

The County of Santa Cruz

Integrated Community Health Center Commission

MEETING AGENDA

April 5, 2022 @ 3:00 pm

MEETING LOCATION: Microsoft Teams Meeting or call in (audio only) [+1 916-318-9542](tel:+19163189542), [500021499#](tel:+19163189542) United States, Sacramento Phone Conference ID: **500 021 499# / 1080** Emeline Ave., Bldg. D, Santa Cruz, CA 95060

ORAL COMMUNICATIONS - Any person may address the Commission during its Oral Communications period. Presentations must not exceed three (3) minutes in length, and individuals may speak only once during Oral Communications. All Oral Communications must be directed to an item not listed on today's Agenda and must be within the jurisdiction of the Commission. Commission members will not take actions or respond immediately to any Oral Communications presented but may choose to follow up at a later time, either individually, or on a subsequent Commission Agenda.

1. Welcome/Introductions
2. Oral Communications
3. March 1, 2022 Meeting Minutes – Recommend for Approval
4. 100-Day Challenge working with people experiencing homelessness at encampments – Joey
5. Quality Management Update
 - Ryan White Program
 - Hazardous Vulnerability Assessments
6. Social Justice
7. Financial Update
8. CEO/COVID-19 Update

Action Items from Previous Meetings:

Action Item	Person(s) Responsible	Date Completed	Comments
was asked by one of the commissioners if there was a form that acknowledge an employee's great service.	Raquel		
Commission would like a report back on recruitment practices as it relates on seeking diverse candidates.	Amy		

Next meeting: May 3, 2022 3:00pm - 5:00pm

Meeting Location: Microsoft Teams Meeting Or call in (audio only) [+1 916-318-9542](tel:+19163189542), [500021499#](tel:+19163189542) United States, Sacramento Phone Conference ID: **500 021 499# / 1080** Emeline Ave., Bldg. D, Santa Cruz, CA 95060

The County of Santa Cruz Integrated Community Health Center Commission

Minute Taker: Mary Olivares

Minutes of the meeting held April 5, 2022.

TELECOMMUNICATION MEETING: Microsoft Teams Meeting - or call-in number +1 916-318-9542 – PIN# 500021499#

Attendance	
Christina Berberich	Chair
Caitlin Brune	Member at Large
Rahn Garcia	Member
Dinah Phillips	Member
Marco Martinez-Galarce	Member
Kim "Coach" Campbell	Member
Ardella Davies	Member
Amy Peeler	County of Santa Cruz, Chief of Clinic Services
Jennifer Phan	County of Santa Cruz, Health Services Manager
Joey Crottogini	County of Santa Cruz, HPHP Health Services Manager
Julian Wren	County of Santa Cruz, Admin. Services Manager
Mary Olivares	County of Santa Cruz, Admin Aide
Meeting Commenced at 3:08 pm and Concluded at 4:56 pm	
Excused/Absent:	
Absent: Gidget Martinez Absent: Michelle Morton Excused: Len Finocchio Excused: David Willis	
1. Welcome/Introductions	
Introductions were done at this time.	
2. Oral Communications:	
3. March 1, 2022, Meeting Minutes - Action item	
Review of March 1, 2022, Meeting Minutes – Recommended for Approval. Caitlin moved to accept minutes as presented. Kim second, and the rest of the members present were all in favor. Rahn abstained from voting as he was not at the previous meeting.	
4. 100-Day Challenge working with people experiencing homelessness at encampments	
Joey stated they are working with various agencies to address the 100-day challenge this is in relation to working with people that are experiencing homelessness specifically at encampments. Joey stated this is a statewide effort and he is working with an organization called Home Base, this organization helps facilitate the discussions. Joey stated that the leadership team includes himself, Human Services Dept., and local stakeholders. He stated the first goal was to house 40 people in 100 days including 10 individuals that are undocumented. Joey reported they were the only group that included any mention of undocumented individuals. Joey also mentioned that this is important because any funds related to the Department of Housing and Urban Development are not granted to anyone that is undocumented you must have citizenship status, and that it's extremely difficult to find ways to house people that are undocumented. One of the things they have gained through this process is new partnerships with mutual aid networks. Joey stated although they did not meet their goal, he wanted to highlight they did a lot of collaboration with different agencies in a way they have not done in the pass and hopes to maintain the collaborative effort.	
5. Quality Management Committee Update	
<ul style="list-style-type: none"> • Ryan White Program • Hazardous Vulnerability Assessments 	
Jennifer reported on the Ryan White Part C program. She stated the Ryan White Part C provides grant dollars to our health centers to help develop, enhance, and expand access to high-quality HIV primary health care services for people with HIV. She stated the core team consists of 4 clinicians specializing in HIV care, 2 case managers (1 Public Health Nurse & 1 Sr. Social Worker), & 1 Health Services Manager. She stated the Clinical Quality Improvement (CQI) Meetings occur on the 2 nd Wednesday of every month & that includes Medical Directors, Health Services Manager, HIV Clinicians, Case Managers, & Data Support Specialists. The CQI subcommittee group meets on the 4 th Wednesday of every month to review QI topics in further detail. Some of the recent Quality Management Projects they are working on are: The current CQI measure definitions	

