

CARE HARBOR FREE CLINIC

The Reef Exposition Center, Los Angeles March 4-6, 2022

Clinic Results

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1. SUMMARY

Care Harbor conducted its twelfth free mega-clinic on March 4-6, 2022. It was held at the Reef, a 100,000 square foot exposition space in central Los Angeles. Uninsured, underinsured and underserved individuals and families who have nowhere to turn for the healthcare they need received medical, dental, vision and preventive care at no charge.

For this pandemic era event, Care Harbor introduced new protocols, a redesigned layout and patient flow, and additional resources to ensure the health and safety of patients and volunteers alike. The clinic maintained social distancing, isolated treatment areas, and eliminated patient gathering points and interior lines within the venue. For example, dental chairs were reduced from 65 to 32 to allow increased spacing between stations. A necessary consequence of these COVID-19 precautions was reduced patient volume. However, while capacity was reduced, services per patient were increased.

The major service areas reported the following patient volume:

Medical 687 individuals
Dental 463 individuals
Vision 434 individuals

The total number of patients seen at the clinic was less than the sum of these services. Many patients received both dental and vision care in addition to medical visits and these individuals are duplicated in the above totals. An estimated **870** unique clients attended the free clinic and received multiple healthcare services. Care Harbor will return to its normal mega-clinic capacity as post-pandemic operations resume.

The need has never been greater. More than 80% of Care Harbor clients are in ethnic groups highly impacted by COVID-19. They are more than three times as likely to contract the virus, and disproportionately bear the economic and societal barriers to care imposed by the pandemic. Reimagining its clinic model allowed Care Harbor to respond to the needs of this vulnerable population.

A total of **1,335** professional and lay volunteers participated over the clinic's three days, working in full and half day shifts. Major hospital systems, provider organizations, schools and County agencies contributed financial and in-kind support. UCLA Health was presenting partner for the clinic, providing hundreds of volunteers, resources and funding. More than 30 other community partners took part.

2. PANDEMIC PROTOCOLS

To meet the special demands of the pandemic era, Care Harbor worked with the L.A. County Department of Public Health and our provider partners, creating a safe clinic environment that allowed us to bring needed care to the clients we serve.

At Department of Public Health recommendation, we contracted for MERV 13 air filters to be installed in the venue air circulation system. All volunteers were required to be fully vaccinated and present proof of vaccination at check-in. They were provided with PPE protection as needed, including N95 masks, face shields, gowns and gloves. Patients waiting in line for entry received symptom screening and temperature checks, and were given KN95 masks. Those presenting symptoms (fewer than 10) were given rapid tests at an exterior mobile unit before entry was allowed. There were no positive tests. Mask wearing and social distancing were enforced throughout the clinic.

To eliminate patient gathering points, exhibitors were excluded from this clinic and interior lines were replaced with socially distanced waiting areas. Patient lunch areas were eliminated, with patients given box lunches at exit.

Dental chairs were spaced 10 feet apart and enclosed in cubicles. Vision lanes were reduced in number and each included both phoropter and slit lamp so optometrists could complete two exams with a single patient encounter. On-site frame and eyeglass selection was replaced with vouchers that allowed patients to bring their prescriptions to local optometry practices and receive free glasses. Medical exam rooms were reduced in number and spaced.



Patients were given COVID-19 preventive education. All three vaccines were available at the clinic and patients were encouraged to receive the shots.



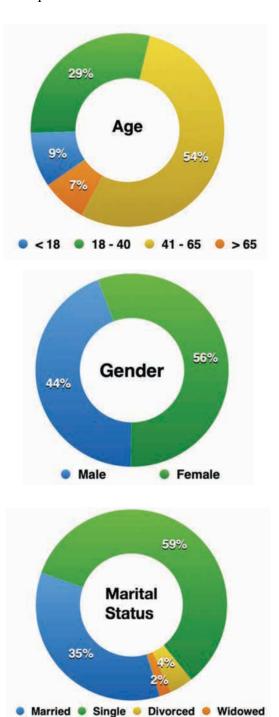
The goal of the new procedures and protocols was to allow Care Harbor to continue providing the integrative, patient centered care of our past clinics without significant compromise. Some of the changes – dental chair enclosures, for example – may be continued in future clinics because they proved to enhance quality of care and the patient experience.

