



AGENDA

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

Board Members		Consumer Members: Lee Herrington (Co-Chair), Celia Lee, Filipo Chapelle, Richard Osbourne, Christopher Hutton, Wm Darrel Gardner, Stephen Ferrara, Cynthia Guerrero <u>Community Members:</u> Skip Szymanski (Chair), Sylvia Barnard, Jason Prystowsky, MD, Arianna Castellanos, Emily Casarez <u>Non-Voting Staff Member:</u> Dr. Douglas Metz	
Item #	Time	Item	Owner
I.	12:00-12:03	Welcome and Call to Order	Szymanski
II.	12:03-12:08	Review and Approve Minutes from June 24, 2020	Szymanski
III.	12:08-12:10	Roll Call and Quorum Established	Johnston
IV.	12:10-12:13	Public Comment Period	
V.		Old Business: None	
VI.	12:13-12:13	New Business: None	
VII.	12:13-15 min	Standing Reports: 1. Monthly, Quarter, and Fiscal Year End Financial Reports: Staff recommends that the Board accept and approve the Financial Report for the month of June 2020, FY 19-20 4 th quarter and Fiscal Year 19-20.	Jacobson
	5 min	2. Policy Review Committee Report: The Policy Review Committee recommends that the Board vote to approve the policies referenced in VII.3	Policy Review Committee
	3 min	3. Provider Appointments: Staff recommends that the Board vote to approve the Provider Appointments referenced in VII.4	Baldwin
	8 min	4. Quality Measures Report: For Board Review, No action necessary	Gomez
	5 min	5. Executive Director's Report: For Board Review, No action necessary	Metz
	10 min	6. COVID-19 Update	Gamble
VIII.	1:14-1:17	Member Announcements	Szymanski
X.	1:188	Meeting Adjourned	Szymanski

Public Comment By phone - If you would like to make a comment by phone, please call (805) 681-5461 and state your name, your phone number and which item you would like to speak on and the clerk will call you at the appropriate time. Please make every effort to be available and mute all streaming devices once it is your turn to speak.

Late Distribution of Materials

Any disclosable public records related to an open session item on a regular meeting agenda and distributed to all or a majority of the members of the HC Board less than 72 hours prior to that meeting are available for inspection in the Primary Care & Family Health Administration office located at 300 N. San Antonio Road, Room A107, Santa Barbara, CA. 93110 and on the Internet at: <http://www.countyofsb.org/phd/primary-care/health-center-board.sbc>

Any written ex-parte communication subject to disclosure by members of the HC Board may be published online as an attachment to the corresponding item.



HEALTH CARE CENTERS

PUBLIC HEALTH DEPARTMENT
SANTA BARBARA COUNTY

Health Center (HC) Board Minutes June 24, 2020

The Health Center Board met via Go To Meeting.

Present: Consumer Members: Lee Herrington (Co-Chair), Filipo Chappelle, Wm. Darrel Gardner, Richard Osbourne

Community Members: Skip Szymanski (Chair) Emily Casarez, Sylvia Barnard, Arianna Castellanos, Jason Prystowsky

Non-Voting Member: Douglas Metz, Health Center Executive Director

Staff: Kendall Johnston, Paola Hurtado, Dana Gamble, Jeanette Gumber, Suzanne Jacobson, Polly Baldwin, Melissa Gomez, Elvira Briones-Arellano, Michael Camacho-Craft.

Guests/Speaker: None

Agenda Items

I. Call to Order

Meeting was called to order by Chair Szymanski at 12:04pm.

II. Review and Approve Minutes from the April 22 and May 27 Meetings

As the April minutes were omitted from the May Board packet of materials, they were tabled for the June meeting. The only change requested was that Ms. Casarez was listed twice as an attendee on the May minutes, which has been corrected. There was no public comment.

Mr. Chappelle motioned that the minutes from both the April and May Board meetings be approved by the HC Board; Mr. Herrington seconded.

Motion Carried Unanimously.

III. Roll Call, Sign In and Quorum Established.

Chair Szymanski requested the virtual attendees do a roll call and verified that a quorum was established.

IV. Public Comment: None

V. Old Business: None

VI. New Business: None

[Mr. Gardner Joined the meeting at 12:15pm]

VIII. Standing Reports:

1. May 2020 Financial Report-Ms. Jacobson

Ms. Jacobson presented her financial report, beginning with announcing that the month of May showed a positive bottom line of \$83K, while the year-to-date totals are at a deficit of \$1,663,016. It is the end of the fiscal year so staff are working hard to collect any unpaid invoices for the current budget and accruing purchases that may not be invoiced until after July 1. Since Medi-Cal relaxed some of the rules for billing for telemedicine visits at the health centers, Ms. Jacobson is hoping for a bump in revenue despite processing delays with Medi-Cal. The ADAP budget showed a positive variance for May, due to the fact that HIV+ persons are still receiving their medications from the pharmacies despite the pandemic.

While salaries and benefits are trending on budget for the year to date, pharmaceuticals are lagging behind due to a lower volume of pharmacy prescriptions and COVID-19 impacts. Physician fees

continue to to be overbudget due to the use of contracted labor but may be balancing out; Ms. Jacobson stated that the next month's report would have a clearer picture of the trends. Data processing charges also contribute to the overage, but will even out next month as well because three months' worth of costs were charged in May as it was the middle of the quarter. No public comment.

Mr. Gardner motioned that the Board approve the April monthly financial report; Mr. Herrington seconded.

Motion Carried Unanimously.

2. Policy Review Committee

There were 14 original policies for review during the month of June with an additional 4 policies that staff requested the Committee to expedite review: 06-C-280, 18-C-635, 18-C-636, 18-C-637.

Mr. Herrington noted that the committee had reviewed the policies and his questions regarding the dates were answered prior to the meeting. No public comment.

Mr. Herrington motioned that the policies presented in April be approved by the Board; Ms. Casarez seconded.

Motion Carried Unanimously

3. Provider Appointments-Dr. Baldwin

Dr. Baldwin shared with the Board the two providers for reappointment, Drs. Martinez and Heck, who have been with the healthcare centers for years. Dr. Baldwin was happy to announce the new pediatrician for the Santa Maria Health Center, Dr. Kristine Reyes. No public comment.

Mr. Gardner motioned that the Board approve the aforementioned providers for initial and re-appointment; Dr. Prystowsky seconded.

Motion Carried Unanimously.

4. Quality Measures Report-Ms. Gomez

Ms. Gomez reported briefly on the performance measures as of May 31 2020 which also reflect anticipated decreases due to COVID-19:

Diabetes Control/A1C: declined to 67.73% and sitting just above the benchmark

Asthma with Controller Medication: Continues to exceed the goal and will be retired next month and replaced with a new measure that the Medical Practices Committee identifies.

Hypertension: saw a small decrease from the previous month, but steady overall.

Depression Screening: Another slight dip in compliance, however many of the staff who were tracking this measure have been gone due to COVID and are now returning to the clinics so it is expected to improve in the upcoming months.

Breast Cancer Screenings: Very slight decrease from the previous month, as mammography's may not be priorities to individuals during a pandemic.

Patient Satisfaction (Wait time): Slightly above the national average but a small decrease from the previous quarter.

As preventative services start re-opening at local facilities and the County health centers, we anticipate continued progress. No public comment.

5. Executive Director's Report-Dr. Metz

Dr. Metz began his report by thanking the Board Members for continuing on with our virtual meetings each month. He also gave kudos to the clinic staff who have consistently kept patient visits, either in person or by phone or video at a 75-90% rate, compared with other FQHC's that are stuck in the 60-65% range. One of the main highlights from June is that the Santa Maria Health Center will be starting their pediatric clinic and partnering with CenCal to identify patients. Additionally, the Franklin and Carpinteria centers were re-recognized as Patient Centered Medical Home (PCMH) certified. Dr. Metz introduced a new chart in his report that is related to COVID and reported to the CEOs office. Chair Syzmanski requested that the new chart be included in Dr. Metz' future reports as long as PHD is responding to COVID.

