



**Attachment 1**  
HRSA Operational Site Visit Cheat Sheet for HCH  
Commissioners

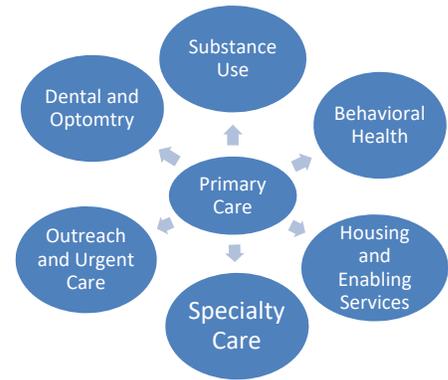
## Alameda County Health Care for the Homeless

### Preparing for the Upcoming HRSA Site Visit

#### What is ACHCH?

**Alameda County Health Care for the Homeless** is a health department-based health center whose mission is to improve the health of people experiencing homelessness by ensuring access to culturally informed whole-person health care and housing services.

**How does ACHCH operate?** ACHCH health center services are provided both directly by ACHCH program staff as well as by partners including Alameda Health System, FQHC clinics and community clinic providers. ACHCH health center patients are able to access a comprehensive range of services including primary care, behavioral health, substance use, outreach, specialty care, dental, and enabling services.



**History of ACHCH?** Alameda County Health Care for the Homeless Program has been a HRSA-funded health center since 1988. We provide a network of directly-provided, contracted and subrecipient-provided primary care, specialty, urgent care, dental, enabling, behavioral health, substance use and outreach services.

**What is HRSA?** The **H**ealth **R**esources and **S**ervices **A**dministration is the primary Federal (HHS) agency for improving access to health care services for people who are uninsured, isolated, or medically vulnerable. Among other things, HRSA provides funding to health centers. HRSA funds mostly community health centers (non-profits) and a few “public entities” (city and county health departments).

**What is HRSA’s relationship to Alameda County and ACHCH?** HRSA funds Alameda County Health Care Services Agency to operate ACHCH health center. Therefore, ACHCH is a HRSA funded public entity health center.

**How much does HRSA fund Alameda County for ACHCH?** In 2017, Alameda County received \$3.8 million in annual funding from HRSA. All (100%) of HRSA funds go directly to ACHCH program operations (staff, contracts, supplies, etc.). Over recent years, HRSA funds have covered 60% of ACHCH’s expenses.

**What is the history of ACHCH governance?** Prior to 2016, ACHCH was governed solely by the elected Alameda County Board of Supervisors. The County Board empowered the management of HCSA and ACHCH to run the program within the broad context of Alameda County government structure and oversight.

**What are HRSA requirements of a governance board?**

<b>HRSA Required Board Authority, Function and Responsibilities</b>	<b>Talking Points for ACHCH with HRSA Reviewers:</b>
Holding monthly meetings and maintaining records/minutes that verify and document the board's functioning	The HCH Commission has been meeting since September 2016. Meetings are public and minutes are available at <a href="http://www.achch.org">www.achch.org</a> .
Approving applications related to the health center project, including grants/designation applications and other HRSA requests regarding scope of project	ACHCH's last HRSA grant SAC was submitted before the Commission became governing board in 2016. The Commission has reviewed expansion grant applications and ACHCH continuation grant budgets.
Approving the annual health center budget and audit	HCH Commission approved ACHCH's 2018 budget in 8/2017, and will approve ACHCH's 2019 budget in August 2018.
Long-term strategic planning, which would include regular updating of the health center's mission, goals, and plans, as appropriate	ACHCH is in process of completing strategic planning; HCH Commission is involved in this process.
Evaluating the health center's progress in meeting its annual and long-term goals	HCH Commission receives regular data reports from program staff at monthly board meetings, including an overview of 2017 UDS report; <i>see March 2018 minutes</i>
Selecting services beyond those required in law to be provided by the health center, as well as the location and mode of delivery of those services	HCH Commission approved expansion of AHS specialty care and dental services and sites; <i>see July 2017 minutes</i>
Determining the hours during which services are provided at health center sites that are appropriate and responsive to the community's needs	HCH Commission will review hours at ACHCH service sites in upcoming meetings.
Approving the selection/dismissal and evaluating the performance of the health center's CEO or Executive Director	HCH Commission conducted Mark Shotwell's evaluation in 6/2017.
Establishing general policies and procedures for the health center that are consistent with Health Center Program and applicable grants management requirements	Since HCH Commission has only been in existence for a short period, has not Board-approved all ACHCH health center policies and procedures, some of which will be appearing before Commission in May, June, July HCH Commission meetings.

