

**District Clinic Holdings, Inc.
d.b.a. C.L. Brumback Primary Care Clinics
Board of Directors Meeting
Summary Minutes
8/24/2022**

Present: Mike Smith, Vice-Chair; Julia Bullard, Secretary; Joseph Gibbons, Treasurer; John Casey Mullen; James Elder; Irene Figueroa;
Excused: Melissa Mastrangelo, Chair; Tammy Jackson-Moore; Robert Glass
Staff: Darcy Davis; Dr. Belma Andric; Dr. Hyla Fritsch; Bernabe Icaza; Candice Abbott; Lisa Hogans; Dr. Charmaine Chibar;
Alexa Goodwin; David Speciale; Jonathan Dominique; Elba Cespedes; Carolina Foksinski; Beatrice Bitar; Macson Florvil;
Shannon Wynn

Minutes Transcribed By: Shannon Wynn

**The meeting is scheduled for 12:45 p.m.
Meeting Began at 12:46 p.m.**

AGENDA ITEM	DISCUSSION	ACTION
1. Call to Order	Mr. Smith called the meeting to order.	The meeting was called to order at 12:46 p.m.
1A. Roll Call	Roll call was taken.	
1B. Affirmation of Mission	Ms. Mastrangelo read the affirmation of mission.	

2. Agenda Approval		
2A. Additions/Deletions/ Substitutions	None.	VOTE TAKEN: Mr. Joseph Gibbons made a motion to approve the agenda. Mr. John Mullen duly seconded the motion. A vote was called and the motion passed unanimously.
2B. Motion to Approve Agenda Items	Mr. Smith called for approval of the meeting agenda.	
3. Awards, Introductions and Presentations	Ms. Elba Cespedes presented to the Board the Lake Worth clinic overview.	No action necessary.
3A. C.L. Brumback Lake Worth Clinic Overview		
4. Disclosure of Voting Conflict	None.	No action necessary.
5. Public Comment	None.	No action necessary.
6. Meeting Minutes 6A-1 staff Recommends a MOTION TO APPROVE: Board meeting minutes of July 27, 2022	There were no changes or comments to the minutes dated July 27, 2022.	VOTE TAKEN: As presented, Mr. Joseph Gibbons made a motion to approve the Board meeting minutes of July 27, 2022. Mr. John Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.

7. Consent Agenda – Motion to Approve Consent Agenda Items

7A. ADMINISTRATION		
7A-1. Receive & File: August 2022 Internet Posting of District Public Meeting	The meeting notice was posted.	VOTE TAKEN: Mr. James Elder motioned to approve the consent agenda. Mr. Joseph Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.
7A-2. Receive & File: Attendance tracking	Attendance tracking was updated.	Receive & File. No further action is necessary.
7B. FINANCE		
7B-1. Recommends a MOTION TO APPROVE: District Clinic Holdings, Inc. Financial Report June 2022	The June financial statements represent the financial performance through the ninth month of the 2022 fiscal year for the C.L. Brumback Primary Care Clinics. On the Comparative Statement of Net Position, due from other governments increased by \$297k as a result of revenue recognition for grants and other funding programs. On the Statement of Revenues and Expenses, net patient revenue YTD was unfavorable to budget by (\$307k). An increase in actual charity care recognized compared to budgeted charity care is contributing to this unfavorable variance. Gross patient revenue YTD was favorable to budget by \$2.9M. Total YTD revenue was unfavorable to budget by (\$126k); this was partially due to a timing difference in grant funds recognized. Operational expenses before depreciation in grant funds recognized by \$3.9M due mostly to positive variances in salaries, wages, and benefits of \$2.0M, purchased services of \$256k, medical supplies of \$194k, medical services of \$132k, drugs of \$362k, lease and rental of \$667k, and other expense of \$126k. The total YTD net margin was (\$7.9M) compared to the	VOTE TAKEN: Mr. James Elder motioned to approve the District Clinic Holdings, Inc. Financial Report June 2022 agenda. Mr. Joseph Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.

