

## **July 2024 Board Reports**

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- 3. Quality Committee Report

# CEO Report



**DATE:** July 22, 2024

**TO:** SDH Board of Directors

FROM: Tracey Fecher, CEO

**RE: CEO Report** 

- FY 24 Clinic Visit Volume: For FY24, clinic visits were under budget by (2,709) and over forecast by 500 visits. The number of visits was under budget due to the following:
  - There were 9 provider FTEs budgeted (dentists and hygienists). In FY24, the average FTE for providers through the year was 7.3.
  - The primary reason for provider FTEs being under budget was the 5-month vacancy of the FT dentist position in Half Moon Bay.
  - A San Mateo dentist went on maternity leave for the months of April, May and June.
  - The PTO in the visit model used to budget was 3% when the actual rate is 7%.
  - The forecast is adjusted monthly for provider FTE changes; and other factors that can affect the visit volume. The forecast modeling was also adjusted to 7% PTO. The forecast model tracked actual visits to within 3.5%. The actuals matching the forecast are a good indicator that the team understands what drives visit volume. As a COO joins the team, one of their responsibilities will be creating a provider on-call team to assist with provider vacancies.
- Of note is that the team was able to keep the FQHC visits above the budgeted payer mix percentage and that the number of low-income patient visits percentage was higher than budgeted.

FY24: July 2023 to June 2024

Comm/PPO 4,060 3,057 3,117 (943) 22.2%	24%
Collini/FFO 4,000 3,037 3,117 (343) 22.2%	
Private Pay 417 249 326 (91) 2.3%	2%
Medi-Cal Dental 9,130 7,360 7,508 (1,622) 53.4%	54%
Affordable Plan 549 643 496 (53) 3.5%	3%
Farmworker 375 321 342 (33) 2.4%	2%
FQHC 2,265 1,921 2,263 (2) 16.1%	13%
Access to Care Subtotal 12,319 10,245 10,609 (1,710) 75.5%	73%
Total Visits 16,796 13,551 14,052 (2,744)	

2. SMMC FQHC Contract: The team has begun converting HPSM pediatric patients that get their primary care at SMMC to the FQHC contract. Of the 83 HPSM pediatric appointments scheduled in July, 56 were converted. There will be additional opportunities to convert patients to the contract as the Sonrisas pediatric dentists are credentialed with SMMC.

- 3. Staffing: For FY25, all provider positions have been hired. A one day a week dentist starts at the San Mateo clinic in late August. A one day a week hygienist in HMB starts in early August and the San Mateo Saturday hygienist position filled. There is a 3-day a week dentist going on maternity leave in the fall and the team is looking at ways to fill with a temporary dentist that is credentialed with SMMC. A Practice Manager and Development Associate were hired and started in the last week. Interviews with COO candidate continue and are going well. The team anticipates hiring in August.
- **4.** Financial Update: On July 23<sup>rd</sup>, Sonrisas' current cash position was \$2,085,000.

## Strategic Plan FY24 Final Report



**DATE:** July 29, 2024

**TO:** SDH Board of Directors

FROM: Anna Mimran, Strategic Project Manager

**RE: Strategic Plan – FY24 Final Report** 

The Sonrisas team met for the Strategic Plan's final quarterly review session of FY24 on July 10<sup>th</sup>. Goals for FY24 were close to being 100% complete. The strategic plan is helping to focus energy on initiatives that are building organizational capacity and momentum.

Initiatives strengthening internal systems included leadership trainings, developing better feedback mechanisms with staff and patients, and improving data collection and management systems for surveys and outreach programs. Pathways for growth were also expanded through the FQHC project and fundraising efforts.

The attached Sonrisas Strategic Plan Progress Dashboards provide details about each goal's status. Here are highlights of what was achieved during Q4 under each focus area.

#### FOCUS AREA I: SONRISAS CULTURE

Follow-up to staff survey results prompted constructive working sessions to address issues raised by staff. This ongoing process is improving collaboration between front-office and back-office teams.

