



San Mateo Medical Center
A County System of Healthcare

BOARD OF DIRECTORS MEETING

Thursday, August 2, 2018

8:00 AM – 10:00 AM

SAN MATEO MEDICAL CENTER

EXECUTIVE BOARD ROOM

Second Floor, Administration Wing



San Mateo Medical Center
A County System of Healthcare

BOARD OF DIRECTORS MEETING

August 2, 2018 8:00 – 10:00 AM

Executive Board Room – Second Floor, Administration Wing

AGENDA

A. CALL TO ORDER

B. CLOSED SESSION

Items Requiring Action

1. Medical Staff Credentialing Report
2. Quality Report

Dr. Bryan Gescuk

Dr. Julie Hersk

Informational Items

3. Medical Executive Committee

Dr. Bryan Gescuk

C. REPORT OUT OF CLOSED SESSION

D. PUBLIC COMMENT

Persons wishing to address items not on the agenda

E. FOUNDATION REPORT

Leslie Williams-Hurt

F. CONSENT AGENDA

TAB 1

Approval of:

1. July 5, 2018 Meeting Minutes

G. MEDICAL STAFF REPORT

Chief of Staff Update

Dr. Bryan Gescuk

H. ADMINISTRATION REPORTS

1. Infection Control

Dr. Susan Fernyak Verbal

2. Compliance and HIPAA

Dr. CJ Kunnappilly..... Verbal

3. Financial Forecast and Strategic Planning

*Louise Rogers, Dr. CJ Kunnappilly,
David McGrew..... Verbal*

4. CEO Report

*Dr. CJ Kunnappilly..... **TAB 2***

* There will be no financial report for this month due to year-end close.

I. HEALTH SYSTEM CHIEF REPORT

Health System Snapshot

*Louise Rogers..... **TAB 2***

J. COUNTY MANAGER’S REPORT

John Maltbie

K. BOARD OF SUPERVISOR’S REPORT

Supervisor Carole Groom

L. ADJOURNMENT

Meetings are accessible to people with disabilities. Individuals who need special assistance or a disability-related modification or accommodation (including auxiliary aids or services) to participate in this meeting, or who have a disability and wish to request an alternative format for the agenda, meeting notice, agenda packet or other writings that may be distributed at the meeting, should contact Michelle Lee, Executive Secretary, at least 48 hours before the meeting at (650) 573-2222 and/or mlee@smcgov.org. Notification in advance of the meeting will enable the County to make reasonable arrangements to ensure accessibility to this meeting and the materials related to it. Attendees to this meeting are reminded that other attendees may be sensitive to various chemical based products.



San Mateo Medical Center
A County System of Healthcare

TAB 1

CONSENT AGENDA

HOSPITAL BOARD OF DIRECTORS
MEETING MINUTES
Thursday, July 5, 2018
Executive Board Room

Board Members Present

Supervisor Carole Groom
Supervisor David Canepa
John Maltbie
Louise Rogers
Dr. CJ Kunnappilly
Dr. Janet Chaikind
Dr. Alex Ding
Deborah Torres

Staff Present

Michelle Lee
David McGrew
Dr. Alpa Sanghavi
Joan Spicer
Brighton Ncube
Gabriela Behn
John Jurow

Priscilla Romero
Aimee Armsby
Cecilia Diaz
Angela Gonzalez
Karen Pugh
Jackie Pelka
Dianaliza Ponco

Members of the Public

ITEM	DISCUSSION/RECOMMENDATION	ACTION
Call to Order	Supervisor Groom called the meeting to order at 8:00 AM, and the Board adjourned to Closed Session.	
Reconvene to Open Session	The meeting was reconvened at 8:10 AM to Open Session. A quorum was present (see above).	
Report out of Closed Session	Medical Staff Credentialing Report for July 5, 2018. QIC Minutes from May 22, 2018. Medical Executive Committee Minutes from June 12, 2018.	Aimee Armsby reported that the Board unanimously approved the Credentialing Report and the QIC Minutes and accepted the MEC Minutes.
Public Comment	None.	
Foundation Report	No report.	FYI
Consent Agenda	Approval of: 1. Hospital Board Meeting Minutes from June 7, 2018.	It was MOVED, SECONDED and CARRIED unanimously to approve all items on the Consent Agenda.
Medical Staff Report Dr. Janet Chaikind	Dr. Jennifer Lin is the new medical director for the Edison Clinic. Dr. Frank Trinh will become the Chair of the Medicine Department and Dr. Suja Georgie will be the Vice Chair. Dr. Scott Lock will become the Chair of the Surgery Department and Dr. Kenton Fong will be the Vice Chair.	FYI

