Santa Barbara County
PUBLIC Health
DEPARTMENT

AGENDA

Staff Attendees: Polly Baldwin, MD, Ralph Barbosa, Michael Camacho-Craft (by phone), Dana Gamble, Elvia Lopez, Melissa Gomez, Suzanne Jacobson, Jeanie Sleigh, Paola Hurtado, Kendall Johnston, Van Do-Reynoso, Elvira Briones-Arellano, Jeanette Gumber

Board Members		Consumer Members: Lee Herrington, Celia Lee, Filipo Chapelle, Richard Osbourne, Christopher Hutton, Wm Darrel Gardner, Stephen Ferrara, Cynthia Guerrero Community Members:, Sylvia Barnard, Skip Szymanski, Jason Prystowsky, MD, Arianna Castellanos, Emily Casarez Non-Voting Staff Member: Dr. Douglas Metz	
Item #	**Time**	**Item**	**Owner**
I.	12:00-12:03	Welcome and Call to Order	Szymanski
II.	12:05-12:08	Review and Approve Minutes from November 20, 2019	Szymanski
III.	12:09-12:13	Roll Call, Sign In Sheet & Quorum Established	Johnston
IV.	12:13-12:18	Public Comment Period	
V.	12:18-12:25 7 min	**Old Business:** 1. Board Elections. Recommendation for the Board to vote to approve Skip Szymanski to continue as Chair and Lee Herrington to be appointed to Vice-Chair.	Szymanski
VI.	12:25-12:30 5 min	**New Business:** 1. Welcome Jeanette Gumber, new Health Center Administrator for Carpinteria Health Center	Metz
VII.	12:30-1:02 5 min	**Standing Reports** 1. November 2019 Financial Report: Staff recommends that the Board accept and approve the Financial Report for November 2019.	Jacobson
	3 min	2. Policy Review Committee Report: Staff recommends that the Board vote to approve the policies referenced in VII.2	Herrington
	3 min	3. Provider Appointments: Staff recommends that the Board vote to approve the Provider Appointments referenced in VII.3	Baldwin
	10 min	4. Quality Measures Report: For Board Review. No action necessary	Gomez
	10 min	5. Executive Director's Report: For Board Review. No action necessary.	Metz
VII.	1:02-1:05	**Member Announcements**	
IX.	1:05	**Adjournment**	

Next HC Board Meeting: Wednesday, January 22, 2020
Lompoc Health Center Multipurpose Room, 301 N. R Street, Lompoc CA

HEALTH CARE CENTERS
PUBLIC HEALTH DEPARTMENT
SANTA BARBARA COUNTY

Health Center (HC) Board Minutes
November 20th 2019

The Health Center Board met in the third-floor conference room at the Santa Barbara Health Care Center.

Present: Consumer Members: Christopher Hutton, Lee Harrington, Stephen Ferrara, Richard Osbourne
Community Members: Skip Szymanski (Chair) Emily Casarez, Arianna Castellanos
Non-Voting Member: Douglas Metz, Health Center Executive Director
Staff: Kendall Johnston, Gustavo Mejia, Elvia Lopez (by phone), Paola Hurtado, Ralph Barbosa, Michael Camacho-Craft (by phone), Melissa Gomez
Guests/Speaker: Cynthia Guerrero

Agenda Items

I. Call to Order
Meeting was called to order by Chair Szymanski at 12:16pm when the quorum was established.

II. Old Business:
1. Board Member Self-Evaluations

Dr. Metz reminded the Board members in attendance to submit their annual self-evaluations to Kendall Johnston if they have not done so already.

III. New Business:
1. Resignation of Board Member, Judy Taggart-Dr. Metz

As briefly discussed at the October meeting, Ms. Judy Taggart has resigned from the Health Center Board.

Mr. Ferrara motioned that the Board accept Ms. Taggart's resignation effective November 20, 2019; Mr. Herrington seconded.

Motion Carried Unanimously.

2. Proposed Board Member, Cynthia Guerrero-Dr. Metz

As Ms. Guerrero was present at the October HC Board meeting and introduced herself at that time, introductions were not required.

Ms. Castellanos motioned that the Board approve the appointment of Cynthia Guerrero to the Health Center Board; Ms. Casarez seconded.

Motion Carried Unanimously.

3. Nominations of Board Officers-Dr. Metz
Dr. Metz reviewed the list of current nominations for Chair and Vice-Chair being Skip Szymanski and Lee Herrington, respectively. There were no other additions or objections to the nominations and the Board will vote on the appointments at the December meeting.

DRAFT

IV. Review and Approve Minutes from the October 23rd Meeting

Chair Szymanski requested that the closed session portion of the minutes be amended to include that the meeting concluded at 1:17 "and there was nothing to report out"

Mr. Herrington motioned that the minutes from the September 25th meeting with the aforementioned amendment be accepted by the Board; Mr. Hutton seconded.

Motion Carried Unanimously.

VIII. Standing Reports:

1. October 2019 Financial Report-Mr. Mejia

Mr. Mejia briefly reviewed some of the fiscal highlights that were shared with the attendees prior to the quorum being established. Highlights include that October was a good month for Medi-Cal revenue and on track for the time of year. October is a month with 31 days an no holidays so totals may looks skewed compared to other months with not as many clinic days. November and December tend to be lower due to the holidays but PHD is hopeful that the health centers will rally in January and through the 3rd quarter. It was noted by Dr. Metz that the overages in physician fees pertain only to those who are independent contractors, including specialists and those brought on board to cover staff physician vacancies.

Mr. Hutton motioned that the HC Board approve and accept the October 2019 monthly report; Ms. Casarez seconded.

Motion Carried Unanimously.

2. Policy Review Committee

Mr. Herrington and Mr. Hutton shared with the Board that the policy review committee has reviewed the 12 policies presented for the month of November and that there were no issues. After a brief discussion of what the policy review committee entails, Ms. Casarez volunteered to join as the third member. Chair Szymanski requested that staff check the HC Board By-Laws for anything pertaining to subcommittees and appointment of subcommittee members.

Mr. Herrington motioned that the Board approve and accept the policies as written, Mr. Hutton seconded.

Motion Carried Unanimously.

