

HEALTH CARE FOR THE HOMELESS/FARMWORKER HEALTH PROGRAM (HCH/FH)

Co-Applicant Board Meeting Agenda

455 County Center, Redwood City, CA 94063 (Room 101)

November 9th, 2023, 10:00am - 12:00pm

This meeting of The Health Care for The Homeless/Farmworker Health board will be held in-person at
455 County Center
Redwood City, CA 94063 (Room 101)

Remote participation in this meeting will not be available. To observe or participate in the meeting please attend in-person at above location.
*Written public comments may be emailed to masfaw@smcgov.org and such written comments should indicate the specific agenda item on which you are commenting.

***Please see instructions for written and spoken public comments at the end of this agenda.**

A. CALL TO ORDER & ROLL CALL	Robert Anderson	10:00am
---	-----------------	---------

B. PUBLIC COMMENT		
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.		

C. GUEST SPEAKER	Mike Callagy, County Executive Officer	10:05am
-------------------------	--	---------

D. ACTION TO SET THE AGENDA & CONSENT AGENDA	Robert Anderson	10:30am
1. Approve meeting minutes from October 12, 2023, Board Meeting		Tab 1
2. Contracts and MOUs update		Tab 2
3. Budget and Finance Report		Tab 3
4. Quality Improvement/Quality Assurance update		Tab 4
5. HCH/FH Director's Report		Tab 5

E. COMMUNITY ANNOUNCEMENTS		
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.		
Community Update	Board Members	10:35am

Meetings are accessible to people with disabilities. Individuals who need special assistance or a disability-related modification or accommodation (including auxiliary aids or services) to participate in this meeting, or who have a disability and wish to request an alternate format for the agenda, meeting notice, or other documents that may be distributed at the meeting, should contact the HCH/FH Program Coordinator at least five working days before the meeting at (650) 573-2640 in order to make reasonable arrangements to ensure accessibility to this meeting and the materials related to it. The HCH/FH Co-Applicant Board meeting documents are posted at least 72 hours prior to the meeting and are accessible online at: <http://www.smchealth.org/smmc-hfhfh-board>

F. BUSINESS AGENDA			
1. Vote for 2024 HCH/FH Board Officers	Jim Beaumont	10:50am	
2. Request to re-nominate board members with terms expired in September 2023	Robert Anderson	10:55am	Tab 6
3. Approving HCH/FH Strategic Planning	Irene Pasma	11:00am	Tab 7
4. Encampment Ordinance Letter Status	Jim Beaumont	11:40am	

G. REPORTING & DISCUSSION AGENDA		
Board letter policy	Robert Anderson	11:50am

H. ADJOURNMENT		12:00pm
Future meeting: 455 County Center, Redwood City, CA 94063 (Room 101)		

***Instructions for Public Comment During Meeting**

Members of the public may address the Members of the HCH/FH board as follows:

Written public comments may be emailed in advance of the meeting. Please read the following instructions carefully:

1. Your written comment should be emailed to masfaw@smcgov.org.
2. Your email should include the specific agenda item on which you are commenting or note that your comment concerns an item that is not on the agenda or is on the consent agenda.
3. Members of the public are limited to one comment per agenda item.
4. The length of the emailed comment should be commensurate with the two minutes customarily allowed for verbal comments, which is approximately 250-300 words.
5. If your emailed comment is received by 5:00 p.m. on the day before the meeting, it will be provided to the Members of the HCH/FH board and made publicly available on the agenda website under the specific item to which your comment pertains. If emailed comments are received after 5:00p.m. on the day before the meeting, HCH/FH board will make every effort to either (i) provide such emailed comments to the HCH/FH board and make such emails publicly available on the agenda website prior to the meeting, or (ii) read such emails during the meeting. Whether such emailed comments are forwarded and posted, or are read during the meeting, they will still be included in the administrative record.

Meetings are accessible to people with disabilities. Individuals who need special assistance or a disability-related modification or accommodation (including auxiliary aids or services) to participate in this meeting, or who have a disability and wish to request an alternate format for the agenda, meeting notice, or other documents that may be distributed at the meeting, should contact the HCH/FH Program Coordinator at least five working days before the meeting at (650) 573-2640 in order to make reasonable arrangements to ensure accessibility to this meeting and the materials related to it. The HCH/FH Co-Applicant Board meeting documents are posted at least 72 hours prior to the meeting and are accessible online at: <http://www.smchealth.org/smmc-hfhf-board>

Encampment Ordinance

ORDINANCE NO. .

BOARD OF SUPERVISORS, COUNTY OF SAN MATEO, STATE OF CALIFORNIA

* * * * *

AN ORDINANCE ADOPTING A NEW CHAPTER [] OF TITLE [] OF THE SAN MATEO COUNTY ORDINANCE CODE TO REGULATE ENCAMPMENTS ON PUBLIC PROPERTY IN THE UNINCORPORATED AREAS OF THE COUNTY

The Board of Supervisors of the County of San Mateo, State of California, **ORDAINS** as follows:

[INSERT UNCODIFIED FINDINGS]

SECTION 1. A new Chapter [] of Title [] of the San Mateo County Ordinance Code regulating illegal encampments on public property in the unincorporated areas of San Mateo County, which Chapter shall be known as the [TITLE] Ordinance, is hereby adopted to be numbered and entitled and to read as follows:

Chapter [] – Transition to Shelter Ordinance.

[] .100 - Definitions.

- (a) **“Encampment”** means any tent, makeshift structure, or accumulation of belongings in a place not meant for human habitation, belonging to at least one person, where the person or people plan to stay in one location continuously with no definite plans to move, except when such activity occurs (i) in a public area that the County has specifically set aside or clearly marked for public camping, such as a campground or picnic area, and (ii) with a valid permit, reservation, or other applicable authorization from the County.
- (b) **“Exigent Circumstances”** means there are facts and circumstances that would cause a reasonable person to believe that, in the interest of public safety and welfare, an Encampment urgently needs to be removed with less than twenty-four hours’ notice. Exigent Circumstances include, but are not limited to, material fire risk, obstructing or interfering with the flow of pedestrian or vehicular traffic, blocking access to a parking lot of a building, or outbreak of a communicable or contagious disease.

“Personal Effects” means personal property consisting of any of the following items:

1. Identification/Social Security cards;
 2. Medications, medical devices, eyeglasses;
 3. Photos/photo albums;
 4. Tax, medical or legal records;
 5. Nonperishable food items; and
 6. Any other reasonably usable, not overly soiled, nonverminous items that reasonably appear to have value to persons experiencing homelessness, including tents, sleeping bags, clothes, and functional bicycles.
- (c) **“Shelter Location”** means a public or private facility, with available space, including a bed, for an indigent, homeless individual to stay at no charge to the individual. For purposes of this Chapter, Shelter Location does not include any of the following: (a) shelter space where an individual cannot stay because the individual has exceeded a shelter’s maximum stay rule; (b) shelter space that cannot reasonably accommodate the individual’s mental or physical disabilities; (c) shelter space that does not permit a minor child to be housed in the same facility with at least one parent or legal guardian when the individual in question has custody of a minor child; (d) shelter space for which an individual is required to attend or participate in religious activities or programs as a condition of utilizing the shelter space; or (e) shelter space that is unavailable due to the individual’s gender, religious affiliation, criminal convictions, or pet(s).

[.110 – Intent.

The intent of this Chapter is to preserve the health, safety, and welfare of the inhabitants of San Mateo County, including individuals experiencing homelessness. This Chapter addresses issues such as fire risk, unsanitary conditions, public safety hazards, and environmental degradation associated with unregulated encampments in the County. To that end, this Chapter generally prohibits the establishment of unregulated encampments on public property when there is an available Shelter Location, as defined herein.

[] .120 Encampment Prohibitions.

- (a) When there is an available Shelter Location for a person, it is unlawful and a public nuisance for that person to place, erect, configure, construct, or maintain an Encampment on public property anywhere in the unincorporated area of the County.
- (b) Section [] .120(a) shall not be enforced against any person unless that person has declined an offer of an available Shelter Location or otherwise has access to shelter or the means to obtain it.

[] .130 – County Executive Authority To Promulgate Regulations.

The County Executive is authorized to establish standard policies, procedures, forms, and/or administrative regulations that are consistent with this Chapter in order to implement this Chapter.

[] .140 – Penalties For Violations.

- (a) Any person who is in violation of this Chapter shall be given at least two (2) written warnings prior to enforcement of the violation as a misdemeanor. The written warnings may be issued at any time a violation is identified regardless of the duration of time between each warning, subject to the requirements of Subsection (b) below, and regardless of the location of the Encampment. Each written warning shall provide the person with information about at least one available Shelter Location, as required by Section [] .120(b) and shall include a written offer of placement in such Shelter Location.
- (b) Each day that an Encampment exists under Section [] .120 shall be a separate violation of this Chapter, and each written warning required under this Section [] .140 shall be given no more frequently than once during every twenty four-hour period.
- (c) A person who is in violation of this Chapter shall be guilty of a misdemeanor twenty four hours after receiving a second written warning as set forth above and failing to vacate the Encampment.
- (d) If a person who violates this Chapter is subject to arrest, the arresting officer shall be permitted to seize and store the Personal Effects of the person arrested if necessary to prevent items from being stolen or damaged and/or if deemed

necessary to prevent the immediate reestablishment of an Encampment that violates this Chapter.

- (e) Any person charged with a misdemeanor violation under this Chapter shall be entitled to participate in any appropriate diversion programs offered by the Superior Court.

