

The County of Santa Cruz Integrated Community Health Center Commission

AGENDA

April 13th, 2017 @ 12:00 pm

Meeting Location:

1430 Freedom Blvd, Suite E Ag Extension, Watsonville, CA 95076

ORAL COMMUNICATIONS - Any person may address the Commission during its Oral Communications period. Presentations must not exceed three (3) minutes in length, and individuals may speak only once during Oral Communications. All Oral Communications must be directed to an item not listed on today's Agenda, and must be within the jurisdiction of the Commission. Commission members will not take actions or respond immediately to any Oral Communications presented, but may choose to follow up at a later time, either individually, or on a subsequent Commission Agenda.

1. Welcome/Introductions
2. Oral Communications
3. Review and Accept March 9th, 2017 Meeting Minutes
4. Community Health Center Presentation – Tour of Watsonville Health Center
5. Policies and Procedure – Vote
200.02, 410.02, 410.03, 410.04, 410.05, 410.06, 430.01,
430.03, 430.05, 430.07, 430.09, 430.10, 430.11, 430.12
6. Grant Applications – Approval
7. Privileging Renewal List – Approval
8. Calendar of Duties
9. Budget/Financial Update
10. CEO Update
11. Quality Management Committee Update

Action Items from Previous Meetings:

Action Item	Person(s) Responsible	Date Completed	Comments
<i>Action Item 1: Invite Santa Cruz Aids Project (SCAP) to a presentation</i>	Amy Peeler		

Next meeting: May 11th 12:30 pm-2:30 pm (1080 Emeline Ave, Building D (Basement) Santa Cruz, CA)

The County of Santa Cruz Integrated Community Health Center Commission

Minute Taker: Jessica McElveny

Minutes of the meeting held *March 9th, 2017*

1. Attendance		
Rama Khalsa	Chair	
Rahn Garcia	Vice-Chair	
Christina Berberich	Member	
Gustavo Mendoza	Member	
Kristin Meyer	Member	
Nicole Pfeil	Member	
Dinah Phillips	Member	
Amy Peeler	County of Santa Cruz, Health Services, CEO of Clinics	
Raquel Ramírez Ruiz	County of Santa Cruz, Health Services, Sr. Health Services Manager	
Nikki Yates	County of Santa Cruz, Health Services, Accountant III	
Jessica McElveny	County of Santa Cruz, Health Services, Admin Aide	
Meeting Commenced at 12:44 pm and concluded at 2:00 pm		
2. Excused/Absent		
Excused: None Absent: Fernando Alcantar and Pam Hammond		
3. Oral Communications		
4. Review of February 9 th , 2017 minutes		
Rahn Garcia motioned for the acceptance of the minutes, the motion was seconded by Gustavo Mendoza. The rest of the member present were in favour.		
5. Budget/Financial Update		
Nikki Yates gave a presentation on the February 2017 financials.		
6. Policies and Procedures – Vote		
Kristin Meyer motioned for the acceptance of ten policies and procedures, the motion was seconded by Dinah Philips. The rest of the member present were in favour.		
	Approved:	
Policy #:	Policy Name:	
1	100.02 Line of Responsibility	Yes
2	200.01 Job Descriptions: Nursing/Administration	Yes
3	200.03 Credentialing and Privileging	Yes
4	210.02 Community Health Worker Supervision by Registered Nurse	Yes
5	230.01 General Medical Clinic Nurse Responsibilities	Yes
6	300.05 Patient Follow-Up Upon Discharge From Clinic	Yes
7	300.08 Referral from Clinic to Outside Provider	Yes
8	300.10 Lab Results Review Radiology & Diagnostic Tests (refer to Lab policy 410.1)	Yes
9	300.22 End of Life Option Act	Yes
10	620.03 Risk Management Plan	Yes
7. CEO Update		
Amy Peeler gave an update on the possible changes to the Affordable Care Act, a possible new commissioner and presented a draft letter regarding the City of Santa Cruz's parking permit policy around the Homeless Person's Health Project.		

8. Quality Management Committee Update


Raquel Ramírez Ruiz gave an update on the UDS data and reported that it was submitted to HRSA, the Federal Poverty Level data collection project, the Care Based Incentive new patient packet project, tracking referrals and training providers on Acure the Electronic Health Record reporting tool, medication reconciliation training, depression screening, Plan Do Study Act cycles and posting quality management data in the clinic provider areas. Rahn Garcia excused himself at 1:25 pm.

9. Community Health Center Presentation – Drug Medi-Cal

Rama Khalsa gave a presentation on Drug Medi-Cal including the implementation status for many counties in California as well as Santa Cruz County.

Next Meeting: *April 13th, 2017 - 12:30 pm at 1430 Freedom Blvd (Ag Extension), Watsonville, CA*

Minutes approved _____ / / _____
(Signature of Board Chair or Co-Chair) (Date)

<p>SUBJECT: Job Descriptions: Physician/ Mid-Level Practitioner</p> <p>SERIES: 200 Personnel</p> <p>APPROVED BY: Amy Peeler, Chief of Clinic Services</p>	<p>POLICY NO.:</p> <p style="text-align: center;">200.02</p> <p>PAGE: 1 OF 1</p> <p>EFFECTIVE DATE: July 2001</p> <p>REVISED: April 2017</p>	<div style="text-align: center;">  <p>COUNTY OF SANTA CRUZ</p> <hr/> <p>HEALTH SERVICES AGENCY</p> <p>Clinics and Ancillary Services</p> </div>
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GENERAL STATEMENT:

Job descriptions are available, through the County of Santa Cruz Personnel Department for each staff position utilized in the provision of clinic services.

POLICY STATEMENT:

It is the policy of the County of Santa Cruz to provide professional, qualified staff.

REFERENCE:

County of Santa Cruz Personnel Specifications forms.

PROCEDURE:

None

Attached Job Descriptions:

1. Medical Services Director/Health Officer
2. Medical Director – Health Services Clinic
3. Clinic Physician
4. Physician Assistant/Nurse Practitioner

MEDICAL SERVICES DIRECTOR/HEALTH OFFICER

Job Specifications

Class Code: PT7	Date Originated: 5/79
Analyst: CE, CJS	Date Updated: 4/88, 11/12

SANTA CRUZ COUNTY

DEFINITION

Under general direction, to plan, organize, direct and administer public health medical services and public health programs for the County; to provide technical consultation to citizens, public officials, staff and community organizations and agencies on public health and preventive medicine issues; to serve as the designated County Health Officer; and to do other work as required.

DISTINGUISHING CHARACTERISTICS

This single position class is responsible to the Health Services Administrator for planning, organizing and directing the public health medical services and public health programs for the County including enforcement of applicable public health laws and regulations. Serves as the legally designated County Health Officer. Additionally, the incumbent serves as the County liaison and medical expert to the State, the local medical society, and other agency and community groups.

TYPICAL TASKS

Plans, organizes, directs and evaluates through subordinate managers the medical and administrative aspects of public health programs; provides administrative direction to subordinate managers who manage a variety of public health programs and clinics, including chronic and acute general medical services, public health nursing, emergency and disaster medical planning, public health education, indigent medical care, California Children's Service, maternal and child health services and detention medical services; assures enforcement of applicable public health laws and regulations including environmental health and sanitation; supervises, reviews and evaluates the work of physicians and other staff providing medical services for clinics and detention facilities; approves protocols and standardized procedures for new medical developments and procedures; coordinates the work of consultant medical specialists and other physicians; orients consultants to the objectives, operations and regulations of the contract program; may contact private physicians to arrange for their services in departmental clinics and programs; oversees the preparation, monitoring and control of budgets for the public health divisions; serves as an advocate to promote State wide public health policies which also benefit the County; keeps abreast of legislative changes and formulates policies and programs as required; serves as the liaison and medical expert in Public Health matters to the local medical society and community agencies; provides input to grant applications and other externally funded programs; provides medical consultation to private physicians and other personnel on matters related to the prevention, diagnosis and treatment of diseases of public health significance; confers with public officials, private physicians, community organizations and representatives of other agencies on public health matters; participates in programs of health education; addresses community groups and professional associations; evaluates medical and public health policies, programs and procedures and formulates improvements; may conduct medical and physical examinations, make diagnoses, and prescribe and administer treatments and medications; serves as an executive management team member to coordinate with other divisions, departments and agencies to develop procedures and to resolve administrative and other problems; develops departmental policy and programs; keeps Health

Services Administrator informed of changes and problems pertaining to divisional activities; may act for the Health Services Administrator as authorized; prepares reports and correspondence; inputs, accesses and analyzes data using a computer.

EMPLOYMENT STANDARDS

Knowledges:

- Thorough knowledge of current principles and practices of medicine;
- Thorough knowledge of the functions and services of local public health agencies;
- Thorough knowledge of accepted medical practices concerning the prevention and control of communicable diseases and other common public health programs;
- Working knowledge of epidemiology;
- Working knowledge of the laws and regulations governing local public health programs;
- Working knowledge of the interrelationships of services among local public and private and voluntary public health agencies and organizations;
- Working knowledge of the principles of public health administration;
- Working knowledge of the principles and techniques of supervision and training;
- Some knowledge of the general function of a State Department of Health Services.

Ability to:

- Plan, organize and direct, through subordinate supervisors, a broad range of public health programs;
- Exercise initiative, ingenuity and sound judgment in solving difficult technical, administrative and personnel problems;
- Develop and direct the implementation of improvements to enhance the effectiveness and efficiency of public health services and programs;
- Establish and maintain effective working relationships with physicians, representatives of community groups and professional organizations, State representatives and the general public;
- Analyze, evaluate, plan and implement public health programs and budgets;
- Understand and relate to others the aims, concepts, and principles of public health;
- Supervise, review and evaluate the work of professional staff;
- Coordinate public health programs and service activities with other divisions and departments;
- Prepare clear and concise written and oral report;
- Speak effectively before large groups;
- Perform medical diagnosis and treatment;

- Secure State certification to supervise and direct mid-level practitioner;
- Learn to input, access and analyze data using a computer terminal.

Training and Experience: Any combination of training and experience which would provide the required knowledges and abilities is qualifying. A typical way to obtain these knowledges and abilities would be:

- Three years of public health medical experience.

OR

- Certification or eligibility for certification by a recognized American Specialty Board, and two years of public health medical experience.

OR

- Possession of a Master's degree in public health from an accredited school of public health, and one year of public health medical experience.

SPECIAL REQUIREMENTS

- Possession of a valid Physician and Surgeon's certification issued by the State of California*.
- Possession or eligibility for possession of a State and/or Federal narcotic license for administration of narcotics to inmates and patients.
- Possess and maintain a valid California* Class C Driver's license.

(*Out of state candidates possessing a Physician and Surgeon's certification and driver license in their respective state may apply and go through the recruitment and examination process. Candidate must possess California certification and license by the start of employment.)

ORIG: 5/79 REV: 4/88, 11/12

JAD:sjh

MEDICAL DIRECTOR - HEALTH SERVICES CLINICS

Job Specifications

Class Code: PT5	Date Originated: 4/88
Analyst: KT/JS/DTW/CJS	Dates Revised: 2/93, 4/96, 6/07

COUNTY OF SANTA CRUZ**DEFINITION**

Under direction, provide medical supervision and direction to clinics, public health program and staffs; provide primary medical care in various clinics; provide telephone on-call services; and perform other work as required.

DISTINGUISHING CHARACTERISTICS

This class is a physician class with clinic medicine experience. Incumbents serve as the director for various Health Services Agency medical clinics. Assignments may rotate depending on agency requirements and specialty training. Incumbents are responsible for the medical quality assurance and medical management of one or more clinics, provide medical and technical advice to staff and the local medical community and may serve as the Health Officer in the latter's absence.

