HEALTH CARE FOR THE HOMELESS/FARMWORKER HEALTH PROGRAM

Co-Applicant Board Strategic Planning Subcommittee Meeting Agenda
Vendome, 415 2nd Ave, San Mateo County, 94401
April 4th 2023, 1:00pm-3:00pm

A. CALL TO ORDER AND ROLL CALL — Robert Anderson — 1:00pm

B. PUBLIC COMMENT — Robert Anderson — 1:05pm

Persons wishing to address on matters NOT on the posted agenda may do so. Each speaker is limited to three minutes and the total time allocated to Public Comment is fifteen minutes. If there are more than five individuals wishing to speak during Public Comment, the Chairperson may choose to draw only five speaker cards from those submitted and defer the rest of the speakers to a second Public Comment at the end of the Board meeting. In response to comments on a non-agenda item, the Board may briefly respond to statements made or questions posed as allowed by the Brown Act (Government Code Section 54954.2) However, the Boards general policy is to refer items to staff for comprehensive action or report.

B. DISCUSSION — Irene Pasma — 1:10pm

1. Strategic Plan Roadmap Overview	1:10pm-1:30pm
2. Targets Review	1:30pm-2:00pm
BREAK	2:00pm-2:10pm
3. April 13 Board Meeting & Beyond Planning Input	2:10pm-2:45pm
4. Wrap up & Next Steps	2:45pm-2:55pm

C. ADJOURNMENT — 2:55pm

Communications and Announcements are brief items from members of the Board regarding upcoming events in the community and correspondence that they have received. They are informational in nature and no action will be taken on these items at this meeting. A total of five minutes is allotted to this item. If there are additional communications and announcements, the Chairperson may choose to defer them to a second agenda item added at the end of the Board Meeting.

