



San Mateo Medical Center

A County System of Healthcare

BOARD OF DIRECTORS MEETING

Thursday, October 5, 2017

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

October 5, 2017 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. September 7, 2017 Meeting Minutes

G. MEDICAL STAFF REPORT

Chief of Staff Update

Dr. Bryan Gescuk

H. ADMINISTRATION REPORTS

- 1. Pain Management Committee
- 2. Pain Clinic
- 3. Opioid Dependency and Deaths in San Mateo County
- 4. Financial Report
- 5. CEO Report

Dr. Alpa Sanghavi Verbal
John Thomas Verbal
Louise Rogers Verbal
David McGrew..... **TAB 2**
Dr. CJ Kunnappilly..... **TAB 2**

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, September 7, 2017
Executive Board Room

Board Members Present

Supervisor David Canepa
John Maltbie
Louise Rogers
Dr. CJ Kunnappilly
Dr. Bryan Gescuk
Dr. Janet Chaikind
Dr. Julie Hersk
Deborah Torres

Staff Present

Michelle Lee
David McGrew
Dr. Susan Fernyak
Peggy Jensen
John Thomas
Joan Spicer
Brighton Ncube
Ava Carter

Priscilla Romero
Gabriela Behn
Gary Horne
Karen Pugh
Aimee Armsby
Dr. Alpa Sanghavi
Dr. Ann Marie Silvestri

Leslie Williams-Hurt
Cecilia Diaz
Peter Shih
Paul Hundal
Larry Funk
Debra Hazan
Kevin Hinrichs

Members of the Public

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 8:13 AM to Open Session. A quorum was present (see above).	
Report out of Closed Session	Medical Staff Credentialing Report for September 7, 2017. QIC Minutes from July 25, 2017. Medical Executive Committee Minutes from August 8, 2017.	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 Leslie Williams-Hurt	The 14 th Annual Golf Tournament at Sharon Heights Golf and Country Club was attended by 130 golfers. Proceeds from the events will support the San Mateo Dental Clinics. Leslie took the opportunity to recognize John Thomas for his integral contributions to the Tournaments success this year and for the past nine years.	FYI
Consent Agenda	Approval of: 1. Hospital Board Meeting Minutes from August 3, 2017.	It was MOVED, SECONDED and CARRIED unanimously to approve all items on the Consent Agenda.

<p>Medical Staff Report Dr. Bryan Gescuk</p>	<p>Dr. Gescuk updated the Board on the collection of SOGI data by providers and staff.</p>	<p>FYI</p>
<p>Dental Services Dr. Ann Marie Silvestri</p>	<p>SMMC Dental Programs Adult Comprehensive Care: FOHC, COA, MDC and DCC Children Comprehensive Care and Emergency care: All Clinics Special Dental Clinics for:</p> <ul style="list-style-type: none"> • HIV / AIDS Patients (FOHC) • Pre-prosthetic Joint patient clearance (39th Ave & MDC) • Pre/Postnatal patients (30th Ave, MDC, COA, FOHC) • Pre-oncology treatment patients (39th Ave) • Cardiac patients (39th Ave) • Long Term Care patients (39th Ave) <p>Fiscal year 2016-2017: Wait list for comprehensive care increased 27% to 1,505. Total patient visits: 17,368</p> <p>Services for Correctional facilities: Maguire 311 in 2016 Maple Street 194 for January-June 2017. YSC 146 in 2016</p> <p>2017 Staff Engagement Results: 75.0 % Overall Favorability Clinic Staffing - Keeping staffing consistent and have enough staff Communication - DAs and DDS to “talk” to each other Education and Training - CE opportunities at no cost to staff Team Building - Get together outside of work</p>	<p>FYI</p>
<p>Compliance Gabriela Behn</p>	<p>2017-2018 Compliance Work Plan Standards, Policies, Procedures</p> <ul style="list-style-type: none"> • Update Code of Conduct – Completed. • Billing Audit Protocol – Completed. • Coding Compliance Policy – Finalizing. <p>Monitoring, Auditing, and Internal Reporting Systems</p> <ul style="list-style-type: none"> • Develop an annual compliance audit plan – In Process. • Annual Gap Assessment – Completed (Moss Adams). <p>Moss Adams Revenue Integrity Gap Assessment</p>	<p>FYI</p>

	<ul style="list-style-type: none"> • Brought in by CFO to do a risk assessment and evaluation of revenue integrity and compliance. • First draft shared with CFO, Compliance Officer and Revenue Integrity Manager. • Final draft expected September. • Identified gaps will be prioritized and added to the 2017-2018 Compliance Work Plan. 	
SMMC Campus Upgrade Project Peter Shih, Paul Hundal	Peter and Paul discussed the relocation of essential services from the 1954 Building into existing OSHPD space on the ground floor of the Nursing Wing. The move has a targeted completion date of January 2020. They answered questions from the Board.	FYI
Financial Report David McGrew, CFO	The July FY17/18 financial report was included in the Board packet and David McGrew answered questions from the Board.	FYI
CEO Report Dr. CJ Kunnappilly, CEO	Dr. Kunnappilly presented the CEO report which was included in the Board packet and answered questions from the Board.	FYI
Health System Report Louise Rogers	<p>The Health System is mobilizing in response to the heat wave that has hit the Bay Area by educating the public and implementing a cooling protocol. Cordilleras implemented a cooling center for its residents.</p> <p>In November the Health System will receive RFP's for companies that can provide acute psychiatric services for the incarcerated population.</p>	FYI
County Manager John Maltbie	No report.	FYI
Board of Supervisors Supervisor David Canepa	No report.	FYI

Supervisor Canepa adjourned the meeting at 9:10 AM. The next Board meeting will be held on October 5, 2017.

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

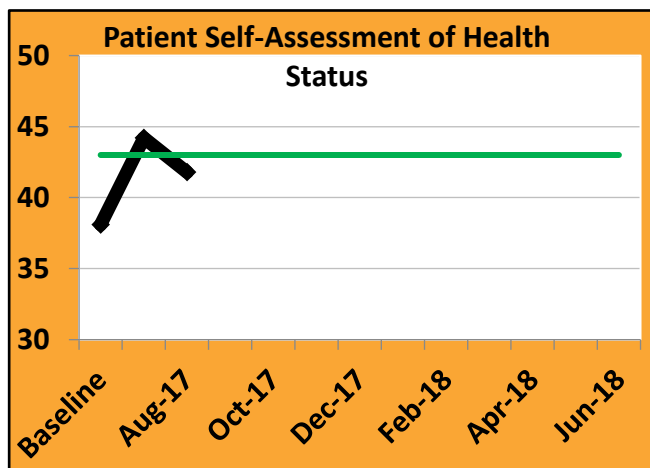
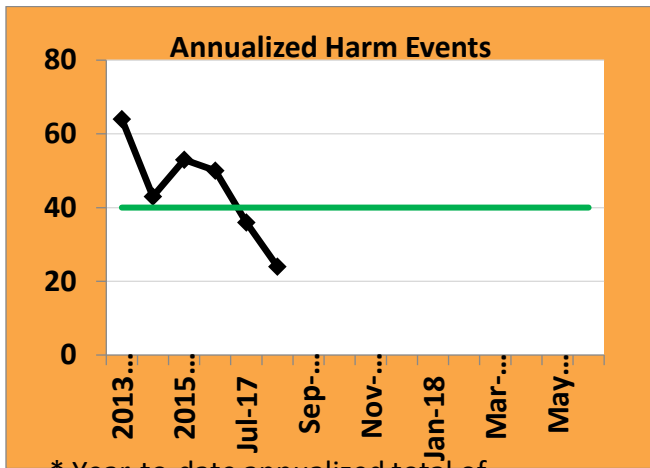
ADMINISTRATION REPORTS



