

**WILL COUNTY COMMUNITY HEALTH CENTER**  
**GOVERNING COUNCIL MEETING MINUTES**  
**VIA TELECONFERENCE**  
2/2/2022

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**MEMBERS PRESENT**

Paul Lauridsen, Chairperson  
Cindy Brassea, Vice Chairman  
Edith Cline-Kabba  
Michael Crowner  
Alan Dyche, Treasurer  
Judy Easley  
Deborah Kornacker-Secretary  
Marie Lindsey  
Nicole Luebke – left @ 6:10pm  
Vernice Warren

**MEMBERS ABSENT**

**WCCHC STAFF PRESENT**

Mary Maragos, Chief Executive Officer  
Dr. Jennifer Byrd, Chief Medical Officer  
Dr. Sangita Garg, Chief Dental Officer  
Stacy Baumgartner - Director of Operations  
Phil Jass - Quality Improvement/Risk Management Coordinator  
Jill Wojciechowski, Patient Registration Supervisor  
Bose Oshin, Billing Supervisor  
Denise Sitasz, Administrative Assistant

**WCCHC STAFF ABSENT**

**WCHD STAFF PRESENT**

Sue Olenek, Executive Director  
Elizabeth Bilotta, Assistant Executive Director  
Denise Bergin, Director of Finance/Grants Management

**OTHERS PRESENT**

Adam Lipetz, ASA

Mr. Lauridsen read the statement “Due to the Covid-19 pandemic, the Governor’s recent disaster proclamation, the number of COVID-19 cases in Will County, and the CDC Guidelines regarding COVID-19, it has been determined by the Chairperson of the Will County Community Health Center Governing Council that in-person meetings are not practical nor prudent. Therefore, all meetings of the Governing Council shall be held via video and/or audio until further notice.”

**I. CALL TO ORDER - Pledge of Allegiance**

The regular meeting of the Will County Community Health Center Governing Council was held virtually, via teleconference due to COVID-19 isolation requirements. Mr. Lauridsen, Chairman, called the meeting to order at 5:05p.m.

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

**II. MISSION STATEMENT**

Ms. Luebke read the Mission Statement.

**III. APPROVAL OF MINUTES**

ROLL CALL AND DETERMINATION OF QUORUM – Quorum present.

A **motion** was made by Ms. Lindsey and **seconded** by Ms. Brassea to accept the minutes from January 5, 2022. **Motion carries.**

**Roll Call:** Paul Lauridsen “Aye”, Cindy Brassea “Aye”, Edith Cline-Kabba “Aye”, Michael Crowner “Aye”, Alan Dyche, “Aye”, Judy Easley “Aye”, Deborah Kornacker “Aye”, Marie Lindsey “Aye”, Nicole Luebke “Aye” Vernice Warren “Aye”

**IV.** No comments from Chairperson

**V. Public Comment for Agenda Items Only:** none

**VI. CEO Report**

**Proposed GC Bylaws Changes** – At this meeting we proposed minor edits to the GC bylaws. Specifically, there is clarification about the reelection of GC officers and their terms. There is also clarification about the CEO evaluation. The current bylaws refer to a policy about the CEO evaluation, but there is none so we suggest this language be stricken.

**Approval of contract for 340B Independent Audit** – As a participant of the HRSA 340B discount drug program, we are expected to conduct a self-audit, preferably annually. We have utilized Hudson Headwaters twice in the in past, on 3/24/16 and 5/29/19, with very satisfactory results. Our last HRSA 340B audit was conducted on 8/16/18. We can expect another HRSA audit this year or next. We have agreements with 5 pharmacies: Basingers, Kodo/Joliet Professional Pharmacy (JPP), Walgreens, CVS, and Walmart. Altogether there are 52 participating pharmacy locations. We engage a 340B Administrator, Verity, to assist with ordering and reporting for the independent pharmacies Basingers and Kodo/JPP. The larger pharmacies have their own 340B administrators. Each 340B administrator charges a per-Rx fee, as do the pharmacies when a drug is dispensed. Revenue reflects reimbursement from insurances and patients for prescriptions minus 340B administrator and pharmacy dispense fees. In FY21 our 340B revenue was \$1,409,632. Expenses reflect our cost of drugs from the wholesaler, to replenish what is dispensed. Drug costs in FY21 were \$735,711. Net revenue for this program in FY21 was \$673,921. We utilize this revenue to support our dental program and interpreters. We ask the Governing Council for its approval of a contract with Hudson Headwaters for an independent audit.

