

Orange County Health Care Agency
Public Health Services

Strategic Plan

2018 - 2020



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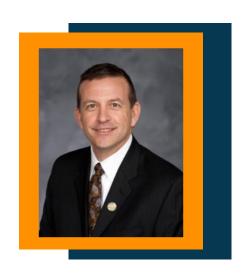
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Message from the Deputy Agency Director

On behalf of Public Health Services, it gives me great pleasure to present the Orange County Health Care Agency *Public Health Services Strategic Plan* for 2018-2020. This plan provides a renewed look at our strategic priorities and lays out goals and objectives for Public Health Services over the next three years. This plan serves as a living document that strengthens our work toward our vision of "A thriving and safe Orange County where everyone has the opportunity for optimal health and quality of life."

This strategic plan is a result of a planning process that reviewed community priorities, needs, and opportunities. Our assessment showed again that Orange County's health continues to fare well as a whole when compared to other areas. However, there remain key areas of disparities and opportunities to make improvements. These focus areas emerged as priorities where Public Health Services could make an impact and include: 1) Maternal and Infant Health; 2) Healthy Weight and Fitness; 3) Chronic Disease Prevention and Management; 4) STDs and HIV; and 5) Alcohol, Tobacco, and Other Drugs.



Over the past five years, Public Health Services has led efforts for the *Orange County Health Improvement Plan*, Orange County's community health assessment and community health improvement plan. The *Strategic Plan* aligns with and builds upon gains that we have made through those efforts. Our community partners are key in helping us fulfill our core mission to protect and promote health in Orange County and this plan underlines many areas where our work aligns.

The *Strategic Plan* also highlights some of the great work that already is happening in programs throughout Public Health Services. This past year, we launched Public Health Initiative for Results and Excellence (PHIRE), which has helped to engage staff in identifying key objectives, community needs, and best practices for our programs. Most importantly, PHIRE has helped to reinforce and expand our efforts for continuous quality improvement. Again, while the plan cannot include all of our programs, we acknowledge that every program contributes to the overall mission of Public Health Services.

I continue to be deeply grateful for our staff and am proud of the excellent work that we do. I want to take this opportunity to thank our staff for your commitment in making Orange County a healthier place to live, work, and play.

David M. Souleles, MPH

Deputy Agency Director, Public Health Services

Orange County Health Care Agency

About Orange County

Orange County is located in Southern California, between Los Angeles and San Diego counties, and is composed of 798 square miles of land with 34 cities and additional unincorporated areas.

The county is home to more than <u>3 million people</u> and is the 6th most populous county in the nation. Orange County is a **diverse** region, with no single racial/ethnic group making up a majority of the population. The population is approximately <u>40% White</u>, <u>35% Hispanic</u>, <u>20% Asian</u>, and <u>2% African-American</u>. Almost half (46%) of the county's population <u>speak a language other than English at home</u>.

Orange County's **cost of living** is higher compared to other regions. A family with two adults and two schoolage children needs a total family annual income of \$70,285 to meet its basic needs.¹ In 2017, 21% of households had an <u>annual income of less than \$35,000</u>.



80.4%

% of adults reporting good, very good, or excellent health

California Health Interview Survey 2014-15

4.4 per 1,000

Infant mortality rate
Orange County Master Birth Files, 2015

85.2%

% of pregnant women in early prenatal care Orange County Master Birth Files, 2015

23.5%

% of adult who are obese California Health Interview Survey 2015

10.8%

% of adults who smoke California Health Interview Survey 2014-15



As a whole, Orange County residents tend to be healthier than those in other counties. The 2017 County Health Rankings ranked Orange County the **7**th healthiest county in California.² However, an assessment of the county's health shows real health disparities and challenges.

Among the most fundamental health disparities are those of **average life expectancy**. The average life expectancy of an Orange County resident is 84.4 years. Life expectancy of Asian & Pacific Islander females is almost 10 years more than African-American males.³

Most major **leading causes of death**, including heart disease, cancer, and stroke, have dropped dramatically over the past 10 years. However, deaths associated with Alzheimer's disease have increased and it is now the 3rd leading cause of death in the county.⁴ Advanced age is the leading risk factor for developing Alzheimer's disease. Adults 65 or older is expected to make up one in four Orange County residents by 2040.

At approximately 23%, Orange County's <u>adult **obesity**</u> <u>rate</u> is lower than state and national averages. This rate is higher in some populations; <u>with an obesity rate of 39%, Latinas</u> are almost twice as likely to be obese compared to the overall county population.

At almost 11%, <u>adult **smoking rates**</u> in Orange County are low compared to many other areas. Among <u>11th</u> <u>graders</u>, <u>the smoking rate is 5% in Orange County</u>, with some regions experiencing much higher rates. For example, 14% of 11th graders in the Laguna Beach Unified School District reported smoking in the past 30 days.

Public Health Services

Who we are...

