

Falls Community Health Governing Board Minutes
Thursday, April 18, 2024, at 12:00 pm

Present: Bill Earley-V, Angela Landeen, Amanda Willard, Gwen Fletcher, Moses Pessima, Dr. Bill Schultz, Kari Benz, Carlos Castillo

Absent: Madeline Shields, Lee Jensen

Staff Present: Amy Richardson, Dr. Jen Tinguely, Lisa Stensland, Vanessa Sweeney,

Call to Order: Kari Benz called the meeting to order at 12:06 pm. Roll call: V___Bill E, P_Angela, A_ Madeline, A_ Lee, P___Moses, P___Kari, P___Gwen, P___Amanda, P_ Bill S (Arrived 12:20), P___Carlos

A motion was made to approve the minutes for Falls Community Health Governing Board dated March 21, 2024, supported by Madeline seconded by Angela, motion carries. Roll call: Y___Bill E, Y_Angela, ___Madeline, ___Lee, Y___Moses, Y___Kari, Y___Gwen, Y___Amanda, ___Bill S, Y___Carlos

FINANCIALS:

The Falls Community Health reports attached are through the month ending March 31, 2024. We are 25% through the fiscal year. The last financials presented were through the month of February 2024.

Operating Revenues:

- Net Patient Revenue consists of all patient charges and adjustments. Total Net Patient Revenue for March came in at \$372,742, YTD actuals is 39% compared to annual budget.
- Total Grant Revenue of \$61,877 includes grant drawdowns from Community Health Worker, Ryan White Part C, HIV Prevention, American Rescue Plan Construction and Colorectal Cancer grants.
- Total Other Revenue for March is \$8,052 which consists mostly of Medicaid Health Home.

Total Operating Revenues YTD March is \$442,671 which is 26% YTD actuals to annual budget.

Operating Expenses: Operating expenses are classified within 7 categories. Total expenses were \$1,295,131 for the month of March.

- Personnel expenses are 17% of the budget and March had 2 pay periods. 2024 is about \$731k favorable to YTD budget.
- Professional Services are 21% of the YTD budget. This category includes payments to the Center for Family Medicine, Minnehaha County quarterly shared facility costs, interpreter services, transportation for patients and dental claims processing.
- Rentals are 95% of the YTD budget. Technology charges occur in March of every year.
- Repair and Maintenance is 7% of the YTD budget.
- Supplies and Materials are 28% 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 19% of the YTD budget. Most expenses are continuing education expenses and licensure renewals.
- Utilities are at 20% YTD budget. Most of this expense occurs quarterly and the last payment occurred in March 2024.

Total Operating Expenses YTD March is \$2,662,376 which is 20% YTD actuals to annual budget.

Non-operating Revenue (Expense):

- Other Revenue (Expense) is at 24% of the budget and includes payments from USD dental lease payments, recoveries from AAA collections, and interest.

Net Income (Loss):

- March actuals show a net loss of (\$832,071) and YTD net loss of (\$681,764).

A motion was made to accept the financial report as presented, supported by Angela, seconded by Gwen, motion carries. Roll call: _Y__Bill E, _Y_Angela, ___Madeline, ___Lee, _Y_Moses, _Y_Kari, _Y___Gwen, _Y___Amanda, ___Bill S, _Y___Carlos

Productivity:

The providers had 1408 visits in March, which puts them at 85% to goal for the year. The nurses had 6 visits and are 43% of the goal. Total medical visits are 85% of the year-to-date goal.

The Dental clinic moved to the new ECW, so the productivity goals were lowered until the software becomes more familiar. The dentists had 532 visits in March and are 53% to the goal. Hygiene had 151 visits leaving them at 99% to goal.

The dietitian had 13 visits and 63% to goal. Mental Health had 94 visits and 30% to goal. CD Counselor had 7 visits and 37% to goal. Case Management/ Social work is at 180 visits and 159% to goal. March totals are 74% to goal.

Federal Legislative Mandate Policy Review: Deferred**QUALITY:****Risk Safety Report:**

In December we changed the training timeline from July – June to the calendar year, with that the report needed to be updated to match. The report uses a root cause analysis process. This year priority levels were added along with completion dates. Once this report is approved it will be submitted with the FTCA process.