3. Quality Measures Report-Ms. Gomez

Ms. Gomez provided a brief refresher of the types of measures that Public Health is currently focusing on for improvement and a chart showing how Public Health numbers relate to HRSA national averages. The diabetes blood sugar control measure is within half a percent of reaching the goal and Ms. Gomez announced that PHD is involved in learning collaborative to improve DM control in patients who are experiencing homelessness. There has been a 6% increase in the asthma measure since the start of the year as the EHR team and providers continue to work on improved asthma action plans and training on diagnosis codes. The hypertension measure saw an overall 3% increase but still falls short of the benchmark and goal. Notably, the depression screening and intervention measure saw an increase of 2.5% from the previous month and staff is encouraged by the progress despite having a long way to go to reach the goal. The Mammography measure still appears to be low and staff will continue to work to increase compliance with outside entities as mammograms are not available at the health centers.

4. Executive Director's Report-Dr. Metz

Dr. Metz referred the Board members to the director's report in the Board packet. Each of the health centers participated in the statewide Great Shake Out earthquake drill on October 17th. Additionally, as Public Safety Power Shutoffs continued to affect areas of Santa Barbara County, staff turned into

disaster service workers so as to prepare for the impacts of loss of electricity for vulnerable populations.
Dr. Metz highlighted that the statewide advocacy against Governor Newsom's proposal to cut 340b Pharmacy funds is ongoing and that Mr. Gamble and Ms. Jacobson were absent for this meeting as they were attending an important conference in Sacramento regarding this very issue. If the proposal were to move forward, Santa Barbara County would lose $4.5M and would need to cut services at the health centers as well as staff.
Dr. Metz also noted in his report that the Carpinteria Health Center Administrator recruitment is currently under review for the final 2 candidates and a decision would be made early next week after staff input is collected.
Dr. Metz concluded his report with commendation to the Santa Barbara and Lompoc Health Centers for a robust number or patient visits per day during the month of October. Those two sites showed significant improvement despite the overall goal not being met.

V. Member Announcements

- Ms. Casarez announced that the Food Action Network would be holding a community forum at the Santa Barbara Public Library on December 4th and that a North County meeting would be held later on today-all details in the Lompoc Valley Community Health Care Organization newsletter.
- Dr. Metz reminded the attendees of the importance of providing RSVP's before each meeting so staff can ensure that the appropriate amount of food to order, ultimately reducing unnecessary costs.

IX. Adjournment

Meeting was adjourned at 12:58pm.

DRAFT

MEETING DATE: December 18 2019

AGENDA ITEM NO.: VI.1

HEALTH CENTER BOARD

PUBLIC HEALTH DEPARTMENT

Date: 12/11/2019

To: Health Center Board

From: Douglas Metz

Subject: Nomination & Election of Board Officers

RECOMMENDATION:

The Board Review and Vote to approve the following nominations:

Skip Szymanski – Chair

Lee Herrington – Vice Chair

DISCUSSION/BRIEF SUMMARY OF ITEM:

This item is in accordance with the Bylaws: "Nominations for Board officers shall be made at the regular November meeting. A nominee may decline nomination.

Officers shall be elected annually by a majority vote of these members present and voting, as the first order of business at the December meeting of the Board."

MEETING DATE: December 18, 2019

AGENDA ITEM NO.: VI. 1

HEALTH CENTER BOARD

PUBLIC HEALTH DEPARTMENT

Date: December 11, 2019

To: Health Center Board

From: Douglas Metz

Subject: Welcome Jeanette Gumber, New HCA for Carpinteria Health Center

RECOMMENDATION:

For Board information only; No action required.

DISCUSSION/BRIEF SUMMARY OF ITEM:

N/A

MEETING DATE: 12/18/2019

AGENDA ITEM NO.: VII.1

HEALTH CENTER BOARD

PUBLIC HEALTH DEPARTMENT

Date: 12/11/2019

To: Health Center Board

From: Suzanne Jacobson

Subject: Financial Report for November 2019

RECOMMENDATION:

That the Board: Accept and approve the Financial Report for November 2019

DISCUSSION/BRIEF SUMMARY OF ITEM:

Financial Report and Narrative for period ended 11/30/2019.

Santa Barbara County Public Health Department
Community Health Center Board
Financial Statement Narrative for ***November, 2019***
Includes variances over $100K, either YTD or MTD

Financial Results:	**Year to Date**	**November**
Revenues:	$22,551,414	$4,172,740
Expenditures:	$23,889,367	$4,810,314
Net Surplus/(Deficit):	($1,337,954)	($637,575)

Revenue Highlights:	**Year to Date Variance (92.1%)**	**November Variance (85.2%)**
Over (Under) Budget		
Medicaid/Medicare:	($1,655,718)	$439,506
Local/State Funds:	($353,516)	($299,553)
Federal 330 grant:	($173,174)	$0

Expenditure Highlights:	**Year to Date Variance (97.6%)**	**November Variance (98.2%)**
Over (Under) Budget		
Personnel/Benefits:	$498,607	$81,514
Pharmaceuticals:	($894,156)	($206,962)
Physician Fees:	$105,084	$57,715
Data Processing:	$76,924	$152,064
Other Office Expenses:	($127,655)	$34,055

Financial Results Discussion

Our Community Health Center financial results for November 2019 reflect a negative *month to date* net financial impact of ($637,575) and *year to date* net financial impact of **($1,337,954)**.

Year to date, our revenues are at 92.1% of budget and our expenditures are at 97.6% of budget. Unfortunately, Medi-Cal revenues for the month were below our fixed monthly budget, which is in part due to the Health Center 2 day closure for the Thanksgiving Holiday. In last month's report (October), we mentioned that we expected the months of November and December to have below budget revenues because of the Thanksgiving holidays and the County's winter closure between Christmas and New Year's day. Hopefully, the Health Centers can rally in January to make significant progress on our *year to date* deficit.

Revenue Highlights:

We have negative variances for the following:

- Medicaid and Medicare Revenue – Medi-Cal and Medicare both came in below budget for November due in part to the Health Center closures for the Thanksgiving Holidays.
- Local/State Funds – Below budget for this point in the fiscal year. We hope to improve our Medi-Cal revenues to use less of these local funds.
- Federal 330 Grant Funds – Below budget due to timing of drawdowns of funds. We are performing the drawdowns more often to stay current.

Expenditure Highlights:

We have positive variances for the following:

- Pharmaceuticals – Purchases still lag behind budget because of a lower volume of pharmacy prescriptions than anticipated. We anticipate expenditures to increase as the health centers fill provider vacancies and increase visit and prescription volume.
- Other Office Expenditures – Under budget due to the timing of invoices from OCHIN Epic for the Electronic Health Record Software. We've made improvement on this during the past month.