<p>Radiology Department Dr. Alex Ding John Jurow</p>	<p>Radiology Department</p> <ul style="list-style-type: none"> • Staffing: 20 radiologists, 18 technologists, and 7 support staff • Approximately 48,000 procedures per year: 40% Diagnostic; 23% Ultrasound; 14% CT; 13% Mammo; 5% MRI, 5% Echo and Special • Overall Patient Experience rating is 79.1 <p>Accomplishments</p> <ul style="list-style-type: none"> • CT and Mammography accreditation by American College of Radiology (ACR)- Requirement for Medi-cal reimbursement. • Passed State Inspections for both Mammography and CT • Powershare Network to share images between facilities. • New digital holter, stress treadmill and cardiology management system. • Nurse hired for Interventional Radiology Procedures. <p>Upcoming</p> <ul style="list-style-type: none"> • MRI is scheduled to go live in 2020. Will allow 24/7 MRI access and result in no more transferring of pts • Fluoroscopy Unit • System Upgrades due to Windows 10 • Department Redesign • Vascular Imaging Services • Accreditations in Echocardiography, MRI, Breast Ultrasound 	<p>FYI</p>
<p>Patient Experience Dianaliza Ponco</p>	<p>Services: Patient Experience surveys, We Care Training, Patient Complaint and Grievances, Volunteer Services, Patient Family Advisory Council, Spiritual Care, Gift Shop.</p> <p>NRC Health is the new vendor for patient experience surveys</p> <ul style="list-style-type: none"> • 24.9% response rate = 14,495 responses • Responses – Email 6%, SMS 18%, IVR 76% 	<p>FYI</p>
<p>Financial Report David McGrew, CFO</p>	<p>The May FY17/18 financial report was included in the Board packet and David McGrew answered questions from the Board.</p>	<p>FYI</p>
<p>CEO Report Dr. CJ Kunnappilly, CEO</p>	<p>Dr. Kunnappilly presented the CEO report which was included in the Board packet and answered questions from the Board.</p>	<p>FYI</p>
<p>Health System Report Louise Rogers</p>	<p>The Health System was awarded a 2-year, \$80,000 grant to advance pediatric health services from the Center for Care Innovations of Tides Foundation (CCI).</p>	<p>FYI</p>

	The Serenity House will hold their open house on September 6. The maximum occupancy for the facility is set at ten.	
County Manager John Maltbie	The Board of Supervisors has adopted the budget for fiscal year 17-18. Approximately 22-30 children per month are coming to the county when they are separated from their parents at the US border. The county is not alerted when it happens but the children may seek medical care here.	FYI
Board of Supervisors Supervisor Groom	John Maltbie will retire the Board of Supervisors has identified someone to take over as CMO. An official announcement will follow soon.	FYI

Supervisor Groom adjourned the meeting at 9:13 AM. The next Board meeting will be held on August 2, 2018.

Minutes recorded by:



Michelle Lee, Executive Secretary

Minutes approved by:



