

**Sacramento County Department of Health Services
Health Center Co-Applicant Board (CAB)**

Meeting Agenda

May 19, 2023 / 9:30 AM to 11:00 AM

Meeting Location

Either *by Zoom*: To see/share documents on the screen, go to

<https://www.zoomgov.com/j/1618897122?pwd=MWdoR2JURFVUQUtHbU4yUW5oRklnUT09>

Meeting ID: 161 889 7122

Passcode: 153371

One tap mobile

+16692545252,,1607428658# US (San Jose)

+16692161590,,1607428658# US (San Jose)

Dial by your location

+1 669 254 5252 US (San Jose)

+1 669 216 1590 US (San Jose)

+1 551 285 1373 US

Or *in Person*: Community Room 2020 at 4600 Broadway / Sacramento, CA

- The Community Room 2020 is easily accessible without staff/security needing to let you in. It is at the top of the back stairs (near the Broadway entrance, not the garage entrance).
- CAB members: please RSVP at least 24 hours in advance to Dr. Hutchins at HutchinsS@saccounty.gov for staff to prepare you a packet if you wish to attend in person.

Topic
Opening Remarks and Introductions – <i>Jan Winbigler, Chair</i> <ul style="list-style-type: none">• Roll Call and welcoming of members and guests• *Review and approval of 04/21/23 CAB meeting minutes
Brief Announcements – <i>All</i> <ul style="list-style-type: none">•
Health Resources and Services Agency (HRSA) Project Director Update – <i>Dr. Mendonsa</i>
Medical Director Update – <i>Dr. Mishra</i>
Quality Improvement and Compliance – <i>Dr. Hutchins</i> <ul style="list-style-type: none">• 2023 QI Plan Monitoring Report• 2022 QI Plan Final Monitoring Report• Trends in Grievances – Q1 for 2023• No Show Report – Q1 for 2023
CAB Governance <ul style="list-style-type: none">• Committees Updates to CAB – Committee Chairs<ul style="list-style-type: none">○ Clinical Operations Committee – <i>DEFERRED</i><ul style="list-style-type: none">▪ Committee did not meet in May.

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- Finance Committee – *Ms. Bohamera*
 - April Financial Status Summary
 - Grant updates
- Governance Committee – *DEFERRED*
 - Committee still on hiatus to participate in Strategic Planning
- Strategic Planning Ad Hoc Committee – *Ms. Fryer*
 - Brief update on progress

June Monthly Meeting Items – All

- HRSA Project Director Report
- HRSA Medical Director Report
- Committee Updates
 - *Policy and Procedure Review: TBD
 - Program Review: TBD
 - May Financial Status Report
 - Recruitment and Training Updates
 - Strategic Planning – Full proposed *2024-2026 Sacramento County Strategic Plan*

Public Comment Period – *Ms. Fryer, Vice-Chair*

Closing Remarks and Adjourn – *Jan Winbigler, Chair*

Next Meeting: Friday, June 16, 2023 / 9:30-11:00 AM

*Items that require a quorum and vote.

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**Sacramento County Department of Health Services
Health Center Co-Applicant Board (CAB)**

Meeting Agenda

April 21, 2023 / 9:30 AM to 11:00 AM

Meeting Location

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CAB Members: Elise Bluemel, Suhmer Fryer, Nicole Miller, Jan Winbigler, Paula Lomazzi,
Laurine Bohamera

SCHC Leadership: Sharon Hutchins, John Dizon, Susmita Mishra, Andrew Mendonsa

SCHC Staff: Robyn Alongi, Zack Staab

Community Members: Belinda Brent

Topic
Opening Remarks and Introductions <ul style="list-style-type: none"><i>Chair Winbigler started the meeting and performed the roll call.</i>
Review of Minutes <ul style="list-style-type: none">Review of 03/17/23 CAB meeting minutes<ul style="list-style-type: none"><i>Chair Winbigler asked members if they would like to make any changes to the minutes as proposed.</i><i>Ms. Bluemel made a motion to approve the 03/17/23 meeting minutes. Ms. Lomazzi seconded the motion.</i><ul style="list-style-type: none"><i>Yes votes: Elise Bluemel, Suhmer Fryer, Nicole Miller, Jan Winbigler, Paula Lomazzi, Laurine Bohamera</i><i>No votes: None</i>
Brief Announcements <ul style="list-style-type: none"><i>Mr. Dizon announced that Ms. Callan has taken over Ms. Galindo's former position at the Health Center. Mr. Dizon believes that he has someone lined up to take Ms. Callan's old position.</i><i>Dr. Mendonsa reported that the contract with SCOE has almost been completely executed (signed). The center is waiting for a few more people to sign the document. This does not change much, Dr. Mendonsa reported, except for potentially giving the center a little more security when talking with HRSA.</i>
Health Resources and Services Agency (HRSA) Project Director Update <ul style="list-style-type: none"><i>Dr. Mendonsa gave kudos to Dr. Hutchins and the entire refugee team, who were recently featured in Sacramento County's 2022 Annual Year in Review newsletter.</i><i>The Health Center is still at a standstill with HRSA regarding the approval of additional school-based mental health sites. The center has not been made aware of what the</i>