3. CLIENT DEMOGRAPHICS

Care Harbor's Electronic Health Record system (EHR) stores detailed data on patient demographics, existing health conditions, services received, and responses to questions asked during registration. Stripped of HIPAA sensitive data, the EHRs are a rich resource for research studies of a population not often sampled in this depth.

Ethnicity	Total	Percentage
Latinx / Hispanic	609	72%
Male	253	
Female	355	
Transgender	1	
Black or African American	96	11%
Male	42	
Female	54	
White	28	3%
Male	16	
Female	12	
Asian	20	2%
Male	12	
Female	6	
Transgender	2	
Bi-Racial	5	1%
Male	3	
Female	2	
Other	14	2%
Male	6	
Female	7	
Transgender	1	
No Answer	77	9%
Male	37	
Female	40	

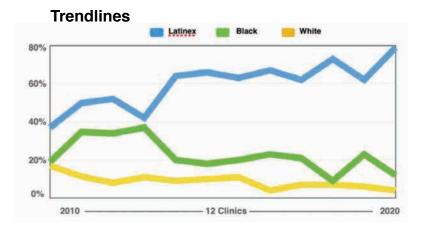
"Other" category includes American Indian, Pacific Islander and other ethnicities below 1% of the total patient population.



Preferred Language



Clients at the Care Harbor clinic spoke a total of 13 languages. Spanish and English were the most prevalent, with Mandarin the next leading language. Interpreters are a vital component of care at the clinics, not only helping to ensure accurate patient/clinician communication, but also helping to bridge cultural gaps that can become barriers to care among underserved populations.



The percentage of Latinx clients has increased since 2014, the year ACA coverage began in California. Latinx Medi-Cal enrollment was initially much lower than other ethnic groups, which may have contributed to the demographic shift. Latinx enrollment has since increased but employer provided coverage for this ethnic group remains lower than others.

Care Harbor's March clinic was open to everyone. There were no income tests, insurance or residency requirements. Care Harbor has moved into a vacuum that traditional healthcare systems don't fill and it has earned the trust of those who are otherwise without access to the healthcare they need.

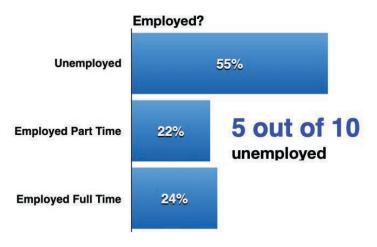
The clinic program has become a resource for data that helps illuminate the changing needs of L.A. County's underserved populations. To develop this research



opportunity and ensure future programs are closely aligned with community needs, Care Harbor is working with the RAND Corporation to develop the extensive data stored in its electronic record systems and make this information retrievable and available for study.

Patient Responses

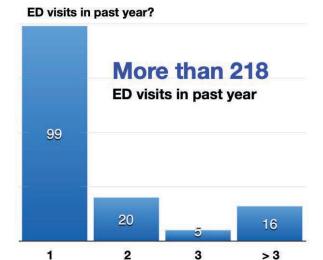
Patient questions were asked at registration and answers recorded in the EHR system. Responses can be correlated with ethnic, gender and other patient data.



Based on 87% sample. Patients who chose not to answer or were under 18 are not included. The percentage of unemployed is lower than the previous Care Harbor clinic (63%),







140 patients said they had visited the Emergency Department in the past year –218 + visits in all. A Kaiser Health study puts the average cost of an ED visit at \$2,032, placing the cost of ED visits by Care Harbor patients at more than \$442,000. If visits were for routine or preventable medical needs, the potential savings are substantial.

