

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

## Co-Applicant Board Meeting Agenda

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January 13, 2022, 9:00 - 11:00am

### AGENDA

### SPEAKER(S)

### TAB

### TIME

#### A. CALL TO ORDER

Robert Anderson

9:00am

#### B. PUBLIC COMMENT

9:02am

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. CONSENT AGENDA

Robert Anderson

9:07am

1. Approve meeting minutes from Dec. 9, 2021 Board Meeting		Tab 1	
2. Adopt a resolution finding that, because of the continuing COVID-19 pandemic state of emergency, meeting in person would present imminent risks to the health or safety of attendees.		Tab 2	
3. Program Director's Report		Tab 3	
4. Program Budget/Finance Report		Tab 4	
5. Contracts and MOU Report		Tab 5	
6. Quality Improvement/Quality Assurance Memo		Tab 6	

#### D. BUSINESS AGENDA

1. No business agenda items

#### E. REPORTING & DISCUSSION AGENDA

1. SMMC's Strategic Update, "True North"	CJ Kunnappilly SMMC CEO		9:10am
2. Learning Journey: Housing our unhoused residents who have mental illness and addiction	Louise Rogers Health Chief		9:30am
3. Health Plan San Mateo (HPSM) and rolling out California Advancing and Innovating Medi-Cal (CalAIM)	Amy Scribner, HPSM Population Health Officer		10:00am
4. Contract Highlight: LifeMoves Case Management	Sofia Recalde (staff) & Stephen Moon LifeMoves case manager		10:30am

#### F. COMMUNICATIONS & ANNOUNCEMENTS

10:50am

Communications and Announcements are brief items from members of the Board regarding upcoming events in the community and correspondence that they have received, particularly reflecting consumer needs. 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.

1. Community Updates

Board members

#### G. ADJOURNMENT

10:55am

1. Future meeting: February 10, 2022 9am-11am

**TAB 1**  
**Meeting**  
**Minutes**

**Healthcare for the Homeless/Farmworker Health Program (Program)  
Co-Applicant Board Meeting Minutes (December 9<sup>th</sup>, 2021)  
Teams Meeting**

<p><b><u>Co-Applicant Board Members Present</u></b>          Robert Anderson          Steven Kraft          Janet Schmidt          Brian Greenberg, Chair          Steve Carey          Tayischa Deldridge          Gabe Garcia          Tony Serrano          Eric Debode          Suzanne Moore          Victoria Sanchez De Alba, Vice Chair          Jim Beaumont, HCH/FH Program Director (Ex-Officio)</p>	<p><b><u>County Staff Present</u></b>          Irene Pasma, Program Implementation Coordinator          Danielle Hull, Clinical Coordinator          Sofia Recalde, Management Analyst          Amanda Hing Hernandez, HCH/FH Medical Director          Kapil Chopra, HCH/FH Behavioral Health Medical Director          Lauren Carroll, County Counsel</p>	<p><b><u>Members of the Public</u></b>          Dr. Katherine Kim, UC Davis Health          Dr. Jill G Joseph, UC Davis Health          Maricela Zavala, Puente de la Costa Sur          Ophelie Vico, Puente de la Costa Sur</p> <p><b><u>Absent Board Members/Staff:</u></b>          Christian Hansen</p>
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ITEM	DISCUSSION/RECOMMENDATION	ACTION
<u>Call to Order</u>	Brian Greenberg called the meeting to order at 9:01 and did a roll call.	
<u>Public Comment</u>	None.	
<u>Consent Agenda</u> <b>1. Mtg minutes from November 11<sup>th</sup>, 2021</b> <b>2. Resolution to conduct virtual Board meetings due to ongoing COVID-19 pandemic state of emergency</b>	<b>Please refer to TAB 1</b> All items on Consent Agenda were approved.	<b>Request to approve the Consent Agenda was <u>MOVED</u> by and <u>SECONDED</u> by Janet S and <u>APPROVED</u> by Gabe G all Board members present.</b>
<u>Consumer Input / Guest Speakers</u> <b>Telehealth for Farmworkers: Case study from UC Davis</b>	Dr. Kim and Dr. Joseph presented ACTIVATE, a digital model for telehealth that can be used in rural communities. ACTVIATE is working with medically underserved communities and those that experience health disparities.  ACTIVATE’s mission is to co-design these healthcare solutions that take advantage of new tech and remove barriers to impactful use in underserved communities. The goal is to demonstrate the program in 3 California CHCS in 2021-2023 and then create a sustainability roadmap by 2023.	

