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**SJCC BOARD OF DIRECTORS ATTENDANCE RECORD 2020**

2020 Meeting Dates

Member Name	Patient? Yes / No	Joined Board	1/8/20 Board Training	1/28/20	2/25/20	3/31/20	4/28/20	5/26/20	6/30/20	7/28/20	8/25/20	9/29/20	10/27/20	11/24/20	12/29/20
Baskett, Mike	No	2018	AE	P	P	P	P	P							
Cortez, Ismael	Yes	2011	P	AE	P	P	P	P							
Heck, Brian	No	2019	P	P	P	P	P	P							
Maldonado, Alvin	Yes	2011	AE	AE	AE	P	P	AU							
Medina, Esgardo	Yes	2018	P	P	P	AE	P	P							
Mills, Mary	No	2010	P	P	AE	P	P	AU							
Place, Rod	No	2010	AE	P	P	P	P	P							
Sandoval, Luz Maria	Yes	2013	P	P	P	P	P	AU							
Toutai, Melanie	No	2019	P	P	P	AE	P	P							
Yonemoto, Alicia	Yes	2014	AE	P	AE	P	P	P							

CODE P = Present

Code AE = Absence Excused

CODE AU = Absence Unexcused

INITIAL APPOINTMENTS  
JUNE 2020

The following practitioners have applied for membership and privileges at San Joaquin General Hospital. The following summary includes factors that determine membership: licensure, DEA, professional liability insurance, required certifications (if applicable), etc. Factors that determine competency include medical/professional education, internship/residencies/fellowships, board certification (if applicable), current and previous hospital and other institutional affiliations, physical and mental health status, peer references, and past or pending professional disciplinary action. The applicants meet the requirements for membership unless noted below.

Membership Request	Name	Specialty/ Assigned Div/Dept	Competency / Privilege Review	Proctoring Required	Proctor	Rec Status/Term	Recommend
			No Initial Appointments on this report				

REAPPOINTMENTS

JUNE 2020

The following practitioners have applied for reappointment to the Medical Staff of San Joaquin General Hospital. This summary includes factors that determine membership: licensure, DEA, professional liability insurance, hospital affiliations, etc. Qualitative/quantitative factors include ongoing performance evaluation which includes data from peer review, quality performance, clinical activity, privileges, competence, technical skill, behavior, health status, medical records, blood review, medication usage, litigation history, utilization and continuity of care. affiliations, physical and mental health status, peer references, and past or pending professional disciplinary action. All the applicants privilege request commensurate with training, experience and current competence unless noted below.

Membership Request	Name	Specialty/ Assigned Div/Dept	Quantitative/Qualitative Factors Request for Privileges and/or Privilege Change	Action Taken/Rec. Exceptions for Cause	Rec. Staff Category/ Reappoint Period	Recommend
Reappointment	Toni Moody, MD	Pediatric	Requirements for Active Staff met.	None	Active 08/2020 to 08/2022	CRED: 06/02/2020 MEC: 06/16/2020 Board: 07/07/2020
Reappointment	Sreelatha Pottala, MD	OB/GYN	Requirements for Active Staff met.	None	Active 08/2020 to 08/2022	CRED: 06/02/2020 MEC: 06/16/2020 Board: 07/07/2020
Reappointment	Spencer Wong, MD	Family Medicine	Requirements for Courtesy Staff met.	None	Courtesy 08/2020 to 08/2022	CRED: 06/02/2020 MEC: 06/16/2020 Board: 07/07/2020

ADVANCEMENTS

JUNE 2020

The following practitioners are being advanced to their requested staff status to the Medical Staff of San Joaquin General Hospital. This summary includes factors that determine membership: licensure, DEA, professional liability insurance, hospital affiliations, etc. Qualitative/quantitative factors include ongoing performance evaluation which includes data from peer review, quality performance, clinical activity, privileges, competence, technical skill, behavior, health status, medical records, blood review, medication usage, litigation history, utilization and continuity of care.

