

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, August 18, 2021 11:00-12:30pm

**LOCATION:** Zoom

ATTENDANCE: Claude Battaglia, Wendel Brunner, Teri House, Bill Jones, Stephen Krank, Nhang

Luong, Jennifer Machado, Lori McLemore, Silas Robinson, Jonathan Russell, Bill Shaw

**ABSENT:** Michael Callanan

**HCH STAFF ATTENDANCE**: Linae Altman (HCH Planning & Policy Manager), Rachael Birch (Project Director), Heather Cedermaz (HCH Lead Provider), Beth Gaines (HCH Nurse Program

Manager), Gabriella Quintana (HCH QI Team) & Alison Stribling (HCH QI Team)

**PUBLIC ATTENDANCE:** Jill Ray

## Agenda Items for Approval and/or Review:

- 1. Action Item: APPROVAL July Meeting Minutes
- 2. Action Item: APPROVAL QA/QI Measure Reporting Frequency
- 3. Action Item: APPROVAL Change Program Scope of Services

#### Welcome & Introduction

**Action Item: Approval of July Board Meeting Minutes** 



## Contra Costa County Health Services

# Health Care for the Homeless Co-Applicant Governing Board

### Motion

A. Statement: I move to approve the minutes from July 2021.

B. Motion Made by: Stephen Krank

C. **Seconds the Motion:** Teri House

ROLL CALL VOTE: Each voting member must verbally approve or oppose

D. In Favor: Claude Battaglia, Wendel Brunner, Teri House, Bill Jones, Stephen Krank, Nhang Luong, Jennifer Machado, Silas Robinson, Jonathan

Russell, Bill Shaw *Opposed*: None

Abstains: Lori McLemore Absent: Michael Callanan Motion Result: PASSED

#### Standing Item: HCH Services Update

(Beth Gaines, HCH Nurse Program Manager & Heather Cedermaz, HCH Lead Provider)

### 1. Clinic Updates

- a. Running through healthcare maintenance and making sure patients have their care gaps filled.
  - i. It's active outreach that we have been doing the past couple of weeks. Hoping to connect patients more efficiently to needed services.
- 2. Outreach Updates
  - a. Seeing patients 3 times a week with a vision of moving that to 5 times a week
- 3. PUI Updates
  - a. Our testing group has been going into the hotels intentionally proactively for testing
- 4. Respite Updates
  - a. Trying to open and expand
  - b. We were only taking patients who had been vaccinated, but we are broadening that to any who had COVID within the past 90 days with the offer of a vaccine as well.

Standing Item: Project Director (Rachael Birch, Project Director)

1. Thank you to the Board & HRSA Site Visit Recap



a. It went great, everything we could have asked for. We are so incredibly grateful for our successful operating board that the feds approve of.

Standing Item: Quality Improvement/Assurance & Program Performance Reports (Gabriella Quintana, HCH QI Team)

- 1. Review of HRSA Findings
  - a. Change in scope to include column II contracts

Question from the board: Did the people who got vouchers get help from a program?

- b. We started using the labs due to COVID and the need for testing. Walgreens is through the health plan and we don't use often. Denture is under 20k but still considered an external service. We don't use the federal award to pay for these services, so there was some back and forth about the requirement, but we will add for compliance.
- c. Credentialing and Privileging update to highlight what different individuals actually need.
  - I. LIPs already get fitness for duty, but we need to include everyone and are waiting on union approval for that.
- d. QA/QI review of Standards of Practice Measures
  - I. Peer Review
    - Monthly
    - Enrichment opportunity for improvement
  - II. OPPE
    - Every 6 Months
    - System wide personnel and professional evaluation
  - III. FPPE
    - As needed for those who need improvement
    - Focused professional evaluation and a written plan to get someone up to the standard of care
  - IV. Adverse Event Reporting
    - As Needed in response to System Concerns
    - Multi-departmental review to discuss an incident that impacted the entire system
- e. We review data measures internally at least quarterly and the board will decide how often they want to see what measures.
- 2. Review of UDS measures to date.



