



**Public Meeting Minutes  
June 13, 2022  
6:00-8:00 PM (via Zoom)**

*Health Center Mission: Bringing services to individuals, families, and communities that improve health and wellness while advancing health equity and eliminating health disparities.*

**Board Members:**

**Harold Odhiambo** – Chair  
**Fabiola Arreola** – Vice Chair  
**Dave Aguayo** – Treasurer

**Pedro Sandoval Prieto** – Secretary  
**Tamia Deary** - Member-at-Large  
**Kerry Hoeschen** – Member-at-Large

**Darrell Wade** – Board Member  
**Brandi Velasquez** – Board Member  
**Aisha Hollands** - Board Member

**Adrienne Daniels** - Interim Executive Director, Community Health Center (ICS)

**Board Members Excused/Absent: Fabiola, Dave, Darrell**

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
<b>Call to Order / Welcome</b> Harold Odhiambo, CHCB Chair	The Board Chair called the meeting to order at 6:03 PM.  A quorum <b>was</b> established with 7 members present  Lucia Cabrejos and Carolina Loza Delgado in attendance (Spanish interpretation)	N/A	N/A	N/A
<b>Consent Agenda</b> <b>CONSENT VOTE REQUIRED</b> Harold Odhiambo, CHCB Chair	<ul style="list-style-type: none"> <li>● PCC Partnership Update Report</li> <li>● New Provider Report</li> <li>● Monthly Budget Report</li> </ul> Harold provided an overview of the consent items and asked if Board members had further questions. The consent agenda was approved.  <b>Bee unavailable for voting</b>	<b>Motion to approve:</b> <b>Tamia</b> <b>Second: Kerry</b>  Yays: - 6 Nays: - 0 Abstain: - 0  <b>Decision:</b> <b>Approved</b>		



<p><b>Minutes Review - VOTE REQUIRED</b> Review May 2nd Emergency Public Meeting and May 9th Public Meeting minutes for omissions/errors</p>	<p>No discussions or recommendations were raised. The May 2 and May 9 Board minutes were approved.</p> <p><b>Bee unavailable for voting</b></p>	<p><b>Motion to approve:</b> <b>Tamia</b> <b>Second: Aisha</b></p> <p>Yays: - 6 Nays: - 0 Abstain: -0 <b>Decision:</b> <b>Approved</b></p>		
<p><b>Client Eligibility Criteria for Student Health - VOTE REQUIRED</b> Alex Lowell, Student Health Center Manager</p>	<p>Alexandra Lowell, Student Health Center Manager, presented on Client Eligibility Review and Policy that was previously approved in 2019.</p> <p>The policy does not contain any changes or recommended updates.</p> <p>Q: Does this include students who are in the community transition program? A: They could be homeschool, homeless or school program ages K-12 anyone in that age range in Multnomah County can access.</p> <p>Q : What about if a student is done with HS but in a GED program? A: If those students are still in the district sponsored GED program then they are covered by the policy and will still serve them. This includes those who received GED but above 18 y/o who will transition to adult health care programs.</p> <p>Q: Point #3 mentions GED or alternatives. What does alternative mean/ cover? A: Alternative school is: outside of district but outside of main HS / each district has alternative school programs. Still district sponsored but not primary public programs receive K-12 education. Students that may have learning challenges, in need of a smaller and monitored more closely, substance abuse issues, disciplinary issues and need alternative program not in the regular school system</p>	<p><b>Motion to approve:</b> <b>Pedro</b> <b>Second: Tamia</b></p> <p>Yays: - 6 Nays: - 0 Abstain: - 0 <b>Decision:</b> <b>Approved</b></p>		



	<b>Bee unavailable for voting.</b>			
<p><b>CHCB Stipend Policy</b>  <b>VOTE REQUIRED</b>          Adrienne Daniels, Interim Health Center Executive Director</p>	<p>Adrienne Daniels, Interim Director, presents to review the yearly stipend policy that compensates Board Members eligible for their support. Intended to cover the inherent cost of participating and serving on the Board. Not to be considered a salary or reimbursement for direct Board activities, but to cover costs such as missed work time or childcare costs.</p> <p>The stipend process is reviewed every year. Minor recommendations to this year’s policy for Board consideration :</p> <ol style="list-style-type: none"> <li>1) Clarify qualified meetings - public, emergency and ad-hoc committees are included. (i.e CEO recruitment work)</li> <li>2) Board Liaison coordinator is to remain contact and coordinator for stipend rules</li> </ol> <p>Q: Is there a consideration of increasing the costs?          A: The current update does not include an increase from last year. Previously looked at how Board Members are participating with multiple duties, and increased the number of meetings eligible, as opposed to a single monthly stipend.</p> <p>Q: What is the process to discuss an increase in the stipend?          A: We can propose tonight and ask that the Executive Committee can look at researching an increasing amount and look at policies and/or restrictions that may also impact payment from Multnomah County. The Board could choose to approve the policy tonight, to not disrupt Emergency Meetings or Ad-Hoc meetings, but request the policy be reviewed again by the Board after full research and review again for a full vote.</p> <p>Dr. Hollands presented a motion to approve with a request that the procedure return for discussion in the next 30-45 days to discuss increased stipend total amounts as allowed by law.</p> <p><b>Bee unavailable for voting</b></p>	<p><b>Motion to approve:</b>  <b>Aisha</b>  <b>Second: Kerry</b>          Yays: - 6          Nays: - 0          Abstain: - 0</p> <p><b>Decision:</b>  <b>Approved</b></p>	<p>Executive Committee</p>	<p>Return within 30-45 days for review of stipend.</p>



