



# Board Meeting Minutes

**Meeting Date:** September 13, 2021 **Time:** 7:30 am **Location:** Via Zoom

**Chairperson/President/Facilitator:** Jerry Rogers, Chairperson

**Attendees:** Kathryn Ellis (Board Vice Chair); Kim Harvey-Manus; Jerry Rogers (Board Chair); Mark Mertens; Dr. Steven Crawford; Beth McDaniel (Board Secretary); Jenelle Behnen; Martha Maxwell and Jane Sullivan

**Not in Attendance:** Dennis Gannon; Cliff Lane; Mary Dunnegan; John Lamping (Board Treasurer); Tammy Fulbright and Dr. Josh Isaacson

**Staff in Attendance:** Susan M. Curfman, MA (President & CEO); Amy Rhodes (CFO); Katie Harman (VP, HR); Katy Murray (VP Corporate Compliance/QM); Rachael Bersdale (Chief Behavioral Health Officer); Lisa Rothweiler (COO); Patty Vanek (VP, Clinical Quality); Tony Sokolic (VP, Youth BH); Cindy Vessell (VP of Community Services); Monica Johnson (Director of Nursing); Amy Phillips (VP, Adult BH); Christina Gower (AVP, BH Adult); Dr. Cook (Dir of Oral Health) and Dr. Rohatgi (Chief Medical Officer)

**Not in Attendance:** Kim Elbl (VP Capital Campaign and Fundraising)

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## 1. Meeting Open

The September 13, 2021 Board Meeting was called to order at 7:32 am by Jerry Rogers with a quorum of members present. The board met via zoom.

## 2. Approval of Agenda

The September 13, 2021 Board Meeting agenda was reviewed with no additions requested.

**Recommendations:** "I, Mark Mertens move that we approve the September 13, 2021 Agenda as presented." Jane Sullivan seconded the motion. The motion carried.

## 3. Approval of Board Minutes

### a. Approval of August 9, 2021 Minutes

The August 9, 2021, board meeting minutes were reviewed with no revisions requested.

**Recommendations:** “I, Mark Mertens, move that we approve August 9, 2021 Board Meeting Minutes as presented.” Kim Harvey-Manus seconded the motion. The motion carried.

- Sign the final approved board meeting minutes (Jerry Rogers, Chairman)

#### **4. Mission Statement**

Kim Harvey-Manus read the mission statement, *“To lead in providing quality, comprehensive healthcare that is affordable and accessible, and to support the dedicated professionals who make caring for the individuals we serve their number one priority.”*

#### **5. Program Highlight – Board Responsibility – Sue Curfman**

Sue Curfman spoke of the HRSA SAC that has to be completed every three years this requires involvement from most of leadership. There are elements that are looked at for board responsibility, the OSV was included in the board packet for each member to review. Authority includes the bylaws, minutes and ensuring that the board has responsibility over the health center. The second element looks at the monthly meetings, annual approvals of CEO and that project budgets and hours of operations are reviewed with the board. The third element looks at quorums at monthly meetings. Health center policies come to the board for approval is part of the 4<sup>th</sup> requirement and they will look at the last 3 years of board minutes to make sure we have met all approvals. The fifth element was also reviewed. One area that we have done well with is board oversight. Jerry Rogers asked about QIQA and the time to assist with having a board member participate. Sue Curfman stated that a survey will be sent to board members to see if there is interest in QIQA. Jerry Rogers stated that board members can contact Beth McDaniel or Patty Vanek to find out more about QIQA. Mark Mertens asked about the board members and the consumer percentage, Jerry Rogers stated that we are in compliance at this time. Jenelle Behnen also would like to know more about the committee and involvement.

#### **6. Financial Review**

##### **a. Financial Performance**

Amy Rhodes stated that cash on hand is \$9.3M this is due primarily for the inability to bill some DMH programs. The AR is about \$1M higher than July which is due to this also. The

total unrestricted cash is \$4.6M. The cash continues to be in a good position. All programs had profits for the month of July. The productivity was lower due to providers switching and staffing issues. The community services did have a loss due to timing of fundraising events. The full notes are included in the board packet financials.

**b. Pre Audit Information from Auditors**

The auditors reported to Executive Board last week and went over the preparations for this month's audit.

**Recommendations:** "I, Kim Harvey-Manus, move that the Board approve the financial report for the month of July 2021." Jane Sullivan seconded the motion. The motion carried.

