



## County of Solano Community Healthcare Board

### REGULAR GOVERNING BOARD MEETING MINUTES

Wednesday, March 20, 2024

In Person Meeting

#### Members Present:

At Roll Call: Michael Brown, Etta Cooper, Marbeya Ellis, Ruth Forney, Gerald Hase, Deborah Hillman, Anthony Lofton, Don O'Conner and Sandra Whaley.

**Members Absent:** Brandon Wirth, Charla Griffith, Tracee Stacy and Robert Wieda,

#### Staff Present:

Gerald Huber, Dr. Bela Matyas, Dr. Michele Leary, Dona Weissenfels, Cynthia Coutee, Rebecca Cronk, Nina Delmendo, Natasha Hamilton, Pierce Leavell, Krista McBride, Dr. Reza Rajabian, Noelle Soto, Cherry Violanda, Kelly Welsh, Han Yoon, Debbie Vaughn, Seema Mirza, Yalda Mohammad Shafi, Rovina Jones, Danielle Seguerre-Seymour and Patricia Zuñiga.

#### 1) Call to Order- 12:08 pm

- a) Welcome
- b) Roll Call

#### 2) Approval of the March 20, 2024 Agenda

**Discussion:** Vice Chair Michael Brown notified the Board that Board Member Tracee Stacy was unable to attend the meeting and she was scheduled to present, Agenda Item 9c) Sharing information on "Network of Care", in the "Discussion" section. Because Tracee was not present, it was requested that item 9c) be removed from the March Agenda and be moved to the April 17, 2024, Agenda.

**Motion:** To approve the March 20, 2024, Agenda, with the change that Agenda Item 9c), be removed and moved to the April 17, 2024, Agenda.

**Motion by:** Sandra Whaley and seconded by Don O'Conner.

**Ayes:** Michael Brown, Etta Cooper, Marbeya Ellis, Ruth Forney, Gerald Hase, Deborah Hillman, Anthony Lofton, Don O'Conner and Sandra Whaley.

**Nays:** None.

**Abstain:** None.

Motion Carried.



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### 3) Public Comment

- There was no public comment.

### Regular Calendar

### 4) Approval of Minutes

Approval of the February 21, 2024, draft Minutes

Discussion: Vice Chair Michael Brown asked the Board Members to remove the draft minutes that came with the agenda packet and to review the red-lined draft minutes handed out at the meeting. Project Officer, Dona Weissenfels, noted that there were changes proposed on Page 4, in Agenda Item 5i) QI Update.

Motion: To approve the February 21, 2024, red-lined draft Minutes.

Motion by: Sandra Whaley and seconded by Deborah Hillman.

Ayes: Michael Brown, Etta Cooper, Marbeya Ellis, Ruth Forney, Gerald Hase, Deborah Hillman, Anthony Lofton, Don O'Conner and Sandra Whaley.

Nays: None.

Abstain: None.

Motion Carried.

### 5) Clinic Operations Reports

#### a) **Staffing Update** — Natasha Hamilton

- Natasha reviewed the Staffing Update report. (*Please reference the "FHS Staffing Update – March 20, 2024"*)
- Natasha announced that FHS had three (3) Nurse Practitioners that started on Monday, March 18<sup>th</sup>, and thanked Dr. Michele Leary, for her effort in recruiting and hiring providers.
- Natasha also mentioned FHS continues to work with Human Resources in filling vacancies.
- There were no questions from the Board.

#### b) **Credentialing Update** — Cherry Violanda (*Please reference the "ESU Status Report – March 2024"*)

- Desiree and Raechel were unavailable, so Cherry Violanda presented the report.
- There were no questions from the Board.

#### c) **HRSA Grants Update(s)** — Noelle Soto

- Noelle noted that HRSA meant Health Resources Services Administration, to explain the acronym to those that are new to the meeting.
- Noelle stated that the Uniform Data Systems (UDS) Grant and is also known as an annual report card for the clinics. At the last meeting she stated that it was submitted, and FHS staff was waiting for the reviewer's comments. Since the last meeting, FHS received a few follow-up comments and questions from the reviewer, of which they responded in the allotted time. She announced that as of Friday, 15<sup>th</sup>, those responses were reviewed by the reviewer and accepted. The report would be moved on for official HRSA filing and if there were no issues



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with the report, then the FHS UDS Report would be preliminarily closed on the 2023 UDS Report. If there were no issues from HRSA and it was accepted, then she would present the UDS Report at the April meeting as scheduled.