Name	Specialty/Assigned Div/Dept	Current Category of Membership	Recommended Category	Reason	Recommend
Ramona Bahnam, MD	Family Medicine	Provisional	Active Staff	Proctoring Requirements Completed	Dept: 06/02/2020 Cred: 06/16/2020 MEC: 07/07/2020
Jackline Grace, MD	Family Medicine	Provisional	Active Staff	Proctoring Requirements Completed	Dept: 06/02/2020 Cred: 06/16/2020 MEC: 07/07/2020
Annie Thor, CNM	Nurse Midwife/OB/GYN	Provisional	Allied Health Professional	Proctoring Complete	Dept: 06/02/2020 Cred: 06/16/2020 MEC: 07/07/2020

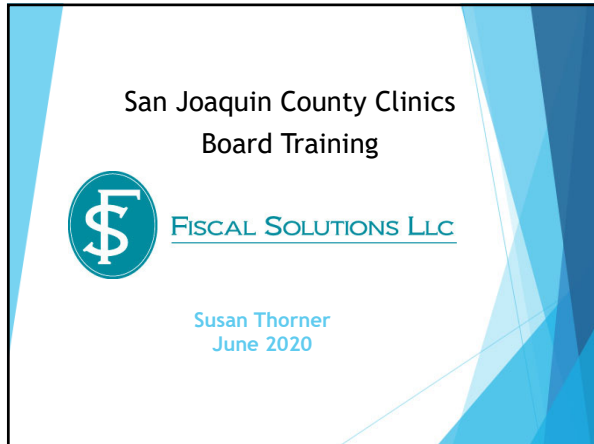
NEW PRIVILEGE REQUEST  
JUNE 2020

Name	Specialty/Assigned Div/Dept	Competency Privilege	Recommend
Robert Assibey, MD *	Family Medicine	Active	Dept: 06/02/2020 Cred: 06/16/2020 BOARD: 07/07/2020

\* Provider is moving from moonlighting to Attending.

**RESIGNATIONS**  
**JUNE 2020**

<b>Name</b>	<b>Reason for Resignation:</b>	<b>Effective Date of Resignation</b>
Crisoforo Garza, MD	Resignation Received	Jun-20
Esther Ogunjimi, MD	Resignation Received	Jun-20
Ashish Loomba, MD	Resignation Received	Jun-20
Neha Vashishtha, MD	Resignation Received	Jun-20
Johnny Yep, DO	Resignation Received	Jun-20
Richard Slarve, MD	Resignation Received	Jun-20



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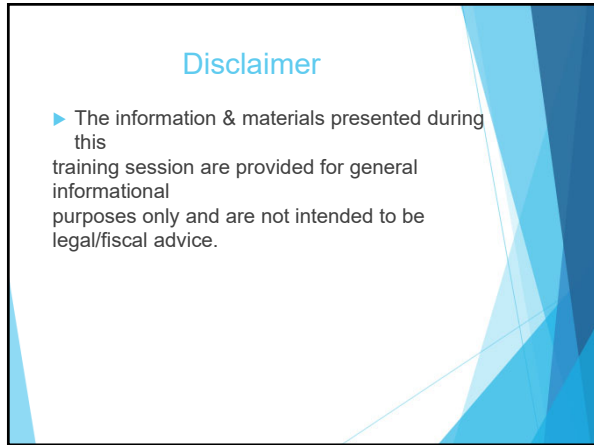
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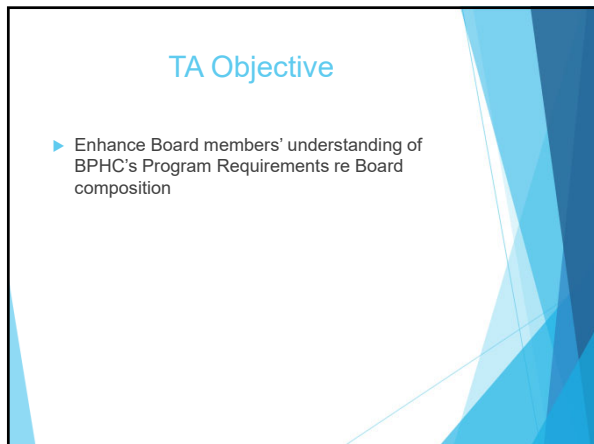
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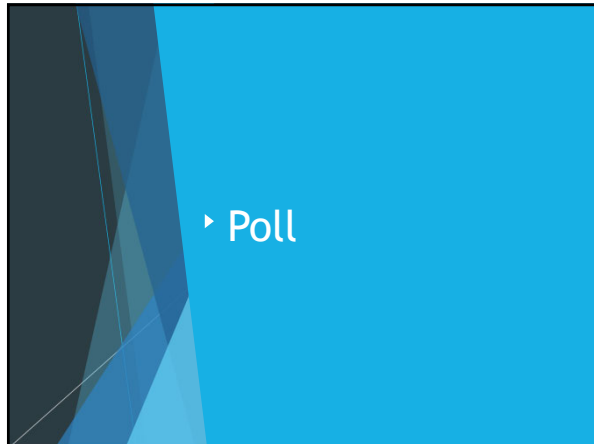
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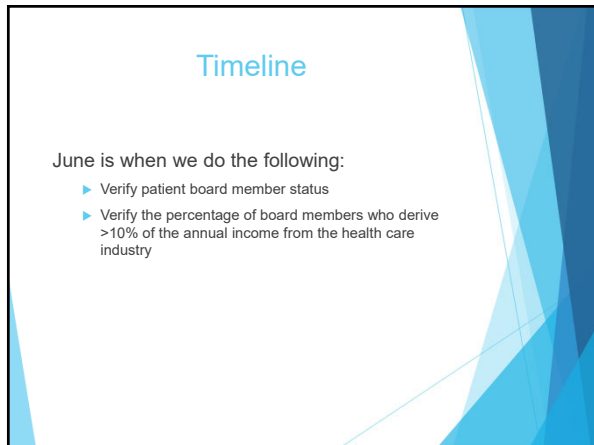
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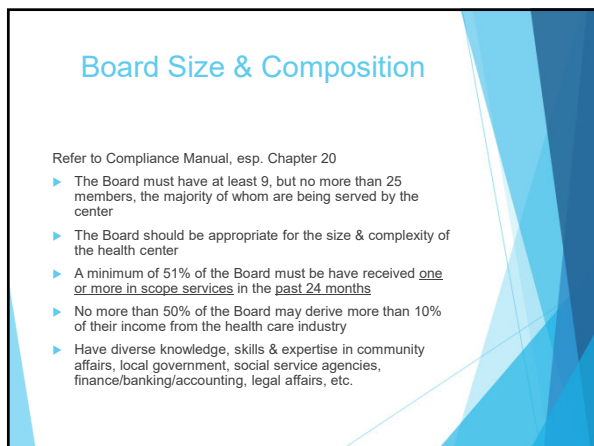
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### Board Composition