October, 2017

EXCELLENT CARE

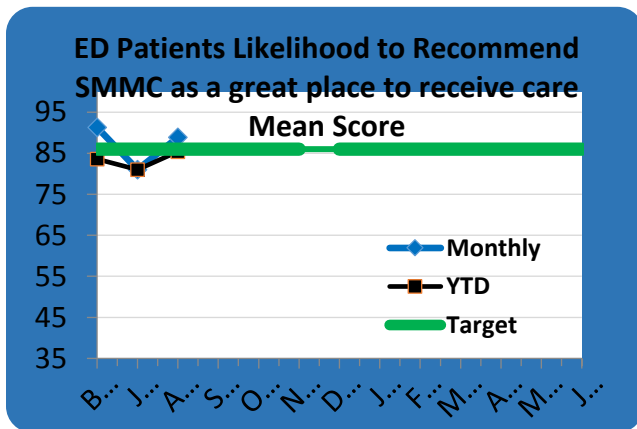
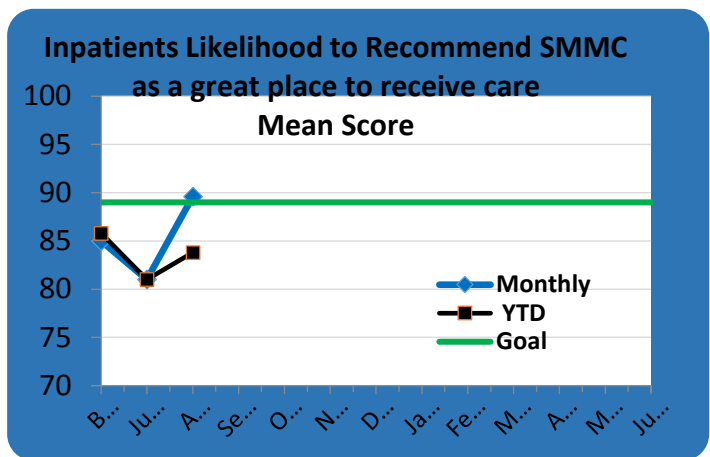
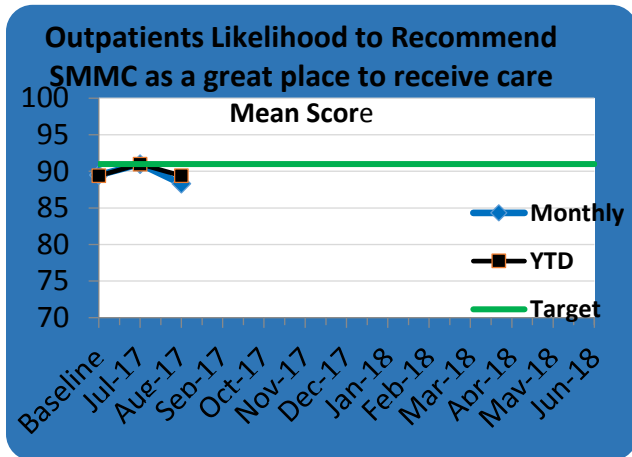
• PILLAR METRICS



- Improvements in Specialty Service Delivery-** One of SMMC’s primary areas of focus for its LEAP work this year is on the improvement of the delivery of specialty services to all of its patients. In order to accomplish this goal, the medical center is establishing a “model cell.” A model cell is a visible example of an area where we have effectively redesigned systems, implemented a daily management system and supported staff in effective problem solving in order to create a model where people are developed, work is transformed, and improvements are effectively implemented and spread. An improvement team has spent the last several weeks working on these areas at the Daly City Clinic. The team is composed of care team members from both Daly City and Specialty Clinics. In addition, the team has representatives from MITS (Medical Center IT Services), the Office of Managed Care, and our Patient and Family Advisory Council. The work of this team is being supported by over 25 leaders from across the organization. The initial focus of their work is designing a process by which we more effectively support primary care teams in delivering care to patients when they identify a specialty care need that might not necessarily require a specialty care visit. This area of focus will continue for the next several months. The next area of focus will be the delivery of specialty services in specialty clinics. We will look forward to continuing to update you as the work moves forward.

PATIENT CENTERED CARE

• **PILLAR METRICS**



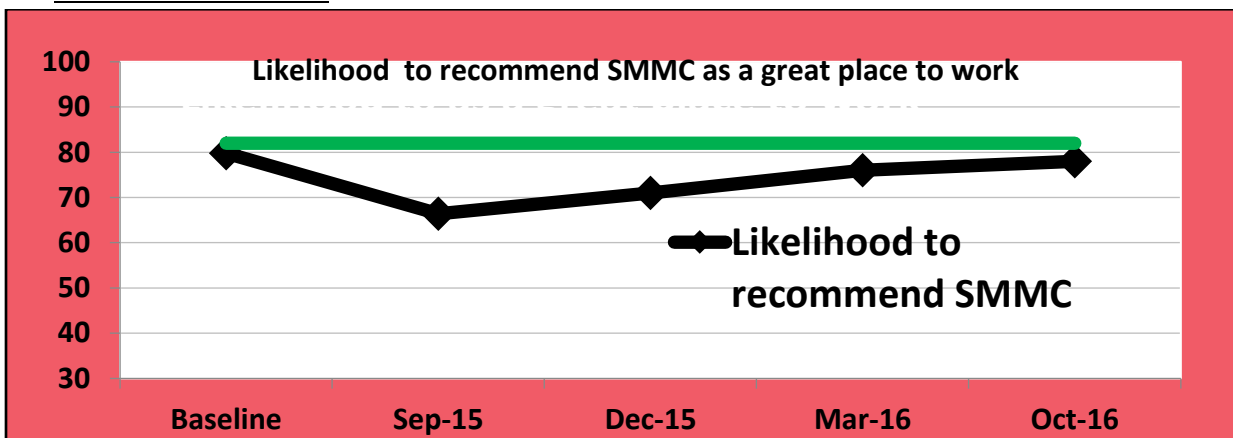
• **Selected patient/family stories of gratitude:**

- **From the Emergency Department:**
 - The doctor was very kind and professional. Two thumbs up!
 - The nurse who attended me was very attentive, she explained everything. I was very satisfied.
- **From 2A/B:**
 - From the admissions clerk to the nurses & doctors, all were extremely helpful and attentive.
 - Every nurse I had showed a lot of professional integrity and compassion!
- **From 3AB:**
 - It was the doctors and nurses who overall made my treatment team a standout treatment team and my behavioral health stay a standout stay with a positive clinical experience both acute and inpatient.
- **From Coastside Clinic:**
 - I would recommend to other people that there they treat with kindness
 - Good clean clinic. Satisfied in every way. Thank you
- **From Daly City Clinic:**
 - Very friendly and helpful and kind.
 - I feel satisfied with all for the collaboration they give
- **From Fair Oaks Health Center:**
 - Very timely, courteous and always helpful!
 - Super super kind and compassionate
- **From the Innovative Care Clinic:**

- When I came in for my appointment everyone was respectful and kind from the receptionist to the nurse and provider. I was satisfied with my visit
- You are taking very good care of me
- **From Pediatrics Clinic:**
 - It's the second time that a doctor calls me to ask about the health of my sons. Thanks to the doctor for calling me two times, I think not on times of work & that made me feel more secure.
- **From the Ron Robinson Senior Care Center:**
 - Everyone at the Ron Robinson Clinic are extremely helpful and courteous.
 - My family and I are grateful for the good service that they give us.
- **From South San Francisco Clinic:**
 - Good!
- **From Dental Clinic:**
 - The practitioner is very attentive and professional
 - As always very kind and caring, moreover, happy.
- **From the Medical Specialty Clinic:**
 - There are really great, helpful, good communicates, sharp staff. I am impressed with, and grateful for, their service, intelligence and help.
 - Overall excellent
- **From OB/GYN Clinic:**
 - Dr. Quintana is a wonderful doctor as well as very knowledgeable and caring.
- **From Surgical Specialty Clinic:**
 - Very professional
 - The nurses are all very nice and concerned for my health, each time that I arrive they treat me well.

STAFF ENGAGEMENT

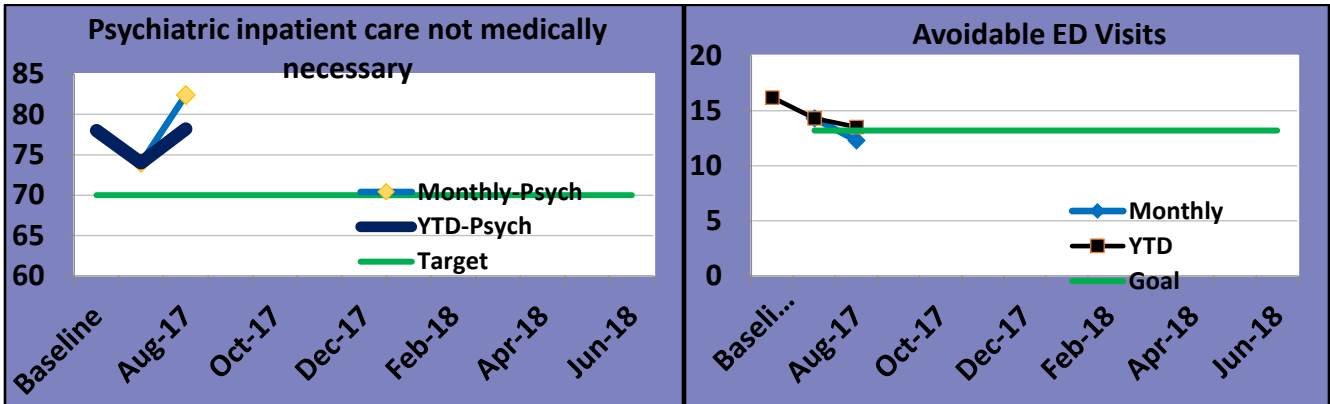
• PILLAR METRICS



- **Another Successful Year for Nursing-** Attached please find the annual nursing report from our Chief Nursing Officer, Joan Spicer. Highlights include improvements in: the patient experience ratings of nurses, the delivery of care in the patient's preferred language, and overall nurse sensitive quality outcomes. Congratulations to all of our nursing colleagues for their ongoing commitment and outstanding accomplishments.

