

**District Clinic Holdings, Inc.  
d.b.a. C.L. Brumback Primary Care Clinics  
Board of Directors Meeting  
Summary Minutes  
4/24/2019**

**Present:** James Elder, Chairperson; Joseph Morel, Vice Chairperson; Mike Smith, Treasurer; John Casey Mullen, Secretary; Shanti Howard; Julia Bullard; Cory Neering.

**Excused:**

**Absent:** Irene Figueroa

**Staff:** Dr. Belma Andric, CMO, VP & Executive Director of Clinical Services; Valerie Shahriari, General Counsel; Mina Bayik, Director of Finance; Terry Megiveron, Director of Operations; Dr. Tamara-Kay Tibby, Dental Director; Dr. Noelle Stewart, Medical Director; Cindy Yarbrough, Chief Information Officer; Sarah Gonzalez, Director of Credentialing & Provider Services; Dr. Courtney Rowling, Director of Behavioral Health.

**Minutes Transcribed By:** Alena Rannucci

**Meeting Scheduled For:** 12:45pm

**Meeting Began at:** 12:54pm

<b>AGENDA ITEM</b>	<b>DISCUSSION</b>	<b>ACTION</b>
1. Call to Order	Mr. James Elder called the meeting to order.	The meeting was called to order.
1A. Roll Call	Roll call was taken.	
1B. Affirmation of Mission	Mr. James Elder read the Affirmation of Mission.	
2. Agenda Approval	Mr. James Elder called for an approval of the meeting agenda.	<b>VOTE TAKEN:</b> Mr. Morel made a motion to approve the agenda. The motion was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously.
2A. Additions/Deletions/ Substitutions	No additions/deletions/substitutions.	
2B. Motion to Approve Agenda Items	The agenda for the April 2019 meeting was approved as mailed in the board package.	

3. Awards, Introductions and Presentations	None	No action necessary.
4. Disclosure of Voting Conflict	None.	No action necessary.
5. Public Comment	None.	No action necessary.
6. Meeting Minutes  6A Staff Recommends a MOTION TO APPROVE: Board Meeting Minutes of February 27, 2019	There were no changes or comments to the minutes dated February 27, 2019.	VOTE TAKEN: Mr. Morel made a motion to approve the minutes of February 27, 2019 as presented. The motion was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously.
6B Staff Recommends a MOTION TO APPROVE: Strategic Planning Meeting Minutes of March 27, 2019	There were no changes or comments to the minutes dated March 27, 2019.	VOTE TAKEN: Mr. Neering made a motion to approve the minutes of March 27, 2019 as presented. The motion was duly seconded by Mr. Morel. A vote was called, and the motion passed unanimously.
7. Consent Agenda – Motion to Approve Consent Agenda Items		
7A. ADMINISTRATION		
7A-1. Receive & File: April 2019 Internet Posting of District Public Meeting	The meeting notice was posted.	Receive & File. No further action necessary.
7A-2. Receive & File: Attendance tracking	Attendance tracking was updated.	Receive & File. No further action necessary.
7B. FINANCE		
7B-1. Staff recommends a MOTION TO APPROVE: C. L. Brumback Primary Care Clinics Finance Report March 2019.	Finance Report for March 2019 presented and reviewed in the Finance Committee meeting.	Motion referenced above, no further action necessary.
8. Regular Agenda		
A. EXECUTIVE		

**8A-1. RECEIVE AND FILE:**  
Executive Director  
Informational Update.

Dr. Andric provided an Executive Director informational update:

Lakeside Medical Center Clinic (Belle Glade)  
Clinic Ribbon Cutting is scheduled for May 28th at Lakeside Medical Center at 10:00am.

Mangonia Park  
Construction is underway at the new clinic with expectation that we will open in the Fall.

HRSA New Access Point (NAP) Grant  
Application was submitted on 4/10/2019. We should find out more about this grant award in September. Award is up to \$650,000.

CDC-RFA-CE19-1904 Overdose Data to Action Department of Health and Human Services Centers for Disease Control – NCIPC  
A draft narrative and budget were provided to Department of Health Palm Beach County on 4/5/2019. Requesting \$933,485.

HRSA-19-100 Fiscal Year 2019 Integrated Behavioral Health Services (IBHS) Supplemental Funding  
We have requested a quote from Cherokee Health for on-site consulting services and will request funding for this training of our LCSW's. Award is up to \$145,000.

HRSA-19-079 FY 2019 Oral Health Infrastructure (OHI) Technical Assistance  
We have received quotes for new dental chairs and are putting together a draft budget to provide triple-integrated services in Lantana. Award is up to \$300,000.

