



## 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

<b>Board Members</b>		<u>Consumer Members:</u> Lee Herrington, Celia Lee, Filipo Chapelle, Richard Osbourne, Christopher Hutton, Wm Darrel Gardner, Stephen Ferrara, Cynthia Guerrero <u>Community Members:</u> Sylvia Barnard, Skip Szymanski, 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 April 22, 2020	Szymanski
III.	12:08-12:10	Roll Call and Sign In Sheet	Johnston
IV.	12:10-12:13	Public Comment Period	
V.		<b>Old Business: None</b>	
VI.	12:13-12:31	<b>New Business:</b>	
	5 min	1. Quarterly Patient Satisfaction Report. For Board Review, no action necessary	Gamble
	8 min	2. HRSA COVID Grants. Staff recommend the Board approve the acceptance of the 3 HRSA COVID Response Grants Received in March, April and May 2020	Metz
	5 min	3. FY 20-21 Budget. Staff recommend the Board accept and approve the recommended fiscal year 20-21 Public Health Department Health Care Centers Budget	Jacobson
VII.	12:31-1:02	<b>Standing Reports:</b>	
	8 min	1. Monthly Financial Report: Staff recommends that the Board accept and approve the Financial Report for the month of April 2020.	Jacobson
	3 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
	2 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
	5 min	6. COVID19 Update	Gamble/Johnston
VIII.	1:03-1:10	<b>Member Announcements</b>	Szymanski
X.	1:10	<b>Meeting Adjourned</b>	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.

**Next HC Board Meeting: Wednesday, June 24, 2020**

**VIRTUAL**

MEETING DATE: May 27, 2020

AGENDA ITEM NO: VI.1

**HEALTH CENTER BOARD  
PUBLIC HEALTH DEPARTMENT**

Date: May 21, 2020

To: Health Care Center Board

From: Dana Gamble

Subject: Patient Satisfaction Survey Results and Patient Comments

**RECOMMENDATION:**

That the Board:

Review presentation of patient satisfaction survey results and Patient Comments.

**DISCUSSION/BRIEF SUMMARY OF ITEM:**

This is an informational item only. No Board action is required.

# Patient Satisfaction & Experience Survey

## Q1 2020 Executive Summary

### Key Observations: (current quarter encounter interviews)

- **Q1 2020 Encounter Sample Size:**  $n=272$  (English and Spanish)
- **Overall Satisfaction Mean Score:** in Q1 2020 is **91.5 (+0.9)**
- **Overall Satisfaction % Excellent:** in Q1 2020 is **70.1% (+0.7%)**
  - **Top Satisfiers** (Highest % Excellent Scores):
    - *Provider Listening* (78.5%)
    - *Provider Addressed Concerns* (77.1%)
    - *Reception Staff Courtesy & Helpfulness* (73.4%)
- **Overall Satisfaction % Poor/Fair:** in Q1 2020 is **3.7% (-2.5%)**
  - **Top Dissatisfiers** (Highest % Poor/Fair Scores):
    - *Provider Wait* (16.2%)
    - *Appointment Wait* (11.4%)
    - *Pharmacy Satisfaction* (7.8%)
- **Loyalty Intentions:** in Q1 2020, **85.9% (-0.6%)** of patients are “*Very Likely*” to return again.
- **Referral Intentions:** in Q1 2020, **82.8% (-3.5%)** of patients are “*Very Likely*” to recommend the center to others, either in person or on the internet.

**Key Strategic Indicators and Trends:** In Q1 2020, 8 out of 10 mean satisfaction scores either **decreased** or stayed the same relative to Q4 2019, with *Appointment Wait* (**-2.4**) decreasing the most.

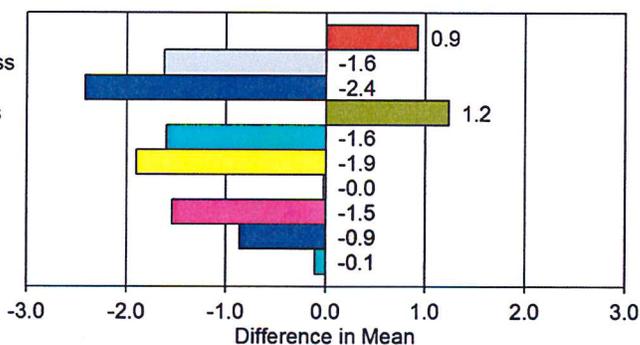
### Patient Satisfaction Scores

Net Mean Score Change  
Current vs. Previous Quarter

Current Qtr vs Previous Qtr

#### Overall Satisfaction

Phone Attendant Courtesy & Helpfulness  
Appointment Wait  
Reception Staff Courtesy & Helpfulness  
Provider Wait  
Provider Asst. Courtesy & Helpfulness  
Provider Listening  
Provider Addressed Concerns  
Pharmacy Satisfaction  
Lab Satisfaction



**Key Strategic Indicators and Trends:** In Q1 2020, 3 out of 4 % Yes experience scores **increased** relative to Q4 2019, with *Specialist Appt. as Quickly as Needed?* (**+12.4%**) increasing the most.

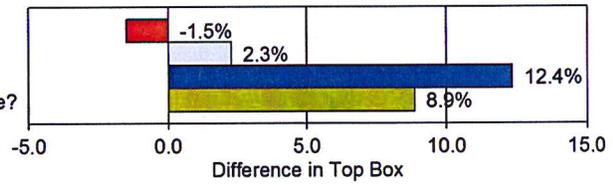
## Patient Experience Scores

### Net Percentage "Yes" Score Change

*Current vs. Previous Quarter*

**By-** Current Qtr vs Previous Qtr

Provider Involved You in Healthcare Decisions?  
 Specific Health Goals Discussed? (12m)  
 Specialist Appt. as Quickly as Needed?  
 [Self-Pay/Sliding Fee] Amount Charged Less Than Elsewhere?



**Location Comparison:** In Q1 2020, mean *Overall Satisfaction* scores ranged from **89.9** for Santa Barbara County to **96.9** for Carpinteria County.

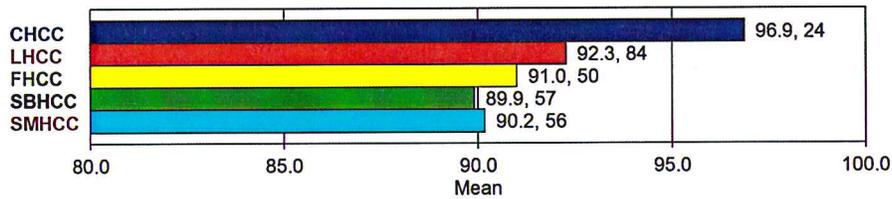
## By-Location Overall Satisfaction Scores

### Mean Scores and Counts

*Current Quarter*

Overall Satisfaction

Mean





MEETING DATE: May 27, 2020

AGENDA ITEM NO.: VI.2

**HEALTH CENTER BOARD  
PUBLIC HEALTH DEPARTMENT**

Date: 5/21/20

To: HC BOARD

From: Dr. Metz

Subject: HRSA Supplemental Grants

**RECOMMENDATION:**

Health Center Board approval of acceptance of the 3 HRSA COVID Response Grants received in March, April & May 2020.

**DISCUSSION:**

The purpose of the Fiscal year (FY) 2020 Coronavirus Aid, Relief, and Economic Security (CARES) supplemental funding is to provide one-time support to health centers for the detection of coronavirus and/or the prevention, diagnosis, and treatment of COVID-19, including maintaining or increasing health center capacity and staffing levels during a coronavirus-related public health emergency and support for increased testing and containment.

- A. HRSA Grant Award H8CCS34088 – March 19: \$78,502
- B. HRSA Grant Award H8DCS35548 – April 3: \$1,053,665
- C. HRSA Grant Award H8ECS38981 – May 5: \$476,104

MEETING DATE: 5/27/2020

AGENDA ITEM NO.: VI.3

**HEALTH CENTER BOARD  
PUBLIC HEALTH DEPARTMENT**

Date: 5/27/2020

To: Health Center Board

From: Suzanne Jacobson

Subject: Budget review and approval for FY 2020-21

**RECOMMENDATION:**

That the Board: Accept and approve the Recommended FY 2020-21 Public Health Department Health Care Centers Budget

**DISCUSSION/BRIEF SUMMARY OF ITEM:**

This item will give a brief overview and discussion of the proposed budget specific to the Health Care Centers for approval. This is part of the Public Health Department's submission of its department budget to the Board of Supervisors for public hearings in June 2020.

# Health Care Centers Santa Barbara County Public Health Department

Adoption of FY 2020-21  
Program/Corporate Budget  
May 27, 2020

## Budgets

- **FY 2019-20 Adopted Budget**
- **FY 2020-21 Recommended Budget**
- *Discussion will focus on the difference between the FY 2019-20 Adopted Budget and the FY 2020-21 Recommended Budget*



## FY 2020-21 Budget

### FY 2019-20 Adopted Budget

### FY 2020-21 Recommended Budget

- Revenues: \$58,774,316
- Expenses: \$58,774,316
- Revenues: \$59,706,105
- Expenses: \$59,706,105
- +\$931,789 (1.5%)



## FY20-21 Revenue Highlights

- **Total Revenue Budget: \$59,706,105**
- **\$ 931,789 (1.5%) over FY19-20 Adopted Budget**

The Budget anticipates revenue changes from:

- ✓ Medicaid/Medicare: +\$784 thousand mostly due to anticipated revenue and volume increases in Medicare.
- ✓ State/Local Funds: +\$907 Thousand increase due to increased overhead costs (hope to offset with higher than budgeted Medi-Cal revenue).
- ✓ ADAP Revenues: +\$274 thousand due to increased volume of HIV/AIDS drugs dispensed at PHD pharmacies.



