

HRSA Project Director / Medical Director Report to CAB May 06, 2022

1. **Strategic Plan - Deferred**

2. **Organizational Change for the Health Center**

- (a) Current Deputy Director of Primary Health Division retiring at the end of July.
- (b) Recruitment will begin to replace Deputy Director.
- (c) Once Deputy Director on board then the Federally Qualified Health Center (FQHC) will be reintegrated into the Primary Health Division.
- (d) Division Manager interviews have been completed and decision will be made soon.
- (e) Due to the org change bringing the FQHC under Primary Health Division, the Division Manager will not report to Medical Director but to the Deputy Director.
- (f) We are working on the downstream effect of organization restructure in the FQHC.
- (g) It is likely that HRSA Project Director will change and need CAB approval.

3. **Program highlights/Focus points:**

- (a) *Call Center Analysis*
 - i. Consultant has completed her initial assessments and made first recommendations. Recommendations will be listed at the CAB meeting. All of the details cannot be shared at this time.
- (b) *UCD Contract for Fiscal Year 22-23:*
 - i. Need to finalize the Clinician staffing and discussion about compliance in areas of patient access, timeliness of chart documentation, and productivity standards.
- (c) *Mental Health in Schools Project*
 - i. Sacramento County Office of Education (SCOE) intends to expand to 20 more schools.
 - ii. This adds more administrative duties; operational oversight; broadens what falls under HRSA compliance

Service Area Competition Overview

Vanessa Stacholy for Sharon Hutchins

05/20/22

Timeline

SAC Notice of Funding Opportunity (NOFO) Release and Application Schedule

Current Project Period End Date	NOFO Number	Expected NOFO Release	Grants.gov Deadline (11:59 p.m. ET)	HRSA EHBs Deadline (5 p.m. ET)
December 31, 2022	HRSA-23-018 (PDF - 560 KB)	May 5, 2022	July 5, 2022	August 4, 2022
January 31, 2023	HRSA-23-019	May 19, 2022	July 18, 2022	August 17, 2022
February 28, 2023	HRSA-23-020	June 16, 2022	August 15, 2022	September 14, 2022
March 31, 2023	HRSA-23-021	July 14, 2022	September 12, 2022	October 12, 2022

What is it?

- **Competitive** funding opportunity for operational support for announced service areas
- Funds services in communities already served by Health Center Program award recipients
- Ensures continued access to comprehensive, culturally competent, high-quality primary health care services
- [SAC technical assistance webpage](#)



Types



Competing Continuation

- A current Health Center Program award recipient applying to continue serving its current service area

New

- An organization not currently funded through the Health Center Program applying to serve an announced service area

Competing Supplement

- A current Health Center Program award recipient applying to serve an announced service area, in addition to its current service area



Application Parts

- Basic Facts
- Budget table and narrative
- Project Narrative
- Program Specific Forms
- Attachments

Application Parts: Basic Facts



- Patient Projection
- Service Type
- Service Area Zipcodes
- Population Types

Application Parts: Budget



- Table SF-424
- Budget Narrative
 - Line item details for each of 3 years
 - Federal and non-federal funding
 - Demonstration that costs are “reasonable and necessary”
 - Table of all federally-funded personnel

Application Parts: Project Narrative



- Need – 10 pts → *NEEDS ASSESSMENT IS KEY*
- Response – 25 pts
- Collaboration – 10 pts
- Evaluative Measures – 15 pts
- Resource/Capabilities – 20 pts
- Governance – 10 pts
- Support requested – 10 pts

Application Parts: Program Specific Forms, I

- Form 1A: General Information Worksheet
- Form 1C: Documents on File (e.g. Policies and Procedures, Bylaws, Co-Applicant Agreement)
- Form 2: Staffing Profile
- Form 3: Income Analysis
- Form 4: Community Characteristics
- Form 5A: Services Provided
- Form 5B: Service Sites
- Form 5C: Other Activities/Locations (if applicable)

Application Parts: Program Specific Forms, II

- Form 6a: Current Board Member Characteristics
- Form 6B: Request for Waiver of Board Member Requirements
- Form 8: Health Center Agreements
- Form 12: Organization Contacts
- Summary Page

Application Parts: Attachments, I

- Service Area Map & Data Table
- Bylaws
- Project Organizational Chart
- Position Descriptions for Key Management Staff
- Biographical Sketches for Key Management Staff
- Co-Applicant Agreement
- Summary of Contracts and Agreements (*including contracts for substantive programmatic work*)