- Noelle also mentioned that for the Ryan White Part C, Early Intervention Services portion, which provides HIV-AIDS care, to people living with HIV, they also do an annual report, called the Ryan White Services Report (RSR). That report has been submitted, and they provided both the provider and recipient portion. They go hand in hand and they both were accepted before the deadline at the end of the month.
  - There were no questions from the Board.
- d) **Grievances/Compliments** — Rebecca Cronk (*Please reference the “Grievance Reports, April-December 2023 & January– February 2024.”*)
- Rebecca presented and explained the graphs for 2023 and 2024 shown as a comparison and she reviewed the nine (9) grievances noted for February 2024. She stated that the Grievance Severity Rating was a Level 1, which is the lowest rating.
  - A board member asked for examples of the Referrals category. Rebecca said the complaint was specific to a referral process as opposed to other clinic general process.
  - There were no other questions from the Board.
- e) **H&SS Compliance** — Krista McBride (*Please reference the “H&SS Compliance-FHS Privacy & Security Incident Report February 1 – 29, 2024”.*)
- Krista reviewed the one (1) item noted in the report. It was in the category of Security: Lost/Damaged Property that involved an auto collision in the parking lot and there were no breaches reported for February.
  - There were no questions from the Board.
- f) **Finance & Revenue Cycle Management** — Nina Delmendo (*Please reference the “FHS Revenue Cycle Reports: Expenditure and Revenue as of February 2024, Revenue Cycle Reports: Total Unbilled Encounters as of March 14, 2024, Total Encounters as of February 29, 2024, and Total Qualified Encounters (Medical, Dental, Mental Health) FY 2023/24 – July 2023 – February 2024.”*)
- Nina notified the Board Members that the Financial reports were available at the meeting and not included in the agenda packet. The reports were handed out by the Board Clerk, Patricia Zuñiga.
  - Nina mentioned that the mid-year budget report, a measurement of the adopted budget that was added at the beginning of the year, went to the County Board of Supervisors last Tuesday and they did not have any questions.
  - Nina reviewed all the reports in detail.
  - Board Member Ruth Forney complimented Nina’s reports and said they were very detailed.
  - There were no other questions from the Board.
- g) **Referrals** — Cynthia Coutee
- Cynthia informed the Board that they are still in the process, trying to make it easier to streamline the referrals process but it is difficult to do with not having enough staff to process the referrals. They are using the Plan-Do-Study-Act (PDSA) Quality process to evaluate the existing improved process and fine tuning it. They are working with the Referral Coordinators, and in reviewing the referrals process and there was an inequity of the number of referrals processed by each Medical Assistant, which is also being studied along with the hours of productivity. They are also looking at increasing the number of hours that referrals are being processed.