Mr. Gamble provided an update about the PHD's COVID response with 2,509 cases reported as of June 23, 2020. Mr. Gamble explained the cases by location and the population thresholds for reporting as well as recovery rates and hospitalization/ICU bed availability. Recent race and ethnicity reports show that there is a disproportionate rate of COVID infections in Hispanic population than any other group. PHD is working on targeted outreach to persons in this population with resources being made available in Spanish and Mixteco, as well as providing easy access to testing locations. A discussion ensued regarding the community testing sites through Optum Serve, with it taking more time to get an appointment and even more time to get the results. This is problematic for those who work or live in congregate settings like a homeless shelter as results are needed immediately. No public comment.

VII. Member Announcements: None

VIII. Adjournment

Meeting was adjourned at 1:16pm.

DRAFT

MEETING DATE: 7/22/2020

AGENDA ITEM NO.: VII.1

**HEALTH CENTER BOARD
PUBLIC HEALTH DEPARTMENT**

Date: 7/15/2020

To: Health Center Board

From: Suzanne Jacobson

Subject: Financial Report for June 2020

RECOMMENDATION:

That the Board: Accept and approve the Financial Report for the month, quarter, and year ended June 30, 2020

DISCUSSION/BRIEF SUMMARY OF ITEM:

Financial Report and presentation for the month, quarter, and year ended 6/30/2020.



HEALTH CARE CENTERS
PUBLIC HEALTH DEPARTMENT
SANTA BARBARA COUNTY

Health Care Centers Public Health Department

June 2020 Monthly Report and FY 2019-20 4th QTR Fiscal Year End Financial Report

July 22, 2020

Santa Barbara County
PUBLIC Health DEPARTMENT

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HEALTH CARE CENTERS
PUBLIC HEALTH DEPARTMENT
SANTA BARBARA COUNTY

June YTD and MTD Financial

Santa Barbara County Public Health Department Health Care Centers
Financial Monthly Report for CHC/HCH Grant H80CS00046
For the Month of June 2020 - Fiscal Year 2019-20

	FY 19-20 ADOPTED BUDGET	FY 19-20 As of 6-30-20 BUDGET	FY 19-20 As of 6-30-20 YTD ACTUALS	FY 19-20 June YTD Variance	FY 19-20 YTD % of Budget	ONE MONTH ADJUSTED BUDGET	FY 19-20 June ACTUALS	FY 19-20 June Variance	FY 19-20 June % of Budget
REVENUES									
PROGRAM INCOME									
Medicaid	\$ (39,270,200)	\$ (39,270,200)	\$ (37,016,417)	\$ 2,253,783	94%	\$ (3,272,517)	(4,448,563)	\$ (1,176,046)	136%
Medicare	(5,478,400)	(5,478,400)	(6,216,624)	(738,224)	113%	(456,533)	(565,630)	(109,097)	124%
Self-pay (includes HAP)	(1,772,100)	(1,772,100)	(1,809,917)	(37,817)	102%	(147,675)	(108,040)	39,635	73%
LOCAL AND STATE FUNDS									
State/Local Funds-TSAC/GF	(9,387,616)	(9,387,616)	(7,965,563)	1,422,053	85%	(782,301)	(348,711)	433,591	45%
FEDERAL 330 GRANT	(2,100,000)	(2,100,000)	(2,820,998)	(720,998)	134%	(175,000)	(982,104)	(807,104)	561%
OTHER FEDERAL FUNDING									
ADAP	(766,000)	(766,000)	(1,053,395)	(287,395)	138%	(63,833)	(73,206)	(9,373)	115%
TOTAL REVENUE	\$ (58,774,316)	\$ (58,774,316)	\$ (56,882,914)	\$ 1,891,402	96.8%	\$ (4,897,860)	\$ (6,526,254)	\$ (1,628,394)	133.2%
EXPENDITURES									
PERSONNEL									
PERSONNEL	\$ 22,208,800	\$ 22,208,800	\$ 23,183,146	\$ 974,346	104%	\$ 1,850,733	\$ 1,643,879	\$ (206,853)	89%
FRINGE BENEFITS	14,195,500	14,195,500	12,632,427	(1,563,073)	89%	1,182,958	944,129	(238,829)	80%
TOTAL PERSONNEL	36,404,300	36,404,300	35,815,573	(588,727)	98%	3,033,692	2,588,008	(445,682)	85%
TRAVEL									
PHD Carpool	62,200	62,200	46,667	(15,533)	75%	5,183	1,194	(3,990)	23%
Transportation - Local Mileage	26,100	26,100	27,000	900	103%	2,175	5,231	3,056	241%
Training and Travel	88,500	88,500	53,244	(35,256)	60%	7,375	21,143	13,768	287%
TOTAL TRAVEL	176,800	176,800	126,911	(49,889)	72%	14,733	27,568	12,834	187%
SUPPLIES									
Medical Supplies	630,400	630,400	661,818	31,418	105%	52,533	68,487	15,953	130%
Office Supplies	168,000	168,000	153,714	(14,286)	91%	14,000	11,670	(2,320)	83%
Pharmaceuticals	6,724,000	6,724,000	4,898,697	(1,825,303)	73%	560,333	450,890	(109,443)	80%
Bus Tokens	20,000	20,000	450	(19,550)	2%	1,667	-	(1,667)	0%
TOTAL SUPPLIES	7,542,400	7,542,400	5,714,679	(1,827,721)	76%	628,533	531,047	(97,487)	84%

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HEALTH CARE CENTERS		June YTD and MTD Financial							
PUBLIC HEALTH DEPARTMENT									
SANTA BARBARA COUNTY									
Santa Barbara County Public Health Department Health Care Centers									
Financial Monthly Report for CHC/HCH Grant H80CS00046									
For the Month of June 2020 - Fiscal Year 2019-20									
	FY 19-20 ADOPTED BUDGET	FY 19-20 As of 6-30-20 BUDGET	FY 19-20 As of 6-30-20 YTD ACTUALS	FY 19-20 June YTD Variance	FY 19-20 YTD % of Budget	ONE MONTH ADJUSTED BUDGET	FY 19-20 June ACTUALS	FY 19-20 June Variance	FY 19-20 June % of Budget
CONTRACTUAL									
Janitorial Services	303,500	303,500	314,017	10,517	103%	25,292	63,835	38,544	252%
Physician Fees	2,080,900	2,080,900	2,516,446	435,546	121%	173,408	347,277	173,869	200%
Professional Services	816,000	816,000	815,921	(79)	100%	68,000	125,795	57,795	185%
TOTAL CONTRACTUAL	3,200,400	3,200,400	3,646,384	445,984	114%	266,700	536,908	270,208	201%
OTHER									
Building Maintenance	35,200	35,200	76,865	41,665	218%	2,933	49,460	46,527	1686%
Communications	287,600	287,600	279,921	(7,679)	97%	23,967	25,521	1,554	106%
Data Processing	912,100	912,100	923,426	11,326	101%	76,008	2,668	(73,340)	4%
Liability Insurance	361,800	361,800	361,403	(397)	100%	30,150	30,117	(33)	0%
Malpractice Insurance	452,600	452,600	501,203	48,603	111%	37,717	41,767	4,050	0%
Other Clinical Expenditures	268,500	268,500	245,514	(22,986)	91%	22,375	27,232	4,857	122%
Other Office Expenditures	1,309,700	1,309,700	1,679,740	370,040	128%	109,142	344,574	235,432	316%
Public Health Lab Services	90,000	90,000	51,708	(38,292)	57%	7,500	232	(7,268)	3%
Rents & Leases	141,600	141,600	117,072	(24,528)	83%	11,800	10,150	(1,650)	86%
Services County Provided	146,200	146,200	113,900	(32,300)	78%	12,183	24,306	12,123	200%
Utilities	404,200	404,200	414,283	10,084	102%	33,683	41,084	7,401	122%
TOTAL OTHER	4,409,500	4,409,500	4,765,034	355,535	108%	367,458	597,111	229,653	162%
TOTAL DIRECT COSTS	\$ 51,733,400	\$ 51,733,400	\$ 50,068,581	\$ (1,664,818)	96.8%	\$ 4,311,117	\$ 4,280,642	\$ (30,474)	99.3%
INDIRECT COST (13.61% OF TADC)	7,040,916	7,040,916	6,814,334	(226,583)	96.8%	586,743	582,595	(4,148)	99.3%
TOTAL BUDGET	\$ 58,774,316	\$ 58,774,316	\$ 56,882,914	\$ (1,891,402)	96.8%	\$ 4,897,860	\$ 4,863,237	\$ (34,623)	99.3%
Net Surplus/ Deficit	\$ (0)	\$ (0)	\$ (0)	\$ (0)		\$ (0)	\$ (1,663,016)	\$ (1,663,016)	
			Balance for Year				Positive NFI		