Public Health Services is the local health department serving Orange County, California. Public Health Services is one service area under the Orange County Health Care Agency; other service areas include Behavioral Health Services, Correctional Health Services, Medical and Regulatory Health, and Administrative and Financial Services.

Public Health Services monitors the occurrence of disease, injury, and related factors in the community and develops preventive strategies to maintain and improve the health of the public. Public Health Services operates with a budget of nearly \$122 million and 706 dedicated employees. Below are the six divisions that make up Public Health Services.

California Children's Services

California Children's Services (CCS) is a statewide program that provides authorizations for **medical care**, financial assistance, and medically necessary **physical and occupational therapy** services to children who meet the CCS eligibility criteria.

Disease Control and Epidemiology

Disease Control & Epidemiology protects the health of Orange County residents by **monitoring** reportable communicable diseases, **investigating** communicable disease outbreaks, and through **prevention and treatment programs**, such as for STDs, HIV, and tuberculosis (TB).

Family Health

Family Health promotes family-focused preventative health care through **developing community linkages** and integrated programs such as **clinical and community services** for maternal, child, and adolescent populations, **nutrition services**, and **dental services**.

Health Promotion

Health Promotion protects the health and safety of Orange County residents by **providing health education** and **building the capacity** of individuals, organizations, and communities to promote optimal health and prevent disease, disability, and premature death.

Public Health Laboratory

Public Health Laboratory provides clinical diagnostic and environmental **laboratory support services** for all programs within the Agency, **consultation services** to other laboratories and the medical community, and **biothreat agent testing** services for law enforcement.

Public Health Nursing

Public Health Nursing provides community and inhome health education, health assessments, case management, and health access support to promote optimal health across the lifespan.





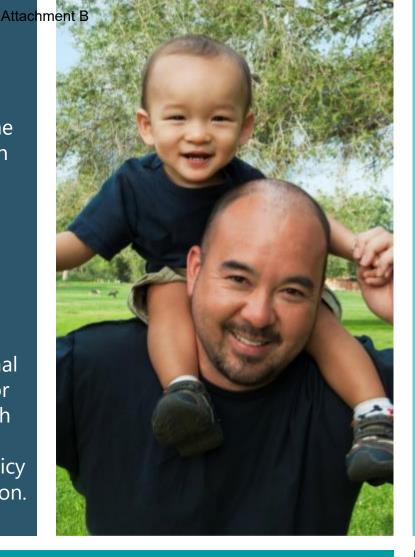


Our Vision

A thriving and safe Orange County where everyone has the opportunity for optimal health and quality of life.

Our Mission

In partnership with the community, we promote optimal health for all who live, work, or play in Orange County through assessment and planning; education and services; and policy development and implementation.



Our Values

Our work is guided by the following organizational values:

Excellence

We strive to provide quality services that meet the needs and exceed the expectations of the individuals and communities that we serve. We promote efforts to continuously improve our services and outcomes through best practices and innovation.

Integrity

We adhere to high ethical and professional standards in our work and interactions. We are conscientious stewards of the resources entrusted to us.

Health Equity

We believe in promoting health and wellness for all in Orange County regardless of social, economic, or cultural factors. We strive to foster policies and programs address the needs of our diverse communities, consider the social determinants of health, and incorporate practices that reduce health disparities.

Our Planning Process

Between April and December 2017, Public Health Services (PHS) engaged in a planning process to update the *Public Health Services Strategic Plan* for 2018-2020. The following describes the planning process.

Strategic Planning Steering Committee

The Steering Committee guided the planning process and included the Public Health Director, Deputy Health Officer, Chief of Operations, Projects Manager, division managers, and medical directors.

Strategic Planning Work Group

The Strategic Planning Work Group participated in a half-day strategic planning meeting to work on key elements of the plan. The group was composed of 58 individuals from across Public Health Services including managers, supervisors, support, and direct service staff. A full list of participants is listed on page 22.

Engaging Staff

The Public Health Services strategic planning process began with efforts to provide information for and involve staff at all levels. In May, experts from Public Health Services provided updates on how Orange County was doing on key health topics at the **State of Orange County's Health**. Between May and June, an all-staff survey was conducted and allowed staff to provide feedback about the Vision, Mission, Values Statements, and enhancement strategies.

Affirming Our Foundation

The Strategic Planning Work Group held a meeting on June 7. The work group consisted of 58 individuals from throughout Public Health Services. The work group reviewed results of the all-staff survey and recommended minor changes to better clarify and align the vision, mission, and value statements with staff sentiments.

Assessing Our System

The Strategic Planning Work Group also reviewed **system improvements** (see page 20) identified in the previous strategic planning process as capable of enhancing the work of Public Health Services. The strategies include integrating across Public Health Services, collaborating with community partners, engaging community members, improving communication, policy development, and evaluation. The work group reviewed findings from the staff survey assessing how well Public Health Services is currently utilizing the strategy. The work group then discussed strengths and opportunities for each strategy.







