



SAN MATEO COUNTY HEALTH

**SAN MATEO
MEDICAL CENTER**

BOARD OF DIRECTORS MEETING

Monday, October 5, 2020

8:00 AM – 10:00 AM



AGENDA

Board of Directors

Wednesday, Oct. 5, 2020

8:00 AM

*****BY VIDEOCONFERENCE ONLY*****

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

Public Participation

The meeting may be accessed through Zoom at <https://smcgov.zoom.us/j/96826757432>. Written public comments may be emailed to mlee@smcgov.org and should include the specific agenda item on which you are commenting. Spoken public comments will also be accepted during the meeting through Zoom.

A. CALL TO ORDER AND PUBLIC COMMENT

B. CLOSED SESSION

Items Requiring Action

1. Medical Staff Credentialing Report
2. Quality Report

*Dr. Steve Hassid
Dr. Brita Almog*

Informational Items

3. Medical Executive Committee

Dr. Steve Hassid

C. REPORT OUT OF CLOSED SESSION

D. PUBLIC COMMENT

Persons wishing to address items not on the agenda

E. FOUNDATION REPORT

John Jurow

F. CONSENT AGENDA

Approval of:

1. August 3, 2020 Minutes

G. MEDICAL STAFF REPORT

Chief of Staff Update

Dr. Steve Hassid

H. ADMINISTRATION REPORTS

1. Department of Medicine
2. Compliance and Privacy Report
3. Great Plates Delivered
4. Financial Report
5. CEO Report

Dr. Alpa Sanghavi

Dr. Suja Georgie, Robbi Larcina

Gabriela Behn

Louise Rogers

Lisa Mancini

David McGrew

Dr. CJ Kunnappilly

I. COUNTY HEALTH CHIEF REPORT

County Health Snapshot

Louise Rogers

J. COUNTY MANAGER'S REPORT

Mike Callagy

K. BOARD OF SUPERVISOR'S REPORT

Supervisor Carole Groom

L. ADJOURNMENT

TAB 1

**CONSENT
AGENDA**

HOSPITAL BOARD OF DIRECTORS
MEETING MINUTES
Monday, August 3, 2020
Microsoft Teams Meeting

Board Members Present

Supervisor Carole Groom
Supervisor David Canepa
Louise Rogers
Dr. CJ Kunnappilly
Dr. Steve Hassid
Dr. Brita Almog
Dr. Gordon Mak
Deborah Torres

Staff Present

Michelle Lee	Karen Pugh	Brighton Ncube
David McGrew	Gabriela Behn	Luci Latu
Dr. Susan Fernyak	John Jurow	
Robert Blake	Angela Gonzales	
Peggy Jensen	Paul Rogerville	
Aimee Armsby	Jacqueline Pelka	
Naomi Yunker	Kelly Broderick	

Members of the Public

ITEM	DISCUSSION/RECOMMENDATION	ACTION
Call to Order	Supervisor Groom called the meeting to order at 8:00 AM, and the Board adjourned to Closed Session.	
Reconvene to Open Session	The meeting was reconvened at 8:20 AM to Open Session. A quorum was present (see above).	
Report out of Closed Session	Medical Staff Credentialing Report for August 3, 2020. QIC Minutes from June 23, 2020. Medical Executive Committee Minutes from July 14, 2020.	Aimee Armsby reported that the Board unanimously approved the Credentialing Report and the QIC Minutes and accepted the MEC Minutes.
Public Comment	None.	
Foundation Report	John Jurow reported that donations are continuing to come in. The Golf Tournament will take place on September 14 at the Sharon Heights Golf Course. New Foundation Board members are Jacqueline Pelka, Emily Weaver, and Yvonne Webb. We are happy to welcome them onboard and look forward to working with them.	FYI
Consent Agenda	Approval of: 1. Hospital Board Meeting Minutes from July 6, 2020.	It was MOVED, SECONDED and CARRIED unanimously to approve all items on the Consent Agenda.

<p>Medical Staff Report Dr. Steve Hassid</p>	<p>Medical Staff are focused on the budget and further discussions will be had with members.</p>	<p>FYI</p>
<p>Department of Diagnostic Imaging Jacqueline Pelka</p>	<p>Procedures we do:</p> <ul style="list-style-type: none"> • Echocardiography; 24 hr Holter Monitors; Cardiac Stress Tests • Electronecephalogram (EEG); Electromyography (EMG) • Computerized Tomography (CT); Diagnostic X-ray; Fluoroscopy; Interventional Radiology (IR); Mammography;Magnetic Resonance Imaging (MRI); Ultrasound • <p>Staffing: 20 technologists with 4 US Call Techs; 3 Cardiologists, 2 Neurologists, 2.5 Radiologists, 8 Support staff</p> <p>Accomplishments</p> <ul style="list-style-type: none"> • CT Accreditation by American College of Radiology (ACR)- Requirement for Medi-Cal reimbursement. • Department of Public Health-Affiliated Clinical Site Inspection for Canada College • Annual MQSA Inspection for Mammography • Department of Public Health Inspection for Radiology • Software Upgrades for Carestream and Powerscribe • Statrad- Teleradiology Vendor Change <p>Department Projects</p> <ul style="list-style-type: none"> • Remobilization of Imaging Services • Self-Referral Mammography • Fluoroscopy Unit • Cardiology Information System Upgrade • Holter Monitor Upgrade • Accreditation for Echocardiography 	<p>FYI</p>
<p>Remobilizing SMMC Robert Blake</p>	<p>Remobilization efforts are taking place in these four areas: In-Patient, Ambulatory, Ancillary, and Surgical. They are led with a focus on Testing, Screening, MM, Infection Prevention, Communications, and Guiding Principles.</p> <p>Many departments are beginning to see full schedules. Patient willingness to return to SMMC is growing. Partnerships with Infection Control, Providers, Executives, and Departmental Leaders lead the way.</p> <p>Testing is one of the keys to remobilization.</p> <ul style="list-style-type: none"> • Management of testing resources • Effective use of Public Health and Stanford Laboratories • Focus on the patient • Maintaining safety for patients and staff • Ensuring timely results 	<p>FYI</p>

	<ul style="list-style-type: none"> • Building infrastructure to support increased testing at SMMC • Building accountability systems for quality and accuracy of results 	
Financial Report David McGrew, CFO	The June FY19/20 financial report was included in the Board packet and David McGrew answered questions from the Board.	FYI
CEO Report Dr. CJ Kunnappilly	Dr. Kunnappilly presented the CEO report which was included in the Board packet and answered questions from the Board.	FYI
County Health Chief Report Louise Rogers	Louise Rogers discussed how Covid-19 has had a greater impact on the Latino and African American population. This is reflected in our county and throughout the rest of the country. We are taking steps to reach out to these communities and identify ways that test positives persons can isolate in a different location if they can't stay in their own home. It is a situation we are actively working on.	FYI
County Manager Mike Callagy	No report.	FYI
Board of Supervisors Supervisor Groom	Supervisor Groom said she is looking forward to working with departments on the upcoming budget hearings taking place in September. She thanked everyone at San Mateo Medical Center and County Health for all the hard work during Covid-19.	FYI

Supervisor Groom adjourned the meeting at 9:15 AM. The next Board meeting will be held on October 5, 2020.

Minutes recorded by:



Michelle Lee, Executive Secretary

Minutes approved by:



