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, February 20, 2019 11:00-12:30pm
LOCATION: Zion Conference Room, 2500 Bates Avenue, Suite B, Concord, CA 94520
ATTENDANCE: Teri House, Jonathan Russell, Bill Shaw, Michael Callanan, Nhang Luong & Jennifer Machado, Dr. Wendel Brunner (telephonic) & Shayne Kaleo (telephonic)
ABSENT: Jonathan Perales & Bill Jones
HCH STAFF ATTENDANCE: Rachael Birch (HCH Project Director), Dr. Joseph Mega (HCH Medical Director), Julia Surges (HCH Health Planner Evaluator), Elizabeth Gaines (HCH Nurse Program Manager) & Michael Myette (HCH MH Supervisor)
PUBLIC ATTENDANCE: None

Agenda Items for Approval and/or Review:

1. Action Item: APPROVAL - January Meeting Minutes
2. Quality Improvement/Assurance & Program Performance Reports by HCH MH Supervisor
3. Action Item: HCH Project Director Evaluation

Welcome & Introduction

- Introduction to board members and community members present

Action Item: Approval of January Board Meeting Minutes

Board Feedback/Edits: Eliminate the extra A’s and dashes (apparently there are some) – Completed
Standing Item: Quality Improvement/Assurance & Program Performance Reports
(Michael Myette, HCH MH Supervisor)

1. BH Rapid Improvement Project
   a. Mike and 2 MH Clinical Specialists
   b. Have expanded over the past year with H3
   c. Started doing live assessments off of the access line

2. Homeless Mentally Ill Outreach Team (HMIOT) updates
   a. Homeless Mentally Ill improvement and treatment grant - support those homeless and mentally ill in the field, funded outside of HRSA
   b. BH, H3, and HCH – received grant through 2020
      i. HCH to hire on MH staff to support
         1. Goal is to expand the warm hand off access and be more community based and hire more people to be nimble and be able to connect people
      ii. Psychiatric Care – no longer apart of HCH but available to patients in the field and in shelters
   c. Questions:
      i. Board Member: Acronym – HMIOT, grant source → DHCS (Department of Health Care Services)
         1. Unique piece brought the 3 units together (BH, H3, and HCH)
            a. Identify who is not getting services and to fill the gap
      ii. Board Member: Were there certain objectives?
         1. Analysis conducted on patient and assessed from there about how many would utilize these services.

Motion
A. Statement: I move to approve the minutes from January 2019.
B. Motion Made by: Bill Shaw
C.Seconds the Motion: Teri House
D. Discussion: None
E. In Favor: ALL
   Opposed: None
   Abstains: None
   Absent: Bill Jones & Jonathan Perales
Motion Result: Approved
iii. Board Member: Is there a connection with H3 for housing?
   1. Yes, that is the goal for all, but this is to house the mentally ill.
   2. Focus on these patients and get them housed and have wrap around
      services with access to MH services.
iv. Board Member: How do clients come to us?
   1. CORE, referred by shelter, can come into clinics,
      a. Would contact CORE first but they can refer them to our van
         as well.
v. Board Member: Who provides BH services in the shelters?
   1. Transitions team that is part of BH and located in the shelters, HCH
      works closely with these providers.
   2. Transitions sees those that are more severe and are a small team
      a. Do not do a lot of outreach, they have a system to reach
         those that are very high need (less in the field)
      b. Only carry for a couple to a few weeks
vi. Board Member: For immediate response?
   1. MCRT – Mobile Crisis Response Team
      a. Responds immediately – in the field
3. HCH BH Expansion (2 new positions)
   a. Goal is to expand the warm hand off access and be more community based, be
      more into the field → hire more people to be nimble and be able to connect people

Action Item: HCH Project Director Evaluation
(Board and Key Management Staff)

2018-2019 Program Goals progress review (Green bars = Goals; white bars = objectives)

1. Goal 1
   a. Bridging 2 separate programs (by Linae, oversees 6 staff that work with
      homeless, acts as a liaison between community programs & H3) Community
      Connect and HCH
   b. CORE is starting to receive calls and they will dispatch in HMIS and email case
      manager if the patient has a case manager
2. Goal 2
   a. Missing a documented plan
b. Learning how complex the needs are especially those of the homeless
c. DHCS funding (HMIOT) – did not realize how extreme the needs are of the homeless because if they aren’t accessing resources, it is hard to track.
d. Trauma informed care trainings – when you see a patient and recognize a patient has trauma (i.e. being mindful, ask the patient “what happened to you” instead of “what is wrong with you”.)

3. Goal 3
   a. No comment

4. Goal 4
   a. Insuring there is data sharing between programs if it pertains to patient care – specifically homeless clients
   b. Senate Bill 210 authorizes this disclosure to happen but offers no money to fund this planning, process or coordination.
   c. Senate Bill 1152 that does not allow hospitals to discharge patient with no resources or help after discharge.
   d. Data committee – developed a repository so we can exchange data
      i. Result: Access to increase in data
      ii. Result: Larger CCHS system currently does not conduct screening for social needs however have a lot of claims and medical data.
      iii. Future: Plan to embed social needs screening with chart for HCH
         1. The concept is that all of Health Services will use a standardized screening.
         2. What we know is what patient has received but we do not know what they do need.

5. Goal 5
   a. Congestive Heart Failure – new and what we want to work on
   b. STD – including SBC and HCH
   c. UDS results to be presented in April

6. Goal 6
   a. New bus – will be able to bill because it will be licensed mobile clinic unlike our current HCH mobile van.

Board Member: There are not outcome metrics
   a. What outcomes can we put metrics – what did it do to the program
      i. Might not be for all, some might be a graph (health outcomes)
      ii. Outcome instead of progress
      iii. 2019 goals?
Project Director requests of Board

2. Request 1
   a. Standing goal of the board, and would like it to be continued

3. Request 2
   a. No Comment

4. Request 3
   a. Allows us to critically think and think about how we improve

5. Request 4
   a. Standing goal of the Board, the Board are the arms in legs in the community to other agencies

6. Request 5
   a. Possibility of expanding agenda item on announcements or things that have been heard

HCH Program Action Items:

- End of Year - put together an outcome for program goals and clarify 2019 goals/objectives.
- Project Director would like to add to goals → need something in writing that documents the referral process (need a structure) → complicated because of the bigger BH process
- April - UDS results to be presented

Standing Item: HCH Program Updates & Community Updates

1. Next Meeting Attendance – March 20, 2019
   a. 123 MacDonald Ave as the address
   b. Tour and abbreviated meeting
   c. Linae and Jonathan to coordinate

2. New Antioch Locations to park mobile health?
   a. Teri to talk to the police team and come back with info

3. Looking to make schedule more consistent for clients

4. Schedule meeting to discuss possible health questions for intake form at shelters

5. Linae waiting for reply from H3 about Respite visit and meeting to discuss healthy food options.
Standing Item: **Future Matters**
1. Health questions possibly included in intake questionnaires and PIT 2020
2. HCH Strategic Plan Committee
3. HCH Clinical Measure Reports: Cervical and Colorectal Cancer
4. Board Evaluation

Standing Item: **Next Meeting and Time**
Wednesday, March 20, 2018
11:00-12:30pm
123 McDonald Ave.
Richmond, CA 94804

Approval of HCH Co-Applicant Board Meeting Minutes from February 20, 2019

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

Date 3/20/2019

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