Application Parts: Attachments, II

- *Articles of Incorporation (if needed)*
- Collaboration Document and Letters of Support
- Sliding Fee Discount Schedules
- *Evidence of Nonprofit or Public Center Status (if needed)*
- Operational Plan
- Other Relevant Documents



HRSA Funding Priorities

- **To be eligible for priority points, you must:**

- ✓
 - Be a competing continuation applicant,
 - Have no active Health Center Program requirements-related conditions at the time of application submission, and
 - Not have a current 1-year period of performance

- **Patient Trend (5 points):**

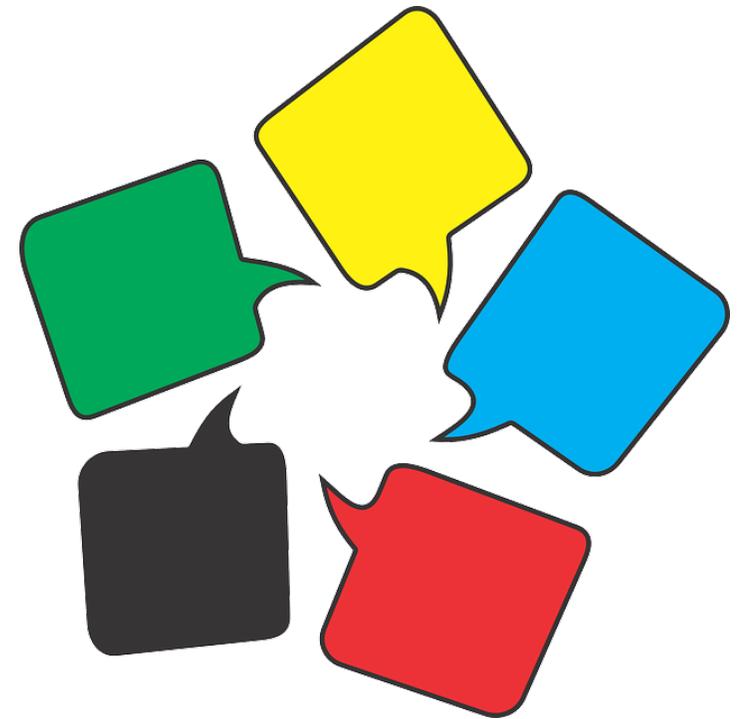
- ✓
 - Positive or neutral 2-year or 3-year patient growth trend (+/- 5 percent), as documented in UDS

- **Patient-Centered Medical Home (PCMH) Recognition (5 points):**

- x
 - 1 or more sites with PCMH recognition at the time of application review



Questions or Comments?



<u>Clinical Operations Sub-Committee</u>
<u>Members:</u>
<ul style="list-style-type: none"> • Vince Gallo
<ul style="list-style-type: none"> • Namitullah Sultani
<ul style="list-style-type: none"> • Nicole Miller
<ul style="list-style-type: none"> •
<u>Meeting Schedule:</u>
<ul style="list-style-type: none"> • Thursday of week prior to full CAB meeting from 12-1 PM
<u>Finance Sub-Committee</u>
<u>Members:</u>
<ul style="list-style-type: none"> • Jan Winbigler (Chair)
<ul style="list-style-type: none"> • Paula Lomazzi
<ul style="list-style-type: none"> • Vince Gallo
<ul style="list-style-type: none"> • Laurine Bohamera
<u>Meeting Schedule:</u>
<ul style="list-style-type: none"> • Wednesday of week of full CAB meeting from 11AM - 12PM
<u>Governance Sub-Committee</u>
<u>Members:</u>
<ul style="list-style-type: none"> • Elise Bluemel
<ul style="list-style-type: none"> • Jan Winbigler (Chair)
<ul style="list-style-type: none"> • <i>Namitullah Sultani (when possible)</i>
<ul style="list-style-type: none"> •
<u>Meeting Schedule:</u>
<ul style="list-style-type: none"> • Wednesday 12-1 PM of week prior to CAB meeting

Strategic Planning Sub-Committee
• Aaron Washington
• Elise Bluemel
• Jan Winbigler
• Cindy Hooker
• Chuck McBrayer
11-1: on 1/08; 1/22; 2/12; 3/05

QI Provider Report Cards

Presentation to the CAB Clinical Operations Committee

May 12, 2022

Sharon Hutchins

Purpose

- Call provider's attention to
 - SCHC's *Annual Quality Improvement Plan*
 - OCHIN's *My Panel Metrics* and *Health Maintenance* features
- Improve SCHC care delivery
 - Draw attention to gaps and areas for improvement
 - Provide best practices
 - Engage providers in SCHC's QI efforts

Featured Metrics

- Relate to goals and objectives in SCHC's *2022 Annual Quality Improvement Plan*
- Metrics for adult patients
 - Diabetes
 - Hypertension
- Metrics for pediatric patients
 - Immunization
 - Well-Care Visits

Featured Targets

- Annual targets are from HRSA (UDS) or HEDIS (when available).
- Quarterly targets selected by Gaps in Care Committee to assist providers in reaching the annual target by 12/31/22.

