Sacramento County Department of Health Services Health Center Co-Applicant Board (CAB) AGENDA

Friday, September 19, 2025, 9:30 a.m.- 11:30 p.m.
Regular CAB Meeting
4600 Broadway, Community Room 2020, Sacramento, CA
Agenda materials can be found at

https://dhs.saccounty.net/PRI/Pages/Health%20Center/Co-Applicant%20Board/County-Health-Center-Co-Applicant-Board.aspx

The CAB meeting will be held in person at 4600 Broadway, Room 2020. Room 2020 is easily accessible without staff/security needing to let you in. It is at the top of the back stairs (near the Broadway entrance, not the garage entrance).

- If any Board member needs to teleconference for this meeting, a notice will be uploaded to our website at https://dhs.saccounty.gov/PRI/Pages/Health%20Center/Co-Applicant%20Board/County-Health-Center-Co-Applicant-Board.aspx by 8:30 a.m. on the morning of the meeting along with a link available to the public to observe the meeting via Teams video and/or teleconference.
- The meeting facilities and virtual meetings are accessible to people with disabilities. Requests for accessible formats, interpreting services or other accommodations may be made through the Disability Compliance Office by calling (916) 874-7642 (CA Relay 711) or email DCO@saccounty.gov as soon as possible prior to the meeting.

CALL TO ORDER (9:30 AM)

Opening Remarks and Introductions – Suhmer Fryer, Chair

- a. Roll Call and Welcome
- b. Brief Announcements

INFORMATION ITEMS (9:35 AM)

- 1. <u>Budget Updates</u>
- 2. Project Director Report
- 3. <u>Medical Director Report</u>
- 4. HRSA Service Area Competition (SAC)
- 5. HRSA HIV Grant Update
- 6. Strategic Plan Discussion (Michelle)

- 7. School-Based Health Center Sites Discussion (continued)
- 8. CAB Goals

INFORMATION/ACTION ITEMS¹ (10:45 AM)

BUSINESS ITEM I.

- August 15, 2025, CAB Meeting Minutes
- ✓ <u>Recommended Action: Motion to Approve the drafted August 15, 2025, CAB</u> Meeting Minutes

BUSINESS ITEM II.

- HRSA Service Area Competition (SAC) Grant Application
- ✓ Recommended Action: Motion to Approve Sacramento County Health Center to prepare and submit the 2025 HRSA Service Area Competition (SAC) Grant Application.

PUBLIC COMMENT (11:15 AM)

Anyone may appear at the CAB meeting to provide public comment regarding any item on the agenda or regarding any matter that is within CAB's subject matter jurisdiction. The Board may not act on any item not on the agenda except as authorized by Government Code section 54954.2.

• Should the meeting be made available via teleconference platform, public comment may also be made via Teams teleconference by using the raised hand feature. Those joining the meeting via Teams are requested to display their full name.

CLOSED SESSION

None

MEETING ADJOURNED

¹ Time estimate: 5-10 minutes per item, unless otherwise noted

Summary

All ARPA funds have been fully claimed and closed, and no further activity is expected on the ARP-Capital grant. Our core HRSA funding remains steady, with the Homeless grant expanded to include HIV support and the stand-alone HIV grant successfully closed. RHAP is running well and meeting needs without requiring the full allocation. Refugee grant renewal discussions with CDPH are underway, and everything is on track across our reimbursement-based grants.

Grant Updates

- ARPA grants have been claimed in full and ended on 12/31/24.
- We have not heard back from HRSA on the HRSA ARP-Capital grant. At this point we do not foresee any future expenditures happening for this grant.
- Our main HRSA Homeless grant now includes supplemental ongoing HIV funding, which is why our grant amount for this year is \$1,711,602.00.
- Our HIV grant ended on 8/31/25, and we will complete the Q4 claim for it soon.
 - This grant funding is being folded into our main HRSA Homeless grant.
- RHAP is going well, but we will not maximize the grant due to not needing all the funds.
 - All our grants are reimbursement grants, which means we cannot claim every dollar if we do not need every dollar to get the tasks completed.
- Currently in negotiations with CDPH on the Refugee grants for next grant year (starting 10/1/2025).
 - We will continue with the Refugee grant next grant year, and the negotiations are about figuring out the dollars and the number of arrivals.

