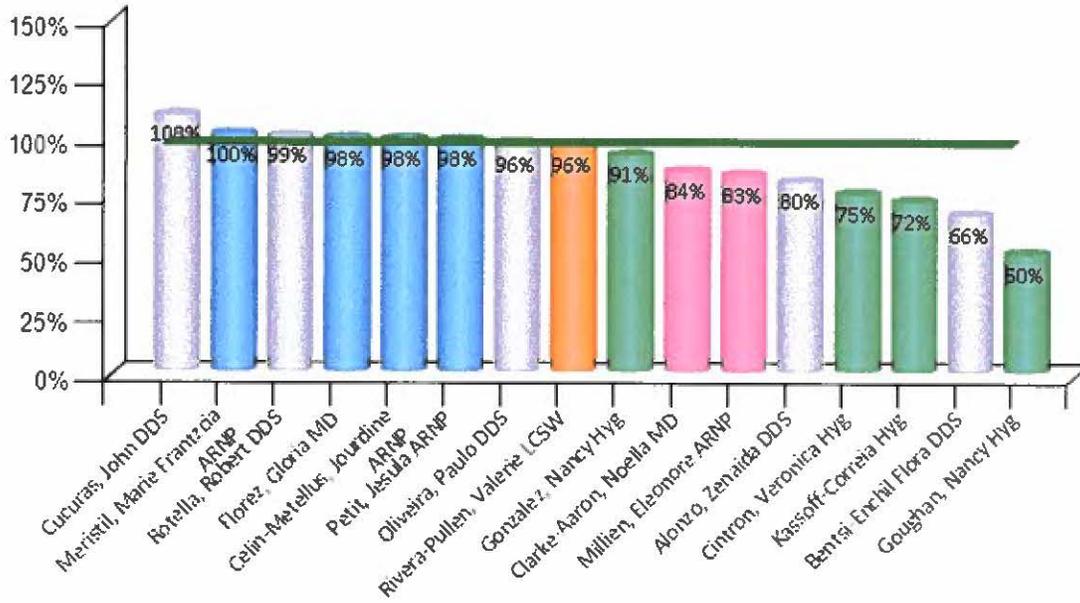
Medical Payer Mix YTD



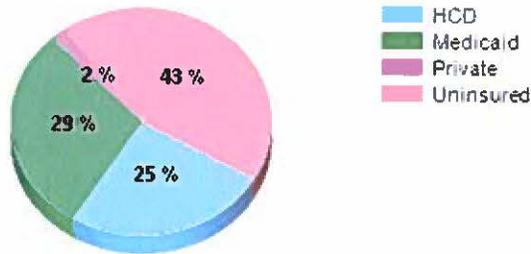
WEST PALM BEACH CLINIC TOTALS FOR OCTOBER 2018

	Daily Target	Days Worked	Target for the month	Total for month seen	% Monthly Target Achieved	Daily Average
ADULT CARE						
Meristil, Marie Frantzcia ARNP	16	0.5	8	8	100%	16.0
Florez, Gloria MD	18	21.5	387	381	98%	17.7
Celin-Metellus, Jourdine ARNP	16	21.5	344	337	98%	15.7
Petit, Jesula ARNP	16	21.5	344	336	98%	15.6
WEST PALM BEACH ADULT CARE TOTALS		65.0	1083	1062	98%	
PEDIATRIC CARE						
Clarke-Aaron, Noella MD	18	21.5	387	327	84%	15.2
Millien, Eleonore ARNP	16	20.5	328	272	83%	13.3
WEST PALM BEACH PEDIATRIC CARE TOTALS		42.0	715	599	84%	
MENTAL HEALTH						
Rivera-Pullen, Valerie LCSW	7	18.5	130	124	96%	6.7
WEST PALM BEACH MENTAL HEALTH TOTALS		18.5	130	124	96%	
DENTAL						
Cucuras, John DDS	8	1.5	12	13	108%	8.7
Rotella, Robert DDS	13	22.0	286	284	99%	12.9
Oliveira, Paulo DDS	8	9.5	76	73	96%	7.7
Alonzo, Zenaida DDS	16	21.0	336	270	80%	12.9
Bentsi-Enchil Flora DDS	16	11.0	176	117	66%	10.6
WEST PALM BEACH DENTAL TOTALS		65.0	886	757	85%	
DENTAL HYGIENE						
Gonzalez, Nancy Hyg	8	17.5	140	128	91%	7.3
Cintron, Veronica Hyg	8	1.0	8	6	75%	6.0
Kassoff-Correia Hyg	8	4.0	32	23	72%	5.8
Goughan, Nancy Hyg	8	1.0	8	4	50%	4.0
WEST PALM BEACH DENTAL HYGIENE TOTALS		23.5	188	161	86%	
WEST PALM BEACH TOTALS		214.0	3002	2703	90%	

