

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

Co-Applicant Board Meeting Agenda

500 County Center, Redwood City, CA 94063 (Manzanita Hall)

April 10th, 2025, 10:00am - 12:00pm

This meeting of The Health Care for The Homeless/Farmworker Health board will be held in-person at

500 County Center, Redwood City, CA 94063 (Manzanita Hall)

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 rnash@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	Victoria Sanchez De Alba	10:00am
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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 AGENDA	Victoria Sanchez De Alba	10:10am
1. Approve meeting minutes from: a. March 13th Board Meeting		Tab 1
2. Budget and Finance Report		Tab 2
3. HCH/FH Director's Report		Tab 3
4. Quality Improvement/Quality Assurance Update		Tab 4

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	10:15am
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E. GUEST SPEAKER

Jei Africa, Director of Behavioral Health and Recovery Services

10:30am

F. BUSINESS AGENDA

Approving HCHF Grants Management Policy:
Reviewing and Approving the Updated SMMC
Drawdown Procedure

Jim Beaumont

11:05am

G. REPORTING & DISCUSSION AGENDA

San Mateo County Single Audit Report

Jim Beaumont

11:20am

Discussion of San Mateo County Farmworker Housing
Compliance Taskforce Report - Discussion

Janet Schmidt

11:30am

Federal Updates and Impacts on HCH/FH Program

Jim Beaumont

11:45am

H. ADJOURNMENT

12:00pm

Future meeting: **May 8th, 2025**

Time: **10:00am-12pm**

Location: **620 Correas Street, Half Moon Bay, CA 94019**

*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 rnash@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.

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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)
March 13th, 2025, 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 - Robert Anderson - Suzanne Moore - Victoria Sanchez De Alba (Chair) - Tayischa Deldridge - Francine Dickson-Serafin - Judith Guerrero - Tony Serrano - Steve Carey (Vice-Chair) - Jim Beaumont (Ex Officio)	- Alejandra Alvarado - Gozel Kulieva - Raven Nash - Frank Trinh - Jocelyn Vidales - Amanda Hing Hernandez - Anessa Farber - Marisol Escalera Durani - CJ Kunnappilly	- Cristhian Landaverde, ALAS - Jorge Sanchez, ALAS - Maricela Zavala, Puente - Ophelie Vico, Puente - Martin Vera, Interpreter - Manuel Del Valle, Interpreter	Gabe Garcia

A. Call to order & roll call	Victoria Sanchez De Alba called the meeting to order at 10:01 am and did a roll call.
B. Public Comment	Cristhian Landaverde, ALAS Cristhian updated the board about the Smart Watches project that HCH/FH's clinical coordinator, Alejandra, is currently collaborating with ALAS on. He informed the Board that the project has been successful and that the clients are very excited about their smart watches' ability to track their health metrics and daily step count. Marisol Escalera Durani, Supervisor Mueller's Office Marisol provided some updates to the Board surrounding farmworker awareness and potential partnerships with ALAS, Puente, and Coastside Hope to promote this awareness. She discussed that there are plans to honor farmworkers through a Farmworker Awareness Week, scheduled for March 23 – 29.

C. Action to set the agenda and consent agenda.	1. Approve meeting minutes from February 13th 2025 Board Meeting 2. Budget and Finance Report 3. HCH/FH Director's Report 4. Quality Improvement/Quality Assurance Update	Request to approve the Consent Agenda was <u>MOVED</u> by Suzanne Moore and <u>SECONDED</u> by Tayischa Deldridge APPROVED by all Board members present.
D. Community Announcements	Suzanne Moore, Board Member Suzanne formally announced to the Board that she is a Board member on Pacifica Resource Center's Board now as well. She is committed to disclosing any potential conflicts of interest if they arise. She provided statistics on the most prevalent reasons tenants are evicted, the main one being failure to pay rent/utilities. The most recent examples include tenants being requested by a third party to immediately pay a utility bill worth thousands of dollars. She informed the Board that a recent Measure K report found that 8.5 million dollars earmarked for rental assistance was not dispersed. San Mateo Legal aid reported that that funding would have prevented evictions. She asked the Board and program staff if it were possible to attain a report of how many SMC residents go to eviction court on a monthly basis and how many consult with eviction resources and another report on how Measure K funding is dispersed to better understand why this rental assistance was not allocated to SMC recipients. Judith commented that Coastside Hope has seen a couple of the similar instances where the inability to pay a sudden, large bill is the cause for tenants to be evicted. Tony stated through his work at St Vincent de Paul, he has noticed evictions tend to occur due to a lack of support experienced after an individual or family attains housing, more specifically, lack of financial literacy support. Frank questioned whether there is an escalation pathway for these issues through the County's Human Services Agency. Tayischa confirmed that in East Palo Alto there are clients that are at risk for eviction and believes that more proactive budgeting and stronger financial literacy may decrease evictions. Brian informs that Board that eviction is inevitable, it benefits the individual or family to move out prior to being evicted, so that the eviction does not become a part of their record; housing is nearly impossible to attain with an eviction on record. Robert added that he has heard in the past that case	

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	managers in Austin, Texas, do get tenants to move out prior to the official eviction for that same reason. Robert further shared that while many locals have attained housing in the past through Housing First vouchers, many were evicted due to violating lease policies rather than inability to pay rent. Suzanne explained that many of those in Pacifica did not seek resources first, but rather sought help from their immediate network. She further explains the situation related to the third-party payer company that presents these bills to tenants and Tony confirms that his organization has seen this same company bill their clients. This company is currently facing lawsuits for these incidents. Jim Beaumont, Director Jim informed the Board that patients of the program's Saturday Dental Clinic in Half Moon Bay and Sonrisas Dental Clinic in Pescadero are erroneously receiving bills for the care that they receive through these clinics. He explained to the Board that the program pays for each day of service in full so patients should not be receiving bills whatsoever. It is believed that this may be an issue related to the recent transition from eCW, the previous electronic health record system San Mateo Medical Center used, to EPIC. He asked that ALAS and Puente inform affect patients not to pay the bill. Ophelle (Puente) asked if there is a pathway to be reimbursed for those that have already paid the bill. She further explains that patients are anxious about final notice calls that they have received and want to avoid their bills going to collections. She stated that these incidents may have a significant impact on patients' willingness to receive care at the dental clinics. Jim reassured that program staff will attend a meeting later that afternoon with SMMC's finance and billing department to resolve the issue.	
E. Guest Speaker CJ Kunnappilly, Chief Executive Officer – San Mateo Medical Center	CJ Kunnappilly, San Mateo Medical Center (SMMC) CJ introduced himself and informed the board that he has worked at SMMC as a physician for 23 years and 8 years as the CEO. He expressed gratitude for the Board's work and provided a few SMMC updates. First, as of last November 2024, EPIC is the EHR system that all SMMC uses. Prior to the EPIC implementation, the EHRs were fragmented and that led to significant challenges for SMMC divisions to stay connected and for patients because their information was not integrated. Next, he updated the Board on SMMC main campus construction. The reason for the construction is to meet seismic code and regulations. Lastly, CJ informed the Board that there will be a larger,	

