

Board of Directors Meeting September 23, 2024 5:00 pm

- 1) Call to Order and Attendance | Dr. Rebecca Bruhl, Board Chair
- 2) Consent Agenda | Dr. Rebecca Bruhl, Board Chair
 - a) Board of Director Minutes | August 26, 2024
 - b) Executive Committee | September 9, 2024
 - c) Finance Committee | September 9, 2024
- 3) State of the Facility Reports | Mr. Aaron Thompson, Executive Director
 - a) Clinical Update | Ms. Kendra Robinson, NP
 - b) Business Office | Mr. Jacob Cooper
 - c) Operations | Ms. Maggie Beamon
 - d) Dental | Dr. Lorenzo Modeste
 - e) Marketing & Communications | Ms. Michelle Williams
 - f) Communication & Development | Ms. Susan Dunn
- 4) Committee Reports
 - a) Finance Committee | Melissa Tucker, CPA, Chair
 - b) Governance & Nominating | Dr. Becca Bruhl, Chair
 - c) Planning & Performance | Mr. Scott Herr, Chair
- 5) New Business
 - a) Closed Session
 - i) Executive Director Annual Appraisal Discussion
- 6) Next Board Meeting | October 28, 2024 at 5:00 pm
- 7) Adjourn



Board of Directors Meeting August 26, 2024 5:00-6:00 pm

1. Call to Order and Attendance | Ms. Becca Bruhl, Board Chair

	Atten	dance				
Member	s Present	Members Absent	Staff Present			
Becca Bruhl	R. Scott Herr	Rick Jackson	Aaron Thompson			
Melissa Tucker	Doug Holroyd	Amanda Ulishney	Kendra Robinson			
Jonathan Weiss	Larry Snyder		Lorenzo Modeste			
Cornelius Powell	John McGlennon		Michelle Williams			
Robin Nelhuebel	Jennifer Kirby Henderson		Susan Dunn			
David Aday	Heather Modispaw					
Christine Payne	Henry Ranger					
Brian Fuller	Caleb Rogers					
Cheryl Fields	Rashid Jones					
Rana Graham-Montaque						

- 2. Consent Agenda | Dr. Becca Bruhl, Board Chair
 - i) Board of Director Minutes | July 22, 2024
 - ii) Governance & Nominating Minutes | August 16, 2024
 - iii) Finance Minutes | July 8, 2024
 - i. A motion to consent agenda for the above minutes with the following changes was made by Rashid Jones and seconded by Scott Herr and was approved.
 - 1. FQHC Discussion i. The award date would be June 1, 2025 and v. Do we lose our designation as a Rural Health Center? Yes, if OTMDC choses to become a FQHC, however if deciding to be a Look A Like we can maintain our Rural Health Center status.
- 3. State of the Facility Reports | Mr. Aaron Thompson, Executive Director
 - i) Facility Update | Mr. Aaron Thompson, Executive Director
 - i. Discussion regarding the upcoming September 9th meeting re email from CBH.
 - 1. Recapped the timeline of former events leading up to the upcoming meeting.

- ii. Audit is still progressing well, and is much further ahead at this point than in previous years. Continuing to work closely with Heather Modispaw. The 990 is also in process.
- iii. Continuing our Midwifery endeavors with Sentara, and the EPIC integration has been fast tracked and begun having weekly meetings.
- iv. Sentara Cares awarded 250K for the Midwifery and EPIC integration.
- v. Chose to go with a different direction with Grants and Development and will be posting within the week.
- ii) Clinical Update | Kendra Robinson
 - i. Nothing of note to report outside of Board Packet report.
- iii) Business Office | Aaron Thompson
 - i. Jacob Cooper and Lisa Tinker have completed coding class and now getting ready for the exam.
- iv) Operations | Maggie Beamon
 - i. Discussed inconsistencies in patients from different jurisdictions. Current program is not capturing data well and EPIC should help with making data more reliable.
 - ii. Discussed noncompliance data.
- v) Dental | Dr. Lorenzo Modeste
 - i. Discussed Eastern State patients and how things are going.
- vi) Marketing & Communications | Michelle Williams
 - i. Will send out calendar invites to the board regarding our events.
- vii) Communications & Development | Susan Dunn
 - i. Nothing of note to report outside of Board Packet report.