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HEALTH CARE CENTERS		HC Budget Summary	
PUBLIC HEALTH DEPARTMENT			
SANTA BARBARA COUNTY			
FY 2019-20 YTD HC Financials			
	Budget	Actuals	
Revenues	\$ 58,774,316	\$ 56,882,915	
Expenditures	\$ 58,774,316	\$ 56,882,915	
Net Margin	\$ 0	\$ 0	
<ul style="list-style-type: none"> Year to date Medi-Cal revenues for our Health Centers have shown improvement due to great work from staff. We have closed the year with revenues and expenses balances with both below our budget. 			

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Revenue Highlights

UNDER BUDGET

- ✓ Medi-Cal (\$2.3M)
- ✓ State/local Funds (\$1.4M)

OVER BUDGET

- ✓ Medicare \$738K
- ✓ ADAP \$287K
- ✓ Federal 330 Grant \$720K

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Expenditure Highlights

UNDER BUDGET

- ✓ Pharmaceuticals (\$1.83M)
- ✓ Indirect Cost (\$227K)
- ✓ Salaries and Benefits (\$589K)

OVER BUDGET

- ✓ Physician Fees \$435K
- ✓ Other Office Expense \$370K

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**HEALTH CARE
CENTERS**

PUBLIC HEALTH DEPARTMENT
SANTA BARBARA COUNTY

Summary & Big Picture

For Fiscal Year 2019-20:

- Revenues ended the quarter below budget (96.8% of budget)
- Expenses ended the quarter below budget (96.8% of budget)

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**HEALTH CARE
CENTERS**

PUBLIC HEALTH DEPARTMENT
SANTA BARBARA COUNTY

Recommendation

- Approve the financial report for 6/30/2020.



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Santa Barbara County Public Health Department Health Care Centers
 Financial Monthly Report for CHC/HCH Grant H80CS00046
 For the Month of June 2020 - Fiscal Year 2019-20

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Santa Barbara County Public Health Department Health Care Centers
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Net Surplus/ Deficit	\$ (0)	\$ (0)	\$ (0)	\$ (1)		\$ (0)	\$ (1,663,016)	\$ (1,663,016)	
			Balanced for Year				Postive NFI		

**HEALTH CENTER BOARD
PUBLIC HEALTH DEPARTMENT**

Date: July 15, 2020

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 July 2020.

<u>POLICY NO.</u>	<u>TITLE</u>
1. 15-C-604	Credentialing of Clinical Providers
2. 16-C-616	Primary Care Provider Selection and Documentation
3. 01-C-156	Medical Practices Committee Measuring and Improving Clinical Performance
4. 13-C-589	Managing Patient Populations with Preventative Care, Chronic Condition and Special Medication Needs
5. 10-CM-03	Controlled Medications: Prescription Limits in Urgent Care, Primary Care and Specialty Clinic Settings
6. 10-CM-12	Prescription Pad Security
7. 12-C-567	Weight Management Policy and Procedures
8. 03-C-182	Early Refills, Lost or Stolen Medications
9. 20-C-652	SBCPHD Tidepool Clinical Use Policy
10. 01-C-143	Workers Compensation in the Santa Barbara Healthcare Centers
11. 05-C-269	Health Center Schedules Alterations/Modification
12. 07-C-296	Medical Device Malfunction Reporting
13. 97-C-048	Child Abuse Statutory Rap Reporting
14. 99-C-131	Grievance Procedure for CenCal Health

	Number: 15-C-604
Prepared By: Polly Baldwin, MD, MPH, Medical Director	Effective Date: 07/24/2020
Authorized By: Douglas Metz, DPM, MPH, Deputy Director PCFH	Original Date: 02/01/2015
TITLE: Credentialing of Clinical Providers	Next Review Date: 07/24/2021

POLICY

All employed, contracted and volunteer clinicians providing direct patient care at the Health Care Centers in the Public Health Department (PHD) will submit to the credentialing process prior to beginning their appointment and as needed for re-appointment. Providers' credentials are reviewed at regular intervals, and at least every two years, while the clinician is providing patient care at the PHD.

PURPOSE

To define the criteria and process for credentialing and re-credentialing providers with the aim of establishing a provider's clinical background and current competence.

<p>Santa Barbara County</p>  <p>PUBLIC Health DEPARTMENT</p>	<p>Number: 16-C-616</p>
<p>Prepared By: Melissa Gomez, R.N., and Janette Avina, R.N., Performance Improvement Coordinators</p>	<p>Effective Date: 07/22/2020</p> <p>Original Date: 1/2014</p>
<p>Authorized By: Douglas Metz, DPM, Deputy Director and Polly Baldwin, MD, Medical Director</p>	<p>Next Review Date: 07/22/2021</p>
<p>TITLE: Primary Care Provider Selection and Documentation</p>	

POLICY

The Public Health Department Health Care Centers will encourage each patient to select a primary care provider (PCP) from available providers. If the patient does not want to choose, a PCP will be selected for the patient. With approval from the providers involved, patients may change PCPs within guidelines explained in the affiliated procedure.

PURPOSE

- To encourage patient choice of PCP as a step towards patient engagement and satisfaction
- To outline a process for the patient to select their PCP

<p>Santa Barbara County</p>  <p>PUBLIC Health DEPARTMENT</p>	<p>Number: 01-C-156</p>
<p>Prepared By: Melissa Gomez RN, Performance Improvement Coordinator</p>	<p>Effective Date: 07/22/2020</p> <p>Original Date: 11/24/2004</p>
<p>Authorized By: Polly Baldwin, MD, Medical Director</p>	<p>Next Review Date: 07/22/2021</p>
<p>TITLE: Medical Practices Committee: Measuring and Improving Clinical Performance</p>	

POLICY

The Primary Care & Family Health (PCFH) Division will support a Medical Practices Committee Medical (MPC) which oversees clinical and quality operations for the system. The Committee will produce an annual Medical Quality Improvement Plan, which incorporates performance measures for the Health Care Centers (HCC), providers, and patient populations. The MPC will develop goals for these measures and will review reports quarterly, reassessing the improvement plans, and revising actions to be taken as necessary to reach the goals. These activities will result in documentation that supports the Community Health Center Uniform Data Set, Affordable Care Act Meaningful Use, Patient Centered Medical Home, Ryan White Part C Grant, and all other required program reporting.