for HRSA's HIV/AIDS Bureau performance measure portfolio definitions & made adjustments as needed. The purpose was to ensure they are in alignment with HRSA's grant requirements and are following best practices. She recently submitted the Ryan White HIV/AIDS Program Services Report, this is due to HRSA every year in March. The purpose is to inform HRSA of what services are providing & who we are serving. This helps HRSA determine our funding amount. Jennifer reported on the many current & ongoing projects they are working on. Jennifer also reported on the Hazards Vulnerability Analysis (HVA). The HVA fulfills requirements for the Centers of Medicare & Medicaid Services (CMS) Emergency Preparedness Rule, HRSA, & the Santa Cruz County Health Care Coalition (HCC) membership. This assessment serves as a needs assessment tool for emergency planning and preparedness, and helps inform us of what exercises & drills we may need to prioritize in the upcoming year for our health centers. Each health center completes its own HVA typically during the first 3 months of each calendar year. Once completed the HVAs will be submitted to our HCC upon request. Jennifer stated this is a systematic approach to recognize, identify, & rank top hazards that may significantly impact health center operations and we are currently using Kaiser Permanente HVA tool. The tool helps analyze human, property, & business impacts to assess risk factors. The risks associated with each hazard are analyzed to prioritize planning, mitigation response, and recovery activities. Jennifer reported on each individual clinics top three hazards.

6. Social Justice

Caitlin invited everyone to the self-directive learning that she e-mailed out the commission. Caitlin would like the commission to reflect on the presentation that was done last year from non-profit Esperanza Community Farms. Mireya and Guillermo, talked about the organization's efforts to increase food justice and food sovereignty in South Santa Cruz County via a few-acre community farm and a subscription produce program that nourishes families in the greater Watsonville area. At this point Caitlin opened the conversation of food insecurities and climate crisis. Lastly, Caitlin also stated that David Willis is taking a break and she will be in conversation with him.

7. Financial Update

Julian reported on data through Jan 28, 2022

- **Clinic Estimated Actuals:** He stated the final proposed budget is submitted in February. Julian stated throughout the year he looks at trends in terms of spending and revenue that is coming in so he could let the CAO's office know what he thinks might happen that coming year. Throughout the year he does a projection based on grants that we receive and estimates how much money, looks at visit trend data, and looks at spending including salary and benefits. About 4-5 times a year he does an estimate actual this goes up and down throughout the year. Currently we are at \$450,161.00 this indicates we may have spent more than the revenue coming in. He met with the Health Center Managers to do some deep dive on spending.
- **COVID-19 FEMA Spending FY 22** – This report identifies spending from grant funding and FEMA reimbursements. Actuals are at about \$765,114.37 non reimbursable funding, and FEMA reimbursable funding is at \$57,947.92.
- **Integrated Behavioral Health Visits:** Visits are increasing, billing is at 47 days in turnaround. The goal is 30 days.
- **Santa Cruz Health Center:** Visits have continued to increase.
- **Watsonville Health Center:** Staff at this clinic is larger than Emeline Clinic. They are also continuing to increase.
- **Homeless Persons Health Project:** There are space issues but doing well. Mobile unit is averaging about 30 visits a month.
- **North and South County Comparison:** Report shows a side-by-side view. Includes acupuncture, ortho and provider visits.
- **All Clinics:** Some clinics are having difficulties in terms of keeping up with visits, we anticipated this.

Bring Back at future Meeting - Include difference between budget approved by CAO office and our EA's

8. CEO/COVID-19 Update

Amy was pleased to announce that Kim Coach Campbell was nominated to be honoured by the Board of Supervisors for the 2022 outstanding volunteer. Amy also thanked Caitlin for being such a good mentor to our commissioners. She also stated she had contact the county's EEO Attorney to make sure we have a diverse workforce. The EEO Attorney responded they conduct outreach at job fairs, universities, social media, schools for a wide and diverse audience. They review job specifications to make sure minimum qualifications on jobs are aligned with actual requirements to make sure we are not creating barriers, accommodations during testing, engage in admin review with departments, there is a commission that updates EEO and competency plan and lastly, mandated training.

Next Meeting: May 3, 2022, 3:00 pm - 5:00 pm

Microsoft Teams Meeting: 1080 Emeline, Santa Cruz, CA

Minutes approved _____

(Signature of Board Chair or Co-Chair)

_____/_____/_____
(Date)

Fiscal Report

BY DR. JULIAN N WREN, MSW, ED.D.

4/5/22 INTEGRATED COMMUNITY HEALTH CARE COMMISSION MEETING



Division	CLINIC			
GLKey	(Multiple Items)			
Row Labels	Budget	Actual	Division EA's 3.18.22	Difference
REVENUE	(52,730,208)	(20,800,063)	(42,884,454)	(2,175,617)
05-LICENSES, PERMITS AND FRANCHIS	0	0	0	0
07-FINES, FORFEITURES & ASSMNTS	0	0	0	0
15-INTERGOVERNMENTAL REVENUES	(9,872,460)	(4,941,176)	(9,861,673)	0
19-CHARGES FOR SERVICES	(42,046,739)	(15,840,384)	(32,665,594)	(2,175,617)
23-MISC. REVENUES	(811,009)	(18,503)	(357,187)	0
EXPENDITURE	51,488,023	23,890,053	43,334,615	1,271,666
50-SALARIES AND EMPLOYEE BENEF	30,383,866	15,703,304	27,737,054	0
60-SERVICES AND SUPPLIES	7,703,543	2,817,856	5,861,978	1,271,666
70-OTHER CHARGES	3,367,280	1,745,843	3,367,390	0
80-FIXED ASSETS	537,281	56,991	558,675	0
95-INTRAFUND TRANSFERS	9,496,053	3,566,059	5,809,518	0
Grand Total	(1,242,185)	3,089,990	450,161	(903,951)