Geographic Distribution (Zip Codes)

Clients from 142 zip codes attended the clinic. Results are based on 96% sample. Zip codes with missing digits or extra digits are omitted.

90001	14	90033	9	90250	7	90723	5	91732	7
90002	43	90034	4	90255	15	90731	1	91762	1
90003	40	90036	1	90260	2	90742	1	91776	1
90004	13	90037	36	90262	11	90744	3	91786	1
90005	10	90038	6	90266	1	90745	6	91801	4
90006	21	90040	1	90270	3	90746	1	91803	1
90007	14	90042	1	90280	34	90774	1	92307	1
90008	7	90043	9	90291	2	90805	7	92341	1
90009	1	90044	31	90301	12	90807	1	92374	1
90011	60	90045	1	90302	10	90808	1	92376	1
90013	2	90047	17	90303	3	90813	1	92399	3
90014	3	90048	2	90304	3	91001	1	92405	2
90015	10	90056	2	90305	1	91006	1	92705	1
90016	15	90057	11	90404	1	91101	3	92802	1
90017	15	90058	6	90502	2	91107	1	92804	2
90018	13	90059	10	90505	1	91206	1	92867	1
90019	4	90061	5	90602	1	91214	3	93001	3
90020	2	90062	11	90603	1	91326	1	93010	1
90021	1	90063	8	90604	4	91331	4	93030	1
90022	5	90065	4	90605	1	91343	1	93063	1
90023	10	90201	37	90606	4	91352	3	93453	1
90025	3	90205	1	90621	1	91357	1	93550	3
90026	6	90208	1	90630	1	91401	1		
90027	3	90212	1	90650	2	91423	1		
90028	1	90220	4	90660	2	91601	1		
90029	4	90221	5	90703	2	91605	2		
90030	3	90222	11	90706	1	91706	3		
90031	10	90242	7	90715	1	91722	3		
90032	3	90247	3	90716	1	91723	1		
90001	14	90249	2	90722	1	91731	1		

4. COMMUNITY ENGAGEMENT

Care Harbor is a community effort. The March, 2022 clinic created the opportunity, setting and systems for volunteer professionals, lay people, and more than thirty hospitals and provider organizations to come together and bring coordinated, integrative healthcare to those in need. Community partners are listed on page 16 of this report.

Volunteers registered for the event on Care Harbor's online system. Licenses were vetted and clinic orientation and protocol briefings (emails and webinars) were provided to volunteers prior to the event. Volunteers were emailed a scannable QR coded pass to speed sign in for i.d. badges at the event.

	Registered	Attended	% Attended
Medical Professionals	238	209	88%
Medical Students	264	267	100%
Dental Professionals	118	110	93%
Dental Students	270	244	90%
Vision Professionals	52	39	75%
Vision Students	108	85	79%
General Volunteers	297	285	96%
Educators/Navigators	97	96	99%

There is normally attrition in the weeks between online registration and clinic attendance but the rate of attendance for most volunteer categories was higher than previous clinics despite pandemic concerns.



The entire community benefits. Diagnosing diseases before they reach a critical and costly stage reduces the burden on safety net resources. Correcting vision or dental problems can make people more employable. Medical, dental and optometry students who participate gain invaluable clinical experience and begin what may be a lifelong commitment to helping the underserved.

Top Ten Volunteer Schools

UCLA - University of California, Los Angeles	221
Western University	155
CSCI - California State University, Channel Islands	50
UCI - University of California, Irvine	40
PMCI - Professional Medical Careers Institute	33
Mount Saint Mary's University	27
West Los Angeles College	27
USC - University of Southern California	20
Pacific College	18
Glendale Career College	16



5. REGISTRATION & TRIAGE

Patients were registered at 20 stations where their electronic health records were established. These EHRs include patient demographic information, existing conditions, and responses to research questions. All medical, dental, vision, preventive care and other services are recorded in the EHRs as patients move through the clinic. These data are a primary resource for this report.

