



Ventura County Community Health Center (CHC) Board Meeting Minutes

**Meeting Minutes
February 27, 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 12:38 PM.

1. Roll Call

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

Roll call confirmed that a quorum was present.

2. **Ventura County Staff Present**

Theresa Cho, MD, Health Care Agency
Vikram Kumar, MD, HCA – Ambulatory Care
Martha Knutson – County Counsel
Allison Blaze, MD, HCA – Ambulatory Care
Michelle Meissner, HCA - Ambulatory Care
Octavius Gonzaga, HCA – Ambulatory Care
Jason Cavender, 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 February 27, 2025**

Board Member Minjares motioned to approve the meeting agenda. Board Member Higgins seconded. Motion passed.

5. **Approval of CHC Minutes for January 23, 2025**

Board Treasurer Mason motioned to approve. Board Member Denering seconded. Motion passed.

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

Ms. Turrow shared the requested updates made to the Annual Activity Report, including adding labels to the map of the Health Centers, adding in the names and addresses of the Health Centers, and updating a couple pictures. Board Chair Reyes motioned to approve the Annual Activity Report to go to the Board of Supervisors. Board Treasurer Mason seconded. Motion passed.

7. **Presentation and Approval of 2025 Quality Assessment and Performance Improvement Program and Plan**

Ms. Meissner shared the Quality Assessment and Performance Improvement Program and Plan for 2025. On their initial evaluation, they determined that they took everything they tracked throughout the year and improved across the board. UDS demographics struggles, particularly with income. They did not meet childhood immunization and dental sealant targets. Magnolia Dental opened. There are currently five contractors. They collaborated with the Behavioral Health Integration team with ad hoc services and to develop BHI codes. Also Conejo Health, thru GCHP.

Board Member Higgins asked what level can do sealants? Dr. Cho confirmed MAs. They can give fluoride varnish. Dr. Blaze said that Gold Coast wants it five times per year and Dr. Kumar said national standard might be every visit. Dr. Blaze said that COVID slowed it down and Ms. Meissner said supply chain also slowed down.

There were a few grammatical changes and updates. Otherwise, the team updated the below:

2025 Goals and Objectives

- Reevaluated the goals to better align with what the team did the prior year.
- The *Patient Satisfaction* goals stay the same
- *Demographics* goal is to continue working through UDS and obtaining a more accurate demographic collection. Currently hoping to have fewer than 30% Unknown Income as Percent of Poverty Guideline in 2025 UDS and maintain or increase the reported number of patients experiencing homelessness.
- *Access to Care* was 86% to target last year and the team hopes to get to 90% this year.
- Reach the National Benchmarks or improve on last year's goals for *Clinical Quality – Selected Measures*.
- Updated the narrative and added in more specific goals for *Dental Services*.
- Added specific metrics with targets for *Behavioral Health*.

Dr. Kumar asked if the team needs to specify MCAS? Ms. Meissner said potentially, but they have, historically, focused on UDS. Other quality reports her team submits include this information.

Board Member Higgins asked about HRSA and other definitions of homelessness and how that affects the reporting. Ms. Meissner said that they are working on this every year. The front office staff is just not good at collecting. They currently use diagnostic codes for CalAIM. There are a few ideas in terms of using homeless management systems and processes from the CEO's office.

Board Member Higgins motioned to approve the Quality Assessment and Performance Improvement Program and Plan. Board Treasurer Mason seconded. The motion passed.

Discussion Items:

8. Continued Business

Ms. Turrow shared that the team submitted the UDS report. The final numbers were an improvement from last year, with 99,485 unduplicated patients, 5,750 of those patients were those experiencing homelessness. Many of the clarifying questions were asking why there was an increase, which is a good sign. The team is waiting for the reviewer to respond with any further questions. The team plans to present the full report and findings at the May meeting.

Ms. Turrow also shared some graphs showing where we need to recruit for the Board. Currently doing fine with Consumer members, but it's always good to have a buffer.

Board Member Higgins suggested asking the Board of Supervisors for recommendations. Provide them with background of the board, responsibilities, and the demographic balance.

9. **HCA Director / CHC Executive Director Update – Theresa Cho, MD - HCA**

Dr. Cho clarified that she is talking with all departments in the Health Care Agency that our daily business is taken care of (AC, hospital, etc.). There is a lot of messaging through the federal government. Access to care is still very much our mission and our community needs primary care. Ensuring we are offering telehealth. The agency is receiving questions from patients asking if there is law enforcement at the clinic. Marty and Dr. Cho have been talking to County Counsel and there is a policy in the works. There are also questions about gender affirming care. We have it at a clinic in Santa Paula. Most providers are still providing.

Dr. Blaze is recruiting for pediatric specialty. With some of the local pediatric closures, the county will be ready to provide specialists at high level care.

There is a lot of conjecture about Medicare/Medicaid being affected. Bracing ourselves, in case. The supplemental funding (mission critical dollars) has increased, which is good. Likely DSH funds will be cut, and the supplemental funding makes up for the funds that are going away. When other programs grow, such as QIP, there is a lower share of the pot. In recognition of that, the pot has been expanded. Ms. Meissner and her quality team have done a great job of this.

Launched an AI scribe program at our clinics. The program takes our information and synthesizes the information. Those who have adopted it are not using after hours to complete tasks, etc. Board Member Minjares asked if it records audio. Dr. Cho confirmed that it does, momentarily saves to the cloud while processing, and then is deleted.

Finally, the team is working on upgrading the WiFi network to something that is medical grade. Some clinics struggle to have good WiFi that is not spotty.

10. **Board Comments** - None

11. **Staff Comments**

Dr. Blaze requested to have PDC present to the board.

12. **Adjournment - 1:18pm**

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, March 27, 2025
2240 E Gonzalez Rd, Suite 200, Oxnard, CA 93036**