



Health Care District
OF PALM BEACH COUNTY
WE CARE FOR ALL

COMMUNITY HEALTH CENTER BOARD OF DIRECTORS

MEETING AGENDA

July 23, 2025

1515 N. Flagler Drive, Suite 101

West Palm Beach, FL 33401

Remote Participation Link:

<https://zoom.us/j/5507895592?pwd=REZ4TWtYUXowQWNpWTBaVXRzZldDQT09>

Telephone Dial-in Access: (646) 558-8656 / Meeting ID: 550 789 5592 / Password: 94650

1. Call to Order – Joseph Gibbons, 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. **MOTION TO APPROVE:**
Board Meeting Minutes of June 25, 2025 [Pages 1-5]



Health Care District
OF PALM BEACH COUNTY
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7. Consent Agenda

MOTION TO APPROVE: Consent Agenda Items

A. ADMINISTRATION

7A-1 **RECEIVE AND FILE:**

July 2025 Internet Posting of District Public Meeting
<https://www.hcdpbc.org/resources/public-meetings>

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

Attendance Tracking [Page 6]

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

HRSA Digest (Dr. Joshua Adametz) [Pages 7-10]

7A-4 **RECEIVE AND FILE:**

Annual Risk Management Plan 2025 (Shauniel Brown) [Pages 11-20]

B. FINANCE

7B-1 **MOTION TO APPROVE:**

District Clinic Holdings, Inc. May 2025 Financial Report
(Jessica Cafarelli) [Pages 21-40]

8. Regular Agenda

A. ADMINISTRATION

8A-1 **MOTION TO APPROVE:**

Nomination of New Community Health Center Board Member
(Dr. Joshua Adametz) [Pages 41-42]

8A-2 **RECEIVE AND FILE:**

Risk Management Dashboard Second Quarter 2025
(Shauniel Brown) [Pages 43-46]



Health Care District
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8. Regular Agenda (Continued)

B. EXECUTIVE

8B-1 RECEIVE AND FILE:

Executive Director Update (Dr. Joshua Adamez)
[Pages 47-48]

C. CREDENTIALING

8C-1 MOTION TO APPROVE:

Licensed Independent Practitioner Credentialing and Privileging
(Dr. Ana Ferwerda) [Pages 49-53]

D. QUALITY

8D-1 MOTION TO APPROVE:

Quality Report (Dr. Ana Ferwerda) [Pages 54-72]

E. OPERATIONS

8E-1 MOTION TO APPROVE:

Operations Report (Angela Santos) [Pages 73-75]

8E-2 MOTION TO APPROVE:

Patient Relations (Alexa Goodwin) [Pages 76-78]

**9. Dr. Joshua Adamez, AVP & Executive Director of Community Health Center
Comments**

10. Board Member Comments



Health Care District
OF PALM BEACH COUNTY
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11. Establishment of Upcoming Meetings

August 27, 2025 at 12:30 p.m.

September 24, 2025 at 12:30 p.m.

October 22, 2025 at 12:30 p.m.

November 19, 2025 at 12:30 p.m.

December 17, 2025 at 12:30 p.m.

12. Motion to Adjourn Public Meeting



District Clinic Holdings, Inc.; d.b.a. Health Care District Community Health Center
Board of Directors Meeting
1515 N. Flagler Drive, Suite 101, WPB, FL 33401
Summary Minutes
06/25/2025

Present: Joseph Gibbons–Chair; Bill Johnson – Vice Chair; Michael Smith – Treasurer; Albert Borroto (ZOOM); Alcolya St. Juste (ZOOM); Juia Bullard (ZOOM).

Absent: Boris Seymore; Melissa Tascone; Nicholas Campbell

Staff: Dr. Joshua Adametz; Jessica Cafarelli; Darcy Davis; Bernabe Icaza; Belma Andric; Regina All; Geoff Washburn; Dr. Ana Ferwerda; Angela Santos; Steven Sadiku; Heather Bokor; Nancy Gonzalez; Leamsi Borges.

Minutes Transcribed By: Adriana Padron

The meeting is scheduled for 12:30pm.
Meeting Began at 12:30pm.

AGENDA ITEM	DISCUSSION	ACTION
<p>1. Call to Order</p> <p>1A. Roll Call</p> <p>1B. Affirmation of Mission</p>	<p>Joseph Gibbons called the meeting to order.</p> <p>Roll call was taken and a quorum was established.</p> <p>Mr. Gibbons read the affirmation of mission into the record.</p>	<p>The meeting was called to order at 12:30 p.m.</p>
<p>2. Agenda Approval</p> <p>2A. Additions/Deletions/ Substitutions</p> <p>2B: Motion to Approve Agenda Items</p>		<p>VOTE TAKEN: Mr. Bill Johnson made a motion to approve the agenda as presented. Mr. Michael Smith duly seconded the motion. A vote was called and the motion passed unanimously.</p>



<p>3. Awards, Introductions & Presentations</p>	<p>The Manager of Regulatory and Accreditation presented the annual Board FTCA Training, which covered the FTCA program, the board’s oversight responsibilities, and related topics.</p>	<p>No Action necessary.</p>
<p>4. Disclosure of Voting Conflict</p>	<p>None.</p>	<p>No action necessary.</p>
<p>5. Public Comment</p>	<p>None.</p>	<p>No action necessary.</p>
<p>6. Meeting Minutes</p> <p>A. MOTION TO APPROVE:</p> <p>Board Meeting Minutes of May 28, 2025</p>	<p>There were no changes or comments to the Board Meeting Minutes dated May 28, 2025.</p>	<p>VOTE TAKEN: Mr. Bill Johnson made a motion to approve the Board Meeting Minutes of May 28, 2025. Mr. Michael Smith duly seconded the motion. A vote was called, and the motion passed unanimously.</p>
<p>7. Consent Agenda – Motion to Approve Consent Agenda Items</p>		<p>VOTE TAKEN: Mr. Bill Johnson made a motion to approve the Consent Agenda. Mr. Michael Smith duly seconded the motion. A vote was called, & the motion passed unanimously.</p>
<p>A. ADMINISTRATION</p> <p>7A-1. RECEIVE & FILE:</p> <p>Internet Posting of District Public Meeting</p>	<p>The June 2025 meeting notice was posted.</p>	<p>No action necessary.</p>
<p>7A-2. RECEIVE & FILE: Attendance Tracking</p>	<p>Attendance tracking was updated.</p>	<p>No action necessary.</p>
<p>7A-3. RECEIVE & FILE: HRSA Digest</p>	<p>Per the request of the Clinic Board, the latest HRSA Digest was provided.</p>	<p>No action necessary.</p>



<p>B. FINANCE</p> <p>7B-1. MOTION TO APPROVE: District Clinic Holdings, Inc. May 2025 Financial Report</p>	<p>This agenda item recommends the Board approve the May 2025 Financial Report which was provided in the Board packet.</p>	<p>Motion approved unanimously.</p>
<p>8. REGULAR AGENDA</p>		
<p>A. ADMINISTRATION</p>	<p>None.</p>	<p>Received & Filed. No action necessary.</p>
<p>B. EXECUTIVE</p> <p>8B-1 RECEIVE AND FILE: Executive Director Informational Update</p>	<p>Dr. Adametz presented his Executive Director Informational Update, FACHC Board Member training.</p>	<p>Received & Filed. No action necessary.</p>
<p>C. CREDENTIALING</p> <p>8C-1 MOTION TO APPROVE: Licensed Independent Practitioner Credentialing and Privileging</p>	<p>Dr. Ana Ferwerda presented the licensed independent practitioners recommended for credentialing and privileging by the FQHC Medical Director.</p>	<p>VOTE TAKEN: Mr. Bill Johnson made a motion to approve. Mr. Michael Smith duly seconded the motion. A vote was called, and the motion passed unanimously.</p>
<p>D. QUALITY</p> <p>8D-1 MOTION TO APPROVE: Quality Reports</p>	<p>This agenda item presents the updated Quality Improvement & Quality Updates:</p> <ul style="list-style-type: none"> • Quality Council Meeting Minutes –May 2025 • UDS Report – YTD <p>Dr. Ferwerda presented the above topics and reviewed the UDS Report Dashboard.</p>	<p>VOTE TAKEN: Mr. Bill Johnson made a motion to approve the Quality Reports as presented. Mr. Michael Smith duly seconded the motion. A vote was called, and the motion passed unanimously.</p>



<p>E. OPERATIONS</p> <p>8E-1 MOTION TO APPROVE: Operations Report</p>	<p>Angela Santos presented the Operations report which provides the Health Center Productivity report for May 2025.</p>	<p>VOTE TAKEN: Mr. Michael Smith made a motion to approve the Operations report for May 2025. Mr. Bill Johnson duly seconded the motion. A vote was called, and the motion passed unanimously.</p>
<p>9. Executive Director of FQHC Services Comments</p>	<p>Immediately following this Board meeting, there will be our fourth Training session: FACHC – HDPBC Governance Training – HCP Mission, Board Requirements & Oversight Mechanisms.</p>	<p>No action necessary.</p>
<p>10: Board Member Comments</p>	<p>None.</p>	<p>No action necessary.</p>
<p>11. Establishment of Upcoming Meetings</p>	<p>July 23, 2025 (HCD Board Room) 12:30 p.m. Board of Directors</p> <p>August 27, 2025 (HCD Board Room) 12:30 p.m. Board of Directors</p> <p>September 24, 2025 (HCD Board Room) 12:30 p.m. Board of Directors</p> <p>October 22, 2025 (HCD Board Room) 12:30 p.m. Board of Directors</p> <p>November 19, 2025 (HCD Board Room) 12:30 p.m. Board of Directors</p>	<p>No action necessary.</p>



	December 17, 2025 (HCD Board Room) 12:30 p.m. Board of Directors	
12. Motion to Adjourn	Mr. Joseph Gibbons motioned to adjourn the public meeting at 1:14 pm.	VOTE TAKEN: Mr. Michael Smith made a motion to adjourn the public meeting. Mr. Bill Johnson duly seconded the motion. A vote was called, and the motion passed unanimously.

Minutes Reviewed by: _____
Signature **Date**



Community Health Center Board of Directors Attendance Tracking 2025

	01/22/25	02/26/25	03/26/25	04/23/25	05/28/25	06/25/25	07/23/25	08/27/25	09/24/25	10/22/25	11/19/25	12/17/25
Mike Smith	X	X	X	X	X (ZOOM)	X						
Melissa Tascone	X (ZOOM)	E	E	E	X	E						
Julia Bullard	X	X (ZOOM)	X	X	E	X (ZOOM)						
Joseph Gibbons	X	X	E	X	X	X						
Alcolya St. Juste	E	X (ZOOM)	X (ZOOM)	E	E	X (ZOOM)						
William (Bill) Johnson	X	X	X	X	X	X						
Boris Seymore	E	X (ZOOM)	X (ZOOM)	X (ZOOM)	E	E						
Crystal Gonzalez	E	-	-	-	-	-	-	-	-	-	-	-
Albert Borotto	X (ZOOM)	E	X (ZOOM)	X (ZOOM)	X (ZOOM)	X (ZOOM)						
Nicholas Campbell	-	X	X	E	X (ZOOM)	E						
Quorum Established	Q	Q	Q	Q	Q	Q						

X= Present **A= Absent**
C= Cancel **Q= Quorum**
E= Excused

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025

1. Description: HRSA Digest

2. Summary:

Per the request of the Clinic Board, we will include the latest HRSA Digest updates as available.

3. Substantive Analysis:

This July HRSA Digest highlights the following:

• **2025 UDS Manual:**

- Now available ahead of the CY 2025 UDS reporting period, due February 15, 2026.

• **Executive Order 14273:**

- Health centers must offer insulin and epinephrine at or below 340B pricing to low-income patients.

• **FY 2026 SAC:**

- Will shift to a 4-year performance period. The NOFO is currently in development.

• **Supplemental Funding:**

- Active supplemental awards (except Expanded Hours) will be rolled into H80 base funding.
- No additional FY25 supplemental funding awards will be issued.
- The remaining balance of FY25 funds is pending distribution.

• **FY 2025 Expanded Hours:**

- Award recipients are no longer required to submit an NCC or SAPR for this award.



**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

Signed by:


CA6A21FF2E09481
 Jessica Cafarelli
 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A

 Date Approved

6. Recommendation:

Staff recommends the Board Receive and File the HRSA Digest.

Approved for Legal sufficiency:

Signed by:


UCF6F7DB6706434...
 Bernabe Icaza
 SVP & General Counsel

Signed by:


2B4234F097841B6
 Joshua Adametz, DMD, MPH, MA
 AVP & Executive Director of Community Health Centers



2025 UDS Manual Released, BPHC Program Updates Wrap-Up

From HRSA Primary Health Care Digest <hrsa@public.govdelivery.com>

Date Tue 7/1/2025 10:03 AM

To Krysten Kinsey <kinsey@hcdpbc.org>

Caution: This email came from an EXTERNAL SOURCE. Do not click on links or open attachments unless you are sure you recognize the sender and you know the contents are safe.



Primary Health Care Digest

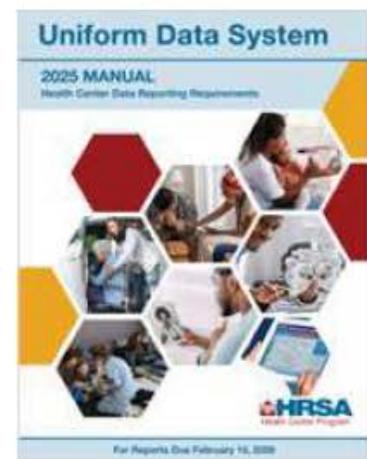
July 1, 2025

SHARE

2025 UDS Manual is Now Available

The [2025 Uniform Data System \(UDS\) Manual \(PDF\)](#) is now available. It provides detailed reporting instructions and example data tables that support calendar year (CY) 2025 UDS reporting. All HRSA-supported health centers must submit a full, aggregated 2025 UDS report within HRSA's Electronic Handbooks (EHBs) by February 15, 2026.

Key UDS measurement changes are also outlined in the [2025 UDS Program Assistance Letter \(PDF\)](#), now available on the [UDS Training and Technical Assistance website](#). Submit any inquiries related to UDS reporting updates via the [BPHC Contact Form](#) ([Uniform Data System > UDS Reporting](#)).



BPHC Program Updates Wrap-Up

See the [slides from the recent BPHC Program Updates \(PDF\)](#). Here are other highlights from the webcast:

- **Executive Order 14273:** On Tuesday, June 24, in alignment with Executive Order 14273, [HRSA issued updated award terms](#) requiring HRSA-funded health centers to provide insulin and injectable epinephrine to low-income patients at or below the price paid by the center through the 340B Drug Pricing Program.
 - Health centers will demonstrate **Implementation of Executive Order 14273** by documenting the policies and procedures they have in place on *Form 1C: Documents on File* in the fiscal year (FY) 2026 Service Area Competition (SAC) applications or Budget Period Progress Reports (BPR). The **requirements set forth in the Executive Order only apply to health centers receiving operating awards provided under section 330 of the Public Health Service Act that also participate in the 340B Drug Pricing Program.**

- The **FY 2026 SAC** Notice of Funding Opportunity is in development. FY 2026 SACs will have a 4-year period of performance. Over time, HRSA will shift all health centers from 3-year to 4-year periods of performance.
- **Supplemental Funding:**
 - **Rolling into Base:** HRSA will roll all active supplemental funding (except for FY 2025 Expanded Hours awards) into Health Center Program H80 base funding.
 - **New Supplemental Funding Awards:** HRSA does not have funding to make any additional FY 2025 supplemental funding awards, including New Access Point (NAP) awards.
- **FY 2025 Expanded Hours (EH)** award recipients are no longer required to submit an EH-specific Non-Competing Continuation (NCC) or semi-annual progress report (SAPR). Learn more on the [EH webpage](#).
- Earlier this year, HRSA provided six months of partial funding for all health center continuation awards using available funds. HRSA is working on providing the **remaining balance of fiscal year (FY) 2025 funds** for health center continuation awards.
- **Contacting BPHC:** Continue to use the Health Center Program Support as your primary point of contact with BPHC via the [BPHC Contact Form](#) or by calling (877) 464-4772.

The next BPHC Program Updates webcast is scheduled for **2:00-3:00 p.m. ET on Tuesday, July 22.**

New BPHCurates Workforce Packet

HRSA released the newest BPHCurates resource packet focused on workforce career pathways. This resource aims to guide health centers in strengthening community-based health professions education programs, increasing access to career development and upskilling opportunities, and providing the necessary tools and frameworks to support the growth of medical, dental, administrative, and operational professionals within health centers. [View the resource.](#)

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[Health Resources and Services Administration](#)

5600 Fishers Lane | Rockville, MD 20857

This email was sent to kkinsey@hcdpbc.org using GovDelivery Communications Cloud on behalf of: HRSA · 5600 Fishers Lane · Rockville, MD 20857





**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

1. Description: Annual Risk Management Plan FY25

2. Summary:

This agenda item provides an overview of the Annual Risk Management Plan for the Community Health Center’s for FY25

3. Substantive Analysis:

The Community Health Center’s Annual Risk Management Plan FY25 provides a detailed report that includes the mission of the risk management program, the goals and objectives of the Enterprise Risk Management (ERM) Plan, the scope of the risk management program, the authority and direct oversight of the program, the responsibility of the program, the administrative and committee structure and mechanisms for coordination of the program, the annual training plan, and the program evaluation.