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- Cynthia noted that as of this morning, there were 709 referrals and were currently working on referrals received since February 23<sup>rd</sup>. She noted that as of yesterday, there were 745 referrals, so as of the morning of the meeting, 39 referrals were completed during the time frame from the prior day to the morning of the meeting. She mentioned the many nuances and inconsistencies of MA availability, and that they are still short staffed, which also has an impact on the number of referrals that can be processed.
  - Board Member Etta Cooper asked to clarify the number of referrals. Cynthia noted that as of yesterday (3/19/2024) there were 745 referrals and in the morning of the meeting (3/20/2024), there were 709 referrals.
  - Board Member Deborah Hillman asked if the referrals were from all the clinics and Cynthia confirmed they were from all the clinics in Vallejo, Fairfield and Vacaville.
  - Board member Ruth Forney asked whether staffing would be increased those areas. Dona stated that she would cover that in her Project Officer's Report.
  - Board Member Sandra Whaley asked about the number of referral staff. Cynthia stated that there are three (3) Referral Coordinators at each site and there are additional staff that assist for limited hours, who are on the floor.
  - There were no other questions from the Board. The Board will monitor and follow-up on the process improvement specific to Referrals.
- h). **OCHIN EPIC Update(s)** — Dona Weissenfels (*Please reference the "OCHIN EPIC EHR Implementation 2024, Project Milestones / Highlights and Dashboard – March 2024".*)
- Dona mentioned one of the handouts in the packet that showed where they are percentage wise in the project. The project started with a soft launch in December and she noted that they are about 10% through the project. In the past week they had presentations by OCHIN about all the major areas, such as billing, practice management, and clinical.
  - Dona announced that the following week of March 25<sup>th</sup>, there would be hybrid meetings with FHS staff, OCHIN, NetraVine (IT Project Manager) and Facktorhealth, reviewing the EPIC software, and the workflows of the different areas. DoIT will be also be observing during these meetings. The software will need to be modified to the specific needs of the FHS clinics.
  - Dona stated that it was just the beginning, and exhausting, but everyone is excited about the future of having EPIC Software.
  - Gerald Huber asked if the new providers coming into the clinic were familiar with EPIC and Dona and Dr. Leary noted that most of them are and some of the current providers have experience with EPIC.
  - Board member Ruth Forney noted that most of the Health Centers are using EPIC. Dona added that with EPIC there will be bi-virtual texting available for our patients and a patient portal, which will enhance our communication with the patients. Dona also stated that right now that communication with our patients is manual which is problematic since we are short staffed.
  - Board Member Gerald Hase asked how long EPIC has been around and Dona stated they have been around for decades and they stay on top of the environment, always improving their software. She also mentioned that over the last decade a lot of electronic health record (EHR) vendors have gone out of business and OCHIN EPIC is in the top five (5) EHR vendors.
  - There were no other questions or concerns from the Board.
- i) **QI Update** – Han Yoon – (*Please reference the "QI/QA Evaluation Memo" and "QI/QA Evaluation – QI/QA Plan Checklist and Self-Assessment Tool 2024, FHS – Solano County".*)



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- Han mentioned that the QI/QA Evaluation was in the packet and that it would be reviewed and up for Board approval in the “Business Governance” section of the agenda. They are continuously improving the QI process.
  - The Board reviewed the materials and weighed in on the Evaluation during the Business Governance Section of the meeting.
- j) **FHS Clinic Q-Matic Stats** — Noelle Soto (*Please reference the “FHS Clinic Q-Matic Stats Reports – March 2023-December 2023 and January-February 2024” report.*)
- Noelle reviewed the Q-Matic stats with the Board. She mentioned that the report shows the stats from March to December of last year, and also from January to February of this year as a comparison.
  - Since there were new people who attended the meeting, Noelle explained that the Q-Matic Stats was a tool to count the number of people who walk into the clinic lobby at each location, except the Dental clinics and the Fairfield Pediatrics clinic. Also, she noted that not all people who walk into the clinic have an appointment. Some may just have a request or question, they may have a lab appointment, or get triaged by a nurse.
  - She pointed out in February there was a slight decrease in the totals, likely due to the short month and two (2) holidays in the month.
  - There were no questions from the Board.

### 6) CHB Follow-up to Clinic Quality and Operational Reports:

Review, Follow-up & Action: CHB will provide feedback on reports, request additional information on quality and clinic operations reports & follow up on these requests.

- There were no follow-up items requested by the Board, from the February meeting, that needed to be reported.
- Board Member Ruth Forney stated she appreciated that all the Operations Reports, both verbal and written, were very thorough and detailed and that the packet was available in advance for everyone to review in advance.
- Vice Chair Michael Brown also mentioned that when the meeting invite is sent out to everyone, a link to the online Solano County website, CHB web page is provided, so that anyone can click on it and review the agenda packet and information, before attending the meeting.

### 7) HRSA Project Officer Report

a) Health Center HRSA Project Officer Update – Dona Weissenfels

i) Health Center Activities – Internal and External Update

- External News: From the National Association of Community Health Centers, recently the Senate and the House of Representatives, approved funding to our County Health Centers and it was much needed financial improvement over the last decade. There will be continued support with the FQHC system. FHS benefits from it with the 330 Grant and all the other programs surrounding it like the National Association Payment for Physicians and back to school loans. Board Member Ruth Forney added that it was approved at the end of 2023 and mentioned she made many phone calls to Representatives and others, advocating in support of passing that bill. Ruth also noted that it is important to make those phone calls and advocate for these programs.
- Internal News: Dona announced that FHS has a dire staffing issue specifically with the MAs. FHS has brought on several providers over the last several months, but in order to



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take care of our patients, each provider needs a team of MAs to support them and we fall short. FHS has asked for 10 MA positions to be unfrozen to fortify MA staff since they would be facing a real crisis during the summer, when six (6) MAs, will be out on maternity leave. This would leave a gaping hole. There are new providers who are rooming their patients on their own, due to the MA staff shortage, which is a detriment not only to the provider, but FHS would also get a financial hit, because the providers are not being as productive as they would with MA support. The hope is to have this issue resolved soon. She did not want to take such action as reducing patient appointments, or other strategies, if the providers do not have the MA support they need.

