

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

Co-Applicant Board Meeting Agenda

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

December 12th, 2024, 12:30pm - 2:30pm

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 jvidales@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		12:3 <mark>0</mark> pm
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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. ACTION TO SET THE AGENDA & CONSENT	Robert Anderson	12:40pm
AGENDA		
 Approve meeting minutes from November 14th, 2024 Board Meeting 		Tab 1
Budget and Finance Report		Tab 2
3. HCH/FH Director's Report		Tab 3
4. Quality Improvement/Quality Assurance		Tab 4
Update		

D. 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 updates	Board members	12:45pm



San Mateo County HCH/FH Program Co-Applicant Board Agenda

E. BUSINESS AGENDA		1		377
Request to Vote on Ad Hoc January Board Meeting - OSV	Jim Beaumont		1:00pm	Tab 5

F. REPORTING & DISCUSSION AGENDA		
HCH/FH Base Grant and BHSE Contracts Update	Jim Beaumont	1:15pm
HCH/FH 2024 Year in Review and Looking Ahead	Alejandra Alvarado	1:30pm
Board Members: HCH/FH Program Feedback and Insights Survey	Alejandra Alvarado & Jocelyn Vidales	2:15pm

G. ADJOURNMENT	2 <mark>:30pm</mark>

Future meeting: January 9th, 2024

Time: 10:00am-12pm

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

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 jvidales@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.

^{*}Instructions for Public Comment During Meeting

Tab 1 Meeting Minutes



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

Co-Applicant Board Meeting Minutes 455 County Center, Redwood City, CA 94063 (Room 101) November 14th, 2024, 10:00am - 12:00pm

Co-Applicant Board Members Present	County Staff Present	Members of the Public	Absent Board Members/Staff
 Steve Kraft Brian Greenberg Janet Schmidt Steve Carrey Robert Anderson (Chair) Suzanne Moore Victoria Sanchez de Alba (Vice- Chair) Tayischa Deldridge Tony Serrano Judith Guerrero Gabe Garcia Jim Beaumont (Ex Officio) 	 Frank Trinh Gozel Kulieva Jocelyn Vidales Alejandra Alvarado Amanda Hing-Hernandez Anessa Farber Marisol Escalera Durani 	 Monica Spader, Interpreter Marci Valvidieso, Interpreter Ophelie Vico, Puente Anita Rees, Pacifica Resource Center Jorge Sanchez, ALAS 	Francine Dickson-Serafin

A. Call to order & roll call	Robert Anderson called the meeting to order at 10:02 am and did a roll call.	
B. Public comment	Ophelie Vico, Puente de la Costa Sur Ophelie presented to the Board a letter drafted by Puente and other community-based organizations calling for the San Mateo County Board of Supervisors to take concrete steps to ease the anxieties and ensure safety for the diverse immigrant communities in the County. Full letter can be found attached to the minutes. Jorge Sanchez, ALAS Informed the public and the Board of the upcoming Farmworker Health Community Event in Half Moon Bay, scheduled for November 23d, 2024. Flyer can be found here	

	Marisol Escalera Durani, Supervisor Mueller's Office A ribbon cutting ceremony took place on the County's coast to celebrate the opening of an urgent care clinic via an agreement with Dignity Health. County entered an agreement with Dignity Health to run a pilot program and make urgent care services available on the coast, and measure and evaluate the need of these services on the Coast. In addition, Marisol informed the Board that the current independent report on the County's Sherriff's office is available online. Report can be found here County of San Mateo - Calendar	
C. Action to set the agenda and consent agenda.	Approve meeting minutes from September 12 th 2024 Board Meeting Budget and Finance Report HCH/FH Director's Report Quality Improvement/Quality Assurance Update	Request to approve the Consent Agenda was MOVED by Robert Anderson and SECONDED by Suzanne Moore APPROVED by all Board members present.
 Business Agenda Request to Vote on 2025 HCH/FH Chair and Vice- Chair Request to Approve the Annual QI/QA Plan Request to Approve HRSA Operational Site Visit (OSV) Documents Request to Vote on December 12th, 2024 Board Meeting Time Change Request to Re-nominate Board Members with Terms Expired in November 2024 	Robert Anderson, Chair Robert provided a summary of the nominees for Chair and Vice Chair before confirming with Gabe that he wished to withdraw from consideration for Vice Chair, which Gabe affirmed. The election began with the selection of the Chair, followed by the Vice Chair. Reflecting on his tenure as Chair, Robert expressed gratitude for the honor of serving and emphasized the importance of leadership rotation to foster growth among board members. With that sentiment, he withdrew his nomination for Chair and endorsed Victoria, who was elected as Board Chair for 2025. For the Vice Chair election, the two remaining candidates, Tony Serrano and Steve Carey, each had a brief opportunity to share their vision and interest in serving as Vice Chair. Multiple board members shared their reasoning for why they voted for each Vice-Chair nominee. Steve Carey received the majority vote. Steve Carey was elected as Vice-Chair for 2025.	Request to Vote on 2025 HCH/FH Chair and Vice- Chair was MOVED by Robert Anderson and SECONDED by Suzanne Moore For Vice-Chair: Votes for Steve: Suzanne Moore, Robert Anderson, Steve Kraft, Gabe Garcia, Toney Serrano, Tayischa Deldridge, Janet Schmidt Votes for Tony: Judith Guerrero, Victoria Sanchez de Alba Abstained: Steve Carey APPROVED by all Board members present.
	Alejandra Alvarado & Frank Trinh, MD Alejandra informed the board that the QI/QA Plan requires annual board approval. She outlined the review and evaluation process and highlighted key updates, including aligning QI/QA metrics with HRSA and SMMC guidelines. For instance, the BMI metric was removed as a priority indicator, following	Request to Approve the Annual QI/QA Plan was MOVED by Tayischa Deldridge and SECONDED by Steve Kraft

SMMC's lead, though it will continue to be tracked. Janet asked why the BMI indicator was removed as it is typically included as a health indicator. Tayischa explained that BMI is not an accurate health indicator for certain populations, such as Black Americans. Frank agreed, noting that BMI has limitations as a reliable measure across diverse patient groups and stated that there may be alternative indicators that better reflect health trends.

Gabe inquired about the progress of the homeless mortality data project. Alejandra explained that the San Mateo County Public Health Epi team is currently cross-referencing data with the coroner's office death records, a process expected to conclude by December. Report drafting is expected to begin in January, in which Public Health Epi plans to include HCH/FH as report writing partners. Suzanne asked if the report would include cause of death data. Frank confirmed this and emphasized that the Epi team is building infrastructure to streamline future data collection and reporting on homeless mortality in the County.

Jim Beaumont, HCH/FH Director

Jim provided a brief overview of the HRSA Operational Site Visit (OSV) and updated the board on the program's ongoing preparation efforts. He shared that the team is compiling the required documents to demonstrate compliance, offering examples of these materials, and noted that some require board approval. He informed the board that additional approvals might be necessary at the December 2024 meeting, starting with the updated QI/QA policy and procedures.

Gozel added further context, explaining that the OSV is essentially an audit conducted by HRSA, the program's funder, every three years to assess regulatory compliance with the grant requirements. Due to technical difficulties, she could not display her prepared presentation but shared key details, including that the upcoming OSV is scheduled for January 14–16, 2024. Gozel reported that HRSA is contracting consultants who will reach out in the coming weeks with an agenda, along with specific or sample documents needed for the review. She emphasized that the required documents are outlined in the HRSA Compliance Manual and Site Visit Protocol and elaborated on the program's preparation efforts, such as streamlining and centralizing relevant documentation.

In response to Tony's question about the audit's scope, Gozel and Brian described it as a thorough and intensive review of the program. Jim further

APPROVED by all Board members present.

Request to Request to Approve
HRSA Operational Site Visit (OSV)
Documents was
MOVED by Gabe Garcia
and SECONDED by Janet Schmidt

APPROVED by all Board members present.

explained that, given HCH/FH's unique role as part of a public entity focused on special populations, the OSV is typically a complex process.

