



SAN MATEO COUNTY HEALTH

**SAN MATEO  
MEDICAL CENTER**

# **BOARD OF DIRECTORS MEETING**

Monday, May 1, 2023  
8:00 AM – 10:00 AM

Atrium Conference Room  
2000 Alameda de las Pulgas, San Mateo, CA 94403



# AGENDA

---

Board of Directors	Monday, May 1, 2023	8:00 AM
--------------------	---------------------	---------

---

Atrium Conference Room, 2000 Alameda del las Pulgas, San Mateo, CA 94403

This meeting of the San Mateo Medical Center Board of Directors will be held in-person in the Atrium Conference Room, 2000 Alameda de las Pulgas, San Mateo, CA. Remote participation of this meeting will not be available. To observe or participate in the meeting, please attend in-person.

\*Written public comments may be emailed to [mlee@smcgov.org](mailto:mlee@smcgov.org) and such written comments should indicate the specific agenda item on which you are commenting. They will be read aloud at the meeting.

## A. CALL TO ORDER

## B. CLOSED SESSION

### *Items Requiring Action*

1. Medical Staff Credentialing Report
2. Quality Report

Dr. Steve Hassid  
Dr. Brita Almog

### *Informational Items*

3. Medical Executive Committee

Dr. Steve Hassid

## C. REPORT OUT OF CLOSED SESSION

## D. PUBLIC COMMENT

Persons wishing to address items not on the agenda

## E. FOUNDATION REPORT

John Jurow

## F. CONSENT AGENDA

### *Approval of:*

1. April 3, 2023 Meeting Minutes

## G. MEDICAL STAFF REPORT

Chief of Staff Update

Dr. Steve Hassid

**H. ADMINISTRATION REPORTS**

- 1. Department of Psychiatry Carlton Mills..... Verbal  
Dr. Katalin Szabo
  
- 2. Compliance Report Gabriela Behn..... Verbal
  
- 3. Substance Use Services for Unhoused Residents Louise Rogers ..... Verbal  
Clara Boyden
  
- 4. Financial Report David McGrew..... TAB 2
  
- 5. Board Survey Results and CEO Report Dr. CJ Kunnappilly..... TAB 2

**I. COUNTY HEALTH CHIEF REPORT**

- County Health Snapshot Louise Rogers..... TAB 2

**J. COUNTY EXECUTIVE OFFICER REPORT**

Mike Callagy

**K. BOARD OF SUPERVISOR REPORT**

Supervisor David Canepa

**L. ADJOURNMENT**

**ADA Requests**

Individuals who require special assistance or a disability-related modification or accommodation to participate in this meeting, or who have a disability and wish to request an alternative format for the meeting, should contact Michelle Lee, at [mlee@smcgov.org](mailto:mlee@smcgov.org), as early as possible but not later than 10:00 AM on the business day before the meeting. Notification in advance of the meeting will enable the County to make reasonable arrangements to ensure accessibility to this meeting, the materials related to it, and your ability to comment.

# CONSENT AGENDA

HOSPITAL BOARD OF DIRECTORS  
MEETING MINUTES  
Monday, April 3, 2023  
SMMC Boardroom

**Board Members Present**

Supervisor David Canepa  
Supervisor Noelia Corzo  
Louise Rogers  
Dr. CJ Kunnappilly  
Dr. Steve Hassid  
Dr. Brita Almog  
Dr. Gordon Mak  
Deborah Torres

**Staff Present**

Michelle Lee	Rebecca Archer	Priscilla Romero
David McGrew	Gabriela Behn	
Dr. Alpa Sanghavi	Kacie Patton	
Robert Blake		
Iliana Rodriguez		
Dr. Amar Dixit		
Jackie Pelka		

ITEM	DISCUSSION/RECOMMENDATION	ACTION
Call to Order	Supervisor Canepa 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 8:32 AM to Open Session. A quorum was present (see above).	
Report out of Closed Session	Medical Staff Credentialing Report for April 3, 2023. QIC Minutes from February 28, 2023. Medical Executive Committee Minutes from March 14, 2023.	Rebecca Archer reported that the Board unanimously approved the Credentialing Report and the QIC Minutes and accepted the MEC Minutes.
Public Comment	None.	
Foundation Report John Jurow	No report.	FYI
Consent Agenda	Approval of: 1. Hospital Board Meeting Minutes from March 6, 2023.	It was MOVED, SECONDED and CARRIED unanimously to approve all items on the Consent Agenda.
Medical Staff Report Dr. Steve Hassid	Some of the Providers will move to the new administration building next month. The hospitalists feel the location would be too distant from the patients at the hospital so Administration is considering options so they can retain some workspace in the hospital.	FYI

	<p>On April 3, CDPH ended masking requirements in some setting including health care facilities. Now the local health departments and individual facilities may decide whether to mandate masks. Masking will still be required in SMMC skilled nursing and for all direct patient encounters. The current level of COVID-19 in the community is moderate and there is only one positive patient in the hospital.</p> <p>The Medical Staff elections will be taking place soon.</p>	
<p>Diagnostic Imaging Jacqueline Pelka</p>	<p>Some of the department’s procedures: Echocardiography, 24 hr Holter Monitors, Cardiac Stress Tests, Electroencephalogram (EEG), (EMG)Electromyography (EMG), Computerized Tomography (CT), Diagnostic X-ray Fluoroscopy, Interventional Radiology (IR), Mammography, Magnetic Resonance Imaging (MRI), Ultrasound</p> <p>Staffed by 28 Technologists, 3 Cardiologists, 2 Neurologists, 18 Radiologists, and 7 support staff. Highest volumes are lead by diagnostic x-ray, followed by ultrasound, and computerized tomography.</p> <p>Commitment to Equitable Care. Our imaging facility promotes health equity and ensures that:</p> <ul style="list-style-type: none"> <li>• All radiologists and technologists will receive comprehensive cultural competency training so they may adequately advise patients, families, and other caregivers on imaging studies.</li> <li>• We understand barriers to radiologic care exist and we have ways to reduce barriers for vulnerable populations.</li> <li>• We will promote diversity in our leadership and practice by mitigating bias in recruitment and retention.</li> </ul>	<p>FYI</p>
<p>Office of Diversity, Equity, and Inclusion Kacie Patton</p>	<p>SMMC has a very diverse patient population and 52% are Spanish speakers. DEI Workgroup: California Healthcare SNI, Institute for Healthcare Improvement, and DEI Workgroup</p> <p>DEI Workgroup work streams</p> <ul style="list-style-type: none"> <li>• QIP/HD</li> <li>• Workforce</li> <li>• Education</li> <li>• Patient Experience</li> <li>• Community Engagement</li> <li>• Finance/Communication/Technology</li> </ul> <p>Performance Metrics (2023-2025) Hypertension Prevention in African American/Black Patient Population Depression Screening and Follow-Up with African American/Black Patient Population Next Steps: Interviewing target patient population regarding their experience(s) Identification of team to work on the project Bi-weekly meetings for root cause analysis</p>	<p>FYI</p>

	Collaborative definition of success Collaborative planning process RE: potential interventions	
Financial Report David McGrew, CFO	The February FY 22/23 financial report was included in the Board packet and David McGrew answered questions from the Board.	FYI
CEO Report Dr. CJ Kunnappilly	Dr. Kunnappilly presented the CEO report which was included in the Board packet and answered questions from the Board. He also reminded the Board that the Board evaluation survey will remain open and the results reported at the May meeting. The next meeting will take place at the 2000 Alameda de las Pulgas location.	FYI
County Health Chief Report Louise Rogers	The Navigation Center will have its grand opening on April 18. It is the county's new 240-unit center, a housing complex which will offer wraparound services for the unhoused. Most of the units will have their own bathrooms. Health is exploring offering in-home services if there is a need.  Vital Records has moved to 1600 W. Hillsdale Blvd., San Mateo.  Ms. Rogers recognized Peter Shih, Robert Blake, and Paul Hundal for their collaboration on the new administration building which will be ready for occupants later this month.  Lisa Mancini will assume the interim role of Deputy Chief when Srija Srinivasan retires on May 1. We wish Srija the best after decades of public service!	FYI
County Executive Officer Iliana Rodriguez	No report	FYI
Board of Supervisors Supervisor David Canepa	Supervisor Canepa expressed his excitement about the new County Office Building 3 (COB 3) which is slated to open later this year. It will be a zero net energy building and certified LEED Gold.	FYI

Supervisor Canepa adjourned the meeting at 9:35 AM. The next Board meeting will be held on May 1, 2023.

Minutes recorded by:



Michelle Lee, Executive Secretary

Minutes approved by:



