

San Joaquin County Public Health Services Annual Report—2015



A DIVISION OF
HEALTH CARE SERVICES
AGENCY

SAN JOAQUIN COUNTY
Public Health Services
Healthy Future

INTRODUCTION

San Joaquin County Public Health Services (PHS) is a public health department with a broad array of programs and services to protect and promote the health and wellbeing of county residents. PHS is well-regarded for its core programs, including a state-of-the-art Public Health Laboratory and an immunization registry that both serve seven surrounding counties. PHS' 240 member multi-disciplinary staff reflects the diversity of the county's population.

Programs that Serve the People of San Joaquin County

PHS has a strong slate of managers and supervisors that direct programs grouped as follows:

- **Communicable Disease Control and Prevention** - acute communicable diseases, sexually transmitted diseases, and Tuberculosis;
- **Health Promotion, Chronic Disease and Injury Prevention** - tobacco control, child passenger safety, pedestrian and bike safety, heart disease and diabetes prevention, nutrition and physical activity, senior wellness, and the promotion of breastfeeding;
- **Maternal, Child, Adolescent, and Family Health** - Black Infant Health, Adolescent Family Life, and WIC;
- **Clinical Services or Linkage with Care** - immunization clinics, California Children's Services, Medical Therapies for Children, Child Health and Disability Prevention, Foster Care Nursing Services, and Childhood Lead Poisoning Prevention; and
- **Supportive Capabilities** - Epidemiology, Public Information/Communications, and Emergency Preparedness, as well as the issuing of Birth and Death Certificates.

Priorities of the San Joaquin County Board of Supervisors

In alignment with the Board of Supervisors' strategic priorities regarding collaboration among County departments, PHS has a number of public health nurses stationed in other divisions and departments that serve clients in common (e.g., Human Services Agency, Children's Services Branch - Foster Care Nursing Services; Aging and Community Services – In-Home Supportive Services, and San Joaquin General Hospital's Healthy Beginnings clinic).

Health in All Policies

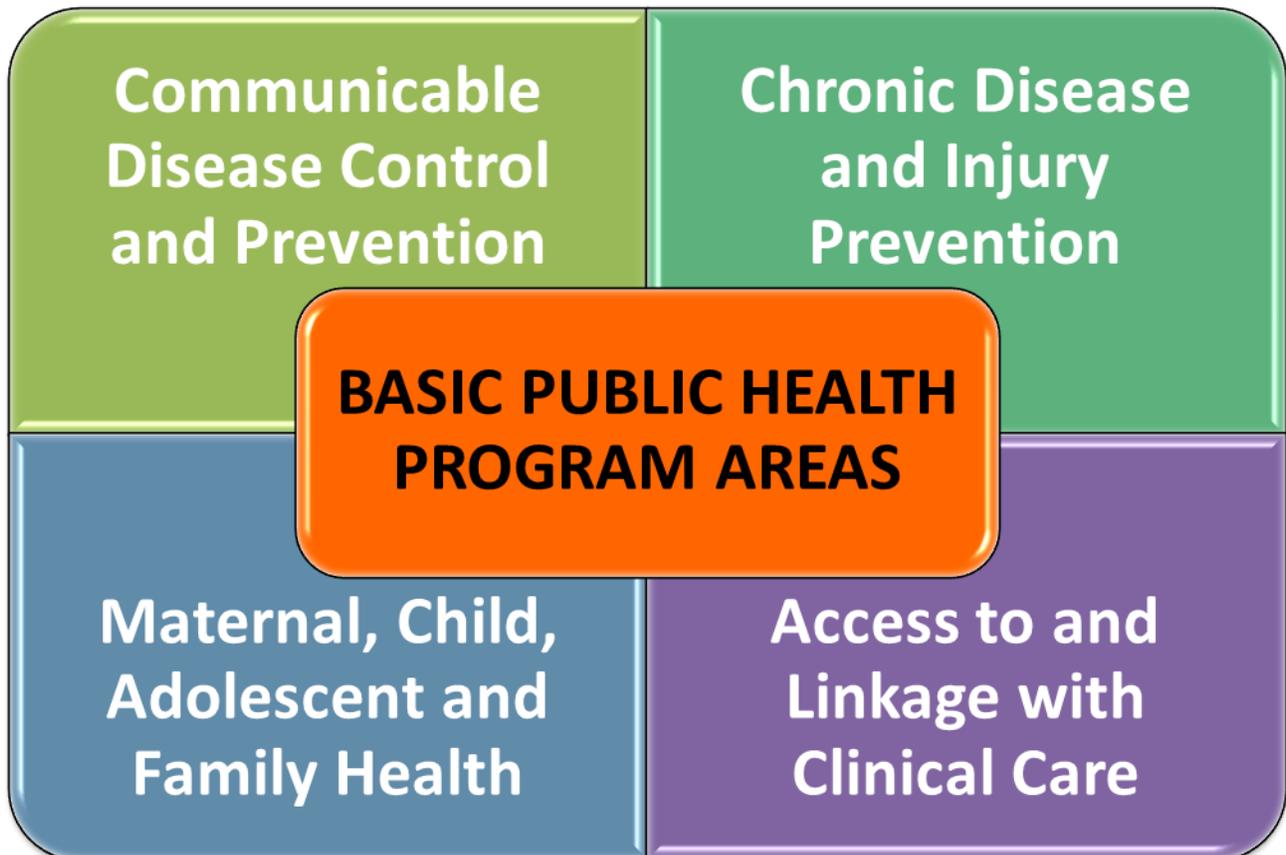
PHS recognizes that creative, community- and policy-oriented approaches are key to long-term success. PHS strives for a "health in all policies" approach that calls for public health professionals to work with many community partners, such as law enforcement, transportation officials, environmentalists, educators, community service providers, faith-based organizations, and resident grassroots leaders who can help communities to make the healthier choice the easy choice for all.

