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## Looking Ahead

If I had a crystal ball, I would be able to predict what lies ahead in 2008. Considering how volatile the health care arena is these days, that might be useful. And if I had a magic wand, I might be able to ward off some of the things I know from experience are likely to happen this year. Even though neither of these magical devices is available right now, I'm going to take a shot at trying to prepare you for what I see coming.

### Bad budget news

One area that won't take a crystal ball has to do with funding. Last month I alerted you to what I'm sure will be significant cuts in the county budget for the fiscal year that begins in July. The Governor has already declared a fiscal emergency and announced that the State budget will be cut by 10% in many General Fund departments. Those cuts will surely have an impact on many of our programs.

At the same time, the Board of Supervisors is expecting a report shortly on how to deal with the shortfall related to retiree health benefits. Even if a solution is found to address the long-term problem, dealing with the short-term liability will probably require reducing county General Fund expenditures. A scheduled cost-of-living increase due this July will also have to be funded with county general funds. With county revenue down and expenditures up, it's only a matter of time before the County Administrator gives guidelines to department heads on how much to cut.

### Looking to health reform

Many hours were spent last year discussing health reform in California and working to be sure that public health systems like ours are protected. We can expect much more discussion and debate about the details of how this country and our state will ensure that every resident has access to health care.

The California Senate may be working on the Assembly-approved bill when this newsletter is issued. To finance that plan, voters will have to approve at least one ballot measure. If the measure qualifies for the June election, there will no doubt be a flood of information for and against.

Beyond our borders, and because this is a presidential election year, health reform is sure to be a hot topic of national debate all year and beyond into the new Congressional session, depending on the outcome of the election.



*Dr. Walker*

### Exquisite positioning

The major complaint about the U.S. health care system is its lack of "system-ness." Instead of a rational, integrated set of services, health care is generally a patchwork of services with patients left to navigate through the maze themselves.

I don't want to be overly optimistic, because many things could happen between now and whenever health reform actually occurs, but I believe CCHS is exquisitely positioned to participate fully in new strategies for improved care.

The more we learn about successful models related to issues like patient safety, quality, effective chronic disease intervention and patient satisfaction, the more we realize that integrated systems like ours are better able to deliver optimal results.

The fact that we have a system that includes a Medical Center, eight Health Centers, Public Health, Alcohol and Other Drugs, the Health Plan and Mental Health under the same umbrella places us in a position to be a model for reform.

In fact, when the State issued a request for proposals for their Health Care Initiative, we knew that we were the kind of system they

*Continued next page*

## DID YOU KNOW

In the first five months of fiscal year 2007-08, there were **177,174** outpatient visits to our Health Centers, an increase of **2,287** over the same period last year.

## Director's Message Continued...

were hoping to establish to serve low-income residents. They gave us \$45 million to expand our model and offer more low-income residents comprehensive quality health care. Over the last few years, other health systems in California and across the country have copied elements of our approach.

### Improvement needed

Although we have the integrated structure needed, there are many gaps and areas for improvement which I hope we'll be able to address this year – in spite of the budget crisis. My wish list for the year begins with better access to appointments for patients in our now over-taxed system. This will require adding more capacity to our Health Centers, which will be a challenge. We are also looking at ways to decrease the wait time for patients calling for appointments; to expand comprehensive chronic disease management to include more patients; and to more directly integrate Mental Health and Alcohol and Other Drugs services with primary care. We should also expand our relationship with community partners such as community clinics and local hospitals, being an “integrator” to create a true health care system.

This year will also be an important one as we continue to work to be prepared for a natural disaster like an earthquake or pandemic flu outbreak. I expect us to continue the drills and exercises, to train staff and enhance the equipment and skills needed by Hazardous Materials, Environmental Health, CCRMC and the Health Centers and Public Health to respond effectively.

You'll be hearing more from me about the budget crisis and much of it will surely be unpleasant. I hope you'll join me in keeping our vision of a quality health care system for every resident in mind over the next few months as we prepare to make important and difficult decisions about how to use our limited resources.

