

The County of Santa Cruz Integrated Community Health Center Commission

AGENDA

October 13th, 2016 @ 12:30 pm

Meeting Location:

1080 Emeline Avenue, Small Auditorium (basement), 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.

Welcome and Introductions

1. Welcome/Introductions
2. Oral Communications
3. Review and Accept September 8th, 2016 Meeting Minutes
4. Public Health Update with Dr. Arnold Leff
5. Budget/Financial Update
6. CEO Update
7. Quality Management Committee Update
 - a. Plan, Do, Study, Act Overview
 - b. Privileging

Action Items from Previous Meetings:

Action Item	Person(s) Responsible	Date Completed	Comments
<i>Action Item 1: Invite Santa Cruz Aids Project (SCAP) to a presentation</i>	Amy Peeler		
<i>Action Item 2: Phone Meeting with Gustavo Mendoza and Amy Peeler to discuss the availability and services for undocumented persons.</i>	Amy Peeler		
<i>Action Item 3: Schedule a commission meeting in Watsonville and a tour of the Watsonville Health Clinic requested by Rahn Garcia.</i>	Jessica McElveny		

Next meeting: Thursday November 10th 12:30 pm-2:30 pm (small auditorium, 1080 Emeline, Santa Cruz, CA)

The County of Santa Cruz Integrated Community Health Center Commission

Minute Taker: Jessica McElveny

Minutes of the meeting held *September 8th, 2016*

1. Attendance	
Rahn Garcia	Co-Chair
Christina Berberich	Member
Nicole Pfeil	Member
Gustavo Mendoza	Member
Pam Hammond	Member
Fernando Alcantar	Member
Amy Peeler	County of Santa Cruz, Health Services, CEO of Clinics
Jeanette Garcia	County of Santa Cruz, Health Services, Admin Services Manager
Nikki Yates	County of Santa Cruz, Health Services, Accountant III
Raquel Ramirez Ruiz	County of Santa Cruz, Health Services, Sr. Health Services Manager
Jessica McElveny	County of Santa Cruz, Health Services, Admin Aide
Meeting Commenced at 12:38 pm and concluded at 1:25 pm	
2. Apologies/Absent	
Apologies were noted from: Rama Khalsa & Dinah Phillips Absent: Kristen Meyer	
3. Oral Communications	
Gustavo Mendoza requested more information on the availability and services for undocumented persons. Rahn Garcia requested scheduling a commission meeting to be held in Watsonville occasionally and requested a tour of the Watsonville Health Center.	
4. Review of August 11th, 2016 minutes	
Gustavo Mendoza motioned for the acceptance of the minutes, the motion was seconded by Fernando Alcantar. The rest of the members present were in favour.	
5. Budget/Financial Update	
Nikki Yates gave a presentation on the total revenues by program projections for fiscal year 16-17.	
6. CEO Update	
Amy Peeler reported on the reopening of HPHP, case managers that have been hired for the Medication Assistant Treatment program, hiring of a medical director for the Santa Cruz Health Clinic, and Dr. Leff Interim Health Officer doing outreach on the river levee.	
7. Quality Management Committee Update	
Amy Peeler and Raquel Ramirez Ruiz reported on the Summer 2016 Patient Survey, the PDSA measures adopted by each clinic, the status of the consulting by Trudy with Qualis and that we have achieved Patient Centred Medical Home Level 2.	
8. Policy and Procedure – End of Life - Vote	
Rahn Garcia requested that policies be approved as a whole.	
Action Item 1: Gustavo Mendoza requested a phone meeting with Amy Peeler to discuss the availability and services for undocumented persons.	
Action Item 2: Rahn Garcia requested scheduling a commission meeting in Watsonville and a tour of the Watsonville Health Clinic.	

