



MINUTES

**SOUTHERN NEVADA COMMUNITY HEALTH CENTER
QUALITY, CREDENTIALING & RISK MANAGEMENT COMMITTEE MEETING
July 27, 2022 – 2:00 p.m.
Meeting was conducted via Webex Event**

- MEMBERS PRESENT:** Scott Garrett – Chair, Consumer Member (*Call-In User 3*)
Jose L. Melendrez, Consumer Member (via Webex)
Timothy Burch, Community Member, Clark County (*Call-in User 4*)
- ABSENT:** Aquilla Todd – Consumer Member
- ALSO PRESENT:** None
(In Audience)
- LEGAL COUNSEL:** Heather Anderson-Fintak, General Counsel
- EXECUTIVE DIRECTOR:** Fermin Leguen, MD, MPH, District Health Officer (*absent*)
- STAFF:** Tawana Bellamy, Andria Cordovez Mulet, Cortland Lohff, Randy Smith, Edward Wynder, Cassius Lockett, Cassondra Major

I. CALL TO ORDER and ROLL CALL

The Chair called the Southern Nevada Community Health Center Quality, Credentialing & Risk Management Committee Meeting to order at 2:16 p.m. Tawana Bellamy, Administrative Secretary, administered the roll call. A quorum was not established. The Chair proceeded with the meeting.

II. PLEDGE OF ALLEGIANCE

- III. FIRST PUBLIC COMMENT:** A period devoted to comments by the general public about those items appearing on the agenda. Comments will be limited to five (5) minutes per speaker. Please clearly state your name and address and spell your last name for the record. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chair or the Board by majority vote.

Seeing no one, the Chair closed the First Public Comment portion.

IV. ADOPTION OF THE JULY 27, 2022 MEETING AGENDA (*for possible action*)

Since quorum had not been established, Chair Garrett move to the informational presentations.

V. REPORT / DISCUSSION / ACTION

- 1. Approve Quality, Credentialing & Risk Management Committee Meeting Minutes – January 26, 2022;** direct staff accordingly or take other action as deemed necessary (*for possible action*)

No quorum to take action.

- 2. Discuss and Accept Fourth Quarter FY22 Quality and Risk Management Activities Report and Approve Recommendation to the Southern Nevada Community Health Center Governing Board on July 28, 2022;** direct staff accordingly or take other action as deemed necessary (*for possible action*)

Cassandra Major, FQHC Quality Management Coordinator, presented the Quality and Risk Management Activities Report to the Committee.

Ms. Major reviewed the goal and objectives of the Quality and Risk Management Plan, which were presented to and approved by the Governing Board. Ms. Major reminded the committee of the clinical performance measures being tracked as a requirement from HRSA.

Ms. Major presented a table of the performance measures which includes the Clinical Quality Measures, 2021 Nevada Overall Percentage, 2021 Percentage reported to HRSA, and 2022 goals from January through June. Ms. Major advised improvements are being made in 2022 as workflows and processes are being looked at in the clinic to ensure quality metrics are met for the year.

Randy Smith, FQHC Operations Officer, explained that he and Ms. Major are looking at how they can unpack the measures to provide more context to the committee and Governing Board as to what each clinical quality measure encompass. Ms. Major outlined there were significant improvements from 2021 to June 2022 in Cervical Cancer Screening, Tobacco Cessation, HIV Screening and HIV Linkage to Care.

Ms. Major informed the committee of the quality improvement activities and noted the Quality Management Meeting were re-established to address the quality measures and other quality improvement processes throughout the FQHC. Ms. Major explained Azara is a new software program with analytic tools that will be implemented with the EHR to help capture data and improve the numbers reported to HRSA.

Ms. Major outlined that the Health Center received 577 patient satisfaction surveys for the second quarter, with the survey being available in both English and Spanish.

Ms. Major advised that, in Quarter two of 2022, there were no significant adverse events. There were five medical events, none transported and two medical events for dosing errors, for which action plans were implemented and have since been completed.

Ms. Major briefed the committee on panic buttons the behavioral health providers will have in their office, which will give them the ability to contact security if they feel the environment is unsafe. Further, when staff move to the Fremont location, they will have panic button badges that will be used to alert security to respond to their area.

Chair Garrett thanked Ms. Major for the report.

No quorum to take action.

3. Discuss and Accept Fourth Quarter FY22 CHC Management Care Credentialing Process Report and Approve Recommendation to the Southern Nevada Community Health Center Governing Board on July 28, 2022; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Mr. Smith presented the Fourth Quarter FY22 CHC Managed Care Provider Credentialing report to the committee.