- Dona also mentioned that with the OCHIN EPIC transition there would be downtime for the clinics during the summer, to train staff.
  - Dona gave an update about the HRSA VOSV. A few conditions still need to be cleared. She mentioned that the first set of conditions are contract related and are all NorthBay Memorandum of Understanding (MOU) referrals. The three contracts in progress are for X-Ray, OB/GYN and the hospital. Their lawyer is reviewing them, and the hope is to get signatures next week and send them to HRSA. Noelle and Dona have been meeting with HRSA every week to review the conditions and have been making good progress. The contracts are due April 8, 2024 and the rest of the conditions are due April 27, 2024. Dona stated they did not want to slide into the 30-day category thereafter and want to be compliant with all the conditions before the end of April.
  - Board Member Ruth Forney asked to state the other conditions. Dona said they are the Co-Applicant Agreement, the Key Management Policy which was on the agenda up for board approval, and Job Duty Statements from Finance, and an MOU with the IT Department. HRSA has asked that Dona has her role, span of control, over different areas, because we are a County system, and because we have classifications, it really threw grievances to other areas that support us.
  - Dona mentioned QI/QA and offered the Board training or a presentation on Quality possibly next month to educate everyone on the Quality process. When HRSA met with the Board Members on the topic of Quality and when asked about the FHS QI projects, they did not get a good response from the Board. She also mentioned that the Board is responsible to have oversight on the Quality Program and all the FHS Quality Projects. It is also very important to HRSA that the Board is educated on Quality and are updated on the FHS Quality Projects.
  - Dona mentioned regarding board composition, that there were three (3) Community Healthcare Board applicants at the meeting and there is an agenda item for board approval, in the "Board Governance" section. Hopefully, the Board will meet the Board Composition condition.
  - There were no other questions from the Board.
- ii) Strategic Plan Report Update (Please reference the "Strategic Plan Report – Report Period: January-February 2024, Date of Report: February 21, 2024" provided at the meeting.)
- Dona mentioned that there were no significant updates on the Strategic Plan.
  - She complimented Fiscal, who have done a phenomenal job in preparing the FY 24/25 Budget, thanks to the effort of Girlie and Nina.
  - There were no questions from the Board.



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- iii) Responsibilities Matrix for Co-Applicants (Please reference the “Responsibilities Matrix for Co-Applicants”)
- Dona mentioned the “Responsibilities for Co-Applicants” grid handout, which was included in the packet. This is what FHS received from the VOSV last summer, because there was a lot of confusion about who does what. This reminded the Board of who does what in the FHS environment. Board Member Ruth Forney noted that FHS could miss out on funding and Dona noted that meeting the HRSA conditions are taken very seriously.

### 8) Business Governance

- a) Review and evaluate the QI/QA Evaluation Report and the performance of the Health Center based on QI/QA Evaluation/Assessment and other information received from the Health Center – Han Yoon. (Please reference the “Memo: QI/QA Evaluation” and “QI/QA Evaluation – QI/QA Plan Checklist and Self-Assessment Tool 2024, FHS – Solano County”.)
- Han presented the QI/QA Evaluation and memo to the Board for review and comment.. It was also noted that the QI/QA Evaluation looks at the components of the FHS Quality Program and assesses whether our program contains all of the required components The Board reviewed the annual evaluation and memo and noted the recommendations for increasing QI/QA Staff.
  - Han mentioned the Quality Department staffing levels. As of now they are still short staffed, lacking Medical Assistants (MAs), plus a Quality Manager who would oversee & drive the QI/QA program. Currently the QI/QA staff consists of one MA, one Office Assistant and himself as the Planning Analyst. He also mentioned that he is not full time with FHS, due to short staffing in Fiscal, so his time is split 50/50 between two programs. The Board will follow-up at the next Board meeting regarding the quality program staffing shortages.
- i) **Action item:** The Board will consider approval of the QI/QA Evaluation Report and the performance of the Health Center based on the Quality Evaluation and other reports received from the Health Center. The Board will request action or follow-up on the Quality Program as appropriate.

