

**WILL COUNTY COMMUNITY HEALTH CENTER  
STRATEGIC PLANNING/FINANCE COMMITTEE  
Wednesday, December 6, 2023 @ 4:30pm**

**MEMBERS PRESENT**

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Cindy Brassea  
Michael Crowner – Treasurer – 5:06pm  
Alan Dyche – Chairperson  
Judy Easley  
Paul Lauridsen  
Marie Lindsey – via teleconference  
Nicole Luebke  
Vernice Warren – Vice Chairperson

**MEMBERS ABSENT**

Edith Cline-Kabba  
Frank Sandoval

**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  
Bose Oshin, Billing Supervisor  
Talecia Bradley, Director of Nursing  
Kathleen Harkins, Community Outreach & Marketing Coordinator

**WCHD STAFF PRESENT**

Elizabeth Bilotta, Executive Director  
Denise Bergin, Assistant Executive Director  
Jessica Bugarewicz, Call Team Supervisor  
Mary Kilbride, Executive Assistant

**OTHERS PRESENT**

Adam Lipetz, ASA

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

Mr. Dyche, Chairman, called the meeting to order at 4:35 p.m.

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

**B. APPROVAL OF GOVERNING COUNCIL MINUTES**

A **motion** was made by Ms. Easley and **seconded** by Ms. Warren to accept the Governing Council minutes from November 1, 2023. **Motion carries.**

No opposed or abstentions. **Motion carries.**

**APPROVAL OF EXECUTIVE COMMITTEE MINUTES**

A **motion** was made by Mr. Lauridsen and **seconded** by Ms. Easley to accept the Executive Committee minutes from November 1, 2023. **Motion carries.**

No opposed or abstentions. **Motion carries.**

**APPROVAL OF FINANCE COMMITTEE MINUTES**

A **motion** was made by Mr. Lauridsen and **seconded** by Ms. Brassea to table the approval of the Finance Committee minutes. **Motion carries.**

No opposed or abstentions. **Motion carries.**

**APPROVAL OF FINANCE COMMITTEE MINUTES**

A **motion** was made by Mr. Lauridsen and **seconded** by Ms. Warren to take approval of Finance Committee minutes off the table. **Motion carries.**

A **motion** was made by Mr. Lauridsen and **seconded** by Mr. Crowner to accept the Finance Committee minutes from September 6, 2023. **Motion carries.**

**C. Chairman's Comments:**

**D. Public Comment for Agenda Items Only:**

**E. Reports:**

**CEO Report:**  
**2023 Community Health**  
**Quality Recognition**  
**Badges Awarded**



HRSA recognizes health centers that have made notable achievements in access, quality, health equity, health information technology, and COVID-19 public health emergency response. The Community Health Quality Recognition (CHQR) badges are based on the prior year's Uniform Data System (UDS) data. The Will County Community Health Center was awarded a badge for being a "COVID-19 Public Health Champion!" The COVID-19 Public Health Champion badge recognizes health center contributions to providing critical public health services to health center services during the COVID-19 public health emergency, based on UDS data from the most recent reporting year. The badge is awarded to the top 10% of health centers that provided COVID-19 vaccinations and/or COVID-19 diagnostic testing to the largest proportion of active health center patients.

**Request for Approval to Remove a Service from our Scope –** As an FQHC, we first need approval from the Governing Council in order to add or changes services, hours, or service locations. We also need to ask HRSA for approval of any changes in services or service sites. In May 2020, our former WCHD Executive Director Susan Olenik was approached by the Americans for Better Hearing Foundation and asked if the WCHD would consider allowing them to provide hearing testing and services at our Community Health Center. An agreement was formed to allow them to provide low-cost hearing testing and hearing aids to our patients. At the time they were informed of the demographics of our patient population. Few of our patients made use of their services, although many were referred to them. The majority of patients were either uninsured or underinsured. After about a year, the ABHF lost their audiologist who was assigned to our health center, and the COVID epidemic ensued. We attempted to reach them to reinstate services but have not received a response from them. Meanwhile their contract expired. We ask the Governing Council to withdraw this service from our Scope of Services as we have no suitable replacement at this time. Considering our upcoming HRSA site visit, we want to stay compliant with an up-to-date list of services within our scope.

