COUNTY OF SAN LUIS OBISPO HEALTH COMMISSION

Minutes of Meeting

Monday, January 14, 2019 (County Board of Supervisors Chambers)

Members Present: Mary Jean Sage (Chair), Robert Campbell, Elisa Moylan, Catherine Shipp, Susan Warren, Candace Winstead, Jean Raymond, Tamar Sekayan

Members Absent: Jinah Byram

Staff Present: Penny Borenstein, MD, Theresa Miranda

Speakers: Elizabeth Merson, Michelle Shoresman, Joe Madsen, Donna Hayes, and Orlando Gallegos

Agenda Item	Discussion	Action	Who/When
1. Call to Order	Meeting called to order at 6:00 p.m. by Chair Sage.	Call to Order	Chair Sage
2. Approval of Minutes:	November 19, 2018 minutes were approved. December 10, 2018 minutes are to be revised to reflect no meeting will be held in February 2019.	November minutes approved, December minutes revised	MS/JR / All
3. Public Comment:	Chair Sage opened the floor to public comment with no response.		
4. Presentation: Spanish Flu	Elizabeth Merson, Public Health Emergency Preparedness presented a 100 Year Commemoration of Spanish Flu Pandemic. One of the most important advances is something that many of us take for granted as an annual ritual: the flu shot. SLO Public Health works year-round with partners in the healthcare, emergency management, public safety, and social services to develop plans and procedures to respond to a pandemic. Monitor health impacts from a range of events, including infectious disease, wildfires, and adverse weather events. Maintain a system for information exchange and public health and medical resource coordination Conduct enhanced surveillance during flu season to assess the health impacts. Pandemic Flu remains one of SLO County's top 3 identified health and medical hazards. Wash your hands. Wash your hands with warm, soapy water for at least 20 seconds. If soap and water aren't available, use alcohol-based hand sanitizer. Avoid touching your eyes, nose, and mouth. This helps prevent the spread of the virus. Avoid contact with people who are sick. This might mean you need to delay a visit or meet by phone or video chat instead. Get the flu shot. While the flu shot offers most protection if you get it early in the season, it's better now than never. The flu shot provides protection against multiple strains of flu, including those that may circulate later in the season. If you get a flu vaccine but still get the flu, you will most likely have more mild illness and less risk of serious complications. You can get your flu shot from your health care provider, at many local pharmacies, or at Public Health Department clinics. What should I do if I have the flu? Stay home. If you get sick with flu symptoms, in most cases, you should stay home and avoid contact with other people as much as possible. Rest, stay hydrated, and take temperature-reducing medicines (such as Tylenol or ibuprofen) as needed.	A copy of the Power Point presentation is filed with the official record of the meeting.	