	<p>Digital health includes virtual visits via video and telephone, remote patient monitoring and wearable devices, mobile health, patient portal (lab results, Rx and scheduling), telehealth and telemedicine systems (e.g., e-consult, store and forward).</p> <p>Co-design is an approach that participants are actively involved in the design process to assure the results meet their needs and is usable. Designed with patients and members of the community, including community health workers, clients, providers, outreach staff, family members, nurses and medical assistants.</p> <p>Lessons from co-designers: 1) clients want to keep relationship with providers, 2) clients want help choosing the right devices and education on how to use them up, and 3) help understanding the health information coming from the devices.</p> <p>Brian G asked if no-shows are an issue. Guest speaker replied that there have been very few no-shows because the health coach initiates calls and has a check in conversation with the client prior to bringing the doctor on the call.</p> <p>Gabe G asked about the size pilot study and what was the staff-to-client ratio. The initial pilot was 12 clients and 3 staff and has increased to 60 clients with 3 staff. Digital health allows the healthcare team to fit in more shorter visits than in-person visits.</p> <p>Tony inquired about client's digital health literacy. Digital health literacy was not needed to join the program. A health coach is assigned to every participant to help them with telehealth.</p>	
<b>Community Updates</b>	None.	
<u>Business Agenda:</u> <b>Approve Amendment to          QI/QA Plan regarding Peer          Review</b>	<p><b>Please refer to TAB 2</b></p> <p>HCH/FH received a Operational Site Visit finding of non-compliance for Element D, Quarterly assessment of Clinician Care. Staff developed a policy for SMMC Primary Care Quality Committee Quarterly peer review process. The request is for the Board to approve the new peer review process in order to meet compliance.</p>	<p><b>Request to approve the          QI/QA Plan amendment          was <u>MOVED</u> by Gabe G          and <u>SECONDED</u> by Janet          S and APPROVED by all          Board members present.</b></p>
<b>Farewell &amp; Gratitude to          Brian Greenberg as Chair</b>	Board members expressed thanks and appreciation for Brian Greenberg's leadership and advocacy as Board Chair over the past few terms. Brian's term ends at the end of the month, and Robert A will begin his term as Board Chair in January 2022.	
<u>Reporting &amp; Discussion          Agenda</u> <b>QI/QA Subcommittee Update</b>	<p><b>Please refer to TAB 3</b></p> <p>Hypertension disparity project: The pilot program received an additional \$5K to continue the pilot to address health disparities.</p>	

