



**Board Meeting
January 21, 2021**

6:30 PM

Teleconference Via Zoom

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Meeting ID: 85491422970

Dial In: 1-669-900-9128

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Board Meeting November 19th, 2020

Minutes

1. **CALL TO ORDER AND ROLL CALL – Chair Taverner** called the meeting to order at **6:37 pm**
 - **Present:** Board Chair Nigel Taverner, Vice Chair Helen Galligan, Board Members: Liz Dodge, Sheryl Young, Clyde Hinshelwood.
 - **Also Present:** CEO Tracey Fecher, CFO Cheryl Fama, Dental Director Dr. Torrey Rothstein, Center Director Pat Kinniburgh, Director of Development Maura LeBaron-Hsieh, Sr. Accountant Tina Wang, Executive Assistant Libby Barnard
 - **Absent:** Larry Cappel, Rick Navarro

[Chair Taverner motioned for an addendum to agenda to include a decision on whether the December board meeting should be cancelled. This motion was seconded by Vice Chair Galligan and approved by roll call]

2. **MISSION MOMENT – Dr. Torrey Rothstein** shared how Sonrisas has weathered the pandemic because of the support from the board, the skeleton crew that has been able to stay on during the shutdown, the support from the Peninsula Health Care District (PHCD) in securing adequate PPE and other efforts from the team. While two employees did contract Covid-19, there has been no workplace spread due to Sonrisas’ policies and procedures. He highlighted that patients are impressed and grateful for the care that Sonrisas is taking to keep patients and staff safe. “We couldn’t be where we are without the financial preparations that were made in advance. [...] It is because we are the type of organization that we are that we can do what we’re doing.” **CEO Fecher** thanked CFO Fama and the support of PHCD for their work to secure PPE. **Chair Taverner** complimented the staff on their success and advised them to be prepared for the next round.
3. **PUBLIC COMMENTS—**No public in attendance
4. **APPROVAL OF BOARD MINUTES:** *Helen Galligan motioned to approve the minutes for the board meeting on October 15th, 2020. The motion was seconded by Director Young and approved by roll call. Ayes: Nigel Taverner, Helen Galligan, Liz Dodge, Clyde Hinshelwood, Sheryl Young.*
5. **REPORTS**
 - **CEO Report – Director Young** asked about the extra revenue received because FQHC visit volume was higher than budget. **CEO Fecher** responded that Sonrisas receives \$290 per visit through the FQHC contract. **Director Hinshelwood** commented on the farmworker program, wondering how the population’s dental needs will be met if Sonrisas’ contract with the county is not renewed. The Sonrisas team will meet with Puente de la Costa Sur and SMMC to discuss how to transition the farmworker patients from Sonrisas’ care. This is an opportunity for the team and board to strategize about the future of Sonrisas’ mobile equipment. CEO Fecher has reached out to Ayudando Latinos a Soñar (ALAS) to talk about a possible partnership. **CEO Fecher** shared that one of the clinical staff is out with COVID-19 and that may cause the team to have to cancel more provider days. **CEO Fecher** noted that several days have had to be cancelled already. **Chair Taverner** asked about Sonrisas’ affordable

scale patient population on the Coastsides to suggest what the demand for services are and whether the demand for senior dental services were being met in that area.

- CEO Fecher and Executive Assistant Libby Barnard will follow up with a report on the patient demographics.
- **CFO Report – CFO Cheryl Fama** reported that YTD patient visit volume is higher than budget. Of the 98 FQHC visits, ten of those were Sonrisas patients migrated of record to FQHC, which increases the organization's revenue per visits. The Sonrisas team has decreased its patient no-show rates. **CFO Fama** requested, with the consent of CEO Fecher, that grants, donations and extra revenue received, be listed below the operating line in the budget to show how much must be raised to cover the business (see Board Packet page 22).
- **Fundraising Report – Maura LeBaron-Hsieh** reported on Sonrisas' fundraising efforts: 26 of the 80 donations that have come in so far have been from new donors. She thanked Director Young for her work with a donor who recently gave \$10,882 from a donor-advised fund. She shared a preview of Sonrisas' FY19-20 annual report, which will be sent out in December. Digital copies will be available and physical copies will be sent out to a targeted group of donors. Postcards will be sent out with a QR code linking to the report. This publication is part of Sonrisas' year-end campaign, Sharing Smiles 2020. **Director Hinshelwood** commented that donors like to see how much of revenue goes to the mission compared to overhead. **Ms. LeBaron-Hsieh** noted that there would be a few more pages with information on donations. **Director Young** recommended sharing information on the sustainability of the organization's business model, noting that Sonrisas has a story and hybrid business model that is appealing to current the donor demographic. **Director Hinshelwood** asked for copies of the Annual Report to share with his network. **Chair Taverner** asked what Sonrisas is planning for Giving Tuesday. **Ms. LeBaron-Hsieh** responded that the report will not be ready at that point, but that Sonrisas would be sharing on social media and via email. **Director Dodge** suggested running Giving Tuesday through Sonrisas' Facebook page. **Ms. LeBaron-Hsieh** reported that Giving Tuesday would be an extension of the overall year-end fundraising campaign. **Director Hinshelwood** offered his CRM expertise as the team continues to develop a system for donor relations.
 - **Director Dodge** and **Ms. LeBaron-Hsieh** introduced year-end peer-to-peer fundraising. They will send a follow-up email with additional information.

[Steve Almes, IT Contractor entered the Zoom room at 7:25]

6. OLD BUSINESS

- **FQHC Contract Update** – Sonrisas had 98 visits, including ten patients who were previously seen under Medi-Cal Dental fee-for-service. Sonrisas' team, led by Center Director Pat Kinniburgh, is working on ensuring that all Medi-Cal Dental patients have a primary care physician and will continue to move eligible patients into the contract from the San Mateo center. This will also take place at the Coastsides center after IT issues are resolved. Contract amendments are almost finalized with the county. Sonrisas staff continue to experience some IT complications related to connecting to the county's server.
- **Additional San Mateo Clinic Operatories** – No update provided. **Chair Taverner** asked for an update on storing the mobile equipment. **Ms. Kinniburgh** responded that the equipment is being used in one of the operatories. It has helped workflow, particularly on pediatric days. **Dr. Rothstein** added that having the mobile equipment has worked as an overflow for simple procedures, but it is not enough for the team to be able to bring in additional providers. It does give insight into what could be achieved with another operatory or two. These rooms would need to be outfitted and set up for other procedures.
 - **CEO Fecher** will prepare a report on this topic and present it at the January

board meeting.

7. NEW BUSINESS

- **Financial Review—Unaudited financials for September '20 – Sr. Accountant Tina Wang** reported that patient visits volume was 27% more than budget. \$65,895 or 1/6 of the total PPP loan amount (\$395,365) was recognized as other income in September. Two new dental assistants were onboarded, bringing salary expenses closer to budget. Sonrisas net income in this month was negative \$46,729, while no cash support from PHCD was requested. This is \$13k better than budget. Sonrisas will apply for full forgiveness of the PPP loan in December. **Chair Taverner** asked for clarification on the true income (loss) for public dental insurance visits (see Board Packet page 18). **CEO Fecher** will look at allocations for public dental insurance overhead to assess whether they are accurately distributed. Ms. Wang took the outreach and fundraising budgets out of direct cost calculations, which reduces the attributable costs of all visits.
 - **Financial Projection Model – CEO Fecher** presented the estimated financial model through January. **Vice Chair Galligan** expressed her appreciation that the board is able to see Sonrisas' rolling financial forecast. **Director Young** asked how staff salaries would be affected by patient visit volume. **CEO Fecher** responded that salary expenses may go down if a staff member must take time off for COVID-19 and is using their emergency sick leave. It was not included as an assumption because it is difficult to predict.
- **Cyber Security** – At the October board meeting, Director Navarro asked that the Sonrisas team present their strategy to combat potential ransomware attacks. **CEO Fecher** presented security recommendations from ZDNet against which to review Sonrisas' security. Sonrisas' IT Consultant **Steve Almes** reviewed a visual representation of the security measures that are in place. The IT committee has taken steps to ensure the safety of Sonrisas' data, such as making it more difficult to roam across Sonrisas' network. **Director Young** asked Mr. Almes to provide an explanation on how our security system compares to other organizations that have been hacked. **Mr. Almes** replied that he does not have insight into specific measures that these organizations have taken. Sonrisas has a triple protection before emails get inside of the network. **CFO Fama** recommended that the team look at the 2020 grand jury report. **Mr. Almes** gave a high-level breakdown of Sonrisas' physical data back-up.
 - **Mr. Almes** will price out an air gap backup, following up from **Director Hinshelwood's** request.
 - In the coming months, Sonrisas' staff will be trained to identify potential security risks and use the right follow-up protocol.
 - **CEO Fecher** and the team will present an estimate for a backup restoration test.
 - A committee will be formed to review Sonrisas' security system every six months.
- **Board Retreat Recap – Chair Taverner** reviewed topics from recent board retreat (See November 12th Board Retreat Minutes for details and follow-up items). **Dr. Rothstein** asked what the original price was to open the San Mateo center. **CFO Fama** responded that it was \$1mil for the renovations, and \$600K for the equipment. **Director Dodge** asked whether the team has a price estimate to operate a new facility on the Coastsides. The team's next step is to conduct a market research analysis of the demand in Half Moon Bay, the cost to run the office and the potential revenue. **Vice Chair Galligan** added that the team should be looking at the county waitlist to help assess the need.

8. SUGGESTED AGENDA ITEMS FOR NEXT MEETING – Chair Taverner

- **Cancelling the December Board Meeting** — **Director Young** asked if there are any items that need approval in December. Sonrisas will need a new compressor at the

San Mateo center before the January meeting. This is a capital expense, not a budgeted expense. **Director Dodge** asked whether the team anticipates stricter COVID-19 guidelines that would affect Sonrisas. Dentistry is deemed an essential service but, if that changes, the board can call an emergency meeting. **CFO Fama** commented that if the compressor is an essential piece of equipment, the board chair can add it as an emergency item to this agenda for approval.

- **Emergency Agenda Item—Chair Taverner** motioned to add an action item to the agenda to approve the purchase of a new compressor. The motion was seconded by **Director Dodge**, and unanimously approved by the roll call. Ayes: Nigel Taverner, Helen Galligan, Liz Dodge, Clyde Hinshelwood, Sheryl Young.
- **Chair Taverner** motioned that, subject to approval from the Board Chair, the board approves the replacement of the compressor at the San Mateo center not to exceed \$15K. The motion was seconded by **Director Dodge**, and unanimously approved by the roll call. Ayes: Nigel Taverner, Helen Galligan, Liz Dodge, Clyde Hinshelwood, Sheryl Young.
- **FQHC Contract Renewal—CFO Fama** suggested that if CEO Fecher has already presented the amendments to the board, the December meeting can be cancelled. The board determined that CEO Fecher has the authority to sign the contract amendment for the FQHC program without board approval. The board can call an emergency meeting if other amendments need to be discussed.
- **Vice Chair Galligan** motioned that the board cancel the December meeting. The motion was seconded by **Chair Taverner** and unanimously approved by the roll call. Ayes: Nigel Taverner, Helen Galligan, Liz Dodge, Clyde Hinshelwood, Sheryl Young.

