

### **BOARD OF DIRECTORS MEETING**

Monday, February 5, 2024 8:00 AM - 10:00 AM

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



### AGENDA

| Board of Directors | Monday, February 5, 2024 | 8:00 AM |
|--------------------|--------------------------|---------|
| board of Directors | wonday, rebruary 5, 2024 | 0.00 AW |

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

This meeting of the San Mateo Medical Center Board of Directors will be held in-person in the Atrium Conference Room, 2000 Alameda de las Pulgas, San Mateo, CA. Remote participation of this meeting will not be available. To observe or participate in the meeting, please attend in-person. \*Written public comments may be emailed to <u>mlee@smcgov.org</u> and such written comments should indicate the specific agenda item on which you are commenting. They will be read aloud at the meeting.

#### A. CALL TO ORDER

#### **B. CLOSED SESSION**

Items Requiring Action

- 1. Medical Staff Credentialing Report
- 2. Quality Report

Dr. Frank Trinh Dr. Scott Oesterling

#### Informational Items

3. Medical Executive Committee

Dr. Frank Trinh

#### 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 4, 2023 Meeting Minutes
- 2. Bylaws of the San Mateo Medical Center Board of Directors

#### G. GOVERNING BOARD VACANCY (Public Member)

Action Item:

Consideration of a recommended candidate to serve as the public member of the SMMC Board or Directors and vote on said recommendations.

**BOARD OR DIRECTORS** 

| Н. | MEDICAL STAFF REPORT<br>Chief of Staff Update          | Dr. Frank Trinh   |
|----|--|---|
| I. | ADMINISTRATION REPORTS 1. Financial Audit FY 2022/2023 | Macias Gini & O'Connell Verbal  |
|    | 2. Compliance Report                                   | Gabriela Behn Verbal  |
|    | 3. Elder and Dependent Adult Program                   | Louise Rogers Verbal<br>Dyshun Beshears, Health Services Manager<br>Gwyn Luong, Clinical Services Manager |
|    | 4. Integr8 Health / Strategy                           | Dr. CJ Kunnappilly Verbal   |
|    | 5. Financial Report                                    | David McGrewTAB 2   |
|    | 6. CEO Report and Board Survey                         | Dr. CJ KunnappillyTAB 2   |
| J. | COUNTY HEALTH CHIEF REPORT<br>County Health Snapshot   | Louise RogersTAB 2  |
| K. | COUNTY EXECUTIVE OFFICER REPORT                        | Mike Callagy  |
| L. | BOARD OF SUPERVISOR REPORT                             | Supervisor David Canepa   |

#### **M. ADJOURNMENT**

#### **ADA Requests**

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

# CONSENT AGENDA

#### HOSPITAL BOARD OF DIRECTORS MEETING MINUTES Monday, December 4, 2023 Atrium Conference Room, 2000 Alameda de las Pulgas, San Mateo, CA

| <b>Board Members Present</b> | Staff Present       |                  |                 |  |
|------------------------------|---------------------|------------------|-----------------|--|
| Supervisor David Canepa      | David McGrew        | John Jurow       | Aurora Gallardo |  |
| Supervisor Noelia Corzo      | Dr. Alpa Sanghavi   | Michelle Lee     | Nancy Quiggle   |  |
| Mike Callagy                 | Dr. Yousef Turshani | Priscilla Romero | Cindy Donis     |  |
| Louise Rogers                | Jen Gordon          | Rebecca Archer   |                 |  |
| Dr. CJ Kunnappilly           | Dr. Mariam Hashoush | Kathy Reyes      |                 |  |
| Dr. Frank Trinh              | Kathy Reyes         | Regina Moreno    |                 |  |
| Dr. Scott Oesterling         | Jei Africa          | Tara Metcalf     |                 |  |
| Deborah Torres               |                     |                  |                 |  |

| ITEM  | DISCJUSSION/RECOMMENDATION   | ACTION  |  |  |
|---|--|---|--|--|
| Call to Order Supervisor Canepa called the meeting to order at 8:00 AM and the Board adjourned to Closed Session. |  |   |  |  |
| Reconvene to Open<br>Session  | The meeting was reconvened at 8:20 AM to Open Session. A quorum was present (see above).   |   |  |  |
| Report out of Closed<br>Session   | Medical Staff Credentialing Report for December 4, 2023.<br>QIC Minutes from October 24, 2023.<br>Medical Executive Committee Minutes November 14, 2023.   | Rebecca Archer<br>reported that the<br>Board unanimously<br>approved the<br>Credentialing Report<br>and the QIC Minutes<br>and accepted the<br>MEC Minutes. |  |  |
| Public Comment  | None.  |   |  |  |
| Foundation Report<br>John Jurow   | John Jurow reported that financially, last month was one of the best for the Foundation. It received the proceeds of the sale of a property that a donor had bequeathed.<br>Over one thousand baby bags for new parents will now be distributed through public libraries, making it much easier for the new parents to pick them up. | FYI   |  |  |
| Consent Agenda  | <ul> <li>Approval of:</li> <li>1. Hospital Board Meeting Minutes from November 6, 2023.</li> <li>2. Diversity, Equity, and Inclusion Report.</li> </ul>  | It was MOVED,<br>SECONDED and<br>CARRIED<br>unanimously to<br>approve all items on<br>the Consent Agenda.   |  |  |
| Medical Staff Report<br>Dr. Frank Trinh   | The transition to EPIC is moving to the "build" phase and implementation is on schedule for November 2, 2024.  | FYI   |  |  |

|  | Several policies were recently updated and approved at the Medical Executive Committee meeting including key policies relating to Pharmacy and Infection Control.  |     |
|--|--|-----|
| Dental Department<br>Mariam Hashoush, DDS  | Dental Clinics overview: 8 dentists and 10 dental assistants; 6 EH dentists and 8 EH dental assistants; 4 oral<br>surgeons, 20 chairs<br>Collaborations with UCSF and UOP dental schools and Foothill College dental hygiene program. Students round<br>at FOHC, Coastside Clinic, and the Mobile Dental Clinic. The Navigation Center is the newest site.<br>Adults and children services include comprehensive care plus specialty services such as pre-oncology treatment<br>and ortho/pre-prosthetic joint clearances.<br>Mobile Dental Clinic rotates to various locations including 39 <sup>th</sup> Ave San Mateo, South San Francisco,<br>Correctional, and the Navigation Center.<br>In May 2023, the Health Plan of San Mateo expanded the scope of dental services. The expanded services offer<br>a more comprehensive range than Denti-cal. | FYI |
| Early Childhood<br>Community Team<br>Regina Moreno, BHRS<br>From StarVista:<br>Nancy Quiggle<br>Aurora Gallardo<br>Cindy Donis<br>Tara Metcalf | ECCT aims to support needs of underserved families with prenatal through age 5, connect families with region<br>based resources, support healthy social emotional development, and provide mental health consultation in<br>preschools and daycare centers.<br>Areas of service include Daly City, South San Francisco, San Mateo, Half Moon Bay, North Fair Oaks, and La<br>Honda/Pescadero.<br>Three interconnected roles: Mental Health Consultants, Mental Health Clinicians, and Community Worker.<br>Four levels of consultation: Onsite consultant for childcare staff; "Light touch" services for families with<br>identified support needs; Intensive ongoing services for families; Referral to a 0-5 mental health program.   | FYI |
| Financial Report<br>David McGrew, CFO  | The October FY 23/24 financial report was included in the Board packet and David McGrew answered questions from the Board.   | FYI |
| CEO Report<br>Dr. CJ Kunnappilly   | Dr. Kunnappilly presented the CEO report which was included in the Board packet and answered questions from the Board. Kathy Reyes was introduced as the new SMMC Wellness Officer.  | FYI |
| County Health Chief<br>Report<br>Louise Rogers   | Senate Bill SB 43 was signed by Governor Newsom and it will allow law enforcement to detain an individual due to severe substance abuse disorder. This is a significant expansion to the current practice and will impact emergency departments and conservatorships. San Francisco County is the only California county to go live on January 1, 2024. We are considering how to satisfy the mandate in this county.  | FYI |
| County Executive<br>Officer<br>Mike Callagy  | With the goal of better outcomes, the county will address domestic violence through a co-response program.<br>An embedded domestic violence survivor advocate can accompany law enforcement officers when responding<br>to DV calls.   | FYI |
| Board of Supervisors<br>Supervisor David<br>Canepa   | Supervisor Canepa reported Mental Health is a big topic and will continue to be so in 2024 and Measure will help to addresses some of the issues.  | FYI |

Supervisor Canepa adjourned the meeting at 9:32 AM. The next Board meeting will be held on February 4, 2024.Minutes recorded by:Michelle Lee, Executive SecretaryMinutes approved by:Dr. Chester Kunnappilly, Chief Executive Officer



#### BYLAWS OF THE SAN MATEO MEDICAL CENTER

Reviewed and Approved: February 5, 2024

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#### **ARTICLE I**

#### **GENERAL**

- Section 1. <u>Name</u>. The name of the Hospital is San Mateo Medical Center (SMMC), which includes the main acute and ambulatory care facility, satellite clinics, and Burlingame Long Term Care (which is operated by a third-party pursuant to a management agreement).
- Section 2. <u>Principal Business Office</u>. The principal business office shall be in the City of San Mateo, County of San Mateo, State of California.

