Models for the Future

I had the wonderful experience of participating in the 35th reunion of our Family Practice Residency Program recently. Doctors came from around the country. Some had graduated as long ago as 1954 before we had the current program. Many residency leaders from the 1960s also came.

What was extraordinary to hear was the breadth of experience and contributions our graduates have made and are making to U.S. health care. It was also gratifying to hear them acknowledge how important our training program has been to their lives and the role it played in helping them contribute to their communities and profession.

They talked about the family environment in the program, the team-based care, the importance and scope of primary care and the ability of primary care physicians in our system to take on specialty functions. Many wound up in rural areas and at least in Brownsville, a small town in California, as the only physician in the area. One of our former residents runs a health system in rural Alaska for a number of villages for the Alaska Native Health Service. Many of them have worked abroad in various international cities.

Most of all, people talked about their continued commitment to the traditions of our County hospital—now the Regional Medical Center—doing common things uncommonly well and always putting the patient first (read more about the event on Page 3).

The event reinforced how proud I am of this resource that we continue to offer to the community: our family practice residency.

Meet our new residents

The numbers speak for themselves: This year we received 600 applications for 13 first-year residency slots from the best medical schools in the country. The new residents have extraordinary backgrounds. Melina Beaton grew up in Chicago, the first doctor in her working-class immigrant family. While in medical school, she worked with the uninsured in Chicago. Brea Bondi-Boyd worked on the AIDS/Oncology wards in Cuba, where she lived for six years and studied medicine. David Carey practiced
medical Spanish with urban and rural communities in Puerto Rico and Ecuador and at his medical school’s free clinic in New York City. Born in Brazil where her parents were in the Peace Corps, Ne Ferguson moved to Chile and Peru after college, working with underserved communities in social work and public health agencies.

Kate Goheen did medical school rotations in Tanzania, where she delivered babies, and in a children’s hospital in southern Mexico. Rita Hamad spent several years working on public health projects in Peru, Lebanon, Geneva and San Francisco. Erin Helgerson grew up as the daughter of missionaries in Buenos Aires, Argentina. David Lee went to medical school in Brooklyn, NY, and worked with a mostly immigrant Caribbean population and learned about health care administration in the Dominican Republic. Dave Longstroth was an Albert Schweitzer Fellow and worked on developing strategies for providing care to at-risk youth. Michelle Robello, who was born and raised in the East Bay and attended college and medical school in Northern California, worked in a free clinic serving the local Muslim community.

Before medical school, Lisa Rodelo taught a course on homelessness and public policy at San Francisco State University. Paul Shen received his MPH from Berkeley and M.D. from UCSF. He spent the past two years in surgical training in Utah before transferring to family medicine. Before medical school, Brent Sugimoto worked on multinational clinical trials to find an HIV vaccine.

Models we can use in the future

I believe that the long and successful history of our Family Practice Residency Program can serve as a model for how to train the primary care providers the country will need under health reform. It will also, I hope, help us take advantage of increased funding that should become available.

Besides our own system, we can learn lessons from our colleagues and recently a number of us were in Denver for the annual meeting of National Association of Public Hospitals and Health Systems. As you can imagine, there were many presentations on health reform and care delivery and the opportunity to see the Denver Health system up close was quite useful.

Looking ahead to funding opportunities

All of this information is timely, given the emphasis in health reform on primary care workforce expansion and on developing medical homes, team-based care and increased movement toward integration of mental and physical health. There are some funding opportunities in health reform for expansion of primary care residencies, expansion of residencies into community clinics and further training and expansion opportunities for nurse practitioners and physicians’ assistants. Some are authorized and not yet funded. We’ll monitor closely to take advantage of them and we’ll be working internally, with our local partners including hospitals and health clinics and with the California and National Associations of Public Hospitals and Health Systems to track health reform deadlines and take advantage of funding that can enhance the delivery of care and improve the health status of our community.

There will be many changes as we move toward 2014 and programs like our Family Practice Residency Program give me faith in our ability to move forward and adapt and grow.

Sincerely,

William B. Walker, MD
Current, Former CCRMC Residents Connect at Family Practice Reunion

Generations of physicians—from World War II veterans to those fresh out of medical school—gathered recently to celebrate a common bond: our storied Residency Program. On June 26, dozens of former residents met at Contra Costa Regional Medical Center in Martinez to mark the 35th year of the conversion of the General Practice Residency Program to Family Practice in 1975. Attendees dated as far back as the class of 1954. At the reunion, speakers echoed the can-do attitude instilled in them from the late Dr. George Degnan, who founded the program. Dr. John Lee, a 1973 graduate and current faculty member, said Dr. Degnan strongly believed in teaching residents to do common things uncommonly well—a mantra that still echoes throughout the halls of CCRMC. Residency Director Dr. Jeremy Fish said the program’s success is due to the high-quality instruction and hands-on training.