PURPOSE

- To define the organization of the Medical Practices Committee (MPC)
- To describe the charge of the MPC
- To define the Medical Quality Improvement Plan (MQI Plan) and outline the process by which the MPC develops the plan annually.
- To describe the functions of the Medical Practices Committee

<p>Santa Barbara County PUBLIC Health  DEPARTMENT</p>	<p>Number: 13-C-589</p>
<p>Prepared By: Melissa Gomez, RN</p>	<p>Effective Date: 07/29/2020 Original Date: 7/29/2013</p>
<p>Authorized By: Polly Baldwin, MD, Medical Director.</p>	<p>Next Review Date: 07/29/2021</p>
<p>TITLE: Managing Patient Populations with Preventive Care, Chronic Condition and Special Medication Needs</p>	

POLICY

The Health Care Centers will use communication tools to assist in managing patient populations in need of specific services.

PURPOSE

To address population of patients due for:

- Preventive medical care services
- Immunizations
- Chronic medical conditions in need of services
- Patients not seen regularly in the practice

<p>Santa Barbara County PUBLIC Health  DEPARTMENT</p>	<p>Number: 10-CM-03</p>
<p>Prepared By: Polly Baldwin, MD, MPH, Medical Director</p>	<p>Effective Date: 07/22/2020 Original Date: 03/01/2015</p>
<p>Authorized By: Polly Baldwin, MD, MPH, Medical Director</p>	<p>Next Review Date: 07/22/2021</p>
<p>TITLE: Controlled Medications: Prescription Limits in Urgent Care, Primary Care and Specialty Clinic Settings</p>	

POLICY

Public Health Department (PHD) clinicians who prescribe controlled medications (CM) for PHD patients must follow criteria to assure safe and appropriate use of CMs including limits to the quantities of CMs and/or the duration of treatment with CMs.

PURPOSE

- To provide guidance to clinicians on prescription of CM in various PHD clinical settings
- To increase patient safety
- To standardize patient care across medical providers in the PHD

<p>Santa Barbara County PUBLIC Health  DEPARTMENT</p>	<p>Number: 10-CM-12</p>
<p>Prepared By: Polly Baldwin, MD, Medical Director</p>	<p>Effective Date: 07/22/2020</p>
	<p>Original Date: 11/1/2010</p>
<p>Authorized By: Polly Baldwin, MD, Medical Director</p>	<p>Next Review Date: 07/22/2021</p>
<p>TITLE: Prescription Pad Security</p>	

POLICY

To maintain secure control of Public Health Department (PHD) clinician prescription pads as required by Federal and State regulations.

PURPOSE

- To avoid diversion of prescription blanks for inappropriate or illicit use.

<p>Santa Barbara County PUBLIC Health  DEPARTMENT</p>	<p>Number: 12-C-567</p>
<p>Prepared By: Polly Baldwin, MD, Medical Director and Melissa Gomez, RN, CCM</p>	<p>Effective Date: 07/01/2020 Original Date: 07/01/2011</p>
<p>Authorized By: Polly Baldwin, MD, Medical Director</p>	<p>Next Review Date: 07/01/2021</p>
<p>TITLE: Weight Management Policy and Procedures</p>	

POLICY

All patients will have their body mass index (BMI) or BMI percentile calculated and documented in the medical record at each clinic visit. Adult patients with a BMI out of the normal range will be provided counseling at least every six months. All pediatric patients will be provided counseling at least annually regardless of their BMI percentile. Counseling must include dietary and activity recommendations.

PURPOSE

To establish a policy and procedure for weight measurement, counseling and the management of Santa Barbara County Health Care Center patients with a BMI out of the normal range.



Number: 03-C-182; 10-CM-11

Prepared By: Carol Millage, PharmD
Pharmacy Director

Effective Date: 12-29-18

Original Date: 6-6-03

Authorized By: Assistant Deputy Director

Next Review Date: December 2020

TITLE: Early Refills, Lost, or Stolen Medications

POLICY

It is the policy of the Public Health Department to clearly delineate policies for PHD staff guidance regarding early refill requests, lost medications, and stolen medications to prevent diversion or misuse of pharmaceuticals.

PURPOSE

These requirements will apply to all PHD patients on Federal/State/County subsidized prescription coverage. Self-pay patients and insurance plans that support more than 30 day supplies may be offered larger day supplies on non-controlled/non-abused medications when appropriate.

<p>Santa Barbara County PUBLIC Health  DEPARTMENT</p>	<p>Number: 20-C-652</p>
<p>Prepared By: Laura Lui MS, EHR Manager</p>	<p>Effective Date: 7/22/2020 Original Date: 7/22/2020</p>
<p>Authorized By: Polly Baldwin, MD MPH Medical Director</p>	<p>Next Review Date: 7/22/2021</p>
<p>TITLE: SBCPHD Tidepool Clinical Use Policy</p>	

POLICY

At the request of the patient, Health Care Providers at the Santa Barbara County Public Health Department (SBCPHD) will utilize the Tidepool application to review diabetic equipment data that has been shared with them by the patient. SBCPHD staff and providers may upload individual patient data to Tidepool upon patient request.

PURPOSE

- To provide comprehensive medical care for patients with Diabetes.
- To provide for the secure access to glucometer and glucose monitor data for the patients and the providers

	Number: 01-C-143
Prepared By: Douglas Metz, MPH, DPM, Deputy Director PCFH; Polly Baldwin, MD, Medical Director; Dana Gamble, Assistant Deputy Director	Effective Date: 08/28/2020
Authorized By: Douglas Metz, MPH, DPM, Deputy Director PCFH	Original Date: 1/1/2001
TITLE: Workers Compensation in Santa Barbara Healthcare Centers	Next Review Date: 08/28/2021

POLICY

The Public Health Department (PHD) is not a Provider for Workers Compensation cases. Patients should be referred to an approved workers compensation clinic or designated medical facility for their care and PHD Providers should not complete a Doctor’s 1st report.

PURPOSE

To describe the policy and procedure for processing patients who present to the PCFH clinics with a workers compensation injury.

 <p>Santa Barbara County PUBLIC Health DEPARTMENT</p>	<p>Number: 05-C-269</p>
<p>Prepared By: Health Center Administrators</p>	<p>Effective Date: 08/28/2020</p> <p>Original Date: 1/16/2008</p>
<p>Authorized By: Dr. Douglas Metz, MPH, DPM, Deputy Director PCFH</p>	<p>Next Review Date: 08/28/2021</p>
<p>TITLE: Health Center Schedules Alteration/Modification</p>	

POLICY

Management of Health Care Center provider schedules is key to ensuring appropriate access for patients seeking care. It is the policy of the Santa Barbara County Public Health Department to manage its schedules to optimize access to health care services with the goal to meet the needs of the community and the budget goals of the department. Only a Health Care Center Administrator or designee may approve changes in the health center provider schedules.

PURPOSE

The purpose of this policy is to ensure that health center schedules provide reasonable access to needed health care. This policy supports the "Broken and Follow Up Appointment Scheduling Policy" and the Average Number of Days to Schedule an IM or Family Medicine Appointment Recurring Performance Measures.

 <p>Santa Barbara County PUBLIC Health DEPARTMENT</p>	<p>Number: 07-C-296</p>
<p>Prepared By: Jeanie Sleigh, Health Center Administrator</p>	<p>Effective Date: 8/1/2020</p> <p>Original Date: 1/22/2007</p>
<p>Authorized By: Douglas Metz, DPM, MPH, Deputy Director - PCFH</p>	<p>Next Review Date: 8/1/2021</p>
<p>TITLE: Medical Device Malfunction Reporting</p>	

POLICY

It is the policy of the PHD that failure or malfunction of a medical device used in conjunction with patient care will be documented and reported.