#### **ARTICLE II**

#### **PURPOSE**

The purpose of SMMC is to open doors to excellence in healthcare to the community, including all incompetent, poor, indigent persons and those incapacitated by age, disease, or accident, when such persons are not supported or relieved by their relatives or friends, by their own means, or by other state or private institutions. Care shall be consistent with acceptable professional standards. Each client admitted to SMMC shall be under the care of a member of the medical staff. SMMC shall participate in activities that promote the general health of the community.

To achieve this important mandate, SMMC shall strive to provide quality care and treatment through acute inpatient, ambulatory, long term, rehabilitative and primary care services.

#### **ARTICLE III**

#### **DEFINITIONS**

1. <u>Administrator</u> – The Chief Executive Officer of San Mateo Medical Center.

2. <u>Governing Board</u> – The Governing Board of SMMC, which is comprised of members of the Board of Supervisors, county administration, the Medical Staff, and other qualified individuals as set out in Article V, Section 2.a. of these Bylaws.

3. <u>Medical Staff</u> – The formal organization of physicians, dentists, clinical psychologists and podiatrists who have been granted recognition as members of the medical staff through the credentialing process and have been granted privileges to practice at SMMC.

4. <u>SMMC</u> – San Mateo Medical Center, which provides: (1) medical and psychiatric emergency services; (2) acute inpatient and psychiatric services; (3) skilled nursing directly and through a management agreement; (4) clinical ancillary services, including laboratory, radiology, pharmacy and rehabilitative services; and (5) primary and specialty ambulatory services at multiple sites throughout San Mateo County.

#### **ARTICLE IV**

#### **GOVERNING AUTHORITY**

- Section I. <u>General</u>. The Board of Supervisors of San Mateo County ("Board of Supervisors") is the governing authority of SMMC.
  - a. <u>Responsibility</u>. The Governing Board, the Chief Executive Officer, the Medical Staff, all SMMC personnel, and the volunteers are responsible to the Board of Supervisors with regard to all SMMC matters.

No assignment, referral or delegation of authority by the Governing Board to any person or Board shall impair the Board of Supervisors right to rescind any such action at any time.

- b. <u>Board of Supervisors Organization and Operation</u>. The Board of Supervisors consists of five (5) elected members. They fulfill their responsibilities according to the State Constitution, statutes, County Charter, and ordinances.
- Section 2. <u>Delegation</u>. In order to more efficiently perform some of the duties and responsibilities of the governing authority, the Board of Supervisors delegates to the Governing Board the authority and responsibility to act as the governing authority with respect to only those matters specifically identified in Article V, Section 1.

In order to retain its authority and responsibilities, the Board of Supervisors reserves all rights and responsibilities, pertaining to the SMMC operations that are not expressly provided for herein.

#### **ARTICLE V**

#### **GOVERNING BOARD**

- Section 1. <u>General Duties</u>. The Governing Board shall act as the governing authority with respect to the following:
  - a. <u>Establishment of Policy</u>. The Governing Board shall establish policies that are in the best interest of SMMC.
  - b. Institutional Management and Planning.
    - 1) <u>Operations Management</u>. The Governing Board shall exercise general oversight of the operation of SMMC. Such oversight shall include:
      - a) Encourage the development, adoption, and implementation of programs for improving the quality of care and service and to assure that the SMMC operations are conducted according to sound principles and practices and in accordance with all laws and regulatory standards;
      - b) Prepare an annual operating and capital budget;
      - c) Monitor and evaluate the financial performance of SMMC against approved budget, organizational goals and outcome-based management plans;
      - d) Monitor SMMC cost containment efforts;
      - e) Review and approve Administrative Policies and Regulations necessary to assure the quality of care provided at SMMC;
      - f) Ensure, through SMMC, County Administrators and Medical Staff, that all legal requirements pertaining to proper operation of SMMC, including licensure and accreditation standards, are met;
      - g) Consider and approve any plans for change in service for the SMMC;
      - h) Provide a forum for communication between the Governing Board, the Medical Staff, and the County Administration by keeping each informed of pertinent actions taken or contemplated;

- i) Develop and maintain, annually review, and revise as necessary, a set of operational Bylaws;
- j) Ensure that the physical facilities are safe and in substantial compliance with current code and licensure requirements.
- k) To ensure that the SMMC and its medical staff have in place, continuously follow, and regularly report upon well-defined quality monitoring, continuous quality and performance improvement programs, and other appropriate procedures designed to identify and remedy patient care problems and to improve medical practice and patient care in the SMMC; and
- <u>Planning</u>. The Governing Board shall be responsible for the institutional planning of SMMC and for assuring that those plans are carried out in an effective and efficient manner. Such planning shall include:
  - a) Monitoring of annual operating budget and development and monitoring of short- and long-term capital expenditure plans designed to provide equipment and facilities consistent with community needs and the financial resources of the County; and
  - b) Ensuring participation by SMMC Administration and operating departments (including Nursing), the County Administration and Support Services, and the Medical Staff, within the scope of the expertise of each, to SMMC financial planning.
- 3) <u>Quality Management</u>. The Governing Board shall review, approve and oversee the quality management program of SMMC. Oversight includes:
  - a) annual review and approval of an on-going, integrated and SMMC-wide Quality Management Plan;
  - b) review and approval of regular, at least quarterly, reports on quality management activities of SMMC and Medical Staff to ensure that opportunities to improve care and problems with quality care are being identified; and actions are being recommended, implemented, evaluated and that ongoing monitoring is occurring; that modification of action plans is recommended as appropriate;
  - c) ensure that the quality of care provided meets professional practice standards;

- d) oversee SMMC mechanisms used to assure all persons and independent contractors connected with the operation of SMMC are retained and promoted on the basis of current, competent performance that includes evaluation of the quality, skill, and appropriateness of that performance;
- e) conduct ongoing evaluation and annual review of the Governing Board's own effectiveness in meeting the responsibilities delegated to it.
- 4) <u>Medical Staff Recommendations</u>. The Governing Board shall receive and act upon recommendations from the Medical Executive Committee within a reasonable period. These recommendations shall include but not be limited to:
  - a) Medical Staff structure, organization, and officers;
  - b) Medical Staff membership credentialing and privilege delineation, corrective action, and termination mechanisms; and
  - c) Medical Staff Bylaws, Rules and Regulations.

#### Section 2. <u>Number, Tenure and Qualifications</u>

- a. <u>Number and Qualifications</u>. The number of members of the Governing Board shall not exceed nine (9).
  - 1) Two (2) members shall be appointed from Board of Supervisor membership. The current President of the Board of Supervisors shall make these appointments.
  - 2) One (1) member shall be a public member, selected by the Governing Board. The term shall be for four years. The public member may serve for no more than three, four year terms.
  - 3) Three (3) members shall be appointed from the Medical Staff membership. These appointees shall be made by the Medical Staff; one (1) member of which shall be the current Chief of the Medical Staff and one (1) shall be the Chief of Staff Elect. The Medical staff terms shall coincide with medical staff terms of appointment
  - 4) One (1) member shall be the County Manager or the County Manager's designee, and either the County Manager or designee may attend any given meeting as a member of the Governing Board at the County Manager's discretion.

- 5) One (1) member shall be the Chief of the Health System of San Mateo County.
- 6) One (1) member shall be the Chief Executive Officer of SMMC.
- 7) Of those members who are appointed, their selection shall be based on demonstrated potential ability to participate effectively in fulfilling the responsibilities of the Governing Board and SMMC, and in representing or responding to the various needs of the community serviced by SMMC. They shall be selected for the experience, relevant areas of interest and expertise, and ability and willingness to participate effectively in fulfilling the responsibilities of a member. Members in good standing of the active Medical Staff are eligible for membership on the Governing Board.
- 8) Each member shall participate in an orientation session upon initial appointment as a member and periodically thereafter in continuing education programs relevant to responsibilities as a Governing Board member, including responsibilities and concepts of quality management and SMMC operations. Documentation of member's orientation and continuing education shall be maintained by the Secretary of the Governing Board.
- b. <u>Tenure.</u> The Governing Board and Medical Staff shall appoint or reappoint members to replace those Governing Board members whose terms have expired and to fill vacancies. Newly appointed Governing Board members shall assume responsibility at the next meeting after election.
- Section 3. <u>Vacancies</u>. Any vacancy occurring by the death, resignation, or loss of position required for membership shall be filled within thirty (30) days in the case of appointed members and at the first meeting after assignment or election to the position for all other members. Appointed members may resign at any time by giving written notice to the Governing Board President. Such resignation, which may or may not be made contingent on formal acceptance, takes effect on the date of receipt or at any later reasonable time specified in the notice.
- Section 4. <u>Meetings</u>.
  - a. <u>Regular Monthly Meetings</u>. Regular monthly meetings of the Governing Board shall normally be held the first Monday of each calendar month in the Board Room at SMMC. The Governing Board shall make a reasonable effort to maintain at least ten (10) meetings each calendar year.
    - 1) <u>Public Meetings</u>. Regular meetings of the Governing Board shall be open to the public.

