

HRSA Project Director / Medical Director Report to CAB January 21, 2022

1. **COVID-19 Pandemic**

- (a) Recently, we have had a large number of COVID+ staff.
- (b) Covid + patients are almost to the level of entire 2021
- (c) Increased staff absences are occurring.
- (d) We are working on ways to find coverage within County departments, State including volunteers.
- (e) We are working to increase COVID testing of staff (County supplied test kits soon) and patients
 - (i) Potential use of van for COVID evaluations –registering it as a site with HRSA
- (f) Oral treatment for covid available- we are one of the few places that has paxlovid and mulnopiravir.
- (g) Personal Protective Equipment (PPE) - we are collaborating with UCD in order for supply to meet demand.
- (h) Video Visits- pilot has occurred.

2. **Clinic Programs:**

- (a) Family Medicine- working on implementing/contracting Comprehensive Perinatal Services Program (CPSP) services via Her Health First
- (b) Refugee clinic- working with UCD to provide staffing to fill in gap
- (c) Loaves and Fishes: Sac Covered Navigator to start this Friday; Potentially establishing a UCD Program Lead for the Homeless Program
- (d) Internal Medicine- Hypertension program- looking for coverage since the Physician Assistant in the program has found another job
- (e) Healthy Partners Program- those who are 50+ in age will qualify for full scope MediCal; we are discussing what message to send out to this population.

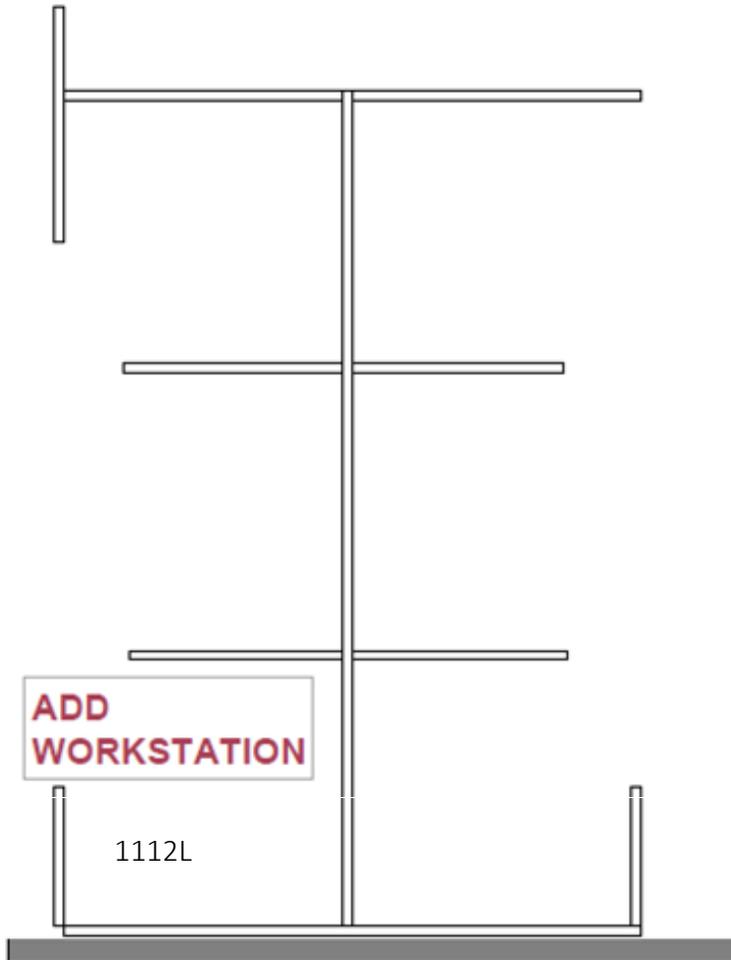
3. **Staffing**

- (a) County ARPA- after whittling down request from \$6M to \$2.xM, it is has been approved! We can keep the folks we have already hired using ARPA funding. A few more positions became available to us, i.e. a nurse for Gaps in Care Program; fund a provider in Refugee clinic
- (b) Division Manager and 2 RNs, 2 OAs- positions approved. We are in the recruitment phase.
- (c) Nurse and Sr. Office Assistant for Enhanced Care Management- will go before Board of Supervisors next week
- (d) Growth requests for Fiscal Year 22-23-> Two public health aides; one medical assistant; permanent nurse for Quality Improvement program-> all funded with revenue which means that they will likely be approved
- (e) Increase to UCD staff- working on that now; current projections look like a 1.5 FTE increase but some of the cost to be funded different ways (County ARPA, Refugee grant)

4. **Space**

- (a) We are working with HRSA to be able to start work on the ARP Infrastructure grant. We received drawings from the Architectural Services Division for the conversion of 3 Refugee interview rooms to Family Medicine Exam Rooms – see handout.
- (b) We have developed the final plan for using new building space – see handout.

1112 - CALL CENTER



1112L

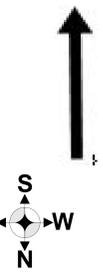
72 sq ft

SECOND FLOOR

Pink shaded spots are assigned to other divisions or departments.
 Burgundy font indicates proposed changes.



