

# Lake County Illinois

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



## **Meeting Minutes - Draft**

**Tuesday, August 10, 2021**

**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.**

**Present** 7 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Secretary Argueta

**Absent** 2 - Member Washington and Member Lara

2. **Pledge of Allegiance**

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

3. **Approval of Minutes**

3.1

July 13, 2021 Meeting Minutes

**Attachments:** [GC Minutes 7.13.21 - DRAFT](#)

**A motion was made by Member Fornero, seconded by Member Ross-Cunningham, that the minutes of the July 13, 2021 meeting be approved. Voice vote, all in favor, motion carried.**

**Aye:** 7 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Secretary Argueta

**Absent:** 2 - Member Washington and Member Lara

4. **Public Comment to the Council**

*None*

5. **Executive Director's Report**

*Executive Director Mark Pfister gave the following report:*

*--COVID-19 Update: It has been 518 days since Lake County's first positive COVID-19 case. There has been a total of 63,662 cases, and 1,030 confirmed deaths with a 1.6% case fatality rate. In the last week there has been an 84% increase in the incidence rate in Lake County so community transmission went from moderate a week ago to substantial, and then to high over the weekend. The Delta variant has been circulating in Lake County since May. As a result of the increase in case rates, the CDC has changed their guidance to state that all vaccinated and unvaccinated people need to wear a mask in public places. The Health Department and the FQHC's are making a big push to get FQHC patients vaccinated because it is the best tool to prevent serious illness, hospitalization, and death. Waukegan has one of the higher fully vaccinated rates, and Highland Park has the highest at over 80%. Antioch, Beach Park, and Winthrop Harbor have some of the lowest rates. The goal set by the Health Department, in order to reach herd immunity, is 80%. The newest cases are being seen in the unvaccinated. While there have been some breakthrough cases, meaning people who have been vaccinated that were infected, it is*

*such a small fraction compared to the number of new cases in the unvaccinated. The Health Department will continue its campaign to get the undecided to talk with their provider and obtain information on vaccination.*

*--At today's Lake County Board meeting, the County Board Chair issued a Determination of Need for the County Board and its committees to continue meeting by audio or video conference, either all remote or in a hybrid setting. Mark obtained confirmation from the Health Department's legal counsel, which is the State's Attorney's Office, that the Governing Council Chair and the Board of Health President also have the authority to issue a Determination of Need, so if conditions continue on their current trajectory the Council and the Board may return to meeting remotely or hybrid. In order to do that, the Chair of the Governing Council would need to identify and declare that under the Open Meetings Act (OMA) there is no practical or prudent methodology at this time to meet in person, and he will be working with the Chair on that.*

*--He thanked those Governing Council members who attended the meeting with the HRSA site reviewers for their support. Out of a possible 100+ findings, the Health Department had a total of 6, all of which were minimal and can be easily satisfied. The 6 findings were:*

*\*Providing and Documenting Services within Scope of Project: resolved under agenda item 6.9 - removal of Catholic Charities*

*\*Procedures for Review of Privileges: resolved by updating policy to add additional work on fitness for duty*

*\*Multiple Sliding Fee Discount Schedules: resolved under agenda item 6.5 - one sliding fee schedule for all locations*

*\*Standards of Conduct: potentially resolved through update to Procurement Policy by prohibiting conflict of interest - waiting on HRSA opinion*

*\*Exercising Required Authorities and Responsibilities: resolved under agenda item 6.4 and at the upcoming Joint Budget Committee meeting on 8/18*

*\* Adopting, Evaluating, and Updating Health Center Policies: resolved under agenda item 6.6 by having full Council approve billing and collection policies in addition to prior approval by Council Executive Committee*

*In summary, every one of the findings is easily resolved by a vote or documentation change as evidenced by 4 of the 12 items on the agenda this evening. The staff team did an awesome job, everything was very well organized, and the Compliance group ensured all necessary documents were uploaded for the reviewers. This isn't about what we say, it's about what we show, about having the evidence to prove that requirements have been met. Mark will send the final copy of the results to the Council members.*