- 2) <u>Closed Sessions</u>. The Governing Board may enter into Closed Session as authorized by state law.
- b. <u>Special Meetings</u>. Special meetings of the Governing Board may be called by a majority of the members or by the President. The purpose of any special meeting shall be stated in the notice and agenda thereof which shall be provided to each member of the Governing Board and other persons who have requested notice of special meetings, at least twenty-four (24) hours prior to the meeting. Special meetings will, insofar as practical, be confined to the purpose for which called.
- c. <u>Notice of Regular Meetings</u>. Notice of regular meetings shall be posted at least 72 hours prior thereto, and shall include the time, date, and agenda for the meeting.
- d. <u>Quorum</u>. A majority of the members of the Governing Board, five (5) members, shall constitute a quorum for the transaction of business at any meeting. The majority vote of members present shall decide any question and be the act of the Governing Board unless a greater number is required by law. There shall be no voting by proxy.

e. <u>Order of Business</u>. Absent special circumstances, the order of business at all meetings shall be as follows:

- 1) The call to order.
- 2) Closed Session
- 3) Public Comment
- 4) Report from the Foundation
- 5) The approval of minutes of prior meetings.
- 6) Report of SMMC Business Requiring Board Action
- 7) Report of Medical Staff Business requiring Board Action.
- 8) Report from the CEO
- 9) Report from the Board of Supervisors
- 10) Report from the County Manager
- 11) Report from the Chief of the Health System
- 12) Adjournment

Minutes shall be maintained of all regular and special meetings to include deliberations, recommendations and actions of the Governing Board. The Governing Board may by resolution designate a person to take minutes of deliberations in closed session as provided for in Government Code Section 54957.2.

f. <u>Conflict of Interest</u>. Any Governing Board member, officer, employee or committee member having an interest in a contract or other transaction presented to the Governing Board or to a Governing Board Committee for authorization, approval, or ratification shall give prompt, full, and frank disclosure of said interest to such Board prior to its acting on the contract or vote, whether the disclosure shows that a conflict of interest exists or can reasonably be construed to exist. If a conflict is determined to exist, such person shall not vote, nor use personal influence on, nor participate in the discussions or deliberations with respect to such contract or transaction. A person who discloses a conflict of interest must abstain from discussion, influence, participation and may not vote on the matter. A person determined to have a conflict of interest shall not be counted when establishing the existence of a quorum at any meeting when the contract or transaction is under discussion or being voted upon. Minutes of the meeting shall reflect the disclosure, the vote or abstention thereon and the presence or absence of a quorum.

g. <u>Disclosing Conflict of Interest</u>. Governing Board members, officers, selected employees, and contractors of SMMC shall report to the Governing Board any existing or potential conflict of interest and shall file annual disclosure statements with the County Clerk.

#### **ARTICLE VI**

#### **OFFICERS AND COMMITTEES**

- Section 1. Officers. There shall be two (2) appointed officers of the Governing Board.
  - a. <u>Governing Board President</u>. The President of the Governing Board shall be a member of the Board of Supervisors serving on the Governing Board. The President shall be agreed upon between the two members of the Board of Supervisors serving on the Governing Board. The newly designated President shall assume responsibility upon adjournment of the January meeting of the Governing Board. The President shall preside over all meetings of the Governing Board, supervise the activities of the Governing Board and serve as an ex-officio voting member of all Governing Board Committees. In the President's absence, the other member of the Board of Supervisors serving on the Governing Board shall preside over the Governing Board meeting. In the absence of both members of the Board of Supervisors, the County Manager or Chief Executive Officer will preside over the Governing Board meeting.
  - b. The Chief Executive Officer of SMMC shall serve as the official Secretary of the Governing Board. The Secretary shall keep or cause to be kept at the principal office or at such other place as the Governing Board may determine, a book of minutes of all meetings. The Secretary shall give or cause to be given notice of all meetings of the Governing Board as required by these Bylaws or by law. At the discretion of the Secretary, an employee of SMMC may be designated to perform the secretarial services of the Governing Board, which may include the following functions: take minutes of all meetings, maintain documentation of Governing Board members and report conflict of interest statements annually.
- Section 2. <u>Standing or Advisory Committees</u>. The creation of Governing Board committees is discretionary. Each standing committee shall have and exercise the powers and authority granted in the resolution creating it. Minutes shall be kept of its proceedings and reports of its actions shall be reported to the Governing Board. Actions taken by any standing committee are subject to ratification by the Governing Board. Standing committees shall comply with vacancies, meeting notices, quorum, order of business, and duality of interest clauses of these Bylaws. The Governing Board may also appoint advisory committees.

#### **ARTICLE VII**

#### **ADMINISTRATION**

- Section 1. <u>General</u>. The SMMC is administered through the countywide organization structure of which it is a part. The Chief Executive Officer of SMMC reports to the Chief of the Health System, who reports to the County Manager who reports directly to the Board of Supervisors of San Mateo County.
- Section 2. <u>Appointment and Authority</u>. The Chief of the Health System shall monitor the performance of the Chief Executive Officer of SMMC. The Chief Executive Officer of SMMC shall be qualified for the position through appropriate education and experience. The Chief Executive Officer is hereby given authority and responsibility for the administration of SMMC and all its activities and departments subject to the County Charter, ordinances and resolutions of the Board of Supervisors. The Chief Executive Officer shall:
  - 1. Ensure appropriate notice of all meetings of the Governing Board is sent; receive and attend to all correspondence relating to SMMC; act as custodian of all records and reports relating to SMMC, and keep records of all meetings of the Governing Board.
  - 2. Attend all meetings of the Governing Board as a fully vested voting member.
  - 3. Submit monthly to the Governing Board or its authorized committees reports showing the professional service and financial activities of SMMC and to prepare and submit any special reports that may be required by the Governing Board and/or Board of Supervisors.

#### **ARTICLE VIII**

#### **MEDICAL STAFF**

Section 1. <u>Organization</u>. The Governing Board shall appoint a Medical Staff to provide medical service at SMMC. The Medical Staff shall be responsible for the quality of care provided to patients at the SMMC. The Medical Staff shall be a responsible administrative unit, accountable to the Governing Board. Said staff shall be composed of physicians, dentists, clinical psychologists, and podiatrists who are graduates of recognized schools of medicine, osteopath, dentistry, psychology or podiatry, are licensed to practice in California, are in good standing, and who meet the qualifications as set forth in the Bylaws of the Medical Staff.

Appointment and membership to the Medical Staff is a prerequisite to the exercise of clinical privileges in SMMC, except as otherwise specifically provided in the Medical Staff Bylaws.

Each member of the Medical Staff shall have full authority and responsibility for the care of his or her patients, subject only to such limitations as are imposed by the Governing Board, and subject, further, to any limitations or conditions attached to the staff member's appointment. Approval by the Governing Board shall be required to effect the appointment, reappointment, designation of clinical privileges, and clinical department/service assignment at SMMC.

- Section 2. <u>Medical Staff Bylaws, Rules and Regulations</u>. The Medical Staff shall propose and adopt by vote Bylaws, Rules and Regulations setting forth its organization, including selection of officers, its government, quality of care protocols, procedure for the granting of clinical privileges, and provisions for a review of the Medical Staff's recommendations with respect to appointment, reappointment, or termination of appointment to the Medical Staff, and granting or curtailment of clinical privileges. Bylaws, Rules and Regulations shall be consistent with applicable law, regulatory and accreditation standards and SMMC policy. Such Medical Staff Bylaws, Rules and Regulations shall become effective when, and in the form, approved by the Governing Board or at such later date as the Governing Board may specify. Medical Staff Bylaws shall be reviewed annually by the Medical Staff and recommended to the Governing Board for review and approval of any changes.
- Section 3. <u>Medical Staff Membership and Clinical Privileges</u>. The Medical Staff shall be delegated the responsibility and authority to investigate and evaluate all matters relating to Medical Staff membership status, clinical privileges, and corrective action, and shall require that the staff make recommendations thereon. The Governing Board shall then take final action on all such matters after considering

the staff recommendations forwarded, provided that the Governing Board may act in any event if the staff fails to adopt and submit any such recommendation within the time period required by the Medical Staff Bylaws. Such Governing Board action without a staff recommendation shall be based on the same kind of documented investigation and evaluation of current ability, judgment, and character as is required for staff recommendations.

The Medical Staff Bylaws shall contain provisions for the staff to adopt and forward to the Governing Board specific written recommendations on all matters of Medical Staff membership status, clinical privileges and corrective action, and to support and document its recommendations in a manner that will allow the Governing Board to take informed action.

In acting on matters of Medical Staff membership status, the Governing Board shall consider the staff's recommendations, SMMC and the community's needs, and such other criteria as set forth in the Medical Staff Bylaws. In granting and defining the scope of clinical privileges to be exercised by each practitioner, the Governing Board shall consider the staff's recommendations and supporting information on which they are based and such criteria as are set forth in the Bylaws. No aspect of membership status nor specific clinical privileges shall be limited or denied to a practitioner on the basis of sex, race, creed, color, or national origin.

Any differences in recommendations concerning Medical Staff appointments, reappointments, termination of appointments, and granting or revising of clinical privileges will be resolved in a reasonable period of time by the Governing Board and the Medical Staff.

The procedure to be followed by the Medical Staff and Governing Board in acting on matters of membership status, clinical privileges, and corrective action shall be specified in the Medical Staff Bylaws.

Section 4. <u>Corrective Action and Fair Hearing Plan</u>. The Governing Board shall require that any action taken by the Executive Committee of the Medical Staff, or by the Governing Board, the effect of which is to deny, revoke, suspend, or reduce a practitioner's staff appointment, reappointment, department affiliation, staff category, admitting prerogatives, or clinical privileges shall, except under circumstances for which specific provision is made in the Medical Staff Bylaws, be accomplished in accordance with the Governing Board approved Corrective Action and Fair Hearing Plan then in effect. Such Plan shall provide for procedures to assure fair treatment and afford opportunity for the presentation of all pertinent information.