[**.150 –Removal and Storage of Personal Effects.**

- (a) The establishment of an Encampment that violates this Chapter is declared a public nuisance, and appropriate County representatives are authorized to remove any such Encampment after providing notice and complying with the Shelter Location requirements set forth in this Chapter. Unless a seizure of Personal Effects or other items of property and arrest occur related to a misdemeanor violation, as set forth above in Section [.140(d), or unless Exigent Circumstances exist, at least 72-hours' written notice shall be given before the County removes any Personal Effects belonging to anyone found to be in violation of this Chapter.
- (b) Personal Effects or other items of property that pose an imminent threat to public safety or health, are contraband, are evidence of a crime, are obstructing or interfering with the flow of pedestrian or vehicular traffic, and/or are blocking access to a parking lot of a building shall not be subject to the above-described notice requirements and may be immediately removed by appropriate County staff, pursuant to law.
- (c) When neither Exigent Circumstances nor the circumstances described in [.150(b) exist, prior to removing an Encampment found to be in violation of this Chapter, a written notice with the following information shall be provided to the person violating this Chapter:
 - 1. The date and time of written notice;
 - 2. The location of the notice;
 - 3. The following statement: "Persons in this area must vacate and remove all belongings on or before: [insert date and time to vacate]. The County will clean this site on or after the time and date specified above. Unaccompanied items are subject to removal and may be discarded or destroyed."
 - 4. A telephone number and a physical address for individuals receiving the notice to direct questions or concerns regarding removal and storage of

Personal Effects, and to make requests for reasonable assistance from County representatives in the removal of Personal Effects.

- (d) After the notice period has expired, at the time of removal of any Personal Effects from an Encampment, County representatives shall conspicuously post a dated notice, at or near the location from which Personal Effects were removed, with the following information:
1. A statement that Personal Effects were removed;
 2. A telephone number for information on retrieving Personal Effects;
 3. A physical address where the Personal Effects are temporarily stored and instructions for retrieving the Personal Effects;
 4. A statement that Personal Effects will be stored for 90 days.

The posting of notice required under this subsection shall not apply if the removal of Personal Effects is conducted pursuant to section [].140(d) and the arresting officer has reason to believe that all items belong to the individual(s) being arrested. In such cases, the individual(s) being arrested shall be provided with written notification of where their Personal Effects are being stored and how to retrieve them at a later date.

- (e) County representatives shall itemize and photograph all removed Personal Effects and place such Personal Effects in containers labeled in a manner facilitating identification by County representatives and the owner and which reasonably protect such Personal Effects from damage or theft.
- (f) Personal Effects stored by the County which are claimed within 90 days from removal shall be released to the person claiming ownership providing they provide reasonable evidence of ownership, including, for example, identifying the property and the approximate location where the property was left. Presentation of a government-issued identification shall not be required to reclaim Personal Effects.
- (g) Personal Effects that remain unclaimed after 90 days may be discarded, recycled, dedicated for public use, or given to a nonprofit agency for charitable use.
- (h) Where the County has a reasonable basis to believe that an Encampment has been abandoned and is not occupied, the County may promptly remove any items that reasonably appear to be garbage. For items that do not reasonably appear to be garbage, the County may post a written “notice of apparently

abandoned property” which notifies potentially interested parties that the County believes the site to be abandoned and will discard unclaimed items in no fewer than 72 hours. In these circumstances, the County shall have no obligation to attempt to identify, remove, and/or store any unattended items that reasonably appear to have no value. If unattended items remain at an apparently abandoned site after a notice period of 72 hours or longer, the County may discard, recycle, or donate items that remain.

[**.160 Interpretation of Chapter.**

- (a) Nothing in this Chapter shall be interpreted or applied so as to create any requirement, power, or duty in conflict with any federal or state law.
- (b) Nothing in this Chapter shall be interpreted as excusing any individual from complying with other provisions of the County’s Ordinance Code.

SECTION 2. SEVERABILITY. If any section, subsection, sentence, clause or phrase of this Ordinance is for any reason held to be invalid or unconstitutional by the decision of a court of competent jurisdiction, it shall not affect the remaining portions of this Ordinance. The Board of Supervisors declares that it would have adopted this Chapter and each and every section, subsection, sentence, clause, and phrase thereof not declared invalid or unconstitutional, without regard to whether any portion or this ordinance would be subsequently declared invalid or unconstitutional.

SECTION 3. EFFECTIVE DATE. This Ordinance shall be effective 30 days from the date of adoption.

Tab 1
Meeting
Minute



HEALTH CARE FOR THE HOMELESS/FARMWORKER HEALTH PROGRAM (HCH/FH)
Co-Applicant Board Meeting Minutes
275 Blomquist street, Redwood City, CA (Navigation Center)
October 12th, 2023, 10:00am - 12:00pm

Co-Applicant Board Members Present	County Staff Present	Members of the Public	Absent Board Members/Staff
<ul style="list-style-type: none"> • Robert Anderson, Chair • Victoria De Alba Sanchez, Vice Chair • Tony Serrano • Suzanne Moore • Francine Serafin-Dickson • Judith Guerrero • Brian Greenberg • Gabe Garcia • Steve Kraft • Steve Carey • Jim Beaumont (Ex officio) 	<ul style="list-style-type: none"> • Alejandra Alvarado • Meron Asfaw • Gozel Kulieva • Irene Pasma • Frank Trinh • Anessa Farber • Marisol Scalera Durani • Kristy Coleman 	<ul style="list-style-type: none"> • Rita Mancera, Puente • Vanessa Rodriguez, ALAS • Cristhian Landaverde, ALAS 	<ul style="list-style-type: none"> • Janet Schmidt • Tayischa Deldridge

A. Call to order & roll call	Robert Anderson called the meeting to order at 10:04 am and did a roll call.		
B. Public comment	Marisol Scalera Durani provided a follow-up on the farmworker feedback and grievances discussed during the last Co-Applicant Board meeting in September. Marisol is working on scheduling a meeting between farmworker representatives and Supervisor Mueller, and she will invite HCH/FH staff when the meeting is going to happen.		
C. Action to set the agenda and consent agenda.	<ol style="list-style-type: none"> 1. Approve meeting minutes from September 2023, Board Meeting 2. Budget and Finance Report 3. Quality Improvement/Quality Assurance update 4. HCH/FH Director's Report 	Request to approve the Consent Agenda was <u>MOVED</u> by Suzanne Moore and <u>SECONDED</u> by Gabe Garcia. APPROVED by all Board members present.	
D. Community Announcements / Guest Speaker 1. Community Updates	Robert Anderson Informed the Board that the City of San Mateo is hiring their second street mental health clinician. Brian Greenberg Informed the Board about the upcoming start of construction of a new unhoused shelter in East Palo Alto. The project construction is anticipated to start in November 2023 and complete within a year. The site will eligibility and benefits enrollment services. Victoria De Alba Sanchez		

	<p>Shared with the Board that ALAS is on their third week offering mental health therapy services through music. The program teaches interested individuals to play accordion and guitar.</p> <p>Tony Serrano Updated the Board on the services provided by St Vincent De Paul, who now partner with Second Harvest to bring food and necessities to the Pescadero area. Through visiting the area, Tony shared his team witnessed shocking living conditions.</p>	
2. Department of Housing	<p>Rose Cade, Deputy Director of Housing Gave the Board a presentation of Department of Housing and discussed projects the department is focused on regarding homeless and the farmworker populations.</p>	
E. BUSINESS AGENDA		
1. Approve draft letter opposing the encampment ordinance.	<p>Susanne Moore - Approve draft letter opposing the encampment ordinance. Susanne shared a draft letter to the county Board of Supervisors opposing proposed encampment ordinance and asked for the Co-Applicant Board's support in signing the letter.</p>	<p>Request to approve the draft letter opposing the encampment Agenda was <u>MOVED</u> by Victoria De Alba Sanchez and <u>SECONDED</u> by Gabe Garcia.</p> <p>APPROVED by all Board members present.</p>
2. Renew QI/QA Annual Plan	<p>Frank and Alejandra asked the Board to approve the annual Quality Improvement/Quality Assurance plan as required by the bylaws.</p>	<p>Request to approve the renew the annual QI/QA plan Agenda was <u>MOVED</u> by Brian Greenberg and <u>SECONDED</u> by Gabe Garcia.</p> <p>APPROVED by all Board members present.</p>
3. Grant Budget Renewal	<p>Jim presented the Board with a new program budget and requested Board approval as required by HRSA.</p>	<p>Request to approve the Grant Budget Renewal Agenda was <u>MOVED</u> by Steve Kraft and <u>SECONDED</u> by Steve Carey</p> <p>APPROVED by all Board members present.</p>

Meetings are accessible to people with disabilities. Individuals who need special assistance or a disability-related modification or accommodation (including auxiliary aids or services) to participate in this meeting, or who have a disability and wish to request an alternate format for the agenda, meeting notice, or other documents that may be distributed at the meeting, should contact the HCH/FH Program Coordinator at least five working days before the meeting at (650) 573-2640 in order to make reasonable arrangements to ensure accessibility to this meeting and the materials related to it. The HCH/FH Co-Applicant Board meeting documents are posted at least 72 hours prior to the meeting and are accessible online at: <http://www.smchealth.org/smmc-hfhf-h-board>

<p>F. REPORTING & DISCUSSION AGENDA</p> <p>1. Chair/Vice chair nominations for 2024</p>	<p>Jim Reminded the Board of the annual requirement to nominate the Co-Applicant Board Chair and Vice-Chair. Nominations are accepted via email to Jim October through November or at the Board meetings. Susanne nominated Robert to continue as the Chair and Victoria as the Vice-Chair. The Board will be decided during the next Board meeting in November</p>	
<p>2. Needs Assessment & Strategic plan update.</p>	<p>Irene Announced that the HCHFh Needs Assessment is complete and has been shared with the Board via email and is in the Board packet. Irene discussed that the Needs Assessment is used as a driver for the Strategic Plan and the subsequent RFP cycles. The key findings of the Needs Assessment include: - Being able to meet patients' SDOH needs - Most patients prefer in person visits - Care teams are comfortable providing care and would like continued support and training - Providing additional resources such as employment etc</p> <p>Strategic Plan is in the drafting stages and will be built on the 2023 Strategic Plan. Engagements and focus groups with various stakeholders have taken place and a follow-up meeting with the Board SP-Planning Sub-Committee is scheduled for October 26th.</p>	
<p>G. ADJOURNMENT</p>	<p>Future meeting: November 9th, 2023, 10am-12pm at County Building Room 101, RWC Address: 455 County Center, Redwood City, CA 94063</p>	<p>The meeting was adjourned at 12:02 am.</p>