Our Planning Process

Identifying Our Priorities

At its June meeting, the Strategic Planning Work Group reviewed the following information before and during the meeting to determine which health priorities Public Health Services could positively impact locally and had the greatest opportunity to improve:

- CDC's Winnable Battles, Let's Get Healthy California, and National Prevention Strategy
- Orange County Key Indicators and State of OC's Health presentations

After the discussion, the work group voted on priority health issues to include in the Public Health Services Strategic Plan. The Steering Committee reviewed the votes and consolidated the topics into **five focus areas**:

- 1. Maternal and Infant Health
- 2. Healthy Weight and Fitness
- 3. Chronic Disease Prevention and Management
- 4. STDs and HIV
- 5. Alcohol, Tobacco, and Other Drugs

Setting Objectives and Strategies

After the focus areas were determined, planning work groups met during a series of meetings between August and November 2017 to determine **objectives and strategies** for each area. The work groups reviewed more in depth data for each priority area, identified programs across Public Health Services that worked to address the issue, and then identified strengths, weaknesses, opportunities, and threats for each area. Work groups then determined objectives and strategies for each focus area.

Focus Area Planning Work Groups

Planning Work Groups for each focus area were led by the division manager(s) from divisions with the most effort in the area. Members included PHS staff with expertise from across Public Health Services and others with interest in the topic.







Aligning Our Plans

The *Public Health Services Strategic Plan* carefully considered other plans that provide the context for health improvement for Orange County. In turn, the *Strategic Plan* is the foundation for other operational work plans.



The *Orange County Health Improvement Plan* is Orange County's community health assessment and community health improvement plan. Public Health Services plays a key role in leading and implementing the plan. Many strategies outlined in

this *Strategic Plan* support objectives in the community health improvement plan.



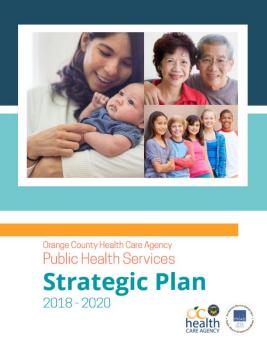
Health Care Agency Balanced Scorecard

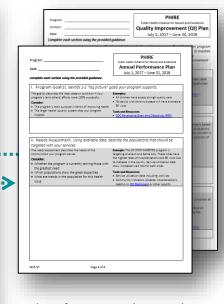
include key goals and performance measures for the agency. Public Health Services is one of five service areas within the Health Care Agency and contributes to key measures and goals.



Public Health Services Workforce

Development Plan and Quality
Improvement Plan outline key
assessment findings and training
priorities for Public Health Services. The
Strategic Plan helps to inform training
needs and activities for the work force.





Annual Performance Plans and Quality Improvement Plans under the *Public Health Initiative for Results and Excellence (PHIRE)* outline key performance measures and quality improvement efforts for Public Health Services programs. Where possible, program efforts support goals and strategies outlined in the *Strategic Plan*.

Summary of Goals

Focus Area 1:

Maternal and Infant Health

Goal: Optimal health outcomes for all moms and babies in Orange County.

Objective 1: By December 31, 2020, 90% of pregnant PHS clients will have a **postpartum medical visit** within 6 weeks of delivery.

Objective 2: By December 31, 2020, 98% of pregnant PHS clients served before 28 weeks, with a minimum of three visits, will deliver babies **free of exposure to alcohol, tobacco, and other drugs**.

Objective 3: Annually, 100% of PHS perinatal clients will receive **standardized comprehensive assessments**.

Objective 4: Annually, 100% of infants served by PHS maternal, infant, and child programs will receive a **developmental screening** with a standardized tool.

Focus Area 2:

Healthy Weight and Fitness

Goal: All Orange County children have resources and support to maintain a healthy weight.

Objective 1: By December 31, 2020, reduce the **obesity rate** among Orange County 5th graders by 5% to 17.1%.

Objective 2: By December 31, 2020, reduce the obesity rate among 5th graders in schools in **target communities** by 10% to 25.9% in Anaheim City, 26.7% in Buena Park, 24.2% La Habra City, and 27.5% in Santa Ana Unified.

Focus Area 3:

Chronic Disease Prevention and Management

Goal: Orange County residents will avoid disability and premature death through early identification and management of chronic diseases.

Objective 1: Annually, at least 65% of Public Health Nursing case management clients who have been assisted in **managing their chronic disease will have met their goals** at case closure.

Objective 2: By December 31, 2019, create or enhance **web and/or social media sites** to provide comprehensive tools and information for Orange County residents living with chronic diseases.

Focus Area 4:

STDs and HIV

Goal: No new STD or HIV infections in Orange County.

Objective 1: By December 31, 2020, decrease the **HIV transmission rate** in Orange County to 4.5 per 100 persons living with HIV disease.

Objective 2: By December 31, 2020, stabilize the **contagious syphilis** disease case rate in Orange County to at or below 15 per 100,000 people.

Focus Area 5:

Alcohol, Tobacco, and Other Drugs

Goal: Eliminate injury and disease in Orange County caused by alcohol, tobacco, and other drugs.