After registration, patients received triage exams at 48 stations where RN's assisted by student nurses took medical and social histories, recorded vital signs, and administered blood glucose tests. The pandemic has increased the incidence of stress and depression among the population Care Harbor serves, and screening questions were incorporated into the triage exam to identify mental health needs. Patients were given the opportunity to meet with mental health professionals at the event, for counseling, evaluation and referrals.

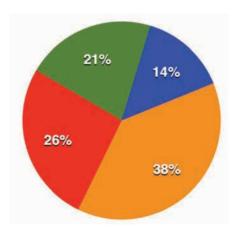


Triage Findings

Hypertension

Normal	Elevated	Stage 1	Stage 2
<120 AND <80	120-129 AND <80	130-139 OR 80-89	>140 OR >90

Source: Mayo Clinic



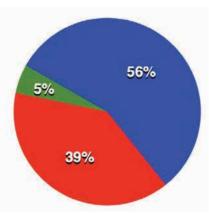
64% of patients tested had stage 1 or stage 2 hypertension. Patients whose charts showed high blood pressure were rechecked in the medical department, and were given counseling on prevention and self-care measures.

1% of patients tested were at the stage of hypertensive crisis -- blood pressure of >180 or > 120 (systolic and diastolic readings). These patients were escorted to the medical section for further evaluation and response. (EMT teams and ambulance transport are available at Care Harbor free clinics if needed.)

Blood Glucose

Normal	Prediabetes	Diabetes
< 100	100-125	>125



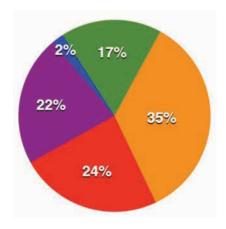


Blood glucose levels taken for all patients were for general reference and not considered diagnostic. Clinicians interpreted qualifying factors such as fasting or postprandial status, age and others to help identify prediabetic or diabetic patients. 39% of patients tested had a diabetic glucose level. Those patients were referred to the medical section where they were further evaluated. Patients with diabetes received medical and specialty exams, retina scans, and counseling with dieticians. They were also provided with glucometers and strips, and instructions for use.

Body Mass Index

Ur	nderweight	Normal	Overweight	Obese	Severely Obese
	< 18.5	18,5 - 24.9	25 - 29.9	30 -34.9	35+

Source: CDC



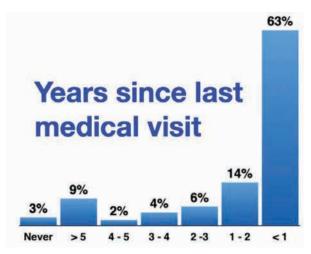
BMI varies significantly among ethnicities. Results are for the overall patient population. Ethnic breakdowns of BMI categories are available from Care Harbor's EHR database.



6. MEDICAL SERVICES

209 medical professionals volunteered for the clinic, including physicians, nurses and other professionals. **267** medical and nursing students volunteered. Volunteers had the option of half or full day shifts. **687** patients received primary and specialty care medical exams in 30 exam rooms and 48 intake triage stations. Diagnostic equipment included echocardiogram, ECG, abdominal ultrasound, an onsite medical lab and offsite pathology lab.. An onsite dispensary filled patient prescriptions. COVID-19 vaccines (Moderna, Pfizer and Johnson & Johnson) were available to patients who had not received shots or boosters.





63% of patients said they had seen a doctor in the past year — a decline from 74% at the previous Los Angeles clinic (November 2019). While primary care providers were accessible to the majority of patients, County waiting times to see a specialist can be long — often 3 months or more. (Percentages above are of patients who responded — 88%. of total.)

Medical services included primary care exams and specialty care including internal medicine, dermatology, podiatry, gynecology and others. Care Harbor provides integrative care so that a patient receiving a primary care exam may be referred to one or more medical specialties, as well as dental or vision professionals, all under one roof in one visit.





