

SUSQUEHANNA COMMUNITY HEALTH AND DENTAL CLINIC, INC.
BOARD OF DIRECTORS MEETING MINUTES
August 24, 2021 5:30 PM

PRESENT: Kim Wetherhold, Board Chair; Dr. Ralph Kaiser; Shantay Hall; Rick Wyatt; Velinda Smith; and Josh Warfel

PRESENT VIA ZOOM: Chris Ebner, Board Secretary

Excused: Jean Myers; Matt McLaughlin; and Abbey Eschbach

QUORUM MET

I Call to Order, Mission Statement, & Invocation

Board Chair, Kim Wetherhold, called the meeting to order at 5:30 PM, read the mission statement, and opened the meeting with prayer.

II Mini-Education Session: HRSA Operational Site Visit (OSV)

Jim presented the mini-education session providing information on the HRSA Operational Site Visit (OSV). The Health Resources and Services Administration's (HRSA) Bureau of Primary Health Care (BPHC) is responsible for effective and efficient oversight of the Health Center Program. The Compliance Manual is the principal resource to assist health centers in understanding and demonstrating compliance with Health Center Program requirements. HRSA site visits support the effective oversight of the Health Center Program. OSV's provide an objective assessment and verification of the status of each Health Center Program awardee's compliance with the statutory and regulatory requirements of the Health Center Program. Jim reviewed the program requirements which will be under review.

The site visit team has four members to include a finance consultant, clinical consultant, administrative consultant (which are all contracted by HRSA), and HRSA's employed representative. The site visit team assesses compliance based whether we are able to demonstrate compliance. Methods include, but are not limited to, reviews of policies and procedures, samples of files and records, site tours, and interviews.

Board members are welcome to attend any of the three conferences throughout the site visit, however, Day 2 Meeting with the Board is the most important. During that session an opportunity will be provided for the site visit team to speak with board members, which is a requirement of the site visit. Conference call will be made available for all three meetings.

During the OSV, the Site Visit Team will interview the project director/CEO regarding how the board carries out its functions, review the board calendar or other related scheduling or planning documents, review board minutes for the most recent 12 months and minutes of any prior meetings in the past 3 years to demonstrate that board authorities were explicitly exercised. The team will review any relevant board committee minutes or committee documents from within the past 12 months, review samples of board packets from the past 12 months, review strategic planning or related documents from the past 3 years, the most recent CEO evaluation documentation, and review the position description and employment agreement for the CEO.

SUSQUEHANNA COMMUNITY HEALTH AND DENTAL CLINIC, INC.
BOARD OF DIRECTORS MEETING MINUTES
August 24, 2021 5:30 PM

The Site Visit Team will review the board membership and composition to include the number of board members and to insure ensure that at least 51% of board members are patients served by the health center. They will also ensure that no more than ½ of the non-patient board members derive more than 10% of their annual income from the health care industry. The Site Visit Team will review Form 5A which is the listing of approved required services.

During the exit conference, the site visit team's findings related to compliance will be identified. These findings are included in the health center's site visit report and form the basis for determining whether a health center has demonstrated compliance with Health Center Program requirements. The Center will receive a request for information to demonstrate compliance, if the OSV team was unable to determine compliance while on site under the Compliance Resolution Opportunity (CRO) process. The Center will have 14 days to demonstrate compliance. The Center will also have 90 days to correct any non-compliance, if the issue can not be handled under the CRO process.

III CEO Update

a. CEO Report: Jim reported to the board that he changed the format of his CEO Report to coincide with the pillars of the strategic plan and highlighted the following information:

- Jim stated that he was very appreciative of staff and board members for their support during National Health Center Week. Staff visited the American Rescue Workers and provided vaccines, blood pressure checks, and food distribution. On Patient Appreciation Day, each patient who came into the Center that day received a free umbrella. During Children's Health Day, the Center partnered with the YMCA and STEP. The first 27 children received free backpacks filled with school supplies. Vaccines, along with vision and hearing screenings, were provided in consultation with our pediatrician. On Tuesday of National Health Center Week, we celebrated our wonderful staff with a free lunch from a food truck as well as providing all with an Amazon gift card.
- The administration of COVID vaccines and testing continued to be on the rise with the news of increased spread. To date the Center has administered nearly 12,000 vaccines and just over 3,700 COVID tests.
- Facility planning efforts continued to advance with the move of some administrative offices out of 431 to 427 and securing the firm of Anthony Visco and Associate to begin design work for the renovations of 431. In addition, planning work continued to rearrange space at 471.
- A new dentist, Dr. Tokede, began work on August 9 and already has been carrying a solid patient load. The recruitment effort continues for an additional dentist.
- A new family nurse practitioner and physician assistant have begun work and have begun to see patients.
- The comprehensive market analysis conducted by Capital Link has been completed. It was anticipated to begin discussion next month with the Executive/Finance Committees and then report to the Board at the September meeting.