**What is the purpose of the HRSA site visit?** The goal is to assess ACHCH’s compliance in these four areas:

***Need:*** demonstration and documentation of the needs of the target population

***Services:*** client services, staffing, clinic locations, continuum of care, and quality improvement

***Management and Finance:*** staffing, contract and collaborative relationships, and financial management

***Governance:*** board authority, board composition, and conflict of interest

**Why is a site visit important?** After the site visit, the reviewers will provide a thorough report of ACHCH’s strengths and areas for improvement, as well as any areas where ACHCH may not be in compliance with various laws, statutes, and directives. The report is intended to be a useful tool to prioritize work and guide future efforts for the HCH Commission and staff. If areas of noncompliance with HRSA program requirements are found, HRSA can put “conditions” on the ACHCH grant that require the program to take action to come into compliance. Failure to meet these improvements can result in denied access to future HRSA funding opportunities and the potential for a progressive defunding of current grant amount.

**Who is involved in preparing ACHCH for the site visit?** A team of HCH program staff representing budget and finance, business operations, and management have been working to prepare for the site visit. The team has worked to gather documents that reviewers require to see. There is also a parallel process for Alameda Health System – as a major subrecipient providing a portion of ACHCH required health center services, AHS will also have to demonstrate compliance to HRSA health center requirements. The ACHCH team will be working directly with the HRSA reviewers when they are onsite.

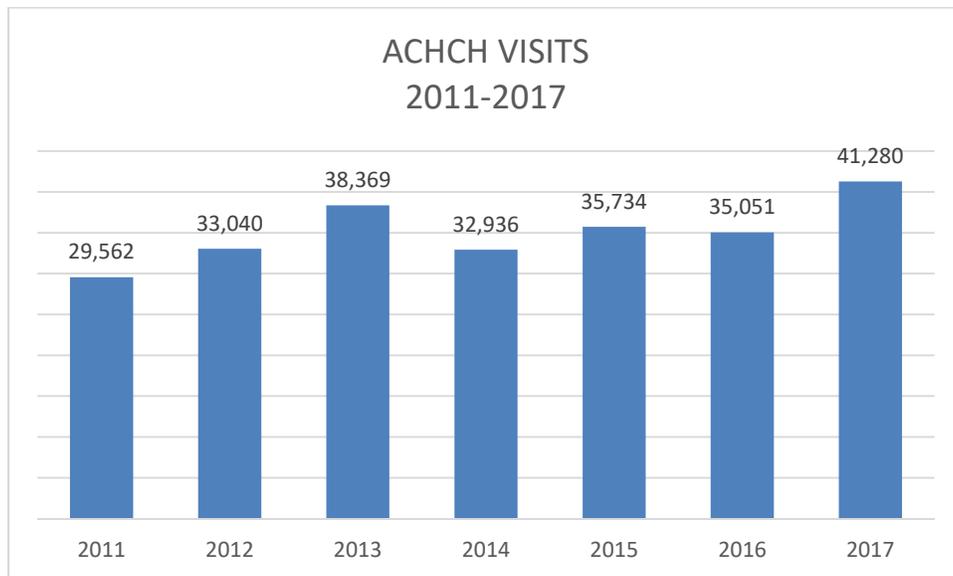
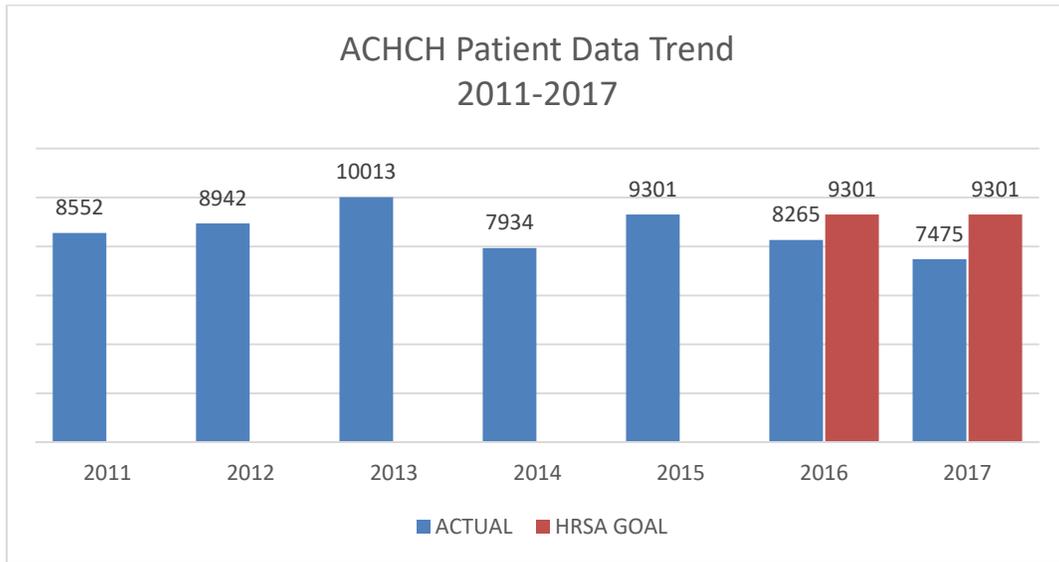
**How will the actual site visit take place?** The HRSA site visit team will be comprised of three consultants: clinical, financial and administrative/governance who will be on site to visit over three days. The majority of the visit will take place at our administrative office location at 1404 Franklin Street Oakland, where the site reviewers will review documentation of ACHCH’s activities, policies and procedures. **The reviewers also requirement a meeting with the HCH Commission without ACHCH staff present** and reviewers tour one or two ACHCH clinic sites and Alameda Health System.