Sincerely



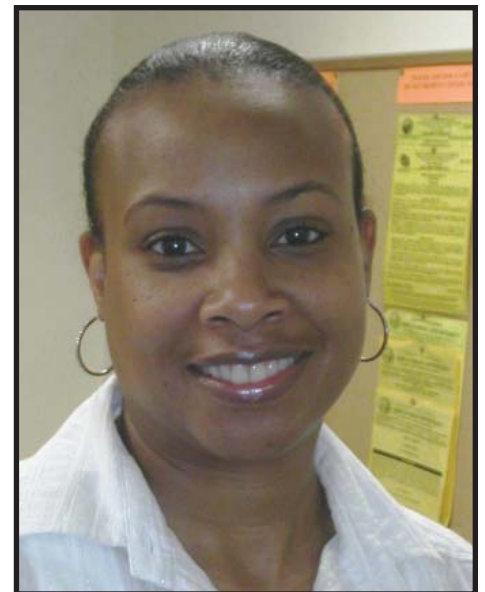
William Walker, MD

## Safety Committee Planning Injury Prevention, Evacuation Drills

CCHS' Safety Committee has adopted an ambitious set of goals for 2008. The committee, led by department Safety Coordinator Dorette McCollumn, has been working in three areas: injury prevention, management support, and Occupational Safety and Health Administration (OSHA) support. In 2007, the committee saw to it that basic safety reminders and county policy on alcohol/drug abuse and violence in the workplace are included in the packet that is attached to yearly employee evaluations. It also helped include information in the July Director's Report on online safety training courses for employees; emailed a worksite safety plan checklist to managers and supervisors; and sent a reminder to worksite safety coordinators that all portable fire extinguishers must be inspected monthly per OSHA regulations. This year, the committee plans to begin Injury and Illness Prevention training of supervisors; direct each division to identify its most frequent injury and devise training to prevent it; and conduct building evacuation drills by the year's end, as requested by the county Risk Management Department.



For more information about the Safety Committee or general safety tips, visit *iSITE* or call Dorette McCollumn at 925-957-5253.



Dorette McCollumn

The Director's Report is published monthly. Deadline for the March edition is February 11. Publicize your upcoming events and successes by sending information to Dan Smith at 597 Center Avenue, Suite 255, Martinez 94553, fax 925-313-6219, email: [dsmith@hsd.cccounty.us](mailto:dsmith@hsd.cccounty.us) The Director's Report is available online at [cchealth.org](http://cchealth.org) and on *iSITE*, our intranet, at *chs*.

# GOING THE EXTRA MILE FOR SERVICE EXCELLENCE

## *Honor Roll*

### **Omar Adair**

*Orthopedic Technician  
Wound Care Management*

For patiently, steadily and with utmost kindness and good humor continuing to change the dressings of a most difficult patient, thereby avoiding patient return to the hospital for a prolonged stay.

— Nominated by Dana Slauson

### **Roxanne Carrillo**

*Healthy Neighborhoods Manager  
Public Health*

For making sure Mental Health staff were alerted during the recent Richmond shooting, and making sure the youth received immediate attention to their emotional needs.

— Nominated by Tiombe Mashama

### **Wisdom Huang**

*Graphic Designer  
General Services*

For an exceptionally good job in the graphic design and production of the 24-page “Have Fun and Be Healthy” newspaper insert. Thanks for being so patient with all of the changes, and so professional and organized in completing the project.

— Nominated by Mary Jane Kiefer

### **Marilyn Scroggins**

*Clerk-Specialist  
Mental Health Conditional Release Program*

For being friendly, professional, conscientious, loyal and dedicated. Her networking throughout the county system is invaluable.

— Nominated by Marie Scannel/CONREP Team

### **Eva Vera**

*Home Economist  
Pittsburg WIC Program*

For always going the extra mile creating data management reports for WIC. Recently, Eva was the primary photographer for a 24-page newspaper insert “Have Fun and Be Healthy” activity guide.

— Nominated by Mary Jane Kiefer

### **Denise Whittle**

*Secretary  
CCHP Member Services and Marketing*

For being calm and professional during a recent flood; single-handedly coordinating the furniture move for areas affected; dealing with contractors and staff while assuring employee safety and making the situation bearable for everyone.