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	more modern Wellness Center to provide services for patients in South San Francisco. The Wellness Center should be completed by late 2026/early 2027. He also provided updates on staffing, more specifically, that SMMC has achieved low vacancy rates for health care related positions, such as nurses. Staff are also currently working on supporting the immigrant community and providing alternative care options to ensure patients feel safe when accessing care. Robert asked if SMMC's EPIC system receives integrated patient data from other health centers in San Mateo County. CJ confirms in short yes, but that that SMMC access is limited to how much that other health center decides to share. Suzanne asked CJ if SMMC is open to receiving red immigration cards from Faith in Action. CJ responds that the County's Office of Consumer Affairs does distribute those cards at all SMMC locations and actively works to align with them to protect SMMC's patient community. Marisol chimes in to confirm that the Office of Consumer Affairs has been proactive in passing out several thousands of the red immigration cards, originally created by the Immigration Legal Resource Center (ILRC). Brian asked CJ if Avatar, BHRS's EHR system will be replaced by EPIC. CJ confirmed that was true. Victoria asked CJ for some examples of SMMC's priorities and if HCH/FH's work aligns with them. He believes there is tremendous alignment. He responded that with EPIC now fully implemented, the medical center will shift their focus on understanding the needs of their patient population. As part of the medical center's strategic planning, this summer their main focus will be on the patient population and health care delivery at Coastsides Clinic to learn more on how to be the provider of choice for patients. He elaborates that while SMMC was previously viewed as the provider of last resort, that is no longer the case, and that SMMC has been and will continue to be open to everyone. He emphasized that while it is not possible to design a medical center system for everyone, SMMC's goal is to design a medical center for those that other health centers are not open for; based on what their patients needs and what other health centers do not provide. Victoria asked if there are opportunities that in which the HCH/FH program could be involved in to work more closely with SMMC? CJ explained that the COVID-19 pandemic was a significant disrupter of the medical center's ability to engage in partnerships that the medical center had both internally and externally. He further elaborates that prioritizing the EPIC implementation planning over the last two years has also had a significant impact on SMMC's
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	ability to maintain partnerships. He concludes that with EPIC implemented and the medical center getting their bearings post COVID-19 pandemic, SMMC has proactively revived their partnerships in all areas to learn together. CJ commented that the work to occur this Summer at Coastside Clinic will be a great opportunity to work with HCH/FH. Victoria inquired about SMMC's capacity to evaluate the program and allocate resources to improve the program through additional staffing. CJ expressed gratitude for the program staff's work and informed Victoria that given the uncertainty of the current legislative landscape for medical care, all resources are allocated specifically to direct patient care and anything that is directed elsewhere, takes away from patient care directly. He reassured the Board that there are other ways that SMMC can support the work for the Board and that he is open to look further into these alternative avenues.	
F. Business Agenda	No Business Agenda Items.	
G. Reporting & Discussion Agenda 1. Initial Discussion of Health Resources Administration Operational Site Visit (HRSA OSV) Grant Conditions 2. San Mateo County Farmworker Housing Compliance Taskforce's Annual Report 3. Board Recruitment 4. Federal Updates and Impacts on HCH/FH Program	Jim Beaumont, Director Jim provided the Board with an update on the program's HRSA OSV Grant conditions; there are 11 out of 100 or so components that the program must address during the 90-day grant conditions time period. The deadline is June 1, 2025. The most complex component to address is a Labor and Delivery contract once established between SMMC and Stanford. Without this contract in place, there is no financial protection guaranteed for the patient, even through the Sliding Fee Discount Program (SFD). Jim informs the Board that, according to the program's legal counsel, it may be difficult to convince Stanford to agree to the exact contract that was in place before. He has reached out to Tayischa, who is a part of Ravenswood, another Federally Qualified Health Center (FQHC), to understand where they send their patients that need Labor and Delivery services. All other components that need to be addresses are expected to resolve quickly. Jim Beaumont, Director Jim summarized the key findings of the San Mateo County Farmworker Housing Compliance Taskforce's Annual Report. He explains that while the report states that 66% of farmworker housing was compliant on all the standards, 34% wasn't. He listed some factors that qualified the housing as	

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	noncompliant. Robert clarified for the Board that while this report covers areas that are included within the County, it does not include area outside of the County but within some city limits, like Half Moon Bay. It is suggested that there should be a similar assessment at the city level for HMB. Judith agrees but reminds the Board that while the City of HMB may prioritize this issue, it currently is allocating their resources as best they can. There is a discussion about the location of different farms as they relate to County and City of HMB limits. Francine notices that the report's data skews towards quantitative data and that the quality of the farmworker housing assessed may not been captured adequately. Robert explained the factors that were evaluated and the process which included some resistance from farm owners. Suzanne informed the Board that a Berkeley organization, Urban Habitat, interviewed farmworkers about their experiences and will be creating policy recommendations in the next few months based on the qualitative data. Victoria and Robert discuss a specific farm that is notorious for poor living and safety conditions for the farmworkers and other similar instances. Tony inquires if a recent ICE raid was related to any of the farmworker housing adjacent work. Board members confirm no. Victoria Sanchez De Alba, Board Chair Victoria presented the Board with a Board Recruitment document that may be helpful in recruiting new members. Robert appreciated the format and structure of the document and asked to adopt that for other recruiting activities. Victoria reminded the Board of the Recruitment subcommittee formed and invited Board members to participate. Janet asked the Board with assistance in reaching out to two individuals who she believes would be great on the Board; their names are Dan Freeman and Paul Nickels. She met them while participating in a Grand Jury case in 2020. She informs the Board that they are both attorneys and both retired. She put an ask to the Board to help her find contact information and she will reach out. Robert called out to ALAS and Puente attendees to inform the Board if there are any farmworkers that would like to join the Board. Ophelie raised the concern that while farmworkers may be interested, the Board meetings conflict with their schedules. Jorge informed the Board that there is already some interest from their farmworker clients. Tayischa asked if it were possible to have farmworkers or homeless individuals participate virtually. Ultimately, Jim stated that Board members are required to attend meetings in-person but that it may be possible to have non-Board member farmworker and homeless individuals participate virtually. Program staff was asked to investigate if the technology required is available and if the program can hold hybrid meetings. Alejandra asked Jim if members of the
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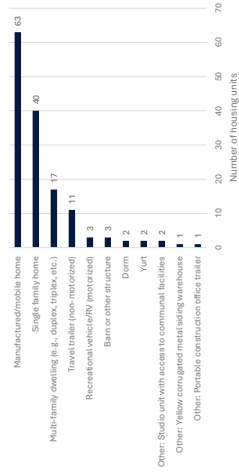
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	public would like to present, can they do so virtually. Jim stated that he would need to verify if that is possible or not. Marisol informed Jim that he can always reach out to the County Council's office to give a review on meeting requirements. Jim Beaumont, Director Jim informed the Board that the deadline to decide on the level federal funding allocated to the health center program is Friday, March 14. The funding proposal is only through the end of September 2025, asked for at the current level of funding and is technically an extension of the last funding period. The expectation is that there will not be cuts to the current level of funding. As for the continuing Resolution carried out by the House of Representatives, a reduction of \$880 billion from Medicaid/Medi-Cal has been proposed. Any reduction in Medicaid/Medi-Cal will impact the program's patients. Furthermore, the program has received multiple communications from HRSA to remove language related to Diversity, Equity, and Inclusivity (DEI) or Sexual Orientation and Gender Identity (SOGI). Francine asked about the program's funding structure and whether it has been impacted by the changes. Jim explained the program's funding structure and confirmed that the program's funding structure has not been impacted by current changes.	
G. Adjournment	Future meeting: Thursday, April 10th, 2025 Time: 10am - 12pm 500 County Center COB 3 (Manzanita Hall) Redwood City, CA 94063	The meeting was adjourned at 11:37 am.