SUSQUEHANNA COMMUNITY HEALTH AND DENTAL CLINIC, INC.
BOARD OF DIRECTORS MEETING MINUTES
August 24, 2021 5:30 PM

- The PA Association of Community Health Centers (PACHC) sponsors an annual conference. This year the conference is to be held October 12 ~ 14. Management has found this conference to be extremely informative for leadership. Jim invited the board to review the agenda outline which was placed on the board portal to see if any of the sessions are of interest. It currently appears that sessions with specific application to governing body education are sparse. Please let Trudy know anyone would be interested in attending. Board members requested a mini-education session upon return with highlights of the conference.

b. Dashboard

- **Operational Indicators:** Barb reviewed the highlights of the Operational Indicators: Barb reported that patient visits were down across the Center. There were 129 new patient visits for the month of August.
- **Clinical Quality Measures:** Barb reviewed the highlights of the Clinical Quality Measures reporting that they were comparable to last month.

Barb gave an update on COVID vaccines and testing. She indicated that the Center has started to offer the third dose of the vaccine to high-risk patients. High-risk is considered chemotherapy patients, advanced or untreated HIV, chronic steroid use, and organ transplant patients to name a few. Speculation has been heard that the booster may be available in the fall for the general population although nothing official has been announced. To date, approximately 100 children have been vaccinated by the Center.

IV Financial Report

a. June 2021 Financial Summary Report

The highlights of the Financial Report were reviewed for June 2021, as were set forth in the summary provided to the board, which is hereby incorporated for all purposes herein: Max reported that for the month of June, there was an excess of revenues over expenses of \$1,419,959 which takes the FY21 year-end excess of revenues over expenses to \$1,793,649. Net Days in A/R was 27. Days in A/P increased to 43.96 due to year-end purchases. Days Cash on Hand was 37.39 and the Current Ratio was 1.34.

Motion #1 Dr. Ralph Kaiser made the motion to approve the June 2021 Financial Report. Rev. Velinda Smith seconded the motion. The motion passed unanimously.

b. July 2021 Financial Summary Report

The highlights of the Financial Report were reviewed for July 2021, as were set forth in the summary provided to the board, which is hereby incorporated for all purposes herein: Max reported that for the month of July the deficiency of revenue over expenses was \$249,304 which takes the YTD decrease in net assets to \$188,859. Net Days in A/R was 29. Net Days in A/P was 36.57. Days Cash on Hand decreased to 27.5 due to the increase in the new fiscal year calculation of daily operations. The Current Ratio was 1.25

Motion #2 Chris Ebner made the motion to approve the July 2021 Financial Report. Josh Warfel seconded the motion. The motion passed unanimously

SUSQUEHANNA COMMUNITY HEALTH AND DENTAL CLINIC, INC.
BOARD OF DIRECTORS MEETING MINUTES
August 24, 2021 5:30 PM

V Quality Assurance/Quality Improvement Report

Barb gave the Quality Assurance/Quality Improvement report by reviewing the clinical quality measures. She pointed out that the UDS 2020 State average numbers were in red. The Center was above state average for most measures. Work group continues to look for ways to improve.

Workgroup continues to look at the Social Determinants of Health (SDOH) measure and how to incorporate measurements into the rooming process. Once this improvement in measurement happens the overall results should start to improve.

A board member asked if the Center had a community liaison person to talk to local colleges to discuss services the Center offers. The colleges have student welcome packets, and it was discussed to see if information could be added about the Center for out of area students who need services, but do not know where to go.

VI Consent Agenda

Board of Directors Meeting Minutes, July 2021; Executive Committee Meeting Minutes, August 2021; Finance and Audit Committee Meeting Minutes, August 2021; Quality Assurance/Quality Improvement Meeting Minutes, August 2021; and Retirement Plan Committee Meeting Minutes, July 2021

Motion #3 Rev. Velinda Smith made the motion to approve the Consent Agenda as presented. Shantay Hall seconded the motion. The motion passed unanimously.

VII Old Business

There was no old business to be brought before the board.

VIII New Business

There was no new business to be brought before the board.

IX Announcements for the Next Meeting

a. Finance and Audit Committee Meeting, October 11, 2021: Max informed the board that Baker Tilly will present the FY21 audit information to the Finance Committee in their regularly scheduled meeting on October 11 at 5:30 PM. All board members are invited to attend since this presentation will be the only direct opportunity to hear from Baker Tilly. After discussion, Trudy was asked to send an invite to all board members for reminder.

X Adjournment

With no further business to be brought before the board, Kim Wetherhold, Board Chair, adjourned the meeting at 6:37 pm.

Signatures:

Kimberly Wetherhold, Board Chair
Date:

Christopher Ebner, Board Secretary