*Member Fornero asked what the consequences would be for non-compliance. Mark explained that the consequences could be HRSA's revocation of the 330 grant, \$4-6M, which helps the Health Department meet the unmet needs of the uninsured. Chair Smith-Taylor commented that during the meeting with HRSA, she stressed that the*

Council's goal is to be the model for not only the county, but the country. Vice Chair Brown asked if there is a way to make the community more aware of all of the COVID-19 variants currently circulating. Member Argueta asked if air time or social media could be employed as millennials don't watch the news. Mark explained that the Health Department utilizes all of those avenues (Instagram, Twitter, Facebook, etc.), and much more, but people are on overload and there is too much misinformation on social media. The big and important questions are what really needs to be said to combat that misinformation, what's important, what do people really want to hear, and what is it going to take to change someone's mind to get vaccinated or not. We can put out messages all day, put up billboards, send out mailers, but if people don't want to read it or hear it, they won't. For the schools, he and staff meet every Wednesday with the Superintendents and are asking them to put out those messages in their school newsletters and in messages from the principal, because that is something the parents will read because those same parents are part of the group reading, believing, and sharing the misinformation. Vice Chair Brown asked if schools could require COVID-19 vaccination for kids, like they do for other vaccinations. Mark explained that decision would have to be made by the Illinois State Board of Education (ISBE) through legislation, not the schools. He added that the Health Department's Executive Team has been talking about mandating COVID-19 vaccination for all staff with a medical or religious exemption allowed, per State law, and proposing that to the Board of Health and Governing Council Executive Committees. The Health Department currently mandates influenza vaccination of all staff and doing so increased that vaccination rate from 60% to 95%. Member Argueta asked if that would include Governing Council members. Mark explained that it would not as Council members are not employees of the Health Department. Member Tarter asked if mandating vaccination would be legal under the Emergency Use Authorization. Mark explained that has already played out in the legal realm and provided as an example the 100 employees of a 24,000 employee health system in Texas who sued against mandated vaccination and the judge ruled in favor of the health system. Also, a judge in Indiana recently ruled that Indiana University had the authority to require all students medically able to receive the vaccine get vaccinated. Member Fornero brought up the question of personal choice as to what someone does or does not want to do with their body and sees legal inconsistencies. Mark stated that when talking about personal choice during an infectious disease pandemic you also have to talk about the safety and health of those around you. That there are some things in life for which we have to look at the greater good.

Chair Smith-Taylor asked what HRSA's due date is for the Health Department's response to the findings. Mark stated that the clock starts once the actual document containing all of the findings is received, but that the response time frame provided by HRSA would not be needed as the resolutions to the findings are all very easy and can be submitted soon after. Chair Smith-Taylor added that the National Alliance on Mental Illness (NAMI) has a new pilot initiative with the African-American community and Latino community, and that she would like to discuss what NAMI can do to refer them to the Health Department for

COVID-19 vaccination. Mark stated that the Health Department has a vendor that conducted focus groups with African-American and LatinX Lake County residents to obtain feedback on this exact issue and that once that feedback is received it will be shared with the Council.

## 6. Action items

### 6.1

Provider Credentialing and/or Privileging - Dr. Zun

Dr. Les Zun, Medical Director, presented the six (6) providers for credentialing and privileging (Jamie Esmon, DO; Ali Khoshkish, MD; Allison Lawler, MD; Nikhilesh Raju, MD; Saranya Ravichandran, MD; Nuha Shair, MD) and concurs with the findings of the Personnel Committee to recommend for approval.

Chair Smith-Taylor asked if the new format in regard to fitness for duty was going to be used along with this. Dr. Zun explained that the issue with fitness for duty is that it needs to be included in the policy, not that it isn't being done because we've been doing it for years. Not only have the providers been required to sign off on their own fitness for duty, but their references have been as well to attest that the person they are recommending is fit to care for patients. HRSA's finding is that our policy doesn't explicitly state that fitness for duty will be evaluated.

