



Health Care for the Homeless (HCH) Governance Structure

SF Health Commission October 5th, 2021

SFDPH Project Team for Q&A:

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Compliance Issue Review



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- An audit of the San Francisco Health Care for the Homeless (HCH) federal grant found on February 25th that SFDPH does not conform with all current HCH governance structure requirements
- On September 21st, SFDPH presented a proposal to the Health Commission to form a San Francisco Health Care for the Homeless Co-Applicant Board
 - Co-Applicant Boards are an option defined in the federal grant legislation that public entities may establish to meet governance requirements in collaboration with the public entity
 - A Co-Applicant Board would allow the federal funder's goals of patient input into governance decisions and specific, monthly HCH program oversight to be met while recognizing that public entities often have specific fiscal and personnel authorities that cannot be delegated

HCH Co-Applicant Board Overview



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- Proposed structure of the HCH Co-Applicant Board:
 - Eleven voting members, initial board appointed by the Director of Health
 - One ex officio non-voting member as the Director of Health’s designee
 - The majority of voting members shall be individuals who are, have been, or will be served by the HCH Program (“Consumer Members”)
- Major responsibilities of the HCH Co-Applicant Board include:
 - Review of HCH program budgets and priorities
 - Develop and review Quality Improvement / Quality Assurance program
 - Recommend the HCH Program Director to the Director of Health
 - Conduct long-term strategic planning for the HCH Program
 - Hold meetings with quorum in every month

HRSA Requested Change to Bylaws



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- On September 30th, the HRSA federal HCH Project Officer shared feedback on the draft documents and requested one change in the draft Bylaws
 - Article IV, Section 2, Item D on page 6 of the Bylaws has been revised on October 1st, 2021 to remove the three sentences noted below
 - **Omitted:** “The Secretary shall forward a list of proposed members selected by the CAB to the Director of Health for ratification within 10 business days. If the Director of Health fails to ratify or reject the member selection within 10 business days, the member shall be seated. If the Director of Health rejects any proposed member, then the CAB shall recommend a replacement by the same process described in this Article IV, Section 2, until such seat is filled.”
 - The DPH Director’s Office and Office of the City Attorney are supportive of this change.

Health Commission Q&A – Part 1



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- What is the integration with DPH (i.e. budget, data support):
 - DPH staff currently perform many reporting functions for the HCH grant and will expand this work to support the new Co-Applicant Board
 - DPH will provide the budget for any meeting expenses and will provide data support by producing presentations for the HCH Co-Applicant Board
 - Resources already committed to HCH administration include:
 - Primary Care analyst time (estimated 0.4 FTE)
 - Primary Care manager time (estimated 0.1 FTE)
 - IS analyst project time (estimated 0.3 FTE)
 - Grant accountant time (estimated 0.1 FTE)
 - Ambulatory Care/DPH leadership support (estimated 0.1 FTE)
 - DPH is preparing to expand the FTE dedicated to this project by up to 1.0 FTE

Health Commission Q&A – Part 2



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- The DPH Director appoints the members – do people apply and if so, what is the process?
 - There will be an application process. In the future, the Co-Applicant Board members would manage their own future recruitment and selection as described in the draft Bylaws.
 - For the startup, the DPH Director would appoint members who have been selected through an application process. The current plan is:
 - Recruitment for six patient members will initially be conducted by an outreach email from the Primary Care Patient Experience Lead to all of the members of our Patient Advisory Councils
 - Recruitment for five non-patient members will be conducted through targeted outreach to similar councils, boards, and professional associations

Health Commission Q&A – Part 3



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- Does the commission have any role in this organization once the board convenes?
 - The Director of Health will provide updates to the Health Commission as part of the Director's Updates when there are notable policy recommendations or concerns from the Co-Applicant Board
 - Health Commissioners are welcome to request either a joint annual meeting or a presentation to receive updates from the Co-Applicant Board
- Any reports or oversight going forward?
 - The Bylaws and Co-Applicant Agreement do not currently detail any reports or oversight, beyond the functions the Health Commission already holds
 - We can build in reporting to the Health Commission as desired

Health Commission Q&A – Part 4



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- Will there be a representative from the Health Commission on the board?
 - The current proposal does not include a representative from the Health Commission
 - Nothing in the federal HRSA regulation or Compliance Manual prohibits representatives or appointed seats from other bodies, as long as the individual is not a City employee and completes the application steps
 - The Health Commission may request reserving an appointed seat for a Health Commissioner. The Office of the City Attorney will need to advise on whether this could be one of the five non-consumer seats or an added ex officio non-voting seat.

Q&A



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- Thank you again for your time and attention
- Please let us know if you have any additional questions at this time