Dr. Chester Kunnappilly, Chief Executive Officer

TAB 2

**ADMINISTRATION
REPORTS**

BOARD OF DIRECTORS SAN MATEO MEDICAL CENTER

Financial Report: August FY20-21

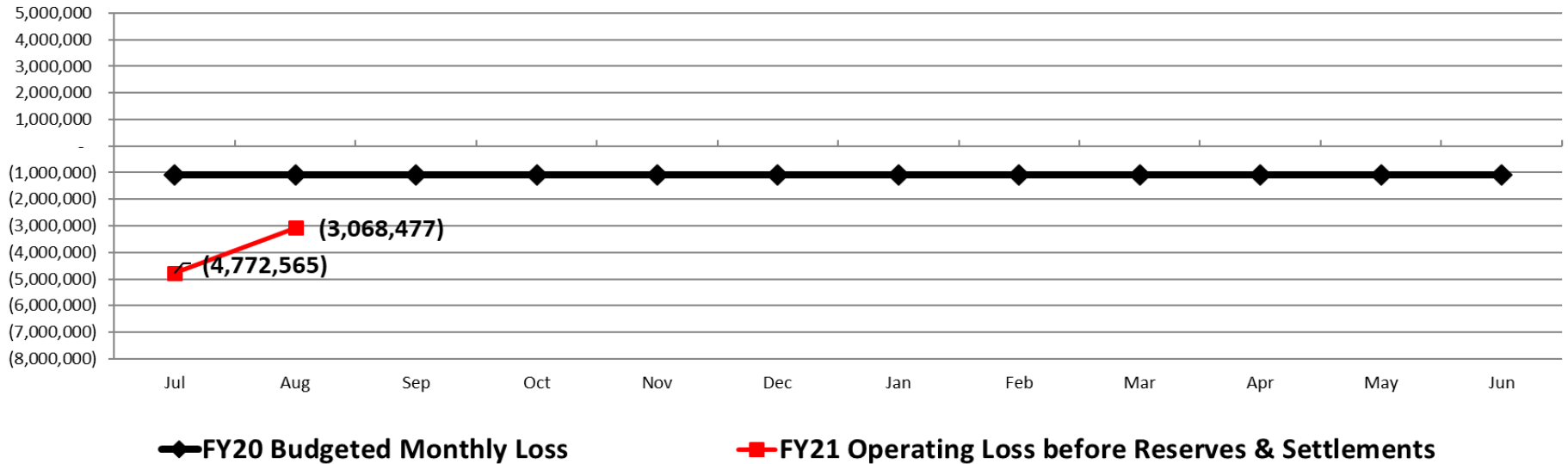
October 5, 2020

Presenter: David McGrew, CFO



SAN MATEO COUNTY HEALTH
**SAN MATEO
MEDICAL CENTER**

Financial Highlights



Net Loss - August \$768K, YTD \$748K

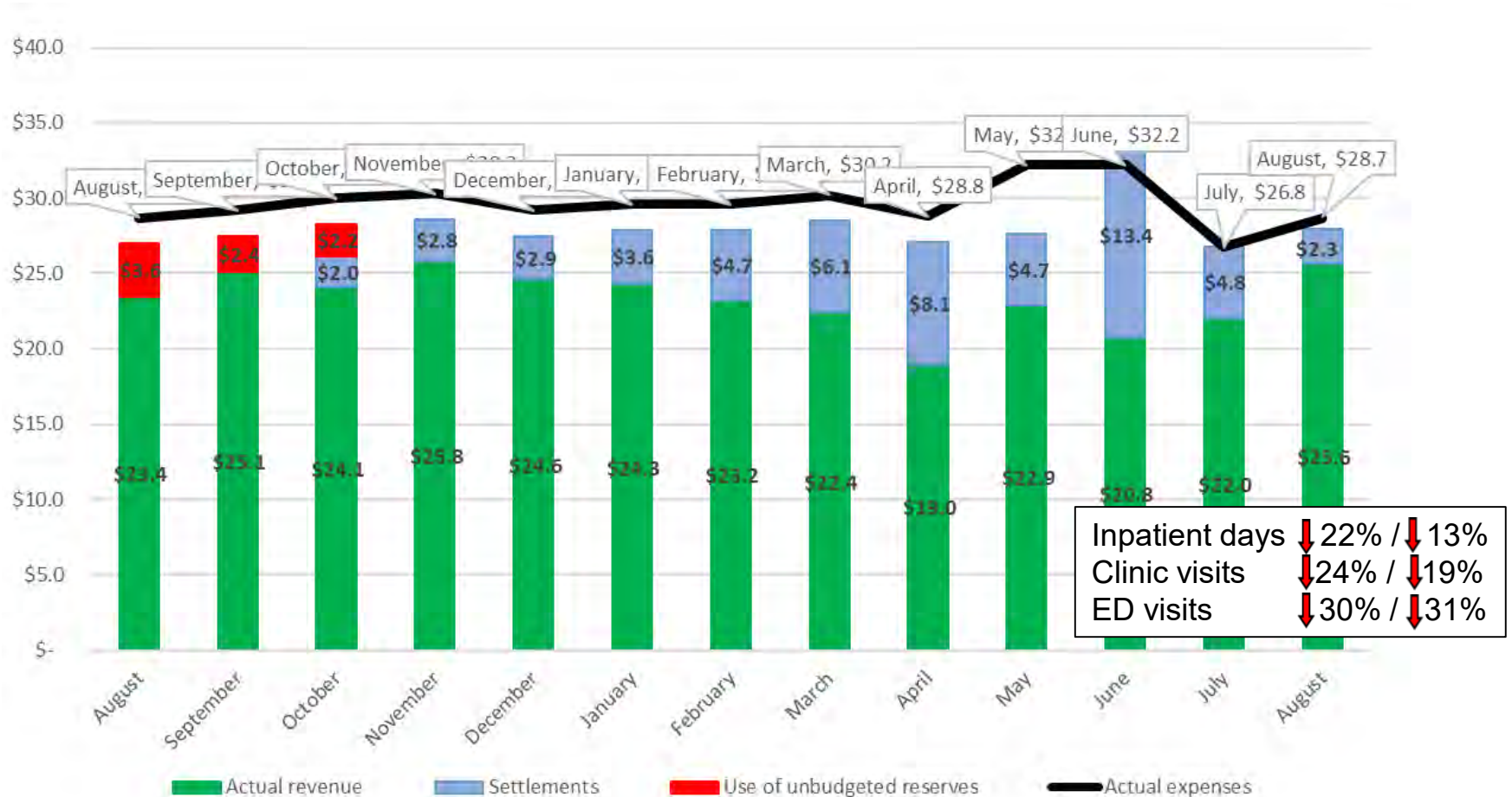
- \$1M Medi-Cal Revenue for COVID
- \$1.3 FY2012 HPSM IGT reserve
- \$1M Settlement of AB85 FY2019
- CARES Act Fund \$510K

- ACE outside medical costs
- FY2020 Enhanced Payment Program (EPP) pending CMS approval
- COVID pandemic

Preliminary Full Year FY21: The FY21 budget projected a \$1.1 million loss each month to be covered by reserves. Identified risks to the full year budget at this time are full achievement of the QIP/HPSM P4P quality measures, execution of operating budget initiatives, and successful remobilization to the pre-COVID level of volume.

FY 19-20 Structural Deficit

SMMC's structural deficit continues as revenue sources from on-going operations and supplemental programs cannot keep pace with the cost structure. Cost report and supplemental program settlements have partially mitigated these factors for the past 11 months. The COVID-19 crisis is adding to the structural deficit.



Note: Volume %s are Current Month/YTD actuals vs budget

COVID Financial Impact Summary

	March	April	May	June	July	August
Revenue loss	\$2,376,000	\$4,347,000	\$4,766,310	\$3,545,000	\$2,578,000	\$1,427,000
Expenses:						
Staffing	1,622,000	3,758,000	3,840,000	3,061,000	1,805,000	1,935,000
Supplies	114,000	79,000	79,000	280,000	-	128,000
IT	404,000	-	-	-	-	-
Other Prof. Fees	-	-	-	-	-	113,000
Total expenses	2,140,000	3,837,000	3,919,000	3,341,000	1,805,000	2,176,000
Total Losses due to COVID	4,516,000	8,184,000	8,685,310	6,886,000	4,383,000	3,603,000

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

Total losses to date
= \$36.3M

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

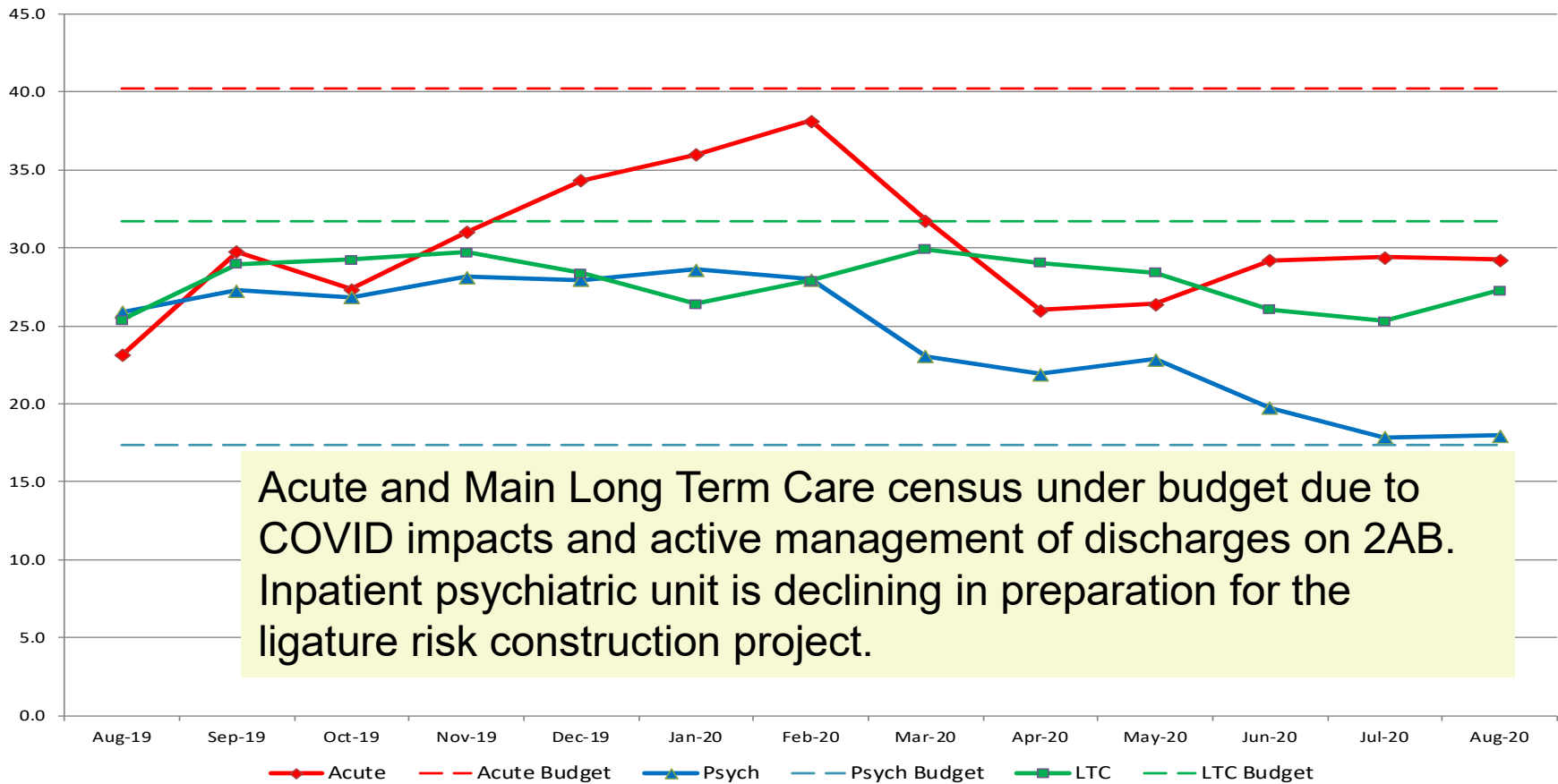
Description	Total Amount Allocated	SMMC \$
<p style="text-align: center;">Provider Relief Fund</p> <p>CARES/HCE Act - \$175 billion</p>	\$50B General Allocations	\$3.5M Received
	\$22B High Impact Providers	\$4.95M Received (July)
	\$11.1B Rural Providers	\$207K Received
	\$4.9B SNFs	\$913K Received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

