

BOARD OF DIRECTORS MEETING

Monday, February 6, 2023 8:00 AM – 10:00 AM



AGENDA

Board of Directors

Monday, February 6, 2023

8:00 AM

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

In accordance with AB 361, the Board will adopt findings that meeting in person would present imminent risks to the health or safety of attendees of in-person meetings. Consistent with those findings, this 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, ROLL CALL, AND PUBLIC COMMENT

B. PROCEDURAL

Adopt findings pursuant to AB 361 to continue fully teleconferenced board meetings due to health risks posed by in-person meetings.

C. 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

D. REPORT OUT OF CLOSED SESSION

E. PUBLIC COMMENT

Persons wishing to address items not on the agenda

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M. ADJOURNMENT

Agenda

February 6, 2023

F. FOUNDATION REPORT	John Jurow
G. CONSENT AGENDAApproval of:1. December 5, 2022 Minutes	
H. MEDICAL STAFF REPORT Chief of Staff Update	Dr. Steve Hassid
I. ADMINISTRATION REPORTS1. Financial Audit FY 2021/22	Macias Gini & O'Connell Verbal
2. Compliance Report	Dr. CJ KunnappillyVerbal Gabriela Behn
 Full Service Partnership (FSP) Services – Adults and Older Adults 	Louise RogersVerbal Mariana Rocha
4. Financial Report	David McGrewTAB 2
5. CEO Report	Dr. CJ KunnappillyTAB 2
J. COUNTY HEALTH CHIEF REPORT County Health Snapshot	Louise Rogers
K. COUNTY MANAGER'S REPORT	Mike Callagy
L. BOARD OF SUPERVISOR'S REPORT	Supervisor David Canepa

PROCEDURAL





To: San Mateo Medical Center Board

From: Dr. CJ Kunnappilly, CEO

Date: February 6, 2023

Subject: Resolution to make findings allowing continued remote meetings under

Brown Act

RECOMMENDATION:

Adopt a resolution finding that, as a result of the continuing COVID-19 pandemic state of emergency declared by Governor Newsom, meeting in person would present imminent risks to the health or safety of attendees.

BACKGROUND:

On June 11, 2021, Governor Newsom issued Executive Order N-08-21, which rescinded his prior Executive Order N-29-20 and set a date of October 1, 2021 for public agencies to transition back to public meetings held in full compliance with the Brown Act. The original Executive Order provided that all provisions of the Brown Act that required the physical presence of members or other personnel as a condition of participation or as a quorum for a public meeting were waived for public health reasons. If these waivers fully sunsetted on October 1, 2021, legislative bodies subject to the Brown Act would have to contend with a sudden return to full compliance with in-person meeting requirements as they existed prior to March 2020, including the requirement for full physical public access to all teleconference locations from which board members were participating.

On September 16, 2021, the Governor signed AB 361, a bill that formalizes and modifies the teleconference procedures implemented by California public agencies in response to the Governor's Executive Orders addressing Brown Act compliance during shelter-in-place periods. AB 361 allows a local agency to continue to use teleconferencing under the same basic rules as provided in the Executive Orders when certain circumstances occur or when certain findings have been made and adopted by the local agency.

AB 361 also requires that, if the state of emergency remains active for more than 30 days, the agency must make findings by majority vote every 30 days to continue using the bill's exemption to the Brown Act teleconferencing rules. The findings are to the effect that the need for teleconferencing persists due to the nature of the ongoing public health emergency and the social distancing recommendations of





local public health officials. Effectively, this means that local agencies must agendize a Brown Act meeting once every thirty days to make findings regarding the circumstances of the emergency and to vote to continue relying upon the law's provision for teleconference procedures in lieu of in-person meetings.

AB 361 provides that Brown Act legislative bodies must return to in-person meetings on October 1, 2021, unless they choose to continue with fully teleconferenced meetings because a specific declaration of a state or local health emergency is appropriately made. AB 361 allows local governments to continue to conduct virtual meetings as long as there is a gubernatorially-proclaimed public emergency in combination with (1) local health official recommendations for social distancing or (2) adopted findings that meeting in person would present risks to health. AB 361 is effective immediately as urgency legislation and will sunset on January 1, 2024.

DISCUSSION:

Because local rates of transmission of COVID-19 are still in the "substantial" tier as measured by the Centers for Disease Control, we recommend that your Board or Commission avail itself of the provisions of AB 361 allowing continuation of online meetings by adopting findings to the effect that conducting in-person meetings would present an imminent risk to the health and safety of attendees. A resolution to that effect, and directing staff to return each 30 days with the opportunity to renew such findings, is attached hereto.

FISCAL IMPACT:

None

RESOLUTION NO.

RESOLUTION FINDING THAT, AS A RESULT OF THE CONTINUING COVID-19
PANDEMIC STATE OF EMERGENCY DECLARED BY GOVERNOR NEWSOM,
MEETING IN PERSON FOR MEETINGS OF THE SAN MATEO MEDICAL CENTER
BOARD WOULD PRESENT IMMINENT RISKS TO THE HEALTH OR SAFETY OF
ATTENDEES

WHEREAS, on March 4, 2020, the Governor proclaimed pursuant to his authority under the California Emergency Services Act, California Government Code

section 8625, that a state of emergency exists with regard to a novel coronavirus (a

disease now known as COVID-19); and

WHEREAS, on June 4, 2021, the Governor clarified that the "reopening" of California on June 15, 2021 did not include any change to the proclaimed state of emergency or the powers exercised thereunder, and as of the date of this Resolution, neither the Governor nor the Legislature have exercised their respective powers pursuant to California Government Code section 8629 to lift the state of emergency either by proclamation or by concurrent resolution in the state Legislature; and

WHEREAS, on March 17, 2020, Governor Newsom issued Executive Order N-29-20 that suspended the teleconferencing rules set forth in the California Open Meeting law, Government Code section 54950 et seq. (the "Brown Act"), provided certain requirements were met and followed; and

WHEREAS, on September 16, 2021, Governor Newsom signed AB 361 that provides that a legislative body subject to the Brown Act may continue to meet without fully complying with the teleconferencing rules in the Brown Act provided the legislative

body determines that meeting in person would present imminent risks to the health or safety of attendees, and further requires that certain findings be made by the legislative body every thirty (30) days; and,

WHEREAS, California Department of Public Health ("CDPH") and the federal Centers for Disease Control and Prevention ("CDC") caution that the Delta variant of COVID-19, currently the dominant strain of COVID-19 in the country, is more transmissible than prior variants of the virus, may cause more severe illness, and that even fully vaccinated individuals can spread the virus to others resulting in rapid and alarming rates of COVID-19 cases and hospitalizations (https://www.cdc.gov/coronavirus/2019-ncov/variants/delta-variant.html); and,

WHEREAS, the CDC has established a "Community Transmission" metric with 4 tiers designed to reflect a community's COVID-19 case rate and percent positivity; and,

WHEREAS, the County of San Mateo currently has a Community Transmission metric of "substantial" which is the second most serious of the tiers; and,

WHEREAS, the San Mateo Medical Center Board has an important governmental interest in protecting the health, safety and welfare of those who participate in its meetings; and,

WHEREAS, in the interest of public health and safety, as affected by the emergency caused by the spread of COVID-19, the San Mateo Medical Center Board deems it necessary to find that meeting in person would present imminent risks to the

health or safety of attendees, and thus intends to invoke the provisions of AB 361 related to teleconferencing;

NOW, THEREFORE, IT IS HEREBY DETERMINED AND ORDERED that

- 1. The recitals set forth above are true and correct.
- The San Mateo Medical Center Board finds that meeting in person would present imminent risks to the health or safety of attendees.
- 3. Staff is directed to return no later than thirty (30) days after the adoption of this resolution with an item for the San Mateo Medical Center Board to consider making the findings required by AB 361 in order to continue meeting under its provisions.
- 4. Staff is directed to take such other necessary or appropriate actions to implement the intent and purposes of this resolution.