4. FQHC Discussion | Chris James

- i) First portion of the application will be sent by the end of this month.
- ii) Second portion will be showing what we are doing to meet the requirements and is due the end of September.
- iii) Bylaws can be changed at any time by the board with two thirds vote.
 - i. Reviewed the bylaw changes the Center needs to comply with FQHC status.as well as recommendations from the lawyer.
 - ii. Based on recommendations from out lawyer more updates will be made to the bylaws, sent for board review, and will be voted on at the next board meeting.

5. Committee Reports

- i) Finance Committee | Melissa Tucker, Chair
 - i. Discussed current financials and adjustments.
 - ii. Grant of 900k has been moved into the current fiscal year.
 - iii. There have been no adjustments to bad debt.
 - iv. Endowment updates have been added to financials.
 - v. Next meeting September 9, 2024
- ii) Planning & Performance | Scott Herr
 - i. Strategic Planning
 - 1. Reviewing current documents to update to more current events.
 - 2. Hope to have an updated document by the end of the year.
- iii) Governance & Nominating | Dr. Becca Bruhl, Chair

- i. Board Portal has been added onto the Center's website.
- ii. Discussed best practices for the board.
- iii. Concentrate on quarterly focus areas at the board meetings.
- iv. Discussed board packet, timing as well as condensing the information.
- 6. Next Board Meeting | August 26, 2024 at 5:00 pm
- 7. Adjourn | A motion was made to adjourn the meeting by John McGlennon and seconded by Scott Herr and the meeting was adjourned.



Olde Towne Medical & Dental Center Executive Committee Meeting September 9, 2024 5:00pm

- I. Call to Order

 The meeting was called to order by Becca Bruhl at 4:05 pm, and a quorum was present.
- II. Roll Call

Members Present	Members Absent	Staff Members Present
Melissa Tucker	Rashid Jones	Aaron Thompson
Becca Bruhl		
Scott Herr		

- III. Approval of Minutes from Last Meeting | July 2024
 - a. July minutes were approved at the August Board meeting.
- IV. Executive Director Update | Aaron Thompson
 - a. 990 Status
 - i. Spoke with Mr. Churchman and Brianne Weidner and started the process of gathering documents for the 990.
 - ii. We will probably will need to file an extension.
 - iii. Currently have submitted all payments for the 990 and submitted all but the last payment for the audit.
 - b. Had the Town Hall with CBH at the JCC Rec Center this morning.
 - i. Debrief regarding the meeting.
- V. Committee Reports
 - a. Finance Report | Melissa Tucker
 - i. Discussed financials
 - ii. Question regarding the Ford's Colony donation. It was received in July; will this be transferred to the previous fiscal year. Decision is to move it to FY24, Jacob Cooper will submit a request that it be reallocated to FY24.
 - iii. Endowment is following financial trends.
 - iv. Discussion regarding when Period 13 will be completed.
 - v. Status of moving our accounting system.

- 1. Will meet with JCC on September 24th to get an update on where QuickBooks stands
- 2. How will this affect our audits by changing systems. Information from Munis will be backed up if any information is needed.
- 3. Timeline for change over should take place after a few quarters this fiscal year.
- b. Governance & Nominating
 - i. Continuing work on reviewing bylaws and they are almost ready to go out to the Board, there needs an update for Officers.
 - ii. This will be sent out to the board next Monday for a vote at the September Board meeting.
 - iii. Need a G&N chair as well as the possibility of Events & Outreach chair.
 - iv. Meeting flow and Board agenda is a work in progress.
 - v. Would Executive meetings and full board meetings every other month meet FQHC requirements. These needs looked into.
 - vi. Waiting until next spring to recruit Board members for those rolling off in June.
 - vii. Working on creating a Patient Advisory Committee in anticipation of rolling them into Board roles.
- c. Planning & Performance
 - i. Will meet next week, and the agenda will be sent out soon.
 - ii. Timeline for the updated strategic plan is to have it complete by the end of the year, or early next year.
- VI. Work Session
 - a. Discussed the Annual Plan that was shared with the committee.
 - i. P&P change: tracking performance done quarterly, not bi-monthly.
 - ii. P&P change: bylaws state that quality and safety should be monitored. This is something that Kendra Robinson currently does. Should this fall outside P&P and become part of the business metrics.
 - iii. Finance change: financials are presented to the Board monthly, not quarterly. Look into a better presentation of data for clarity for the Board.
 - b. Discussed content of Board meetings.
 - i. Look into integrating more Board education into meetings.

Next Meeting: November 18, 2023 | 5:00pm

VII. Adjournment | With no further business to be discussed the meeting was called to adjourn by Melissa Tucker and seconded by Scott Herr, and the meeting was adjourned.