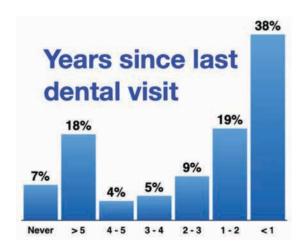
7. DENTAL SERVICES

110 dental professionals volunteered, including general dentists, endodontists, hygienists and dental assistants. 244 dental, hygiene and assisting students took part. The dental section included 32 semi-enclosed dental chair and operatory stations, 2 digital x-ray rooms, 6 dental triage stations, instrument cleaning and sterilization, and supply areas.

Services included cleanings, fillings, extractions, and root canals. Patients also received preventive care including oral health education, nutrition instruction and fluoride varnish treatments. 1,893 dental services were provided – more than 4 per patient.

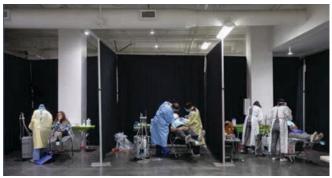
Dental chairs were spaced 10' apart, with barriers between stations and an upgraded air filtration system installed, to limit dental aerosol dispersion.

In past clinics, patients were asked to choose between dental and vision services (medical services are available to all). This was to ensure that the most urgent health needs could be provided to the maximum number of patients. However, at the March, 2022 clinic, patient capacity within the physical venue was limited by the pandemic need for social distancing, so the number of services received by each patient was increased. Patients who needed both dental and vision care were able to receive both.



38% said they had seen a dentist in the past year, a decline from 45% at the previous Reef event. Economic and cultural barriers to care make oral health less accessible to to the populations Care Harbor serves. (Percentages above are of patients who responded – 86% of the total.)



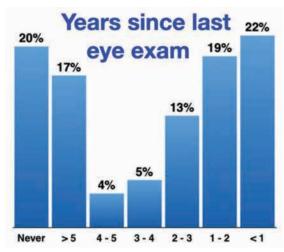


8. VISION SERVICES

39 vision professionals volunteered, including ophthalmologists, optometrists and opticians. **85** optometry students took part. The vision section included 12 vision lanes with phoropters and slit lamps. Additional equipment included lensometers, autorefractors, tonometers, and a fundus camera for retina scans.

Patients received eye exams, eyeglass prescriptions and free eyeglasses. Glasses with lower corrections were manufactured on site, with higher corrections and bifocals provided for free by local optometry practices, redeeming vouchers provided to Care Harbor by Eyes of Hope.

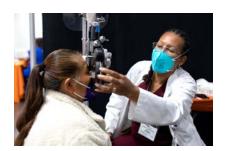
In recent years, vision services have become as much in demand as dental services at Care Harbor free clinics. Patients diagnosed with diabetes may also be given retina exams in the vision department.



22% of patients said they had an eye exam in the past year, a decline from 32% at the previous Los Angeles clinic. Percentages above are of patients who responded - 86% of total.







9. HEALTH LITERACY

Patients who come to Care Harbor are often anxious about their health, the care they will receive and the intimidating scale of the event itself. Many have a lack of language fluency, are unfamiliar with medical terms, and may have a cultural reluctance to ask questions of the examining physician. As a result, they may leave the exam room without a full understanding of their diagnosis or recommended treatment plan.

Care Harbor's Health Literacy Program is designed to help patients fully understand their health conditions and clinician instructions, promoting compliance and improving outcomes. Developed with the Nursing School at California State University, the program has been expanded since its inception in 2017 and at the March event included dental and vision patients as well as medical.

Following their exams or treatments, patients were directed to a separate station where nurses and final year nursing students reviewed their charts, answered their questions, explained medication and self care instructions, and ensured that patients fully understood what clinicians had told them. Interpreters or bi-lingual nurses were available for patients not fluent in English. The relaxed, conversational setting of these post-exam sessions reduced anxiety and empowered patients to participate fully in their own care.





Visual aids including anatomical models and short videos were available to help educate patients. Take home materials were available in English and Spanish. For patients diagnosed with diabetes, free glucometers and test strips were provided, with instructions and demonstrations of their use. If other healthcare resources at the clinic were of value to the patient, they were directed or escorted to them.

