

**County of Solano
Community Healthcare Board
Regular Meeting**

October 16, 2024
12:00 pm – 2:00 pm
2101 Courage Drive, Fairfield, CA 94533
Room Location: Multi-Purpose Room

AGENDA

1) CALL TO ORDER – 12:00 PM

- a) Welcome
- b) Roll Call

2) APPROVAL OF THE October 16, 2024 AGENDA

3) PUBLIC COMMENT

This is the opportunity for the Public to address the Board on a matter not listed on the Agenda, but it must be within the subject matter jurisdiction of the Board. If you would like to make a comment, please announce your name and the topic you wish to comment and limit comments to three (3) minutes.

REGULAR CALENDAR

4) APPROVAL OF MINUTES

Approval of the September 18, 2024, draft meeting minutes.

5) CLINIC OPERATIONS REPORTS

Written Report submitted?

- | | |
|---|-----|
| a) Staffing Update – Natasha Hamilton | YES |
| b) Credentialing Update – Desiree Bodiford | YES |
| c) HRSA Grants Update(s) – Noelle Soto | YES |
| d) Grievances/Compliments – Rebecca Cronk | YES |
| e) H&SS Compliance – Krista McBride | YES |
| f) Finance & Revenue Cycle Management – Nina Delmendo | YES |
| g) Referrals – Cynthia Coutee | YES |
| h) OCHIN EPIC Update(s) – Dona Weissenfels | NO |
| i) QI Update – Han Yoon | YES |
| j) FHS Clinic Q-Matic Stats – Noelle Soto | YES |

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- 6) CHB FOLLOW-UP TO CLINIC QUALITY AND OPERATIONAL REPORTS**
Review, Follow-up & Action: CHB will provide feedback on reports, request additional information on quality and clinic operations reports & follow up on these requests.
- a) Finance Committee Budget Workshop – Status Update – Nina Delmendo
- 7) HRSA PROJECT OFFICER REPORT**
- a) Health Center HRSA Project Officer Update – Dona Weissenfels
 - i) Health Center Activities – Internal and External Update
 - ii) Strategic Plan Report Update
- 8) BUSINESS GOVERNANCE**
- a) Review and consider approval of the Quarterly Financial Report – Nina Delmendo
 - i) **ACTION ITEM:** The Board will consider approval of the Quarterly Financial Report
 - b) Review and consider approval of the Quarterly Quality Improvement Report – Han Yoon
 - i) **ACTION ITEM:** The Board will consider approval of the Quarterly Quality Improvement Report
- 9) DISCUSSION**
- a) Board development, assessment, on-boarding training – Dona Weissenfels
- 10) BOARD MEMBER COMMENTS**
- 11) ADJOURN: TO THE COMMUNITY HEALTHCARE BOARD MEETING OF:**
- DATE: November 20, 2024
 - TIME: 12:00 pm – 2:00 pm
 - LOCATION: Multi-Purpose Room
2201 Courage Drive
Fairfield, CA 94533



County of Solano
Community Healthcare Board
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REGULAR GOVERNING BOARD MEETING MINUTES

Wednesday, September 18, 2024
In Person Meeting

Members Present:

At Roll Call: Michael Brown, Ruth Forney, Gerald Hase, Deborah Hillman, Anthony Lofton, Seema Mirza, Don O' Conner and Brandon Wirth.

Members Absent: Etta Cooper, Marbeya Ellis, Charla Griffith, Rovina Jones, Tracee Stacy and Sandra Whaley.

Staff Present:

Cherry Violanda, Cynthia Coutee, Dona Weissenfels, Dr. Bela Matyas, Dr. Reza Rajabian, Gerald Huber, Han Yoon, Kelly Welsh, Krista McBride, Natasha Hamilton, Nina Delmendo, Noelle Soto, Pierce Leavell, Rebecca Cronk, Valerie Flores, Whitney Hunter, Danielle Seguerre-Seymour, Katreena Dotson and Annabelle Sanchez.

1) Call to Order- 12:09 PM

- a) Welcome
- b) Roll Call

2) Approval of the September 18, 2024 Agenda

Discussion: Nina Delmendo requested to remove "Finance Committee Workshop Status Update" from Discussion (Agenda Item 9b), and present under Clinic Operations Reports, Finance & Revenue Cycle Management (Agenda Item 5f).

Motion: To accept the agenda item changes and approve the September 18, 2024 Agenda.

Motion by: Deborah Hillman and seconded by Don O'Conner.

Ayes: Michael Brown, Ruth Forney, Gerald Hase, Deborah Hillman, Anthony Lofton, Seema Mirza, Don O' Conner and Brandon Wirth.

Nays: None.

Abstain: None.

Motion Carried.

3) Public Comment

None.

Regular Calendar

4) Approval of Minutes

Approval of the August 30, 2024, draft Minutes.



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Discussion: Ruth Forney mentioned that Board Members who motioned the Action Item(s) at the August 30th meeting, were not included in the “Aye” votes. Brandon Wirth asked Kelly Welsh, County Counsel, if the minutes need to be revised prior the Board accepting the document. Kelly suggested to draft a redline version and keep it in the records. She explained that the Board Members could file a motion to accept the August 30, 2024 draft minutes, acknowledging that the minutes will be amended. Dr. Bela Matyas confirmed that there were four (4) Action Items that required changes.

Motion: To amend August 30, 2024, draft meeting minutes by adding the Board Members, who motioned and who seconded the four (4) Action Items, to the list of “Aye” votes.

Motion by: Ruth Forney and seconded by Deborah Hillman.

Ayes: Michael Brown, Ruth Forney, Gerald Hase, Deborah Hillman, Anthony Lofton, Seema Mirza and Don O’ Conner.

Nays: None.

Abstain: Brandon Wirth.

Motion Carried.

5) Clinic Operations Reports

a) **Staffing Update** — Natasha Hamilton (*Please reference the “FHS Staffing Update – September 18, 2024”*)

- Natasha Hamilton stated that there was no new information since the last meeting on August 30, 2024. She reported that there was one (1) Clinic Registered Nurse Senior, six (6) Medical Assistants, one (1) Medical Assistant Lead and two (2) Nurse Practitioners currently in background.
- There were no questions from the Board.

b) **Credentialing Update** — Cherry Violanda – (*Please reference the “FHS Credentialing, Provider Enrollment and Sanctioning Screening Activities – Status Report – September 2024”*)

- Cherry Violanda mentioned that there were no exclusions found during the reporting period.
- Ruth Forney asked if the number of screenings consisted of new hires. Dr. Bela Matyas clarified that the report reflected both new hires and current employees.

c) **HRSA Grant Update(s)** — Noelle Soto

- Noelle Soto mentioned that there was no update since the last report (*“Health Resources and Services Administration (HRSA) Grant Updates as of August 21, 2024”*) presented at the August 30, 2024 meeting.
- There were no questions from the Board.

d) **Grievances/Compliments** — Rebecca Cronk (*Please reference the “Grievance Reports, April-December 2023 & January–August 2024” and “Grievance Category Definitions”*)

- Rebecca Cronk reported eight (8) grievances in the “Scheduling” category, which was expected with the Epic transition. Appointments had been limited, but “Severity Rating” remained below 2%.
- There were no questions from the Board.



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- e) **H&SS Compliance** — Krista McBride (*“FHS Compliance Incident Report Tracking, August 1- August 31, 2024”*)
- Krista McBride reported that there were no “Breach/Information Security” incidents filed. She stated that one (1) “Billing and Collections” incident was reported, as well as an anonymous “Complaint” filed.
 - Brandon Wirth asked what a “Billing” incident would entail, and if it was related to a staff member. Dr. Matyas gave a billing complaint scenario (a patient might be billed for more than expected).
- f) **Finance & Revenue Cycle Management** — Nina Delmendo (*Please reference “Operations Report – Finance August 2024: “Solano County Expenditure and Revenue Report FHS – August 2024” and “Revenue Cycle Reports: Total Encounters through August 31, 2024; Total Qualified Encounters (Medical, Dental, Mental Health) FY 2024/25; Total Unbilled Encounters as of August 31, 2024”*)
FY 2023/24 Finance Report
- Nina explained that, as of August, 17% of the year had passed and nothing in the report was a concern.
 - There were no questions from the Board.
- Revenue Cycle Reports
- Nina reported that, due to the Epic transition, data was not yet available to provide an update on the encounters but will provide an update at the October 16, 2024 meeting. She also mentioned that the Billing Team was working hard to clear “Unbilled Encounters” in the NextGen system.
 - Brandon Wirth asked if there were concerns about unmet revenue. Dona Weissenfels explained that Family Health Services (FHS) accounted for revenue shortfalls during the project, overestimating downtime.
 - Ruth Forney inquired about the 40 “Unbilled Encounters” that were reported. Nina stated that the reported total was as of September 9th, and that Fiscal would be continuously working with FHS and its providers to close the gap. Dr. Bela Matyas explained that if a provider doesn’t submit an encounter within three (3) days, it shows as “overdue”, but it’s normal for a provider to fall behind on submissions and catch up afterwards. He also stated that 40 “Unbilled Encounters” was a normal range. Kelly Welsh mentioned that she had been assisting with contracts and amendments for the transfer from NextGen to Epic that would impact positively.
- Budget Workshop (moved from **Discussion - Agenda Item 9b**)
- Nina informed the Board that she will work with the CHB Executive Committee to coordinate workshop dates. However, Nina explained that due to FY25-26 budget deadlines (project, automation improvement, vehicle, and position requests), she would proceed with the meeting and report the outcome to the Board.
 - Kelly Welsh reminded the Board that the Finance Committee Meetings are County staff created, so less than a quorum of six (6) CHB Board Members can participant in the meeting to avoid violation of the Brown Act. Board Members that do attend are permitted to take notes and listen only. Fiscal workshop can be held specifically for the CHB, so long as the Brown Act rules are followed, and noticing required. Ruth Forney suggested to hold a Board workshop for new CHB Members, before a regularly scheduled CHB Meeting. Brandon Wirth stated that the suggestion would be discussed at the next Executive Committee Meeting.
- g) **Referrals Report** — Cynthia Coutee (*Please reference the “Family Health Services Referrals – Time Period August 2024”*)



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- Cynthia Coutee stated that during the reporting period, Family Health Services (FHS) had 915 referrals. As of September 18th, there were 24 referrals reported, six (6) of which were only communications. Cynthia wished to acknowledge FHS Medical Assistants Ariana Harrison, Lakeytha Driskell, Sandra Trujillo-Correa, Aleli Carla Gomez, Alma DeCalderon, Ashley Robinson-Thomas, and Celia Sanchez for their significant work of processing the referrals before Epic Go-Live.
 - Dona Weissenfels wanted to also acknowledge Cynthia and Natasha Hamilton for working Saturdays, supporting the staff, addressing shortfalls, as well as completing the Plan-Do-Study-Act (PDSA) quality improvement projects.
 - Kelly Welsh announced that under CALaim, Kaiser will soon have a Medi-Cal program in the Partnership Healthplan (PHC) network. Dr. Bela Matyas stated that 95% of FHS clinics' patients were currently on Medi-Cal. PHC was the only insurance health plan, but starting January 2025, Kaiser will be a 2nd insurance for FHS clients. Gerald Huber added that Health & Social Services' goal is to provide good care to our patients, and that the insurance changes will not affect the CHB Board.
 - There were no questions from the Board.
- h) **OCHIN EPIC Update(s)** —Dona Weissenfels (*Please reference the "OCHIN EPIC EHR Implementation 2024: Implementation Dashboard – September 2024 and Project Milestones / Highlights"*)
- Dona Weissenfels stated that Epic Go-Live was next week and thanked the FHS Leadership Staff for their dedication and efforts. She also reported that the clinics would operate at a 50% schedule.
 - Dona mentioned that the clinics were prepping for Dress Rehearsal on September 23, 2024. Board Members Ruth Forney, Michael Brown, Anthony Lofton, Don O' Conner and Brandon Wirth volunteered to participate as "patients".
 - There were no questions from the Board.
- i) **QI Update** – Han Yoon
- Brandon Wirth stated that he attended the September 13th Quality Improvement Meeting and encouraged Board Members to participate in future meetings.
 - Han reported that there was no update since the August 30, 2024 CHB Meeting. The focus for his team was to continue to work on QA/QI measures, as well as training and prepping for the Epic transition.
 - There were no questions from the Board.
- j) **FHS Clinic Q-Matic Stats** — Noelle Soto
- Noelle Soto had nothing to report since the last CHB Meeting.
 - There were no questions from the Board.
- 6) CHB Follow-up to Clinic Quality and Operational Reports**
Review, Follow-up & Action: CHB will provide feedback on reports, request additional information on quality and clinic operations reports & follow up on these requests.
- There were no follow-up requests from the Board.
- 7) HRSA Project Officer Report**
- a) Health Center HRSA Project Officer Update – Dona Weissenfels
- i) Health Center Activities – Internal and External Update
- Internal News:
- There was no news to report.



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External News:

- Dona Weissenfels reported that Wipfli Consultant Firm was conducting interviews and clinic visits during the week of September 16th. The purpose of the visit was to assess the sustainability in H&SS' health care systems. She explained that the firm reviewed areas such as Fiscal, clinic scheduling and productivity; identifying opportunities and improve money flow into the clinics. As part of California Department of Health Care Services (DHCS), a report on improvement recommendations will be provided in three to four weeks.
 - Dona also stated that FHS has radiology and OBGYN referral agreements with Northbay Health. Due to Northbay Health experiencing cyber attacks last Spring, sending and receiving invoices had been impacted. Dona reassured that she is meeting with Northbay Health regularly to address and resolve the matter.
 - Dona reported that with the Epic transition, FHS will soon be introducing DAX Copilot to help with automated clinical documentation, eliminating manual transcribing. She explained that it will improve scheduling flexibility, encounter rates, etc.
 - Dona distributed the *"Facktor Health Organizational Assessment 2022/2023" Memo* to the Board Members at the September 18th meeting. Dona explained that Facktor Health performed an assessment in June 2023. The report provided recommendations, which were outlined in the provided Memo. This will be further discussed at the October 16, 2024 CHB meeting.
- ii) Strategic Plan Report Update – Dona Weissenfels (*Please reference the "Strategic Plan Report – Strategic Plan July 1, 2022 – June 30, 2025, Report Period: August – September 2024, Date of Report: September 16, 2024"*)
- Dona Weissenfels reminded the Board that she had been providing monthly progress of the Strategic Plan. She will be addressing the work plan at the October 16, 2024 meeting. If any modifications are required, it will be added as an Action Item on the November CHB Meeting Agenda.

8) Business Governance

- a) Consider selection, approval, and purchase of the online Federally Qualified Health Center Health Center (FQHC) Board Governance Training Series, "Health Center Boards: Navigating Legal Considerations", offered by Feldesman Training Solutions.
- i) **Action Item:** The Board will consider approval of purchasing this online Federally Qualified Health Center (HQHC) Board Governance Training Series, "Health Center Boards: Navigating Legal Considerations", offered by Feldesman Training Solutions. Training sessions are open to Board Members and supporting staff.

Discussion:

- Brandon Wirth stated that the Action Item was previously presented at the August 30, 2024 meeting, but the language needed to be revised; to request the purchase of the online training series.
- Dr. Bela Matyas requested to remove second "Health Center" (**8a**) and replace "HQHC" with "FQHC" (**8i**).
- Ruth Forney asked if the amount of \$1700 was for each Board Member to access the training. Dona Weissenfels and Dr. Bela Matyas confirmed that the entire training series cost \$1700 and would allow access to all Board Members and Staff.



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Motion: To remove the second “Health Center” (**8a**) and replace “HQHC” with “FQHC” (**8i**) and approve the purchase of the online Federally Qualified Health Center (FQHC) Board Governance Training Series, “Health Center Boards: Navigating Legal Considerations”, offered by Feldesman Training Solutions.

Motion by: Michael Brown and seconded by Anthony Lofton.

Ayes: Michael Brown, Ruth Forney, Gerald Hase, Deborah Hillman, Anthony Lofton, Seema Mirza, Don O’ Conner and Brandon Wirth.

Nays: None.

Abstain: None.

Motion carried.

b) Consider approval of Board Member Application received from Annabelle Sanchez and appoint applicant as an FHS Community Healthcare Board Member.

i) **Action Item:** The Board will consider approval of Board Member Application received from Annabelle Sanchez and appoint applicant as an FHS Community Healthcare Board Member.

Discussion:

- Brandon Wirth thanked Annabelle Sanchez for her application.
- Annabelle Sanchez introduced herself and explained that she worked as a nurse. She wanted to help improve health care services and make an impact in the community. Annabelle stated that she has not previously served on a board but hoped to learn her role as a CHB Board Member.

Motion: To approve Board Member Application received from Annabelle Sanchez and appoint applicant as an FHS Community Healthcare Board Member.

Motion by: Deborah Hillman and seconded by Ruth Forney.