	<p>QI/QA committee: The committee reviewed the Calendar Year (CY) 2021 Q3 clinical data and plans to bring a subject matter expert to speak about malnutrition and Body Mass Index (BMI).</p> <p>Homeless death data: HCH/FH sent a survey to homeless providers and received 26 responses from 20 orgs. Providers top 4 choices for useful data were manner of death, top reasons for mortality, racial disparities and service utilization. In a separate meeting, staff heard that they want staff HCH/FH to dig into SUDMH trends. Providers indicated that this info could be helpful to improve strategy in identifying unreported healthcare needs, improve outreach and engagement efforts, risk mitigation and advocacy for needed resources and staffing.</p>	
<p><b>Contracts &amp; MOUs Update</b></p>	<p><b>Please refer to TAB 4</b></p> <p>Future contracts and MOU updates will be included in the consent agenda and will continue to report financial performance on a quarterly basis. Staff will invite contracted service providers to present to the Board on the clients they serve and the work they do under the terms of their agreements with HCH/FH.</p> <p>Staff provided an update on the Saturday Dental Clinic dedicated to farmworkers and staff's plan to address/mitigate no-shows and improve attendance at the dental clinic.</p>	
<p><b>Program Director's Report</b></p>	<p><b>Please refer to TAB 5</b></p> <p>Program is continuing work through its two grant conditions and will be submitting documents to address them this month. The Associate Management Analyst has been filled, and the Program Coordinator position is posted. San Mateo County launched a cooperative pilot program between the County's 4 largest city's police departments and StarVista to place a mental health clinician with police teams to respond to mental health crisis calls. SMMC Health IT recently released a request for proposal (RFP) for case management.</p>	
<p><b>Program Budget / Finance Report</b></p>	<p><b>Please refer to TAB 6</b></p> <p>Preliminary non-COVID-19 expenditures for November 2021 were approximately \$141,693. Total expenditures for the year-to-date are \$2,489,318, of which \$2,431,304 appears claimable against the grant. Total projected claimable expenditures for the year are estimated at approximately \$2.8M. With carryover from 2020, we expect to have approximately \$600-800K of unexpended funds at year's end.</p> <p>No new invoices for COVID-19 were paid in November 2021. An update on COVID-19 expenditures will be presented to the Finance Committee in January 2022.</p> <p>Future Budget/Finance reports will be moved to the consent agenda; however, Board members can request to pull the report off the consent agenda for discussion at any time.</p>	

	<p>The Finance committee, which meets before the full Board meeting, will lead a report out to Board on finance related details on a quarterly basis. The Committee is looking to fill up to 3 seats, now that Christian H has resigned due to moving out of County.</p> <p>Christian is resigning because he is no longer a resident of San Mateo County, looking to bring on up to 3 Board members.</p>	
<b>Needs Assessment: Staff Recommendations</b>	<p>Staff's recommendation is to focus the Needs Assessment on SMMC Patient and Provider perfectives on healthcare delivery, and to support other County led efforts to address homeless clients with high medical needs and farmworker housing. Gabe G recommended Gabe G encouraged staff to do robust community engagement. Suzanne M recommended presenting a recap/history of prior needs assessment to help ground this work. Suzanne M requested to stay informed on the County's work to support clients with high medical needs.</p>	
<b>Looking ahead to 2022</b>	<p>In 2022, HCH/FH will work on serval activities to support priorities identified in the Strategic Plan, including an analysis of how care coordination translates to SMMC visits and reducing time it takes to get an appointment at SMMC; collaborating with PHPP on effort to expand field medicine to HMB, continuing work on death data surveillance and the SMMC hypertension disparity pilot and conducting a needs assessment.</p>	
<u>Adjournment</u>	<p>Brian G adjourned the meeting at 11:00am. The next HCH/FH Board meeting is scheduled for Thursday, January 13<sup>th</sup>, 2022.</p>	

**TAB 2**  
**COVID-19**  
**Emergency**  
**Continuation**

## RESOLUTION NO.

### RESOLUTION FINDING THAT THE COVID-19 PANDEMIC STATE OF EMERGENCY CONTINUES TO PRESENT IMMINENT RISKS TO THE HEALTH OR SAFETY OF ATTENDEES AND THAT IT CONTINUES TO DIRECTLY IMPACT THE ABILITY OF THE HEALTHCARE FOR THE HOMELESS & FARMWORKER HEALTH (HCH/FH) PROGRAM CO-APPLICANT BOARD TO MEET SAFELY IN PERSON

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**WHEREAS**, on March 4, 2020, pursuant to Section 8550, *et seq.*, of the California Government Code, Governor Newsom proclaimed a state of emergency related to the COVID-19 novel coronavirus and, subsequently, the San Mateo County Board of Supervisors declared a local emergency related to COVID-19, and the proclamation by the Governor and the declaration by the Board of Supervisors remains in effect; and

**WHEREAS**, on March 17, 2020, Governor Newsom issued Executive Order N-29-20, which suspended certain provisions in the California Open Meeting Law, codified at Government Code section 54950, *et seq.* (the “Brown Act”), related to teleconferencing by local agency legislative bodies, provided that certain requirements were met and followed; and