Dr. Chester Kunnappilly, Chief Executive Officer



San Mateo Medical Center
A County System of Healthcare

TAB 2

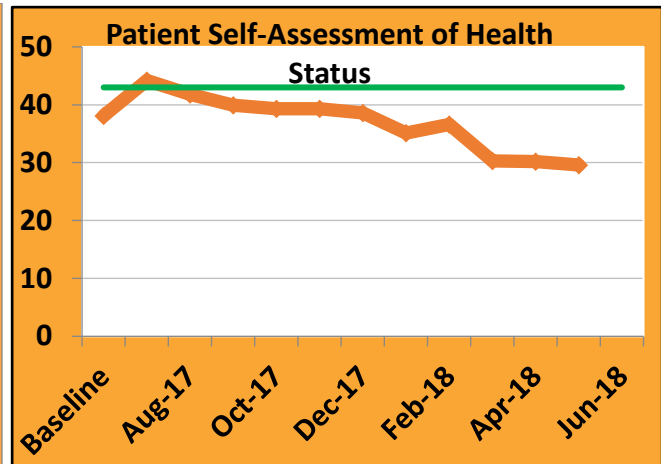
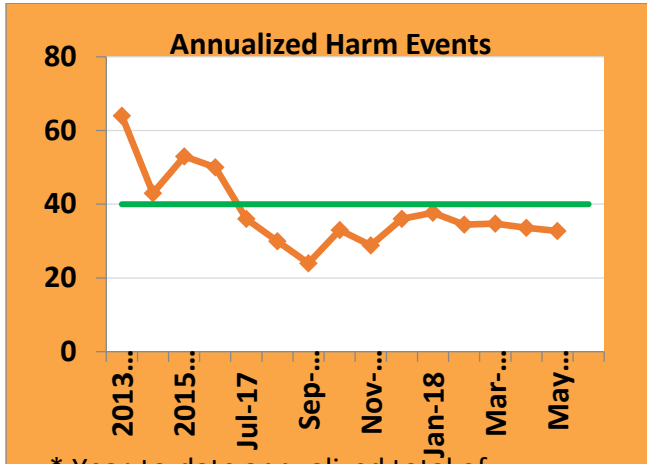
ADMINISTRATION REPORTS



August, 2018

EXCELLENT CARE

• **PILLAR METRICS**



Harm Events= Avoidable Patient Harm= Central Line Infections, Catheter Associated Urinary Infections, Hospital Acquired Pressure Ulcers, Surgical Site Infections, Medication errors with harm, Blood clots, Falls with Injury and other avoidable patient harm events. The number is annualized (i.e the number after 2 months is multiplied by 6, the number after 4 months is multiplied by 3 etc)—**Lower is better**

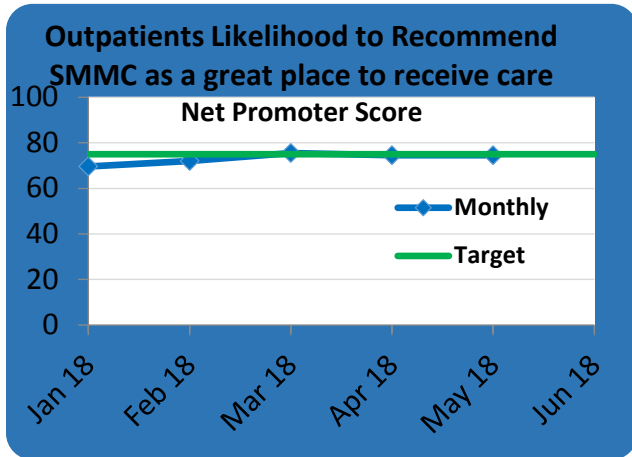
Patient Self-Assessment of Health: All Primary Care patients receive an experience survey. One of the questions asks them to rate their health from poor to excellent. This is the percentage that rate their health as very good or excellent—**Higher is better.**

Survey vendor and methodology change in January 2018 resets baseline.

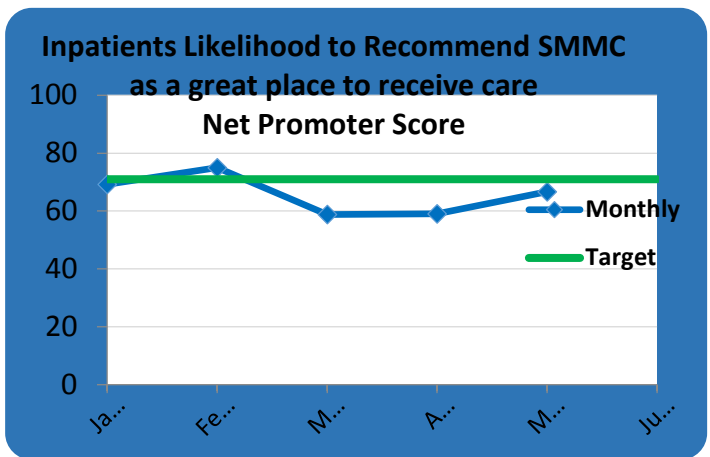
- **Kicking Off New Strategic Planning Cycle-** In July, SMMC began its 2018-2019 strategic planning cycle. We are currently analyzing our gaps and opportunities focused on how we can best serve the needs for our patients. Over the coming weeks, leadership and staff will be further engaged in developing and initiating these strategic efforts utilizing our LEAP principles and tools. We will look forward to providing updates as the plan develops.

