

**WILL COUNTY COMMUNITY HEALTH CENTER**  
**GOVERNING COUNCIL MEETING MINUTES**  
**VIA TELECONFERENCE**  
12/2/2020

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**MEMBERS PRESENT**

Marie Lindsey, Chairman  
Deborah Kornacker, Secretary  
Alan Dyche, Treasurer  
Paul Lauridsen  
George Mora  
Edith Cline-Kabba  
Judith Easley  
Vernice Warren  
Cynthia Brassea

**MEMBERS ABSENT**

**WCCHC STAFF PRESENT**

Mary Maragos, Chief Executive Officer  
Dr. Jennifer Byrd - Chief Medical Officer  
Stacy Baumgartner - Director of Operations  
Mary Kilbride, Executive Assistant  
Joyce Wallace-Butler, Director of Nursing  
Gayle Andrae, Managed Care Specialist  
Sonia Perez, Manager-Behavior Health  
Ann Conrad, Office Supervisor  
Mike Cirullo, EHR Project Manager  
Dr. Garg, Chief Dental Officer  
Bose Oshin, Billing Supervisor  
Denise Sitasz, Administrative Assistant

**WCCHC STAFF ABSENT**

**WCHD STAFF PRESENT**

Sue Olenek, Executive Director  
Elizabeth Bilotta, Assistant Executive Director

**OTHERS PRESENT**

Adam Lipetz, ASA

**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 4:04p.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 Mr. Mora to accept the minutes from November 4, 2020. **Motion carries.**

**Roll Call:** Marie Lindsey, "Aye", Deborah Kornacker, "Aye", Alan Dyche, "Aye", Paul Lauridsen, "Aye", George Mora, "Aye", Edith Cline-Kabba, "Aye", Judith Easley, "Aye", Vernice Warren, "Aye", Cynthia Brassea, "Aye"

Governing Council

**IV. Chairman's Comments:** Ms. Lindsey announced that George Mora has resigned from the Governing Council. Best wishes and gratitude to George for his many years of service.

**V. CEO Report**

• **COVID Testing Update:**

We have established new testing sites at Governor's State University in University Park on Wednesdays beginning 11/18, and at Trinity Services in New Lenox on Mondays beginning 11/23. Both were very successful in the first week, providing 58 and 56 tests respectively. A drive-up format is utilized. At GSU appointments are required. Walk-up testing at the WCHD TB clinic will begin on December 3. We are developing a plan for on-site point-of-care testing for WCHD and WCCHC staff and patients with the use of free antigen test kits from IDPH.

• **Review of Co-Applicant Agreement:**

On November 18 the Board of Health approved all suggested changes to this Agreement. We ask the Governing Council for its approval on 12/2/2020.

• **Joint Commission Surprise Visit due:**

Any time after November 16 we were told to expect an unannounced in-person site visit from a Joint Commission reviewer. In particular he/she will be looking for demonstration of compliance with findings from their last visit in February 2020. We are prepared and ready.

• **HRSA Virtual Operational Site Visit:**

On December 8-10 we will participate in a virtual review of all procedures, policies, and operations, to assure HRSA of our compliance with all FQHC rules and regulations. Four HRSA reviewers will be present: Anthony Gilchrest, HRSA project officer, Bill Turnley, Team Leader and fiscal reviewer, Rick Harbin, APRN, clinical reviewer, and Iris Sewell, administration & governance reviewer.

- The **Entrance Conference** for senior management and board members will take place on **Tuesday 12/8 from 9:00-10:30am** via GoToMeeting. The access link will be sent to all.
- The **meeting with the Governing Board** exclusively will take place on **Wednesday 12/9 from 12:00-1:30.**
- The **Exit Conference** for Senior Management and Board Member will take place on **Thursday 12/10 from 3:00-4:30.**

(See attached sections from the Health Center Program Compliance Manual on Board Authority and Board Composition.)

• **Strategic Planning for 2021**

Attached you'll find a progress report on our Strategic Plan for 2020. Many of the elements from this plan will be carried forward to 2021, if the Governing Council agrees. We will discuss health assessment data from the Will County community, and Will County CHC strengths, weaknesses, opportunities and threats. Reports of provider productivity, revenue & expenses compared to budget, patients and visits by provider type, marketing, referral sources, patient satisfaction, and quality metrics will be reviewed and discussed. Input for our plan was requested from all staff and managers.

