

BOARD OF DIRECTORS MEETING

Monday, January 4, 2021 8:00 AM – 10:00 AM



AGENDA

Board of Directors

Wednesday, Jan. 4, 2021

8:00 AM

BY VIDEOCONFERENCE ONLY https://smcgov.zoom.us/j/91075397545

On March 17, 2020, the Governor issued Executive Order N-29-20 suspending certain provisions of the Ralph M. Brown Act in order to allow for local legislative bodies to conduct their meetings telephonically or by other electronic means. Thus, pursuant to Executive Order N-29-20, local and statewide health orders, and the CDC's social distancing guidelines which discourage large public gatherings, the San Mateo Medical Center Board meeting will be conducted by videoconference.

Public Participation

The meeting may be accessed through Zoom at https://smcgov.zoom.us/j/91075397545. Written public comments may be emailed to mlee@smcgov.org and should include the specific agenda item on which you are commenting. Spoken public comments will also be accepted during the meeting through Zoom.

A. CALL TO ORDER AND PUBLIC COMMENT

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. December 7, 2020 Minutes
- 2. SMMC Board of Directors Bylaws

G. MEDICAL STAFF REPORT

Chief of Staff Update

H. ADMINISTRATION REPORTS

1. Department of Surgery Dr. Alpa Sanghavi

Dr. Scott Lock

Dr. Steve Hassid

2. Compliance Report Dr. CJ Kunnappilly

3. Financial Report Dr. CJ Kunnappilly

4. CEO Report and Board Survey Dr. CJ Kunnappilly

I. COUNTY HEALTH CHIEF REPORT

County Health Snapshot Louise Rogers

J. COUNTY MANAGER'S REPORT Mike Callagy

K. BOARD OF SUPERVISOR'S REPORT Supervisor Carole Groom

L. ADJOURNMENT

TAB 1

CONSENT AGENDA

HOSPITAL BOARD OF DIRECTORS MEETING MINUTES Monday, December 7, 2020

Videoconference Meeting

Board Members Present	Staff Present			Members of the Public
Supervisor Carole Groom	Michelle Lee	Rebecca Archer	Scott Diem	
Supervisor David Canepa	David McGrew	John Jurow	Annie Louie	
Mike Callagy	Dr. Alpa Sanghavi	Karen Pugh	Judy Sheng	
Louise Rogers	Peggy Jensen	Gabriela Behn	Lucinda Dei Rossi	
Dr. CJ Kunnappilly	Rachel Daly	Paul Rogerville	Dr. Zachary Plaut	
Dr. Steve Hassid	Dr. Katalin Szabo	Carlton Mills	Anita Booker	
Dr. Brita Almog	Dr. Yousef Turshani	Angela Gonzales	Jennifer Papa	
Deborah Torres	Jan Allen	Kathryn Calafato		

ITEM	DISCJUSSION/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	The meeting was reconvened at 8:15 AM to Open Session. A quorum was present (see above).	
Session		
Report out of Closed	Medical Staff Credentialing Report for December 7, 2020.	Rebecca Archer
Session	QIC Minutes from October 27, 2020.	reported that the
	Medical Executive Committee Minutes from November 10, 2020.	Board unanimously
		approved the
		Credentialing Report
		and the QIC Minutes
		and accepted the
		MEC Minutes.
Public Comment	None.	
Foundation Report	There has been increased outreach for the Health Care Heroes program and donations now exceed \$12,000 per	FYI
	month. In addition to patients, we will expand it to include staff who are in need.	
	The end of the year fundraising appeal outreach will go out in a few days so look out for it and support the	
	Foundation to the extent that you can. The support of the Hospital Board means a lot and helps us when we approach larger donors.	
	In 2021, we are planning to have a socially distanced drive-in movie at the Ring Central headquarters.	
Consent Agenda	Approval of:	It was MOVED,
	1. Hospital Board Meeting Minutes from November 2, 2020.	SECONDED and
		CARRIED
		unanimously to

		approve all items on
Medical Staff Report Dr. Steve Hassid	The good news is that the first shipment of the Pfizer Covid-19 vaccine will arrive this month. San Mateo County has had lower COVID numbers than some of our neighbors but that can change, and we expect that it will. We are preparing for it now as we have since March and we are in a better place because we know better how to treat it. At MEC we are discussing guidelines related to limited resources like staffing and ventilators.	the Consent Agenda.
	The Vaccine Task Force led by Robert Blake is working on the logistics of storing and administering the shots. It is a complicated process and they have been very good at communications.	
Department of Psychiatry Dr. Katalin Szabo, Carlton Mills	Dept of Psychiatry: 9 psychiatrists, 6 psychologists, 47 licensed nurses, 10 MSA's Acute Psychiatric Services include Psychiatric Emergency Services which operates 24/7 and serves adults and children. Acute Inpatient Services has 34 licensed beds (18 currently in service). No inpatient children and adolescent	FYI
	Ligature Mitigation Project: Joint Commission Survey (TJC) in its last survey identified a number of ligature risk points in the care environments of 3AB and PES. • The project addresses all self-harm and ligature safety concerns outlined in risk assessment survey • Deficiencies are expected to be corrected in the timeframe designated by the TJC and by extension CMS • Action plan requires extensive and costly construction undertakings to mitigate the findings • Renovation required the reduction 3AB's census by 40%, which was reached in June • Anticipated starting construction in July 2020, but due to COVID-19, priorities had to be adjusted • New Timeline, construction is set to start April 2021 and will extend into 2022- COVID allowing	
	 COVID Mitigation: Individuals with serious mental illness and/or substance use disorders may have a higher risk of COVID exposure as well poorer outcomes due to co-morbidities. Another known factor is that communal Living facilities have higher risk of internal spread The foundation of our COVID Mitigation Plan incorporates the principles of screening, social distancing, testing and masking We restrict non-essential visitors, but encourage appropriate contact with family members via phone, ZOOM, face time, etc. Staff are fit-tested and trained with the appropriate PPE to do their work safely Staff on the units frequently reinforce patient social distancing, hand washing, and mask wearing 	
Whole Person Care Lucinda Dei Rossi	Whole Person Care is a collaborative for care coordination. It integrates physical health, behavioral health, and social services.	FYI
	Structural Steps Toward Coordinated Services-Highlights	

 Link clients to needed resources and services Assist clients to self-manage Provide emotional and physical support 	
 Assist clients to identify and access needed care Coordinate care across systems 	
Bridges to Wellness serves persons with multiple co-morbidities including chronic physical health conditions with intensive field-based care management • Care Navigators, Social Work Supervisors, Nurse Practitioner, RN, MD, and Manager	
 Created need to innovate data collection and visualization to view the "whole person" Significant advances in expanding data sources to include external health partners and improved data quality Data Analytics allows for targeted interventions for specific needs e.g. diabetes management, ED utilization Housing for Complex Clients provided for up to 40 medically fragile individuals and additional 60 with complex needs by leveraging Measure K dollars Innovative Best Practices introduced the Patient Activation Measure which is an evidence-based tool to measure patient ability to self-manage chronic disease Cross Divisional Workgroups Created the ability to analyze system wide barriers that prevent us from meeting the needs of complex clients Increased communication between divisions expands knowledge of services and the ability to link clients to the right service 	

Louise Rogers	The new changes to California's stay at home orders allows dental and non-urgent medical care to remain open. Grocery stores have 35% capacity. Upticks are being seen in the 20-39 age group, especially in Caucasians. The spread is due to gatherings, so we are urging the community to avoid indoor gatherings and to continue to wear a mask. These are the most effective ways to prevent new infections.	
County Manager Mike Callagy	Mr. Callagy expressed his appreciation for everyone's continued diligence in anticipation of a possible surge.	FYI
Board of Supervisors Supervisor Groom	Supervisor Groom wished everyone a happy and healthy holiday season.	FYI

Supervisor Groom adjourned the meeting at 10:04 AM. The next Board meeting will be held on January 4, 2021.

