In-County Stakeholder Interview Format (Contracted/Collaborating Providers)

Goal:

* To ascertain stakeholder’s perspective on what HCH functions and activities should be expanded/developed
* To learn stakeholder’s perspective about relationship with HCH as a contractor
1. Brief Orientation to HCH
	1. Reach: 7500 pts served in 40,000 appointments (cal year 2017)
	2. Operating under HRSA Definition of Homelessness
	3. Primary Care
		1. HRSA Sub-recipient agreement/FQHC status
			1. Primary Care Clinics (5)
		2. Trust
	4. Medical/AOD Health Outreach (Contracted/Prog Operated Services)
		1. Mobile Medical Clinic (Prog Operated)
		2. Backpack/Street Medicine (Contracted)
		3. Substance Abuse Outreach (Contracted)
		4. Dental/Optometry (Contracted)
	5. Outreach Provider Training and Education
2. Qualitative Data
	1. What critical gaps do you see in the county health system serving the homeless?
	2. What HCH network services have you had contact with?
	3. What are HCH greatest strengths?
	4. What HCH’s greatest weaknesses?
	5. Which of the activities mentioned are most important in increasing health outcomes for homeless individuals?
	6. Are there activities related to the role of HCH (facilitating access to health care) that you feel are missing all together from the list?
	7. In what ways can HCH support collaboration between providers in addressing homeless individual’s health needs?
	8. In what ways can HCH support coordination of health services for homeless individuals in the county?
	9. (Contractors) What does HCH do well as a contracting entity?
	10. (Contractors) What opportunities do you see to strengthen HCH’s relationship with contractors?