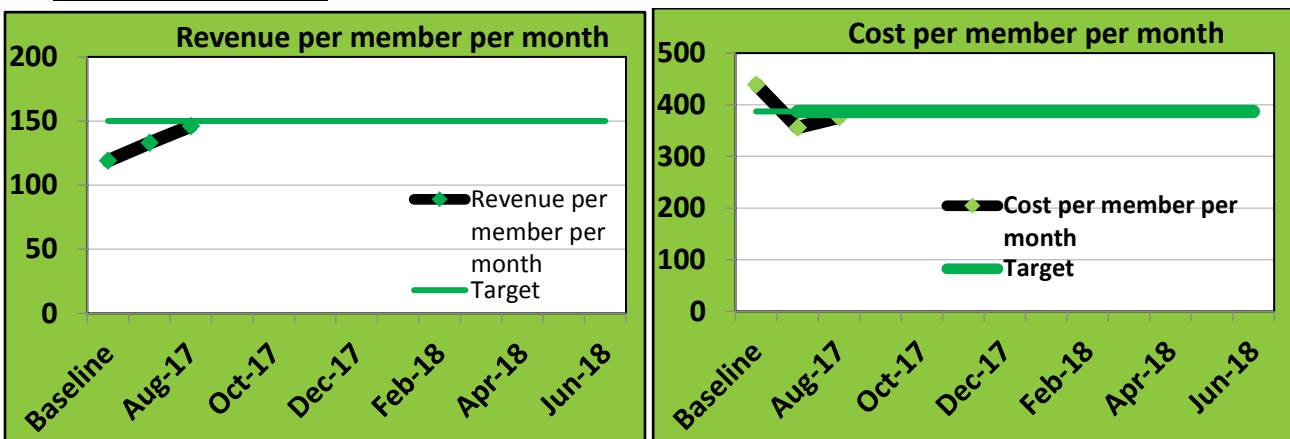
RIGHT CARE, TIME AND PLACE

• PILLAR METRICS



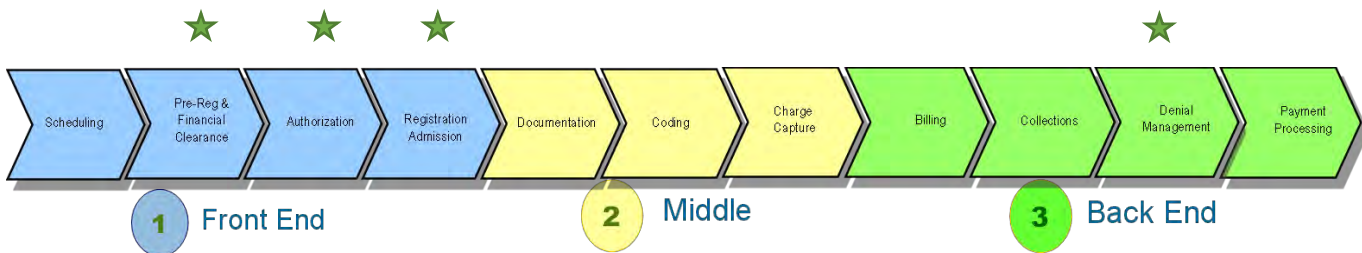
FINANCIAL STEWARDSHIP

• PILLAR METRICS



Revenue Cycle Transformation – FY18 Initiatives

Our FY17-18 Financial Stewardship strategic initiative continues to focus on the revenue cycle, in that sweet spot of things that matter and things we can control. We are building on last year’s front-end work with insurance verification accuracy and inpatient authorization approvals. In addition we added a focus on ensuring our providers are enrolled with Medicare and Medi-Cal in a timely manner to eliminate payment denials.



The work in September continued with developing nested charters for registration accuracy, authorizations for same day surgeries, and provider enrollment. As a starting point, each nested charter process owner convened cross-functional teams to update the background, needs statement and current condition as the foundation for

the work. A key component in this effort was identifying the measures we track to let us know whether our actions are yielding improvements. For our overall charter, the team identified the following measures for FY18:

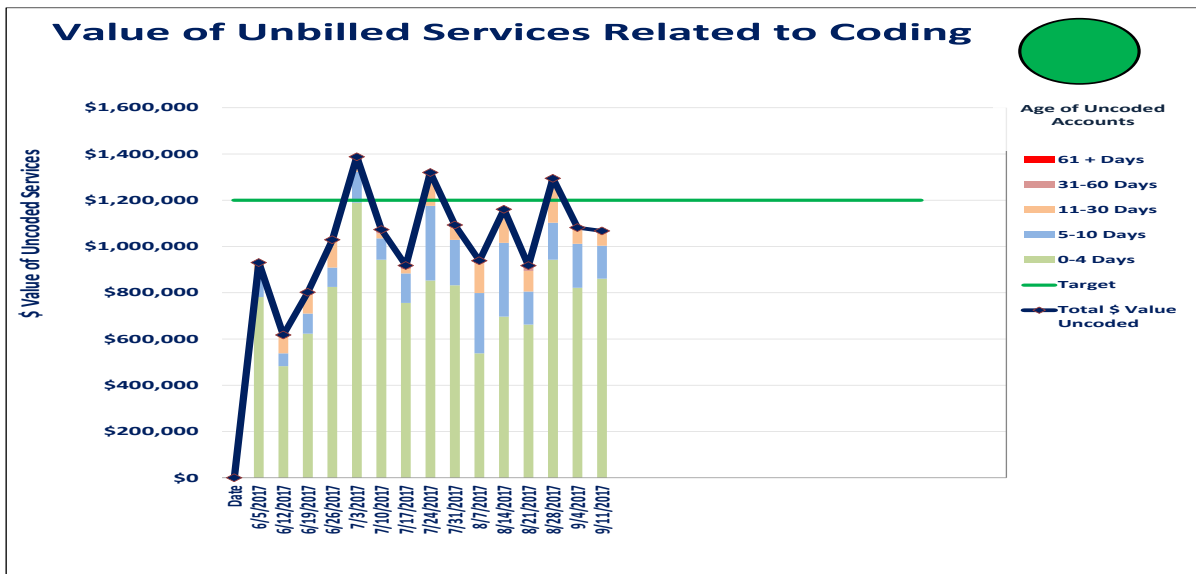
Measures:	Baseline value (6/30/17)	Current Value (8/31/17)	Ideal Value
Revenue per member per month (pmpm)	\$119	\$146	\$398
Claim denials (baseline = 4/30/17)	\$4.4 million	TBD	No Denials
Unbilled accounts	\$8.6 million	\$11.9 million	No Unbilled

Simultaneously, the teams are developing PDSA experiments to validate certain current conditions as a precursor to identifying target conditions that will highlight where we're trying to get to in FY18, developing the hypothesis of how achieving the target condition translates into measurable performance, and then outlining the action plans to move us towards the target condition.

The transformation of revenue cycle workflows is a critical foundational element of preparing for the replacement of our Invision patient accounting system.

Medical Records Coding Team – Staff Engagement Initiative

Over the past several staff engagement surveys, our Medical Records Coding staff have shared their desire to participate in the County's Teleworking program. Although operational needs and changes in management didn't allow this to happen earlier, we finally launched our new program in October. Through collaborative efforts by management, staff, HR and AFSCME, this voluntary program was developed to meet operational needs while balancing employee's work-life goals. The program sets productivity and accuracy expectations and is initially limited to 2 days per week, but will be re-evaluated in several months with a potential to expand to 5 days a week. The successful launch of the program was due in large part to the Coding staff's commitment and dedication to achieving high levels of performance, as illustrated in the coding timeliness chart below, all while consistently maintaining accuracy rates above the industry standard of 95%!