-

Strategic Plan Update

HCH/FH Board Meeting March 9, 2023

Irene Pasma, Program Planning & Implementation Coordinator

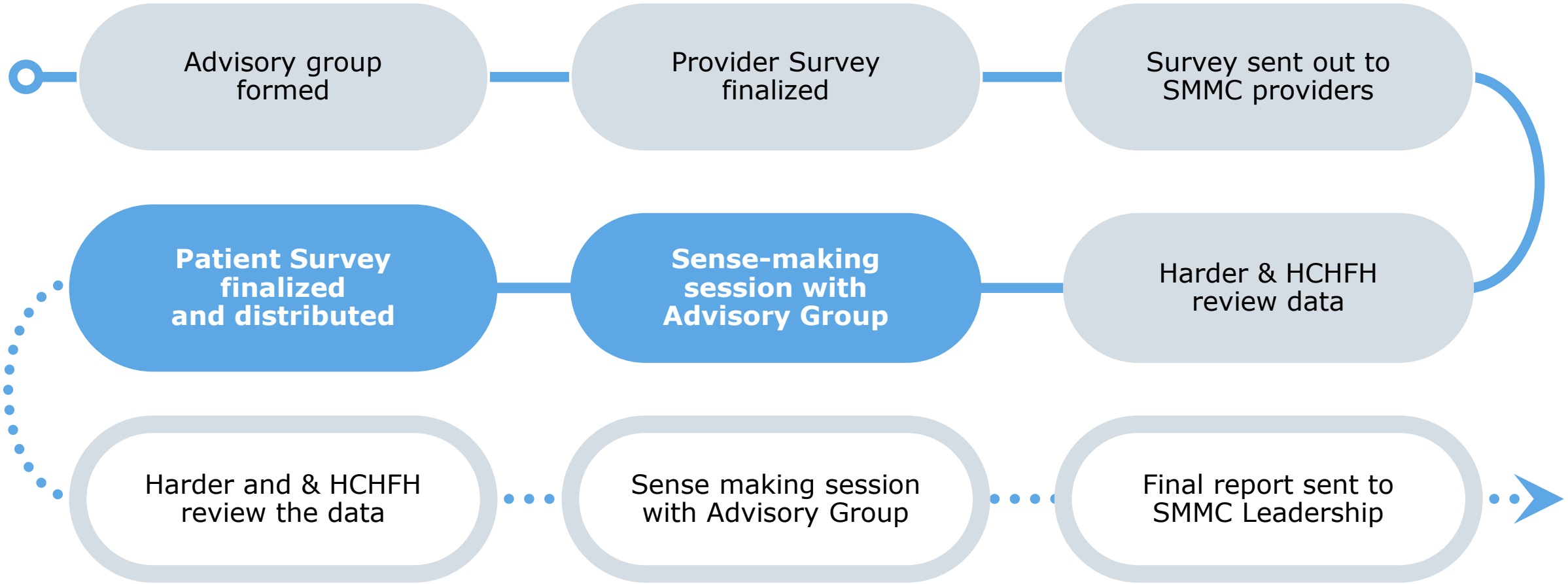
SAN MATEO COUNTY HEALTH

SAN MATEO MEDICAL CENTER

HCH/FH Program Planning Overview

Needs Assessment

scheduled to be finalized summer 2023



2020-2023 Strategic Plan Update

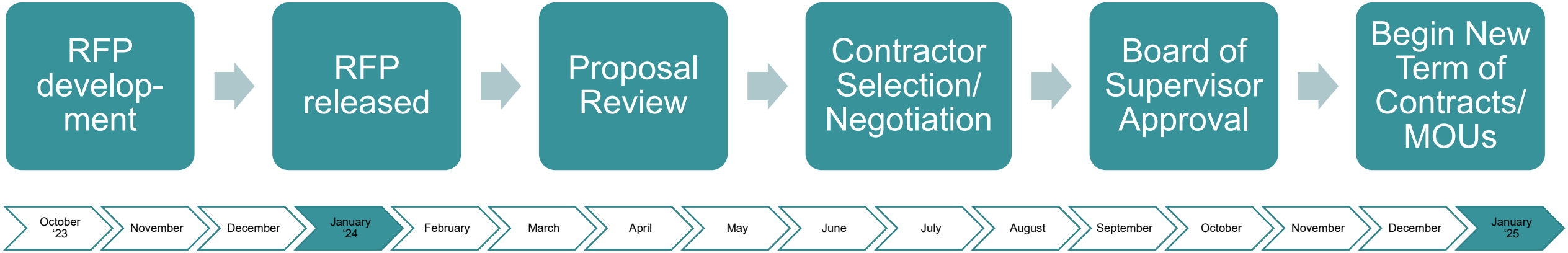
Review progress against targets → Meet with stakeholders for input → Make updates to Strategic Plan → Board Approval September/October 2023

March '23 | April | May | June | July | August | September | October '23

We are here

Needs Assessment Complete

RFP & Contracts Process



Next Steps

March 2023:
Strategic Planning Subcommittee Meets

April 2023 Board Meeting:
Review targets and discuss changes to next plan

May 2023-July 2023:
Staff attends standing meetings across County to get input on strategic plan

July 2023:
Strategic Plan Subcommittee Meets

August 2023 Board Meeting:
Share gathered information and additional Needs Assessment findings

August 2023:
Strategic Subcommittee Meets to create a recommendation to the board

September/October 2023 Board Meeting:
Board Approves new Strategic Plan

APPENDIX

2020-2023 Strategic Plan Priorities

Strategic Priority 1: Increase homeless & farmworker patient utilization of SMMC & BHRS Services.

- By EOY 2023, 50%of clients receiving care coordination will have at least one brick and mortar health care visit (primary care, behavioral health or dental care) within a 12-month period at SMMC or BHRS.
- By EOY 2023, increase percent of people experiencing homelessness receiving mental health & AOD services by 40% from 2019 baseline
- By EOY 2023, increase percent of farmworkers receiving mental health & AOD services by 20% from 2019 baseline.

Strategic Priority 2: Decrease barriers for homeless and farmworker patients to access health care.

- By EOY 2023, decrease the number of un-insured homeless and farmworker patients seen by HCH/FH to 5% and 10% respectively.

Strategic Priority 3: Support health care providers serving homeless andfarmworker patients.

- Refer to QI/QA Plan for patient satisfaction related outcomes.

Strategic Priority 4: Decrease health disparities among people experiencinghomelessness & farmworker patients

- Refer to QI/QA Plan for clinical outcome goals

Strategic Priority 5: Meet and Exceed all HRSA Compliance Requirements

- Following a site visit, have no more than 5immediate enforcement actions, fewer than 2conditions enter the 90-day phase of Progressive Action and0 conditions enter the 30-day phase of Progressive Action
- Program will have no more than 5%of funds remaining at the end of the current grant cycle (December 2023)

