



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

FINANCE COMMITTEE MEETING

August 10, 2023 9:00-9:45am

Navigation Center
 275 Blomquist street,
 Redwood City, CA

AGENDA

AGENDA ITEM	SPEAKER(S)	TIME
A. CALL TO ORDER	Robert Anderson	9:00 AM
B. CHANGES TO ORDER OF AGENDA		9:01 AM
C. PUBLIC COMMENT		9:02 AM
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.		
D. CONSENT AGENDA		
1. Meeting minutes from May 2023	Robert Anderson	9:06 AM
E. REPORTING & DISCUSSION AGENDA		
1. Director’s report – Q2 2023 Budget & Finance Report	Jim Beaumont	9:08 AM
2. Service Area Competition Budget	Jim Beaumont	9:15 AM
3. Q2 2023 Contractor and MOU update	Gozel Kulieva	9:20 AM
F. BOARD COMMUNICATIONS & ANNOUNCEMENTS		
Communications and Announcements are brief items from members of the Board regarding upcoming events in the community and correspondence that they have received. 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.		
G. OTHER ITEMS		
H. ADJOURNMENT	Robert Anderson	9:45 AM
1. Next meetings: - November 9 th , 2023, 9:00 AM (location pending)		

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 staff Gozel Kulieva at least five working days before the meeting at gkulieva@smcgov.org 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.smhealth.org/meeting/hchfh-meetings>.



**HEALTH CARE FOR THE HOMELESS/FARMWORKER HEALTH PROGRAM (HCH/FH)
 FINANCE COMMITTEE**

May 11, 2023 9:00-9:45am
 455 County Center, Redwood City, CA 94063, Room 101

Meeting Minutes

Co-Applicant Board Members	County Staff Present	Members of the Public
Robert Anderson Steve Kraft Victoria Sanchez De Alba	Jim Beaumont Gozel Kulieva	

Agenda Item	Discussion / Recommendations	Action Items
A. Call to order	Meeting was called to order by Robert Anderson at 9:10am.	
B. Changes to order of agenda	No changes.	
C. Public comment	None	
D. Consent agenda: 1. Meeting minutes from February 2023	All items on the consent agenda were approved	Consent agenda was moved by Steve, seconded by Victoria, and approved by all committee members present.
E. Reporting & Discussion agenda 1. Director's report 2. 2022 Contractor and MOU update	Jim Beaumont presented Q1 2023 budget and finance report. Gozel Kulieva reviewed the annual performance of program contractors and MOU partners.	
F. Board communications and announcements	None	
G. Adjournment	Meeting was adjourned at 9:45 am. The next finance committee meeting is scheduled for August 10, 2023 in person.	Finance committee will reconvene in May 2023. Location details will be provided.

*Meeting minutes respectfully submitted by
 Gozel Kulieva,
 Management Analyst, Healthcare for the Homeless /Farmworker Health Program.*



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

DATE: August 10, 2023

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

The early run of the expenditure report for July shows a monthly grant expenditure of \$76,490. This is very likely to be an understatement as the County has been going through its year-end processing and almost no invoice payments appear on the report. However, the expenditures for salaries & benefits, the second largest component of our budget (after contracts & MOUs) continued to track as expected.

We are now able to roll-up all of the expenditures for the first half of the year, as the grant drawdown has been completed. This has allowed us to “catch-up” on a number of expenses that missed the monthly reports due to the timing of the reports. Based on this, we now project that our overall grant expenditures for the year will be approximately \$3,750,000. This will reduce our unexpended funds amount to around \$730,000

Our total mid-year expenditures by category:

Salaries	\$372,361
Benefits	153,171
Travel	10,616
Supplies	132
Contracts & MOUs	1,531,572
Consultants	50,403
IT/Phone	7,676
Training/Memberships/Misc.	<u>1,342</u>
	\$2,131,743

Attachment:

- GY 2023 Summary Grant Expenditure Report Through 07/31/23



GRANT YEAR 2023

July \$\$

Details for budget estimates	Budgeted [SF-424]		To Date (07/31/23)	Projection for end of year	Projected for GY 2024
EXPENDITURES					
<u>Salaries</u>					
Director, Program Coordinator					
Management Analyst ,Medical Director					
new position, misc. OT, other, etc.					
	<u>721,000</u>	52,474	<u>424,835</u>	<u>745,000</u>	<u>798,375</u>
<u>Benefits</u>					
Director, Program Coordinator					
Management Analyst ,Medical Director					
new position, misc. OT, other, etc.					
	<u>270,000</u>	19,473	<u>172,644</u>	<u>310,000</u>	<u>330,000</u>
<u>Travel</u>					
National Conferences (2500*8)	15,000	4,543	14,769	29,000	35,000
Regional Conferences (1000*5)	5,000			8,000	10,000
Local Travel	1,500			500	1,000
Taxis	1,000		187	500	500
Van & vehicle usage	1,500		311	1,000	1,500
	<u>24,000</u>		<u>15,267</u>	<u>39,000</u>	<u>48,000</u>
<u>Supplies</u>					
Office Supplies, misc.	10,000		132	10,000	10,000
Small Funding Requests					
	<u>10,000</u>		<u>132</u>	<u>10,000</u>	<u>10,000</u>
<u>Contractual</u>					
2021 Contracts			27,691	27,691	
2021 MOUs			412,500	412,500	
Current 2022 MOUs	1,241,000		602,230	1,241,000	1,200,000
Current 2022 contracts	865,979		489,151	875,000	825,000
---unallocated---/other contracts					
	<u>2,106,979</u>		<u>1,531,572</u>	<u>2,556,191</u>	<u>2,025,000</u>
<u>Other</u>					
Consultants/grant writer	40,000		50,403	65,000	25,000
IT/Telcom	4,200		7,676	15,000	30,000
New Automation				0	-
Memberships	2,000		2,875	7,500	5,000
Training	5,000		495	5,000	20,000
Misc			1,342	1,500	1,500
	<u>51,200</u>		<u>62,791</u>	<u>94,000</u>	<u>81,500</u>
TOTAL	<u>3,183,179</u>	76,490	<u>2,207,241</u>	<u>3,754,191</u>	<u>3,292,875</u>
GRANT REVENUE					
Available Base Grant	2,858,632		2,858,632	2,858,632	2,858,632
Carryover	1,626,391		1,626,391	1,626,391 estimate	
Available Expanded Services Awards **					730,832 carryover
HCH/FH PROGRAM TOTAL	<u>4,485,023</u>		<u>4,485,023</u>	<u>4,485,023</u>	<u>3,589,464</u>
BALANCE	1,301,844	Available	2,277,782	730,832	296,589
			Current Estimate	Projected	
					based on est. grant of \$2,858,632
<u>Non-Grant Expenditures</u>					
Salary Overage	13,750	1,578	14,440	35,000	45,000
Health Coverage	57,000	6,829	40,829	70,000	90,000
base grant prep	60,000	22,658	22,658	45,000	
food	2,500			2,500	2,500
incentives/gift cards	1,000		288	1,000	1,500
	<u>134,250</u>		<u>78,215</u>	<u>153,500</u>	<u>139,000</u>
TOTAL EXPENDITURES	3,317,429		2,285,456	3,907,691	NEXT YEAR 3,431,875



DATE: August 10th, 2023

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

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

FROM: Gozel Kulieva, Management Analyst

SUBJECT: Contractor Financial Progress Report Jan-Jun 2023

Contractor Financial Progress Report

Table 1 below provides a summary of the financial performances of the HCH/FH Program’s contracts for Q2 (January through June) of 2023. Table 1 describes the names of the contracting agencies, their annual contract amount with the HCH/FH Program, year to date amount spent, and year to date percent spent. For the period of January through June the anticipated expectation is that contracting agencies would expend about 50% of their annual contract amount. A percent performance in and around 50% indicates a healthy performance. Various factors influence how a contract performs, for a detailed explanation please refer to the Community Program Coordinator Memo dated August 10, 2023.

Table 2 describes the names of the contracting agencies and contracting services provided to the HCH/FH Program’s target populations.

