

**County of Solano
Community Healthcare Board
Regular Meeting**

January 17, 2024
12:00 pm – 2:00 pm
2101 Courage Drive, Fairfield, CA 94533
Room Location: Multi-Purpose Room

AGENDA

1) CALL TO ORDER – 12:00 PM

- a) Welcome
- b) Roll Call

2) APPROVAL OF THE JANUARY 17, 2024 AGENDA

3) PUBLIC COMMENT

This is the opportunity for the Public to address the Board on a matter not listed on the Agenda, but it must be within the subject matter jurisdiction of the Board. If you would like to make a comment, please announce your name and the topic you wish to comment and limit comments to three (3) minutes.

REGULAR CALENDAR

4) APPROVAL OF MINUTES

Approval of the December 20, 2023, draft meeting minutes.

5) CLINIC OPERATIONS REPORTS

Report submitted?

- | | |
|---|-----|
| a) Staffing Update – Dona Weissenfels | Yes |
| b) Credentialing Update – Desiree Bodiford | Yes |
| c) HRSA Grants Update(s) – Noelle Soto | No |
| d) Grievances/Compliments – Rebecca Cronk | Yes |
| e) Compliance – Krista McBride | No |
| f) Finance & Revenue Cycle Management – Nina Delmendo | Yes |
| g) Referrals – Cynthia Coutee | Yes |
| h) Major Project Updates – Dona Weissenfels | No |
| i) QI Update – Dr. Michele Leary | No |
| j) FHS Clinic Q-Matic Stats – Noelle Soto | Yes |

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- 6) **CHB Follow-up to Operational Clinic Reports:**
- a) Follow-up Action requesting additional information on Quality and other clinic reports.
- 7) **HRSA PROJECT OFFICER REPORT**
- a) Health Center HRSA Project Officer Update – Dona Weissenfels
 - i) Health Center Activities – Internal and External Update
 - ii) Strategic Plan Report Update
 - ii) Board membership recruitment update
- 8) **BUSINESS GOVERNANCE**
- a) Review and consider approval of the Quarterly Quality Improvement Report – Dr. Michele Leary
 - i) **ACTION ITEM:** The Board will consider approval of the Quarterly Quality Improvement Report
 - b) Review and consider approval of the Quarterly Financial Report – Nina Delmendo
 - i) **ACTION ITEM:** The Board will consider approval of the Quarterly Financial Report
 - c) **BOARD NOMINATION AND ELECTION FOR THE MEMBER AT LARGE – This will be an open vote process:**
 - 1. Each Nominee will make a brief statement.
 - 2. One person will be elected for the Member at Large position.
 - 3. After votes are tallied, the Board will vote to approve the appointments of the Board Member elected.
 - 4. Election process will be turned over to the Community Healthcare Board Clerk, Patricia Zuñiga, to announce the appointments.
 - i) **ACTION ITEM:** The Board will consider and approve the appointment of the Board Member elected as the Member at Large.
- 9) **DISCUSSION**
- a) Board Member Application received from Marbeya Ellis.
 - i) The Executive Committee reviewed the Board Member Application submitted by Marbeya Ellis and recommends the Board's approval for Marbeya Ellis to be appointed as an FHS Community Healthcare Board Member.
 - ii) **ACTION ITEM:** The Board will consider Marbeya Ellis to be appointed as an FHS Community Healthcare Board Member
 - b) Board members review and sign the Annual Bylaws Appendix A, "Conflict of Interest" and "Oath of Confidentiality" forms.

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- c) Family Health Services Rebranding, Marketing Campaign and Website Design
- d) Robert's Rules Review – Kelly Welsh

10) BOARD MEMBER COMMENTS

11) CLOSED SESSION

- i) Project Officer/CEO Evaluation Review

12) ADJOURN: TO THE COMMUNITY HEALTHCARE BOARD MEETING OF:

DATE: February 21, 2024
TIME: 12:00 pm – 2:00 pm
LOCATION: Multi-Purpose Room
2201 Courage Drive
Fairfield, CA 94533



**County of Solano
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REGULAR GOVERNING BOARD MEETING MINUTES

Wednesday, January 17, 2024

In Person Meeting

Members Present:

At Roll Call:

Members Absent:

Staff Present:

1) Call to Order- 12:08 pm

- a) Welcome
- b) Roll Call

2) Approval of the January 17, 2024 Agenda

Motion: To approve the January December 20, 2023 Agenda.

Motion by: Tracee Stacy and seconded by Don O'Conner.

Discussion: None

Ayes: Michael Brown, Etta Cooper, Charla Griffith, Gerald Hase, Deborah Hillman, Don O'Conner, Tracy Stacy, and Brandon Wirth.

Nays: None

Abstain: None

Motion Carried.

3) Public Comment

There was no Public Comment.

Regular Calendar

4) Approval of Minutes

Approval of the November 15, 2023 draft minutes.

Motion: To approve the November 15, 2023 Draft Minutes.

Motion by: Deborah Hillman and seconded by Charla Griffith.



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Discussion: None

Ayes: Michael Brown, Etta Cooper, Charla Griffith, Gerald Hase, Deborah Hillman, Don O’Conner, Tracee Stacy, and Brandon Wirth.

Nays: None

Abstain: None

Motion Carried.

5) Clinic Operations Reports

a) Staffing Update — Dona Weissenfels

- i. Dona expressed how much happier she was from last month, with three significant hires. Two of those new hires were introduced at the meeting. Dona stated that Natasha Hamilton has tons of experience with clinical matter and healthcare. She is a returning County employee of Solano County and that Natasha has a calming presence and that the staff love her. She is the Senior Health Service Manager working with all the clinics. Pierce (Leavell) is the new Fairfield Health Services Manager over peds and adult clinic. Pierce has lots of experience and has been a CEO at another FQHC. He has deep experience on how to run a clinic. We also hired all supervising physicians. Dr. Ian Bennett; after 9 months ca medical license will be here in early January 2024. Dr. Rodney Faucett comes from Sacramento and recently departed Elica Health Center and has huge experience, which rounds out Dr. (Michelle) Stevens as the Peds Supervisor. We are, for the very first time, fully staffed in an administrative team and leadership team and has made huge progress. Dona also acknowledged Danielle (Seguerre-Seymour) and Patricia (Zuñiga-Gerhardt) as the core of recruiting madness; completing live scans, setting up interviews, etc.
- ii. Natasha Hamilton stated that she had been in the field of human services and social work for over 25 years. She worked for Solano County 11 years prior and had been in every program such as the welfare section, child welfare, in-home supportive services, so she’s very familiar with health & human services. Natasha mentioned that she had been in hospitals systems, worked with the homeless and behavioral health. She looks forward to working with everyone and happy to be back in Solano County.
- iii. Pierce stated that he has 25 years of healthcare experience in a variety of different settings such as hospitals and several clinics, performing supportive services and managing. He also done project management work and saved FQHC’s system. For 9 years, he provided alter chapel services, leading him to become an ordained minister. Pierce stated that he has a lot of different experience and is so glad to be part of this team. And that the 3 weeks that he has been here has been amazing. The people we have here are very dedicated and truly love what they are doing.
- iv. Dona explained that Family Health Services is continuing fill the rest of our vacant positions. Partnership Healthplan of California (PHC) announced that they will be providing us with recruiting bonuses for people we bring on. During the first of the year, all the Contracts should be signed. PHC is offering bonuses for providers, as well as assistance with a national recruiting agency with deep discounts for recruiting. Dona is happy to have Partnership’s help with those items, stating that things are looking good.



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- b) **Credentialing Update** — Raechel Leas (left early). Brandon confirmed the FHS Credentialing, Provider Enrollment and Sanction Screening Activities report that was included in the agenda packet
 - i. There were no questions from the Board.
- c) **HRSA Grants update** — Noelle Soto
 - i. Noelle reviewed her report. She explained that the new fiscal team will be working on the fiscal portion of this report. The team will be meeting weekly, next year, to start on getting the report officially. Noelle stated that the report cannot be used until all the charts from the calendar year are complete.
 - ii. Noelle referenced two action items under Agenda Item #8: Business Governance, that will require the board's approval for d) HRSA Grant, Health Center Program (HCP) Non-Competing Continuation (NCC) Budget Period Progress Report (BPR); and e) HRSA Grant, Expanding COVID-19 Vaccination (ECV) No-Cost Extension (NCE).
 - iii. There were no questions from the Board.
- d) **Grievances/Compliments** — Rebecca Cronk (not present)
 - i. Dona stated that per the board's request, there is the Grievance category definitions document that will help better understand things such as "what is a quality of care" issue. The report includes a graph display with a breakdown of categories. From April to November 2023, scheduling is the biggest category. One of the OSV findings was that there was no follow up section for when the board had questions about Quality of Care issues and our clinical reports. We add a Standing Item, going forward. #6 CHB Follow-Up to Operational Clinic Reports. We are reporting this time that Rebecca brought back, to the meeting, the definitions and graph for further explanation. Dona reiterated that this is an OSV item that we need to reconnect and ensure that we follow-up on.
 - ii. Tracee Stacy stated that she received no definitions. Cynthia Coutee referred Tracee to the Grievance Category Definitions located later in her agenda packet handouts.
 - iii. Dona stated that there is a report from Partnership Healthplan, Patient Satisfaction report every year that will be presented to the board next month to review and continue the conversation. Mike Brown commented on the graph reported from two people. Dona confirmed and explained that grievances were low because the staff address the issues before the patient leaves and the report reflected good management.
- e) **Compliance** — Cheryl was not present, so Krista McBride represented Compliance
 - i. Dona announced that Cheryl is retiring at the end of December, so Krista McBride will be the main contact in Compliance. Krista explained to that compliance matters should be sent to the HSSCompliance email, since Cheryl will no longer be addressed emails after December 27, 2023.
 - ii. Krista advised about upcoming mandated trainings and will be reporting to the board soon.
- f) **Finance & Revenue Cycle Management** — Nina Delmendo
 - i. Nina stated last meeting it was expected to have some preliminary mid-year numbers to present at the meeting, but did not have it available, due to staffing shortages, but should have a draft of the report at the January meeting. Had advised that there could be some changes because will be meeting with the CAO's office. But when the final report is complete, Nina will give a formal presentation.
 - ii. Nina reviewed her Finance report. Mike Brown commented that he liked the new format of the Finance Report.
 - iv. There were no questions from the Board.



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- v. Nina reviewed two Revenue Cycle reports, that were first introduced at the November 15, 2023 meeting: Total Encounters and Total Unbilled Encounters.
 - vi. Nina reiterated that The Total Encounters has a very general target and may fluctuate due to more working days, etc. She explained the definition of an encounter. Since the COVID Pandemic telephone and video visits are also billable but is due to expire in December 2024.
 - vii. There were no questions from the Board.
 - viii. Nina presented the Total Unbilled Encounters report.
 - ix. Nina also announced that the Finance Committee meeting is scheduled for Wednesday, December 27, 2023, from 1:30 pm to 3:30 pm. It is a Family Health Services (FHS) finance operations meeting that the board is invited to. Kelly Welsh explained that the meeting is staff-appointed, so no notice is required under the Brown Act. However, if the CHB members do wish to attend, it will have to be less than a quorum (of seven) and can be only be at the meeting to observe.
 - x. Tracee Stacy asked if she can ask questions at the Finance Committee meeting. Kelly suggested that board members who attend observe, listen and email Nina if they wish to add to the CHB meeting agenda. Nina's contact email will be discussed and determined outside of the meeting with Dona Weissenfels.
- g) Referrals — Cynthia Coutee**
- i. Cynthia stated that there was no physical report submitted but provided a verbal update. The Supervising Physician is currently looking at the referrals, and working with the referral coordinator, to help streamline the referral process. All staff will be working out of one box for all sites. Part of the process change includes tracking spreadsheet to log the referrals, who handled each referral, so that FHS can close the loop.
 - ii. Cynthia added that during the manager's meeting, Natasha provided a good tool that FHS can use the PDSA model (Plan, Do, Study and Act) as a guide. Dona mentioned that one of the reasons hiring Natasha and Pierce was for their project management and process improvement experience.
- h) Major Project Updates — Dona Weissenfels**
- i. Dona provided an update on the OCHIN EPIC electronic medical records for 2024. All the vendors and project managers have been hired, with all contracts signed. Kelly has been working closely on this project. Dona mentioned that NextGen is starting to collapse as a business, with staff changes and layoffs, so FHS is going to work hard to come up with a coherent plan. Dona thanked Nina for assistance with the funding for this project.
 - ii. Brandon Wirth asked about a marker of where FHS is at on this project and if the clinics are on track. Dona stated that FHS is currently on track. The expected start date was believed to be February 2024 but will conclude this project at the end of September 2024. Although IT has concerns about the timeline, Dona assures that they are working through those issues and does not anticipate that it is going to change.
- i) QI update — Dr. Michele Leary (not present)**
- i. Dona reported that although FHS does not have the staff to support the Quality Team, it is still doing good. Pediatrics measures are doing incredibly well because of supporting staff and supervising physician that are meeting those efforts. Dona stated that at the end of the year, there will be enough measures met and will not end up on the Corrective Action Plan. FHS is still working hard to get a Quality Team together; needing a leader and additional Medical Assistants and is work in progress. She also explained that she will have more information at the end of January.



