



San Joaquin County Clinics (SJCC)

**Minutes of July 30, 2019
Board of Directors Meeting**

**San Joaquin General Hospital
Conference Room 1**

ATTENDEES: Rod Place; Alicia Yonemoto; Luz Maria Sandoval; Mike Baskett; Mary Mills; Bradley Seng; John Bousquet; David Culberson; Greg Diederich; Dr. Farhan Fadoo; Art Feagles; Erin Franklin; Brian Heck; Isela Kloeppel; Betty Jo Riendel; Alice Soulligne; Guadalupe Villanueva; Joe Villanueva; Brian Watkins; Adelé Gribble

EXCUSED: Alvin Maldonado; Esgardo Medina; Ismael Cortez

AGENDA ITEM	ATTACHMENTS	ACTION
<p>1. <u>Introduction & Establish Quorum (Rod Place, Board Chair & Alicia Yonemoto, Board Vice-Chair)</u></p> <p>a. Call to Order & Establish Quorum Mr. Rod Place called the meeting to order at 5:02 p.m. Due to three members being unable to attend tonight's meeting, there wasn't a quorum. Any action items will be brought back during the August meeting.</p> <p>b. SJCC Board of Director's Attendance Record (Jan thru Jun) The board did not go through the attendance record during today's meeting. Process will be established during next month's meeting.</p> <p>c. Introductions Mr. Brian Heck has attended three board meetings and one training over the last few months. He is still interested in membership to the board. Brian is a school administrator with Lodi Unified School District. He introduced himself to the board once before during the first meeting he attended. He was introduced to Chuck through the County Attorney and has done community work as a board member with the Stockton San Joaquin Emergency Food Bank and the Child Abuse Prevention Council. He has experience with Strategic Planning and Governance.</p> <p>Mr. Joe Villanueva introduced himself to the board. He has been a patient here for many years and what he can offer is his perspective as a patient. He has submitted his application and understands it will come up for consideration after attending two consecutive board meetings.</p>	<p>No Attachments</p>	<p>All action items to be voted upon during August meeting</p> <p>Attendance Record Process to be reviewed next month</p>
<p>2. <u>Approval of Minutes of June 25, 2019 meeting (Alicia Yonemoto, Board Vice-Chair)</u></p> <p>Due to there not being quorum during today's meeting, the board was unable to vote on the approval of minutes. This will be brought back during next meeting.</p>	<p>BOD Meeting Minutes – 06.25.19</p>	<p>Bring back for approval next month</p>

AGENDA ITEM	ATTACHMENTS	ACTION
<p>3. <u>Public Comment (Alicia Yonemoto, Board Vice-Chair)</u></p> <p>There was no public comment.</p>	No Attachments	No Action Required
<p>4. <u>New Board Member Application for Brian Heck (Alicia Yonemoto, Board Vice-Chair)</u></p> <p>The board was presented with Brian Heck’s application for review. Due to there not being quorum for today’s meeting, the board will review and vote upon during next month’s meeting.</p>	Attachment 4	Review application and bring back for vote next month.
<p>5. <u>Finance Committee Report (Brian Watkins)</u></p> <p>Brian Watkins introduced himself as the new FQHC Finance Director. He advised the Finance Committee met immediately prior to the Board meeting. They went over an update of old business from last month, including an aging report they will be providing going forward which has the more conventional thirty-day buckets than seen in the past.</p> <p>They do not have Financial Statements for June to present as they have not finished closing out year end. They discussed the schedule and expectations for both the Finance Committee and the Board in terms of reporting schedules. Having June financials by the end of July is very challenging for our organization at this point. Moving forward, starting next month in August, they will make sure they have the June financials. Ideally, they would like to also present July’s Financial statement but with the challenges we are facing with year-end, they do not expect that. As they get into September, he expects we will be more current with the reporting of the Financial Statements.</p> <p>Brian advised we received an update on the Accounts Receivables report and this is also attached in the packet.</p>	Attachment 5 (Finance Committee Agenda, Minutes and attachments)	Bring back for approval next month
<p>6. <u>Expense Reimbursement Update (Erin Franklin)</u></p> <p>Erin Franklin advised we did some research and the reimbursement of \$55 is by day. If the board member comes to multiple meetings per day, the reimbursement for their time and travel is per day.</p>	No Attachments	No Action Required
<p>7. <u>Credentialing Report (Betty Jo Riendel)</u></p> <p>Betty Jo Riendel advised there are six initial appointments, two reappointments and three advancements. Alicia Yonemoto asked if any of these are the podiatrist or cardiologist previously mentioned. Alice Souligne advised the cardiologist won’t start until September and the podiatrist started already. The podiatrist’s credentialing was presented last month. Due to us not having a quorum, this report will be brought back next month.</p>	Attachment 7	Bring back for approval next month
<p>8. <u>CEO Report (Dr. Farhan Fadoo)</u></p> <p>Dr. Fadoo provided the Progress / Achievements – First 60 Days report as shown below:</p>	Attachment 8 Progress / Achievements – First 60 Days	No action Required