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In addition to farmworker housing units, inspection teams also inspected 32 vacant units and 12 units housing non-farmworker tenants. Data for these units can be found in Appendix A.

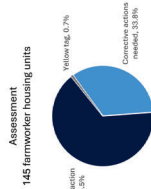
Figure 3. Farmworker Housing Structure Type (145 Total Units)



C. Corrective Actions by the Numbers

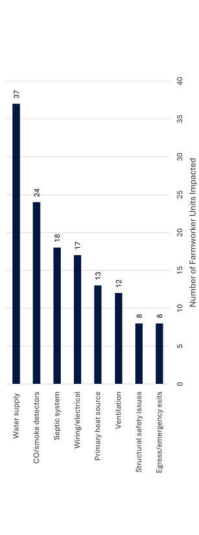
The Task Force evaluated farmworker housing units for compliance with essential life, health, and safety standards, as described in Section II, above. Of the 145 farmworker housing units inspected, 65.5% (95 units) met the Task Force's safety standards, and 33.8% (49 units) required corrective actions but could remain occupied. One farmworker housing unit (0.7%) required such extensive work that it could not remain occupied and was deemed structurally unsound and was abandoned. The operator in that case abandoned the unit rather than undertake corrective actions but relocated the farmworker household to another, compliant housing unit on the property.

Figure 4. Inspection Findings



Of the farmworker units requiring corrective action, the most frequently cited issues related to water supply (37 units), electrical (27 units), and ventilation (23 units). The Task Force also found issues with structural integrity (18 units) and pest control (15 units). Figure 5 shows the frequency of all evaluation categories.

Figure 5. Safety Evaluation Findings by Category



With respect to water supply issues, in addition to evaluating any plumbing or connection issues with the water service to farmworker units, the Task Force also tested water sampled for the presence of bacteria whenever the water source was not tested during the last inspection. The Task Force found that 18 units had water that was not tested during the last inspection. Through such testing, the Task Force identified water systems on properties saving an estimated 26 farmworker units that tested positive for coliform and/or E. coli bacteria, which pose a primary public health threat to the water users. In those cases, inspectors required operators to provide disinfection, make repairs, or install more permanent treatment of the water to eliminate any ongoing threat from bacteria in the water supply. Where appropriate, inspectors issued boil-water notices until mitigation or correction was completed.

Examples of minor corrective actions include the installation of smoke and carbon monoxide alarms and the proper wiring of appliances such as water heaters and stoves. Examples of more extensive corrective actions include the replacement of water heaters, replacement of water service lines, replacement of water service lines, replacement of electrical repairs, foundation repairs, and the installation or replacement of heating systems.

Through these compliance efforts, the Task Force ensured that property owners and operators undertake appropriate repairs for each of the 49 farmworker units identified by inspection as requiring corrective action.

VI. Conclusion and Recommendations

The Task Force's work to identify and inspect all farmworker housing on agricultural and ranch lands in unincorporated San Mateo County has been a significant step toward ensuring that all farmworker housing is safe and healthy. The Task Force's work has provided a comprehensive and accurate picture of the locations, quantity, and condition of farmworker housing on agricultural lands. The Task Force's goals from its inception were to not only ensure minimum habitability conditions for all farmworker housing units, but also to provide information and insight about the state of employee housing for the County of San Mateo. The Task Force's work has provided a comprehensive and accurate picture of the state of healthy farmworker housing in San Mateo County. For more information on other recent efforts undertaken by the County of San Mateo and other agencies to address the unmet needs of farmworkers, see Appendix B.)

With respect to possible future actions of the County along these lines, the Task Force offers the following recommendations based on its findings as well as input gathered through public engagement and community meetings:

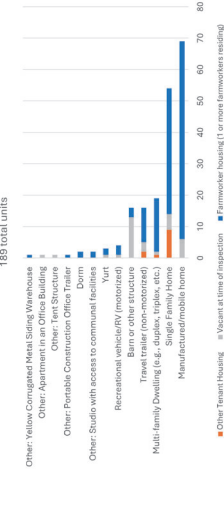
- Increase compliance measures for safe drinking water.**
Although inspections showed that most farmworker units already complied with essential health and safety standards at the time of inspection, one area in which additional compliance measures could be impactful is water supply. The Task Force found that 37 units had water supply issues, which could be addressed through a combination of measures and therefore not currently subject to existing water quality monitoring or oversight under State law. The Task Force recommends exploration of a local ordinance that would require minimum construction standards, an annual operating permit, and periodic sampling to confirm minimum water quality standards for each water supply.

Appendix A. Inspection Data

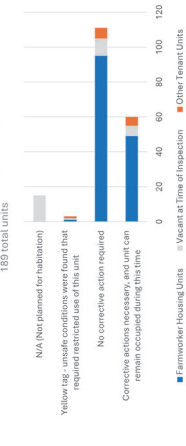
This appendix features data for all units inspected, including non-farmworker units. The three categories of occupancy featured include:

- "Farmworker housing" refers to a housing unit with one or more farmworker employees residing in it.
- "Vacant" refers to housing units with tenants who were not identified as employees, including roomers and guests.
- "Vacant" refers to housing units that were vacant at time of inspection.

Type of Structures by Occupancy Category



Task Force Assessment by Occupancy Category



systems serving farmworker housing units.

- Support the legalization of existing units and legal construction of new units.**
The Task Force found that many farmworker housing units are in violation of local building codes, and that the most effective way to ensure that farmworker units are constructed safely is to legalize existing units and support the construction of new units. The Task Force found that many farmworker housing units are in violation of local building codes, and that the most effective way to ensure that farmworker units are constructed safely is to legalize existing units and support the construction of new units. The Task Force found that many farmworker housing units are in violation of local building codes, and that the most effective way to ensure that farmworker units are constructed safely is to legalize existing units and support the construction of new units.