Should the Medical Staff via its designated structure, fail to investigate or take disciplinary action, contrary to the weight of the evidence, the Governing Board may direct the Medical Executive Committee to initiate investigation or disciplinary action, but only after consultation with the Medical Executive Committee. If the

Medical Executive Committee fails to take action in response to that direction, the Governing Board may initiate corrective action, but this corrective action must comply with Corrective Action and Hearing and Appellate Review Articles of the Medical Staff Bylaws.

Section 5. <u>Affiliates to the Medical Staff and Physicians in Training</u>. The Governing Board may authorize qualified persons to provide services allied with the medical services provided by members of the Medical Staff. Said authorization shall be granted in accordance with and subject to the Bylaws and Rules and Regulations of the Medical Staff.

#### **ARTICLE IX**

#### **QUALITY MANAGEMENT**

- Section 1. <u>General</u>. The Quality Improvement Program establishes guidelines for improving clinical and organizational performance with SMMC. The intent is to serve the mission of opening doors to excellence in healthcare through quality/performance improvement.
- Section 2. <u>Governing Board Responsibility</u>. The Governing Board ensures that adequate resources are provided to comply with laws and regulations and receives reports regarding status of programs. The Board participates in the development of long-range goals and the Mission of the Organization.
- Section 3. Delegation to Administration and to the Medical Staff. The Governing Board delegates to the leadership of SMMC, including the Medical Staff, the responsibility for conducting specific activities that contribute to the preservation and improvement of the quality of patient care. These responsibilities include the evaluation and peer review of the practitioner performance, including Affiliates to the Medical Staff and Physicians in Training; ongoing monitoring of critical aspects of care; review of utilization of SMMC's resources; provision of continuing professional education; recommendations on the clinical privileges which may be appropriately granted and delineation of clinical privileges for appointees of the Medical Staff commensurate with individual credentials and demonstrated ability and judgment and such other measures as the Governing Board may deem necessary for the preservation and improvement of the quality patient care.

The Quality Improvement Program provides consistent framework and structure for SMMC to follow in order to achieve the objective of continually improving the delivery of health care for all who seek help from SMMC. The Plan provides the framework for facilitating improvement efforts across the organization.

The facilities maintenance and safety programs include a mechanism of reporting the status of SMMC mechanical, electrical, and structural systems directly to the Board through the Chief Executive Officer. The Board delegates to the Chief Executive Officer the responsibility and authority to immediately resolve any facility safety issue where danger to patients, staff or visitors is identified.

Section 4. <u>Receipt of Reports on Quality</u>. The Governing Board receives reports on organization and quality/performance activities, including environment of care, patient safety and human resource effectiveness through the Medical Executive Committee.

#### ARTICLE X

#### AUXILIARY

- Section 1. <u>Creation</u>. A SMMC Auxiliary may be formed and approved under the terms and conditions of SMMC Policies and Procedures.
- Section 2. <u>Bylaws.</u> Written Policies, Bylaws and Amendments thereto, and activities of the Auxiliary shall be subject to approval by the Governing Board. Bylaws shall set forth the Auxiliary's purpose, organization and functions.

#### **ARTICLE XI**

#### **BYLAWS AND AMENDMENTS**

- Section 1. <u>Review</u>. These Bylaws shall be reviewed in their entirety to assure reflection of current responsibilities of the Governing Board to SMMC and community, and representation of current philosophy and direction. Review shall occur annually, and when appropriate, amendments shall be proposed to these Bylaws to meet the needs of the SMMC.
- Section 2. <u>Amendments</u>. These bylaws may be amended or repealed and new Bylaws adopted by a majority vote of the number of Governing Board members fixed by the Bylaws at any regular or special meeting, provided written notice of this intent has been given by the Secretary to each member at least thirty (30) days in advance of the meeting.
- Section 3. <u>Hospital Standard of Care</u>. These Bylaws do not create any standard of care for purposes of litigation. The standard of care applicable to the SMMC for purposes of litigation shall be a community standard, i.e. that level of care required of health care providers in the same or a similar community. Notwithstanding the foregoing, the SMMC shall strive to continuously maintain and improve the quality of care available at the SMMC.

These Bylaws have been reviewed and approved effective February 5, 2024..

Chester Kunnappilly, MD Chief Executive Officer SAN MATEO MEDICAL CENTER (SMMC)

Date

Supervisor David Canepa President, San Mateo Medical Center Board of Directors COUNTY OF SAN MATEO

Date



San Mateo Medical Center 222 W 39th Avenue San Mateo, CA 94403 650-573-2222 T smchealth.org/smmc

| DATE: | January 29, 2023   |
|-------|--|
| TO:   | SMMC Board Members   |
| FROM: | CJ Kunnappilly MD, Chief Executive Officer   |
| RE:   | Recommendation to appoint Judith Guerrero to public member seat on the Governing Board |

Deborah Lee Torres has served as the "public member" on The San Mateo Medical Center Governing Board since November of 2015. Pursuant to Section 2.a.2 of Article V of the San Mateo Medical Center Bylaws, the Governing Board is responsible for appointing the public member by majority vote. The individual's selection "shall be based on demonstrated potential ability to participate effectively in fulfilling the responsibilities of the Governing Board and SMMC, and in representing or responding to the various needs of the community serviced by SMMC." SMMC Bylaws, Art. V, §2.a.7. Further, the individual "shall be selected for the experience, relevant areas of interest and expertise, and ability and willingness to participate effectively in fulfilling the responsibilities of a member." Id.

Ms. Torres has indicated her desire to step down from the Governing Board. In light of this, San Mateo Medical Center, in August of 2023, launched an effort to identify candidates for the upcoming vacancy. The goal of this recruitment was to identify individuals who could best represent our patient population and might even have lived experience as an SMMC patient. The effort was led by leaders of the Offices of Diversity, Equity and Inclusion and Patient Experience at San Mateo Medical Center. This effort initially identified a number of candidates for the position. After a series of screening interviews, two finalists were identified and a panel interview that included the Chief of Staff, the current community representative on the SMMC Governing Board, the manager of the Medical Staff Office, the SMMC CEO and the SMC Health Chief was conducted.

Having completed that process, it is my pleasure to recommend that the Governing Board appoint Judith Guerrero as the "public member" of the San Mateo Medical Center Governing Board. This term would be from March 1, 2024 to February 29, 2028.

Ms. Guerrero is currently the Executive Director of Coastside Hope. Coastside Hope is a 501(c)(3) non-profit human services agency to benefit the residents of the mid-coast in the San Mateo County Coastside. Their mission is to provide necessities to enhance the quality





of life for all our neighbors in Half Moon Bay, El Granada, Moss Beach and Montara. They are chartered by San Mateo County Human Services Agency as the primary core services provider in the mid-coast.

Ms. Guerrero is also the family member of at least one current SMMC patient. She also serves on the co-applicant board for the San Mateo County Health Care for the Homeless & Farm Worker Health (HCH/FH) Program. She holds a Bachelor of Science in Administration of Justice and Sociology from San Jose State University. She also has a Master's degree in Public Administration from Notre Dame de Namur University.

In her letter of interest, Ms. Guerrero noted her experience as an immigrant having been born in Jalisco, Mexico and her 25 years as a resident of Half Moon Bay. As Executive Director of Coastside Hope, she identified the following accomplishments:

- Supporting CZU fire evacuees
- Mobilizing a safety net for 200 displaced workers following the abrupt closure of a legacy nursery
- Exposing a hemp farm for withholding wages from farmworkers
- Keeping Coastside Hope's doors open throughout the pandemic through financial support, family and senior food distributions, a daily pantry, vaccinations, and immigration services
- Providing extensive, daily support to the individuals and families displaced by the mass shooting event on January 23

She is excited at the prospect of joining the Governing Board and I, and other members of the selection process, feel her experience, perspectives, and lived experiences would provide for tremendous contributions to the Board.

I will be ready to discuss this recommendation at the next meeting of the Board should you have any questions.

Action Item: Consideration of a recommended candidate to serve as the public member of the SMMC Governing Board and vote on said recommendation.

# ADMINISTRATION REPORTS

# BOARD OF DIRECTORS SAN MATEO MEDICAL CENTER

**Financial Report: December FY23-24** 

February 5, 2024

Presenter: David McGrew, CFO



## FY23-24 Cumulative YTD Financial Results



**Dec FY23 Snapshot** – December is favorable to budget by \$198K. SMMC still projects to be near breakeven for the full year. Nursing registry costs remain unfavorable due to the difficulties with hiring permanent nurses. Inpatient acute volume decreased as placements improved and Medical ED visits continue to be higher than budget. Managed care membership started decreasing since July as eligibility redetermination resumed. ACE patients in the 26-49 age range are eligible for Medi-Cal beginning in January 2024.



## FY 23-24 Revenue & Expense Trend

SMMC's current operating revenue fluctuates around an average of \$29 million (green bar). Operating expenses (black line) in FY24 are averaging \$34 million per month and trending right at budget.





#### Managed Care Membership Trend



The membership in managed care programs peaked in July 2023 (31% increase for Medi-Cal since the onset of the COVID pandemic) and started trending down since. This is a result of the State restarting annual eligibility redeterminations at the end of the public health emergency. We anticipate the Medi-Cal expansion in January 2024 impacting the ACE 26-49 population will shift assignments from ACE to Medi-Cal, partially off-setting Medi-Cal assignment losses. By June 2024, total assignments losses of 7,000 are projected across all lines of business.



