



San Joaquin County Clinics (SJCC)

**Minutes of June 30, 2020
Board of Directors Meeting**

**San Joaquin General Hospital
Web Conference Call**


BOARD MEMBERS PRESENT: Rod Place (Chairman); Alicia Yonemoto (Vice-Chair); Ismael Cortez (Secretary); Mike Baskett (Board Member); Brian Heck (Board Member); Alvin Maldonado (Board Member); Esgardo Medina (Board Member);
BOARD MEMBERS ABSENT: Luz Maria Sandoval (Treasurer); Mary Mills (Board Member)
BOARD MEMBERS EXCUSED: Melanie Toutai (Board Member);
SJCC STAFF PRESENT: Dr. Farhan Fadoo (SJCC Executive Director); David Culberson (SJGH CEO); Greg Diederich (HCS Director); Betty Jo Riendel (SJCC Nursing Dept Manager); Alice Soulligne (SJCC COO); Rajat Simhan (SJCC Program Manager – Compliance); Jeff Slater (SJCC Grant Writer); Kristopher Zuniga (SJCC Interim CFO); Adelé Gribble (SJCC ACS OTC)
GUESTS: Carlos Jimenez (Wipfli Consultant); Susan Thorner (Fiscal Solutions Consultant); Dr. Anjani Thakur; Cecilia Arce

AGENDA ITEM	ATTACHMENTS	ACTION
<p>1. <u>Introduction & Establish Quorum (Rod Place, Board Chair)</u></p> <p>a. Call to Order & Establish Quorum (100% attendance established) Rod Place called the meeting to order at 5:02 p.m.</p> <p>b. SJCC Board of Director’s Attendance Record (Jan 2020 through May 2020) Board Members were accounted for by roll call and a quorum was established for today’s meeting.</p> <p>c. Introductions Dr. Anjani Thakur and his assistant Cecilia Arce were introduced to the committee. He is a local doctor who will attend two meetings before deciding if this is the kind of board he would like to join. His assistant Cecilia Arce is also in attendance. Dr. Thakur advised they see plenty of patients in the San Joaquin valley and they thought this would be a good forum to see if there is any way they can participate in the community.</p>	<p>SJCC Board of Directors Attendance Record May 2020</p>	<p>No action required</p>
<p>2. <u>Approval of Minutes of 05/26/20 (Rod Place, Board Chair)</u></p> <p>Alvin Maldonado made a motion to approve the minutes from the Board meeting on May 26th, 2020. Ismael Cortez seconded the motion and the board unanimously approved the minutes.</p>	<p>BOD Meeting Minutes from 5/26/2020</p>	<p>Alvin Maldonado motioned to approve minutes from 5/26/20, Ismael Cortez seconded & the board unanimously approved the minutes.</p>

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<p>3. <u>Public Comment (General Public)</u></p> <p>Alicia Yonemoto stated she would like to thank Dr. Fadoo, Alice Souligne, Betty Jo Riendel and staff for doing a fantastic job during an unprecedented time. She is very proud of the clinics.</p> <p>Alvin Maldonado welcomed Dr. Thakur to the meeting, stating we do have a need in this community. He thanked Dr. Fadoo and the team who are working so hard going out and doing what they are doing, specifically Dr. Parsa and his crew in different places helping out at the homeless encampments, shelters, migrant workers etc. He is glad we are reaching out to everyone. He has been in this community all his life and has seen it all and believes we will get through this pandemic.</p>	<p>No Attachments</p>	<p>No Action Required</p>
<p>4. <u>Credentialing Report (Betty Jo Riendel)</u></p> <p>Betty Jo Riendel advised there are no initial appointment for June 2020: There are three reappointments for June 2020: Dr. Toni Moody in Children’s Health Services, Dr. Sreelatha Pottala in our Healthy Beginnings Clinics and Dr. Spencer Wong in Family Medicine.</p> <p>We have three advancements for June 2020: Dr. Ramona Bahnam and Dr. Jackline Grace in Family Medicine and Annie Thor, CNM who is a Nurse Midwife in our OB department.</p> <p>We have a new privilege request for Dr. Robert Assibey who has completed his third-year residency and was previously moonlighting and is moving to Attending Physician position.</p> <p>There are six resignations of note for June 2020: Dr. Crisoforo Garza, Dr. Esther Ogunjimi, Dr. Ashish Loomba, Dr. Neha Vashishtha, Dr. Johnny Yep and Dr. Richard Slarve.</p> <p>Alvin Maldonado made a motion to approve the credentials and privileges as provided, Brian Heck seconded the motion and the board unanimously approved the motion.</p>	<p>Attachment 4 (Credentialing Report)</p>	<p>Motion to approve the credentialing report – Alvin Maldonado, seconded by Brian Heck & unanimously approved by the board.</p>
<p>5. <u>Quarterly QA/QI report including PPS Summary (Alicia Yonemoto)</u></p> <p>Alicia Yonemoto advised she has not had sufficient time to go over the minutes from the QA meeting and asked if Dr. Fadoo could summarize for her. Dr. Fadoo advised they presented the quarterly clinical indicators at the meeting in May and went over the areas we are improving and the areas that have a fair amount of improvement opportunity. A lot is being impacted by the pandemic. We have onboarded a new Quality Nurse who is leading a quality team to redouble our efforts on quality. We went over the list of grievances and there was nothing out of line from previous grievances.</p> <p>Dr. Fadoo explained the PPS summary is different from what we usually discuss. This is the Professional Practice Sub Committee which is basically the peer review for the provider charts. These are in the minutes for the Quality Sub-Committee.</p> <p>Alicia stated the number of complaints have decreased, unfortunately there are still a couple of the same things, but she is sure they will work themselves out as we go along. She thinks the clinics have performed phenomenally.</p>	<p>No Attachments</p>	<p>No Action Required</p>

