Increase Access to Care



Advisory Group Conference Call

June 3, 2020

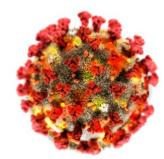
Agenda

- COVID-19 and Access to Health Services
 - Challenges
 - Best Practices
 - Childhood Immunization
 - Emerging and Current Issues in PHPC Settings
- Training Symposium–Virtual Option
- Learning Collaboratives and Letters of Commitment
- Health Center Issues and TTA Priorities
 - Telehealth
 - Behavioral Health
 - Diabetes
 - Envision Centers and Health Partnerships
 - Provider Production



COVID-19 in PHPC Settings

- First US cases of non-travel of COVID-19: February 26 & February28 2020: Community Transmission
- February 21 February 23: 14 cases of COVID-19, all travel-related





COVID -19 in **PHPC** Settings

PUBLIC HOUSING PRIMARY CARE (PHPC) COVID-19 BY THE NUMBERS

May 29, 2020 Numbers as of May 22, 2020 Number of PHPC respondents = 81 (75.7% of all PHPCs)

IN 2018, THERE WERE 107 PHPCs SERVING 817,123 PATIENTS LIVING IN OR IMMEDIATELY ACCESSIBLE TO PUBLIC HOUSING.

PHPC Adequate Supply of Personal Protective Equipment (PPE) for the next week:

96.30% Surgical Masks 92.59% N95/PPR Masks 86.42% Gowns 97.53% Gloves 96.30% Face Masks & Goggles

PHPC OPERATIONS:

41

69.26% Health Center Weekly Visits (Versus Pre-COVID-19 Weekly Visits) 223 PHPC Sites Closed

> 11.98% Staff Members With Staff Unable to Work Positive COVID-19 (due to site/service closure, exposure, family home obligations, lack of PPE, etc.)

DISCLAIMER:

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TESTING **PHPCs with** COVID-19 Testing Capacity

PATIENT

Drive-up/Walk Up **Testing Capacity** 80.25%

PHPCs COVID-19 SPREAD :

20,175 Total Tested 74.56%

Racial or Ethnic Minority Tested

2,970

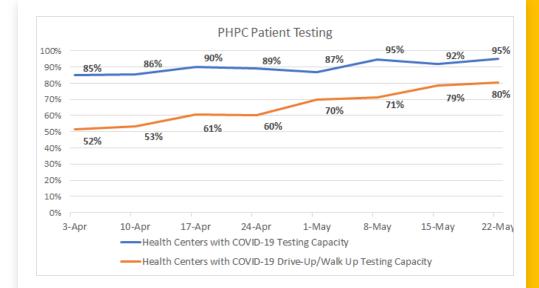
Total Positive Cases

85.69%

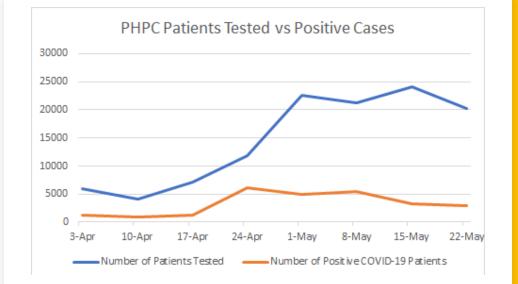
Racial or Ethnic Minority Positive Cases







COVID-19 Patient Testing and Positive Cases





Magnitude of Racial and Ethnic Inequity in COVID-19 Rates at PHPCs

- Overall COVID-19 rates are declining
- But COVID-19 rates in racial and ethnic minority groups are **increasing**