Dr. Chester Kunnappilly, Chief Executive Officer

# ADMINISTRATION REPORTS



# BOARD OF DIRECTORS SAN MATEO MEDICAL CENTER

**Financial Report: March FY22-23**

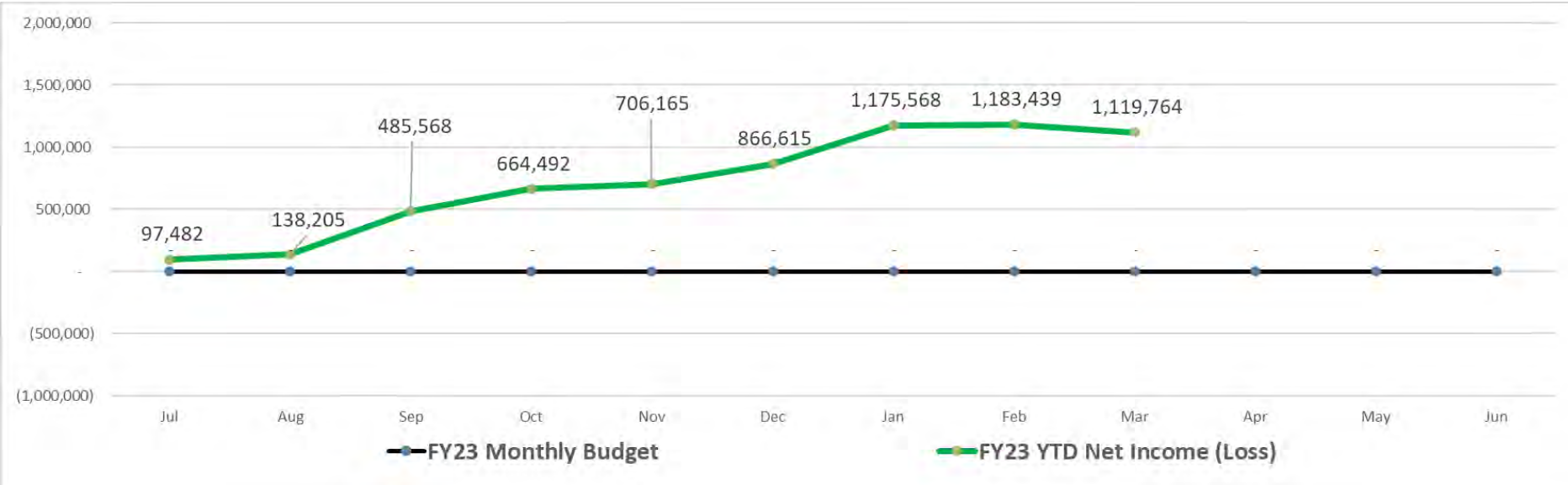
May 1, 2023

**Presenter: David McGrew, CFO**



SAN MATEO COUNTY HEALTH  
**SAN MATEO  
MEDICAL CENTER**

# FY22-23 Cumulative YTD Financial Results



## Net Income(loss) - Mar (\$64K), YTD \$1.1M

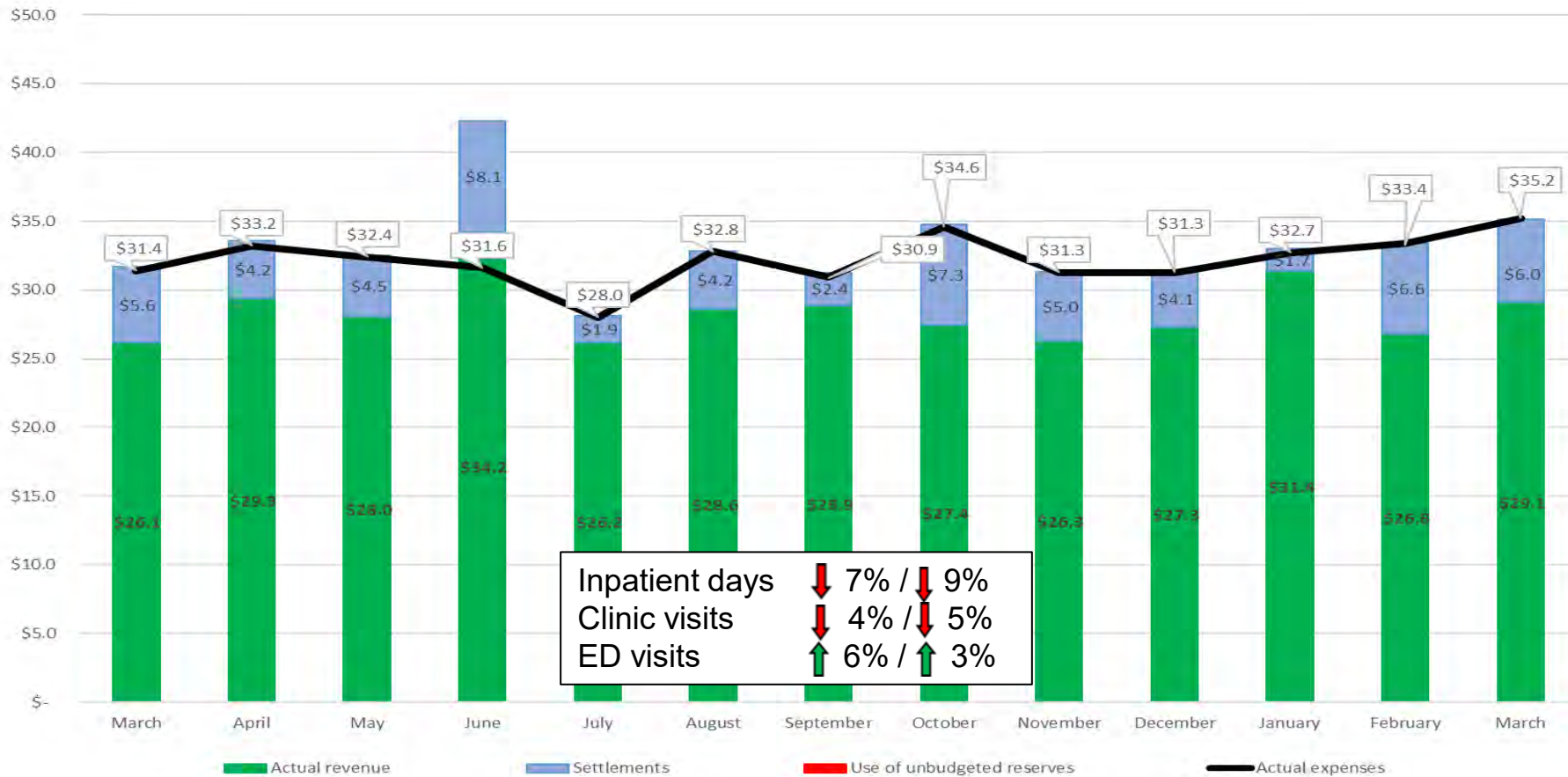
- FTEs 4% favorable
- Total labor cost favorable by \$2.6M
- ACE outside costs favorable by \$1M
- Prior year settlements by \$6M

- Drugs
- Supplies
- Nursing registry

**March FY23 Snapshot** – March is unfavorable to budget by \$64K and expected to stay favorable/breakeven for the remainder of the year. ACE outside costs are favorable due to the transition of 50+ population to Medi-Cal. Nursing registry costs remain unfavorable due to the difficulties with hiring permanent nurses. Salary costs are expected to increase as vacancies are filled and labor contracts are in full effect. Inpatient acute volume decreased as placements improved and Medical ED visits continue to be higher than budget. Clinic visits are 4% below budget for the month. Managed care membership is higher than budget mainly due to 50+ Medi-Cal expansion and suspension of disenrollment during the PHE.

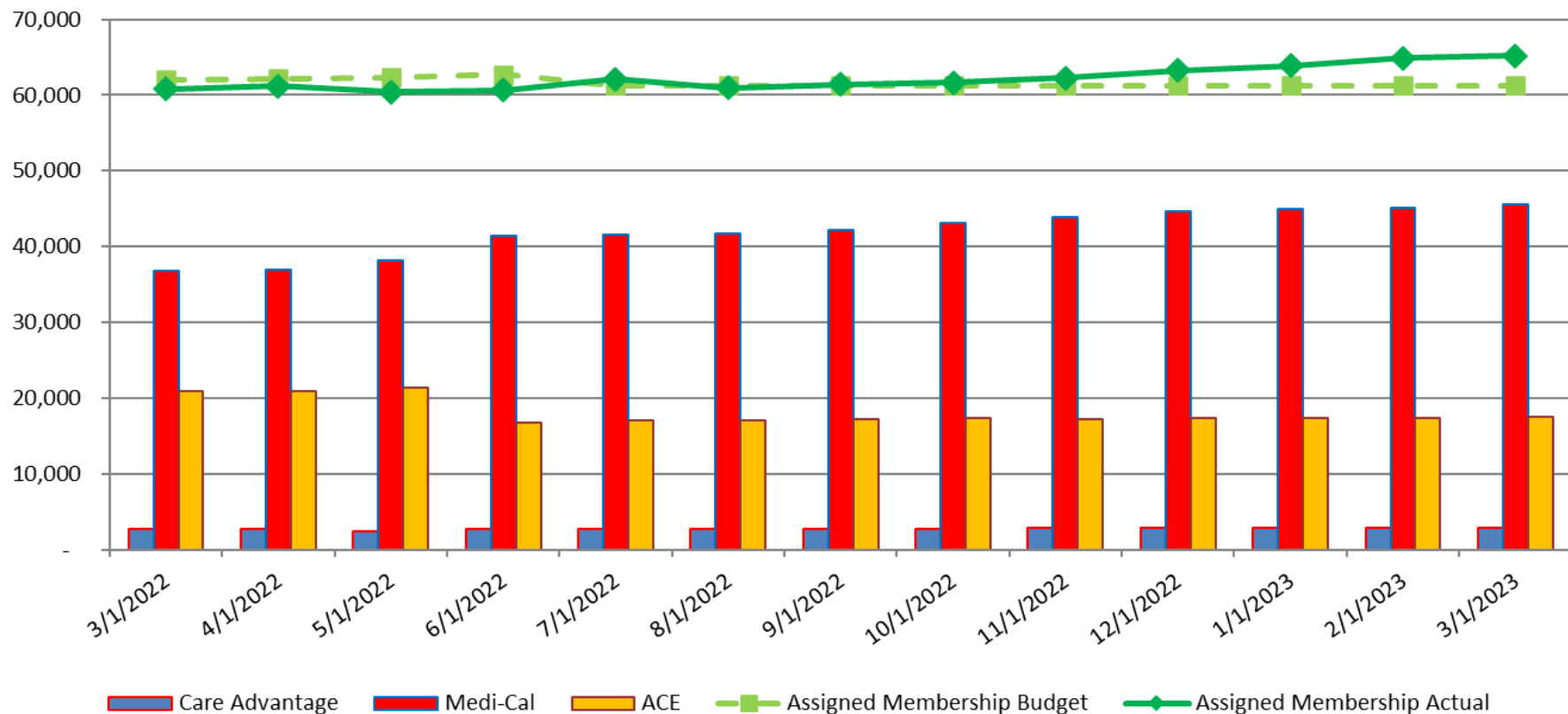
# FY 22-23 Revenue & Expense Trend

SMMC's current operating revenue fluctuates around an average of \$28 million (green bar). Operating expenses (black line) in FY23 are averaging \$32 million per month and trending right at budget. The spike in June Settlements (blue bar) was due to an unusual number of cost report closures.



Note: Volume %s are Current Month/YTD actuals vs budget

## Managed Care Membership Trend



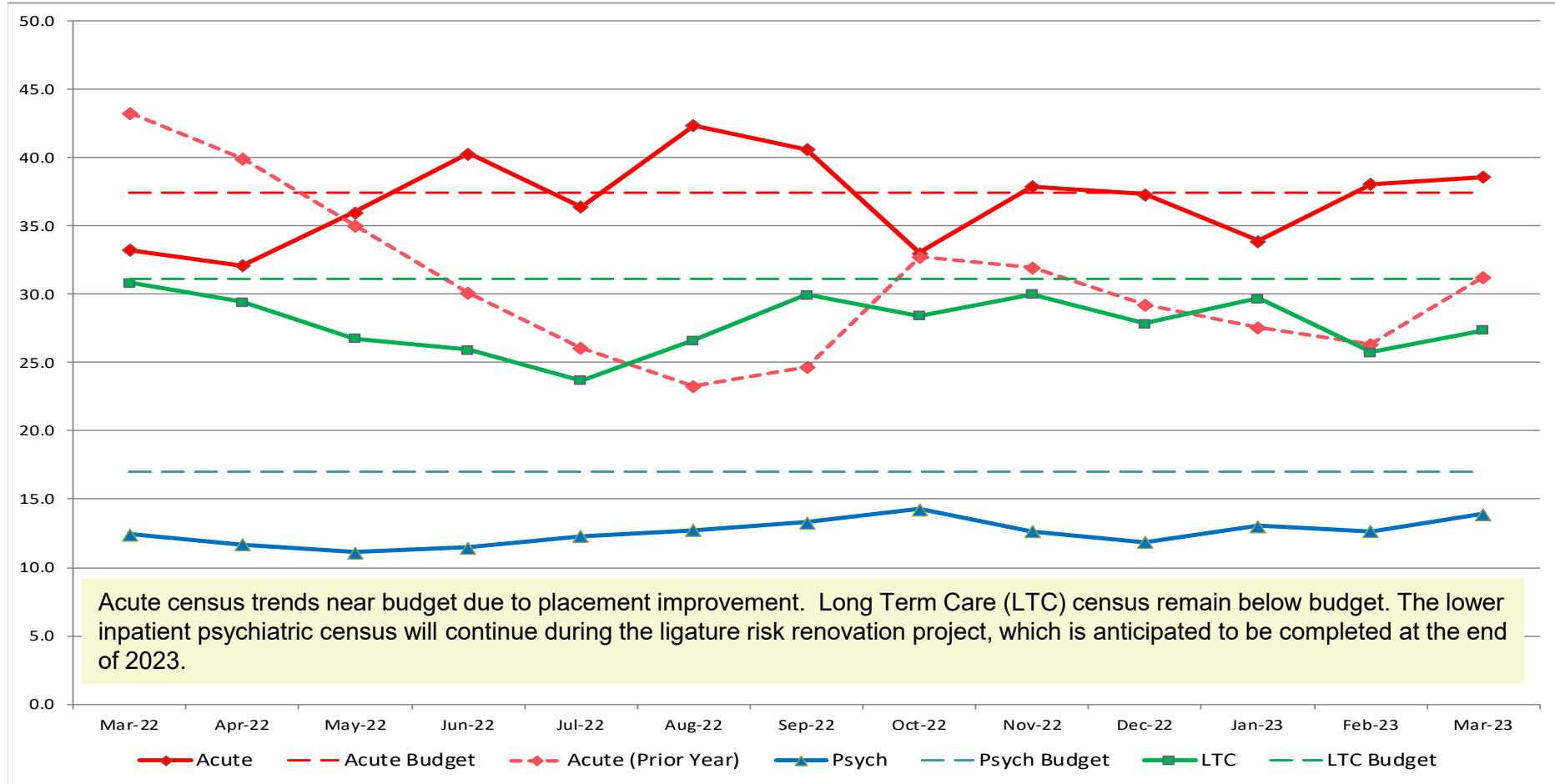
The membership in managed care programs has increased 38.5% for Medi-Cal since the onset of the COVID pandemic. During this period, the annual eligibility redetermination process was suspended. Further increases since May 2022 reflect the ACE 50+ population transitioning to Medi-Cal. As a result of the State restarting annual eligibility redeterminations at the end of the public health emergency, assignment decreases are expected beginning in July 2023. In total, the projected loss in assignments is approximately 6,000 Medi-Cal enrollees by June 2024. We anticipate the Medi-Cal expansion impacting the ACE 26-49 population will more than offset the loss due to disenrollments.