PATIENT CENTERED CARE

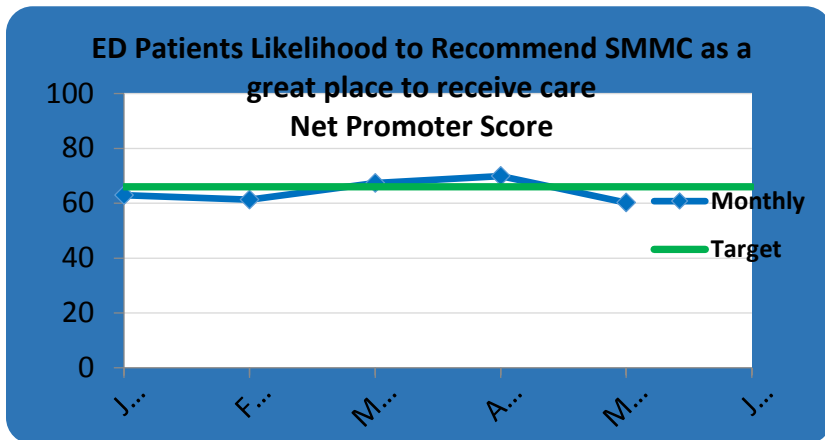
- PILLAR METRICS**



NRC Net Promoter: Score on the question of “How likely are you to recommend this clinic to friends and family?”-Percentage of patients who gave SMMC the highest score (9 or 10) **Higher is better**



NRC Net Promoter Score: Score on the question of “How likely are you to recommend this Hospital to friends and family?”-Percentage of patients who gave SMMC the highest score (9 or 10) **Higher is better**

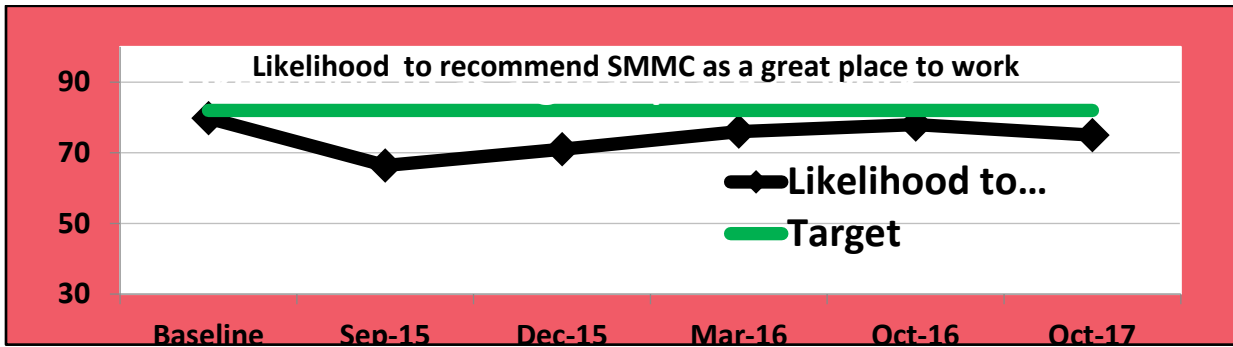


NRC Net Promoter Score: Score on the question of “How likely are you to recommend this Emergency Department to friends and family?” Percentage of patients who gave SMMC the highest score (9 or 10) -- **Higher is better**

- Patient Partners Attend Leadership Retreat** –On July 18th, SMMC held its semiannual Leadership Retreat. This was also part of the kickoff for our strategic planning cycle. We were honored to be joined by four members of our **Patient and Family Advisory Council (PFAC)**. The panel shared not only their experiences with the organization, but also those of fellow PFAC members who could not join us. There was a great deal of positive feedback along with constructive input on where there are opportunities for improvement. We greatly appreciate their time as it contributed tremendously to a highly productive day.