Values for “This Provider”

- Based on provider’s patient panel.
- First row shows # of patients that are eligible for the quality metric.
- Subsequent rows show percentages of those eligible patients who met the quality metric.

Comparison Group

- Program
 - Adult/Internal Medicine
 - Family Medicine
 - Pediatrics
- Provider Type
 - Doctor
 - Other - NP/PA
- Status
 - Faculty
 - Resident

Color Coding

- Individual provider is compared to
 - Peer group
 - Target(s)
- Modified “stoplight” colors are used
 - **Green = Superior performance:** at least 8 percentage points better than comparison group and above target
 - **Orange = Area for improvement:** at least 8 percentage points worse than comparison group and below target

Tips and Best Practices

- Generated by Program Leads working with the Gaps in Care Committee.
- Intent is to provide assistance to providers whose results show room for improvement.
- Plan to change focus of tips each Quarter (if appropriate with course of QI projects).

QI Results by Program

Adult: Control of Diabetes

Category	Adult / Internal Medicine Faculty	Family Medicine Faculty	Q1 Target*	2022 Target*
# Patients with DM Type II diagnosis	1,170	42	NA	NA
% with A1c test in 2022	76%	79%	35%	85%
% with A1c \leq 9% (most recent)	67%	62%	50%	60%
% with retinopathy screening in 2022	16%	10%	35%	NA
% with nephropathy screening in 2022	81%	64%	35%	NA
% with neuropathy screening in 2022	33%	33%	25%	NA
% with BP <140/90 Hg (most recent)	55%	57%	TBD	NA

QI Results by Program

Adult: Control of Diabetes

Category	TEACH Residents	Family Medicine Residents	Q1 Target*	2022 Target*
# Patients with DM Type II diagnosis	392	0	NA	NA
% with A1c test in 2022	78%	NA	35%	85%
% with A1c \leq 9% (most recent)	63%	NA	50%	60%
% with retinopathy screening in 2022	5%	NA	35%	NA
% with nephropathy screening in 2022	77%	NA	35%	NA
% with neuropathy screening in 2022	37%	NA	25%	NA
% with BP <140/90 Hg (most recent)	57%	NA	TBD	NA

QI Results by Program

Adult: Control of Hypertension

Category	Adult / Internal Medicine Faculty	Family Medicine Faculty	Q1 Target*	2022 Target*
# Patients with HTN diagnosis	1,684	81	NA	NA
% with ≥ 1 BP reading in 2022	77%	92%	25%	90%
% with BP <140/90 Hg (most recent)	44%	21%	20%	60%

QI Results by Program

Adult: Control of Hypertension

Category	TEACH Residents	Family Medicine Residents	Q1 Target*	2022 Target*
# Patients with HTN diagnosis	583	6	NA	NA
% with ≥ 1 BP reading in 2022	83%	100%	25%	90%
% with BP <140/90 Hg (most recent)	46%	83%	20%	60%

QI Results by Program

Pediatric: Vaccination

Category	Pediatrics Faculty	Family Medicine Faculty	Q1 Target*	2022 Target*
# Patients 2 years of age	174	18	NA	NA
% UTD with CIS 10 by 2nd birthday	31%	39%	15%	45%

Pediatric: Well-Child Visits

Category	Pediatrics Faculty	Family Medicine Faculty	Q1 Target*	2022 Target*
# Patients 3-21 years of age	1,606	67	NA	NA
% with completed WCV in 2022	9%	19%	13%	50%
% with completed WCV in the last half of 2020	20%	16%	NA	NA

QI Results by Program

Pediatric: Vaccination

Category	Pediatrics Residents	Family Medicine Residents	Q1 Target*	2022 Target*
# Patients 2 years of age	98	1	NA	NA
% UTD with CIS 10 by 2nd birthday	24%	0%	15%	45%

