March 16, 2022

12:00 pm-2:00 pm

Conference Call Microsoft Teams

MS Teams Dial-in number: 1-323-457-3408 and Conference ID: 446 778 066#

<u>Due to the Board's AB 361 findings on 2/16/2022, and COVID-19 social distancing requirements, the Community Health Board meetings will be held via teleconference. To join in for audio only, please use the dial in number and Conference ID above.</u>

The County of Solano Community Health Board does not discriminate against persons with disabilities. If you wish to participate in the meeting and you require assistance to do so, please call Solano County Family Health Services at 707-784-8775 at least 24 hours in advance of the event to make reasonable arrangements to ensure accessibility to the meeting.

Public Comment: To submit public comment, please see the options below.

Mail:

If you wish to address any items listed on the Agenda by written comment, please submit comments in writing to FHS Community Healthcare Board Clerk by U.S. Mail. Written comments must be received no later than 8:30 A.M. on the day of the meeting. The mailing address is: Solano County H&SS, ATTN: FHS CHB Clerk (MS 5-240), P. O. Box 4090, Fairfield, CA 94533. Copies of comments received will be provided to the Board and will become part of the official record but will not be read aloud at the meeting.

Phone:

To submit comments verbally from your phone during the meeting, you may do so by dialing 1-323-457-3408, and Conference ID: 446 778 066#. No attendee ID number is required. Once entered in the meeting, you will be able to hear the meeting and will be called upon to speak during the public speaking period.

Non-confidential materials related to an item on this Agenda, submitted to the Board after posting of the agenda at:

https://www.solanocounty.com/depts/ph/bureaus/fhs/community_healthcare_board/ and Family Health Service clinics located at 1119 E. Monte Vista, Vacaville, CA; 2101 Courage Drive, Fairfield, CA; and 365 Tuolumne Drive, Vallejo, CA., will be updated at

https://www.solanocounty.com/depts/ph/bureaus/fhs/community healthcare board/ and emailed upon request. You may request materials by contacting the Clerk at 707-784-8775.

March 16, 2022 12:00 pm-2:00 pm Conference Call Microsoft Teams MS Teams Dial-in #: 1-323-457-3408, Conference ID: 446 778 066#

AGENDA

- 1) CALL TO ORDER 12:00 PM
 - a) Welcome
 - b) Roll Call

2) UPDATE BY DEPUTY COUNTY COUNSEL

At the February 16, 2022, meeting, a majority of the Board voted to make AB 361 findings to allow teleconferencing without compliance with the requirements of Government Code section 54953(b)(3). The prior findings expire the earlier of March 16, 2022, or such time the Board makes subsequent AB 361 findings.

County Counsel recommends the Board consider making AB 361 findings before each meeting.

ACTION ITEM: Consider making the findings that:

- i) Pursuant to Government Code section 8625, Governor Gavin Newsom declared a State of Emergency in the State of California on March 4, 2020, as a result of the threat of the Coronavirus (COVID-19) pandemic; and the proclaimed State of Emergency remains in effect; and,
- ii) As of the date of this Meeting, neither the Governor nor the state Legislature have exercised their respective powers pursuant to Government Code section 8629 to lift the state of emergency either by proclamation or by concurrent resolution the state Legislature; and,
- iii) The California Department of Industrial Relations has issued regulations related to COVID-19 Prevention for employees and places of employment. Title 8 of the California Code of Regulations (CCR), Section 3205(5)(D) specifically recommends physical (social) distancing as one of the measures to decrease the spread of COVID-19 based on the fact that particles containing the virus can travel more than six feet, especially indoors; and.
- iv) Based on the California Department of Industrial Relations' issuance of regulations related to COVID-19 Prevention through Title 8 of the California Code of Regulations, Section 3205(c)(5)(D), the Board finds that state or local officials have imposed or recommended measures to promote social distancing; and,
- v) California Department of Public Health ("CDPH") and the federal Centers for Disease Control and Prevention ("CDC") caution that the Delta variant of COVID-19, currently the dominant strain of COVID-19 in the country, is more

transmissible than prior variants of the virus, may cause more severe illness, and that even fully vaccinated individuals can spread the virus to others resulting in rapid and alarming rates of COVID-19 cases and hospitalizations (https://www.cdc.gov/coronavirus/2019-ncov/variants/delta-variant.html); and

- vi) Board members and members of the public interested in the issues brought before the Board are predominantly involved with a frontline community healthcare clinic, which has been shown to be particularly risky setting for COVID-19 transmission, requiring increased Occupational Safety and Health Administration (OSHA) safety standards; and,
- vii) As a result, the Board hereby proclaims that state officials have imposed or recommended measures to promote social (physical) distancing based on the California Department of Industrial Relations' issuance of regulations related to COVID-19 Prevention through Title 8 of the California Code of Regulations, Section 3205(c)(5)(D) and holding meetings in person would present imminent risks to the health or safety of attendees; and,
- viii)The Board will conduct open and public remote teleconferencing meetings in accordance with AB 361 immediately upon making these findings until the earlier of (1) April 16, 2022, or (2) such time that the Board makes subsequent findings in accordance with Government Code section 54953(e)(3) to extend the time during which the Board may continue to teleconference without compliance with Government Code section 54953(b)(3), or (3) the Governor or the state Legislature have exercised their respective powers pursuant to Government Code section 8629 to lift the state of emergency.
- 3) APPROVAL OF THE AGENDA
- 4) APPROVAL OF THE MINUTES
 November 17, 2021
 December 15, 2021
 February 16, 2022
- 5) 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. Due to COVID-19, the public can join as audio only. 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.

6) PROJECT DIRECTOR / CLINIC OPERATIONS OFFICER REPORT

- a) Health Center Operations Update Dona Weissenfels
 - i) Health Center Activities, Internal & External Update
 - ii) Dashboard Introduction, Call Center Metrics
- b) Staffing Update Toya Adams

7) **OPERATIONS COMMITTEE REPORTS AND ACTION ITEMS**

- a) Hiring Credentialing Update Niccore Tyler
- b) H80 Grant and H8F Grant Third Quarter Budget Revisions Noelle Soto
 - ii) ACTION ITEM: The Board will consider approval of the H80 Grant and H8F Grant - Third Quarter Budget Revisions
- c) Quarterly Quality Improvement Report Athena Gabriel
- d) Quality Program Evaluation/Program Description Introduction Upcoming -Dona Weissenfels

UNFINISHED BUSINESS 8)

- a) Credentialing Privileging Policy and Procedure This item will be presented to the Board for approval, pending Compliance review of policy.
- b) HIPS/HIPAA Training This training will be scheduled to be presented to the Board, after new members are added to the Board.
- c) Confidentiality Form This form will be presented and distributed to the Board Members and must coincide with HIPAA Training.

9) DISCUSSION

Future Topic: FHS Service Utilization (Compliance Manual, Chapter 10)

9) **BOARD MEMBER COMMENTS**

- PARKING LOT (These items are postponed, until further notice.) 10)
 - a) Compliance Training and Robert's Rules Review
 - b) Health Center Marketing Campaign & Website Design

11) **NEXT COMMUNITY HEALTHCARE BOARD MEETING**

DATE:

April 20, 2022

TIME:

12:00 PM

TO JOIN: Telephone Conference Call

Dial: +1-323-457-3408, Conference ID: 446 778 066#

12) **ADJOURN**



DRAFT

REGULAR GOVERNING BOARD MEETING MINUTES

Wednesday, November 17, 2021 (Please note: we experienced technical difficulties with sound.) Video and Telephone Conference Call

Members Present:

At Roll Call: Ruth Forney, Sandra Whaley, Katrina Morrow, Mike Brown, Gerald Hase, Anthony Lofton, Miriam

Johnson, Brandon Wirth, and Tracee Stacy

Members Absent: Jim Jones

Staff Present:

Dr. Michele Leary, Dona Weissenfels, Toya Adams, Gerald Huber, Noelle Soto, Clarisa Sudarma, Julie Barga, Tess Lapira, Nina Delmendo, Janine Harris, Cheryl Esters, Jannett Alberg, Thomas West, Florentina Certuche, Danielle Seguerre-Seymour, and Patricia Zuñiga

- 1) Call to Order 12:02 p.m.
 - a) Welcome
 - b) Roll Call

2) Update by Deputy County Counsel

- a) Update on AB 361 signed by Governor Newsom on September 16, 2021, revises Government Code section 54953 of the Brown Act and permits legislative bodies to hold meetings via teleconference without compliance with the requirements of Government Code section 54953(b)(3), subject to certain conditions. The Deputy County Counsel, Clarisa explained that in order to continue virtual meetings, the findings of AB 361, must be met and then the Board Members took a vote, whether meeting in person would pose imminent danger to their health.
 - i) ACTION ITEM: The Board will consider making the findings as noted in Agenda item 2) a) i), ii), iii), iv) and v), due to the COVID-19 Pandemic, whether it may pose imminent danger, to the Board Members to meet in person, and if the Board makes subsequent findings to pose imminent danger, thus Board may continue to teleconference.

Motion:

To adopt the findings of the Governor's Bill AB 361, because meeting in person poses imminent risk, to the health of the Board Members and attendees and vote to continue to meet virtually, without having to do the noticing as required by the Brown Act.

Motion by: Mike Brown and seconded by Anthony Lofton

Discussion: None.

Ayes:

Nays:

Ruth Forney, Sandra Whaley, Katrina Morrow, Mike Brown, Gerald Hase, Anthony

Lofton, Miriam Johnson, Brandon Wirth, and Tracee Stacy

Abstain:

Motion Carried - The Board moved forward with a virtual meeting.