And negative variances for:

- Salaries and Benefits –Trending above budget, also we are hopeful that some efficiencies can be made to bring this in line by the end of the year.
- Physician Fees – Invoices for certain contract physician fees that tend to lag behind are starting to catch up and currently exceed our year to budget because of physician vacancies and because of a position budgeted in our personnel line that is actually being paid as a contractor.

Santa Barbara County Public Health Department Health Care Centers
Financial Monthly Report for CHC/HCH Grant H80CS00046
For the Month of November 2019 - Fiscal Year 2019-20

	FY 19-20 ADOPTED BUDGET	FY 19-20 As of 11-30-19 BUDGET	FY 19-20 As of 11-30-19 YTD ACTUALS	FY 19-20 November YTD Variance	FY 19-20 YTD % of Budget	ONE MONTH ADJUSTED BUDGET	FY 19-20 November ACTUALS	FY 19-20 November Variance	FY 19-20 Nov % of Budget
REVENUES									
PROGRAM INCOME									
Medicaid	$ (39,270,200)	$ (16,362,583)	$ (14,435,529)	$ 1,927,054	88%	$ (3,272,517)	$ (2,849,706)	$ 422,810	87%
Medicare	(5,478,400)	(2,282,667)	(2,554,003)	(271,336)	112%	(456,533)	(439,838)	16,696	96%
Self-pay (includes HAP)	(1,772,100)	(738,375)	(876,579)	(138,204)	119%	(147,675)	(157,961)	(10,286)	107%
LOCAL AND STATE FUNDS									
State/Local Funds-TSAC/GF	(9,387,616)	(3,911,507)	(3,557,991)	353,516	91%	(782,301)	(482,748)	299,553	62%
FEDERAL 330 GRANT	(2,100,000)	(875,000)	(701,826)	173,174	80%	(175,000)	(175,000)	-	100%
OTHER FEDERAL FUNDING									
ADAP	(766,000)	(319,167)	(425,485)	(106,318)	133%	(63,833)	(67,487)	(3,654)	106%
TOTAL REVENUE	**$ (58,774,316)**	**$ (24,489,298)**	**$ (22,551,414)**	**$ 1,937,885**	**92.1%**	**$ (4,897,860)**	**$ (4,172,740)**	**$ 725,120**	**85.2%**
EXPENDITURES									
PERSONNEL	$ 22,208,800	$ 9,253,667	$ 9,878,041	$ 624,374	107%	$ 1,850,733	$ 1,930,627	$ 79,895	104%
FRINGE BENEFITS	14,195,500	5,914,792	5,789,024	(125,767)	98%	1,182,958	1,021,549	(161,409)	86%
TOTAL PERSONNEL	36,404,300	15,168,458	15,667,065	498,607	103%	3,033,692	2,952,176	(81,514)	97%
TRAVEL									
PHD Carpool	62,200	25,917	23,882	(2,034)	92%	5,183	3,721	(1,463)	72%
Transportation - Local Mileage	26,100	10,875	8,908	(1,967)	82%	2,175	1,768	(407)	81%
Training and Travel	88,500	36,875	13,743	(23,132)	37%	7,375	4,257	(3,118)	58%
TOTAL TRAVEL	176,800	73,667	46,533	(27,134)	63%	14,733	9,746	(4,987)	66%
SUPPLIES									
Medical Supplies	630,400	262,667	265,218	2,552	101%	52,533	59,091	6,558	112%
Office Supplies	168,000	70,000	66,916	(3,084)	96%	14,000	11,741	(2,259)	84%
Pharmaceuticals	6,724,000	2,801,667	1,907,510	(894,156)	68%	560,333	353,371	(206,962)	63%
Bus Tokens	20,000	8,333	-	(8,333)	0%	1,667	-	(1,667)	0%
TOTAL SUPPLIES	7,542,400	3,142,667	2,239,644	(903,022)	71%	628,533	424,204	(204,330)	67%
CONTRACTUAL									
Janitorial Services	303,500	126,458	91,379	(35,080)	72%	25,292	6,250	(19,042)	25%
Physician Fees	2,080,900	867,042	972,126	105,084	112%	173,408	231,123	57,715	133%
Professional Services	816,000	340,000	273,765	(66,235)	81%	68,000	80,761	12,761	119%
TOTAL CONTRACTUAL	3,200,400	1,333,500	1,337,269	3,769	100%	266,700	318,134	51,434	119%
OTHER									
Building Maintenance	35,200	14,667	19,448	4,781	133%	2,933	11,296	8,362	385%
Communications	287,600	119,833	110,026	(9,808)	92%	23,967	21,206	(2,760)	88%
Data Processing	912,100	380,042	456,966	76,924	120%	76,008	228,072	152,064	300%
Liability Insurance	361,800	150,750	150,585	(165)	100%	30,150	30,117	(33)	0%
Malpractice Insurance	452,600	188,583	208,835	20,251	111%	37,717	41,767	4,050	0%
Other Clinical Expenditures	268,500	111,875	97,200	(14,675)	87%	22,375	13,689	(8,686)	61%

Santa Barbara County Public Health Department Health Care Centers
Financial Monthly Report for CHC/HCH Grant H80CS00046
For the Month of November 2019 - Fiscal Year 2019-20

	FY 19-20 ADOPTED BUDGET	FY 19-20 As of 11-30-19 BUDGET	FY 19-20 As of 11-30-19 YTD ACTUALS	FY 19-20 November YTD Variance	FY 19-20 YTD % of Budget	ONE MONTH ADJUSTED BUDGET	FY 19-20 November ACTUALS	FY 19-20 November Variance	FY 19-20 Nov % of Budget
Other Office Expenditures	1,309,700	545,708	418,054	(127,655)	77%	109,142	143,197	34,055	131%
Public Health Lab Services	90,000	37,500	801	(36,699)	2%	7,500	299	(7,201)	4%
Rents & Leases	141,600	59,000	48,297	(10,703)	82%	11,800	9,806	(1,994)	83%
Services County Provided	146,200	60,917	28,638	(32,278)	47%	12,183	-	(12,183)	0%
Utilities	404,200	168,417	198,161	29,744	118%	33,683	30,351	(3,332)	90%
TOTAL OTHER	4,409,500	1,837,292	1,737,010	(100,282)	95%	367,458	529,799	162,341	144%
TOTAL DIRECT COSTS	$ 51,733,400	$ 21,555,583	$ 21,027,522	$ (528,062)	97.6%	$ 4,311,117	$ 4,234,059	$ (77,057)	98.2%
INDIRECT COST (13.61% OF TADC)	7,040,916	2,933,715	2,861,846	(71,869)	97.6%	586,743	576,255	(10,488)	98.2%
TOTAL BUDGET	**$ 58,774,316**	**$ 24,489,298**	**$ 23,889,367**	**$ (599,931)**	**97.6%**	**$ 4,897,860**	**$ 4,810,314**	**$ (87,544)**	**98.2%**
Net Surplus/ Deficit	**$ (0)**	**$ (0)**	**$ 1,337,954**	**$ 1,337,954**		**$ (0)**	**$ 637,575**	**$ 637,575**	