County of San Mateo

Healthcare for the Homeless/Farmworker Health HCH/FH Co-Applicant Board's

Strategic Plan 2020-2023

Version 2.0
2/3/2022

SAN MATEO COUNTY HEALTH
SAN MATEO MEDICAL CENTER

San Mateo County Healthcare for Homeless/Farmworker Health Co-Applicant Board
Strategic Plan 2020-2023

Table of Contents

1. Executive summary
2. HCH/FH Background
3. Mission, Values, and Philosophy
4. Areas of Focus and Measurement 2020-2023
    a. **Strategic Priority 1:** Increase homeless & farmworker patient utilization of SMMC & BHRS Services.
    b. **Strategic Priority 2:** Decrease barriers for homeless and farmworker patients to access health care.
    c. **Strategic Priority 3:** Support health care providers serving homeless and farmworker patients.
    d. **Strategic Priority 4:** Decrease health disparities among people experiencing homelessness & farmworker patients
    e. **Strategic Priority 5:** Meet and Exceed all HRSA Compliance Requirements
5. Reporting and Refinement
6. Appendices
    a. Strategic Planning Process
    b. Retreat Agenda
    c. Key Informant Interview Questions
    d. Strategic Topic Brainstorming Session Recap
    e. Baselines

SAN MATEO COUNTY HEALTH
SAN MATEO MEDICAL CENTER

Executive Summary

The 2020-2023 Strategic Plan builds upon previous efforts and reflects the evolution of the HCH/FH program both due to an expansion of program staff as well as new members on the Co-Applicant Board which, when combined, allowed the program to think more broadly and comprehensively.

The strategic planning process included a day-long kick off meeting for the Co-Applicant Board in September 2019, key informant interviews with ~40 stakeholders, 10 two-hour brainstorming sessions with diverse stakeholders, and a strategic planning subcommittee which consisted of Co-Applicant Board Members and San Mateo County Health Leadership. A Needs Assessment was completed in parallel to these efforts and its findings, including surveys from ~400 respondents, infused all aspects of Strategic Planning. Through these conversations and data analysis, several key findings arose:

Key Findings:

1. HCH/FH is a relatively small team and at the time of writing the strategic plan, were managing 14 contracts and MOUs across 10 entities. This does not include managing small funding requests or ad hoc expenditures which also require substantial administrative oversight. This takes significant staff time and effort that does not allow the program to dive deeply or measure outcomes fully of any one service beyond what is federally mandated.

2. There is a need for advocacy on behalf of the farmworker and homeless populations and a recognition of the emotional load it takes on providers to care for these patients. The two populations have unique differences which the Program needs to address more completely.

3. Street/Field Medicine and the Mobile Clinic (part of San Mateo County (SMC) Health's Public Health, Policy and Planning division) are extremely successful in providing services to the most vulnerable, difficult-to-reach patients. Due to this, their services are a cornerstone to the HCH/FH program and are lauded by county and community partners.

4. SMC Health provides many direct services (primary, dental, and behavioral health) and in some instances – particularly when it comes to Alcohol and Other Drug Services – they are underutilized. Accessing these services by marginalized communities remains difficult.

5. HCH/FH's funding agency, the Health Resources and Services Administration (HRSA) has generated compliance issues and concerns around the programs' contracting with external entities for clinical services. Compliance is an ongoing focus for this Program.

Key Decisions:

1. Funding for the Street/Field Medicine and the Mobile Clinic will be managed through direct negotiation rather than a competitive process, a change from previous funding cycles.

2. HCH/FH will focus efforts on improving and directing access of our populations to SMC Health and San Mateo Medical Center (SMMC) clinical services by funding enabling

services such as care navigators. This decision allows the Program to avoid compliance issues and have more control of health outcomes.

3. Efforts will be made to reduce the number of unique contracts/MOUs, increasing their amounts, and improving how outcomes are measured and reported.
4. How externally contracted partners think about advocacy on an organizational level and trauma-informed care on a provider level will be built into the RFP and taken into consideration when awarding funding.

