southeast healthcare

Board of Directors Meeting
August 16, 2021 5:00 p.m.

GoToMeeting & In person (3rd Fl. Board Room)

AGENDA

	Action Needed	Attachment
Roll Call		
CALL TO ORDER		
APPROVAL OF MINUTES	✓	✓
PRESIDENT'S REPORT		
Board member self assessment survey results		✓
DIRECTOR'S REPORT		
Board Meetings date / time change / committee meetings day & time change		
PROGRAM / QI COMMITTEE		
HRSA patient satisfaction survey	✓	✓
Client Rights Report	✓	*
340B update (with Finance)		*
FINANCE		
Financials / Investments	✓	*
340B update (with Program/QI)		*
NOMINATING COMMITTEE		
Bylaw Section 6. Resignation and Disqualification	✓	
Bylaw Section 2. Number and Qualifications		

-over-

HUMAN RESOURCES COMMITTEE

Re-Privileging
Kim Cooksey, Clinical Director

New Privileging
William Bumgardner, Therapist
Michael Howell, Therapist
Katherine Rushman, Therapist/Coordinator
Judith Aracich, Clinical Director
Nancy Reed, Therapist
Maurice Smith, Therapist
Brian Votaw, Program Manager
Lori Fullen, Therapist
Becky Rogers, Team Leader
Terrahl Taylor, Team Leader
Kim Eick, Counselor/Senior Case Manager
Charles Pickering, Therapist
Adam Hunter, Rapid Engagement Specialist
Amos Jones, Assistant Clinical Director
Sena Albash, Clinical Assessor
Katherine Goettemoeller, Team Leader
Joyce Kuma, Clinical Assessor

Good Things

EXECUTIVE SESSION

*denotes emailed

Board of Directors Meeting Minutes
July 19, 2021 5:00 p.m.
Virtual via GoToMeeting

Members Present:	**Members Excused:**	**SE Staff:**
Dave Lane, Chair	Don Strasser	Bill Lee, CEO
Tony Burns, VP	Kim Krone	John Bell, CFO
Kori Manus, Treasurer		Kim Cooksey, Clinical Director
Angela Fry, Secretary		Abul Hasan, Medical Director
Kate Hamilton, Member-at-Large	**Members Absent:**	Melissa Miller, HR Director
Jasmine Bibb	Sally Shaffer	Jenny O'Leary, Delaware Morrow Clinical Director
Eileen Goodman		Myken Pullins, Exec Assistant & PR Director
Pat Halaiko		Sandy Stephenson, Chief Healthcare officer
Steve Sielschott		Wendy Williams, Chief Operating Officer
Angela Smith		
		Excused: Melissa Powers, Regional Clinical Director

Call to Order: Dave Lane called the meeting to order.

Approval of Board Minutes – Angela Smith moved to approve the minutes from June. Kori Manus seconded the motion. All in favor.

President's Report – Dave Lane reported on approving the executive committee meeting minutes that include approving the CMS navigator proposal.

Angela Smith ratified the executive committee minutes that approved the CMS navigator proposal Eileen Goodman seconded. All in favor.

Dave Lane reminded members to complete the Board self assessment survey soon.

Dave Lane mentioned we could change the board meeting time to noon on Mondays if everyone had the flexibility. Most board members agreed with no major conflicts

If the Board meeting time changes to noon on Mondays, the Committee Meetings times will need to change to the week before the board meeting to allow enough time to prepare.

Director's Report – **Board Education – SAMHSA CCBHC Executive Summary Review**

Bill reported we were awarded the SAMHSA Certified Community BH Clinic 2 million grant and we have 4 months to meet conditions and many of them we have met and we are awarded that status. There are 11 centers in Ohio now that have met the standards and have been awarded the certification through SAMHSA. For the integration physical, health primary care and mental health and similar to HRSA they want 51% of the board themselves, or a member of their family to have had an experience with mental health and or substance use disorders. Myken will send out a survey poll to current board members anonymously asking this question.

Update Belmont County Oil & Gas – Two years ago we dealt with an energy company for permission to use two parcels of land by our residential facility in Belmont County. At the time we decided not to proceed. Currently we have a mutual attorney and are finding we have no choice in the matter and the property will be drilled. We did ask that no surface level structures be drilled. There is a formula associated with the statute for a payment to us from drilling. Need clarification from the attorney on mineral rights. Send Angela Smith the ORC code.

Franklin County ADAMH Board Reconciliation – Bill reported on a situation with the funding cut without a 120 notice. Now our position with that was it didn't matter if we didn't get a clean claim through we didn't get paid anyway so why cut the allocation. ADAMH requested a meeting about the reconciliation account and they invited three franklin county prosecutors there. We are working with our attorneys for a settlement offer for what they owe us which we say 1.8 million. The new CFO who started last year has resigned and is gone.

Bill Lee reported as we went through the COVID-19 Pandemic last year the Community Shelter Board Founders Award on August 10 Bob Lazarus Unsung Hero Award will be presented to Sandy Stephenson and Southeast Healthcare. More details to follow.

Program / QI Committee

HRSA CIS Approval (to add the following BH service sites as FQHC sites: Merion Village, Mt. Gilead, New Philadelphia, Carrollton, Woodsfield, Martins Ferry)

Proposed Action:
Angela Fry presented the HRSA Change in Scope to Add Service Sites, the Board of Directors of Southeast Healthcare hereby approves the submission of a change in scope to HRSA to add the following to the scope of project as FQHC service sites. The change in scope for these sites will be submitted to HRSA on a priority basis as determined by the CEO.

- 1455 S. Fourth Street, Columbus, OH, 43207
- 301 Walnut Street, Martins Ferry, OH, 43935
- 37990 Airport Road, Woodsfield, OH, 43793
- 950 Meadow Drive, Suite A, Mt. Gilead, OH, 43338

- 783 Jones Avenue, Carrollton, OH, 44615
- 344 W. High Avenue, New Philadelphia, OH, 44663

Kori Manus seconded the motion. All in favor and the motion passed.

QI Plan and Goals – Angela Fry presented as part of Southeast's Quality Improvement/Quality Assurance Program, the Quality Improvement Plan and Goals must be reviewed and approved by the Southeast Board annually. The Plan and Goals have been reviewed and is recommended by the Quality Council. Angela Fry reviewed the recommendations and highlighted points throughout the report.

Recommended Motion: The Southeast Board has reviewed and approves the Southeast Healthcare Quality Improvement Plan and Goals SFY 2022. Pat Halaiko seconded. All in favor.

Radiation Plan – Angela Fry reported there were no changes from last year's plan. As part of Southeast's Quality Improvement/Quality Assurance Program, the Radiation Plan must be reviewed and approved by the Southeast Board annually. The Plan has been reviewed and is recommended by the Quality Council.

Recommended Motion:
The Southeast Board has reviewed and approves the Radiation Plan for SFY 2022. Kori Manus seconded.

PAP completion rate by provider – FYI Angela Fry reported we asked about cervical cancer completion rates broken out by provider status. Does not include providers working in the MAT program.

Finance Committee

Kori Manus reported on the financial report for our fiscal year ending June 30 2021. She noted we recognized the PPP in the financials and noted it will make a significant difference in our financials this month. John Bell gave a summary on how we ended the year off. Kori Manus moved to approve the June 13 fiscal year and current month financials. Eileen Goodman seconded. All in favor.

Scholarship Funding Motion (with HR) - Southeast, Inc. requests approval of an action to add up to twenty five thousand dollars ($25,000) to the Scholarship Fund for the fiscal year ending June 30, 2022. This motion would move the funds from an unrestricted Net Asset account to the Scholarship Fund account as designated funds for the purpose of setting aside funds for employees' college reimbursements via Southeast Scholarships. This will be a joint motion presented to the HR & Finance Committees. Kori Manus moved to approve the action to move the $25,000 from Net to Scholarship fund and Tony Burns seconded. All in favor.

The Line of Credit in the amount of $3,000,000 for the next year and is up for renewal. Finance approved Bill Lee CEO to sign off on the renewal of the 3 million. Kori Manus moved to approve but asked that the motion look at comparative rates to get the rates lowered. John did look at that and the motion stands as is. Kate Hamilton seconded the motion. All in favor.

Human Resources (HR)

Time Sheet Policy - Tony Burns presented the time sheets and pay periods to maintain an accurate record of staff time for payroll administration. The employee submits a payroll time sheet whish accurately indicates time worked. Employees may be required to utilize a time clock or similar electronic device to capture time worked. In such case each punch will be rounded to the nearest 5 minutes. Kate Hamilton seconded the motion and all members in favor.

Tony Burns presented and moved the review of privileging for Christie McMillen – CNP. Pat Halaiko seconded the motion. All in favor.

Bill announced we need to take a look at the salary scales and we cannot continue to loose good employees because of low salaries.

Good Things:

FOH Community Garden Volunteers are robust and dedicated to gardening on E. Main Street at Carpenter where the Friends of the Homeless garden is located. Eagle Scouts and OSU Master Gardners continue to make the garden beautiful with perennials, vegetables, annuals, public artwork and so much more.

Good news that the City of Columbus and others working on public bathrooms for the Downtown Columbus area have approved adding 5 loos and various locations downtown. Former Board Member Eileen Brubeck who is now passed worked endlessly on implementing this program.

Fresh A.I.R. Gallery studio and exhibits in Franklinton @400 W. Rich St.

Fresh AIR Gallery exhibit openings in the community July 9th 6-10
With Fresh A.I.R. Gallery's regular exhibit space closed to patrons during the pandemic, **Coping Mechanisms** will be on display at the 400 W. Rich Street Bridge Gallery in downtown Columbus from July 9 to August 16, 2021. It will open to the public on Friday, July 9, 6 – 10 p.m. This summer, Fresh A.I.R. Gallery (Artists In Recovery) will present Coping Mechanisms, a co-curated, multi-artist exhibition addressing the intersection of racism and mental health.

Fresh A.I.R. Gallery (Artists In Recovery) presents **crossings**, a group exhibition featuring five artists who were slated to exhibit in 2020 but unable to show artwork in person due to the pandemic. While the Fresh A.I.R. Gallery exhibit space remains

closed, crossings will be on display at the Promenade Gallery (located inside the building at 400 W. Rich St. in downtown Columbus) from July 9 to August 6, 2021

After careful consideration we've decided that the Art of Recovery Friday, November 5 will be in person at the Columbus Museum of Art. Stay tuned for more information.

Adjournment – Dave Lane moved to adjourn. Motion – Tony Burns moved to adjourn and Pat Halaiko seconded. All in favor.

Executive Session

CEO Review

Motion to move into executive session: Motion to move out of general session and into executive session- Tony Burns, 2nd Pat Halaiko. All in favor.

Discussed CEO evaluation with CEO, Bill Lee

Motion to move out of executive session into general session, moved Tony Burns, 2nd Kori Manus. All in favor.

Motion to approve HR Evaluation: Moved by Tony Burns, 2nd, Kori Manus. All in favor.

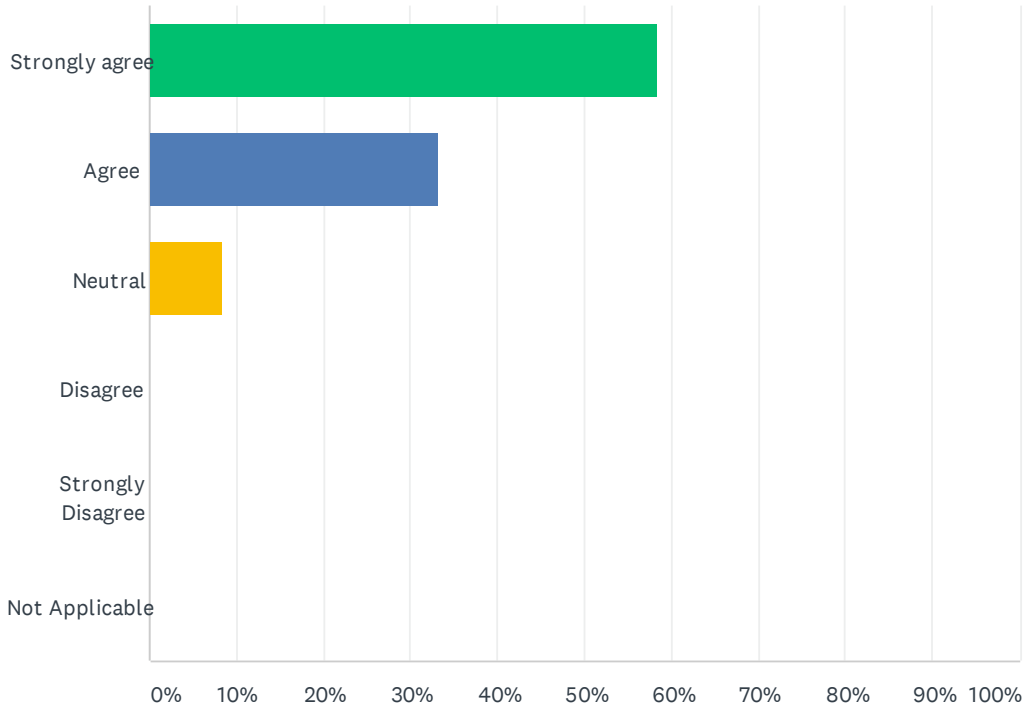
Motion to adjourn Tony Burns, 2nd Kate Hamilton.

Minutes submitted by Myken Pullins, for Angela Fry, secretary

Angela Fry

Q1 The Board of Directors appropriately monitors Southeast's programs and services to assure they support the mission.

Answered: 12 Skipped: 0

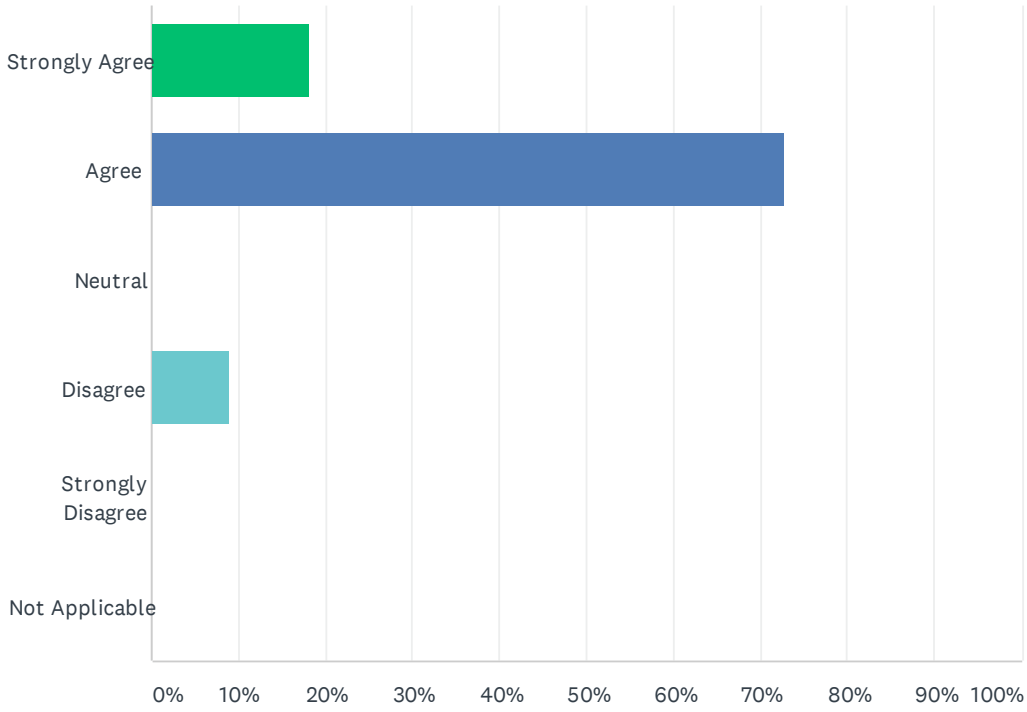


ANSWER CHOICES	RESPONSES	
Strongly agree	58.33%	7
Agree	33.33%	4
Neutral	8.33%	1
Disagree	0.00%	0
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
TOTAL		12

#	COMMENT	DATE
	There are no responses.	

Q2 The Board acts as a liaison between Southeast and the community, promoting our services and mission with enthusiasm.