Mark stated that he met personally with all 3 of the new pediatricians and found them to be great recruits who are very excited to start and are interested in Quality Improvement (QI) and increased immunization rates among children. Overall a very positive new group of providers, and gave his congratulations to Dr. Zun and his team for hiring such quality people. Personnel Committee Chair Ross-Cunningham added that the committee thoroughly reviews all providers brought before them and will question what they see as a possible issue before recommending them to the Council. Member Argueta asked which school the psychiatry residents are from and how long they will be with the Health Department. Dr. Zun explained that they are from Rosalind Franklin, that they are supervised by the Health Department's psychiatry team, and that they will be with the Health Department for one year. Member Argueta asked where they will be located. Dr. Zun stated they will all be located at the Grand Avenue Health Center once we return to in-person patient visits, until then those visits are conducted via telehealth.

**A motion was made by Member Ross-Cunningham, seconded by Member Argueta, to approve the privileges for the providers named (Jamie Esmon, DO; Ali Khoshkosh, MD; Allison Lawler, MD; Nikhilesh Raju, MD, Saranya Ravichandran, MD; Nuha Shair, MD), as requested. Voice vote, all in favor, motion carried.**

**Aye:** 7 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Secretary Argueta

**Absent:** 2 - Member Washington and Member Lara

### 6.2

Provider Reappointment - Dr. Zun

*Dr. Les Zun, Medical Director, presented the seven (7) providers for reappointment (Naghm Al-Bana, MD; Ayesha Ali, MD; Joanna Caban, MD; Amy Holmgren, APRN; Daram Reddy, MD; Maria Roman, DDS; Kathy Sonenthal, MD) and concurs with the findings of the Personnel Committee to recommend for approval.*

**A motion was made by Member Argueta, seconded by Member Bejster, to approve the reappointment of the providers named (Naghm Al-Bana, MD; Ayesha Ali, MD; Joanna Caban, MD; Amy Holmgren, APRN; Daram Reddy, MD; Maria Brunetti Roman, DDS; Kathy Sonenthal, MD), as requested. Voice vote, all in favor, motion carried.**

**Aye:** 7 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Secretary Argueta

**Absent:** 2 - Member Washington and Member Lara

### 6.3

Lake County Health Department Diabetes Care Initiative - \$250,000 - Grant Approval - Pfister

**Attachments:** [ABHIL \\$250K](#)

*Mark Pfister reviewed with the Council the information provided in the agenda packet noting that if the pilot goes well, it will be continued with all of the Health Department's patient population in the future.*

*Member Bejster asked that an update be provided to the Council at the mid-point of the pilot program. Christina Hayes, CQI Coordinator, stated she will be providing more detail during her report later on in the agenda, but that Julie Krohn, Nutrition Services Coordinator, can provide that mid-point update.*

**A motion was made by Member Tarter, seconded by Member Fornero, to approve the Aetna Better Health of Illinois, Inc., funding in the amount of \$250,000 for the diabetes care initiative. Roll call vote, all in favor, motion carried.**

**Aye:** 7 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Secretary Argueta

**Absent:** 2 - Member Washington and Member Lara

### 6.4

Health Resources and Services Administration Budget Period Renewal - Riley

**Attachments:** [Budget Narrative 330 Grant 2021](#)

*Pam Riley, Director of Finance, reviewed with the Council the information provided in the agenda packet noting that this was one of the findings during the HRSA site visit.*

**A motion was made by Vice Chair Brown, seconded by Member Tarter, to approve the Section 330, H80CS00119 Grant funding from HRSA in the amount of \$4,857,249**

as detailed in the budget narrative and the non-federal funds of \$32,269,453. Roll call vote, all in favor, motion carried.

**Aye:** 7 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Secretary Argueta

**Absent:** 2 - Member Washington and Member Lara

## 6.5

Sliding Fee Schedule of Discounts for the School-Based Health Center - Riley

**Attachments:** [GM and WH 21-22](#)  
[FQHC MH Radiology 21-22](#)  
[Jul Family Planning 21-22](#)

*Pam Riley reviewed with the Council the information provided in the agenda packet noting that this was one of the findings during the HRSA site visit.*