San Mateo Medical Center Inpatient Days August 31, 2020

MONTH			
Actual	Budget	Variance	Stoplight
2,310	2,738	(428)	-16%

YEAR TO DATE			
Actual	Budget	Variance	Stoplight
4,559	5,477	(918)	-17%

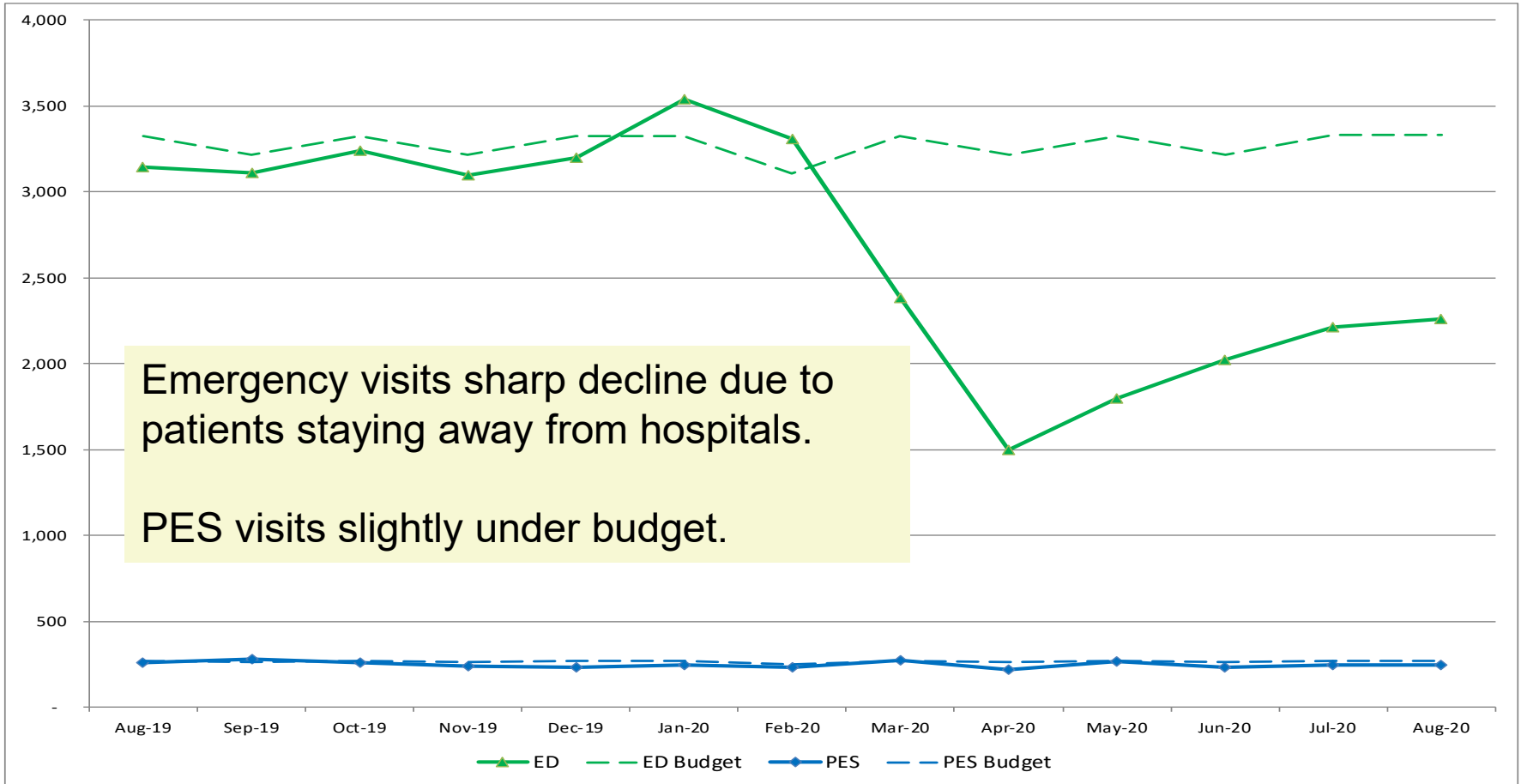
Patient Days



San Mateo Medical Center Emergency Visits August 31, 2020

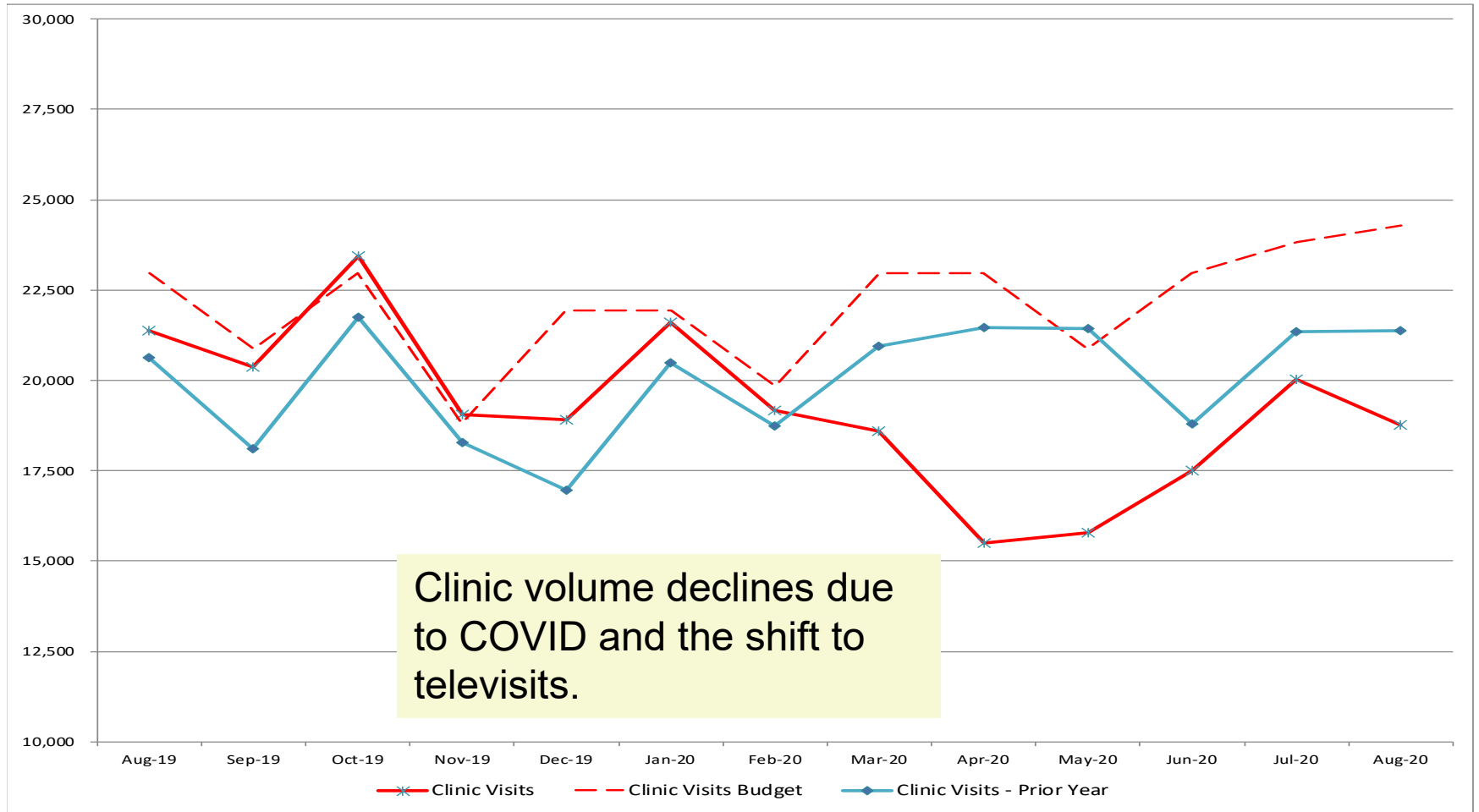
	MONTH			
	Actual	Budget	Variance	Stoplight
ED Visits	2,508	3,604	(1,096)	-30%

	YEAR TO DATE			
	Actual	Budget	Variance	Stoplight
ED Visits	4,964	7,208	(2,244)	-31%

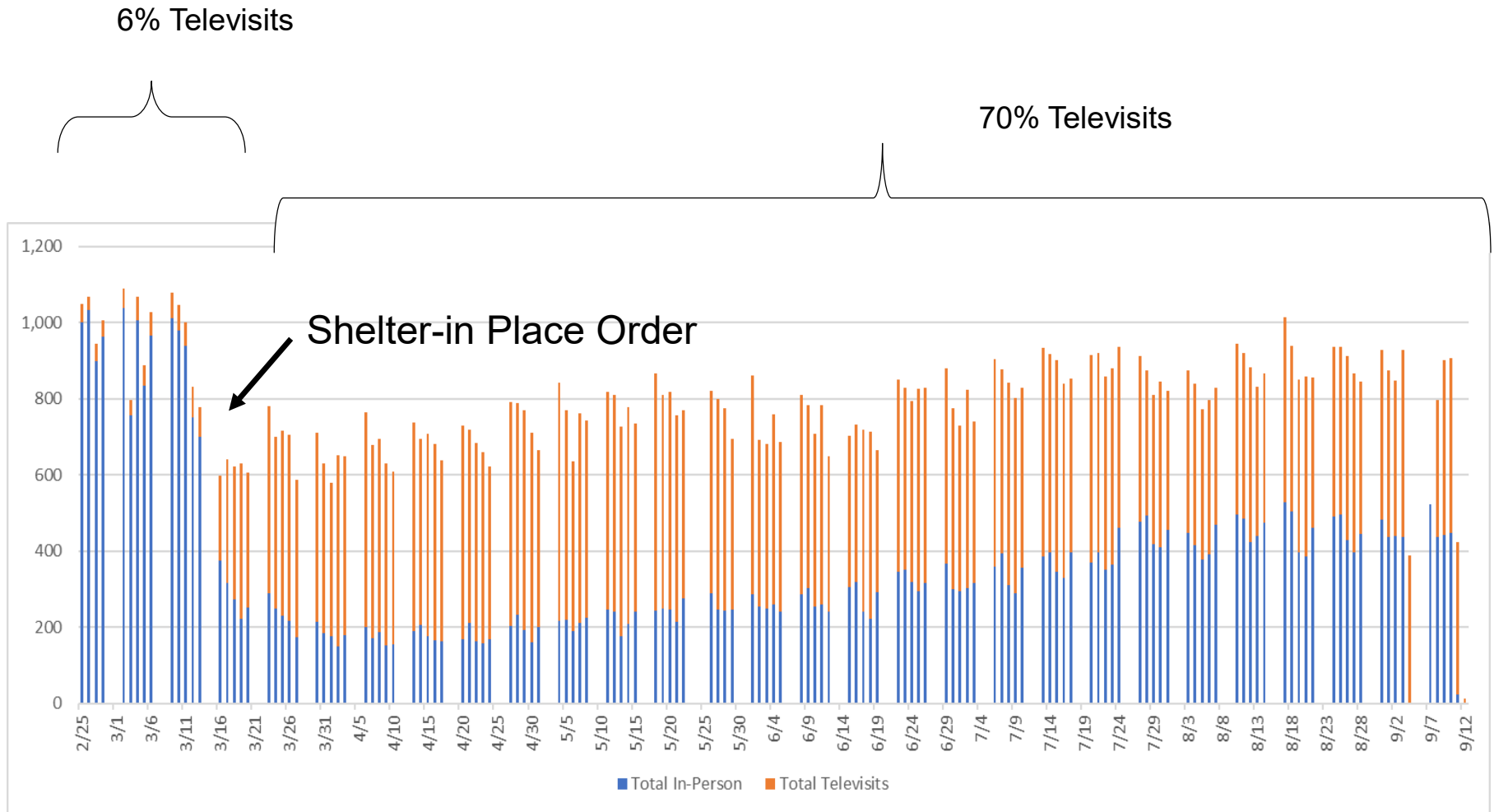


San Mateo Medical Center Clinic Visits August 31, 2020

	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
Clinic Visits	18,769	24,682	(5,913)	-24%	38,810	48,169	(9,359)	-19%



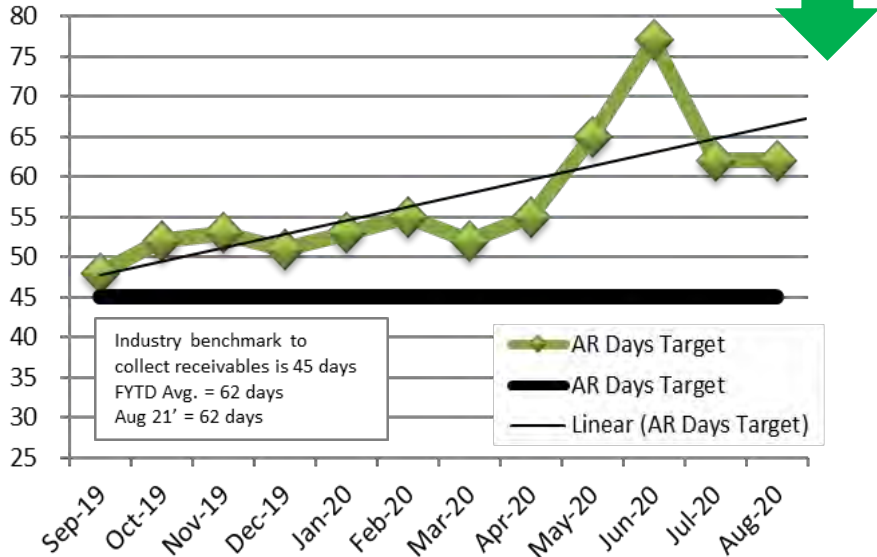
San Mateo Medical Center Clinic Telehealth Visits June 30, 2020