					Clain	ns						
Grant	Start	End	Total Grant	Q1	Q2	Q3	Q4	YE TOTAL	"Remaining" FYE	FYE "Carryover"	Description	Order#
HRSA Homeless (GY 21/22)	3/1/2021	2/28/2022	1,442,813.00	525,028.85	409,661.34	365,636.93	93,296.69	1,393,623.81	49,189.19	-	HRSA Main Grant	A18551
HRSA Homeless (GY 22/23)	3/1/2022	2/28/2023	1,386,602.00	430,466.95	243,476.72	488,757.92	223,897.04	1,386,598.63	3.37	-	HRSA Main Grant	A18551
HRSA Homeless (GY 23/24)	3/1/2023	2/28/2024	1,386,602.00	636,551.39	468,785.27	281,265.34	-	1,386,602.00	€	≘	HRSA Main Grant	A18551
HRSA Homeless (GY 24/25)	3/1/2024	2/28/2025	1,424,937.00	505,574.97	388,824.82	405,317.59	88,519.94	1,388,237.32	36,699.68	-	HRSA Main Grant	A18551
HRSA Homeless (GY 25/26)	3/1/2025	2/28/2026	1,711,602.00	539,278.51				539,278.51	1,172,323.49	ŀ	HRSA Main Grant	A18551
HRSA HIV (GY 22/23)	9/1/2022	8/31/2023	325,000.00	32,303.08	23,538.87	80,692.49	75,834.42	212,368.86	112,631.14	112,631.00	HRSA HIV Grant	A18565
HRSA HIV (GY 23/24)	9/1/2023	8/31/2024	437,631.00	84,102.42	54,135.25	45,032.91	95,754.59	279,025.17	158,605.83	81,250.00	HRSA HIV Grant	A18565
HRSA HIV (GY 24/25)	9/1/2024	8/31/2025	406,250.00	75,817.92	124,852.70	61,564.39	33,734.33	262,235.01	144,014.99	01,230.00	HRSA HIV Grant	A18565
		- / /										
RHAP (GY 21/22)	10/1/2021	9/30/2022	1,958,204.00	376,643.00	375,193.00	404,048.00	389,258.00	1,545,142.00	413,062.00		RHAP CDPH Grant	A19453
RHAP (GY 22/23)	10/1/2022	9/30/2023	1,789,062.00	445,631.50	446,464.50	445,274.50	389,820.50	1,727,191.00	61,871.00		RHAP CDPH Grant	A19453
RHAP (GY 23/24)	10/1/2023	9/30/2024	1,993,648.02	231,332.52	464,469.41	470,308.40	501,073.83	1,667,184.16	326,463.86		RHAP CDPH Grant	A19453
RHAP (GY 24/25)	10/1/2024	9/30/2025	3,368,941.00	649,679.71	635,984.17	588,391.32		1,874,055.20	1,494,885.80		RHAP CDPH Grant	A19453
RHPP Main (GY 21/22)	10/1/2021	9/30/2022	82,014.00	22,153.81	23,065.09	19,677.15	17,117.95	82,014.00	-	=	RHPP Main CDPH Grant	A19459
RHPP Main (GY 22/23)	10/1/2022	9/30/2023	82,014.00	2,555.99	2,497.92	9,214.20	40,202.96	54,471.07	27,542.93		RHPP Main CDPH Grant	A19459
RHPP Main (GY 23/24)	10/1/2023	9/30/2024	139,994.00	9,371.55	4,946.30	16,803.03	26,385.53	57,506.41	82,487.59		RHPP Main CDPH Grant	A19459
RHPP UHP (GY 23/24)	10/1/2023	9/30/2024	99,934.00	-	143.69	627.97	753.88	1,525.54	98,408.46	-	RHPP UHP CDPH Grant	A19470
RHPP AHP (GY 22/23)	10/1/2022	9/30/2023	200,000.00	-	_	13,400.00	8,927.12	22,327.12	177,672.88		RHPP AHP CDPH Grant	A19469
RHPP AHP (GY 23/24)	10/1/2023	9/30/2024	199,602.00	4,153.80	5,900.57	5,586.93	27,388.22	43,029.52	156,572.48		RHPP AHP CDPH Grant	A19469
				PY Spent								
County ARPA (H-4)	1/1/2022	12/31/2024	2,701,919.00	1,720,610.77				937,396.52	43,911.71	=	County ARPA	HS-ARPA02-40
County ARPA (H-18)	1/1/2022	12/31/2024	135,000.00	79,685.93		Total Claimed	County FY24/25:	37,393.95	17,920.12	-	County ARPA	HS-ARPAII-40
County ARPA (H-19)	7/1/2022	12/31/2024	319,000.00	153,561.41				154,253.84	11,184.75	=	County ARPA	HS-ARPAII-50
ARPA (One Community Health)			750,000.00	-		Total Claimed	County FY24/25:	43,757.26	706,242.74		County ARPA	HS-ARPAII-70
			•	•		•						•
HRSA C8E ARP CIP (GY 21/22)	9/15/2021	9/14/2022	619,603.00	-	-	-	-	_	619,603.00	-	HRSA Infrastructure Support	A18564
HRSA C8E ARP CIP (GY 22/23)	9/15/2022	9/14/2023	619,603.00	-	-	-	-	-	619,603.00	-	HRSA Infrastructure Support	A18564
HRSA C8E ARP CIP (GY 23/24)	9/15/2023	9/14/2024	619,603.00	-	63,688.06	23,312.14	77,567.63	164,567.83	455,035.17	-	HRSA Infrastructure Support	A18564
HRSA C8E ARP CIP (GY 24/25)	9/15/2024	3/31/2025	619,603,00	_	-		,	-	455,035.17	_	HRSA Infrastructure Support	A18564

