

*HEALTHCARE CONNECTIONS REPORT, Dennis Torres, Chief Health Officer	2
FAMILY CENTERS HEALTH CARE REPORT – Medical/Dental/Mental Health	3
John Midy, Director of Outpatient Medical and Dental Services	3
Heather Dawson, DNP, Director of School Based Health Centers	3
Jill Winner, Senior Director of Outpatient Behavioral Health.....	3
* FCHC MEDICAL	3
MEDICAL – 75 HOLLY HILL	3
*FCHC DENTAL	4
DENTAL – WILBUR PECK	4
SCHOOL BASED HEALTH CENTERS – MEDICAL, MENTAL HEALTH, & DENTAL	6
*FCHC MENTAL HEALTH	8
20 BRIDGE STREET & 986 BEDFORD.....	8
*FCHC ACEESSS, OUTREACH, & ENGAGEMENT	10
THE CENTER FOR HOPE: THE DEN, TRAUMA RESPONSE & WLS.....	12
*FCHC QA/QI/COMPLIANCE REPORT, Melissa Schreff, Senior Director.....	13
QA/QI QUALITY CLINICAL DATA REPORT DASHBOARD	15
CARE TO CARE, Nathalie Tocci, RN Manager	16
FAMILY CENTERS CARES (formerly Stamford CARES), Ruth Pennacchia, Manager	17

*Vote required

***HEALTHCARE CONNECTIONS REPORT, Dennis Torres, Chief Health Officer**

Happy New Year! As we wrap up 2025, I look back at how the year progressed, and I look forward to a productive 2026. At the end of January, it will be a full year that we have been operating out of 75 Holly Hill. After planning, negotiating, and managing compliance, it's nice to be in a position of stability and growth – and grow we have. You can see in our numbers the strides we've made in just the first year. The team there is hitting a good stride, and it is exciting to be at this stage. I still believe it will be a full 3 years before we have reached stasis, but as of next month, we will be able to measure our progress against ourselves one year prior. This will help hone our growth expectations and begin to decipher trends that are unfolding.

Additionally, after the grand opening of Turn of River SBHC in September, the team there is starting to hit a stride and work out challenges that come with a new site, both environmentally and operationally. Of course, our leadership team is doing an incredible job of overseeing and maintaining growth without losing any quality. We have an excellent team!

As we dive fully into our strategic planning process and map out the next three years, we already have Scofield Middle School SBHC in our sight. We met recently with Principal Shawn Marinello there and he is excited to invite SBHC programs to his school. This middle school is the only one in the system that does not have a SBHC – and we are excited to complete our set! We expect to begin with mental health first while we research and pitch capital proposals to build out an entire clinic. The school itself has a LOT of space and is ideally suited for a new health center.

Additionally, we met with Norwalk Community College President and Foundation Executive Director to discuss how we can continue to work with our students who graduated from Stamford high schools. The percentage of students from Stamford attending the school is much higher than you would think. This is another exciting and unfolding project that we can add to our planning.

Finally, we look forward to upgrading our dental suite at Wilbur Peck so that we can enjoy the ease of having three dental chairs instead of just one. This is exciting all around and will lead to greater productivity there and help many in our community who lack access to basic oral health care.

So again, Happy New Year! I look forward to continuing our exciting work together in 2026.

FAMILY CENTERS HEALTH CARE REPORT – Medical/Dental/Mental Health

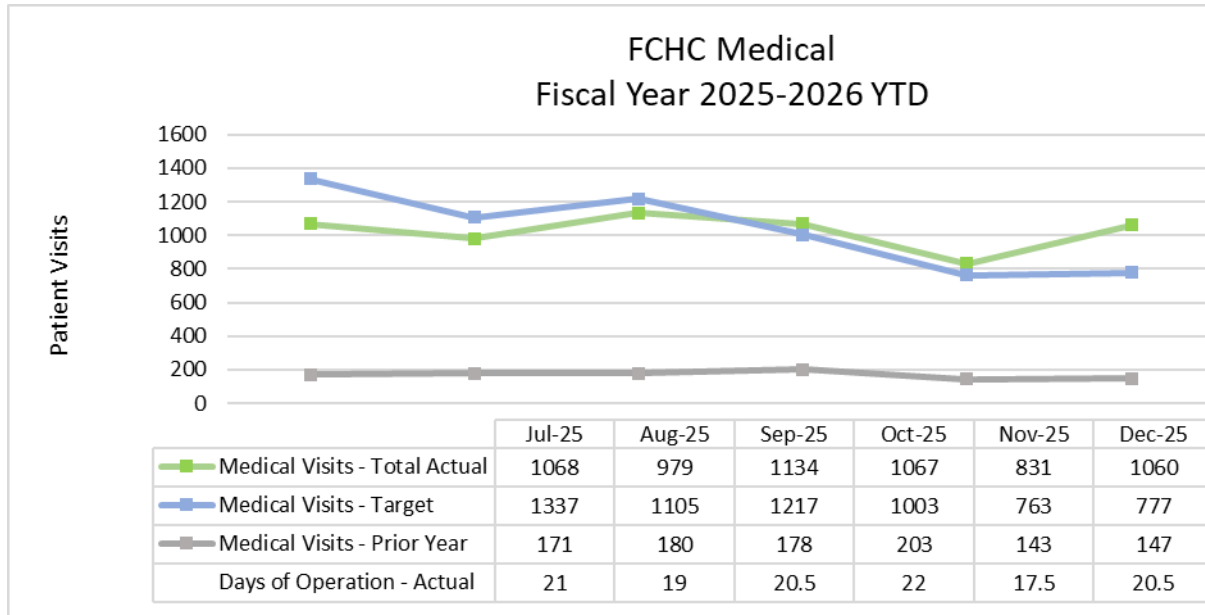
John Midy, Director of Outpatient Medical and Dental Services

