

**The County of Santa Cruz**  
**Integrated Community Health Center Commission**  
**MEETING AGENDA**

December 6, 2023 @ 4:00pm - 5:00pm

**MEETING LOCATION: In-Person** - 1430 Freedom Blvd., Suite F, Watsonville, Ca 95076 and 1080 Emeline Ave., Bldg. D, Admin Conference Room, Santa Cruz, CA 95060 will connect through Microsoft Teams Meeting or call in (audio only) +1 916-318-9542, 500021499# United States, Sacramento Phone Conference ID: **500 021 499#**

ORAL COMMUNICATIONS - Any person may address the Commission during its Oral Communications period. Presentations must not exceed three (3) minutes in length, and individuals may speak only once during Oral Communications. All Oral Communications must be directed to an item not listed on today's Agenda and must be within the jurisdiction of the Commission. Commission members will not take actions or respond immediately to any Oral Communications presented but may choose to follow up at a later time, either individually, or on a subsequent Commission Agenda.

1. Welcome/Introductions
2. Oral Communications
3. November 1, 2023, Meeting Minutes – Action Required
4. HPHP Overdose Response – Joey/David
5. Board Composition and Meeting Times
6. Quality Management Update
7. Financial Update
8. CEO/COVID-19 Update

<u>Action Items from Previous Meetings:</u>	Person(s)	Date	Comments
Action Item	Responsible	Completed	

**Next meeting:** Wednesday, January 3, 2024, 4:00pm - 5:00pm **Meeting Location: In-Person** - 1430 Freedom Blvd., Suite F, Watsonville, Ca 95076 and 1080 Emeline Ave., Bldg. D, Admin Conference Room, Santa Cruz, CA 95060. Commission will connect through Microsoft Teams Meeting or call in (audio only) United States, Sacramento Phone Conference ID: **500 021 499#**

# The County of Santa Cruz Integrated Community Health Center Commission

**Minute Taker: Mary Olivares**

Minutes of the meeting held December 6, 2023.

**TELECOMMUNICATION MEETING:** Microsoft Teams Meeting - or call-in number +1 916-318-9542 – PIN# 500021499#

Attendance	
Len Finocchio	Co-Chair Officer
Rahn Garcia	Member
Dinah Phillips	Member
Maximus Grisso	Member
Tammi Rose	Member
Miku Sodhi	County of Santa Cruz, Asst. Director of HSA
Joey Crottogini	County of Santa Cruz, Health Center Manager
David Davis	County of Santa Cruz, Deptl. Admin Analyst
Cassie Cheddar	County of Santa Cruz, PHNI
Amy Peeler	County of Santa Cruz, Chief of Clinics
Raquel Ramirez Ruiz	County of Santa Cruz, Sr. Health Services Manager
Julian Wren	County of Santa Cruz, Admin Services Manager
Mary Olivares	County of Santa Cruz, Admin Aide
<b>Meeting Commenced at 4:03 pm and concluded at 5:15 pm</b>	
Excused/Absent:	
Excused: Christina Berberich	
Absent: Michelle Morton	
Excused: Gidget Martinez	
Excused: Marco Martinez-Galarce	
1. Welcome/Introductions	
2. Oral Communications:	
3. November 1, 2023, Meeting Minutes – Action Required	
Review of November 1, 2023, Meeting Minutes – Recommended for Approval. Dinah moved to accept minutes as presented. Tami second, and the rest of the members present were all in favor.	
4. HPHP Overdose Response	
Joey reported the Homeless Persons Health Project (HHP) responded to 32 Code Blues in 2023 due to accidental overdose, avg. 1/week, 1/3 of which are patients of Behavioural Health. He stated over 8,000 units of nasal Narcan distributed in Santa Cruz County by HHP in 2023, received for free through the CA Department of Health Care Services’ Naloxone Distribution Project. Joey reported some of the actions to prevent overdoses they are doing is training staff, reviewing & updating Code Blue, offering MAT assessment and medication once patient regains consciousness (MAT bridge intervention) coordinating interventions with our community partners post-overdose and exploring installing motion sensors in bathrooms used by patients. Lastly Joey reported Santa Cruz County will receive approximately 26 million dollars over the next 18 years from Opioid Settlement Funds.	
5. Board Composition and Meeting Times	
Tackle to next month. Send out email to commission.	
6. Quality Management Update	
Raquel reported that the Emeline Clinic provided an update on their quality improvement project, cervical cancer screenings and some of the challenges including dedicating staff to make outreach calls. Raquel also reported they had worked on the staff satisfaction survey instrument, and she will come back next month with data. Raquel also reported she will report back next month on Ryan white and reported on peer review that nine patients were reviewed. Five out of the nine had substance abuse disorder and two out of the five patients that had substance use were fentanyl overdoses.	
7. Financial Update	

Julian reported the year-to-date net county cost they had budgeted for \$1,967,843 and currently the estimated actuals are at (3,217,575). Julian reported that the health centers currently has almost five million dollars in claims awaiting reimbursement and will be able to draw down almost 2 million in base grant funds starting in February to cover costs through rest of the fiscal year and overall visits are trending up. Julian also reported the total AR is increasing, coupled with increased charges and increased efficiency, we are currently at \$4,422,376. Julian reported on how important it was to fill clinics vacancies and it represents approximately \$9 million in revenue.

8. CEO/COVID 19 update

Amy reported that we will have a new member joining us next month. Amy also gave an update the that the county is struggling and reported that HSA has been asked by the CAO to take 4 million dollars out of the current budget which equals out to \$1.3 million from clinics. Amy also reported that the CAO is also still deciding on what to do with the Watsonville campus, either to stay and expand or move to the Westridge campus. Amy will keep commission posted.

Next meeting: January 3, 2024, 4:00pm - 5:00pm

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Minutes approved \_\_\_\_\_ / / \_\_\_\_\_  
(Signature of Board Chair or Co-Chair) (Date)



Health Centers Division

# Quality Management Report

December 2023



## Quality Management Committee

- Emeline provided an update on Cervical Cancer Screenings Quality Improvement project.  
(challenges: High No-show rate, dedicating staff for outreach calls).
- Staff Satisfaction Survey Instrument
- Ryan White Committee Update



## **Peer Review and Risk Management Committee**

- 9 patient deaths were reviewed.
- 5 out of the 9 had Substance Use Disorders.
- 2 out of the 5 patients that had Substance Use Disorders were fentanyl overdoses.

