

# 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 13, 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, the Gubernatorial Disaster Proclamation, 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](mailto: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.**

**Present** 8 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor, Secretary Argueta and Member Lara

**Absent** 2 - Member Washington and Member Vargas

**1. Call to Order**

**Chair Smith-Taylor called the meeting to order at 5:32 p.m.**

**Present** 8 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor, Secretary Argueta and Member Lara

**Absent** 2 - Member Washington and Member Vargas

**2. Pledge of Allegiance**

**Vice Chair Brown led the Pledge of Allegiance.**

**3. Approval of Minutes**

**3.1**

March 9, 2021 Meeting Minutes

**Attachments:** [GC Minutes 3.9.21 - DRAFT](#)

**A motion was made by Member Fornero, seconded by Member Tarter, that the minutes be approved as presented. Roll call vote taken, all in favor, motion carried.**

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

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

**Not Present:** 1 - Member Cunningham

**4. Public Comment to the Council**

*None*

**5. Executive Director's Report**

*Mark Pfister, Executive Director, reported on the following:*

- Currently in Lake County, 371,019 doses of COVID-19 vaccine have been administered*
- We have a rolling average of 7,325 doses administered per day*
- Over 20% of the Lake County population has been vaccinated*
- Seventy-five percent of those age 65 and above have been vaccinated with at least one dose of the 3 types of vaccine we currently have*
- Today we followed the guidance of the CDC and FDA by pausing administration of the Johnson&Johnson (J&J) vaccine at all of our sites. While we have pivoted to using Pfizer*

*and Moderna where J&J was to be used, our expectation is that the CDC and FDA will review the evidence on the six J&J cases, which were all female age 18-48 and a type of thrombosis in the head region, to determine the cause. As a reminder, there have been 6.8 million doses of J&J administered so the risk of this adverse event is over 1 in one million.*

*He then asked Kim Burke, Director of Healthcare Operations, to inform the Council of the application we are submitting for a school-based health center (SBHC) grant through HRSA, as HRSA requires the Council be informed whenever grant application is made. It is a two-year grant for a total of \$183,700.*

*Kim informed the Council that we are applying for 4 different components. The first component is for renovation of our Behavioral Health space at our current SBHC in Round Lake to accommodate more students and thereby offer more group services. The second component is access to service capacity increase. The third component is training, equipment, and continued competencies in classes for our provider team in vision and hearing screenings because those are currently provided by the school nurse. The fourth component is to add a certified medical assistant (CMA) to the SBHC provider team. The team currently consists of an APRN, an LPN, and a clerk. By adding a CMA we feel we will be able to expand capacity and do more outreach of services to the students. Costs associated with increased expansion and service access will be added to our annual HRSA 330 grant after this two-year grant expires in order to provide those services going forward. Mark added that this grant will not require any local tax dollars as match.*

*Mark added that we are also going to receive from HRSA, as part of the American Rescue Plan Act (ARPA), \$8.7M which will be brought to the Council for appropriation after we create the budget and after we continue to review the different requirements of this grant as well as what can be committed for the grant. It is to address COVID-19 and our capacity to address COVID-19, but there are other aspects for which we could apply. It is a two-year grant that will end in 2023.*

*Member Argueta asked how likely is it that both grants will be received. Mark stated that we are definitely going to receive the \$8.7M ARPA grant and that we have a very good chance of receiving the SBHC grant, as well.*

## **6. Action items**

### **6.1**

Provider Credentialing and/or Privileging - Dr. Zun

*Dr. Les Zun, Medical Director, informed the Council that the credentialing and privileging information for the providers noted in the agenda packet was reviewed in the Personnel Committee meeting which took place just prior to this regular meeting and the Committee recommends approval.*

**A motion was made by Vice Chair Brown, seconded by Member Bejster, that this item be approved. Roll call vote taken, all in favor, motion carried.**

**Aye:** 8 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor, Secretary Argueta and Member Lara

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

## 6.2

Provider Reappointment - Dr. Zun

*Dr. Zun informed the Council that the reappointment information for the providers noted in the agenda packet was reviewed in the Personnel Committee meeting which took place just prior to this regular meeting and the Committee recommends approval.*

**A motion was made by Member Bejster, seconded by Member Fornero, that this item be approved. Roll call vote taken, all in favor, motion carried.**

**Aye:** 8 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor, Secretary Argueta and Member Lara

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

## 6.3

Ratification of Pandemic Health Navigator Program Grant, \$2,333,333 - McMillan-Wilhoit