9. Meeting was adjourned at **8:52 pm**.



Board Retreat

November 12th, 2020

Minutes

1. **CALL TO ORDER AND ROLL CALL** **Chair Taverner** called the meeting to order at **1:03 pm**.
 - **Present:** Board Chair Nigel Taverner, Vice Chair Helen Galligan, Board Members: Larry Cappel, Sheryl Young.
 - **Also Present:** CEO Tracey Fecher, CFO Cheryl Fama, Director of Development Maura LeBaron-Hsieh, Executive Assistant Libby Barnard

2. **MISSION MOMENT – Maura LeBaron-Hsieh** shared a video of Sonrisas’ recent Drive-Up Dental Screening on October 24th, organized by Dr. Bonnie Jue and the outreach team. Parents of participants were grateful that this screening was scheduled on the weekend so that they would not have to bring their children during working hours. **CEO Fecher** added that Dr. Jue was recently chosen as KNBR Radio’s Forever Young Hero of the Week and Steve Young’s Forever Young Foundation. **Chair Taverner** commended the Sonrisas team for their work in the community.

3. **PUBLIC COMMENTS** — No public in attendance.

4. **BOARD EFFECTIVENESS**
 - **Board Responsibilities - Director Young** presented an overview of the role of Sonrisas’ board, highlighting that, this past year, Sonrisas focused on responsiveness, transparency and accountability regarding Covid-19.
 - **Response to Unexpected Challenges:**
 - **COVID-19 Mitigation** – Sonrisas pivoted fast when the pandemic hit San Mateo County, battling through challenges in procuring PPE and workflow changes. The team and board responded by developing a financial model and holding additional meetings. The board demonstrated continued care of the Sonrisas team by agreeing to pay staff through April 10th, in the early days of the pandemic. This gave staff time to adjust to the unsettling situation and have some sense of security during this uncertain time. Sonrisas continues to work with the County to get clarity on COVID-19 protocols and best practices. **Vice Chair Galligan** commented that Sonrisas pivoted as well as anyone could have expected, and the extra safety measures put in place have worked out well. **Director Cappel** commented that he appreciated the communication and transparency of the leadership team to staff, board members and the community. **Director Young** added that Sonrisas’ track record in preparing for the beginning of the pandemic will help guide the team in making decisions over the next few months, which could be challenging as COVID-19 surges. Dentistry is an essential business and would not be shut down if the county went into another lockdown. **Chair Taverner** thanked the board for their expertise in guiding Sonrisas during this time, as well as CFO Fama and the Peninsula Health Care District for their diligence in helping to secure PPE. Director of Development, Maura LeBaron-Hsieh and Executive Assistant Libby Barnard thanked the board for their support. The board agreed that Sonrisas needs to be ready for another surge of cases.



- **Cyber Security** – At the October board meeting, Director Navarro asked the Sonrisas team to report on Sonrisas’ cyber security, following ransomware attacks on UCSF and other healthcare providers. This will be done at the November board meeting. **CEO Fecher** reported that she and the Dental Director are working with the IT Consultant to assess the organization’s cyber security. The team has reviewed protocols that the IT Consultant has in place already and will be implementing other precautions. **Director Young** asked what other alternatives are available besides paying ransom if an attack occurred. **CEO Fecher** responded that law enforcement recommends against paying the ransom. It is important to have a plan to respond to ransomware attacks and to ensure that back-ups to the cloud are current.
 - **Follow-Up items:**
 - **CEO Fecher** will schedule an IT/Security Risk Management meeting twice a year with board involvement.
 - The IT team will train staff to identify phishing emails and scams.
 - The team should draft communications to interested parties if there is a data breach.
 - **CEO Fecher** will communicate Sonrisas’ insurance cyber-attack coverage to the IT Consultant.

- **Anti-Racism** – Sonrisas’ mission has been providing quality dental health care to marginalized communities for nearly 20 years, employing bilingual clinical staff to serve its patients. 70% of Sonrisas’ patient demographic is non-white and are affected by systemic racism. As other non-profits have responded to current events regarding racism, Sonrisas could send a message of unity to patients. **Director Cappel** commented that racism permeates society and that it is important to learn about the cultures of the people we serve. He suggested having a staff training initiative. **Director Young** highlighted the importance of creating a work culture where racism can be called out and changed. Echoing Director Cappel’s idea, **Director Galligan** suggested a satisfaction survey of staff and patients to make sure Sonrisas is acting in a culturally responsive way. She also expressed interest in cultural sensitivity training for the board. **Director Young** shared that the Board Nomination Committee has been interested in but struggling to find someone from the Latinx community to join Sonrisas’ board. She asked for suggestions on a different approach. **CFO Fama** asked the board to consider what problem Sonrisas is trying to solve. She noted the power of inclusion and the importance of getting the community involved to measure the organization’s effectiveness. Realizing that Sonrisas cannot change all aspects of racism, **CFO Fama** recommended that the team focus on how the organization is operating and identify the role of the board and Sonrisas team in anti-racism efforts. **CEO Fecher** posed the idea of a patient-advisory board. **Ms. LeBaron-Hsieh** noted that Sonrisas exists because of systemic racism and suggested that the organization has a role in advocacy.
 - **Follow-up Items**
 - A survey will be sent to staff and patients to gain insight into how the organization is perceived.
 - The leadership team will create a policy statement that will later be approved by the board.
 - **Ms. Barnard** will explore options for an organizational assessment of our policies and procedures to measure if Sonrisas is “walking the talk.”



5. CAPITAL CAMPAIGN

- **Potential Project: New Coastside Center – CEO Fecher** outlined some of the reasons for considering a new Coastside clinic. Currently there is no separation between the reception area and the clinic, which is an infection control concern. 85% of Sonrisas’ Coastside payer mix is low income, with 65% being Medi-Cal Dental. A larger, more modern clinic could appeal to new patients with private insurance. Sonrisas Coastside does not currently have a resident pediatric dentist, which requires two chairs. There is only one available chair at the current office, since the other two chairs are occupied by the resident provider and supervising provider. Moving to a larger center with more chairs would allow Sonrisas to schedule its patients tighter. She added that it is both expensive and difficult to improve ventilation in the current center. Lastly, there is an opportunity for an FQHC expansion to the Coastside, which would increase Sonrisas’ capacity. **Director Young** asked what the need for dental services is on the Coastside. **CEO Fecher** responded that if the board agrees that this is a direction they want to pursue, then the team would develop a business case, as part of the prework for this project.
 - **Solutions:** CEO Fecher presented possible solutions including purchasing a practice from a retiring dentist, renting and building out a 2000 square foot dental office and/or operating out of the SMMC Coastside Dental Clinic. The team would only move forward with a facility that was suitable for a dental office and part of the due diligence would be to have an HVAC expert inspect the location.
 - **Director Cappel** asked — on what basis do dental offices sell? Practices are sold based on the number of charts and other factors. He also inquired whether it would be possible to share an office with another practice and operate as a PM care center.
 - **Follow-Up:**
 - The board recommended that the Sonrisas team find out as much as possible about the demand on the Coastside, especially for geriatric dentistry.
 - **Director Young** also recommended reaching out to Joe Cotchett, who owns property on the Coastside.
- **Capital Campaign – CEO Fecher** reported that Sonrisas is not yet ready for a capital campaign not least because the development team is still working on building the organization’s individual major donor base. The team is planning on bringing in a consultant to help in this process. There is a need to build internal education for staff and board members on how to create effective capital campaigns. **Director Young** mentioned the group, Magnify Community, which has helped attract major donors to invest in San Mateo and Santa Clara County-based organizations. Since Covid-19, philanthropists have donated more than usual. Social justice and equity have been deciding factors for major donors. Older donors are looking for missions that are sustainable to leave a lasting impact. This is a good time for a capital campaign that is well-defined and targets low-income, underserved individuals. Sonrisas should be able to attract donors that have never given to the organization but would be interested in the mission. **Ms. LeBaron-Hsieh** commented that the campaign would be effective and relevant if it can be tied back to Sonrisas’ mission to address health care disparities and increase access to care. **CEO Fecher** added that in order to be successful, the team needs to build a capital



campaign into the fundraising budget and the team will need a capital campaign committee.

- **Follow-up**
 - **Director Young** will connect CEO Fecher with her contact at Magnify Community.
 - **CEO Fecher** will survey a select group of Dental Coalition individuals to discuss Coastside dental needs.
 - **CEO Fecher** will start a workgroup to discuss the intersection of the following topics: a business case for senior market, Sonrisas' 20th Anniversary in 2021 and the capital campaign.

6. **Chair Taverner** adjourned the meeting at **4:06pm**.



Emergency Board Meeting December 8th, 2020; 4:00 PM

MINUTES

1. **CALL TO ORDER AND ROLL CALL** – Vice Chair Galligan called the meeting to order at **4:03 pm**
 - **Present:** Board Chair Nigel Taverner, Vice Chair Helen Galligan, Board Members: Rick Navarro, Larry Cappel, Liz Dodge, Sheryl Young, Clyde Hinshelwood.
 - **Also Present:** CEO Tracey Fecher, CFO Cheryl Fama, Center Director Pat Kinniburgh, Executive Assistant Libby Barnard

[Chair Taverner entered the Zoom room at **4:03**]

2. PUBLIC COMMENTS—No Public in Attendance
3. NEW BUSINESS
 - **Replacement of Equipment at Coastside Clinic, Action Requested** – Three pieces of equipment need to be replaced at the Coastside clinic. The Sonrisas team is requesting approval for the emergency expenditure of up to \$48K. Sonrisas' internal controls state that any unbudgeted expense over \$5k needs two bids and Board approval. The team is asking for approval now so that they can act quickly once the second bid comes through. If approved, the equipment that is purchased will be something that can be moved into a new facility.
 - One of the operatory chairs is no longer operational. Because of this, Sonrisas has lost 12 hygiene visits per week and Sonrisas is unable to add other providers on non-hygiene days.
 - The vacuum system cannot keep up with the COVID-19 related increase in high-speed suction required. Patterson, who maintains Sonrisas' equipment, has recommended an upgrade.
 - Nitrous System—The team is concerned about the safety and reliability of the nitrous system.
 - **Discussion: Director Navarro** recommended getting a larger holding tank for the nitrous system to help save money in the long run. **Vice Chair Galligan** asked why the replacement of all three pieces of equipment could not have been planned for. **CEO Fecher** explained that the vacuum replacement is COVID-19-related. Justine Howard, Sonrisas' equipment specialist, returned from maternity leave in October and she identified that the vacuum system was struggling. Ms. Kinniburgh explained that a third suction has been added to minimize aerosol production, overloading the existing 20-year-old system. The chair that is now inoperable was repaired several times, but recently became irreparable because replacement parts are no longer available. Issues with the nitrous system were discovered in the last four weeks when the team had a repair person evaluate the system. **Vice Chair Galligan** recommended that Sonrisas' systems and equipment are evaluated regularly and that the board is given advance notice so that the expense can be budgeted. **CEO Fecher** is planning on creating a capital budget for dental equipment, based on their forecasted lifetime. The same will be done for IT equipment. This repair will reduce Sonrisas' cash position, but funds will be moved from the \$200,000 Merrill Lynch investment account, which is currently earmarked for Coastside capital spending. **CEO Fecher** clarified to the board that the vacuum system is used to reduce the amount of aerosol emissions. **Chair Taverner** asked how soon these replacements can be made. The team would like to replace the chair with a mobile chair that is currently not being used. **Director Cappel** asked whether the team would have an opportunity to use the mobile chair soon for other off-site programs and whether this is the best use for that resource. The Farmworker Contract is not being renewed and that only needs one chair. In addition, the company that made this mobile chair is no longer in business and some of its mobile components are no longer available.