MEETING DATE: 12/18/2019

AGENDA ITEM NO.: VII.2

HEALTH CENTER BOARD

PUBLIC HEALTH DEPARTMENT

Date: December 11, 2019

To: Health Center Board

From: Policy Review Committee

Subject: Policy Recommendations

RECOMMENDATION:

That the Board approve the policies referenced below as reviewed and approved by the Policy Review Committee.

DISCUSSION:

The Policy Review Committee recommends the Board vote to approve the following policies reviewed during the month of November 2019.

POLICY NO.	TITLE
1. 19-C-647	Ultrasound Retention Policy
2. 10-C-550	Health Care Practitioner Supervision: Nurse Practitioner, Clinical Nurse, Midwife, and Physician Assistant
3. 13-C-021	Emergency Clinical Response
4. 11-C-558	Comprehensive Perinatal Services Program (CPSP) Documenting Antepartum Visits (15 & Subsequent)
5. 17-C-623	Coordination of Care Transitions
6. 87-C-074	Cash Handling Guidelines for Clinics

Santa Barbara County PUBLIC Health DEPARTMENT	Number: 19-C-647
Prepared By: Laura Lui, EHR Manager	Effective Date: 12/18/2019
	Original Date: 11/21/2019
Authorized By: Darrin Eisenbarth, Assistant Administrative Deputy Director; Polly Baldwin, MD, Medical Director	Next Review Date: 12/18/2020
TITLE: Ultrasound Retention Policy	

POLICY

The Ultrasound Retention policy will dictate ultrasound retention based on Santa Barbara County Public Health Department (SBCPHD) technical retention capability and the procedure for removal of Ultrasounds from the SBCPHD equipment in the proper timeframe.

PURPOSE

SBCPHD Health Care Centers will store ultrasounds for the life retention capacity of the GE Voluson P8 Ultrasound Machines currently in use in the SBCPHD clinic sites. Based on our current volume and the specific model of ultrasound machine that we own, we have the capacity to store three (3) years of images without affecting the machine performance. This policy will outline our retention of these medical images based on technical capacity.

Santa Barbara County PUBLIC Health DEPARTMENT	Number: 10-C-550
Prepared By: Polly Baldwin, MD Medical Director	Effective Date: 12/18/2019
	Original Date: 11/1/2010
Authorized By: Douglas Metz, DPM, MPH, Deputy Director	Next Review Date: 12/18/2020
TITLE: Health Care Practitioner Supervision: Nurse Practitioner, Clinical Nurse, Midwife and Physician Assistant	
☑ Approved by Santa Barbara Health Center Board on 1/23/2019 (See Board Meeting minutes)	

POLICY

Health Care Practitioners (HCP) provide medical services to Public Health Department (PHD) patients under the supervision of a physician. HCPs and supervising physicians comply with the laws and regulations of the State of California licensing boards, MediCal, MediCare and Federally Qualified Health Center regulations under HRSA. The HCP and the designated supervising physician sign an agreement that recognizes the obligation of the HCP to function within the scope of the supervising physician's practice. This is the Health Care Practitioner and Supervising Physician Agreement (Attachment A). In addition, The HCP provides medical services with knowledge of and agreement with the HCP Standardized Procedures and Protocols (Attachment B) and HCP Standardized Procedures and Protocols, Statement of Approval (Attachment C).

PURPOSE

To delineate the scope of practice and supervision for the Health Care Practitioners who are either employed by or contracted with the Public Health Department.

Santa Barbara County PUBLIC Health DEPARTMENT	Number: 13-C-021
Prepared By: Yuvette Calhoun, RN	Effective Date: 12/18/2019
	Original Date: 7/1/2010
Authorized By: Polly Baldwin, MD, Medical Director	Next Review Date: 12/18/2020
TITLE: Emergency Clinical Response	
☑ Approved by Santa Barbara Health Center Board on 1/23/2019 (See Board Meeting minutes)	

POLICY

It is the policy of the Public Health Department Health Care Centers to immediately respond to clinical emergencies and provide basic transitional emergency support only.

PURPOSE

The purpose of this policy is to provide guidance and consistency for PHD Health Care Centers with regard for handling emergency response. All licensed medical persons (MD, PA, NP, RN, PHN) at each location will be able to respond to a clinical emergency to include anaphylaxis and opioid overdose. Any person trained in basic emergency response (CPR and AED) is expected to provide help according to their training. Advanced life support is rapidly available at all locations through paramedic/Emergency Medical Services (EMS) support.

Santa Barbara County PUBLIC Health DEPARTMENT	Number: 11-C-558
Prepared By: Yuvette Calhoun, RN, Performance Improvement Coordinator	Effective Date: 12/18/2019
	Original Date: 7/18/2011
Authorized By: Dr. Polly Baldwin, MD, Medical Director	Next Review Date: 12/18/2020
TITLE: Comprehensive Perinatal Services Program (CPSP) – Documenting Antepartum Visits (15 and subsequent)	

POLICY

The Santa Barbara Health Care Centers (HCC) will ensure comprehensive, quality prenatal care is provided to the patients while adhering to CPSP program requirements.

PURPOSE

To provide guidance and ensure consistency for the HCC staff when billing and documenting the 15th and subsequent antepartum visits.

Santa Barbara County PUBLIC Health DEPARTMENT	Number: 17-C-623
Prepared By: Melissa Gomez RN, Performance Improvement Coordinator	Effective Date: 12/18/2019
	Original Date: 06/2014
Authorized By: Polly Baldwin MD, Medical Director	Next Review Date: 12/18/2020
TITLE: Coordination of Care Transitions	
☑ Approved by Santa Barbara Health Center Board on 1/23/2019 (See Board Meeting minutes)	

POLICY

The Health Care Centers, Health Information Management Program, and PCMH Care Teams will act to facilitate the mutual care of established patients by sharing pertinent clinical information with other health care delivery organizations within the constraints of HIPAA but to the fullest extent possible using secure processes.