*Member Fornero asked why there isn't a SBHC in Waukegan. Mark reminded the Council that the same question came up at the June 8, 2021 meeting and gave a brief recap of what he stated at that time. Member Tarter stated that since the Council just significantly raised the sliding fee scale that is now to be used at the SBHC he would like an evaluation of the number of patient visits at the SBHC before and after that increase to see if they were affected by it. Mark reiterated that HRSA made it very clear during their visit that sliding fee can differ by service but not by location, that every location has to use the same one, so this is a required change. Member Bejster echoed Member Tarter's concerns that a significantly increased sliding fee scale for the SBHC would severely limit access to care for those patients. She asked that this increase be clearly communicated to those patients so they understand why the fees have increased. Pam Riley added that if it is agreeable to the Council, she would like to hold private pay patient billing for the SBHC for the next month to allow Finance to analyze the data. Member Tarter asked if the timing of that would be realistic based on the fact that the kids are not back in school yet. Member Brown asked Pam how much time she thinks she would need to obtain accurate data and she responded 60 days. Mark added that a lot of those kids are covered by All Kids and, therefore, have some form of insurance. He is more concerned about the adults, so he will have Pam and her team look at the payor mix, at how many uninsured adults are utilizing the sliding fee scale. Member Bejster asked if there is someone at the SBHC to assist the uninsured in applying for services. Mark explained that there is not a navigator assigned to that location as the navigators move amongst the different sites, but that we would definitely assist those individuals with enrollment, if need be. Pam stated that an analyses will be provided in 60 days.*

**A motion was made by Vice Chair Brown, seconded by Member Ross-Cunningham, to adopt the Medical, Behavioral Health, and Family Planning programs sliding fee schedule of discounts utilized in Physical Health (FQHC) at the School-Based Health Center. Voice vote, all in favor, motion carried.**

**Aye:** 7 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Secretary Argueta

**Absent:** 2 - Member Washington and Member Lara

## 6.6

Approval of Billing and Collections Policies - Riley

**Attachments:** [Billing and Collection for Medical, Dental and Behavioral Health Services](#)  
[Hardship Fee Reduction for Medical, Dental and Behavioral Health Service](#)

*Pam Riley reviewed with the Council the information provided in the agenda packet noting that this was one of the findings during the HRSA site visit.*

*Member Tarter stated that some of the policies the Council is approving seem to apply to staff who are handling money and that it would be appropriate to have those policies apply to other areas of the Health Department and not just the FQHC's. Mark explained that there are personnel policies already in place that address it, that the Council is only responsible for those policies specific to the FQHC's which is why those are the only ones brought before them. Member Bejster asked that future policy approvals be accompanied by a redline version indicating all changes made, when applicable. Mark clarified that these are already approved policies by the Governing Council Executive Committee as indicated by his signature and date, that they are being brought to the Council tonight at the request of HRSA, but that going forward the Council will receive a final version and redline version, same as what the Council Executive Committee receives when they are sent policies under the 14-day review and approval process. Member Bejster asked if in the next revision to the Hardship policy it can state whether or not the Financial Hardship Application form is available in different languages and/or if assistance is provided if someone is not able to complete it on their own. Pam confirmed that the form is available in Spanish, and that front desk staff are trained to assist.*

**A motion was made by Member Tarter, seconded by Member Bejster, to approve the Billing and Collection for Medical, Dental and Behavioral Health Services policy and the Hardship Fee Reduction for Medical, Dental and Behavioral Health Services policy, as presented. Voice vote, all in favor, motion carried.**

**Aye:** 7 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Secretary Argueta

**Absent:** 2 - Member Washington and Member Lara

## 6.7

Service Site Scope Change - North Chicago Health Center - Pfister

*Mark Pfister reviewed with the Council the information provided in the agenda packet. He summarized some of the renovations done to-date: BMB, Zion (adding third dental operatory and a sim lab for staff training), and backup generators at all locations to maintain computers and refrigerators. And while there were some inconveniences to*