— Nominated Tess O’Riva

## **Employee Milestones**

Congratulations to these employees who have given us long years of service: Lynnette R. Watts, Erika Mendoza, Dalene R. Deluca, Laura L. Montgomery, Annie J. Cherayil (10 years); Leta J. Maco, Ann M. Ruddick, Leslie Miyashiro, Maria T. Hernandez, Noel A. Gatmaitan (15 years); Petronilo A. Cariaso, Dennis M. Welgan, Yvonne L. Webster (20 years); Lynn King (25 years); and Virginia L. Dilley (35 years).

## **Do you know someone who’s going the extra mile?**

To recognize a CCHS employee, vendor or volunteer for outstanding Service Excellence performance, submit the “Going the Extra Mile” commendation form, available from every CCHS Division Director, or email your commendation to [ServiceEX@hsd.co.contra-costa.ca.us](mailto:ServiceEX@hsd.co.contra-costa.ca.us) or fax it to 925-313-6219. The form can also be downloaded from the Internet (About Us page) or iSITE, our intranet.

As part of our Reducing Health Disparities efforts, our divisions are working to achieve outcomes in four categories: consumers/clients/patients/customers; the community; our staff; and our systems. Each month this page highlights what different divisions of CCHS are doing to reduce disparities in health and health care, and what still needs to be done.

# Reducing Health Disparities



*The staff of our Children's Oral Health Program gets together outside their offices at 597 Center Ave. in Martinez.*

## Dental Disease an Epidemic in Low-Income Children

Thousands of Contra Costa children are suffering from untreated dental disease that leads to pain, inability to learn and loss of school days, among other serious problems. Children from low-income families and children of color are more likely to have a history of tooth decay, untreated tooth decay and urgent dental care needs than higher-income and non-Latino white children respectively, according to a 2004-2005 statewide survey. Our Children's Oral Health Program (COHP) reports that of the 13,304 preschool and elementary school children their Save Our Smiles project screened in the 2005-2006 school year, 12% had serious dental disease and another 16% had less serious dental decay.

### Concerns

Access to dental care for low-income children in Contra Costa is scarce. Of the 785 private dentists practicing in Contra Costa, only 34 see children with Denti-Cal – the Medi-Cal dental plan – on a regular basis. Private dentists and specialists have reported that they are reluctant to see children with Denti-Cal because of the bureaucracy involved, low reimbursement rates and broken appointments. This lack of providers poses a serious health disparity issue, especially in East County where the population is surging. Another issue affecting the oral health of East County children is the lack of fluoridated water in Bay Point, Knightsen, Brentwood and Byron. Fluoridated water significantly reduces tooth decay.

## What We're Doing

Our Children's Oral Health Program (COHP) is working to overcome these health disparities by linking children with the care they need. A Registered Dental Assistant works with families to link children with dental appointments, transportation, translation services, and support services and follow-ups with families to ensure appointments are kept. This coordination encourages private dentists and specialists to accept children with Denti-Cal. Save Our Smiles, a project of our COHP, is a school-based preventative program that serves low-income children from preschool to sixth grade and special education students through age 19. It offers oral health education, dental screenings, sealant clinics and fluoride varnish application for communities with below-standard fluoridation.



For more information on the Children's Oral Health Program, visit <http://www.cchealth.org/services/dental> or call 925-313-6280.

## Upcoming TV Series to Investigate Sources of Health Disparities

"Unnatural Causes- Is Inequality Making Us Sick?" is a Public Broadcasting System series that airs beginning on March 27. The four-hour documentary seeks to shift views among the public and policymakers and demonstrate how health outcomes are tied to social and economic justice. (A short preview is available online at <http://www.unnaturalcauses.org/documentary.html>) To springboard off the heightened awareness from the series, CCHS will hold three regional meetings in May for Contra Costa elected officials, community leaders, policymakers and other stakeholders to discuss local health disparities, spotlight efforts already underway, and develop a local agenda.



To volunteer to plan the regional forums or for more information, contact Lauren Stoddard at 925-957-5422 or via email at [lstoddard@hsd.cccounty.us](mailto:lstoddard@hsd.cccounty.us).