#### San Mateo Medical Center Inpatient Days December 31, 2023

|                                       |                           | MONTH           |             |            |                   | YEAR TO DATE |              |        |  |
|---------------------------------------|---------------------------|-----------------|-------------|------------|-------------------|--------------|--------------|--------|--|
|                                       | Actual                    | Budget          | Variance    | Stoplight  | Actual            | Variance     | Stoplight    |        |  |
| Patient Days                          | 2,162                     | 2,649           | (487)       | -18%       | 13,047            | 15,723       | (2,676)      | -17%   |  |
|                                       |                           |                 |             |            |                   |              |              |        |  |
| 50.0                                  |                           |                 |             |            |                   |              |              |        |  |
|                                       |                           |                 |             |            |                   |              |              |        |  |
| 45.0                                  |                           |                 |             |            |                   |              |              |        |  |
| • • • • • • • • • • • • • • • • • • • |                           |                 |             |            |                   |              |              |        |  |
| 40.0                                  |                           |                 |             |            |                   |              |              |        |  |
|                                       |                           |                 |             |            |                   |              |              |        |  |
| 35.0                                  |                           |                 |             |            |                   |              |              |        |  |
| 55.0                                  |                           |                 |             |            |                   |              |              |        |  |
|                                       |                           |                 |             |            |                   |              |              |        |  |
| 30.0                                  |                           |                 |             |            |                   |              |              |        |  |
|                                       |                           |                 |             |            |                   |              |              |        |  |
| 25.0                                  |                           |                 |             |            |                   |              | · ·          |        |  |
|                                       |                           | -               |             |            |                   |              |              |        |  |
| 20.0                                  |                           |                 |             |            |                   |              |              |        |  |
|                                       |                           |                 |             |            |                   |              |              |        |  |
| 15.0                                  |                           |                 |             |            |                   |              |              |        |  |
| 15.0                                  |                           |                 |             |            |                   |              |              |        |  |
|                                       |                           |                 |             |            |                   |              |              |        |  |
| 10.0 Acute census stays b             | elow budget due to plac   | ement impro     | ovement. Lo | ng Term Ca | re (LTC) census   | remains low  | due to fewer | •      |  |
|                                       | ursing needs were adm     |                 |             |            |                   |              |              |        |  |
|                                       | ture risk renovation proj |                 |             |            |                   |              |              | _      |  |
| delayed. Updated cor                  | npletion date is expecte  | d soon.         |             |            |                   |              |              |        |  |
| 0.0                                   | · · ·                     | 1               |             |            |                   |              |              |        |  |
| Dec-22 Jan-23 Fe                      | eb-23 Mar-23 Apr-2        | .3 May-23       | Jun-23      | Jul-23     | Aug-23 Sep-2      | 3 Oct-23     | Nov-23       | Dec-23 |  |
| Acute —                               | Acute Budget A            | cute (Prior Yea | ar) 📥 Psy   | vch — — Ps | sych Budget 🛛 🗕 🗕 | -LTC         | LTC Budget   |        |  |
|                                       |                           |                 |             |            |                   |              |              |        |  |



#### San Mateo Medical Center Emergency Visits December 31, 2023

|           | MONTH       |         |          |           | YEAR TO DATE  |        |          |           |  |
|-----------|-------------|---------|----------|-----------|---------------|--------|----------|-----------|--|
|           | Actual      | Budget  | Variance | Stoplight | Actual        | Budget | Variance | Stoplight |  |
| ED Visits | 3,928       | 3,389   | 539      | 16%       | 21,314        | 20,116 | 1,198    | 6%        |  |
|           | · · · · · · | · · · · |          |           | <br>· · · · · |        |          |           |  |





#### San Mateo Medical Center Clinic Visits December 31, 2023



The sudden drop in volume in the latter half of December is due to low utilization and staff timeoffs typical in holiday season. Televisits are running at 14% of total visits in FY24 as more patients are opting for in-person visits. Clinic televisits were 22% of total visits in FY23. Early in the pandemic the ratio was as high as 78%.


## **Fee-For-Service Revenue - KPIs**





# **QUESTIONS?**

### San Mateo Medical Center Income Statement December 31, 2023

Variance

С

198,439

Stoplight

D

MONTH

0

Budget

В

Actual

А

198,439

1 Income/Loss (GAAP)

| YEAR TO DATE |        |             |           |  |  |  |  |  |  |
|--------------|--------|-------------|-----------|--|--|--|--|--|--|
| Actual       | Budget | Variance    | Stoplight |  |  |  |  |  |  |
| E            | F      | G           | Н         |  |  |  |  |  |  |
| (2,840,247)  | 0      | (2,840,247) |           |  |  |  |  |  |  |

| 41,819 | 41,439   | 380  | 1%   | 255  | ,403  | 254,394   | 1,009  | 0%  |
|--------|--|--|--|--|---|---|--|---|
| 69,085 | 67,727   | 1,358  | 2%   | 69   | ,085  | 67,727  | 1,358  | 2%  |
| 2,162  | 2,649  | (487)  | -18%   | 13   | ,047  | 15,723  | (2,676)  | -17%  |
| 3,928  | 3,389  | 539  | 16%  | 21   | .,314   | 20,116  | 1,198  | 6%  |
| 219    | 269  | (50)   | -19%   | 1  | .,332   | 1,670   | (338)  | -20%  |
| 21,430 | 24,704   | (3,274)  | -13%   | 137  | ,449  | 153,163   | (15,714)   | -10%  |
| 66,109 | 63,916   | 2,193  | 3%   | 394  | ,923  | 395,722   | (799)  | 0%  |
|        |  |  |  |  |   |   |  |   |
| 5.0%   | 20.0%  | 15.0%  | 75%  | 1  | .4.0%   | 20.0%   | 6.0%   | 30%   |
| 92.0%  | 80.0%  | -12.0%   | -15%   | 8  | 9.0%  | 80.0%   | -9.0%  | -11%  |
|        |  |  |  |  |   |   |  |   |
|        |  |  |  |  |   |   |  |   |
|        |  |  |  |  |   |   |  |   |
| 104    | 171  | (67)   | -39%   |  | 137   | 169   | (32)   | -19%  |
| 372    | 391  | 19   | 5%   |  | 393   | 382   | (11)   | -3%   |
|        |  |  |  |  |   |   |  |   |
| 1,094  | 1,213  | 119  | 10%  | 1  | 134   | 1,213   | 79   | 7%  |
|        | 69,085<br>2,162<br>3,928<br>219<br>21,430<br>66,109<br>5.0%<br>92.0%<br>104<br>372 | 69,085   67,727     2,162   2,649     3,928   3,389     219   269     21,430   24,704     66,109   63,916     5.0%   20.0%     92.0%   80.0%     104   171     372   391 | 69,085   67,727   1,358     2,162   2,649   (487)     3,928   3,389   539     219   269   (50)     21,430   24,704   (3,274)     66,109   63,916   2,193     5.0%   20.0%   15.0%     92.0%   80.0%   -12.0%     104   171   (67)     372   391   19 | 69,085   67,727   1,358   2%     2,162   2,649   (487)   -18%     3,928   3,389   539   16%     219   269   (50)   -19%     21,430   24,704   (3,274)   -13%     66,109   63,916   2,193   3%     5.0%   20.0%   15.0%   75%     92.0%   80.0%   -12.0%   -15%     104   171   (67)   -39%     372   391   19   5% | 69,085 67,727 1,358 2% 69   2,162 2,649 (487) -18% 13   3,928 3,389 539 16% 21   219 269 (50) -19% 1   21,430 24,704 (3,274) -13% 137   66,109 63,916 2,193 3% 394   5.0% 20.0% 15.0% 75% 1   92.0% 80.0% -12.0% -15% 8 | 69,085 67,727 1,358 2% 69,085   2,162 2,649 (487) -18% 13,047   3,928 3,389 539 16% 21,314   219 269 (50) -19% 1,332   21,430 24,704 (3,274) -13% 137,449   66,109 63,916 2,193 3% 394,923   5.0% 20.0% 15.0% 75% 14.0%   92.0% 80.0% -12.0% -15% 89.0%   104 171 (67) -39% 137   372 391 19 5% 393 | 69,085   67,727   1,358   2%   69,085   67,727     2,162   2,649   (487)   -18%   13,047   15,723     3,928   3,389   539   16%   21,314   20,116     219   269   (50)   -19%   1,332   1,670     21,430   24,704   (3,274)   -13%   137,449   153,163     66,109   63,916   2,193   3%   394,923   395,722     5.0%   20.0%   15.0%   75%   14.0%   20.0%     92.0%   80.0%   -12.0%   -15%   89.0%   80.0%     104   171   (67)   -39%   137   169     372   391   19   5%   393   382 | 69,085   67,727   1,358   2%   69,085   67,727   1,358     2,162   2,649   (487)   -18%   13,047   15,723   (2,676)     3,928   3,389   539   16%   21,314   20,116   1,198     219   269   (50)   19%   1,332   1,670   (338)     21,430   24,704   (3,274)   -13%   137,449   153,163   (15,714)     66,109   63,916   2,193   3%   394,923   395,722   (799)     5.0%   20.0%   15.0%   75%   14.0%   20.0%   6.0%     92.0%   80.0%   -12.0%   -15%   89.0%   80.0%   -9.0%     104   171   (67)   -39%   137   169   (32)     372   391   19   5%   393   382   (11) |



