



# Ventura County Community Health Center (CHC) Board Meeting Minutes

**Theresa Cho, MD**  
Ventura County Ambulatory Care  
Chief Executive Officer  
Medical Director  
CHC Executive Director

**Marth Ann Knutson**  
County of Ventura  
Assistant County Counsel

**Chaya Turrow**  
CHC Board Clerk

**Meeting Minutes**  
**April 25, 2024**  
**12:30 - 2:00 PM**

**2240 E Gonzalez Rd,**  
**Suite 200**  
**Oxnard, CA 93036**

**CHC BOARD MEMBERS:**

**DAVID TOVAR, District 3**  
Chair

**RALPH REYES, District 3**  
Vice Chair

**ESPY GONZALEZ, District 2**  
Secretary

**RENA SEPULVEDA, District 1**  
Treasurer

**MANUEL MINJARES, District 3**

**RENEE HIGGINS, MD, District 3**

**MELISSA LIVINGSTON, District 1**

**JAMES MASON, District 5**

**Call to Order:**

Ralph Reyes called the meeting to order at 12:37 PM.

**1. Roll Call**

David Tovar	Absent
Ralph Reyes	Present
Espy Gonzalez	Absent
Rena Sepulveda	Present
Manuel Minjares	Absent
Renee Higgins, MD	Present
Melissa Livingston	Present
James Mason	Present

**Roll call confirmed that a quorum was present.**

**2. Ventura County Staff Present**

Theresa Cho, MD, HCA – Ambulatory Care  
Marty Knutson – County Counsel  
Lizeth Barretto, HCA – Ambulatory Care  
Allison Blaze, HCA - Ambulatory Care  
Manny Buabeng, HCA – Ambulatory Care  
Michelle Meissner, HCA - Ambulatory Care  
Jason Cavender, HCA – Ambulatory Care  
Ivonne Hernandez, HCA – Ambulatory Care  
Christina Woods, HCA – Health Care Plan  
Dee Pupa, HCA – Health Care Plan

**Public Present**

Dr. Melody Schniepp

**3. Public Comments**

Dr. Melody Schniepp provided a public comment regarding urgent care providers. She has been an urgent care provider for 36 years. There are five urgent cares in the county system. They lost many providers during the merger in 2021. Last year Magnolia Urgent Care had days with single coverage where patients had to wait up to five hours. This year has been better since using per diem providers to supplement. HCA administration has been concerned with the total volume of patients seen in urgent care and that encounters have been down; therefore, double coverage is no longer financially feasible. Wait times are less than an hour with double coverage. Dr. Schniepp suggested two solutions: have a second provider for the first half of the day or allow patients to schedule a time to come back later. These ideas have been endorsed by the administration but have not been implemented.

Board Member Mason asked if this is the same issue at the front end and back end of the day because folks have to work? Dr. Schniepp said that sometimes it is busy at the end of the day, but nothing like the first three hours.

Board Member Higgins requested to add this as an agenda item for the next meeting.

**Action Items:**

**4. Approval of CHC Board Meeting Agenda for April 25, 2024**

Board Member Mason motioned to approve. Board Member Livingston seconded. Motion passed.

**5. Approval of CHC Minutes for March 28, 2024**

Board Member Higgins motioned to approve. Board Treasurer Sepulveda seconded. Board Member Mason abstained. Motion passed.

## 6. **Appointment of Nomination Committee for Officers (Chair, Vice Chair, Secretary, and Treasurer)**

Ms. Turrow explained that there will be one meeting prior to the next Board meeting where the nomination committee will determine who will be nominated for the 2024-2025 Officer positions of Chair, Vice Chair, Secretary, and Treasurer. Board members Ralph Reyes, Renee Higgins, and Rena Sepulveda volunteered to be a part of the nomination committee.

Board Member Livingston motioned to approve the nomination committee. Board Member Mason seconded. Motion passed.