Sunshine Health Barrier Removal Fund  
Assistance to make dental services more accessible to members with intellectual and developmental disabilities, specifically: weighted blankets, noise cancelling

**Receive & File. No further action necessary.**

	<p>headphones, TV or DVD player for members needed sensory accommodations to watch while getting dental services.</p>	
<b>8B. CREDENTIALING AND PRIVILEGING</b>		
<p><b>8B-1. Staff Recommends a MOTION TO APPROVE:</b> Licensed Independent Practitioner Credentialing and Privileging – Courtney Rowling</p>	<p>Courtney Rowling, MD, LIP, has satisfactorily completed the credentialing and privileges process and met the standards set forth within the approved Credentialing and Privileging Policy. Staff recommends the Board approve the initial credentialing and privileging for Courtney Rowling.</p> <p>Mr. Smith has requested to receive a little bio of the provider when they are being re-credentialed. Mrs. Gonzalez replied that we will bring this to the board moving forward.</p>	<p><b>VOTE TAKEN:</b> Mr. Smith made a motion to approve Licensed Independent Practitioner Credentialing and Privileging – Courtney Rowling as presented. The motion was duly seconded by Mr. Morel. A vote was called, and the motion passed unanimously.</p>
<b>8C. OPERATIONS</b>		
<p><b>8C-1. Staff Recommends a MOTION TO APPROVE:</b> Operations Reports – January 2019.</p>	<p>Terry Megiveron, Director of Operations, presented the highlights of clinic productivity report for February and March 2019 that was included in the board package.</p> <p>Pediatrics saw 1432 patients at 72% of target met. This is 14 more patients than February productivity of 1418 visits. We are currently reviewing pediatric providers and locations regarding low productivity in Boca, Delray and Lake Worth. We also reviewed this during our strategic planning meeting and are currently working on changes that we anticipate will positively impact productivity in this area.</p> <p>Adults saw 6555 patients at 90% of target met. This is 369 more patients than February productivity of 6186 visits. We discussed low producing areas in strategic planning and are working on a plan of correction for low producing areas.</p>	<p><b>VOTE TAKEN:</b> Mr. Smith made a motion to approve Operations Reports February and March 2019 as presented. The motion was duly seconded by Mr. Morel. A vote was called, and the motion passed unanimously.</p>

	<p>Mental Health saw 905 patients at 81% of target met. This is 89 less patients than February productivity of 994 visits. We had one provider out on maternity leave and we continue to ramp up warm handoffs to our behavioral health specialists, including on the mobile clinic.</p> <p>Substance Abuse saw 494 patients at 97% of target met. This is 79 more patients than February productivity of 415 visits. We continue to operate at maximum capacity with plans to expand services later this year.</p> <p>Women's Health saw 344 patients at 90% of target met. This is 19 more patients than February productivity of 325 visits. We've hired a new Women's Health ARNP (Jennifer Casanova) that is now seeing patients and continues to ramp up her productivity and is doing well.</p> <p>Dental saw 2087 patients at 89% of target met. This is 123 more patients than February productivity of 1964 visits. Lower productivity was anticipated as we continue to transition to accommodate our pediatric patient population. Dental Hygienists saw 405 patients at 90% of target met. This is 137 more patients than February productivity of 268 (we now have all Hygienist vacancies filled).</p> <p>Vacancies: 2 Dental Assistants, Infection Control, Registered Nurse, Medical Assistant, Dental Registration. We are actively recruiting for 6 Positions. We have additional positions listed on finance reports that are either filled or on-hold. We continue to review with HR and Finance to reconcile the reports.</p> <p>Mr. Smith asked how targets are set. Dr. Andric replied stating that targets are set based on average targets among other community health centers across the Nation so that we all have similar targets.</p>	
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**8D. QUALITY**

**8D-1. Staff Recommends a MOTION TO APPROVE:**  
Quality Council Reports.

UDS and Quality Metrics  
In December 2010, the Department of Health and Human Services launched Healthy People 2020 which provides science-based, 10-year national objectives for improving the health of all Americans. We recently added these Healthy people 2020 goals to UDS report to 3 indicators (childhood immunization, cervical cancer screening and colorectal cancer screening).

