



# Health Care Services Review Project Committee

## Agenda

San Joaquin County Administration Building  
44 N. San Joaquin Street, Room 146, Stockton, CA 95202  
Wednesday, July 16, 2025  
8:30 a.m.

Watch Live on YouTube: [www.youtube.com/c/sanjoaquincountyca](http://www.youtube.com/c/sanjoaquincountyca)

### Committee Members

Paul Canepa | Steven J. Ding | Sandy Regalo | Brandi Hopkins | Adam Brucker | Ed Kiernan  
Quenny Macedo | Jeff Woltkamp | Genevieve Valentine | Rick Castro | Sam Harlan

### Agenda Items

#### Procedural Items

- |                  |               |
|------------------|---------------|
| 1. Call to Order | Sandy Regalo  |
| 2. Roll Call     | Annette Rivas |

#### Action Items

- |                                        |              |
|----------------------------------------|--------------|
| 3. Approve Minutes from April 16, 2025 | Sandy Regalo |
|----------------------------------------|--------------|

#### Information and Discussion Items

- |                                                          |                     |
|----------------------------------------------------------|---------------------|
| 4. Celebrate Quality Measures                            | Dr. Jonathon Diulio |
| 5. Lodi Access Center Update                             | Genevieve Valentine |
| 6. BeWell Campus Project Update                          | Genevieve Valentine |
| 7. CAO/HCS Oversight & County Alignment Efforts for SJHC | Genevieve Valentine |
| 8. Public Comment                                        | Sandy Regalo        |

#### Committee Comments

#### Closed Session

There are no closed session items scheduled for this date.

#### Adjournment

Next meeting October 15, 2025	Sandy Regalo
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### Other Information

Public comments will be made part of the official record on file. Written public comments are limited to 250 words or less and may be emailed to the Committee at [hcsrcommittee@sjgov.org](mailto:hcsrcommittee@sjgov.org).

*Note: If you need a disability-related modification or accommodation to participate in this meeting, please contact the County Administrator's Office at (209) 468-3203 at least 48 hours prior to the start of the meeting. Gov. Code Section 54954.2(a).*



# Health Care Services Review Project Committee

## Minutes

San Joaquin County  
Health Care Services Review Project Committee  
Minutes of Wednesday, April 16, 2025 8:30 a.m.

### Procedural Items

#### 1. Call to Order

County Administrator Sandy Regalo called the meeting to order at 8:36 a.m.

#### 2. Roll Call

Present:

Mario Gardea, District 1 Supervisor (Alternate)

Steven J. Ding, District 4 Supervisor

Sandy Regalo, County Administrator

Brandi Hopkins, Asst. County Administrator

Adam Brucker, Sr. Deputy County Administrator

Ed Kiernan, County Counsel

Quenny Macedo, Deputy County Counsel

Rick Castro, CEO of San Joaquin General Hospital

Sam Harlan, CFO of San Joaquin General Hospital

Stacy Ferreria, CEO of San Joaquin County Clinics

Jeff Woltkamp, Auditor-Controller

Not Present:

Paul Canepa, District 2 Supervisor

Genevieve Valentine, Interim Director of Health Care  
Services, Behavioral Health Director

### Action Items

#### 3. Approve Minutes from January 15, 2025

Motion to approve the Minutes as listed on the Agenda. Approved.

**RESULT:** ADOPTED [UNANIMOUS]

**MOVER:** Rick Castro, CEO of San Joaquin General Hospital

**SECONDER:** Ed Kiernan, County Counsel

**AYES:** Ding, Regalo, Hopkins, Brucker, Kiernan, Macedo, Castro, Harlan, Ferreria, Woltkamp

**ABSENT:** Canepa, Valentine

**ABSTAIN:** Gardea

### Information and Discussion Items

#### 4. Present Financial Results for County Clinics

San Joaquin County Clinics (SJCC) CEO Stacy Ferreria and SJ Health Controller Rachna Sharma presented financials. The Committee discussed recruitment, retention and position vacancies.

#### 5. Present Financial Results for San Joaquin General Hospital

San Joaquin General Hospital (SJGH) CFO Sam Harlan presented financials. Ms. Harlan and CEO of San Joaquin General Hospital Rick Castro responded to questions from the Committee regarding position vacancies for nurses, Medicare and Medi-Cal patient percentages, and provided an overview of current and future projects for SJGH.

**6. San Joaquin County Healthcare System Update**

Assistant County Administrator Brandi Hopkins provided the Committee with updates on the Management Services Agreement (MSA) with SJGH and CommonSpirit, Co-Applicant Agreement changes, SJ Health Memorandum of Understanding (MOU) redesign after Co-Applicant Agreement approval and the Supplemental Funding/Quality Incentive Program (QIP). Ms. Hopkins reminded the Committee of the mutual goal between Health Care Services, SJ Health, SJGH, and other County Departments of providing quality health care services with a focus on population, community health management and patients.

**7. Public Comment**

There were no public comments.

**Closed Session**

**8. There were no closed session items scheduled for this date.**

**Committee Comments**

There were no comments from the Committee.

**Adjournment**

At 9:44 a.m., County Administrator Regalo adjourned the meeting to July 16, 2025, at 8:30 a.m.