**Architectural Services for Renovations** - The Will County Community Health Center has secured funding to redesign an existing Medical Records Room to allow for a service expansion of our behavioral health program. The funding will be used to build eight (8) provider offices which double as examination rooms, a nurse/reception station, a twelve (12) seat waiting room and the creation of two additional office spaces. The work plan includes building new walls, soundproofing of the walls, ducted HVAC return and new doors. The reception nurse/reception station will include millwork cabinetry/file storage areas and power/data outlets. The project includes demolition, resilient flooring and base trim, painting/wallcovering, and acoustic ceiling tiles. We have received funding from a 2021 HRSA American Rescue Plan grant for this project, totaling \$383,376. We ask the Governing Council for its approval to contract with Stromsland + De Young + Prybys Architecture Group for services not to exceed \$18,000.

**New staff** – We are thrilled to announce the hiring of 3 key staff to the Will County Community Health Center. Our new Registration Supervisor, Jill Wojciechowski, started on 1/31/22. She previous oversaw registration at Univ. of Chicago/ Silver Cross Hospital’s Cancer Care Center. A new Behavior Health Supervisor, Shawnda Gossitt, will start on 2/7/22. She has previous management experience with Northwestern Medicine, Midwest Women’s Healthcare, and at the Univ. of Texas Health Center. Lastly, we have hired our first Licensed Clinical Social Worker, Colleen Kucera, who will start on 2/22/22. She has years of experience with in-patient and out-patient counseling at Little Company of Mary Hospital and Pillars Health. As she has a Masters’ degree, we will be able to bill for her services.

**COVID-19 Update:**

**Numbers of Cases (raw numbers)**

	<u>Cases</u>	<u>Recovered</u>	<u>Deaths</u>
World	~346 million	~276 million	~5.60 million
United States	~71.1 million	~44.1 million	~ 886 K
Illinois	~ 2.77 million	~ 1.91 million	~ 33 K

Increased from 51.9 in the last 4 wks (pointing to Recovered column)

Increased from 827 in last 4 wks (pointing to Deaths column)

~ worldometer.info (as of 1/22/2022)

**Total Daily New Cases - Illinois (through January 22, 2022):**

~ **significant INCREASE** as it is up from 11,426 daily new cases in December 2021  
(Graph was shown of new cases in Illinois)

**Total Deaths - Illinois (through January 16, 2022):**

~ **upward trend** as is increased from 30,319 total deaths in late December 2021  
(Graph was shown of total deaths for Illinois)

**Risk Assessment Level - Global (projected through, January 2022):**

(Graph was shown of Global Risk Assessment Level)

**The Impact of Social Distancing - Global (projected through May of 2022):**

- ~ this graph shows how significant social distancing is on the spread of the Corona Virus. When social distancing fell below 20% of the usual mobility, the number of cases fell as well.
- ~ This indicates that traveling during a surge, should be limited to emergencies, and critical business travel that cannot be accomplished via video.

(Graph was shown of Social Distancing)

**Summary** (as of January 19, 2022; Institute for Health Metrics and Dr. Byrd)

- COVID-19 will be with us for many years, as a recurrent disease
- It will intensify seasonally during the fall and winter months
- As people's immunity declines and new variants emerge, we will see resurgences of COVID-19
- The current period of extraordinary social and economic disruption is likely coming to an end as COVID becomes an entity that health systems manage, rather than a crisis that consumes society as a whole
- By March of 2022, the Institute of Health Matrix's models show that the Omicron wave will have passed through most of the world, as the new rounds of lockdowns and/or mandates will have come too late to deter the spread of Omicron in most places.

The latest models show that there were 125 million Omicron infections a day around the world. That's more than 10 times what the world saw at the height of the Delta wave in April of last year. The projections show that Omicron will infect every single country in the world by this spring.