Answered: 11 Skipped: 1

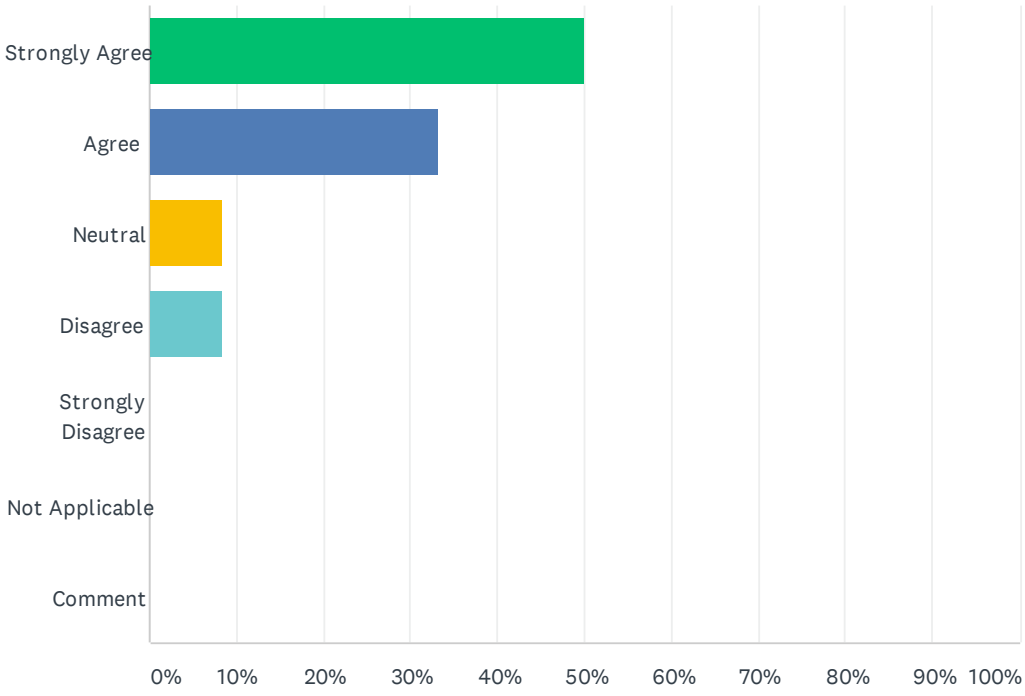


ANSWER CHOICES	RESPONSES	
Strongly Agree	18.18%	2
Agree	72.73%	8
Neutral	0.00%	0
Disagree	9.09%	1
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
TOTAL		11

#	COMMENT	DATE
1	Needs improvement	7/19/2021 8:26 AM

Q3 The Board is provided sufficient opportunities to learn more about Southeast's programs and get to know Program Directors.

Answered: 12 Skipped: 0

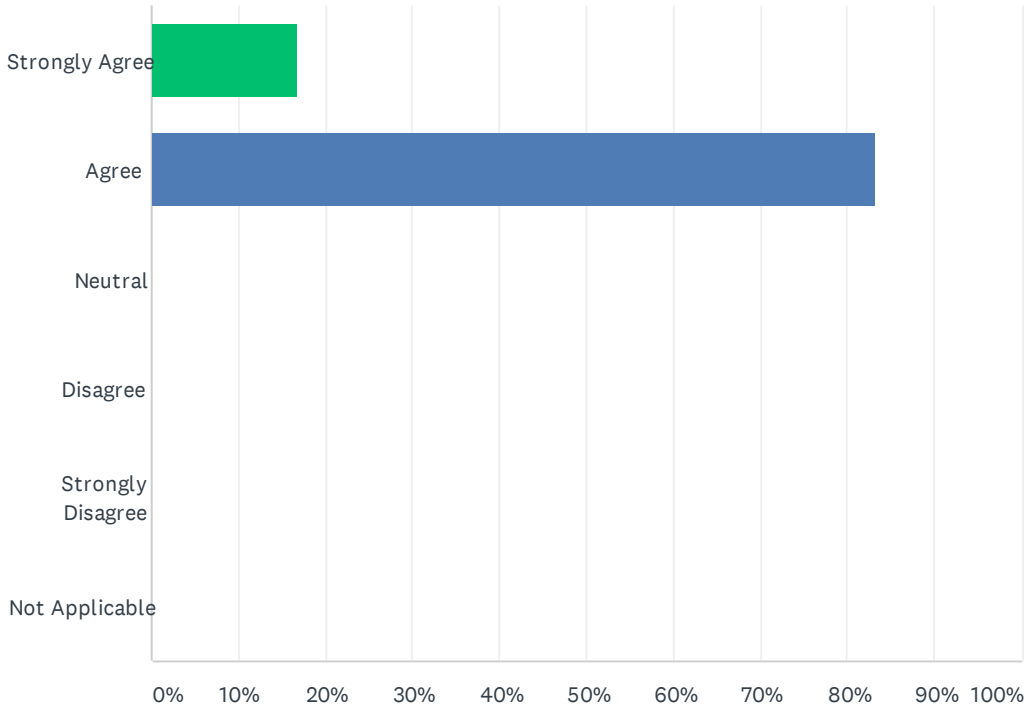


ANSWER CHOICES	RESPONSES	
Strongly Agree	50.00%	6
Agree	33.33%	4
Neutral	8.33%	1
Disagree	8.33%	1
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
Comment	0.00%	0
TOTAL		12

#	COMMENT	DATE
	There are no responses.	

Q4 The Board has consistent and adequate information to ensure they can exercise fiduciary responsibilities.

Answered: 12 Skipped: 0

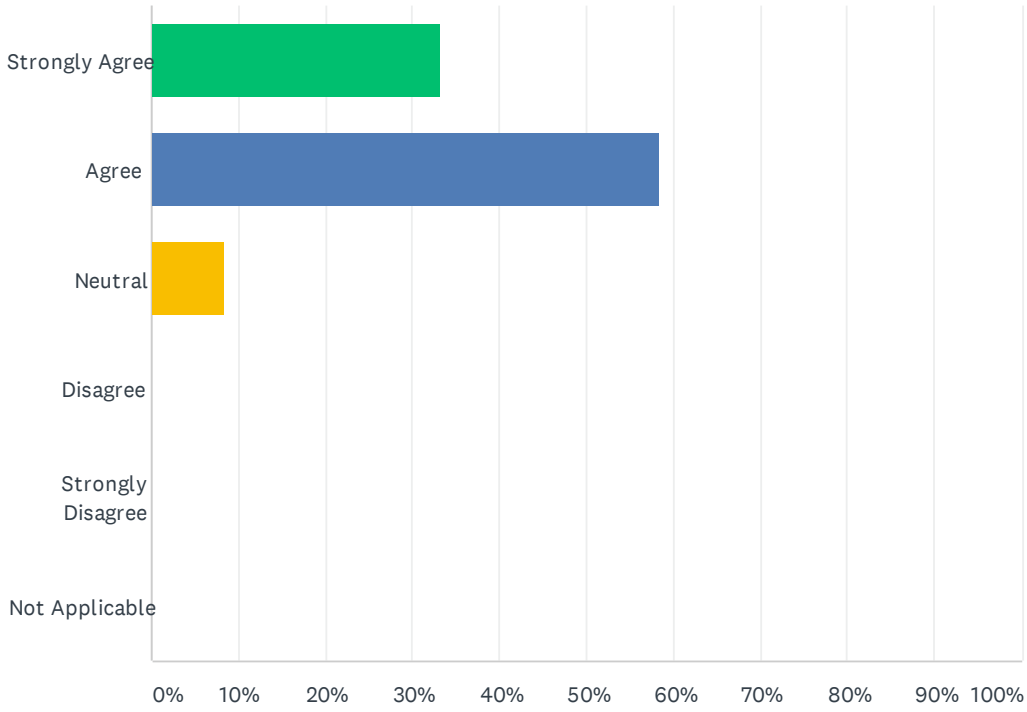


ANSWER CHOICES	RESPONSES	
Strongly Agree	16.67%	2
Agree	83.33%	10
Neutral	0.00%	0
Disagree	0.00%	0
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
TOTAL		12

#	COMMENT	DATE
1	Could always use more information in this area, particularly if there ae problems	7/9/2021 9:56 AM

Q5 The Board has ensured that Southeast has an effective one-year operational or business plan.

Answered: 12 Skipped: 0

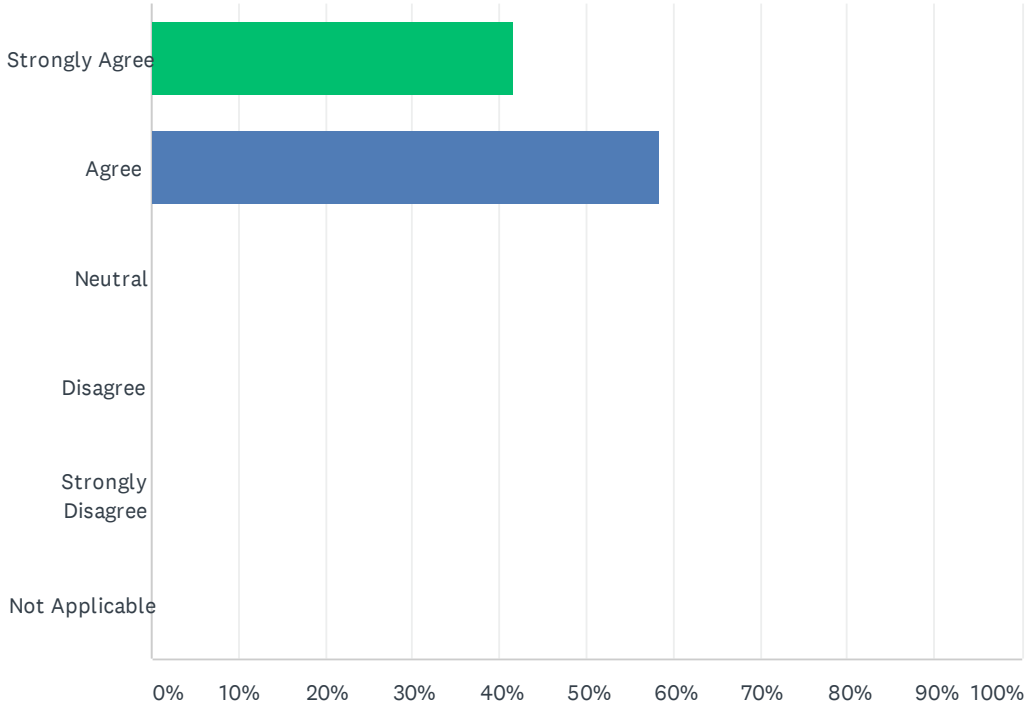


ANSWER CHOICES	RESPONSES	
Strongly Agree	33.33%	4
Agree	58.33%	7
Neutral	8.33%	1
Disagree	0.00%	0
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
TOTAL		12

#	COMMENT	DATE
1	Probably time to review	7/19/2021 8:26 AM

Q6 The Board protects Southeast's assets and ensures that funds are managed properly, including utilizing them to their fullest capacity.

Answered: 12 Skipped: 0

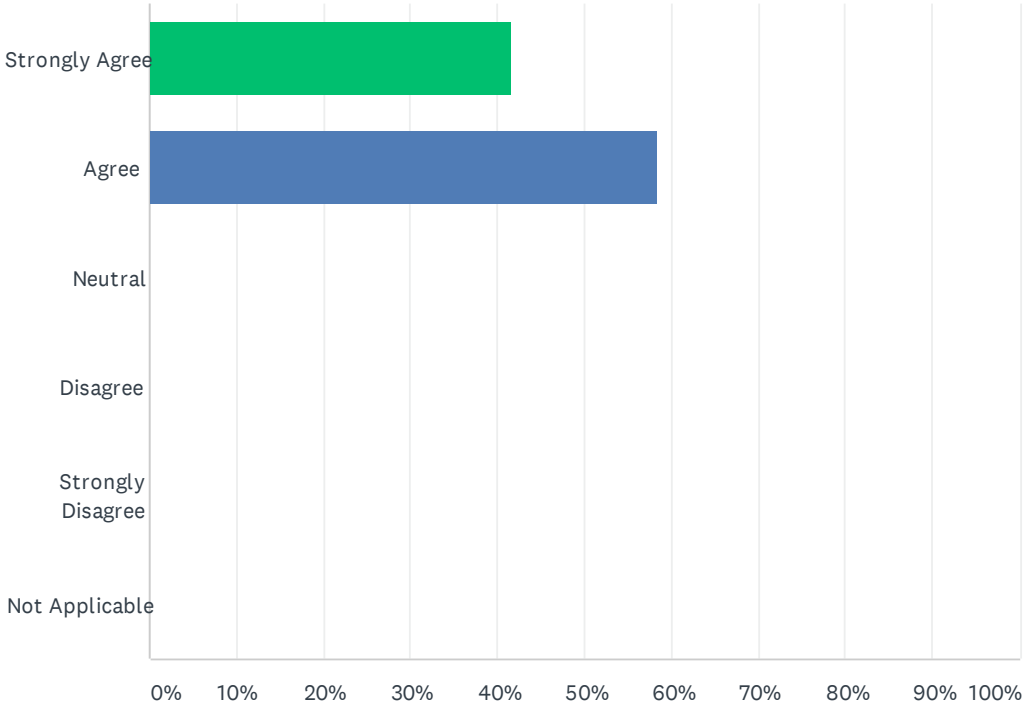


ANSWER CHOICES	RESPONSES	
Strongly Agree	41.67%	5
Agree	58.33%	7
Neutral	0.00%	0
Disagree	0.00%	0
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
TOTAL		12

#	COMMENT	DATE
	There are no responses.	

Q7 There is a clear understanding of where the Board's role ends and the CEO's role begins.