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<p>6. <u>Co-Applicant Agreement Update (Dr. Farhan Fadoo)</u></p> <p>Dr. Fadoo advised the board has been kept apprised of the changes that we have been making to align that document with the newest HRSA regulations with respect to compliance and governance etc. That co-applicant agreement approved by this board was presented to the San Joaquin County Board of Supervisors on June 16th and was approved. We are just waiting for the document to come back to SJCC with signatures so we can file the copy to our records. This document has already been ratified by the SJCC Board and the San Joaquin County Board of Supervisors. Dr. Fadoo stated there is no further action required at this point. The next thing we will have this board approve is the administrative MOU that will come as a second step. This will be brought to the board for their approval at a later meeting.</p>	No attachments	No action required																																																							
<p>7. <u>Verify Patient Board Member (minimum 51% consumers) and Health Care Industry status (Rod Place)</u></p> <p>Susan Thorner advised for all board members who have identified as patients, we need to document if they have received services within the last 24 months.</p> <p>The roster shown identifies board members who are patients, which clinic they are assigned to and when they last received services in the clinics. Susan advised since Melanie Toutai is the only board member who derives more than 10% of her annual income from the health care industry, we have room to add one more board member who derives more than 10% of their annual income from the health care industry.</p> <table border="1" data-bbox="741 649 1415 1040"> <thead> <tr> <th>Board Member Name</th> <th>Patient / Non Patient</th> <th>Derives > 10% of Annual Income from Health Care Industry</th> <th>Last Date of Service</th> <th>Clinic</th> </tr> </thead> <tbody> <tr> <td>Mike Baskett</td> <td>Non-Patient</td> <td>No</td> <td>N/A</td> <td>N/A</td> </tr> <tr> <td>Ismael P. Cortez</td> <td>Patient</td> <td>No</td> <td>11/27/2019</td> <td>FMC</td> </tr> <tr> <td>Brian Heck</td> <td>Non-Patient</td> <td>No</td> <td>N/A</td> <td>N/A</td> </tr> <tr> <td>Alvin Maldonado</td> <td>Patient</td> <td>No</td> <td>11/8/2019</td> <td>PMC</td> </tr> <tr> <td>Esgardo Medina</td> <td>Patient</td> <td>No</td> <td>8/27/2019</td> <td>PMC</td> </tr> <tr> <td>Mary Mills</td> <td>Non-Patient</td> <td>No</td> <td>N/A</td> <td>N/A</td> </tr> <tr> <td>Rod Place</td> <td>Patient</td> <td>No</td> <td>2/20/2020</td> <td>PMC</td> </tr> <tr> <td>Luz Maria Sandoval</td> <td>Patient</td> <td>No</td> <td>6/23/2020</td> <td>FPCC</td> </tr> <tr> <td>Melanie Toutai</td> <td>Non-Patient</td> <td>Yes</td> <td>N/A</td> <td>N/A</td> </tr> <tr> <td>Alicia Yonemoto</td> <td>Patient</td> <td>No</td> <td>12/17/2019</td> <td>PMC</td> </tr> </tbody> </table>	Board Member Name	Patient / Non Patient	Derives > 10% of Annual Income from Health Care Industry	Last Date of Service	Clinic	Mike Baskett	Non-Patient	No	N/A	N/A	Ismael P. Cortez	Patient	No	11/27/2019	FMC	Brian Heck	Non-Patient	No	N/A	N/A	Alvin Maldonado	Patient	No	11/8/2019	PMC	Esgardo Medina	Patient	No	8/27/2019	PMC	Mary Mills	Non-Patient	No	N/A	N/A	Rod Place	Patient	No	2/20/2020	PMC	Luz Maria Sandoval	Patient	No	6/23/2020	FPCC	Melanie Toutai	Non-Patient	Yes	N/A	N/A	Alicia Yonemoto	Patient	No	12/17/2019	PMC	No attachments	No action required
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<p>8. <u>Finance Committee Report (Kris Zuniga)</u></p> <p>Due to June 29th Finance meeting being cancelled, this agenda item is deferred to July's board meeting.</p>	Attachment 8 (Finance Committee Agenda and Minutes with attachments)	Deferred to next month's meeting																																																							
<p>9. <u>SJCC Board Training (Susan Thorner – Fiscal Solutions)</u></p> <p>Susan Thorner presented tonight's training that aims to enhance the board members' understanding of Bureau of Primary Health Care's (BPHC) Program Requirements regarding board composition. During the month of June, we verify patient board member status and verify the percentage of board members who derive >10% of their annual income from the health care industry (as discussed in Agenda item 7).</p> <p>All of the requirements related to Board Composition are outlined in the compliance manuals (Chapter 20). The Board should</p>	Attachment 9 (Fiscal Solutions SJCC Board Training)	No Action Required.																																																							