Heather Dawson, DNP, Director of School Based Health Centers

Jill Winner, Senior Director of Outpatient Behavioral Health

*** FCHC MEDICAL**

MEDICAL – 75 HOLLY HILL



**Current Data listed is 75 Holly Hill. Currently no medical services at 111 Wilbur Peck.

Overview

In December, the medical team surpassed visit projections despite having fewer operational days and several days with a reduced number of scheduled providers. This month is traditionally the most popular for time-off requests due to the holidays, yet the no-show and cancellation rate remained steady at 20%. We continue to prioritize initiatives to increase capacity, including upgrading our phone platform to manage high call volumes, expanding community outreach to attract new patients, and implementing a new daily huddle process to help providers improve visit efficiency.

Patient Visits/Patient Cancel/No Show Rate

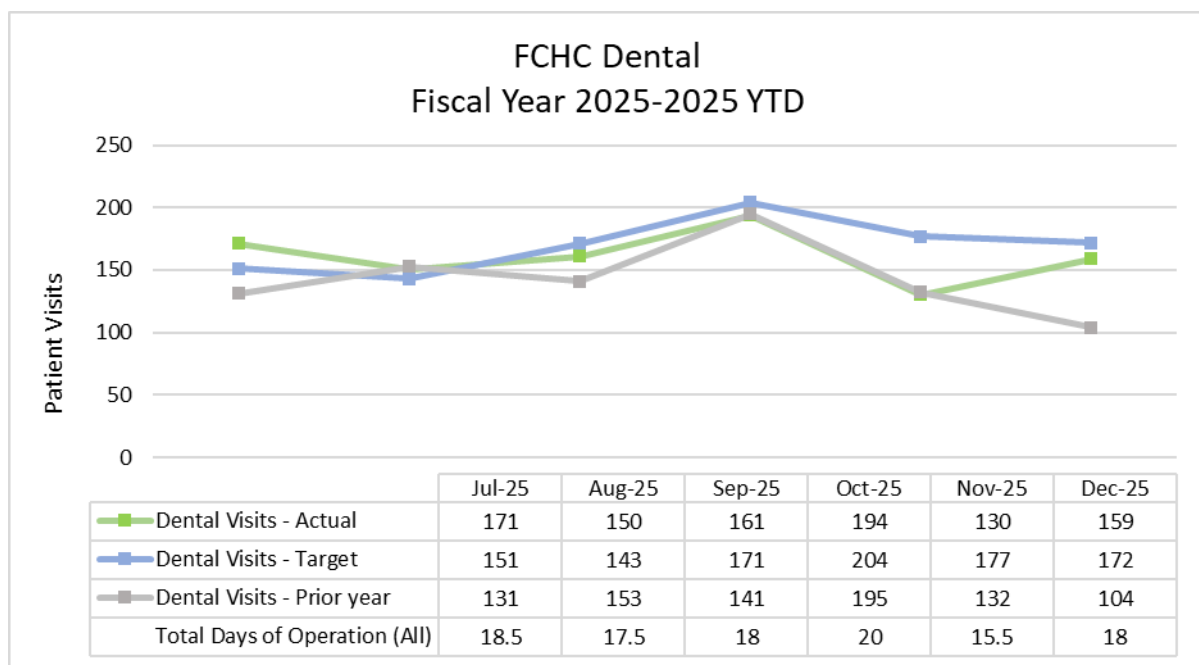
	July 2025	Aug 2025	Sept 2025	Oct 2025	Nov 2025	Dec 2025
Cancel/No Show Rate	17%	19%	20%	19%	22%	20%
Total Scheduled	1240	1164	1360	1262	1017	1317

Operations

Staffing	Provider Coverage: Fully staffed; minor gaps due to holidays/PTO, but all patients were seen. Open Positions: 1 Medical Assistant, 1 Mental Health Clinician, 1 Patient Navigator.
Phone Access	RingCentral CX upgrade goes live Jan 13; expected to improve patient experience and provide better staffing data.
Social Needs	Increased demand for Social Determinants of Health resources. Partnering with Community Action Project for onsite caseworkers twice weekly; MOU in progress.
Service Access	Registration and e-signature are fully operational. Focus on workflow efficiency, reducing no-shows, and improving patient experience.
Specialist Access	Reviewing schedules and patient needs; credentialing with Greenwich Hospital pending. Updated specialist list expected by the end of February.