**HEALTH CARE  
CENTERS**

PUBLIC HEALTH DEPARTMENT  
SANTA BARBARA COUNTY

**FY 20-21 Expenditure Highlights**

- Total Expenditure Budget: \$59,706,105

- \* \$ 931,789 (1.5%) over FY 19-20 Adopted Budget

Budget anticipates expense changes from:

- ✓ Pharmaceuticals: -\$1.8 million decrease due to lower volumes of the 340B Pharmacy program.
- ✓ Salaries & Benefits: +\$1.9 million increase due to increases in salary, retirement, and health insurance rates.
- ✓ Malpractice Insurance: -\$227 thousand decrease due to lower insurance premiums from new policies.

*Healthy people, healthy community, healthy environment*

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**HEALTH CARE  
CENTERS**

PUBLIC HEALTH DEPARTMENT  
SANTA BARBARA COUNTY

**FY 20-21 Expenditure Highlights**

- Total Expenditure Budget: \$59,706,105

- \* \$ 931,789 (1.5%) over FY 19-20 Adopted Budget

Budget anticipates additional expense changes from:

- ✓ Other Office Expenditures: -\$196 thousand decrease due to lower software maintenance costs for the new EHR (based on a prior period 1-time payment).
- ✓ Indirect Costs: +\$733 thousand increase due to increases in costs allocated to the health centers for County administration.

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## Questions?

- Does anyone have any questions?



## A LOOK *at the* BUDGET

*Healthy people, healthy community, healthy environment*

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## Recommendation

- Approve the Recommended Corporate/Program Budget for FY 20-21
- Return to the HC Board with any changes, due to COVID-19.



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Santa Barbara County Public Health Department Health Care Centers  
 Grant Budget and PHD 2020-21 Budget for CHC/HCH Grant H80CS00046

	FY 19-20 CHC-HCH BUDGET	FY 20-21 RECOMMENDED BUDGET	FY 20-21 BUDGET CHANGES
<b>REVENUES</b>			
<b>PROGRAM INCOME</b>			
Medicaid	\$ (39,270,200)	\$ (37,807,200)	\$ 1,463,000
Medicare	(5,478,400)	(6,262,200)	(783,800)
Self-pay (includes HAP)	(1,772,100)	(2,170,100)	(398,000)
<b>LOCAL AND STATE FUNDS</b>			
State/Local Funds-TSAC, GF, VLF	(9,387,616)	(10,294,805)	(907,189)
<b>FEDERAL 330 GRANT</b>	(2,100,000)	(2,131,800)	(31,800)
<b>OTHER FEDERAL FUNDING</b>			
ADAP	(766,000)	(1,040,000)	(274,000)
<b>TOTAL REVENUE</b>	<b>\$ (58,774,316)</b>	<b>\$ (59,706,105)</b>	<b>\$ (931,789)</b>
<b>EXPENDITURES</b>			
<b>PERSONNEL</b>	\$ 22,208,800	\$ 24,181,789	\$ 1,972,989
<b>FRINGE BENEFITS</b>	14,195,500	\$ 14,161,611	(33,889)
<b>TOTAL PERSONNEL</b>	36,404,300	38,343,400	1,939,100
<b>TRAVEL</b>			
PHD Carpool	62,200	65,100	2,900
Transportation - Local Mileage	26,100	24,900	(1,200)
Training and Travel	88,500	82,600	(5,900)
<b>TOTAL TRAVEL</b>	176,800	172,600	(4,200)
<b>SUPPLIES</b>			
Medical Supplies	630,400	673,600	43,200
Office Supplies	168,000	172,100	4,100
Pharmaceuticals	6,724,000	4,918,000	(1,806,000)
Bus Tokens	20,000	20,000	-
<b>TOTAL SUPPLIES</b>	7,542,400	5,783,700	(1,758,700)
<b>CONTRACTUAL</b>			
Janitorial Services	303,500	305,300	1,800
Physician Fees	2,080,900	2,292,400	211,500
Professional Services	816,000	953,400	137,400
<b>TOTAL CONTRACTUAL</b>	3,200,400	3,551,100	350,700
<b>OTHER</b>			
Building Maintenance	35,200	20,200	(15,000)
Communications	287,600	289,400	1,800
Data Processing	912,100	957,900	45,800
Liability Insurance	361,800	370,200	8,400
Malpractice Insurance	452,600	225,700	(226,900)
Other Clinical Expenditures	268,500	277,200	8,700
Other Office Expenditures	1,309,700	1,113,700	(196,000)
Public Health Lab Services	90,000	92,200	2,200
Rents & Leases	141,600	119,800	(21,800)
Services County Provided	146,200	116,400	(29,800)
Utilities	404,200	498,400	94,200
<b>TOTAL OTHER</b>	4,409,500	4,081,100	(328,400)
<b>TOTAL DIRECT COSTS</b>	<b>\$ 51,733,400</b>	<b>\$ 51,931,900</b>	<b>\$ 198,500</b>
<b>INDIRECT COST (14.97% OF TADC)</b>	7,040,916	7,774,205	733,290
<b>TOTAL BUDGET</b>	<b>\$ 58,774,316</b>	<b>\$ 59,706,105</b>	<b>\$ 931,790</b>
<b>Net Surplus/ Deficit</b>	<b>\$ (0)</b>	<b>\$ 0</b>	<b>\$ (0)</b>

MEETING DATE: 5/27/2020

AGENDA ITEM NO.: VII.1

**HEALTH CENTER BOARD  
PUBLIC HEALTH DEPARTMENT**

Date: 5/20/2020

To: Health Center Board

From: Suzanne Jacobson

Subject: Financial Report for April 2020

**RECOMMENDATION:**

That the Board: Accept and approve the Financial Report for April 2020

**DISCUSSION/BRIEF SUMMARY OF ITEM:**

Financial Report and Narrative for period ended 4/30/2020.

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

	FY 19-20 ADOPTED BUDGET	FY 19-20 As of 4-30-20 BUDGET	FY 19-20 As of 4-30-20 YTD ACTUALS	FY 19-20 April YTD Variance	FY 19-20 YTD % of Budget	ONE MONTH ADJUSTED BUDGET	FY 19-20 April ACTUALS	FY 19-20 April Variance	FY 19-20 Apr % of Budget
<b>REVENUES</b>									
<b>PROGRAM INCOME</b>									
Medicaid	\$ (39,270,200)	\$ (32,725,167)	\$ (29,554,582)	\$ 3,170,584	90%	\$ (3,272,517)	(2,598,961)	\$ 673,556	79%
Medicare	(5,478,400)	(4,565,333)	(5,258,110)	(692,777)	115%	(456,533)	(665,739)	(209,206)	146%
Self-pay (includes HAP)	(1,772,100)	(1,476,750)	(1,611,340)	(134,590)	109%	(147,675)	(91,836)	55,839	62%
<b>LOCAL AND STATE FUNDS</b>									
State/Local Funds-TSAC/GF	(9,387,616)	(7,823,013)	(6,972,794)	850,219	89%	(782,301)	(694,844)	87,458	89%
FEDERAL 330 GRANT	(2,100,000)	(1,750,000)	(1,663,894)	86,106	95%	(175,000)	(205,442)	(30,442)	117%
<b>OTHER FEDERAL FUNDING</b>									
ADAP	(766,000)	(638,333)	(896,949)	(258,616)	141%	(63,833)	(103,797)	(39,964)	163%
<b>TOTAL REVENUE</b>	<b>\$ (58,774,316)</b>	<b>\$ (48,978,597)</b>	<b>\$ (45,957,670)</b>	<b>\$ 3,020,927</b>	<b>93.8%</b>	<b>\$ (4,897,860)</b>	<b>\$ (4,360,619)</b>	<b>\$ 537,241</b>	<b>89.0%</b>
<b>EXPENDITURES</b>									
<b>PERSONNEL</b>									
FRINGE BENEFITS	\$ 22,208,800	\$ 18,507,333	\$ 19,737,022	\$ 1,229,689	107%	\$ 1,850,733	\$ 2,066,116	\$ 215,383	112%
TOTAL PERSONNEL TRAVEL	14,195,500	11,829,583	10,776,688	(1,052,895)	91%	1,182,958	1,027,795	(155,163)	87%
	36,404,300	30,336,917	30,513,710	176,794	101%	3,033,692	3,093,911	60,220	102%
<b>TRAVEL</b>									
PHD Carpool	62,200	51,833	43,508	(8,325)	84%	5,183	1,635	(3,549)	32%
Transportation - Local Mileage	26,100	21,750	16,345	(5,406)	75%	2,175	825	(1,350)	38%
Training and Travel	88,500	73,750	30,648	(43,102)	42%	7,375	-	(7,375)	0%
<b>TOTAL TRAVEL</b>	<b>176,800</b>	<b>147,333</b>	<b>90,501</b>	<b>(56,832)</b>	<b>61%</b>	<b>14,733</b>	<b>2,459</b>	<b>(12,274)</b>	<b>17%</b>
<b>SUPPLIES</b>									
Medical Supplies	630,400	525,333	559,225	33,892	106%	52,533	48,174	(4,359)	92%
Office Supplies	168,000	140,000	127,074	(12,926)	91%	14,000	16,909	2,909	121%
Pharmaceuticals	6,724,000	5,603,333	4,088,683	(1,514,650)	73%	560,333	426,740	(133,593)	76%
Bus Tokens	20,000	16,667	450	(16,217)	3%	1,667	-	(1,667)	0%
<b>TOTAL SUPPLIES</b>	<b>7,542,400</b>	<b>6,285,333</b>	<b>4,775,432</b>	<b>(1,509,901)</b>	<b>76%</b>	<b>628,533</b>	<b>491,823</b>	<b>(136,710)</b>	<b>78%</b>
<b>CONTRACTUAL</b>									
Janitorial Services	303,500	252,917	241,303	(11,614)	95%	25,292	9,595	(15,697)	38%
Physician Fees	2,080,900	1,734,083	2,025,246	291,163	117%	173,408	169,188	(4,221)	98%
Professional Services	816,000	680,000	631,099	(48,901)	93%	68,000	94,674	26,674	139%
<b>TOTAL CONTRACTUAL</b>	<b>3,200,400</b>	<b>2,667,000</b>	<b>2,897,648</b>	<b>230,648</b>	<b>109%</b>	<b>266,700</b>	<b>273,456</b>	<b>6,756</b>	<b>103%</b>
<b>OTHER</b>									
Building Maintenance	35,200	29,333	19,131	(10,203)	65%	2,933	-	(2,933)	0%
Communications	287,600	239,667	231,366	(8,301)	97%	23,967	25,118	1,151	105%
Data Processing	912,100	760,083	691,366	(68,717)	91%	76,008	-	(76,008)	0%
Liability Insurance	361,800	301,500	301,170	(330)	100%	30,150	30,117	(33)	0%
Malpractice Insurance	452,600	377,167	417,670	40,503	111%	37,717	41,767	4,050	0%