PURPOSE

- To extend the care coordination of established patients to other medical service delivery sites, especially hospitals and emergency rooms that admit and treat Health Care Center patients.
- To use secure electronic tools as the preferred method for the exchange of patient information in standard formats with discreet data to the extent that the sending and receiving sites are able to accept.
- To have a process for outside providers and hospitals to gain access to the EMR in accordance with HIPAA.

Santa Barbara County PUBLIC Health DEPARTMENT	Number: 87-C-074
Prepared By: Gus Mejia, Program Administrator	Effective Date: 12/18/2019
	Original Date: 7/11/2008
Authorized By: Suzanne Jacobson, Chief Financial Officer; Douglas Metz, DPM, MPH, PCFH Deputy Director	Next Review Date: 12/18/2020
TITLE: Cash Handling Guidelines for Health Care Centers (HCC)	

POLICY

It is the policy of the Public Health Department (PHD) Health Care Centers to ask self-pay patients to pay for their services at the time they are rendered. If they are not able to pay the entire balance and/or make a deposit, a payment plan will be established with the Office Professional (OP). The OP staff in the Health Care Center (HCC) also issue receipts, balance cash, and complete daily cash deposits while adhering to internal controls which mitigate risk, loss and theft. Approved HCC cashiers are required to sign the Cashier Agreement (PHD-723) form, which will be on file with the PHD Patient Accounting Department.

PURPOSE

To define a policy for establishing proper cash handling procedures and internal controls at each HCC and to e n s ure that cash/checks and credit cards payments are deposited daily.

MEETING DATE: 12/18/2019

AGENDA ITEM NO.: VII.3

HEALTH CENTER BOARD

PUBLIC HEALTH DEPARTMENT

Date: 12/11/2019

To: Health Center Board

From: Dr. Polly Baldwin

Subject: Approval of Provider Appointments

RECOMMENDATION:

That the Board: Vote to approve the initial appointment of the following provider:

- Elspeth Mills, PsyD Behavioral Health -Franklin Health Center & PATH

DISCUSSION/BRIEF SUMMARY OF ITEM:

All providers will be reviewed by Board delegate on 12/17/19 and the results will be announced at the December 18 Board meeting.

MEETING DATE: December 18, 2019

AGENDA ITEM NO.: VII.4

HEALTH CENTER BOARD

PUBLIC HEALTH DEPARTMENT

Date: 12/11/2019

To: HC Board

From: Melissa Gomez RN

Subject: Quality Update-2019 monthly quality improvement measures update (November data)

RECOMMENDATION:

That the Board: Review

DISCUSSION/BRIEF SUMMARY OF ITEM:

This is the monthly review of the quality measures selected by the medical quality team for the annual performance improvement plan.

Monthly Medical Quality Update performance improvement measures 2019

Melissa Gomez RN CCM 12/2019

SBCPHD
Quality Improvement

Measures for Improvement 2019

- Diabetes Control
- Asthma with appropriate medication
- Hypertension
- Depression screening and intervention
- Breast cancer screening(Mammography)
- Patient satisfaction with wait time(in clinic)-crossroads quarterly report

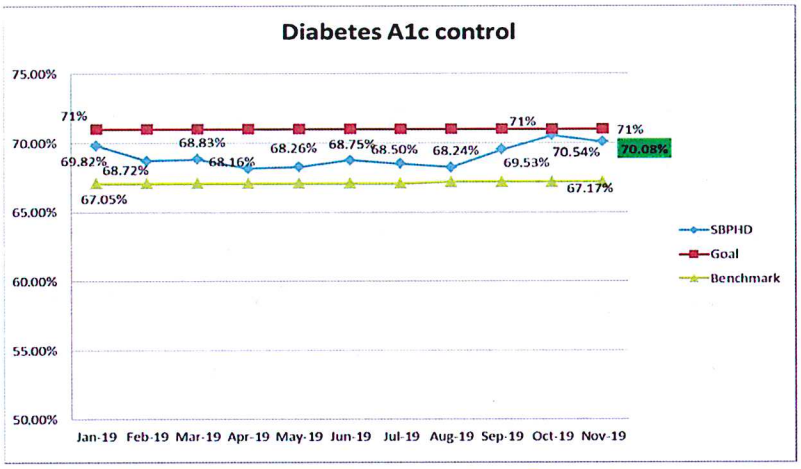
SBCPHD
Quality Improvement

Performance Measure 2019 EPIC(11/30/18 to 11/30/19)	Patients Total	Percentage	Homeless Total	Percentage Homeless	Goal	HRSA 2018 National
HgA1c 9 or less	2115	70.08%	77	54.23%	71.00%	67.17%
	3018		142			
Asthma- persistent asthma and on controller medication	326	84.24%	13	72.22%	87.00%	86.58%
	387		18			
Hypertension- Blood Pressure controlled with last BP less than 140/90	2953	57.79%	120	40.82%	65.00%	63.26%
	5110		294			
Depression Screening with intervention if screening is positive	6971	45.30%	493	56.47%	60.00%	70.57%
	15389		873			
Mammography -women 50-74 q2 years(Data for 12 months, 11/30/18-11/30/19)	1589	49.44%	20	15.04%	59%	58.0%
	3214		133			

SBCPHD

Quality Improvement

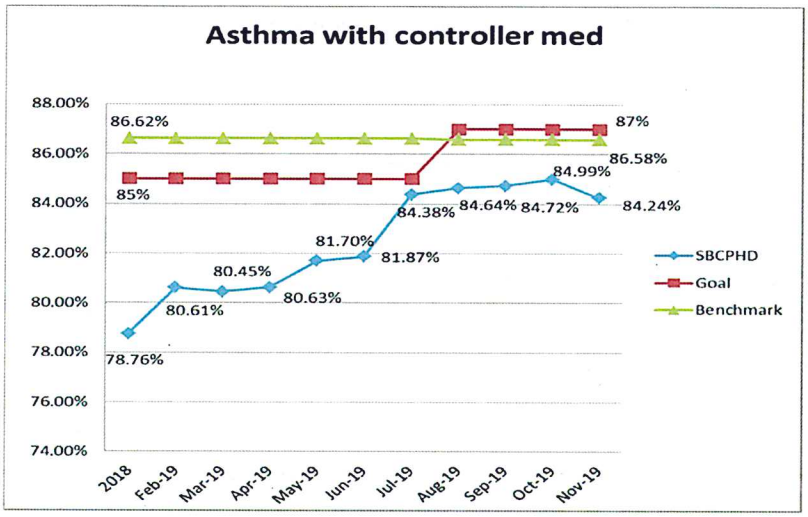
Diabetes (DM) blood sugar control is the focus of a QI project we are working on this year.
In addition to DM clinics at each HCC, DM group education visits have been happening at FHCC and LHCC.
Both FHCC and CHCC have been working on identification of patients who might benefit from increased care management, DM education and DM clinic visits. Additionally we are involved in a learning collaborative to improve DM control in patients who are experiencing homelessness.