*FCHC DENTAL

DENTAL - WILBUR PECK



**Data listed is 111 Wilbur Peck Services. Days combine dentist and dental hygiene days for 1 exam room.

Overview

In December, visit volumes were higher than both the previous month and the same period last year. However, targets were missed due to coverage changes, with one provider out sick and another on vacation. We also learned that one of our dental providers, Dr. Tatiana Cojocar, will be leaving Family Centers at the end of January, requiring adjustments to her schedule until her

departure. Additionally, we are reviewing the site's staffing structure following the termination of one manager and the relocation of a coordinator out of state. We anticipate lower volumes in the next couple months as we plan to begin site renovations. Recruitment efforts for a new dental provider remain a priority.

Patient Visits/Patient Cancel/No Show Rate

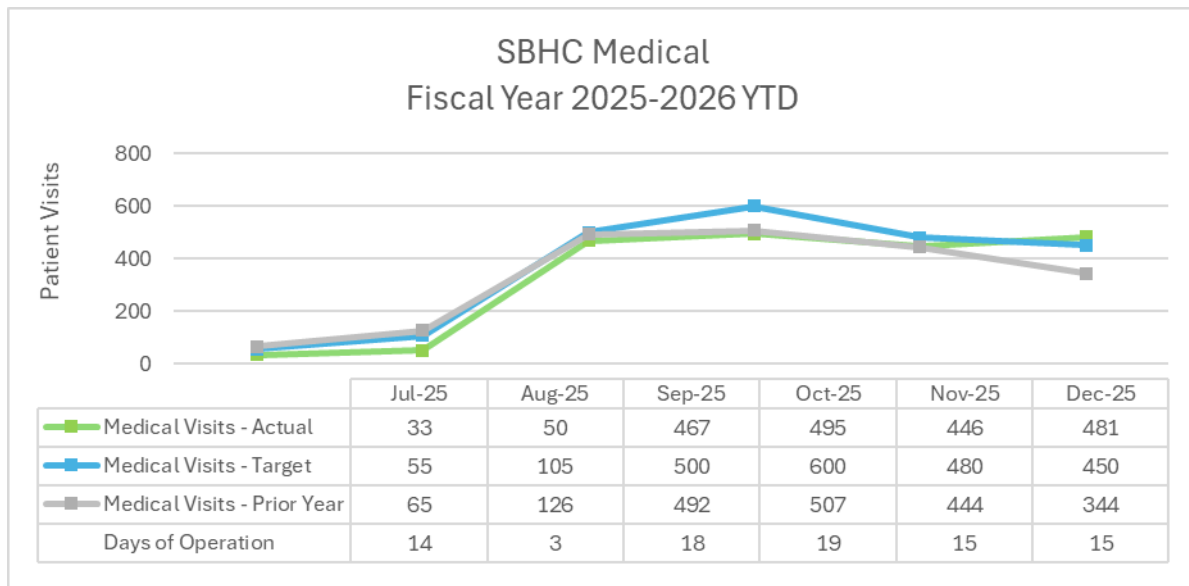
	Aug 2025	Sept 2025	Oct	Nov	Dec
Cancel/No Show Rate	17%	15%	13%	16%	21%
Total Scheduled	181	190	222	154	201

Operations

- **Staffing:** Recruitment will begin as we finalize the renovated site timeline, aiming for daily coverage with one dentist, one hygienist, and two dental assistants. To meet this goal, we need one full-time dental assistant and two part-time providers (dentist & hygienist).
- **Service Access & Registration:** Front desk registration and e-signing fully functioning; management focused on streamlining workflows, reducing no-shows, and improving patient experience.

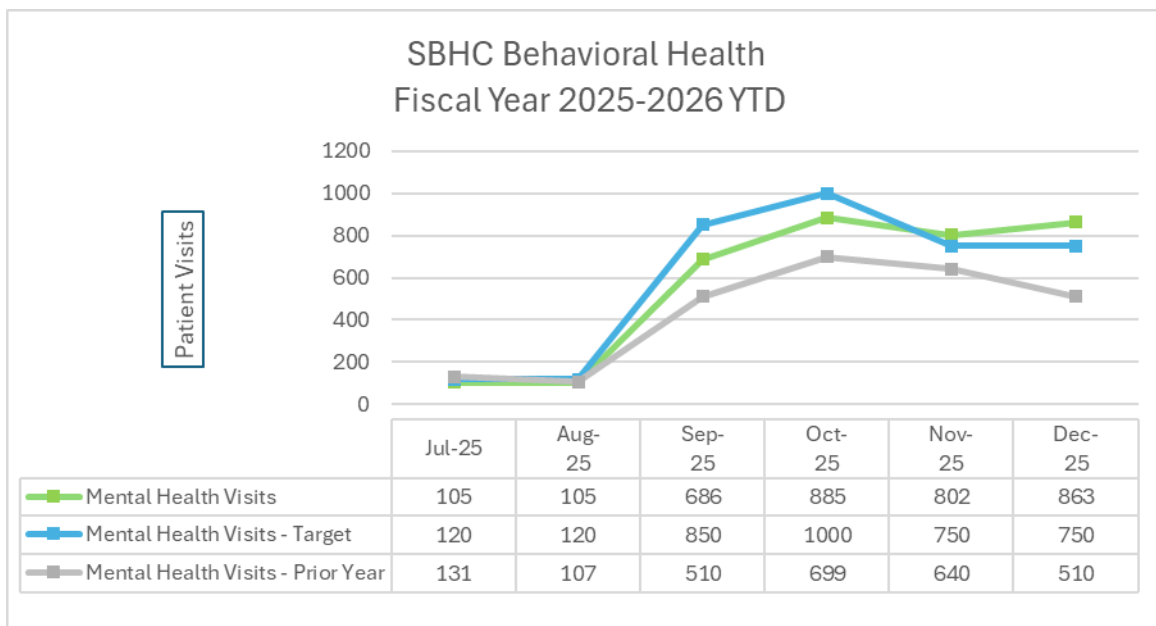
SCHOOL BASED HEALTH CENTERS – MEDICAL, MENTAL HEALTH, & DENTAL