Clinic Estimated Actuals 3/16/22

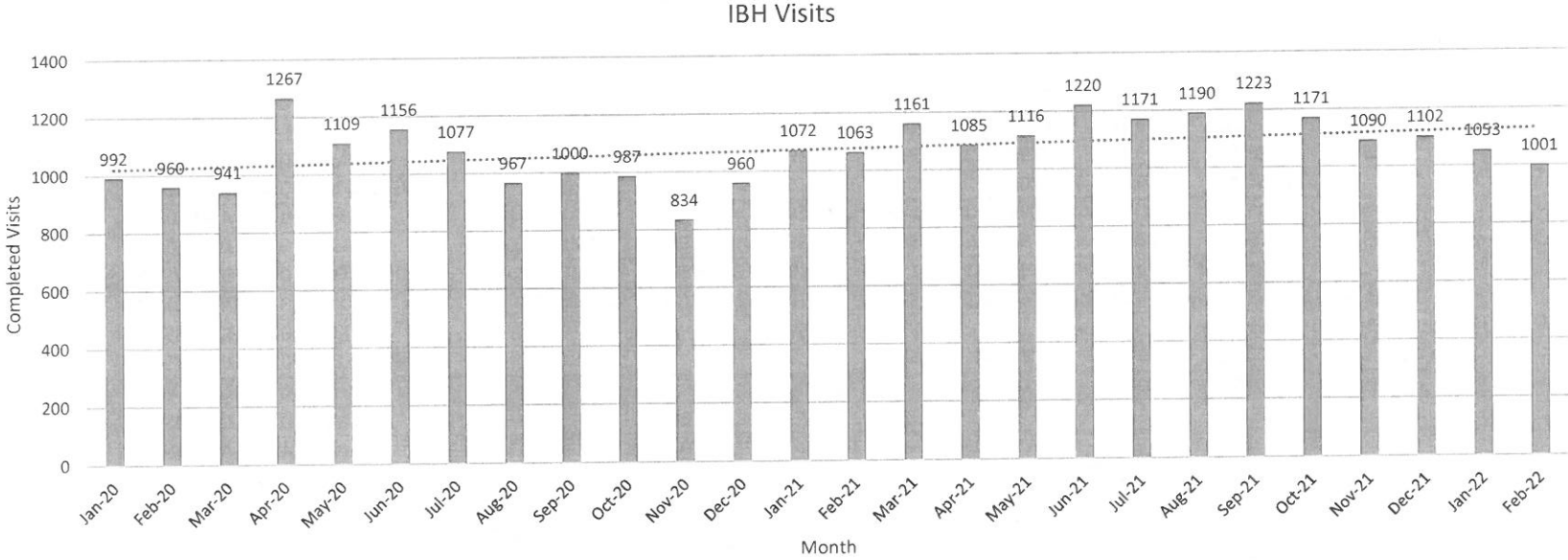
*Data through 1/28/22

ACTUALS/BUDGET	ACTUALS								
Division	CLINIC								
JL KEY & Title	(Multiple Items)								
	Column Labels				2022		Total ACTUALS	Total FEMA	
Row Labels	2020		2021		2022				
	ACTUALS	FEMA	ACTUALS	FEMA	ACTUALS	FEMA			
G21059-COVID 19 RESPONSE	0.00	0.00					0.00	0.00	
60-SERVICES AND SUPPLIES	0.00	0.00					0.00	0.00	
H26843-COVID19 DOC			174,334.27	987.68	14,342.66	0.00	188,676.93	987.68	
50-SALARIES AND EMPLOYEE BENEF			173,875.97	529.38	14,342.66	0.00	188,218.63	529.38	
60-SERVICES AND SUPPLIES			458.30	458.30			458.30	458.30	
H26903-COVID19	44,285.52	76,777.54	3,628,431.25	62,865.61	622,819.56	56,773.29	4,087,160.56	196,416.44	
50-SALARIES AND EMPLOYEE BENEF	27,811.67	60,303.69	3,589,843.35	24,277.71	413,836.91	56,166.41	4,031,491.93	140,747.81	
60-SERVICES AND SUPPLIES	16,473.85	16,473.85	38,587.90	38,587.90	85,196.65	606.88	55,668.63	55,668.63	
H26801-COVID19 Testing			16,599.40	11,628.85	123,786.00	0.00	16,582.63	11,628.85	
50-SALARIES AND EMPLOYEE BENEF			4,970.55	0.00	0.00	0.00	4,953.78	0.00	
60-SERVICES AND SUPPLIES			11,628.85	11,628.85	123,786.00		11,628.85	11,628.85	
H26805-Covid19 Vaccine			99,898.25	8,626.06	4,166.15	1,174.63	102,614.40	9,800.69	
50-SALARIES AND EMPLOYEE BENEF			99,357.68	8,085.49	4,166.15	1,174.63	102,073.83	9,260.12	
60-SERVICES AND SUPPLIES			540.57	540.57			540.57	540.57	
Grand Total	44,285.52	76,777.54	3,919,263.17	84,108.20	765,114.37	57,947.92	4,395,034.52	218,833.66	

