

# HCH/FH Co-Applicant Board Meeting

Human Services Agency  
400 Harbor Blvd., Building B (Bali Room) Belmont  
April 9, 2015 from 9:00 A.M.— 11:00 A.M.

## AGENDA

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### A. CALL TO ORDER

### B. CLOSED SESSION

1. No Closed Session this meeting Robert Stebbins

### C. PUBLIC COMMENT

Persons wishing to address items on and off the agenda

### D. CONSENT AGENDA

1. Meeting minutes from March 19 ,2015 **TAB 1**
2. Program Calendar **TAB 2**

### E. BOARD ORIENTATION

1. No Board Orientation item this meeting.

### F. REGULAR AGENDA

***The documents for items 1 & 2 below will be available for review at the meeting. Time will be provided for review prior to consideration and action by the Board.***

1. HCH/FH Program Director's report Jim Beaumont
2. HCH/FH Program Budget & Financial report Jim Beaumont
3. HCH/FH QI Committee Report (verbal report) Frank Trinh
4. Board Update of Consumer Input Jim Beaumont/Others
5. HCH/FH Co-Applicant Board Policy on Contract Oversight Jim Beaumont **TAB 3**
  - i. Action Item –Request to Approve HCH/FH Policy & Procedures on Contract/MOU Oversight***
6. HCH/FH Staffing Plan Jim Beaumont **TAB 4**
  - i. Action Item –Request to Approve HCH/FH Program Staffing Plan and Initiate Staffing Actions***
7. HCH/FH Program SMMC Clinic Utilization Jim Beaumont **TAB 5**
  - i. Action Item – Presentation and Open Discussion Of HCH/FH SMMC Clinic Utilization for 2014***

### G. OTHER ITEMS

1. Future meetings – every 2<sup>nd</sup> Thursday of the month (unless otherwise stated)
  - i. Next Regular Meeting – May 14 , 2015;  
9:00 A.M. – 11:00 A.M. at Ravenswood Family Health Center***

### H. ADJOURNMENT

Robert Stebbins

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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) 573-2966 in order to make reasonable arrangements to ensure accessibility to this meeting and the materials related to it. The HCH/FH Co-Applicant Board regular meeting documents are posted at least 72 hours prior to the meeting and are accessible online at: <http://www.sanmateomedicalcenter.org/content/Co-ApplicantBoard.htm>.



# Parking Lot

- ⇒ Bylaws Review  
(as needed)
- ⇒ Annual Tactical Plan  
(no current deadline)
- ⇒ Scope Discussion  
(no deadline set)
- ⇒ Transportation  
(no deadline set)
- ⇒ Program Website  
(no deadline set)

**TAB 1**  
**April 9, 2015 Regular**  
**Meeting Minutes**  
**(Consent Agenda)**

**Healthcare for the Homeless/Farmworker Health Program (Program)  
Co-Applicant Board Meeting Minutes  
Thursday, March 19, 2015**

**Health System- 225 37<sup>th</sup> Avenue (Diamond Room), San Mateo**

Co-Applicant Board Members Present

Robert Stebbins, Chair  
Daniel Brown  
Brian Greenberg  
Paul Tunison  
Steve Carey  
Tayischa Deldridge (arrived 9:12am)  
Sandra Zuniga Nierenberg (arrived 9:02am)  
Kathryn Barrientos  
Kerry Lobel, Vice Chair  
Beth Falls

County Staff Present

Linda Nguyen, Program Coordinator  
Nirit Eriksson, Counsel  
Frank Trinh, HCH/FH Medical Director  
Jim Beaumont, Program Director  
Gloria Gross, Health System- BHRS  
Patrick Grisham, SMMC Coastside Manager  
Ann Marie, SMMC Dental Van Director  
Susan Ehrlich, SMMC CEO

Members of the Public

Absent: Eric Brown, Julia Wilson

ITEM	DISCUSSION/RECOMMENDATION	ACTION
Call To Order	Robert Stebbins called the meeting to order at <u>9:00</u> A.M. Everyone present introduced themselves.	
	No Closed Session	
Public Comment	No Public Comment at this meeting.	
Consent Agenda	All items on Consent Agenda (meeting minutes from February 26, 2015 and the Program Calendar) were approved. Please refer to TAB 1, 2	Consent Agenda was MOVED by Kathryn

