

**Sacramento County Department of Health Services
Health Center Co-Applicant Board (CAB)**

Meeting Minutes

August 19, 2022 9:30 AM to 11:00 AM

Meeting Location

Via Zoom: To see/share documents on the screen, go to

<https://www.zoomgov.com/j/1607171817?pwd=alprVXJvMlhqQnNibWRNQkNJVTEzUT09>

Meeting ID: 160 299 6161

Passcode: 250277

One tap mobile

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Dial by your location

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Meeting ID: 160 299 6161

In Person: Conference Room 2800

- Please RSVP at least 24 hours in advance to Mr. Safi at SafiM@saccounty.net to reserve a place.
- Please arrive 15 minutes before the meeting start so that someone can bring you behind the locked doors. Wait in the main lobby (entrance on garage side) for someone to bring you upstairs.
- Facemasks are still required in the Primary Care Center.

Meeting Attendees

Members: Elise Bluemel, Laurine Bohamera, Suhmer Fryer, Vince Gallo, Paula Lomazzi, Nicole Miller, Namitullah Sultani, Jan Winbigler

Staff: Robyn Alongi, John Dizon, Joy Galindo, Neilu Golshanara, Sharon Hutchins, Andrew Mendonsa, Mehrabuddin Safi, Vanessa Stacholy

Topic
<p>Opening Remarks and Introductions</p> <ul style="list-style-type: none">• Chair Winbigler took roll and welcomed Ms. Fryer, the newest CAB member.• The group reviewed the minutes from the 07/15/22 meeting.<ul style="list-style-type: none">○ Ms. Bohamera moved to approve the minutes from the 7/15/22 meeting as amended.○ Ms. Bluemel seconded the motion to approve the minutes from the 7/15/22 meeting as amended.○ All members voted "yes" on the motion to approve the minutes from the 7/15/22 meeting as amended.
<p>Brief Announcements</p> <ul style="list-style-type: none">• Dr. Hutchins announced that she had received confirmation that the Sacramento County Board of Supervisors ratified CAB's selection of Ms. Fryer as a new member. Ms. Fryer is undergoing orientation and completing ethics and conflict of interest training and paperwork.

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- Dr. Hutchins explained that Ms. Bluemel is "piloting" the new CAB consumer member laptops. She reported at the Governance Committee meeting on some challenges that we will try to work through. Dr. Hutchins asked Ms. Bluemel to send a list of the challenges in writing so we can fix them.

Health Resources and Services Agency (HRSA) Project Director / Medical Director Update

- Dr. Hutchins gave Dr. Mishra's update as Dr. Mishra is out of town.
- Dr. Mishra's report started with the Strategic Priority of Additional Space.
 - The move into Suite 2600 space vacated by the Department of Human Assistance (DHA), has begun. Staff is moving in small groups so we can identify challenges before a larger group of staff move into the space.
 - Suite 2600 will house the mental health counselors, the Care Management Team, Medical Records & Scanning, Member Services, Quality Improvement & Compliance, Referrals, and part of the Refugee Health Program (first visit staff).
- The report then focused on the Strategic Priority of Serving Patients Experiencing Homelessness.
 - SCHC is about to launch the mobile medical center van. We hope to implement clinical services there in time for the van to be listed as a permanent site when we apply for the Service Area Competition. Therefore, we are having a "soft launch" to see patients on 9/13, and will then have a more formal opening celebration with participation by the community.
 - The team is also working on the mobile medical center van's pre- and post-trip logistics.
 - The initial location for service will be the United Methodist Church on J Street.
 - The van will be operating on Tuesday and Friday mornings.
 - Dr. Mendonsa added that he was able to connect with Communicare, a FQHC in Yolo County. They have generously invited our providers who will be part of the mobile medical center van team to do a "ride along" with their van to learn from their efforts.
- Dr. Mishra's report then focused on Program Updates.
 - Dr. Hutchins informed the group that SCHC has been tracking membership in the Healthy Partners programs. CAB members may remember that this is the County program that pays for primary (and some specialty) care for undocumented residents. Medi-Cal has expanded to include individuals 50 years of age and older without legal documentation (provided they meet the income requirements). SCHC has developed a workflow to support patients undergoing this transition and assure the continuity of care. Some patients have chosen to get primary care at other locations, and some have requested to stay at SCHC. Dr. Mishra outlined several steps in this process, including SCHC mailing letters to ~1,000 patients affected by the Medi-Cal expansion to ensure they understand their options. While Medi-Cal sent its letter, SCHC wanted to ensure patients received the message and understood how to choose a medical home and ensure continuity of care.
 - Dr. Mishra's report then focused on the Care Management program. Recruitment has begun to fill two new positions on the team – a Care Manager Nurse (RN) and Public Health Aide. The new staff will enhance the work of the existing Complex Care Management Team and the homeless program team by providing outreach to patients who qualify for Medi-Cal's new Enhanced Care Management support service program.

