



County of Solano Community Healthcare Board

REGULAR GOVERNING BOARD MEETING MINUTES

Wednesday, April 16, 2025
In Person Meeting

Members Present:

At Roll Call: Michael "Mike" Brown, Etta Cooper, Marbeya Ellis, Ruth Forney, Charla Griffith, Gerald Hase, Deborah Hillman, Seema Mirza, Annabelle Sanchez, Tracee Stacy, and Brandon Wirth.

Members Absent: Rovina Jones, Anthony Lofton, Don O' Conner, and Sandra Whaley.

Staff Present: Cherry Violanda, Cynthia Coutee, Dona Weissenfels, Dr. Cameron Kaiser, Dr. Michele Leary, Emery Cowan, Han Yoon, Kelly Welsh, Krista McBride, Nina Delmendo, Noelle Soto, Pierce Leavell, Whitney Hunter, Danielle Seguerre-Seymour, and Katreena Dotson.

1) Call to Order – 12:08 PM

- a) Welcome
- b) Roll Call

2) Approval of the April 16, 2025, Agenda

Discussion: None.

Motion: To approve the April 16, 2025, Agenda.

Motion by: Brandon Wirth and seconded by Deborah Hillman.

Ayes: Michael "Mike" Brown, Etta Cooper, Marbeya Ellis, Ruth Forney, Charla Griffith, Gerald Hase, Deborah Hillman, Seema Mirza, Annabelle Sanchez, Tracee Stacy, and Brandon Wirth.

Nays: None.

Abstain: None.

Motion Carried.

3) Public Comment

- No public comments.

Regular Calendar

4) Approval of Minutes

Approval of the March 19, 2025, draft meeting minutes.

Discussion: Annabelle Sanchez mentioned that her comment on page 4 of the March 19, 2025 CHB Meeting Minutes was incorrect. Under the OCHIN EPIC Update(s) Report, she asked if



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patient scheduling was generating appointments, however, the Minutes stated, “generating revenue”. Tracee Stacy requested clarification for what Annabelle was asking during the March 19th CHB Meeting, asking if her intent was to inquire about Epic generating more capacity to see more patients. Tracee added that it is not a system capacity issue, but that the human capacity was a barrier to seeing more patients. Dona Weissenfels stated that both were contributing factors. Brandon Wirth asked if the Minutes were created using the recording. Danielle Seguerre-Seymour confirmed that the recordings are used to draft the Meeting Minutes, but individual statements are not written verbatim. He then asked if the wording could be corrected using actual verbal recording. Danielle explained that the recordings are transcribed, but do not pick up word-for-word. Kelly Welsh commented that the Meeting Minutes can be corrected if conversations were misheard by the Clerk. Mike Brown asked Danielle to confirm Annabelle’s intent in the March 19, 2025 Meeting Minutes. Danielle summarized that Annabelle was inquiring about the capacity to generate more appointments, not revenue. Annabelle agreed and added that the transition to Epic was to improve the scheduling.

Motion: To approve the April 19, 2024, draft meeting minutes.

Motion by: Marbeya Ellis and seconded by Annabelle Sanchez.

Ayes: Michael “Mike” Brown, Etta Cooper, Marbeya Ellis, Ruth Forney, Charla Griffith, Gerald Hase, Deborah Hillman, Seema Mirza, Annabelle Sanchez, Tracee Stacy, and Brandon Wirth.

Nays: None.

Abstain: None.

Motion Carried.

5) Clinic Operations Reports

a) **Staffing Update** — Danielle Seguerre-Seymour (*Please reference the “FHS Staffing Update – April 16, 2025”*)

- Danielle Seguerre-Seymour reported that two Registered Nurses (RN) were close to finishing their background and the Dental Assistant’s background was completed, start date to be determined. She mentioned that a Physician Assistant started earlier that month, while four Medical Assistants were starting on April 28th for Chiropractic, Call Center and direct patient care. Danielle stated that two part-time Licensed Marriage & Family Therapists (LMFTs) were working between Family Health Services (FHS) and Behavioral Health (BH); two Chiropractors started services in the clinics; as well as a Nutritionist from Public Health (PH) who would be working in FHS soon. Lastly, Danielle reported that the Health Service Clinic Manager, Senior (HSCM Sr.) interviews were still ongoing and two Nurse Practitioners and three Physician Assistants candidates from UHC Solutions were in the early hiring stages. Dr. Michele Leary added that interviews and tours were taking place and offers were extended. Dona Weissenfels informed that Board that two PH employees were assisting the front office in the Fairfield Adult



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Clinic with registration. She also mentioned that there were four (4) top HSCM Sr. candidates that would be interviewed in May, then a selection will be made.

