

**District Clinic Holdings, Inc.  
d.b.a. C.L. Brumback Primary Care Clinics  
Board of Directors Meeting  
Summary Minutes  
7/31/2019**

**Present:** James Elder, Chairperson; Mike Smith, Treasurer; John Casey Mullen, Secretary; Cory Neering; Irene Figueroa,

**Excused:** Julia Bullard; Joseph Morel, Vice Chairperson

**Absent:**

**Staff:** Dr. Belma Andric, CMO, VP & Executive Director of Clinical Services; Valerie Shahriari, General Counsel; Mina Bayik, Director of Finance; Terry Megiveron, Director of Business Development; Zulma Almeida Jairala, Director of FQHC Practice Operations; Dr. Tamara-Kay Tibby, Dental Director; Dr. Noelle Stewart, Medical Director; Darcy Davis, CEO; Tamelia Lakraj-Edwards, Quality Manager; Ana Szogi, Data Reporting Analyst; Martha Hyacinthe, Director of Risk

**Minutes Transcribed By:** Jonathan Dominique

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

**Meeting Began at:** 12:53pm

AGENDA ITEM	DISCUSSION	ACTION
<b>1. Call to Order</b>  <b>1A. Roll Call</b>  <b>1B. Affirmation of Mission</b>	<p>Mr. Elder called the meeting to order.</p> <p>Roll call was taken.</p> <p>Mr. Elder read the Affirmation of Mission.</p>	<p><b>The meeting was called to order at 12:53pm</b></p>
<b>2. Agenda Approval</b>  <b>2A. Additions/Deletions/ Substitutions</b>  <b>2B. Motion to Approve Agenda Items</b>	<p>Mr. Elder called for an approval of the meeting agenda.</p> <p>Dr. Andric, Chief Medical Officer added the Clinic's "Poop on Demand" Video to the agenda under Item 3: <i>Awards Introductions and Presentations</i>.</p> <p>The agenda for the July 2019 meeting was approved as sent digitally to board members in the board package.</p>	<p><b>VOTE TAKEN: Mr. Smith made a motion to approve the agenda. The motion was duly seconded by Mr. Neering. A vote was called, and the motion passed unanimously.</b></p>

<p><b>3. Awards, Introductions and Presentations</b></p>	<p>The Poop on Demand Video was presented to the board.</p> <p>Dr. Andric explains that the reason for the video is that our clinics are gaining attention nationally for our approach to colorectal cancer screening. We are constantly asked to share our experiences with this program with FQHC associations and groups. So this video was created to make it easier to share with them. This has garnered a lot of attention from others all over the country.</p> <p>Mr. Smith shares a story about his experience with mail in samples and how this approach definitely helps with issues with the post offices, etc.</p> <p>Dr. Andric points out that the clinics had similar issues, which inspired the new approach of Poop on Demand</p> <p>Dr. Andric also Presented the newest Clinic Team Members:</p> <ul style="list-style-type: none"> <li>• Martha B. Hyacinthe, Director of Corporate Risk Management</li> <li>• Ana Szogi, Data Reporting Analyst</li> <li>• Tamelia Lakraj-Edwards, Quality Manager</li> </ul> <p>Dr. Andric Announced that this is Dr. Tibby's last Board Meeting.</p>	<p><b>No action necessary.</b></p>
<p><b>4. Disclosure of Voting Conflict</b></p>	<p>None.</p>	<p><b>No action necessary.</b></p>
<p><b>5. Public Comment</b></p>	<p>None.</p>	<p><b>No action necessary.</b></p>
<p><b>6. Meeting Minutes</b></p> <p><b>6A Staff Recommends a MOTION TO APPROVE:</b></p>	<p>There were no changes or comments to the minutes dated June 26, 2019.</p>	<p><b>VOTE TAKEN: Mr. Smith made a motion to approve the Board meeting minutes of June 26, 2019 as presented. The motion was duly seconded by Mr. Neering. A vote</b></p>