10. SUSTAINABLE CARE

Care Harbor provides integrative care with a patient centered approach specific to the needs of each person served. The clinic program is focused on sustainable health, with the understanding that the lack of accessible medical, dental or vision care that brought patients to Care Harbor may continue after they leave.

With the Health Literacy Program, the diabetes management initiative and other efforts, the Care Harbor LA clinic continued to give patients the education and resources that can help them lead healthier lives.

Patients needing follow-up care were connected to local medical and dental homes for continuing treatment and evaluation.



Coverage navigators were on site to enroll patients into low cost or no cost insurance and assistance programs available to them. Close to one million individuals under the age of 65 in L.A. County are uninsured.

There are high levels of stress and depression among Care Harbor clients, many of whom cope with extreme difficulties in their daily lives. The clinic has continued to

expand its mental health capabilities, with on-site counseling and referrals.

Longer term, the L.A. clinic has added to Care Harbor's database, recording demographic, geographic and clinical data for the patients served. These data can help measure the near term and long term impacts of Care Harbor's program, and identify emerging health issues faced by Care Harbor's client base. This information deepens understanding of the patients we serve and directs our future efforts in meeting their needs.



11. COMMUNITY PARTNERS

Presenting Sponsor

UCLA Health

Gold Community Partners

Holly J. Mitchell, 2nd District Supervisor, L.A. County

Good Hope Medical Foundation

L.A. Care Health Plan

Healing California

Western University of Health Sciences

Silver Community Partners

Kaiser Permanente

VSP Vision Care, Inc.

UCLA School of Dentistry

El Pollo Loco

L.A. County Department of Public Health

L.A. County Department of Public Social Services

L.A. County Department of Mental Health

Operation USA

Bronze Community Partners

American Dental Association

California State University Channel Islands

Patterson Dental Supply

The Shield Group

Brush Family Foundation

Conrad N. Hilton Foundation

Alexander Alacche Foundation

Los Angeles Dental Society

Los Angeles Dental Hyienists' Society

Healthcare Career College

West Los Angeles College

West Coast University

Los Angeles Trade Technical College

Southern California Regional Occupational Center

Medico Linens

Robert S. Gordon, OD

Mignon Manelli

Beth deHamel

Marc Cohen

APPENDIX - BOARD OF SUPERVISORS REPORT



TO: Supervisor Holly J. Mitchell, Chair

Supervisor Hilda L. Solis Supervisor Sheila Kuehl Supervisor Janice Hahn Supervisor Kathryn Barger

Los Angeles County Board of Supervisors

Hilda L. Solis
First District

Holly J. Mitchell (Chair)
Second District

Sheila Kuehl Third District

Janice Hahn Fourth District

Kathryn Barger Fifth District FROM: Christina R. Ghaly, M.D., Director

Department of Health Services

Lisa Wong, Psy.D., Acting Director

Department of Mental Health

Barbara Ferrer, Ph.D., M.P.H., M.Ed., Director

Department of Public Health

Jaclyn Baucum, Chief Operating Officer

Alliance for Health Integration

for Jaclyn Baucum

Jaclyn Baucum
Chief Operating Officer
Alliance for Health Integration

Christina R. Ghaly, M.D. Director, Department of Health Services

Lisa Wong, Psy.D.Acting Director, Department of Mental Health

Barbara Ferrer, Ph.D., M.P.H., M.Ed. Director, Department of Public Health DATE: July 25, 2022

SUBJECT: PARTICIPATION AND SUPPORT FOR THE CARE

HARBOR CLINIC AT THE REEF EXPO HALL IN

DECEMBER 2021 (ITEM NO. 13 OF THE AUGUST 10, 2021 BOARD AGENDA)

313 N. Figueroa Street, Suite 1014 Los Angeles, CA 90012 On August 10, 2021, the Los Angeles County (County) Board of Supervisors (Board) approved the motion, "Participation and Support for the Care Harbor Clinic at the Reef Expo Hall in December 2021."