PURPOSE

To establish a consistent process for reporting adverse events involving malfunctioning medical devices.

BACKGROUND

The Safe Medical Device Act of 1990 and other laws give the Food and Drug Administration (FDA) authority to regulate medical devices. In general, incidents in which a device may have caused or contributed to serious illness, injury or death must be reported to the FDA under the Medical Device Reporting program. In addition, certain malfunctions must also be reported. The MDR regulation is a mechanism for the FDA and manufacturers to identify and monitor significant adverse events involving medical devices. The goals of the regulation are to detect and correct problems in a timely manner.

 <p>Santa Barbara County PUBLIC Health DEPARTMENT</p>	<p>Number: 97-C-048</p>
<p>Prepared By: Margaret Dodds, Supervising MD, Franklin/Carpinteria HCCs</p>	<p>Effective Date: 8/28/2020</p> <p>Original Date: 1/1/1997</p>
<p>Authorized By: Douglas Metz, MPH, DPM, Deputy Director PCFH, Polly Baldwin, MD, Medical Director</p>	<p>Next Review Date: 8/28/2021</p>
<p>TITLE: Child Abuse and Statutory Rape Reporting</p>	

POLICY

Public Health Department clinics shall comply with California Penal Code Sections 261.5, 288 and 11164-11167.5. These laws require any Health Practitioner or other mandated reporter who, in his/her professional capacity or within the scope of his/her employment, has knowledge of or observes a child whom the mandated reporter knows or reasonably suspects has been the victim of child abuse, neglect, sexual abuse or statutory rape must make a report to the local child protective services agency.

PURPOSE

Santa Barbara County Public Health Department values the safety and well-being of children. This policy is to insure compliance with child abuse reporting laws. A mandated reporter who fails to report under this law is guilty of a misdemeanor punishable by up to six months confinement in the county jail, a fine of \$1,000 or both.

<p>Santa Barbara County PUBLIC Health  DEPARTMENT</p>	<p>Number: 99-C-131</p>
<p>Prepared By: Douglas Metz, MPH, DPM, Deputy Director PCFH</p>	<p>Effective Date: 08/28/2020</p> <p>Original Date: 4/1/2005</p>
<p>Authorized By: Douglas Metz, MPH, DPM, Deputy Director PCFH</p>	<p>Next Review Date: 08/28/2021</p>
<p>TITLE: Grievance Procedure for CenCal Health</p>	

POLICY

All Public Health Department Clinics will comply with the CenCal Member Grievance Procedure.

PURPOSE

To provide CenCal Members a process by which they can file a complaint or appeal with CenCal.

MEETING DATE: July 22, 2020

AGENDA ITEM NO.: VII.3

**HEALTH CENTER BOARD
PUBLIC HEALTH DEPARTMENT**

Date: July 15, 2020
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:

- Kara Garcia, MD Carpinteria Health Center Pediatrics



DISCUSSION/BRIEF SUMMARY OF ITEM:

All providers approved by Board Delegate

MEETING DATE: July 22, 2020

AGENDA ITEM NO.: VII.4

**HEALTH CENTER BOARD
PUBLIC HEALTH DEPARTMENT**

Date: 7/22/20

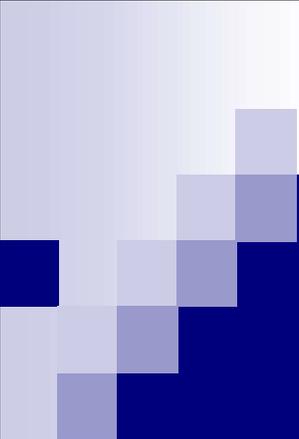
To: HC BOARD

From: Melissa Gomez

Subject: Medical Quality Report

RECOMMENDATION: Review

DISCUSSION:



Medical Quality performance improvement plan measures update

June 2020 Data

Melissa Gomez RN CCM 07/2020



Measures for Improvement 2020

- Diabetes Control
- Hypertension
- Depression screening and intervention
- Depression screening and intervention for 12-18 year olds ****NEW****
- Breast cancer screening
- Patient satisfaction with wait time(in clinic)-crossroads quarterly report

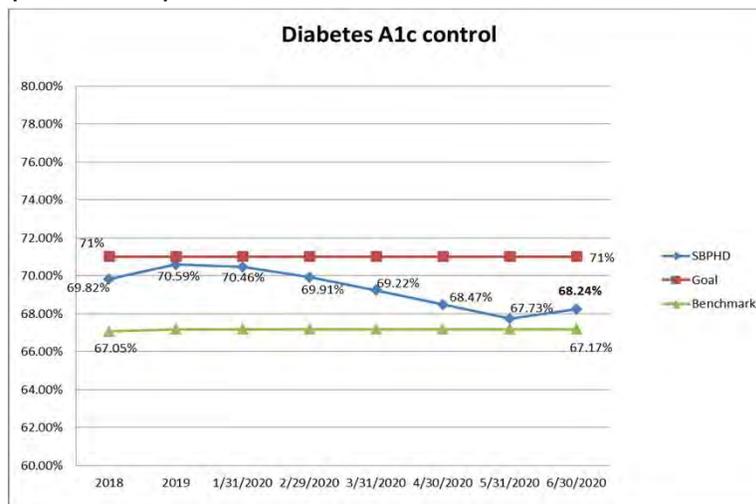


Performance Measure 2019 EPIC (6/31/19 to 7/1/20)	Patients	Percentage	Homeless	Percentage	Goal	HRSA 2018 National
	Total		Total	Homeless		
HgA1c 9 or less	2028	68.24%	81	51.59%	71.00%	67.17%
	2972		157			
Hypertension- Blood Pressure controlled with last BP less than 140/90	2805	54.87%	133	39.58%	65.00%	63.26%
	5112		336			
Depression Screening with intervention if screening is positive (age 12-18)	575	59.65%	4	57.14%	60.00%	70.57%
	964		7			
Depression Screening with intervention if screening is positive (age 12 and up)	7855	53.17%	502	53.86%	60.00%	70.57%
	14774		932			
Mammography -women 50-74 q2 years	1460	50.15%	15	12.40%	59%	58.4%
	2911		121			

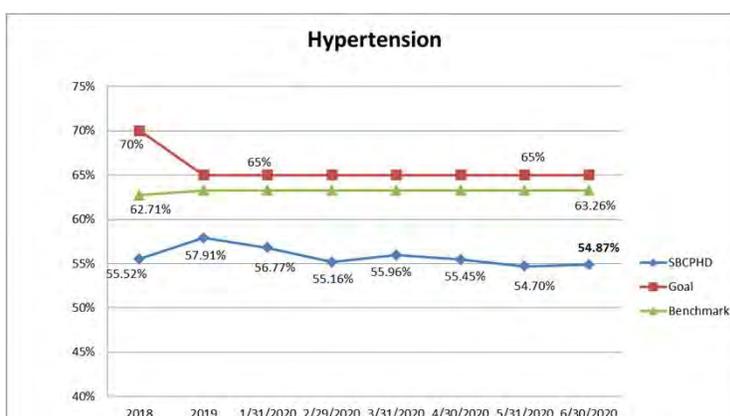


- The Medical Quality Improvement Committee has identified Pediatric depression screening an intervention as the new measure for the Primary Care and Family Health Performance Improvement Plan 2020
- This measure will look at patients aged 12-17 for depression screening to be completed at least annually and if the screening indicates depression, an intervention(follow-up visit, referral to behavioral health, etc.)
- The baseline for this measure is 58.53% and will have the same goal as our ongoing depression measure at 60%.