# San Mateo Medical Center Inpatient Days March 31, 2023

MONTH			
Actual	Budget	Variance	Stoplight
2,476	2,652	(176)	-7%

YEAR TO DATE			
Actual	Budget	Variance	Stoplight
21,436	23,438	(2,002)	-9%

<b>Patient Days</b>			
---------------------	--	--	--

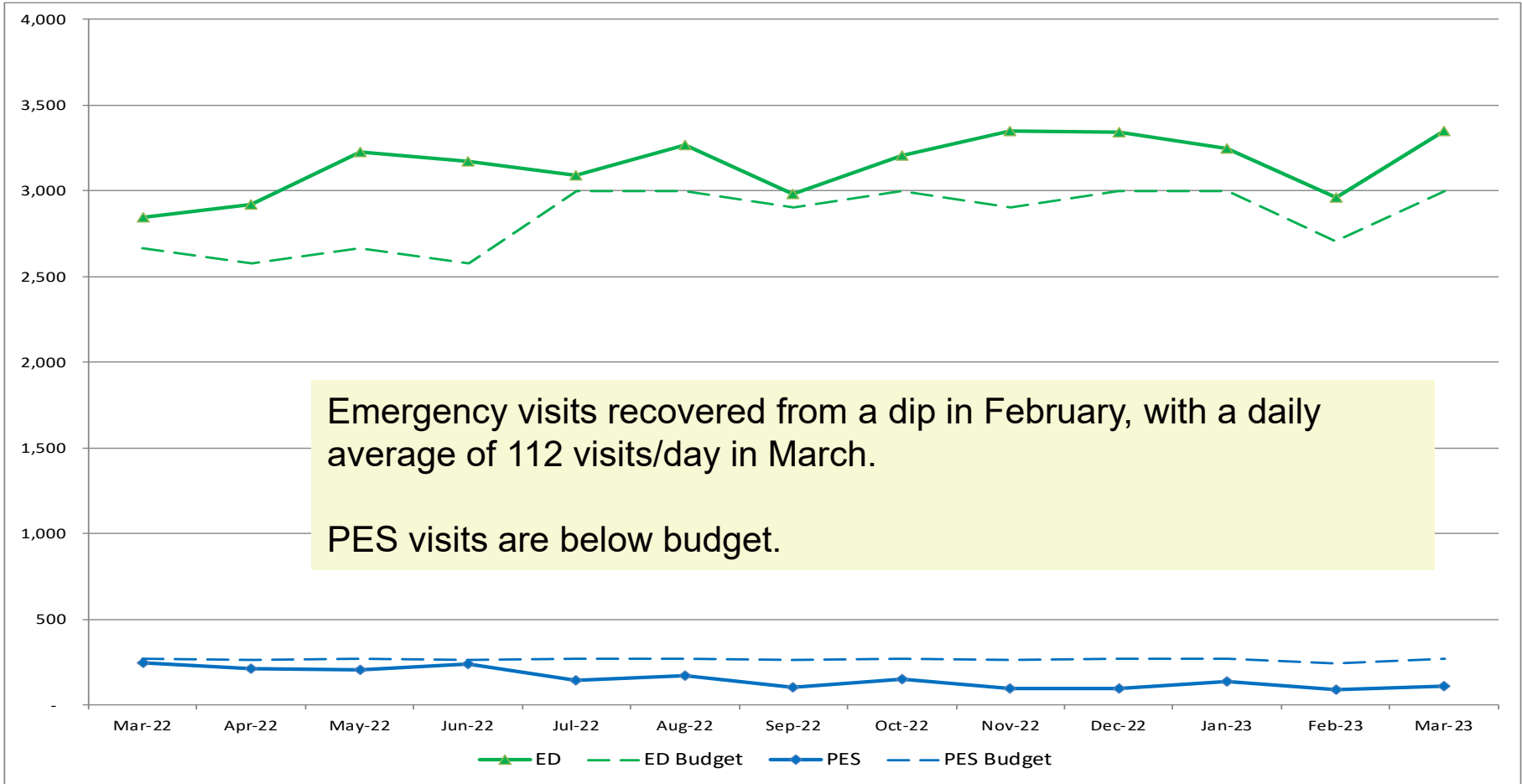


# San Mateo Medical Center Emergency Visits March 31, 2023

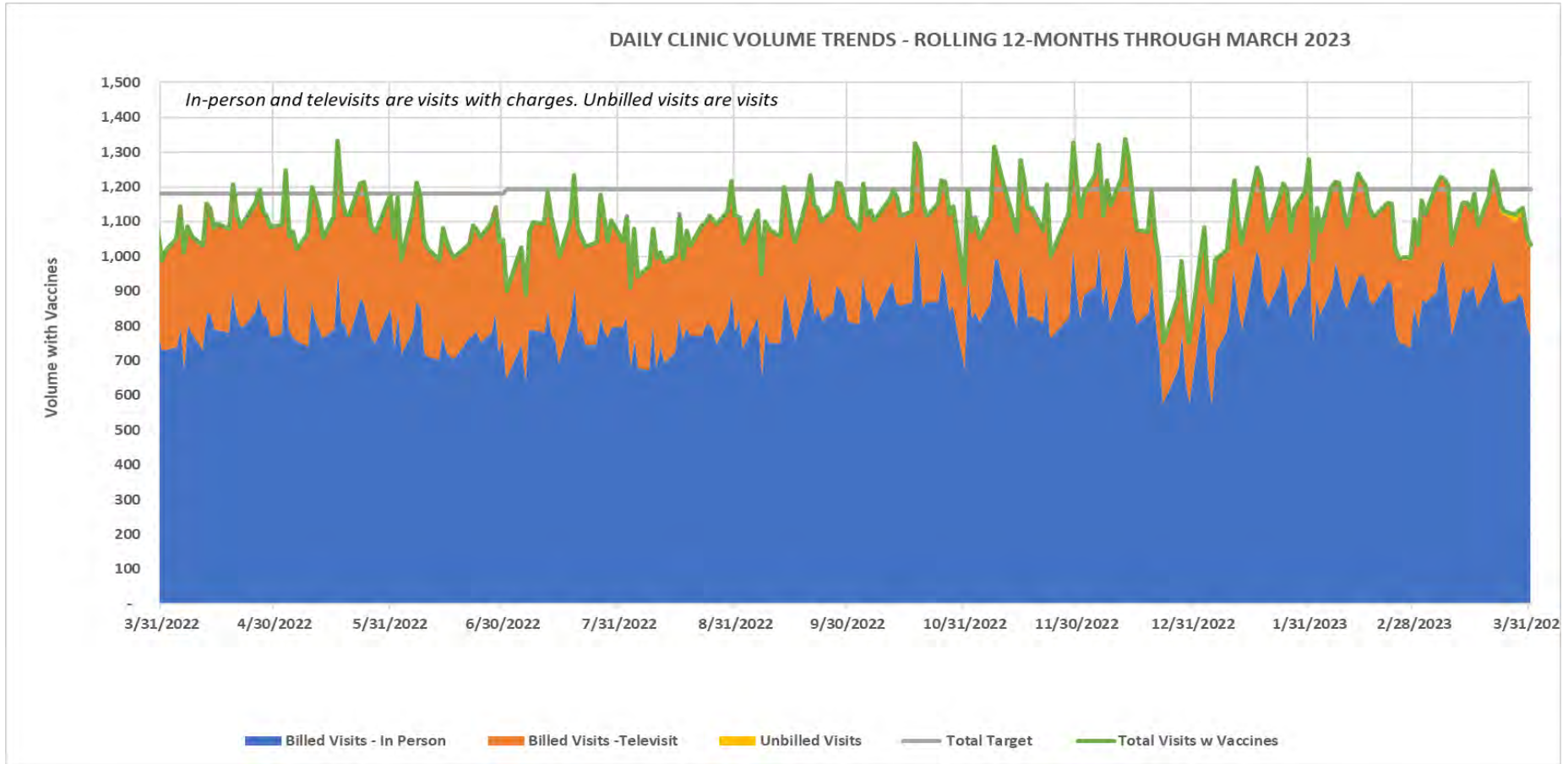
MONTH			
Actual	Budget	Variance	Stoplight
3,460	3,271	189	6%

YEAR TO DATE			
Actual	Budget	Variance	Stoplight
29,896	28,908	988	3%

**ED Visits**



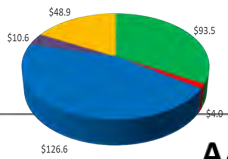
# San Mateo Medical Center Clinic Visits March 31, 2023



Televisits are running at 24.1% of total visits in FY23 as more patients are opting for in-person visits. Clinic televisits were 29% of total visits in FY22. Early in the pandemic the ratio was as high as 78%.

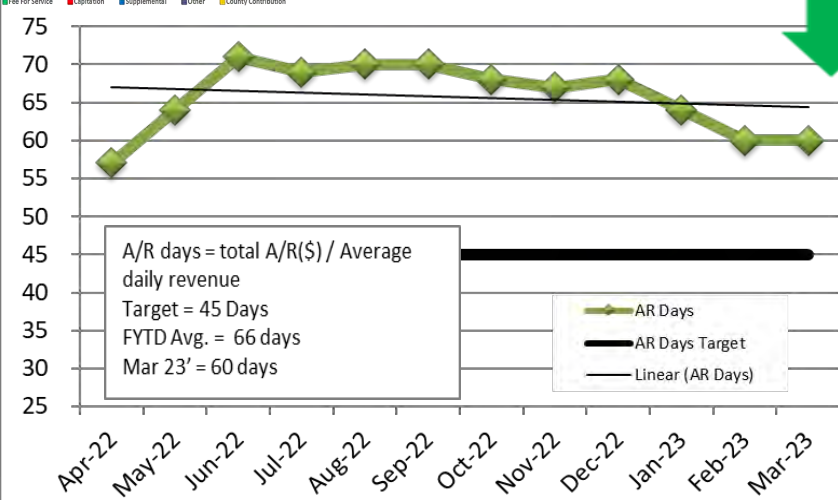
Sources of Revenue

(Dollars in millions)