SBHC Medical, Mental Health and Dental teams continue to provide care to all students within the school system.



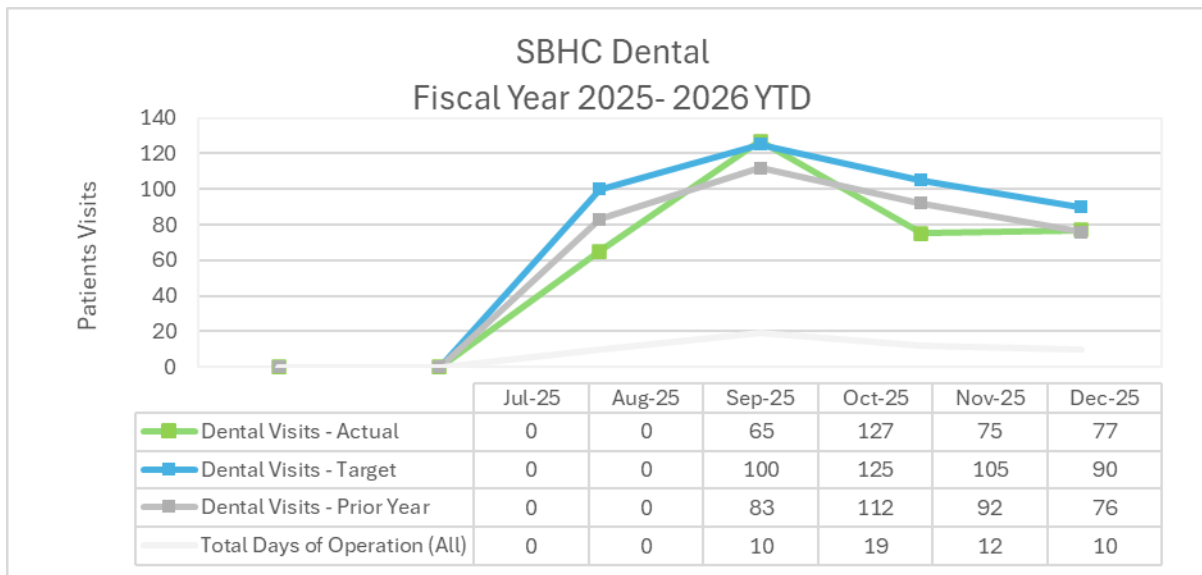
Overview:

The medical team exceeded productivity for the month of December compared to the previous year. The Medical team is seeing predominantly respiratory illnesses as acute visits, including Influenza.



Overview:

Productivity for the mental health team has continued to be above target and prior years. The team continues to see new student intakes, work with their established clients, and make appropriate referrals to psychiatry.