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

Signed by:


 CA6A21FF2E09481
 Jessica Cafarelli
 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

 N/A
 Committee Name

 N/A
 Date Approved



**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

6. Recommendation:

Staff recommends the District Clinic Holdings, Inc. Board of Directors Receive and File the Community Health Center’s Annual Risk Management Plan FY25

Approved for Legal sufficiency:

Signed by:
Bernabe Icaza

0CF6F7DB67B643A
Bernabe Icaza
SVP & General Counsel

DocuSigned by:
Shauniel Brown

4E403876DEA842E
Shauniel Brown
Senior Risk Manager of Community
Health Centers

Signed by:
Joseph A. Metz

7B924F8879489
Joseph A. Metz, DMD, MPH, MA
AVP & Executive Director of Community
Health Centers



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**Community Health Center's Risk Management Annual Plan
FY 2025**



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TABLE OF CONTENTS

- I. MISSION
- II. GOALS AND OBJECTIVES / ERM PLAN 2025
- III. SCOPE
- IV. AUTHORITY
- V. RESPONSIBILITY
 - a. HCD Quality, Patient Safety, and Compliance Board & FQHC Board
 - b. HCD Executive Administration
 - c. Medical Executive Committee / Medical Staff
 - d. Management / Leadership
 - e. Staff
- VI. ADMINISTRATIVE AND COMMITTEE STRUCTURE AND MECHANISMS FOR COORDINATION
 - a. Operational Linkages
- VII. PROGRAM EVALUATION



I. MISSION

The mission of the Community Health Center’s Risk Management Program (CHCRM) is to provide a comprehensive framework for making risk management decisions that maximize value protection and creation by managing risk and uncertainty and their connections to total value. The CHCRM program fully supports the mission, vision, values, and strategic plan of the Health Care District Community Health Center, which is to be the healthcare safety net for Palm Beach County. The CHCRM Program recognizes eight domains: operational, clinical, and patient safety, human capital, financial, legal and regulatory, strategic, technology, and hazard. Each HCD business unit has a risk professional or designee who proactively identifies, analyzes, and controls possible and actual events in collaboration with the leadership teams.

II. GOALS & OBJECTIVES

The Risk Management Program’s general goals and objectives facilitate a program that:

- Minimize losses to the organization by proactively identifying, analyzing, preventing, and controlling potential operational, clinical/patient safety, strategic, financial, human capital, legal/regulatory, technology, and hazardous risks.
- Minimize and prevent the occurrence of errors, events, and system breakdowns that could result in harm to patients, residents, staff, and visitors.
- Promote the Good Catch Program which fosters a culture of safety by training and encouraging staff to recognize and report events or situations that have the potential to result in harm or injury.
- Support and promote a Just Culture that promotes awareness and empowers staff to identify risk-related issues and trust that these issues can be reported without blame.
- Support patient safety and quality improvement initiatives across the organization.
- Protect the financial, human, and other tangible assets of the organization.
- Prevent and minimize the risk of liability against the organization.
- Investigate and assist in claim resolution to minimize financial exposure.
- Provide risk management consultation and education across the organization.
- Trend analysis of events, near misses, and claims.
- Event investigation and follow-up.
- Predict future losses based upon past and current loss trends and analysis.
- Assist in complaint/grievance resolution and compliance efforts.
- Facilitate compliance with regulatory, legal, and accrediting agency requirements.
- Implement performance improvement strategies to mitigate identified or potential risks.

The Risk Management Program’s Quarterly goals and plan for 2025 include the following:

Q1 2025	Q2 2025	Q3 2025	Q4 2025
Specimen Labeling	Good Catch / Near Miss Events	Managing Disruptive Patient Behaviors	Patient Identification



Health Care District

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<p>Goals: Specimen Labeling event submission rate to be 5% less than the total number of specimen labeling events submitted in HCD’s Safety Event Reporting System in 2024.</p>	<p>Goals: Risk will educate CHC staff on event reporting – including when, how, why, and where as this is vital in a just culture to achieve an overall goal of “see it, say it, fix it.” Good Catch/Near Miss event submission rate to be greater than 5% of the total number of events submitted in HCD’s Safety Event Reporting System (RiskQual/HAS) by 12/31/2025.</p>	<p>Goals: Good Catch/Near Miss event submission rate to be 5% less than the total number of behavioral events submitted in HCD’s Safety Event Reporting System in 2024.</p>	<p>Goals: Patient identification event submission rate to be 5% less than the total number of patient identification events submitted in HCD’s Safety Event Reporting System in 2024.</p>
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The Risk Management Program’s goals and plan for 2025 include the following:

- Utilize six sigma methodologies for process improvement and change management surrounding the event reporting/management at HCD to improve the overall data entry and reporting in HCD’s Risk Information Management System (RiskQual).
- Development and analyzation of the following surveys: Leadership Engagement and Program Satisfaction, Culture of Safety, and Risk Management Awareness. Development of action plans based on analyzation of survey results (awareness, training/education, rounding, processes, etc.).
- Participate/engage in risk management team meetings/huddles.
- Initiate each business unit has a risk management / safety committee/meeting.
- Ensure proper regulatory compliance with submission and timelines for all required reports under risk management statutes/regulations (DOH, FDA, HRSA, VAERS, etc.).
- Maintain active memberships of Florida Society of Health Care Risk Management & Patient Safety (FSHRMPS) and American Society of Health Care Risk Management (ASHRM).
- Participate in scheduled monthly Emergency Care Research Institute (ECRI), HCD’s Patient Safety Organization (PSO) status calls.
- Assist with maintaining and ensuring all member contracted services for HCD through the ECRI contract/agreement (8/1/2023-7/31/2026) are fully utilized (meetings, webinars, research requests, curated literature search, continuing education, RCA review and feedback, etc.).
- Develop enterprise-wide risk management policies and procedures.
- The DCRM will meet on a monthly basis with the senior executive team (CEO, CMO, COO, CNO, General Counsel) to provide high level risk management updates (incident reviews, significant/reportable events, updates, process improvement topics/initiatives, PCE/legal/claims, etc.).



CHC Risk Management Training Plan for all Service Areas:

Course Title	Topic Area	Delivery Method	Assigned To	Assigned Date	Due Date
Obstetrical Training: Prenatal Care in the Primary Care Setting	OB Training	Online Module/ eLearning	LIPs, OLCPs, OCS	6/13/25	6/30/25
Infection Control Overview	Infection Control	Online Module/ eLearning	All Staff	6/13/25	6/30/25
HIPAA/Privacy Compliance: It's the Law	HIPAA	Online Module/ eLearning	All Staff	6/13/25	6/30/25
Medical Record Documentation	Area of High Risk – Documentation	Online Module/ eLearning	Clinical Staff, Providers	6/13/25	6/30/25
Risk Management Education	General Risk Management	In-Person / eLearning	All Staff	9/24/25	10/1024
NHO Training – RiskQual Entry & Reporting Guide	Safety Event Reporting	In-Person/ Orientation Manual	New Hires / Clinical Staff	4/9/25	5/9/25
Safety Orientation	Foundational Risk Concepts	Online Module/ eLearning	All Staff (New & Existing)	4/9/25	5/9/25
Just Culture	Culture of Safety	Online / In-Person	All Staff	4/9/25	5/9/25
Room of Horrors: Spot the Risk	Hazard Recognition / Environmental Safety	Online Module/ eLearning	Clinical & Ancillary Staff	4/9/25	5/9/25
Good Catch Award	Event Reporting & Recognition	Online Module/ eLearning	All Staff	4/9/25	5/9/25

Risk Management 8 Domains	
Domains	Definition
Operational	Relate to those risks resulting from inadequate or failed internal processes, people, or systems that affect business operations. Included are risks related to adverse event management, credentialing and staffing, documentation, chain of command, and deviation from practice
Clinical and Patient Safety	Include failure to follow the evidence-based practice, medication errors; hospital acquired conditions (HAC), serious safety events (SSE), and others.
Strategic	Risks associated with the focus and direction of the organization, such as brand, reputation, competition, failure to adapt to changing times, health reform, or customer priorities.



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Financial	Decisions that affect the economic sustainability of the organization, access to capital, or external financial ratings through business relationships or the timing and recognition of revenue and expenses make up this domain.
Human Capital	Refers to the organization’s workforce. Risks associated with employee selection, retention, turnover, staffing, absenteeism, on-the-job work-related injuries (workers' compensation), work schedules and fatigue, productivity, and indemnity.
Legal & Regulatory	Risk within this domain incorporates the failure to identify, manage, and monitor legal, regulatory, and statutory mandates on a local, state, and federal level. Such risks are generally associated with fraud and abuse, licensure, accreditation, product liability, management liability, Centers for Medicare and Medicaid Services (CMS) Conditions of Participation (CoPs) and Conditions for Coverage (CfC), as well as issues related to intellectual property.
Technology	The use of technology for clinical diagnosis and treatment, training and education, information storage and retrieval, and asset preservation.
Hazard	Related to natural exposure and business interruption. Specific risks can also include facility management, plant age, parking (lighting, location, and security), valuables, construction/renovation, earthquakes, windstorms, tornadoes, floods, fires.

III. SCOPE

All Community Health Centers staff.

IV. AUTHORITY

- V.** The Chief Medical Officer (CMO) is responsible for the direct oversight of the CHC Risk Management Program. The CMO is vested with authority and responsibility from the HCD Board, FQHC Board, and HCD Executive Administration that is necessary to carry out the functions and activities of the CHC Program. The Director of Corporate Risk Management (DCRM) provides leadership and has a broad responsibility for the administrative and operational oversight, development and implementation of strategies for risk management and performance improvement. This position serves as leader and collaborates with the CMO, Senior Leadership team, and the Senior Risk and Risk Professionals on strategic planning, goal setting, department evaluations, and the implementation of strategic initiatives for the respective departments. The Senior Risk and Risk Professionals collaborate with the CMO, DCRM, and business unit leadership. The Senior Risk and Risk Professionals provide guidance and direction in developing a culture of safety and risk mitigation strategies and identifying opportunities for system improvement. These positions develop and maintain systems within their business unit(s) to detect, monitor, prevent, organize, measure, investigate, report, and manage risk events, incident reports, and other indicators of potential harm. These positions promote a just and reporting culture for sustainable system improvements.

VI. RESPONSIBILITY



Health Care District

OF PALM BEACH COUNTY
WE CARE FOR ALL

The CHC Risk Management Program encompasses the collaboration of the board, medical staff, administration, professionals, technical, support and ancillary services.

- a) Health Care District Quality, Patient Safety, and Compliance Board & FQHC Board of Directors**
 - a. Provides resources and support systems for risk management functions related to the eight domains of enterprise risk management.
 - b. Receives reports on the findings, actions, and results of the CHC Program activities.
 - c. Reviews the results of the annual risk assessment/evaluation and the effectiveness of the CHC risk management Program.
 - d. Ensures that effective and efficient risk processes are in place and executed effectively.
 - e. Reviews and approves the Annual CHC Risk Management Plan.
- b) Health Care District Executive Administration**
 - a. HCD's Executive Team (Chief Executive Officer, Chief Risk Officer, Chief Medical Officer, Chief Operating Officer, Chief Nursing Officer, Chief Financial Officer, General Counsel, Chief Human Resources Officer) are responsible for providing eligible staff to support the proper operation of the CHC Risk Management Program.
 - b. Executive Administration will participate in risk assessment and prioritization activities.
 - c. Approve CHC risk management strategies, design, and implementation for the organization.
- c) Medical Staff**
 - a. The Medical Staff is responsible for their expertise and the clinical review and evaluation of patient care-related events.
 - b. The Medical Staff participates in the identification and resolution of problems affecting the delivery of quality patient care.
- d) Management / Leadership**
 - a. The department's leaders and managers are responsible for loss control and safety activities within their business unit(s).
 - b. The department's leaders and managers will communicate with the risk management team to ensure organization-wide communication regarding events/incidents.
 - c. Findings from risk management activities shall be used, as appropriate, in departmental educational programs, policy and procedure development, and the evaluation of individual performance, and audits shall be implemented for continuous improvement.
- e) Staff**
- f) All staff are responsible for reporting events with or without injuries, as well as near misses / good catches to HCD's Risk Information Management System (RiskQual).**

VII. ADMINISTRATIVE AND COMMITTEE STRUCTURE AND MECHANISMS FOR COORDINATION

The CHC Risk Management Program is comprised of the CMO, DCRM, and the Senior Risk Professional. The DCRM reports directly to the CMO and the Senior Risk Professional directly report to the DCRM. The risk management team interfaces with administration, staff, medical



providers, and other professionals and has the authority to cross operational lines to meet the goals of the program. The team serves as the primary contact between the organization and other external parties on all matters relative to risk identification, prevention, and control, as well as risk retention and risk transfer. The team oversees the reporting of events to external agencies/organizations, per regulations and contracts, and communicates analysis and feedback of reported risk management and patient safety information to the organization.

a. Operational Linkages

- Risk Management is linked with the following departments through their operations:
 - i. Quality
 - ii. Legal
 - iii. Infection Control
 - iv. Nursing
 - v. Physician leadership
 - vi. Utilization Management
 - vii. Compliance
 - viii. Operations
 - ix. Human Resources
 - x. Patient Relations
 - xi. And ancillary services
- Any incident report submitted that is related to any of the departments mentioned above will be forwarded to them accordingly. Most of the departments above have direct access to the incident reporting system.
- Any identified clinically related incident report of patient/resident care and safety would be directed and or supported by the Senior Risk or Risk Professional to investigate and develop a plan of action in collaboration with appropriate managers/leaders/departments.
- Adverse/Sentinel events will be communicated immediately to the DCRM.
- Lesson learned events will be shared with staff through educational sessions or other activities/meetings.

VIII. PROGRAM EVALUATION

The CHC Risk Management Program will be evaluated annually to determine its effectiveness and to ensure that issues that affect patient/resident care and safety are identified and resolved. This evaluation will include a thorough review of the risk plan for all business units, a summary of issues identified, actions taken, and results of implemented risk reduction strategies.



**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

1. Description: District Clinic Holdings, Inc. Financial Report May 2025

2. Summary:

The May 2025 financial statements for the District Clinic Holdings, Inc. are presented for Board review.

3. Substantive Analysis:

Management has provided the income statements and key statistical information for District Clinic Holdings, Inc. Additional Management discussion and analysis is incorporated into the financial statement presentation.

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

Signed by:

Jessica Cafarelli

CA6A21FF2E09481

Jessica Cafarelli

VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A
Committee Name

N/A
Date Approved



**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

6. Recommendation:

Staff recommends the Board approve the May 2025 District Clinic Holdings, Inc. financial statements.

Approved for Legal sufficiency:

Signed by:

Bernabe Icaza

0CF6F7DB6706434...Bernabe Icaza

SVP & General Counsel

Signed by:

Jessica Cafarelli

CA6A21FF2E09481...Jessica Cafarelli

VP & Chief Financial Officer

Signed by:

Joshua Admetz

2B4224F087814B2...Joshua Admetz, DMD, MPH, MA

AVP & Executive Director of Community Health Centers



MEMO

To: Finance Committee
From: Jessica Cafarelli
VP, Chief Financial Officer
Date: July 23, 2025

Subject: Management Discussion and Analysis as of May 2025 C.L. Brumback Primary Care Clinic Financial Statements.

The May financial statements represent the financial performance through the eighth month of the 2025 fiscal year for the C.L. Brumback Primary Care Clinics. On the Comparative Statement of Net Position, total assets increased \$1.5M. Due from Other Governments increased \$278k primarily as a result of grant accruals. Cash increased \$791k from normal business operations.

On the Statement of Revenues and Expenses, net patient revenue YTD was unfavorable to budget by (\$671k) or (7.1%) primarily due to unanticipated increases in charity care and bad debt classification as well as LIP shortfall. Gross patient revenue YTD was favorable to budget by \$2.9M. Total YTD revenues were unfavorable to budget by (\$2.3M) or (14.1%). YTD grant revenue is unfavorable by (\$1.7M) due to grant accrual timing as well as unanticipated reduction in funding. Several grants that were budgeted were not awarded; this accounts for approximately \$1.1M of the unfavorable variance. At this time, staff does not anticipate additional grants being awarded and recognized this fiscal year. To offset this variance, staff identified opportunities to reduce expenses to remain within budget. Operational expenses before depreciation were favorable to budget by \$5.9M due to timing differences in expenses and staffing. Positive variances YTD in salaries, wages, and benefits were \$4.8M. YTD net margin was a loss of (\$17.6M) compared to the budgeted loss of (\$22.8M) resulting in a favorable variance of \$5.2M or (22.8%). YTD, the District has transferred in \$13.7M to fund clinic operations.