Ayes: Michael Brown, Ruth Forney, Gerald Hase, Deborah Hillman, Anthony Lofton, Seema Mirza, Don O’ Conner and Brandon Wirth.

Nays: None.

Abstain: None.

Motion carried.



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9) Discussion

- a) Board Member Self-Assessment – Report – Brandon Wirth (*Please reference “Community Healthcare Board Self-Assessment – April 2024” report and “Community Healthcare Board Self-Assessment” form*)
 - Brandon Wirth reviewed the Self-Assessment form and results with the Board. He stated that if the standards outlined in the assessment are not met, it is ok to be honest and document accordingly. He explained that the Self-Assessment is a tool to identify the purpose of the Board and help serve the community better.
 - Annabelle Sanchez asked if the Self-Assessment is discussed at the CHB Meetings. Brandon clarified that each Board Member completes the survey annually. Dona Weissenfels added that the CHB Executive Committee will be summarizing the results in written form (versus the *Community Healthcare Board Self-Assessment – April 2024* graph that was included in the agenda packet.) She also mentioned that results will be presented at the October 16, 2024 meeting.
 - Kelly Welsh stated that her work for the Board should be added to the assessment. If more legal support is needed, she encouraged the Board to address it.
- b) Finance Committee Workshop Status Update – Nina Delmendo
 - Discussion item moved to **Finance & Revenue Cycle Management (Agenda Item 5f)**.

10) Board Member Comments

- Seema Mirza and Deborah Hillman asked, with the Epic transition, if there will be an online patient portal. Dr. Bela Matyas and Dona Weissenfels confirmed that with Epic, there will be a portal for patients, as well as electronic notifications. Online scheduling could be an added patient option, in the future.
- Ruth Forney asked if FHS would be inviting Congressman John Garamendi to the rollout. Dona stated that she is hoping to hold an All-Staff Meeting in December 2024, and extend an invite to all stakeholders.
- Annabelle Sanchez asked if the Epic transition would impact staffing shortages. Dona explained that although FHS still struggles with staffing, model of care and organizing care in the clinics, automating tasks with Epic will impact quality positively. Dr. Bela Matyas stated that with the efficiency of Epic, it will reduce workload for some, but may create more volume for others (referral information, lab results, etc.)
- Deborah Hillman asked if the clinics would be assisting patients with navigating the online portal. Dona mentioned that FHS applied for an extended hours grant, which will allow the Vallejo clinic to be operational one (1) Saturday a month. Patient seminars could be a developing project, under the grant.
- Brandon Wirth requested that, when the technology is available, the Board would consider implementing hybrid Board Meetings. Kelly Welsh explained that a memo was created to address post-COVID information and guidelines for hybrid meeting options. She encouraged all Board Members to attend in-person but acknowledged that situations may occur that could justify a Board Member to attend remotely. Kelly stated that she can provide information at the October or November CHB Meeting and discuss the options.



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11) Adjourn: To the Community Healthcare Board Meeting of:

DATE: October 16, 2024
TIME: 12:00 PM — 2:00 PM
Location: Multi-Purpose Room
2101 Courage Drive
Fairfield, CA 94533

The Meeting was adjourned at 1:44 PM.

Handouts in the Agenda Packet:

- CHB August 30, 2024, draft Meeting Minutes
- Family Health Services – Community Healthcare Board 2024 Annual Calendar
- Clinic Operations Report – FHS Staffing Update – September 18, 2024
- Clinic Operations Report – FHS Credentialing, Provider Enrollment and Sanctioning Screening Activities – Status Report – September 2024
- Clinic Operations Report – Grievance Reports, April-December 2023 & January– August 2024” and Grievance Category Definitions
- Clinic Operations Report – FHS Compliance Incident Report Tracking, August 1- August 31, 2024
- Clinic Operations Report – Finance August 2024 – Solano County Expenditure and Revenue Report FHS – August 2024
- Clinic Operations Report – Revenue Cycle Reports: Total Encounters through August 31, 2024; Total Qualified Encounters (Medical, Dental, Mental Health) FY 2024/25; Total Unbilled Encounters as of August 31, 2024
- Clinic Operations Report – Family Health Services Referrals – Time Period August 2024
- Clinic Operations Report – OCHIN EPIC EHR Implementation 2024: Implementation Dashboard – September 2024 and Project Milestones / Highlights
- Strategic Plan Report – Strategic Plan July 1, 2022 – June 30, 2025, Report Period: August – September 2024, Date of Report: September 16, 2024
- Governance Training Series for Health Center Boards: Navigating Legal Considerations, sponsored by Feldesman Training Solutions
- Community Healthcare Board Self-Assessment – April 2024 report
- Community Healthcare Board Self-Assessment form

Documents received at the meeting:

- Facktor Health Organizational Assessment 2022/2023 Memo

Community Healthcare Board

5) Clinic Operations Reports:

a) Staffing Update

Community Health Care Board

Family Health Services Staffing Update

CHB Meeting Date: October 16, 2024

Number of Active Candidates - County

*Medical Assistant - 5
*Physician Assistant - 1

Number of Active Candidates - Touro

*D.O. - 1
*Physician Assistant - 1

Number of Active Candidates - Locum Tenens

Number of Active Candidates - Volunteer

Open County Vacancies

Clinic Physician (Board Cert) - 1
Clinic Physician (Board Cert) **Extra Help** - 1
Clinic Registered Nurse (Part-time) - 1
Dental Assistant (Registered) - 1
Dentist - 2
Health Education Specialist **Extra Help** - 1
Medical Assistant - 7
Medical Records Technician, Sr **Extra Help** - 2
Mental Health Clinician (Licensed) - 2
Nurse Practitioner/Physician Assistant - 3
Nurse Practitioner/Physician Assistant **Extra Help** - 1

Interviews in Progress

*Clinic Registered Nurse - TBD
*Mental Health Clinician - TBD

Expected New Hires + Recently Hired Staff

*Clinic Registered Nurse, Sr. - Promotion Effective: 09/29/2014
*Medical Assistant - Voluntary Demotion Effective: 09/15/2024
*Medical Assistant Lead - Promotion Effective: 09/29/2024
*Physician Assistant - Start Date: 10/15/2024

Vacancies/Departures

Community Healthcare Board

5) Clinic Operations Reports:

b) Credentialing Update

FHS Community Healthcare Board – Status Report October 2024
FHS Credentialing, Provider Enrollment, and Sanction Screening Activities

Excluded Parties/Sanction Screening: 136

| Month | Sanction Screening Number Screened/Verified | Sanction Screening Number Ineligible |
|---|---|--------------------------------------|
| September 2024 TOURO/LOCUMS | Touro/Locum Providers: 17 | Exclusions Found: 0 |
| September 2024 County – H&SS Employees/Candidates | H&SS Employees: 119 | Exclusions Found: 0 |
| Totals | TOTAL SCREENED: 136 | Exclusions Found: 0 |

Credentialing: 5 Re-Credentialing: 5

| Month | Number of Candidates' Credentials Verifications - (Re-)Started - | Number of Candidates' Partnership Provider Enrollments - Submitted for Partnership Approval - |
|---|---|---|
| September 2024 TOURO | <u>Active/Open: 1</u> Clinic Physician: 1 | Submitted to Partnership: -0- Approved by Partnership: -0- Pending Submission to Partnership: 1 |
| September 2024 LOCUM | <u>Active/Open: 1</u> Nurse Practitioner - 1 | Submitted to Partnership: -1- Approved by Partnership: -0- Pending Submission to Partnership: 0 |
| September 2024 County H&SS Employees/ Candidates | <u>Active/Open: 8</u> Medical Assistant – 1 Clinic Registered Nurse – 1 Nurse Practitioner – 1 Clinic Physician - 1 Physician Assistant - 2 Dentist - 2 | Submitted to Partnership: -0- Approved by Partnership: -0- Pending Submission to Partnership: 3 |

Provider and Site Enrollment and Re-Credentialing/Re-Validation:

Partnership – NEW Provider Enrollments

New Provider Enrollments: ACTIVE - Pending Submission: 4 (1 Touro CP, 1 County NP, 2 County PA)
 Submitted: 0 Pending Approval: 1
 Approved: 0

Partnership – Provider Re-Credentialing

Provider Re-Credentialing: Submitted: 0 Pending Approval: 0 Pending Submission: 0
 Approved: 1

Denti-Cal – Provider Revalidations

None During this Reporting Period

NPI Program/Site Revalidations – CMS (N = +/- 38)

None During this Reporting Period

Technical Assistance – PAVE (Medi-Cal) and PECOS (Medicare) Sites: Upon Request

Community Healthcare Board

5) Clinic Operations Reports:

c) HRSA Grants Update(s)

Clinic Operations Report: Health Resources and Services Administration (HRSA) Grant Updates

- Family Health Services (FHS) is preparing the:
 - *Fiscal Year (FY) 2025 Health Center Program (HCP) Service Area Competition (SAC) Competing Continuation* application (H80CS04218) for submission by the deadlines of: Phase 1 on October 15th and Phase 2 on November 14th. Applicable documents will be presented to the CHB for review and approval on a later date.
 - Noncompeting Continuation (NCC) Progress Report for the *FY 2026 Ryan White HIV/AIDS Program (RWHAP) Part C* grant (H76HA00823) pending its availability. Deadline estimated as November 15th. Applicable documents will be presented to the CHB for review and approval on a later date.

Community Healthcare Board

5) Clinic Operations Reports:

d) Grievances/Compliments

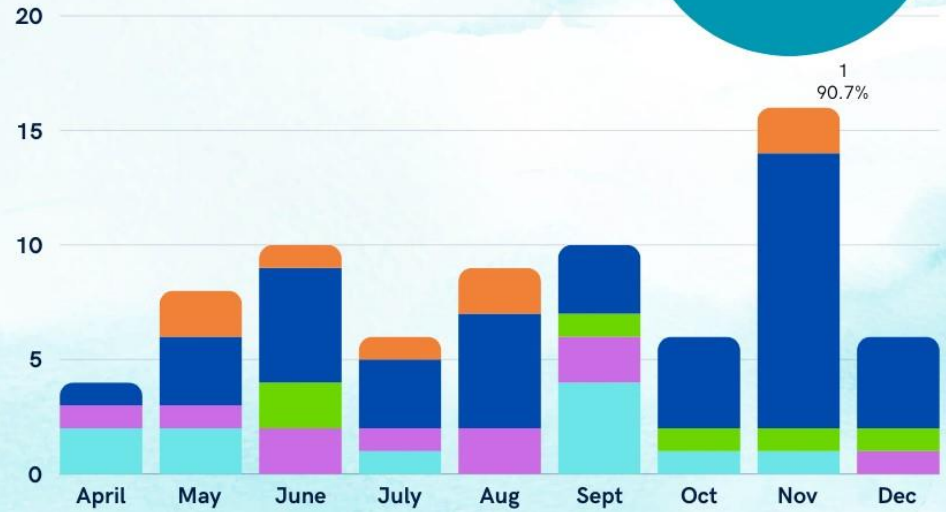
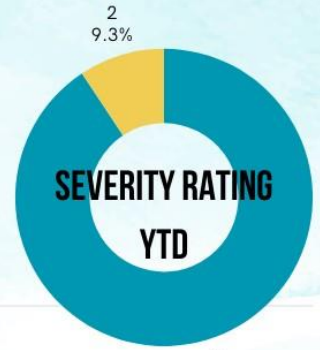
GRIEVANCE REPORT 2024

- Quality of Care
- Referrals
- Privacy
- Access to Care
- Safety
- Scheduling
- Other



GRIEVANCE REPORT 2023

- Quality of Care
- Referrals
- Privacy
- Access to Care
- Safety
- Scheduling
- Other



Grievance Category Definitions

- **Quality of Care**
 - Complaints that allege concerns about substandard care from providers, which may include but are not limited to, misdiagnosis, poor bedside manner, negligent treatment, delay in treatment, under prescribing, and/or inappropriate prescribing.
- **Access to Care/Timeliness**
 - Complaints that allege concerns about the affordability of care, follow-up completed in a timely manner, availability of providers to treat patients, and providers located in relatively close proximity to patients.
 - **Scheduling**
 - Sub-category under Access to Care/Timeliness that deals with complaints associated with the patient’s ability to schedule services in a timely manner.
 - **Referrals**
 - Sub-category under Access to Care/Timeliness that deals with complaints associated with the ordering, processing, and follow-up of patient referrals.
- **Safety**
 - Complaints that allege concerns about errors, adverse effects, and preventable injuries to patients associated with their health care.
- **Privacy**
 - Complaints that allege concerns about personal space (physical privacy), personal data (informational privacy), personal choices including cultural and religious affiliations (decisional privacy), and personal relationships with family members and other intimates (associational privacy).
- **Other**
 - Complaints that do not fall into any of the above categories.

Grievance Severity Rating

| Level | Description | Definition | Example |
|-------|---|---|--|
| 1 | <ul style="list-style-type: none"> • No harm • Inconvenience | <ul style="list-style-type: none"> • The event effected the patient but did not cause physical harm. • Processes appropriate, patient disagreed. | <ul style="list-style-type: none"> • A pain management contract process with which the patient disagrees. • An employee displayed rudeness to a patient. • Patient experienced long hold time on the phone. |
| 2 | <ul style="list-style-type: none"> • Temporary harm (mild or moderate) | <ul style="list-style-type: none"> • Caused temporary harm to the patient, resulting in the need for additional treatment. • Caused a delay in time-sensitive care. | <ul style="list-style-type: none"> • A delay to a patient in getting prescription medications. • A lack of follow-up requested following a procedure. |
| 3 | <ul style="list-style-type: none"> • Significant harm | <ul style="list-style-type: none"> • Significant harm to the patient occurred, up to and including death. | <ul style="list-style-type: none"> • A patient received a misdiagnosis. • A patient experienced an unanticipated complication or infection. • A patient’s oncology referral was not processed. |

Community Healthcare Board

5) Clinic Operations Reports:

e) H&SS Compliance

**Family Health Services (FHS) Incident Report Tracking
September 1 to September 30, 2024**

| FHS Department (if applicable) | Compliance Breach | Description (Basic Information/Activity) | Total Received |
|---------------------------------------|--------------------------------------|---|--|
| FF Adult Clinic | Breach Report / Information Security | Clinic documents routed to incorrect printer | 1 |
| | | | Total Privacy & Security Incidents September 2024 = 1 |

| FHS Department (if applicable) | Category/(ies) | Description (Basic Information/Activity) | Total Received |
|---------------------------------------|-----------------------|---|--|
| | Safety, Workforce | Employee reports feeling harassed by employee | 1 |
| | Safety, Client | Client fall resulting in minor injury | 1 |
| | Safety, Workforce | Employee in verbal altercation with client | 1 |
| | | | Total Other Incidents Reported September 2024 = 3 |

Community Healthcare Board

5) Clinic Operations Reports:

f) Finance & Revenue Cycle Management

OPERATIONS REPORT - FINANCE
September 2024

**SOLANO COUNTY
EXPENDITURE AND REVENUE REPORT
FAMILY HEALTH SERVICES
SEPTEMBER 2024**

| CATEGORY DESCRIPTION | FY2024/25 WORKING BUDGET | FY2024/25 YTD ACTUALS | YTD ACTUALS as a % of WORKING BUDGET | |
|----------------------|--------------------------------|--------------------------|--|--|
|----------------------|--------------------------------|--------------------------|--|--|

| | |
|---------------------|------------------|
| EXPENDITURES | Notations |
|---------------------|------------------|

Salaries & Benefits

| | | | | |
|--|-------------------|------------------|---------------|--|
| Salaries - Regular | 16,306,079 | 2,495,134 | 15% | |
| Salaries - Extra Help | 17,000 | 5,905 | 35% | |
| Salaries - OT/Callback/Standby | 69,874 | 25,571 | 37% | |
| Staffing costs from other divisions (net amount) | 133,070 | 56 | 0% | |
| Benefits | 10,561,338 | 1,435,194 | 14% | |
| Accrued Leave CTO Payoff | 20,000 | 3,845 | 19% | |
| Salary Savings | (2,789,326) | - | 0% | |
| Salaries & Benefits Total | 24,318,035 | 3,965,706 | 16.31% | |

Services & Supplies

| | | | | |
|---|-----------|--------|-----|---|
| Office Expense and Supplies | 172,363 | 20,451 | 12% | Drinking water, household expenses, and trash services. |
| Communications | 138,331 | 16,639 | 12% | |
| Insurance | 1,000,703 | - | 0% | Budget includes cost of Liability Insurance and Malpractice Insurance. >These charges will originate from another County Department. >Medical Malpractice will post at year end and are expected to be budgeted amount. |
| Equipment - Purchases, Leases & Maintenance | 73,780 | 18,306 | 25% | Q-Matic. BioRad. Caltronics. Steris.Life Technologies. Smile Business. Multi Function Devices Copiers/Printers. |
| Mileage, Fuel and Fleet | 45,503 | 7,200 | 16% | Monthly charges for vehicles assigned to County Departments; personal mileage. |