When Victoria inquired about potential impacts from the new administration, Jim reassured the board that past administrations have consistently supported the federal Health Center Program. He expressed confidence that there would be no significant changes to funding or the program's ability to deliver essential services.

Robert Anderson, Chair

Robert presented a request to the Board to adjust the time of the December 2024 board meeting from its usual 10:00 AM–12:00 PM slot to 12:30 PM–2:30 PM. Jocelyn explained that the original meeting location had been reserved by a former program staff member, but the reservation may have been canceled after their departure. By the time current staff became aware of this, the location was no longer available. Alejandra added that she reserved the same room for her QI/QA Committee from 11:30 AM–5:00 PM, allowing both meetings to occur within that time frame.

Marisol asked if program staff had explored hosting the meeting on the fifth floor of the Board of Supervisors' building. Robert suggested following up on this, and Jim explained that staff had previously attempted to secure alternate locations without success. Marisol offered to inquire about reserving that space as the location for the December board meeting and a potential standing location for future meetings. Tayischa proposed hosting the December meeting at Ravenswood if needed. However, Gozel and Jim emphasized that changing the location would be more challenging than adjusting the meeting time due to pre-arranged logistics such as catering and interpretation services.

Robert then surveyed the group to assess availability for the proposed 12:30 PM–2:30 PM time slot, and a slight majority confirmed they could attend. The Board subsequently voted to approve the time change for the December meeting.

Robert Anderson, Chair

The Board shared a laugh over the irony of needing to vote on re-nominating Steve Carey, whose term expired this month, right after electing him as the program's Vice Chair for 2025.

Request to Vote on December 12th, 2024 Board Meeting Time Change was <u>MOVED</u> by Gabe Garcia and <u>SECONDED</u> by Tayischa Deldrige

APPROVED by all Board members present.

Request to Re-nominate Board Members with Terms Expired in November 2024 was MOVED by Robert Anderson

	Gozel asked about the process for re-nominating subcommittee members. Jim clarified that participation in subcommittees is voluntary and that any board member interested in joining a subcommittee can request to do so at any time. Gozel suggested it would be helpful to remind the Board at the start of the new year that all members are welcome to join any subcommittee.	and <u>SECONDED</u> by Victoria Sanchez de Alba APPROVED by all Board members present.
E. Community Announcements	Suzanne Moore, Board Member Suzanne informed the Board that Caminar plans to close two of its mental health and substance use programs, primarily due to the Medi-Cal transition to CalAIM. This shift changes reimbursement for SUD treatment providers from a cost-based model to a fee-for-service model, posing significant financial challenges. She also updated the Board on the upcoming closure of the Redwood House residential program, which currently serves up to 60 individuals at a time, with the closure anticipated by the end of December 2024. Additionally, Suzanne shared that the Menlo Park City Council has deferred action on an ordinance regarding oversized vehicle restrictions, opting to table the matter until the new council convenes in 2025. Brian expanded on the challenges posed by Medi-Cal's transition to the CalAIM model, noting the pressure it places on substance use disorder (SUD) treatment providers, particularly outpatient programs, to actively seek out clients. While acknowledging the potential negative impact on these providers, he emphasized that the change also presents opportunities to serve unhoused individuals in shelters who struggle with SUD by offering residential treatment. He highlighted that over 50% of the County's unhoused population (~2,000 individuals) experience SUD, and within shelters, approximately 70% of residents are affected. Brian pointed out that San Mateo County has one of the lowest rates of unhoused individuals enrolled in Medi-Cal, further intensifying the pressure on providers who depend on Medi-Cal funding to find eligible clients. Jocelyn informed the Board that the program is working to establish a behavioral health initiative and sought Brian's input on how the program could contribute. Brian responded that many SUD treatment providers face	

their focus to treating the unhoused could benefit, as the majority of affluent individuals tend to seek care from private treatment centers, bypassing Medi-Cal-funded programs. Tayischa added that this shift could lead to a broader range of clients, such as women and adolescents, accessing these services, as most current providers primarily serve adult men. Building on her point, Brian suggested that these providers could benefit from attending an HCH/FH Board meeting to better understand the specific needs of unhoused populations and adapt their treatment models accordingly. Judith inquired whether El Centro de Libertad had been considered as an SUD provider for the Behavioral Health Services Expansion (BHSE) initiative. Jocelyn confirmed this and informed the Board that the program is awaiting a response from El Centro. Gabe then asked whether existing SUD providers could amend their current contracts to expand services. Brian clarified that most providers currently lack formal contracts. Robert expressed concern about the high relapse rate among individuals who complete P90 programs. Brian responded that SUD treatment should be regarded as a chronic condition requiring ongoing care and monitoring beyond the initial treatment plan to ensure sustained recovery. F. Guest Speaker 1. Pacifica Resource Anita Rees. Executive Director Center Anita updated the Board on the Pacifica Resource Center (PRC), highlighting its role as a Core Agency in San Mateo County. She shared that PRC has been diligently implementing the four strategic priorities outlined in its recent strategic plan. Over the past few years, PRC has focused heavily on community education and raising awareness about the challenges faced by unhoused individuals. Anita provided an overview of PRC's accomplishments over the last year, its current staffing capacity, and plans to expand its services. PRC is in the process of hiring three staff members dedicated to

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

homeless outreach and is actively searching for properties to enhance its capacity. The envisioned facility would include service areas on one level, transitional housing on another, and affordable housing—prioritizing general

housing—on a third, space permitting.

Anita also provided an update on the Pacifica Safe Parking Program, the only such program in San Mateo County. Established in response to a lawsuit against the City of Pacifica, the program permits unhoused individuals to park in designated city spaces. Initially, participants were required to move every 29 days, but this policy proved challenging to manage and was adjusted to a more structured 28-day rotation. While the program's has had success and consistent full capacity since its inception, recent incidents of harassment and vandalism at one location have caused some participants to opt out. PRC is actively exploring strategies to mitigate these issues and ensure participant safety.

Anita expressed concern about the City of Pacifica's lukewarm support for the program. Although the City introduced policies to address issues, they have not been effective in preventing harassment or vandalism. Furthermore, participants are reluctant to report incidents due to negative experiences with law enforcement. PRC conducted an evaluation and found that participants felt supported and appreciated the program's stability. However, feedback on challenges was limited, likely due to participants' fear of jeopardizing their place in the program. Anita acknowledged the power dynamic at play, emphasizing the difficulty in addressing these issues without candid feedback, but she remains optimistic about finding solutions.

While the program is set to conclude in June 2025, legal advocates are disputing the timeline, arguing that the program should only begin its official countdown once the originally intended 13 spaces are fully operational. PRC is hopeful that securing a single, centralized location for all 13 spaces will improve safety and service delivery. One possibility is relocating the program to the San Francisco RV Resort, which has offered PRC 15 spaces to rent, contingent on City funding.

In response to a Anessa's inquiry about what is done with participants' RVs once they have entered housing, Anita explained that PRC assists participants with interior repairs to their RVs, enabling them to sell these assets once they transition to housing. However, many participants prefer to retain their RVs as a safety net. On average, 27% of program participants successfully transition into permanent housing. Anita also shared her vision for the RV resort, which

	includes designated spaces for those with their own RVs and units available for individuals currently living in vehicles. Suzanne asked how the Board could support PRC's efforts. Anita stated that PRC will reach out for support when presenting the RV resort proposal to the City Council in early 2025. She reminded the Board of their previous support for the Safe Parking Program and expressed hope for continued collaboration. Finally, Anita acknowledged the potential for RVs to benefit other unhoused individuals when participants transition into housing, envisioning a system where such resources could further assist the community.	
G. Reporting & Discussion Agenda 1. HCH/FH Base Grant and BHSE Contracts Update	Jim Beaumont, HCH/FH Director Jim clarified that the Base Grant and BHSE contract updates were among the documents intended to be displayed on the screen during the meeting. However, due to technical difficulties, these updates could not be shown. He assured the board members that they would receive a copy of the document via email after the meeting and stated that he would provide a comprehensive update on the Base Grant and BHSE contracts at the December 2024 Board meeting. Gabe inquired whether all contract-related matters were progressing as planned and adhering to the expected timelines. Jim confirmed that everything was on track.	
 H. Closed Session, Gov. Code Section 54957 1. Public Employee Performance Evaluation (Program Director) 	The board convened in a closed session to conduct the annual evaluation of the program director. Board members engaged in discussions as part of this routine process. This evaluation is conducted annually during the final months of the year.	
G. Adjournment	Future meeting: Thursday, December 12 th , 2024 Time: TBD 455 County Ctr- Room 101 Redwood City, CA 94063	The meeting was adjourned at 12:17 pm.