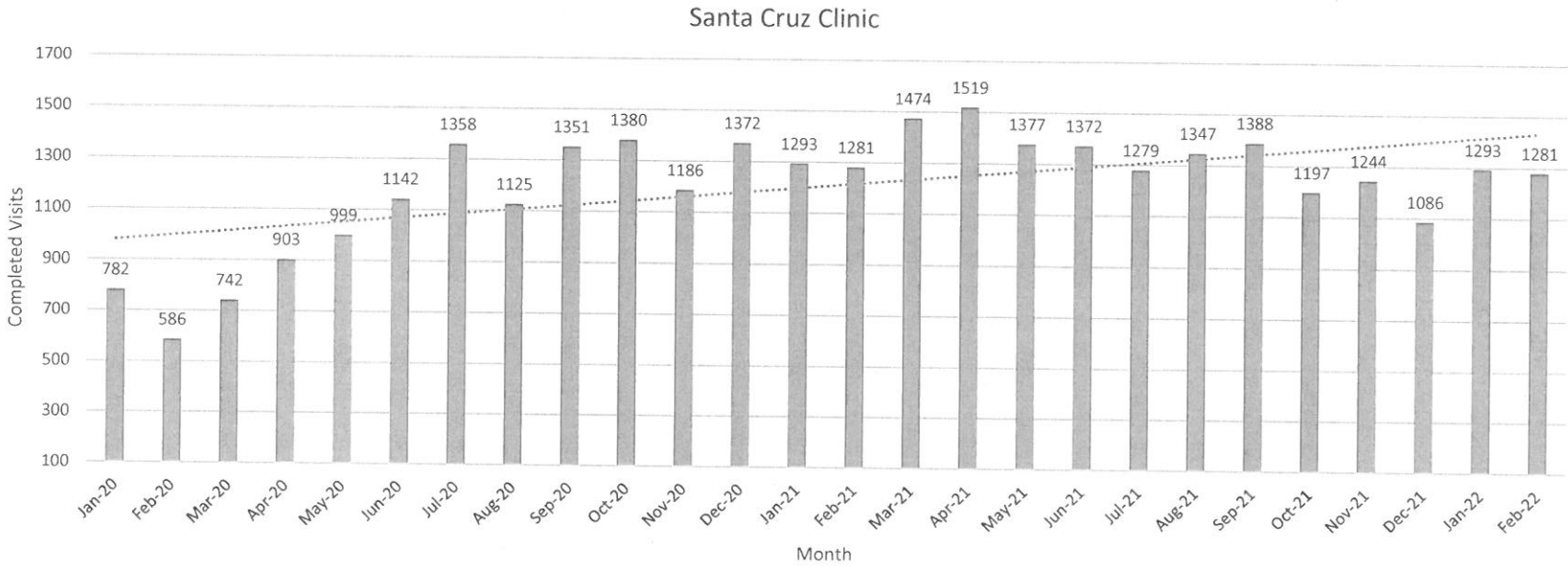
COVID-19 FEMA spending FY 22

*Data through 1/28/22

Integrated Behavioral Health

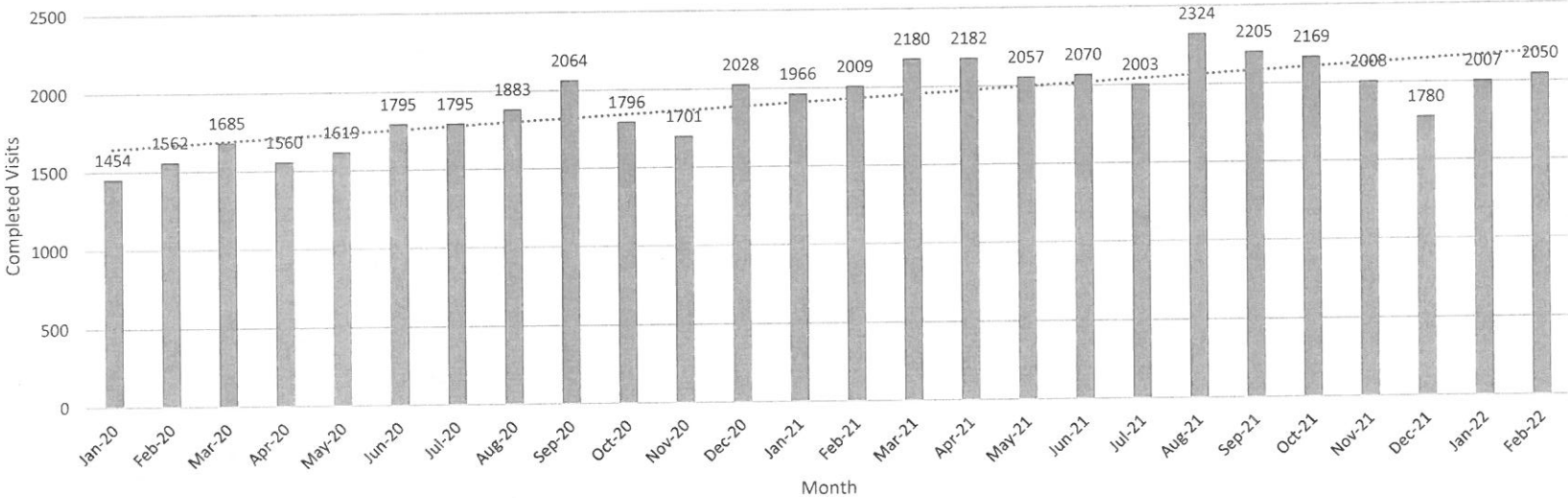


Santa Cruz Health Center

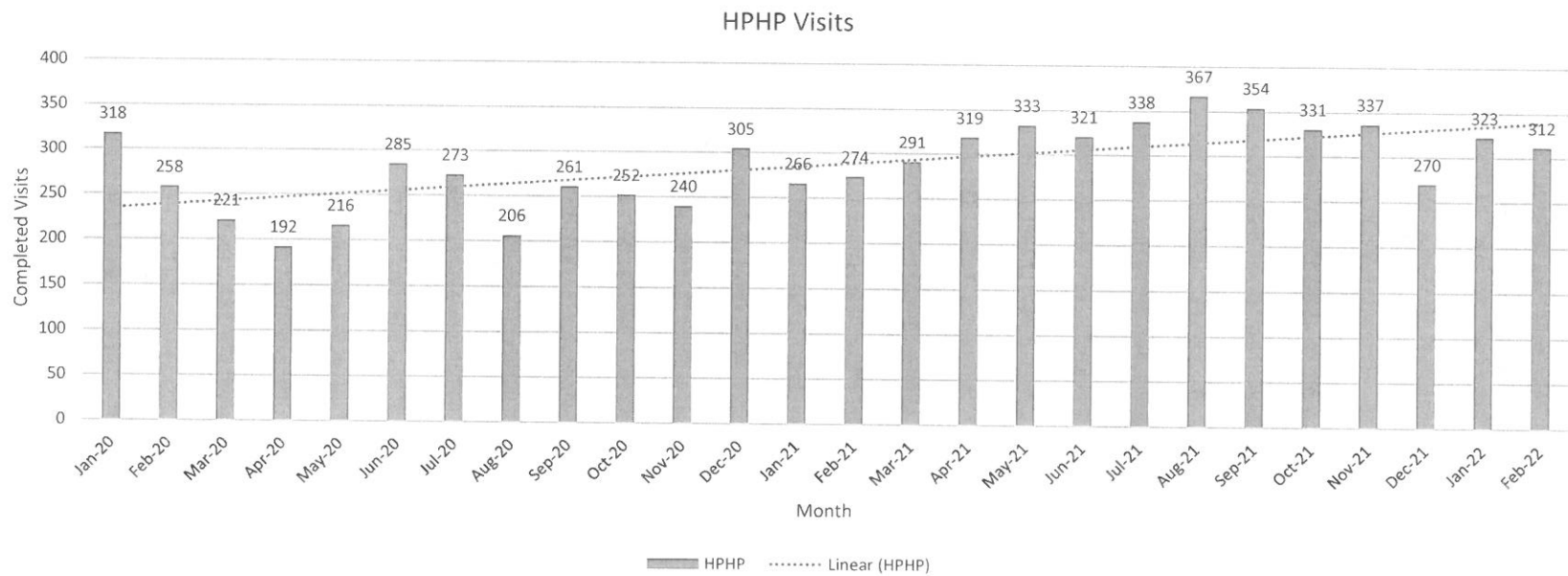


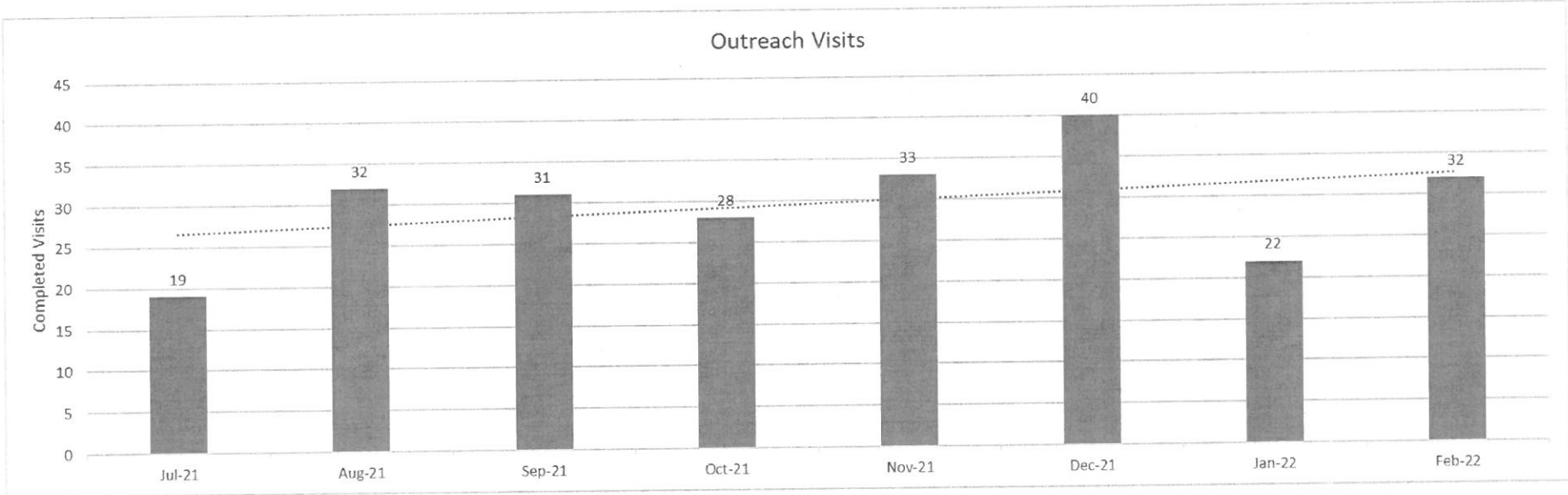
Watsonville Health Center

Watsonville Visits



Homeless Persons Health Project

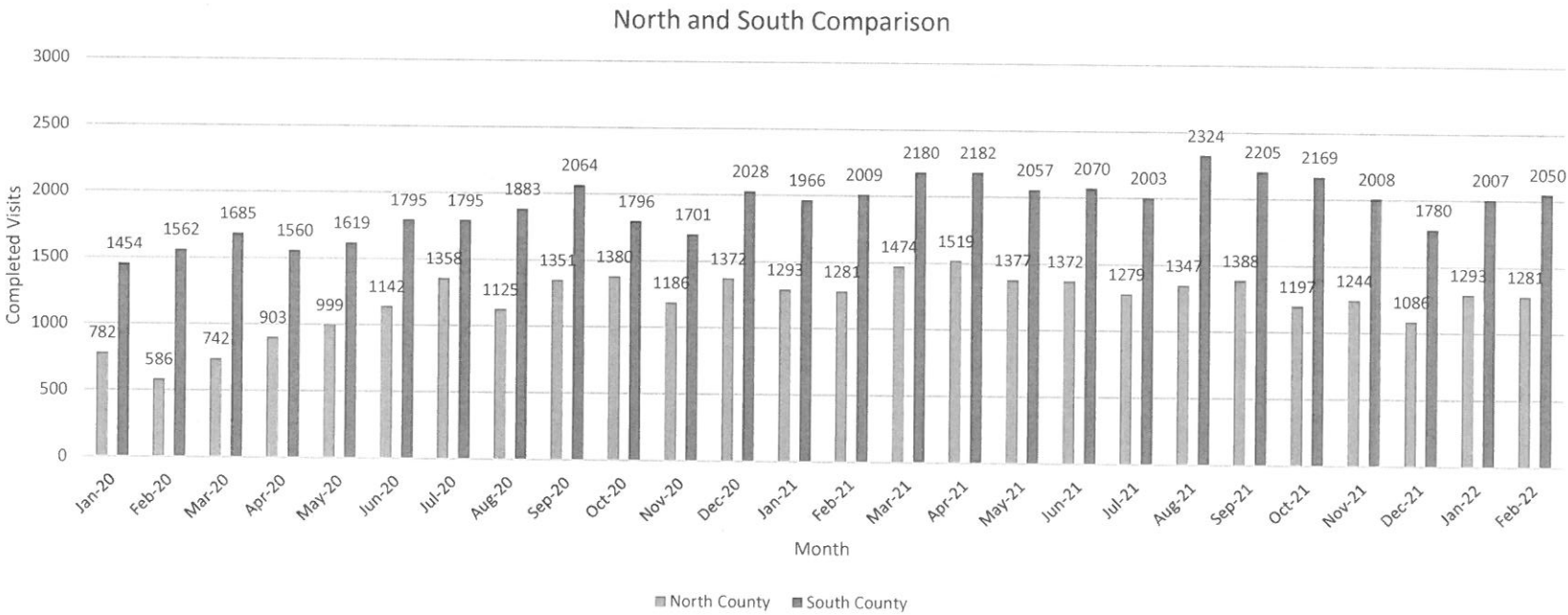




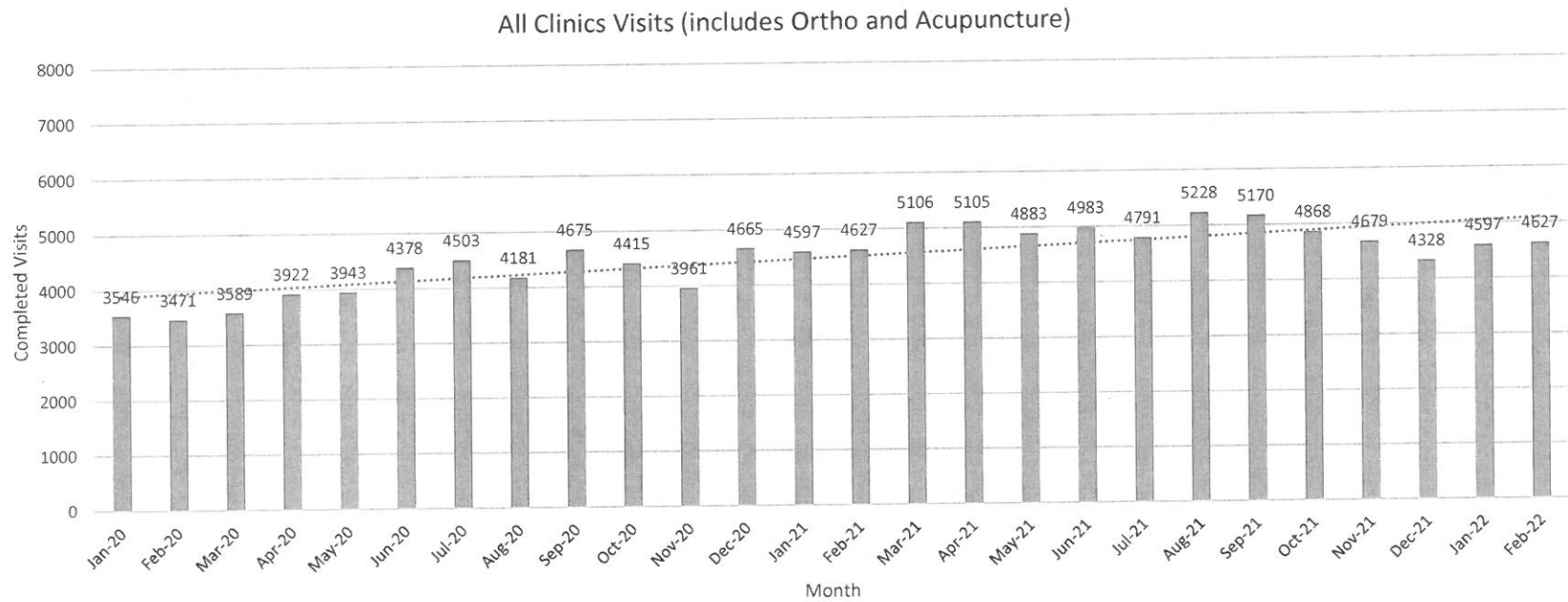
Outreach Visits



North and South County Comparison



All Clinics



References

HSA Financials 1/28/22

Clinician Provider Productivity Report, retrieved 3/16/22.





Quality Management

HRSA Ryan White HIV/AIDS Program Part C

&

Health Centers Hazard Vulnerability Analysis (HVA)

HRSA Ryan White HIV/AIDS Program Part C



What is the Health Resources & Services Administration (HRSA) Ryan White HIV/AIDS Program (RWHAP)?