Minutes recorded by:

Michelle Lee, Executive Secretary

Minutes approved by:

Dr. Chester Kunnappilly, Chief Executive Officer

TAB 2

ADMINISTRATION REPORTS

BOARD OF DIRECTORS SAN MATEO MEDICAL CENTER

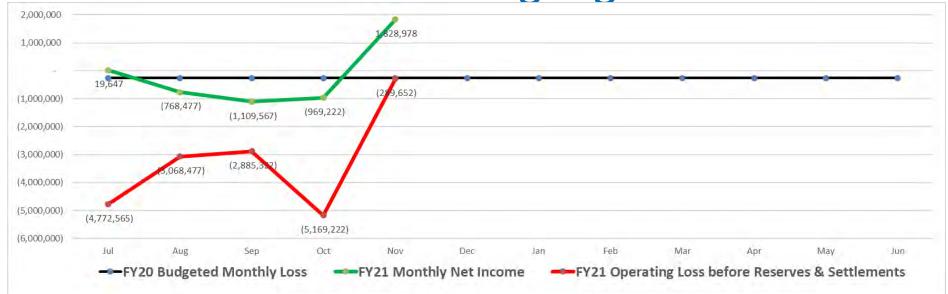
Financial Report: October FY20-21

January 4, 2021

Presenter: David McGrew, CFO



Financial Highlights



Net Profit (Loss) - Nov \$1.8M, YTD (\$993K)

- FY2020 Enhanced Payment Program (EPP)
 approved \$17.2M/annually
- QIP favorable due to PRIME backfill revision
- Fee for Service rate increases

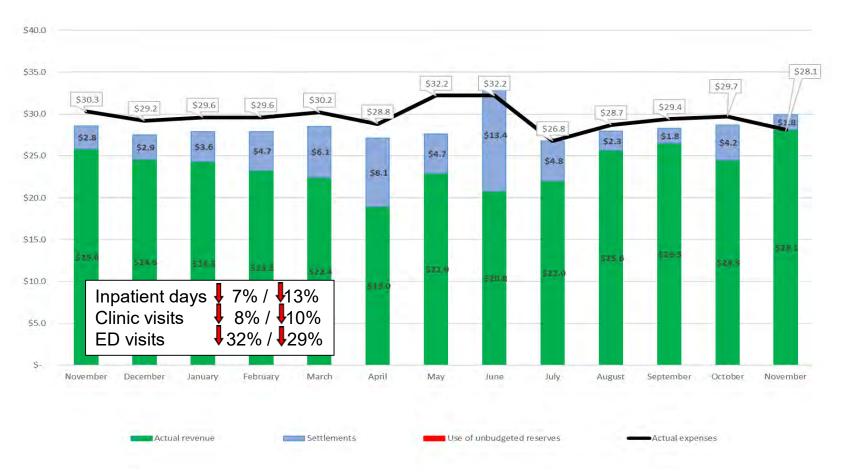
- FTE over budget due to new screeners
- COVID pandemic impact on patient
 volumes 28% reduction in patient revenue
- ACE outside medical costs

Full Year FY21 Projection: The FY21 budget projected a \$13.4 million gap, of which \$3.1 million would be covered by fund balance reserves, equaling a \$257k loss each month, and the remaining \$10.3 million would be covered by cost report settlement reserves. The additional \$16 million of PRIME backfill into the QIP and higher than expected funding from GPP and FFS reimbursement rates help mitigate challenges with the execution of operating budget initiatives as a result of the pandemic.

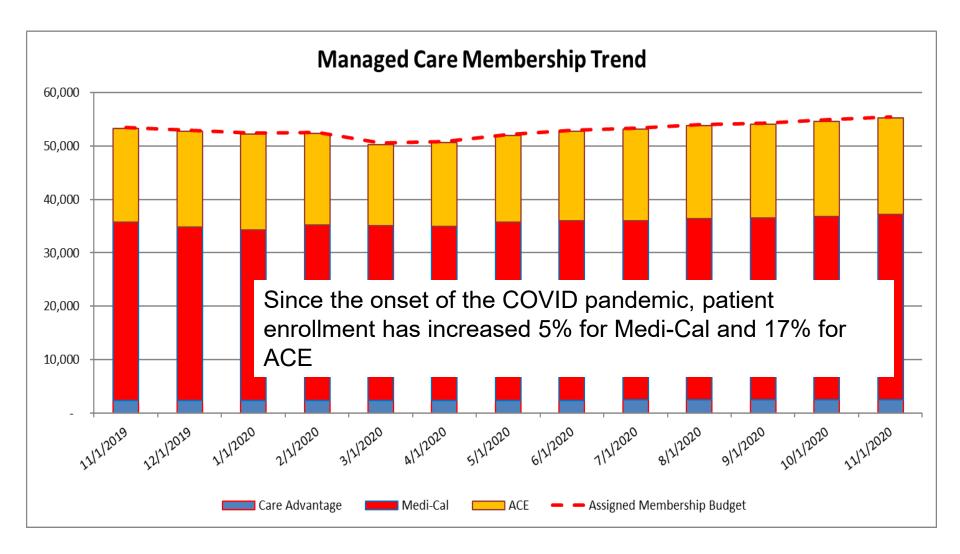
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FY 20-21 Structural Deficit Trend

SMMC's structural deficit continues as revenue sources from on-going operations and supplemental programs cannot keep pace with the cost structure. Cost report and supplemental program settlements have partially mitigated these factors for the past 12 months.





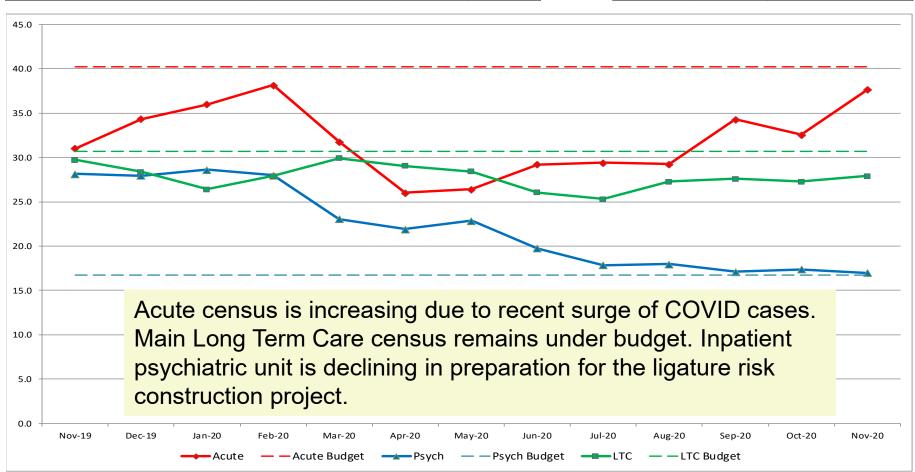




San Mateo Medical Center Inpatient Days November 30, 2020

		МО	NTH	
	Actual	Budget	Variance	Stoplight
Patient Days	2,476	476 2,650 (174) -7%		-7%