November 11, 2024

To: San Mateo County Board of Supervisors

500 County Center Redwood City, CA 94063

Re: Supporting Immigrant Communities

Dear San Mateo County Board of Supervisors,

We, the undersigned immigrant rights organizations, **united** by our shared mission of upholding and recognizing the rights of immigrants, respectfully urge you to take concrete steps to ease anxieties and ensure the safety and inclusivity of the diverse immigrant communities in San Mateo County.

Immigrant communities in San Mateo County come from all corners of the world—Mexico, China, El Salvador, the Philippines, and many countries across Europe, the Middle East, and beyond. These communities are currently experiencing a profound sense of alarm and fear in anticipation of the growth of discriminatory and hateful anti-immigrant rhetoric following the presidential election. This concern is not surprising, as throughout this election cycle we have witnessed a surge in deeply divisive anti-immigrant vitriol, including the threat of mass deportation. The destructive consequences of this rhetoric are already being felt, not only in our county but across the nation.

On behalf of the undersigned organizations, we urgently call for your support of the following actions:

1. **Preserve and increase funding** for Rapid Response and Removal Defense programs, and for immigration legal services in general.

2. Preserve the current Sanctuary County Ordinance passed by the Board of Supervisors in 2023, without amendments.

3. Ensure swift and transparent investigations into any alleged hate crimes targeting individuals based on national origin, race, gender, ethnicity, or language spoken.

4. **Ensure there is no cooperation** between law enforcement and federal agencies, particularly Immigration and Customs Enforcement (ICE), who unlawfully target asylum seekers, refugees, and undocumented immigrants for deportation.

By fostering an inclusive environment and being prepared to address potential challenges, we strengthen the trust, cohesion, and well-being of all residents in San Mateo County, which is home to many immigrant families. It's important to remember that we are all residents of San Mateo County, and many of our immigrant families are of mixed status, some of them are voters and some of them are not, and all of us are advocating for the rights of those who could not vote in the recent elections. Additionally, many of the immigrants in our community are the workers whose efforts put food on our tables and contribute to the essential services that make San Mateo County thrive.

We will be submitting a separate letter to Sheriff Christina Corpus requesting that the San Mateo County Sheriff's Department adhere to our Sanctuary Ordinance and not cooperate with ICE.

Thank you for your ongoing dedication and partnership in supporting the rights and dignity of our immigrant communities. We also appreciate the initiatives you've already undertaken and encourage you to continue defending immigrant families in San Mateo County.

HRSA Operational Site Visit (OSV) Updates

Healthcare for the Homeless/Farmworker Health (HCH/FH)

November 12th, 2024

Gozel Kulieva - Management Analyst

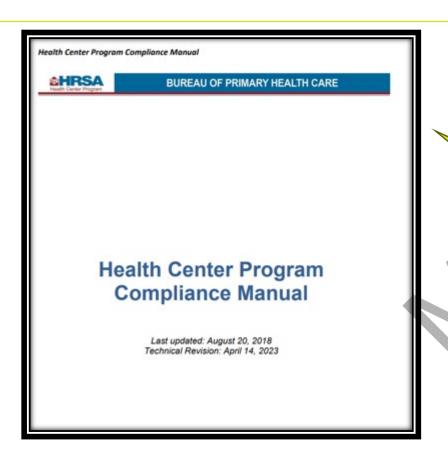


What is an OSV? Operational Site Visit

- What? Audit
- By Who? Health Resources and Services Administration (HRSA), our Federal funder
- Why? Monitor compliance with regulatory requirements
- How often? Every 3 years. January 14-16 2025.
- How?



HOW?



Explains
 requirements &
 regulations

BUREAU OF PRIMARY HEALTH CARE Health Center Program Site Visit Protocol Last updated: April 13, 2023 Technical Revision: October 27, 2023

- Document checklist,
- · Methodology,
- · Specific questions,
- Findings



HOW?

Health Center Program Compliance Manual



BUREAU OF PRIMARY HEALTH CARE

Health Center Program Compliance Manual

Last updated: August 20, 2018 Technical Revision: April 14, 2023

		04 55
#	Requirement	Staff
Chapter 1	Health Center Program Eligibility	Jim
Chapter 2	Health Center Program Oversight	Jim
Chapter 3	Needs Assessment	Jocelyn
Chapter 4	Required and Additional Health Services	Jim
Chapter 5	Clinical Staffing	Alejandra
Chapter 6	Accessible Locations and Hours of Operation	Jim
Chapter 7	Coverage for Medical Emergencies During and After Hours	Alejandra
Chapter 8	Continuity of Care and Hospital Admitting	Alejandra
Chapter 9	Sliding Fee Discount Program	Gozel
Chapter 10	Quality Improvement/Assurance	Alejandra
Chapter 11	Key Management Staff	Gozel
Chapter 12	Contracts and Subawards	Gozel, Jocelyn
Chapter 13	Conflict of Interest	Gozel
Chapter 14	Collaborative Relationships	Gozel, Jocelyn
Chapter 15	Financial Management and Accounting Systems	Jim
Chapter 16	Billing and Collections	Jim
Chapter 17	Budget	Gozel
Chapter 18	Program Monitoring and Data Reporting Systems	Jim
Chapter 19	Board Authority	Jim
Chapter 20	Board Composition	Jim
Chapter 21	Federal Tort Claims Act (FTCA) Deeming Requirements	Jim