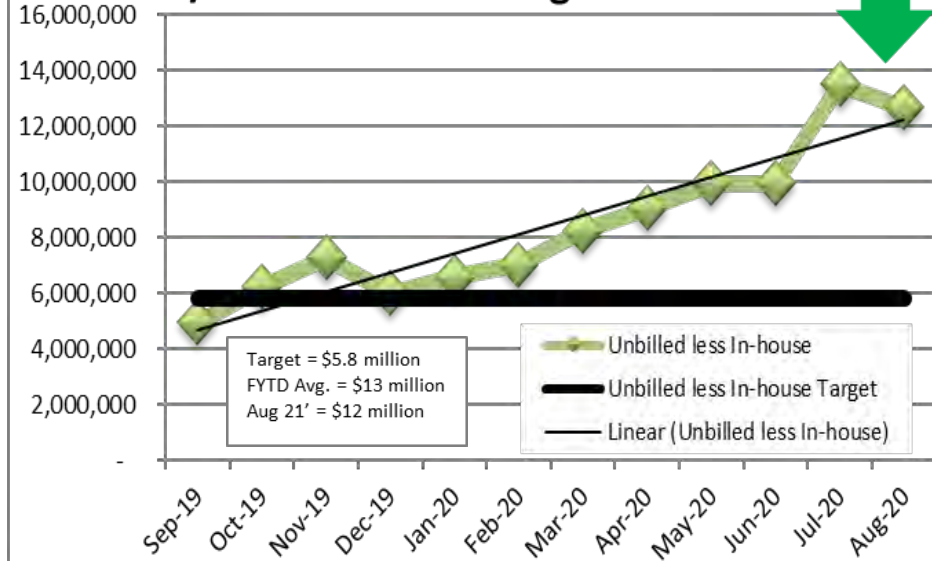
Clinic telehealth visits have increased from an average of 6% of total visits pre-COVID to an average of 70% since March 16th, with a high of 78%

Key Performance Indicators

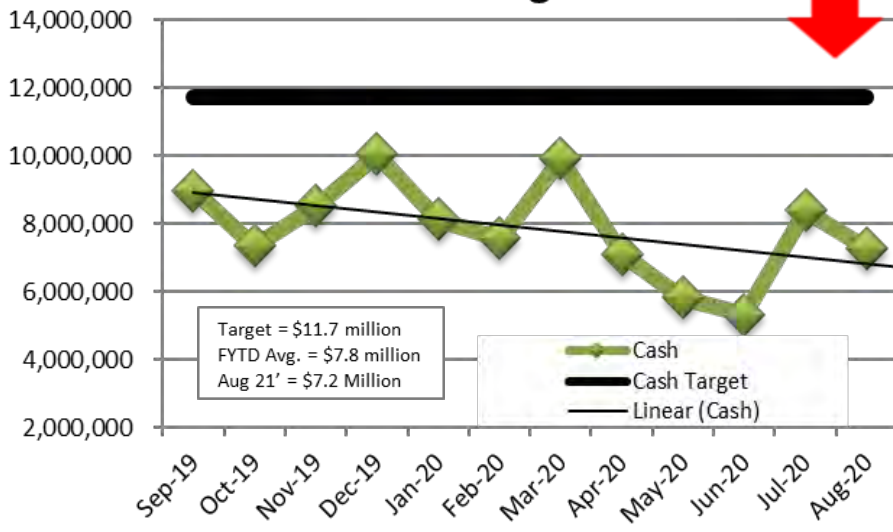
A/R Days - Rolling 12 Months



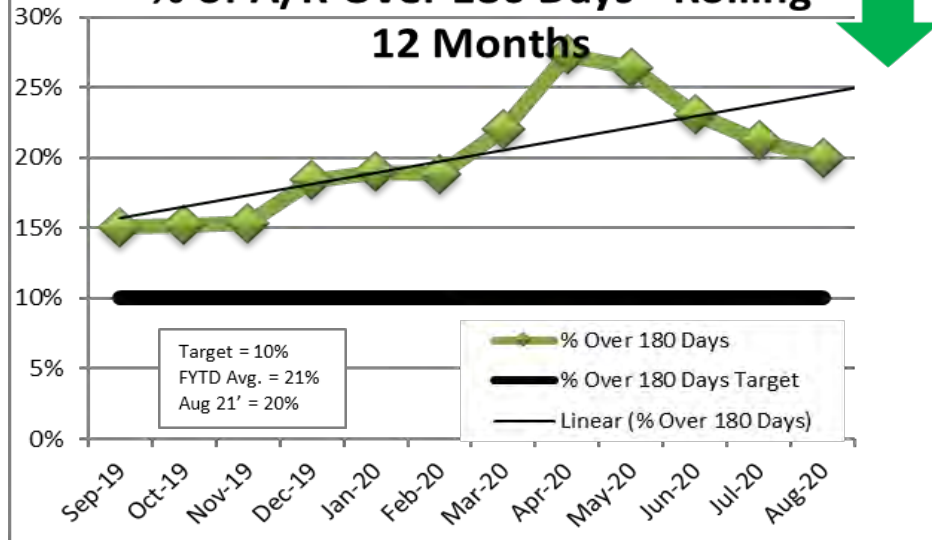
A/R Unbilled - Rolling 12 Months



Cash - Rolling 12 Months



% of A/R Over 180 Days - Rolling 12 Months





SAN MATEO COUNTY HEALTH

**SAN MATEO
MEDICAL CENTER**

QUESTIONS?

APPENDIX



SAN MATEO COUNTY HEALTH
SAN MATEO
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San Mateo Medical Center
Income Statement
August 31, 2020

	MONTH				YEAR TO DATE				
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight	
	A	B	C	D	E	F	G	H	
1 Income/Loss (GAAP)	(768,477)	(1,113,499)	345,022		(748,829)	(2,226,997)	1,478,169		
2 HPSM Medi-Cal Members Assigned to SMMC	33,906	33,069	837	3%	67,579	66,138	1,441	2%	
3 Unduplicated Patient Count	62,763	68,606	(5,843)	-9%	62,763	68,606	(5,843)	-9%	
4 Patient Days	2,310	2,738	(428)	-16%	4,559	5,477	(918)	-17%	
5 ED Visits	2,508	3,604	(1,096)	-30%	4,964	7,208	(2,244)	-31%	
7 Surgery Cases	188	281	(93)	-33%	319	588	(269)	-46%	
8 Clinic Visits	18,769	24,682	(5,913)	-24%	38,810	48,169	(9,359)	-19%	
9 Ancillary Procedures	55,766	72,063	(16,297)	-23%	113,259	150,743	(37,484)	-25%	
10 Acute Administrative Days as % of Patient Days	0.0%	16.0%	16.0%	100%	0.0%	16.0%	16.0%	100%	
11 Psych Administrative Days as % of Patient Days (Days that do not qualify for inpatient status)	82.4%	80.0%	-2.4%	-3%	107.8%	80.0%	-27.8%	-35%	
Pillar Goals									
12 Revenue PMPM	155	131	24	18%	99	131	(32)	-24%	
13 Operating Expenses PMPM	312	296	(16)	-5%	300	296	(4)	-1%	
14 Full Time Equivalents (FTE) including Registry	1,143	1,150	7	1%	1,143	1,150	7	1%	

San Mateo Medical Center
Income Statement
August 31, 2020

	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
	A	B	C	D	E	F	G	H
21 Inpatient Gross Revenue	11,476,448	13,856,510	(2,380,061)	-17%	22,510,880	31,879,686	(9,368,806)	-29%
22 Outpatient Gross Revenue	18,072,448	30,643,909	(12,571,461)	-41%	34,017,803	61,287,818	(27,270,015)	-44%
23 Total Gross Revenue	29,548,896	44,500,419	(14,951,523)	-34%	56,528,683	93,167,504	(36,638,821)	-39%
24 Patient Net Revenue	11,092,034	12,241,179	(1,149,145)	-9%	14,499,341	24,482,358	(9,983,017)	-41%
25 Net Patient Revenue as % of Gross Revenue	37.5%	27.5%	10.0%	36%	25.6%	26.3%	-0.6%	-2%
26 Capitation Revenue	345,485	379,538	(34,052)	-9%	688,107	759,076	(70,969)	-9%
27 Supplemental Patient Program Revenue (Additional payments for patients)	9,343,293	8,999,062	344,231	4%	20,863,275	17,998,124	2,865,152	16%
28 Total Patient Net and Program Revenue	20,780,813	21,619,779	(838,966)	-4%	36,050,723	43,239,558	(7,188,834)	-17%
29 Other Operating Revenue (Additional payment not related to patients)	1,472,345	905,920	566,424	63%	7,339,738	1,811,841	5,527,897	305%
30 Total Operating Revenue	22,253,158	22,525,699	(272,542)	-1%	43,390,461	45,051,399	(1,660,937)	-4%

