

**WILL COUNTY COMMUNITY HEALTH CENTER
GOVERNING COUNCIL MEETING MINUTES
Wednesday, November 5, 2025**

MEMBERS PRESENT

Dr. Matthew Glowiak – Chair
Vernice Warren – Vice Chairperson
Nicole Luebke – Treasurer
Dr. Tracy Metcalf
Nag Jaiswal
Alejandra Zamudio
Paul Lauridsen
Frank Sandoval - 5:10pm

MEMBERS ABSENT

Dr. Jose Balboa
Dr. Christopher Galloway
Dr. Julia Koklys

WCCHC STAFF PRESENT

Stacy Baumgartner, Chief Executive Officer
Dr. Jennifer Byrd, Chief Medical Officer 6:15pm
Phil Jass, Quality Improvement/Risk Management Coordinator
Dr. Garg, Chief Dental Officer
Bose Oshin, AR Billing Manager
June Reisner, Administrative Assistant to CEO
Melissa Jackson – Budach, Staff Nurse III
Kathleen Harkins, Community Outreach & Marketing Coordinator

WCHD STAFF PRESENT

Elizabeth Bilotta, Executive Director
Denise Bergin, Assistant Executive Director

OTHERS PRESENT

Adam Lipetz, Assistant State's Attorney

CALL TO ORDER:

- Dr. Glowiak called the meeting to order at 5:04pm
- Pledge of Allegiance
- Mission Statement: Read by Dr. Glowiak

ROLL CALL AND DETERMINATION OF QUORUM: Quorum met.

REVIEW AND APPROVAL OF THE MINUTES:

- Board minutes from October 1, 2025, **approved** by Ms. Zamudio, **seconded** by Dr. Metcalf, Ms. Warren abstained, **motion carries**.
- Board minutes from October 3, 2025, **approved** by Mr. Lauridsen, **seconded** by Ms. Warren, Dr. Metcalf abstained, **motion carries**.

CHAIRMAN'S COMMENTS:

- Dr. Glowiak reminded the members of Governing Council regarding the attendance policy; a notice will be issued to any member after their fourth absence.

PUBLIC COMMENT FOR AGENDA ITEMS ONLY:

- None

WILL COUNTY COMMUNITY HEALTH CENTER REPORT:

- Ms. Bilotta gave an update on events happening in the Health Department.
- Ms. Bergin gave an update regarding the government shutdown. There has been no significant effect on the agency at this time.

WILL COUNTY COMMUNITY HEALTH CENTER STAFF PRESENTATION:

- Melissa Jackson – Budach gave a presentation on the Women's Health services at the health center.

REPORT FROM THE QUALITY COMMITTEE CHAIRPERSON

- Ms. Warren reported on the discussion at the Quality Committee meeting, she report on the incident reports, patient complaints, key performance indicator, patient satisfaction surveys and the quarterly risk assessment.

CHIEF EXECUTIVE OFFICER REPORT:

- Ms. Baumgartner indicated that the school-based center is progressing well towards its targets, having recorded 554 student visits in the first quarter.
- A standardized provider template was put into place, resulting in the creation of 114 opportunities for extra visits each week.
- The Service Area Competition Grant application was finalized, with a request exceeding \$ 2 million annually for a duration of four years.
- The health center received a site visit from the AIDS Foundation of Chicago during which some documentation and program related matters were identified as needing improvement.

CHIEF MEDICAL OFFICER REPORT:

- Dr. Byrd took on service at the school based health center and is seeing patients at the Joliet clinic for a provider who is out on medical leave.
- The number of exclusions at Brooks Middle School has reduced from 43 during the 2020 – 2021 academic year to 16 this year.
- The health center leadership is collaborating with Midwest Optometry to integrate optometry services into the school-based health center.
- Staffing levels are adequate in comparison to staffing experiences in the past three years.

CHIEF DENTAL OFFICER REPORT:

- The mobile unit is scheduled to be garaged for the winter starting on December 11, 2025, in order to prevent the water lines from freezing and cancelling scheduled events.
- The Illinois Department of Public Health has issued a new recommendation to sterilize the slow speed handpiece motor following each patient.
- The dental clinic acquired a lightweight, rechargeable teeth polisher, designed to produce minimal aerosol emissions and enhance ease of use.
- The average no-show rate is approximately 22-24%, presenting a challenge. There were 76 internal referrals from the medical providers.

REVENUE AND EXPENSES REPORT

- Revenues remain marginally below the target.
- Amendment have been implemented to the Blue Cross Blue Shield plans.
- The availability of grant funding has decreased as a result of the exhaustion of ARPA funding.
- A 330-draw scheduled for next month is expected to raise grant revenue to approximately 85%.
- Expenditures are nearly meeting the target; they are merely 5% above due to the necessity for temporary staffing.
- Target for salaries is set at 75%, however, the current expenditure stands at approximately 79%.