Objective 1: By December 31, 2020, **smoking cessation** services will be provided to 4,065 adults annually, a 50% increase compared to FY 2016.

Objective 2: By December 31, 2020, decrease **DUI collisions** in five cities that have the highest rate (and/or number) in Orange County by 5%.

Objective 3: By December 31, 2020, all cities will be offered individualized results regarding DUI crashes, training on best practice strategies, and social marketing tools and materials.

Focus Area 1: Maternal and Infant Health

Goal: Optimal health outcomes for all moms and babies in Orange County.

Why is this a priority?

Health begins with a healthy pregnancy, leading to a healthy birth, and continues with healthful practices for mother and infant. While the county fares better than state averages, some groups show increased risk of preterm births and low birth weight.⁵ Rising homelessness,⁵ poverty, and substance-exposed infants⁵ have also increased concerns for maternal and infant health, especially for higher-risk populations served by Public Health Services (PHS) programs.

Women 35 and older

are more likely to have a

preterm birth

and a

baby with low birth weight

compared to the OC average.

Source: OC Master Birth Files, 2015

What are we doing now?

Family Health provides coordination and services to support healthy families including:

- Clinic provides immunizations and safety net clinical services to infants and children, and family planning services for Family PACT clients.
- Women, Infants, and Children (WIC) offers nutrition education and breastfeeding support.
- CalLEARN and Teen Pregnancy Program provide case management to high-risk pregnant teens.
- Acts as the lead for the Orange County Perinatal Council, which brings together community partners to address birth outcomes.
- Provides technical support to the network of Comprehensive Perinatal Services Program and Child Health and Disability Program providers.

California Children's Services provides access to medical care, case management, and other support for eligible children.

Public Health Nursing provides nurse case management for pregnant and parenting women and infants. Assessment and Coordination Team (ACT) serves those with issues related to substance abuse, mental health, or who are HIV positive. Nurse Family Partnership works with low-income first-time parents under 24 years of age. Nurses work with high risk children through the Medically High-Risk Newborn or Health Access Promotion and Services programs. Early Childhood System of Care (ECSOC), Emergency Response, and Foster Care provides services to children in the Child Welfare System.

Planning Work Group Lead: Jenna Sarin Family Health

- Gerri-Lynn Arias
- Diann Chang

- Maridet Ibanez
- Elizabeth Jimenez
- Mahdere Negash
- Jody Nguyen
- David Núñez
- Pat Orme

- Marcia Salomon
- Maya Thona
- Shoshana Volkas

Focus Area 1: Maternal and Infant Health

Objective 1: By December 31, 2020, 90% of pregnant PHS clients will have a **postpartum medical visit** within 6 weeks of delivery.

Objective 2: By December 31, 2020, 98% of pregnant PHS clients served before 28 weeks, with a minimum of three visits, will deliver babies **free of exposure to alcohol, tobacco, and other drugs**.

Objective 3: Annually, 100% of PHS perinatal clients will receive standardized comprehensive assessments.

Objective 4: Annually, 100% of infants served by PHS maternal, infant, and child programs will receive a **developmental screening** with a standardized tool.

Key strategies

Support and maintain a knowledgeable and competent workforce: Facilitate staff education opportunities to increase knowledge on best practice and resources.

Promote and utilize standardized asset-based assessment: Develop, integrate, and implement standardized assessment tools (e.g. Core Perinatal Measures, Edinburgh, standardized substance use tool) to assure collection of uniform measures.

Provide targeted case management: Provide case management and timely linkage to resources to promote self-sufficiency.

Empower clients through health education: Increase knowledge and awareness about preconception, perinatal, and postpartum health by disseminating consistent health messages.

Work with partners to optimize utilization of resources: Promote use of consistent messaging and dissemination of resource information with community partners.



Highlighted Project

Family Health is leading community partners in launching **EveryWomanOC.org**, a website to share information about preconception, interconception, pregnancy, and post-partum health for mom and baby. The website supports efforts to improve birth and infant and child health outcomes stated in the **Orange County Health Improvement Plan**.

Focus Area 2: Healthy Weight and Fitness

Goal: All Orange County children have resources and support to maintain a healthy weight.

Why is this a priority?

Obesity is the 2nd leading behavioral contributor to death in the U.S.⁶ Obese youth are at greater risk for other health problems, including type 2 diabetes, high blood pressure, and asthma.^{7,8} Almost 1 in 4 (23.6%) Orange County adults is obese and more than 1 in 6 (18.0%) 5th grade students is obese. Rates are higher among Native Hawaiian/Pacific Islanders (36.2%) and Hispanics (26.8%). Students in school districts in Anaheim, Buena Park, La Habra, and Santa Ana have the highest rates of obesity.



- 1. California Health Interview Survey, 2015
- 2. California Department of Education, 2016/17

What are we doing now?

Health Promotion engages in activities that create changes in the built environment or increase access to healthy choices.