**Strategic Planning**

At our December Governing Council meeting, we annually assess our community needs, our services and service sites, and determine our directions for the coming year. This year we will examine and discuss the following, in consideration of our strategic goals, objectives, and strategies for 2024:

- 2023 Strategic Plan and outcomes
- Financial indicators: revenue, expenses, accounts receivables, and any anticipated changes for 2024.
- Quality indicators: HRSA and insurance quality indicators, and our results compared to benchmarks and previous years; provider productivity, patient surveys, incident reports and trends.
- Access to care: Will County area Medically Underserved Areas, according to the latest published reports from HRSA; our current service area and service sites in relation to these MUAs. Are our sites available and easily/ promptly accessible to the persons in the MUAs? Consider referral sources; patient numbers and visits; patient visits by location. Are there any barriers to physical access, including transportation? Do zip codes listed as our service area (catchment area) correspond with where are patients actually reside?
- Services: Our current services compared to the size and needs of the community; new health resources in the community; our current staffing and adequacy in consideration of our budget and resources. Anticipated staff changes and anticipated new services in the coming year. Do we have enough providers for primary care, pediatrics, OB/gyn, and dental?

- National, State, and County wide health statistics and indices, including Will County MAPP assessments, CDC and IDPH reports, and other respected health data sources; identified health inequalities regarding population, race, gender, and ethnicity.

## **CMO REPORT**

### **Quality Initiatives:**

- As we prepare for our HRSA audit in April 2024, we are reviewing our Dental Nitrous Oxide program. This is considered a higher risk program, thus the program protocols were reviewed and updated. These updated protocols and the ongoing quality assurance around this program jibes with the new Nitrous Oxide equipment and special staff training that occurred as well
- The health center lost two (2) Psychiatry providers who were trained to see both adults and children. Due to this shift, the health center was responsible to provide the patients with community resources for other Child Psychiatry providers.

An exhaustive research project was completed, and the patients now have a resource list of community Child & Adolescent Psychiatry providers

- The CQI committee continues to work towards increasing the Colorectal Cancer screening percentages. The latest initiative is to recultivate the plan with our internal Quest lab to assist with outreach to our patients who have not had screenings.
- The writer has initiated a "Monthly Photo Quiz" for academic enrichment and education for the providers. These photo quizzes offer a pictorial view of a clinical condition, a quiz question, with an annotated answer. This effort is in an attempt to continue to keep the clinical operation enriched with academic components. Examples are:  
(Photos were shown)

### **Infectious Disease Watch:**

- COVID-19 rates, though overall increased due to it being "sick season", they have not returned to Pandemic levels.
- This is now expected given the presence of the COVID vaccination
- There is, and always will be, a new variant; it is called BA.2.86.
- It is ***no more infectious*** than any other COVID variant
- Current Epidemiological Data:
  - \* there are a Half Million new cases from January 2023 – November 2023 (world)
  - \* there are 2,400 new deaths from January 2023 – November 2023 (world)
  - \* a grand total of 6 million deaths worldwide since the beginning of the Pandemic
- Recommendations:
  - \* vaccinate (ages 6 months and up)
  - \* continue good hygiene practices (hand washing, surface cleaning in public spaces)
  - \* mask if you are immunocompromised (though masking in crowds is still a good idea for all)
  - \* do not go to work or public events when ill
- Current Trend Data were shown(pictorial):

### **Organizational Culture:**

- The health center, as of this week, has a new "Meditation Lounge" for our staff.
- This lounge is intended for prayer, meditation, breast pumping, etc.

### **Staffing:**

#### **Vacancies & Hires**

- There is an **incredible improvement** in our staffing of **Certified Medical Assistants** in the health center
  - \* **3** open positions (**down from** having **10 open positions** in October 2023)
    - 7 CMAs have been **hired**
    - \* 6 of 7 have already started within the two months

\* 1 of 7 will start on December 11, 2023

\* 3 temps are now in our employ (this is down from 5 temps in October 2023)

- **Behavioral Health Manager**

\* **hired** since last report, starts on January 8, 2024

- **L.P.N.**

\* 1 open position

\* 1 **hired** since the last report, starts on December 11, 2023

- **Family Medicine Physician**

\* 1 open position

\* No current applicants

- **Family Medicine APRNs**

\* 2 **hired** since the last report, both have started (one in September 2023, and one in November 2023)

- **Behavioral Health APRNs**

\* 2 **hired** since the last report, one will start on January 8, 2024, and one will start on January 21, 2023

- **Psychiatry MD**

\* **hired** since last report, starting on January 21, 2023

**CDO Report:**

**Mobile Dental and Medical Services.**

Cortney, dental secretary is doing great job scheduling and coordinating mobile dental visits.

Dental is in process to schedule dentist on the mobile once a week to perform procedures not done by PHDH.

