

Contra Costa Health Access Coalition
ACCESS TO HEALTH CARE ⚙️ **STRATEGIC OBJECTIVES**

July 2005 through June 2006

GOAL A: EDUCATE AND ASSIST PARENTS IN GAINING ACCESS TO HEALTH CARE RESOURCES					
WHEN	WHO	WHAT	STATUS		
			DONE	ON TARGET	REVISED
By June 30, 2006	Parent and Community Education Committee: Christina Reich, Lynelle McElhanon, Sandra Padilla	1. Update the Home Visiting Collaborative, PTA, and other identified entities on health coverage programs and resources available in Contra Costa.		X	
Ongoing	Parent and Community Education Committee	2. Continue to market the Regional Guides, "No Secret" flyer (with a public charge statement added to the bottom), and TALC transportation information. Explore many media for getting information out to parents and make a recommendation(s) to the Health Access Coalition.		X	
Ongoing	Parent and Community Education Committee	3. Continue the CHDP school outreach utilizing the RFI process to link families with health coverage information and resources.		X	
By May 30, 2006		4. Provide a training to the Health Access Coalition on how to influence transportation decisions in the county; specifically how to get involved in the upcoming Community-Based Transportation plans for Monument and Pittsburg/Bay Point and ensure that Health Access is part of the planning process.		X	

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GOAL B: INCREASE THE NUMBER OF MEDICAL AND DENTAL PROVIDERS WILLING TO ACCEPT LOW INCOME CLIENTS					
WHEN	WHO	WHAT	STATUS		
			DONE	ON TARGET	REVISED
Ongoing	Health Providers Committee: Bev Jacobs, Paula Hines, Elizabeth Faulkner, and Lynn Pilant	1. Recruit and maintain medical provider participation in CHDP, CCS, and other programs for low-income families.		X	
Ongoing	Dental Health Action Group (DHAG) Committee: Lynn Pilant, Elizabeth Faulkner, Frank Camodeca, Michelle Williams	2. Develop a plan to recruit and maintain a pool of general dentists and specialists who will see uninsured, low-income and Medi-Cal children Note: This objective is part of DHAG's Children's Oral Health Strategic Plan.		X	
November 2005	Lynn Pilant	3. Distribute list of "DentiCal" providers to members of HAC.	X		
Ongoing	Oral Health Committee: Padmini Parthasarathy, Lynn Pilant, and Nilda Perez	4. Keep abreast of DHAG efforts to increase access to oral health services for underserved populations		X	

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GOAL C: INCREASE OUTREACH AND EDUCATION EFFORTS LOCALLY AND IN SACRAMENTO TO ENSURE ACCESS TO HEALTH CARE –					
WHEN	WHO	WHAT	STATUS		
			DONE	ON TARGET	REVISED
	<p>Legislative Outreach and Education Committee: Aimee Chitayat, Joanne Genet, Lorena Martinez-Ochoa</p> <p>To be invited to participate:</p> <ul style="list-style-type: none"> • Don Stahlhut, CCISCO • Lisa Morrell, First 5 • Pat Snyder, Diablo Valle League of Women Voters • Rochelle Robinson, The California Partnership 	1. Meet regularly with PEHAB's Access To Care Committee to identify issues that can be supported by both committees. <ol style="list-style-type: none"> a. Develop a work plan to address issues identified. 		X	
	<p>Legislative Outreach and Education Committee</p>	2. Support the efforts of local agencies to organize Town Hall meetings with residents and others about access to care issues.	X	X	
	<p>Legislative Outreach and Education Committee</p>	3. Explore the possibility of developing a policy platform.		X	

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GOAL D: COORDINATE RESOURCES AND IMPROVE COLLABORATION					
WHEN	WHO	WHAT	STATUS		
			DONE	ON TARGET	REVISED
By April 2006	Steering Committee: Mary Ann Ferrera, Lorena Martinez-Ochoa, Sandy Baldwin, Aimee Chitayat, Sandra Padilla, Christina Reich	1. Maintain an active HAC membership by implementing the following activities: a. Revise membership survey. b. Distribute to individuals on HAC roster. c. Analyze and summarize results. d. Incorporate suggestions into membership packet. e. Revise membership packet, and incorporate "approved" language re: advocacy and agency representation. f. Develop acronym interpretation list and add to membership packet. g. Follow up with each individual, encourage participation in HAC, and provide a membership packet. h. Plan new member orientations.	X X X	 X X X	
March 2006	Steering Committee	2. Develop an infrastructure for the operation of the HAC. a. Seek funding to support the staffing of HAC.	X		
Ongoing	Steering Committee	3. Increase the HAC membership by identifying programs that link low-income families to resources and health care and inviting them to become HAC members.		X	
Ongoing	Steering Committee	4. Educate HAC members about community programs and resources that may link clients to health coverage programs.		X	
October 2005	HAC Support Staff	5. Develop an online community outreach events calendar to encourage collaboration and coordination among HAC members.	X		

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GOAL E: DEVELOP A SIMPLIFIED SYSTEM FOR CLIENTS TO ACCESS HEALTH CARE					
WHEN	WHO	WHAT	STATUS		
			DONE	ON TARGET	REVISED
	Simplified System Committee: Wanda Session, Sandy Baldwin, Jana Aloo, Nilda Perez, Yolanda Thompson, Connie James, Tiombe Mashama, Margaret Ovendon, Aimee Chitayat	1. Educate Coalitions on how to access eligibility workers system changes, call center, revised office hours, customer service, training, increased staffing with EHSD-ongoing monthly updates-on Medi- Cal changes.			
	Simplified System Committee	2. Invite appointment managers to educate HAC re: scheduling appointments and access.	X		
	Simplified System Committee	3. Refer to Jose Martin, Public Health Disparities Initiative Leader, and ask for frequent updates regarding linguistic access and cultural competency.		X	
	Simplified System Committee	4. Continue to monitor progress with Alameda County's one-stop application pilot project scheduled for summer 2005	X		
	Simplified System Committee	5. Develop script for clients with low literacy to be used by CAS application assistants and frontline staff (need latest version).			