TYPICAL TASKS

Serve as Medical Director of Health Services Agency medical clinics engaged in prevention, education, diagnosing and treating a wide variety of complex acute and chronic medical conditions; provide medical supervision and direction to staff and contract physicians; develop protocols and standardized procedures; conduct medical and physical examinations; make diagnosis and prescribes medical and rehabilitative treatment; supervise and direct the medical aspects of treatments; provide night, weekend, and holiday medical triage and treatment authorizations via the telephone; prescribe medications; provide medical supervision to mid-level practitioners; act as physician member of a multi-disciplinary patient care team; confer with staff and patients and their families regarding diagnosis and treatment; recommend hospitalization or other indicated services; make referrals to specialists as appropriate; may provide medical direction for detention facility clinics; may serve as the Health Officer in the latter's absence; plan and prepare standardized procedures and protocols; conduct in-service training; assure that medical care meets quality assurance standards; may supervise resident physicians, physicians assistants and nurse practitioner students; assure that quality primary outpatient medical care is provided for high-risk patients at the lowest cost; perform outpatient surgical procedures; read X-rays, order laboratory tests and evaluate results; assure that patients medical charts and records are accurate and meet legal and medical requirements; may provide medical consultation to private physicians, health care professionals and community groups on public health matters; prepare records and reports; input, access and analyze data using a computer; attend/facilitate meetings.

EMPLOYMENT STANDARDS**Knowledge of:****Thorough knowledge of:**

- Current principles and practices of medicine.
- Accepted medical practices in the prevention and control of communicable diseases.

Working knowledge of:

- Principles of supervision and training.

Some knowledge of:

- Functions and services of local public health agencies.

- Laws and regulations governing local public health agencies.
- General functions of the State Department of Health Services.
- Principles of public health administration.

Ability to:

- Provide medical direction to and supervise subordinate staff.
- Perform medical diagnosis and treatment.
- Evaluate and review the work of medical practitioners for appropriate diagnosis, treatment and chart documentation.
- Plan and prepare protocols and standardized procedures.
- Coordinate and evaluate the work of contract and staff physicians.
- Work effectively with departmental staff, private physicians, clients and others contracted in the course of work.
- Participate in the analysis, evaluation and planning of public health programs.
- Prepare clear and concise written and oral reports.
- Analyze situations accurately and adopt an effective course of action.
- Conduct in-service training programs.
- Secure State certification to supervise and direct mid-level practitioners.
- Learn to input, access and analyze data using a computer terminal.

Education and Experience:

Any combination of education and experience that would provide the required knowledge and abilities is qualifying, unless otherwise specified. A typical way to obtain the knowledge and abilities would be:

- License/Certificate Requirements: Possession of a valid Physicians and Surgeon's Certificate issued by the State of California; possession of a State and/or Federal narcotic license for administration of narcotics to inmates and patients; possession of a valid California class C driver license;
- Four years of general medical clinic experience as a practicing physician. Certification by an American Specialty Board in a specialty closely related to clinical health care provided by the County of Santa Cruz may be substituted for two years of experience.

Special Requirements/Conditions:

- Background Investigation: Ability to pass a background investigation, and fingerprinting is required.
- Special Working Conditions: Exposure to: Odors such as vomitus, feces, urine and draining abscesses; fumes from cleaning supplies and solvents; and infections which might cause chronic disease or death.

PREVIOUS CLASS TITLES: None
 Bargaining Unit: 11
 EEOC Job Category: 02

Occupational Grouping: 61
Workers' Comp Code: 0290

CLINIC PHYSICIAN - HSA

Job Specifications

Class Code: PT3 Analyst: JD/JS, EM	Date Originated: 5/88 Dates Revised: 8/95, 10/96, 12/12
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COUNTY OF SANTA CRUZ**DEFINITION**

Under direction, provide medical services for Health Services Agency programs including general medical clinics, specialized clinics, occupational medical services; provide on-call services; and perform other duties as required.

DISTINGUISHING CHARACTERISTICS

The Clinic Physician class functions as a medical practitioner providing primary preventive medical care and consultation in a variety of public health clinics or programs.

This class is distinguished from the class of Medical Director-Health Services Clinic in that the latter class is responsible for providing medical direction and supervision to clinics and staff.

TYPICAL TASKS

Conduct medical and physical examinations; make diagnoses and prescribe medical and rehabilitative treatment; prescribe medications; provide medical supervision to mid-level practitioners; provide night, weekend, and holiday medical triage and authorizations via telephone; act as physician member of a multi-disciplinary patient care team; confer with staff and patients and their families regarding diagnosis and treatment; recommend hospitalization or other indicated services; make referrals to specialists as appropriate; serve as the occupational physician conducting base line physicals and pre-employment physicals and may treat workers compensation accidents and injuries or serve as County liaison to community physicians treating workers injuries; may prepare protocols and standardized procedures; may conduct in-service training; may supervise resident Physicians, Physicians Assistants and Nurse Practitioner students; assure that quality primary outpatient medical care is provided for high- risk patients at the lowest cost; performs outpatient surgical procedures; read X-rays and orders laboratory tests and evaluates results; assure that patient medical charts and records meet legal and medical requirements; provide medical consultation to private physicians and health care professionals; prepare records and reports; input, access and analyze data using a electronic health records; attend meetings.

EMPLOYMENT STANDARDS**Knowledge of:**

Thorough knowledge of:

- Current principles and practices of medicine.

Some knowledge of:

- Functions and services of local public health agencies.

Ability to:

- Perform medical diagnosis and treatment.
- Provide medical direction to subordinate staff.

- Evaluate and review the work of mid-level medical practitioners for appropriate diagnosis, treatment and chart documentation.
- Prepare protocols.
- Establish and maintain an effective working relationship with others.
- Prepare clear and concise written and oral reports.
- Analyze situations accurately and adopt an effective course of action.
- Learn to conduct in-service training programs.
- Secure State certification to supervise and direct mid-level practitioner.
- Learn to input, access and analyze data using an electronic health records system.

Education and Experience:

Any combination of education and experience which would provide the required knowledge and abilities is qualifying, unless otherwise specified. A typical way to obtain the knowledge and abilities would be:

- Possession of a valid Physicians and Surgeon's Certificate issued by the State of California.

Special Requirements/Conditions:

- License/Certificate: Possession of a valid Physicians and Surgeon's Certificate issued by the State of California; possession of a Federal narcotic license for administration of narcotics to patients; possession of a valid California class C driver license.
- Background Investigation: A background investigation and fingerprinting is required.
- Special Working Conditions: Exposure to: Odors such as vomitus, feces, urine and draining abscesses; fumes from cleaning supplies and solvents; and infections which might cause chronic disease or death.

PREVIOUS CLASS TITLES: None

Bargaining Unit: 85

EEOC Job Category: 02

Occupational Grouping: 61

Workers' Comp Code: 0290

PHYSICIANS ASSISTANT/NURSE PRACTITIONER

Job Specifications

Class Code: PJ3 Analyst: JAD	Date Originated: 4/88
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SANTA CRUZ COUNTY**DEFINITION**

Under direction, to provide professional level primary health care to patients with complex chronic and acute health conditions in a variety of outpatient clinics and detention facilities; to perform physical examinations and to diagnose and treat patients; and to do other work as required.

DISTINGUISHING CHARACTERISTICS

This broad class specification combines the professions of Physicians Assistant and Nurse Practitioner. Positions in this class are responsible for providing, under a Physician's supervision, primary outpatient diagnosis, treatment, rehabilitation and support services for a wide variety of high risk patients with complex chronic and acute health and psycho- social conditions. Positions in this class receive medical direction from a Physician and administrative supervision from a program manager. This class is distinguished from the class of Public Health Nurse and Clinic Nurse in that this class is licensed to perform diagnostic and therapeutic procedures which are not within the scope of the Registered Nurse license or the Public Health Nurse certificate. Physician's Assistants must complete a Primary Care Physician's Assistance Training Program and are required to work under the medical supervision of a licensed physician who is approved by the Board of Medical Quality Assurance. Nurse Practitioners must possess a Registered Nurse license, complete training for Nurse Practitioner certificate(s), function within the scope of their license and certification, and perform under standardized procedures.

TYPICAL TASKS

Assesses the health of patients to determine physical and psycho-social status by taking a complete and detailed history, by performing a physical examination, by ordering screening and diagnostic procedures such as EKG's, X-rays and scans, and by identifying abnormalities; evaluates results of clinical findings and laboratory tests; develops diagnosis; records and presents pertinent data to the supervising/ collaborating physician if necessary, develops treatment plans, treats conditions and coordinates follow-up care; makes referrals for further diagnosis and for treatment in difficult or specialized cases as appropriate; performs routine therapeutic and minor surgical procedures such as administering injections, incising and draining skin infections, caring for superficial wounds, lacerations and burns, removing foreign bodies and lesions from the skin, and administering subcutaneous local anesthesia; performs routine laboratory and screening techniques such as drawing venous blood and interpreting laboratory findings, taking cultures, performing pulmonary functions tests, tonometry, and audiometry, performs pelvic examinations, takes PAP smears and performs other appropriate procedures; provides family planning counseling and prescribes contraceptives and birth control devices; cares for pregnant women including assessing normal and abnormal fetal and maternal well-being; provides treatment for communicable diseases, i.e., sexually transmitted diseases and tuberculosis; provides counseling, testing and follow-up for individuals with AIDS, or those at-risk for acquiring AIDS; assess and manage temporarily and permanently disabled patients; recognizes and evaluates patients who require the immediate attention of a physician; administers emergency medical treatment as required; instructs and counsels patients regarding matters pertaining to their physical and psycho-social health, such as diets, social habits, family planning, normal growth and development, aging, and their diagnosis and long-term management of their disease; serves as a multi-discipline team member to manage high-risk health cases; manages patients in crises including physical or sexual abuse cases using an inter- disciplinary network of psychological and social services; provides direction concerning the medical management of patients to nursing and other treatment team staff; coordinates and facilitates referrals to other County agencies and other community services or resources; maintains records, prepares reports; may input, access and analyze data using a computer; attends meetings; may prepare in-service training; may prepare schedules; assists in updating clinic protocols or standardized procedures.

EMPLOYMENT STANDARDS**Knowledge:**

- Working knowledge of the principles, practices and procedures used to detect, diagnose and treat common health problems;
- Working knowledge of medication and drugs commonly prescribed, including medications therapeutic effect, side effects, reactions and contraindications;
- Working knowledge of the scope of responsibilities, diagnosis and treatment techniques and procedures applicable within specific licensure and assignments (note: licensure and certification requirements may vary depending on assignments);
- Working knowledge of the control and care of chronic and communicable disease, illness and handicapping conditions;
- Working knowledge of the normal and abnormal values of laboratory tests and their clinical significance;
- Working knowledge of medical laws and regulations and the ethics of patient care;
- Working knowledge of basic interviewing and counseling techniques;
- Some knowledge of community resources and referral systems;
- Some knowledge of the services provided by local health agencies.

Ability to:

- Assess health status of patient;
- Take complete medical history, perform physical examinations, evaluate results and identify abnormal health conditions;
- Identify and manage health problems;
- Develop and implement treatment plans for patients according to standardized procedures and protocols;
- Analyze and interpret health information and data including laboratory test results;
- Order laboratory procedures and appropriate prescriptions under standardized procedures and policies;
- Use specialized equipment such as doptone and microscope;
- Establish and maintain effective working relationships with others;
- Write clear and concise medical reports;
- Instruct and counsel patients on matters pertaining to health;
- Recognize and evaluate situations which call for the immediate attention of a physician;
- Work effectively under pressure in stressful and emergency situations;
- Deal effectively with manipulative, hostile and sociopathic behavior;
- Learn to access, input and analyze data using a computer terminal.

Training and Experience: Any combination of training and experience which would provide the required knowledge and abilities is qualifying. A typical way to obtain these knowledge and abilities would be:

Possess one of the following certificates or licenses:

- Pursuant to Section 3503 of the Business and Professions Code, possess a California license to practice as a Physicians Assistant.

