Falls Community Health Governing Board Minutes  
Thursday April 18, 2019 at 12:00 pm

**Present:** Gwendolyn Martin-Fletcher, Jim Kellar, Dr. Katie Skinner, Dr. Bruce Vogt, Bernie Schmidt, Jonathon Ott via phone, Cindy Binkerd,

**Absent:** Susy Blake, Linda Karnof, Tracy Johnson,

**Staff Present:** Jill Franken, Dr. Jennifer Tinguely, Kelly Piacentino, Rick Pudwill, Lisa Stensland

Call to Order: The meeting was called to order by Dr. Bruce Vogt at 12:03 pm.

A motion was made to approve the consent agenda items including the minutes for Falls Community Health Governing Board dated March 21, 2019 and the QA/QI minutes from March 27, 2019 supported by Jim, seconded by Bernie, motion carries.

**NEW BUSINESS:**  
**FINANCIAL REPORT:**

The Falls Community Health reports attached are through the month ending March 31, 2019. We are 25% through the fiscal year. The last financials presented were through the month of February 2019.

**Operating Revenues:**
- Net Patient Revenue consists of all patient charges and adjustments. Total Net Patient Revenue for March came in at $353,185 which is 19% of the YTD actuals to annual budget.
- Total Grant Revenue of $412,422 includes grant drawdowns from the Community Health Center, Ryan White Part C, HIV Prevention, Family Planning, Colorectal Cancer and Refugee grants.
- Total Other Revenue is $27 for March.

Total Operating Revenues YTD March is $1.7M which is 19% YTD actuals to annual budget.

**Operating Expenses:** Operating expenses are classified within 7 categories. Total expenses were $1,066,753 for the month of March.
- Personnel expenses are at 21% of the budget. March had 3 pay periods. 2019 is $261K favorable to YTD budget.
- Professional Services are at 17% of the YTD budget. This category includes payments to Center for Family Medicine, locum providers, interpreter services and laboratory expenses.
- Rentals are at 4% of the YTD budget. Technology charges occur in July of every year.
- Repair and Maintenance is at 5% of the YTD budget.
- Supplies and Materials are at 18% of YTD budget. Category includes general medical and dental supplies, immunization & pharmaceuticals as well as the monthly maintenance of the electronic medical and dental software systems. 2019 is $56K favorable to YTD budget.
- Training is at 21% of the YTD budget. The majority of expense are continuing education expenses and out of state travel. Majority of non-continuing education is paid through quality and expansion grants.
- Utilities are at 2% YTD budget. The majority of this expense occurs quarterly. Last payment occurred in December, next payment is in April 2019.

**Non-operating Revenue (Expense):**
- Other Revenue is at 30% of the budget and includes USD dental lease payments and recovery of prior year revenue.

**Net Income (Loss):**
- March actuals are showing net loss of ($269,269) and YTD net loss of ($238,790).

A motion to approve the financial statement as presented supported by Katie, seconded by Cindy, motion carries.

Productivity as a whole is around 80%. Physicians are at 105%, APP’s are at 49% (staff openings), Nursing is at 97%. Dentist are at 84% with one vacancy, Dental Hygiene is at 102%, Dietitian are at 86 %, Mental Health/Substance abuse is at 76%, and case management/Social Work is at 75%.
QUALITY:
Board Risk Management training:
Risk Management includes clinical, administrative and financial risks that could impact the organization. The goal is to identify, evaluate and reduce risk of injury to patients, staff, visitors, volunteers and others and to reduce the risk of loss to the organization. Clinical risk management requirements per FTCA include: Risk management policies and procedures, risk management training for staff, quarterly risk management assessments and annual reporting to the board. One of the clinical key risk management policies is incident investigation that documents, analyzes, addresses and develops a plan of corrective action for clinical errors. Referral, order and hospital discharge tracking policies are also key to mitigating areas of high risk.
Annual risk management training for staff includes HIPAA, blood borne pathogens, general infection control, hand hygiene, fraud waste and abuse, workplace violence prevention and any other training need in response to an incident. Health center management performs quarterly risk assessments by reviewing occurrences/incidents and discussing trends, completing root cause analysis, and implements interventions.

A review of our 2019 risk management plan with updates was provided:

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<tr>
<th>Top Risks</th>
<th>Action plan</th>
<th>Update</th>
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<tbody>
<tr>
<td>Perception that patient behaviors present safety risk</td>
<td>Evaluate need for non-violence crisis intervention</td>
<td>Social worker attended Management of Aggressive Behavior (MOAB) training. Discussing next steps for staff in May.</td>
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<td>Repeated themes in occurrence reports</td>
<td>o Re-education and environmental controls to decrease mislabeling of lab specimens</td>
<td>Complete</td>
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<tr>
<td></td>
<td>o Reviewing for root cause of patient demographic errors</td>
<td>In progress</td>
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<td>o Add root cause analysis staff documentation requirements for any incidents</td>
<td>Complete</td>
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<td>o Continued awareness of importance of reporting; highlighting a “good catch” of the month</td>
<td>In progress</td>
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<td>o Integrate promoting professionalism pyramid into incident/occurrence procedures</td>
<td>In progress</td>
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Safety report:
Occurrence and incident data reports were provided to the board. An example of how environmental controls were implemented after an incident was provided. There were six categories of occurrences in 2018, including: chart information, patient information, lab results and labeling, immunization administration, script issues, specimen labeling issues and miscellaneous.
ACCESS:
The dental clinic is hoping to offer denture services for the patients, including those with Medicaid. We are looking to partner with a retiring dentist in town who would help us set up and begin doing that work here. Dr. Kohler has done them in her former practice. A full set proposed fee would be $1,300.00, an upper or lower would be $650.00. There are five total visits involved for placing dentures. The hope is to have this up and running in the next couple of months.

