



County of Solano Community Healthcare Board

REGULAR GOVERNING BOARD MEETING MINUTES

Wednesday, December 18, 2024
In Person Meeting

Members Present:

At Roll Call: Michael Brown, Etta Cooper, Ruth Forney, Gerald Hase, Deborah Hillman, Annabelle Sanchez, Tracee Stacy, Sandra Whaley, and Brandon Wirth.

Members Absent: Marbeya Ellis, Charla Griffith, Rovina Jones, Anthony Lofton, Seema Mirza, and Don O'Conner.

Staff Present: Cherry Violanda, Cynthia Coutee, Debbie Vaughn, Dona Weissenfels, Dr. Bela Matyas, Dr. Michele Leary, Dr. Michelle Stevens, Dr. Reza Rajabian, Han Yoon, Kelly Welsh, Krista McBride, Nina Delmendo, Noelle Soto, Pierce Leavell, Rebecca Cronk, Whitney Hunter, Danielle Seguerre-Seymour, and Katreena Dotson.

1) Call to Order – 12:12 PM

- a) Welcome
- b) Roll Call

2) Approval of the December 18, 2024, Agenda

Discussion: None.

Motion: To approve the December 18, 2024, Agenda.

Motion by: Tracee Stacey and seconded by Sandra Whaley.

Ayes: Michael Brown, Etta Cooper, Ruth Forney, Gerald Hase, Deborah Hillman, Annabelle Sanchez, Tracee Stacy, Sandra Whaley, and Brandon Wirth.

Nays: None.

Abstain: None.

Motion Carried.

3) Public Comment

- Pierce Leavell announced that December 18, 2024, was Memorial Day for unhoused persons and stated that an event was held at Fairfield Community Center. Brandon Wirth added that Orchard Baptist Church also held Vacaville's Homeless Person Memorial event on December 19, 2024.
- Katreena Dotson mentioned that Solano County Food Bank is holding their annual Food Fight to raise money for the hungry. Raffle tickets and food items were available for purchase.



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Regular Calendar

4) Approval of Minutes

Approval of the November 20, 2024, draft Minutes.

Discussion: None.

Motion: To approve the November 20, 2024, draft Minutes.

Motion by: Michael Brown and seconded by Deborah Hillman.

Ayes: Michael Brown, Ruth Forney, Gerald Hase, Annabelle Sanchez, Tracee Stacy, and Brandon Wirth.

Nays: None.

Abstain: Etta Cooper, Deborah Hillman and, Sandra Whaley.

Motion Carried.

5) Clinic Operations Reports

- a) **Staffing Update** — Dona Weissenfels (*Please reference the “FHS Staffing Update – December 18, 2024”*)
 - Dona Weissenfels reported that Natasha Hamilton, Health Services Clinic Manager, Senior (HSCM, Sr.), resigned in November. She added that recruitment has been opened to backfill the position. Dona explained that during Natasha’s duration with Family Health Services (FHS), she made a positive impact with the OCHIN Epic transition. Dona also announced that Vacaville Health Services Clinic Manager, Cynthia Coutee, will be the interim HSCM, Sr.
 - There were no questions from the Board.
- b) **Credentialing Update** — Cherry Violanda – (*Please reference the “FHS Credentialing, Provider Enrollment and Sanctioning Screening Activities – Status Report – December 2024”*)
 - Cherry Violanda stated that in November 139 providers were screened, with no exclusions found. She also stated that six providers were credentialing and two were re-credentialed.
 - There were no questions from the Board.
- c) **HRSA Grant Update(s)** — Noelle Soto – (*Please reference the “Health Resources and Services Administration (HRSA) Grant Updates – December 18, 2024”*)
 - Noelle announced that Family Health Services (FHS) is preparing the end of year Uniform Data System (UDS) Report for the February 15, 2025, deadline. She added that the 2024 Ryan White Services Report (RSR) Phase 1 deadline is February 3, 2025, and Phase 2 would be due by March 31, 2025. The Budget Justification for the Fiscal Year (FY) 2025 Health Center Program (HCP) Service Area competition (SAC) Competing Continuation application (H80CS04218) was presented to the Board for consideration and approval in the Business Governance section.
 - Tracee Stacy asked if Epic helps in this area. Noelle confirmed that Epic does create reports, including the UDS and UDS Plus updated metrics.
- d) **Grievances/Compliments** — Rebecca Cronk (*Please reference the “Grievance Reports, April-December 2023 & January– November 2024” and “Grievance Category Definitions”*)