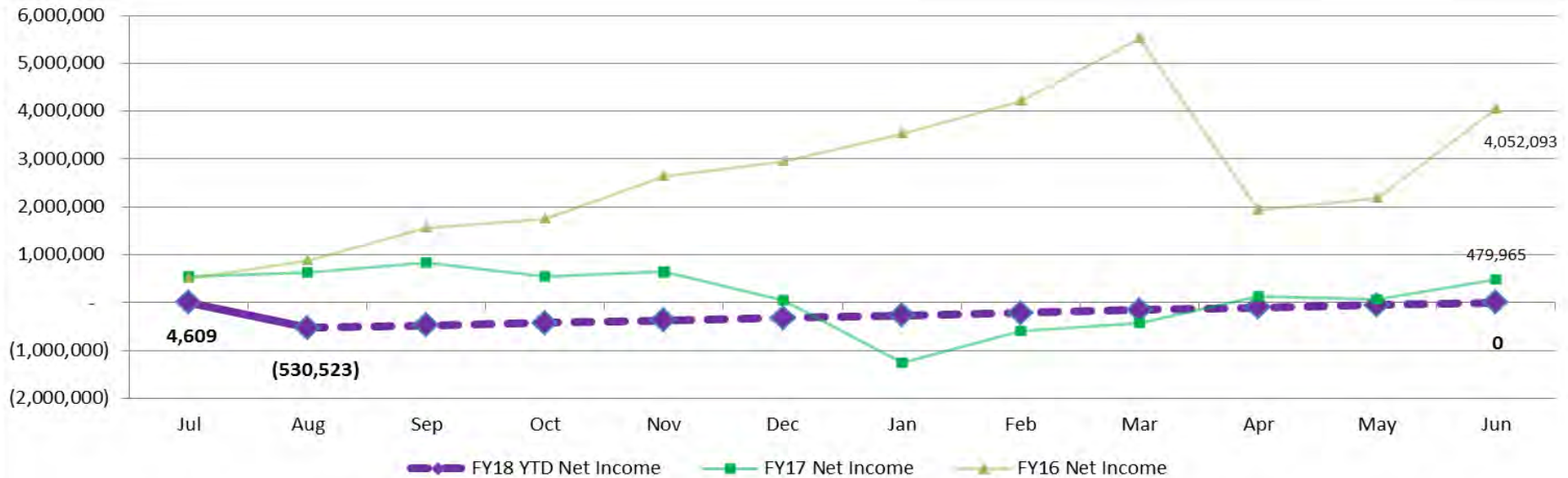


San Mateo Medical Center
A County System of Healthcare

**August FY 2017-2018
Financial Report**

**Board of Directors Meeting
October 5, 2017**

Financial Highlights



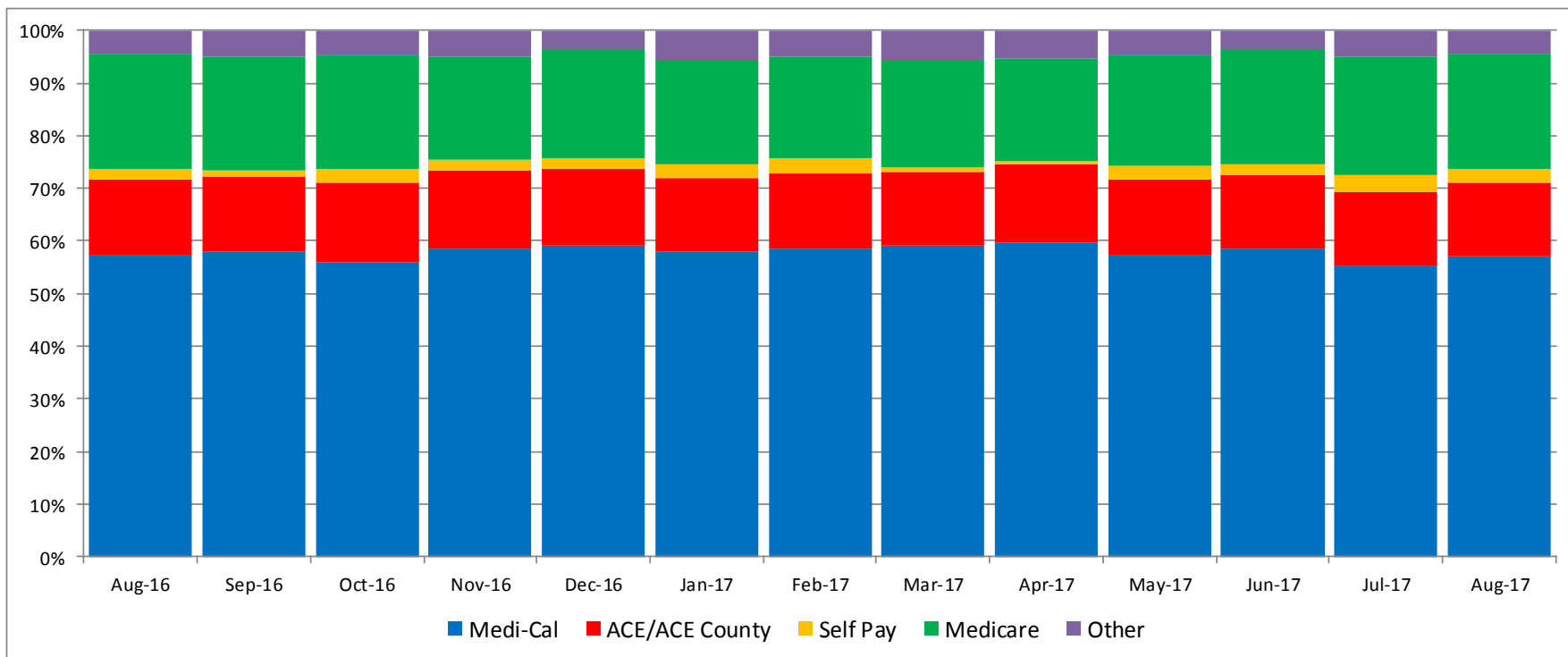
Financial Drivers:

- FTEs below budget
- Timing of WPC, capital and IGT expenditures
- Lower collection rate – medical necessity & FQHC holds
- SNCP payments to BHRS

Forecast FY18: The recently enacted Managed Care Rule places several supplemental revenue streams at risk - MCE-to-Cost, HPSM Base IGT, Hospital Fee & AB85 Rate Range. CAPH is developing alternative funding proposals.

**San Mateo Medical Center
Payer Mix
August 31, 2017**

	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
Payer Type by Gross Revenue	A	B	C	D	E	F	G	H
Medicare	21.8%	21.0%	0.8%		22.2%	21.0%	1.2%	
Medi-Cal	57.1%	58.0%	-0.9%		56.3%	58.0%	-1.7%	
Self Pay	2.8%	2.0%	0.8%		2.9%	2.0%	0.9%	
Other	4.5%	5.0%	-0.5%		4.7%	5.0%	-0.3%	
ACE/ACE County	13.9%	14.0%	-0.1%		14.0%	14.0%	0.0%	
Total	100.0%	100.0%			100.0%	100.0%		

