

WILL COUNTY COMMUNITY HEALTH CENTER
GOVERNING COUNCIL MEETING MINUTES
VIA TELECONFERENCE
5/6/2020

MEMBERS PRESENT

Marie Lindsey, Chairman
Vernice Warren, Vice Chairman
Alan Dyche, Secretary
Paul Lauridsen
Deborah Kornacker
Cindy Brassea
George Mora
Judith Easley

MEMBERS ABSENT

Edith Cline-Kabba - excused

WCCHC STAFF PRESENT

Mary Maragos, Chief Executive Officer
Dr. Jennifer Byrd - Chief Medical Officer
Stacy Baumgartner - Director of Operations
Mary Kilbride, Executive Assistant

WCCHC STAFF ABSENT

WCHD STAFF PRESENT

Sue Olenek, Executive Director
Elizabeth Bilotta, Assistant Executive Director

OTHERS PRESENT

Pledge of Allegiance

I. CALL TO ORDER

The regular meeting of the Will County Community Health Center Governing Council was held virtually, via teleconference due to COVID-19 isolation requirements. Ms. Marie Lindsey, Chairman, called the meeting to order at 5:02p.m.

ROLL CALL AND DETERMINATION OF QUORUM – **Quorum present.**

II. MISSION STATEMENT

Mr. Dyche read the Mission Statement.

III. APPROVAL OF MINUTES

A **motion** was made by Mr. Dyche and **seconded** by Ms. Warren to accept the April 1, 2020 meeting minutes as written. **Motion carries.**

IV. Chairman's Comments:

V. CEO Report

• **COVID Operational Updates:**

- COVID-19 testing began in the community with the mobile medical/dental unit.
- Community agencies are being targeted such as congregate living areas and agencies serving African-Americans and Hispanic/Latinos. Already scheduled through May, we will test at: Stepping Stones, Morningstar Mission (shelter and the Quality Inn where families are living), Cornerstone Services, Will County Center for Community Concerns, Spanish Center, AJ Dralle (factory), Guardian Angel Domestic Violence Shelter, St. John's Missionary Baptist Church, Riverwalk Homes (formerly Evergreen Terrace), Catholic Charities, and Daybreak Shelter. Two providers (a dentist and a

medical provider), one dental assistant, one CMA, and 2 reimbursement specialists accompany the mobile unit at each outing.

- Patients screened with the mobile unit are fully registered as health center patients, but we are not charging them a visit fee. The dentists and Lewis university nursing students will be calling the patients with their lab negative results. (I am calling the ones who test positive).
- We can test up to 80 people per day, 3 times per week. Test kits are provided at no charge from Governor Pritzker's office and are sent to an IDPH lab for processing. IDPH is billing patients' insurance if available; otherwise there is no charge for the uninsured.
- 50-75% of our clinic visits are now conducted by telephone. Dr. Hangora will be the first to use Citrix WebEx for telehealth visits with a camera. We have successfully received insurance reimbursement for virtual visits.
- Illinois Medicaid Managed Care Organizations are working with IPHCA to propose "Per-member/per month" capitated payments based on 2019 patient numbers and at the FQHC encounter rate. Negotiations ensue to ensure adequate reimbursement if FQHCs should happen to increase their visit numbers for this year.
- WCCHC providers have enrolled with electronic prescribing for controlled substances. A 2-step verification process is utilized to confirm the prescriber's identity. This facilitates virtual visits and increases the safety of prescribing these medications.
- Providers are wearing N-95 masks for all patient face-to-face encounters. Support staff have the option to wear the same.
- A designated medical secretary is contacting all WCCHC patients daily who have tested positive for COVID-19. She questions them if they are improving, and if not, refers them to a provider for further evaluation. Information about food pantries and other social services is also provided.
- So far only 2 of our staff have tested positive for COVID-19. (71 staff have tested negative, of whom we are aware).

- Mr. Lauridsen questioned how quickly the turnaround of the COVID results are? Ms. Maragos stated results have been coming in two days later.
- It was stated that there had been 6 patients with positive results.
- Ms. Warren questioned if the patients are being called by phone? Ms. Maragos stated that all patients are being called except for CornerStone Services.

UNDUPLICATED PATIENTS

	<u>2020</u>	<u>2019</u>	<u>2018</u>
January	2706	2096	2470
February	1370	1344	1293
March	890	1300	1239
April 1-25	270	779	890
	<u>5236</u>	<u>5519</u>	<u>5892</u>

B. CMO Report (Dr. Byrd gave a verbal report)

- Dr. Byrd reviewed the number of staff out sick (none w/CORONA-19)
- As of date, the Center has had 20 patients testing positive for COVID-19.
- Dr. Byrd published informational packet "Stress Management Resources" for all staff as well as patients
- Dr. Byrd spoke about the "Welcome Will County Baby" campaign. This is a new service line wherein our **Pediatricians visit a select number of OB patients daily** and offer them a **special introduction** to our Pediatric services.
- Dr. Lourgos (Psychiatrist) is resigning effective 6/2/20.

VI. DISCUSSION

Revenue Report: Ms. Maragos presented the Revenue report ending in March. Discussion took place.

Expenditures: Ms. Maragos presented the Expenditure report ending in March. Our goal was 25% and we came in at 24%.

Division Statistical Report: The Division Statistical report was presented and discussed. Our visit counts are up.