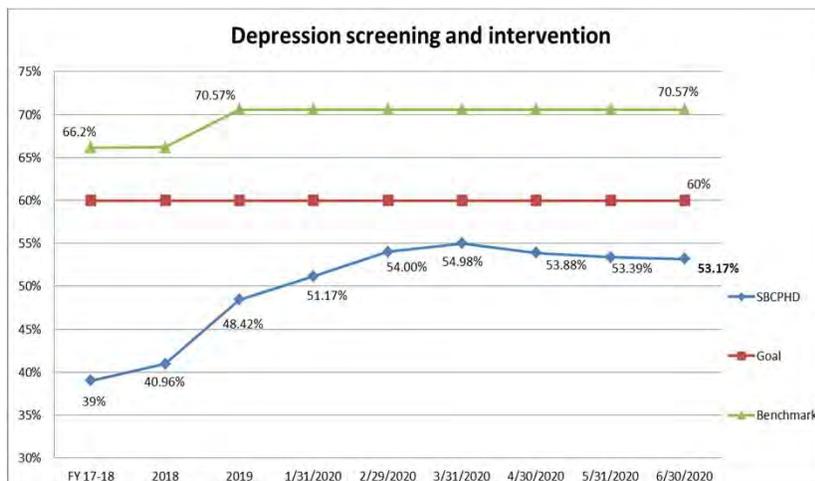
We continue to hover just under our goal, with a slight uptick as in person visits have increased.



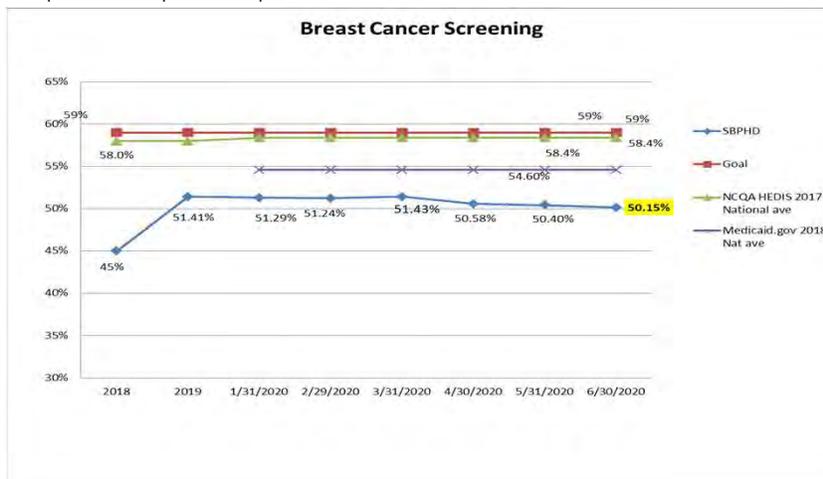
During the last few months there has been a decrease in compliance as many visits were taking place remotely and blood pressures were unable to be monitored.

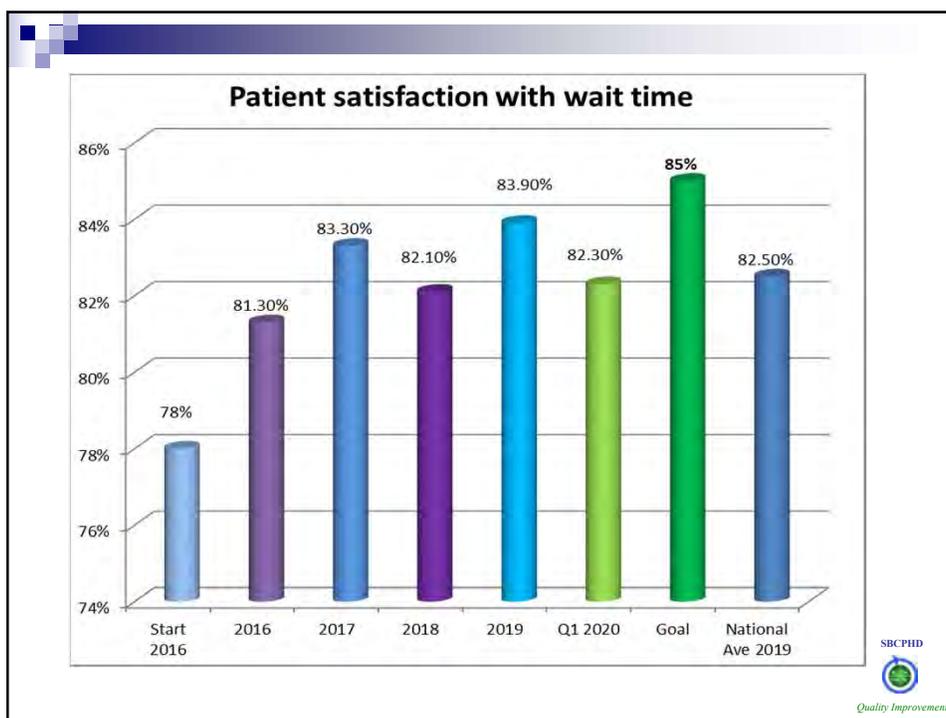


After extensive review, and training- including updated policies and workflows, we saw a huge improvement on depression screening and intervention in 2019. There was a slight dip over the past few months, but as in person visits resume, and workflows for telehealth are put in place to address this, we should continue to see improvement. We continue to focus on this measure closely as we have a long way to go but are much closer to reaching our goals.



In 2019 we made significance improvement on this measure . We have seen a dip over the last couple of months due to limited visits and cancellation of screening tests, but our HCC staff continue to work with patients on improved compliance.





Plan

As mentioned in prior reports, reduced visits and transitioning to virtual visits and telehealth over the past few months has led to a dip in our compliance with these measures. As preventive services start re-opening at local facilities and our health care centers adjust to virtual and phone visits, we anticipate continued progress.

MEETING DATE: June 22, 2020

AGENDA ITEM NO.: VII.5

**HEALTH CENTER BOARD
PUBLIC HEALTH DEPARTMENT**

Date: June 16, 2020

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, July 22, 2020 – VIRTUAL MEETING
To: Health Center Board of Directors
From: Dr. Douglas Metz, Executive Director, Health Centers
RE: E.D. Report