Social Determinants of Health

We are particularly interested in how health is inextricably linked to geography, because structural social conditions tend to concentrate resources and opportunities for healthful living. In essence, where you live determines how long you live. In fact, life span is foreshortened by more than 10 years in our most impoverished neighborhoods. To get at the root causes of such inequities, we are working with colleagues across all sectors to improve the social, economic, and physical conditions that impact health. With our commitment to service excellence and the strong support of our community partners, we are confident that we can continue to improve health in all of our communities.

PHS PROGRAM HIGHLIGHTS

The following five pages briefly describe selected PHS programs and illustrate some of their highlights from 2015. They are grouped in four major public health program areas plus the group of capabilities that provide support to all program areas (see below graphic).



Supportive Capabilities

- **Assessment (Epidemiology and Laboratory Capacity)**
- **Emergency Preparedness and Response**
- **Public Information and Communication**
- **Policy Development and Support (e.g. Accreditation)**
- **Community Partnership Development**

PROGRAM HIGHLIGHTS

Communicable Disease Control and Prevention

In 2015, San Joaquin County Public Health Services (PHS) received approximately 9,850 reports of communicable diseases, a 30% increase from 2014 (7,580 reports); chlamydia and gonorrhea account for about 50% of the reports (3,500 and 1,200, respectively). The number of reports continue to increase impacting PHS response.

General Communicable Disease (CD)

Conducted case and outbreak investigations of select reportable diseases to identify the source of infection (e.g., food, water, person) and other exposed/ill contacts, excluded ill people from working until cleared, and provided health education. Monitored the number of reportable diseases to identify potential outbreaks.

Tuberculosis (TB)

Managed cases by providing direct observational therapy and basic necessities to ensure completion of treatment. Identified and evaluated contacts of cases to prevent them from developing the disease, in turn, interrupting the cycle of transmission. Conducted extensive investigations of outbreak-related cases and their contacts to stop transmission.

