

Falls Community Health Governing Board Minutes
Thursday, March 19, 2015, at 12:00 pm

Present: Kari Benz, John Peterson, Susy Blake, Gwendolyn Martin-Fletcher, Steve Miller, Linda Karnof, Bruce Vogt-by phone

Absent: Jim Kellar, Ryon Reckling, Tracy Johnson, Arlene Olson

Staff Present: Jill Franken, Alicia Collura, Amy Richardson, Dr. Jen Tinguely, Erin Hartig, Rick Pudwill, Lisa Stensland

Call to Order: The meeting was called to order by Kari Benz at 12:05 pm.

Minutes: Motion made to approve the minutes for February 19th, 2015, by Linda, John seconded, motion carried.

NEW BUSINESS:

Financial Report-Amy provided an overview of the new financial reporting template. The report is reviewing operating revenue, operating expenses, and miscellaneous revenue/expenses. January is 1/12 of the budget or 8%. January revenue was \$629,766 which was on budget for the year, total adjustments of \$233,507 left net patient revenue of \$396,259. The grant drawdown was \$176,721. Total operating revenues were \$573,200 or 7% of budget to date. For operating expenses, personnel is lower than average due to one pay period going back to 2014, this will be closer to monthly budget next report. For the other categories, items within professional services include any contracted employees, rentals include the computers/IT equipment, supplies and materials are any items for the medical and dental clinics. January's expenses were \$364,677 or around 4% of the budget to date. Non-operating revenue would include rent from USD Dental. The estimated uncollectible revenue (about 19% of net patient revenue) will be about \$75,289 leaving net income for January at \$147,778, with the city contribution to be a negative \$75,324.

Amy is working on a written narrative to go along with the financial report for future meetings.

Motion made to approve the financial report made by Steve, Linda seconded, motion carried.

The 2015 Poverty Guidelines/sliding fee scale were presented and reviewed.

Motion made to accept the Falls Community Health Sliding Fee Schedule based on Poverty Guidelines published January 22, 2015 made by Suzy, seconded by John. Motion carries.

QUALITY:

Safety Committee- Rick

The safety committee is made up of members from each part of the clinic. One of the biggest challenges they have worked on is positive patient identification. A policy has been designed to confirm the patient identification multiple times during an appointment, and has helped eliminate possible misidentification.

The Ebola and Infection control policy is being updated as it has not been done since moving to this facility. The Blood borne pathogens policy is also being updated.

The committee collected suggestions from staff for ideas if they had some suggestions of items that needed addressing. One idea was to cover the extra outlets in the exam rooms. In the satellite clinics and with the redesign of the front desk areas some safety concerns were addressed including doors being locked and glass in front of the reception area. The old wheelchairs have been replaced, and the committee is working on funding for AED's in the satellite clinics.

CLOUT: Erin

Colorectal Screenings- the workflow and guidelines have been updated and include education and scripting for nurses and an educational pamphlet for patients. The clinic is having 2 competitions. One is with nursing staff to see who screens the most and one for which team can get the highest screenings completed since March is colorectal month. Stacy Fredenburg from the American Cancer Society has been helping assess our workflows. Part of the new workflow is to remind the patient, via a phone call, to return the screening then 2 reminder letters will be sent as needed. The returned kits are being tracked closely to see if a reminder call is improving numbers. The workflows for Pap smears and Mammograms are also being reviewed.

Pap smears- January was cervical cancer awareness month and the Add a PAP competition added 23 in the month of January, in October, November, and December there was only 11 done. A pap smear education/reminder letter was sent to patients who may qualify for All Women Count.

Hypertension-We are planning a plan due study act (PDSA) for out of control HTN patients. If the patient starting or changing a medication, we will have the pharmacy student meet with/call the patient for education and follow up. We are still working on the details of the PDSA. The HTN education letter has been revamped and can be used for PCMH and Home health.

Ryan White – one of the staff members will be joining the meeting quarterly and CLOUT will assist with any quality measures needing improvement from the Ryan White grant.

Kick off for PCMH- Candice Chitty from Florida will be coming in May to talk with staff and review the PCMH standards and the difference between 2011 and the 2014 Standards. She will be meeting with the management/implementation team for the remainder of the day. The focus will be on team structure and more specifics of the new 2014 standards. Kick off for PCMH- Candice Chitty from Florida will be coming in May to talk with staff and review the PCMH standards and the difference between 2011 and the 2014 Standards. She will be meeting with managers to help answer questions.

POLICY APPROVAL:

The clinic is applying for Medical Liability insurance for 2016. Currently the City carries all liability, but 2016 medical malpractice will not be able to be in the city's risk pool. In preparation for that some of the policies need to be updated to meet the many qualifiers to manage risk. Many of the referral tracking policies have been in place with the PCMH Level 3 recognition. The clinic will track a patient if they have completed the referral.

Motion made to accept the Sioux Falls Health Department-Falls Community Health Standard Operating Policy/Procedure Tracking-Referral, by Bruce and seconded by Linda. Motion carries.

Motion made to accept the Sioux Falls Health Department-Falls Community Health Standard Operating Policy/Procedure Tracking-Hospital, by Bruce and seconded by Steve. Motion carries.

The Policy/procedure for Risk Management is to minimize risk across all spectrums, i.e.: City, clinic and landlord. One point of change would be to pull all parties involved to meet and discuss the policy and any trends that are emerging, amend the plans and bring it to the board.

Motion made to accept the Sioux Falls Health Department-Falls Community Health Standard Operating Policy/Procedure for Risk Management, by Suzy and seconded by Bruce. Motion carries.

The Conflict of Interest Policy and Disclosure will be updated to at a form for the board member to sign. These were also handed out and the board members will bring back in April.

Motion made to accept the Sioux Falls Health Department-Falls Community Health Standard Operating Policy/Procedure for Conflict of Interest and Disclosure Form, by Linda and seconded by Suzy. Motion carries.

EXECUTIVE DIRECTOR'S REPORT:

Dentist recruitment continues to move forward with the interviews having been completed. There were numerous applicants for the dentist position and all were interviewed by Dr. Schmitz, Alicia Collura and Jane Hannestad.

Applications have been received for the vacant APP position. Candidate interviews will be set up as soon as the application have been reviewed

Board member Jim Kellar is in Washington DC attending the NACHC Policy and Issues Forum. A part of this conference is a board member boot camp training which Jim attended. Jim is also participating in meetings with our congressional delegation (Thune, Rounds and Noem) as well as sessions to learn more about health center funding cliff advocacy efforts and other matters of health center importance. At the state level of legislation, the house and senate are now in recess until 3/30, a day reserved for consideration of gubernatorial vetoes.

The main clinic remodel – The HRSA grant awarded for the clinic remodel is to improve flow to be more patient centered. The project is to renovate the front desk and former medical records, and will add patient counseling rooms and increased staff work areas. The architect met with staff on 3/17 to review the initial design.

FTCA liability coverage for clinical providers (federal malpractice coverage)- the federal application deadline is estimated mid May 2015. Positions that will be eligible for FTCA coverage include the clinical providers and licensed clinical staff. This will result in less risk for the clinics and the city and may have appositve budget impact.

There being no other business Motion to adjourn, supported by John, seconded by Steve. Motion carries.

Adjourned at 1:15 pm