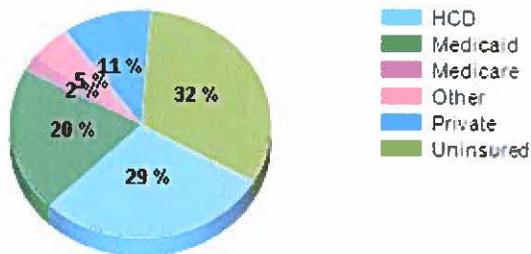
WEST PALM BEACH PROVIDER PRODUCTIVITY OCTOBER 2018



Dental Payer Mix YTD



Medical Payer Mix YTD



DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
November 28, 2018

1. Description: Quality Council Reports – October 2018

2. Summary:

This agenda item provides the following:

- Quality Council Minutes
- UDS Report – YTD October 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
November 28, 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: November 9, 2018

Time: 1:10pm – 2:30 pm

Attendees: Dr. Belma Andric – Chief Medical Officer/Executive Director, Dr. Noelle Stewart – FQHC Medical Director (via WebEx), Dr. Duclos Dessalines – Director of Pediatrics, Dr. Tamara-Kay Tibby - Dental Director, David Speciale – Quality Manager, Dr. Ana Ferwerda – FQHC Director of Women’s Health, Dr. Courtney Rowling - Director of Behavioral Health, Lisa Hogans - Corporate Quality Manager, 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 Director (via WebEx), Victoria Pruitt (via WebEx)

Excused: Nancy Fox-Goughan, Dental Quality Coordinator, Terry Megiveron - Director of Practice Operations, Maria Chamberlin – Nurse Manager, Jane Cruz - Director of Social Services

Minutes by: Alena Ranucci / David Speciale

<u>TOPIC</u>	<u>DISCUSSION / RECOMMENDATIONS</u>	<u>ACTION ITEMS (AI)</u>	<u>RESPONSIBLE PARTY</u>	<u>DATE</u>
QUALITY				
48-Hour Metrics	<p>Medical:</p> <ul style="list-style-type: none"> • Open Documents, & lab Results - Awaiting report • Encounters Closed Rate – The Goal for closing encounters is the last day of the month so Finance can have billing uploaded by the 5th of each month and Administration can complete the productivity report by the 7th of each month. There were 2 pediatric providers, 1 BH provider, 2 resident providers of the 48 metrics for closing encounters in September. • Athena Bucket Review - Lake Worth buckets have improved but still contain old documents. Updated the practice roles table detailing parties that are responsible for monitoring daily. Medical records department continues to get inappropriate documents and issue log reviewed 	<p>Report Open Encounter data by Department</p> <p>IT to follow up with Athena on Task Assignment Overrides that are not routing properly.</p> <p>Add nursing open encounters / 48-hour metrics</p>	<p>Medical Director</p> <p>Medical Director & IT Department</p> <p>Nurse Manager</p>	<p>12/14/2018</p> <p>ASAP</p> <p>12/14/2018</p>