Answered: 12 Skipped: 0

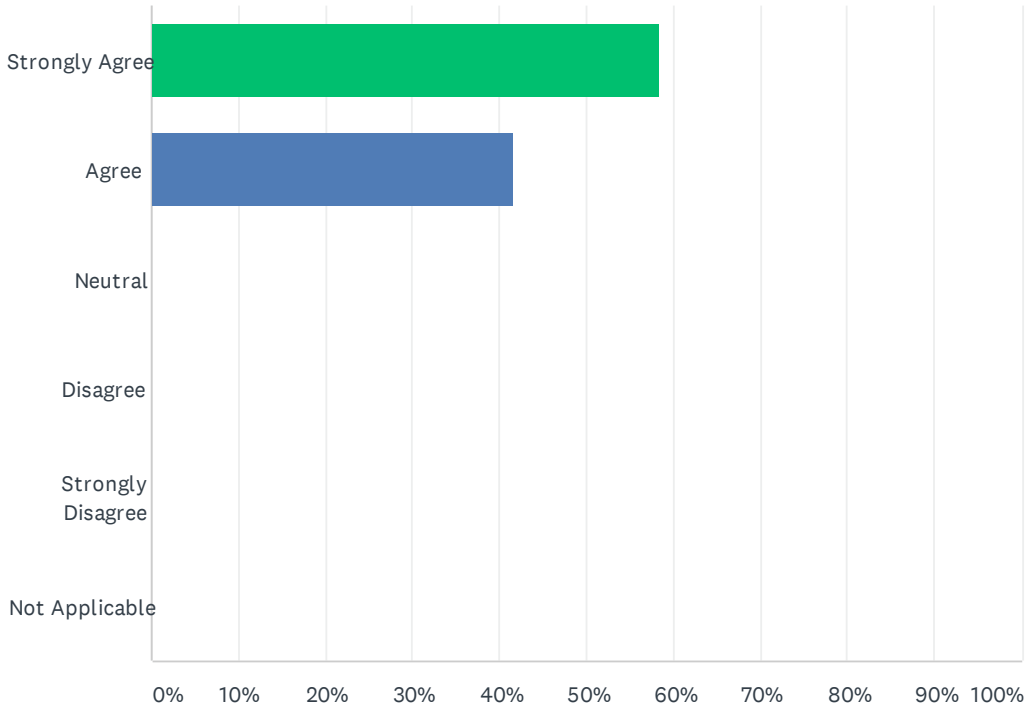


ANSWER CHOICES	RESPONSES	
Strongly Agree	41.67%	5
Agree	58.33%	7
Neutral	0.00%	0
Disagree	0.00%	0
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
TOTAL		12

#	COMMENT	DATE
	There are no responses.	

Q8 There is good two-way communication between the Board and the CEO.

Answered: 12 Skipped: 0

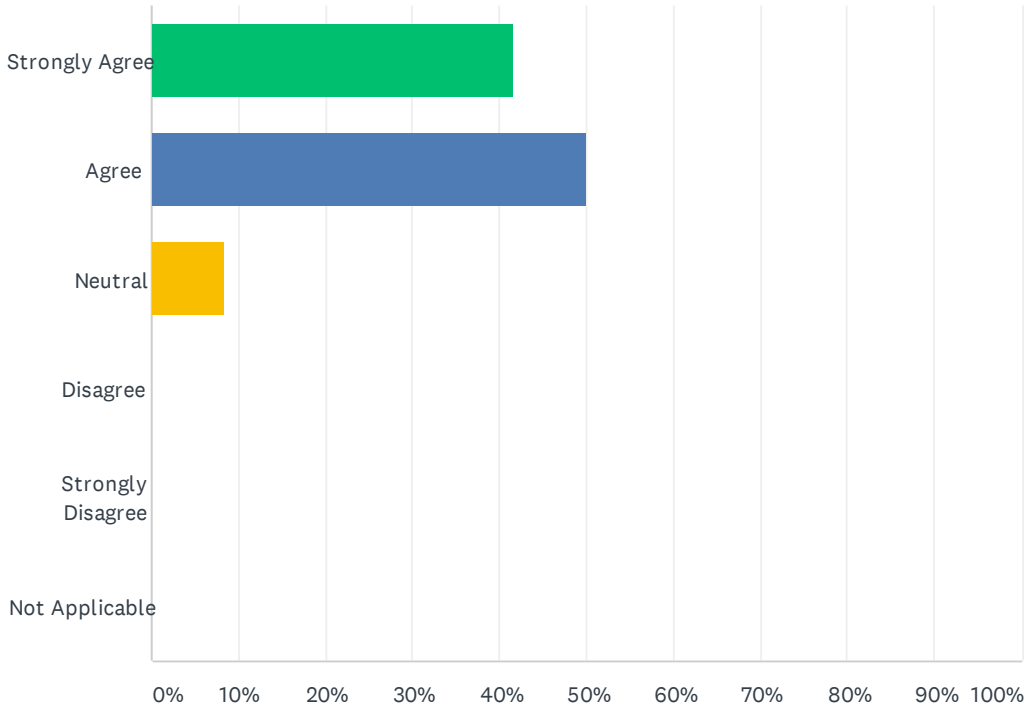


ANSWER CHOICES	RESPONSES	
Strongly Agree	58.33%	7
Agree	41.67%	5
Neutral	0.00%	0
Disagree	0.00%	0
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
TOTAL		12

#	COMMENT	DATE
	There are no responses.	

Q9 Board bylaws represent a clear statement of duties for officers of the Board and spell out procedures by which the Board transacts its business.

Answered: 12 Skipped: 0

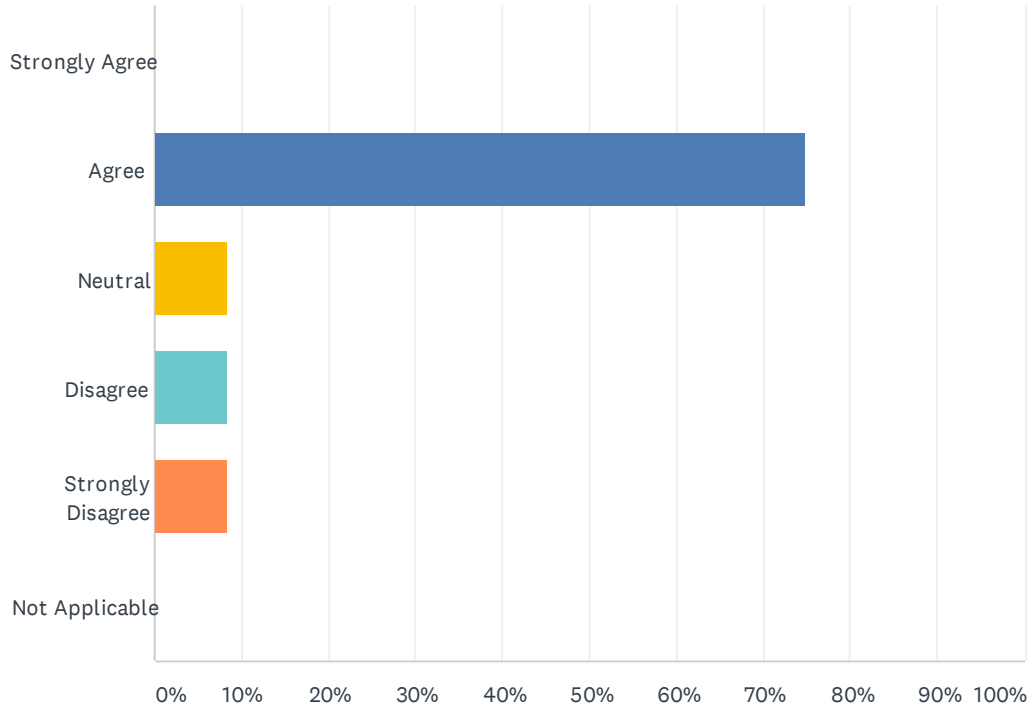


ANSWER CHOICES	RESPONSES	
Strongly Agree	41.67%	5
Agree	50.00%	6
Neutral	8.33%	1
Disagree	0.00%	0
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
TOTAL		12

#	COMMENT	DATE
	There are no responses.	

Q10 There is a satisfactory balance between experienced and new Board members to guarantee both appropriate continuity and fresh new ideas.

Answered: 12 Skipped: 0

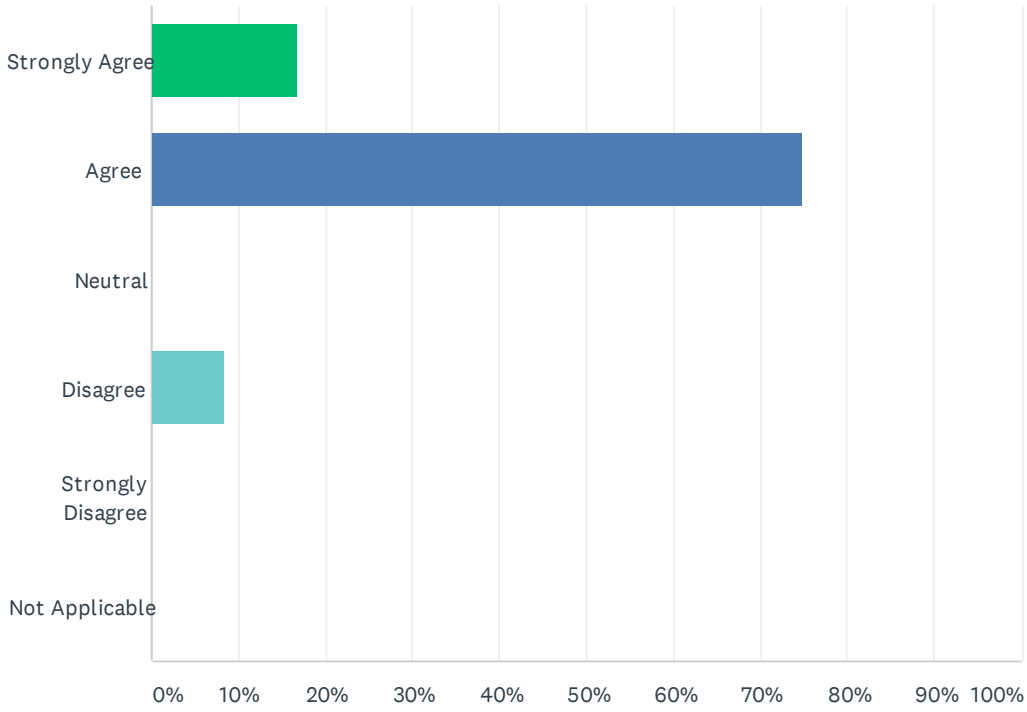


ANSWER CHOICES	RESPONSES	
Strongly Agree	0.00%	0
Agree	75.00%	9
Neutral	8.33%	1
Disagree	8.33%	1
Strongly Disagree	8.33%	1
Not Applicable	0.00%	0
TOTAL		12

#	COMMENT	DATE
1	We should always be recruiting though	7/19/2021 8:26 AM

Q11 The Board receives effective participation from members during board and committee meetings.

Answered: 12 Skipped: 0

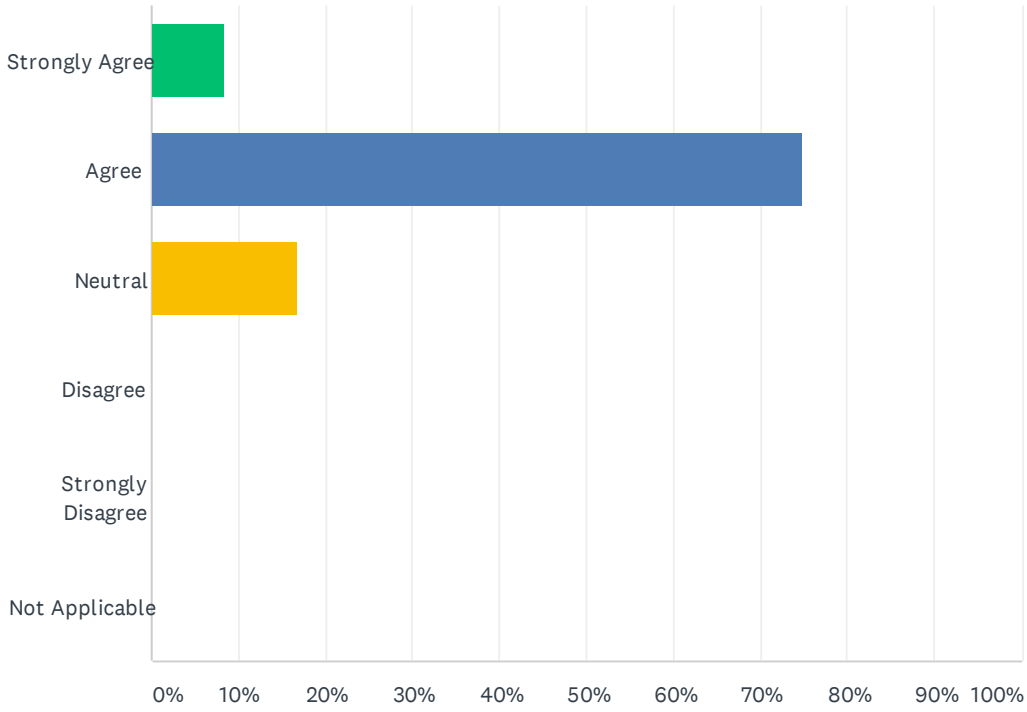


ANSWER CHOICES	RESPONSES	
Strongly Agree	16.67%	2
Agree	75.00%	9
Neutral	0.00%	0
Disagree	8.33%	1
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
TOTAL		12

#	COMMENT	DATE
	There are no responses.	

Q12 The Board / SE has a three to five-year strategic plan or a set of clear long range goals and priorities.