		SECONDED by, Beth and APPROVED by all Board members present.
Board Orientation:	No Board Orientation for this meeting.	
Regular Agenda: HCH/FH Program <i>Director's Report</i>	<p>Highlights mentioned from the report- Jim Beaumont (Dir) reported on program:</p> <p><u>Grant Conditions</u>- received HRSA NOA on 3/11/15 verifying lifting of Board Expertise grant condition. 3/3/15 received HRSA NOA that HRSA accepted our plan on bard Contract Oversight Policy, creating 120-day implementation condition. Project Officer recommended we receive TA assistance on this from OSV site visit staff on language that is missing for Board approved policy. OSV staff referred to Office of Management and Budget (OMB) "Omni Circular" on 12/26/14. Program will modify Contract Oversight Policy to Board for approval soon, for 7/1/15 required submission.</p> <p><u>UDS</u>- Received change request on 3/1 and 3/13/15 from reviewer. Responses have been submitted for requests. March 31, 2015 is finalization date.</p> <p><u>Solicitation of Services</u>: We received no full and complete proposals. Working with Specialty Services/dental in assisting them in preparing a submission as we received some information from them. Program will work with them in next two weeks to help prepare complete proposal submission.</p> <p><u>Operational Site Visit</u>- Program hosted an Operational Site Visit March 10-12, 2015. The site team was pleasant and engaging, providing a substantial amount of information. Thank you to all staff and management of Health System and SMMC for assistance and cooperation, as well as Board members. This item is also on agenda so will not go into detail here.</p>	

	<p><u>Seven-day update</u> Project Officer (Kathy) has offered us technical assistance for some grand conditions like QI/QA Plan, Scope of Project and Data programming. We may have to hold a special meeting within next 3 weeks for Board to be present for TA assistance.</p> <p><u>Health System Van</u>- a 12-passenger van is being held for us if we are still interested in it. This van may be used for transportation of patients etc.</p> <p><i>Please refer to TAB 3 on the March 19 Board meeting packet.</i></p>	<p>Board members to send Jim his availability in next 3 weeks (2 hrs) to meet for TA assistance on grant conditions with HRSA</p>
<p>Regular Agenda: HCH/FH Program <i>Budget &amp; Financial Report</i></p>	<p>A brief report was presented indicating that the program had expenditures of approximately \$300,000+, increase from January of \$100,000. Significant increase due to new contracts starting with January being largest invoice month from contractors.</p> <p>Program is on track for fully expending funds for the grant year.</p> <p>Request to have more detailed financial summary/reports for Board to view and understand expenses.</p> <p>Please refer to TAB 4 on the <i>March 19</i> Board meeting packet</p>	<p>Jim- prepare more detailed financial reports for Board meetings.</p>
<p>QI Committee Report</p>	<p>Dr. Frank Trinh, Medical Director for the HCH/FH Program, oral report- looking to expand data and sources of data that we review by working with Health IT staff etc. Currently sitting on SMMC QI Committee and observing process.</p> <p>Susan Ehrlich suggested that Frank submit own QI/QA plan to SMMC QI Committee to receive feedback.</p>	
<p>Regular Agenda: Board Update of <i>Consumer Input</i></p>	<p>Discussion on patients' level of care and how they are tracked – concerns brought up in OSV. Also shared stories from consumers that patients have difficult time “navigating” the health system, no clear identified resource. Transportation to clinics are also a large concern/issue with many patients and even those interesting in serving on board (farmworkers).</p>	