Discussion: None.

Motion: To approve the QI/QA Evaluation Report and the performance of the Health Center based on the Quality Evaluation and other reports received from the Health Center. The Board will request action or follow-up on the Quality Program as appropriate.

Motion by: Don O’Conner and seconded by Deborah Hillman.

Ayes: Michael Brown, Etta Cooper, Ruth Forney, Charla Griffith, Gerald Hase, Don O’Conner, Sandra Whaley, Brandon Wirth and Tracee Stacy.

Nays: None.

Abstain: None.



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Motion carried.

- b) Review and consider approval of a new FHS Policy; Board Key Management, Policy 900.03 – Dona Weissenfels (*Please reference the “Board Key Management, Policy Number: 900.03”*)
- Dona mentioned this policy was a result of the HRSA VOSV and recommended by the HRSA Auditors that FHS have a policy about Key Management, to ensure that the clinics are supported in all the management areas and that there needs to be a connection between FHS and the County.
  - Dona also mentioned that they are pursuing Job Duty Descriptions, Service Level Agreements or Memorandums of Understanding. Job Duty Descriptions are with Fiscal, and the Service Level Agreements or Memorandum of Understanding are with IT. Dona does not currently have direct authority over the work performed for the clinics in these two areas. Through these vehicles, Dona would have the opportunity to support FHS by directing the work that needs to be done. This was a HRSA directed change.
- i) **Action item:** The Board will consider approval of the FHS Policy; Board Key Management, Policy 900.03.

Discussion: None.

Motion: To approve the FHS Policy; Board Key Management, Policy 900.03.

Motion by: Roth Forney and seconded by Sandra Whaley.

Ayes: Michael Brown, Etta Cooper, Ruth Forney, Charla Griffith, Gerald Hase, Don O’Conner, Sandra Whaley, Brandon Wirth and Tracee Stacy.

Nays: None.

Abstain: None.

Motion carried.

- c) Review and consider approval of the updated 2024 Community Healthcare Board Calendar, which reflects the changes in the months that the Quarterly Quality Improvement Report will be presented to the Board. (*Please reference the updated “2024 Community Healthcare Board Calendar”*)
- i) **Action item:** The Board will consider approval of the 2024 Community Healthcare Board Calendar.

Discussion: Board Member Sandra Whaley asked Nina Delmendo if the months when the Quarterly Financial Reports were to be presented to the Board, were also correct on the updated calendar. Nina said the months noted on the updated calendar, to present the Quarterly Financial Reports were correct.

Motion: To approve the updated 2024 Community Healthcare Board Calendar.





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Motion by: Ruth Forney and seconded by Sandra Whaley.

Ayes: Michael Brown, Etta Cooper, Ruth Forney, Charla Griffith, Gerald Hase, Don O’Conner, Sandra Whaley, Brandon Wirth and Tracee Stacy.

Nays: None.

Abstain: None.

Motion carried.

d) Consider approval to create and name the volunteer Board members on the new Marketing Sub-Committee.

- Board Member Ruth Forney stated that this topic was brought up at the last meeting, to prepare for the transition of the new EHR and advertise the FHS County clinics. It was on the agenda to create a sub-committee and start discussing the topic. She then asked Legal Counsel, Kelly Welsh, for clarification of an ad-hoc versus a regularly held meeting. Kelly noted that an ad-hoc meeting happens one time and a sub-committee would meet on a regular basis.
- Discussion ensued about what was involved in marketing, whether funding was available or would there be a better time frame to create a sub-committee. Gerald Huber also stated that it should be noted in the Strategic Plan and that maybe it was too early to discuss it.
- The Board decided that this topic can be on future agendas, so it does not get forgotten, so the Board agreed to add it on a Parking Lot Agenda Item. It was also agreed that this action item could be added on the August Agenda.

i) **Action item:** The Board decided to have this item, as a “Parking Lot” Agenda Item monthly and then add it in the “Business Governance” section on the August 21, 2024 Agenda as an action item.

Discussion: None.