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- The report then focused on the Comprehensive Perinatal Services Program. The team is still doing research into the contract for this particular service.
- Dr. Mishra's report then focused on health center challenges and solutions.
 - The finding of SCHC's recent health plan access audit suggested that SCHC needs to improve appointment availability. Management is seeking additional information on how the audit was conducted and whether telehealth visits were included. Solutions are being identified to increase appointment access, including opening the schedule further in advance and ensuring that appointment "blocks" for critical needs are not used ahead of time.
 - Management reviews training and best practice materials from other institutions to improve appointment access.
- Dr. Mishra's report then focused on public health pandemics.
 - Dr. Mishra indicated that staff completed the vaccine training to help integrate the delivery of COVID vaccines during normal appointments. We are still waiting for the message concerning vaccine availability for young children to be sent out.
 - Dr. Mishra gave a presentation about Monkeypox, at last, All Staff Meeting. To date, the health center has seen one confirmed case and one suspect case. We expect more cases.

Organizational Chart and HRSA Project Director

- Chair Winbigler summarized recent events, including the corrections offered by CAB to the County's proposal regarding selection of the HRSA Project Director. She reminded members that the County's revised proposal was sent as a handout prior to the meeting. She asked for feedback from members.
 - Ms. Bohamera moved to approve the revised County proposal for the selection of the HRSA Project Director.
 - Ms. Lomazzi seconded the motion to approve the revised County proposal for the selection of the HRSA Project Director.
 - All CAB members voted "yes" to approve the revised County proposal for the selection of the HRSA Project Director.
- Chair Winbigler stated that for a nomination for Dr. Mendonsa as HRSA Project Director would be the logical next step.
 - Ms. Bluemel moved to nominate Dr. Mendonsa to be the HRSA Project Director.
 - Ms. Lomazzi seconded the motion to nominate Dr. Mendonsa to be the HRSA Project Director.
 - All CAB members voted "yes" on the nomination of Dr. Mendonsa as HRSA Project Director.
- Dr. Hutchins stated that after the nomination of Dr. Mendonsa for HRSA Project Director, CAB needs to vote on his selection as HRSA Project Director.
 - Ms. Bluemel moved to select Dr. Mendonsa as HRSA Project Director.
 - Ms. Lomazzi seconded the motion to select Dr. Mendonsa as HRSA Project Director.
 - All CAB members voted "yes" on the selection of Dr. Mendonsa as HRSA Project Director.
- CAB members congratulated Dr. Mendonsa and thanked Dr. Mishra for her service in as former HRSA Project Director.