OR

- Pursuant to Section 2835 of the Business and Professions Code, possess a California certificate to practice as a Nurse Practitioner.

OR

- Pursuant to Article 2.5 of the Business and Professions Code, possess a certificate to practice as a Nurse-Midwife.

SPECIAL QUALIFICATIONS

In addition to the core requirements for this class, incumbents may be required to possess credentials demonstrating specialties in any one of the following areas for certain positions.


Nurse Practitioners:

- Family Practice NP
- OB-GYN NP
- Family Planning NP
- Pediatric NP
- Geriatric NP
- Certified Nurse Midwife

Physicians Assistants:

- Women's Health Care Specialist

Bargaining Unit: 41
EEOC Job Category: 02
Occupational Grouping: 57
Workers Comp Code: 0290


<p>SUBJECT: Lab Specimen Labeling</p> <p>SERIES: 400 Ancillary Services</p> <p>APPROVED BY: Amy Peeler, Chief of Clinic Services</p>	<p>POLICY NO.:</p> <p style="text-align: center;">410.02</p> <p>PAGE: 1 OF 1</p> <p>EFFECTIVE DATE: August 2016</p> <p>REVISED: April 2017</p>	<div style="text-align: center;">  </div> <hr/> <p style="text-align: center;">COUNTY OF SANTA CRUZ HEALTH SERVICES AGENCY</p> <p style="text-align: center;">Clinics and Ancillary Services</p>
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GENERAL STATEMENT:

This policy applies to all samples collected in or submitted to the Health Services Agency (HSA) Public Health Laboratory, regardless of place of collection. This includes, but is not limited to: HSA Clinics, Homeless Person's Health Project (HPHP), Juvenile Hall, Communicable Disease Unit, laboratories and providers outside the County system.

PROCEDURE:

- A. All samples submitted to the laboratory must be properly labeled with two identifiers:
 - 1. the patient's full first and last name-**required**
 - 2. date of birth OR
 - 3. chart number (medical record number)
- B. Date and time of collection must be noted on the sample.
- C. **Collection containers should always be labeled in front of the patient.** If you do not have computer generated labels, hand write the patient's full name and the date of birth or chart number on each container. Each handwritten container must have two patient identifiers.
- D. The container itself must be labeled, not the specimen transport bag. Unlabeled containers received in a labeled specimen transport bag will be **REJECTED** and returned to clinic staff for proper labeling.
- E. **Any sample received in the lab without two patient identifiers will be REJECTED.** Clinic staff will be notified. Depending on the circumstances, the sample may be relabeled by clinic staff with the correct patient information.
- F. **Any completely unlabeled sample received in the lab will be REJECTED and DISCARDED.**

<p>SUBJECT: Point of Care Testing: Sample Identification, Back Office Test Ordering and Resulting in EPIC</p> <p>SERIES: 400 Ancillary Services</p> <p>APPROVED BY: Amy Peeler, Chief of Clinic Services</p>	<p>POLICY NO.:</p> <p style="text-align: center;">410.03</p> <p>PAGE: 1 OF 2</p> <p>EFFECTIVE DATE: April 2017</p> <p>REVISED:</p>	<div style="text-align: center;">  <p>COUNTY OF SANTA CRUZ</p> <hr/> <p>HEALTH SERVICES AGENCY</p> <p>Clinics and Ancillary Services</p> </div>
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POLICY STATEMENT:

The Clinical Laboratory Improvement Act (CLIA; 42 CFR part 493) regulates laboratory testing at the Federal level. CLIA categorizes laboratory tests by level of complexity: waived, moderate, and high levels of complexity. At Health Services Agency (HSA), waived laboratory tests can sometimes be performed by clinic staff at the point of patient care. Thus, waived lab tests are referred to as point of care testing (POCT). At HSA, waived and POCT lab tests are commonly referred to as back office tests.

This policy applies to all back office tests performed by all HSA Clinic staff on all point of care testing (POCT) analyzers and waived test kits. This policy applies regardless of whether the analyzer/kit is situated next to the patient, or in a separate room/location.

PROCEDURE:

Each back office test has a specific order code that must be utilized. Back office test results must be entered into the enter/edit field (not the chief complaint section). The enter/edit field is used to generate reports that determine the amount of clinic reimbursements for performing lab tests. The report data is also required for meeting program goals that, again, can be tied to funding. Not least, patient safety and quality of care are dependent upon reporting the correct result for the correct patient. Order the appropriate back office test in the patient’s EPIC electronic medical record.

1. Print a label from EPIC with the patient’s identification information.
2. Apply the label to the sample whenever possible (e.g. urine cups), or take the label with you to the analyzer (e.g. hemoglobin A1c).
3. The patient’s chart number (medical record number) **MUST** be entered into the POCT analyzer at the time of analysis, if the analyzer has the functionality.
4. No generic numbers (12345, 9999 etc), date of birth, exam room, or any text that is not the medical record number should be entered into the analyzer. These are not patient identifiers because they are not specific to a single patient.

SUBJECT:

Point of Care Testing:
Sample Identification, Back
Office Test Ordering and
Resulting in EPIC


POLICY NO.:

410.03

PAGE: 2 OF 2



5. The staff member's identification (initials or employee number) MUST be entered into the point of care testing (POCT) analyzer at the time of analysis, if the analyzer has the functionality.
6. When the results are ready, write the result on the patient's label; or print out the patient's result and affix the label to the printout.
7. Enter the patient's result into the appropriate fields in the patient's EPIC electronic medical record.
8. The patient's result can be retrieved from most analyzers by searching by chart number (medical record number).
9. Patient and operator identification lockout functions may be utilized on those POCT analyzers that have the functionality.
10. For those analyzers lacking electronic identification capability, the test must be performed in the patient's presence.
11. For non-electronic test kits (e.g., pregnancy tests, drug screens), write the patient's identification on the test cartridge; or affix the patient's label to the cartridge.
12. There are many different types of POCT testing available. For any configuration, the important point to remember is to maintain the identification "chain of custody" between the patient, the sample, the analyzer, and the results.

<p>SUBJECT: Lab Director's Delegated Responsibilities</p> <p>SERIES: 400 Ancillary Services</p> <p>APPROVED BY: Amy Peeler, Chief of Clinic Services</p>	<p>POLICY NO.:</p> <p style="text-align: center;">410.04</p> <p>PAGE: 1 OF 4</p> <p>EFFECTIVE DATE: April 2017</p> <p>REVISED:</p>	<div style="text-align: center;">  <p>COUNTY OF SANTA CRUZ</p> <hr/> <p>HEALTH SERVICES AGENCY</p> <p>Clinics and Ancillary Services</p> </div>
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POLICY STATEMENT:

The Clinical Laboratory Improvements Act (CLIA) Subpart M 493.1441-1495 describes the personnel qualifications and responsibilities for high complexity laboratories. High complexity laboratories must have a Lab Director, Technical Supervisor, General Supervisor, and Clinical Consultant. The lab director may serve as all of these, if CLIA qualified; or delegate responsibilities to CLIA qualified personnel. This procedure delineates the CLIA responsibilities delegated by the Health Services Agency (HSA) Lab Director to specific HSA personnel.

PROCEDURE:

- A. Laboratory Director: The laboratory director is responsible for the overall operation and administration of the laboratory. If the laboratory director reappoints performance of his or her responsibilities, he or she remains responsible for ensuring that all duties are properly performed.
- B. Clinical Consultant: The clinical consultant must be qualified to consult with and render opinions to the laboratory's clients concerning the diagnosis, treatment and management of patient care. The duties of the Clinical Consultant below are delegated to the Medical Directors of their respective clinics (Santa Cruz General Medical Clinic and Watsonville General Medical Clinic).
 - 1. The clinical consultant provides consultation regarding the appropriateness of the testing ordered and interpretation of test results. The clinical consultant must –
 - a. Be available to provide consultation to the laboratory's clients;
 - b. Be available to assist the laboratory's clients in ensuring that appropriate tests are ordered to meet the clinical expectations;
 - c. Ensure that reports of test results include pertinent information required for specific patient interpretation; and
 - d. Ensure that consultation is available and communicated to the laboratory's clients on matters related to the quality of the test results reported and their interpretation concerning specific patient conditions.

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Lab Director's Delegated
Responsibilities

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C. Technical Supervisor:

1. The Microbiology Technical Supervisor duties below are delegated to the Senior Public Health Microbiologist:
 - a. Evaluating the competency of all microbiology testing personnel and assuring that the staff maintain their competency to perform test procedures and report test results promptly, accurately and proficiently. The procedures for evaluation of the competency of the staff must include, but are not limited to:
 - i. Direct observations of routine patient test performance, including patient preparation, if applicable, specimen handling, processing and testing;
 - ii. Monitoring the recording and reporting of test results;
 - iii. Review of intermediate test results or worksheets, quality control records, proficiency testing results, and preventive maintenance records;
 - iv. Direct observation of performance of instrument maintenance and function checks;
 - v. Assessment of test performance through testing previously analyzed specimens, internal blind testing samples or external proficiency testing samples; and
 - vi. Assessment of problem solving skills;
2. The Hematology and Chemistry Technical Supervisor duties below are delegated to a qualified Clinical Laboratory Scientist (currently Susan Singer, CLS):
 - a. Evaluating the competency of all hematology and chemistry testing personnel and assuring that the staff maintain their competency to perform test procedures and report test results promptly, accurately and proficiently. The procedures for evaluation of the competency of the staff must include, but are not limited to:
 - i. Direct observations of routine patient test performance, including patient preparation, if applicable, specimen handling, processing and testing;

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- ii. Monitoring the recording and reporting of test results;
- iii. Review of intermediate test results or worksheets, quality control records, proficiency testing results, and preventive maintenance records;
- iv. Direct observation of performance of instrument maintenance and function checks;
- v. Assessment of test performance through testing previously analyzed specimens, internal blind testing samples or external proficiency testing samples; and
- vi. Assessment of problem solving skills;

D. General Supervisor: The laboratory must have one or more general supervisors who, under the direction of the laboratory director and supervision of the technical supervisor, provides day-to-day supervision of testing personnel and reporting of test results. In the absence of the director and technical supervisor, the general supervisor must be responsible for the proper performance of all laboratory procedures and reporting of test results.

1. During the absence of the director, the General Supervisor duties for Microbiology below are delegated to the Senior Public Health Microbiologist:
 - a. Assuring that all remedial actions are taken whenever test systems deviate from the laboratory's established performance specifications;
 - b. Ensuring that patient test results are not reported until all corrective actions have been taken and the test system is properly functioning;
 - c. Providing orientation to all testing personnel;
2. During the absence of the director, the General Supervisor duties for Hematology and Chemistry below are delegated to a qualified Clinical Laboratory Scientist:
 - a. Assuring that all remedial actions are taken whenever test systems deviate from the laboratory's established performance specifications;

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- b. Ensuring that patient test results are not reported until all corrective actions have been taken and the test system is properly functioning;
- c. Providing orientation to all testing personnel.

<p>SUBJECT: Urinalysis (81002), Back Office Urine Dip with Siemens CliniTek Status Analyzer</p> <p>SERIES: 400 Ancillary Services</p> <p>APPROVED BY: Amy Peeler, Chief of Clinic Services</p>	<p>POLICY NO.:</p> <p style="text-align: center;">410.05</p> <p>PAGE: 1 OF 6</p> <p>EFFECTIVE DATE: April 2017</p> <p>REVISED:</p>	<div style="text-align: center;">  <p>COUNTY OF SANTA CRUZ</p> <hr/> <p>HEALTH SERVICES AGENCY</p> <p>Clinics and Ancillary Services</p> </div>
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POLICY STATEMENT:

Examination of urine is one of the most frequently utilized of all clinical laboratory tests because urine is usually a readily available and easily collected specimen. It contains information about many of the body's major metabolic functions, which can be obtained by comparatively simple and economic laboratory tests. Urinalysis also provides information concerning disease or disturbed function of the kidneys, ureters, bladder, urethra and liver. It also aids in ascertaining the presence of certain systemic diseases such as diabetes mellitus which cause abnormalities in the urine.

