I. Results Based Accountability (RBA) Presentation

Attachment

Chuck McKetney, Interim Assistant Director, Health Care Services Agency, presented a PowerPoint presentation on Project Impact Results Based Accountability (RBA).

Results Based Accountability (RBA) is a framework that uses a data-driven, decision-making processes to help communities and organizations identify population level results and monitor their programs’ performance in order to determine how to improve their impact on the clients they serve.

Three questions used to develop performance measures:
- How much did we do? (Effort or Quantity of Services)
- How well did we do it? (Quality of Services)
- Is anyone better off? (Impact of Services)

Project Impact

Project Impact is a five year effort to support a sustainable system of accountability for Alameda Health Care Services Agency, its Departments, and their programs and also a way of understanding how the County improves health among the people served.

It is client focused, collaborative and designed to measure the impact of the work, including the services provided, the quality of those services and the impact of those services on the lives of the clients they serve.

Highlights of the 2016/2017 Implementation

Measuring Programs and Contracts
1) Expansion of RBA adoption to virtually all programs and beginning work with contractors in Public Health
2) Expansion of RBA adoption to all programs of Admin and Indigent Care
3) Of the 261 Health Care Services Agency (HCSA) CBO contracts in Fiscal Year 2016-2017, 105 (or 40.2%) include Results-Based Accountability (RBA) performance measures.

Communication
1) Organized cross-departmental group to look at RBA-related communication issues and how we might address these issues
2) Revised HCSA reporting for County Budget Book
3) Developed RBA overview video

For fiscal year 2017/18 Project Impact will continue RBA Leadership training all Leadership staff (estimated 55 HCSA leadership staff)
• 75% of all program managers will complete RBA 101 part A and B
• 75% of all program managers with contracts will complete RBA contract manager training

Also in fiscal year 2017/18 Public Health will have RBA measures being used among 75% of its contractors, Behavioral Health will expand its early work on RBA measures and complete measurement development for our service units (CAPE and Information Systems).

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

This item was informational only and required no Committee action.

## II. Hepatitis A Outbreaks in California Update

Muntu Davis, MD, MPH, Public Health Director and County Health Officer, Public Health Department and Erica Pan, MD, MPH, FAAP, Deputy Health Director and Director, Division of Communicable Disease Control and Prevention, Public Health Department presented a PowerPoint presentation on the Hepatitis A Outbreaks in California.

**Information about Hepatitis A:**

- Hepatitis A is a virus
- Infects and inflames the liver
- Symptoms begin ~28 days after exposure (range, 15-50 days)
- Children > 6 years & adults more likely to have symptoms
- Illness lasts weeks to 2 months
- If infected or vaccinated, lifelong immunity
- US death rate 0.3%-0.6% overall

Hepatitis A is spread by
- Touching objects or eating food handled by an infected person with unclean hands
- Close person-to-person contact with an infected person
- Sharing/use of recreational drugs (not just IVDU) with an infected person
- Sexual contact with an infected person

High risk populations for Hepatitis A include homeless persons, illicit drug users, men who have sex with men and travelers to certain countries and those in contact with such persons.

Currently there are 600 cases statewide, the majority in San Diego. Alameda County has 12 confirmed cases from 1/1/2017 through 10/10/2017. None in persons experiencing homelessness, using illicit drugs, or having close contact with these high risk groups and no cases linked to outbreaks in San Diego, Santa Cruz, or Los Angeles. It is a slight increase from the baseline of 7-8 cases per year between 2014 and 2016.

**Outbreak Prevention & Control: Hygiene**

1. Personal hygiene (hand washing with soap and water)
   - Before handling food and eating. After using the restroom.
   - Hand sanitizer is **not** effective for Hepatitis A.
2. Sanitation (proper waste disposal)
- When present, the virus can live for months in environment and requires special environmental cleaning protocols.
  - Bleach solution
  - Prolonged solution contact time to disinfect
  - Solid waste disposal, waste water recovery
  - Personal protective equipment

*Access to toilets & hand washing facilities is key.*

Vaccine and Its Availability & Funding
- Covered by Medi-Cal & other health insurance
- Uninsured clients who are registered at some Federally Qualified Health Centers
- Highland Hospital Emergency Department & AHS Clinics
- Limited federally-purchased vaccine
  - Prioritized for uninsured clients in outbreak-affected jurisdictions
  - Alameda County is currently not an outbreak-affected jurisdiction
- CA declared State of Emergency on 10/13th
  - To access reserve vaccine supply from one manufacturer
  - To continue to control/approve all large orders of vaccine
  - Developed a prioritization scheme for distribution of limited resource

Current Public Health Department activities to prevent an outbreak include:

- Enhanced surveillance for Hepatitis A
- Monitoring statewide situation on frequent calls
- Updating ACPHD Hepatitis A website
- Issuing updated Health Advisories & communications to Health Care Providers
  - Ensuring safety net providers vaccinate high risk populations (including jail health)
- Modified outreach materials for Alameda County
- Partner with Health Care for the Homeless and others to:
  - Provide outreach flyers and training for homeless outreach workers
  - Develop a plan for vaccinating homeless in the field
  - Develop other outreach strategies for other service providers
- Develop local priorities for vaccine available
- Seeking alternate sources for vaccine funding and vaccine

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

This item was informational only and required no Committee action.

### III. Connecting Kids to Coverage Initiative Three-Year Outcomes

**Attachment**

Joy Young, Family Partnerships Coordinator, Center for Healthy Schools and Communities, Allison Delgado, Family Resource Center Director, East Bay Agency for Children, Gloria Vargas, Family Resource Center Program Coordinator, East Bay Agency for Children and Brightstar Ohlson, Bright Research Group presented a PowerPoint presentation on Connecting Kids to Coverage Initiative Three-Year Outcomes.

The Connecting Kids to Coverage Initiative was launched in July 2013 by Health Care Services Agency and Social Services Agency to enroll eligible children and families in health insurance and public benefits in Oakland, Hayward and San Leandro Unified School Districts. A key community partner has been the East Bay Agency for Children (EBAC). EBAC’s mission is to improve the well-being of children, youth, and families by reducing the impact of trauma and social inequities.
Since CKC launched (July 1, 2013 - May 31, 2017):

- **8,203** health insurance applications completed
  - 2/3 new applications (i.e. people who were previously uninsured)
- **3,628** CalFresh applications completed
  - 60% of CalFresh applications were for children

CKC and Family Resource Center 2017/2018 Objectives

1. **Increase Usage of Family Resource Centers**
   - Increase number of individuals accessing physical, dental, and mental health services and family supports
2. **Improve Health through School-based Services**
   - Case Management and links to community resources
   - Connect students with a “Medical and Dental Home”
   - Food pantry to address basic needs
   - Increase enrollment to health care benefits
3. **Improve Parent Engagement**
   - Health and wellness workshops, trainings, and support groups

This item was informational only and required no Committee action.

**PUBLIC COMMENT**

None.

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