

EXECUTIVE COMMITTEE CONFIDENTIAL MINUTES ZOOM MEETING



"Community Health Service .

..
caring for our families
into the 21st century"

Community Health Services, Inc.
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DATE: March 30, 2023

PRESENT: Randy P. McKenney, Carlos Rosario, Judith Burchell, and Raicheen Blanks

STAFF: Greg Stanton and Susan Hirotz

ABSENT:

TOPIC	DISCUSSION	ACTION
A. CALL TO ORDER Randy McKenney	•	• Mr. McKenney called the Executive Committee meeting to order at 6:02 p.m.
B. Consent Agenda Items 1) Approval of February 23, 2023, Minutes 2) Chief Executive Officer's Report	<ul style="list-style-type: none"> • Minutes – February 23, 2022 • CEO Report – March 23, 2023 	<ul style="list-style-type: none"> • MOTION by Ms. Blanks seconded by Mr. Rosario and approved by unanimous vote of the Executive Committee to accept the Consent Agenda.
C. COMMITTEE REPORTS		
1) Finance Committee (Ms. Blanks) a) February 2023 Financial Statements	<ul style="list-style-type: none"> • Mr. Stanton presented the highlights of the February 2023 financial statements: <ul style="list-style-type: none"> – Cash on hand = \$6,806,891 in cash, which is an increase of \$40k from January. The increase in cash is part of normal variation month to month with no significant variances in typical monthly receipts and disbursements. – Cash on hands days – 120 days as of February, 2023; 1 day more than the prior month. – Net Patient Fee Revenue totaled \$921,520 which is (1%) lower than budget and 8% higher than the same month last year. Patient visits are (10%) lower than budget for the month and 2% higher compared to the same month last year. – The average net patient fee per visit was \$128.93; \$12.97 higher than January. 2023 is beginning with a 2% higher total of self-pay 	<ul style="list-style-type: none"> • MOTION by Ms. Blanks seconded by Ms. Burchell and approved by unanimous vote of the Executive Committee to accept the February 2023 Financial Statements.

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	<p>patients with a corresponding decrease in commercial payers.</p> <ul style="list-style-type: none"> - Total Operating Revenue for the month of February = \$1,675,918 and is lower than budget by (2%) as well as 4% higher compared to the same month in the prior year. Patient revenue was (\$9k) lower than budget for the month, grant revenue was on budget for the month and pharmacy revenue was behind budget by (\$27k). - Total Operating Expense for the month of February was \$1,602,561 which was over budget by \$63k. - CHS generated an operating surplus for the month of February of \$73k compared to a projected surplus of \$171,533. YTD CHS is running a deficit of (\$28,794) versus a budgeted surplus of \$208,698. 	<ul style="list-style-type: none"> • Included in the motion above.
<p>2) Quality, Safety & Risk Management Committee (Carlos Rosario) a) Acting CMO Credentiaing Report</p>	<ul style="list-style-type: none"> • Ms. Hirth reported the following on behalf of Dr. Orett Brown: <ul style="list-style-type: none"> - Credentiaing <ul style="list-style-type: none"> ➢ Jason Ptak-PA, Adult Medicine ➢ Christina Fantoni-Midwife, Women's Health 	<ul style="list-style-type: none"> • Informational.
<p>b) Workplace Violence Prevention Program Policy</p>	<ul style="list-style-type: none"> • Ms. Hirth reviewed the Workplace Violence Prevention Program Policy. 	<ul style="list-style-type: none"> • MOTION by Mr. Rosario seconded by Ms. Blanks and approved by unanimous vote of the Executive Committee to accept the Workplace Violence Prevention Program Policy.
<p>c) Patients Complaints and Grievances Policy</p>	<ul style="list-style-type: none"> • Ms. Hirth reviewed the Patients Complaints and Grievances Policy. 	<ul style="list-style-type: none"> • MOTION by Ms. Blanks seconded by Mr. Rosario and approved by unanimous vote of the Executive Committee to accept the Patients Complaints and Grievances Policy.
<p>d) 2023 Quality Safety, Risk Management Plan</p>	<ul style="list-style-type: none"> • Ms. Hirth gave a review of the 2023 Quality Safety, Risk Management Plan. 	<ul style="list-style-type: none"> • MOTION by Ms. Blanks seconded by Mr. Rosario and approved by unanimous vote of the Executive Committee to accept the 2023 Quality Safety, Risk Management Plan.
<p>e) QAPIC Minutes</p>	<ul style="list-style-type: none"> • February 17, 2023 	<ul style="list-style-type: none"> • Informational.

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3) Executive Committee (Randy McKenney)	<ul style="list-style-type: none"> Did not meet. 	<ul style="list-style-type: none"> Informational.
4) Standing Committees a) Fund Development (Randy McKenney)	<ul style="list-style-type: none"> Did not meet. 	<ul style="list-style-type: none"> Informational.
b) Governance Committee (Judith Burchell)	<ul style="list-style-type: none"> Did not meet. 	<ul style="list-style-type: none"> Informational.
c) Strategic Planning (Randy McKenney)	<ul style="list-style-type: none"> Did not meet. 	<ul style="list-style-type: none"> Informational.
d) Advocacy (Robert Michalik)	<ul style="list-style-type: none"> Did not meet. 	<ul style="list-style-type: none"> Informational.
e) Compliance (Executive Committee)	<ul style="list-style-type: none"> Did not meet. 	<ul style="list-style-type: none"> Informational.
D. Chair's Report	<ul style="list-style-type: none"> Mr. Stanton suggested the Executive Committee adopt a 3-4 week period to conduct the annual Board Self-Assessment using Dr. Paula Woods legacy tool through Survey Monkey. The proposed launch date is March 31, 2022 with a completion date of April 21, 2022 so the results can be covered at the next board meeting. 	<ul style="list-style-type: none"> Informational.
1) Determine dates for completing the Annual Board Self-Assessment	<ul style="list-style-type: none"> Mr. Stanton stated the in light of the previous conversation held last week, he won't repeat the information shared at that time. He suggested this be on the agenda for the next board meeting. 	<ul style="list-style-type: none"> Mr. Stanton will forward the information to the Executive Committee.
2) 30 Minute Training: Adverse Childhood Experiences	<ul style="list-style-type: none"> Mr. Stanton presented highlights of the Q4 2022 Peer Review by department. Each of the Clinical Directors stated that departmental peer review requirements are being met. Any deficiencies are/have been addressed. 	<ul style="list-style-type: none"> MOTION by Mr. Rosario seconded by Ms. Blanks and approved by unanimous vote of the Executive Committee to accept the Q4 2022 Peer Review Report.
E. Other	<ul style="list-style-type: none"> Thursdays April 27, 2023 	<ul style="list-style-type: none"> Informational.
F. DATE/TIME OF NEXT MEETING		<ul style="list-style-type: none"> MOTION by Mr. Rosario seconded by Ms. Blanks and approved by unanimous vote of the Executive Committee to adjourn the meeting at 6:38 p.m.
G. ADJOURNMENT		



Secretary, Board of Directors

6/07/23

Date