3) Approval of November 17, 2021, Agenda

Motion:

To approve the November 17, 2021, Agenda

Motion by: Brandon Wirth and seconded by Anthony Lofton

Discussion: None

Ayes:

Ruth Forney, Sandra Whaley, Katrina Morrow, Mike Brown, Gerald Hase, Anthony Lofton,

Miriam Johnson, Brandon Wirth, and Tracee Stacy

Nays:

None

Abstain:

None

Motion Carried

4) Public Comment

None.

5) Project Director/Clinic Operations Officer Report

- a) Health Center Operations Update
 -) On-boarding Report
 - Dona stated it has been almost sixty (60) days, so she is giving a 60-day update. She
 has been engaging with outside entities.
 - She gave her 90-day and 120 day plan.
 - She mentioned that she would like to engage Board Members over the next few months.
 - In December, Dona will be meeting with outside vendors. Board Member Tracee requested feedback from the vendors and hoped it will be positive.

ii) Partnership HealthPlan of California

- She has had discussions with Partnership HealthPlan of California (PHC), and the hope
 is to open the Fairfield Adult Clinic in late December and unconsolidated the Fairfield
 Adult and Pediatrics clinics. She will give an update at the December meeting.
- She mentioned that letters are being sent to the patients.
- She mentioned that PHC sent Family Health Services (FHS), a Corrective Action Letter.
 In response to the Corrective Action Letter, on behalf of FHS, Dona sent a response to PHC. Dona promised to send copies of these letters to the Board Members. It was noted that on 11/17/2021, after the meeting, the CHB Clerk, Patricia Zuñiga sent copies of those letters to all the Board Members in the format of emails, as attachments and paper copies through the Post Office to those members that receive USPS mail correspondence.



b) Staffing Update

- i) Dona mentioned that Dr. Michele Leary and the HR Credentialing Team are doing a great job in preboarding four (4) provider candidates.
- ii) Dona mentioned that two (2) Health Service Managers are expected at the end of November and December.
- iii) Dona gave kudos to the efforts of the FHS Hiring Team coordinating with Human Resources and Credentialing, to streamline the hiring process.
- iv) Dona stated there is recruiting for Physicians and Supervising Physicians.

6) Operations Committee Update Reports

- a) 2019 2022 Strategic Plan Update Dona Weissenfels
 - Dona mentioned the Strategic Plan was a good plan, but it hasn't been implemented, due to COVID. She asked that the plan be refreshed and implement it and see where to go moving forward.
 - ii) Board Member, Brandon Wirth, thanked Dona and stated that the Plan is key and that it is good to communicate and discussed at the executive level and the strategy to implement it.
 - iii) Dona was pleased and is being transparent in working with the Board to implement the Plan. Due to a lot of COVID struggles, FHS hasn't been able to implement the plan.
 - iv) Board Member, Tracee Stacy, asked to put this on future agendas, and provide updates, to keep track of how it progressing. Dona responded and said it would be added to future agendas.
- b) Cash Handling P9olicy Number 100.02 Updates Janine Harris
 - Janine reviewed the updates in the Family Health Services Cash Handling Policy Number 100.02", in detail, with the Board Members and participants at the meeting.

Action Item: Consider approval of the updated Cash Handling Policy Number 100.02

Motion: To approve the updated Cash Handling Policy Number 100.02

Motion by: Brandon Wirth and seconded by Sandy Whaley

Ruth Forney, Mike Brown, Tracee Stacy, Brandon Wirth, Gerald Hase, Anthony Lofton, Sandra Whaley (Katreena Morrow and Miriam Johnson didn't roply)

Lofton, Sandra Whaley (Katreena Morrow and Miriam Johnson didn't reply.)

Discussion: None

Nays: None

Abstain: None

Motion carried.

7) Unfinished Business

Ayes:

- a) Credentialing Privileging Policy and Procedure This item will be presented to the Board for approval, pending completion of policy review by Compliance.
 - Cheryl stated it was not ready yet.



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8) Discussion

- a) Chair, Ruth Forney, announced that nominations are being accepted today for the Officer positions. She reviewed those in current Executive Positions, that were up for nominations. Currently, the Chair is Ruth Forney, the Vice Chair is Jim Jones, and the Member at Large is Katreena Morrow. She asked the Board Members to consider nominations, they would like to make at the December meeting.
 - i) Board Member, Brandon Wirth, asked Mike if he was interested on the Executive Committee. Mike's response was he doesn't have time. He also asked that any future Board Members recruited be available to participate on the Executive Committee. He asked if Gerald would be interested, and Gerald stated that he thought that other members on the board would be better to participate on the Executive Committee. He asked Sandra if she was interested, but she mentioned that she is expecting and would be expecting early next year, so she is unable to participate. He asked that officers be rotated, and all Board Members consider to hold an officer position. He would like to ask if Katreena and Jim are interested in a second term.
 - ii) Board member, Brandon Wirth, reviewed the terms of the Officers, and stated they are all one-year terms and up to four (4) terms.
 - iii) Chair, Ruth Forney, read the terms of officers from the CHB Bylaws: The Chair shall hold office for a maximum of one year, or until a successor is appointed and approved. All members of each committee should hold office for one year and a person should be limited to no more than four (4) consecutive terms of membership. The bylaws were written in 2015. They were readopted in 2019, when the Board became a 330E.
 - iv) A request was made to the Executive Committee, to prepare a history of all the officers that have served on the Board.
 - v) Chair, Ruth Forney, mentioned that she would reach out to Katrina, Jim, and Anthony, to find out if they are interested.

b) Board Member Recruitment

- i) Chair, Ruth Forney, asked the Board Members and staff to reach out to others, if they are interested in being a Board Member. She also mentioned she will work with Dona to update the recruitment flyer. She also asked to forward names to the Clerk, Patricia Zuñiga. She also mentioned that she would like to see the membership more diversified, and represent the Filipino, American Indian and Hispanic communities. Once the flyers are finalized, they will be in the clinic waiting rooms.
- ii) Board Member, Brandon Wirth, asked the Executive Committee to revisit the main points, why someone should serve on the Board, noted on the flyer. In terms of reaching out to others, he asked if the flyer could be emailed to the patients, in the database. Clarisa, mentioned that it would probably depend on what is permissible to send to the patient database, and there are prohibited mask mailing rules. Dona recommended not to use a mass email and asked that members reach out.
- iii) Dona mentioned that there are currently five (5) patients as Board Members, and more are needed on the Board.
- iv) Chair, Ruth Forney, stated she will work with Dona and the Executive Committee and asked that all those interested be or the Executive Committee.
- c) Review 2022 Community Healthcare Board Calendar (Additions/Deletions)



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- i) A Board Member asked that Strategic Plan be on the December agenda. Clerk, Patricia stated the Strategic Plan is on the calendar for December 2021. She mentioned that she would like to have a report of well child visits, for example. Dona responded that she is creating a matrix, that would include the well child visits and report out on them. Tracee would like to get a report out of childhood vaccinations as well.
- ii) Nina Delmendo, Policy and Financial Manager, requested that the timing of the Quarterly Financial Reports be moved. She requested to report out in the months of January, April, August, and October and remove from the months of March, June, September, and December. She explained to the Board that she would have more accurate numbers to present, due to when she receives her reports.
- iii) Dr. Leary, Chief Medical Officer, requested that the Strategic QA/QI Plan be presented in June, in the years of 2022 and 2024.
- iv) With these changes, can the Executive Committee discuss the changes and present an updated calendar in December.

9) Action Items

- a) Consider approval of the updated Cash Handling Policy Number 100.02
 - i) Note: This was voted and approved by the Board during Agenda Item 6b).

10) Board Member Comments

- a) Chair, Ruth Forney, mentioned that everyone is doing a great job at the COVID-19 vaccinations, at the Vallejo Fairgrounds!
- Chair, Ruth Forney, mentioned that Congressman, John Garamendi, is scheduled to take a tour on November 29, 2022, 11:30am – 12:30pm, and she invited all Board Members and staff to attend.
 - i) Board Member, Brandon Wirth, encouraged all Board Members to attend Congressman Garamendi's tour. Patricia sent an email to the Board Members as a reminder and asked for a confirmation if attending.
 - Chair, Ruth Forney, stated she would also invite Board of Supervisor, Vasquez to the Congressman's tour.
 - iii) Clarisa mentioned that Jerry Huber, H&SS Director, put the following comment in the chat: We could do a posting at the clinic sites as well, in terms of recruiting new Board Members. Child vaccines are being done through the Mass Vax site in Vallejo and at schools primary and Kaiser are doing their own to a certain extent, for their members.

11) Parking Lot (These items are postponed, until further notice.)

- a) Compliance Training and Robert's Rules Review
- b) Health Center Marketing Campaign & Website Design
- c) The IHI Quadruple Aim Initiative *Health Center Practices*

12) Next Community Healthcare Board Meeting

DATE:

December 15, 2022

TIME:

12:00 p.m.

TO JOIN:

Telephone Conference Call

Dial: 1-323-457-3408, Conference ID: 446 778 066#



DRAFT

13) Adjourn

Meeting was adjourned at 1:58 p.m.