* * * * * *

CONSENT AGENDA

HOSPITAL BOARD OF DIRECTORS MEETING MINUTES

Monday, December 5, 2022 Videoconference Meeting

Board Members Present	Staff Present			
Supervisor Carole Groom	Michelle Lee	Rebecca Archer	Martin Rogers	
Supervisor David Canepa	David McGrew	John Jurow	Valissa Matthewson	
Louise Rogers	Dr. Alpa Sanghavi	Karen Pugh	Suzanne Schmitz	
Dr. CJ Kunnappilly	Dr. Yousef Turshani	Gabriela Behn	Ron Keating	
Dr. Steve Hassid	Dr. Amar Dixit	Enitan Adesanya	Portia Dixon	
Dr. Brita Almog	Peggy Jensen	Tom Collins	Jennifer Papa	
Dr. Gordon Mak	Gina Wilson	Stephen Dean		
Deborah Torres				

ITEM	DISCJUSSION/RECOMMENDATION	ACTION
Call to Order	Supervisor Groom called the meeting to order at 8:00 AM. A quorum was present.	
Procedural	Approval of: 1. Adoption of findings to continue teleconferenced board meetings due to health risks posed by in-person meetings.	The Board unanimously approved the resolution.
Reconvene to Open Session	The meeting was reconvened at 8:19 AM to Open Session. A quorum was present (see above).	
Report out of Closed Session	Medical Staff Credentialing Report for December 5, 2022. QIC Minutes from October 25, 2022. Medical Executive Committee Minutes from November 8, 2022.	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	John Jurow reported on the revenue of the Taste of the County event. SMMC employees and providers received goody bags on behalf of SMMC leadership which were provided by the Foundation. The Foundation also reported on the two lactation rooms which were outfitted for use by patients and staff.	FYI
Consent Agenda	Approval of: 1. Hospital Board Meeting Minutes from November 7, 2022.	It was MOVED, SECONDED and CARRIED unanimously to

		approve all items on
Medical Staff Report Dr. Steve Hassid	Dr. Hassid reported that rates of COVID cases has increased. The latest COVID-19 vaccines are showing to be effective against the new strains of the virus. Approximately 25% have received the bi-virulent and for those 65 and older, 41% have received the new bi-virulent vaccines.	FYI Agenda.
Integrated Electronic Health Record Background and Overview Louise Rogers, Stephen Dean	 Integrated EHR goals: Improve safety, quality, and engagement through person-centered care; Achieve Operational Excellence by standardizing financial processes and improving staff satisfaction and productivity Moving to an enterprise EHR will provide a better quality of care and improve fiscal accountability by integrating financial and clinical operations to ensure accurate classification, charge capture, documentation, coding, and billing 	FYI
	 Why EPIC? Industry-leading EHR vendor SMC Health Clinical Staff Evaluation Single database structure Revenue Cycle Optimization Drives Higher Revenue and Reduces Compliance Risk 	
	 Staffing Needs: Implementation & Support Team Redirect 28 existing Health positions Add 25 new regular full-time FTEs Add 23 new temporary/term positions Term to end at time of system implementation; approx. August 2024 	
Financial Report David McGrew, CFO	The October 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 expressed his deep gratitude to Super Carole Groom for her years of service on the Hospital Board. Other board members took the opportunity to also thank her and wish her a good retirement. Dr. Kunnappilly presented the CEO report which was included in the Board packet and answered questions from the Board.	FYI
County Health Chief Report Louise Rogers	Louise Rogers reported on the re-opening of the Palm Ave detox center. She is glad to see the focus from County leadership on housing the unhoused. Many clients and patients do not have stable housing. Sixty percent of housing vouches has been used by BHRS clients.	FYI

County Executive	No update.	FYI
Officer		
Mike Callagy		
Board of Supervisors	Supervisor Groom spoke about her tenure on the board and as County Supervisor and wished the hospital	FYI
Supervisor Groom	board members well.	

Supervisor Groom adjourned the meeting at 10:00 AM. The next Board meeting will be held on February 6, 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

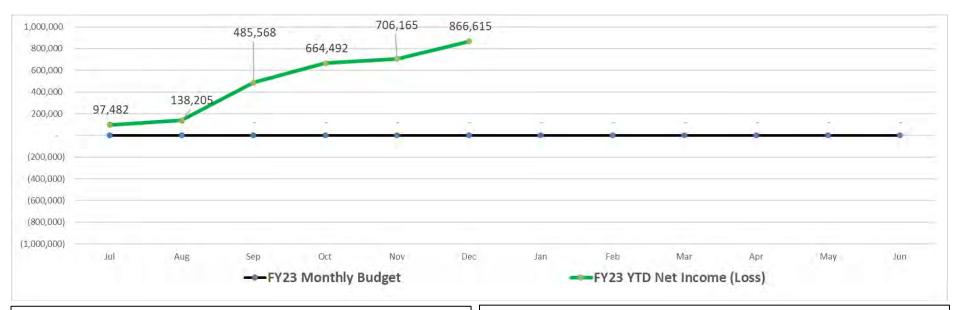
Financial Report: December FY22-23

February 6, 2023

Presenter: David McGrew, CFO



FY22-23 Cumulative YTD Financial Results



Net Income(loss) - Dec \$160K, YTD \$867K

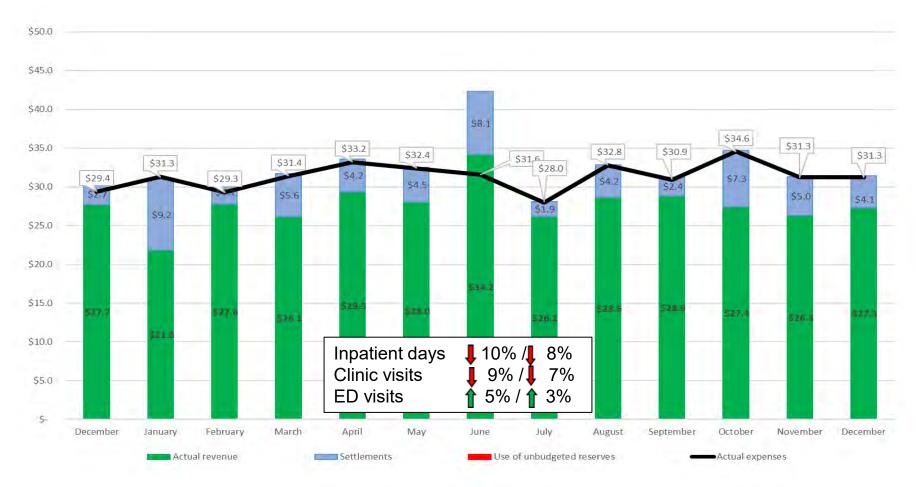
- FTEs 5% favorable
- Salaries & Benefits 17% favorable
- ACE outside medical costs
- FY20 FQHC reconciliation

- Supplies
- Nursing registry

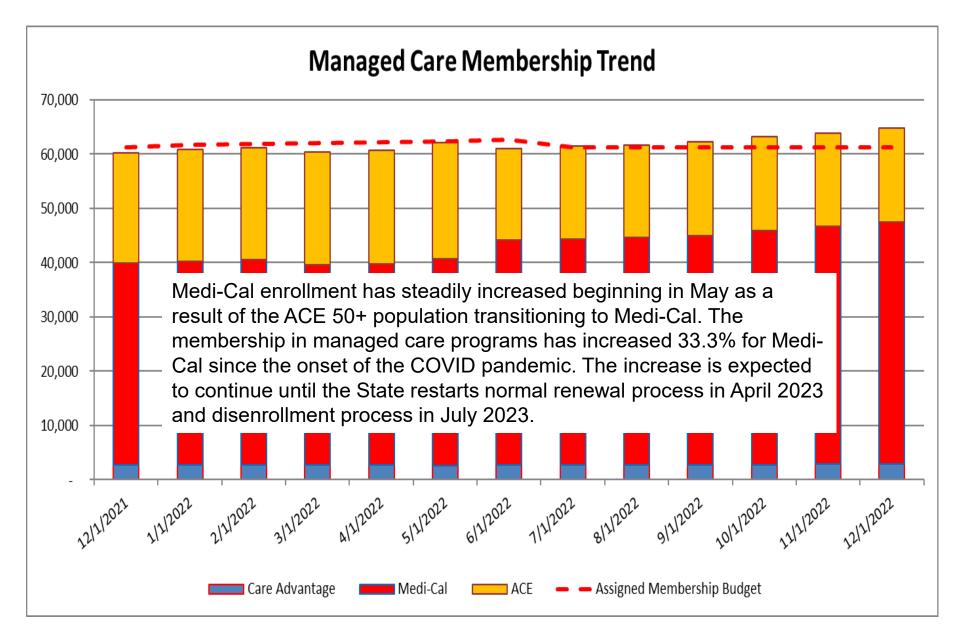
December FY23 Snapshot – December is favorable to budget by \$160K and expected to stay favorable/breakeven for the remainder of the year. ACE outside costs are favorable due to the transition of 50+ population to Medi-Cal. Nursing registry costs continue to be a challenge. Salary costs are expected to increase as vacancies are filled and labor contracts are in full effect. Inpatient acute volume stays at budget amid flu season and placement challenges and Medical ED visits continue to be higher than budget. Clinic visits are 9% below budget for the month. Managed care membership is slightly higher than budget mainly due to Medi-Cal expansion to ACE 50+ population.

