



Ventura County Community Health Center (CHC) Board Meeting Minutes

Theresa Cho, MD
Ventura County Ambulatory Care
Chief Executive Officer
Medical Director
CHC Executive Director

Marth Ann Knutson
County of Ventura
Assistant County Counsel

Chaya Turrow
CHC Board Clerk

Meeting Minutes
February 22, 2024
12:30 - 2:00 PM

2240 E Gonzalez Rd,
Suite 200
Oxnard, CA 93036

CHC BOARD MEMBERS:

DAVID TOVAR, District 3
Chair

RALPH REYES, District 3
Vice Chair

ESPY GONZALEZ, District 2
Secretary

RENA SEPULVEDA, District 1
Treasurer

MANUEL MINJARES, District 3

RENEE HIGGINS, MD, District 3

MELISSA LIVINGSTON, District 4

JAMES MASON, District 5

ROBERT RUST, District 3

MONIQUE NOWLIN, District 1

Call to Order:

David Tovar called the meeting to order at 12:36 PM.

1. Roll Call

David Tovar	Present
Ralph Reyes	Present
Espy Gonzalez	Present
Rena Sepulveda	Present
Manuel Minjares	Present
Renee Higgins, MD	Present
Melissa Livingston	Absent
James Mason	Absent
Robert Rust	Absent
Monique Nowlin	Present

Roll call confirmed that a quorum was present.

2. Ventura County Staff Present

Theresa Cho, MD, HCA – Ambulatory Care
Marty Knutson – County Counsel
Lizeth Barretto, HCA – Ambulatory Care
Allison Blaze, HCA - Ambulatory Care
Elizabeth Galway, HCA – Ambulatory Care
Jason Cavender, HCA – Ambulatory Care
Michelle Meissner, HCA – Ambulatory Care
Farhan Malik, HCA – Ambulatory Care
Christina Woods, HCA – Health Care Plan
Dee Pupa, HCA – Health Care Plan
Robert Bravo – CEO’s Office

Public Present

3. Public Comments

Action Items:

4. Approval of CHC Board Meeting Agenda for February 22, 2024

Board Member Nowlin motioned to approve. Board Member Sepulveda seconded. Motion passed.

5. Approval of CHC Minutes for January 25, 2024

Board Vice Chair Reyes motioned to approve. Board Member Minjares seconded. Motion passed.

6. Appoint Strategic Plan Task Force (Ad-hoc Committee)

Board Chair Tovar, Board Vice Chair Reyes, and Board Secretary Gonzalez all volunteered to be a part of the Strategic Plan Task Force. Board Member Minjares motioned to approve these members to the task force; Board Member Nowlin seconded. The motion passed.

7. Review and Approve FY 23-24 Q1 Fiscal Report

Jason Cavender presented the FY 23-24 Q1 Fiscal Report, reporting from July through September 2023.

Mr. Cavender’s first graph showed:

New Patient Revenue, which is what we expect to collect - \$67,747,326
Net Operating Income/(Loss), which includes salaries, leases, etc. – (\$41,210,662)
Net Income/(Loss) with Supplemental Funding – \$40,326,263
Provider Visits – 344,224
There was a decrease in all four categories.

Mr. Cavender's second graph showed the Net Patient Revenue per Provider Visits. He explained that visits are down 4% due to financial mix. Board Chair Tovar asked if we expect to see a change. Mr. Cavender said, "yes, for rate reset". There will be about \$7M positive change. He also confirmed that visits are annualized.

The third report lists the Statement of Revenue and Expenses, which are the numbers behind the first graph. Services include security, cleaning, etc. Also includes Maxim contract that we used for the Expanding Covid-19 Vaccination grant, as well as the Bridge grant and Test to Treat.

Finally, Mr. Cavender shared the Statement of Supplemental Funding report. The FQHCs are at a positive net income. The average now is about 151%. The PPS should be about 280. Our organization, nationally, is probably in the middle. We are expecting increased PPS rates with higher reimbursement. The FQHC Payment/(Recoup) is usually the MediCal payments. This is the rate resetting. This will eventually be audited, and a Change in Scope will be necessary.

