

Period	2
Current Month	August
Percentage of Year	17%

CAB Financial Report

Line Item	Budget	Current Month	Year to date	Encumbrance	Total (YTD+Encumbrance)	YTD	Notes
						Percentage (Total/Budget)	
Revenue							
Inter/Intrafund Reimbursements	\$9,525,910	\$72,380	-\$749,171	\$0	-\$749,171	-8%	
Intergovernmental Revenue	\$10,581,470	\$ 439,934	\$993,786	\$65,891	\$1,059,677	9%	
Charges for Services	\$52,000	\$ 8,474	\$9,348	\$1,233	\$10,580	18%	CMISP old pre-2014 service charges
Miscellaneous Revenue	\$17,368	\$ 70,507	\$70,507	\$0	\$70,507	406%	
				\$0	\$0		
Total Revenue	\$20,176,748	\$591,295	\$324,469	\$67,124	\$391,593	2%	
Expenses							
Personnel	\$11,261,103	\$ 826,047	\$1,286,942	\$0	\$1,286,942	11%	
Services & Supplies	\$10,314,243	\$ 2,495,779	\$805,326	\$697,902	\$1,503,228	8%	
Other Charges	\$449,477	\$ 58,675	\$71,928	\$404,000	\$475,928	16%	
Equipment	\$0	\$ -	\$0	\$247,076	\$247,076	0%	
Intrafund Charges (Allocation costs)	\$2,211,906	\$ 44,964	\$44,963	\$0	\$44,963	2%	
				\$0	\$0		
Total Expenses	\$24,236,729	\$3,425,464	\$2,209,159	\$1,348,978	\$3,558,137	9%	

GRAND TOTAL							
(Net County Cost)	-\$4,059,981	-\$2,834,170	-\$1,884,690				

2021 CAB Needs Assessment at Loaves & Fishes Sacramento County Department of Health Services Health Center Co-Applicant Board (CAB)

Why the needs assessment was conducted

A needs assessment at Loaves and Fishes (L&F) was conducted to better understand the needs of the community to inform the Sacramento County Health Center of what services would be most valued and utilized by the homeless and indigent people living near L&F.

Method

Sacramento County Health Center staff working at the clinic located at L&F randomly asked 25 people congregating at or near L&F to answer 18 survey questions. Those surveyed were not necessarily SCHC patients and were not being treated at the clinic when the survey was administered.

Staff surveyed respondents by verbally asking the questions on a written survey instrument. Surveys were conducted over the course of three months.

The needs assessment was not randomized nor is it a representative sample of the community or the homeless/unhoused population in Sacramento County.

Findings

Total respondents: 25

- Respondents reported medical problems including many issues we see in patients whether they are housed or not
 - 25 respondents reported 40 different medical problems
 - These included diabetes, cardiovascular disease, asthma, allergies, heart failure, hypertension, and many others
 - Traumatic injuries and skin issues were more common than we typically see in general primary care (25% of the medical problems in our needs assessment were either direct consequences of physical trauma or skin conditions exacerbated by living outdoors)
 - 8 individuals (33%) reported that their medical problems keep them from doing what they need to do (e.g. ambulate, go to work, accomplish their daily tasks)
- Nearly 50% of respondents reported having a 'mental health problem' -- this was left open to the respondent to interpret how to define 'mental health problem'
 - 9 individuals (36%) reported that their mental health problems "prevent them from doing things they want to do"
- 14 individuals (60%) reported recent or current substance use (alcohol, tobacco, or other drugs)

- Alcohol and tobacco were the most common, followed by meth and opioids
- When asked where they would go if they had a medical problem, the most common site was the "Hospital" or "ER" (11 individuals, or 44%)
 - 12 individuals (48%) reported having been to the ER for a medical problem in the past year
 - 4 individuals reported having had 3 or more ER visits in the past year
- Only 7 individuals (28%) reported having a primary care doctor
 - Those PCPs were from SCHC, SNAHC, WellSpace, the VA
- When asked what three services are most important to offer (each with more than 11 votes):
 - Drop-in appointments (rather than scheduled)
 - General/full-service primary care
 - Wound care were the priorities
 - Mental health care and STI testing & treatment also received several votes

Implications

The data shows a large unmet need for a primary care home for people experiencing homelessness. Accessibility of the clinic and providing general primary care seems to be the top priorities of those interviewed. The data also revealed a need for more targeted services to people with mental health problems and people with substance use disorders.

Solutions to some of the issues identified in the needs assessment are addressed in the strategic plan. The Sacramento County Health Center should implement the strategies identified in the strategic plan.