TOPIC	DISCUSSION / RECOMMENDATIONS	ACTION ITEMS (AI)	RESPONSIBLE PARTY	DATE
UDS & Quality Metrics	<p>Dental:</p> <ul style="list-style-type: none"> • Open Encounters (Unlocked Notes) - Total = 15 for October (Trending up - 9 from September). Corrective Action – Dental provider Counseling, IT Department to add Dentrix to loaner laptops at Lakeside. Counseling provided to providers that did not reach the benchmark. • Imaging Reports - Dexis Image Bucket - Total = 1 for October (Trending down - 2 from September). Corrective Action – radiographs placed into correct chart & provider retraining. 	<p>Provider re-education to staff</p> <p>Train staff on vaccine documentation</p>	<p>Medical Director, Nurse Manager</p> <p>Medical Director, Nurse Manager</p>	<p>ASAP</p> <p>ASAP</p>
	<p>UDS Report - Dashboard January thru October (YTD) 2018. Of the 14 UDS Measures: 9 Exceeded the HRSA Goal, 2 met the goal, 1 and 3 were short of HRSA Goals. <i>(Clinic Score/ HRSA Goal)</i></p> <ul style="list-style-type: none"> • Childhood immunization: (44% / 70%) Vaccines need to be reconciled and historical vaccines documented. IT is working with FL shots to improve Interface and reporting capabilities. • Cervical Cancer Screening: (60% / 60%) • Weight assessment, Children & Adolescent: (87% / 60%) • Adult Weight screening and follow up: (93% / 60%) • Tobacco use screening & cessation: (95% / 90%) • Asthma Pharmacologic Therapy: (100% / 97%) • Coronary Artery Disease CAD: (93% / 75%) • Ischemic Vascular Disease (IVD): (85% / 75%) • Colorectal Cancer Screening: (59% / 60%) 			
	<p>Lack of data sharing has likely contributed to lower screening rates. Seeing data regularly motivated staff and offered healthy competition. Executive Director met with "Gastro Health" leadership to discuss opportunity to provide free Colonoscopies on Saturday in Boca Raton. Currently exploring "Azara" an interface with Athena that may pull positive FIT tests, abnormal PAP, etc.</p>	<p>Automate FIT test report. Place POD on fee schedule and train staff. Contract with Gastro Health to provide free colonoscopies.</p>	<p>Medical Director, Nurse Manager</p>	<p>12/13/2018</p>

<u>TOPIC</u>	<u>DISCUSSION / RECOMMENDATIONS</u>	<u>ACTION ITEMS (AI)</u>	<u>RESPONSIBLE PARTY</u>	<u>DATE</u>
	<ul style="list-style-type: none"> • HIV linkage: (100% / 100%) • Depression screening: (90% / 80%) • Dental Sealant: (84% / 70%) • Hypertension: (69% / 65%) • Diabetes: (62% / 65%) <p>Scores on this measure have dropped significantly compared to last year. Need to QA the data on Allscripts and Athena to ensure data accuracy, determine reasons for decrease, and provide corrective actions to increase the measure.</p> <p>Medical</p> <ul style="list-style-type: none"> • HPV – develop month reporting to go to patient access to call patients back in to receive there dose. • Determine the best definition for tracking HPV. Work with Jennifer of ACS. • Schedule regular reports to provide to patient access for scheduling of patient due/overdue for final vaccine. <p>Dental</p> <ul style="list-style-type: none"> • UDS - Dental Sealants – 84% • Complication Rates – YTD = 2% (23/1455) <p>Behavioral Health</p> <ul style="list-style-type: none"> • MAT Program Census – October 2018 = 98 • New Patient Intakes in October 2018 = 11 • Treatment Phase for Current Census – October 2018 <ul style="list-style-type: none"> - Phase 1 - 55 - Phase 2 – 25 - Phase 3 – 8 - Phase 4 – 4 	<p>Explore AZARA interface</p> <p>Schedule meeting to review diabetes data in Allscripts & Athena.</p> <p>Update the HPV report to reflect whether patient is up to date or overdue based on age & category</p> <p>Review and finalize HPV Refusal Form</p> <p>Begin tracking Re-admits to the MAT Program</p>	<p>Corporate Quality Director</p> <p>Medical Director, Clinical Infomaticist, Quality Manager</p> <p>Clinical Infomaticist, Corporate Quality Manager, Medical Director.</p> <p>Pediatric Director</p> <p>Behavioral Health Director, Quality Manager</p>	<p>ASAP</p> <p>12/13/2018</p> <p>12/13/2018</p> <p>ASAP</p> <p>ASAP</p>