Meeting minutes submitted by Gozel Kulieva, HCH/FH'S Management Analyst

Meetings are accessible to people with disabilities. Individuals who need special assistance or a disability-related modification or accommodation (including auxiliary aids or services) to participate in this meeting, or who have a disability and wish to request an alternate format for the agenda, meeting notice, or other documents that may be distributed at the meeting, should contact the HCH/FH Program Coordinator at least five working days before the meeting at (650) 573-2640 in order to make reasonable arrangements to ensure accessibility to this meeting and the materials related to it. The HCH/FH Co-Applicant Board meeting documents are posted at least 72 hours prior to the meeting and are accessible online at: <http://www.smchealth.org/smmc-hfhh-board>



Minutes

Opposing the Encampment Ordinance

HCH/FH Board Meeting, October, 12/2023

By Suzanne Moore, Board Member

Why HCH/FW feedback is important

- Experts are on the Board - our feedback's important
- This will likely be adopted by other communities
- PRC/Samaritan: increased evictions, folks living in vehicles



What we know

- Where did the ordinance originate?
- Still a draft
- Not yet on BOS agenda
- Martin vs Boise is being challenged - could be overturned
- Some form of this ordinance is likely to pass
- Advocates are being advised to look at ways to improve it



Contents of the current draft

- Excerpts in our packet
- Terms defined
- Purpose of the ordinance
 - preserve health and safety
- Penalties for violations
 - warning, fines, misdemeanor arrest
- Property removal

Letter of opposition to existing draft ordinance

- Included in our packet
- Address should include County Manager and County Staff

Minutes



Steps to take for HCH/FH Board

Move to vote on the letter

Draft an alternative ordinance?
How would we change this
ordinance to reflect best practice?



Minutes

Questions?



San Mateo County Department of Housing Farmworker Housing Initiatives



***Moonridge
MidPen Housing
Half Moon Bay, CA***

Agenda

01

**Farmworker
Housing**

02

Housing Related
Needs

03

Looking Forward

Farm Labor Housing Loan Program

- The program provides a loan to agricultural operators and landowners to provide housing for very low-income farmworkers by creating new housing, rehabilitating or repairing existing housing, or replacing existing dilapidated mobile home units that have been used as farmworker housing at any time in the past
- Eligible tenants are very low-income farmworkers, who are engaged in full-time agricultural work in San Mateo County, and their families during the agricultural season



Farm Labor Housing Loan Program

- The program has received just over \$3M since it began in FY 2014-15
- Completed Projects
 - 3 new unit projects totaling 6 units
 - 1 rehab project totaling 1 unit
- Projects in Process
 - 4 new unit projects totaling 9 units
 - 1 rehab project totaling 1 unit
- All available funding has been awarded



POST Red House (2017)

Farm Labor Housing Loan Program



R & R Herbs (2020)

Agenda

01

Farmworker Housing

02

Housing
Related
Needs

03

Looking Forward

Farmworker Housing – Multifamily Rental

- The Affordable Housing Fund (AHF) was established in 2013 by the San Mateo County Board of Supervisors to develop and preserve affordable housing
- Capitalized with Measure K sales tax proceeds and other local, state and federal housing finance sources.
- The AHF 11.0 Notice of Funding Availability (NOFA) was published in May 2023 with a total of approximately \$30.4MM in funding
- In 2023, San Mateo County added Farmworker Housing as an eligible housing type and housing priority with competitive points to the AHF NOFA.
- DOH received applications from two projects that included farmworker housing in their unit mix:
 - Kelly Street – 40 units
 - Cypress Point – 18 units

Farmworker Housing-related needs: Tenant Protections

- The County is funding the creation of a "model" farm worker housing lease which aims to be mutually beneficial to tenants & landlords
- Many farmworkers do not have a lease. The goal of program is to encourage landlords and tenants to enter into lease agreements in order to protect their rights as tenants
- Sponsor: Puente de la Costa Sur in collaboration with a legal services provider
- Focus groups held with farm owners and farmworkers to discuss common tenant/landlord issues & to provide input on the lease
- Some farmworkers live on the farm where they work and their employer is also their landlord
- Model lease is currently being finalized and is expected to be available in the Fall. Puente will distribute the lease at an upcoming event and to those in their listserve



Farmworker Housing-related needs: Access to laundry facilities

- Documented need for laundry facilities in Pescadero. Some farmworkers do not have access to a washer and dryer at home, and drive to Half Moon Bay and Santa Cruz to do their laundry
- Mobile laundry truck equipped with washers and dryers goes to Pescadero 1x per week and farmworkers are able to do their laundry for free
- Service promotes the hygiene of farmworkers as they will have clean clothes



Agenda

01

Farmworker Housing

02

Housing Related
Needs

03

Looking
Forward



Continued Investments In Farm Worker Housing

- SMC Board of Supervisors approved \$7,000,000 in **Measure K Funding** in the FY 2023-2024 Budget for new farmworker housing initiatives.
- Planning for the use of these funds is underway

American Recovery Program Act (ARPA) Investments in Farmworker Housing and Services

Rental Assistance to farmworker households displaced by Half Moon Bay mass shooting in January 2023 in partnership with the City of Half Moon Bay, Coastside Hope and Abode Services - \$750,000

Predevelopment funding for 40 units of farmworker housing in Half Moon Bay at 555 Kelly Street being developed by Mercy Housing - \$1.5MM

Funding for Mobile Laundry Service carried out by Project We Hope in partnership with Puente de la Costa Sur: mobile laundry truck equipped with a washer and dryer provides free laundry service 1x week in Pescadero - \$42,000

Looking Forward

Acquisition of Site in Half Moon Bay to develop a mobile home park

\$5M Joe Serna Homeownership Award to provide funding for 28 farmworker households to purchase and own a mobile home

Continue to seek land, funding and partnerships to expand the housing opportunities for farmworkers in San Mateo County

San Mateo County Farmworker Housing Initiatives

• Questions?

- For More Information Contact:
 - Rose Cade, Deputy Director
 - rcade@smcgov.org
 - Anthony Parenti, Management Analyst
 - aparenti@smcgov.org
 - Yesenia Jimenez, HCD Specialist
 - yjimenez@smcgov.org

Needs Assessment and Strategic Plan Update

Prepared for HCH/FH Board Meeting

October 12, 2023

Irene Pasma, Planning & Implementation Coordinator

2022/2023 Needs Assessment Update

- The report is done!
- It was shared in your packet and will be available on the Board's website by end of day
- How the report is/will be used:
 - Support SMMC's Improvement Council work
 - Inform HCH/FH Strategic Plan



Key Findings

Being able to meet one's social determinants of health needs appears to lead to higher perception of one's health.

Most patients prefer in-person visits over virtual healthcare appointments.

Care team members are comfortable providing services and know how to communicate to most other internal departments and some external entities for referrals, support, and information; however, many reported needing more information on referrals to other resources such as employment and legal assistance.

Noteworthy Recommendations

It is recommended that SMMC continue its work to support and empower roles across care teams to make community referrals that address patients' numerous **social determinants of health needs**.

HCH/FH can support care teams by informing and linking them to available community resources, **including community case managers**, and creating bi-directional communication and problem-solving. SMMC and HCH/FH should also support care teams with training and knowledge-sharing about existing behavioral health resources in the county.

SMMC should continue their efforts to make staff feel appreciated, which includes things such as listening to care team members' experiences at work and continuing to fund **wellness initiatives**.

SMMC and HCH/FH should consider patients' **interests in health classes** when planning outreach as well as continue to learn from these patient populations about accessibility and how they prefer to connect with health providers.

Considerations for the Future

- Additional surveys [before next Needs Assessment] to better understand care teams' ability to treat patients in these communities would be useful — particularly at locations where the majority of homeless and farmworker patient visits take place.
- Similarly, gathering additional information on patients' attitudes and beliefs about preventative care and how to best address gaps could, potentially, increase patient understanding of its importance and lead to possible future cost savings.



Strategic Plan Update

Strategic Plan Process



Built upon the 2020-2023 Plan



25 stakeholder meetings conducted with over 40 people



HCH/FH Strategic Planning Subcommittee Meetings



Review of relevant reports/documents



2022/2023 Needs Assessment

Achievements from the last Strategic Plan to this Strategic Plan

1. Implementing numerous **oral health programs** for farmworkers and people experiencing homelessness: Saturday Dental Clinic, Puente/Sonrisas, University of Pacific. Oral health has consistently been identified as a barrier for both populations.
2. Launching a **novel service geared to newly housed individuals** to help them stay connected to health care services.
3. **More services in the field:** expanded Field Medicine, supported the re-establishment of the HEAL team, extensive support of Mobile Clinics
4. **Deeper collaboration** with the Center on Homelessness, Department of Agriculture, Department of Housing, Health Plan of San Mateo, and all Health departments
5. **Engagement of stakeholders and community partners** in our Board Meetings has increased significantly.

Themes for
the 2024-
2027
Strategic
Plan

Addressing all service modalities

Focus on Behavioral Health

Cross-departmental collaboration
and problem solving

Social Determinants of Health

2024-2027 Recommended Priority Areas

Decrease barriers to
accessing health care
services

Improve health
outcomes

Support health care
and service providers

Meet and exceed all
HRSA compliance
requirements

Seek innovation and
expansion
opportunities

Decrease barriers to accessing health care services

1. Fund and coordinate enabling services
2. Fund and coordinate delivery of primary care, dental, and behavioral health services to non-conventional health care settings
3. Collaborate with SMMC, BHRS, and PHPP to optimize clinic operations and reduce patient grievances
4. Collaborate with HCU and other partners to ensure patients have and maintain insurance coverage

Improve health outcomes

- Follow work outlined in HCH/FH Quality Improvement/Quality Assurance Plan
- Provide outreach & health education to patients
- Identify sub-populations for additional data analysis and efforts to reduce health disparities
- Ensure social determinants of health are embedded in clinic and HCH/FH workflows.