HRSA Project Director Updates

September 19, 2025 CAB Meeting

The Sacramento County Health Center (SCHC) continues with our management initiatives, grant applications, and improving patient care and access. We have made significant strides in strengthening our leadership team and aligning all projects with our core goals: achieving financial self-sufficiency, delivering high-quality care, and ensuring accountability, clarity, and efficiency.

The SCHC continues to look forward to hearing from HRSA regarding the Request For Information and On Site Visit, while steadily preparing the Service Area Competition Grant Application, which is on track for early submission.

Leadership and Management

We are continuing to build a stronger management team and aligning all projects with our Strategic Management Principles. We are working on enhanced communication and streamlining. Our focus remains on achieving Fiscal Self-Sufficiency, providing Quality Care, and ensuring Accountability, Clarity, and Efficiency.

We are continuing our recruitment and interviewing for a few positions; chief among them are Division Manager (DM) and Health Program Manager (HPM). Interviews for both positions have been well under way, and the SCHC leadership appreciates the CAB's involvement and participation to serve on the interview panels. It is our hope to land on candidates in October.

Grants and Financials

Our budget for the current fiscal year is currently positive due to the numerous initiatives we have deployed in the past year. We are optimistic we will not need to use general fund dollars this year. While the budget for the next fiscal year appears tight, we will provide updates as we receive more information.

We have submitted our **Operational Site Visit (OSV)** application to HRSA and are awaiting a response, we hope to meet with them this week. We have also made substantial progress on the **Service Area Competition (SAC) Grant** and appreciate the Co-Applicant Board's (CAB) support during the review process. The next three-year grant application has two upcoming due dates: a submission overview on September 22 and the detailed application on October 22.

Refugee Health Assessments

We are currently negotiating an agreement with the Department of Public Health for continued refugee health assessments for the 25/26 Federal Fiscal Year. While the estimated number of refugees is 3,400, this seems to be a high estimate. We have also developed a plan to integrate these health assessments into our same-day appointment schedules, ensuring timely care for both

HRSA Project Director Updates

September 19, 2025 CAB Meeting

new and existing patients while ensuring that we have appropriate availability for the ebb and flow of the refugee program.

Expanding Patient Access

We are actively restructuring our scheduling templates, adjusting meeting schedules, and shifting our culture to improve patient access and ensure the clinic runs smoothly. We continue to encourage patients to use telehealth appointments, which are a great option for those with transportation barriers or who prefer virtual visits.

Medical Director Updates

Key Updates for the Board

1. Stakeholder Engagement & Prioritization

- a. Presented data underscoring the need for change.
- b. Established priorities and mapped out phased timelines for implementation.