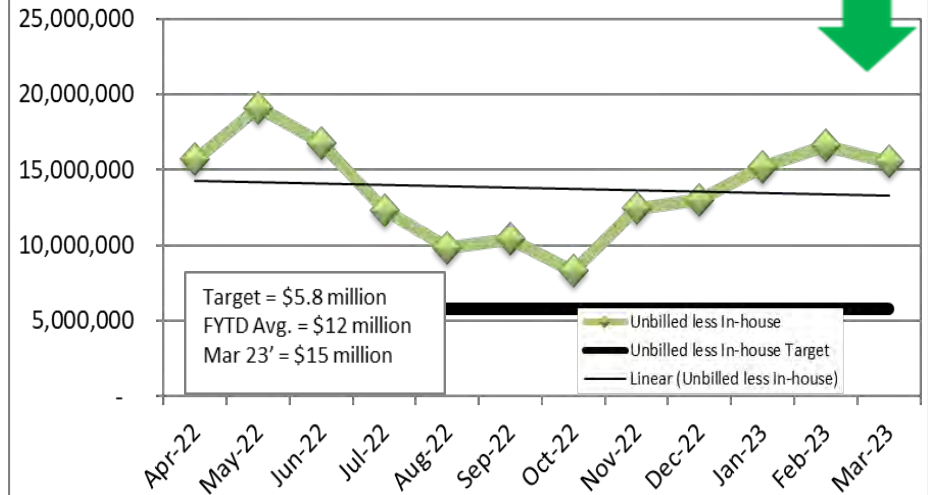


# Fee-For-Service Revenue - KPIs

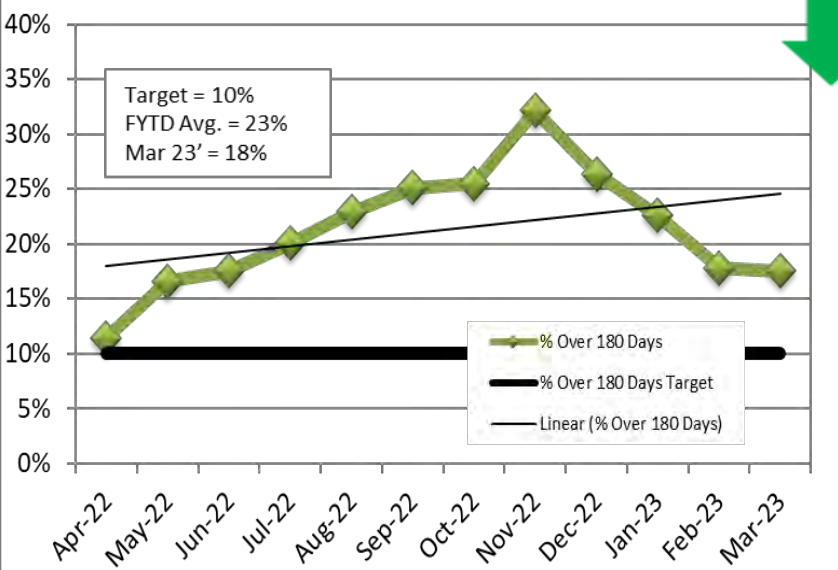
### A/R Days - Rolling 12 Months



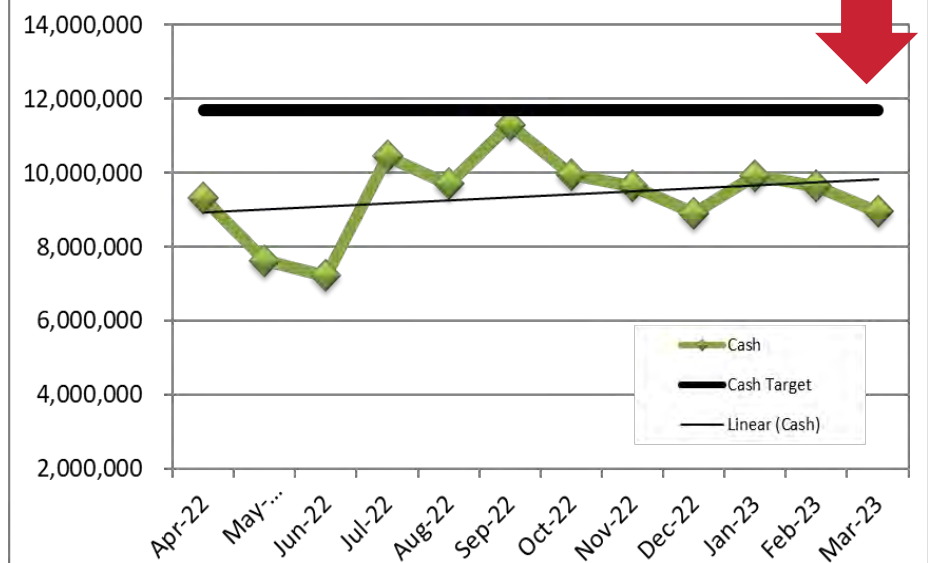
### A/R Unbilled - Rolling 12 Months



### % of A/R Over 180 Days - Rolling 12 Months



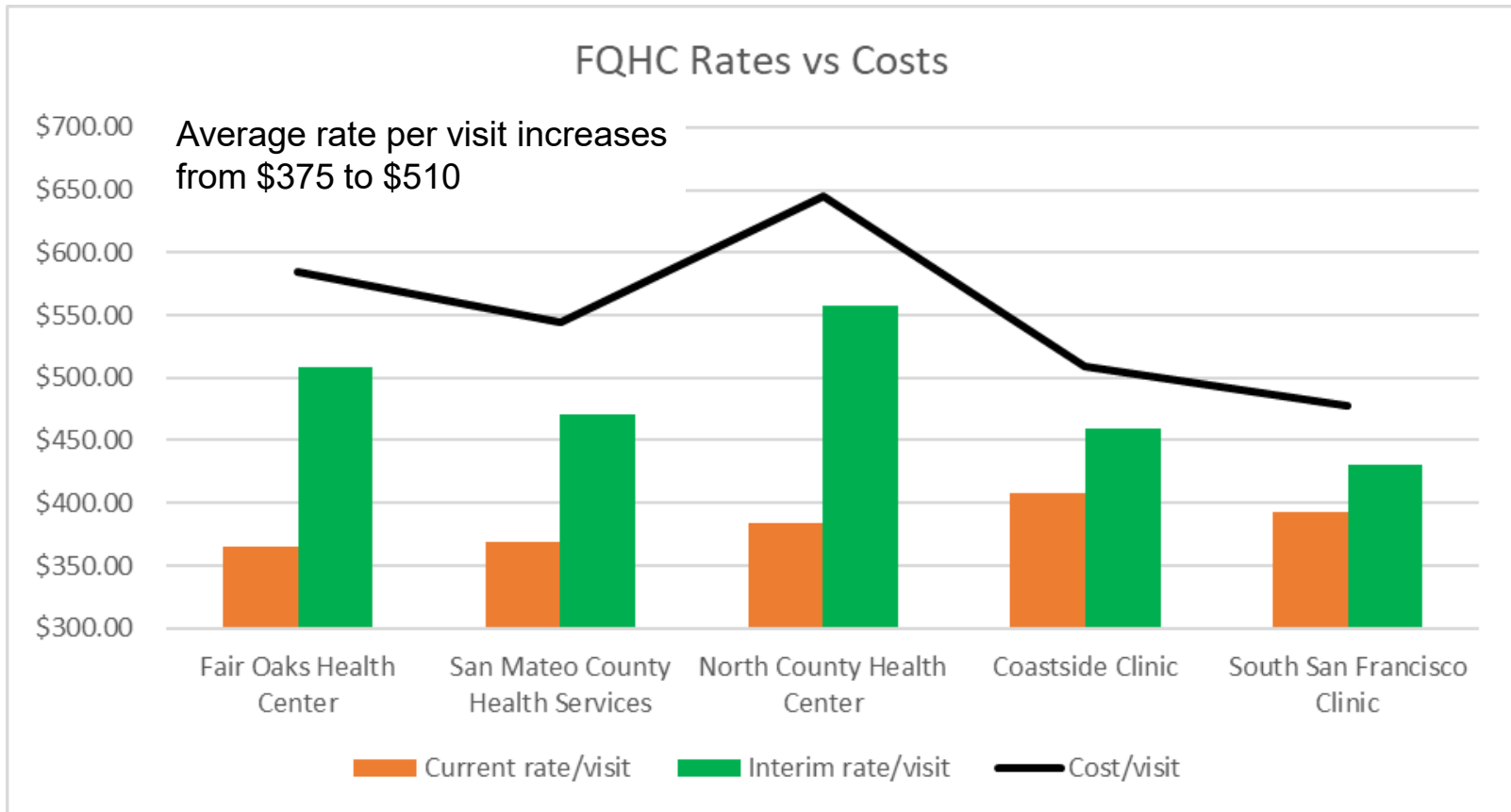
### Cash - Rolling 12 Months





# Fee-For-Service Revenue – FQHC Reimbursement

- Federally Qualified Health Centers (FQHCs) are reimbursed per patient visit, based on costs
- Annual rates are increased by a State-determined inflationary factor, but have not kept up with actual costs
- The State has a process for FQHCs to periodically request rate increase based on defined operational changes.
- SMMC initiated rate increase requests for 5 clinics in 2022 and new interim rates have been established for FY23-24
- New interim rates are still below costs, but the gap is being closed and is projected to bring an additional \$22M in FY23-24





SAN MATEO COUNTY HEALTH

**SAN MATEO  
MEDICAL CENTER**

---

QUESTIONS?

# APPENDIX



SAN MATEO COUNTY HEALTH  
**SAN MATEO**  
**MEDICAL CENTER**

**San Mateo Medical Center**  
**Income Statement**  
**March 31, 2023**

	MONTH				YEAR TO DATE				
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight	
	A	B	C	D	E	F	G	H	
1 <b>Income/Loss (GAAP)</b>	(63,676)	0	(63,676)		1,119,764	0	1,119,764		
2 <b>HPSM Medi-Cal Members Assigned to SMMC</b>	45,611	41,356	4,255	10%	392,828	372,204	20,624	6%	
3 <b>Unduplicated Patient Count</b>	66,955	65,230	1,725	3%	66,955	65,230	1,725	3%	
4 <b>Patient Days</b>	2,476	2,652	(176)	-7%	21,436	23,438	(2,002)	-9%	
5 <b>ED Visits</b>	3,460	3,271	189	6%	29,896	28,908	988	3%	
7 <b>Surgery Cases</b>	260	310	(50)	-16%	2,016	2,505	(489)	-20%	
8 <b>Clinic Visits</b>	26,375	27,468	(1,093)	-4%	210,275	222,134	(11,859)	-5%	
9 <b>Ancillary Procedures</b>	77,284	79,126	(1,842)	-2%	607,642	641,705	(34,063)	-5%	
10 <b>Acute Administrative Days as % of Patient Days</b>	14.0%	20.0%	6.0%	30%	22.0%	20.0%	-2.0%	-10%	
11 <b>Psych Administrative Days as % of Patient Days</b> (Days that do not qualify for inpatient status)	79.0%	80.0%	1.0%	1%	82.0%	80.0%	-2.0%	-2%	
<b>Pillar Goals</b>									
12 <b>Revenue PMPM</b>	133	135	(2)	-2%	116	135	(19)	-14%	
13 <b>Operating Expenses PMPM</b>	358	328	(30)	-9%	325	328	3	1%	
14 <b>Full Time Equivalents (FTE) including Registry</b>	1,150	1,199	49	4%	1,150	1,199	49	4%	

**San Mateo Medical Center**  
**Income Statement**  
**March 31, 2023**

	MONTH				YEAR TO DATE				
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight	
	A	B	C	D	E	F	G	H	
21	<b>Inpatient Gross Revenue</b>	13,581,291	14,144,151	(562,860)	-4%	119,532,236	127,297,359	(7,765,123)	-6%
22	<b>Outpatient Gross Revenue</b>	33,592,705	28,232,137	5,360,568	19%	255,359,548	254,089,234	1,270,314	0%
23	<b>Total Gross Revenue</b>	47,173,996	42,376,288	4,797,708	11%	374,891,784	381,386,593	(6,494,809)	-2%
24	<b>Patient Net Revenue</b>	10,737,771	13,211,764	(2,473,993)	-19%	93,510,470	118,905,877	(25,395,406)	-21%
25	Net Patient Revenue as % of Gross Revenue	22.8%	31.2%	-8.4%	-27%	24.9%	31.2%	-6.2%	-20%
26	<b>Capitation Revenue</b>	467,227	389,867	77,361	20%	4,048,135	3,508,799	539,337	15%
27	<b>Supplemental Patient Program Revenue</b>	16,208,523	12,040,224	4,168,299	35%	126,639,430	108,362,013	18,277,417	17%
	<i>Volume Based (GPP, EPP, VRR, AB915)</i>	11,496,250	5,371,667	6,124,583	114%	73,179,763	48,345,000	24,834,763	51%
	<i>Value Based (QIP, HPSM P4P)</i>	2,226,385	3,820,025	(1,593,640)	-42%	29,792,892	34,380,228	(4,587,336)	-13%
	<i>Other</i>	2,485,887	2,848,532	(362,644)	-13%	23,666,775	25,636,785	(1,970,010)	-8%
28	<b>Total Patient Net and Program Revenue</b>	27,413,521	25,641,854	1,771,666	7%	224,198,035	230,776,688	(6,578,653)	-3%
29	<b>Other Operating Revenue</b>	1,520,453	1,181,890	338,563	29%	10,589,516	10,637,012	(47,496)	0%
30	<b>Total Operating Revenue</b>	28,933,974	26,823,744	2,110,230	8%	234,787,551	241,413,700	(6,626,149)	-3%

**San Mateo Medical Center**  
**Income Statement**  
**March 31, 2023**

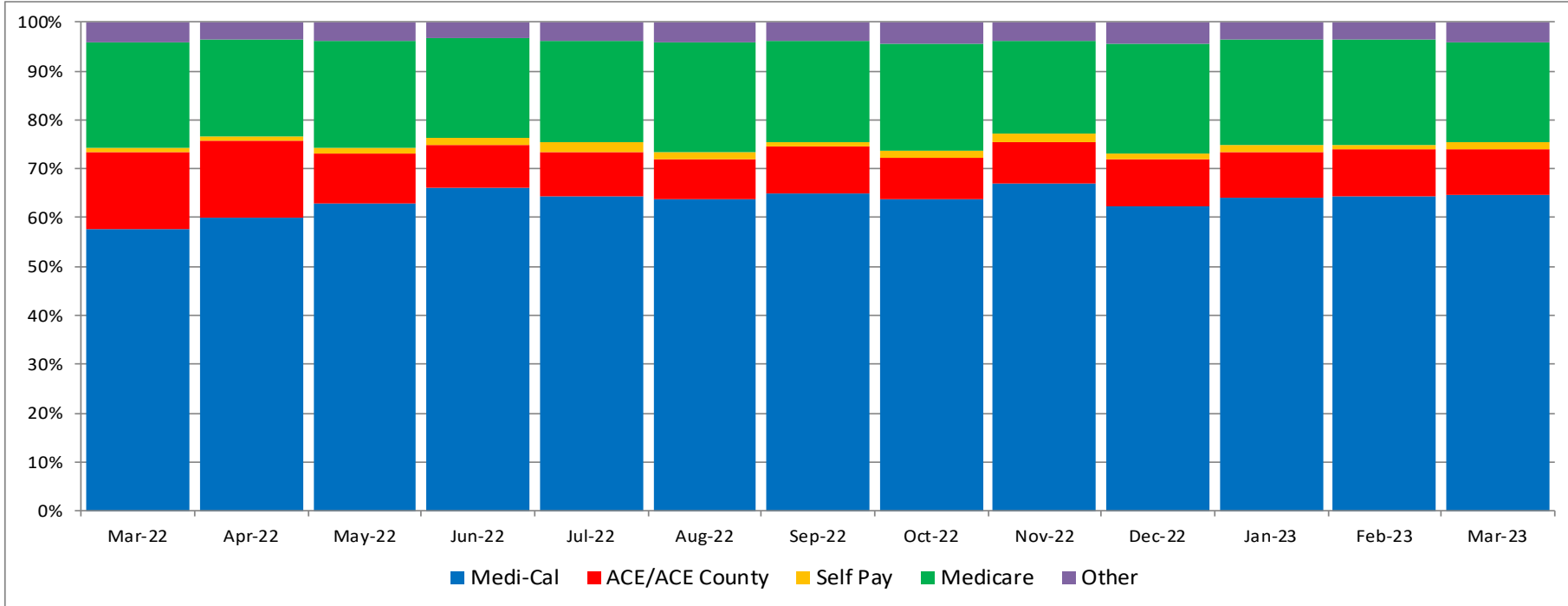
	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
	A	B	C	D	E	F	G	H
<b>Operating Expenses</b>								
31 Salaries & Benefits	19,115,926	19,477,553	361,628	2%	159,598,965	175,297,981	15,699,015	9%
32 Drugs	1,956,667	1,286,937	(669,729)	-52%	11,529,220	11,582,436	53,216	0%
33 Supplies	1,114,722	952,050	(162,672)	-17%	10,019,042	8,568,449	(1,450,593)	-17%
34 Contract Provider Services	5,014,339	3,562,085	(1,452,253)	-41%	43,370,540	32,058,767	(11,311,773)	-35%
<i>Registry</i>	1,024,556	540,547	(484,009)	-90%	15,220,081	4,864,920	(10,355,161)	-213%
<i>Contract Provider</i>	3,063,971	2,357,106	(706,865)	-30%	23,797,381	21,213,954	(2,583,427)	-12%
<i>ACE Out of Network</i>	879,858	564,839	(315,018)	-56%	3,989,531	5,083,552	1,094,021	22%
<i>Other</i>	15,954	99,593	83,639	84%	393,547	896,341	502,794	56%
35 Other fees and purchased services	6,049,230	5,211,812	(837,418)	-16%	47,514,020	46,906,310	(607,709)	-1%
36 Other general expenses	757,288	729,995	(27,293)	-4%	6,772,885	6,569,957	(202,927)	-3%
37 Rental Expense	166,121	247,893	81,772	33%	1,510,809	2,231,039	720,230	32%
38 Lease Expense	735,826	735,826	0	0%	6,622,437	6,622,437	0	0%
39 Depreciation	290,333	227,938	(62,395)	-27%	2,564,205	2,051,446	(512,760)	-25%
40 <b>Total Operating Expenses</b>	35,200,451	32,432,091	(2,768,360)	-9%	289,502,123	291,888,823	2,386,699	1%
41 <b>Operating Income/Loss</b>	(6,266,477)	(5,608,347)	(658,130)	-12%	(54,714,572)	(50,475,122)	(4,239,450)	-8%
42 <b>Non-Operating Revenue/Expense</b>	773,372	178,918	594,454	332%	6,969,472	1,610,258	5,359,214	333%
43 <b>Contribution from County General Fund</b>	5,429,429	5,429,429	(0)	0%	48,864,864	48,864,864	(0)	0%
44 <b>Total Income/Loss (GAAP)</b>	(63,676)	0	(63,676)		1,119,764	0	1,119,764	
(Change in Net Assets)								