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	Keep it to yourself. Wash your hands often and use a tissue to cover your cough or sneeze.		
	Avoid spending time with other people, especially those who are at risk for serious		
	complications of the flu. This may mean you need to delay a visit or a meeting.		
	Look out for signs that it may be more serious. In most cases, you do not need medical care		
	or prescription medicine to recover from the flu. However, some cases can be more serious.		
	See the symptoms described below for signs that you may need to see a health care provider.		
5. Presentation:	Michelle Shoresman, Division Manager, Health Agency presented the following:	A copy of the Power	
Care Coordination/	The Recuperative Care Program Concept specifically targets immediate needs of patients	Point presentation is filed with the official	
Continuum of Care/	being discharged from an acute hospital setting or emergency room due to homelessness and	record of the meeting	
Transitional Shelter and	requiring a variety of service needs with no placement options.		
Food	Based upon the Boston Health Care for the Homeless Program model		
	(https://www.bhchp.org/about-us), "whole person care".		
	Began on August 1, 2016 with new <u>24-hour services</u> located at the Maxine Lewis Memorial		
	Shelter (overnight center) located in the City of San Luis Obispo.		
	Low Income Health Program, Local Level Medi-Cal program, Affordable Car Act, Behavior		
	Health Integration Program, and Transitional Mental Health Association are some of the		
	programs available to the community. The many services of the Recuperative Care Program		
	(RCP) are the following:		
	 24-hour supervision of patients, meals, beds, showers, clothing 		
	 Transport/Accompany patient to pharmacy to obtain necessary medications and 		
	information - accuracy and response to denials.		
	 Transport/Accompany patient to all medical appointments – advocacy and 		
	ensuring all patient needs are addressed (beyond the "5 minute")		
	 Nursing education/support (18 hours per week) including: 		
	✓ Providing patient dosing instructions and set-up of patient medication		
	regimen;		
	✓ Review medication compliance and health issues with patients to ensure		
	patient understanding;		
	✓ Advocacy with healthcare professionals to ensure patient understanding		
	Donna Hayes, Behavioral Health Psychiatric Technician and Project Director for SLO-		
	HIP, presents the following:		
	San Luis Obispo Health Integrated Programs (SLO-HIP), operates a once a week clinic. The		
	clinic has a CHC nurse practitioner and medical assistant to assist the patients with learning		
	how to take care of themselves. The clinic can draw labs and assist with nutrition. The		
	program is only offered in SLO County and is a pilot program at this time. Funding for this		
	program is from a federal grant from the Substance Use and Mental Health Services		
	Administration (SAMHSA).		
	Joe Madsen presented the following on SLO-HUB:		
	SLO-HUB offers counseling and recovery services for homeless individuals experiencing co-		
	occurring menta health and substance abuse challenges. The program is a collaborative		
	between CAPSLO, Transitions Mental Health Association, and Restorative Partners and is		
	funded by Substance Abuse and Mental Health Services Administration. Onsite offices are		
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	available at 40 Prado which include Community Health Center nurse. The program has been
	operating for 15 months and is a 5-year grant.
	Michelle Shoresman, Division Manager, Health Agency presented the following:
	Recuperative Care Program Concept specifically targets immediate needs of patients being
	discharged from an acute hospital setting or emergency room due to homelessness, requiring a
	variety of service needs with no placement options. Project was originally a one-year pilot
	program and received funding for an additional year.
	Emilio Orlando, presented the following on Transitional Food and Shelter:
	Implements two complementary programs for the 80% of homeless that are the most
	vulnerable men, women, and family's w/children in our community. The population is mostly
	single men and women, fragile elders and homeless. The St. Williams and Dove Creek
	Church serve dinner, breakfast and a bag lunch. 8,025 meals have been served to date.
	Transitional Food and Shelter provide tiny houses and motel rooms if there is overflow.
	S.A.F.E. System of Care:
	Services Affirming Family Empowerment (S.A.F.E.), a System of Care (S.O.C.). A
	 community-based family-centered means of delivering and coordinating services for
	children and families in San Luis Obispo County.
	❖ The S.A.F.E. team is a means to access and coordinate intensive services and ensure
	case management.
	❖ It brings together the agencies that are relevant to a specific case, putting them
	together with the family that needs help, and talking about how they can all work
	together to provide the family with the support they need.
	❖ TFS currently has three families for which the S.A.F.E. System of Care provides
	support and direction and is an asset for these cases.
	❖ S.A.F.E does not serve the majority of Medically Fragile Homeless
6. Health Agency /	Penny Borenstein, MD, MPH, Health Officer/Public Health Director, provided an
Public Health Report	update:
	Community Health Improvement Plan (CHIP) a comprehensive and coordinated
	program which is organized into eight priorities.
	Two new Dent-Cal providers just in the last three months who are now providing
	dental care for children.
	Discussed the County budget. County government is forecasting a deficit for next
	year that is twice as big as the current year.
	• Expanding the healthcare umbrella to 26 year of age.
	California Alliance for Prevention Funding is a prevention effort statewide to identify
	a means of sustainable ongoing funding for all health prevention work. The event will
	be on February 28, 2019 at the Veterans Hall.

7. Health Commissioner	Commissioner Warren		
Updates	 Reported on the HEAP Grant which is a 4.3 million dollars grant from the State and will go towards very low-income housing. HSOC Committee meeting is set for tomorrow. Commissioner Campbell 		
	 Reported the Oceano Dunes Particle Pollution Reduction Plan, APCD and State Parks will be coming up with a complete proposal for the next four years. The public will have the opportunity to review proposal in April and possibly finalization in the summer. FDA to finalize their recommendations. Waiting to see recommendations and 		
	possibly making comments once released. Commissioner Raymond		
	Attended the Adult Services Policy Council Meeting and there was a speaker from the San Luis Obispo County Veteran Services Office. They can provide assistance for veterans who are in need of help.		
	Commissioner Sage		
	 Reported that the Healthy Communities Work Group poured cement last week. County Planning was present and provided information regarding the updating of Agriculture Worker Housing Ordinance and the San Luis Obispo County Accessories Dwelling Ordinance. 		
	 Tiny Homes will be discussed at the San Luis Obispo Library on January 23, 2019. Attended the Tobacco Coalition. Will provide public comment regarding expanded their smoking ordinance. 		
	 Attended a Disaster Healthcare Coalition meeting last week, and a very interesting speaker spoke about her experience from the Camp Fire and Katrina. Should consider DHCC speaking at our Health Commission meeting. 		
	• The Prevention Health Grant and the CBO grant are in the process of accept application and applications are due by the 15 th of February. We will meet in March to review.		
8. Committee Reports	Nominating Committee:		
	Met with a possible candidate. We are still in the review process at this time. We have one vacancy for a committee member.		
9. Prospective Future	Chair Sage reports a possible guest speaker regarding end of life and coordinating care.		
Items	Requesting Theresa and Dr. Borenstein to put together presentation on what the Health Commissioner is and what they do.		
10. Meeting	No meeting in February. Next meeting is March 11, 2019.		
11. Adjournment	Meeting was adjourned at 7:54 p.m.	Adjournment	All