REFERENCES:

1. Brunzel, Nancy A. Fundamentals of Urine & Body Fluid Analysis. The Curtis Center. Philadelphia, PA. 2004. Second edition.
2. CLINITEK Status+ Analyzer Operator's Guide, Siemens, 10490853 Rev. C, 2011-12.
3. Siemens Multistix 10SG product insert.

TRAINING:

Only clinic staff trained by authorized laboratory trainers can use the CliniTek Status urine analyzer.

SPECIMEN REJECTION CRITERIA:

Specimens >2 hours at (room temperature)

EQUIPMENT AND MATERIALS:

CliniTek Status Urine Analyzer

Siemens Multistix 10SG Reagent strips (obtain from Lab) *Note: Whenever opening a new vial, write the date on it.*

SUBJECT:
Urinalysis (81002), Back
Office Urine Dip with
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Quantimetrix UA “The Dipper” – 1 & 2 controls (obtain from Lab)

WARNINGS AND PRECAUTIONS:

All urine specimens are regarded as potentially infectious and treated as such. Splashing is to be avoided. For disposal, urine specimen containers are poured into the dirty sink, then are loosely recapped and discarded into a hazardous waste bag. Disposal of all patient labeled containers in the hazardous waste bag also complies with the Health Insurance Portability and Accountability Act (HIPAA) regulations.

QUALITY CONTROL:

Responsibility for Quality Control (QC): Clinic staff performing testing are responsible for routine performance and documentation of QC. Lab staff will review QC on a monthly basis, or as needed if issues arise.

QC Frequency: Quality control is performed:

1. On a weekly basis (first day of the week)
2. For each new container of Siemens Multistix 10SG Reagent strips
3. When patients’ clinical conditions or symptoms do not match their results

QC Material: Quantimetrix UA “The Dipper” – 1 & 2 controls—stored in the laboratory; do not use water for a negative control. Allow to come to room temperature before using.

QC Procedure:

1. Select Strip Test on the CliniTek Status analyzer’s READY screen.
2. Enter Operator ID (your initials or employee number).
3. Select Enter New Patient on the next screen (Patient Information).
4. Using the Touch Pad enter “QC 1”.
5. Remove a dipstick from the container and replace the cap.

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6. Remove the cap from the glass tube Dipper 1.
7. Select START. You have 8 seconds to dip the reagent strip into the QC material.
8. Dip all the test pads of the strip into the liquid, and immediately remove the strip.
9. Blot the edge of the strip on a paper towel to remove excess urine.
10. Place the reagent strip in the test table channel with the test pads facing up.
11. The analyzer will pull in the test table, calibrate, and read the test strip.
12. Enter color and clarity on the test screen.
13. Results are set to print automatically.
14. Transfer the results to the log provided.
15. Repeat steps 1-14 for second level of QC, using "QC 2".
16. If all parameters are within range, patient samples may be analyzed. If any parameter is out, first repeat the QC test, if still out, call lab, do not test patients.

PROCEDURE:

Back Office Urinalysis includes physical characteristic and chemical examination.

A. Physical characteristics:

1. Color
2. Clarity

B. Chemical examination (dipstick): performed on CliniTek Status Analyzer

1. Glucose

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2. Bilirubin
3. Ketones
4. Specific Gravity
5. Blood
6. PH
7. Protein
8. Urobilinogen
9. Nitrite
10. Leukocytes

C. For physical characteristics and chemical examination, proceed as follows:

1. Check to ensure that the urine specimen has two identifiers; first AND last name, and either the medical record number or date of birth.
2. Evaluate the color and clarity visually.
 - a. If the sample has gross blood or an intense orange color, send the sample to the lab for testing.
3. Select Strip Test on the CliniTek Status analyzer's READY screen.
4. Enter Operator ID (your initials or employee number).
5. Select Enter New Patient on the next screen (Patient Information).
6. Using the Touch Pad enter the medical record number and select Enter.

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7. Remove a dipstick from the container and replace the cap.
 8. Remove the cap from the specimen.
 9. Select START. You have 8 seconds to dip the reagent strip into the urine.
 10. Dip all the test pads of the strip into the urine, and immediately remove the strip.
 11. Drag the edge of the strip against the rim of the urine cup to remove excess urine.
 12. Blot the edge of the strip on a paper towel to remove excess urine.
 13. Place the reagent strip in the test table channel with the test pads facing up.
 14. The analyzer will pull in the test table, calibrate, and read the test strip. *Note: Each time you run a test, the analyzer calibrates.*
 15. Enter the color and clarity on the test screen.
 16. The results will display on the analyzer screen, and are set to print automatically.
 17. Remove and discard test strip. *Note: Wipe test table with a tissue after each test.*
 18. Enter the results into the patient's EPIC electronic medical record (EMR).
- D. For physical characteristics and chemical examination, proceed as follows:
1. If the bilirubin is positive, please send to the lab for confirmatory testing if not consistent with the patient's clinical presentation.
 2. If the provider requires a microscopic examination, order test #LT585 and leave the specimen in the lab specimen refrigerator. See the following table for microscopic criteria used in the lab.
 3. If the provider requires a culture, order test #LP387 and leave the specimen in the lab specimen refrigerator. See the following table for culture criteria used in the lab.

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Lab Microscopic Criteria:	Lab Culture & Sensitivity Criteria:
Glucose on the dipstick \geq 4+	Nitrite on the dipstick positive
Blood on the dipstick positive	Leukocyte esterase on dipstick is positive
Protein on dipstick positive	
Nitrite on dipstick positive	
Leukocyte esterase on dipstick positive	

PROFICIENCY TESTING: All testing personnel will participate in at least annual proficiency testing.


MAINTENANCE: Wipe the table tray after each specimen. Perform maintenance according to CliniTek Status Operator's Guide. Document in the appropriate log.

LIMITATIONS:

1. Error codes: refer to the CliniTek Status Operator's Guide for error code explanation and corrective actions.
2. Refer to the Siemens Multistix 10SG product insert for dipstick limitations.

When to contact the lab for assistance:

1. If the Quality Control is out of range.
2. Training for new staff is required.

<p>SUBJECT: Lab Specimen Recollection</p> <p>SERIES: 400 Ancillary Services</p> <p>APPROVED BY: Amy Peeler, Chief of Clinic Services</p>	<p>POLICY NO.:</p> <p style="text-align: center;">410.06</p> <p>PAGE: 1 OF 3</p> <p>EFFECTIVE DATE: April 2017</p> <p>REVISED:</p>	<div style="text-align: center;">  <p>COUNTY OF SANTA CRUZ</p> <hr/> <p>HEALTH SERVICES AGENCY</p> <p>Clinics and Ancillary Services</p> </div>
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POLICY STATEMENT:

This policy applies to all staff in the Santa Cruz Public Health Laboratory and the Watsonville Branch Laboratory. This policy applies to blood and other sample types that are collected by the laboratory, such as urine and stool, that need to be recollected due to laboratory error, or because the sample was rejected as unsuitable for testing. This policy also applies to specimens collected by the provider ordering the laboratory examination and submitting the sample to the HSA labs for analysis.

Lab is responsible for notifying the patient and the provider within 24 hours of discovering the error.

The Clinical Laboratory Improvement Act (CLIA; 42 CFR part 493) regulates laboratory testing at the Federal level and mandates that a Quality Assurance program be in place for all phases of laboratory testing.

For CLIA compliance, a Quality Gap Report must be completed within 24 hours of discovering the error. The Quality Gap Reports provide data used to improve the quality of patient care.

PROCEDURE:

I. Lab Collected Specimens

A. EPIC patients - General Medical Clinic (GMC), Homeless Person’s Health Project (HHP), and Integrated Behavioral Health (IBH)

1. Lab is responsible for notifying the patient and the provider within 24 hours of discovering the error.
2. Contact the patient first to arrange the re-collect. Then, contact clinic providers via EPIC messaging to let them know why the patient requires a re-collect, and that the patient has been contacted.
 - a. cc: the lab pool on all EPIC messages to communicate with all lab staff for improved follow up of issues.
3. For non-English speaking patients, find another staff member who can help you or utilize interpreter service contact the patient.

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4. Homeless Persons Health Project (HHP) only: Due to the difficulty of contacting some patients, it is acceptable to notify the HHP provider only.
5. The Quality Gap Report must be completed within 24 hours of discovering the error. Document notifications on the Quality Gap report.

B. All other patients

1. Lab is responsible for notifying the patient and the provider within 24 hours of discovering the error.
2. Outside patients and providers are contacted by phone.
 - a. Only 1 message needs to be left for the patient if there is no answer. For privacy, use the following script: "This is (your name) calling from the Emeline laboratory. Please return our call at (831) 454-5445. Thank you."
 - b. Only 1 message needs to be left for a provider, if you cannot reach anyone on the phone.
3. For non-English speaking patients, find another staff member who can help you contact the patient.
4. Document notifications on the Quality Gap report. The Quality Gap Report must be completed within 24 hours of discovering the error.

II. Specimens collected by the provider:

- A. Includes but is not limited to: culture swabs, skin scrapings, swabs for rapid testing.
- B. Notification of the provider only is required. Notification should occur as soon as possible for recollection before the patient leaves.
- C. Document notifications on the Quality Gap report. The Quality Gap Report must be completed within 24 hours of discovering the error.

III. Rejected specimens

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Lab Specimen Recollection


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- A. Rejected specimens are received into the laboratory information system (Orchard Harvest) and rejected.
- B. Clinical Lab Improvement Amendments (CLIA) requires monitoring of all rejected samples and inspectors ask to see the log during inspections. The lab director will generate a rejected specimen log from Harvest.
- C. If re-collected, either the provider or the lab must generate a new order in the patient's Electronic Medical Record (EMR).

<p>SUBJECT: Orders for Radiology Exam</p> <p>SERIES: 400 Ancillary Services</p> <p>APPROVED BY: Amy Peeler, Chief of Clinic Services</p>	<p>POLICY NO.:</p> <p style="text-align: center;">430.01</p> <p>PAGE: 1 OF 1</p> <p>EFFECTIVE DATE: July 2001</p> <p>REVISED: June 2016</p>	<div style="text-align: center;">  </div> <hr/> <p style="text-align: center;">COUNTY OF SANTA CRUZ HEALTH SERVICES AGENCY</p> <p style="text-align: center;">Clinics and Ancillary Services</p>
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GENERAL STATEMENT:

An order by an authorized healthcare provider is required to perform any radiographic exam.


POLICY STATEMENT:

It is the policy of the County of Santa Cruz Health Services Agency (HSA), Radiology Department that a written or verbal order by a county authorized provider is required in order to provide radiologic services to clients of HSA General Medical Clinic, TB Clinic, Ortho Clinic, Homeless Persons's Health Project (HPPH), county jail, juvenile hall and other safety-net organizations in the county.

PROCEDURE:

A. Acceptable orders:

1. Electronic order placed by an authorized provider, using the county's electronic health record system.
2. Written order by authorized provider.
3. Verbal order, followed by written order if possible, by authorized provider.

<p>SUBJECT: Retention and Organization of Films and Images</p> <p>SERIES: 400 Ancillary Services</p> <p>APPROVED BY: Amy Peeler, Chief of Clinic Services</p>	<p>POLICY NO.:</p> <p style="text-align: center;">430.03</p> <p>PAGE: 1 OF 2</p> <p>EFFECTIVE DATE: July 2001</p> <p>REVISED: June 2016</p>	<div style="text-align: center;">  </div> <hr/> <p style="text-align: center;">COUNTY OF SANTA CRUZ HEALTH SERVICES AGENCY</p> <p style="text-align: center;">Clinics and Ancillary Services</p>
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POLICY STATEMENT:

It is the policy of the County of Santa Cruz Health Services Agency (HSA), Radiology Department to maintain a film library for all conventional diagnostic radiographs and an electronic archival system for all digital radiographs performed at Santa Cruz and Watsonville Health Centers.

