Governor’s Budget

Representatives of California counties listened intently to the governor’s budget announcement on January 10. For the past decade, we heard the governor lay out cuts that negatively impacted the services offered to our communities, but this year was different. He did not announce proposed major reductions to any of our programs, and voter-approved Proposition 30 will bring new tax revenues that will allow us to sustain current programs without major cuts. This year is off to a great start.

Medi-Cal expansion approved for California

Counties with public hospital health systems and health plans like ours have a responsibility to provide care to the uninsured, and we are most pleased that the governor is fully embracing Medi-Cal expansion (MCE). By fully expanding MCE, California is taking advantage of the opportunity for 100% federal funding to provide health insurance for uninsured adults with annual incomes below $15,400. However, the governor also announced two options to accomplish this expansion. One option is for the state to run MCE similar to the current Medi-Cal program. The other requires each county to develop its own capability to expand and manage this new Medi-Cal program.

The other requires each county to develop its own capability to expand and manage this new Medi-Cal program. In return for counties assuming this responsibility, the state would not take away funds that have historically been used for indigent care. In my opinion, although the county option might be doable by us in Contra Costa County, I don’t believe that all counties could implement an effective program by January 1, 2014 without leaving significant federal funding on the table. It would take much longer to implement such a program. It is my hope that California will soon decide that the state-based program is the only viable option.

What does this mean for us?

With the expansion in place by January 1, 2014, it means for our Hospital and Health Centers Division fully developed Primary Care Health Homes (PCHH) with access to high-quality integrated care, excellent patient experience and health outcomes. For Contra
Costa Health Plan, it means increased membership above the current level of 112,000-plus members and developing community networks to meet additional demands. I will be working with the County Board of Supervisors and legislature to do everything possible to ensure expansion occurs on time.

**Full impact of Affordable Care Act**

We have already seen some of the impacts of the Affordable Care Act (ACA): more young adults have insurance through their parents’ employer-sponsored insurance through age 26, preventative care no longer requires co-pays and more than 13,000 low-income adults have access to health care through our Low Income Health Program.

This year we are beginning to see what will be the full impact of the ACA as it meets the goals of insuring many more residents and changing the model of the United States health care system from a fee-for-services, provider driven system to a value based system rewarding good patient outcomes.

We who have spent our professional lives working in safety-net systems are looking forward to the benefits to our patients and communities that ACA will achieve. We know that we have another very busy year ahead of us as we continue to prepare for ACA, but it will be well worth all of our efforts.

Thank you all for all that you do.

Sincerely,

William Walker, M.D.
Program’s Goal is to Stop Psychosis in Youths, Young Adults Before it Begins

There’s new hope for young people beginning to show the early signs of psychosis in Contra Costa County. The Behavioral Health Services Division recently launched First Hope: Identification and Intervention to Prevent Psychosis, a Mental Health Services Act-funded Prevention & Early Intervention treatment program that provides confidential assessment and assistance to individuals between the ages of 12 and 25 who are at clinical high risk for psychosis. Program Supervisor Mary Roy says it is critical to reach this age group because it is typically before the onset of psychosis and the person may begin to experience mild, yet serious symptoms. First Hope provides early identification of symptoms, family-aided assertive community treatment, educational multifamily groups visits, supported education and employment, and medication if needed. Evidence indicates that early treatment can dramatically decrease the incidence of psychosis and in many cases, prevent the development of a major mental illness.

To find out more about the First Hope Program, visit www.cchealth.org/firsthope/ or contact Mary Roy at 925-957-5169. For a consultation or referral, call 925-681-4450.

HazMat Staff Present Annual Industrial Safety Ordinance to Board of Supervisors

Our Hazardous Materials staff will be in the Board Chambers this month to present its annual Industrial Safety Ordinance Report. After a 10-year trend of fewer and less-severe major chemical accidents and releases, 2012 presented increased activity including one incident that reached the highest level on the Community Warning System. Our Hazardous Materials Director Randy Sawyer said the incidents are important reminders that all involved parties—industry, regulators and the community—must stay vigilant in ensuring safe facility operations. The presentation of the annual ISO Report will be Tuesday, February 26 in the County Board of Supervisors Chambers.