#### San Mateo Medical Center Income Statement December 31, 2023

|  | MONTH      |            |             |           | YEAR T      | ) DATE        |              |           |  |
|--|------------|------------|-------------|-----------|-------------|---------------|--------------|-----------|--|
|  | Actual     | Budget     | Variance    | Stoplight | Actual      | Budget        | Variance     | Stoplight |  |
|  | A          | В          | С           | D         | E           | F             | G            | Н         |  |
| 21 Inpatient Gross Revenue                   | 13,241,668 | 14,335,992 | (1,094,324) | -8%       | 73,333,006  | 86,015,953    | (12,682,947) | -15%      |  |
| 22 Outpatient Gross Revenue                  | 33,772,241 | 30,680,132 | 3,092,109   | 10%       | 180,017,215 | 5 184,080,791 | (4,063,577)  | -2%       |  |
| 23 Total Gross Revenue                       | 47,013,909 | 45,016,124 | 1,997,785   | 4%        | 253,350,222 | 270,096,745   | (16,746,524) | -6%       |  |
| 24 Patient Net Revenue                       | 7,842,477  | 14,288,817 | (6,446,340) | -45%      | 65,001,042  | 85,732,899    | (20,731,859) | -24%      |  |
| 25 Net Patient Revenue as % of Gross Revenue | 16.7%      | 31.7%      | -15.1%      | -47%      | 25.7        | % 31.7%       | -6.1%        | -19%      |  |
| 26 Capitation Revenue                        | 456,550    | 510,911    | (54,361)    | -11%      | 2,773,464   | 3,065,468     | (292,005)    | -10%      |  |
|  | · · · ·    |            |             |           |             |               |              |           |  |
| 27 Supplemental Patient Program Revenue      | 17,055,418 | 13,312,505 | 3,742,913   | 28%       | 86,747,648  |               | 6,872,620    | 9%        |  |
| Volume Based (GPP, EPP, VRR, AB915)          | 7,024,141  | 6,889,343  | 134,799     | 2%        | 47,732,388  | 41,336,056    | 6,396,332    | 15%       |  |
| Value Based (QIP, HPSM P4P)                  | 7,956,857  | 3,100,472  | 4,856,385   | 157%      | 21,980,162  | 18,602,833    | 3,377,328    | 18%       |  |
| Other  | 2,074,420  | 3,322,690  | (1,248,270) | -38%      | 17,035,099  | 19,936,139    | (2,901,040)  | -15%      |  |
| 28 Total Patient Net and Program Revenue     | 25,354,445 | 28,112,233 | (2,757,788) | -10%      | 154,522,153 | 168,673,396   | (14,151,244) | -8%       |  |
| 9 Other Operating Revenue                    | 2,323,606  | 1,171,103  | 1,152,503   | 98%       | 7,807,082   | 7,026,619     | 780,462      | 11%       |  |
| 0 Total Operating Revenue                    | 27,678,051 | 29,283,336 | (1,605,285) | -5%       | 162,329,234 | 175,700,015   | (13,370,782) | -8%       |  |



#### San Mateo Medical Center Income Statement December 31, 2023

|  | MONTH       |                |             |           | г | YEAR TO DATE |              |             |           |  |
|--|-------------|----------------|-------------|-----------|---|--------------|--------------|-------------|-----------|--|
|  |             |                |             |           | ŀ |              |              |             | <u> </u>  |  |
|  | Actual      | Budget         | Variance    | Stoplight |   | Actual       | Budget       | Variance    | Stoplight |  |
|  | A           | В              | С           | D         |   | E            | F            | G           | Н         |  |
| Operating Expenses                       |             |                |             |           | г |              |              |             |           |  |
| 31 Salaries & Benefits                   | 16,309,966  | 19,747,380     | 3,437,414   | 17%       |   | 103,675,415  | 118,484,277  | 14,808,863  | 12%       |  |
| 32 Drugs                                 | 1,584,187   | 1,246,836      | (337,350)   | -27%      |   | 8,874,080    | 7,481,018    | (1,393,061) | -19%      |  |
| 33 Supplies                              | 1,083,349   | 1,142,708      | 59,360      | 5%        |   | 6,835,044    | 6,856,251    | 21,207      | 0%        |  |
| 34 Contract Provider Services            | 4,416,146   | 4,127,930      | (288,216)   | -7%       |   | 28,403,680   | 24,767,579   | (3,636,101) | -15%      |  |
| Registry                                 | 1,511,205   | <i>699,888</i> | (811,317)   | -116%     |   | 9,893,928    | 4,199,330    | (5,694,598) | -136%     |  |
| Contract Provider                        | 2,329,942   | 3,021,524      | 691,582     | 23%       |   | 15,645,383   | 18,129,144   | 2,483,761   | 14%       |  |
| ACE Out of Network                       | 521,785     | 351,675        | (170,110)   | -48%      |   | 2,588,032    | 2,110,050    | (477,982)   | -23%      |  |
| Other                                    | 66,661      | 54,843         | (11,818)    | -22%      |   | 288,877      | 329,055      | 40,178      | 12%       |  |
| 35 Other fees and purchased services     | 7,662,423   | 6,538,714      | (1,123,709) | -17%      |   | 40,756,561   | 39,232,287   | (1,524,274) | -4%       |  |
| 36 Other general expenses                | 500,974     | 784,425        | 283,451     | 36%       |   | 4,375,772    | 4,706,549    | 330,777     | 7%        |  |
| 37 Rental Expense                        | 173,398     | 173,397        | (1)         | 0%        |   | 1,116,552    | 1,040,383    | (76,169)    | -7%       |  |
| 38 Lease Expense                         | 1,374,465   | 729,484        | (644,980)   | -88%      |   | 8,246,787    | 4,376,906    | (3,869,881) | -88%      |  |
| 39 Depreciation                          | 302,880     | 330,567        | 27,688      | 8%        |   | 1,804,731    | 1,983,403    | 178,672     | 9%        |  |
| 40 Total Operating Expenses              | 33,407,787  | 34,821,443     | 1,413,656   | 4%        |   | 204,088,624  | 208,928,656  | 4,840,032   | 2%        |  |
|  |             |                |             |           | _ |              |              |             |           |  |
| 41 Operating Income/Loss                 | (5,729,736) | (5,538,107)    | (191,629)   | -3%       |   | (41,759,390) | (33,228,641) | (8,530,749) | -26%      |  |
| 42 Non-Operating Revenue/Expense         | 626,373     | 236,305        | 390,068     | 165%      | Γ | 7,408,900    | 1,417,831    | 5,991,070   | 423%      |  |
|  | · · ·       |                |             |           | - |              |              | · · ·       |           |  |
| 43 Contribution from County General Fund | 5,301,802   | 5,301,802      | -           | 0%        |   | 31,510,811   | 31,810,811   | (300,000)   | -1%       |  |
| 44 Total Income/Loss (GAAP)              | 198,439     | 0              | 198,439     |           | ٢ | (2,839,680)  | 0            | (2,839,680) |           |  |
| (Change in Net Assets)                   |             |                | ·           |           | - | <u>···</u> · |              |             |           |  |



#### San Mateo Medical Center Payer Mix December 31, 2023

|                             | MONTH  |        |          |           | YEAR T | O DATE |          |           |
|-----------------------------|--------|--------|----------|-----------|--------|--------|----------|-----------|
|                             | Actual | Budget | Variance | Stoplight | Actual | Budget | Variance | Stoplight |
| Payer Type by Gross Revenue | А      | В      | С        | D         | E      | F      | G        | Н         |
| Medicare                    | 19.9%  | 21.1%  | -1.2%    |           | 19.9%  | 21.1%  | -1.3%    |           |
| Medi-Cal                    | 64.4%  | 64.7%  | -0.2%    |           | 65.1%  | 64.7%  | 0.5%     |           |
| Self Pay                    | 3.4%   | 1.4%   | 2.0%     |           | 2.6%   | 1.4%   | 1.2%     |           |
| Other                       | 4.4%   | 3.7%   | 0.7%     |           | 3.7%   | 3.7%   | 0.0%     |           |
| ACE/ACE County              | 7.8%   | 9.1%   | -1.2%    |           | 8.7%   | 9.1%   | -0.4%    |           |
| Total                       | 100.0% | 100.0% |          |           | 100.0% | 100.0% |          |           |





# **Fee-For-Service Patient Revenue Trend**



Budgeted PCR 33.9% (FY22), 31.2% (FY23), 31.7% (FY24)

Gross patient revenue is hovering around \$42M/month. The collection rate (PCR) in FY24 YTD is trending at average 26%. Low PCR in Oct 23 is due to delay in patient revenue recognition in part due to CorroHealth. PCR surge in Nov 23 and drop in Dec 23 was due to one-time adjustments. PCR is expected to remain in mid/high 20s for the rest of this fiscal year.

# **Fee-For-Service Commercial Collections**



July 2020 MMX began supporting PFS with Commercial Collections



# **Fee-For-Service Self Pay Collections**



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



# **Revenue Mix**



Total YTD Revenue of \$194 million consists of 45% in Supplemental Programs and 34% in Fee For Service

### Health Plan of San Mateo (HPSM) represents 38% 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 26% of total revenue
- Volume-Based supplemental programs, plus FFS revenue, represent 56% of total revenue





#### Salaries & Benefits represent 51% of total expenses

Personnel costs\* represent 65% of total expenses

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



### CEO Report February 2024







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.

# Staff Engagement



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



**SMMC Integr8 Health Pulse Survey:** As part of Integr8 Health (SMC Health's Epic implementation), we are performing quarterly pulse surveys to evaluate staff engagement during the effort. This graph represents the percentage of staff who agree or strongly agree that they would recommend the organization as a great place to work. **Higher is better.** 

### **Strategic Updates, Recognitions & Awards**



*Pictured above left to right:* 2023 SMMC Management Development Program Graduates Cathena Campbell, Martin Rogers and Portia Dixon. Each is pictured with Rocio Kiryczun, Director of SMC Human Resources and Michael Callagy, San Mateo County Executive Officer.