Net patient revenue YTD for the Medical clinics was unfavorable to budget by (\$264k). The Medical clinics YTD gross patient revenue was favorable to budget by \$1.2M. The Medical clinics total YTD revenue was unfavorable to budget by (\$1.9M) due primarily to a decrease in grant revenue. Grant revenue recognition had a negative impact on overall revenue of (\$1.7M). Total operating expenses of \$17.3M were favorable to budget of \$21.0M by \$3.7M or 17.6%. The positive variance is mostly due to salaries, wages, and benefits of \$2.8M, and medical supplies of \$472k. Timing differences in expenses and staffing are driving these favorable YTD variances. YTD net margin was a loss of (\$12.7M) compared to the budgeted loss of (\$15.6M) resulting in a favorable variance of \$3.0M or (18.9%).

Net patient revenue YTD for the Dental clinics was unfavorable to budget by (\$446k). The Dental clinics total YTD gross patient revenue was unfavorable to budget by (\$562k). Total YTD operating expenses of \$3.8M were favorable to budget by \$348k, with timing differences in staffing primarily accounting for this favorable variance. Total YTD net margin was favorable to budget by \$187k or (8.1%).



Net patient revenue YTD for the Behavioral Health clinics was favorable to budget by \$39k. The Behavioral Health clinics total YTD gross patient revenue was favorable to budget by \$2.2M. Total YTD operating expenses of \$2.6M were favorable to budget by \$1.8M, with timing differences in staffing primarily accounting for this favorable variance. Total YTD net margin was favorable to budget by \$2.1M or (42.4%).

District Clinic Holdings, Inc.
Comparative Statement of Net Position

	<u>May 31, 2025</u>	<u>April 30, 2025</u>	<u>Increase (Decrease)</u>
Assets			
Cash and Cash Equivalents	\$ 1,738,667	\$ 948,137	\$ 790,531
Accounts Receivable, net	2,702,615	2,285,810	416,805
Due From Other Governments	3,008,080	2,730,344	277,736
Other Current Assets	441,796	377,984	63,812
Net Investment in Capital Assets	5,359,552	5,326,913	32,639
Right Of Use Assets	8,306,236	8,399,900	(93,664)
Total Assets	<u>\$ 21,556,947</u>	<u>\$ 20,069,088</u>	<u>\$ 1,487,859</u>
Liabilities			
Accounts Payable	412,669	333,562	79,108
Deferred Revenue-	5,835	(56,471)	62,306
Accrued Interest	34,357	34,627	(270)
Other Current Liabilities	3,171,756	2,517,792	653,964
Lease Liability	7,870,466	7,949,556	(79,090)
Non-Current Liabilities	1,287,318	1,140,819	146,498
Total Liabilities	<u>12,782,401</u>	<u>11,919,885</u>	<u>862,516</u>
Deferred Inflows of Resources			
Deferred Inflows	<u>\$ 66,853</u>	<u>\$ 66,853</u>	<u>\$ 0</u>
Net Position			
Net Investment in Capital Assets	5,359,552	5,326,913	32,639
Unrestricted	3,348,141	2,755,437	592,704
Total Net Position	<u>8,707,694</u>	<u>8,082,351</u>	<u>625,343</u>
Total Liabilities, Deferred Inflows of Resources and Net Position	<u>\$ 21,556,947</u>	<u>\$ 20,069,088</u>	<u>\$ 1,487,859</u>

Note: Amounts may not foot due to rounding.

Primary Care Clinics Statement of Revenues and Expenses
For The Eighth Month Ended May 31, 2025

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
33,947	51,288	17,341	33.8%	38,254	4,307	11.3%	IT Service Center	318,106	410,304	92,198	22.5%	320,781	2,675	0.8%
-	-	-	-	15,706	15,706	-	OH Performance Excellence	-	-	-	-	132,083	132,083	-
19,285	22,239	2,954	13.3%	20,925	1,640	7.8%	Corporate Quality	176,482	177,912	1,430	0.8%	138,344	(38,138)	(27.6%)
38,535	57,690	19,155	33.2%	55,663	17,128	30.8%	OH Security Services	421,508	461,520	40,012	8.7%	321,378	(100,130)	(31.2%)
12,174	23,428	11,254	48.0%	17,412	5,238	30.1%	OH Supply Chain	138,039	187,424	49,385	26.3%	140,574	2,535	1.8%
5,610	13,459	7,849	58.3%	12,517	6,907	55.2%	HIM Department	93,011	107,672	14,661	13.6%	100,731	7,720	7.7%
14,188	29,159	14,971	51.3%	21,702	7,514	34.6%	OH Coding	177,837	233,272	55,435	23.8%	174,886	(2,951)	(1.7%)
1,432	2,626	1,194	45.5%	2,238	806	36.0%	OH Reimbursement	7,110	21,008	13,898	66.2%	17,656	10,546	59.7%
9,856	12,405	2,549	20.5%	6,541	(3,315)	(50.7%)	OH Clinical Labor Pool	93,922	99,240	5,318	5.4%	63,285	(30,637)	(48.4%)
21,509	41,818	20,309	48.6%	22,709	1,200	5.3%	District Nursing Admin	244,515	334,544	90,029	26.9%	205,803	(38,712)	(18.8%)
24,109	14,415	(9,694)	(67.2%)	6,064	(18,045)	(297.6%)	District Operations Admin	172,334	115,320	(57,014)	(49.4%)	80,274	(92,060)	(114.7%)
3,061	5,025	1,964	39.1%	4,824	1,763	36.5%	OH Mail Room	28,936	40,200	11,264	28.0%	33,386	4,450	13.3%
1,154	5,774	4,620	80.0%	-	(1,154)	-	OH Patient Experience	9,900	46,192	36,292	78.6%	-	(9,900)	-
3,712	3,852	140	3.6%	-	(3,712)	-	OH External Affairs	41,878	30,816	(11,062)	(35.9%)	-	(41,878)	-
6,595	18,643	12,048	64.6%	-	(6,595)	-	OH Strategic Initiatives and Projects	101,031	149,144	48,113	32.3%	-	(101,031)	-
763,169	1,078,934	315,765	29.3%	806,682	43,513	5.4%	Total Overhead Allocations-	6,800,380	8,631,472	1,831,092	21.2%	6,228,564	(571,816)	(9.2%)
4,369,361	4,975,395	606,035	12.2%	3,928,533	(440,828)	(11.2%)	Total Expenses	31,641,789	39,161,984	7,520,195	19.2%	30,629,951	(1,011,838)	(3.3%)
\$ (2,504,404)	\$ (2,829,044)	\$ 324,640	(11.5%)	\$ (2,524,346)	\$ 19,943	(0.8%)	Net Margin	\$ (17,594,518)	\$ (22,802,399)	\$ 5,207,881	(22.8%)	\$ (16,241,233)	\$ (1,353,285)	8.3%
102,205	31,140	71,065	228.2%	233,306	(131,101)	(56.2%)	Capital Contributions.	240,817	249,120	(8,303)	(3.3%)	766,068	(525,251)	(68.6%)
-	\$ 3,583,333	\$ (3,583,333)	-	-	-	-	Transfer In/(Out)	\$ 13,654,474	\$ 28,666,661	\$ (15,012,187)	(52.4%)	\$ 14,702,849	\$ 1,048,374	7.1%

Clinics Statement of Revenues and Expenses by Month

	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Year to Date
Gross Patient Revenue	\$ 3,463,909	\$ 2,991,655	\$ 3,037,040	\$ 2,812,330	\$ 2,524,048	\$ 3,822,944	\$ 3,684,741	\$ 3,318,653	\$ 25,655,318
Contractual Allowance	1,230,872	846,040	755,447	894,111	891,075	920,787	1,626,691	1,275,048	8,440,070
Charity Care	1,196,335	1,035,483	1,098,512	924,346	865,301	1,309,874	1,246,642	1,110,164	8,786,656
Bad Debt	704,322	429,668	565,031	488,188	523,591	471,481	629,771	439,594	4,251,646
Total Contractuals and Bad Debt	3,131,528	2,311,191	2,418,989	2,306,645	2,279,967	2,702,142	3,503,103	2,824,806	21,478,372
Other Patient Revenue	561,333	561,333	561,333	645,491	585,578	582,372	530,338	570,165	4,597,942
Net Patient Service Revenue	893,713	1,241,797	1,179,383	1,151,175	829,659	1,703,174	711,976	1,064,012	8,774,889
Collection %	25.80%	41.51%	38.83%	40.93%	32.87%	44.55%	19.32%	32.06%	34.20%
Non-Operating Revenues									
Grants	514,544	740,790	372,651	603,899	633,632	696,247	755,771	799,624	5,117,157
Other Revenue	25,544	5,756	33,568	1,088	52,092	34,374	1,480	1,321	155,225
Total Other Revenues	\$ 540,088	\$ 746,545	\$ 406,220	\$ 604,987	\$ 685,724	\$ 730,621	\$ 757,252	\$ 800,945	\$ 5,272,382
Total Non-Operating Revenues	\$ 1,433,801	\$ 1,988,342	\$ 1,585,603	\$ 1,756,162	\$ 1,515,383	\$ 2,433,795	\$ 1,469,227	\$ 1,864,957	\$ 14,047,271
Direct Operating Expenses:									
Salaries and Wages	1,777,415	1,748,215	1,759,915	1,908,502	1,761,205	1,996,481	1,897,695	2,323,248	15,172,676
Benefits	432,027	639,602	585,302	292,556	485,230	490,607	488,708	663,105	4,077,136
Purchased Services	12,929	22,360	30,717	46,042	39,569	48,496	41,537	18,370	260,020
Medical Supplies	68,475	49,343	80,343	55,613	72,325	92,799	77,773	57,451	554,121
Other Supplies	6,167	19,844	22,170	21,433	19,138	57,625	28,898	19,889	195,163
Medical Services	103,925	95,313	64,076	90,149	69,030	26,073	34,091	37,522	520,180
Drugs	61,289	67,731	60,760	55,185	65,626	77,434	98,839	67,669	554,535
Repairs and Maintenance	52,025	41,102	33,724	61,279	44,679	38,410	93,964	15,541	380,723
Lease and Rental	180,498	143,397	61,812	172,355	50,818	146,865	122,214	99,247	977,205
Utilities	3,195	11,841	13,205	12,995	12,645	14,046	10,564	10,350	88,840
Other Expense	44,142	98,523	53,236	80,439	85,523	106,960	67,614	90,287	626,725
Interest Expense	16,511	55,677	35,698	35,432	35,740	34,896	34,051	34,357	282,361
Principal Expenditure	1,606	50,497	-	-	(576)	-	(51,527)	-	-
Insurance	6,635	6,635	6,635	6,635	6,635	6,635	6,635	5,927	52,375
Total Operating Expenses	2,766,839	3,050,082	2,807,592	2,838,615	2,747,587	3,137,328	2,951,056	3,442,962	23,742,060
Net Performance before Depreciation & Overhead Allocations	\$ (1,333,038)	\$ (1,061,740)	\$ (1,221,990)	\$ (1,082,453)	\$ (1,232,204)	\$ (703,532)	\$ (1,481,828)	\$ (1,578,005)	\$ (9,694,790)
Depreciation	87,165	166,932	126,926	115,083	114,805	161,872	163,335	163,230	1,099,348

Clinics Statement of Revenues and Expenses by Month

	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Year to Date
<i>Overhead Allocations:</i>									
OH Risk Management	12,674	10,468	10,570	10,369	10,084	8,910	7,687	4,873	75,635
OH Revenue Cycle	76,173	58,628	87,253	47,507	97,622	77,137	71,533	54,732	570,585
OH Internal Audit	3,844	3,009	2,478	2,016	1,900	2,061	2,017	1,209	18,534
Home Office Facilities	28,469	21,511	16,029	22,161	37,737	23,388	22,650	20,528	192,473
OH Administration	19,054	16,540	14,636	6,306	15,732	17,030	26,166	8,739	124,203
OH Human Resources	122,937	105,519	102,453	103,551	122,808	109,119	109,810	99,341	875,538
Legal	55,244	32,069	26,771	27,544	25,895	28,635	27,958	23,915	248,031
Records	4,254	3,444	4,660	4,784	3,988	4,236	4,126	2,846	32,338
OH Compliance	14,592	15,279	14,663	14,870	13,967	15,055	16,145	12,098	116,669
IT Operations	22,627	43,480	52,077	53,115	49,156	44,499	49,253	41,006	355,213
IT Security	17,676	28,314	3,226	12,874	18,694	16,302	16,146	12,286	125,518
OH Finance	48,235	38,992	47,994	42,960	40,847	49,635	44,966	30,131	343,760
Corporate Communications	16,284	14,653	14,656	14,302	13,614	15,438	17,361	9,548	115,856
OH Information Technology	24,675	20,492	20,150	20,119	18,936	20,927	21,396	8,393	155,088
IT Applications	264,361	84,357	194,313	253,644	178,935	149,146	63,217	238,357	1,426,330
IT Service Center	56,523	38,529	44,993	34,566	35,479	44,753	29,316	33,947	318,106
Corporate Quality	22,066	19,497	21,756	21,542	21,718	23,073	27,545	19,285	176,482
OH Security Services	61,071	62,445	55,853	50,226	66,682	54,508	32,188	38,535	421,508
OH Supply Chain	22,217	24,128	22,354	10,315	7,180	20,441	19,230	12,174	138,039
HIM Department	12,735	11,992	12,324	11,979	12,747	13,590	12,034	5,610	93,011
OH Coding	24,741	23,865	24,168	22,450	21,656	23,763	23,006	14,188	177,837
OH Reimbursement	953	185	530	459	463	501	2,587	1,432	7,110
OH Clinical Labor Pool	13,086	12,292	13,260	11,682	10,264	13,287	10,195	9,856	93,922
District Nursing Admin	29,065	29,316	32,018	31,377	29,556	36,112	35,562	21,509	244,515
District Operations Admin	24,854	16,298	21,158	21,336	20,491	23,029	21,059	24,109	172,334
OH Mail Room	3,566	3,087	3,269	3,651	4,187	4,114	4,001	3,061	28,936
OH Patient Experience	-	-	1,817	1,670	1,673	1,817	1,769	1,154	9,900
OH External Affairs	4,618	7,899	4,927	5,375	3,742	6,058	5,547	3,712	41,878
OH Strategic Initiatives and Projects	-	-	39,695	15,770	16,345	12,061	10,565	6,595	101,031
Total Overhead Allocations	1,006,594	746,288	910,051	878,520	902,098	858,625	735,035	763,169	6,800,380
Total Expenses	3,860,598	3,963,302	3,844,570	3,832,218	3,764,490	4,157,825	3,849,426	4,369,361	31,641,789
Net Margin	\$ (2,426,797)	\$ (1,974,960)	\$ (2,258,967)	\$ (2,076,056)	\$ (2,249,107)	\$ (1,724,029)	\$ (2,380,199)	\$ (2,504,404)	\$ (17,594,518)

Clinics Statement of Revenues and Expenses by Month

	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Year to Date
Capital Contributions.	-	-	-	9,221	28,085	94,980	6,326	102,205	240,817
General Fund Support/Transfer In	-	-	\$7,331,296	-	-	\$6,323,178	-	-	\$13,654,474

Primary Care Clinics - Medical Statement of Revenues and Expenses by Location (YTD)
For The Eighth Month Ended May 31, 2025