Find out about our Residency Program at www.cchealth.org/groups/residency/ or reconnect with it on Facebook by searching Contra Costa Family Medicine Residency Alumni Group.

Contra Costa Immunization Registry Transitions to Multi-county Network

Our Immunization Registry has a new home with more access to more patient data. As of June 1, all of Health Services’ clinical staff began using the regional immunization registry that contains records from across the Bay Area. Our Public Health Immunization Coordinator Erika Jenssen said the California Immunization Registry provides access to more complete records, including records from private providers and community clinics. The California Immunization Registry, also known as CAIR, is based on software developed by our Information Technology unit. Erika said everyone involved, especially the superusers who trained roughly 1,100 colleagues on the system, made the smooth transition possible. The new system was piloted at the Brentwood Health Center.

Help Prevent Pertussis

State and local health officials are urging everyone to get vaccinated against whooping cough. Our county has seen a sharp rise in the number of people infected with the respiratory disease, also known as pertussis, and the state has said infection rates could hit a 50-year high. Whooping cough peaks in August so it’s a great time to get a booster shot (Tdap) if you’ve never had one. Health Services employees can call Occupational Medicine at 925-313-6488 to find out how to receive the vaccine. A coupon for free whooping cough vaccine is also available at www.cchealth.org/topics/pertussis/

To find out more about the California Immunization Registry or whooping cough, contact Erika Jenssen at erika.jenssen@hsd.cccounty.us or 925-313-6767.

Anesthesiologist Paul Kwok, left, talks with Residency Program alums Dr. Bryan Lee, center, and Dr. Jim Lynch.

Brentwood Health Center staff, from left to right, Kim Sanchez, Lonni Cronin, Rose Bargon, Mireya Diaz, Bev Sousa and Nonette Bermudez helped pilot the new immunization registry.
In 2010, the Reducing Health Disparities Unit, in collaboration with CCHS Division staff, are working to integrate the core principles and practices associated with the RHD Five-Year Plan and its goals. To view the Five Year Plan, visit www.cchealth.org/groups/rhdi/

This month focuses on data collection as a tool to addressing disparities.

PLEASE NOTE: After this issue, Reducing Health Disparity stories featured in the Director’s report will be featured throughout the Director’s Report and not on two separate pages. This change acknowledges the everyday efforts of all our Divisions in integrating reducing health disparity practices and strategies in their divisions. Story ideas can be sent to Connie James at connie.james@hsd.cccounty.us

**Spotlight**

**The Power of Data to Ignite Action**

Through the culling of data for nearly 10 years, Public Health’s Community Health Assessment, Planning and Evaluation Unit has helped identify and address health disparities in Contra Costa. In 2001, CHAPE, under the direction of Chuck McKetney, PhD, was birthed for the purpose of helping Public Health programs improve health outcomes and reduce health disparities. Since 2004, the unit has published two Community Health Indicators Reports on behalf of the Hospital Council of Northern and Central California. Before its first report, Chuck said, “there was no other place where Contra Costa health data was assembled in one place.” Findings have supported many grants and community efforts. One of the many efforts to come as a result of the 2004 report was our Cross-Divisional Violence Prevention Effort, which addressed the high homicide rate for African American men. In 2007, Chuck and his team released a second report. Among its findings were high levels of unintentional injury death among people age 65 and older. This data sparked a countywide fall prevention campaign. This fall, the unit will release its last report under the direction of Chuck, who will leave Health Services after 14 years in August to begin a new voyage with Alameda County Public Health as its Director of Health Assessment Planning and Education unit. Chuck said this report is the unit’s first to examine social conditions of health and their linkage to health outcomes. CHAPE will continue its work under the direction of Public Health Director Dr. Wendel Brunner until a replacement is found.