Motion: To put this item, “Create and name volunteers on a Marketing Sub-Committee” on the agenda as a “Parking Lot” item on future agendas and to vote on it at the August 21, 2024 CHB Meeting as an agenda item.

Motion by: Sandra Whaley and seconded by Ruth Forney.

Ayes: Michael Brown, Etta Cooper, Ruth Forney, Charla Griffith, Gerald Hase, Don O’Conner, Sandra Whaley, Brandon Wirth and Tracee Stacy.

Nays: None.

Abstain: None.

Motion carried.



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### 9) Discussion

- a. Board Member Applications received from Rovina Jones, Seema Mirza and Yalda Mohammad Shafi.
  - Each Board Member applicant was introduced then each shared their past experiences in the health field, background and the reasons they wanted to be a Board Member.
  - i) The Executive Committee reviewed three Board Member Applications submitted by Rovina Jones, Seema Mirza and Yalda Mohammad Shafi, and recommends the Board's approval, for all three applicants to be appointed as FHS Community Healthcare Board Members.
  - ii) **Action Item:** The Board will consider Rovina Jones, Seema Mirza and Yalda Mohammad Shafi to be appointed as FHS Community Healthcare Board Members.

Discussion: None.

Motion: To appoint Rovina Jones, Seema Mirza and Yalda Mohammad Shafi as FHS Community Healthcare Board Members.

Motion by: Deborah Hillman and seconded by Don O'Conner.

Ayes: Michael Brown, Etta Cooper, Ruth Forney, Charla Griffith, Gerald Hase, Don O'Conner, Sandra Whaley, Brandon Wirth and Tracee Stacy.

Nays: None.

Abstain: None.

Motion carried. The new board members were welcomed and applauded.

- b. Compliance Training – Krista McBride, H&SS Compliance. (*Please reference the "The Brown Act Presentation".*)
  - Before Krista presented the H&SS Compliance Training, she asked that all the Board Members complete three County of Solano documents: "Code of Conduct and Professional Ethics", "Oath of Confidentiality" and the "Compliance Attestation and Acknowledgement". For those Board Members who were absent, the Board Clerk, Patricia Zuñiga was asked to send the presentation along with the three forms to those Board Members and ensure all Board Members completed and submitted them. Thereafter, each Board Member would receive a copy of their signed forms, copies of all forms would be kept on file with the Board Clerk and the original forms would be given to Krista for her records.
  - There were no questions from the Board Members.
- c. Sharing information on "Network of Care" – Tracee Stacy.  
(*Note: This agenda item was voted by the Board to be removed and added to next month's agenda, as Tracee was not in attendance.*)

### 10) Board Member Comments

- There were no Board Member Comments.



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### 11) Closed Session

- i) Project Officer/CEO Evaluation

### 12) Adjourn: To the Community Healthcare Board Meeting of:

**DATE:** April 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 2:26 p.m.

#### Handouts in the Agenda Packet

- CHB February 21, 2023, draft Meeting Minutes
- Clinic Operations Report – FHS Staffing Update – March 20, 2024
- Clinic Operations Report – ESU Status Report – March 2024
- Clinic Operations Report – Grievance Reports - April – December 2023 and January – February 2024
- Clinic Operations Report – HSS Compliance-FHS Privacy & Security Incident Report – February 1-29, 2024
- Clinic Operations Report – OCHIN EPIC EHR Implementation 2024, Project Milestones / Highlights and Dashboard – March 2024
- Clinic Operations Report – FHS Clinic Q-Matic Stats Reports – March 2023-December 2023 and January-February 2024.
- Responsibilities Matrix for Co-Applicants
- Memo: QI/QA Evaluation
- QI/QA Evaluation – QI/QA Plan Checklist and Self-Assessment Tool 2024, FHS – Solano County
- Board Key Management, Policy Number: 900.03
- Updated 2024 Community Healthcare Board Calendar: Red-lined version and the final version
- Compliance Training Basics Presentation

#### Documents received at the meeting:

- February 21, 2024 CHB Minutes-Draft – Proposed changes to the draft (both the red-lined and final versions).
- FHS Revenue Cycle Reports: Expenditure and Revenue as of February 2024, Revenue Cycle Reports: Total Unbilled Encounters as of March 14, 2024, Total Encounters as of February 29, 2024, and Total Qualified Encounters (Medical, Dental, Mental Health) FY 2023/24 – July 2023 – February 2024.