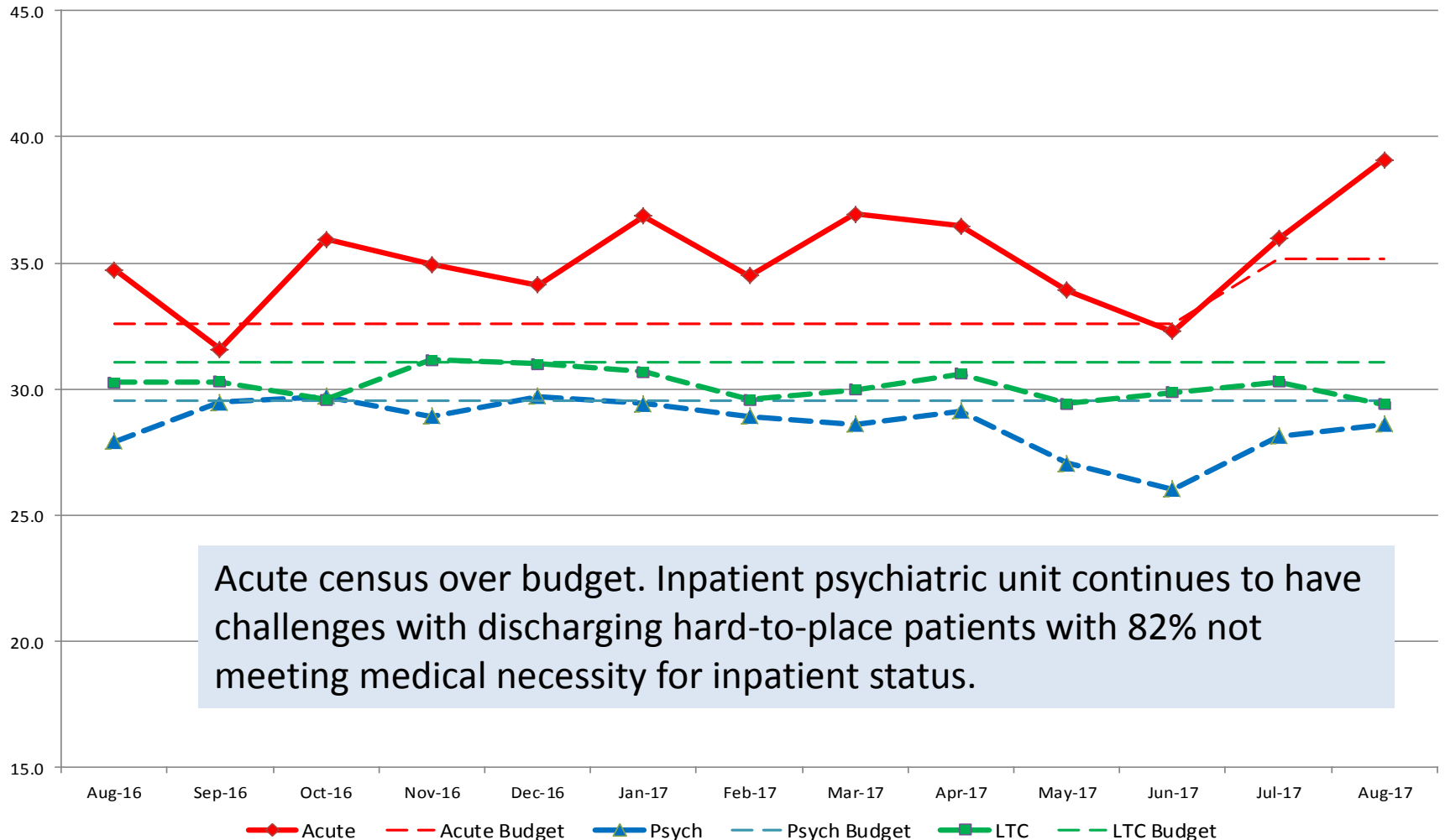


San Mateo Medical Center
 Inpatient Census
 August 31, 2017

MONTH			
Actual	Budget	Variance	Stoplight
3,010	2,934	76	3%

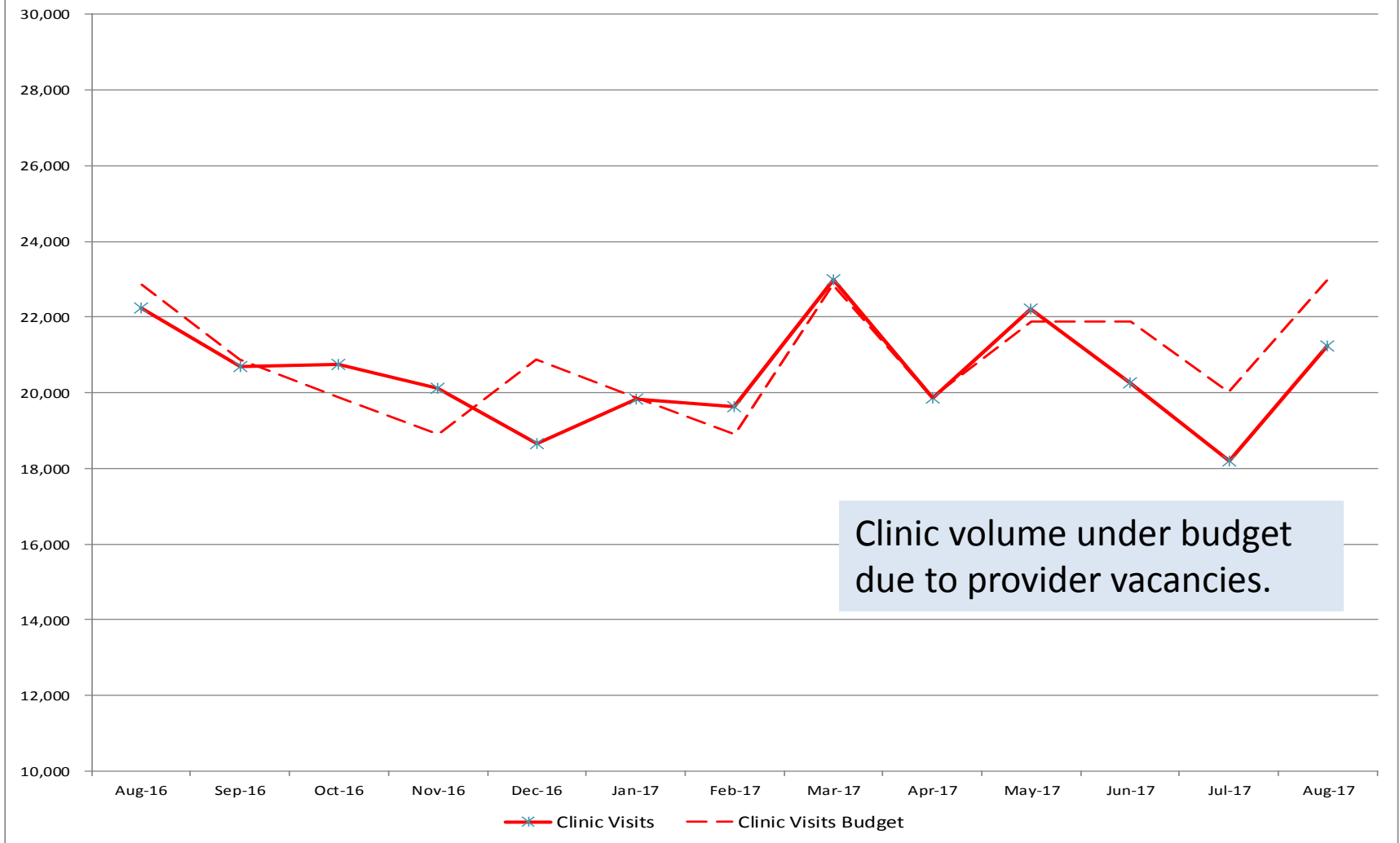
YEAR TO DATE			
Actual	Budget	Variance	Stoplight
5,936	5,868	68	1%

Patient Days



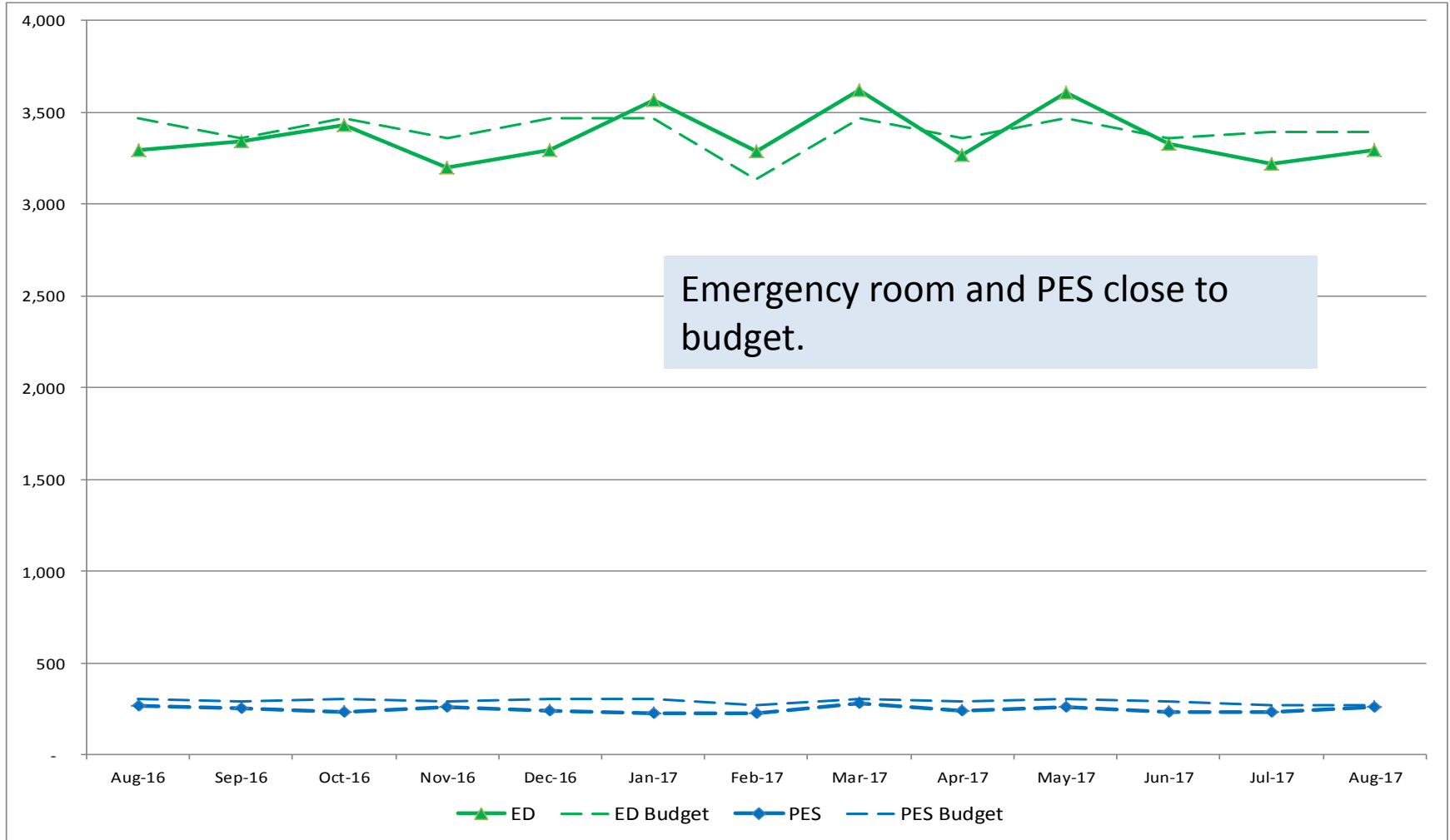
**San Mateo Medical Center
Clinic Visits
August 31, 2017**

