

## NATIONAL CONSUMER ADVISORY BOARD

# SUMMARY OF HEALTH CARE FOR THE HOMELESS CONSUMER GOVERNANCE REQUIREMENTS

Many Health Care for the Homeless (HCH) projects receive federal funding as part of the Consolidated Health Center program. Other projects such as Community Health Centers and Migrant Health Centers also receive this funding, often called “Section 330” funding for the section of the Public Health Service Act that establishes the program.

As a condition of its federal funding, a Consolidated Health Center must be governed by a Board of Directors which represents the community served by the project. Under the law, a Board must:

- Be comprised of a majority (at least 51%) of individuals (“consumers”) who are being served by the health center and who, as a group, represent the individuals being served by the health center.
- Meet at least once a month.
- Select the services to be provided by the health center.
- Schedule the hours during which such services will be provided.
- Approve the health center’s annual budget.
- Approve the selection of a director (Program Director or CEO) for the health center.
- Establish general policies for the health center, except in the case of a governing board of a public center.
- Approve applications for subsequent grants for the health center.

The law allows an HCH project to obtain a waiver of these requirements *if it is not part of a Community Health Center*. About half of the HCH projects qualify for a waiver, which exempts them from one or more of the requirements listed above.

Waivers are available because the circumstances of many homeless persons’ lives make active participation on a Board of Directors very difficult. In applying for a waiver, however, an HCH project must establish plans for obtaining guidance from the homeless people it is intended to serve. Under their waivers, HCH projects have created a number of ways for consumers to influence decisions by HCH projects. These include:

- Including some consumers on the Board of Directors (even if not a majority).

- Establishing a Consumer Advisory Board (CAB), made up of consumers, which provides advice to the Board of Directors in a regular, formal way.
- Conducting regular focus groups to learn from consumers about how the program is meeting -or not meeting- their needs.
- Distributing questionnaires or “patient satisfaction surveys” to HCH patients.
- Asking consumers to do regular outreach to other homeless persons, inquiring about their health care needs and experiences, and compiling this information.

Community Health Centers with HCH funding are required to have at least one homeless consumer on their Board of Directors, and should use additional approaches like those described above to help assure that they are getting broad-based input from homeless consumers.

Some HCH projects are working toward the creation of majority consumer Boards of Directors, a development that we encourage.

A fuller description of these matters is available in our *Consumer Advisory Board Manual*, available at [http://www.nhchc.org/Publications/CA06E\\_CAB\\_Manual.pdf](http://www.nhchc.org/Publications/CA06E_CAB_Manual.pdf).

Outreach forms, in English and Spanish, have been created for Consumer Advisory Boards to use in inquiring about the health care needs and issues of other homeless people, and are available from the National Consumer Advisory Board.

Section 330 of the Public Health Service Act is available at <http://www.nhchc.org/Publications/REAUTHORIZATION.pdf>.

For assistance with consumer governance at an HCH project, including trainings for consumers, staff and Board members, contact the National Health Care for the Homeless Council and the National Consumer Advisory Board, at [ncab@nhchc.org](mailto:ncab@nhchc.org).

Please visit our website at [www.nhchc.org](http://www.nhchc.org).

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