PCC | Primary Care Center
 4600 Broadway, 2nd Floor



SacCovered;
 Behavioral Health;
 Refugee 1st visit / linkage;
 Member Services

Pediatrics,
 CIRCLE Clinic,
 Dental

Family Medicine,
 Vaccines,
 Refugee Program

Women,
 Infants and
 Children
 (WIC)
 Public Health

ECM/
 CCC
 Team
 Cubicles

Referrals Team
 Cubicles,
 including 3
 RNs - 15

Medicals
 Record and
 Scanning - 4

2638
 SUPERVISING RN

2637
 Sr. Health
 Program Coord

2636
 HS PROGRAM
 PLANNER
 ALONGI

2635
 HEALTH
 PROGRAM
 MANAGER

2634
 Lactation Room

2633
 HS PROGRAM
 PLANNER
 GIORDANO

2632
 ECM/CCC RN

2631
 DHA

2630
 BH Counselor

2629
 BH Counselor

2628
 BH Counselor

2627
 BH MA Office

2626
 HSC - Member services

2625
 HSC - Member services

2624
 HSA x 2

2623
 Refugee 1st visit MA

2622
 Refugee 1st visit MA

2621
 Refugee 1st visit MA

2620
 SAC Covered/ LNSC

2619
 Volunteers - 2 desks

2618
 Reception Windows

2617
 REFUGEE OA Window 3

2616
 REFUGEE OA Window 2

2615
 REFUGEE OA Window 1

2614
 BH OA

2613
 REFUGEE OA

2612
 REFUGEE OA

2611
 REFUGEE OA

2610
 REFUGEE OA

2609
 REFUGEE OA

2608
 REFUGEE OA

2607
 REFUGEE OA

2606
 REFUGEE OA

2605
 REFUGEE OA

2604
 REFUGEE OA

2603
 REFUGEE OA

2602
 REFUGEE OA

2601
 REFUGEE OA

2600
 REFUGEE OA

2599
 REFUGEE OA

2598
 REFUGEE OA

2597
 REFUGEE OA

2596
 REFUGEE OA

2595
 REFUGEE OA

2594
 REFUGEE OA

2593
 REFUGEE OA

2592
 REFUGEE OA

2591
 REFUGEE OA

2590
 REFUGEE OA

2589
 REFUGEE OA

2588
 REFUGEE OA

2587
 REFUGEE OA

2586
 REFUGEE OA

2585
 REFUGEE OA

2584
 REFUGEE OA

2583
 REFUGEE OA

2582
 REFUGEE OA

2581
 REFUGEE OA

2580
 REFUGEE OA

2579
 REFUGEE OA

2578
 REFUGEE OA

2577
 REFUGEE OA

2576
 REFUGEE OA

2575
 REFUGEE OA

2574
 REFUGEE OA

2573
 REFUGEE OA

2572
 REFUGEE OA

2571
 REFUGEE OA

2570
 REFUGEE OA

2569
 REFUGEE OA

2568
 REFUGEE OA

2567
 REFUGEE OA

2566
 REFUGEE OA

2565
 REFUGEE OA

2564
 REFUGEE OA

2563
 REFUGEE OA

2562
 REFUGEE OA

2561
 REFUGEE OA

2560
 REFUGEE OA

2559
 REFUGEE OA

2558
 REFUGEE OA

2557
 REFUGEE OA

2556
 REFUGEE OA

2555
 REFUGEE OA

2554
 REFUGEE OA

2553
 REFUGEE OA

2552
 REFUGEE OA

2551
 REFUGEE OA

2550
 REFUGEE OA

2549
 REFUGEE OA

2548
 REFUGEE OA

2547
 REFUGEE OA

2546
 REFUGEE OA

2545
 REFUGEE OA

2544
 REFUGEE OA

2543
 REFUGEE OA

2542
 REFUGEE OA

2541
 REFUGEE OA

2540
 REFUGEE OA

2539
 REFUGEE OA

2538
 REFUGEE OA

2537
 REFUGEE OA

2536
 REFUGEE OA

2535
 REFUGEE OA

2534
