Alameda County Health Care for the Homeless Commission Meeting

Friday February 15, 2019 10:00am -12 noon

APPROVED ~~DRAFT~~ **MINUTES**

HCH Commissioners Present	Absent:	County Staff/Partners Present:
Lois Bailey Lindsey	boona Cheema	Lucy Kasdin LCSW, HCH Interim Director
Lynette Lee (chair)	Gloria Crowell	Jeffrey Seal MD, Medical Director
Michelle Schneidermann, MD		Heather MacDonald Fine AHS
Laura Guzman		David Modersbach HCH
Fr. Rigo Caloca-Rivas (phone)		Theresa Ramirez HCH
Claudia Young		Luella Penserga, Consultant
Samuel Weeks DDS		

Item	Discussion/ Recommendations	Action
A. CALL TO ORDER 1. Welcome & Introductions 2. Adopt agenda – all in favor & agenda is approved.	Meeting Chaired by vice-Chair Lynette Lee . Convened 9:05am Adopt agenda – Agenda adoped by Commission.	**Motion:** L.B.Lindsey; Second: R.Caloca-Rivas Yea: unanimous
B. CLOSED SESSION	No Closed Session.	
C. PUBLIC COMMENT** Persons wishing to address items on or off agenda	No Members of public present to speak	
D. CONSENT AGENDA	Review and Approve Minutes of 1/18/2019 HCH Commission Meeting. Minutes approved by consensus of HCH Commissioners.	**Motion:** L.B.Lindsey; second, M. Schneidermann Yea: unanimous
E. HCH DIRECTOR REPORT	ACHCH Interim Director Lucy Kasdin provided HCH Program Update • Strategic Plan: Being implemented throughout health center (including CCAB, Commission and contractors) through work-groups organized around key priority areas. • Personnel: working with Executive Committee on Program Directors' role and position. ACHCH HR position is on notice that Commission will send out letter to urgently fill Directors' position. HCH Commissioners consensed that letter in its current form is appropriate to send. HCH has hired CHOW position, and are working with Program Finance Specialist position. • Quality: Patient Experience Survey – it will be implemented across programs and the pilot period will take approx. 6months. The project was in collaboration with	

	CCAB. Question: will results be submitted to HRSA? – the results are not required to be submitted to HRSA. • **Operational Site Visit**: 6 out of the 8 conditions have been lifted. The plan is to change co-applicant agreement with AHS to include more governance and contract monitoring; the second condition was to include Commission in the approval of contracts and specifically Scope of Project (taken care of in last HCH Commission meeting). Question: is there a timeline? – 60 days; next steps include to provide action plan. • **Contracts**: *Street Medicine RFP* – RFP presentation today for contractors to learn more about our organization and available contracts for street medicine services to homeless population. We would like to engage organizations and primary care clinics to encourage organizations to apply. *AHS/Sub-recipient* – we are still working on developing a contract to reflect the recommendations/requirements presented by HRSA and the contract will be submitted to the board for approval. *EBCRP* – contract will expire on March 4, 2019 and not be renewed, funding will be folded into Street Medicine RFP. • **Question**: have you reached out to mid-county organizations to apply for RFP? – ACHCH is not allowed to reach out to potential organizations. Urging Commissioners to use their connections to put out the word. • **Question**: are you confident about level of funding per team? – it is $350k per year per team and one-time money available for clinics that are new. Street medicine collaborative will be implemented to support new organizations that would like to provide street medicine services. • **Question**: potential contractors to replace EBCRP? – Street Medicine RFP was a $600k funding increase and would like to use the funds for street medicine services. • **Comment/Suggestion**: Whole Person Care funding ends December 2020, and it would be important for ACHCH to become more involved in steering committee to make **program more visable.** Could Kate Jones and Carol Burton to present to the commission, and discuss collaboration/intergration efforts w/ ACHCH?	
G. AHS Subrecipient Report	Heather MacDonald Fine presented a report on AHS Subrecipient activities: • **Uniform Data System** – data submitted to ACHCH. o EPIC: new electronic system that will be implemented across the system. Changes to take place September 2019. o There will be two systems providing data during the transition, but there will be a data analyst to control reporting to prevent errors. • **Finance**: the mobile health van was never designed to collect payment; patients were to be provided services for no-cost. Unfortunately, there has been instances where patients were sent bills and subsequently charged off to collections. AHS is currently resolving billing/finance components when providing services to homeless population. Approximately 66 patients were sent bills and seems to have been resolved. o **Question**: medi-cal enrollment/eligible patients, and patients that are enrolled? – when patients have medi-cal, they will be forwarded to eligibility technician; however, if they are enrolled to medi-cal services are automatically charged to medi-cal/insurance. o **Question**: has AHS sent bills over to credit bureaus? – AHS does	