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# Integrated Health Center Commission

Fiscal Report 12/6/23 by Dr. Julian N. Wren

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**01**

## **Financials**

Data as of 10/31/23

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## **Grants**

Grant Drawdown update

**03**

## **Revenue Cycle**

Review of Revenue Cycle  
Health

**04**

## **Personnel**

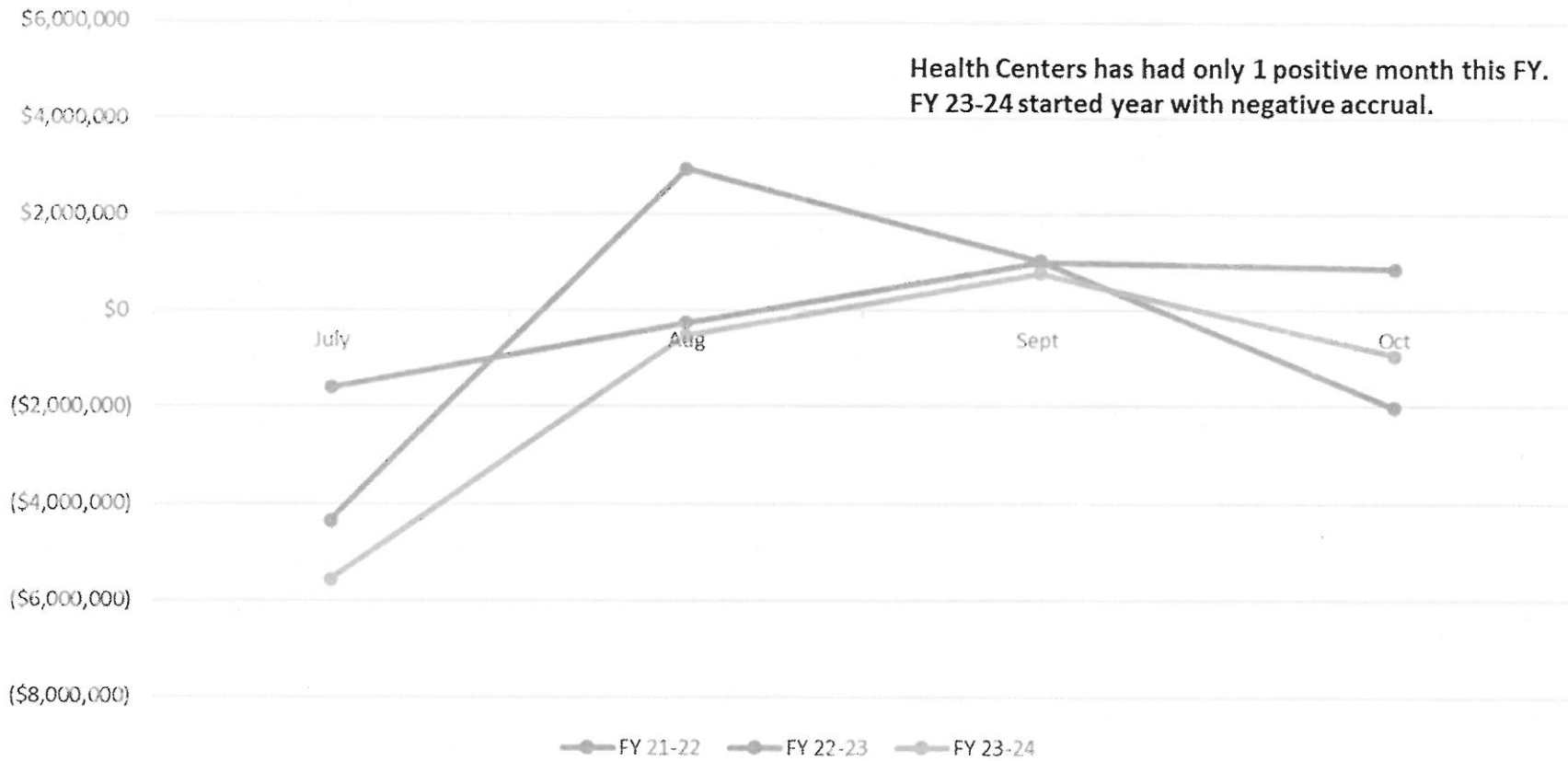
Current status on revenue  
generating vacancies

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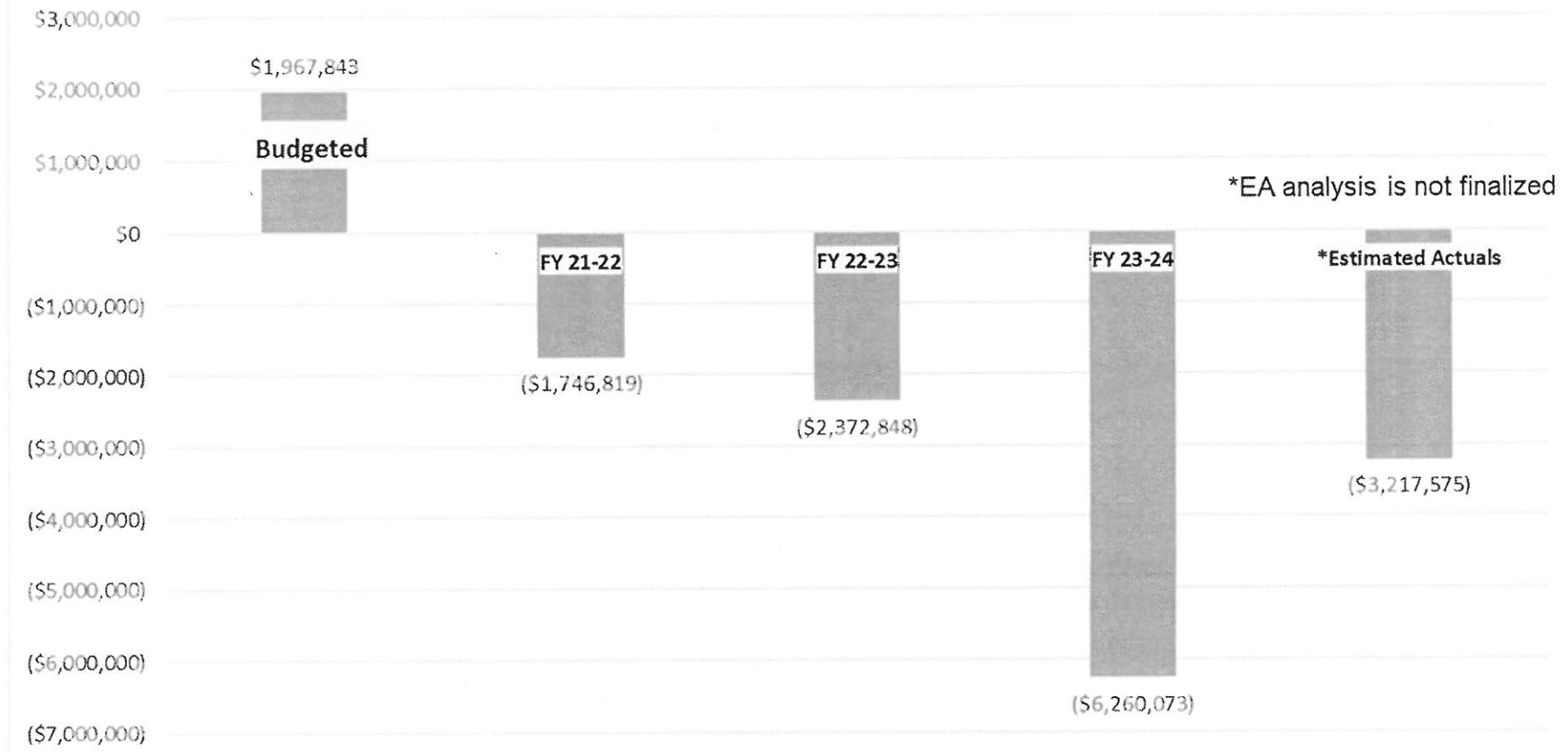