	Request to put on next agenda item recruitment to Board, limitations and concerns come up such as transportation to Board meetings and childcare during meeting .	
Regular Agenda: <i>Request to Approve Increase in Medical Director FTE allocation and Direct the execution of the necessary agreement</i>	<p>Request to increase Medical Director’s FTE time from 10% of time dedicated to HCH/FH Program to 25%. OSV team in 2013 and again in 2015 visit suggested that the Medical Director’s time should be increased. Currently there is a formal agreement in place with the Health System, Policy &amp; Planning Public Health to establish the reimbursement of their budget for Dr. Trinh’s HCH/FH time, and attached is a revised MOU to increase time to 0.25 (25%)</p> <p>Discussion on how much this would cost on our annual budget, and concerns that a dollar amount was not provided in the context of the budget and balance. The increased cost would approximately be \$75,000 of a \$2 million annual budget.</p> <p>Request to have budget details and summary provided at future meetings</p> <p><b>Action Item: Request to Approve Increase in Medical Director FTE allocation and Direct the execution of the necessary agreement</b></p> <p><i>Please refer to TAB 5 the March 19, 2015 Board meeting packet</i></p> <p>.</p>	<p>MOVED by Dan Brown</p> <p>SECONDED by, Paul</p> <p>Abstained- Steve Oppose- Kerry</p> <p>and APPROVED by Robert, Daniel, Brian, Paul, Tayischa, Sandra, Katheryn and Beth.</p> <p>Jim- to provide detailed budgets at future meetings</p>
Regular Agenda: <i>Board discussion- Operational Site Visit debrief</i>	<p>Discussion on OSV meeting and suggestions that include:</p> <ul style="list-style-type: none"> <li>• More Board involvement</li> <li>• Finances should be spent, as too much is unspent</li> <li>• Improve quality of Data and increase staff</li> <li>• 5 out of 19 conditions met, though many were minor and technical in nature.</li> <li>• Program should make sure that money spent has visible benefits to program.</li> <li>• 7 of 14 conditions cited, already in compliance with HRSA</li> </ul> <p>Discussion on relationship with SMMC and the costs they cover and how much they benefit with reimbursements from Medicaid. .</p>	

<p>Regular Agenda: Board discussion- Scope of Project</p>	<p>Discussion from OSV findings and request:</p> <ul style="list-style-type: none"> <li>- Was unable to locate all the contract MOUs that SMMC has in place at time of visit, but will locate and work with Materials Management</li> <li>- We have 19 sites, with 2 that need to be merged and van to be taken out, the staff were incorrect in stating only 7 sites in the Program's scope.</li> </ul> <p>Request for data on what utilization of the clinics with our patients, farm worker sand homeless.</p> <p><i>Please refer to form 5A from the March 19, 2015 Board meeting packet</i></p>	<p>Jim- to gather data on site utilization of our patients.</p>
<p>Regular Agenda:  <i>Request to form Working Group to Explore need and job description as necessary for Patient Navigator position</i></p>	<p>Discussion on the necessity of the "patient navigator" position. Some concerns regarding how these positions were chosen to study, instead of all possibilities such as program staffing. Stated that previous groups had studies the issues of navigator and transportation needs, that providers had expressed the need.</p> <p>Working Group will assist case managers and give warm hand off to help navigate through the health system.</p> <p><i>Please refer to TAB 6on the March 19, 2015 Board meeting packet</i></p> <p><b>Action Item: Request to form Working Group to Explore need and job description as necessary for Patient Navigator position</b></p>	<p>MOVED bySandy</p> <p>SECONDED by, Kat</p> <p>and APPROVED by all Board members present.</p>

<p>Regular Agenda:</p> <p><i>Request to form Working Group to Explore need for medical Transportation</i></p>	<p>Discussion to form need for transportation and method of financing.</p> <p><i>Please refer to TAB 7 on the March 19, 2015 Board meeting packet</i></p> <p><b>Action needed: Request to form Working Group to Explore need for medical Transportation</b></p>	<p>MOVED by Beth</p> <p>SECONDED by, Paul</p> <p>and APPROVED by all Board members present.</p>
<p>Adjournment</p>	<p>Robert adjourned the meeting at ___11:06_____ a.m.</p>	