San Mateo Medical Center
Income Statement
August 31, 2020

MONTH			
Actual	Budget	Variance	Stoplight
A	B	C	D

YEAR TO DATE			
Actual	Budget	Variance	Stoplight
E	F	G	H

Operating Expenses

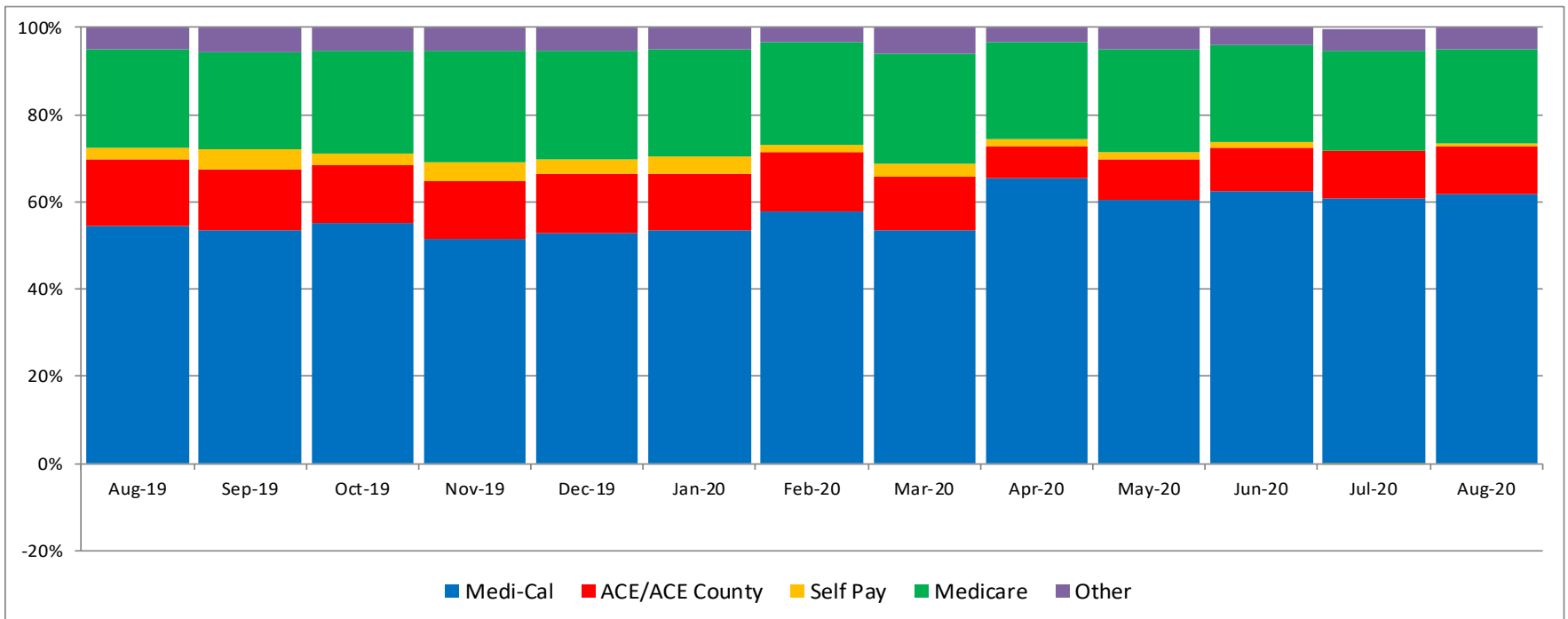
31	Salaries & Benefits	16,927,239	17,390,063	462,824	3%	33,323,149	34,780,127	1,456,977	4%
32	Drugs	875,310	723,499	(151,811)	-21%	1,836,073	1,446,999	(389,074)	-27%
33	Supplies	1,078,215	944,631	(133,584)	-14%	1,202,719	1,889,261	686,543	36%
34	Contract Provider Services	3,542,770	3,490,050	(52,720)	-2%	6,497,668	6,980,099	482,432	7%
35	Other fees and purchased services	4,443,538	5,009,709	566,171	11%	8,886,426	10,019,418	1,132,993	11%
36	Other general expenses	637,804	433,916	(203,889)	-47%	1,330,604	867,831	(462,772)	-53%
37	Rental Expense	198,280	209,620	11,340	5%	440,691	419,239	(21,452)	-5%
38	Lease Expense	773,407	773,407	-	0%	1,546,813	1,546,813	-	0%
39	Depreciation	224,302	271,443	47,141	17%	430,348	542,886	112,538	21%
40	Total Operating Expenses	28,700,864	29,246,337	545,473	2%	55,494,490	58,492,674	2,998,185	5%
41	Operating Income/Loss	(6,447,707)	(6,720,638)	272,931	4%	(12,104,028)	(13,441,276)	1,337,248	10%
42	Non-Operating Revenue/Expense	375,345	303,254	72,091	24%	747,430	606,509	140,921	23%
43	Contribution from County General Fund	5,303,885	5,303,885	(0)	0%	10,607,770	10,607,770	(0)	0%
44	Total Income/Loss (GAAP)	(768,477)	(1,113,499)	345,022		(748,829)	(2,226,997)	1,478,169	

(Change in Net Assets)

**San Mateo Medical Center
Payer Mix
August 31, 2020**

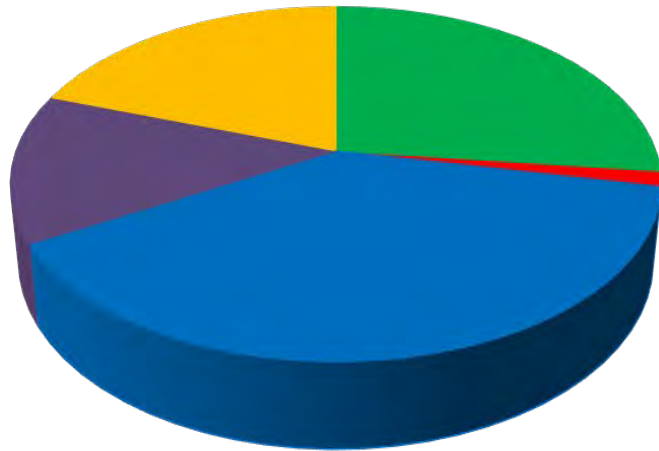
Payer Type by Gross Revenue	MONTH			
	Actual	Budget	Variance	Stoplight
	A	B	C	D
Medicare	21.7%	21.0%	0.7%	
Medi-Cal	61.8%	58.0%	3.8%	
Self Pay	0.6%	2.0%	-1.4%	
Other	4.9%	5.0%	-0.1%	
ACE/ACE County	11.1%	14.0%	-2.9%	
Total	100.0%	100.0%		

Payer Type by Gross Revenue	YEAR TO DATE			
	Actual	Budget	Variance	Stoplight
	E	F	G	H
Medicare	22.4%	21.0%	1.4%	
Medi-Cal	61.4%	58.0%	3.4%	
Self Pay	0.1%	2.0%	-1.9%	
Other	5.0%	5.0%	0.0%	
ACE/ACE County	11.1%	14.0%	-2.9%	
Total	100.0%	100.0%		



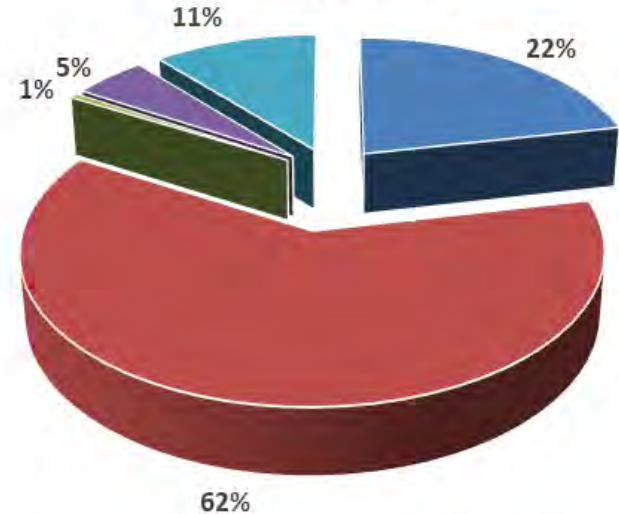
Revenue Mix

Sources of Revenue



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

Payor Mix



■ Medicare ■ Medi-Cal ■ Self Pay ■ Other ■ ACE

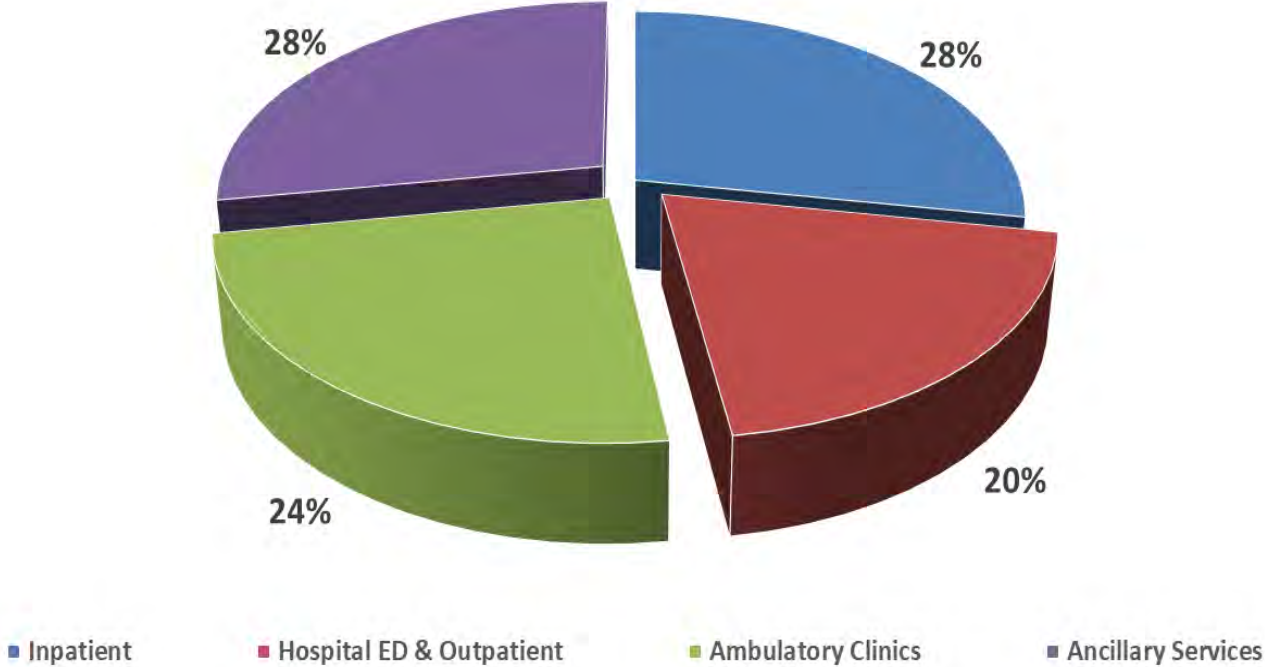
Health Plan of San Mateo (HPSM) represents 29% of our Operating Revenue