- **Director Cappel** motioned to approve the replacement of the three pieces of equipment listed above at the Coastside Clinic not to exceed \$48K. The motion was seconded by **Rick Navarro** and unanimously approved by roll call.
4. **UPDATE ON COVID-19 STATUS – Chair Taverner** commented that the San Mateo Health Officer, Scott Morrow, has received criticism for not enacting more stringent protocols in the recent wave of state-wide lockdowns. **CEO Fecher** recommended Scott Morrow's well-written memo about on this position on this item. Dentistry is exempt in shutdown regulations for businesses in San Mateo County. Vaccinations will begin in eight days from this meeting, though there is not a plan for tier three, which includes dentistry. Sonrisas will be able to ask the SMMC team for updates as the vaccination plan in San Mateo County unfolds. Sonrisas' administrative staff are all being fitted for surgical respirators to mitigate the spread of the virus and the need for anyone to self-quarantine if another staff member gets COVID-19. No new cases have been reported among staff, ten days out from Thanksgiving holiday.
 5. **SONRISAS JOINING AARP LAWSUIT, Action Requested –** Dr. Bonnie Jue was approached by a lawyer from AARP, who will be suing the federal government, the Center for Medicaid, and Medicare Services (CMS), over the reduced reimbursement rate for perio-maintenance, particularly for seniors in nursing homes. After consulting Joseph Saveri Law (a specialist litigation firm) and discussions with the AARP attorney, the board chair and CEO recommend Sonrisas join the lawsuit (See CEO Memo pg. 2-3). **Director Young** asked for more time to review the case. **CFO Fama** offered caution since the Sonrisas name and its board members will be connected to the litigation. **Director Cappel** asked who else is involved in the lawsuit. **CEO Fecher** responded that the lawsuit includes several hygienists in alternative practice that practice at nursing homes.
 - The board of directors decided that more time was needed to consider Sonrisas' involvement in this lawsuit. **CEO Fecher** will send related documents to board members for review and an additional consultation will take place with another litigation firm. This item will be added to the January board meeting.
 6. The meeting was adjourned at **4:45pm**.





DATE: January 18, 2021

TO: SDH Board of Directors

FROM: Tracey Fecher, CEO

RE: CEO Monthly Report

1. December Patient Visit Volume:

- December visit volume was 82 visits ahead of budget and 38 visits ahead of what was forecast by the team. Actual was ahead of forecast because providers the amount forecast and and the no-show rate was lower than forecast for the San Mateo center. Dr. Rothstein also held a screening day for FQHC patients that was planned after the forecast was completed.
- An analysis of visit volume for the second quarter of FY21 shows that FQHC visit percentage has increased, which has a positive impact on net income. Monitoring the percentage of affordable plan and private pay patient visits is critical, since a drop in these types of visits can impact net income. The team is calling all affordable scale and private pay patients that are due for their recalls to encourage them to come into the clinic.

Q2: October - December

	Budget	Forecast	Actual	Actual vs. Budget	% of Actual Visits	% Budgeted
Comm/PPO	565	-	712	147	28%	25%
Private Pay	75	-	52	(23)	2%	3%
Medi-Cal Dental	1,255	-	1,261	6	50%	53%
Affordable Plan	182	-	160	(22)	6%	7%
Farmworker	84	-	57	(27)	2%	3%
FQHC	203	-	273	70	11%	9%
Access to Care Subtotal	1,319	-	1,751	337	70%	71%
Total Visits	1,811	2,332	2,515	464		

- The forecast for Q2 was off by 8% to actuals. The team reviewed our forecast modeling for accuracy. We discovered in Q2 that that no-show rate was better than the adjusted forecast. Providers also added days to meet patient demand. Dr. Leri, a pediatric dentist, did a day of cleanings for children in November to catch up on appointments cancelled during the shutdown. As mentioned previously, Dr. Torrey added a high volume FQHC patient assessment day in December. With the additional days and adjusting the no-show rate, the forecast tool was close to actuals.

- To assess the impact of COVID-19 on the clinic visits, the team did a visit volume analysis of FY20 compared to FY21 for July to November.

FY20-FY21 July to November Comparison

	Visits	Patient Net Revenue	Patient Rev/Visit	Direct Expenses *	Direct Exp. / Visit	Net Income	Net Income/Visit
FY 20	4729	\$746,202	\$158	\$826,790	\$175	\$41,694	\$8.82
FY 21	3957	\$696,066	\$176	\$914,489	\$231	(\$68,136)	(\$17.22)

* excluding in-kind donations

- The budget for FY21 assumed that visit volume would be at pre-COVID-19 levels for January to June 2021. In Q2, the clinics averaged 838 visits per month and the budgeted average for Q3 is 1076 visits per month. Our forecast shows an average of 900 visits per month in the third quarter. The team is reviewing options to add providers and improve the number of patients the hygienists can see each day to make up for the anticipated gap in visit volume.
2. Clinic Operations:
- All Sonrisas staff have been offered the COVID-19 vaccine either through another dental office position, their primary care provider or a San Mateo County mass vaccination clinic held the week of January 11th. Staff are still reporting to HR receiving the vaccine last week; but it appears that a high number of staff have received their first dose of the vaccine. One staff reported receiving their second dose already.
 - Sonrisas holds a contract with Enviromerica for HIPPA and OSHA compliance as well as medical waste collection that expires in June. The team is talking to several vendors during the renewal process to review services and the cost of the contract.
 - The team is reassessing the usage of ultrasonic scaling equipment in the clinic. We removed the ultrasonic scaler at the beginning of the pandemic due to its production of aerosols and the fact that there was a safer alternative (hand scaling) that produced a fraction of the aerosols. A Cavitron removes calculus deposits during hygiene appointments. The appointment can be quicker and the hygienist's work more efficient with less stress on their wrists. At the beginning of the pandemic many unverified/unstudied products came out to mitigate aerosol risk. One product was an extra-oral suction device that claims to capture aerosols escaping the patient's mouth to almost zero and then filter the air before releasing it back into the room. Studies of its efficacy at reducing risk of spreading COVID-19 are still not available, however at minimum they filter the immediate air from the patient's mouth at a higher level than our current in-room HEPA filtration units as well as our HVAC systems. With herd immunity likely a year away, the team wants to bring back equipment that can control periodontal disease for our patients and reduce staff wrist strain. The extra-oral suction device will make staff more comfortable performing the necessary procedures with a Cavitron. Sonrisas' dental director recommends purchasing one unit at \$2600 to evaluate its use in our clinics. If it is a good fit, then we would purchase up to 10 additional units with board approval. We will update the board on progress with adding the Cavitron back to the clinics.
 - The new chair for the Coastside office has been ordered and will be installed in February. The team is working on the order of the vacuum and nitrous system.
3. Workforce COVID-19 Testing:
- The team continues to be tested every other week for COVID-19. Our testing provider, Curative, was reported in the news to have a higher-than-expected false negative test results. News reports indicated that how tests were being collected could be part of the issue. Our team has reviewed our testing protocol and staff have been reminded of what they need to do to help ensure the most accurate test possible.



4. As discussed at the board retreat in November, the Coastside office needs improvements, such as paint, new flooring and bathroom upgrades. The team is meeting with Cobe Construction to get a quote for upgrades that must be done, as well as additional work that would improve the clinic. We will also consider HVAC improvements, which may be limited for that building. A full report and recommendations will be given to the board in February or March for discussion about when and if these upgrades should be completed.
 - At the November board meeting, a question was asked about Coastside patient demographics and in particular, the number of seniors served. Of the 858 unique patients at the center, 152 seen in 2020 were 62+, which is 17% of all Coastside patients. All seniors utilized the Access to Care program. (70% Medi-Cal Dental, 29% Affordable Scale with 45% Discount, 1% Affordable Scale with 30% Discount)
5. As the farmworker contract draws to its end in June, a letter informing the patients has been drafted and will be shared with SMMC and Puente for feedback before it goes out to the patients. Patients can choose to stay at Sonrisas with either Medi-Cal Dental or the Affordable Scale plan. The team is discussing other ways to engage and provide services in the Pescadero community. Sonrisas Dental Health has been providing oral health education and care there since the early 2000s.
6. At this time there are no indications that dental services will be shut down in San Mateo County due to the pandemic. Dr. Bonnie Jue reports that UCLA shut down their dental clinics because of the dire situation with hospital capacity in their geography to keep people from leaving their homes. We will continue to monitor local, state and national trends.
7. In the November board meeting, a presentation was given on Cyber Security. The team is planning to test recovery of Sonrisas' systems from backup data sent from Sonrisas' off-site data backup storage provider in February.
8. The Health Plan of San Mateo (HPSM) continues to work on the Dental Integration Pilot with at timeline of beginning the program in place January 2022. Sonrisas' dental director attends dental steering committee meetings at HPSM.
9. Financial Trends: On Monday, January 18th, Sonrisas' current cash position was \$1,145,160, which includes the \$395K PPP.





DATE: January 21,2021
TO: SDH Board of Directors
FROM: Cheryl Fama, CFO
RE: CFO Report

1. Financial Performance YTD July-November 2020:

Performance YTD during these unprecedented pandemic times reflects leadership, team effort, and SDH's community reputation for commitment to mission and quality care. Of special note, this performance **does not include \$275K** of budgeted PHCD financial support.

- a) Visit volume is over budget by 534 visits or 33%.
- b) Net Revenue is over budget by \$117,245 or 21%
- c) Total Expense is \$81,400 or 5.5% under budget
- d) Resulting in a Net Income of **<\$68K>** which is \$243.3K better than budget or 78%; however, \$109.4K worse than PY because available PHCD funding was not drawn down. If budgeted amount were taken, Net Income would be a positive \$206K.

2. FY 2020 Audit:

SDH is considered a "component unit" of the Peninsula Health Care District (PHCD) by the Governmental Accounting Standards Board (GASB) and therefore SDH's statement of financials and internal controls were audited as a part of the PHCD annual audit. I am pleased to report that the finding was "a clean audit" and there were no Management Recommendations.

3. Internal Controls Policy:

It is good practice to annually review an organization's Internal Controls Policy and after the annual audit is an appropriate time as it affords the opportunity to incorporate any findings or suggestions offered by the auditors. SDH kicked off its new fiscal year with the new accounting system which will require revisions to the Policy. Management review and revisions of the Policy are underway and will be brought to the Board for approval at its February Board meeting.