AGENDA ITEM	ATTACHMENTS	ACTION
<p style="text-align: center;">Progress/Achievements – First 60 Days</p> <ul style="list-style-type: none"> • Cleared all HRSA conditions/findings from November 2018 OSV • Secured NCQA PCMH recognition for 5 of 8 sites • HR Tabletop Exercise – 135 of 450 staff identified to be moved • Productivity Brute-Force Increase (2.09 May, 2.33 June) in highest volume clinic (PMC) 11 docs – translates to net add of 105 encounters/week (roughly additional \$20k revenue/week in that clinic alone) <ul style="list-style-type: none"> • Brute-Force approach to scale to remaining 7 sites • Longer-term sustainability access model in the works (to decrease no-show, non-utilization rate) • Clinic Financial Proforma – Concept/Design of Line-Item Inventory • Onboard FQ Finance Director • RCM outsource due diligence • Marketing plan – Google, Marketing SOW, Community Health Fair kickoff, Manteca Open House • Strategic planning sessions launched (9/6 HRSA due date) • Contracts Review – Eliminate poor performing agreements, create visible controls and discipline around contracts management (e.g. HCS SST \$250k/yr, PHS SST \$208k/yr, HCIN \$30k/qtr, Stanford Teleneuro \$14,500/mo.) • Payer Contracts Optimization – Grow Medicare Advantage in payer mix (Medcore contract), expand market share • Wipfli strategy session – July 25th • 340b scoping <div style="text-align: center;">  </div> <p>Dr. Fadoo advised the above is a brief synopsis of what we have achieved over the last sixty days. The first two topics were discussed during last month's meeting.</p> <p>HR Tabletop Exercise – Regarding this topic, what we have done in the early days of this transition is to look at all of our staffing across all clinics to make sure there is good amount alignment between the physicians and support staff. We found there was quite a bit of a skew where there were a lot of support staff for some low volume environment and vice versa. This is problematic if you are trying to improve productivity and efficiency in the clinics. There should be two medical assistants per provider at our onsite clinics and our offsite locations, because we also staff the registration desk, the ratio is 2.5 per provider. There were some environments that had a 7:1 ratio with not a lot of productivity and other environments that had 1.2:1. To right size this, there are 135 staff who will be moved around to areas that need support. We have to be mindful of civil service rules, HR rules and union. They are doing their due diligence to ensure all medical staff are aware of the reasons behind these moves and will be meeting with them over the next few weeks.</p> <p>Productivity Brute-Force Increase – Historically we have spoken about how to optimize productivity in a way that is responsible. In June they did a little experiment of adding additional appointments in Primary Medicine Clinic, scheduling more. They went from approximately 25 slots per provider to 30 slots per day. Dr. Fadoo believes we can scale these to the remaining sites as a short term. Alicia Yonemoto advised the only thing that she sees that would restrain us from getting more patients in is the number of patient rooms. Dr. Fadoo stated there are four things we must manage: Doctors; Support staff; Patients; Space. Dr. Fadoo stated space is the easiest to solve and we do have plans in the works for that.</p>		

