

# Lake County Illinois

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



## Meeting Minutes - Final

Thursday, March 14, 2019

12:00 PM

3010 Grand Ave., Waukegan, IL 60085

**Lake County Community Health Center Governing  
Council**

1. Call to Order

**Chair Withem-Voss called the meeting to order at 12:02 p.m.**

**Present** 10 - Chair Withem-Voss, Vice Chair Fornero, Secretary Washington, Brown, McConico, Tarter, Bejster, Cunningham, Smith and Vargas

**Absent** 1 - Duque

2. Approval of Minutes

2.1

February 14, 2019 Meeting Minutes

**Attachments:** [GC Minutes 2.14.19 - DRAFT](#)

*Chair Withem-Voss stated that her last name is spelled incorrectly throughout. Member Bejster stated that she is still listed as Chair. Member Tarter stated that "Board" should be changed to "Council." Mark Pfister noted that the spelling of names and application of titles is built in to the Legistar system, so Lisa Kroeger will work with County IT to get those corrections made. She will also change "Board" to "Council" and use "Council" going forward.*

**A motion was made by Member Brown, seconded by Member Washington, to approve the February 14, 2019 minutes as amended with the corrections noted. The motion carried unanimously.**

**Aye:** 10 - Chair Withem-Voss, Vice Chair Fornero, Secretary Washington, Brown, McConico, Tarter, Bejster, Cunningham, Smith and Vargas

**Absent:** 1 - Duque

3. Public Comment to the Governing Council

**None**

4. Executive Director's Report

*Executive Director Mark Pfister informed the Council that a form titled "Selection of manner in which Governing Council Members want to receive meeting materials" will be passed around and members are to indicate if they would like to receive their meeting materials digital only, digital and paper, or paper only. He explained this is being done in an effort to reduce the cost of postage, mailing materials, paper, undelivered/lost packages, etc. He also reminded members to complete and submit their Statement of Economic Interest (SEI) and Open Meetings Act certification and that Lisa Kroeger will assist members in getting those done. Lisa commented that for those members who have not yet filed their SEI, a paper copy of the form has been placed at their chair and she asked them to complete, sign, and date the form and turn it in to her before leaving and she will submit them to the County Clerk's office. Member Cunningham thanked Lisa for getting the Governing Council meeting packet in Legistar, commenting on how nice it is. Mark noted that members will find in front of them a suggested motion regarding member*

*reimbursement and this item will be addressed under Old Business. He then introduced Associate Directors Sara Zamor and Jennifer Gassman who provided the Council with a presentation on the recent quality improvement projects for the Immunization program and resulting outcomes. Member Vargas asked if the Health Department is taking any steps to address the culture/perception surrounding the belief that vaccinations are not beneficial. Sara stated vaccinations for all Health Department staff is being addressed, and we're going to be working very closely with schools as we already monitor vaccination rate compliance for all schools, private and public. We also monitor if they're turning in declination forms based on religious or moral exemptions. We will visit those schools that don't hit a certain vaccination rate and talk with them about their compliance rates. Private schools don't have to enforce vaccinations, but public schools do. We also want to get the data out and available to the public, through our Tableau software system on our Live Well Lake County site, so that the public can be informed as to which schools and communities aren't reaching appropriate vaccination rates. National efforts are being made to remove misinformation and lies pertaining to vaccine safety from the internet, Google searches, Facebook, etc.*

**5. Items for Approval**

**5.1**

Provider Credentialing and Privileging: Batch #124

*Personnel Committee Chair Bejster recommended this item for approval by the Council.*

**A motion was made by Member Cunningham, seconded by Member Bejster, that this item be approved. Motion carried unanimously.**

**Aye:** 10 - Chair Withem-Voss, Vice Chair Fornero, Secretary Washington, Brown, McConico, Tarter, Bejster, Cunningham, Smith and Vargas

**Absent:** 1 - Duque

**5.2**

Professional Staff Reappointments

*Personnel Committee Chair Bejster recommended this item for approval by the Council.*

**A motion was made by Member Bejster, seconded by Member Brown, that this item be approved. Motion carried unanimously.**

**Aye:** 10 - Chair Withem-Voss, Vice Chair Fornero, Secretary Washington, Brown, McConico, Tarter, Bejster, Cunningham, Smith and Vargas

**Absent:** 1 - Duque

**5.3**

Sliding Fee Schedules

**Attachments:** [Sliding Fee Schedules Mar 2019](#)

**A motion was made by Member Brown, seconded by Member Bejster, that this item be approved. Motion carried unanimously.**