In particular, **potential legal changes** include: (1) reducing minimum site requirements for onsite wastewater treatment systems (OWTS), such as septic, that would allow a lower threshold for determining the minimum size of the system to more accurately reflect the actual demand presented by a proposed farmworker housing unit; and (2) pursuing an amendment to the Local Coastal Program that would establish a Coastal Development Permit exemption for farmworker housing projects in areas that will not impact coastal resources, as long as the project is consistent with the Coastal Act and the project is not located in a sensitive habitat area and that the project is not viable from scenic roads, and not on prime soils where feasible.

Additionally, **process changes** to better assist property owners and operators who seek to build, renovate or repair farmworker employee housing include the following efforts already under way: (1) updates to the County's one-stop reference manual, the Farm Labor Housing Guidebook, to provide a comprehensive and current resource for property owners and operators; (2) the development of a Farmworker Housing Handbook, to provide assistance with the permit process from the departments of Planning & Building and Environmental Health Services; and (3) the addition of dedicated staff resources to both Planning and Building and Environmental Health Services to assist property owners with the permit and approval process, including water system and OWTS evaluation, and construction review for installations, upgrades, and repairs.

- Explore financial support for the construction and rehabilitation of farmworker units.**

To address the potential financial challenges to legal construction or rehabilitation of existing units for some operators, the Task Force recommends exploring a potential referral of the Farmworker Housing Loan Program operated by the Department of Housing. That program, which has provided eight standardized loans to date, is available to farmworker housing units, but is not currently open to additional units at the time of this report.

VII. Resources and Information

For information about how to construct and rehabilitate legal farmworker housing, including the updated Farm Labor Housing Guidebook, as well as information about any new measures in this area that may be adopted by the County, visit the County's [Farm Labor Housing Email](#) webpage.

The County remains committed to ensuring safe living conditions for farmworkers residing in employer-provided housing and encourages tenants and other concerned stakeholders with reportable information about unsafe housing conditions to make a report using the following methods:

- To report matters regarding unsafe housing structures, contact the Planning & Building Department at (650) 363-7821.
- To report matters regarding health, water, and sanitation, contact Environmental Services at (650) 363-4404 and/or [FarmWorkerHousing@sanmateo.gov](#).

In the coming months, the Office of Community Affairs will conduct targeted outreach to the farmworker community and other stakeholders to provide information on how to report unsafe conditions.

Appendix B. Other Initiatives

I. Recent Affordable Housing Projects

Stone Pine Cove (880 Stone Pine) Half Moon Bay

The County has been working on a long-term housing development called 880 Stone Pine Road in Half Moon Bay, an affordable manufactured home community developed in partnership with the City of Half Moon Bay offering ownership opportunities for 47 farmworker households, including those specifically displaced by the mass shooting of January 2022. The project is located in an area with a median income of approximately \$40,000, which is significantly below the area's median income and will target extremely low-income households and displaced households from displaced housing conditions. The County anticipates occupancy to begin in Spring 2025. For more information, please visit the City of Half Moon Bay's [Stone Pine Cove - Affordable Housing](#) webpage.

Cypress Point, Moss Beach

Affordable housing developer MidPen Housing is developing a 71-unit affordable housing community in Moss Beach. The project will consist of 16 one-bedroom, 37 two-bedroom, and 18 three-bedroom homes that are anticipated to serve approximately 210 residents. All units, apart from the manager's unit, will be rented to households that earn less than 60% of the area's median income, of which 18 are reserved for low-income farmworker households. For more information, please visit the County of San Mateo's [Cypress Point Affordable Housing Community Project](#) webpage.

555 Kelly Avenue, Half Moon Bay

In partnership with ALAS (Woodside) Latines, a Spanish and with Inland Capital from the County, affordable housing developer Merco Housing California (MHC) is slated to build 40 apartments of affordable housing for senior farmworkers on a parcel owned by the City of Half Moon Bay. The property will also be the future home of the Farmworker Resource Center, a new community center operated by ALAS. For more information, please visit the City of Half Moon Bay's [555 Kelly Avenue - Affordable Housing](#) webpage.

II. Pescadero Housing Site Analysis

The County is conducting an analysis of sites within the Pescadero area to determine if there are properties that are suitable for the development of affordable housing. This assessment will include an in-depth study of sites that may be viable for this purpose, and identify potential barriers to such development posed by existing policies and regulations that could be amended to facilitate the development of farmworker housing in the area.

III. Office of Labor Standards and Enforcement (OLSE)

In December 2023, the Board of Supervisors voted unanimously to launch an Office of Labor Standards and Enforcement (OLSE) with specific attention to low-income workers and workers from vulnerable populations. The goal is to inform workers and employers about labor rights and increase adherence to wage per hour laws through increased awareness and enforcement. The OLSE will aim to strengthen worker protections by having in-house support to reinforce regional, state, and federal regulatory and educational strategies. The OLSE is currently in development, utilizing a phased approach to design and establish needed infrastructure.

1. Let staff know that you are now on the PRC Board and want to identify that as a possible conflict of interest.
2. Updates: Pacifica has received reports of Section 8 Housing evictions, some which have led to homelessness. There are multiple resources trying to assist the tenants since their story was shared..

Pacifica is not the only community reporting evictions, mostly for failure to pay.

Currently, eviction data comes from the number who go to eviction court, but this is an undercount since many evicted tenants do not go to court.

The CORE agents might have data on the number of clients seeking their assistance due to evictions, and it would be a helpful data point for the community and our electeds.

According to Matthew Desmond, nationally the greatest reason for homelessness among single women with children is eviction.

A recent Measure K Report stated \$8.5 million earmarked for rental assistance were not disbursed.

SMCO Legal Aid said that would have prevented many evictions.

Ask:

1. Could this Board receive monthly data on evictions:
 - the numbers that come to eviction court
 - the numbers of CORE agency clients who consult to prevent eviction or report they are being evicted?
2. Could we get a report on Measure K funding disbursement to better understand why rental assistance funds went unallocated?

Tab 2

Program Budget and Financial 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: April 10, 2025

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 FINANCE REPORT

Preliminary expenditure data for March shows a total of only \$94,370, however this includes only one (1) paid invoice for contracted services. Much of this is the result of payment processing often being focused for the end of the month and the HCH/FH need for getting reports to provide to the Board in a timely manner. This is true for the entire year-to-date in lacking data on the payments of invoices for our service contracts and MOUs. What we can say is that the second largest component of HCH/FH expenditures – staff salaries & benefits – is being expended as expected and is on target so far for the year.

As we get through the entire first quarter and perform the drawdown of funds for reimbursement, we will begin to have a much better idea of where we stand with respect to our planned budgeted expenditures. The Board can expect more detailed reporting and projections on spending as we get to the May Board meeting. For now, there is nothing apparent that would be of concern in our rates of expenditure.