2. Organizational Structure

a. Reviewing long-term structural alignment to support sustainability and growth.

3. Implementation of Change

- a. Removed scheduling barriers for clinicians.
- b. Conducted two focused meetings: one for training, and another to review changes and gather feedback.

4. Policies, Procedures & Workflows

- a. Aligning policies and workflows with long-term goals.
- b. Secured space and support staff for Adult Medicine; now requesting the same for Pediatrics and Family Medicine.

5. Program Development

- a. Launched hybrid Refugee Program with same-day services.
- b. In progress: grant renewal and budget planning.

6. Collaboration with QI/IPA

a. Partnering with QI/IPA stakeholders to support the UCD Site Director in implementing access-to-care improvements.

7. Scheduling Optimization

- a. Reviewing and revising templates to align with clinician and clinic needs.
- b. Initiated centralized provider scheduling to manage clinic openings within 90 days, oversee time-off, and streamline urgent scheduling changes.

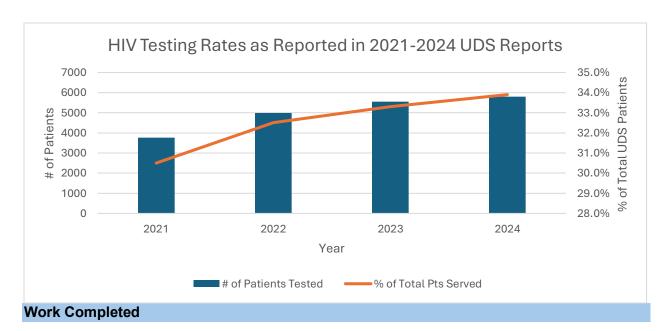
8. Communication & Contracts

- a. Strengthening communication strategies across teams.
- b. Actively addressing UCD clinician contract updates to support improved access and alignment with organizational goals.

Overview

The Sacramento County Health Center (SCHC) was approved for the Ending the Epidemic – Primary Care HIV Prevention Grant (HIV Grant) in July 2022 with a 3-year grant term of September 1, 2022 – August 31, 2025. The grant funding was broken into three distinct funding years at a rate of \$325,000 per year, plus an additional \$37,000 in supplemental funding awarded in year three, for a total award of \$1,012,000 by the end of the grant. SCHC applied for the grant to promote the incorporation of HIV preventative care into the regular day-to-day healthcare routine, to reduce stigma around seeking HIV preventive care, and to improve patient access to life-saving preventative testing, medication, and treatment. To accomplish these goals, SCHC chose to prioritize grant funding in the following focus areas: PrEP Prescribing, Outreach, Testing, and Workforce Development.

Over the three year performance period, the HIV grant allowed SCHC to increase outreach to and engagement with patients regarding the importance of HIV testing and PrEP medication availability. By the end of the grant, the Linkage to Care Navigator had engaged with **nearly 1600 patients** and their families regarding HIV services and PrEP in the health center. While a review of UDS data shows a consistent yearly increase in the number of HIV tests completed since 2021. Finally, SCHC intends to continue providing HIV prevention services despite this grant ending.



As of November 2024, SCHC staff have accomplished the following:

> PrEP Prescribing

O April 2024: Began coordinating and planning for provider training, resources, and Electronic Medical Record (EMR) tools to support providers in prescribing pre-exposure prohphylaxis (PrEP) to patients who could be exposed to HIV. Per the Center for Disease Control (CDC), PrEP reduces the risk of getting HIV from sex by up to 99% and from injection drug use by at least 74%, making it a highly effective tool in preventing HIV infection.

Ending the Epidemic – Primary Care HIV Prevention Grant Implementation Update as of September 2025

- June 2024: Initiated logistical planning necessary to be able to dispense PrEP to patients served at mobile sites.
- August 2024: Secured PrEP starter kit prescription packs to provide to patients in need in office and at mobile sites. These starter kits will be prioritized for those who are uninsured, non-SCHC individuals who are partners of SCHC patients that test positive for HIV, and those for whom accessing medication through a pharmacy is difficult due to transportation, mobility, or other barriers.
- See the Workforce Development section below for information about training provided to staff in this area. Providers were very engaged and enthusiastic about offering and prescribing PrEP more often to their patients.