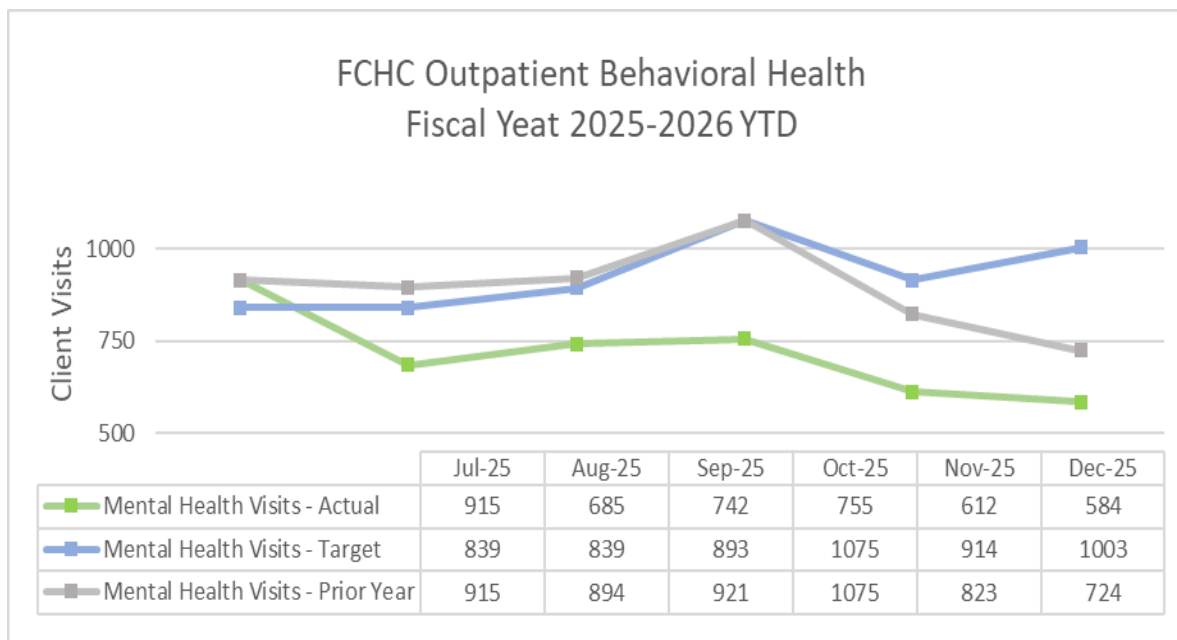
**Overview:**

Dental continues to face issues with connectivity and image quality at the school, which is affecting workflow, but these issues are continuing to be addressed.

Operations	- The Group Facilitator now has groups in all SBHC host schools in Stamford and Greenwich. - The management team is collaborating to improve and streamline the referral workflow process.
Staffing	The SBHC will have an opening for a CSS position in January
Client Satisfaction Survey	Will start administering Client Satisfaction Surveys in January.
Clinical	- All medical providers were given access to UpToDate, which is an evidence-based medical decision tool to support medical staff. - In Epic, Willow, the medication and immunization pharmacy module was implemented at 2 SBHC sites. If successful, Willow will be implemented throughout the SBHC. - Abridge, the dictation app through Epic, will be tried at Stamford High to determine if it helps with the charting workflow in SBH

***FCHC MENTAL HEALTH**

20 BRIDGE STREET & 986 BEDFORD



**Data listed is for Bedford and Bridge locations. They do not include Darien or Holly Hill.

Overview

- All full-time clinicians are currently on-site 4-5 days per week, which has helped us to meet client requests for in-person appointments.
- Recruitment remains a challenge, and efforts are ongoing to fill vacancies, including a new Bilingual Clinician role based at the Holly Hill site.
- Clinicians are flexing their schedules as needed to reschedule client appointments due to holiday closings and client conflicts.
- Ongoing political and immigration-related concerns continue to elevate anxiety levels among many clients. OBH clinicians remain focused on providing support and equipping clients with tools and strategies to manage their emotional responses effectively.

Patient Visits/Patient Cancel/No Show Rate

- The total number of services provided in December 2025 was 19% less than FY24/25. This difference is due to staff vacancies.
- No-show and same-day cancellation rates accounted for 14% of all scheduled appointments in December, which is down from November's no show rate of 18%.
- In-person sessions made up 34% of all services provided in November. 4 new intakes were completed in December. The number of completed intakes is lower than usual, as clinicians continue to absorb transferred cases from clinicians who left the agency.

Operations

- Open OBH positions: 2 Clinical Supervisors & 2 Clinician positions.
- 1 Clinician and 1 Contractor left in December.
- A new Contractor will be joining OBH in January.
- OBH continues to recruit for a Bilingual Clinician to be based out of Holly Hill
- Katie Sutherland, Clinic Manager, returns mid-January.
- 2 sessions of a 4-part Neurodivergence Training were completed in 2025. The remaining 2 sessions are scheduled for 2026.
- Jill Winner will co-lead a presentation with the Child Guidance Center in January for the Young Men's Service League in Greenwich (group of moms and high school aged sons who volunteer together, serving our local community). The presentation is, *What's Going On With Our Boys?" Understanding the Rise in Anxiety, Depression, and Emotional Struggle*.
- A Play Therapy is scheduled for April, led by Jill Winner. CEUs for clinicians are pending.

*FCHC ACCESS, OUTREACH, & ENGAGEMENT

Months (Effective Date Range)	SFS Nom	SFS A	SFS B	SFS C	Grand Total
Jul	217	223	81	45	566
Aug	221	225	77	46	569
Sep	213	219	75	47	554
Oct	222	215	80	39	556
Nov	235	227	80	42	584
Dec	251	234	79	38	602

Enrollment Appointments: July - Sept 2025					
FCHC ENROLLMENT AND REGISTRATION		Jul	Aug	Sep	Grand Total
Appointments Completed		157	139	106	402
Patients Served		119	103	86	268

Appointments Completed Oct: 132 | Nov: 122 | Dec: 117

Access Health Initiative – The financial assistance team is conducting outreach at local sites, including food pantries and Neighbor to Neighbor, to promote insurance enrollment and educate the community on updated eligibility requirements and sliding fee discounts to improve healthcare access.

FCHC Outreach & Education

December	Total Activities	Total Attended **	Total Partners **
Community Engagement/Outreach	11	2560	35
Coalitions/Meetings	10	Varies	Varies

**** Potentially duplicate numbers of attendees or partners at multiple events**

Community Engagement/Outreach (December Highlights)

- Continued to coordinate a series of educational health presentations at the Wallace Center.
- Organized upcoming Holly Hill clinic tours for partners and community leaders.
- Began recurring outreach efforts at Neighbor to Neighbor.
- Collaborated with local prevention councils to organize community education presentations, develop mocktail recipe books, assemble Vape Quit Kits for the community, and organize local resource materials for community distribution.

