

# Health Care for the Homeless Co-Applicant Governing Board



# **WELCOME**

**WEDNESDAY, OCTOBER 20, 2021**

**11:00-12:30PM**

**BOARD MEMBER & PUBLIC  
ATTENDEE INTRODUCTIONS**

# Health Care for the Homeless Co-Applicant Governing Board



## **ACTION ITEM:** **REQUEST FOR APPROVAL** **SEPTEMBER MEETING MINUTES**

*JENNIFER MACHADO, HCH BOARD CHAIR*

*ATTACHMENTS: SEPTEMBER MEETING MINUTES*

# Health Care for the Homeless Co-Applicant Governing Board



## **HCH SERVICES & COVID-19 UPDATE**

*HEATHER CEDERMAZ,  
HCH LEAD CLINICIAN*

# Clinical Settings: Updates



- High Acuity Rounds twice monthly
- Outreach
  - RAPPORT Building and the importance of returning time and time again- Rydin, Castro, 10<sup>th</sup> & Railroad
- Respite and Concord Shelter
  - ✦ Resolved-3 weeks with no cases
- Hotels
  - ✦ PES admissions down when compared to same time frame prior to COVID 19-
    - Food-shelter-routine for sleeping-access to mental health care
- Bay Area Rescue Mission-Trinity

# COVID-19 Update



- Concord Shelter Outbreak Resolved-
  - ✦ All admissions must be vaccinated in congregate sites
  - ✦ Warming Center Binax upon admission
- Person Under Investigation (PUI)/COVID-19+ Hotel
  - ✦ 10/19/2021– 1 patient to discharge today
- J & J second vaccines starting
- Pfizer and Moderna boosters ongoing
- Flu vaccine events taking place as well

# Health Care for the Homeless Co-Applicant Governing Board



## **STANDING ITEM: PROJECT DIRECTOR REQUESTS & UPDATES**

*RACHAEL BIRCH*

# Health Care for the Homeless Co-Applicant Governing Board



## **2022 ANNUAL BUDGET**

*RACHAEL BIRCH*

# HRSA Service Area Competition Grant



## Continuous Federal Funding of \$3,597,848

Budget Justification 2/1/2021 – 1/31/2022	Non-Federal	Federal
PERSONNEL (Salaries for HCH and Choosing Change teams)		
TOTAL PERSONNEL	\$335,634	\$3,593,823
OTHER EXPENSES		
National Health Care for the Homeless Council Annual Dues		\$4,025
TOTAL		\$3,597,848



# Total HCH Program Budget



**Total Program Income of \$30,638,040**

Budget Justification	2/1/2022 – 1/31/-2023		
	Federal Grant Request	Non-Federal Resources	Total
PROGRAM INCOME	\$0	\$24,341,632	\$24,341,632
STATE FUNDS	\$0	\$593,689	\$593,689
LOCAL FUNDS	\$0	\$80,985	\$80,985
OTHER FEDERAL FUNDING	\$0	\$2,023,940	\$2,023,940
SAC FUNDING REQUEST	\$3,597,848	\$0	\$3,597,848
TOTAL REVENUE	\$3,597,848	\$27,040,246	\$30,638,094

# Health Care for the Homeless Co-Applicant Governing Board



## **ACTION ITEM:**

### **REQUEST FOR APPROVAL OF 2022 ANNUAL BUDGET**

*RACHAEL BIRCH*

# COVID-19 at Home Test Kits



- **Ideas for COVID-19 Home Test Kits**
  - Count = 2400
  - HCH team will get 400 for outreach teams and clients
  - Local CBOs – What local organizations might not have the same resources?

# Health Care for the Homeless Co-Applicant Governing Board



## **STANDING ITEM: QUALITY IMPROVEMENT/ ASSURANCE & PROGRAM PERFORMANCE REPORTS**

*GABRIELLA QUINTANA, HCH QI TEAM*

# Notable Changes



- UDS Measures

- Weight assessment & counseling for nutrition & physical activity of children and adolescents
  - ✦ % of patients 3-16 years of age with a BMI percentile and counseling on nutrition and physical activity documented for Patients seen by HCH went from **63.6% in July to 50% in September.**
  - ✦ Due to denominator change from 11 to 12 (numerator went from 7 to 6)

- QA/QI Measures

- Medicated Assisted Treatment
  - ✦ Percent of HCH patients with an opioid use disorder that were *offered* buprenorphine or referred to methadone clinic during the reporting year went up from **72.9% in July to 87.1% in September.**
  - ✦ Percent of HCH patients with an opioid use disorder that *received a prescription* for buprenorphine or methadone during the reporting year went up from **71.4% in July to 81.4% in September.**