**SOLANO COUNTY
EXPENDITURE AND REVENUE REPORT
FAMILY HEALTH SERVICES
SEPTEMBER 2024**

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|---|--------------------------------|--------------------------|--|---|
| EXPENDITURES | | | | Notations |
| Services & Supplies (continued) | | | | |
| Buildings - Maintenance, Improvements, Rent & Utilities | 258,458 | 45,305 | 18% | PG&E & water services. |
| Drugs, Pharmaceuticals, Medical and Dental Supplies | 623,605 | 97,131 | 16% | Henry Schein. McKesson. TheraCom. |
| Controlled Assets & Computer Related Items | 151,940 | 4,118 | 3% | Budget is primarily refresh computers and equipment funded with Capital Grant carryover funding. |
| Medical/Dental Services | 207,600 | 16,590 | 8% | JP's Dental Lab, Quest Lab Services, Solano Diagnostics, and Solano Public Health Lab charges. |
| Contracted and Other Professional Services | 1,019,565 | 62,294 | 6% | Budget includes the following contracts: >Allied Security >Simi Group >Waystar/Trizetto (electronic claims management) >Forvis (Medicare Cost Report) >Stericycle (medical waste disposal) >Gebbs (Medical Coding Consultant) >Factor Consultants >UCH Solutions (Recruitment services) |
| DoIT | 2,152,500 | 354,130 | 16% | |
| Software & Maintenance or Support | 690,031 | 377,782 | 55% | Budget includes the following: >Next Gen >OCHIN >Orchard Software |
| Professional Licenses & Memberships | 27,871 | 2,448 | 9% | |
| Education, Training, In-State Travel, Out of State Travel | 25,290 | 983 | 4% | Registration fees for NACHC Community Health Institute & Expo Conference |
| Other | 69,758 | 6,933 | 10% | >Uniform allowance >Fees & Permits (credit card processing, licensing and storage) >Livescans |
| Services & Supplies Total | 6,657,298 | 1,030,311 | 15% | |

**SOLANO COUNTY
EXPENDITURE AND REVENUE REPORT
FAMILY HEALTH SERVICES
SEPTEMBER 2024**

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|----------------------|--------------------------------|--------------------------|--|--|
|----------------------|--------------------------------|--------------------------|--|--|

| EXPENDITURES | Notations |
|--------------|-----------|
|--------------|-----------|

Other Charges

| | | | | |
|---|----------------|---------------|-----------|---|
| Interfund Services - Professional | 712,944 | 26,588 | 4% | County related charges for Sheriff services, building and grounds maintenance and custodial services. |
| Interfund Services - Accounting & Audit | - | - | 0% | |
| Interfund Services - Other | 64,285 | 1,477 | 2% | Maintenance materials, small projects and labor. |
| Contributions - Non County Agencies | 15,000 | - | 0% | Registration fees for NACHC Community Health Institute & Expo Conference (two board members). |
| Other Charges Total | 792,229 | 28,065 | 4% | |

Contracts/Client Support

| | | | | |
|---------------------------------------|------------------|----------------|----------|--|
| Contracted Direct Services | 1,492,000 | 116,938 | 0 | Budget includes the following contracts: >Barton & Associates (locum services) >Children's Choice (dental services) >Touro University (providers) |
| Client Support | 22,700 | 5,684 | 0 | Client support transportation costs. |
| Contracts/Client Support Total | 1,514,700 | 122,622 | 0 | |

Equipment

| | | | | |
|------------------------|---------------|---------------|----------|--|
| Equipment | 49,604 | 44,604 | 1 | |
| Equipment Total | 49,604 | 44,604 | 1 | |

Administration Costs

| | | | | |
|-----------------------------------|------------------|----------|----------|--|
| H&SS Administration | 2,957,878 | - | - | |
| Countywide Administration | 1,312,262 | - | - | |
| Administration Costs Total | 4,270,140 | - | - | |

| | | | | |
|---------------------------|-------------------|------------------|------------|--|
| TOTAL EXPENDITURES | 37,602,006 | 5,191,308 | 14% | |
|---------------------------|-------------------|------------------|------------|--|

**SOLANO COUNTY
EXPENDITURE AND REVENUE REPORT
FAMILY HEALTH SERVICES
SEPTEMBER 2024**

| CATEGORY DESCRIPTION | FY2024/25 WORKING BUDGET | FY2024/25 YTD ACTUALS | YTD ACTUALS as a % of WORKING BUDGET | |
|----------------------|--------------------------------|--------------------------|--|--|
|----------------------|--------------------------------|--------------------------|--|--|

| | |
|-----------------|------------------|
| REVENUES | Notations |
|-----------------|------------------|

Payer Revenues

| | | | | |
|-----------------------------|-------------------|------------------|------------|--|
| Payer Revenues | 23,355,466 | 2,997,648 | 13% | Revenues from Medi-Cal, Partnership Capitation, Medicare and Private Pay |
| Payer Revenues Total | 23,355,466 | 2,997,648 | 13% | |

Federal/State Revenues

| | | | | |
|---|------------------|---------------|-----------|--|
| 1991 Realignment (Underinsured/Uninsured/PH Services) | 1,386,906 | - | 0% | |
| Federal Direct - COVID (one time funding) | 100,405 | - | 0% | Rollover for HRSA Capital Grant funds |
| Federal Grants | 2,047,990 | 3,900 | 0% | Budget includes: >CHC Base grant >RWC |
| Federal Other | 56,608 | - | 0% | \$1M Congressional earmark |
| American Rescue Plan Act (ARPA) | 1,276,497 | - | 0% | ARPA funding for OCHIN EHR conversion |
| Other Revenue | 1,617,600 | 12,304 | 1% | Budget primarily includes QIP revenues, but also includes patient care payment recoveries. |
| Program Revenues Total | 6,486,006 | 16,204 | 0% | |

| | | | | |
|---|-------------------|------------------|--------------|--|
| TOTAL PAYER AND PROGRAM REVENUES | 29,841,472 | 3,013,852 | 10.1% | |
|---|-------------------|------------------|--------------|--|

| TOTAL EXPENDITURES vs TOTAL REVENUES | | | | Notations |
|--------------------------------------|------------------|------------------|------------|-----------|
| TOTAL EXPENDITURES | 37,602,006 | 5,191,308 | 14% | |
| TOTAL REVENUES | 29,841,472 | 3,013,852 | 10% | |
| DEFICIT (SURPLUS) | 7,760,534 | 2,177,455 | 28% | |
| County General Fund | 4,708,209 | - | | |
| DEFICIT (SURPLUS) after CGF** | 3,052,325 | 2,177,455 | | |

***Deficit to be funded with 1991 Realignment and/or County General Fund*

REVENUE CYCLE REPORTS

September 2024

REVENUE CYCLE REPORTS

Due to the implementation of OCHIN EPIC Go Live date of 9/24/24, encounter data is not available for this meeting. Revenue cycle reports are expected to resume at the November 2024 CHC Board Meeting.

Community Healthcare Board

5) Clinic Operations Reports:

g) Referrals



Time Period September 2024

Referrals 557 -Nextgen 156- Epic =713

Adult-601 Pediatrics-112

| Adult Specialty Referrals | Ordered | Peds Specialty Referrals | Ordered |
|----------------------------------|----------------|---------------------------------|----------------|
| Cardiology | 40 | ABA Therapy | 9 |
| Dermatology | 39 | Audiology | 9 |
| Gastroenterology | 57 | Dermatology | 10 |
| Ophthalmology | 61 | Nutrition | 7 |
| Orthopedic Surgery | 34 | Urology | 6 |
| | 231 | | 41 |
| Total to Specialties: 272 | | | |

The above report reflects the total number of referrals for the month of September 2024. It also includes referrals that were entered in Epic 9/24-9/30, 156.

The total number of referrals in the box (Nextgen) as of Sunday September 22nd was zero. At that time all referrals were completed prior to transfer into to Epic 9/23/24.

As of 10/7 there were 380 referrals in the box 305 of those referrals are duplicates. Remaining referrals to process are 75.

As we anticipated there are some trouble spots that we are currently working through. One issue being address is a number of duplicates. I am also meeting weekly with the Referral team to address any problems that need to be worked out. Also, with this change we will work on updating the standard operating procedure (SOP) for referral processing and follow-up.

Respectfully Submitted,

Cynthia Coutee

Cynthia Coutee, Clinic Manager-Vacaville

Community Healthcare Board

5) Clinic Operations Reports:

h) OCHIN EPIC Update(s)

NO REPORT

Community Healthcare Board

5) Clinic Operations Reports:

i) Quality Improvement Update

**Primary Care Provider Quality Improvement Program (PCP QIP) Report
Solano County, Health & Social Services, Family Health Services
As of October 1, 2024**

TABLE OF CONTENTS

The below information reflects critical components related to Risk Management & Quality Improvement activities for Family Health Services:

- I. Clinical Quality

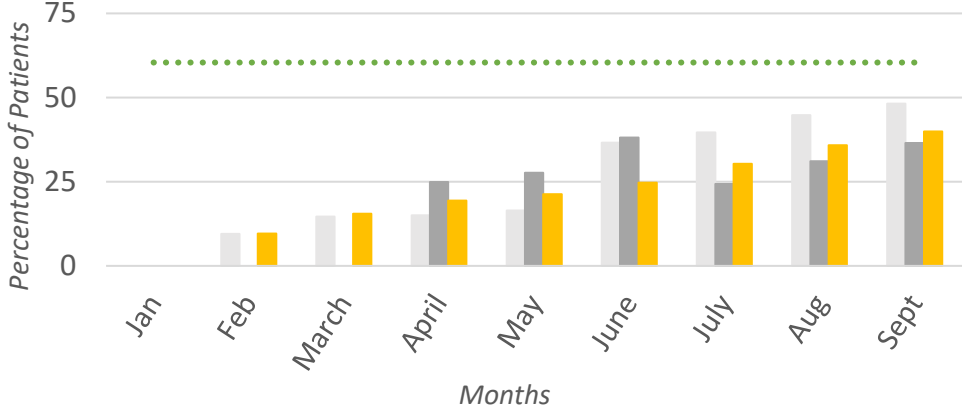
I. CLINICAL QUALITY

Terms Defined

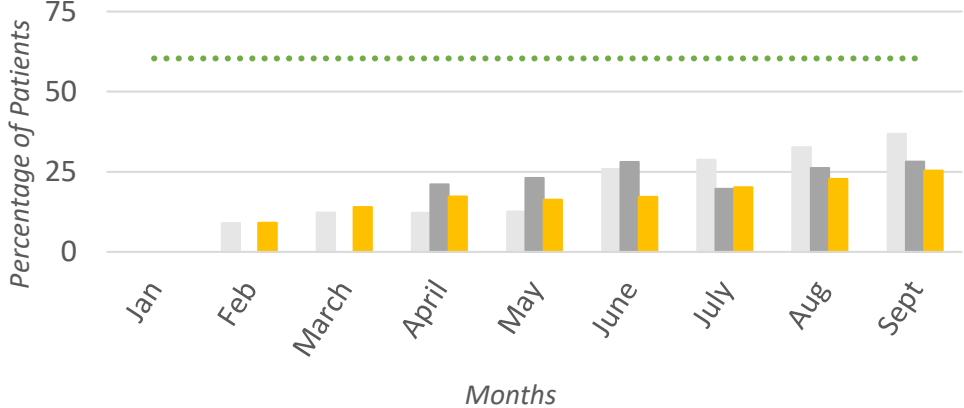
Primary Care Provider Quality Improvement Program (PCP QIP)- financial incentive program from Partnership HealthPlan of California to primary care providers for meeting specific performance thresholds. PCP QIP clinical measures look only at data for patients with Partnership HealthPlan of California insurance plans during calendar year 2024.

PCP QIP Diabetes HbA1c Good Control

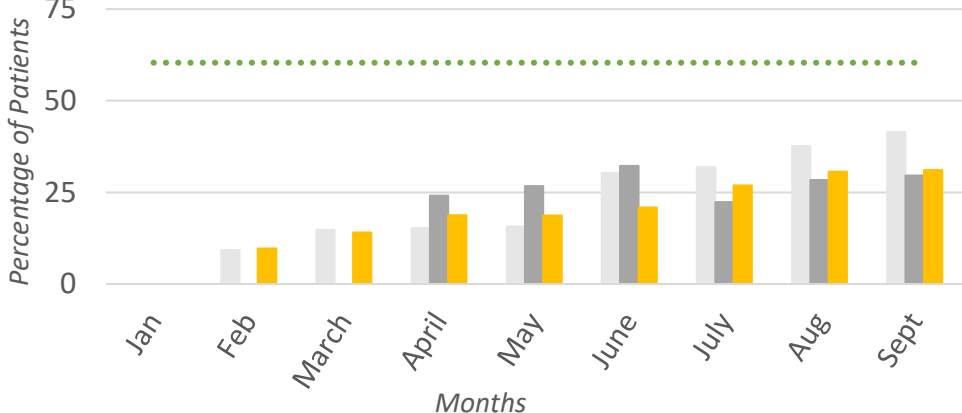
Fairfield Adult Clinic



Vallejo Clinic



Vacaville Clinic

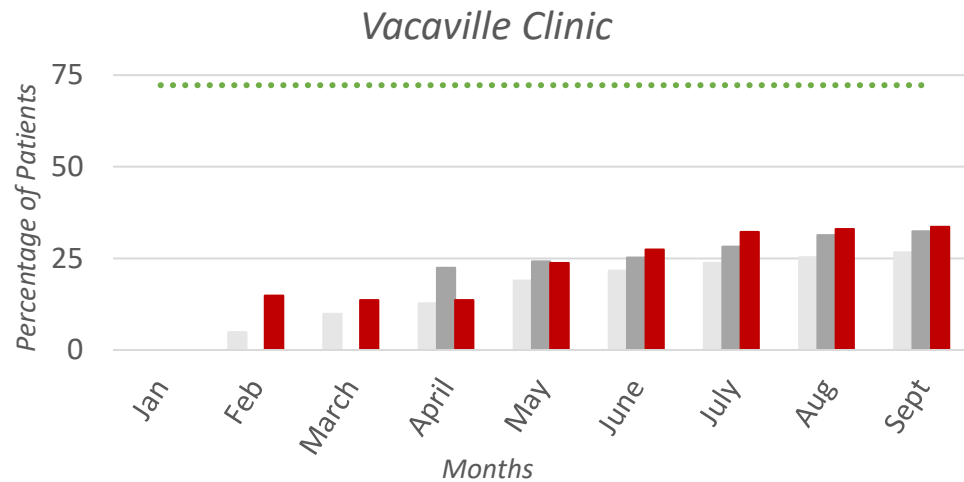
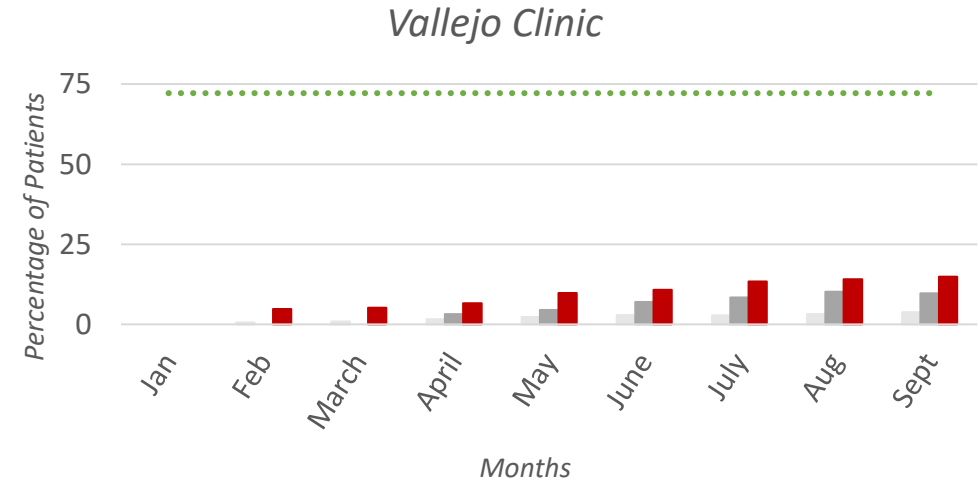
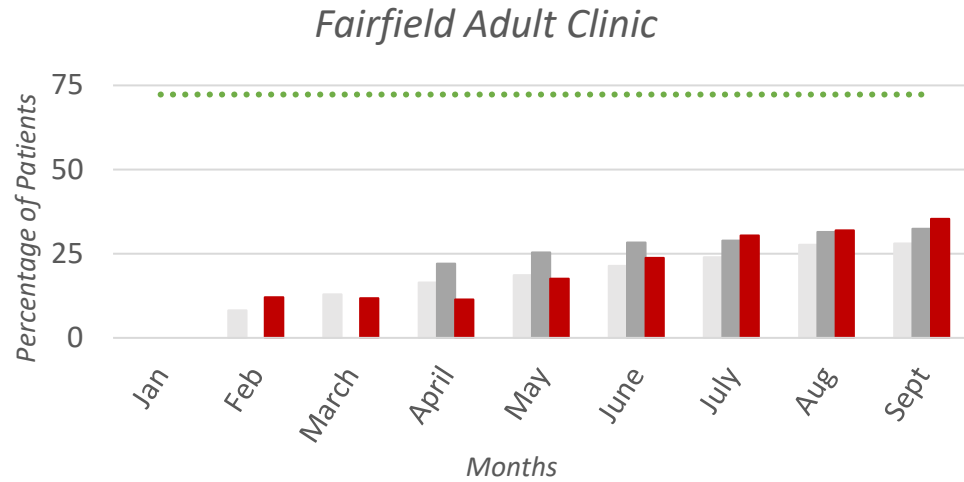


| Site | Current Score | Number of Patients Needed to Meet Target | Full Point Target Score (90 th Percentile) |
|-----------------|---------------|--|---|
| Fairfield Adult | 39.95% | 83 | 60.34% |
| Vallejo | 25.36% | 246 | |
| Vacaville | 31.07% | 104 | |