Upcoming Activities (January Highlights)

- We have a full calendar of community engagement and educational activities, highlights including Family Centers' education presentations with partner organizations, and ongoing outreach efforts with our partners' clientele. There are continued opportunities to participate in local resource fairs with schools and public housing. Finally, we will be hosting another Patient Advisory Board meeting to share updates with our clients and to receive feedback on patient experience. These efforts reflect our commitment to outreach, education, and collaboration as we begin the year.

THE CENTER FOR HOPE: THE DEN, TRAUMA RESPONSE & WLS

Operations

- Evening Den: The Den held two nights of service in December (3rd and 17th), including our annual Den Commemoration Service on 12/3. Nine Groups ran each evening, including: Littles (3-5 yo), Middles 1 (6-9 yo), Middles 2 (10-13 yo), Teens (14-18 yo), Young Adult (19-33 yo), Child Loss, Spousal Loss, Spanish Speaking General Loss, General Loss.

Dec. Sessions	Groups/Session	Total Participants	Volunteers/Session
2	9	90	18

- School Den: School Groups, below, remain static from November. New groups will begin in January.

Stamford (2 schools, 2 groups)	Norwalk (7 schools, 8 groups)	Greenwich (1 school, 1 group)
ES: x groups	ES: 3 groups	ES: x groups
K-8: x groups	K-8: 2 groups	K-8: x groups
MS: 1 group	MS: 1 groups	MS: x groups
HS: 1 groups	HS: 2 groups	HS: 1 group

- Trauma Response: An elementary school teacher at Hindley Elementary School in Darien died in a car accident en route to work. The CFH provided guidance to the administration and staff and held an adult processing group. A follow-up is scheduled for January.
- Recruitment continues for the Director of The Center for HOPE and the Den Coordinator.
- The three MSW Interns with The Den are valuable, contributing members of the team.
- Monthly resources with additional holiday support were sent to the approximately 300 people on The Den listserv, to Den volunteers, and to the Clinical OBH team.

*FCHC QA/QI/COMPLIANCE REPORT, Melissa Schreff, Senior Director

Overview:

- End-of-year 2025 compliance rates for all clinical quality measures show meaningful improvement compared to 2024. (See graphs below) Several measures achieved substantial gains - up to 38%, while others improved within the 10–15% range. These results represent a significant advancement over prior-year performance and reflect the effectiveness of ongoing quality assurance and quality improvement initiatives. Data is preliminary and may see minor adjustments following final validation.
- UDS Report. Preliminary data for the 2025 Uniform Data System Report has been gathered. January will focus on validating and finalizing for report submission in February.
- Quality improvement Projects from our 2025 QI Plan focused on enhancing existing processes, outcomes, or operational efficiencies across Medical, Dental and School Based Health Center departments.
 - Environmental Tracer Redesign: Rebuilt and piloted a more rigorous environmental tracer tool with After Action Reports to better align with Joint Commission standards and generate actionable site-level findings for compliance and risk-management.
 - Colorectal Cancer Project: Continued to build on prior momentum, with 2025 achieving higher screening rates among eligible patients. The QA/QI team actively monitors progress under the Exact Sciences grant.
 - Chart Review Template Updates: Updated and expanded medical chart review templates by provider scope (adult, pediatrics, SBHC, psychiatry, OBH, nursing/support) to standardize documentation and strengthen clinical quality monitoring.
 - Referral Management Redesign: Standardized Epic referral workflows and closure processes to reduce backlog and improve efficiency.
 - After-Hours Call Project: Analyzed after-hours calls, corrected routing issues, and reinforced documentation standards to ensure proper triage and consistency.
 - Depression Screening Boost (75 Holly Hill): Implemented bi-weekly patient identification, pre-visit flagging, and staff education to reduce missed screening opportunities to support this UDS quality measure.
 - UDS Documentation & Training (SBHC): Delivered site-based, provider-level coaching and dashboard support, driving SBHC depression screening rate above target, and improving departmental UDS metrics.
- QI project plans for 2026 will be finalized and presented after a full review of 2025 results to identify priority areas for improvement.
- Risk Assessments from our 2025 Risk Management plan proactively targeted patient safety activities and prioritized risk prevention and reduction strategies across Medical, Dental and School Based Health Center sites.
 - Q1 -Mock Survey Tracers assessment: Evaluated 2024 modifications to the tracers—critical tools designed to assess staff knowledge and proficiency in key operational areas. In addition, the assessment analyzed compliance outcomes at FCHC locations. This dual focus ensures readiness in emergency preparedness, risk management, and risk management at our sites.
 - Q2- HIPAA Risk Assessment: Conducted unscheduled walkthroughs across 5 sites Outpatient Behavioral Health (Bridge, Darien, Bedford), Medical (Holly Hill), and

Dental (Wilbur Peck) to assess adherence to HIPAA Privacy rules in daily operations and patient interactions. The assessment examined multiple critical areas, including verbal communication practices, telephone interactions, access, and handling of patient charts within Electronic Medical Records, confidentiality measures in exam rooms, and physical security protocols. This comprehensive approach provided valuable insights into both procedural compliance and opportunities for strengthening privacy safeguards.