*patients and clients while BMB was being renovated, there was no impact to patients and clients at Zion. Initially, the work to be done at North Chicago was going to be a 3-phased project that would take 18 months but, ultimately, the team decided that the patients and clients were going to be inconvenienced for one service or another and that they would have to be moved to another location for those services no matter what. By closing North Chicago for only 6-8 months, all of the renovations can be completed at one time, the duration of the inconvenience to the patients and clients will be much shorter, and as a result of a survey of the patients as to where they want to go during the closure the North Chicago provider teams will be temporarily relocated to BMB, which is slightly over one mile from North Chicago and easily accessible via public transportation. If the renovations were to be done as a 3-phased project, not only would it take 18 months, dental would be closed in phase 1 in order to work on the dental operator, so those patients would have to go to BMB. During phase 2, the main entrance would have to be closed, impacting dental, WIC, and behavioral health so those patients and clients would then have to go to BMB. In phase 3, medical would have to be closed. Cost-wise, a 6-8 month closure is more favorable than an 18-month 3-phase renovation because in phase 2 a new temporary entrance would have to be constructed on the south side of the building. All of this has also been discussed with HRSA, so they are aware.*

*Member Ross-Cunningham asked how the move of the North Chicago care teams to BMB would affect services at BMB. Mark explained that the existing services and providers at BMB would remain the same, there would just be more days of open dentistry at BMB. Member Brown asked if that would change the scope for BMB. Mark explained that it would not because the services provided are still within the same scope, there will just be more patients seen at that location. Member Argueta asked if there is enough space at BMB for the additional staff. Mark stated that Jerry Nordstrom, Dr. Zun and Kim Burke have worked out where within BMB those care teams will go. Mark reiterated that by closing North Chicago those patients will still be able to receive all of their services at one location rather than having to bounce between two different locations for those same services which is why the phased fragmentation would be more of an inconvenience than a temporary new site. Member Ross-Cunningham stated that she represents the 14th district and those residents had to go to BMB before the existing North Chicago site was built, so she doesn't think the change will bother them that much. Also, there is a bus stop at the North Chicago location that will take them directly to BMB. Member Tarter stated he has reservations on the closure approach because so much time and money has been expended in establishing a medical home for our patients and it would be unwise to deprive them of that for 6-8 months. Member Ross-Cunningham stated that she understands Member Tarter's concern, but that she supports the closure because the improvements at North Chicago are needed and the sooner it's done, the better it will be for those residents. Mark added that he also understands Member Tarter's concern, but to Member Ross-Cunningham's comment, we are also planning for the future. There is a lot of new low-income housing just to the west of the North Chicago location, so a different flow*

*and more of a patient-centered medical home process is needed at the North Chicago site. We need to prepare that facility for the growing population in a way that ensures those patients are going to utilize it. And while we know it is going to be an inconvenience for those patients, we felt that the inconvenience is going to happen regardless. Member Tarter stated that this has been explained to him well enough that he understands it is a necessary improvement, but he is worried that it looks like a situation where the tail is wagging the dog, that we have money so we have to figure out some way to spend it and we're going to do it by shutting this place down for 6-8 months, and he doesn't feel that is right. Member Ross-Cunningham followed up by stating that residents of low-income areas are always happy when improvements are made in the neighborhood and to the services available to them.*

*After the vote, Mark Pfister informed Chair Smith-Taylor that the severe storm appears to be coming in approximately 30 minutes. Member Bejster asked Chair Smith-Taylor if it would be possible to get through the remaining action items and postpone the remaining agenda items until the next meeting. Chair Smith-Taylor agreed.*

**A motion was made by Member Ross-Cunningham, seconded by Member Argueta, to approve the service site scope change of closing the North Chicago Health Center during its renovation, as presented. Roll call vote, 6 in favor, 1 opposed, motion carried.**

**Aye:** 6 - Member Fornero, Vice Chair Brown, Member Bejster, Member Cunningham, Chair Smith-Taylor and Secretary Argueta

**Nay:** 1 - Member Tarter

**Absent:** 2 - Member Washington and Member Lara

#### 6.8

Scope of Project Change - Additional Services - Podiatry - Dr. Zun

*Dr. Les Zun reviewed with the Council the information provided in the agenda packet and noted that the added podiatry services would be provided at the Grand Avenue Health Center one day a week.*

**A motion was made by Member Ross-Cunningham, seconded by Member Fornero, to approve the scope change of podiatry as an additional service, as presented.**

**Aye:** 7 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Secretary Argueta

**Absent:** 2 - Member Washington and Member Lara

#### 6.9

Scope of Project Adjustment - Pfister

**Attachments:** [Scope Adjustment Case Management](#)

*Mark Pfister reviewed with the Council the information provided in the agenda packet*

