

Directors report to AVHC Board 7-28-15

Chief Medical Officer (CMO) - Dr. Mark Apfel

I attended a 2-day training in Sacramento on July 21-22 which was an Introduction to the Patient Centered Medical Home (PCMH) - Foundational Concepts of the Medical Home which was put on by and National Committee for Quality Assurance (NCQA) which is the Organization which designates us as a PCMH. This is a designation that we will most likely need for Health Resources and Services Administration (HRSA) at sometime in the near future. There are 6 standards with 27 elements for a total of 100 points. Many of these requirements aligned with Meaningful Use requirements and Federal Tort Claims Act (FCTA) Deeming, so hopefully we can do these 3 projects concurrently. Obtaining Meaningful Use would get us a significant amount of money from the government.

For PCMH, there are 6 MUST PASS standards that must be met. Most elements have anywhere from 4 - 12 factors and you need to pass at least 50% to get any credit. There are also certain Critical Factors that must be met. Health Centers can receive either level 1, 2 or 3 recognition. Level 1 requires 30 points, Level 2 requires 60 points and Level 3 requires 85 points. I think that we will have little difficulty in obtaining Level 2 designation but that obtaining Level 3 will take significantly more work. The timeframe for this is 3-9 months.

Chloe and I attended a Lake and Mendocino County Medical Director Forum through Partnership Health Plan which is our managed Medi-Cal plan. Since 2012, they have had a 260% growth in their membership but have also added a number of new counties (68% in Mendocino County). It was a good opportunity for Chloe to meet more of the players in the local community. They did present Healthcare Effectiveness Data and Information Set (HEDIS) 2015 performance data but it was for the region and we will try to compare this to our data to see how we are doing compared to the region. We had the highest HEDIS score in the county last year. They did discuss their Quality Improvement Program and we usually do fairly well on this. There has been a significant decrease in the use of opioids over the past year.

Operations Officer - Fabiola Cornejo-Perez:

- Health Coach Program has been placed on hold temporarily as we move forward with the outreach program. Both programs will consist of the same team members. We plan to go on-site to individual vineyards and provide them with blood pressure tests and

PPD tests. We will also include dental screenings and brief insurance/sliding scale eligibility.

- We are also conducting our annual patient satisfaction survey and should have the ending results compiled by the August board meeting.
- We continue to improve our supply maintenance and are currently working on removing old x-rays from the radiology room to provide more supply storage for medical and continue to centralize all of our medical supplies.

Executive Director - Chloe Guazzone:

DENTAL-Dental clinic has shifted to 4 days per week 10 hour days. The new schedule is working out well and the patient load remains filled to capacity.

MEDICAL-

- The patient portal went live on 6/15/15. We have currently enrolled 9% of patients who have been in for a visit. We currently have 104 patients enrolled in the patient portal. We plan to host a community meeting for all of those who are interested in learning how to navigate through our portal. We will be announcing this through our website, the AVA, and local radio.
- Stephanie and Fabi are currently working on developing a referral protocol to bring back to the teams for approval. We have been able to reduce the older standing referrals that the Medical Assistants track by about 75%.
- CMO is working on the pharmacy license (ED needs to do livescan)

PATIENT CENTERED MEDICAL HOME-Working with Mark on a work plan to accomplish level 3 criteria. This will be presented by Mark to the staff.

MEANINGFUL USE-In process-plan to be developed in tandem with PCMH plan and FTCA deeming as there is much overlap.

FTCA DEEMING-(need to begin prenatal care) Working with Susan to meet the criteria.

GRANTS

- Final report submitted to East Bay community Coalition for a 10K grant (possibility for further funding)
- Expanded Services (ES) grant submitted July 20 (start date would be September 1 2015) 228K

- Letter of Intent (LOI) was submitted to Blue Shield of California for leadership training for core staff. Waiting for response and invitation to submit a proposal

OUTREACH

- Vineyard outreach to begin August, outreach committee is meeting weekly to plan

POLICIES AND PROCEDURES

- Lab tracking and radiology policies submitted by CMO for review

ECW

- Bi-weekly meetings with HITcare based on past challenges getting a solid understanding of how much time they are spending and costing to complete the task list. They are working on lab clean-up, billing and collections. We received training in report generation for meaningful use.

IT

- HIT-care arranged for a training with a phone service called JIVE (internet based). A cost analysis needs to be conducted to go forward, but it seems like a great system which we could manage ourselves and would solve many of our current problems. For Information Technology (IT) support, a cost analysis needs to be done with HITCare vs a local IT support person to see which would be a better option

HR

- Paid Time Off policy
- Hiring for dental front desk staff
- Performance review system to include goal setting and merit increase decision- implement 3% across the board to anyone hired for more than 1 year, will be based on merit next round
- Planning for maternity leaves (Stephanie in October and Fabi in December)

COLLABORATION

- ED participated in ARCH meeting and the annual Lake & Mendocino County Medical Director Forum. Great information from partnership, context on key issues currently being addressed, good networking opportunity etc.
- ED attended the health and safety fair and met some of the other community providers

Quality Improvement

The MA checklist and the team huddle are in place. The supplies were in place thanks to Wally and Susan in the 4th exam room and the back room stock is still a work in progress.

- Tracking No-shows and walk-ins
- In progress-need to work on setting QI goals with Susan and clinic teams based on Lean methodology used to prioritize work.

All Other Business

- There have been no letters of intent to sue filed at AVHC or complaints. We have arranged for each provider to receive a newsletter from NorCal, our malpractice insurance provider.