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

	FY 19-20 ADOPTED BUDGET	FY 19-20 As of 4-30-20 BUDGET	FY 19-20 As of 4-30-20 YTD ACTUALS	FY 19-20 April YTD Variance	FY 19-20 YTD % of Budget	ONE MONTH ADJUSTED BUDGET	FY 19-20 April ACTUALS	FY 19-20 April Variance	FY 19-20 Apr % of Budget
Other Clinical Expenditures	268,500	223,750	205,156	(18,594)	92%	22,375	21,462	(913)	96%
Other Office Expenditures	1,309,700	1,091,417	1,222,408	130,991	112%	109,142	87,077	(22,065)	80%
Public Health Lab Services	90,000	75,000	51,475	(23,525)	69%	7,500	100	(7,400)	1%
Rents & Leases	141,600	118,000	97,502	(20,498)	83%	11,800	9,788	(2,012)	83%
Services County Provided	146,200	121,833	89,594	(32,240)	74%	12,183	34,640	22,456	284%
Utilities	404,200	336,833	383,591	46,759	114%	33,683	50,213	16,529	149%
<b>TOTAL OTHER</b>	<b>4,409,500</b>	<b>3,674,583</b>	<b>3,710,428</b>	<b>35,846</b>	<b>101%</b>	<b>367,458</b>	<b>300,281</b>	<b>(67,177)</b>	<b>82%</b>
<b>TOTAL DIRECT COSTS</b>	<b>\$ 51,733,400</b>	<b>\$ 43,111,167</b>	<b>\$ 41,987,720</b>	<b>\$ (1,123,446)</b>	<b>97.4%</b>	<b>\$ 4,311,117</b>	<b>\$ 4,161,930</b>	<b>\$ (149,185)</b>	<b>96.5%</b>
<b>INDIRECT COST (13.61% OF TADC)</b>	<b>7,040,916</b>	<b>5,867,430</b>	<b>5,714,529</b>	<b>(152,902)</b>	<b>97.4%</b>	<b>586,743</b>	<b>566,439</b>	<b>(20,304)</b>	<b>96.5%</b>
<b>TOTAL BUDGET</b>	<b>\$ 58,774,316</b>	<b>\$ 48,978,596</b>	<b>\$ 47,702,248</b>	<b>\$ (1,276,348)</b>	<b>97.4%</b>	<b>\$ 4,897,860</b>	<b>\$ 4,728,369</b>	<b>\$ (169,489)</b>	<b>96.5%</b>
<b>Net Surplus/ Deficit</b>	<b>\$ (0)</b>	<b>\$ (0)</b>	<b>\$ 1,744,579</b>	<b>\$ 1,744,579</b>		<b>\$ (0)</b>	<b>\$ 367,750</b>	<b>\$ 367,750</b>	

**Santa Barbara County Public Health Department  
Community Health Center Board**

*Financial Statement Narrative for **April, 2020***

Includes variances over \$100K, either YTD or MTD

<b><u>Financial Results:</u></b>	<b><u>Year to Date</u></b>	<b><u>April</u></b>
Revenues:	\$45,957,670	\$4,360,619
Expenditures:	\$47,702,248	\$4,728,369
Net Surplus/(Deficit):	<b>(\$1,744,579)</b>	<b>\$367,750</b>
<b><u>Revenue Highlights:</u></b>	<b><u>Year to Date Variance (93.8%)</u></b>	<b><u>April Variance (89.0%)</u></b>
<b><i>Over (Under) Budget</i></b>		
Medicaid/Medicare:	<b>(\$2,477,807)</b>	<b>(\$464,350)</b>
Self-Pay (HAP):	\$134,590	<b>(\$55,839)</b>
Local/State Funds:	<b>(\$850,219)</b>	<b>(\$87,458)</b>
ADAP:	\$258,616	\$39,964
<b><u>Expenditure Highlights:</u></b>	<b><u>Year to Date Variance (97.4%)</u></b>	<b><u>February Variance (96.5%)</u></b>
<b><i>Over (Under) Budget</i></b>		
Personnel/Benefits:	<b>\$176,794</b>	<b>\$60,220</b>
Pharmaceuticals:	<b>(\$1,514,650)</b>	<b>(\$133,593)</b>
Physician Fees:	<b>\$291,163</b>	<b>(\$4,221)</b>
Other Office Expenses:	<b>\$130,991</b>	<b>(\$22,065)</b>
Indirect Costs:	<b>(\$152,902)</b>	<b>(\$20,304)</b>

**Financial Results Discussion**

Our Community Health Center financial results for February 2020 reflect a negative *month to date* net financial impact of **(\$367,750)** and a negative *year to date* net financial impact of **(\$1,744,579)**.

Year to date, our revenues are at 93.8% of budget and our expenditures are at 97.4% of budget. Medi-Cal revenues for the month are below our fixed monthly budget for this fiscal year. The Health Centers have done a good job at their efforts to see more patients with social distancing to keep staff and patients safe, but we are seeing the impacts of the COVID-19 response activities and “stay at home” orders as our *year to date* deficit grows.

## **Revenue Highlights:**

*We have negative variances for the following:*

- Medicaid and Medicare Revenue – Medi-Cal and Medicare (when combined) came in below budget due to the impacts of COVID-19.
- Local/State Funds – Below budget for this point in the fiscal year. We hope to greatly improve our Medi-Cal revenues to use less of these local funds.

*We have positive variances for the following:*

- Self-Pay/HAP – Above budget due to an earlier increased volume of services in our Health Access Program for Family Planning – mostly in north county - but also declining due to COVID-19 impacts.
- ADAP – Above budget due to an increased volume of HIV/AIDS drugs distributed from our pharmacies.

## **Expenditure Highlights:**

*We have positive variances for the following:*

- Pharmaceuticals – Purchases still lag behind budget because of a lower volume of pharmacy prescriptions. Anticipated increases haven't occurred because of COVID-19 impacts.
- Indirect Costs - These costs are based on a percentage of total direct costs. So, since total direct costs are under budget, these costs are too.

*And negative variances for:*

- Salaries and Benefits – Trending a little above budget for the month to date and year to date.
- Physician Fees – Over budget as we have been using far more contracted physician labor than budgeted. This appears to be balancing out month to date and on budget for April, but previous month's expenses have us over budget year to date.
- Other Office Expenses – Over budget as we have been incurred more software maintenance charges than budgeted. This appears to be balancing out month to date and on budget, but previous month's expenses have us over budget year to date.

**HEALTH CENTER BOARD  
PUBLIC HEALTH DEPARTMENT**

Date: May 23, 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 January 2020.

**POLICY NO.**                      **TITLE**

- |              |   |
|--------------|---|
| 1. 05-C-275  | Superbill Submission  |
| 2. 15-C-606  | Provider Privileging  |
| 3. 12-C-574  | EHR-Review of Outdated Orders in the Electronic Health Record                     |
| 4. 17-C-624  | Screening for Alcohol and Drug Use  |
| 5. 17-C-629  | Management of Patient Complaints about Provider Staff                             |
| 6. 19-C-643  | Chaperones for Medical Visits   |
| 7. 95-C-068  | PHD Health and Safety Incident Reporting: For Clinical Services Only              |
| 8. 10-CM-07  | Controlled Medications: Use of Patient Activity Report and Toxicology Screening   |
| 9. 10-CM-02  | Controlled Medications: Standards of Care   |
| 10. 10-I-191 | Infection Control: Enhanced Infection Control Strategies During Disease Outbreaks |
| 11. 02-I-171 | Infection Control: Hand Hygiene   |
| 12. 05-C-258 | Comprehensive Perinatal Services Program (CPSP)                                   |
| 13. 05-C-267 | Employee/Contractor Family and Friend Visitors to the Public Health Care Centers  |
| 14. 09-C-440 | Renewal of Medical Licenses and DEA Certificates for County Medical Providers     |
| 15. 10-C-449 | Immunizations-Child and Adult IZ Administration and Billing                       |
| 16. 11-C-556 | Counterfeit Money: Identifying and Reporting in the Health Care Centers           |
| 17. 13-C-580 | Health Care Center Policy and Procedure on Network Outage of EHR                  |
| 18. 97-C-112 | Cencal Primary Care Provider Reselection  |
| 19. 20-C-651 | Haiku and Canto EHR Application Access  |

	<b>Number: 05-C-275</b>
<b>Prepared By: Janice Payment, Health Care Program Coordinator</b>	<b>Effective Date: 05/27/2020</b> <b>Original Date: 7/1/2008</b>
<b>Authorized By: Suzanne Jacobson, Chief Financial Officer</b>	<b>Next Review Date: 05/27/2021</b>
<b>TITLE: Superbill Submission</b>	

**POLICY**

It is the policy of the Public Health Department to issue a "Superbill" which includes patient's demographics, Current Procedural Terminology (CPT) and Diagnostic (ICD-10-CM) codes for all services performed to ensure appropriate reimbursement and for reporting statistical data.