Joint Board meeting minutes of June 26, 2019		was called, and the motion passed unanimously.
<b>7. Consent Agenda – Motion to Approve Consent Agenda Items</b>		<b>VOTE TAKEN: Mr. Mullen made a motion to approve the consent agenda as presented. The motion was duly seconded by Mr. Butler. A vote was called, and the motion passed unanimously.</b>
<b>7A. ADMINISTRATION</b>		
<b>7A-1. Receive &amp; File:</b> June 2019 Internet Posting of District Public Meeting	The meeting notice was posted.	<b>Receive &amp; File. No further action necessary.</b>
<b>7A-2. Receive &amp; File:</b> Attendance tracking	Attendance tracking was updated.	<b>Receive &amp; File. No further action necessary.</b>
<b>7B. FINANCE</b>		
<b>7B-1. Receive and File:</b> C. L. Brumback Primary Care Clinics Finance Report June 2019.	Finance Report for June 2019 presented and reviewed in the Finance Committee meeting.	<b>Motion referenced above, no further action necessary.</b>
<b>8. REGULAR AGENDA</b>		
<b>8A. ADMINISTRATION</b>		
<b>8A-1. Staff Recommends a MOTION TO APPROVE:</b> New Board Member Appointment	Dr. Andric presented the Membership / Nominating Committee recommendation to the Board to approve Lisa Strickland joining the District Clinic Holdings, Inc. Board of Directors Board.  Ms. Strickland has lived in Florida for 30 years. She loves her family and small dog. She loves water activities like	<b>VOTE TAKEN: Mr. Smith made a motion to approve the appointment of Lisa Strickland to the CLBPC Board of Directors as presented. The motion was duly seconded by Mr. Neering. A vote was called, and the motion passed unanimously.</b>

	<p>fishing and snorkeling. She believes strongly in our Sliding Fee Scale and looks forward to contributing to our Board if nominated. She is familiar with special populations such as homeless individuals.</p>	
<p><b>8B. EXECUTIVE</b></p>		
<p><b>8B-1. Receive &amp; File:</b> Executive Director Informational Update</p>	<p>Dr. Andric provided the following updates to the Board:</p> <p>Belle Glade Clinic:</p> <p>AHCA inspection was on July 24<sup>th</sup> and we hope to see our first patient by mid-August.</p> <p>Terry Megiveron, Director of Business development further explained that inspections were completed which still has some conditional items to be completed and approved. The construction crew is preparing to schedule its final inspection of the clinics with the City of Belle Glade. Signs need to be replaced and, the firewall still needs to be built, and although it's expected to be built with minimum. The hope is to be able to open at least conditionally sometime next month. AHCA is supposed to send a letter soon detailing the remaining items before approval. For the most part the clinics are set up and ready for move-in, it's just a matter of the Go Ahead from the governing parties.</p> <p>Mr. Smith Asked if there will be a grand opening / ribbon cutting.</p> <p>We are anticipating the move to come fairly soon, so we have been handing out "moving soon" cards to patients.</p> <p>Ms. Davis, also pointed out that we are also having a 10 year anniversary celebration for the Lakeside Medical</p>	<p><b>Receive &amp; File. No further action necessary.</b></p>

	<p>Center and this will be used to bring attention to the clinics. The team will be working with Robin Kish, Head of Corporate communications in advertisements for said events to help increase the reach of the clinics to non-patients (Tentatively scheduled for Saturday, October 12<sup>th</sup>, 2019). Mr. Megiveron pointed out that signs are also going up.</p> <p>Delta Dental Community Care Foundation Grant:</p> <p>Dr. Tibby and her team were awarded \$53,470 to purchase a wheelchair lift to better take care of wheelchair-bound patients.</p> <p>Partnership For Aging Community Grant:</p> <p>Dr. Tibby and her team will be awarded \$1,000 to assist patients greater than 65 years old in receiving dental care and an annual membership at the PFA Community August or September general meeting.</p>	
<p><b>8C. OPERATIONS</b></p>		
<p><b>8C-1. Staff Recommends a MOTION TO APPROVE: Operations Reports – June 2019</b></p>	<p>June 2019 productivity overall showed that we had a slight increase in our monthly target percentage in all service-lines. Behavioral Health substance abuse has remained consistent at 86% even with an increase productivity goal of 10 a day.</p> <p>June 2019 productivity by location and by position shows that Boca continues to have the highest Adult percentage monthly target met in addition Lake Worth showed the highest Women’s Health percentage monthly target met; Delray had the highest Mental Health percentage monthly target met; West Palm Beach had the highest pediatric percentage monthly target met; West Palm Beach and</p>	<p><b>VOTE TAKEN: Mr. Mullen made a motion to approve the June Productivity Summary Report as presented. The motion was duly seconded by Mr. Neering. A vote was called, and the motion passed unanimously.</b></p>

