

Minutes of the Monthly Meeting of the Health Care for the Homeless (HCH) Co-Applicant Board February 11, 2020 | 3:00 pm

Location of Meeting:

Juvenile Welfare Board
14155 58th Street North
Clearwater, FL 33760

Present at Meeting:

Lt. Zach Haisch, Lauren Grimsland, Sandra Grosvenor (phone), Helen Rhymes, Sheila Lopez (phone), Valerie Leonard (phone), Jennifer Post, and Dianne Clarke. Staff and community members present: Elisa DeGregorio, Karen Yatchum, Jennifer Black, Lauren Koen, Melissa Van Bruggen, Rhonda O'Brien (phone), Lisa Freeman, Gerni Oster, Ellen Block, and Meghan Lomas.

The regular meeting of the HCH Co-Applicant Board was called to order at **3:08 pm**.

Note: Helen ran the meeting as Valerie was attending by phone and did not have access to the agenda.

I. Chairman's Report

1. Conflicts of Interest:

Dianne Clarke noted a Conflict of Interest with respect to the new NOA.

2. Approval of Minutes:

The Board reviewed the minutes from the January meeting. A motion to approve the minutes was made by Dianne Clarke, which was seconded by Helen Rhymes. The Board **unanimously approved** the minutes.

3. Co-Applicant Board – New Members/Recruitment:

No updates this month.

4. Medical Executive Committee Minutes:

Rhonda shared the Medical Executive Committee meeting minutes and approval recommendations. A motion was made to accept the recommendations of the Medical Executive Committee by Dianne Clarke, which was seconded by Lt. Zach Haisch. The Board **unanimously approved** the motion.

5. Unfinished Business/Follow-Up:

i. Update on Tarpon Springs Shepherd Center Program

Health Care Navigator was approved to be at the Center once-a-month to help register individuals to the health care program options. Feel very confident there will be an audience at the Center 7 days per week once feeding is moved on site. Slated to open in April timeframe. Ellen Block will continue to join the Board to keep them updated on the progress of the Center.

II. Governance/Operations

1. Policy Manual Updates:

Karen shared the new updates to the Sliding Fee Discount scale. This is updated to reflect the new Federal Poverty Guidelines. A motion was made by Lt. Zach Haisch to accept the proposed changes. The motion was seconded by Dianne Clarke and was **unanimously approved** by the Board.

2. **Performance Measures/Dashboard:**

Lisa Freeman presented the Dashboard to the Board. She walked through each of the slides with the Board. Karen noted on the slides regarding the enrollment numbers compared to the number of clients with appointments shows there is about 1000 individuals (for the past calendar year) that are enrolling, but not being seen for their primary medical care appointments. Everbridge reminders continue to go out, but it is unclear why we have so many signing up and not being seen for medical care.

Dianne inquired about the goal for the flu shot being 10% and inquired why is it so low? Discussion around the number of instances in which our clients have access to the flu shot in the community the number has historically been low. 2018 the figure was 7%. Lisa shared as new programs are developed and implemented, if there are any items that the Board would like to see to let her know and she could add it.

3. **UDS Report Submission:**

Elisa shared a copy of the annual report is included in the packet. The submission is due by February 15th. We are working on the data and anticipate submission tomorrow, or Thursday at the latest. This information is required to be submitted annually for the Health Center. A lot of these figures align with the dashboard figures that Lisa presented. A new item being requested is telehealth/virtual visits. Elisa noted that PAR and Directions are the only providers currently engaging our clients via these means.

A motion was made by Lt. Haisch to approve the UDS report for submission. The motion was seconded by Jenn Post and **unanimously approved** by the Board.

4. **Staffing/Vacancies Update:**

Same vacancies as previously noted. Jennifer also shared she will be looking for a new provider as one is retiring later this year.

5. **MMU/Bayside Clinic Calendar:**

Next Monday, Feb 17th the staff meeting will be held and the clinic/van closed. Hep C screenings will be at the clinic from 8:30 am to 11:30 am on Friday, Feb 21st.

6. **Patient Satisfaction Survey Results/Benchmarks:**

Jennifer walked through each survey question and reviewed the responses. Karen noted there was a good number of responses this past month.

III. **Fiscal**

1. **Notice of Awards:**

Elisa shared there is one notice of award, which is the annual base allocation for the program. This is slightly higher than the application submitted, this was due to HRSA prorating one of the supplemental funding streams that will (next year) be included in the funding allocation moving forward. **Dianne Clarke abstained from voting.** A motion was made by Lt. Haisch and seconded by Helen Rhymes to approve the new notice of award. The Board **unanimously approved** the motion.

2. **New Funding Opportunities:**

No new funding opportunities.

IV. Clinical

1. HCH Client Trend Reports:

Medical: Jennifer noted we are about 75 unique individuals behind last year - Karen noted there was some discussion regarding the lower figures. She indicated there was a deployment of new laptops for the van, which resulted in approximately two days of significantly impacted services. Jennifer noted there were a few other little issues, such as a few hours without power, the clinic closure for tenting.