Olde Towne Medical & Dental Center Finance Committee Meeting September 9, 2024 3:30pm

I. Call to Order

The meeting was called to order by Melissa Tucker at 3:30 pm, and a quorum was present.

II. Roll Call

Members Present	Members Absent	Staff Members Present
Melissa Tucker		Aaron Thompson
Brian Fuller		Jacob Cooper
Becca Bruhl		
Cheryl Fields		
Scott Herr		
Heather Modispaw		

- III. Approval of Minutes from Last Meeting | July 2024
 - a. The minutes were approved at the August Board of Directors meeting.
- IV. Executive Director Update | Aaron Thompson
 - a. 990 Status
 - i. Spoke with Mr. Churchman and Brianne Weidner and started the process of gathering documents for the 990.
 - ii. We will probably will need to file an extension.
 - iii. Currently have submitted all payments for the 990 and submitted all but the last payment for the audit.
 - b. Had the Town Hall with CBH at the JCC Rec Center this morning. This was a productive meeting.
- V. Reports
 - a. Finance Report | Melissa Tucker
 - i. Discussed financials
 - ii. Question regarding the Ford's Colony golf tournament donation. It was received in July; will this be transferred to the previous fiscal year. Decision is to move it to FY24, Jacob Cooper will submit a request that it be reallocated to FY24.
 - iii. Endowment is following financial trends.
 - iv. Discussion regarding when Period 13 will be completed.

- v. Status of moving our accounting system.
 - 1. We will meet with JCC on September 24th to get an update on where QuickBooks stands.
 - 2. How will this affect our audits by changing systems. Information from Munis will be backed up if any information is needed.
 - 3. Timeline for change over should take place after a few quarters this fiscal year.
- VI. Expenditure Limits
 - a. Discussed expenditure limits prior to needing Board approval based on bylaws. It was decided to keep the amount to be \$5000 or less, over that Board approval is needed.

Next Meeting: November 18, 2023 | 3:30pm

VII. Adjournment | With no further business to be discussed the meeting was called to adjourn by Brian Fuller and seconded by Scott Herr.



Old Towne Medical and Dental Care
OTMDC Strategic
Direction Update

OTMDC PROVIDER METRICS

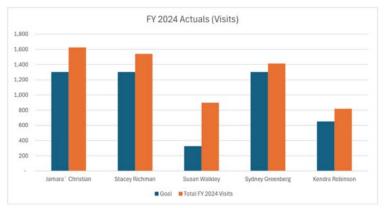
Weeks in a year	Days Worke per Week	d	Scheduled Days Off	PTO Days	Net Working Days	Goal Patients seen a day	Annual Goal per practioneer
5	2	4	12	10	186	7	1302

FY 2024 Actuals

			Telephonic		Total FY 2024
Personnel	Employee Type	Goal	Visits	FT 2024 Visits	Visits
Jamara' Christian	100%	1,302	308	1,317	1,625
Stacey Richman	100%	1,302	222	1,319	1,541
Susan Walkley	25%	326	62	836	898
Sydney Greenberg	100%	1,302	141	1,273	1,414
Kendra Robinson	50%	651	21	798	819
Total		4,883	754	5,543	6,297

FY 25 Projections

			Physical			
Personnel	Employee Type	Goal	Visits	Telephonic	Total Visits	Variance
Jamara` Christian	100%	1,302				(1,302)
Susan Walkley	100%	1,302				(1,302)
Sydney Greenberg	25%	326			-	(326)
Stacey Richman	100%	1,302			(*)	(1,302)
Kendra Robinson	50%	651			¥.	(651)
Total						1,302





PARTNERSHIP BACKGROUND

A history of collaboration since 2022



Shared Mission

Improving community health outcomes in partnership with aligned organizations.



Recent Focus

Integrated care initiative discussions, strategic priorities, FQHC "lookalike" status, and adequate resource allocations.



Valued Partnership
Achievements

Bank of America Grant

Enhanced understanding of the healthcare needs of the Greater Williamsburg Community



PARTNERSHIP BACKGROUND

OTMDC Olde Towne An extended history of collaboration since 2022.



A Strategic Decision

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"The last few years have been ones of tumult on many levels. While OTMDC and CBH are committed to the concept of integrated care together, we acknowledge that we have much trust-building and bridge building to do."

66

"Our sincere hope is that we will collaboratively progress through all the modules. But we go into this process with open minds and commit to ourselves, and to each other that, in the event we are not able to progress through the modules, we will remain mutually supportive."