### Revenue vs Expenditure by Month

Health Centers has had only 1 positive month this FY.  
FY 23-24 started year with negative accrual.



### YTD Net County Cost FY comparison



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**\$4.8 M**

Health Centers currently has almost five million dollars in claims awaiting reimbursement.

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**\$1,800,000**

Health Centers will be able to draw down almost 2 million in base grant funds starting in February to cover costs through rest of the fiscal year. This is in addition to the grant funds mentioned on the next slide.

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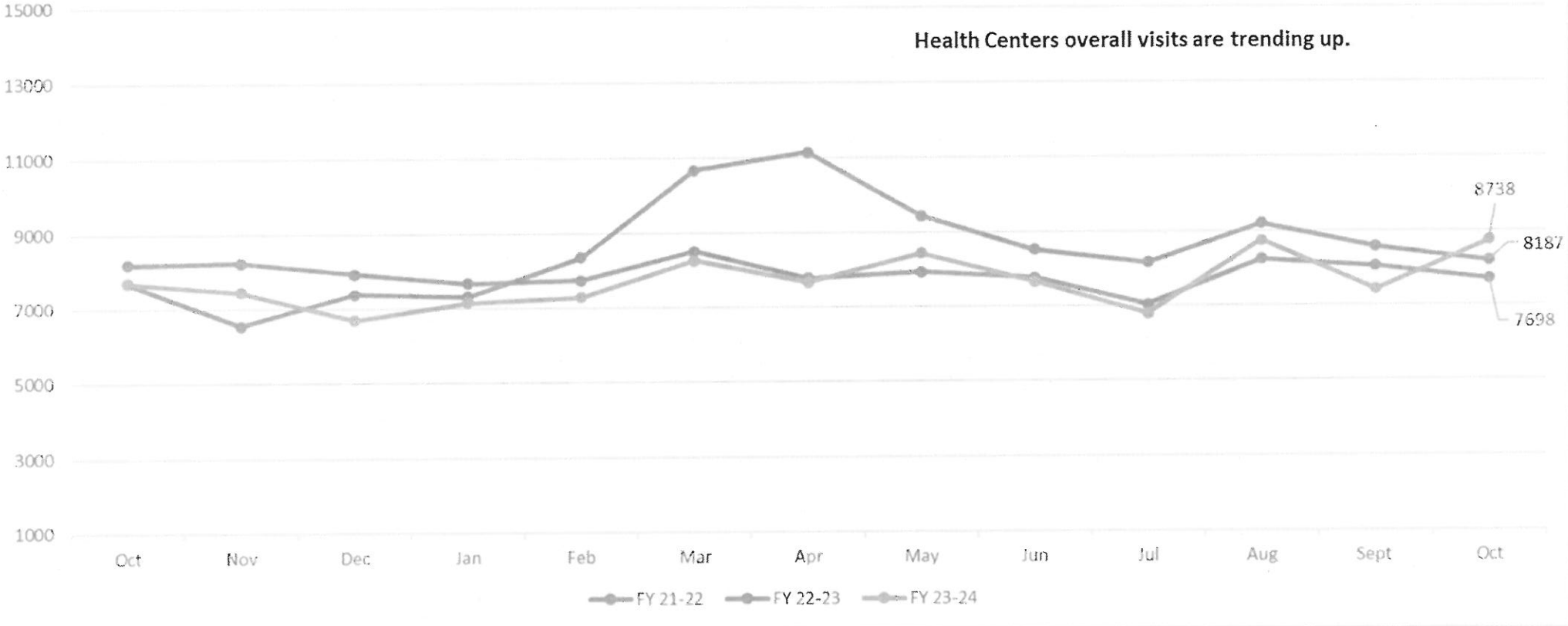
**\*\$2,457,267**

\*The verified total was not available at the time of the creation of this presentation. Health Centers has an estimated nearly 2.5 million in grant funds available for draw down after expenses occur.

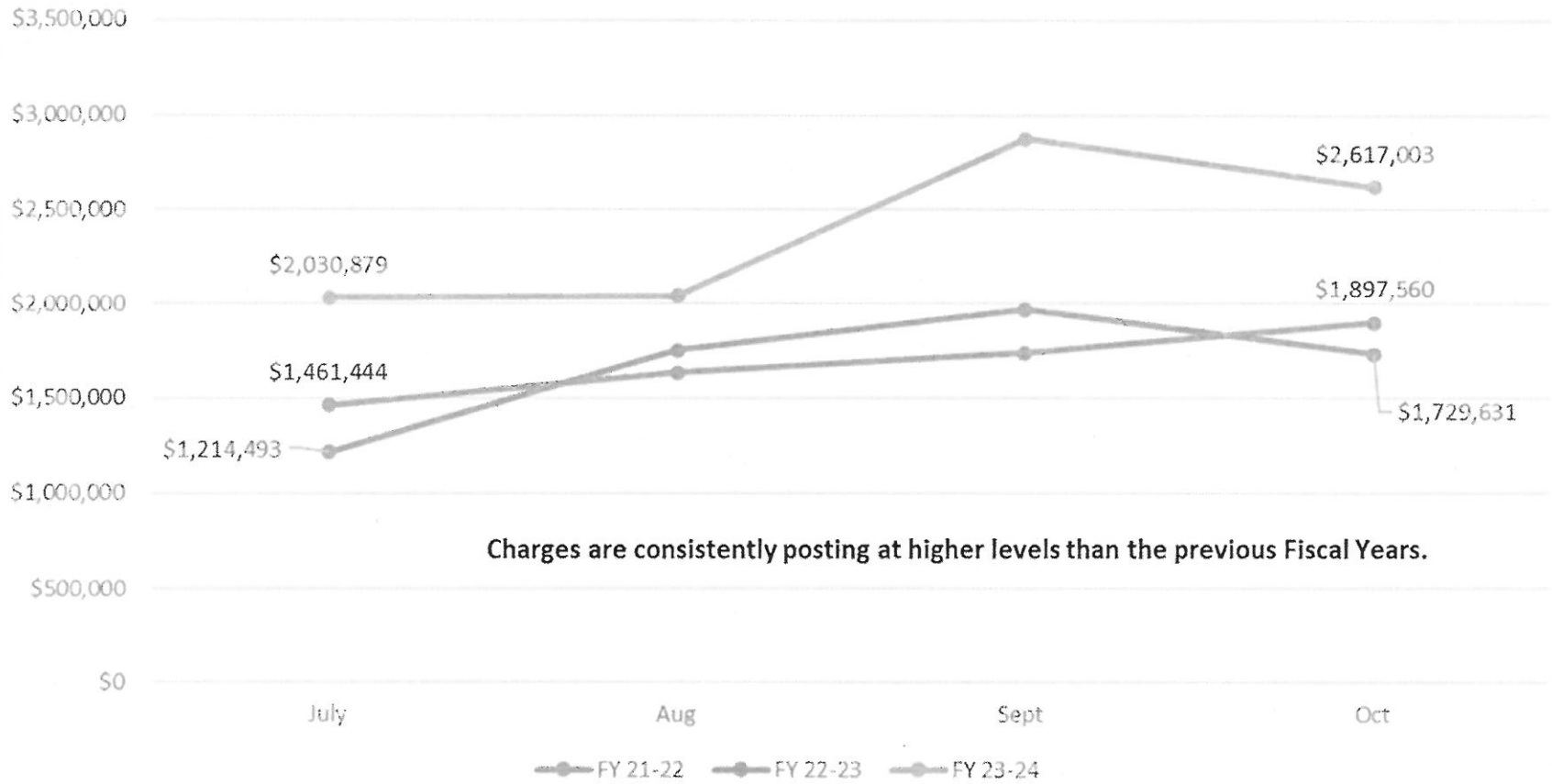
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### Completed Visit FYs comparison