STAFF ENGAGEMENT

- PILLAR METRICS**

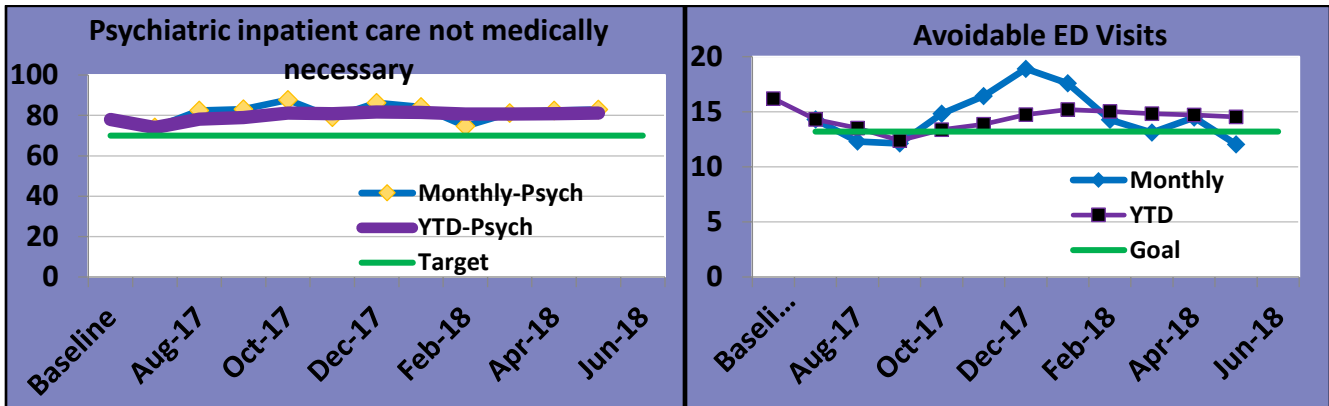


County Staff Engagement Survey: Percentage of staff members who Agree or Strongly Agree that they would recommend SMMC as a great place to work-Higher is better

- Staff Recognized in Quarterly Employee Forums:** In July, it was again my privilege to conduct quarterly employee forums. Each quarter we also use this as an opportunity to celebrate those staff members who have received five or more submissions in either one of our employee recognition program. The **Above and Beyond** program is our peer to peer recognition program and allows staff to recognize the work and efforts of their colleagues. This quarter I was excited to recognize the following staff members who have received five or more submissions in the program: Suja Georgie (Inpatient Medical-Surgical), Uma Nair (Accounting), Mayela Rodriguez (Fair Oaks Health Center), Priscilla Padilla-Romero (Medical Staff Office), Kristin Sykes (Emergency Department), Ada Lorena Nunez (Daly City Clinic) and Joseph Hunter (Medical Center IT Services). In addition, it was a privilege to celebrate Ortencia Lomas (Fair Oaks Health Center) who received five or more submissions in the **Just Because** program; the recognition program that allows patients to recognize the efforts of individual staff members. Congratulations to all of these individuals and everyone who received a recognition this quarter!
- Celebrating the World Cup:** Staff at the hospital celebrated the 2018 World Cup in style. For the month-long playoffs, Café 39 was decorated with soccer balls and international flags and featured entrees from the competing countries. Games were broadcast during lunchtime so staff and patients could cheer on their teams. The activities were well received by staff and are part of our efforts to infuse more celebration opportunities into our day to day work.
- School Supplies for Our Community:** SMMC volunteers hosted the Golden Gate Harley Owners Group (HOGs) on Saturday, July 28 for the 9th Annual School Supply Run. The HOGs rolled into the hospital parking lot around 10:00 a.m. and unloaded over one hundred and fifty backpacks filled with paper, binders, pencils, calculators, and all the supplies kids need to be successful at school. In addition, they presented cash donations of **\$1800**. These donations will allow us to provide backpacks to hundreds of SMMC pediatric patients and community members. We are grateful for the ongoing support of the Golden Gate Harley Owners Group, the staff who donate and volunteer their time, and our incredible volunteer team. Special thanks to Glynis Carreira and Donna Lautenbach for organizing the event.