TOPIC	DISCUSSION / RECOMMENDATIONS	ACTION ITEMS (AI)	RESPONSIBLE PARTY	DATE
Grant Updates	<ul style="list-style-type: none"> - Naltrexone Patients – 1 - Vivitrol Patients - 5 			
	<p><u>Women’s Health UDS & Quality Metrics</u></p> <ul style="list-style-type: none"> • UDS – Low Birthweight, 1st Trimester entering into care • Quality Metrics – plan to report for December: <ul style="list-style-type: none"> - Primary Caesarian Rate – Patient having 1st baby who have a C-section instead of a vaginal delivery - Smoking Rate / Smoking Cessation Rate – in pregnant patients - Infant feeding method: Breast / Bottle / Both 	Review the definition that Athena uses for Deliveries	Clinical Infomaticist	12/13/2018
	<p><u>Human Resources</u> – Turnover/New Hire/WC - October</p> <ul style="list-style-type: none"> • New hires = 1 • Termination = 2 • Workers Comp = 2 <p>HR continues to monitor the occurrences. Risk Team reviews all occurrences and provides corrective actions to prevent reoccurrences.</p>	Revise HR reporting to specify between voluntary and involuntary terminations.	Quality Manager	12/13/2018
	<p><u>American Cancer Society</u> - Tobacco cessation reports pending from community partners. Ordered cancer screening and prevention banners through communications</p>	Obtain monthly report from Quitline and AHEC	Quality Manager	12/13/2018
	<p><u>QI Grant</u> – Funding to support PCMH-certified electronic surveys through Pre Ganey.</p>	Provide details of future expenses for budget	Corporate Quality Manager	12/13/2018
	<p><u>Farris Foundation</u> - Will be receiving \$200,000 (100,000 per year for over the course of 2 years to support the hiring of an LCSW for the mobile clinic.</p>	Provide follow up education to providers on Peer review	Medical Director	12/13/2018

<u>TOPIC</u>	<u>DISCUSSION / RECOMMENDATIONS</u>	<u>ACTION ITEMS (AI)</u>	<u>RESPONSIBLE PARTY</u>	<u>DATE</u>
Chart Review	<p>Medical - Morbidity & Mortality Review - working on abnormal PAP procedure. Executive leadership met with Borinquen Health Care Center to exchange best practices.</p> <p>Dental – October Report</p> <ul style="list-style-type: none"> • Dental Quality Coordinator Dental Chart Reviews - October 2018 – 16 charts reviewed (one per provider). Findings: <ul style="list-style-type: none"> - Radiographs Errors On: Sensor Placement, Quality, Placement of X-Ray Beam - Documentation – 13 of 16 charts (81%) in compliance (trended ↑) Corrective Actions: <ul style="list-style-type: none"> - Radiographs - Dental Assistants- time and date stamping charts to identify areas (sensor placement, artifacts and placement of x-ray beam) - Documentation – staff retraining <p>Hospital Follow Up – October reports and Trends Over Time October -76 Transfers to Higher Level of Care supported by Provider Referrals. Of which</p> <ul style="list-style-type: none"> - 47% hospital records received - 55% attended a hospital follow up appointment - 29% had no hospital follow up appointment scheduled - 16% have a hospital follow up appointment scheduled <p>Some reduction in the number of referrals, however identified that some ARNPs are still not documenting that they discussed it with a provider. Some ER referrals may have been unnecessary</p>	<p>Meet with provider weekly to provide feedback.</p>	<p>Dental Director</p>	<p>12/13/2018</p>
	<p>Retrain ARNP to document that case was discussed with provider when sending to the ED.</p>	<p>Medical Director</p>	<p>ASAP</p>	
	<p>Start regular chart audits for transfer to higher level of care</p>	<p>Medical Director</p>	<p>12/13/2018</p>	
	<p>Review recommendations for referring to ED in</p>	<p>Medical Director</p>	<p>12/13/2018</p>	

TOPIC	DISCUSSION / RECOMMENDATIONS	ACTION ITEMS (AI)	RESPONSIBLE PARTY	DATE
<p>Quality Items</p>	<p><u>Dental</u> Quality Walkthrough Report – October 2018. Trends and recommendations for improvement included:</p> <p>Infection Control</p> <ul style="list-style-type: none"> • Operatory Organization and Supplies <ul style="list-style-type: none"> - trended ↓ - corrective actions - remove clinic clutter, supplies on the floor and shipping boxes , staff retrained • Equipment Barriers <ul style="list-style-type: none"> - trended ↓ - missing Barriers on x-ray equipment - corrective actions - staff retrained • PPE <ul style="list-style-type: none"> - trended ↑ - improvements in use of face shields, goggles, masks. <p>Sterilization Room Maintenance & Operations</p> <ul style="list-style-type: none"> • Improvements – Removed clutter • Improvements - Biological Indicator spore testing. Streamlined logs and products with Women’s Health Staff training provided and continuing to monitor accuracy. 	<p>setting of hyperglycemia, hypertension, DVT suspect and anemia</p> <p>Will register for extension for community healthcare outcomes (echo) and attend for PNs</p>	<p>Medical Director, Clinical Quality Manager</p>	<p>12/13/2018</p>