**WHEREAS**, on June 11, 2021, the Governor issued Executive Order N-08-21, which extended certain provisions of Executive Order N-29-20 that waive otherwise-applicable Brown Act requirements related to remote/teleconference meetings by local agency legislative bodies through September 30, 2021; and

**WHEREAS**, on September 16, 2021, Governor Newsom signed AB 361, which provides that a local agency legislative body may continue to meet remotely without complying with otherwise-applicable requirements in the Brown Act related to



remote/teleconference meetings by local agency legislative bodies, provided that a state of emergency has been declared, and the legislative body determines that meeting in person would present imminent risks to the health or safety of attendees, and provided that the legislative body makes such finding at least every thirty days during the term of the declared state of emergency; and,

**WHEREAS**, at its meeting of October 14, 2021, the HCH/FH Co-Applicant Board adopted a resolution, wherein this Board found, among other things, that as a result of the continuing COVID-19 state of emergency, meeting in person would present imminent risks to the health or safety of attendees; and

**WHEREAS**, if this Board determines that it is appropriate to continue meeting remotely pursuant to the provisions of AB 361, then at least every 30 days after making the initial findings set forth in the resolution adopted by this Board on October 14, 2021, this Board must reconsider the circumstances of the state of emergency and find that the state of emergency continues to impact the ability of members of this Board to meet safely in person.

**WHEREAS**, the HCH/FH Co-Applicant Board has reconsidered the circumstances of the state of emergency and finds that the state of emergency continues to impact the ability of members of the HCH/FH Co-Applicant Board to meet in person because there is a continuing threat of COVID-19 to the community, and because Board meetings have characteristics that give rise to risks to health and safety of meeting participants (such as the increased mixing associated with bringing together people from across the community, the need to enable those who are

immunocompromised or unvaccinated to be able to safely continue to participate fully in public governmental meetings, and the challenges with fully ascertaining and ensuring compliance with vaccination and other safety recommendations at such meetings); and

**WHEREAS**, the California Department of Public Health (“CDPH”) and the federal Centers for Disease Control and Prevention (“CDC”) caution that the Delta variant of COVID-19, currently the dominant strain of COVID-19 in the country, is more transmissible than prior variants of the virus, that it may cause more severe illness, and that even fully vaccinated individuals can spread the virus to others resulting in rapid and alarming rates of COVID-19 cases and hospitalizations (<https://www.cdc.gov/coronavirus/2019-ncov/variants/delta-variant.html>); and,

**WHEREAS**, the HCH/FH Co-Applicant Board has an important interest in protecting the health, safety and welfare of those who participate in its meetings; and,

**WHEREAS**, the HCH/FH Co-Applicant Board typically meets in-person in public buildings, most often in medical facilities, such that increasing the number of people present in those buildings may impair the safety of the occupants; and

**WHEREAS**, in the interest of public health and safety, as affected by the state of emergency caused by the spread of COVID-19, the HCH/FH Co-Applicant Board finds that this state of emergency continues to directly impact the ability of members of this Board to meet safely in person and that meeting in person would present imminent risks to the health or safety of attendees, and the Board will therefore invoke the provisions of AB 361 related to teleconferencing for meetings of the HCH/FH Co-Applicant Board.

**NOW, THEREFORE, IT IS HEREBY DETERMINED AND ORDERED** that

1. The recitals set forth above are true and correct.
2. The HCH/FH Co-Applicant Board has reconsidered the circumstances of the state of emergency caused by the spread of COVID-19.
3. The HCH/FH Co-Applicant Board finds that the state of emergency caused by the spread of COVID-19 continues to directly impact the ability of members of the Board to meet safely in person.
4. The HCH/FH Co-Applicant Board further finds that meeting in person would present imminent risks to the health or safety of meeting attendees and directs staff to continue to agendize public meetings of the HCH/FH Co-Applicant Board only as online teleconference meetings.
5. Staff is directed to return no later than thirty (30) days after the adoption of this resolution with an item for the HCH/FH Co-Applicant Board to consider making the findings required by AB 361 in order to continue meeting under its provisions.