	Clinic Administration	Belle Glade Medical Clinic	Delray Medical Clinic	Lantana Medical Clinic	Mangonia Park Medical Clinic	West Palm Beach Medical Clinic	Jupiter Medical Clinic	Lake Worth Medical Clinic	Lewis Center Medical Clinic	West Boca Medical Clinic	St Ann Place Medical Clinic	Mobile Warrior	Mobile Van Scout	Mobile Van Hero	Atlantis Medical Clinic	Port Medical Clinic	Total
Gross Patient Revenue	\$ 7,380	\$ 1,538,974	\$ 1,622,891	\$ 1,667,253	\$ 1,923,246	\$ 2,899,192	\$ 914,862	\$ 1,108,549	\$ 152,730	\$ 523,005	\$ 45,228	\$ 205,296	-	\$ 231,073	\$ 1,977,863	-	\$ 14,817,539
Contractual Allowance	(1,797)	592,063	505,334	434,957	1,002,665	793,099	279,128	349,465	74,140	222,026	13,086	37,650	2	116,065	198,772	(9,639)	4,607,015
Charity Care	609	448,815	480,074	635,899	285,370	976,001	384,993	436,636	33,286	204,251	8,566	109,934	-	53,989	787,461	(1,051)	4,844,833
Bad Debt	1,826	235,375	244,804	635,332	635,321	474,551	82,387	246,747	15,079	12,250	7,914	22,968	40	21,469	(309,489)	8,328	2,334,841
Total Contractual Allowances and Bad Debt	637	1,276,254	1,230,212	1,706,188	1,923,356	2,243,651	746,507	1,032,848	122,905	438,527	29,566	170,551	42	191,463	676,743	(2,362)	11,786,689
Other Patient Revenue	-	319,571	287,846	401,585	143,724	647,514	150,524	176,424	49,272	186,341	11,134	28,493	-	23,403	632,161	-	3,057,990
Net Patient Revenue	6,742	582,290	680,525	362,649	143,614	1,303,055	318,878	252,124	79,497	270,818	26,796	63,238	(42)	63,014	1,933,280	2,362	6,088,840
Collection %	91.36%	37.84%	41.93%	21.75%	7.47%	44.95%	34.86%	22.74%	52.05%	51.78%	59.25%	30.80%	-	27.27%	97.75%	-	41.09%
Grants	744,089	428,281	348,192	274,046	341,885	424,422	175,226	192,121	15,522	95,702	17,759	51,925	-	84,421	549,009	-	3,742,599
Other Revenue	149,619	4,098	-	-	-	-	-	-	-	-	-	-	-	-	-	-	154,717
Total Other Revenues	893,709	432,380	348,192	274,046	341,885	424,422	175,226	192,121	15,522	95,702	17,759	51,925	-	84,421	549,009	-	3,896,317
Total Revenues	\$ 900,451	\$ 1,014,670	\$ 1,028,716	\$ 636,695	\$ 485,499	\$ 1,727,477	\$ 494,104	\$ 444,245	\$ 95,019	\$ 366,520	\$ 44,555	\$ 115,163	\$ (42)	\$ 147,435	\$ 2,482,289	\$ 2,362	\$ 9,985,157
<i>Direct Operational Expenses:</i>																	
Salaries and Wages	2,370,572	1,315,605	953,749	832,059	537,034	1,295,407	534,524	616,766	29,443	314,685	23,926	153,460	-	248,869	1,441,489	-	10,667,589
Benefits	688,796	353,339	310,311	195,212	171,800	307,090	122,818	163,762	-	69,241	2,214	52,078	-	69,369	429,852	-	2,935,886
Purchased Services	118,819	17,586	16,590	7,309	6,564	18,744	8,878	21,058	2,332	15,290	-	-	-	-	6,624	-	239,793
Medical Supplies	43	24,620	45,558	22,184	50,043	62,559	17,726	25,506	5,729	17,394	3,166	1,482	984	169	26,308	-	303,470
Other Supplies	3,615	6,950	9,464	2,373	9,938	5,596	3,547	3,342	1,941	2,541	230	3,948	924	4,322	101,448	-	159,277
Medical Services	-	84,000	87,342	27,848	34,153	65,004	50,765	133,226	3,983	16,617	2,303	-	-	-	34,939	-	920,180
Drugs	-	40,567	89,429	154,853	107,887	135,682	1,292	5,229	222	10,349	8	66	-	171	8,780	-	554,535
Repairs and Maintenance	282,842	5,698	5,278	2,328	4,597	2,951	4,350	1,132	2,549	884	5,489	240	40	6,410	11,701	-	349,079
Lease and Rental	-	61,924	58,931	74,207	59,986	110,850	160	80,778	140	54,750	80	80	40	70	252,895	-	754,892
Utilities	-	15,408	12,112	975	4,847	1,560	7,661	4,306	1,184	4,306	1,000	-	-	-	15,102	-	69,851
Other Expense	50,427	47,914	45,965	47,401	56,924	63,926	17,310	28,954	9,642	12,880	4,496	3,755	62	10,536	50,165	-	450,358
Interest Expense	-	-	47,799	-	21,765	-	5,632	-	9,607	23,669	-	-	-	-	135,141	-	243,615
Insurance	-	2,985	3,088	5,254	174	6,087	1,559	2,761	37	1,209	-	8,905	8,905	8,905	1,226	-	51,055
Total Operating Expenses	3,515,117	1,956,598	1,685,616	1,372,003	1,073,748	2,077,102	774,822	1,101,036	54,884	545,479	38,308	229,263	11,155	348,821	2,515,671	-	17,299,620
Net Performance before Depreciation & Overhead Allocations	(2,614,666)	(941,926)	(656,899)	(735,308)	(588,249)	(349,625)	(280,718)	(656,791)	40,135	(178,959)	6,247	(114,100)	(11,197)	(201,386)	(33,382)	2,362	(7,314,463)
Depreciation	3,473	64,214	25,999	5,721	15,973	16,373	1,411	1,693	667	6,644	667	667	8,333	667	99,069	-	251,571
<i>Overhead Allocations:</i>																	
OH Risk Management	50,941	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	50,941
OH Revenue Cycle	285,293	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	285,293
OH Internal Audit	12,482	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	12,482
Home Office Facilities	155,557	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	155,557
OH Administration	83,653	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	83,653
OH Human Resources	570,354	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	570,354
Legal	167,054	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	167,054
Records	21,780	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	21,780
OH Compliance	78,579	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	78,579
IT Operations	239,244	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	239,244
IT Security	84,540	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	84,540
OH Finance	231,528	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	231,528
Corporate Communications	78,032	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	78,032
OH Information Technology	104,455	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	104,455
IT Applications	886,291	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	886,291
IT Service Center	214,251	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	214,251
Corporate Quality	118,865	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	118,865
OH Security Services	297,974	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	297,974
OH Supply Chain	92,973	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	92,973
HIM Department	62,643	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	62,643
OH Coding	119,779	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	119,779
OH Reimbursement	4,789	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,789
OH Clinical Labor Pool	63,259	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	63,259
District Nursing Admin	164,686	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	164,686
District Operations Admin	116,070	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	116,070
OH Mail Room	19,490	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	19,490
OH Patient Experience	6,668	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6,668
OH External Affairs	28,204	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	28,204
OH Strategic Initiatives and Projects	68,046	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	68,046
Total Overhead Allocations	4,427,480	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,427,480
Total Expenses	7,952,642	2,020,811	1,821,209	1,377,724	1,141,286	2,093,475	848,595	1,197,767	55,550	610,312	38,975	229,929	19,488	349,487	2,893,078	-	22,650,329
Net Margin	\$ (7,052,192)	\$ (1,006,140)	\$ (792,492)	\$ (741,029)	\$ (655,787)	\$ (365,999)	\$ (354,491)	\$ (753,523)	\$ 39,468	\$ (243,792)	\$ 5,580	\$ (114,767)	\$ (19,530)	\$ (202,053)	\$ (410,789)	\$ 2,362	\$ (12,665,172)
Capital Contributions	69,657	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	69,657
Transfer In/(Out)	\$ 8,940,920	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 8,940,920

Primary Care Medical Statement of Revenues and Expenses
For The Eighth Month Ended May 31, 2025

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
22,864	34,544	11,680	33.8%	31,919	9,055	28.4%	IT Service Center	214,251	276,352	62,101	22.5%	267,656	53,405	20.0%
-	-	-	-	13,105	13,105	-	OH Performance Excellence	-	-	-	-	110,209	110,209	-
12,989	14,978	1,989	13.3%	17,460	4,471	25.6%	Corporate Quality	118,865	119,824	959	0.8%	115,433	(3,432)	(3.0%)
27,241	40,782	13,541	33.2%	37,109	9,868	26.6%	OH Security Services	297,974	326,256	28,282	8.7%	214,252	(83,722)	(39.1%)
8,199	15,779	7,580	48.0%	14,528	6,329	43.6%	OH Supply Chain	92,973	126,232	33,259	26.3%	117,294	24,321	20.7%
3,778	9,065	5,287	58.3%	10,444	6,666	63.8%	HIM Department	62,643	72,520	9,877	13.6%	84,049	21,406	25.5%
9,556	19,639	10,083	51.3%	18,108	8,552	47.2%	OH Coding	119,779	157,112	37,333	23.8%	145,923	26,144	17.9%
964	1,769	805	45.5%	1,867	903	48.4%	OH Reimbursement	4,789	14,152	9,363	66.2%	14,731	9,942	67.5%
6,638	8,355	1,717	20.6%	5,458	(1,180)	(21.6%)	OH Clinical Labor Pool	63,259	66,840	3,581	5.4%	52,805	(10,454)	(19.8%)
14,487	28,165	13,678	48.6%	18,948	4,461	23.5%	District Nursing Admin	164,686	225,320	60,634	26.9%	171,720	7,034	4.1%
16,238	9,709	(6,529)	(67.2%)	5,060	(11,178)	(220.9%)	District Operations Admin	116,070	77,672	(38,398)	(49.4%)	66,980	(49,090)	(73.3%)
2,062	3,385	1,323	39.1%	4,025	1,963	48.8%	OH Mail Room	19,490	27,080	7,590	28.0%	27,856	8,366	30.0%
777	3,889	3,112	80.0%	-	(777)	-	OH Patient Experience	6,668	31,112	24,444	78.6%	-	(6,668)	-
2,500	2,595	95	3.7%	-	(2,500)	-	OH External Affairs	28,204	20,760	(7,444)	(35.9%)	-	(28,204)	-
4,442	12,556	8,114	64.6%	-	(4,442)	-	OH Strategic Initiatives and Projects	68,046	100,448	32,402	32.3%	-	(68,046)	-
518,849	710,430	191,581	27.0%	653,444	134,595	20.6%	Total Overhead Allocations-	4,427,480	5,683,440	1,255,960	22.1%	5,066,105	638,625	12.6%
3,120,267	3,486,712	366,445	10.5%	3,250,598	130,331	4.0%	Total Expenses	22,650,329	27,472,388	4,822,059	17.6%	25,431,763	2,781,435	10.9%
\$ (1,898,648)	\$ (1,925,863)	\$ 27,216	(1.4%)	\$ (2,002,443)	\$ 103,796	(5.2%)	Net Margin	\$ (12,665,172)	\$ (15,626,179)	\$ 2,961,007	(18.9%)	\$ (14,392,145)	\$ 1,726,973	(12.0%)
15,396	10,478	4,918	46.9%	166,370	(150,974)	(90.7%)	Capital Contributions.	69,657	83,824	(14,167)	(16.9%)	534,980	(465,322)	(87.0%)
-	\$ 2,333,333	\$ (2,333,333)	-	-	-	-	Transfer In/(Out)	\$ 8,940,920	\$ 18,666,664	\$ (9,725,744)	(52.1%)	\$ 13,474,731	\$ 4,533,811	33.6%

	Dental Clinic Administration	Belle Glade Dental Clinic	Delray Dental Clinic	Lantana Dental Clinic	West Palm Beach Dental Clinic	Atlantis Dental Clinic	Port Dental Clinic	Total
Gross Patient Revenue	-	\$ 1,224,190	\$ 1,937,137	\$ 890,367	\$ 2,569,109	\$ 806,591	\$ 22,757	\$ 7,440,150
Contractual Allowance	-	553,326	576,794	393,943	910,321	34,239	25	2,469,636
Charity Care	-	391,014	891,780	380,360	1,209,730	295,512	22,757	3,191,174
Bad Debt	-	183,173	304,820	201,078	251,801	1,873	95	942,840
Total Contractual Allowances and Bad Debt	-	1,127,513	1,773,383	975,401	2,371,852	331,623	22,877	6,602,649
Other Patient Revenue	-	268,858	325,173	142,757	478,565	204,621	239	1,420,212
Net Patient Revenue	-	365,535	488,926	47,723	675,821	679,589	119	2,257,713
Collection %	-	29.86%	25.24%	5.42%	26.31%	84.25%	0.52%	30.34%
Grants	17,197	111,501	208,464	97,428	311,755	119,831	-	866,177
Other Revenue	1,507	-	-	-	-	-	-	1,507
Total Other Revenues	18,704	111,501	208,464	97,428	311,755	119,831	-	867,684
Total Revenues	\$ 18,704	\$ 477,036	\$ 697,391	\$ 145,151	\$ 987,576	\$ 799,420	\$ 119	\$ 3,125,397
<i>Direct Operational Expenses:</i>								
Salaries and Wages	60,639	306,227	570,226	309,956	879,807	277,987	-	2,404,843
Benefits	16,551	92,951	131,273	85,877	230,910	95,861	-	653,423
Purchased Services	-	7,040	7,270	3,500	931	1,495	-	20,227
Medical Supplies	-	40,725	61,853	25,141	104,408	18,524	-	250,651
Other Supplies	-	7,593	10,794	583	10,939	5,977	-	35,886
Repairs and Maintenance	-	3,735	4,820	5,866	12,266	4,958	-	31,644
Lease and Rental	-	25,605	33,408	29,394	95,675	38,230	-	222,313
Utilities	-	6,341	7,901	975	1,550	2,212	-	18,969
Other Expense	8,300	13,832	25,678	43,863	48,614	10,403	-	150,691
Interest Expense	-	-	18,969	-	-	19,777	-	38,746
Insurance	-	1,280	-	-	-	-	-	1,280
Total Operating Expenses	85,491	505,328	672,192	505,156	1,385,110	475,415	-	3,828,693
Net Performance before Depreciation & Overhead Allocations	(66,786)	(28,292)	(174,801)	(360,005)	(397,534)	324,004	119	(703,296)
Depreciation	-	8,685	20,706	5,243	22,473	34,787	-	91,894
<i>Overhead Allocations:</i>								
OH Risk Management	12,709	-	-	-	-	-	-	12,709
OH Revenue Cycle	228,234	-	-	-	-	-	-	228,234
OH Internal Audit	3,114	-	-	-	-	-	-	3,114
Home Office Facilities	18,458	-	-	-	-	-	-	18,458
OH Administration	20,870	-	-	-	-	-	-	20,870
OH Human Resources	153,722	-	-	-	-	-	-	153,722
Legal	41,678	-	-	-	-	-	-	41,678
Records	5,434	-	-	-	-	-	-	5,434
OH Compliance	19,605	-	-	-	-	-	-	19,605
IT Operations	59,687	-	-	-	-	-	-	59,687
IT Security	21,090	-	-	-	-	-	-	21,090
OH Finance	57,764	-	-	-	-	-	-	57,764
Corporate Communications	19,467	-	-	-	-	-	-	19,467
OH Information Technology	26,059	-	-	-	-	-	-	26,059
IT Applications	248,043	-	-	-	-	-	-	248,043
IT Service Center	53,452	-	-	-	-	-	-	53,452
Corporate Quality	29,655	-	-	-	-	-	-	29,655
OH Security Services	41,178	-	-	-	-	-	-	41,178
OH Supply Chain	23,194	-	-	-	-	-	-	23,194
HIM Department	15,630	-	-	-	-	-	-	15,630
OH Coding	29,882	-	-	-	-	-	-	29,882
OH Reimbursement	1,195	-	-	-	-	-	-	1,195
OH Clinical Labor Pool	15,782	-	-	-	-	-	-	15,782
District Nursing Admin	41,086	-	-	-	-	-	-	41,086
District Operations Admin	28,958	-	-	-	-	-	-	28,958
OH Mail Room	4,862	-	-	-	-	-	-	4,862
OH Patient Experience	1,663	-	-	-	-	-	-	1,663
OH External Affairs	7,037	-	-	-	-	-	-	7,037
OH Strategic Initiatives and Projects	16,976	-	-	-	-	-	-	16,976
Total Overhead Allocations	1,246,484	-	-	-	-	-	-	1,246,484
Total Expenses	1,331,975	514,013	836,390	510,398	1,407,583	550,936	-	5,251,296
Net Margin	\$ (1,313,270)	\$ (36,977)	\$ (239,000)	\$ (365,247)	\$ (420,007)	\$ 248,484	\$ 119	\$ (2,125,899)
Capital Contributions	171,160	-	-	-	-	-	-	171,160
Transfer In/(Out)	\$ 2,314,784	-	34	-	-	-	-	\$ 2,314,784

Primary Care Dental Statement of Revenues and Expenses
For The Eighth Month Ended May 31, 2025

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
3,240	3,737	497	13.3%	3,465	225	6.5%	29,655	29,896	241	0.8%	22,910	(6,745)	(29.4%)
3,765	5,636	1,871	33.2%	18,554	14,789	79.7%	41,178	45,088	3,910	8.7%	107,125	65,947	61.6%
2,046	3,937	1,891	48.0%	2,884	838	29.1%	23,194	31,496	8,302	26.4%	23,280	86	0.4%
943	2,262	1,319	58.3%	2,073	1,130	54.5%	15,630	18,096	2,466	13.6%	16,682	1,052	6.3%
2,384	4,900	2,516	51.3%	3,594	1,210	33.7%	29,882	39,200	9,318	23.8%	28,963	(919)	(3.2%)
241	441	200	45.4%	371	130	35.0%	1,195	3,528	2,333	66.1%	2,925	1,730	59.1%
1,656	2,084	428	20.5%	1,083	(573)	(52.9%)	15,782	16,672	890	5.3%	10,480	(5,302)	(50.6%)
3,614	7,027	3,413	48.6%	3,761	147	3.9%	41,086	56,216	15,130	26.9%	34,083	(7,003)	(20.5%)
4,051	2,422	(1,629)	(67.3%)	1,004	(3,047)	(303.5%)	28,958	19,376	(9,582)	(49.5%)	13,294	(15,664)	(117.8%)
514	844	330	39.1%	799	285	35.7%	4,862	6,752	1,890	28.0%	5,530	668	12.1%
194	970	776	80.0%	-	(194)	-	1,663	7,760	6,097	78.6%	-	(1,663)	-
624	647	23	3.6%	-	(624)	-	7,037	5,176	(1,861)	(36.0%)	-	(7,037)	-
1,108	3,133	2,025	64.6%	-	(1,108)	-	16,976	25,064	8,088	32.3%	-	(16,976)	-
145,861	214,268	68,407	31.9%	153,238	7,377	4.8%	1,246,484	1,714,144	467,660	27.3%	1,162,459	(84,025)	(7.2%)
728,911	762,855	33,944	4.4%	677,934	(50,976)	(7.5%)	5,251,296	6,037,427	786,131	13.0%	5,198,188	(53,108)	(1.0%)
\$ (252,808)	\$ (276,003)	\$ 23,195	(8.4%)	\$ (556,069)	\$ 303,262	(54.5%)	\$ (2,125,899)	\$ (2,313,256)	\$ 187,357	(8.1%)	\$ (2,024,841)	\$ (101,058)	5.0%
86,809	20,662	66,147	320.1%	66,936	19,873	29.7%	171,160	165,296	5,864	3.5%	231,089	(59,929)	(25.9%)
-	\$ 500,000	\$ (500,000)	-	-	-	-	\$ 2,314,784	\$ 4,000,000	\$ (1,685,216)	(42.1%)	\$ 1,400,256	\$ (914,527)	(65.3%)

