

**County of Solano**  
**Community Healthcare Board**

**REGULAR GOVERNING BOARD MEETING MINUTES**

December 16, 2020

Telephone Conference Call

**Members Present:**

Ruth Forney, Michael Brown, Tracee Stacy, Brandon Wirth, Anthony Lofton, Katrina Morrow, Robert Wieda, Miriam Johnson, Gerald Hase, Jim Jones

**Members Absent:**

Sandra Whaley

**Staff Present:**

Dr. Bela Matyas, Gerald Huber, Debbie Vaughn, Tess Lapira, Toya Adams, Anna Mae Gonzales-Smith, Janine Harris, Dr. Rebekah Kim, Dr. Sneha Innes, Dr. Michele Leary, Jack Nasser, Noelle Soto, Cheryl Esters, Clarisa Sudarma, Thomas West, Bridget Bucke, Patricia Zuniga

**1) Call to Order- 12:03 PM**

- a) Welcome
- b) Roll Call

**2) Approval of December 16, 2020, Agenda**

Move motion to approve December 16, 2020, Agenda

Motion by Miriam Johnson, seconded by Katrina Morrow

Discussion: None

Aye: Ruth Forney, Michael Brown, Tracee Stacy, Brandon Wirth, Anthony Lofton, Katrina Morrow, Robert Wieda, Miriam Johnson, Gerald Hase, Jim Jones

Nay: None

Motion Carries

**3) Approval of November 18, 2020, Meeting Minutes**

Move motion to approve October 21, 2020, Meeting Minutes

Motion by Miriam Johnson, seconded by Brandon Wirth

Discussion: None

Aye: Ruth Forney, Michael Brown, Tracee Stacy, Brandon Wirth, Anthony Lofton, Katrina Morrow, Robert Wieda, Miriam Johnson, Gerald Hase, Jim Jones

Nay: None

Motion Carries

**4) Public Comment**

None. No cards available, due to the meeting in the venue of MS Teams, online. If the public calls in, they are asked to introduce themselves on the phone, if they would like to make a comment.

**5) Project Director/Chief Executive Officer Report**

a) COVID-19 Health Center Impact Update: Presented by Dr. Bela Matyas

- i. It was noted that the State and Solano County is in the thick of a COVID-19 surge. The numbers are higher than in March. Hundreds of cases reported daily. The available ICU bed capacity in Solano County is 11% and all hospitals are feeling the impact from Thanksgiving events. Because these events are multi-generational, there has been an increase in deaths. It is predicted the numbers will get worse after the Christmas and New Year Holidays, so another surge is expected in January 2021 and is not expected to level off until February 2021. The Bay Area, as a whole, is at 12.9% available ICU bed capacity. The Stay Home Order made by the Governor started today. It was mentioned that about a third of the deaths, due to COVID-19, are from long term facilities.
- ii. The impact economically has been causing small businesses to close and the existing stimulus expires 12/30/2020.
- iii. When the available ICU capacity is higher than 15%, we can return to the Purple Tier.
- iv. Good news was mentioned! Staff at the clinics are following workplace protections. There were a few workers at the clinic, who tested positive for COVID-19, but were infected from family gatherings and not at work. Kudos were mentioned to Jack and Dr. Leary for keeping the clinics safe.
- v. More good news was mentioned. Tomorrow the County is receiving the first wave of COVID-19 vaccine. It will be for the hospital workers. A second wave will be received soon, and it will be for any remaining hospital workers and workers at long term care facilities. A third wave will be received, for first responders, such as police, firemen and emergency medical services workers. It may be available to the general population in February, March or April 2021. It depends on what Pfizer, Moderna and other companies can provide.
- vi. It was asked about flu related incidents. As mentioned by Dr. Matyas, flu season usually begins in the months of January or February.
- vii. To decompress the use of ICU beds, hospitals are not performing elective surgeries. The question was asked about the percentage of COVID-19 patients in ICU. The percentage varies from day to day and now it's about a third.
- viii. It was asked if COVID-19 vaccinations are mandatory for clinical staff, and it was stated that they are not mandatory, because there are no official state or OSHA orders in place. It was mentioned that all clinical staff are following the mandated orders and precautions given by the State and OSHA.

b) Health Center Operations Update: Presented by Jack Nasser

- i. At the Family Health Services clinics, there is a higher number of patients returning to the clinics, and the numbers are almost back to pre-COVID-19. In the Dental clinics the numbers are as high as they were pre-COVID-19.
- ii. The clinics are following strict safety protocols in the workplace and for our patients. The primary and dental clinic staff are following guidelines, by wearing face coverings/masks at all times, as mandated by OSHA, keeping 6 ft. distancing and frequent 20-second hand washing. No COVID-19 infections at the workplace.