Key Decision

After careful consideration, OTMDC has decided to opt out of co-location and integration discussions with CBH.



Aligning Priorities & Resources

Decision aligns with our current strategic priorities and resource allocation efforts.



Acknowledge Gained Insight

We deeply value insights gained from PCDC collaboration and look forward to learning as we grow.



Incorporating Recommendations

Committed to incorporating valuable recommendations into our existing service model.



Addressing Key Concerns

We are committed to addressing:

Bank of America Grant and Kiara Robinson's Current Position.

Olde Towne is currently using NP Kiara Robinson to assist with patient care.



PCDC Facilitation and Rendered Services

OTMDC has implemented some of the strategies born out of the PCDC partnership.



Williamsburg Health Foundation Funding

All three organizations are appreciative of the Health Foundation's funding assistance.



Our goal: Find solutions that respect all parties' investments and maintain positive relationships.





OTMDC Moving Forward

Our Commitment of Support

Our commitment of support is unwavering, and now simply requires a strategic change in direction that will allow OTMDC to be supportive while ensuring our priorities and resource allocation is in alignment.

Enhance Current Integrated Care

Actively exploring ways to enhance our current integrated care efforts within OTMDC.

Open to Alternative Collaborations

OTMDC is open to alternative collaborative projects that better align with our current focus, and still help associated partners meet their community health achievements/goals.

Supporting Community Health

Committed to supporting community health through meaningful partnerships.



OTMDC Integrated Care

Integrated Care: Stepped Care Model

The recommendations in the Olde Towne Model are presented within a stepped care framework that aims to match the needs of people with behavioral health needs and the most appropriate services, depending on the characteristics of their presenting problems and their personal and social circumstances.

Each step represents increased complexity of intervention, with higher steps assuming interventions in previous steps.

Step 1 Re	cognition of a behavioral health o	concern as presented in primary c	are setting (assessment)					
Step 2: En	nploy assessment tools: PHQ2 (Pire) GAD7 Becks Depression Inve	ositive on 1 or 2 auto kicks to PHQ entory (BDI)	9) PHQ((if these are positive, it kicks to pro	vider				
Step 3: M	edication Management & Counse	eling. Refer to Psychiatric Care Tea	m: LPC (Melvin Sneed); LCSW; PMHNP; Ba	con Street				
Step 4: If	SMI-related, or severe behavioral	problem refer to a behavioral hea	th center for consultation and further asse	ssment.				
Step 5: In	patient treatment for depression							
Who is resp	oonsible for care?	What is the focus?	What do they do?					
Step 1	GP, practice nurse	Recognition	Potential referral for higher level of assessment.					
Step 2:	Primary care team	Mild depression, anxiety, family, or marital.	Watchful waiting, guided self-help, exercise, bri psychological interventions, social support or referral.					
Step 3:	Primary care team, primary care behavioral health worker	Assess if there is any history of, or ongoing depression or anxiety, abuse, and/or neglect.	Medication, psychological interventions, social support and primary care follow-up					
Step 4	Mental health specialists, or PMHNP	Recurrent and/or atypical thought disorders & those at risk of self harm.	PMHNP would assess for behavioral health medications & potentially providing other behavioral health interventions.					
Ste	p 5: Inpatient care, crisis teams	Referrals for inpatient care & crisis team for patients risk to life, or severe self-neglect.	Medication, combined treatments, intensive treatment, and/or phycological testing.	*Refer patients to address social det affect behavioral o				

OTMDC Integrated Care

Olde Towne Medical and Dental Center (OTMDC) has developed a comprehensive Integrated Care Model to address behavioral health concerns within a primary care setting.

This model employs a stepped care approach that efficiently matches the complexity of services to the patient's specific needs, ensuring personalized and effective care.



Step 1: Initial Recognition and Assessment

At the model's foundation is the general practitioners' or practice nurses' recognition of behavioral health concerns during routine visits. This initial step focuses on assessing the patient's mental state using simple tools such as the PHQ2 and PHQ9 for depression and GAD7 for anxiety. This assessment is crucial as it helps to determine the necessity for further evaluation or immediate care interventions.



Step 2: Primary Care Interventions

Patients identified with mild symptoms of depression or anxiety are managed directly within the primary care setting. Interventions may include watchful waiting, guided self- help, physical activity, and brief psychological support. Social support is also emphasized to aid recovery. This step ensures that patients receive timely and non-invasive support, preventing the escalation of symptoms.