**TAB 2**  
**Program Calendar**  
**(Consent Agenda)**

## Health Care for the Homeless & Farmworker Health (HCH/FH) Program 2015 Calendar *(Revised April 2015)*

EVENT	DATE	NOTES
<ul style="list-style-type: none"> <li>• Board Meeting (April 9, 2015 from 9:00 a.m. to 11:00 a.m.)</li> <li>• First Quarter 2015 Contracts Report</li> <li>• HRSA Technical Assistance meeting</li> </ul>	April	Board meeting at Human Services Agency- 400 Harbor Blvd. Bldg B (Bali Rm) Belmont
<ul style="list-style-type: none"> <li>• Board Meeting (May 14, 2015 from 9:00 a.m. to 11:00 a.m.)</li> <li>• Initiate Tactical Plan Development</li> <li>• Board Review &amp; Approval of Program Services, Sites and Hours</li> <li>• National Farmworker Health Conference in San Antonio, TX (May 5-7)</li> <li>• NHCHC National Conference IN Washington, D.C. (May 7-9)</li> </ul>	May	Board meeting at Ravenswood- East Palo Alto
<ul style="list-style-type: none"> <li>• Board Meeting (June 11, 2015 from 9:00 a.m. to 11:00 a.m.)</li> <li>• Initiate Preparation for Service Area Competition (SAC) Submission</li> </ul>	June	
<ul style="list-style-type: none"> <li>• Board Meeting (July 9, 2015 from 9:00 a.m. to 11:00 a.m.)</li> <li>•</li> </ul>	July	
<ul style="list-style-type: none"> <li>• Board Meeting (August 13, 2015 from 9:00 a.m. to 11:00 a.m.)</li> <li>•</li> </ul>	August	

**TAB 3**  
**Request for Board to**  
**Approve HCH/FH**  
**Contract Oversight Policy**



# SAN MATEO COUNTY HEALTH SYSTEM

DATE: April 9, 2015

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 APPROVE AMENDED HCH/FH CONTRACT OVERSIGHT POLICY

At its December 11, 2014 meeting, this Board approved a Contract Oversight Policy to address a HRSA grant condition for Program Requirement #10 - Contract/Affiliation Agreement Oversight, issued in NOA 13-07 resulting from the Operational Site Visit (OSV) Report received August 7, 2014 for the OSV held April 30 to May 2, 2013. This policy was submitted to HRSA, as was additional information based on a Change Request requesting submission of the actual County Contracting Policies as referenced in the Contract Oversight Policy.

On March 3, 2015, HRSA issued a NOA (14-07) accepting our Plan for meeting the above stated grant condition and providing for 120 to implement that plan. On inquiring with our Project Officer, it was determined that there was a lack of specific language that was required to be included in the policy. We were advised to avail ourselves of the resources on site as part of the March 10-12 Operational Site Visit to determine what language would comprise a sufficient response.

Following up with the OSV team provided the information that a new federal Office of Management and Budget (OMB) circular had language stating the procurement procedures need to encourage procurements from certain groups, which specifically does include minority and women owned businesses. A review of the OMB Circular and available county documents indicated that San Mateo County's Administrative Memorandum B-1 – Selection of Independent Contractors contained similar language,

On inquiry with our Project Officer we were advised that the language did indeed appear to address the issue and that we could either include the actual language in the policy or reference the memo.

Attached to this request is an amended Contract Oversight Policy which specifically sites the county Memorandum B-1 and states the specific issue addressed for the grant condition. Also



attached is a redline version of the current policy to provide a direct comparison for the change.

This request is for the Board to approve the modified HCH/FH Contract Oversight Policy. A majority vote of the members present is needed to approve the request.

Attachments:

Modified HCH/FH Contract Oversight Policy

Redline of HCH/FH Contract Oversight Policy approved 12/11/14.

**SAN MATEO COUNTY**

**HEALTHCARE FOR THE HOMELESS/FARMWORKER HEALTH PROGRAM**

**Program Policy**

<b>Policy Area:</b> Contracts/Agreements	<b>Effective Date:</b> December 11, 2014
<b>Subject:</b> Oversight of Program Contracts, MOUs and Other Agreements	<b>Approved Date:</b> December 11, 2014 <b>Revision Date:</b>
<b>Title of Policy:</b> Contract Oversight	

**1. Rationale or background to policy:**

As part of insuring the access to and delivery of primary medical care services and other health services to the homeless and farmworker populations, there may occur instances when the most appropriate, cost effective manner to do so is through a contract, Memorandum of Understanding, or other form of an Agreement. To that end, it is incumbent on the HCH/FH Program to insure that such contracts or agreements perform effectively as intended, appropriately bill for services rendered and account for billed services, and meet all appropriate HRSA requirements.

Reflective of this is the HRSA 330 Program Requirement for Contractual/Agreement Oversight, including mechanisms to exercise oversight and appropriate procurement of the agreements.