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**TAB 3**  
**Program**  
**Director's**  
**Report**



SAN MATEO COUNTY HEALTH

**SAN MATEO  
MEDICAL CENTER**

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

DATE: January 13, 2022

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 December 09, 2021, Co-Applicant Board meeting:

On December 27<sup>th</sup>, Program received a HRSA Notice of Award (NOA) lifting the final two (2) grant conditions resulting from our August 2021 Operational Site Visit (OSV). We have now successfully cleared all issues and grant conditions received. I would like to thank and commend all of the Program staff for their hard work in preparing for and managing the OSV event, and particularly Danielle Hull for her work with SMMC medical staff on the final two policy issues. I would be remiss in not also noting the support and involvement of the Board, and the strong support we received from numerous SMMC staff in providing information and documentation for the OSV. If HRSA stays with their announced schedule, we will not see another OSV until 2025.

HCH/FH is working extensively with SMMC, SMC Health, Human Services Agency, County Emergency Operations Center (EOC) and our community partners on various information, isolation/quarantine, vaccine, and testing efforts for homeless and farmworkers, as well as other marginalized or at-risk people in the County particularly during this period of high COVID-19 community spread.

During December, HRSA opened its new Rapid Antigen Testing Supply Program for which we are registered and have submitted our first two weekly orders. (As of this writing, we have received the first shipment and await arrival of the second shipment in the coming days). With the fast spread of the Omicron variant, being able to test and get rapid results is critical to maintaining health for everyone, but this has made the rapid antigen tests relatively scarce and expensive. This program will enable us to direct free tests to our homeless and farmworker populations. The first order was primarily for ramp-up and focused on supporting our farmworker services partners. The second was directed at supporting shelters and began to include SMMC. We have reached out to Health/Public Health to see if we can also support their efforts. There are logistic issues to deal with but are excited for how this program can help our populations and community.

I can announce that we have formally hired Sofia Recalde as our Management Analyst in a permanent position. This represents the successful completion of the conversion of our three (3) Limited Term position into permanent positions and provides for long-term stability of Program staffing. The vacant HCH/FH Community Services Coordinator position's recruitment is ongoing. A list of eligible candidates has been received and we hope to have interviews the week of January 17<sup>th</sup>.





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With the start of the new year, HCH/FH begins its work on the annual, federally required, Uniform Data System (UDS) Report. This process reports on our patient/client counts and demographics, clinical service counts, staffing and outcomes, and fiscal status of the program for the past year. It is a major effort and much of most of the staff's time over the next month will be directed at insuring we can accurately and completely submit the report by the February 15<sup>th</sup> deadline.

HCH/FH continued working with Health Information Technology on a Case Management System. The RFP was posted in December and on December 15<sup>th</sup> a Proposal Meeting was held to provide information and answer questions from potential vendors. The deadline for questions from potential vendors was January 12<sup>th</sup>, and proposals are due by February 17<sup>th</sup>. HCH/FH will also consider utilizing Avatar to address our automation needs.

Seven Day Update

ATTACHED:

- Program Calendar

## 2022 Calendar - County of San Mateo Health Care for the Homeless & Farmworker Health (HCH/FH) Program

*Board meetings are on the 2<sup>nd</sup> Thursday of the Month 9am-11am and are conducted virtually.  
Finance Sub-Committee Meets every month prior to the Main Board Meeting.*