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- Rebecca reported that 14 grievances were filed in November, primarily in the Scheduling category. She explained that the data is due to the Epic transition, as well as the clinics functioning at a lower capacity with appointments. Rebecca stated that scheduling was back at 100%, but comparing the data from 2023, the number of grievances were similar in number, but she did not have an analysis at that time. Rebecca added that most of the complaints were Level One; inconvenience, but no harm.
 - Brandon Wirth inquired about the other category of grievances filed. Rebecca explained that the other categories included facilities, lobby set-up, etc., stating that all were handled appropriately.
 - Tracee Stacy expressed concern and asked if the wait times were affecting the pediatric patients. Dona Weissenfels explained that she was unaware of any issues but assured the Board that all matters would be handled by Leadership and the Peds Supervising Physician, Dr. Michelle Stevens.
- e) **H&SS Compliance** — Krista McBride (*“FHS Compliance Incident Report Tracking, November 1-November 30, 2024”*)
- Krista McBride reported that there were no privacy or security breaches for the month of November. She did mention that an incident was filed due to a visitor falling in a County meeting room.
 - There were no questions from the Board.
- f) **Finance & Revenue Cycle Management** — Nina Delmendo (*Please reference the “Operations Report – Finance November 2024: “Solano County Expenditure and Revenue Report FHS – November 2024”.*) Finance Report
- Nina Delmendo stating that her team continued to work on the mid-year projections, which will show more clarity of where FHS will be at years end. The Finance Report presented to the Board was a comparison to the working budget.
 - Tracee Stacy asked about transportation services. Dr. Bela Matyas explained that Uber Health is offered to all patients that need transportation to and from the clinics. Tracee requested follow-up information on the budget history for those services, adding that there might be an opportunity for specialty care. Brandon reminded that Board that CHB meetings are not for operational matters. Tracee clarified that the topic is regarding programs and wanting a better understanding of the utilization of transportation services.
 - Ruth Forney asked if bus passes were still offered. Dr. Matyas confirmed that they are and added that Solano Transportation Authority (STA) is another resource, as well as taxi services.
- Revenue Cycle Report (A revised Revenue Cycle Report was handed out at the CHB Meeting)
- Whitney Hunter reported that in November scheduling went from 50% to 75%, increasing the number of encounters. She explained that scheduling will be at 100% December 1st, expecting more improvement. Whitney mentioned that the Fiscal Team was adjusting annual targets to reflect accurate activity, staffing levels, and scheduling. She noted that they had to reduce 31 encounters because of how the data was being retrieved from Epic.
 - Tracee asked how the change in encounters affects the budget, specifically if there will be a reduction. Nina clarified that revenues will be projected based on the actuals of the clinics, but no changes to appropriations, just updates will be made during the mid-year budget.
 - Brandon Wirth inquired about how to increase the encounters. Dona Weissenfels stated that her and Dr. Michele Leary were currently working on the matter; details would be discussed during her report.