Note: 1st manual upload of HbA1c readings in October 2024

PCP QIP Controlling High Blood Pressure



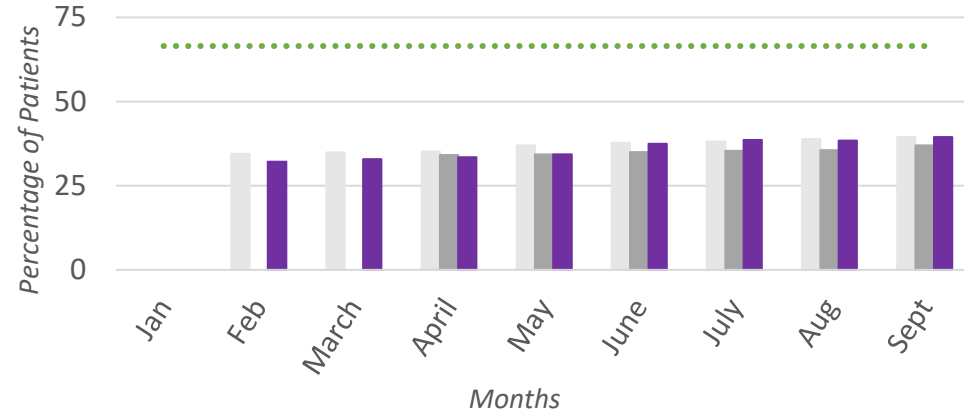
| Site | Current Score | Number of Patients Needed to Meet Target | Full Point Target Score (90 th Percentile) |
|-----------------|---------------|--|---|
| Fairfield Adult | 35.33% | 117 | 72.22% |
| Vallejo | 14.88% | 343 | |
| Vacaville | 33.63% | 88 | |



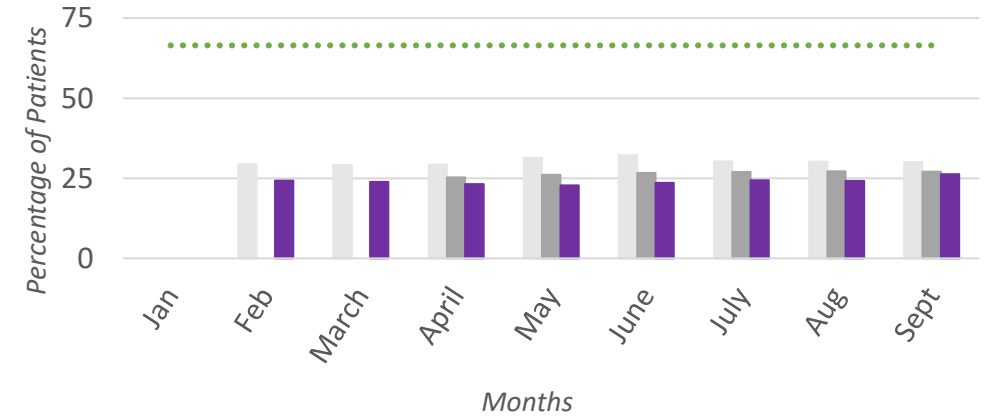
Note: 1st manual upload of blood pressure readings in October 2024

PCP QIP Cervical Cancer Screening

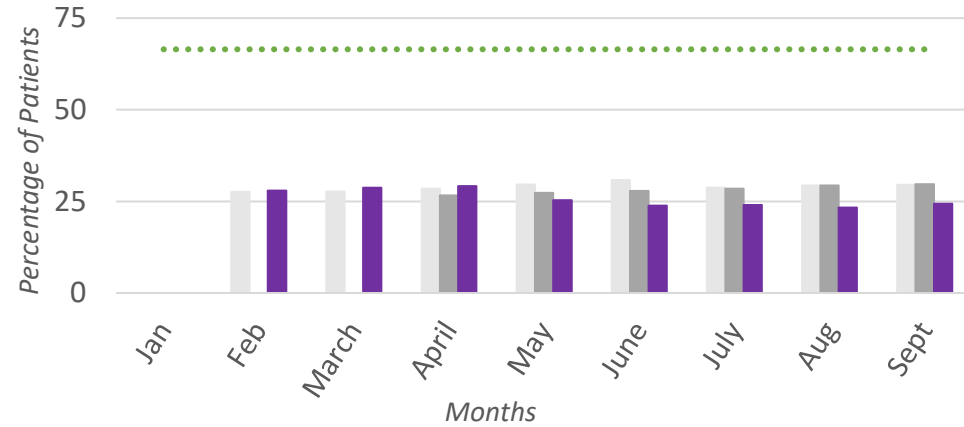
Fairfield Adult Clinic



Vallejo Clinic



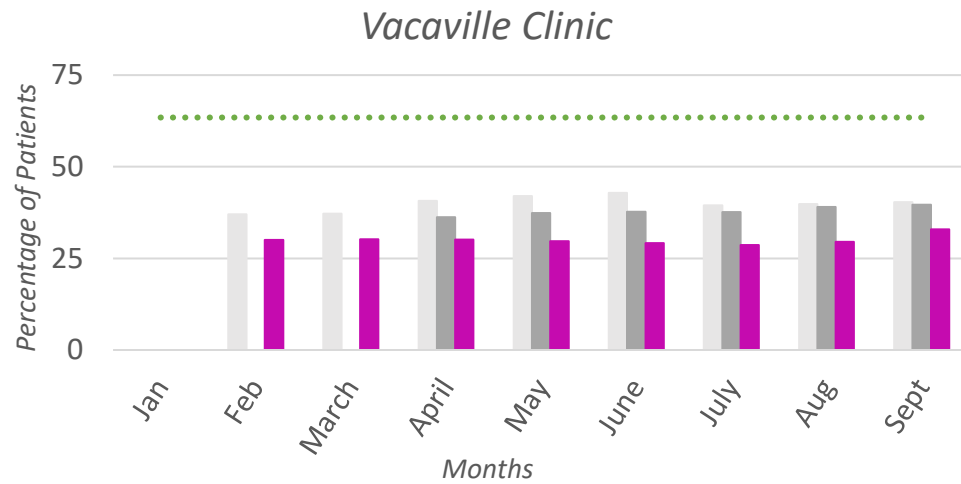
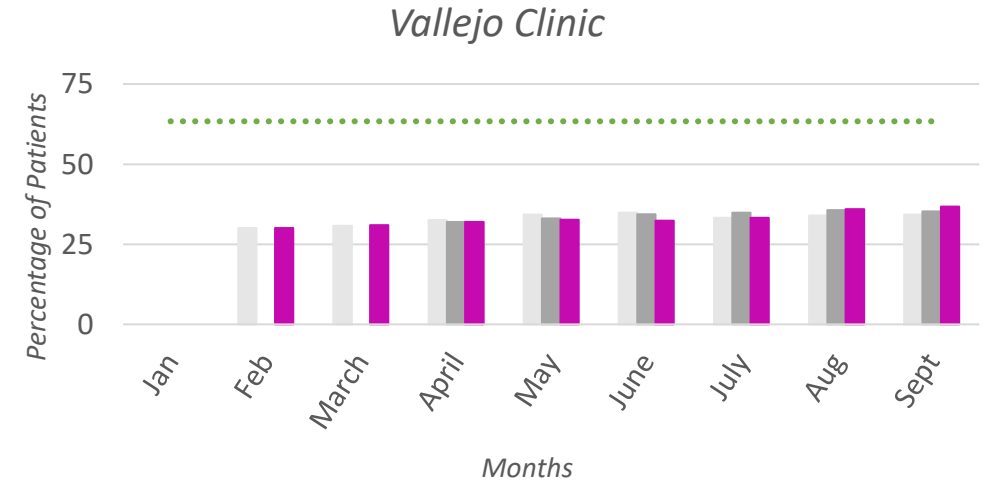
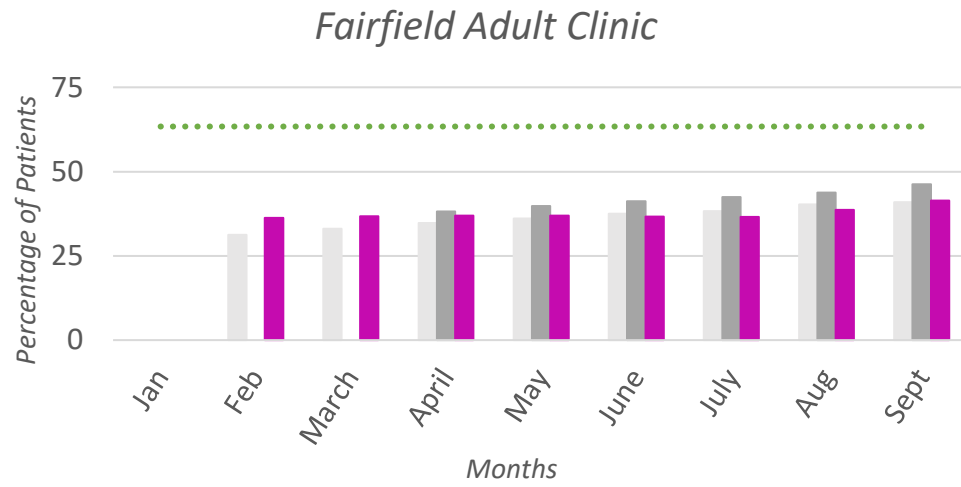
Vacaville Clinic



| Site | Current Score | Number of Patients Needed to Meet Target | Full Point Target Score (90 th Percentile) |
|-----------------|---------------|--|---|
| Fairfield Adult | 39.40% | 398 | 66.48% |
| Vallejo | 26.32% | 1,649 | |
| Vacaville | 24.33% | 739 | |

2022 2023 2024 Target

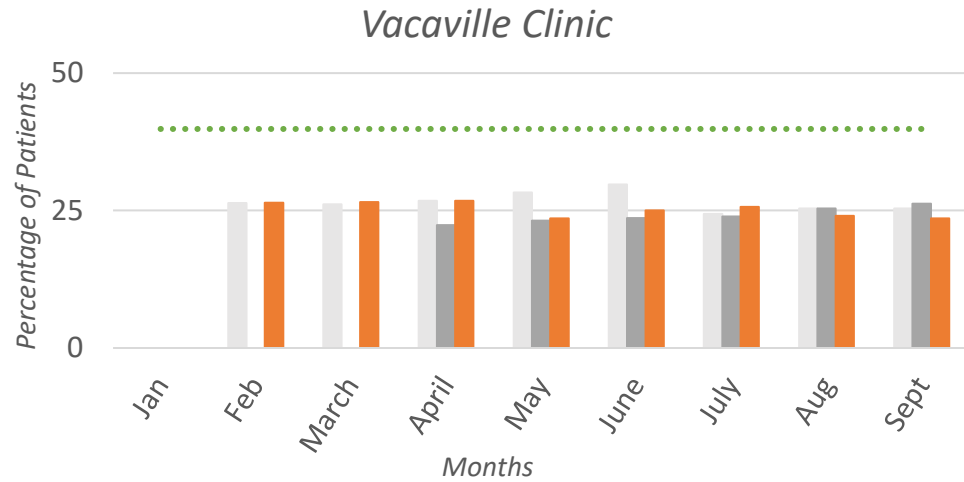
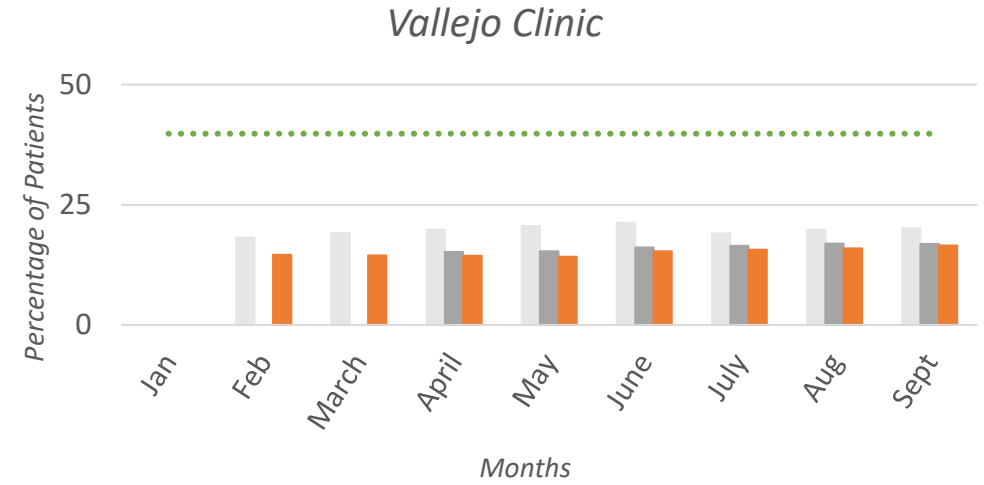
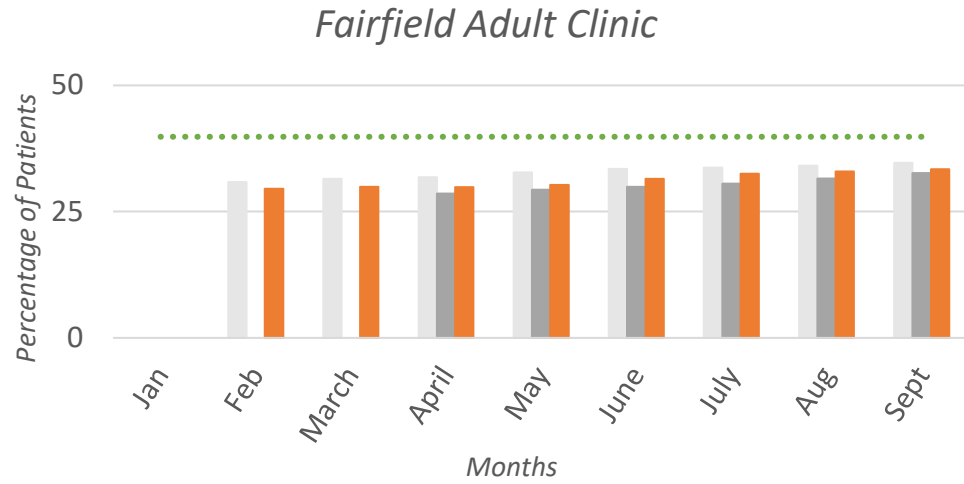
PCP QIP Breast Cancer Screening



| Site | Current Score | Number of Patients Needed to Meet Target | Full Point Target Score (90 th Percentile) |
|-----------------|---------------|--|---|
| Fairfield Adult | 41.44% | 107 | 63.37% |
| Vallejo | 36.78% | 170 | |
| Vacaville | 32.91% | 97 | |