PATIENT & VISITS REPORT

- The UDS reporting system has transitioned to a cloud-based platform, which has resulted in our inability to access the updated reports. GBS is currently addressing this issue. The aim is to provide a report to the Governing Council at the December meeting.

PROVIDER AND DENTAL PRODUCTIVITY REPORT

- Peer reviews are necessary for medical malpractice and FTCA coverage; providers typically receive favorable scores.
- The scores are derived from the documentation provided in the notes, rather than from the data extracted by the computer.
- As a result of the provider scheduling templates not consistently aligning with the benchmark, behavioral health providers were not meeting their benchmarks. This situation is expected to improve now that the templates have been standardized.
- The benchmarks are currently being evaluated across all providers, and specific targets are being developed for the dental hygienist and social workers.
- The dental department retrieves four charts to review for each provider.
- Common mistakes consist of measuring blood pressure without documentation, they should be implementing corrective measures and communicating findings to healthcare providers.
- The dental clinic assesses the use of Nitrous Oxide in pediatric patients to guarantee ongoing surveillance of their vital signs.

QUALITY REPORT

- It has been reported that incident reports are monitored through a dashboard, there were a total of thirteen recorded for the quarter, predominantly medical in nature (code blues).
- Managers monitor the incidents to develop a strategy aimed at minimizing future occurrences.
- July had a high number of complaints, while August had one, September had no complaints.
 - Paper surveys had 120 responses, while the kiosk surveys had 56 responses. The scores range above average, with high threes and fours.
 - Several comments express a desire for a television to be placed in the behavioral health lobby.
- The performance indicator report indicates that four target goals were achieved by the end of the third quarter in 2025.
- A work group focused on health quality measures has been established; this group comprises clinical personnel, IT specialist, and a representative from GBS. The team is currently developing workflows aimed at quality measures. The work product will be a reference manual for clinical personnel to guarantee accurate documentation in NextGen.

ACTION ITEMS:

- A **motion** was made by Dr. Metcalf, **seconded** by Mr. Sandoval, for approval of tabling the approval of policy PCS-MM-0021 340B Outpatient Drug Definition, **motion carries**.
- A **motion** was made by Ms. Warren, **seconded** by Ms. Zamudio, for approval of tabling the approval of policy PCS-MM-0022 340B Duplicate Discounts, **motion carries**.
- A **motion** was made by Ms. Warren **seconded** by Mr. Lauridsen for approval of policy PCS-MM-0023 340B Life Saving Medications with grammatical corrections, **motion carries**.
- A **motion** was made by Dr. Metcalf, **seconded** by Mr. Sandoval, for approval of tabling the approval of policy QRM-0011 Patient/Visitor Complaint & Grievance Resolution, **motion carries**.
- A **motion** was made by Ms. Warren, **seconded** by Ms. Zamudio, for approval of 2026 meeting calendar for Governing Council and Committees with exception of date change from July 1, 2026, to July 8, 2026, **motion carries**.
- A **motion** was made by Ms. Warren, **seconded** by Mr. Sandoval for approval of Governing Council Member Nag Jaiswal joining the Finance Committee, **motion carries**.
- A **motion** was made by Ms. Warren, **seconded** by Ms. Zamudio for approval of Governing Council Member Tracy Metcalf joining the Quality Committee, **motion carries**.
- A **motion** was made by Ms. Warren, **seconded** by Mr. Lauridsen, for approval of Blue Line Security agreement, **motion carries**.
- A **motion** was made by Mr. Sandoval, **seconded** by Mr. Jaiswal, for the approval of Service Area Competition 330 Grant, **motion carries**.

- A motion was made by Ms. Warren, seconded by Mr. Sandoval, for the approval of Chicago Biomedical Agreement, motion carries.
- A motion was made by Ms. Warren, seconded by Mr. Sandoval, for the approval of contract revision of Dr. Faber, motion carries.

PUBLIC CONCERNS AND COMMENTS

- None

COUNCIL MEMBER'S CONCERNS AND COMMENTS

- None

ADJOURNMENT: A motion was made by Ms. Zamudio, seconded by Mr. Sandoval, for the approval to adjourn the meeting, motion carries. **adjourned** at 6:42pm,

FINANCE COMMITTEE MEETING WILL BE: Wednesday, December 3, 2025, 4:30pm

GOVERNING COUNCIL MEETING WILL BE: Wednesday, December 3, 2025, 5:00pm

Prepared by:



June Reisner, Administrative Assistant to CEO



Vernice Warren - Vice Chairperson