

Falls Community Health Governing Board Minutes
Thursday, October 19, 2023, at 12:00 pm

Present: Moses Pessima, Kari Benz, Bill Earley-V, Lee Jensen, Bernie Schmidt- V, Gwen Fletcher, Amanda Willard, Dr. Bill Schultz

Absent: Brenda Parker, Madeline Shields, Angela Landeen

Staff Present: Amy Richardson, Dr. Jen Tinguely, Lori Hestad, Dr. Susan Olson, Kimberly Huff

Call to Order: Kari Benz called the meeting to order at 12:05 pm. Roll call: V__ Bill E, A_Angela, A_Brenda, A_Madeline, V__Bernie, P__ Lee, P__Moses P__Kari P__ Gwen P__ Amanda P__ Bill S

A motion was made to approve the minutes for Falls Community Health Governing Board dated September 21, 2023, with changes, supported by Moses seconded by Lee, motion carries. Roll call: Y__ Bill E, A_Angela, A_Brenda, A_Madeline, Y_Bernie, Y__ Lee, Y__Moses Y__Kari Y__ Gwen Y__ Amanda Y__ Bill S

Welcome and Introductions:

We welcomed the new board member Dr. Bill Schultz.

FINANCIALS:

The Falls Community Health reports attached are through the month ending September 30, 2023. We are 75% through the fiscal year. The last financials presented were through the month of August 2023.

Operating Revenues:

- Net Patient Revenue consists of all patient charges and adjustments. Total Net Patient Revenue for September came in at \$249,779, which is 82% of the YTD actuals to annual budget.
- Total Grant Revenue of \$488,122 includes grant drawdowns from the Community Health Center, ARPA, Community Health Worker, Ryan White Part C, HIV Prevention, and Colorectal Cancer grants.
- Total Other Revenue for September is \$6,160.

Total Operating Revenues YTD September is \$7,097,957 which is 83% YTD actuals to annual budget.

Operating Expenses: Operating expenses are classified within 7 categories. Total expenses were \$1,255,102 for the month of September.

- Personnel expenses are 61% of the budget. September had 2 pay periods. 2023 is \$1.2M favorable to YTD budget.
- Professional Services are 85% of the YTD budget. This category includes payments to the Center for Family Medicine, locum providers, Minnehaha County quarterly shared facility costs, interpreter services and laboratory expenses.
- Rentals are 96% of the YTD budget. Technology changes occur in March of every year.
- Repair and Maintenance is 76% of the YTD budget.
- Supplies and Materials are 148% of YTD budget. Category includes general medical and dental supplies, immunization & pharmaceuticals as well as the monthly maintenance of the electronic medical and dental software systems.
- Training is 84% of the YTD budget. Most expenses are continuing education expenses and licensure renewals.
- Utilities are at 73% YTD budget. Most of this expense occurs quarterly and the last payment occurred in September 2023.

Total Operating Expenses YTD September is \$10,227,144 which is 73% YTD actuals to annual budget.

Non-operating Revenue (Expense):

- Other Revenue (Expense) is at 53% of the budget and includes payments from USD dental lease payments, recovery of prior year revenue, and interest.

Net Income (Loss):

- September actuals are showing a net loss of (\$486,121) and YTD net loss of (\$2,926,928).

A motion was made to accept the financial report as presented, supported by Bill E, seconded by Lee, motion carries.

Roll call: _Y_ Bill E, _A_ Angela, _A_ Brenda, _A_ Madeline, __Y_ Bernie, _Y_ Lee, _Y_ Moses _Y_ Kari __Y_ Gwen __Y_ Amanda __Y_ Bill S

Productivity:

The providers had 1504 visits in September which puts them at 84% to goal. The nurses had 4 visits (new tracking method) and are at 57% to goal. Total medical visits are 84% to year-to-date goal. The dentists had 585 visits in September and are 83% to the goal. Hygiene had 115 visits and still short one hygienist, leaving them at 90% to goal. The dietitian had 11 visits and 80% to goal. Mental Health had 59 visits and 31% to goal. CD Counselor had 17 visits and 51% to goal. Case Management/ Social work is at 162 visits and 138% to goal. This has been audited and found a few issues with reporting. They will be audited, and adjustments made as the reporting is fixed. September totals are 81% to goal.

