

Sacramento County Public Health Advisory Board

Meeting Minutes

August 7, 2013, 12:00 – 1:30 p.m.

Primary Care Center

4600 Broadway

Sacramento, CA 95820

Conference Room 2020

Chair: Morgan Staines – Chair

Scribe: Mark Thorpe

Board Attendees: Morgan Staines, Adam Dougherty, Ana Estrada, Raquel Simental, Edward Lewis, Michelle Rivas, Raymond Wilson, Pheng Lee, Robert Meagher, Estella Geraghty

Board Members Excused: Marty Keale, Peter Simpson, Don McClurg, Blia Vang

Board Members Absent:

Guests: Sherri Heller (DHHS), Katherine McAulley, Marsha Joe, John Rodgers (Environmental Health Division Chief)

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Topic	Minutes
Welcome and Introductions	Meeting began with introductions at 12:10 p.m.
Minutes Review of June, 2013	Motion of approval carried over to September meeting.
Public and Primary Health Budget Update	<p>Marcia Jo – Health Program Manager: Primary Health Services</p> <ul style="list-style-type: none"> • Goal of the Department to be as transparent as possible as soon as possible about changes to Health Services in regards to the County Budget Process. • 2013-2014 Final Budget Hearings are scheduled for September 11th, 2013. • Estimating 9 Million dollars less in 2013-2014 due to Health Care Reform implementation. • Low Income Health Program has served over 13,000 people with current enrolment of 11,000 - 12,000 individuals. • Primary issue for ACA: Converting CMISP over to LIHP. LIP ends December 31st, 2013. • LIP enrollees will automatically convert to Medi-Cal on January 1st, 2014. • DHA Eligibility will undergo statewide major business changes as part of the mandatory expansion. • Changes will begin with Open Enrollment in October 2013 with lots of media coverage. • Counties will continue to be responsible for CMISP residual population. • Non-Citizens will be provided with emergency health service at clinics and required (within 3 days) to enroll in ongoing services. • CMISP changes: Noticed reduction of demand in CMISP due to other accessible options through LIHP. • Application process will be simplified to one page. • Notices will go out to CMISP enrollees regarding new coverage programs. • Proposing subtle changes to push patients to utilize various services that they are eligible for as a way to prevent a budget gap or cutting services. • Proposing having California Grantees present in the clinic lobby to enroll eligible patients. • DHHS hiring and training employees to assist with processing eligibility applications.

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	<ul style="list-style-type: none"> • Re: recruiting non-CA Covered patients, the priority is to work with California Covered enrollees first.
<p>Presentation: Strategic Planning toward Accreditation - Intro</p>	<p>Loriann DeMartini, PharmD - Deputy Director: Office of Quality Performance and Accreditation, California Department of Public Health</p> <ul style="list-style-type: none"> • Accreditation for Public Health is brand new. • Accreditation is the opportunity and the assessment of measuring ones performance against a set of nationally recognized, practice-focused and evidence-based standards. • Administered by the Public Health Accreditation Board (PHAB) • PHAB: Public Health Accreditation Board – Has the goal to improve and protect the health of every CALIFORNIAN by advancing the quality and performance of public health departments. • Broken into 12 Domains, Standards, Measures and Documentation. • Domains are based on the 10 Essential Public Health Services. PHAB adds two more: “Maintain Administrative and Management Capacity” and “Maintain Capacity to Engage the Public Health Governing Entity”. • Currently only two States with an accredited Health Department: Oklahoma and Washington. • Benefits: Facilitates quality improvement, Enhances relationships with partners, Increases accountability, Enhances credibility with internal and external stakeholders, and Promotes high performance. • Future Benefits: Streamline federal grant application process, Leveraging funding, Political support, and Attracting/Retaining Qualified Staff. • PHAB aims to have 60% of the U.S. Population served by an accredited agency by the year 2015. • Accreditation Process: Pre-application, Application, Document Selection and Submission, Site Visit, Accreditation Decision, Reports, Reaccreditation (5 years). • CDPH 2013 Goals: Complete PHAB Steps one through three, Prepare for PHAB site visit

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	<p>in 2014.</p> <ul style="list-style-type: none"> • Accreditation Readiness Team (ART) formed as a subcommittee of the CDPH Policy Committee. • Domain Teams & Team Champions for each of the 12 PHAB Domains: Multi-disciplinary membership, Identifying documentation, Facilitating site visits. • Values and Lessons from the Accreditation Process: Celebrate and model what works, Identify and value opportunities for improvement. • Application Prerequisites: Three documents: State Health Assessment (SHA), State Health Improvement Plan (SHIP), and Strategic Plan. • State Health Assessment (SHA) = Let's Get Healthy California Task Force Report (LGH) • State Health Improvement Plan (SHIP) = 39 measureable indicators that will make CA the healthiest state in the nation by 2022. • Strategic Plan = CDPH Strategic Map • CalPIM Network - CDPH based communication system to support LHDs • CalPIM Network Website: http://www.cdph.ca.gov/data/informatics/Pages/CalPIMNetworkResources.aspx • CDPH Office of Quality Performance and Accreditation (OQPA) Website: http://www.cdph.ca.gov/programs/Pages/oqpa.aspx • OQPA Email: OQPA@cdph.ca.gov

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Primary Health Services Division Update	<ul style="list-style-type: none"> • Carried over to September meeting.
Public Health Division Update	<p>Kate McAulley – Public Health Coordinator</p> <ul style="list-style-type: none"> • Update on West Nile Virus: 2 Cases reported: one maybe/is from last year. • Press release from Vector Control went out regarding newest case. • http://www.fightthebite.net/west-nile-virus-activity/ • Request to talk about Sexually Transmitted Disease next meeting.
Public Comments	None
Adjourn	Meeting adjourned at 1:40

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