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Update on the Service Area Competition Application

- Dr. Hutchins informed CAB members that there are two phases of the SAC application. Staff completed the first ahead of time. We have gotten confirmation that it has been accepted by HRSA.
- The second part of the application is due on 9/14/22. Staff is aiming to upload the majority of the application on 9/9/22 to be sure to submit it before the due date. However, we want to verify the change in scope to include the mobile medical center van as a site. As Dr. Mishra's report indicated, services will be implemented in the van on 9/13/22, so we will not be able to submit the application prior to 9/13/22.
- The Admin Team is working on the budget and other pieces and Ms. Alongi has nearly completed the narrative. We are also working on many forms for submission. We are on track for an on-time submission.
- Dr. Hutchins informed CAB members that a special CAB meeting would be needed before staff can submit the SAC application for two reasons. First, CAB must review and approve the changes to the Sliding Fee Discount Policy and Procedure. Second, CAB must vote on one additional candidate consumer CAB member to ensure we have a nine-member board as the Bylaws require.
 - CAB members agreed to meet for a special meeting on 9/9/22 from 9:30-10:30.

*Review and approval of the single federal audit

- Chair Winbigler reminded CAB members that the fiscal 2020-2021 single federal audit had been provided as a handout at the previous meeting. CAB members should have had sufficient time to review it. She asked if there were any questions, concerns or comments from members.
- No members offered feedback.
 - Ms. Bohamera moved to accept the single federal audit for fiscal year 2020-2021.
 - Ms. Bluemel seconded the moved to accept the single federal audit for fiscal year 2020-2021.
 - All CAB members voted "yes" to accept the single federal audit for fiscal year 2020-2021.

*Quality Improvement

- Dr. Hutchins quickly summarized the *2022 SCHC Quality Improvement Plan* completed by the Quality Improvement Committee, focusing on the new proposed items for the *Economic Sustainability* and *Care Team Well-Being* aims. She asked if any CAB members had questions or comments.
 - Ms. Winbigler asked whether specific areas of performance need enhanced scrutiny by leadership.
 - Dr. Hutchins explained that the Quality Improvement Committee carefully reviewed SCHC quality performance when developing the QI plan to select those areas most in need of attention. These were included in the QI Plan to ensure that all team members are aware of the need for improvement and can work together to achieve it.
 - Ms. Lomazzi moved to adopt the *2022 SCHC Quality Improvement Plan* as developed by the Quality Improvement Committee.

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- Ms. Bohamera seconded the motion to adopt the *2022 SCHC Quality Improvement Plan* as developed by the Quality Improvement Committee.
- All CAB members voted "yes" to adopt the *2022 SCHC Quality Improvement Plan* as developed by the Quality Improvement Committee.
- Dr. Hutchins presented the summary of Provider Report Cards for Quarter 2 to the group. She explained the meaning of the color-coding, which helps the reader understand if we have met or are on track to meet the quality metrics.
 - Ms. Winbigler asked how often CAB will be seeing this report.
 - Dr. Hutchins replied that it is intended as a quarterly report.

CAB Governance – *Committee Chairs

- Committees Updates to CAB
 - *Clinical Operations
 - Mr. Gallo informed the group that the Clinical Operations Committee reviewed a program update on the mobile medical van, but this was addressed in Dr. Mishra's report today. In addition, the Clinical Operations Committee reviewed three policies.
 - *PP 04-01 Urgent Services*: Mr. Gallo indicated that this is an update of an existing document. He asked if members had any questions when they reviewed this and the other three policies.
 - *No one had questions.*
 - ❖ Ms. Bluemel moved to approve the presented changes to the *PP 04-01 Urgent Services*.
 - ❖ Ms. Lomazzi seconded the motion to approve the presented changes to the *PP 04-01 Urgent Services*.
 - ❖ *All CAB members voted "yes" to approve the presented changes to the PP 04-01 Urgent Services.*
 - *PP 04-22 Patient Discharge Policy*: Mr. Gallo indicated that CAB had reviewed this document earlier and requested that a patient appeal process be added. Staff amended the policy and procedure and are presenting it for CAB approval.
 - ❖ Ms. Bluemel moved to approve the presented changes to *PP 04-22 Patient Discharge Policy*.
 - ❖ Mr. Gallo seconded the motion to approve the presented changes to *PP 04-22 Patient Discharge Policy*.
 - ❖ All CAB members voted "yes" to approve the presented changes to *PP 04-22 Patient Discharge Policy*.
 - *PP 03-12 Appointment Template Management*: Mr. Gallo told the group that this document had been updated to ensure staff have an appropriate guide to schedule appointments given recent changes at the health center due to the pandemic.
 - ❖ *Mr. Gallo moved to approve the presented changes to PP 03-12 Appointment Template Management.*
 - ❖ *Ms. Bluemel seconded the motion to approve the presented changes to PP 03-12 Appointment Template Management.*
 - ❖ *All CAB members voted "yes" to approve the presented changes to PP 03-12 Appointment Template Management.*
 - *Finance Committee
 - Ms. Bohamera told the group that the Committee reviewed the End of Year Financial Status Report (FSR) in detail. Overall, the Committee concluded that the SCHC budget was in excellent shape. SCHC did not require any additional County General Fund to provide clinic services due to \$3.7 million greater revenue than expected.