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<p>Dr. Fadoo stated this brute-force approach is a short-term solution and there is a longer-term sustainability model that we are about to deploy. This will be a four to six month run to get this set up. This will be a more elegant way of driving production, driving down the no-show rate, actually having patients come in that should come for the appropriate follow up at the appropriate time.</p> <p>Clinic Financial Proforma – Dr. Fadoo stated at the Finance Committee meeting prior to the Board meeting, they took the committee members through the Clinical Financial Proforma that members will start seeing in the minutes in the months to come. We are trying to capture the full financial picture of the clinics and the opportunity the clinics bring to the entire health system.</p> <p>Onboard FQ Finance Director – Brian Watkins was introduced earlier as the new FQHC Finance Director. Dr. Fadoo stated this is Brian’s fourth week with us. They are building a team around him so that there is more of a financial apparatus for the clinics that is dedicated to the Ambulatory enterprise.</p> <p>RCM outsource due diligence – Dr. Fadoo advised last month we spoke about the potential for revenue cycle outsource to a third party for the FQHC clinics. They are researching whether this is a good or bad idea if we go down that path. There is quite a bit of movement around that and Chris Roberts, the hospital CFO and Brian are working together closely as they explore that.</p> <p>Marketing Plan – Dr. Fadoo stated our marketing has improved. For the longest time, Google hasn’t known about our other sites but now you can finally google San Joaquin Clinics and find us. There is information about the clinics with links and information on upcoming events, such as the Manteca Open House on Saturday. There was a breakfast kickoff for the Community Health Care a few weeks ago for the Health Fair happening in October.</p> <p>Strategic Planning – Erin will be hosting conference calls for the next several Fridays. There is a deliverable due to HRSA at the beginning of September. Strategic Plans are not meant to be stale documents, they are meant to be living documents. This year’s draft of our Strategic Plan is due to HRSA on September 6th.</p> <p>Contracts – We are starting to go through our portfolio of contracts, creating some structure of how we manage our procurement processes and our contract management processes. There were several contracts that we are looking at that passively came up for renewal and we are scrutinizing the merits of continuing these agreements.</p> <p>Payer Contracts Optimization – We had a meeting with Medcore which is an IPA that is wanting to work closer with us on driving additional Medicare clients to us. The opportunity to expand into Medicare space seems likely to come together. The hospital is looking to perhaps take an agreement to the County Board for Medcore for at least a portion of the ancillaries and some other pieces in the next couple of months.</p> <p>WIPFLI – Dr. Fadoo stated they had a strategy session with them last week. We have flirted with a number of different strategies over the last couple of years that we have been hearing about: consolidating clinics; adding additional services; lots of different things that are triggers for PPS rate increases. We wanted to be sure we articulated all these different strategies to our consultants for them to render a very solid opinion on what makes sense to move forward, and what doesn’t and in what sequence. Next steps will be published tomorrow so that we are able to assign dates to those initiatives. Consolidation is the biggest benefit of the clinics. We have three clinics at French Camp campus: Primary Medicine Clinic,</p>		