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- g) **Referrals Report** — Cynthia Coutee (*Please reference the “Family Health Services Referrals – Time Period November 2024” and “Five Day History Dashboard – Number of Referral/Authorization Records, December 12-2-6-2024”*)
- Cynthia reported that in November there was 856 referrals, including 333 in Adult Specialties and 54 Pediatric Specialties. She explained that as of December 9th, there were 629 referrals in the Work Que and 1290 were deferred, pending Specialist Consultation Notes. Cynthia reiterated that when a referral is processed, it placed in “Deferred” status until the patient is seen by the specialist and Consultation Notes are received by the Referral Team and the referral can be closed. She mentioned that when the notes come back, that referral is placed back in the Work Que reassigned to the medical assistant (MA) that initially processed the referral. The MA would have to find the notes and attach before the referral can be closed. Although there were two (2) additional MA’s that assisted with referrals, due to the holiday season, staffing levels were low. Cynthia stated that she is addressed the matter and distributed the workload accordingly.
 - Cynthia also mentioned that she was currently working on staff production by ensuring that MA’s are assigning referrals to themselves, so they can receive credit for all the referrals that they are processing.
 - Tracee Stacy inquired about the tracking capability in Epic to streamline the referral process. Dona Weissenfels confirmed that there are many features in Epic that will be explored to automate and be more efficient. Dr. Bela Matyas added that the referrals are being handled quickly and the new system can automatically update the results in a patient’s medical record, closing the loop on referrals, so the current goal is to create a more organized process. Dona shared that La Clinica transitioned to Epic in 2020 and had been a vital resource for FHS. She stated that the Leadership Team had visited the clinics and hoped to mirror their referral process.
 - Ruth Forney asked about the types of specialty referrals that are being submitted. Cynthia stated that the top five specialties reflect on the report provided. Dr. Matyas mentioned that since the majority of FHS patients have Medi-Cal insurance, many of the specialty referrals are sent to Northbay. He added that FHS is looking to partner with other organizations for specialties, such as Sutter Health.
- h) **OCHIN EPIC Update(s)** —Dona Weissenfels
- Dona Weissenfels continued to report that the Epic transition has been going well and as expected, but there were a couple of hiccups. Billing has been an issue, but she stated that the matter was addressed and resolved. Dona mentioned that another problematic area was optimizing the scheduling templates since they are very different from NextGen, adding that it will be the focus for the next 60 days. Overall, she announced that for the next few months, the goal is to explore and identify the tools in Epic and implement the technology.
 - Dona also reported that Epic visited the FHS Dental Clinics in December to assist, as needed. In January, Epic will be on-site at the Medical Clinics to provide support.
 - Dona provided an update on the Dax Co-Pilot project that would assist providers with patient transcribing. Dragon NaturallySpeaking software had been used previously, but since the transition to Epic, FHS does not have a transcription service. Dax would increase productivity, provide quality records and provider satisfaction. She stated that she expects to have it in place by late January or early February 2025. Dr. Michele Leary confirmed that the Dax program is revolutionary and creates records in seconds, while removing any non-medical related



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conversation and provide a structure, that will allow for editing and only requires a mobile phone. She stated that a provider has the option to opt out of the AI feature.