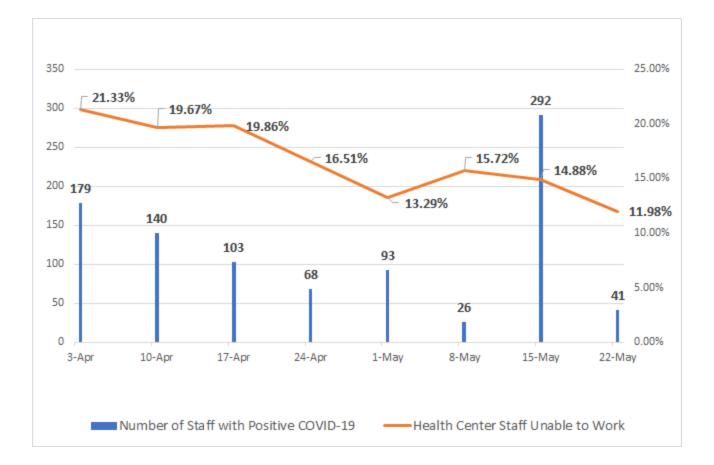


For comparison, 40% of patients at PHPCs are racial or ethnic minorities

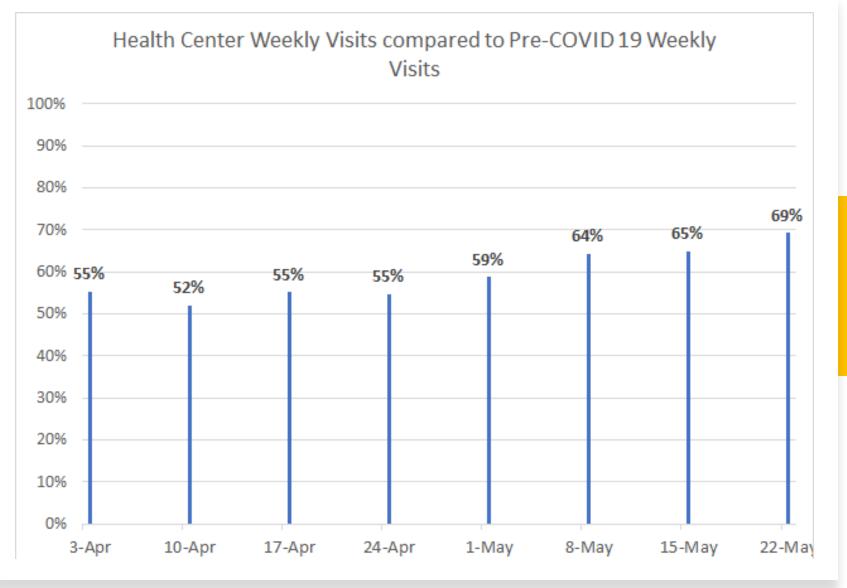


COVID-19 Related Staffing Challenges

Fluctuation in staff able to work (due to site/service closure, exposure, family/home obligations, lack of PPE, etc.) and in number of staff with COVID-19



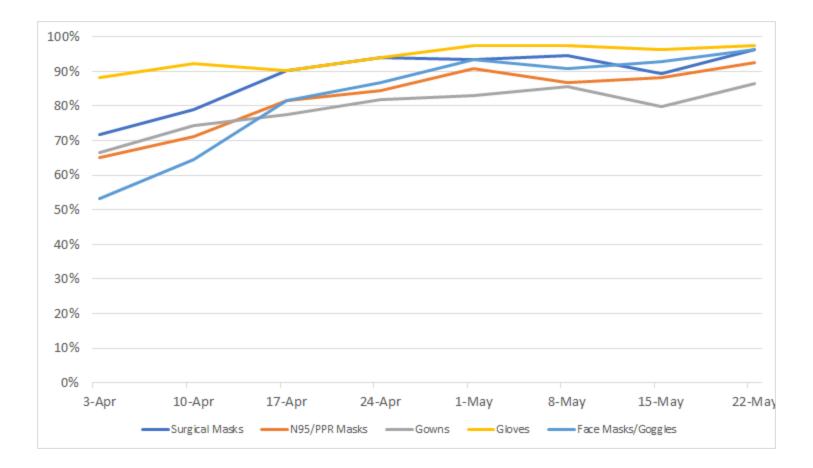




PHPC Operations



PHPCs with Adequate Supply of PPEs





COVID -19 PCA Data

PPE Supplies

Challenges:

- Shortage Remains
- PPE Quality

Improvements:

- Bulk Orders by PCAs
- Supply Chain Enhancements



Testing Supplies

Challenges:

- Timeliness
- Testing Validity
- Lack of Supplies

Improvements:

- Better Coordination
- Greater availability



Other Emerging Issues

Challenges:

- Budget Cuts
- Contact Tracing
- Tourism Season



Change in the Number of Patient Visits

Challenges:

- Patient visits down significantly
- Patients fear infection if they go to health center
- Significant layoffs, site closure, furloughs, etc.

Improvement:

- Telehealth Services
- Developing Infection Prevention Protocols



Telehealth Services

Challenges:

- No Wi-Fi
- Lack of proper equipment
- Non-tech savvy

Improvements:

- Building telemedicine capacity
- Publicity, education, experience



Health Disparities

• Agricultural workers, racial and ethnic minorities are being impacted more severely.



Priorities: COVID-19/Health Services

Maintaining childhood immunizations and wellchild care during pandemic

- Scheduling sick visits and well-child visits during different times of the day
- Reducing <u>crowding in waiting rooms</u> by asking patients to remain outside (e.g., stay in their vehicles, if applicable) until they are called into the facility for their appointment, or setting up triage booths to screen patients safely
- Collaborating with health care providers in the community to identify separate locations for providing well visits for children



Priorities: COVID-19/Health Services

(Covid-19 related topics for Conference and next program year.)

Challenges and Promising Practices:

- Testing
- Infection Control
- Testing Equipment v. Outside Testing Labs
- Air purification Systems
- PPE Supplies
- Vaccine
- Therapeutics
- Treatment
- Prevention
- Product Demos-



Provider Production

Value Based Health Care may be on the horizon but fee for service is still the reality and the way health centers get reimbursed—

Provider Production matters!!

- Improve provider production and/or cut staff?
- Example: 3 providers at 60% productive. Should Health Center increase productivity and eliminate one provider?



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THANK YOU!



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