**San Mateo Medical Center  
Payer Mix  
March 31, 2023**

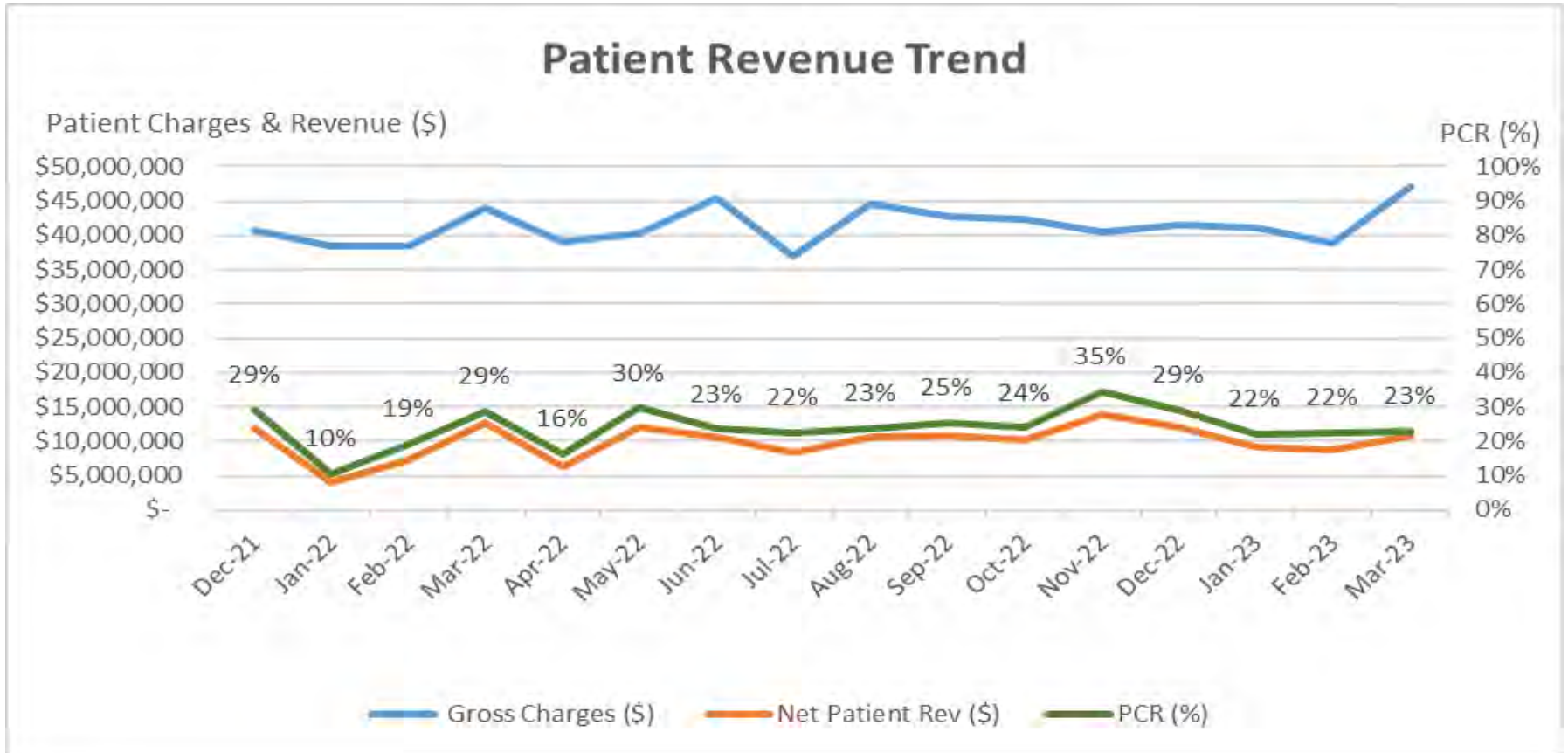
	MONTH			
	Actual	Budget	Variance	Stoplight
	A	B	C	D
Medicare	20.6%	22.7%	-2.1%	
Medi-Cal	64.8%	58.9%	5.9%	
Self Pay	1.2%	1.6%	-0.3%	
Other	4.1%	4.3%	-0.3%	
ACE/ACE County	9.3%	12.5%	-3.2%	
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>		

	YEAR TO DATE			
	Actual	Budget	Variance	Stoplight
	E	F	G	H
Medicare	21.2%	22.7%	-1.5%	
Medi-Cal	64.3%	58.9%	5.5%	
Self Pay	1.3%	1.6%	-0.2%	
Other	4.0%	4.3%	-0.3%	
ACE/ACE County	9.1%	12.5%	-3.4%	
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>		

**Payer Type by Gross Revenue**



# Fee-For-Service Patient Revenue Trend

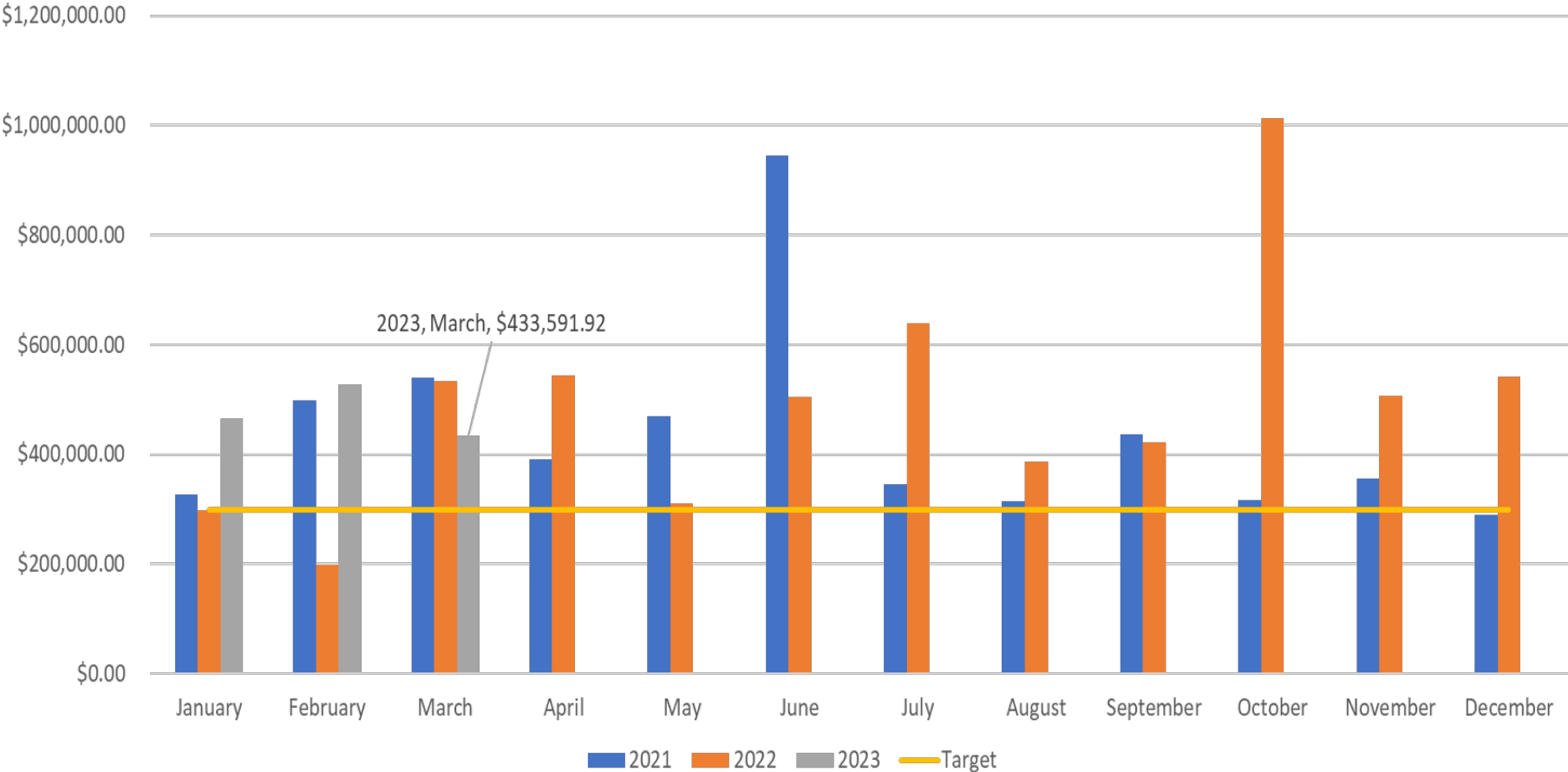


Budgeted PCR 27.5% (FY21), 33.9% (FY22), 31.2% (FY23)

Gross patient revenue ticked up slightly in March. The collection rate (PCR) in FY23 is trending at average 25%. PCR surge in Nov 22 and dips earlier this year was due to one-time adjustments. PCR is expected to remain in mid 20s for the rest of this fiscal year.