"To improve the health and well-being of Los Angeles County residents by aligning and efficiently implementing Board-approved prevention, treatment, and healing initiatives that require the collaborative contributions of the three health departments."

As instructed by the Board of Supervisors, the Alliance for Health Integration (AHI) served and continues to serve as the County liaison for Care Harbor. AHI's duties include facilitating the site set up, department participation and take down at the clinic events, working with Care Harbor to identify appropriate sites for future Countywide events, as well as reporting on the outcomes and clinical results of each Care Harbor event. Listed below and attached are the results from the Care Harbor Clinic, as requested by the Board.



Due to COVID-19 surges and planning adjustments necessary to ensure patient safety, the Care Harbor Clinic was rescheduled several times throughout 2021. The event was held once pandemic mitigation measures could be appropriately executed.

From Friday, March 4 through Sunday, March 6, 2022, Care Harbor conducted its twelfth free clinic in a 100,000 square foot space located at the Reef Expo Hall in Downtown Los Angeles.

NOTE:

Pages 1 through 4 of this Report to the Board of Supervisors duplicates the demographic information, charts and graphs from the Care Harbor "Clinic Results" report preceding and those pages are not repeated here. The remaining pages are the BOS Report's summary of L.A. County support and participation at the Care Harbor free clinic.

Recruitment:

AHI worked closely with the Department of Human Resources (DHR) who contacted Department Managers and staff to recruit County employees to volunteer for one of the three days of the clinic. AHI shared volunteer "Job Aides" with DHR to assist County staff with registration and assignments. In total, DHR estimated that 109 individuals from the County volunteered for the event.

With adjustments to allow for more social distancing and to reduce patient gathering points, the number of County Exhibitors attending were significantly reduced compared to past Care Harbor Clinic events. And as a result, Care Harbor sent AHI a list of the eight most needed services among their clientele and asked AHI to coordinate participation from the following Departments:

- **Department of Public Social Services (DPSS):** Medi-Cal applications and Cal Fresh enrollment
- Department of Mental Health (DMH): On-site mental health services and education
- Department of Public Health (DPH): Vaccinations and HIV Test Take Home Kits
- Department of Health Services (DHS): My Health LA enrollment
- Office of Immigrant Affairs: Counseling on rights and resources
- Registrar Recorder/County Clerk: Voter registration and birth records
- Public Defender and Alternate Public Defender: Record expungement and legal counseling
- Department of Housing and Community Development: Housing rights and resources

While Care Harbor and AHI recognized that there were many more services and resources that the County offers, due to limited capacity and space, AHI moved forward with coordinating participation with the Departments that were on Care Harbor's priority list.

Planning and tight coordination with Care Harbor occurred from November 2021 and through the day of the clinic. Given all of the safety precautions and inspections that occurred, AHI and Care Harbor met bi-weekly over a four-month period and then more frequently during the month prior to the clinic.

AHI created additional "Job Aides" for Exhibitors to assist them in registering for the free clinic, shared floor plans and regular updates, and also hosted weekly office hours four weeks prior to the event, where Exhibitors could join and ask questions to Care Harbor or AHI staff to ensure that all County Exhibitors had their questions and/or concerns addressed in a timely fashion.

All Exhibitors designated a point person that was responsible for set-up and bringing materials and signage for their designated spaces.

County Exhibitor Results:

Exhibitors were placed on the second floor where clinical services were also taking place. The idea was that while attendees waited for services, they could also walk around and visit the different tables and learn about supporting resources and services.

Because the Health Literacy Team reviewed the patients' charts, the County proactively shared the list and floor map of County services and resources available on-site. Connecting patients to resources through the Health Literacy Teams was extremely effective. The Medical Services Health Literacy team asked each attendee if they had health plan coverage and if they were not sure or did not have coverage, a team member would walk the patient over to DPSS. Thanks to the partnership with the Health Literacy team, DPSS counseled 410 attendees and enrolled 29 individuals into Medi-Cal. The Medical Services Health Literacy team also showed patients to the DPH booth next door to the Medical Services station where attendees could receive take-home HIV test kits. As a result, 204 kits were distributed.