Provider Productivity: The Provider Productivity report was presented and discussed.

Report from the Quality Committee: Ms. Lindsey presented a summary of the Quality Committee meeting (see Quality Committee mtg. minutes) which took place prior to Governing Council mtg. Ms. Lindsey spoke about the policies that had been reviewed and approved by Quality Committee. Those same policies will be presented at the GC meeting as well as the Joint Commission Report was reviewed and discussed.

COVID-19 update: Ms. Maragos had discussed COVID-19 during her CEO report.

Progress on Strategic Plan for 2020: The progress of the Strategic Plan for 2020 was reviewed and discussed. Ms. Maragos discussed the goals in detail

Goal 1: Increase awareness of services and improve our reputation in the community:

- Ms. Maragos felt the COVID van going out into the community is helping with this goal.
- We are also looking at getting a Community Health Educator who will help with marketing.
- We have increased our work with helping patients and their referrals.
- Dr. Byrd is sending out a weekly email to staff and being more responsive to their questions and suggestions.
- A sign will be hung on the building this coming Friday which will help promote the Center.

Goal 2: Improve care coordination and patient engagement

- The requirements for Health Homes initiative has been delayed until 2021. Since we are PCMH accredited we still want to do some of this.
- We have a Patient Liaison position open as well as a PT Care Coordinator for HIV patient for our new Ryan White funding.

Goal 3: Improve customer service/service excellence

- Ms. Maragos feels we are doing a better job tracking all unusual occurrences.
- We have recreated new patient surveys which hopefully will get better input from the patients.

Goal 4: Implement Trauma Informed Care

- We do have BH program manager and one of our Psychiatrists will review and are working out the workflows.

Goal 5: Expand substance abuse/mental health services

- We now have Peer Assisted Counselors and will follow-up with patients that have substance abuse issues. We temporarily stopped having them come into the Center but will have them coming back in soon.
- We've successfully launched Telehealth services.
- We've just hired a new Mental Health Practitioner.

Joint Commission Report - Evidence of Standards Completion: The standards of Joint Commission report was reviewed and discussed.

- Dr. Byrd is currently working on the Infectious Disease plan and will present at the June GC meeting. Ms. Lindsey stated that possibly the Health Department may also choose to adopt the Infectious Disease plan for their department. Ms. Olenek will be reviewing it further.
- Mr. Dyche asked Dr. Byrd if she felt the JC findings of "Likelihood to Cause Harm" to be accurate? Dr. Byrd stated she did.

VII. ACTION

- A **motion** was made by Mr. Lauridsen and **seconded** by Mr. Dyche to approve BR-0023 Client Refund Policy. **Motion carries.** Grammatic change will be made in "Purpose Section" to correct

form to "from" patient. Mr. Dyche asked if there is a minimum credit balance for which a refund would not be appropriate? Ms. Maragos stated \$3.00. Ms. Warren questioned if the only way to issue a refund would be a check? Ms. Olenek stated it has to be issued via check according to the County level.

- A **motion** was made by Ms. Warren and **seconded** by Ms. Brassea to approve BR-0023 as amended. **Motion carries.**
- A **motion** was made by Mr. Dyche and **seconded** by Ms. Easley to approve policy QRM-0015. **Motion carries.**
- A **motion** was made by Mr. Dyche and **seconded** by Ms. Warren to approve policy QRM-0007 Patient Satisfaction surveys. **Motion carries.** Ms. Olenek questioned if the surveys could be put online as a fillable document? Ms. Maragos stated she had been told that we did not have the ability to do that as of yet. Ms. Olenek will look into this further with IT department.
- A **motion** was made by Mr. Lauridsen and **seconded** by Ms. Warren to approve QRM-0007 Patient Satisfaction surveys. Due to incorrect Spanish translation of survey the motion was denied. It will be brought back to the GC in June with corrections made. **8 Nays. Motion was denied.**
- A **motion** was made by Mr. Dyche and **seconded** by Ms. Warren to approve policy PCS-0012 Hospitalized Patients and Follow-up. **Motion carries.**
- A **motion** was made by Ms. Warren and **seconded** by Ms. Kornacker to approve Molina Provider Services Agreement. **Motion carries.** Ms. Lindsey questioned what the payments will be? Ms. Maragos stated this agreement is for both the Health Department and Health Center and she will confirm the fee is correct for FQHCs.
- A **motion** was made by Ms. Warren and **seconded** by Mr. Dyche to approve Illinois Management Agency (IEMA), IDPH, IL HFS agreement for COVID-19 testing. **Motion carries.**
- A **motion** was made by Mr. Dyche and **seconded** by Ms. Brassea to approve Amendment 1 to Pharmacy Services Agreements for 340B Charity Care. **Motion carries.**

VIII. PUBLIC COMMENT: No comments stated

- X. A **motion** was made by Mr. Dyche and **seconded** by Ms. Brassea to adjourn the meeting at 6:30pm. **Motion carries.**

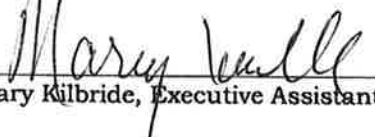
XI. NEXT MEETING

Wednesday, June 3, 2020
Wednesday, June 3, 2020

Finance Committee
Governing Council

4:30pm-5:00pm
5:00pm-6:30pm

Prepared by,


Mary Kilbride, Executive Assistant


Deborah Kornacker, Governing Council Secretary