**2. Policy Statement:**

It is the policy of the San Mateo County HCH/FH Program to identify and approve, as appropriate and necessary, contracts with health care and enabling service providers who can provide accessible, high quality and cost-effective Section 330 required and additional services for the homeless and farmworker populations in San Mateo County. Further, it is the policy of the Program to oversee all contracts in accordance with Section 330 (g & h) Requirements in order to ensure that services are provided with accessible hours, without regard for ability to pay, with a sliding fee discount program, and that contracted providers report valid data on program costs, service utilization, quality and all required UDS reporting data. Should the Program decide to enter into a subrecipient agreement the Program will provide oversight to ensure the subrecipient(s) comply with all Section 330 (g & h) Requirements. Contracts and/or subrecipient agreements are executed by San Mateo County in accordance with the County's Procurement and Purchasing Policies and Procedures which incorporate and/or exceed Federal Procurement Requirements. This specifically includes San Mateo County Administrative Memorandum B-1, which includes requirements for efforts to solicit proposals from small businesses, women and minority owned businesses. The Board specifically endorses and supports these efforts as policy of the HCH/FH Program

### 3. Procedures:

In accordance with the Board's approved Program Sites, Services and Hours, and the Board approved Strategic and Tactical Plans, as necessary or requested by the Board, the staff shall prepares an analysis of the Program's capabilities to provide for the necessary and planned services as determined by needs assessment, input from patients, including on the optimal locations, hours, and services for migrant and homeless populations; utilization; quality; and performance measure data.

To the extent that the services may best be delivered by another entity, the staff analysis will include recommendations for contracts or agreements with community based organizations and/or public agencies, including proposed scope of work, payment terms, required reporting and proposed monitoring/evaluation measures for each contracted entity to the Co-Applicant Board for approval.

Upon Board's approval, the program staff shall secure the agreements as approved by the Board, utilizing San Mateo County procurement processes. Any changes in Board-approved contracts resulting from the procurement process are reported to the Co-Applicant Board for approval.

Staff shall maintain a file of all current contracts, invoices, payments, and performance and data reports. Staff shall implements monitoring and evaluation processes for all executed contracts. These shall include, at a minimum:

- On a quarterly basis staff shall report to the Board on contractor utilization, cost and quality;
- As indicated by invoices and/or reported data, staff shall confer/negotiate with contractors to achieve performance goals and insure data accuracy and integrity;
- On at least an annual basis, staff shall conduct an on-site visit to each contractor to determine compliance with contract terms and validate invoice and data reporting. In subrecipient arrangements, staff confirms compliance with Section 330 (g & h) Requirements.
- Results of site visits shall be reported to the Co-Applicant Board. If the Board determines additional action is required, the Board shall direct program staff to take such action.

Approved \_\_\_\_\_

\_\_\_\_\_  
Board Chair

Date: \_\_\_\_\_

\_\_\_\_\_  
Program Director

Date: \_\_\_\_\_

**SAN MATEO COUNTY**

**HEALTHCARE FOR THE HOMELESS/FARMWORKER HEALTH PROGRAM**

**Program Policy**

<b>Policy Area:</b> Contracts/Agreements	<b>Effective Date:</b> December 11, 2014
<b>Subject:</b> Oversight of Program Contracts, MOUs and Other Agreements	<b>Approved Date:</b> December 11, 2014 <b>Revision Date:</b>
<b>Title of Policy:</b> Contract Oversight	
<p><b>1. Rationale or background to policy:</b></p> <p>As part of insuring the access to and delivery of primary medical care services and other health services to the homeless and farmworker populations, there may occur instances when the most appropriate, cost effective manner to do so is through a contract, Memorandum of Understanding, or other form of an Agreement. To that end, it is incumbent on the HCH/FH Program to insure that such contracts or agreements perform effectively as intended, appropriately bill for services rendered and account for billed services, and meet all appropriate HRSA requirements.</p> <p>Reflective of this is the HRSA 330 Program Requirement for Contractual/Agreement Oversight, including mechanisms to exercise oversight and appropriate procurement of the agreements.</p> <p><b>2. Policy Statement:</b></p> <p>It is the policy of the San Mateo County HCH/FH Program to identify and approve, as appropriate and necessary, contracts with health care and enabling service providers who can provide accessible, high quality and cost-effective Section 330 required and additional services for the homeless and farmworker populations in San Mateo County. Further, it is the policy of the Program to oversee all contracts in accordance with Section 330 (g &amp; h) Requirements in order to ensure that services are provided with accessible hours, without regard for ability to pay, with a sliding fee discount program, and that contracted providers report valid data on program costs, service utilization, quality and all required UDS reporting data. Should the Program decide to enter into a subrecipient agreement the Program will provide oversight to ensure the subrecipient(s) comply with all Section 330 (g &amp; h) Requirements. Contracts and/or subrecipient agreements are executed by San Mateo County in accordance with the County's Procurement and Purchasing Policies and Procedures which incorporate and/or exceed Federal Procurement Requirements. <u>This specifically includes San Mateo County Administrative Memorandum B-1, which includes requirements for efforts to solicit proposals from small businesses, women and minority owned businesses. The Board specifically endorses and</u></p>	