**8. CEO's Report**

**a. Financial Focus Update**

i. Growth Report

Sue Curfman went over the productivity for each division. Dr. Swope is leaving PC their productivity was at 67%. BH Adult was 64%. BH Child was 56, Dr. Lucas passed away in August and he was a Genoa provider they are looking to replace his hours. Oral Health productivity was 79%.

**b. Covid testing and vaccination updates**

Sue Curfman continue to offer both and there has been a little uptick in both.

**c. State Associations/Advocacy Update/Community Involvement**

i. MPCA and MO Behavioral Health Council Updates

There was a presidential announcement that FQHC will be part of the vaccine mandate.

There will be an internal call this week to discuss this.

ii. County projects

1. Community Health Needs Assessment
2. Homelessness

**d. Divisional & Workforce Updates**

i. Behavioral Health/Psychiatry Updates

1. Director of Psychiatry and Interim Plan

Dr. Rohatgi's last day is October 1<sup>st</sup>, Dr. Jos and Dr. Harvin will collaborate in the interim.

ii. Primary Care Updates

1. Director of Primary Care

Dr. Stevenson will start November 8<sup>th</sup> there is still a need for LPN's.

iii. Oral Health Updates

Dr. Cook is continuing to do a great job leading the Oral Health team.

iv. Keaton ALF

Sue Curfman stated that she is now the administrator for Keaton for the interim and will be onsite 10-12 hours a week and Rachael Bersdale will be helping to manage the facility.

v. Post Pandemic Workforce

There is continued shortage in the workforce and this is happening across the state and the nation. Other FQHC are reducing services across the state, COMTREA has many openings there will be a meeting today to discuss how to balance the needs of the staff with locations.

**e. HRSA**

i. Notifications of Awards

Award # 6 H80CS24105-10-01/ Health Center Program – this is funding for Integrated Health and once finished this is rolled into the existing funding we receive.

ii. PR Monthly Review

1. Board Authority

The program requirements were 100% when reviewed this month.

BOARD AUTHORITY	GOVERNANCE/ ADMIN	Sue Curfman	Septembe r	YES	NO	NA
a. Maintenance of Board Authority Over Health Center Project				1		
b. Required Authorities and Responsibilities				1		
c. Exercising Required Authorities and Responsibilities				1		
d. Adopting, Evaluating, and Updating Health Center Policies				1		
e. Adopting, Evaluating, and Updating Financial and Personnel Policies				1		
<b>TOTAL</b>				<b>5</b>	<b>0</b>	<b>0</b>
				%	100%	

ii. Current % of Board Consumers

The board consumer percentage is currently at 56% and will decrease for next month as one board member moves to Texas and leaves the boards. This is an area that HRSA really looks at.

e. Monthly Grant Update

The updates on grants was reviewed and the current ones are listed below. There was a grant application placed with the Foundation for the initiative at the jail this would allow this work to continue. Jerry Rogers asked if there is a cut expected with VOCA. Cindy Vessell stated that there is word that there will be a 3 month extension on the existing contracts as they are having trouble getting through the applications.

Funding Entity	Program Recipient	Description	Amt Requested on Pending Grants	Status
HRSA		(ARPA) Capital Grant with a total budget for project of \$2M	\$662,338	Submitted   Still Waiting final approval
HRSA – SAC		FQHC Continuation grant – 3 year grant cycle	\$2,146,416	Working on currently – Due November 3rd
Jefferson Foundation	BH Court Program	Behavioral Health Justice Reinvestment Initiative Extension	\$46,878	Notification letters will be mailed out on November 1, 2021 – No updates at this time
VOCA Grants	ASP and CAC	VOCA A Safe Place \$238,884 VOCA CAC Union \$87,073 VOCA CAC Farmington \$82,170 VOCA CAC Festus \$122,679	See Description for amounts by program	Submitted

f. Volunteers

The volunteer report was shown with the board having the majority.

Location	JULY	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	TOTAL HOURS
A Safe Place	6	0											6
CAC	0	0											0
Employees	0	5											5
Board Members	51	56											107
Adult and C&Y Div.	0	0											0
Job Shadowing	8	0											8
<b>TOTAL Hours:</b>	<b>65</b>	<b>61</b>											<b>126</b>

## **9. Action Items (Anything that requires a vote)**

### **a. Leadership Council Reports (Month of August)**

The Leadership Reports were sent out via email at the end of August, there was no additional updates from leadership.

**Recommendations:** “I, Kim Harvey-Manus, move that the Board approve the August 2021 Leadership Council Report.” Mark Mertens seconded the motion. The motion carried.

### **b. Position Approval**

#### **i. Farmington CAC Therapist**

This was left out on the budget, it was in the budget for two years with no applicants. There are now applicants.