	<p>Lantana had the highest dental percentage monthly target met.</p> <p>Adult Care- (6352   95%)  Pediatric Care- (1282   81%)  Mental Health- (1342   86%)  Substance Abuse- (556   82%)  Women’s Health Care- (424   95%)  Dental- (1981   103%)  Dental Hygiene- (431   83%)</p> <p>(Patients Seen   % of Target Met)</p> <p>Starting in September, based information gathered from our strategic planning meetings, we will no longer have evening hours in the clinics (low patient volume). We will continue to operate on Saturdays (9a-1p).</p>	
<p><b>8D. Credentialing and Privileging</b></p>		
<p><b>8D-1. Staff Recommends a MOTION TO APPROVE Licensed Independent Practitioner Credentialing and Privileging – LIP(s)</b></p>	<p>Sarah Gonzalez, Director of Credentialing, presented to the Board the credentialing and privileging recommendations for the month:</p> <p>The LIP(s) listed below satisfactorily completed the credentialing and privileges process and met the standards set forth within the approved Credentialing and Privileging Policy. The credentialing and privileging process ensures that all health center practitioners meet specific criteria and standards of professional qualifications. This criterion includes, but is not limited to:</p> <ul style="list-style-type: none"> <li>• Current licensure, registration or certification</li> <li>• Relevant education, training and experience</li> <li>• Current clinical competence</li> <li>• Health fitness, or ability to perform the requested privileges</li> <li>• Malpractice history (NPDB query)</li> </ul>	<p><b>VOTE TAKEN: Mr. Mullen made a motion to approve the re-credentialing and renewal privileges of the LIP(s) as presented. The motion was duly seconded by Mr. Neering. A vote was called, and the motion passed unanimously.</b></p>

- Immunization and PPD status; and
- Life support training (BLS)

Last Name	First Name	Degree	Specialty	Credentialing
Alfonso Puentes	Ramiro	MD	Family Medicine	Rec credentialing
Andric	Belma	MD	Preventive Medicine	Rec credentialing
Bell	Emily	PA	Family Psychiatry & Physician Assistant	Initial Credentialing
Clarke-Aaron	Noella	MD	Pediatric Medicine	Rec credentialing
Cucuras	John	DDS	General Dentistry	Rec credentialing
Duthil	Marie	MD	Internal Medicine	Rec credentialing
Elisme	Junie	MD	Pediatric Medicine	Rec credentialing
Florez	Gloria	MD	Family Medicine	Rec credentialing
Lam	Minh-Dai	APRN	Family Nurse Practitioner	Rec credentialing
Preston-Erie	Margareth	APRN	Family Nurse Practitioner	Rec credentialing
Shoaf	Noremi	APRN	Family Nurse Practitioner	Rec credentialing

Primary source and secondary source verifications were performed for credentialing and privileging elements in accordance with state, federal and HRSA requirements. A

Nationally accredited Credentials Verification Organization (CVO) was utilized to verify the elements requiring primary source verification.

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

Ramiro Alfonso Puentes, MD joined the Lantana Clinic in 2017 specializing in Family Medicine. He attended the Instituto Superior de Ciencias Medicas in Camaguey, Cuba where he also completed his Family Medicine program. Dr. Alfonso Puentes has been practicing for over 30 years and is fluent in Spanish.

Belma Andric, MD joined the Clinics in 2013 specializing in Preventive Medicine. She attended the College of Medicine, University of Novi Sad in Serbia. Dr. Andric earned a Masters of Public Health from Florida International University and completed her residency program at the Palm Beach County Health Department. She is certified in Public Health and General Preventive Medicine by the American Board of Preventive Medicine. Dr. Andric has been practicing for over 20 years and is fluent in Serbo-Croatian.

Emily Bell, PA-C recently joined the Lantana Clinic as a Physician Assistant specializing in Family Medicine and Psychiatry. She attended the College of Health and Human Services and is certified by the National Commission Certification of Physician Assistants. Ms. Bell has been in practice for 2 years.

Noella Clarke-Aaron, MD joined the West Palm Beach Clinic in 2015 specializing in Pediatric Medicine. She attended the University of West Indies and completed her residency program at New York University Medical Center/Bellevue Hospital. Dr. Clarke-Aaron is certified in Pediatrics by the American Board of Pediatrics and has been in practice for over 20 years.



John Cucuras, DDS joined the West Palm Beach Clinic in 2015 specializing in General Dentistry. He attended the Ohio State University. Dr. Cucuras has been in practice for over 30 years and is fluent in Greek and conversant in Spanish.