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- **PP 11-01 Sliding Fee Discount Program: DEFERRED to September CAB meeting.*
- Update on grants – existing and potential: Ms. Bohamera stated that most grants are on track. One was completed and closed out, as noted on the report in the handouts.
- Governance
 - Strategic Plan monitoring – August Report: Ms. Winbigler informed CAB members that the Committee had discussed with staff the advisability of adjusting some steps and due dates in the Strategic Plan. In particular, as our new HRSA Project Director, Dr. Mendonsa will need more time to evaluate policies and plans regarding remote work at SCHC. The Committee proposed to move this deadline to November 2022.
 - Ms. Winbigler indicated that SCHC needs to secure funding to seek space outside of the footprint of the 4600 Broadway site. Therefore, the Committee proposed to extend the deadline for SCHC leadership to present a plan for additional space to CAB until August 2023.
 - Finally, the Committee proposed to move the deadline for business case for staffing ratios until July 2023.
 - Ms. Winbigler asked if CAB members supported these proposals.
 - Ms. Bluemel moved to approve the changes to the 2021-2023 SCHC Strategic Plan recommended by the Governance Committee.
 - Ms. Bohamera seconded the motion to approve the changes to the 2021-2023 SCHC Strategic Plan recommended by the Governance Committee.
 - All CAB members voted "yes" to approve the changes to the 2021-2023 SCHC Strategic Plan recommended by the Governance Committee
 - Recruitment update: Ms. Winbigler informed the group that Dr. Hutchins reported to the Committee that no additional CAB member applications have been received and there have been no other contacts from potential members.
 - Attendance policy reminder: Ms. Winbigler asked Dr. Hutchins to address this issue. Dr. Hutchins opened the Absence Tracker that CAB used to review at every meeting. Dr. Hutchins reminded CAB members that the Bylaws require CAB member attendance at all monthly meetings. She asked members if any entries in the Tracker needed to be corrected. One correction was offered and made.

Next Meeting Items – All

- Remembrance of CAB Member Nora Aaron Washington
- HRSA Project Director/Medical Director Report
- Final Update on Service Area Competition Application process
- Program Review: Healthy Partners
- July Financial Status Report
- Discussion of Officer Elections
- Committee Updates
 - *Policy and Procedure Review

Public Comment

- Vice-Chair Sultani asked if there were any public comments. None was offered.

Closing Remarks and Adjourn

- Chair Winbigler adjourned the meeting at 11:05 AM.

Next Meeting: Friday, September 9, 2022 from 9:30-10:30 via Zoom or in person (SPECIAL MEETING)

Sacramento County Department of Health Services Health Center Co-Applicant Board (CAB)

Next regular meeting: Friday, September 16, 2022 from 9:30-11:00 via Zoom or in person

*Items that require a quorum and vote.

The Co-Applicant Board welcomes and encourages participation in the meetings.

Matters under the jurisdiction of the Co-Applicant Board and not on the posted agenda may be addressed by the public following completion of regular business.

The agenda is posted on-line for your convenience at <https://dhs.saccounty.net/PRI/Pages/Health%20Center/Co-Applicant%20Board/County-Health-Center-Co-Applicant-Board.aspx>

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