 REFUGEE OA

2533
 REFUGEE OA

2532
 REFUGEE OA

2531
 REFUGEE OA

2530
 REFUGEE OA

2529
 REFUGEE OA

2528
 REFUGEE OA

2527
 REFUGEE OA

2526
 REFUGEE OA

2525
 REFUGEE OA

2524
 REFUGEE OA

2523
 REFUGEE OA

2522
 REFUGEE OA

2521
 REFUGEE OA

2520
 REFUGEE OA

2519
 REFUGEE OA

2518
 REFUGEE OA

2517
 REFUGEE OA

2516
 REFUGEE OA

2515
 REFUGEE OA

2514
 REFUGEE OA

2513
 REFUGEE OA

2512
 REFUGEE OA

2511
 REFUGEE OA

2510
 REFUGEE OA

2509
 REFUGEE OA

2508
 REFUGEE OA

2507
 REFUGEE OA

2506
 REFUGEE OA

2505
 REFUGEE OA

2504
 REFUGEE OA

2503
 REFUGEE OA

2502
 REFUGEE OA

2501
 REFUGEE OA

2500
 REFUGEE OA

2499
 REFUGEE OA

2498
 REFUGEE OA

2497
 REFUGEE OA

2496
 REFUGEE OA

2495
 REFUGEE OA

2494
 REFUGEE OA

2493
 REFUGEE OA

2492
 REFUGEE OA

2491
 REFUGEE OA

2490
 REFUGEE OA

2489
 REFUGEE OA

2488
 REFUGEE OA

2487
 REFUGEE OA

2486
 REFUGEE OA

2485
 REFUGEE OA

2484
 REFUGEE OA

2483
 REFUGEE OA

2482
 REFUGEE OA

2481
 REFUGEE OA

2480
 REFUGEE OA

2479
 REFUGEE OA

2478
 REFUGEE OA

2477
 REFUGEE OA

2476
 REFUGEE OA

2475
 REFUGEE OA

2474
 REFUGEE OA

2473
 REFUGEE OA

2472
 REFUGEE OA

2471
 REFUGEE OA

2470
 REFUGEE OA

2469
 REFUGEE OA

2468
 REFUGEE OA

2467
 REFUGEE OA

2466
 REFUGEE OA

2465
 REFUGEE OA

2464
 REFUGEE OA

2463
 REFUGEE OA

2462
 REFUGEE OA

2461
 REFUGEE OA

2460
 REFUGEE OA

2459
 REFUGEE OA

2458
 REFUGEE OA

2457
 REFUGEE OA

2456
 REFUGEE OA

2455
 REFUGEE OA

2454
 REFUGEE OA

2453
 REFUGEE OA

2452
 REFUGEE OA

2451
 REFUGEE OA

2450
 REFUGEE OA

2449
 REFUGEE OA

2448
 REFUGEE OA

2447
 REFUGEE OA

2446
 REFUGEE OA

2445
 REFUGEE OA

2444
 REFUGEE OA

2443
 REFUGEE OA

2442
 REFUGEE OA

2441
 REFUGEE OA

2440
 REFUGEE OA

2439
 REFUGEE OA

2438
 REFUGEE OA

2437
 REFUGEE OA

2436
 REFUGEE OA

2435
 REFUGEE OA

2434
 REFUGEE OA

2433
 REFUGEE OA

2432
 REFUGEE OA

2431
 REFUGEE OA

2430
 REFUGEE OA

2429
 REFUGEE OA

2428
 REFUGEE OA

2427
 REFUGEE OA

2426
 REFUGEE OA

2425
 REFUGEE OA

2424
 REFUGEE OA

2423
 REFUGEE OA

2422
 REFUGEE OA

2421
 REFUGEE OA

2420
 REFUGEE OA

2419
 REFUGEE OA

2418
 REFUGEE OA

2417
 REFUGEE OA

2416
 REFUGEE OA

2415
 REFUGEE OA

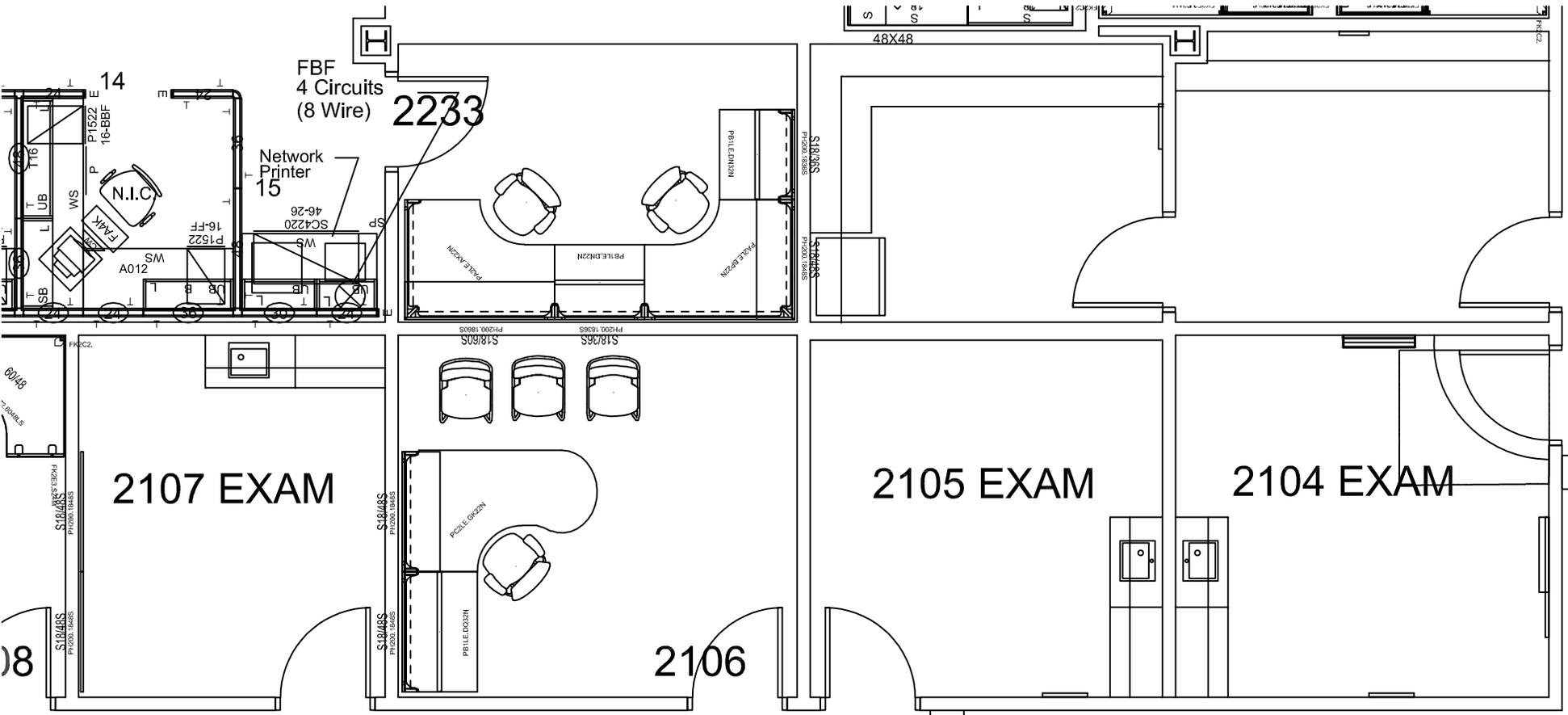
2414
 REFUGEE OA

2413
 REFUGEE OA

2412

COSTING PLAN
PCC - OFFICE TO EXAM ROOM CONVERSION
JANUARY 6, 2022
COUNTY ARCHITECTURAL SERVICES DIVISION

9'-13/8"

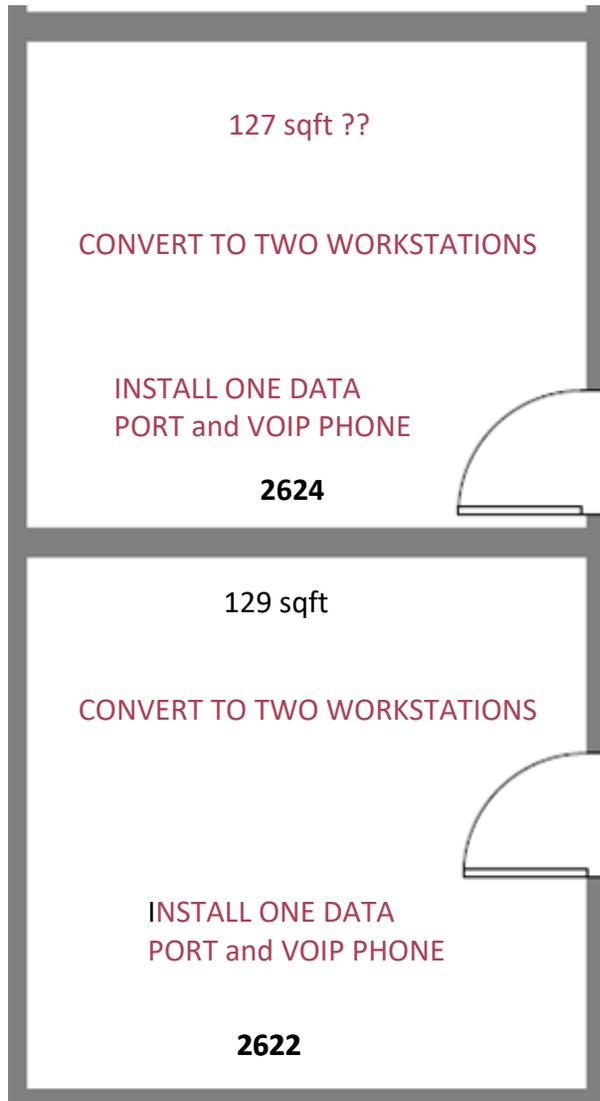


Refugee Clinic

BUDGETTING NOTES:

1. REMOVE OFFICE FURNITURE IN RM'S 2104, 2105, 2107
2. DEMISING WALL BETWEEN 2104 & 2105 HAS (E) PLUMBING - PREVIOUSLY EXAM ROOMS THAT WERE CONVERTED TO OFFICES- ADD BASE CABINETS, SINK AND UPPERS.
3. MINOR MODIFICATION OF ELECTRICAL AND NEW DATA DROPS FOR CARTS OTHERWISE THE ROOM WAS PREVIOUSLY POWERED AS AN EXAM ROOM.
4. 2107 WILL BE CONVERTED FROM A OFFICE TO EXAM ROOM- NEW BASE CABINETS, SINK, UPPERS, AND ALL NEW PLUMBING EXTENDED FROM STAFF RESTROOMS 2221.
5. ASSUME NEW FLOORING, PATCH & REPAIR WALLS, PAINT ROOMS.
6. ASSUME NEW DATA FOR EACH NEW EXAM ROOM.

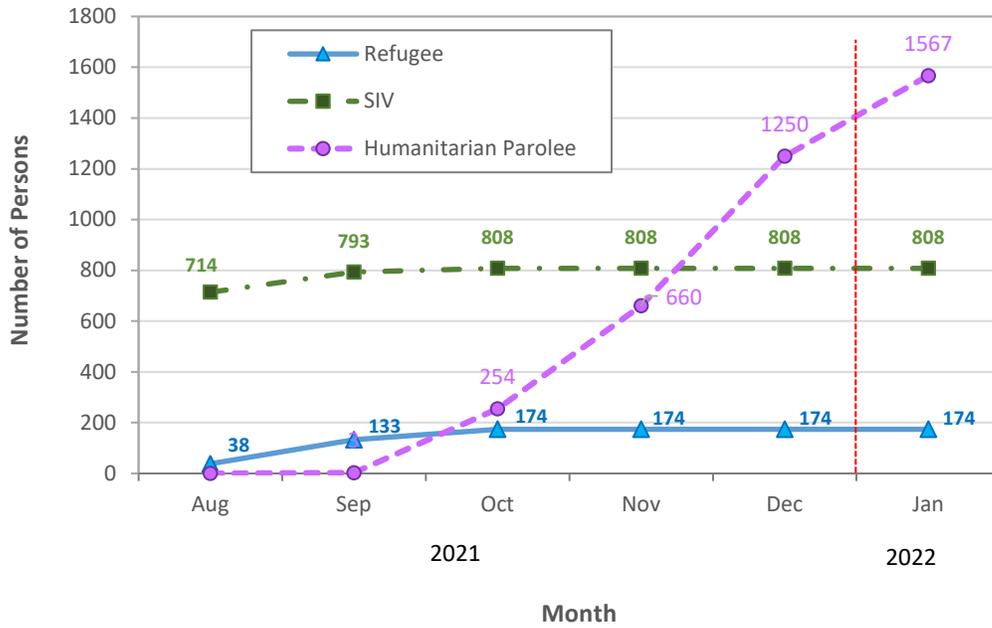
ROOM 2622 and 2624



Drawing eliminates the room between these two rooms.

Refugee Surge

Cumulative Number of Afghan New Arrivals Who Left US Bases Intending to Settle in Sacramento, by Month



Period	5
Current Month	November
Percentage of Year	42%

CAB Financial Report

Line Item	Budget	Current Month	Year to date	Encumbrance	Total (YTD+Encumbrance)	YTD	Notes
						Percentage (Total/Budget)	
Revenue							
Inter/Intrafund Reimbursements	\$9,525,910	1,526,128	2,155,698	\$0	\$2,155,698	23%	Project to reduce HP reimbursement by ~\$300k
Intergovernmental Revenue	\$10,828,547	1,097,815	3,768,073	\$0	\$3,768,073	35%	\$1.7M SCOE revenue budgeted but will be mostly unrealized. Medi-Cal revenue trending high
Charges for Services	\$52,000	7,072	31,395	\$0	\$31,395	60%	CMISP old pre-2014 service charges
Miscellaneous Revenue	\$17,368	581,231	652,005	\$0	\$652,005	3754%	PY Reconciliation \$593,931
Total Revenue	\$20,423,825	\$3,212,247	\$6,607,171	\$0	\$6,607,171	32%	
Expenses							
Personnel	\$11,351,014	790,820	4,009,106	\$0	\$4,009,106	35%	8 Vacancies (7 Perm, 1 LT) Hiring in process
Services & Supplies	\$10,314,243	773,700	2,616,470	5,171,794	\$7,788,264	25%	\$1.7M SCOE expenditures budgeted that will not be utilized
Other Charges	\$449,477	1,962	146,050	322,758	\$468,808	32%	
Equipment	\$247,077	47,255	141,765	105,311	\$247,076	0%	Mobile medical van paid off, encumbered amount is for radiology upgrades
Intrafund Charges (Allocation costs)	\$2,211,906	249,330	597,991	\$0	\$597,991	27%	
Total Expenses	\$24,573,717	\$1,863,067	\$7,511,383	\$5,599,863	\$13,111,246	31%	

**GRAND TOTAL
(Net County Cost)** **-\$4,149,892** **\$1,349,179** **-\$904,212**

HRSA Grants	Start	End	Total Grant	FY21/22 Amount	Notes
HRSA (HCH)	3/1/2021	2/28/2022	\$ 1,386,602	\$ 924,401	
HRSA (HCH)	3/1/2022	2/28/2023	\$ 1,386,602	\$ 462,201	
HRSA ECT H8E*	5/1/2021	4/30/2022	\$ 261,424	\$ 261,424	Mobile medical van, Covid testing. May have ~\$20k unspent
HRSA H8F ARPA**	4/1/2021	3/31/2022	\$ 1,279,248	\$ 1,145,043	Jul-Sep claim very low, working to resolve issue
HRSA H8F ARPA*	4/1/2022	6/30/2023	\$ 1,254,627	\$ 469,880	
HRSA C8E ARP CIP*	9/15/2021	9/14/2022	\$ 619,603	TBD	Construction timeline and costs have not been determined
*Not in FY21/22 budget					
**\$524,244 in FY21/22 budget					

Governance Committee Report to CAB
January 21, 2022

1. Strategic Plan, Space	Recommendation
2. Recruitment of New CAB Members	Information
3. Board Member Training	Information

1. **Strategic Plan** - The plan for maximizing space at 4600 Broadway.
Governance received detailed information on the finalized draft plan for space at 4600 Broadway and approve of the proposed changes. Shifting staff to their new designated working space should begin in April 2022.