Mr. Smith outlined the Revenue Cycle Workflows and noted within the electronic health environment, there are means to setup the system to more accurately capture services being provided, including: which practitioners are providing the service and at what location the service is being rendered. Mr. Smith explained it is important because health centers do not typically have the same reimbursement level at each of their sites and you want to make sure the services are setup properly within the Electronic Health Record (EHR), so the reimbursement is maximized and there are no errors.

No quorum to take action.

4. Discuss HRSA Findings - Credentialing and Privileging; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Mr. Smith presented the HRSA Findings – Credentialing and Privileging report.

Mr. Smith explained that HRSA provided a written report of five areas of non-compliance. HRSA provided an opportunity for us to resolve the findings within a 14-calendar day period and if resolved they do not show up as an area of non-compliance. Mr. Smith commented that one area is around Provider Credentialing and Privileging.

Mr. Smith provided an overview of the Provider Credentialing and Privileging Plan that was submitted to HRSA. Mr. Smith highlighted the following gaps:

- Credentialing – primary source verification for education and licenses was missing in some of the sample files that were reviewed
- Privileging – need documentation to confirm providers are competent in a particular area and job descriptions for other clinical staff need to be verified by a supervisor.

Mr. Smith commented that HRSA has not provided a final determination as to whether the plan submitted will meet the requirement of clearing the condition. Further, this committee should expect to see and review credentialing files to recommend to the board for approval.

No action required.

5. Review and Discuss Annual HIPAA Risk Assessment; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Ms. Major presented the HIPAA Risk Assessment and noted there were no potential threats identified during the quarterly HIPAA Assessment on July 11, 2022 with the Health District's Compliance officer.

No action required.

*Member Burch joined the meeting at 2:43 p.m.
Quorum is confirmed.*

Heather Anderson-Fintak, General Counsel, noted that with Member Burch joining the meeting, we do have quorum and action can be taken on the adoption of the agenda and various line items.

Chair Garrett asked Member Melendrez if staff needed to go over the information again with Member Burch prior to voting on the previous line items. Member Melendrez commented that the committee does not need to go back and can move forward with voting. Chair Garrett read each item needing action into the record.

(Heard out of order)

IV. ADOPTION OF THE JULY 27, 2022 MEETING AGENDA *(for possible action)*

A motion was made by Chair Garrett, seconded by Member Melendrez, and carried unanimously to approve the July 27, 2022 Agenda, as presented.

V. REPORT / DISCUSSION / ACTION

- 1. Approve Quality, Credentialing & Risk Management Committee Meeting Minutes – January 26, 2022;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

A motion was made by Chair Garrett, seconded by Member Melendrez, and carried unanimously to approve the January 26, 2022 Quality, Credentialing & Risk Management Committee Minutes, as presented.

- 2. Discuss and Accept Fourth Quarter FY22 Quality and Risk Management Activities Report and Approve Recommendation to the Southern Nevada Community Health Center Governing Board on July 28, 2022;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

A motion was made by Chair Garrett, seconded by Member Burch, and carried unanimously to approve Fourth Quarter FY22 Quality and Risk Management Activities Report and Approve Recommendation to the Southern Nevada Community Health Center Governing Board on July 28, 2022, as presented.

- 3. Discuss and Accept Fourth Quarter FY22 CHC Management Care Credentialing Process Report and Approve Recommendation to the Southern Nevada Community Health Center Governing Board on July 28, 2022;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

A motion was made by Chair Garrett seconded by Member Burch and carried unanimously to approve the Fourth Quarter FY22 CHC Management Care Credentialing Process Report and Approve Recommendation to the Southern Nevada Community Health Center Governing Board on July 28, 2022, as presented.

Chair Garrett asked about the security provided on site and how often are staff trained in areas such as active shooter. Ms. Anderson-Fintak commented that staff are trained on active shooter response on a yearly basis. The Health District recently engaged in a physical security assessment of the entire Decatur location. Ms. Anderson-Fintak noted it is in its first stage of process and we hope to have the consultant on site in August. The intent of the assessment is to have the recommendations implemented at the Decatur and Fremont location to ensure staff and patients' safety.

- VI. SECOND PUBLIC COMMENT:** A period devoted to comments by the general public, if any, and discussion of those comments, about matters relevant to the Board's jurisdiction will be held. Comments will be limited to five (5) minutes per speaker. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chair or the Board by majority vote.

Seeing no one, the Chair closed the Second Public Comment portion.

XIII. ADJOURNMENT

The Chair adjourned the meeting at 2:48 p.m.

Fermin Leguen, MD, MPH
District Health Officer/Executive Secretary/CHC Executive Director

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