- We should continue to **vaccinate**, wear **high-quality masks**, and maintain **physical distance** to protect vulnerable individuals, as evidence has shown 80% - 90% of this current surge of COVID-19 cases are **asymptomatic**...this **asymptomatic rate is double** what has been seen in previous variants.
- While the emergency phase of the pandemic is winding down, COVID-19 is not going away; what to do...
- \* Make very specific and thoughtful choices regarding everyday activities
- \* This choice will be dependent on if we are in a surge, **risk tolerance** (co-morbid conditions), **vaccination** status, and whether there will be **crowding**.
- \* The unfortunate problem is that when individuals make activity choices, the decision often does not involve consideration for the collective impact on the spread of the virus, these decisions also often involve a financial consideration and one that outweighs public health and safety. This is not a political opinion, this immutable fact is based on empiric evidence from observed human behavior over the last two years by scientists around the world.
- \* During surges, crowds and airline travel should be avoided
- \* Everyone should get an annual / seasonal flu vaccine
- \* We should normalize the concepts of – “surge behavior” and “nadir behavior”



**Good News:**

- half as many hospitalized with Omicron as it was for Delta
- those persons infected with Omicron who required intubation or mechanical ventilation is down 80-90%
- In some of the countries with early Omicron surges, they are already peaking and showing a decrease in case incidence.

**Staffing Update:**

- The following positions remain vacant in the health center:
- Family Medicine Physician (1)
- Family Medicine Advanced Practice Registered Nurse
- Mental Health Advanced Practice Registered Nurse or
- Psychiatry Physician (part-time)
- Certified Medical Assistant (2)
- Patient Registration Clerk
- Reimbursement Specialist
- Population Health Manager
- RN or LPN Patient Care Coordinator
- Healthcare Liaison
- Interpreter Clerk

## **VII. CDO Report**

### **BinaxNOW Rapid COVID Testing in Dental**

For the month of January 1-18, 2021, the dental clinic performed 146 tests with 4 positive cases. Patients were discharged from the dental clinic door, instructed to quarantine, and rescheduled for dental procedure and will be tested again.

As the Omicron COVID Virus is spreading, dental clinic will continue to perform BinaxNOW COVID testing for every patient, every visit before aerosol producing procedure.

### **Internal Referrals**

From January 1-18, 2021, dental clinic received 33 internal referrals from our WCCHC medical providers and 11 referrals from IRIS (Integrated Referral and Intake System) with other Will County collaborating partners.

It includes children, pregnant women and adults referred to Dental for oral health care.

### **Community Outreach**

Dental Hygienist is scheduled 1/19/22, Wednesday, for 30 minutes, in person, community outreach, oral health education, helping patients to schedule appointment at the dental clinic and distributing oral health kits at Daybreak, homeless shelter.

She will be wearing N95 mask, PPE and make sure all the participants are masked and it is a well-ventilated room.

### **Front Desk New Staff**

Dental clinic is pleased to welcome a new front desk staff Eulalia Vargas, a reimbursement specialist, full time and bilingual. She will be working Tuesday- Saturday and is a great addition to the dental team.

Ms. Luebke questioned if the Dental Van is active? Dr. Garg stated right now it has been suspended but she is hoping it will be running by next month.

**Revenues:** Ms. Maragos presented the revenue report as of January 28, 2022, and the variance is at 13.2%. An updated report from Revenue as of November 2021 was presented. The variance was -.3%.

**Expenditure:** Ms. Maragos presented the expenditure report as of January 2022, and our target was at 16.6% and we are currently at 11.5%. Our expenditure as of November 2021 was at 87.3%. Ms. Bilotta spoke of two of the payrolls that will need to be booked back to FY21.

## **VIII. DISCUSSION**

- Mr. Jass presented the Key Performance Indicators for the Center. In the Obesity category, the providers needed to be retrained and reeducated and then the scores increased.

Mr. Lauridsen questioned about the Patients and Visits report that was on the agenda. Ms. Maragos stated that until we close out FY21 with the UDS we cannot generate a Patients/Visits report for 2022.

Ms. Kornacker questioned the target goal for diabetes. Mr. Jass stated it is an inverse measure which means we have to be under 34%.

- Ms. Lindsey presented the Quality Committee meeting discussion which took place prior to the Governing Council meeting. Discussion took place re: events and incidents report that had been presented during the Quality meeting. The patient experience surveys were discussed. Possibly the survey will be revised. Further information to come. The 2022 CQIPM plan was approved by the Quality Committee.
- Mr. Lauridsen spoke of the Governing Council Members with expiring terms and the election of officers and board members which will take place in April.



