

## **Falls Community Health Governing Board Minutes**

**Thursday, July 17, 2025, at 12:00 pm**

**Present:** Amanda Willard-Virtual, Moses Pessima, Carlos Castillo, Kari Benz, Murat Sincan, Madeline Shields, Angela Landeen-Virtual, Josh Keller-Virtual

**Absent:** Lee Jensen, Dr. Bill Schultz, Gwen Fletcher

**Staff Present:** Joe Kippley-virtual, Amy Richardson, Dr. Jen Tinguely, Vanessa Sweeney, Lisa Stensland, Dr. Susan Olson, Jaimie Roggenbauer, Lori Hestad

Call to Order: Kari Benz called the meeting to order at 12:04 am. Roll call: \_V\_ Murat, \_A\_ Angela, \_P\_ Madeline, A\_ Lee, \_P\_ Moses, \_P\_ Kari, \_A\_ Gwen, \_V\_ Amanda, \_A\_ Bill S, \_P\_ Carlos

A motion was made to approve the minutes for Falls Community Health Governing Board dated May 15, 2025, supported by Carlos seconded by Moses, motion carries. Roll call: \_Y\_ Murat, \_A\_ Angela, \_Y\_ Madeline, A\_ Lee, \_Y\_ Moses, \_Y\_ Kari, \_Y\_ Gwen, \_Y\_ Amanda, \_A\_ Bill S, \_Y\_ Carlos

### **FINANCIALS:**

The Falls Community Health reports attached are through the month ending June 30, 2025. We are 50% through the fiscal year. The last financial statements presented were through the month of April 30, 2025.

#### **Operating Revenues:**

- Net Patient Revenue consists of all patient charges and adjustments. Total Net Patient Revenue for June came in at \$204,805, YTD actual is 62% compared to annual budget.
- Total Grant Revenue of \$333,279 includes grant revenue from Community Health Center and Ryan White Part C.
- Total Other Revenue for June is \$13,609 which consists mostly of Medicaid Managed Care payments, interest, Delta Dental of South Dakota, and miscellaneous revenue.

Total Operating Revenue YTD June is \$3,991,914, which is 57% YTD actual to annual budget.

**Operating Expenses:** Operating expenses are classified within 7 categories. Total expenses were \$961,107 for the month of June.

- Personnel expenses are 43% of the budget and June had 2 pay periods. 2025 is \$655,509 favorable to YTD budget.
- Professional Services are 46% of the YTD budget. This category includes payments for services like Center for Family Medicine, Minnehaha County quarterly facility costs, interpreter services, transportation for patients, clinic security, claims processing, contracted substance abuse, mental health and nutritionist services, lab testing fees, phone answering services, etc.
- Rentals are 94% of the YTD budget. Technology charges occur in March of every year.
- Repair and Maintenance is 13% of the YTD budget.
- Supplies and Materials are 52% of YTD budget. Category includes expenditures like general medical, lab and dental supplies, office supplies, fuel, immunizations & pharmaceuticals, electronic medical and dental software system fees, etc.
- Training is 26% of the YTD budget. Most expenses are continuing education expenses and licensure renewals.
- Utilities are at 34% YTD budget. Most of this expense occurs quarterly and the last payment occurred in June 2025.

Total Operating Expenses YTD June are \$5,922,656 which is 45% YTD actuals to annual budget.

#### **Non-operating Revenue (Expense):**

- Total nonoperating revenue (expenses) is 49% of the budget and includes payments from AAA recovery collections, USD dental clinic rent, and interest.

**Net Income (Loss):**

- June actual amounts show a net loss of (\$383,063) and YTD net loss of (\$1,781,886).

A motion was made to accept the financial report as presented, supported by Moses, seconded by Murat, motion carries. Roll call: \_\_Y\_ Murat, \_Y\_ Angela, \_y\_ Madeline, A\_ Lee, \_Y\_Moses, \_Y\_Kari, \_A\_Gwen, \_Y\_Amanda, \_A\_Bill S, \_Y\_Carlos, \_Y\_Josh

**Productivity:**

The providers had 8868 visits year to date. The nurses had 32 visits year to date. Total medical visits year to date are 8900.

The dentists had 3346 visits year to date. Hygiene had 655 visits year to date. Total dental visits are 4001.

The dietitian had 107 visits this year. Mental Health had 844 YTD visits. CD Counselor had 22 visits YTD. Case Management is at 638 visits. Year-end totals are 14512 total visits which is 91% to goal.

**Medical Fee Review:**

The medical fees were brought before the board in May and are part of the grant requirements and that fees are reviewed on a regular basis to make sure we are charging enough to cover costs and that insurance is fully paying.

A motion to approve the changes to the medical fees to the 60% as presented, supported by Madeline, seconded by Moses, motion carries. Roll call: \_\_Y\_ Murat, \_Y\_ Angela, \_y\_ Madeline, A\_ Lee, \_Y\_Moses, \_Y\_Kari, \_A\_Gwen, \_Y\_Amanda, \_A\_Bill S, \_Y\_Carlos, \_Y\_Josh

**City Financial Audit:**

As part of grant compliance, the city hires an external auditor, and the audit is published on the city's website. There were no findings with the financials.