A motion was made to accept the Risk Safety report as presented, supported by Carlos, seconded by Moses, motion carries. Roll call: _Y__Bill E, _Y_Angela, ___Madeline, ___Lee, _Y_Moses, _Y_Kari, _Y___Gwen, _Y___Amanda, _Y___Bill S, _Y___Carlos

ACCESS:**UDS Report:**

Annually, Falls Community Health is required to submit an annual data report called Uniform Data System (UDS) for grant compliance. The report includes Patient demographics and financial status, revenue and expenses, quality measures and diagnoses.

The federal government and Falls Community Health use this information to show and monitor program improvements, monitor quality programs, and track fiscal performance.

In 2023, we served 10,776 individual patients. This is continuing to rise from previous years. 25% of the clinic patients come from the 57103 zip code and 24% from 57104.

The age and gender of patients: Patients served between 0-18 years is 22.7%, 19-39 years is 35.7%, 40-64 years 34.2%, 65+ is 7.5%. There are 51.9% female and 48.1% male.

Race/Ethnicity of Patients: 54% of patients are white, 21.3% Black, 13.5% American Indian, 5% unreported, 2.1% more than one race, 3.8% Asian and .3% Pacific Islander. 84% are non-Hispanic, 14% Hispanic and 2% unreported.

Homeless Population Served: 0-18 years old – 79, 19-39 years old -646, 40-64 years old- 670, 65+ - 49 for a total of 1444 patients. The housing status of those patients was: Transitional 527, doubling up 486, shelter 313, street 62, 56 other types.

The language best served is English 85% and 15% other than English. The top alternate languages are Spanish at 7% and Swahili at 1.5%. There are more than 30 different languages in 2023.

Payer mix: None/uninsured is 43%, Medicaid 29%, private insurance 20% and Medicare 8%.

School -based Patients: the number of patients seen at a school-based site was 1496 for medical only- 56%, Dental only 947 or 36% and both 205 or 8%.

See the attached document for preventative measures goals.

POLICIES/OSV Requirements:

The board reviewed the Sioux Falls Health Department-Falls Community Health Standard Operating Policy/Procedure for Conflict of Interest with the updates.

A motion to accept the Sioux Falls Health Department-Falls Community Health Standard Operating Policy/Procedure for Conflict of Interest as presented, supported by Moses seconded by Angela, motion carries. Roll call: ___Bill E, _Y_Angela, ___Madeline, ___Lee, _Y_Moses, _Y_Kari, _Y_Gwen, ___Y_Amanda, _Y_Bill S, ___Y_Carlos

CREDENTIALING

A motion was made to accept credentialing and privileging of Kyla Peterson, CSW, as presented, supported by Amanda, seconded by Moses, motion carries. Roll call: _Y_Bill E, _Y_Angela, ___Madeline, ___Lee, _Y_Moses, _Y_Kari, _Y_Gwen, ___Y_Amanda, _Y_Bill S, ___Y_Carlos

PUBLIC INPUT:

None at this time.

EXECUTIVE SESSION:

Started at 12:58 pm

A motion was made to move to executive session to discuss personnel issues, supported by Angela, and seconded by Moses, motion carries. Roll call: _Y_Bill E, _Y_Angela, ___Madeline, ___Lee, _Y_Moses, _Y_Kari, _Y_Gwen, ___Y_Amanda, _Y_Bill S, ___Y_Carlos

Time Executive Session Ended: 1:58 pm

A motion was made to move to executive session to discuss personnel issue, supported by Angela, and seconded by Moses, motion carries Roll call: _Y_Bill E, _Y_Angela, ___Madeline, ___Lee, _Y_Moses, _Y_Kari, _Y_Gwen, ___Y_Amanda, ___Bill S, ___Y_Carlos

A motion was made to approve the candidate for Public Health Director, Joe Kippley, supported by Amanda, and seconded by Moses, motion carries. Roll call: _Y_Bill E, _Y_Angela, ___Madeline, ___Lee, _Y_Moses, _Y_Kari, _Y_Gwen, ___Y_Amanda, ___Bill S, ___Y_Carlos

Motion to adjourn supported by all, motion carries. Roll call: _Y_Bill E, _Y_Angela, ___Madeline, ___Lee, _Y_Moses, _Y_Kari, _Y_Gwen, ___Y_Amanda, ___Bill S, ___Y_Carlos



Kari Benz – Chair May 16, 2024

Upcoming meeting: June 20, 2024.