**Attachments:** [IPHCA PHNP \\$2.3M](#)

*Jefferson McMillan-Wilhoit, Director of Health Informatics and Technology, reviewed the information provided in the agenda packet. Member Brown asked how many new staff positions does this grant provide for and what is the duration of those positions. Jefferson explained that the grant runs until December 31, 2021 and there is no indication it will be renewed past that. Mark Pfister added that new hires through this grant will be employees of the Lake County Health Department and, therefore, could potentially be rolled in to the American Rescue Plan Act (ARPA) grant as they are community health workers and case managers and that there will be a total of 35 new staff positions.*

**A motion was made by Vice Chair Brown, seconded by Member Bejster, that this item be approved. Roll call vote taken, all in favor, motion carried.**

**Aye:** 8 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor, Secretary Argueta and Member Lara

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

## 6.4

Illinois Breast and Cervical Cancer Program, \$170,000 - Grant Approval - Burke

**Attachments:** [IDPH IBCCP \\$170K](#)

*Kim Burke, Director of Healthcare Operations, reviewed the information provided in the agenda packet.*

**A motion was made by Member Ross Cunningham, seconded by Member Tarter, that this item be approved. Roll call vote taken, all in favor, motion carried.**

**Aye:** 8 - Member Fornero, Vice Chair Brown, Member Tarter, Member Bejster, Member Cunningham, Chair Smith-Taylor, Secretary Argueta and Member Lara

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

## **7. Presentations**

*None*

## **8. Discussion Items**

### **8.1**

2020 UDS Submission to Health Resources and Services Administration (HRSA) - McMillan-Wilhoit

**Attachments:** [Annual 6B Comparison](#)

*Jefferson McMillan-Wilhoit reviewed the information provided in the agenda packet. Member Tarter asked if it would be better to compare the current year to the national average as that is going to dictate if we receive additional funding for being a National Quality Leader (NQL). Jefferson stated that the national average is what the Health Department would be compared to for any additional funding it may or may not receive from HRSA. However, the red and green in the table provided is to show the Council how things are changing over time locally. A comparison to the national average is certainly something that can be provided. Member Tarter asked for confirmation that an increase was just received for the Section 330 grant due to achievement for going after NQL. Mark Pfister noted that he is going to have Christina Hayes address that in her report as HRSA is changing how it is going to fund quality indicators and as a result of those changes the Health Department is not expecting to receive any quality funding. Member Tarter asked if there is money included in the total appropriation at the federal level for national quality leaders or are they abandoning the concept. Mark reiterated that he will have Christina address that in her report, but for the 2020 UDS measures the federal government is changing the methodology on rewards for higher quality. Member Bejster asked if there were any UDS measures greatly affected as a result of COVID-19. Jefferson stated that dental sealants was probably the biggest one as it was at 75.2% in 2019 and at 35.2% in 2020, an impactful change in volume in the number of children coming through our dental sites. A lot of the dental procedures we provide have been impacted by the pandemic and are still under some restriction. Though there has been a noticeable increase in the childhood immunization status from 33% to 38%.*

### **8.2**

CQI Update - Hayes

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

*Christina Hayes, CQI Coordinator, started by addressing Member Tarter's question and*

*stated that she does not have a lot of details yet. HRSA tends to release the NQL award in September, we submit our UDS in February, so it takes time for them to compile that data, which is another reason why we can't compare to 2020 as we don't yet know what those averages are. HRSA has said they are not releasing any quality dollars this year for any health centers as they are looking at revising the way they incentivize quality health centers. They are going to move away from looking at particular quality measures, even though they still want us to report on those measures, because rather than seeing how we are doing in our measures they want to see how we are doing overall as a health center. They have introduced a new framework that they will detail more specifically so health centers know what they can do to impact inpatient care, access, and quality care areas. She also noted that the health department is doing much better this year in the dental sealant measure as compared to last year. Member Tarter noted that unfortunately it is typical to change the standards and that the standards in the UDS have a great deal of impact on health disparities and we should be able to address the issues for health disparities straight on. Christina clarified that HRSA is still going to focus on disparities, they are just giving us a broader framework so that we can assess our current state as an agency and determine where we want to be in the future. She then proceeded to review the information provided in the agenda packet and reminded the Council that outreach calls are being done to diabetic patients with an A1C of 9 or greater or who have no A1C on record. It has been a bit challenging as people are hesitant to come in due to the pandemic. However, 51% of those outreach calls resulted in appointments which we hope will lead to continued care. We are also working on aligning our current diabetes standard practice guidelines with recently updated American Diabetes Association recommendations. Our diabetes group is going to be mapping out our entire diabetes workflow to find potential system breakdowns and opportunities for standardization and improvement in our diabetes medical care, nutrition, and all other wraparound services. Our nutrition program is providing glucose monitoring kits to patients who cannot afford them. Patients who take a kit will be monitored for improvement in their A1C compared to other diabetes patients as we feel the more support we offer the more likely patients are to make the positive changes needed. Member Bejster asked if there is a breakdown of how many patients have not had their A1C measured and if outreach is being done. Christina stated that the most recent report showed that only 4% of our patient population has no record of an A1C ever being taken at our FQHC and those individuals are being included in the outreach calls.*

