Meeting Minutes

January 15, 2021 / 9:30 AM - 11:00 AM

Meeting Location

Due to Public Health Emergency Via Skype: To see/share documents on the screen, go to

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Conference ID: 1655150

Attendees: Elise Bluemel, Vince Gallo, Cindy Hooker, Keven Koerber^, Paula Lomazzi, Naimatullah

Sultani, AAron Washington

Staff: John Dizon, Sharon Hutchins, Sumi Mishra, Mehrabuddin Safi

^Mr, Koerber resigned his membership effective immediately during the meeting.

Topic

Opening Remarks – Paula Lomazzi, Vice-Chair – 5 minutes

- Ms. Lomazzi took roll call.
- The group reviewed the December meeting minutes.
 - Ms. Bluemel moved to approve the minutes as presented.
 - Ms. Hooker seconded the motion.
 - o VOTE: all attending members voted to approve the motion.

Brief Announcements – All – 5 minutes

- Ms. Bluemel announced that she followed up with the assignment to talk with Ms. Bennett and was able to speak with her. The conversation went well, and Ms. Bennett was very appreciative that the CAB wanted to make sure that she was doing OK and had expressed its appreciation of her contributions. Ms. Bennett will be resigning due to medical reasons.
- Mr. Koerber announced to the group that he was resigning effective immediately from the CAB. He did not give a reason.

Follow up Items – Dr. Hutchins – 10 minutes

- Dr. Hutchins presented the member attendance tracker. There was no discussion.
- Membership
 - At the 12/17/20 meeting, CAB voted unanimously to approve Ms. Washington for Community seat 3. Dr. Hutchins informed the group that this approval was sent to the Clerk of the Board of Supervisors for ratification by the BOS. We have not yet heard back from the Clerk of the Board.
 - At the moment, CAB is made up of 5 community members and 3 consumer members. Therefore, the CAB will need to make a strong effort to recruit three more consumer members as soon as possible.
 - All members will make an effort to recruit consumer members. Dr. Hutchins indicated that SCHC is adding information about the CAB to the new patient packets.
- Status update on HIV Prevention grant opportunity
 - Or. Hutchins reminded members that the CAB voted at the 1/08 meeting to approve submission of an application for a competitive grant to support HIV prevention. The Health Program Manager for Operations, Vanessa Stacholy, has been working with our partners in the Public Health (PH) division on this grant application. PH already

has a case management program for individuals with HIV (Ryan White Program) and have a Sexual Health and TB clinic as well. We are excited to partner with them to improve care for patients and increase testing. The first stage (abstract and letter of intent) grant deadline was extended to 2/08/21. The full application is due 3/1/21.

- OSV Report and Action Plan
 - o Dr. Hutchins reminded the group of the various steps in the federal process of responding to findings of non-compliance with the HRSA Compliance Manual. The Compliance Resolution Opportunity (CRO) period began when we received the preliminary written report at the end of December 2020. That 14-day period is now over. During that period, 7 items were submitted. Four of these were accepted. So we are now compliant with
 - Chapter 4, Element A: Required changes in scope = ACCEPTED
 - Chapter 5, Elements C&D: Required changes to the Credentialing and Privileging Policy and Procedure = REJECTED
 - Chapter 9, Element K: Required changes to the Sliding Fee Discount Policy and Procedures = REJECTED
 - Chapter 10, Element B: Required changes to the description of duties of the Director of Quality Improvement = ACCEPTED
 - Chapter 10, Element C: New policy and procedure on evidence-based care = ACCEPTED
 - Chapter 15, Element C: Required changes concerning drawdown of federal funds in the Grant Management Policy = ACCEPTED
 - Chapter 16, Element H: Required changes to the Billing and Collections Policy and Procedure = REJECTED
 - o Items to come before CAB in February
 - Approval of change in Organizational Chart and HRSA Project Director
 - Changes to bylaws
 - Re-revised Credentialing and Privileging PP

COVID-19 Pandemic – Dr. Hutchins – 10 minutes

- Reply to query regarding "opt in" communications for patient COVID vaccination
 - Dr. Hutchins addressed this query brought forward by a CAB member.
 - SCHC uses the Televox system that contacts patients to remind them of appointments.
 - We can use this same system to send messages to all patients.
 - We used Televox to send all patients information on COVID vaccination.
 - Patients can chose whether to receive Televox messages by phone or text.
 However, Televox takes a long time to send out a message and messages are costly (> \$1K to send the COVID message).
 - So unfortunately, we cannot use the same options that other clinics do.
 - We purchased a less expensive package for Televox, which means all additional messages are costly.
- Status of staff vaccination efforts
 - Dr. Hutchins informed the group that SCHC is starting to vaccinate staff.
 - We provided the first dose of COVID vaccine (Moderna) to 61 staff to date, and others are still signing up for vaccination appointments.
 - The Moderna vaccine comes in a vial with sufficient vaccine for 10 vaccinations, and we do not want to waste any vaccine. We are also using the staff vaccinations as a way to work out kinks so that the clinics for patients will function efficient. So, at present we are vaccinating 10 staff members per day, which produces the least impact possible on on-going patient services and care.

