I. The Office of Family Empowerment (OFE)

Rosa E. Warder, MS, MFA, Manager Office of Family Empowerment (OFE), Behavioral Health Care Services, Beth Sauerhaft, M.Ed, Certified Professional Coach, Behavioral Health Care Services and Tanya McCullom, Program Specialist, Behavioral Health Care Services presented a PowerPoint presentation on the Office of Family Empowerment.

OFE works directly with providers and system partners to develop, strengthen and grow family member participation and leadership in services, programs and policies in addition to transforming a system culture from pathology to inclusion, resiliency, recovery and hope.

A family member is an individual who provides emotional, practical, and spiritual support on behalf of a loved one with social/emotional or mental health concerns, including substance use disorder. Family members may be biological parents, adoptive parents, foster parents, siblings, spouses, domestic partners, aunts, uncles, cousins, friends or anyone else whom the consumer/client defines as “their family members.”

OFE understands and recognizes the roles family members serve as informal or formal case managers, advocates, policy makers and peer support to other family members. OFE strives to partner with agencies and communities to eliminate disparities based on: mental health, race, gender, sexual orientation, language, immigration status, religion, culture and poverty.

OFE provides coaching training and technical assistance, individual staff and team coaching to over 100 professionals including:

- AC Family Partnership Program
- FERC
- Family Partners and Clinical Supervisors in EC system
- Building Hope (early childhood clinical team)
- WET Workforce Educations and Training (BHCS)
- Early Childhood Mental Health Consultation

Family Leadership projects include:

- Development of parent education program entitled “Parent Tools to Thrive”
- Trained parents to lead Parent Cafes
- Created and disseminated AB1424 Historical Information form
- 100% of participants reported improved ability to communicate with providers about concerns they may have about their child.
Some of the impacts these programs have had on clients include better communication to providers during a crisis, reductions in relapse and re-hospitalizations among consumers whose families received psychoeducation.

The OFE has offices in Oakland, Fremont, Livermore, San Leandro with information in 5 languages, serving over 18,000 individuals.

**Purpose:**
- Report progress
- Advocacy or Education
- Request Health Committee Recommendation or Position
- Other:

This item was informational only and required no Committee action.

II. **Hepatitis C Screening and Treatment in Alameda County Update**

*Attachment*

Danice Cook, HealthPAC Administrator, Health Care Services Agency, Dr. Ralph Peterson, Chief Executive Officer, MacArthur Gastroenterology and Dr. Geoffrey H. Watson, Chief Executive Officer, Preventive Care Pathways/James A. Watson Wellness Center

Hepatitis C is a liver infection caused by the Hepatitis C virus (HCV). Most people become infected with the Hepatitis C virus by sharing needles or other equipment to inject drugs. For some people, Hepatitis C is a short-term illness but for 70%–85% of people who become infected with Hepatitis C, it becomes a long-term, chronic infection. Chronic Hepatitis C is a serious disease than can result in long-term health problems, even death.

The Hepatitis C Virus is a hidden epidemic and growing problem. We know that Hepatitis C is a leading cause of liver disease, liver cancer and liver transplants, which ultimately places a huge burden on patients, families, caregivers and the healthcare system.

- Spread through blood, needles
- Often becomes chronic
- No vaccine, but now curable

Alameda County has the fifth highest rate of newly reported chronic HCV cases among local health jurisdictions in the state, with, 1,745 new cases were reported in 2011 (not including cases reported by prisons). This likely underrepresents the numbers substantially.

New HCV treatments are more than twice as effective as old regimens. Patients can be cured of HCV through 8-24 week treatment in the primary care setting. The new therapies are also by far the highest cost treatment commonly encountered in a primary care setting, so supporting vulnerable populations in adherence to this treatment is a crucial task for stewardship of resources.

Health Care Services Agency is looking to build up the capacity of Alameda County’s health care safety net clinics and hospitals to provide effective and timely Hepatitis C screening and treatment to residents across the County and particularly in the primary care setting.

Goals of the Health Care Services Agency include: Reduce by 25% number of new hip C cases, increase awareness of Hep C infection from 45% to 66% among those infected; Continue to incentivize HealthPAC clinic/hospital organizations to provide HCV screening and treatment. Continue to fund HCV screening and treatment contracts with non-FQHC providers.

The Health Care Services Agency will be requesting Board of Supervisors approval in November/December to extend current contracts that end at the end of 2017.
Purpose:
☒ Report progress
☐ Advocacy or Education
☐ Request Health Committee Recommendation or Position
☐ Other:

PUBLIC COMMENT
None.

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