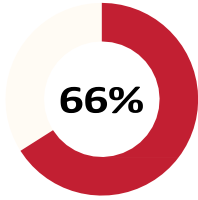
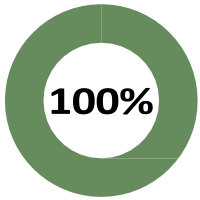
2023 UDS SUMMARY

UDS ADULT PREVENTATIVE MEASURES

HIV LINKAGE TO CARE

FCH 2023

FCH 2022

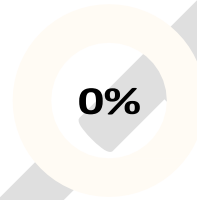
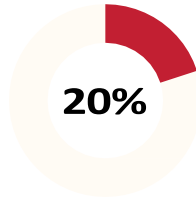


2/2
Goal: 100%
2022: 2/3
State Average: 100%
National Average: 83%

LOW BIRTH WEIGHT

FCH 2023

FCH 2022

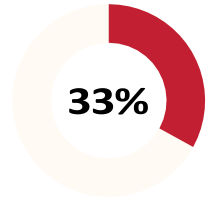
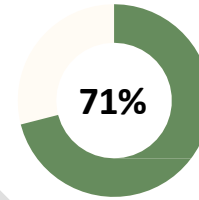


1/5
Goal: 7%
2022: 0/3
State Average: 3%
National Average: 9%

ADULT BMI

FCH 2023

FCH 2022

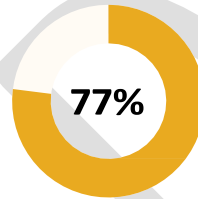
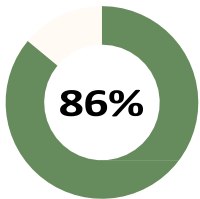


4,442/6,195
Goal: 64%
2022: 1,930/5,933
State Average: 44%
National Average: 61%

TOBACCO USE

FCH 2023

FCH 2022

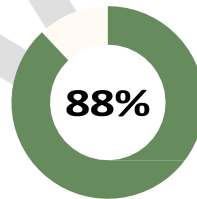
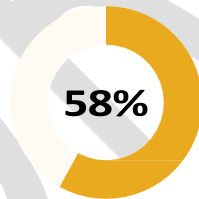


3,347/3,905
Goal: 80%
2022: 732/1,855
State Average: 83%
National Average: 85%

DENTAL SEALANTS

FCH 2023

FCH 2022

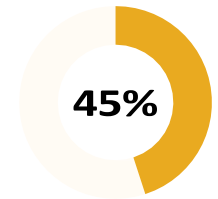
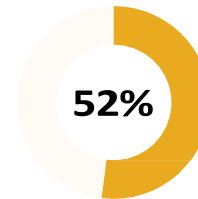


164/280
Goal: 60%
2022: 191/218
State Average: 76%
National Average: 58%

DEPRESSION SCREENING

FCH 2023

FCH 2022

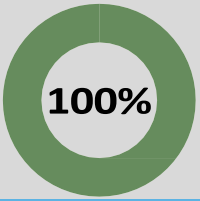


2,499/4,777
Goal: 65%
2022: 1,910/4,207
State Average: 62%
National Average: 70%

EARLY ENTRY INTO PRENATAL CARE

HIV SCREENING

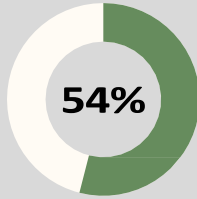
DEPRESSION REMISSION



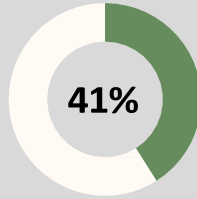
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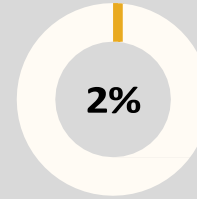
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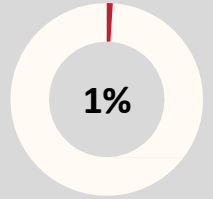
54%



41%



2%



1%

9/9
Goal: 65% **2022: 7/7**
State average: 67%
National Average: 72%

2,914/5,607
Goal: 33% **2022: 2253/5533**
State average: 71%
National Average: 70%