Support health care and service providers

- Develop and provide relevant training
- Provide financial support for professional development and well-being initiatives
- Connect SMMC, BHRS, and PHPP care teams with external case managers and community resources

Meet and exceed all HRSA compliance requirements

- Pass HRSA Site Visit audits with minimal to no findings
- Timely and accurate annual UDS reporting
- Have a well-functioning Co-Applicant Board with consumer representation
- Regularly monitor and evaluate financial performance of contracted services/contractors
- Maximize all available HRSA opportunities and relationships

Seek innovation and expansion opportunities

- Continuously explore and engage partnerships that align with the program goals and apply for supplemental awards when appropriate.
- Be active thought partners and leaders in the County's program evaluation efforts
- Be an active partner in the County's Epic implementation initiatives
- Collect data and advocate for medically fragile homeless individuals' needs
- Partner, engage and collaborate with relevant stakeholders to explore impacts of CalAIM and other policies on quality of care and finance

Next Steps

01

HCH/FH Staff finalize activities under each priority area

02

Strategic Planning Subcommittee Meets October 26th to finalize priority areas and measurable outcomes

03

HCH/FH Board **votes** on Strategic Plan at November 2023 Board Meeting

04

RFP developed based on Strategic Plan priorities and released in Q2 2024

Tab 2
Contracts and MOUs
update



TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/
Farmworker Health (HCH/FH) Program

FROM: Meron Asfaw, Community Program Coordinator

DATE: November 9th, 2023

SUBJECT: HCH/FH Program Site Visit Report Summary

I am providing a summary of the site visit reports conducted for the HCH/FH program contractors in October 2023. A detailed report for each contractor will be submitted in the upcoming board packets once the site visits are finalized.

1. Summary of Site Visit: Abode Services

The site visit conducted on October 05, 2023, centered around Abode's operations, service delivery, and contract compliance. Abode was found to have a robust approach to client identification, data management, confidentiality, and contract-aligned service delivery.

Key Highlights:

- **Client Identification:** Abode primarily relies on referrals from various agencies, including LifeMoves and YMCA. Eligibility criteria encompass recent housing, HPSM membership, and readiness for housing. Initial assessments are conducted through questionnaires.
- **Data Management:** Abode efficiently tracks and documents care coordination services through spreadsheets and the Clarity/HMIS system. Care management plans are based on client needs.
- **Confidentiality and Security:** Abode has a written policy for client confidentiality, secure hard copy storage, and password-protected electronic data. Secure data transfer is ensured.
- **Service Delivery and Fees:** Abode adheres to contract terms and met 2023 service targets. They do not charge fees for services.
- **Challenges and Future Plans:** Abode discussed challenges, including time frame constraints for enrolling clients and the need for expansion and increased staffing. Collaboration with other agencies, enhancing client satisfaction measurements, and potential changes in meeting frequency were also part of the discussions.

2. Summary of Site Visit: Ayudando Latinos a Soñar (ALAS) Program

The site visit conducted on October 31, 2023, focused on ALAS's efforts in serving farmworkers and their dependents through outreach, referrals, and health navigation services.

Key Highlights:

- **Client Identification:** ALAS employs various methods to identify farmworkers, including snowball sampling, referrals from farms, and the "Farmworker Fridays" program. These efforts involve building relationships and obtaining consent forms. Mental health and in-house staff also contribute to client referrals.



- **Data Management:** Data collection is comprehensive, utilizing spreadsheets, Clarity/HMIS, and the forthcoming implementation of Salesforce. The organization is keen on maintaining data accuracy.
- **Confidentiality and Security/Privacy:** While a written confidentiality policy is in the implementation process, an employee handbook and annual forms are already in place. Hard copy and electronic data are securely stored and transferred.
- **Service Delivery and Fees:** ALAS acknowledged challenges in achieving their 2023 service targets, primarily due to accessibility issues stemming from farmworker shootings and flooding incidents.
- **Challenges and Future Plans:** Challenges include transportation issues for farmworkers in Half Moon Bay. ALAS is seeking to enhance outreach and engagement with neighboring community-based organizations (CBOs).

3. Summary of Site Visit: BHRS Program

3.1 HCH Program:

The site visit conducted on October 27, 2023, centered around the Behavioral Health and HEAL (HCH/HEAL) programs' efforts in serving the homeless population. These programs ensure that clients with mental health needs receive care and support.

Key Highlights:

- **Client Identification:** Both BHRS and HEAL have clear policies and procedures for identifying clients. The MOU agreement for the homeless population serves as a foundation for referrals from various sources, including HOT, HEAL, shelter staff, and family members of former clients. An Initial Contact Information (ICI) form, AVATAR, is used to identify clients.
- **Outreach and Referrals:** BHRS engages in targeted outreach and conducts various activities such as psycho-social outreach and art therapy. There is improved coordination with in-field case managers to support county efforts.
- **Data Management:** Most data is collected and tracked in AVATAR, and progress notes are used to develop and update care management plans. A discussion is ongoing about increasing target numbers in future contracts.
- **Confidentiality and Security/Privacy:** The program follows state-required policies and maintains client confidentiality and privacy through consent forms and private conversations. Meetings with BHRS, COH, and HCH/FH are planned to address shelter challenges.
- **Service Delivery and Fees:** Service delivery is reviewed, and the Program Supervisor will provide updates regarding target numbers. Clients are not charged for services, and no sliding fee scale is in place.
- **2023 Invoicing:** Invoices accurately capture clients and visits. The program is generating no income or revenue from these services, and future updates on cost projections are expected.
- **Client Satisfaction and Evaluation:** A state-required survey is conducted twice a year to measure client satisfaction. Plans are underway to develop a satisfaction survey specific to the HCH/HEAL team.

3.2 El-Centro Program: Site Visit on October 16, 2023

Key Highlights

- **Identifying Clients:** El Centro identifies clients through various channels, including forms, referrals, walk-ins, and phone inquiries. Referrals come from organizations such



as Probation, Abundant Grace, Coasthouse, ALAS, Coastside Hope, and the CARES team. They determine client eligibility based on those experiencing homelessness, staying in shelters, or working in farms.

- **Data and Documentation:** Care management plans for each client are developed and updated in a structured manner, including treatment plans and standardized documentation procedures. They use spreadsheets and the Avatar system for data collection and reporting.
- **Confidentiality and Security/Privacy:** El Centro adheres to HIPAA for client confidentiality and maintains digital records.
- **Service Delivery and Service Fees:** They actively work on meeting the target of 30 clients, but El-Centro is currently struggling with staff turnover, which they anticipated would hinder the achievement of the target goals. No clients participating in the Carino Project are charged for services, except for those with private insurance.
- **Client Satisfaction and Evaluation:** Client satisfaction is not directly measured at present, but there are plans to implement client satisfaction surveys in the future.

4. Summary of Site Visit: LifeMoves Program

The site visit conducted on September 7, 2023, focused on the LifeMoves Program and its services, particularly related to identifying clients, data and documentation, confidentiality and security, service delivery and fees, invoicing, client satisfaction and evaluation, and other concerns.

Key Highlights:

- **Client Identification:** LifeMoves utilizes both external and internal means to identify clients, including referrals from various sources such as the Homeless Outreach Team (HOT), shelter programs, and the Police Department. Intake forms are designed to identify clients' needs and evolve with changing requirements.
- **Outreach and Referrals:** The program receives referrals from both internal and external programs, collaborates with the Street Medicine Team, and works with shelter sites to address healthcare needs.
- **Data and Documentation:** Data collection is managed through two systems, HMIS and Voyagers, which allow for data tracking. Intake form consistency is being addressed in 2024, and discussions on intake form changes for the next year are ongoing.
- **Confidentiality and Security/Privacy:** Robust protocols for client confidentiality and security are in place, both for hard copy and electronic data. Data transfer is secured via password-protected email.
- **Service Delivery and Service Fees:** Services adhere to contract terms and conditions, with monthly meetings helping to ensure compliance. Target goals for transportation and in-person visits may need adjustment for the current contract year.
- **Client Satisfaction and Evaluation:** While client satisfaction surveys have been conducted in the past, the CHOW team plans to measure client satisfaction at the end of the year.
- **Staffing Concerns:** Staffing changes are reported to HCH/FH to ensure smooth transitions and client awareness.

5. Public Health Policy & Planning (PHPP):

- No updates

6. Summary of Site Visit: Puente Program



The site visit on September 18, 2023, centered on the Puente Program and its services. The discussion covered various aspects, including client identification, outreach and referrals, data and documentation, confidentiality and security, service delivery, invoicing, client satisfaction, and other operational concerns.

