

District Clinic Holdings, Inc.
d.b.a. C.L. Brumback Primary Care Clinics
Board of Directors Meeting
Summary Minutes
06/23/2021

Present: Mike Smith, Chair; Melissa Mastrangelo, Vice-Chairperson; John Casey Mullen; Julia Bullard, Secretary; Irene Figueroa; Tammy Jackson-Moore; James Elder; Joe Gibbons, Treasurer

Excused: Robert Glass

Absent: Marjorie Etienne

Staff: Darcy Davis, Chief Executive Officer; Dr. Belma Andric, VP & Chief Medical Officer; Dr. Hyla Fritsch, Executive Director of Clinic and Pharmacy Services; Glen Torcivia, Outside General Counsel; Shauniel Brown, Risk Manager; Thomas Cleare, AVP of Strategy; Martha Hyacinthe, Director of Corporate Risk; David Speciale, Director of Patient Experience; Patricia Lavelly, VP & Chief Information & Digital Officer; Dr. Charmaine Chibar, FQHC Medical Director; Donald Moniger, Desktop Engineer; Shannon Wynn, Administrative Assistant; Marisol Miranda, Director of Operations; Lisa Hogans; Candice Abbott; Robin Kish; June Shipek; Maria Chamberlin; Andrea Steele; Alexa Goodwin; John Wright; Dominique Domond; Jessica Cafarelli

Minutes Transcribed By: Shannon Wynn

Meeting Scheduled for 12:45 p.m.

Meeting Began at 12:48 p.m.

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

2. Agenda Approval 2A. Additions/Deletions/ Substitutions 2B. Motion to Approve Agenda Items	None. Mr. Smith called for approval of the meeting agenda.	VOTE TAKEN: Ms. Jackson-Moore made a motion to approve the agenda. Mr. Mullen duly seconded the motion. A vote was called and the motion passed unanimously.
3. Awards, Introductions and Presentations 3A. COVID-19 Testing and Vaccination Update	Rachael Docekal did a presentation on the RISE project. Dr. Andric presented to the Board the most recent Covid-19 testing and vaccine update.	No action necessary.
4. Disclosure of Voting Conflict	None.	No action necessary.
5. Public Comment	None.	No action necessary.
6. Meeting Minutes 6A-1 Staff Recommends a MOTION TO APPROVE: Board meeting minutes of May 19, 2021	There were no changes or comments to the minutes dated May 19, 2021.	VOTE TAKEN: Ms. Jackson-Moore made a motion to approve the Board meeting minutes of May 19, 2021, as presented. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.
7. Consent Agenda – Motion to Approve Consent Agenda Items		VOTE TAKEN: Ms. Jackson-Moore made a motion to approve the consent agenda as presented. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.
7A. ADMINISTRATION		
7A-1. Receive & File: June 2021 Internet Posting of District Public Meeting	The meeting notice was posted.	Receive & File. No further action is necessary.

7A-2. Receive & File: Attendance tracking	Attendance tracking was updated.	Receive & File. No further action is necessary.
7A-3. Staff Recommends a MOTION TO APPROVE: Patient Dismissal Policy	This policy proposes to establish protocols which appropriately dismiss patients from the C. L. Brumback Primary Care Clinics following a review of all reported events by the Multidisciplinary Care Review Team (MCT) members to maintain staff and patient safety throughout the clinics. The protocols will require reviews of all reported patient behaviors, including but not limited to sexual harassment, verbal abuse, threatening behaviors and physical abuse against any staff, patients, visitors or on-site vendors.	VOTE TAKEN: Ms. Jackson-Moore made a motion to approve the Patient Dismissal Policy. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.
7B. FINANCE		
7B-1. Staff Recommends a MOTION TO APPROVE: District Clinic Holdings, Inc., Financial Report: April 2021	<p>The April statements represent the financial performance through the seventh month of the 2021 fiscal year for C.L. Brumback Primary Care Clinics. Total YTD revenue was unfavorable to budget by (\$3.4M) due primarily to timing of COVID-19 stimulus funds. Net patient revenue YTD was favorable to budget by \$921k. Expenses before depreciation were favorable to budget by \$468k or 2.9% due mostly to positive variances in medical supplies \$539k, other supplies \$108k, medical services \$127k, lease and rental \$125k, and other expense \$83k. Total YTD net margin was (\$9.5M) compared to budget of (\$6.9M) resulting in an unfavorable variance of (\$2.6M) or 38.3%.</p> <p>The Medical clinics total YTD revenue was unfavorable to budget by (\$3.5M). This unfavorable variance resulted from the timing of COVID-19 related stimulus funding. Gross patient revenue was over budget by \$3.2M or 47.7%, which resulted from the Clinic efforts to respond to the pandemic offering telemedicine visits in addition to office visits. Clinic staff continue to provide countywide COVID-19 testing and vaccination. Total operating expenses of \$13.6M were favorable to budget of \$14.0M by \$422k or 3.0%. This positive variance is mostly related to medical supplies \$500k, medical services \$127k, lease and rental \$122k, and other expense \$69k. These expenses are</p>	VOTE TAKEN: Ms. Jackson-Moore made a motion to approve the PCC Financial Report April 2021. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.