## VI. CMO Report

### Numbers of COVID Cases (raw numbers)

	<u>Cases</u>	<u>Recovered</u>	<u>Deaths</u>
World	63.5 million	43.9 million	1.47 million
United States	13.9 million	8.1 million	274 K
Illinois	726 K	377 K	~13 K

~ worldometer.info

### Death Projections - United States (through MARCH 2021)

A graph was shown noting the **continued rise in projected COVID deaths** through **March 2021**, and a 58% rise in deaths (274 K to 470 K)

### Staff Updates:

Staff was reminded of...

A) our protocol on the **requirement** for all staff to **wear an N-95 mask for two weeks** after engaging in an avoidable OR unavoidable (funerals) high risk activity.

**Avoidable high-risk activities** that have been advised against during the Pandemic by the world's scientific community are:

- travel [via air, train, bus, OR car (if traveling with persons who do not live in your home) ]
- **attending gatherings** with **family**
- **hosting gatherings** with family
- **attending gatherings** with **friends**
- **hosting gatherings** with friends
- hosting **out of town** guests
- having **anyone in your home** that does not live in your home
- dining at **restaurants**
- going to **bars**

B) the need to **change** their **Christmas**, and **New Year's** plans to include **only those persons who already LIVE IN YOUR HOME**

**Cancel** out of town guest plans

**Cancel** your travel plans

Novel ideas to restructure the holidays were given as well:

- dropping off food for elders and other family members
- having a "Zoom" party
- having a **drive by/windows up** party  
(some **electronic apps** have made it **free and unlimited** to accommodate these kinds of virtual gatherings)

Check in with **family members** to ensure **good mental health** during these stressful and isolative times

The staff was also reminded that having a holiday **gathering, the scientific community identifies this behavior as dangerous and extremely high risk**

C) A video from **CDC's Dr. John Torres** providing guidance on holiday interactions:

[https://www.facebook.com/nbcnightlynews/videos/851186392319340/?comment\\_id=10159471429913689](https://www.facebook.com/nbcnightlynews/videos/851186392319340/?comment_id=10159471429913689)

D) A review of the **daily personal decontamination** that many healthcare workers around the world undergo when arriving home to reduce the risk of COVID-19 transmission, called "undress at the door".

E) A review of **home hygiene and decontamination**

### COMMUNITY COLLABORATIONS:

The health center is in the process of forging a **Sub-specialty referral network** with John H. Stroger Hospital (Cook County Hospital). This relationship would allow our providers to use Stroger's electronic ("e-consults") referral system to arrange and schedule Sub-specialty consults for our patients; thus, evolving and expanding the network of Sub-specialists available to our patients. Our next operational call with the hospital is pending for their decision. Details to follow. Of note, this collaboration is being led by our Director of Nursing.

**STAFFING:**

Provider Staff:

Within the last month, the health center welcomed one (1) Family Medicine Advanced Practice Registered Nurse (APRN)

There are 4.5 open provider positions; one (1) Family Medicine Physician, one (1) 0.5 FTE Family Medicine or Psych APRN, and 0.5FTE Psychiatry Physician yet to fill

Support Staff:

Also, within the last month, the health center welcomed one (1) Registered nurse and one (1) Certified Medical Assistant

There are three (3) open Registered Nurse positions and three (3) open Certified Medical Assistant positions yet to fill

**MEDICATION ASSISTED TREATMENT (MAT) PROGRAM:**

This program continues to be very active. The following are the statistics related to our MAT program *over the last one month:*

Total # of program participants – 32

Number of graduates – 1

- “graduate” being defined as having completed an In-patient treatment program, an Out-patient treatment program, and has weaned off of Suboxone

Number of new patients – 5

Number of relapses – 3

Number of re-admissions to In-patient Treatment – 2

Number of patients lost to follow up – 1

Number of patients to voluntarily leave the program – 3

Number of patient deaths – 0

The entire population of patients is monitored weekly by the CMO (along with our MAT Case Manager and Recovery Coach) with a running written report of all of the program participants, their treatment status, last appointment, missed appointments, and current status on their social determinants of health (housing, housemates, employment, healthcare, social support, intimate relationships, and access to food)

**VII. DISCUSSION**

The Governing Council Executive Committee meeting date was discussed. Decision was made to meet on January 6, 2021 @ 6:30pm via Teams. A meeting request will be sent to all Committee Chairpersons, Ms. Olenek and Mr. Lipetz.

The HRSA Health Center Compliance Manual was presented. Ms. Maragos discussed the requirements of the GC members. Discussion took place regarding Board Composition on page 78 of the compliance manual. Ms. Maragos discussed the demographic factors, such as race, ethnicity, and gender must be taken into consideration when bringing on further board members. Ms. Kornacker asked how many are required to be patients? Ms. Maragos stated 51% of the board need to be patients. Ms. Maragos also stated the need to fill out the appropriate forms annually required in the manual, pg. 80. Ms. Lindsey suggested having GC members sign required forms via Survey Monkey.

