

# Lake County Illinois

*Lake County Health Department and Community Health Center  
3010 Grand Avenue  
Waukegan, Illinois 60085  
Conference Room #3112*



## **Meeting Minutes - Final**

**Tuesday, April 21, 2026**

**5:30 PM**

**3010 Grand Ave., Waukegan, IL 60085**

**Lake County Community Health Center Governing  
Council**

**1. Call to Order**

Chair Smith-Taylor called the meeting to order at 5:30 p.m.

**2. Roll Call of Members**

Member Young attended the meeting remotely and did not participate in the vote.

Member Argueta arrived at 5:45 p.m.

**Present** 7 - Chair Smith-Taylor, Vice Chair Hernandez, Secretary Argueta, Member Barnes, Member Bejster, Member Hegar Chuc and Member Lara

**Absent** 1 - Member Ross Cunningham

**3. Pledge of Allegiance**

This matter was presented.

**4. Approval of Minutes**

**4.1**

March 10, 2026, Meeting Minutes

**Attachments:** [GC Meeting Minutes 3.10.25 - DRAFT](#)

Chair Smith-Taylor asked for a motion to approve the March 10, 2026 meeting minutes. Motion by Vice-Chair Hernandez, second by Member Chuc. Voice vote, all in favor motion carried.

**Aye:** 6 - Chair Smith-Taylor, Vice Chair Hernandez, Member Barnes, Member Bejster, Member Hegar Chuc and Member Lara

**Absent:** 2 - Secretary Argueta and Member Ross Cunningham

**5. Public Comment to the Council**

None

**6. Executive Director's Report**

Executive Director Hoff reported the following:

1. Executive Director Hoff informed members that the strategic planning survey had been placed at their desks and requested that completed surveys be returned to Khiabet Mata. Executive Director Hoff explained that the survey is intended to assist in identifying member priorities for the upcoming strategic plan, including services and client needs. Survey results will be reviewed at a future meeting, with the goal of completing the strategic plan by June.

2. Executive Director Hoff reminded members that the Employee Recognition Breakfast will be held on Friday, April 24, and will recognize staff for their years of service and contributions to the organization.

3. Executive Director Hoff noted that members received a physical copy of the Annual

*Report in their mailed packet this month, emphasizing that it serves as a tangible reminder of the organization's achievements over the previous year.*

*4. Executive Director Hoff announced the retirement of Business Manager Toby Karg, effective at the end of the month. Executive Director Hoff acknowledged Toby's many contributions to the organization, expressed appreciation for his dedicated service, and wished him well in retirement.*

*5. Executive Director Hoff informed Governing Council members that recognition and thank-you cards are available for members who wish to acknowledge staff or community members. Interested members were advised to contact Khiabet Mata for access to these materials.*

*Member Chuc shared that she recently visited the North Chicago clinic and expressed that she felt genuinely welcomed by staff. She noted the excitement and positivity among the team and thanked all individuals involved in the successful reopening of the clinic.*

## **7. Action items**

### **7.1**

Change in Health Center Hours of Operation - Burke

**Attachments:** [Health Center Hours Table](#)

*Member Young asked whether the presented operational changes would impact psychiatric services within the clinic. Director of Healthcare Operations Kim Burke responded that psychiatric services will continue on Thursdays from 8:00 a.m. to 8:00 p.m. and that no major disruptions are anticipated as a result of the changes.*

**Chair Smith-Taylor asked for a motion to approve the hours of operation for the LCHD/CHC health centers as presented. Motion by Member Argueta, second by Member Bejster. Voice vote, all in favor, motion carried.**

**Aye:** 7 - Chair Smith-Taylor, Vice Chair Hernandez, Secretary Argueta, Member Barnes, Member Bejster, Member Hegar Chuc and Member Lara

**Absent:** 1 - Member Ross Cunningham

## **8. Presentations**

### **8.1**

Overview of the 2025 Uniform Data System (UDS) - Steres & Mason

**Attachments:** [Governing Council 2025 UDS Report](#)

*Director of Provider Operations, Toni Steres, and FQHC Business Manager, Erica Mason, presented an overview of the 2025 UDS report.*

*Chair Smith-Taylor inquired about the reported 45% decrease in mental health services. Erica Mason explained that this decline is largely attributed to updated UDS methodology*

*requirements for classifying mental health providers. Erica Mason clarified that prior reporting methods did not fully align with UDS guidelines, and the current numbers now more accurately reflect required reporting standards.*

*Chair Smith-Taylor asked what actions are being taken to improve these figures moving forward. Erica Mason responded that efforts are ongoing to improve service numbers, though the decrease is primarily reflective of methodology changes rather than a significant decline in service delivery.*