Pediatric: Well-Child Visits

Category	Pediatrics Residents	Family Medicine Residents	Q1 Target*	2022 Target*
# Patients 3-21 years of age	718	38	NA	NA
% with completed WCV in 2022	13%	24%	13%	50%
% with completed WCV in the last half of 2020	23%	26%	NA	NA

Questions & Comments



Period	9
Current Month	March
Percentage of Year	75%

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	1,551,381	5,832,511	\$0	\$5,832,511	61%	
Intergovernmental Revenue	\$10,989,662	1,158,215	8,725,485	\$0	\$8,725,485	79%	Medi-Cal revenue, HRSA & Refugee grants
Charges for Services	\$52,000	6,666	60,803	\$0	\$60,803	117%	CMISP old pre-2014 service charges
Miscellaneous Revenue	\$17,368		16,268	\$0	\$16,268	94%	
Total Revenue	\$20,584,940	\$2,716,262	\$14,635,067	\$0	\$14,635,067	71%	
Expenses							
Personnel	\$11,351,014	822,933	7,288,403	\$0	\$7,288,403	64%	Permanent vacancies in recruitment
Services & Supplies	\$10,314,243	809,466	6,679,147	2,875,491	\$9,554,637	65%	
Other Charges	\$449,477	44,087	318,328	160,157	\$478,485	71%	
Equipment	\$247,077		155,946	112,053	\$268,000	63%	Encumbrance is for radiology upgrades
Intrafund Charges (Allocation costs)	\$2,373,021	158,045	1,314,651	\$0	\$1,314,651	55%	
Total Expenses	\$24,734,832	\$1,834,532	\$15,756,474	\$3,147,701	\$18,904,175	64%	

GRAND TOTAL
(Net County Cost) **-\$4,149,892** **\$881,731** **-\$1,121,407**

GRANT SUMMARY

Grant Year	Grand Year	Total Grant	Available to Spend		YTD Spent	Notes
			Start	End		
HRSA						
HRSA Homeless (Main)	3/1/2021	2/28/2022	\$ 1,386,602	\$ 924,401	\$ 775,298	Spending on track
HRSA Homeless (Main)	3/1/2022	2/28/2023	\$ 1,386,602	\$ 462,201	\$ -	No claims yet for this grant period
HRSA ECT	5/1/2021	4/30/2022	\$ 261,424	\$ 164,015	\$ 143,801	Grant will be fully expended after PPE purchase
HRSA ARPA	4/1/2021	3/31/2022	\$ 1,285,475	\$ 1,285,475	\$ 339,638	Jul-Dec claims low due to slow hiring, can carryover funds to next year
HRSA ARPA	4/1/2022	6/30/2023	\$ 1,248,400	\$ 312,100	\$ -	Grant period has not begun
HRSA ARP CIP	9/15/2021	9/14/2022	\$ 619,603	TBD	\$ -	Construction timeline not yet determined
Refugee						
RHAP	10/1/2021	9/30/2022	\$ 1,958,204	\$ 1,468,653	\$ 403,934	Spending on track
RHPP	10/1/2021	9/30/2022	\$ 82,014	\$ 61,511	\$ 22,154	Spending on track
RHPP Multi-Year	10/1/2021	9/30/2022	\$ 153,000	\$ 94,492	\$ -	New award, no claims yet for this grant period
RHPP AHP	10/1/2021	9/30/2022	\$ 200,000	\$ 150,000	\$ -	New award, no claims yet for this grant period
Miscellaneous						
County ARPA	1/1/2022	12/31/2024	\$ 2,451,919	\$ 161,115	\$ 38,582	Two medical registry staff claimed this FY
CalVax			\$ 11,000	\$ 11,000	\$ 11,000	Fully expended
Anthem QI			\$ 16,000	\$ 16,000	\$ -	Spending on track

May 2022: Governance Committee Report to CAB

- | | |
|---|-------------|
| 1. Tobacco Cessation Resource Update | Information |
| 2. Update on Technology for CAB Members | Information |
-

1. Tobacco Cessation Resource Update

Tobacco quit kits have been delivered to SCHS. Dr. Mishra will deliver them to Loaves and Fishes. She wants to make sure that homeless individuals are still connected to counseling.

2. Update on Technology for CAB Members

The Laptops for CAB members arrived at SCHC on 5/10/22. Staff has a few items to complete before distributing the devices including:

- Configure laptops
- Create loan agreement for CAB member to sign
- Purchase laptop bags