QUALITY:

Dental Report:

The FCH Dental staff performs Oral Health Screenings for Students at Hawthorne, Hayward, and Terry Redlin schools in the fall. Screenings are ideally completed prior to parent/teacher conferences to potentially utilize that time to communicate with parents/guardians regarding the dental concerns. Each screening is scaled 1- immediate needs, 2- possible areas of concern and should be seen for evaluation, 3 – no visual concerns. Immediate needs would include the student is in pain, has swelling, the presence of infection or an abscess, active decay in 2 or more quadrants of the mouth and/or decay in permanent first molar. If they are a patient of FCH then treatment consent is obtained or a referral to another dental practice. Community resource information is provided if needed, or an active case management is begun to make sure the immediate needs are met. If they are not a patient the consent form is sent home, giving the option to enroll in FCH dental services. Notification will be given to the school with detailed information, then the school and the clinic will collaborate on follow up for these students.

Terry Redlin has about 436 students and approximately 51 were not screened. There were 79 with a rating of 1(21%), 56 with a rating of 2 (15%) and 250 with a rating of 3 (estimate 65%). It is estimated that 385 screenings were done.

Hayward has 558 students and approximately 20 students were not screened. The number of students with a rating of 1 was 93 (17%), rating of 2 was 55 (10%) and an estimate of 390 (72%) with a rating of 3.

Hawthorne screenings were completed on October 17th.

Flu Vaccinations for kids under 12 and under, Hayward had 68, Hawthorne 44 and Terry Redlin 30.

ACCESS:

A motion was made to accept the credentialing and grant privileging for Dr. Gabreille Harris, MD, supported by Moses, seconded by Gwen, motion carries. Roll call: _Y_ Bill E, _A_ Angela, _A_ Brenda, _A_ Madeline, __Y_ Bernie, _Y_ Lee, _Y_ Moses _Y_ Kari __Y_ Gwen __Y_ Amanda __Y_ Bill S

A motion was made to accept the credentialing and grant privileging for Shjade Smith, Psych CNP, supported by Gwen, seconded by Moses, motion carries. Roll call: _Y_ Bill E, _A_ Angela, _A_ Brenda, _A_ Madeline, __Y_ Bernie, _Y_ Lee, _Y_ Moses _Y_ Kari __Y_ Gwen __Y_ Amanda __Y_ Bill S

ANNUAL RISK REPORT:

143 occurrence reports have been submitted from 1/1/23 - 9/30/23. One safety event fell into the higher category of "F" with no harm caused to the patient. For categories E and above, we follow our policy to complete a Root Cause Analysis with our MD and other members from the Risk Management Committee. We also complete a 5 why's with the employees involved in order to implement quality improvement and any auditing that may be completed. From the occurrence reports submitted, we completed activities of improvement in the following categories: Patient Safety/Event Reporting, PST Intake Process Improvement, Key Performance Indicators Oversight, Workflow Consistency/Updates, and Education and Training. Summarized the priorities for 2024 which included the following: emergent exercises/competency training, nurse competency training schedule, quarterly patient identification training, analyzing intake process and training to create efficiencies and reduce errors, education, and workflow compliance, and optimizing all policies and workflows.

PUBLIC INPUT:

Guests shared some of the struggles they are having and stated they are thankful and impressed with the work that we do as a Board and especially the clinic staff.

Motion to supported by Lee, seconded by Moses, motion carries. Roll call: __Y__ Bill E, _A_ Angela, _A_ Brenda, _A_ Madeline, __Y_ Bernie, _Y__ Lee, _Y__ Moses _Y__ Kari __Y__ Gwen __Y__ Amanda __Y__ Bill S

1:14 pm



Kari Benz – Chair November 16, 2023