The Public Defenders and Alternate Public Defenders hosted two tables on the second floor and together, performed 13 on-site record expungements and gave legal advice to 16 attendees. The legal teams also shared information with family members on record expungements and resources.

82 attendees visited the Office of Immigrant Affairs table where they provided literature and education on immigrant services, rights and consumer protections. 42 attendees sought out information on rent control and renters' rights at the Housing and Community Development table. The Registrar-Recorder's Office was also onsite for voter registration and printing birth certificates and in total, 30 attendees visited their table.

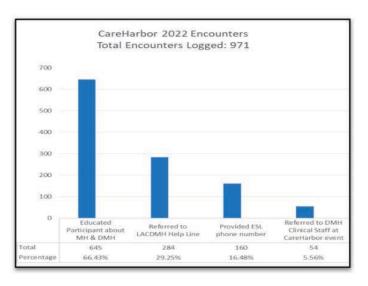
DHS' My Health LA and Office of Patient Access hosted a table and distributed information for uninsured residents. The DHS team educated 75 attendees and also cross-referred to DPSS, as needed.

The DPH vaccination team was on-site to provide COVID-19 vaccinations, boosters, and influenza vaccines. DPH immunized a total of 50 attendees: 30 Covid-19 vaccines including boosters and 20 influenza vaccines. Care Harbor allocated a space for the vaccination team that included prep areas, tables to administer vaccinations, and a dedicated waiting space with chairs.

During the planning phase, Care Harbor emphasized a great need to have mental health support at their clinic event. Their vision was to have DMH not only as an Exhibitor, but to also provide on-site support services to attendees. The DMH team was on-site for three purposes: 1) outreach and engagement/support/education; 2) Triage and linkage to

ongoing services; and 3) On-the-spot crisis intervention. DMH had two locations, one on the first and another on the second floor. In total, DMH logged a total of 971 encounters over the three-day period. DMH provided the following chart breaking down the type of encounters. Many attendees received more than one service provided by DMH.

The column "referred to DMH clinical staff" was meant to capture any oneto-one "counseling" contact with participants. While 54 only encounters were logged, many of these contacts lasted for a minimum of 30 minutes, with several extending to one hour or longer. While the purpose of the Care Harbor Clinic was not the delivery of mental health treatment services, it was important and valuable to have clinicians available to provide a deeper level of intervention/de-escalation when needed. As an example, when the



wait times were lengthy or there were not enough providers to deliver planned services, some attendees became upset and DMH providers were able to offer their services and de-escalate.

Lessons Learned

Post-event, AHI surveyed the County Exhibitors and key contributors to solicit feedback and identify opportunities for improvement. While the pre-planning meetings and optional office hour calls were helpful, many survey respondents suggested that Care Harbor and AHI host a pre-meeting with County Exhibitors and the non-County clinical volunteers to allow each Department and service provider to share what types of services and resources they offer. They felt that having this information early-on would further advance on-site patient connections to services and resources for future events fostering the vision for integrated care and service linkages.

The next Care Harbor Clinic is tentatively scheduled for late October 2022 in Los Angeles County at the Pomona Fairplex. With a larger space, Care Harbor is hoping to expand the number of County Exhibitors and services, while also increasing the capacity of attendees they are able to serve. AHI will continue its role as the County Liaison with Care Harbor and has already begun planning meetings.

Conclusion

AHI would like to, again, acknowledge, the following Departments for their partnership and involvement in Care Harbor's March 2022 free clinic: DHS, DPH, DMH, Public Defender and Alternate Public Defender, Registrar-Recorder/County Clerk, DPSS, DHR, Superior Courts, Office of Immigrant Affairs, Parks and Recreation, Housing and Community Development, and the Chief Executive Office.