4. Auditor Suggestions:

- a) **Remote Deposit:** SDH had remote deposit capability prior to this recommendation; CEO Fecher has recently expanded authorization to further ensure timely deposits.
- b) **Positive Pay:** This is an advanced, web-based security tool offered by Boston Private Bank that can help mitigate check and checking account fraud to prevent financial losses. This service reconciles the checks written to the checks processed in a timely manner to ensure that amounts match, and no additional fraudulent checks were processed. This additional security was recommended by the Auditor to both organizations and, recently, recommended to PHCD by its Boston Private Banking Relationship Officer as additional security following fraudulent activity on the PHCD account. SDH Management is currently reviewing the program and any impacts on the current accounting workflow. Boston has agreed to waive the \$40/month fee.

5. ADP 401K Plan Seniority Issue:

It was recently brought to our attention that work seniority for three SDH employees was not transferred when their Apple Tree Dental (ATD) 401K accounts transitioned to SDH 401K accounts in 2017. The agreement with Apple Tree Dental Administration and ADP was seniority would transfer and employees would not be "harmed" by the transition. I reached out to the CFO at ATD with whom I worked to make the transition and she responded promptly and helpfully. CEO Fecher and HR Consultant Emily Burriss have been connected with appropriate ATD management to restore the correct seniority.





DATE: January 18, 2021
TO: SDH Board of Directors
FROM: Maura LeBaron-Hsieh, MPH, Director of Development
RE: **Development Update**

In late December and early January, the SDH Development Team has continued distributing our FY19-20 SDH Annual Report, bringing our year-end Sharing Smiles Campaign to fruition. The FY19-20 Annual Report has proven to be an excellent tool for outreach to new contacts as well as serving as a thank you to our generous grant funders.

We now turn our focus to Spring 2021 fundraising endeavors: participating in Coastside Gives in May, as well as hosting our 20th Anniversary Celebration and Fundraising Event in June.

Please see the attached Fundraising Report for visual overview of our progress toward our annual fundraising goals.

1. Individual Donations

- As of Dec 31st, we have raised \$35,641 in donations, event funds, and sponsorships (35% of annual goal)
- Our Sharing Smiles year-end fundraising campaign, paired with our annual report, has so far raised \$6,498 (approximately 65% of our \$10,000 target). Donations, particularly those via donor-advised funds, continue to arrive. Thank you to all Board members who have contributed to our Sharing Smiles Campaign!

2. Grant-seeking

- Sonrisas is currently on track to exceed our budget goal for grant awards during FY20-21. Please see attached Fundraising Report for an overview of our current progress.
- In support of our extensive service to their residents through Access to Care, Sequoia Healthcare District has extended an MOU to Sonrisas to provide up to \$60,000 per quarter during FY20-21 to fund Access to Care for SHD residents. At the end of each quarter, Sonrisas will invoice SDH for the uncompensated cost of care during that quarter, up to \$60,000 per quarter. Quarter 1 totaled \$58,000 and is reflected as an awarded grant in this month's reports.
- Sonrisas is currently in consideration for 4 grant proposals and 1 LOI.

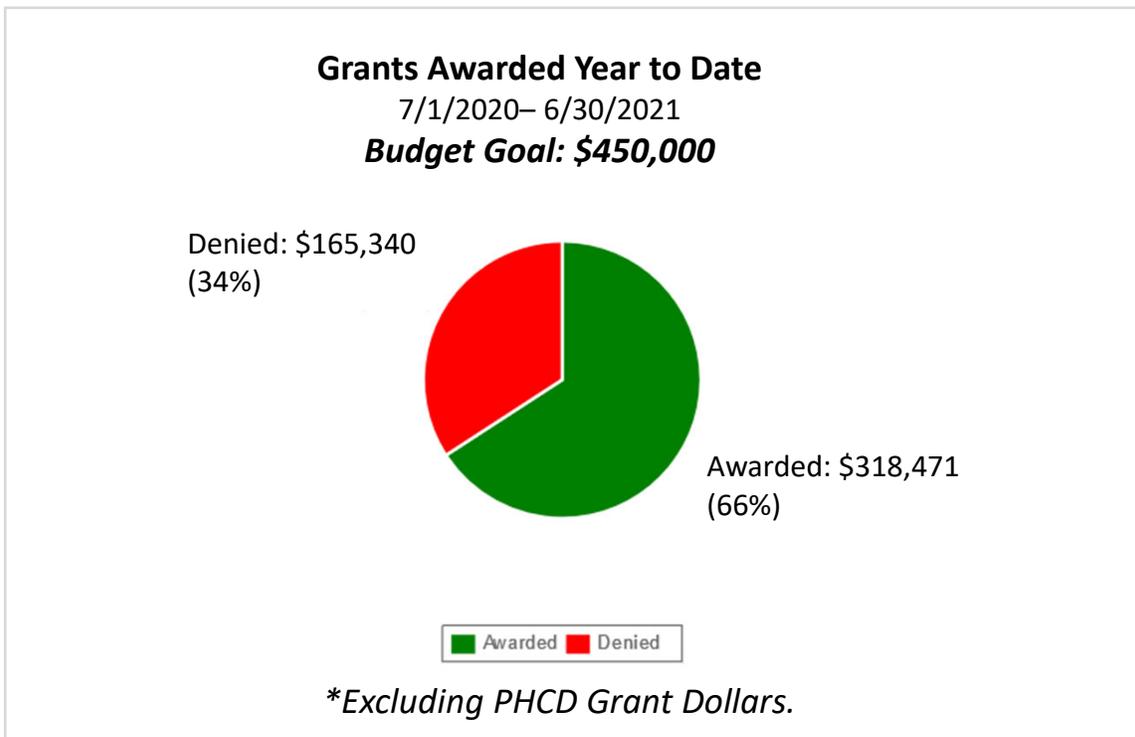
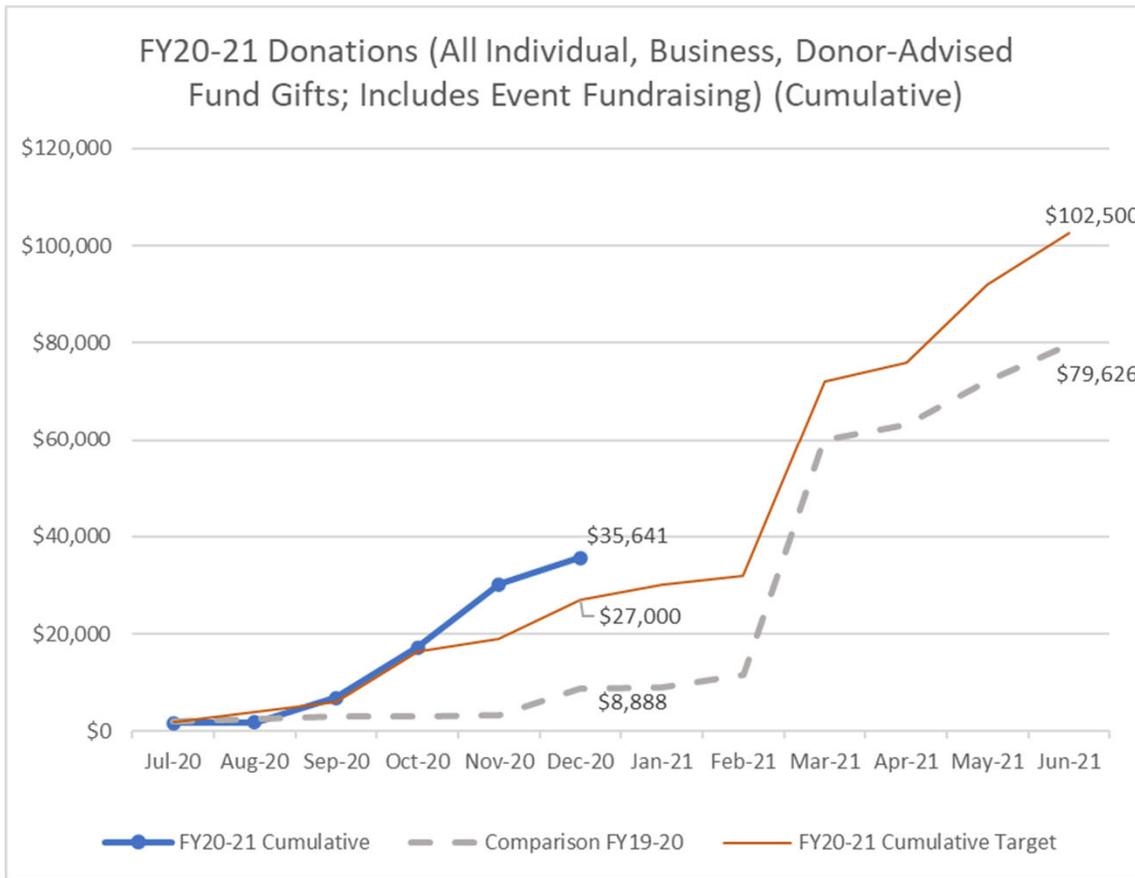
3. SDH Donor Network and Relationships

- Key activities of the Donor Relations Team this month:
 - Outreach with all major donors to share our annual report and Sharing Smiles campaign
 - Cultivating new leads to develop relationships with key donors and with contacts who are connectors to the philanthropic community.



