Health Care for the Homeless
Co-Applicant Governing Board

WEDNESDAY, MARCH 15, 2017
11:00-12:30PM
597 CENTER AVENUE
SUITE 150
MARTINEZ, CA
Health Care for the Homeless Co-Applicant Governing Board

ACTION ITEM:

APPROVAL OF FEBRUARY HCH CO-APPLICANT BOARD MEETING MINUTES
HCH Dental Presentation

DR. PREETI D’SOUZA
HCH DENTIST

CONTRA COSTA HEALTH SERVICES
Health Care for the Homeless
Co-Applicant Governing Board

UDS RESULTS
UDS Who, What, Why

**WHO:** All Section 330 grantees of the Public Health Services Act are required to submit UDS reports annually.

**WHAT:** A detailed picture of our health center using:
- 12 tables which provide clinical, operational, financial data and Health Information Technology (HIT).

**WHY:**
- Comply with legislative & regulatory requirements
- Inform HRSA, Congress and the public of health center performance & operations
- Identify trends overtime
- Identify & target effective programs, services and needed interventions
- Permit comparison with national benchmarks
Colorectal Cancer Screening

• **WHY:** If patients receive appropriate colorectal screening, then early intervention is possible & premature death can be averted.

• **NUMERATOR:** Patients with one or more screenings for colorectal cancer.

• **DENOMINATOR:** Patients who were aged 50-75 with a medical visit during the measurement period.
Colorectal Cancer Screening

Performance Measure: Percentage of adults 50-75 years of age who had appropriate screening for colorectal cancer.

- 2012: 38.57%
- 2013: 45.71%
- 2014: 41.43%
- 2015: 47.14%
- 2016: 44.89%

HCH Program Goal: 50%
Preventive Care & Screening for Clinical Depression & Follow Up

- **WHY:** If patients are routinely screened for depression & are provided with a follow up plan if they are screened positive, then they will be more likely to receive the needed treatment & less likely to suffer from the sequela of depression.

- **NUMERATOR:** Patients screened for clinical depression on the date of the visit using an age appropriate standardized tool & screened positive for depression, for whom a follow up plan is documented on the date of the positive screen.

- **DENOMINATOR:** Patients aged 12 years and older with at least one medical visit during the measurement year.
Performance Measure: Percentage of patients aged 12 years & older screened for clinical depression on the date of the visit using an age appropriate standardized depression screening tool, & if screening is positive, for whom a follow up plan is documented.
UDS Submission Next Steps

- **Submission Date** = February 15th, 2017
- **Review Period** = February 15th – March 31st
  - At this time we will work with the reviewer to update/address any needed changes to the report.
- **Submission Finalized** = March 31st
  - All corrected submissions must be finalized and no further changes can be made.
ACTION ITEM:
REQUEST FOR APPROVAL TO ADD CCHS SPECIALTY SERVICES TO HCH PROGRAM HRSA SCOPE OF SERVICES
Specialty Services

- Audiology
- Cardiology
- Chiropractic
- Dermatology
- Ear, Nose and Throat
- Endocrinology
- Gastroenterology
- Hematology/Oncology
- Infectious Disease
- Internal Medicine
- Nephrology
- Neurology
- Ophthalmology
- Orthopedics
- Pulmonary Disease
- Rheumatology
- Surgery
- Urology
Perspective Board Member Interview

BOARD INTERVIEW WITH PERSPECTIVE MEMBER JENNIFER MACHADO
HCH Program Updates

- HCH Co-Applicant Board Photos & Bios
  - Review roster as this will be included on the website
  - HCH Co-Applicant Board Members

- HCH New Mobile Health Van has started working in the field with the HCH Team

Other ANNOUNCEMENTS?
Future Items to Discuss

- HCH Budget Overview
- HCH Patient Satisfaction/Needs Assessment Results
- HCH Staff Position Discussion
Next Meeting
Wednesday, April 19, 2017
11:00 – 12:30pm
597 Center Avenue
Martinez, CA
Conference Room 120