



Ventura County Community Health Center (CHC) Board Meeting Minutes

**Meeting Minutes
January 23, 2025
12:30 - 2:00 PM**

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

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
Ventura County Ambulatory Care
CHC Co-Applicant Board Clerk

CHC BOARD MEMBERS:

RALPH REYES, District 3
Chair

RENA SEPULVEDA, District 1
Vice Chair

ESPY GONZALEZ, District 2
Secretary

JAMES MASON, District 5
Treasurer

MANUEL MINJARES, District 3

RENEE HIGGINS, MD, District 3

MELISSA LIVINGSTON, District 1

DAVID TOVAR, District 3

**LORETTA DENERING, DrPH, MPH,
District 2**

Call to Order:

Ralph Reyes called the meeting to order at 12:33 PM.

1. Roll Call

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

Roll call confirmed that a quorum was present.

2. **Ventura County Staff Present**

Theresa Cho, MD, Health Care Agency
Martha Knutson – County Counsel
Lizeth Barretto, HCA – Ambulatory Care
Allison Blaze, MD, HCA – Ambulatory Care
Octavius Gonzaga, HCA – Ambulatory Care
Michelle Meissner, HCA – Ambulatory Care
Dee Pupa, HCA – Health Care Plan

Public Present

None

3. **Public Comments**

None

Action Items:

4. **Approval of CHC Board Meeting Agenda for January 23, 2025**

Board Member Higgins motioned to approve the meeting agenda. Board Vice Chair Sepulveda seconded. Motion passed.

5. **Approval of CHC Minutes for December 12, 2024**

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

6. **Approval of the 2024 Annual Activity Report**

Board Member Higgins requested more time for review. Board Member Tovar motioned to table the approval to February. Board Vice Chair Sepulveda seconded. Motion passed.

7. **Approval of SFDP Rate Schedule**

Ms. Barretto shared the updated Sliding Fee Discount Program schedule. She clarified that this is only sliding fee and not the discount rate program. If a patient is in Program 5 or 200% Federal Poverty Level, they can apply for self-pay discount. This was approved by the Board of Supervisors in December. We updated Schedule C because it was auto adjusted in the system.

Ms. Barretto requested that the Board also approve the 2025 Federal Poverty Level Guidelines.

Board Member Livingston motioned to approve. Board Secretary Gonzalez seconded. Motion passed.

8. **Approval of Sierra Vista Site Addition**

We have added four additional exam rooms to our Simi Valley clinic, Sierra Vista Family Medical Clinic. While it is the same building and will be using the same staff and patients, the address is slightly different, therefore we need to add this site to our scope in HRSA. Board Member Higgins motioned to approve. Board Vice Chair Sepulveda seconded. Motion passed.

9. Review and Approval of Q4 Quality Report

Ms. Meissner shared the Q4 Quality Report.

CY 2024 Q4 Performance

Ended the year in a great position. Have not met the Influenza Immunization metric, but it technically doesn't end until March, so there is still time to make it up - although the care gap is pretty large. The team pushed heavily to meet the Child and Adolescent Well Care Visits and met and exceeded the metric. The Childhood Immunization status was not met, but there are only 14 patients out of 3,000, so there is the possibility of a statistical error. The clinics passed all the cancer screenings by a significant amount. Gold Coast implemented an incentive program, which helped.

Board Member Tovar asked if there was anything California Association or the State is doing to assist or engage patients for these metrics? Ms. Meissner said that the benchmarks have gone down, but influenza is still tough to reach.

At the 2024 SNI Conference, the team was honored with an award for their work on population health. Their project focused on collaboration with GCHP to expand access and improve performance rates for key preventative care services.

Q4 Quality Initiatives

The metrics the team focused on were breast cancer screening, cervical cancer screening, and chlamydia screening.

Cervical Cancer Screening – Clinics opened additional days and slots to perform well woman exams, including evenings and weekends. In collaboration with GCHP, the team hosted well woman health fairs on Wednesday evenings in December and saw over 100 patients at Magnolia Clinic, Las Islas Clinic, and Sierra Vista Clinic. Screenings increased from 746 in Q3 to 998 in Q4.

Breast Cancer Screening – Breast cancer screenings were close to meeting the 90th percentile. The team began meeting weekly with VCMC radiology team and hospital leadership. They hosted 11 Saturday and 17 evening mammogram events for GCHP patients at VCMC and SPH. Trained quality outreach staff how to schedule directly on the VCMC scheduling books for outreach via phone and text. They also re-implemented the GCHP Point of Care gift card incentive program at VCMC. They are now working to do the same at Santa Paula Hospital.

Mobile Mammogram Events – The team hosted three mobile mammogram events and served a total of 89 patients at Magnolia, Las Islas, and Sierra Vista. Breast Cancer screenings increased from 233 in Q3 to 308 in Q4.

Chlamydia Screening – In November, the team noticed the screening rates were

decreasing. They weren't pushing clinics quite as much and decided to work to turn it around. They educated the clinics on the importance of screening, discussed best practices, including screening patients at the beginning of their visit and providing patient education. Quality clerks and MAs conducted outreach calls to patients, and the team ran targeted outreach campaigns via text to bring patients in for urine screening.