Governance recommends CAB accept the space plan as written.

2. **Recruitment of New CAB Members**
Governance reviewed three new member applications and recommends membership for all.

Loraine Bohamera
Nicole Miller
Dianna Tucker

3. **Board Member Training Opportunity**
The California Primary Care Association is offering new Board member training in February. The Health Center has funding to send some, but not all Board members. Governance recommended that Mr. Sultani attend and he accepted the invitation.

January 2022: Strategic Plan Monitoring Report to CAB Governance

Priority 1: Sufficient and Appropriate Space to Carry Out the SCHC's Mission				
Strategy 1: Identify funds to expand to new buildings and enhance space at Broadway and Loaves and Fishes.				
Status	Item	To Whom	When	What
	Strategy 2: Maximize existing space.			
Ready	The plan for maximizing space at 4600 Broadway.	CAB	Jan 2022	Finalized draft plan
Priority 2: Sufficient and Appropriate Staffing to Carry Out Mission				
Strategy 3: Write a business case for staffing needs and present it to County Executives, the Board of Supervisors and/or others who have influence over budgetary decisions.				
NOT ON TRACK	Proposed business case	CAB	Jan 2022	Present final draft of business case for approval.
Priority 3: Maintain the historical focus on serving individuals experiencing homelessness				
Strategy 2: Improve care to existing and/or assigned patients experiencing homelessness.				
On track	CAB will review and make a decision regarding expanded services at L & F.	CAB	Jan 2022	Review and approve the proposed expanded services at L&F

Working with Department Facilities personal and the Architectural Services Division, SCHC has finalized the proposal for maximizing staff at 4600 Broadway and will not, at least at this time, need to more staff or programs off site. We are waiting for a final estimate from Architectural Services for the work and approval from HRSA to use funds from the HRSA American Rescue Plan (APR) Infrastructure grant for this purpose.

While the consultant has been working on understanding SCHC's programs, its current staffing, and its needs, progress has been delayed by technical issues and long-term leave time for key supervisory staff. It will not be possible to complete this for inclusion in the County's 22-23 budget planning. Fortunately, several recent requests for limited term staff for the upcoming fiscal year were approved and SCHC also continues to have HRSA ARPA funded staff. Dr. Mishra is now planning to submit the business case ahead of the County's 23-24 fiscal year.

Dr. Mishra is planning to update CAB at the 1/21 meeting on small changes to the plan for expanded services at Loaves and Fishes that she presented to CAB earlier.

**SACRAMENTO COUNTY HEALTH CENTER CO-APPLICANT BOARD (CAB)
HEALTH CENTER POLICIES– REVIEW SCHEDULE**

Required Review by Health Resources Services Administration (HRSA)				Process		
No.	Name	Policy Effective Date	Policy Description	Sub-Committee to Review	SC Review/ Recommend date	CAB Review / Approval date
REQUIRED ANNUALLY or SOONER IF SUBSTANTIVE POLICY CHANGE						
11-01	Sliding Fee Discount Requires annual review Last Approved 03/19/21	10-01-15	As a grantee for healthcare services from the Health Services Resources Administrating (HRSA), Primary Health Clinic Services is required to abide by certain regulations regarding access to care for the community. These regulations are found in Sections 330 (k) (3) (G) of the Public Health Service Act. One requirement is that that no patient will be denied health care services due to his/her inability to pay for such services and that any fees or payments required by the health center for such services will be reduced or waived to enable the center to fulfill this requirement. Clinic Services offers a sliding fee discount to low income patients. A sliding fee discount, based on income, is used to assess their charges.	Finance	02/16/22	02/18/22
REQUIRED ONCE EVERY THREE YEARS or SOONER IF SUBSTANTIVE POLICY CHANGE						
01-01	Quality Improvement Triennial Review – Due 2023 Last Approved 06/18/21	09-29-10	Clinic Services leadership is committed to improving services for enrollees. In order to evaluate performance, indicators are created, monitored, analyzed, and operations are adjusted in order to enhance service provision.	Clinical Operations	2023	2023

**SACRAMENTO COUNTY HEALTH CENTER CO-APPLICANT BOARD (CAB)
HEALTH CENTER POLICIES– REVIEW SCHEDULE**

Required Review by Health Resources Services Administration (HRSA)				Process		
No.	Name	Policy Effective Date	Policy Description	Sub-Committee to Review	SC Review/ Recommend date	CAB Review / Approval date
REQUIRED ONCE EVERY THREE YEARS or SOONER IF SUBSTANTIVE POLICY CHANGE						
01-02	CAB Authority Triennial Review – Due 2024 Last Approved 06/18/21	01-31-13 Rev. CAB Approval	Sacramento County Clinic Services adheres to the Health Services and Resource Administration (HRSA) requirement to establish and maintain a governing board composed of consumers and community members with specific responsibility for guidance and oversight of the program. As a public entity grantee, specific responsibilities are delineated for the Co-Applicant Board and the County Board of Supervisors.	Governance	06/08/22	06/17/22
01-03	CAB Conflict of Interest Triennial Review – Due 2024 Last Approved 04/16/21	01/31/13 Rev. CAB approval	Sacramento County Clinic Services adheres to the Health Services and Resource Administration (HRSA) requirement to maintain written standards of conduct covering conflict of interest. Conflicts of interest involving the Sacramento County Health Center Co-Applicant Board must be identified and disclosed when the Co-Applicant Board member is considering entering into a transaction, arrangement, policy, financial, or other work that might benefit the private interest of the Board member. This policy is intended to supplement but not replace any applicable state and federal laws governing conflict of interest that are applicable to nonprofit and charitable organizations.	Governance	2024	2024