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 \$31 million per month and trending close to budget of \$32 million. The spike in June Settlements (blue bar) was due to an unusual number of cost report closures.

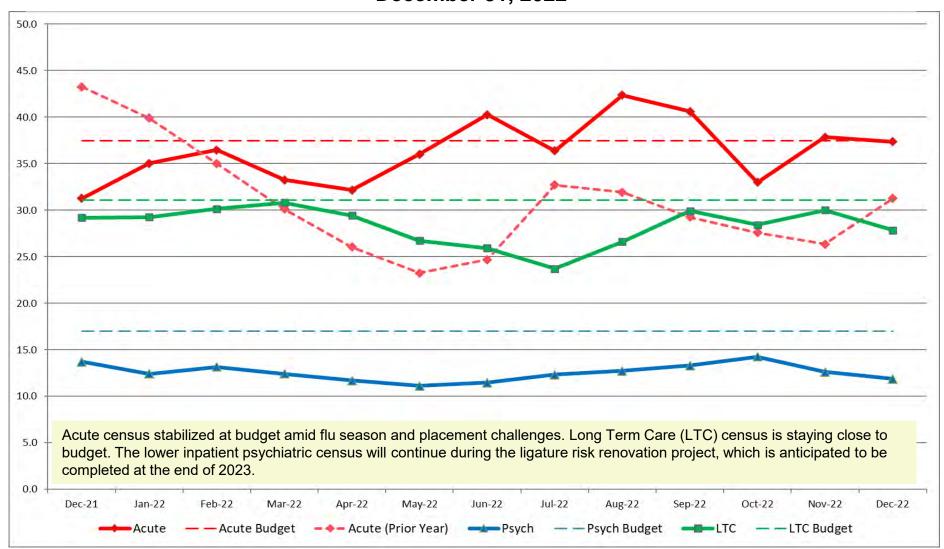








San Mateo Medical Center Inpatient Days December 31, 2022

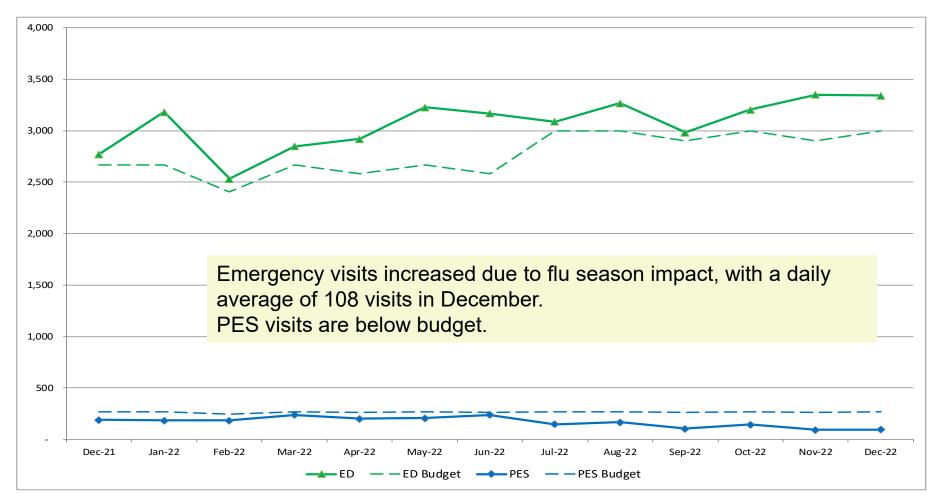




San Mateo Medical Center Emergency Visits December 31, 2022

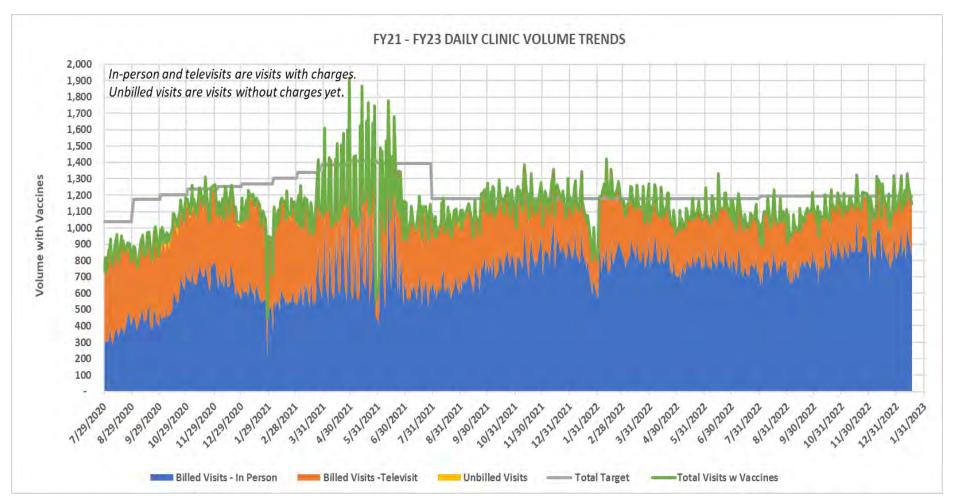
	MONTH						
	Actual Budget Variance Stoplight						
ED Visits	3,438	3,271	167	5%			

YEAR TO DATE								
Actual Budget Variance Stoplight								
19,991	19,412	579	3%					



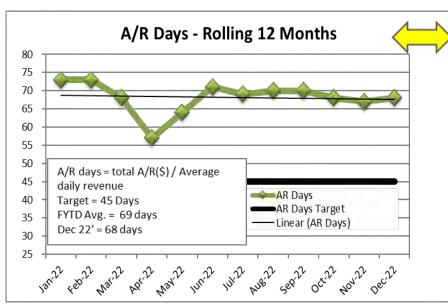


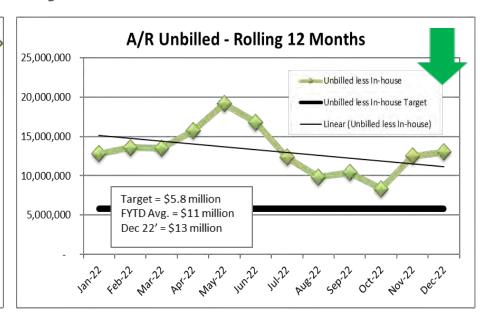
San Mateo Medical Center Clinic Visits December 31, 2022

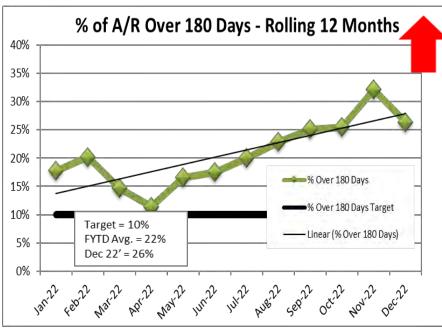


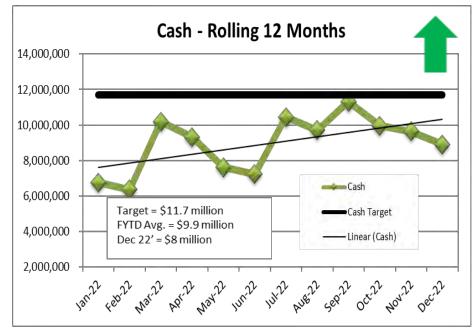
Clinic televisits were 42% of total visits in FY21, hitting a high of 78% early in the pandemic. Televisits are running at 25.0% of total visits in FY23 as more patients are opting for in-person visits. March & April 2021 spikes are due to targeted vaccination events.

Fee-For-Service Revenue - Key Performance Indicators











QUESTIONS?