Ms. Maragos presented the 2020 Strategic Plan progress report for Goals 1 - Goal 5

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

Patient numbers are down by 7.5% compared to 2019. We have completed as many strategies as able but due to the Pandemic it did impact seeing patients.

**Goal 2: Improve care coordination and patient engagement:**

Ms. Lindsey questioned what was the delay in hiring a Patient Care Liaison? Ms. Olenek stated this position must go through the union and labor relations board. A new job description has been written up for this position and a meeting with the labor relations board has taken place. Due to COVID, there has been a delay, but Ms. Olenek has been in contact with the appropriate persons and is continuing to work on this.

Childhood immunizations were discussed, and we are currently at 12.3%. We have tripled our score since 2018. We have not hit target due to the children not coming into the clinic.

Uncontrolled Diabetes numbers are at 54% and unfortunately going up. Due to patients not receiving same number of visits as previously, this number has been affected.

Control of Hypertension number is at 48.5%. HRSA recognizes this and they have selected nationally, Community Health Centers that can use some help. They have offered \$125,000 to be spent over 3 yrs. to improve our hypertension scores. Ms. Maragos stated that she had one week to submit a grant in hopes of getting this money. If we receive this money, ½ will fund the Patient Care Liaison position and also, we'll be able to purchase home blood pressure monitoring equipment that is blue tooth enabled for patients to send their information in to the provider.

**Goal 3: Improve customer service/service excellence:**

We had an intern that worked with the Center this fall. She has assisted us in putting together training similar to the AIDET model. This training will be presented to staff this coming month.

**Goal 4: Implement Trauma Informed Care:**

We have been screening approximately 20% of our patients for a history of trauma. We will work on increasing this score for next year. Ms. Olenek questioned if there is a manager for the Trauma Informed Care Initiative? Ms. Maragos stated the point person is Sonia Perez, Manager of Behavior Health.

**Goal 5: Expand substance abuse/mental health services:**

We have done a very good job of expanding our mental health services. We have increased our substance abuse and mental health services via Telehealth.

**Strategic Planning for 2021:**

**Suggested goals:**

- Goal 1: Increase awareness of services and improve reputation in the community
- Goal 2: Improve care coordination and patient engagement
- Goal 3: Improve customer service/service excellence
- Goal 4: Implement Trauma Informed Care
- Goal 5: Assist in controlling the spread of COVID-19
- Goal 6: Standardize workflows and procedures throughout the clinic
- Goal 7: Improve functioning of management team

**Revenue Report:** Ms. Maragos presented the Revenue report ending in October 31, 2020. Our target was 91.6% and our actual was 82.7%. Our variance was -11.1%. Ms. Kornacker questioned if vaccines will impact patient care visits and would the vaccines be given at the Health Center or the Health Department? Ms. Olenek questioned if the 340b is taking a hit due to COVID? Ms. Maragos stated Yes.

**Expenditures:** Ms. Maragos presented the Expenditure report ending in October. Our goal was 83.3% and at the end of October we came in at 76.3%. Ms. Kornacker questioned why salary expenses are higher if we are down in staff members? Ms. Olenek stated the Collective Bargaining Unit wage increases affected this.

**Patients and Visits:** Ms. Maragos presented and discussed the Patients and Visits report.

**Accounts receivable report/Patient Balance:** Ms. Maragos presented and discussed the Accounts Receivable report/Patient Balance.

**COVID Testing Statistics:** Ms. Maragos presented the COVID Testing Statistics report. Currently 6414 persons (including Dental patients) have been tested. Our most recent positivity rate is 24.83%.

**Patient Satisfaction Survey:**

The Patient Satisfaction Surveys were presented from July - September 2020. Mr. Dyche suggested publicizing these surveys for the public's view. Ms. Maragos stated that we will look into an internal message center for staff to see. Ms. Lindsey questioned if Mr. Brandy could post the surveys on the Health Centers website?

**Quality metrics-UDS comparison:** The UDS Comparison report January-November 2020 vs. 2019 was reviewed. Ms. Maragos spoke of the number of patients seen. The number of children seen is down but the number of Seniors has stayed the same. The number of uninsured have gone up. We have improved the percentage of patients entering prenatal care in their first trimester as well as childhood immunization numbers have increased. Lipid Therapy has also increased.

**Marketing report for September and October 2020:** Ms. Maragos presented the Marketing report for September-October. Ms. Kornacker suggested increasing the immunization compliance with children two years of age and younger with advertising from Ms. Harkins. Ms. Baumgartner stated those patients out of compliance were contacted regarding coming in for their vaccines.