**SACRAMENTO COUNTY HEALTH CENTER CO-APPLICANT BOARD (CAB)
HEALTH CENTER POLICIES– REVIEW SCHEDULE**

Required Review by Health Resources Services Administration (HRSA)				Process		
No.	Name	Policy Effective Date	Policy Description	Sub-Committee to Review	SC Review/ Recommend date	CAB Review / Approval date
REQUIRED ONCE EVERY THREE YEARS or SOONER IF SUBSTANTIVE POLICY CHANGE						
01-04	CAB Member Recruitment, Retention, and Development Triennial Review – Due 2023 Last Approved 07/16/21	10-05-16	Sacramento County Health Center Co-Applicant Board meets Health Resources and Services Administration (HRSA) requirements and successfully fulfills mandated functions by careful recruitment, retention, and development efforts.	Governance	2023	2023
01-05	Program Design Triennial Review – Due 2023 Last Approved 10/16/20	02-19-15	Sacramento County Clinic Services operates under guidance from the federal Health Resources and Services Administration (HRSA) and State Department of Medi-Cal Managed Care to provide healthcare services for identified special populations including individuals experiencing homelessness, individuals with co-occurring physical health and mental health conditions, and individuals recently incarcerated.	Clinical Operations	2023	2023
01-07	Healthy Partners Program Design Triennial Review – Due 2022	12-08-15	Sacramento County Healthy Partners program provides primary care to low income undocumented adults who are residents of Sacramento County and meet eligibility criteria.	Clinical Operations	<i>07/07/22</i>	<i>07/15/22</i>
01-08	Vision, Mission, Values Triennial Review – Due Prior to Strategic Planning - 2023 Last Approved 12/19/20			Governance	November 2023	November 2023

**SACRAMENTO COUNTY HEALTH CENTER CO-APPLICANT BOARD (CAB)
HEALTH CENTER POLICIES– REVIEW SCHEDULE**

Required Review by Health Resources Services Administration (HRSA)				Process		
No.	Name	Policy Effective Date	Policy Description	Sub-Committee to Review	SC Review/ Recommend date	CAB Review / Approval date
REQUIRED ONCE EVERY THREE YEARS or SOONER IF SUBSTANTIVE POLICY CHANGE						
01-09	Clinical Performance Management Triennial Review – Due 2022 Last Approved 07/17/20	01/17/19	SCHC adheres to regulatory requirements related to clinical performance through on-going data collection, management and reporting efforts to improve patient satisfaction and health outcomes. Clinical performance measurement provides a balanced, comprehensive look at the Health Center’s services toward common conditions affecting our underserved communities and is supported by the Quality Improvement infrastructure. Primary care medical home establishes and maintains a culture of data-driven performance improvement on clinical quality, efficiency and patient experience. Clinical performance measurement is a planned and systematic approach to analyze and improve the quality of health care services.	Clinical Operations	11/10/22	11/18/22
02-05	Variance Reporting Triennial Review – Due 2023 Last Approved 11/20/20	12-17-13 (06-28-11)	Primary Health Clinic Services has a process for problem resolution, which includes timely investigation, response, and feedback. All service concerns will be addressed in a timely, sensitive, and culturally competent manner at the lowest possible level.	Clinical Operations	2023	2023

**SACRAMENTO COUNTY HEALTH CENTER CO-APPLICANT BOARD (CAB)
HEALTH CENTER POLICIES– REVIEW SCHEDULE**

Required Review by Health Resources Services Administration (HRSA)				Process		
No.	Name	Policy Effective Date	Policy Description	Sub-Committee to Review	SC Review/ Recommend date	CAB Review / Approval date
REQUIRED ONCE EVERY THREE YEARS or SOONER IF SUBSTANTIVE POLICY CHANGE						
03-04	Emergency Medical Response Team Triennial Review – Due 2024 Last Approved 06/18/21	12-29-16	Primary Care Center has identified a team response to medical emergencies. The Emergency Medical Response Team (EMRT) will provide emergency care by employees trained to respond to medical emergencies and stay with patient until paramedics arrive. Assigned EMRT will respond to all clinic area emergencies within the Primary Care Center building.	Clinical Operations	2024	2024
03-05	After Hours Services Triennial Review – Due 2024 Last Approved 04/16/21	08-13-12	The Primary Care Center has established protocol to ensure patients have access to a medical professional after hours. Calls will be managed through the following: automated phone tree, County Communication Center, medical advice line or on-call clinician, as appropriate.	Clinical Operations	2024	2024
04-12	Patient Satisfaction Survey Triennial Review – Due 2024 Last Approved 05/21/21	05-07-15	Clinic Services has a standardized approach to obtain and review information about the patient’s perceived quality and satisfaction of care.	Clinical Operations	2024	2024
07-05	Credentialing and Privileges Triennial Review – Due 2024 Last Approved 02/19/21	02-19-15	Credentialing policies and procedures shall address the process for appointments and reappointments of Medical Staff and licensed contracted staff for Primary Health Clinical Services. Credentialing standards and criteria are established commensurate with those of the National Council for Quality. Credentialing and privileging shall be conducted without regard to race, ethnicity, national origin, color, gender, age, sexual orientation, or religious preference.	Clinical Operations	2023	2023

**SACRAMENTO COUNTY HEALTH CENTER CO-APPLICANT BOARD (CAB)
HEALTH CENTER POLICIES– REVIEW SCHEDULE**

Required Review by Health Resources Services Administration (HRSA)				Process		
No.	Name	Policy Effective Date	Policy Description	Sub-Committee to Review	SC Review/ Recommend date	CAB Review / Approval date
REQUIRED ONCE EVERY THREE YEARS or SOONER IF SUBSTANTIVE POLICY CHANGE						
08-11	Notice of Privacy Practices Triennial Review – Due 2023 Last Approved 10/16/20	06-05-15	The Notice of Privacy Practices informs patients of how the County of Sacramento may use or disclose Protected Health Information about the patient.	Governance	2023	2023
11-02	Billing and Collections Triennial Review – Due 2023 Last Approved 02/19/21	10-29-15	Primary Health Clinic Services makes every reasonable effort to collect reimbursement for costs of providing health services to health center patients. Included payers are Medicare, Medi-Cal, other public assistance programs, private health insurance, and recipients of services with share of cost or sliding fee payment requirements.	Finance	2023	2023
11-03	Budget Development, Procurement and Compliance Triennial Review – Due 2024 Last Approved 02/19/21	08-30-18 / Rev. June or July 2020	SCHC is a FQHC and abides by guidance and requirements of the federal HRSA and the California State Department of Medi-Cal Managed Care.	Finance	2024	2024
REQUIRED ONCE EVERY SIX YEARS or SOONER IF SUBSTANTIVE POLICY CHANGE						
01-06	Rights and Responsibilities Review every 6 years – Due 2026 Last Approved 10/16/20	04-30-15	Clinic Services ensures clients are aware of their rights and their responsibilities. This objective is achieved by ensuring new members receive information about their rights and responsibilities.	Clinical Operations	2026	2026

