

Contra Costa County Health Services

Health Care for the Homeless Co-Applicant Governing Board

The mission of the Health Care for the Homeless Co-Applicant Board is to oversee, guide and assist the Program in its efforts to deliver high quality health care to a diverse and medically underserved community. The Co-Applicant Board will use its skills, expertise and life experience to make policies and operational decisions which will provide the best benefit to the Program and client.

MEETING MINUTES

DATE, TIME: Wednesday, January 18, 2017 11:00-12:30pm

LOCATION: Suite 120, 597 Center Avenue, Martinez, CA 94553

ATTENDANCE: Belinda Thomas, Bill Shaw, Dr. Wendel Brunner, Bill Jones, , Larry Fairbank Sr., Robin Heinemann, & Nhang Luong

ABSENT: Shayne Kaleo, Matt Rinn, Jonathan Perales

HCH STAFF ATTENDANCE: Julia Surges (HCH Consumer Liaison), Linae Young (HCH Planning & Policy Manager), Rachael Birch (HCH Interim Project Director), Alvin Silva (Interim CCHS PHCS Assistant Direct, Past HCH Nurse Program Manager), Dr. Joseph Mega (HCH Medical Director), Elizabeth Gaines (Interim HCH Nurse Program Manager), Sue Dickerson (RN, HCH Respite Clinic)

PUBLIC ATTENDANCE:

1. Welcome & Introduction

- Introduction

2. Standing Item: HCH Team Presentation – Sue Dickerson (RN, HCH Respite Clinic)

- Introduction to the HCH Respite Clinic in Concord.
 - A. The Respite Center first became a thought when hospitals in CCC all came together to discuss how to lower ER visits.
 - B. Respite Center modeled after existing Respite Centers with the coordination with National Health Care for the Homeless Council.
 - C. Respite services include: Connecting patients to care (PCP), care coordination, education & instruction on medications, connect to care (Mental Health and Substance Abuse), help patients become independent and healthy.
 - D. Average length of stay for patients is about 6 weeks and typically they are referred to the shelters within the HHHS program where health services can continue for the patients.

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- E. There is no nursing care aside from the clinic. The top two denials of referrals to the Respite Center are incontinence and have insurance from outside CCC.
- F. Most cases are those with COPD, Diabetes, Motor vehicle accident/Pedestrian trauma, cancer, and post-op surgery.
- G. Respite has a contract with the VA, there is more availability for veteran patients who qualify with the VA as the respite center will also receive referrals from outpatient.

Questions:

- Are there drop-in appointments for AOD/MH Services? → Drop-ins are for their clients only. The clinic is able to see anyone/can connect to and from there they can connect to AOD services/Mental Health.
- How do referrals work for dental services? → if you have Medi-Cal and you are homeless you can receive dental services by call respite dental appointment line.
- What is the criterion to be a county resident? → Respite goes by insurance, if their insurance is Solano, they are not a priority. Hospitals now know to get the insurance for CCC right away, there are exceptions to help those out of County but those who are within the County and have insurance within the county are a priority.
- **Do the hospitals contribute to maintain the facility?** → Unsure, will look into this.
- Does the clinic bill FQHC? → Yes
- What happens when Affordable Care Act doesn't exist? → We will take this on once that arises.
- Do we see more beds coming to the shelters/respite in the future? → That would be a Health, Housing, and Homeless Division question as they are the ones that manage the shelter beds. However, I do know that they want more housing rather than more shelter.

3. Introduction to Rachael Narin-Birch, Interim Project Director of HCH

Program – Dr. Wendel Brunner

Board requests Rachael to join the conversation so they can interview her for the designation.

- A. Rachael has come in and joined the meeting to explain how she has first started working with the homeless and what got her interested in this special population.
 1. She has a strong interest in grant writing that will help bring in funding to help the homeless population. She enjoys figuring out new opportunities to benefit

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the population as a whole. She wants to see what other programs are doing and what other standards are being set and how it can be brought to the program. She is the liaison with HRSA and makes sure our system meets those requirements.

