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| Board Members |  | Board Members |  | Staff |  |
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| Ric Bonner, Chairperson | **x** | Clay Eubank | **Excused** | Chloë Guazzone, ED | **x** |
| Kathy Cox, Vice-Chairperson | **x** | Lucy Plancarte | **x** | Cynthia Novella FNP, Medical Director | **x** |
| Eric Labowitz, Treasurer | **Excused** | Yuridia Cruz-Arreola | **x** | Fabiola Cornejo, Operations Director | **x** |
| Heidi Knott, Secretary | **x** | Mike Zaugg | **x** | Donna Sherwood | **x** |
| Autumn Ehnow | **LOA** | Ron Gester | **x** | Marcelle Scramaglia | **x** |
| Aliya Anguiano Rubio | **x** | Susan Smith | **x** |  |  |

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| Call to Order & Quorum / Agenda / Minutes Approval | Action |
| The Vice Chairperson called the meeting to order at5:08 pm. Meeting was held in person at the clinic and via GoTo meeting. | Meeting called to order; quorum established.The draft of March 6, 2025, meeting agenda was amended (Ric Bonner will lead the finance committee discussion) then approved.Motion: Gester, Second: Smith, All other ayes. |
| Elect Student Board Representative | Upon the recommendation of the Board Development and Governance committee, **elect Aliyia Anguiano Rubio as the Student Board representative** The election of Aliya to board was approved. Motion: Cox, Second: Knott, All ayes |
| Conflict of Interest | The Board and Staff were polled and were not aware of any potential or actual conflicts of interest at this time. |
| The draft February 6, 2025, Board minutes were reviewed and approved as presented. | The draft of **February 6, 2025, minutes were****approved:** Motion: Gester, Second: Smith. All other ayes. |
| **Board Compliance Training** | Second 2025 quarterly May, training by the Write Choice Network (WCN)  |

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| Staff and Committee Reports | Reports/Discussion | Action |
| **Performance Improvement Committee** | * Review and discussion of latest Uniform Data System (UDS) clinical measures and Clinical Dashboards (Oct, Nov, Dec. 4th Quarter)

 Marcelle Scramaglia, Quality Improvement Manager Marcelle explained the fourth quarter clinical measures. Sharing dashboards for each measure from the data collected. She explained the non-clinical measures verses the clinical measures. She shared the quality incentives for 2024. Regarding UDS patients, if we only see a patient once that is from out of our state, the visit still counts but we never see the patient again, which means that other testing and counseling can not be done for that patient.Partnership, even if every vaccine needed as been administered but the patient does not get the flu shot, the patient is not counted as fully vaccinated in our numbers.Discussion from the board members regarding the reports. Marcelle and Cindy were able to give clinical information to the questions asked.* Incidents:

Two Employee Injuries:**1st injury**: Dental department. The assistant tripped on the floor that is peeling up, fell, but was able to catch herself. Admin team was already working on the floor issue. **2nd injury**: Dental department. Sterilization technician nicked her finger on a dirty instrument that had just come out of the phase 1 cleaner. Patient agreed to go to Concentra in Santa Rosa for further follow up. |  |
| **Executive Team / Staff Report Summary** | **Medical Director-Cindy Novella**PHMI – Population Health Management InitiativeFor complete detail, please refer to the Staff report.**Operations Director- Fabiola Cornejo:**Interviewing for NursesWomen Infant and Children (WIC) Is a state program.Educating vineyard management on ICE and Areapid Response TeamFor complete detail, please refer to the Staff report.**Executive Director-Chloe Guazzone**SOGI - Sexual Orientation and Gender IdentityFor complete detail, please refer to the Staff report.  | Executive Team / Staff Report Summary |
| **Finance Committee.** | * Upon the recommendation of the Finance Committee, review and approve the financial reports January 2025 please review board attachments for details.

January 2025 – profit from operations of $38,610 for the month of January 2025, Year to date results, gain of $46,407. * Review Sliding Scale Evaluation Data- Survey

The survey and results are included in the Board documents for this meeting. | The **January 2025 financial reports were approved**. Motion: Bonner, Second: Knott, All ayes.  |
| **Outreach and Marketing** | * Kathy is working with the Senior questionnaires, have received back English responses, need to receive more of the Spanish responses. Heidi is working on a resource list for Seniors.
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| **Audit Committee** | * Upon the recommendation of the Audit Committee, **review and approve** the Financial and Compliance Audit report for the year ending June 30, 2024,from Jeremy Ware, the auditor.
* **Review and approve** the submittal of IRS Form 990 for the fiscal year ending June 30, 2024. **Will be sent out separately when available**.
 | **The financial and compliance audit was reviewed and approved.** Motion: Cox, Second: Bonner, All ayes. |
| **New Business** | * **Review, discuss and approve** the 2024 Annual Risk management report. Document to be signed by Ric and Heidi.
 | **The 2024 annual Risk Management report was reviewed and approved**. Motion: Cox, Second: Knott, All ayes |
| **Board Development and Governance** | * No activity
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| **Executive Committee** | * No activity
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| **Public Comments** | * None present
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| **Items of Interest /Concern to Board Members** | * Ric is gathering information from a group that is making efforts to help health centers, regarding the cuts to Medicaid. He will continue to gather more information and take to the finance committee.
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| **Adjournment** | * A motion to adjourn was approved at 6:46 p.m.
 | Meeting AdjournedMotion: Gester,Second: Knott, All other ayes |

Date Minutes Accepted:

Committee Chairman: \_\_\_\_\_\_\_\_\_

Minutes: Sherwood The next AVHC Board meeting will be on Thursday, April 3, 2025, at 5:00 p.m. via in person or open meeting.