Answered: 12 Skipped: 0

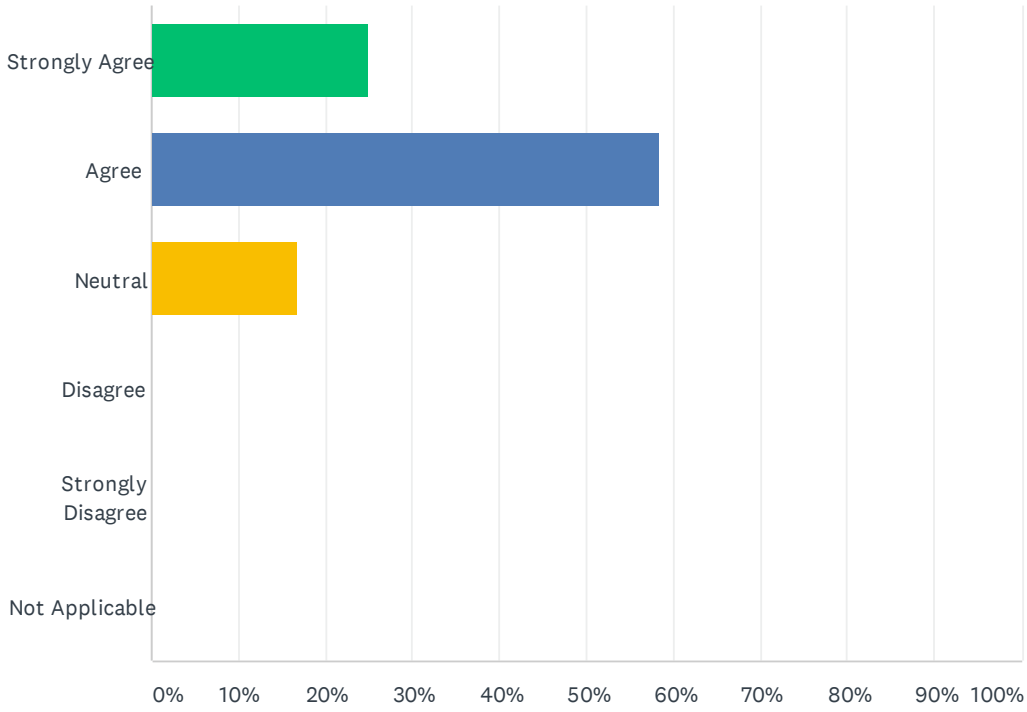


ANSWER CHOICES	RESPONSES	
Strongly Agree	8.33%	1
Agree	75.00%	9
Neutral	16.67%	2
Disagree	0.00%	0
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
TOTAL		12

#	COMMENT	DATE
1	Need reminders	7/9/2021 9:56 AM

Q13 The Board’s meeting agenda clearly reflects our strategic plan and priorities.

Answered: 12 Skipped: 0

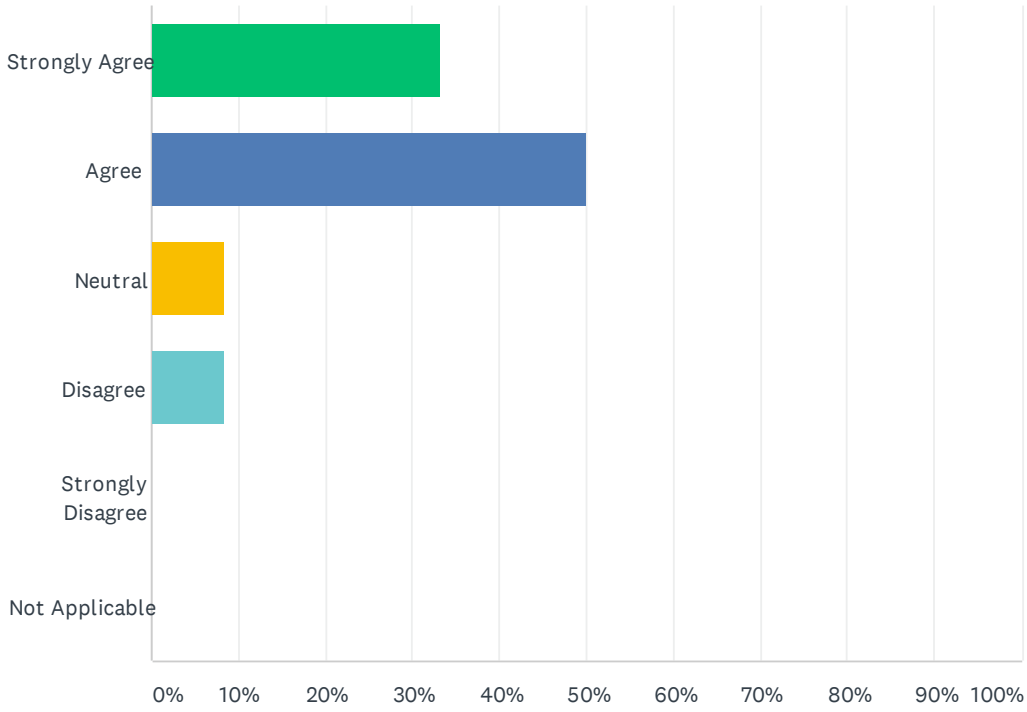


ANSWER CHOICES	RESPONSES	
Strongly Agree	25.00%	3
Agree	58.33%	7
Neutral	16.67%	2
Disagree	0.00%	0
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
TOTAL		12

#	COMMENT	DATE
1	Could use reminder periodically	7/9/2021 9:56 AM

Q14 The Board committee structure is appropriate to support current governance needs of Southeast.

Answered: 12 Skipped: 0

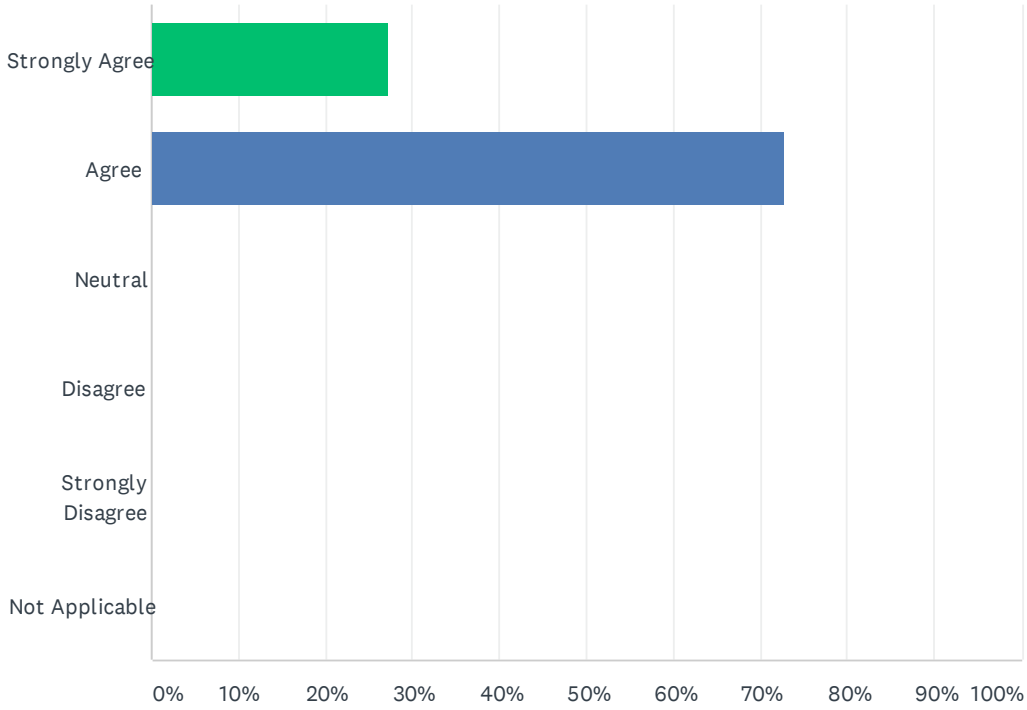


ANSWER CHOICES	RESPONSES	
Strongly Agree	33.33%	4
Agree	50.00%	6
Neutral	8.33%	1
Disagree	8.33%	1
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
TOTAL		12

#	COMMENT	DATE
1	Support Company yes/ but need new members and also ones willing to be patients.	7/12/2021 1:04 PM
2	Finance committee could provide some information in lay termws	7/9/2021 9:56 AM

Q15 The Board uses our time effectively.

Answered: 11 Skipped: 1

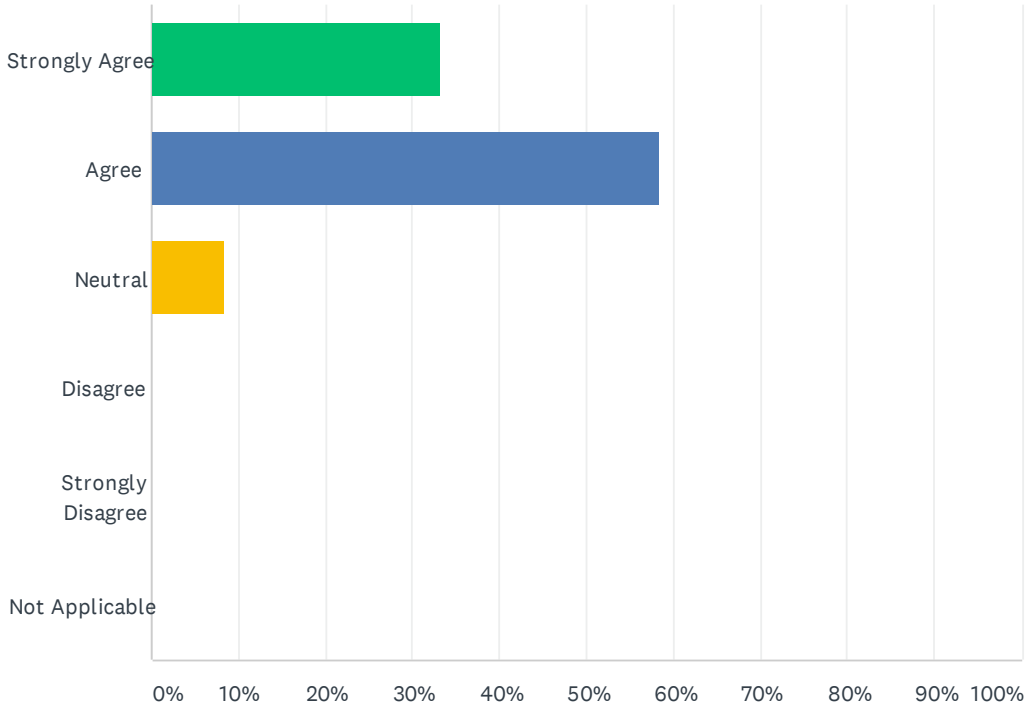


ANSWER CHOICES	RESPONSES	
Strongly Agree	27.27%	3
Agree	72.73%	8
Neutral	0.00%	0
Disagree	0.00%	0
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
TOTAL		11

#	COMMENT	DATE
	There are no responses.	

Q16 I am satisfied with the overall direction of the Southeast.

Answered: 12 Skipped: 0



ANSWER CHOICES	RESPONSES	
Strongly Agree	33.33%	4
Agree	58.33%	7
Neutral	8.33%	1
Disagree	0.00%	0
Strongly Disagree	0.00%	0
Not Applicable	0.00%	0
TOTAL		12

#	COMMENT	DATE
	There are no responses.	

Q17 What were the Board's most important accomplishments during the past year?

Answered: 10 Skipped: 2

#	RESPONSES	DATE
1	n/a	7/19/2021 8:26 AM
2	Navigating effectively for our consumers in the Pandemic	7/14/2021 10:33 AM
3	Navigating COVID for the board as well as Southeast as an organization	7/12/2021 8:13 PM
4	We oversaw a year of unpresented challenges due to the pandemic.	7/12/2021 1:59 PM
5	Surviving COVID, finding new ways to support patients and improving our billing process.	7/12/2021 1:04 PM
6	Southeast's biggest accomplishment was navigating COVID 19 as safely as possible and being a vaccination site. I can only commend the staff leadership and the associates of Southeast.	7/12/2021 12:38 PM
7	Management of Covid virus for patients staff	7/9/2021 9:56 AM
8	though I would consider this more SE than specifically the board I would say keeping the organization running and on solid footing during the pandemic	6/25/2021 10:54 AM
9	managing to survive and thrive during COVID, providing ongoing services, putting clients first	6/23/2021 3:23 PM
10	Attending the board meeting via GTM.	6/22/2021 4:15 PM

Q18 What was planned or expected last year but was not accomplished and why?

Answered: 9 Skipped: 3

#	RESPONSES	DATE
1	n/a	7/19/2021 8:26 AM
2	COVID was a major obstacle	7/12/2021 8:13 PM
3	Our programs continued without interruption, despite the downturn in the economy.	7/12/2021 1:59 PM
4	To some degree our annual fund raiser. SE did a great job of putting together a virtual event, but COVID disrupted the opportunity for a in person event.	7/12/2021 1:04 PM
5	Survival was a huge accomplishment. The only thing worth noting in "not accomplished" was our AR issues not getting resolved..	7/12/2021 12:38 PM
6	Not sure, bur Covid changed almost everything	7/9/2021 9:56 AM
7	I am not sure that there was anything that was planned or expected that was not accomplished other than meeting profitability goals which is to be expected given the state of the world during the pandemic	6/25/2021 10:54 AM
8	N/A	6/23/2021 3:23 PM
9	the retreat. the pandemic hit.	6/22/2021 4:15 PM

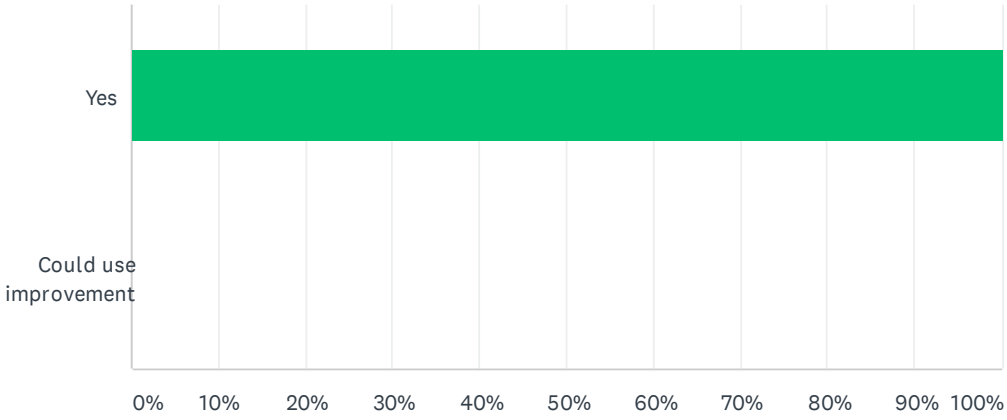
Q19 How can we improve the effectiveness of the Board?

Answered: 10 Skipped: 2

#	RESPONSES	DATE
1	n/a	7/19/2021 8:26 AM
2	More participation from more members of the Board	7/14/2021 10:33 AM
3	Although there is new board member orientation. I think there's an opportunity to provide more training and education for new board members. I think doing so will ensure newer board members are able to ramp up, participate and keep up with board members who've been on the board for some time.	7/12/2021 8:13 PM
4	We can continue to communicate with each other.	7/12/2021 1:59 PM
5	I think additional members will be very helpful for the long term growth of the board.	7/12/2021 1:04 PM
6	Keep working on ways to improve our interactions with each other.	7/12/2021 12:38 PM
7	Fewer rubber stamp votes. I cannot recall one issue where there has been any conflict or disagreement. Perhaps another way to approve staff recommendations.	7/9/2021 9:56 AM
8	perhaps a bit more expectation for the board to connect to the community such that fundraising takes place. At least the board members that would have the ability to do this.	6/25/2021 10:54 AM
9	N/A	6/23/2021 3:23 PM
10	I can't think of anything	6/22/2021 4:15 PM

Q20 I understand and support the mission of the Southeast.