Key Highlights:

- **Client Identification:** Puente's community health promoters, street medicine, and participation in community events help identify and refer clients. Eligibility is determined through outreach efforts, including verifying farmworker status.
- **Outreach and Referrals:** Promotores use flyers, store postings, and community events to reach clients. General and health-related program flyers are distributed during these events. Schools also refer eligible clients.
- **Client Eligibility:** Farmworkers living or working in Pescadero are considered eligible. Paychecks may be submitted for verification.
- **Data and Documentation:** Care management plans are primarily verbal and followed up by promotores. Internal spreadsheets help track activities. Data collection is handled through an encrypted spreadsheet and HMIS/Clarity.
- **Confidentiality and Security/Privacy:** Puente has written policies on client confidentiality conforming to legal requirements. Physical files are securely stored, and electronic data is password-protected. Encryption is used for email communication.
- **Service Delivery and Service Fees:** A separate spreadsheet tracks invoices and clients and clarifications are sought from HCH/FH staff. Service delivery and patient targets have been reviewed.
- **Client Satisfaction and Evaluation:** Puente measures client satisfaction through county surveys, and data is reported as part of being a Core agency. Results are analyzed, and the county receives the data quarterly.
- **Staffing Concerns:** Puente anticipates difficulty meeting care coordination goals due to decreased farmworker numbers and onboarding new staff members.
- **Engagement with HCH/FH:** Engagement with the HCH/FH team is reported as easy and effective, with no specific improvements needed.
- **Additional Support and Collaboration:** Puente has requested the resumption of provider collaboration meetings, discussed substance use disorder services, and raised the issue of increasing dental appointments and expanding the transportation contract.

7. Summary of Site Visit: Sonrisas Dental Health

The site visit on October 16, 2023, focused on Sonrisas Dental Health and its services. The discussion covered various aspects, including client identification, data and documentation, confidentiality, service delivery, invoicing, client satisfaction, and other operational concerns.

Key Highlights:

- **Client Identification:** Sonrisas is collaborating with Puente, which identifies and refers clients in need of dental services. Farmworkers and those in Pescadero seek assistance with healthcare and other services through Puente.
- **Outreach and Referrals:** Sonrisas does not engage in outreach or referrals actively. Puente handles these aspects.
- **Client Eligibility:** Eligibility is determined by Puente, primarily focusing on farmworkers and residents in Pescadero.
- **Waiting List:** Sonrisas has a waiting list with 46 patients currently on it. Patients are identified by Puente and added to the spreadsheet, and Sonrisas follows up based on the provided information.



- **Data and Documentation:** Care management plans are developed during client appointments with providers. The content depends on the specific procedures required. Updates are made as needed. Data collection and invoicing are managed through Open Dental.
- **Confidentiality and Security/Privacy:** Sonrisas employees undergo OSHA and HIPAA training. Patients receive requisite forms outlining consent to treatment and confidentiality. There are no hard copy records.
- **Service Delivery and Service Fees:** Sonrisas ensures compliance with the contract by educating staff about services covered, referring to the contract, and seeking clarification from HCH/FH staff when questions arise. Monthly meetings are held for reinforcement.
- **Income/Revenue:** Sonrisas does not directly bill Medi-Cal clients but records Medi-Cal as the primary insurance. E35 is used as the secondary code for patients with ACE.
- **Actual Cost of Service Delivery:** The cost of service delivery has increased since the proposal was submitted, as discussed during the contract renewal meeting.
- **Client Satisfaction and Evaluation:** Sonrisas is exploring the implementation of regular survey mechanisms, with surveys anticipated to be rolled out by the end of the current fiscal year.
- **Grievance Process:** Clients typically contact the clinic directly with grievances, and issues are resolved promptly, particularly related to appointment miscommunications.
- **Service Delivery and Staffing Concerns:** There are no anticipated staffing concerns for the next 5-6 months.
- **Engagement with HCH/FH:** Engagement with the HCH/FH team is reported as easy and effective, with no specific improvements needed.
- **Additional Support and Liaison:** No additional support or liaison services are required at the moment.

8. Saturday Dental Clinic at Coastside Clinic:

- No update

Tab 3
Budget and Finance Report



San Mateo Medical Center
222 W 39th Avenue
San Mateo, CA 94403
650-573-2222 T
smchealth.org/smmc

DATE: November 09, 2023

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program

FROM: Jim Beaumont
Director, HCH/FH Program

SUBJECT: HCH/FH PROGRAM BUDGET and FINANCIAL REPORT

The initial expenditure report for October 2023 shows \$188,734 in grant expenditures. As usual, this does not include all of our contractor payments nor many routine County charges that are captured as part of month-end processing. Based on past experience, this value indicates a fairly typical expenditure amount of the month.

Based on current projections, the Program will expend approximately \$3.7M for the 2023 Grant Year (GY). Based on the total amount authorized by HRSA for the GY, this will leave around \$786K of unexpended funds that would be available for carryover (on approval of HRSA) into the 2024 GY.

Reimbursement for the grant has been drawn down through the third quarter (Jan thru Sept) and totals \$2.54M. Summary values for the three quarters were:

Salaries	\$ 533,559
Benefits	\$ 204,065
Travel	\$ 17,553
Supplies	\$ 1,312
Contracts/MOU	\$ 1,707,509
Other/Misc.	\$ <u>28,072</u>
	\$ 2,542,473

Attachment:

- GY 2023 Summary Grant Expenditure Report Through 10/31/23



GRANT YEAR 2023

October \$\$

Details for budget estimates	Budgeted [SF-424]		To Date (10/31/23)	Projection for end of year	Projected for GY 2024
EXPENDITURES					
<u>Salaries</u>					
Director, Program Coordinator Management Analyst ,Medical Director new position, misc. OT, other, etc.	721,000	49,223	578,004	720,000	798,375
<u>Benefits</u>					
Director, Program Coordinator Management Analyst ,Medical Director new position, misc. OT, other, etc.	270,000	15,809	220,931	275,000	330,000
<u>Travel</u>					
National Conferences (2500*8)	15,000	1,805	18,969	26,000	35,000
Regional Conferences (1000*5)	5,000			3,000	10,000
Local Travel	1,500			500	1,000
Taxis	1,000		187	500	500
Van & vehicle usage	1,500		311	1,000	1,500
	24,000		19,467	31,000	48,000
<u>Supplies</u>					
Office Supplies, misc. Small Funding Requests	10,000		1,312	2,500	10,000
	10,000		1,312	2,500	10,000
<u>Contractual</u>					
2022 Contracts			27,691	27,691	
2022 MOUs			412,500	412,500	
Current 2023 MOUs	1,241,000		602,230	1,241,000	1,200,000
Current 2023 contracts	865,979	101,226	707,159	875,000	825,000
---unallocated---/other contracts					
	2,106,979		1,749,580	2,556,191	2,025,000
<u>Other</u>					
Consultants/grant writer	40,000	14,592	64,995	65,000	25,000
IT/Telcom	4,200	4,518	23,954	35,000	30,000
New Automation				0	-
Memberships	2,000		3,661	7,500	5,000
Training	5,000		495	5,000	20,000
Misc			1,342	1,500	1,500
	51,200		94,447	114,000	81,500
TOTAL	3,183,179	187,173	2,663,741	3,698,691	3,292,875
GRANT REVENUE					
Available Base Grant	2,858,632		2,858,632	2,858,632	2,858,632
Prior Year Unexpended to Carryover	1,626,390		1,626,390	1,626,390	
Other					786,331 carryover
HCH/FH PROGRAM TOTAL	4,485,022		4,485,022	4,485,022	3,644,963
BALANCE	1,301,843	Available	1,821,281	786,331	352,088
			Current Estimate	Projected	based on est. grant of \$2,858,632
<u>Non-Grant Expenditures</u>					
Salary Overage	13,750	1,600	19,240	25,000	45,000
Health Coverage	57,000	6,892	62,012	78,000	90,000
base grant prep	60,000	13,362	36,020	40,000	
food	2,500	1,484	1,946	2,500	2,500
incentives/gift cards	1,000		288	1,000	1,500
	134,250		119,506	146,500	139,000
TOTAL EXPENDITURES	3,317,429	210,511	2,783,247	3,845,191	NEXT YEAR 3,431,875

Tab 4

Quality Improvement/Quality Assurance update



DATE: November 9th, 2023

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program

FROM: Frank Trinh, Medical Director HCH/FH Program
Alejandra Alvarado, Clinical Services Coordinator HCH/FH Program

SUBJECT: QI/QA COMMITTEE REPORT

- **Q3 Clinical Quality Metrics**

- The BI team has generated reports for the Q3 Clinical Quality Metrics data that became available in the month of October. These reports have been analyzed and reviewed by HCH/FH, and will be shared at an upcoming QI/QA Committee meeting.

- **HCH/FH QI/QA Committee- Q4 Meeting**

- HCH/FH will be meeting with the QI/QA Committee meeting in November for the Q4 meeting. This will be the final meeting of the year, where the committee will review the Q3 Clinical Quality Metrics data, project updates, and discuss quality improvement efforts for the upcoming year.

- **Half Moon Bay Library- Blood Pressure Cuffs**

- HCH/FH has partnered with the Half Moon Bay Library to make blood pressure cuffs accessible to members of the community who have a library card. This pilot project has commenced, and HCH/FH will be tracking usage of farmworker and homeless member usage for the duration of this project.

- **AMI Phones Project**

HCH/FH is working with AMI Strategies to provide phones to people experiencing homelessness around San Mateo County. HCH/FH is recruiting contracted partners to distribute new phones to clients who would benefit from accessing virtual care with SMMC providers via phone. HCH/FH will monitor device usage and applications to help improve clients access and health outcomes.

Tab 5
HCH/FH Director's
Report



SAN MATEO COUNTY HEALTH
**SAN MATEO
MEDICAL CENTER**

San Mateo Medical Center
222 W 39th Avenue
San Mateo, CA 94403
650-573-2222 T
smchealth.org/smmc

DATE: November 09, 2023

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program

FROM: Jim Beaumont Director, HCH/FH Program

SUBJECT: DIRECTOR'S REPORT & PROGRAM CALENDAR

Program activity update since the October 12, 2023, Co-Applicant Board meeting,

The recruitment for the vacant HCH/FH Planning & Implementation Coordinator position continues to move forward. The application period has closed, 27 applications were screened down to eleven (11), and a civil service panel interview was conducted on Tuesday of this week with each of the candidates. There are a number of promising candidates, and we hope to make a final decision soon.

On Monday of this week (November 6), Irene Pasma and I presented the HCH/FH Needs Assessment Report to the Health Executive Council (HEC). It is a significant step forward for the Program to be asked to present to HEC.