Chapter 1	Requirement Health Center Progra	Staff_1	n/a		
Chapter 10	Quality Improvement Quality Improvement	Alejandra Alejandra	Policies that establish the Quality Improvement Must be Board Approved QI/QA-related operating procedures or proce	In progress	
Chapter 10	Quality Improvement/ Quality Improvement/	Alejandra	Job or position descriptions of individuals who Sample of patient satisfaction results.	On file On file	both mine and Should this in
Chapter 10	Quality Improvement	Alejandra	Documentation of any related systems that st QI/QA assessment schedule or calendar.	In progress On file	safe system- added to Sha
Chapter 10 Chapter 10	Quality Improvement Quality Improvement	Alejandra	Sample of tun OI/OA seeseemente from the r	In progress	quarterly rep
Chapter 10	Quality Improvement	Alejandra	Sample of 5-10 health center patient records Systems (for example, certified EHRs) and re	In progress	cannot includ compliance c
Chapter 11 Chapter 11	Key Management Sta Key Management Sta	Gozel Gozel	Health center organization charts with names and titles of key management staff (if u Position descriptions of key management staff (if updated since last application subr	On file	
Chapter 11 Chapter 11	Key Management Sta Key Management Sta	Gozel	Any contracts for key management staff. If the health center has key management staff vacancies: Human Resources proced	N/A	
hapter 11	Key Management Sta	Gozel	Project Director/CEO employment agreement.	On file	Emailed on 1
hapter 11 hapter 11	Key Management St Key Management St	Gozel	Project Director/CEO's W-2 or, if a W-2 has not yet been issued, documentation of Any additional documentation of key management reporting structures.	On file	Emailed on 1
hapter 11 hapter 11	Key Management Sta Key Management Sta	Gozel	If the health center has a co-applicant Co-applicant agreement (if updated since las If the current Project Director/CEO has changed since the start of the current period	On file	
Chapter 12	Contracts and Subay	Gozel, Jocelyn	Policies or procedures for purchasing, procurement, and contract management.	In progress	Emailed on 1
hapter 12 hapter 12	Contracts and Subay	Gozel, Jocelyn	Provide a complete list of health center contracts that support the HRSA-approved so Based on the list of contracts that support the Note: Use the same sample of contract	In progress	Emailed on 1
hapter 12 hapter 12	Contracts and Subay	Gozel, Jocelyn	From the sample of selected contractors	In progress	Emailed on 1
hapter 13	Conflict of Interest Conflict of Interest	Gozel Gozel	Two most recent annual audits and management letters. Documents containing the health center's standards of conduct (for example, articles	In progress	Emailed on 1
hapter 13		Gozel	For contracts that support the HRSA-approve Note: Use the same sample of contract	s In progress	Emailed on 1
hapter 13	Conflict of Interest	Gozel	Agreements with any parent corporation, affiliate, subsidiary, or subrecipient organizer look-alikes that have parent, affiliate, or s Note: Contracts in the sample are either	N/A	
hapter 13 hapter 14	Conflict of Interest Collaborative Relation	Gozel Gozel, Jocelyn	If a real or apparent conflict of interest was ic All related written disclosures that were Documentation of established collaboration with other providers and organizations in	In progress	Emailed on 1
hapter 14	Collaborative Relation	Gozel, Jocelyn	Documentation of coordination with other federally-funded, as well as state and local	In progress	Emailed on 1
hapter 14 hapter 15	Collaborative Relation Financial Manageme	Jim	I wo most recent annual audits and management letters.	In progress	3
hapter 15 hapter 15	Financial Manageme	Jim Jim	Financial management, accounting, and internal control procedures. These procedu Procedures for drawdown, disbursement, and expenditure of federal award funds. The	res may be i	n the form of t ures may be s
hapter 15	Financial Manageme	Jim Jim	Policies or procedures that govern and track the use of non-grant funds.		
hapter 15		Jim	Any manuals or documentation that support tl Note: Some or all of the financial mans Two financial reports selected from the past 6 months that were provided to the board	and key m	nagement sta
napter 15 napter 15	Financial Manageme	Jim Jim	The most recent interim financial statement. Aged Accounts Receivable, as of most recent interim financial statement.		
hapter 15	Financial Manageme Financial Manageme	Jim Jim	Aged Accounts Payable, as of most recent interim financial statement. Sample of source documentation for expenditures made under the federal Health Ce	oter Program	award for th
hapter 16	Billing and Collection	Jim	Current fee schedule for each service (for example, medical, dental, behavioral heal	h).	
hapter 16	Billing and Collection	Jim Jim	Data used to develop and update fee schedules based on health center costs and loc Silding fee discount schedule (SFDS), including any SFDSs that differ by service or List of provider, program, or site billing numbers for Medicaid, CHIP, Medicare, or a	ally preveilling	g rates. For e
hapter 16 hapter 16 hapter 16	Billing and Collection Billing and Collection Billing and Collection	Jim Jim	List of provider, program, or site billing numbers for Medicaid, CHIP, Medicare, or a Documentation of participation in any other public or private program or health insur	ny other doc	umentation of or example, li
hapter 16	Billing and Collection	Jim	Billing and Collections policies or procedures and systems, including: Provisions to a Contracts with any outside organizations that conduct billing or collections on behalf	vaive or redu	ce fees owed
hapter 16 hapter 16	Billing and Collection	Jim	Contracts with any outside organizations that conduct billing or collections on behalf Eligibility, outreach, and enrollment procedures (for example, new patient registration	of the health and screen	center. ing procedure
hapter 16	Billing and Collection Billing and Collection	Jim Jim	Current data on the following revenue cycle management metrics, if available: Collec-	tion ratios; • E	ad debt write-
hapter 16 hapter 16	Billing and Collection	Jim	Sample of at least 21 claims submissions and resubmissions to the health center's m Report showing the last 6 months of claims data, specifically the average filing time	for the last 6	months of cla
hapter 16		Jim Jim	Sample of at least 15 billing and payment records related to the health center's charging Sample of two to three billing records where patient fees or payments were waived o	es to patien reduced.	s:-Randomly
hapter 16 hapter 16	Billing and Collection	Jim Jim	Sample of two to three billing records where patient fees or payments were waived o Documentation of methods for notifying patients of any additional costs for supplies if the health center has a refusal to pay policy: Documentation of any cases in the p	and equipme	nt related to b
hapter 17 hapter 17	Budget	Gozel	Updated annual budget for the health center project (if updated since last application Budget to actual comparison report for the current fiscal year.	On file	
napter 17	Budget Budget	Gozel	Budget to actual comparison report for the prior fiscal year.	In progress	8
napter 17 napter 17	Budget Budget	Gozel Gozel	For context and background on budget development process: Financial management	t In progress	Emailed on 1
hapter 17 hapter 18	Budget	Gozel	As a reference for any other lines of business: Most recent annual audit and manager if the health center has an organizational budget that is separate from the health center has an organizational budget that is separate from the health center is separated from the health center is	In progress	Emailed on 1
napter 19	Program Monitoring Board Authority Board Authority	Jim Jim	One to two data-based reports generated by the health center for the governing boar Health center organization charts with names of key management staff.		
hapter 19 hapter 19	Board Authority Board Authority	Jim Jim	For public agencies or for organizations with a parent or subsidiary: Corporate organizations of Incorporation.	nization cha N/A	rts.
hapter 19 hapter 19	Board Authority Board Authority	Jim Jim	Bylaws (if updated since last application subri Must be Board Approved	On file N/A	
hapter 19	Board Authority	Jim	Any additional corporate or governing documents. For public agencies with a co-applicant: Co-applicant agreement (if updated since is	N/A	
napter 19 napter 19		Jim Jim	Any agreements with a parent corporation, affiliate, subsidiary, or subrecipient orga Any collaborative or contractual agreements with outside entities that impact the heal	ti N/A	
	Board Authority Board Authority	Jim Jim	Board calendar or other related scheduling documents for the most recent 12 month Board agendas and minutes for: The most recent 12 months. Any other relevant median	8.	e past 3 year
hapter 19	Board Authority	Jim	Sample of board packets from two board meetings that occurred during the most rec	ent 12 mont	ns.
hapter 19		Jim	Board committee minutes OR committee documents from the most recent 12 months Strategic plan or long-term planning documents from within the past 3 years.	that support	board functio
hapter 19 hapter 19	Board Authority Board Authority	Jim Jim	Position description for the Project Director/CEO. Project Director/CEO employment agreement, highlighting the provisions that address		ector/CEO se
hapter 19	Board Authority Health Center Progra	Jim Jim	Most recent evaluation of Project Director/CEO. n/a	1	
hapter 20	Board Composition	Jim	Health center organization charts with names of key management staff.		
hapter 20 hapter 20	Board Composition Board Composition	Jim Jim	For public agencies or for organizations with a parent or subsidiary: Corporate organizations with a parent or subsidiary with a	N/A	rts.
hapter 20 hapter 20	Board Composition Board Composition	Jim Jim	Bylaws (if updated since last application submission to HRSA). Any additional corporate or governing documents.	On file N/A	
hapter 20	Board Composition	Jim	For public agencies with a co-applicant: Co-applicant agreement (if updated since I	ast application	n submission
hapter 20 hapter 20	Board Composition Board Composition	Jim Jim	Updated Form 6A or board roster (if board composition has changed since last appli Additional documentation about current board member characteristics (for example,	applications,	ssion to HRS/ bios, disclos
hapter 20 hapter 20	Board Composition Board Composition	Jim Jim	Billing records from within the past 24 months that verify board member patient statu For health centers with approved waivers: Examples of the use of special population	N/A input (for e	xample, board
hapter 21	Federal Tort Claims / Needs Assessment	Jim Jocelyn	For all FTCA-deemed health centers that have Operational Site Visits (OSVs) with sta	N/A On file	MISSING For
hapter 3 hapter 3	Needs Assessment	Jocelyn	Service Area Reports or analysis of document Must be Board Approved Most recent needs assessment and document Must be Board Approved	On file	MISSING FO
hapter 4 hapter 4	Required and Addition	Jim Jim	Sample of key health center documents translated for patients with limited English pr FORM 5A, COLUMN I:•For services delivered Must be Board Approved	Not started	
hapter 4 hapter 4	Required and Addition Required and Addition	Jim Jim	FORM 5A, COLUMN II: For services delivered Must be Board Approved Patient Records:- Based on three Required S Notes:- For Column II Services provide		al contractors
hapter 5	Clinical Staffing	Alejandra	Credentialing and privileging procedures for Notes: Select contracts and referral a	In progress	
hapter 5 hapter 5	Clinical Staffing Clinical Staffing	Alejandra Alejandra	If the health center has a website The websit Most recent needs assessment.	On file On file	
hapter 5	Clinical Staffing Clinical Staffing	Alejandra	Current clinical staffing profile that lists: Nam	In progress	10/28 contac 10/28 contac
hapter 5 hapter 5	Clinical Staffing	Alejandra Alejandra	Files for current clinical staff that contain crei Any contracts or agreements with outside eni If clinical services are provided via Column III	In progress	10/28 contact 10/28 contact 10/28 contact
hapter 5 hapter 6	Clinical Staffing Accessible Locations	Alejandra Jim	If clinical services are provided via Column II List of health center sites with the following information for each site: Address Hours	In progress of operation	10/28 contact Services offer
hapter 6 hapter 6	Accessible Locations Accessible Locations	Jim	Uniform Data System (UDS) Mapper Service Area Map (if updated since last applical Patient satisfaction surveys or other forms of patient input.	tion submiss	ion to HRSA)
hapter 6	Accessible Locations	Jim	Most recent needs assessment or related studies or resources.	On file	
Chapter 7 Chapter 7	Coverage for Medica Coverage for Medica	ı Alejandra	Operating procedures for addressing medica Operating procedures for responding to patie	In progress	should be po should be po
hapter 7	Coverage for Medica Coverage for Medica	Aleiandra	Staffing schedules for up to five service delive	In progress	10/28 contac
hapter 7	Coverage for Medica	Alejandra	If the health center uses its providers for after If the health center uses non-health center pr	In progress	our provs do
hapter 7 hapter 7	Coverage for Medica Coverage for Medica	Alejandra	Information provided to patients for accessing Three samples of after-hours clinical advice. Notes: Select a sample based on after-	hours calls t	direct people hat necessitat
hapter 7 hapter 8	Coverage for Medica	Alejandra	Procedures for tracking, recording, and stori	In progress	find procedur
hapter 8	Continuity of Care ar Continuity of Care ar	Alejandra Alejandra	Health center's internal operating procedures Documentation of EITHER: Health center pro	In progress	we don't have 10/28 contac
hapter 8 hapter 9	Continuity of Care at Sliding Fee Discount	Alejandra	Sample of 5–10 health center patient records Note: Use live navigation of the Electro Sliding fee discount program (SFDP) policies Must be Board Approved	In progress On file	find where it Last updated
	Sliding Fee Discount	Gozel	SFDP procedures. Must be Board Approved	On file	
Chapter 9 Chapter 9	Sliding Fee Discount Sliding Fee Discount	Gozel Gozel	Sliding fee discount schedule (SFDS), includ Must be Board Approved Any related policies, procedures, forms and materials that support the SFDP (for exe	On file On file	
Chapter 9 Chapter 9 Chapter 9 Chapter 9 Chapter 9 Chapter 9		Gozel Gozel Gozel Gozel Gozel	Sliding fee discount schedule (SFUS), includ Must be Board Approved Any related policies, procedures, forms and materials that support the SFDP (for exit For health centers that choose to have a nominal charge for patients with incomes at Sample of 5–10 records, files, or other forms of documentation of patient income an For any service delivered via Column LityMetitier or not the service is also delivered.	On file On file In progress In progress	Emailed on