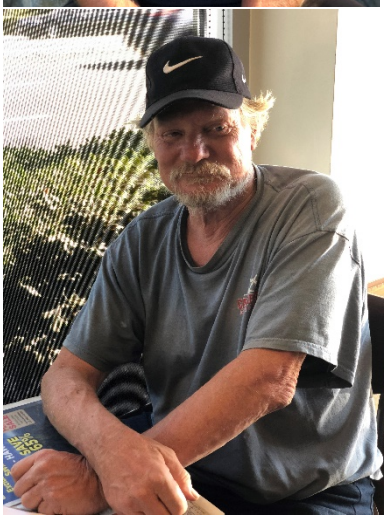
In considering the findings and results, the board and the program arrived at strategic priorities to address them. Those priorities are:

1. **Strategic Priority 1:** Increase homeless & farmworker patient utilization of SMMC & BHRS Services.
2. **Strategic Priority 2:** Decrease barriers for homeless and farmworker patients to access health care.
3. **Strategic Priority 3:** Support health care providers serving homeless and farmworker patients.
4. **Strategic Priority 4:** Decrease health disparities among people experiencing homelessness & farmworker patients
5. **Strategic Priority 5:** Meet and Exceed all HRSA Compliance Requirements

How these priorities will be implemented and measured are covered in the following pages.

Background

The San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program is a county program that is federally funded by the Health Resources and Services Administration (HRSA) through the Public Health Act, with an annual budget of roughly $3M. The Public Health Act supports over 1,300 Community Health Centers, Health Care for the Homeless Programs, Migrant/Farmworker Health Programs, and Public Housing Health Centers around the country. These programs support the availability and delivery of health services for their populations and focus on primary care, dental care, behavioral health, and supportive services in the outpatient setting. HCH/FH is the only known program in the United States which is solely both a Health Care for the Homeless Center and a Migrant Health Center.



HCH/FH complies with all HRSA regulations and grant requirements, therefore providing for all San Mateo County Health outpatient clinics to be considered Federally Qualified Health Centers (FQHC) and receive enhanced Medi-Cal and Medi-Care reimbursement rates, bringing in an estimated $15-30M per year. Persons experiencing homelessness and/or farmworkers living in San Mateo County can access primary health care regardless of their ability to pay.

Within the County structure, the HCH/FH Program is primarily governed by an independent Board which is composed of community members who live in San Mateo County and are not employed by San Mateo County Health. The Board, which is typically about 12 people in size, decides how grant funds are spent, the services to be provided, and is responsible for ensuring compliance with HRSA's regulations and grant requirements.

Organizationally, HCH/FH resides within the San Mateo Medical Center which is one branch of San Mateo County Health, and reports to SMMC's CEO Chester Kunnappilly. Additionally, HCH/FH collaborates closely with other branches of Health, including Public Health, Policy & Planning (PHPP) and Behavioral Health & Recovery Services (BHRS) via Memorandums of Understanding (MOUs). HCH/FH also contracts with nonprofits to provide additional services that improve patients' access to healthcare. . Finally, HCH/FH builds relationships with county and non-county organizations and works closely with its counterparts Center on Homelessness, which is housed in the Human Services Agency, and the Department of Agriculture.

Since 1996, when the County first began to receive HRSA funding, the HCH/FH Program has grown significantly as have HRSA requirements. As the complexity of regulatory compliance increased, so have the challenges of our patients. With San Mateo County as one of the most expensive counties in the country, along with a national opioid public health emergency, immigration policies, and the ongoing housing crisis, numerous factors impact the program's ability to provide services. As such, strategic planning efforts are undertaken periodically to ensure the HCH/FH program is maximizing its impact while being responsive to the everchanging needs of our service population.

Mission, Values, and Philosophy

HCH/FH aligns with the San Mateo Medical Center's mission to "partner with patients to provide excellent care with compassion and respect" with the vision that every patient live the healthiest life possible.

In 2016, the HCH/FH Co-Applicant Board developed their own mission, vision, and value statements which still hold true today with some minor modifications to reflect the Board's evolution. These guiding principles will inform the Board and Program Staff when developing programs

Mission

The mission of the San Mateo Health Care for the Homeless/Farmworker Health (HCH/FH) Program is to serve homeless and farmworker individuals and families by ensuring they have access to comprehensive health care, in particular, primary health care, dental health care, and behavioral health services in a supportive, welcoming, and accessible environment.

Vision

- Health care services provided to homeless and/or farmworker individuals are patient centered and utilize a harm reduction model that meets patients where they are in their progress towards their goals.
- The HCH/FH Program lessens the barriers that homeless and/or farmworker individuals and their families may encounter when they try to access care.
- Health services are provided in consistent, accessible locations where people experiencing homelessness and farmworkers can receive timely care and have their immediate needs addressed in a supportive, respectful environment.
- Through its funded services and partnership with the Medical Center, the HCH/FH Program reduces the health care disparities in the homeless and farmworker populations.
- HCH/FH advocates on behalf of both populations' health needs and becomes a hub for health-related information for both San Mateo County and Community Based Organizations for these two populations.