- Dr. Mishra added that SCHC is following the directions from the California Department of Public Health as to the vaccination prioritization tiers.
 - California is now focused on vaccinating healthcare workers and residents and staff of long-term care providers.
 - However, this week, CDPH changes the Phase 1a tiers to include patients 75 years and older. So we have permission to start vaccinating this small group of patients.
 - Out of the 100 doses of vaccine that we have so far received, we will be vaccinating approximately 80 staff members and are going to do a trial run of contacting elderly patients with comorbidities that put them at increased risk for COVID infection or severe illness. We have approximately 80 in this age group. Dr. Mishra has submitted a second order for an additional 100 doses to cover these patients, but have not yet received a response.
 - Dr. Mishra explained that she is working with nurses and managers to coordinate logistics. As soon as plans are ready, we will start contacting patients aged 75 or older with comorbidities to be vaccinated.
- Increased test positivity at Health Center
 - Or. Hutchins informed CAB members that the percentage of lab specimens being tested for COVID-19 that are positive has risen sharply. At the beginning of the pandemic, we were in the single digits. This percentage has increased as local cases surged. The first week of January saw a 45% test positivity rate at the Health Center. This means nearly half of the people tested for COVID were found to be infected with the virus.
- Additional patient deaths attributed to COVID-19
 - Dr. Hutchins let CAB members know that we have had reports of additional patient deaths due to COVID-19. Dr. Hutchins explained that Dr. Mishra is working with two doctors to get clearer records. Dr. Hutchins asked Dr. Mishra to speak to this point.
 - Dr. Mishra added that one additional patient died in May 2020 and had COVID-19 on the death certificate. The second patient we learned of last week. This individual had a number of medical issues. Their death certificate also listed COVID-19 as the underlying cause. So we know of 3 patient deaths due to COVID at this point.

Policies and Procedures - Dr. Hutchins - 10 minutes

• Dr. Hutchins indicated that the CAB will review PP 07-05 Credentialing and Privileges at the February meeting.

CAB Governance - Dr. Hutchins - 15 minutes

- Sub-Committee Updates to CAB
 - Clinical Operations *NA Hiatus in meeting schedule*
 - Finance Paula Lomazzi and John Dizon
 - Ms. Lomazzi explained that the Sub-Committee discussed policies and procedures that needed to be revised after the OSV.
 - The Sub-Committee also heard an update on the PPS rate negotiations. DHCS has asked for multiple additional documents, which is slowing the process at a time when the Admin Team is at low staffing capacity and has many competing priorities.
 - The Sub-Committee also reviewed progress on the three COVID-related HRSA grants. Ms. Lomazzi asked Dr. Hutchins to summarize.
 - Dr. Hutchins informed the group that the first grant, for ~62K, was completely spent down during the first three months; funds were

- spent on staff and getting the mobile medical shelter ready and in use for COVID evaluation and testing.
- The second grant, ~723K, is about 60% spent down; funds are being used for backfill staffing and other pandemic-related activities
- The third grant, ~261K, is specifically earmarked to pay for the Mobile Medical Center Van. This is only 39% spent down, as we have only paid one installment to the vendor.
- Ms. Lomazzi mentioned that the Finance Sub=Committee was changing its procedure regarding review of the monthly Financial Status Reports. The group will focus on an earlier time period to allow materials to be sent to members for review before the meeting.
- Dr. Hutchins mentioned that CAB will need to approve the proposed FY 2021-2022 budget for the Health Center before it is submitted downtown.
 SCHC must submit it by 02/08/21. The CAB needs to have a special meeting on 2/05/21 to review and approve the budget.
 - Members discussed the challenge, as 02/05 is also the date of the two-hour Strategic Planning meeting to conduct the Strengths, Weaknesses, Opportunities and Threats (SWOT) analysis.
 - The Group discussed delegating authority to the Finance Sub-Committee to review and approve the proposed budget on behalf of the CAB.
 - Ms. Washington made a motion to delegate authority to the Finance Sub-Committee to review and approve the budget on behalf of the CAB.
 - o Mr. Gallo seconded the motion
 - o VOTES: All members voted to approve the motion.
- Mr. Dizon provided the group an update on the November Financial Status Report. Due to staff vacancies, the Health Center is looking at approximately \$600,000 in salary savings. Back in March 2020, when the County wanted to start the COVID-19 pandemic response, one of the programs was related to caring for homeless individuals who are vulnerable. A program was put together to care for these folks. The homeless isolation shelters were charged to the Health Center' budget, even though most of those using the shelters are not Health Center patients. This will cause the Health Center to be approximately \$1 million over budget for the year. However, when the BOS decided to use the County CARES money to pay for Sheriff Department programs, it swapped money with the Sheriff's Department and put that money into the general fund. Thus, the Health Center should be able to tap this source through June 2021, rather than December 2020 (which is when the federal grant award ended).
- Governance NA Hiatus in meeting schedule
- Strategic Planning Elise Bluemel and Dr. Hutchins
 - Ms. Bluemel informed the group that the SP Sub-Committee met on 1/8
 - The Sub-Committee met and decided to extend the timeline for Strategic Planning after a presentation from SCHC leadership on unforeseen challenges with CAB originally approved the timeline in September.
 - Sub-Committee meetings will occur on Tuesdays and Fridays.
 - The Sub-Committee approved ground rules.
 - The SC also discussed external partners to invite to participate in the Strengths, Weaknesses, Opportunities and Threats (SWOT) Analysis meeting on 2/05.