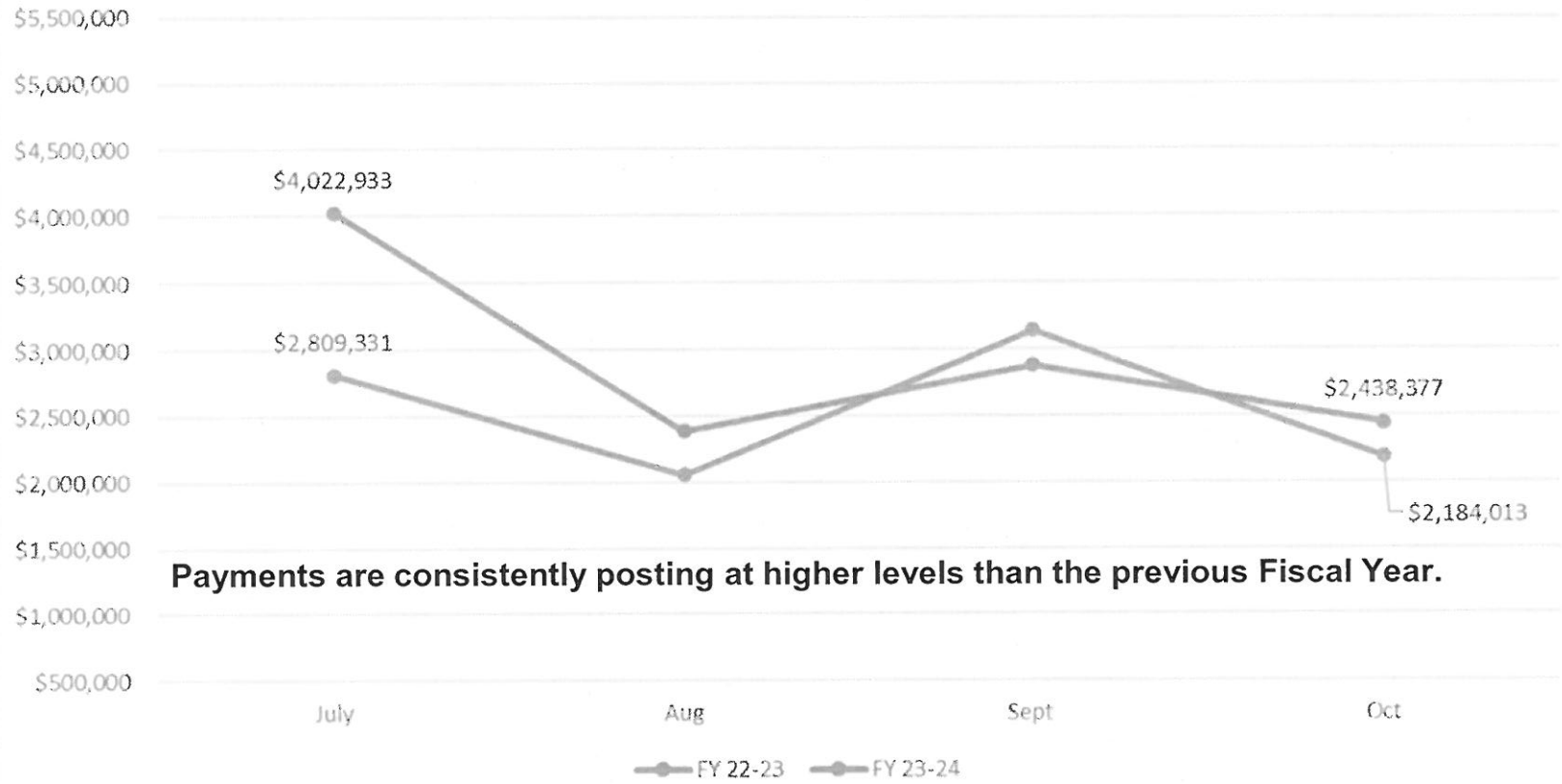
Health Centers overall visits are trending up.