	not send bills to collectors; however, we made sure that bills were corrected prior to being escalated to other departments. • **Quality Report**: AHS is currently implementing patient satisfaction, and it is still in the early stages; more updates will be provided soon. • **Governance**: AHS is currently seeking members for the forming AHS Homeless Health Center Co-Applicant Board. 3 presentations were made at patient advisory groups, and a list of candidates should be developed soon.	
H. HCH Commission Orientation: Initial 2018 UDS Report Numbers	David Modersbach presented the 2018 Health Center UDS utilization numbers which were to be submitted to HRSA after the meeting: ACHCH served 9,877 patients in 45,035 visits at all our sites. Rounded numbers by major service categories: • Street Medicine (including StreetHealth): 943 patients 2,500 visits • Shelter Health: 1,100 patients 2,000 visits • TRUST: 1,001 patients in 10,043 visits • Dental/Optometry: 700 patients/3000 visits • AHS: 6600 patients, 26,667 visits – Majority of health center $18.3mil is cost of health center activities, 113 FTE staff including some 500 providers countywide. We now have gender identify and sexual orientation overview for the first time; we will require contractors to collect gender and sexual orientation data. patients and visits. More comprehensive reporting will happen after HRSA evaluation and changes to report. **Recommendation by HCH Commission**: Development of a dashboard to provide commission on a quarterly basis to provide overview and action items that commission can support.	
I. REGULAR AGENDA • Consumer/Community Input – Report from HCH Consumer/Community Advisory Board • Executive Committee report • Action Item Election of Exec Committee Chairs • Street Health Committee • Finance Committee • Clinical Committee • ACHCH Strategic Plan 2019-2021	1. **Consumer/Community Input – Report from HCH CCAB:** Sam Weeks DDS a. **Alameda Point Collaborative:** Referendum in April. if the measure passes to block project, the land is owned by the federal government, and may become open space/parkland. • Feedback: residents experiencing homelessness should be encouraged to attend public hearings. • Suggestion: motion to endorse measures that support housing, respite services, and APC project. • PR Campaign: promote project and homeless population. • Invite Alameda Residents and CCAB who were formerly homeless to hearing and provide support. b. **Encampments:** closure of encampments took place a few weeks ago, and other encampments formed nearby. i. There is active sweeping taking place in Lake Merritt. c. HCH CCAB members are working to develop brochure for resource information d. **Census 2020**: looking for people experiencing homelessness to conduct special count to ensure homeless representation. e. **NHCHC Conference**: two participants are going, Jeannette Johnigan and Sabrina Fuentes. 2. **Executive Committee report** a. Letter to County HR re: HCH Director positon.	

	b. Reviewed two Commission applicants; committee interviewed candidates and overview was provided to Commission. c. A member of the HCH CCAB Denise Norman has submitted an application for HCH Commission. Commissioners reviewed her CV and application and will be interviewed by Executive Committee before next meeting. d. Committee members are interested in touring City of Oakland tuff-shed sites to understand how they are serving our homeless population. 3. **Street Health Committee** a. Meeting with Wilma Chan, Dave Brown, Vannessa Cedeno around Encampment letter advocacy. Will continue to work with County and Commission to track development of countywide encampment response and process to provide clearing and cleaning. Next meeting will be with Keith Carson. b. Discussion of SB1152 Safe Hospital Discharge standards. 4. **Budget/Finance and Contracts** no meeting this month 5. **Clinical Committee** no meeting this month 6. **ACHCH Strategic Plan 2019-2021** a. Not much time for discussion, but we will revisit Strategic Plan in February meeting. All commissioners are asked to review strategic plan, as they are expected to be involved in implementation, and ACHCH to provide quarterly updates. **Action Item:** Commissioners to review strategic plan and highlight categories of interest. **HCH Strategic Plan 2019-2022** available here.	
I. OTHER ITEMS 1. 2019 NHCHC Conference DC 2. Items for upcoming agendas:	1. Point in Time Count Review: overview was provided by Laura Guzman. 2. **Action Item** Selection of new HCH Commission Members **Motion to approve two new Commission members Shannon Smith-Bernardin and Ana Bagtas:** HCH Commissioners discussed selection of Shannon Smith-Bernardin and Ana Bagtas. Both highly recommended by Executive Committee. Each was approved by unanimous vote of HCH Commissioners present. 3. **2019 NHCHC Conference DC**: Selection of two HCH Commissioners to attend: Start procedure to enroll Lois Bailey-Lindsey to attend conference. Discussion of costs o sending a second Commissioner to HCH program. HCH Program will confer with fiscal and HCSA staff to determine if we can send a second Commissioner to this important conference. 4. **Items for upcoming agendas**: SB1152; hospitals are struggling with discharge and coordination into shelter health.	**Motion:** L.Guzman; second, M. Schneidermann Yea: unanimous
H. ADJOURNMENT	MINUTES APPROVED BY UNANIMOUS VOTE OF HCH COMMISSION 3/15/2019 Verified by Lois Bailey-Lindsey, Secretary HCH Executive Committee Lois Bailey Lindsey Date: 3/15/2019	11:00 AM