	YEAR TO	DATE				
Actual Budget Variance Stopligh						
11,798	13,516	(1,718)	-13%			

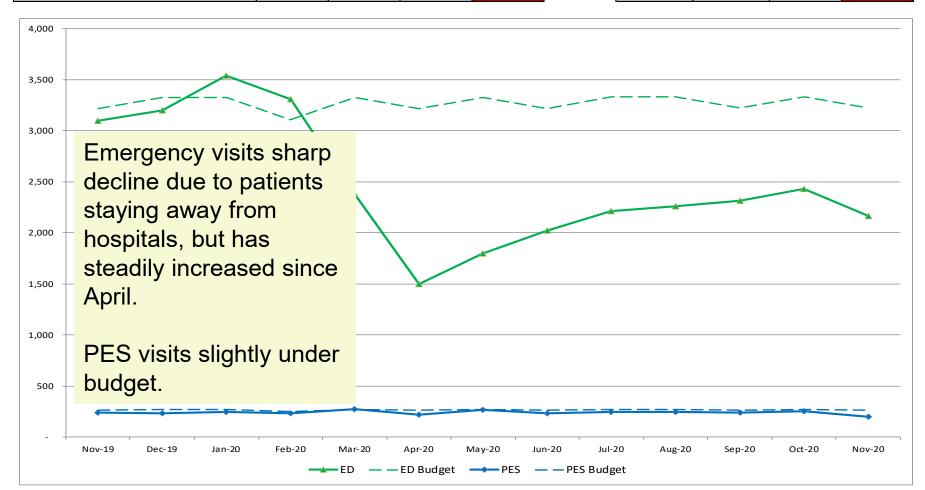




San Mateo Medical Center Emergency Visits November 30, 2020

		MO	NTH	
	Actual	Budget	Variance	Stoplight
ED Visits	2,360 3,488 (1,128) -329			

I		YEAR TO	DATE				
	Actual Budget Variance Stoplight						
	12,564	17,787	(5,223)	-29%			

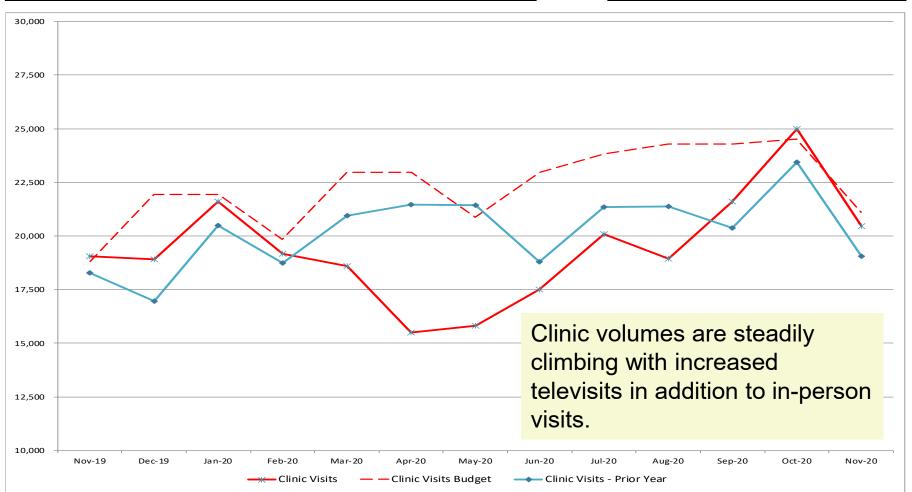




San Mateo Medical Center Clinic Visits November 30, 2020

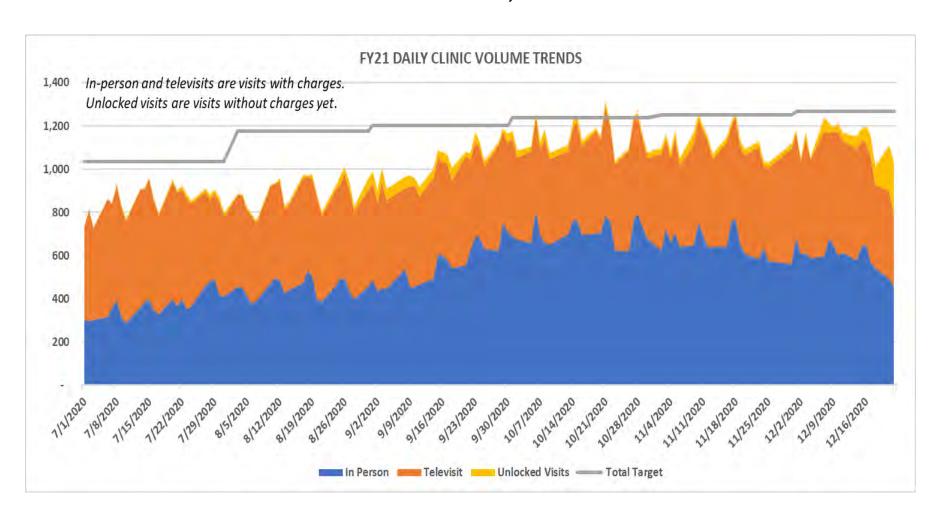
		MO	NTH	
	Actual	Budget	Variance	Stoplight
Clinic Visits	20,448	21,107	(659)	-3%

	YEAR TO	DATE	
Actual	Budget	Variance	Stoplight
106,075	118,021	(11,946)	-10%





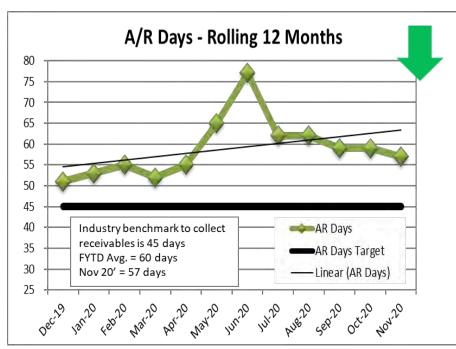
San Mateo Medical Center Clinic Telehealth Visits November 30, 2020

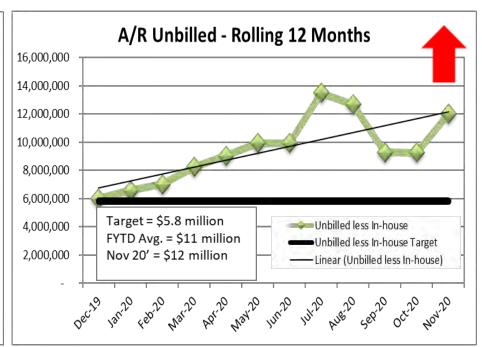


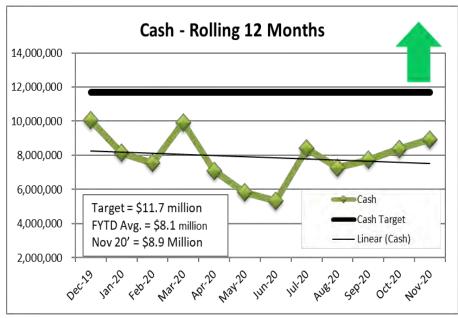
Clinic televisits have increased from an average of 6% of total visits pre-COVID to an average of 70% since March 16th, with a high of 78%. In-person visits are steadily climbing.