	<p>budgeted loss of (\$12.4M) resulting in a favorable variance of \$4.5M or (36.6%).</p> <p>Net patient revenue YTD for the Medical clinics was unfavorable to budget by (\$707k). The Medical Clinic YTD gross patient revenue was unfavorable to budget by (\$1.8M). The Medical clinic's total YTD revenue was unfavorable to budget by (\$346k). These unfavorable variances resulted from lower net patient revenue than budgeted and a timing difference of revenue recognition for grant funds. Total operating expenses of \$17.6M were favorable to budget of \$21.4M by \$3.8M or 17.7%. The positive variance is mostly due to salaries, wages, and benefits of \$1.9M, purchased services of \$225k, medical supplies of \$238k, medical services of \$132k, drugs of \$362k, repair and maintenance of \$144k, lease and rental of \$619k, and other expense of \$110k. Unanticipated staffing shortages as well as expense timing are driving these favorable variances. Total YTD net margin was favorable to budget by \$4.1M or (36.1%).</p> <p>Net patient revenue YTD for the Dental clinics was favorable to budget by \$367k. Thencee Dental clinics total YTD gross patient revenue was favorable to budget by \$4.7M. An increase in unanticipated patient volume resulted in higher gross revenue, however, increased charity care and contractual allowances unfavorably impacted net patient revenue results. Total YTD operating expenses of \$3.2M were favorable to budget by \$80k. Total YTD net margin was (\$605k) compared to a budgeted loss of (\$993k) for a favorable vari of \$389k or (39.1%).</p>	
8. REGULAR AGENDA		
8A. EXECUTIVE		
8A-1. Receive & File: Executive Director Informational Update	AVP, Executive Director of Clinics and Pharmacy Services resignation In order to reprioritize time with her family, Dr. Fritsch has tendered her letter of resignation effective October 7, 2022.	Receive & File. No further action is necessary.
8B. ADMINISTRATION		
8B-1. Staff Recommends a MOTION TO APPROVE:	This agenda item presents the annual evaluation of Dr. Hyla Fritsch, AVP & Executive Director of Clinic & Pharmacy Services.	VOTE TAKEN: Mr. Joseph Gibbons motioned to approve the Executive Director of Clinic Annual Evaluation agenda. Ms.

<p>Executive Director of Clinic Annual Evaluation</p>	<p>The Bylaws and HRSA Compliance Manual indicate that the annual evaluation of the Executive Director of the Clinics are reviewed and approved by the Board. Evaluation provided under separate cover.</p>	<p>Julia Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.</p>
<p>8B-2. Staff Recommends a MOTION TO APPROVE: Health Care District recommendation for an interim replacement of Executive Director</p>	<p>Dr. Hyla Fritsch was appointed by the District Clinic Holdings, Inc., d/b/a C. L. Brumback Primary Clinics ("Clinics") Board of Directors ("Board") as the Executive Director in October of 2020. Since that time, she has served the clinics diligently in her role. Dr. Fritsch has submitted her resignation effective October 7, 2022. At this time, we would like to recommend that Dr. Belma Andric be made the interim Executive Director of the Clinics (HRSA Project Director).</p> <p>The Health Care District of Palm Beach County ("HCD") and the Clinics entered into a co-applicant arrangement in 2012 in order to transition the responsibility for operating the four existing Federally Qualified Health Centers ("FQHC") from the State of Florida Department of Health to the HCD. In order to maintain the FQHC status and to receive grant funding from the Health Resources and Services Administration ("HRSA"), certain authorities were delegated to the Board as requirements of the HRSA rules and regulations. Several of the key components of these responsibilities include:</p> <ul style="list-style-type: none"> * Establishment of general policies for operating the FQHC's * Approval for the selection and dismissal of the Executive Director * Evaluation of the clinic activities including productivity, patient satisfaction, achievement of project objectives and services utilization patterns * Assuring that the clinics are operated in compliance with applicable federal, state and local laws and regulations * Maintaining infrastructure agreements and contracts regarding sites, services and outreach * Strive for top quartile of Uniform Data System quality awards <p>Also, there is an agreement between the HCD and the Clinics, which further outlines the role of each party in operating the clinics. The HCD has a robust infrastructure that provides necessary operational support and employs the Clinics' personnel. Additionally, both parties have agreed to jointly review and approve a budget and financial plan each year.</p>	<p>VOTE TAKEN: Mr. Joseph Gibbons motioned to approve the Health Care District recommendation for an interim replacement of Executive Director agenda. Ms. Julia Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.</p>