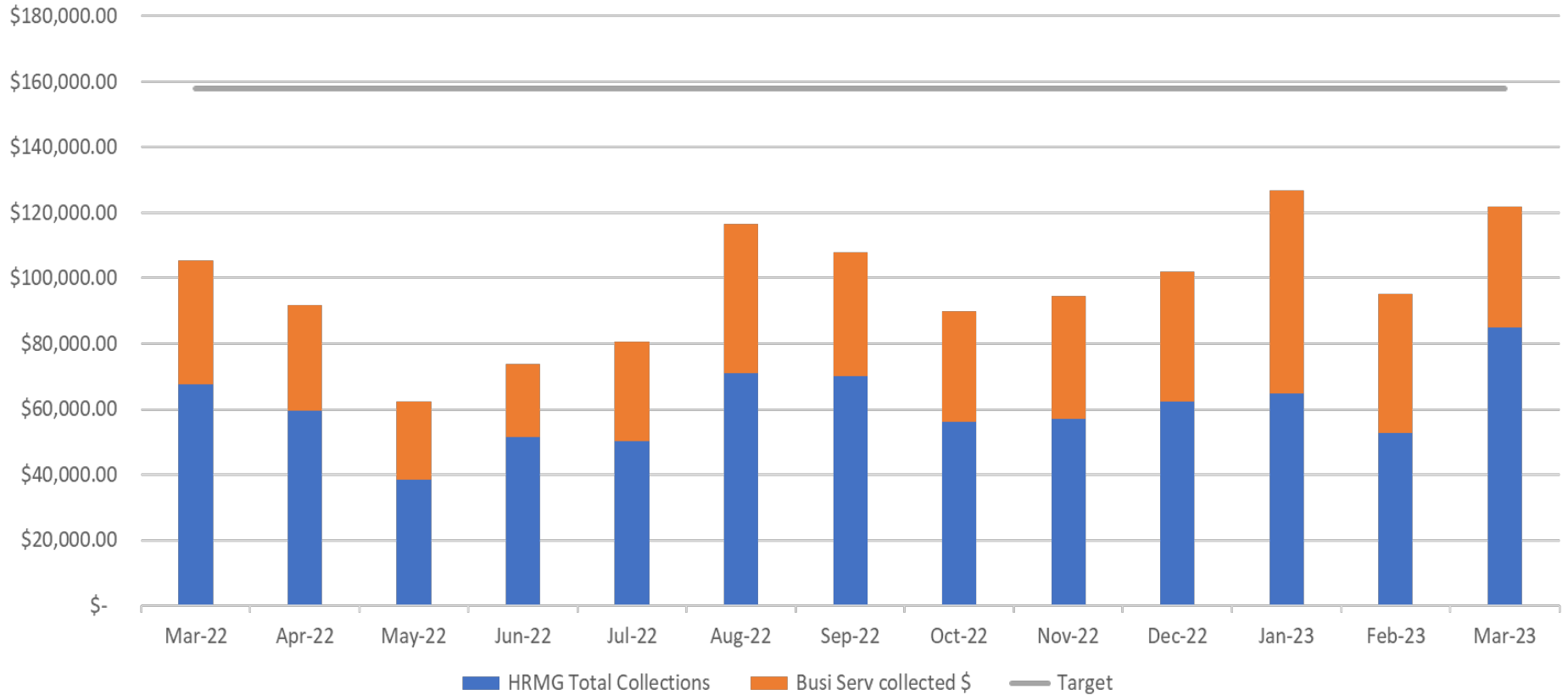
# Fee-For-Service Commercial Collections



July 2020 MMX began supporting PFS with Commercial Collections



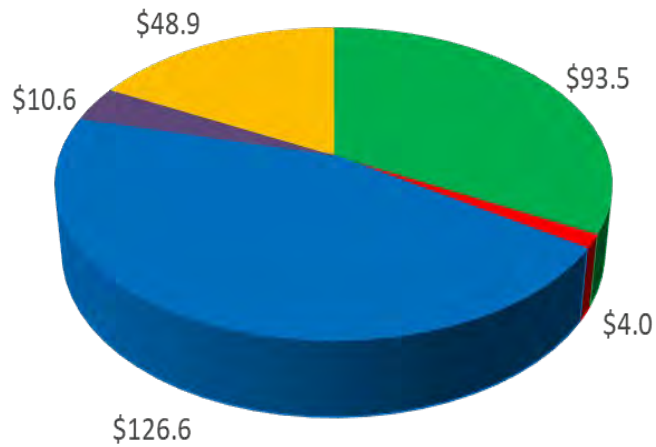
# Fee-For-Service Self Pay Collections



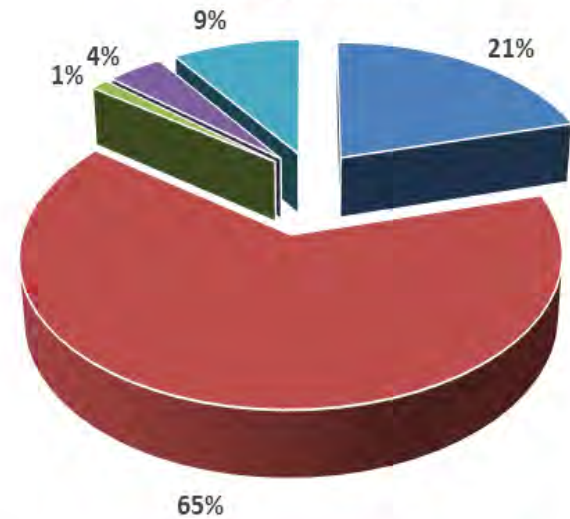
SMMC contracted with Healthcare Revenue Management Group to support SMMC's Business Services unit with collections of self-pay balances

# Revenue Mix

**Sources of Revenue**  
(Dollars in millions)



**Payor Mix**



■ Fee For Service  
 ■ Capitation  
 ■ Supplemental  
 ■ Other  
 ■ County Contribution  
 ■ Medicare  
 ■ Medi-Cal  
 ■ Self Pay  
 ■ Other  
 ■ ACE

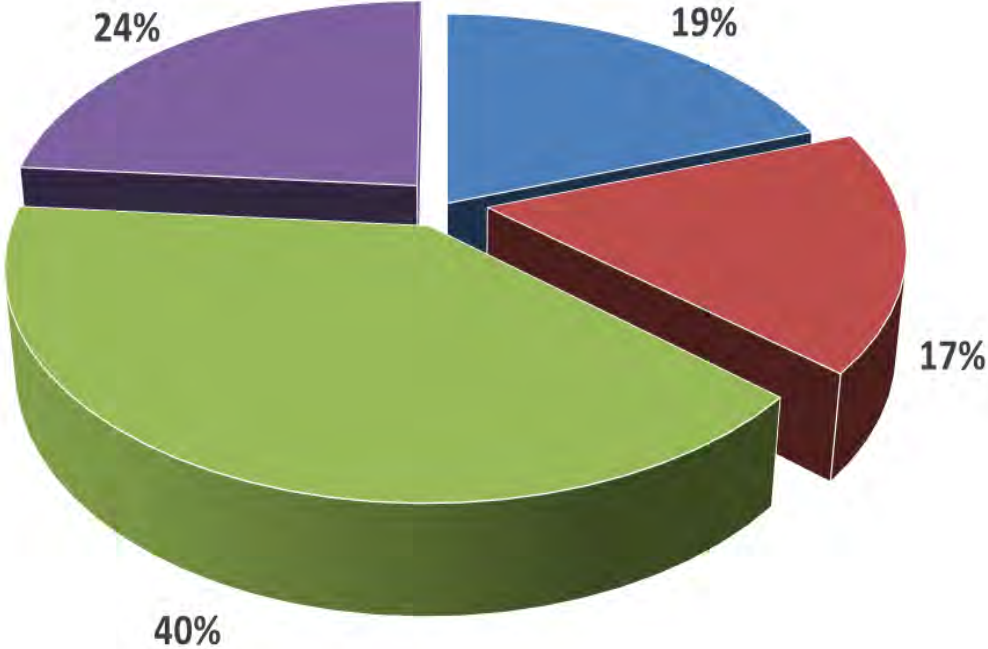
**Total YTD Revenue** of \$284 million consists of 45% in Supplemental Programs and 33% in Fee For Service

**Health Plan of San Mateo (HPSM)** represents 37% of our Operating Revenue

- Medi-Cal Managed Care and Medicare Managed Care FFS
- Medi-Cal PCP Capitation

**Capitation** is a pre-payment reimbursement model that pays providers a set amount for each enrolled person assigned to them, per period of time, whether or not that person seeks care.

# Revenue Mix by Service Line



■ Inpatient

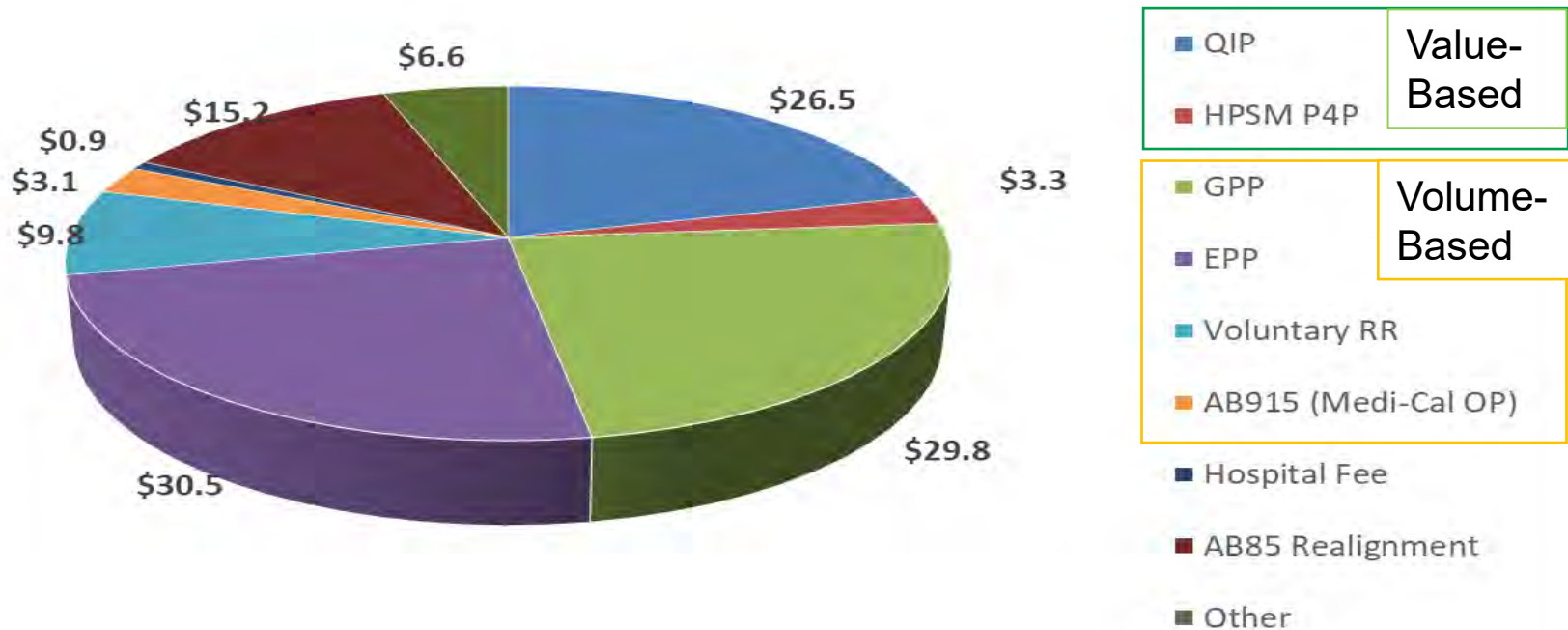
■ Hospital ED & Outpatient

■ Ambulatory Clinics

■ Ancillary Services

# Supplemental Revenue Mix

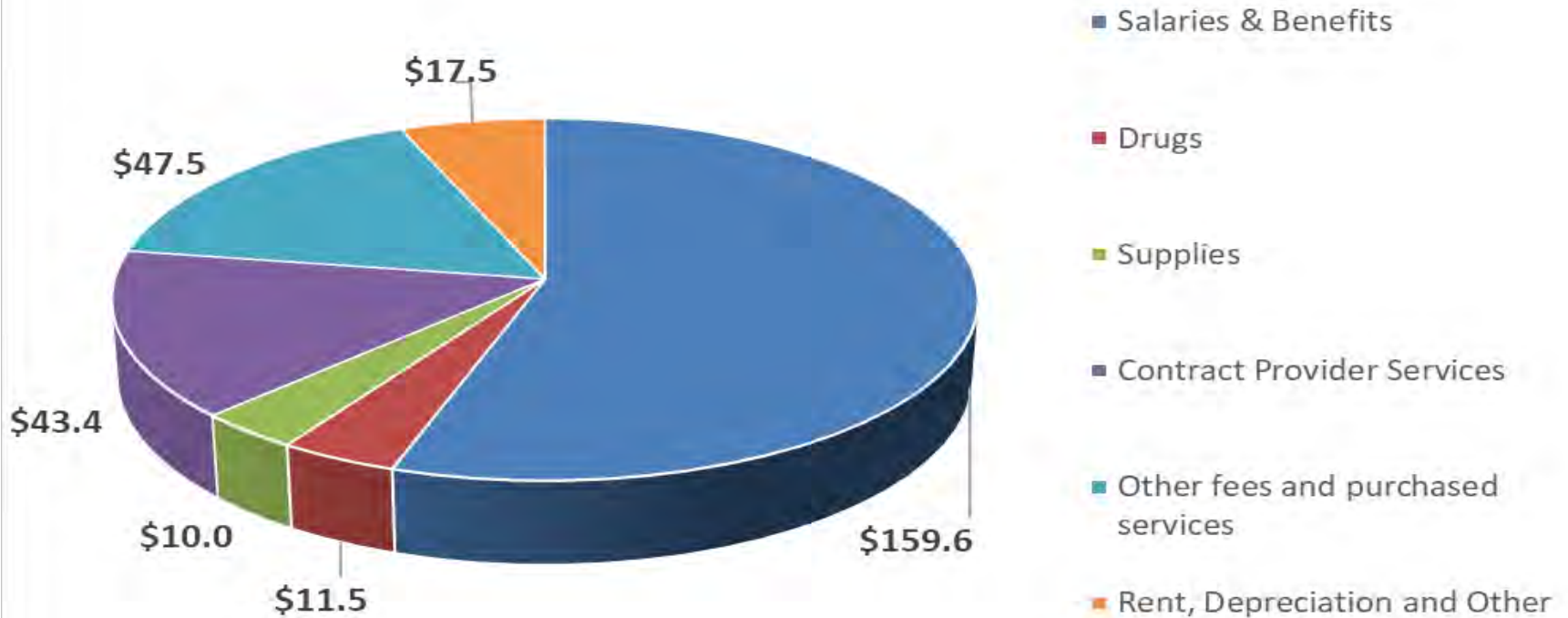
(Dollars in millions)