Handouts:

- AB 361 Open meetings: state and local agencies: teleconferences
- Solano County Family Health Services Strategic Plan 2019-2022
- Family Health Services Cash Handling Policy Number: 100.02
- Family Health Services Community Health Care Board Recruitment Flyer
- Draft Family Health Services Community Healthcare Board 2022 Annual Calendar, updated 11/8/2021



DRAFT

REGULAR GOVERNING BOARD MEETING MINUTES

Wednesday, December 15, 2021 Video and Telephone Conference Call

Members Present:

At Roll Call: Ruth Forney, Sandra Whaley, Katrina Morrow, Mike Brown, Gerald Hase, Anthony Lofton, Miriam Johnson, Brandon Wirth, and Tracee Stacy

Members Absent:

Staff Present:

Dr. Michele Leary, Dona Weissenfels, Toya Adams, Noelle Soto, Ana Mae Gonzales-Smith, Clarisa Sudarma, Julie Barga, Tess Lapira, Nina Delmendo, Janine Harris, Cheryl Esters, Jannett Alberg, Thomas West, Niccore Tyler, Florentina Certuche, and Danielle Seguerre-Seymour

- 1) Call to Order 12:03 p.m.
 - a) Welcome
 - b) Roll Call

2) Update by Deputy County Counsel

- a) Update on AB 361 signed by Governor Newsom on September 16, 2021, revises Government Code section 54953 of the Brown Act and permits legislative bodies to hold meetings via teleconference without compliance with the requirements of Government Code section 54953(b)(3), subject to certain conditions. The Deputy County Counsel, Clarisa explained that in order to continue virtual meetings, the findings of AB 361, must be met and then the Board Members took a vote, whether meeting in person would pose imminent danger to their health.
 - i) ACTION ITEM: The Board will consider making the findings as noted in Agenda item 2) a) i), ii), iii), iii), iv) and v), due to the COVID-19 Pandemic, whether it may pose imminent danger, to the Board Members to meet in person, and if the Board makes subsequent findings to pose imminent danger, thus Board may continue to teleconference.

Motion:

To adopt the findings of the Governor's Bill AB 361, because meeting in person poses imminent risk, to the health of the Board Members and attendees and vote to continue to meet virtually, without having to do the noticing as required by the Brown Act.

Motion by: Mike Brown and seconded by Anthony Lofton

Discussion: None.

Ayes: Ruth Forney, Sandra Whaley, Katrina Morrow, Mike Brown, Gerald Hase, and Anthony

Lofton

Navs:

Abstain: Miriam Johnson

Motion Carried – The Board moved forward with a virtual meeting.



DRAFT

3) Approval of December 15, 2021, Agenda

Motion:

To approve the December 15, 2021, Agenda

Motion by: Sandy Whaley and seconded by Mike Brown

Discussion: None

Ayes:

Ruth Forney, Sandra Whaley, Katrina Morrow, Mike Brown, Gerald Hase, Anthony Lofton,

Brandon Wirth, and Miriam Johnson

Nays:

None

Abstain:

None

Motion Carried

4) Approval of the October 17, 2021, Meeting Minutes

Motion: To approve the October 17, 2021, Meeting Minutes

Motion by: Sandy Whalen and seconded by Mike Brown

Discussion: None

Ayes:

Ruth Forney, Sandra Whaley, Katrina Morrow, Mike Brown, Gerald Hase, Anthony Lofton,

Miriam Johnson, and Tracee Stacy

Nays:

None

Abstain:

None

Motion Carried

5) Public Comment

None.

6) Project Director/Chief Executive Officer Report

- a) Health Center Operations Update
 - Dona Weissenfels, mentioned that she has been at the clinics for 95 days and gave the last of her 90-day orientation report. She has focused on growth and reviewing current expansion efforts.
 - Dona mentioned that she is engaged Greg Faktor, and Associates, who assisted with the Family Health Services (FHS) 2019 Onsite Visit, the Strategic Plan, and the Community Needs Assessment. They are in discussions about pricing and needs.
 - iii) Dona shared that the Uniform Data System (UDS) report will be submitted in January 2022. Once it is submitted, they can begin working with Greg Faktor and Associates, on the Community Needs Assessment, maybe in February or March 2022.



DRAFT

iv) She mentioned that there needs to be a strategy refresh of the Strategic Plan, about the same time as the Needs Assessment. There will be an invitation to the Board of how they would like to be involved.

b) Staffing Update

- i) Dona mentioned that Toya Adams would present the Staffing Update. There has been a lot of improvement in streamlining the hiring process and Toya's Hiring Team has been doing a good job in moving forward with the recruitment and hiring.
- ii) Toya mentioned there are four (4) mid-level Provider candidates, in various stages, in background. She expects one (1) Provider in January 2022 and the other three (3) Provider candidates soon, so all four (4) Provider candidates will arrive by the end of March 2022.
- iii) Toya also mentioned one (1) Clinic RN is in the background phase and there are three (3) potential RN candidate applicants in the precertification stage. There are also multiple Medical Records, Sr., candidate applicants and Medical Assistant candidate applications, in the precertification phase and would be concluding Accounting Clerk II interviews by the end of the day.
- iv) Dona thanked Toya for presenting the Staffing Update, as it was her day off.
- Dona mentioned FHS had a very successful and positive, two-hour, Town Hall Meeting for all staff on December 9, 2021. She thanked Dr. Matyas and Ruth for participating and giving the Public Health and Board's perspective. There were clinic updates, accomplishments and achievements were mentioned, and did de-escalating training to keep patients and staff safe. She mentioned the goals and focus for 2022, were: workload efficiency and standardization in the clinics; schedule optimization; and with the HRSA onsite visit in fall of 2022 the clinics need to make sure they are prepared for that audit; and major project implementation from the Strategic Plan.

c) 340B Application

i) There is a 340B Program, which is a great benefit to those patients that are very sick and have a high amount of pharmacy costs. She mentioned thanks to Janine and Anna Mae, who have resurrected this program and to find a vendor for this program.

d) Federal Tort Claims Act (FTCA) Application

- i) This is a malpractice application, where the government will pay the malpractice for community health centers. It's focus is credentialing, risk management and other areas. There is much preparation needed, in order to complete and file the application.
- ii) Niccore Tyler, H&SS Admin Services Manager, who heads the Credentialing Team was invited to report about Credentialing activities, of the clinic staff, to the Board, which is a new topic and important as well. Niccore gave an update on credentialing. She will be reporting on credentialing at future meetings and giving the Board updates.
 - December has been a very good month and in December Partnership gave approval
 for three (3) providers, which is a huge win. Two (2) of the providers are mid-level and
 hopefully will start in the clinics soon. The third provider is a Touro DO who will
 provide OMM Services in the clinics.
 - Pending is one mid-level provider and hope to have them be reviewed in January by Partnership and then have them be onboarded. Also pending are live scan results for another mid-level provider and a Clinic RN, so they can move forward with the credentialing.



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- They are really busy, but are excited, because the recruitment and hiring efforts are
 key and critical to the success of the clinics. Dona and her Hiring Team have been great
 working with and supporting the Credentialing Team! Looking forward to the ongoing
 partnership and continued success in onboarding providers, for our patients.
- They run monthly sanction checks on all providers in the clinics, as is required and will be reporting on these at future meetings, to ensure everyone is in good standing.

7) Operations Committee Update Reports

Dona mentioned that the clinics are on target to unconsolidated the Fairfield clinics on December 20, 2021, so adult patients will be seen at the Fairfield Adult Clinic at 2201 Courage Drive.

- a) 2019-2022 Strategic Plan Update Dona Weissenfels
 - i) Dona mentioned there is more to come and Greg Faktor will be sending a proposal soon. Once the proposal is received, Dona will bring it to the Board and ask the Board for their input in moving forward with the Strategic Plan.
- b) Quarterly Quality Improvement Report Dr. Michele Leary
 - i) Dr. Leary apologized for the poor color quality of the report, that was distributed and that she will be presenting an updated report, which she displayed on the screen, that had updated data, compared with the handout.
 - ii) Dr. Leary reviewed the updated version of the Community Healthcare Board Clinical Quality Improvement Report, Solano County Family Health Services, November 2021, with the Board Members and participants at the meeting.
 - iii) Because the report presented was the updated copy, a copy will be made available and posted on the web page after the meeting, so the Board Members and public will have access to it.
 - iv) Chair, Ruth Forney, asked about the Asthma Medication Ratio slide, whether nutrition was taken into consideration, to educate patients that certain foods could affect their asthma. Dr. Leary stated that for the initiative, the slide notes short acting and long acting prescribed inhalers. As part of the provider's training, they review allergy induced asthma and the tactics to use for allergy induced asthma as part of their overall education, Geno report and how to handle asthma in general. The initiative does not take nutrition into account.
 - v) Dona wanted to commend Dr. Leary and the Quality Team. These quality measures are patients that are pulled into the clinics or identified when they walk in. This is a really heavy lift. The team is great and it's all about the patients.
- c) Service Area Competition (SAC) Application Noelle Soto
 - i) Noelle reviewed the SAC Application budget, County of Solano Family Health Services Budget Summary, FY 2022 Health Center Program, Grant Number H80CCS04218, Support Year 18 May 1, 2022, to April 30, 2023, in detail, with the Board Members and participants at the meeting.
 - ii) Before she reviewed the budget, she clarified that she would review the budget for the overall SAC application. HRSA requires Board approval, for specifically what the clinics are doing for the budget items and with the money that, in this case, the clinics have reapplied. The SAC application is about 60+ pages.



DRAFT

- iii) The SAC was submitted and due. In our case it's a competing continuation application. This competing period is a continuation of our overall health center funds and our healthcare for the homeless funding. It was submitted in two phases, with the first submitted in October and the second phase submitted in November.
- iv) The performance period is from May 1, 2022, through April 30, 2025, and within that period there are three (3) separate funding years. The amount awarded that we apply for is \$1, 725,661.00 per year, 2022 through 2023, and 2023 through 2024 and 2024 through 2025. The distribution is 75% to community healthcare center funding and 25% to healthcare for the homeless funding.
- v) Dona mentioned that she will be meeting with HRSA Project Officer, Kathleen Ruck on December 20, 2021, so it's possible they will discuss the SAC Application, so be sure we are on track.
- vi) It was noted that to ensure all grant funding is spent or drawn down, the Grants Team meets bi-weekly, to keep on track and spend all grant funding in a timely manner.

8) Unfinished Business

- a) Credentialing Privileging Policy and Procedure This item will be presented to the Board for approval, pending completion of policy review by Compliance.
 - i) It was mentioned that the policy needs to be reviewed to ensure it fits FHS and current practices and ensure it includes best practices.