**PURPOSE**

The timely submission of an accurate and a fully completed superbill is critical to the management of an efficient billing process. Therefore, to speed up claim processing and decrease the numbers of delayed claims, completed superbills are to be sent to the Administrative Office Professional II in Data Entry daily to ensure timely reimbursement.

	<b>Number: 15-C-606</b>
<b>Prepared By: Polly Baldwin, MD, Medical Director</b>	<b>Effective Date: 5/1/2020</b> <b>Original Date: 2/25/2015</b>
<b>Authorized By: Douglas Metz, DPM, MPH, Deputy Director PCFH</b>	<b>Next Review Date: 5/1/2021</b>
<b>TITLE: Provider Privileging</b>	

**POLICY**

All employed, contracted and volunteer clinicians providing direct patient care at the Health Care Centers in the Public Health Department (PHD) are expected to perform the duties commonly recognized within the scope of their specialty. Clinicians are privileged for procedures prior to beginning their appointment. Privileges are reviewed at regular intervals, and at least every two years, while the clinician is providing patient care at the PHD.

**PURPOSE**

1. To define the procedures for which providers demonstrate current competency
2. To standardize the monitoring of procedure proficiency
3. To define the periodicity of the review of privileges
4. To describe the methods for disciplining a clinician to assure compliance with credentialing and privileging policies
5. To describe a clinician’s rights to appeal if a decision is made to discontinue or deny privileges
6. To define the appeal process, including information needed, format, and time limits for appeal.

	<b>Number: 12-C-574</b>
<b>Prepared By: Laura Lui, EHR Manager</b>	<b>Effective Date: 5/1/2020</b> <b>Original Date: 9/10/2012</b>
<b>Authorized By: Polly Baldwin MD, Medical Director</b>	<b>Next Review Date: 5/1/2021</b>
<b>TITLE: EHR - Review of Outdated Orders in the Electronic Health Record</b>	

**POLICY**

The status of orders entered into the Electronic Health Record (EHR) will be reviewed on a regular schedule and those that are beyond time limits for completion will be cancelled, extended, or completed. If the order was performed, the enter/edit result workflow will be completed to display the results and if appropriate, the Health Maintenance modifier in EPIC will be updated. If the order was not performed within the valid dates, then it will automatically expire within EPIC.

**PURPOSE**

To manage orders successfully in EPIC so that completed results are entered, not completed orders are cancelled, and Health Maintenance is successfully updated.

<p>Santa Barbara County  <b>PUBLIC Health</b>    DEPARTMENT</p>	<p><b>Number: 17-C-624</b></p>
<p><b>Prepared By: Polly Baldwin, MD, Medical Director</b></p>	<p><b>Effective Date: 5/5/2020</b></p> <p><b>Original Date: 2/15/2017</b></p>
<p><b>Authorized By: Douglas Metz, DPM, MPH, Deputy Director</b></p>	<p><b>Next Review Date: 05/05/2021</b></p>
<p><b>TITLE: Screening for Alcohol and Drug Use</b></p>	

**POLICY**

It is the Policy of the Santa Barbara County Health Care Centers to conduct screening for alcohol and drug abuse in patients aged 12 years and older at least annually using a standardized instrument and if screened positive, have a follow-up plan documented in the patient's record.

**PURPOSE**

Alcohol and drug abuse screening and follow up are HRSA Uniform Data System (UDS) measures we audit and report annually. Standardized screening is an important step in providing the necessary treatment for drug and alcohol abuse in our Health Care Centers.

<p>Santa Barbara County  <b>PUBLIC Health</b>    DEPARTMENT</p>	<p><b>Number: 17-C-629</b></p>
<p><b>Prepared By: Polly Baldwin, MD MPH, Medical Director.</b></p>	<p><b>Effective Date: 5/1/2020</b></p> <p><b>Original Date: July 2017</b></p>
<p><b>Authorized By: Douglas Metz, Deputy Director PCFH</b></p>	<p><b>Next Review Date: 5/1/2021</b></p>
<p><b>TITLE: Management of Patient Complaints about Provider Staff</b></p>	

**POLICY**

Concerns or complaints from patients of the Santa Barbara County Public Health Department about a provider’s behavior or medical treatment will be recorded by health center staff and shared with the provider, supervising physician and the medical director in a timely manner. If there is need for investigation into the complaint, the investigation will happen in a timely and appropriate manner.

**PURPOSE**

To ensure that patient concerns are responded to in a timely and appropriate manner.  
To ensure that the providers and their supervisors are aware when there are patient concerns or complaints raised about their behavior or the medical care they are providing.

<p>Santa Barbara County  <b>PUBLIC Health</b>    DEPARTMENT</p>	<p>Number: 19-C-643</p>
<p>Prepared By: Polly Baldwin, MD Medical Director</p>	<p>Effective Date: 5/7/2020  Original Date: 11/1/2018</p>
<p>Authorized By: Douglas Metz, Deputy Director  PCFH</p>	<p>Next Review Date: 5/7/2021</p>
<p><b>TITLE: Chaperones for Medical Visits</b></p>	

**POLICY**

The Santa Barbara County Public Health Department (PHD) will offer chaperones when requested by the patient or deemed appropriate by the medical provider. The chaperone will be present for the history and/or exam portion of the office visit as needed.

**PURPOSE**

To create the safest and most comfortable environment for staff and patients, the PHD will offer and provide chaperones for all our patients who request them and to medical providers who request them and deem them to be appropriate.

<p>Santa Barbara County  <b>PUBLIC Health</b>    DEPARTMENT</p>	<p><b>Number: 95-C-068</b></p>
<p><b>Prepared By: Melissa Gomez RN  PH Performance Improvement Coordinator</b></p>	<p><b>Effective Date: 5/5/2020</b>  <b>Original Date: 06/2009</b></p>
<p><b>Authorized By: Polly Baldwin M.D. Medical  Director</b></p>	<p><b>Next Review Date: 5/5/2021</b></p>
<p><b>TITLE: PHD Health &amp; Safety Incident Reporting: For Clinical Services Only</b></p>	

**POLICY**

It is the policy of the Public Health Department to document all occurrences that affect the health and safety of any PHD patient or visitor that occur in any location of clinical service. This includes the clinical and laboratory services in the Primary Care & Family Health and Community Health Divisions, but excludes Animal Services, Environmental Health, the Fiscal Division and Administrative Division. It also excludes patient or visitor complaints regarding service. The PHD Pharmacy Program follows its own reporting process.

**PURPOSE**

The purposes of reporting are to identify and respond to incidents in order to improve clinical care of and prevent harm to PHD patients and visitors.

	<b>Number: 10-CM-07</b>
<b>Prepared By: Polly Baldwin, MD, Medical Director</b>	<b>Effective Date: 05/05/2020</b> <b>Original Date: 3/23/2015</b>
<b>Authorized By: Polly Baldwin, MD, Medical Director</b>	<b>Next Review Date: 05/05/2021</b>
<b>TITLE: Controlled Medications- Use of Patient Activity Report and Toxicology Screening</b>	

**POLICY**

The Patient Activity Report (PAR) and toxicology screening are tools in the management of PHD patients who are prescribed controlled medications. These reports will be used to confirm compliance and avoid misuse, abuse and diversion of controlled medications.

**PURPOSE**

- To ensure patient safety by reviewing a patient’s pattern of filling prescriptions for controlled medications.
- To confirm a patient’s use of the prescribed medications and absence or presence of non-prescribed medications or illicit drugs.

 <p>Santa Barbara County <b>PUBLIC Health</b> DEPARTMENT</p>	<p><b>Number: 10-CM-02</b></p>
<p><b>Prepared By: Polly Baldwin, MD, Medical Director</b></p>	<p><b>Effective Date: 05/05/2020</b></p> <p><b>Original Date: 11/01/2010</b></p>
<p><b>Authorized By: Polly Baldwin, MD, Medical Director</b></p>	<p><b>Next Review Date: 05/05/2021</b></p>
<p><b>TITLE: Controlled Medications: Standards of Care</b></p>	

**POLICY**

When the prescription of controlled medications is a component of the treatment plan for patients of the Public Health Department (PHD), in order to provide relief of patient suffering, pain, and mental health symptoms that result in functional impairment and disability, PHD clinicians must apply the policies set forth in the “Manual for the Management of PHD Patients Prescribed Controlled Medications” including those contained within this policy.

**PURPOSE**

- To standardize the steps PHD clinicians should follow to meet the PHD standards for care of patients who require the chronic use of controlled medications
- To decrease misuse, abuse and diversion of controlled medications
- To assist clinicians, health center staff and other members of the clinical care team in managing patients with controlled medications and their needs.

<p>Santa Barbara County</p>  <p><b>PUBLIC Health</b> DEPARTMENT</p>	<p>Number: 10-I-191</p>
<p>Prepared By: Marc Goldsmith, Yvette Calhoun, Kelly Lazarus</p>	<p>Effective Date: 5/1/2020</p> <p>Original Date: 10/1/2010</p>
<p>Authorized By: Dr. Polly Baldwin, Medical Director</p>	<p>Next Review Date: 5/1/2021</p>
<p><b>TITLE: Infection Control: Enhanced Infection Control Strategies During Disease Outbreaks</b></p>	

**POLICY**

It is the policy of the Santa Barbara County Public Health Department to provide guidelines and procedures to prevent the transmission of infectious disease in the Health Care Centers and in the community when caring for patients during epidemics and pandemics. The Department will follow the most current directions and guidelines from the Centers for Disease Control (CDC) <http://www.cdc.gov/>, California Department of Public Health (CDPH) <http://www.cdph.ca.gov> and Cal OSHA <http://www.dir.ca.gov/dosh/>.