TOPIC	DISCUSSION / RECOMMENDATIONS	ACTION ITEMS (AI)	RESPONSIBLE PARTY	DATE
	<p>Instadose – October 2018</p> <ul style="list-style-type: none"> • Wearing – 100% (trended ↑) • Reporting – 93% (trended ↓) • Guest Wearing – 100% (trended ↑) • Guest Reporting – 100% (=) <p>Medical - Quality QSV Report – October 2018</p> <p>BY CLINIC</p> <ul style="list-style-type: none"> • Jupiter Clinic – 95% • WPB Medical – 94% • Lantana Medical – Adult – 94% • Boca Raton – Medical – 91% • Lewis Center – 91% • Delray Medical – 91% • Lake Worth Medical – 87% • Belle Glade Medical – 86% • Mobile Clinic -84% • Lantana Medical - Pediatrics – 75% <p>BY CATEGORY</p> <ul style="list-style-type: none"> • Staff Knowledge – 99% • Clinic Flow – 90% • Clinic Pharmacy – 97% • Vaccines – 95% • Facilities – 95% • Office / Business Equipment – 94% • Binders – 93% • PHI – 90% 	<p>Ensure follow up items from walk-through are completed</p>	<p>Director of Operations, Quality Department</p>	<p>12/13/2018</p>

TOPIC	DISCUSSION / RECOMMENDATIONS	ACTION ITEMS (AI)	RESPONSIBLE PARTY	DATE
<p>Policy & Procedure</p>	<ul style="list-style-type: none"> • OSHA – 89% • Exam Rooms – 89% • Medical QI Logs – 87% • Labs – 87% • Infection Control- 83% • Compliance / Regulatory – 83% • Medical Equipment & Supplies – 82% • Safety & Security – 81% <p><u>Women’s Health – QSV Report</u> – October 2018</p> <ul style="list-style-type: none"> • Boca Raton – 95% • Lake Worth – 97% <p><u>Behavioral Health</u> - Reports in Process. Explore streamlining all Behavioral Health appointments to 30 minutes and limiting appointment types to “New Patient” and “Follow Up” appointment types.</p> <p><u>Dental</u> – No other report aside from Quality Site Visit.</p> <p><u>Policy & Procedure</u> Committee - met to review the following Policies and procedures: Patient Dismissal, Product-Equipment Recall, Tracking Hospital & ER Visits, After Hours, Peer Review, Telemedicine.</p> <p><u>Medical</u></p>	<p>Review Behavioral Health Appointment Types and evaluate need to streamline all to 30 minutes</p>	<p>Director of Operations, Behavioral Health Director</p>	<p>ASAP</p>

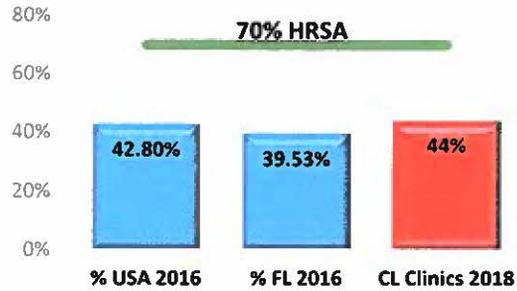
TOPIC	DISCUSSION / RECOMMENDATIONS	ACTION ITEMS (AI)	RESPONSIBLE PARTY	DATE
Director Updates	<ul style="list-style-type: none"> Hepatitis C Protocol Start a pharmacy work-group to discuss collaboration. Pursuing PCMH for remaining sites in Jupiter and Boca. Diabetes Care Plan Reviewed care plan. Will begin investigating the recommended activities for improvement. 			
UTILIZATION				
Productivity	October 2018 <ul style="list-style-type: none"> Medical provider productivity report presented Group therapy productivity report – in process RN Triage, RN Same Day appointment – in process 	Develop Productivity Reports for all Department	Clinical Infomaticist	ASAP
Cycle Time	Cycle Time Report in Process	Evaluate need for walk-in provider/ altering schedule templates.	Director of Operations	12/13/2018
No Shows	No-Show Goal for 2019 – 30% no show rate (Report in process) 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. 	Look at outcomes of no shows getting resolved (how many no shows are actually rescheduled and come in for visit).	Director of Operations	12/13/2018
3rd Next Available	<ul style="list-style-type: none"> Report in process 	Investigate and remove “triage provider” as a provider.	Director of Operations	ASAP
Walk-Ins	<ul style="list-style-type: none"> Report in process 			
PATIENT SATISFACTION				