**Thank You E- mail from a dental patient!**

Hope all is well. Just wanted to send you our feedback on working with WCHC's dental clinic doctor Dr. Katherine Faber, and her dental nurses Vera and Sally.

We are very grateful for the care they are providing to my mom Kamal Aggarwal. Dr. Faber has very caring and sincerely commitments to her patients. She diagnosed my mom's dental issues quickly, did the necessary tests/X-rays on spot and then devised a holistic treatment plan based on options available to her at the clinic. Last but not the least they took necessary steps extract her teeth that were causing mom a lot of pain and following up with the necessary fillings to mitigate the issues further. My mom healed well after the procedure and despite a busy schedule Dr. Faber even called and checked on my mom after the extractions.

My mom is getting real good care there. Dr. Faber and her team genuinely care. Even though my mom does not understand English, she can feel her care and warmth in her interactions, and Dr. Faber and team's commitment to her dental well-being.

So please extend our sincere thanks to them for their good work! It is wonderful to see such high level of care and commitment at WCHC's dental clinic.

Please feel free to share this review with them as well as your management team.  
Thank you,

**Internal Referrals**

From November 1-26, 2023, dental clinic received 39 internal referrals from our WCCHC medical providers. It includes children, pregnant women and adults referred to Dental for oral health care.

**F. Finance and Expenses**

**Revenue**

Ms. Maragos presented the revenue ending November 2023. The target was 91.7% and our actual was 89.6%. Doing very well in Behavioral Health, Medicaid, and Dental Medicaid. We had a variance of 2.0%.

### Expenditures

Ms. Maragos presented expenditures ending November 2023. Our target was at 91.7%. Our expenses are at 83.7%.

### Accounts Receivable

Ms. Oshin presented the November 2023 Accounts Receivable report. She stated the benchmark is 80-90% on the 0-120 days. Charges are sent every day for the 0-30 days. The benchmark for 121-181 days is 10-20% and we are 12%.

### Self-Pay Patient Balance

Ms. Maragos stated Ms. Oshin and her meet and review this report every 3 months. The system is set for automatic write offs.

### Patient and Visits report

Ms. Maragos presented the Patients and Visits report through November 2023. We currently have 11,425 unduplicated patients compared to in 2022 we had 10,988. 250 School based visits and 188 mobile visits took place.

### Provider Productivity

Dr. Byrd spoke of the Provider Productivity report.

### Discussion

#### Nomination for Governing Council Board Secretary

Mr. Dyche spoke of Ms. Easley's willingness to replace Ms. Kornacker as Secretary until April 2024. A **motion** by Ms. Luebke and **seconded** by Ms. Brassea to nominate Ms. Easley as Secretary for the Governing Council.

## **G. ACTION ITEMS**

A **motion** was made to approve nomination of Ms. Easley to replace Ms. Kornacker as Secretary of the Governing Council. Ms. Luebke **moved**, and Ms. Warren **seconded**. **Motion carries.**

A **motion** was made by Ms. Warren to table New Hospital Fees and **seconded** by Mr. Crowner. **Motion carries.**

A **motion** was made by Ms. Easley to table policy MR-0011 Confidentiality of Patient Records, and **seconded** by Ms. Brassea. **Motion carries.**

A **motion** was made by Ms. Easley for the approval to apply for Change in Scope to remove Audiology services for the 330 Grant and **seconded** by Ms. Warren. **Motion carries.**

A **motion** was made for approval of contract with Whitney Lipscomb, MSN, APRN. Ms. Warren **moved** and Mr. Crowner **seconded**. **Motion carries.**

*\* Ms. Luebke asked how young the Psychologists are seeing? Dr. Byrd stated 5 yrs. and over. Medications are being prescribed for that age group if needed.*

A **motion** was made for approval of contract with Dr. Jasmine Flowers, Psychiatrist. Ms. Warren **moved**, and Mr. Lauridsen **seconded**. **Motion carries.**

A **motion** was made for approval of credentialing for Hilda Kina, APRN, Family Medicine. Ms. Warren **moved** and Mr. Crowner **seconded**. **Motion carries.**

A **motion** was made for approval of credentialing for Miriam Kanan, APRN, Family Medicine. Ms. Easley **moved** and Ms. Warren **seconded**. **Motion carries.**