**When is the date for the site visit?** Tuesday, August 14<sup>th</sup> – Wednesday August 15<sup>th</sup> -- Thursday August 16<sup>th</sup>. Significant meetings are as follows:

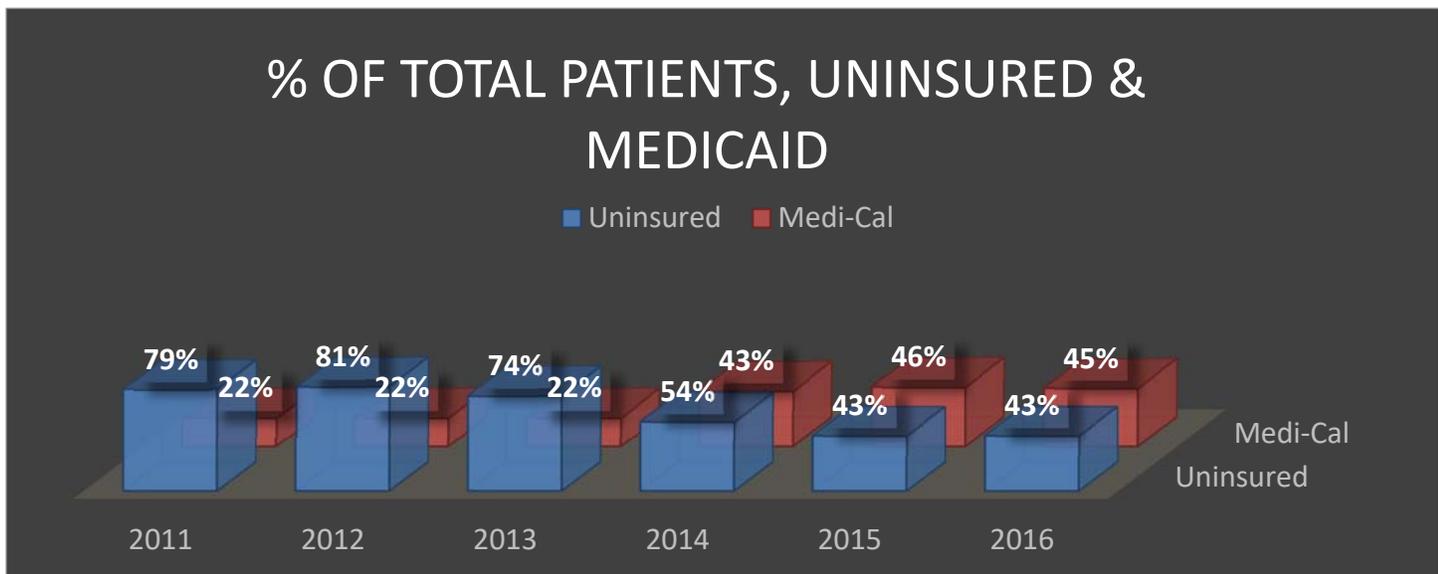
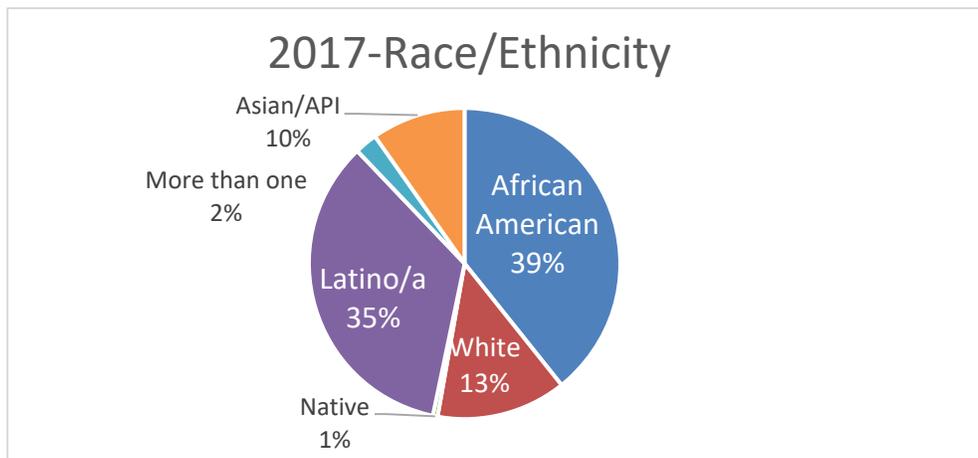
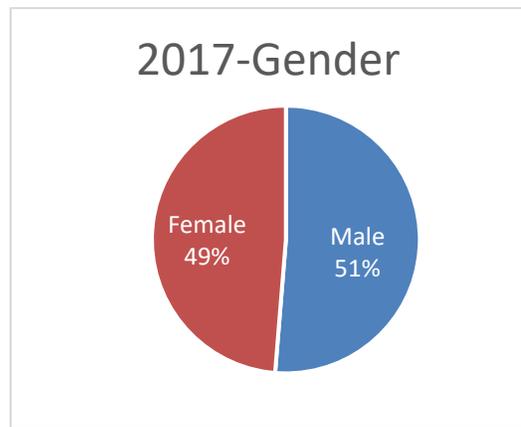
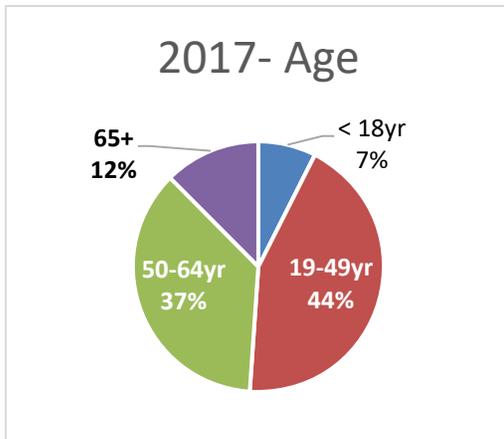
- Tuesday, August 14<sup>th</sup> 9am-10am- Entrance Meeting-key county management, AHS and ACHCH management, board members and CCAB members are encouraged to attend
- Wednesday August 15<sup>th</sup> noon-1:30- HCH Commission Meeting with OSV consultants.
- Thursday August 16<sup>th</sup> 11:30-12:30-Exit Meeting: findings reported, key county management and ACHCH management, board members/CCAB members are encouraged to attend