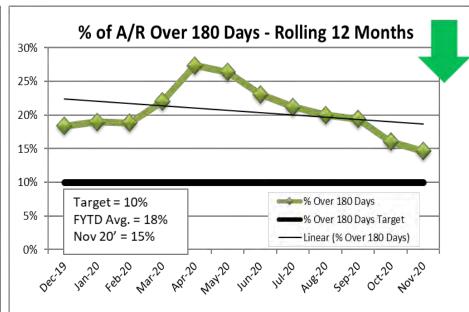


Key Performance Indicators

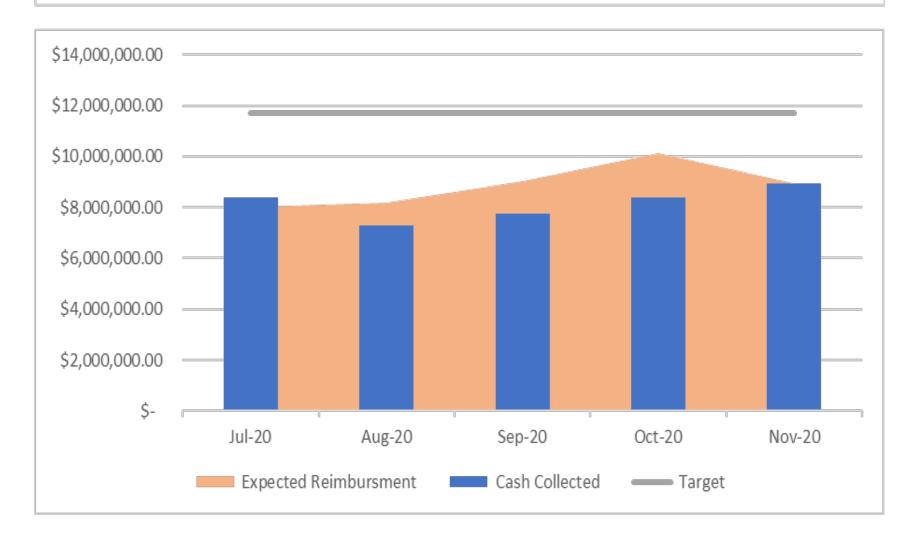








Expected Monthly Cash During COVID







QUESTIONS?

APPENDIX



San Mateo Medical Center Income Statement November 30, 2020

		IOM	NTH			YEA	≀ TO	DATE
	Actual	Budget	Variance	Stoplight	Actual	Budget		Variance
	Α	В	С	D	Е	F		G
Income/Loss (GAAP)	1,828,978	(257,335)	2,086,313		(992,	997) (1,286,6	77)	293,68
HPSM Medi-Cal Members Assigned to SMMC	34,636	33,069	1,567	5%	170,	566 165,3	44	5,222
Unduplicated Patient Count	61,168	68,606	(7,438)	-11%	61,	168 68,6	06	(7,43
Patient Days	2,476	2,650	(174)	-7%	11,	798 13,5	16	(1,718
ED Visits	2,360	3,488	(1,128)	-32%	12,	564 17,7	87	(5,22
Surgery Cases	187	241	(54)	-22%	!	904 1,3	90	(480
Clinic Visits	20,448	21,107	(659)	-3%	106,	075 118,0	21	(11,94
Ancillary Procedures	56,662	62,054	(5,392)	-9%	294,	349 356,8	40	(61,99
9 Ancillary Procedures 56,662 62,054 (5,392) -9% 294,849 356,840 (61,991) -17								
cute Administrative Days as % of Patient Days	0.0%	16.0%	16.0%	100%	(.0% 16	0%	16.0
							_	
sych Administrative Days as % of Patient Days	80.0%	80.0%	0.0%	0%	61	.4% 80	0%	18.6
Days that do not qualify for inpatient status)								
Pillar Goals	1							
Revenue PMPM	140	131	9	7%			31	(19
Operating Expenses PMPM	309	296	(13)	-4%		311 2	96	(1
11	4 4-0	4 400	(0)	40/			T	
Ill Time Equivalents (FTE) including Registry	1,170	1,162	(8)	-1%	1,	146 1,1	62	10



San Mateo Medical Center Income Statement November 30, 2020

	MONTH			
	Actual	Budget	Variance	Stoplight
	Α Α	В	С	D D
Inpatient Gross Revenue	13,283,554	13,856,510	(572,955)	-4%
Outpatient Gross Revenue	18,967,437	30,643,909	(11,676,472)	-38%
Total Gross Revenue	32,250,991	44,500,419	(12,249,427)	-28%
Patient Net Revenue	11,972,103	12,241,179	(269,076)	-2%
Net Patient Revenue as % of Gross Revenue	37.1%	27.5%	9.6%	35%
			· ·	
6 Capitation Revenue	353,428	379,538	(26,110)	-7%
Supplemental Patient Program Revenue	10,868,017	9,855,225	1,012,793	10%
(Additional payments for patients)	-	•		
Total Patient Net and Program Revenue	23,193,548	22,475,942	717,606	3%
Other Operating Revenue	1,015,209	905,920	109,289	12%
(Additional payment not related to patients)				
	, ,			
Total Operating Revenue	24,208,758	23,381,862	826,895	4%



San Mateo Medical Center Income Statement November 30, 2020

	MONTH				YEAR TO DATE				
	Actual	Budget	Variance	Stoplight		Actual	Budget	Variance	Stopligh
	Α	В	С	D	-	E	F	G	Н
Operating Expenses									
Salaries & Benefits	16,275,911	17,390,063	1,114,152	6%		83,329,286	86,950,317	3,621,031	4%
2 Drugs	819,410	723,499	(95,910)	-13%		5,165,657	3,617,497	(1,548,160)	-43%
Supplies	959,957	944,631	(15,326)	-2%		4,249,466	4,723,153	473,687	10%
Contract Provider Services	3,741,438	3,490,050	(251,388)	-7%		17,543,036	17,450,249	(92,787)	-1%
Other fees and purchased services	4,664,990	5,009,709	344,719	7%		23,926,785	25,048,546	1,121,761	4%
Other general expenses	441,215	433,916	(7,299)	-2%		2,554,386	2,169,579	(384,807)	-18%
Rental Expense	198,280	209,620	11,340	5%		1,035,530	1,048,098	12,569	1%
Lease Expense	773,407	773,407	-	0%		3,867,033	3,867,033	-	0%
Depreciation	224,302	271,443	47,141	17%		1,103,254	1,357,215	253,961	19%
Total Operating Expenses	28,098,909	29,246,337	1,147,428	4%		142,774,432	146,231,687	3,457,255	2%
Operating Income/Loss	(3,890,151)	(5,864,475)	1,974,323	34%		(29,788,447)	(29,322,374)	(466,072)	-2%
Non-Operating Revenue/Expense	415,244	303,254	111,990	37%	Г	2,276,024	1,516,271	759,753	50%
	,	333,231	,		_	_,_, _,,,	-,,		
Contribution from County General Fund	5,303,885	5,303,885	(0)	0%		26,519,425	26,519,425	(0)	0%
Total Income/Loss (GAAP)	1,828,978	(257,335)	2,086,313		Γ	(992,997)	(1,286,677)	293,681	
(Change in Net Assets)					_				