Answered: 12 Skipped: 0

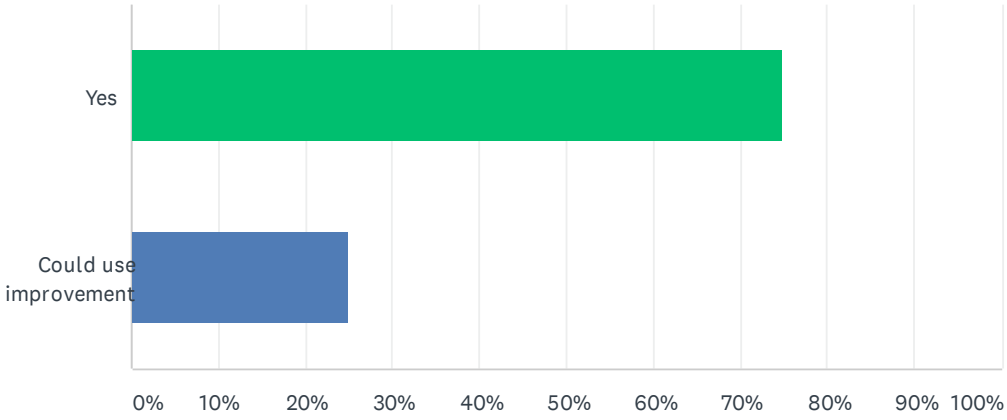


ANSWER CHOICES	RESPONSES	
Yes	100.00%	12
Could use improvement	0.00%	0
TOTAL		12

#	COMMENT	DATE
1	Southeast is an amazing organization that looks to continually improve and help the woefully underserved in our community	6/25/2021 10:54 AM

Q21 I am knowledgeable about Southeast's programs and services.

Answered: 12 Skipped: 0

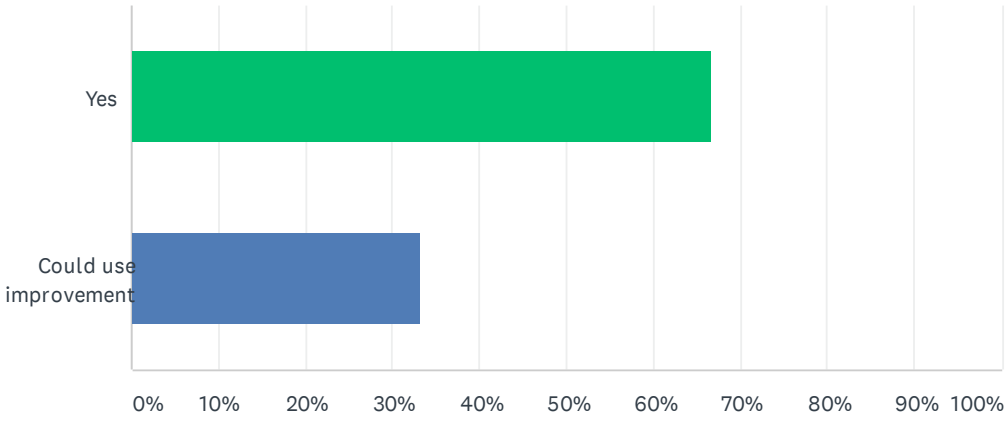


ANSWER CHOICES	RESPONSES	
Yes	75.00%	9
Could use improvement	25.00%	3
TOTAL		12

#	COMMENT	DATE
1	There is so much to learn. I consider myself an outsider to our business. It has taken me years to try to grasp all we do.	7/12/2021 12:38 PM
2	Knowledgable about most programs; perhaps a “cheat sheet” to briefly describe function of each program	7/9/2021 9:56 AM
3	I feel as though I have a handle on the majority of the programs.	6/23/2021 3:23 PM

Q22 I am knowledgeable about trends and important developments related to Southeast.

Answered: 12 Skipped: 0

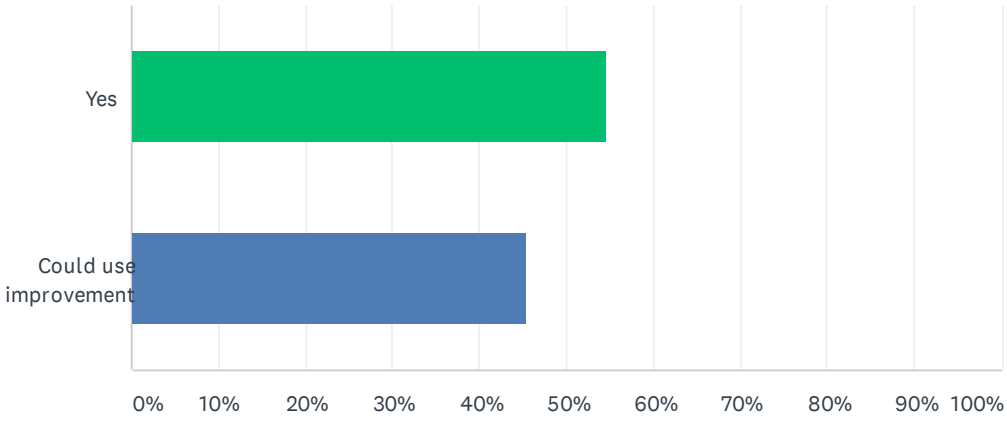


ANSWER CHOICES	RESPONSES	
Yes	66.67%	8
Could use improvement	33.33%	4
TOTAL		12

#	COMMENT	DATE
1	Mostly yes, but longer term trends might be identified and a repeat of major funding changes	7/9/2021 9:56 AM

Q23 I assist with fund-raising and/or give a significant annual gift to Southeast.

Answered: 11 Skipped: 1

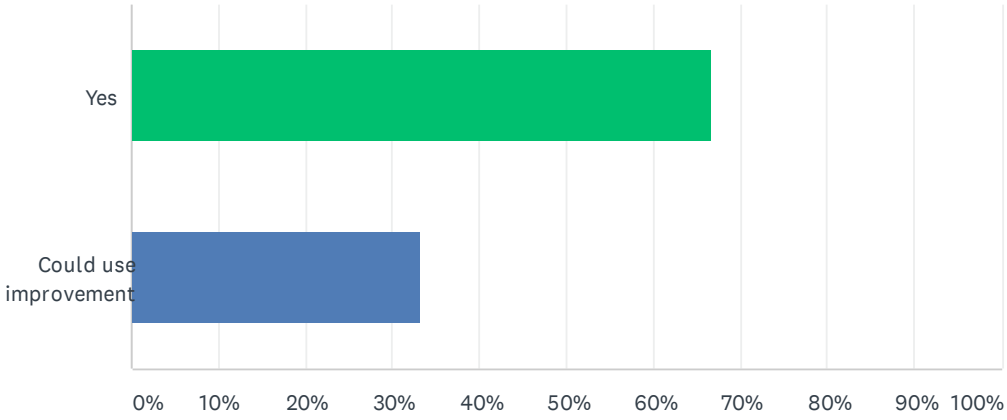


ANSWER CHOICES	RESPONSES	
Yes	54.55%	6
Could use improvement	45.45%	5
TOTAL		11

#	COMMENT	DATE
	There are no responses.	

Q24 I read and understand Southeast's financial statements.

Answered: 12 Skipped: 0

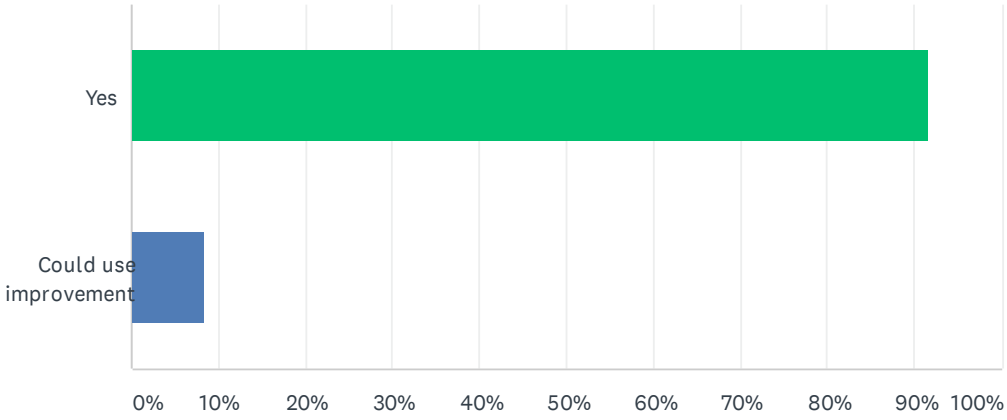


ANSWER CHOICES	RESPONSES	
Yes	66.67%	8
Could use improvement	33.33%	4
TOTAL		12

#	COMMENT	DATE
1	It would be helpful to have a simplified report for those of us without education in finance	7/9/2021 9:56 AM
2	I read them and each month they make more sense!	6/23/2021 3:23 PM

Q25 I have a good working relationship with the CEO.

Answered: 12 Skipped: 0

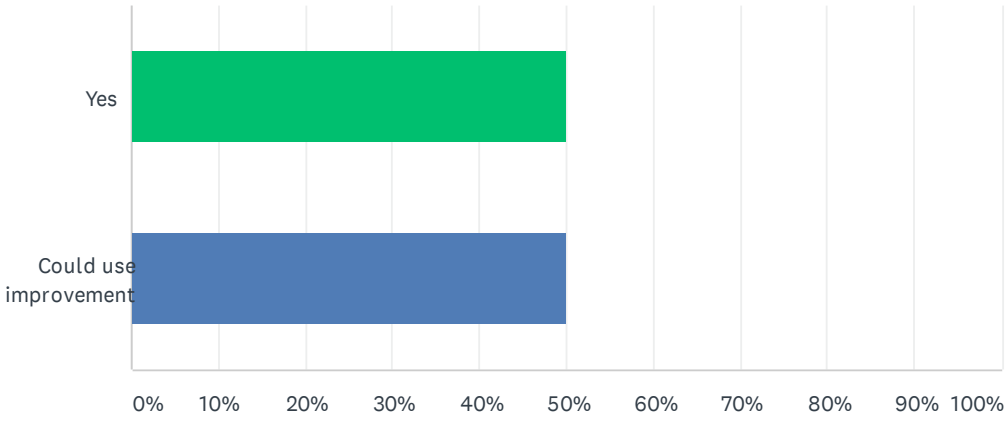


ANSWER CHOICES	RESPONSES	
Yes	91.67%	11
Could use improvement	8.33%	1
TOTAL		12

#	COMMENT	DATE
1	Rarely communicate with him except at Board meetings	7/9/2021 9:56 AM
2	Bill is a great CEO and leader.	6/25/2021 10:54 AM

Q26 I recruit and recommend individuals as potential Southeast Board Members.

Answered: 12 Skipped: 0

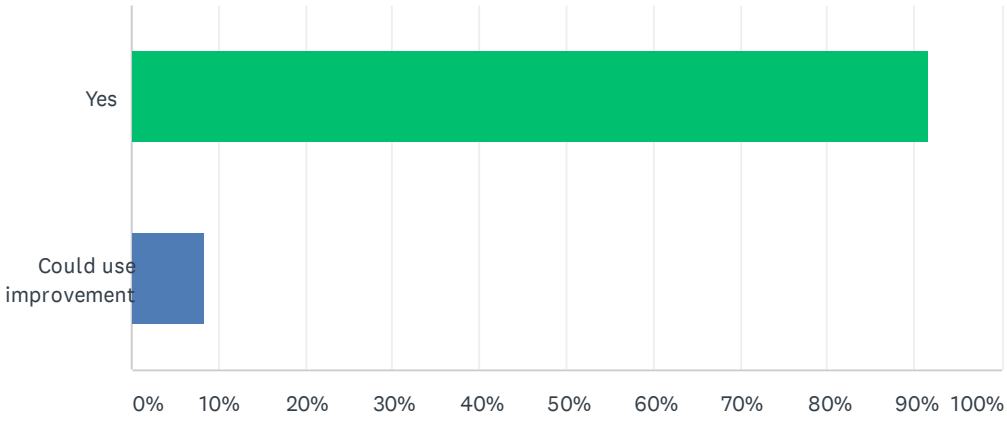


ANSWER CHOICES	RESPONSES	
Yes	50.00%	6
Could use improvement	50.00%	6
TOTAL		12

#	COMMENT	DATE
1	Board members are hard to find	7/9/2021 9:56 AM
2	i have in the past but not much recently. I should be more proactive in this effort	6/25/2021 10:54 AM
3	Not sure how this works, what needs there are	6/23/2021 3:23 PM

Q27 I prepare for and participate in board meetings and committee meetings.

Answered: 12 Skipped: 0

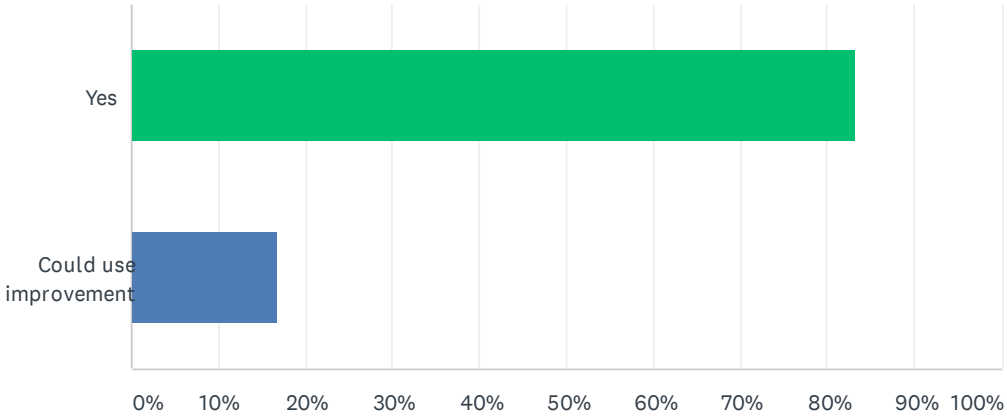


ANSWER CHOICES	RESPONSES	
Yes	91.67%	11
Could use improvement	8.33%	1
TOTAL		12

#	COMMENT	DATE
1	Do not always read a long documents	7/9/2021 9:56 AM

Q28 I RSVP prior to board meetings when I know I will be absent.