#### Three SMMC Leaders Never Stop Learning

In 2002, the County launched the Management Development Program (MDP) as an internal leadership initiative. Led by our County executives and managers, MDP is one of the top upper division development programs within our organization. The purpose of the program is to help new managers emerge into strong multi-faceted leaders and to further foster our "Never Stop Learning" culture.

Recognizing the evolving need to develop managers and prepare them for today's challenges, MDP has been a crucial part of the County's leadership development strategy for more than 10 years.

Congratulations to Cathena Campbell, Clinical Services Manager II; Portia Dixon, Patient Financial Services Manager; and Martin Rogers, Hospital and Clinics Finance Manager; who recently graduated from the Management Development Program. We are proud of your dedication to personal development!

#### SMMC Leaders Recognized by Women in County Government

Three amazing SMMC leaders were recently recognized with nominations for 2023 awards at the 33<sup>rd</sup> Annual Recognition and Charity Luncheon organized by SMC Women in County Government. Trish Erwin, Clinics Manager of Fair Oaks Health Center, was nominated for the award for Self-Development Champion while Rakhi Singh, Supervising Physician at Fair Oaks Health Center and Mithu Tharayil, former Supervising Physician for Adolescent Services were recognized with nominations in Public Service/ Going the Extra Mile. Congratulations to all three of these incredible leaders for these recognitions.

#### Another Successful HOGs Event

On December 2, 2023, Santa again arrived at SMMC on his Harley to distribute toys and joy to children from our community. This was the 34<sup>th</sup> Annual Holiday Toy Drive that is hosted as a partnership between the Golden Gate Chapter of the Harley Owners Group (HOGs), San Mateo Medical Center and the San Mateo County Health Foundation. This year we received nearly 400 toys from the Golden Gate HOGs, staff, the National Charity League, and the Newcomers Club of San Mateo. Each child was able to pick their favorite toy during the event and all other toys were distributed to SMMC pediatric and teen clinics.

Thank you to Berenyce Alonso, Jen Gordon, the San Mateo Health Foundation, volunteers, donors and most especially the HOGs for their generosity this holiday season.

#### Integr8 Health Efforts Continue to Progress

Integr8 Health, our Epic implementation, is now halfway through our "build" activities. Our Improvement Councils, Design Teams and Project Team have now completed **over 20,000** tasks necessary for a successful implementation; this includes completing **over 4500** "building blocks", key decisions to guide the build. This work will continue through the first week of March. The teams are also identifying where workflow changes might be required to support the best use of the system. We look forward to using our improvement system and tools to address these needs. We will continue to update the board as this work progresses.

### **2023 Accomplishments**

As we close out 2023, we recognize that though we continued to encounter challenges, it was a highly successful year. This is an opportunity to take stock and celebrate our accomplishments.



- SMMC was recognized by the California Department of Health Care Services for its performance in the California Quality Incentive Pool (a Medi-Cal pay for performance program) with Performance Resilience and Quality Synergy Awards.
- SMMC Laboratory Services had a highly successful biennial Joint Commission survey.
- Psychiatric Emergency Services had a highly successful Medi-Cal site recertification visit by the Department of Health Care Services.
- The Health Care for the Homeless/ Farmworker Health Program was recognized by the Health Resources and Services Administration (HRSA) with Community Health Quality Recognition badges in 1) Addressing Social Risk Factors and 2) Advancing Health Information Technology for Quality.
- Our radiology department advanced multiple upgrades to better serve our patients these included:
  - o Replaced 4 out of 5 diagnostic ultrasound machines
  - Replaced 2 of 3 cardiac ultrasound machines.
  - Replaced 2 of 2 C-arms used in the OR
  - o Upgraded from 2D mammography to 3D tomosynthesis
  - o Added software to enhance our ability to do pediatric scoliosis and bone length studies
  - Upgraded MRI software and hardware including changes to help those with claustrophobia
- The Health Care for the Homeless and Farmworker Health Program partnered with the Half Moon Bay Library to make blood pressure cuffs accessible to members of the community with a library card.
- The Health Care for the Homeless and Farmworker Health Program purchased medical equipment for various units including:
  - Optometry clinics Visual Field Analyzer, Optometry Slit Lamp, exam chair, office shelving
  - OB/GYN clinics Exam tables
  - Family Health Services Adjustable occupational therapy tables, durable medical equipment
- The Health Care for the Homeless and Farmworker Health Program provided COVID testing kits to shelters.
- Dental Services introduced premolar sealants, gross debridement, and additional procedures for higher quality patient care.
- The Medical Staff Office supported contracted providers in achieving a 98% completion rate for the annual Compliance training.
- Rehabilitative Services implemented a process so that patients undergoing a total knee replacement are treated with a cryotherapy unit post-op to help with inflammation and pain.



- Rehabilitative Services led by Nabeel Bhatti, Physical Therapist and Ana Radich, Occupational Therapist, created a video containing 5 easy-to-do exercises that teens could do to improve circulation and movement during classes.
- The 1A Skilled Nursing Unit was recognized by Pinnacle Quality Insight with Customer Experience Awards in the areas of Overall Satisfaction, Nursing Care and Laundry Service.
- Fair Oaks Health Center hosted a Community Day for patients inviting participation from 13 community-based organizations with the goal of building stronger community relationships.
- In July SMMC partnered with the Golden Gate Harley Owners Group and the San Mateo County Health Foundation for the 14<sup>th</sup> Annual School Supply Run providing backpacks and school supplies to pediatric patients.
- In December, SMMC partnered with the Golden Gate Harley Owners Group and the San Mateo County Health Foundation for the 34th Annual Holiday Toy Run distributing toys to pediatric patients.
- The Health Care for the Homeless and Farmworker Health Program provided winter supplies for people experiencing homelessness by procuring sanitation items, jackets, gloves, socks, etc., for contractors including Behavioral Health and Recovery Services and Public Health Planning and Policy.
- The Health Care for the Homeless and Farmworker Health Program provided supplies for the "Care Closets" at SMMC including clean, new clothing for those in need who were being discharged from the hospital.
- The Health Care for the Homeless and Farmworker Health Program hosted training on traumainformed care and motivational interviewing for case managers, enhancing patient-provider interactions.
- The Health Care for the Homeless and Farmworker Health Program completed a Needs Assessment that identified priorities in transportation, service quality and community activities providing emotional support.
- The Emergency Department has established programs around Meaningful Rounding and standardizing the discharge process which have significantly improved patient experience.
- Inpatient Rehabilitative Services opened a learning skills lab. This is a patient-facing home learning lab with equipment/supplies for basic cooking (no stoves but crock pots, microwave, an electric skillet, etc.), drawers/hangers and clothing, a bathroom set-up, a desk/table for activities with OT/Speech. This is located on 1B. Patients can practice skills needed prior to discharge and be better prepared.
- Food and Nutrition Services create an "Outage Menu" to ensure they can provide meals to patients during a power outage.



• In honor of Women's History Month in March, SMMC published a five-part series highlighting some of the Medical Center's female leaders including: Merrin Thompson, Clinic Nutrition Manager, Cathena Campbell, Clinical Services Resource Manager, Frances Becker, Supervising Creative Arts Therapist, Dr. Elisa Nasol, staff physician at Daly City Clinic and Jennifer Obina of Infection Control.

- Fair Oaks Health Center, supported by Resilient Beginnings Network and the San Mateo County Health Foundation, transformed its patio into a welcoming, peaceful courtyard where staff can enjoy physical and mental refreshment whenever they need it.
- In July, SMMC welcomed new Medical Staff Leadership as Dr. Frank Trinh was elected Chief of Staff and Dr. Scott Oesterling was elected Vice Chief of Staff. This was also an opportunity to thank outgoing Chief of Staff, Dr. Steve Hassid, and outgoing Vice Chief of Staff, Dr. Brita Almog, for their years of service in those roles.
- Dr. Yousef Turshani, SMMC's Chief Medical Officer and a member of the American Board of Pediatrics Board of Directors was recognized with the 2023 Racial Justice in Medicine Award from the American Medical Student Association.
- In September, SMMC celebrated the 100<sup>th</sup> anniversary of its San Mateo Campus on 39<sup>th</sup> Avenue.
- Gloria Lara of Rehabilitative Services, Julie Birdsong, OB/GYN Supervising Nurse Practitioner and Richard Marshall-Marino of Medical Coding were recognized as Wellness Leaders by the County Wellness Committee.
- Geri Archibald, Nurse Practitioner and Clinical Coordinator at the Keller Center for Family Violence Intervention at SMMC was recognized as the 2023 winner of the annual Barbara Hammerman Award.
- Niloofar Zabihi, Senior Clinical Pharmacist at SMMC, was featured in a video produced by the California Department of Public Health to raise awareness of the importance of appropriate antimicrobial use during National Antibiotic Awareness Week.
- SMMC welcomed its inaugural Staff Wellbeing and Engagement Officer, Kathy Reyes
- Radiology worked with the Canada College Radiologic Technologist Program to increase our capacity to host students who had fallen behind in their practical experience due to the pandemic.
- Radiology continued to be a training site for Contra Costa Community College's Diagnostic Ultrasound students, and we have hired one as a staff member with more expressing interest in joining us when they complete training.
- Financial Services developed a Quick Reference Guide to clarify the specific roles & responsibilities of key positions/people in the Finance department as a first step towards creating training and mentorship opportunities.
- Financial Services introduced a number of process improvements to better use tools and technology. These include:
  - Use of DocuStream technology to automate the following manual workflows/tasks:
    - Creation of dental claim forms, resulting in savings of 20 hours per month
    - Processing of contract approval routing forms, eliminating at least 10 unnecessary emails per contract.
  - Automated the manual creation and distribution of the daily reconciliation report of patient registration and charge capture errors so that front-line staff now receive in a more consistent and timely manner, saving Finance staff 90 minutes per day.
  - Used Power BI software to automate creation and distribution of several finance reports, such as the labor productivity report and several volume/revenue trend reports.
  - Created a Salary & Benefits estimator tool to help Managers with budgeting and planning data.
  - Implemented the Streamline software tool to automate the creation of medical record coding work queues, saving staff 7-10 hours of manual work per week.
  - Transitioned clinic physician coding to external professional coders, augmented with Artificial Intelligence.
  - Partnered with the Controller's Office to roll-out Workday's employee expense reimbursement system.
  - Automated the creation of federally mandated "Good Faith Estimates" and increase compliance rates from 77% initially to 91% at year end.

