

Lake County Illinois

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



Meeting Minutes - Final

Tuesday, September 14, 2021

5:30 PM

**Via Zoom (<https://zoom.us/j/91712301006> or 1-312-626-6799,
Meeting ID 917 1230 1006)**

**Lake County Community Health Center Governing
Council**

Pursuant to Section 7(e) of the Illinois Open Meetings Act and the Written Determination of the Lake County Community Health Center Governing Council Chair, this meeting will be held via audio and video conference and not in the Board Room on the 3rd Floor of the Lake County Health Department at 3010 Grand Avenue, Waukegan, Illinois.

PUBLIC VIEWING: Participation in the meeting will be via zoom at (<https://zoom.us/j/91712301006> or 1-312-626-6799; Meeting ID: 917 1230 1006). Please note that by joining the meeting by video or audio conference your name or phone number may be visible (in whole or in part) to others participating in the meeting. Per the Governor's Disaster Proclamation, in accordance with section 120/7(e)(4) of the OMA, in-person attendance by members of the public will be available in the Board Room on the 3rd Floor of the Lake County Health Department at 3010 Grand Avenue, Waukegan, Illinois.

PUBLIC COMMENT: Public comments are welcomed and encouraged. Emailed public comments received by 8:30 a.m. the day of the meeting will be read at the beginning of the meeting under Public Comment in the order they are received or, at the discretion of the Council Chair, with the agenda item the comment addresses. Comments received during the meeting will be held until the end of the meeting. Please note: Public Comment is limited to three minutes per individual or spokesperson pursuant to the Governing Council Bylaws. All comments received will be included in the Council's meeting minutes regardless of whether they are read aloud at the meeting.

Email public comments to lkroeger2@lakecountyil.gov with the following:

- Subject Title: Lake County Community Health Center Governing Council Meeting
- Name
- Street Address (Optional)
- City, State (Optional)
- Phone (Optional)
- Organization, agency, etc. being represented. (If representing yourself, put "Self")
- Topic or Agenda Item Number followed by Public Comment.

Public in attendance on the 3rd Floor of the Lake County Health Department at 3010 Grand Avenue, Waukegan, Illinois, may provide

public comment. Public with no access to email may leave a message with the Governing Council Office at 847-377-8118.

0.

Chair's Determination of Need to Meet by Audio or Video Conference.

Attachments: [Determination of Need for GC Mtgs to be Held by Audio or Video 8.18.21](#)

Chair Smith-Taylor read the Determination of Need into the record.

1. **Call to Order**

Chair Smith-Taylor called the meeting to order at 5:38 p.m.

Present 6 - Member Fornero, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Member Lara

Absent 3 - Member Washington, Vice Chair Brown and Secretary Argueta

2. **Pledge of Allegiance**

Chair Smith-Taylor called on Member Ross-Cunningham to lead the pledge of allegiance.

3. **Approval of Minutes**

3.1

August 10, 2021 Meeting Minutes

Attachments: [GC Minutes 8.10.21 - DRAFT](#)

A motion was made by Member Fornero, seconded by Member Ross-Cunningham, that the minutes of the August 10, 2021 meeting be approved. Voice vote, all in favor, motion carried.

Aye: 6 - Member Fornero, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Member Lara

Absent: 3 - Member Washington, Vice Chair Brown and Secretary Argueta

4. **Public Comment to the Council**

None

5. **Executive Director's Report**

Executive Director Mark Pfister gave the following report:

--COVID-19 Update: We did eclipse the 800,000th dose administered in Lake County to Lake County residents. An additional dose of Pfizer or Moderna has been authorized by the CDC and FDA for the moderate to severely immunocompromised so the Health Department has been giving them to its immunocompromised FQHC patients. This Friday, the FDA may announce whether or not there is a need for booster shots for the general population. Many scientists want those booster doses to go to other countries

across the world that have not yet had the chance or opportunity for their residents to receive even one dose.

--North Chicago Health Center Renovation: That location will officially close on September 20, 2021. It will then take two weeks to prepare with renovations scheduled to begin the first week in October. Kim Burke and Dr. Zun have been diligently preparing and assuring that the North Chicago care teams are set up and ready to go at the Belvidere Medical Building to continue providing services to the North Chicago patients.

--Laboratory Services: The Health Department re-bid its contract for laboratory services and as of December 1, 2021, those services will no longer be provided by Quest. The new lab services provider will be LabCorp as they were able to offer a better proposal and price. The contract for Quest has been extended to ensure it is a seamless transition for our patients.