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- ii. Brandon asked if there will be a direct impact on the QI report with the new providers coming on and the increase of encounters occurring. Dona explained that with the increase of encounters will give FHS an opportunity to improve the QI scores, with leadership in the clinics.
 - iii. Tracee inquired about a direct correlation with low staff and realizing the money not being met with the measures. Dona stated that there was a first Partnership Health meeting with Jerry (Huber) and Roger (Robinson) and was presented a graph were measures that were met and not met. She stated that \$2M will be needed. Tracee stated that, as a board member, the information needs to be shared with the Board of Supervisors and explain the reasons for the budget requests.
- j) **FHS Clinic Q-Matic Stats** — Noelle Soto
- i. Noelle reviewed the report and that the numbers from October to November decreased slightly due to the start of illness and having to cancel appointments because of available providers. She also explained that the recent providers are Locum Tenens and are with the clinics for a short period, and still need to go through the preboarding process. FHS is still maintaining the trend from the beginning of the reporting period in March (when the data was first presented to the board). Noelle stated that we are continuing to serve our population.

6) CHB Follow-up to Operational Clinic Reports:

- a) Follow-up Action requesting additional information on Quality of Care activities and Reporting Definitions. To be brought back to the CHB by Rebecca Cronk, at the December 20, 2023 CHB Meeting.

Presentation: Dona Weissenfels (for Rebecca Cronk)

Discussion: CHB Board Members

Accept Report or Further Action is needed: CHB Board Members

- i. Dona asked the board if they have any questions regarding the Operational Clinic Reports presented. Tracee reiterated that the lack of staffing and \$2M deficit needs to be addressed and accounted for, so that the QI measures can be met. Dona stated that the matter will be added to next month's meeting agenda as "Staffing and Quality Improvement".

7) HRSA Project Officer Report – Dona Weissenfels

- a) Health Center HRSA Project Officer Update

- Dona stated that a major funding opportunity through CHDS called the Equity and Practice Transformation grant. Details were included in November 15 agenda packet. It was supposed to be announced on December 11, but no updates have been provided. Dona stated that it is likely related to the current deficit. She anticipates having more information in the next month. It would be a \$3.75M opportunity.

- i) Health Center Activities – Internal and External

- Dona mentioned a free virtual training opportunity for all board members called "Health Center Board Roles and Responsibilities" on January 16 at 6:00 PM est. She will send the registration link to those who are interested in attending.
- Dona stated that the first corrective submission will be on January 2, 2024. She is confident that most issues will be resolved, but there are two items that are still outstanding; 1) the Co-Applicant Agreement between CHB and the County, which is currently with HRSA for review and 2) Referral Agreement with Northbay Medical Center



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for radiology services. Dona explained that there was a recent upheaval in leadership and currently has one contact assisting with the contract, but the draft has been submitted to Northbay. Dona doesn't believe that it'll be resolved by January 2 cut-off date but will go into the next review period which is 60 days. If it is not met within 60 days, then we will have 30 days.

-Kelly Welch inquired about the OSV and January 2, 2024 deadline. She suggested that when HRSA reviews and approves the Co-Applicant Agreement, that it should be presented to the board that next CHB meeting. She also mentioned that if the January 2nd HRSA deadline is not met that there will not be a Corrective Action Plan. Dona reiterated that FHS has a 90-day review period from January 2. HRSA will look at all the documentation and determine met or not met by 60 days, FHS will have 30 days to correct.

-Tracee asked about the language that needed to be changed and having access to the revised Co-Applicant Agreement. Kelly mentioned that she worked with Dona and Dr. Bela Matyas on the language before submitted it to HRSA for review. Dona stated that the changes are clarifying the wording in the documentation for the reader to understand and assured that the changes are not affecting operations. Dona agreed to bring it up next time.

ii) Strategic Plan Report Update.

- Dona mentioned that she will start presenting items on a monthly basis, to keep everyone up to date on where we are.

iii) Board membership recruitment update.

- Dona requested the board's assistance with board membership. She stated that there is requirement to increase the board membership to Hispanic and Asian heritages. Dona and Patricia have identified a Hispanic individual that will be attending January 17, 2024 meeting, but will still need to find an Asian board member. Dona explained that she has exhausted her resources to locate a board member and asked the board to assist with finding someone that would be interested in serving. Tracee asked if it had to be a patient board member and Dona stated that it can be a non-patient board member.

8) Business Governance

a) Review and consider approval of the Medical Referrals to External Specialists & Follow-Up, Policy Number 300.05 – Cynthia Coutee

- Cynthia stated that the policy from May was reviewed by Dr. Michele Leary and edits were made regarding wording and language.

i) **Action Item:** The Board will consider approval of the Medical Referrals to External Specialists & Follow-Up, Policy Number 300.05.

Motion: To approve the Medical Referrals to External Specialists & Follow-Up, Policy Number 300.05.

Motion by: Tracee Stacy and seconded by Deborah Hillman.

Discussion: None



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Ayes: Michael Brown, Etta Cooper, Charla Griffith, Gerald Hase, Deborah Hillman, Don O’Conner, Tracee Stacy, and Brandon Wirth

Nays: None

Abstain: None

Motion Carried.

- b) Review and consider approval of the Quarterly Quality Improvement Report – Dr. Michele Leary
 - Kelly asked if there was a deadline for this item to be approved by the board or can it be moved to next month’s agenda. Dona confirmed that there is not a deadline and can be moved to January 17th meeting.
 - i) **Action Item:** The Board will consider approval of the Quarterly Quality Improvement Report.

Motion: To move the approval of the Quarterly Quality Improvement Report to next month’s CHB meeting.

Motion by: Mike Brown and seconded by Don O’Conner.

Discussion: None

Ayes: Michael Brown, Etta Cooper, Charla Griffith, Gerald Hase, Deborah Hillman, Don O’Conner, Tracee Stacy, and Brandon Wirth

Nays: None

Abstain: None

Motion Carried.

- c) Review and consider approval of the 2024 Community Healthcare Board Calendar
 - i) **Action Item:** The Board will consider approval of the 2024 Community Healthcare Board Calendar.

Motion: To approve the 2024 Community Healthcare Board Calendar.

Motion by: Tracee Stacy and seconded by Deborah Hillman.

Discussion: None

Ayes: Michael Brown, Etta Cooper, Charla Griffith, Gerald Hase, Deborah Hillman, Don O’Conner, Tracee Stacy, and Brandon Wirth

Nays: None



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Abstain: None

Motion Carried.

- d) Review and consider approval of the HRSA Grant, Health Center Program (HCP) Non-Competing Continuation (NCC) Budget Period Progress Report (BPR) – Noelle Soto
- Noelle reviewed the grant with the Board.
 - i. Mike asked if the funds are specifically delegated to the homeless population. Noelle stated that the \$1.7M FHS chooses to utilize it for overall personnel salary and benefits and not specific to the cost of the encounter, but those who are providing the service.
 - i) **Action Item:** The Board will consider approval of the HRSA Grant, Health Center Program (HCP) Non-Competing Continuation (NCC) Budget Period Progress Report (BPR).

Motion: To approve the HRSA Grant, Health Center Program (HCP) Non-Competing Continuation (NCC) Budget Period Progress Report (BPR).

Motion by: Tracee Stay and seconded by Mike Brown.

Discussion: None

Ayes: Michael Brown, Etta Cooper, Charla Griffith, Gerald Hase, Deborah Hillman, Don O’Conner, Tracee Stacy, and Brandon Wirth

Nays: None

Abstain: None

Motion Carried.

- e) Review and consider approval of the HRSA Grant, Expanding COVID-19 Vaccination (ECV) No-Cost Extension (NCE) – Noelle Soto
- Noelle reviewed the grant with the Board.
 - i. Deborah Hillman asked if providers could go out into the community for COVID vaccinations, or do the patients have to go into the clinic for a COVID shot or testing. Noelle stated that if FHS chose the option, providers could, but the option selected, for the purpose of that grant, was for outreach and education activity. For example, expanding education on COVID Vaccination such as having a public relations firm call and survey patients about where to go, or to provide information on boosters, etc. The purpose of the grant is not to go out to the patient, which is typically handled by Public Health. Dona stated that FHS’ original contractor got pulled, but there is a project plan in place. FHS is looking into a communication firm to assist.
 - i) **Action Item:** The Board will consider approval of the HRSA Grant, Expanding COVID-19 Vaccination (ECV) No-Cost Extension (NCE).



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Motion: To approve the HRSA Grant, Expanding COVID-19 Vaccination (ECV) No-Cost Extension (NCE).

Motion by: Tracee Stacy and seconded by Deborah Hillman.

Discussion: None

Ayes: Michael Brown, Etta Cooper, Charla Griffith, Gerald Hase, Deborah Hillman, Don O’Conner, Tracee Stacy, and Brandon Wirth

Nays: None

Abstain: None

Motion Carried.

f) BOARD NOMINATIONS AND ELECTIONS FOR THE CHAIR, VICE CHAIR AND MEMBER AT LARGE –

These will be an open vote process:

1. Each Nominee will make a brief statement
2. One person will be elected for each position: Chair, Vice Chair and member at Large.
3. After votes are tallied, the Board will vote to approve the appointments of Board Members elected.
4. Election process will be turned over to the Community Healthcare Board Clerk, Patricia Zuñiga to announce the appointments.
 - Tracee mentioned that at the November 15, 2023 meeting, Brandon agreed to serve as Chair, Mike to serve another term as Vice Chair and Anthony nominated as Member At Large. She asked if there were any board members present that wished to nominate themselves for any position. She also asked if the Board can slate all nominees with Anthony Lofton not being present. Kelly advised that the Bylaws state that the nominees were already selected at the November 15, 2023 meeting and that each nominee will make a statement at the present meeting before the Board votes.
 - Deborah Hillman inquired on how the Board can vote on Anthony’s position if he is not present to make a statement. Kelly stated that the Bylaws can be changed, but it currently does not specify that nominee must be present in order to make a statement and be elected. She suggested to the Board to vote for Member At Large during the January 17, 2024 meeting.

- i) **Action Item:** The Board will consider and approve the appointments of the Board Members elected as the Chair, Vice Chair and the Member at Large.

Motion: To approve the appointments of the Board Members elected as the Chair and Vice Chair. Voting for the Member at Large position will be postponed to January 17, 2024 board meeting.

Motion by: Deborah Hillman and seconded by Etta Cooper.



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Discussion: -Brandon Wirth, elected Chair, thanked the Board and stated that he has enjoyed his role and acknowledged the hard work involved. He encouraged all the board members that this is something they can all do. He also stated that it was an enriching experience working with Dona and was a joy to be a facilitator to guide conversation. Everyone has equal voices and believes each of the board members is capable. Brandon looks forward to 2024 and thanks everyone for the confidence.

-Mike Brown, elected Vice Chair, joked that the rules and the agenda is like the "Pirates of the Caribbean" movie; these are more suggestions than rules. He stated that within the last year, he learned a lot by taking the lead on a few of the board meetings, which he is used to. Mike would like to continue to provide more information to the Board to help the clinics. And he thanks FHS for responding to the Board so that they can make it a better operation. Mike stated that he would like these operations to be better than Kaiser, Sutter and Northbay and wants the public to recognize it. His goal is to help along those lines. Mike mentioned that he looks forward to attending the FHS Finance Committee Meetings to learn and understand the clinic operations, so that he can inform the public and answer questions. Mike stated that he wants to help change what little bit he can to the County healthcare system, compare to television, Los Angeles, Philadelphia and New York healthcare systems. Thanked everyone for helping each other.

-Kelly suggested to make a motion to elect Brandon as Chair position and vote.

Motion: To elect Brandon Wirth for Chair.

Motion by: Tracee Stacy and seconded by Gerald Hase.

Discussion: None

Ayes: Michael Brown, Etta Cooper, Charla Griffith, Gerald Hase, Deborah Hillman, Don O'Conner and Tracee Stacy

Nays: None

Abstain: Brandon Wirth.

Motion Carried.

Motion: To elect Mike Brown for Vice Chair.

Motion by: Tracee Stacy and seconded by Deborah Hillman.

Discussion: None



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Ayes: Etta Cooper, Charla Griffith, Gerald Hase, Deborah Hillman, Don O’Conner, Tracee Stacy and Brandon Wirth

Nays: None

Abstain: Mike Brown.

Motion Carried.

- i. Patricia Zuniga stated that the Community Healthcare Board Chair for 2024 is Brandon Wirth and the Vice Chair is Mike Brown.

9) Discussion

- a) Family Health Services Rebranding, Marketing Campaign and Website Design.
 - i) Brandon mentioned that Tracee Stacy and Ruth Forney were responsible for keeping that topic front and center. Dona stated that the County logo is changing and is currently reviewing preliminary logos.
- b) Compliance Training
 - i) Kelly reminded the Board that Cheryl Esters is retiring at the end of December and that on the approved 2024 CHB Calendar, at the January 17, 2024 meeting, it showed Compliance training. She suggested to move the Compliance Training to a further meeting so that Krista can plan accordingly. Dona stated that there has not been a Compliance Training since her employment with the County; 2 years and explained that it is important. Dona also mentioned that she can assist with the training, as she is certified in Compliance and is knowledgeable with OSV. Kelly requested that Dona outline what the board needs to be compliant and she will work with Krista.
- c) Robert’s Rules Review
 - i) Kelly mentioned that she can assist with explaining Robert’s Rules at the January 17, 2024 meeting. Brandon stated that training is needed and would like for it to be as scheduled but asked if it can be reviewed after the board meeting. Kelly confirmed that it needs to remain on the agenda, but not as an Action Item. She stated that the Board is following Robert’s Rules, so it can be a refresher for existing board members and more informational for new board members (how meetings are run, etc.) Mike asked if there are handouts regarding Robert’s Rules. Kelly can send a link (to the CHB Clerk) so that it can be printed and included in the agenda packet.