### Charges Posted by Month



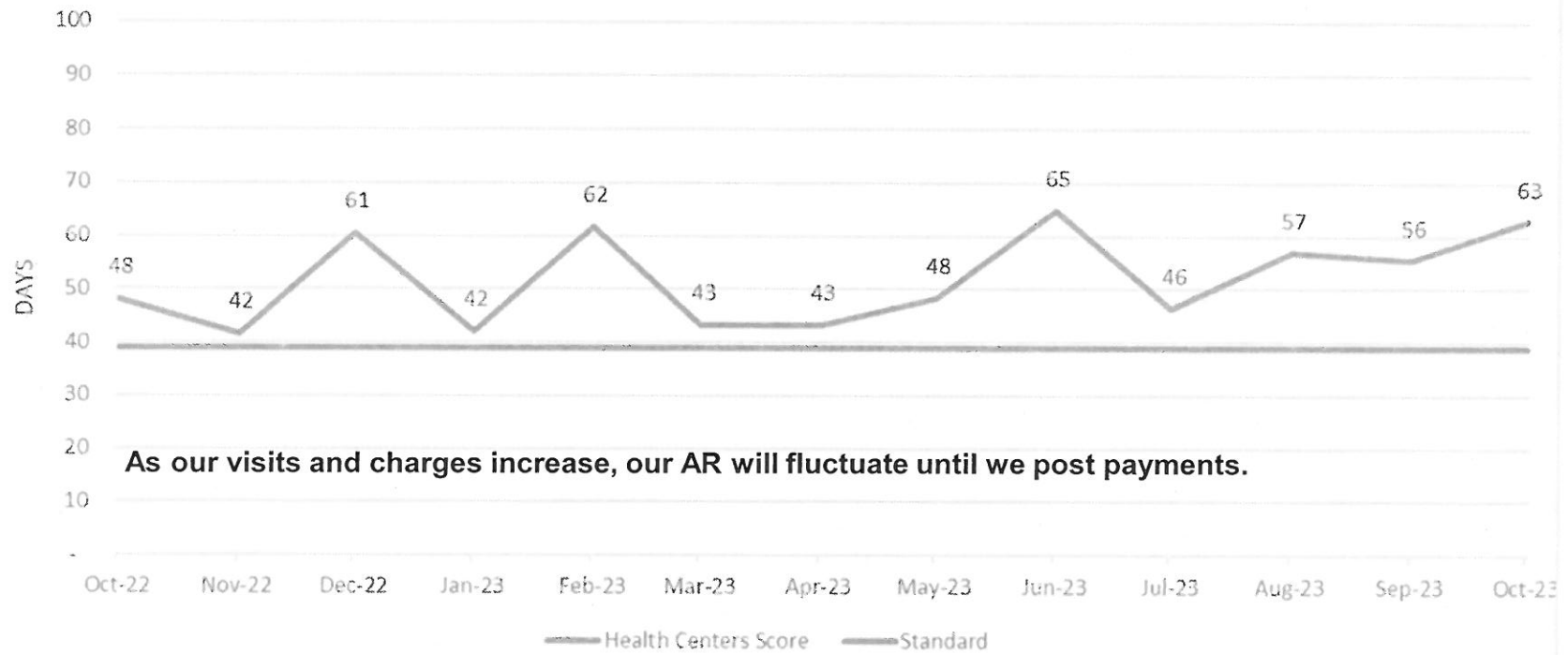
### Payments Received by Month



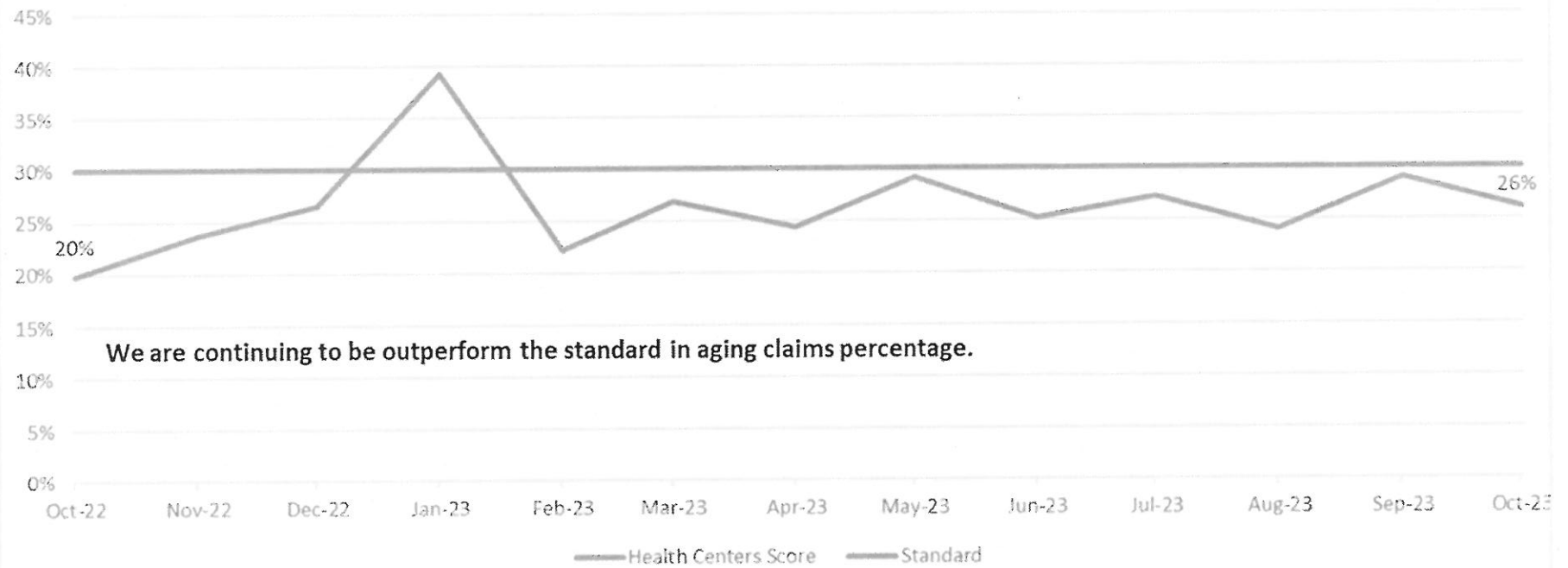
**Payments are consistently posting at higher levels than the previous Fiscal Year.**



