

HEALTH FOCUS GROUP II

2/10/04

A focus group comprised of health professionals in Los Angeles County was brought together by the LA Coalition to End Hunger & Homelessness to provide recommendations to Bring LA Home – 10 year plan to end homelessness. A previous group was convened in early February 2004 with a smaller turnout. This focus group brought together many different departments within the Department of Health Services and advocates. This report is intended to serve as recommendations which will be submitted to be considered for the draft plan.

The attendees for the health focus group were representatives from USC Dental, Azusa Pacific School of Nursing, DHS Office of Planning, DHS Maternal Child Health, Homeless Healthcare Los Angeles, DHS SPA 4, COACH for Kids, DHS SPA 3, MLK/Drew, DHS TB Control Program.

The following is a summary:

Location: 520 S. Virgil, LA, CA 90020

Time: 1:30 p.m. – 3:30 p.m.

Date: March 25, 2004

Subject	Comments
211 Phone System	Rec: Need to make this system a free call from any phone and pay phone.
Anti-NIMBY Campaign	Rec: Educate and engage cities, residents and other public entities on the importance of anti-NIMBY laws and the necessity of fair share.
County Bureaucracy	Rec: Cut the amount of time and running around it takes to get the necessary care at county clinics. Rec: Revise LA County telephone access to order prescriptions. Make it less complicated and more user friendly.
Cultural Competency	Rec: Address needs for ethnic groups, special needs groups and families. All need very different types of care and, staff must be trained to recognize this.
Data Management	Rec: Link computer databases for the following – DPSS, DHS, and DMH with HMIS.
Denti-Cal	Rec: Work with state Legislature to reinstate this benefit to adults.
Extended Clinic Hours	Rec: Extend community clinic hours to accommodate people who need services in the evenings and weekends.
Fair Share	Rec: All 88 cities in Los Angeles County must take responsibility for providing integrated health services. Need to <i>amend/modify or create new city codes</i> to make it possible to begin engaging cities in the fair share process.
Funding Guidelines	Rec: Make funding available or change guidelines so providers can offer comprehensive care instead of providing care in silos and for the easy to serve. Rec: Modify funding guidelines at the local, state and federal level to provide <i>complete</i> financial support rather than expecting providers to piece together programs from several funding sources.

Increase Services	Rec: Increase services and number of well-trained providers in locations that are currently underserved (eg. East San Gabriel Valley).
Medi-Cal	Rec: Create presumptive eligibility for prescriptions and reinstate Medi-Cal for GR recipients.
Mobile Medical Clinics	<p>Rec: Maintain funding for mobile vans at winter shelter sites and reinstate mobile TB Clinic funded by the Centers for Disease Control. Include more services vans can provide and send out more often throughout communities in LA County.</p> <p>Rec: Utilize existing resources by putting vans into use that already exist but, aren't currently being used.</p> <p>Rec: Utilize mobile vans as a response for the need for one-time visits, i.e. TB/HIV/STD screening, immunizations or a general physical. This service would include triaging people as needed into the system of care, which would address chronic or acute illnesses, and/or ongoing treatment issues.</p>
Neighborhood Health Clinics	Rec: <i>Reinstate</i> Neighborhood Health Clinics - have <i>at least 1-2 in every SPA</i> . These were clinics that existed in different communities throughout the County almost 20 years ago. They were fully staffed by medical professionals and provided preventive services, immunizations, maternal/child health services, nutritional counseling, etc.
Oral Health	Rec: Integrate oral health care into all systems of care.
Outpatient Clinics	Rec: Increase number of small clinics that remain open after hours. Make sure they are affiliated with large hospitals that can provide necessary supplies, services and staff. This will reduce the number of people waiting to get into the ER.
Paradigm Shift	Rec: Conduct more education and outreach to make prevention the priority over curative methods.
Portability of Health Insurance	Rec: Support portability of Medi-Cal and/or HMO programs for individuals who qualify.
Pregnant Women	Rec: Create a centralized clearinghouse of resources with linked databases to better utilize programs that already exist to assist pregnant women.
Public Benefits	Rec: Work with DPSS to prepare and train workers to flag individuals who may qualify for SSI. Work with DHS to provide necessary medical records to the Social Security Administration to expedite the process. Coordinate with DPSS and other large systems to ensure better access to <i>all</i> public benefits.
Recuperative Care Facilities	Rec: Increase number of recuperative care facilities in Los Angeles County particularly for individuals being discharged from hospitals.
Residency Requirement	Rec: Although there are no residency requirements to serve homeless population. And, the law allows self certification - this is generally <i>not</i> the practice. Must enforce this law to remove barriers to care.
Service Integration	Rec: Integrate health, mental health and substance abuse services to create a system that addresses the whole person.
Shelter/Facility Standards	Rec: Create shelter/facility standards. This helpful in tracking active cases of TB, to begin treatment and create a healthy environment. Also include customer service training to employees of shelters to increase standards.

System of Care	<p>Rec: Create a system of care with an infrastructure that eliminates “silos.” There needs to be a community approach to health services delivery that is integrated with multiple services and with coordination of care. Multiple points of entry will remain. However, there needs to be a stronger public/private connection particularly when referring a person to mainstream services. Build an infrastructure in outlying areas such as, SPA 3 and SPA 1.</p> <p>Rec: Increase sites of entry point throughout the County.</p>
Systems Change	<p>Rec: Increase cash assistance levels, increase minimum wage to living wage, increase job training and education services.</p>
TB Treatment	<p>Rec: There needs to be more incentives for</p>
Training	<p>Rec: Similar to the Homeless Healthcare system, provide community education and training to all providers, UCLA and USC medical students, LA County employees and private hospitals on issues that affect the homeless population.</p> <p>Rec: Customer service training a must for all providers. There must be a change in behavior and attitude among service providers and large bureaucratic systems. Provide incentives to change behavior – provide a mechanism to change.</p>
Transportation	<p>Rec: Make more vans available throughout the County to pick up and drop off people seeking medical care at different clinics and hospitals. Provide it year round. Transportation is a big barrier to people seeking needed healthcare.</p>
Treatment on Demand	<p>Rec: Create more locations and expand services to provide treatment on demand for anyone that needs it.</p>
Vision Services	<p>Rec: Create more prescription eye glass donation programs locally through non-profit groups and hospitals.</p> <p>Rec: Create corporate donation prescription eye glass programs through COSTCO, Lens Crafters, WalMart, Target, etc.</p>
Year Round Services	<p>Rec: There must be year round shelters that house on-site medical practioners all year long. This is a very effective approach and is successful at LA Family Housing.</p>