	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
Clinic Visits	21,245	23,010	(1,765)	-8%	39,433	43,018	(3,585)	-8%



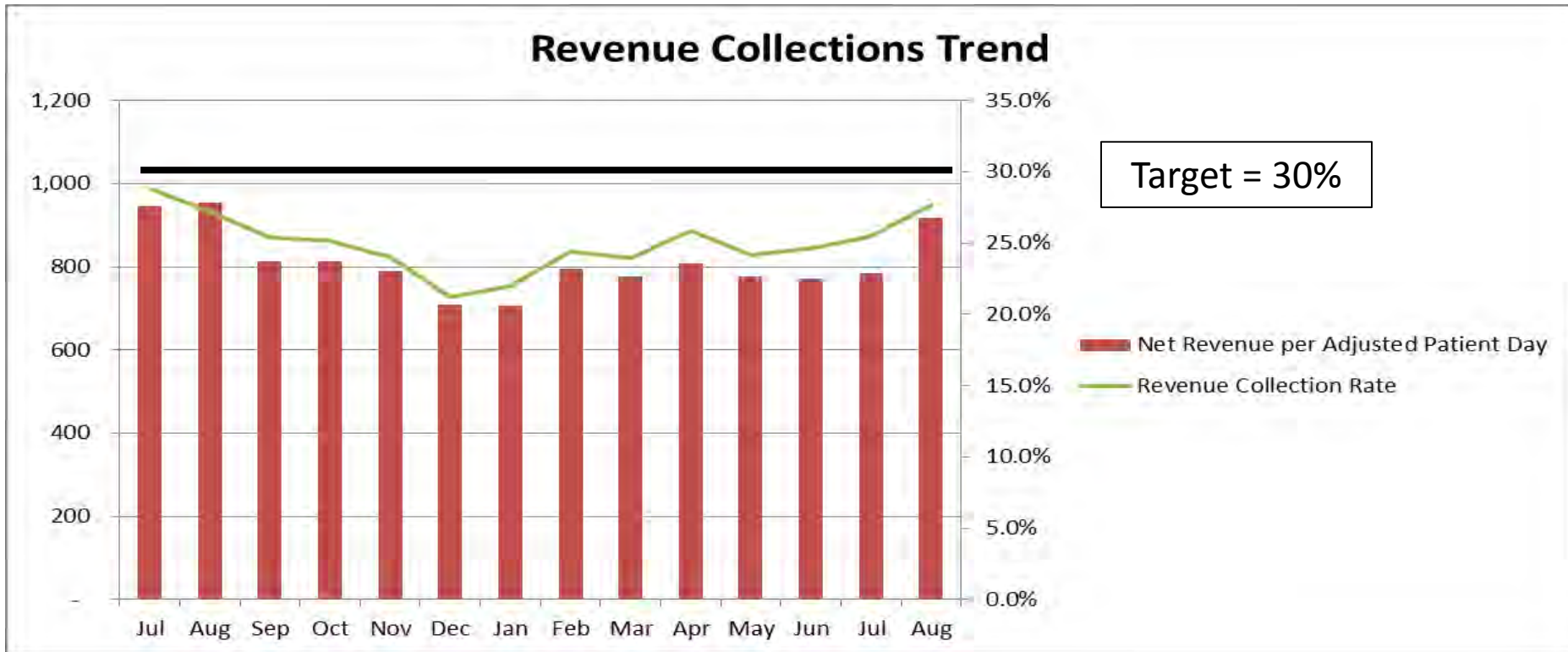
**San Mateo Medical Center
Emergency Visits
August 31, 2017**

ED Visits	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
	3,549	3,659	(110)	-3%	7,002	7,319	(317)	-4%



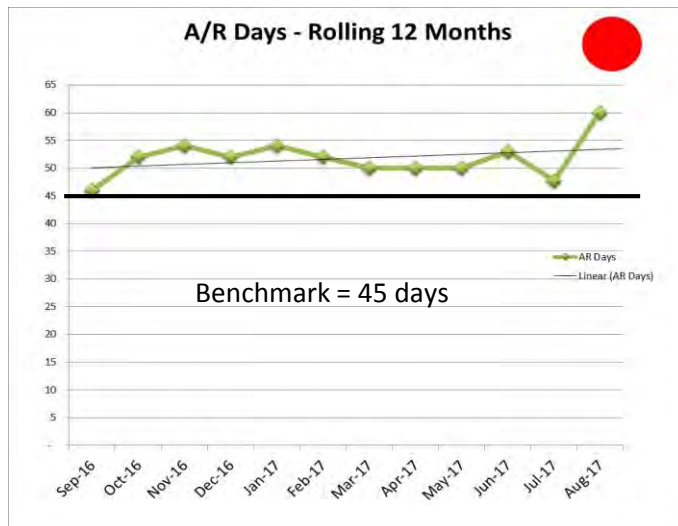
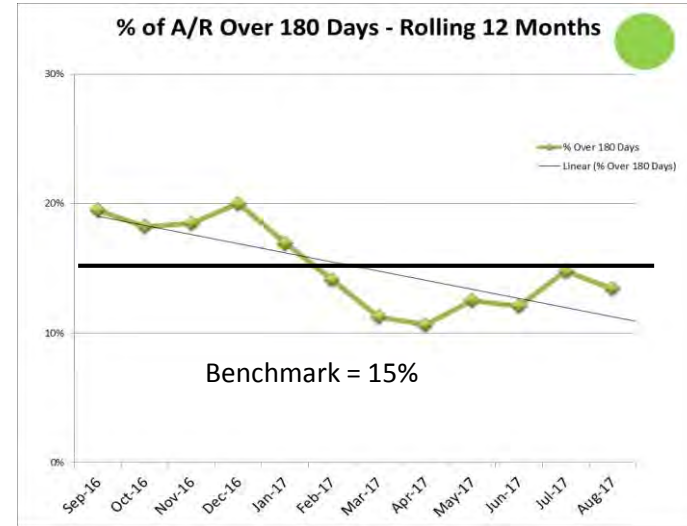
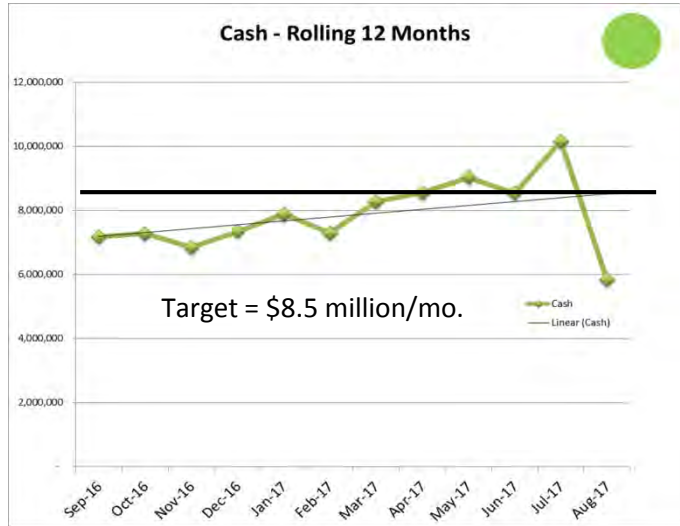
Key Performance Indicators