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<p>should be at least nine board members but no more than 25 members. The majority of the Board members need to be patients. The patient board member should be representative of the community that we are serving in terms of race, ethnicity and gender. The Board should be appropriate for the size and complexity of the health center. It should be a workable board in terms of size; enough people to do the tasks but not too many that you can't gather together. Susan advised having diverse skills, knowledge base experience in the community makes for a stronger board. Susan added that a parent or legal guardian of a dependent child or adult, or the legal sponsor of an immigrant can be considered a patient for the purposes of Board representation.</p> <p>Susan mentioned besides the resources mentioned, Form 5A and Form 5B are important in terms of Board Composition since patient board members have to receive one in-scope service at one of the sites listed on Form 5B.</p> <p>(See attached training for more details) – Attachment 9</p>		
<p>10. CEO Report (Dr. Farhan Fadoo)</p> <p>Mike Baskett asked Dr. Fadoo, with the ongoing pandemic, have we still gone forward with closing the Hazelton and Manteca Clinics. Dr. Fadoo stated today was the last day of clinic at both locations and we are not operational after today. We still have the lease at the Manteca site. Mike asked what the plan is for the Manteca site since we are locked into the lease; will another medical facility or doctor take over the facility.</p> <p>Dr. Fadoo advised we are coordinating with the County General Services Department to look at alternative uses for this space. We are looking inwardly at other county agencies that might have a use for that space and secondly looking at the private sector for sub-lease options. It is possible that the hospital may have some use for the space as an administrative space, but no decisions have been made yet.</p> <p>Dr. Fadoo presented the CEO report shown below:</p> <p style="text-align: center;">CEO Report – Previous 30 Days</p> <ul style="list-style-type: none"> • COVID19 response <ul style="list-style-type: none"> • Dynamic situation – F2F vs. virtual • Active screening measures in place for F2F visits • Drive-through testing with Verily Project Baseline <ul style="list-style-type: none"> • 250 scheduled/day, 6 days/week (tapering to 5 days/week starting July 1) • Homeless testing – encampments/shelters – see video • Occupational testing MOUs now extend to field testing migrant workers; additional interest from private sector • Co-Applicant Agreement ratified by SJC BOS 6/16 • SJCC/SJGH formal MOU – Fiscal Solutions working on revision #3 	Attachment 10 (CEO Report)	