**Referral Sources 2020 vs. 2019:**

Referral Sources were presented and discussed.

**Community Assessment Data:**

Assessment Data was presented and discussions ensued on the strengths, weaknesses, opportunities and threats. Mental illness is increasing. Suicidal ideation is increasing. Syphilis continue to increase. Declines in pediatric wellness visits. Access to food & nutrition. Unemployment rates have gone up. COVID.

**Strengths:**

- Joint Commission renewal
- Expanding Optometry Services
- Adding Hearing Services
- Now have 6 bilingual Spanish speaking providers
- Added a very successful COVID testing program
- Hard working and committed leaders
- No COVID transmission due to contact with our patients
- Launched virtual visits
- 99% of patients stated they would refer us to friends/family (added per Mr. Dyche)
- Ability to connect with Telehealth during a Pandemic (added per Ms. Kornacker)
- MAT program (added per Ms. Kornacker)
- Strong CQI Plan (added per Ms. Kornacker)

**Weaknesses:**

- Unstable and lean workforce due to COVID causing us to limit visits
- Many vacant positions
- Communication
- Management is unable to inspire staff to higher achievement
- Difficulty hardwiring change into the system
- Generate reports but don't always use them to evaluate the data to improve processes

Ms. Lindsey questioned the meaning of inspiring staff to higher achievement? Ms. Maragos stated they will be working on this further this year. Dr. Byrd stated possibly improving the screening/hiring of personnel may help.

**Opportunities:**

- Increased funding available for mobile dental operations
- Underutilized funding for primary care, dental, BH services for persons with HIV/AIDS
- MAT services not yet implemented at Stepping Stones

- Virtual visits and telehealth are widely acceptable and reimbursable
- New collaborative agreement with AMITA St. Joseph Medical Center
- Continued need for timely, affordable, accessible COVID testing
- Collaborative opportunities with GSU and Lewis University
- HRSA grant available for biometric devices for our patients with hypertension
- We will be a part of community-wide COVID vaccination distribution
- More outreach and community services to connect with (added per Ms. Kornacker)
- Dr. Garg will work with Kathleen Harkins regarding all of the additional features that have been added to the Dental Clinic
- Willing to accept interns during this COVID period

**Threats:**

- Silver Cross hospital opened an urgent care center on their campus
- Walgreens plans to offer full-service doctor's offices at some facilities
- 340B is threatened by new restrictions from pharmaceutical companies
- Recruitment challenges due to salaries, preventing us from making competitive offers. Ms. Lindsey questioned if IPHCA may have some questions that could be utilized for further interviewing.

**Development of a preliminary Strategic Plan for 2021:**

Some suggestions were:

- Ms. Kornacker stated possibly getting the right mix into the Health Center via HR
- Mr. Dyche stated recognizing staff who go above & beyond and who have adapted to changes.
- Ms. Maragos suggesting developing a slogan
- Ms. Maragos questioned if we should remove in Goal 1, the reputation of the Center? Decision was not to remove at this time. GC Members thought our reputation was already fine in the area.
- The managers will discuss further and present to the Governing Council at the January 6, 2021 meeting.

**VII. ACTION**

- A **motion** was made by Mr. Lauridsen and **seconded** by Mr. Dyche to approve the FY21 budget. **Motion carries.** Mr. Dyche questioned if the budget was put together without consideration of COVID? Ms. Olenek stated the struggle that has taken place this year due to the Pandemic was very challenging and that this year will also be difficult.

**Roll Call:** Marie Lindsey, "Aye", Deborah Kornacker, "Aye", Alan Dyche, "Aye", Paul Lauridsen, "Aye", George Mora, "Aye", Edith Cline-Kabba, "Aye", Judith Easley, "Aye", Vernice Warren "Aye", Cindy Brassea "Aye"

- A **motion** was made by Mr. Lauridsen and **seconded** by Ms. Kornacker to approve WCHD-WCCHC Co-Applicant Agreement. **Motion carries.**

**Roll Call:** Marie Lindsey, "Aye", Deborah Kornacker, "Aye", Alan Dyche, "Aye", Paul Lauridsen, "Aye", George Mora, "Aye", Edith Cline-Kabba, "Aye", Judith Easley, "Aye", Vernice Warren "Aye", Cindy Brassea "Aye"

- A **motion** was made by Mr. Lauridsen and **seconded** by Ms. Easley to approve CQIP for 2021. **Motion carries.** The name for Vice Chairperson will be changed to Cynthia Brassea on the first page. On pg. 14-15, recredentialing will be changed to every 2 years. Mr. Lipetz stated we are able to send out CQIP with changes.