# Health Care for the Homeless Co-Applicant Governing Board



## **STRATEGIC PLAN DISCUSSION**

**23 INTERVIEWS FROM 11 ORGANIZATIONS  
WITH STAKEHOLDERS– THANK YOU TO  
EVERYONE WHO PARTICIPATED!  
SOME 2020 UDS DATA ALSO INCLUDED**

# POPULATION TRENDS

*What trends have you noticed in homelessness?*



39%

Increase  
in older  
adults

39% of participants identified an increase in older adults

Other notable trends identified by participants included

- a general increase in persons experiencing homelessness within Contra Costa County
- an increase in families among those experiencing homelessness
- an increase in unsheltered persons

13%

Unsheltered

General  
Increase

Families

Black or  
African  
American

Mental  
Health

General  
Illness

Increased  
Trust

Pregnant

Memory  
Issues

Diabetes

Decrease in  
Older  
Adults

Higher  
Hospital  
Use

Lower  
Hospital  
Use

Younger

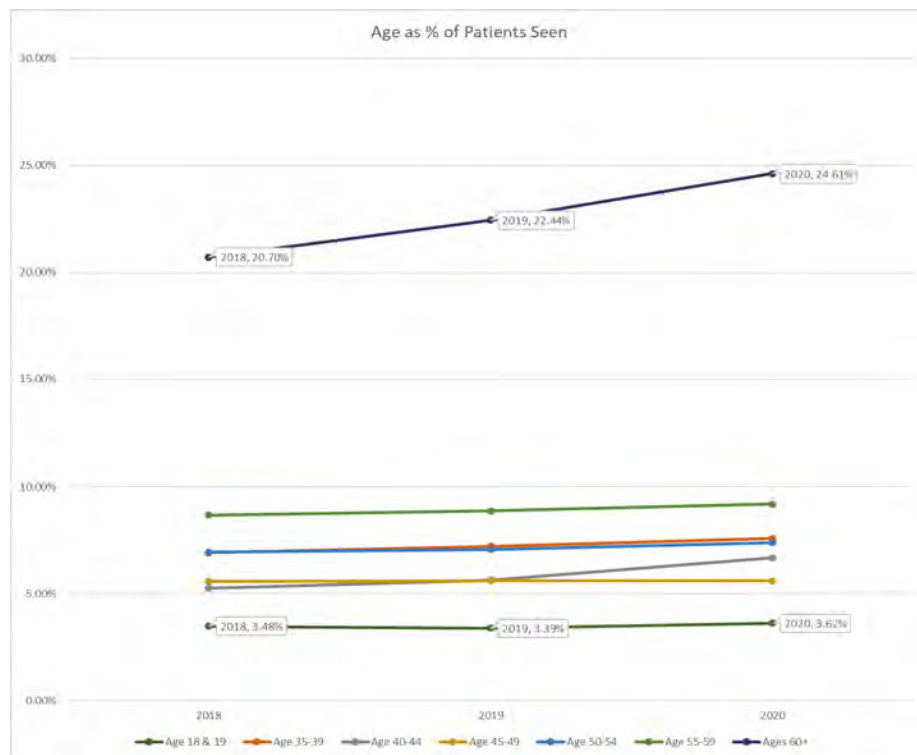
Number of cases coded

# Relating to UDS Demographics

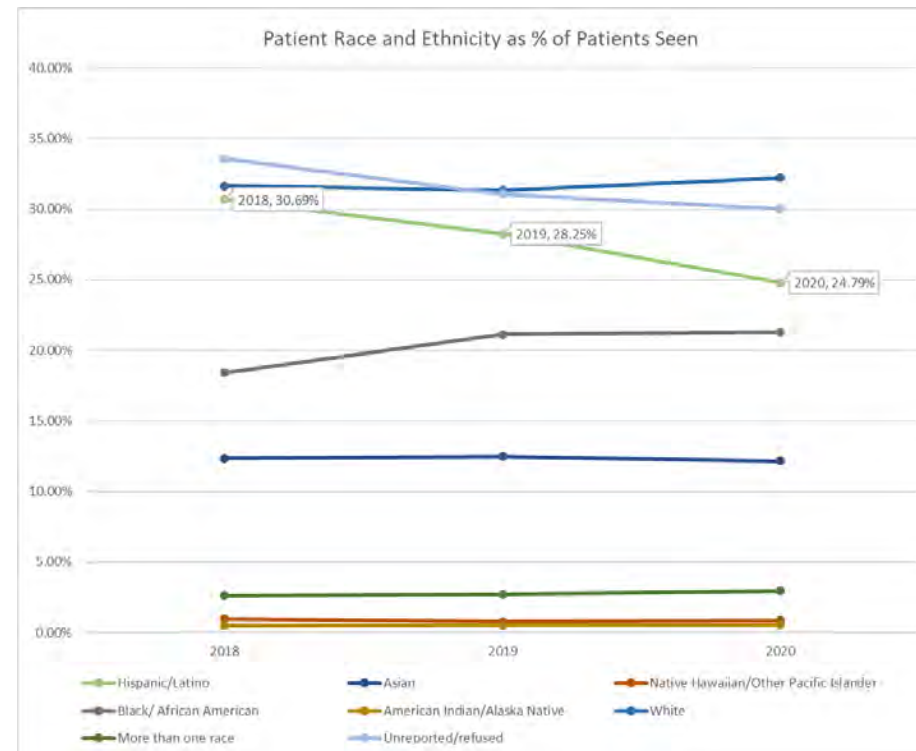
## Participant Quote

"With the last presidential administration, we lost 80-90% of Latino community but I know they're out there. With undocumented families it is harder and they stay out there longer. We have not utilized all of the services. And a lot of people don't know what's available."

**Patients age 35+ make up more of our population than they previously had. Except for patients aged 45-49 which has remained consistent over the past 3 years. There has been some increase in % of patients aged 18 & 19**



**There has been a significant decrease in the proportion of Hispanic/Latino patients in our population over the past 3 years**