Answered: 12 Skipped: 0

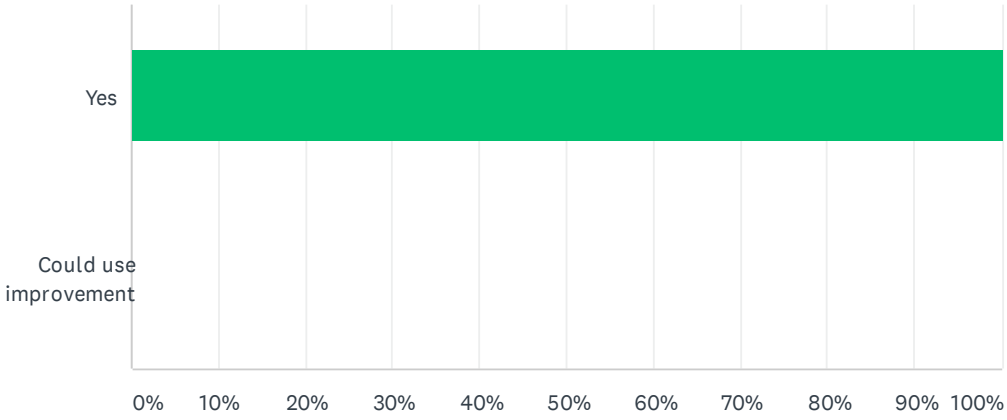


ANSWER CHOICES	RESPONSES	
Yes	83.33%	10
Could use improvement	16.67%	2
TOTAL		12

#	COMMENT	DATE
	There are no responses.	

Q29 I act as a good-will ambassador to Southeast.

Answered: 12 Skipped: 0

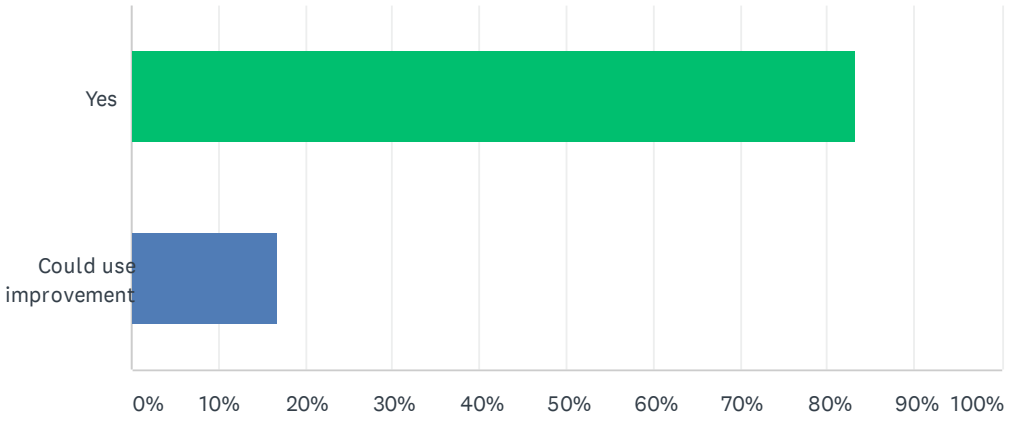


ANSWER CHOICES	RESPONSES	
Yes	100.00%	12
Could use improvement	0.00%	0
TOTAL		12

#	COMMENT	DATE
	There are no responses.	

Q30 I find serving on the board to be a satisfying and rewarding experience.

Answered: 12 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	83.33%	10
Could use improvement	16.67%	2
TOTAL		12

#	COMMENT	DATE
1	I enjoy learning about new SE.and system developments. It is good to meet staff and other board members. At the the same time, while I understand that the SE board is a policy board I do not feel I make much of a contribution. Perhaps this is my fault or require instruction how I could be more helpful.	7/9/2021 9:56 AM
2	I have been on the board for maybe 23 or more years- i am not even sure when i actually started. I have found this very rewarding. It is a great organization!	6/25/2021 10:54 AM

HRSA Patient Satisfaction SFY21 Report

Executive Summary

In early 2021, 217 primary care patients were surveyed (about 7.6% of patient population served Feb. through April) using the HRSA Patient Satisfaction Survey. Staring in SFY19, HRSA Patient Satisfaction Surveys are collected once per year (previously surveys were collected twice per year). Survey respondents can answer questions on a scale from 5 to 1: “great”, “good”, “ok”, “fair”, “poor”, and “don’t know”. Overall, 82% of responses were rated great (5) or good (4). This is similar to SFY20, when 83% of responses were rated this way.

In 2021, male respondents answered 85% of questions as great (5) or good (4), and female respondents answered 80% of questions as great (5) or good (4). Males increased this year from SFY20 when they answered 82% of questions this way, but females decreased from 84% in SFY20. In Franklin County, white respondents answered a similar percentage (81%) of questions as great (5) or good (4) as black/African American respondents (79%). In SFY 20 the percentages of questions answered great (5) or good (4) for white and black/African American respondents were 84% and 77%, respectively.

When compared with SFY20 results, average responses were slightly lower for most questions on the survey. However, average scores still remained high overall. Average responses for all survey questions were higher than 4 (good) out of a possible 5 (great). There was high satisfaction with staff (physicians, nurse practitioners, nurses and medical assistants) and lower satisfaction in responses related to access to care and waiting.

Results from 2021

A. Overview

The results described in this study are from a satisfaction survey designed by HRSA and administered to health center patients who received services in February through April of 2021. A total of 217 surveys were collected from patients receiving services during this time period (2,872 patients served). This resulted in 7.6% of patients being surveyed. The goal is for 10% of patients to complete the survey, but the COVID-19 pandemic resulted in lower numbers of patients coming in person for services, and many surveys were completed over the phone. Phone surveys did allow, however, for further understanding of the survey process for respondents. Insights about questions themselves are included throughout to give the opportunity for further discussion.

Location	Number of Surveys Collected
16 W. Long St.	94
Primary Care - Franklin Station	50
BOR – Franklin Station	9
St. Clairsville	35
Cadiz	15
720 E. Broad	6
Van Buren	5
Delaware	3
Total	217

The satisfaction survey was made available to patients while waiting in the lobby, and completed surveys were returned to a large envelope on the receptionist's desk. In addition, 102 were conducted over the phone. Patients were told that the survey was anonymous and confidential. Overall, 82% of responses were rated great (5) or good (4), down slightly from 83% from SFY20.

The gender distribution for survey respondents was similar to that of the patient population. Males had a slightly higher percentage (85%) of questions answered great (5) or good (4) than females (80%), but "other" gendered respondents had the highest proportion of these responses (94%). On future surveys, it could be best to capture gender in a different way, as one respondent on the phone identified as transgender male, but this is not an option on the form.

Gender	Number of Surveys Collected	Percent of Total Surveys	Percent of FQHC Patients served 2020*	Percent of questions answered great (5) or good (4)
Female	116	53%	53%	80%
Male	86	40%	45%	85%
Other	4	2%	0.4%	94%
Transgender male	1	0.5%	0.4%	79%
No Response	10	5%		87%

*Based on 2020 UDS data

A higher percentage of patients did not indicate their race/ethnicity on the survey than in the patient population for UDS data. The percent of total surveys by race/ethnicity was similar to the FQHC patient population from 2020.

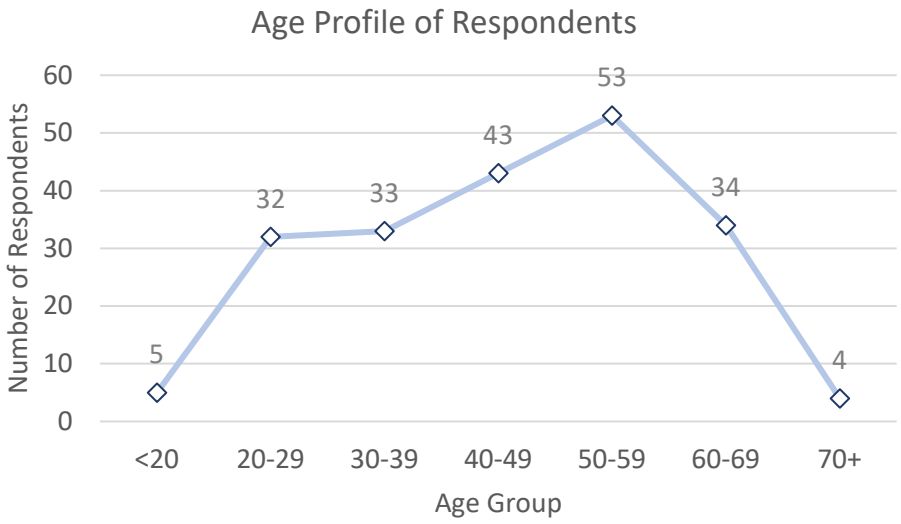
Race/Ethnicity	Number of Surveys Collected	Percent of Total Surveys	Percent of FQHC Patients served 2020*
Asian/Pacific Islander	1	0.5%	1%
Black/African American	54	25%	31%
White	124	57%	63%
Hispanic or Latino (All Races)	2	1%	2%
Two or more races	5	2%	3%
Other	5	1%	0%
No Response	29	13%	1%

*Based on 2020 UDS data

A further breakdown of race and ethnicity survey respondents in Franklin County is shown below. The "Other" category in this case includes those that selected Asian/Pacific Islander, Hispanic or Latino (all races), Two or more races, and Other aggregated due to a low number of respondents for each race/ethnicity individually. Additionally, there were just two Black/African American respondents outside of Franklin County. White respondents answered a slightly higher percentage (81%) of questions as great (5) or good (4) than Black/African Americans (79%). Respondents of "other" races had the highest percentage of questions rated as great (5) or good (4) (85%), though percentages were very similar across races in Franklin County.

Franklin County-Race/Ethnicity	Number of Surveys Collected	Percent of Total Franklin County Surveys	Percent of Franklin County FQHC Patients served 2020	Percent of questions answered great (5) or good (4)
Black/African American	52	32%	43%	79%
White	78	48%	49%	81%
Other	10	6%	8%	85%
No Response	24	15%		84%

The age profile of survey respondents is shown below. Thirteen respondents did not answer this question, so 204 responses are included in the graph below. Those under 20 had the highest average score (4.75), followed by those 70 and over (4.62), though averages were similar across age categories, reaching a low of 4.4 for respondents aged 30-49.



B. Survey Question Responses- All Southeast Locations

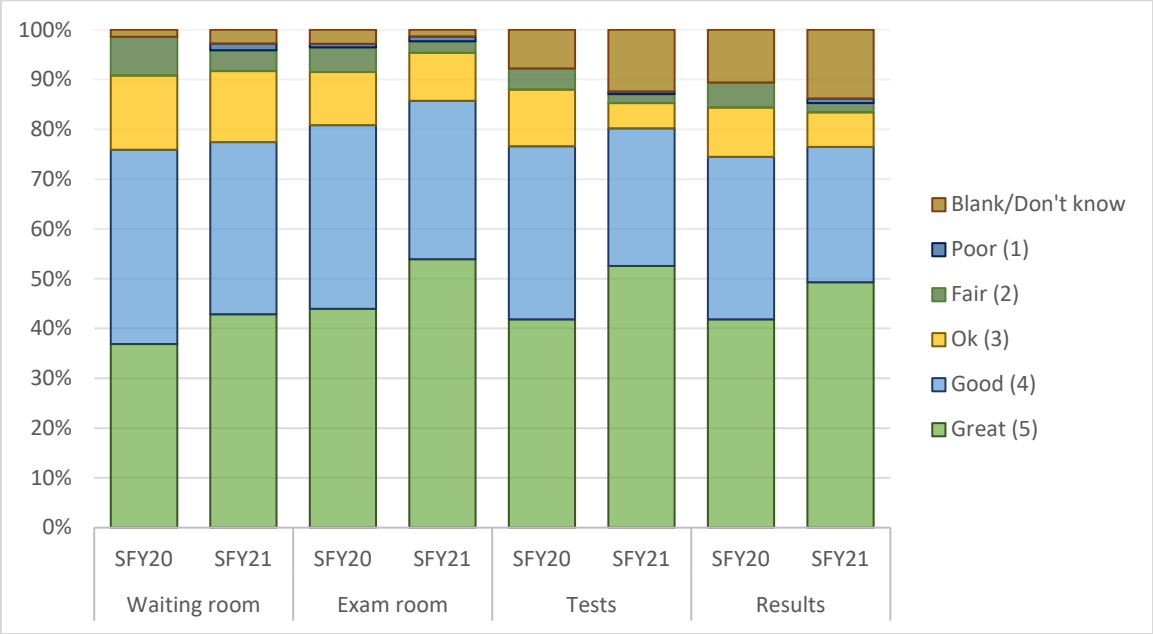
The following charts show results for all health center locations combined comparing SFY21 results to those of SFY20. Historical averages for each question follows on page 9, and a list of the questions as they appear on the form as well as the average for each category and question appear on page 10.

Ease of Getting Care

Average scores for each of these questions was below 4.5, and every average decreased from SFY20, except “hours the center is open” which did not change. “Prompt return on calls” was the lowest scoring question this year (4.01).

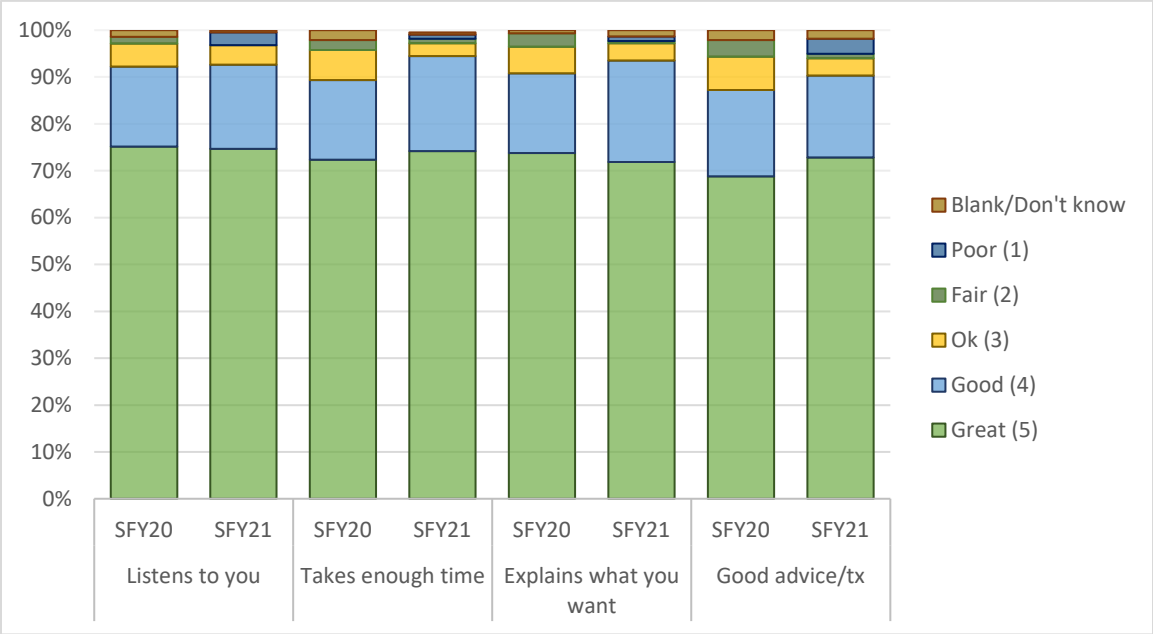
Waiting

Each question in this category had an average below 4.5 this year, though every average did increase from SFY20. "Time in the waiting room" was the second lowest average this year (4.17).