9) Discussion

- a) Review of handout of previous Executive Positions: Election Results
 - As requested by a Board Member, Chair, Ruth Forney, stated that all Board Members received the handout, showing those board members that held executive positions from 2017 to 2021.
- b) Review Bylaws, Article X: Officers
 - i) As requested by a Board Member, Chair, Ruth Forney, shared Article X, of the Bylaws, which describes the terms of offices.
- c) Board Nominations for Executive Positions: Chair, Vice Chair and Member at Large
 - i) Chair Gerald Hase, Katrina Morrow and Anthony Lofton nominated Ruth Forney.
 - ii) Vice Chair Gerald Hase, Katrina Morrow and Anthony Lofton nominated Mike Brown.
 - iii) Member at Large Gerald Hase nominated Anthony Lofton.

10) Action Items

a) Accept Resignation of Jim Jones, Vice Chair

Motion: To Accept Resignation of Jim Jones, Vice Chair, as of December 1, 2021

Motion by: Mike Brown and seconded by Sandy Whaley

- b) Board Elections will be an open vote process due to meeting restrictions:
 - 1. Each Nominee will make a brief statement.
 - i) Chair Ruth Forney: She didn't see any other nominations for Chair and said she would have been fine if someone else was nominated. She mentioned as a retiree



from Solano County, she values all the work at the clinics, and it's her passion to look out for the less fortunate, served by the clinics.

- ii) Vice Chair Mike Brown: He accepted the nomination. He stated since the Congressman's visit and he likes what he sees in the clinics, what the staff are doing, and he likes being a part of the Team as a Board Member. He has seen a lot of growth and he likes what's going on in Vallejo and he wants to help further with the health clinics and the people in the community.
- iii) Member at Large Anthony Lofton: Since he is at the Christian Help Center, he felt privileged, because he likes to help people, any way he can and that's what he feels he needs to do. He stated it was an honor.
- 2. One person will be elected for each position:
- 3. After votes are tallied, the Board will vote to approve the appointments of Board Members elected.
- 4. Election process is now turned over to the CHB Clerk, Danielle Seguerre-Seymour

Motion:

To approve the slate.

Motion by: Miriam Johnson and seconded by Gerald Hase

Ayes:

Ruth Forney, Mike Brown, Gerald Hase, Miriam Johnson, Anthony Lofton, Katrina

Morrow, Tracee Stacey, Sandra Whaley, Brandon Wirth

Discussion: None

Nays:

None

Abstain:

None

Motion carries.

c) The Board will consider approval of the Service Area Competition (SAC) Application

Motion: To approve the SAC Application Updates

Motion by:

Mike Brown and seconded by Sandy Whaley

Aves:

Ruth Forney, Mike Brown, Gerald Hase, Miriam Johnson, Anthony Lofton, Katrina

Morrow, Tracee Stacey, Sandra Whaley, Brandon Wirth

Discussion:

None

Nays:

None

Abstain:

None

Motion carries.

d) Consider approval of the 2022 Community Healthcare Board Calendar

Motion:

To approve the 2022 Community Healthcare Board Calendar

Motion by:

Anthony Lofton and seconded by Katrina Morrow



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Ayes:

Ruth Forney, Mike Brown, Gerald Hase, Miriam Johnson, Anthony Lofton, Katrina

Morrow, Sandra Whaley, Brandon Wirth

Discussion:

None

Nays:

None

Abstain:

None

Motion carries.

11) Board Member Comments

- a) Miriam congratulated Ruth and the other two members! She announced that she will be resigning as a Board Member this week. She commended Dona and staff, on how things have improved since she has been onboard.
- b) Mike thanked Ruth for Congressman's visit, and he gave the Board and clinics suggestions to apply for funding for the clinics.
- c) Chair, Ruth Forney, mentioned the Garamendi's article, which was included in the packet. She thanked several people in making it a productive tour. She disclosed that the food was a contribution to the group. She thanked everyone. She also mentioned there was discussion about the \$32,000,000.00 in the American Rescue Plan and mentioned there is also \$10,000,000.00 in the Build Back Better. If it gets approved, it could provide funding to expand facilities.
- d) Chair, Ruth Forney, also mentioned that since we are in recruiting mode, and as we bring on new board members, Roberts Rules and Compliance training will be provided.

12) Parking Lot (These items are postponed, until further notice.)

- a) Compliance Training and Robert's Rules Review
- b) Health Center Marketing Campaign & Website Design
- c) The IHI Quadruple Aim Initiative *Health Center Practices*

13) Next Community Healthcare Board Meeting

DATE:

January 19, 2022

TIME:

12:00 p.m.

TO JOIN:

Telephone Conference Call

Dial: 1-323-457-3408, Conference ID: 446 778 066#

14) Adjourn

Meeting was adjourned at 1:23 p.m.

Handouts:

- News article, "Garamendi Discusses Efforts for Solano Businesses, Healthcare, and First Responders During Solano County Work Day"
- Community Healthcare Board Clinical Quality Improvement Report, Solano County Family Health Services, November 2021
- County of Solano Family Health Services Budget Summary, FY 2022 Health Center Program, Grant Number H80CCS04218, Support Year 18 – May 1, 2022, to April 30, 2023.
- Community Healthcare Board Officers, Historical Data
- Community Healthcare Board Bylaws Article X: Officers, Page 15
- Family Health Services Community Healthcare Board 2022 Annual Calendar, revised 11/8/2021.



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REGULAR GOVERNING BOARD MEETING MINUTES

Wednesday, February 16, 2022 Video and Telephone Conference Call

Members Present:

At Roll Call: Ruth Forney, Mike Brown, Gerald Hase, Anthony Lofton, Tracee Stacy, and Brandon Wirth.

Members Absent: Katrina Morrow and Sandra Whaley.

Staff Present:

Gerald Huber, Dr. Michele Leary, Dona Weissenfels, Bela Matyas, Debbie Vaughn, Toya Adams, Noelle Soto, Clarisa Sudarma, Nina Delmendo, Janine Harris, Cheryl Esters, Tess Lapira, Jannett Alberg, Thomas West, Niccore Tyler, Julie Barga, Kathryn Power-Partnership HealthPlan of CA (PHC), Thomas West, Patricia Zuñiga.

- 1) Call to Order 12:04 p.m.
 - a) Welcome
 - b) Roll Call

2) Update by Deputy County Counsel

a) At the February 16, 2022, meeting, a majority of the Board voted to make AB 361 findings to allow teleconferencing without compliance with the requirements of Government Code section 54953(b)(3). The prior findings expire the earlier of March 16, 2022, or such time the Board makes subsequent AB 361 findings.

County Counsel recommends the Board consider making AB 361 findings before each meeting.

i) ACTION ITEM: The Board will consider making the findings as noted in Agenda item 2) a) i), ii), iii), iv), v), vi), vii), and viii), due to the COVID-19 Pandemic, whether it may pose imminent danger, to the Board Members to meet in person, and if the Board makes subsequent findings to pose imminent danger, thus Board may continue to meet virtual.

Motion:

To accept and approve the findings of the Governor's Bill AB 361 and move forward to

meet via teleconference.

Motion by: Mike Brown and seconded by Gerald Hase

Discussion: None.

Ayes:

Ruth Forney, Mike Brown, Tracee Stacy, and Gerald Hase

Nays:

Brandon Wirth

Abstain:

None.

Motion Carried - The Board moved forward with a virtual meeting.

3) Approval of February 16, 2022, Agenda



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Motion:

To approve the February 16, 2022, Agenda

Motion by: Mike Brown and seconded by Gerald Hase

Discussion: None

Ayes:

Ruth Forney, Mike Brown, Brandon Wirth, Gerald Hase, and Tracee Stacy

Nays:

None

Abstain:

None

Motion Carried

4) Approval of January 19, 2022, Minutes

Motion:

To approve the January 19, 2022, Minutes

Motion by: Mike Brown and seconded by Gerald Hase

Discussion: None

Ayes:

Ruth Forney, Mike Brown, Brandon Wirth, Gerald Hase, and Tracee Stacy

Nays:

None

Abstain:

None

Motion Carried

5) Public Comment

None.

6) Project Director/Clinic Operations Officer Report

- a) Health Center Operations Update Dona Weissenfels
 - Dona reminded everyone that what we do, it's all about our patients.
 - ii) Dona mentioned that Board Member Recruiting letters were sent to six (6) patients, but no response has been received yet. Everyone in attendance was asked to notify Dona of any patients, they would like to suggest as a Board Member.
 - iii) She mentioned that audits have been done by Partnership HealthPlan of California (PHC), and Uniform Data System (UDS) report has been submitted to HRSA. So far, there have been positive results. There was a turnaround deficit in Medical Records. She will report on the results of the PHC audits when received.
 - iv) The Cap imposed on the clinics, was affected, because our staffing levels were low in the Fairfield clinic, so the adult and pediatric clinics were consolidated for a few months, then returned to separate clinics. There has been an increase in staffing, close to fully staffing the Fairfield clinics. The plan is to fully staff the Fairfield clinic in late March or April.