- b) **Credentialing Update** – Cherry Violanda (*Please reference the “FHS Credentialing, Provider Enrollment and Sanctioning Screening Status Report – April 2025”*)
- Cherry stated that 141 candidates and employees were screened for the month of April. She acknowledged that March’s report was pending Sanction Screening Exclusions. She reported that no exclusions were found.
 - Mike Brown asked what kind of problems the Credentialing Team experiences when interviewing individuals. Cherry confirmed that the screening does not include interviewing the candidates/employees, rather collecting and reviewing documentation required for credentialing and re-credentialing. She added that a spreadsheet is utilized to track the progress, since there is no formal system in place.
- c) **HRSA Grant Update(s)** – (*Please reference the “Health Resources and Services Administration (HRSA) Grant Updates – April 16, 2025”*)
- The HRSA Grant Updates Report stated that Phase 1 and 2 for the 2024 Ryan White Services Report (RSR) was completed. Data summary would be presented to the Board when the RSR is accepted by HRSA.
 - The 2024 Uniform Data System (UDS) Phase 1 and 2 were also completed and will be presented when it is accepted by HRSA. Nina Delmendo had nothing more to report.
- d) **Grievances/Compliments** – Pierce Leavell (*Please reference the “Grievance Reports, April-December 2023; January– December 2024 and January-March 2025” and “Grievance Category Definitions”*)
- Pierce informed the Board that 3 grievances were filed in March.
 - There were no questions from the Board.
- e) **H&SS Compliance** – Krista McBride (*“Department of Health & Social Services-Administration Division: Compliance & Quality Assurance-CHB Incident Report Update-March 2025”*)
- Krista mentioned that one incident was reported by Medical Services, under the Safety/Workforce category, citing possible Tuberculosis (TB) exposure. She added that the matter was referred to the FHS Leadership Team and had since been resolved.
 - Brandon Wirth commented that he was unaware that possible TB exposure is a reportable incident. Dr. Cameron Kaiser stated that reporting possible exposure for compliance purposes, would be considered unusual. Tracee Stacy inquired about regular TB testing. Dr. Kaiser confirmed that employees are required to test for TB, while patients are not tested preventively. Tracee asked about the risk of exposure while waiting for the results of another. Dr. Kaiser stated that there are two forms of TB: Active Tuberculous, that can spread, and Latent Tuberculous is an early form where bacteria is present but not contagious, so testing is determined by who is involved. Brandon and Tracee clarified that as external agencies, they are not asking for the incident details, but want to have a better understanding and follow protocol. Dr. Kaiser reported that Solano County is considered slightly above average in the State last year, having 20 to 30 active cases.
- f) **Finance & Revenue Cycle Management** – Whitney Hunter (*Please reference the Operations Report – Finance March 2025: “Solano County Expenditure and Revenue Report FHS – March 2025” and “Solano County FHS Revenue Cycle Report – Total Encounters – Through March 31, 2025”*)



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Finance Report

- Tracee Stacy asked if the increase in the “Professional Licenses & Memberships” category was due to hiring or related to Epic. Nina Delmendo explained that the Working Budget started with close to \$28,000, but during the Mid-Year Budget review, fiscal projected a lower amount, so actuals resulted in appropriations.