- a. Board members were provided all data for UDS measures to date, in order to review and vote on how often they would like to see the information at the Board meeting.
- b. Discussion about giving the QA/QI committee authority to review all measures internally quarterly and only share the complete review with the board on an annual basis.
- c. Exceptions to this include any metric with a change in trend (positive or negative) from the previous review which will automatically be shared with the board. It also includes the following measures which have been deemed as special interest by the program to be reviewed by the Board twice a year:
  - I. Hypertension
  - II. Diabetes
  - III. Colorectal Cancer Screening
  - IV. Breast Cancer Screening
  - V. Cervical Cancer Screening
  - VI. SBIRT
  - VII. Connection to BHS
  - VIII. Patients offered MAT

#### Motion

- E. Statement: I move to approve the decision that all data metrics will be reviewed by the Board annually with the exception of the chosen measures that will be reviewed twice a year as well as any measures seeing a change in trend (+/-) from the previous quarterly review.
- F. Motion Made by: Teri House
- G. Seconds the Motion: Jonathan Russell

ROLL CALL VOTE: Each voting member must verbally approve or oppose

H. In Favor: Claude Battaglia, Wendel Brunner, Teri House, Bill Jones, Stephen Krank, Nhang Luong, Jennifer Machado, Lori McLemore, Silas Robinson, Jonathan Russell, Bill Shaw

*Opposed*: None *Abstains*: None

Absent: Michael Callanan Motion Result: PASSED

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

1. Request to change the Program Scope of Services



a. Diagnostic Laboratory, Pharmaceutical, Additional Dental *Question from the board:* What was it that they [HRSA] were walking about having to do with pharmaceutical subcontracting documentation?

b. A finding mentioned we need a policy stating that contracted vendors have a direct connection to the EHR. For example, COVID test results getting back into the patient record. We do have a policy in place that we are sending to them.

#### Motion

- I. Statement: I move to approve the request to change the program scope of services in order to include the necessary services to column II as guided by HRSA
- J. Motion Made by: Stephen Krank
- K. Seconds the Motion: Claude Battaglia

ROLL CALL VOTE: Each voting member must verbally approve or oppose

L. In Favor: Claude Battaglia, Wendel Brunner, Teri House, Bill Jones, Stephen Krank, Nhang Luong, Jennifer Machado, Lori McLemore, Silas Robinson, Jonathan Russell, Bill Shaw

Opposed: None Abstains: None

Absent: Michael Callanan

Motion Result: PASSED

### **Board Member Recruitment & Training**

1. Training for new members and anyone else who needs to do it (Brown Act & Ethics Training)

Question from the board: For the ethics training, on the site, which one do we do?

- a. As a count entity we do local
- b. Are there things we can do to help you with to make sure you feel you have what you need to be an active board member?
  - i. Getting familiar with the language. Going along with the hopes that with time I'll get the hang of it. Thankful to be able to through this process with such a wonderful group. If we have questions, we'll bring them up.
  - ii. Make sure you speak up if you're unsure of what is being voted on.
  - iii. Send notes to Linae if you have questions that you might not have time to discuss at during the meeting.
  - iv. Writing down acronyms that we can refer back to our notes to refamiliarize.



# Standing Item: HCH Program Updates & Community Updates

#### 1. SVDP

- a. Monica Joy COVID vaccination. Did an event for Latinx community in north/central county. Doing another one coming up at the Pentecostal church. Every Tuesday a vaccination van is going out to Bethel Island. Rather than promotors going out to them, it is education coming from inside the community. Multiple generation households have kids going back to school which can pose a threat to other family members.
- 2. Delta Veterans Group
  - a. Stand Down at the Delta Sept 10-13
  - b. Volunteers Needed
  - c. Have to be vaccinated to attend
  - d. <a href="https://deltaveteransgroup.org/stand-on-the-delta-sponsors">https://deltaveteransgroup.org/stand-on-the-delta-sponsors</a>

## **Standing Item: Future Matters**

- 1. QA/QI Policy will be shared
- 2. Strategic Plan
  - a. Look at the existing plan and identify if we want to do this with a committee or with the entire board
  - b. Stakeholder interviews

Standing Item: Next Meeting and Time Wednesday, September 15, 2021

11:00-12:30pm

Zoom

Approval of HCH Co-Applicant Board Meeting Minutes from August 18, 2021

Board Chair Signature: Jennifer Machado

*Date:* 09/15/2021