Marie Duthil, MD joined the West Palm Beach Clinic in 2013 specializing in Internal Medicine. She attended the Faculty of Medicine of Haiti and completed her residency program at Mount Vernon Hospital. Dr. Duthil is certified in Internal Medicine by the American Board of Internal Medicine. She has been practicing for over 25 years and is fluent in French Creole.

Junie Elisme, MD joined the West Palm Beach Clinic in 2015 specializing in Pediatric Medicine. She attended the University of Miami and completed her residency program at Jackson Memorial. Dr. Elisme is certified in Pediatrics by the American Board of Pediatrics. She has been practicing for over 20 years and is fluent in French Creole.

Gloria Florez, MD joined the West Palm Beach Clinic in 2013 specializing in Family Medicine. She attended the Universidad de Caldas in Colombia and completed her residency program at Wyckoff Heights Medical Center. Dr. Florez is certified in Family Medicine by the American Board of Family Medicine. She has been practicing for over 30 years and is fluent in Spanish.

Minh-Dai Lam, APRN joined the West Palm Beach Clinic in 2013 as a Nurse Practitioner specializing in Family Medicine. He attended Florida International University and is certified as an Adult Nurse Practitioner by the American Academy of Nurse Practitioners. Mr. Lam has been in practice for 8 years and is fluent in French and Vietnamese.

	<p>Margareth Preston-Erie, APRN joined the Lantana Clinic in 2013 as a Nurse Practitioner specializing in Family Medicine. She attended Barry University and is certified as a Family Nurse Practitioner by the American Nurses Credentialing Center. Ms. Preston-Erie has been in practice for 13 years and is fluent in French Creole and Spanish.</p> <p>Noremi Shoaf, APRN joined the West Palm Beach Clinic in 2015 as a Nurse Practitioner specializing in Family Medicine. She attended South University and is certified as a Family Nurse Practitioner by the American Academy of Nurse Practitioners. Ms. Shoaf has been in practice for 5 years and is fluent in Spanish.</p> <p>Mr. Elder spoke to the retention of the Physicians and how impressive it is that they have been with the clinics from the beginning.</p> <p>Dr. Andric adds on that even those that seemed to have started in 2015 were credentialed while contracted under another group before. All of our physicians are board certified, and you will always receive the same level of care at all of our clinics.</p> <p>Mr. Smith inquired about the Providers' privileges at the Lakeside Medical Center.</p> <p>Dr. Andric informed the board that some of the Physicians (those acting as preceptors) do. In the beginning we had more, but because most hospitals require hospitalists now, it makes more sense to keep the number of physicians credentialed in the hospital limited.</p>	
<b>8D. Quality</b>		
<b>8D-1. Staff Recommends a MOTION TO APPROVE</b>	<u>RISK</u>	<b>VOTE TAKEN: Mr. Mullen made a motion to approve the Quality Council Report as</b>

<p>Quality Council Reports</p>	<p>Patient adverse events, peer review, chart review and patient relations are brought to the board “under separate cover” on a quarterly basis.</p> <p><u>PATIENT SATISFACTION</u> Patient satisfaction surveys are being collected daily in the clinics now. We will be able to report on the first month’s outcome at the next board meeting.</p> <p><u>QUALITY</u> Of the 14 UDS Measures: 7 Exceeded the HRSA Goal and 7 were short of the HRSA Goal. Interventions were defined.</p> <p>Dr. Andric stated that we usually show our findings and interventions in red to give an idea of our proposed interventions for improvement.</p> <p>For Cervical Cancer Screening we are working with quest to streamline the process for acquiring patient records. Dr. Ferwerda has been conducting PAP Smear Lunch and Learns. We are expecting an increase in our screening numbers.</p> <p>With Colorectal cancer screening, we are having issues with getting the Fit Test from patients though we are pushing for more Poop On Demand as a lot of patients are refusing to put their samples in the mail.</p> <p>We have a new dashboard which gives us a bird’s eye view of staffing in the clinics. It provides data on staff new hires, terminations, and gender.</p> <p>We have added a Clinical Business Analyst to our team. This person is responsible for optimizing utilization of Athena and training the clinic teams on the system. We have also hired a Health Information Manager who will help manage all the inbound documents and ensure that outbound documents are being processed appropriately.</p>	<p><b>presented. The motion was duly seconded by Mr. Smith. A vote was called, and the motion passed unanimously.</b></p>
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Pharmacy is collaborating with medical to treat and manage diabetes.

Mr. Mullen inquired about providing patients with access to a dietician to provide nutritional education.

Dr. Stewart answered that part of the Strategic plan is to create Care Teams, and each Care team will have at least a health educator (Nurses will be assigned to this position).