**SACRAMENTO COUNTY HEALTH CENTER CO-APPLICANT BOARD (CAB)
HEALTH CENTER POLICIES– REVIEW SCHEDULE**

Required Review by Health Resources Services Administration (HRSA)				Process		
No.	Name	Policy Effective Date	Policy Description	Sub-Committee to Review	SC Review/ Recommend date	CAB Review / Approval date
REQUIRED ONCE EVERY SIX YEARS or SOONER IF SUBSTANTIVE POLICY CHANGE						
03-01	Telephone Protocol Review every 6 years – Due 2022	08-05-16	Primary Health Clinic Services is committed to excellence in customer service by assisting individuals by phone in a prompt, respectful, and sensitive manner.	Clinical Operations	<i>03/10/22</i>	<i>03/18/22</i>
03-02	Patient Registration Review every 6 years – Due 2022	03-03-16	Clinic Services ensures efficient, prompt, and accurate registration, meeting customer service standards.	Clinical Operations	<i>03/10/22</i>	<i>03/18/22</i>
03-06	Referral Management – Medical Home Review every 6 years – Due 2025 <i>Last Approved 10/16/20</i>	06-24-16	Sacramento County Primary Health Services is committed to providing a primary care medical home for assigned patients and ensuring that patients receive the specialty services ordered by their provider as part of their covered services.	Clinical Operations	2025	2025
03-08	Appointment Scheduling: Health Center Primary Care Review every 6 years – Due 2022	07-29-16	Clinic Services is committed to timely access to care. Appointment scheduling procedures are designed to meet the following standard of care: Primary care appointments will be available within 10 business days of the request. Urgent appointments will be available within 48 hours of the request for assigned/enrolled patients.	Clinical Operations	<i>05/12/22</i>	<i>05/20/22</i>
03-12	Appointment Template Management Review every 6 years – Due 2022	08-05-16	Primary health Clinic Services is committed to timely access to care, meeting productivity targets, and providing a positive customer experience. Management of appointment templates ensures these three goals are met. See associated PP 03-08 Appointment Scheduling.	Clinical Operations	<i>05/12/22</i>	<i>05/20/22</i>

**SACRAMENTO COUNTY HEALTH CENTER CO-APPLICANT BOARD (CAB)
HEALTH CENTER POLICIES– REVIEW SCHEDULE**

Required Review by Health Resources Services Administration (HRSA)				Process		
No.	Name	Policy Effective Date	Policy Description	Sub-Committee to Review	SC Review/ Recommend date	CAB Review / Approval date
04-01	Urgent Services Review every 6 years – Due 2025 Last Approved 09/10/20	07-29-16	Health Center members (enrolled or established patients) who request same day/next day services are triaged by a Registered Nurse (RN) and scheduled for care based on medical need. (Patients requesting urgent services who are not health center enrollees are referred by the RN to their assigned provider or community resources.	Clinical Operations	2025	2025
04-04	Test Results (Formerly Lab Results) Review every 6 years – Due 2022 Last Approved 10/16/20	10-01-10	Clinic Services staff make all possible efforts to distribute, review and notify patients of lab results in a timely, organized and sensitive manner.	Clinical Operations	2023	2023
04-22	Patient Discharge Review every 6 years – NEW		Sacramento County Health Center is committed to effective and respectful therapeutic relationships with patients. This documents outlines the procedures if such a relationship has proven to be impossible.	Clinical Operations	03/10/22	03/18/22
08-04	Release of Protected Health Information Required Once and when Revised Last Approved 07/30/19	02-22-16	Clinic Services ensures medical records management practices protect the confidentiality, privacy	Clinical Operations	2024	2024
REQUIRED ONCE AND WHEN REVISED, IF SUBSTANTIVE POLICY CHANGE						
04-02	Integrated Behavioral Health Program Required Once and when Revised	09-15-10	The Primary Health Division leadership is strongly committed to improving the health of individuals with severe mental illness and co-morbid chronic medical disorders through integrated and/or coordinated health care.	Clinical Operations	Anticipated 2023	Anticipated 2023

**SACRAMENTO COUNTY HEALTH CENTER CO-APPLICANT BOARD (CAB)
HEALTH CENTER POLICIES– REVIEW SCHEDULE**

Required Review by Health Resources Services Administration (HRSA)				Process		
No.	Name	Policy Effective Date	Policy Description	Sub-Committee to Review	SC Review/ Recommend date	CAB Review / Approval date
04-03	Referrals to Mental Health Plan <i>Required Once and when Revised</i>	09-30-10	Integrated Behavioral Health staff members appropriately assess and refer adults who require mental health specialty services to the Sacramento County Mental Health Plan. The overarching principle is ensuring adults receive the most appropriate mental health and primary health care to meet their individual needs. Team members strive for a collaborative working partnership with Mental Health Plan specialty service providers.	Clinical Operations	<i>09/08/22</i>	<i>09/16/22</i>
04-10 DUE	Care Coordination <i>Required Once and when Revised</i> Done 3/2/15	07-15-14	Primary Health Clinical Services ensures quality patient care through timely communication and effective coordination between providers of care for enrolled patients.	Clinical Operations	<i>09/08/22</i>	<i>09/16/22</i>