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- v) Dona mentioned there are major activities in the clinics. There is a major grant for improvement of equipment, and an audit was performed by the County on patient scheduling issues and the call centers. As a result of the County audit, a written plan is in the works, for a pilot process. The recordings will be available to leadership. There is a need for standardization with all three (3) call centers in Fairfield, Vallejo and Vacaville, and training will be done as well.
- vi) Dona mentioned that recently the regulation of "No Surprise Act", was thought that it didn't apply to FQHCs, but it does. This was issued in late September and the clinics were notified in December. It is a "Good Faith Estimate", so patients can be notified, when scheduling their appointment of the fee they would be asked to pay. This was supposed to be in effect in January 2022, so Janine's Finance Team will be handling this. All the FQHCs were surprised, as in the past this was intended for hospitals. Letters will be sent to patients. If the patient is charged using the sliding fee scale, the FHS representative will notify the patient of the fee or if it does not apply to the patient, the FHS representative will send a Medi-Cal application to the patient. A template is being finalized and will keep the Board informed on the progress of this project.
- vii) Dona had good news! The clinics have been approved for two major NextGen upgrades this fiscal year. The first is for Cloud based services, which will enhance security and will allow to add other services. The other is for telehealth continued services, to provide telehealth appointments. She is submitting a request for patient portal for next fiscal year, which will provide additional options of communication with our patients, for example text messaging.
- viii) She also mentioned that FHS is in the initial discussion phase of exploring EPIC, with Health and Social Services Administration, which is a more efficient electronic health record (EHR) and is utilized by other health centers and hospitals. The process of changing to another EHR for the health centers is up to a four-year process.

b) Staffing Update - Toya Adams

- i) One (1) Physician Assistant (PA) provider started at the Vallejo Clinic and there are three
 (3) more providers and one (1) Clinic RN expected to start this month.
- ii) A Health Services Manager (HSM) candidate, for Vallejo, has been chosen and actively recruiting for another HSM for Vacaville.
- iii) There are two (2) Medical Record Technician, Seniors (MRTSs), extra help in background and recruiting for Medical Assistants and other positions.
- iv) There are three (3) Clinic Physician Supervisors in background.

c) COVID Update - Dr. Matyas

- i) Dr. Matyas stated that the COVID numbers are better, and the numbers peaked the first two (2) weeks in January, due to the holiday season. During the peak, the positive cases were about 1400 per day, and currently they are down to about 100 per day. Also hospitalizations are less than half, than earlier and the numbers of cases in the ICU are down and there are less people testing for COVID and less outbreaks reported. The Omicron surge has been decreasing rapidly.
- ii) He mentioned that the population that are vaccinated are at good levels. About 81% of the Solano County population have received at least one dose, 71% have received two (2) doses or are fully vaccinated and about 46% of the population have received the booster.



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- iii) He noted that with the age group of age 5 to 11 are only about 31 to 32% vaccinated which may indicate that parents are reluctant to get their children vaccinated.
- iv) He announced that as of today, February 16, 2022, there are twelve (12) Bay Area counties, in alignment with the State, that lifted universal mask requirements for most indoor public settings, for those that are vaccinated. Indoor masking is still required by the State for everyone, regardless of vaccination status, in public transportation, health care settings, congregate settings like, correctional facilities, and homeless shelters, long term care facilities and K-12 schools and childcare settings. Continuing to wear a mask is up to the individual.

7) Operations Committee Update Reports

- a) 2019-2022 Strategic Plan Update Dona Weissenfels
 - i) Dona mentioned the expectations have changed and she has reached out to the Greg Faktor and Associates, to assist in preparing for the next Operations Site Visit (OSV) scheduled in 2023. They assisted in preparation of the 2019 OSV, by HRSA.
 - She noted that the UDS data was submitted, and it is a good tool for strategic planning and needs assessment.
 - iii) She mentioned the 340B Drug Pricing Program and that the FHS Management Team will meet to see whether to proceed with it or not.
 - iv) She mentioned that the Community Needs and Assessment will be done this summer
- b) Hiring Credentialing Update Niccore Tyler
 - Niccore mentioned they have been very busy, in the past month. In Credentialing there are seven (7) active open cases. There are three (3) Clinic Physician Supervisor candidates, one (1) Touro DO Clinic Physician, one (1) Clinic RN candidate, one (1) Nurse Practitioner candidate, and one (1) Touro Pharmacist.
 - ii) She mentioned that PHC approved one (1) mid-level provider and one (1) mid-level provider will be reviewed for approval in March.
 - iii) She mentioned they are also working on recredentialing, which is required every two (2) years. This past month they recredentialed three (3) medical providers and two (2) dentists. There are two (2) medical providers and two (2) dentists in the queue to be recredentialed.
 - iv) Medical Advisory Committee (MAC) Reviews, or peer to peer reviews, are getting scheduled for the medical providers. The Credentialing Team has been working hard with the Office Supervisors scheduling these, and it's going great! FHS Team, Dona, Toya, and Danielle, all have been wonderful in supporting them in getting the credentialing up to speed!
 - v) The Credentialing Team, ran the monthly sanction checks, on all FHS staff and providers, including Touro, and there were zero exclusions, which is good news!
- c) UDS Reporting, Progress and Submission in March Noelle Soto
 - i) Noelle mentioned that they completed the UDS initial submission early and congrats to the UDS Team! It is in the review process. She mentioned that she will give a presentation, of the results of the review at the March 16, 2022, CHB Meeting.



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- ii) As a preview, she mentioned that we are a patient population of 19,000+ patients, and 9,000+ homeless patients and provided over 65,000 unique encounters, for the calendar year, January 1 through December 31, 2021. Thanks to everyone, assisting in completing it!
- d) Grant Updates Noelle Soto
 - i) Noelle mentioned that the Ryan White Part C, Early Intervention Services, data report, initial deadline of February 7, 2022, was submitted, and we are in the second stage, due at the end of March 2022. This report gives a snapshot of those patients, living with HIV/AIDS, served by FHS clinics. Because the deadline is after the March 16th meeting, Noelle will give a presentation on that data, at the April 20, 2022, meeting.
 - ii) The Capacity Development Grant, approved by the Board, the application was submitted yesterday, the deadline. They are applying for the maximum award of \$150,000.00, to perform the expansion, for the referral of our People living with HIV/AIDS, to oral health and/or behavioral health services. It is with HRSA pending review and will be brought back to the Board. The \$150.000.00 was put into a budget, for salary and benefits for existing positions that are working with the program already.
 - iii) She mentioned budget revisions after reviewing the third quarter draw downs, for the base Health Center Program grant, H80 Grant and the H8F Grant, the American Rescue Plan (ARPA). The details are still being drafted and she will be present these at the March 16, 2022, CHB Meeting. It is a very busy time, but a wonderful team to work with and a labor of love.
- e) Review Sliding Fee Scale Program Analysis Janine Harris
 - i) Reference the memo handout: "Analysis of Sliding Fee Discount Program (SFDP)". Janine reviewed the memo, with the Board.
 - ii) Janine mentioned the goal is for the Board to see the effectiveness of the program and is not a barrier to care for our patients. It is a HRSA requirement, FHS must evaluate, the sliding fee scale discount program at least once every three (3) year at the Operations Site Visit (OSV) by HRSA.
 - iii) The memo is an analysis of patients eligible for SFDP from January through December 2021.
 - iv) She mentioned the County does not have a nominal fee. FHS will continue to monitor this program and will present it again next year.
 - v) A Board Member asked to clarify the mental health services that are offered at the FHS clinics. The response was that FHS offers mental health services, through our Licensed Clinical Social Worker (LCSW) staff, to those patients that require mile to moderate services. The clinics do not have onsite Psychiatrists, who would provide care to those patients that require an advanced level of mental health care and would be referred out.
- f) Review Sliding Fee Scale Policy Janine Harris
 - i) Reference the handout: "Sliding Fee Scale Discount Program, Policy Number: 100.03". Janine reviewed the policy with the Board.

8) Unfinished Business

a) Credentialing Privileging Policy and Procedure – This item will be presented to the Board for approval, pending completion of policy review by Compliance.



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- Cheryl mentioned that this policy is with Dona Weissenfels for review and then it will be reviewed by H&SS Employee Services Unit (ESU).
- ii) Cheryl also mentioned that there is a new HIPS/HIPAA Training will be online, and she will be scheduling a time at one of the future Board Meetings to present and review the HIPS/HIPAA and Compliance Trainings
- b) Annual Confidentiality Form This form will be presented to the Board, pending completion of the form by Compliance.
 - Cheryl mentioned that the Confidentiality Form will be presented to the Board , so the Board Members can sign the form.

9) Discussion

None.

10) Action Items

a) Consider approval of the Sliding Fee Scale Program Analysis

Motion:

To approve the Sliding Fee Scale Program Analysis.

Motion by: Brandon Wirth and seconded by Mike Brown

Discussion: A Board Member expressed hope to approve and consider updating the analysis in a couple months, and to adjust the verbiage in 8c. The Board member wanted to bring it back later for further discussion. He stated a concern about patients income at the 80% percentile, that if these patients are sent to collections, it would prevent them from receiving benefits from Shelter, Inc., or housing aid. Mr. Huber mentioned that it probably costs more to ask for payment, using a collection agency, so it is likely that the patient would not be sent to collections. Tess Lapira mentioned the reason that rule is in place, has to do with the gifting of public funds. If the analysis is going to be

amended, regarding referring patients to a collection agency, it will need to be reviewed by County Counsel. The Analysis was voted on as it was presented and can

be discussed at a future meeting.

Ayes:

Ruth Forney, Mike Brown, Anthony Lofton, Brandon Wirth, and Gerald Hase

Nays:

None

Abstain:

None

Motion Carried

b) Consider approval of the Sliding Fee Scale Policy Number 100.03

Motion:

To approve the Sliding Fee Scale Policy Number 100.03

Motion by: Brandon Wirth and seconded by Mike Brown

Discussion: None.

Ayes:

Ruth Forney, Mike Brown, Anthony Lofton, Brandon Wirth, and Gerald Hase



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Nays:

None

Abstain:

None

Motion Carried

11) Board Member Comments

- a) Chair, Ruth Forney, mentioned that a couple of board members have not submitted their signed "Conflict of Interest" forms and gave a friendly reminder to submit them to the Clerk.
- b) Board Member, Brandon Wirth, stated his concerns with the HRSA review, since there are only nine (9) board members on the Board, and that something needs to be done to recruit more board members. Dona mentioned that it is a work in progress and that letters were mailed out earlier in the week to several patients that are potential board members.
- c) Chair, Ruth Forney, mentioned that there is also Roberts Rules Training, that has also been on the "Parking Lot" agenda item, for a long time, which doesn't look good.
- d) Board Member, Gerald Hase, stated a "Thank you" to Dona, for her involvement in the CHB and a "Thank you", for her effort and to everyone else involved!

