

As to form: Yes

As to form: Yes

Other Concurrence: Risk Management As to form: Yes

As to form: Tes

Recommended Actions:

That the Board of Supervisors consider the following:

- a) Approve, ratify, and authorize the Chair to execute the Housing and Homelessness Incentive Program (HHIP) Funding Agreement to receive \$316,200 from CenCal Health to expand the Health Care for the Homeless (HCH) outreach team from June 1, 2023 to June 30, 2024; and
- b) Determine that this action is not a "Project" with the meaning of the California Environmental Quality Act ("CEQA") and is exempt per CEQA Guideline section 15378(b)(4), since the recommended action is the creation of a governmental funding mechanism or other government fiscal activity that does not involve any commitment to any specific project which may result in a potentially significant physical impact on the environment.

Summary Text:

This item is on the Agenda to authorize the Chair to execute the Housing and Homeless Incentive Program (HHIP) Funding Agreement between CenCal Health and the Public Health Department (Attachment A). The Public Health Department (PHD) has a long-standing partnership with CenCal Health. This opportunity supports an expansion of the Health Care for the Homeless Outreach Team through funding an additional nurse and Health Service Aide on the HCH Outreach Team. The Santa Barbara County Public Health Department will use HHIP funding of \$316,200 to expand the Health Care for the Homeless outreach team from June 1, 2023 to June 30, 2024. As outlined by the California Department of Health Care Services, this

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funding allocation focuses on the metric of expanding the connection of the street medicine team providing healthcare for individuals who are homeless.

Background:

In 1989 the County of Santa Barbara applied to the Health Resources and Services Administration (HRSA) and was granted a Health Care for the Homeless project. Initially the main objective of the project consisted of three nurses driving in a County van to various locations providing triage in the field and offering transportation to one of the fixed clinic locations. While the HRSA project has expanded considerably since then to include shelter-based clinics, five fully functioning health centers with in house pharmacies, labs and specialty services such as orthopedics, endocrinology, rheumatology, etc., the outreach model is still a cornerstone of the program. The van has since been replaced, however the nurses continue to carry the torch, each now with a Health Service Aid (HSA) providing appropriate nursing level care and case management at shelter locations and other outreach sites, including encampments where people who are homeless are living.

Public Health Nurses as well as Staff Registered Nurses perform outreach in the field, providing triage, case management and referrals to the mid-level at the shelter clinics or to the appropriate health center, contracted dental services, the substance abuse case worker, mental health outreach workers, or treatment facilities. Providing these field services on site at shelters, transitional housing programs, and in encampments provides immediate and timely access. Yet, it also greatly reduces the number of referrals to the clinics leading to fewer broken appointments, thus expanding capacity in the clinics without costly capital expenditures, while at the same time lessening the potential for communicable disease outbreaks and improving efficiency of health care delivery.

When in the field, each nurse is paired with a HSA. The HSA supports the nurse and assists with patient intake, registration, depression and substance use screening form completion, and a number of other duties. In addition, the HSA participates in a number of care management efforts as a team member in patient centered conferences with the nurse to discuss the client's health status and needs, and to assist other health professionals with developing, updating, and implementing service plans.

The HSA gathers important information for the nurse by interviewing patients to determine the health status, progress, and needs of the client. They enter client contact data and other pertinent information in progress file notes, service plan, and/or the Electronic Health Record and route information to an appropriate health professional for review and signature. The HSA also explains other PHD services and related community resources to the client, including information on health care and explains the need for and value of continuing care. As a key point-of-contact in the delivery of services to people experiencing homelessness, the HSA also schedules appointments, follows-up on broken appointments, arranges for transportation, and assists with other care management activities. When language or cultural barriers exist, the HSA may act as an interpreter. HSAs are often trained to be certified enrollment counselors and may enroll eligible patients into Medi-Cal or Covered California.

The HHIP funding will create an opportunity to expand street medicine care services provided by PHD with a full-time nurse, part-time HSA, and operational supports utilizing the Health Care for the Homeless Outreach Team. Through CalAIM Medi-Cal healthcare reform, CenCal Health is enhancing their network of services and is responsible for oversight of HHIP funding as the incentive to create services and partnerships within the community for those experiencing homelessness.

Performance Measure:

The funds and activities are expected to result in:

• A 10% increase (25 individuals) in CenCal Health Members receiving street medicine care between baseline reporting data and October 31, 2023;

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- All data entered into Health Management Information System (HMIS) HMIS/ Coordinated Entry System (CES); and,
- All clients will be screened for Medi-Cal enrollment. If a client is not yet enrolled, client will be referred to the Department of Social Services check eligibility and Medi-Cal enrollment.

Fiscal and Facilities Impacts:

Budgeted: No. PHD will return to the Board with a budget revision in July 2023.

Fiscal Analysis:

Approving and authorizing the Chair to execute the Housing and Homeless Incentive Program (HHIP) Funding Agreement between CenCal Health and the Public Health Department will allow the Public Health Department to strengthen its street medicine efforts in providing healthcare for individuals who are experiencing homelessness. Total funding is \$316,200. The HHIP funding agreement is not in the FY 2023-24 Recommended Budget. A budget journal entry will be completed in July 2023 in order to increase appropriations for this funding agreement. This action is not anticipated to create a need for any additional facilities.

Key Contract Risks

N/A

Staffing Impacts:

Legal Positions:	FTEs:
0	0

Special Instructions:

Please execute two (2) original Housing and Homelessness Incentive Program (HHIP) Funding Agreements with CenCal Health and return one (1) Agreement and one (1) Minute Order to the PHD Contracts Unit at PHDGROUPContractsUnit@sbcphd.org.

Attachments:

A. CenCal Health Housing and Homelessness Incentive Program (HHIP) Funding Agreement

Authored by:

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