- Brandon Wirth asked if the Dax program allows the provider to sign off on their notes and if Dental will be utilizing the software. Dr. Leary confirmed that it does sign off, while Dr. Reza Rajabian stated that the program will not be used in the Dental Clinics. Dona stated that it will alleviate administrative time, prevent record lag times and increase productivity. The goal is to have a minimum of 14 encounters for each provider. Dr. Leary explained the that implementation timeline in January will coincide with the scheduling going back to 100% will be a positive impact, allowing the provider to focus on the patient during the entire appointment and manage other tasks, like inbox. Dona added that the next phase will be sustainability.
 - Michael Brown asked if there were patient complaints for not being seen for multiple things in one visit. Dr. Leary explained that it is not uncommon for that issue but depends on the clinic and provider's schedule. She stated that if it is urgent, the appointment would be redirected. Dr. Leary stated that a middle ground would be one for the patient and one for the provider, such as patient being seen for a headache and the provider treating, then scheduling labs. She added that some medical centers are strict about that.
 - Dona mentioned prior to Epic, the clinics had a 35% no-show rate. That data calculated manually by Han Yoon, since NextGen did not have the capability. From September to December, data in Epic calculated a 23% no-show rate, crediting the Patient Portal and appointment texting technology. She explained that the data will be monitored and tracked over the next few months. Brandon asked about the National Average No-Show Rate. Dona clarified that Federally Qualified Health Centers (FQHC) range from 20-40% and 40% of FHS patients are homeless, so getting an appointment can be difficult for many.
- i) **QI Update** – Han Yoon – *(Please reference the “QIP Adult Measures – As of December 5, 2024 & “QIP Pediatrics Measures – As of December 5, 2024”)*
- Han Yoon presented two QIP Adult Measures (Chart 1) and QIP Pediatric Measures (Chart 2) graphs, explaining that the grey line is the “90% Target”, while the orange line is the “50%” and the blue line is what the clinics “Achieved”.
 - Brandon Wirth asked if Leadership discussed a plan to meet the targets by the reporting period. Dona stated that FHS met with Partnership Healthplan (PHC) and there was no big intervention, but patients’ records were being scrubbed and data uploading rapidly, so it reflects in the system. She mentioned that the Quality Assurance/Quality Improvement (QA/QI) Team is fully staffed and the four (4) employees are actively working on the measures.
 - Michael Brown inquired about the “90%” category. Dona clarified that it is difficult to achieve since it is known as the “Gold Standard”. To meet regulations, “50%” is the more realistic goal that shows PHC that FHS is working on meeting the measures. Dr. Bela Matyas explained that some measures are specific to small populations, like Lead Testing for ages five and younger, so they are harder goals to meet. He added that if a patient is healthy, there is no need to be seen by a doctor. Dr. Matyas suggested to encourage and schedule patients solely for the screening. Ruth Forney attested that as a patient of Kaiser, they reach out constantly to schedule physicals until she made the appointment. Dona mentioned that in January the QA/QI Team will be trained on interventions for outreach techniques.
- j) **FHS Clinic Q-Matic Stats** — Noelle Soto – *(Please reference the “Clinic Metrics – Queue Management (Q-Matic) Stats – December 18, 2024”)*
- Noelle Soto reported that due to the holidays and illnesses, as well as Touro providers being out of the office in December, the numbers are low, but was the trend from December 2023.



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- 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.

- No follow-up requested.

7) HRSA Project Officer Report

a) Health Center HRSA Project Officer Update – Dona Weissenfels

i) Health Center Activities – Internal and External Update

Internal and External News:

- Dona Weissenfels discussed the Expansion Grant, through HRSA, that would allow FHS to expand access to care by operating on Saturdays. FHS was expected to have an update in November, to go live in December, but no response was received. She hoped that funding was not getting pulled but stated that she will keep the Board informed.
- Dona mentioned that PHC was performing FHS clinic audits, starting in Vacaville. She noted that PHC changed their requirements prior to the audit, so the clinics did not have an opportunity to adjust, but the Vacaville Team still did a phenomenal job. Cynthia Coutee reported that she received a Correction Action Plan (CAP), which carries a response deadline. Cynthia added that she worked with Vallejo Health Services Clinic Manager, Rebecca Cronk, and work on the CAP items. Dona announced that Pierce Leavell will have his PHC audit in January for Fairfield Adult and Pediatrics clinics but noted that Cynthia and Rebecca can support. Pierce clarified that January will be spent gathering documents and prep for the audit in February.
- Brandon Wirth inquired about the finding process and consequences with not meeting the deadline. Dona explained that PHC can prevent new members enrollment, as an example, but assured the Board that the CAP items are achievable. Dr. Bela Matyas added that the consequence depends on the finding, for example, if it is a patient safety matter, the clinic could be shut down.
- Dona discussed the Strategic Plan-Goal 3 “FHS Will Implement a Compliance Program Specific to the Health Center”. She expressed that the goal has been ongoing, explaining that the 33rd Compliance Program does not have a Compliance Officer, just a manual from 2018 and there is 90+ audit points that are reviewed every three (3) years. Dona stated that there has been intense training to the HSCM’s and clinic staff to develop framework. There are vendors that can put FHS policies into their software and assist with providing tools and becoming HRSA compliant. She mentioned that one company FHS was considering is RegLantern. Although the last On-Site Visit (OSV) went well, even with the corrections that were identified, bringing in RegLantern would eliminate the need for Facktor Health’s consultation services. Dona added that FHS will still need guidance with the Strategic Plan and Community Needs Assessment but can coordinate internal training and tools to get organized without bringing in Facktor Health. She finished by saying that another goal will be presented at the February CHB Meeting and possibly review all the goals with the Board and make changes, as needed.
- There were no questions.