Step 3: Specialized Primary Care Services

For those presenting with moderate symptoms, the care escalates to include more structured psychological interventions and medication management. This level of care is still managed within the primary care framework but involves a more dedicated behavioral health worker who coordinates comprehensive support and ensures consistent follow-up.



Step 4: Specialist Mental Health Services

Patients who exhibit severe, treatment-resistant symptoms or those who are at significant risk are referred to specialized mental health services. Depending on the individual's needs, these services involve complex interventions, including advanced medication management, intensive psychological therapies, and possibly crisis intervention teams.



Step 5: Potential Referral For Inpatient or Residential Care

The highest step in the model involves inpatient care for those with critical needs, such as severe depression, requiring immediate and more intensive treatment options or crisis intervention

Conclusion and Next Steps

Olde Towne Medical & Dental Center remains dedicated to improving community health

OTMDC values its long-standing relationship with CBH and intends to proceed in a manner that respects our shared commitment to community health care.

We're open to discuss future collaboration opportunities to meet OTMDC needs that align with our current areas of focus: <u>following through with strategic priorities and resource</u> allocation.

We're thankful for everyone's understanding and continued support or each other.



Thank You

Q&A

Questions, concerns, thoughts, and feedback welcome.

Contact

Aaron Thompson, MBA, CRHCP, CMR
Executive Director | CEO
Olde Towne Medical & Dental Center
757-259-3275
aaron.thompson@jamescitycountyva.gov



Clinical Department Update: 9/18/2024

Submitted by: Kendra Robinson, FNP

Medical Department

- Vacancies:
 - PRN Medical Assistant (Vacant since 12/1/2023)
 - Nurse Practitioner/Physician Assistant (1)
 - We continue to recruit for one additional NP/PA.
 - o Interviews are scheduled for 9/26/24.

Integrated Care Update:

- o Recruitment for a psych NP or psychiatrist continues.
- Kiara Robinson, a behavioral health consultant employed by CBH, continues to provide brief interventions and care to the patients of Olde Towne.
- o Bacon Street continues to provide counseling weekly for our patients.
- Melvin Snead continues to come biweekly to provide counseling for our patients and has added a few hours a month to accommodate growing need for counseling. We are in the process of getting Mr. Snead credentialed at OTMDC so he can start seeing our insured patients as well.
- VMAP is available to providers daily.

General Updates

- WJCC Schools Vaccines: We partnered with Louisa Johnson and WJCC schools to provide vaccines for their students during the summer. On four separate occasions we donated staff time and provided all of the vaccines for <u>free</u>.
 - In total we provided 411 vaccines to 182 students.

o Reach out and Read

- The end of the year progress report was submitted and accepted for the Reach out and Read Program.
- Reach Out and Read is a national early literacy organization working directly with pediatric care providers to share the lifelong benefits that result from families reading aloud to their children every day. Participation in this program allows providers to provide each child who comes in for a well child visit with an age appropriate book, free of charge.

COVID Update

■ There has been only one positive COVID case thus far this month. Most sick patients coming in have an upper respiratory virus that is not COVID or Flu.



Business Office Departmental Update: September 2024

- The business office continues to compile and submit necessary data for the FY24 audit.
- We continue to monitor patient demographics data to ensure that we have the correct locale selection for their county of residence. This aids in maintaining the accuracy of our CSR report.
- We are working closely with Mr. Ranganai Simango of TRS Systems for the setup of our Quickbooks account. Jacob is currently meeting with Mr. Simango each week for further training in using the Quickbooks application.
- We've preemptively started gathering documents and necessary data for the FY24 Medicare Cost Report due in December.
- We are still in discussion with JCC FMS staff regarding the adjustments made on the accrual side of their
 accounting processes. The Business Office met with Ms. Modispaw in September to discuss insurance
 payment percentages and procedures to assist in the AR process.
- The business office continues to work with Ops Management and volunteers to purge old records and consolidate our storage units.
- The business office accompanied Mr. Thompson, NP Robinson and Mr. Preston to a meeting with the
 Williamsburg Health Foundation to discuss changes made to their applications and relative forms pertinent
 to the grants awarded to Olde Towne.

Date: 09/18/2024 By: Margaret "Maggie" Beamon

Medication Access Program

 For the month of August, MAP requested 180 medications on behalf of 95 patients which was valued at \$164,708.57.

Dates: 08/01/2024 – 08/31/2024										
Patient Count	Patient Count Request Count									
180	95	\$164,708.57								

o .MAP assisted 12 patients with Medicaid applications during the month of August.