**Aye:** 10 - Chair Withem-Voss, Vice Chair Fornero, Secretary Washington, Brown, McConico, Tarter, Bejster, Cunningham, Smith and Vargas

**Absent:** 1 - Duque

**5.4**

Annual Compliance Work Plan Review and Approval - Nordstrom

**Attachments:** [Compliance Work Plan 2018 Annual Summary FINAL](#)  
[Compliance Work Plan 2019 - FINAL](#)  
[Corporate Compliance Plan 2019 FINAL](#)

*Member Bejster commented that she found the work plan very thorough and appreciated the clear evaluation pieces, noting that great strides appear to have been made since last year.*

**A motion was made by Member Washington, seconded by Member Bejster, that this item be approved. Motion carried unanimously.**

**Aye:** 10 - Chair Withem-Voss, Vice Chair Fornero, Secretary Washington, Brown, McConico, Tarter, Bejster, Cunningham, Smith and Vargas

**Absent:** 1 - Duque

**6. Approval of Grants**

**None**

**7. Information Items**

**7.1**

Governing Council Member Resignation - Pfister

**Attachments:** [Carolina Duque Resignation](#)

*Executive Director Mark Pfister shared Carolina's comments that she really enjoyed her time on the Council, found it very rewarding, but due to current job commitments she can no longer serve. Member Fornero asked if a letter of appreciation for her service can be sent on behalf of the Council. Mark said he would have a letter drafted for the Chair's signature.*

**7.2**

CQI Update

**Attachments:** [CQI Update Dashboard](#)

*Mark Pfister called Jefferson McMillan-Wilhoit, Director of Health Informatics, to the table. Jefferson introduced himself and explained what he and his team do for the Health Department. He stated that his staff member Kristina Hayes normally provides the CQI update to the Council, but since he will be talking about the Utilization Data System (UDS) report that was just submitted, he will be presenting. He informed members that he will attend one Council meeting a year to provide the UDS report update and that Kristina and*

*staff will provide the regular updates and be the Council's primary point of entry to the Health Informatics Team. He asked the Council to skip item 7.2, CQI Update, as they can review the attached tables, and instead go to item 7.3, UDS Comparison Report.*

### 7.3

Uniform Data System (UDS) Data Sources and Annual Comparison 2018

**Attachments:** [UDS Data Sources and Annual Comparison 2018 FINAL](#)

*Jefferson McMillan-Wilhout, Director of Health Informatics, explained that every year a Uniform Data Systems (UDS) report has to be filed with HRSA. It contains all of the data points HRSA wants to see and review to ensure the Health Department is in compliance with its grants and that quality care is being provided to all patients. He and his team have been crafting and aggregating the data for the report since December 2018. He reviewed with the Council the color-coded table provided in the agenda packet explaining that the items listed are the quality indicators that, per HRSA, are the items the FQHC needs to be monitoring and correcting whenever they get too low or too high, depending on the measure. Column 1 - Measure: what is being measured; Column 2 - Source: where the information is coming from; Column 3 - Healthy People 2020: a framework created by HRSA, other Federal agencies and other entities stating what the national metric should be; Columns 4 and 5 - Illinois and National Avg. 2016: utilized by HRSA to grant us additional money for our quality improvement efforts every year; if the Health Department goes above and beyond that average that is the National Quality Leader Spectrum (NQLS); Columns 6 thru 10 are what the Health Department has reported since 2014, with 2018 just reported in February 2019. Green indicates improvement, red indicates a negative outcome, the number alone does not. Mark Pfister stated that in the future, those targets we've met or exceeded can be color-coded green. Member Tarter asked if the comparison is 2017 to 2018 and Jefferson confirmed it is. Member Tarter asked if the comparison shouldn't be 2018 to the UDS column which is what we're being held to. Jefferson explained that we are not being held to the National Average as it is a target and sometimes the Health Department sets a higher target for itself. Member Fornero asked for further clarification on the numbers pertaining to diabetes. Jefferson explained that the numbers in the table are annualized numbers and the Council is used to seeing monthly numbers, which actually gives them a better picture of month-to-month progress. He also noted that the monthly numbers do not include those patients we do not get an A1C for, whereas the annualized numbers do. Member Brown referenced the "Newly Identified HIV Cases and Follow-Up" measure, asking how are we sure 100% of new cases have been identified? Jefferson explained that this is a combined measure that's asking, "for those new HIV cases identified was follow-up provided?" And we can ensure follow-up was provided to 100% of those newly identified cases. Also, the number of new cases identified every year is actually a fairly low number, hence the 100% outcome. And the Health Department's MMC team is excellent and on top of getting clients in and doing follow up. Member Smith asked what was being done to change the numbers in red to green. Jefferson explained that each of the measures are going to have a different*