COVID Financial Impact Summary

	March	April	May	June	July	August	September	October	November
Revenue loss	\$2,376,000	\$4,347,000	\$4,766,310	\$3,545,000	\$2,578,000	\$1,427,000	\$ 1,189,000	\$ 304,000	\$ 282,000
Expenses:									
Staffing	1,622,000	3,758,000	3,840,000	3,061,000	1,805,000	1,935,000	1,940,000	3,422,000	1,605,000
Supplies	114,000	79,000	79,000	280,000	-	128,000	180,000	454,000	251,000
IT	404,000	-	-	-	-	-	-	-	-
Other Prof. Fees	_	-	-	-	-	113,000	101,000	122,000	115,000
Total expenses	2,140,000	3,837,000	3,919,000	3,341,000	1,805,000	2,176,000	2,221,000	3,998,000	1,971,000
Total Losses due	•								
to COVID	4,516,000	8,184,000	8,685,310	6,886,000	4,383,000	3,603,000	3,410,000	4,302,000	2,253,000

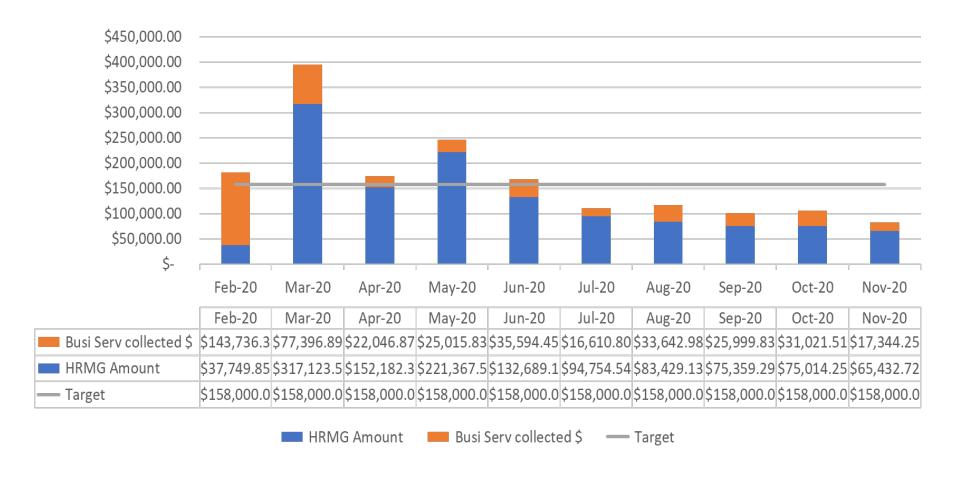
Note: DPW costs for COVID related construction costs are not yet included

Total losses to date = \$46M

COVID-19 Federal Funds - \$13.7M to SMMC

Description	Total Amount Allocated	SMMC \$				
Provider Relief Fund	\$50B General Allocations	\$3.5M Received				
CARES/HCE Act - \$175 billion	\$22B High Impact Providers	\$4.95M Received (July)				
OAIREONTOL Act - \$173 billion	\$11.1B Rural Providers	\$207K Received				
	\$4.9B SNFs	\$913K Received				
Accelerated Medicare Payments	·					
Advance payment for Medicare claims authorized by the CARES Act	Advance Payments	\$3.1M Received Repayment Required				
FY2020 CARES Supplemental Fund Funding for supplemental awards to Health Centers with HRSA grants	\$1.32B	\$881K Awarded to Health Care for the Homeless/Farmworkers				
FY2020 Coronavirus Supplemental Fund Funding for supplemental awards to Health Centers with HRSA grants	\$100M	\$58K Awarded to Health Care for the Homeless/Farmworkers				
State Hospital Association Grants \$50 million	\$4.2M to California Hospitals	\$7.3K Received				

HRMG and Business Services Collections (No Bad Debt)



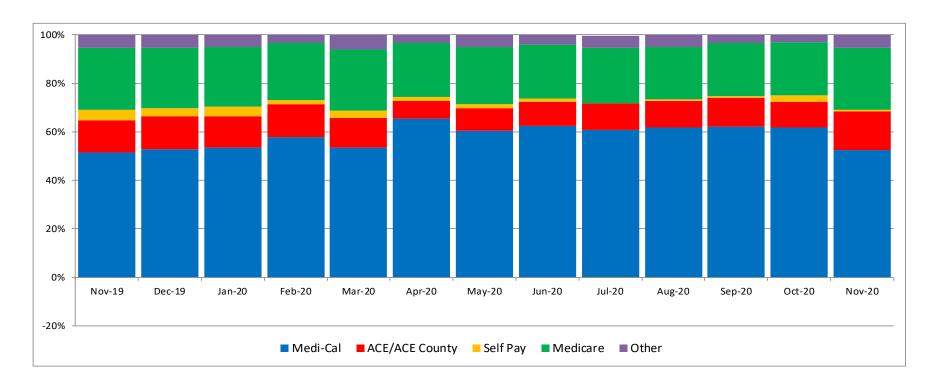
SMMC contracted with Healthcare Revenue Management Group to support SMMC's Business Services unit with collections of patient self-pay balances. March represents the first full month of HRMG's collection activities.



San Mateo Medical Center Payer Mix November 30, 2020

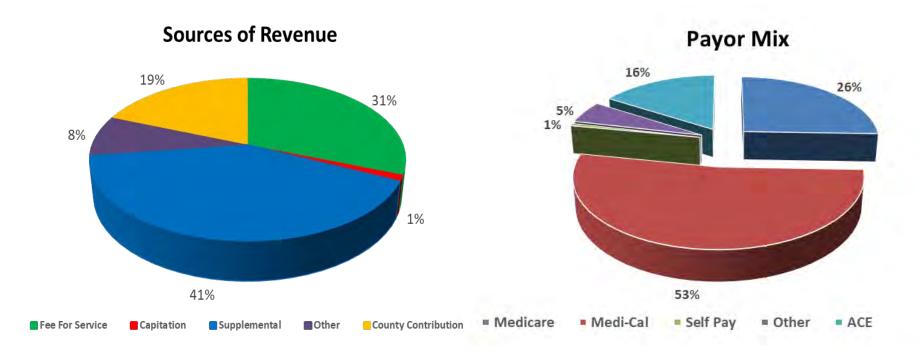
	MONTH				
	Actual	Budget	Variance	Stoplight	
Payer Type by Gross Revenue	Α	В	С	D	
Medicare	25.5%	21.0%	4.5%		
Medi-Cal	52.5%	58.0%	-5.5%		
Self Pay	0.6%	2.0%	-1.4%		
Other	5.5%	5.0%	0.5%		
ACE/ACE County	15.9%	14.0%	1.9%		
Total	100.0%	100.0%			

YEAR TO DATE						
Actual	Budget	Variance	Stoplight			
Е	F	G	Н			
22.8%	21.0%	1.8%				
59.8%	58.0%	1.8%				
0.9%	2.0%	-1.1%				
4.3%	5.0%	-0.7%				
12.2%	14.0%	-1.8%				
100.0%	100.0%					





Revenue Mix



Health Plan of San Mateo (HPSM) represents 28% of our Operating Revenue

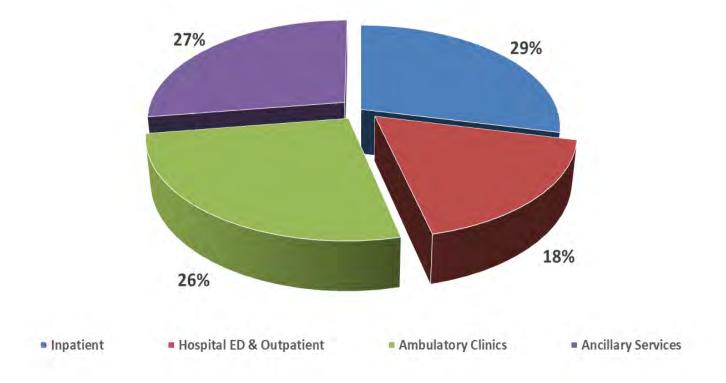
- Medi-Cal Managed Care and Medicare Managed Care FFS
- ➤ Medi-Cal PCP Capitation

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.