The HRSA Ryan White HIV/AIDS Program (RWHAP) provides grants to community-based groups to help low-income people with HIV receive medical care, medications, and essential support services to help them stay in care.

RWHAP Part C provides grant dollars to our health centers to help develop, enhance, or expand access to high-quality HIV primary health care services for people with HIV.

RWHAP Part C Quality Improvement Structure

- ▶ RWHAP Part C core team consists of 4 clinicians specializing in HIV care, 2 case managers (1 Public Health Nurse & 1 Sr. Social Worker), & 1 Health Services Manager
- ▶ RWHAP Part C Clinical Quality Improvement (CQI) Meetings occur on the 2nd Wednesday of every month & includes Medical Directors, Health Services Manager, HIV Clinicians, Case Managers, & Data Support Specialists
- ▶ RWHAP Part C CQI subcommittee group meets on the 4th Wednesday of every month to HIV to review QI topics in further detail

RWHAP Part C Clinical Quality Improvement (CQI) Projects

▶ Recent Quality Management Projects

- ▶ Reviewed our current CQI measure definitions against HRSA's HIV/AIDS Bureau performance measure portfolio definitions & made adjustments as needed
 - ▶ Purpose: To ensure we are in alignment with HRSA's grant requirements and are following best practices
 - ▶ Outcome: We observed an increase in our Hep B indicator percentage and agreed to implement a manual audit 1x a year to screen and capture new patients within the reporting year
- ▶ Ryan White HIV/AIDS Program Services Report - Due to HRSA every year in March
 - ▶ Purpose: To inform HRSA what services we are providing & who we are taking care of. This helps HRSA determine our funding amount. Annual patient data clean up & review.
 - ▶ Outcome: Allowed for us to identify any missing patient data, patients who have dropped out of care, moved to another service area, as well as update required patient information. Case managers would reach out to patients who dropped out of care to work on bringing them back into the health centers for an appointment.

RWHAP Part C Clinical Quality Improvement (CQI) Projects

- ▶ **Current & Ongoing Projects:**

- ▶ Quarterly review of Clinical Quality Improvement measures

We have 21 CQI measures that we review on a quarterly basis

- ▶ **6 Cascade Measures**

- ▶ Continuity in visits, CD4 testing, HIV viral load testing, antiretrovirals prescribed, medication adherence assessment, HIV viral load suppression

- ▶ **6 Routine Preventative Care Measures**

- ▶ PCP prophylaxis, cervical pap smears, dental visits, Hep C, TB, & lipid screenings

- ▶ **6 Screening Measures**

- ▶ Substance abuse, mental health, tobacco use, Chlamydia/Gonorrhea, Syphilis, & Hep B screenings