No-Show Rates: 24%, which is good for a medical facility

Dental: 204 individuals receiving dental services.

V. Other Updates

1. HCH Monthly Email Newsletter:

Elisa shared there are still vision screenings, flyers are included.

2. New Business:

Karen shared her and Elisa are looking to plan a day visit to the Health Care for the Homeless program in Orlando with DOH staff to see how their program works and to identify any opportunities.

Jennifer noted the PIT unduplicated numbers Lealman has is 97 homeless individuals. She wanted to inquire how can the Lealman area connect to services through the Blue Card? There is a CHC facility in the community, but the Blue Card does not work there.

Karen shared that 2020 is a measurement year for Pinellas HCH. There is no "magic" number to get the van to an area. The Board needs to be cognizant of the areas that the van goes to. These opportunities need to be discussed at the Board (here) and determine the locations of the van. Pinellas County risk needs to assess the site at which the van would park to see determine if it was feasible. The Blue Card is not insurance, but rather a safety net program. CHC should not turn away individuals due to homelessness. Karen meets with CHC quarterly and she has not heard this is a problem.

Jenn Post noted that she participated in the PIT count this year and she noticed there were a lot of opportunities in the Lealman community in which a Street Team would benefit individuals living in encampments. Karen shared that Street Medicine is a strategy being worked on..

Strategic Planning:

Elisa walked through the Strategic Planning document. This is being worked on monthly. Pinellas' objectives are being structured to align with HRSA's overall goals for all Health Centers. Discussed the stretch goal identified as increasing access by 5%, this is a stretch goal, not a HRSA target. On page 2, HRSA 2020 are the target goals Pinellas is required to meet for HRSA requirements. Green numbers are figures we are on target to meet or exceed the goal based on the 2019 numbers. The red figure, Mental Health, is a high target and appears to have been based on figures when Pinellas had an AHCA grant with 3.0 FTEs. Karen

noted that she has a call scheduled with the HRSA project officer to discuss this figure and how Pinellas might meet those targets. Furthermore, John Clare (Safe Harbor) is part of the PICA contract and not counted for UDS, although most of John's role in Safe Harbor is working with our clients of the HCH program. This is being further explored to ensure the flow makes sense and clients are not lost in the process. Karen further noted that there is now a full-time ARNP with the HCH program to be leveraged.

Medical Care Strategies are identified on page 4 include:

- Enrollment Navigators
- Scheduling/Hours
- Productivity of the Van Sites
- Marketing Plan
- Street Medicine Team

Dental Care Strategies on page 5 include:

- Mobile Dental Prevention Team
- Expand Denture Services to a Second DOH site
- Assessment of Dental Hours/Productivity
- Third Dental Chair at Bayside
- Community Dental Center Opportunities

Mental Health/Substance Use Patients Strategies:

- Psych ARNP On-Site
- Referrals to the CARE Team
- Clients Referred to DFL who have not had an appointment
- BayCare Counselor
- CABHI Program
- Street Medicine Team w/ Psychiatric

Clinical Quality Measure Strategies

- RN Care Coordinator
- Quality Community Liaison - new position to conduct outreach to shelter sites - Journey joined the Board today.

National Quality Leader Strategies - Behavioral Health

- SBIRT has not been implemented in the clinic, but we are exploring this as Nextgen (EHR) has workflows around this item.

Connection Strategies:

- Street Medicine
- High Utilizers/Care Management - clients meeting certain criteria (diabetic, high depression screening, ER admissions)
- Overdose/Opioid Users
- HIV @ Risk - if awarded supplemental funding opportunity this is a newer target population to us
- Outreach/Enrollment

- The "yellow light" indicates there may be some disparities with African American males and connection to the Health Center

Workforce and Health Equity will be addressed in the future. Helen noted the HLA has a new task force re: equity.

Diabetes Resource Allocation Plan Strategies:

- Develop the cost for "a diabetic patient"
- Development of a Diabetes Action/Resource Plan

PCMH Recognition Strategies:

- Annual PCMH recognition/reporting
- Engaged UCF/Consultant to assist

Technology Strategies:

- Connectivity - staff connections in the field
- Otech - kiosk should be installed soon; tablets in the offices to aid in electronic
- EHR upgrades
- Electronic data exchange

Communications Strategies - just a bulleted list, working on developing strategies

Capital Planning Strategies - developing a capital needs assessment. The van replacement is planned for 2021.

Elisa expressed we would like input from the Board as to what else may be needed. The idea for the Capital plan is so when funding opportunities come available we are prepared. This is beyond grant funding, this will be important to get Capital projects into the County's budget process.

Jenn noted she may be able to leverage her knowledge from the private sector to aid in developing the allocation of costs.

The meeting was adjourned at **4:28 pm**.

The next meeting will be held at **3:00 pm on Tuesday, March 10, 2020, at JWB.**