10) Board Member Comments

- i. Board Member Deborah Hillman stated that she has served on the board for a year and she learned a lot that relates to her because she is caregiver for her husband who is disabled and handicapped. What she had learned helps him; by making sure that his providers are doing what they should be doing for him. Deborah mentioned that she likes being on the Board because she received a lot of medical knowledge that she would’ve have known otherwise. She thanked the Board and stated that when she needs an appointment scheduled, it gets scheduled, although it may not be as quick as she wanted. Deborah also mentioned that the staff is very friendly, cordial and professional.

11) Adjourn: To the Community Healthcare Board Meeting of:



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DATE: January 17, 2024
TIME: 12:00 p.m. — 2:00 p.m.
Location: Multi-Purpose Room
2101 Courage Drive
Fairfield, CA 94533

The Meeting was adjourned at 1:47 p.m.

Handouts

- November 15, 2023 draft minutes
- Clinic Operations Report – Family Health Services Staffing Update, December 20, 2023
- Clinic Operations Report – Employee Services Unit (ESU) Status Report, December 2023
- Clinic Operations Report – HRSA Grants Update(s), December 20, 2023
- Clinic Operations Report – Family Health Services Grievance Report, December 2023
- Clinic Operations Report – Family Health Services Finance Report, December 2023
- Clinic Operations Report – Revenue Cycle Report as of December 2023
- Clinic Operations Report – Queue Management (Q-Matic) Stats, March-December 2023
- Grievance Category Definitions
- Solano County Family Health Services – Strategic Plan Report – Strategic Plan July 1, 2022-June 30, 2025
- Medical Referrals to External Specialists & Follow-Up – Policy Number: 300.05 (redline version)
- Primary Care Provider Quality Improvement Program (PCP QIP) Report – Solano County, Health & Social Services, Family Health Services – November 2023
- Solano County Family Health Services – Community Healthcare Board 2024 Annual Calendar (redline version)
- County of Solano – Family Health Services Budget Narrative – FY 2024 Health Center Program, Grant Number H80CS04218, Support Year 20 – May 1, 2024 to April 31, 2025
- County of Solano – Family Health Services Budget Narrative – FY 2021/2023 American Rescue Plan Act Funding for Health Centers, Grant Number H8FCS40398, May 1, 2021 to May 31, 2023
- County Holidays – 2023 & 2024

Community Health Care Board
Family Health Services Staffing Update
CHB Meeting Date: January 17, 2024

Number of Active Candidates - County
<p>Clinic Physician Supervisor - 1 (Kaye Bassman Intl) Nurse Practitioner - 1 (UHC Solutions)</p>

Number of Active Candidates - Touro
<p>Physician Assistant - 1</p>

Number of Active Candidates - Locum Tenens
<p>Nurse Practitioner - 3</p>

Number of Active Candidates - Volunteer
<p>Clinic Physician (Board Cert) TB - 1</p>

Open County Vacancies
<p>Clinic Physician (Board Cert) - 1 Clinic Physician (Board Cert) Extra Help - 1 Clinic Physician Supervisor - 1 Clinic Registered Nurse - 1 Dental Assistant (Registered) - 1 Health Education Specialist Extra Help - 2 Medical Assistant - 1 Medical Records Technician, Sr Extra Help - 1 Mental Health Clinician (Licensed) - 1 Nurse Practitioner/Physician Assistant - 3 Nurse Practitioner/Physician Assistant Extra Help - 1</p>

Interviews in Progress
<p>Clinic Registered Nurse - TBD Medical Assistant (Call Center) - 01/18/2024 Mental Health Clinician (Licensed) - TBD</p>

Expected New Hires + Recently Hired Staff
<p>Nurse Practitioner - FF Peds - 12/26/2023 H&SS Planning Analyst - 01/08/2024</p>

**FHS Community Healthcare Board – Status Report January 2024:
FHS Credentialing, Provider Enrollment and Sanction Screening Activities**

Excluded Parties/Sanction Screening: 145

Month	Sanction Screening Number Screened/Verified	Sanction Screening Number Ineligible
December 2023 TOURO/LOCUMS	Touro/Locum Providers: 22	Exclusions Found: Report pending
December 2023 County – H&SS Employees/Candidates	H&SS Employees: 123	Exclusions Found: 0
Totals	TOTAL SCREENED: 145	Exclusions Found: Touro/Locum report pending

Credentialing: 8 Re-Credentialing: 4

Month	Number of Candidates' Credentials Verifications - (Re-)Started -	Number of Candidates' Partnership Provider Enrollments - Submitted for Partnership Approval -
December 2023 TOURO	<u>Active/Open: 2</u> Physician Assistant: 1 Clinic Physician: 1	Submitted to Partnership: -0- Approved by Partnership: -0- Pending Submission to Partnership: 1
December 2023 LOCUM	<u>Active/Open: 3</u> Nurse Practitioner: 3	Submitted to Partnership: -0- Approved by Partnership: -0- Pending Submission to Partnership: 2
December 2023 County H&SS Employees/ Candidates	<u>Active/Open: 7</u> Dentist Manager: 1 Supervising Physician –2 Clinic Physician – 1 Medical Assistant – 2 CMO – 1	Submitted to Partnership: --0 Approved by Partnership: -1- Pending Submission to Partnership: 1

Provider and Site Enrollment and Re-Credentialing/Re-Validation:

Partnership – NEW Provider Enrollments

New Provider Enrollments: ACTIVE - Pending Submission: 4 (1 Touro PA, 1 Supervising Physician, 2 Nurse Practitioner-LOCUM)
Submitted: 0 Pending Approval: 1
Approved: 1

Partnership – Provider Re-Credentialing

Provider Re-Credentialing: Submitted: 1 Pending Approval: 1 Pending Submission: 0
Approved: 0

Denti-Cal – Provider Revalidations

None During this Reporting Period

NPI Program/Site Revalidations – CMS (N = +/- 38)

None During this Reporting Period

Technical Assistance – PAVE (Medi-Cal) and PECOS (Medicare) Sites: Upon Request

GRIEVANCE REPORT 2023

- Quality of Care
- Referrals
- Privacy
- Access to Care
- Safety
- Scheduling
- Other



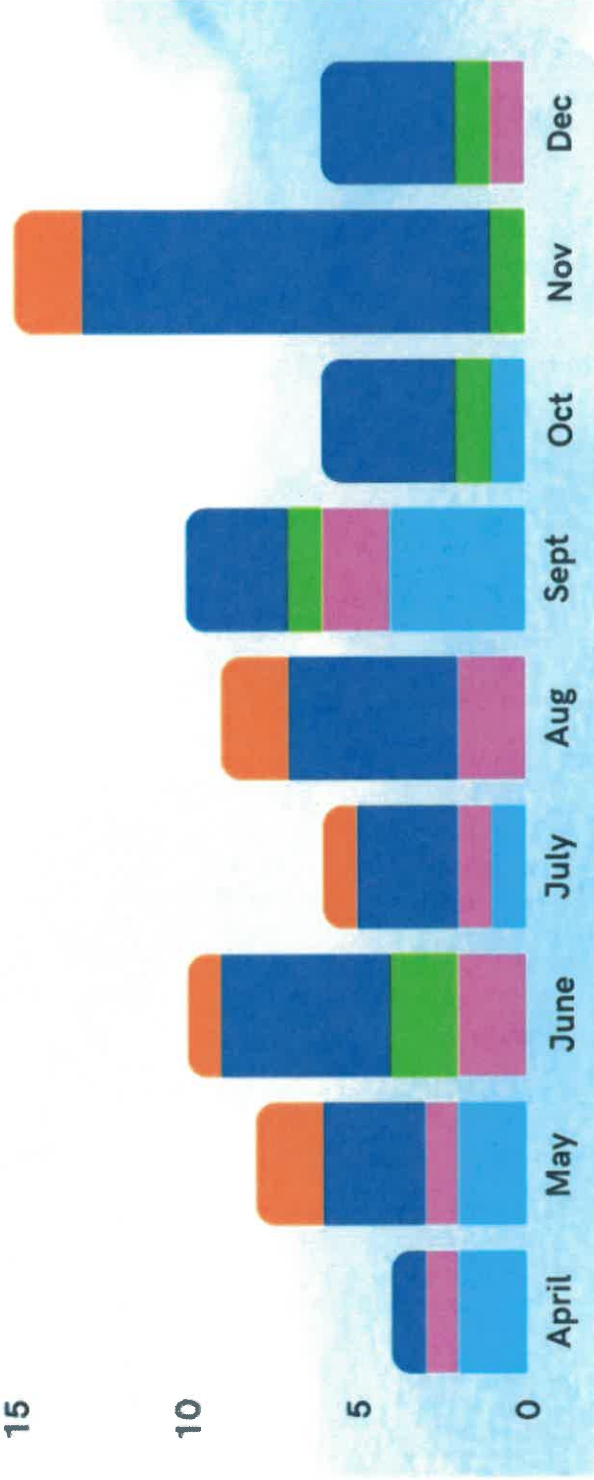
20

15

10

5

0



Dec

Nov

Oct

Sept

Aug

July

June

May

April

SOLANO COUNTY
EXPENDITURE AND REVENUE REPORT
FAMILY HEALTH SERVICES
DECEMBER 2023

EXPENDITURES				Notations
CATEGORY DESCRIPTION	FY2023/24 WORKING BUDGET	ACTUALS as of 12.31.23	YTD ACTUALS AS A % OF WORKING BUDGET	
Salaries & Benefits				
Salaries - Regular	15,678,423	5,331,095	34.00%	
Salaries - Extra Help	135,755	24,043	17.71%	
Salaries - OT/Callback/Standby	41,392	51,618	124.70%	
Staffing costs from other divisions (net amount)	161,874	2,600	1.61%	
Benefits	9,524,941	2,962,807	31.11%	
Accrued Leave CTO Payoff	20,000	9,744	48.72%	
Salary Savings	(4,177,375)	-	0.00%	
Salaries & Benefits Total	21,385,010	8,381,907	39.20%	
Services & Supplies				
Office Expense and Supplies	158,825	39,290	24.74%	Drinking water, household expenses, and trash services.
Communications	138,336	56,309	40.70%	Telephones and cell phones.
Insurance	859,428	280,002	32.58%	> Budget includes cost of Liability Insurance and Malpractice Insurance. > Actuals represent Liability Insurance for 2023-24.
Equipment - Purchases, Leases & Maintenance	62,937	27,809	44.19%	> These charges will originate from another County Department. > Medical Malpractice will post at year end and are expected to be budgeted amount.
Mileage, Fuel and Fleet	39,086	30,336	77.61%	> Q-Matic; Handpiece Express; Multi Function Devices Copiers/Printers. Monthly charges for vehicles assigned to County Departments; personal mileage.
Buildings - Maintenance, Improvements, Rent & Utilit	203,400	106,724	52.47%	Charges are high due to repair charges made to County vehicles.
Drugs, Pharmaceuticals, Medical and Dental Supplies	569,398	307,310	53.97%	PG&E & water services.
Controlled Assets & Computer Related Items	154,029	6,945	4.51%	Budget is primarily refresh computers and equipment funded with Capital Grant carryover funding.
Medical/Dental Services	218,903	65,432	29.89%	Quest Lab Services, Solano Diagnostics and Solano Public Health Lab charges.

SOLANO COUNTY
EXPENDITURE AND REVENUE REPORT
FAMILY HEALTH SERVICES
DECEMBER 2023

EXPENDITURES				Notations
CATEGORY DESCRIPTION	FY2023/24 WORKING BUDGET	ACTUALS as of 12.31.23	YTD ACTUALS AS A % OF WORKING	
Contracted and Other Professional Services	1,249,640	246,597	19.73%	Actual charges are low due to timing of vendor claim invoicing.
				Budget includes the following contracts: > Forvis (Medicare Cost Report) > Stericycle (medical waste disposal) > Waystar (electronic claims management) > Simi > Allied Security > Facktor - placeholder > EHR consultants (project and IT) - placeholder > Expanding COVID Vaccine TBD contract-grant funded
D&IT	2,689,004	655,996	24.40%	
Software & Maintenance or Support	1,300,014	281,741	21.67%	Budget and actuals include the following: > Next Gen > OCHIN contract > Intelligent Medical Objects (electronic medical records) > Medical Minds (triage protocols) > Nuance Communications (Dragon dictation services) > Up To Date
Professional Licenses & Memberships	18,455	4,294	23.27%	
Education, Training and In-State Travel	12,000	9,357	77.98%	Registration fees for NACHC Community Health Institute & Expo Conference
Other	39,986	20,975	52.46%	> Uniform allowance > Fees & Permits (credit card processing, licensing and storage) > Livescans
Services & Supplies Total	7,713,441	2,139,117	27.73%	

SOLANO COUNTY
EXPENDITURE AND REVENUE REPORT
FAMILY HEALTH SERVICES
DECEMBER 2023

EXPENDITURES				Notations
CATEGORY DESCRIPTION	FY2023/24 WORKING BUDGET	ACTUALS as of 12.31.23	YTD ACTUALS AS A % OF WORKING	
Other Charges				
Interfund Services - Professional	582,258		0.00%	County related charges for Sheriff services, building and grounds maintenance and custodial services.
Interfund Services - Accounting & Audit	22,800	25,220	110.61%	
Interfund Services - Other	44,875	158,351	352.87%	Maintenance materials, small projects and labor.
Contributions - Non County Agencies	18,000	8,391	46.61%	Registration fees for NACHC Community Health Institute & Expo Conference (two board members).
Other Charges Total	667,933	191,961	28.74%	
Contracts/Client Support				
Contracted Direct Services		610,717	45.78%	Actuals are low due to timing of vendor claim invoicing.
				Budget includes the following contracts: > Barton & Associates (locum services) > Children's Choice (dental services) > Touro University (providers)
Client Support	21,740	12,803	58.89%	Client support transportation costs.
Contracts/Client Support Total	1,355,740	623,519	45.99%	
Equipment				
Equipment	184,100	-	0.00%	
Equipment Total	184,100	-	0.00%	
Administration Costs				
H&SS Administration	2,632,919	391,282	14.86%	Actuals represent H&SS Admin Q1 costs
Countywide Administration	935,417	935,417	100.00%	
Administration Costs Total	3,568,336	1,326,699	37.18%	
TOTAL EXPENDITURES	34,874,560	12,663,203	36.31%	