Focus Area	Monthly Highlights – June 2020
Health Center Operations	
<ul style="list-style-type: none"> ● HRSA Relations (Ralph Barbosa, Dana Gamble) 	<ul style="list-style-type: none"> ▪ Staff monitoring HRA/BPHC webinars and announcements for possible additional financial support upcoming ▪ Managing/progress reporting of COVID-19 HRSA grants awarded in April/May
<ul style="list-style-type: none"> ● Santa Barbara (Paola Hurtado) 	<ul style="list-style-type: none"> ▪ On-boarded Staff Nurse Supervisor for Women’s Health Department ▪ Conducted 2020 Internal Medicine & Surgery Resident Orientation at Cottage Hospital ▪ Internal Medicine & Walk-In clinic Residents transitioned from phone consult encounters to in-person visits on 6/26/2020 ▪ Continue to support COVID response efforts by having two Medical Assistants deployed
<ul style="list-style-type: none"> ● Franklin (Elvia Lopez) 	<ul style="list-style-type: none"> ▪ Achieved annual PCMH recertification by NCQA <ul style="list-style-type: none"> ○ CHCC/FHCC PCMH Coordinator became a certified Content Expert ○ Working on defining PCMH reports needed for next reporting period ▪ FHCC AOP and MA staff assisted with the pediatrics training of the SMHCC staff ▪ FHCC participated in the PerC Training to initiate ACES screening for children 0-3 y.o. ▪ Re-introduced DM Clinic telehealth visits with the provider, nutritionist, pharmacist and patient
<ul style="list-style-type: none"> ● Carpinteria (Jeanette Gumber) 	<ul style="list-style-type: none"> ▪ CHCC obtained PCMH re-certification by NCQA ▪ Hosted 9 medical assistants and RNs from SMHCC to observe and obtain skills training in pediatrics between June 1st and June 22nd, 2020 ▪ Said good-bye to Dr. Nudell, a long-time contract pediatrician who practiced at CHCC and LHCC, who announced she would be retiring and not returning to practice after taking a break during COVID-19 ▪ 2-Medical Assistants and 1-AOP from CHCC continue to support the Disease Control effort at the DOC
<ul style="list-style-type: none"> ● Santa Maria (Michael Camacho-Craft) 	<ul style="list-style-type: none"> ▪ Welcomed back Lisa DiModica, PA, to primary care and women’s health ▪ With the arrival of Dr. Reyes, officially started pediatrics – will be ramping up in July ▪ Began quality improvement project to enroll patients in My Chart (patient portal) and use video visits
<ul style="list-style-type: none"> ● Lompoc (Jeanie Sleigh) 	<ul style="list-style-type: none"> ▪ Sarah Adams, LCSW, officially began in her capacity as Behavioral Health Supervisor for PHD-PCFH ▪ HCA, PC Supervising RN and 3 Staff RNs remained deployed to COVID 19 efforts until June 22nd (Supervising RN and Staff Nurses) and June 29th (HCA). All have now returned to their regular positions at the HCC ▪ LHCC has continued efforts to increase patient visits -- LHCC Providers continue to provide a variety of in-person and telehealth visits

<ul style="list-style-type: none"> ● Healthcare for the Homeless (Ralph Barbosa) 	<ul style="list-style-type: none"> ▪ Homeless Management Information System (HMIS) – Preparing department for documentation in HMIS related to COC funding ▪ Assigned to Emergency Operations Center (EOC) & DOC Operations Public Health Branch, total time commitment to EOC/DOC is approximately 25% of total time. The EOC/DOC assignment focuses on assisting HCH population with regard to COVID-19 <ul style="list-style-type: none"> ○ Assisted shelters with concerns of re-opening and preparing facilities (CDC Guidelines) <ul style="list-style-type: none"> ▪ Helped Shelter executives with questions concerning positive tested residents ▪ Facilitated transfers of residents to non-congregate settings depending on their health or COVID status ▪ Participated in several local/regional Homeless meetings that are returning to normal scheduling: <ul style="list-style-type: none"> ○ Lompoc Coordinated Outreach ○ Homeless Task Force ○ Eastside Regional Action Planning (RAP) ACT Meeting ○ State Street Corridor (RAP) ○ Veterans Case Conferencing
<ul style="list-style-type: none"> ● Pharmacy (Carol Millage) 	<ul style="list-style-type: none"> ▪ Completed NABP DME Accreditation ▪ Pharmacy Staff trained and transitioned to new AmerisourceBergen web platform ▪ Medi-Cal reinstated reimbursement for 340B losses in signed budget ▪ Facilitated communications with Direct Relief to get PHD Oximetry for home monitoring of COVID-19 patients ▪ Hired a new tech and Pharmacist EXH to help with COVID-19 relief for staff taking off for child care issues
<ul style="list-style-type: none"> ● Clinical Lab (Linda Weisman) 	<ul style="list-style-type: none"> ▪ Clinical Lab continued to be a resource for testing supplies related to the pandemic ▪ Clinical Lab staff were instrumental in sustaining lab operations while Lab Manager was on medical leave
<ul style="list-style-type: none"> ● Health Information Management / HIPAA / Data Security (Dana Gamble, June English, Laura Lui) 	<ul style="list-style-type: none"> ▪ Public Record Act: Began team review of requested emails for multiple cabinet and staff members, etc. related to pandemic response
<ul style="list-style-type: none"> ● PCMH (Karla Quintana, Melissa Gomez, Polly Baldwin, Doug Metz) 	<ul style="list-style-type: none"> ▪ FHCC & CHCC re-recognized as PCMH!
<ul style="list-style-type: none"> ● Customer Service (Health Center Administrators) 	<ul style="list-style-type: none"> ▪ COVID-19 questions added to patient survey for near-future

PATIENT VOLUME REPORT

June 2020

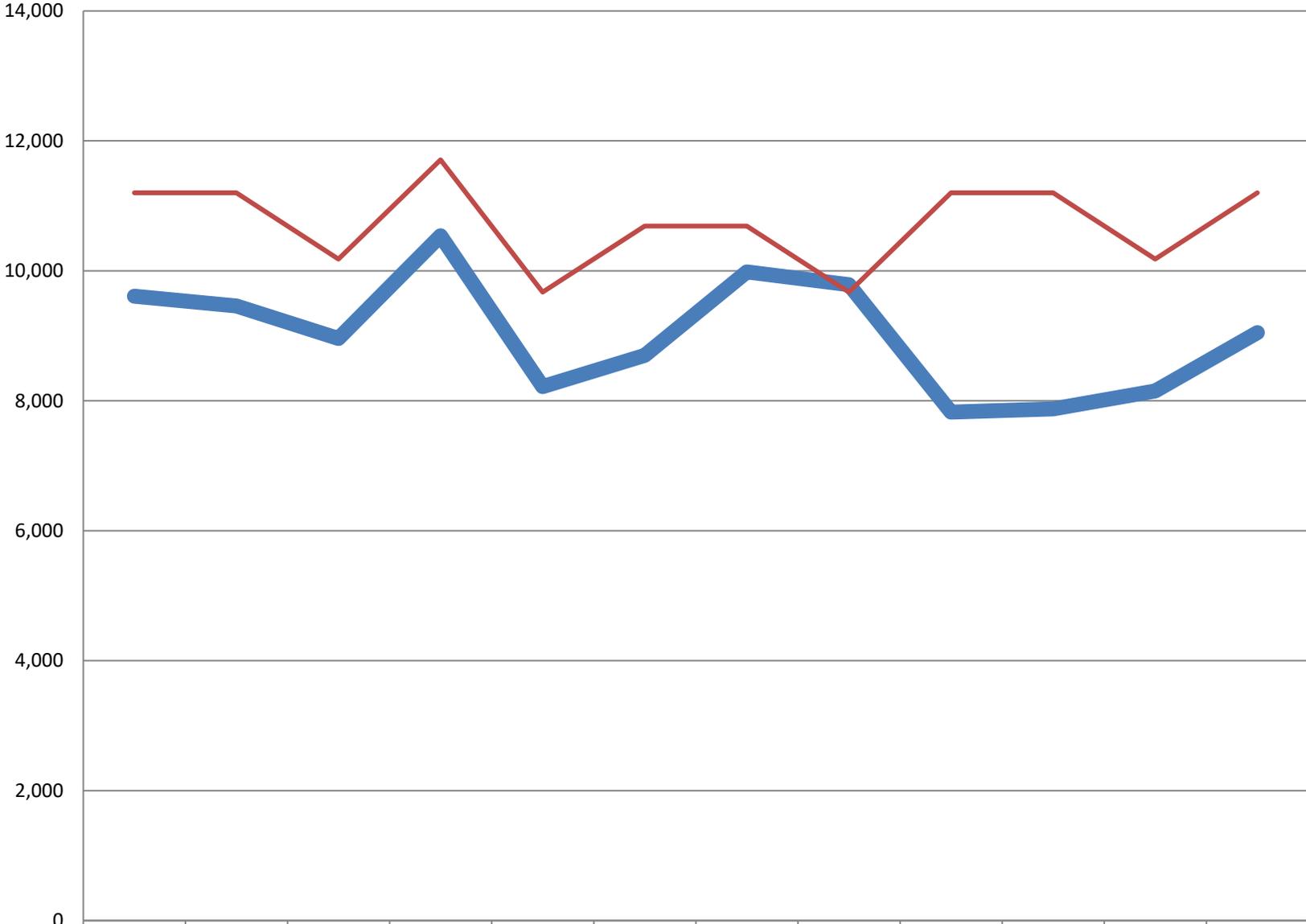
Site	“Billable” Visits This Month	Visits Last Month	Unique Patients This Month	Unique Patients Last Month	Notes
					June = 22 clinic days (last month had 22)
Carpinteria HCC	545	441	406	332	<i>14% increase in daily visits this month</i>
Franklin HCC	1,231	857	850	640	<i>30% increase in daily visits this month</i>
<i>Franklin Elementary School Clinic (1 evening/wk)</i>	0	0	0	0	
Lompoc HCC	2,644	2,625	1,886	1,892	
Santa Barbara HCC	2,037	1,918	1,389	1,332	
Santa Maria HCC	2,246	2,006	1,454	1,354	
Homeless Shelters (3 sites combined)	310	251	160	142	<i>Significant increase in homeless care continues this month due to focus on this population at shelters during pandemic</i>
Outside Sites: PHN Home Visits, Hospital, Deliveries, SNF, etc.)	38	54	38	54	<i>Significant decrease in outside visits due to Coronavirus pandemic</i>
TOTALS	9,051	8,152	6,183	5,746	Note: <i>June pt. visits/day = 411; this represents approx. 91% of pre-COVID average, and 81% of target.</i>
% difference of pts/day from previous month	<i>slight increase of daily pts over last month</i>				Summary: <i>Visit levels lower due to pandemic, but consistent recovery to approach pre-COVID levels, thanks to virtual visits at clinics, which remain at about 50% of visit totals</i>