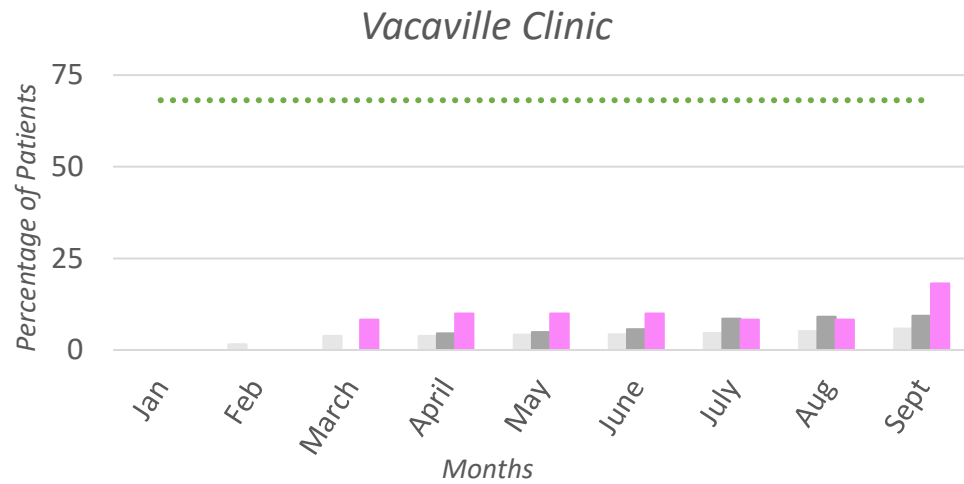
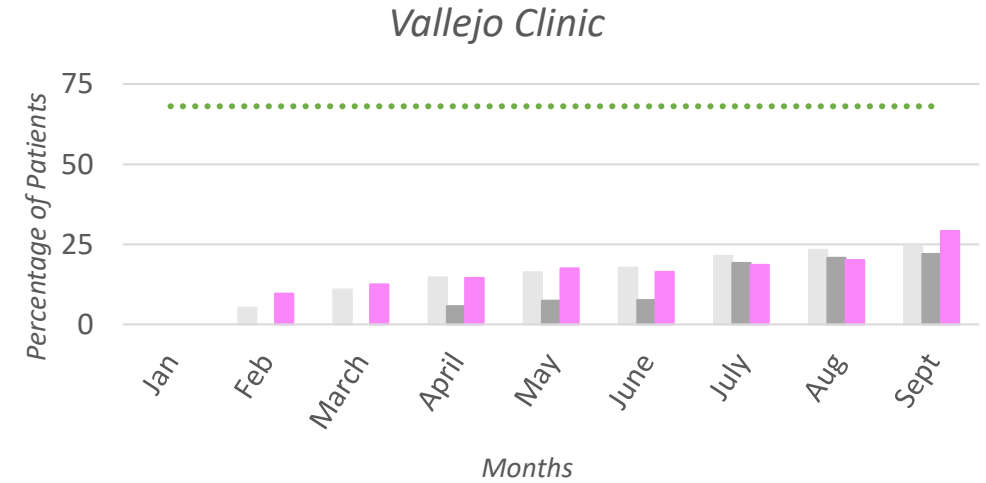
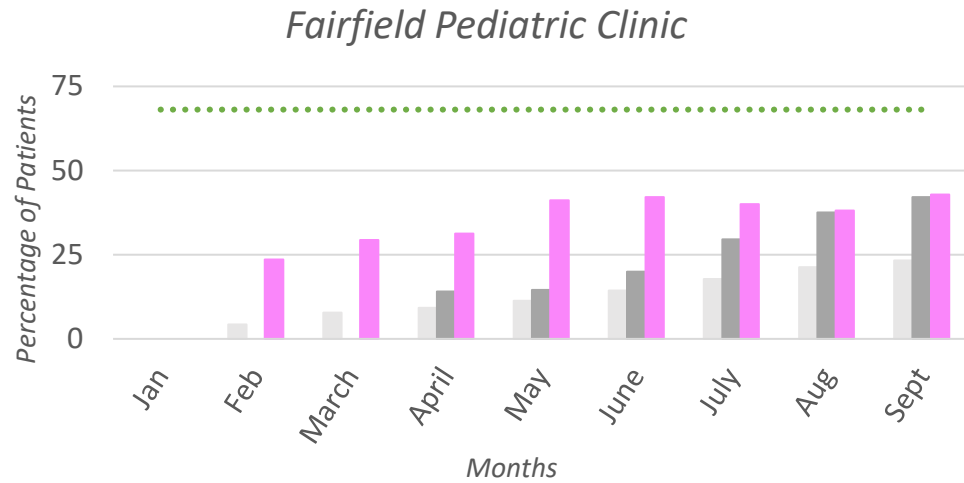
PCP QIP Colorectal Cancer Screening



| Site | Current Score | Number of Patients Needed to Meet Target | Full Point Target Score (50 th Percentile) |
|-----------------|---------------|--|---|
| Fairfield Adult | 33.38% | 87 | 39.81% |
| Vallejo | 16.50% | 740 | |
| Vacaville | 23.58% | 229 | |



PCP QIP Well Child First 15 Months

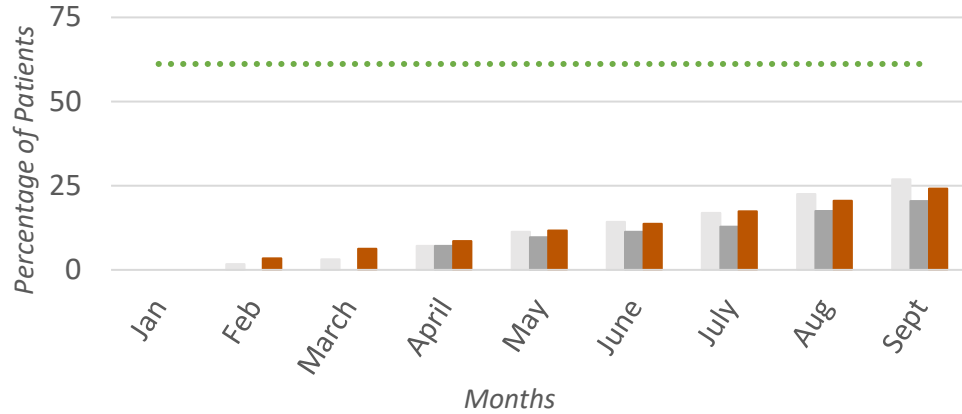


| Site | Current Score | Number of Patients Needed to Meet Target | Full Point Target Score (90 th Percentile) |
|----------------------|---------------|--|---|
| Fairfield Pediatrics | 42.86% | 6 | 68.09% |
| Vallejo | 29.24% | 67 | |
| Vacaville | 18.18% | 6 | |

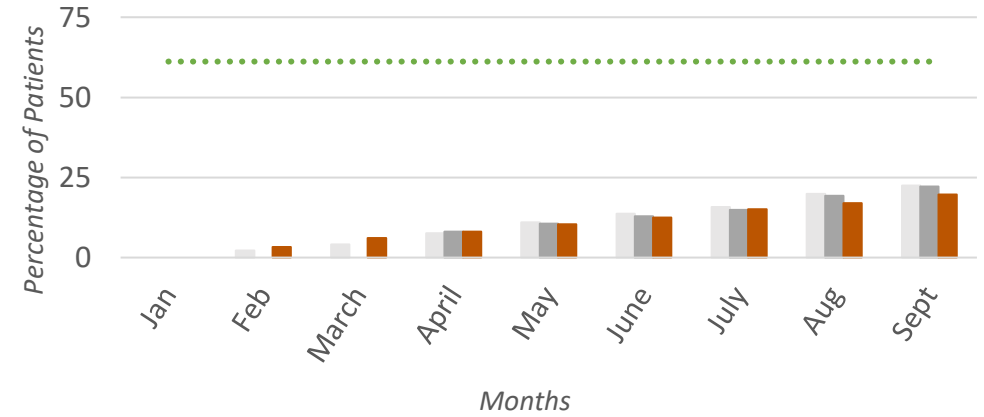


PCP QIP Child and Adolescent Well Care Visits

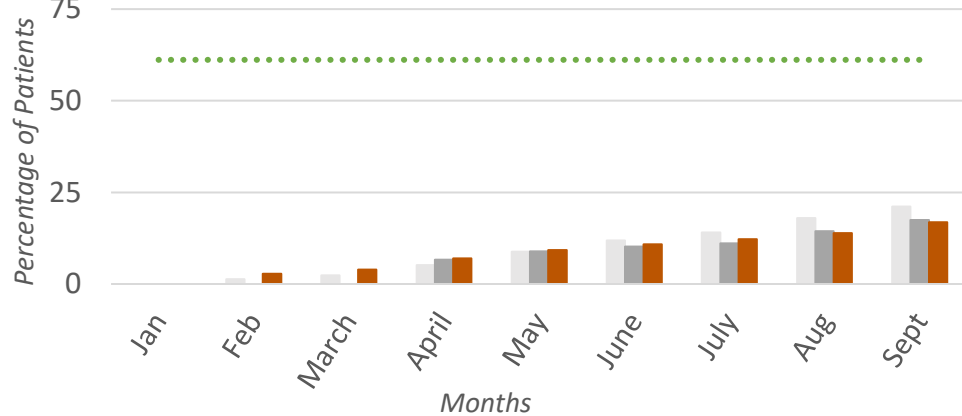
Fairfield Pediatric Clinic



Vallejo Clinic



Vacaville Clinic

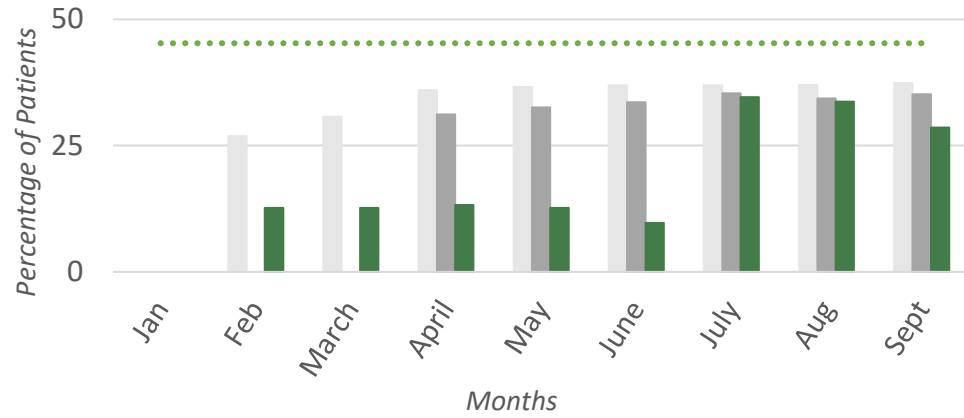


| Site | Current Score | Number of Patients Needed to Meet Target | Full Point Target Score (90 th Percentile) |
|----------------------|---------------|--|---|
| Fairfield Pediatrics | 24.13% | 1,027 | 61.15% |
| Vallejo | 19.74% | 1,526 | |
| Vacaville | 16.89% | 472 | |

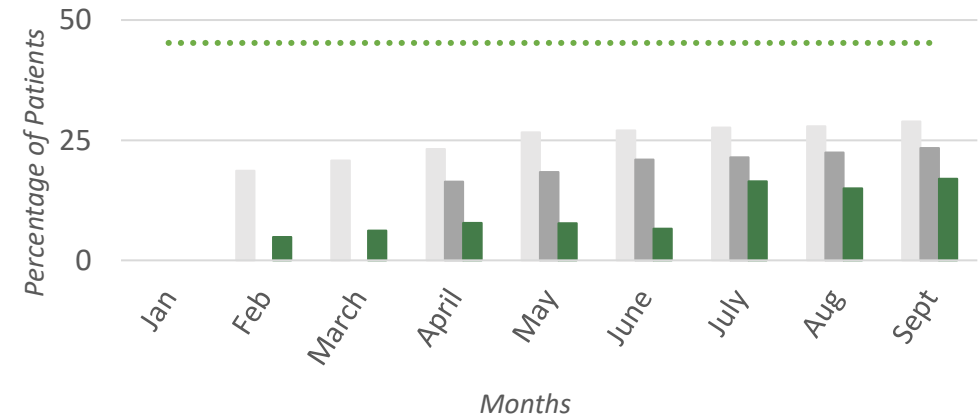


PCP QIP Childhood Immunizations

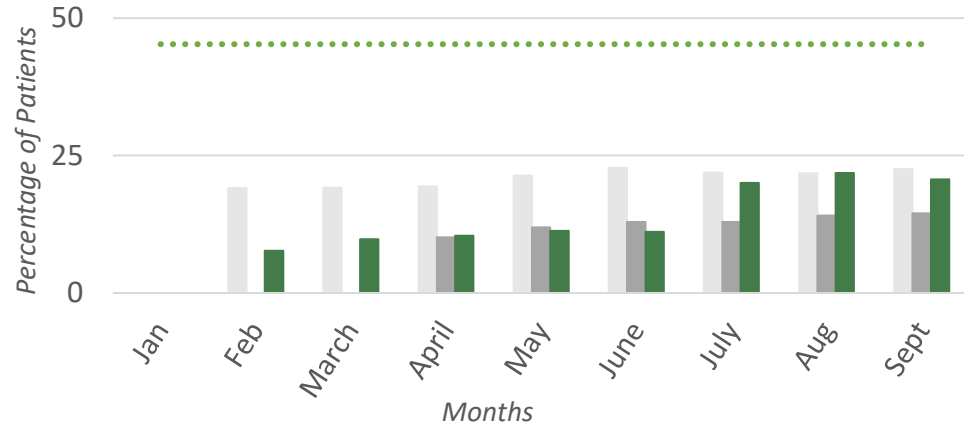
Fairfield Pediatric Clinic



Vallejo Clinic



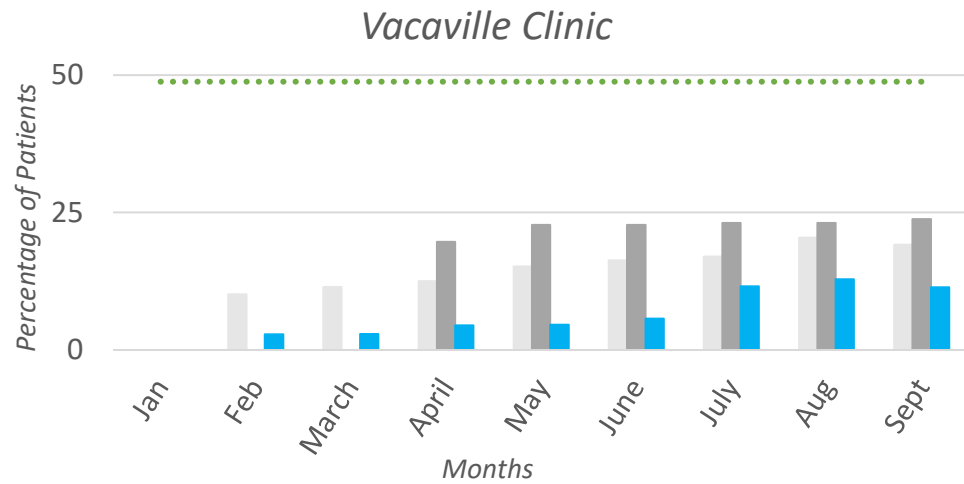
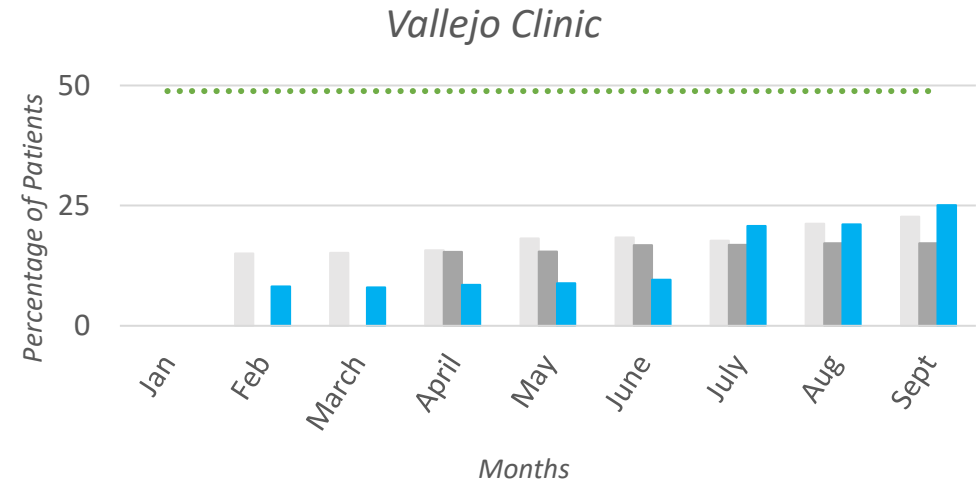
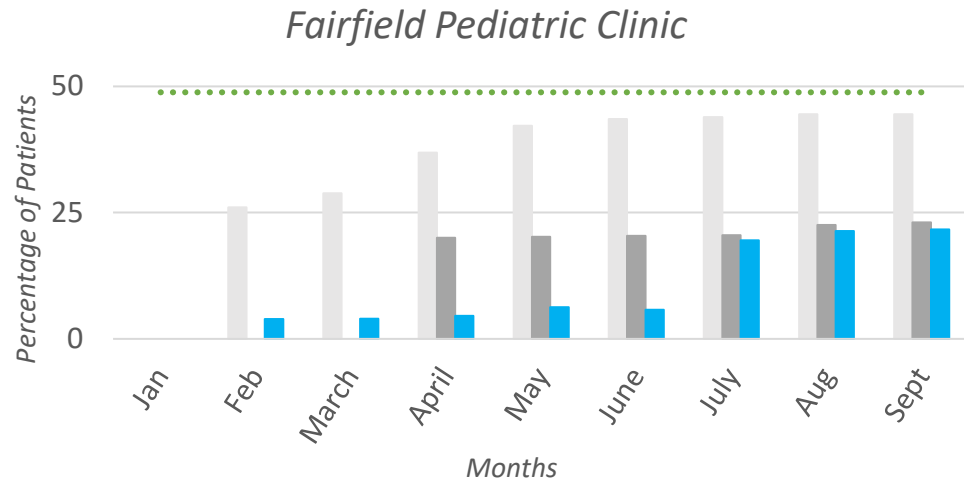
Vacaville Clinic



| Site | Current Score | Number of Patients Needed to Meet Target | Full Point Target Score (90 th Percentile) |
|----------------------|---------------|--|---|
| Fairfield Pediatrics | 28.57% | 16 | 45.26% |
| Vallejo | 17.02% | 67 | |
| Vacaville | 20.69% | 15 | |