PROCEDURE:

A. Conventional (Hard) Films:

1. Are filed according to the terminal digits of the patient's HSA medical record number.
2. Routine films are maintained in the X-Ray offices for seven years from date of last service.
3. Employee films are retained for thirty years.
4. Films may be released to outside physicians or other healthcare personnel when required.

B. Release of Hard Films:

1. Department must know where films are going.
2. Obtain all pertinent information.
3. Log the release of films into patient's EPIC Electronic Health Record (EHR).
4. Do not send original film folder, send in X-ray mailer envelope or folder to requesting facility or clinician, place envelope in Outgoing mail by reception. Be sure to enclose information on where the films can be returned to.

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Retention and Organization
of Films and Images

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5. If patient picking up report or images place in folder by reception labeled "PATIENT PICKUP", under patient's last name

C. Digital Images:

1. Routine films are maintained in the X-Ray offices for seven years from date of last service.
2. Employee films are retained for thirty years
3. Routine backups of servers are requires to maintain images.
4. Uploaded CD images from outside facilities can be maintained with other county digital images, CD can then be destroyed or returned to client.

D. Release of Digital Images:

1. Obtain all pertinent information.
2. Burn CD from Viztek/OpalRad computer [at Emeline] or from the OpalRad Web interface app [at Watsonville].
3. Log the release of CD into patient's EPIC EHR as proof disc was sent or created.
4. If mailing, place in appropriate delivery envelope to ensure the safe delivery of disc and place in Outgoing mail by reception.
5. If patient picking up report or images place in folder by reception labeled "PATIENT PICKUP", under patient's last name.

<p>SUBJECT: Technologist Daily Duties</p> <p>SERIES: 400 Ancillary Services</p> <p>APPROVED BY: Amy Peeler, Chief of Clinic Services</p>	<p>POLICY NO.:</p> <p style="text-align: center;">430.05</p> <p>PAGE: 1 OF 3</p> <p>EFFECTIVE DATE: August 2014</p> <p>REVISED: June 2016</p>	<div style="text-align: center;">  </div> <hr/> <p style="text-align: center;">COUNTY OF SANTA CRUZ HEALTH SERVICES AGENCY</p> <p style="text-align: center;">Clinics and Ancillary Services</p>
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GENERAL STATEMENT:

Explanation of daily duties that are to be performed by all technologist assigned to the Radiology departments at Santa Cruz and Watsonville Health Centers.

POLICY STATEMENT:

It is the policy of the County of Santa Cruz Health Services Agency, Radiology Department that all radiologic technologist assigned to Santa Cruz and Watsonville Health Centers be responsible for performing all daily duties during their assigned shift(s), to include but not limited to those outlined in this policy.

REFERENCE:

Recommended Procedures Guide for Radiology

VXvue Operation Manual

OpalViewer Setting Manual

PROCEDURE:

- A. Visually inspected equipment and work area report any repairs, maintenance or concerns to supervisor.
- B. Perform all warm-up and start-up procedures of X-ray equipment and computer
- C. Perform radiographic examinations as requested by authorized providers.
- D. Documentation of all examination is required using electronic record system(s), paper forms or other methods as prescribed by departmental guides.

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Technologist Daily Duties

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1. EHR (electronic health record) – Review and complete request for radiographic examination using EHR.
 2. PACS (picture archiving and communication system) – Review study and attach required documentation to examination using PACS system.
 3. Spreadsheets – Complete any required spreadsheets on examination performed for outside providers and coroner cases.
 4. X-ray jackets – Maintain and document use x-ray exam jackets.
- E. Comparison studies need to be mailed out **daily** to the radiology group.
1. Place the film jackets with the x-rays and requisition inside a blue mailer and zip tie closed.
- F. Film jackets that are returned to the radiology department are to be filed daily.
- G. X-ray reports are to be queried and reviewed daily for any errors or discrepancies.
1. Reports are delivery electronically via electronic health record systems.
 2. Exam reports without comparison, or a comparison that has been submitted electronically should be returned within 24 hours. Exam reports needing comparison using hard film, should have reports returned within 24-48 hours.
 3. Report any outstanding reports to radiology group via fax or phone call.
- H. Communicate with all referring clinics of any departmental changes (i.e., policies, hours, or workflow).
- I. Restock room and work area supplies.
1. For medical supplies, look in the clinic supply room. If supplies need to be ordered, submit item name (reorder # if possible), quantity and ordering location (i.e., X-ray).
 2. For office supplies, email chief technologist or clinic manager with a list items being requested.

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- J. Clean work stations and control areas, including but limited to:
 - 1. Wipe down table, wall bucky, operator console, pillows, pads and other equipment surfaces as needed with antimicrobial wipes or cleaner.

- K. Shut down X-ray unit and digital radiography acquisition systems.

- L. Cancel X-ray order older than 90 days.
 - 1. Refer to departmental *Recommended Procedures Guide*

<p>SUBJECT: Orthopedic Clinic X-ray Exams</p> <p>SERIES: 400 Ancillary Services</p> <p>APPROVED BY: Amy Peeler, Chief of Clinic Services</p>	<p>POLICY NO.:</p> <p style="text-align: center;">430.07</p> <p>PAGE: 1 OF 2</p> <p>EFFECTIVE DATE: August 2014</p> <p>REVISED: August 2014 December 2015 June 2016</p>	<div style="text-align: center;">  </div> <hr/> <p style="text-align: center;">COUNTY OF SANTA CRUZ HEALTH SERVICES AGENCY</p> <p style="text-align: center;">Clinics and Ancillary Services</p>
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GENERAL STATEMENT:

Explanations of when to give adequate time in order for each department to receive patient's charts for our scheduled orthopedic clinic and protocol to follow when performing exams prior to a patient's orthopedic appointment.

POLICY STATEMENT:

It is the policy of the Santa Cruz County Health Services Agency, Radiology Department to provide diagnostic radiologic services and maintain appropriate documentation of examinations performed for the county's orthopedic clinic.

REFERENCE:

Recommended Procedures Guide for Radiology

PROCEDURE:

A. Santa Cruz:

1. Held every Tuesday and Thursday.
2. Follow procedure for GMC. (refer to *Recommended Procedures Guide for Radiology*)
3. Use ortho protocols when applicable.
4. If surgical hardware is present include the entire rod, screw, etc.
5. Return patient to clinic and submit images for Orthopedist to review.

SUBJECT:
Orthopedic Clinic X-ray
Exams

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6. Prepare current exam, and any prior exam for comparison, and send to radiologist for dictation.

B. Watsonville:

1. Held on the first and last Wednesday of every month.
2. Follow procedure for GMC. (refer to *Recommended Procedures Guide for Radiology*)
3. Use ortho protocols when applicable.
4. If surgical hardware is present include the entire rod, screw, etc.
5. Return patient to clinic and submit images for Orthopedist to review.
6. Prepare current exam, and any prior exam for comparison, and send to radiologist for dictation.

<p>SUBJECT: Documentation</p> <p>SERIES: 400 Ancillary Services</p> <p>APPROVED BY: Amy Peeler, Chief of Clinic Services</p>	<p>POLICY NO.: 430.09</p> <p>PAGE: 1 OF 3</p> <p>EFFECTIVE DATE: August 2014</p> <p>REVISED: August 2014 December 2015 June 2016</p>	 <p>COUNTY OF SANTA CRUZ HEALTH SERVICES AGENCY</p> <hr/> <p>Clinics and Ancillary Services</p>
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GENERAL STATEMENT:

This policy is in place to outline the required maintenance and organization of departmental documentation, other than exam documentation.


POLICY STATEMENT:

It is the policy of the County of Santa Cruz Health Services Agency, Radiology Department that proper documentation be maintained of some departmental function using available forms of record keeping, for Santa Cruz and Watsonville Health Centers.

PROCEDURE:

A. Documents which must be kept:

1. Outside provider orders
2. Coroner orders
3. Release of Information (ROI)
4. Purchase orders
5. Radiation dosimetry reports
6. Service/Work/Maintenance orders
7. Updated state or federal regulations and guidelines
8. Film request

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B. For paper form request, file in appropriate binder(s) provided in the radiology department.

C. For the request of X-ray films or delivery of report via fax:

1. Using EPIC, document in patients chart Release of Information:

- a. Press on the top left corner 'EPIC'.
- b. Select 'Encounter'.
- c. Select the patient, either by typing last name, first name or epic #.
- d. Press 'Find Patient'.
- e. Select 'New'.
- f. Under box labeled 'type' please press on the magnifying glass.
- g. Select 'Release of Information'.
- h. Press 'Accept'.
- i. Press 'Accept' once more.
- j. Select 'Create Note'.
- k. Type in the information provided for x-ray film--patient name, requesting which films and reasoning for request and/or type in the information provided for results that are being delivered via fax to outside providers, indicate which provider, date and time fax was sent.
- l. Press 'Close encounter' to the left.

D. Outside radiology reports are to be given to medical records and scanned into the electronic health record system.

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Documentation


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- E. Send all invoices, packing slips & maintenance documents via interoffice to Emeline clinic, X-ray department.

<p>SUBJECT: Workflow Using EPIC Electronic Health Record System</p> <p>SERIES: 400 Ancillary Services</p> <p>APPROVED BY: Amy Peeler, Chief of Clinic Services</p>	<p>POLICY NO.:</p> <p style="text-align: center;">430.10</p> <p>PAGE: 1 OF 9</p> <p>EFFECTIVE DATE: August 2014</p> <p>REVISED: June 2016</p>	<div style="text-align: center;">  </div> <hr/> <p style="text-align: center;">COUNTY OF SANTA CRUZ HEALTH SERVICES AGENCY</p> <p style="text-align: center;">Clinics and Ancillary Services</p>
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GENERAL STATEMENT:

Detailed explanation of the *EPIC* electronic health record system (EHR) radiology interface, for reviewing X-ray orders, opening & closing patient encounters at either Santa Cruz or Watsonville Health Centers.

POLICY STATEMENT:

It is the policy of the County of Santa Cruz, Health Services Agency, Radiology Department that electronic health record system(s), be used to log and document all patient encounters at Santa Cruz and Watsonville Health Centers.

PROCEDURE:

- A. An exam order by a county authorized provider is required in order to perform any radiographic examinations.
- B. Patients seen in clinic and provider orders x-ray ‘Normal’ and the exam is done within the **SAME DAY** as ordering, technologist can retrieve order from ‘Inbasket’ (when ordered as *Normal*).
- C. Patients seen in clinic and provider orders x-ray ‘**Future**’ and still comes to department the **SAME DAY** as ordering please perform as follows.
 - 1. Please press ‘chart’.
 - 2. Locate patient and open the chart.
 - 3. Press ‘chart review’.
 - 4. Under ‘Encounter’ you need to locate today’s date of service and verify if the chart is open or closed, this is located in the third column labeled ‘Status’.
 - a. If it states **open** please go to the clinic schedule by clicking, ‘Schedules’.

SUBJECT:

Workflow Using EPIC
Electronic Health Record
System

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- b. Ensure that you have selected proper department i.e. SCZ SC CLINIC or SCZ WATS CLINIC.
- c. Locate patient on this schedule.
- d. Double click on patients name once they are highlighted on the provider's schedule.
- e. Click 'more activities'.
- f. Select 'open orders'.
- g. Single click the x-ray exam.
- h. Press 'release'.
- i. Please ensure that you do **NOT** close encounter however we need to just close out the chart by pressing the red X next to the patients name on the top tab.
 - i. The reason we do NOT close this type of encounter is because the provider is the one in the patients chart and they will be the one to close encounter once they have completed with the patient for the day.
 - ii. This is the **ONLY** time that you would NOT close an encounter by signing it'.
- j. If it states closed please go to the clinic schedule by clicking, 'Schedules'.
- k. Ensure that you have selected proper department i.e. SCZ SC CLINIC or SCZ WATS CLINIC.
- l. Locate patient on this schedule.
- m. Double click on patients name once they are highlighted on the provider's schedule.