## New Award Created to Recognize Divisions and their Leaders

A Reducing Health Disparities (RHD) award has been created by CCHS Director Dr. William Walker and the RHD staff to recognize outstanding Division work that contributes to reducing health disparities. The first award, presented in December 2007, went to the Contra Costa Health Plan and its Chief Executive Officer Patricia Tanquary for "Communication and Respectful Interactions Training" that all division staff received. Dianne Dunn-Bowie, Director of Ambulatory Care Services, accepted the second award for her division's language oral proficiency testing and the development of Customer Service Excellence Principles. Dr. Walker said, "We recognize that each division is unique and that the strategies and efforts each division utilizes to reduce health disparities have some variations. There is no national model or road map to guide us. We are pioneers in this work."



For more information about this award program or to suggest a Division or program to be recognized, contact Concepcion James at [cjames@hsd.cccounty.us](mailto:cjames@hsd.cccounty.us) or 925-957-5421.



Dianne Dunn-Bowie accepts a Reducing Health Disparities award from Dr. William Walker.

## 'Learning From Each Other' Sessions Planned

Join other CCHS Division staff for cross-divisional sharing of our RHD successes, ideas, strategies and resources. More information about Learning from Each Other is available on iSITE or by contacting Dawna Vann, Education & Learning Coordinator, at [dvann@hsd.cccounty.us](mailto:dvann@hsd.cccounty.us) or 925-957-5436.

## Health Plan Weathers Big Storm


Contra Costa Health Plan had to move several of its workers to higher and drier ground Friday, January 3 when parts of the ground floor of 595 Center Ave. in Martinez flooded. Several managers and staff worked very hard moving computers, furniture and files to stay one step ahead of the rising waters. Thanks to them, no one was injured and, despite the flood, the Health Plan remained operational. Recovery is still continuing and several workers remain displaced. CCHP wants to thank the General Services Department for its rapid response, flood mop-up and remediation procedures that continued for a week. "We are additionally grateful that we will be having a mold assessment expert, who will assist in deciding if further actions need to be taken," said Patricia Tanquary, Chief Executive of CCHP.



*Denise Whittle, secretary for CCHP Member Services and Marketing, was among those whose office space flooded.*

## Designation Qualifies Mental Health Professionals in West County for Assistance

Last September, the Mental Health Division applied for the designation of Central Richmond and San Pablo as a Geographic Mental Health Professional Shortage Area (HPSA). Last month, the request was granted. The federal HPSA designation identifies areas as having a shortage on the basis of availability of psychiatrists and mental health professionals. This federal designation helps recruit mental health professionals because it may assist licensed mental health professionals repay their loans with federal or state programs with the National Health Services Corp/State Loan Repayment Program. Other additional resources include enhanced federal grant eligibility and improved Medicare reimbursement.


 For more information on the designation, visit [dmb.ca.gov](http://dmb.ca.gov) and click on Prop. 63 and Workforce and Education Training. For further information, contact Imo Momob at [imomob@hsd.cccounty.com](mailto:imomob@hsd.cccounty.com) or 925-957-5118.

## Emergency Preparedness Work Group Refines Mission

CCHS' Emergency Preparedness Work Group recently refined its mission. The mission is to improve the department's ability to respond to emergencies through the development of response plans, procedures, and preparedness drills to help meet the health care needs of the community during natural or human-caused emergencies. The Work Group is a standing committee of the Emergency Management Team (EMT), a cross-divisional team whose members staff CCHS' Department Operations Center and Emergency Operations sites during an emergency. Current objectives include the development of Continuity of Operations (COOP) plans for every division. A COOP outlines how a division will continue to operate during an emergency, such as an earthquake, flood or infectious disease outbreak such as pandemic flu. Upcoming drills include training on CCHS methods of emergency communications, Multi-Casualty Incident field exercises, and a pandemic flu tabletop exercise.