Next Meeting: *Thursday October 13th at 12:30 pm at 1080 Emeline Ave, Santa Cruz, CA*

**County of Santa Cruz (HSA)
FY 16-17 CLINIC(Multiple Items)(All)
FQHC CLINIC SERVICES
As of 09/30/2016**

Program Name	(All)	<<<SELECT Index Title or
GLKey	(Multiple Items)	<<<SELECT A Index Code or
Division	CLINIC	<<<SELECT A DIVISON

Row Labels	Values FY 16-17 BUDGET	Current ACTUAL	ESTIMATED ACTUALS	VARIANCE
WATSONVILLE CLINIC				
EXPENDITURE	6,245,760	1,164,091	5,210,788	(1,034,972)
REVENUE	(7,224,071)	(541,330)	(7,526,417)	(302,346)
CLINIC ADMINISTRATION				
EXPENDITURE	5,436,296	565,577	5,394,962	(41,334)
EMELINE CLINIC				
EXPENDITURE	6,821,776	1,284,020	5,792,075	(1,029,701)
REVENUE	(7,004,453)	(201,590)	(5,344,092)	1,660,361
FORENSIC SERVICES				
EXPENDITURE	98,831	60,118	51,187	(47,644)
CORAL STREET CLINIC (HPHP)				
EXPENDITURE	4,083,111	609,490	3,198,738	(884,373)
REVENUE	(4,311,066)	74,846	(3,877,060)	434,006
MENTAL HEALTH FQHC				
EXPENDITURE	10,961,603	0	2,700,429	(8,261,174)
REVENUE	(12,061,603)	(783,702)	(3,800,429)	8,261,174
WATSONVILLE DENTAL				
EXPENDITURE	2,150,000	4,169	1,996,429	(153,571)
REVENUE	(2,656,785)	(347,158)	(1,996,428)	660,357
BOTOM LINE EXPENDITURES				
	35,797,377	3,687,465	24,344,608	(11,452,769)
BOTTOM LINE REVENUES				
	(33,257,978)	(1,798,934)	(22,544,426)	10,713,552
NET COUNTY COST	2,539,399	1,888,531	1,800,182	(739,217)

NET COUNTY COST BREAKDOWN BY PROGRAM

Division	CLINIC	<<<SELECT A DIVISON
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Row Labels	Values Sum of BUDGET	Sum of ACTUAL	Sum of ESTIMATED ACTUALS	VARIANCE
WATSONVILLE CLINIC	(978,311)	622,761	(2,315,629)	(1,337,318)
CLINIC ADMINISTRATION	5,436,296	565,577	5,394,962	(41,334)
EMELINE CLINIC	(182,677)	1,082,430	447,983	630,660
FORENSIC SERVICES	98,831	60,118	51,187	(47,644)
CORAL STREET CLINIC (HPHP)	(227,955)	684,335	(678,322)	(450,367)
MENTAL HEALTH FQHC	(1,100,000)	(783,702)	(1,100,000)	0
WATSONVILLE DENTAL	(506,785)	(342,988)	1	506,786
TOTAL BOTTOM LINE	2,539,399	1,888,531	1,800,182	(739,217)

**County of Santa Cruz (HSA)
 FY 16-17 CLINIC(Multiple Items)
 Appropriations by Program
 FQHC CLINIC SERVICES
 As of 09/30/2016**

GLKey	(Multiple Items)	<<<SELECT A Index Code or
Division	CLINIC	<<<SELECT A DIVISON