Outreach

- September 2023 to present: Collaborated with the Public Health Department's Sexual Health Clinic (SHC) to launch the Mobile Medical Van (MMV), which hosts the Wellness Without Walls (W3) STI testing program and provides other routine care, testing, and treatment at various rotating homeless encampment sites. SCHC staff, including the Linkage to Care Navigator, support the van's activities in collaboration with Sexual Health Clinic staff.
- June 2023 to September 2023: Collaborated with the SHC on a Public Media Campaign that produced and funded various public media signage, including billboards and transit advertising on light rail and buses throughout the Sacramento region.
- March 2024: Began partnering with Chasnoff Media to develop an HIV prevention and anti-stigma campaign that includes both social media, county website, and print promotional materials. Initial products expected in late summer 2024. This company has produced award-winning drug abuse prevention media campaigns for the County in the past and the HIV grant's objectives will benefit from this expertise.
- August 2024: The Linkage to Care Navigator began staffing an outreach table in the waiting room of the Adult Medicine clinic and occasionally in the Pediatric Clinic on the days when she is not assisting the Mobile Medical Van on outreach.
- September 2024: The Linkage to Care Navigator attended the District 2 Fun Fair, an annual community health fair for low income individuals living in Sacramento County District 2, with HIV and PrEP promotional materials and engaged with several community members about the need to screen for HIV and how PrEP can keep them safe. See table below for full listing of all outreach events attended.

October 2024:

- First promotional poster draft designed by Chasnoff Media and delivered to SCHC with a focus on normalizing HIV preventive screening as a standard as well as less-stigmatized screenings such as: cardiovascular screenings, cancer screenings, etc.
- SCHC was awarded a \$37,000 in supplemental funds from HRSA to fund the purchase of outreach equipment such as tables, pop-ups, and other supplies needed for field outreach related to HIV.

Ending the Epidemic – Primary Care HIV Prevention Grant Implementation Update as of September 2025

- November 2024: Linkage to Care Navigator had engaged with over 500 patients and their families regarding HIV services and PrEP. She reports that patients are engaging positively with the information provided.
- January 2025: Final draft of first poster series designed by Chasnoff Media finalized and approved by the Public Information Officer (PIO).
- o April 2025: First set of posters installed throughout clinic.
- June 2025: Second set of posters installed in Refugee and Family Medicine exam rooms and hallways.
- Outreach Events:

Outreach Events Attended				
Date	Activity			
September 2024	Sacramento County – District 2 – Fun Fair			
April 2025	Minority Health & Wellness Fair			
June 2025	Health Fair – Oak Park			

> Testing

- July 2024: Began to purchase rapid point of care HIV tests for use by providers in office and on the mobile van.
- August 2024: Rapid point of care HIV tests were purchased and are now available for use by providers in office and on the mobile van.
- See below for information on education and training provided to the public and staff to support increased HIV testing.

> Workforce Development

- November 2023: Hired a new Human Services Program Planner to be dedicated to the HIV Grant through the end of the grant term to bring consistency and ensure follow-through on the grant's objectives.
- April 2024: Hired a Linkage to Care Navigator to promote PrEP while out on the mobile van, and support patients with barriers to accessing preventative care.
- 2023-2024: Provided nine separate trainings to staff and/or providers, listed below, with follow-up trainings around PrEP prescribing planned for providers.

Trainings Provided to Staff and/or Providers			
Date	Activity		
January 2023	Training - HIV & HIV Care Continuum		
March 2023	Training - Taking Sexual Health Histories		
March 2023	Training - Rapid STI Testing		
March 2023	Training - Understanding At-risk Populations		
March 2023	Gender Affirming Care - Providers		
February 2024	Gender Affirming Care - All Staff - Intro		
March 2024	Gender Affirming Culture - All Staff		
July 2024	PrEP Prescribing Training - Providers		

Sacramento County Health Center Co-Applicant Board (CAB)

Friday, August 15, 2025, 9:30 a.m.- 11:30 a.m.
Regular Meeting Minutes
4600 Broadway, Community Room 2020, Sacramento, CA
Agenda materials can be found at

https://dhs.saccounty.net/PRI/Pages/Health%20Center/Co-Applicant%20Board/County-Health-Center-Co-Applicant-Board.aspx

The CAB was held in person at 4600 Broadway, Room 2020. Room 2020 is open to the public.