Program continues to move forward with planning for the delivery of dental services by The University of Pacific (UoP) at the Navigation Center. On Thursday, November 2nd UoP Dental Program and senior administrative officials visited and toured the Navigation Center, as they move forward in their hiring process for the individuals to staff the effort.

Seven Day Update

ATTACHED:

- Program Calendar





**2023 Calendar - County of San Mateo Health Care for the Homeless
& Farmworker Health (HCH/FH) Program**

Board meetings are in-person on the 2nd Thursday of the Month 10am-12pm

Month	Events
January	<ul style="list-style-type: none"> HCH/FH Board's first meeting of the year HCH/FH Board will vote on new time change for the board meeting
February	<ul style="list-style-type: none"> Initial UDS Submission: February 15, 2023 2023 Western Forum for Migrant and Community Health, February 14-16, Long Beach, CA. https://www.nwrpca.org/events/event_details.asp?legacy=1&id=1670924
March	<ul style="list-style-type: none"> HCH/FH Board will return to an in-person meeting. Location: SMMC Education Room 2 Sliding Fee Discount Scale (SFDS)-Approve
April	<ul style="list-style-type: none"> East Coast Migrant Health Stream, Orlando FLA; sponsored by North Carolina Comm Health Center Assoc. April 5-7 Midwest Stream Forum on Agricultural Worker Health, Austin, TX; sponsored by National Center for Farmworker Health, April 24-26 SMMC Annual Audit – Approve In-person meeting location: County Building Room 101 455 County Center Redwood City, CA 94063
May	<ul style="list-style-type: none"> 2023 National Conference for Agricultural Worker Health, Seattle WA; sponsored by National Association of Community Health Centers (NACHC), May 2-4. National Health Care for the Homeless Conference and Policy Symposium, May 15-18, Baltimore, Maryland https://nhchc.org/trainings/conferences/
June	<ul style="list-style-type: none"> Services/Locations Form 5A/5B – Approve In-person meeting location: Half Moon Bay Library 620 Correas St, Half Moon Bay, CA 94019 (Half Moon Bay Library)
July	<ul style="list-style-type: none"> In-person meeting location: 264 Harbor Blvd., Bldg. A Belmont, CA 94002 (Department of Housing, Venus Room) Approving policy and procedures Approving SAC application
August	<ul style="list-style-type: none"> Meeting location: Navigation Center
September	<ul style="list-style-type: none"> Program Director Annual Review Meeting location: Half Moon Bay Library
October	<ul style="list-style-type: none"> Meeting location: Navigation Center
November	<ul style="list-style-type: none"> Approve 2024-2027 HCH/FH Strategic Plan Board Chair/Vice Chair Elections Meeting location: County Building Room 101 455 County Center Redwood City, CA 94063
December	<ul style="list-style-type: none"> Meeting location: County Building Room 101 455 County Center Redwood City, CA 94063

BOARD ANNUAL CALENDAR	
Project	Timeframe
UDS Submission – Review	Spring
SMMC Annual Audit – Approve	April/May
Services/Locations Form 5A/5B – Approve	June/July
Budget Renewal - Approve	July/Sept (program)– December/January (grant)
Annual Conflict of Interest Statement	October (and during new appointments)
Annual QI/QA Plan – Approve	Winter
Board Chair/Vice Chair Elections	November/December
Program Director Annual Review	Fall/Spring
Sliding Fee Discount Scale (SFDS)	Spring
Strategic Plan Target Overview	November

Tab 6

Request to re-nominate board
members with terms expired in
September 2023



SAN MATEO COUNTY HEALTH
**SAN MATEO
MEDICAL CENTER**

San Mateo Medical Center
222 W. 39th Avenue
San Mateo, CA 94403
650-573-2222 T
www.sanmateomedicalcenter.org
www.facebook.com/smchealth

DATE: November 9th, 2023

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/
Farmworker Health (HCH/FH) Program

FROM: Meron Asfaw, Community Program Coordinator

SUBJECT: REQUEST FOR APPROVAL TO RE-NOMINATE BOARD MEMBERS
WITH EXPIRING TERMS

Pursuant to our bylaws, one term on the board is four years, and there are no limitations to the number of terms a board member can serve. In light of this, we would like to request approval to re-nominate these board members for another term.

We believe that these board members have demonstrated an unwavering commitment to HCH/FH board and possess the experience and expertise necessary to continue contributing meaningfully to our mission.

To ensure a seamless continuation of our operations, we kindly request your approval to re-nominate the following board members:

Tayischa Deldridge, whose term expired in September 2023. The new term will expire in September 2027



SAN MATEO COUNTY HEALTH
**SAN MATEO
MEDICAL CENTER**

San Mateo Medical Center
222 W. 39th Avenue
San Mateo, CA 94403
650-573-2222 T
www.sanmateomedicalcenter.org
www.facebook.com/smchealth

DATE: November 9th, 2023

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/
Farmworker Health (HCH/FH) Program

FROM: Meron Asfaw, Community Program Coordinator

SUBJECT: REQUEST FOR APPROVAL TO RE-NOMINATE BOARD MEMBERS
WITH EXPIRING TERMS

Pursuant to our bylaws, one term on the board is four years, and there are no limitations to the number of terms a board member can serve. In light of this, we would like to request approval to re-nominate these board members for another term.

We believe that these board members have demonstrated an unwavering commitment to HCH/FH board and possess the experience and expertise necessary to continue contributing meaningfully to our mission.

To ensure a seamless continuation of our operations, we kindly request your approval to re-nominate the following board members:

Tayischa Deldridge, whose term expired in September 2023. The new term will expire in September 2027

Tab 7
Approving HCH/FH
Strategic Planning



DATE: November 9, 2023

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program

FROM: Irene Pasma, Program Planning and Implementation Coordinator

SUBJECT: HCH/FH STRATEGIC PLAN 2024-2027 UPDATE

Staff presented the Draft 2024-2027 Strategic Plan to the Board at the October Board Meeting and provided a high-level overview of all the sections of the plan. The intent of the Strategic Plan is to be a living document which helps guide the HCH/FH Board in decision making on how to spend funds and how to direct staff time and resources.

The HCH/FH Strategic Planning Subcommittee met on October 30th to review and provide additional feedback on the draft plan. Staff has updated the plan following the subcommittee's input and is bringing it back to the full Board for a lengthier discussion and a vote to adopt the Plan.

Board Members are requested to review the attached Strategic Plan in-depth prior to the November Board Meeting. Specifically, review Page 9 (Strategic Plan Activities) and Pages 11-13, which provide details about how each activity on page 9 will be implemented. Below are 2 discussion questions Board Members can keep in mind in reviewing this document:

1. Does the Strategic Plan have the necessary elements to guide the Board's decision making by outlining the types of services/activities the Board wants to prioritize in the next 3 years?
2. Are all activities you would have expected listed on pages 9 or 11-13 (Program Activities Breakdown)?
Is anything missing?

Please come prepared to answer those two questions.

Attached: Strategic Plan 2024-2027 Draft Version 3



County of San Mateo
**Healthcare for the
Homeless/Farmworker
Co-Applicant Board**
Strategic Plan 2024-2027

Table of Contents

Executive Summary 2

HCH/FH Background..... 3

Strategic Plan Background..... 3

Mission & Values 4

 Values 4

 Vision..... 4

Glossary of Terms and Abbreviations..... 4

Achievements from previous Strategic Plan:..... 6

Themes for the 2024-2027 Strategic Plan.....7

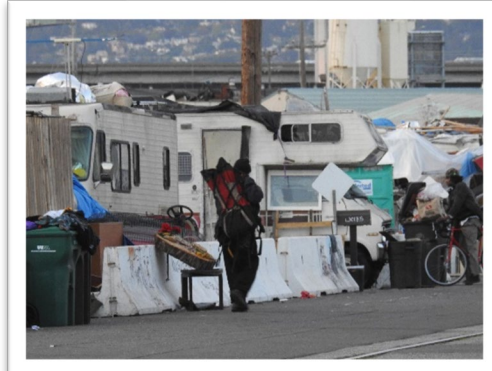
Areas for improvement for the next strategic planning effort: 8

2024-2027 Strategic Priorities 8

 Strategic Plan Activities 9

Stakeholders10

Appendix – Program Activities Breakdown 11



HCH/FH Background

San Mateo County's Health Care for the Homeless/ Farmworker Health Program (HCH/FH) is a federally funded program which has delivered and coordinated health care and support services for people experiencing homelessness since 1991. In July 2010, the program expanded its scope of services to include the farmworker population and their families/dependents.



HCH/FH Board Members and Staff

HCH/FH is funded by U.S.

Department of Health and Human Services' Health Resources and Services Administration (HRSA) pursuant to Sections 330(g) and 330(h) of the Public Health Service Act to support the planning for and delivery of services to medically underserved populations. It is jointly governed by an independent Co-Applicant Board, and the San Mateo County Board of Supervisors.

People in San Mateo County experiencing homelessness or who work as farmworkers (and their families) can access any San Mateo County Health touch point – San Mateo Medical Center (SMMC), satellite clinics, mobile clinics – and numerous other County and community-based organizations to receive outpatient health services regardless of insurance or documentation status. The HCH/FH Program has agreements with county and nonprofit organizations to provide these services and compliance with HRSA regulations provides SMMC with Federally Qualified Health Center (FQHC) status.

HRSA has a broad definition of homelessness which, in addition to people residing in shelters or on the street/in cars/RVs, includes doubling up (i.e. couch surfing) and those in transitional or permanent supportive housing. For farmworkers, both seasonal and migrant workers are included in HRSA's definition, and importantly, so are family members.