- **Value-Based** programs, including Capitation revenue, represents 24% of total revenue
- **Volume-Based** supplemental programs, plus FFS revenue, represent 58% of total revenue

# Total Operating Expenses

(Dollars in millions)



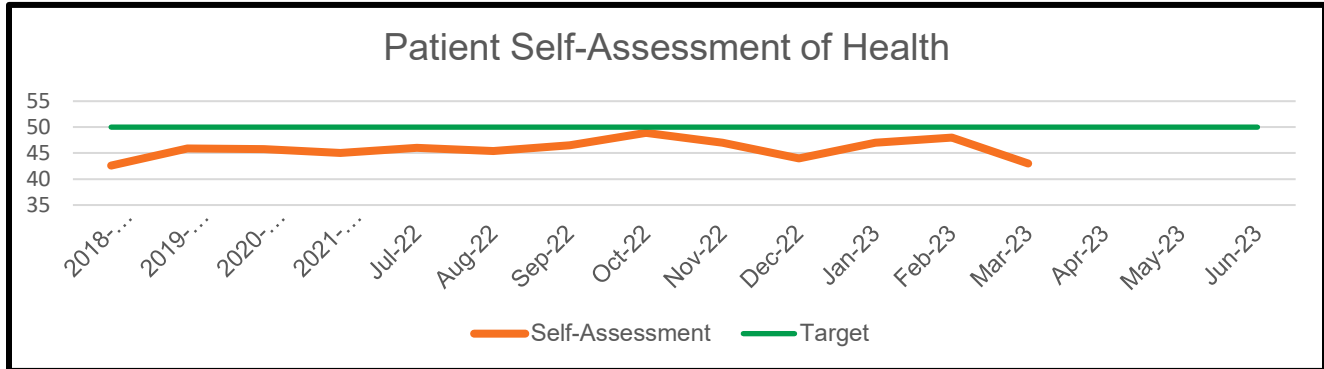
**Salaries & Benefits** represent 55% of total expenses

**Personnel costs\*** represent 70% of total expenses

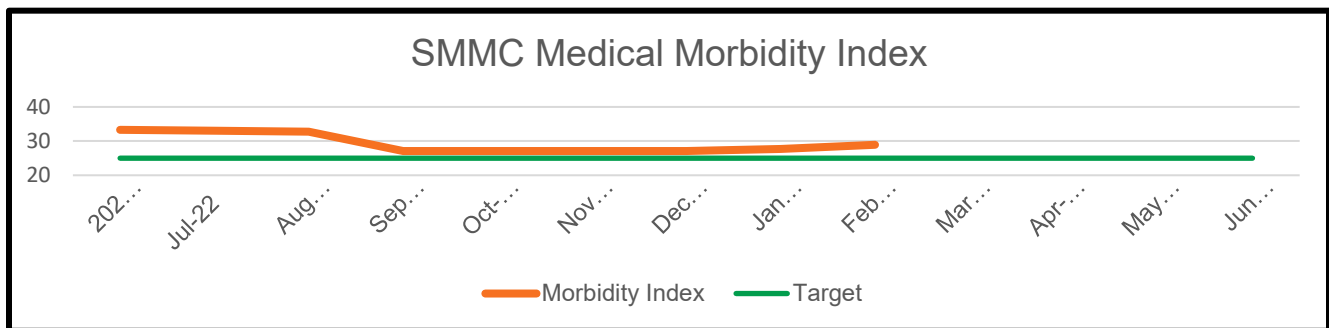
\* Personnel costs includes S&B plus Registry/Contract Providers



### Excellent Care



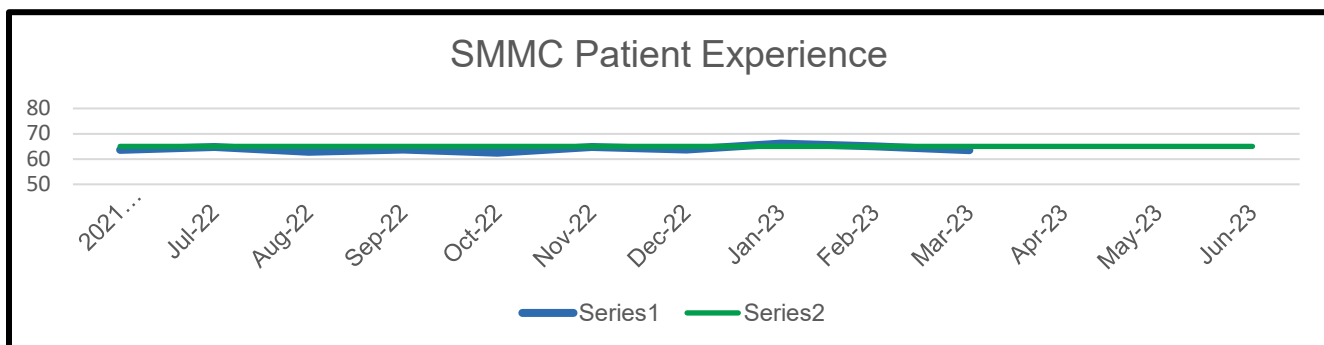
**Patient Self-Assessment of Health:** All Primary Care patients receive an experience survey. One question asks them to rate their health from poor to excellent. This is the percentage that rate their health as very good or excellent. **Higher is better.**



**Medical Morbidity Index:** This represents the percentage of SMMC patients who meet one or more of the following criteria: Inadequately Controlled Diabetes, Inadequately Controlled Hypertension, Obesity, or a Positive Depression Screen. **Lower is better.**

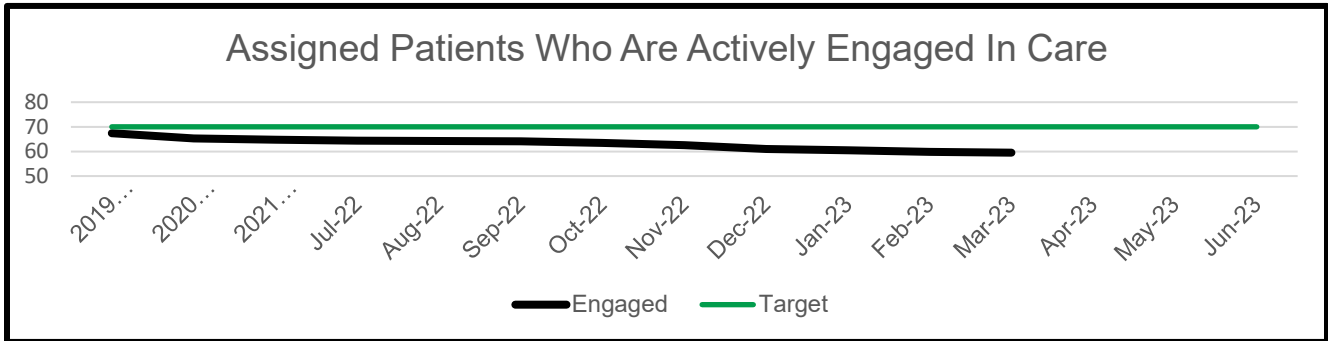


### Patient Experience



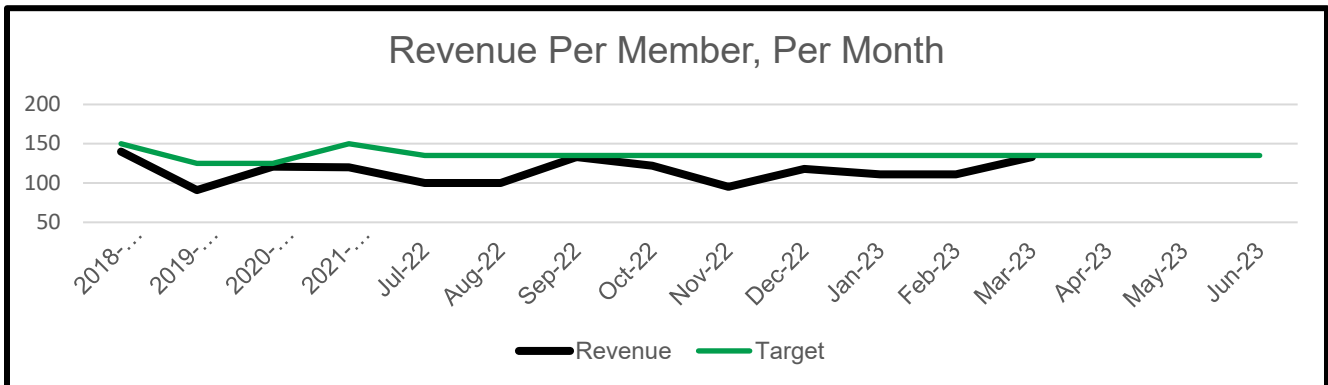
**Patient Experience:** Percentage of patients who answered affirmatively to the patient experience survey question: “Did the staff work together to meet your needs?” **Higher is better.**

 Access to Care

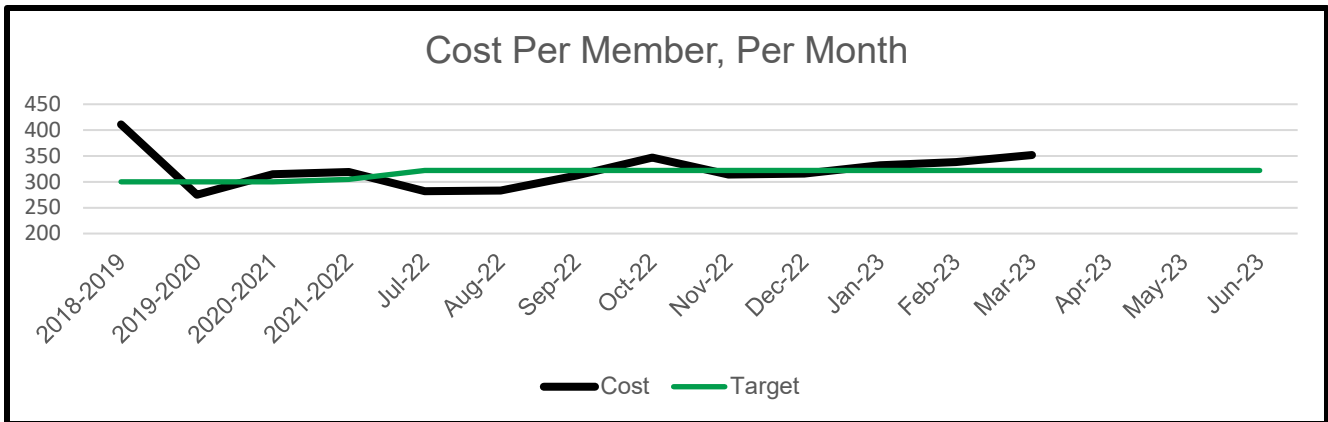


**Assigned and Engaged:** Percentage of patients assigned to SMMC by the Health Plan of San Mateo who are actively engaged in Care. **Higher is better.**

 Financial Stewardship



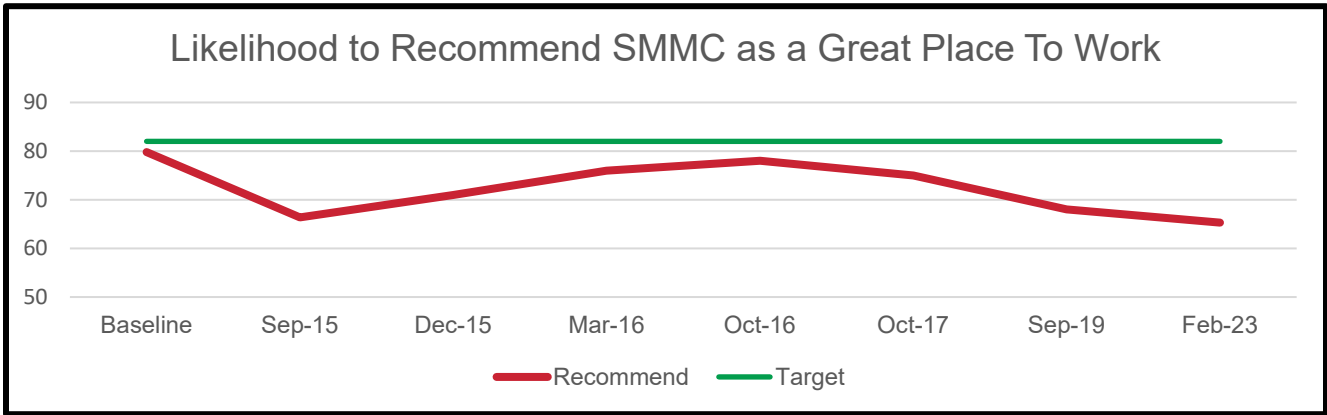
**Revenue Per Member, Per Month:** Total patient revenue divided by total number of assigned members. **Higher is better.**