**Roll Call:** Marie Lindsey, "Aye", Deborah Kornacker, "Aye", Alan Dyche, "Aye", Paul Lauridsen, "Aye", George Mora, "Aye", Edith Cline-Kabba, "Aye", Judith Easley, "Aye", Vernice Warren "Aye", Cindy Brassea "Aye"

A **motion** was made by Mr. Dyche and **seconded** by Ms. Kornacker to accept revisions of CQIP for 2021. **Motion carries.**

**Roll Call:** Marie Lindsey, "Aye", Deborah Kornacker, "Aye", Alan Dyche, "Aye", Paul Lauridsen, "Aye", George Mora, "Aye", Edith Cline-Kabba, "Aye", Judith Easley, "Aye", Vernice Warren "Aye", Cindy Brassea "Aye"

- A **motion** was made by Mr. Dyche and **seconded** by Ms. Kornacker to approve recredentialing for Christine Foster, APRN. **Motion carries.** Ms. Lindsey recommended some changes in her approval of procedures. Dr. Byrd stated she will need to observe the providers prior to approval. Ms. Olenek requested that we move the approval through, with the understanding that Dr. Byrd will observe the providers prior to marking off on recredentialing form.

**Roll Call:** Marie Lindsey, "Aye", Deborah Kornacker, "Aye", Alan Dyche, "Aye", Paul Lauridsen, "Aye", George Mora, "Aye", Edith Cline-Kabba, "Aye", Judith Easley, "Aye", Vernice Warren "Aye", Cindy Brassea "Aye"

- A **motion** was made by Mr. Lauridsen and **seconded** by Ms. Cline-Kabba to approve recredentialing for William Udrow, PsyD. **Motion carries.**

**Roll Call:** Marie Lindsey, "Aye", Deborah Kornacker, "Aye", Alan Dyche, "Aye", Paul Lauridsen, "Aye", George Mora, "Aye", Edith Cline-Kabba, "Aye", Judith Easley, "Aye", Vernice Warren "Aye", Cindy Brassea "Aye"

- A **motion** was made by Mr. Lauridsen and **seconded** by Ms. Warren to approve recredentialing for Jeffrey Williams, D.O. **Motion carries.**

**Roll Call:** Marie Lindsey, "Aye", Deborah Kornacker, "Aye", Alan Dyche, "Aye", Paul Lauridsen, "Aye", George Mora, "Aye", Edith Cline-Kabba, "Aye", Judith Easley, "Aye", Vernice Warren "Aye", Cindy Brassea "Aye"

- A **motion** was made by Mr. Lauridsen and **seconded** by Ms. Brassea to approve recredentialing for Sonal Gandhi, DDS. **Motion carries.**

**Roll Call:** Marie Lindsey, "Aye", Deborah Kornacker, "Aye", Alan Dyche, "Aye", Paul Lauridsen, "Aye", George Mora, "Aye", Edith Cline-Kabba, "Aye", Judith Easley, "Aye", Vernice Warren "Aye", Cindy Brassea "Aye"

- A **motion** was made Mr. Dyche and **seconded** by Ms. Warren to approve credentialing for Dalvina Sharma, DDS. **Motion carries.**

**Roll Call:** Marie Lindsey, "Aye", Deborah Kornacker, "Aye", Alan Dyche, "Aye", Paul Lauridsen, "Aye", George Mora, "Aye", Edith Cline-Kabba, "Aye", Judith Easley, "Aye", Vernice Warren "Aye", Cindy Brassea "Aye"



**VIII. BOARD MEMBERS' CONCERNS AND COMMENTS:** No comments stated  
**PUBLIC CONCERNS AND COMMENTS:** No comments stated

**X. A motion** was made by Ms. Warren and **seconded** by Ms. Brassea to adjourn the meeting at 7:01pm. **Motion carries.**

**Roll Call:** Marie Lindsey, "Aye", Deborah Kornacker, "Aye", Alan Dyche, "Aye", Paul Lauridsen, "Aye", George Mora, "Aye", Edith Cline-Kabba, "Aye", Judith Easley, "Aye", Vernice Warren "Aye", Cindy Brassea "Aye"

**XI. NEXT MEETING**

**Wednesday, January 6, 2021 @ 5:00pm:**

**(The meeting will be conducted virtually, through Microsoft Teams)**

Prepared by,

  
Mary Kilbride, Executive Assistant

  
Deborah Kornacker, Governing Council Secretary

1-10-2021