	Behavioral Health Clinic Administration	Belle Glade Behavioral Health	Delray Behavioral Health	Lantana Behavioral Health	Mangonia Park Behavioral Health	Mangonia Pilot	West Palm Beach Behavioral Health	Lake Worth Behavioral Health	Lewis Center Behavioral Health	St Ann Place Behavioral Health	Mobile Warrior Behavioral Health	Mobile 3 Hero Behavioral Health	Atlantis Behavioral Health	Co-Responder Unit	Total
Gross Patient Revenue	-	\$4,377	\$960,626	\$3,895	\$1,770,632	-	\$8,644	\$270	\$593,022	-	\$768	\$565	\$54,831	-	\$3,397,630
Contractual Allowance	-	420	386,106	16,994	704,495	-	23,497	45	227,476	-	968	(114)	4,534	-	1,364,419
Charity Care	-	1,170	252,423	213	311,340	-	1,814	-	176,432	-	10	40	7,206	-	750,648
Bad Debt	-	(674)	219,459	30,212	612,737	-	24,901	195	91,631	-	7	50	(4,552)	-	973,965
Total Contractual Allowances and Bad Debt	-	917	857,998	47,419	1,628,572	-	50,212	239	495,538	-	985	(24)	7,187	-	3,089,034
Other Patient Revenue	-	-	55,943	-	33,736	-	-	-	30,061	-	-	-	-	-	119,740
Net Patient Revenue	-	3,461	158,581	(43,524)	175,795	-	(41,568)	30	127,544	-	(217)	590	47,644	-	428,336
Collection %	-	79.06%	16.51%	(1,117.34%)	9.93%	-	(480.90%)	11.19%	21.51%	-	(28.22%)	104.33%	86.89%	-	12.61%
Ad Valorem Taxes	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Intergovernmental Revenue	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Grants	-	-	66,441	13,527	125,698	113,572	-	3,456	48,919	16,170	9,958	11,470	60,942	38,228	508,381
Interest Earnings	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Unrealized Gain/(Loss) On Investments	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other Financial Assistance	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other Revenue	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Other Revenues	-	-	66,441	13,527	125,698	113,572	-	3,456	48,919	16,170	9,958	11,470	60,942	38,228	508,381
Total Revenues	-	\$ 3,461	\$ 225,022	\$ (29,997)	\$ 301,493	\$ 113,572	\$ (41,568)	\$ 3,486	\$ 176,463	\$ 16,170	\$ 9,741	\$ 12,060	\$ 108,586	\$ 38,228	\$ 936,717
<i>Direct Operational Expenses:</i>															
Salaries and Wages	-	-	237,380	131,456	537,358	484,037	-	32,823	179,485	79,609	28,760	52,616	201,179	135,543	2,100,245
Benefits	-	-	23,904	22,982	148,589	112,495	-	9,824	49,924	19,699	5,331	16,199	45,745	33,137	487,828
Other Expense	-	-	-	-	-	8,563	-	-	-	94	-	19	17,000	-	25,676
Total Operating Expenses	-	-	261,283	154,438	685,946	605,095	-	42,647	229,408	99,403	34,090	68,834	263,924	168,680	2,613,748
Net Performance before Depreciation & Overhead Allocations	-	3,461	(36,261)	(184,434)	(384,453)	(491,523)	(41,568)	(39,160)	(52,945)	(83,233)	(24,349)	(56,774)	(155,338)	(130,452)	(1,677,031)
Depreciation	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<i>Overhead Allocations:</i>															
OH Risk Management	-	-	-	-	-	11,985	-	-	-	-	-	-	-	-	11,985
OH Revenue Cycle	-	-	-	-	-	57,058	-	-	-	-	-	-	-	-	57,058
OH Internal Audit	-	-	-	-	-	2,938	-	-	-	-	-	-	-	-	2,938
Home Office Facilities	-	-	-	-	-	18,458	-	-	-	-	-	-	-	-	18,458
OH Administration	-	-	-	-	-	19,680	-	-	-	-	-	-	-	-	19,680
OH Human Resources	-	-	-	-	-	151,462	-	-	-	-	-	-	-	-	151,462
Legal	-	-	-	-	-	39,299	-	-	-	-	-	-	-	-	39,299
Records	-	-	-	-	-	5,124	-	-	-	-	-	-	-	-	5,124
OH Compliance	-	-	-	-	-	18,485	-	-	-	-	-	-	-	-	18,485
IT Operations	-	-	-	-	-	56,282	-	-	-	-	-	-	-	-	56,282
IT Security	-	-	-	-	-	19,888	-	-	-	-	-	-	-	-	19,888
OH Finance	-	-	-	-	-	54,468	-	-	-	-	-	-	-	-	54,468
Corporate Communications	-	-	-	-	-	18,357	-	-	-	-	-	-	-	-	18,357
OH Information Technology	-	-	-	-	-	24,574	-	-	-	-	-	-	-	-	24,574
IT Applications	-	-	-	-	-	291,996	-	-	-	-	-	-	-	-	291,996
IT Service Center	-	-	-	-	-	50,403	-	-	-	-	-	-	-	-	50,403
Corporate Quality	-	-	-	-	-	27,962	-	-	-	-	-	-	-	-	27,962
OH Security Services	-	-	-	-	-	82,356	-	-	-	-	-	-	-	-	82,356
OH Supply Chain	-	-	-	-	-	21,872	-	-	-	-	-	-	-	-	21,872
HIM Department	-	-	-	-	-	14,738	-	-	-	-	-	-	-	-	14,738
OH Coding	-	-	-	-	-	28,176	-	-	-	-	-	-	-	-	28,176
OH Reimbursement	-	-	-	-	-	1,126	-	-	-	-	-	-	-	-	1,126
OH Clinical Labor Pool	-	-	-	-	-	14,881	-	-	-	-	-	-	-	-	14,881
District Nursing Admin	-	-	-	-	-	38,743	-	-	-	-	-	-	-	-	38,743
District Operations Admin	-	-	-	-	-	27,306	-	-	-	-	-	-	-	-	27,306
OH Mail Room	-	-	-	-	-	4,584	-	-	-	-	-	-	-	-	4,584
OH Patient Experience	-	-	-	-	-	1,569	-	-	-	-	-	-	-	-	1,569
OH External Affairs	-	-	-	-	-	6,637	-	-	-	-	-	-	-	-	6,637
OH Strategic Initiatives and Projects	-	-	-	-	-	16,009	-	-	-	-	-	-	-	-	16,009
Total Overhead Allocations	-	-	-	-	-	1,126,416	-	-	-	-	-	-	-	-	1,126,416
Total Expenses	-	-	261,283	154,438	685,946	1,731,511	-	42,647	229,408	99,403	34,090	68,834	263,924	168,680	3,740,164
Net Margin	-	\$ 3,461	\$(36,261)	\$(184,434)	\$(384,453)	\$(1,617,939)	\$(41,568)	\$(39,160)	\$(52,945)	\$(83,233)	\$(24,349)	\$(56,774)	\$(155,338)	\$(130,452)	\$(2,803,447)
Capital	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
General Fund Support/Transfer In	\$2,398,771	-	-	-	-	-	-	-	-	-	-	-	-	-	-

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
\$ 461,062	\$ 146,099	\$ 314,963	215.6%	\$ 257,299	\$ 203,762	79.2%	Gross Patient Revenue	\$ 3,397,630	\$ 1,168,788	\$ 2,228,842	190.7%	\$ 1,223,782	\$ 2,173,847	177.6%
171,106	53,458	117,648	220.1%	110,911	60,195	54.3%	Contractual Allowance	1,364,419	427,661	936,759	219.0%	476,692	887,727	186.2%
115,384	19,548	95,836	490.3%	54,732	60,651	110.8%	Charity Care	750,649	156,380	594,269	380.0%	279,800	470,849	168.3%
124,466	26,064	98,402	377.5%	59,961	64,506	107.6%	Bad Debt	973,965	208,515	765,451	367.1%	308,180	665,785	216.0%
410,956	99,069	311,886	314.8%	225,604	185,352	82.2%	Total Contractuals and Bad Debt	3,089,034	792,555	2,296,478	289.8%	1,064,672	2,024,361	190.1%
15,196	1,622	13,574	836.9%	2,471	12,725	515.0%	Other Patient Revenue	119,740	12,972	106,768	823.1%	16,642	103,098	619.5%
65,302	48,651	16,651	34.2%	34,166	31,136	91.1%	Net Patient Service Revenue	428,336	389,205	39,131	10.1%	175,752	252,583	143.7%
14.16%	33.30%			13.28%			Collection %	12.61%	33.30%		14.36%			
101,933	50,000	51,933	103.9%	-	101,933	-	Grants	508,381	400,000	108,381	27.1%	-	508,381	-
\$ 167,235	\$ 98,651	\$ 68,584	69.5%	\$ 34,166	\$ 133,068	389.5%	Total Revenues	\$ 936,717	\$ 789,205	\$ 147,512	18.7%	\$ 175,752	\$ 760,964	433.0%
							Direct Operating Expenses:							
321,859	429,248	107,388	25.0%	-	(321,859)	-	Salaries and Wages	2,100,245	3,305,642	1,205,398	36.5%	-	(2,100,245)	-
80,401	126,553	46,152	36.5%	-	(80,401)	-	Benefits	487,828	986,305	498,478	50.5%	-	(487,828)	-
-	62	62	-	-	-	-	Purchased Services	-	495	495	-	-	-	-
-	2,603	2,603	-	-	-	-	Medical Supplies	-	20,824	20,824	-	-	-	-
-	6,836	6,836	-	-	-	-	Other Supplies	-	54,687	54,687	-	-	-	-
-	4,754	4,754	-	-	-	-	Drugs	-	38,032	38,032	-	-	-	-
19,464	1,537	(17,927)	(1,166.4%)	-	(19,464)	-	Other Expense	25,676	12,296	(13,380)	(108.8%)	-	(25,676)	-
421,724	571,592	149,868	26.2%	-	(421,724)	-	Total Operating Expenses	2,613,748	4,418,281	1,804,533	40.8%	-	(2,613,748)	-
\$ (254,489)	\$ (472,942)	\$ 218,452	(46.2%)	\$ 34,166	\$ (288,655)	(844.9%)	Net Performance before Depreciation & Overhead Allocations	\$ (1,677,031)	\$ (3,629,076)	\$ 1,952,045	(53.8%)	\$ 175,752	\$ (1,852,784)	(1,054.2%)
							Overhead Allocations:							
772	2,217	1,445	65.2%	-	(772)	-	OH Risk Management	11,985	17,736	5,751	32.4%	-	(11,985)	-
5,473	8,983	3,510	39.1%	-	(5,473)	-	OH Revenue Cycle	57,058	71,864	14,806	20.6%	-	(57,058)	-
192	590	398	67.5%	-	(192)	-	OH Internal Audit	2,938	4,720	1,782	37.8%	-	(2,938)	-
1,969	2,246	277	12.3%	-	(1,969)	-	Home Office Facilities	18,458	17,968	(490)	(2.7%)	-	(18,458)	-
1,385	2,398	1,013	42.2%	-	(1,385)	-	OH Administration	19,680	19,184	(496)	(2.6%)	-	(19,680)	-
17,185	22,545	5,360	23.8%	-	(17,185)	-	OH Human Resources	151,462	180,360	28,898	16.0%	-	(151,462)	-
3,789	6,780	2,991	44.1%	-	(3,789)	-	Legal	39,299	54,240	14,941	27.5%	-	(39,299)	-
451	817	366	44.8%	-	(451)	-	Records	5,124	6,536	1,412	21.6%	-	(5,124)	-
1,917	2,748	831	30.2%	-	(1,917)	-	OH Compliance	18,485	21,984	3,499	15.9%	-	(18,485)	-
6,497	11,348	4,851	42.7%	-	(6,497)	-	IT Operations	56,282	90,784	34,502	38.0%	-	(56,282)	-
1,947	3,940	1,993	50.6%	-	(1,947)	-	IT Security	19,888	31,520	11,632	36.9%	-	(19,888)	-
4,774	7,555	2,781	36.8%	-	(4,774)	-	OH Finance	54,468	60,440	5,972	9.9%	-	(54,468)	-
1,513	3,297	1,784	54.1%	-	(1,513)	-	Corporate Communications	18,357	26,376	8,019	30.4%	-	(18,357)	-
1,330	4,486	3,156	70.4%	-	(1,330)	-	OH Information Technology	24,574	35,888	11,314	31.5%	-	(24,574)	-
16,917	24,333	7,416	30.5%	-	(16,917)	-	IT Applications	291,996	194,664	(97,332)	(50.0%)	-	(291,996)	-
5,379	8,126	2,747	33.8%	-	(5,379)	-	IT Service Center	50,403	65,008	14,605	22.5%	-	(50,403)	-
3,056	3,524	468	13.3%	-	(3,056)	-	Corporate Quality	27,962	28,192	230	0.8%	-	(27,962)	-
7,529	11,272	3,743	33.2%	-	(7,529)	-	OH Security Services	82,356	90,176	7,820	8.7%	-	(82,356)	-
1,929	3,712	1,783	48.0%	-	(1,929)	-	OH Supply Chain	21,872	29,696	7,824	26.3%	-	(21,872)	-
889	2,132	1,243	58.3%	-	(889)	-	HIM Department	14,738	17,056	2,318	13.6%	-	(14,738)	-
2,248	4,620	2,372	51.3%	-	(2,248)	-	OH Coding	28,176	36,960	8,784	23.8%	-	(28,176)	-
227	416	189	45.4%	-	(227)	-	OH Reimbursement	1,126	3,328	2,202	66.2%	-	(1,126)	-
1,562	1,966	404	20.5%	-	(1,562)	-	OH Clinical Labor Pool	14,881	15,728	847	5.4%	-	(14,881)	-
3,408	6,626	3,218	48.6%	-	(3,408)	-	District Nursing Admin	38,743	53,008	14,265	26.9%	-	(38,743)	-
3,820	2,284	(1,536)	(67.3%)	-	(3,820)	-	District Operations Admin	27,306	18,272	(9,034)	(49.4%)	-	(27,306)	-

Primary Care Behavioral Health Statement of Revenues and Expenses
 For The Eighth Month Ended May 31, 2025

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
485	796	311	39.1%	-	(485)	-	4,584	6,368	1,784	28.0%	-	(4,584)	-
183	915	732	80.0%	-	(183)	-	1,569	7,320	5,751	78.6%	-	(1,569)	-
588	610	22	3.6%	-	(588)	-	6,637	4,880	(1,757)	(36.0%)	-	(6,637)	-
1,045	2,954	1,909	64.6%	-	(1,045)	-	16,009	23,632	7,623	32.3%	-	(16,009)	-
98,459	154,236	55,777	36.2%	-	(98,459)	-	1,126,416	1,233,888	107,472	8.7%	-	(1,126,416)	-
520,183	725,828	205,645	28.3%	-	(520,183)	-	3,740,164	5,652,169	1,912,005	33.8%	-	(3,740,164)	-
\$ (352,948)	\$ (627,178)	\$ 274,229	(43.7%)	\$ 34,166	\$ (387,114)	(1,133.0%)	\$ (2,803,447)	\$ (4,862,964)	\$ 2,059,517	(42.4%)	\$ 175,752	\$ (2,979,200)	(1,695.1%)
-	\$ 750,000	\$ (750,000)	-	-	-	-	\$ 2,398,771	\$ 5,999,997	\$ (3,601,227)	(60.0%)	\$ (172,138)	\$ (2,570,909)	1,493.5%



District Clinic Holdings, Inc.