Attachment:

- GY 2024 Summary Grant Expenditure Report Through 03/31/25



GRANT YEAR 2025

March \$\$

Details for budget estimates	Budgeted [SF-424]		To Date (03/31/25)	Projection for end of year	Projected for GY 2026
EXPENDITURES					
<u>Salaries</u>					
Director, Program Coordinator					
Management Analyst ,Medical Director					
new position, misc. OT, other, etc.					
	725,000	53,454	163,562	720,000	750,000
<u>Benefits</u>					
Director, Program Coordinator					
Management Analyst ,Medical Director					
new position, misc. OT, other, etc.					
	225,000	16,981	51,851	220,000	235,000
<u>Travel</u>					
National Conferences (2500*8)	20,000		1,976	10,000	12,000
Regional Conferences (1000*5)	5,000		250	3,000	1,500
Local Travel	500			500	250
Taxis	500			500	250
Van & vehicle usage	1,000			1,000	1,000
	27,000		2,226	15,000	15,000
<u>Supplies</u>					
Office Supplies, misc.	10,000		341	5,000	2,500
Small Funding Requests					
	10,000		341	5,000	2,500
<u>Contractual</u>					
2022 Contracts			56,067	56,067	
2022 MOUs				0	
Current 2023 MOUs	1,000,000	23,400	23,400	900,000	1,000,000
Current 2023 contracts	950,000			875,000	900,000
---unallocated---/other contracts					
	1,950,000		79,467	1,831,067	1,900,000
<u>Other</u>					
Consultants/grant writer	40,000			35,000	10,000
IT/Telcom	55,000	535	16,201	55,000	60,000
New Automation				0	-
Memberships	5,000			5,000	5,000
Training	10,000			5,000	2,500
Misc	5,000		1,955	5,000	5,000
	115,000		18,156	105,000	82,500
TOTAL	3,052,000	94,370	315,603	2,896,067	2,985,000
GRANT REVENUE					
Available Base Grant	2,858,632		2,858,632	2,858,632	2,858,632
Prior Year Unexpended to Carryover (verified)	333,590		333,590	333,590	
Other					296,155 carryover
HCH/FH PROGRAM TOTAL	3,192,222		3,192,222	3,192,222	3,154,787
BALANCE	140,222	Available	2,876,619	296,155	169,787
			Current Estimate	Projected	
					based on est. grant of \$2,858,632
<u>Non-Grant Expenditures</u>					
Salary Overage	10,000	250	750	11,000	12,000
Health Coverage	123,000	9,721	29,485	135,000	143,000
base grant prep	0			0	
food	6,000		789	6,500	7,500
incentives/gift cards	1,000			1,500	1,500
	140,000		31,024	154,000	164,000
TOTAL EXPENDITURES	3,192,000	104,341	346,627	3,050,067	NEXT YEAR 3,149,000

Tab 3

HCH/FH Director's
Report



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

DATE: April 10, 2025

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 March 13, 2025, Co-Applicant Board meeting.

Program continues to work through the grant conditions that resulted from our January Operational Site Visit (OSV). Some have already been submitted and indicated as acceptable by HRSA staff supporting our effort. We expect to complete submission by the June 1, 2025 deadline.

HCH/FH's cooperative effort with the County Library system to have blood pressure cuffs available for check-out at all of the county libraries has fully implemented. An outstanding project led by our Clinical Services Coordinator, Alejandra Alvarado. Congratulations Alejandra.

Preparations for our 2025 Needs Assessment, a HRSA requirement, is well underway, with literature review activity and prospective vendor assessment. The Board will be hearing more about, and provided the opportunity to participate in the Needs Assessment in future meetings.

The Behavioral Health Services Expansion grant is moving along with our first data expected to be reported during April. Additionally, Program is actively working with SMMC Ambulatory Services and Coastsides Clinic on the Expanded Hours grant looking to increase hours of operation on coastsides, particularly implementing a Sunday clinic.

Program submitted timely responses to HRSA questions concerning the UDS report, and we have been informed that the report is now considered complete.

Overall, the first quarter of 2025 have been extraordinarily busy for HCH/FH with the OSV layered on top of the expected UDS Reporting, plus implementation of two (2) grants. As Director, I am quite pleased with the staff's ability to respond under difficult time constraints to achieve excellent results.

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

MONTH	AREA		
	Programmatic	Learning/Conferences	Recognition (Health, DEI, Holidays 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, Hawaii – 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	
Project	Timeframe
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



DATE: April 10th, 2025

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

- **2025-2026 Needs Assessment**

- HCH/FH continues to plan its upcoming Needs Assessment (NA), throughout the remainder of this year. HCH/FH is currently working on evaluating consultants to select the appropriate consultant who understands our scope of work and who can fulfill our needs within the given timeline and budget.

- **Library Expansion Project**

- HCH/FH has been working with the San Mateo County Library (SMCL) systems to promote the collaboration where blood pressure cuffs were provided by HCH/FH to all library locations in the county. SMCL has posted about this project onto their website blog and newsletter. SMCL also plans to work with local news outlets to promote this to newspapers and local media. HCH/FH is working with SMMC and County Health Communications to assure the medical center stays in the loop with all marketing efforts. HCH/FH also plans to promote this project through the SMMC Heartbeat Newsletter and external partners.

- **Operational Site Visit Non-Compliant Follow-Up Items**

- HCH/FH is following up with HRSA representatives to assure that all non-compliant items remains in compliance with the HRSA requirements. HCH/FH is following up with the appropriate SMMC staff to assure that items are submitted by the end of our 90- day CRO period.

Tab 5

Request to Approve HCHF
Grants Management Policy:
Reviewing and Approving the
Updated SMMC Drawdown
Procedure

DATE: April 10, 2025

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 FOR THE BOARD TO APPROVE SMMC'S DRAWDOWN POLICY

Under the Bylaws, the Board is responsible for approving policies and procedures for Program operations.

As a finding from our Operational Site Visit (OSV) in January 2025, Program was found non-compliant in the specifics of the Drawdown policy and procedures. Drawdown policy and procedures prescribe the process and manner with which Program federal reimbursement is requested. The OSV finding specified the need to include the federal citation for appropriateness of funding utilization. This request is to address that finding.

The Board is here presented with a draft update to the Drawdown Policy and Procedures that bring them into compliance with the federal requirements. This item functions as an attachment to the Board's approved Grant Management Policy (see enclosed for both)

This request is for the Board to review and approve the Drawdown Policy and Procedures as presented. Approval of this item requires a majority vote of the Board members present.