*noting that this was another one of HRSA's findings during their recent site visit.*

**A motion was made by Vice Chair Brown, seconded by Member Ross-Cunningham, to approve the scope of project adjustment by removing Catholic Charities from Column III services. Roll call vote, all in favor, motion carried.**

**Aye:** 7 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Secretary Argueta

**Absent:** 2 - Member Washington and Member Lara

#### 6.10

Change in FQHC Hours of Operation - Dr. Zun

**Attachments:** [Change in FQHC Hours of Ops](#)

*Dr. Les Zun reviewed with the Council the information provided in the agenda packet.*

**A motion was made by Member Ross-Cunningham, seconded by Member Tarter, to approve the change in the hours of operation for the School-Based Health Center, as presented. Voice vote, all in favor, motion carried.**

**Aye:** 7 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Secretary Argueta

**Absent:** 2 - Member Washington and Member Lara

#### 6.11

FY2022 Illinois Children's Healthcare Foundation and Delta Dental of Illinois Foundation Delta Dental: COVID-19 Utilization Decreasing Oral Health Disparities - \$200,000 - Grant Application Approval - Dr. Zun

*Dr. Les Zun reviewed with the Council the information provided in the agenda packet.*

*Member Tarter asked if it would be staffed by a hygienist. Dr. Zun explained that the plan is to have the Health Department's Community Health Workers (CHW), if the grant for the CHW's continues, educated on how to address oral health needs. There is a program provided by the American Dental Association that teaches how to do community work and educate the population on oral health. And an LCHD dental hygienist would provide education, supervision, and guidance to the CHW's. Member Tarter recalled the previous difficulty in recruiting a dental hygienist and asked if a new dental hygienist would be recruited for this position. Dr. Zun stated that if a new one is needed he does not feel it would be difficult to recruit for as it is a different position and that half of its time would be spent on education and supervision.*

**A motion was made by Vice Chair Brown, seconded by Member Fornero, to approve the application for grant funding of up to \$200,000 from the Illinois Children's Healthcare Foundation and Delta Dental of Illinois Foundation. Voice vote, all in favor, motion carried.**

**Aye:** 7 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Secretary Argueta

**Absent:** 2 - Member Washington and Member Lara

**6.12**

Revised Governing Council Committee Appointments for 2021 - Pfister

**Attachments:** [2021 GC Committee Appointments - REVISED 2](#)

*Mark Pfister informed the Council that he and Chair Smith-Taylor met previously to discuss her committee appointment selections, that she then confirmed those appointments with the Council members selected, and that Member Fornero has agreed to serve on the Nominating Committee and Member Lara has agreed to serve on the Strategic Planning Committee.*

**A motion was made by Member Bejster, seconded by Member Ross-Cunningham, to approve the revised Governing Council committee appointments for 2021, as presented. Voice vote, all in favor, motion carried.**

**Aye:** 7 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor and Secretary Argueta

**Absent:** 2 - Member Washington and Member Lara

**7. Presentations**

*At this point in the meeting, for the safety of all those in attendance, it was decided to postpone all remaining agenda items until the September 14, 2021 Governing Council regular meeting due to incoming severe weather.*

**8. Discussion Items**

**8.1**

CQI Update - Hayes

**Attachments:** [UDS Measures](#)

**This matter was postponed**

**8.2**

Information Privacy Incident Summary - Nordstrom

**This matter was postponed**

**9. Medical Director Report**

**9.1**

Medical Director Report - Dr. Zun

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

**This matter was postponed**

**10. Director of Healthcare Operations Report**

**10.1**

Director of Healthcare Operations Report - Burke (presented by Dr. Zun)

**This matter was postponed**

**11. Director of Finance Report**

**11.1**

Director of Finance Report - Riley

**Attachments:** [FQHC Jun 21](#)

**This matter was postponed**

**12. Added to Agenda**

*None*

**13. Old Business**

*None*

**14. New Business**

*None*

**15. Executive Session**

*None*

**16. Adjournment**

**A motion was made by Member Tarter, seconded by Member Bejster, that this meeting be adjourned. Chair Smith-Taylor adjourned the meeting at 7:03 p.m.**