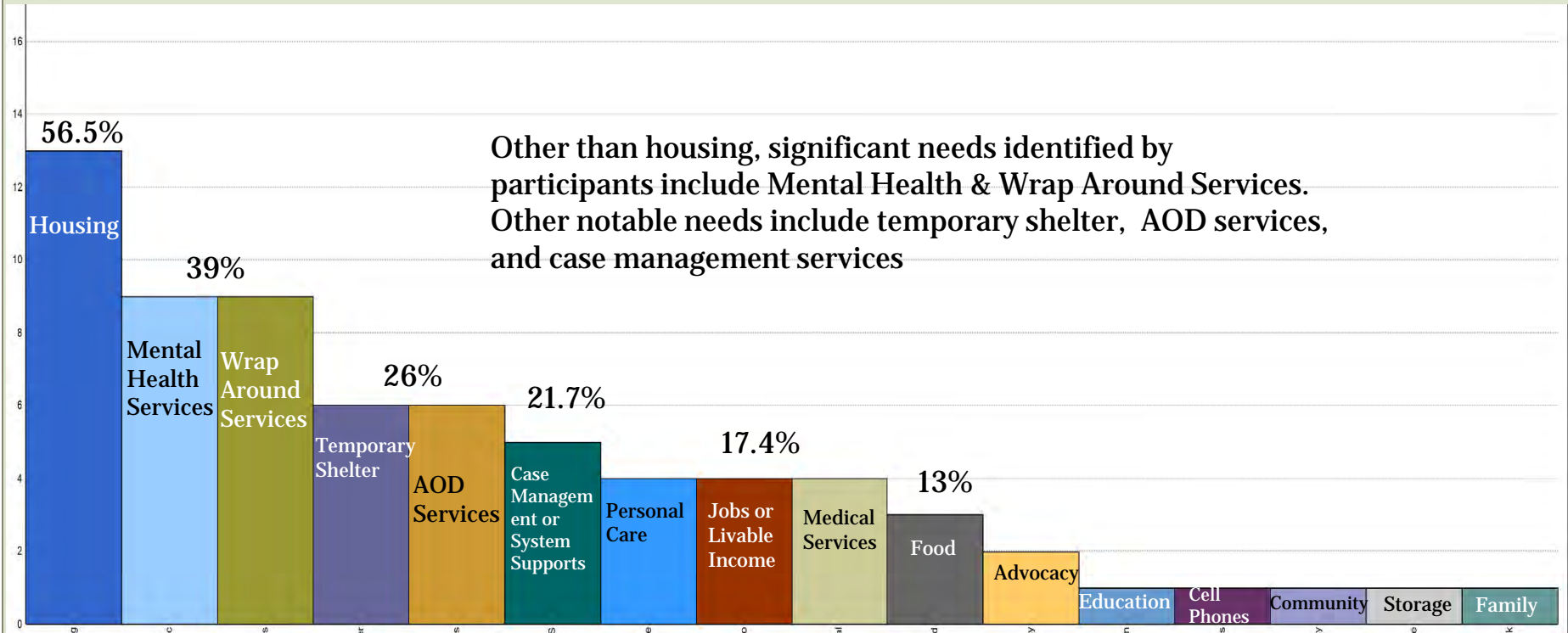




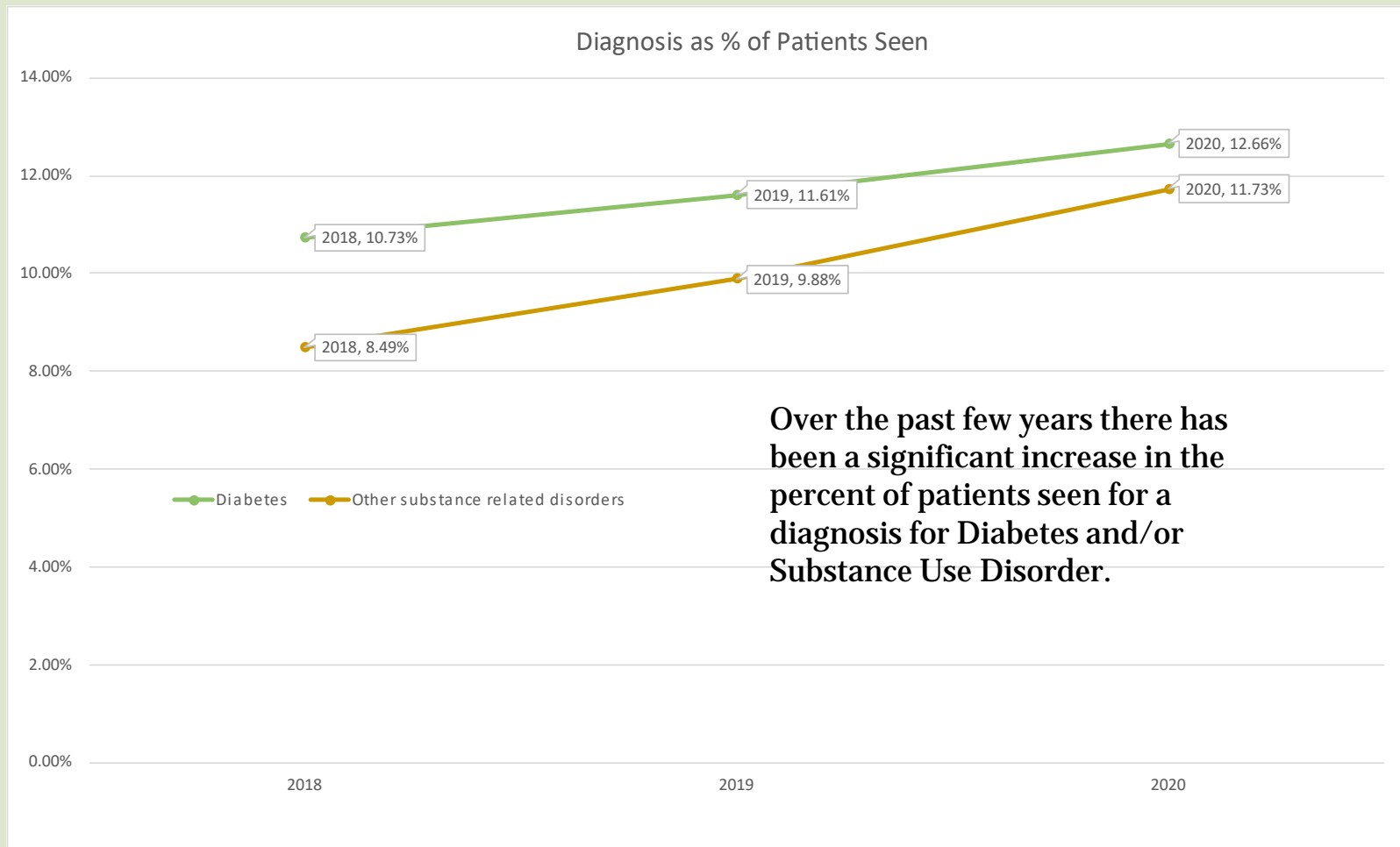
# POPULATION NEEDS



*What are the needs of those experiencing homelessness?*