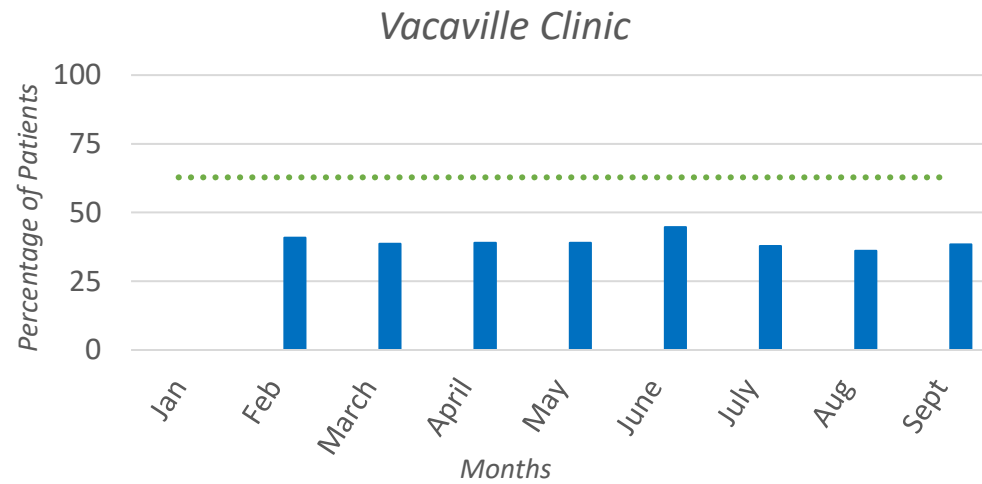
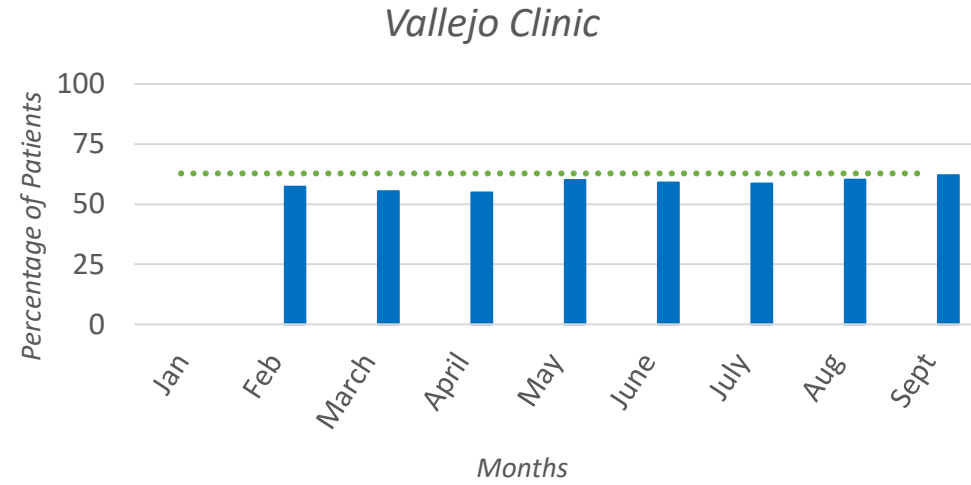
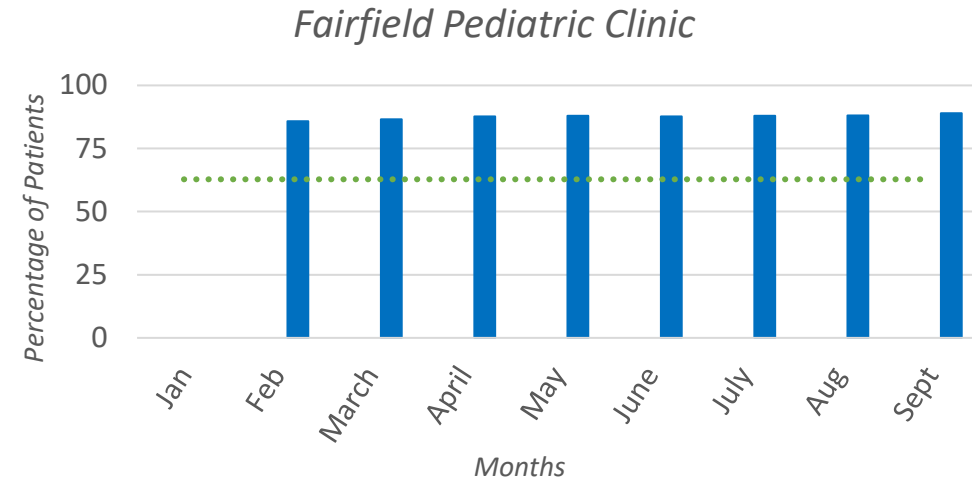
PCP QIP Adolescent Immunizations



| Site | Current Score | Number of Patients Needed to Meet Target | Full Point Target Score (90 th Percentile) |
|----------------------|---------------|--|---|
| Fairfield Pediatrics | 21.67% | 49 | 48.80% |
| Vallejo | 25.12% | 50 | |
| Vacaville | 11.43% | 27 | |



PCP QIP Blood Lead Screening



| Site | Current Score | Number of Patients Needed to Meet Target | Full Point Target Score (50 th Percentile) |
|----------------------|---------------|--|---|
| Fairfield Pediatrics | 88.89% | Target Met - over by 16 | 62.79% |
| Vallejo | 62.10% | 1 | |
| Vacaville | 38.46% | 10 | |

■ 2024 Target



**Family Health Services
Quality Assurance/Quality Improvement
Committee Meeting Minutes**

Date: Friday, September 13, 2024, Time: 1:00 p.m. – 2:00 p.m.
Meeting Location: MS Teams, Call in number: +1 323-457-3408
Conference ID: 293 192 539#, Meeting ID: 299 052 820 019#,
Password: CT63CZ

| Members (x indicates attendance) | | | |
|--|--|---|---|
| <input type="checkbox"/> Michele Leary, Co-Chair | <input type="checkbox"/> Reza Rajabian | X Brandon Wirth | X Elizabeth Coudright |
| <input type="checkbox"/> Dona Weissenfels | <input type="checkbox"/> Kaitlyn Riley | X Athena Gabriel | <input type="checkbox"/> Amber Searcy |
| X Michelle Stevens | X Daniel Klein | X Esperanza Garcia | <input type="checkbox"/> Pierce Leavell |
| X Shabnam Chabi | <input type="checkbox"/> Karla Bailey | <input type="checkbox"/> Trielle Robinson | X Katreena Dotson |
| <input type="checkbox"/> Rodney Faucett | <input type="checkbox"/> Sharon Vaca | X Maria Torres | X Noelle Soto |
| X Han Yoon | X Cynthia Coutee | X Rebecca Cronk | X Sylvia Martin |

| Agenda Topics | Discussion | Action Items & Due Date | Speaker(s) |
|-----------------------|--|------------------------------------|---------------------------------|
| Welcome | Greetings <ul style="list-style-type: none"> Han introduced the newest member to the Quality Team, Sylvia Martin. Sylvia briefly introduced herself. | | Han |
| 1. 2024 QIP Reporting | 2024 Measurement Year – current status <ul style="list-style-type: none"> *Cervical cancer screening, Controlling High Blood Pressure, and Maintaining HbA1c (Katreena) *Childhood Immunizations (CIS 10), Adolescent Immunization (IMA 2), and Blood Lead Screening (Esperanza) *Colorectal Cancer Screening, Breast Cancer Screening, Yearly Well Child Visits, and Well Child First 15 months of life (WCC 0-15) – Centering (Athena) The Quality Team explained the excel table being presented of the 2024 PHC QIP Measurement Year, there were 4 tabs broken down by location. 1st tab being FF Peds, 2nd tab FF Adult, 3rd tab Vacaville, and 4th tab Vallejo. The current QIP Score was presented per clinic. Katreena went over Adult measures; Cervical Cancer Screening, Controlling High | | Katreena Esperanza Athena |

| | | | |
|-------------------------------|---|--|-------------------------------------|
| | <p>Blood Pressure, Diabetes Retinal Eye Exam, and Maintaining HbA1c. Esperanza went through our current QIP Score per clinic for Childhood Immunizations (CIS 10), Adolescent Immunizations (IMA 2), and Blood Lead Screening. Athena went over Colorectal Cancer Screening, Breast Cancer Screening, Well Child Visits, and Well Child First 15 Months of Life. Adult measures were presented first, followed by Pediatric measures, and ending with current projects by measure. The information that was shared were our current QIP Score (percentage) target goal of 90th percentile (percentage), and the number of patients needed to reach the 90th percentile (full points) for each measure per clinic.</p> | | |
| <p>2. 2024 QA/QI Projects</p> | <p>*"Pap days" – Camille Cook, "A1c and BP days" – Faucett/Cook *"IMA 2 and Lead screening days" – VJO and VV *Cologuard and WCC 0-15 Centering</p> <ul style="list-style-type: none"> • A project that we have coming up is "Pap Days" with Camille Cook. Camille is a Locum, who has agreed to stay on with Solano County from mid-October to mid-December to help FHS meet specific measures. Quality will be doing a trail run, where she will be working 3 days out of the week, Tuesdays, Wednesdays, and Thursdays. The concentration on Tuesdays and Wednesdays will be "Pap Days" on the QA/QI schedule, while Thursdays will be "HbA1c and BP days" also on the QA/QI schedule. We will also be seeing if Dr. Leary can go to Vallejo to help with meeting the BP and A1c measures. We have been trying to get with Rebecca Cronk to see when and where they have room at the Vallejo clinic, so we can figure out what days Dr. Leary can hold these "A1c and BP Days". We will also be having these "A1c and BP days" at the Fairfield Adult clinic with Dr. Faucett and Camille. Dr. Faucett holds "A1c and BP days" every other Friday (pay day Fridays). And just to reiterate, these specific "Pap Days" and "A1c/BP Days" are strictly for Quality appointments. We have seen situations where other providers are requesting pap's to be put on the Quality "Pap Days" schedule. The Quality Team works from a care gap list, identifying those who are in the measure, so really the time has been put aside for QA/QI to help in meeting the measure by the end of the year. If a patient needs a pap and can't be put on their providers schedule, then task the Quality Team, we can then see if they are in the measure and see about scheduling them on one of the Quality "Pap Days". If they end up not being on the measure list for Cervical Cancer Screening, we will communicate back to please try and get them on a provider's schedule. • Comment per Rebecca Cronk – <i>Katreena, please let me know what day's Dr. Leary wants to come to Vallejo for these "A1c/BP Days". We can then look at room availability. I don't think it will be an issue as long as she has an MA coming with her. So just let me know.</i> • Answer per Katreena – <i>Yes, we will have the QA/QI MA follow her for these days. We were thinking the middle of October, if not, then maybe in December.</i> | | <p>Katreena Espi Athena</p> |

| | | | |
|--|--|--|--|
| | <ul style="list-style-type: none"> • Comment per Rebecca Cronk – <i>Ok</i> • Esperanza points out that Fairfield Pediatrics has met the Blood Lead Screening for this year. We had 2 days in Vallejo for Immunizations and Blood Lead Screening days. We have also had one full day of physicals scheduled with Dr. Stevens in Vallejo. We got in some kids who are about to turn 13 years old who needed their 2nd HPV, as well as, a blood lead screening. We also saw babies who needed a Well child physical, who were under 15 months old. We had a full day of physical with majority of patients showing up for their appt. We are hoping to hold at least a few more physical days with Dr. Stevens for the remainder of the year. • Athena spoke about a meeting the Quality Team had with Vacaville. The meeting was held on 9/5/24, attendees were Daniel Klein, Suzette Watson, Tara Lopez, Tanaya Landers, Olivia Chastain, Angelica AdameCoral, Dr. Stevens, and the Quality Team. We realized that not a lot of Blood Lead Screening was being done at Vacaville, so we decided to have a meeting to make sure everyone understood the measure and when exactly to do a blood lead screening for babies/children. The meeting went well, and Vacaville was very receptive. They were interested in identifying those in the Blood Lead Screening measure, since they are only 10 patients away from meeting the measure. Once Vacaville’s list was filtered, there were 24 patients who will be or who already turned 2 years old in 2024. Once filtered again to those whose birthdays are in Sept, Oct, Nov, and Dec. we ended up with only 7 patients, who we could possibly get in to meet the measure. So, essentially, we lost 17 patients who aged-out of the measure, who we can still get in to do a “catch-up” lead screening. There is a “catch-up” timeframe for blood lead screening which is between the ages of 2–6 years old, but they won’t count towards meeting the measure. Children aging-out is a great example as to why we need to start focusing on projects for peds measures, early on in the year. So that we don’t come upon the situation where we are scrambling at the end of the year and we’ve lost children to aging out and can’t meet these measures. We are looking to have the same type of meeting in Vallejo as well because they have such a big capitation. We’d like to bring the conversation back to information about blood lead screening being a new measure in 2024 and the perimeters we need to be looking for to meet this measure. And to also identify any barrier’s we may be facing in hitting this measure. We are trying to have that meeting sometime this year, so we can hit the ground running come January 2025. • Han asked if anyone had any questions. And also gave a big “thank-you” to Cynthia, Daniel, and Suzette for setting the time aside to meet with the Quality Team and inquiring about their care gap list for Blood Lead Screening. | | |
|--|--|--|--|

| | | | |
|--|---|--|--------------------|
| | <ul style="list-style-type: none"> • Athena went over the current PCP QIP Score for Breast Cancer Screening, Colorectal Cancer Screening, Child and Adolescent Well Care, and Well Child First 15 months of life measures for all clinics. A quick explanation is said about full point/90th percentile vs. partial points/50th percentile; we always aim high and try to reach the 90th percentile for all measures. • Currently Sylvia is working on expired Cologuard kits, she is getting new orders ready for those kits. Esperanza and I have been busy with transitioning from Peds to Adults measures. We will be working on scheduling for all of the upcoming “Pap days”. We will also be working on Breast Cancer Screening and Colorectal Cancer Screening, getting orders ready and outreaching to patients reminding them of their orders. • A current project we’ve been working on is regarding the Well Child 1st First Months of Life and Health Equity, which we call the Centering Parenting (WCC 0-15) project. We have targeted 6 families; whose babies are around the same age. Each session is around 4 hours where we conduct vitals, mini-physicals, and group sessions. The group sessions consist of topics based on the babies age. We just had our 3rd session, 9/10/24, the group feels a little more established and everyone is more comfortable with each other. We are hoping that this very small project works out in the end, so that we are able to run projects at our Vallejo and Vacaville clinics and have a few cohorts happening simultaneously. This project is really, just the beginning, in hopes of expanding the project. | | |
| <p>3. WCC 0-15 - Centering Parenting</p> | <p>Centering Presentation</p> <ul style="list-style-type: none"> • Dr. Stevens went through her PowerPoint Presentation regarding the Centering Parenting (WCC 0-15) project. • We had some assumptions when we first started this project. Athena didn’t expect to see fathers involved and show up to these sessions. So, with that we had to pivot and address some topics related to dads as well. A few team members feel like they get personal gain from these sessions also. And although we don’t all have children, some of these topics are relatable and can trigger past sharable experiences. We are happy with the group we currently have; we have been establishing trust and it does truly feel like a little community. • Cynthia shared her experience with the Centering Parenting project. It was really good to see some of the fathers involved and the connections that the moms make. This is a good way to connect mothers and share experiences. Everyone goes through different experiences and hearing what others are going through and how they are developing with their baby’s is really a good way to strengthen parenting. She enjoyed attending and is looking forward to the next session. | | <p>Dr. Stevens</p> |

| | | | |
|---------------|---|--|-----|
| | <ul style="list-style-type: none"> • Han attended one of the sessions and really enjoyed the music that was being played. He felt a sense of tranquility and peace, where everyone can share experiences/opinions in a peaceful environment. He thought that the music added a great touch to the session. He also enjoyed how some fathers showed up and it shows how the fathers can be sensitive to topics as well. • Esperanza's favorite part of the project is watching the babies grow. Coming from being a Peds MA on the floor, that was her favorite part, watching the babies grow and seeing how much they change. It's really fun to see babies progress, but also getting to know the mom's, building that relationship and hearing their stories are fulfilling. • Cynthia added that she liked that she able to help calm the babies who got agitated after getting their shots. One of the babies became very agitated after receiving her shots, but Cynthia was able to calm her, and she ended up falling asleep. It was really cool to see the trust that the babies have from being in a safe environment. • Comment per Daniel Klein (via chat) – <i>This sounds like a great project. Hopefully, we can expand to other clinics in the future.</i> • Answer per Dr. Stevens – <i>Yes, we would definitely like to do that, expand this project to other clinics. Daniel, if you are someone whose interested in being a part of our next Centering Parenting project, we will keep you in mind. We'd love to expand out, so that we have on-going cohorts/projects, so that patients get options to see their baby's provider, one-on-one or in a Centering Parenting group.</i> | | |
| 4. Discussion | Open for comments, questions, or concerns | | Han |

| Next Meeting | Future Meetings |
|--------------------------|----------------------------------|
| Friday, October 11, 2024 | We meet every other month |
| Time | Location |
| 1:00 p.m. – 2:00 p.m. | MS Teams (meeting details above) |