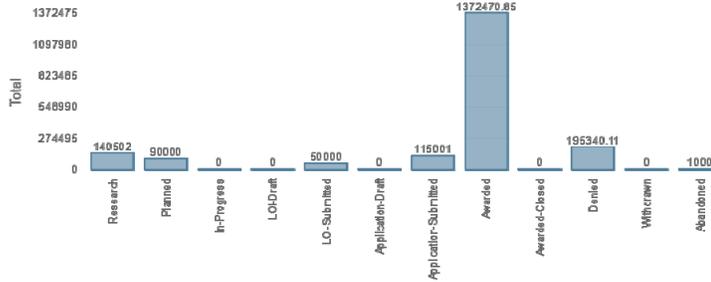
SDH Fundraising Report

Jan 18 2021



Opportunities By Status

3/1/2020 - 6/30/2021



Funder	Funding Opportunity	Funding Category	Deadline	Amount Requested	Amount Awarded	Status
Sunlight Giving	FY20-21 Sunlight Giving Grant	Access to Care, General Operations	1/31/2020	\$50,000	\$50,000	Awarded
The Palo Alto Community Fund	2020 Palo Alto Community Foundation Grant	Access to Care	1/31/2020	\$10,000	\$0	Denied
Atkinson Foundation	2020 Atkinson Grant	Seniors, General Operations, Covid 19	2/1/2020	\$10,000	\$10,000	Awarded
Mills Peninsula Hospital (Sutter Health)	2020 RFP	Access to Care, School Screenings	3/20/2020	\$20,000	\$20,000	Awarded
THE CALIFORNIA WELLNESS FOUNDATION	2020 CA Wellness Covid Relief	Covid 19	3/27/2020	\$10,000	\$10,000	Awarded
Delta Dental Community Foundation	2020 Covid 19 Relief Grant	General Operations, Covid 19	4/10/2020	\$20,000	\$5,000	Awarded
Silicon Valley Community Foundation	FY20 SVCF Bay Area Nonprofit Relief Fund	General Operations, Covid 19	4/22/2020	\$20,000	\$20,000	Awarded
Lucile Salter Packard Childrens Hospital at Stanford	FY19-20 LPCH Grant COVID-19 Expansion	School Screenings, Covid 19, Access to Care Children	5/5/2020	\$10,000	\$10,000	Awarded
US Small Business Administration	2020 SBA COVID-19 Relief EIDL Grant	General Operations, Covid 19	5/5/2020	\$10,000	\$10,000	Awarded
San Mateo County Strong Fund	2020 SMC Strong	Covid 19	5/11/2020	\$20,000	\$0	Denied
Oral Health Foundation of the Pierre Fauchard Academy	2020 RFP	Access to Care	5/19/2020	\$10,000	\$0	Denied
Sunlight Giving	FY20-21 Sunlight Giving Grant	General Operations, Covid 19	6/1/2020	\$0	\$30,000	Awarded
Peninsula Health Care District	FY 20 PHCD 3-Year Grant, Year 1	Access to Care, General Operations	6/1/2020	\$900,000	\$900,000	Awarded
City of Half Moon Bay	FY20-21 CSFA Grant	General Operations, Covid 19, Materials and Supplies	6/16/2020	\$10,000	\$20,000	Awarded
US Health and Human Services Division	HHS Medicaid Grant	General Operations, Covid 19	7/16/2020	\$34,616	\$34,616	Awarded
Bothin Foundation	FY20-21 Bothin Foundation Grant	Capital Project	7/17/2020	\$30,340	\$0	Denied
Stanford Health Care	FY20-21 COVID-19 Relief Fund Request	Covid 19	7/21/2020	\$10,000	\$13,354	Awarded
Sidney Stern Memorial Trust	FY20-21 Grant Application	General Operations	7/31/2020	\$5,000	\$0	Denied
Dignity Health-Sequoia Hospital	2021 Dignity Health Grant	Seniors	7/31/2020	\$20,000	\$0	Denied
William G Irwin Charity Foundation	2020 William G Irwin Charity Foundation Grant	Capital Project	8/14/2020	\$30,000		Application-Submitted
Lucile Salter Packard Childrens Hospital at Stanford	FY 20-21 LPCH Grant	School Screenings, Access to Care Children	8/14/2020	\$40,000	\$40,000	Awarded
CARL GELLERT AND CELIA BERTA GELLERT FOUNDATION	2020 Gellert Foundation Grant	Capital Project	8/14/2020	\$30,000	\$0	Denied
Stanford Health Care	FY 20-21 Stanford Grant	Access to Care	8/21/2020	\$61,000	\$61,000	Awarded
Kaiser Permanente Community Health	2021 Kaiser Community Grant	Access to Care	9/16/2020	\$40,000	\$40,000	Awarded
American Academy of Pediatric Dentistry	FY 20-21 AAPD Grant	School Screenings, Access to Care Children	9/18/2020	\$20,000	\$0	Denied
The San Bruno Community Foundation	2021 San Bruno Community Foundation Grant	School Screenings, Access to Care Children	9/30/2020	\$7,500	\$7,500	Awarded
Henry Schein Cares Foundation Inc	2021 Henry Schein Grant	Materials and Supplies	9/30/2020	\$50,000	TBD	Awarded
Touchpoint Foundation	FY20-21 TouchPoint Foundation Grant	Access to Care, Seniors	10/1/2020	\$7,500	\$3,000	Awarded
Sequoia Healthcare District	FY 20-21 Sequoia Healthcare District Q1 Grant	Access to Care	10/15/2020	\$58,000	\$58,000	Awarded
Delta Dental Community Foundation	2020 Access to Care Unrestricted Grant	Access to Care, General Operations, Covid 19	10/28/2020	\$1	\$10,000	Awarded
ARCHSTONE FOUNDATION	2021 Access to Care and Community Referral Network - Aging Populations	Access to Care, Seniors, Outreach	11/16/2020	\$50,000	\$0	Denied
San Mateo County Strong Fund	2020 SMC Strong - Round 2	Covid 19	11/25/2020	\$20,000	\$20,000	Awarded
Patterson Foundation	2021 Patterson Application	School Screenings, Access to Care Children	1/8/2021	\$35,000		Application-Submitted
Sobrato Family Foundation	2021-2022 Sobrato Essential Human Services Grant	Access to Care, General Operations, Capital Project	1/15/2021	\$50,000		LOI-Submitted
Sequoia Healthcare District	FY 20-21 Sequoia Healthcare District Q2 Grant	Access to Care	1/31/2021	up to \$60,000		Planned
Sunlight Giving	2021-2022 Sunlight Giving Grant	General Operations, Access to Care Children, Capital Project	2/1/2021	\$50,000		Application-Submitted
Atkinson Foundation	2021 RFP	Seniors	2/1/2021	\$10,000		Planned
Network for Good, Inc.	FY 20-21 Network For Good RFP	General Operations	2/15/2021	\$5,000		Planned
First Five San Mateo County	2021 First Five Funding RFP	Access to Care, School Screenings	2/15/2021	\$15,000		Research
Delta Dental Community Foundation	2021 Delta Dental Grant	Access to Care, School Screenings	2/15/2021	\$10,000		Research
Sand Hill Foundation	2021 Sand Hill Foundation	Access to Care	3/1/2021	\$20,000		Research
Mills Peninsula Hospital (Sutter Health)	2021 RFP	Access to Care, School Screenings	3/20/2021	\$20,000		Research
COASTSIDE WOMENS CLUB	FY20 Coastsides GO Grant	General Operations	3/31/2021			Research
Chan Zuckerberg Initiative Foundation	FY21-22 CZI Community Fund	TBD	4/1/2021			Research
City of Half Moon Bay	2021 CFSA	Access to Care	4/16/2021	\$15,000		Planned
Sequoia Healthcare District	FY 20-21 Sequoia Healthcare District Q3 Grant	Access to Care	4/30/2021	up to \$60,000		Planned
Sidney Stern Memorial Trust	2021 RFP Sidney Stern Memorial Trust	General Operations	4/30/2021	\$5,000		Research
Oral Health Foundation of the Pierre Fauchard Academy	2021 RFP	Access to Care	5/7/2021	\$10,000		Research
Sequoia Healthcare District	FY 20-21 Sequoia Healthcare District Q4 Grant	Access to Care	7/31/2021	up to \$60,000		Planned
America's ToothFairy: National Childrens Oral Health Foundation	2021 Tooth Fairy in the Gap	Access to Care Children	TBD	\$500		Research
Totals				\$1,859,457	\$1,372,470	50





DATE: January 18, 2021

TO: SDH Board of Directors

FROM: Bonnie Jue, DDS

RE: **Community Engagement Director Report - Second Quarter (October-December 2020)**

Sonrisas Dental Health's (SDH) Community Programs experienced an exciting 2nd quarter as we created more innovative outreach programs to serve the community during the ongoing pandemic.

Screenings

SDH's Drive-Up Dental Screening events in October (San Mateo) and November (Redwood City) served 37 children (ages 16 months-18 years old) from 20 different schools representing 10 school districts in San Mateo County. Schools represented were:

- Jefferson Elementary (Jefferson – Daly City)
- Ortega Elementary (Pacifica)
- South San Francisco High School (South San Francisco)
- Lomita Park Elementary (Millbrae)
- Allen Elementary (San Bruno Park)
- Belle Air Elementary (San Bruno Park)
- Rollingwood Elementary (San Bruno Park)
- Burlingame Elementary (Burlingame)
- Burlingame Intermediate School (Burlingame)
- Design Tech High School (San Mateo Union High School)
- Fiesta Gardens (San Mateo-Foster City)
- North Elementary (San Mateo-Foster City)
- Adelante Elementary (Redwood City)
- Garfield Elementary (Redwood City)
- Hoover Elementary (Redwood City)
- Hoover Middle School (Redwood City)
- Kennedy Middle School (Redwood City)



- KIPP Excelencia (Redwood City)
- Rocketship Charter School (Redwood City)
- Taft Elementary (Redwood City)
- KIPP Esperanza High School (Sequoia Union High School)

Parents appreciated that the events were held during the weekend so that they did not need to take time off from work. Dignity Health Sequoia Hospital noticed that many of the families who attended the San Mateo event were from Redwood City, so they asked SDH to hold another event in one of their parking lots soon after. At that event, almost half of the children presented with decay; some so severe that the children were in pain, but their parents reported they could not find an available dentist due to the limited capacity of clinics during the pandemic. The SDH Community and Clinical teams coordinated appointments for 8 children who needed immediate care. Dr. Jue was grateful for the volunteers and staff members that rose to the challenge to assist these children who might still be in pain today if not for these screening events and follow-up care coordination.

Community Partnerships

One silver lining of the pandemic has been the emergence of new partnerships with local community agencies who have also been looking for new ways to serve families in the community. These organizations include:

- 1) United Through Education (Familias Unidas) – a non-profit education group that promotes the progress of the community by teaching parents how to help and support their children achieve academic success, focusing on the academic, social emotional, and physical aspects of a healthy life. Brenda Barrientos, Sonrisas RDH, gave engaging oral health presentations in Spanish to almost 90 children and parents, most of whom are new families in the Bay Area.

Please watch this wonderful video they created to showcase SDH's presentation:

<https://www.youtube.com/watch?v=VUsjmc5ao8A&feature=youtu.be>

- 2) Fiesta Gardens International School – thanks to Ms. Miren Recalde Barabair, a longtime supporter of Sonrisas, who has transferred from Hatch Elementary to Fiesta Gardens in San Mateo, SDH provided educational presentations in Spanish and oral health kits to their Kindergarten classes.
- 3) San Mateo Homework Central – a non-profit educational support program for disadvantaged and low-income children in grades 3 through 5 that fosters academic success through tutoring and family support. They distributed information about SDH resources and services to over 60 families at their drive-through book pick-up event.
- 4) Ayudando Latinos a Soñar (ALAS) – a Latino Cultural Arts and Social Services Program in Half Moon Bay is dedicated to supporting the youth and families of the community. Tracey volunteered her time to distribute 250 oral health kits at their Christmas event.
- 5) Coastside Hope (Adopt-a-Family Program) – a primary community assistance agency for the San Mateo County mid-coast region that provides assistance for emergency needs and offers basic life necessities with dignity and hope to all mid-Coast residents. SDH collaborated with Diane Grech who made a personal donation to cover supplies for over 500 oral health kits which SDH volunteers assembled that were given to children and senior residents for the holidays. Diane informed me that our packets were very popular!
- 6) Santa Clara County Office of Education (Student Services for Migrant Farmworker Families who live along the coast from Pacifica to Santa Cruz) – SDH is coordinating care for individual students in need of dental services, as identified by various schools' Migrant Family Liaisons.
- 7) San Mateo County Office of Education Early Learning Program (Head Start/Early Head Start Programs in San Mateo County) – More to come!



- 8) And while not a new contact, albeit an important one, SDH once again participated in Foster City Rotary Foundation's Annual Health and Aging Education Day (virtual event this year) by donating oral health kits and promoting SDH's services to over 100 senior residents in San Mateo County.