*The EMT work group is, clockwise from left, Vincent Spencer (EH), Art Lathrop (EMS), Dan Guerra (CCHS), Kate Fowlie (CEI), Michael Marchiano (OES), Martha Rincon (AODS), Sherry Bradley (MH), Dave Fry (IS), Chris Place (CCRM), Randy Sawyer (HazMat), Cindy Shelby (CCHP) and Kim Cox (PH).*

 To read the Emergency Preparedness Work Group's updated mission statement, visit [iSITE](http://iSITE) (type [cchs](http://cchs) in your internet browser) and look under Emergency Preparedness. For more information, contact Emergency Preparedness Manager Dan Guerra at [dguerra@hsd.cccounty.us](mailto:dguerra@hsd.cccounty.us) or 925-646-4492.

## Mental Health Works with College on Training Program

The Mental Health Division has worked out an agreement with Contra Costa College in San Pablo to offer the SPIRIT (Service Provider Individualized Recovery Intensive Training) course. The Division's Office for Consumer Empowerment has been offering this program for the past 14 years. It is a training and support program for mental health consumers who want to work as service providers in the field. By partnering with Contra Costa College, individuals who complete this training will be able to receive community college credit for their course work. Instrumental in working out this agreement were Mental Health staff Anna Lubarov, Kathryn Wade and John Hollender, along with Janet Wilson from Mental Health Consumer Concerns.

## CCHS Public Website Continues to Grow in Content and Traffic


The Health Services website, [cchealth.org](http://cchealth.org), hit another milestone last year with 1,322,777 visits, an increase of 27.4% from the previous year —and most of them were by repeat visitors. Compared to 2006, the number of repeat visitors grew by 15.5% to 62,271, and the number of times the repeat visitors used the site grew 6.9% to 16.32 sessions. Public interest in MRSA, a treatment-resistant staph infection, figured heavily in 2007 web traffic. More than 80,000 people came to learn about the subject on our website. More than half of those visits took place in October and November, coinciding with a flurry of media interest. The newest Community Health Indicators report produced by Public Health's Community Health Assessment, Planning and Evaluation unit received over 27,000 visits in 2007. The website, which now contains more than 5,000 pages and PDF documents, is maintained by the Community Education and Information unit working closely with each division.

 *The complete 2007 Website Performance Summary is available on iSITE by clicking on Sites and then Communications.*



## New Information and Referral Phone Service Available


The United Way is celebrating "2-1-1 Day" on February 11 to formally mark the regionwide expansion of 2-1-1 phone service in the Bay Area. It's a toll-free, easy-to-remember phone number that connects people in need with local community services, such as child care, youth programs, job training, senior services, immigration assistance, counseling, food, shelter and much more. The 2-1-1 service is available 24 hours a day in multiple languages, seven days a week in seven Bay Area counties: Alameda, Contra Costa, Marin, Napa, San Francisco, Santa Clara and Solano. Plans to bring 2-1-1 to Sonoma and San Mateo are actively underway. The basis for 2-1-1 is the Contra Costa Resource Online Database (CORD), which contains hundreds of records about programs and services.

 *To learn more about 2-1-1, visit our website at [cchealth.org](http://cchealth.org). To check the accuracy of your program's information on CORD, visit [crisis-center.org](http://crisis-center.org) and click on CORD.*



## Healthy Outlook Column Tackles Adult Acne

CCRMC Dermatologist Dr. Thomas Paige writes about causes and treatments for adult acne in a recent installment of our "Healthy Outlook" column, which runs in the Contra Costa Newspapers chain. (Our Healthy Outlook columns are very popular online, receiving a total of 66,544 visits in 2007.) Adult acne is more common than people think, especially for women. It's among the top 10 skin diseases and a serious problem that can lead to permanent scarring. In women, acne can be caused by hormonal fluctuations due to menstrual cycles, pregnancies or even an underlying hormonal disease such as polycystic ovarian syndrome, a serious condition that can lead to fertility problems. Anabolic steroids (used to build muscle mass) and stress also can cause acne. Depending on the severity of the acne, different medications can be used from over-the-counter creams to powerful prescription drugs.

 *For more information on adult acne causes and treatment or to read other Healthy Outlook columns, visit [cchealth.org](http://cchealth.org) and click on the Healthy Outlook link under Items of Interest or on the Publications page. Send column ideas to [sdaniels@bsd.cccounty.us](mailto:sdaniels@bsd.cccounty.us)*