NO commercial contracts

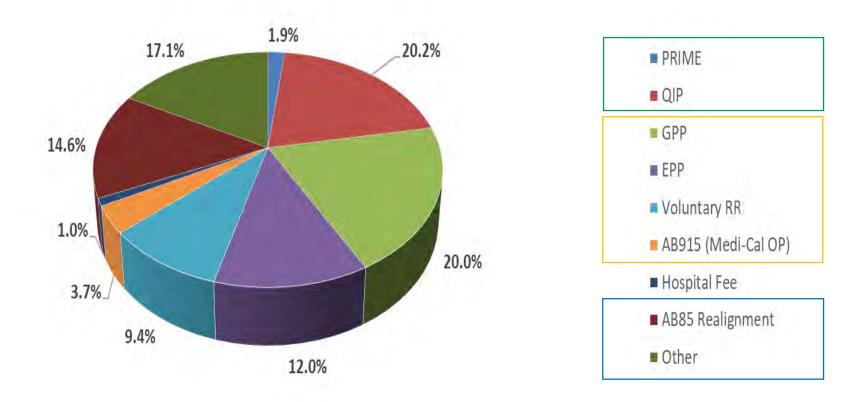


Revenue Mix by Service Line





Supplemental Revenue Mix



- Value-Based programs represent 22.1% of our Supplemental Revenue
- Volume-Based programs represent 77.9% of our Supplemental Revenue





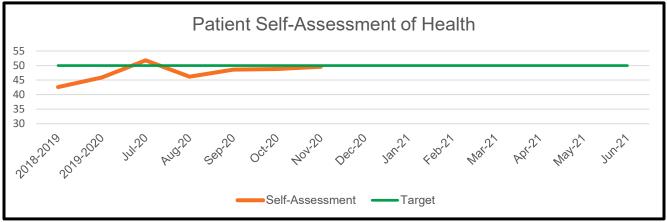
CEO REPORT

January 2021

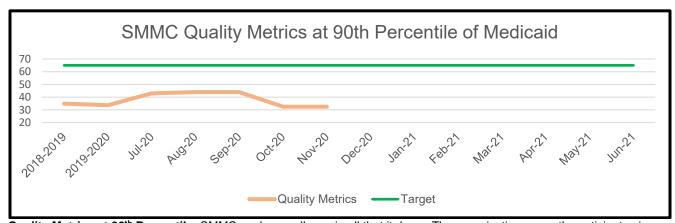
EXCELLENT CARE METRICS



Monthly Harm Events: Measures all instances of patient harm or staff harm including delays in care, falls, medication errors, surgical infections, catheter associated urinary infections, central line associated blood stream infections, other preventable staff and patient injuries. **Lower is better.**



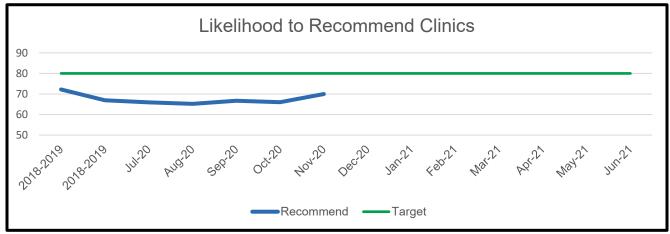
Patient Self-Assessment of Health: All Primary Care patients receive an experience survey. One question asks them to rate their health from poor to excellent. This is the percentage that rate their health as very good or excellent. Higher is better.



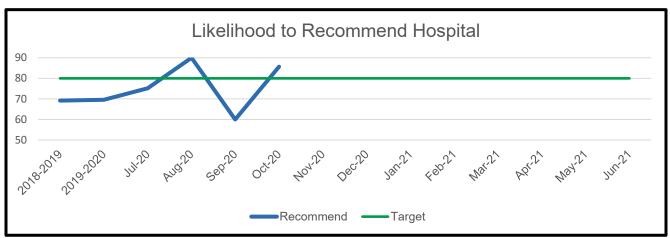
Quality Metrics at 90th **Percentile:** SMMC seeks excellence in all that it does. The organization currently participates in a number of pay for performance programs including PRIME, QIP and the Health Plan of San Mateo Pay for Performance Program. This metric measures the percentage of quality metrics in which the SMMC performance is equal to or better than the 90th percentile of Medicaid nationally. **Higher is better.**



PATIENT CENTERED CARE METRICS



Likelihood to Recommend Clinics: Percentage of patients who gave SMMC the highest score (9 or 10) on the patient experience survey question, "How likely are you to recommend this clinic to friends and family?" **Higher is better.**



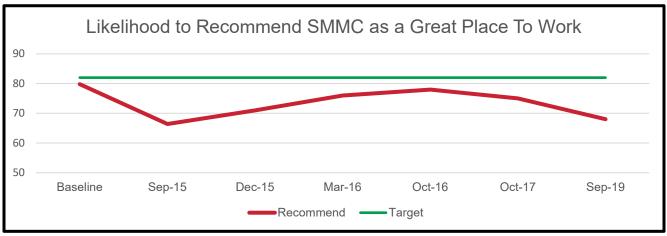
Likelihood to Recommend Hospital: Percentage of patients who gave SMMC the highest score (9 or 10) on the patient experience survey question, "How likely are you to recommend this hospital to friends and family?" **Higher is better.**



Ambulatory Access: Number of days until the third available appointment for established patients in Primary Care and for new consults in Specialty Services. The third next available appointment is a validated measure of patient access. **Lower is better.**

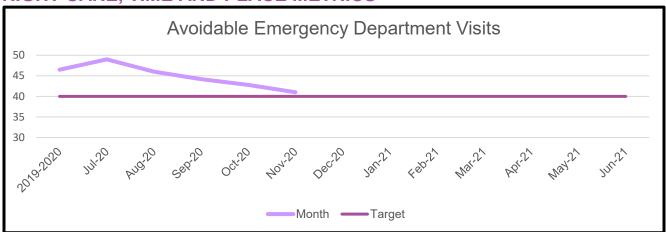


STAFF ENGAGEMENT METRICS



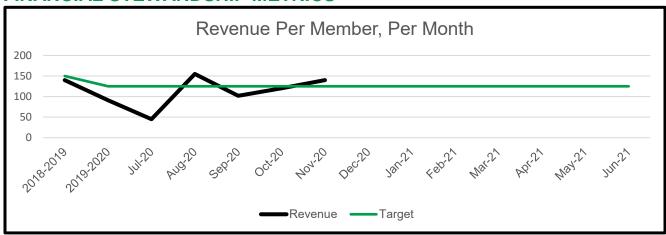
Likelihood to Recommend SMMC: Percentage of staff who agree or strongly agree that they would recommend SMMC as a great place to work. Measured using the annual Blessing White staff engagement survey. **Higher is better.**

RIGHT CARE, TIME AND PLACE METRICS



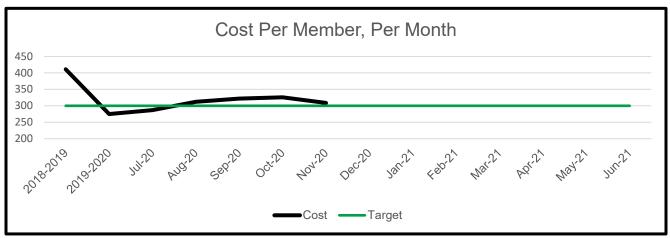
Potentially Avoidable ED Visits: Percentage of emergency department visits by established SMMC primary care patients where the discharge diagnosis is one that traditionally could have been treated in an outpatient setting rather than the emergency department. **Lower is better.**

FINANCIAL STEWARDSHIP METRICS

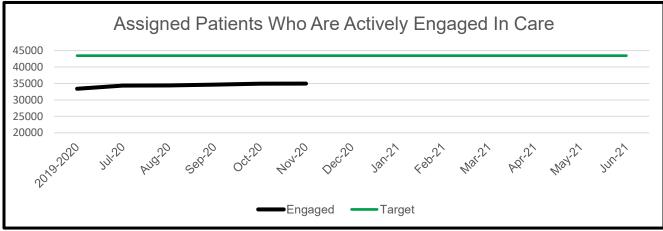


Revenue Per Member, Per Month: Total patient revenue divided by total number of assigned members. Higher is better.