**PURPOSE**

To limit transmission of infectious disease through enhanced infection control precautions and strategies, and build upon the Standard and Transmission Based Precautions Policy (02-I-172) including early detection and implementation of treatment with vaccines, antivirals, antibiotics, and other recommended medications for staff.

<p>Santa Barbara County</p>  <p><b>PUBLIC Health</b> DEPARTMENT</p>	<p>Number: 02-I-171</p>
<p>Prepared By: Marc Goldsmith, Yvette Calhoun, Kelly Lazarus</p>	<p>Effective Date: 5/1/2020</p> <p>Original Date: 10/01/2010</p>
<p>Authorized By: Dr. Polly Baldwin, Medical Director</p>	<p>Next Review Date: 5/1/2021</p>
<p><b>TITLE: Infection Control: Hand Hygiene</b></p>	

**POLICY**

The Santa Barbara County Public Health Department follows the Centers for Disease Control and Prevention recommended policies and procedures for infection control including hand hygiene.

**PURPOSE**

The purpose of this policy is to prevent the transmission of pathogens by performing hand hygiene procedures. Hand hygiene is the single most effective method of preventing cross contamination between patients and/ or healthcare workers and will be performed in all clinical settings.

<p>Santa Barbara County  <b>PUBLIC Health</b>    DEPARTMENT</p>	<p><b>Number: 05-C-258</b></p>
<p><b>Prepared By: Jeanie Sleigh, Health Center Administrator</b></p>	<p><b>Effective Date: 5/1/2020</b></p> <p><b>Original Date: 5/15/2005</b></p>
<p><b>Authorized By: Douglas Metz, DPM, MPH, Deputy Director - PCFH</b></p>	<p><b>Next Review Date: 5/1/2021</b></p>
<p><b>TITLE: Comprehensive Perinatal Services Program (CPSP)</b></p>	

**POLICY**

It is the policy of Santa Barbara County Public Health Department clinics to provide health care including perinatal services to our pregnant patients.

**PURPOSE**

The CPSP program was created in 1987 to reduce morbidity and mortality among low-income pregnant and postpartum women and their infants in California.

Applicable staff: CPSP trained

- RN
- LVN
- MA
- HSA
- PHN
- RD

<p>Santa Barbara County  <b>PUBLIC Health</b>    DEPARTMENT</p>	<p><b>Number: 05-C-267</b></p>
<p><b>Prepared By: Jeanie Sleigh, Health Center Administrator</b></p>	<p><b>Effective Date: 5/1/2020</b></p> <p><b>Original Date: 8/16/2007</b></p>
<p><b>Authorized By: Douglas Metz, DPM, MPH, Deputy Director PCFH</b></p>	<p><b>Next Review Date: 5/1/2021</b></p>
<p><b>TITLE: Employee/Contractor Family and Friend Visitors to the Public Health Care Centers</b></p>	

**POLICY:** The Public Health Department (PHD) does not permit visits to employees or contractors while working in the clinic.

**PURPOSE:** The PHD clinics are in operation to serve the community and focus their attention on the organization’s mission. There are several documents that contain private and confidential health information located in many parts of the clinic workspace. Additionally, there is frequent dialogue among the staff and Providers that should not take place in the presence of visitors.

<p>Santa Barbara County  <b>PUBLIC Health</b>    DEPARTMENT</p>	<p><b>Number: 09-C-440</b></p>
<p><b>Prepared By: Kendall Johnston AOP Sr., PCFH</b></p>	<p><b>Effective Date: 05/14/2020</b></p>
	<p><b>Original Date: 11/16/2009</b></p>
<p><b>Authorized By: Dr. Douglas Metz, Deputy Director, PCFH</b></p>	<p><b>Next Review Date: 05/14/2021</b></p>
<p><b>TITLE: Renewal of Medical Licenses and DEA Certificates for County Medical Providers</b></p>	

**POLICY**

The Primary Care & Family Health Division will pay for California professional medical license renewals for regular employees of the Public Health Department.

**PURPOSE**

This policy defines the process for completing and paying for medical license renewals and Drug Enforcement Agency certificates.

<p>Santa Barbara County  <b>PUBLIC Health</b>    DEPARTMENT</p>	<p>Number: 10-C-449</p>
<p>Prepared By: Health Care Center Administrators</p>	<p>Effective Date: 6/1/2020  Original Date: 8/30/2010</p>
<p>Authorized By: Dr. Douglas Metz.</p>	<p>Next Review Date: 6/1/2021</p>
<p><b>TITLE: Immunizations – Child and Adult IZ Administration and Billing</b></p>	

**POLICY**

It is the responsibility of the Santa Barbara County Public Health Department (PHD) to provide indicated immunizations to all eligible individuals requesting them.

**PURPOSE**

The purpose of the following is to provide a policy for all County Health Care Centers (HCC) that ensures uniformity of vaccination administration and charging for those vaccinations.

<p>Santa Barbara County  <b>PUBLIC Health</b>    DEPARTMENT</p>	<p>Number: 11-C-556</p>
<p>Prepared By: Jeanie Sleight, Health Center Administrator</p>	<p>Effective Date: 06/15/2020</p>
<p>Authorized By: Douglas Metz, DPM, MPH, Deputy Director PCFH</p>	<p>Original Date: 06/1/2011</p>
<p>TITLE: Counterfeit Money: Identifying and Reporting in the Health Care Centers</p>	<p>Next Review Date: 06/15/2021</p>

**POLICY**

It is the policy of the Public Health Department to identify and report suspected counterfeit money. Adequate safeguards should be in place to address the unlawful act of passing of fraudulent currency throughout the system whether knowingly or unknowingly by the patients.

**PURPOSE**

To define a procedure for identifying and reporting counterfeit money collected in the Health Care Centers.

	<b>Number: 13-C-580</b>
<b>Prepared By: Health Center Administrators (HCAs) and EHR Manager</b>	<b>Effective Date: 5/22/2020</b> <b>Original Date: 3/15/2013</b>
<b>Authorized By: PCFH Medical Director / PCFH Deputy Director</b>	<b>Next Review Date: 5/22/2021</b>
<b>TITLE: Health Care Center Policy &amp; Procedure on Network Outage of EHR</b>	

**POLICY**

In the event of a network or other electronic outage where the Electronic Health Record system (EHR) is unavailable for a prolonged time (more than an hour), it is the policy of the Public Health Dept to document patient encounters in a paper format that will be manually entered or scanned into the EHR system at a later point in time. The EHR system contains both clinical and practice management information.

**PURPOSE**

- To ensure access to needed health care, and in the event of a network outage the department will continue to provide patient visits at the Health Care Centers (HCCs) as long as the facilities and staffing are available.
- To provide for consistent documentation outside of the EHR system when the system is unavailable.

This policy is not to reflect or replace policies or procedures for operations that would occur during a disaster (environmental, biohazard, etc.), but only if the EHR is down and all other systems (including water and power) are available.

	<b>Number: 97-C-112</b>
<b>Prepared By: Jeanie Sleigh, Health Center Administrator</b>	<b>Effective Date: 6/1/2020</b> <b>Original Date: 7/1/2007</b>
<b>Authorized By: Douglas Metz, DPM, MPH, Deputy Director PCFH</b>	<b>Next Review Date: 6/1/2021</b>
<b>TITLE: CenCal Primary Care Provider Reselection</b>	

**POLICY**

CenCal assigns each patient to a Primary Care Provider (PCP). Only a patient can request to reselect a provider. Patients are expected to be seen by their PCP.

**PURPOSE**

CenCal patients assigned to the County are expected to be seen by the County for ongoing care. If a patient wants to be seen by other than their assigned PCP a Referral Authorization Form (RAF) is required.

	<b>Number: 20-C-651</b>
<b>Prepared By: Yesenia Hernandez, EHR Support Team</b>	<b>Effective Date: 5/27/2020</b>
	<b>Original Date: 04/27/2020</b>
<b>Authorized By: Polly Baldwin, MD Medical Director</b>	<b>Next Review Date: 5/27/2021</b>
<b>TITLE: Haiku &amp; Canto EHR Application Access</b>	

**POLICY**

Access to the Haiku and Canto OCHIN Application will be requested, approved and granted through a standardized process. To assure compliance and correct clinical usage the procedure for the use of the Haiku and Canto Application is outlined as well.

**PURPOSE**

To efficiently and securely access EPIC from a smartphone or an iPad device for documentation of office visit notes, Rx refills and securely upload clinical photos to the EPIC system.

To ensure Haiku or Canto access is only being granted to SBCPHD providers who currently have an active EPIC Production account

To track access and termination of application usage and ensure the security of protected health information.