## 7. **Review and Approve 2024 Q1 Quality Report**

Ms. Meissner shared the 2024 Q1 Quality Report.

### CY 2024 Q1 Performance:

There are six metrics already met – Chlamydia Screening, Child & Adolescent Well Care Visits, Well Baby 15, Comprehensive Diabetes Care, Asthma Medication Ratio, and Breast Cancer Screening. The care gaps are small double digits, and the team is confident they can reasonably close by end of year. The CDC Glycemic Status are inverted measures, meaning the goal is to decrease the numbers. Board Member Higgin asked if the depression screening is better? Ms. Meissner said they have changed the specs. All clinics are on iPads.

### Q1 Quality Initiatives:

The mobile mammogram events continued with GCHP and improved by 18 patients. The team determined the time of the year was better for patients. The events took place at Las Islas and Sierra Vista. All patients were well overdue for their appointment, and 40% had no prior mammograms.

There is a new depression screening metric. It will be a challenge to meet the metric with the changes. The team's Q1 focus was to educate the clinics on the new metric, develop the report and analyze the data, and establish best practices. The team is training all clinics to use Tonic to screen at every visit, review screening scores and encourage the provider to do a follow-up at the visit, document a diagnosis or order an antidepressant medication, and refer patient to BHI or schedule a follow-up visit within 30 days. The depression screening rate is a system-wide issue, but the follow-up visits are doing okay.

The Childhood Immunization Status shows that influenza and rotavirus are in the red, DTap and PCV are in the yellow, and the other six are in the green. The team has chart reviewed 170 of 941 fallouts from 2023 and they are starting to see trends. The majority are those that have refused vaccines, second are those that the vaccines are off schedule, which means the children are still receiving, just delayed. The third top reason for fallout is missed opportunity, which means that the vaccine was not documented for some reason.

### Patient Experience:

The Q1 complaints and grievances by source (Administration, GCHP, VCHCP) have decreased since Q4 due to improved access. Ms. Meissner also shared the complaints and grievances by clinic. The analyst team is working on this report weighted by size of clinic and should have it by

the next quarter's report. Las Islas has shown an increase from Q4. Board Member Livingston asked if these were unduplicated complaints and grievances? – Yes. Board Member Mason asked if these are by visits or health plan? – Visits. He would like to see both, if possible.

Ms. Meissner also shared the complaints and grievances by category. The categories have remained pretty much the same, but access complaints have seen a steady decline since Q3. This is due to Dr. Blaze hiring new providers. Ms. Meissner shared the complaints about wait times have increased and this directly aligns with the Las Islas complaints. The call center was picking up the overflow, but now they are seeing more from Las Islas.

The total incidents shared are those reported by staff. There has been a decline since Q3, but the team wants to continue to see the incidents reported so improvements can be made. The biggest positive jump was in medication/fluid where the pharmacist is working with the team. Board Vice Chair Reyes asked why the staff isn't reporting more? Ms. Meissner said the system is not intuitive and the staff become busy.

### Current Projects

The team is focused on the depression screening: updating Tonic, BHI engagement, and outreach. They are working on refreshing the old iPads or moving to Microsoft Surface Gos. Additionally, they are developing workflows for follow-up and streamlining referrals. The referrals could also take place over the phone, they don't need to be with a visit. Board Member Mason asked if there are any text platforms to help? Ms. Meissner confirmed there are, but the links are specific to patients, so the Artera team would need to learn Tonic and know what to do if someone comes back positive.

The team is also working on starting the HPV vaccination series no later than age 11. They are putting together more information and creating a text campaign for those who are overdue.

The team is partnering with Gold Coast to make improvements to asthma medication ratio. It is a complicated metric because it measures the ratio of control to reliever. They are mapping the process and will see where they can make improvements.

Board Member Mason asked about the IT staffing for HCA and Ambulatory Care. Dr. Cho said that HCA has a CIO, then there is a county-wide informatics team. Ambulatory Care has built a data team under Dr. Stern and Michelle. Board Member Mason would like to see if there is someone who can speak to the Board about what they're doing to help the quality team.