APPENDIX



San Mateo Medical Center Income Statement December 31, 2022

	MONTH			YEAR TO DATE				
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
	Α	В	С	D	E	F	G	Н
1 Income/Loss (GAAP)	160,450	0	160,450		866,61	5 0	866,615	
2 HPSM Medi-Cal Members Assigned to SMMC	44,605	41,356	3,249	8%	257,10	0 248,136	8,964	4%
3 Unduplicated Patient Count	66,232	65,230	1,002	2%	66,23	2 65,230	1,002	2%
4 Patient Days	2,389	2,652	(263)	-10%	14,44	3 15,739	(1,296)	-8%
5 ED Visits	3,438	3,271	167	5%	19,99	1 19,412	579	3%
7 Surgery Cases	214	283	(69)	-24%	1,33	3 1,670	(337)	-20%
8 Clinic Visits	22,721	25,080	(2,359)	-9%	138,19	7 148,089	(9,892)	-7%
9 Ancillary Procedures	65,485	72,456	(6,971)	-10%	397,40	1 427,907	(30,506)	-7%
10 Acute Administrative Days as % of Patient Days	0.0%	N/A	N/A	0%	0.0	% N/A	N/A	0%
11 Psych Administrative Days as % of Patient Days	89.0%	80.0%	-9.0%	-11%	81.0	% 80.0%	-1.0%	-1%
(Days that do not qualify for inpatient status)								
Pillar Goals								
12 Revenue PMPM	118	135	(17)	-13%	11	4 135	(21)	-15%
13 Operating Expenses PMPM	316	328	12	4%	31	6 328	12	4%
14 Full Time Equivalents (FTE) including Registry	1,138	1,199	61	5%	1,14	8 1,199	51	4%



San Mateo Medical Center Income Statement December 31, 2022

		MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight		Actual	Budget	Variance	Stoplight
	Α	В	С	D		E	F	G	Н
21 Inpatient Gross Revenue	13,400,636	14,144,151	(743,515)	-5%		80,135,629	84,864,906	(4,729,277)	-6%
22 Outpatient Gross Revenue	28,066,168	28,232,137	(165,969)	-1%		167,707,109	169,392,823	(1,685,714)	-1%
23 Total Gross Revenue	41,466,805	42,376,288	(909,484)	-2%		247,842,738	254,257,729	(6,414,991)	-3%
24 Patient Net Revenue	12,037,121	13,211,764	(1,174,643)	-9%		65,004,508	79,270,584	(14,266,076)	-18%
25 Net Patient Revenue as % of Gross Revenue	29.0%	31.2%	-2.1%	-7%		26.2%	31.2%	-4.9%	-16%
26 Capitation Revenue	460,668	389,867	70,801	18%		2,655,352	2,339,199	316,153	14%
27 Supplemental Patient Program Revenue	11,685,657	12,040,224	(354,567)	-3%	Ī	79,269,712	72,241,342	7,028,370	10%
Volume Based (GPP, EPP, VRR, AB915)	5,406,571	5,371,667	34,905	1%		37,408,155	32,230,000	5,178,155	16%
Value Based (QIP, HPSM P4P)	2,891,805	3,820,025	(928,220)	-24%		29,460,534	22,920,152	6,540,382	29%
Other	3,387,280	2,848,532	538,749	19%		12,401,024	17,091,190	(4,690,166)	-27%
Outo	3,307,200	2,070,332	330,743	13/0	ı l	12,701,024	17,031,130	(7,030,100)	2170
28 Total Patient Net and Program Revenue	24,183,445	25,641,854	(1,458,409)	-6%		146,929,572	153,851,125	(6,921,554)	-4%
29 Other Operating Revenue	1,235,331	1,181,890	53,441	5%		6,346,928	7,091,341	(744,413)	-10%
	, ,				, ,				
30 Total Operating Revenue	25,418,776	26,823,744	(1,404,968)	-5%		153,276,500	160,942,467	(7,665,967)	-5%



San Mateo Medical Center Income Statement December 31, 2022

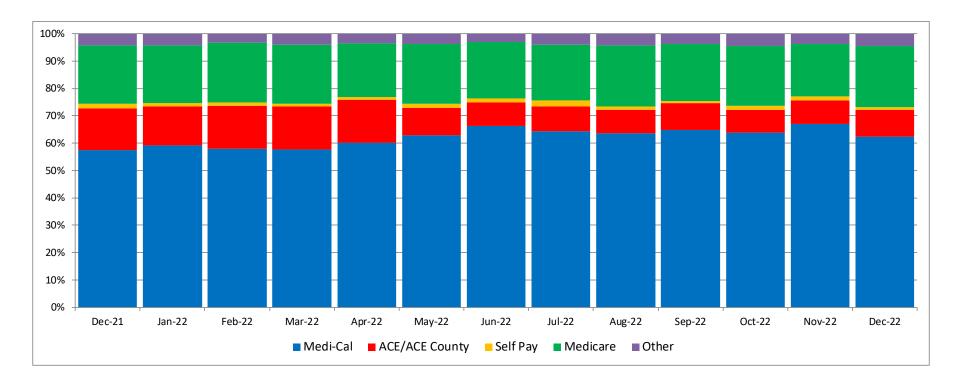
		MON	ITH		YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stopligh
	Α	В	С	D	E	F	G	Н
Operating Expenses								
1 Salaries & Benefits	16,129,808	19,477,553	3,347,745	17%	103,289,564	116,865,320	13,575,756	12%
2 Drugs	1,273,422	1,286,937	13,515	1%	7,205,565	7,721,624	516,059	7%
3 Supplies	1,184,274	952,050	(232,225)	-24%	5,777,587	5,712,299	(65,287)	-1%
4 Contract Provider Services	5,226,082	3,562,085	(1,663,997)	-47%	28,731,455	21,372,511	(7,358,944)	-34%
Registry	1,801,288	540,547	(1,260,741)	-233%	10,590,255	3,243,280	(7,346,975)	-227%
Contract Provider	2,930,403	2,357,106	(573,297)	-24%	15,557,159	14,142,636	(1,414,523)	-10%
ACE Out of Network	421,399	564,839	143,440	25%	2,323,848	3,389,035	1,065,187	31%
Other	72,992	99,593	26,602	27%	260,194	597,560	337,367	56%
5 Other fees and purchased services	5,646,701	5,211,812	(434,889)	-8%	31,510,532	31,270,873	(239,659)	-1%
6 Other general expenses	634,984	729,995	95,011	13%	4,558,038	4,379,971	(178,067)	-4%
7 Rental Expense	166,121	247,893	81,772	33%	1,012,447	1,487,359	474,913	32%
8 Lease Expense	735,826	735,826	0	0%	4,414,958	4,414,958	0	0%
9 Depreciation	290,333	227,938	(62,395)	-27%	1,693,207	1,367,630	(325,576)	-24%
0 Total Operating Expenses	31,287,552	32,432,091	1,144,539	4%	188,193,352	194,592,548	6,399,196	3%
1 Operating Income/Loss	(5,868,776)	(5,608,347)	(260,429)	-5%	(34,916,852)	(33,650,081)	(1,266,771)	-4%
Non-Operating Revenue/Expense	599,797	178,918	420,879	235%	3,206,891	1,073,505	2,133,385	199%
3 Contribution from County General Fund	5,429,429	5,429,429	(0)	0%	32,576,576	32,576,576	(0)	0%
4 Total Income/Loss (GAAP)	160,450	0	160,450		866,615	0	866,615	



San Mateo Medical Center Payer Mix December 31, 2022

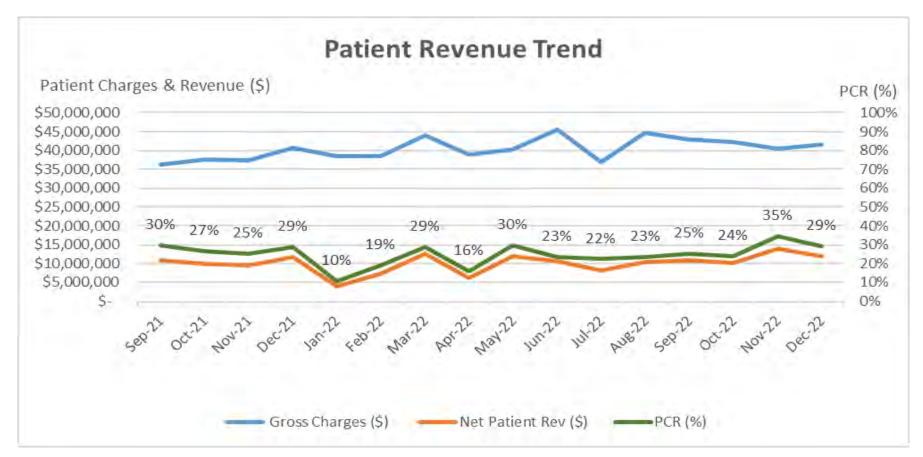
	MONTH						
	Actual	Budget	Variance	Stoplight			
Payer Type by Gross Revenue	Α	В	С	D			
Medicare	22.4%	22.7%	-0.4%				
Medi-Cal	62.4%	58.9%	3.5%				
Self Pay	1.0%	1.6%	-0.5%				
Other	4.5%	4.3%	0.2%				
ACE/ACE County	9.7%	12.5%	-2.8%				
Total	100.0%	100.0%					