### Days in Account Receivable (AR)

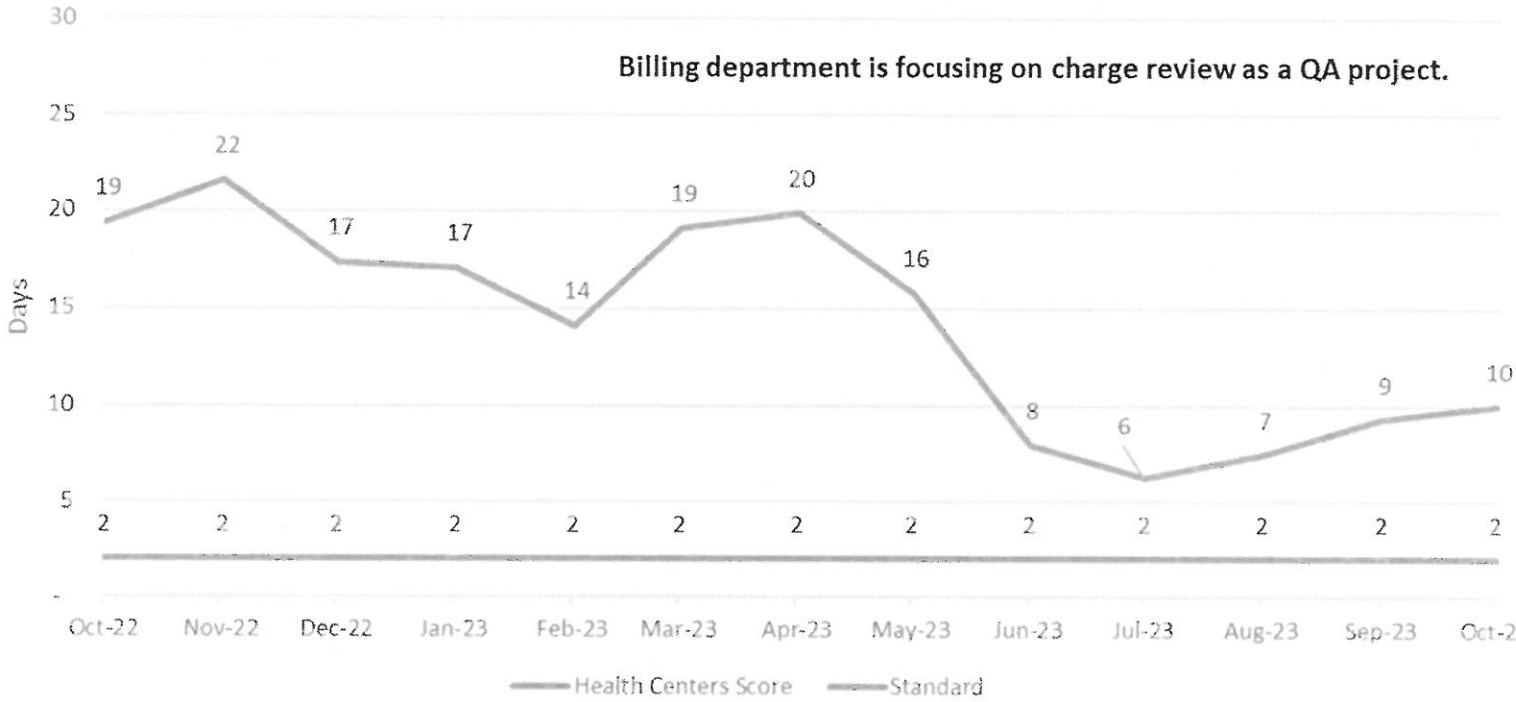


Percentage of Claims aged > 90 Days

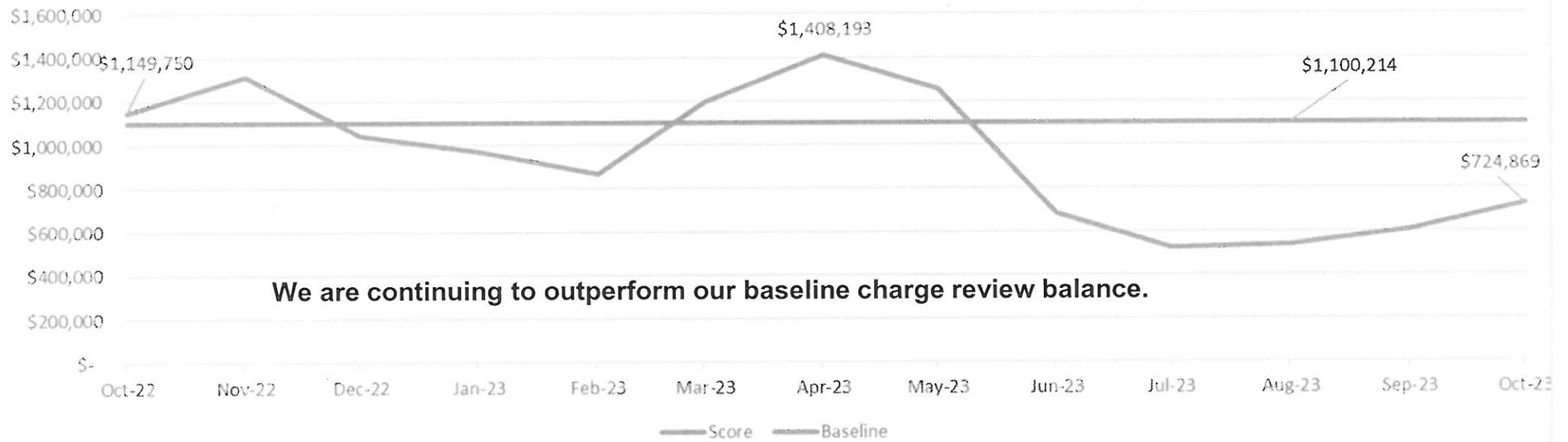


### Charge Review Days

Billing department is focusing on charge review as a QA project.

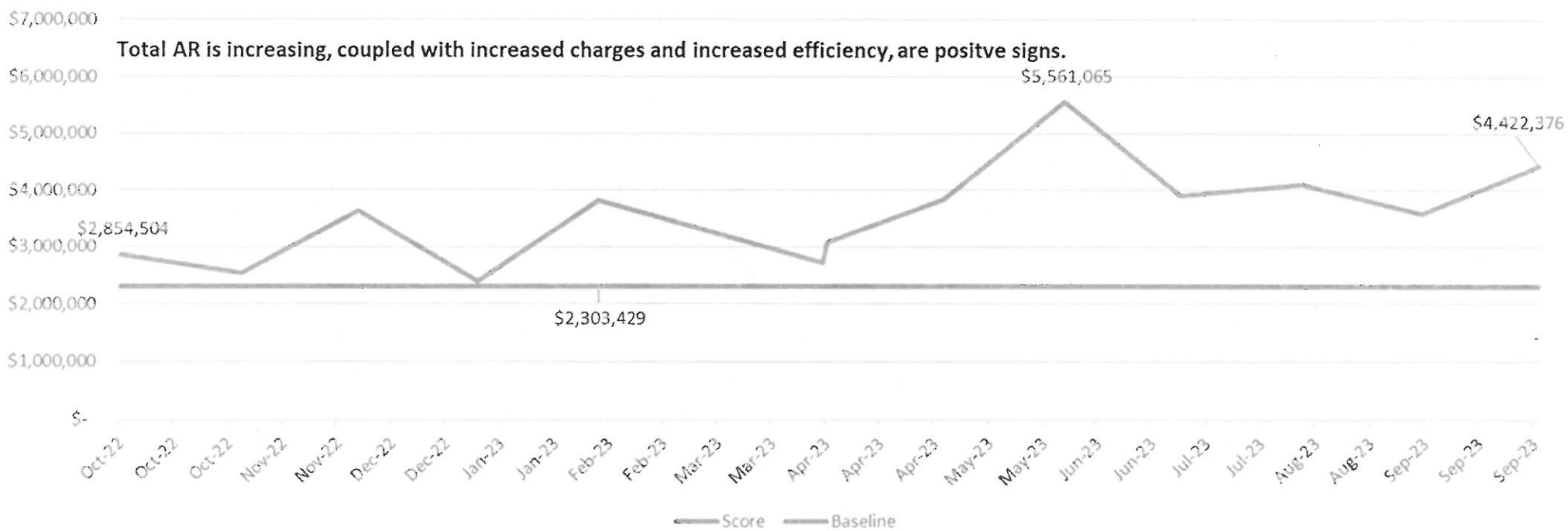


### Charge Review Balance



### Total Accounts Receivable

Total AR is increasing, coupled with increased charges and increased efficiency, are positive signs.