Sexually Transmitted Diseases (STDs)

Worked with community partners, focusing on prevention, treatment, surveillance, and care. Conducted extensive contact investigations of individuals exposed to syphilis. Ensured adequate treatment of gonorrhea. Assisted HIV positive persons with benefits counseling and referrals, nursing assessments, and partner services.

Shigella sonnei Outbreak

164 Cases—Highest on Record



Historically Averages 9 Cases per Year

3 Large Outbreaks

58 Cases

Over **500** Contacts Evaluated



Syphilis

129 Infectious Cases



6 Cases in Newborns

PROGRAM HIGHLIGHTS

Chronic Disease and Injury Prevention

Chronic Disease Prevention

Led start-up efforts for the comprehensive four-year Lifetime of Wellness grant, funded by the Centers for Disease Control and Prevention (CDC). This grant addresses 15 intersecting chronic disease prevention strategies to prevent obesity, diabetes, and heart disease.

PHS is...

1 of 6 in California

To receive an innovative grant to prevent chronic diseases



Child Passenger Safety

Provided car seat safety classes and presentations to educate parents and caregivers regarding the law, and the correct use of child safety seats. Hosted weekly fitting stations to make sure car seats are properly installed. Provided reasonably priced car seats to the low-income families who participated in the classes.

Installed 341 car seats



Smoking and Tobacco Outreach/Prevention

Worked with community partners to promote tobacco-free community environments. Hosted a coalition that assists with community assessments, strategic planning, and supporting and promoting tobacco control policy initiatives.

100%

Smoke Free policy adopted at San Joaquin Regional Transit District (RTD).



PROGRAM HIGHLIGHTS

Maternal, Child, Adolescent and Family Health

Breastfeeding Initiative

Assisted maternity hospitals with the adoption and implementation of California Department of Public Health's Breastfeeding Model Hospital Policies and designation as WHO/UNICEF Baby-Friendly hospitals. Provided training and assistance to hospitals to improve practices and policies.

Local Hospitals

Assisted two of six maternity hospitals to achieve Baby-Friendly Designation



Women, Infants and Children (WIC)

Responded to client needs by increasing Saturday WIC services in Manteca. Implemented a Client Routing System which allows for improved management of clinic flow, and ability to evaluate efficiencies such as clinic wait time.

Averages
10,000
participants
per month



Public Health Nurse (PHN) Home Visits

Provided nurse case management services to pregnant and parenting women. Through nursing assessment, referrals, and parent education, there has been an improvement in health outcomes for both the pregnant mother and her infant.

PHNs made...

1,595
Home visits



23% higher than projected

PROGRAM HIGHLIGHTS

Access to and Linkage with Clinical Care

Clinic/ Immunizations

Offered public health specialty services such as sexually transmitted disease (STD) services and tuberculosis management, and demand for both continues to increase. The greatest increase in clinical services has been in STD clinic, which corresponds with increases in cases of Syphilis, Gonorrhea and Chlamydia. The frequency of STD clinic services has increased to meet the identified need.

Public Health Clinic

16,423

Patient visits



16% higher than projected

Foster Care

Foster Care PHNs provided health care oversight of the physical, behavioral, dental and developmental needs for all children in foster care. The number of children in Foster Care continues to increase. In addition, the complexity of the cases has increased, with more children having chronic health issues or taking psychotropic medications. The number of PHNs working in Foster Care was increased to address the increased need for nursing case management services.

Over 1,500 children



currently in Foster Care

California Children's Services (CCS)

Used a multi-disciplinary approach to medical case management to restore or maintain the fullest degree of physical, emotional, and social capacity. Assistance was provided with food, housing, medical equipment and supplies, transportation and access to care. As more children have become Medi-Cal eligible, the number of CCS clients has also increased.



Averages **300** New Referrals
per month

PROGRAM HIGHLIGHTS

Supportive Capabilities

Laboratory

Successfully filled a new position of Assistant Laboratory Director. Despite the current shortage of Public Health Lab Directors, the new Assistant Lab Director will be eligible to be a Public Health Lab Director by the beginning of 2017. The laboratory added new state-of-the-art equipment that provides lab results in a shorter period of time, resulting in the ability to begin treatment more expediently.