Attachments:

- HCH/FH Grants Management Policy – Expenditure Control
- Drawdown Policy and Procedures

SAN MATEO COUNTY HEALTHCARE FOR THE HOMELESS/FARMWORKER HEALTH PROGRAM

Program Policy

Policy Area: Grant Management Policy	Effective Date: October 11, 2018
Subject: Restrictions on Expenditures (including Federal Legislative Mandates)	Amended: August 17, 2021 Reviewed: July 13, 2023
Approved by: HCH/FH Co-Applicant Board	
I. Rationale or background to policy: It is the responsibility of the HCH/FH Co-Applicant Board to establish operational policies as necessary for the appropriate operation of the HCH/FH Program. As the Co-Applicant Board has the sole authority for the expenditure of grant funds received from the Health Services and Resources Administration (HRSA), and such funding may carry specific expenditure or other restrictions, it is incumbent on the Co-Applicant Board to establish policies for the expenditure of HRSA grant funds. The purpose of this policy is to clarify the requirements mandated by the FY 2018 Consolidated Appropriations Act 2018 (Public Law 115-141). Signed into law on March 23, 2018. The intent of this policy is to describe HCH/FH policy on the following statutory provisions that limit the use of funds from HRSA grant funding. In no manner are any of the following restrictions meant to restrict health center patient access to health care services including syringe exchange and harm reduction services or abortion or related services. The HCH program may continue to provide access to said services within applicable laws, however, this HRSA-mandated Policy solely serves to describe specific areas in which expenditures of federal grant funds are prohibited by federal law. II. Policy Statement: The scope and coverage of this policy applies to all services within the HRSA-approved Scope of Project of the HCH/FH Program whether delivered directly by San Mateo County employees or under contract, Memorandum of Understanding or subrecipient agreements. 1. Salary Limitation No HRSA health center grant funds shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of federal Executive Level II. 2. Gun Control	

No HRSA health center grant funds may be used, in whole or in part, to advocate or promote gun control.

3. Anti-Lobbying

No HRSA health center grant funds shall be used, other than for normal and recognized executive legislative relationships, for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, electronic communication, radio, television, or video presentation designed to support or defeat the enactment of legislation before the Congress or any State or local legislature or legislative body, except in presentation to the Congress or any State or local legislature itself, or designed to support or defeat any proposed or pending regulation, administrative action, or order issued by the executive branch of any State or local government, except in presentation to the executive branch of any State or local government itself.

No HRSA health center grant funds shall be used to pay the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before the Congress or any State government, State legislature or local legislature or legislative body, other than for normal and recognized executive-legislative relationships or participation by an agency or officer of a State, local or tribal government in policymaking and administrative processes within the executive branch of that government

The above prohibitions shall include any activity to advocate or promote any proposed, pending, or future Federal, State or local tax increase, or any proposed, pending, or future requirement or restriction on any legal consumer product, including its sale or marketing, including but not limited to the advocacy or promotion of gun control. No federal grant funds shall be used to pay the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before the Congress or any State government, State legislature or local legislature or legislative body, other than for normal and recognized executive-legislative relationships or participation by an agency or officer of a State, local or tribal government in policymaking and administrative processes within the executive branch of that government.

4. Acknowledgment of Federal Funding

When issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, the Alameda County HCH program shall clearly state – (1) the percentage of the

total costs of the program or project which will be financed with Federal money; (2) the dollar amount of Federal funds for the project or program; and (3) percentage and dollar amount of the total costs of the project or program that will be financed by non-governmental sources."

5. Restriction on Abortions

No HRSA health center grant funds shall be expended for any abortion. No HRSA health center grant funds shall be expended for health benefits coverage that includes coverage of abortion. The term "health benefits coverage" means the package of services covered by a managed care provider or organization pursuant to a contract or other arrangement."

6. Exceptions to Restriction on Abortions

The limitations established in the preceding section shall not apply to an abortion –

(1) if the pregnancy is the result of an act of rape or incest when the program has received signed documentation from a law enforcement agency or public health service stating:

(a) That the person upon whom the medical procedure was performed was reported to have been the victim of an incident of rape or incest;

(b) The date on which the incident occurred;

(c) The date on which the report was made, which must have been within 60 days of the date on which the incident occurred;

(d) The name and address of the victim and the name and address of the person making the report (if different from the victim); and

(e) That the report included the signature of the person who reported the incident.

Federal financial participation is also available in expenditures for abortions for victims of rape or incest under the circumstances described in § 50.304 without regard to the requirements of the preceding sentence; or

(2) in the case when a physician has found, and so certified in writing to the program or project, that on the basis of his/her professional judgment, the life of the mother would be endangered if the fetus were carried to term. The certification must contain the name and address of the patient.

Nothing in the preceding section shall be construed as prohibiting the expenditure by a State, locality, entity, or private person of State, local, or private funds (other than a State's or locality's contribution of Medicaid matching funds). Nothing in the preceding section shall be construed as restricting the ability of any managed care provider from offering abortion coverage or the ability of a State or locality to contract separately with such a provider for such coverage with State funds (other than a State's or locality's contribution of Medicaid matching funds).

The San Mateo County Health Care for the Homeless/Farmworker Health Program shall not subject any institutional or individual health care entity to discrimination on the basis that the health care entity does not provide, pay for, provide coverage of, or refer for abortions. The term “health care entity” includes an individual physician or other health care professional, a hospital, a provider-sponsored organization, a health maintenance organization, a health insurance plan, or any other kind of health care facility, organization, or plan.

7. Ban on Funding of Human Embryo Research

No HRSA health center grant funds may be used for – (1) the creation of a human embryo or embryos for research purposes; or (2) research in which a human embryo or embryos are destroyed, discarded, or knowingly subjected to risk of injury or death greater than that allowed for research on fetuses in utero under 45 CFR 46.204(b) and section 498(b) of the Public Health Service Act (42 U.S.C. 289g(b)).

For purposes of this section, the term “human embryo or embryos” includes any organism, not protected as a human subject under 45 CFR 46 as of the date of the enactment of this Act, that is derived by fertilization, parthenogenesis, cloning, or any other means from one or more human gametes or human diploid cells.

8. Limitation on Use of Funds for Promotion of Legalization of Controlled Substances

No HRSA health center grant funds may be used for any activity that promotes the legalization of any drug or other substance included in schedule I of the schedules of controlled substances established under section 202 of the Controlled Substances Act except for normal and recognized executive-congressional communications. This limitation shall not apply when there is significant medical evidence of a therapeutic advantage to the use of such drug or other substance or that federally sponsored clinical trials are being conducted to determine therapeutic advantage.

9. Restriction on Purchase of Sterile Needles

No HRSA health center grant funds shall be used to purchase sterile needles or syringes for the hypodermic injection of any illegal drug: Provided, That such limitation does not apply to the use of funds for elements of a program other than making such purchases if the relevant State or local health department, in consultation with the Centers for Disease Control and Prevention, determines that the State or local jurisdiction, as applicable, is experiencing, or is at risk for, a significant increase in hepatitis infections or an HIV outbreak due to injection drug use, and such program is operating in accordance with State and local law.

10. Restriction of Pornography on Computer Networks

No HRSA health center grant funds may be used to maintain or establish a computer network unless such network blocks the viewing, downloading, and exchanging of

pornography. This limitation shall not limit the use of funds necessary for any federal, state, tribal, or local law enforcement agency or any other entity carrying out criminal investigations, prosecution, or adjudication activities.

11. Restrictions on Funding ACORN

No HRSA health center grant funds may be provided to the Association of Community Organizations for Reform Now (ACORN), or any of its affiliates, subsidiaries, allied organizations, or successors.