Priority 3, Strategy 2: Improve care to existing and/or assigned patients experiencing homelessness.

1. Expand services at L&F to including:
 - a) Dental services
 - b) Substance abuse services (including MAT), and
 - c) Behavioral health services
2. Place a Sacramento Covered staff member at Loaves and Fishes which will help to have people seen at L&F assigned to the SCHC thereby becoming their medical home.
3. Develop and implement a plan for utilization of the mobile medical van to provide services for the homeless population.

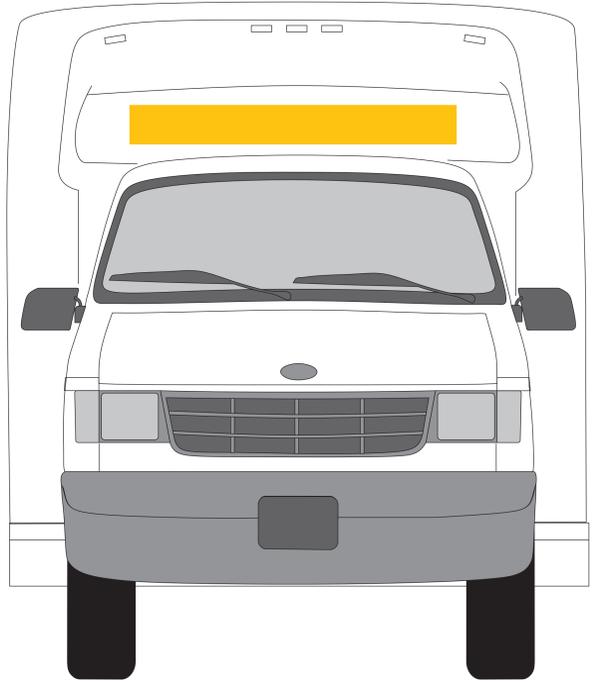
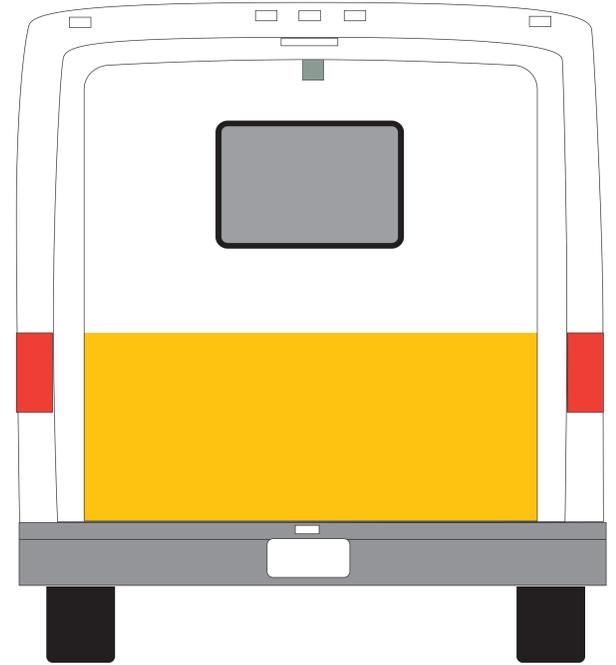
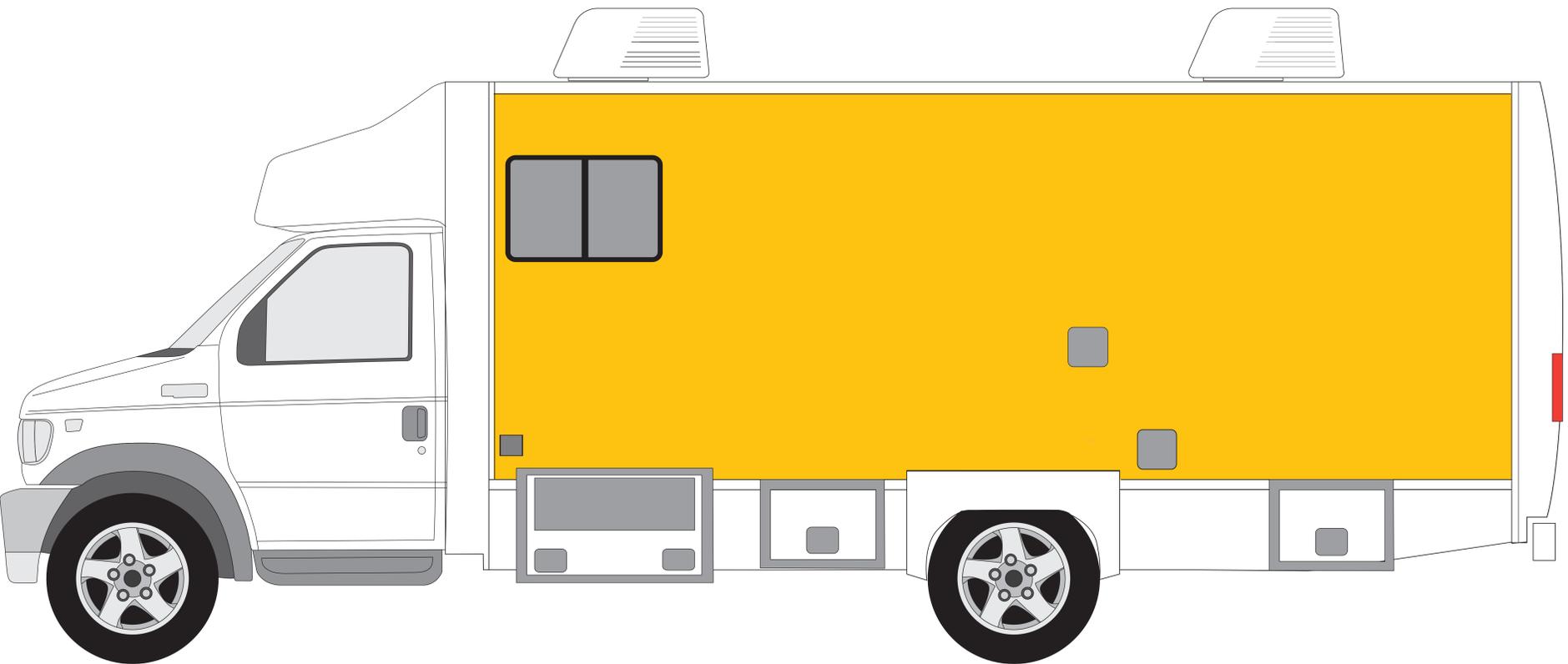
Priority 3, Strategy 3: Collaborate with community partners and resources to better serve the homeless population.