NEXT UP: Sonrisas Dental Health's Drive-Up Dental Screening Event on February 27th at Belle Air Elementary School parking lot (Saturday: 10-12:30)

- Sonrisas will resume on-site school screenings at Belle Air and Allen Preschools in March (grant from San Bruno Community Foundation)
- SDH will kick-off the "Senior Dental Access Pilot" next month – will discuss further at the Board Meeting



Drive-Up Dental Screening Events 2020

37 children (ages 16 months -18 years old)

** many children presented with severe tooth decay**



SDH Outreach Data (FY 20-21)

STUDENTS		
	Annual Goal	Performance
TOTAL # Students Served with Screenings and/or Virtual Presentations	800	501
- Screened no CC	200	0
- Screened w/ CC	100	37
- Screened w/ CC and FV	200	0
- Attended Virtual Presentations	300	464
# Schools Served	7	21
# Districts Served	5	10
# Toothbrush Kits	1,000	1,398

Event Data		
	Annual Goal	Performance
EDUCATIONAL VIDEOS (in lieu of in-person presentations)	4	1
Community Events (Public)	2	3
Community Events (Commercial)	2	1
# Outreach "touches"	1,000	601

SENIORS		
	Annual Goal	Performance
# Seniors Served with Education Presentations and/or Screenings	100	0
# Senior Facilities Served	5	0
# Toothbrush Kits	1,000	402

Volunteers		
	Annual Goal	Performance
# Volunteers recruited for community activities	5	20
# Volunteer hours	20	74





DATE: January 18, 2021

TO: SDH Board of Directors

FROM: Tracey Fecher, CEO

RE: Old Business January Report

1. FQHC Update: The first FQHC patients were seen at Sonrisas on December 20, 2019. Since that date, there have been 575 FQHC appointments for 104 unique patients that the San Mateo Medical Center (SMMC) has been billed for. The team did an analysis of the Usual, Customary, Reasonable (UCR) rate to compared to what was paid by SMMC.
- The following compares FQHC and Medi-Cal Dental UCR minus the write-off for July 2019 to November 2020 from the available financials. On the revenue side, the FQHC contract pays twice what the Medi-Cal Dental fee for service does. Expenses still need to be analyzed.
 - The care coordinator team continues to review the currently scheduled months Sonrisas' Medi-Cal Dental fee for service patients of record to move the patient to the SMMC contract. The contract requires that patients be adult, eligible for Medi-Cal and have an SMMC primary care provider they have seen in the last 18 months.

**July 2019 to November 2020
Comparison of FQHC to Medi-Cal Dental***

	Number of Visits	UCR	Write Off	Net Pgm Income	% of UCR
FQHC	482	\$237,686	-\$96,319	\$141,367	59%
Medi-Cal Dental	7136	\$2,870,897	-\$1,992,545	\$878,353	31%

*Data from P&L Financials

2. Building Out Additional San Mateo Center Operatories: The team has set up two mobile chairs in the San Mateo clinic to allow overflow chairs for simple procedures, such as exams and for usage on pediatric days.
- The cost to convert the two mobile chairs to fully operating chairs with the required cabinetry, x-ray and other equipment is estimated to be between \$110,000 and \$150,000.
 - The new operatories would allow the addition of providers to the San Mateo clinic. One of our pediatric dentists is available on Tuesdays when the other pediatric dentist is in the clinic. We have a dentist on staff that could add two days to her schedule in San Mateo if there was space in the clinic. The hygienists could add patients to their schedule with the addition of the Cavitron as well as an overflow chair that allows their operatories to be cleaned by a dental assistant between patients. Note that this plan would require additional expenses for provider and dental assistant staff.

	Number of Days/Week	Additional Visits/Day	Visits/Week	Est. Patient Revenue/Week	Notes
Ped. Dentist	1	16	16	\$2,816	Would use both chairs
Hygienist	2	3	6	\$1,056	Overflow chair for hygiene
Dentist	2	9	18	\$3,168	
				\$7,040	





DATE: January 18th, 2020
TO: SDH Board of Directors
CC: Cheryl Fama, CFO
FROM: Tina Wang, Senior Accountant
RE: **November Unaudited Financials and YTD Performance to Budget**

November PERFORMANCE:

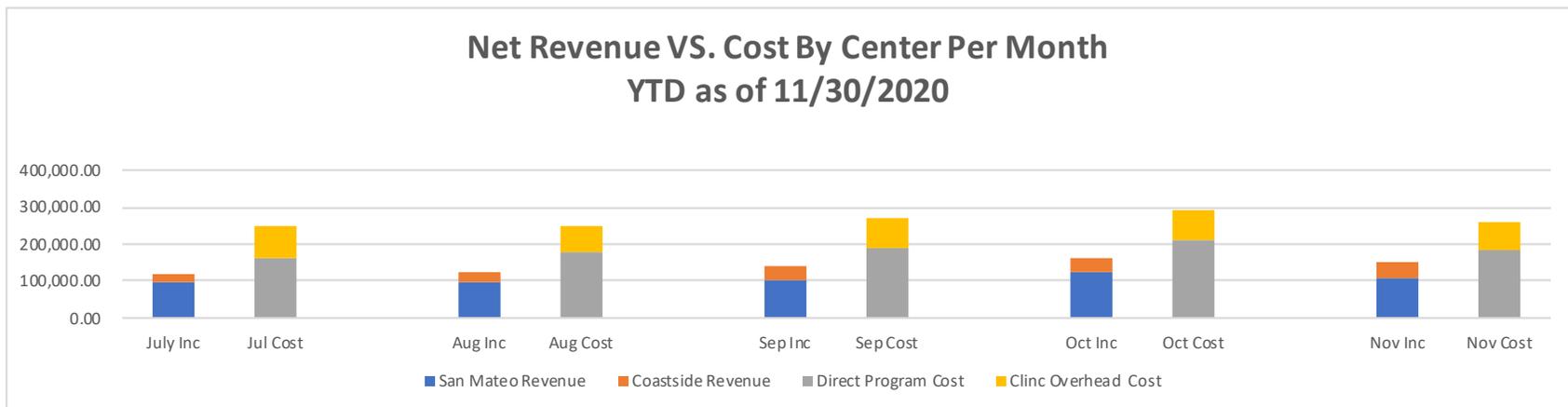
- \$22,869 in new individual donations and unrestricted grants were received.
 - \$65,895 or 1/6 of the total PPP loan amount (\$395,365) is estimated to be forgiven and recognized as other income in November.
 - No cash support from PHCD was received due to the use of PPP loan fund.
- A. Revenue: Net Patient Revenue was \$149,774**
- Total gross revenue was \$331,675- 18% better than the budget.
 - 812 visits –44 visits better than budget.
 - Total deduction was **(\$181,900)** – 55% of gross revenue.
- B. Total Expense: (\$272,399) – \$43,277 better than budget.**
- Direct Expense: **(\$182,639)** – \$34,619 better than budget
 - Direct salary was \$33K better than the budget due to savings from staff taking federally funded COVID-19 sick and family leave.
 - PPE was \$7K better than the budget. The saving will level-out the additional supplies purchased in prior months.
 - Dental supplies and Lab fees were (\$4K) higher than the budget due to more patient visits and additional FQHC patients' procedures.
 - Indirect Expenses: **(\$89,760)** – \$8,658 better than budget
 - Savings from personnel and fundraising expenses due to timing differences.
 - Savings in meeting and travel expenses due to COVID limitations.
- C. Donations/Grants & Other Income: \$131,132**
- \$42,363 released from restricted grant; \$10,000 received from Delta Dental Community Foundation; \$10,882 received from Philanthropic Ventures Foundation; \$1,987 from other individual donors.
 - \$65,900 in Other Income (\$65,895- estimated PPP loan forgiven; \$5 in interest & dividends)
- D. Net Income: \$8,507**

YTD PERFORMANCE TO BUDGET: YTD net income is **\$243,285** better than budget. Cash-flow is **\$234,420**, better than the budget. PHCD grant received to date is **\$100,000**.

	YTD Actual	YTD Budget	Performance
<i>Visits</i>	3957	3423	534
Gross Patient Revenue	\$1,598,725	\$1,251,541	28%
Uncompensated Care (Deductions)	(\$902,660)	(\$672,720)	(34%)
Grants/Donations/Other Income	\$628,620	\$583,950	8%
Direct Cost	(\$924,593)	(\$989,391)	7%
Indirect Cost	(\$467,834)	(\$484,405)	3%
Net Income	(\$67,741)	(\$311,026)	78%
<i>Non-cash items adj.</i>			
Depreciation	\$107,145	\$116,010	8%
Estimated Cash Flow	\$39,404	(\$195,016)	120%

Sonrisas Dental Health Operations

	Jul 20	Aug 20	Sept 20	Oct 20	Nov 20	Total	YTD Budget	B(W)
San Mateo Revenue	95,445	97,967	101,872	122,334	105,804	523,421	425,251	98,170
Coastside Revenue	25,056	26,925	36,790	39,908	43,971	172,650	153,569	19,080
Total Net Revenue	120,496	124,892	138,662	162,242	149,774	696,066	578,821	117,245
Direct Program Cost	164,462	176,821	191,421	209,430	182,639	924,773	989,391	(64,618)
Indirect Program Cost	95,325	88,873	93,432	100,264	89,760	467,654	484,405	(16,751)
Total Cost	259,787	265,694	284,853	309,694	272,399	1,392,427	1,473,796	(81,369)
TOTAL	(139,291)	(140,802)	(146,191)	(147,452)	(122,625)	(696,361)	(894,976)	198,615
Dividend/Other Income	(89)	65,908	65,899	66,290	65,900	263,907	1,700	262,207
Donations Received	51,683	62,483	33,562	51,751	65,232	264,711	207,250	57,461
Grant from PHCD	75,000	25,000	0	0	0	100,000	375,000	(275,000)
OTHER INCOME	126,594	153,391	99,461	118,041	131,132	628,619	583,950	44,669
NET INCOME	(12,697)	12,589	(46,730)	(29,411)	8,507	(67,742)	(311,026)	243,283



Visits by Center

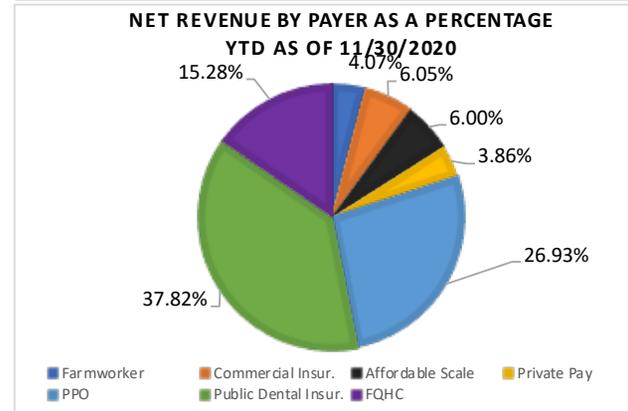
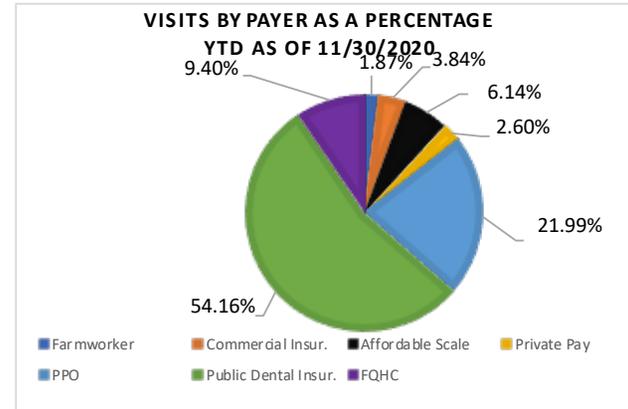
	Jul 20	Aug 20	Sept 20	Oct 20	Nov 20	Year to Date	Budget	Variance
San Mateo Visits	533	537	548	587	551	2756	2197	559
Coastside Visits	166	228	263	283	261	1201	1226	(25)
Total Visits	699	765	811	870	812	3957	3423	534