**Recommendations:** “I, Mark Mertens, move that the Board approve the unbudgeted position of CAC Therapist at the Farmington location.” Jane Sullivan seconded the motion. The motion carried.

### **c. Credentialing & Privileging Report**

Kathy Ellis reported there was 6 initial appointments and 2 interns and 5 reappointments.

**Recommendations:** “I, Kathy Ellis, move that the Board approve the August Credentialing and Privileging report as presented.” Beth McDaniel seconded the motion. The motion carried.

### **d. QIQA Monthly Report**

Patty Vanek stated that this month’s focus was Primary Care. The greatest decrease for the quarter was depression screening, tobacco use and breast cancer.

Measure	Result	Change	Num	Den
Childhood Immunization Status	4.5%	0.7%	1	22
Child Weight Screening Diet/Activity Cnslng	36.3%	-2.0%	186	513
BMI Screening and Follow-Up 18+ Years	94.0%	8.9%	2702	2875
Screening for Depression and Follow-Up Plan	51.9%	-3.6%	973	1874
Depression Remission at Twelve Months	13.1%	-0.1%	36	275
Tobacco Use: Screening and Cessation	76.2%	-4.6%	1715	2250
Colorectal Cancer Screening	32.4%	-1.1%	413	1275
Cervical Cancer Screening	39.7%	-1.4%	515	1296
Breast Cancer Screening Ages 50-74	29.7%	-3.1%	191	644
Hypertension Controlling High BP	54.0%	12.7%	689	1275
Diabetes A1c > 9 or Untested	36.3%	-6.6%	185	509
Statin Therapy for Prevent/Treat CVD	81.7%	-0.1%	534	654
IVD Aspirin Use	84.6%	1.7%	121	143

With the depression and tobacco it also includes the follow up and that may be affecting the percentage. The biggest increase seen was on BMI, Diabetes and Hypertension. Sue Curfman stated that for the HRSA SAC chronic conditions need to be reported for Jefferson County diabetes is now at or better than state level.

Patty Vanek also went over the campaigns that PC is currently doing for the next few months.

**Ongoing**

- Engagement – Campaign through DRVS Care Messaging started in June. Text message sent to MC+ planned enrollment individuals without an encounter within the last trailing year.
- Immunizations – Solution Reach (email and texting) through AVATAR

**Planned**

- September – Flu Shot Reminders through Solution Reach
- October – Mammograms through Solution Reach
- November – Smoking Cessations through Solution Reach

The on call audit was reviewed and both locations in the audit did a great job.

Date	8/4/2021	Date	8/6/2021
Phone Number/Location	636-481-6040 - Hickory Plaza	Phone Number/Location	636-677-9977 Emerson
Department	Dental	Department	Primary Care
Time of Message	8:16 PM	Time of Message	7:39 PM
Time Call Returned	8:21 PM	Time Call Returned	7:59 PM
Total Time	5 minutes	Total Time	20 minutes
Limited English Proficiency	On-Call provider provided LAMP Phone number and how to contact. Per Christian Hayes caller.	Limited English Proficiency	On-Call provider was able to list number and how to contact LAMP Services if the individual calling did not speak English - Per Christian Hayes caller
Referral Provider Accessibility	On-Call provider was able to detail the ability for further consultation and or referral to ER, Urgent Care, etc. by listing ones normally referred to. Per Christian Hayes caller.	Referral Provider Accessibility	On-Call provider was able to detail the ability for further consultation and or referral to ER, Urgent Care, etc. by listing ER and Urgent Cares they would refer to - Per Christian Hayes caller.

Jerry Rogers asked how many calls come in after call. Patty Vanek stated that the calls are limited as there is access to online information and tools.

**Recommendations:** “I, Beth McDaniel move that the Board accept the August 2021 QIQA report as presented.” Mark Mertens seconded the motion. The motion carried.

## 10. Discussion Items (Informational; no action taken)

### a. Subcommittees of the Board

#### i. Building and Grounds

Lisa Rothweiler stated that final plans are hoping to come in for the Main street location. There is discussion to rent the building next to 109 to have a location for new staff training and orientation. The metal building at the Pevely site is in the planning stages and this is needed for storage of plows and other maintenance supplies.

#### ii. Fundraising & Capital Campaign

The coffee and crafts virtual fundraiser will launch on the 15<sup>th</sup>. Tickets are on sale for designer bag bingo. Proceeds from the murder mystery will be around \$4,000. Jerry Rogers asked Sue Curfman to thank Ken for the work on the mystery.

#### iii. MHOH Committee