- The Injury Prevention program works with community partners to assess walkability and bikeability and supports annual Walk to School Day activities.
- The FIT Cities initiative partners with jurisdictions to create environments that are walkable and include options for healthy eating.
- MyHealthOC.org provides information and resources to help residents with healthy eating, physical activity, and quitting smoking.

Family Health provides education and support to promote heathy eating and physical activity.

- · Women, Infants, and Children (WIC) offers education and financial assistance for healthy food for low-income residents.
- Nutrition Education and Obesity Prevention (NEOP) program reaches low-income families and provides nutrition education and support in school and community settings.
- Family Health clinics partner with CHOC Prevention of Obesity and Diabetes through Education and Resources (PODER) to offer services at the 17th Street campus and the Live Great, Feel Great program to lower BMI.
- Family Health leads the Nutrition and Physical Activity Collaborative (NuPAC).

Planning Work Group

Lead: Amy Buch **Health Promotion**

- Ruth Aguilar
- Elsa Amezcua
- Marisela Barcenas

- **Christine Baun**
- Megan Beard
- Alicia Carranza
- Maridet Ibanez
- Travers Ichinose
- Theresa Krutsinger
- Deborah Kwang

- Anna Luciano-Acenas
- Rebecca Marsile
- Maria Minaglia
- Jenna Sarin
- Kelly Soemantoro
- Shoshana Volkas

Focus Area 2: Healthy Weight and Fitness

Objective 1: By December 31, 2020, reduce the **obesity rate** among Orange County 5th graders by 5% to 17.1%.

Objective 2: By December 31, 2020, reduce the obesity rate among 5th graders in schools in **target communities** by 10% to 25.9% in Anaheim City, 26.7% in Buena Park, 24.2% La Habra City, and 27.5% in Santa Ana Unified.

Key strategies

Increase resident capacity building and participation: Provide leadership trainings and work with peer programs such as Champion Moms to improve community health.

Implement and align policy, systems, and environmental change strategies: Use the Collective Impact framework to implement strategies that support physical activity and healthy eating behaviors by aligning programs such as Nutrition Education and Obesity Prevention, FIT Cities, and Champion Moms among others in targeted communities.

Educate and train community providers, partners, and community members: Educate partners on topics such as best practices for reducing childhood obesity, data, and how to implement policy, systems and environmental changes strategies.

Improve coordination, collaboration, and capacity within PHS staff: Share information and resources related to existing programs including Nutrition Education and Obesity Prevention, WIC, FIT Cities, etc. In addition, develop and/or adapt communication materials so they can be used by Public Health Services staff and shared with clients/community members.

Implement social marketing campaigns: Implement campaigns that encourage physical activity and/or healthy eating.



Aligning with Community Goals

Objectives for this focus area mirror those in the **Orange County Health Improvement Plan**. Public Health Services is the backbone organization for the Obesity Work Group, which is the lead partner for activities related to increasing residents who are in a healthy weight category. Key strategies in this plan directly support countywide and targeted strategies identified in the community health improvement plan.

Focus Area 3: Chronic Disease Prevention & Management

Goal: Orange County residents will avoid disability and premature death through early identification and management of chronic diseases.

Why is this a priority?

Chronic diseases such as heart disease or stroke account for 7 in 10 deaths in Orange County.⁴ Management of conditions such as hypertension, diabetes, and high cholesterol can help to decrease illness and death due to these conditions. In Orange County, 24% of adults have <u>high blood pressure</u>, 7% have <u>diabetes</u>, and almost 6% have <u>heart disease</u>. Of those who report having a chronic condition, 61% reported being very confident that they could control and manage their diabetes and 70% reported being very confident in controlling or managing their heart disease.⁹

4 in 10 people living with diabetes

and 3 in 10 people living with heart disease

do not feel very confident

managing their condition.

Source: California Health Interview Survey, 2015-2016

What are we doing now?

California Children's Services provides access to medical care, case management, and other support for eligible children.

Public Health Nursing has a range of programs that offer assessment, case management, and education services to help individuals access health care services and manage existing conditions. The nurses work with individuals of all ages with chronic disease such as asthma or diabetes. Senior Health Outreach and Prevention Program (SHOPP) serves adults with unmet healthcare needs. CHAT-H serves homeless individuals.

Health Promotion offers outreach and education for chronic diseases prevention and management.

- Every Woman Counts assists women in getting breast and cervical cancer screening.
- Chronic Disease Self-Management workshops provide education and skills building to help individuals manage their chronic disease.

Programs that address smoking, nutrition, and physical activity all help in management of chronic diseases and are discussed under Focus Area 2: Healthy Weight and Nutrition and Focus Area 4: Alcohol, Tobacco, and Other Drugs.

Planning Work Group

Lead: Pat Orme Public Health Nursing

- Elsa Amezcua
- Marisela Barcenas
- Megan Beard
- Amy Buch

- Pauline Bui
- Helene Calvet
- Maridet Ibanez
- Elizabeth Jimenez
- Maria Minaglia
- Sam Monroy
- Deborah Kwang
- Jeanine Mumford

- Phyliss Munoz
- Thanh-Tam Nguyen
- Judy Ogan
- Veronica Ramirez-Bartoli
- Jenna Sarin
- Becky Stone
- Joe Vargas

Focus Area 3: Chronic Disease Prevention & Management

Objective 1: Annually, at least 65% of Public Health Nursing case management clients who have been assisted in **managing their chronic disease will have met their goals** at case closure.