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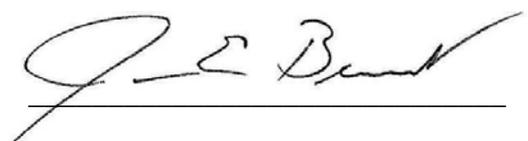
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Upon Board's approval, the program staff shall secure the agreements as approved by the Board, utilizing San Mateo County procurement processes. Any changes in Board-approved contracts resulting from the procurement process are reported to the Co-Applicant Board for approval.

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- On a quarterly basis staff shall report to the Board on contractor utilization, cost and quality;
- As indicated by invoices and/or reported data, staff shall confer/negotiate with contractors to achieve performance goals and insure data accuracy and integrity;
- On at least an annual basis, staff shall conduct an on-site visit to each contractor to determine compliance with contract terms and validate invoice and data reporting. In subrecipient arrangements, staff confirms compliance with Section 330 (g & h) Requirements.
- Results of site visits shall be reported to the Co-Applicant Board. If the Board determines additional action is required, the Board shall direct program staff to take such action.

Approved December 11, 2014



Board Chair

Date: \_\_December 11, 2014\_\_\_\_\_

Program Director

Date: \_\_December 11, 2014\_\_\_\_\_

## **TAB 4**

**Request for Board to  
Approve HCH/FH Staffing  
Plan and Initiate Staffing  
Actions**



# SAN MATEO COUNTY HEALTH SYSTEM

DATE: April 9, 2015

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 APPROVE AN HCH/FH PROGRAM STAFFING PLAN & DIRECT THE PROGRAM TO TAKE THE ACTIONS NECESSARY TO HIRE STAFF TO FILL THE DESIGNATED POSITIONS

In accordance with the Co-Applicant Agreement and the Co-Applicant Board Bylaws, the Co-Applicant Board has authority over the program's budget as derived from the federal grant, and authority to set program policy, priorities, and services. In addition, the Board has the responsibility to ensure that the program is operated in accordance with HRSA Program Requirements. As noted by the reviewers in the recent Operational Site Visit (OSV), the program administration and operations are significantly deficient in staffing. Current program staff have also stated that additional staff are needed to meet program objectives.

Based on recent experience with workload demands, the prospective needs of the program, comments of the OSV reviewers, and the direction received from those reviewers, the Board is being presented with a plan to bring program staffing to a level that addresses program workload demands. The plan calls for the creation and hiring of two immediate staff positions, one for administrative activities and one for program/operational activities. Based on current county position descriptions, the likely classifications for these positions are Management Analyst II for the administrative position and Community Program Analyst II for the program/operations position.

On the administrative side, the position will: support the development, tracking, analysis, and presentation of program fiscal data to help better inform the Board and improve general administration of the program; support the program's business intelligence and information technology efforts to ensure timely and accurate data for program administration, required reporting, and Board decision making; and support ongoing program interaction on purchasing, budget, human resources and other administrative efforts.

The additional Community Program Analyst II position, also designated as a Program Coordinator, will help fulfill the program's need to coordinate and engage San Mateo Medical



Center (SMMC) and its Ambulatory Services on behalf of the program. The current Community Program Analyst II position works with contractors and MOU providers to achieve quality services for our homeless and farmworker populations, provide coordination between programs, and arrange for technical assistance and training. The new position will perform similar functions, focusing on the services for HCH/FH patients at SMMC. As described by the OSV reviewers, we need to have better communication and coordination with SMMC in order to ensure the program meets the service requirements of the grant and that our populations are being served at an optimum level. Working in conjunction with and in support of the HCH/FH Medical Director, this position will help address program compliance for our clinical efforts at SMMC, including population protocols and the clinical support the program receives from SMMC in areas such as credentialing.