Row Labels	Values	BUDGET	ACTUAL	ESTIMATED ACTUALS	VARIANCE	NOTES
WATSONVILLE CLINIC		6,245,760	1,164,091	5,210,788	(1,034,972)	
EXPENDITURE		6,245,760	1,164,091	5,210,788	(1,034,972)	
50-SALARIES AND EMPLOYEE BENEF		5,370,034	1,013,185	4,418,644	(951,390)	Clinics showing 21 Vacancies
60-SERVICES AND SUPPLIES		835,726	150,906	752,144	(83,582)	
80-FIXED ASSETS		40,000	0	40,000	0	
CLINIC ADMINISTRATION		5,436,296	565,577	5,394,962	(41,334)	
EXPENDITURE		5,436,296	565,577	5,394,962	(41,334)	
50-SALARIES AND EMPLOYEE BENEF		2,238,068	513,070	2,242,972	4,904	
60-SERVICES AND SUPPLIES		628,022	52,507	581,784	(46,238)	
70-OTHER CHARGES		2,570,206	0	2,570,206	0	
EMELINE CLINIC		6,821,776	1,284,020	5,792,075	(1,029,701)	
EXPENDITURE		6,821,776	1,284,020	5,792,075	(1,029,701)	
50-SALARIES AND EMPLOYEE BENEF		5,782,315	1,065,004	4,645,257	(1,137,058)	Clinics showing 21 Vacancies
60-SERVICES AND SUPPLIES		1,039,461	219,016	1,146,819	107,358	
FORENSIC SERVICES		98,831	60,118	51,187	(47,644)	
EXPENDITURE		98,831	60,118	51,187	(47,644)	
50-SALARIES AND EMPLOYEE BENEF		297,729	58,875	255,319	(42,410)	
60-SERVICES AND SUPPLIES		13,156	1,242	7,922	(5,234)	
95-INTRAFUND TRANSFERS		(212,054)	0	(212,054)	0	
CORAL STREET CLINIC (HPHP)		4,083,111	609,490	3,198,738	(884,373)	
EXPENDITURE		4,083,111	609,490	3,198,738	(884,373)	
50-SALARIES AND EMPLOYEE BENEF		2,942,915	492,368	2,155,209	(787,706)	Clinics showing 21 Vacancies
60-SERVICES AND SUPPLIES		1,140,196	117,122	1,043,530	(96,666)	
MENTAL HEALTH FQHC		10,961,603	0	2,700,429	(8,261,174)	
EXPENDITURE		10,961,603	0	2,700,429	(8,261,174)	
95-INTRAFUND TRANSFERS		10,961,603	0	2,700,429	(8,261,174)	billing issue with Mental Health (Monitoring)
WATSONVILLE DENTAL		2,150,000	4,169	1,996,429	(153,571)	
EXPENDITURE		2,150,000	4,169	1,996,429	(153,571)	
60-SERVICES AND SUPPLIES		2,150,000	4,169	1,996,429	(153,571)	

County of Santa Cruz (HSA)
FY 15-16 CLINIC(Multiple Items)
REVENUES by Program
FQHC CLINIC SERVICES
As of 09/30/2016

GLKey	(Multiple Items)	<<<SELECT A Index Code or
Division	CLINIC	<<<SELECT A DIVISON