Team Approach

OSV Project Tracker – cloud based

In progress
On file

Not started

1. October – November:

- Gather required documents
- Mark the status, prepare for Board review/approval

2. November – December:

- Respond to questions in respective chapters.
- HRSA assigns a consultant, who devises the agenda, selects documents for review
- 3. January 14-16

Go Time!



ſ	□ Name	Status	Date modified
	1. Health Center Program Eligibility		10/11/2024 9:00 AM
•	2. Health Center Program Oversight	\odot	10/11/2024 9:00 AM
•	3. Needs Assessment	\(\)	11/1/2024 3:12 PM
r	4. Required and Additional Health Services	⊘	10/11/2024 9:01 AM
r	5. Clinical Staffing	\(\)	10/24/2024 1:04 PM
r	6. Accessible Locations and Hours of Operation	⊘	10/11/2024 9:01 AM
r	📙 7. Coverage for Medical Emergencies During and	a	10/28/2024 1:59 PM
,	8. Continuity of Care and Hospital Admitting	⊘	10/11/2024 9:02 AM
	9. Sliding Fee Discount Program	\odot	10/11/2024 9:46 AM
•	10. Quality Improvement and Assurance	a	11/7/2024 3:57 PM
•	📙 11. Key Management Staff	\odot	10/11/2024 10:27 AM
*	12. Contracts and Subawards	\odot	10/11/2024 9:03 AM
e	13. Conflict of Interest	\odot	10/28/2024 3:56 PM
e	14. Collaborative Relationships		10/11/2024 9:03 AM
e	15. Financial Management and Accounting Systems	\(\)	11/12/2024 12:06 PM
	16. Billing and Collections		10/11/2024 2:23 PM
,	📙 17. Budget		11/12/2024 12:00 PM
	📙 18. Program Monitoring and Data Reporting Syste		10/11/2024 9:04 AM
*	📙 19. Board Authority		10/11/2024 2:22 PM
*	20. Board Composition	\odot	10/11/2024 9:04 AM
ė.	21. Federal Tort Claims Act (FTCA) Deeming Requir	\odot	10/11/2 0 24 9:05 AM
e	Policies and Procedures Library	△	11/12/2024 12:07 PM
	🛃 hc-compliance-manual	⊘	10/2/2024 11:43 AM
	osv_project_tracker_2024	S	11/13/2024 12:29 PM
	🔓 site-visit-protocol	0	10/2/2024 11:43 AM

Goals

- 1. Pass the OSV with no findings
- 2. Cloud based documentation storage
- 3. Dedicated folders with completed documents
- 4. Policies and Procedures Library





Thank you!

Base Grant Agreements:

Dental Services:

1. Sonrisas – *signatures pending*

Case Management

- 1. Abode Services signatures pending
- 2. Puente signatures pending
- 3. Life Moves *pending contractor review*
- 4. Alas Materials Management/attorney review
- 5. Coastside Hope Materials Management/attorney review

Base grant MOUs

- 1. BHRS signatures pending
- 2. PHPP pending PHPP review

Behavioral Health Services Expansion (new 2 year grant)

- 1. Alas pending contractor review
- 2. Puente *pending contractor review*
- 3. Palo Alto University- contract drafted, contract dependent on partnership discussions
- 4. Mental Health Association of San Mateo County- Partnership discussions
- 5. El Centro- Partnership discussions
- 6. Samaritan House- Partnership discussions
- 7. BHRS/AOD- Partnership discussions



Healthcare for the Homeless/ Farmworker Health Program November 14, 2024



For 50 years, Pacifica Resource Center has provided economic security services in Pacifica for Pacifica families. Together, we are neighbors helping neighbors, supporting resilience and well-being in our community.

Vision

 Every person in our community lives with dignity and has the opportunity to thrive.

Mission

 To support the resilience and well-being of families and individuals in Pacifica and along the coast.



PRC Values and Beliefs



Financial Stability

Financial education and support provides tools for healthy financial decisions, stability, and independence.



Food Security

Everyone should have access to nourishing food.



Respect, Equity, and Inclusivity

We honor people's privacy, dignity, and respect. We serve and accept everyone in need of our services regardless of their race, sex, gender identity, religion, disability, sexual orientation, or immigration status.



Compassion

We are kind and caring. We are people-centered, flexible, and responsive to the needs of the people we serve and our community.



Practicality and Self-Direction

People make their own decisions about what is best for their lives. We provide options, support, and the space to determine what they want to do.



Hope and Optimism

We are positive and hopeful. We believe that transformation is possible.



2023-2025 Strategic Plan

Strategic Priority A

Educate
 community
 leaders and
 raise awareness
 about and
 compassion
 toward
 vulnerable
 community
 members.