The annualized cost for these positions is roughly \$275,000. Assuming both positions are hired by July 1, 2015, the 2015 grant year impact (through October 31, 2015) would be approximately \$96,000. Current HCH/FH Grant Year budget projections show around \$50,000 available for other expenditures after allocating funds for these positions. Allocating funding for these positions annually would still leave a projected \$250,000 available for other program activities.

The staffing plan also addresses potential staffing needs beyond the immediate needs. Currently built into the plan is an Administrative Assistant position to provide broad support to the Board and program management. This position is planned to be filled sometime in 2017, but the position has been put off until that time to provide for the program and the Board to assess the impact of the immediately-requested positions and actual staffing needs at that point. As noted on the plan, there could be other future staffing needs for either administrative activities or for program services/operations.

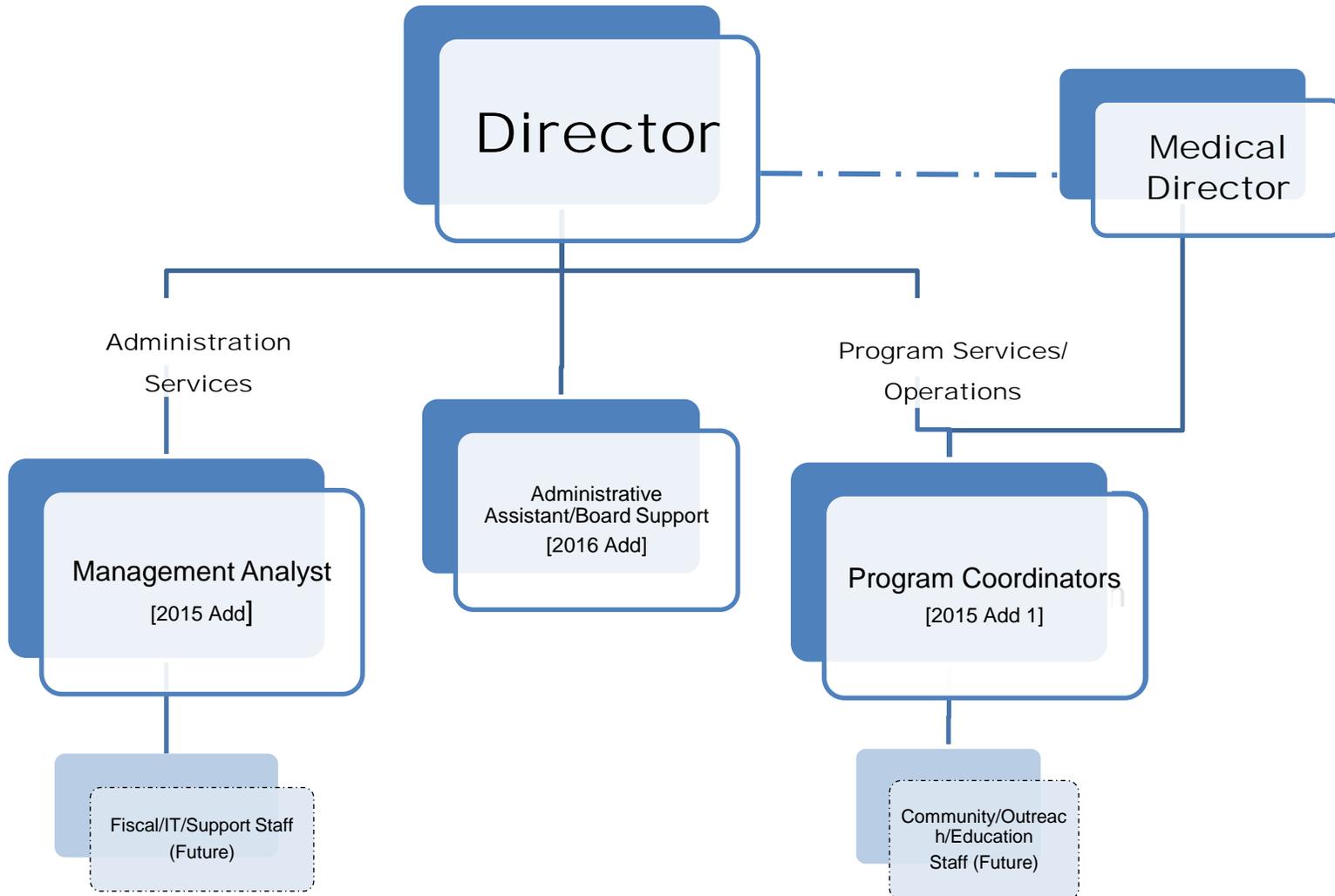
As has been identified in the both the recent OSVs, the HCH/FH Program now has significantly more responsibilities than it did as recently as 5 years ago. With the need to provide the necessary information for the Board to perform its decision-making responsibilities, for the program to have the resources to support the fiscal, analytical, and reporting requirements of the program as unique from those of SMMC, for the program to have the resources to work with SMMC on providing the best services possible in meeting the specific needs of our service populations, and for the Board and the Program to be able to show full accountability for the services and operations of the program, additional staff is a significant need. This staffing plan is intended to address the clear immediate needs and put the program in a position to be able to address all major responsibilities.