MONTH	ADDITIONAL EVENTS HAPPENING THIS MONTH
<b>January</b>	<ul style="list-style-type: none"> <li>• Board's 1<sup>st</sup> Meeting of the year!</li> <li>• Needs Assessment Advisory Group Inaugural Meeting (Date TBD)</li> <li>• Board self-evaluation survey administered</li> <li>•</li> </ul>
<b>February</b>	<ul style="list-style-type: none"> <li>• Initial UDS Submission – February 15, 2022</li> <li>• Q1 Provider Collaborative Quarterly Meeting (Date TBD)</li> <li>• 2022 National Conference on Ending Unsheltered Homelessness, February 16-18 (<a href="#">link</a>)</li> </ul>
<b>March</b>	<ul style="list-style-type: none"> <li>• Final UDS Submission due March 31, 2022</li> <li>• QI/QA Quarterly Subcommittee Meeting (Date TBD)</li> </ul>
<b>April</b>	<ul style="list-style-type: none"> <li>• Strategic Planning Subcommittee (Date TBD)</li> </ul>
<b>May</b>	<ul style="list-style-type: none"> <li>• Q2 Provider Collaborative Quarterly Meeting (Date TBD)</li> </ul>
<b>June</b>	
<b>July</b>	
<b>August</b>	<ul style="list-style-type: none"> <li>• Q3 Provider Collaborative Quarterly Meeting (Date TBD)</li> </ul>
<b>September</b>	<ul style="list-style-type: none"> <li>• Strategic Planning Subcommittee (Date TBD)</li> </ul>
<b>October</b>	
<b>November</b>	<ul style="list-style-type: none"> <li>• Q4 Provider Collaborative Quarterly Meeting (Date TBD)</li> </ul>
<b>December</b>	

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

**TAB 4**  
**Program**  
**Budget/**  
**Finance**  
**Report**





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San Mateo Medical Center  
222 W 39th Avenue  
San Mateo, CA 94403  
650-573-2222 T  
[smchealth.org/smmc](http://smchealth.org/smmc)

DATE: January 13, 2022

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

FROM: Jim Beaumont  
Director, HCH/FH Program

SUBJECT: HCH/FH PROGRAM BUDGET and FINANCIAL REPORT

With our Grant Year (GY) complete, we have an initial estimate of our total expenditures for 2021. Including an estimated expenditure against the grant in December of \$512,900 for non-COVID operations, the estimated total for the GY is \$2,944,404. With somewhat higher expenditures in December than average (featuring the quarterly expenditure for the Public Health Mobile Clinic), the estimated total is higher than we had been projecting. On December 20, 2021, we received a funding award notice from HRSA confirming our carryover funding to be \$922,375 from 2020. With this carryover, our available funding was around \$3.6M, leaving an estimated \$670K of unexpended funds at year's end. [ Total non-COVID expenditures for 2021, including unclaimable expenditures is estimated to be \$3,008,857.]

Knowing that we had carryover funding from previous years, the Board had approved a budget that was 10% larger than our actual Base Grant funding. We are estimated to finish the year just ~\$27,000 under that approved budget. As noted above, that will reduce our carryover funding amount from \$922,375 from 2020 to an expected \$669,603 for this past year. Based on already Board approved contracts running through 2024, we project to continue expenditures at levels greater than our Base Grant amount, thereby progressively reducing the carryover balance. By the end of 2024 GY, we project to have spent all of the carryover balance.

Typically, over past years, the Program has had unexpended funds created by either staffing vacancies or the under utilization of contract awards. Later this month/early February, we expect to fill the currently vacant Community Program Coordinator position, making the Program fully staffed again. Also, this past planning/contract cycle has resulted in fewer contracts and a deeper focus on supporting County operations providing medical and health services to the homeless and farmworkers. And since County budgets tend to be static, our payment models have moved toward virtually guaranteed full payment for our county partners. These two items are expected to create a situation where expenditures routinely are more aligned with the original budget and the resultant reduction in unexpended funds.

Given the static nature of our Base Grant funding wherein we can expect minimal if any growth outside of any expanded service opportunities (which also come with expanded costs), our currently approved contracts, and the County's current labor





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negotiations – for which we have no specific information, but which will almost certainly result in increased staffing costs – Program does not foresee much budget flexibility across the coming three (3) years. We anticipate any expansion of effort or new expenditure of funds will need to be specifically backed by new funding (similar to COVID expenditures over the past two years).

The level of activity for the COVID awards is beginning to ramp-up as more of the projects with SMMC come online. Our original COVID awards do not expire until March/April 2022 and the APR award runs through March 2023.