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

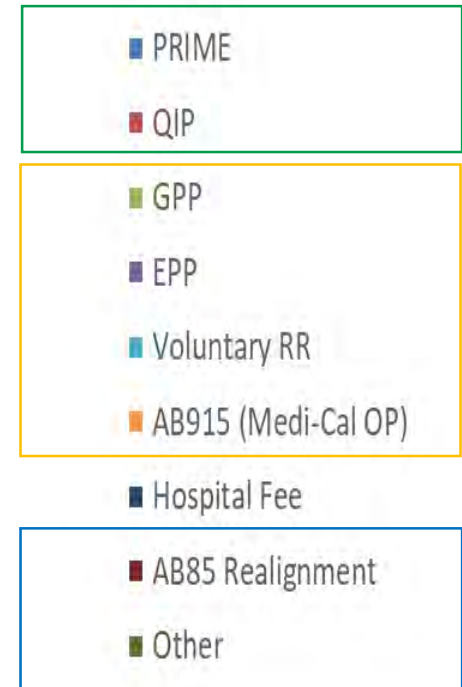
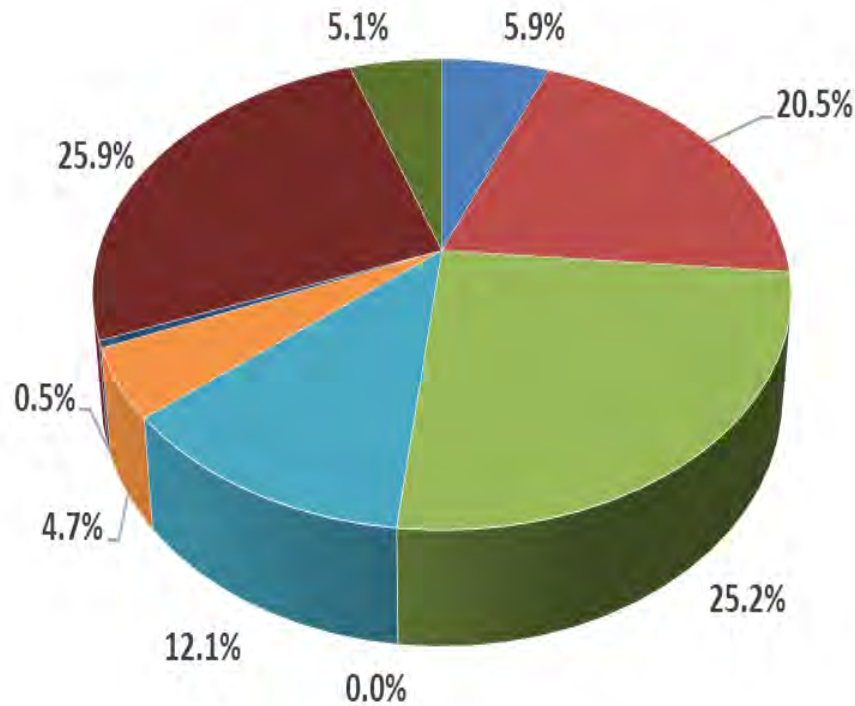
Capitation is a pre-payment reimbursement model that pays providers a set amount for each enrolled person assigned to them, per period of time, whether or not that person seeks care.

NO commercial contracts

Revenue Mix by Service Line



Supplemental Revenue Mix

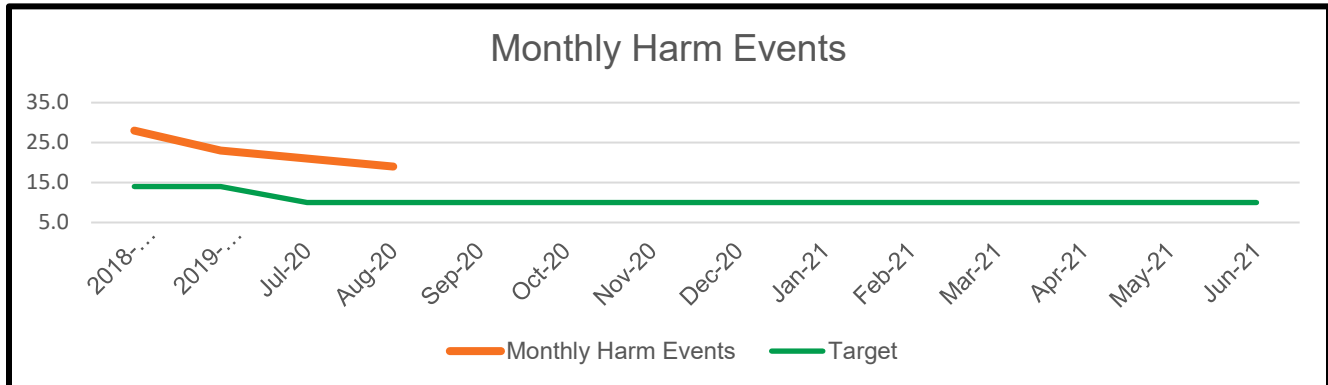


- **Value-Based** programs represent 26.4% of our Supplemental Revenue
- **Volume-Based** programs represent 73.6% of our Supplemental Revenue

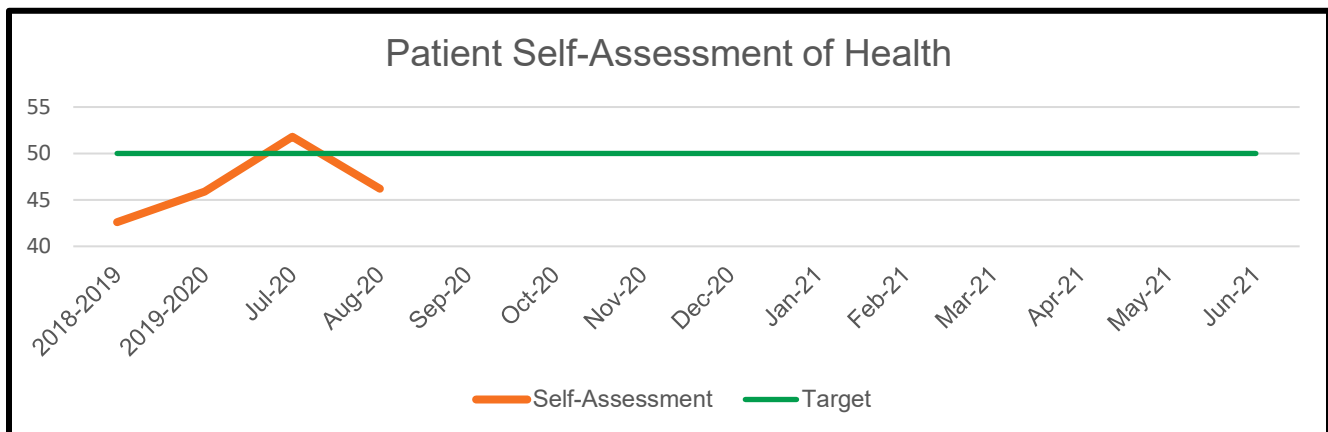
CEO REPORT

October 2020

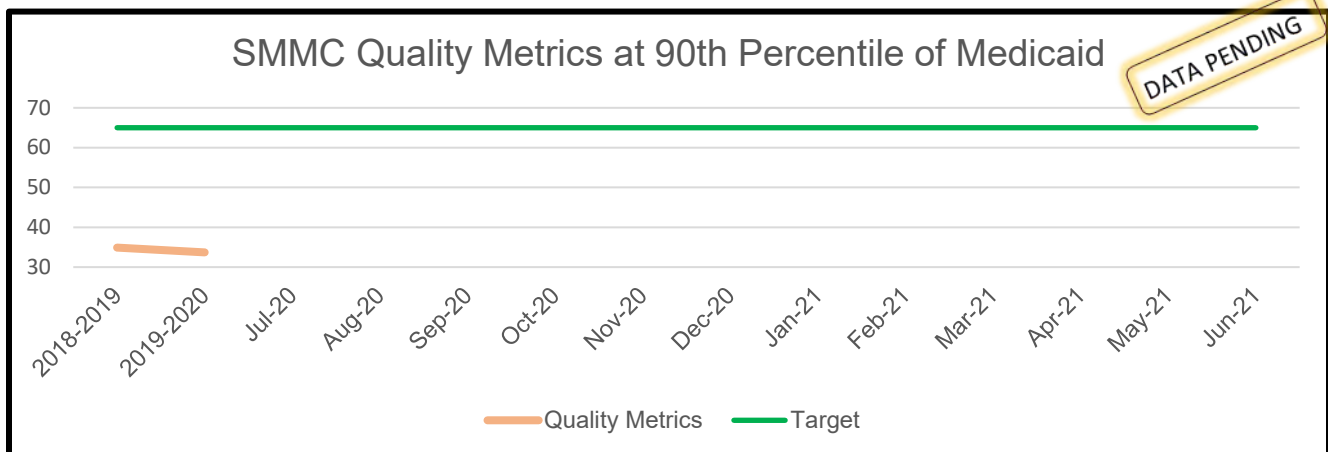
EXCELLENT CARE METRICS



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

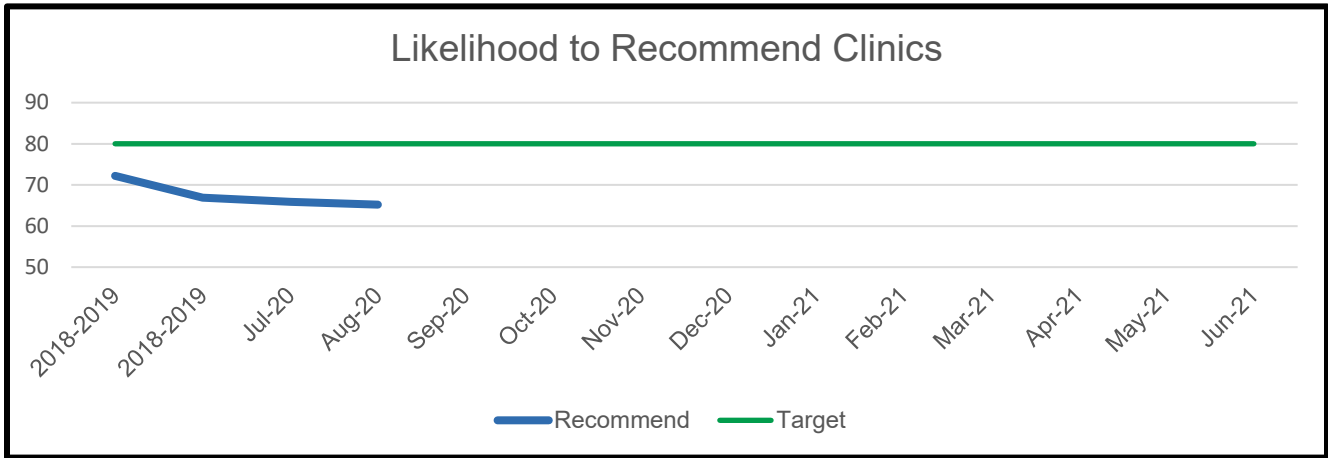


Patient Self-Assessment of Health: All Primary Care patients receive an experience survey. One question asks them to rate their health from poor to excellent. This is the percentage that rate their health as very good or excellent. **Higher is better.**

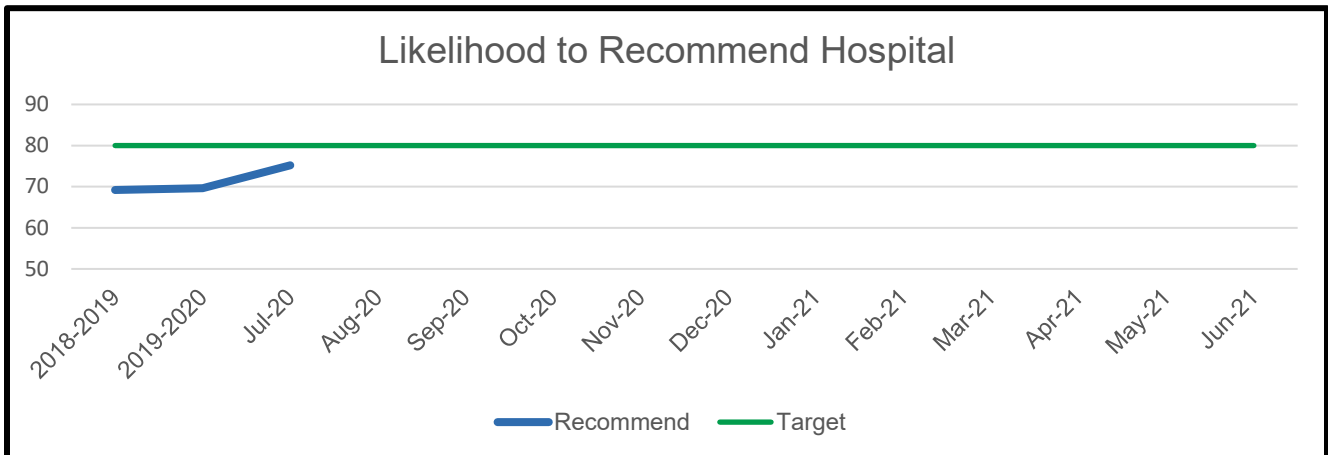


Quality Metrics at 90th Percentile: SMMC seeks excellence in all that it does. The organization currently participates in a number of pay for performance programs including PRIME, QIP and the Health Plan of San Mateo Pay for Performance Program. This metric measures the percentage of quality metrics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