- Q3- Dental Risk Assessment: Evaluated clinical practices and safety measures within the Dental Departments using an evidence-based tool from the ECRI Institute to identify and mitigate potential risks.
- Q4- Infection Control and Prevention: Applied ECRI Infection Prevention and Control (IPC) framework to identify vulnerabilities in infection control practices and ensure compliance with regulatory standards. The assessment evaluated key areas including hand hygiene, sterilization, environmental cleaning, and isolation protocols. The results provided actionable insights to strengthen infection prevention strategies and maintain a safe clinical environment across all service sites.

Clinical Measures At or Above 2025 Targets

Measure	Q3 2025	Q4 2025	Target
Child 2> immunizations	80.0%	78.8%	63.0%
Child BMI + Counseling	72.1%	81.6%	75.0%
Adult BMI + Nutritional Counseling	58.8%	60.0%	60.0%
Smoking Screening + Cessation Counseling	74.3%	78.3%	75.0%
HIV Screening	50.6%	52.8%	50.0%
Controlled Hypertension	77.8%	77.8%	67.0%
Colorectal Cancer screenings	57.1%	57.1%	50.0%
Cervical Cancer screenings	74.3%	74.7%	60.0%
Breast Cancer screenings	74.7%	74.6%	65.0%
IVD: use of aspirin or another antiplatelet	69.5%	74.6%	69.0%

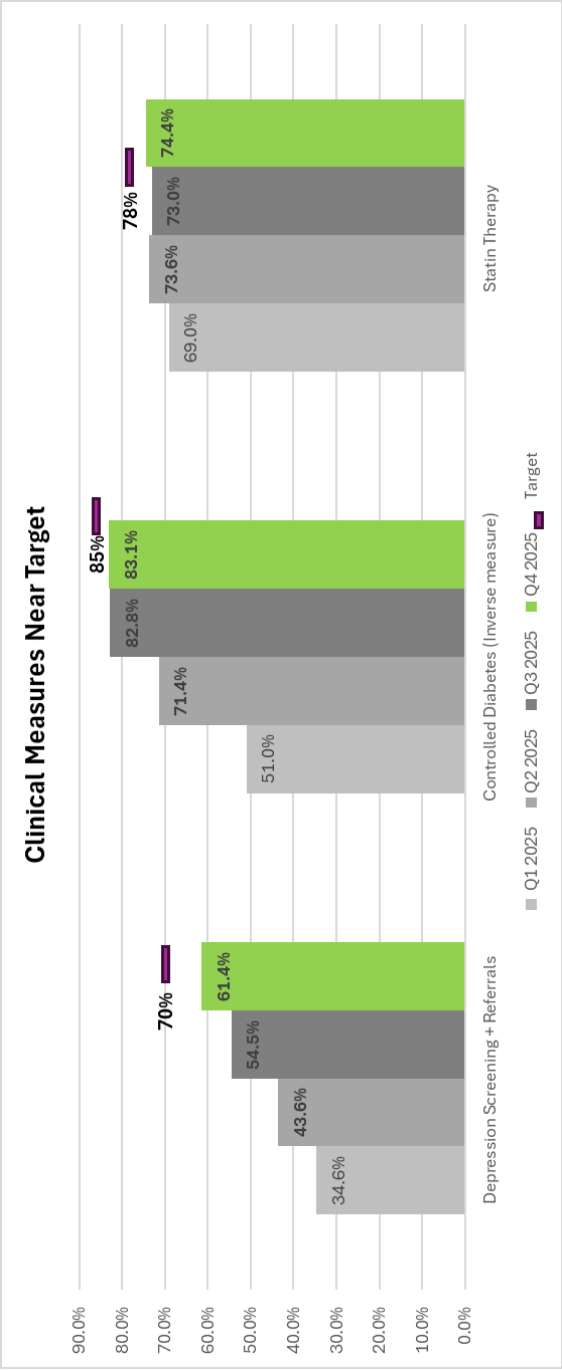
End-of-Year 2025 Quality Performance Summary

End-of-year 2025 results reflect substantial improvement in compliance across all medical quality measures compared to 2024. Cancer screening measures showed especially strong performance, with all three exceeding an average of 20% improvement by year's end.



Improved Clinical Measures (EOY 2025 vs. 2024)