- Ms. Kornacker will get back to Governing Council regarding continuing on as Secretary for Governing Council.
- Ms. Brassea will continue to stay on as Vice Chairperson for the Governing Council.
- Mr. Lauridsen will continue to stay on as Chairperson for the Governing Council.
- All Governing Council members should notify Ms. Easley or Mr. Lauridsen within the next 10 days if uninterested in continuing on the board.
- Ms. Kilbride will send a spreadsheet of terms for the board to Ms. Easley by Monday, 2/7/2022.
- Minor bylaw changes were discussed and agreed by the Governing Council.
- Ms. Lindsey suggested writing up a process for reviewing the CEO appraisal. If a board member has a suggestion, it should be sent to Ms. Kilbride.
- The Governing Council chairperson evaluation process will be worked on and presented to the Governing Council at a later date.
- Ms. Olenek will finalize Ms. Maragos' performance evaluation and send it to Mr. Lauridsen. Mr. Lauridsen will send the evaluation to the Executive Board for review as well as request that they fill out an evaluation and return to Mr. Lauridsen. Ms. Olenek will receive the Executive Boards appraisals and will then meet with Ms. Maragos along with Mr. Lauridsen to discuss.

#### **IX. ACTION**

- A **motion** was made by Mr. Dyche and **seconded** by Ms. Warren to approve Governing Council Chairperson Evaluation form. **Motion carries.** Paul Lauridsen "Aye", Cindy Brassea "Aye", Edith Cline-Kabba "Aye", Michael Crowner, "Aye", Alan Dyche, "Aye", Judy Easley, "Aye", Deborah Kornacker "Aye", Marie Lindsey "Aye", Nicole Luebke "Aye", Vernice Warren, "Aye". **Motion carries.**
- A **motion** was made by Ms. Lindsey and **seconded** by Ms. Kornacker to approve Governing Council Board members self-evaluation form. **Motion** was made by Ms. Lindsey and **seconded** by Ms. Kornacker to use the previous roll call. **Motion carries.**
- A **motion** was made by Mr. Dyche and **seconded** by Ms. Warren to approve 2022 CQIPM Plan. **Motion carries.** A **motion** was made by Ms. Kornacker and **seconded** by Ms. Easley to use the previous roll call. **Motion carries.**
- A **motion** was made by Ms. Easley and **seconded** by Ms. Warren to approve the bylaws changes. **Motion carries.** A **motion** was made by Ms. Kornacker and **seconded** by Ms. Lindsey to use the previous roll call. **Motion carries.**
- A **motion** was made by Ms. Lindsey and **seconded** by Ms. Warren to approve contract with Hudson Headwaters for a 340B audit. **Motion carries.** A **motion** was made by Ms. Brassea and **seconded** by Ms. Easley to use the previous roll call. **Motion carries.**
- A **motion** was made by Ms. Lindsey and **seconded** by Ms. Easley to approve architectural services for Medical Records room renovation. **Motion carries.** A **motion** was made by Ms. Kornacker and **seconded** by Mr. Crowner to use the previous roll call. **Motion carries.**

#### **X. BOARD MEMBERS' CONCERNS AND COMMENTS: None**

**PUBLIC CONCERNS AND COMMENTS:** No comments stated

- XI.** A **motion** was made by Ms. Kornacker and **seconded** by Ms. Lindsey to adjourn the meeting at 6:30pm. **Motion carries.** A **motion** was made by Mr. Dyche and **seconded** by Ms. Kornacker to use the previous roll call. **Motion carries.**

**Roll Call:** Paul Lauridsen, "Aye", Cindy Brassea, "Aye" Michael Crowner, "Aye", Alan Dyche, "Aye", Judy Easley, "Aye", Deborah Kornacker, "Aye", Marie Lindsey, "Aye", Nicole Luebke, "Aye", Vernice Warren, "Aye"

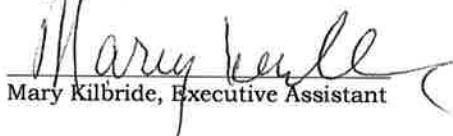
#### **XII. Executive Committee/Executive Session: None**

**XIII. NEXT MEETING**

<b>Wednesday, March 2, 2022</b>	<b>4:30pm</b>	<b>Finance Committee</b>
<b>Wednesday, March 2, 2022</b>	<b>5:00pm</b>	<b>Governing Council</b>

**(Meetings will be conducted virtually, through Microsoft Teams)**

Prepared by,

  
Mary Kilbride, Executive Assistant

  
Deborah Kornacker, Secretary of Governing Council