12. Confidentiality Agreements

The San Mateo County HCH/FH Program shall not require its employees or contractors seeking to report fraud, waste, or abuse to sign internal confidentiality agreements or statements prohibiting or otherwise restricting such employees or contractors from lawfully reporting such waste, fraud, or abuse to a designated investigative or law enforcement representative of a Federal department or agency authorized to receive such information. This limitation shall not contravene requirements applicable to Standard Form 312, Form 4414, or any other form issued by a Federal department or agency governing the nondisclosure of classified information

- 13.** The HCH/FH program shall ensure that all expenditures using federal award funds are allowable in accordance with the terms and conditions of the federal award, including those that limit the use of federal award funds, and with the federal cost principles in 45 CFR Part 75 Subpart E.

III. Procedures:

The HCH/FH Program staff shall ensure that no grant funds are expended in divergence to this policy.

Any modification to the legislative mandate policies and procedures will require review and approval of the HCH/FH Co-Applicant Board.

The HCH/FH Co-Applicant Board shall review this Grant Management Policy at least annually to ensure that it is fully compliant with HRSA and all other federal requirements for grant expenditures.

Approved 07/13/2023

Robert Anderson
Board Chair

J. C. Bunk
Program Director

San Mateo Medical Center

HRSA Grant Quarterly Drawdown Procedure

Identify Expenses

1. Generate the OFAS Report for the quarter for Health Care for Homeless ORG 68120
2. Use subaccounts ranging from 4000-9900 which covers salaries & all other expenses.
3. Only expenses actually incurred and paid are reimbursed.

Internal Controls to ensure Accuracy of submission

4. Ensure county purchasing policies and procedures are in place for all purchases.
5. Review the memorandum of understanding and contract for all AP payments.
6. Ensure that all expenses are reasonable and allowable according to Federal Cost Principles in 45 CFR Part 75 Subpart E and county policies. Request supporting documentation to determine cost is necessary, reasonable, and allocable under Federal Cost Principles.
7. Question and investigate any unusual expenses. Contact Grant Administrator for further clarification.
8. Food and gift cards expenses are not to be included for reimbursement, except when allowable.
9. Ensure all expenses have proper supporting documentation and approvals.
10. Calculate the proposed drawdown amount after making adjustments for unallowable expenses.
11. Submit the calculations to Financial Service Manager (FSM) for review.
12. Once reviewed by FSM, submit the proposed worksheet to Grant Administrator for review & approval.
13. Once reviewed and approved by the Grant Administrator, process the drawdown by logging on to Payment Management System.
14. Upon completion, send a copy of Federal Cash Transaction Report and the drawdown to Grant Administrator.
15. Provide a copy of the drawdown to Cashiers office, so they can monitor and inform you when wire is received in our bank account.

16. When wire is received, Cashier's office will record it into account 00502-0282-MC028 (Intergov receivable –Federal) .This account is specifically designed to track HRSA Grant.
17. At the end of the grant period, reconcile the OFAS General ledger to claims submitted and received.

Note:

HRSA Grant runs Calendar Year. Drawdown is processed every quarter.
Keep all the worksheets and drawdown documentations for Single Audit.

Go to PMS home page: <http://www.dpm.psc.gov/>

Click on Payment Management System

Under "DPM Secure Systems Login Links", click on 'Payment Management System'.

Enter username and password.

SAN MATEO COUNTY HEALTHCARE FOR THE HOMELESS/FARMWORKER HEALTH PROGRAM

Program Policy

Policy Area: Grant Management Policy	Effective Date: October 11, 2018
Subject: Restrictions on Expenditures (including Federal Legislative Mandates)	Amended: August 17, 2021 Reviewed: April 10, 2025
Approved by: HCH/FH Co-Applicant Board	
I. Rationale or background to policy: It is the responsibility of the HCH/FH Co-Applicant Board to establish operational policies as necessary for the appropriate operation of the HCH/FH Program. As the Co-Applicant Board has the sole authority for the expenditure of grant funds received from the Health Services and Resources Administration (HRSA), and such funding may carry specific expenditure or other restrictions, it is incumbent on the Co-Applicant Board to establish policies for the expenditure of HRSA grant funds. The purpose of this policy is to clarify the requirements mandated by the FY 2018 Consolidated Appropriations Act 2018 (Public Law 115-141). Signed into law on March 23, 2018. The intent of this policy is to describe HCH/FH policy on the following statutory provisions that limit the use of funds from HRSA grant funding. In no manner are any of the following restrictions meant to restrict health center patient access to health care services including syringe exchange and harm reduction services or abortion or related services. The HCH program may continue to provide access to said services within applicable laws, however, this HRSA-mandated Policy solely serves to describe specific areas in which expenditures of federal grant funds are prohibited by federal law. II. Policy Statement: The scope and coverage of this policy applies to all services within the HRSA-approved Scope of Project of the HCH/FH Program whether delivered directly by San Mateo County employees or under contract, Memorandum of Understanding or subrecipient agreements. 1. Salary Limitation No HRSA health center grant funds shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of federal Executive Level II. 2. Gun Control	

No HRSA health center grant funds may be used, in whole or in part, to advocate or promote gun control.

3. Anti-Lobbying

No HRSA health center grant funds shall be used, other than for normal and recognized executive legislative relationships, for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, electronic communication, radio, television, or video presentation designed to support or defeat the enactment of legislation before the Congress or any State or local legislature or legislative body, except in presentation to the Congress or any State or local legislature itself, or designed to support or defeat any proposed or pending regulation, administrative action, or order issued by the executive branch of any State or local government, except in presentation to the executive branch of any State or local government itself.

No HRSA health center grant funds shall be used to pay the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before the Congress or any State government, State legislature or local legislature or legislative body, other than for normal and recognized executive-legislative relationships or participation by an agency or officer of a State, local or tribal government in policymaking and administrative processes within the executive branch of that government

The above prohibitions shall include any activity to advocate or promote any proposed, pending, or future Federal, State or local tax increase, or any proposed, pending, or future requirement or restriction on any legal consumer product, including its sale or marketing, including but not limited to the advocacy or promotion of gun control. No federal grant funds shall be used to pay the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before the Congress or any State government, State legislature or local legislature or legislative body, other than for normal and recognized executive-legislative relationships or participation by an agency or officer of a State, local or tribal government in policymaking and administrative processes within the executive branch of that government.

4. Acknowledgment of Federal Funding

When issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, the Alameda County HCH program shall clearly state – (1) the percentage of the

total costs of the program or project which will be financed with Federal money; (2) the dollar amount of Federal funds for the project or program; and (3) percentage and dollar amount of the total costs of the project or program that will be financed by non-governmental sources."

5. Restriction on Abortions

No HRSA health center grant funds shall be expended for any abortion. No HRSA health center grant funds shall be expended for health benefits coverage that includes coverage of abortion. The term "health benefits coverage" means the package of services covered by a managed care provider or organization pursuant to a contract or other arrangement."