SBCPHD

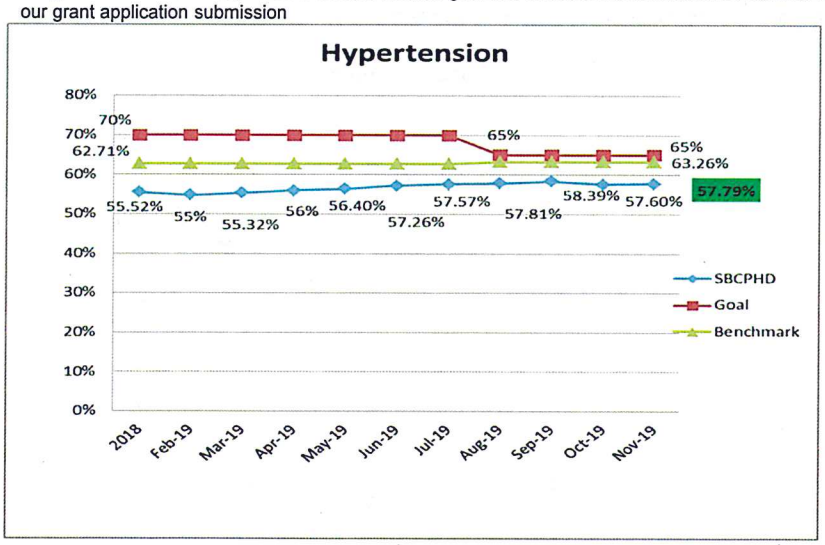
Quality Improvement

We have seen over a 5% improvement in this measure since the start of the year. As the EHR staff and the providers continue to work on improved asthma action plans and training on diagnosis codes we should see ongoing improvement. For our competitive grant submission we have increased our goal to 87%



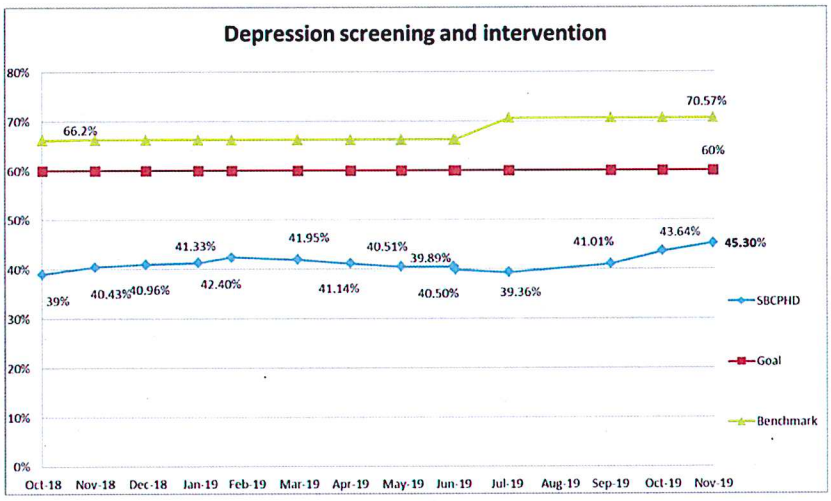
SBCPHD
Quality Improvement

There has been a small improvement in blood pressure control since the start of the year. We adjusted our goal from 70% to 65%, which is a more realistic goal and is above the benchmark of 63.26% for our grant application submission



SBCPHD
Quality Improvement

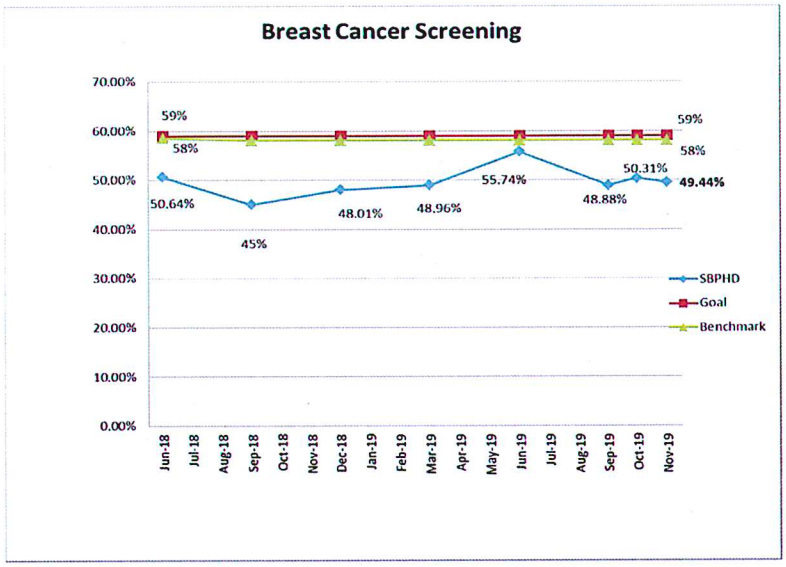
After extensive review, and training- including updated policies and workflows, we have seen a 6.3% improvement in screening and intervention in the past year. PROGRESS! We will continue to focus on this measure closely as we have a long way to go to reach our goals.