<u>TOPIC</u>	<u>DISCUSSION / RECOMMENDATIONS</u>	<u>ACTION ITEMS (AI)</u>	<u>RESPONSIBLE PARTY</u>	<u>DATE</u>
Patient Relations	<p><u>Patient Relations –October 2018</u></p> <ul style="list-style-type: none"> • Complaints – Total of 10, of which: <ul style="list-style-type: none"> ▪ 1 – Care & Treatment (Medical: 889) ▪ 2 – Communication / Poor Communication (Medical: 885 / 889) ▪ 1 – Environment / Facility Appearance (Medical Peds: 871) ▪ 1 - Finance / Billing – Registration (Medical: 873) ▪ 4 – Other <ul style="list-style-type: none"> - 2 Medical (870 / 855) - 1 Dental (879) - 1 Behavioral Health (872) ▪ 1 – Pharmacy / Other (Medical: 871) • Grievances – Total of 6, of which <ul style="list-style-type: none"> ▪ 2 – Care & Treatment – Medical (871) ▪ 1 – Communication – Medical (879) ▪ 1 – Pharmacy – Medical (870) ▪ 1 – Physician – Medical (889) ▪ 1 – Other – Dental (879) • Compliments – Total of 27 across 10 locations, of which <ul style="list-style-type: none"> ▪ 20 – Medical <ul style="list-style-type: none"> - 6 = 870 - 2 = 871 - 7 = 872 - 2 = 884 - 1 = 885 - 2 = 889 			

<u>TOPIC</u>	<u>DISCUSSION / RECOMMENDATIONS</u>	<u>ACTION ITEMS (AI)</u>	<u>RESPONSIBLE PARTY</u>	<u>DATE</u>
	<ul style="list-style-type: none"> ▪ 5 – Dental <ul style="list-style-type: none"> - 1 = 879 - 3 = 880 - 1 = 881 ▪ 2 – MAT (890) <ul style="list-style-type: none"> • Trends over time for CY 2018 presented. 			
Meeting Adjourned – 2:35pm				

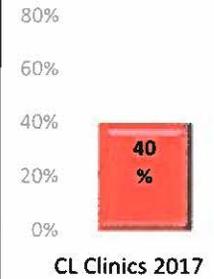
C. L. BRUMBACK PRIMARY CARE CLINICS
YTD OCTOBER 2018

CHILDHOOD IMMUNIZATION

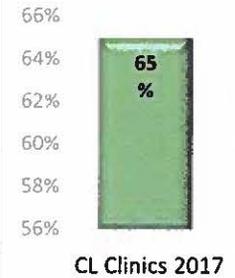
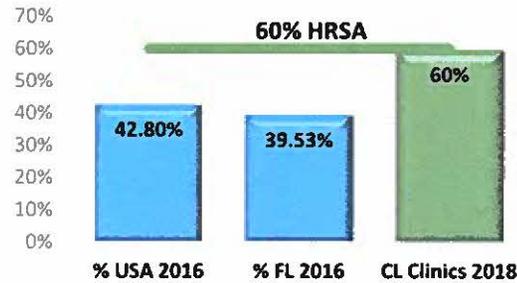


Findings: 1. Florida shots is still not crossing over.

Interventions: 1. IT is working with Florida Shots to get updates and improve interface. 2. Looking into Florida Shots reporting capability to pull data.