- Meeting attendance followed Brown Act requirements.
- A quorum was established.

CALL TO ORDER (9:37 AM)

Opening Remarks and Introductions – Laurine Bohamera, Vice-Chair

a. Roll Call and Welcome

PRESENT

Laurine Bohamera – Vice Chair	Dr. Corina Gonzalez - Chief Medical Officer
Jan Winbigler - Member	Christina Delgado – Health Program Manager
Ricki Townsend - Member	Adam Prekeges - Admin Srvs Officer II
Eunice Bridges – Member	Corrie Brite - County Counsel
Vince Gallo - Member	Aliah Martin - Senior Office Assistant
Ona Okoro – Voted Member (Teleconferenced)	
Lizbeth Lopez – Prospective Member	

Announcements:

INFORMATION ITEMS

Budget Updates presented by Adam Prekeges

Please see handouts for detailed summary.

- There will be some discrepancies and adjustments due to the actuals differing from the EMR posted visits.
- We gave back 4.3 million to the general fund.
- School-based mental health program was not very productive, didn't pay out high amounts. New productivity tracking has been created and there has been current improvement.

<u>Interlude:</u> Eunice Bridges introduced Lizbeth Lopez, a potential CAB member. Lizbeth stated that she is a former patient of SCHC, who enjoyed the care she and her children have received here.

Ricki Townsend welcomed Lizbeth and encouraged her to hang in there while she's learning the ins and outs of the CAB.

Everyone in attendance introduced themselves to Lizbeth.

Jan Winbigler stated that if Lizbeth's interest remains after the meeting, CAB will vote on her membership at the next meeting and expressed that even though Lizbeth isn't a patient at SCHC any longer, she can still be a member if she had been seen at SCHC within 2 years of the serving on CAB.

HRSA Project Director Updates presented by Dr. Corina Gonzalez

- Strategic Management Principles
 - ✓ All projects now aligned with our 3 main goals
 - Fiscally Self-Sustaining
 - Quality Care
 - Accountability, Clarity, and Efficiency
- Staffing and Recruitment
 - ✓ Two job offers have been extended for part-time clinicians for the Pediatric and Family Medicine departments.
 - ✓ Interviews for the Division Manager (DM) position will begin in late August. The new CMO will participate in the final selection process.
 - √ To improve our financial outlook, we are working to fill other positions.
- Grants and Financials
 - ✓ Budget for FY 24/25 is currently positive, attributed to the filling of position vacancies, service streamlining efforts, and a reduction in noshow appointments
- HRSA Operational Site Visit (OSV)
 - ✓ Application has been submitted to HRSA, awaiting response.
 - √ The next three-year grant application is being prepared, due October 22, 2025.

Enhancing Our Facilities and Services

✓ New, aesthetically designed signage will continue to be developed and posted throughout the Health Center.

- ✓ Paint Re-Do in the Pediatrics Department
- Expanding Our Community Reach
 - ✓ Working on a plan to integrate Refugee Health Assessments into our same-day appointment schedules.
 - Our successful collaboration with the Homeless Engagement and Response Team (HEART) and Public Health continues to grow, recognized statewide for excellent example of inter-department cooperation.

Dr. Gonzalez stated that Refugee will be combined with same-day appointments, clarified that if Refugee schedules aren't filled, those slots will be used for same-day appointments for other departments.

- Streamlining Workflows
 - ✓ Actively working to streamline meetings, reducing their number, which produces more time to schedule and see patients.
 - ✓ QI team is revamping, working more closely with clinic staff. As part of the effort, we have received an \$18,640 grant from Health Net to help with Well-Child visits for 7–12-year-olds.

