

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, July 19, 2017 11:00-12:30pm

LOCATION: Zion Conference Room, 2500 Bates Avenue, Suite B, Concord, CA 94520

ATTENDANCE: Dr. Wendel Brunner, Jonathan Perales, & Bill Shaw

ABSENT: Bill Jones, Nhang Luong, Jennifer Machado, Matt Rinn, Robin Heinemann, Larry Fairbank Sr., Belinda Thomas, & Shayne Kaleo

HCH STAFF ATTENDANCE: Julia Surges (HCH Consumer Liaison), Rachael Birch (HCH Project Director), & Alvin Silva (PHCS Director)

PUBLIC ATTENDANCE: None

Welcome & Introduction

- Map on how to get to Bates → Julia S. (Consumer Liaison) will map birds eye view, explain the streets you need to turn and enter on for future meetings (need directions to Bates from either direction i.e. from East County or West County)
- Text message reminders – rather than emails. Jonathan appreciates.

Action Item: Approval of June Board Meeting Minutes

Motion

A. **Statement:** *I approve the meeting minutes with the following amendments.*

B. **Motion Made by:** *Dr. Wendel Brunner, Chair*

C. **Seconds the Motion:** *Bill Shaw*

D. **Discussion:** *No discussion needed*

E. **In Favor:** *All*

Opposed: None

Abstains: None

Absent: Bill Jones, Nhang Luong, Jennifer Machado, Matt Rinn, Robin Heinemann, Larry Fairbank Sr., Belinda Thomas, & Shayne Kaleo

Motion Result: *PASSED*

Contra Costa County Health Services
Health Care for the Homeless Co-Applicant Governing Board

HCH Patient Satisfaction Survey Results (Julia Surges, HCH Consumer Liaison)

Questions & Discussion:

- San Ramon – some homeless there → Reach out to CORE team and maybe have our Outreach team go there.
 - Future: Re-word “where are you receiving your primary health care?” question → primary care could be confusing. Instead maybe say doctor
-

HCH Outreach & Marketing Strategies (Julia Surges, HCH Consumer Liaison)

Questions & Discussion:

- Project Director: suggested doing a presentation (brief like 15 min) to places that provide or come in contact with homeless individuals. Wendell suggested that there be an education piece on HCH and homeless resources that we provide.
 - A. We should maybe have a list of services on vans/service sites so people are aware of what we have to offer.
 - B. HCH Program is now present at hospitals.
 - C. Impressive to see staffs interest and surprising that many did not know who we were.
 - Board Member: Outreach to Laundry mats
 - Board Member: any talk on moving populations? Are homeless traveling throughout different cities in the county?
 - A. Future: Would like a summary update on people moving and even immigrants
 - B. Immigrants are calling less and less → target to help and make Hispanic population aware of services
 - Board Member: Length of time of homelessness, where they came from
 - HCH Staff: Dr. Mega is a great advocate at CCRMC ER and it would be helpful to make other ERs in CCC aware of HCH → Future: Possible communication with outside ERs.
-

HCH Program Budget Introduction (Dr. Wendel Brunner, HCH Board Chair)

- Important to think about budget of HCH and the board and realize what we have control over and those that we have an influence over → look at the budget and how it is structured, it will help us think about the budget and move forward
- Project Director: We receive \$xx from HRSA through grants.

Contra Costa County Health Services

Health Care for the Homeless Co-Applicant Governing Board

- A. The way it works → HRSA provides base funding to provide services to the homeless residents of CCC, on top of that they provide additional funding/grants we apply for.
1. For example = Oral Health Expansion Grant → these grants are specific on what services they need to provide and how they funds are used. Additionally, Medication Assisted Treatment (MAT) Grant → \$xx for care management model to help clients using opioids, we have to use HRSA's model.
 2. Therefore, HRSA base grant = HCH program services, other grants like dental and MAT = additional grant funding we have applied for and received that have certain requirements.
 3. There is less wiggle room when dealing with the “other” grant funding due to its requirements and restrictions.
 4. Budget for overall homeless services is much higher → approximately, \$\$ per year to help the homeless population = in hospital, healthy start, etc.
 - i. Board Member: How do we get the additional funds for the remainder? = REVENUE from CMS (center for Medicaid services).
 - ii. Each time Homeless receives service we (health services not just HCH) get revenue from the feds, that revenue exists because of the Health Care for the Homeless grant and our classification of Federally Qualified Health Centers.
 - iii. Grant money and revenue = 2 funding sources for HCH Program
- B. Board Member: How does the MAT Program work?
1. When awarded the funds for a specific grant we then have to do follow the requirements and use the model, a model that is likely to work and gets the whole program running = influence not control.
 2. A lot of work on our end because we need to make sure the deliverables meet HRSA requirements and is inclusive to the homeless (this applies to all HCH awarded grants).
- C. Board Member: How do we get future funding?
1. Already a grantee = we get the left over money that they give out “another opportunity” → For example current grant for substance abuse and mental health services and a one-time funding for training/IT is available to us.
- D. Board Member: What is the time frame to address the HCH FY2018 budget?
- Open now, we have until the middle of September
 - Repeating renewals at the end of 3 years, we compete with other programs → this year is no renewal and we just have to apply