Operations Manager

- We are continuing to monitor the incoming calls to the main line and adjust our workflow as needed in hopes to improve the response time for both answering the phones and responding to voicemails received.
- We are continuing to adjust the dental schedule in order to accommodate the patients who have been waiting for an appointment.
- o We have interviewed for the vacant clinical assistants and hope to select 2 candidates in the near future.



Dental Clinic

As we move into the fall season, Olde Towne dental clinic continues to provide excellent dental services to the community. For the month of August, the clinic treated 254 patients (271 visits). These dental visits usually vary from dental emergencies to consultations. There are also many patients in treatment phase that return for various dental procedures. We continue to have an upsurge in patient preauthorization's for partial dentures and full dentures.

We recently delivered a set of dentures to an elderly patient and her was very pleased with the outcome. She is looking forward to attending a wedding soon and now she feels confident to attend her special event.

VCU dental students continue to rotate in the dental clinic on Thursday and Friday. It has been a privilege to help assist these young doctors in their professional development. Olde Towne dental clinic continues to serve the needs of its patients.



Marketing & Communications Report Summary

August 9, 2024 - September 13, 2024

Events & Fundraising:

Second annual **Golf Ball Drop** was September 12, sponsored by Dominion Energy. We dropped 86 balls from the bucket truck. We had 3 winners, each based on distance from the hole, none went into the cup. The \$1,000 winner and the \$150 winner offered their winnings back to Olde Towne as donations. Total revenue \$2546.50.

The team Has decided to not do a **Casino Night** as a new fundraiser at this time.

We have decided to partner with Colonial Road Runners and host the Olde Towne **Stride For Wellness**, a 10K and 5K on November 1, 2025 as part of the Colonial Road Runners events. The race will take place at Kingsmill on the Carter's Grove Country Road. The event will feature runners, a DJ, vendors, T-shirts and medals. Potential Revenue \$10,000. More details to follow.

Impact Report is done and should be in mailboxes next week.

Susan and Michelle transferred the data for our CRM from Network For Good to **Little Green Light** as our new CRM platform for donations.

Attended the **CBH/OTMDC** update meeting.

Communications:

Email Blasts/Newsletters: September email being worked on within the new platform.

Posted content for **Social Media Posts** on all channels as well as happenings about Olde Towne along with health information for patients. Focus was on Golf Ball Drop, community outreach and services and programs for OTMDC.

Sent new emails concerning the **Golf Ball Drop** to constituents through the new platform.

Marketing & Outreach:

Olde Towne has been out in the community lately having a vendor table at both the August and September **Summer Breeze Concerts** in Colonial Williamsburg.

We attended the **RPEO Back to School Community** event which was well attended with 1,000 backpacks given away. Our table did receive quite a bit of traffic during the event.

We partnered with **Here For The Girls** and did an online virtual presentation for their cancer support group "Caring Conversations" in which our health Educator, Meiber Gonzalez offered self-care and nutrition information for cancer survivors. One of our volunteers, Cris Becerra, a fitness instructor, also did low impact Zumba for the group. We received very good feedback about the event from H4TG.



Ambassador Connections

Worked with Melissa Weaver at H4TG to connect OTMDC as a partner for Caring Conversations and incorporated the Health Educator for event.

Attended GWOM (Greater Williamsburg Outreach Mission) quarterly meeting to update about Olde Towne initiatives.

Attended Health Committee meeting to stay up to date with other Chamber member non-profits.

Continued connection with Colonial Williamsburg concerning Summer Breeze Concerts as well as with their Human Resources Department about updating their employees about OTMDC as a service provider for flu shots.

Social Media Analytics

Facebook Reach 1.6K Facebook Engagement Increase 40% Reactions Increase 57% Instagram Reach 309 Instagram Followers 332 Instagram Engagement Increase 28%

On the Calendar – Upcoming Events and Outreach Opportunities (volunteers always welcome)

October 5 – H4TG Run For The Hills Vendor Village October 11 – House of Mercy Health Fair November 7 – JCC Live Well Expo

*Michelle will be on vacation, 9/25-10/1.



Communications & Development | Susan Dunn September 2024

Development

- Events
 - o RPEO
 - Attended the Real People Education Others Back To School Event at Lafayette High School on 8/24/24. We were able to hand out a lot of information to potential patients.
 - Summer Breeze Concert Series
 - Attended our 2nd concert on 9/6/24 to promote our services as well as generate some revenue through Golf Ball Drop Sales.
 - o 2nd Annual Golf Ball Drop
 - The event took place 9/12/24 and we had a net revenue of \$2406.
- Volunteers
 - Currently having an influx of volunteer applications from students at W&M.
 - Working on having our new donor platform, that can also track other development aspects, to be able to use an online form for volunteers to enter their hours.
 - o Had volunteers attend 2 events this month to take the burden off of staff.