To read the report in its entirety, visit www.cchealth.org/hazmat/
Employees Recognized for Involvement in Video Ethnography Training

Staff from our Regional Medical Center and Health Centers and our Communications Unit received recognition for their participation in a six-month video ethnography training sponsored by Kaiser Permanente to learn how to drive improvement efforts. Health Services was the only safety net partner allowed to participate in the training. This video ethnography project stemmed from one of the Innovation Council’s “Avatar” profiles, each of which are created using a quantitative and qualitative analysis of our vulnerable patient populations. The goal of video ethnography is to use recordings to uncover the experiences of patients and front line staff and use their voices to create a shared understanding and vision for improvement efforts. Video ethnography team leader Marianne Bunce-Houston said the Avatar analysis and ethnographic video is engaging, telling a story of what patients and staff are actually experiencing. This may be very different from what staff think is happening. The group created a 12-minute video with patients and staff from our North Richmond Center for Health that was presented at the Kaiser National Office in Oakland. Findings from the video, such as transportation barriers, appointment reminder issues, variability in scheduling and canceling of appointments are now being used to improve patient access to care. Thanks to Kaiser Permanente for including our team in this valuable training program.

For more information about the Avatar and video ethnography, contact Marianne Bunce-Houston at 925-370-5822.

Changes for Return Appointments at Health Centers

As part of ongoing efforts to improve our appointment line process, changes have been made to how return appointments are booked and we’re already seeing good results. Starting this month, for appointments March 1 and later, patients who need to be seen again within two weeks of their visit will have their next appointment scheduled before they leave the health center. Patients who need to schedule a return appointment for two weeks or later can schedule a follow-up appointment by calling within two weeks of their desired appointment date. This means starting February 15, providers won’t be able to schedule long term appointments except for prenatal, postpartum, well child and pre-op physical visits. Patients also will have the option to be connected to their preferred health center when they call the Appointment Unit line. Preliminary results show that this has improved the average wait time to reach a person for assistance to only two minutes, almost five times more quickly than the average wait time for the Appointment Unit line. Ambulatory Care Medical Director Dr. Chris Farnitano, who has hosted staff brown bag lunches to discuss the system, says the redesign should maximize patient show rates and make it easier for people to schedule appointments.

To find out more about the new appointment scheduling system and other changes, contact Dr. Chris Farnitano at chris.farnitano@hsd.cccounty.us or see the patient flyer and FAQs on iSITE under recommended.
New African American Moms’ Group Builds Community in Pittsburg

A new pilot program, “Golden Start,” offers culturally focused and strength-based group medical prenatal care visits for pregnant African American women in East County. Thirteen African American mothers-to-be are participating in the pilot. The moms are meeting twice a month at the Pittsburg Health Center to share their experiences, get support from their peers, receive health education and meet with their doctor. In this pilot, CCHS staff from WIC, Healthy Start, Ambulatory Care, the African American Health Conductors, and Family, Maternal & Child Health (FMCH) are collaborating with Brighter Beginnings, a community nonprofit dedicated to supporting healthy births and successful child development. Dr. Karen Burt, director of the Integrative Health Program, said Golden Start is unique because it combines the culturally specific Black Infant Health parenting skills and support model with the Centering Pregnancy model, which provides prenatal care in a group visit setting. The goal of Golden Start is to break isolation, build community, provide health education, and increase life and wellness skills—in order to improve the health and birth outcomes of African American families in East County.

For more information on Golden Start, contact Dr. Karen Burt at kbburt@gmail.com

Free Wireless Network Now Available for Medical Center Patients and Guests

Patients and visitors can now get free Wi-Fi at our Regional Medical Center by connecting to a newly created guest network. Members of the public can connect to the guest network by entering a password and agreeing to the terms of service. The password, which will change every month and convey different health messages, can be obtained from promotional flyers that will be posted around the hospital. The guest network will be available in only certain areas of the hospital: the first- and second-floor lobbies, the third-floor lobby of the Emergency Department, the cafeteria, the Infusion Center and waiting areas in the Martinez Health Center.