For more information about CHAPE contact Chuck McKetney at chuck.mcketney@hsd.cccounty.us or 925-313-6171. To see reports, visit www.cchealth.org/topics/publications/

From left to right, Chuck McKetney, Jennifer Lifshay, Debbie Casanova and Lisa Diemoz.
Using Partnerships to Identify Disparities

African Americans who suffer sudden cardiac arrest in East County are roughly three times more likely to die than cardiac arrest patients in the county as a whole. Pieces of data like this, collected by our Emergency Medical Services (EMS) Division and its partners, help focus efforts on high-risk communities. EMS has access to a robust amount of data that includes a patient’s age, race, ethnicity, city of residence and site of incident. EMS Medical Director Dr. Joe Barger said data also shows African Americans are less likely to survive sudden cardiac arrest than the county as a whole. Conversely, survival among Latinos is slightly above average. Health data is collected by the state, but Dr. Barger said EMS has been collecting its own data for the past 18 months. “It is my hope that over time we might be able to discover trends in a more rapid fashion and help increase awareness and support changes to address disparities,” Dr. Barger said. Using its data, EMS works with partners such as cities, schools and hospitals to implement change and improve outcomes. One such example is the recent “HeartSafe Community” campaign, which aims to increase awareness about heart emergencies. Dr. Barger said the collection of data has proved there is a need to put some emphasis on high-risk groups.

For more information about EMS data collection, contact Dr. Joe Barger at joe.barger@hsd.cccounty.us or 925-313-9553.

Monitoring Diseases to Control Infections

Our Public Health Epidemiology and Surveillance Unit is another team devoted to the collection and analysis of health data. For years, the unit has collected information about communicable diseases to guide control efforts and reduce health disparities. The unit monitors communicable diseases throughout the county and helps to pinpoint groups disproportionately affected. Data is collected for more than 80 diseases and conditions. Epidemiologist Dr. Juan Reardon said that the unit uses its findings to design interventions that control new infections. Dr. Reardon said monitoring diseases over time is important from the health disparities perspective because diseases may initially impact one population and later shift to another. Data has been used to shape vaccination priorities, tuberculosis therapies, needle-exchange policies and recommendations for soil handling during land developments, among other things. Local data helped many successful interventions. New tuberculosis cases have declined by half in the last decade. New diagnoses of HIV and AIDS have dropped to a third of what they were in 1999. The data is either received from laboratories, health care providers and field workers. The proactive surveillance efforts by field workers provide more complete and timely data for grave diseases. The unit also creates maps to present the geographic distribution of disease and to facilitate responses.

For more information about the Epidemiology and Surveillance Unit, contact Dr. Reardon at juan.reardon@hsd.cccounty.us
HazMat Chief Speaks About Safety Ordinance in D.C.

Our Hazardous Materials Director Randy Sawyer was in our nation’s capital in June to testify about safety in the oil and gas industry. The U.S. Senate Subcommittee on Employment and Workplace Safety hearing focused on saving lives and came on the heels of fatal accidents in Washington, the Gulf of Mexico and Texas. At the hearing, Sen. Patty Murray said she was “interested in hearing examples of local efforts that have successfully addressed process safety hazards in the oil and gas industry.” Randy was on hand to talk about our county’s recent successes. He credited the culture of safety in Contra Costa to the passage of the Industrial Safety Ordinance. In the past 11 years, Contra Costa has not had any accidents at a regulated facility that caused death or serious injury.

To view the hearing, visit www.bit.ly/b6cye9 or for more info on the Industrial Safety Ordinance, visit www.cchealth.org/groups/hazmat/

Divisions Go Paperless with Digital Documents

With help from Information Technology (IT), several of our Divisions are making the move to paperless files. Chief Financial Officer Pat Godley launched the effort four years ago to reduce offsite paper storage. Divisions participating in the switch include Finance, Hazardous Materials and the Health Plan. Going paperless usually involves four steps: identifying what to scan; preparing the documents; acquiring the images; and performing a quality assurance check. It’s Mark Clark, who assisted with the transition, said there have been some surprising benefits. Unlike paper files, Mark noted, converted paper records can be searched many different ways. He said digital files could be used by many people at the same time, saved in multiple locations and recovered after a disaster.

To find out more about the Electronic Content Management System, contact Steve Dinning at steve.dinning@hsd.cccounty.us or 925-313-6226. Read a more in-depth article about going paperless on isite.

Electronic Medical Records in the Works for CCRMC

Our Contra Costa Regional Medical Center and Information Technology unit staff have started work on future implementation of Electronic Medical Records (EMR) at the hospital. CCRMC staff are looking at current workflow and processes that might be affected by the use of EMRs, as well as for opportunities to improve patient care and safety before and during the implementation process. EMRs, including e-prescribing, electronic ordering and other Meditech modules, are scheduled to go live at CCRMC in Spring 2012. Stay tuned for updates.