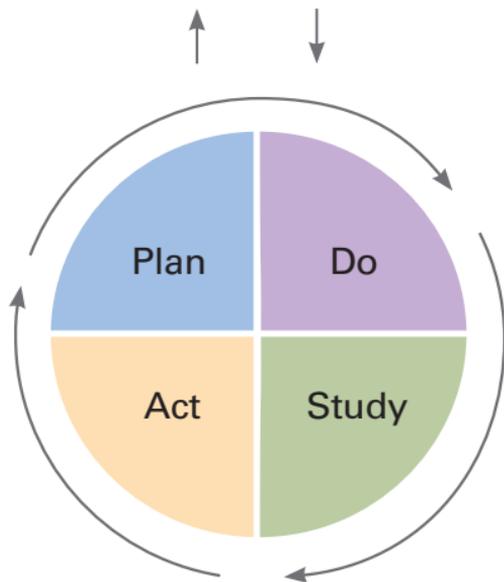
Row Labels	Values Sum of BUDGET	Sum of ACTUAL	Sum of ESTIMATED	ACTU VARIANCE	NOTES
WATSONVILLE CLINIC	(7,224,071)	(541,330)	(7,526,417)	302,346	
REVENUE	(7,224,071)	(541,330)	(7,526,417)	302,346	
41675-OUTPATIENT CLINIC FEES-EPIC	(7,224,071)	(537,920)	(7,526,417)	302,346	
42362-CASH OVERAGES	0	(3)	0	0	
42384-OTHER REVENUE	0	(3,407)	0	0	
EMELINE CLINIC	(7,004,453)	(201,590)	(5,344,092)	(1,660,361)	
REVENUE	(7,004,453)	(201,590)	(5,344,092)	(1,660,361)	
41675-OUTPATIENT CLINIC FEES-EPIC	(5,880,453)	(257,684)	(4,220,092)	(1,660,361)	Down FTE Physicians at Emeline Campus Currently Recruiting
42022-COST RECOVERY-OTHER	(144,000)	0	(144,000)	0	
42047-OTHER CHARGES CURRENT SER'	(50,000)	(610)	(50,000)	0	
42380-NSF CHECKS	0	56,704	0	0	
42384-OTHER REVENUE	(930,000)	0	(930,000)	0	
CORAL STREET CLINIC (HPHP)	(4,311,066)	74,846	(3,877,060)	(434,006)	
REVENUE	(4,311,066)	74,846	(3,877,060)	(434,006)	
40935-FED-MAA/TCM MEDI-CAL ADMI	(265,000)	0	0	(265,000)	Anticipated to be zero this fiscal year working through compliance issue
40954-FED-EMERGENCY SHELTER GRA	(489,506)	77,376	(489,506)	0	
40996-FED-HEALTH PROGRAMS	(2,577,000)	108,443	(2,577,000)	0	
41675-OUTPATIENT CLINIC FEES-EPIC	(891,000)	(110,974)	(721,994)	(169,006)	Down FTE's working on increasing staffing
42047-OTHER CHARGES CURRENT SER'	0	0	0	0	
42384-OTHER REVENUE	(88,560)	0	(88,560)	0	
MENTAL HEALTH FQHC	(12,061,603)	(783,702)	(3,800,429)	(8,261,174)	
REVENUE	(12,061,603)	(783,702)	(3,800,429)	(8,261,174)	
41675-OUTPATIENT CLINIC FEES-EPIC	(12,061,603)	(783,702)	(3,800,429)	(8,261,174)	Billing Issue with Mental Health (MONITORING)
WATSONVILLE DENTAL	(2,656,785)	(347,158)	(1,996,428)	(660,357)	
REVENUE	(2,656,785)	(347,158)	(1,996,428)	(660,357)	
41675-OUTPATIENT CLINIC FEES-EPIC	(2,656,785)	(347,158)	(1,996,428)	(660,357)	Down Based on Actuals

The Model for Improvement

What are we trying to accomplish?

How will we know that a change is an improvement?

What changes can we make that result in improvement?



Plan

for the testing cycle. Develop an aim statement. Make some predictions about results.

Do

the test on a small scale. Document problems and observations. Collect data—qualitative or quantitative.

Study

the data after completing the test. Compare data to predictions. Summarize and reflect.

Act

upon the data by modifying a change for the next cycle of testing. The goal is to hold the gains, eliminate waste, and refine.



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PDSA Cycle Worksheet

PDSA Cycle	Start Date:	End Date:
Cycle Name and Brief Description	Cycle #:	Cycle Owner:
Objective of Cycle: <input type="checkbox"/> Collect Data/Develop Change <input type="checkbox"/> Test a Change <input type="checkbox"/> Implement a Change		

PLAN: Identify questions. Predict the results. Determine data to be collected and by whom.	
Questions	Predictions
Data to be Collected	Assignments
DO: Carry out the change or activity and collect the data. Document what happened (+/-).	
STUDY: Summarize what you learned. Identify any new questions/issues. Compare data with predictions.	
Learnings:	
Results:	New Issues or Questions:
ACT: Determine next steps from what you learned.	
Next Cycle:	Ad Hoc Members:

Plan, Do, Study, Act (PDSA) Cycle Checklist

Plan

- Define the **Objective Type** for the cycle: Collect Data/Develop Change, Test a Change, Implement a Change
- Define the specific **Questions** to be answered from this cycle
- Where you have a theory or knowledge, make a **Prediction(s)** about the answer to each question, and include the basis for the prediction
- Define the **Action Plan** to answer the questions
 - What (actions), Who, Where, When, How
- Create a detailed plan for **Data Collection and Analysis**

Consider:

- Are historical data available to answer the questions or will new data be required?
- Does the team agree on the predictions (some or all)?
- What tools and methods will be used to collect and analyze the data?
- Did you assign responsibilities for collection and analysis of the data?
- Is training needed for individuals collecting data?
- Is the plan consistent with the project charter?
- If testing, can the plan be carried out on a small scale?
- If testing or implementing, have you considered people outside the team who will be impacted by this plan?
- If implementing, has a change management plan been considered?

Do

- Carry out the plan
- Capture any observations in carrying out the plan, especially if unexpected
- Begin analysis of data

Consider:

- Were there things observed that were not part of the plan?
- Were there things that went wrong?
- Were there any special causes in the data you collected?

Study

- Analyze** the data and observations
- Compare the data with **predictions**
- Summarize **what was learned** (new knowledge) in this cycle
- Develop and update graphical tools and include (link or copy) in the PDSA cycle document

Consider:

- Do the results of the cycle agree with the predictions made in the planning phase?
- Under what conditions could the conclusions from this cycle be different?
- What are the implications of the unplanned observations and problems in the Do Step?
- Do the data and observations help answer the questions posed in the plan?
- Are charts, graphs or diagrams annotated with what was changed or learned?
- Can learning be applied in other areas?

Act

- List any changes that can be made to the process
- Define the **objective type** and **objective** for the next PDSA cycle

Consider:

- What is the next cycle objective based on the learning from this cycle?
- Are we ready to develop possible changes? What are our theories?
- Are we ready to test a change?
- Are we ready to implement a change?
- Do we still need to collect data in order to understand the current situation?

Additional PDSA Tips

- Always complete the Study Step as a team activity
- Assign a PDSA cycle lead to coordinate the cycle
- Consider completing PDSA cycles from team meeting to team meeting
- Move to testing changes when you have good theories and changes to test
- Test on a small scale to maximize learning and reduce risk
- Implementation plans should consider a change management plan
- Document only enough to ensure there is a well-defined plan, observations and data are collected and analyzed, and learning is captured
- The Act step becomes the beginning of the Plan step on the next cycle

**Co-Applicant Board
Appointment/Reappointment Privileging List
October 2016**

LAST	FIRST	Category	SITE	Privilege Date
ALVARADO	FABIAN	NP	WHC	10/6/2016
BACOS	DIMITRI	IBH	SCC	9/13/2016
BERMAN	PAUL	PHY	SCC	9/8/2016
BROOKS	ROBIN	PHY	SCC	10/12/2016
CISNEROS	JEANETTE	PHY	WHC	2/5/2015
CONDON	KATHLEEN	IBH	ALL	10/4/2016
CRISTOBAL	CARMELITA	PHY	WHC	2/5/2015
ELLIOTT	NANCY	PA	WHC	2/6/2015
GANT	THOMAS	PHY	SCC	9/14/2016
HANSEN	ANNIKEN	PHY	WHC	2/5/2015
HAR	DELEE	PHY	SCC	9/30/2016
HENDERSON	CATHERINE	NP	SCC	9/14/2016
JOHNSTON	JASON	PA	WHC	10/6/2016
JORDAN	MARION	PA	SCC	9/8/2016
KELLEY	JUDITH	PHY	SCC	9/8/2016
KOLLMANN	ALICE	NP	WHC	2/5/2015
KRISHNAN	BRINDA	IBH	SCC	10/3/2016
LEONARD	WENDY	PHY	SCC/WHC	10/11/2016
LOU	LINDA	PHY	SCC	9/22/2016
MINKNER	RICHARD	PHY	SCC	9/21/2016
MODEL	DANIEL	IBH	SCC	9/13/2016
RATTO	ANDREA	PA	WHC	2/5/2015
REYES	WILIBALDO	PA	WHC	2/5/2016
RICHMAN	NEIL	PHY	SCC	9/13/2016
SANFORD	ERIC	PHY	WHC	2/5/2015
SANTILLANO	EUGENE	PHY	SCC	9/9/2016
VENTIMIGLIA	MATTHEW	IBH	SCC	9/13/2016
VILLANUEVA	IGNACIO	PA	WHC	10/6/2016
VIOLICH	MICHELE	PHY	WHC	10/12/2016
WALL	DAVID	PA	HPPH	9/14/2016
WILLKIE	CATHY	IBH	SCC	10/4/2016