YEAR TO DATE				
Actual	Budget	Variance	Stoplight	
E	F	G	Н	
21.2%	22.7%	-1.6%		
64.3%	58.9%	5.5%		
1.4%	1.6%	-0.2%		
4.2%	4.3%	-0.2%		
9.0%	12.5%	-3.6%		
100.0%	100.0%			





Fee-For-Service Patient Revenue Trend

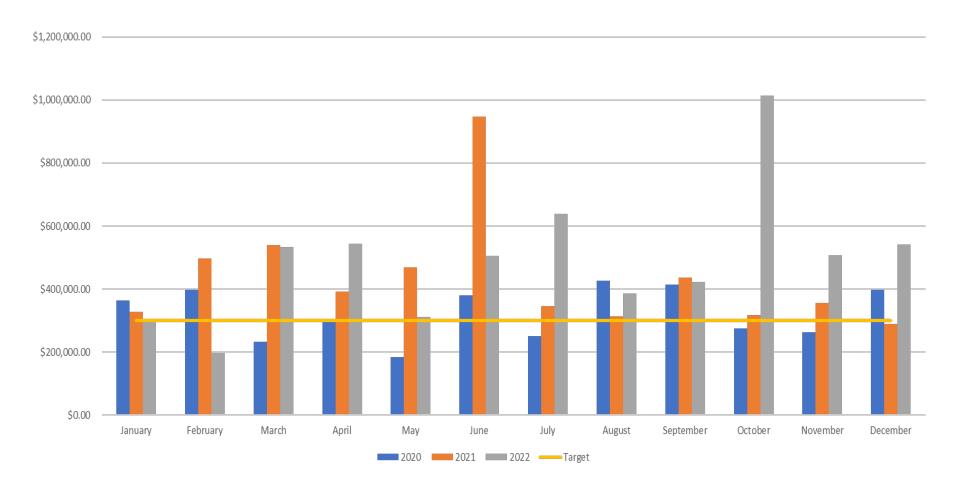


Budgeted PCR 27.5% (FY21), 33.9% (FY22), 31.2% (FY23)

Gross patient revenue is trending up due to the increase in patient volume since late last year and addition of new charge codes for billing compliance. The collection rate (PCR) in FY23 is trending at average 26%. PCR surge in Nov 22 and dips earlier this year was due to one-time adjustments. PCR is expected to remain in mid 20s

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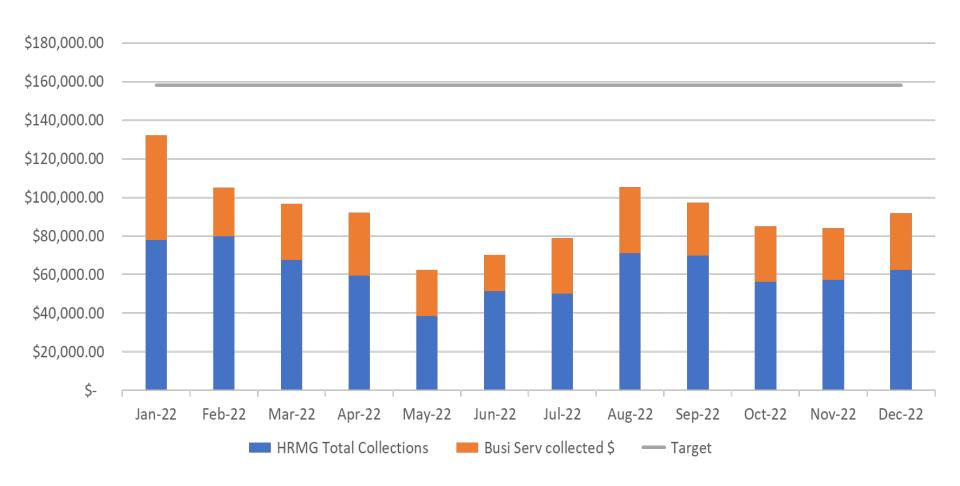
Fee-For-Service Commercial Collections



July 2020 MMX began supporting PFS with Commercial Collections



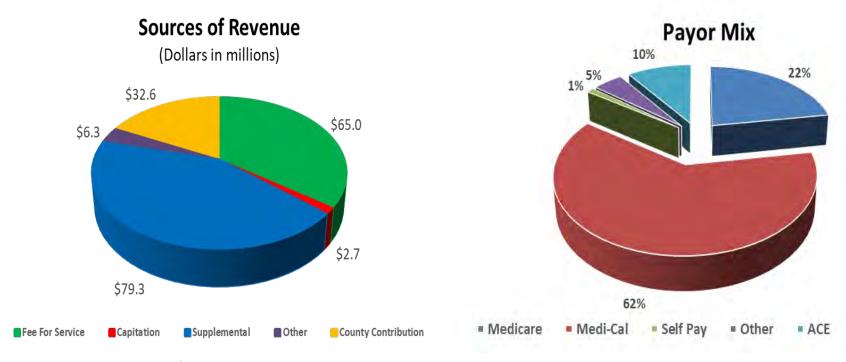
Fee-For-Service Self Pay Collections



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



Revenue Mix



Total YTD Revenue of \$186 million consists of 43% in Supplemental Programs and 35% in Fee For Service

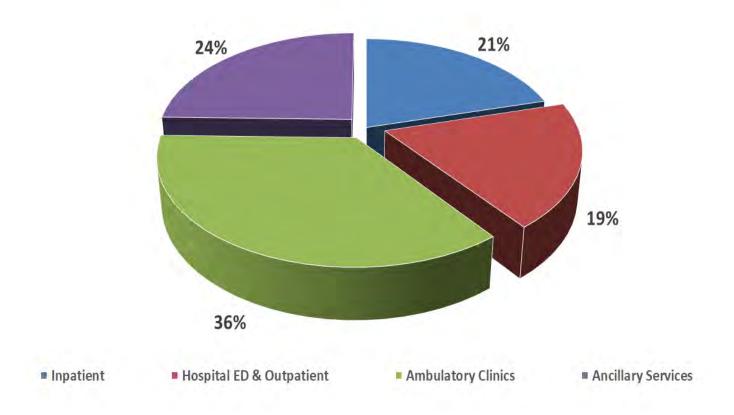
Health Plan of San Mateo (HPSM) represents 37% of our Operating Revenue

- 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.



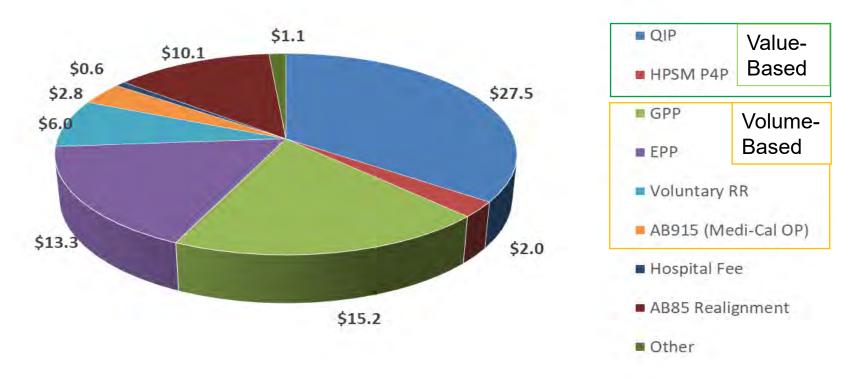
Revenue Mix by Service Line





Supplemental Revenue Mix

(Dollars in millions)