Strategic Plan Background

This strategic plan is built upon the 2020-2023 Strategic Plan ([link](#)). Over 25 stakeholder meetings were conducted by HCH/FH staff with relevant key stakeholders, publications were read such as the California Statewide Study of People Experiencing Homelessness ([link](#)) and 2023 The California Street Medicine Landscape Survey and Report ([link](#)) which helped inform both the stakeholder conversations and the recommendations staff made to the HCH/FH Board in adopting this strategic plan. The HCH/FH Strategic Planning Subcommittee met three times and the Board was updated throughout the process. Further, the 2022/2023 Needs Assessment ([link](#)) informed the strategic plan in fundamental ways by shedding light on attitudes, beliefs and values of San Mateo Medical Center clinicians and patients alike.

This plan, like its predecessor, outlines major strategic priority areas which are slightly revised from the last plan to reflect current trends and environment. The priorities outlined in this strategic plan is intended to inform the HCH/FH Co-Applicant Board in deciding which services it will go out to Request for Proposal (RFP) in 2024 with contracts starting in 2025 and how to direct staff time.

Mission & Values

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.

Glossary of Terms and Abbreviations

The Strategic Plan refers to industry-specific terminology the reader might find helpful to familiarize themselves with at the start of the document.

Enabling Services: Non-clinical services that enable individuals to access health care and improve health outcomes. These include, but are not limited to: case management, care coordination, referrals, translation/interpretation, transportation, eligibility assistance, health education for individuals or families on relevant health topics, environmental health risk reduction, health literacy, and screenings, referrals, etc.

Federally Qualified Health Center (FQHC): FQHCs are primary care clinics that receive federal funds to provide healthcare services to underserved communities. They operate in both rural and urban areas designated as shortage areas.

Behavioral Health and Recovery Services (BHRS): is a division within San Mateo County Health which oversees mental health, substance use disorders, outpatient treatment and other related services.

Non-conventional health settings: this is reflective of the understanding that people experiencing homelessness and farmworkers/family members are often unable to come into a typical outpatient clinic for a variety of reasons, including inability to come during regular clinic hours, lack of transportation, no health insurance/inability to pay out of pocket, or past negative experiences with the health care system. Therefore, HCH/FH strives to bring health care services to places (physically and emotionally) where people experiencing homelessness or farmworker and their family members meet, live, or reside. This includes non-conventional health care settings such as tent encampments, shelters, safe parking programs, permanent supportive housing projects, farms, farmworker housing, and others as they arise.

Patient Population: San Mateo County's HCH/FH is a unique Federally Qualified Health Center because it focuses on two sub-populations: 1) people experiencing homelessness and 2) farmworkers and their families in San Mateo County. People experiencing homelessness includes those residing in shelter, on the street – which includes vehicularly housed - doubling up (i.e. couch surfing), permanent supportive housing, and transitional housing. Farmworkers include both seasonal and migrant workers, though due to the crops grown here, most of SMC's farmworkers are classified as migrant (i.e., they permanently live in the county).

Public Health Policy & Planning (PHPP): is a division within San Mateo County Health which includes Epidemiology, Public Health Lab, and Mobile Clinics. HCH/FH collaborates extensively and provides funding for Mobile Clinics for Street and Field Medicine.

Scope of services: includes services provided by the San Mateo Medical Center outpatient clinics, Behavioral Health and Recovery Services regional clinics, and Public Health Policy and Planning's Mobile Clinics teams. Additionally, it includes services contracted by the HCH/FH program (see Annual Report for full list, [link](#)).

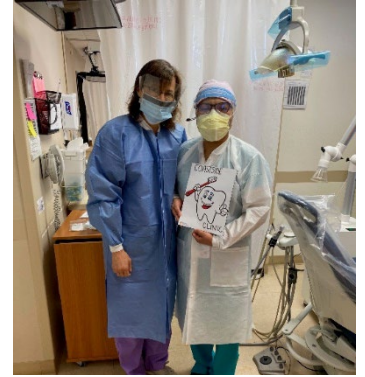
Service Providers: HCH/FH works with a myriad of service providers. In the present report, this term - unless it is further defined – includes both healthcare providers (i.e. physicians, nurses, social workers) as well as non-profit organizations HCH/FH contracts with (see Annual Report for full list, [link](#)).

Sub-populations: Sub-populations refer to further stratifying the two target populations by additional defining characteristics, such as by LGTBQ+ status, age, health condition, race/ethnicity as well as the intersectionality of these categories.

Achievements from previous Strategic Plan:

Three years have passed since the last strategic plan was finalized, during which the world dramatically changed due to the Covid-19 pandemic and San Mateo County increased focus on both target populations. Despite the turbulent times and because of the increased focus, the HCH/FH Program was able to make strides in several noteworthy areas - more can be found in the 2022 HCH/FH Annual Report ([link](#)):

1. **Expanding oral health programs:** oral health has consistently been identified in HCH/FH Needs Assessments as an unmet need for both target populations. HCH/FH began funding a monthly Saturday Dental Clinic at Coastside Clinic, continued weekly Sonrisas services co-located at Puente, and providing a portion of the funding for University of Pacific at the Navigation Center (service slated to begin end of 2023/early 2024).
2. **Launching enabling services for newly housed individuals:** while HCH/FH cannot pay for housing, as a result of the last strategic planning effort, it became clear newly housed individuals might lose their housing due to health-related issues. This service provides medical care coordination to recently housed individuals or those preparing to move into permanent housing.
3. **Expanding field health services:** the Board was passionate about mirroring the Pescadero Field Medicine program in Half Moon Bay and provided seed funding to PHPP to do so. Additionally, the Board began funding ALAS, a nonprofit in Half Moon Bay, to provide health education and health promotion on Half Moon Bay farms. The Board also supported the re-establishment of the Homeless Engagement, Assessment, & Linkage (HEAL) team by funding one position and elevating the need for more funding to the Mental Health Services Act which agreed to fund additional positions.
4. **Deepening collaborations:** with the Center on Homelessness, Department of Agriculture, Department of Housing, Health Plan of San Mateo, and all Health departments particularly within SMMC have enabled more work to be accomplished as well as an ability to focus on data sharing and more data-based decision making.
5. **Increasing stakeholder engagement:** over the last several years at HCH/FH Board Meetings has led to robust conversations and deepening the Board's understanding of pressing issues, such as how the federal poverty level guidelines impact farmworkers' ability to access the County's health insurance program ACE.



Dr. Scopazzi and dental assistant Eliza on the inaugural Saturday Clinic at Coastside Clinic in Half Moon Bay



An HCH/FH Board Meeting well attended by members of the community at the Half Moon Bay library



Francisco Vargas and Amanda Martin, two fantastic behavioral health outreach workers attending an HCH/FH Board meeting to present on their work

Themes for the 2024-2027 Strategic Plan

In updating the strategic plan, several major themes arose which are summarized below. While not each theme is captured explicitly in a stated strategic priority or activity beneath, these are embedded in everything staff does in implementing the Board's vision for the program.



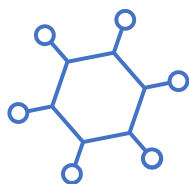
Obtaining services at a Brick-and-Mortar clinic is not the correct goal for all: There has been a transition from prioritizing treatment at brick-and-mortar clinics as the goal for all patients to – instead – celebrating being able to bring medical, dental, and behavioral health care in the most appropriate modality to the target population. For some patients, making it to a physical primary care clinic will never be a possibility, therefore bringing services to them – both by physically meeting them where they are as well as meeting them emotionally – should be counted as a success. It remains necessary to simultaneously partner with SMMC to ensure clinics are able to meet the needs of both populations by having the necessary resources to do so.



Tailoring behavioral health: like the previous strategic planning cycle, behavioral health continues to be a large focus for the Board. For farmworkers, there is a desire to not only fund behavioral health services but to better understand *how* to deliver those services – both mental health and substance use-related – in a culturally competent manner and supported by best practices¹. For people experiencing homelessness, the ability to monetarily incentivize individuals to participate in treatment and/or abstaining from substances (called contingency management) is a promising model to further explore, among others, with BHRS colleagues.



Collaboration: HCH/FH staff and Board members are uniquely positioned as subject matter experts to promote and conduct cross-collaboration, information sharing and problem solving between Health, Human Services Agency (HSA), Department of Housing (DOH), as well as contracted and non-contracted providers. In order to make headway in any of the priority areas listed below, this type of cross-departmental collaboration is imperative. Additionally, HCH/FH's ability to write grants to access supplemental funding – be it from HRSA or other entities such as Health Districts, Hospital Systems, Chan Zuckerberg Initiative and others – and accessing technical assistance is being increasingly leveraged.



Social Determinants of Health: The Board continues to firmly believe that housing – a classic social determinant of health (SDOH) example - is healthcare. The 2022/2023 Needs Assessment ([link](#)) elegantly showed when patients have access to necessities such as housing, food, employment – they rank their health higher. Finding ways to promote social determinants of health will continue to influence the Board's decision making. Though it is not always possible to fund them directly, there are numerous other ways the Board could support SDOH efforts, including funding relevant studies.

¹ The shooting in Half Moon Bay in early 2023 reminds us of the importance of addressing behavioral health in all our communities

Areas for improvement for the next strategic planning effort:

1. Continue identifying best practices to engage with the community to gain input into the strategic plan at each stage
2. Continue building team's capacity to set and monitor quantifiable goals
3. Improve alignment with other County Needs Assessment efforts to augment HCH/FH Strategic Planning efforts

2024-2027 Priority Area and Metrics

Each Priority Area is further defined on the next page. The Board may choose to assign additional metrics to each area in future iterations of the Strategic Plan, which is intended to be a living document.

Priority Area	Metrics
1. Decrease barriers to accessing health care services	Increase the number of 'touches' or 'visits' across all services (enabling, primary, behavioral, dental) and modalities (mobile and brick & mortar clinics) year over year.
2. Improve health outcomes	Refer to goals set forth in the HCH/FH Quality Improvement/Quality Assurance Plan
3. Support health care and service providers	Track number of trainings and other professional development opportunities offered annually and increase year over year*
4. Meet and exceed all HRSA compliance requirements	Following a HRSA site visit, have no more than 5 immediate enforcement actions. The next site visit is anticipated in 2025.
5. Seek innovation and expansion opportunities	Add at least one new funding source or supplemental award in the 2024-2027 cycle.