If you have any questions about Alameda County’s Health Care for the Homeless upcoming HRSA site visit, please call David Modersbach at Alameda County HCH Program 510-667-4487. To learn more, please visit <https://bphc.hrsa.gov/programrequirements/index.html>

## ACHCH Health Center Data Trends



## Patients Demographics



\*2014- Affordable Care Act expansion in California

Attachment 2  
Medical Respite Project

# Alameda Senior Housing and Medical Respite Center



## PROJECT SUMMARY

Spring 2018

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## PROJECT SUMMARY

The Alameda Point Collaborative (APC) has initiated the development of a Senior Housing and Medical Respite Center (Center) to help alleviate the homeless crisis and address adverse health outcomes among vulnerable populations in Alameda County. Medically frail and aging homeless individuals face exposures and trauma, worsening health conditions, premature mortality and the risk of dying alone on our streets.

The Center will link new housing resources, healthcare, and supportive services for medically vulnerable individuals experiencing homelessness. The trauma-informed and culturally responsive service model will promote trustworthy care, health recovery and permanent relief from homelessness.

Program	Units/Service	Persons Served
Senior Permanent Supportive Housing	80-90 units	Medically fragile and aging adults experiencing homelessness in Alameda County, who need a safe home to age in dignity and access to healthcare and other services
Medical Respite	50 beds	Individuals experiencing homelessness in Alameda County who are being discharged from hospitals or identified in other medical settings as in need of recuperative care
Resource Center	Drop-in center	City of Alameda residents who are homeless or at-risk for homelessness
Primary Care Clinic	On-site clinical care	Senior Housing residents, Medical Respite patients, and Resource Center clients

Alameda Point Collaborative (APC), a nonprofit supportive housing provider established in 1999, will develop the project. APC operates 120 units of permanent supportive housing, children and youth programs, and job training and social enterprises. In December 2017, the U.S. Department of Health and Human Services (HHS) conditionally approved the conveyance of the former Alameda Federal Center, a 3.6-acre/79,880 square feet surplus of federal property, to APC for the proposed Center. The property is located on McKay Avenue in a serene environment, just yards from the San Francisco Bay and the East Bay Regional Park District's Crowne Memorial State Beach in Alameda, California.

The scope of the project includes: 1) the renovation and conversion of four well-maintained WWII-era buildings for senior housing and 2) new construction of a two-story health and wellness facility that will house the medical respite program, primary care clinic and resource center.

An Advisory Committee, comprised of healthcare providers, consumers, service providers, public agencies, and local residents and businesses will provide key guidance for Center programs.

## BENEFICIAL OUTCOMES

The Center will aim to achieve the following eight project goals:

<b>Goal 1</b>	Senior Permanent Supportive Housing (PSH) for 80-90 aging homeless adults at a given time, enabling them to “age in place” in a dignified, service-enriched community environment.
<b>Goal 2</b>	Medical Respite will serve $\cong$ 274 homeless persons annually with an average length of stay of 60 days. The program will serve homeless patients with complex health conditions transitioning from safety-net hospitals and other referring agencies.
<b>Goal 3</b>	The Resource Center will provide drop-in services and housing advocacy for about 100 Alameda residents annually who are experiencing homelessness or at-risk of experiencing homelessness.
<b>Goal 4</b>	Improve health outcomes of homeless patients while realizing healthcare cost savings and efficiencies, by reducing unnecessary utilization of emergency services, hospital re-admissions, and long-term care placements.
<b>Goal 5</b>	Enhance the quality of life as well as increase the life expectancy of Senior Permanent Supportive Housing residents.
<b>Goal 6</b>	Provide safe and stable setting to resolve acute conditions and stabilize chronic conditions for complex patients experiencing homelessness.
<b>Goal 7</b>	Improve collaboration between health, public and nonprofit partners enhance health and housing outcomes for aging and medically vulnerable homeless individuals.
<b>Goal 8</b>	Expand resources for vulnerable residents in the City of Alameda and Alameda County, while attaining cost savings across multiple systems (law enforcement, Emergency Medical Services (EMS), behavioral health, hospital and long-term care).