Visits by Payer -San Mateo

	Nov 20	Budget	Variance
Commercial Insurance	29	19	10
PPO	172	128	44
Private Pay	21	22	(1)
Affordable Scale	15	9	6
Farmworker	0	18	(18)
FQHC	87	73	14
Public Dental Insurance(Adult)	63	108	(45)
Public Dental Insurance (Child)	164	122	42
Total Visits	551	499	52

Visits by Payer -Coastside

	Nov 20	Budget	Variance
Commercial Insurance	3	8	(5)
PPO	25	28	(3)
Private Pay	1	3	(2)
Affordable Scale	44	49	(5)
Farmworker	19	6	13
Public Dental Insurance (Adult)	74	95	(21)
Public Dental Insurance (Child)	95	80	15
Total Visits	261	269	(8)



Avg. Income (Loss) per Visit	
	YTD
Net Revenue per Visit	\$ 175.51
Direct Cost per Visit	\$ (233.62)
Indirect Cost per Visit	\$ (100.14)
Net Income per Visit	\$ (158.25)

True Income (Loss) per Visit by Payer	
Payer	Avg. YTD
Commercial Insurance	\$ 1.37
PPO	\$ (51.28)
Public Dental Insurance	\$ (276.95)
Private Pay	\$ 160.10
FQHC	\$ (32.41)
Affordable Scale	\$ 47.73

* Indirect Cost only includes clinic overhead cost without fundraising and outreach expenses.

Sonrisas Dental Health Operations FY21 VS. FY20						
	Nov 20	Nov 19	Variance B(W)	YTD 21	YTD 20	Variance B(W)
Visits	812	873	(61)	3,957	4,729	(772)
San Mateo Revenue	\$105,804	\$101,271	\$4,533	\$523,421	\$543,635	(\$20,214)
Coastside Revenue	\$43,971	\$33,020	\$10,951	\$172,650	\$202,567	(\$29,917)
Total Net Revenue	\$149,774	\$134,291	\$15,483	\$696,066	\$746,202	(\$50,136)
Direct Program Cost	\$182,639	\$204,507	\$21,868	\$924,773	\$873,749	(\$51,024)
Indirect Program Cost	\$89,760	\$93,584	\$3,824	\$467,654	\$475,732	\$8,078
Total Cost	\$272,399	\$298,090	\$25,692	\$1,392,427	\$1,349,481	(\$42,946)
TOTAL	(\$122,625)	(\$163,799)	\$41,174	(\$696,361)	(\$603,280)	(\$93,081)
Dividend/Other Incom	\$65,900	\$273	\$65,627	\$263,907	\$65,438	\$198,469
Donations Received	\$65,232	\$104,132	(\$38,900)	\$264,711	\$279,536	(\$14,825)
Grant from PHCD	\$0	\$0	\$0	\$100,000	\$300,000	(\$200,000)
OTHER INCOME	\$131,132	\$104,404	\$26,728	\$628,619	\$644,974	(\$16,355)
NET INCOME	\$8,507	(\$59,395)	\$67,902	(\$67,742)	\$41,694	(\$109,436)

Sonrisas Dental Health
 Revenues and Expenditures - Budget vs Actual
 As of November 30, 2020

As of Date: 11/30/2020
 Location: Sonrisas Dental Health
 Restriction: Unrestricted

	Month Ending 11/30/2020			Year To Date 11/30/2020		
	Actual 2021	BUDGET	Budget Diff	Actual 2021	BUDGET	Budget Diff
Revenue and Expenditures						
Net Program Income						
Patient Revenue						
Patient Services						
Commercial Insurance	11,818.00	9,283.77	2,534.23	51,050.00	41,628.80	9,421.20
PPO	80,931.00	53,453.05	27,477.95	335,847.00	238,917.64	96,929.36
Public Dental Insurance	166,491.00	160,045.90	6,445.10	896,058.41	719,016.28	177,042.13
Private Pay	5,014.00	6,674.03	(1,660.03)	29,432.00	29,719.64	(287.64)
Affordable Scale	18,052.00	17,784.16	267.84	74,576.00	80,868.54	(6,292.54)
Farmworker	7,603.00	12,238.86	(4,635.86)	32,711.00	50,619.75	(17,908.75)
FQHC	41,766.00	21,170.00	20,596.00	179,051.00	90,770.00	88,281.00
Gross Patient Revenue	331,675.00	280,649.77	51,025.23	1,598,725.41	1,251,540.65	347,184.76
Uncompensated Care						
Prior Period Adjustment	(6,255.90)	(1,500.00)	(4,755.90)	(19,142.22)	(7,500.00)	(11,642.22)
Uncompensated Care - Commercial Insurance	(2,012.40)	(1,787.24)	(225.16)	(7,697.60)	(8,060.67)	363.07
Uncompensated Care - PPO	(35,493.26)	(22,055.95)	(13,437.31)	(142,827.52)	(98,606.49)	(44,221.03)
Uncompensated Care - Public Dental Insurance	(116,545.00)	(111,658.07)	(4,886.93)	(624,958.84)	(501,725.48)	(123,233.36)
Uncompensated Care - Affordable Scale	(7,833.00)	(8,881.10)	1,048.10	(31,597.00)	(40,408.98)	8,811.98
Uncompensated Care - Farmworker	(273.25)	(1,068.31)	795.06	(3,566.25)	(4,418.51)	852.26
Uncompensated Care - FQHC	(13,155.00)	0.00	(13,155.00)	(69,538.35)	0.00	(69,538.35)
Fee Adjustments	(333.00)	(2,400.00)	2,067.00	(3,331.70)	(12,000.00)	8,668.30

Total Uncompensated Care	(181,900.81)	(149,350.67)	(32,550.14)	(902,659.48)	(672,720.13)	(229,939.35)
Net Patient Revenue	149,774.19	131,299.10	18,475.09	696,065.93	578,820.52	117,245.41
Total Expenses						
Direct Expenses						
Direct Personnel Expense						
Direct Program Salaries	139,044.21	168,763.32	29,719.11	695,937.34	771,826.44	75,889.10
Payroll Taxes	10,300.01	13,501.06	3,201.05	52,301.50	61,746.08	9,444.58
Unemployment Taxes	239.46	1,518.87	1,279.41	1,935.89	6,946.44	5,010.55
Benefits	6,016.60	5,563.79	(452.81)	16,548.84	25,262.02	8,713.18
401k Match	1,195.07	1,265.73	70.66	4,818.53	5,788.71	970.18
Worker's Comp	864.70	1,187.58	322.88	4,323.50	5,937.90	1,614.40
Continuing Education	179.00	125.00	(54.00)	179.00	1,625.00	1,446.00
License and Registration	2,073.47	863.00	(1,210.47)	5,450.54	4,315.00	(1,135.54)
Total Direct Personnel Expense	159,912.52	192,788.35	32,875.83	781,495.14	883,447.59	101,952.45
Clinic Expenses						
Sterilization Services	672.00	898.00	226.00	4,116.00	4,490.00	374.00
Shredding	36.00	67.00	31.00	335.00	335.00	0.00
Dental Supplies	11,661.57	9,288.00	(2,373.57)	68,359.93	39,096.00	(29,263.93)
Small Dental Equipment	79.08	600.00	520.92	544.82	3,000.00	2,455.18
Dental Equipment Repair	2,251.53	780.00	(1,471.53)	2,892.26	3,900.00	1,007.74
Lab Fees	6,201.86	4,048.81	(2,153.05)	31,210.58	18,097.32	(13,113.26)
Uniforms	0.00	37.50	37.50	107.94	187.50	79.56
PPE& Covid Related	1,824.53	8,750.07	6,925.54	35,531.49	36,837.54	1,306.05
Total Clinic Expenses	22,726.57	24,469.38	1,742.81	143,098.02	105,943.36	(37,154.66)
Total Direct Expenses	182,639.09	217,257.73	34,618.64	924,593.16	989,390.95	64,797.79
Indirect Expenses						
Indirect Personnel Expenses						
Salaries/Wages	39,183.62	42,161.79	2,978.17	205,628.43	203,798.55	(1,829.88)
Payroll Taxes	2,168.23	3,372.94	1,204.71	13,218.19	16,303.91	3,085.72
Unemployment Taxes	7.04	843.24	836.20	547.05	4,075.98	3,528.93
Benefits	1,397.84	1,512.77	114.93	2,516.45	7,257.32	4,740.87

401k Match	303.93	632.42	328.49	1,649.17	3,056.98	1,407.81
Worker's Comp	322.88	0.00	(322.88)	1,614.40	0.00	(1,614.40)
Total Indirect Personnel Expenses	43,383.54	48,523.16	5,139.62	225,173.69	234,492.74	9,319.05
Facility Expenses						
Auto Expenses	92.75	270.00	177.25	572.22	1,350.00	777.78
Building Maintenance	800.35	1,057.00	256.65	3,977.35	5,285.00	1,307.65
Janitorial Service	1,875.00	2,235.00	360.00	9,152.47	11,175.00	2,022.53
Rent	3,300.00	3,300.00	0.00	16,500.00	16,500.00	0.00
Phone/Internet	1,663.91	1,485.00	(178.91)	7,642.84	7,425.00	(217.84)
Utilities	2,888.37	2,315.00	(573.37)	12,760.16	11,575.00	(1,185.16)
Total Facility Expenses	10,620.38	10,662.00	41.62	50,605.04	53,310.00	2,704.96
Office Expenses						
Claims Processing	133.84	161.00	27.16	621.36	805.00	183.64
Office Exp.	0.00	0.00	0.00	8.66	0.00	(8.66)
Patient Notification	740.00	485.00	(255.00)	2,680.00	2,425.00	(255.00)
Office Supplies	696.60	824.00	127.40	4,594.38	4,120.00	(474.38)
Postage and Shipping	108.90	336.00	227.10	789.52	1,680.00	890.48
Printing Costs	86.03	100.00	13.97	152.27	500.00	347.73
Property Taxes	0.00	0.00	0.00	249.99	500.00	250.01
Dues, Fees & License	0.00	84.00	84.00	184.00	420.00	236.00
Employee Goodwill	277.00	150.00	(127.00)	297.00	806.00	509.00
Recruitment Expense	417.31	230.00	(187.31)	786.26	1,150.00	363.74
Total Office Expenses	2,459.68	2,370.00	(89.68)	10,363.44	12,406.00	2,042.56
Insurance						
Insurance - Auto	265.08	265.08	0.00	1,325.40	1,325.40	0.00
Insurance - Malpractice	717.66	658.25	(59.41)	3,567.66	3,291.25	(276.41)
Insurance - Liability & Property	678.75	701.25	22.50	3,426.41	3,506.25	79.84
Insurance - Directors & Officer Liability	373.50	345.50	(28.00)	1,791.00	1,727.50	(63.50)
Total Insurance	2,034.99	1,970.08	(64.91)	10,110.47	9,850.40	(260.07)
Fundraising Department						
Fundraising Expenses	0.00	25.00	25.00	2,361.27	2,274.00	(87.27)