Attachment:

- GY 2021 Summary Grant Expenditure Report Through 12/31/21

GRANT YEAR 2021

December \$\$

Details for budget estimates	Budgeted [SF-424]		To Date (12/31/21)	Projection for end of year	Projected for GY 2022
<b>EXPENDITURES</b>					
<u>Salaries</u>					
Director, Program Coordinator Management Analyst ,Medical Director new position, misc. OT, other, etc.	631,050	67,400	575,835	577,114	699,000
<u>Benefits</u>					
Director, Program Coordinator Management Analyst ,Medical Director new position, misc. OT, other, etc.	171,990	21,351	153,655	155,000	233,000
<u>Travel</u>					
National Conferences (2500*8)	25,000		2,685	3,000	15,000
Regional Conferences (1000*5)	5,000			150	5,000
Local Travel	1,500			100	1,500
Taxis	1,000		163	250	1,000
Van & vehicle usage	2,000	48	754	1,000	1,500
	34,500		3,602	4,500	24,000
<u>Supplies</u>					
Office Supplies, misc.	12,000	4,187	9,889	7,500	10,000
Small Funding Requests	12,000		81,767	82,000	10,000
			91,656	89,500	
<u>Contractual</u>					
2019 Contracts			129,225	129,225	
2019 MOUs			144,645	144,645	
Current 2020 MOUs	872,000	208,083	857,073	925,000	1,200,000
Current 2020 contracts	1,034,000	178,811	918,966	850,000	850,000
ES contracts (SUD-MH & IBHS)	150,000				
---unallocated---/other contracts					
	2,056,000		2,049,909	2,048,870	2,050,000
<u>Other</u>					
Consultants/grant writer	30,000			5,000	25,000
IT/Telcom	20,000	2,845	23,144	24,000	25,000
New Automation				0	-
Memberships	5,000			2,500	5,000
Training	10,000	30,175	46,531	25,000	20,000
Misc	500		72	500	500
	65,500		69,747	57,000	75,500
<b>TOTAL</b>	<b>2,971,040</b>	<b>512,900</b>	<b>2,944,404</b>	<b>2,931,984</b>	<b>3,091,500</b>
<b>GRANT REVENUE</b>					
Available Base Grant	2,691,632		2,691,632	2,691,632	2,858,632
Carryover	922,375		922,375	922,375	
Available Expanded Services Awards **					682,023 carryover
HCH/FH PROGRAM TOTAL	3,614,007		3,614,007	3,614,007	3,540,655
<b>BALANCE</b>	<b>642,967</b>	<b>Available</b>	<b>669,603</b>	<b>682,023</b>	<b>449,155</b>
			<b>Current Estimate</b>	<b>Projected</b>	based on est. grant of \$2,858,632
<u>Non-Grant Expenditures</u>					
Salary Overage	13750	2163	15,328	16,000	19,000
Health Coverage	57000	4276	49,125	56,000	55,000
base grant prep	-				
food	2500			750	1,500
incentives/gift cards	1,000				1,500
	74,250	6,439	64,453	72,750	77,000
<b>TOTAL EXPENDITURES</b>	<b>3,045,290</b>	<b>519,339</b>	<b>3,008,857</b>	<b>3,004,734</b>	<b>NEXT YEAR 3,168,500</b>

	BUDGETED	This month	TO DATE	PROJECTED
COVID Expenditures	2021	49395	684,180	535,500
(not included COVID APR CAP IMP award)	2020		254,669	
[thru 03/23] Total	2,480,000		938,849	

**TAB 5**  
**Contracts**  
**and MOU**  
**Memo**



DATE: January 13<sup>th</sup>, 2022

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

FROM: Sofia Recalde, Management Analyst

SUBJECT: Contracts & MOUs Update

**Contract & MOU Updates**

HCH/FH has several contracts and MOUs with County departments and organizations to provide healthcare related services for people experiencing homelessness and farmworkers and their dependents. Below is a description of each and a status update.

1. **Abode Services:** Abode identified an in-house employee to begin delivering medical care coordination services to newly housed individuals. HCH/FH and Abode staff continues to outreach virtually with shelter providers and homeless outreach teams to promote the new service.
  