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**27%**

By December 4<sup>th</sup>, Health Centers will have reduced our therapist vacancy from 46% to 27%

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40%

With 2 new therapists and hopefully a clinical psychologist, IBH will reduce their therapist vacancy to 40%.

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**3.8%**

Health Centers just received an increase of our per visit reimbursement rate which went into effect on October 1<sup>st</sup>.

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**1 FTE**

Therapist or Psychologist

**1,392**

Visits in a Year

**\$563,342**

Earned in revenue assuming a minimum 6 visits per day

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**1 FTE**

MD/PA/NP

**2,784-3,944**

Visits in a Year

**\$1.2 – \$1.5 million**

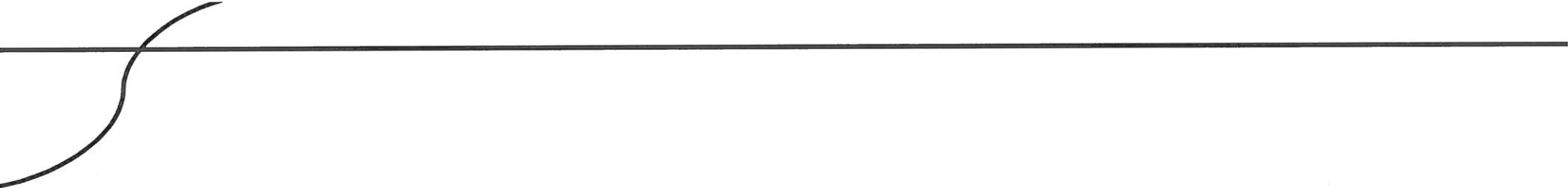
Earned in revenue assuming a range of 12-17  
visits per day

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# Current Provider Vacancies

- 3 Clinic Physicians
  - 2 Physician Assistant/Nurse Practitioners
  - 2 Clinical Psychologists
  - 1 Psychiatric MH Nurse Practitioner
  - 2 Medical Directors (job offer made for WHC Director)
    - Represents approx. \$9 Million in revenue
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“Health is a human right, not a  
privelege.”

–**Nelson Mandela**



# **Overdose Response at the Homeless Persons Health Project**

12/06/2023

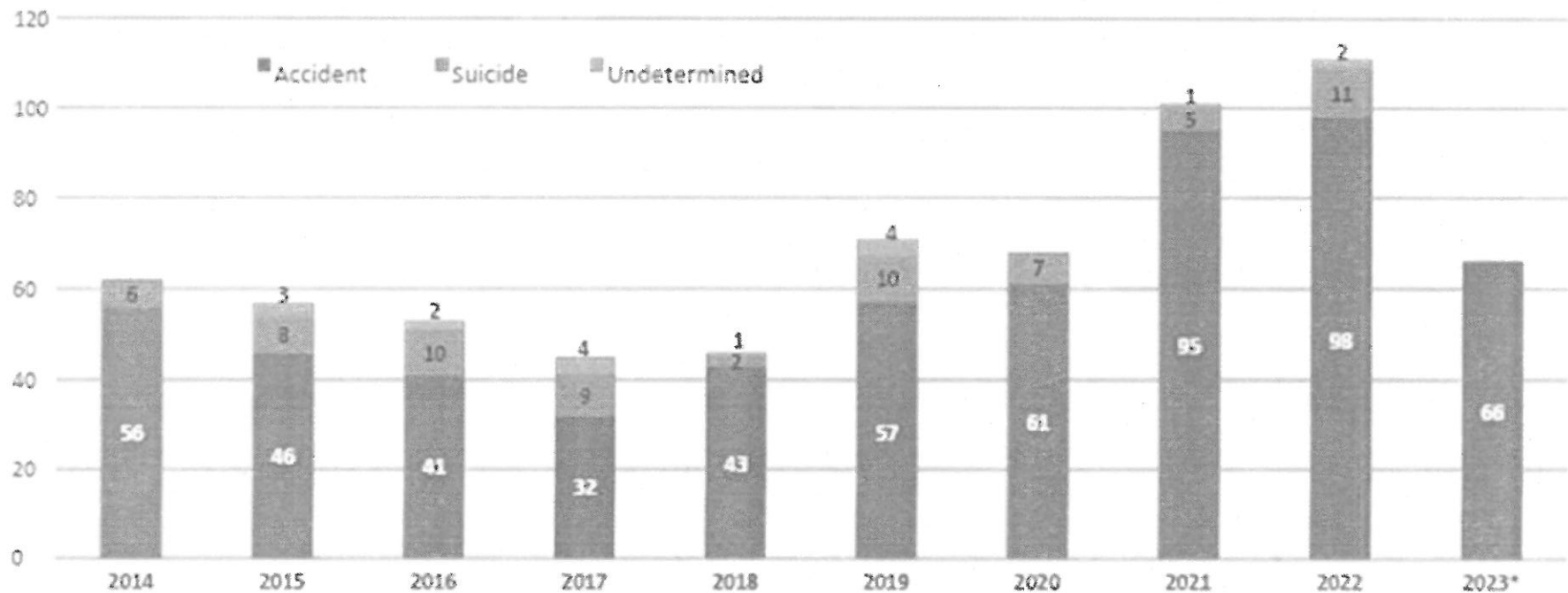
Presented by Joseph Crottogini, Health Center Manager; Cassie Cheddar, Public Health Nurse I; David Davis, Departmental Administrative Analyst

# EXAMPLES OF OPIOIDS

1. Fentanyl, a synthetic opioid
2. Heroin
3. Morphine
4. Codeine
5. Oxycodone (OxyContin/Percocet)
6. Hydrocodone (Vicodin)