For more information, go to isite or contact Steve Tremain, MD, at 925-370-5122 or Steve.Tremain@hsd.cccounty.us.
Cynthia Belon
Homeless Program Director
Public Health

For working tirelessly and collaboratively over the last few years to bring the dream of a respite center for medically fragile people who are homeless to reality, finding funding and creating a welcoming environment for the most vulnerable members of the Contra Costa community.

♦ Nominated by William Walker, MD

Sylvia Elizarraraz
Ambulatory Care Clinic Coordinator
Brentwood Health Center

For patience in teaching me the complexities of the electronic Opinion Meter operations to ensure the privacy of Patient Satisfaction responses by Ambulatory Care ID Clinic Patients.

♦ Nominated by Deborah Card

Paul Harden
Environmental Health Specialist I
Environmental Health

For effectively working with media in a high pressure situation to describe the importance of food safety and for demonstrating service excellence in explaining regulations to the public.

♦ Nominated by William Walker, MD

Richard Kraus
Health Services Accountant
Finance

For coordinating the purchase, installation and maintenance of two Automated External Defibrillators (AED) at CCHS Finance, organizing the policy and procedures for the AEDs and assembling a list of on-site staff who have been trained to use them.

♦ Nominated by William Walker, MD

Suzanne Maldonado
Clerk – Senior Level
Family, Maternal & Child Health Programs

For providing outstanding administrative and logistical organization for the successful 14th annual San Francisco Bay Area Regional Homeless Perinatal Conference by coordinating with representatives from the Bay Area health departments as well as community-based organizations.

♦ Nominated by Rusty Keilch

Fatima Matal Sol
Substance Abuse Program Manager
Alcohol and Other Drug Services Division

For responding extraordinarily quickly to a request for information for the Contra Costa Reentry Strategic Plan and for providing compelling material about the substance abuse needs of people being discharged from California prisons.

♦ Nominated by Julie Freestone
July Milestones Congratulations to these employees who have given us long years of service: Leilani Hernandez, Suzanne Davis, Thomas Harmon, Linda Arzio, Sharon Crocker-Sylvia, Jade Litt, Henry Melson, Jonathan Schneider, Terry Tipton-Guthmiller, Carlos Chu, Lee Yarberry, Shannon Martinez (10 years); Antoinette Baranov, Anick Labonville, Siu Tong, Mary Gerrard, Deborah Manes, Peggy Pflager (15 years); Marc McDaniel, Marsha Krinsky, Suzanne Cade, Eduardo Villareal, Bernadette Landrito (20 years); Mitchell Applegate, Judith Poole (25 years); Joseph Barger, Genoveva Calloway, Patricia Wardley, Suzanne Maldonado (30 years); and Dennis Venegas (35 years).

August Milestones Congratulations to these employees who have given us long years of service: Sheba L. Gorospe, Marcela Cardenas, Genivieve M. Heredia, Carol A. Pedersen, Ramganesh R. Ramlall, Rebecca S. Reyes, Cynthia J. Belon, Mary C. Bolds, Jessica L. Jones, Omar D. Adair, Candace M. Dearden (10 years); Cathy J. Steirn, Diane M. Marin, Lorena G. Barajas, Trina J. Ruffin, Ericka J. Sexton, Linda S. Bartlett (15 years); Richard P. Weisgal, Rosa M. Venegas, Monica Gallagher (20 years); Albert W. Flanagan (25 years); Sandra S. Whitesell (30 years); Lolita E. Adona and Dawn C. Wardlaw-Kays (35 years).

Jean Moss
Clerk—Senior Level
Mental Health

For coordinating the initial information needed for Mental Health Court Reports, getting the finalized reports to the varied departments ahead of schedule and remaining calm and professional when time pressures are present.

Nominated by Chris Castro

Julianne Reed
Emergency Planning Coordinator
Public Health

For her outstanding role in leading the 2010 revision of the CCHS Emergency Plan.

Nominated by Kim Cox

Roberto Rodriguez
Environmental Health Specialist II
Environmental Health

For doing an excellent job communicating new pool safety laws to the public through interviews with television and radio news reporters.

Nominated by William Walker, MD

Soren Tjernell
Policy Director
Community Clinic Consortium

For working collaboratively and creatively to improve access to care for the most vulnerable residents of Contra Costa.