2. **ALAS**
  - a. **Promotores Services:** ALAS is currently administering a baseline survey to farmworkers to understand their current knowledge of health topics and resources. ALAS will the survey again in 3 years to see if there are any improvements after a few years of Promotores services. ALAS Promotores continue to participate in trainings to build their capacity to deliver health education and be a healthcare resource for farmworkers and their families in the Half Moon Bay region.
  
  - b. **Counseling and Case Management Services:** Quarterly meeting occurred on 12/13/2021.

Contracted Service	CY 2021 Client target	# of Clients	# of Visits
Counseling	50	15	160
Care Coordination	50	109	300

Connections to SMMC: ~30% of clients served by ALAS in 2021 had a medical or dental appointment at an SMMC clinic or with a PPHP Mobile or Field Med team provider.

Relationships with farms and farmworkers: The farmworker outreach team has increased the number of farms it serves over the course of 2021. It intends to start serving an additional nursery and potentially Rocket Farms in 2022. Two social workers join the farmworker outreach team twice a week to conduct group sessions (e.g., stress management), in addition to individual counseling sessions for farmworkers and their families at ALAS.

Emerging trends: Social workers noted that clients are overwhelmingly dealing with grief due to loss of family, friends, employment, financial stability and the stress and impact of lockdown/kids at home. They also noted that drug abuse is an issue and are unsure if clients don't seek care/treatment due to stigma or lack of access.

Challenges: As ALAS increases its outreach to farms, staffing could become an issue.

### 3. Behavioral Health & Recovery Services (BHRS)

- a. **Behavioral Health case management:** No update
  - b. **Field-based mental health services:** No update
  - c. **Substance use disorder services for farmworkers:** No update
4. **LifeMoves and Puente:** HCH/FH staff is working through processes to support case manager access to limited SMMC patient information (e.g., health insurance, appt date/time, Primary Care Provider).
5. **Public Health Policy and Planning (PHPP) Mobile Clinic and Street/Field Medicine:** HCH/FH met with PHPP Mobile Clinic and Street/Field Medicine managers on 12/22/2021. The team reviewed data on services provided by the AOD case manager. As of 11/30/2021, the case manager served 58 clients experiencing homelessness over 177 visits, including outreach, education, care coordination, counseling and referrals to IMAT and treatment programs.
- This group will reconvene in January to brainstorm how LifeMoves can be better utilized to support Mobile clinic staff and clients.
6. **Saturday Dental Clinic at Coastside Clinic** – HCH/FH is meeting with the SMMC Dental team on 1/10/2022 to discuss future staffing for the Saturday Dental Clinic.
7. **Sonrisas:** No update.

**TAB 6**  
**QI/QA**  
**Memo**



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

San Mateo Medical Center  
222 W. 39th Avenue  
San Mateo, CA 94403  
650-573-2222 T  
[www.sanmateomedicalcenter.org](http://www.sanmateomedicalcenter.org)  
[www.facebook.com/smchealth](https://www.facebook.com/smchealth)

**DATE:** January 13<sup>th</sup>, 2022

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

**FROM:** Amanda Hing Hernandez, Medical Director HCH/FH Program  
Danielle Hull, Clinical Services Coordinator

**SUBJECT:** QI/QA COMMITTEE REPORT

The San Mateo County HCH/FH Program QI/QA Committee did not meet in December 2021.

- We are working with Business Intelligence to improve several clinical reports to include billing data county wide which should result in a more accurate reflection of services received by homeless and farmworker patients in San Mateo County.
- We will meet with Coastside Clinic to discuss UC Davis pilot ACTIVATE and assess applicability to San Mateo County Coastside farmworkers and homeless patients.
- The San Mateo County Foundation is looking into additional funding opportunities for the Hypertension Disparity Pilot, which would be specifically focused on reducing disparities in colorectal cancer screening (a secondary focus of the pilot).
- We are engaging with the medical director at Fair Oaks clinic to explore an expedited pathway to primary care appointments for patients experiencing homelessness who are connected to Lifemoves or receive services through the PHPP teams.