Table 1

Contract	Contract Amount	Amount Spent	% YTD 2023
Abode	\$ 149,999	\$ 49,784	33%
ALAS	\$ 182,200	\$ 103,371	57%
BHRS EI Centro	\$ 60,000	\$ 60,000	100%
BHRS HCH	\$ 90,000	\$ 54,600	61%
BHRS HEAL	\$ 150,000	\$ 83,472	56%
Daly City Partnerships *	\$ 78,519	\$ 32,051	41%
Life Moves	\$ 350,000	\$ 251,025	72%
PHPP AOD Services	\$ -	\$ 39,103	
PHPP Mobile Clinic & Street/Field Med	\$ 825,000	\$ 412,500	50%
PHPP ARPA Expansion*	\$ 404,486	\$ 404,486	100%
Puente	\$ 169,780	\$ 94,538	56%
Puente *	\$ 9,821	\$ 4,960	51%
Saturday Dental Clinic (Coastside Clinic)	\$ 70,000	\$ 5,834	8%
Sonrisas	\$ 123,000	\$ 55,360	45%
TOTAL	\$ 2,271,699	\$ 1,595,724	70%

**Contracts with an asterisk denote limited time supplemental awards designated for special projects.*

Table 2

Contractor	Services
Abode	Enabling Services: <ul style="list-style-type: none"> • Medical Care Coordination • Helping to establish medical home • Assisting client with scheduling and attending healthcare appointments • Transportation Assistance • Assisting client with completion and renewal eligibility benefits • Providing health related resources
ALAS	Enabling Services: <ul style="list-style-type: none"> • Health Navigation Assistance • Health Education Classes • Transportation Assistance
Behavioral Health & Recovery Services (BHRS)	1. Homeless Care Coordination (HCH)
	2. Homeless Engagement Assessment and Linkage (HEAL)
	3. El Centro Substance Use Services for Farmworkers and their Dependents
Daly City Partnerships* (12/01/2022 to 12/31/2023)	<ul style="list-style-type: none"> • Expanding COVID-19 Vaccinations (ECV). Limited term contract awarded for special projects.
Life Moves	Enabling Services: <ul style="list-style-type: none"> • Medical Care Coordination • Health Insurance Assistance • Transportation Assistance • Assisting clients with scheduling and attending healthcare appointments
Public Health Policy and Planning (PHPP)	Primary Care: <ul style="list-style-type: none"> • Mobile Clinic • Street & Field Medicine
	Alcohol and Other Drug (AOD) Services. Under this contract the HCHF Program funds 1 position on PHPP’s case management team. The total contract amount is \$392,500 for a period of 11/2020-12/31/2023. Services provided are as follows: <ul style="list-style-type: none"> • Counseling • Referral to services • Case management
PHPP ARPA Expansion (7/1/2022 – 3/31/2023)	American Rescue Plan Award (ARPA)*: <ul style="list-style-type: none"> • Expansion of services through addition of new staff
Puente	Enabling Services: <ul style="list-style-type: none"> • Medical Care Coordination • Health Insurance Assistance • Transportation Assistance

Puente* (12/01/2022 to 12/31/2023)	<ul style="list-style-type: none"> Expanding COVID-19 Vaccinations (ECV). Limited term contract awarded for special projects.
Saturday Dental Clinic	Dental Services
Sonrisas	Dental Services

Respectfully,

Gozel Kulieva
Management Analyst
Healthcare for the Homeless and Farmworker Health Program
gkulieva@smcgov.org



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

FROM: Meron Asfaw, Community Program Coordinator

DATE: August 10th, 2023

SUBJECT: HCH/FH Program Contractors and MOUs Status Update - July 2023

I am writing to provide you with a comprehensive update on the status of the contractors and MOUs associated with the HCH/FH program. The HCH/FH program has contracted with several County departments and community-based organizations to offer primary care, behavioral health, enabling, and dental services to people experiencing homelessness, farmworkers, and their dependents. Please find below a detailed description of each contractor's status update for July 2023:

- 1. Abode Services:** Abode Services has been conducting robust outreach efforts and exploring creative ways to engage newly housed patients and referral agencies. They have also received referrals from within the program. Please find a summary of Abode's contract performance as of July 2023 below:

Services (Contract summary)	Target	Number of Clients Served to Date (July 2023)	Contract Performance
<ul style="list-style-type: none"> • Medical Care Coordination • Helping to establish medical home • Assisting client with scheduling and attending healthcare appointments • Transportation • Assisting client with completion and renewal eligibility benefits • Providing health related resources 	100 clients	64 clients	64%

- 2. Ayudando Latinos a Soñar (ALAS):** ALAS and Health Coverage Unit (HCU) have been collaborating to enroll clients into health coverage. The waiting list has been addressed by the HCU staff. ALAS and HCU are working together to refer new clients smoothly. Despite a decrease in farmworkers in the field due to weather, ALAS anticipates an increase in the coming months. Below is a summary of ALAS's contract performance as of July 2023:



Services (Contract summary)	Target	Up to Date	Performance
Health Navigation	200	131	65.5%
Health Education Classes	50	21	42%
Transportation	120	9	7.5%
Staff Professional Development	1	0	0

3. Behavioral Health & Recovery Services (BHRS): BHRS provided a quarterly report, and below is the summary and performance of the three programs/MOUs under BHRS:

3.1 HCH: Here is a summary of quarter 2 contract performance for Behavioral Health Care Coordination

Contract Goal	Quarterly Report (Q2)	Year-to-date total	Contract Performance (Year-to-date)
150 unduplicated individuals annually receive behavioral health services	41	92	61%
Over 800 visits annually	331	617	77%

BHRS is providing care coordination services, both in person and via telehealth, with the goal of delivering behavioral health services to a minimum of 150 unduplicated individuals experiencing homelessness annually, comprising over 800 visits. The quarterly report provides an update on the progress made towards this goal.

The number of unduplicated homeless individuals served during this quarter was 41, with a year-to-date total of 92. This indicates progress towards the goal of reaching 150 unduplicated individuals annually.

The number of encounters provided during the quarter was 331, with a year-to-date total of 617. This shows ongoing engagement with individuals in delivering behavioral health services.

100% of unduplicated homeless individuals received a behavioral health screening assessment, ensuring that all individuals accessing the services were assessed for their behavioral health needs.



100% of unduplicated homeless individuals served were documented as having a behavioral/mental health issue, highlighting the importance of providing targeted care to address their specific needs.

Regarding the specific objectives and outcomes:

- Percent % of unduplicated homeless individuals that received an individualized care plan and participated in their plan year to date was 96%. This indicates a high level of engagement and collaboration with individuals in developing and implementing their care plans.
- Percent % of unduplicated homeless individuals that completed their care coordination plan year to date was 58%. While there is room for improvement, over half of the individuals have successfully completed their care coordination plans.
- The number of patients who received behavioral health coordination services and attended at least one scheduled appointment was 58%. This highlights the importance of ensuring individuals follow through with their appointments for effective care coordination.
- The number of unduplicated homeless individuals that established a medical home (minimum two completed visits for primary medical care and/or behavioral health services) year to date was 21. This demonstrates progress in connecting individuals with consistent and ongoing primary healthcare.
- 36 patients were referred/connected to behavioral health treatment services, showing collaboration and successful referrals to ensure individuals receive the necessary specialized care.
- 11 patients were referred to ACCESS for behavioral/mental health treatment services during the quarter, with a year-to-date total of 30. This reflects consistent referrals and collaboration with other providers for comprehensive care.

Challenges and concerns identified:

- Difficulty in contacting clients by phone and locating them in person poses a challenge to providing effective behavioral/mental health services coordination.
- An emerging trend related to homelessness is the concern over access to housing and individuals expressing a preference for non-congregate shelters.
- One successful encounter involved connecting a client to primary care through the Homeless Care Hub (HCH). The success of this encounter can be attributed to the client's improved access to primary care, aided by transportation assistance provided by the HCH.
- A challenge identified is the lack of phone access for clients, hindering communication and follow-up with providers. Finding alternative means of communication is necessary to overcome this challenge.
- No income or revenue was reported for services provided via the contract during this quarter.
- No programmatic issues or staffing changes were reported that would impact service provision.
- Assistance requested includes funding for water, hygiene kits, and snacks for homeless individuals.

The report highlights the positive outcomes achieved in providing behavioral/mental health services coordination to homeless individuals, including high rates of engagement, successful referrals, and the establishment of medical homes. However, challenges such as



communication barriers and housing access need to be addressed to further improve the provision of services.

3.2 HEAL: Here is the summary of quarter 2 report for HEAL clinicians

Contract Goal	Quarter 2 report	Year-to-date total	Contract Performance
150 unduplicated	35	72	48%
800 visits	154	242	30%

During this quarter, the provision of behavioral/mental health services to seriously mentally ill (SMI) homeless individuals showed positive outcomes and some areas for improvement. The HEAL program's flexibility in accommodating clients' needs and reducing barriers to access received positive feedback. Collaboration between behavioral health, physical health, and AOD services was effective in addressing the holistic needs of clients with comorbid substance abuse and mental health issues. Improved referrals from community partners who gained a better understanding of the program were noted.