Board Treasurer Sepulveda motioned to approve the 2024 Q1 Quality Report. Board Member Higgins seconded. Motion passed.

## Presentation Items:

### **8. Conejo Valley Family Medical Group Presentation**

Ivonne Hernandez shared a presentation on the Conejo Valley Family Medical Group. Ms. Hernandez has been with the clinic for 21 years, working alongside Dr. Paulo Carvalho. The clinic has 35 exam rooms and is co-located with Behavioral Health and WIC.

The Conejo Valley Family Medical Group provides adult and pediatric primary care, internal

medicine, obstetrics, neurology, rheumatology, endocrinology, and orthopedics. Additionally, the clinic has an EKG, X-Rays, retinal exams, phlebotomy, a dietician, and behavioral health services with a Spanish-speaking therapist.

On average, the clinic has over 2,600 encounters per month, with a current no show rate of 8.5%. There is a support staff of 48. 58% of the staff have over 5 years of service at the Conejo clinic. There are 23 providers and 53% of the providers have over 5 years of service.

Board Member Higgins asked if there was specialty recruitment? Ms. Hernandez said that they are hiring for primary care. Currently having some issues with access because their exam rooms are almost full, but they are getting creative. They are setting up Saturdays for primary care – piloting in the middle of May.

## **Discussion Items:**

### **9. Continued Business**

#### **a. Board Recruitment**

Ms. Turrow shared that there is still a need for additional board members. Board Member Livingston will be retiring next year, as well. Able to accept consumer and non-consumer members.

Board Member Higgins asked if the district matters? Ms. Turrow mentioned that there are a lot of board members from District 1, so preferably from the other districts. Will provide a breakdown of how many patients per district at the next meeting. Currently no board members from District 4.

#### **b. Grants Updates**

Submitted the Expanding COVID-19 Final Report this past month.

Will have the UDS Submission presentation next month.

### **10. CEO Update – Theresa Cho, MD - HCA, Ambulatory Care**

Dr. Cho introduced Manny Buabeng as the new CFO of Ambulatory Care. Mr. Buabeng comes from Arizona and has previously worked for two hospitals. He previously worked for a FQ in New York and twenty years with the U.S. Navy, some of the time at Port Hueneme.

Dr. Cho also shared that the team submitted a change in scope as a strategy to improve the PPS rates (financial reimbursements for each encounter) for seven clinics. Six of these were a tentative increase, which we won't receive the full dollar amount but an amount that is greater than it is now, based on the projection. Magnolia will have a delay because a rate increase was previously submitted.

The team is working on service expansion at Magnolia by expanding addiction medicine services. There is an addiction medicine fellowship associated with the residency program, which is an extra

year of training for the residents. The hope is to expand the services at Magnolia using someone who has been trained through that fellowship and can provide services alongside support staff like the Behavioral Health Technician and Alcohol/Drug Treatment Specialist. This will be partly grant funded through the Opioid Settlement Fund. The grant funding would also train some primary care physicians so that there is someone at each of our clinics that can provide these services.

#### 11. Board Comments

Board Member Higgins would like to add Dr. Schniepp's Urgent Care Staffing question to the agenda for the next meeting.

Board Member Mason would like to add an item for the IT team to give a presentation – how they structure, prioritize, workflows, tools available, etc.

#### 12. Staff Comments

None.

#### 13. Adjournment – Adjourn 1:40 pm

Audio files of the CHC Co-Applicant Board meetings are available by contacting the CHC Co-Applicant Board Clerk at [chcboardclerk@ventura.org](mailto:chcboardclerk@ventura.org)

Minutes submitted by: Chaya Turrow, CHC Board Clerk

**Next Meeting: Thursday, May 23, 2024  
2240 E Gonzalez Rd, Suite 200, Oxnard, CA 93036**