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<ul style="list-style-type: none"> • Grant activity – Jeff <ul style="list-style-type: none"> • HRSA ECT – \$592k for SJCC to support COVID response efforts, submitted 6/1 • FCC • Title X (Essential Health Access) • IBH Prop 56 • PRIME DY15-YE report due 9/30 (reporting period ends 6/30) • Monitoring extension of 1115 programs closely • Hazelton and Manteca closures with transition of staff to remaining sites <ul style="list-style-type: none"> • New provider templates in effect (higher production) <p style="font-size: small; margin-top: 10px;">Fadoo.6/30/20</p> <p>Dr. Fadoo stated COVID-19 still dominates our focus within the clinics. The clinic volume has gone up considerably in the last several days and weeks and we are back in a posture of making changes back to virtual vs face-to-face care as a result of the rise in cases over the last weeks. We have made that our default state and only if there is a patient or provider preference or insistence that there needs to be a face to face encounter then we will make that happen.</p> <p>For our Drive-through testing, we were initially doing 200 scheduled visits a day which has since increased in the last 3-4 weeks to 250 appointments per day. There is about a 25% no show rate on those appointments which is not unique to our drive-through. Verily (Project Baseline) operates in a number of communities throughout the state and that figure is remarkably consistent across all of their sites. In response to that no-show rate, we increased the number of appointments scheduled per day. We had planned on going down to five days a week, but the Office of Emergency Services may have access to volunteer staff that we can train to help with our effort. If we are able to do this, we may still be able to remain at six days a week testing.</p> <p>Dr. Fadoo advised Dr. Parsa, the Family Medicine Department, Joan Singson (Population Health staff) and our whole person care staff have been engaging with the homeless population to do more testing at the encampments and the shelters. The DA's office put together a video along with United Way that highlights San Joaquin County Clinic's involvement along with other community agencies in COVID testing within the homeless community (https://youtu.be/H1n8ZXpcnSY). This video is also posted on the SJCC website.</p> <p>Dr. Fadoo advised the Occupational testing for first responders have increased. We are also extending to field testing migrant workers starting next week. We are also hearing of interest from the private sector.</p> <p>The Co-Applicant Agreement was ratified by the San Joaquin Board of Supervisors on June 16th and once we receive the fully executed agreement, this will be shared with the committee.</p> <ul style="list-style-type: none"> ➤ Grant Activity Jeff Slater briefly reviewed the four grants we are waiting to hear from that the board has already approved our submission. ➤ HRSA ECT (Expanded Capacity for Coronavirus testing) We requested approximately \$592K on June 1st. The grant starts tomorrow, July 1st so we should know shortly whether or not we will be funded. These dollars are to be used for expanded capacity for coronavirus testing. Our application is primarily being used on the staffing side. 		

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<ul style="list-style-type: none"> ➤ FCC (Federal Communications Commission) – They had a grant opportunity of \$200M for Telehealth related activities associated with COVID pandemic. We requested approximately \$380K, primarily for telehealth equipment, speakers, video equipment and remote monitoring where we could monitor blood pressure, blood sugar levels so patients don't have to come in for care so their chronic diseases could be cared for from their home. We also requesting dollars for translation services and for some improvement for our internet bandwidth capacity. So far, the FCC has given out \$157M, leaving \$43M. These have primarily been distributed in hot spots. ➤ Title X (Essential Health Access) – This was a \$300K grant awarded to us for Family Planning Activities. This is going to the BOS for approval on July 21st. This ➤ IBH (Integrated Behavioral Health) Prop 56 funding opportunity – We requested about \$2M to integrate phycologists and Licensed Clinical Social Workers (LCSW), in addition, to have substance abuse navigators specifically focused in our maternal health clinic. This was originally incentive payments to be awarded much earlier from Health Plan of San Joaquin (HPSJ) but there have been issues related to COVID and the State Budget. We are still waiting to hear from HPSJ if they have the money to give and if so, how much we will be selected for, if anything. Jeff advised he contacted HPSJ lead the week before last and they still did not have any definite information. We will hopefully be hearing back soon. <p>Dr. Fadoo stated the next few bullet points pertain to supplemental funding. There is nothing definitive on the extensions and we are monitoring to see what decisions are returning.</p> <p>As mentioned earlier, the Hazelton and Manteca Clinics are now closed, we have moved staff back to the other clinics etc. We have also moved to 15-minute appointments with few exceptions.</p> <p>Alicia Yonemoto asked if all the equipment have been returned or transferred to other clinics. Alice Soulignie advised the only equipment on lease were the Ricoh copiers which will be absorbed at on-site clinics who are reaching the end of their lease with Ricoh. All the other equipment were purchased, and we were able to swap those out for worn out equipment. The California Street and French Camp locations received some upgrades as a result, such as blood pressure units; bilirubin for pediatrics; dopplers for OB/GYN, exam tables. As far as furniture, those will be absorbed throughout the hospital and clinics.</p>		
<p>11. <u>ADJOURNMENT</u></p> <p>There being no further topics of discussion, Rod Place adjourned the meeting at 6:20 p.m. Closed Session followed for the Executive Director Evaluation discussion.</p>		<p>No Action Required</p>

Signed by:

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

Date