## **9. Medical Director Report**

### **9.1**

Medical Director Report - Dr. Zun

*Dr. Zun reviewed the highlights of his report as provided in the agenda packet. He encouraged Council members to attend the virtual Town Hall being held Thursday evening, April 15. Member Tarter asked what the expected role is of the Council in The Joint Commission visit. Dr. Zun explained that there will be a session with Leadership and he has asked Chair Smith-Taylor and Past Chair Bejster to join that session. Mark*

*added that Council members will be more involved during the HRSA visit currently scheduled for August 3, 2021 via Zoom, but we are still waiting for confirmation on that date. We want to have as many Council members as possible involved, but Chair Smith and Past Chair Bejster will be the primary participants as Past Chair Withem-Voss recently resigned.*

## **10. Director of Healthcare Operations Report**

### **10.1**

Director of Healthcare Operations Report - Burke

*Kim Burke reviewed the highlights of her report as provided in the agenda packet. For the COVID-19 Vaccine Update she added that due to the pause on the Johnson & Johnson (J&J) vaccine they have had to pivot to using Moderna at Midlakes and Zion, and Moderna and Pfizer at Grand Avenue. If we had full COVID-19 vaccination schedules at those 3 sites, we would be able to vaccinate approximately 200 individuals per day. One of the struggles, specifically at our Zion location, is getting patients to sign up for a vaccination appointment so we are doing outreach phone calls to our patients to assist them, with their consent, with registering in AllVax and scheduling a vaccination appointment. Vice Chair Brown stated that he received one of those outreach calls, scheduled an appointment, and received his first dose of the Pfizer vaccine last Friday. Member Bejster asked if pivoting to a different type and supply of vaccine is still allowing for available appointment slots to be filled. Kim stated that is correct as another 400 doses of Moderna for the FQHC is arriving tomorrow which will cover us until we receive our next direct shipment next week. We are also in the process of enrolling with HRSA to receive direct shipment from the feds in addition to direct shipment from the State. And we have the ability to select which vaccine, so we will be selecting Moderna and Pfizer until J&J becomes available again. Mark added that Lake County has been very limited in the amount of J&J it has received which has been a blessing in that fewer appointments in Lake County needed to be cancelled, but also a curse in that we now have one less vaccine type we can administer in our efforts to get ahead of the curve.*

## **11. Director of Finance Report**

### **11.1**

Director of Finance Report - Riley

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

*Pam Riley reviewed the highlights of her report as provided in the agenda packet. She pointed out that total revenues are at 92%, which she doesn't recall ever seeing that high, due to the efforts of staff in reducing no shows and providing telehealth. Expenses are lagging in personnel due to vacant positions and in commodities. Year-end is a little behind as the auditors have not started looking at any of the Health Department information yet. That means the Medicare cost report typically due at the end of April is going to need an extension as some of the auditor reports are needed for it.*

## **12. Added to Agenda**



*None*

**13. Old Business**

*Mark stated that he appreciates Member Bejster's positive comments about the team. A couple of years ago becoming "one agency" was discussed and these past 16 months with the COVID-19 response and the COVID-19 mass vaccination response has been a one team effort across the agency. Many staff from many different areas and programs have been wearing many different hats and everyone is working together to ensure our success. It's been challenging but we are definitely moving forward.*

**14. New Business**

*None*

**15. Executive Session**

*None*

**16. Adjournment**

**A motion was made by Member Fornero, seconded by Vice Chair Brown, that this meeting be adjourned. Chair Smith-Taylor adjourned the meeting at 6:26 p.m.**