Objective 2: By December 31, 2019, create or enhance **web and/or social media sites** to provide comprehensive tools and information for Orange County residents living with chronic diseases.

Key strategies

Case Management: Promote and expand case management for individuals and families who over-utilize emergency department services.

Targeted Education: Identify individuals and families with chronic disease and provide evidenced-based education to improve quality of life and appropriate use of the health care system.

Community Collaboration: Expand and strengthen collaboration and coordination with community partners to increase public awareness of health resources to optimize the prevention and management of chronic disease.

Social Marketing: Using a variety of media, promote effective prevention and management of chronic disease.



Highlighted Project

Public Health Services teamed up with Office on Aging and Partners in Care Foundation to offer **Chronic Disease Self Management** courses to the community. The workshops help people living with chronic diseases to manage their day-to-day treatment and maintain activities of daily living. Workshops are offered in English, Spanish, and Mandarin. Increasing participation and completion rates for chronic disease self-management education are also objectives in the **Orange County Health Improvement Plan**.

Focus Area 4: STDs and HIV

Goal: No new STD or HIV infections in Orange County.

Why is this a priority?

Rates of STDs have shown significant increases in recent years. In 2016, the case rate of primary, secondary, and early latent syphilis in Orange County, was 17.2 per 100,000 compared to 4.1 per 100,000 in 2010. The gonorrhea case rate more than doubled between 2010 and 2016 (from 38.5 per 100,000 to 96.2 per 100,000). The chlamydia case rate increased from 281.5 per 100,000 to 403.5 per 100,000 in 2016. Each year about 300 people are newly diagnosed with the disease. As of 2016, there were 6,762 people diagnosed and living with HIV disease in Orange County. The HIV disease transmission rate was 4.7 new cases for every 100 persons living with HIV in 2016.

The incidence rate of Contagious Syphilis in OC increased by 346%

between 2010 and 2016 (4.1 vs. 17.2 per 100,000).

Source: OC Health Care Agency, Epidemiology and Assessment

320

The number of people who were newly diagnosed with HIV disease in Orange County in 2016.

Source: Orange County HIV Case Registry

What are we doing now?

Disease Control and Epidemiology administers programs to monitor, prevent, treat, and link individuals to services:

- Epidemiology and Assessment and HIV Surveillance monitor trends in STDs and HIV and help Disease Intervention Specialists link individuals to care.
- HIV Planning and Coordination administers funding for HIV prevention, testing, care, and support services through County and community providers.
- STD and HIV testing and treatment services at 17th Street Testing, Treatment and Care.

- Disease Intervention Specialists offer partner services.
- Pre and Post Exposure Prophylaxis (PrEP and PEP) provided at 17th Street Testing, Treatment and Care.

Family Health offers STD and HIV testing, education, and prevention services for Family PACT clients.

Health Promotion provides community and provider education and training through its STD Community Intervention Program (SCIP).

Public Health Lab conducts tests for PHS clinics to determine the type and strains of disease, which guide treatment decisions.

Planning Work Group

Lead: Marc Meulman
Disease Control and Epidemiology

- Gerry-Lynn Arias
- Colleen Brody

- Amy Buch
- Helene Calvet
- Megan Crumpler
- Danielle Farias
- Alyssa Haveman
- Tamarra Jones
- Rebecca Mares
- Lydia Mikhail
- Pristeen Rickett
- Christopher Ried
- Natalie Silva

Focus Area 4: STDs and HIV

Objective 1: By December 31, 2020, decrease the **HIV transmission rate** in Orange County to 4.5 per 100 persons living with HIV disease.

Objective 2: By December 31, 2020, stabilize the **contagious syphilis** disease case rate in Orange County to at or below 15 per 100,000 people.

Key strategies

Increase syphilis testing and treatment for high-risk populations: Promote routine testing and rapid linkage or treatment in healthcare settings.

Implement HIV and STD awareness campaign: Use health promotion campaign to improve sexual health awareness and decrease stigma associated with HIV, STDs, and sex.

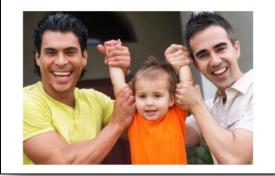
Increase provider knowledge about syphilis: Educate healthcare providers regarding best practices for risk assessment, testing, and treatment of HIV, syphilis, and other STDs.

Implement innovative strategies for disease intervention and partner services: Improve effectiveness of HIV and syphilis control efforts with innovative practices.

Maximize use of technology and data to enhance targeted strategies: Use data to identify and target interventions to populations with greatest risk.

Highlighted Projects and Initiatives

I PrEP for my family.