Nominated by William Walker, MD

Do you know someone who’s going the extra mile? Service Excellence nomination forms are available at www.cchealth.org and http://cchs/ from any cchs computer.

Honor Roll
GOING THE EXTRA MILE FOR SERVICE EXCELLENCE
Web-based System Improves Communication, Care for Clinic Services
Our Public Health Clinic Services Program is using a new web-based case management system that allows real-time documentation during home visits. Accessible via a laptop, the system enables nurses to input data on-site. The system facilitates the care of postpartum, newborn and pediatric clients. Nurse Manager Jeanette Braker said it has improved communication, as well as the quality and quantity of care. Clinic Services has 25 public health nurses who use the system and make 15,000 home visits per year. Jeanette said Clinic Services takes referrals from ccrmc, the Health Centers, local hospitals and other health care providers. Referrals are linked to medical, mental health, dental, health coverage and other social services.

To find out more about Public Health Clinic Services or to make a referral, call 925-313-6250.

Linguistic Access Unit Translates Documents, Too
Do you have a written document that needs to be translated? Just as we provide interpreter services for patients and clients, we provide translation services for written materials. A qualified person must translate these materials for them to be effective. To have a document translated, contact Sally McFalone at sally.mc Malone@hsd.cccounty.us or type Translation in the To: field of Lotus Notes. For more information, read Department policies 402-PCS and 1037.

Health Column Discusses Antibiotic-Resistant Germs
Antibiotics are great at treating many infections, but they should be used only as prescribed. ccrmc physician Dr. Nishant Shah warns that the more antibiotics we use, the more likely it is that new resistance will develop. Dr. Shah wrote that one reason antibiotic-resistant germs are becoming common is because antibiotics are sometimes used unnecessarily. A cold, bronchitis and earaches are examples of when antibiotics are not needed, according to Dr. Shah. In fact, using antibiotics for these ailments could expose a person to dangerous side effects. Antibiotics should not be shared. Dr. Shah said all infections are different and specific antibiotics are needed for different types of infections.

To read more of this and other Healthy Outlook columns, visit www.cc health.org and click on the Healthy Outlook link in Items of Interest or on the Publications page.
County Supervisors Proclaim ‘Soda Free’ Summer
This summer the Nutrition and Physical Activity Promotion Program in our Public Health Division is challenging you to cut calories by skipping soda. The Program kicked off its “Rethink Your Drink” and “Soda Free Summer” campaigns June 21 in Martinez with free cucumber water and information about the sugar content in soda and other sweetened beverages. The following day, the county Board of Supervisors supported the effort with a proclamation brought to the agenda by Supervisor John Gioia for Contra Costa County to go “Soda Free” in June, July and August. Program Manager Andrea Menefee said the purpose is to promote health and prevent obesity. She said Americans consume an average of 100 pounds of added sugar a year, a big portion of which comes from sweetened beverages and soda.

To obtain a campaign brochure, visit www.cchealth.org/topics/nutrition/ or contact Gwenn White at gwenn.white@hsd.cccounty.us and see media coverage of these efforts on the Contra Costa Health Services’ Facebook page.

Environmental Health Inspectors Help Pool Owners Comply with New Law
Our Environmental Health Division ramped up its outreach efforts during the last few months to help public pool and spa operators comply with a new law that took effect July 1. The law enacted as State Assembly Bill 1020 aims to protect children from drain hazards. Supervising Environmental Health Specialist Roberto Rodriguez said powerful suction from drains could cause a child to get stuck and drown. Environmental Health inspectors have worked with local pools for the past year and a half to help them meet the July 1 deadline. Pools not in full compliance could face closure, depending on how much works needs to be done. A list of pools that will be closed will be posted on our website. The law follows the federal Virginia Graeme Baker Pool and Spa Safety Act, which was created after a 7-year-old became trapped at the bottom of a hot tub and drowned.

For more info, visit www.cchealth.org/groups/eh/programs/pool_safety_law.php or call Environmental Health at 925-692-2500.

New Health Center Finds Home Near Doctors Medical Center San Pablo
The location of our new West County health center was announced in July along with proposed plans and a design. Leaders said the site along San Pablo Avenue between Vale Road and Church Lane is ideal because of its proximity to Doctors Medical Center San Pablo. Initially, the health center was to be located on the Doctors Medical Center San Pablo campus, but space was an issue. Construction for the clinic, which will replace our aging Richmond Health Center, could be finished by spring 2012. The project was made possible in December with $12 million in federal stimulus funds.