SOLANO COUNTY
EXPENDITURE AND REVENUE REPORT
FAMILY HEALTH SERVICES
DECEMBER 2023

REVENUES				Notations
CATEGORY DESCRIPTION	FY2023/24 WORKING BUDGET	ACTUALS as of 12.31.23	YTD ACTUALS AS A % OF WORKING BUDGET	
Payer Revenues				
Payer Revenues	23,914,092	7,884,525	32.97%	Revenues from Medi-Cal, Partnership Capitation, Medicare, Private Pay
Payer Revenues Total	23,914,092	7,884,525	32.97%	
Federal/State Revenues				
1991 Realignment (Underinsured/Uninsured/PH Servi	1,237,344	-	0.00%	
Federal Direct - COVID (one time funding)	602,948		0.00%	Rollover for HRSA Capital Grant funds and Expanding COVID Vaccinations grant
Federal Grants	2,057,990	17,925	0.87%	Actual revenues are from Ryan White (RWC) Part C FY 2022/23 Q4 claim exceeding year end estimate. Budget includes: > CHC Base grant > RWC > RWC Capacity grant
Federal Other	943,392		0.00%	\$1M Congressional earmark funding, portion budgeted to spend in current FY with balance to be spend in FY24/25
Other Revenue	1,339,636	96,019	7.17%	Budget primarily includes QJP revenues, but also includes patient care payment recoveries.
Program Revenues Total	6,181,310	113,944	1.84%	
County General Fund				
County General Fund	4,486,028	1,121,507	25.00%	
County General Fund (CGF)	4,486,028	1,121,507	25.00%	
TOTAL REVENUES (Excl CGF)	30,095,402	9,119,977	30.30%	
TOTAL EXPENDITURES vs TOTAL REVENUES				Notations
	FY2023/24 WORKING BUDGET	ACTUALS as of 12.31.23		
TOTAL EXPENDITURES	34,874,560	12,663,203		
TOTAL REVENUES	30,095,402	9,119,977		
DEFICIT (SURPLUS)**	4,779,158	3,543,226		

**Deficit to be funded with 1991 Realignment and County General Fund

REVENUE CYCLE REPORT
TOTAL UNBILLED ENCOUNTERS
 As of January 4, 2024

DATE OF SERVICE	12/21/2023	TOTAL
Encounters	2	2

NOTES

- > Data compiled 1/4/2024 for services through 12/30/2023
- > Encounters are billed the next business day after charges are submitted
- > Billing and Collections team sends emails directly to providers regarding any unbilled encounters > 3
- > Encounter may or may not be a qualified encounter - pending documentation

DEFINITIONS

UNBILLED ENCOUNTER Encounter not documented or missing charges

**REVENUE CYCLE REPORT
TOTAL ENCOUNTERS
As of December 30, 2023**

	Annual Target	Monthly Target (1/12)	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	TOTAL	YTD Target Dec 2023 6 mths	Over (Shortfall)
MEDICAL																	
County Providers	51,834	4,320	1,735	2,115	1,669	1,976	1,726	1,459							10,680	25,917	(15,237)
Touro	5,200	433	407	379	283	383	399	320							2,171	2,600	(429)
Locum	-	-	353	432	340	395	501	452							2,473	-	2,473
TOTAL MEDICAL	57,034	4,753	2,495	2,926	2,292	2,754	2,626	2,231	-	-	-	-	-	-	15,324	28,517	(13,193)
TOTAL MENTAL HEALTH	4,368	364	163	265	192	213	202	196							1,231	2,184	(953)
TOTAL DENTAL	19,511	1,626	1,350	1,513	1,196	1,453	1,289	1,153							7,954	9,756	(1,802)
	80,913	6,743	4,008	4,704	3,680	4,420	4,117	3,580	-	-	-	-	-	-	24,509	40,457	(15,948)

Note 1

Note 1

Note 1

NOTES

Note 1: Shortfall for County Providers only

Filled positions	(4,233)	24%
Filled positions (partial year)	(2,984)	17%
Vacant	(10,774)	60%
TOTAL	(17,991)	100%

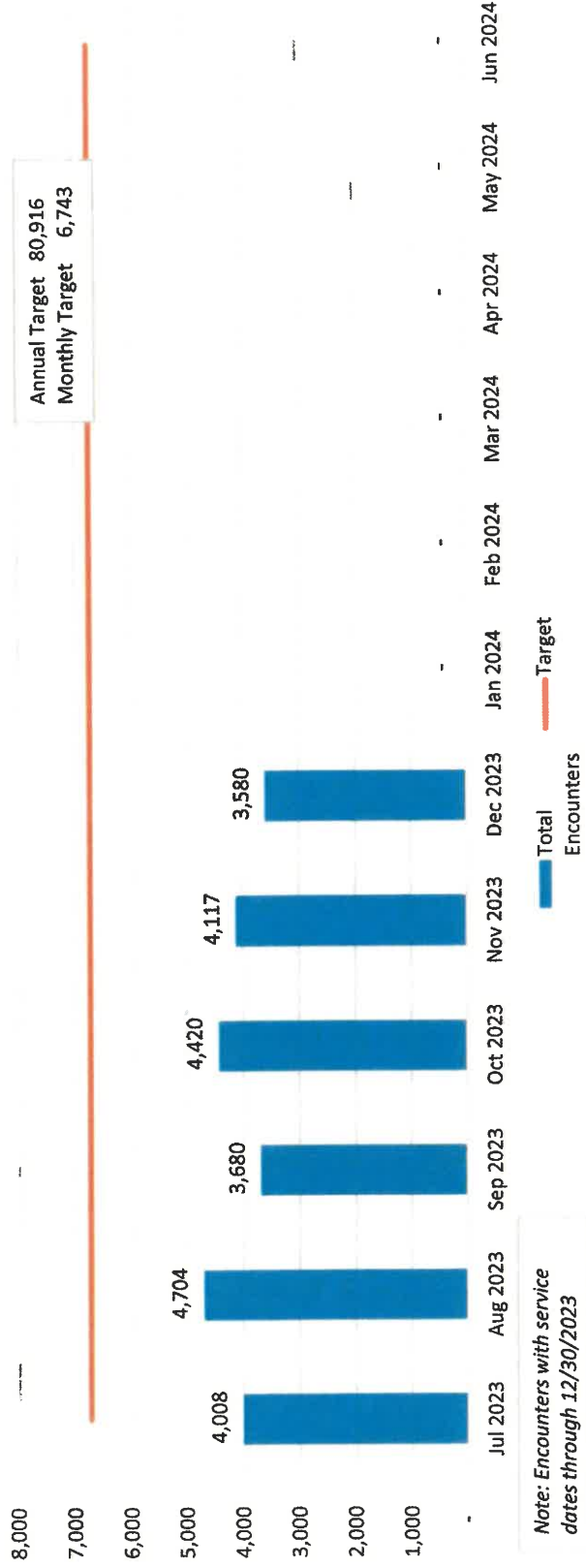
DEFINITIONS

ENCOUNTER An interaction between a patient and a healthcare provider for the purpose of providing healthcare services or assessing the health status of a patient

BILLABLE ENCOUNTER

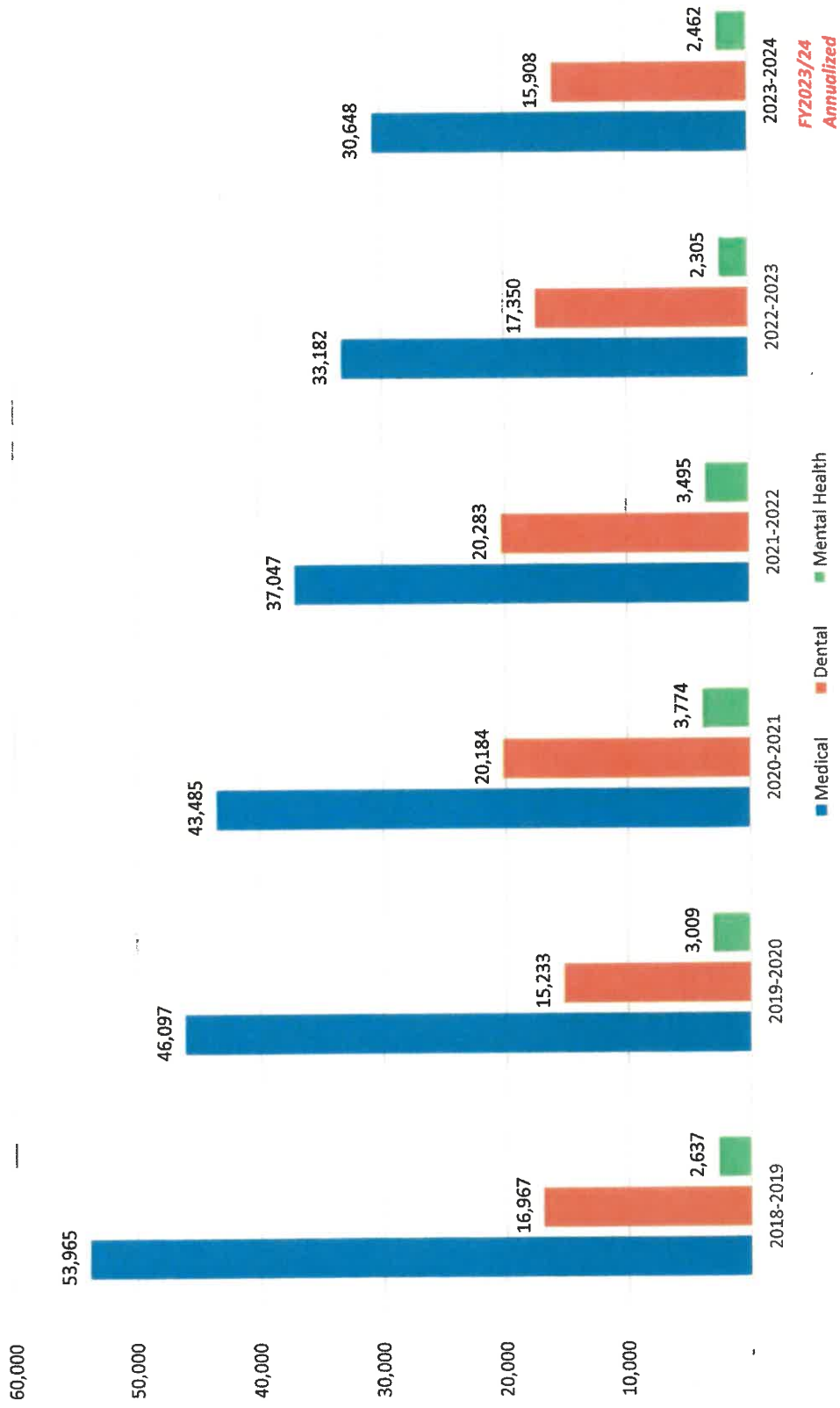
1. Healthcare provider
 - > Physician
 - > Physician Assistant
 - > Nurse Practitioner
 - > Dentist
 - > Licensed Clinical Social Worker
2. Must take place in the "4 walls" of the FQHC
3. Medically necessary
4. Billing limited to one visit per day with certain exceptions

Solano County Health and Social Services
 Family Health Services
 Total Qualified Encounters
 (Medical, Dental, Mental Health)
 FY2023/24