Revenue Cycle Report

- Whitney Hunter reported that the increase in encounters was due to better efficiency in OCHIN Epic. Overall, she stated that encounters improved more recently versus pre-Epic, adding that the locums were also a contributing factor.
- Brandon Wirth praised FHS for being busy and increasing the encounters. Tracee inquired about reimbursements and how it is affecting Epic. Nina could not attest to issues with cash flow but explained that FHS receives capitation payments from Partnership Healthplan (PHC), payer revenues, as well as Medi-Cal reimbursements. Tracee asked about next years proposed budget and Nina explained that the budget was not finalized but expects to present it in May or June.
- Tracee also mentioned holding a special CHB meeting to review and ask questions about the budget. Nina acknowledged the request and would be willing to have a separate meeting for the Board and stated that holding it last Fall was not viable due to the Epic transition. She also informed them that the County wants to work with FHS to meet the needs and create a realistic budget but is cautious due to the state of the economy and the unknowns of the federal funding. Ruth Forney stated that budget workshops were held in the past to allow the Board to review the information and have a better understanding of the financial aspect. As a newer Board Member, Marbeya Ellis commented that she was unaware of the Board’s role and influence with the process. Kelly Welsh referenced the Co-Applicant Agreement and the outlined duties between the County and Board. She encouraged the Board Members to ask questions during the scheduled CHB Meetings. Tracee clarified that she is requesting to meet and be educated on their roles for the future, not to change what is current. Mike Brown agreed to the separate meeting and inquired about upcoming Fall. Nina reminded the Board that the presented budgets include expenses like staffing, services and supplies are based on the needs of the clinic. While some factors are out of the County’s control, is typically straightforward and if the Board requests additional funding for the clinic, it will be considered.
- Emery Cowan acknowledged and addressed the Board Members comments and concerns regarding the budget. She suggested allocating time during the May 16, 2025 CHB Meeting, to discuss further, so there are no surprises when the budget is presented in June.
- Brandon referred to The Bylaws of the County of Solano Community Healthcare Board, Article 2: Responsibilities, bullet point 4 “Monitoring the financial Status of the health center, including reviewing financial status reports and results of the annual audit, and recommending that appropriate follow actions are taken”, as well as The FQHC Co-Applicant Agreement, Page 2, D: Approval of the Annual Budgets and Audits “The BOARD shall approve the Health Center’s annual operating and capital budget and audits, subject to the limitations herein”. He explained that the Board has a right to be involved in the process, to have a voice and document a process during the phases of the budget and before it is presented to the Board of Supervisors. Kelly referenced Page 7, 3.1: “Budget Development and Approval”, explaining that the Board has the authority to approve the annual operating and capital budgets, but within the parameters of what the County is providing them, in the budget. Tracee asked what happens if the Board does not approve the budget. Kelly stated that there would be a Dispute Resolution. Tracee and Brandon emphasized that the Board wants a voice and to be able to work with the County on a



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process of determining financial priorities through discussion. Nina confirmed that Dona communicates Board priorities and goals to fiscal and are those priorities are considered. She also stated that the budget process moves quickly, so it is best to hold a budget workshop in the Fall.

- Ruth mentioned that there have been a few new Board Members that have not participated in a budget workshop, but stated that when the workshop was held, it was not widely attended by Board Members. Nina advised the Board that fiscal methodologies and updates will be shared at the May 16, 2025 Meeting.
- g) **Referrals Report** — Cynthia Coutee (*Please reference the “Family Health Services Referrals – Time Period March 2025”*)
- Cynthia reported that 1,260 referrals were submitted in March, that included 1045 for Adult, 215 for Pediatric, as well as 606 specialty referrals. As of April 8th, there were 1,191 referrals in que and 4,561 referral pending Consultation Notes. Cynthia added that referrals are being processed 22 days out and 587 referrals were completed over three Saturdays, with three referral workgroups. She mentioned that one referral Medical Assistant returned from maternity leave and is contributing to the referral processing efforts.
 - There were no questions from the Board.
- h) **OCHIN EPIC Update(s)** — Dona Weissenfels
- Dona reported that she attended the OCHIN Member Learning Forum, a three-day virtual conference. The community of OCHIN Users attending the event discussed how AI is improving the industry. She explained that OCHIN negotiated Dax Co-Pilot (medical AI transcribing and recording) and lowered the licensing price by half. Dona explained that the pricing will be more affordable and will lower FHS budget costs.
 - Dona mentioned that the clinics will be implementing Dax Co-Pilot soon but tested the software and noted that it drastically made visits more efficient, resulting in provider satisfaction and staff retention. She also stated that the current app and desktop management system, Citrix, will soon transition to another platform, with the assistance of DoIT.
 - Dona informed the Board that FHS is currently in the maintenance phase of OCHIN Epic, while still learning about the system. She explained that providers have inboxes that hold a vast amount of patient information such as labs, referrals, consult notes and external data. There is a disadvantage of managing the boxes, but Epic will be utilizing AI tools to help with time management.
 - Annabelle Sanchez asked if the Epic system was helping with the clinic measures. Dona confirmed that Dr. Michele Leary is heading a project in Epic to flag a patient’s record if a screening is due, so that MA’s do not have to dig for the information. She added that the metrics and scores will be captured in the system.
- i) **QI Update** – Han Yoon (*Please reference the “2025 Modified QIP”*)
- Han reminded the Board that FHS was placed on a Corrective Action Plan (CAP) by PHC as a result from the low 2024 quality scores. He referred to the graphs in the “2025 Modified QIP” report that focused on the four PHC-assigned measures: Cervical Cancer Screening, Breast Cancer Screening, Well Child (6x 15 Months), and Annual Well Child Visits (3-17), and stated that the data was as of April 1st.
 - Tracee Stacy asked for clarification on the report graphs. Han explained that each measure has a graph with a Target Line, Achieved Line and Target with No-Shows Line, as well as the actuals from January to March. Han stated that the numbers/goal changes every month, as PHC adds