Work with community partners and the health plans to connect with assigned homeless patients to help them overcome barriers to accessing care, including an outstation unit to be placed at L&F which would help connect patients to a provider at 4600 Broadway.

Sacramento County Health Center

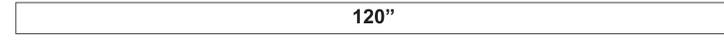


Sacramento County Health Center



Sacramento

MOBILE MEDICAL CLINIC



SACRAMENTO COUNTY HEALTH CENTER
Co-Applicant Board
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Part I: Vision for SCHC

Vision

Unparalleled experience as a trusted partner in health care for our Sacramento County community.

Mission

Provide high-quality, caring, and comprehensive healthcare services for our diverse Sacramento County community through partnering with patients, academic institutions, and community-based organizations.

Values

- Respect
- Compassion
- Learning
- Excellence
- Efficiency
- Accountability

Key Question: *How do we enhance our services from primary medical care to the care of the whole person care so that it improves quality of life but do it in a sustainable way? By sustainable, we mean:*

1. Have funds or can produce funds
2. Have the infrastructure (space and staff)
3. Cannot negatively impact our core- Call Center; timely specialty access; excessive workload

Original Programs for Health Center

- Internal Medicine/Nurse Practitioner
- Psychiatry
- Pediatrics
- Refugee Health programs

New Programs Since 2018

- Family Medicine-OB services
- Enhanced Healthy Partners specialty network, imaging and labs
- Care Management Program
- Loaves and Fishes satellite clinic- Primary Care, Psychiatry, Substance Abuse Prevention and Treatment (SUPT), Wound Care
- Pediatric Dental Program
- Foster Care clinic + Developmental Clinicians (child psychology, speech therapists)
- School Based Mental Health
- Complex Diabetes Management program
- Hypertension program
- Cervical Cancer screening clinics
- Sacramento Covered
- Legal Services of Northern California
- HEDIS Performance Measure Projects
- Behavioral Health Plan Contracts



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Soon

- Van
- Enhanced Care Management? - CalAim

In Discussion

- Obesity Clinic
- Transgender clinic
- Trauma Informed group counseling

What happened in the course?

- Identified fragile projects
 - FM
 - SMBH
 - Dental

Plan:

- Slow down!
 - Develop a strategic plan and work toward meeting goals

Part II: Updates

- Van logo/graphics
- DHA space
- Staffing
 - 2OA CC and 2RN Referrals (or where absolutely needed); temp help with County ARPA, MHSOAC
- Sacramento Covered Navigator at L&F