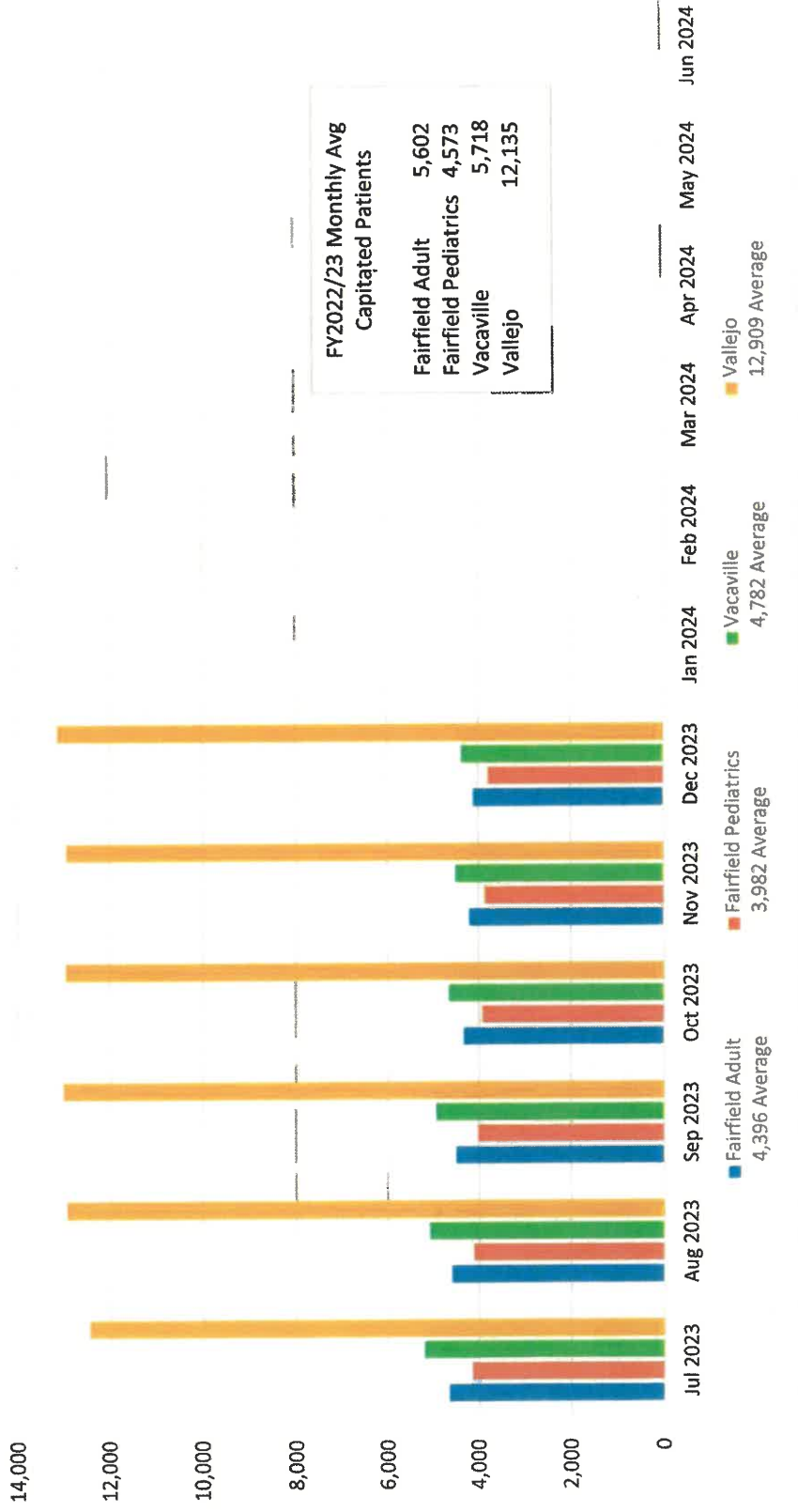


Note: Encounters with service dates through 12/30/2023

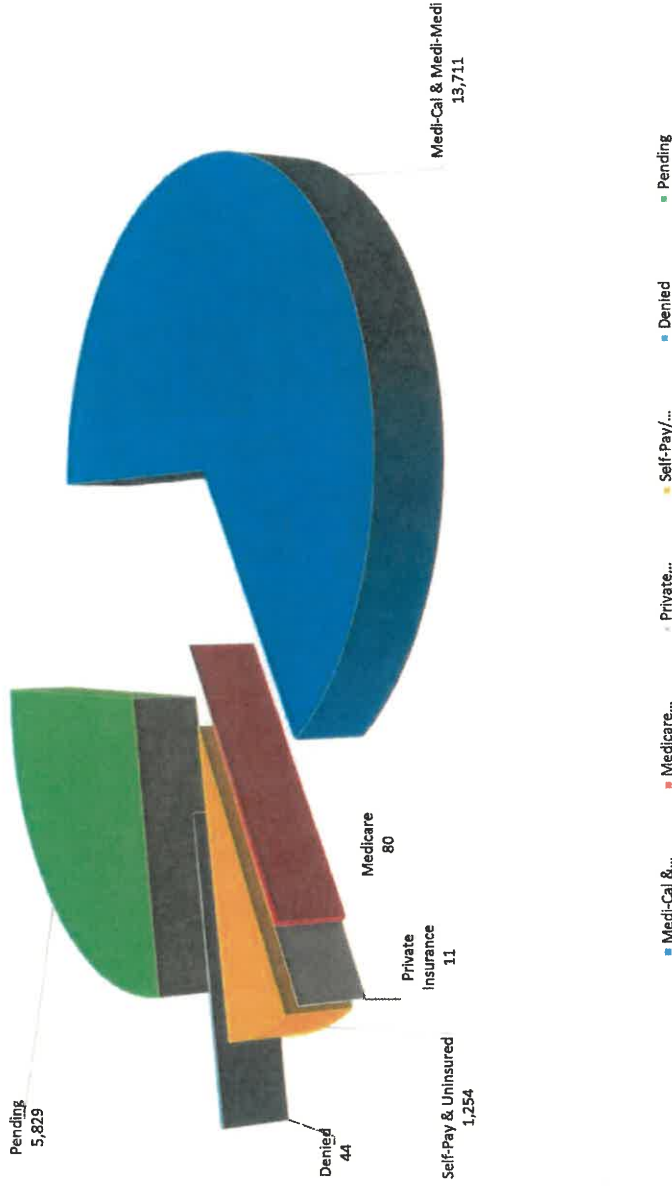
Solano County Health and Social Services
 Family Health Services
 Total Qualified Encounters
 FY2018/2019 through FY2023/24



Solano County Health and Social Services
 Family Health Services
 Total Partnership Capitated Patients
 FY2023/24



Solano County Health and Social Services
 Family Health Services
 Total Qualified Encounters by Payer Mix
 (Medical, Dental, Mental Health)
 FY2023/24



Note: Encounters with service dates through 11/30/2023

	FY2023/24 YTD	FY2022/23
Same Day Service	16	59
Not Billable to Medicare	13	38
Private Insurance	9	38
Patient Not Assigned to FHS	5	33
Other	1	4
TOTAL	44	172
%TOTAL ENCOUNTERS	0.20%	0.33%

Time Period January 1, 2023- November 30, 2023

Referrals

Month	Number of Referrals	Top 5 Referrals	Number ordered
January	1083	Cardiology	740
February	889	Dermatology	769
March	1312	Gastroenterology	1135
April	1004	Ophthalmology	1250
May	1161	Physical Therapy	714
June	1124		
July	973		
August	1206		
September	960		
October	1090		
November	992		
Grand Total	11794	Grand Total	4608

Partnership HealthPlan of California (PHC) now offers Direct Telehealth Specialty Services through our provider directory to Primary Care Providers (PCPs). Direct Specialty Telehealth Services are being provided by "TeleMed2U" for a select set of specialties. Please note that TeleMed2U is offering the below specialties:

Cardiology Infectious Disease Physical Medicine & Rehabilitation Dermatology
 Nutrition (ages 3+) Psychiatry (ages 4+) Diabetes Care Program Nephrology
 Pulmonology Endocrinology Neurology Rheumatology Gastroenterology

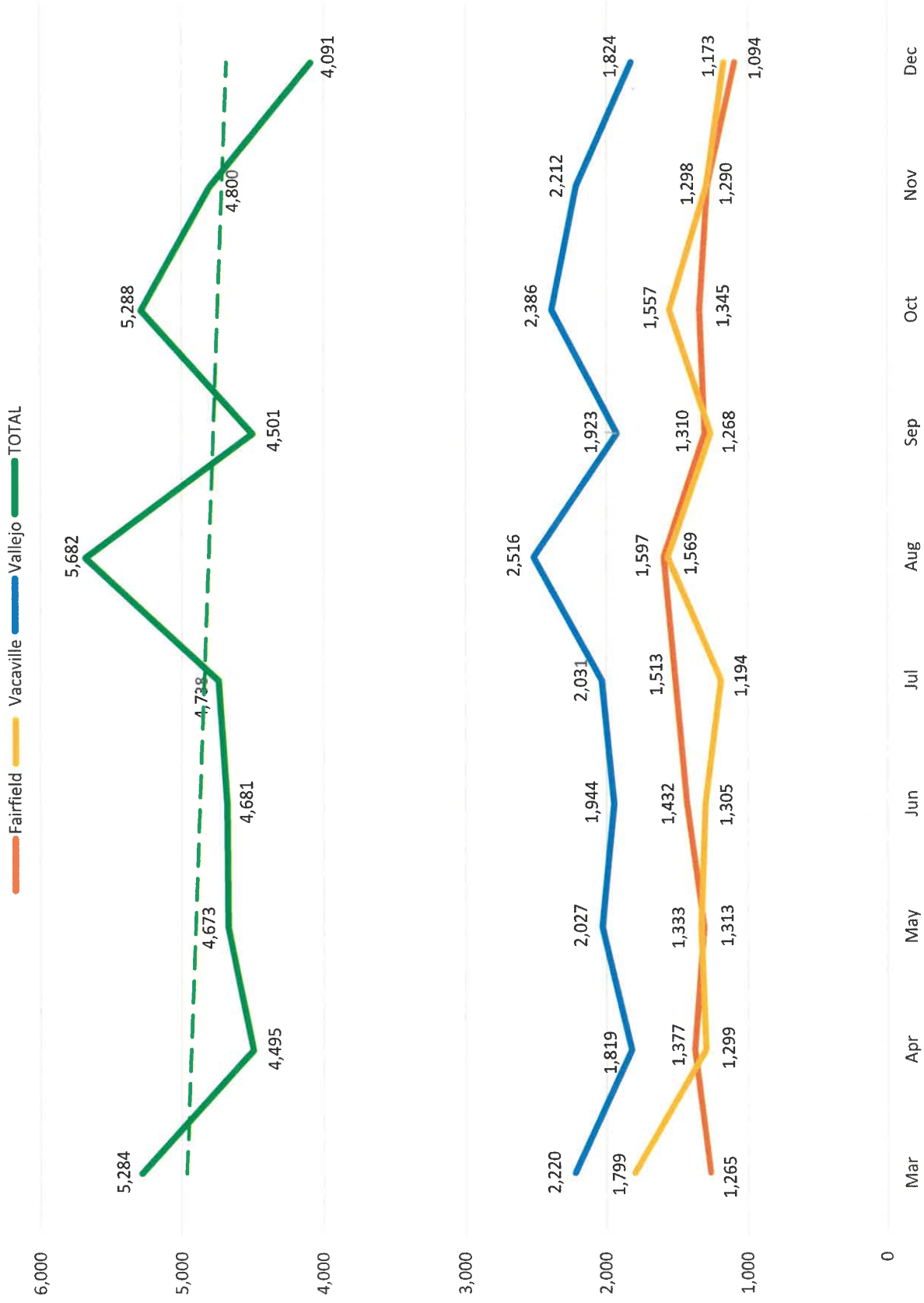
Clinic Operations Report: Clinic Metrics

Queue Management (Q-Matic) Stats

Clinic Site	Patients Served												
	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec			
Fairfield													
Lab	94	106	91	114	99	125	84	75	83	60			
Medical (Adult)	1,171	1,271	1,222	1,318	1,414	1,472	1,226	1,270	1,207	1,304			
Subtotal	1,265	1,377	1,313	1,432	1,513	1,597	1,310	1,345	1,290	1,094			
Vacaville													
Dental	792	524	662	566	539	717	533	679	561	451			
Medical (Adult & Peds)	1,007	775	671	739	655	852	735	875	737	722			
Subtotal	1,799	1,299	1,333	1,305	1,194	1,569	1,268	1,557	1,298	1,173			
Vallejo													
Dental & Medical (Adult & Peds)	2,164	1,738	1,961	1,865	1,950	2,432	1,834	2,295	2,104	1,760			
Lab	56	81	66	79	81	84	89	91	108	64			
Subtotal	2,220	1,819	2,027	1,944	2,031	2,516	1,923	2,386	2,212	1,824			
TOTAL	5,284	4,495	4,673	4,681	4,738	5,682	4,501	5,288	4,800	4,091			

	Fairfield	Vacaville	Vallejo	OVERALL
Average Patients Served	1,340	1,351	2,049	4,740

2023 QMatic: Monthly Patients Served



Primary Care Provider Quality Improvement Program (PCP QIP) Report
Solano County, Health & Social Services, Family Health Services
November 2023

TABLE OF CONTENTS

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

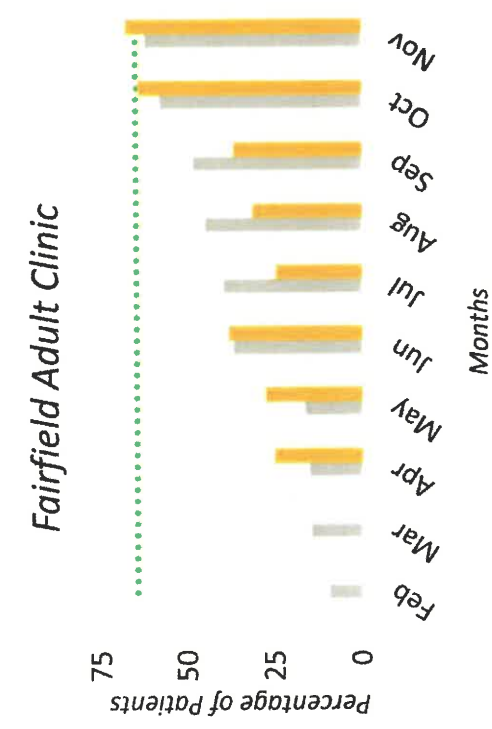
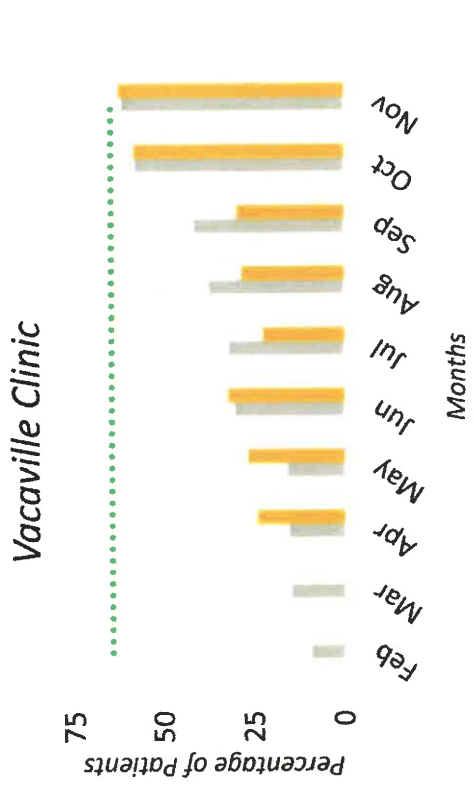
- I. Clinical Quality

I. CLINICAL QUALITY

Terms Defined

Primary Care Provider Quality Improvement Program (PCP QIP)- financial incentive program from Partnership HealthPlan of California to primary care providers for meeting specific performance thresholds. PCP QIP clinical measures look only at data for patients with Partnership HealthPlan of California insurance plans during calendar year 2023.