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and/or removes patients. Deborah Hillman asked if 730 represented the number of patients, which Katreena Dotson confirmed, but followed up by stating that the number was over a three-year period, not over a month's time.

- Annabelle Sanchez requested for the report to show a denominator with the numerator. Dona Weissenfels reminded that Board that the goals change each month, but Han would provide the adjustment. Tracee asked if the goals were created after the meeting with PHC on March 19, 2025. Han and Dona Weissenfels confirmed, adding that the numbers to meet are the same, but narrowed it to the four measures referenced in the report. Dona mentioned that PHC has been supportive and had provided resources to help meet the goals.
- Han reported that patient scheduling had been double, and triple booked to account for the high no-show rate. The QA/QI Team was also reviewing records of scheduled patients, for other screening opportunities. Dona explained that since the Breast Cancer Screening measure requires FHS to refer its patients to Northbay, Sutter and Alinea Mobile for their mammograms, promotion and communication by FHS is important. Han informed that board that Alinea will be providing services in Fairfield on June 2nd and in Vacaville on June 6th. He will also be looking into Sutter for the mobile services.
- Mike Brown asked about tracking patient appointments and attendance. Dona stated that the Referral Team is responsible for following up and closing the loop, while it is the QA/QI Team's job to make sure patients are attending their appointments. Deborah Hillman asked if assigning an employee to follow up for the screenings would help the process. Dona reported that she created "Project Champion" roles within the QA/QI Team, and each employee is solely responsible for one of the measures, strategizing and overseeing the progress. Ruth Forney asked if Epic's technology helps with patient outreach. Dona stated that the Patient Portal is in place for communication, however, only 17% of patients are enrolled. She added that FHS is utilizing Artera for automated calling with appointment reminders, updates and outstanding screening reminders. Dona reported that Katreena Dotson also assists with patient outreach and scheduling.
- Annabelle asked how the appointment is counted towards the measure. Han explained that the patient must attend the appointment (creating an encounter) for it to count towards the goal.
- Tracee inquired about how PHC calculates the goal and if the measure is obtainable. Dona confirmed that the measures are determined by The National Committee for Quality Assurance (NCQA).
- Han reported on the well child visits measure and Dr. Leary explained that it is a hard measure to meet because kids who are on Medi-Cal do not always stay with one doctor during their 13-month period. She stated that the best chances to be successful is to begin care when they are newborns.
- Mike inquired about the immunization measure and Tracee asked about the consequences if the goal is not met. Dona and Dr. Leary clarified that immunizations are still a QA/QI initiative but was not part of the currently alternative QIP program. Dona added that PHC can end FHS' contract as a result of not meeting the measures.
- Han reviewed the adolescence measure and initially reported that there were 7,500+ patients with 739 patients added to the metrics but clarified that 4,300 was the patient denominator. Charla Griffith asked if FHS has the capacity to meet the goal. Dona informed the Board that FHS will be diligent and take initiatives by implementing Saturday Clinic for the next few months and partnering with Public Health but will likely not meet the goal. Marbeya Ellis mentioned that as a school district employee, she attested that families are facing barriers and challenges of getting



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appointments for students and offered to collaborate with FHS to close the gap. Annabelle asked if those children are being referred to other County outreach programs in PH. Marbeya confirmed that the school district resource center partners with PH, but families who are unhoused tend to miss their appointments. She stated that it is more efficient to offer a multitude of services at the resource center. Tracee inquired about PHC assigning the more difficult measures. Dona reported that there is a formula that PHC uses to calculate the measures and goals. She could not provide additional information but mentioned that it's part of FHS' contact and the expectation is a 15% improvement rate requirement.

