



**Contra  
Costa  
County**

To: Board of Supervisors  
From: William Walker, M.D., Health Services Director  
Date: April 12, 2016

Subject: Health Care for Homeless Program Plan

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**RECOMMENDATION(S):**

Approve the Health Services Department's Health Care for the Homeless (HCH) Program's response to the Health Resources and Services Administration (HRSA) 2015 Operational Site Visit findings as recommended by the Contra Costa Regional Medical Center Hospital Joint Conference Committee.

Acknowledge the audit findings, audit response and related policy changes were reviewed and approved by the Contra Costa Regional Medical Center Hospital Joint Conference Committee.

**FISCAL IMPACT:**

The HCH Program is grant-funded by the Health Resources and Services Administration (HRSA) of the federal government. A condition of this funding includes compliance with 19 Program Requirements. An operational site visit in July 2015 found a number of grant conditions that required attention. If the HCH program does not respond to these conditions, HRSA may restrict the Program's grant funds, which totaled \$2,400,000 per year in January 2016.

☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY ADMINISTRATOR

☐ RECOMMENDATION OF BOARD COMMITTEE

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Action of Board On: **04/12/2016** ☒ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYE: John Gioia, District I Supervisor  
Candace Andersen, District II Supervisor  
Mary N. Piepho, District III Supervisor  
Karen Mitchoff, District IV Supervisor  
Federal D. Glover, District V Supervisor

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: April 12, 2016

David Twa, County Administrator and Clerk of the Board of Supervisors

By: Chris Heck, Deputy

Contact: Cynthia Belon 925  
957-5201

cc: J Pigg, M Wilhelm, Rachel Birch



## BACKGROUND:

The actions listed below were presented and discussed with the Hospital Joint Conference Committee (JCC) on March 28, 2016. The JCC approved the actions as presented, and recommended acceptance of the action plan to the full County Board.

## DISCUSSION:

HRSA recently completed an operational site visit and recommended specific actions be taken to address a number of program requirement conditions that were not met. Over the next four to six months the Department will be implementing procedural and policy changes to address these findings.

In response to the HRSA findings, the items that require Board approval at this time are as follows (note: the full findings for the program requirements listed below can be found on attachment A):

1. Program Requirement #5 After- Hours Coverage – Finding: The Health Centers lacked documentation on the website and in the health center sites to identify after-hours arrangements.

Action: Updates were made to the HCH website and Brochure directing patients seeking after-hours medical assistance to the Advice Nurse, Emergency Department, or to call 911 in case of an emergency. Verbiage on all Health Centers was updated to include the Advice Nurse phone number, Emergency Department address, and instructions to call 911 in case of an emergency. Approval of this action is requested.

2. Program Requirement #7 Sliding Fee Discounts – Finding: The Health Centers did not have HRSA approved signage posted, our existing policy was not explicit on our nominal charge criteria, and our policy was deficient in a number of other procedural areas.

Action: Changes were made to the Sliding Fee Discount Schedule Policy to meet the Program Requirement. Attachment B reflects the revised policy that meets HRSA guidelines. Approval of this policy is requested.

3. Program Requirement #8 Quality Improvement/Assurance Program – Finding: Lack of documentation supporting a system-wide focus on the improvement of HRSA Clinical Performance Measures, lack of documentation supporting communication of QI information to the Board of Supervisors relative to HRSA Clinical Measures, and lack of documentation supporting the evaluation process or rapid cycle process for improvement of those Clinical Performance Measures and outcomes.

Action: Attachment C includes the Health Care for the Homeless Program 2016/2017 Quality Improvement Plan which outlines monthly quality improvement meetings, a plan to use rapid cycle methodology in evaluative efforts, monthly fiscal updates to the Chief Financial Officer and quarterly clinical updates to the Board of Supervisors. The HCH Program also partnered with the Contra Costa Health Services (CCHS) Patient Safety and Performance Improvement Committee (PSPIC) to track Clinical Performance measures on a quarterly basis, and to use this partnership to gain system-wide CCHS support to improve these measures. Approval of the HCH Quality Improvement/Assurance Plan is requested.

4. Program Requirement #13 Billing and Collections Policies and Procedures – Finding: Lack of evidence of Board-approved Billing and Collection Policies.

Action: Attachments D-J reflect the CCHS Billing Policies and Procedures. Approval of

the Billing and Collection Policies is requested.

5. Program Requirement #15 – Finding: Lack of documentation that CCHS uses EPIC data systems to review and evaluate results and the impact of clinical measures and outcomes to promote management decision-making, and lack of documentation that CCHS periodically reports on selected fiscal measures to management and/or the Board of Supervisors to assist them in reviewing and evaluating fiscal operations.

Action: Attachment C Contra Costa Health Care for the Homeless Quality Assurance and Performance Improvement Plan 2016-2017 includes the plan to report measures monthly to the CCHS Chief Financial Officer and quarterly to the Board of Supervisors, and includes a plan for the Health Care for the Homeless Quality Assurance and Performance Improvement committee to meet monthly to review clinical measures and outcomes to promote management decision-making. Approval of this plan is requested.

6. Program Requirement #17 Program Governance – Finding: Lack of documentation of HCH Program evaluation and CEO evaluation.

Action: Request Program evaluation in June or July 2016, and evaluation of the CEO of the Healthcare for the Homeless Program in September 2016. Approval of this plan is requested.

#### CONSEQUENCE OF NEGATIVE ACTION:

If not approved, the CCHS HCH Program risks being denied \$2,400,000 in grant funding for the Homeless.

#### CHILDREN'S IMPACT STATEMENT:

None

#### ATTACHMENTS

Attachment A - J