SBCPHD

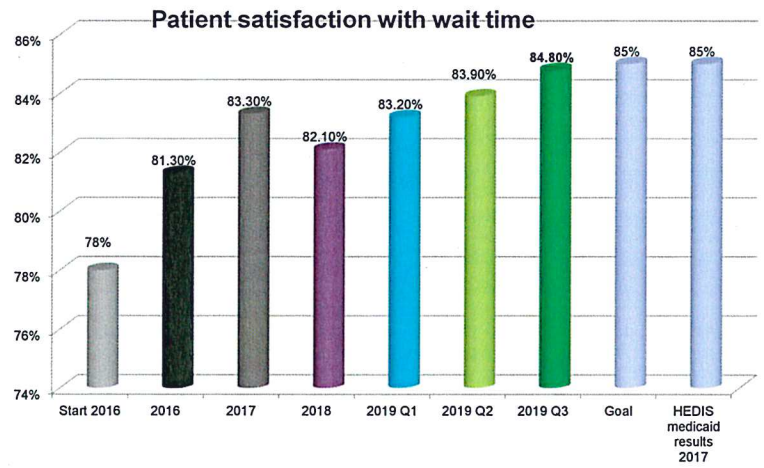
Quality Improvement

SBHCC and FHCC have been focused on this measure and they have had great improvement. FHCC went from 48% to 56% in this quarter. Overall we continue to struggle with this measure and are working to improve both the compliance and the documentation to better capture this infomation



SBCPHD

Quality Improvement



SBCPHD
Quality Improvement

Plan

- Increased care management at FHCC and CHCC of patients with A1c greater than 9%
- Participation in a learning collaborative hosted by the National Health Care for the Homeless Council working to improve diabetes control for patients experiencing homelessness.
- Ongoing QI work on Mammography compliance as well as work on documentation and data
- Implementation of workflow for depression screening and intervention with close follow-up as we work to greatly improve on this measure
- Continued Care team work on Asthma action plans.

SBCPHD
Quality Improvement

MEETING DATE: December 18, 2019

AGENDA ITEM NO.: VII.5

HEALTH CENTER BOARD

PUBLIC HEALTH DEPARTMENT

Date: December 11, 2019

To: Health Center Board

From: Douglas Metz

Subject: Executive Director's Standing Report

RECOMMENDATION:

No action required – Submitted as Executive Director's monthly report to the Board.

DISCUSSION/BRIEF SUMMARY OF ITEM:

N/A

Date: Wednesday, December 18, 2019
To: Health Center Board of Directors
From: Dr. Douglas Metz, Executive Director, Health Centers
RE: E.D. Report

Focus Area	Monthly Highlights
Health Center Operations	
• **HRSA Relations** (Ralph Barbosa, Dana Gamble)	▪ SAC grant continuation application completed and submitted 9/26!
• **Santa Barbara** (Paola Hurtado)	▪ Participated in the county-wide Flood and Power Outage disaster exercise ▪ Key SBHCC staff members participated in interviews with KPMG Associates hired by the CEO's Office as consultants for the Renew 22 Initiative ▪ Onboarded volunteer Urologist
• **Franklin** (Elvia Lopez)	▪ Staff participated in ACES and Resiliency training ▪ Participated in the county-wide Flood and Power Outage disaster exercise ▪ Administrative Staff participated in OCHIN's optimizing training
• **Carpinteria** (Interim: Elvia Lopez)	▪ CHCC staff hosted a greet and meet with the final two HCA Candidates ▪ Staff completed its yearly BBP, IIPP and Aerosol training ▪ Participated in the county-wide Flood and Power Outage disaster exercise ▪ Administrative Staff participated in OCHIN's optimizing training
• **Santa Maria** (Michael Camacho-Craft)	▪ Staff participated in Renew 22 interviews with KPMG consultant team ▪ Participated in county-wide Flood & Power Outage disaster prep exercise ▪ Administrative staff participated in EHR Practice Management training ▪ Women's Health team attended a breast-feeding training
• **Lompoc** (Jeanie Sleigh)	▪ HCA participated in final CHCC HCA Interviews ▪ A Locums Pediatrician joined the LHCC Pediatric Primary Care practice to backfill for our current vacancy ▪ AOP staff participated in OCHIN Optimization Training ▪ Numerous LHCC staff participated in interviews with KPMG Associates hired by the CEO's Office for the Renew 22 Initiative ▪ LHCC fully participated in the 2019 Disaster Preparedness Exercise
• **Healthcare for the Homeless** (Ralph Barbosa)	▪ Carp Connect- Planning meeting for Carp Connect updated strategy ▪ Participated and provided input on the City of Goleta Homelessness Strategic Plan ▪ Coordinated PHD-HCH participation in Project Homeless Connect, (pop-up health fair for people experiencing homelessness.) ▪ Homeless Management Information System (HMIS)- Participated in Technical Administrators Monthly Meeting. ▪ Doctors Without Walls- Met with new Operations Director Jeanelle Posch to discuss collaboration, PHD/HCH Operations and an update about DWW's current work. ▪ Homeless Death Report: Final draft of report & Board Presentation Slides

• **Pharmacy** (Carol Millage)	▪ The pharmacy software upgrade was complete Downtime was significant but pharmacy was able to communicate about the closure through the new IVR (interactive voice response) system and using our "emergency" plans we were able to create labels using the Dymo labels for our pharmacy labels. No official complaints from patients have yet been received as patients appeared to be understanding of the situation because communication was clear. ▪ Pharmacy up-to-date in trainings in PHEN for annual recertification in National Boards of Pharmacy which also met requirements for most Medicare Part D plans.
• **Clinical Lab** (Linda Weisman)	• Began discussions regarding the impacts of the Public Health Laboratory discontinuing the QuantiFERON test in Fiscal Year 20/21. The Clinical Laboratory will be impacted and will need time to build a new test in the Aspyra Laboratory Information System as well as the Ochin Epic Electronic Health Record for both orders and results interfaces. Specimen collection staff will need to be trained to collect specimens for the tests to go to Quest. • On 11/14/19 an effluent spill from the second floor came down through to the first floor and caused ceiling tiles to fall and effluent to spill in the laboratory space. Thankfully nobody was injured and no expensive equipment was damaged. Alternate work spaces were created and the decontamination took about a week. There was good cooperation between staff in the Laboratory, Facilities, Safety, General Services and Administration. • Hired and began training two new Extra Help Laboratory Assistants.
• **Health Information Management / HIPAA / Data Security** (Dana Gamble, June English, Laura Lui)	• Training: ○ List of untrained continued to be sent out to supervisors • Privacy ○ Policies – ▪ Reviewed Alternative Communication Policy in preparation for Quarterly Compliance meeting 11/2. ▪ Research on policies dealing with dual roles of healthcare professionals
• **PCMH** (Karla Quintana, Melissa Gomez, Polly Baldwin, Doug Metz)	▪ Nothing new to report
• **Customer Service** (Health Center Administrators)	▪ Nothing new to report