--Required Vaccination of LCHD/CHC Staff: The Executive Committee of the Board of Health and the Executive Committee of the Governing Council approved the Health Department's policy that requires vaccination of all staff who do not have a medical or religious exemption, and that policy went in to effect on September 6, 2021. On Monday, September 13, a link, Workforce One, was sent to all staff so that they could electronically inform the Health Department whether they are fully vaccinated, have received one dose of a two-dose series, or to complete a medical or religious exemption request form. Those granted a medical or religious exemption have to be tested weekly, as required by President Biden's Executive Order and Governor Pritzker's Executive Order as it pertains to health care workers. The plan is to have the majority of staff vaccinated with the intent to have them fully vaccinated by October 31, 2021. That means they would have to have their second dose by October 15, 2021. If a staff member fails to be fully vaccinated or have an approved medical or religious exemption by October 31, 2021, they will be suspended without pay for up to 15 days. If they are still not in compliance by November 15, 2021, further disciplinary action will be taken up to and including termination.

Chair Smith-Taylor asked for the percentage of staff currently vaccinated. Mark stated that based on the information at hand, it is estimated that 70% of staff are vaccinated. For those remaining 30%, it is hoped that they were vaccinated in another state or by another entity and we just aren't aware that they are fully vaccinated. Through Workforce One staff can provide consent for the Health Department to check the I-CARE registry for their vaccination status, they can upload documented proof of vaccination, or they can request a medical or religious exemption. Chair Smith-Taylor questioned the possible legal ramifications of it all. Mark explained that now that the Pfizer vaccine has been fully approved by the FDA, it greatly reduces the Health Department's risk, but even when it was under emergency use authorization only there was a large health care system in Texas that was taken to court by staff that did not want to be vaccinated and the judge in that case upheld the right of a health care system employer to require vaccination of its employees to protect other staff, as well as patients and clients. And there is also the fact that this requirement is issued under Federal and State Executive Orders.

6. Action items

6.1

Provider Credentialing and/or Privileging - Dr. Zun

Dr. Zun presented one provider for credentialing and privileging (Alvia Sabahat, MD) and concurs with the findings of the Personnel Committee to recommend approval.

A motion was made by Member Bejster, seconded by Member Fornero, to approve the privileges for Alvia Sabahat, MD, as requested. Roll call vote, all in favor, motion carried.

Aye: 6 - Member Fornero, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Member Lara

Absent: 3 - Member Washington, Vice Chair Brown and Secretary Argueta

6.2

Provider Reappointment - Dr. Zun

Dr. Zun, presented the two providers for reappointment (Alvaro Encinas, MD; Guadalupe Lechuga, LCSW) and concurs with the findings of the Personnel Committee to recommend approval.

A motion was made by Member Bejster, seconded by Member Lara, to approve the reappointment of the providers named (Alvaro Encinas, MD; Guadalupe Lechuga, LCSW), as requested. Roll call vote, all in favor, motion carried.

Aye: 6 - Member Fornero, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Member Lara

Absent: 3 - Member Washington, Vice Chair Brown and Secretary Argueta

6.3

Health Resources and Services Administration Budget Period Renewal - Riley

Attachments: [FY2022 Budget Narrative](#)

Pam Riley, Director of Finance, reviewed with the Council the information provided in the agenda packet. She reminded the Council that the Board of Health and Governing Council Joint Budget Committee meeting took place on August 18, 2021, and at that meeting it was explained that there is a new requirement as a result of the recent HRSA operational site visit in that the Council must now approve the HRSA 330 grant separate from the non-federal funds along with the approval of the entire FQHC fiscal year budget.

Member Tarter asked if the Council didn't already vote on this at its August 10 meeting. Mark explained that what they voted on at that meeting was for the FY2021 budget as it had to be brought back to the Council for a vote in order to be in compliance with HRSA's new requirement. What is on the agenda tonight is for the FY2022 budget.

A motion was made by Member Fornero, seconded by Member Tarter, to approve

the Section 330, H80CS00119 grant funding from the Health Resources and Services Administration in the amount of \$5,024,249 as detailed in the Budget Narrative and the non-federal funds of \$32,677,202, totaling the Physical Health/FQHC FY2022 budget amount of \$37,701,451. Roll call vote, all in favor, motion carried.