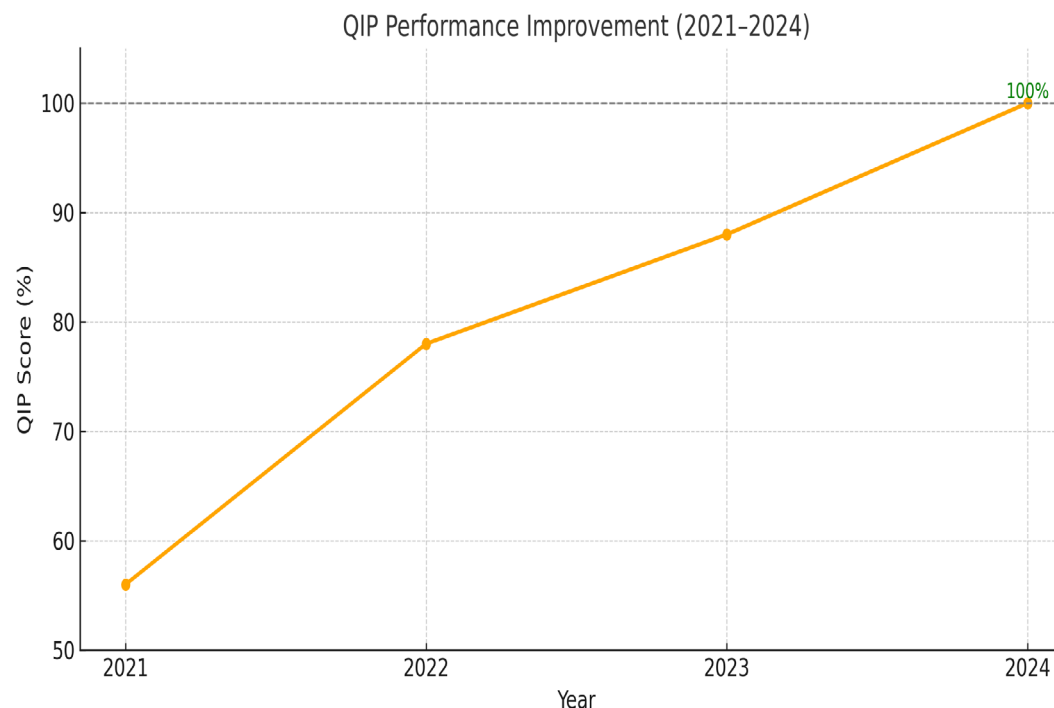
**SJ HEALTH**  
San Joaquin Health Centers

# Quality, Recruitment, and What's Ahead

Jonathon Diulio, MD  
Chief Medical Officer,  
San Joaquin Health Centers

# QIP : A System-Wide Success

- **Preliminary score: 43 out of 40** for 2024
- **\$78 million** in projected quality-linked revenue this year
- **Final audit pending in August 2025**





**SJ HEALTH**  
San Joaquin Health Centers

Dashboards



Outreach & Previsit  
Planning



Standing  
Orders

Gap  
Clinics



# SJ HEALTH

San Joaquin Health Centers

## Standing order for colon cancer screening:

### Policy:

Medical assistants and nurses who are trained in colon cancer screening may order a screening test under the patient's provider. This will occur on patients that fit the eligibility criteria for colon cancer screening. The available tests are Fecal DNA (Cologuard) and Fecal immunochemical test (FIT). Colonoscopies will be excluded from this policy and must be ordered by the provider.

### Purpose:

Colorectal cancer is the third leading cause of cancer death among both men and women in the US. Colorectal cancer screening can lead to early detection and intervention when they are the most curable. The USPSTF recommends screening for men and women aged 45 to 75 years of age.

### Procedure:

1. Population
  - a. Inclusion
    - i. patients aged 45-75 years
      1. Fecal DNA (Cologuard)
        - a. Every three years
      2. Fecal immunochemical test (FIT)
        - a. annually
  - b. Exclusion
    - i. Screening colonoscopy
      1. Every ten years
      2. Refer to provider
        - a. Refer to GI
    - ii. Patients with signs or symptoms of colon cancer
      1. Refer to provider
    - iii. High risk group
      1. Personal history of colon cancer
    - iv. History of abnormal colonoscopy
    - v. Advanced illness, frailty, or short life expectancy
      1. Refer to provider
2. Inform patient they are due for colorectal cancer screening
3. If the patient agrees order a Fecal DNA test (preferred) or FIT under the patient's provider
4. Document reasons why the patient was not given an order
  - a. If the patient refused give the patient education
    - i. Document patient refusal and intervention
5. Document interaction in the patient's chart

Medical Director

Diana  
Printed name

[Signature]  
signature

10/2022

# Continuous recruitment

- Internal Medicine physician (Ambulatory)
  - – started 6/2024 (SJGH Graduate)
- Family Medicine physician (Ambulatory)
  - Two are set to start by end of 07/2025
- Family Nurse Practitioner
  - Two started in 06/2025
  - Another has accepted CJO and has started HR process
- Pediatricians (Hybrid)
  - One set to start 08/25
  - One set to start 11/2025
- Pediatrician (Ambulatory)
  - Set to start 08/2025
- CNM
  - Two started June 2025
- OB/GYN (ambulatory)
  - Set to start 10/2025
- Many more to come



# What's Next

- August audit will finalize our QIP score
- We're actively sharing our best practices with other FQHC's
  - standing orders and gap clinic model
- The biggest success: Culture
  - We're never satisfied
  - It's not about chasing metrics – it's about meaningful impact.
  - Quality is not the goal – it's our standard



# Thank you

Jonathon Diulio

Chief Medical Officer

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