CERVICAL CANCER SCREENING



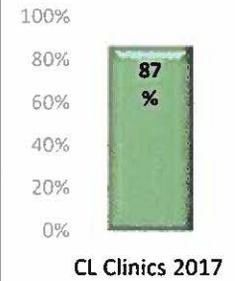
WEIGHT SCREENING AND COUNSELING FOR CHILDREN AND ADOLESCENTS



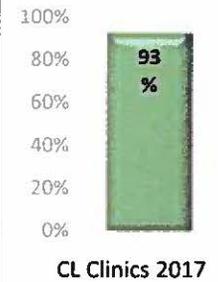
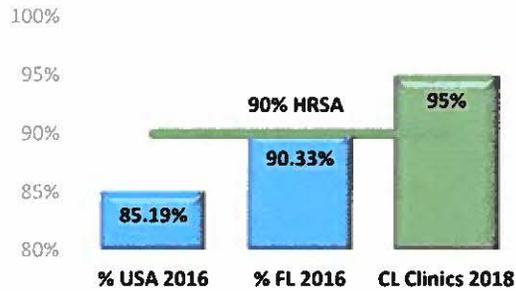
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YTD OCTOBER 2018

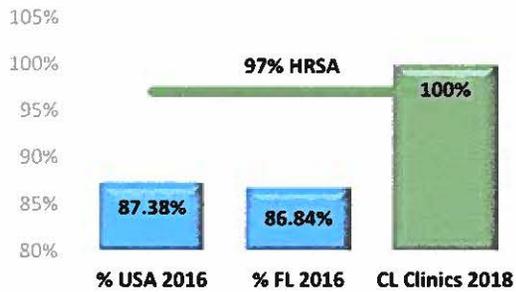
ADULT WEIGHT SCREENING AND FOLLOW UP



TOBACCO USE SCREENING AND CESSATION INTERVENTION

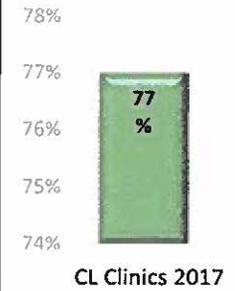
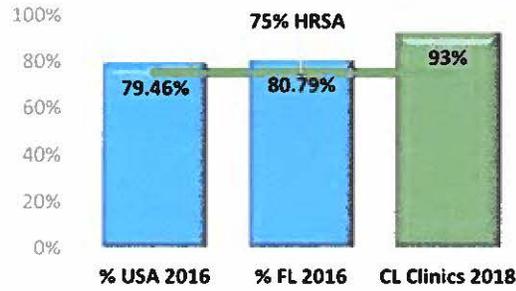


ASTHMA PHARMACOLOGIC THERAPY

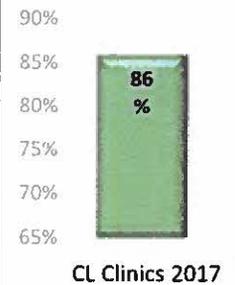
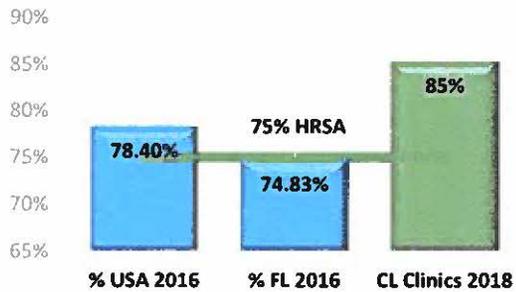


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YTD OCTOBER 2018

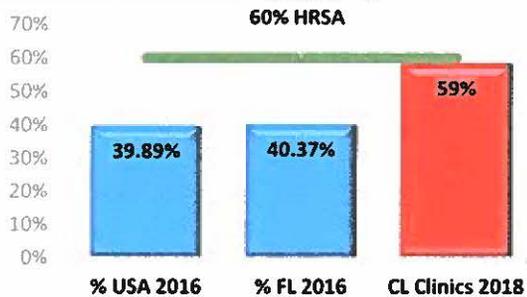
CORONARY ARTERY DISEASE (CAD): LIPID THERAPY