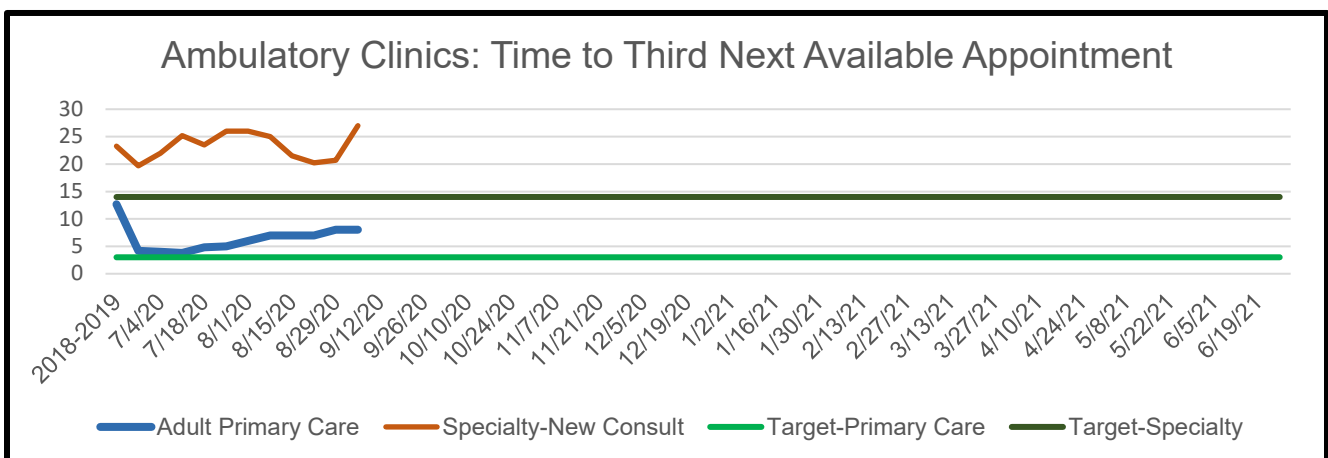
PATIENT CENTERED CARE METRICS



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

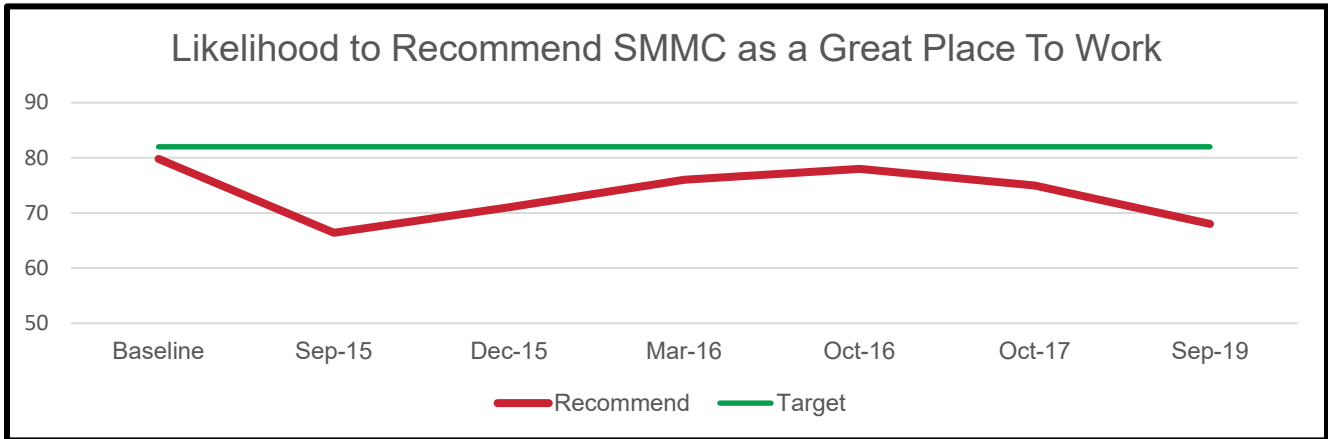


Likelihood to Recommend Hospital: Percentage of patients who gave SMMC the highest score (9 or 10) on the patient experience survey question, “How likely are you to recommend this hospital to friends and family?” **Higher is better.**



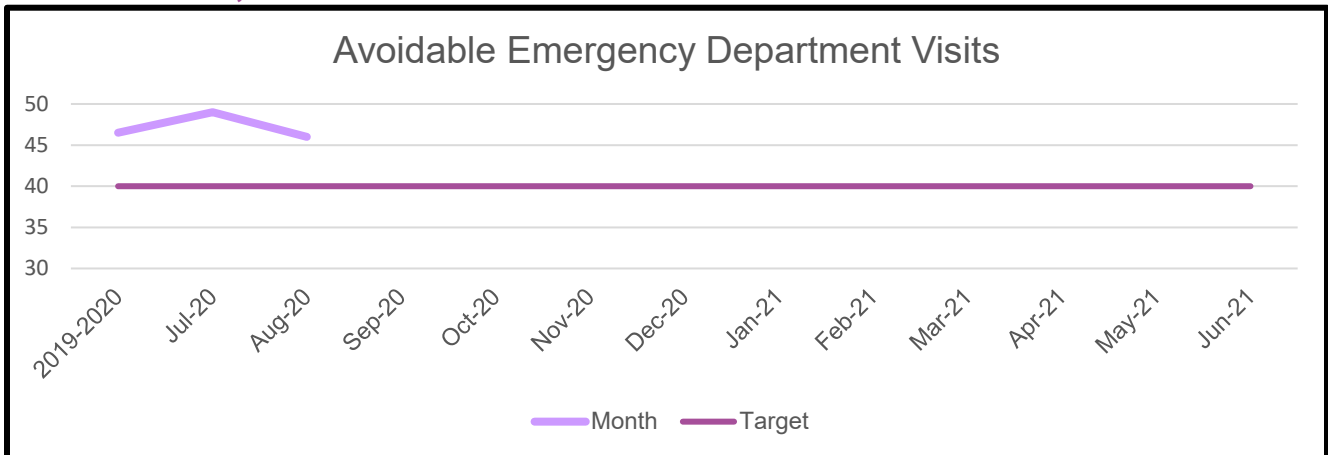
Ambulatory Access: Number of days until the third available appointment for established patients in Primary Care and for new consults in Specialty Services. The third next available appointment is a validated measure of patient access. **Lower is better.**

STAFF ENGAGEMENT METRICS



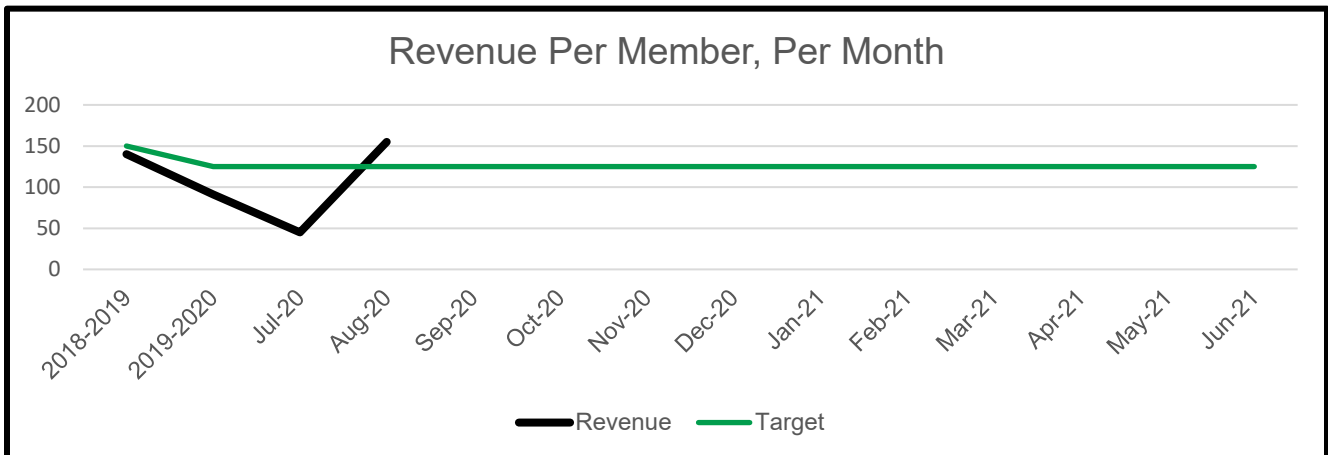
Likelihood to Recommend SMMC: Percentage of staff who agree or strongly agree that they would recommend SMMC as a great place to work. Measured using the annual Blessing White staff engagement survey. **Higher is better.**

RIGHT CARE, TIME AND PLACE METRICS

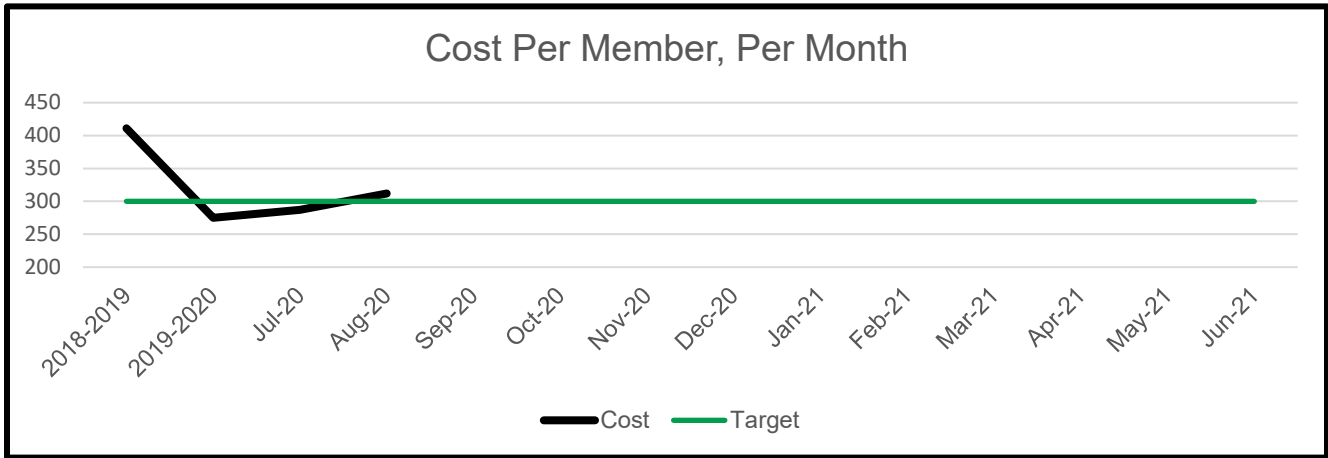


Potentially Avoidable ED Visits: Percentage of emergency department visits by established SMMC primary care patients where the discharge diagnosis is one that traditionally could have been treated in an outpatient setting rather than the emergency department. **Lower is better.**