Mr. Smith asked about the “Healthy People 2020” Goal.

Dr. Stewart pointed out that the Healthy People 2020 goal changes every 10 years in an attempt to reach better health outcomes Nationwide (i.e. Healthy people 2030). The 60% is the Goal we set for ourselves on our HRSA application.

Mr. Smith asked about the discrepancy between the colorectal cancer screening numbers between this year (49%) and last year (60%).

Dr. Stewart explained that we are still migrating our Allscripts data to Athena, which is more than likely the cause of the lower numbers for this year. Another possible contributing factor to the lower numbers is that the FIT test has also changed from last year. It appears as if patients have found it a bit more difficult to complete. The team met with quest (the supplier) last week to see how we can simplify the process for patients.

Mr. Butler asked about how some measures are hard to achieve because they are, in fact based on patient compliance. He also asks about if quality is based on record audit (in reference to the Hypertension measure).

Dr. Stewart explains that the Hypertension measure, according to the HRSA UDS measure, is any hypertensive

patient that has a blood pressure reading of less than 140/90. This means that 72% of our patients have blood pressure readings below 140/90 which is the goal. Dr. Stewart also explained that another issue faced outside of patient compliance is patient inertia in which patients will attribute a high blood pressure reading to not taking their medication or even eating a salty dinner the night before. They would then return a month later for a follow-up and still have out of control blood pressure. The team has put in a Target BP program which worked with the American Heart Association's framework of controlling blood pressure. With this program, if they observed the clinical inertia and if the patient mentions any of the aforementioned reasons for the high blood pressure, and the physician didn't make any changes to their medication; then they are to schedule a return in the following two weeks to have a follow up appointment.

Mr. Butler asks if this program has been implemented.

Dr. Stewart Answers that the program has been implemented, however, some physicians still wait the month / six weeks / eight weeks. This has resulted in constant reminders to providers to make sure that they act more timely, and there has been improvement (10% better than our peers nationally).

Mr. Butler asked if there could possibly be a way to flag and track these cases of Clinical inertia.

Dr. Stewart explained that there are peer reviews performed quarterly (5 per provider), and one of the questions addressed is one on if there was clinical inertia and if it was handled in a correct/timely fashion; if not, Dr. Stewart addresses the provider.

In the month of June 307 pediatric patients received medical-dental integration services. We continue to develop the data collection tools.

	<p><b>UTILIZATION</b></p> <p>We are analyzing our trends for walk-in patients and found that the majority of patients that walk-in are seen the same day by a provider. We are investigating how to reduce the number of triaged patients and continue to increase the number of patients seen same day.</p> <p>On reviewing our pediatric utilization in Dental we found that 86% of new patients that were seen for comprehensive care between January and June were pediatric</p>	
<p><b>9. CMO, VP and Executive Director of Clinical Services Comments</b></p>	<p>Ms. Davis announced that the Homeless Coalition of Palm Beach County has awarded the Mobile clinic as Provider of the Year, a feat achieved in its first year. The luncheon is on October 2<sup>nd</sup>, 2019.</p> <p>Dr. Andric thanked Terry Megiveron, Director of Strategy for taking on the challenge of the Mobile Clinic Project, working on establishing connections, and learning the landscape of the homeless population in no time.</p> <p>Dr. Andric Passed out the Mobile clinic Schedule to be shared with community members.</p>	<p><b>No action necessary.</b></p>
<p><b>10. Board Member Comments</b></p>	<p>Mr. Neering gave a brief update from the Health Care District Board and strategic planning Committee.</p>	<p><b>No action necessary.</b></p>
<p><b>11. Establishment of Upcoming Meetings</b></p>	<p><u>August 28, 2019 (HCD Board Room)</u> 12:45pm Board of Directors</p> <p><u>September 25, 2019 (HCD Board Room)</u> 12:45pm Board of Directors</p> <p><u>October 30, 2019 (HCD Board Room)</u> 12:45pm Board of Directors</p>	<p><b>No action necessary.</b></p>

	<u>November 27, 2019 (HCD Board Room)</u> 12:45pm Board of Directors  <u>December 18, 2019 (HCD Board Room)</u> 12:45pm Board of Directors	
<b>13. Motion to Adjourn</b>	There being no further business, the meeting was adjourned at 1:49 pm	<b>Mr. Smith made a motion to adjourn and seconded by Mr. Mullen The meeting was adjourned.</b>

Minutes Submitted by:

Signature

Date

*John Casey Mullen* 8-28-19