PCP QIP Diabetes HbA1c Good Control

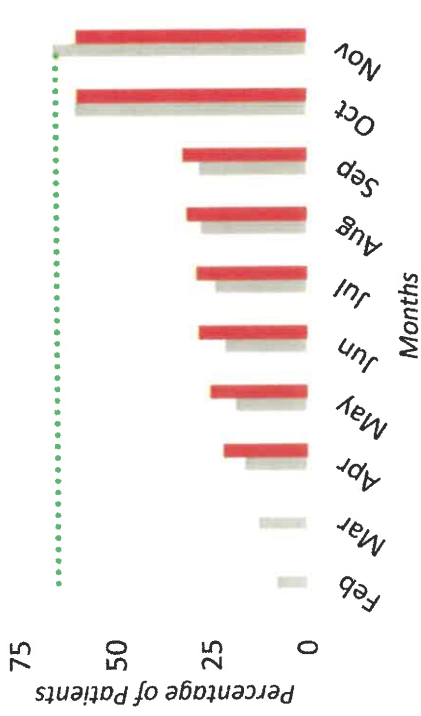


Site	Current Score	Number of Patients Needed to Meet Target	Full Point Target Score (75th Percentile)
Fairfield Adult	67.39%	Target Met - over by 13	
Vacaville	62.50%	1	64.48%
Vallejo	52.93%	69	

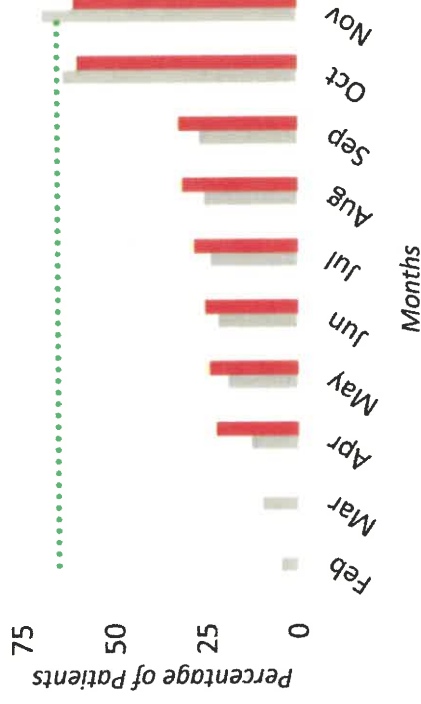
Note: 1st manual upload of HbA1c readings in October 2023

PCP QIP Controlling High Blood Pressure

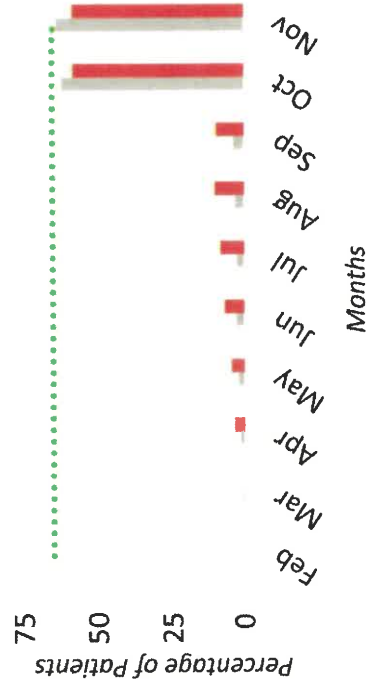
Fairfield Adult Clinic



Vacaville Clinic



Vallejo Clinic

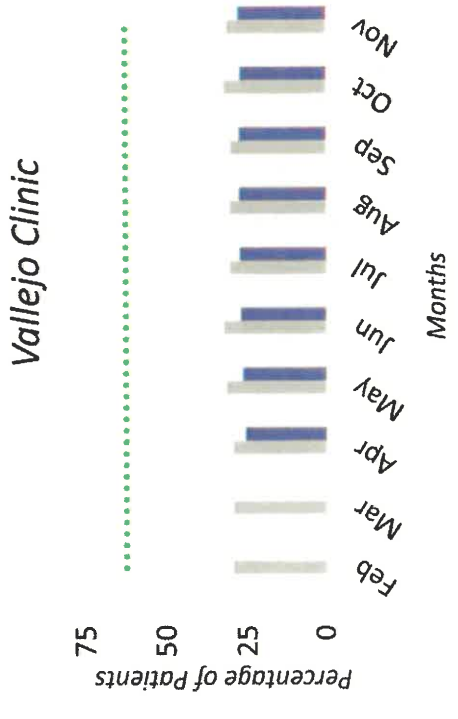
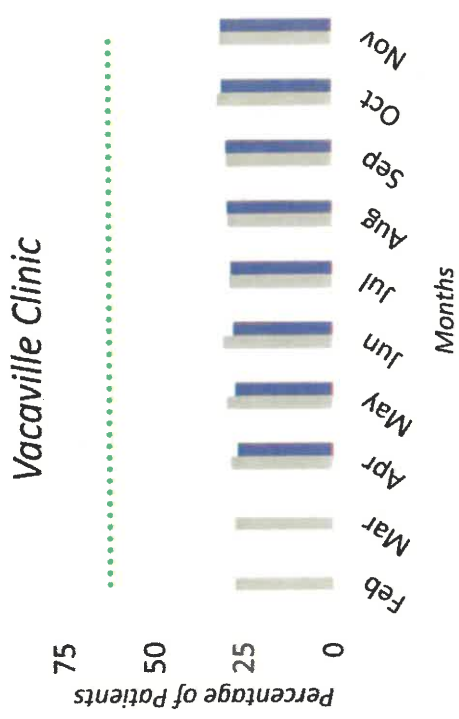
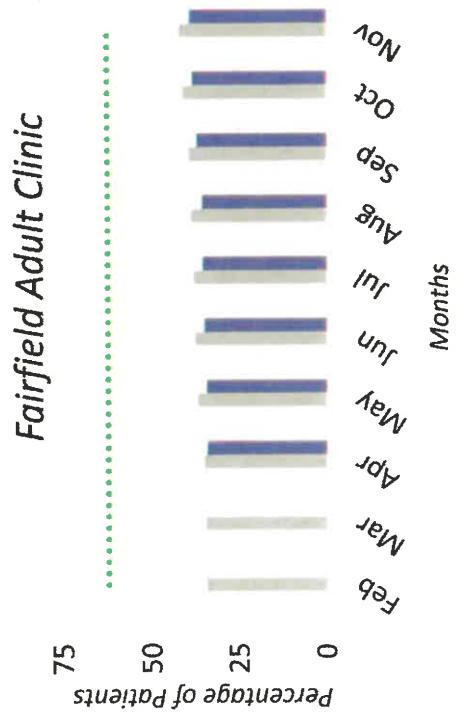


Site	Current Score	Number of Patients Needed to Meet Target	Full Point Target Score (75th Percentile)
Fairfield Adult	59.91%	59	65.10%
Vacaville	60.53%	11	65.10%
Vallejo	58.63%	35	65.10%

2021 2022 2023 Target

Note: 1st manual upload of blood pressure readings in October 2023

PCP QIP Cervical Cancer Screening

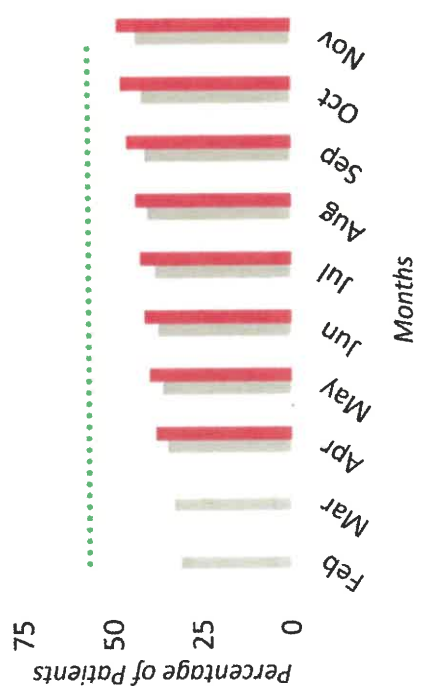


Site	Current Score	Number of Patients Needed to Meet Target	Full Point Target Score (75th Percentile)
Fairfield Adult	38.86%	430	62.53%
Vacaville	31.12%	397	62.53%
Vallejo	27.45%	1,205	62.53%

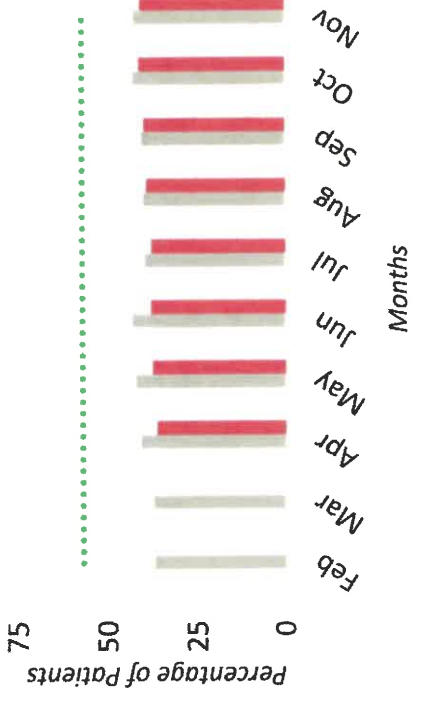
2021 2022 2023 Target

PCP QIP Breast Cancer Screening

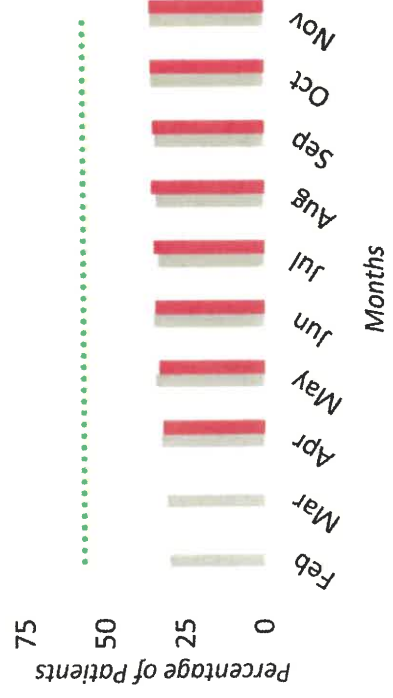
Fairfield Adult Clinic



Vacaville Clinic



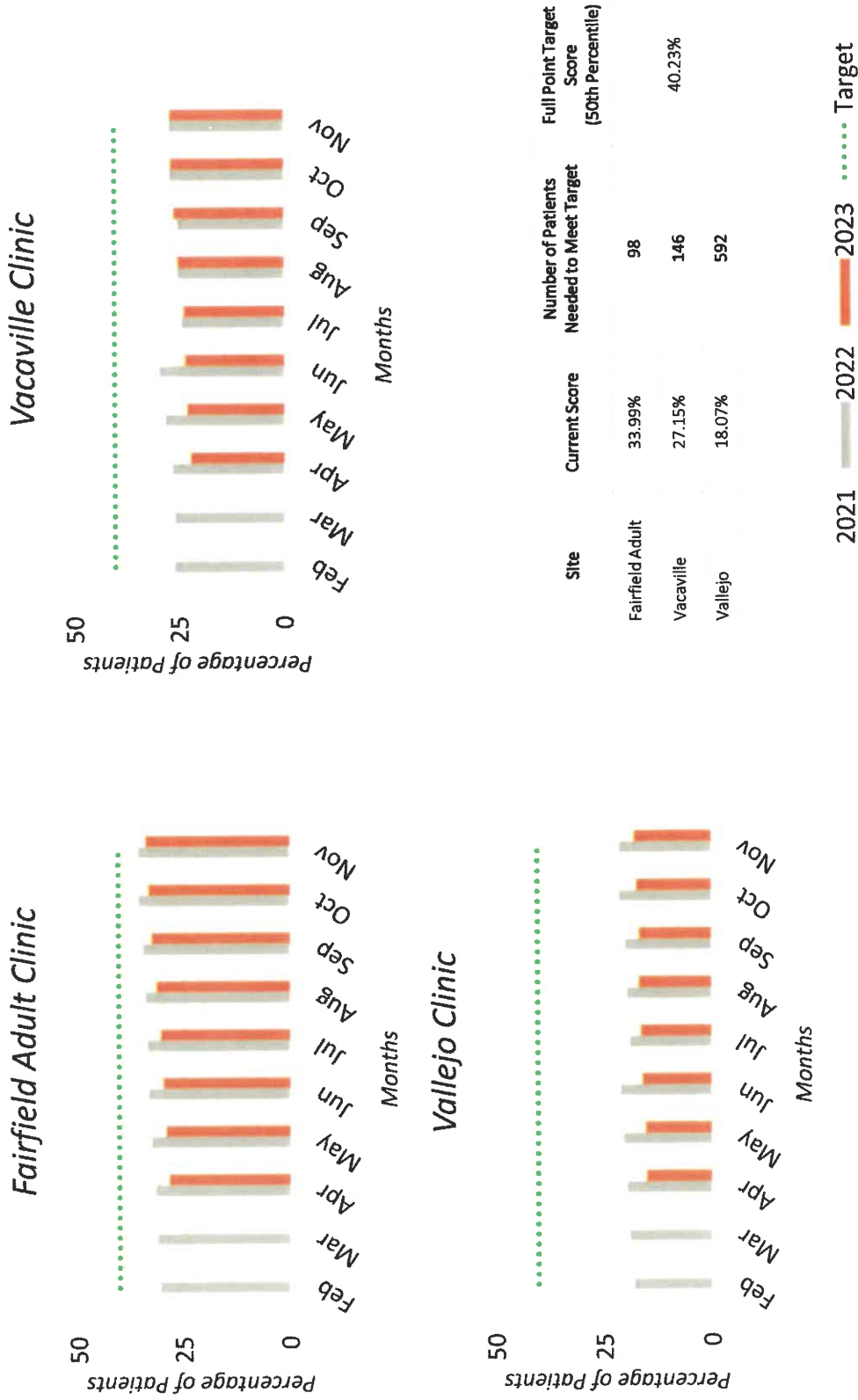
Vallejo Clinic



Site	Current Score	Number of Patients Needed to Meet Target	Full Point Target Score (75th Percentile)
Fairfield Adult	48.75%	44	56.52%
Vacaville	40.68%	47	56.52%
Vallejo	36.09%	122	56.52%