- ▶ In addition, the patient members of the Board should reflect the population(s) served by the health center in terms of race, ethnicity & gender
- ▶ A parent or legal guardian of a dependent child or adult or the legal sponsor of an immigrant, may also be considered a patient for the purposes of Board representation
- ▶ For health centers receiving section 330 (e), (g), (h) or (i), there must be at least one representative of each special population for which the health center receives funds

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### Board Composition

▶ Characteristics of High Performing Boards:

- ▶ Content expertise – law, finance, quality improvement, risk management, insurance, etc.
- ▶ Emotional intelligence – active listeners who can articulate ideas & respectfully debate positions; able to facilitate interpersonal dynamics & build consensus
- ▶ Passion for the mission – is committed to the mission, appreciates the values of the health center & can effectively communicate them to the larger community; Labor of love
- ▶ Advocacy – knows the community, its needs & effectively advocates for the health center patients

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### Board Composition

Characteristics of High Performing Boards:

- ▶ Knowledgeable about the community &/or marketplace trends
- ▶ Understands the concept & operation of a health center/willing to learn
- ▶ Ability to read & understand a standard financial statement/willing to learn
- ▶ Exercises appropriate oversight
- ▶ Comes to meetings/calls prepared
- ▶ Participates actively in the Board & Committees

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### Helpful Qualities for Prospective Board Members

- ▶ Maintains confidentiality
- ▶ Keeps current
- ▶ Do they ask questions?
- ▶ Do they know the center's mission, purpose & goals as well as its programs & services?
- ▶ Do they understand the center's strengths & weaknesses?
- ▶ Do they pitch in enthusiastically & willingly?

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### Helpful Qualities for Prospective Board Members

- ▶ Do they make sure they have all the information before expressing an opinion or a judgment?
- ▶ Do they come prepared to participate?
- ▶ Will they support the majority even if they disagree?
- ▶ Will they support the CEO & staff & understand that they are operating with limited resources?
- ▶ Are they aware of & committed to avoid any possible conflict of interest?

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### Helpful Qualities for Prospective Board Members

- ▶ Do they maintain a sense of fairness, ethics & personal integrity?
- ▶ Do they have a sense of humor?
- ▶ Is this someone who won't interfere with day-to-day operations of the health center?
- ▶ Do they understand the Center's financial statement & help the board plan for future revenue & expenses?