- iii. On December 10, 2020, there was a virtual Town Hall Meeting held with all the Medical Services staff. The rollout timing of the COVID-19 vaccinations and the recent surge of COVID-19 was mentioned. One of the presentations was Race Equity Training, which will be beneficial, in of providing, equitable and compassionate medical care for our culturally diverse patients.
- iv. Video Telehealth was launched online last week, for those patients that have video capability. Recently, granted Quality Improvement funds to offset the Fiscal constraints.
- v. The strategic plan and the four pillars were mentioned. Training is part of this, but how the training is applied to patient care health is important too. It was mentioned as a reminder that the social determinants of health have been a marker for quality care and benchmarks to meet to serve the underserved in our community. It was mentioned that ACEs training was provided to all providers and ACEs evaluations have been integrated for our patients. A Navigator Project was planned to be integrated in the clinics, to care for our patients in a wholistic manner, in connecting them with behavioral health or social services for example, but with COVID-19, that progress came to a halt. It was suggested by a board member, that it be on record to revisit the Board's Strategic Plan in first quarter in 2021, and celebrate successes, remove or add those things that may no longer apply or now apply, or affected by the COVID-19 pandemic. There is an opportunity for the Board to do intentional work, for outcomes that are desired.

- c) Staffing Update: Presented by Jack Nasser
  - i. No change since the November meeting. No new staff.

#### **6. Co-Applicant Agreement Update by Deputy County Counsel**

- a) Clarissa stated there was no opportunity to meet with JoAnn Parker, who is working on the Co-Applicant Agreement. She has been out of the office, therefore there was no update. It was clarified, that JoAnne sent a list of questions to HRSA, which is now with the HRSA's Legal Counsel. County's Legal Counsel is waiting on HRSA's Legal Counsel.
- b) It was requested to continue to keep this as a standing agenda item on the agenda.

#### **7. Operations Committee Updates and Reports**

- a) Encounter Summary: Presented by Janine Harris  
Janine provided and explained various charts, reviewing the encounter statistics from January through October 2020, for Primary Care, Mental Health and Dental.
- b) COVID-19 Grant Summary: Presented by Noelle Soto  
No handouts to share. She mentioned the Ryan White HIV Early Intervention Services Grant was submitted in November and accepted by the HRSA Project Officer. The three COVID-19 Grants, that were approved by the Board, were accepted for the revision process. Fiscal will work with FHS's new budget process and begin to spend funding, prior to the deadlines in March and April 2021. For the Health Center Program Grant, the budget period progress report Service Area non-competing continuation, was submitted by the due date and is with the HRSA Project Officer, for review, for the 2021/2022 period. The next goal, is the UDS (Uniform Data System) project, which the team has been working on for over five (5) years. The window for submission opens on January 1, 2021. The initial deadline for review is February 15, 2021 and March is the final deadline.

- c) QA Quarterly Report: Presented by Dr. Michele Leary  
Dr. Leary provided and explained multiple graphs, that the primary care clinics were collecting and tracking. The first set of graphs were from Partnership Healthcare patient data, tracking of various Quality Improvement Program (QIP) projects. The rest of the graphs, were Uniform Data System (UDS) Measures, collected from data of all clinic patients. The Board appreciated all the graphs, which were concise and easy to understand.

**8. Unfinished Business**

- a) None.

**9. Discussion**

Board Elections was omitted on this agenda. It was advised by Clarissa, of County Counsel, that because Board Elections was omitted on today's agenda, this topic could not be discussed at this meeting. It was requested by the Chair, that Board Elections be included on the January 20, 2021 CHB Meeting Agenda.

- a) Bylaws Discussion – Article 13 Amendments – Article XI: Executive Committee
  - i. It was asked that the CHB clerk coordinate with the three members of the Bylaws Committee, Ruth Forney, Michael Brown and Tracee Stacy, and schedule a MS Teams Meeting. The Bylaws Committee will discuss expanding the Board Executive Membership to include patient representation and review other Bylaws as necessary. It was also suggested to have the outgoing Chair on the Executive Committee, if it applies.
  - ii. Miriam requested a copy of the Bylaws be mailed to her. The CHB clerk will mail them.

- b) Board Nominations for Executive Positions – Chair, Vice Chair, Executive Committee.

Nominations were made as follows:

Chair – Ruth Forney and Brandon Wirth

Vice Chair – Brandon Wirth and Jim Jones

Executive Committee – Katrina Morrow and Tracee Stacy

The Executive Committee currently consists of the Chair, Vice Chair and a Board Member at large. It was agreed at the January meeting, the Bylaws Committee will present a proposal to change the membership of the Executive Committee and present it to the Board and then vote on the Bylaws recommendations.

**10. Acton Items**

- a) Approve the 2021 Annual Calendar
  - i. Dr. Leary mentioned that there is a QA Review noted in January 2021, but it should be in December. It was noted that in December is the Quarterly QI Report.