Board Secretary Gonzalez motioned to approve the FY 23-24 Q1 Fiscal Report. Board Treasurer Sepulveda seconded. The motion passed.

8. Review and Approve Q4 Quality Report

Michelle Meissner presented the Q4 quality report.

- She began with 2023 Year-End Performance. Out of 15 measures, three were not met: Overall Provider Rating, Childhood Immunization Status, and Dental Sealants for Children 6-9 Years. All measures are reported with QIP, UDS, or both and are included in the annual Quality Program and Plan. Ms. Pupa asked if these were based on specific percentiles? Ms. Meissner explained that they are targets and it is whether the target is met or not.

The clinics did well at the end of the year to push measures. Clinics are struggling with dental sealants and childhood immunizations. The childhood immunizations are for children under two years, with a total of 25 vaccines. Board Chair Tovar asked why? Ms. Meissner said that the flu vaccine is part of the total set and there is hesitancy. Dr. Cho explained that there has been more vaccine hesitancy since the Covid-19 pandemic. This is the second year we have not met the Overall Provider Rating, based on surveys. Board Member Minjares asked how many surveys were received. Ms. Meissner clarified that they had only received 20% back.

- Ms. Meissner shared the five metrics the team focused on the past year: Child and Adolescent Well Care Visits, Cervical Cancer Screenings, Diabetic Eye Exams, Breast Cancer Screening, and Influenza Immunizations. We partnered with GCHP and Alinea to offer mobile mammograms at Las Islas and Conejo. Planned the events in a week and a half, called 500 patients, saw 56 patients, and passed out gift cards as incentives. The team plans to run the mobile mammograms quarterly.
- Ms. Meissner also shared the Complaints and Grievances for Q4. The chart is sectioned off by their source: Administration, GCHP, Valley Care, and VCHCP. Q4 showed a slightly lower number of complaints and grievances received, but similar to the average. Additionally, Ms. Meissner shared complaints and grievances by clinic. Q4 was similar to previous quarters. Board Chair Tovar asked if there is a way to show the chart with

percentages based on size of clinic? Ms. Meissner will work on that for the next report.

The most complaints were based on accessibility, attitude/courtesy, and communication. Ms. Meissner said that accessibility is hoping to trend down with more hires. Ms. Barretto is recruiting for a trainer in communication. Ms. Woods confirmed that most of the complaints to VCHCP are related to the front office staff. Board Chair Tovar asked what “environment” meant – Ms. Meissner explained they were physical issues; dirtiness, items being broken, etc.

The incidents are reported by staff. Q3 showed a significant increase, and Q4 dropped back down by a bit, but the team is keeping an eye on the incidents. Board Chair Tovar asked if there was a correlation with the complaints – Ms. Meissner said there is nothing with analytics, but anecdotally. There has been a rise in aggression and safety. Our Facilities and Safety Manager is working to ensure the staff has tools to help with these incidents. We also provided a de-escalation training.

- The team is currently working on childhood immunization status. Two of the 10 are in the red: influenza and rotavirus. This is due to vaccine hesitancy, adequate vaccine stock for last minute events, and maximizing appointments. The team has listed their improvement efforts via investigation, standardization, and targeted outreach. The vaccine task force has been ongoing for several months and is shifting Rotarix from three to two series system wide. Also, there is a new actionable report from newborn to six months to do a targeting outreach.

The quality team’s key initiatives include development of a standard communication process, standardized training for new clinical workflows, operational feedback on metric 1-pagers and workflows, monthly clinic-level quality meetings, and bi-weekly AC Quality/Ops leadership meetings.

Finally, the team is in the process of onboarding an outreach coordinator. Rather than the clinics doing each of their own things, this will standardize the whole process.

Board Member Nowlin motioned to approve the Q4 Quality Report. Board Member Minjares seconded. The motion passed.

Presentation Items:

9. Santa Paula Clinic Presentation

Farhan Malik shared a presentation highlighting the Santa Paula Medical Clinic. Mr. Malik is the Clinic Administrator for all Santa Paula clinics and the Fillmore clinic. The Santa Paula Medical Clinic is open Monday thru Friday 8am – 5pm. There are three suites: two patient care and one administration office.