- All CAB members are invited to participate in the SWOT analysis with external partners to provide key insights to assist with strategic planning.
- February meeting dates
 - Due to the need to approve many items with tight deadlines, CAB will hold two special meetings in February
 - Feb 5: Budget meeting (Finance Sub-Committee
 - Feb 15: UDS meeting (new UDS Sub-Committee)
 - The UDS report is due to HRSA on 2/15. That is a County holiday, but Dr. Hutchins proposed a special meeting on that day. We will send summary data late on 2/11 or that weekend before Monday, 2/15.
 - Ms. Washington moved that three members should constitute a quorum to approve the UDS report on behalf of the CAB.
 - Ms.Bluemel seconded the motion.
 - VOTES: All members voted to approve the motion.
- Patient Feedback Survey findings (August-September) DEFERRED, NO TIME

2021 Activity Calendar – Dr. Hutchins – 5 minutes – DEFERRED, NO TIME

Medical Director Update – Dr. Mishra – 5 minutes

- Dr. Mishra informed the group that we are still being careful with testing and only testing symptomatic or exposed individuals, due to a lack of testing supplies.
- We have purchased Point of Care antigen tests, which can return a result within 15 minutes to speed up the process. These are faster, but are not as reliable. So any negative results need to be followed up by an RNA test through Quest.
- SCHC has two of these devices, one at the Broadway site and one at the Loaves and Fishes site.
- Dr. Mishra also mentioned that the Health Center is developing protocols about when to use these new tests.
- Dr. Mishra informed the group that FDA gave an Emergency Use Authorization (EUA) for monoclonal antibody therapy for specific patients that can reduce the likelihood of progressing to severe disease and death. This treatment can only be used for those 65 and older or those with underlying conditions that increase their risk of severe disease or death due to COVID-19. It is difficult to administer these antibodies, as they require intravenous infusion. It takes about 2 hours to administer a treatment (30 minutes to prepare, 1 hour to administer, and 30 minutes to monitor). SCHC has received 45 doses of bamlanivimab and 6 doses of Regeneron. SCHC does not have a mechanism to do IV infusions in the clinic, so SCHC is looking for partners to assist in being able to provide this treatment to our patients. For our UCD HealthNet patients, we are working to collaborate with UCD Health; we will finalize this process next week. For RCMG and Nivano patients, we are still waiting to hear back from those IPAs and health plans about our options. We are also trying to figure out how to provide this treatment to Health Partners patients for which the County is financially responsible.

Next Meeting Items - All

• OSV follow up items

- Strategic Planning update
- · Revised Financial Status Report

Public Comment - Paula Lomazzi, Vice-Chair

Closing Remarks and Adjourn – Paula Lomazzi, Co-Chair

Ms. Lomazzi adjourned the meeting at 10:57 AM.

Next Meeting: February 19, 2021 (Feb 5 – SWOT, Feb 15 – UDS special meetings) / 9:30-11:00 AM

The Co-Applicant Board welcomes and encourages participation in the meetings.

Matters under the jurisdiction of the Co-Applicant Board and not on the posted agenda may be addressed by the public following completion of regular business.

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Due to the public health emergency created by the COVID-19 pandemic, in person meetings are not permitted at this time. Per the Brown Act, those attending a CAB meeting through teleconferencing are required to disclose the location from which they are calling. It is illegal to call while driving. There is a cap on how many members can attend from outside Sacramento County.

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