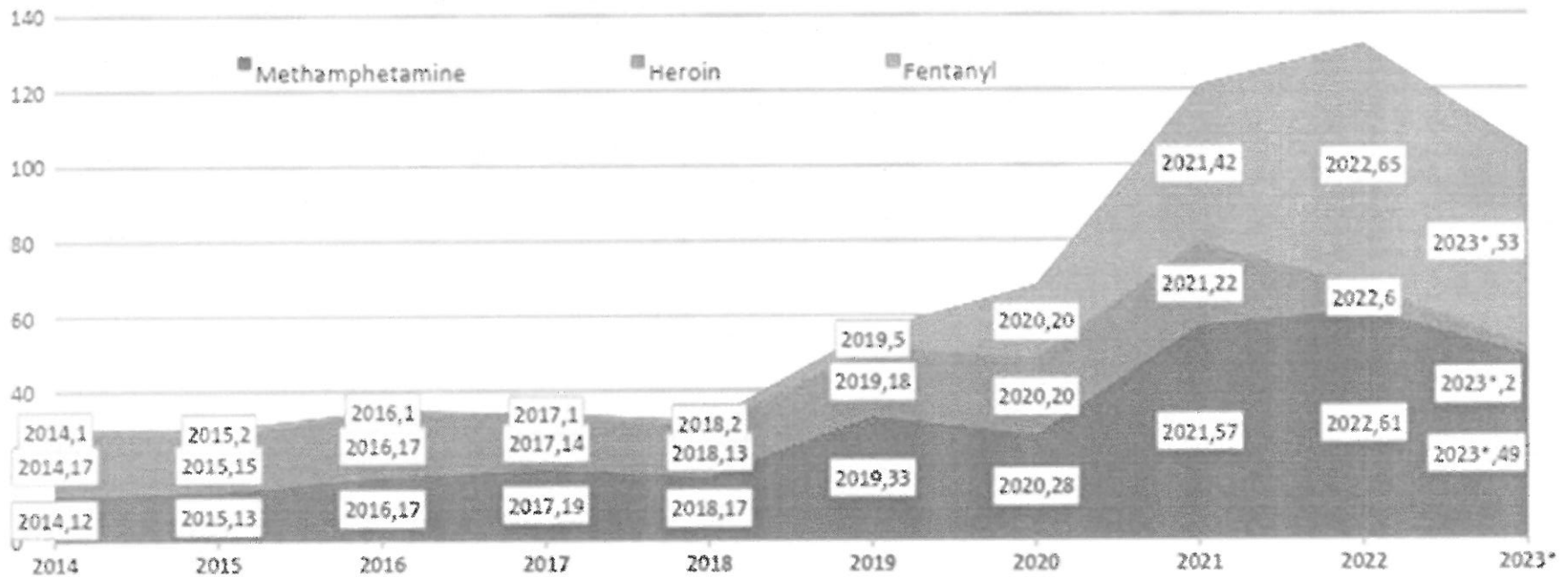


# Acute Drug-Related Deaths per Year by Manner of Death



\* Preliminary Data: Jan-Jun 2023, County of Santa Cruz Sheriff-Coroner's Office

# Methamphetamine, Heroin & Fentanyl



Preliminary Data:  
Jan-Jun



# Code Blue Response at HPHP

- Code blue = cardio-pulmonary emergency
- Most code blues for HPHP are accidental overdoses occurring outside the clinic
- Code Blue Protocol
- Safety when responding – its dangerous!
- Debriefing – Secondary Trauma



# Code Blue and Narcan Distribution

- HPHP responded to 32 Code Blues in 2023 due to accidental overdose, avg. 1/week, 1/3 of which are patients of Behavioral Health
- Over 8,000 units of nasal Narcan distributed in Santa Cruz County by HPHP in 2023, received for free through the CA Department of Health Care Services' Naloxone Distribution Project - [Naloxone\\_Distribution\\_Project \(ca.gov\)](https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Naloxone-Distribution-Project.aspx)
- Overdose Response Training provided by HPHP to other organizations, 1 on 1 with patients
- Accidental Overdose #1 cause of death among people experiencing homelessness in CA (CDPH, 2022)

# Actions to Prevent Overdose

1. Training staff, reviewing & updating Code Blue
  2. Offering MAT assessment and medication once patient regains consciousness (MAT bridge intervention)
  3. Coordinating interventions with our community partners post-overdose
  4. Exploring installing motion sensors in bathrooms used by patients - Brave Sensors
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Hi Joey,

As I told you earlier today, I watched your team save another life today. When [REDACTED] told us “a lady fell outside” it was a matter of seconds before Karina came running out the door. She asked, “where is she?”, I pointed to the lifeless body around the corner. Karina ran full speed toward the woman with Narcan packaging flying behind her as she was simultaneously opening the Narcan while she ran. She dropped to her knees and began administering the Narcan, One time, nothing, two times, nothing! She told me to help her move the woman to level ground, as other HPHP heroes arrived I was able to get out of the way. They were calling her by name trying to wake her and Adrienne began chest compressions. There was air being given and they began cutting her shirts so they could use the jumper cables. I thought this was the day I was going to watch someone die, but your team wasn’t having it.

I hate the drug and Substance Use Disorder that causes this, but I am so proud to know your team at HPHP. It must be heavy for them, and they can’t save everyone, but damn, they sure do save a lot.

RayeAnn Jimenez, CADC

*(Pronouns: she/her)*

Behavioral Health Service Coordinator

Substance Use Disorder Services

Behavioral Health Division

County of Santa Cruz Health Services Agency

# Good Samaritan Law

**There are legal protections if you administer Narcan:**

California Good Samaritan law protects you from civil liability when:

- you act in good faith,
- not seeking compensation,
- to render emergency medical or non-medical care at the scene of an emergency
- - **Civil Code 1714.22** - *Persons who administer naloxone in an emergency or who possess an opioid antagonist are protected from civil liability, criminal prosecution, or violation of any professional licensing statute, as long as the person received training information on 1) causes of an opiate overdose 2) mouth to mouth resuscitation 3) how to contact appropriate emergency medical services 4) how to administer an opiate antagonist, and believes in good faith the other person is experiencing a drug overdose and acts with reasonable care in administering naloxone.*
  - **Youth can carry Naloxone in California- and are covered by this law**



## What are Opioid Settlement Funds:

There were over 3,000 lawsuits against opioid manufacturers, distributors, and pharmacies in the U.S. for promoting and dispensing opioids they knew were dangerous and likely to be abused. Many defendants have settled and agreed to pay into a nationwide Opioid Settlement Fund.

Santa Cruz County will receive approximately 26 million dollars over the next 18 years from Opioid Settlement Funds.

## How Can Opioid Settlement Funds Be Used?

- Matching funds or costs for substance use disorder (SUD) facilities with an approved project within the Behavioral Health Continuum Infrastructure program (BHCIP)
- Creating new or expanded SUD treatment infrastructure
- Addressing the needs of communities of color and vulnerable populations, such as the unhoused population, that are disproportionately impacted by SUD
- Helping people with SUD into treatment programs and away from the justice system through community education and harm reduction strategies
- Interventions to prevent drug addiction in vulnerable youth
- Purchasing naloxone (Narcan) for distribution and efforts to expand access