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holdup is from HRSA. SCHC leadership will be meeting with HRSA soon to hopefully find a resolution in the near future.

- *There will be another weekend clinic on April 22, 2023. The weekend clinic this time will be focusing on women's health.*
- *All growth requests are currently still intact. Dr. Mendonsa reported that the county appears to be facing headwinds regarding financial stability. In the meantime, Mr. Dizon and his team are making sure that the center is not operating beyond its means.*
- *The administration team is on track to move to 711 G by June 30, 2023. SCHC leadership will be having discussions to determine how to best use the space at 4600 Broadway after administration vacates.*
- *The Health Center is continuing to recruit for positions all across the clinic.*
 - *Dr. Mendonsa reported that Dr. Hutchins made an offer to a candidate for Sr. HPC in the refugee department. There were many promising candidates who applied for the position. Dr. Mendonsa believes the chosen candidate will have a positive impact on the clinic, given their previous experience. Access and panel management continue to be an important topic at the Health Center. The center, Dr. Mendonsa said, needs to look at panel management in order to make sure their panels meet industry standards and are conducive to improving access. Dr. Mendonsa clarified that access, in this context, refers to a patient seen by a provider in a timely manner.*
- *The first of several panel management discussions has been scheduled for April 25, 2023. This discussion will include consultants, key eldership, and physicians from various departments at the Health Center.*
- *The University of the Pacific (UoP) and SCHC had an in-person meeting on April 11, 2023, to discuss the specifics of their collaboration. A key objective of this meeting was to consider various financial models that regulate how UoP interacts with the Health Center.*
 - *Family medicine will move to the new facility if everything goes well with the UoP collaboration.*

Medical Director Update

- *Dr. Mishra started her update by repeating what Dr. Mendonsa said in his report, that improving access at the Health Center is a top priority.*
- *The center is currently short of providers. Dr. Mishra stressed that the providers are not leaving because of something the Health Center did wrong, but rather, they are leaving to pursue a specialty.*
 - *Dr. Mishra is looking to bring in providers from other places, including a SPIRIT volunteer to help with Family Medicine.*
 - *One way the Health Center has been able to recruit is through the School of Nursing (SON) program. The HC has been able to recruit 2 family nurse practitioners and 1 mental health practitioner using the program.*

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- *The weekend clinic on April 22, 2023, will focus on women and children, cervical cancer screening, and well-child visits. In addition, SCHC's registered dentist in an alternative practice will be available to provide basic dental services.*
 - *The next weekend clinic will be on June 3, 2023. The June 3 weekend clinic is set to focus on diabetes and Medicare adult wellness.*
 - *The weekend clinic on July 15 will feature the mammogram van returning to the Health Center. Additionally, there will be a Pap smear and cervical cancer screening clinic.*
- *Dr. Mishra explained that the Pfizer and Moderna monovalent Covid-19 vaccinations are no longer being offered. The recommendation is that anyone who has received a monovalent vaccine should get a bivalent version of the Covid vaccine.*
 - *In the clinic, they are working to restart scheduling for Covid-19 vaccinations and to get on track with the new recommendations.*
 - *The Johnson and Johnson COVID vaccine is going away altogether starting May 6, 2023.*
- *Dr. Mishra discussed potentially dedicating the street medicine van or rooms in the van to Nora "Aaron" Washington, a former CAB member. SCHC needs to look carefully at the County process to name an asset.*