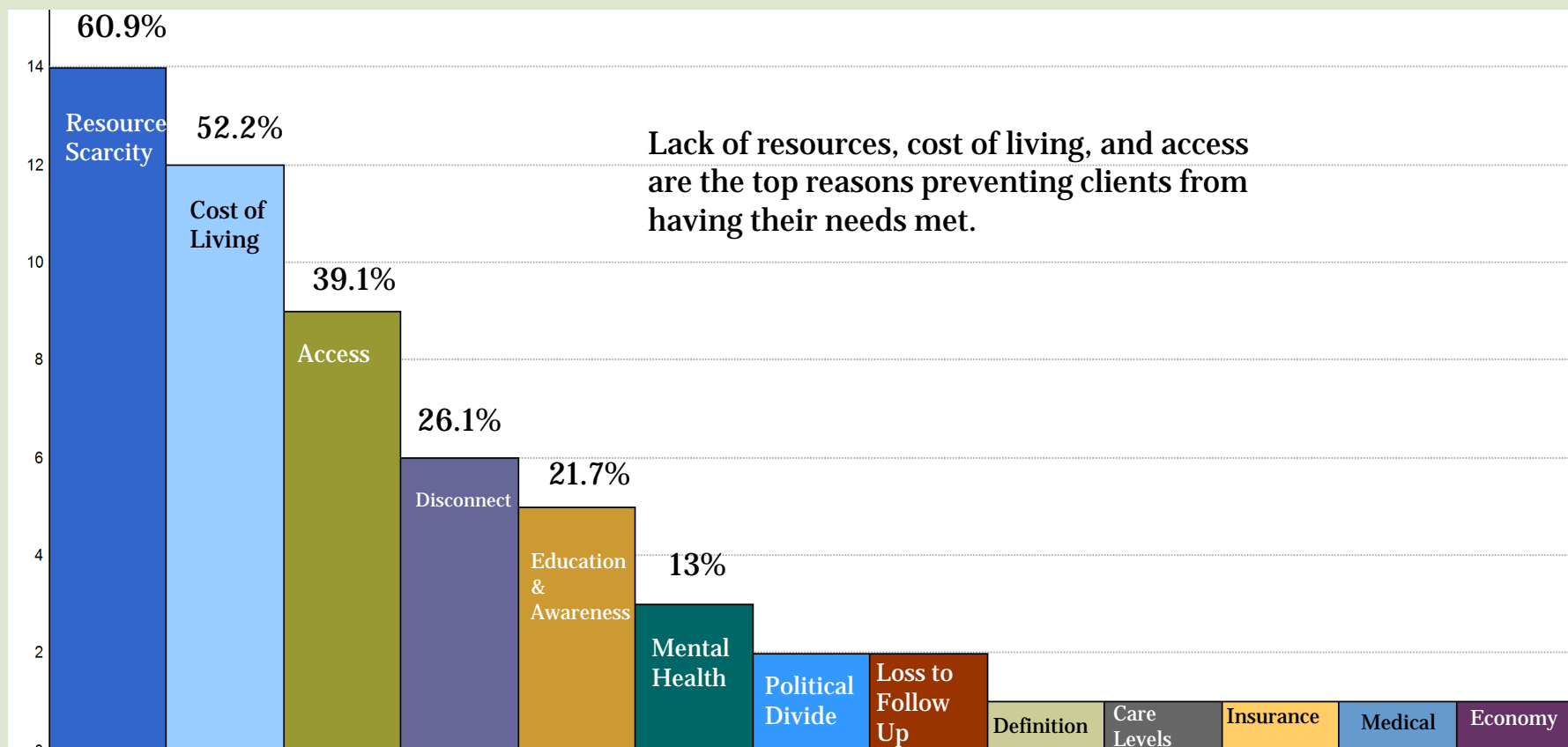
# UDS Diagnosis as % of Patients Seen



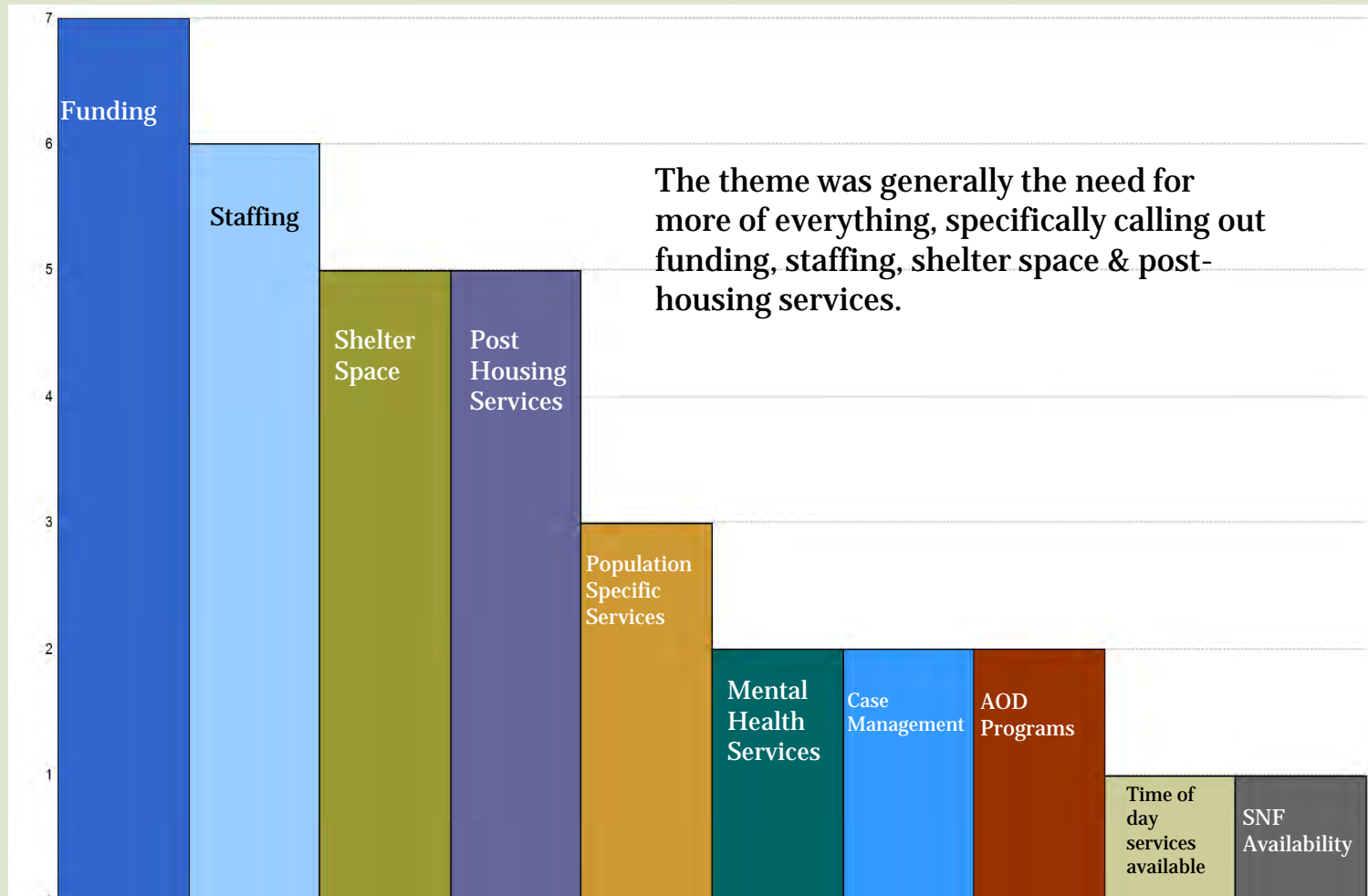
# BARRIERS TO NEEDS



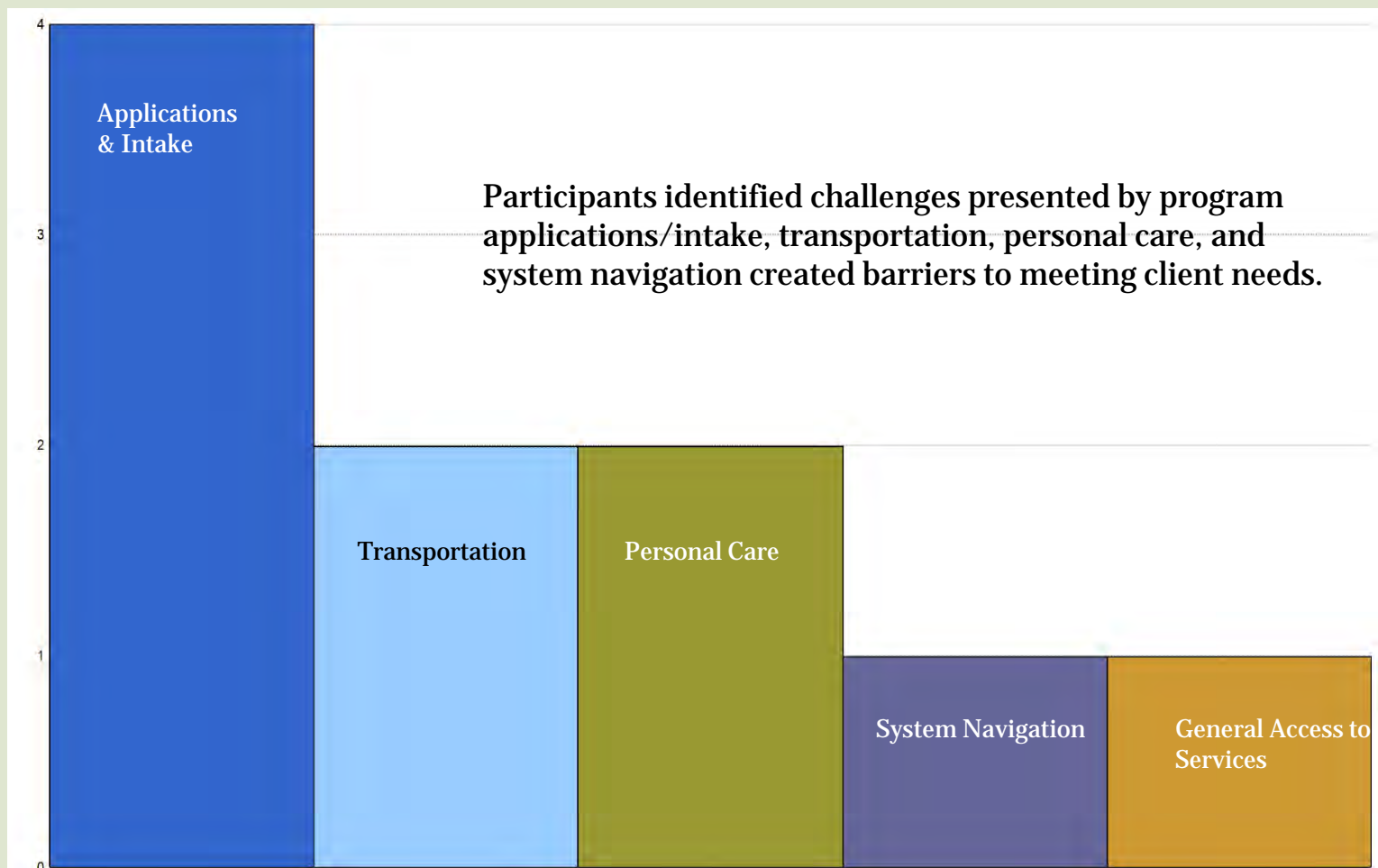
*Tell me your thoughts on key services currently available for people experiencing homelessness. Are there any gaps or challenges to meeting those needs mentioned earlier? What are things happening or expected to happen that could impact homelessness or health care for people experiencing homelessness?*