response so some may be education related, some may be a protocol change, some may be workflow changes. Dr. Zun and staff are working really hard to review those measures in red, find potential solutions, and use the standardized quality improvement process to work through those potential solutions to see if and how they will affect the numbers. Mark added that some are simply due to provider and/or staff error and oversight and are, therefore, a really simple solution. Member Washington asked why they are not part of the triage process. Jefferson explained that some of them are being done and documented before the patient sees the provider, some of them require the provider to do and document, and others are being done by both staff and provider but are not being documented. Dr. Zun explained that for everything in red they are looking at what's being measured, how can we impact the compliance with the measurement from a process standpoint, and how can the provider be incentivized to be on the same page. An incentive program for the providers is currently being formulated and is about 2-3 months from potentially being implemented pending Board of Health and Governing Council approval. He also added that training for the providers is also being addressed and has been implemented in the form of electronic training modules that can be accessed and completed via the internet. Chair Withem-Voss asked if lack of follow-thru by the patient has been factored in. Jefferson explained that analysis has not been done yet, but it is definitely on the list. Mark stated that our goal is to make our clients and patients successful in their endeavors.

#### 7.4

2018 Annual Report - Pfister

**Attachments:** [2018 LCHD Annual Report](#)

Mark Pfister thanked staff and stated that every year the annual report is becoming more informative. Previously it was more data focused but now we want to really tell peoples' stories. Having clients and patients share their experiences has been very well received. The data, strategic plan goals, and financial report can now be found at the end of the document.

### 8. Medical Director's Report

#### 8.1

Medical Director's Report

Dr. Zun informed the Council that he has been very busy working with the providers, working on the provider incentive plan, on clinic operations, the role of the clinic manager, processes and streamlining of patients through the clinics, and the patient's perception of the care we provide. We will be replacing our Press Ganey survey system but until a new one is in place, we will begin to conduct monthly townhall meetings at the clinic sites to capture patient feedback. Rosalind Franklin University of Medicine and Science has shown a lot of interest in having their physician assistant students, medical students, and students from other schools of study, such as podiatry and pharmacy, do internships. Member Vargas asked if those internships would be done at the Health Department and in

what way? Dr. Zun explained that it would be different for each school of study. For example, the medical school is looking for a clinical exposure in the student's first and second year, a psychiatry rotation in their third year. The physician assistant school is looking for a pediatric and women's health rotation. And we would have to have someone to coordinate all of the students and different areas of study, and to ensure we're meeting the needs of the students and that the students are providing a value-added service to the Health Department. Member Vargas asked where the funding for such a program would come from. Dr. Zun explained that discussions regarding that matter are taking place and that he would like to see remuneration to the County from the school. If that does not occur then we would at least need a student coordinator provided by Rosalind Franklin. He is looking for an exchange, a quid pro quo. Mark added that the key is that we're committed to working with Rosalind Franklin and we have a great partnership with them.

## **9. Dental Director's Report**

### **9.1**

Dental Director's Report

Dr. Cockey informed the Council that the dental chairs previously out-of-service due to water line issues are now back in service. Pediatric patients at Zion continue to be monitored to meet grant expectations. A meeting with the Communications team took place to look at ways to recruit more pediatric patients to that site. Dental staff continue to be trained and updated regarding sterilization and infection control issues. Additional items are outlined in the attached report.

## **10. Director of Finance's Report**

### **10.1**

January 2019 FQHC Financial Report

**Attachments:** [FQHC Jan 19](#)

Director of Finance Pam Riley informed the Council that the report for January 2019 is in their agenda packet. There is an excess of \$341,047.00 which is a little over \$100,000.00 more than the prior month. The contributing factors are the 2% increase in Medicare, which is additional revenue, and the 5% increase in Medicaid. The 60% range is due to the number of provider vacancies as they are the revenue generators. The audit process has started and the WIC program is going to be audited. One other program is being considered, but hasn't been finalized yet. Final results will be available in May. Member Fornero noted that on the January statement, income is \$5.12M, so that must mean income in the early part of the year is top-heavy otherwise that would mean annual income is \$60M. Pam responded that is correct, but it also depends on seasonality. Member Fornero then asked about "Personal Services" under expenses and what that means. Pam explained that term refers to salaries and the categories are what HRSA utilizes. Member Tarter pointed out to Member Fornero to keep in mind that the fiscal year begins on December 1, not January 1, so the report is for two months, not one.