Quality Improvement and Compliance – DEFERRED

CAB Governance

▪ **Report from Committees**

- **Clinical Operations Committee**
 - *The Clinical Operations Committee did not meet.*
- **Finance Committee**
 - *Ms. Bohamera presented for the Finance Committee, highlighting the following points:*
 - *SCHC's clinical budget spending is on track, and reimbursements are higher than expected.*
 - *It is anticipated that the clinic will require only around \$2 million of the county general fund money initially budgeted for \$3 million.*
 - *Next year's budget is on track.*
 - *SCHC is submitting a proposal for a new grant that aims to extend existing school-based mental health sites to include primary health services.*
 - *Dr. Hutchins explained why CAB members are being asked to vote on the PP-11-01 Sliding Fee Discount Program again after already voting on the document in a previous meeting. The PP-11-01 Sliding Fee Discount Program has been updated to reflect accurate pricing from Quest Diagnostics, which is why CAB members are being asked to vote again.*
 - *Ms. Bohamera made a motion to approve the proposed revision to the PP-11-01 Sliding Fee Discount Program. Ms. Winbigler seconded the motion.*
 - ✓ *Yes votes: Elise Bluemel, Suhmer Fryer, Nicole Miller, Jan Winbigler, Paula Lomazzi, Laurine Bohamera*
 - ✓ *No votes: None*
 - *Ms. Bohamera reported that there were no findings or issues related to the 2022 Federal Fiscal Audit. Ms. Alongi showed the report on the screen, while Dr. Hutchins explained it, for CAB members to perform a proper review.*
 - *Ms. Bohamera made a motion to approve the 2022 Federal Fiscal Audit, which was seconded by Ms. Bluemel.*
 - ✓ *Yes votes: Elise Bluemel, Suhmer Fryer, Nicole Miller, Jan Winbigler, Paula Lomazzi, Laurine Bohamera*

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✓ No votes: None

- Governance Committee
 - *Ms. Winbigler encouraged board members to help with suggesting people who would make a good addition to the board.*
 - *Ms. Winbigler asked if anyone had any questions. Hearing none she opened the floor to Ms. Fryer for her report on the Strategic Planning Ad Hoc Committee.*
- Strategic Planning Ad Hoc Committee
 - *Ms. Fryer reviewed the priorities and strategies of the 2024-2026 Sacramento County Strategic Plan with board members.*
 - *Ms. Miller had a question about the strategies to reduce the cost of the Health Center, which were contained within the 2024-2026 Sacramento County Strategic Plan. She questioned why the plan included no specifics on what specific tools or methods would be used to reduce costs. Dr. Hutchins explained that, at this point in the process, the committee is asking CAB to approve the overall vision of the Strategic Plan.*
 - *There was a discussion between Dr. Mendonsa, Dr. Hutchins, and Mr. Bluemel over how detailed the Strategic Plan should be at this stage in the process, and how much of a role CAB should have in giving specific recommendations.*
 - *Ms. Winbigler noted that over the past year, she felt as though CAB has been spending a lot of time talking about how to improve access to healthcare. Ms. Winbigler went on to say that the proposed Strategic Plan appropriately summed up the improvements that CAB agreed were needed at the Health Center.*
 - *Dr. Hutchins asked CAB members to look at the last page of the Strategic Plan, specifically at the economic sustainability section. Dr. Hutchins pointed out that technologies and employee retention are important to the Health Center. She asked members to discuss these topics and come to a more unified opinion about them, specifically on whether or not technology should have its own section – either to embed "technology" in everything or pull it out on its own.*
 - *Ms. Miller made it clear that one aspect of technology she is concerned with is artificial intelligence. She wanted to make sure that the Health Center was cautious with this new technology. Dr. Mendonsa said there were no current proposals being made that include artificial intelligence.*
 - ✓ *Ms. Winbigler proposed that, rather than voting, CAB members make it known if they support or do not support the general direction of the 2024-2026 Sacramento County Strategic Plan.*
 - ❖ Supported: *Elise Bluemel, Suhmer Fryer, Nicole Miller, Jan Winbigler, Paula Lomazzi, Laurine Bohamera*
 - ❖ Not Supported: *None*

May Monthly Meeting Items – All

- HRSA Project Director Report
- HRSA Medical Director Report
- Quality: 2022 Final QI Plan Monitoring Report and 1st Quarter 2023 QI Plan Monitoring Report
- Compliance: Patient Safety & Grievance Summary
- Committee Updates
 - *Policy and Procedure Review: TBD
 - Program Review: TBD