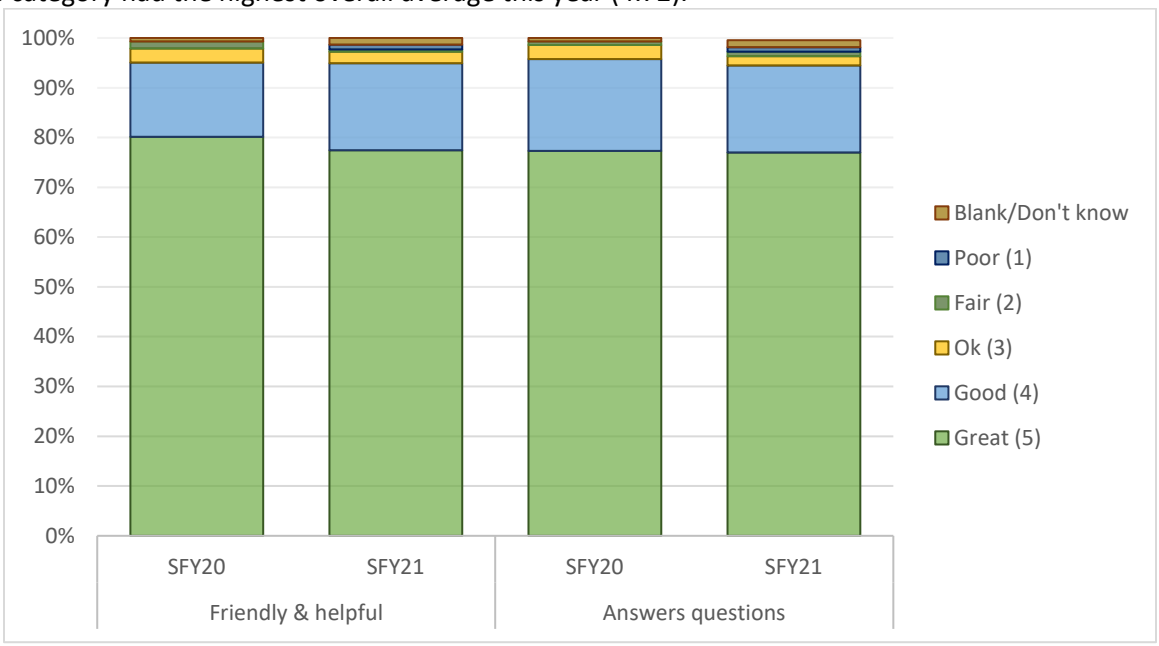
Satisfaction with Doctors and Nurse Practitioners

Overall, this section had the second highest average score (4.62).



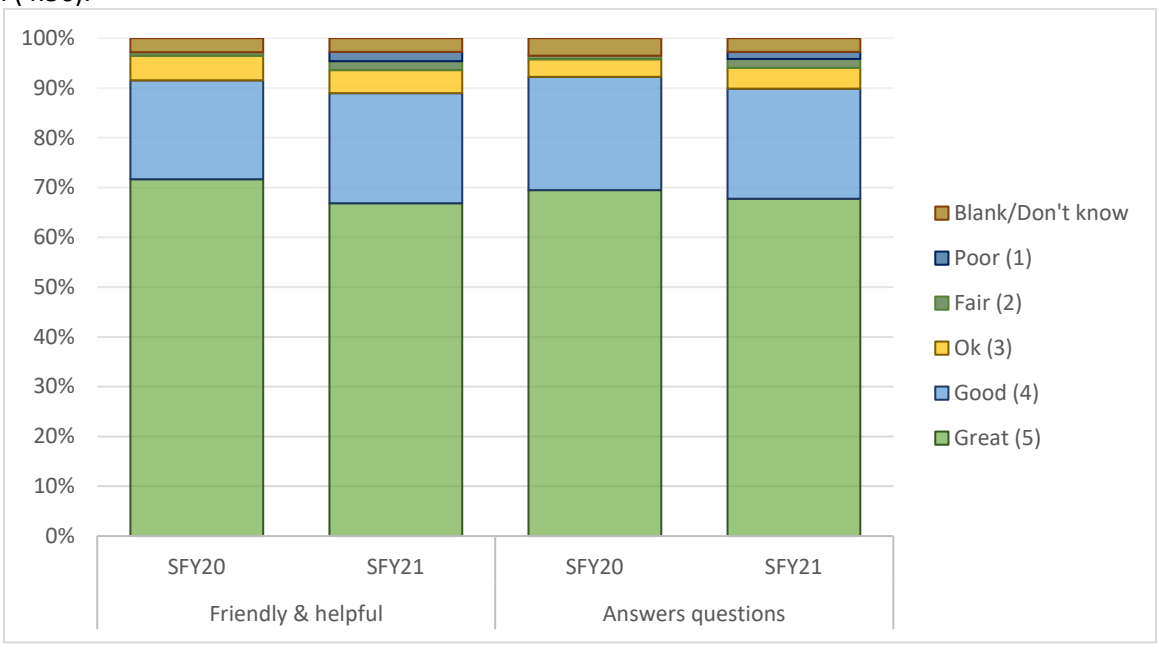
Satisfaction with Nurses and Medical Assistants

This category had the highest overall average this year (4.72).



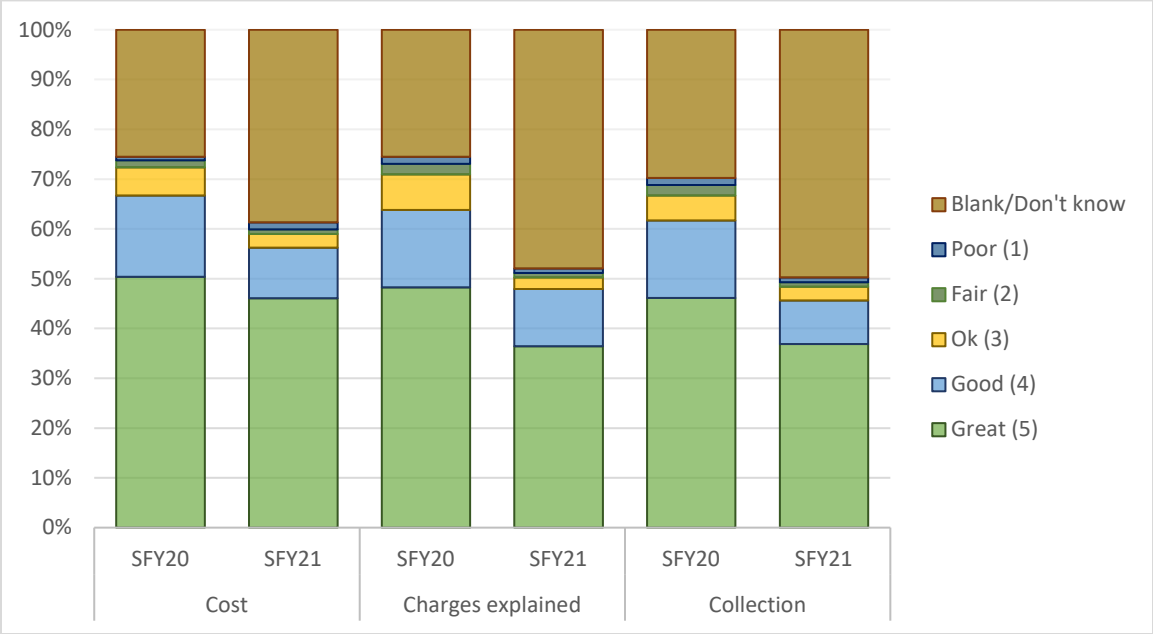
Satisfaction with All Other Staff

Other staff had a lower overall average score than the previous staff categories, but the average was still high (4.56).



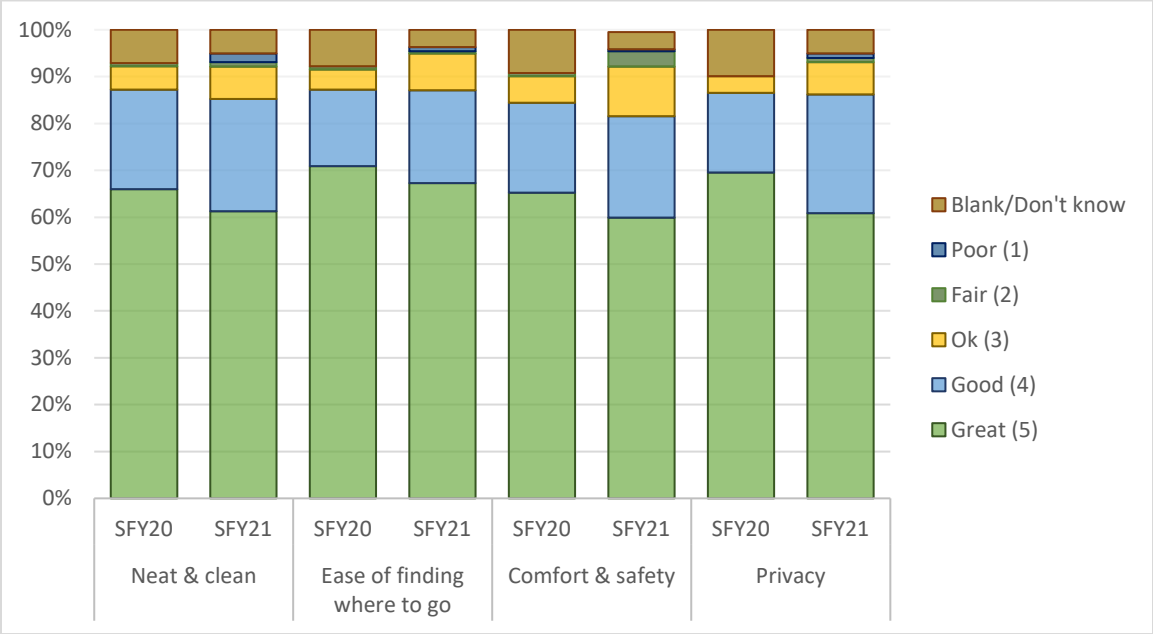
Payment

Many did not know how to answer these questions due to insurance coverage or not paying anything. This category had the highest percent of blank or "don't know" responses.



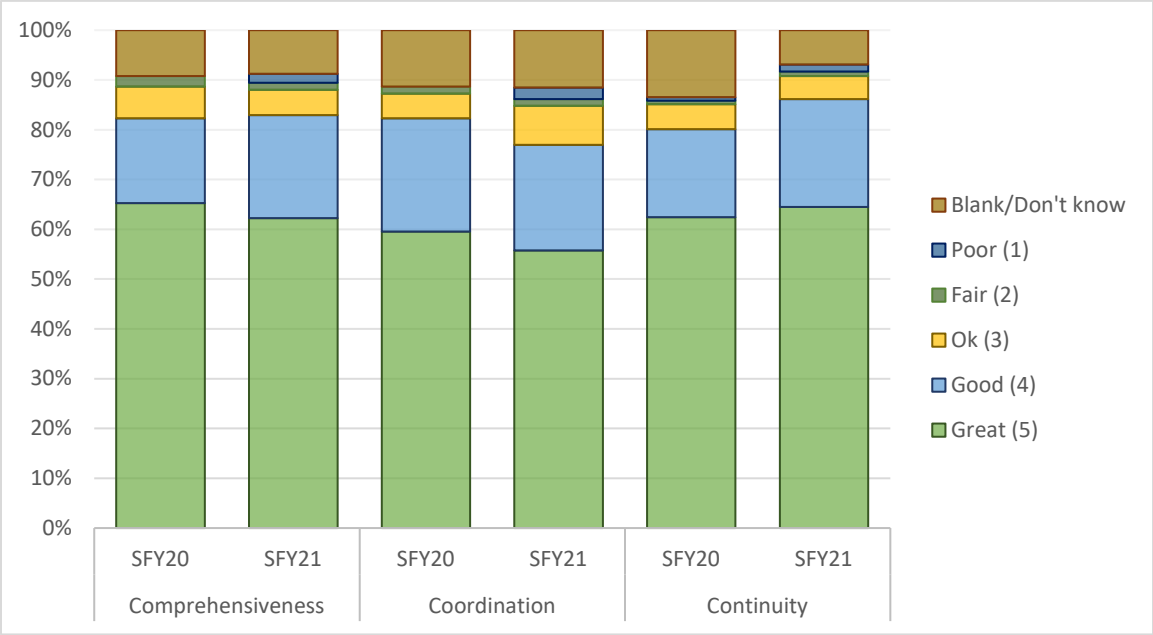
Facility

This category had the largest decreases in averages from last year, "comfort and safety" and "privacy" (by 0.21 each). It may also be helpful to consider clarifying the "ease of finding where to go", whether it means in the building or to get to the building.



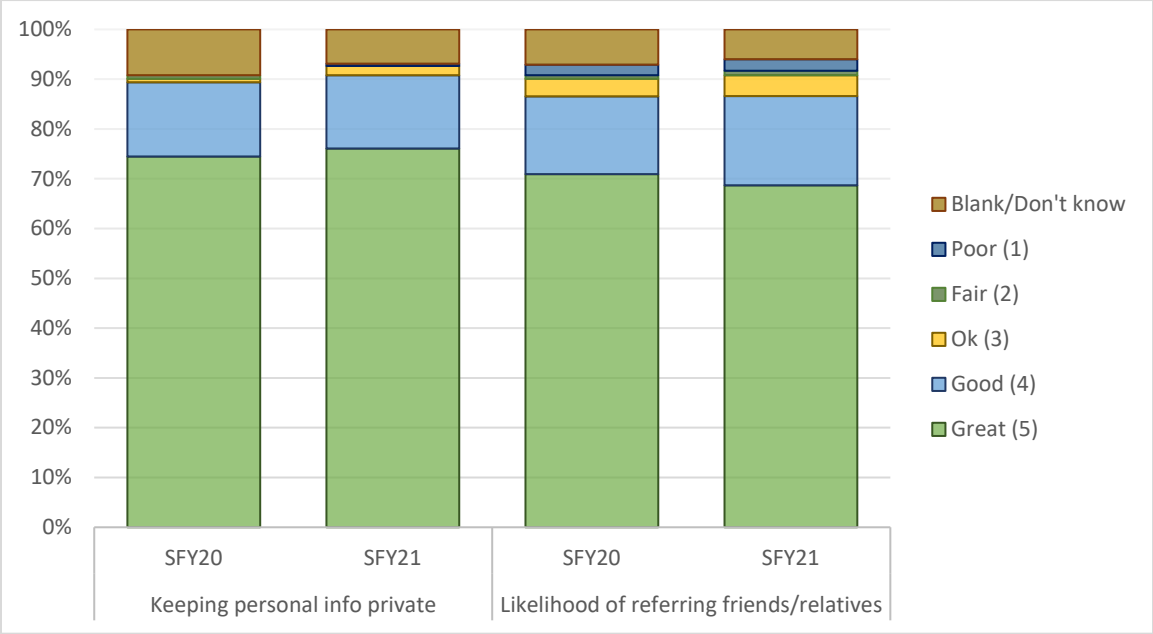
Comprehensiveness, Coordination, and Continuity

Three items were added to the HRSA Patient Satisfaction Survey for SFY19 in order to ensure that the survey aligns with PCMH guidelines. Each of these averages decreased just slightly from SFY20. Though the terms are explained on the form, they were still confusing to many. In particular, many did not know how to answer the "coordination of care" question.