Group "Leadership Labs" and 1:1 coaching strengthened supervisors' individual skills, and fostered stronger communication and collaboration between team members, contributing to a more open and cohesive team dynamic.

DEIJ business case was finalized and is being integrated into operational processes, such as recruitment tools and in the FY25 strategic plan.



#### FOCUS AREA 2: SUSTAINABLE GROWTH

Work on the FQHC Pathways project helped cultivate relationships and fostered constructive conversations with potential partners. The team learned about the strategic implications of different pathways and outlined what operational changes would be required of Sonrisas to meet HRSA requirements. This groundwork prepared the organization to make informed decisions going forward.

Fundraising goals were met for revenue targets and Board participation. A tailored stewardship plan was developed and implemented to personalize donor cultivation. More inclusive fundraising practices also targeted staff, patients, and community members.

#### FOCUS AREA 3: PATIENT AND COMMUNITY ENGAGEMENT

A new patient survey system was developed to automatically send a survey link to all patients following their appointment. A patient demographic survey was completed and will be used to extrapolate the overall demographics of Sonrisas' patient population. A demographic survey will be completed annually. Qualtirc's dashboards are being created for the patient visit survey.

The goal to involve patient and community voices evolved over the course of the year, leading to the creation of the Board's Quality Committee. The committee will establish quality metrics with measurable outcomes, providing a process to evaluate and track Sonrisas' quality of care. The Quality Committee will also facilitate the inclusion of patients and community members, allowing for their input in the quality improvement process.

The school screening program exceeded goals for the year, reaching over 3,600 students during the 2023-2024 school year.

Salesforce was selected as the new data management system to be used by the outreach team. The app was configured for the school outreach program, with plans to upload data from the past 5 years and gain longitudinal insights into the program.



FOCUS AREA 1: SONRISAS CULTURE				
GOAL	ACTIVITY	CHAMPIONS	STATUS	TIMELINE
<b>GOAL A:</b> Improve internal collaboration with effective staff feedback mechanism	Define process for Quarterly Pulse Survey		Complete	Q1
	Update survey questions	Justine and	Complete	Q1
	Implement quarterly survey and follow up on results	- Veronica	Complete	Q1-Q4
	Determine if question regarding DEIJ business case should be added to employee survey	Vereined	Complete	Q4
	Meet with Focus Team to plan activities for the year		Complete	Q1
<b>GOAL B:</b> Implement staff-driven culture building activities	Implement fun employee events and activities	Justine and Veronica	Complete	Q1-Q4
	Distribute Sonrisas hoodies to staff	Veronica	Complete	Q2
GOAL C: Provide leadership training to supervisors	Hire leadership coach		Complete	Q1
	Provide group coaching to Sonrisas Supervisors		Complete	Q1-Q4
	Provide 1:1 coaching to Leadership Team	Tracey and Anna	Complete	Q1-Q4
	Survey Leadership Team in October, April and July to track learning progress		Complete	Q1-Q4
	Create plan to develop DEIJ Business Case for Sonrisas		Complete	Q1
	Engage BOD in DEIJ Business Case Development		Complete	Q2-Q3
<b>GOAL D:</b> Create DEIJ Business Case for Sonrisas	Gather feedback from Sonrisas Leadership and staff	Tanya	Complete	Q2-Q3
	Finalize DEIJ Business Case		Complete	Q3-Q4
	Integrate DEIJ Business Case in next Strategic Plan		Complete	Q4