*Member Bejster asked for the top key takeaways from the presentation. Erica Mason stated that the primary concerns include fewer patients and encounters, which could pose a potential risk to the organization's 330 grant funding, as well as changes to the payor mix. Executive Director Hoff added that additional decreases may be expected in the coming year due to anticipated Medicaid and Medicare changes.*

*Member Bejster further inquired whether staffing shortages contributed to decreased encounter rates. Erica Mason confirmed that staffing challenges are one contributing factor.*

## 8.2

Overview of The Joint Commission - Burke

**Attachments:** [TJC Overview](#)

*Clinical Compliance Manager, Angie Smith, provided an overview of The Joint Commission in preparation for the LCHD/CHC upcoming survey.*

*Member Argueta asked what measures are being taken to ensure that compliance regulations and operational standards are consistently implemented throughout clinic locations. Angie Smith explained that the Compliance Team systematically reviews each regulatory chapter and conducts multiple forms of auditing to ensure proper documentation and adherence to standards. Angie Smith further stated that mock tracers are regularly conducted in clinic settings, during which compliance staff simulate survey processes to evaluate readiness and ensure continued compliance.*

## 9. Discussion Items

### 9.1

2026 Health Center Annual Needs Assessment - Burke

**Attachments:** [2026 Health Center Annual Needs Assessment](#)

*Director of Healthcare Operations, Kim Burke, provided a summary of the Health Center Annual Needs Assessment included in the packet.*

### 9.2

Q1 FY2026 Payor Mix: December 1, 2025 - February 28, 2026 - Cooper

**Attachments:** [FY26 Payor Mix Graph](#)

*FQHC Business Manager, Erica Mason, presented the Quarter 1 FY2026 Payor Mix included in the packet on behalf of Angela Cooper.*

## 10. Director of Healthcare Operations Report

### 10.1

Director of Healthcare Operations Report - Burke

**Attachments:** [FQHC Healthcare Operations Metric Dashboard 04.26](#)

*Director of Healthcare Operations, Kim Burke, reported the following:*

*As of March 18, 2026, there are 1,147 individuals on our general medicine new client waitlist, 1,108 adults and 39 pediatrics. The general medicine new client wait list has decreased by 894 individuals since the March 10, 2026 report to Governing Council. There are currently 106 new patient appointment slots/week.*

*Dental: As of March 18, 2026, there are 314 individuals on our dental new client waitlist, 197 adults and 117 pediatrics.*

*BH Adult: As of March 23, 2026, there is no wait list for psychiatry appointments.*

*CABS: As of March 23, 2026, there are 40 individuals on the new client waitlist. The CABS waitlist has increased by 13 individuals since the March 10, 2026 report to Governing Council.*

*CABS Screening, Assessment and Support Services (SASS) clients, are given priority for appointments and not placed on a waitlist.*

*Open Positions:*

*- General Medicine/Women's Health APRN/MD/DO: 10*

*- FQHC Psychiatrist/APRN: 5*

*- Primary Care Behavioral Health (PCBH) Psychiatrist/APRN: 2*

*- Dentist: 1*

*- Dental Hygienist: 2*

## 11. Director of Finance & Administrative Services Report

### 11.1

Director of Finance & Administrative Services Report - Cooper

**Attachments:** [FQHC Feb 26](#)

*FQHC Business Manager, Erica Mason, reviewed the February 2026 financials included in the packet.*

## 12. Added to Agenda

*Chair Smith-Taylor requested recognition of several individuals for their work in the*

*community and for their knowledge of services offered through FQHC/LCHD. She specifically acknowledged Karley Scott, Tyiesha Trina, Cristina Thornton, Scarlett Devia-Espinoza, Jessica Milam, and Stephanie Rosales. Chair Smith-Taylor shared that she had the opportunity to attend an event alongside these individuals and was highly impressed by their ability to effectively engage community members and provide valuable information regarding available resources.*

*Chair Smith-Taylor also expressed appreciation to the Office of State Representative Laura Faver Dias, State Senator Mary Edly-Allen, and State Representative Joyce Mason for their support and involvement.*

**13. Old Business**

*None*

**14. New Business**

*None*

**15. Executive Session**

**There was no need to go in to executive session as attorney Jill Leka was unable to attend the meeting.**

**15.1**

5 ILCS 120/2(c)(2) Collective Negotiating Matters - Smith-Taylor

**16. Adjournment**

**Chair Smith-Taylor adjourned the meeting at 6:34 p.m.**