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8) Business Governance

- a) Review and consider approval of the Fiscal Year 2025 Health Center Program Service Area Competition Competing Continuation application – Noelle Soto
 - i) **ACTION ITEM:** The Board will consider approval of the Fiscal Year 2025 Health Center Program Service Area Competition Competing Continuation application

Discussion:

Noelle explained to the newer Board Members that the annual grant submission was to ask for continuous HRSA funding during the period of May 1, 2025 to April 30, 2028 for service administration, health care for the homeless and overall community health care population programs. Dr. Bela Matyas recalled 20 years ago FHS initially submitted a grant to HRSA, requesting to receive federal funding and operate as a health care for the homeless clinic, but later transitioned to a community health center. Although the grant funds keep the clinics open, encounters increase revenue to keep the clinics functioning. He further explained that it is considered a “Competing” application because the County could choose to stop clinic operations.

Motion: To approve the Fiscal Year 2025 Health Center Program.

Motion by: Tracee Stacy and Sandra Whaley.

Ayes: Michael Brown, Etta Cooper, Ruth Forney, Gerald Hase, Annabelle Sanchez, Tracee Stacy, Sandra Whaley, and Brandon Wirth.

Nays: None.

Abstain: Deborah Hillman.

Motion Carried.

- b) Review and consider approval of expanding FHS clinical scope of services. Request to add chiropractic services to all primary care sites and add Licensed Marriage and Family Therapy (LMFT) services to support the Pediatric Clinic – Dona Weissenfels
 - i) **ACTION ITEM:** The Board will consider approval of adding chiropractic services to all primary care sites (Vacaville, Fairfield, and Vallejo). In addition, the Board will consider approval of adding LMFT services to the Fairfield Pediatric Clinic.

Discussion:

Dona reminded the Board that by expanding services, the FHS clinics would qualify for a rate change through HRSA and the California Department of Health Care Services. She referred to the HRSA Change in Scope Assurances document that was included in the agenda packet. At the November 20, 2024 CHB Meeting, Dona reported that Wipfi Consultants recommended adding chiropractic and LMFT services to engage a triggering event. She asked for the Board’s approval for FHS to proceed with the next phase by ensuring all HRSA requirements are met before the Change of Scope process can begin. Once a contract is drafted, it will be presented to the Board for review and approval.



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Tracee Stacy inquired about the specificity of LMFT services and not Licensed Mental Health Clinician (LCSW) services. Dona and Dr. Bela Matyas explained that there are three (3) mental health categories: Psychiatrist, LCSW and LMFT eligible for a rate change. FHS already has an LCSW in the clinics and psychiatrists are difficult to contract. They went on to state there is a need for behavior health services with the pediatric population and pain management services in the primary medical clinics. Dr. Matyas stated that expanding said services will provide long-term benefits to the patients, as well as generating volume and revenue for the clinics. Dona also clarified that LMFT's can assist with screening, counseling, and "play" therapy.