	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Current Year Total	Current YTD Budget	%Var to Budget	Prior Year Total
Clinic Visits - Adults and Pediatrics																
West Palm Beach	1,551	1,218	1,329	1,460	1,293	1,290	1,358	1,341					10,840	12,696	(14.6%)	12,939
Delray & Women's Health Care	1,056	897	902	1,039	883	770	930	832					7,309	6,450	13.3%	6,497
Belle Glade & Women's Health Care	793	760	802	895	774	876	868	843					6,611	6,542	1.1%	6,822
Jupiter & Women's Health Care	597	500	441	538	580	511	600	549					4,316	4,279	0.9%	4,344
West Boca & Women's Health Care	276	235	255	251	262	260	290	305					2,134	2,707	(21.2%)	2,888
Mangonia Park	677	589	590	705	578	610	608	638					4,995	6,106	(18.2%)	6,023
Lantana (closed Feb 2025)	1,730	1,432	1,548	1,391	438	-	-	-					6,539	6,550	(0.2%)	15,061
Lake Worth & Women's Health Care (closed Feb 2025)	1,268	1,013	1,066	1,108	361	-	-	-					4,816	5,173	(6.9%)	9,190
Atlantis & Womens Health Care (opened Feb 2025)	-	-	-	3	1,153	2,433	2,839	2,464					8,892	12,452	(100.0%)	-
Lewis Center	40	57	76	76	62	71	88	45					515	239	115.5%	297
St Ann Place	68	54	13	56	44	53	39	33					360	116	210.3%	115
Cib Mob 1 Warrior (Mobile Van)	10	-	-	-	-	-	-	-					10	-	100.0%	48
Cib Mob 2 Scout	-	-	-	-	-	-	-	-					-	10	(100.0%)	-
Cib Mob 3 Hero	84	83	84	86	84	67	75	71					634	255	148.6%	212
Portable Medical	96	66	72	121	71	49	73	38					586	458	27.9%	568
Total Clinic Visits	8,246	6,904	7,178	7,729	6,583	6,990	7,768	7,159					58,557	64,033	(8.6%)	65,004
Dental Visits																
West Palm Beach Dental	1053	957	1091	1210	1,097	1,167	1,056	1,245					8,876	9,245	(4.0%)	8,863
Delray Dental	734	654	870	936	840	858	930	636					6,458	5,386	19.9%	5,739
Belle Glade Dental	515	411	454	481	431	535	550	506					3,883	3,952	(1.7%)	3,907
Lantana Dental	661	545	269	759	204	-	-	-					2,438	3,342	(27.0%)	7,102
Atlantis Dental	-	-	-	-	221	655	814	791					2,481	3,805	(34.8%)	-
Portable Dental	-	16	8	11	8	9	-	-					52	125	(58.4%)	97
Total Dental Visits	2,963	2,583	2,692	3,397	2,801	3,224	3,350	3,178					24,188	25,855	(6.4%)	25,708
Total Medical and Dental Visits	11,209	9,487	9,870	11,126	9,384	10,214	11,118	10,337					82,745	89,888	(7.9%)	90,712
Behavioral Health Visits**																
West Palm Beach BH	-	-	-	-	-	-	107	89					196	1,240	(84.2%)	1,969
Delray BH	369	343	426	482	541	569	717	599					4,046	2,702	49.7%	3,807
Lantana BH	3	1	2	10	9	-	-	-					25	-	100.0%	1,750
Atlantis BH	-	-	-	1	12	50	374	486					923	-	100.0%	-
Belle Glade BH	2	-	-	-	-	-	-	13					15	40	(62.5%)	66
Mangonia Park BH	979	922	1,029	1,028	915	972	1,118	952					7,955	10,997	(27.7%)	6,757
Lewis Center BH	250	246	281	248	287	293	422	343					2,370	-	100.0%	-
Lake Worth BH	4	11	8	1	-	-	-	-					24	-	100.0%	1,180
St Ann Place BH	-	-	-	-	-	-	50	38					88	683	(87.1%)	674
West Boca BH	3	1	-	1	-	-	18	-					23	-	100.0%	238
Jupiter BH	-	-	-	-	-	-	-	-					-	-	0.0%	-
Mob 1 Warrior BH	1	-	-	-	1	-	9	10					21	-	100.0%	-
Mob 3 Hero BH	-	-	-	-	-	1	61	45					107	-	100.0%	-
Mobile Van BH	-	2	-	-	-	-	15	19					36	-	100.0%	-
Total Behavioral Health Visits	1,611	1,526	1,746	1,771	1,765	1,885	2,891	2,634					15,829	15,662	1.1%	16,441
GRAND TOTAL	12,820	11,013	11,616	12,897	11,149	12,099	14,009	12,971					98,574	105,550		107,153

**YTD Visits were adjusted to exclude non billable warm hand over(WHC) encounters.



**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

1. Description Nomination of New Community Health Center Board Member

2. Summary:

This agenda item recommends the appointment of Marni Rogalsky to the Community Health Center’s Board.

3. Substantive Analysis:

Marni Rogalsky has submitted an application for consideration for appointment to the Community Health Center’s Board of Directors. The Nomination Committee has approved the applicant and recommends the Community Health Center Board approve the appointment of Marni Rogalsky.

A copy of Mrs. Rogalsky’s application is on file.

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

Signed by:


 CA6A21FF2E09481 Jessica Cafarelli
 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

 N/A
 Committee Name

 N/A
 Date Approved



**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

6. Recommendation:

Nominating Membership Committee recommends the Board approve the appointment of Marni Rogalski to the Community Health Centers Board.

Approved for Legal sufficiency:

Signed by:

0CF6F7DB6706434 Bernabe Icaza
SVP & General Counsel

Signed by:

2B42345967841B2 Joshua Adametz, DMD, MPH, MA
AVP & Executive Director of Community
Health Centers

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025

1. Description: Risk Management Dashboard – Second Quarter 2025 (Q2 2025)

2. Summary:

This agenda item provides the Risk Severity Dashboard and Risk Mitigation Strategies for the second quarter of 2025 (Q2 2025) for the Health Care District of Palm Beach County's Community Health Centers "CHC's".

3. Substantive Analysis:

In Q2 2025, CHC's had a total of 136 events reported and no reported near misses in the Safety Event Reporting System. *Please refer to the details provided below, and the Risk Severity Dashboard attached.*

Risk Severity Volumes/Types:

The top five (5) event categories/subcategories reported are noted below, sorted by volume:

- **Behavior-related events made up 69 reported incidents.** These included the following subcategories: Aggressive, Baker Act and/or Suicide threat/attempt, Conflict with Staff, Suicidal ideations, and other Behavioral issues.
- **EMS/911 Referral related events made up 13 of the reported incidents.** These included the following subcategories: Abnormal labs Chest pain/Palpitations, Hypertension, Hypotension, Seizures, Stroke-like symptoms, Syncopal episode, and Other Conditions.
- **Medical Documentation & Patient Documentation made up 9 of the reported incidents.** These included the following subcategories: Documentation Issue, Medical Record Related, Discrepancy of Personal Information, and Results Posted on Wrong Medical Record.
- **Safety related events made up 8 of the reported incidents.** These included the following subcategories: DCF Abuse Registry
- **Medication Variance related events made up 8 of the reported incidents.** These included the following subcategories: Protocol or Policy not followed, Not documented on MAR, Error in Administering medication, and Vaccine Error.

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025

Risk Severity Scores:

Of the 136 events reported, there were no near misses reported.

- 100% (136) were “No Harm Events.” This type of event is one that occurred but resulted in no harm to an individual.

Risk Mitigation Strategies:

All events were reviewed/evaluated by the Senior Risk Manager of the Community Health Centers. The Senior Risk Manager, along with the Risk Management department and CHC/HCD leadership team, review and discuss all events as well as opportunities for system improvement on a case-by-case basis and during the monthly CHC Risk Management Workgroup. Below are some of the risk mitigation strategies related to the events:

During Q2 2025, the following actions were taken to address reported events and near misses:

- With support from the security department, behavioral issues were effectively de-escalated, and additional measures were put in place to prevent recurrence. The appropriate Baker Act process and procedure was followed for each incident.
- Due to the patient's clinical condition, EMS was promptly contacted, and the patients were transferred to a higher level of care, when necessary, with no harm reported.
- Safety-related events, including those involving the DCF Abuse Registry, were reviewed to ensure timely reporting and coordination with the appropriate authorities.
- Medication variance events were addressed through chart audits and discussions with involved staff. Issues such as failure to follow protocol, lack of MAR documentation, administration errors, and vaccine-related errors were reviewed. Reeducation was provided, and workflow adjustments were considered where needed.
- Medical documentation and patient record events were reviewed to resolve discrepancies in personal information, ensure records were correctly assigned, and address documentation issues.



**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

Signed by:


CA6A21FF2E09481
 Jessica Cafarelli
 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

 N/A
 Committee Name

 N/A
 Date Approved

6. Recommendation:

Staff recommends the Board receive and file this information.

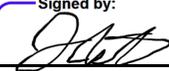
Approved for Legal sufficiency:

Signed by:


0CF6F7DB6706424
 Bernabe Icaza
 SVP & General Counsel

DocuSigned by:


4E403876DEA842E
 Shauniel Brown
 Senior Risk Manager of Community Health Centers

Signed by:


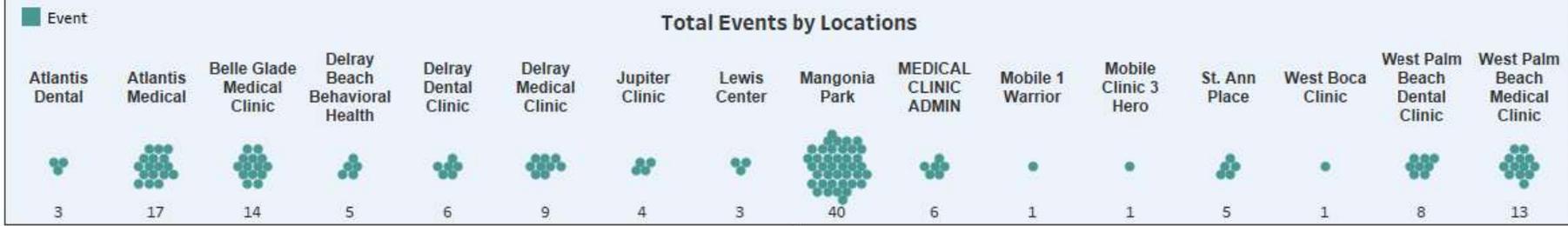
3E42B1587A6182
 Joseph Adametz, DMD, MPH, MA
 AVP & Executive Director of Community Health Centers

Risk Severity Community Health Centers

Event Date
4/1/2025 to 6/30/25

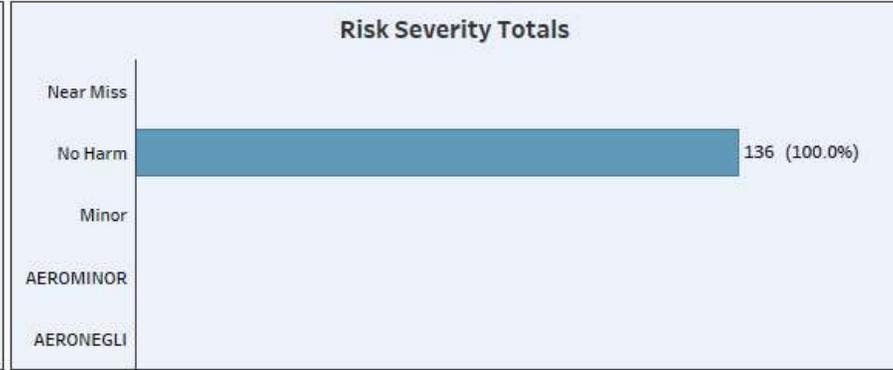
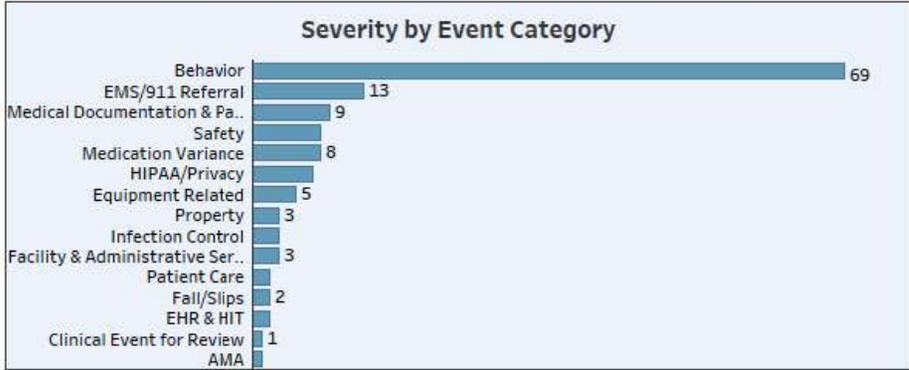


# Total Events	Near Misses	Near Miss %
136	0	0.0%

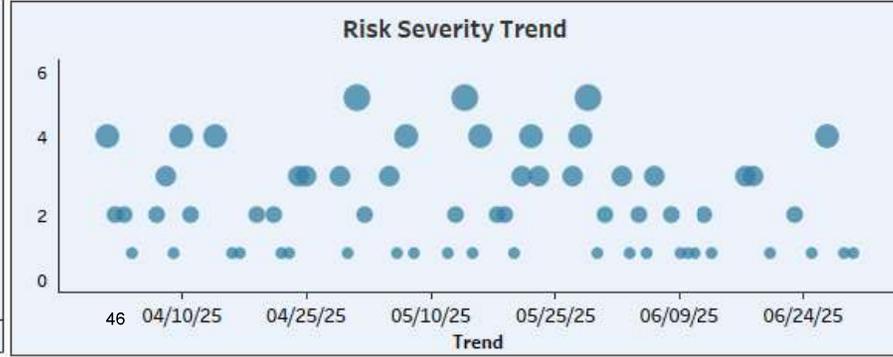
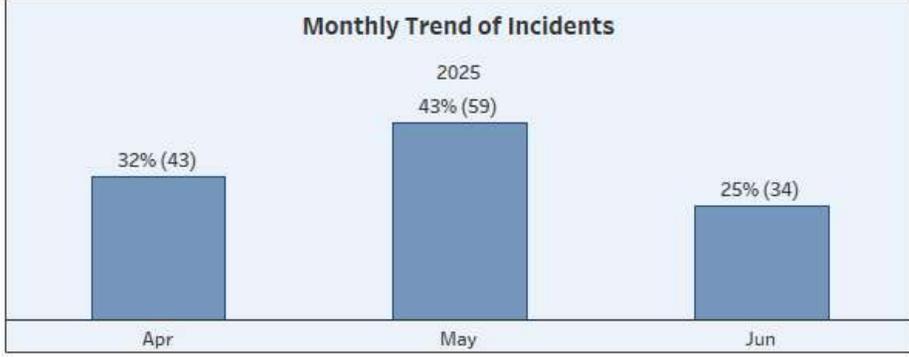


Risk Severity Legend

- Near Miss
- No Harm
- Minor
- Moderate
- Major
- Severe
- Catastrophic
- Death
- Not Specified
- AEROMINOR
- AERONEGLI



Near Miss - did not occur, no harm to patient
No Harm - occurred, no harm to patient
Minor - occurred, no harm to patient but required monitoring
Moderate - occurred, temporary harm, no required treatment
Major - occurred, temporary harm, required treatment
Severe - occurred, permanent patient harm
Catastrophic - permanent neurologic harm or intervention to sustain life
Death - occurred, resulted in death





**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

1. Description: Executive Director Informational Update

2. Summary:

- Board Self Evaluations and Executive Director Evaluations
- Google Reviews

3. Substantive Analysis:

Board Self Evaluations and Executive Director Evaluations: A survey link will be emailed to you at the end of this meeting. Please complete it by the next board meeting on August 27. Survey results will be compiled and shared at the following meeting on September 24.

Google Reviews: Review recent Google reviews that reflect our patients' experiences.

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

Signed by:

 CA6A21FF2E09484 Jessica Cafarelli
 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A
Committee Name

N/A
Date Approved



**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

6. Recommendation:

Staff recommends the Board Receive and File the Executive Director Informational Update.

Approved for Legal sufficiency:

Signed by:

Handwritten signature of Bernabe Icaza in black ink.

0CF6F7DB6706436 Bernabe Icaza

SVP & General Counsel

Signed by:

Handwritten signature of Joshua Adametz in black ink.

2B4234E087844B2 Joshua Adametz, DMD, MPH, MA

AVP & Executive Director of Community
Health Centers



DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025

1. Description: Licensed Independent Practitioner Credentialing and Privileging

2. Summary:

The agenda item represents the licensed independent practitioners recommended for credentialing and privileging by the FQHC Medical Director.

3. Substantive Analysis:

The LIPs 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
Kaloglian Silva	Michelle	DDS	General Dentistry	Initial Credentialing
Alfonso Puentes	Ramiro	MD	Family Medicine	Recredentialing
Andric	Belma	MD	Preventive Medicine	Recredentialing
Clarke-Aaron	Noella	MD	Pediatrics	Recredentialing
Florez	Gloria	MD	Family Medicine	Recredentialing
Lam	Minh-Dai	APRN	Nurse Practitioner	Recredentialing
Zhang	Michael	MD	Preventive Medicine	Recredentialing
Adametz	Joshua	DMD	General Dentistry	Recredentialing
Fernandez Sanchez	Marco	APRN	Nurse Practitioner	Recredentialing
Hernandez Garcia	Jose	MD	Pediatrics	Recredentialing
Jean-Jacques	Fernique	APRN	Nurse Practitioner	Recredentialing
Millien	Eleonore	APRN	Nurse Practitioner	Recredentialing

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025

Normil Smith	Sherloune	MD	Pediatrics	Recredentialing
Philistin	Ketely	APRN	Nurse Practitioner	Recredentialing

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.