In order to maintain continuity and stability in these unprecedented times, as well as maintain transparency into any proposed changes to the delivery of care at the FQHC's, we believe that it would be in the best interest of the Clinics to allow Dr. Belma Andric to step into this role while recruiting for a replacement. She can work with existing staff and leadership, as well as the Board and HCD Board, to develop suggestions to optimize care to patients of the FQHC's in a cost-effective, sustainable manner.

8C. CREDENTIALING

8C-1. Staff
Recommends a
MOTION TO APPROVE:
 Licensed Independent
 Practitioner Credentialing
 and Privileging

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

The LIPs listed below completed the credentialing and privileges process and met the standards 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
Noukelak	Germaine	MD	Internal Medicine	Initial Credentialing
Ali	Bushra	DMD	General Dentistry	Initial Credentialing
Stanek	Ewelina	PA	Physician Assistant	Initial Credentialing

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

VOTE TAKEN: Mr. John Mullen motioned to approve the initial credentialing and privileging agenda of Germaine Noukelak; Bushra Ali; Ewelina Stanek. Mr. Joseph Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.

	<p>HRSA requirements. A Nationally accredited Credentials Verification Organization (CVO) was utilized to verify the elements requiring primary source verification.</p> <p>The C.L. Brumback Primary Care Clinics utilized internal Credentialing staff and the FQHC Medical Director to support the credentialing and privileging process.</p> <p>Germaine Noukelak, MD, joined the Delray Clinic in 2022, specializing in Internal Medicine. She attended Howard University and completed her Residency at Howard University Hospital.</p> <p>Bushra Ali, DMD, joined the Delray clinic in 2022, specializing in General Dentistry. She attended Rutgers, the State University of New Jersey School of Dental Medicine. Dr. Ali has been in practice for one year and is fluent in Arabic and Spanish.</p> <p>Ewelina Stanek, PA, joined the West Palm Beach Clinic in 2022 as a Physician Assistant. She attended the University of New England and is certified as a Physician Assistant by the National Commission on Certification of Physician Assistants. She is fluent in Polish.</p>	
<p>8D. QUALITY</p> <p>8D-1. Staff Recommends a MOTION TO APPROVE: Quality Report</p>	<p>This agenda item presents the updated Quality Improvement & Quality Updates:</p> <ul style="list-style-type: none"> • Quality Council Meeting Minutes August 2022 • UDS Report – YTD • Provider Productivity – July 2022 <p>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.</p> <p>PATIENT SATISFACTION AND GRIEVANCES Patient relations are to be presented as a separate agenda item.</p>	<p>VOTE TAKEN: Mr. John Mullen made a motion to approve the Quality Reports- as presented. Mr. Joseph Gibbons duly seconded the motion. A vote was called, and the motion passed unanimously.</p>