Communication

- Website
 - Updates on Board page to reflect new information.
 - Updates on picture gallery to reflect events.
 - Updates on events page.
- Misc
 - Social media graphics created for social media advertisements.
 - File compiling for FQHC application process.

Income-Expense:									
	<u>T</u>	ot. Aug.	<u>1</u>	Total YTD	Anı	nual Budget		<u>Variance</u>	% of annual
Revenue:									
Local Government	\$	121,800	\$	282,306	\$	626,962	\$	(344,656)	45%
Patient Revenue	\$	64,989	\$	156,148	\$	1,076,500	\$	(920,352)	15%
Less: Bad Debt "Adjustment"	\$	-	\$	-	\$	-	\$	-	0%
Less: Bad Debt Expense	\$	-	\$	-	\$	(36,000)	\$	36,000	0%
Net Patient Revenue	\$	64,989	\$	156,148	\$	1,040,500	\$	(884,352)	15%
Public Support	\$	8,275	\$	12,000	\$	427,000	\$	(415,000)	3%
Special Events-Fundraising	\$	946	\$	31,508	\$	115,000	\$	(83,492)	27%
Grants	\$	-	\$	1,155,310	\$	1,120,000	\$	35,310	103%
Misc. (inc. cash over/short)	\$		\$		\$		\$		0%
Total Revenue	\$	196,010	\$	1,637,272	\$	3,329,462	\$	(1,692,190)	49%
Expenses:									
Total Personnel	\$	235,424	\$	467,302	\$	2,999,136	\$	(2,531,834)	16%
Total Non-Personnel Exp.	\$	34,834	\$	55,621	\$	621,450	\$	(565,829)	9%
Furn/Equipment (Total)	\$	422	\$	422	\$	5,000	\$	(4,578)	8%
Total Expenses	\$	270,680	\$	523,344	\$	3,625,586	\$	(3,102,242)	14%
Net Income	\$	(74,670)	\$	1,113,928	\$	(296,124)	\$	1,410,052	-376%
Transfer From/(To) Endowment	\$	-	\$	-	\$	296,124	\$	(296,124)	0%
Net Cash Change After Trfr.	\$	(74,670)	\$	1,113,928	\$	-	\$	1,113,928	0%
Investment Fund Summary:									
			<u>(</u>	Curr. Mo.					
Beg. Balance			\$	5,563,750					
+/-: Gains/Losses, through 6/30/2024			\$	499,071					
Beg. Balance, market			\$	6,062,821					
+/-: Gains/Losses, fiscal year to date			\$	230,012					
+/-: Transfer from/(to) Operations			\$	-					
End Balance			\$	6,292,833					
Current Assets Report									
			8	8/31/2024		YTD		8/31/2023	
						<u>Diff.</u>			
Cash			\$	977,067	\$	(29,258)	\$	1,006,325	
Investments			\$	6,292,833	\$	703,064	\$	5,589,769	
SUBT.			\$	7,269,900	\$	673,806	\$	6,596,094	
Total Receivables			\$	259,894	\$	(73,099)	\$	332,993	
Less: Allow. For Doubtful Acets.			\$	(81,936)	-	44,120	\$	(126,056)	
Net Receivables			\$ \$	177,959	\$	(28,979)	_	206,937	
						. , ,			

OTMDC Finance Committee September 2024 Summary Report to the Board

Recommended Actions:

None.

<u>Financial Report</u>: attached to this report is the 'condensed' year to date financial report for the two months ending 8/31/2024. The committee met September 9, 2024 and the minutes are included in the board package.

Revenue: Total revenues from operations year to date (YTD) are \$1.637m, 49% of budget and \$292k more than July of 2023. This includes receipt of the \$900k from Williamsburg Health Foundation that was budgeted. Gross patient revenue (before deduction of bad debt expense) is \$156k, 15% of budget. Net patient revenue (after deduction of bad debt expense) the same since there has been no bad debt adjustment recorded yet. For August of 2023 net patient revenue was \$135k, so we are \$21k above the previous YTD. If net patient revenue is annualized, it comes in at 90% of the budgeted amount.