- The Emergency Department worked with the San Mateo Police Department and SMMC Security to develop an entry plan for the Police Department into the ED in a manner that maintains security and safety for all stakeholders.
- The annual Medical Staff Dinner hosted by the SMMC Medical Staff and supported by the Medical Staff Office welcomed over 100 providers attending in person and honored Dr. Stan Rockman and Dr. Scott Morrow for 50 and 30 years of service respectively.
- The Medical Staff Office onboarded and facilitated preceptorship for over 100 medical students, residents, fellows, and nurse practitioner/physician assistant students. Several have expressed interest in long term positions with SMMC.
- To keep staff updated on Integr8 Health, our Epic implementation, the communications team launched a SharePoint site, weekly update, and monthly newsletter.
- SMMC Communications also launched a quarterly pulse survey to gather staff feedback about Integr8 Health communications, recognitions, and well-being related issues.
- Integrated Behavioral Health presented a poster at the Association for Applied Psychophysiology Biofeedback's Annual Scientific Meeting. The poster was entitled: *Integrating Biofeedback into a Primary Care Mental Health Program.*

# Access to Care

- With support from the San Mateo County Health Foundation and a grant from the Joseph and Vera Long Foundation, SMMC opened a new Lactation Lounge for patients on the third floor of the 39<sup>th</sup> Avenue clinics building.
- SMMC is grateful to participate in resumed planning for a new County building that will provide a new home for the South San Francisco Health Center amongst other County services.
- The Health Care for the Homeless and Farmworker Health Program facilitated contracting with the University of Pacific School of Dentistry to provide on-site 5 days a week dental services to residents of the Navigation Center and patients experiencing homelessness referred for care.
- The Health Care for the Homeless and Farmworker Health Program provided ongoing technical assistance, onboarding, and services coordination (including with SMMC and PHPP) to Healthcare in Action (primary care provider at the Navigation Center).
- The Health Care for the Homeless and Farmworker Health Program distributed phones to people experiencing homelessness around San Mateo County who could benefit from accessing virtual care with SMMC providers. The Goal of this project is to improve clients' virtual access and health outcomes.
- The Health Care for the Homeless and Farmworker Health Program partnered with Public Health, Policy and Planning, Puente de la Costa Sur, and Daly City Partnerships to expand COVID vaccinations.
- Through a variety of initiatives, SMMC Dental Services reduced their waitlist for comprehensive services from 1443 to 669 by the end of 2023.
- Dental Services increased the number of completed treatment plans to 1984 from 1753 in 2022.
- Dental Services increased visits for children under the age of three to four times a year, offering comprehensive care in a single visit.
- The Emergency Department revamped their "Fast Track" workflow to start patient care sooner and decrease wait times.
- Rehabilitative Services expanded to include Physical Therapy service at the Daly City Clinic.



- The SMMC Finance Team launched their Financial Services Team Strategic Plan focused on People, Process and Technology.
- Financial Services created a Financial Services Resources Center SharePoint site to provide ready access to key finance-related policies, documents and other important information on budgeting, key performance indicators, contracting and financial processes. This site also includes new Organizational Intelligence (OI) self-service training/refresher tools with videos and tutorials available.
- The Emergency Department evaluated and implemented changes to supply types to decrease waste and costs.
- Working collaboratively with patients and care teams, Resource Management has reduced the average length of stay for inpatients by 10%.
- SMMC had its 10<sup>th</sup> straight year with clean Financial Statement audits with no findings.
- SMMC completed the FQHC rate change requests for 5 clinics resulting in a 5% increase in rates.
- SMMC utilized eCareNEXT software to achieve a patient registration accuracy rate of 95%, resulting in fewer errors & missing charges and a decrease in claim denials below the industry standard of 2%.
- SMMC completed a Value Based Care roadmap analysis to support our future planning for transitioning from fee-for-service models of reimbursement.
- The Health Care for the Homeless and Farmworker Health Program partnered with SMC Health Administration to raise over \$300,000 for services (particularly dental) at the Navigation Center from a variety of funders including:
  - o Kaiser Permanente
  - Sequoia Health Care District
  - o The Chan Zuckerberg Initiative
- The Health Care for the Homeless and Farmworker Health Program successfully completed their HRSA Service Area Competition application covering 2024 to 2026 thus securing federal funding for the program and maintaining SMMC clinics' status as Federally Qualified Health Center.

###



### January 2024

## SNAPSHOT: San Mateo County Health

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

| INDICATOR                           | NUMBER               | CHANGE FROM<br>PREVIOUS MONTH | CHANGE FROM<br>PREVIOUS YEAR |
|-------------------------------------|----------------------|-------------------------------|------------------------------|
| ACE Enrollees                       | 14,700<br>(December) | 2.1%                          | -34.6%                       |
| SMMC Emergency<br>Department Visits | 3,991<br>(December)  | 22.6%                         | 13.9%                        |

### Women in County Government Honors BHRS Staff



Women in County Government annually recognizes County staff for their commitment to community service, development and public service at its Holiday Charity and Appreciation Luncheon. Ziomara Ochoa (pictured) received the Development Champion award for her work as deputy director of Child and Youth Services for Behavioral Health and Recovery Services (BHRS). Sandy Torres, mental health counselor and member of **BHRS'** Crisis Response Team, was honored with the Public Service: Going the Extra Mile award for her counseling and language services to the survivors of the mass shooting in Half Moon Bay and their families and for her work on assisted outpatient treatment, where she helps clients with severe mental illness connect to services.

Special recognition was also given to all the County Health nominees for their outstanding contributions: Tamarra Jones, Deandra Lee, Trish Erwin, Linda Hildreth, Sandra Ma, Camelot Thompson, Gina Wilson, Maty Brito, Virginia Di-Paola, Carlye Hatwood, Valerie Nolan, Rakhi Singh and Mithu Tharayil.

### **New Equity Awareness and Observance Series Launched**

The Health Policy and Planning team has introduced an equity awareness and observance series with a curriculum **available through the County's** Learning Management System to provide staff with inclusive and informative content. Each topic within the series provides background materials, calls to action and other resources. Previous offerings include <u>World AIDS Day</u>, <u>Transgender Awareness Week</u> and <u>World Religion Day</u>. Additional topics will be presented throughout the year, including Mental Health Awareness month, Juneteenth and Disability Awareness Month.

### County Health Staff Contribute to Tuberculosis Bone Allograft Research

The Center for Disease Control and Prevention's (CDC) *Morbidity and Mortality Weekly Report* for January 5, 2024 included the study "Second Nationwide Tuberculosis Outbreak Caused by Bone <u>Allografts Containing Live Cells</u>," co-authored by Myron Coloma, a public health nurse in Public Health, Policy and Planning. In July 2023, the CDC identified a nationwide tuberculosis (TB) outbreak in the United States, involving two patients who developed TB after spinal surgical procedures using bone allografts from the same deceased donor. This outbreak was similar to an incident in 2021, leading to concerns of a repeated outbreak.

When an investigation confirmed a related outbreak affecting 36 bone allograft recipients, the product was removed from further distribution, which prevented implantation in up to 53 additional persons. The research highlighted the urgent need for improved donor screenings and additional measures to protect patients from tissue transmitted disease.

The study also acknowledged the work of Lisa Goozé and Che Waterman of the TB Control program.

### **PHPP Strategic Plan Engages with Community**



Public Health, Policy & Planning (PHPP) has begun the process to produce a strategic plan that focuses on improving health outcomes in San Mateo County. The first phase, the Community Health Assessment (CHA), has concluded and involved over 150 participants. The process included an overview of health data presented to community members at multiple forums throughout the county in English and Spanish.

In addition to the forums, PHPP surveyed more than 3,000 residents. The survey captured data stratified by race, language, and age on the

factors that influence health outcomes, including affordable housing, childcare, education, employment, air and water quality, civic participation, neighborhood safety, access to health care services, and physical activity.

The second phase, the Community Health Improvement Plan (CHIP), is currently underway. The kick-off meeting drew representatives from over 90 community-based organizations, along with local hospitals, the Health Plan of San Mateo, community advocates and leaders and County Health staff. An internal steering committee will further prioritize the three health focus areas – mental health and mental disorders, access to health care services and social determinants of health – for the 2024-2026 CHIP and will continue to hold workgroups with community partners to co-develop a health improvement plan for the three health priorities. For additional information and future CHIP workshops, please see the <u>PHPP</u> <u>Strategic Direction</u> webpage.