- j) **FHS Clinic Q-Matic Stats** — Noelle Soto – *(Please reference the “Clinic Metrics – Queue Management (Q-Matic) Stats – April 16, 2025”)*
- Noelle Soto referred to the Clinic Metrics – Queue Management (Q-Matic) Stats report.
 - 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.

- Dona asked if the revised format of the H&SS Compliance report meet the Board's requirements. Brandon Wirth agreed that the report was adequate.

7) HRSA Project Officer Report

a) Health Center HRSA Project Officer Update – Dona Weissenfels

i) Health Center Activities – Internal and External Update

Internal News:

- Dona announced that PHC was wrapping up with clinic and medical records audits, most recently in Fairfield. She acknowledged Pierce for leading the staff in prepping the Pediatric and Adult clinics for the site visits. She explained that since the transition from NextGen to Epic occurred in 2024, PHC will be reviewing both systems' records.
- Dona recapped her participation in the OCHIN Epic conference, expressing the positive impact the AI component will be in Epic.
- Dona reported that the Vacaville Chamber of Commerce has a community leadership program and invited her and Cynthia Coutee to attend, for a second year. They discussed FHS as a Federally Qualified Health Center (FQHC), the patient population they serve and the role that the clinics have in Solano County. Dona mentioned that 15 other members were from Kaiser.
- Dona also announced that Mallory from Facktor Health has joined FHS through the end of June 2025 to assist with patient scheduling. Since her arrival, schedules have improved and are at 1.7 visits per hour. Dona expects to see scheduling improvements at all sites and thanked Dr. Michele Leary and her Team.
- Dona informed the Board that four (4) Health Services Clinic Manager Senior candidates would be meeting with Chief Deputy Health Officer, Dr. Bela Matyas, and Deputy Health Officer, Dr. Cameron Kaiser on May 8th and hopes to have a candidate selected at that time. She praised Cynthia for acting as interim HSCM Senior, while overseeing the Vacaville Clinic. Dona also reported that Patricia Zuniga's position request has not been approved but will be reclassified as an Office Assistant III position.



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- Dona added that the last priority was assembling the Quality Team and focus on the PHC-assigned measures.
- Dona mentioned that the Strategic Plan has been continuously discussed, providing status updates and requesting revisions, as needed. She reported that goals established by the Board are advocated and brought to the County. Dona requested that a separate meeting be held to review and refresh the Strategic Plan, ensuring that the Board Members are part of the process.
- Annabelle Sanchez inquired about the triggering event and asked if a utilization percentage is required. Nina Delmendo confirmed that it was, explaining that there are productivity standards by provider level, determined by the California Department of Health Care Services (DHCS). She did clarify that Chiropractors and LMFT's are not subject to the standards, while physicians, physician assistants and nurse practitioners are, but it is included in the calculations.

External News:

- Dona informed that Board that FHS is working on a budget resolution, while staying current on federal funding updates and information regarding Medi-Cal cuts. She stated that FHS has internal strategies like adding chiropractic and LMFT services in the clinics, as well as pursuing a rate change through HRSA. Dona stated that Fiscal will be completing the 1000+ page application and will work with Wipfli to facilitate and submit this Fall. FHS should have an update by Spring of 2026. She also mentioned the Alternative Payment Method (APM) is still an option but coincides with having a rate change. Tracee Stacy asked if the rate change would be retroactive. Nina confirmed that once the application is approved, it will be effective from the application submission date.

8) Business Governance

- a) Review and consider approval of the Quarterly Financial Report – Nina Delmendo
 - i) **ACTION ITEM:** The Board will consider approval of the Quarterly Financial Report.

Discussion: None.

Motion: To accept and the approve the Quarterly Financial Report.

Motion by: Tracee Stacy and seconded by Ruth Forney.

Ayes: Michael "Mike" Brown, Etta Cooper, Marbeya Ellis, Ruth Forney, Charla Griffith, Gerald Hase, Deborah Hillman, Seema Mirza, Annabelle Sanchez, Tracee Stacy, and Brandon Wirth.

Nays: None.

Abstain: None.

Motion carried.



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b) Review and consider approval of the Monthly Quality Improvement Report – Han Yoon

i) **ACTION ITEM:** The Board will consider approval of the Monthly Quality Improvement Report.

Discussion: None.

Motion: To accept and the approve the Monthly Quality Improvement Report.

Motion by: Ruth Forney and seconded by Brandon Wirth.