12) Parking Lot (These items are postponed, until further notice.)

- a) Compliance Training and Robert's Rules Review
- b) Health Center Marketing Campaign & Website Design
- c) The IHI Quadruple Aim Initiative *Health Center Practices*

13) Next Community Healthcare Board Meeting

DATE:

March 16, 2022

TIME:

12:00 p.m.

TO JOIN:

Telephone Conference Call

Dial: 1-323-457-3408, Conference ID: 446 778 066#

14) Adjourn

Meeting was adjourned at 1:34 p.m.

Handouts:

- Analysis of Sliding Fee Discount Program (SFDP) Memo
- Sliding Fee Scale Discount Program Policy Number: 100.03

Call Center Reporting Dashboard - 2022

Month	Total Presented Calls	Total Calls Handled	% Handled	Total Abandon Calls	% of calls Abandon	Average Hold English	Average Hold Spanish	Calls Abandon Max Time English	Calls Abandon Max Time Spanish	Appoint- ments Scheduled by Call Center
Jan- 2022	10332	8569	83.00%	1761	17.00%	00:03:24	00:04:44	0:04:18	0:29:30	2,628
Feb- 2022	8303	7171	86.30%	1132	13.00%	00:03:56	00:05:36	0:34:56	0:40:16	2,199
Mar- 2022										я
Apr- 2022									ø	

The purposes of the American Rescue Plan funding are to prevent, mitigate, and respond to coronavirus disease 2019 (COVID-19) and to enhance health care services and infrastructure. Consistent with these purposes, funding may support a wide range of in-scope activities, which may change as COVID-19 circumstances and related community, patient, and organizational needs evolve over the 2-year period of performance.

REVENUE	Total			
American Rescue Plan Act Grant	\$	3,789,500		
April 1, 2021 to March 31, 2022	\$	1,953,819		
April 1, 2022 to March 31, 2023	S	1 835 681		

	Year 1				Ye	ar 2	Total Federal Costs		Total
Object Class Category with Line Item Justification Direct Charges		Federal	Non-Federal		Federal	Non-Federal		ar 1 + Year 2)	Non-Federal Cost
A. PERSONNEL			THE PARTY OF THE P	distantant of	COLUMN TO SECULATION	Market Committee and Committee of the Co	The same of the same of	The second second second	The state of the s
Administration	\$	170,371	-:	S	152.555		s	322,926	
Behavioral/Mental Health Staff	\$	101,690	-	s	67,793		S	169,483	
Dental Staff	\$	107,783	•	s	74,352	-	S	182,135	
Enabling Staff	\$	10,347		s	10.347		S	20,694	-
Facility & Non-Clinical Support Staff	\$	119,881		S	103,476		S	223,357	-
Medical Staff	\$	441,508		S	352,230	-	S	793,738	-
Physicians	\$	309,474	-	\$	250,657		\$	560,131	
TOTAL PERSONNEL	\$	1,261,054	\$ -	\$	1,011,410	s -	S	2,272,464	S
B. FRINGE BENEFITS List the components that comprise the fringe benefit rate. The fringe benefits sho	ould be	directly propor	ional to allocated p	ersoni	nnel costs.	Milli Santa Million	198		
The fringe benefit rate varies by position. For the grant portion the average benefit rate is 54%. These benefits include: Medical, Dental, Vision, FICA, Retirement, Worker's Compensation/Unemployment Insurance, and Miscellaneous.	s	567,670	-	\$	546,161	×=	s	1,113,831	-
TOTAL FRINGE BENEFITS	S	567,670	s -	S	546,161	s -	S	1,113,831	•
									- The Children
	your o	rganization's esta	blished travel policy	and in	compliance with 4	5 CFR §75.474			
Include details for both local and long distance travel. Detail travel costs consistent with TOTAL TRAVEL D. EQUIPMENT Provide the total cost of equipment purchases with a unit cost of \$5,000 or more. Include						5 CFR §75.474			
TOTAL TRAVEL						5 CFR §75.474	s	134,037	
TOTAL TRAVEL D. EQUIPMENT Provide the total cost of equipment purchases with a unit cost of \$5,000 or more. Include NexIGen Managed Cloud Service — A new platform for current Electronic Health Record (EHR) to allow a more secure and faster system resulting in enhanced workflows and providing redundancy for perpetual use. NexIGen Managed Telehealth Schedule — A new platform for current Electronic Health	de line-i	tem cost informa		t List fo	orm.	S CFR §75.474	\$ \$	134,037	-
TOTAL TRAVEL D. EQUIPMENT Provide the total cost of equipment purchases with a unit cost of \$5,000 or more. Include NextGen Managed Cloud Service — A new platform for current Electronic Health Record (EHR) to allow a more secure and faster system resulting in enhanced	de line-i	tem cost informa 87,185	tion in the Equipmen	t List fo	orm. 46,852	-	\$	148,418	
TOTAL TRAVEL D. EQUIPMENT Provide the total cost of equipment purchases with a unit cost of \$5,000 or more. Included the total cost of equipment purchases with a unit cost of \$5,000 or more. Included the total cost of equipment purchases with a unit cost of \$5,000 or more. Included the total cost of equipment expected the exact of the total cost of equipment expected to allow a more secure and faster system resulting in enhanced workflows and providing redundancy for perpetual use. NextGen Managed Telehealth Schedule – A new platform for current Electronic Health Record (EHR) to expand access and service to the patient population.	de line-l	87,185 34,410	tion in the Equipmen	t List fo	6,852 114,008	-	\$		

REV V.1 County of Solano Budget Narrative FY 2021/2023 American Rescue Plan Act Funding for Health Centers Grant Number: H8FCS40398

REVENUE

APRIL 1, 2021 TO MARCH 31, 2023

The purposes of the American Rescue Plan funding are to prevent, mitigate, and respond to coronavirus disease 2019 (COVID-19) and to enhance health care services and infrastructure. Consistent with these purposes, funding may support a wide range of in-scope activities, which may change as COVID-19 circumstances and related community, patient, and organizational needs evolve over the 2-year period of performance.

American Rescue Plan Act Grant \$	3,789,500						
April 1, 2021 to March 31, 2022 \$	1,953,819						
April 1, 2022 to March 31, 2023 \$	1,835,681						
EXPENDITURES				_			
		Yea	r1	Ye	ar 2	Total Federal Co	ete
Object Class Category with Line Item Justification Direct Charges		Federal	Non-Federal	Federal	Non-Federal	(Year 1 + Year 2	05000000
F. CONTRACTUAL Provide a clear explanation as to the purpose of each contract/subs	award, how the costs we	re estimated, and th	e specific contract/su	baward deliverables.	a touta vect as an interest y		
Consultant to support maintaining and increasing FHS clinic capaci creation, review and revision of clinic policies, procedures and work vaccination) as well as implement said processes through staff edu- support the adoption of virtual technologies such as enhanced work	flows (e.g., testing, cation and training;		2 0	\$ 106,250	-	\$ 106,2	250

Total

and effectively administer medical and dental care, administrative operations, and organizational health literacy (450 hours @ \$250/hour) TOTAL CONTRACTUAL 106,250 \$ \$ 106,250 S G. CONSTRUCTION

Total Non-Federal Costs (Year 1 + Year 2)

Provide the total cost associated with each minor alteration/renovation (A/R) project. Line item information for minor A/R should be included in the A/R Project Budget Justification. Maximum federal request of \$500,000 for TOTAL CONSTRUCTION (See Minor A/R Budget Justifications)

H. OTHER
Include justification of costs that do not fit into any other category. In some cases, rent, utilities and insurance may fall under this category.

Transportation Services - UberHealth 25 rides @ \$40 one-way (avg cost between FHS Clinics) x 12 months	\$	3,500	•	s	11,000		-	\$ 14,500		
TOTAL OTHER	\$	3,500	\$	\$	11,000	\$		\$ 14,500	\$	
TOTAL DIRECT COSTS	s	1,953,819	\$	\$	1,835,681	s		\$ 3,789,500	s	-

I. INDIRECT COSTS
Include only if your organization has a negotiated indirect cost rate or has previously claimed a de minimus rate of 10% of modified total direct costs. Upload your approved indirect cost agreement in the Appendices section of the H8F Award Submission, if applicable.