Michelle Kaloglian Silva, DDS joined the West Palm Beach Clinnic in 2025 specializing in General Dentistry. She attended the University of Florida College of Dentistry. Dr. Kaloglian Silva has been in practice for seven years and is fluent in Portugese and Spanish.

Ramiro Alfonso Puentes, MD joined the Lantana Clinnic in 2017 specializing in Family Medicine. He attended the Higher Institute of Medical Sciences Camaguey. Dr. Alfonso Puentes has been in practice for nine years and is fluent in Spanish.

Belma Andric, MD joined the West Palm Beach Clinic in 2015 specializing in Public Health and General Preventive Medicine. She attended the University Novisad and also completed her residency at he Palm Beach County Public Health Services. Dr. Andric is certified in Public Health and General Preventive Medicine by the American Board of Preventive Medicine. She has been in practice for nineteen years.

Noella Clarke-Aaron, MD joined the West Palm Beach Clinic in 2013 specializing in Pediatrics. She attended the University of The West Indies and also completed her residency at the New York University Medical Center. Dr. Clarke-Aaron is certified in Pediatrics by the American Board of Pediatrics. She has been in practice for thirty-one years and is fluent in Spanish.

Gloria Florez, MD Joined the West Palm Beach Clinic in 2013 specializing in Family Medicine. She attended Universidad De Caldas and also completed her residency at Wyckoff Heights Medical Center. Dr. Florez is certified in Family Medicine by the American Board of Family Medicine. She has been in practice for twenty-four years and is fluent in Spanish.

Minh-Dai Lam, APRN joined the Jupiter Clinic in 2013 as an Adult Health Nurse Practitioner. He attended the Florida International University and is certified as an Adult Health Nurse

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025

Practitioner by the American Academy of Nurse Practitioners. He has been in practice for twelve years and is fluent in French and Vietnamese.

Michael Zhang, MD Joined the Jupiter Clinic in 2023 specializing in Public Health and General Preventive Medicine. He attended the Case Western Reserve University School of Medicine and also completed his Residency at the Southern Nevada Health District. Dr. Zhang is certified in Public Health and General Preventive Medicine by the American Board of Preventive Medicine.

Joshua Adametz, DMD joined the West Palm Beach Clinic in 2023 specializing in General Dentistry. He attended the A.T. Still University of Health Sciences. Dr. Adametz has been in practice for six years.

Marco Fernandez Sanchez, APRN joined the West Palm Beach Clinic in 2019 as a Family Nurse Practitioner. He attended the Ana G. Mendez University and is certified as a Family Nurse Practitioner by the American Nurses Credentialing Center. He has been in practice for six years and is fluent in Spanish.

Jose Hernandez Garciz, MD Joined the West Palm Beach Clinic in 2023 specializing in Pediatrics. He attended the Pontifica University and also completed his residency at the Bronxcare Health System. Dr. Hernandez Garcia is certified in Pediatrics by the American Board of Pediatrics. He has been in practice for ten years and is fluent in Spanish.

Fernique Jean-Jacques, APRN joined the Lantana Clinic in 2019 as a Family Nurse Practitioner. He attended the Florida Atlantic University and is certified as a Family Nurse Practitioner by the American Nurses Credentialing Center. He has been in practice for eight years and is fluent in French and Creole.

Eleonore Millien, APRN joined the Mobil Clinic in 2023 as a Family Nurse Practitioner. She attended Barry University and is certified as a Family Nurse Practitioner by the American Nurses Credentialing Center. She has been in practice for eleven yeays and is fluent in French and Creole.

Sherloun Normil-Smith, MD joined the Lantana Clinic in 2015 specializing in Pediatrics. She attended the University of Medicine and Dentistry New Jersey and also completed her residency at University of Hawaii. Dr. Normil-Smith has been in practice for nineteen years and is fluent in Creole, French and Spanish.



**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

Ketely Philistin, APRN joined the Belle Glade Clinic in 2017 as a Family Nurse Practitioner. She attended South University and is certified as a Family Nurse Practitioner by the American Nurses Credentialing Center. She has been in practice for twelve years and is fluent in Creole, French and Spanish.

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

Signed by:


CA6A21FF2E09481
 Jessica Cafarelli
 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

 N/A
 Committee Name

 N/A
 Date Approved

6. Recommendation:

Staff recommends the Board approve the Initial Credentialing and privileging of Michelle Kaloglian Silva, DDS, General Dentistry.

Staff recommends the Board approve the Recredentialing and privileging of Ramiro Alfonso Puentes, MD, Family Medicine.

Staff recommends the Board approve the Recredentialing and privileging Belma Andric, MD, Preventive Medicine.

Staff recommends the Board approve the Recredentialing and privileging of Noella Clarke-Aaron, MD, Pediatrics.

Staff recommends the Board approve the Recredentialing and privileging of Gloria Florez, MD, Family Medicine.



**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

Staff recommends the Board approve the Recredentialing and privileging of Minh-Dai Lam, APRN, Nurse Practitioner.

Staff recommends the Board approve the Recredentialing and privileging of Michael Zhang, MD, Preventive Medicine.

Staff recommends the Board approve the Recredentialing and privileging of Joushua Adametz, DMD, General Dentistry.

Staff recommends the Board approve the Recredentialing and privileging of Marco Fernandez Sanchez, APRN, Nurse Practitioner.

Staff recommends the Board approve the Recredentialing and privileging of Jose Hernandez Garcia, MD, Pediatrics.

Staff recommends the Board approve the Recredentialing and privileging of Fernique Jean-Jacques, APRN, Nurse Practitioner.

Staff recommends the Board approve the Recredentialing and privileging of Eleonore Millien, APRN, Nurse Practitioner.

Staff recommends the Board approve the Recredentialing and privileging of Sherloun Normil-Smith, MD, Pediatrics.

Staff recommends the Board approve the Recredentialing and privileging of Ketely Philistin, APRN, Nurse Practitioner.

Approved for Legal sufficiency:

Signed by:


0CF6F7DB6706434
Bernabe Icaza
SVP & General Counsel

DocuSigned by:


FF528E6E1A16461
Dr. Ana M. Ferwerda
FQHC Medical Director

Signed by:


2B4234F087844B2...
Joshua Adametz, DMD, MPH, MA
AVP & Executive Director of Community Health Centers

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025

1. Description: Quality Report

2. Summary:

This agenda item presents the updated Quality Improvement & Quality Updates:

- Quality Council Meeting Minutes – July 2025
- UDS Report – YTD

3. Substantive Analysis:

PATIENT SAFETY & ADVERSE EVENTS

Patient safety and risk, including adverse events, peer review and chart review are brought to the board “under separate cover” on a quarterly basis.

QUALITY ASSURANCE & IMPROVEMENT

On June 11th, we successfully launched our Centering Prenatal Care Program, marking an important step in our commitment to improving maternal and infant health outcomes through innovative, evidence-based models of care. This group based approach shifts prenatal care from the traditional one-on-one model to a more interactive, community driven format that combines clinical assessments with education, peer support, and self-empowerment.

We currently have 10 participants enrolled in the program. The sessions have provided a valuable opportunity to hear directly from expectant parents about their experiences, concerns, and gaps in knowledge. This feedback has been instrumental in guiding our educational focus and strengthening engagement.

Each session combines individual health assessments with facilitated group discussions led by our care team. A recent session on nutrition featured a registered dietitian who provided hands-on instruction using visual aids to demonstrate the sugar and sodium content in common packaged foods. This practical, visual learning approach helped participants better understand how to interpret food labels and make healthier dietary choices. A prior session focused on exercise, offering guidance on safe physical activity during pregnancy and encouraging sustainable lifestyle changes.



**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

What differentiates our program is its targeted emphasis on wellness, with a specific goal of reducing gestational diabetes and related complications—conditions that disproportionately impact many of the patients we serve. Through consistent messaging around nutrition, movement, and stress management, we aim to support long-term health and prevent chronic disease beyond pregnancy.

Preliminary feedback from participants has been overwhelmingly positive. The group format fosters open discussion, shared learning, and a strong sense of community—elements that enhance engagement and help build trust between patients and providers.

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

Signed by:

 CA6A21FF2E0B481
 Jessica Cafarelli
 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

 N/A
 Committee Name

 N/A
 Date Approved



**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

6. Recommendation:

Staff recommends the Board approve the updated Quality Report.

Approved for Legal sufficiency:

Signed by:
Bernabe Icaza
Bernabe Icaza
SVP & General Counsel

DocuSigned by:
Ana Ferwerda
Dr. Ana M. Ferwerda
FQHC Medical Director

Signed by:
[Signature]
Dr. Joseph A. Metz, DMD, MPH, MA
AVP & Executive Director of
FQHC Services



Quality Council Meeting Minutes

Date: July 9, 2025

Time: 11 am-1:30 pm

Attendees: Steven Sadiku – AVP Corporate Quality & Regulatory; Jessica Ramirez – Manager Patient Access Services, Dr. Sandra Warren – Associate Medical Director; Angela Santos – Director of Ops; Dr. Josh Adametz – FQHC Executive Director; Nancy Gonzalez – Director of Clinic Operations; Sakiya Henderson– Dental Clinical Manager, Joe-Ann Reynolds–Patient Experience Coordinator, Manager, ; Alexa Goodwin – Patient Relations Manager; Maria Chamberlin – Assistant Director of Nursing, Bianca Badolati – Executive Assistant; Lisa Hogans – Director of Nursing; Dr. Ana Ferwerda – FQHC Medical Director; Dr. Belma Andric – SVP & Chief Medical Officer; Dr. Courtney Phillips – VP of Behavioral Health; Shauniel Brown – Senior Risk, Melanie Deoroop-Kangoo – Quality Manager ; Ivonne Cohen –Business Intelligence Developer; Regina All- SVP, Chief Nursing Officer

Excused: Dr. Valena Grbic – Medical Director, District Cares; Ingrid Barlett–Quality Manager; Joel Rosales–Director of Trauma Agency & Regulatory; Krysten Kinsey– Manager, Regulatory & Accreditation

Minutes by: Steven Sadiku – AVP Corporate Quality & Regulatory & Ingrid Barlett- Quality Manager;

<u>AGENDA ITEM</u>	<u>DISCUSSION / RECOMMENDATIONS</u>	<u>ACTION ITEMS (AI)</u>	<u>RESPONSIB LE PARTY</u>	<u>DATE</u>
PATIENT SAFETY & ADVERSE EVENTS				
OCCURRENCES	<p><i>Per Compliance, discussion surrounding not recording meetings.</i></p> <p>Report Summary The June2025 Risk Management Tableau dashboard was presented. Volumes were provided for the following clinic areas and types: total reported events, incidents, and</p>			



Health Care District
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good catches. Trends were also presented by volume of reported entries and clinic location. The Risk Report Summary and graphical data were reviewed with the Committee for June 2025. Reports included the risk severity, volume, and category/type for incidents and near misses entered in HCD’s safety event reporting system. Risk mitigation strategies were also shared with the Committee.
 (June 2025 Risk Report Summary presented with graphs.)

UTILIZATION

OPERATIONS

Productivity

Productivity June 2025					
Service Line	Target		Seen		% of Goal
	In Person	Tele	In Person	Tele	
Adult Care	4289		5118		84%
Pediatrics	1301		1480		88%
Primary Residents	480		627		77%
Women’s Health	761		795		96%
Behavioral Health Integration	907		1171		77%
Behavioral Health - Psych	1122		1575		71%

Complete No-Show analysis

Ingrid



Health Care District

OF PALM BEACH COUNTY
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	Psych Residents	N/A		N/A		N/A			
	Mental Health Professional/ Addiction	482		562		86%			
	Dental Health	2203		2216		99%			
	Dental Hygiene	865		913		95%			
	Dental MDI								
	<p><i>(Clinic productivity report with graphs were presented.)</i></p>								
	<p><u>Walk-ins</u> 16% Between Medical and Dental 93% same day walk-ins scheduled by front line staff 7% same-day walk-ins scheduled by the CSC</p>								
	<p><u>Doximity Dialer Usage (Telemedicine) - June 2025</u> Users</p> <ul style="list-style-type: none"> • 50 registered users (100% registration rate) <ul style="list-style-type: none"> ○ 24 active users (7MD/DOs, 5 NP, PA, 12 Care Team) <p>Calls</p>								



Health Care District
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	<ul style="list-style-type: none"> • 848 total calls <ul style="list-style-type: none"> ○ 318 voice calls <ul style="list-style-type: none"> ▪ 293 successful calls (92.1%) success rate ▪ 2 calls escalated to video ○ 530 video calls <ul style="list-style-type: none"> ▪ 388 successful calls (73.2%) success rate ○ 9 secure texts <p>(Report with breakdown by specialty and user)</p>			
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PATIENT RELATIONS

<p>GRIEVANCES, COMPLAINTS & COMPLIMENTS</p>	<p><u>Patient Relations Dashboard – June 2025</u> For June 2025, there were a total of 15 Patient Relations Occurrences that occurred between 5 Centers and Administration. Of the 15 occurrences, there were 6 Grievances and 9 Complaints. The top 5 Categories were Physician Related, Communication, Care & Treatment, Finance, Referrals and Respect Related. There was also a total of 6 compliments received across 3 Centers and Administration. Of the 6 compliments, 5 were patient generated compliments with 1 Thumbs Up.</p>			
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Health Care District
 OF PALM BEACH COUNTY
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	<p><i>(Patient Relations Report & Patient Relations Dashboard with Graphs presented.)</i></p>			
<p>SURVEY RESULTS</p>	<p><u>Patient Satisfaction Survey – June 2025</u> For June 2025 there were 459 Patient Satisfaction Surveys completed. Atlantis Primary had the highest return rate with 83 completed surveys followed by West Palm Beach Primary with 47 completed surveys.</p> <p>Our Net Promoter Score (NPS) was 70 (out of 401 responses) compared to the Phreesia FQHC/CHC/RHC Network at 65.</p> <p>The top 5 and lowest 5 scored-questions were presented for each area.</p> <p>“Best Questions” for in person visits – June 2025:</p> <ul style="list-style-type: none"> • How likely are you to choose telemedicine for your next appointment – 100% (new) • Overall cleanliness of exam room and overall practice – 94% (same) • Professionalism of our staff – 92% (same) • Overall Experience at Today’s visit – 90% (new) 	<p>Review the ability to contact us after hours question on survey</p>	<p>Joe-Ann</p>	



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	<ul style="list-style-type: none"> • Ease of making your appointment – 89% (increase of 1%) <p>“Worst Questions” for in person visits – June 2025:</p> <ul style="list-style-type: none"> • Being informed about any delays during this visit – 17% (increase of 2%) • Your ability to contact us after hours – 15% (decrease of 3%) • Instructions given regarding medication/follow-up care – 11% (new) • Each member of my care team identified themselves and their role in my care – 9% (decrease of 2%) • Appointment available within a reasonable amount of time – 9% (new) <p>Of the surveys received for June, 32% of patients perceived wait time to be between 6 to 15 minutes, 27% of responses were from patients that this was their first visit to the practice. 83% of patients were scheduled and 17% were walk-ins.</p> <p>61% of surveys completed were by females and most patients preferred to be seen on Monday, Tuesday, and Friday. 88% of patients</p>			
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	<p>did not experience any technical difficulties while using telemedicine.</p> <p>For Dental, 69% of patients felt educated on how to better care for your teeth and gums, 73% were satisfied with results of dental treatment, 71% felt staff explained the procedures in a clear and understandable way and 70% felt staff who provided dental care were sensitive to my concerns.</p> <p>82% of responses in June were promoters (decrease of 2%), 9% of responses were neutrals (increase of 1%) and 9% of responses were detractors (increase of 1%).</p> <p>Top promoters, detractors, and patient comments presented by center and service line. (Patient Satisfaction Survey PowerPoint presented.)</p>			
<p>After Hours</p>	<p><u>Afterhours Report – June 2025</u> <i>(Outbound Campaign PowerPoint presented.)</i></p> <p>In June 2025, the Clinic Service Center received 236 after-hours calls. This was a 6% decrease from the previous month (252).</p>			



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	<p>We continue to see our top 3 highest volume in AHCs for Appt requests with 32% of the volume. This is followed by Other, HCD Info/clinical question with 25% and provider paged out with 16% of the volume.</p> <p>Our WPB Location remains at our highest volume health center with 34% of the call volume. Followed by Atlantis with 29% and Delray with 23%</p> <p>AH Paged Outcalls – 38 after-hours calls required a provider to be paged out. 36 of those calls had telephone encounters created in their Epic chart. 16 had the “after Hours” listed as the reason for encounter 2 patients telephone encounters were missed</p>			
<p>NEXT THIRD AVAILABLE</p>	<p><u>Peds Primary</u> Atlantis – 3 days out West Palm – 2 days out</p> <p><u>Adult Primary</u> Atlantis – 11 days out Belle Glade – 3 days out Boca – 7 days out</p>			