Strategic Priority B

 Expand our facilities to integrate existing programs and add new programs.

Strategic Priority

 Expand existing services and offer new services for the people we serve in response to unmet or emerging needs.

Strategic Priority D

 Strengthen our networks, including with local government, other community service organizations, community leaders, donors, & corporations.



PRC assisted 1 in 7 Pacifica families last year (7/2023 – 6/2024), supporting the resilience and well-being of our community. Specifically:

96,000

Provided groceries to benefit nearly 96,000 Pacificans (duplicated) 270

Prevented homelessness & sheltered 270 Pacificans

850

Delivered holiday joy to 238 children & Thanksgiving assistance to 612 Pacificans 220

Prepared 220 Pacifica youth for school with backpacks, PPE, and gift cards

222

Prepared taxes for 222 households, generating over \$370,000 in refunds

551

Provided 551 showers to unhoused Pacificans, helping them prepare for work, job interviews, and housing search 73

73, or 20%, of the unhoused individual served by our Unhoused on the Coast Outreach returned to housing or entered shelter



Other PRC Services



Baby & Youth Programs – car seats, formula, diapers, baby wipes, youth bus passes, and summer youth programs



Transportation Assistance – bus passes and tokens, car repairs (on a case by case basis and usually associated with maintaining housing)



Other Critical Services – laundry services, clothing, medical assistance, pet services, information and referrals, and other services as needed.



Additional Info & Future Plans

Board

- 12 members of our Board of Directors
- Goal to have 15 board members
- Recruiting up to 3 additional members in 2025

Staff

• 18 staff with 17.05 FTEs, including 2 PT, with 3 open positions.

Programs

- Expanding Grocery Programs with a space that includes food storage.
- Relaunched our volunteer program, starting with monthly orientations.
- Beginning a search for our "forever home."



Introduction

About the Pacifica Safe Parking Program

The Pacifica Safe Parking Program (PSPP) began in **June 2022** with the goal of **supporting community members living in motor homes to return to permanent housing.** The program is designed to serve individuals and families living in motor homes, with priority given to Pacifica residents.

The program is part of a settlement agreement for a 2021 class action lawsuit filed by the ACLU, the Legal Aid Society of San Mateo County and Disability Rights Advocates against the City of Pacifica's oversized vehicle ordinance and vehicular habitation ordinance. The agreement specified that the City create a temporary safe parking permit program for 13 parking spaces for motor homes.

About the Evaluation

Pacifica Resource Center engaged Learning for Action (LFA) to design and conduct a midpoint evaluation of PSPP to identify early successes and challenges, and opportunities to enhance the program in its final year. Data sources include: participant data, interviews with current and former PSPP participants, and key program partners.

This report provides a **high-level summary** of the evaluation findings.

The numerical data reported in this summary are current as of 7/31/24, unless otherwise noted.

Key Program Partners

Pacifica Resource Center (PRC) is a nonprofit community resource center with a mission to support the resilience and well-being of families and individuals living in Pacifica and along the coast. PRC was responsible for designing the program in compliance with the settlement specifications and is the primary implementing partner for PSPP.

Pacifica City Council unanimously approved the temporary safe parking program MOU with PRC. Under the terms of the settlement, in addition to providing PRC with funding and 13 parking spaces for the program, the City is required to stripe the parking spaces, provide regular police patrol, co-host a mobile dumping station, and provide dumpsters or other means for garbage disposal.

Pacifica Police Department provides a full-time community service officer to act as a liaison for unhoused people in the city (part of the settlement agreement).

PSPP Participants must meet eligibility criteria for the program (which includes living in a registered vehicle that can be moved and has a working toilet system) and follow the terms outlined in a Rights and Responsibilities agreement.

The ACLU and legal advocates continue to monitor compliance with the settlement agreement.

Evaluation Findings: High-Level Findings

Overall Impact on Participants

In general, participants value the services provided by PSPP, which help to create an **increased sense of stability and reduced stress in the near term,** which allowed them to turn to other needs, including accessing mental health support and planning their next steps related to career, education, and housing. Some participants also note that the program's services help them to save money.

The ultimate goal of PSPP is to secure permanent housing for participants, which can be challenging given the current housing crisis. In spite of these challenges:

- 9 PSPP participants from six households returned to permanent housing (as of 9/15/24)
- 85% of participants developed plans to return to permanent housing

[Being in the program] provided a little more stability because I didn't have to move every three days. I got access to the food pantry, which was really nice, and I was able to save a little more money that way. I felt connected to someone in the community [my caseworker].

- PSPP Participant

Community Benefits

- Because PSPP participants are a part of the community, any value experienced by PSPP participants is a benefit to the community at large. This is an important point to emphasize, given that many community members see PSPP participants as a problem impacting the community, rather than as part of the community.
- While many community members are concerned about waste generated by motor homes, PSPP ensures that participants dispose of waste through the proper channels. PSPP runs a dumping program that is required for all PSPP participants and is also available for anyone else in the community. PSPP participants are also required to keep their site clean of trash. In addition, PSPP regulates noise; for example, generators must be turned off at night.
- According to the Pacifica Police Department, over time, community members' complaints about motor homes parked near their home have decreased, perhaps because their concerns about noise and pollution did not transpire.

Overview of Program Services Provided

Between PSPP's inception and July 31, 2024, PSPP has provided services to over 50 individuals, including 33 people formally enrolled in PSPP, and dozens more who have accessed publicly-available PSPP services. The core services and rates of use among participants are summarized on this and the following page.



The settlement agreement specified that the City provide 13 **designated parking spots** for program participants. The program launched with eight spots, and a ninth spot was added in October 2022.



Participants have regular access (two times per month) to **wastewater removal services.** As of April 2024, the site used for wastewater removal also includes access to clean water.



21% of Participants Accessed Motor Home Repairs

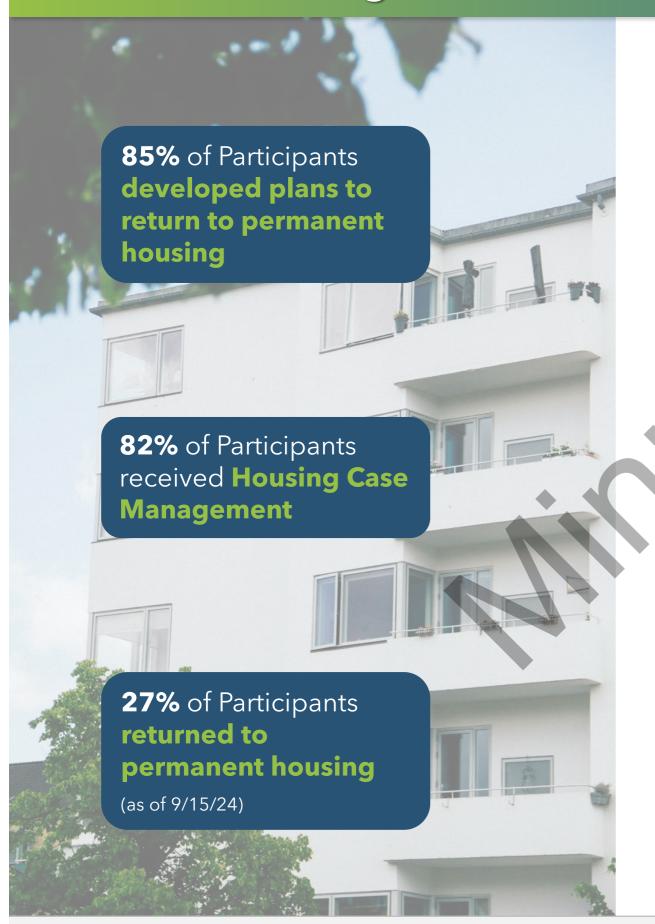
Upon enrollment, PRC completes an inspection of each motor home. When minor repairs are needed to meet program requirements, or there is an opportunity to make the motor home more livable, PRC makes arrangements for repairs, through a local connection.



100% of Participants had Access to Additional Support Services

Participants have access to **other services that PRC provides to community members**, including gift cards to help pay for gas, propane, and groceries; access to their food pantry; access to on-site showers; and referrals to needed resources, such as mental health support.