ISCHEMIC VASCULAR DISEASE (IVD): Antiplatelet Therapy

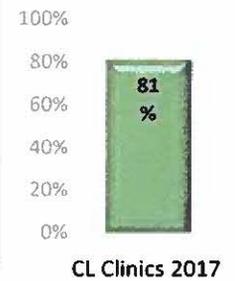


COLORECTAL CANCER SCREENING



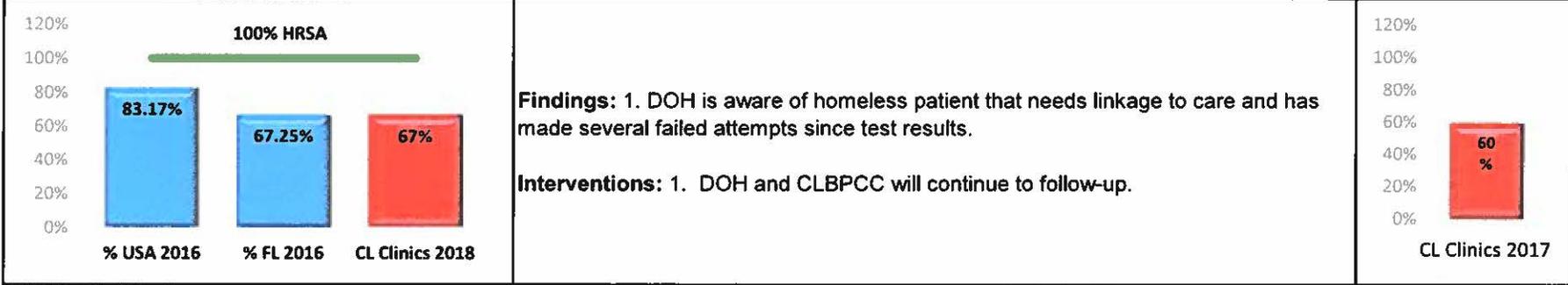
Findings: 1. Low specimen return rate. 2. Low rates for POD.

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. 3. Restart data sharing with all staff.

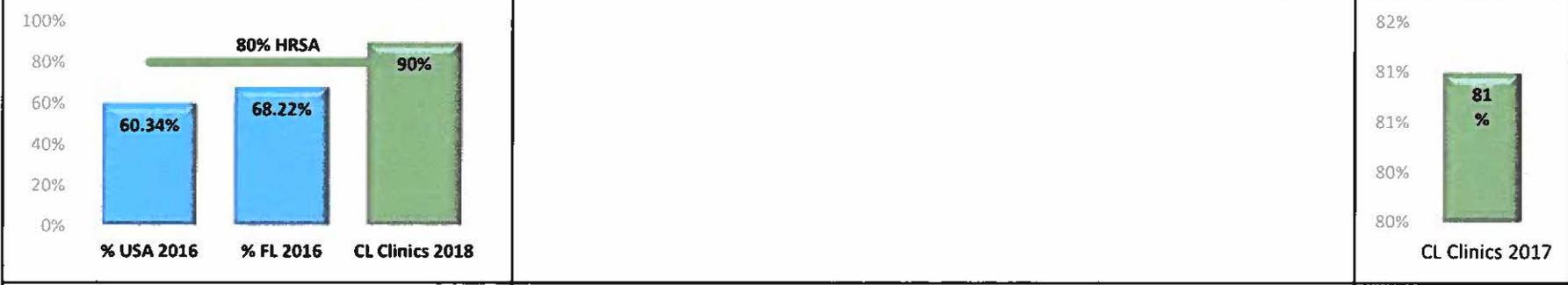


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YTD OCTOBER 2018

HIV LINKAGE TO CARE



PATIENTS SCREENED FOR DEPRESSION AND FOLLOW-UP

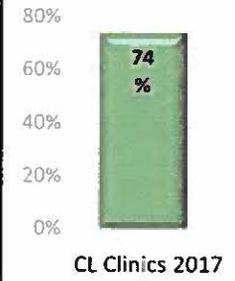
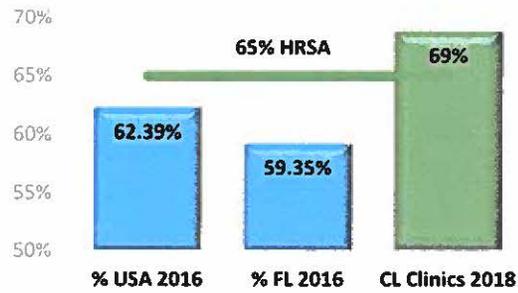


DENTAL SEALANTS



C. L. BRUMBACK PRIMARY CARE CLINICS
YTD OCTOBER 2018

HYPERTENSION

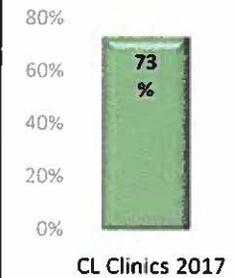


DIABETES



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. Begin implementing strategies outlined in Diabetes Plan.





C. L. Brumback

Primary Care Clinics

Health Care District Palm Beach County