2. Questions from the Board for Rachael Birch

- Assuming resources stay stable, what challenges do you foresee? → She wants to get the information on what barriers will come up and how will we will best prepare for them. There is so much unknown but would like to be proactive and figure it out how we can utilize resources we currently have or other resources that we can try to receive. She would identify what exists and leverage from there.
- Assuming you have resources what would you want to do? → Expand substance abuse services, better integrate services, and continue to increase dental services. Additionally, expanding and building on Medical Outreach efforts that Dr. Mega runs – bringing that to more people. She believes our medical services have done a great job and there are additional ways and areas to expand
- Program accomplishment you are most proud of and why? → Our HCH team. They are very impressive the way that they work together and are so dedicated to the population we serve. Additionally, the accomplishments that she is proud of that she has personally done are securing the funds to sustain, expand and enrich the HCH Program.
- To her colleagues: Why do you feel she is a good fit for the position?
 - Dr. Mega (HCH Medical Director) – she is the glue that keeps the program together, with HRSA, knows how to run organization well just as well as the CFO.
 - Dr. Brunner (Past Public Health Director) – lucky to have her, very confident in her program organization and management, worried that we will lose her and we are lucky to have her.
 - Alvin Silva (Past HCH Nurse Program Manager) - great advocate for CCC homeless clients, easy to get her engaged in plans regarding homeless patients, likes her commitment and advocacy to do what is best for the patients, knows population well.

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4. Action Item: Designation of HCH Project Director - Dr. Wendel Brunner

Motion

- A. **Statement:** “I make a motion to designate our submission for Rachael Narin-Birch to be HCH’s Project Director.”
- B. **Motion Made by:** **Dr. Brunner – made statement/Robin Heinemann – repeated**
- C. **Belinda Thomas seconds the motion.**
- D. **Discussion:** No further discussion needed
In Favor: **Bill Jones, Bill Shaw, Larry Fairbanks, Nhang Luong**
Opposed: N/A
Abstains: N/A
Absent: *Matt Rinn, Shayne Kaleo, Jonathan Perales*
Motion Result: Motion Approved

5. HCH Project Director Discussion - Dr. Wendel Brunner

- How are we going to evaluate the Project Director process?
 - A. Ideas → annually
 - B. Interim now → we can shorten to a 6month and then change it to a year
 - C. Is she already going to have an evaluation in the meantime → Sue Crosby is responsible and Rachael is evaluated regularly by her.
 - D. Can we have access to her evaluation records? → will check it out, but we can include Sue Crosby – use what exists on evaluation already = less work
 - E. **What is the criterion?**
 - Qualitative and tangible/measurable data, whatever they have that we are able to see.
 - Feedback from Sue or someone else in the system
 - If we can’t have access → make this as reasonable as possible so no one is doing anything extra.
 - **Bring the current evaluation form for next meeting to review by board.**
 - **Create a committee later to create as evaluation and selection process for Project Director Designation.**

6. Overview of CCHS & HCH Program Structure - Linae Young, HCH Program Manager (all on Meeting Presentation Slides)

Questions/Discussion:

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A. Where is health in HHHS? → Linae: we are the health services that go along with that program as the health piece but they do a lot of the Mental Health side, we are integrated. Dr Mega – housing is HUD and health is recognized as housing is part of health. Bill Jones – we provide housing help, but not medical services but rather linkages to health services.

7. Standing Item: HCH Program Updates

- HCH Program Clinic Schedule Update in February.
- This clinic schedule update was assessed and updated back in September based on the addition of a Mobile Health van to the HCH Program, closure of Multi-Service Centers, and in coordination with the new Coordinated Entry System managed by the Health, Housing and Homeless Division. Additionally, the HCH Program conducts monthly reviews of clinic productivity and quarterly patient focus groups to assess the needs of the population. The results of these needs assessments were also included in the finalization of the update.
- HCH Team Members will be conducting outreach for the updated HCH services and clinic schedules.
- Flyers will be located in all health centers and entry points into the CCHS system.
- Does anyone have any suggestions/feedback on outreach efforts within the county?
 - A. Parks throughout the county (talk to cops or social worker) community center at parks, canal trails, North Richmond Canal – laminated flyer for the fence, police supervisors to pass on to staff, fire departments, code enforcement offices, detention facilities, those who live in their cars are often overlooked so local grocery stores, churches, libraries, local homeless providers and agencies where your clinics are.

8. Standing Item: Future Matters

- February: Presentation on HCH Medical Outreach Team from Dr. Joe Mega, HCH Medical Director
- February: New Member Applications → what are the qualifications we are looking for
- February: Overview of HCH/CCHS HRSA Scope & Availability
- March: Presentation of 2015 UDS Report
- Thoughts for future items to discuss?
 - A. Bill Jones will not be in attendance for February Board Meeting.
 - B. Need to talk about new member education and the criterion for these members.



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C. County's performance evaluation form for Project Director of the HCH Program.

9. Standing Item: Next Meeting

- February 15th, 2017 from 11:00-12:30pm at 597 Center Avenue, Martinez, Suite 120

10. Motion to adjourn – Belinda Thomas, Bill Shaw seconds.

Approval of HCH Co-Applicant Board Meeting Minutes from January 18, 2017

Board Chair Signature _____ *Wendell Brummer MD*

Date — 02/27/2017 _____