Move motion to approve the Family Health Services Community Healthcare Board 2021 Annual Calendar

Motion by Miriam Johnson, seconded by Tracee Stacy

Discussion: None

Aye: Ruth Forney, Michael Brown, Tracee Stacy, Brandon Wirth, Anthony Lofton, Katrina Morrow, Robert Wieda, Miriam Johnson, Gerald Hase, Jim Jones

Nay: None

Motion Caries

## 11. Board Member Comments

- a) Jim Jones: – Tracee asked earlier about COVID-19 numbers and how many are filling hospital beds. The information can be found online, if you type COVID-19 Hospitalization Tracking Project, in the search engine. It takes you to the University of Minnesota web site. You can search by county. It shows total number of beds occupied by COVID-19. Currently in Solano County, (ICU & all other beds), there is 14.8% available ICU capacity and 34.2% of ICU beds are COVID-19 cases.
- b) Katrina: – In the Mental Health division they have a peer support specialist that comes out to guide the patient through some things, while they are waiting. Is that offered at the clinics, so the patient can be asked, for example when a patient is asked if they want a flu shot or a mammogram? Dr. Leary mentioned there has been a long time wish that there should be a way for patients to directly import their screening testing, into their electronic medical record system. This would simplify being able to track all the information as opposed to a person doing the screening. Due to short staffing at the clinics, there isn't anyone available to do screenings for those waiting. It would require additional funding to incorporate that. This is discussed often.
- c) Ruth and Miriam: – Thank you to the Board Members and congratulations to all those nominated.
- d) Ruth: – She mentioned talk of another stimulus package, and it included households, and she hoped it will come out soon to help relieve some of the pressure from government and locals.
- e) Tracee: - Tracee asked about the EHR. Money was invested to pursue training and utilize the EHR to its fullest. Any updates? Dr. Leary mentioned that in general, some pieces have been turned off, to recoup funds or they are using everything that is currently available and looking at trying to camp on low cost options for some of the newer initiatives, like tele video.
- f) Ruth: – She mentioned contracts, which was discussed a couple meetings ago and that maybe it's time to review those contracts. At some point these could be reviewed by the Board. Dr. Leary mentioned there was money set aside for training, and to have NextGen observe the clinic's process, but due to COVID-19 and the budgetary cutbacks, this didn't occur. It was stated that we need to know all that the NextGen has to offer, but it requires training, so it's circular.
- g) Tracee: – It was requested that the Board be given updated budget information. For example, what has been discontinued, or what monies have been moved, due to the deficit. It was recognized by the chair that there seems to be a disconnect with the budget information, but there are monthly FHS Finance Committee Meetings that the members can attend. These types of questions can be brought up at the Finance Committee Meetings. Jack mentioned the FHS Finance Committee, scheduled the 4<sup>th</sup> Wednesday of each month and told the Board Members they have always been invited to ask questions.
  - i. Debbie offered that the Fiscal Team in HSS could provide a budget education or training to the Board Members, so the Board has an understanding how the budget comes together. The Board can notify Debbie, when and how to share the information. It can be presented in smaller segments at the Board Meeting. She stated we are going into the budget season.
  - ii. Ruth suggested to possibly have a Board Summit to discuss the Bylaws or the Budget. It would be helpful.
  - iii. Jim mentioned that according to the Bylaws, the Board is supposed to review and approve financial priorities and recommend approval of the budget. It was clarified that the Board should have an understanding, kept informed and they can make

recommendations. Brandon clarified that the Board is a governance over the FHS budget, not in the process.

- iv. It was mentioned that the FHS Finance Committee meeting is recorded and available online.

#### **12. Parking Lot Items**

- a) Finance: Fiscal Report from Health & Social Services Administration
- b) FHS Contracts (NextGen) – Names and what services are covered.
- c) Health Center Marketing Campaign & Website Design
- d) The IHI Quadruple Aim Initiative \*Health Center Practices\*

#### **13. NEXT COMMUNITY HEALTHCARE BOARD MEETING**

DATE: January 20, 2021  
TIME: 12:00pm  
TO JOIN: Telephone Conference Call  
Dial: +1 (323) 457-3408  
Conference ID: 299 423 65#

#### **14. Adjourn**

Move motion to Adjourn Meeting  
Motion by Miriam Johnson, Seconded by Brandon Wirth  
Discussion: None

Aye: Ruth Forney, Michael Brown, Tracee Stacy, Brandon Wirth, Anthony Lofton, Katrina Morrow, Robert Wieda, Miriam Johnson, Gerald Hase, Jim Jones  
Nay: None  
Motion Carries

#### **HANDOUTS:**

- CHB December 2020 Agenda
- CHB November 18, 2020 Meeting Minutes
- October 2020 RCM Finance Committee Reports
- CHB Clinical Quarterly QI Report
- CHB 2021 Calendar