MEETING DATE: May 27, 2020

AGENDA ITEM NO.: VII.3

**HEALTH CENTER BOARD  
PUBLIC HEALTH DEPARTMENT**

Date: May 20, 2020  
To: Health Center Board  
From: Dr. Polly Baldwin  
Subject: Approval of Provider Appointments

**RECOMMENDATION:**

That the Board: Vote to approve the reappointment of:

- Danette Brown, PA, Women’s Health SBHCC
- Asia De La Torre, MD, Family Medicine SMHCC
- Gabriela Diaz, MD, Family Practice SMHCC
- Philip Delio, MD, Neurology SBHCC
- Jared Perrin, MD, Internal Medicine SBHCC

**DISCUSSION/BRIEF SUMMARY OF ITEM:**

All providers approved by Board Delegate



Brown



De La Torre



Diaz



Delio



Perrin

MEETING DATE: May 27, 2020

AGENDA ITEM NO.: VII.4

**HEALTH CENTER BOARD  
PUBLIC HEALTH DEPARTMENT**

Date: 5/27/20

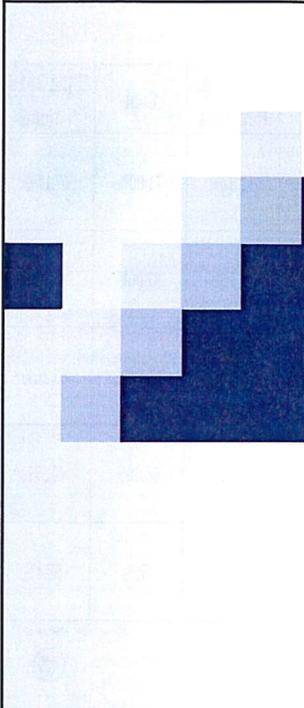
To: HC BOARD

From: Melissa Gomez

Subject: Monthly Medical Quality Report

**RECOMMENDATION:** Review

**DISCUSSION:**



## Medical Quality performance improvement plan measures update

April 2020 Data

Melissa Gomez RN CCM 05/2020



## Measures for Improvement 2019

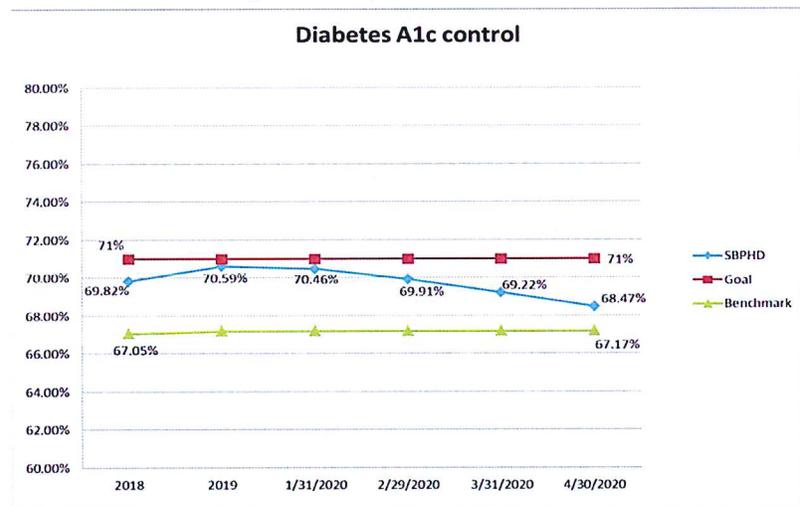
- Diabetes Control
- Asthma with appropriate medication
- Hypertension
- Depression screening and intervention
- Breast cancer screening(Mammography)
- Patient satisfaction with wait time(in clinic)-  
crossroads quarterly report



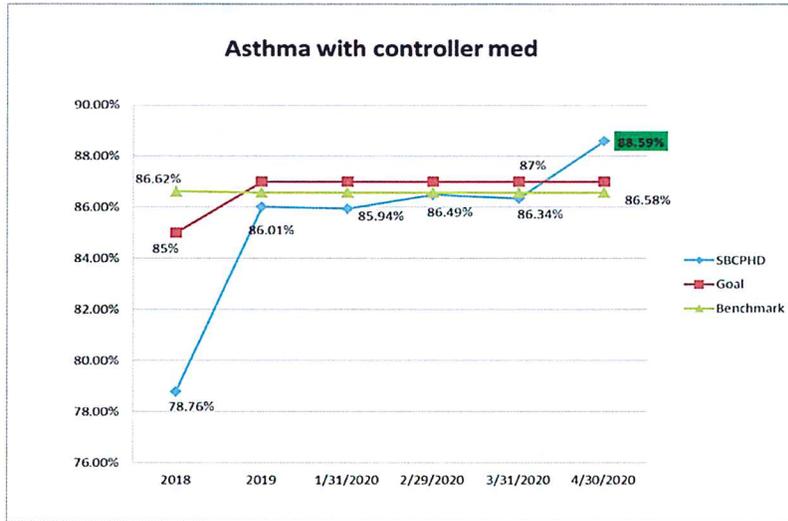
Performance Measure 2019 EPIC(4/30/19 to 5/01/20)	Patients Total	Percentage	Homeless Total	Percentage Homeless	Goal	HRSA 2018 National
HbA1c 9 or less	2043	68.47%	83	52.87%	71.00%	67.17%
	2984		157			
Asthma- persistent asthma and on controller medication	357	88.59%	20	86.96%	87.00%	86.58%
	403		23			
Hypertension- Blood Pressure controlled with last BP less than 140/90	2824	55.45%	132	42.44%	65.00%	63.26%
	5093		311			
Depression Screening with intervention if screening is positive	8150	53.88%	518	54.81%	60.00%	70.57%
	15125		945			
Mammography -women 50-74 q2 years	1536	50.58%	15	10.79%	59%	58.4%
	3037		139			



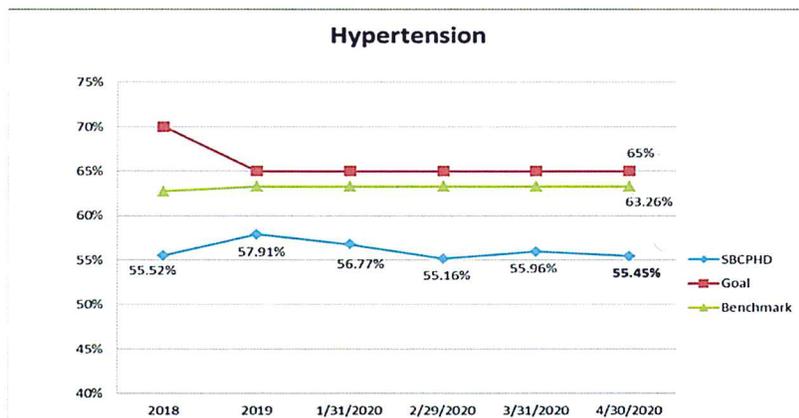
We continue to hover just under our goal. As anticipated we have had a dip in compliance.



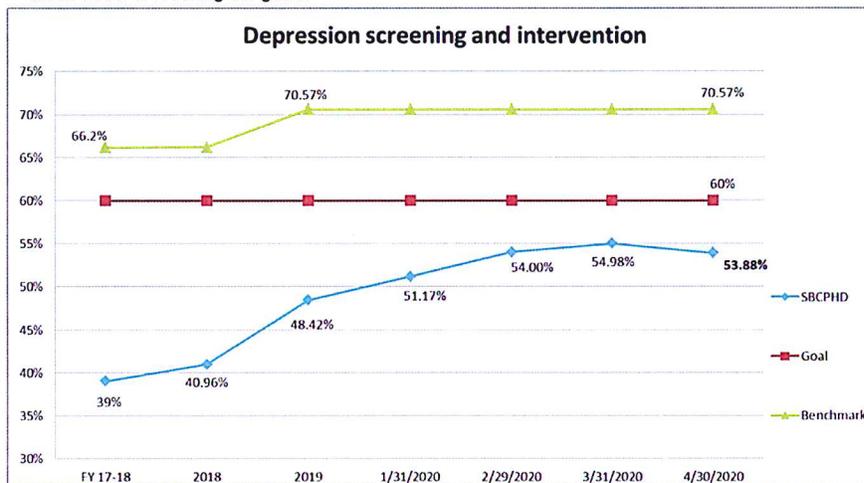
We have exceeded our goal. Our health care teams have done a wonderful job! This measure is being "retired" from our grant reporting requirements for the 2020 reporting year. The medical quality committee (MQI) will be reviewing other possible measures for performance improvement when we are able.



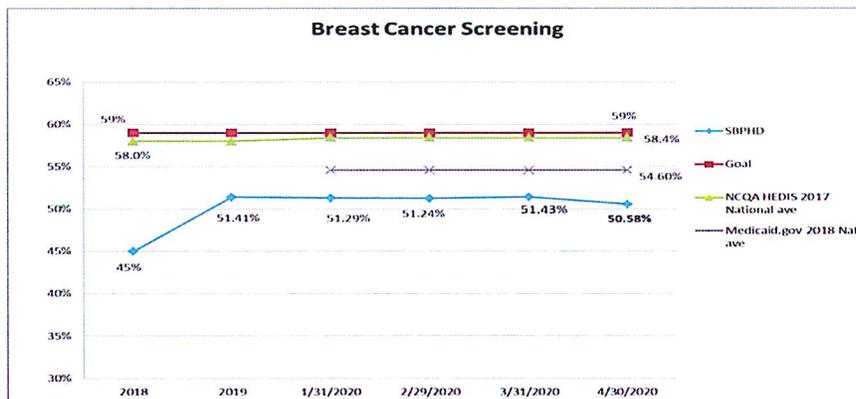
This measure remains fairly stagnant. This data will be reviewed by health care teams to identify additional improvement measures that can be taken.