Values

Access: Homeless and farmworker individuals and their families have full access to the continuum of health care and social services.

Dignity: Services provided are respectful, culturally competent, and treat the whole person's physical health and behavioral health.

Integrity: Homeless and farmworker individuals and their families are valued and considered a partner in making decisions regarding their health care.

Innovation: Services will continuously evolve to reflect current best practices and technological advances.

Strategic Priority 1: Increase homeless & farmworker patient utilization of SMMC & BHRS Services.

Activities	Outputs	Outcomes
Attach care navigator capacity to **New Patient Connection Center** to help NPCC locate, follow up, and bring patients to SMMC	Number of patients care navigator locates upon request from NPCC	By EOY 2023, **50%** of clients receiving care coordination will have at least one brick and mortar health care visit (primary care, behavioral health or dental care) within a 12-month period at SMMC or BHRS. By EOY 2023, increase percent of people experiencing homelessness receiving mental health & AOD services by **40**% from 2019 baseline By EOY 2023, increase percent of farmworkers receiving mental health & AOD services by **20**% from 2019 baseline. ***Approved by the Board July 2021***
Attach care navigator capacity to **Mobile Clinic** to help patients seen at Mobile Clinic seek follow up/continuous care at Brick and Mortar Clinics	Number of patients referred to Care Coordinators by Mobile Clinic/Street/Field to be seen at SMMC or BHRS.
Attach care navigator capacity to **Street/Field Medicine** to help patients seen follow up/continuous care at Brick and Mortar Clinics	Number of referred patients Care Navigator helps to get scheduled for a visit.
Attach care navigator capacity to **newly housed individuals** to transition them from potentially mobile-based health services to brick and mortar/help maintain existing connection to health care services	Number of newly housed homeless patients who maintain their connection or create a connection to SMMC brick and mortar clinics after moving
Work with SMMC NPCC and SMMC COO to ensure homeless patients can get slotted into a clinic visit within a reasonable time frame	Length of time between patient/care navigator on behalf of patient requests an appointment and obtaining an appointment at SMMC
Open Saturday Dental Clinic at Coastside Clinic for farmworkers and family members	Number of farmworker and dependents receiving preventive dental care.

Strategic Priority 2: Decrease barriers for homeless and farmworker patients to access health care.

Activities	Outputs	Outcomes
Bring primary care to locations where **people experiencing homelessness** reside, i.e. encampments and shelters	Number of patients seen by Mobile Clinic and Street Medicine # of unique locations visited by Street Medicine and Mobile Clinic	By EOY 2023, decrease the number of un-insured homeless and farmworker patients seen by HCH/FH to **5% and 10%** respectively. ***Approved by the Board September 2021***
Bring primary care to **farmworkers** at their employment location in San Mateo County, South and North Coast	Number of farms visited by Field Medicine team per month Number of farmworkers seen by Field Medicine per month	
Provide behavioral health services at locations where **people experiencing homelessness** reside, i.e. street, encampments and shelters	Number of people experiencing homelessness and farmworkers seen by BHRS and PHPP IBHS	
Provide mild/moderate mental health & AOD services to **people experiencing homelessness** in shelters		
Provide mild/moderate mental health& AOD services to **farmworkers**		
Provide behavioral health care coordination via referral from community providers serving **people experiencing homelessness**		
HCH/FH staff works with SMMC/IT to ensure primary care/behavioral health services are provided via Tele-Health Stations at Maple Street & Puente	Number of tele-health visits conducted at baseline, midpoint, and final: % encounter face to face, % phone, % video	
Develop relationships with farm owners to support services for **farmworkers**	# of growers contacted # of growers responding	
Plan for transportation for **farmworkers** in South Coast to get to Coastside Clinic for Saturday dental clinic	# of people who use transportation	
Healthcare insurance/other benefits sign up for **people experiencing homelessness** and **farmworkers**	Number of people helped to sign up for health insurance Number of people who maintain their health insurance	
Work with BHRS IT to develop data reports from Avatar	Have a method to un-duplicate data between SMMC and BHRS patients	

Strategic Priority 3: Support health care providers serving homeless and farmworker patients