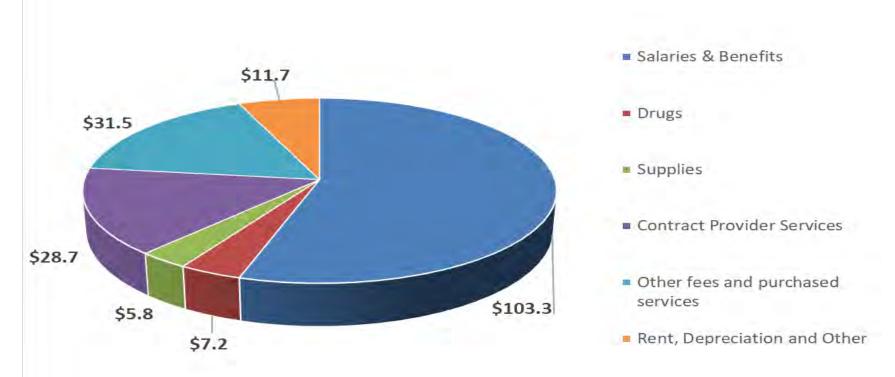


- Value-Based programs, including Capitation revenue, represents 37% of total revenue
- Volume-Based supplemental programs, plus FFS revenue, represent 48% of total revenue



Total Operating Expenses

(Dollars in millions)



Salaries & Benefits represent 55% of total expenses

Personnel costs* represent 70% of total expenses

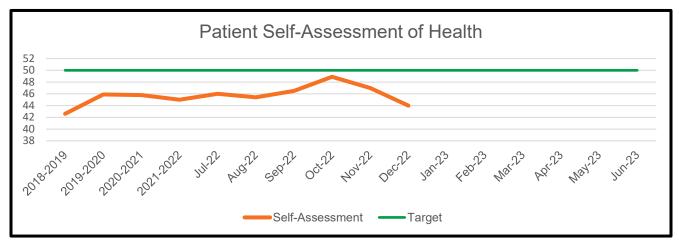
* Personnel costs includes S&B plus Registry/Contract Providers



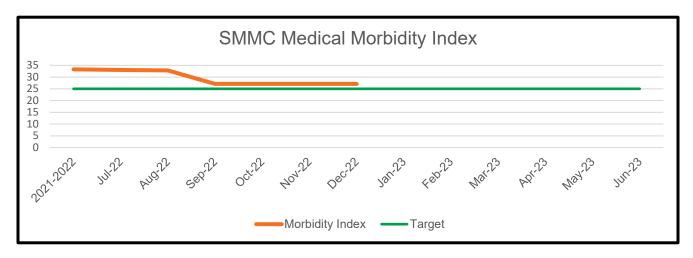
CEO Report February 2023





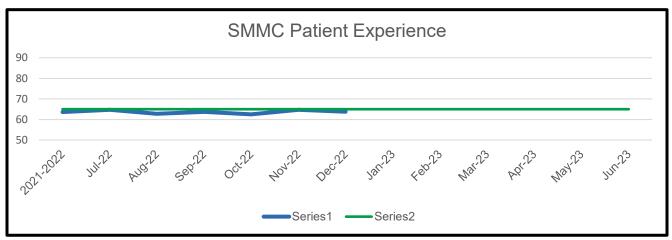


Patient Self-Assessment of Health: All Primary Care patients receive an experience survey. One question asks them to rate their health from poor to excellent. This is the percentage that rate their health as very good or excellent. Higher is better.



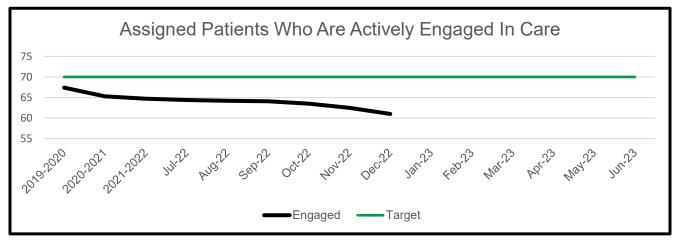
Medical Morbidity Index: This represents the percentage of SMMC patients who meet one or more of the following criteria: Inadequately Controlled Diabetes, Inadequately Controlled Hypertension, Obesity, or a Positive Depression Screen. **Lower is better.**



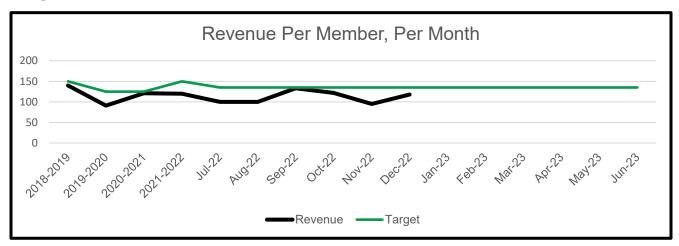


Patient Experience: Percentage of patients who answered affirmatively to the patient experience survey question: "Did the staff work together to meet your needs?" **Higher is better.**

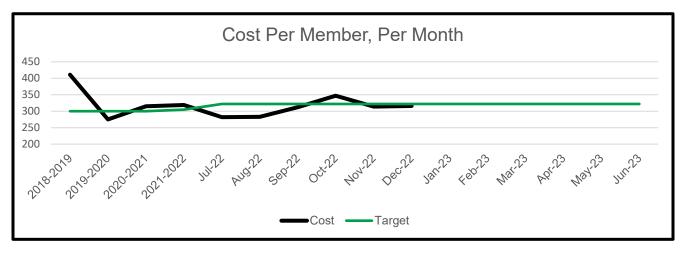




Assigned and Engaged: Percentage of patients assigned to SMMC by the Health Plan of San Mateo who are actively engaged in Care. **Higher is better.**

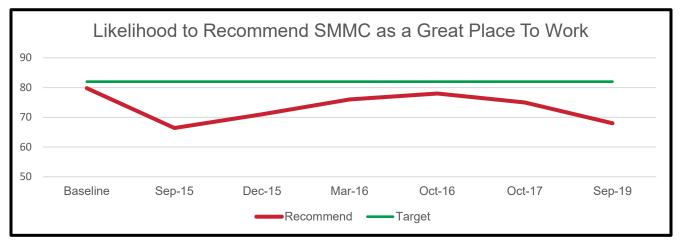


Revenue Per Member, Per Month: Total patient revenue divided by total number of assigned members. Higher is better.

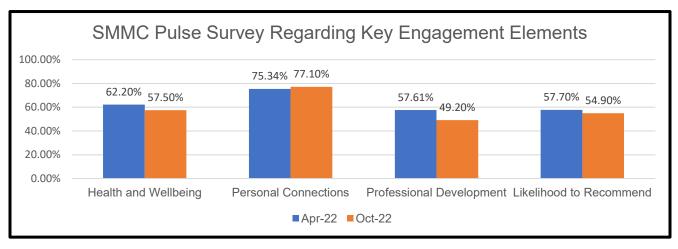


Cost Per Member, Per Month: Total cost divided by total number of assigned members. Lower is better.





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.**

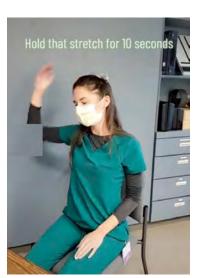


SMMC Staff Engagement Pulse Survey: Percentage of staff who agree or strongly agree that 1) organization actively supports health and wellness 2) staff member has personal connections at work 3) organization supports professional development 4) staff member would recommend SMMC as a great place to work.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

Strategic Updates, Recognitions & Awards







Left and Center: Garrett the therapy dog visits Fair Oaks Health Center staff. Right: Ana Radich shows teens how to get their blood pumping.

1-Minute Video Helps Improve Circulation for Teens

When Dr. Brita Almog, Supervising Provider in the San Mateo Pediatrics Clinic, received repeated requests for chair exercises, she reached out to SMMC's Rehabilitation Services unit for help. It seems the local high schools extended the length of class time to 90 minutes, and kids were stiff and sore and looking for non-disruptive ways to improve circulation and movement.

When she received the request, Emily Weaver, Rehabilitation Manager, created an improvement opportunity on the department's improvement huddle board to address the need.