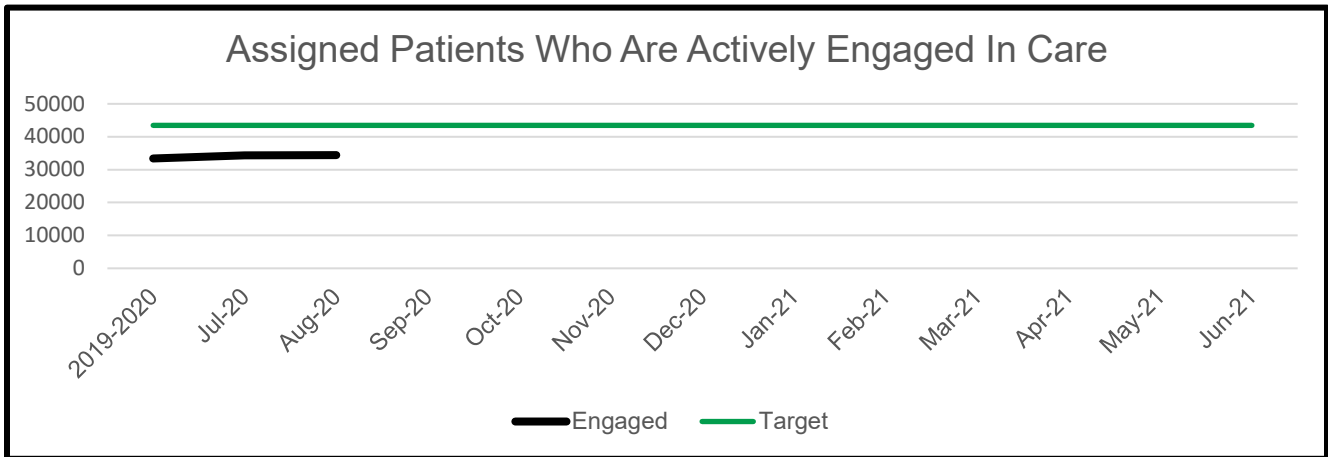
FINANCIAL STEWARDSHIP METRICS



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



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



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

STRATEGIC UPDATES, RECOGNITIONS & AWARDS



(Pictured above Left: Food box delivered to clients of Fair Oaks Health Center. Above right: Compliance Officer Gabriela Behn on the cover of Compliance Today)

SMMC Staff Go Above and Beyond to Meet Client Needs During Pandemic - Consistent with the experience across the country, SMMC has seen the populations it serves disproportionately impacted by all aspects of the COVID-19 pandemic. In July, staff became aware of a household of 6 individuals (2 adults and 4 children) who were struggling. Multiple members of the household had tested positive for COVID-19 and as a result they were struggling to go out to get food and other necessities. SMMC staff led by Klealy Pineda-Mena, Outpatient Social Worker Supervisor, and Rakhi Singh, Supervising Physician for Adult Primary Care at Fair Oaks Health Center, partnered with the San Mateo County Health Foundation to purchase and deliver food and supplies to the home. Thank you to everyone involved in this amazing and inspiring example of teamwork and community commitment.

SMMC Compliance Officer Featured in Premier Trade Magazine - Gabriela Behn, SMMC's Compliance and Privacy Officer was featured in the August issue of Compliance Today magazine. In the article Gabriela discussed her background and what led her to public service. The article also highlighted some of the challenges we face in public sector healthcare. Since joining SMMC in 2017, she has significantly expanded, developed and strengthened our Compliance program. Congratulations to Gabriela for this well-deserved recognition. A link to the full article can be found here: <https://bit.ly/31fwhss>

SMMC Ambulatory Team Presents Telehealth Work - On Aug. 19th, a team from SMMC Ambulatory Services presented the organization's work to develop and improve standard work for Telehealth Services in a webinar hosted by the California Health Care Safety Net Institute. The presentation received great audience feedback. Some of the comments in the post-presentation survey included:

- *Good specific/concrete example of a workflow that has gone through a few PDSA cycles*
- *Really informative!*
- *Great presentation*
- *Steal everything we can from SMMC and build upon that!*



Healthcare for the Homeless Program Receives Quality Award - The San Mateo County Health Care for the Homeless and Farmworker Health Program was recently recognized by the Health Resources & Services Administration (HRSA) as a Health Center Quality Leader. The designation recognizes organizations that are in the top 30% of health centers for best overall clinical performance. Congratulations to everyone responsible for this amazing achievement.

SMMC Wellness Leaders Recognized - Each year the County Wellness Committee, through the Wellness Leadership Recognition Program, recognizes “supervisors and managers who create healthy, thriving work environments and a culture that promotes employee health, safety, and well-being in an engaging way.” This year, SMMC had 16 staff members nominated by their peers for recognition. They include:

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

Congratulations to Melissa Fledderjohann, Gloria Patane, and Malu Cruz who were selected by the Committee for recognition. They will be celebrated at a September 30th Annual Wellness Leadership Celebration and the October 20th Board of Supervisors Meeting. Congratulations to everyone who was nominated and to those who were selected. Your contributions to our institutional wellness are much appreciated.

August 2020

SNAPSHOT: San Mateo County Health

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

WIC Staff Support Clients at Local Farmers Markets

Continuing to bring resources to the community, Family Health's WIC (Women, Infants & Children) program has attended nine farmers markets and issued 124 check packets for nutritional support to qualifying families. Family Health staff maintain social distance and wear masks as they distribute the vouchers safely. The farmer's market program promotes easier access to fresh fruits and vegetables for participants while also contributing back to our local farmers. There are eleven farmers market events scheduled for August.



Alternative Care Site in Burlingame Stands Down

From March 25 to August 2, the Alternative Care Site at a Burlingame hotel provided medical support for 196 COVID-positive patients needing care in isolation before they could return home safely to their families. Patients, who ranged in age from 2 to 89, stayed for periods from a few days to two weeks and were cared for by medical personnel from the Army National Guard, the California Emergency Medical Services Authority, and AMI Expeditionary Healthcare. Since local hospitals can manage their capacity, patients needing medical support can remain in the hospital until discharge, and those needing isolation can stay at new hotels supported by LifeMoves and contracted to the Human Services Agency (HSA). One of the last patients to receive care at the site, a landscaper, was unemployed and homeless due to the pandemic. Thanks to the work of Emergency Medical Services and HSA, he was discharged to new housing and accepted a job at a local skilled nursing facility. A short documentary about the work of ACS-Burlingame can be seen [here](#).

Gabriela Behn Featured in "Compliance Today" Magazine



San Mateo Medical Center Compliance and Privacy Officer Gabriela Behn was interviewed by "Compliance Today," the magazine for the Society of Corporate Compliance and Ethics & Health Care Compliance Association. The topic was prioritizing healthcare access. Highlights of the interview include Behn's view on the challenges facing a public health care provider and how compliance and privacy are an important part of serving client and patient needs. She also said, "One of the reasons I have continued my career in public service is that the people are the absolute best. Not to take away from the private sector, but my colleagues are so motivated and passionate about helping others, no matter what department or division they are in. Everybody really cares, and I think that working alongside like-minded folks has allowed any challenges to really be turned into opportunities." Read the full interview [here](#).

Grant to BHRS to Improve Access to Care for Students and Families

Behavioral Health and Recovery Services has been awarded one of two Mental Health Student Service Act grants earmarked for large counties to establish mental health partnerships between county behavioral health departments and local education entities. The 4-year, \$1.5M per year grant is aimed at improving access to mental health services for students and their families. The grant will fund the new program SYSTEM Support (Success for Youth and Schools through Trauma-Informed & Equitable Modules), creating a partnership between BHRS and the San Mateo County Office of Education, in collaboration with 12 participating school districts, which together serve about 55,000 students.

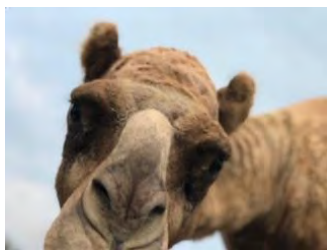
September 2020

SNAPSHOT: San Mateo County Health

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

INDICATOR	NUMBER	CHANGE FROM PREVIOUS MONTH	CHANGE FROM PREVIOUS YEAR
ACE Enrollees	22,992 (August 2020)	1.0%	3.2%
SMMC Emergency Department Visits	2,497 (August 2020)	1.8%	-31%
New Clients Awaiting Primary Care Appt.	25 (September 2020)	n/a (previous month was 0)	-81%

County Health Participates in CZU Fire Response



Working with County Health’s Animal Control & Licensing team during the CZU August Lightning Complex fires, the volunteer-based Large Animal Evacuation Group (LAEG) oversaw efforts to safeguard animals on the Coastside. Using horse trailers and other vehicles, teams of trained volunteers evacuated 1,546 large farm animals, including a camel (left) and a Scottish Highland steer, as well as horses, cattle, pigs, sheep, donkeys, alpacas, llamas, goats, turkeys, chickens, ducks, and peacocks.

The Peninsula Humane Society & SPCA also evacuated 98 pets and 31 wildlife. The County’s Emergency Operations Center secured locations to house the animals, including the Cow Palace in South San Francisco and the Event Center in San Mateo. The animals were fed, cleaned, and provided water daily, and none the evacuated animals were injured or died as a result of the fire.

In addition to providing care for animals, County Health staff also supported residents who were evacuated from their homes. Emergency Medical Services coordinated paramedic and ambulance resources at the evacuation center at Half Moon Bay High School, and staff from Behavioral Health and Recovery Services joined other County departments, service providers, and FEMA at the Local Assistance Center (LAC) at Pescadero Elementary School.

The initial phases of the recovery effort involve the removal of household hazardous waste and contaminated soil from burned residential sites, as well as sampling water, inspecting trees that have been weakened and could fall, and assessing the risks of mudslides and debris flow. Environmental Health Services is working with the US Environmental Protection Agency (EPA), the California Office of Emergency Services (CalOES), the Department of Public Works (DPW), and other organizations to minimize environmental risks and make sure that residents can return to their home sites safely.