**Sacramento County Department of Health Services
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|---|
| <ul style="list-style-type: none">○ April Financial Status Report○ Recruitment and Training Updates○ Strategic Planning – Full proposed <i>2024-2026 Sacramento County Strategic Plan</i> |
|---|

Public Comment Period

- | |
|--|
| <ul style="list-style-type: none">● <i>Ms. Fryer opened the floor to public comments.</i>● <i>No comments were offered.</i> |
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Closing Remarks and Adjourn – Jan Winbigler, Chair

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| <ul style="list-style-type: none">▪ <i>Chair Winbigler adjourned the meeting at 10:53 AM.</i> |
|---|

Next Meeting: Friday, May 19, 2023 / 9:30-11:00 AM

*Items that require a quorum and vote.

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HRSA Project Director Updates

May 19, 2023 CAB Meeting

- **Health Resources and Services Administration (HRSA) / Sacramento County Office of Education (SCOE) School Based Mental Health Updates.**
 - The Health Center continues to have communication with HRSA regarding our School Based Mental Health satellite sites on Sacramento Office of Education (SCOE) school sites.
 - We continue to work with HRSA to get proposed satellite sites approved.
 - A recent expansion grant opportunity to bring primary care services to a few school sites was not pursued due to internal decisions.
- **Weekend Clinics**
 - The Health Center continues to operate successful weekend clinics.
- **Health Center Growth Request**
 - Our requests continue to route as submitted. No red-lines have occurred as of this report.
- **Space/Staffing/Access Updates.**
 - Admin relocation approved to 711 G Street. Targeting a move before 7/1/23.
 - New SrHPC overseeing Refugee Clinic should be starting soon.
 - Beginning to look at filling the Program Planner position.
- **Access Project / Panel Size Workgroup**
 - Initial meeting held. Now in data collection and will meet again soon.
- **Key Visits / Health Center External Engagement**
 - Health Center hosted the UC Regents a few weeks ago which included the UC Chancellor, and several key stakeholders within the UC Davis and UCD Health systems. Regents heard from Health Center providers and were provided a tour. Also present were leadership from Sacramento County including the County Executive and members of the Board of Supervisors.
 - HRSA Project Director represented Health Center during the Behavioral Health Service's (BHS) Division's External Quality Review Organization Audit (EQRO). An audit was conducted on BHS to ensure compliance with state requirements. This was not an audit of the Health Center.
- **Miscellaneous**
 - DHCS to release Clinic Workforce Stabilization Retention Payments will be going out. Around 80 non-supervisor/management employees received \$1000.00 bonus payments. Huge thanks to John Dizon, Fiscal, and everyone involved for bringing this opportunity to a reality.
- **Contracts and New Program Exploration**
 - SCOE Contract was returned by SCOE Legal. We are reviewing.
 - University of the Pacific (UOP) Dental School has asked to pause exploration while they explore operation models to present. HC management team will be touring their San Francisco clinic on Monday.

Medical Director Report to CAB May 19, 2023

1. Programs

- a. *Adult (Internal Medicine and Nurse Practitioners)*: new providers from both programs coming to fill behind departing providers.
- b. *Peds*: no change in providers; working on MH clinician visits in foster clinic to be a separate billable service.
- c. *Family Medicine (FM)*: addition of UCD FM/Psychiatrist Dr. Kate Richards
- d. *Psychiatry*: losing UCD FM/ psychiatrist Dr. Rachel Robitz. She has agreed to work as County 'On Call' doc to continue primary care +psychiatry at L&F (and potentially Street Med psych).
- e. *Homeless Programs*:
 - a. Access to more rooms at L&F;
 - b. NP to work on Friday pm;
 - c. Working on acquiring a wound care NP.
- f. *Street Medicine*:
 - a. Close to finalizing which OTC and Rx meds to bring on van and the workflow;
 - b. Finalized workflow to dispense naloxone (Narcan); HHIP and HN contracts.