PrEP or Pre-Exposure Prophylaxis is a pill that can help reduce HIV transmission for those at high risk. 17th Street Testing, Treatment and Care implemented the "I PrEP" campaign (left) to increase awareness and uptake of PrEP.

HIV Planning and Coordination implemented the "Dr. Staywell" campaign to increase the number of HIV-positive clients seeing their doctor every six months based on treatment recommendations.

Disease Intervention Specialists began a project to reduce the time of interviewing non-clinic Syphilis clients.

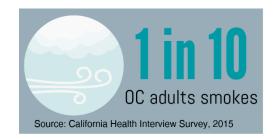
Focus Area 5: Alcohol, Tobacco, and Other Drugs

Goal: Eliminate injury and disease in Orange County caused by alcohol, tobacco, and other drugs.

Why is this a priority?

Smoking remains the leading preventable cause of death in the United States, increasing risk of heart disease, stroke, and lung cancer.¹² An estimated 1 in 10 <u>Orange County adults currently smokes</u>.

In 2011-2015, more than 1 in 4 (27.4%) of motor vehicle crash deaths in Orange County involved alcohol. In 2016, there were 3,143 alcohol or other drug-related collisions in OC. This is a rate of 98.7 per 100,000 population, which is higher than the state average (89.9 per 100,000).



The number of alcohol or other drug-related collisions in OC in 2016.

Source: California State Highway Patrol, 2016

What are we doing now?

Health Promotion administers programs to reduce problems associated with alcohol, tobacco, and other drug use through education, training, and technical assistance:

- Tobacco Use Prevention Program (TUPP) offers smoking cessation classes and works with community partners to prevent youth from initiating smoking.
- Alcohol and Drug Education and Prevention Team (ADEPT) provides community-based interventions that address underage drinking, prescription drug misuse, and driving under the influence of alcohol and drugs using a variety of strategies.

Disease Control and Epidemiology's HIV

Planning and Coordination Unit funds case management and treatment for substance users.

Family Health's CalLEARN and Teen Pregnancy Program provide case management to high-risk pregnant youth including those with a history of substance use.

Public Health Nursing's Assessment and Coordination Team provides nurse case management for pregnant or new moms with a current or history of substance abuse. CHAT-H provides case management to homeless individuals, many of whom are currently or have a history of substance users.

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Focus Area 5: Alcohol, Tobacco, and Other Drugs

Objective 1: By December 31, 2020, **smoking cessation** services will be provided to 4,065 adults annually, a 50% increase compared to FY 2016-17 (July 1, 2016 – June 30, 2017).

Objective 2: By December 31, 2020, decrease **DUI collisions** in five cities with highest rate (and/or number) in Orange County by 5%.

Objective 3: By December 31, 2020, all cities will be offered individualized results regarding DUI crashes, training on best practice strategies, and social marketing tools and materials.

Key strategies

Work with partners to optimize utilization of resources: Promote use of consistent messaging and resources with medical and community partners.

Promote screening and intervention: Promote screening of alcohol, tobacco, and other drugs and offer interventions.

Strengthen community collaboration: Expand and strengthen collaboration and coordination with community partners to optimize prevention work.

Educate professionals on responsible practices: Educate health care providers, vendors, and other professionals about responsible practices.

Conduct social marketing campaign: Use social marketing and media to change social norms and provide education.

Target populations with greatest need: Use data to identify and target interventions to populations with greatest need.

Aligning with Community Goals



Reducing alcohol and drug misuse in Orange County is a goal in the Behavioral Health priority area of the **Orange County Health Improvement Plan**. Objectives include reducing underage drinking among 11th graders, reducing impaired driving collisions, reducing opioid-overdose ED visits, and creating a clearinghouse of resources for informed policy-making around implementation of marijuana laws.

Targeted System Improvements

Public Health staff has identified six overarching system strategies that can be strengthened to enhance the service system and assist Public Health Services in meeting its goals. These strategies are foundational in guiding our work and continuing staff development.



Communication

Develop and promote consistent messages that help inform, influence, and motivate individuals about health issues.



Policy Development

Improve understanding of health implications of policies and promoting policy platforms that protect and promote health.



Integration

Collaborate and integrate services and resources across Public Health Services.

Integration

Collaboration

Community Engagement

Collaboration

Expand partnerships and collaborative efforts with other community and County organizations that help to protect and promote health in Orange County.

Community Engagement

Listen to, and work with, community members and groups to understand and implement solutions to health problems.

Quality Improvement and Evaluation

Continually monitor key outcomes and take actions to make improvements, utilize evidence-based practices, and measure the impact of programs on the health of the community.