**QUALITY:**

2025's top priorities have not changed and include Emergency exercises and competency training, Policy Review and implementation oversight, analyzing intake process/reduce errors, Nurse competency training.

Policy review: remaining policies have been assigned to managers to review. The team is meeting with IT to implement policy location on the One Team Portal. The violent or hostile persons policy was discussed by the team.

UDS measures continue to be reviewed and currently 7/18 measures are met, with 6 that are close. Two new measures have been added, Initiation of substance use disorder treatment and initiation, and engagement of substance use disorder treatment. The 2025 priority measures for CHAD diabetic poor control is at 36% (CHAD's goal is 25%), Controlling High Blood pressure is at 63% (CHAD's goal is 65%), Depression Remission is 1.5% (CHAD's goal is 20%), CRC Screening is at 36% and (CHAD's goal is 50%).

In June, the enabling team reached out to 33 high-risk patients. 10 of the 33 high-risk patients were a no-show for their appointments (30%).

The response to the last patient satisfaction survey for both medical and dental was good. Medical received 93 surveys and dental received 32 completed surveys. A new survey will be sent out in August. Updated appointment cards will include parking information.

The third risk committee meeting was held on June 25<sup>th</sup> and reviewed the current trends. Quarter 1 had 71 inquiries and quarter 2 had 121. A new process was implemented to speed up the turnaround time to 15 days. Q1 had an average of 20 days, Q2 average was 4 days. The goal to reduce errors by 5% each quarter, there was a 29% decrease between Q1 and Q2 in both demographic errors and lab errors.

The city's One Team Portal will have links to the patient safety/inquiries forms by October 1<sup>st</sup>.

#### Safety Updates:

Initiatives include emergency preparedness activities, safety engagement opportunities and policy reminders and updates. The safety committee reviewed and submitted updates for their area. An overhead paging system has been installed and was tested and each committee member reported on their area for effective volume and reach. An after-action report was created to identify successes and opportunities for improvement.

A safety scavenger hunt was held to locate a checklist of safety and emergency items around the building. A fire drill was conducted with Jaimie acting as a fire blocking a main exit, so staff had to find an alternative route.

Another member of the committee acted as a missing person to test managers for accountability and played a secondary role as a cyber spy.

#### Ryan White Update:

Patient satisfaction surveys were provided for patients between March 5 and April 30. 39 surveys were returned. 67% are very satisfied, 31% are satisfied. Pneumonia vaccines have been administered to Ryan White patients, 101/132 administered YTD. May 2026 will be the site visit.

#### Dental Update:

The new hygienist started in April. A new check out space has been established to assist patients in better understanding the sliding fee program and their benefits and treatment plans. This process increases accuracy with the check in process and helps to fully close the loop with the patient experience. The performance management team will continue to work on education and training to dental care providers to help increase the sealants for children between 6-9 years measure. They will also work to increase patient awareness with educational materials that explain the benefits of dental sealants.

#### ACCESS:

##### Credentialing and Privileging:

Dr. Jennifer Tinguely, MD – no concerns with Avera credentialing and no changes to privileging

A motion to accept re-credentialing and re-privileging of Dr. Jennifer Tinguely, MD, supported by Murat, seconded by Moses, motion carries. Roll call: \_\_Y\_ Murat, \_Y\_ Angela, \_y\_ Madeline, A\_ Lee, \_Y\_Moses, \_Y\_ Kari, \_A\_Gwen, \_Y\_ Amanda, \_A\_ Bill S, \_Y\_ Carlos, \_Y\_ Josh

Sarah Fuerstenberg, CNP – no concerns with Avera credentialing and no changes to privileging

A motion to accept re-credentialing and re-privileging of Sarah Fuerstenberg, CNP, supported by Moses, seconded by Amanda, motion carries. Roll call: \_\_Y\_ Murat, \_Y\_ Angela, \_y\_ Madeline, A\_ Lee, \_Y\_Moses, \_Y\_ Kari, \_A\_Gwen, \_Y\_ Amanda, \_A\_ Bill S, \_Y\_ Carlos, \_Y\_ Josh

Gavin Van De Walle, MS, RDN, LN – no concerns with Avera credentialing and no changes to privileging

A motion to accept re-credentialing and re-privileging of Gavin Van De Walle, MS, RDN, LN, supported by Madeline seconded by Moses, motion carries. Roll call: \_\_Y\_ Murat, \_Y\_ Angela, \_y\_ Madeline, A\_ Lee, \_Y\_ Moses, \_Y\_Kari, \_A\_Gwen, \_Y\_ Amanda, \_A\_ Bill S, \_Y\_ Carlos, \_Y\_ Josh

#### PUBLIC INPUT:

None at this time.

Motion to adjourn supported by Moses seconded by Angela, motion carries. Roll call: \_\_Y\_ Murat, \_Y\_ Angela, \_y\_ Madeline, A\_ Lee, \_Y\_Moses, \_Y\_Kari, \_A\_Gwen, \_Y\_ Amanda, \_A\_ Bill S, \_Y\_ Carlos, \_Y\_ Josh

1:15 pm

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Kari Benz –Chair August 21, 2025  
Upcoming meeting: September 18, 2025

A handwritten signature in cursive script, appearing to read "Kari Benz".