TOTAL INDIRECT COSTS						
TOTALS (Total of Total Direct Charges and Indirect Charges)	\$ 1	1,953,819	\$ \$ 1,835,681	\$ -	\$ 3,789,500	\$ -

The purposes of the American Rescue Plan funding are to prevent, mitigate, and respond to coronavirus disease 2019 (COVID-19) and to enhance health care services and infrastructure. Consistent with these purposes, funding may support a wide range of in-scope activities, which may change as COVID-19 circumstances and related community, patient,

			Ye	ear 1		Ye	ear 2		
Last Name	First Name	Position Title	FTE to Support Activities	12 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	eral Amount equested	FTE to Support Activities	Federal Amount Requested	Amoun	al Federal t Requested 1 + Year 2)
ADMINISTRATION					P 0 h (14 17)	CONTRACTOR OF THE PARTY OF THE		Towns and	
Adams	Toya	Health Services Manager	0.30	S	33,311	0.20	S 22.207	s	55,518
Cronk	Rebecca	Health Services Manager	0.00	S	-	0.20	\$ 23,374		23,374
Gonzales-Smith	Anna Mae	Health Services Manager	0.30	S	34,421	0.20	\$ 22,947		57,368
Harris	Janine	Policy & Financial Analyst	0.30	\$	37,532	0.20	\$ 25,021		62,553
Nasser	Jack	Health Services Manager (Sr)	0.0998	S	13,244	0.00	\$ -	S	13,244
Soto	Noelle	Project Manager	0.10	S	9,970	0.15	\$ 14,956		24,926
Weissenfels	Dona	Clinic Operations Officer	0.10	S	19,345	0.15	\$ 29,018		48,363
Wink	Wendy	Medical Records Supervisor	0.30	\$	22,548	0.20	\$ 15,032		37,580
			1.4998	\$	170,371	1.30	\$ 152,555	S	322,926
BEHAVIORAL/ME	NTAL HEALTH ST	AFF	THE RESERVE OF THE PARTY OF THE		Un DRUG TENT			The same of the sa	
Coudright	Elizabeth	Mental Health Clinician (Lic)	0.30	Is	34,259	0.20	\$ 22.839	Is	57,098
Gonzalez	Maria	Mental Health Clinician (Lic)	0.30	s	34,008	0.20	\$ 22,672		56,680
Robles	Thy	Mental Health Clinician (Lic)	0.30	\$	33,423	0.20	\$ 22,282		55,705
			0.90	s	101,690	0.60	\$ 67,793		169,483
DENTAL STAFF	Control of the last of the las		0.00		101,000	0.00	\$ 61,130	1 3	105,403
Innes	Sneha	Dentist Manager	0.30	Is	58,881	0.20	16 20.054	10	00.405
Robinson	Trielle	Dental Assistant (Reg Lead)	0.30	S	9,322	0.20 0.10	\$ 39,254		98,135
Rodriguez	Jennifer	Dental Office Supervisor	0.13	S	14,543	0.15	\$ 6,215 \$ 10.907		15,537
Torres	Maria	Dental Assistant (Reg Lead)	0.15	S	9,615	0.10			25,450
Wydeck	Mercedes	Dental Office Supervisor	0.13	S	15,422	0.15	\$ 6,410 \$ 11,566		16,025
,	III.O. GGGGG	Derital Office Supervisor	0.20	3	15,422	0.15	3 11,566	\$	26,988
			1.00	\$	107,783	0.70	\$ 74,352	2 \$	182,135
ENABLING STAFF								interior and the same	THE PERSON NAMED IN COLUMN 2 IS NOT THE PERSON NAMED IN COLUMN 2 I
Cumpas	Ashley	Health Education Specialist	0.00	\$	-	0.00	s -	\$	-
Stasio	Patrick	Health Assistant	0.15	\$	10,347	0.15	\$ 10,347		20,694
			0.15	\$	10,347	0.15	\$ 10,347	s	20,694
FACILITY & NON-	CLINICAL SUPPOR	RT		i malak	Mary trees with	THE SOLD STREET, STREE	Contraction, many district	ALCOHOLD STREET	
De La Cruz	Gina	Accounting Clerk II	0.00	s). -	0.00	S -	Is	
Dotson	Katreena	Office Assistant II	0.00	s	-	0.15	\$ 6,799		6,799
Gabriel	Athena	Office Assistant II	0.20	S	9,047	0.15	\$ 6.785		15,832
Guzman	Jaime	Accounting Clerk II	0.30	s	19,229	0.20	\$ 12,820		32,049
Harbin	Lorielle	Office Supervisor	0.20	s	14,665	0.15	\$ 10,999		25,664
Isaacs	Melinda	Accounting Clerk II	0.23	s	14,316	0.00	\$ -	S	14,316
Miranda	Elizabeth	Accounting Clerk II	0.00	\$	-	0.20	\$ 12,430		12,430
Olloqui	Leiann	Accounting Clerk II	0.30	S	17,712	0.20	\$ 11,808		29,520
Seguerre-Seymour	Danielle	Office Assistant II	0.00	\$		0.15	\$ 8,150		8,150
Toscano	Luis	Office Supervisor	0.20	\$	15,055	0.15	\$ 11,291		26,346
Yarbrough	Yvette	Office Supervisor	0.20	S	15,398	0.15	\$ 11,549		26,947

The purposes of the American Rescue Plan funding are to prevent, mitigate, and respond to coronavirus disease 2019 (COVID-19) and to enhance health care services and infrastructure. Consistent with these purposes, funding may support a wide range of in-scope activities, which may change as COVID-19 circumstances and related community, patient,

			Ye	ar 1		Ye	ar 2		То	tal Federal
Last Name	First Name	Position Title	FTE to Support Activities	Federal Amount Requested		FTE to Support Activities	Federal Amount Requested		Amount Request	
Zuniga-Gerhardt	Patricia	Administrative Secretary	0.20	\$	14,459	0.15	\$	10,845	\$	25,304
			1.83	\$	119,881	1.65	\$	103,476	\$	223,357
MEDICAL STAFF				B -0, 2			-1/0		WESTERN	
	Beneth	Clinic Registered Nurse	0.000	\$	-	0.15	S	14.242	S	14,242
Baldonado	Jocelyn	Medical Assistant (Lead)	0.195	s	12.506	0.00	S		S	12,506
Behera	Sujata	Nurse Practition/PhysicianAsst	0.000	S	-	0.20	s	26,066	S	26,066
Belocura	Marielou	Nurse Practition/PhysicianAsst	0.30	\$	42.896	0.20	S	28,597	S	71,493
Brennan	Deana	Licensed Vocational Nurse	0.20	s	12,222	0.15	S	9.167	S	21,389
Collins	Sharon	Nurse Practition/PhysicianAsst	0.298	S	42.631	0.00	s	0,107	S	42,631
Cooper	Sherrie	Clinic Registered Nurse	0.00	S	-	0.00	S		s	42,001
Crowl	Hannah	Nurse Practition/PhysicianAsst	0.291	S	41,584	0.20	s	28.597	S	70,181
Dhatt	Jagjiwan	Nurse Practition/PhysicianAsst	0.00	S	- 11,001	0.20	S	26,066	S	26.066
Garcia	Esperanza	Medical Assistant	0.15	s	8,835	0.15	S	8.835	S	17,670
Harms	Kylie	Nurse Practition/PhysicianAsst	0.102	S	14.643	0.00	S	0,000	S	14,643
Inton	Zosima	Nurse Practition/PhysicianAsst	0.291	S	41,602	0.20	s	28.597	S	70,199
Jacinto	Frances Paulette	Clinic Registered Nurse (Sr)	0.20	S	19,283	0.15	S	14,462	S	33.745
Lopez	Tara	Medical Assistant (Lead)	0.20	S	12,407	0.13	s	8.271	S	20.678
Medestomas	Jessica	Nurse Practition/PhysicianAsst	0.00	s	12,401	0.10	S	26.066	S	26,066
Olsen	Taylor	Clinic Registered Nurse (Sr)	0.20	S	20,922	0.15	S	15.691	S	36,613
Pereira da Silva	Elena	Nurse Practition/PhysicianAsst	0.30	\$	42,896	0.20	S	28.597	S	71,493
Poblete	Randall Joseph	Nurse Practition/PhysicianAsst	0.00	S	12,000	0.20	S	28,737	S	28.737
Roemer	Taylor	Medical Assistant	0.133	S	8.238	0.10	S	6.175	S	14,413
Sandoval Esquivias	Eujenia	Medical Assistant	0.15	s	9.262	0.10	S	6.175	S	15.437
Stoner	Maria	Nurse Practition/PhysicianAsst	0.30	S	43,481	0.20	S	28.987	S	72.468
Ticzon	Zenia	Nurse Practition/PhysicianAsst	0.30	S	42.896	0.20	S	20,907	S	42,896
Vaca	Sharon	Medical Assistant (Lead)	0.20	\$	12,407	0.00	S	9.305	S	21,712
Villarreal	Angelita	Medical Assistant (Lead)	0.20	\$	12,797	0.15	\$	9,597	\$	21,712
			4.01	s	441,508	3.18	s	352,230	•	793.738

The purposes of the American Rescue Plan funding are to prevent, mitigate, and respond to coronavirus disease 2019 (COVID-19) and to enhance health care services and infrastructure. Consistent with these purposes, funding may support a wide range of in-scope activities, which may change as COVID-19 circumstances and related community, patient,

			Ye	ar 1		Ye	ar 2		250	Total Federal
Last Name	First Name	Position Title	FTE to Support Activities	HERSELDS:	deral Amount Requested	FTE to Support Activities	1215	Federal Amount Requested		ount Requested ear 1 + Year 2)
PHYSICIANS				Sell toris			and the last		Name and	THE PERSON NAMED IN
Alota	Ofelia	Clinic Physician (Board Cert)	0.30	s	59,790	0.20	Is	39.860	Is	99,650
Braden	Jeanah	Clinic Physician	0.30	\$	59,790	0.20	s		s	99,650
Chang	Han Kyo	Clinic Physician (Board Cert)	0.30	S	59,790	0.20	S	39,860	s	99,650
Kim	Rebekah	Clinic Physician Supervisor	0.10	S	19,322	0.00	s	-	s	19,322
Tandinco	Imelda	Clinic Physician	0.30	S	58,694	0.20	s	39,129	s	97,823
Kinnevey	Christina	Clinic Physician (Board Cert)	0.10	S	12,228	0.10	s	12,228	s	24,456
Leary	Michele	Chief Medical Officer	0.20	s	39,860	0.20	s	39,860	s	79,720
VACANT	VACANT	Clinic Physician Supervisor	0.00	\$	-	0.20	\$	39,860	\$	39,860
Mary William Parks			1.60	\$	309,474	1.30	\$	250,657	\$	560,131
Total				\$	1,261,054		\$	1,011,410	\$	2,272,464
	ed 1.0 FTE across al		Actual Benefits	\$	567,670		\$	546,161	\$	1,113,831
*Use this column	only when the salary	is over the limitation of \$199,300	TOTAL	\$	1,828,724		\$	1,557,571	\$	3,386,295

Community Healthcare Board Clinical Quality Improvement Report Solano County Family Health Services Month: February 2022

TABLE OF CONTENTS

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

I. Clinical Quality

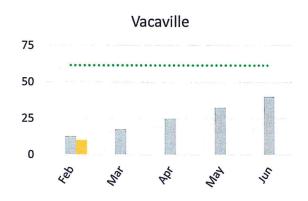
I. CLINICAL QUALITY

Terms Defined

Quality Improvement Program (QIP)- financial incentive program from Partnership HealthPlan of California to primary care providers for meeting specific performance thresholds. QIP clinical measures look only at data for patients with Partnership HealthPlan of California insurance plans during calendar year 2021.