**VOTE TAKEN: Mr. Smith made a motion to approve Quality Council Reports as presented. The motion was duly seconded by Mr. Morel. A vote was called, and the motion passed unanimously.**

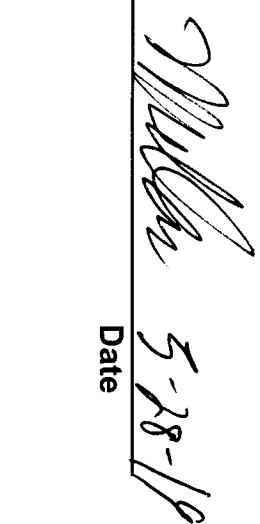
Of the 14 UDS Measures: 5 Exceeded the HRSA Goal and 9 were short of the HRSA Goal. For many that were short of HRSA goal the findings are that numbers may be reduced due to how Athena is capturing data. We expect improvements as the year progresses and continue to provide education to the teams when needed and share data with the clinics so that they know where they stand as far as meeting measure goals.  
In the month of April, our American Cancer Society Liaison will join us in going to out to the clinics for a lunch and learn on HPV vaccination. In month of May we will implement lunch and learns devoted to Cervical Cancer Screening.

Annual Patient Satisfaction Survey  
We compiled and presented our Winter 2019 patient satisfaction survey results. Selected slides were presented to clinics at the April team meeting. Patient satisfaction survey was distributed in all clinics in the month of January and was completed in March 2019. Unlike previous years, the survey was completed via iPad. We received 819 responses in English, Spanish and Creole. A comparison of patient's perceived wait time in 2018 vs. 2019 showing that overall patients feel they are waiting less; 86.1% of surveyed would be very likely or extremely likely to recommend our practice to others. Overall we received excellent facility ratings as it pertains to comfortable and pleasant waiting area, ease in scheduling appointment, being informed about delays, maintaining privacy

	<p>throughout the visit and providers listening skills and respect for patient. One area that was identified as needing the most improvement was "the ability to communicate with the practice via phone" since the patient satisfaction rating was below 50%. Numerous interventions such as changing the phone tree, restructuring the Call Center department and changing the scheduling templates are planned and in the process of being implemented.</p>	
<p><b>8D-2. Staff Recommends a MOTION TO APPROVE:</b> Quality Assurance/Quality Improvement Plan, V7</p>	<p>We revised the QI plan to be more in alignment with HRSA compliance manual. We updated the plan to describe how our quality improvement initiatives are communicated from the Board of Director to clinic administration to staff in the clinic and vice versa. Changes made include, adding that our Quality work groups are service-line specific, detailing our monthly team member meetings, and revising the QI Program diagram which details the components that make up our Quality Assurance and Improvement, Utilization of Health Center Services, Patient Satisfaction and Patient Grievance processes and Patient Safety and Adverse Events. We also updated our Key Initiatives to mirror our Pillars of Success from our Strategic plan.</p>	<p><b>VOTE TAKEN:</b> Mr. Morel made a motion to approve Quality Assurance / Quality Improvement Plan, V7 as presented. The motion was duly seconded by Mr. Mullen. A vote was called, and the motion passed unanimously.</p>
<p><b>9. CMO, VP and Executive Director of Clinical Services Comments</b></p>	<p>None.</p>	<p><b>No action necessary.</b></p>
<p><b>10. Board Member Comments</b></p>	<p>None.</p>	<p><b>No action necessary.</b></p>
<p><b>11. Closed Risk &amp; Claims [Under Separate Cover]</b></p>	<p>At this time, this meeting will be closed pursuant to sections 766.101 and 768.28, Florida Statutes and other relevant statutes and regulations. The closed portion of the meeting is to address Risk &amp; Quality Management matters. All persons currently present must exit the meeting except the following:</p> <ul style="list-style-type: none"> <li>• Risk &amp; Quality Management Department personnel Key clinical personnel who are directly involved in Risk &amp; Quality Management issues;</li> </ul>	<p><b>No action necessary.</b></p>

	<ul style="list-style-type: none"> <li>• Legal Counsel to the Board; and</li> <li>• District Clinic Holdings, Inc. Board members</li> </ul>	
<b>12. Establishment of Upcoming Meetings</b>	<p>2019 Board of Directors Meetings were approved at the November 28, 2018 Board meeting.</p> <p>It was proposed during this meeting to hold our next Board meeting out at Lakeside so we the Board can tour the new Belle Glade Clinic:</p> <ul style="list-style-type: none"> <li>• May 28, 2019 (Lakeside Medical Center) at 9:30 AM.</li> </ul> <p>Meetings start at 12:45 PM:</p> <ul style="list-style-type: none"> <li>• June 26, 2019</li> <li>• July 31, 2019</li> <li>• August 28, 2019</li> <li>• September 25, 2019</li> <li>• October 30, 2019</li> <li>• November 27, 2019</li> <li>• December 18, 2019</li> </ul>	<p><b>No action necessary.</b></p>
<b>13. Motion to Adjourn</b>	<p>There being no further business, the meeting was adjourned.</p>	<p><b>Mr. Mullen made a motion to adjourn and seconded by Mrs. Howard. The meeting was adjourned.</b></p>

Minutes Submitted by:

Signature

Date

5-28-19