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**SJCC Board Roster**  
December 2019

Board Member Name	Board Office Held	Area of Expertise	Health Center	Live or Work in District	Service Area	Board Service	Gender	Ethnicity	Race
1 Fred Rice	Chairman	Computer Technology	Yes	Live, Work	April 2012	Male	Non-Hispanic	White	
2 Lou Mesa-Sanzol	Chairman	Community Organizer	Yes	Live, Work	August 2013	Female	Hispanic	White	
3 Susan Lopez	Co-Chair	Administrative Management	Yes	Live, Work	June 2011	Male	Hispanic	White	
4 Alicia Lorenzolo	Vice-Chair	Community Organizer	Yes	Live	June 2015	Female	Non-Hispanic	Asian	
5 Alan Meléndez	Member	Community Organizer	Yes	Live	June 2011	Male	Hispanic	White	
6 Mayrilly Moya	Member	CNMI Care	No	Live	June 2016	Female	Non-Hispanic	African American	
7 Eugene Melrose	Member	Community Organizer	Yes	Live	May 2016	Male	Hispanic	White	
8 Brian Neph	Member	Site Manager	No	Live, Work	August 2018	Male	Non-Hispanic	White	
9 Michael A. Barrett	Member	US Coast Guard Auxiliary	No	Live, Work	October 2018	Male	Non-Hispanic	White	
10 Michele Tustin	Member	Student Nursing	No	Live, Work	November 2019	Female	Non-Hispanic	White	

Gender	Count	Percentage
Male	4	40.00%
Female	6	60.00%
Unreported/Not Used	0	0.00%

Ethnicity	Count	Percentage
Hispanic	4	40.00%
Non-Hispanic	6	60.00%
Unreported/Not Used	0	0.00%

Race	Count	Percentage
Asian American	0	0.00%
Other Pacific Islander	0	0.00%
Black	1	10.00%
Hispanic American	1	10.00%
American Indian/Alaska	0	0.00%
White	6	60.00%
More Than One Race	0	0.00%
Unreported/Not Used	0	0.00%

SJCC Demographics	Count	Percentage
Hispanic	202,109	40.11%
Non-Hispanic	424,398	59.89%

SJCC Demographics	Race	Count	Percentage
Hispanic	White	1,567	0.59%
Non-Hispanic	Other Pacific Islander	3,281	0.54%
Non-Hispanic	Black	369,326	13.74%
Non-Hispanic	Hispanic American	52,263	0.93%
Non-Hispanic	American Indian/Alaska	4,852	0.74%
Non-Hispanic	White	401,059	64.43%
Non-Hispanic	More Than One Race	52,273	9.31%
Non-Hispanic	Unreported/Not Used	632,700	100.00%

1 Includes Gender Items more than 1% of counts from health industry.

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## Board Recruitment, Orientation & Training

- ▶ Consider a “farm team”
- ▶ Mentoring new Board members, especially consumers
- ▶ Develop & implement an annual training calendar
  - ▶ Frequency & length of trainings
  - ▶ Be flexible, priorities may change during the year
- ▶ Board Manual
  - ▶ This TA session & other F2F training sponsored by the PCA, NACHC
- ▶ BPHC webinars
- ▶ Documenting training

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## Resources

- ▶ Health Center Program Requirements
  - ▶ Compliance Manual  
<https://bphc.hrsa.gov/programrequirements/pdf/healthcenter-compliancemanual.pdf>
  - ▶ Health Center Program Site Visit Protocol  
<https://bphc.hrsa.gov/programrequirements/svprotocol.html>

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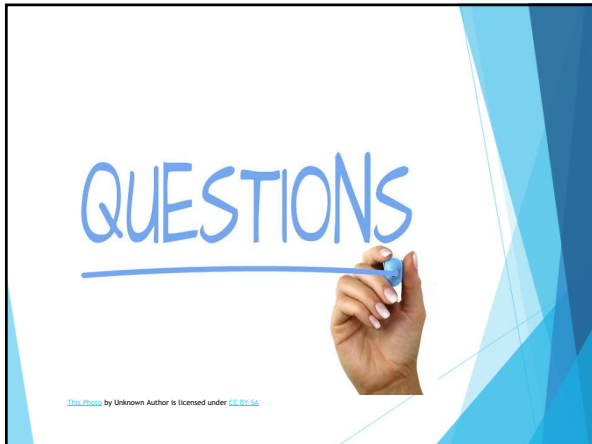
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# CEO Report – Previous 30 Days