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<p>Family Medicine Clinic and Healthy Beginnings French Camp. They are five continuous hallways but operate as three autonomous sites; three suite numbers, three sets of books, three different PPS rates, etc. There is a lot overhead administrative of managing three different sites that are really one geographic site. We are looking to simplify them to one site. The same is true for our 1414 N. California site where there are three clinics in one building. This is the initial recommendation and WIPFLI will be putting that model together in terms of what that means for our PPS rate this year and the subsequent couple of years.</p> <p>Alicia Yonemoto asked what this will look like for patients when registering. Dr. Fadoo advised there are all kinds of operational downstream impacts we will have to consider. Alicia stated Healthy Beginnings registration desk has no problem with registration whereas in Clinic 1 it can sometimes take approximately 30 to 40 minutes to get checked in. Dr. Fadoo stated combining our clinics creates additional flexibility because patients can be seen across the five hallways. Alicia stated having registration clerks check back with patients who have been waiting will go a long way to help with patient dissatisfaction. She stated the registration clerk can advise their doctor is running late and give patients the option to wait to see their provider, reschedule for another day or see another provider if one is available. If they choose to wait then they can't complain about the time it takes to see their provider.</p> <p>340b scoping – Dr. Fadoo advised there is a proposal to look at what this would look like and how new revenues this would generate for the clinics. This is still in early days and we should have an entry in the Proforma document next month. The model is still coming together.</p> <p>Mary Mills advised she would like to applaud Dr. Fadoo and his team for the work done. Everything is in black and white in verbiage that can be understood. They look forward to what is to come.</p> <p>Alicia Yonemoto asked for more information on the Aegis contract. She saw how much money they get and wondered how much we get. Mr. Culberson advised the Aegis expansion is a statewide MAT program. There are three or four more sites opening within San Joaquin County.</p> <p>Mike Baskett advised last month the board approved to increase the hours at the Manteca Clinic. He asked Dr. Fadoo if we are seeing an increase in patients or if there hasn't yet been enough time passed to see if this is working out financially. Dr. Fadoo advised the doctor who will be doing the extended hours will be starting next week so we do not have anything to report yet. We have the Open House this coming weekend to introduce the community to our clinic in Manteca. We have notified the emergency rooms in Manteca that we are open for these extended hours and they are motivated to keep patients out of the ED. Mike mentioned that he was not aware of the Open House and asked if they could be appraised ahead of time, not only for this upcoming open house but also for other events. Erin Franklin advised she will give advance notice going forward to the board members. She will have a calendar of events or activities that will be made available to the board members. Adelé Gribble will email the flyer that was sent out regarding the Manteca Clinic Open House.</p>		<p>Email flyer regarding Manteca Open House to board members</p>
<p>9. <u>Growth Strategy (Erin Franklin)</u></p> <p>Ms. Erin Franklin asked the committee to review the attached Strategic Planning activity for Board Governance. She asked if they could pick their top four activities of the list below that they believe would be most influential to building a vital, strong Board of Directors:</p>	<p>Attachment 9</p>	

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<ol style="list-style-type: none"> 1. Create an onboarding program for new board members 2. Coordinate a series of off-site training and educational programs for the board members 3. Coordinate a series of on-site training and educational programs for the board 4. Coordinate a series of on-line training and educational programs for the board 5. Invite a select number of board members to attend "Board member boot camp" annually 6. Develop a board recruitment plan 7. Identify board members who can participate in community events and spread the word about SJCC 8. Develop a marketing strategy, with a budget, to recruit new board members 9. Create new opportunities for board members to participate in SJCC onsite activities 10. Connect our board members with other FQHC board members to begin building relationships/network to exchange ideas/questions/success stories in the future 11. Schedule an operational "meet and greet" to familiarize the board with key members of the staff 12. Schedule a special session to review contents of HRSA manual <p>Rod Place advised number 6 and 8 may look the same but one provides the board with a budget. He advised for members to look at the items very carefully. They exchanged opinions about what they believe will work best and each member who was present provided their top four to Erin. Rod advised he struggled because all are good so picking only four was difficult. Erin will contact the board members who were unable to attend tonight's meeting to get their input as well.</p> <p>Special conference call sessions have been arranged by Erin and she will send the board members an invitation for the weekly Friday calls with instructions. Each member is encouraged to call in so that they can provide their input on the weekly topics of discussion. This week's topic will be around finance.</p>		<p>Erin Franklin will contact board members not in attendance for their top four. She will also send out an invitation for upcoming conference calls with instructions to all board members</p>
<p>10. <u>ADJOURNMENT</u></p> <p>There being no further topics of discussion, Ms. Alicia Yonemoto adjourned the meeting at 5:55 p.m.</p>		<p>No action required</p>

Submitted by:

_____ Date

RESPECTFULLY SUBMITTED ON BEHALF OF SJCC BOARD BY:
ADELÉ R. GRIBBLE, OFFICE TECHNICIAN COORDINATOR
ACS ADMINISTRATION, SAN JOAQUIN COUNTY CLINICS