Fundraising Consulting	1,113.25	2,250.00	1,136.75	12,980.50	11,250.00	(1,730.50)
Total Fundraising Department	1,113.25	2,275.00	1,161.75	15,341.77	13,524.00	(1,817.77)
Professional Fees						
Consultant - Professional Fees	3,710.00	0.00	(3,710.00)	11,500.00	2,500.00	(9,000.00)
Total Professional Fees	3,710.00	0.00	(3,710.00)	11,500.00	2,500.00	(9,000.00)
General						
Depreciation Expense	20,889.39	23,202.00	2,312.61	107,145.20	116,010.00	8,864.80
Marketing Expense	0.00	791.67	791.67	2,470.10	4,838.35	2,368.25
Meeting & Travel Expenses	305.08	2,025.00	1,719.92	451.81	4,479.00	4,027.19
Fees and Interest	399.37	849.00	449.63	3,890.44	4,245.00	354.56
Merchant Processing	675.36	840.00	164.64	4,018.77	4,200.00	181.23
Outreach Supplies	310.49	0.00	(310.49)	757.37	0.00	(757.37)
Total General	22,579.69	27,707.67	5,127.98	118,733.69	133,772.35	15,038.66
Computer expense						
Computer Support	3,259.45	3,900.00	640.55	21,486.81	19,500.00	(1,986.81)
Software Support	599.00	1,010.00	411.00	4,519.13	5,050.00	530.87
Total Computer expense	3,858.45	4,910.00	1,051.55	26,005.94	24,550.00	(1,455.94)
Total Indirect Expenses	89,759.98	98,417.91	8,657.93	467,834.04	484,405.49	16,571.45
Total Total Expenses	272,399.07	315,675.64	43,276.57	1,392,427.20	1,473,796.44	81,369.24
Total Net Program Income	(122,624.88)	(184,376.54)	61,751.66	(696,361.27)	(894,975.92)	198,614.65
Grants and Other Income						
Grants and Donations						
Fundraiser	0.00	0.00	0.00	16,544.74	8,250.00	8,294.74
Donations	12,869.18	2,500.00	10,369.18	21,212.42	11,500.00	9,712.42
In-Kind Donations	0.00	0.00	0.00	10,730.00	0.00	10,730.00
Incentives	0.00	0.00	0.00	0.00	0.00	0.00
Grants	52,363.10	37,500.00	14,863.10	216,224.03	187,500.00	28,724.03
Other Events	0.00	0.00	0.00	0.00	0.00	0.00
PHCD Grants	0.00	75,000.00	(75,000.00)	100,000.00	375,000.00	(275,000.00)
Total Grants and Donations	65,232.28	115,000.00	(49,767.72)	364,711.19	582,250.00	(217,538.81)
Other Income						

Estimated PPP Loan Forgiveness	65,895.00	0.00	65,895.00	263,580.00	0.00	263,580.00
Interest Income	4.53	0.00	4.53	22.80	0.00	22.80
Dividends	0.00	340.00	(340.00)	(84.69)	1,700.00	(1,784.69)
Other Income	0.00	0.00	0.00	390.93	0.00	390.93
Total Other Income	65,899.53	340.00	65,559.53	263,909.04	1,700.00	262,209.04
Total Grants and Other Income	131,131.81	115,340.00	15,791.81	628,620.23	583,950.00	44,670.23
Net income	8,506.93	(69,036.54)	77,543.47	(67,741.04)	(311,025.92)	243,284.88

Sonrisas Dental Health Balance Sheet

As of Date:

11/30/2020

Location:

Sonrisas Dental Health

Year To Date

11/30/2020

Current Year Balance

Assets

Current Assets

Cash and Cash Equivalents

11205 - Operating - Boston Private Checking	849,002.44
11210 - Operating - Boston Private Savings	110,153.01
11215 - Operating - Wells Fargo Checking	21,280.03
11600 - Petty Cash	581.41

Total Cash and Cash Equivalents	981,016.89
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Accounts Receivable, Net	202,307.83
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Other Current Assets	20,357.15
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Total Current Assets	1,203,681.87
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Long-term Assets

Property & Equipment

17300 - Improvements	1,053,510.75
17400 - Equipment	963,463.35
17500 - Furniture/Fixtures	128,033.06
17600 - Vehicle	111,934.08
17900 - Accum Depreciation (Trousdale)	(105,373.05)
17999 - Accum Depreciation	(1,183,723.52)

Total Property & Equipment	967,844.67
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Other Long-term Assets	27,905.89
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Total Long-term Assets	995,750.56
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Investments

Long Term Investments

11410 - Investment Acct. - Merrill Lynch	204,160.00
------------------------------------------	------------

Total Long Term Investments	204,160.00
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Total Investments	204,160.00
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Total Assets

2,403,592.43

Liabilities and Net Assets

Liabilities

Short-term Liabilities

Accounts Payable

21110 - Accounts Payable	46,092.46
21213 - Credit Card Payable(Wells Fargo)	879.05
22110 - Accrued Payable - General	1,521.66
23100 - Patient Prepayments	22,720.43
23200 - Patient Refunds Payable	6,245.73

Total Accounts Payable	77,459.33
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Accrued Liabilities

22210 - Accrued Payroll	68,623.07
22220 - Accrued PTO	48,016.76

22250 - Accrued 401k Funds Payable	9,531.78
22260 - Accrued HSA Fund Payable	630.35
22320 - FSA Employee Account	2,683.72
Total Accrued Liabilities	129,485.68
Withholding Tax Payable	
22230 - Accrued Payroll Taxes	19,083.14
Total Withholding Tax Payable	19,083.14
Other Short-term Liabilities	260.33
Total Short-term Liabilities	226,288.48
Long Term Liabilities	
Notes Payable - Long Term	
28000 - PPP Loan	395,365.00
28001 - Estimated PPP Loan Forgiveness	(263,580.00)
Total Long Term Notes Payable	131,785.00
Other Long-term Liabilities	9,063.03
Total Long Term Liabilities	140,848.03
Other Liabilities	78,884.47
Total Liabilities	446,020.98
Net Assets	1,957,571.45
Total Liabilities and Net Assets	2,403,592.43

Created on: 01/14/2021 3:10 PM PDT





DATE: November 18, 2020

TO: SDH Board of Directors

FROM: Tracey Fecher, CEO

RE: New Business January Report

1. Financial Cash Projection Model: The Q2 cash forecast to the month end actual cash balance is shown below. Sonrisas Dental Health is ahead of the Q2 cash forecast at the end of December by \$200,000. This includes \$60,000 in restricted grant checks received that were not forecasted. (San Mateo Strong, \$20K and Kaiser, \$40K) The Q3 cash forecast projection has also been provided as well. As noted in the CEO report, the visit volume for Q3 is forecasted to be under budget by 16% since the visit volume was budgeted to be at pre-COVID-19 levels. The Q3 cash forecast also recognized the last PPP installment in January and assumes that the PHCD grant installment of \$75,000 are taken in February and March.

October	
Cash as of 9/30/20	\$ 1,403,714
Estimated Cash	\$ 1,281,991
Actual Cash 10/31	\$ 1,267,199

November	
Cash as of 10/31/20	\$ 1,281,991
Estimated Cash	\$ 1,145,215
Actual Cash 11/30	\$ 1,189,632

December	
Cash as of 11/30/20	\$ 1,145,215
Estimated Cash	\$ 1,004,100
Actual Cash 12/31	\$ 1,212,932

January	
Assumptions	
Visits to Budget	-15%
Estimated Visits	900
Average Net Revenue/Visit	\$175
Estimated Cash	\$ 1,212,932
Estimated Revenue	
Patient Services	\$ 157,500
Restricted Grants Released	\$ 26,000
Unrestricted Grants Expected	\$ 3,000
Paycheck Protection Pgm	\$ 65,000
PHCD Grant	\$ -
Total Revenue	\$ 251,500
Estimated Expenses	
Salaries	\$ 210,000
Benefits, Taxes, 401K	\$ 12,425
Clinic General Expenses	\$ 1,300
Dental Supplies	\$ 12,500
Lab Fees	\$ 5,350
PPE & COVID Related	\$ 8,198
Indirect Expenses	\$ 25,564
Total Expenses	\$ 275,337
Estimated Net Income	\$ (23,837)
Estimated Cash at Month End	\$ 1,098,095

February	
Assumptions	
Visits to Budget	-16%
Estimated Visits	864
Average Net Revenue/Visit	\$175
Estimated Cash	\$ 1,098,095
Estimated Revenue	
Patient Services	\$ 151,200
Restricted Grants Released	\$ 26,000
Unrestricted Grants Expected	\$ 3,000
Paycheck Protection Pgm	\$ -
PHCD Grant	\$ 75,000
Total Revenue	\$ 255,200
Estimated Expenses	
Salaries	\$ 210,000
Benefits, Taxes, 401K	\$ 12,425
Clinic General Expenses	\$ 1,300
Dental Supplies	\$ 12,500
Lab Fees	\$ 5,350
PPE & COVID Related	\$ 8,198
Indirect Expenses	\$ 25,564
Total Expenses	\$ 275,337
Estimated Net Income	\$ (30,137)
Estimated Cash at Month End	\$ 1,051,958



March	
Assumptions	
Visits to Budget	-18%
Estimated Visits	938
Average Net Revenue/Visit	\$175
Estimated Cash	\$ 976,958
Estimated Revenue	
Patient Services	\$ 164,150
Restricted Grants Released	\$ 26,000
Unrestricted Grants Expected	\$ 3,000
Paycheck Protection Pgm	\$ -
PHCD Grant	\$ 75,000
Total Revenue	\$ 268,150
Estimated Expenses	
Salaries	\$ 210,000
Benefits, Taxes, 401K	\$ 12,425
Clinic General Expenses	\$ 1,300
Dental Supplies	\$ 12,500
Lab Fees	\$ 5,350
PPE & COVID Related	\$ 8,198
Indirect Expenses	\$ 25,564
Total Expenses	\$ 275,337
Estimated Net Income	\$ (17,187)
Estimated Cash at Month End	\$ 1,018,771

2. Second round of PPP Loans: Sonrisas is eligible to apply for a 2nd round PPP loan, if the current information and Small Business Association (SBA) application remains as currently published. To be eligible, an organization that received a PPP loan in Round 1 is eligible if it has less than 300 employees and had one quarter in 2020 that has 25% less gross revenue than the same quarter in 2019. The second quarter of 2020 (March, April, May) with little to no patient revenue, should qualify Sonrisas to apply for an additional PPP loan. Lenders are still interpreting the new SBA law and most are still not accepting applications at the time of this report. TechCU, who funded Sonrisas' first PPP loan, has indicated they will be open for round 2 applications soon.
- The team estimates that Sonrisas could apply for a loan of approximately \$350,000.
 - The team is requesting board discussion and vote to consider approving applying for a 2nd round loan, assuming Sonrisas remains eligible.