FOCUS AREA 2: SUSTAINABLE GROWTH					
GOAL	ACTIVITY	CHAMPIONS	STATUS	TIMELINE	
GOAL A: Improve patient revenue	Implement FQHC pathways project plan	Tracey and Anna	Complete	Ongoing	
	Renegotiate insurance rates	Hida	Not started	Q4	
	Explore in office dental plan for patients without insurance	Hida	On hold	N/A following 2024 MediCal changes	
GOAL B: Improve financial management processes	Define project plan to update financial management processes		Complete	Q3	
	Update financial management tools	Tracey, Anna, Tina	75%	Q3-Q4	
	Establish quarterly financial review meetings with budget managers		30%	Q2-Q4	
GOAL C: Advance fundraising	Achieve revenue targets for FY 23-24		Complete	Q1-Q4	
	Create, update, and follow stewardship plan to include more personal touches	Spandan	Complete	Q2-Q4	
	Develop inclusive fundraising practices that include staff, patients, and community member		Complete	Q2-Q4	
	Secure 100% give/get participation from board members		Complete	Q3	



FOCUS AREA 3: PATIENT AND COMMUNITY ENGAGEMENT					
GOAL	ACTIVITY	CHAMPIONS	STATUS	TIMELINE	
GOAL A: Implement regular patient survey and feedback	Analyze data from pilot in HMB		Complete	Q1	
	Update survey questions or seek out different tool	Dr. Bonnie and	Complete	Q2	
	Define process for regular data review and analysis		Complete	Q3-Q4	
	Implement survey in HMB and SM	Maura	Complete	Q4	
	Look at patient survey with DEIJ lens		Complete	Q4	
GOAL B: Patient demographic survey	Research established public health processes to sample or get this information from patients.	Maura	Complete	Q3-Q4	
	Utilize qualtrics to roll out patient demographic survey	Maura	Complete	Q4	
<b>GOAL C:</b> Increase capacity of school outreach program for growth	Schedule screenings at new priority schools	Dr. Bonnie	Complete	Q1-Q2	
	Reach out to school coordinators to identify priority students	Dr. Bonnie	Complete	Q1-Q4	
	Test and adopt an outreach data management system to facilitate data collection, case management, and reporting	Dr. Bonnie and Anna	Complete	Q1-Q4	
	Approach HPSM to pilot funding for Community Healthworker funding to partially fund Community Outreach Program manager position	Tracey	Complete	Q4	
	Fundraise for transit van to assist with transporting outreach event supplies	Tracey and Spandan	Complete	Q4	

Goal D on next page...



FOCUS AREA 3: PATIENT AND COMMUNITY ENGAGEMENT					
GOAL	ACTIVITY	CHAMPIONS	STATUS	TIMELINE	
GOAL D: Involve patient and community voice in organizational guidance and decision making	Benchmark and identify best practice community models	Maura	Complete	Q2-Q3	
	Identify proposed Quality Committee Chair and collaborate to bring proposal to BOD		Complete	Q3	
	Secure SDH Board approval to Create Quality Committee		Complete	Q3	
	Develop initial Quality Committee workplan and set initial meeting frequency		Complete	Q3-Q4	
	Analyze community and Sonrisas patient demographic data to guide recruiting		85%	Q4	
	Finalize Quality Committee Charter and Workplan and provide update to SDH Board		Complete	Q4	

## Quality Committee Report

**DATE:** July 16, 2024

**TO:** SDH Board of Directors

**FROM:** Dennis Kneeppel, Committee Chair

Maura LeBaron-Hsieh, Patient Engagement Manager

RE: Quality Committee Update

#### To the Board,

In March 2024, the Sonrisas Board of Directors approved the creation of a Quality Committee to oversee quality and patient safety monitoring and initiatives at Sonrisas Dental Health. Since then, the Committee's core team has moved forward with initial committee work.

#### Key highlights so far:

- Recruiting of Board and Staff committee members is complete, with pre-planning underway for patient committee member recruitment
- Full committee meetings slated to begin this fall
- New patient experience survey system has launched
- We are benchmarking and discussing strategies with like organizations, for example Dientes Community Dental in Santa Cruz County. Discussions include potential quality management dashboards.
- We are continuing to develop and refine our internal QA review process
- We are developing key clinical quality indicators for internal tracking and external reporting

We anticipate providing an in-depth Committee update to the Board at the October Board meeting. Thank you for your ongoing support and guidance.