Aye: 6 - Member Fornero, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Member Lara

Absent: 3 - Member Washington, Vice Chair Brown and Secretary Argueta

6.4

Health Resources and Services Administration American Rescue Plan Act - Grant Approval - \$8,760,875 - Burke, Zun

Attachments: [HRSA ARPA \\$8.6M](#)

Kim Burke and Dr. Zun reviewed with the Council the information provided in the agenda packet.

Member Tarter asked if contact tracers are included in this funding. Kim explained that they are not as 100% of this grant is to support the FQHC's and contact tracing and investigation is not done out of our FQHC's. Mark further explained that contract tracing and investigation is a different grant from Illinois Department of Public Health (IDPH) and that grant has been extended through December 31, 2021. Member Tarter commented that in the past the Council has been provided with the results of the Patient Satisfaction Survey to which there seems to be a relatively low response rate, and wondered if a statistical tool called a confidence interval could be used in the interpretation of those results. Kim explained that ARPA funded programming had to be submitted to HRSA for their review and approval and the satisfaction survey was not included in that submittal. That is something she would have to ask Jefferson McMillan-Wilhoit about outside of the HRSA ARPA grant and can report on it at the next regular meeting.

A motion was made by Member Tarter, seconded by Member Cunningham, to approve the HRSA ARPA funding in the amount of \$8,760,875 for COVID-19 Vaccinations, COVID-19 Response and Treatment Capacity, Maintaining and Increasing Capacity, and Recovery and Stabilization Activities. Roll call vote, all in favor, motion carried.

Aye: 6 - Member Fornero, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Member Lara

Absent: 3 - Member Washington, Vice Chair Brown and Secretary Argueta

6.5

The Susan G. Komen Breast Cancer Foundation Grant - Grant Approval - \$10,209 - Burke

Attachments: [Komen \\$10K](#)

Kim Burke reviewed with the Council the information provided in the agenda packet.

A motion was made by Member Ross-Cunningham, seconded by Member Bejster, to approve the awarded funding related to expenses associated with breast cancer screening for Lake County women ages 40-49 in the amount of \$10,209.00. Roll call vote, all in favor, motion carried.

Aye: 6 - Member Fornero, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Member Lara

Absent: 3 - Member Washington, Vice Chair Brown and Secretary Argueta

7. Presentations

7.1

Health Resources and Services Administration (HRSA) Operational Site Visit (OSV) Findings and Responses - Peer

Attachments: [HRSA Post OSV Presentation](#)

Thomas Peer, Accreditation and Regulatory Specialist, provided an overview of the outcome of the HRSA Operational Site Visit as provided in the agenda packet.

Member Tarter asked about the audit of the sliding fee schedule change at the School-based Health Center to be presented to the Council and asked when that is going to be done. Pam Riley explained that it was discussed at the August 10 meeting and it was agreed that it would be brought back to the Council in 60 days, which is October. Mark Pfister thanked the Council again for their participation and contribution to the HRSA OSV, and reiterated that the Health Department team did an excellent job.

Chair Smith-Taylor noted that there were six findings, but there are only 5 highlighted in the presentation. Mark explained that the highlighting on slide 2 indicates the areas in which there were findings, not the findings themselves, and that there were two findings in one area for a total of six. Chair Smith-Taylor asked about the statement on slide 6, "Amendment to the Purchasing Policies and Procedures will be presented to the Council on 9/14/2021." Mark stated that Thomas just presented that finding to the Council and explained that the solution is an amendment to the purchasing policy incorporating an absolute prohibition, and that amendment will go to the Board of Health for approval at their next regular meeting as they are responsible for purchasing.

This matter was presented

8. Discussion Items

8.1

CQI Update - Hayes

Attachments: [UDS Measures](#)

Christina Hayes, CQI Coordinator, reviewed the report postponed from the August 10, 2021 meeting. She noted that the Nutrition Services team is piloting a care management