<p><b>HRSA Progressive Action Update</b></p> <p>Wendy Lear, Deputy Director, Multnomah County Health Department  Eric Arellano, Chief Financial Officer, Multnomah County  Jeff Perry, Chief Financial Officer, ICS  Dan Zalkow, Multnomah County Facilities Director</p> <p>Brieshon D'Agostini, Quality and Compliance Officer, ICS</p>	<p>Multiple Health Center and Multnomah County staff presented updates on the HRSA packet and resolution process. The following reports were presented to the board in full:</p> <p><u>Journal entries:</u> Report was run for April. HRSA confirmed that this was in alignment with their report expectations.</p> <p><u>Transfers:</u> It was noted that the CHCB's approved transfer of \$9.2M was scheduled and moved to the enterprise fund.</p> <p><u>Enterprise Fund:</u> This is now 100% complete and the health center can fully operationalize reports.</p> <p><u>Balance sheets:</u> A new balance sheet was presented to the Board. This report is now operational and can be generated as a modified or accrual balance sheet.</p> <p><u>Indirect cost:</u> Costs were reviewed, including the formula and total cost to the health center. It was noted that two slides require a correction to reflect that the costs are through the latest period of the budget, and should read "April" not "March". All cost information was confirmed to be accurate. Noted that Board members can reference slide 40 to cross reference the reports on internal services charges for facilities on these reports as well.</p> <p><u>Revenue and Expense Statements:</u> The Health Center continues to produce regular revenue and expense statements on programs and all service areas. A surplus of \$27.6M is currently noted through the month of April.</p> <p><u>Modified Balance Sheet:</u> This balance sheet can also now be generated and was reviewed with HRSA. HRSA had discussed that a projected quarterly balance sheet may be redundant, as the health center is already able to produce the cash flow projections and associated upcoming costs. They will confirm if they would like to see a projected quarterly modified balance sheet.</p> <p><u>Cash Projections:</u> This report is still available for the Health Center and can be uniquely produced by Jeff.</p> <p><u>Vacancy:</u> Total vacancies reviewed for the health center. The total number of vacancies increased from last month, but more vacancies are moving to the final stage of hiring (over 50% are now in the final interview or offer stage). The most common vacancy length has now been reduced to 79 days, which is lower than the national average now for other healthcare organizations (between 80-100 days).</p>	<p>N/A</p>		<p>Board members to send any follow up questions to CHCB Liaison</p>
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Q: Is there a way we can tell if positions are not started in the recruitment stage?

A: Yes, in the Board packet the information was displayed and where each vacancy is with notes on the process and details in the exact level of the position.

Facilities analysis: Dan Zalkow presented on the lease costs comparison to internal services and facilities rates. His team worked with CBRE to compare other common healthcare lease and rental rates in the Multnomah County areas to our internal costs. The health center on average pays a lower amount of facility costs (\$29 / sq ft) than comparable space on the private market for clinics (between \$38-46 / sq ft).

Q: When you say capital contribution, is this where the County acts as the landlord?

A: Those contributions are for larger capital improvement, i.e hvac / roof / electrical replacements. That cost is charged as part of the total facilities costs. Base services costs cover the day to day expenses.

It was suggested that Board Members invite Dan back to present again and allow members to digest and gather questions. Board members can send follow up questions to the CHCB.Liaison email account.

Brieshon presented on the summary and final 90 day analysis:

The Quality staff and Quality Committee have coordinated the 90 day HRSA Analysis response. This progress was reported in April, in addition to regular quality Board meetings. The final report will be submitted to HRSA on 6/14/2022 and then we will await their feedback. HRSA may ask for new or additional updated information.

The analysis of accounts receivable looked at three options: status quo, adjusted team organization, and contracting the services with OCHIN. Cost, timeline, operational changes, and other impacts were analyzed in all three areas. Each option will present different benefits and risks. The most expensive and longest option was projected to be contracting services to