Community Healthcare Board

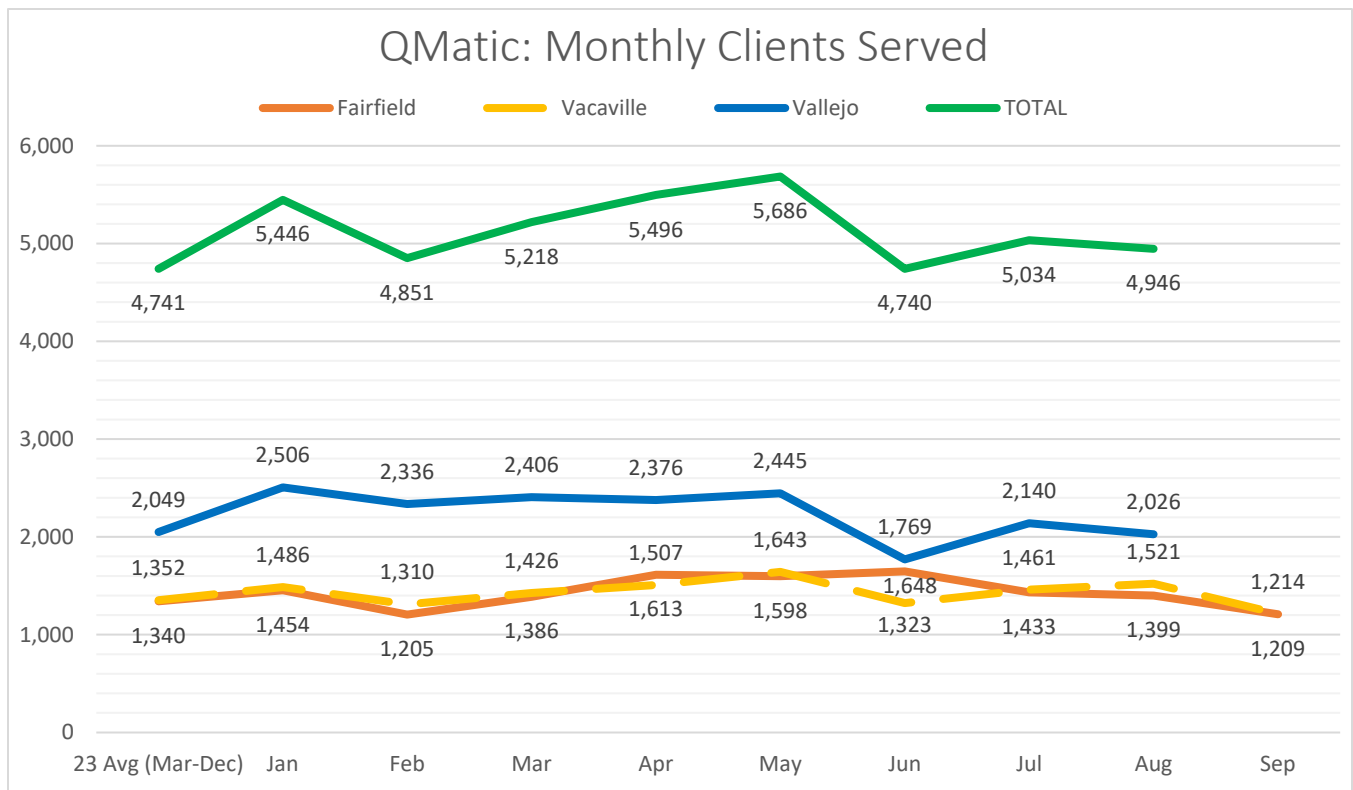
5) Clinic Operations Reports:

j) FHS Clinic Q-Matic Stats

Clinic Operations Report: Clinic Metrics

Queue Management (Q-Matic) Stats

| Clinic Site | Clients Served | | | | | | | | | |
|---------------------------------|---------------------------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| | 2023 (Mar to Dec) Average | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep |
| Fairfield | | | | | | | | | | |
| Lab | 93 | 95 | 76 | 94 | 125 | 127 | 116 | 93 | 90 | 68 |
| Medical (Adult) | 1,247 | 1,359 | 1,129 | 1,292 | 1,488 | 1,471 | 1,532 | 1,340 | 1,309 | 1,141 |
| Subtotal | 1,340 | 1,454 | 1,205 | 1,386 | 1,613 | 1,598 | 1,648 | 1,433 | 1,399 | 1,209 |
| Vacaville | | | | | | | | | | |
| Dental | 588 | 598 | 535 | 552 | 571 | 620 | 596 | 673 | 629 | 563 |
| Medical (Adult & Peds) | 764 | 888 | 775 | 874 | 936 | 1,023 | 727 | 788 | 892 | 651 |
| Subtotal | 1,352 | 1,486 | 1,310 | 1,426 | 1,507 | 1,643 | 1,323 | 1,461 | 1,521 | 1,214 |
| Vallejo | | | | | | | | | | |
| Dental & Medical (Adult & Peds) | 1,970 | 2,413 | 2,245 | 2,313 | 2,269 | 2,342 | 1,671 | 2,009 | 1,960 | U/A |
| Lab | 79 | 93 | 91 | 93 | 107 | 103 | 98 | 131 | 66 | U/A |
| Subtotal | 2,049 | 2,506 | 2,336 | 2,406 | 2,376 | 2,445 | 1,769 | 2,140 | 2,026 | U/A |
| TOTAL | 4,741 | 5,446 | 4,851 | 5,218 | 5,496 | 5,686 | 4,740 | 5,034 | 4,946 | |



**SOLANO COUNTY
EXPENDITURE AND REVENUE REPORT
FAMILY HEALTH SERVICES
SEPTEMBER 2024**

| CATEGORY DESCRIPTION | FY2024/25 WORKING BUDGET | FY2024/25 YTD ACTUALS | YTD ACTUALS as a % of WORKING BUDGET | |
|----------------------|--------------------------------|--------------------------|--|--|
|----------------------|--------------------------------|--------------------------|--|--|

| | |
|---------------------|------------------|
| EXPENDITURES | Notations |
|---------------------|------------------|

Salaries & Benefits

| | | | | |
|--|-------------------|------------------|---------------|--|
| Salaries - Regular | 16,306,079 | 2,495,134 | 15% | |
| Salaries - Extra Help | 17,000 | 5,905 | 35% | |
| Salaries - OT/Callback/Standby | 69,874 | 25,571 | 37% | |
| Staffing costs from other divisions (net amount) | 133,070 | 56 | 0% | |
| Benefits | 10,561,338 | 1,435,194 | 14% | |
| Accrued Leave CTO Payoff | 20,000 | 3,845 | 19% | |
| Salary Savings | (2,789,326) | - | 0% | |
| Salaries & Benefits Total | 24,318,035 | 3,965,706 | 16.31% | |

Services & Supplies

| | | | | |
|---|-----------|--------|-----|---|
| Office Expense and Supplies | 172,363 | 20,451 | 12% | Drinking water, household expenses, and trash services. |
| Communications | 138,331 | 16,639 | 12% | |
| Insurance | 1,000,703 | - | 0% | Budget includes cost of Liability Insurance and Malpractice Insurance. >These charges will originate from another County Department. >Medical Malpractice will post at year end and are expected to be budgeted amount. |
| Equipment - Purchases, Leases & Maintenance | 73,780 | 18,306 | 25% | Q-Matic. BioRad. Caltronics. Steris.Life Technologies. Smile Business. Multi Function Devices Copiers/Printers. |
| Mileage, Fuel and Fleet | 45,503 | 7,200 | 16% | Monthly charges for vehicles assigned to County Departments; personal mileage. |

**SOLANO COUNTY
EXPENDITURE AND REVENUE REPORT
FAMILY HEALTH SERVICES
SEPTEMBER 2024**

| CATEGORY DESCRIPTION | FY2024/25 WORKING BUDGET | FY2024/25 YTD ACTUALS | YTD ACTUALS as a % of WORKING BUDGET | |
|---|--------------------------------|--------------------------|--|---|
| EXPENDITURES | | | | Notations |
| Services & Supplies (continued) | | | | |
| Buildings - Maintenance, Improvements, Rent & Utilities | 258,458 | 45,305 | 18% | PG&E & water services. |
| Drugs, Pharmaceuticals, Medical and Dental Supplies | 623,605 | 97,131 | 16% | Henry Schein. McKesson. TheraCom. |
| Controlled Assets & Computer Related Items | 151,940 | 4,118 | 3% | Budget is primarily refresh computers and equipment funded with Capital Grant carryover funding. |
| Medical/Dental Services | 207,600 | 16,590 | 8% | JP's Dental Lab, Quest Lab Services, Solano Diagnostics, and Solano Public Health Lab charges. |
| Contracted and Other Professional Services | 1,019,565 | 62,294 | 6% | Budget includes the following contracts: >Allied Security >Simi Group >Waystar/Trizetto (electronic claims management) >Forvis (Medicare Cost Report) >Stericycle (medical waste disposal) >Gebbs (Medical Coding Consultant) >Factor Consultants >UCH Solutions (Recruitment services) |
| DoIT | 2,152,500 | 354,130 | 16% | |
| Software & Maintenance or Support | 690,031 | 377,782 | 55% | Budget includes the following: >Next Gen >OCHIN >Orchard Software |
| Professional Licenses & Memberships | 27,871 | 2,448 | 9% | |
| Education, Training, In-State Travel, Out of State Travel | 25,290 | 983 | 4% | Registration fees for NACHC Community Health Institute & Expo Conference |
| Other | 69,758 | 6,933 | 10% | >Uniform allowance >Fees & Permits (credit card processing, licensing and storage) >Livescans |
| Services & Supplies Total | 6,657,298 | 1,030,311 | 15% | |

**SOLANO COUNTY
EXPENDITURE AND REVENUE REPORT
FAMILY HEALTH SERVICES
SEPTEMBER 2024**

| CATEGORY DESCRIPTION | FY2024/25 WORKING BUDGET | FY2024/25 YTD ACTUALS | YTD ACTUALS as a % of WORKING BUDGET | |
|----------------------|--------------------------------|--------------------------|--|--|
|----------------------|--------------------------------|--------------------------|--|--|

| EXPENDITURES | Notations |
|--------------|-----------|
|--------------|-----------|

Other Charges

| | | | | |
|---|----------------|---------------|-----------|---|
| Interfund Services - Professional | 712,944 | 26,588 | 4% | County related charges for Sheriff services, building and grounds maintenance and custodial services. |
| Interfund Services - Accounting & Audit | - | - | 0% | |
| Interfund Services - Other | 64,285 | 1,477 | 2% | Maintenance materials, small projects and labor. |
| Contributions - Non County Agencies | 15,000 | - | 0% | Registration fees for NACHC Community Health Institute & Expo Conference (two board members). |
| Other Charges Total | 792,229 | 28,065 | 4% | |

Contracts/Client Support

| | | | | |
|---------------------------------------|------------------|----------------|----------|--|
| Contracted Direct Services | 1,492,000 | 116,938 | 0 | Budget includes the following contracts: >Barton & Associates (locum services) >Children's Choice (dental services) >Touro University (providers) |
| Client Support | 22,700 | 5,684 | 0 | Client support transportation costs. |
| Contracts/Client Support Total | 1,514,700 | 122,622 | 0 | |

Equipment

| | | | | |
|------------------------|---------------|---------------|----------|--|
| Equipment | 49,604 | 44,604 | 1 | |
| Equipment Total | 49,604 | 44,604 | 1 | |

Administration Costs

| | | | | |
|-----------------------------------|------------------|----------|----------|--|
| H&SS Administration | 2,957,878 | - | - | |
| Countywide Administration | 1,312,262 | - | - | |
| Administration Costs Total | 4,270,140 | - | - | |

| | | | | |
|---------------------------|-------------------|------------------|------------|--|
| TOTAL EXPENDITURES | 37,602,006 | 5,191,308 | 14% | |
|---------------------------|-------------------|------------------|------------|--|

**SOLANO COUNTY
EXPENDITURE AND REVENUE REPORT
FAMILY HEALTH SERVICES
SEPTEMBER 2024**

| CATEGORY DESCRIPTION | FY2024/25 WORKING BUDGET | FY2024/25 YTD ACTUALS | YTD ACTUALS as a % of WORKING BUDGET | |
|----------------------|--------------------------------|--------------------------|--|--|
|----------------------|--------------------------------|--------------------------|--|--|

| | |
|-----------------|------------------|
| REVENUES | Notations |
|-----------------|------------------|

Payer Revenues

| | | | | |
|-----------------------------|-------------------|------------------|------------|--|
| Payer Revenues | 23,355,466 | 2,997,648 | 13% | Revenues from Medi-Cal, Partnership Capitation, Medicare and Private Pay |
| Payer Revenues Total | 23,355,466 | 2,997,648 | 13% | |

Federal/State Revenues

| | | | | |
|---|------------------|---------------|-----------|--|
| 1991 Realignment (Underinsured/Uninsured/PH Services) | 1,386,906 | - | 0% | |
| Federal Direct - COVID (one time funding) | 100,405 | - | 0% | Rollover for HRSA Capital Grant funds |
| Federal Grants | 2,047,990 | 3,900 | 0% | Budget includes: >CHC Base grant >RWC |
| Federal Other | 56,608 | - | 0% | \$1M Congressional earmark |
| American Rescue Plan Act (ARPA) | 1,276,497 | - | 0% | ARPA funding for OCHIN EHR conversion |
| Other Revenue | 1,617,600 | 12,304 | 1% | Budget primarily includes QIP revenues, but also includes patient care payment recoveries. |
| Program Revenues Total | 6,486,006 | 16,204 | 0% | |

| | | | | |
|---|-------------------|------------------|--------------|--|
| TOTAL PAYER AND PROGRAM REVENUES | 29,841,472 | 3,013,852 | 10.1% | |
|---|-------------------|------------------|--------------|--|

| TOTAL EXPENDITURES vs TOTAL REVENUES | Notations | | | |
|--------------------------------------|------------------|------------------|------------|--|
| TOTAL EXPENDITURES | 37,602,006 | 5,191,308 | 14% | |
| TOTAL REVENUES | 29,841,472 | 3,013,852 | 10% | |
| DEFICIT (SURPLUS) | 7,760,534 | 2,177,455 | 28% | |
| County General Fund | 4,708,209 | - | | |
| DEFICIT (SURPLUS) after CGF** | 3,052,325 | 2,177,455 | | |

***Deficit to be funded with 1991 Realignment and/or County General Fund*

Primary Care Provider Quality Improvement Program (PCP QIP) Report
Solano County, Health & Social Services, Family Health Services
As of October 1, 2024

TABLE OF CONTENTS

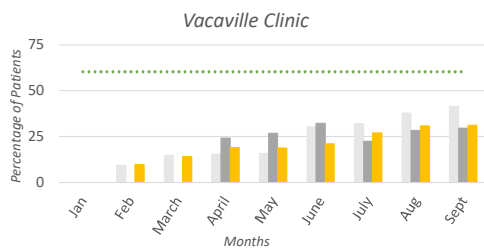
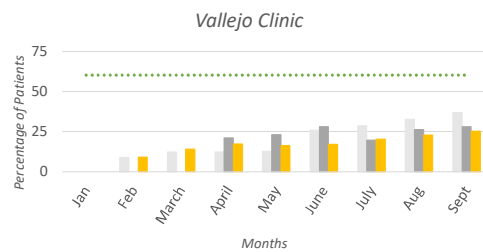
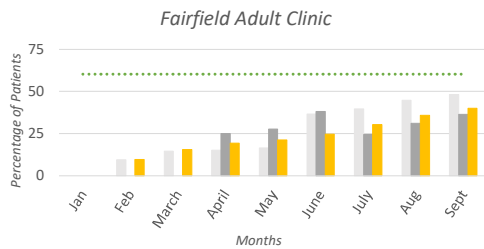
The below information reflects critical components related to Risk Management & Quality Improvement activities for Family Health Services:
 I. Clinical Quality

I. CLINICAL QUALITY

Terms Defined

Primary Care Provider Quality Improvement Program (PCP QIP)- financial incentive program from Partnership HealthPlan of California to primary care providers for meeting specific performance thresholds. PCP QIP clinical measures look only at data for patients with Partnership HealthPlan of California insurance plans during calendar year 2024.