model to provide Type-2 diabetes patients with the support and peer coordination they need to improve their health. Care management is intensive one-on-one support that will be provided to a select number of our patients who have uncontrolled diabetes with the goal of reducing their A1c value and staying up-to-date on recommended lab tests and screenings. The pilot will include two care management teams. Each team will consist of one registered dietician care manager, who is also a certified diabetes care and education specialist, and a care facilitator and they will work with the patient's existing care team. The pilot program will include enrollment, development of a specific care plan for each participating patient that will include self-management goals, self-management education, self-management monitoring of blood glucose, diabetes medication support, and medical nutrition therapy when indicated. There will be both in-person and telehealth visits, depending upon patient preference, and frequency of visits will be established during the initial care planning between the care manager and the patient. The care facilitators will be making frequent phone calls and doing a lot of "hand holding" with the participating patients to ensure they are getting the labs they need, eye exams, foot exams, everything they need to stay healthy, and to understand the barriers those patients encounter in maintaining frequent visits, such as transportation, and assist them with eliminating those barriers. Our goal for the patients enrolled in this pilot program is to reduce the risk of complications and early death from diabetes by lowering their A1c by at least 1%. Studies show that if a diabetic patient's A1c increases by 1% their chance of a cardiovascular event or death increases by 25%, so one would reasonably assume that by lowering their A1c by 1% it would also reduce the risk of a cardiovascular event or death. Another goal is for 75% of our participating patients to have the recommended labs, screenings, and exams to see if this type of model works in our agency and can be expanded to more patients in the future.

Chair Smith-Taylor noted in regard to the Health Department's Tobacco Screening and Cessation program that she has received comments from individuals participating who are very happy with the program. For one participant in particular, it has been life saving by helping them decrease smoking and gain control of their asthma.

This matter was presented

9. Medical Director Report

9.1

Medical Director Report - Dr. Zun

Attachments: [LCHD CHC Patient Residence Location \(attachment\)](#)

Les Zun, MD, Medical Director, reviewed the report postponed from the August 10, 2021 meeting and provided the following updates:

--The three new pediatricians have started and are at their assigned health center site building their practice.

--The new Regional Medical Director has started and is currently going through

orientation.

--A replacement provider for the School-based Health Center has been selected and it is an internal candidate.

--He has now been granted privileges at Northwestern Medicine Lake Forest in addition to Vista

--There was an issue with water stains during the dental sterilization process, so a new water filtration system is being trialed and if it works out it will be installed at all of the dental locations

Dr. Zun then reviewed and explained the attachment, "LCHD/CHC Patient Residence Location," noting that the majority of patients are from Waukegan, Round Lake, and Zion. Mark Pfister added that he knows for a fact that there are individuals who have a residence in other states, in addition to Lake County, that come back to Lake County to receive their care because they feel this is where they receive the best care.

This matter was presented

10. Director of Healthcare Operations Report

10.1

Director of Healthcare Operations Report - Burke

Kim Burke, Director of Healthcare Operations, reviewed the report postponed from the August 10, 2021 meeting and provided the following updates:

--COVID-19 vaccinations are provided to Health Department patients at three FQHC sites: Grand Avenue in Waukegan five days a week, at Midlakes in Round Lake Beach three days a week, and at Zion two days a week, which directly correlates to the patient residence information Dr. Zun just presented.

--At those same three FQHC sites over the last 6 weeks, we have been administering just under 300 vaccine doses per week.

--As mentioned by Mark, the staff at the North Chicago Health Center are busy packing for their temporary move to BMB. They will be moved, settled and set up by the end of this week and ready to start seeing patients as of 8:00am Monday, September 20. We anticipate them being at BMB for the next 6-8 months during which the North Chicago Health Center will undergo renovations.

--Outreach and communications have been increased to remind North Chicago Health Center patients that their appointments will now be at BMB.

This matter was presented

11. Director of Finance Report

11.1

Director of Finance Report - Riley

Attachments: [FQHC Jun 21](#)

Pam Riley, Director of Finance, reviewed the June financial report postponed from the August 10, 2021 meeting as provided in the agenda packet.

This matter was presented

11.2

Director of Finance Report - Riley

Attachments: [FQHC July 2021](#)

Pam Riley reviewed the July financial report as provided in the agenda packet. She noted that the 2020 audit is not yet complete and is scheduled to be completed this week. The Medicare Cost Report was filed and on time. The Medicaid Cost Report requires the audit be complete before it can be filed so an extension until September 30, 2021, has been requested from the State. The auditors will present their final report to the Council at the October 12, 2021, meeting. Mark added that the audit not being complete is through no fault of Pam and her team, the delay is on the County's part. The Health Department is tied to the County as we have the same Employer Identification Number (EIN)/Tax Identification Number (TIN) and, therefore, we have the same exact audit as the County. Mark also noted that he was remiss in not mentioning Pam's name as one of the key contributors during the HRSA site visit.

This matter was presented

12. Added to Agenda

None

13. Old Business

None

14. New Business

None

15. Executive Session

None

16. Adjournment

Chair Smith-Taylor adjourned the meeting at 6:39 p.m.