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- n. If a screen pops up stating, “This encounter is closed. Would you like to create an addendum?” Press ‘Create Addendum’.
- o. Click ‘more activities’.
- p. Select ‘open orders’.
- q. Single click the x-ray exam.
- r. Press ‘release’.
- s. Press ‘more activities’.
- t. Select ‘close encounter’.
- i. Please make sure that in this case you **MUST** close the encounter and sign the addendum for all billing loops to be closed.

D. Patients coming in with **Future orders** already in EPIC not seen by provider on the **SAME DAY**.

1. Patients **must** be put on x-ray schedule.
2. X-ray tech will click on ‘Change Provider’.
3. Type in your name to change to self.
4. Once this now reflects your name.
5. Double click patient on your schedule this will open patients chart.
6. Click on ‘Quick Questions’ located on the left.
7. Click on the magnifying glass for Visit Program Area.
8. Select ‘X-ray only’.

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9. Press Accept.
 10. Click on 'LOS'.
 11. Type in Authorizing Provider.
 - a. This **MUST** be the ordering provider, so when you check to see if the patient has a normal vs. future order please remember who ordered the exam.
 12. Click on wand to the right of the open blank area.
 13. Select 'X-RAY ONLY'.
 14. Press Accept.
 15. Click on 'More Activities'.
 16. Select 'Open Orders'.
 17. Single click on exam to be released, press, 'Release'.
 18. Click on 'More Activities'.
 19. Click on 'Close Encounter'.
 20. Once this is done orders will be waiting in your in basket.
 21. Print and add info as normal.
- E. Patients seen within the clinic, provider orders a **Normal**, patient leaves and does not have x-ray done that day (Orders would be seen in Inbasket).
1. Get information from patient order including; Exam date, Exam (CPT code), Reason and Ordering Provider.
 2. Cancel order that is sitting in the Inbasket.

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3. Click on 'Schedules' to locate your x-ray schedule.
4. X-ray tech will click on 'Change Provider'.
5. Type in your name to change to self.
6. Once this now reflects your name.
7. Double click patient on your schedule this will open patients chart.
8. Click on 'Quick Questions' located on the left.
9. Click on the magnifying glass for Visit Program Area.
10. Select 'X-ray only'.
11. Press Accept.
12. Click on 'LOS'.
13. Type in Authorizing Provider.
 - a. This MUST be the ordering provider, so when you check to see if the patient has a normal vs. future order please remember who ordered the exam.
14. Click on wand to the right of the open blank area.
15. Select 'X-RAY ONLY'.
16. Press Accept.
17. Click on 'Order Entry' on left hand column.
18. Under 'New Order' enter exam information that has been cancelled from the Inbasket.

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Workflow Using EPIC
Electronic Health Record
System

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19. Enter all pertinent information needed to complete order (SAME as outside order, Pregnancy, comp films, information, etc.).
 20. **MUST** use drop box for priority and mark **NORMAL** instead of future.
 21. Sign orders.
 22. Click on 'More Activities'.
 23. Click on 'Close Encounter'.
 24. Now proceed to your Inbasket.
 - a. Print and add info as normal.
- F. Patients with an order for x-rays by an **outside provider** with an **outside orders**.
1. Patient **MUST** be put onto x-ray schedule.
 2. Click on "Schedules".
 3. "Dept": To change just press on the magnifying class and scroll until you find the correct department.
 - a. Santa Cruz- SCZ SC CLINIC.
 - b. Watsonville- SCZ WATS CLINIC.
 4. Click on the appropriate department based on where you are working.
 5. Click on the "+" to the left of the folder to expand the list and scroll down until you find "SC XRAY T". Click.
 6. To the right you will see the schedule pop up for SC XRAY T.
 7. Single click on patient's name.

SUBJECT:

Workflow Using EPIC
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8. Click on “Change Provider” a little blue box will appear.
9. Type last three of your LAST NAME under “new provider”.
10. Press “TAB”.
11. Click “Accept”.
12. Even if it says you are not scheduled press “Ok”.
13. Now click on “My Schedule”.
14. Click on technologist name.
15. Exam will appear on your schedule.
16. Double click patients name, this will open the patients chart automatically.
17. Under Documentation on the left click on “Quick Questions”.
18. Visit Program Area: Click on magnifying glass click “X-ray only”.
19. Click “Accept”.
20. Under Discharge on the left click on “LOS”.
21. In the “Auth Prov” box type in the name of medical director where exam is being done.
22. Click on wand with stars underneath.
23. Under “LOS Code” Click on Blue highlighted area “TX123 Custom X-RAY ONLY [TX123]”.
24. Click “Accept”.
25. Click on “Order Entry” on left of screen.

SUBJECT:

Workflow Using EPIC
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26. Under “New Order” type in exam (i.e. chest x-ray) click on specific exam that is being ordered.
27. This will prompt another screen to pop up.
28. Please answer whether or not they have “comparison films available”.
29. Click on magnifying glass and select: “Yes, No, or Unknown”.
30. Under “Comments Box (F6)” please type any necessary information i.e. “Outside Order from *Dr. Abcd* & Phone number”.
31. Scroll down and click “accept”.
32. Type in the “Add Diagnosis” box the diagnosis.
 - a. If the outside provider has provided a code type use that.
 - b. If the outside provider did NOT provide code please choose the one that is most accurate pertaining to the exam.
33. Press “Accept” after you have found the diagnosis you are looking for.
34. Click on “Sign Orders”.
35. If it prompts you please Associate the Diagnosis with the specific exams by Clicking on the box with the correct diagnosis for our exam.
36. Click “Accept”.
37. “Authorizing Providers for Procedures” Type the name of medical director where exam is being done.
38. Click “Accept”.
 - a. If prompted (Does NOT happen every time, “Do you want to accept these orders anyway?”) Press Yes.

SUBJECT:

Workflow Using EPIC
Electronic Health Record
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39. Click on “More Activities” On bottom left of screen.
40. Click on “Close Encounter”.
41. A box will pop up for you to enter your password for Epic.
42. Type in your password and click “OK”.
43. Click on your “In Basket”.
44. Click on “Orders.
45. If your exam that you just ordered is not appearing press “Refresh”.
46. Once it appears click on your patient.
47. Once Patient is highlighted.
48. Print order (Either right click and print or Click on “Print” button on top right of screen).
49. Now press “Add Info”.
50. Enter “Collected by” type in the last three of your last name and press tab.
51. Click on the “Calendar” and do not change anything just press “Accept”.
52. Click on the “Clock” and do not change anything just press “Accept”.
53. Press “Accept”.
54. Enter Order on Excel Spreadsheet and please document Outside order information with Doctors name, phone and fax number, and file the outside order in the binder provided.

<p>SUBJECT: STAT Readings</p> <p>SERIES: 400 Ancillary Services</p> <p>APPROVED BY: Amy Peeler, Chief of Clinic Services</p>	<p>POLICY NO.:</p> <p style="text-align: center;">430.11</p> <p>PAGE: 1 OF 2</p> <p>EFFECTIVE DATE: August 2014</p> <p>REVISED: June 2016</p>	<div style="text-align: center;">  </div> <hr/> <p style="text-align: center;">COUNTY OF SANTA CRUZ HEALTH SERVICES AGENCY</p> <p style="text-align: center;">Clinics and Ancillary Services</p>
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GENERAL STATEMENT:

Explanation on how and when to obtaining “STAT” or “Wet Read” dictations of X-ray exams done at Santa Cruz or Watsonville Health Centers.

POLICY STATEMENT:

It is the policy of the County of Santa Cruz Health Services Agency, Radiology Department to help facilitate requesting providers in obtaining an immediate or urgent reading of any radiographic examination whose priority is ordered as “STAT” or “Wet Read” and performed at any Santa Cruz county facility.

PROCEDURE:

- A. STAT or Wet Read requests are appropriate when:
 - 1. Requested by referring provider, either in written or oral form.
 - 2. Acute pathology is present and requesting priority is inappropriate.

- B. Performing technologist is to electronically forwarded exam to the radiology group as soon as possible for immediate interpretation and dictation:
 - 1. Attach all pertinent documentation to exam.
 - 2. Contact radiology group to ensure receipt exam and communicate any instructions.

- C. STAT or Wet Read report delivery:
 - 1. Reports should be made available within 1 hour

SUBJECT:
STAT Readings


POLICY NO.:

430.11

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2. If no report is available with the hour contact radiology group or county radiology supervisor.
3. Technologist is responsible for checking all available record systems to ensure receipt of report and delivery to requesting provider.
4. Fax any report(s) to providers without access to health centers electronic health record systems.
5. If requesting provider wishes to communicate with radiologist please contact radiology group.

<p>SUBJECT: TB Clinic - Radiographic Exams</p> <p>SERIES: 400 Ancillary Services</p> <p>APPROVED BY: Amy Peeler, Chief of Clinic Services</p>	<p>POLICY NO.:</p> <p style="text-align: center;">430.12</p> <p>PAGE: 1 OF 3</p> <p>EFFECTIVE DATE: August 2014</p> <p>REVISED: June 2016</p>	<div style="text-align: center;">  </div> <hr/> <p style="text-align: center;">COUNTY OF SANTA CRUZ HEALTH SERVICES AGENCY</p> <p style="text-align: center;">Clinics and Ancillary Services</p>
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GENERAL STATEMENT:

To ensure that X-ray results for radiographic exams concerning TB exposures, positive skin test, rule out TB, etc. are reported to the referring provider in a prompt and timely manner.

POLICY STATEMENT:

It is the policy of the Santa Cruz County, Health Services Agency, Radiology Department to provide diagnostic radiologic services and maintain appropriate documentation of examinations performed for the county's Public Health and Communicable Diseases division.

REFERENCE:

Departmental, *Recommended Procedures Guide for Radiology*

OpalViewer Setting Manual

PROCEDURE:

- A. TB Clinics are held on:
 - 1. Santa Cruz: 1st and 3rd Wednesday of each month.
 - 2. Watsonville: 2nd and 4th Wednesday of each month.

- B. Follow exam procedure for General Medical Clinic (GMC) (refer to departmental, *Recommended Procedures Guide for Radiology* for the most updated protocols and instructions). If requested, prepare previous exam for immediate viewing by the provider.

- C. Submit current exam, and relevant previous exam(s) for comparison, to the interpreting radiology group the day exam is performed.

SUBJECT:
TB Clinic - Radiographic
Exams

POLICY NO.:

430.12

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D. Comparison to previous exam(s) done at Santa Cruz & Watsonville Health Centers:

1. Review patient electronic health record (EHR) chart for previous exam orders and reports.
2. If conventional radiographs--Film:
 - a. Pull previous exam hard films from X-ray film chart, located in the X-ray room and in the lab/X-ray storage room on the basement floor. For access to storage room contact X-ray supervisor.
 - b. On the requisition, state the date of previous exam and the method of delivery for comparison.
 - c. Gather film, report, requisition, loaner film jacket and place inside of a transport jacket, and secure zipper with a department zip-tie or plastic lock device to ensure document safety and patient privacy.
 - d. Send via clinic carrier to radiology group.
 - e. Place the remaining X-ray film chart in the "OUT" box inside the X-ray room.
3. If digital radiographs—PACS (refer to departmental, *Recommended Procedures Guide for Radiology* and *OpalViewer Setting Manual* for the most updated protocols and instructions):
 - a. Review EHR and PACS to verify previous exam(s) was completed.
 - b. On the requisition, state the date of previous exam and location of images-PACS.