CLINIC OPERATIONAL MEASURES REPORT (ACROSS ALL SITES)*
No report this month due to COVID-19 schedule abnormalities

Metric	Current Benchmark	Actual This Month	Last month	Notes
Pt visits / Clinical FTE	16 overall visits / 1.0 clinical FTE		~15 visits/FTE	
% of unfilled appointment slots	<10%, not counting purposely unfilled “day-of” open access slots)		*	
No show rates	<15%		Avg. across all sites = 12%	
“Third Next Available” (TNA) Appointment (routine primary care)	< 14 days		~7days (average across all sites)	
Clinic Waiting Time (Cycle Time: registration to provider visit)	< 45 min.		*	

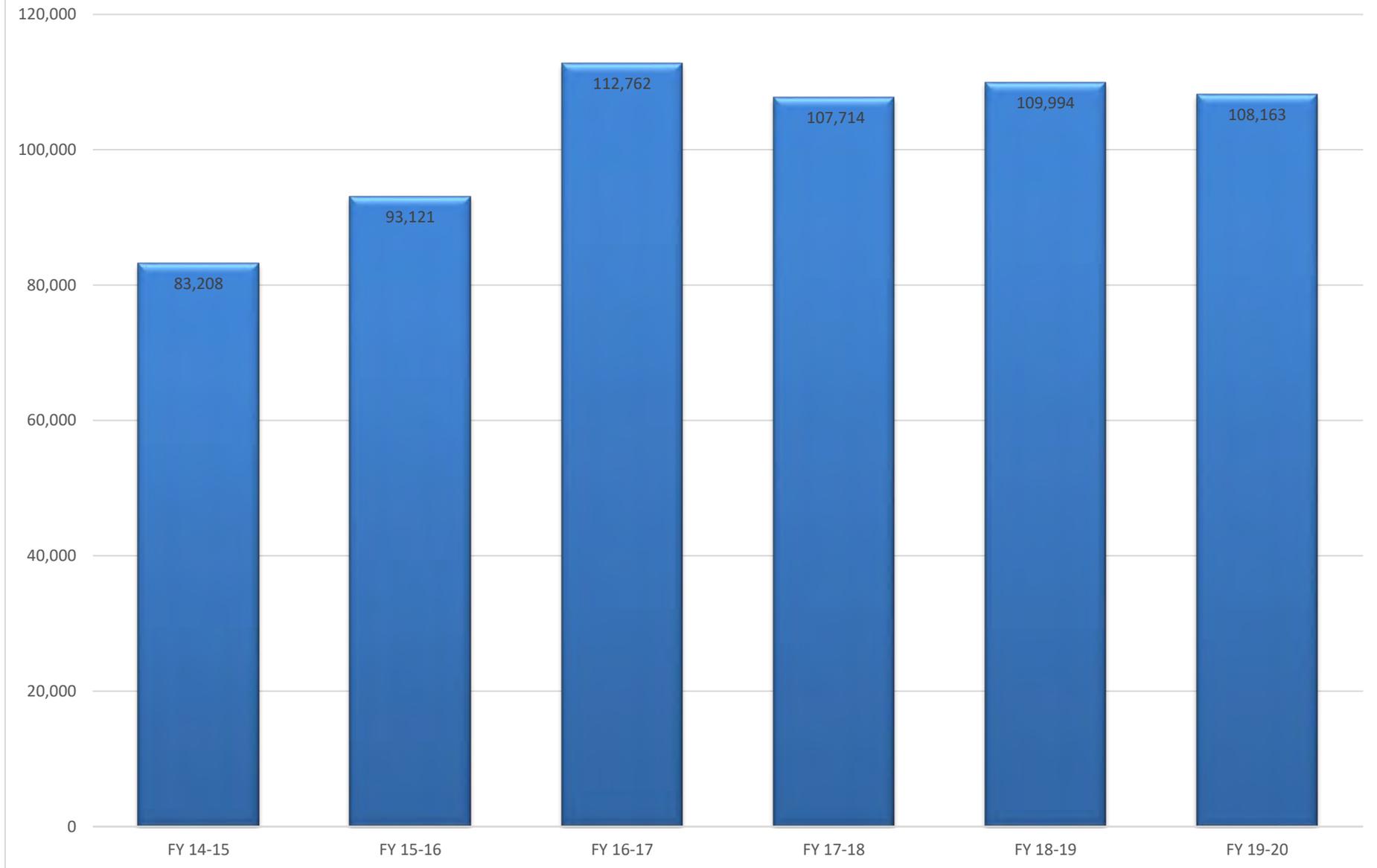
**Some metrics reports are still being written for the new system*

Patient Visit Trending Over 12 Months



Visits-actual	9,611	9,459	8,957	10,540	8,219	8,699	9,985	9,787	7,826	7,877	8,152	9,051
TARGETS	11,200	11,200	10,181	11,709	9,672	10,690	10,690	9,672	11,200	11,200	10,181	11,200

FY Visits Over Years



- FY '19-'20 billable visit totals represent 16% below the target of 128,795
- Using the 1st 8 mo. averages, we could have seen ~3,000 more visits if no pandemic = ~111,000, close to '16-'17 levels
- 1.7% below last year's totals, but 0.4% above '17-'18 totals

MEETING DATE: July 22, 2020

AGENDA ITEM NO.: VII.6

**HEALTH CENTER BOARD
PUBLIC HEALTH DEPARTMENT**

Date: July 16, 2020

To: Health Center Board

From: Dana Gamble

Subject: COVID-19 Update

RECOMMENDATION:

No action required

DISCUSSION/BRIEF SUMMARY OF ITEM:

–Discussion of current status of COVID19 response in Santa Barbara County.