RIGHT CARE, TIME AND PLACE

• PILLAR METRICS

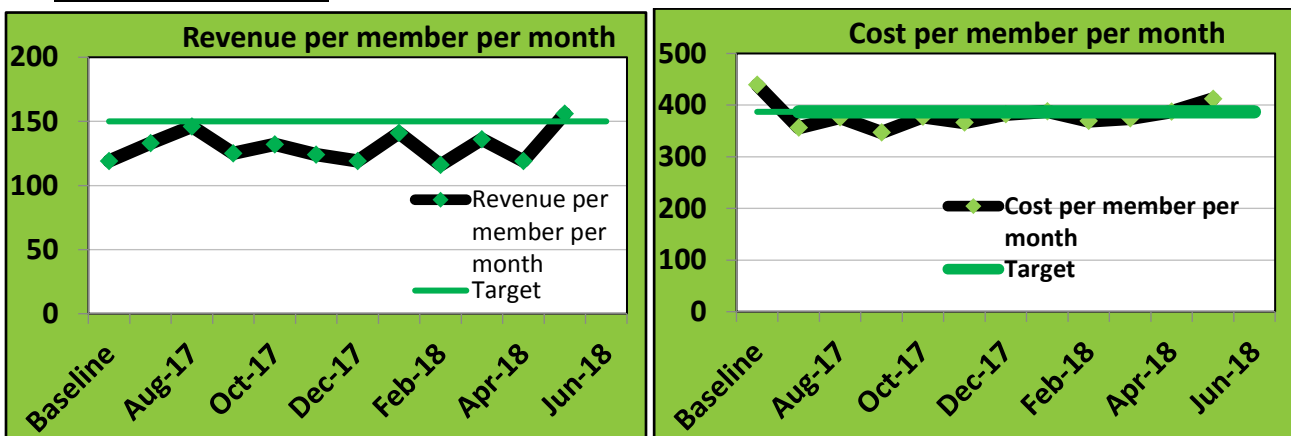


Psychiatric Non-medically necessary Inpatient Days: Percentage of Acute Inpatient psychiatry days where a patient may have been able to be discharged if there was a safe environment for them to go to-**Lower is better**

Potentially Avoidable ED Visits: Percentage of ED visits by Established Primary Care Patients where the discharge diagnosis is one that traditionally could have been treated in an outpatient setting rather than ED-**Lower is better**

FINANCIAL STEWARDSHIP

• PILLAR METRICS



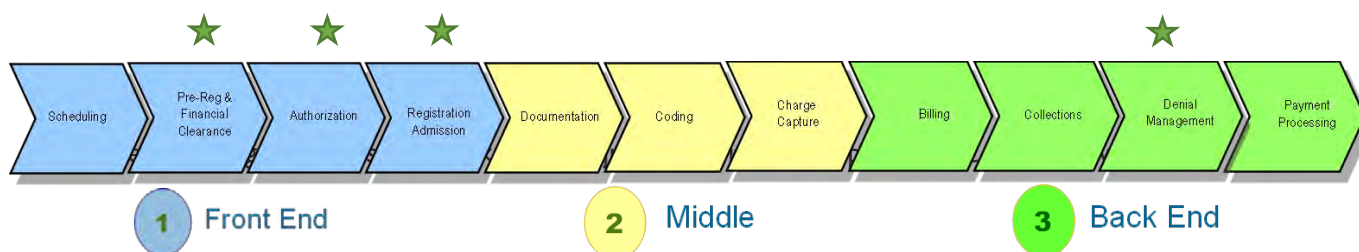
Revenue Per Member Per Month: Total Patient Revenue divided by total assigned members-**Higher is better**

Cost Per Member Per Month: Total Cost divided by total assigned members-**Lower is better**

• Revenue Cycle Transformation – FY18 Initiatives

As our FY17-18 Financial Stewardship strategic initiatives approach the end of the year, the Revenue Cycle teams are looking to build on this year’s successes to launch into FY18-19. The focus will continue to be on using LEAP concepts to identify opportunities to improve workflows to ensure accuracy on the Front-End, thereby decreasing defects & waste that impact the Back End functions. Specifically, the teams will continue to work on 3 focus areas: 1) insurance verification accuracy, with support from Experian’s eCare NEXT software for workflows and reporting; 2) medical necessity & authorizations, with support from the clinical

documentation improvement program (CDI) project; and 3) denials management, with support from the Wellington DenialsNavigator software for workflows and reporting.