FFS Revenue Collection Trend



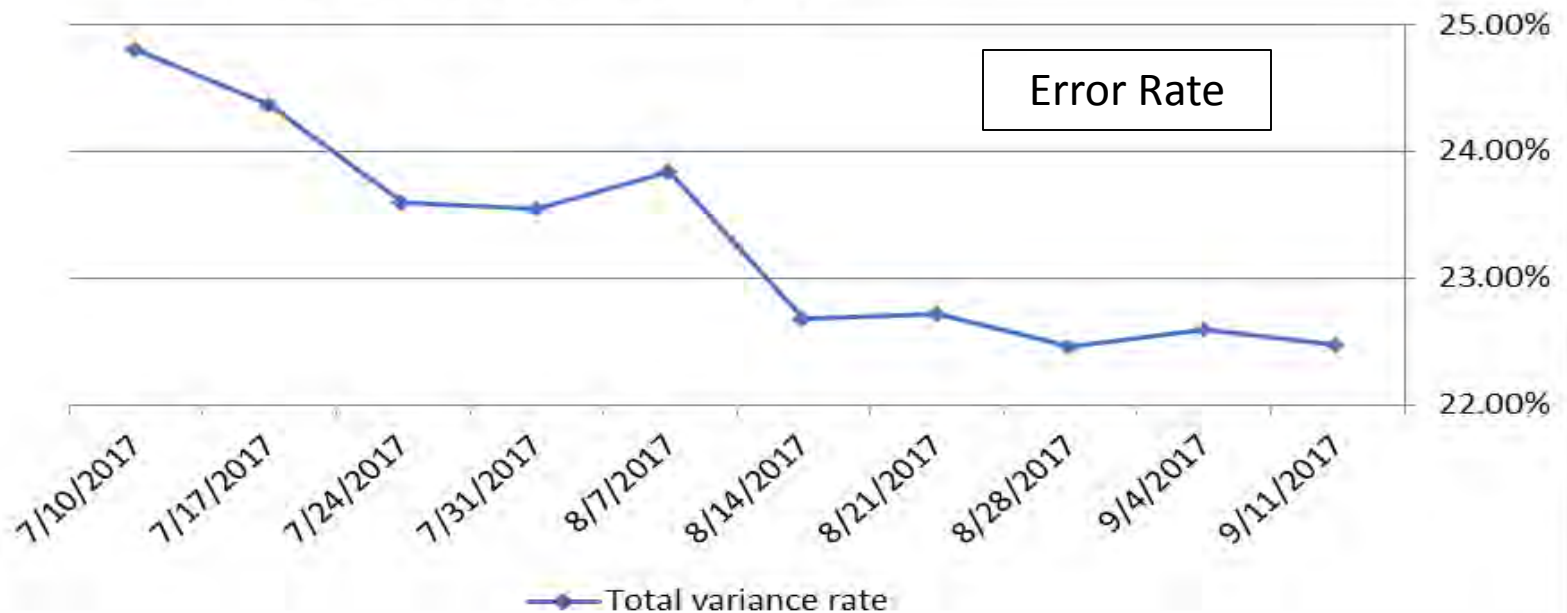
The revenue collection rate declined steadily through December due to high administrative days and lower Medi-Cal rates for acute medical-surgical patients and skilled nursing facility patients at SMMC and BLTC. Beginning January, the collection rate bounces back due to FFS revenue from MCE patients. Effective July revenue includes the updated Medi-Cal rates for acute medical-surgical patients

Key Performance Indicators



Key Performance Indicators

Medical Necessity Retro Reviews (Inter-Rater Reliability)



SMMC engaged an external organization to perform retroactive validation of the determination of medical necessity for compliance with acute inpatient billing rules. The accuracy of medical necessity determination continues to improve through on-going customized training, education and monitoring. Implementation of a CDI program will further enhance these efforts.

Financial Improvement Plan

Executive Summary

Initiative

Status

Denial management

- External retro reviews in progress. 19% of reviewed cases were corrected
- Medical necessity training & monitoring in progress
- Denials reporting tool in early implementation

Clinical Documentation Improvement (CDI)

- Vendor selected
- Contract negotiations in progress
- Project work to start late October/early November

Psych services billing project

- Draft report delivered. Final report next month. Workgroups are being established to address recommendations.

Increase Medi-Cal rates

- SNF cost report appeal in progress
- Medical-Surgical inpatient rates increased to \$2,280/day. Projected to yield \$6m annually.

APPENDIX

**San Mateo Medical Center
Income Statement
August 31, 2017**

	MONTH				YEAR TO DATE				
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight	
	A	B	C	D	E	F	G	H	
1 Income/Loss (GAAP)	(535,133)	31,850	(566,983)		(530,523)	63,700	(594,223)		
2 HPSM Medi-Cal Members Assigned to SMMC	38,290	38,019	271	1%	76,209	76,038	171	0%	
3 Unique Patients	69,960	70,114	(154)	0%	69,960	70,114	(154)	0%	
4 Patient Days	3,010	2,934	76	3%	5,936	5,868	68	1%	
5 ED Visits	3,549	3,659	(110)	-3%	7,002	7,319	(317)	-4%	
7 Surgery Cases	248	290	(42)	-15%	487	543	(56)	-10%	
8 Clinic Visits	21,245	23,010	(1,765)	-8%	39,433	43,018	(3,585)	-8%	
9 Ancillary Procedures	73,988	75,801	(1,813)	-2%	138,838	142,003	(3,165)	-2%	
10 Acute Administrative Days as % of Patient Days	0.0%	16.0%	16.0%	100%	0.0%	16.0%	16.0%	100%	
11 Psych Administrative Days as % of Patient Days	82.4%	80.0%	-2.4%	-3%	78.2%	80.0%	1.8%	2%	
(Days that do not qualify for inpatient status)									
Pillar Goals									
12 Revenue PMPM	146	150	(4)	-3%	139	150	(11)	-7%	
13 Operating Expenses PMPM	376	387	11	3%	366	387	21	5%	
14 Full Time Equivalentents (FTE) including Registry	1,189	1,253	65	5%	1,188	1,253	66	5%	

**San Mateo Medical Center
Income Statement
August 31, 2017**

	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
	A	B	C	D	E	F	G	H
21 Inpatient Gross Revenue	9,957,586	9,577,810	379,776	4%	18,970,202	19,155,620	(185,418)	-1%
22 Outpatient Gross Revenue	26,840,093	25,324,704	1,515,389	6%	48,184,697	50,649,408	(2,464,711)	-5%
23 Total Gross Revenue	36,797,679	34,902,514	1,895,165	5%	67,154,898	69,805,028	(2,650,130)	-4%
24 Patient Net Revenue	10,196,003	10,512,930	(316,927)	-3%	19,474,480	21,025,860	(1,551,380)	-7%
25 Net Patient Revenue as % of Gross Revenue	27.7%	30.1%	-2.4%	-8%	29.0%	30.1%	-1.1%	-4%
26 Capitation Revenue	1,255,099	1,291,667	(36,568)	-3%	2,398,372	2,583,333	(184,962)	-7%
27 Supplemental Patient Program Revenue	8,922,342	10,026,459	(1,104,118)	-11%	16,558,449	20,052,919	(3,494,470)	-17%
(Additional payments for patients)								
28 Total Patient Net and Program Revenue	20,373,444	21,831,056	(1,457,612)	-7%	38,431,300	43,662,112	(5,230,812)	-12%
29 Other Operating Revenue	626,416	1,236,192	(609,775)	-49%	2,256,081	2,472,384	(216,303)	-9%
(Additional payment not related to patients)								
30 Total Operating Revenue	20,999,860	23,067,248	(2,067,388)	-9%	40,687,381	46,134,496	(5,447,115)	-12%

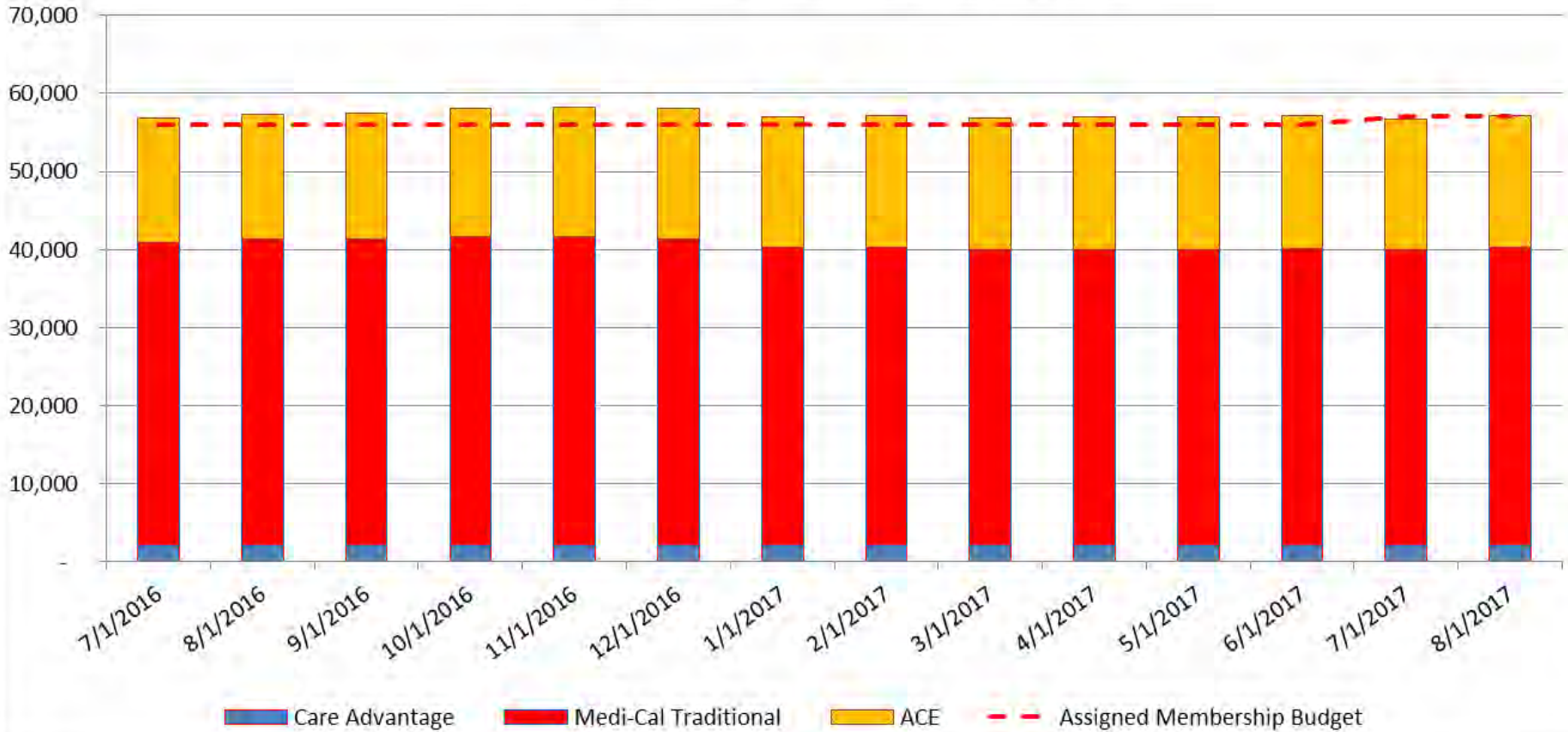
San Mateo Medical Center
Income Statement
August 31, 2017