	<p>favorable to budget due to usage timing and supplies purchases. Total YTD net margin was (\$8.5M) compared to budget of (\$5.7M) resulting in an unfavorable variance of (\$2.8M) or 48.9%.</p> <p>The Dental clinics total YTD gross patient revenue was favorable to budget by \$333k or 17.4%. Total revenue of \$2.0M was over budget by \$75k due to increase visits. Total operating expenses of \$2.3M were favorable to budget by \$46k or 2.0%. Total YTD net margin was (\$981k) compared to a budget loss of (\$1.1M) for a favorable variance of \$166k or (14.5%).</p> <p>On the Comparative Statement of Net Position, due from other governments increased from \$967k to \$2.6M. This balance is due mainly from Health Resources and Service Administration (HRSA). The District subsidy YTD for the Medical and Dental clinics are \$4.9M, and \$1.1M respectively for a combined subsidy of \$6.0M.</p>	
8. REGULAR AGENDA		
8A. ADMINISTRATION		
8A-1. Staff Recommends a MOTION TO APPROVE: Grant Application Updates	<p>Update on the Fiscal Year 2021 American Rescue Plan – Health Center Construction and Capital Improvements (ARP-Capital) grant submission. The Fiscal Year 2021 American Rescue Plan – Health Center Construction and Capital Improvements (ARP-Capital) makes available a one-time supplemental funding for health centers to support construction, expansion, alteration, renovation and other capital improvements to modify, enhance and expand health care infrastructure. The amount of funding available for each health center is based on the following formula:</p> <ul style="list-style-type: none"> · \$500,000 base amount, plus · \$11 per patient as reported in 2019 UDS <p>The grant application is due June 24, 2021. Our expected award is \$1,010,224. The plan is to use these funds primarily to purchase equipment for our new locations.</p>	<p>VOTE TAKEN: Ms. Jackson-Moore made a motion to approve the Grant Application Update. Ms. Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.</p>

8A-2. Staff Recommends a MOTION TO APPROVE: Change In Scope –C. L. Brumback Primary Care Clinics – Atlantis	We respectfully request the authorization to add a new site to Form 5B: C. L. Brumback Primary Care Clinics – Atlantis located at 4801 S. Congress Avenue, Suite 101, Lake Worth, FL. 33461.	VOTE TAKEN: Ms. Jackson-Moore made a motion to approve The Change In Scope- C.L. Brumback PCC- Atlantis. Mr. Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.
8A-3. Staff Recommends a MOTION TO APPROVE: Change In Scope –C. L. Brumback Primary Care Clinics – West Boca Raton	We respectfully request the authorization to add a new site to Form 5B: C. L. Brumback Primary Care Clinics – West Boca by moving the current clinic to 9960 S. Central Park Blvd., Suite 450, Boca Raton, FL. 33428.	VOTE TAKEN: Ms. Bullard made a motion to approve The Change In Scope- C.L. Brumback PCC- West Boca. Mr. Elder duly seconded the motion. A vote was called, and the motion passed unanimously.
8B. EXECUTIVE		
8B-1. Receive and File: Executive Director Information Update	<p><u>Clinic relocations and new sites</u></p> <p>Upcoming clinic relocations are moving along. We are relocating the Boca, Delray and Mangonia clinics and opening new clinics in Atlantis and eventually in West Palm (RISE project).</p> <p>The Boca clinic's current lease ends at the end of this year and will be moving before the lease ends. The clinic has outgrown its existing space and a new location nearby has been identified. We are working with the owner's representative to draw up floor plan proposals for the architect and the draft lease is being worked on.</p> <p>The Delray clinic, located inside the Department of Health building, will be vacating the current location and hopefully moving into a new facility located across the street. We are also working with the owner's representative to draw up floor plan proposals for the architect and the draft lease is being worked on.</p>	Receive & File. No further action necessary.

The Mangonia clinic, home to our Addiction Stabilization Unit warm hand-off (WHO) program, will be relocating into the building next door on the north campus of JFK North hospital. The current space is too small for the growth of this clinic, and the new space is much bigger. The larger area will also allow for an onsite pharmacy. We are also working with the owner's representative to draw up floor plan proposals for the architect and the draft lease is being worked on.

The Atlantis clinic, which will be located on Congress Avenue near JFK hospital, will be a new location for our patients. The Lantana clinic's presence will be significantly scaled-down, and the Atlantis clinic will become the flagship site for our patient population. We are also working with the owner's representative to draw up floor plan proposals for the architect and the draft lease is being worked on.

The West Palm clinic will be relocating in the future as part of the RISE project.

Compliance Resolution Opportunity (CRO) submitted

During our vOSV with HRSA, there were findings related to contracts that could not be corrected during the audit. Post audit, we are allowed a Compliance Resolution

Opportunity (CRO) during which time corrections could be made and, if accepted, no conditions would be placed on the HRSA grant. We have successfully submitted our CRO corrections which were all accepted and all findings have been resolved.