## DISCUSSION

### Strategic Planning

- Ms. Maragos asked if the Governing Council feels the Mission Statement for the Center should be changed? **“The mission of the Will County Community Health Center is to improve the health of the residents of Will County by providing access to quality medical, behavioral health and dental care through community collaboration, service and education”**. Staff in attendance and Governing Council members all agreed the Mission Statement should stay as is.
- Ms. Maragos questioned if the Purpose Statement should be changed? **“Fulfilling the healthcare needs of Individuals and our community”**. Decision was made to change the statement to needs of **“children, adults and our community”**.
- Ms. Maragos questioned if the Core Values should be changed? **“Respect, Integrity, Professionalism, Quality, Compassion, and Dedication”**. Ms. Maragos discussed adding **“Compassion”** into Core Values. No changes were decided on.
- Health Center Trend report was reviewed and discussed.
- Referral Source: Ms. Maragos stated they are questioning why more referrals are not coming in from the Health Department. This will be discussed at the next Directors meeting.
- Incident Reports: Many incidents have decreased in 2023.
- Performance Indicators: Report looks good.
- Patient Satisfaction Surveys: This is on a scale of 0-4. Once we instituted the QR link, the number of surveys decreased. We are considering going back to paper. Ms. Harkins stated Spanish speaking patients prefer not to go online. Ms. Bilotta stated that the HD has a Social Justice Intern who is looking into it further for the Health Department and the Health Center.
- No Show Report: Ms. Lindsey asked that the No Show report be sent out quarterly for GC review. Mr. Crouner questioned if we have a baseline and if this is typical? Ms. Maragos stated **“Yes”**. Dr. Byrd stated the typical no show rate for FQHCs is at 30%.
- Report by ENI: Ms. Maragos reviewed the report.
- Assessment Data: Ms. Maragos reviewed the assessment data.
- Service Area report: Patient zip codes were reviewed. Ms. Harkins stated we also have a high number of patients from zip code 60403, traditionally a medically underserved area.
- Access to Care: The high ratio indicates there is a stronger need for Physicians in our area. The ratio for Mental Health providers is double compared to the State of Illinois. Uninsured adults in Will County have gone down by almost 50%. The number of uninsured children has gone up. 11.5% of persons in Will County have Medicaid and 10.5% of persons in Will County have Medicare. Persons living in poverty is at 7.9%.
- Changes in Healthcare Climate: The new VNA in Joliet is expected to see approximately 5000 patients.
- Internal Strengths: Dental services, strong substance use disorder program, Vision services, we have a high Uninsured population served, the Hispanic population served is at 52.15%, home blood pressure monitoring program, screening for depression.

### 2024 Goals

- Pop Health Champion – Ms. Maragos stated we look at doing outreach for those issues identified as high risk or for health inequities.
- Goal 1: Ms. Warren suggested we keep expanding Monee in our 2024 goals. Identify the high-risk clinical processes. Expand Care Clinic hours.
  - \* *Ms. Easley asked what is the criteria for the Population Health Management? Ms. Maragos stated it would be identifying what populations we need to target. Dr. Byrd stated the champion would be the provider who spearheads an initiative or campaign.*
- Goal 2: Increasing Access to Care - Ms. Harkins will work with Mr. Jass on this. Dr. Byrd felt a strategy to address this would be to collect national data. Marketing. Grassroots market campaign. Using multimedia. Education. Work with Well Woman Program and WIC.

- Goal 3: Address Healthcare disparities.
  1. African American woman and low birth rate/high mortality rates in childbirth.
  2. Entry to pre-natal care

Mr. Crowner suggested finding out why the No Show appointments are happening.  
Ms Maragos stated a preliminary strategic plan will be brought to the Governing Council in January for further refinement and review.

**H. PUBLIC CONCERNS AND COMMENTS:**

**I. COUNCIL MEMBERS' CONCERNS AND COMMENTS**

**J. EXECUTIVE COMMITTEE:**

A **motion** was made at 7:15pm by Ms. Warren to move into Executive Committee for Personnel Matters and **seconded** by Mr. Crowner.

A **motion** was made at 7:33pm by Mr. Crowner to come out of closed session and **seconded** by Ms. Warren.

- K. ADJOURNMENT:** A **motion** was made for adjournment at 7:34pm by Mr. Crowner and **seconded** by Ms. Easley. **Motion carries.**

**NEXT GOVERNANCE COMMITTEE MEETING WILL BE Wednesday, January 3rd, 2024**  
**NEXT GOVERNING COUNCIL MEETING WILL BE Wednesday, January 3rd, 2024**

**4:30pm**  
**5:00pm**

Prepared by,

  
\_\_\_\_\_  
Mary Kilbride, Executive Assistant

  
\_\_\_\_\_  
Vernice Warren - Vice Chairperson