	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
	A	B	C	D	E	F	G	H
Operating Expenses								
31 Salaries & Benefits	15,256,068	15,819,555	563,487	4%	30,690,994	31,639,109	948,116	3%
32 Drugs	719,145	806,645	87,500	11%	1,443,264	1,613,291	170,027	11%
33 Supplies	1,120,637	914,846	(205,791)	-22%	1,796,817	1,829,691	32,874	2%
34 Contract Provider Services	3,479,238	3,290,227	(189,011)	-6%	6,548,694	6,580,454	31,759	0%
35 Other fees and purchased services	3,841,713	4,516,184	674,471	15%	7,156,782	9,032,368	1,875,586	21%
36 Other general expenses	657,803	502,737	(155,066)	-31%	1,107,365	1,005,473	(101,892)	-10%
37 Rental Expense	175,811	189,615	13,805	7%	348,822	379,230	30,408	8%
38 Lease Expense	822,975	822,975	0	0%	1,645,951	1,645,951	0	0%
39 Depreciation	238,383	260,089	21,706	8%	508,248	520,178	11,930	2%
40 Total Operating Expenses	26,311,772	27,122,873	811,101	3%	51,246,937	54,245,745	2,998,809	6%
41 Operating Income/Loss	(5,311,912)	(4,055,625)	(1,256,287)	-31%	(10,559,556)	(8,111,250)	(2,448,306)	-30%
42 Non-Operating Revenue/Expense	404,664	(755,994)	1,160,657	154%	813,448	(1,511,987)	2,325,435	154%
43 Contribution from County General Fund	4,372,116	4,843,468	(471,352)	-10%	9,215,584	9,686,937	(471,352)	-5%
44 Total Income/Loss (GAAP)	(535,133)	31,850	(566,983)		(530,523)	63,700	(594,223)	
(Change in Net Assets)								



■ Medicare ■ Medi-Cal Traditional ■ Access to Care for Everyone

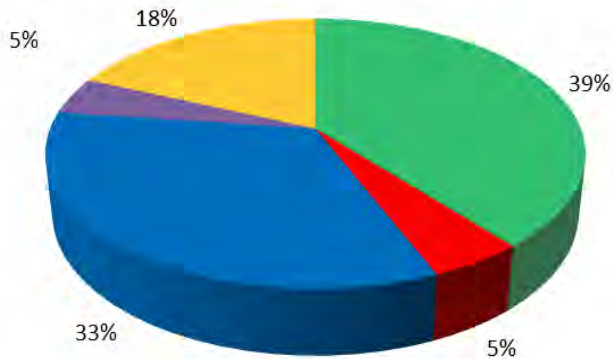
Managed Care Membership Trend



Revenue Mix

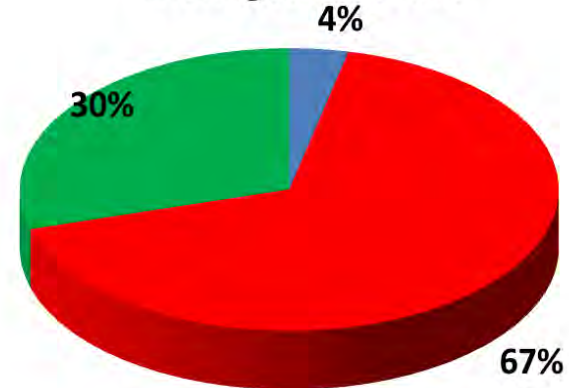
57,000
Managed
Care
Lives

Sources of Revenue



■ Fee For Service ■ Capitation ■ Supplemental ■ Other ■ County Contribution

Managed Care Mix



■ Medicare ■ Medi-Cal Traditional ■ Access to Care for Everyone

- **Managed Care** programs represent 41% of our Operating Revenue
- **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.

To: SMMC Board Members
 From: Louise Rogers, Chief
 Subject: Health System Monthly Snapshot — September 2017



Indicator	Number	Change from previous month	Change from previous year
ACE Enrollees	21,504 (August, 2017)	-0.3%	5%
SMMC Emergency Department Visits	3,549 (August, 2017)	1.3%	-0.4%
New Clients Awaiting Primary Care Appointment	931 (September, 2017)	-6%	152%

Coastal Cleanup Day Sees 2nd Highest Participation in 13 Years

On Saturday September 16, 4,425 volunteers in San Mateo County participated in Coastal Cleanup Day, coming very close to beating the 13-year record high of 4,490 set in 2012. The event is a statewide volunteer effort organized by the California Coastal Commission. Coordination and outreach efforts in the County was spearheaded by Environmental Health Services in collaboration with local partners. This year, volunteers in San Mateo County collected 28,063 pounds of debris (a 5.2% increase from last year). Some interesting finds from the cleanup included a car bumper, two microwaves, an official British Airlines crew blanket, and half a hockey stick.



Photo: Alex Eisenhart, Health System Communications

Office of Diversity and Equity Addresses Women’s Equality Day Event

In celebration of the 97th anniversary of the ratification of the 19th amendment granting women the right to vote, the Women’s Community Leadership Network hosted a Women’s Equality Day celebration, featuring a presentation given by Office of Diversity and Equity staff member, Siavash Zohoori. His talk was about the power of storytelling and its role in promoting equality for women. The event, which was held at the Dragon Theatre in Redwood City, also included a stage play performance of *Airswimming*, which tackles issues of sexism in the 1920’s.



Photo: Alex Eisenhart, Health System Communications

Environmental Health Conducts Stakeholder Workshop in Preparation for Phase III of Groundwater Study

Environmental Health Services, in conjunction with the Office of Sustainability, held its sixth public workshop on August 17 as part of the San Mateo Plain Sub-basin Groundwater Assessment project. This workshop shared the initial results of Phase II: Data Gaps Assessment and kicked off Phase III: Future Scenario Evaluations. The event provided an opportunity for stakeholders to discuss which factors should be evaluated under future conditions. While the results of this exercise have not been finalized, initial reports reflected common themes of changes due to climate change and increased use of groundwater. The next workshop, which is set to take place in Fall, will outline the handful of scenarios that will be evaluated in Phase III and present information and evaluation of additional data collected as part of Phase II efforts to continue to refine the evolving understanding of this shared natural resource.



Photo courtesy: Environmental Health, Health System

PRIDE Initiative Co-Sponsors Documentary Film Screening with San Mateo County Pride Center

On Friday September 8, the San Mateo Pride Center hosted a documentary film screening co-sponsored by the PRIDE Initiative, part of the Office of Diversity and Equity. The film, entitled *Out Run*, is about the challenges LGBTQ+ people face as they transition into the mainstream and fight for dignity, legitimacy, and acceptance across the globe. The screening was held in conjunction with the PRIDE Initiative’s larger effort to promote awareness around the transgender community. Nearly 60 people were in attendance, including Supervisor Don Horsley. Participants were welcomed by ODE Director, Dr. Jei Africa, and Pride Center Director, Lisa Putkey.



Photo courtesy: Office of Diversity & Equity, Health System