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



Assigned and Engaged: SMMC has approximately 52,000 patients assigned to it through the Health Plan of San Mateo. This metric measures the number of those assigned patients are actively engaged in care. **Higher is better.**



STRATEGIC UPDATES, RECOGNITIONS & AWARDS



Pictured clockwise from top left: (1) Dr. Suja Georgie, hospitalist was our first staff person vaccinated by Michele Medrano, RN. (2) Joel Brown, Emergency Room RN, was the second staff person vaccinated by Charity Barcenas, RN. (3) The vaccination clinic team. (4) Rachel Daly, Respiratory Therapist, vaccinated by Michele Medrano.

SMMC's COVID-19 Vaccination Clinic Underway

On Friday, December 18, SMMC's Infection Control team launched the COVID-19 staff vaccination program, which was designed based on guidance from the California Department of Public Health. The team, along with staff who volunteered to help vaccinate colleagues, vaccinated 40 frontline staff during the first clinic. By Monday, January 4, it is expected they will have vaccinated more than 530 nurses, doctors, respiratory therapists, and other front-line staff in our acute care and skilled nursing settings. Feedback from staff has been positive:

- "My experience was great. It went smoothly and efficiently, and I felt safe and cared for." Katalin Szabo, MD.
- "I'm thankful for the opportunity to volunteer. Vaccinating our frontline team was a true honor.
 Getting vaccinated gave me a sense of hope. Thank you to our leaders and Infection Control staff
 for ensuring a successful COVID-19 vaccination plan for SMMC. I am ready to share the knowledge
 and expertise to vaccinate our patients." Charity Barcenas, RN.
- "Positive feedback from the Emergency Department on their vaccine clinic experience. Strong work!" Serena Lee, MD.

The week of January 4th we will begin vaccinating additional ancillary and clinic staff. We are also preparing for patient vaccination. I want to thank Michele Medrano, Infection Control Manager, and Ava Carter, Safety Officer, who are leading SMMC's COVID-19 Vaccination Task Force, and the countless leaders and staff who are working tirelessly to make sure people are vaccinated quickly and safely as supplies come in.







(Pictured above: Members of the Peninsula Harley Owners Group (HOGs) present SMMC Chief Operating Officer, Robert Blake, with a donation to support toys for SMMC pediatric patients)

<u>December and the HOGs Deliver Santa to SMMC:</u> Although the COVID-19 Pandemic meant they could not do their usual Toy Drive, the Peninsula chapter of the Harley Owners Group (HOGs) partnered with the San Mateo County Health Foundation to ensure that Santa still found his way to SMMC. The HOGs donated \$3200 to support the purchase of toys for SMMC pediatric patients. The San Mateo County Health Foundation has pledged to match that donation as well. Thank you to the HOGs for their ongoing commitment to the Medical Center and its patients.

SMMC Antibiotic Stewardship Program Receives Highest State Recognition – The San Mateo Medical Center Antibiotic Stewardship Program was recognized by the California Department of Public Health with Gold Status on its Antimicrobial Stewardship Honor Roll. The goals of the ASP Honor Roll are to "promote optimal use of antimicrobials, prevent emergence of antimicrobial resistance and C. difficile infections, and to showcase California healthcare facility ASP that not only follow national guidelines, but also demonstrate outcomes and engage their local healthcare community." This is a tremendous honor that recognizes a collaborative effort across the hospital, clinics and skilled nursing and partnerships between the pharmacy, quality and infectious disease leaders. Thank you to everyone who has made this recognition possible, especially Dr. Vivian Levy who has helped to shepherd the efforts.



2020 ACCOMPLISHMENTS

As we close out 2020, we recognize that it has been an incredibly challenging year, but even in the face of those challenges much has been accomplished and it is important that we take the time to celebrate.

COVID-19

- Treated over 1200 COVID-19 positive patients including over 250 patients requiring admission to the hospital.
- Performed more than 6700 COVID tests
- Provided patients with cutting edge therapies including Remdesivir and Convalescent Plasma
- Partnered with Stanford Health to ensure SMMC patients have access to potential clinical trials involving new COVID-19 therapies and vaccines
- Staff worked to acquire and distribute iPads, cell phones and other materials so patients in isolation could communicate with loved ones.
- Quickly adapted Ambulatory workflows to allow over 70% of clinic visits to be performed by telehealth. This was followed by the implementation of safe in-person workflows so that now patients can receive care through the modality that best meets their needs.
- Established telehealth workflows in Rehabilitative Services
- Implemented new screening protocols at all facilities to promote safety
- Erected two overflow tents on the 39th avenue campus
- Expanded and reorganized Ambulatory Social Work resources to meet COVID-19 needs.
- Established curbside COVID-19 testing and immunization services at 39th avenue campus leading to over 3500 vaccinations and 1500 COVID-19 tests. Now expanding to other sites including Fair Oaks Health Center
- Established COVID-19 SharePoint site to quickly share updated data and workflows (more than 17,000 views as of 12/15/2020).
- Launched virtual/online psychotherapy groups and wellness classes in English and Spanish.
- Maintained adequate supplies of Personal Protective Equipment (PPE)



EXCELLENT CARE

- SMMC Skilled Nursing Services were recognized by Newsweek Magazine as one of the top nursing homes in California
- SMMC Skilled Nursing Services were awarded an overall four-star rating by CMS in its five-star rating system.
- SMMC Ambulatory Services were recognized with a Quality Leaders Award by the California Health Care Safety Net Institute for their team-based approach to telehealth implementation.
- SMMC Antibiotic Stewardship Program recognized with Gold Status on the state's Antimicrobial Stewardship Honor Roll.
- San Mateo County Health Care for the Homeless Program recognized as a Health Center Quality Leader by the Health Resources & Services Administration (HRSA)
- Screened over 200 assigned patients for colon cancer prior to establishing care with their clinic.
- Treated 24 patients in a pilot of a multi-disciplinary program across Psychiatry, Psychology and Primary Care for safe benzodiazepine taper. 94% of referred patients remain engaged in treatment or have been successfully transitioned out of the program with reduced doses or no benzodiazepines.
- Reduced number of inpatient falls from 3.39 falls per 1000 patients to 2.02 on medical-surgical unit and from 3.24 per 1000 patients to 0 in the ICU



PATIENT CENTERED CARE

- In honor of PRIDE month, SMMC's Office of Diversity, Equity and Inclusion (DEI) partnered with the Gender Care Clinic to host a two-part series focused on improving care to LGBTQ communities.
- The Creative Arts and Recreational Therapy Department sponsored online music concerts on Units 1A (Skilled Nursing) and 3AB (Acute Psychiatry) as part of the SMMC Music and Healing Concert Series.
- SMMC Skilled Nursing Services continue to perform above national benchmarks on the Pinnacle Survey of Patient Experience.
- The Patient Experience Department started a program to provide Get Well/Birthday notes for patients on 1A, 2AB and the ICU.
- SMMC received a grant from the Center for Care Innovations to support its continued participation in the Resilient Beginnings Network focused on pediatric trauma-and-resilienceinformed care.
- Launched new Biofeedback practice for drug-free treatment of anxiety, stress and headaches with state-of-the-art equipment and provider education
- The San Mateo County Health Care for the Homeless Program distributed approximately \$100K of cold weather supplies to homeless and farmworker clients.