Federal Tort Claims Act (FTCA) submitted

	We have successfully submitted our Federal Tort Claims Act (FTCA) medical malpractice coverage, deeming application to HRSA.	
8C. OPERATIONS		
8C-1. Staff Recommends a MOTION TO APPROVE Operations Reports	<p>This agenda item provides the following operations reports for April 2021: Clinic Productivity, including in-person and telehealth metrics and No Show trended over time. In April, we had 10,163 visits, which increased from the month before and from April 2020. With the impact of COVID, it is expected to see a lower number of visits in 2020. Regarding individual clinics visits, all clinics exceeded their 2020 totals. Dental clinics did not reopen fully until the end of April this year. Our payer mix for the year-to-date reflects a slightly higher percentage of uninsured patients at 58%. By visit category, Substance Use exceeded their productivity targets for in-person again this month. Telehealth visits decreased to 7% of all visits, which is down from 11% last month. Productivity targets for in-person visits were again met for adults in Boca Raton and pediatrics in West Palm Beach. In-person visit productivity targets also met the goal for Substance Abuse in Mangonia as well as Lewis Center. Telehealth goals were met for adults in Boca. The No Show rate in April remains relatively level at 28.3%. Telehealth No Show rates remain low compared to in-person visits. In comparison, the year-to-date No Show rate is approximately 25%, of which in-person visits make up 78%.</p> <p>Ms. Jackson-Moore asked if the Clinics are prepared to see patients once summer ends and school opens.</p> <p>Ms. Miranda stated that the clinics are fully prepared to see patients.</p> <p>Dr. Fritsch also stated that the Mobile Clinics are equipped to see pediatric patients for vaccination and wellness visits.</p>	VOTE TAKEN: Ms. Jackson-Moore made a motion to approve the Operations Reports as presented. Mr. Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.
8D. QUALITY		

<p>8D-1. Staff Recommends a MOTION TO APPROVE Quality Reports</p>	<p><u>PATIENT SAFETY & ADVERSE EVENTS</u> Patient safety and risk, including adverse events, peer review and chart review are brought to the board “under separate cover” every quarter.</p> <p><u>PATIENT SATISFACTION AND GRIEVANCES</u> Patient relations to be presented as separate agenda item.</p> <p><u>QUALITY ASSURANCE & IMPROVEMENT</u> In April, we saw our UDS Diabetes measure improve. We are now currently meeting our goal with 67% of our patients being controlled, while 24% remain uncontrolled and 9% of patients still need data. This increase was primarily due to a decrease in the number of patients needing data, which went from 13% to 9%. This is an effect of our outbound campaign with the call center to call those patients who were missing data to schedule in-person appointments. POC HgbA1c testing was implemented to increase patient compliance. There were 1745 POC A1Cs (68% of Diabetic Patients). The majority of controlled (71%) and uncontrolled (87%) of diabetic patients had the A1c done at POC vs. lab.</p> <p><u>UTILIZATION OF HEALTH CENTER SERVICES</u> Individual monthly provider productivity stratified by clinic.</p> <p>Ms. Jackson-Moore asked if the providers have a protocol in place to ask the patients to complete the colon screening kit in the office during their visit.</p> <p>Dr. Chibar stated we encourage all patients to complete the test before leaving their doctor's appointment.</p> <p>Ms. Jackson-Moore asked how soon we can expect accurate data in EPIC once everything from Athena is converted over.</p> <p>Dr. Fritsch stated she suspects we will have transparent reporting 30 days after the EPIC Go-Live.</p>	<p>VOTE TAKEN: Mr. Mullen made a motion to approve the Quality Reports as presented. Mr. Smith duly seconded the motion. A vote was called, and the motion passed unanimously.</p>
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	<p>Mr. Smith asked what happens to the expense of Athena once EPIC starts in July.</p> <p>Ms. Lavelly said the District would only pay a portion of the collection unless it drops to less than \$250 a month. The District has an archive system where we can retain data after that.</p>	
9. V.P. and Executive Director of Clinic Services Comments	Dr. Fritsch informed the Board she forwarded the "Thank You" letter to all staff members. The letter was very well received.	No action necessary.
10. Board Member Comments	Mr. Gibbons stated he was excited and looking forward to the launch of EPIC.	No action necessary.
12. Establishment of Upcoming Meetings	<p><u>July 28, 2021 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p> <p><u>August 25, 2021 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p> <p><u>September 29, 2021 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p> <p><u>October 27, 2021 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p> <p><u>November 30, 2021 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p> <p><u>December 14, 2021 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p>	No action necessary.
13. Motion to Adjourn	There being no further business, the meeting was adjourned at 2:09 p.m.	VOTE TAKEN: Ms. Jackson-Moore made a motion to adjourn. Mr. Mullen duly

		seconded the motion. A vote was called, and the motion passed unanimously.
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Minutes Submitted by: Julia Bullard 8/25/21
Signature Date