- COVID19 response
  - Dynamic situation – F2F vs. virtual
  - Active screening measures in place for F2F visits
  - Drive-through testing with Verily Project Baseline
    - 250 scheduled/day, 6 days/week (tapering to 5 days/week starting July 1)
  - Homeless testing – encampments/shelters – see video
  - Occupational testing MOUs now extend to field testing migrant workers; additional interest from private sector
- Co-Applicant Agreement ratified by SJC BOS 6/16
- SJCC/SJGH formal MOU – Fiscal Solutions working on revision #3
- Grant activity – Jeff
  - HRSA ECT – \$592k for SJCC to support COVID response efforts, submitted 6/1
  - FCC
  - Title X (Essential Health Access)
  - IBH Prop 56
- PRIME DY15-YE report due 9/30 (reporting period ends 6/30)
- Monitoring extension of 1115 programs closely
- Hazelton and Manteca closures with transition of staff to remaining sites
  - New provider templates in effect (higher production)

# Revised SJCC Perpetual Annual Activity and Reporting Calendar – May 20, 2020

<p><b>January</b></p> <ul style="list-style-type: none"> <li>• Annual 700 Forms/Annual Conflict of Interest</li> <li>• <b>Audit Findings &amp; Action Plan</b></li> <li>• <b>Authority to Submit UDS Report</b></li> <li>• Strategic Plan Update</li> <li>• Financial Reports</li> <li>• <b>Approval of Capital Budget</b></li> <li>• Training:             <ul style="list-style-type: none"> <li>○ Budget Requirement</li> <li>○ Review Conflict of Interest Concepts &amp; Requirements (Use scenarios/case studies)</li> </ul> </li> </ul>	<p><b>February</b></p> <ul style="list-style-type: none"> <li>• Financial Reports</li> <li>• <b>Approval of Draft Operational SJCC Budget</b></li> <li>• <b>Approval of Capital Budget</b></li> <li>• <b>Review Sliding Fee Discount based on the Updated Poverty Guidelines</b></li> <li>• Training:             <ul style="list-style-type: none"> <li>○ Board Authority re Financial Management</li> <li>○ Contracts &amp; Subawards Requirement (Discuss purchasing implications)</li> <li>○ How to Read &amp; Understand Our Financial Reports</li> </ul> </li> </ul>	<p><b>March</b></p> <ul style="list-style-type: none"> <li>• <b>Quarterly QA/QI Report including PSS Summary</b></li> <li>• <b>Review Applicant/Co-Applicant Agreement</b></li> <li>• Financial Reports</li> <li>• Training: Billing &amp; Collections             <ul style="list-style-type: none"> <li>○ What does timely mean in terms of HRSA?</li> <li>○ Evaluation of EMMI contract</li> </ul> </li> </ul>
<p><b>April</b></p> <ul style="list-style-type: none"> <li>• Review of UDS Report Data (Submittal by 2/15)</li> <li>• <b>Zip Code Reconciliation</b></li> <li>• <b>Review Forms 5A &amp; 5B (&amp; as needed)</b></li> <li>• Financial Reports</li> <li>• Training:             <ul style="list-style-type: none"> <li>○ Review of UDS Data – What does it really tell us?</li> <li>○ Service Area Review and Alignment - Why we need to need to do zip code reconciliation?</li> <li>○ How it ties into needs assessment, community outreach and strategic planning</li> <li>○ Program Monitoring &amp; Data Reporting Requirement</li> </ul> </li> </ul>	<p><b>May</b></p> <ul style="list-style-type: none"> <li>• <b>Finalize Executive Director Evaluation (Closed Session)</b></li> <li>• Financial Reports</li> <li>• Training:             <ul style="list-style-type: none"> <li>○ Key Management Staff Requirement</li> <li>○ Continuity of Care &amp; Hospital Admitting Requirement</li> <li>○ Coverage for Emergencies During &amp; After-Hours Requirement</li> </ul> </li> </ul>	<p><b>June</b></p> <ul style="list-style-type: none"> <li>• <b>Quarterly QA/QI Report including PSS summary</b></li> <li>• <b>Election of Officers</b></li> <li>• <b>Approve SJCC Board Member term renewals (if needed)</b></li> <li>• <b>Review Applicant/Co-Applicant Agreement</b></li> <li>• <b>Review Board Terms Expirations</b></li> <li>• Executive Committee begins to prepare slate of officers for following FY</li> <li>• Verify Patient Board Member Status (minimum 51%)</li> <li>• Verify Percentage of Community Board Members Who Derive &gt;10% of Their Annual Income from the Health Care Industry</li> <li>• Board Self Evaluation</li> <li>• Financial Reports</li> <li>• Training:             <ul style="list-style-type: none"> <li>○ Board Composition Requirement &amp; Goals</li> </ul> </li> </ul>