Resources and Citations

Public Health Services Intranet Resources

- Strategic Planning: http://intranet/phs/strategicplan
- Quality Improvement: http://intranet/phs/qi
- Public Health Initiative for Results and Excellence: http://intranet/phs/phire

www.ochealthiertogether.org Resources

- Orange County Health Improvement Plan: www.ochealthiertogether.org/ochip
- OC Demographics: www.ochealthiertogether.org/Demographics
- OC Dashboard: www.ochealthiertogether.org/OCDashboard
- Local Reports: <u>www.ochealthiertogether.org/localreports</u>

Citations

- 1. Center for Community Economic Development (2014)
- 2. County Health Rankings & Roadmaps (2017)
- 3. Life Expectancy in Orange County (2015). Orange County Health Care Agency. Santa Ana, California, October 2015.
- 4. Premature Mortality in Orange County. Orange County Health Care Agency, Santa Ana, California. December 2014.
- 5. Conditions of Children in Orange County. Orange County Children's Partnership. 2017.
- 6. Mokdad AH, et al. Actual causes of death in the United States, 2000. JAMA. 2004;291(10):1238-1245.
- 7. Dietz W. Health consequences of obesity in youth: Childhood predictors of adult disease. Pediatrics 1998;101:518–525.
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- 10. Reportable Disease and Conditions by Year. Orange County Health Care Agency, Epidemiology and Assessment. 2010-2016
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- 12. U.S. Department of Health and Human Services. The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014 [accessed 2017 Apr 20].

OC Demographics (www.ochealthiertogether.org/Demographics) Hyperlinks

- Race/ethnicity. American Community Survey, Nielsen Claritas (2017)
- Population Age 5+: Speak Only English at Home. American Community Survey, Nielsen Claritas (2017)
- Annual income. American Community Survey, Nielsen Claritas (2017)

OC Dashboard (www.ochealthiertogether.org/OCDashboard) Hyperlinks

- Projected older adults population: 65+ years: California Department of Finance.
- Adults who are obese: California Health Interview Survey (2015)
- Adults who are obese: Females: California Health Interview Survey (2014-2015)
- Adults who smoke: California Health Interview Survey (2014-2015)
- 11th graders who smoke: California Healthy Kids Survey (2015-2016)
- Babies with low birth weight: California Department of Public Health (2013-2015)
- Preterm births: Lucile Packard Foundation for Children's Health (2013)
- People living below poverty level: American Community Survey (2011-2015)
- Adults who are obese: California Health Interview Survey (2015)
- 5th grade students who are obese: California Department of Education (2016-2017)
- High blood pressure prevalence: California Health Interview Survey (2015)
- Adults with diabetes: California Health Interview Survey (2014-2015)
- Adults with heart disease: California Health Interview Survey (2013-2014)
- Adults who smoke: California Health Interview Survey (2014-2015)
- Alcohol-impaired driving deaths: County Health Rankings (2011-2015)
- Alcohol and other drug collision rate: California State Highway Patrol (2016)

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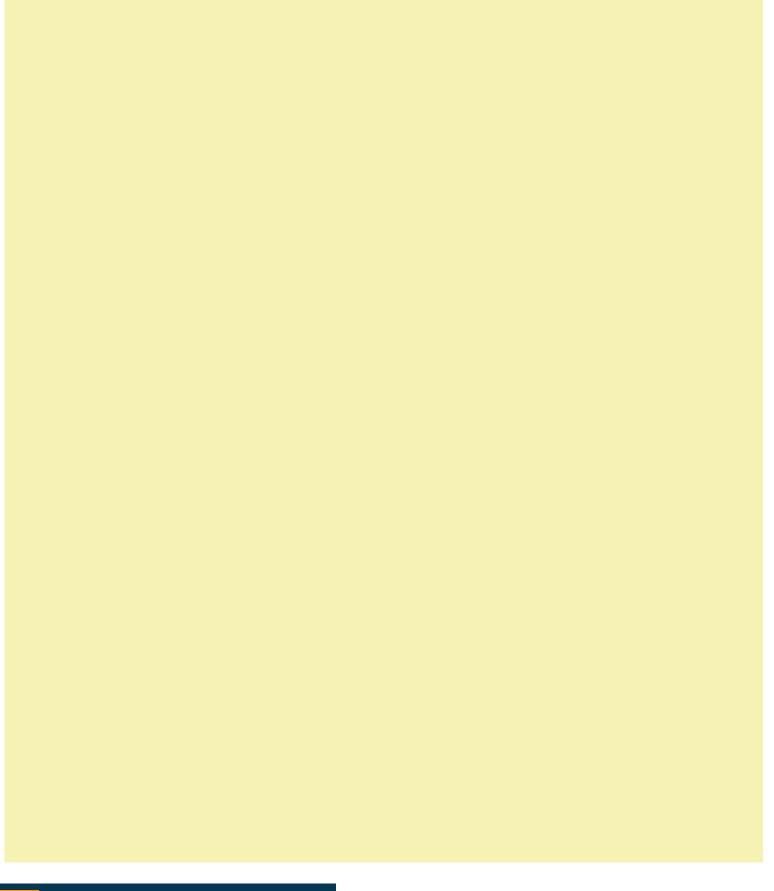




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Notes



Attachment B

Orange County Health Care Agency Public Health Services

Strategic Plan 2018-2020

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