- ▶ **3 Vaccination Measures**

- ▶ Hep B, Pneumovax, Flu

Clinical Quality Improvement (CQI) Measures

Top 3 measures for 2021 Quarter 4

- TB Screening: 99%
- Antiretrovirals Prescribed: 96%
- CD4 Testing: 90%

3 measures to review for 2021 Quarter 4

- HIV Viral Load Testing: 69%
- Flu Vaccinations: 66%
- PCP Prophylaxis: 61%

RWHAP Part C Clinical Quality Improvement (CQI) Projects

▶ Current & Ongoing Projects:

▶ Quarterly review of CQI measures

- ▶ Purpose: To ensure that we are meeting quality management goals & to identify and address any data discrepancies or trends in care

▶ Plan-Do-Study-Act (PDSAs)

▶ Retention to Care

- ▶ Purpose: Review patient list, viral load data & patient's last visit in the last 6 months & 12 months to identify any patients who may have dropped out of care

▶ Demographics & Viral Suppression

- ▶ Purpose: Measure viral suppression outcomes across demographic indicators such as age, race, gender, housing status, zip codes, health care coverage, etc. to identify and address any disparities

▶ Reviewing data collection methods

- ▶ Purpose: To ensure the methods and process we use to capture data are aligned with HRSA's performance measures and reflects the current landscape of care being provided in our health centers

QUESTIONS

Santa Cruz County Health Centers 2022 Hazards Vulnerability Analysis

I THINK WE MAY NEED TO
UPDATE OUR DISASTER RECOVERY PLAN.
THIS ONE SUGGESTS WE ALL RUN
AROUND IN CIRCLES SHOUTING
'WHAT DO WE DO?!!' 'WHAT DO WE DO?!!'



Why & when do we complete the HVA?

▶ Why?

- ▶ Fulfills requirements for the Centers of Medicare & Medicaid Services (CMS) Emergency Preparedness Rule, HRSA, & the Santa Cruz County Health Care Coalition (HCC) membership
- ▶ Serves as a needs assessment tool for emergency planning and preparedness
- ▶ Helps inform us of what exercises & drills we may need to prioritize in the upcoming year for our health centers

▶ When do we complete the HVA?

- ▶ Each health center completes its own HVA typically during the first 3 months of each calendar year
- ▶ Once completed the HVAs will be submitted to our HCC upon request

Emeline Health Center 2022 HVA

- ▶ EHC has identified their top 3 hazards to be:
 - ▶ Fire
 - ▶ Strikes/Labor Action/Work Stoppage
 - ▶ Acts of Intent

2022

TOP 10 HVA	RANK
Fire	1
Strikes / Labor Action / Work Stoppage	2
Acts of Intent	3
Planned Power Outages	4
Communication / Telephone Failure	5
HVAC Failure	6
IT System Outage	7
Pandemic	8
Active Shooter	9
Generator Failure	10

HPHP 2022 HVA

- ▶ HPHP has identified their top 3 hazards to be:
 - ▶ Supply Chain Shortage/Failure
 - ▶ Earthquake
 - ▶ Temperature Extremes

2022

TOP 10 HVA	RANK
Supply Chain Shortage / Failure	1
Earthquake	2
Temperature Extremes	3
Water Contamination	4
Building Move	5
Infectious Disease Outbreak	6
Water Disruption	7
Pandemic	8
Planned Power Outages	9
Unplanned Power Outages	10

Watsonville Health Center 2022 HVA

- ▶ WHC has identified their top 3 hazards to be:
 - ▶ IT System Outage
 - ▶ Communication/Telephone Failure
 - ▶ Generator Failure

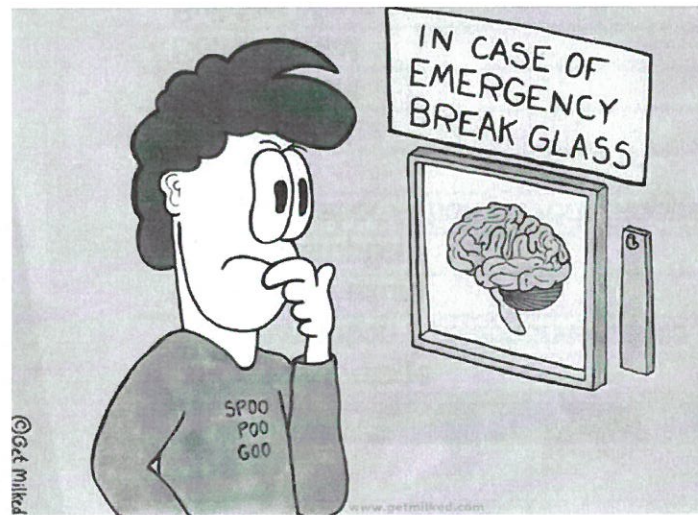
2022

TOP 10 HVA	RANK
IT System Outage	1
Communication / Telephone Failure	2
Generator Failure	3
Water Disruption	4
Strikes / Labor Action / Work Stoppage	5
Pandemic	6
Active Shooter	7
Acts of Intent	8
Bomb Threat	9
Building Move	10

We've identified our hazards... now what?

Plan for the hazards indicated by:

- ▶ Reviewing & assessing our preparedness levels for hazards indicated
- ▶ Identify areas that need strengthening
- ▶ Leverage resources accordingly
- ▶ Drills & exercises as appropriate
- ▶ Continue discussion & planning in Clinics Recovery meetings & Agency Leadership meetings





Questions?

Thank
you