6. Exceptions to Restriction on Abortions

The limitations established in the preceding section shall not apply to an abortion –

(1) if the pregnancy is the result of an act of rape or incest when the program has received signed documentation from a law enforcement agency or public health service stating:

(a) That the person upon whom the medical procedure was performed was reported to have been the victim of an incident of rape or incest;

(b) The date on which the incident occurred;

(c) The date on which the report was made, which must have been within 60 days of the date on which the incident occurred;

(d) The name and address of the victim and the name and address of the person making the report (if different from the victim); and

(e) That the report included the signature of the person who reported the incident.

Federal financial participation is also available in expenditures for abortions for victims of rape or incest under the circumstances described in § 50.304 without regard to the requirements of the preceding sentence; or

(2) in the case when a physician has found, and so certified in writing to the program or project, that on the basis of his/her professional judgment, the life of the mother would be endangered if the fetus were carried to term. The certification must contain the name and address of the patient.

Nothing in the preceding section shall be construed as prohibiting the expenditure by a State, locality, entity, or private person of State, local, or private funds (other than a State's or locality's contribution of Medicaid matching funds). Nothing in the preceding section shall be construed as restricting the ability of any managed care provider from offering abortion coverage or the ability of a State or locality to contract separately with such a provider for such coverage with State funds (other than a State's or locality's contribution of Medicaid matching funds).

The San Mateo County Health Care for the Homeless/Farmworker Health Program shall not subject any institutional or individual health care entity to discrimination on the basis that the health care entity does not provide, pay for, provide coverage of, or refer for abortions. The term “health care entity” includes an individual physician or other health care professional, a hospital, a provider-sponsored organization, a health maintenance organization, a health insurance plan, or any other kind of health care facility, organization, or plan.

7. Ban on Funding of Human Embryo Research

No HRSA health center grant funds may be used for – (1) the creation of a human embryo or embryos for research purposes; or (2) research in which a human embryo or embryos are destroyed, discarded, or knowingly subjected to risk of injury or death greater than that allowed for research on fetuses in utero under 45 CFR 46.204(b) and section 498(b) of the Public Health Service Act (42 U.S.C. 289g(b)).

For purposes of this section, the term “human embryo or embryos” includes any organism, not protected as a human subject under 45 CFR 46 as of the date of the enactment of this Act, that is derived by fertilization, parthenogenesis, cloning, or any other means from one or more human gametes or human diploid cells.

8. Limitation on Use of Funds for Promotion of Legalization of Controlled Substances

No HRSA health center grant funds may be used for any activity that promotes the legalization of any drug or other substance included in schedule I of the schedules of controlled substances established under section 202 of the Controlled Substances Act except for normal and recognized executive-congressional communications. This limitation shall not apply when there is significant medical evidence of a therapeutic advantage to the use of such drug or other substance or that federally sponsored clinical trials are being conducted to determine therapeutic advantage.

9. Restriction on Purchase of Sterile Needles

No HRSA health center grant funds shall be used to purchase sterile needles or syringes for the hypodermic injection of any illegal drug: Provided, That such limitation does not apply to the use of funds for elements of a program other than making such purchases if the relevant State or local health department, in consultation with the Centers for Disease Control and Prevention, determines that the State or local jurisdiction, as applicable, is experiencing, or is at risk for, a significant increase in hepatitis infections or an HIV outbreak due to injection drug use, and such program is operating in accordance with State and local law.

10. Restriction of Pornography on Computer Networks

No HRSA health center grant funds may be used to maintain or establish a computer network unless such network blocks the viewing, downloading, and exchanging of

pornography. This limitation shall not limit the use of funds necessary for any federal, state, tribal, or local law enforcement agency or any other entity carrying out criminal investigations, prosecution, or adjudication activities.

11. Restrictions on Funding ACORN

No HRSA health center grant funds may be provided to the Association of Community Organizations for Reform Now (ACORN), or any of its affiliates, subsidiaries, allied organizations, or successors.

12. Confidentiality Agreements

The San Mateo County HCH/FH Program shall not require its employees or contractors seeking to report fraud, waste, or abuse to sign internal confidentiality agreements or statements prohibiting or otherwise restricting such employees or contractors from lawfully reporting such waste, fraud, or abuse to a designated investigative or law enforcement representative of a Federal department or agency authorized to receive such information. This limitation shall not contravene requirements applicable to Standard Form 312, Form 4414, or any other form issued by a Federal department or agency governing the nondisclosure of classified information

- 13.** The HCH/FH program shall ensure that all expenditures using federal award funds are allowable in accordance with the terms and conditions of the federal award, including those that limit the use of federal award funds, and with the federal cost principles in 45 CFR Part 75 Subpart E.

III. Procedures:

The HCH/FH Program staff shall ensure that no grant funds are expended in divergence to this policy.

Any modification to the legislative mandate policies and procedures will require review and approval of the HCH/FH Co-Applicant Board.

The HCH/FH Co-Applicant Board shall review this Grant Management Policy at least annually to ensure that it is fully compliant with HRSA and all other federal requirements for grant expenditures.

Approved _____ 4/10/2025

Board Chair

Program Director

San Mateo Medical Center

HRSA Grant Quarterly Drawdown Procedure

Identify Expenses

1. Generate the OFAS Report for the quarter for Health Care for Homeless ORG 68120
2. Use subaccounts ranging from 4000-9900 which covers salaries & all other expenses.
3. Only expenses actually incurred and paid are reimbursed.

Internal Controls to ensure Accuracy of submission

4. Ensure county purchasing policies and procedures are in place for all purchases.
5. Review the memorandum of understanding and contract for all AP payments.
6. Ensure that all expenses are reasonable and allowable according to Federal Cost Principles in 45 CFR Part 75 Subpart E and county policies. Request supporting documentation to determine cost is necessary, reasonable, and allocable under Federal Cost Principles.
7. Question and investigate any unusual expenses. Contact Grant Administrator for further clarification.
8. Food and gift cards expenses are not to be included for reimbursement, except when allowable.
9. Ensure all expenses have proper supporting documentation and approvals.
10. Calculate the proposed drawdown amount after making adjustments for unallowable expenses.
11. Submit the calculations to Financial Service Manager (FSM) for review.
12. Once reviewed by FSM, submit the proposed worksheet to Grant Administrator for review & approval.
13. Once reviewed and approved by the Grant Administrator, process the drawdown by logging on to Payment Management System.
14. Upon completion, send a copy of Federal Cash Transaction Report and the drawdown to Grant Administrator.
15. Provide a copy of the drawdown to Cashiers office, so they can monitor and inform you when wire is received in our bank account.

16. When wire is received, Cashier's office will record it into account 00502-0282-MC028 (Intergov receivable –Federal) .This account is specifically designed to track HRSA Grant.
17. At the end of the grant period, reconcile the OFAS General ledger to claims submitted and received.

Note:

HRSA Grant runs Calendar Year. Drawdown is processed every quarter.
Keep all the worksheets and drawdown documentations for Single Audit.

Go to PMS home page: <http://www.dpm.psc.gov/>

Click on Payment Management System

Under "DPM Secure Systems Login Links", click on 'Payment Management System'.

Enter username and password.