No Show Rates – Q1 2023 (01/01/2023 – 03/31/2023) Sacramento County Health Center

Department Name/Mode	Medi-Cal Patients			Healthy Partners Patients			Overall No Show Rate
	No Show Visits	Completed Visits	No Show Rate	No Show Visits	Completed Visits	No Show Rate	
ADULT MEDICINE	1,148	4,408	20.7%	227	1,135	16.7%	19.9%
In Person	1,047	3,502	23.0%	205	967	17.5%	21.9%
Telephone	101	899	10.1%	22	167	11.6%	10.3%
Video		7	0.0%		1	0.0%	0.0%
FAMILY MEDICINE	129	603	17.6%	2	31	6.1%	17.1%
In Person	122	571	17.6%	2	30	6.3%	17.1%
Telephone	7	31	18.4%		1	0.0%	17.9%
Video		1	0.0%				0.0%
PEDIATRIC MEDICINE	552	1,698	24.5%				24.5%
In Person	520	1,568	24.9%				24.9%
Telephone	32	130	19.8%				19.8%
BEHAVIORAL HEALTH SERVICES	142	366	28.0%	13	28	31.7%	28.2%
In Person	96	275	25.9%	10	18	35.7%	26.6%
Telephone	41	83	33.1%	3	10	23.1%	32.1%
Video	5	8	38.5%				38.5%
DENTAL	17	40	29.8%				29.8%
In Person	17	40	29.8%				29.8%
HOMELESS SERVICES	50	481	9.4%		4	0.0%	9.3%
In Person	50	434	10.3%				10.3%
Telephone		47	0.0%		4	0.0%	0.0%
MOBILE SERVICES	3	49	5.8%				5.8%
In Person	3	49	5.8%				5.8%
SPECIALTY SERVICES	299	1,181	20.2%	40	228	14.9%	19.4%
In Person	265	989	21.1%	40	191	17.3%	20.5%
Telephone	34	191	15.1%		37	0.0%	13.0%
Video		1	0.0%				0.0%
REFUGEE SERVICES	175	4,029	4.2%				4.2%
In Person	67	705	8.7%				8.7%
Telephone	106	3,314	3.1%				3.1%
Video	2	10	16.7%				16.7%

Q1: 2023 Summary of Patient Grievances

Grievances (from Health Plans or Independent Practitioner Organizations)

Category	Description	Examples	Number
Level I	Access challenges	Complaints about call center wait times; difficulty making an appointment	6
Level II	Disrespectful behavior or failure to follow clinical, operational or fiscal P&P	Delayed prescription refills; patient billed in error; unprofessional or disrespectful treatment of patients	1
Level III	Issues impacting patient safety, violating privacy laws, and/or involving possible litigation	Medication error; Needle stick/exposure; severe allergic reaction; HIPAA breach; severe bodily harm	0

2022 SCHC Quality Improvement Plan End of Year Monitoring Report

AIM: Population Health Outcomes

Category: Care Coordination

Goal 1: Improve care coordination of patients with high service utilization or who require service across systems

Objective 1: Improve coordination between SCHC and Emergency Departments to be able to follow up within 30 days with patients who have had an ED visit related to a mental health or substance use issue

QI Team discussed the lack of a communication system to alert SCHC of ED visits and decided to create a single phone line, email, and OCHIN pool for this purpose. The line was not set up or in use at year's end, but positions were identified to handle communications through these systems. The Team was still making progress at year's end.

Category: Clinical Performance Measures

Goal 1: Improve performance on select UDS and HEDIS quality measures (focused on those that signal a healthy start in life and those focused on secondary prevention of health issues prevalent among SCHC patients) and tackle racial

Objective 1: Improve chronic disease management and outcomes by achieving at least minimal performance level (MPL) for the following HEDIS measures

		Target	Q3	Source
HTN	Score on Controlling high blood pressure (in control)	55.35%	67.90%	HEDIS
DM	Score on HbA1c Control ($\leq 9.0\%$)	62.53%	56.10%	

Objective 2: Ensure that children have a healthy start in life by achieving at least minimal performance level (MPL) for the following HEDIS measures

		Target	Q3	Source
WCV	Wellchild visits for children 3-21	45.31%	38.40%	HEDIS
CIS	Childhood immunizations at two years	38.20%	22.20%	
IMA	Adolescent immunizations at 13 years	36.74%	35.40%	

Objective 3: Improve screening and treatment for depression by achieving at least the MPL for the following measures

		Target	Q3	Source
Dep Scr	Depression screening for adolescents/adults	NA	45.63%	UDS
Dep Plan	Depression follow up for adolescents/adults	60.0%	5.19%	
FUA	Follow up after hosp/ED visit for alcohol/drugs	21.31%	7.4%*	HEDIS
FUM	Follow up after hosp/ED visit for MH reason	53.54%	18.2%*	

*incomplete reporting

Objective 4: Reduce racial and ethnic disparities in the control of diabetes and hypertension (multi-year measure)

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