Public Health Laboratory

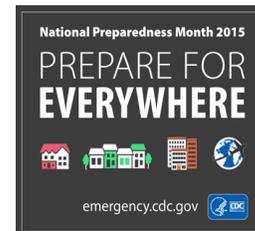


New Testing Capabilities
For Faster Detection

Emergency Preparedness (EP) and Response

PHS EP staff provided training for community and faith-based organization staff and volunteers entitled, "Let's Make A Plan." Informational resources were provided to assist them in personal and family preparedness. EP staff received national training to allow them to facilitate live no-cost Federal Emergency Management Agency (FEMA) courses for County staff and community members.

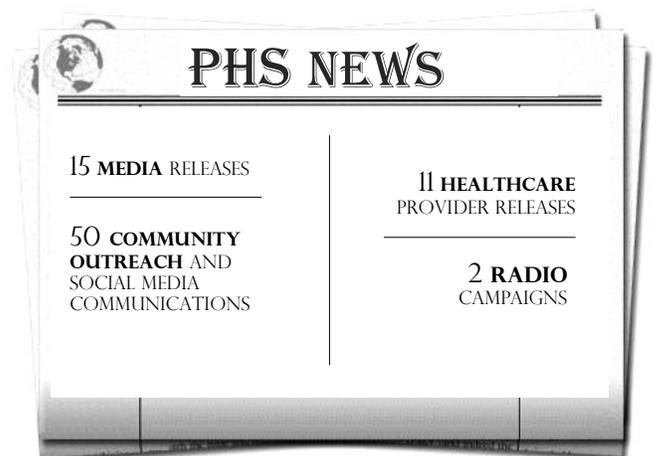
National Preparedness Month Campaign



Prepare, Prevent, Mitigate,
Respond, Recover

Public Information and Communication

Developed and disseminated information to the community regarding issues that impact the public's health and safety. Crucial health information was distributed through health alerts/advisories, news releases, recorded message lines, media events, and website and social media postings.

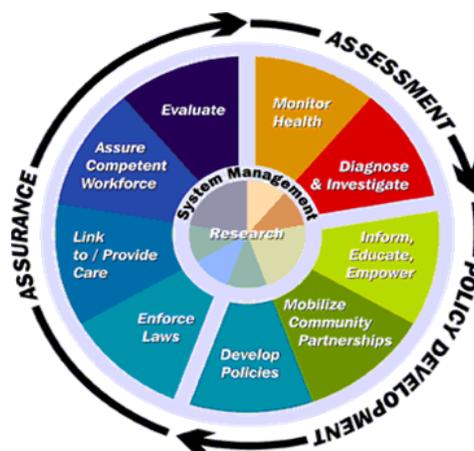


PUBLIC HEALTH ACCREDITATION

PHS is preparing to apply for accreditation from the national Public Health Accreditation Board (PHAB). The process consists of adopting a set of quality standards of public health practice and management, measuring performance against those standards, and recognizing health departments that meet those standards. PHAB's standards and measures are based on the 10 Essential Public Health Services (see graphic) which describe the activities that all public health systems should provide.

Accreditation will be a significant milestone for PHS and will allow the department to continue to focus on quality improvement to:

- Promote accountability to the community we serve
- Meet the mission of improving the health of the community
- Build upon our strengths and improve our weaknesses
- Place the department in a competitive position to garner additional funding.