QIP Diabetes HbA1c Good Control







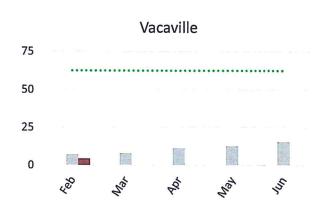
Site	Current Score	Number of Patients Needed to Meet Target	Target Score
Fairfield Adult	10.17%	+279	
Vacaville	10.26%	+121	61.63%
Vallejo	9.22%	+216	

2020 2021 2022 Target

Note: 1st manual upload of HbA1c readings in October 2022

QIP Controlling High Blood Pressure



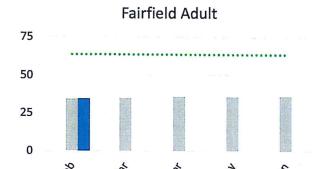


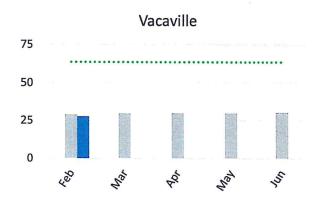
Site	Current Score	Number of Patients Needed to Meet Target	Target Score
Fairfield Adult	8.32%	+255	
Vacaville	4.43%	+118	62.53%
Vallejo	0.61%	+306	1

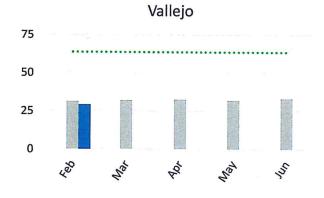


Note: 1st manual upload of blood pressure readings in October 2022

QIP Cervical Cancer Screening





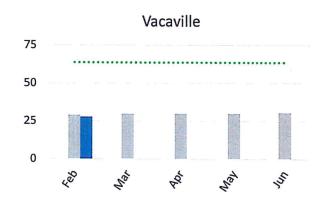


Site	Current Score	Number of Patients Needed to Meet Target	Target Score
Fairfield Adult	34.61%	+762	
Vacaville	27.74%	+514	63.66%
Vallejo	29.28%	+953	

2020 2021 2022 Target

QIP Cervical Cancer Screening

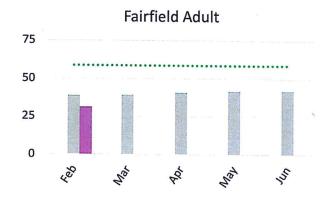


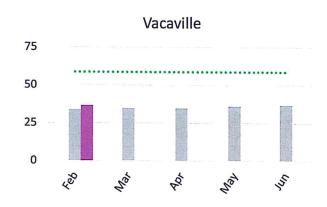




Site	Current Score	Number of Patients Needed to Meet Target	Target Score
Fairfield Adult	34.61%	+762	63.66%
Vacaville	27.74%	+514	
Vallejo	29.28%	+953	

QIP Breast Cancer Screening

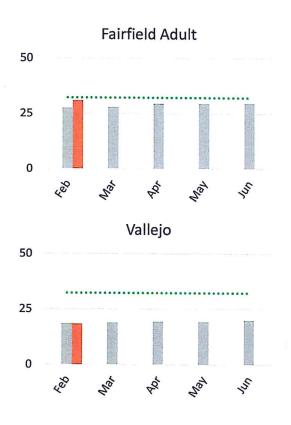


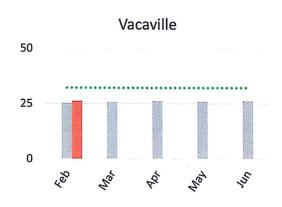




Site	Current Score	Number of Patients Needed to Meet Target	Target Score
Fairfield Adult	31.22%	+199	58.70%
Vacaville	36.57%	+69	
Vallejo	30.05%	+172	

QIP Colorectal Cancer Screening

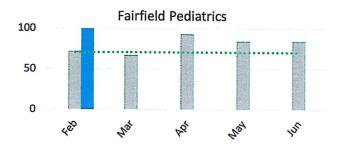


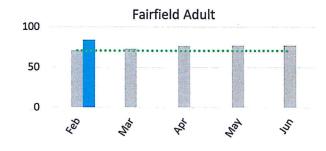


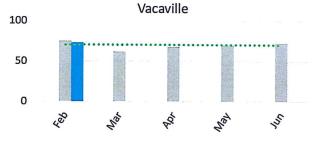
Site	Current Score	Number of Patients Needed to Meet Target	Target Score
Fairfield Adult	30.92%	+23	32.24%
Vacaville	26.25%	+50	
Vallejo	18.36%	+239	



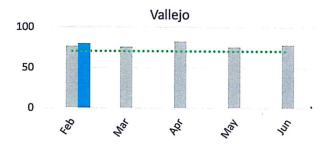
QIP Asthma Medication Ratio





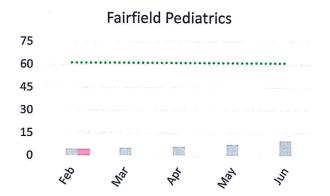


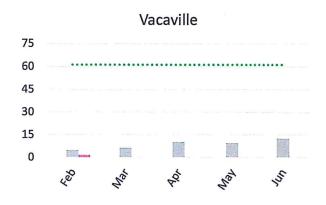






QIP Well Child First 15 Months



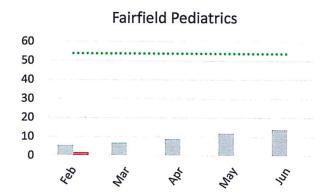


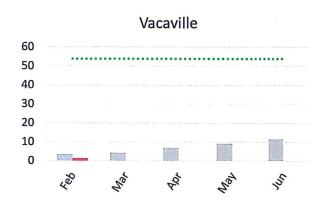


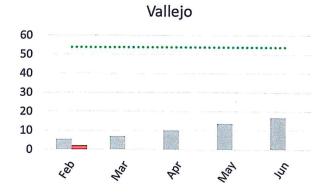
Site	Current Score	Number of Patients Needed to Meet Target	Target Score
Fairfield Pediatrics	4.49%	+89	
Vacaville	1.72%	+35	61.25%
Vallejo	5.47%	+72	

2020 2021 2022 Target

QIP Child and Adolescent Well Care Visits







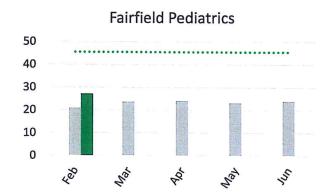
Site	Current Score	Number of Patients Needed to Meet Target	Target Score
Fairfield Pediatrics	1.72%	+2002	53.83%
Vacaville	1.37%	+726	
Vallejo	2.27%	+1633	

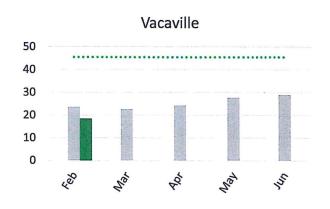
2021 _____2022 ······ Target

Note: New measure in 2021

9

QIP Childhood Immunizations



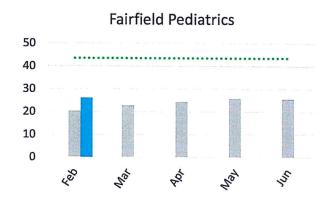


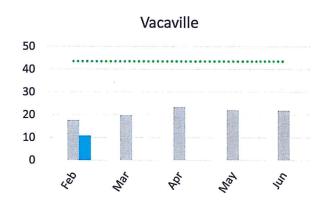


Site	Current Score	Number of Patients Needed to Meet Target	Target Score
Fairfield Pediatrics	27.19%	+42	45.50%
Vacaville	18.48%	+25	
Vallejo	18.14%	+62	

2020 2021 2022 Target

QIP Adolescent Immunizations



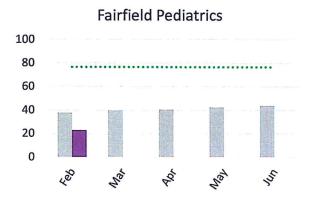




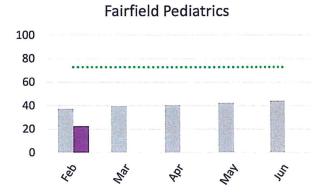
Site	Current Score	Number of Patients Needed to Meet Target	Target Score
Fairfield Pediatrics	26.12%	+47	43.55%
Vacaville	10.87%	+31	
Vallejo	15.42%	+57	

QIP Counseling for Nutrition for Children/Adolescents

QIP Counseling for Physical Activity for Children/Adolescents



Site	Current Score	Number of Patients Needed to Meet Target	Target Score
Existiald Padiatrics	22.969/	+122	76 6 400



Site	Current Score	Number of Patients Needed to Meet Target	Target Score
Fairfield Pediatrics	22.45%	+124	72.81%

2021 ====2022 ······ Target

Note: New measure in 2021

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