PCP QIP Diabetes HbA1c Good Control

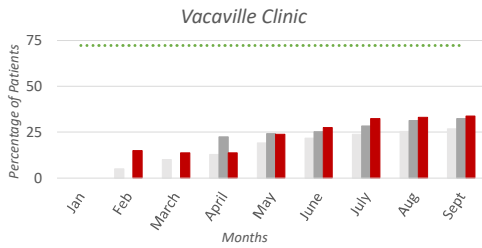
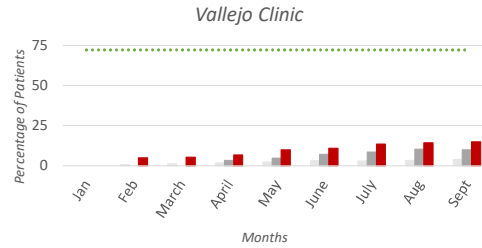
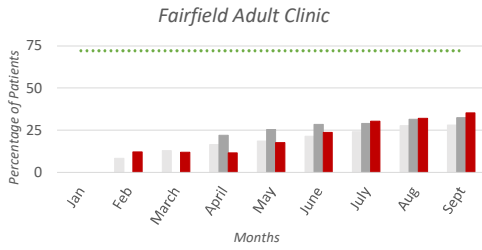


| Site | Current Score | Number of Patients Needed to Meet Target | Full Point Target Score (90 th Percentile) |
|-----------------|---------------|--|---|
| Fairfield Adult | 39.95% | 83 | 60.34% |
| Vallejo | 25.36% | 246 | |
| Vacaville | 31.07% | 104 | |

Legend: 2022 (light grey), 2023 (dark grey), 2024 (yellow), Target (dotted green line)

Note: 1st manual upload of HbA1c readings in October 2024

PCP QIP Controlling High Blood Pressure



| Site | Current Score | Number of Patients Needed to Meet Target | Full Point Target Score (90 th Percentile) |
|-----------------|---------------|--|---|
| Fairfield Adult | 35.33% | 117 | 72.22% |
| Vallejo | 14.88% | 343 | |
| Vacaville | 33.63% | 88 | |

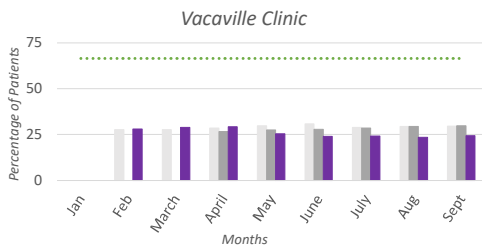
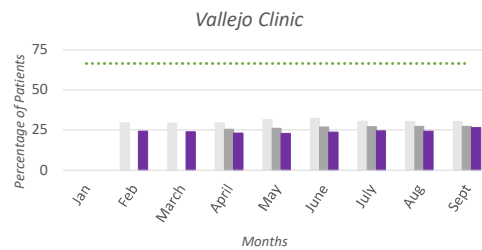
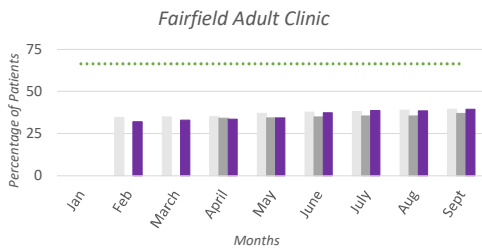
2022 2023 2024 Target

Note: 1st manual upload of blood pressure readings in October 2024

3

3

PCP QIP Cervical Cancer Screening



| Site | Current Score | Number of Patients Needed to Meet Target | Full Point Target Score (90 th Percentile) |
|-----------------|---------------|--|---|
| Fairfield Adult | 39.40% | 398 | 66.48% |
| Vallejo | 26.32% | 1,649 | |
| Vacaville | 24.33% | 739 | |

2022 2023 2024 Target

4

4

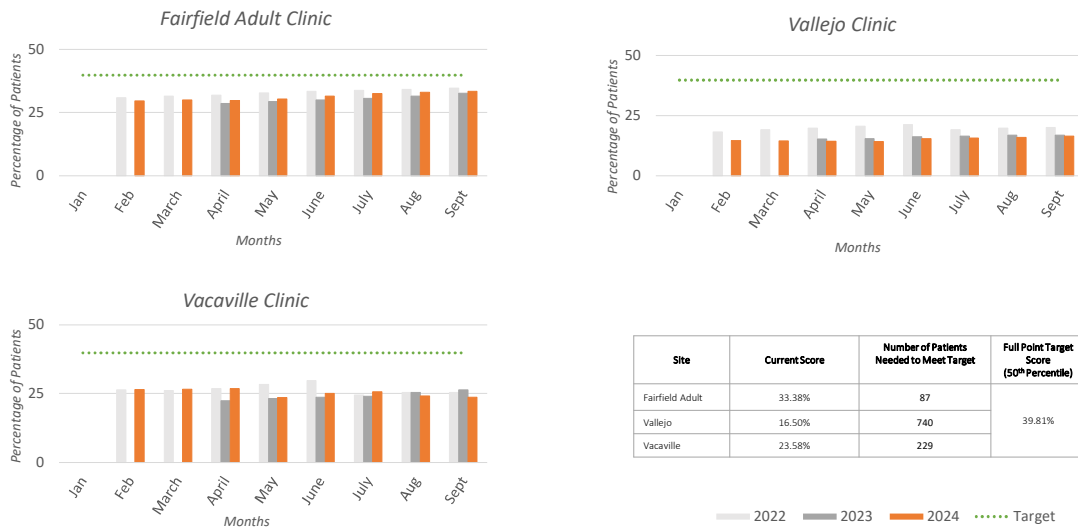
PCP QIP Breast Cancer Screening



5

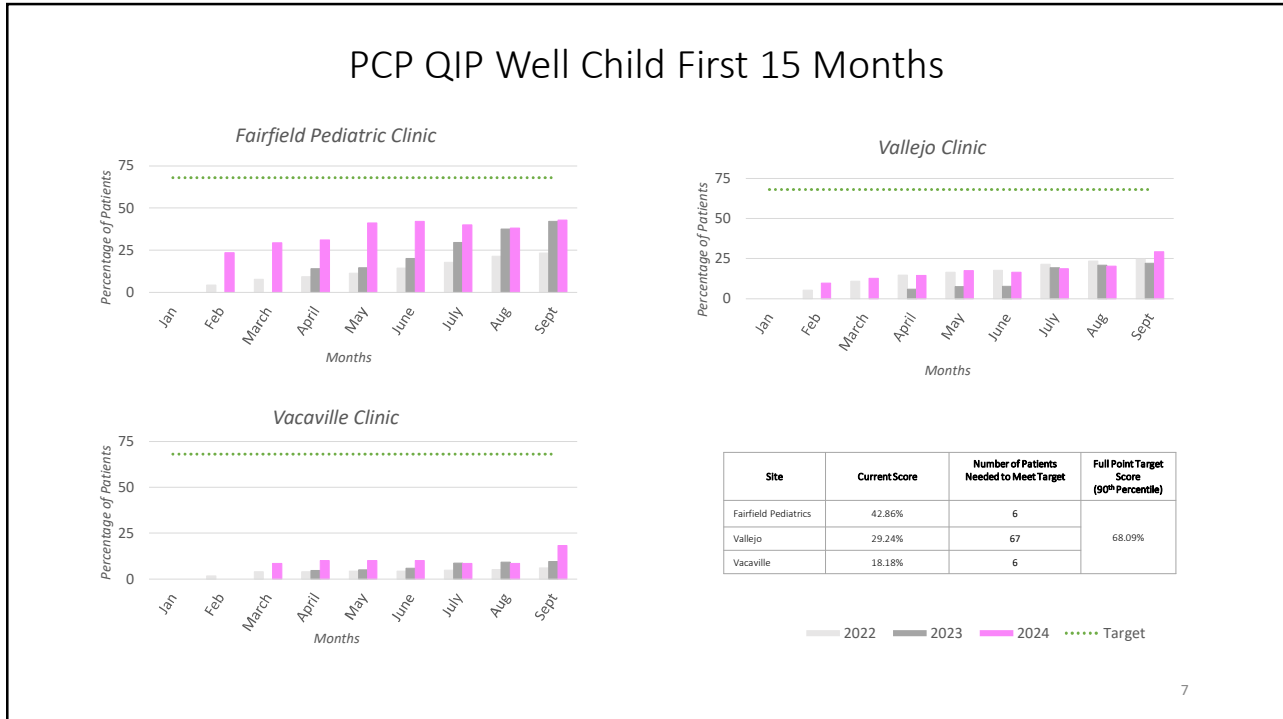
5

PCP QIP Colorectal Cancer Screening

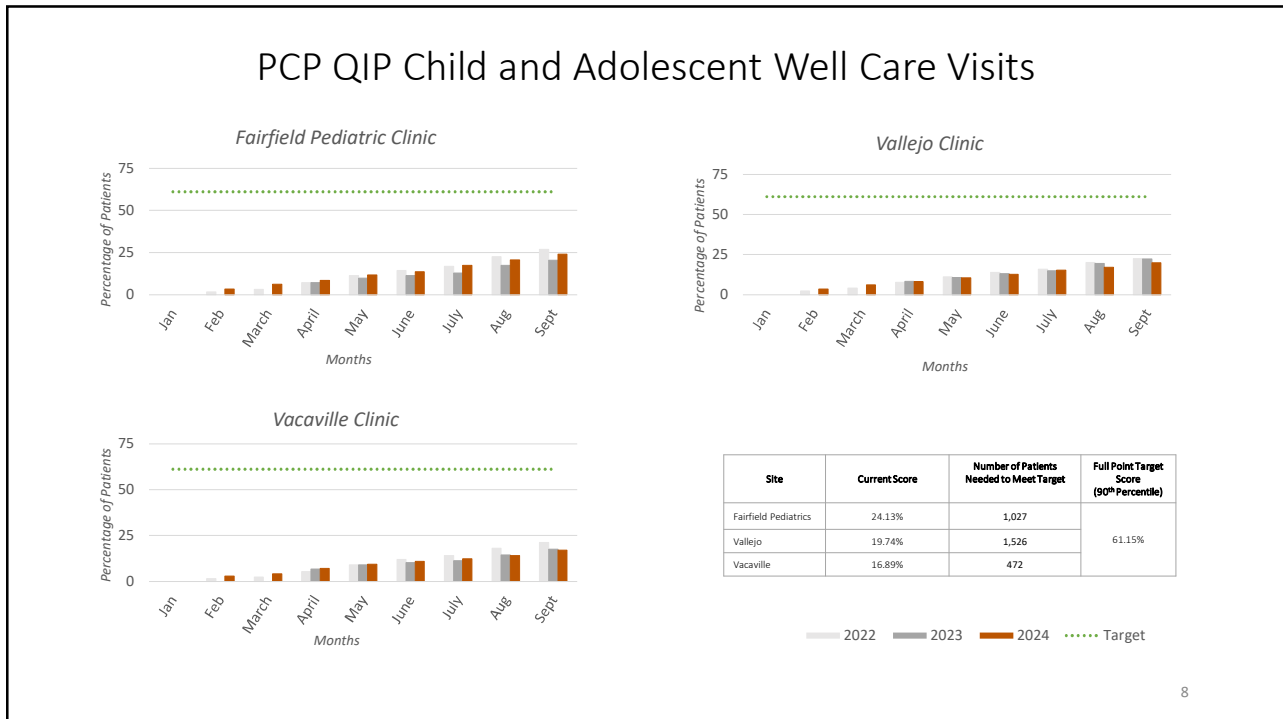


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6

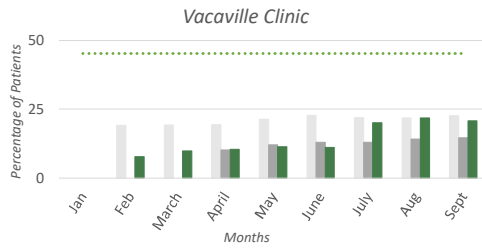
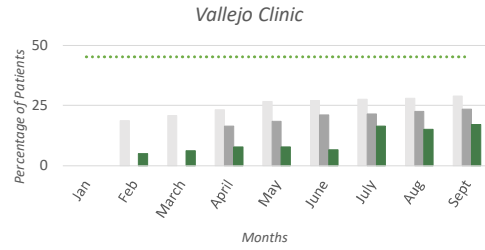
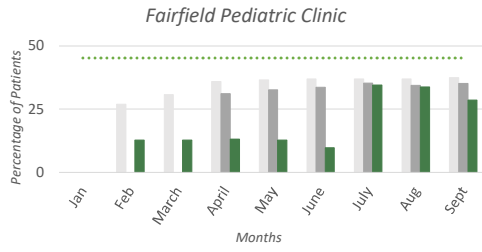


7



8

PCP QIP Childhood Immunizations



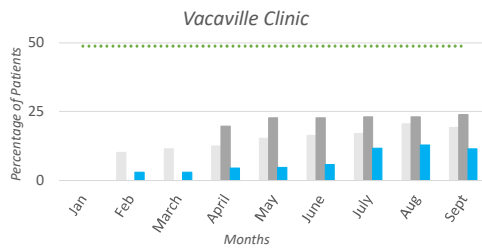
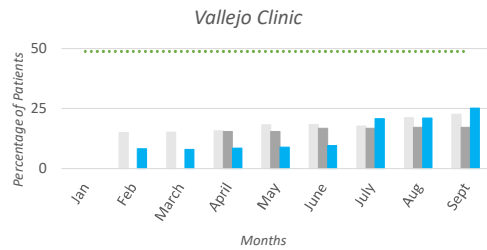
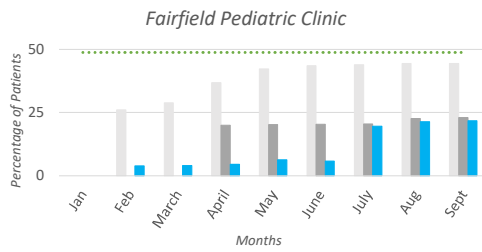
| Site | Current Score | Number of Patients Needed to Meet Target | Full Point Target Score (90 th Percentile) |
|----------------------|---------------|--|---|
| Fairfield Pediatrics | 28.57% | 16 | 45.26% |
| Vallejo | 17.02% | 67 | |
| Vacaville | 20.69% | 15 | |

2022 2023 2024 Target

9

9

PCP QIP Adolescent Immunizations



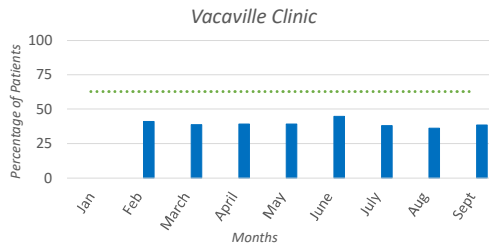
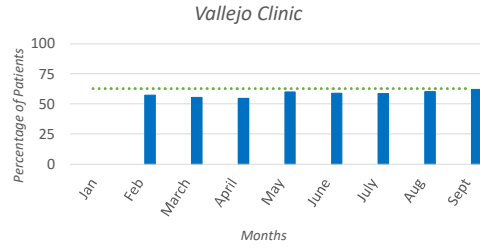
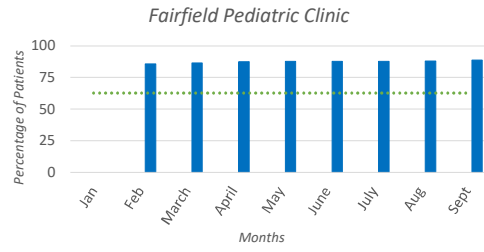
| Site | Current Score | Number of Patients Needed to Meet Target | Full Point Target Score (90 th Percentile) |
|----------------------|---------------|--|---|
| Fairfield Pediatrics | 21.67% | 49 | 48.80% |
| Vallejo | 25.12% | 50 | |
| Vacaville | 11.43% | 27 | |

2022 2023 2024 Target

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PCP QIP Blood Lead Screening



| Site | Current Score | Number of Patients Needed to Meet Target | Full Point Target Score (50 th Percentile) |
|----------------------|---------------|--|---|
| Fairfield Pediatrics | 88.89% | Target Met - over by 16 | 62.79% |
| Vallejo | 62.10% | 1 | |
| Vacaville | 38.46% | 10 | |

■ 2024 Target

Note: New measure added in 2024

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