E. Comparison to previous exam(s) on CD or film from an outside facility:

1. If on CD:
 - a. Upload exam into PACS.

SUBJECT:
TB Clinic - Radiographic
Exams

POLICY NO.:

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b. Send exam to radiology group for comparison, with notes stating exam is for comparison only.

c. Notify radiology group about comparison images.

2. If on film:

a. Follow same steps as noted above in section IV, paragraph b.

F. X-ray Reports.

1. Reports are delivery electronically via Santa Cruz Health Information Exchange and EPIC electronic health record systems.
2. Exam reports without comparison, or a comparison that has been submitted electronically should be returned within 24 hours. Exam reports needing comparison using hard film, should have reports returned within 24-48 hours.
3. Report any outstanding reports to radiology group via fax or phone call.

**Co-Applicant Board
Appointment/Reappointment Privileging List
April 2017**

LAST	FIRST	Provider Type	Site	Privilege Date
Cisneros	Jeanette	Physician	WHC	3/21/17
Cristobal	Carmelita	Physician	WHC	4/4/17
Hansen	Anniken	Physician	WHC	3/21/17
Kollmann	Alice	Nurse Practitioner	WHC	3/21/17
Reyes	Wilibaldo	Physician Assistant	WHC	3/21/17
Sanford	Eric	Physician	WHC	3/21/17
Violich	Michele	Physician	WHC	3/23/17
Whitehead	Allison	Nurse Practitioner	SCC	3/15/17

The County of Santa Cruz Integrated Community Health Center Commission
Fiscal Year 16-17

Calendar of Duties:	Commission	Exec. Comm	County HSA	Frequency	Section	Complete
Approval of Annual Budgets: Subject to the COUNTY's fiscal policies, the COMMISSION shall have authority to approve the Health Center's annual operating and capital budget	x			Annually - May	1.2.e	
Quality Management: Evaluate the quality management programs developed and recommended by the staff of the Health Center and approved by the COUNTY's Health Services Agency in accordance with Section 2.2(j).	x			Annually - May	1.2.j	
Evaluation of Health Center's Activities and Achievements: Conduct an evaluation of the Health Center's activities and achievements and recommend, as necessary, revision of the Health Center's goals, objectives and strategic plan.	x		x	Annually	1.2.g	
Approval of Applications: FQHC recertification, annual Section 330 grants (as applicable), and other grant funds for the Health Center.	x			Annually	1.2.h	
Evaluation of the COMMISSION: Evaluate itself and its actions for effectiveness, efficiency and compliance with the authorities set forth in this Agreement, consistent with the requirements of Section 330.	x			Annually	1.2.k	
Evaluation: Review the Chief Executive Officer of Clinic Services' performance and shall comply with all applicable personnel, collective bargaining, and other employment related requirements of the COUNTY. The review shall be coordinated and conducted by the COMMISSION's Executive Committee. The report of the annual review shall be submitted to the full COMMISSION and to the COUNTY's Health Services Agency ..		x		Annually - July	1.3.b	

The County of Santa Cruz Integrated Community Health Center Commission

Fiscal Year 16-17

Calendar of Duties:	Commission	Exec. Comm	County HSA	Frequency	Section	Complete
Compliance: Evaluate the Health Center's compliance activities and, recommend, as necessary, the revision, restructuring, or updating of the compliance program by the COUNTY's Health Services Agency.	x			Biannual	1.2.i	
Evaluation of the COMMISSION: Evaluate compliance with the Governance Requirements and report findings and any recommendations for corrective action to the COUNTY's Health Services Agency.	x			Quarterly	1.2.k	
Fiscal Operation Responsibilities: Preparing monthly financial reports, which shall be submitted to the COMMISSION, and managing financial matters related to the operation of the Health Center			x	Monthly	2.2.g	
Quality Management: The COMMISSION shall be integrated into the COUNTY's Health Services Agency's quality management activities related to the Health Center, including audits and state quality management reporting requirements. Quality management reports shall be shared periodically between the COMMISSION and the COUNTY's Health Services Agency representatives responsible for quality management matters at the Health Center. The Health Center's Chief Executive Officer of Clinic Services shall, as appropriate, report to the COMMISSION on matters concerning the quality of the medical services provided by the Health Center	x		x	Monthly	1.2.j	
Chief Executive Officer of Clinic Services: Subject to the COUNTY's personnel policies, the COMMISSION shall have final authority to select, remove, and evaluate the Health Center's Chief Executive Officer of Clinic Services	x			As Needed	1.2.d	
Compliance: Compliance with applicable federal, state and local laws, regulations and policies.	x		x	As Needed	1.2.i	

The County of Santa Cruz Integrated Community Health Center Commission

Fiscal Year 16-17

Exec. County

Calendar of Duties:

Commission Exec. Comm HSA Frequency Section Complete

<p>Compliance: The COUNTY's Health Services Agency shall provide the COMMISSION with periodic reports regarding the Health Center's legal and regulatory compliance program.</p>			<p align="center">x</p>	<p>As Needed</p>	<p>1.2.i</p>	
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Santa Cruz County Health Services Agency Clinics

Fiscal Presentation
Through March 31st 2017

County of Santa Cruz (HSA)
 FY 16/17 CLINIC(AII)(AII)
 FQHC Clinic Services
 As of 03/31/2017

Program Name	(All)	<<<<Select an index code
GLKey	(All)	<<<<Select a GL code
Division	CLINIC	<<<<Select a division

Row Labels	Sum of Budget	Sum of Actual	Sum of Estimated Actuals	EA Var to Bud	Sum of Percentage
CLINIC ADMINISTRATION	5,436,296	3,361,214	5,517,624	(81,328)	1.50%
EXPENDITURE	5,436,296	3,362,464	5,517,624	(81,328)	1.50%
REVENUE	0	(1,250)	0	0	#DIV/0!
CORAL STREET CLINIC (HPHP)	(227,955)	8,356	(1,082,898)	854,943	375.05%
EXPENDITURE	4,116,199	2,297,328	3,310,195	806,004	-19.58%
REVENUE	(4,344,154)	(2,288,971)	(4,393,093)	48,939	1.13%
EMELINE CLINIC	(182,677)	1,726,109	1,576,398	(1,759,075)	-962.94%
EXPENDITURE	7,040,887	4,475,369	6,390,946	649,941	-9.23%
REVENUE	(7,223,564)	(2,749,260)	(4,814,548)	(2,409,016)	-33.35%
FORENSIC SERVICES	98,831	69,788	99,964	(1,133)	1.15%
MENTAL HEALTH FQHC	(1,100,000)	(5,477,620)	(1,100,177)	177	0.02%
EXPENDITURE	10,961,603	570	7,103,954	3,857,649	-35.19%
REVENUE	(12,061,603)	(5,478,190)	(8,204,131)	(3,857,472)	-31.98%
WATSONVILLE CLINIC	(978,311)	(1,231,770)	(2,273,678)	1,295,367	132.41%
EXPENDITURE	6,332,655	4,024,019	5,614,819	717,836	-11.34%
REVENUE	(7,310,966)	(5,255,788)	(7,888,497)	577,531	7.90%
WATSONVILLE DENTAL	(506,785)	(715,001)	(193,714)	(313,071)	-61.78%
Grand Total	2,539,399	(2,258,924)	2,543,518	(4,119)	0.16%

GLKey	(Multiple Items)	<<<<Select an index code
Division	CLINIC	<<<<Select a division
Rev/Exp	REVENUE	<<<<Select revenue

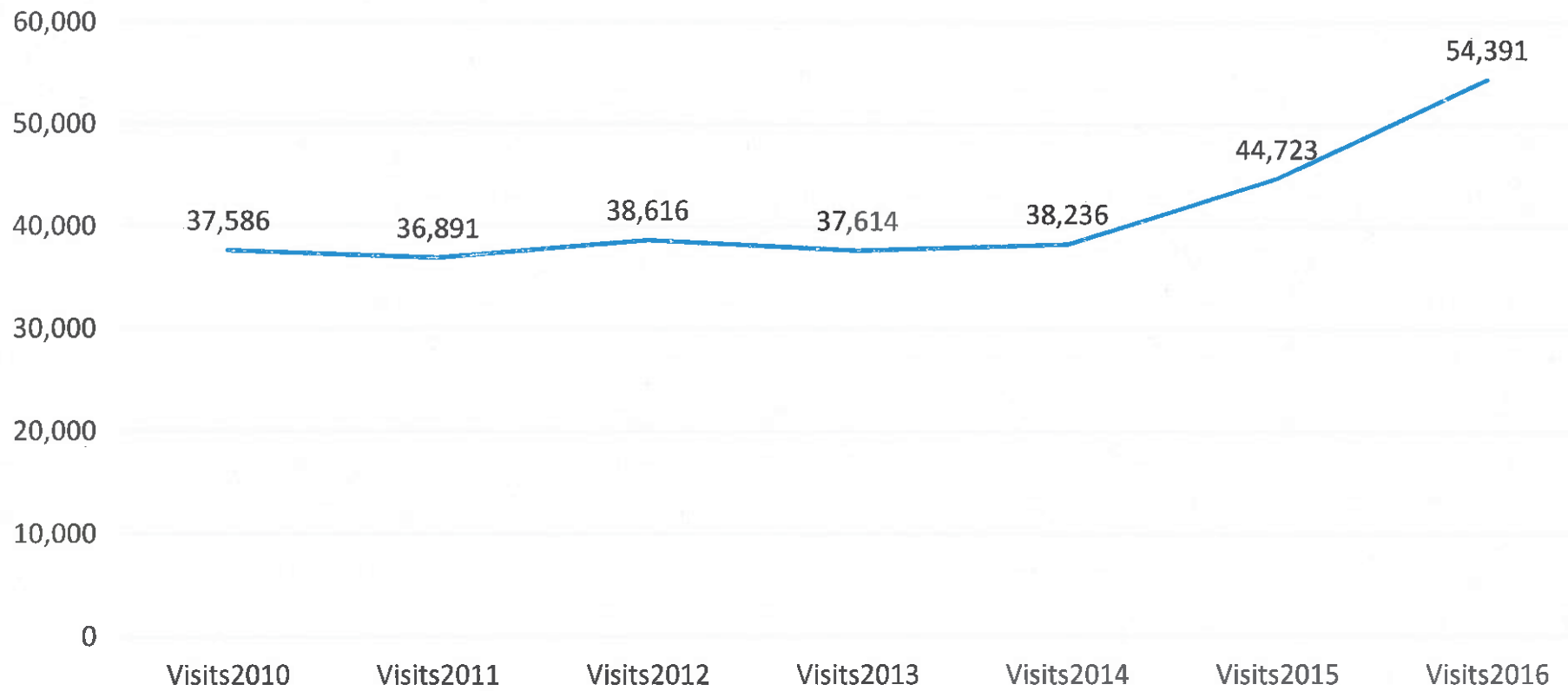
Row Labels	Sum of Budget	Sum of Actual	Sum of Estimated Actuals	Sum of Variance 1
CLINIC ADMINISTRATION	0	(1,250)	0.00	0
42384-OTHER REVENUE	0	(1,250)	0.00	0
CORAL STREET CLINIC (HHPH)	(4,344,154)	(2,288,971)	(4,393,093.36)	48,939
40935-FED-MAA/TCM MEDI-CAL ADMIN ACT	(265,000)	(175,864)	(265,000.00)	0
40954-FED-EMERGENCY SHELTER GRANT	(489,506)	(233,297)	(311,062.53)	(178,443)
40996-FED-HEALTH PROGRAMS	(2,588,088)	(1,194,748)	(2,588,088.00)	0
41675-OUTPATIENT CLINIC FEES-EPIC	(891,000)	(635,231)	(1,050,523.00)	159,523
42047-OTHER CHARGES CURRENT SERVICES	0	(50,895)	(67,859.83)	67,860
42384-OTHER REVENUE	(110,560)	1,064	(110,560.00)	0
EMELINE CLINIC	(7,223,564)	(2,749,260)	(4,814,547.65)	(2,409,016)
40996-FED-HEALTH PROGRAMS	(35,113)	0	(35,113.00)	0
41675-OUTPATIENT CLINIC FEES-EPIC	(5,927,453)	(2,867,472)	(3,597,181.00)	(2,330,272)
42022-COST RECOVERY-OTHER	(144,000)	0	(144,000.00)	0
42047-OTHER CHARGES CURRENT SERVICES	(50,000)	(35,146)	(46,860.75)	(3,139)
42380-NSF CHECKS	0	56,704	75,605.10	(75,605)
42384-OTHER REVENUE	(1,066,998)	96,654	(1,066,998.00)	0
MENTAL HEALTH FQHC	(12,061,603)	(5,478,190)	(8,204,131.00)	(3,857,472)
41675-OUTPATIENT CLINIC FEES-EPIC	(12,061,603)	(5,478,190)	(8,204,131.00)	(3,857,472)
WATSONVILLE CLINIC	(7,310,966)	(5,255,788)	(7,888,497.32)	577,531
41675-OUTPATIENT CLINIC FEES-EPIC	(7,234,071)	(5,168,390)	(7,743,965.00)	509,894
42047-OTHER CHARGES CURRENT SERVICES	0	(50,723)	(67,631.11)	67,631
42362-CASH OVERAGES	0	(5)	(6.21)	6
42372-CONTRIBUTIONS AND DONATIONS	0	0	0.00	0
42384-OTHER REVENUE	(76,895)	(36,671)	(76,895.00)	0
WATSONVILLE DENTAL	(2,656,785)	(1,296,149)	(2,033,914.00)	(622,871)
41675-OUTPATIENT CLINIC FEES-EPIC	(2,656,785)	(1,296,149)	(2,033,914.00)	(622,871)
Grand Total	(33,597,072)	(17,069,610)	(27,334,183.33)	(6,262,889)