**SACRAMENTO COUNTY HEALTH CENTER CO-APPLICANT BOARD (CAB)
HEALTH CENTER POLICIES– REVIEW SCHEDULE**

Required Review by Health Resources Services Administration (HRSA)				Process		
No.	Name	Policy Effective Date	Policy Description	Sub-Committee to Review	SC Review/ Recommend date	CAB Review / Approval date
REQUIRED ONCE AND WHEN REVISED, IF SUBSTANTIVE POLICY CHANGE						
05-01	Pharmacy Refill Procedure <i>Required Once and when Revised</i> <i>Last Approved 07/01/19</i>	07-29-16	Primary Health Clinic Services has guidelines to ensure prompt and safe prescription refill authorization.			
05-02	Controlled Substances <i>Required Once and when Revised</i> <i>Last Approved 10/25/18</i>	10-28-16	Primary Health Clinic Services supports prescribing of controlled substances when clinically indicated and in a strong partnership with patients to whom they prescribe these medications.			
08-02	Personal Representatives <i>Required Once and when Revised</i> <i>Last Approved 02/22/16</i>	02-22-16	A “personal representative” is a person with authority to act on behalf of an individual in making decisions related to health care. The person is treated as a persona representative only with respect to the Protected Health Information (PHI) that is relevant to the personal representation.			
08-08	Advance Health Care Directive <i>Required Once and when Revised</i> <i>Last Approved 08/26/13</i>	08-26-13	Primary Care Center (PCC) staff provides adults and emancipated minors with information concerning their rights under California State law regarding Advance Health Care Directive (AHD). The AHD applies to the physical health care of a beneficiary. PCC will not condition the provision of care, or otherwise discriminate against patients, based on whether they have executed advance directives and/or made complaints regarding advanced directive requirements.			

**SACRAMENTO COUNTY HEALTH CENTER CO-APPLICANT BOARD (CAB)
HEALTH CENTER POLICIES– REVIEW SCHEDULE**

Required Review by Health Resources Services Administration (HRSA)				Process		
No.	Name	Policy Effective Date	Policy Description	Sub-Committee to Review	SC Review/ Recommend date	CAB Review / Approval date
08-14	Documentation <i>Required Once and when Revised</i> <i>Last revised 03/02/15</i>	11-04-14	Clinic Services Providers ensure documentation of care meets required clinical and billing standards.			
10-05	TB Shelter Screening – Homeless <i>Required Once and when Revised</i>	12-21-16	Designated and trained Registered Nurses (RN) and Medical Assistants (MA) working within these guidelines may provide Tuberculosis (TB) screening for homeless individuals per County Health Officer direction.			
OTHER HEALTH CENTER POLICIES AVAILABLE FOR DISCUSSION AT CAB MEMBER REQUEST						
02-01	Alternate Format <i>Last revised 09/17/10</i>	09-17-10	Printed documents in alternate formats will be provided for visually impaired patients whenever necessary			
02-03	Wheelchair Access <i>Last revised 07/20/10</i>	07-20-10	To provide wheelchairs to clinic patients who are in need of and requesting same day use of a wheelchair while conducting business and/or receiving clinic services during the clinic’s hours of operation.			
02-04	Non-Discrimination - HIV Status <i>Last revised 06/06/11</i>	06-16-11	Clinic Services does not exclude, deny benefits to, or otherwise discriminate against any person on the basis of race, color, national origin, age, or disability (including but not limited to HIV disease), in admission to, participation in, or receipt of services or benefits under any of its programs or activities. Clinic Services does not deny admission to any of its programs or activities, or medical/dental treatment (as determined by reasonable medical/ dental judgment given the current state of medical/dental knowledge) on the basis of an applicant’s or program participant’s HIV status.			

**SACRAMENTO COUNTY HEALTH CENTER CO-APPLICANT BOARD (CAB)
HEALTH CENTER POLICIES– REVIEW SCHEDULE**

Required Review by Health Resources Services Administration (HRSA)				Process		
No.	Name	Policy Effective Date	Policy Description	Sub-Committee to Review	SC Review/ Recommend date	CAB Review / Approval date
02-06	Healthy Partners Administrative Review Last revised 04/09/18	12-08-15	The Sacramento County Health Center provides administrative review for any person who is denied Healthy Partner enrollment and requests such a review.	Clinical Operations	07/07/22	07/15/22
03-10	Healthy Partners Eligibility & Enrollment Last revised 06/04/18	11-24-15	Clinic Services authorizes specific employees to complete eligibility and enrollment for the Health Partners program. This team of staff is called Member Services. One of their key functions is eligibility and enrollment with a customer service focus.	Clinical Operations	07/07/22	07/15/22
03-11	Healthy Partners Enrollment Wait List Last revised 06-04-18	05-09-16	Sacramento County Healthy Partners program provides primary care to low income undocumented adults who are			
04-05	General Assistance Medical Evaluations Last revised 10/16/20	02-05-16	Sacramento County Health Center clinicians provide medical evaluations for General Assistance (GA) recipients upon referral from the Department of Human Assistance (DHS).			
04-06	Emergency Dental Services Last revised 01/23/12	01-23-12	Clinic Services provides emergency dental services to qualified CMISP clients.			
04-07	Risk Assessment Last revised 06/23/17	07-27-12	Clinic Services staff must provide appropriate behavioral health screening.			
04-08	Medical Override Last revised 06/21/13	06-21-13	Sacramento County Clinic Services has an established process to provide medical services prior to CMISP eligibility determination when there is a medical need. This policy outlines the procedures.			

**SACRAMENTO COUNTY HEALTH CENTER CO-APPLICANT BOARD (CAB)
HEALTH CENTER POLICIES– REVIEW SCHEDULE**

Required Review by Health Resources Services Administration (HRSA)				Process		
No.	Name	Policy Effective Date	Policy Description	Sub-Committee to Review	SC Review/ Recommend date	CAB Review / Approval date
04-11	Initial Comprehensive Assessment Last revised 09/21/20	12-22-14	Medi-Cal Managed Care Primary Care Medical Homes are required to provide an Initial Comprehensive Assessment including the Staying Healthy Assessment. These assessments must be completed within specific timeframes and must be documented in the electronic medical record. The Medi-Cal population has a higher incidence of chronic and/or preventable illnesses, injuries, and disabilities. Many modifiable health-risk behaviors, such as lack of physical activity, poor nutrition, tobacco use, or excessive alcohol consumption can increase risk for chronic conditions.	Clinical Operations		