Michael Brown asked if the LMFT and/or Chiropractor would see patients in FHS clinics. Dona and Dr. Matyas clarified that LMFT's would be treating patients by TeleHealth and Chiropractors would operate at the FHS clinics. Dona added that the clinics have space constraints and would work better for a Chiropractor vs. an Acupuncturist.

Brandon Wirth asked about possible risks with expanding services. Dona explained that the risk would be the inability to sustain operations, financially, and prevent care to the County's 30,000 patients, if adding services and receiving a rate change is not approved.

Tracee Stacy and Anabelle Sanchez also inquired about the need for those services and other opportunities for access. Dr. Matyas explained that the vendor serves other FQHC environments and can assist with reaching full volume within four to six months. He mentioned that PHC would allow FHS to be a referral site for all PHC clients. Lastly, Dr. Matyas emphasized that just being approved for a rate change, by simply adding the two (2) services to FHS, will close the deficit.

Motion: To approve the FHS clinical scope of services.

Motion by: Ruth Forney and Tracee Stacy.

Ayes: Michael Brown, Etta Cooper, Ruth Forney, Gerald Hase, Annabelle Sanchez, Tracee Stacy, Sandra Whaley, and Brandon Wirth.

Nays: None.

Abstain: Deborah Hillman.

Motion Carried.

- c) Review and consider approval of the 2025 Community Healthcare Board Calendar
i) **ACTION ITEM:** The Board will consider approval of the 2025 CHB Calendar.

Discussion: Nina Delmendo stated that the Sliding Fee Scale will need to move to January 2025 because the policy will need to be revised due to how OCHIN updates the rates.

Brandon Wirth asked if the item can be tabled to the January 15, 2025 meeting. Dona Weissenfels and Ruth Forney agreed. Kelly Welsh advised that, for documentation purposes, the Board files a motion to push the action item to January.



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Motion: To table the approval of the 2025 Community Healthcare Board Calendar to the January 15, 2025 CHB Meeting.

Motion by: Ruth Forney and Tracee Stacy.

Ayes: Michael Brown, Etta Cooper, Ruth Forney, Gerald Hase, Annabelle Sanchez, Tracee Stacy, Sandra Whaley, and Brandon Wirth.

Nays: None.

Abstain: Deborah Hillman.

Motion Carried.

9) Discussion

a) 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, Danielle Seguerre-Seymour to announce the appointments.

Brandon Wirth recapped that at the November 20, 2024 CHB Meeting nominations were discussed. He added that other Board Members had an opportunity to self-nominate at the current meeting.

Brandon announced that he was stepping down from Chair and nominated Michael “Mike” Brown. Mike accepted the nomination if there were no other nominees. Ruth Forney was nominated for Chair but did not accept. Danielle Seguerre-Seymour clarified that Tracee Stacy was also nominated for Chair, but did not accept. Mike Brown was the official candidate for Chair.

Danielle announced that Tracee Stacy was the only Board Member nominated for Vice Chair. Tracee Stacy was the official candidate for Vice Chair.

Danielle stated that no Board Member was nominated for Member At Large at the November meeting. Anthony Lofton (current Member At Large) was not in attendance for the November and December CHB Meetings and Mike mentioned that he moved. Brandon stated that the Board can move forward with another nomination since Anthony has not been present. Kelly Welsh added that in the By-Laws, it is not required to have the position appointed and referred to Dona Weissenfels. Dona clarified that Member At Large is necessary to be HRSA compliant and the By-Laws need to be reviewed and updated. Tracee and Brandon also asked for clarification. Kelly confirmed that the By-Laws do not state that the position is required and



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will need to be revised to reflect the Member At Large as a required office. Deborah Hillman asked about the role and Dona explained that the Board Member elected would provide patient perspective to the Board. Deborah Hillman self-nominated for Member At Large.

Brandon announced that Michael Brown is the candidate for Chair, Tracee Stacy for Vice Chair and Deborah Hillman for Member At Large.