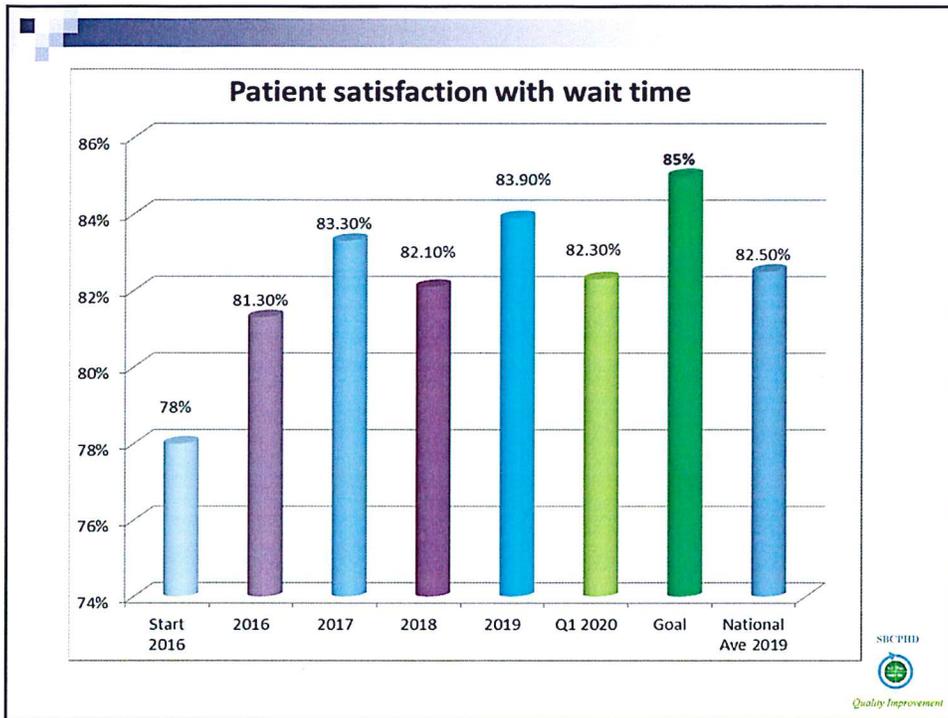


After extensive review, and training- including updated policies and workflows, we have seen a huge improvement on depression screening and intervention. There is a slight dip this past month, as anticipated. We will continue to focus on this measure closely as we have a long way to go but we are much closer to reaching our goals.



We have struggled with this measure over the years, but with several HCCs focusing on this measure we have made over a 6% improvement in the last year. We have seen a dip over the last month due to limited visits and cancellation of screening tests during this time.





## Plan

As anticipated with the reduced visits and transition to virtual visits we have seen 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.

The Medical Quality Improvement Committee has not yet had an opportunity to review our plans and identify new measures for the Primary Care and Family Health Performance Improvement Plan 2020.

MEETING DATE: May 27, 2020

AGENDA ITEM NO.: VII.5

**HEALTH CENTER BOARD  
PUBLIC HEALTH DEPARTMENT**

Date: May 21, 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, May 27, 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
<ul style="list-style-type: none"> <li>● <b>HRSA Relations</b> (Ralph Barbosa, Dana Gamble)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Clinics received Federal COVID assist funding x3 in April/May</li> <li>▪ Internal UDS Reporting Taskforce to be re-convened to start work on new UDS measures for CY 2020</li> </ul>
<ul style="list-style-type: none"> <li>● <b>Santa Barbara</b> (Paola Hurtado)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Secured DocuSign licenses to capture signatures for off-site providers</li> <li>▪ Re-introduced 1 Internal Medicine clinic Resident, M-F, 8-5pm</li> <li>▪ Ordered, received, and distributed PPE to all sites</li> <li>▪ Facilitated EHR workflow re-training for specialty clinic providers to reintroduce specialty services</li> <li>▪ Staff continue to support COVID response efforts</li> <li>▪ Began interviews for vacant PHN and RN Supervisor positions</li> </ul>
<ul style="list-style-type: none"> <li>● <b>Franklin</b> (Elvia Lopez)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Behavioral Health Specialist trained in virtual visits</li> <li>▪ Identified two OP staff for MyChart sign up</li> <li>▪ Pediatric providers telecommuting</li> <li>▪ Nursing and Medical Assistant Staff continuing to assist Disease Containment in DOC</li> <li>▪ Staff continues to screen at building entrance</li> <li>▪ Staff working on scheduling 4/5 y.o. for Well Child Visits</li> <li>▪ Leadership team provided breakfast goodies and lunch to our OP staff for Administrative Day</li> </ul>
<ul style="list-style-type: none"> <li>● <b>Carpinteria</b> (Jeanette Gumber)</li> </ul>	<ul style="list-style-type: none"> <li>▪ CHCC launched EPIC virtual office visits</li> <li>▪ Behavioral Health Specialist and PEDS provider working remotely using phone consults and virtual office visits to allow for social distancing in the clinic</li> <li>▪ Front office staff handled a substantial increase in patient calls daily and have expertly guided our patients through the new world of telemedicine</li> <li>▪ CHCC staff completing its annual mandatory reporting training virtually.</li> <li>▪ Melissa Dubon, AOP, Griselda Gonzalez, MA, and Maleny Huerta, MA worked on the COVID-19 disease control team the entire month of April.</li> <li>▪ Celebrated Administrative Assistant Appreciation Day with our front office staff. Each front office staff received a box of Robitaille Chocolates, a gift card to the Lucky Llama coffee house a succulent bouquet and a hand-crafted card signed by all of the team</li> </ul>
<ul style="list-style-type: none"> <li>● <b>Santa Maria</b> (Michael Camacho-Craft)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Drastically ramped up phone visits</li> <li>▪ Reopened limited evening appointments</li> <li>▪ HCA and several staff deployed to Department Operations Center (COVID emergency response)</li> </ul>

<ul style="list-style-type: none"> <li>● <b>Lompoc</b> (Jeanie Sleigh)</li> </ul>	<ul style="list-style-type: none"> <li>▪ All Providers added telehealth visits to their days</li> <li>▪ Testing continued Mon – Fri 11:00 AM – 12:00 PM for Bureau of Prison Staff</li> <li>▪ Numerous staff continue to support COVID response effort <ul style="list-style-type: none"> <li>○ HCA continues to serve as Operations Section Chief in DOC</li> </ul> </li> </ul>
<ul style="list-style-type: none"> <li>● <b>Healthcare for the Homeless</b> (Ralph Barbosa)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Visits to patients experiencing homelessness have been seen more often than usual by clinic staff at the Shelters due to circumstances surrounding COVID-19</li> <li>▪ Participated in Public Health Nurse PHN (Santa Barbara assignment) position interview (preview for May- candidate successfully offered and accepted position, scheduled to start May 26)</li> <li>▪ Assigned to Emergency Operations Center (EOC) &amp; DOC Operations Homeless Branch; 100% of time (with few exceptions) have been committed to all things for our population experiencing homelessness with regard to COVID-19 and how that impacts their day-to-day lives <ul style="list-style-type: none"> <li>○ Established Homeless Task Force (Comprised of Homeless Service Providers, Leaders, Advocates, City/County Government leaders, County Department representatives, etc) in collaboration with EOC Operations Command <ul style="list-style-type: none"> <li>▪ Coordinated &amp; Participated in daily briefings</li> <li>▪ Daily check-ins with Shelter Directors, Hospital Leadership and other Key Homeless Service Providers</li> <li>▪ At EOC, coordinated daily within EOC Operations- Shelter Branch on initiatives to protect and safeguard HCH population</li> </ul> </li> <li>○ Established dispatch system to respond to people experiencing homelessness and exhibiting symptoms to be removed from congregate setting (shelters, encampments, etc) and to health care and/or testing.</li> <li>○ Established Non-Congregate Shelter (NCS) Site for High Risk Homeless population and Medical clearance system to support referral to the NCS location</li> </ul> </li> </ul>
<ul style="list-style-type: none"> <li>● <b>Pharmacy</b> (Carol Millage)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Moved all the data on manufacturer repayments from CAPs to Tracking system Robert Real set up last month</li> <li>▪ Hired new EXH Help Technician to start May 4<sup>th</sup>, to replace two other EXH Technicians that have resigned due to schooling commitments</li> <li>▪ Got all 3 pharmacies with one Dymo label printer on the network in preparation for telecommuting or processing from another site in case staff illness (COVID -19) which may have prevented a pharmacy from having enough techs on site to process</li> </ul>
<ul style="list-style-type: none"> <li>● <b>Clinical Lab</b> (Linda Weisman)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Continued attempts to order PPE and COVID-19 specimen collection supplies from all contracted vendors (Quest, Fisher, Mckesson, Hardy, PDL) and provide supplies to Disease Control and the HCCs</li> <li>▪ Continued reporting daily COVID-19 specimen collection inventory to PHD DOC Plans Chief</li> <li>▪ Our new CLS, Demet Gornak, began her training with Joy Benner, Sr. CLS in the bacteriology section of the Clinical Laboratory</li> <li>▪ Worked on Standard Operating Procedures and new test coding in the Aspyra CyberLAB Laboratory Information System and EHR to be able to go live with the Beckman Coulter DXH hematology analyzer, which will replace the Beckman Coulter LH500</li> <li>▪ Staffing schedules were adapted to handle decreased staff due to staff being on PTL, EXH that is not available due to COVID-19 risk factors, and staff on medical leave</li> <li>▪ Completed programming Laboratory Information System to be able to send out QuantiferON®-TB Gold Plus tests; Worked with EHR Team to prepare for going live on 5/4/20</li> </ul>

<ul style="list-style-type: none"> <li>● <b>Health Information Management / HIPAA / Data Security</b> (Dana Gamble, June English, Laura Lui)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Complete evaluation tool and then release Dual relationships and professional practice training to PCFH staff</li> <li>▪ Developed and released approved Telehealth form for MTU staff</li> </ul>
<ul style="list-style-type: none"> <li>● <b>PCMH</b> (Karla Quintana, Melissa Gomez, Polly Baldwin, Doug Metz)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Nothing new to report</li> </ul>
<ul style="list-style-type: none"> <li>● <b>Customer Service</b> (Health Center Administrators)</li> </ul>	<ul style="list-style-type: none"> <li>▪ COVID-19 questions added to patient survey for near-future</li> </ul>