STAFF ENGAGEMENT



- Dr. Maria O'Rourke, RN, FAAN, a renowned pioneer in Nursing Practice, known nationally for her seminal work on professional Nurse Role clarity, joined SMMC Nurses at their January 2020 Shared Decision Making Councils.
- Dr. Ann Marie Silvestri, Dental Program Manager, was featured on PenTV for her pioneering
 efforts to bring dental services to the underserved of San Mateo County. Dr. Silvestri retired in
 2020 after 40 years of County service but has now joined the board of the San Mateo County
 Health Foundation.
- John Jurow, former SMMC Radiology Manager and Deputy Director for Ancillary Services was named CEO of the San Mateo County Health Foundation.
- SMMC Staff and Medical Staff leaders organized a Black Lives Matter Solidarity Event on Juneteenth (June 19, 2020). This was followed by several educational forums sponsored by the SMMC Office of Diversity, Equity and Inclusion.
- SMMC Compliance and Privacy Officer, Gabriela Behn, was featured in the August edition of Compliance Today magazine.
- The following individuals were nominated by their peers for recognition through the County Wellness Leadership Recognition Program:

Diana De La Cruz Leilani Dunton Carlton Mills Charity Barcenas Cyndee (Cynthia) Grivas Sumita Kalra Frances Becker Daniele Levy Melissa Fledderjohann Jennifer Lin Linda Franco Gloria Patane Rachel Daly Malu Cruz Rakhi Singh Stacie Solt

Melissa Fledderjohann, Gloria Patane and Malu Cruz were ultimately selected for recognition

Virtually celebrated Nurse's Day and Hospital Week with the San Mateo County Health
Foundation supporting the latter and facilitating the distribution of over 1300 gift bags to staff in
the hospital and clinics.





RIGHT CARE, TIME AND PLACE

- SMMC teen clinics recognized for leading the Bay Area in access to care for Adolescent populations.
- SMMC Health Care for the Homeless Program received 3-year extension to its core 330
 program grant allowing the program to continue to take key services to those in most critical
 need.
- Optimized Optometry scheduling including real time transfers of patients for Diabetic Retinopathy screening
- SMMC Pediatrics developed new protocols and workflows for developmental assessments including facilitation of referrals to Family Health Services for additional evaluation and care coordination.
- Completed 1200 warm handoffs between Primary Care and Integrated Behavioral Health
- Successfully worked with Correctional Health Services and Health Information Technology to extend the inpatient Soarian Electronic Health Record to Correctional Health
- The San Mateo County Health Care for the Homeless Program provided grant funding to add an Alcohol and Other Drugs (AOD)/Mental Health staff person to the Street & Field Medicine Team
- Successful influenza outreach at several outpatient clinics to ensure appropriate flu vaccination of the community.
- Hired and trained a dedicated Physical Therapist to join the Pain Clinic team

FINANCIAL STEWARDSHIP



- "Clean" external audit of financial statements for 7th year in a row.
- Successful Skilled Nursing Cost Report Settlement
- Successful AB 85 Realignment Cost Report Settlement
- Established daily clinic volume reporting to ensure real time tracking of goals
- Successfully brought in \$19.6M in COVID-19 federal funding
- Established the Denials Mitigation Committee
- Completed several vendor agreements to facilitate self-pay follow-up, bad-debt receivables, and commercial receivables
- Collected 100% of available funds in the Quality Improvement Program (QIP) and PRIME pay for performance programs.
- Completed HPSM Medi-Cal P4P benchmark reconciliation, successfully capturing funds at risk

December 2020

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	23,960 (November 2020)	1.0%	13.1%
SMMC Emergency Department Visits	2,360 (November 2020)	-12%	-29%
New Clients Awaiting Primary Care Appt.	0 (December 2020)	N/A	N/A

Vaccinations Begin in San Mateo County



With San Mateo Medical Center taking delivery of two ultracold freezers (*left*) and its first allotment of the Pfizer vaccine in mid-December, the vaccination process has begun in San Mateo County. The first front-line staff at SMMC received their shots on December 18, with the process to continue over several weeks. Since they arrived before the new freezers were in place, the first vaccines were stored in the Public Health Lab. The new freezers have been installed and tested and are

ready to house the distributions of vaccine that will come over the next few weeks [watch a video about the arrival of the freezers and the first recipients of the vaccine].

The rollout is managed by County Health's Mass Vaccination Branch, which is led by staff from Family Health Services and operating as part of the Department Operations Center.



County Health started giving shots to medical first responders on December 23rd at the Event Center (*left*). Organized by Emergency Medical Services, the first clinic for paramedics and EMTs provided the Moderna vaccine to 150 firefighters and 30 AMR ambulance staff. Clinics will continue for several days to vaccinate the 1,200 medical first responders who comprise the 911 system of care in San Mateo County [watch a video about the vaccine clinic for paramedics and EMTs].

The Mass Vaccination Branch continues to work with state and local partners on plans to vaccinate residents and staff of long-term care facilities and other groups in the Phase 1a portion of vaccine distribution. As County Health learns the timeline and federal and state guidance on the approach for distribution to the general public, we expect to tailor our outreach and the distribution strategy to assure reaching the most vulnerable communities, acknowledging the troubling history of health care research in communities of color [read our statement] on vaccine equity].

Local High School Student Partners with County Health to Publish iPhone App



As the pandemic worsened in the spring, 15-year-old Alison Soong (*left*) and her family discussed the need to get facial coverings. A student at Crystal Springs Uplands School in Hillsborough, Alison researched everything she could about masks, including the different types of material and configuration and their effectiveness at reducing the spread. She read journal articles and industry reports, and as a budding coder she wondered if she could build an app that would let her share what she's learned to educate the public about the benefits of wearing masks. With information sourced from the American Chemical Society, she developed an iOS app called Mask Genius, but Apple's rules prevented her from publishing it without a government agency partner. Working with Health Information Technology, Alison has now published Mask Genius on the App Store, where it is available for free.

County Acquires Belmont Property for Housing & Treatment Program

Our Common Ground (OCG) has provided residential and outpatient treatment services to over 3,000 individuals with substance abuse and mental health problems in San Mateo County and the greater San Francisco Bay Area since 1988. As a not-for-profit partner of Behavorial Health and **Recovery Services, OCG's** transitional and permanent housing program at 750 El Camino Real in Belmont was at risk once the owner passed away last year. With the support of the Department of Housing and the **County Manager's Office**, the facility has been acquired by the County and rented back to OCG. Our Common Ground also operates two facilities in Redwood City and one in East Palo Alto.