There are seven steps to Public Health Accreditation: 1) *Pre-application*; 2) *Application*; 3) *Document Selection and Submission*; 4) *Site Visit*; 5) *Accreditation Decision*; 6) *Reports*; and 7) *Reaccreditation - every 5 years*. PHS is at step 1 and making excellent progress in fulfilling the four prerequisites required to initiate the process:

- The Department has developed and implemented its foundational electronic **Performance Management and Quality Improvement (PMQI) system**;
- PHS, in concert with a broad array of community partners, has just completed the **Community Health Assessment (CHA)**, a comprehensive assessment of health status outcomes, as well as the social factors that impact health.
- Work will soon commence on development of the **Community Health Improvement Plan (CHIP)**, a county-wide, community-driven plan to improve health by focusing on priorities derived from CHA data.
- Finally, **PHS's Departmental Strategic Plan** will address departmental priorities, including its role and accountability in implementing the CHIP.

The Department plans to complete the prerequisites by Fall 2016.

COMMUNITY PARTNERSHIPS

Community partners from all sectors play an important role in building a strong public health system. These partnerships include both traditional and non-traditional entities including hospitals and clinics, schools, fire departments and law enforcement agencies, businesses, employers, transportation agencies, civic groups, community- and faith-based organizations, neighborhood organizations, elected leaders and others. Such collaborations encourage different perspectives, provide additional expertise, leverage assets and resources, and engender shared ownership of strategies for community improvement.

This year, PHS has been actively engaged in a number of important community collaborations, coalitions, and advisory groups working to address community health-related issues. One compelling example is PHS' role as a member of the steering committee of the Reinvent South Stockton Coalition (RSSC). This coalition is comprised of a very diverse set of players, including more than 300 local volunteers (concerned residents, stakeholders, and neighborhood activists). The purpose of RSSC is to build community capacity and civic engagement to help revitalize South Stockton. Activities focus on coordinating efforts to improve safety, education, housing, job creation and health services. This year, PHS led focus groups with local south side residents to ensure that their voices were heard as part of the 2016 Community Health Needs Assessment; took the lead in developing several grant applications; securing additional Coalition members from the health care sector; and supported RSSC's numerous community-wide events to further strengthen civic engagement (e.g., 2015 Residents' Summit, National Night Out, and Park Clean-ups).

Again, RSSC is just one example of PHS' many community partnerships that are foundational to community health improvement – not only to help identify priorities and implementation strategies but to take collective action designed to promote permanent change.



LOOKING FORWARD TO 2016

The health of the community is our primary concern. Our general mission is to promote and protect the health of all members of San Joaquin County. As part of our work we must periodically evaluate our efforts and ask the question of how are we doing? This report is our attempt to answer that question.

Given the growing county population, the rapidly changing health care landscape, the complex social issues, and the ever increasing demands being placed on public health, it is critical that we continuously assess our capacities, capabilities, and resources to make sure we have what we need to keep our communities safe and healthy.

Reflecting on the highlights section of this report, it is clear that we are making commendable strides in many areas. However, we remain concerned that communicable diseases continue to increase, especially tuberculosis and syphilis, and more than expected for our county population growth. Although we have identified and been able to address many of the factors which help to drive the increase in these numbers, we have not seen a decrease yet, in good part because of inadequate resources for their prevention. In addition to those well-known diseases, we must also, often urgently, devote significant time and resources to responding to emerging diseases and threats such as Ebola in 2014-2015 and Zika recently. We are confident that in 2016 with additional staff to focus on more thorough contact investigation, treatment completion, provider education, and community awareness, we will more successfully slow the spread of communicable diseases and decrease preventable disease and death.

Looking forward, we continue the work of seeking accreditation, strengthening our programs and focusing on improving the health of all County residents. We trust that the public will value healthy people in healthy communities as critical to residents continuing to “rise” in all facets of life - that our collective desire for all residents to have healthy futures will be realized and we will all experience a healthier San Joaquin where, as the Chair of the Board emphasized recently in describing the State of the County, “our potential is powerful, the possibilities are great and our success story is just beginning”.