Activities	Outputs	Outcomes
Provide training to SMMC, BHRS, PHPP, and community providers at least 2/year, including tele-health related.	Number of trainings conducted Number Post-training Surveys received	Refer to QI/QA Plan for patient satisfaction related outcomes.
Create/maintain/update LMS modules (i.e. PSA training, homeless & farmworker health topics)	Number of HCH/FH Specific modules created/updated/ maintained per year.	
Financially support SMMC, BHRS, PHPP, and community providers to attend relevant health conference	Number of people attending conferences.	
Partner with SMMC's Patient Experience department to conduct "Provider Appreciation" activities	# of events # of email communications	
Conduct two way dialogue with clinic managers/providers on HCH/FH program (quarterly report, meetings, etc)	# meetings/presentations	
Host forums for providers within SMMC, PHPP, BHRS, and nonprofits to discuss healthcare needs of homeless and farmworker patients	# provider collaboratives hosted for homeless health providers per year	
Support providers via small funding requests	# small funding requests completed	

Strategic Priority 4: Decrease health disparities among people experiencing homelessness & farmworker patients

Activities	Outputs	Outcomes
Follow work outlined in the HCH/FH QI/QA Plan. In 2020/2021, the Plan focuses on: 1. Cervical, colorectal, and breast cancer screening 2. Diabetic control 3. 1st trimester prenatal care 4. Depression screening and follow up 5. Adult BMI screening & follow up	Refer to QI/QA Plan	Refer to QI/QA Plan for clinical outcome goals
Standardize a reporting pathways between gathering and analyzing data and presenting the data to the San Mateo Medical Center to execute change*		
Asses feasibility of capturing homeless and farmworker status in SMC County death certificates.		
Education/Outreach for farmworkers and people experiencing homelessness	# of education events held # of farmworkers engaged # of outreach materials developed and distributed	

Strategic Priority 5: Meet and Exceed all HRSA Compliance Requirements

Activities	Outputs	Outcomes
Ensure HRSA Site Visits are conducted to an excellent level and minimize findings	Number of findings from site visits	Following a site visit, have no more than **5** immediate enforcement actions, fewer than **2** conditions enter the 90-day phase of Progressive Action and **0** conditions enter the 30-day phase of Progressive Action Program will have no more than **5%** of funds remaining at the end of the current grant cycle (December 2023) ***Approved by the Board September 2021***
Have a well functioning Co-Applicant Board, with proper representation across numerous areas of subject matter expertise and robust visibility in the community, Brown Act compliant, ethics and conflict of interest	Number of new members on-boarded per year.	
Submit UDS reports on time, answer all responses, improve year over year the processes by which data is reported.	Annual on-time UDS submissions	
Conduct Needs Assessment, update QI/QA and Strategic Plan on a regular basis	QI/QA award amount per year	
Apply for supplemental awards when appropriate.	Amount of supplemental awards received	
Right-sizing contracts throughout the year & identifying opportunities to spend down grant funds.	Amount of unexpended funds remaining at grant cycle end	
Stay connected to technical assistance opportunities through HRSA.	Number of webinars/trainings attended by staff	

Reporting and Refinement

The HCH/FH program reports on a large number of metrics throughout the year, ranging from contractor performance to Uniform Data System reports which holistically describes utilization numbers and quality metrics.

The Board will be regularly updated on outputs and outcomes outlined in the Strategic Plan.

1. By EOY 2023, **50%** of clients receiving care coordination will have at least one brick and mortar health care visit (primary care, behavioral health or dental care) within a 12-month period at SMMC or BHRS.
2. By EOY 2023, increase percent of people experiencing homelessness receiving mental health & AOD services by **40**% from 2019 baseline
3. By EOY 2023, increase percent of farmworkers receiving mental health & AOD services by **20**% from 2019 baseline.
4. By EOY 2023, decrease the number of un-insured homeless and farmworker patients seen by HCH/FH to **5% and 10%** respectively.
5. Following a site visit, have no more than **5** immediate enforcement actions, fewer than **2** conditions enter the 90-day phase of Progressive Action and **0** conditions enter the 30-day phase of Progressive Action
6. Program will have no more than **5%** of funds remaining at the end of the current grant cycle (December 2023)

The strategic plan also refers to the QI/QA Plan for patient satisfaction and clinical outcome measurements. Reporting on those metrics will continue per existing timelines and reporting pathways.

A Strategic Plan Sub-Committee will meet twice a year to get an update on the output measures as well as a preview into how the program is doing against the strategic plan. At these meetings, input on operations will be received and tweaked to support meeting targets.

Evaluation/Update Timeline