PATIENT VOLUME REPORT*

November 2019

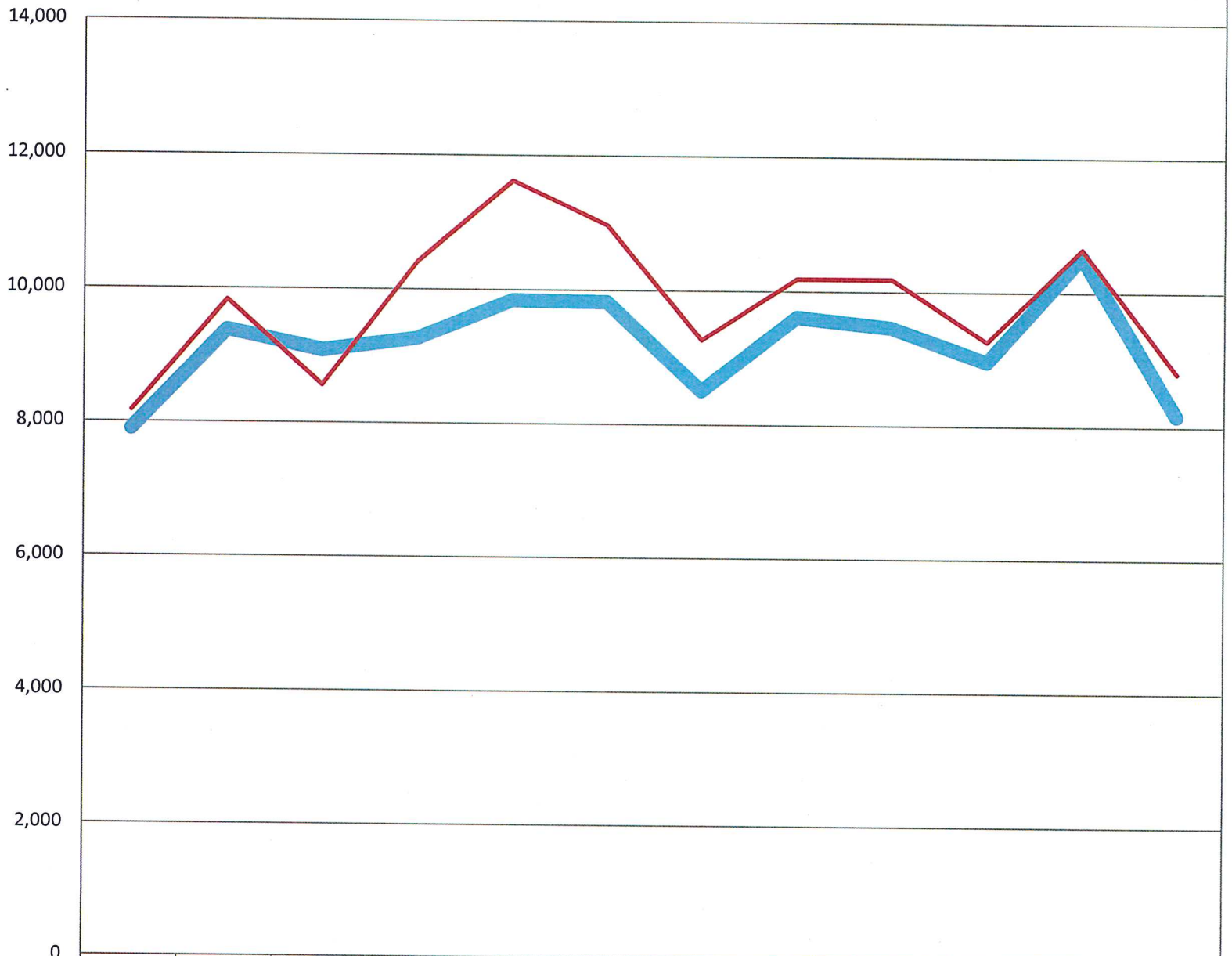
Site	"Billable" Visits This Month	Visits Last Month	Unique Patients This Month	Unique Patients Last Month	Notes November = 19 clinic days (last month had 23)
Carpinteria HCC	541	698	449	550	***28 visits / day – decrease by 7% over last month***
Franklin HCC	922	1,143	725	870	***49 visits / day – decrease by 2% over last month***
Franklin Elementary School Clinic (1 evening/wk)	0	0	0	0	*(Quoting Alice Cooper, "School is out")*
Lompoc HCC	2,552	3,291	1,987	2,426	***134 visits / day - decrease by 6% over last month***
Santa Barbara HCC	1,891	2,658	1,426	1,814	***100 visits / day - decrease by 14% over last month***
Santa Maria HCC	1,980	2,434	1,373	1,534	***104 visits / day – decrease by 2%***
Homeless Shelters (3 sites combined)	129	155	105	119	
Outside Sites: PHN Home Visits, Hospital, Deliveries, SNF, etc.)	147	161	146	160	
TOTALS	**8,162**	**10,540**	**6,211**	**7,473**	*Note:* ***November pt. visits/day = 430, a decrease of 6% over last month and short of the monthly target of 509 by 6%***
% difference of pts/day from previous month	***6% Decrease of daily pts over last month***				***Summary: Another month short of targeted patient visit goals; treading water in our goal of increasing visits.***

CLINIC OPERATIONAL MEASURES REPORT (ACROSS ALL SITES)*

Metric	Current Benchmark	Actual This Month	Last month	Notes
Pt visits / Clinical FTE	16 overall visits / 1.0 clinical FTE	**Epic Reporting System not yet available**		**Epic Reporting System not yet available**
% of unfilled appointment slots	<10%, not counting purposely unfilled "day-of" open access slots)			**Epic Reporting System not yet available**
No show rates	<15%	**Avg. across all sites = 17%**	**Avg. across all sites = 16%**	
"Third Next Available" (TNAA) Appointment	< 14 days	**~17 days (average across all sites)**	**~17 days (average across all sites)**	**These reports are not yet verifiable from Epic**
Clinic Waiting Time (Cycle Time: registration to provider visit)	< 45 min.	*	*	**These metrics will be automated in Epic; not yet reliable enough to be reportable**

**Some metrics reports are still being written for the new system*

Patient Visit Trending Over 12 Months



	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov
Visits-actual	7,891	9,379	9,080	9,262	9,836	9,824	8,503	9,611	9,459	8,957	10,540	8,162
TARGETS	8,171	9,829	8,561	10,418	11,623	10,969	9,265	10,186	10,186	9,260	10,649	8,797