2025 Goals

- The team have already begun outreach for babies and children who will age out of metrics in quarter 1 – want to catch them before their birthdays
- Outreach to patients who will become due in the next quarter instead of waiting for them to become overdue

Board Chair Reyes asked what the mammography scheduling was before? Ms. Meissner clarified that it was the hospital's radiology and then off a queue.

Board Secretary Gonzalez asked if the team still plans to do Saturday and Wednesday events? Ms. Meissner said that patients love the expanded hours and the team is looking to do them more spread out. They are looking at targets and metrics for the full year.

Board Member Higgins asked if it is easier to schedule with a centralized template? Ms. Meissner said, "kind of". There are more restraints and fewer slots.

Board Member Tovar asked if they found any strategies for higher acceptance rates between cervical and chlamydia screenings? Ms. Meissner said that more patients are willing to do the cervical cancer screening if they have a female provider. The chlamydia screenings work best when they collect a urine sample at the beginning of the visit. Providers also receive an interruption alert that asks if they want to screen.

Q4 Patient Experience

The complaints and grievances were pretty steady with Q3. They showed a smaller number with GCHP.

AFMC showed the highest number of complaints and grievances, but this could be due to the dynamics of the residency, medical refills, etc. Conejo, West Ventura, and Sierra Vista showed the next highest number.

The highest number of types of complaints and grievances (could be duplicated) were from accessibility, then communication, and thirdly from attitude/courtesy. The team is working to streamline which bucket the complaints and grievances actually go into.

Board Member Higgins said that due to our population size, is this number pretty good? Ms. Meissner said that they hadn't looked at that comparison before. But they do know that the Spanish-speaking population tends to not complain much.

The complaints and grievances by patient health plan roughly reflect the patients served by each plan.

Complaints about phone wait times hit an all time low in Q3, and then jumped a bit in Q4. This could be due to staff taking more time off around the holidays.

The accessibility complaints and grievances have been trending down for over a year but remained roughly flat compared to Q3. Board Member Tovar asked if there were specific clinics that dropped? Ms. Meissner said probably, but she doesn't have the stats.

Incident reporting is trending down from Q2, but the staff prefer to see more reporting. There is a similar breakdown and volume from 2023, except Abuse/Suspected Abuse. This is probably due to an issue in Q3 that required training on mandated reporting, which led to more reports.

Q4 Improvements

- Patient portal access for adolescents. There was a 1-year period where no one had access to a child's portal. The team piloted a program at Pediatric Diagnostic Center and Sierra Vista. The front office does most of the leg work. Board Member Higgins asked if the gap was verbiage of the law. Ms. Meissner confirmed that it was a disconnect between state and federal.

Board Secretary Gonzalez motioned to approve. Board Member Tovar seconded. Motion passed.

Discussion Items:

10. Continued Business

Ms. Turrow shared that the team is beginning UDS (Uniform Data System), which is when VCCHC is required to report information on patient characteristics, services provided, clinical processes and health outcomes, staffing, costs, etc. The report is due mid-February. The team will report the final UDS data to the CHC Board in April.

Ms. Turrow also mentioned that CHC Board recruitment is still taking place. Please continue reaching out to people who the Board Members feel would be a good fit.

11. CEO Update – Theresa Cho, MD - HCA, Ambulatory Care

Dr. Cho shared that the PPS rate resetting process is a long process. We are doing our audit. Of the three we have; we have resolved two to count those costs and reset our rate. We have a good appeal for a package we can present. This will increase our revenue per patient. One resolution is that we have an LMFT at Santa Paula West that is focused on our pride clinic. Also, Magnolia did not have a rate that extended back to 2016. Working with the State to give us \$12M that they owe us back.

Dr. Cho publicly announced that we have a new CEO that will join us mid-Feb. Dr. Vikram Kumar. He has a pediatric background and is from Riverside. He is currently the CHIO, which will provide insights into clinic operations and revenue cycle.

12. Board Comments

Board Member Livingston asked about the new Federal Administration? Dr. Cho shared that many clinics and physicians are concerned about areas that have been previously protected and if there will be immigration officials and such coming to sites. Dr. Cho said this threatens our ability to provide care. We will focus on telehealth. We will also see if they will protect liberties on the Federal level. Ms. Knutson said that there is an elusive directive and that there is no official document. ICE was put in place in the early part of the Obama Administration, and it did not include health facilities. Ms. Knutson is trying to find the actual copy of the directive.

13. Staff Comments

Ms. Pupa said that Gold Coast might recognize some of our clinics and HCA with some awards next week. Highest performing individual clinic, highest improving well-baby care at Las Islas, and most collaborative for HCA.

14. Adjournment - 1:28pm

Audio files of the CHC Co-Applicant Board meetings are available by contacting the CHC Co-Applicant Board Clerk at chcboardclerk@ventura.org

Minutes submitted by: Chaya Turrow, CHC Board Clerk

Next Meeting: Thursday, February 27, 2025
2240 E Gonzalez Rd, Suite 200, Oxnard, CA 93036