2013 Homeless Count

Left, Acting Homeless Program Director Lavonna Martin speaks with a homeless woman during the 2013 Homeless Count. On January 30, community volunteers paired up and ventured into the community to tally the homeless population. Their efforts will help us better understand the scope of homelessness so more effective responses can be developed to meet the need. Above, a homeless man is interviewed by a local reporter.
EMS Urges AED Owners to Register Device as Public

Automated external defibrillators can greatly increase a person’s chance of surviving cardiac arrest. Unfortunately, the lifesaving devices too often aren’t used because people didn’t know one was nearby, said Dr. Joe Barger, Medical Director of our Emergency Medical Services (EMS) Division. EMS launched a new effort this month to locate and register all AEDs intended for public access in the county. Emergency dispatchers are automatically notified when a registered AED is located at the same address as a 9-1-1 call for cardiac arrest. Furthermore, our EMS Division is asking AED owners (e.g., those who have these situated at businesses, churches, or other facilities) to voluntarily mark their device as public during the registration process. If there is a 9-1-1 call for cardiac arrest within 1,200 feet of the registered device, citizen volunteers can potentially respond and utilize the AED. Dr. Barger said the most important thing in keeping a person alive after cardiac arrest is the time it takes to get that first shock.

To hear a podcast about this effort, visit www.cchealth.org/podcast/

Column: Blisters are Nature’s Band-Aid for Burns

If there’s one thing you shouldn’t do after getting a burn, it’s popping those blisters. Often unsightly and bothersome, blisters are your body’s very own Band-Aid to keep the wound sterile and protected from infection. In our latest Healthy Outlook column, our Emergency Room Medical Director Dr. Brenda Reilly says milder burns can be treated at home, but you should consider seeing a doctor if the burn is greater than four inches or if it’s on the face, feet, hands or groin. She said home treatment typically involves application of cool water, pain relievers and bandaging.

To read more of this or other Healthy Outlook columns, visit www.cchealth.org/column/

WHERE TO GET EMERGENCY INFORMATION

Cchealth.org - Health emergency updates from Health Services
Cococws.us - Sign up for phone alerts from Community Warning System
Cccounty.us - Updates from Contra Costa County

Social Media

Contra Costa Health Services @CoCoHealth

Phone Numbers

1-888-959-9911 - Health Emergency Information Line
925-313-9622 - Community Warning System
211 - General information

Local Media

Tune in to your local media outlets, such as KCBS 740-AM and CCTV Channel 99, 27 or 32

Connect with Health Services on Facebook & Twitter!

http://cchealth.org/socialmedia/
Nicole Kroener, RN  
Contra Costa Health Plan

For taking my call to the advice nurse unit, going the extra mile to meet my needs and for her professionalism.

◆ Nominated by a patient

Sergio Martin  
Senior Disease Intervention Technician  
Public Health

For his dedication and commitment to providing immunization services to the community.

◆ Nominated by Kathleen Sullivan

Mariana Liu  
Administrative Services Assistant II  
Public Health

For her exceptional competence and commitment in assuring family centered services to the families we serve and for her clear and timely communication.

◆ Nominated by Yodeillie Baybayan and Barbara Sheehy

Anquanetia Reed, LVN  
Contra Costa Regional Medical Center and Health Centers

For her dedication and hard work managing our supply of vaccine and for staying beyond her clinic to provide urgently needed services for a family.

◆ Nominated by Susan Farley and Paul Leung

Daniella Poy-Wing, PHN  
Public Health

For helping a homeless patient reconnect to insurance and primary care resulting in the patient obtaining housing and receiving dialysis three times per week.

◆ Nominated by Nishant Shah

Maisha Selmon  
Clerk – Senior Level  
Contra Costa Regional Medical Center and Health Centers

For being dependable, professional, patient and helpful and for timely retrieval of reports for providers.

◆ Nominated by a West County Health Center employee
Do you know someone going the extra mile?

To recognize a CCHS employee, vendor or volunteer for outstanding Service Excellence performance, submit the commendation form by email to wanda.session@hsd.cccounty.us or fax to 925-957-5401. Forms are on our website (www.cchealth.org on About Us page) or iSITE, our intranet, at http://cchs/. Nominations are subject to approval by Division Directors.

Faye Ny
Administrative Services Assistant III

Maria Padilla
Senior Health Education Specialist

Wedad Shammas
Accountant III
Public Health

For preparing a program presentation and fiscal documentation for a Contract Compliance Review

♦Nominated by Tracey Rattray

February Milestones

Congratulations to these employees who have given us long years of service: Juan C. Coras, Marlon D. Epps, Christine N. Porter, Raz S. Moghbel, Marcos Aguilar, Kristina M. Kutter, Michelle P. Roybal, Candice D. Paredes, Robert A.H. Hansen (10 years); Annie J. Cherayil, Laura L. Mae, Dalene R. Deluca, Erika Mendoza, Lynnette R. Watts (15 years); Noel A. Gatmaitan, Leslie Miyashiro (20 years); and Yvonne L. Webster (25 years).