However, challenges were observed in engaging clients with SMI in therapeutic services due to lack of insight and delusional tendencies. Community partners' limited understanding of SMI resulted in a lack of trauma-informed approaches and potential distrust. Additionally, accurately assessing the needs of SMI clients posed difficulties due to unfounded fear.

Emerging trends and concerns related to homelessness include Substance Use Disorder as a significant barrier to therapy and willingness to seek shelter. Reluctance to enter shelters was noted due to loss of autonomy and perceived lack of care by shelter staff. The intersection of mental health, homelessness, and the criminal justice system led to repeated interactions with the police and challenges in continuity of care.

Successful encounters with homeless individuals accessing primary health care were reported, such as increased awareness through reading reference books on treatment, leading to subsequent visits to dentists and primary care providers. Connecting clients with supportive services like appointment scheduling and transportation facilitated access to dental and medical care.

Challenges regarding access to care for homeless individuals included clients with Substance Use Disorder tending to miss appointments for medical or mental health care. Negative language and attitudes from some community partners impacted the therapeutic relationship and client trust.

No income or revenue was reported during this quarter for services provided via contract.

Programmatic issues that might impact providing services include the need for additional clinicians, particularly Spanish-speaking clinicians, in the Half Moon Bay area to ensure equitable access to services. Dedicated interpreters for monolingual clinicians were requested to support Spanish-speaking clients.



Assistance requested from HCH/FH includes Motivational Interviewing and Cognitive Behavioral Therapy (CBT) trainings on the Learning Management System (LMS). Workshops for collaborating staff from multiple agencies to learn best practices in working with mental illness and substance abuse disorders were also sought. Basic training on mental illness to improve understanding and engagement with clients with mental health issues, especially those with SMI, was requested to enhance service provision.

3.3 EI-Centro

Contract Goal	Quarter 2 report	Year-to-date total	Contract performance
SUD Case management for 30-35	2	5	17%-14%

- The Quarter 2 report for the Substance Use Services for Farmworkers and their Dependents contract highlights both progress and challenges. During this quarter, 2 unduplicated individuals received co-occurring substance use case management screenings, with a total of 5 individuals assessed year to date. Referrals to AOD Outpatient services were successful for 8 individuals this quarter, and a total of 13 individuals were referred year to date. However, no referrals were made to AOD Inpatient services or Mental Health services (BHRS) this quarter or year to date, prompting the need for further investigation into potential barriers.
- The contractor conducted 40 psychoeducation classes during this quarter, a positive step in raising awareness about substance use and related issues among the target population. Nevertheless, staffing challenges posed difficulties in implementing planned activities and maintaining consistent outreach efforts. Engaging with homeless individuals at Coasthouse and providing services at the office for farmworkers have been successful strategies, while challenges in establishing consistent outreach or groups at farms require immediate attention and resolution.
- The report identifies transportation and shelter availability as major concerns expressed by farmworker/homeless individuals, necessitating collaboration with relevant agencies to address these crucial needs. Although no specific successful encounters were reported during the quarter, increased engagement in SUD services is commendable. However, attendance issues underscore the need for ongoing efforts to improve service utilization.
- Access to care remains a significant challenge due to the lack of available housing and shelter for farmworker/homeless individuals. Collaborating with housing agencies will be essential to finding solutions and ensuring care access is not hindered by these challenges.

The Quarter 2 report emphasizes staffing challenges have had a notable impact on outreach and service consistency. Addressing these issues should be a priority to optimize program effectiveness. The Quarter 2 report provides valuable insights into the progress and challenges of the Substance Use Services for Farmworkers and their Dependents contract. While there have been positive developments, addressing staffing challenges, consistent outreach, and access to housing and shelter are critical areas for improvement. By focusing on these aspects,



the program can better achieve its goal of providing essential substance use services to the farmworker/homeless population in Half Moon Bay area. Regular monitoring and support from the contract monitor will be crucial in ensuring the program's success.