Overview of Program Services Provided





Housing Case Management

All PSPP participants receive 1:1 support through case management, which may include support accessing healthy food, showers, medical care, mental health resources, and employment resources. All participants are also required to participate in housing case management, in which they identify their housing goals, and the case manager helps them to understand and pursue relevant options, including submitting applications for affordable housing units in geographic areas that the participant is open to living.

Early Outcomes

As of 9/15/24, nine PSPP participants (27%) have moved into permanent housing. Former participants found housing through a variety of methods, including receiving a place-based voucher program through Veterans' Affairs, securing a Moving to Work Program voucher, and earning sufficient income to afford market-rate housing. Some participants have stayed in Pacifica, while others have moved to areas with a lower cost of living.

Opportunities to Deepen Impact

Conversations with PSPP participants and partners surfaced three key areas of opportunity to deepen the impact of PSPP in the final stretch of the program. These recommendations are explored in greater detail in the full report.

1. Improve Program
Design &
Implementation to
Better Serve
Participants and the
Community at Large

The <u>City of Pacifica</u> could address the following to improve program effectiveness:

- Provide all 13 spots that are specified in the settlement agreement.
- Address safety issues more proactively.
- Simplify requirements for participation.
- Dedicate a secure area of land for PSPP parking.
- Continue PSPP beyond the current 3-year time frame.

2. Make Modifications to Service Delivery

PRC and participants have identified a few ways in which <u>PRC</u> can refine its approach to providing program services to better support participants.

- Conduct case management in a more regular and formal format.
- Practice greater transparency with participants regarding steps taken to pursue affordable housing options.
- Clarify and communicate expectations for participants more clearly.
- Explore opportunities to expand access to motor home repair services.

3. Leverage Relationships to Strengthen Support and Expand Reach of PSPP

<u>PSPP partners</u> have opportunities to leverage relationships within and beyond Pacifica to strengthen support for PSPP and expand its reach.

- Strengthen support for PSPP among community members through education.
- Foster cross-county collaboration.
- Share PSPP as a model for replication.



For more information, contact:

Anita M. Rees, Executive Director

anita@pacresourcecenter.org

650 738-7470 x113

Marina Hernandez, Client Services Director

marina@pacresourcecenter.org

650 738-7470 x102

Unhoused on the Coast (UC)
Outreach, contact:

Mike Sierra, UC Outreach Program Manager

UCOutreach@pacresourcecenter.org

650 575-4861

Tab 2 Program Budget and Financial Report



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

DATE: December 12, 2024

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

New.....

Preliminary grant expenditures for October 2024 total \$212,254. This amount does not include most of the routine monthly service charges from county departments as they are accounted for during the month-end closing process (which doesn't complete until around the 10th). For the year-to-date, expenditures total \$2,204,865.

This current projection now that the Program will expend around \$3.29 for the 2024 Grant Year (GY). Based on the total amount authorized by HRSA and the amount expected to be carried over for the GY, this will leave around \$250K of unexpended funds that would be available for carryover into the 2025 GY. We are in the process of finalizing the carryover for this year and, as the Program goes through the upcoming RFP and contracting process for the next 3 years, we will be refining the unexpended funds amount to spread it across the contract period to ensure sufficient funding for the period.

Attachment:

GY 2024 Summary Grant Expenditure Report Through 10/31/24



Details for budget estimates	Dudastad	November \$\$	To Date	Dualaction for	Puriosted for CV 2025
Details for budget estimates	Budgeted [SF-424]		To Date (11/30/24)	Projection for end of year	Projected for GY 2025
<u>EXPENDITURES</u>				,	
Salaries Director, Program Coordinator Management Analyst ,Medical Director new position, misc. OT, other, etc.	745,000	74,494	633,130	695,000	775,000
Benefits Director, Program Coordinator Management Analyst ,Medical Director new position, misc. OT, other, etc.					
	245,000	24,939	198,037	215,000	250,000
<u>Travel</u>					
National Conferences (2500*8)	30,000		11,395	15,000	25,000
Regional Conferences (1000*5)	10,000			500	5,000
Local Travel Taxis	1,500 500	27	27	500 500	500 500
Van & vehicle usage	1,500			1,000	1,000
Ü	43,500		11,422	17,500	32,000
<u>Supplies</u> Office Supplies, misc.	10.000	F1 C00	76 242	80.000	5,000
Small Funding Requests	10,000	51,600	76,313	80,000	5,000
	10,000		76,313	80,000	5,000
Contractual			405 220	405 220	
2022 Contracts 2022 MOUs			185,329 26,571	185,329 26,571	
Current 2023 MOUs	1,200,000		522,338	1,000,000	1,065,000
Current 2023 contracts	875,000	48,217	619,401	800,000	875,000
unallocated/other contracts					
	2,075,000		1,353,639	2,011,900	1,940,000
<u>Other</u>					
Consultants/grant writer IT/Telcom	20,000 25,000	7,204	62,014 46,051	65,000 55,000	10,000 25,000
New Automation	25,000	7,204	40,031	33,000	25,000
Memberships	7,500		3,661	5,000	5,000
Training	5,000		21,859	22,000	5,000
Misc	1,000		13,057	25,000	25,000
	58,500		146,642	172,000	70,000
TOTAL	3,177,000	206,481	2,419,183	3,191,400	3,072,000
CRANT DEVENUE					
GRANT REVENUE					
Available Base Grant	2,858,632		2,858,632	2,858,632	2,858,632
Prior Year Unexpended to Carryover	675,000 est	t.	675,000	675,000	
Other HCH/FH PROGRAM TOTAL	3,533,632		3,533,632	3,533,632	342,232 carryover 3,200,864
Hell/TITROGRAW TOTAL	3,333,032		3,333,032	3,333,032	3,200,604
BALANCE	356,632	Available	1,114,449	342,232	128,864
<u>=</u>	333,332		rrent Estimate	Projected	
					based on est. grant
					of \$2,858,632
Non-Grant Evnenditures					
Non-Grant Expenditures					
Salary Overage	20,000	375	4,340	11,000	30,000
Health Coverage	85,000	15,703	104,316	95,000	90,000
base grant prep	0	455	4.070	4.000	2.000
food incentives/gift cards	2,500 1,000	455	4,979	4,000 1,000	3,000 1,500
	108,500		113,635	111,000	124,500
	,		•	•	•
TOTAL EVDENDITURES	2 205 500	222.014	2 522 010	2 202 400	NEXT YEAR 3,196,500
TOTAL EXPENDITURES	3,285,500	223,014	2,532,818	3,302,400	NEXT YEAR 3,196,500

Tab 3 HCH/FH Director's Report





DATE: December 12, 2024

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 November 14, 2024, Co-Applicant Board meeting.

Program continues to prepare for the scheduled Operational Site Visit (OSV) January 14-16, 2025. As in past OSVs, the review team will want to meet with the Board during their visit. This usually takes place on the second day (Wednesday, January 15, 2025), often as a lunch meeting. This item will be addressed elsewhere on today's agenda.

Program also continues our efforts for the preparation and submission of the annual required Uniform Data System (UDS) Report. This report is quite complicated and always somewhat of a struggle, complicated even more this year with some data now coming from the recently implemented EPIC system. Having the above mentioned OSV occur during the middle of the UDS processing period is also problematic.

Program staff continue to work through the contract development for our 2025 through 2027 services contracts. There is a specific update on this elsewhere on today's agenda. Program is also developing the MOUs for those services delivered by County partners. These do not require Board of Supervisor's approval and some of these are completed and signed.

Program has also bee working through the development and planning for the Behavioral Health Service Expansion (BHSE) grant. Currently, contracts for Mental Health (MH) services for farmworkers on Coastside are developed and in the approval process. Program continues working with various potential partners to develop Alcohol and Other Drugs/Substance Use Disorder (AOD/SUD) and/or MH services for the homeless. Further update on this is also elsewhere on today's agenda.

At today's meeting we will be welcoming aboard our newest staff member, Raven Nash. Raven started on Monday, December 9th and is currently going through onboarding, orientation and learning all about the program. We are thrilled to have Raven join us.