**pending external factors such as conference location/costs and ability/willingness of staff to engage in offerings*

Strategic Plan Activities

Below are high-level activities associated with each strategic priority area. More granular-level activities are listed out in separate, program-level documents to ensure priorities are met.

1. Decrease barriers to accessing health care services

1. Fund and coordinate enabling services
2. Fund and coordinate delivery of primary care, dental, and behavioral health
3. Collaborate with SMMC, BHRS, and PHPP to optimize clinic operations and reduce patient grievances
4. Collaborate with Health Coverage Unit (HCU) and other partners to ensure patients have and maintain insurance coverage

2. Improve health outcomes

1. Follow work outlined in HCH/FH Quality Improvement/Quality Assurance Plan
2. Provide outreach & health education to patients
3. Identify sub-populations for additional data analysis and efforts to reduce health disparities
4. Ensure social determinants of health are embedded in clinic and HCH/FH workflows

3. Support health care and service providers

1. Develop and provide relevant training
2. Provide financial support for professional development and well-being initiatives
3. Connect SMMC, BHRS, and PHPP care teams with external case managers and community resources

4. Meet and exceed all HRSA compliance requirements

1. Pass HRSA Site Visit audits with minimal to no findings
2. Timely and accurate annual Uniform Data System (UDS) reporting
3. Have a well-functioning Co-Applicant Board with consumer representation
4. Regularly monitor and evaluate financial performance of contracted services/contractors
5. Maximize all available HRSA opportunities and relationships

5. Seek innovation and expansion opportunities

1. Continuously explore and engage partnerships that align with the program goals and apply for supplemental awards when appropriate
2. Be active thought partners and leaders in the County's program evaluation efforts
3. Be an active partner in the County's EPIC implementation initiatives
4. Collect data and advocate for medically fragile homeless individuals' needs
5. Partner, engage, and collaborate with relevant stakeholders to explore impacts of CalAIM and other policies on quality of care and finance

Stakeholders

Thank you to the over 40 individuals who gave their time and perspectives to forming this strategic plan as well as the members of the HCH/FH Strategic Planning Subcommittee for their dedication to this work:

1. **Anessa Farber**, San Mateo County Health
2. **Belinda Arriaga**, ALAS
3. **Clara Boyden**, San Mateo County Health
4. **Corie Schwabenland**, ALAS
5. **Corina Rodriguez**, Puente de la Costa Sur
6. **Don Orr**, San Mateo County Health
7. **Elisa Calfiore**, LifeMoves
8. Farmworker Affairs Coalition (7/14/23 meeting)
9. Farmworker Focus Group at Puente
10. **Francisco Valencia**, LifeMoves
11. **Frank Trinh**, San Mateo County Health
12. **Gabe Garcia**, HCH/FH Board Member
13. **Gale Carino**, Health Plan of San Mateo
14. **Ione Yuen**, San Mateo County Department of Agriculture/Weights & Measures
15. **Jack Nasser**, San Mateo County Health
16. **Janet Schmidt**, HCH/FH Board Member
17. **Jei Africa**, San Mateo County Health
18. **Judith Guerrero**, HCH/FH Board Member
19. **Kacie Patton**, San Mateo County Health
20. **Karen Krahn**, San Mateo County Health
21. **Kate Arsenault**, Health Plan of San Mateo
22. **Khalia Parish**, San Mateo County Human Services Agency
23. **Kique Bazan**, ALAS
24. **Koren Widdel**, San Mateo County Department of Agriculture/Weights & Measures
25. **LEAG Meeting** (6/20/23 meeting)
26. **Lody Burdick**, San Mateo County Human Services Agency
27. **Lucinda Dei Rossi**, San Mateo County Health
28. **Luis Valdivias**, El Centro
29. **Marc Meulman**, San Mateo County Health
30. **Maricela Zavala**, Puente de la Costa Sur
31. **Marmi Bermudez**, Health Coverage Unit
32. **Matthew Hayes**, San Mateo County Human Services Agency
33. **Patrick Grisham**, San Mateo County Health
34. **Peter Shih**, San Mateo County Health
35. **Rita Mancera**, Puente de la Costa Sur
36. **Robert Anderson**, HCH/FH Board Member
37. **Rose Cade**, San Mateo County Department of Housing
38. **Sandra Sencion**, ALAS
39. **Steve Kraft**, HCH/FH Board Member
40. **Suzanne Moore**, HCH/FH Board Member
41. **Tanya Beat**, LGBTQ Commission
42. **Tasha Souter**, San Mateo County Health
43. **Tejasi Khatri**, Health Plan of San Mateo
44. **Ziomara Ochoa**, San Mateo County Health

Appendix – Program Activities Breakdown

Each of the sections outlined in “Strategic Plan Activities” (page 9) is further detailed to give visibility into how Strategic Plan Activities will be executed.

1. Decrease barriers to access services

- a. Fund and coordinate enabling services
 - i. Attach Medical Care Coordinator capacity to PHPP to help those teams and their patients be as successful as possible in the provision and obtaining of healthcare services
 - ii. Attach Medical Care Coordinator capacity to newly housed individuals to create new or maintain existing connection to health care services
 - iii. Fund transportation and language interpretation services
- b. Fund and coordinate delivery of primary care, dental, and behavioral health services to non-conventional health care settings
 - i. Bring and/or coordinate primary care, mental health and Alcohol and Other Drug (AOD) services to locations where people experiencing homelessness reside or gather, encampments, shelters, etc.
 - ii. Bring and/or coordinate primary care, mental health and AOD services to farmworkers along the entire coast
 - iii. Coordinate and provide health care services at the Navigation Center
- c. Collaborate with SMMC, BHRS, and PHPP to optimize clinic operations and reduce patient grievances
 - i. Work with SMMC to create appointment slots/walk-in hours for patients
 - ii. Optimize Saturday Dental Clinic at Coastside Clinic
 - iii. Explore and develop tele-health options for interested patients, including the provision of technology if/when appropriate.
 - iv. Regularly meet with clinic managers and SMMC Improvement Councils
 - v. Administer targeted surveys to clinics seeing the largest volume of target population patients to better understand clinic staff needs, beliefs, and attitudes.
 - vi. Continue partnering with SMMC to ensure clinic registration processes accurately capture homeless and farmworker status as well as SOGIE (Sexual orientation, gender identity, and gender expression, Race & Ethnicity data)
 - vii. Continue investigating SMMC clinic wait times for target populations and how they could be reduced
 - viii. Continue refining grievance data collection and follow up for target population
- d. Collaborate with HCU and other partners to ensure patients have and maintain insurance coverage
 - i. Work with relevant partners to expand ACE income eligibility criteria

2. Improve health outcomes

- a. Follow work outlined in HCH/FH Quality Improvement/Quality Assurance Plan
- b. Provide outreach & health education to patients
- c. Identify sub-populations for additional data analysis and efforts to reduce health disparities

- i. Conduct comprehensive assessments to understand the unique healthcare needs and barriers faced by sub-populations, including youth, LGBTQ individuals, aging individuals, etc.
- d. Ensure social determinants of health are embedded in clinic and HCH/FH workflows.

3. Support health care and service providers

- a. Develop and provide relevant training
 - i. Provide population appropriate training to SMMC, BHRS, PHPP, and community providers at least 2x/year
 - ii. Host forums for providers within SMMC, PHPP, BHRS, and nonprofits to discuss healthcare needs of homeless and farmworker patients
 - iii. Create/maintain/update LMS modules (i.e. PSA training, homeless & farmworker health topics)
- b. Provide financial support for professional development and well-being initiatives
 - i. Partner with SMMC on opportunities to support and fund staff wellness initiatives
 - ii. Empower and encourage program staff in areas of professional growth and development
 - iii. Attract, develop, and retain a diverse and talented team
- c. Connect SMMC, BHRS, PHPP care teams with external case managers and community resources
 - i. Support SMMC and Health in the EPIC EHR implementation (Integr8 Health), particularly its Case Management component

4. Meet and exceed compliance requirements

- a. Pass HRSA Site Visit audits with minimal to no findings
 - i. Timely and accurate annual UDS reporting
 - ii. Conduct Needs Assessment, update QI/QA and Strategic Plans on an ongoing basis
- b. Have a well-functioning Co-Applicant Board with consumer representation that:
 - i. is representative of the target population served
 - ii. is subject matter expert in topics pertinent to the program
 - iii. is connected and an active participant in the community
 - iv. is compliant with local, state, and federal regulations including the Brown Act, Ethics, Conflict of Interest and other
- c. Regularly monitor and evaluate financial performance of contracted services/contractors
- d. Maximize all available HRSA opportunities/relationships
 - i. FQHC loan forgiveness
 - ii. Support County Health and SMMC in getting FQHC sites when appropriate
 - iii. Engage and explore technical assistance opportunities through HRSA and other entities.
 - iv. Apply for supplementation HRSA awards when appropriate

5. Seek innovation and expansion opportunities

- a. Continuously explore and engage in partnerships that align with the program goals and apply for additional funding (beyond HRSA)
- b. Be active thought partners and leaders in the County's program evaluation efforts
 - i. Review relevant literature and attend germane conferences
 - ii. Information share with relevant stakeholders

- c. Be an active partner in the County's Epic implementation initiatives
 - i. Participate in Improvement Councils and Redesign meetings
- d. Collect data and advocate for medically fragile homeless individuals' needs
- e. Partner, engage and collaborate with relevant stakeholders to explore impacts of CalAIM and other policies on quality of care and finance
 - i. Meet with the Health Plan of San Mateo and other