10/418
Goal: 5% **2022: 3/212**
State average: 5%
National Average: 14%

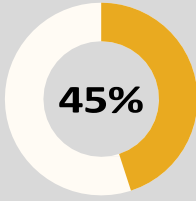
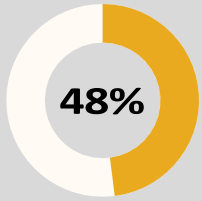
CHAD Goal: 20%

UDS CANCER SCREENING MEASURES

CERVICAL CANCER SCREENING

FCH 2023

FCH 2022



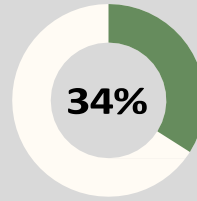
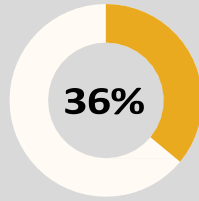
1,075/2,238
Goal: **51%**

2022: 1,010/2,225
State Average: **50%**
National Average: **54%**

COLORECTAL CANCER SCREENING

FCH 2023

FCH 2022



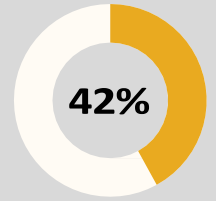
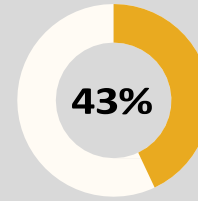
792/2210
Goal: **38%**

2022: 846/2,456
State Average: **44%**
National Average: **43%**
CHAD Goal: 50%

BREAST CANCER SCREENING

FCH 2023

FCH 2022



372/861
Goal: **50%**

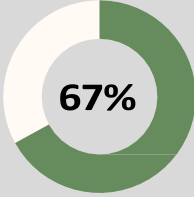
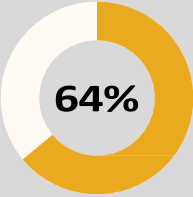
2022: 351/844
State Average: **51%**
National Average: **50%**

UDS CARDIOVASCULAR/CHRONIC DISEASE

DIABETIC MANAGEMENT

FCH 2023

FCH 2022



505/797

Goal: 65%

2022: 518/775

State Average: 72%

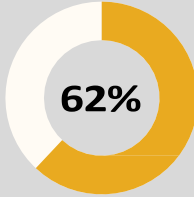
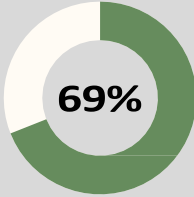
National Average: 70%

CHAD Goal: 75%

CONTROLLING HIGH BLOOD PRESSURE

FCH 2023

FCH 2022



1,013/1,465

Goal: 66%

2022: 612/991

State Average: 66%

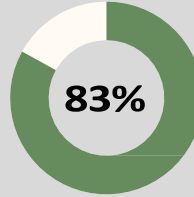
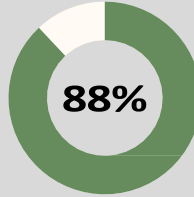
National Average: 63%

CHAD Goal: 65%

STATIN THERAPY

FCH 2023

FCH 2022



791/965

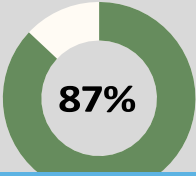
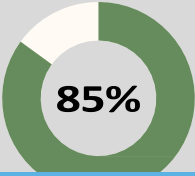
Goal: 79%

2022: 649/778

State Average: 75%

National Average: 76%

IVD



104/122

Goal: 85%

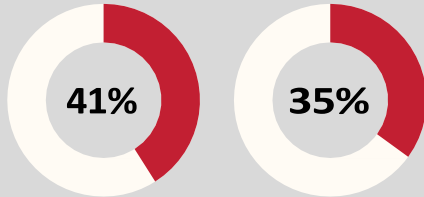
2022: 66/76

State Average: 83%

National Average: 77%

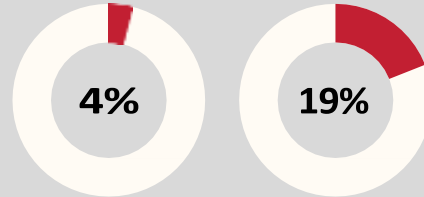
UDS PEDIATRIC PREVENTATIVE

CHILD WEIGHT



316/721 **2022: 215/610**
Goal: 63% **State average: 47%**
National Average: 70%

CHILDHOOD IMMUNIZATIONS



1/28 **2022 : 4/21**
Goal: 45% **State average: 33%**
National Average: 33%