The 2019 fee schedule was reviewed and approved by the board. A motion to accept the 2019 dental fee schedule as presented, supported by Bernie, and seconded by Jim, motion carries.

CREDENTIALLING:
A motion was made to accept the credentialing and grant privileging for Cassandra Heuer, supported by Jim, and seconded by Katie, motion carries.

A motion was made to accept the credentialing and grant privileging for Megan Moeding, supported by Bernie, and seconded by Jim, motion carries.

BOARD SELF ASSESSMENT
The board reviewed the self-assessment and was happy with the results. A motion was made to accept the board assessment as presented, supported by Katie, seconded by Jim, motion carries.

EXECUTIVE DIRECTOR’S REPORT:
See report below:

PUBLIC INPUT:
None at this time

A motion to adjourn, supported by Bernie, seconded by Cindy, motion carries.
1:05 pm

H. Bruce Vogt- Board Chair  May 16, 2019
Board Update - Linda Barkley’s patient board member appointment will be on the city council agenda in May. Linda Karnof has submitted her resignation for the board- her appointment was to end January 2020. Tracy Johnson’s term ends in May.

Provider Updates - FCH leadership continues to seek and respond to leads to fill the dentist position, as well as strategize on dentist recruitment. Options for meeting the access needs include seeking a locum tenens dentist as well as posting for a part-time dentist.

Operational Updates

CFM Contract- Amy and Denisa (CFM) continue to meet and work through revisions needed with the agreement between City of Sioux Falls and CFM.
- Fees will be adjusted and comparable to MGMA salary data
- Clause to stipulate acceptable use of social media will be added
- HIPAA compliant notification of patient dismissals for violent or threatening behavior is bring explored (rarely occur, high risk)
- Agreement will assure both parties full federal, state, and local requirement compliance

Jill and Mark Huntington have a meeting on 4/25 to review draft of agreement, which will then be presented to CFM Ops committee in early May, with a

Care Team Transformation - The first couple weeks have been very positive, the team is continuing to find benefit in the new work structure. The increased care and focus on our rising risk patients with diabetes, including improved documented care plans, have stood out to be real patient and staff satisfiers. Some identified challenges we are working on, include improving work load efficiencies and continued training.

Patient Feedback
- The nurse was very helpful and explained things. Received information that will be very helpful with improving my health and my medial issues.
- Very nice and thoughtful
- RN Melissa and also Dr. Megan made me feel good about myself and they were helpful awesome people.
- I’ve been coming here since I was a little girl and had some really good care and treatment. Thank you for helping me

Staff Feedback
From Residents/APPs/Faculty:
- Chart prep by the LPN was helpful, Chart prep- fabulous, Pre-visit prep- worked out well,
- Went well day 2 - still liking the new system
- Appreciated RN work of HCM- saved a lot of time
- Good team with Amy- efficient and always prepared. Tom- always willing to help, well informed about patients and knows them well

From LPNs
- When falling behind rooming patients, having RN room their own patient helped me catch up
- Erin was great
- My RN had prepared the pre-visit info as a nice gesture. That is called teamwork. Anticipating what each other needs without being asked to do it
- It helps to be paired with a team player which in return also gives time to prep next shift

From RNs
- Kerri did an amazing job in prep- very prepared
- Huddle was strong- good communication
- Patient was appreciative and thanked me for introducing her to triage counselor
- Love care planning/setting goals with patients

FCH 2020 Budget - Health Request for Results documents have been submitted, for the Community Triage Center and for a Health Information Technology Specialist position. Operating budget drafts are due by end of April. 2020 budget will be presented to FCH board in July.
2019 CHNA Report— the 2019 Community Health Needs Assessment, a joint partnership between SFHD, Sanford, and Avera was released on 4/1, and a copy of the Executive Summary is attached. Community Triage Center— also provided is a great overview of what a CTC is and how it benefits communities. Work continues to develop the plans for location, budget, and governance.

Good News!

- Dr. Charlie Shafer was elected to Alpha Omega Alpha (AOA). It is the medical honorary society (medical schools). Every year, students, residents/fellows, faculty and alumni are elected by AOA members. Only 6-8 students are elected each year, 2 residents/fellows, 1 faculty member, and 2 alumni (one from in-state and one out-of-state). Charlie was elected as a faculty member.

- Sandy Frentz, who assures FCH is well prepared for disasters, was awarded the City’s STICKR Rock for her work with the recent emergency response to the spring floods. Sandy is the Public Information Officer for the emergency operations, and received many compliments about her excellent work in this area. Congrats Sandy!

Employee Recognition

The April Employee shoutout was awarded to Sandy Frentz! Congratulations!

- Amy and Alicia have been giving so much of their time and talent to the Transit Innovation team. One work describes the progress they are making and it is: HOPEFUL. Here is an excerpt from an email from Jason Reisdorfer, Innovations Director:

On Mar 27, 2019, at 9:39 PM, Reisdorfer, Jason <JReisdorfer@siouxfalls.org> wrote:

Directors- you guys should be proud as heck of your team that is serving on the Transit Core Team.

We just hosted an ‘ideation session’ with around 40 members of the public...everyone from top execs at Avera & Midco to riders, Pastors and non-profit volunteers. The session was a huge success, and these folks all left our 3-hour session feeling energized. The word that came up over and over in their feedback to us was ‘hopeful’. They are all very hopeful and optimistic that the work this team is doing will make a big impact for years to come.

Let me lift up a few key contributions so you know just how thankful I am to have your support.

Jill- Alicia & Amy have been outstanding. Alicia did an amazing job of leading our team through a practice run before leaving for vacation and set us up perfectly to succeed. Amy was a key facilitator in tonight’s session and nailed the organization, agenda and pace of tonight’s meeting.