## **11. Reports of Committees**



*Member McConico informed the Council that a meeting of the Strategic Planning Committee will be held in the not too distant future. Mark Pfister stated that Lisa Kroeger will send the meeting invite to the Strategic Planning Committee members.*

## **12. Old Business**

### **12.1 Member Reimbursement Suggested Motion**

*Mark Pfister informed the Council that a suggested motion pertaining to member reimbursement has been drafted and is in front of them. He then proceeded to read it to the Council. He reminded the Council that at their February meeting he presented them with a recommendation from legal counsel of a \$20-25 fixed reimbursement to cover mileage cost to and from Council meetings, and based on the current federal mileage reimbursement rate, round-trip mileage for current Council members would be covered by either of those amounts. Therefore, he suggested as a motion for the Council, that members may receive \$25 per meeting intended to cover personal mileage costs. Members may also decline reimbursement, if they so choose. Transportation costs such as a cab, Uber, etc., are not included in the suggested motion as those costs would be taken care of by the Health Department through the use of a cab or Pcard as the Uber pilot program is almost ready to launch. Staff could also be sent to pick a member up, if necessary. Members would be required to submit a voucher to request reimbursement for childcare costs incurred as a result of Council meeting attendance. Lost wages would be reimbursed as long as the member met the criteria set by HRSA. Member Brown asked what County Board members are paid, but was told they are elected officials and can't be used as comparison. He stated he meant the Board of Health members. Mark informed the Council that the Board of Health is governed by Illinois Statute, whereas the Governing Council is governed by HRSA requirements, and that Board of Health members are appointed by the County Board Chair with the concurrence of the County Board. So, again, can't be used as comparison. Member Fornero asked for a motion and second before discussing.*

**A motion was made by Member Tarter, seconded by Member Brown, to approve the suggested motion.**

### **12.2 Amendment of Suggested Motion**

*Member Fornero asked Council members to refer to the minutes from last month's meeting, item 12 "Old Business, where it states, "there are several good reasons for reimbursement: personal time allocated by members to review materials and attend meetings; it promotes professionalism by stimulating member attendance and accountable performance; it attracts qualified and able individuals to be members; it promotes economic diversity by giving those who otherwise wouldn't be able to serve the opportunity to do so, especially consumers." He then referenced where it states, "With a \$40M revenue budget that works out to 0.003% of the budget." He stated that in the suggested motion it references 42 CFR 51c.107, which permits the health center to use federal funds to reimburse members. He then asked if there is a prohibition to reimburse*



*members under the terms discussed, and are there available funds other than federal award funds, such as State, local or non-government agency. He also felt that one of the provisions for reimbursement, "if the member is from a family with an annual family income less than \$10,000 or if the member is a single person with an annual income less than \$7,000," was unreasonable as it works out to \$112 a week. His preference is to see if it's possible to have the \$100 per meeting brought up at last month's meeting, subject to member declination, if they choose. Member Tarter stated that his understanding is that the \$10,000 and \$7,000 is linked to wages and not other sources of income. Mark reiterated that, as Executive Director, he is telling the Council what HRSA, the Council's governing entity, has dictated. Member Cunningham asked what legal counsel is recommending and Mark reiterated that legal counsel is recommending that we need to follow what HRSA is requiring, that is why it's in the suggested motion, but that he did recommend using a fixed amount rather than using exact mileage, and he, as Executive Director, is recommending the higher of the two amounts which is the fixed amount as recommended by legal counsel. Member Bejster asked Mark if he has spoken with anyone at HRSA as to what they are using to calculate reasonable expenses. Mark stated that as discussed at last month's meeting, the key word here is "expenses," that the question regarding wages lost has been addressed, and that our attorney has pointed out the question as whether giving people dollars to serve on a voluntary board is even legal in the sense of HRSA. After much discussion it was decided to amend the suggested motion to state that it is subject to legal review which includes confirmation with HRSA, reimbursement to be set at \$100 per meeting attended for those members who desire reimbursement.*

**A motion was made by Member Fornero, seconded by Member Brown, to amend the suggested motion as discussed. Motion carried with Member Tarter registering a Nay vote.**

**Aye:** 9 - Chair Withem-Voss, Vice Chair Fornero, Secretary Washington, Brown, McConico, Bejster, Cunningham, Smith and Vargas

**Nay:** 1 - Tarter

**Absent:** 1 - Duque

**13. New Business**

**None**

**14. Executive Session**

**None**

**15. Adjournment and Next Meeting**

**A motion was made by Member Brown, seconded by Member McConico, that this meeting be adjourned. Motion carried unanimously. Meeting adjourned at 1:55 p.m.**

**The next regular meeting is Thursday, April 11, 2019, at Noon.**