**Yellow** = Requires action by Board  
**Grey** = Needs clarification

(May 2020)

# Revised SJCC Perpetual Annual Activity and Reporting Calendar – May 20, 2020

<p><b>July</b></p> <ul style="list-style-type: none"> <li>• Final SJCC Budget Approval</li> <li>• Annual Standards &amp; Compliance Report</li> <li>• Strategic Plan Update</li> <li>• Review Board Recruitment Strategy/Plan</li> <li>• Financial Reports</li> <li>• Training: Clinical Staffing -             <ul style="list-style-type: none"> <li>○ Credentialing &amp; Privileging – HRSA Requirement</li> <li>○ How does that differ from credentialing for third party payors?</li> <li>○ The impact of timely/delayed credentialing</li> </ul> </li> </ul>	<p><b>August</b></p> <ul style="list-style-type: none"> <li>• Annual Report from Executive Director, if available (due <i>no later</i> than 90 days after the end of the FY)</li> <li>• Authority to Submit Annual Certification</li> <li>• Financial Reports</li> <li>• Training:</li> <li>• What Did we Accomplish This Year?             <ul style="list-style-type: none"> <li>○ Interactive exercise such as newspaper headlines</li> </ul> </li> <li>• Promising Practices – Success Stories We Should Share</li> </ul>	<p><b>September</b></p> <ul style="list-style-type: none"> <li>• Quarterly QA/QI Report including PSS summary</li> <li>• Review Applicant/Co-Applicant Agreement</li> <li>• *Final Meeting to Present Annual Report from Executive Director</li> <li>• Annual Certification Due to HRSA (10/2 to be confirmed)</li> <li>• Need Assessment</li> <li>• Review Form 5C &amp; Outreach Plan</li> <li>• Financial Reports</li> <li>• Training:             <ul style="list-style-type: none"> <li>○ Why Needs Assessment is Important?</li> <li>○ Who’s not at the table? (Interactive exercise)</li> <li>○ Why Needs Assessment tie into strategic planning, community outreach Form 5C</li> <li>○ Review Collaborative Relationships Requirement - Who else should we be partnering with?</li> </ul> </li> </ul>
<p><b>October</b></p> <ul style="list-style-type: none"> <li>• Board Self- Evaluation</li> <li>• Review Forms 5A &amp; 5B</li> <li>• Financial Reports</li> <li>• Training:             <ul style="list-style-type: none"> <li>○ Required &amp; Additional Services</li> <li>○ Review of Board Authority</li> </ul> </li> </ul>	<p><b>November</b></p> <ul style="list-style-type: none"> <li>• *Statement of Information is to be filed with CA Secretary of State biennially. Next submission will be November 2020.</li> <li>• Establish SJCC Board Meeting Dates for the following year</li> <li>• Establish SJCC Board Training Calendar for the following year</li> <li>• Financial Reports</li> <li>• Training:             <ul style="list-style-type: none"> <li>○ Review of the Sliding Fee Discount Program Requirement – Purpose &amp; Why It’s a Cornerstone of the Federally Qualified Health Center Program</li> <li>○ How do we evaluate it?</li> </ul> </li> </ul>	<p><b>December</b></p> <ul style="list-style-type: none"> <li>• Quarterly QA/QI Report including PSS summary</li> <li>• Approve SJCC Board Member term renewals (if needed)</li> <li>• Review Applicant/Co-Applicant Agreement</li> <li>• Financial Reports</li> <li>• Training: Quality Improvement             <ul style="list-style-type: none"> <li>○ Patient Satisfaction – Why it’s important</li> <li>○ Include interactive exercise</li> <li>○ Review of key performance measures</li> </ul> </li> </ul>

**Yellow** = Requires action by Board  
**Grey** = Needs clarification

(May 2020)

# Revised SJCC Perpetual Annual Activity and Reporting Calendar – May 20, 2020

## Required a Minimum of Once Every Three Years

- Strategic Plan
- QI/PI Policies/Plan
- Personnel Policies
- Financial Management & Accounting Policies
- Billing and Collections Policies
- Sliding Fee Discount Policy
- Sliding Fee Discount Evaluation