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, February 16, 2022, 11:00-12:30pm
LOCATION: Zoom
ABSENT: Michael Callanan, Silas Robinson
HCH STAFF ATTENDANCE: Linae Altman (HCH Planning & Policy Manager), Rachael Birch (Project Director), Heather Cedermaz (HCH Lead Provider), Gabriella Quintana (HCH QI Team)
PUBLIC ATTENDANCE: Jill Ray

Agenda Items for Approval and/or Review:
1. Action Item: APPROVAL – January Meeting Minutes
2. Action Item: APPROVAL – Annual Project Director Evaluation

Welcome & Introduction

Action Item: Approval of January Board Meeting Minutes

Motion

A. Statement: I move to approve the minutes from January 2022. With spelling correction noted by Claude Battaglia.
B. Motion Made by: Jonathan Russell
C. Seconds the Motion: Teri House
   Roll Call Vote: Each voting member must verbally approve or oppose
   OPPOSED: None
   ABSTAINS: Nhang Luong
   ABSENT: Michael Callanan, Silas Robinson
   Motion Result: PASSED
Standing Item: HCH Services Update
(Heather Cedermaz, HCH Management)

1. COVID Update
   a. Isolation hotel at the Surestay is moving to a different location. That hotel is closing down and we are moving all motel 6 patients back.
   b. Hoping to be able to visit at Trinity and BARM.
   c. Want to make sure people continue to feel support even at this time where there may be some anxiety.
      I. Making our population a priority for receiving N95s.

Question from the Board: How concerned are you about the mask mandate change?
   d. Not concerned for our population. We don’t see high instances outdoors where they are not wearing masks anyway. It won’t change for shelter and congregate settings so not much change for our population.

Question from the Board: When do you think we will be able to meet in person?
   e. I would defer to Heather and Dr. Tzvieli to make sure we have measures in place to support preventative initiatives.
      I. Jill Ray- upcoming discussions regarding updates about in person meetings.

Action Item: Project Director Update
(Rachael Birch, Project Director)

1. Test Kits
   a. Continue to order at home test kits from HRSA.
      i. We have a standardized process within our COVID structure with the DOC logistics

2. HRSA Mask Distribution
   a. Providing N95 masks and thinking about providing therapeutic distributions
   b. Following test kit distribution centralization for the mask distributions
   c. Holding initial shipment for HCH and board members
   d. For our patient population, let’s get them out there!

3. UDS
   a. Submitted 2/15
   b. Data was validated and reviewed
   c. We have some time to address anything that comes up in the audit
Standing Item: Quality Improvement/Assurance & Program Performance Reports
(Gabriella Quintana, HCH QI Team)

1. Strategic Plan Updates
   a. Review of progress on upcoming strategic plan dates
   b. Planning & Oversight: By 3/2022 establish HCH representation at CCHS and Public Health equity work groups
      I. Delayed to 12/2022 due to larger system capacity
      II. Reached out to health equity officer in the meantime. They are hiring and working on getting this curriculum together and would love to collaborate with us as well.
   c. All other objectives are on track
   d. Check in on Board objectives
      I. First step is to get people together
      II. The first discussions should include the kinds of activities board member’s home programs take part in.
      III. We should look into getting feedback from untapped populations
      IV. Group: Claude Battaglia, Bill Jones, Nhang Luong, Stephen Krank

Action Item: Project Director Evaluation
(Governing Board)

1. Review of Prior Goals
   a. Sent out a final evaluation from last year to review before today. Also included completed 2021 goals and new goals for 2022.
   b. Expand behavioral health trainings and screening
      I. Had to be flexible with some of the methods
      II. Mental Health 101 was shifted to trauma informed care
   c. Clinical Services and Quality Improvement
      I. Looks pretty good
      II. Lacking in vaccination status due to various reasons but goals not met
         • 100% of patients have been offered the vaccination and we are doing our part in reducing barriers.
         • The politics of it, they trust us, but they do still have issues being told what to do, the politics
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- Even hospitalized clients wouldn’t get vaccinated even if it meant getting a bed in the shelter.
- This is not lack of access in many cases, but generations of alienation

III. Income Collection
- Built in to the EHR, the registration clerk is prompted every time
- HCH has collected 48% due to trust and relationships compared to the 22% HRSA and one-time touches in the larger system.
- Lots of feedback from clerks about the difficulty to ask this
- Within Compass Rose, we are collecting social factors and income will be collected. Encouraging case management to collect not just income but household size to be able to identify FPL

d. Planning & Oversight
   I. Several canceled due to covid as well as de prioritizing

e. Finances and Staffing & Partnership and Communication
   I. Stellar

2. Review of New Goals
   a. From our HRSA Site visit, we have been able to link goals closer together.
   b. Instead of identifying measures in this plan, we refer back to our QI plan
   c. In partnership and communications it’s a lot about maintenance of the relationships we have established in the past few years

d. Planning in Oversight
   I. Some have been started

e. Finances and Staffing
   I. Added some goals to include our HCH team in the confirmation of maintaining patient health care coverage within Compass Rose. We want to support patients proactively in their redetermination.

f. PD Requests
   I. Added some in addition to the ongoing ones.
   II. Community needs assessment to better serve our population
   III. Board assessment to develop onboarding plan
   IV. Identify trainings that Board members are interested in with HCH program support. Our internal staff has these opportunities often and we would like to expand this to our board. Trainings such as understanding patient legal status.

g. Using compass rose and CalAIM to leverage how we serve the local community.
3. Conversation

*See attached project director evaluation

**Motion**
A. **Statement**: I move to approve Rachael Birch as Project Director for 2022.
B. **Motion Made by**: Bill Jones
C. **Seconds the Motion**: Stephen Krank
   - *Roll Call Vote*: Each voting member must verbally approve or oppose
D. **IN FAVOR**: Claude Battaglia, Wendel Brunner, Bill Jones, Teri House, Stephen Krank, Nhang Luong, Jennifer Machado, Jonathan Russell, Bill Shaw
   - **OPPOSED**: None
   - **ABSTAINS**: None
   - **ABSENT**: Michael Callanan, Lori McLemore, Silas Robinson

**Motion Result**: PASSED

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**Standing Item**: HCH Program Updates & Community Updates

1. **COVID**
   - a. Currently working with 211 to work with those who are housed or families needing isolation.
   - b. Going from 52 PUI rooms at the height of the pandemic to 5-10 which reduces our placements, but we are seeing the numbers go down in our community.

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**Standing Item**: Future Matters

1. UDS Presentation

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**Standing Item**: Next Meeting and Time
Wednesday, March 16, 2022
11:00-12:30pm
Zoom

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**Approval of HCH Co-Applicant Board Meeting Minutes from February 16, 2022**
Contra Costa County Health Services
Health Care for the Homeless Co-Applicant Governing Board

Board Chair Signature: Jennifer Machado

Date 3/16/2022