Motion: To appoint Michael Brown for Chair, Tracee Stacy for Vice Chair and Deborah Hillman for Member At Large.

Motion by: Ruth Forney and Sandra Whaley.

Ayes: Michael Brown, Etta Cooper, Ruth Forney, Gerald Hase, Deborah Hillman, Annabelle Sanchez, Tracee Stacy, Sandra Whaley, and Brandon Wirth.

Nays: None.

Abstain: None.

Motion Carried.

b) Review of the Community Health Board By-Laws Officer Term of Service for the future agenda. Staff will create a grid with each Board Member's start date and term expiration prior to the discussion. Term length will be considered (expand from one to two years).

- Brandon Wirth addressed the topic, stating that future elected Officer's terms, currently annual (with a limit of four consecutive years), should be changed to a two-year term. Dona Weissenfels appreciated having Brandon and Mike Brown on the Executive Board for two consecutive years and encourages the change. The term will need to be discussed and decided by the Board.
- Tracee Stacy acknowledged Ruth Forney as the Chair for four years and referenced page 15 of the By-Laws. Ruth expressed that a one-year term is appropriate because she understood that life happens, and a Board Member may not be able to meet all Board obligations. Tracee directed a question to Kelly Welsh and she responded that language can be discussed when the By-Laws are being reviewed and added as an Action Item.

9) Board Member Comments

- Tracee Stacey requested to add a health care for the homeless presentation to the agenda.
- Etta Cooper announced that it was good to be back at the meetings and she apologized for being absent, adding that she was involved in a work-related accident. Etta stated that she was ok, but was still going through the recovery process. Dona Weissenfels mentioned while at Kaiser for her knee, Etta offered her assistance, so Dona extended her gratitude and offered her support.
- Brandon Wirth thanked Deborah Hillman for the card she presented to the Board at the start of the meeting.



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

DATE: January 14, 2025
TIME: 12:00 PM — 2:00 PM
Location: Multi-Purpose Room
2101 Courage Drive
Fairfield, CA 94533

The Meeting was adjourned at 1:49 PM.

Handouts in the Agenda Packet:

- CHB December 18, 2024 Meeting Agenda
- CHB November 20, 2024, draft Meeting Minutes
- Clinic Operations Report – FHS Staffing Update – December 18, 2024
- Clinic Operations Report – FHS Credentialing, Provider Enrollment and Sanctioning Screening Activities – Status Report – December 2024
- Clinic Operations Report – Health Resources and Services Administration (HRSA) Grant Updates – December 18, 2024
- Clinic Operations Report – Grievance Reports, April-December 2023 & January–November 2024” and Grievance Category Definitions
- Clinic Operations Report – FHS Compliance Incident Report Tracking, November 1- November 30, 2024
- Clinic Operations Report – Finance November 2024 – Solano County Expenditure and Revenue Report FHS – November 2024
- Clinic Operations Report – Revenue Cycle Report – November 2024 *REVISED*
- Clinic Operations Report – Family Health Services Referrals – Time Period November 2024
- Clinic Operations Report – Five Day History Dashboard – Number of Referral/Authorization Records, December 12-2-6-2024
- Clinic Operations Report – QIP Adult Measures – As of December 5, 2024
- Clinic Operations Report – QIP Pediatric Measure – As of December 5, 2024
- Clinic Operations Report – Clinic Measures – Queue Management (Q-Matic) Status, December 18, 2024
- HRSA Health Center Compliance Tools-RegLantern’s Services and Solutions
- Strategic Plan – Goal 3: FHS Will Implement a Compliance Program Specific to the Health Center
- County of Solano – Family Health Services Personnel Justification Table – FY 2025-2028 Health Center Program – Grant Number H80CS04218 – Support Year 21-23 – May 1, 2025 to April 30, 2028
- HRSA Health Center Program – Change in Scope Assurances
- Family Health Services – Community Healthcare Board 2025 Annual Calendar - Revised Draft