	<p>QUALITY ASSURANCE & IMPROVEMENT</p> <p>The cervical cancer screening measure satisfaction rate has improved from 38% to 47% over the past 2 months. The number of patients with missing data decreased from 62% to 54%. This was partly due to the auditing of charts to ensure that pap smears completed in previous years or by outside providers were being counted in the measure.</p> <p>UTILIZATION OF HEALTH CENTER SERVICES</p> <p>Individual monthly provider productivity is stratified by clinic.</p>	
<p>8E. OPERATIONS</p>		
<p>8E-1. Staff Recommends a MOTION TO APPROVE Operations Reports- July 2022</p>	<p>This agenda item provides the following operations reports for July 2022:</p> <p>Clinic Productivity, No Show trended over time and walk-in percentages.</p> <p>In July, the clinics had 10,055 visits which were 1,226 less than the month prior and 1,940 more than July of 2021. 72% of patients were adults and 28% were pediatrics. The Lantana Clinic had the highest volume with 1,810 visits, followed by the Mangonia Clinic with 1,566.</p> <p>Our payer mix for July reflects 57% uninsured, which is 10% lower than the previous month. 38% of patients were Managed Care, which is 10% higher than the previous month. 59% of patients were females, 50% of patients reported as White and 39% reported as Black. Of those patients, 39% reported as Hispanic. Our homeless population is consistent with the prior month at 19%. 70% of those patients reported Doubling Up. 48% of patients reported speaking English, 32% Spanish and 17% Creole. 89% of patients reported as straight. Agricultural workers reported as 5%.</p> <p>Productivity targets were met in Mangonia Adult Medical; Pediatrics in both West Palm Beach and Lantana Clinics; Women's Health in Lake Worth; Dental in Belle Glade; Behavioral Health in Belle Glade and Substance Use at Mangonia. In the 90% and higher range were Adult Medical in Delray, West Palm Beach, Jupiter, and Lantana; Behavioral Health in Lake Worth as well as Dental in Delray and Lantana.</p> <p>In July, the number of patients who walked in and were seen the same day totaled 1,553, a decrease of 33% from the previous month. 16% of patients</p>	<p>VOTE TAKEN: Mr. Joseph Gibbons made a motion to approve the Operations Reports- July 2022 as presented. Mr. John Mullen duly seconded the motion. A vote was called, and the motion passed unanimously.</p>

	<p>seen in medical were walk-ins and 13% of patients seen in dental were walk-ins. The Mangonia Clinic had the highest volume of walk-ins with 398, followed by the West Palm Beach clinic with 326 walk-ins. The West Palm Beach dental clinic consistently has the highest volume of walk-ins with 146, followed by the Delray Beach dental clinic with 76 walk-ins. The medical clinics' 2022 average walk-in percentage decreased to 15% and the dental clinic's 2022 average walk-in percentage decreased to 16%.</p> <p>The No-Show rate in July slightly increased to 19%. The Tele no-show rate remains consistent at 9% of the total no-shows in the past 12 months.</p> <p>Mr. Smith and the Board member requested to go paperless moving forward. Only to print the Finance report.</p> <p>Mr. Smith and Board members asked to reduce the information provided by Operations.</p>	
<p>9. AVP and Executive Director of Clinic Services Comments</p>	<p>Shannon Wynn will send the self-evaluation to the Board members via email. Please be on the lookout.</p> <p>Shas Community Initiatives recognized Ms. Tammy Jackson-Moore in a parade and award ceremony.</p> <p>Mr. Gibbons thanked Dr. Fritsch for her service and leadership.</p>	<p>No action necessary.</p>
<p>10. Board Member Comments</p>	<p>Mr. Gibbons thanked Dr. Fritsch for her service and leadership.</p>	<p>No action necessary.</p>
<p>11. Establishment of Upcoming Meetings</p>	<p><u>September 28, 2022 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p> <p><u>October 26, 2022 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p> <p><u>November 29, 2022 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p> <p><u>December 14, 2022 (HCD Board Room)</u> 12:45 p.m. Board of Directors</p>	<p>No action necessary.</p>

<p>12. Motion to Adjourn</p>	<p>There being no further business, the meeting was adjourned at 1:28p.m.</p>	<p>VOTE TAKEN: Mr. Joseph Gibbons made a motion to adjourn. Ms. Julia Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.</p>
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Minutes Submitted by:

Julia Bullard

Signature

10/5/22

Date