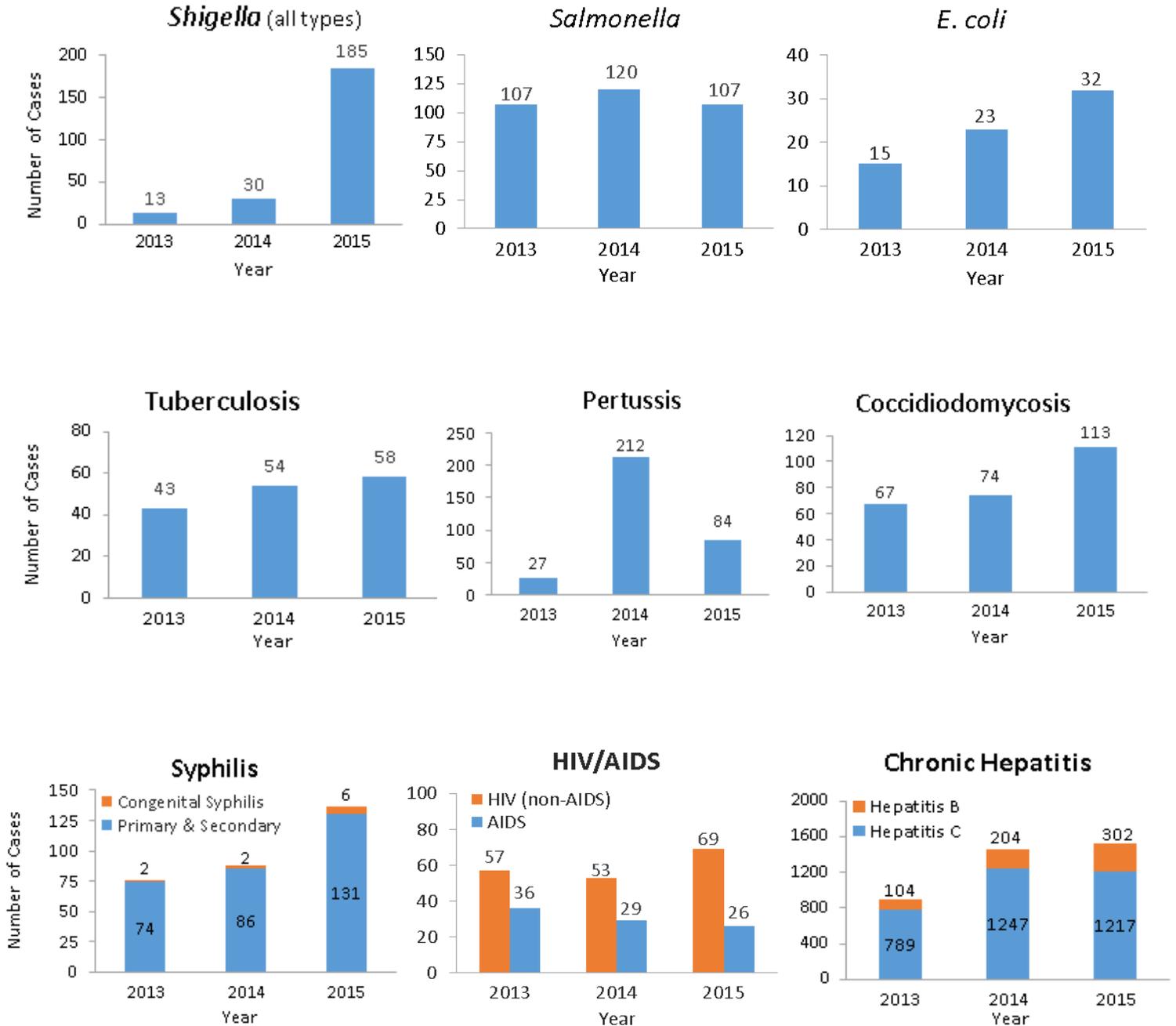


APPENDIX

The total number of cases for the below notifiable diseases (excluding HIV) was 1,408 in 2005 and 2,258 in 2015, a 60% increase. The number of cases continue to increase, especially in the last three years.

See below for the three-year trends of selected notifiable diseases.

Case Count by Year Reported, 2013-2015



ACKNOWLEDGEMENTS

San Joaquin County Public Health Services

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