Other Questions

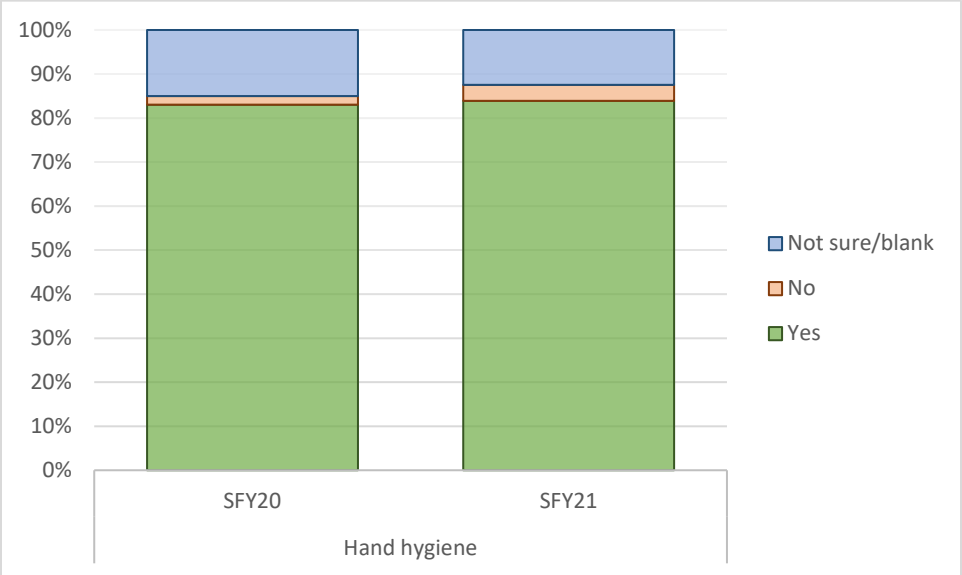
Many did not like the question about "keeping your personal information private" because they felt they did not know. Many responses on the phone where "I guess they do" or "I would hope they do".



Is Southeast your regular source of care?
Some needed this explained on the phone.

YES = 91% NO =4% Not sure/blank = 5%

Did you see provider washing hands or using hand sanitizer before and after treatment?
Some commented that there was not a place to wash hands in the room, so they wouldn't know but guessed providers washed their hands before coming in.



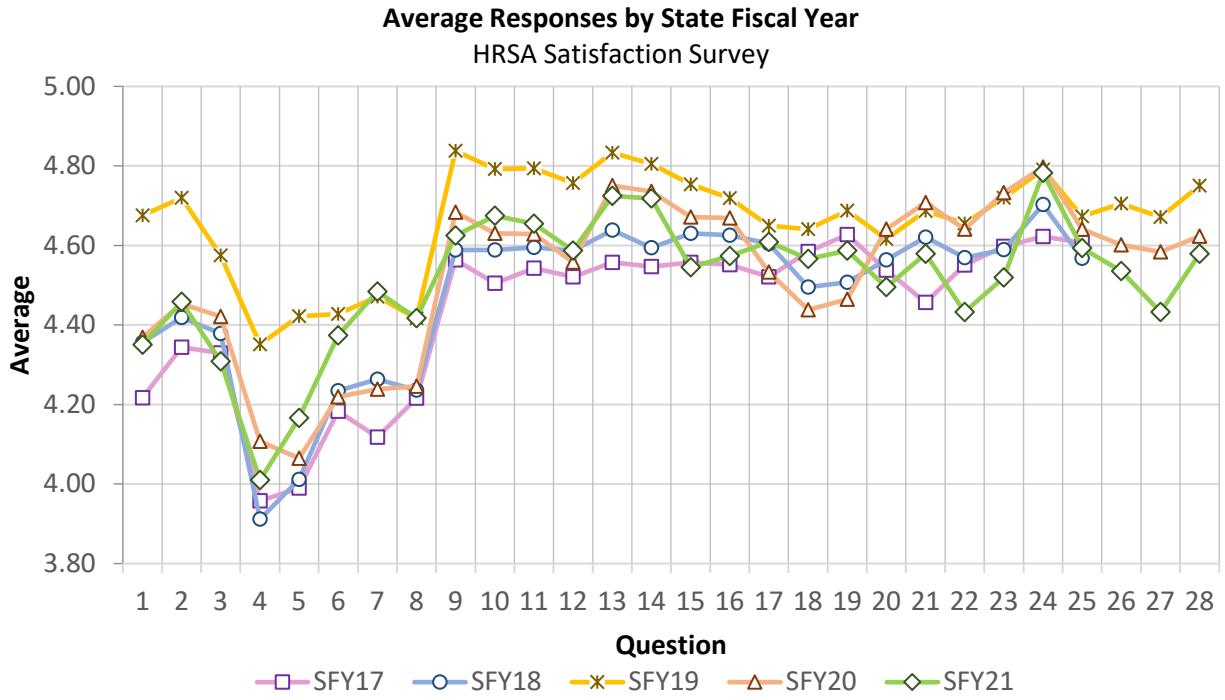
Have you received Southeast primary care services by telehealth? If so, did telehealth meet your needs?

Many did not understand what "telehealth" meant, likely leading to the high number of blanks/not sure responses from paper forms. This question would also likely do well as a yes/no two part question similar to the regular source of care question rather than an open-ended one. See further respondent comments on this open-ended question below on page 22.

	Number of respondents	Percent of respondents
Yes and met needs	98	45%
Yes and did not meet needs	3	1%
Has not received telehealth	35	16%
Blank/not sure	81	38%

Question		Avg
Ease of getting care		**4.28**
1	Ability to Get in to be seen	4.35
2	Hours Center is Open	4.46
3	Convenience of Center's location	4.31
4	Prompt return on calls	4.01
Waiting		**4.36**
5	Time in Waiting Room	4.17
6	Time in Exam Room	4.37
7	Waiting for tests to be performed	4.48
8	Waiting for test results	4.42
Staff – Physician, Nurse Practitioner		**4.64**
9	Listens to you	4.63
10	Takes enough time with you	4.67
11	Explains what you want to know	4.65
12	Gives you good advice and treatment	4.59
Staff - Nurses and Medical Assistants		**4.72**
13	Friendly and helpful to you	4.72
14	Answers your questions	4.72
All Other Staff		**4.56**
15	Friendly and helpful to you	4.55
16	Answers your questions	4.57
Payment		**4.59**
17	What you pay	4.61
18	Explanation of charges	4.57
19	Collection of payment/money	4.59
Facility		**4.51**
20	Neat and clean building	4.50
21	Ease of finding where to go	4.58
22	Comfort and safety	4.43
23	Privacy	4.52
Confidentiality		**4.78**
24	Keeping my personal information private	4.78
Referral		**4.59**
25	Likelihood of referring your friends and relatives to us	4.59
PCMH		**4.52**
26	Comprehensiveness of Care- Southeast has a full range of services to meet my healthcare needs and can refer me to other practices when I need a service they don't provide.	4.54
27	Coordination of Care- Southeast helps me organize my care by organizing my care activities and sharing information with my treatment team to achieve safer and more effective care.	4.43
28	Continuity of Care- I am directly involved with my health care and work with my provider to know what I can do for my health conditions.	4.58

C. Historical Comparisons



Average Scores by Question

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
SFY14	4.25	4.53	4.66	3.97	3.66	3.75	3.74	3.68	4.75	4.69	4.75	4.81	4.88	4.88	4.55
SFY15	4.42	4.63	4.65	4.45	4.23	4.36	4.39	4.34	4.74	4.77	4.60	4.72	4.72	4.69	4.71
SFY16	4.11	4.31	4.28	3.89	3.91	3.99	3.89	3.92	4.49	4.40	4.57	4.60	4.69	4.63	4.41
SFY17	4.22	4.34	4.33	3.96	3.99	4.18	4.12	4.22	4.56	4.51	4.54	4.52	4.56	4.55	4.56
SFY18	4.36	4.42	4.38	3.91	4.01	4.23	4.26	4.24	4.59	4.59	4.60	4.59	4.64	4.59	4.63
SFY19	4.68	4.72	4.58	4.35	4.42	4.43	4.47	4.42	4.84	4.79	4.79	4.76	4.83	4.81	4.75
SFY20	4.37	4.45	4.42	4.11	4.06	4.22	4.24	4.25	4.68	4.63	4.63	4.56	4.75	4.74	4.67
SFY21	4.35	4.46	4.31	4.01	4.17	4.37	4.48	4.42	4.63	4.67	4.65	4.59	4.72	4.72	4.55
8 year Avg	4.34	4.48	4.45	4.08	4.06	4.19	4.20	4.18	4.66	4.63	4.64	4.64	4.72	4.70	4.60

	16	17	18	19	20	21	22	23	24	25	26	27	28
SFY14	4.43	4.37	4.52	4.38	4.16	4.65	4.35	4.50	4.71	4.47			
SFY15	4.64	4.49	4.53	4.44	4.46	4.52	4.48	4.55	4.75	4.59			
SFY16	4.48	4.37	4.27	4.25	4.40	4.56	4.37	4.41	4.55	4.48		N/A	
SFY17	4.55	4.52	4.58	4.63	4.54	4.46	4.55	4.60	4.62	4.61			
SFY18	4.63	4.60	4.50	4.51	4.56	4.62	4.57	4.59	4.70	4.57			
SFY19	4.72	4.65	4.64	4.69	4.62	4.69	4.66	4.72	4.79	4.67	4.71	4.67	4.75
SFY20	4.67	4.53	4.44	4.46	4.64	4.71	4.64	4.73	4.80	4.64	4.60	4.58	4.62
SFY21	4.57	4.61	4.57	4.59	4.50	4.58	4.43	4.52	4.78	4.59	4.54	4.43	4.58
8 year Avg	4.59	4.52	4.50	4.49	4.48	4.60	4.51	4.58	4.71	4.58	4.61	4.56	4.65

Primary Health Care – HRSA Patient Satisfaction Survey – SFY21

Mean and Median – All Responses

	Overall Avg (Mean)	Overall Median
SFY13	4.66	4.66
SFY14	4.40	4.50
SFY15	4.55	4.55
SFY16	4.33	4.40
SFY17	4.43	4.54
SFY18	4.48	4.57
SFY19	4.66	4.69
SFY20	4.53	4.61
SFY21	4.51	4.56
Overall	4.51	4.56

Average Responses by Location – Access to Care and Waiting Questions (1-8)

	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8
16 W Long	4.11	4.37	4.15	3.77	3.90	4.27	4.25	4.24
Franklin Station	4.55	4.64	4.61	4.15	4.44	4.50	4.71	4.53
St. Clairsville	4.60	4.57	4.20	4.15	4.06	4.37	4.55	4.47
Cadiz	4.86	4.93	4.86	4.79	5.00	4.86	4.79	4.79
BOR*	4.33	4.00	4.56	4.22	3.89	4.22	4.29	4.29
720 E Broad*	3.17	3.17	3.00	3.33	4.20	3.67	5.00	5.00
Van Buren*	5.00	5.00	4.80	3.75	5.00	5.00	5.00	5.00
Delaware*	4.67	4.00	4.00	4.33	4.33	4.00	5.00	4.33

*Less than 10 respondents, interpret average with caution.

D. Analysis

Strengths:

- Staff: Questions relating to Nurses and Medical assistants scored the highest average (4.72), followed by questions relating to physicians and nurse practitioners (4.64). Other staff were rated lower, but still had a fairly high average (4.56). Many of the open-ended responses to "what do you like best about our center?" mentioned staff friendliness, specific providers that have been helpful, and other positive remarks about staff.
- "Keeping my personal information private" scored the highest average (4.78).
- While most average scores decreased from SFY20 to SFY21, ten questions' averages improved. The largest increase was for questions 7 and 8 ("waiting for tests to be performed" and "waiting for test results"), by 0.25 and 0.17, respectively. Questions 5 and 6 related to waiting, 10-12 related to physicians and NPs, and 17-19 related to payment, all showed slight increases as well.
- Many free response comments regarding "what do you like best about our health center?" cited friendliness of staff, convenience (of location and everything being in one place), and the quality of care or help they receive.

Opportunities:

- Access to Care: survey response averages were lower (below 4.5) for all questions in this category. Question four, which asks about "prompt return on calls" was the lowest scoring survey item, with an average score of 4.01 out of 5. Average scores for all of the questions in this category decreased from SFY20 to SFY21 except question 2 "hours the center is open", which remained the same.
- Waiting: survey response averages were lower (below 4.5) for all questions in this category. In particular, question 5 which asks about "time in waiting room" was the second lowest scored question by average response, with a score of 4.17 out of 5. The average scores for all of the questions in this section did increase, however from SFY20 to SFY21.
- The two questions with the largest decrease in average score from SFY20 to SFY21 were question 22 "comfort and safety [of the facility]" and question 23 "privacy [of the facility]". Scores for the Facility and All Other Staff categories saw the largest decrease in average score over the past year.
- Free response comments with respect to areas for improvement generally focused on ease of access (phone calls, making appointments, availability), the other clients or people in/around the building, and the facility.

E. Recommendations

Previous Recommendations	Progress
St. Clairsville – Break out Cadiz site from St. Clairsville for future comments section	In progress –working on strategies to ensure that we receive survey responses from all FQHC sites moving forward (such as color coding survey forms)
All sites - Have FQHC group to discuss comments related to returning phone calls and come up with recommendation for QC	Move to 2021
Separate survey results on waiting time and access to care by location. Add more detail to historical comparison data to show average scores by question. Provide annual mean and median scores for recent years.	Complete
New Recommendations (QC July 2021)	
Task FQHC group with discussing return phone calls and coming up with a recommendation.	Go to FQ meeting to ask for recommendation (Alex).
Revisit wording of questions on survey for Comprehensiveness, Coordination and Continuity of Care, and Telehealth.	For questions we added, clarify wording for clients. Other questions are standardized.
Task locations with looking at questions that had an average under 4 and get recommendations.	Averages for all questions by location to Jenifer and Wendy. Reach out to locations to ask for a group to make recommendations (Jenifer).