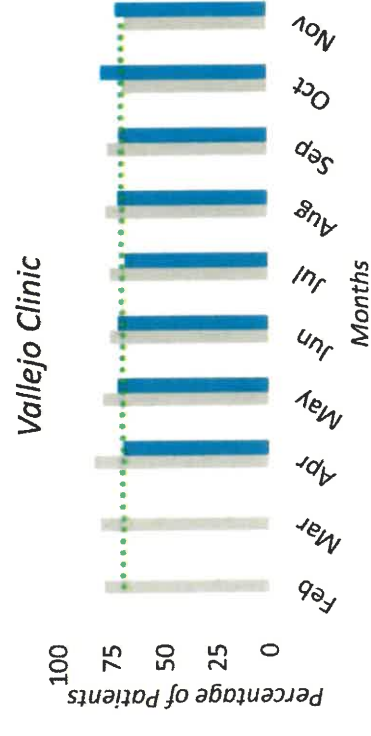
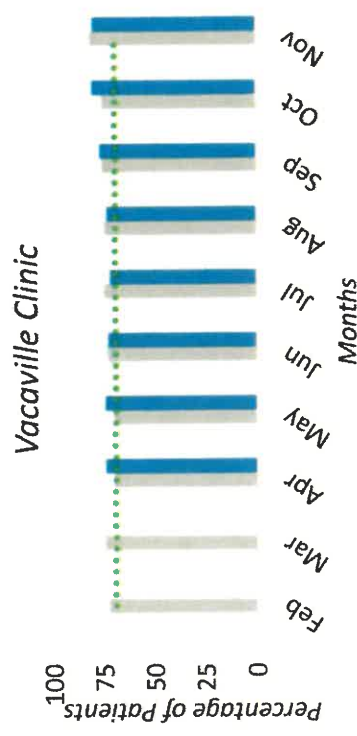
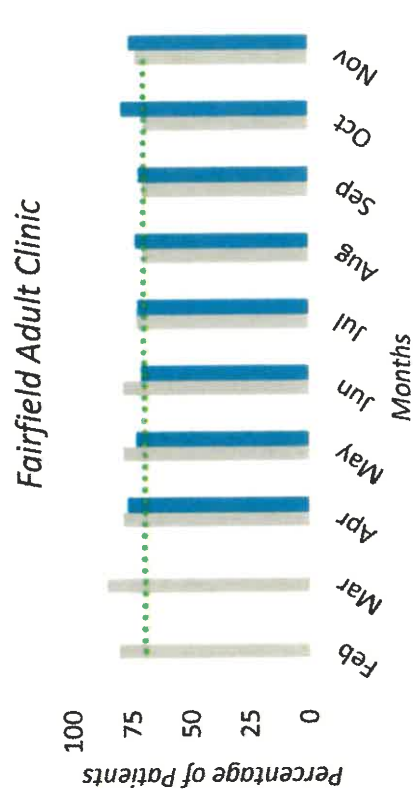
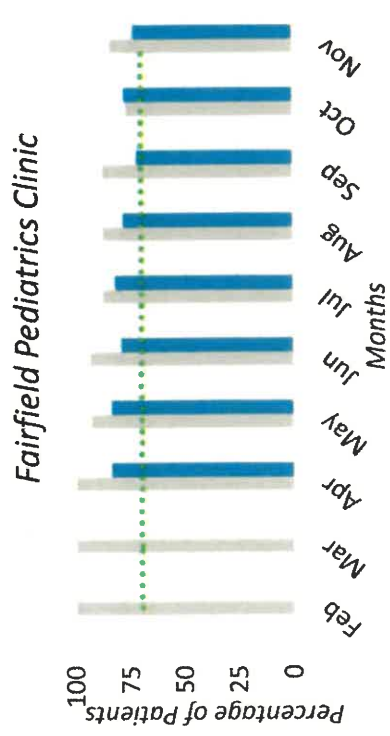
2021 2022 2023 Target

PCP QIP Colorectal Cancer Screening



Note: The only measure in which 50th percentile is considered Full Point Target.

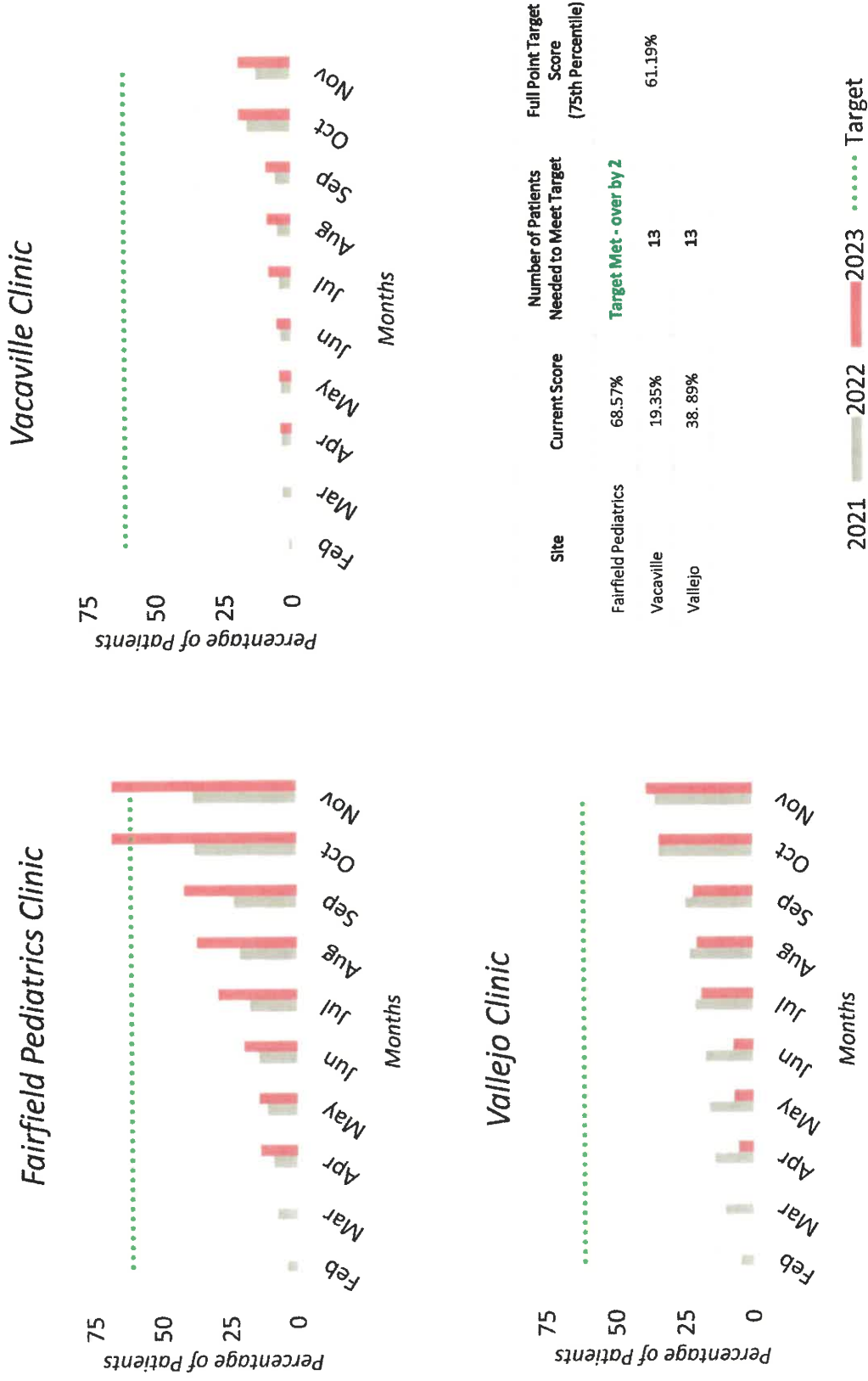
PCP QIP Asthma Medication Ratio



Site	Current Score	Number of Patients Needed to Meet Target	Full Point Target Score (75th Percentile)
Fairfield Pediatrics	72.73%	Target Met	
Fairfield Adult	75.44%	Target Met - over by 3	
Vacaville	80.00%	Target Met - over by 4	69.67%
Vallejo	71.76%	Target Met - over by 1	

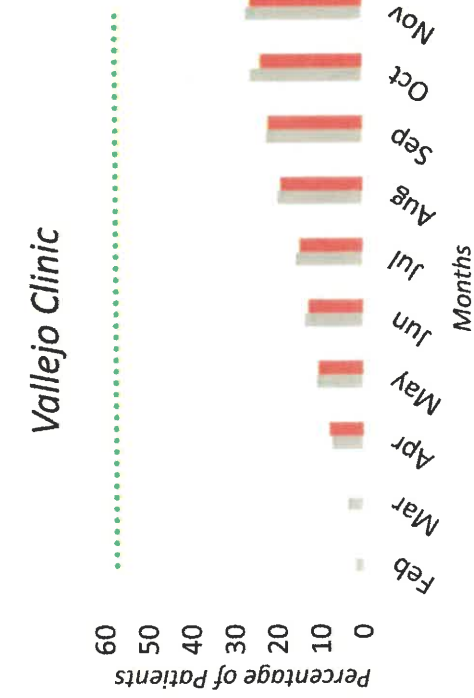
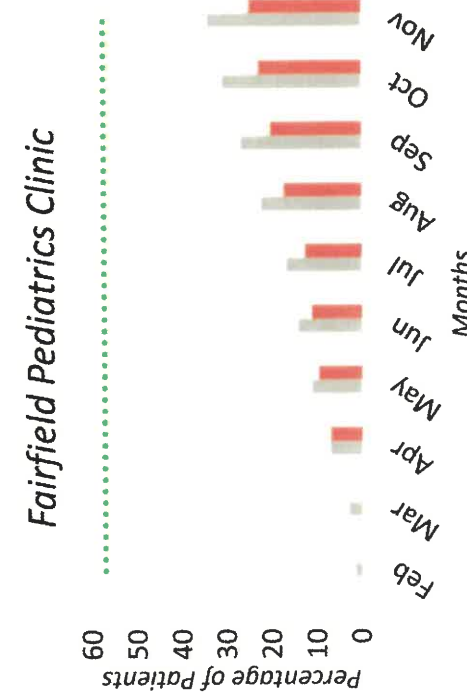
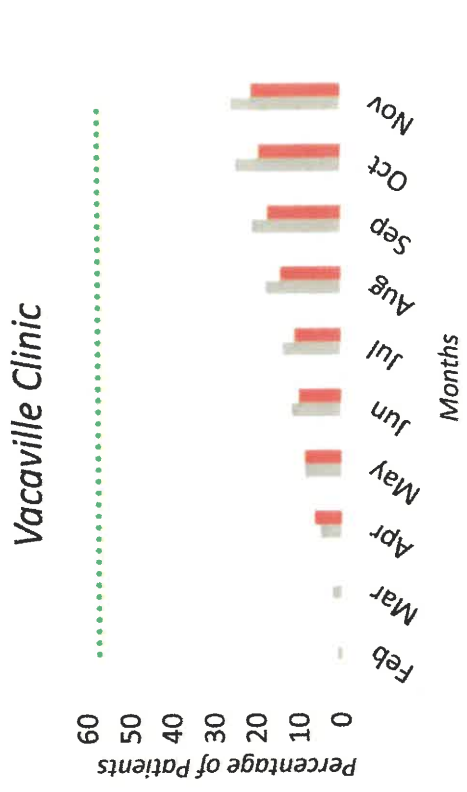
2021 2022 Target