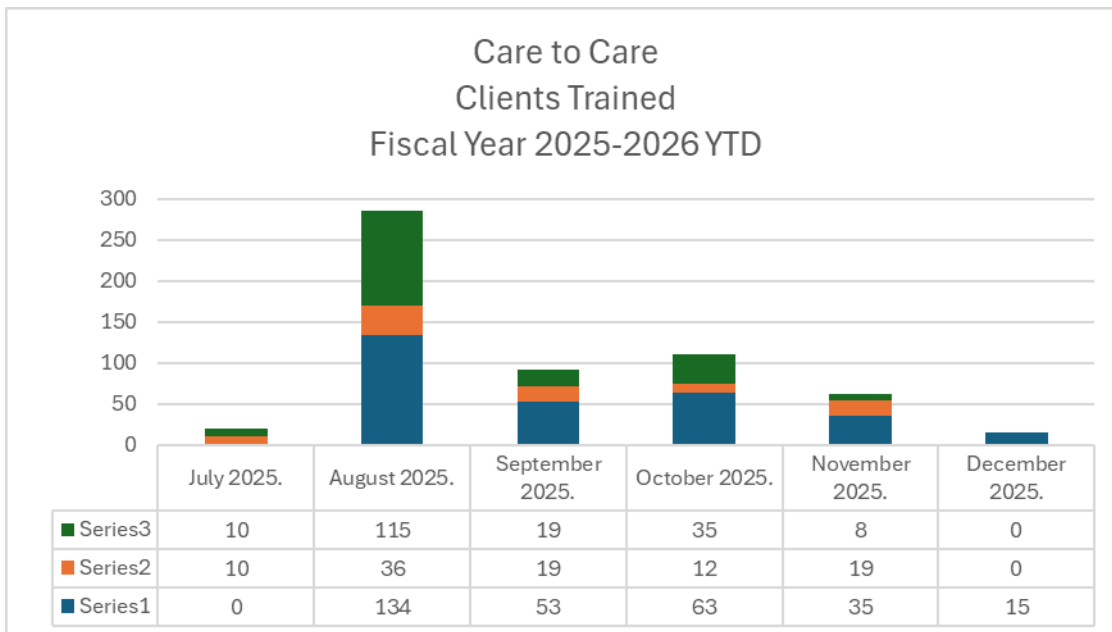
Measure	EOY 2025	EOY 2024	% Increase
Cervical Cancer screenings	74.7%	35.9%	38.8%
Breast Cancer screenings	74.6%	52.9%	21.7%
Colorectal Cancer screenings	57.1%	36.0%	21.1%



CARE TO CARE, Nathalie Tocci, RN Manager

Overview:

- Current contracted clients: 35 schools
- An increase in flu and norovirus has spread in the childcare community in children and staff
- The CDC has significantly changed the vaccine schedule causing families confusion. Our team as begun educating families the change does not reflect the vaccine schedule that must be followed according to The Office of Early Childhood. All vaccines continue to be required to attend childcare.



Trainings	July 2025.	August 2025.	September 2025.	October 2025.	November 2025.	December 2025.
CPR Classes	0	7	4	5	3	1
Med/Epi Classes	2	3	1	2	1	0
Epipen Classes	0	5	2	3	2	0
Total Trainings	2	15	7	10	6	1

FAMILY CENTERS CARES (formerly Stamford CARES), Ruth Pennacchia, Manager

Overview:

In December, Medical Case Management continued to provide comprehensive services, including care coordination, access to treatment, medication, referrals to Behavioral Health, Oral Health, and Outpatient Ambulatory Services. Medical Case Managers also assisted clients in obtaining necessities not covered under other programs, such as housing, utilities, health insurance, medication, and food.

Operations:

In the month of December, FC CARES was fully staffed and operating at full capacity. Medical Case Managers continued to work diligently to reduce gaps in medical visits by collaborating closely with clients, the Family Centers medical team, and external providers. These efforts also included a focused review of data accuracy and the strengthening of relationships with external service partners.

During the month, among clients eligible for cancer screening services, we achieved and maintained an increase in cervical cancer screening rates. While this goal was met, efforts remain ongoing to further improve and sustain screening levels. This work includes continued outreach and collaboration with both clients and providers to ensure ongoing education and access to services.

The Ryan White Part A (RWPA) 2025 monitoring was successfully submitted. Additionally, FC CARES created a video that was shared with APNH during World AIDS Day (WAD) to raise awareness across the greater Connecticut community about the impactful work being done in the field of HIV.

To commemorate World AIDS Day, an annual global observance held on December 1 to raise awareness about HIV/AIDS, show support for people living with HIV, and remember those who have lost their lives to AIDS-related illnesses, FC CARES hosted a World AIDS Day luncheon.

Total Clients: 259	October	November	December	Total to Date
Clients Served	162	134	123	248
Clients Encounters	414	266	252	4,626

Prevention and Outreach:

Our services include HIV and Hepatitis C testing, educational outreach, condom distribution, and syringe exchange. We provide testing support and early intervention to ensure timely testing and connection to care like PrEp and referral to outpatient ambulatory services. Team is working closely with Family Centers Health Care Clinic.

	October	November	December	Total to Date
Prevention & Outreach Events	12	5	4	81
HIV	19	4	12	143
Hep C	14	3	3	101
Screened for PrEp				140

Operations:

Our prevention team continues its commitment to outreach through innovation and compassion. We remain dedicated to providing meaningful services, connecting with community members in need, and offering education, outreach, and support whenever possible. Additionally, we continue to collaborate with community organizations and actively participate in local events to strengthen partnerships and expand our overall impact.

We published a total of **91 posts on Instagram** and **51 posts on Facebook**, in addition to conducting outreach through dating applications. These social media platforms serve as key tools to increase awareness, share resources, and engage with the community. We maintained consistent weekly engagement on dating applications to sustain social interaction, share prevention messaging, and connect individuals to available services.

Alongside our digital outreach efforts, we conducted extensive in-person flyering at local markets, delis, barbershops, and braiding salons to directly reach community members. While flyering, our team expanded outreach activities by visiting locations such as **Stamford Train Station, B1C, Dunkin' on Elm Street**, and the **Government Center**, where we distributed **at-home HIV testing kits** and provided education and support.