- 4. LifeMoves:** LifeMoves has been supporting the street medicine team, and communication between the two teams is excellent. Here is the contract performance as of July 31, 2023:

Service	Target	Up to Date	Performance
Medical Care Coordination	400	272	68%
HI assistance	75	47	62%
In-person visits with SMMC, BHRS, and Mobile Clinic	100	140	140%
In-person visits with Street Medicine (unduplicated)	100	85	85%
Telehealth visits	20	13	65%

- 5. Public Health Policy & Planning (PHPP):** The street medicine team has started providing services near SFO Airport once a month as a pilot program to identify needs. However, they found fewer patients this month and plan to try a different time next month for better reach. The Street Medicine will also be at the HMB library every other week to provide primary care services. The Mobile Clinic is exploring new sites, but implementation may take time. The PHPP team has requested winter supplies for patients during the upcoming winter, and HCH/FH staff will work together to identify the necessary supplies.

- 6. Puente:** Puente sent a quarterly 2 report, and below is the summary of the report.

Service	Target	Q1	Q2	Year-to-date total	Contract performance
Care Coordination (CC)	200	65	34	99	49.5%
Health Insurance Assistance	160	52	54	106	66.3%

Performance Measures:

- Number of Unduplicated Farmworker Individuals Served: During Quarter 2, the Contractor provided services to 88 unduplicated farmworker individuals, contributing to a year-to-date total of 205 individuals served.
- Number of Unduplicated Farmworker Individuals that Received Care Coordination Services: The Contractor offered care coordination services to 34 unduplicated farmworker individuals during the reporting period, making the year-to-date count reach 99 individuals.



- Percentage of Farmworker Individuals and Their Dependents Connected to County Health: Approximately 67% of farmworker individuals and their dependents were connected to county health services, including behavioral, dental, primary, and Field medicine, during Quarter 2.
- Number of Unduplicated Farmworker Individuals Assisted with Health Insurance Application: The Contractor assisted 54 unduplicated farmworker individuals with health insurance applications in Quarter 2, resulting in a year-to-date count of 106 individuals.
- Number of Health Insurance Applications Submitted: During the quarter, the Contractor submitted 43 health insurance applications, with the year-to-date total reaching 82.

Program Highlights:

- What is Working Well: The Community Development team's ability to offer appointments both in person and over the phone has been successful, with most participants opting for phone appointments. Building a strong relationship with Coastside Clinic's new manager, which facilitated referrals and streamlined the process for participants.
 - What is Not Working Well: The recent updates and changes to health insurance enrollment systems presented challenges for the Community Resource Navigator. Although the team managed the changes well, there was a learning curve that still requires attention.
 - Trends and Emerging Concerns: Providing financial assistance to local farmworkers impacted by winter storms highlighted the struggles faced by low-income farmworker households in meeting monthly expenses.
 - Successful Encounter: The Contractor assisted a participant in enrolling his daughter in school by providing health insurance enrollment support and facilitating access to required vaccines through Coastside Clinic. The participant's daughter was able to start school promptly.
 - Challenges Regarding Access to Care: There is a dental waitlist with 28 participants, underscoring the need for improved access to dental care for farmworkers.
 - Income or Revenue Received: No income or revenue was reported for services provided via the contract during Quarter 2.
 - Programmatic Issues: Staffing changes included Laura Rodriguez's departure from the Community Development team and the addition of three new Community Resource Navigators.
 - Assistance from HCH/FH: No specific help or assistance from HCH/FH was requested by the Contractor.
 - Conclusion: The Contractor's performance during Quarter 2 demonstrated progress in reaching the contract's objectives, including providing care coordination, health insurance assistance, and improved access to county health services for farmworkers and their dependents. The challenges encountered were effectively managed, and the Contractor's efforts continue to positively impact the target population's healthcare access and overall well-being.
7. **Sonrisas:** Sonrisas provided dental services at Puente but had to move to the La Honda Puente's office due to space constraints. They are currently experiencing Wi-Fi issues at the new location, and HCH/FH staff is exploring possible county support.
8. **Saturday Dental Clinic at Coastside Clinic:** HCH/FH staff met with the dental clinic and discussed the possibility of increasing dental providers and expanding the Saturday



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
www.facebook.com/smchealth

dental clinic. The dental clinic mentioned that they are currently in the process of hiring additional staff.

ALAS is referring patients to the Saturday dental clinic, and HCH/FH have collaborated to streamline the referral and communication process since the clinic started in June 202. However, the ALAS team changed the person managing the referral spreadsheet. As a result, HCH/FH, the dental team, and ALAS met to discuss the referral and communication process. Both ALAS and the dental team discussed ways to improve communication and efficiently refer clients for the once-a-month Saturday dental clinic. This meeting will continue every three months to check in and discuss the program's progress