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	<p>Delray – 10 days out Jupiter – 5 days out West Palm – 7 days out</p> <p><u>BH</u> Atlantis – 4 days out Delray – 11 days out Lewis Center – 1 days out Mangonia – 2 days out</p> <p><u>Dental</u> Belle Glade – 98/3 (peds) Delray – 150 Atlantis – 152/48 (Peds) West Palm – 70/10 (peds)</p> <p><u>Women’s Health</u> Atlantis – 10 days out Belle Glade – 27 days out Delray – 3 days out Jupiter – 24 days out</p>			
<p>REFERRAL/ CALL CENTER</p>	<p>Referrals – There were a total of 7,549 referral orders placed. This was a 11% increase in volume from the previous month. The average turnaround time for referral processing was 5 days for routine with a goal of 5 days or less. The TAT for urgent referrals was 3 days with a goal of 2 days or less. This increase in TAT for</p>	<p>Add ophthalmology referral trends to the dashboard.</p>	<p>Jessica Ramirez</p>	



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	<p>urgent referrals is due to unsigned notes from providers</p> <p>The Atlantis location has the highest referral volume placed with 24% of the total referral volume, followed by WPB with 16% and Delray with 11% of the volume</p> <p>Dr Noukelak and Lisa Fidler remain is our highest producers of referrals with 7% of the total volume. Followed by Ketely with 6%</p> <p>Our most common payer remains the HCD Voucher with 25% of the referral volume followed by Self pay (no coverage) with 15% and Humana/bcbs with 11%. Very similar to last month</p> <p>Our top referred to specialties this month are Radiology Orders with 27%, followed by Ophthalmology with 7% and our new top referral is OBGYN with 5%.</p> <p><u>Call Center –</u> The call center received 13,591 calls. This was an 21% increase from the previous month.</p>			
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	<p>The abandonment rate for May was 7% with a goal of 10% or less.</p> <p>The service level Was 66% answered within 3 minutes with a goal of 80% or higher.</p> <p>Average hold time was 1m 46s with a goal of 3 min or less</p>			
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QUALITY

QUALITY

MEDICAL	Deferred due to Epic issue updating the data			
BEHAVIORAL HEALTH	<p><u>PHQ9 – June 2025</u> % of patients with PHQ9: 5,059/5,782 =87.5% Unique patients with positive PHQ9 467/8.08%</p> <p><u>SBIRT- June 2025</u> 1,622 unique patients/21,798 = 7.44% The goal is 5%</p>			



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	(Report with graph presented.)			
WOMEN'S HEALTH	<p><u>Early Entry into Prenatal Care June 2025</u> Early Entry into care into the First Trimester is 43% Total population of 491 prenatal patients</p> <p><u>Low Birth Weight June 2025</u> Babies born with a birth weight below normal (under 2,500 grams) 7% --<1500 grams: 0% --1500–2499 grams: 7% --> 2500 grams: 85% Total deliveries/birth weight: 97</p>			
DENTAL	<p><u>Dental Sealants</u> YTD 2025: deferred</p>			
	<p><u>Limited Exams Walk-ins = 316</u></p> <p>June : Average Daily -Atlantis 1 -Belle glade 3 -Delray 7 -West Palm Beach 11</p>			



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<p>NEXT THIRD AVAILABLE</p>	<p><u>Dental</u></p> <p>Belle Glade-</p> <ul style="list-style-type: none"> - Hygiene appointment (adult): 98 days - Hygiene appointment (child): 3 days - Treatment appointment: 98 days <p>Delray-</p> <ul style="list-style-type: none"> - Hygiene appointment (adult): 150 days - Treatment appointment: 38 days <p>Atlantis-</p> <ul style="list-style-type: none"> - Hygiene appointment (adult): 152 days - Hygiene appointment (child): 48 days - Treatment appointment: 27 days <p>West Palm Beach-</p> <ul style="list-style-type: none"> - Hygiene appointment (adult): 70 days - Hygiene appointment (child): 10 days - Treatment appointment (adult): 55 days - Treatment appointment (child): 99 days 			
<p>NURSING</p>	<p><u>Higher Level of Care</u></p>			



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	<p>87 ER referrals / 84 patients were sent to the ER in June. This is 1% of the billable provider visits in the CHCs.</p> <p>The breakdown of referrals is:</p> <ul style="list-style-type: none"> • WH – 16 (18%) (2% of the women’s health visits) • Peds – 22 (25%) (2% of the pediatric visits) • Adult – 47 (54%) (this combines urgent care and emergency medicine referrals) • Transport – 0 • Adult Crisis –2 (3%) • Peds Crisis – 0 <p>ADULT REFERRALS: highest producer this month is Lisa Fidler, APRN Atlantis Walk In 8 (12%) (second month in a row)</p> <p>PEDIATRIC REFERRALS: highest producer this month was Dr. Clarke in WPB with 16 referrals (73%)- Note *Dr. Hernandez in same clinic had 0 referrals and the Atlantis providers combined had 6.</p> <p>Top Diagnosis:</p> <p>ADULT</p> <ul style="list-style-type: none"> • Hypertensive Urgency 5 (11%) <p>PEDS</p>			
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	<ul style="list-style-type: none">• Top 3 diagnosis all had 2 (1%) Vomiting, unspecified vomiting type, unspecified whether nausea present; Fever, unspecified fever cause, Bronchiolitis <p>The charts were reviewed for the 3 patients that received more than one referral for HLC in the month of June and all referrals were appropriate and none were escalated to the Medical Director for review.</p>			
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Meeting Adjourned: 1:20 pm



UDS PROVIDER LEVEL QUALITY MEASURES 2025 NATIONAL QUALITY LEADER METRICS

Load Date
7/11/2025

Filters

		Universe	MET	Not Met	HCD Internal Goal for HRSA	National Average	State Average
Heart Health	Coronary Artery Disease (CAD): Lipid Ther..	4,253	87%		◆ 81%		
	Hypertension	5,847	74%		◆ 80%		
	Ischemic Vascular Disease (IVD)	792	71%		◆ 86%		
	Tobacco use Screening and Cessation Inte..	12,631	94%		◆ 93%		
Diabetes	Adult Weight Screening and Follow Up	16,963	81%		◆ 90%		
	Diabetes: (HbA1c < 9%)	3,150	73%		◆ 67%		
	Diabetes: (HbA1c < 9%) Migrant	304	71%		◆ 67%		
Behavioral Health	Depression Remission	465	41%		◆ 14%		
	Patients Screened for Depression and Follow-Up	14,049	93%		◆ 83%		
	Pts Screened for Depression and F/U (Homeless)	3,256	87%		◆ 83%		
Childhood Measures	Childhood Immunization	443	58%		◆ 60%		
	Dental Sealants	341	94%		◆ 75%		
	Weight Screening and Counseling for children and adolescents	3,153	85%		◆ 90%		
HIV Preven tion..	HIV Screening	15,835	71%		◆ 32%		
Cancer Prevention	Breast Cancer Screening	3,311	56%		◆ 60%		
	Cervical Cancer Screening	8,120	61%		◆ 65%		
	Colorectal Cancer Screening	7,907	39%		◆ 82%		



**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

1. Description: Operations Report – June 2025

2. Summary:

This agenda item is the Operations report providing the Health Center’s Productivity report from June 2025.

3. Substantive Analysis:

In June, the Health Centers had a total of 8,596 unique patients and 12,583 patient visits across all health centers which is a 1% increase in visits over last month, and up 5% from June 2024. 1,297 patients, or 15% of unique patients were new to the Health Centers. 36% of patients were from adult medical, down 2%, 24% from Dental, up 2% and 10% from Pediatrics, down 1% from previous month. In June, Atlantis Health Center had the highest volume of patient visits with 3,086 medical and 575 dental visits followed by the West Palm Beach Health Center with 1,385 medical and 1,088 dental visits and then the Delray Health Center with 1,199 medical and 880 dental visits.

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

Signed by:

 CA6A21FF2E09681 Jessica Cafarelli
 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A
Committee Name

N/A
Date Approved



**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

6. Recommendation:

Staff recommends the Board approve the Operations Report for June 2025.

Approved for Legal sufficiency:

Signed by:

0CF6F7DB6706434... Bernabe Icaza
SVP & General Counsel

DocuSigned by:

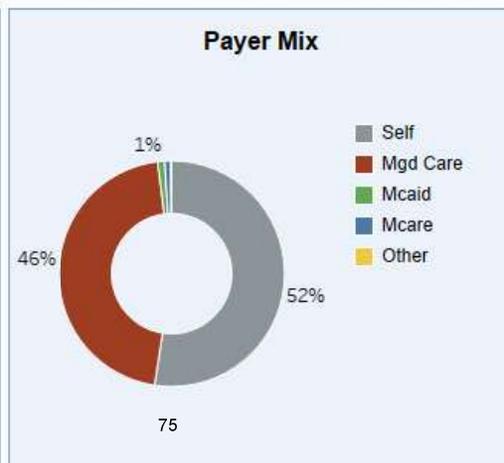
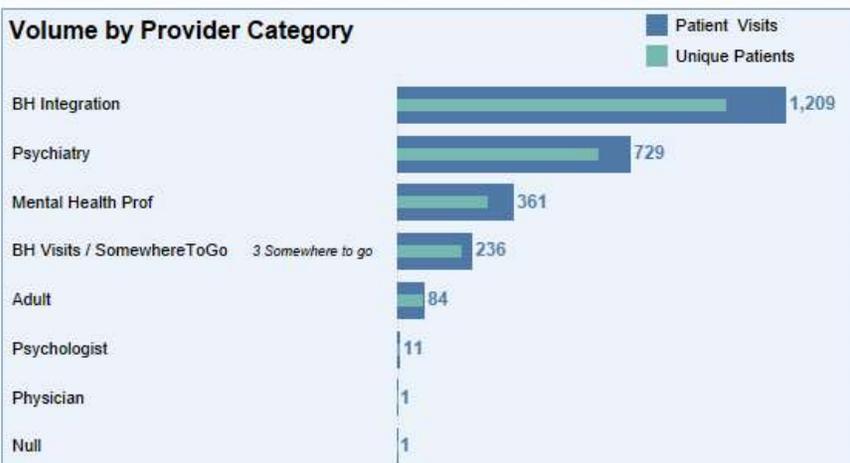
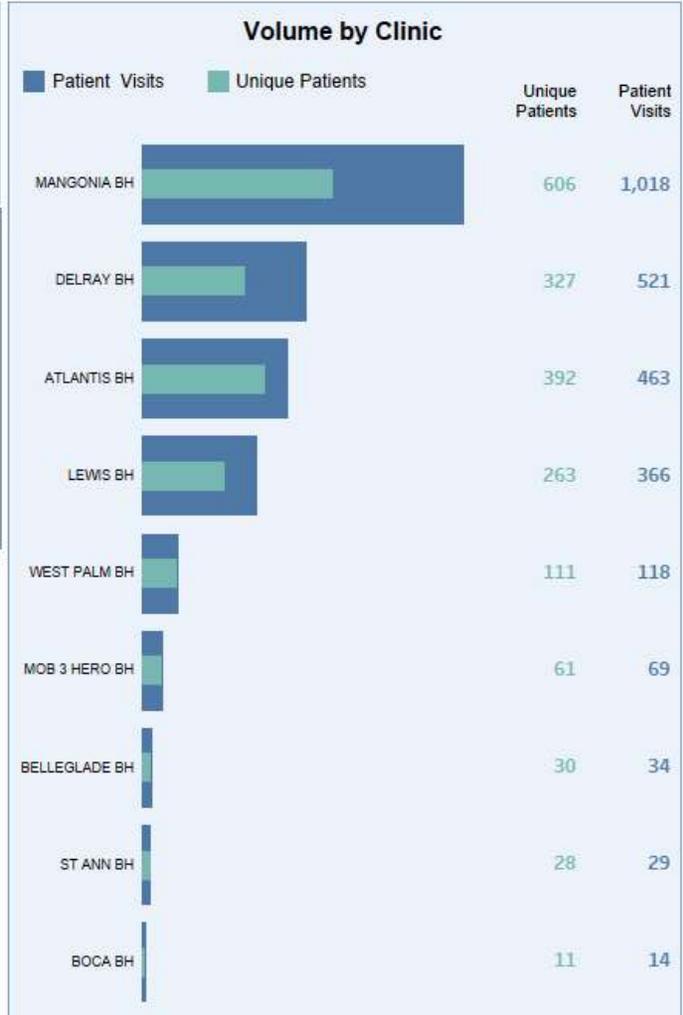
6F31AD3F82334F5... Angela Santos
Director of Specialty Operations

Signed by:

2B234F087244B3 Joshua Admetz, DMD, MPH, MA
AVP & Executive Director of Community Health Centers

Clinic visit types, Trends & Different Service Utilization 6/1/2025 to 6/30/2025

All





**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

1. Description: Patient Relations Dashboard Report

2. Summary:

This agenda item provides the Quarterly Patient Relations Dashboard Q2 2025.

3. Substantive Analysis:

For Quarter 2 2025, there were a total of 36 Patient Relations Occurrences that occurred between 8 Centers and Center Administration. This was a slight increase from the previous quarter where we had 33 Complaints and Grievances. The top category for the quarter was Communication Related issues with 12 occurrences.

Additionally, there were a total of 18 compliments received across 5 Centers and Center Administration.

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval. Reviewed for financial accuracy and compliance with purchasing procedure:

Signed by:

 CA6A21FF2E09481
 Jessica Cafarelli
 VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A
Committee Name

N/A
Date Approved



**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
July 23, 2025**

6. Recommendation:

Staff recommends the Board approve the Quarterly Patient Relations Dashboard for Q2 2025.

Approved for Legal sufficiency:

Signed by:

0CF6F7DB6786424
Bernabe Icaza
SVP & General Counsel

DocuSigned by:

25C1B22931DA490
Alexa Goodwin
Manager, Patient Experience & Creative Services

Signed by:

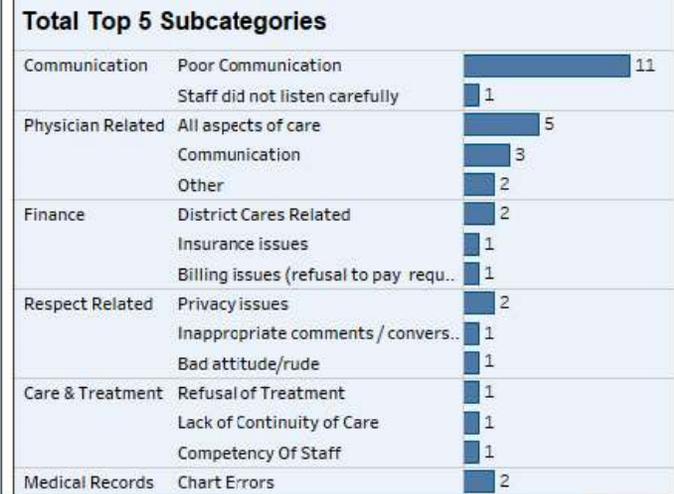
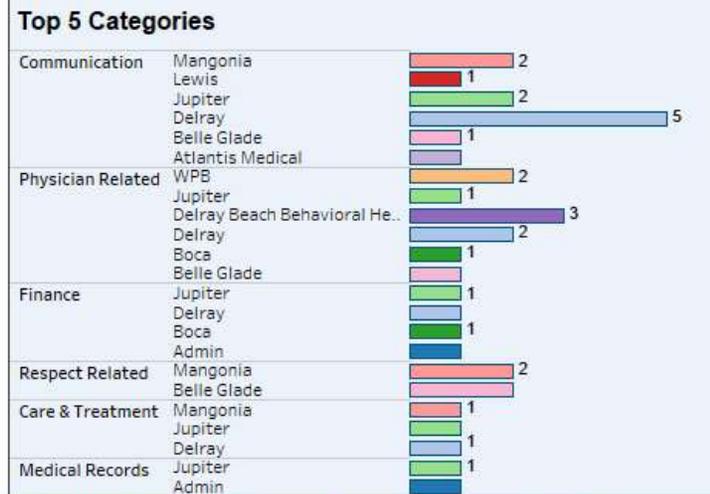
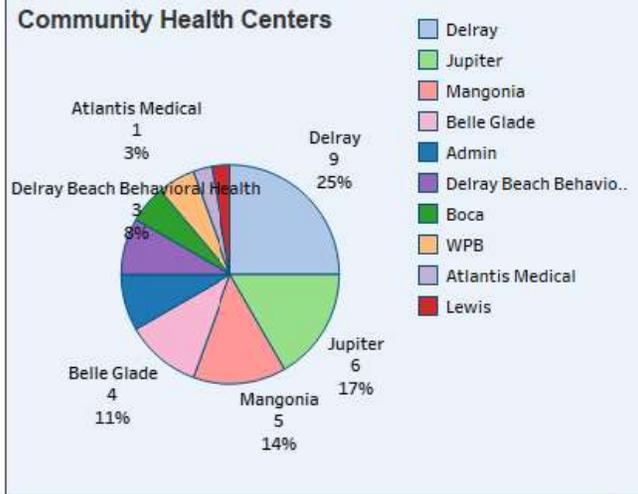
2B4234F087844B2
Joshua Admetz, DMD, MPH, MA
AVP & Executive Director of Community Health Centers

Patient Relations (Grievances, Complaints & Compliments) Community Health Centers - 4/1/2025 to 6/30/2025



2025 Q2

Dept Desc All Provider All **Total Complaints and Grievances 36** Late Entries: 0 Clinic All



Total Compliments 18 Late Entries: 0 **Complaints/Grievances Prev 4 Quarters 123**