	<p>OCHIN or a similar vendor. The status quo is projected to be the least expensive option of the three.</p> <p>The presentation shared a visualization of how direct and indirect cost formulas work. Additionally, the response was included in the Board packet provided.</p> <p>All 32 (updated to be 30) actions are now fully complete for the Enterprise Fund. It is operational, and the Board received multiple new reports this evening because of the fund (such as a balance sheet).</p> <p>Board Comment : Thank you for the hard work to get this process completed. Joining effort with the CHCB Quality committee was appreciated.</p> <p>If Board members have further questions, they should submit them to the Board Liaison email.</p>			
<b>10 Minute Break</b>				
<p><b><i>HRSA Progressive Action Update (Executive Session)</i></b></p>	<p>CHCB to receive confidential reports in separate Zoom.</p> <p>Board members received an update on labor negotiations and confidential bargaining items which are protected under Oregon public meeting rules. This included projected costs to the health center from bargaining.</p> <p>To close the session, Tamia motioned and Aisha seconded. The Board returned to the public meeting at 7:53pm.</p> <p><b>Bee unavailable for voting</b></p>	<p><b><i>Motion to approve:</i></b>  <b><i>Aisha</i></b>  <b><i>Second: Tamia</i></b>  Yays: - 6  Nays: - 0  Abstain: - 0  <b><i>Decision:</i></b>  <b><i>Approved</i></b></p>		



<p><b>Board/Committee Updates</b></p> <p>Harold Odhiambo, CHCB Chair  Dr Aisha Hollands, CHCB CEO Search Committee Team Lead  Tamia Deary, CHCB Member at Large and Quality Committee Lead  David Aguayo, CHCB Treasurer (absent, Jeff Perry provided update on his behalf)</p>	<p>Each committee chair was invited to provide updates on Board priorities and work updates.</p> <p>Dr. Hollands presented on CEO recruitment : They have hired a Project manager and identified a recruitment firm to handle the CEO recruitment. Several interviews were conducted with firms using a matrixed criteria sheet. We have identified a process to reach out to stakeholders, as well as reviewing the position description and it is in the process of being finalized.</p> <p>Tamia presented on the Quality Committee: They have identified criteria and included in the assessment for the patient procurement planning. Looking at the Health Center’s quality team organization chart to also learn about full operations. We have organized meetings for the year so they align with public meetings and will be adding additional meetings with quality related staff. For the next six months, they anticipate meeting monthly. In addition, the committee has started preparing the quality plan for the Health Center, which will be updated to align with the fiscal calendar year and the strategic plan.</p> <p>Jeff presented on the Finance Committee on David Aguayo’s behalf (absent): The finance committee has recently met to discuss the Board’s approach to monitoring surpluses. This includes drafting updates to the reserve policy and use of surplus funds. They agreed to the creation of an operational reserve to cover all costs and to establish a minimum standard for the reserve. The committee will draft final recommendations for the full Board to consider.</p> <p>The finance committee also discussed the dental budget deficit and strategies to close the budget gap for the service line. They also discussed feedback from HRSA on the new financial reports and conditions.</p> <p>Harold presented on the Executive Committee: Noted that the Board has received multiple public comments and emails regarding the Student Health Center budget. He has extended an invitation to have community advocates join the June Executive committee meeting and has asked Adrienne’s team to provide quarterly updates on Student Health Center service and access. He also welcomes Board member’s feedback on the new consent agenda approach.</p>	<p>N/A</p>		
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<p><b>Strategic Updates</b> Adrienne Daniels - Interim Executive Director, ICS</p>	<p>Adrienne Daniels, Interim ICS Executive Director, presented on the strategic update for the health center. The updates include:</p> <ol style="list-style-type: none"> <li>1. Patient and community voice: <ol style="list-style-type: none"> <li>a. Community Health Center’s seasonal CSA (community supported agriculture) program launched this month. Mid County first to kick off but multiple locations are offering it. The program has grown in the past five years and allows patients to access free or reduced cost vegetables.</li> </ol> </li> <li>2. Workforce: <ol style="list-style-type: none"> <li>a. The health center has launched the integrated patient navigator position for dental.</li> <li>b. Staff performance planning is underway. All senior leadership are being asked to complete goals this year related to racial equity.</li> </ol> </li> <li>3. Fiscal responsibility: <ol style="list-style-type: none"> <li>a. Enterprise fund complete and completed before target date!</li> <li>b. E-referral program “Arista MD” will launch this summer to provide care quicker and increase access at no additional cost to patients.</li> </ol> </li> <li>4. Equitable treatment: <ol style="list-style-type: none"> <li>a. OCHIN expanding language available, projected by end of summer patients additional languages accessible for patients</li> <li>b. Patient wait times are decreasing under the new “advanced access pilot” in primary care</li> </ol> </li> <li>5. Noted Board priorities and projects: <ol style="list-style-type: none"> <li>a. 3 public advocacy events coming up 2 specific for Juneteenth and will be joining in a public health event. Starting to plan for national health centers' week.</li> <li>b. All new financial policies are now operational with the Enterprise Fund</li> <li>c. FTCA insurance application is being constructed with a goal to submit by this fall.</li> </ol> </li> </ol>	<p>N/A</p>		
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<b>Meeting Adjourns</b>	Meeting adjourned at 8:08 PM			Next public meeting scheduled on 7/11/2022

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
**Pedro Prieto Sandoval, Secretary**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
**Harold Odhiambo, Board Chair**

**Minutes approved, virtually, at the July 11, 2022 Public Meeting**

**Scribe taker name/email:**  
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