A RESOLUTION endorsing the Governance Plan for the Federal Health Care for the Homeless 330(h) Health Center Grant.

WHEREAS, Public Health—Seattle & King County is a Health Care for the Homeless grantee under section 330(h) of the Public Health Services Act, and

WHEREAS, health center grantees must comply with a set of governance expectations, and

WHEREAS, the King County Board of Health will serve as the governing board for the Health Care for the Homeless grant received by Public Health—Seattle & King County, with the Health Care for the Homeless Network Planning Council in an advisory role, and the King County Council providing budget authority;

NOW, THEREFORE, BE IT RESOLVED by the Board of Health of King County:
The board endorses the Governance Plan for the Federal Health Care for the Homeless 330(h) Health Center Grant, Attachment A to this resolution.

Resolution was introduced on and passed as amended by the Board of Health on 3/19/2009, by the following vote:

Yes: 11 - Ms. Lambert, Ms. Patterson, Ms. Clark, Mr. Rasmussen, Dr. Sherman, Mr. Hutchinson, Ms. Frisinger, Dr. Nicola and Dr. Counts
No: 0
Excused: 4 - Ms. Manning, Mr. Gossett and Mr. Licata

BOARD OF HEALTH
KING COUNTY, WASHINGTON

[Signature]
Julia Patterson, Chair

ATTEST:

[Signature]
Anne Noris, Clerk of the Board

Attachments
A. Governance Plan for the Federal Health Care for the Homeless 330(h) Health Center Grant dated March 19, 2009
Governance Plan
For the Federal Health Care for the Homeless 330(h) Health Center Grant

Endorsed by the King County Board of Health [March 19, 2009]
Endorsed by the Health Care for the Homeless Network Planning Council

Public Health-Seattle & King County, an agency of King County government, is a Health Care for the Homeless grantee under section 330(h) of the Public Health Services Act. This grant is received from the U.S. Department of Health and Human Services, Health Resources and Services Administration, Bureau of Primary Health Care. As a health center grantee, King County must comply with a set of governance expectations and has elected to meet those requirements directly through the King County Board of Health, a federated body authorized by the King County Council. HRSA has granted PHSKC a waiver of the requirement that the Board be composed of 51% health center users, and approved alternate mechanisms for consumer input into the grant’s oversight.

This document describes the roles and responsibilities of King County Council, the King County Board of Health, and the Health Care for the Homeless Network Planning Council in meeting the required governance expectations and the provisions of the waiver.

King County Board of Health Serves as Governing Board

The King County Board of Health serves as the governing board for the Health Care for the Homeless (HCH) grant received by Public Health-Seattle & King County. The King County Board of Health is required under state law and was created by Metropolitan King County Council Ordinance 12098 (now superseded by 13218). The Board of Health is constituted as a federated body: 11 of its 13 voting members are elected officials -- 6 from the Metropolitan King County Council, 3 from the Seattle City Council and 2 from the Suburban Cities of King County. The two remaining voting members are health professionals, selected by the other members of the Board, who serve as citizen public health experts, assisting the Board to deal with complex, often technical, public health issues. A third health professional serves as a nonvoting member. Names, demographic characteristics, and areas of expertise of the King County Board of Health will be reported, as required, in the annual federal 330(h) health care for the homeless application.

Health Care for the Homeless Network Planning Council Provides Consumer and Provider Input

The HCHN Planning Council is advisory to the King County Board of Health and the director of Public Health – Seattle & King County on matters relating to the Health Care for the Homeless program. The Planning Council has a separate charter (see attachment A) describing its purpose,
In order to maximize consumer voice in the oversight of the HCH program, the Board of Health requests that many of required governance actions be reviewed and approved by the HCH Planning Council prior to being forwarded to the Board of Health.

### How Governance Requirements Are Met

<table>
<thead>
<tr>
<th>Federal Requirement</th>
<th>Role of King County Council</th>
<th>Role of King County Board of Health</th>
<th>Role of HCH Planning Council</th>
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<tbody>
<tr>
<td>1. Health center grantee must have a Governing Board. Grantee cannot use Advisory Planning Councils as the Governing Board.</td>
<td></td>
<td>KC Board of Health is the formal governing board.</td>
<td>Advisory to KC Board of Health and the Director of PHSKC.</td>
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<td>2. Board has a 51% consumer majority of the population served.</td>
<td></td>
<td>Waiver in place for FY 2005-09 Waiver to be requested for FY 2010-14. Receive and review homeless consumer input at least annually.</td>
<td>Under approved waiver, serves as the alternate mechanism for providing consumer input. HCH Planning Council to provide input to the Board of Health at least annually.</td>
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<tr>
<td>4. Approves annual operating budget.</td>
<td>Yes. Budget approval is by the King County Council only.</td>
<td>Provides input to King County Council.</td>
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<td>5. Approves “Change in Scope of Project” requests prior to submission to HHS-HRSA. Major changes are the addition or deletion of a service site or a type of service. Service site relocations also require approval.</td>
<td>Budget approvals related to any Scope changes are by the King County Council, per # 4 above.</td>
<td>Yes – Change in Scope requests will require review &amp; endorsement by BOH. Must be documented in minutes. Recommended changes will be processed first through the HCH Advisory Council and PHSKC staff.</td>
<td>Reviews proposed changes in Scope of Project and hours of service, and forwards input to King County Board of Health.</td>
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<tr>
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<td>6. Determine the schedule of fees and discounts for personal health services.</td>
<td>Yes. Assure that fee scale for personal health services always slides to zero and is in compliance with other federal health center regulations.</td>
<td>Review proposed changes for impact on homeless people and advise PHSKC.</td>
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<td>7. Approves applications for subsequent grants for the organization</td>
<td>Grant notification and approval processes are through the King County Council, including formal action where needed.</td>
<td>Reviews &amp; recommends to PHSKC the submission of grant applications for the HCH program.</td>
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<td>8. Approve the selection, annual evaluation and dismissal/removal of the Director of PHSKC in accordance with County personnel policies</td>
<td>The Director of PHSKC is appointed by the King County Executive and the City of Seattle Mayor, and confirmed by the King County Council and Seattle City Council.</td>
<td>The Board of Health includes representatives from both the King County Council and the Seattle City Council.</td>
<td>Participates in selection and evaluation of the Project Director for the Health Care for the Homeless program.</td>
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<td>9. Evaluate health center activities, including services utilization patterns, productivity, patient satisfaction, achievement of project objectives, and quality improvement</td>
<td>Yes – Receives annual report from Health Care for the Homeless program.</td>
<td>Yes – provides annual report, consumer input, and strategic plan to King County Board of Health and director of PHSKC.</td>
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<td>10. Establish general organizational policies</td>
<td>Broad policies are established by the King County Council and administered by the King County Executive.</td>
<td></td>
<td>PHSKC has a formal mechanism in place to solicit input on proposed policies, including those related to health clinic operations. The Planning Council is asked to review policies that could affect access to &amp; quality of care for homeless people.</td>
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Purpose