Public support revenue is at \$12k, which is 1% of budget, this is \$23k less than August of last year. The public support received to-date is from Individual and Local Organization giving. Fundraising is at 27% of budget and is made up of \$31k for the golf tournament, should get moved back to the prior year during the year end and audit adjustments. Grant income is at 103% of budget, see comment above about full receipt of the budgeted Williamsburg Health Foundation grant.

Expenses: With two months or 16.67% of the year recorded, total expenses are \$523k, 14% of budget. Personnel costs are at 16% of budget, with other (non-salary) operating costs at 9% of budget.

Net income/<loss> from operations (revenues less expenses) YTD is \$1.114m vs. budgeted net loss of <\$296k>. For August 2023 YTD the net income was \$893k. For the fiscal year ending 6/30/2024, the unaudited net income/(loss) was <\$440k> and the audited amount for operations was <\$399>.

The <u>endowment fund</u> is at \$6.293m as of August 31, 2024. For the fiscal year ending 6/30/2024 the fund had a market gain of \$499k over the cost of \$5.564m. In the first two months of this fiscal year the was an additional market gain of \$230k.

<u>Current Assets</u>: Cash balance is \$977k, a decrease of \$29k from August 31, 2023. Receivables (net of allowance for doubtful accounts) are \$178k, a decrease of \$29k from the August 2023 balance.

Other business/activities:

The next finance committee meeting is scheduled for November 18, 2024 at 3:30 pm.

Respectfully submitted, Melissa Tucker, Chair, Finance Committee

OTMDC Annual Board Workplan

ltem	Responsibility	January	February	March	April	Мау	June	July	August	September	October	November	December	As Required	Notes
1.0 Strategic Plan and Organizational Performance															,
,	P&P													X	
1.2 Approve strategic plan	Board												Χ		
1.3 Track performance against annual and strategic (3 year) plans 1.4 Approve and periodically update quality assurance/quality improvement policies	P&P	Х			Х			Х			Х			X	
1.5 Monitor quality and safety indicators	P&P	Χ			Х			Х			Χ				
1.6 Review progress on specific strategic directions	Board	Х			Χ			Х			Χ				
1.7 Review organizational performance targets	Board	Х			Χ			Χ			Χ				
2.0 Finance, Audit and Fundraising															
2.1 Prepare annual budget	Finance			Χ	Χ	Χ									
2.2 Approve annual budget	Board					[X]	Χ								
2.3 Approve audited financial statements	Board													Χ	on auditors' d
2.4 Review financial statements, including operating & balance sheet performance 2.5 Review financial statements and/or summary metrics 2.6 Review financial policies and procedures 2.7 Review fund development plan and refresh	Finance Finance Finance	X X	X	X X	X X	X	X	X	X	X X	X X	X	X	X	
3.0 CEO / Executive Director															
3.1 Receive report on operations from CEO/ED	Board	Х	Х	Х	Χ	Х	Х	Х	Х	Χ	Χ	Х	Х		
3.2 Coordinate annual performance appraisal for CEO	Exec								Х						
3.3 Approve performance appraisal process for CEO/ED	Board								Х						
3.4 Complete CEO/ED performance appraisal	Board									Х					
4.0 Board Affairs: Goals, Objectives, Workplans															,
4.1 Recommend annual goals and objectives for the Board 4.2 Recommend annual Committee workplans	Exec Exec							X X							
4.3 Approve annual Board & committee workplans	Board									Х					
4.4 Executive Committee meetings	Exec	Х		Х		Х		Х		Х		Х			
4.5 Appoint chairs and members to Board committees	Board							Х							
4.6 Receive reports from committees	Board	Х	Х	Х	Χ	Х	Х	Х	Х	Х	Х	Х	Х		

OTMDC Annual Board Workplan

ltem	Responsibility	January	February	March	April	Мау	June	ylıly	August	September	October	November	December	As Required	Notes
5.0 Board Affairs: Governance & Nominating															,
5.1 Review governance policies	G&N	Х												X	
5.2 Review bylaws; ensure compliance with applicable rules; recommend changes as needed	G&N	Х												Х	
5.3 Recruit and nominate Board members	G&N				X	Χ									
5.4 Recommend Directors for reappointment	G&N				X	Χ									
5.5 Conduct Board annual self-evaluation	G&N									Χ					
5.6 Approve Board members	Board						Х								
5.7 Approve Board officers	Board							X							
5.8 Review Board evaluation survey results	Board										Χ				
5.9 Board education sessions (schedule and topics in annual workplan)	Board													Х	
6.0 Community Relations and Engagement															
6.1 Review relationship with key stakeholders	Board					Χ									