This request involves multiple Board actions. The Board is being requested to approve the staffing plan for the HCH/FH Program. With that approval, and based on the presented staffing plan, the Board is being requested to direct the Program to initiate the actions necessary to meet the staffing plan and, specifically, to create and hire a Management Analyst II position and a Community Program Analyst II position, or other similar positions as may be deemed appropriate and acceptable in working with San Mateo County's Human Resources Department.

A majority vote of the Board members present is required for approval of each requested action.

Attachments:

HCH/FH Program Staffing Plan



**TAB 5**  
**Presentation for**  
**Discussion of HCH/FH**  
**SMMC Clinic Utilization**  
**for 2014**



# SAN MATEO COUNTY HEALTH SYSTEM

DATE: April 9, 2015

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: PRESENTATION TO BOARD FOR DISCUSSION OF THE 2015 SMMC CLINIC UTILIZATION DATA

As part of the Board's responsibilities in determining and directing appropriate services for our service populations, the needs to have a range of information to assist with those discussions. At the last Board meeting, program was requested to provide data on SMMC Clinic utilization and to have it broken down by service population.

Utilizing the San Mateo Medical Center (SMMC) data provided for use in the just completed annual Uniform Data System (UDS) report covering calendar year 2014, program has calculated the utilization information requested. The data is provided by physical site and by clinic type (pediatrics, OB-GYN, etc.). All of the data is broken down by homeless, farmworker, and homeless and farmworker. The data spreadsheet is attached.

## Attachments:

SMMC Clinic Utilization for 2014 for Homeless & Farmworkers



Board of Supervisors: Carole Groom • Don Horsley • Dave Pine • Warren Slocum • Adrienne Tissier  
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## HCH/FH SMMC CLINIC UTILIZATION

2014

### Physical Location

Farmworker Only	Homeless & Farmworker	Homeless Only		Total	
3236	429	13263		16928	Main Campus
19	106	4932		5057	Mobile Vans
4443	278	714		5435	Coastside
689	116	2675		3480	Fair Oaks
100	31	1170		1301	Daly City
42	3	1013		1058	South San Francisco
5	0	51		56	Daly City Youth
48	0	68		116	Sequoia Teen Center
30	7	548		585	South County Mental Health
1	4	204		209	San Mateo Mental Health
8613	974	24638		34225	

NOTE: There were 63 visits (23/3/37) for "OB Delivery Outside" for which there was not a specified physical site. This accounts for the differences in total visits across the two tables

## Service Category

Farmworker Only	Homeless & Farmworker	Homeless Only		Total	
2273	365	14031		16669	Adult Primary Care
4217	325	1617		6159	Pediatrics
429	91	4311		4831	Specialty Services
785	96	2234		3115	Dental
700	79	1094		1873	OBGYN
133	10	958		1101	Optometry
99	11	430		540	Podiatry
8636	977	24675		34288	