# Which Resources?



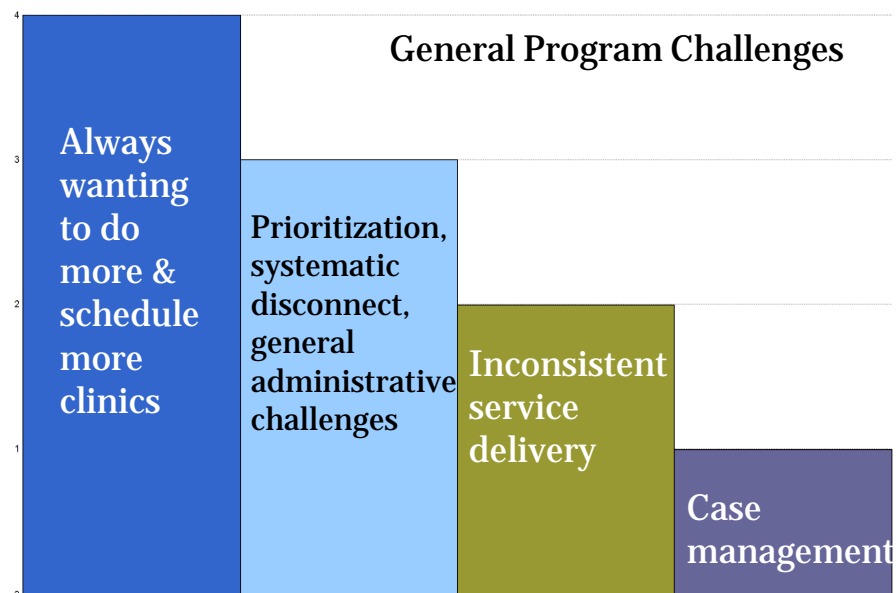
# Access Barriers



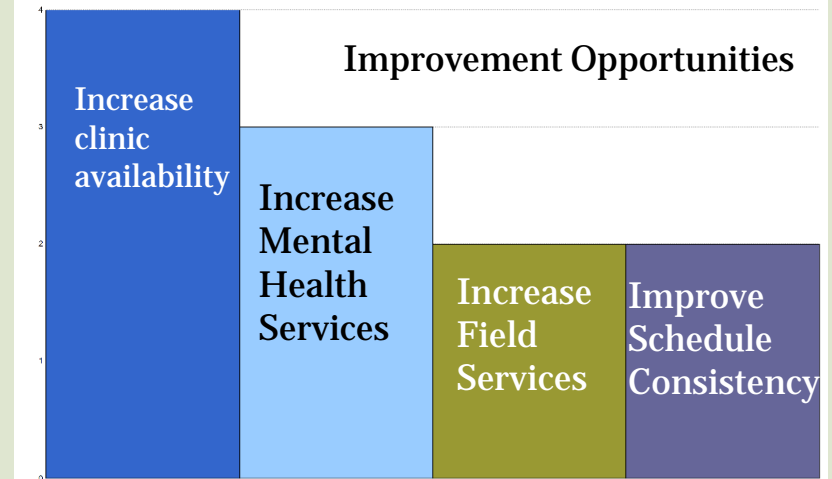
# CHALLENGES FACED BY HCH



*What do you view as challenges or weaknesses of the program?*



**Improvement Opportunities**

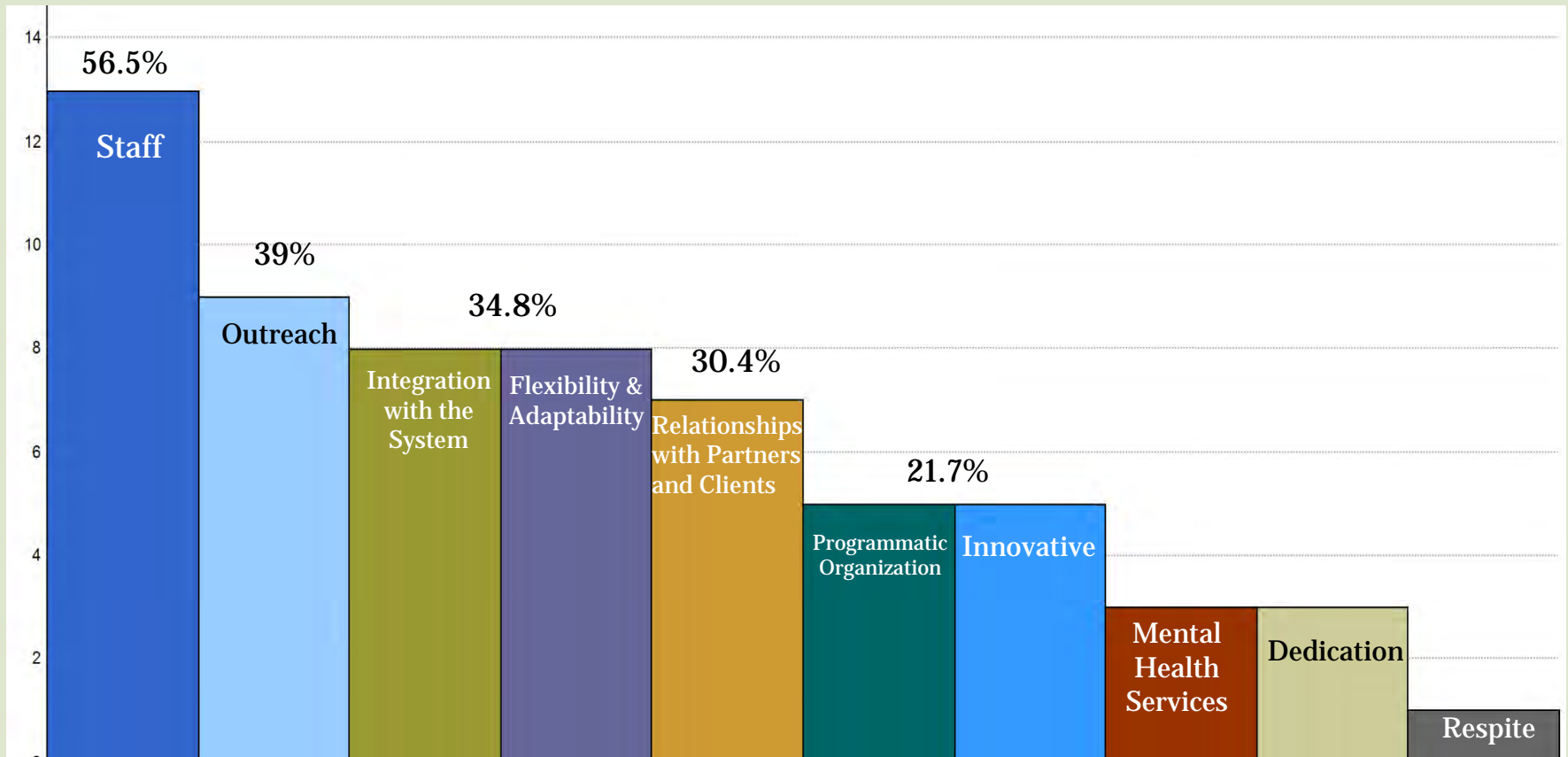


*What could be improved?*

# STRENGTHS OF HCH



*What do you view as the strengths of the program?*



# Strategic Plan Overview



1. **Stakeholder Interviews (September/October)**
2. **Review of Goals with HCH leadership (October)**
3. **Goals to board for review (October/November)**
4. **Establish Objectives and Timeline**
5. **Board approval of Strategic Plan (December)**



# Health Care for the Homeless Co-Applicant Governing Board



## **ACTION ITEM:** **2022 CHAIR AND VICE CHAIR ELECTIONS**

*ALL*

# Community & Program Updates



- **Brown Act Update**

- [Bill Text - AB-361 Open meetings: state and local agencies: teleconferences.](#)

- **Update to Homeless Service Provider Guidance:**

- [Homeless Service Provider Guidance for Prevention and Management of COVID-19](#)
- [Guidance for Suspected or Confirmed COVID-19 Cases – Homeless Service Providers](#)
- [Mitigating COVID-19 Risk When Transporting Passengers](#)

# Future Items to Discuss



1. **Consumer input (November)**
2. **Patient Safety/Standards of Practice**
3. **Strategic Plan Goal and Objective setting**

# HCH Co-Applicant Governing Board



## Next Meeting

Wednesday, November 17, 2021

11:00 – 12:30pm

**Zoom Conference Call**