PCP QIP Well Child First 15 Months



Note: 1st manual upload of Well Child Visits 0-15 mo. in October 2023

PCP QIP Child and Adolescent Well Care Visits

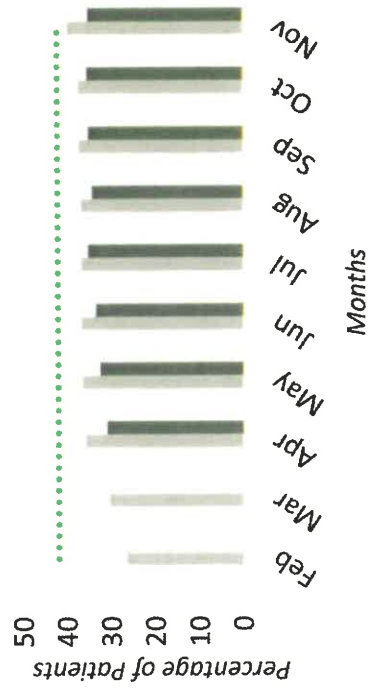


Site	Current Score	Number of Patients Needed to Meet Target	Full Point Target Score (75th Percentile)
Fairfield Pediatrics	25.02%	932	57.44%
Vacaville	21.30%	396	57.44%
Vallejo	26.40%	1,055	57.44%

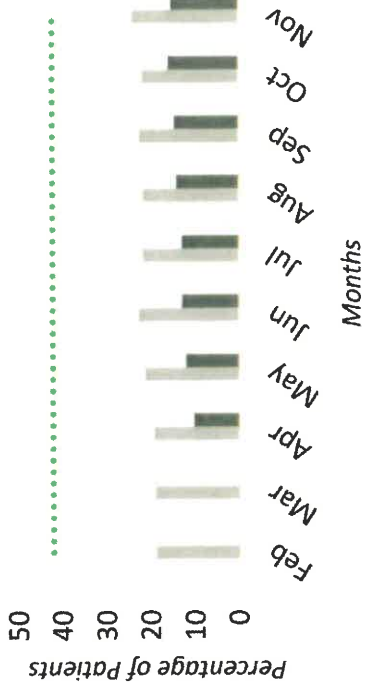
2021 2022 2023 Target

PCP QIP Childhood Immunizations

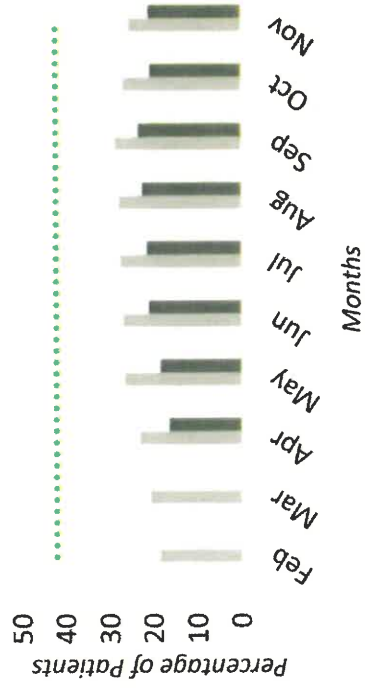
Fairfield Pediatrics Clinic



Vacaville Clinic



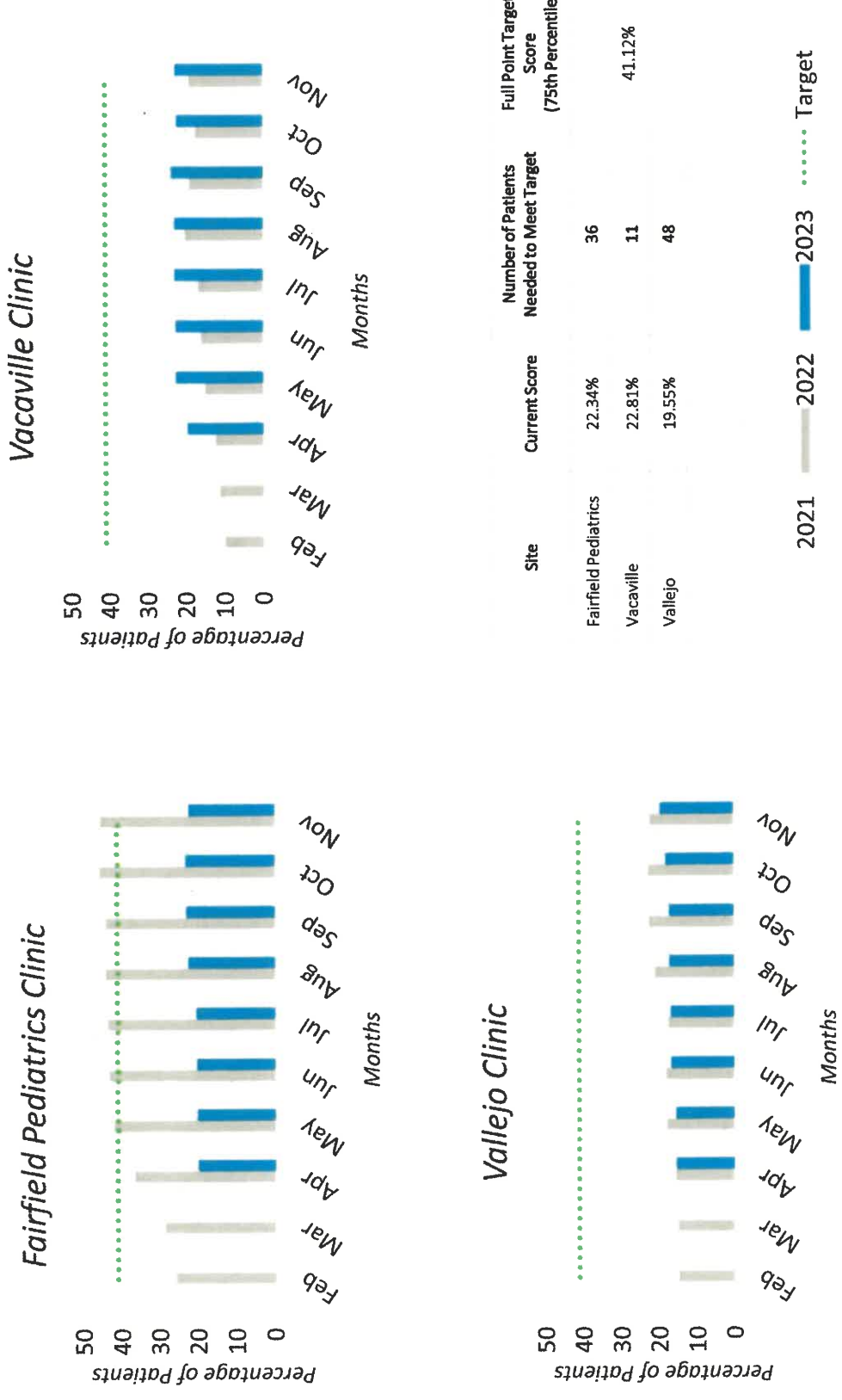
Vallejo Clinic



Site	Current Score	Number of Patients Needed to Meet Target	Full Point Target Score (75th Percentile)
Fairfield Pediatrics	35.16%	9	
Vacaville	15.25%	16	42.09%
Vallejo	21.05%	44	

2021 2022 2023 Target

PCP QIP Adolescent Immunizations



Site	Current Score	Number of Patients Needed to Meet Target	Full Point Target Score (75th Percentile)
Fairfield Pediatrics	22.34%	36	41.12%
Vacaville	22.81%	11	41.12%
Vallejo	19.55%	48	41.12%

Robert's Rules of Order for Meetings

Presented by:
Kelly Welsh, Deputy County Counsel
Office of the Solano County Counsel
January 17, 2024

“Where there is no law, but every man does what is right in his own eyes,
there is the least of liberty.”

— [Henry M. Robert, Robert's Rules Of Order](#)

What are Robert's Rules of Order?

- Parliamentary procedures
 - > A set of rules for conducting meetings that allows everyone to be heard and to make decisions without confusion
- Provide order, fairness and decorum
- Facilitate the transaction of business and expedite meetings

Role of the President

- The president, the designated “chair”, maintains order

Role of the President

- The President, who is the designated “chair”, maintains order
- The President’s job is to make sure that the meeting stays on track and its participants don’t become unruly
- This can include calling for votes, ensuring adherence to the agenda, stopping arguments, and interrupting when a particular discussion has gone on too long.

Everyone's Job

- **Stay on topic**
 - > **To make the meeting move efficiently, to avoid Brown Act violations and to make the President's job easier, each board member has a responsibility to stick to the topic at hand without straying off the subject**

Courtesy and Professionalism are Paramount

- It is important that all participants keep things professional
- Discussions should be held with that goal in mind, and participants should keep any personal issues out of it
- Being courteous, respectful and congenial in meetings will not only make the meeting more pleasant, but also make it more efficient

Participants Get Their Turn to Speak

- When someone wants to make a comment, they must raise their hand and be called upon by the President.
- The President goes around the “room” in a fair order, allowing everyone who wants to speak on an issue to have their turn.
- Before any individual can speak again, the President ensures that everyone who wants to speak has spoken in that round of comments.
- This method keeps anyone from speaking out of turn, talking over others, or having side conversations.

Rules to Remember

- The above guidelines set the tone and pace of the meeting and lay the groundwork for applying the Rules.
- The actual Rules dictate how certain situations should be handled.
- These are a few that can easily be put into place in an online meeting:

“Point of order”

- A point of order can be raised at any time when any board member notices a violation of the rules.
 - > Can interrupt a speaker who has the floor.
 - Doesn't need to be seconded.
 - Isn't debatable.
 - Is decided by the President
 - Can't be reconsidered.

“Point of privilege”

- When someone says, “point of privilege,” they do so when someone else is talking. Interrupting the speaker seems to contradict the rules, but in this case, it’s important for keeping order in the meeting. Someone can use “point of privilege” to note some noise or other distraction that is causing problems in the meeting. The President then decides what action to take.

“Point of information”

- This is another case where the speaker can be interrupted. When using the “point of information” rule, the individual does so to ask for more information or ask the speaker a question. It comes into play to help avoid confusion and aid decision-making.

The motion

- A motion is a call to action
 - > An actionable item that requires the group to make a decision
 - > Essentially you are saying “I think we should consider doing this”

The motion

- The maker of the motion has first right to speak to it
- A trustee can vote against her own motion

The second

- The “second” makes the motion important enough to discuss
 - > Eliminates unnecessary discussion on a point that only one member believes is worth discussing
 - > If at least one other person believes the motion is worth discussing, then they second the motion, requiring action
 - > A second doesn't mean the person seconding agrees with the motion, but feels that it should at least be discussed
- Second can be shouted by any member, doesn't require recognition by the chair
 - > Good to note who made the second for the record

Discussion

- After a motion is made and seconded, it belongs to the group; it's "on the floor"
 - > The individual no longer has ownership of the motion
 - They cannot voluntarily withdraw

Making changes

- **Motion to amend**
 - > Changing the motion currently on the floor
 - Usually changing the wording of the motion
 - > Needs second, is debatable
 - At this point debate is limited only to whether the proposed change should be made, not on the merit of the original motion itself
 - > Vote is only if the change should be made
 - Has no effect on whether main motion is accepted
 - I.e. voting on “should we make this change” not “should we do this”

Making changes

- Motion to substitute
 - > If a board member wants to change the meaning of the main motion
 - > Needs second, is debatable
 - > Substitute motion can be amended
 - > President asks for a vote on the substitute motion
 - If the vote fails, goes back to main motion
 - If it passes, then no vote is taken on the main motion

DEPARTMENT OF HEALTH & SOCIAL SERVICES



**SOLANO
COUNTY**

**Family Health Services Community Healthcare Board
2024 Annual Calendar**

Month	Required Annual Review	Comments/Training
January 17, 2024	<ul style="list-style-type: none"> Project Officer/CEO Evaluation Review Board Members Sign Annual Bylaws Appendix A "Conflict of Interest" and "Confidentiality" forms Quarterly Financial Report 	<ul style="list-style-type: none"> Compliance Training Robert's Rules Review (as needed)
February 21, 2024	<ul style="list-style-type: none"> Review UDS Initial Submission Progress Review and Approve: Sliding Fee Scale Policy 	
March 20, 2024	<ul style="list-style-type: none"> Review UDS Final Submission Progress Quarterly Quality Improvement Report Evaluation of QI/QA Program 	
April 17, 2024	<ul style="list-style-type: none"> Quarterly Financial Report Board Self-Assessment FHS Requested Budget Proposal for FY 24/25 	
May 15, 2024	<ul style="list-style-type: none"> Review Final UDS Submission Update Community Needs Assessment 	
June 19, 2024	<ul style="list-style-type: none"> Quarterly Quality Improvement Report Review Strategic Plan (3-year Cycle) 	
July 17, 2024	<ul style="list-style-type: none"> Review and Approve Credentialing and Privileging Policy and Procedures 	
August 21, 2024	<ul style="list-style-type: none"> FY 25/26 Budget Development Quarterly Financial Report 	
September 18, 2024	<ul style="list-style-type: none"> FY 24/25 Budget Development (continued) Quarterly Quality Improvement Report Evaluation of QI/QA Program (from June) Review and Approve the QI/QA Plan (from June) 	
October 16, 2024	<ul style="list-style-type: none"> Review Current HRSA Competing and Non-Competing Continuation Applications/Progress Reports Quarterly Financial Report 	
November 20, 2024	<ul style="list-style-type: none"> Review Current HRSA Competing and Non-Competing Continuation Applications/Progress Reports Board Nominations – Executive Positions Review Annual Board Calendar 	
December 18, 2024	<ul style="list-style-type: none"> Review Current HRSA Competing and Non-Competing Continuation Applications/Progress Reports Quarterly Quality Improvement Report Board Elections – Executive Positions Patient Satisfaction Report 	

Additional Items that can be added to Agenda for Board Approval at any given time:

- Review and Update Health Center Policies, Procedures and Services
- Contracts Review
- Brown Act Annual Training

Approved 2024 CHB Calendar as of 12/20/2023.