

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, June 20, 2018 11:00-12:30pm

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

ATTENDANCE: Dr. Wendel Brunner, Teri House, Bill Jones, Shayne Kaleo, Teri House, Jonathan

Russell (Bay Area Rescue Mission), & Jennifer Machado

ABSENT: Belinda Thomas, Larry Fairbank Sr., Jonathan Perales, Bill Shaw, & Robin Heinemann **HCH STAFF ATTENDANCE:** Rachael Birch (HCH Project Director), & Linae Young (HCH Planning

& Policy Manager), Dr. Joesph Mega (HCH Medical Director)

PUBLIC ATTENDANCE: None

Agenda Items for Approval and/or Review:

- 1. May Meeting Minutes
- 2. Quality Improvement/Assurance & Program Performance Reports by HCH Medical Director

Attachment: Presentation of 4 clinical measures (Hypertension, Diabetes, Cervical and Colorectal Screening)

3. HCH Strategic Plan – Consultant assistance, process planning and timeline

Welcome & Introduction

Introduction to board members and community members present

Action Item: Approval of May Board Meeting Minutes



Motion

A. Statement: I move to approve the minutes from May 2018.

B. Motion Made by: Teri House

C. Seconds the Motion: Jennifer Machado

D. Discussion: NoneE. In Favor: ALLOpposed: NoneAbstains: None

Absent: Belinda Thomas, Larry Fairbank Sr., Jonathan Perales, Bill

Shaw, & Robin Heinemann Motion Result: PASSED

Standing Item: Quality Improvement/Assurance & Program Performance Reports (Dr. Joe Mega, HCH Medical Director, Quality Improvement Director)

Attachment: Presentation of 4 clinical measures (Hypertension, Diabetes, Cervical and Colorectal Screening)

- Report was presented to PS-PIC (Patient Safety and Performance Improvement Committee) as required by CCHS.
- Numbers are based on clients seen by Health Care for the Homeless Team including Dental, Medical and Behavioral Health.
 - Cervical Cancer Screening: Percentage of screenings completed based on clinical recommendations (clients who are due for a cervical cancer screening and was completed).
 - a. We have been working to improve PAP supply count at clinic sites
 - b. Encouraging providers to complete screenings on the mobile vans
 - Many clients are not interested in completing on the mobile vans so we would previously refer clients to health center which resulted in poor follow up
 - Medical Director is working with providers to prevent the referral to women's health and complete in van
 - d. HCH incentive to work on this measure: Panties for PAPs
 - e. Patients are now able to conduct a self-swab to test for HPV
 - f. Improvement still needed on this measure
 - 2. Hypertension:
 - a. Increased supply of blood pressure medications



- b. Encourage medications that best target high levels
- 3. Diabetes: Diabetes Diagnosis and a A1C above 9
 - a. We also complete preliminary A1C in the field
 - b. Need improvement:
 - i. Education
 - ii. Medications
 - c. HRSA is focusing on this measure this year and CCHS HCH part of the larger initiative with other HCH programs.
- 4. Colon Cancer Screening: Completed tests based on clinical recommendations
 - a. Incentives for patients to complete FIT
 - i. Gift cards to those patients who have completed order
 - b. Providers order a high number of FIT tests
 - c. FIT tests are provided to clients to complete on their own and can be mailed for free back to lab for results.
 - d. Low completion numbers
 - e. Education classes covering this topic also given to clients living in shelter

HCH Program Action Items:

- Report Back: Of our total patients seen how many need these screenings and how many are diabetic and hypertensive?
- Medical Director to complete Quality Assurance reports to board quarterly including clinical oversite and competence of providers.
- In future reports:
 - o Include the PRIME numbers within these graphs to compare what HCH is doing compared to the larger system.
 - o Compare HCH numbers to other HCH programs throughout the nation.

HCH Patient Satisfaction Survey (All)

- Simply worded
- Statements should be reworked to stress the positive outcome
- Rework demographics section to match what we report to HRSA
- Break down senior ages above 55+
- Be sure to ask about financial concerns
 - Question "if you missed a clinic appointment..."



- I am worried about getting charged
- Need more questions regarding satisfaction of clinical services
 - o Review what the health centers use and add some additional questions
 - o Comment section for free text. Also, include that their responses will not impact their services at the top of the page.
- Increase number of surveys collected: BARM is willing to help complete these surveys once we are ready to implement.
 - Sit down with their CM to complete these at BARM by staff

HCH Program Action Items:

- Review health center survey and add more questions around satisfaction of clinic services
- Communicate with BARM about completion of surveys once implemented
- HCH team to report back with updated survey for final approval before implementation

HCH Strategic Plan (All)

- Proposal to Board: Consultant from the outside (JSI) to come to work with the Board on the Strategic Plan
 - O JSI consultant, current CCHS contract, who understands what HRSA is looking for and has expertise in developing strategic plans for HRSA FQHC public entities such as CCHS HCH program.
- Consultant to come out next week to meet with HCH Director and any board members available to develop a plan.
- We will request consultants to plan, meet and develop strategic plan with the Board
- Board approves proposal of bringing in consultant

HCH Program & Board Action Items:

- Request for a process proposal and timeline for completion of Strategic Plan from consultant
- Bring back proposal to Board
- Email Teri with other Strategic Plan (San Mateo)
- Email Teri: Meeting details with JSI consultant on June 27th.



Standing Item: HCH Program Updates & Community Updates

- Update of Grievance and Complaint Policy from Board requests
 - Continuing to work with the respective department to retrieve this information
- Update from NHCHC
 - o Future funding streams
 - o Bring back: Leaders in this field and continue to educate other programs about what we are doing and how to implement.

HCH Board Action Items:

 Teri to send Conservatorship information to be shared with the Board at the next meeting

Standing Item: Future Matters

- HCH Strategic Plan Discussion
- HCH Clinic Productivity and Program Performance
- Conservatorship 101 Training Report Back

Action Items:

Linae to send out Doodle Pool for Meetings in July and August

Standing Item: Next Meeting and Time
July 18, 2018
11:00-12:30pm
2500 Bates Avenue, Suite B
Zion Conference Room
Concord, CA 94520

Approval of HCH Co-Applicant Board Meeting Minutes from June 20, 2018	
Board Chair Signature —	Wandel Brumes M.D
Date <u>07/31/2018</u>	