## CENTER PROGRAMS

### MEDICAL RESPITE

The 50-bed Medical Respite Program will provide 24/7 acute and post-acute medical care and supportive services in a short-term residential setting. Patients will be homeless individuals who are too ill or frail to manage or recover from illness, injury or surgery on the streets or in emergency shelters, but for whom hospitalization is not a medical necessity. Transfer of care for referred clients will be coordinated with

East Bay safety-net hospitals, managed care plans, skilled nursing facilities, and other referring agencies. Without safe, clean and medically-enriched residential care, these individuals are at risk for adverse health outcomes, complications, re-hospitalizations and premature death.

Medical Respite services will include:

- On-site Federally Qualified Health Center (FQHC) clinicians to provide: urgent care, follow-up care for acute and chronic conditions, behavioral health care, wound care, medication management, health education;
- Care coordination and linkages to mental health, substance abuse services, specialty health care and primary health home;
- Trauma-informed case management to promote stabilization, healing and help clients to reach their wellness goals; and
- Aftercare planning that emphasizes safe and suitable housing placements and reconnection to the client's communities of origin or choice at discharge.

Medical Respite has achieved health improvements, enhanced quality of care and increased utilization of primary care. Research has demonstrated that Medical Respite has achieved notable cost savings for health systems by reducing preventable hospital readmissions and hospital inpatient days, decreasing emergency department use, and providing appropriate and lower cost ambulatory services.

## **SENIOR PERMANENT SUPPORTIVE HOUSING**

The 80-90 units of Senior Permanent Supportive Housing (PSH) will enable medically vulnerable and homeless adults 55 years and older in Alameda County to live with autonomy, dignity and independence. By becoming stably housed, residents will gain the foundation of safety needed to manage physical and behavioral health conditions, address complex trauma and social determinants of health, and receive palliative or end-of-life care when appropriate.

Supportive services will include:

- On-site primary physical and behavioral health services;
- In-home assistance with activities of daily living, such as bathing or dressing;
- Elder services to address geriatric conditions (cognitive, functional and mobility impairments);
- Peer recovery groups;
- Social and community-building activities;
- Palliative care; and
- Care coordination and transportation to specialty appointments and community-based resources.

PSH has been proven to promote both housing stability and health recovery for homeless individuals with

complex challenges. In addition, PSH has been shown to reduce overall public and health costs, particularly for residents who are both homeless and frequent users of multiple health services.

## **MEDICAL CLINIC**

The Center will operate an on-site Federally Qualified Health Center (FQHC) with the following services:

- Primary and urgent care, including physical and mental health services for clients with complex and chronic health conditions;
- Counseling for substance use recovery, Medication Assisted Treatment (MAT) for opioid use, and recovery groups;
- Some specialty health care, such as nutrition, podiatry and wound care;
- Complementary medicine to promote healing, reduce pain, and alleviate stress and behavioral health symptoms (e.g. acupuncture);
- Health education services; and
- Referrals and care coordination with specialists, hospitals, treatment programs, as well as appropriate community-based organizations.

The FQHC will be staffed by primary care providers, a psychiatrist, a registered nurse, licensed clinical social workers, and case managers to provide extensive clinical care for residents.

## **RESOURCE CENTER**

The Resource Center will provide a safe and welcoming drop-in space for City of Alameda residents who are experiencing or are at high risk of experiencing homelessness. Essential emergency supplies, such as blankets and food, will be available. The Resource Center will provide no-barrier case management and peer advocacy. The Resource Center will also provide extensive housing placement services to enable clients to access safe and suitable housing resources.

## **SUMMARY**

The Alameda Senior Housing and Medical Respite Center provides a unique partnership opportunity for health care and housing providers to provide vitally needed resources for our most vulnerable populations. The Center will have a special focus of providing housing resources, healthcare, and intensive services for aging as well as medically fragile homeless adults. The proposed Center will promote access to housing stability, health recovery, a supportive community to rebuild their lives and when appropriate, end-of-life care.