Contra Costa County Health Services
Health Care for the Homeless Co-Applicant Governing Board

- Budget January 31st 2018 = budget renewal. No approval until February 1st 2018.
- Next Meeting in August we will discuss this further.

Action Item: Request or Approval of Supplemental Grant Funding (Rachael Birch, HCH Project Director)

- Have the opportunity to provide training and software upgrades to our system that will specifically help our MAT program
- The grant funds are for \$75,000 in services and \$75,000 for training/IT
 - A. We will need to prove that funds are equally distributed to Substance Abuse and Mental Health by using MAT we are hiring a CHW to help program
- We do a good job with direct services but have neglected to support Nurse Care Managers. Currently, doing clerical duties, to hire a CHW to help assist nurses. Funding will not be enough but county is willing to help support and pitch in extra to cover remaining costs.
 1. Would be great to have support for nurses and free them up allowing them to focus on more clinical things.
 2. Met with MAT team and they are in full support of hiring a CHW to help the clinic run.
 3. Looking to expand the clinic – need more providers, have quite a few but need more.
 4. Some clinics are ran by Nurse Care Manager or LCSW
 5. 3 nurses hired, 1 vacancy → 275 current patients on Buprenorphine now.
- B. Training and/or software to help our service delivery
 1. Idea = trainings in mind, putting money into software complicated → want to do trainings that help providers learn about MAT and encourage them to become DATA Waivered providers in the clinic, an influence strategy to educate providers on MAT and hopefully inspires them to get their waiver to be able to prescribe
 2. Want to let the providers know that we have the help to get the patient on the road to recovery
 3. Anxiety of providers, fear the unknown → we would come in and provide information to hopefully alleviate apprehension.

Contra Costa County Health Services
Health Care for the Homeless Co-Applicant Governing Board

- Board Member: Brentwood population of homeless is growing; the outreach team has been seeing those patients. There is not a lot of support, but HCH has a clinic in Antioch
 - A. Board Member: Do they see farm workers?
 1. We do not know, John Muir has a community program where they go to the Brentwood area and provides services to migrant workers.

Motion

F. **Statement: Motion to approve the grant and move forward.**

G. **Motion Made by: Bill Shaw**

H. **Seconds the Motion: Dr. Wendel Brunner, Chair**

I. *Discussion: No discussion needed*

J. *In Favor: All*

Opposed: None

Abstains: None

Absent: Bill Jones, Nhang Luong, Jennifer Machado, Matt Rinn, Robin Heinemann, Larry Fairbank Sr., Belinda Thomas, & Shayne Kaleo

Motion Result: PASSED

Standing Item: HCH Program Updates

- MHCS Interviews
- CHW II Position Open
- Board Meeting Location

Standing Item: Future Matters

- HCH Medication Assisted Treatment Presentation
- HCH Budget Introduction
- HCH Strategic Plan & Logic Model
- HCH Patient Utilization Update → efforts in providing data on that
- Look specifically what we want on the board and look at areas where we want someone more specific on the board.

Standing Item: Next Meeting and Time



Contra Costa County Health Services
Health Care for the Homeless Co-Applicant Governing Board

August 16, 2017
11:00-12:30pm
2500 Bates Avenue, Suite B
Zion Conference Room
Concord, CA 94520

Approval of HCH Co-Applicant Board Meeting Minutes from July 19, 2017

Board Chair Signature _____ *Wardell Brunner MD*

Date August 16, 2017