County of Santa Cruz (HSA)
 FY 16/17 EXPENDITURE CLINIC(All)
 Expenses by Program
 FQHC Clinic Services
 As of 03/31/2017

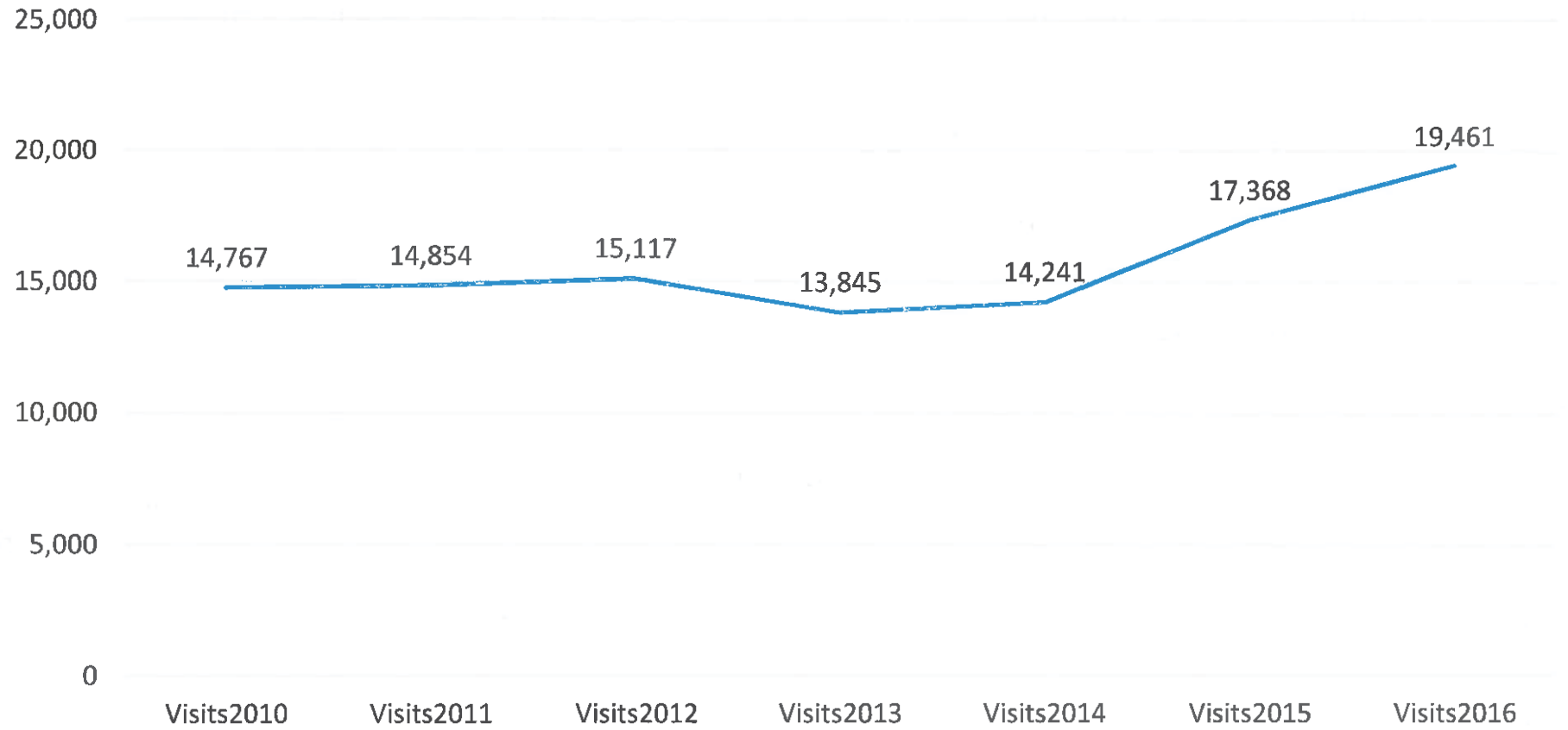
GLKey	(All)	<<<<Select an index code
Division	CLINIC	<<<<Select a division
Rev/Exp	EXPENDITURE	<<<<Select expenditure

Row Labels	Sum of Budget	Sum of Actual	Sum of Estimated Actuals	Sum of Variance
CLINIC ADMINISTRATION	5,436,296	3,362,464	5,517,624	(81,328)
50-SALARIES AND EMPLOYEE BENEF	2,238,068	1,755,948	2,382,257	(144,189)
60-SERVICES AND SUPPLIES	628,022	384,557	611,828	16,194
70-OTHER CHARGES	2,570,206	1,221,960	2,523,539	46,667
CORAL STREET CLINIC (HPHP)	4,116,199	2,297,328	3,310,195	806,004
50-SALARIES AND EMPLOYEE BENEF	2,942,915	1,692,140	2,294,722	648,193
60-SERVICES AND SUPPLIES	1,173,284	605,188	1,015,473	157,811
EMELINE CLINIC	7,040,887	4,475,369	6,390,946	649,941
50-SALARIES AND EMPLOYEE BENEF	5,782,315	3,644,103	4,946,959	835,356
60-SERVICES AND SUPPLIES	1,211,572	831,266	1,397,250	(185,678)
80-FIXED ASSETS	47,000	0	46,736	264
MENTAL HEALTH FQHC	10,961,603	570	7,103,954	3,857,649
60-SERVICES AND SUPPLIES	0	570	583	(583)
95-INTRAFUND TRANSFERS	10,961,603	0	7,103,371	3,858,232
WATSONVILLE CLINIC	6,332,655	4,024,019	5,614,819	717,836
50-SALARIES AND EMPLOYEE BENEF	5,370,034	3,526,251	4,788,477	581,557
60-SERVICES AND SUPPLIES	912,621	488,214	782,024	130,597
80-FIXED ASSETS	50,000	9,553	44,318	5,682
WATSONVILLE DENTAL	2,150,000	581,149	1,840,200	309,800
60-SERVICES AND SUPPLIES	2,150,000	581,149	1,840,200	309,800
Grand Total	36,037,640	14,740,898	29,777,737	6,259,903

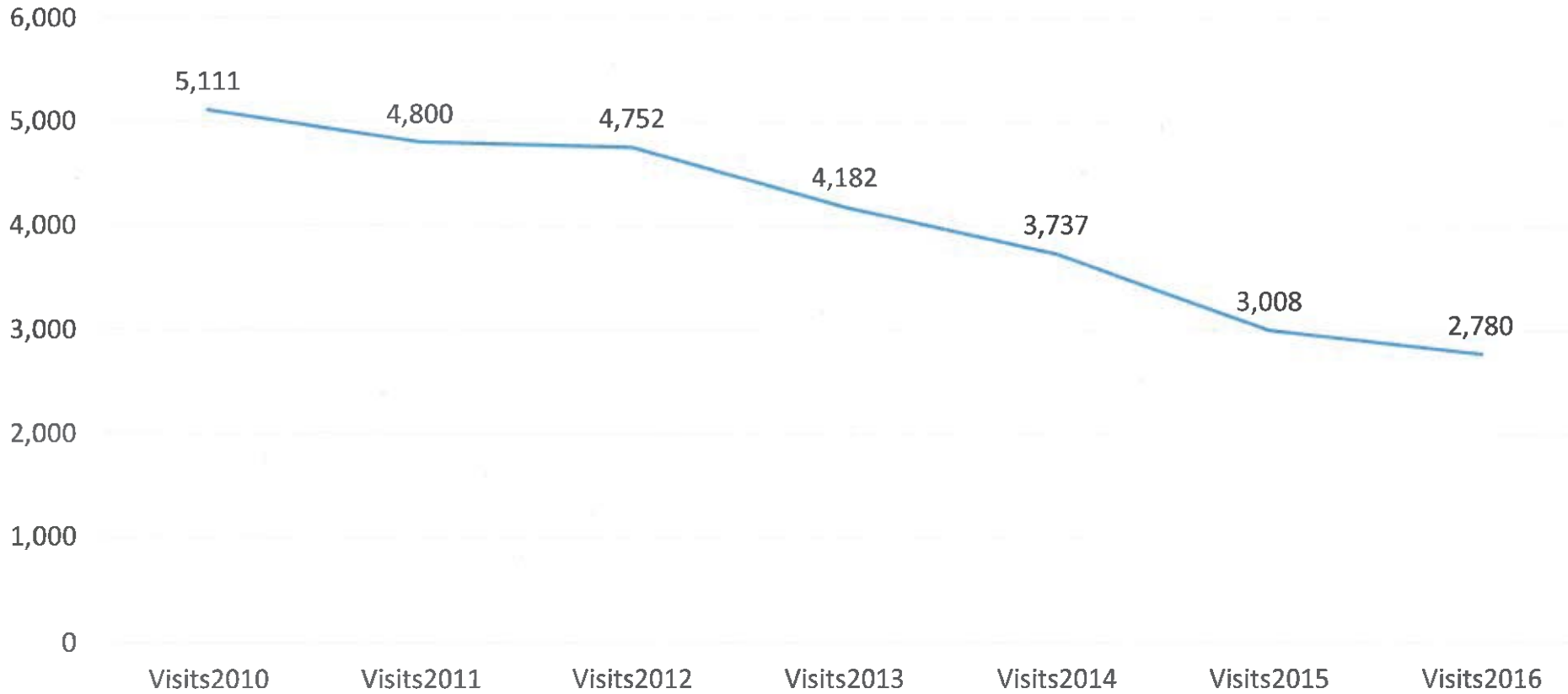
All Clinics
Total Visits by Calendar Year



Santa Cruz Clinic
Total Visits by Calendar Year



Coral Street Clinic
Total Visits by Calendar Year



Watsonville Clinic
Total Visits by Calendar Year