What appeals to teens? TikTok videos, of course. So, Nabeel Bhatti, physical therapist, and Ana Radich, Occupational Therapist stepped up and got creative! Nabeel had never used TikTok, but he opened a personal account to try out the service. Together they made a short video featuring 5 easy-to-do exercises. Kate and Karen in Communications uploaded the video to the SMC Health YouTube channel, posted it on Facebook, and created a card with a QR code so the video can be easily accessed in multiple ways. The rehab team also made a paper hand-out that can be shared with all patients. Thank you to Brita, Emily, Nabeel, Ana, Kate, and Karen for their creativity and teamwork. The full video can be viewed here: Stretching Exercises - YouTube

Tail Wags to Wellness

In December, Trish Erwin, Clinic Manager, invited Garrett to Fair Oaks Health Center (FOHC) for a staff wellness visit. Garrett has been a therapy dog for four years and Christine Hollender, Business Manager for Public Safety Communications, is his handler.

A therapy dog is a pet that accompanies their owner to specific settings for the benefit of those in the setting and/or as part of a therapeutic intervention. Studies have shown that interacting with therapy dogs yields both physical and psychological benefits to humans and the dog. The simple act of petting an animal releases an automatic relaxation response including lowering of blood pressure and the release of serotonin, prolactin, and oxytocin, which are all hormones that can elevate your mood. Other benefits include reduced anxiety and loneliness and an increase in mental stimulation.

The staff at FOHC enjoyed their time with Garrett, a Lab/Golden Retriever mix. A special thank you to Christine Hollender for making the visit possible.

SMC Health Fitness Center Reopens

To promote a culture of health and well-being, SMC Health opened a staff fitness center in 2016. The pandemic forced us to close the fitness center in 2020 to ensure safety. In recent pulse surveys, SMMC staff highlighted access to the fitness center as a top priority for their wellness. The SMMC Wellness Committee, Infection Control and Leadership teams partnered to remove some difficult administrative barriers and the fitness center is now reopened!

The fitness center, located on the second floor of the administration wing at the hospital, has treadmills, elliptical machines, stationary bikes, and weights so staff and providers have a free, convenient option for physical exercise before or after work, or during their break. The fitness center is free for all SMC Health staff, including contracted providers, and is open extended hours so those at other SMMC locations can enjoy the fitness center before or after their shift.

Staff safety remains a priority and consumers of the fitness center are required to sign a consent form to gain access and follow all COVID-19 infection control protocols, including wearing a mask at all times. Thank you to everyone who worked hard to reopen the fitness center.

SMMC recognized with Quality Leaders Award

Each year, the California Health Care Safety Net Institute (SNI) and the California Association of Public Hospitals (CAPH) recognize specific public health care systems with Quality Leaders Awards (QLAs) for "their outstanding and innovative efforts to advance high quality, equitable care." This year, SMMC was recognized with the QLA in Innovation for its work to identify and address food insecurity amongst the patients we serve. This award celebrates not just the work of SMMC, but also the very important partnerships that facilitate this work. A video describing the program that led to this award can be found here: Food is Foundational - San Mateo County Health (smchealth.org)

Thank you to staff across the organization who have made this program successful, especially staff and leaders at Fair Oaks Health Center where the program was started and developed. Thank you also to all our partners including Second Harvest Food Bank, Samaritan House, and the San Mateo County Health Foundation.

2022 Accomplishments:

As we close out 2022, we recognize that it was another challenging year with many unexpected twists and turns, but we have overcome those challenges and excelled in a variety of ways. This is an opportunity to celebrate those accomplishments



- Through a variety of outreach and in-clinic-flow efforts, SMMC connected 52,693 (75.8%) of our patients to COVID-19 vaccination with 69.4% completing their initial series. Thus far 15% of our patients have received their bivalent booster including 25% of those over age 50.
- SMMC completed its triennial organizational Joint Commission survey achieving full accreditation.
- In 2022, the Skilled Nursing unit was recognized by CMS with a 5-star Quality Rating
- The 1A Skilled Nursing Unit had patient COVID vaccination rates that were consistently above 85% due to ongoing efforts by staff to engage patients in the discussion.
- In the Medi-Cal Quality Incentive Program (QIP), SMMC had **nineteen** metrics that were at or above the 90th percentile for Medicaid nationwide.
- SMMC Inpatient Psychiatry was recognized by CMS as substantially outperforming national benchmarks on 13 of 15 metrics during Fiscal Year 2022.
- SMMC's Diabetic Self-Management Education Program successfully renewed its certification from the American Diabetes Association through July of 2026.
- SMMC's Healthcare for the Homeless & Farmworker Health Program was recognized with three 2022 Community Health Center Quality Recognition Awards (in the areas of Access Enhancer, Health Disparities Reducer and Advancing Health Information Technology) by the Health Resources and Services Administration (HRSA).
- Ambulatory Services conducted an extensive process to spread a new and improved rooming standard that included screening for food insecurity and literacy challenges.
- Following on work begun at South San Francisco Health Center, Integrated Behavioral Health began screening for Adverse Childhood Experiences (ACEs).
- The Medical Staff Office partnered with the Health Plan of San Mateo for a successful credentialing audit by the National Committee for Quality Assurance (NCQA)
- Radiology Services had several successful regulatory surveys including CT accreditation through the American College of Radiology and the Mammography Quality Standards Act inspection through the State and FDA.
- Integrated Behavioral Health launched efforts to standardize the approach to the use of Benzodiazepines in order to improve patient safety.
- Specialty Services established a Heart Failure Clinic for patients discharged from the hospital with heart failure. The clinic uses a multidisciplinary approach to reduce the risk of readmission.
- In 2022, SMMC underwent its first state audit of the Medi-Cal Quality Incentive Program and had only one minor finding.

Patient Experience

• SMMC again partnered with the San Mateo County Health Foundation and the Golden Gate Chapter of the Harley Owners Group (HOGs) to host two longstanding community events: The 13th Annual School Supply Run and the 33rd Annual Holiday Toy Drive.

- OB services began new breastfeeding classes this year to better support new mothers.
- Radiology noted that patients who had multiple studies ordered sometimes did not remember all
 of them and would leave radiology without completion of all needed studies. Staff initiated local
 improvement efforts to improve communication across all imaging modalities and monitored
 daily data to get to a 100% completion rate.
- The Emergency Department utilized patient feedback to initiate new rounding and discharge processes.
- There are ongoing continuous improvement efforts to improve wayfinding especially with respect to helping patients find relocated services such as the new Café and Rehabilitation Services
- Rehabilitation Services worked with OR scheduling and orthopedics to better coordinate care and ensure they can respond to patient need in a timely fashion
- In 2022, as part of efforts to better support patients with literacy challenges, SMMC established the Patient Education Literacy Team (PELT) to ensure all newly developed patient education materials respect all literacy levels.
- Radiology and Communications partnered with the San Mateo Police Department to raise awareness about the importance of breast cancer screening and connecting women to care by promoting and participating in the Pink Patch Party.
- The 1A Skilled Nursing Unit partnered with Creative Arts and Recreation Therapy (CART) to establish new programs for those struggling with Substance Dependence.
- Integrated Behavioral Health expanded online resources for patients in both English and Spanish.



- SMMC saw many key leadership changes in 2022 and while this led to some tearful goodbyes, it also allowed us to welcome several gifted leaders to the organization or to new roles. This includes Carlton Mills as our Chief Nursing Officer, Roberta Larcina as our interim Deputy Director of Nursing for Medical Surgical Services, Amar Dixit as our Chief Medical Informatics Officer, Jack Nasser as Deputy Director of Ambulatory Services, Michele Medrano as Interim Clinical Services Manager for Ambulatory Nursing Practice and the Keller Center, Enitan Adesanya as SMMC Controller, Jennifer Jo Obina as Interim Manager for Infection Control, Komal Saraiya as Clinical Services Manager in Acute Psychiatry, Vicky Magana as Clinical Services Manager for the OR, Kacie Patton as manager of Diversity, Equity and Inclusion, Kevin Herring as Interim Manager of Environmental Services, Thannette Herico as Interim Clinical Services Manager for the 1A Skilled Nursing Unit, and Trish Irwin as Interim Clinic Manager for Fair Oaks Health Center. We are excited to welcome these leaders along with everyone else who joined the SMMC team in 2022.
- The SMMC Wellness Committee planned and hosted commemoration events at SMMC facilities in late March and early April to recognize the perseverance and commitment of SMMC staff throughout the pandemic and to reflect on the challenges they endured.
- With tremendous support from the San Mateo County Health Foundation, SMMC held an
 unprecedented celebration of Hospital Week in May. Having fun with the theme of "Back to the
 Future: Renew, Refresh, Reconnect", staff were treated to a variety of carnival games and food
 along with recognition gifts.
- This year, in an effort to get more timely feedback from staff and measure the impact of various improvement efforts, SMMC launched two staff engagement pulse surveys. The pulse surveys focused on the key areas of personal connections, staff wellness, and professional