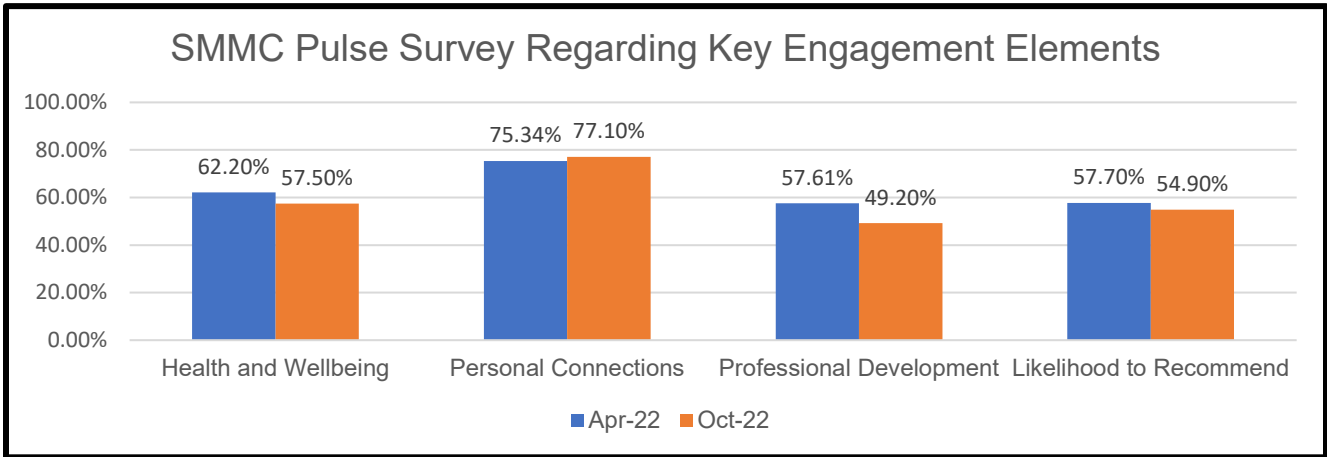
**Cost Per Member, Per Month:** Total cost divided by total number of assigned members. **Lower is better.**



 Staff Engagement



**Likelihood to Recommend SMMC:** Percentage of staff who agree or strongly agree that they would recommend SMMC as a great place to work. Measured using the annual Blessing White staff engagement survey. -*Awaiting next County survey.* **Higher is better.**



**SMMC Staff Engagement Pulse Survey:** Percentage of staff who agree or strongly agree that 1) organization actively supports health and wellness 2) staff member has personal connections at work 3) organization supports professional development 4) staff member would recommend SMMC as a great place to work. **Higher is better.**

# Strategic Updates, Recognitions & Awards



*Pictured above, left: Participants in SMMC's Breastfeeding Education Efforts, right: Recognitions recently awarded to SMMC by the Department of Health Care Services for performance in the Medi-Cal Quality Incentive Pool.*

## Supporting New Parents in Breastfeeding

Supporting parents in feeding their infants human milk is one of our priorities. We provide prenatal education and support for those experiencing breastfeeding challenges, and a welcoming space to feed newborns while they are in our clinics in our new Lactation Lounge.

In February 2022, we started offering classes, in both English and Spanish, called "Preparing for Breastfeeding" and "Preparing for Birth and Postpartum." We set up the Lactation Lounge for our patients on the 3rd floor near the pediatric and OB/GYN clinics. The lounge includes comfortable chairs, a baby scale, and a diaper changing station. We also offer weekly drop-in Postpartum Groups designed to provide the education, community, and support new parents need.

In addition to the comfortable and welcoming Lactation Lounge, we have a lactation consultant and purchased new evidence-based prenatal books from INJOY and teaching supplies, including an infant doll used for demonstrating a good latch. People attending the breastfeeding class also receive a welcome gift of "mother's milk tea" and a special nursing bra.

Those who experience breastfeeding challenges have access to supplies during their lactation visit, including reusable breast pads, manual breast pumps, milk storage bags, and pillows to make feeding comfortable and sustainable.

The Lactation Lounge is the result of a lot of hard work and collaboration between OB/GYN and San Mateo County Health Foundation who secured grant funding from the Joseph and Vera Long Foundation to cover the cost of lactation equipment and lactation/breastfeeding consultation.

A special thank you to Julie Birdsong, Patrick Grisham, Chris Montenegro, Kristin Gurley, Sage Bearman, and Katrina Pinkerton for leading the work.

## SMMC Recognized for Performance and Quality

San Mateo Medical Center recently received two awards from the Department of Health Care Services (DHCS) in recognition of our top performance in California's Quality Incentive Pool (QIP), which is a pay-for-performance program. We were recognized in two areas: Performance Resilience and Quality Synergy.

### **Performance Resilience Award**

The Performance Resilience Award recognizes the top three organizations that performed above the 50th percentile benchmark on up to 20 performance measures:

- Screening for depression and follow-up plan
- Depression remission and response for adults
- Comprehensive diabetes care
- Controlling high blood pressure
- Postpartum care
- Timeliness of prenatal care
- Chlamydia screening for women
- Asthma medication ratio
- Immunizations for adolescents
- Childhood immunization status
- Child and adolescent well care visits
- Developmental screening in the first three years of life
- Well child visits (first 30 months of life)
- Lead screening in children
- Weight assessment and counseling for nutrition and physical activity for children and adolescents
- Breast cancer screening
- Cervical cancer screening
- Concurrent use of opioids and benzodiazepines

### **Quality Synergy Award**

The Quality Synergy Award recognizes top performers on the nine goals focusing on children's preventive care, maternity care and birth equity, and behavioral health integration:

- Screening for depression and follow-up plan
- Child and adolescent well care visits
- Chlamydia screening in Women
- Developmental screening in the first three years of life
- Immunizations for adolescents
- Well child visits (first 30 months of life)
- Childhood immunization status
- Postpartum care
- Timeliness of prenatal care

These recognitions are a testament to the incredible dedication to the quality of care our ambulatory teams provide every patient. Thank you to all of those staff members and also to Kristin Gurley, Director of Performance Strategies along with our Population Analytics and Business Intelligence teams for all of their efforts to support the teams through tracking and reporting of the metrics.

### **Virtual Lockdown Tabletop Exercise**

On March 21, 2023, the SMMC Workplace Violence Task Force sponsored a Lockdown Tabletop Exercise for our Hospital Command Center (HCC) members. The 90-minute exercise used a realistic scenario to test the latest draft of the Hospital Lockdown Policy. HCC members gained familiarity with the Virtual Command Center during the exercise and worked through role-specific worksheets, which helped them dive deeper into the steps they would take in the first two hours of a hospital lockdown. Successes and learnings were gleaned, and the team looks forward to strengthening the policy and taking other action items forward!

Special thanks to Task Force members and ED providers Dr. Audrey Sanford and Crystal Miran, PA, who joined Ava Carter, Safety Officer, in facilitating the exercise.

### **New WOC Clinical Services Manager**

Rachael Rivers, RN, BSN, has been selected for the Work Out of Class (WOC) position as the Clinical Services Manager 1 with oversight of the Intensive Care Unit, Medical-Surgical Unit, and the Infusion Center. She has been the WOC ICU Charge Nurse for the last year and has done incredible work, which highlights her leadership and engagement skills in the ICU and other areas of the organization.

Rachael has more than 19 years of nursing experience in adult critical care in level 1 hospitals focused on Neuro and Surgical trauma. She began her journey at SMMC as a traveler for a year and accepted a staff position in 2017. She has extensive experience as a charge/relief charge nurse, preceptor, and mentor. Congratulations Rachael!

### **Breakthrough Strategic Initiative Efforts Move into Next Phase**

Over the last several months, SMMC's three strategic workgroups (Who, What and How) have been working on improving SMMC's Improvement System. These three groups have significantly advanced the organization's efforts. Accomplishments include the establishment of SMMC's first improvement council focused on Meeting Emergency Needs, redesign and improvement of several improvement tools, and a prioritization rubric aimed at guiding the organization toward doing the right improvement at the right time. Thanks to these efforts, we are ready to move forward to the next phase of the effort.

The prior three workgroups will now transition to two:

- "Spreading Workflows" which will focus on continuing to improve our improvement tools while focusing on specific challenges like standardizing workflows that occur in multiple areas
- "Council Creators" will be focused on advancing the full improvement council (those who guide and support improvement) and design team (those who do the actual improvement-comprised of those who do the work) structure. The goal is to have a working structure in place by June 30<sup>th</sup> so that it can be tested against the needs of our Epic implementation, our biggest improvement effort yet.

In the latest County-wide Employee Engagement Survey, 17.3% of SMMC staff identified process improvements as the top need at the Medical Center. I will look forward to continuing to update the board on our progress in this area as we continue this important work to meet that need.

### **Continued Preparation for Epic Implementation**

In the recent County-wide Employee Engagement Survey, 26.7% of SMMC staff identified "better tools and technology" as the top need in the organization. Our upcoming implementation of the Epic electronic health records is a major step toward addressing that need. As mentioned above, our work to improve our Improvement System is part of the preparation for the Epic implementation and we expect to use our Improvement System structure as part of our governance for Epic (one of our key deliverables during our this "pre-work" period). Other deliverables during this period include the recruitment, hiring and onboarding of staff necessary to support Epic. We are excited that our partners in Health Information Technology (HIT) have made progress toward their goal of having at least 80% of that staff in place in time for Epic training at the end of the summer. Finally, we continue to make progress on identifying and solidifying all our 3<sup>rd</sup> party contracting needs (supplementary software that will be needed during and potentially after the Epic implementation). I look forward to continuing to update the board as our efforts progress.

###



**April 2023**

# SNAPSHOT: San Mateo County Health

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

INDICATOR	NUMBER	CHANGE FROM PREVIOUS MONTH	CHANGE FROM PREVIOUS YEAR
ACE Enrollees	22,875 (March)	0.9%	-16.6%
SMMC Emergency Department Visits	3,460 (March)	13.6%	12.1%
New Clients Awaiting Primary Care Appt.	Data Not Available	NA	NA

## County Awarded \$4 Million to Prevent Residential Care Closures

The Community Care Expansion Program, part of California’s historical investment of \$4.5 billion in behavioral health infrastructure, awarded San Mateo County \$4 million to improve residential care facilities. This includes \$1.75 million to avoid closure of critical facilities with potential or projected operating deficits and \$2.3 million for repairs and upgrades that prevent closure and avoid exit of vulnerable residents to homelessness. These facilities are critical for housing Behavioral Health and Recovery Service (BHRS) clients. In the last four years, six facilities have closed in the county, which resulted in 41 fewer beds available for BHRS clients and 26 beds for older adults. These funds will stabilize bed availability, keep clients in the local community, and expand housing opportunities for older adults with behavioral health issues.

The funds will be held by the County’s Department of Housing, with a contract to be awarded to a third-party administrator to run the program. A list of qualified contractors will be established to complete selected projects, and construction will be managed centrally to assure compliance with funding requirements. The grant application process will be announced soon and is open to all adult residential facilities and residential care for the elderly facilities that accept Medi-Cal/SSI beneficiaries.

## 2023 Edward Byrne Memorial Justice Assistant Grant Award

The County was awarded the 2023 Edward Byrne Memorial Justice Assistance Grant by the Board of State and Community Corrections. The funding supports law enforcement, crime prevention and education, mental health programs, crisis intervention teams, and other public safety initiatives.

The County will expand its Community Wellness and Crisis Response Team initiative to improve public safety and mental health by expanding collaboration and coordination among local law enforcement and mental health services agencies. First launched in 2021 as a pilot in Daly City, South San Francisco, San Mateo, and Redwood City, the program establishes the presence of a full-time mental health clinician within city police agencies, to be dispatched on 911 calls with a known or suspected mental health component. The expanded project is a collaboration among police departments in East Palo Alto, Menlo Park and San Bruno, with clinical support from Behavioral Health and Recovery Services and local nonprofit StarVista.