

San Joaquin County Clinics
Minutes of December 1, 2011
Community Board Meeting

1414 N. California Street, 2nd Floor
Dorothy Chase Conference Room
Stockton, CA 95202

Board Members Present

Ogechi Achunine
Raymond "Jim" Dubois
Bernadette Hanna
Alvin Maldonado
Regina McMahon
Ismael Cortez
Theresa Melish

Health Care Services Agency and SJGH Staff Present

Ken Cohen
Margaret Szczepaniak
Leilani Chua
Samantha Phillips-Bland, SJGH Senior Deputy Director of Ambulatory Care Services
Carmen Murillo, BHS (Interpreter)

Call to Order

The meeting was called to order at 5:08 p.m. by Chair, Alvin Maldonado.

Approval of Minutes of October 27, 2011 and September 29, 2011 Meetings

M/S/A (Dubois/Melish) to approve the minutes as written for September.
M/S/A (Melish/Dubois) to approve the minutes as written for October.

Public Comment

Theresa Melish requested a roster with all Board members names and phone numbers be distributed to the board.

Alvin expressed concern about not having a quorum in the future, and perhaps the members should call each other. Margaret Szczepaniak informed the Board that before each meeting, Cynthia King will be calling the members to ensure a quorum.

The Board discussed the need for new members; the vacancy for API representative; and the outreach staff has conducted to date.

Discussion Items

a. Follow up on Patient Centered Medical Homes

Samantha Phillips-Bland expressed appreciation for what was shared by Board members in the previous meeting. She assured the Board the information was being used to shape improvements at the clinics. The information had also been shared with the physicians and staff. The physicians will participate in an upcoming training on working with patients to enhance communication skills.

Samantha discussed what improvements are being planned and implemented at the County clinics. This includes assigning patients a Primary Care Physician (PCP) and listing this information on ID Health Cards; mailing letters to patients introducing their new PCP; better coordination and attendance of follow-up and referral appointments; offering after-hour clinics; increasing health care providers; increasing staff who screen for Medi-cal eligibility; and educating patients on the progress towards moving to a Patient Centered Medical Home Model.

Starting January 1st, all Health Plan of San Joaquin (HPSJ) patients will be assigned to a primary care provider. In the coming months, all Medical Assistance Program (MAP) patients will also be assigned a primary care provider (PCP). Samantha announced the new providers hired for the Primary Care Clinic have enhanced access and the patient visits are up 40% from July. Theresa shared that is good news as she has had frustrating experiences with obtaining follow-up appointments.

Samantha passed out a draft contact information brochure for review by the CCCB. The contact information brochure will list San Joaquin General Hospital Clinic phone numbers as well as other key departments that patients obtain services from. It will be available in the clinics, and available in English and Spanish. She also shared the logos for a new Button for staff "Ask me about your medical home" and banners that would be placed in the clinics.

Samantha advised the Board that clinic hours over the holidays are as follows:

Closed Monday 12/26/11

Closed Monday 1/2/12

Primary Medical Clinic will be open for walk-ins from 8-12 noon on Friday 12/23 and 12/30.

Ray DuBois asked about the Medi-Cal Office in the clinic atrium. It was explained this was an expansion of the existing space, which previously wasn't very visible. The expanded presence will help patients enroll onto Medi-Cal which in turn should enhance reimbursement for the clinics and for the SJGH.

b. **Preliminary Budget and Staffing Issues**

Samantha has been reviewing clinics monthly reports and assisting clinic managers in identifying and analyzing key findings such as costs of labor and supplies as well as the correlation of clinic activities or trends. Samantha outlined how she is holding the clinic managers accountable through review of visits, productivity and cost. She reported she expects to see some overtime to ensure that patients at the end of the day are being seen, but these costs are manageable.

Primary Medicine Clinic visits have increased over the last 3 months due to the addition of new physicians while Children's Health Services visits have decreased due to the loss of a physician. Family Medicine Clinic typically reports lower visits the first quarter of the fiscal year (FY) versus the rest of the FY as new resident physicians are starting and in the process of training. Due to only one attending physician in the Internal Medicine Clinic, that clinic is closed to new patients at this time.

Margaret stated the budget process for FY 2012-13 will begin in February. Samantha will keep the FQHC Board aware of the FQHC clinics budget planning. Samantha discussed changes to lower the "Did Not Keep Appointment" or DNKA rate. It is down from over 50% to about 18-20%. She announced changes in the phone appointment reminder system and how staff is reminding patients about appointments. Based on experiences by the FQHC Board members, it was clear the appointment system still has some issues such as when the reminder calls are made. It was suggested calls should be made no later than 2 days prior to the appointment, so patients would have an opportunity to cancel.

Ismael Cortez asked how patients are being informed of the changes that are occurring in the clinics. He suggested that a bulletin board in an accessible place in the clinics be established to post agenda, minutes or to post other announcements about clinic operations. It was noted there is a website which has the Board Agendas and minutes at www.sjhealthcare.com (click the CCCB Board tab).

Bernadette Hanna inquired about automated pharmacy refills. Samantha noted that the pharmacy refill center is currently recruiting for a pharmacist specifically tasked with handling automated pharmacy refill requests,.

Samantha discussed the launch of the patient satisfaction survey which will be conducted by Press-Gainey.

Staff Report

Margaret announced the Low Income Health Program (LIHP) will be launched in March of 2012. It will provide an expanded scope of services over what is offered in the MAP program. It is targeted at very low income persons (80% of the FPL versus 200% currently covered by MAP). Existing MAP clients who meet the income standards will be transitioned into the program and assigned to a medical home.

Next Meeting

The next Board meeting will be held on January 26, 2012 at 5 p.m. at 1414 N. California Street, 2nd floor, Dorothy Chase Conference Room.

Adjournment

The meeting was adjourned at 6:30 p.m.

Respectfully Submitted,

| Theresa Melish, Secretary