- development. The feedback continues to inform a variety of efforts across the organization, and we look forward to the upcoming County-wide survey.
- SMMC staff members Priscilla Padilla Romero and Don Orr joined other SMC Health staff on a team for the County Innovation Challenge that was recognized with a third-place award in the Public Service category; Kate Johnson and Karen Pugh joined other SMC Health staff on a separate team that received third place in the Employee Experience category.
- The SMMC communications team (Karen Pugh and Kate Johnson) were recognized with Awards of Distinction in both Graphic Design and Internal Communications by the California Association of Public Information Officials (CAPIO).
- Cynthia Grivas, Nurse Manager of SMMC Emergency Services and Mary Daria, Work-out-of-Class Charge Nurse in Psychiatric Emergency Services were recognized as Wellness Leaders by the County Wellness Committee.
- SMMC enrolled in the State Worker Retention Program to connect eligible staff members to state retention payments.
- SMMC Security implemented and continuously adjusted new security protocols in response to both local and national concerns. Security is partnering with Patient Experience and other leaders to continue to evolve those protocols based on feedback from patients and staff.
- SMMC onboarded over 500 trainees from various health professional schools of training.
- Several departments/units were able to host staff retreats for the first time since the beginning of the pandemic.
- With leadership from the Wellness Committee, SMMC hosted several sessions for staff related
 to Moral Injury: "the perpetrating, failing to prevent, bearing witness to, or learning about acts
 that transgress deeply held moral beliefs and expectations." One of the goals of these sessions
 was to support staff as they deal with the long-term effects of stress and trauma from not being
 able to properly grieve the losses from the past few years or as they struggle with self-care.
- Integrated Behavioral Health had four poster submissions to biofeedback conferences.
- Rehabilitation Services onboarded 3 new Occupational Therapy staff members.
- The Education Department utilized the County's Microsoft contracts to automate several processes to reduce paperwork burdens on staff.
- SMMC Communications worked with the Wellness Committee to develop an online portal, giving staff easy access to all SMMC wellness activities and benefits.

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Access to Care

- The SMMC Endoscopy Unit opened a second procedure room this year both to address infection control needs during the pandemic and to improve access to our patients. As a result of this change, daily capacity increased from 5 to 6 procedures (colonoscopies and upper endoscopies) per day to 10 to 11.
- SMMC weathered several COVID-19 surges including the Omicron surge providing outstanding care to our community, maintaining access, and limiting loss of life.
- SMMC OB services' time to first prenatal visit was in the top 3 for the Bay Area.
- The Medical Staff Office and the Infectious Diseases unit partnered with Stanford to connect SMMC patients with COVID related clinical trials at Stanford. This included hiring a bilingual COVID research coordinator (funded by Stanford).
- Ambulatory and Inpatient Services partnered to utilize new improvement methodologies to focus
 on streamlining hospital discharge followup by establishing a single pathway. This effort also
 provided robust learning for the efforts to improve the improvement system.
- With leadership from Radiology Services, SMMC successfully navigaged a global CT contrast shortage to ensure that our patients had needed access to imaging services.

- The Emergency Department and Ambulatory Services collaborated to improve referral processes including a single pathway for primary care referral and increased clearity on the urgency of referrals to specialty and primary care.
- Rehabilitation Services used several improvement efforts to reduce no show rates to less than 10%. This included new collaborative processes with partners such as Ravenswood Family Health Center.
- Rehabilitation Services has expanded services and volume to better meet patient needs.
- Specialty Services has established an acupuncture clinic for patients who might benefit from this treatment.
- Mental Health Primary Care expanded their sites of service to include Fair Oaks Health Center, providing additional and more convenient access for those with serious mental illness.
- Mental Health Primary Care has partnered with Lifemoves case management services to streamline access for unhoused clients often resulting in a primary care appointment within 1 to 5 business days.
- Integrated Behavioral Health expanded psychology services to the Ron Robinson Senior Care Center to supplement psychiatry services in the unit.
- Ophthalmology services expanded to several satellite clinics including Daly City Clinic, South San Francisco Clinic, Coastside Clinic and Fair Oaks Health Center.

\$ Financial Stewardship

- SMMC successfully submitted applications across Ambulatory Services to increase FQHC (Federally Qualified Health Center) rates beginning in 2024 (still awaiting approval). This process included adding needed specialty services to all sites.
- Finance leadership worked with the Health Plan of San Mateo to maintain SMMC primary care assignments for patients 50 and older as they transitioned from County ACE Coverage to HPSM Medi-Cal.
- Through a collaborative and inclusive process, Radiology engaged acute care areas to utilize best practices and data to implement a protocol for Appropriate Use of Emergent Ultrasound after hours.
- The Emergency Department reinvigorated and reorganized the card ordering system in the department to minimize waste.
- The SMMC Finance team launched a strategic planning process in 2022 focused on 1) better prioritizing, allocating and aligning resources to achieve the team's collective goals that further the organization's mission 2) strengthening partnerships between the Finance team and other parts of the organization and 3) supporting SMMC's culture of continuous improvement.
- Patient Financial Services successfully transitioned from an older, antiquated system to the new Truebridge RCM claims scrubber system.



January 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	22,640 (December)	-0.1%	-16.7%
SMMC Emergency Department Visits	3,438 (December)	-0.1%	16.2%
New Clients Awaiting Primary Care Appt.	Data Not Available	NA	NA

Caring for the caregivers during a crisis

The night of the mass shooting in Half Moon Bay, Behavioral Health and Recovery Services sent Crisis Response Teams (CRT) to be with the families who had been moved from the farms to a local hotel. Some of the residents were witnesses to the violence. Many children were among them.

The 15 CRT staff who responded speak Mandarin and Spanish and include licensed clinicians and mental health counselors, who provided psychological first aid, grief support counseling, specialized care for children, and connection to needed ongoing services.

But such work takes a toll. Responding to trauma, even as a trained professional, can be emotionally damaging. Caring for the crisis response staff remains an ongoing effort, which began before the crisis. Training by the Red Cross for CRT staff stressed health protection strategies for self care. During the response, each day's debrief offered validation, screened for potential stresses, and encouraged self-care strategies. Now in the aftermath, BHRS offers individual counseling through the Employee Assistance Program and access to crisis supervisors if needed. CRT staff also continue voluntary check ins to share experiences and provide support.

Staff wellness visit with Garrett



In December, the Fair Oaks Health Center invited Garrett the Therapy Dog for a staff wellness visit. With two years under his belt – or collar rather – as a therapy dog, the four-year-old lab / golden retriever mix makes regular visits to support County staff wherever they work. His handler, Christine Hollender, is the business manager for Public Safety Communications in Redwood City. Studies have shown that interacting with therapy dogs yields both physical and psychological benefits to people and the dog. The simple act of petting an animal causes an automatic relaxation response that can lower blood pressure and release mood-elevating hormones. Other benefits include reduced

anxiety and loneliness and an increase in mental stimulation. Garrett gave FOHC staff a much needed boost.

Seven families graduate from the HFSM program

Healthy Families of San Mateo County (HFSM) hosted its second graduation in December to celebrate seven families. Free and voluntary, the home visiting program operated by Family Health Services supports families who are pregnant or parenting newborns. Through dedication and participation in the program, families receive parenting support through the Growing Great Kids curriculum, participate in engaging parent-child attachment activities, obtain regular developmental screenings, and are connected to essential community resources.

In 2022, a multidisciplinary team of 15 public health nurses and senior community workers had the opportunity to serve 141 families that were pregnant or parenting newborns. During the home visits, the family's values, strengths, and beliefs are promoted and honored and services are provided in the family's preferred language. Family Health Services is moving toward accrediting the program in 2023.

EMS organizes public health conference, receives thanks from state health officials

As regional leader of the Medical Health Operational Area Coordinator program, Emergency Medical Services (EMS) brought Bay Area county health officers, local EMS directors, public information officers, and other staff together in January for a table-top exercise and discussion around disease outbreaks and terrorism. The current and former directors of the California Department of Public Health, Tomás Aragón and Karen Smith, expressed their appreciation to the health officers of the Association of Bay Area Health Officials for their leadership and collaboration during the COVID-19 pandemic. EMS Director Travis Kusman and Health Officer Scott Morrow [pictured, seated] represented County Health.