Seven Day Update

ATTACHED:

• Program Calendar





County of San Mateo Health Care for the Homeless & Farmworker Health (HCH/FH) Program 2025 Co-Applicant Board Calendar

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

	AREA					
MONTH	Programmatic	Learning/Conferences	on s and Misc.)			
JANUARY	- HCH/FH Board Meeting (1/9) - HRSA Operational Site Visit (OSV) (1/14-1/16) - OSV Special Board Meeting (1/15)		 Glaucoma Awareness Month Cervical Cancer Screening Month National Human Trafficking Prevention Month International Holocaust Remembrance Day (1/27) 	 New Year's Day (1/1) Martin Luther King Day (1/20) Inauguration Day (1/20) Lunar New Year (1/29) 		
FEBRUARY	- HCH/FH Board Meeting (2/13) - Finance Subcommittee Meeting (2/13) - UDS submission - Review	 National Alliance to End Homelessness Winter Conference: Innovations and Solutions for Ending Unsheltered Homelessness. (Los Angeles, CA – Feb 26-28) 	 National Children's Dental Health American Heart Month National Cancer Prevention Month National Wear Red Day (2/7) Black History Month World Day of Social Justice 	 Lincoln's Birthday (2/12) Valentine's Day (2/14) President's Day (2/17) 		
MARCH	- HCH/FH Board Meeting (3/13) - QI/QA Subcommittee Meeting (3/13) - Updated Sliding Fee Discount Scale (SFDS) - Approve		 Colorectal Cancer Awareness Month Developmental Disabilities Awareness Month National Doctors Day (3/30) 	 Lent Begins (3/5) Daylight Saving Time Starts (3/9) St. Patrick's Day (3/17) 		
APRIL	- HCH/FH Board Meeting (4/10) - Strategic Plan Subcommittee Meeting (4/10) - SMMC Annual Audit - Approve	2024 Midwest Stream Forum- Agricultural Worker Conference (TBD)	 Alcohol Awareness Month Sexual Assault Awareness Month Counseling Awareness Month National Minority Health Month Defeat Diabetes Month National Public Health Week (4/7-4/11) 	 Lent Ends (4/19) Passover (4/13 – 4/20) Easter Sunday (4/20) 		
MAY	- HCH/FH Board Meeting (5/8) - Finance Subcommittee Meeting (5/8)	 National Healthcare for the Homeless Conference. (Baltimore, MD – May 12-15) NRHA Health Equity Conference. (Atlanta, GA – May 19-20) NHRA Annual Rural Health Conference (Atlanta, GA – May 20-23) 	 American Stroke Awareness Month High Blood Pressure Education Month Mental Health Awareness Month National Trauma Awareness Month Asian Pacific American Heritage Month 	Mother's Day (5/11)Memorial Day (5/26)		
JUNE	- HCH/FH Board Meeting (6/12) - QI/QA Subcommittee Meeting (6/12) - Services/Locations Form 5A/5B – Approve	NCFH Agricultural Worker Health Symposium (TBD – May/June2025)	 PTSD Awareness Month Cancer Survivor's Month LGBTQIA+ Pride Month 	Father's Day (6/15)Juneteenth (6/19)		



JULY	 HCH/FH Board Meeting (7/10) Strategic Plan Subcommittee Meeting (7/10) Budget Renewal (Program) Approve 		 National Minority Mental Health Awareness Month Healthy Vision Month 	Independence Day (7/4)
AUGUST	- HCH/FH Board Meeting (8/14) - Finance Subcommittee Meeting (8/14)		 National Breastfeeding Month National Immunization Awareness Month National Health Center Week (8/10 – 8/16) 	
SEPTEMBER	HCH/FH Board Meeting (9/11) QI/QA Subcommittee Meeting (9/11) Program Director Annual Review	International Street Medicine Symposium. (Hilo, Hawai'I – Sept 9 – 12)	 Healthy Aging Month National Suicide Prevention Month Gynecological Cancer Awareness Month Hispanic Heritage Month (Starts 9/15) 	• Labor Day (9/1)
OCTOBER	HCH/FH Board Meeting (10/9) Strategic Plan Subcommittee Meeting (10/9) Annual Conflict of Interest Statement due Board Chair/Vice Chair Nominations		 Breast Cancer Awareness Month Depression Awareness Month Domestic Violence Awareness Month Health Literacy Month Patient-Centered Care Awareness Month Child Health Day (10/6) 	 Indigenous Peoples' Day/Columbus Day (10/13) Halloween (10/31)
NOVEMBER	HCH/FH Board Meeting (11/13) Finance Subcommittee Meeting (11/13) Board Chair/Vice Chair Elections	East Coast Migrant Stream- Agricultural Worker Conference Forum (TBA)	 American Diabetes Month National Sexual Health Month Native American Heritage Day (11/28) 	 Daylight Savings Time Ends (11/2) Veteran's Day (11/11) Thanksgiving (11/27)
DECEMBER	- HCH/FH Board Meeting (12/11) - QI/QA Subcommittee Meeting (12/11)	Institute for Healthcare Improvement (IHI) Forum (TBD)	Seasonal Affective Disorder Awareness Month	 Christmas Eve (12/24) Christmas Day (12/25) New Year's Eve (12/31)

BOARD ANNUAL CALENDAR			
<u>Project</u>	<u>Timeframe</u>		
HRSA Operational Site Visit (OSV)	January 14 - 16		
SMMC Annual Audit - Review	April/May		
UDS Submission - Review	Spring		
Sliding Fee Discount Scale (SFDS)	Spring		
Services/Locations Form 5A/5B – Approve	June/July		
Budget Renewal - Approve	July/August/September (Program) – December/January (Grant)		
Annual Conflict of Interest Statement	October (and during new appointments)		
Program Director Annual Review	Winter		
Annual QI/QA Plan – Approve	Winter		
Board Chair/Vice Chair Elections	November/December		

Tab 4 QI/QA Report



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www.facebook.com/smchealth

DATE: December 12th, 2024

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker

Health (HCH/FH) Program

FROM: Frank Trinh, HCH/FH Medical Director

Alejandra Alvarado, HCH/FH Clinical Services Coordinator

SUBJECT: QI/QA COMMITTEE REPORT

HRSA Operational Site Visit (OSV)

 HCH/FH continues to work towards our site visit tasks to complete all required documents before the site visit, which is currently set to take place on January 14-16, 2025. The Operational Site Visit (OSV) will be fully onsite, and staff has begun notifying the medical center and leadership of this upcoming audit.

• Smart Watches Project

O HCH/FH provided smart watches to people experiencing homelessness to improve their digital literacy and increase their interest in their daily health habits. HCH/FH continues to collect data from our partners at LifeMoves for the Smart Watches Project. With upcoming required reporting tasks approaching, HCH/FH will begin collaborating with another partner on this effort after the Operational Site Visit (OSV) and Uniform Data System (UDS) report have been completed.

Library Expansion Project

Expansion Project. Initially, HCH/FH piloted this project with the Half Moon Bay library, by providing four blood pressure kits to library patrons for use. With the success of this pilot project, we've decided to expand this project to all libraries in San Mateo County to make these resources available to library patrons. Qualitative data will be collected to learn more about the library patrons who will be using the blood pressure kits, to better target our patient population with future efforts.

Tab 5 Request to Vote on Ad Hoc January Board Meeting - OSV





DATE: December 12, 2024

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: REQUEST TO VOTE ON AD HOC JANUARY BOARD MEETING - OSV

HRSA has scheduled HCH/FH's Operational Site Visit (OSV) for January 14-16, 2025. As in past OSVs, the review team plans to meet with the Board, typically on the second day (Wednesday, January 15).

To ensure sufficient Board Member participation and meet OSV requirements, we kindly request the Board to vote on the most suitable time for a 1.5-hour meeting with the review team on Wednesday, January 15, 2025.

If a majority of Board Members cannot attend on Wednesday, January 15, 2025, we will prioritize Thursday, January 16, as a second option, and Tuesday, January 14, as a last resort.

We greatly appreciate the Board's cooperation.