Ayes: Michael “Mike” Brown, Etta Cooper, Marbeya Ellis, Ruth Forney, Charla Griffith, Gerald Hase, Deborah Hillman, Seema Mirza, Annabelle Sanchez, Tracee Stacy, and Brandon Wirth.

Nays: None.

Abstain: None.

Motion carried.

c) CHB Executive Committee update – Board Membership Bylaws review

Discussion: Mike Brown referred to Article IV: Members of the Bylaws. He mentioned that the article review was to address Board Members who have missed several meetings. Tracee clarified that the Board would discuss what steps to take to remove Anthony Lofton as a Board Member. She announced that she ran into him and inquired about remaining on the Board but did not get a confirmed response. Ruth Forney mentioned that she had not seen Etta Cooper in the last few meetings and Don O’Conner had also missed meetings. She asked if anyone has attempted contact with Don. Etta explained that she had been communicating with Danielle Seguerre-Seymour. Danielle confirmed communication with Don, stating that, due to his health, he can no longer sit through the CHB meetings. Ruth announced that the Board is required to be 51% Patient Board Members. Mike informed the Board that a letter will be drafted and sent out to Anthony and Don’s last known address. Deborah asked how many Board Members need to be patients. Danielle confirmed that Etta Cooper, Charla Griffith, Gerald Hase, Deborah Hillman, Rovina Jones, Seema Mirza, Anthony Lofton, and Don O’ Conner are classified as Consumer Members. Brandon Wirth stated that it will need to be added to next meeting’s agenda as an Action Item.

9) Discussion

- a) Collection of completed Project Officer/CEO evaluations
 - Mike Brown reminded the Board to submit their completed evaluations.
- b) CHB Self-Assessment Form review
 - Mike reminded the Board to submit their completed forms.
- c) Board Training Webinar Purchase update – Dona Weissenfels



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- Dona reported that the deadline for purchasing had already passed but will provide an update in a couple of months.
- d) NACHC Conference – Chicago, IL
- Tracee Stacy informed Ruth Forney that there is no funding available to expense the trip. Nina Delmendo asked when the conference was, and Dona confirmed that it would be held in August. Nina stated that it would be under the 25/26 budget.

10) Board Member Comments

- Etta Cooper apologized for her absence, explaining that she was displaced and living in her car but reported that she recently found housing. Mike Brown asked if she used County resources to find her apartment. Etta confirmed that a friend informed her of a new apartment complex.
- Tracee Stacy referenced the flyer that was provided at the meeting, announcing that the Generations of Strength event would be held on May 14, 2025 and encouraged people to attend. Etta mentioned the Hope event in Fairfield.
- Mike informed the Board that a patient could not get help at Sutter and Kaiser, so the Vallejo FHS clinic was recommended. Deborah Hillman praised the FHS clinics. Annabelle added that she will continue to advocate for the clinics and be involved in the process.

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

DATE: May 21, 2025
TIME: 12:00 PM — 2:00 PM
Location: Multi-Purpose Room
2101 Courage Drive
Fairfield, CA 94533

The Meeting was adjourned at 2:05 PM.



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Handouts in the Agenda Packet:

- CHB April 16, 2025 Meeting Agenda
- CHB March 19, 2025, draft meeting minutes
- Clinic Operations Report – FHS Staffing Update – April 16, 2025
- Clinic Operations Report – FHS Credentialing, Provider Enrollment and Sanctioning Screening Status Report – April 2025
- Clinic Operations Report – Health Resources and Services Administration (HRSA) Grant Updates – April 16, 2025
- Clinic Operations Report – Grievance Reports, April-December 2023, January–December 2024 & January-March 2025
- Clinic Operations Report – Grievance Category Definitions
- Clinic Operations Report – Department of Health & Social Services-Administration Division: Compliance & Quality Assurance-CHB Incident Report Update-March 2025
- Clinic Operations Report – Finance March 2025 – Solano County Expenditure and Revenue Report FHS
- Clinic Operations Report – Revenue Cycle Report – March 2025 – Solano County Family Health Services Revenue Cycle Report – Total Encounters Through March 31, 2025
- Clinic Operations Report – Family Health Services Referrals – Time Period March 2025
- Clinic Operations Report – 2025 Modified QIP
- Clinic Operations Report – Clinic Metrics – Queue Management (Q-Matic) Stats – April 16, 2025
- Flyer – Generations of Strength – Embracing BIPOC Diversity in Mental Health Summit