Measures:	Baseline value (6/30/17)	Current Value (6/30/18)	Budget Value (FY17-18)	Ideal Value
Revenue per member per month (pmpm)	\$119	\$156	\$150	\$398
Claim denials (< 5% NPR)	\$4.4 million	\$5.2 million	\$4.1 million	No Denials
Unbilled accounts (5 day bill hold)	\$8.6 million	\$8.2 million	\$5.5 million	No Unbilled

- Quality, Compliance & Revenue Cycle Transformation-Clinical Documentation Improvement**

We kicked off the Clinical Documentation Improvement (CDI) project in July. Successful CDI programs facilitate the accurate representation of a patient’s clinical status that translates into coded data. Coded data is then translated into quality reporting, medical necessity determination, accurate reimbursement, public health data, and disease tracking and trending. CDI programs involve significant collaboration between Providers and Health Information Management teams.

The CDI project is scheduled for two phases: 1) CDI program assessment & design, and 2) CDI software implementation. We expect to be fully live by the end of the calendar year and will periodically report our progress to the Board.

- Certified Revenue Cycle Representatives**

The Healthcare Financial Management Association has a certification program that was created to advance revenue cycle staff’s proficiency and technical expertise. The Certified Revenue Cycle Representative (CRCR) program is a national certification for revenue cycle staff at every level of the organization and sets standards of performance for revenue cycle staff and proves a high level of revenue knowledge and expertise has been reached. Congratulations to the following individuals who have successfully passed the final certification exam: David McGrew-CFO, Gabriela Behn-Compliance Officer, Portia Dixon-Patient Financial Services Manager, Stefani Stockstill-Patient Financial Services Systems Analyst; Valissa Mathewson-Coding Manager, and Maica Bailon-Financial Planning & Analysis. Ten additional Finance staff are in various phases of studying for the final exam and we’re committed to supporting continuing education and professional certifications for all of our Finance staff.

SNAPSHOT: San Mateo County Health

TO: SMMC Board Members | FROM: Louise Rogers, Chief

INDICATOR	NUMBER	CHANGE FROM PREVIOUS MONTH	CHANGE FROM PREVIOUS YEAR
ACE Enrollees	21,050 (June 2018)	.4%	-2.1%
SMMC Emergency Department Visits	3,312 (June 2018)	-9.2%	-7.1%
New Clients Awaiting Primary Care Appt.	377 (July 2018)	-4.3%	-59.5%

San Mateo County Health Promotes Unity and Awareness for LGBTQ+ Community

The county's sixth annual Pride event in San Mateo Central Park drew 800 people and featured the largest number of information and resource booths to date, connecting residents to public health and community programs. Organized by Behavioral Health and Recovery Services' (BHRS) PRIDE Initiative, the event was supported by 50 volunteers from County Health, including BHRS, Health Equity Initiatives, and residents. County Health's mobile STD van provided free HIV testing for attendees on request. Other events in support of Pride month included a panel for staff, sponsored by Public Health, Policy, and Planning, to bring together voices and experiences from members of the LGBTQ+ community who have received County Health services. They shared insights into how San Mateo County has had an impact on their quality of life. Additionally, Aging and Adult Services (in partnership with Peninsula Family Services, Mission Hospice and Homecare, and the San Mateo County Pride Center) conducted a month-long LGBTQ+ film series for the public at both County Health and Pride Center facilities.



Photos: Briana Evans, Office of Diversity & Equity

New Safe Medicine Disposal Program Releases First Annual Collection Report

The Medication Education & Disposal Project (MED-Project) submitted its first annual report to Environmental Health Services detailing the medicine collection efforts for 2017. MED-Project is the industry-funded organization charged with providing safe medication collection and disposal services for the public following the passage of San Mateo County's 2015 Safe Medicine Disposal Ordinance. Last year 31,605 pounds of expired and unwanted meds were collected – a record high in San Mateo County and a 15% increase over 2016. Since January 2017 MED-Project has increased the number of safe disposal locations in the county from 14 kiosks to 49 in pharmacies (including 13 CVS stores), clinics, and police/sheriff stations throughout the Peninsula. MED-Project also conducted 15 medicine take-back events throughout the year in partnership with San Mateo County Libraries and local law enforcement agencies. The success of this program is key to reducing the environmental impacts of improper medicine disposal, curtailing potential prescription drug overdoses, and preventing accidental consumption by children and pets.



Photo: Preston Merchant, County Health Communications