Medical Director Report presented by Dr. Corina Gonzalez

- Medical Director focus is learning institutional knowledge and current state of the health center. Several areas of improvement have been identified. Project planning for change is being analyzed. Making sure we implement change without breaking anything.
- A proposal to hire on-call County clinicians has been presented to leadership.
- Improving Access
 - ✓ Increasing clinic hours
 - ✓ Evaluating current clinician schedules and productivity
 - ✓ Virtual Medicine (Tele and Video visits). No show calls to patients by the MAs will be implemented.
- Quality
 - ✓ Starting 8/11/25, revising contracts, guidelines, and data.
 - ✓ Clinicians advised to request referrals to follow up on abnormal mammogram results
 - ✓ Expanding PAP clinic to 1 clinic per week, starting in September, which will limit and eventually eliminate outsourcing patients.
 - ✓ Expanding pediatric well checks, on-going.
 - ✓ Extra Hours Clinics: Health plans have been contacted to get permission to have these clinics during business hours
 - ✓ Mammogram Vans scheduled.
- UCD Contract
 - ✓ Analyzing best decision for the clinic due to UCD request to increase specialty services by 17%
- Operational and Leadership Optimization

- ✓ Educating clinicians and staff on options to achieve highly efficient quality patient care through revised workflows, schedules, and extended learning
- ✓ Utilizing County emails and Teams to facilitate easy access to communication and information.
- ✓ UCD schedules are now being sent to a central location to ensure efficiency

Eunice Bridges asked that all the upcoming changes be communicated across the whole clinic so that staff can assist patients efficiently and that leadership commend staff for their efforts.

Christina Delgado answered that there is a newsletter to communicate to the whole clinic.

Corrie Brite expressed that she is present today to answer any questions about Healthy Partners.

CAB stated they have no questions about Healthy Partners, but have questions about CAB applications.

Jan Winbigler asked if applications need a wet signature and if the CAB specific application was valid?

Corrie Brite answered that CAB should be using the County provided application, which can be structured to fit CAB needs. Corrie will research current standards and follow up.

CAB Member Manual Draft Review presented by Jan Winbigler

Jan Winbigler stated that CAB membership is a 4-year term. The Executive Team is working on making Member Manuals and asked for CAB and Staff feedback.

Ricki expressed that the Acronyms List should be included in the manuals.

Jan Winbigler agreed.

Christina Delgado expressed that links should be included wherever possible.

The CAB members all agreed.

Dr. Gonzalez asked what ideas CAB has for changing parts such as Organizational Charts, etc.

Jan Winbigler responded that the CAB Executive Assistant, Aliah Martin, will communicate and document changes at SCHC.

<u>School Based Health Center Sites Discussion (continued)presented by</u> Michelle Besse

Michelle Besse was not present at the CAB meeting. Adam Prekeges expressed that he heard there has been no movement at the time and suggested making this topic a reoccurring agenda item.

CAB Goals

- Record Keeping Information
 - √ List of what needs to be kept
 - √ How long we need to keep it
 - √ How often items need to be reviewed and verified.

Laurine Bohamera asked if CAB would be getting a grant update at the next meeting.

Adam answered yes and added that the money (\$325,000) that was left from the HIV grant was added to the main grant. Adam continued that we are in negotiations with the California Department of Public Health (CDPH) who funds the Refugee program. The ARP Grant has not been approved and will end next month.

Christina Delgado added that with the Quality Improvement (QI) program being integrated throughout all department clinics, the HIV grant may be utilized.

ACTION ITEMS

*Eunice Bridges Moved to Approve the July 18, 2025, CAB Meeting Minutes.

*Ricki Townsend Seconded the Motion to Approve the July 18, 2025, CAB Meeting Minutes.

Yes Votes: Eunice Bridges, Jan Winbigler, Ricki Townsend, Laurine Bohamera,

and Vince Gallo
No Votes: None
Result: Carried

*Vince Gallo Moved to Approve the Revised May 16, 2025, Meeting Minutes.

*Ricki Townsend Seconded the Motion to Approve the Revised May 16, 2025, Meeting Minutes.

Yes Votes: Eunice Bridges, Jan Winbigler, Ricki Townsend, Laurine Bohamera,

and Vince Gallo
No Votes: None
Result: Carried

PUBLIC COMMENT

Anyone may appear at the CAB meeting to provide public comment regarding any item on the agenda or regarding any matter that is within CAB's subject matter jurisdiction. The Board may not act on any item not on the agenda except as authorized by Government Code section 54954.2.

• No public comments were made.

CLOSED SESSION

None

MEETING ADJOURNED

Vice Chair Laurine Bohamera adjourned the meeting at 11:06 am.