The clinic offers adult and pediatric primary care, behavioral health services, phlebotomy, retinal exams, ultrasounds, obstetrics, and diabetic care – where Dr. Cho sees patients once a month. Additionally, the Santa Paula Medical Clinic has a community health worker, comprehensive prenatal services worker, and dietician.

Some of the challenges the Santa Paula Medical Clinic faced in the previous year included:

- Homeless shelter behind the clinic – There was always a population around the clinic, which caused potential safety concerns for staff. They have added cameras and lights. Dr. Higgins asked which shelter, and Board Vice Chair Reyes believes that it is the one near the trucking company, but there is also an encampment right there. Board Member Minjares asked if there was communication with the shelter, which Mr. Malik said there hasn't been any.
- Clinic closure – The team discovered a leak and mold in May of last year. The biggest challenge was the patients. The Santa Paula Hospital Clinic is on a steep hill and many patients walk to their appointments. Mr. Malik confirmed that they did set up Uber rides for some patients. Board Member Minjares asked if the clinics have been renovated over the years? Mr. Malik said the parking lots have not, but Ms. Barretto confirmed that the interiors have been redone.
- Opened new temporary clinic – The team created this from scratch, and it just recently closed.
- Gold Coast Facility Site Review Audit before re-opening – This was pushed back three years. Received a 100% score after re-opening.

Mr. Malik shared in 2023 the clinic had ~11,000 visits, ~7% no shows, nine average visits per half day, ~1,800 outgoing referrals processed, three MDs, and two NPs.

Discussion Items:

10. Continued Business

a. Board Recruitment

With Bob Rust's resignation, we will have nine Board Members. The demographics of the CHC Board are parallel to the community served, which is exactly what it should be. While consumer members are preferred, non-consumer members can also apply. Ms. Turrow requested that the Board Members send any recommendations for new Board Members.

b. Grants Updates

Ms. Turrow shared that the Ambulatory Care Team submitted the first UDS submission on February 15, 2024. The reviewer will send additional questions and we will have to re-submit our report sometime in March. The quality team will share a detailed report during the April meeting.

11. CEO Update – Theresa Cho, MD - HCA, Ambulatory Care

Dr. Cho shared that the improvement project for Cerner, launched on February 9, is to improve workflows. It was previously hospital focused. The new improvements will help with eligibility. There have been a few bumps in the road. Gold Coast eligibility has been weird and there have been some scheduling issues.

Dr. Cho wanted to point out that with the financials, some of the costs are IT services in-house. They are expensive, but important contracts. The encounter volumes should go up, we just need a concerted effort for recruitment.

Dr. Cho congratulates the quality and data team for their hard work with UDS. Our organization served over 95,000 unique lives of those 5,000 were part of Health Care for the Homeless – both of which had a slight uptick from last year.

The Santa Paula staff did a great job moving patients around. Dr. Cho mentioned that they would like to, eventually, build a new clinic. There are talks about property at Limoneira. The trailers currently used are actually good buildings and the team hopes the damage is covered by insurance.

Board Member Minjares asked if there is a capital improvement plan for buildings. Dr. Cho said probably not to the extent needed. Currently working with Public Works and the Santa Paula Medical Clinic has been part of their capital improvement project.

Dr. Higgins asked about Cerner being resident friendly. Dr. Cho said there is a documentation policy to be signed within 48 hours. Board Chair Tovar said that hopefully GCHP can assist with recruiting new providers.

Dr. Cho said that there is a happy medium with addressing access, but still providing quality care. The clinics and quality team have done well with QIP and are projected to get 100% of the QIP funding.

12. Board Comments

Board Chair Tovar thanked the staff and the Board.

13. Staff Comments

No staff comments.

14. Adjournment – Adjourn 1:51 pm

Audio files of the CHC Co-Applicant Board meetings are available by contacting the CHC Co-Applicant Board Clerk at chcboardclerk@ventura.org

Minutes submitted by: Chaya Turrow, CHC Board Clerk

**Next Meeting: Thursday, March 28, 2024
2240 E Gonzalez Rd, Suite 200, Oxnard, CA 93036**