**PATIENT VOLUME REPORT**  
February 2020

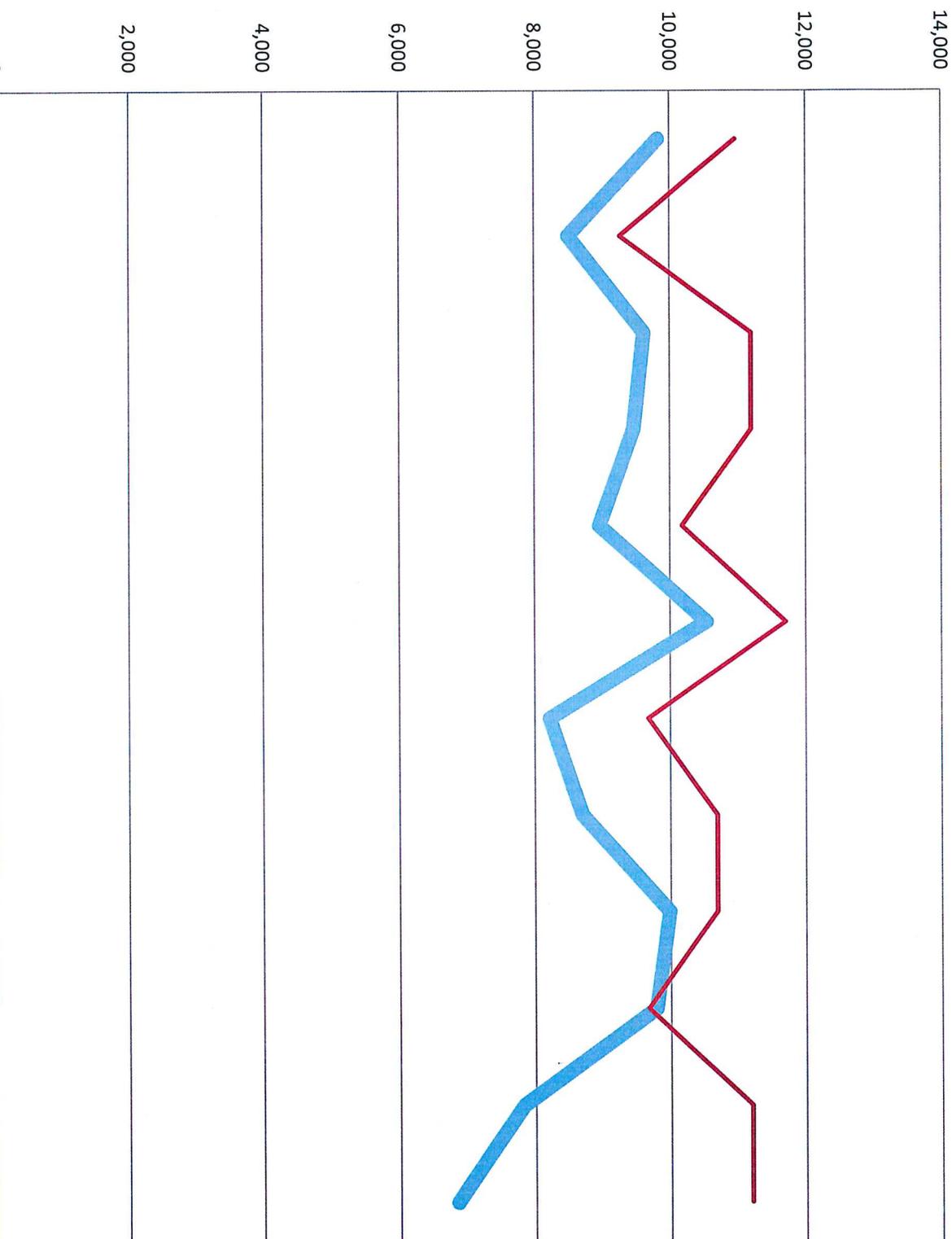
Site	"Billable" Visits This Month	Visits Last Month	Unique Patients This Month	Unique Patients Last Month	Notes
Carpinteria HCC	403	521	302	435	
Franklin HCC	859	917	610	712	
<i>Franklin Elementary School Clinic (1 evening/wk)</i>	0	0	0	0	
Lompoc HCC	2,042	2,634	1,517	1,986	
Santa Barbara HCC	1,459	1,529	1,013	1,118	
Santa Maria HCC	1,659	1,894	1,034	1,248	
Homeless Shelters (3 sites combined)	382	226	181	152	<b>Significant increase in homeless care this month (51%)! Due to focus on this population at shelters.</b>
Outside Sites: PHN Home Visits, Hospital, Deliveries, SNF, etc.)	41	105	41	105	<b>Significant decrease in outside visits due to Coronavirus pandemic</b>
<b>TOTALS</b>	<b>6,845</b>	<b>7,826</b>	<b>4,698</b>	<b>5,756</b>	<b>Note:</b> <b>April pt. visits/day = 311 due to COVID-19; this represents approx. 69% of previous 8 mo. average.</b> <b>Summary: As virus concerns hit and non-essential visits cancelled, volume reduced significantly.</b>
% difference of pts/day from previous month	<b>13% decrease of daily pts over last month</b>				

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

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" (TNAA) Appointment (routine primary care)	< 14 days		~7 days (average across all sites)	
Clinic Waiting Time (Cycle Time: registration to provider visit)	< 45 min.		*	

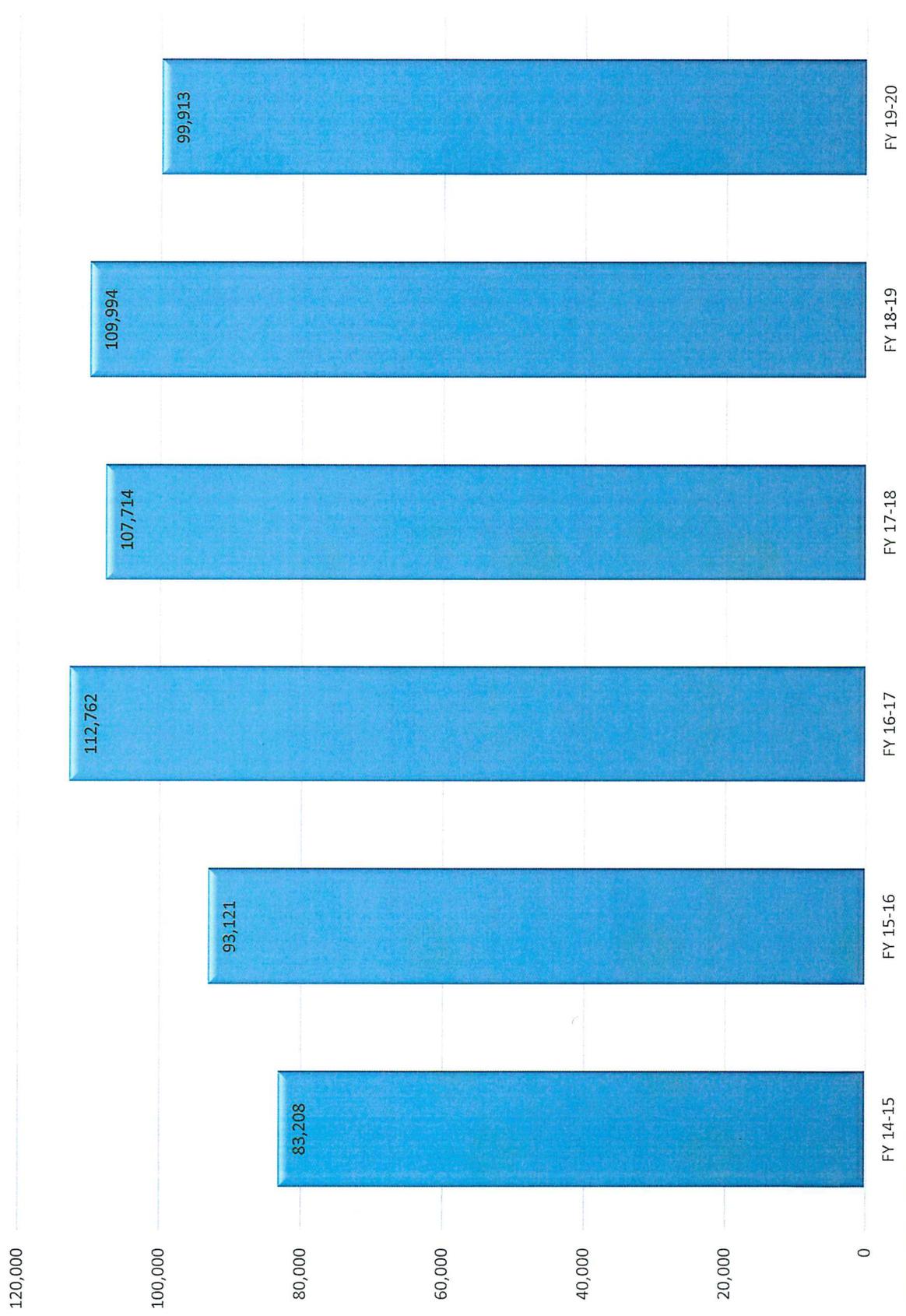
*\*Some metrics reports are still being written for the new system*

## Patient Visit Trending Over 12 Months



Month	Visits-actual	TARGETS
May	9,824	10,969
Jun	8,503	9,265
Jul	9,611	11,200
Aug	9,459	11,200
Sep	8,957	10,181
Oct	10,540	11,709
Nov	8,219	9,672
Dec	8,699	10,690
Jan	9,985	10,690
Feb	9,787	9,672
Mar	11,200	11,200
Apr	6,845	11,200

## FY Visits Over Years



MEETING DATE: May 21, 2020

AGENDA ITEM NO.: VII.6

**HEALTH CENTER BOARD  
PUBLIC HEALTH DEPARTMENT**

Date: May 21, 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.