The purpose of the Health Care for the Homeless Network (HCHN) Planning Council is to provide programmatic guidance and policy direction to HCHN administrative staff, Seattle-King County Department of Public Health management, and the King County Board of Health. The HCHN Planning Council is not a governing body and operates in an advisory function only.

The HCHN Planning Council is composed of individuals who are being served by the program and/or represent the interests of individuals being served by the program. The HCHN Planning Council shall:

- Meet monthly.
- Review, evaluate, and make recommendations regarding the services provided by the program. Review and provide input on proposed changes to the Scope of Project prior to their consideration by the King County Board of Health.
- Review and endorse proposed grant applications for the Health Care for the Homeless program, prior to their consideration by the King County Board of Health.
- Review and make recommendations regarding the schedule of hours of services of the program.
- Review the budget for the program and provides recommendations to the Director of Public Health and to the King County Council regarding the program budget.
- Monitor the health care environment affecting homeless people, and conduct periodic assessments for the purpose of establishing strategic direction for the Network. Review the performance of the HCHN Network annually, including results of consumer input, and report to the King County Board of Health and the director of PHSKC.
- Oversee the continual monitoring and evaluation of quality management activities provided by the Health Care for the Homeless Network, its contracting agencies, and PHSKC programs which serve or target homeless populations.
- Participate in the Health Department’s selection and evaluation processes for the HCHN program director.

Composition

The HCHN Planning Council comprises consumers of services, service providers, and persons knowledgeable about the social service and health systems which serve homeless individuals and families. The Planning Council’s Membership Committee will propose a slate of members for the Council at least annually, and recommend candidates.
to fill vacancies as they arise throughout the year. The HCHN Planning Council will approve new members. The membership of the HCHN Planning Council will include at a minimum 15 members and no more than 25 members. Every two years, the Planning Council will elect two individuals to serve as Co-Chairs, each of whom will have a two-year term of office. The Council will have an Executive Committee that will be composed of (1) the two Co-Chairs; (2) the Membership Committee chair; (3) a consumer representative; and (4) a health care provider representative, for a maximum number of five persons. If a health care provider is serving in one of the other positions for the Executive Committee, a separate health care provider position does not need to be filled. The consumer representative position, however, will be filled regardless of whether consumer(s) are serving in other positions on the Executive Committee. The Planning Council will elect the consumer and health care provider representatives to serve on the Executive Committee, and they will serve for a two-year term.

Categories of Membership: All categories should be represented on the Planning Council; however, one individual can represent more than one category. There are no limitations on the length of time that a Planning Council may serve, but new members are asked to commit to at least two years of service.

1. Consumers
   People who are or have been homeless and have received services from providers in the Health Care for the Homeless Network.

2. Persons Knowledgeable about Specific Sub-populations of Homeless People
   Individuals knowledgeable about client sub-populations including, but not limited to: youth, families, single adults, victims of domestic violence, ethnic/cultural groups, veterans, children, and homeless individuals residing in the county outside of the City of Seattle.

3. Services Providers
   Individuals who represent the different types of service providers for people who are homeless including, but not limited to medical care, shelter and day programs, transitional and permanent housing, mental health and substance abuse services, and veteran’s services.

4. At-Large
   Individuals selected to represent areas such as educational institutions and the private sector.

5. Major Collaborators
   Individuals representing those organizations which are major policy makers or collaborators in the HCH Network. These include but are not limited to the City of Seattle, King County Department of Community & Human Services, the Seattle-King County Coalition for the Homeless, the Committee to End Homelessness, the Community Health Council, and United Way of King County.
Committees

The HCHN Planning Council convenes the following standing committee.

Membership Committee - The purpose of the Membership Committee is to recruit and nominate members to the HCHN Planning Council. The Membership Committee will meet as needed to identify and nominate people to fill vacant positions. The Membership Committee will work to ensure that members meet the representation needs of the Planning Council as laid out in the Composition section of this charter.