HEALTH SERVICES AGENCY PRIVILEGE/PROCEDURE LIST

Section A: Ambulatory Practice

These privileges include routine diagnostic and therapeutic procedures associated with outpatient care such as but not limited to:

- Obtain a history, perform a physical examination, order and interpret clinical laboratory tests, provide routine primary care procedures, prescribe medications, request consultation and make referrals.
- Care of neonates and infants, including both well-baby and ill newborns.
- Illnesses, disorders and injuries of childhood, such as pneumonia, asthma, gastrointestinal infections, dehydration and urinary tract infections.
- Illnesses, disorders and injuries of adolescence.
- Illnesses, disorders and injuries of the adult, including but not limited to conditions of the heart, kidney, lung, musculoskeletal system, skin, eye and nervous system, and including multi-system diseases such as diabetes mellitus, HIV/AIDS and cancer.
- Women's health, including illnesses, disorders and injuries of the female reproductive and genitourinary systems.
- Pre-and post-operative evaluation and care
- Acute and chronic diseases of the elderly, including dementias, as well as functional assessment, physiologic and psychologic aspects of senescence and end-of-life care.
- Psychiatric disorders in children and adults, emotional aspects of non-psychiatric disorders, psychopharmacology, alcoholism and other substance abuse.
- Community issues, such as child abuse and neglect, domestic violence, elder abuse and neglect, disease prevention and disaster preparedness.

Exclusions: Though considered core privileges for Family Medicine, the following privileges will be excluded for this applicant at their request.

Privileges in Ambulatory Practice	Please Check Requested Privileges
Primary Care Infants: 0-2 years	
Primary Care Children: 2-12 years	
Primary Care Adolescents: 12-18 years	
Primary Care Adults: 18-65 Years	
Primary Care Seniors: 65 + Years	

Section B: Special Procedures

Procedures	Please Check Requested Privileges
Anoscopy, Proctoscopy	
Bursal & Joint Aspirations & Injections	
Cervical Polypectomy	
Colposcopy	
Cryotherapy	
Debridement of Minor Burns	
Dx & Rx of Most Common Dermatological Disease	
EKG Interpretation	
Endometrial Biopsy	
Excision of Minor Skin Lesions	
Family Planning/Contraception	
I & D of Abscess or Cyst	
I & D of Bartholin's Gland/ Word Catheter Placement	
I & D of External Hemorrhoids	
Ingrown Toenail Removal	
IUD Insertion	
Removal of Foreign Bodies From Ears	
Removal of Foreign Bodies From Eyes	
Removal of Foreign Bodies From Nose	
Removal of Impacted Cerumen	
Simple Fracture: Casting	
Simple Fracture: Splinting	
Suture of Lacerations	
Treatment of Plantar Warts	
Tympanometry	
Venipuncture	
Vulvar & Vaginal Biopsy	
Other:	

