Santa Cruz County Community Health Assessment Findings

PRESENTED TO THE SANTA CRUZ COUNTY MAPP STEERING COMMITTEE

NOVEMBER 18, 2016

PUBLIC HEALTH INSTITUTE

Overview

- Update of MAPP Process

- Vision Statement

- Forces of Change Assessment Findings

- Community Themes and Strengths Assessment Findings

- Community Health Status Assessment

- Identifying Areas for Community Health Improvement

Mobilizing for Action through Planning and Partnerships

From the Redwoods through the Valleys to the Sea: Embracing Communities, Enhancing Wellbeing

MAPP Steering Committee Vision Statement

Values

Accountability

Collaboration

Equitable

Evidence Informed and Data Driven

Responsiveness

Questions Addressed in the Four MAPP Assessments

Forces of Change Assessment

➢ What forces affect how to take action?

Community Themes and Strengths Assessment

➢ Why do health conditions exist?
➢ What assets are available in the community?
➢ What is the quality of life in the community?

Community Health Status Assessment (Indicators)

➢ What health conditions exist in the community?

Local Public Health System Assessment

➢ What system weaknesses must be improved?
➢ What system strengths can be used?
➢ What short-term or long-term system performance opportunities are there?

Forces of Change Assessment: Key Findings

HELD DECEMBER 2, 2015

What is occurring that will affect the local public health system or community?

21 members of the MAPP Steering Committee participated

We captured opportunities and/or threats for each one

The top four responses based on number of groups are:
- 2016 presidential election (8)
- No action to improve the affordability of housing (5)
- Senior/aging population and workforce (5)
- Climate change (5)

What is occurring that will affect the local public health system or community? (continued)

Movement to increase the minimum wage

Access to broadband telecommunications data

Affordable Care Act – volume to value payment model

Immigration reform

Increase use and dependency of technology

Decrease in educational achievement

Attention to equity and closing gaps

El Niño (flooding)

County North-South divide

Increase in the ratio of rich to poor (economic disparities)

Increase in diverse populations, especially Mexican indigenous population leading to a shift in demographics

What is occurring that will affect the local public health system or community? (continued)

Community level politics/Take Back Santa Cruz

Trending issues such as e-cigarettes

Integrated behavioral health

Disease outbreaks (includes novel infectious agents)

Natural disasters

Inconsistent funding opportunities

Legalization of medical marijuana

Right to die

Decreasing opportunities for college graduates

Combination of political campaigning and terrorism

Shortage of agriculture workers

Changes in the agriculture industry

Proposition 47 and other criminal justice reforms

What is occurring that will affect the local public health system or community? (continued)

Narrative of who is deserving of services

Increase in Obesity

Homelessness (increase)

Economic Opportunity

Public health accreditation

1115 MediCal/drug expense waiver and newly insured

Many strategic plan initiatives in Santa Cruz County

Staff recruitment and changes in leadership

Community Themes and Strengths Assessment:
Community Dialogues

WHAT IS IMPORTANT TO OUR COMMUNITY?

PERCEPTIONS ABOUT QUALITY OF LIFE?

WHAT ASSETS DO WE HAVE?

Conducted 11 Community Dialogues across the County

Age	n	Percent
Youth (<18 years)	8	13.1%
Adults (18-59 years)	31	50.8%
Seniors (>60 years)	22	36.1%

Race/Ethnicity	n	Percent
Hispanic/Latino	14	23.0%
White/Caucasian	35	57.3%
Asian/Pacific Islander	1	1.6%
Black/African American	0	0.0%
Native American/Indian	1	1.6%
More than one race/ethnicity	5	8.2%
Other	4	6.6%
Refused	1	1.6%

Conducted 11 Community Dialogues across the County

Language	n	Percent
English	51	83.6%
Spanish	1	1.6%
English/Spanish	8	13.1%
Other	1	1.6%
Gender	n	Percent
Female	44	72.1%
Male	16	26.2%
Other	1	1.6%
Children Living at Home	n	Percent
Yes	16	26.2%
No	43	70.5%
Refused	2	3.3%

Five Most Frequent Themes

- Substance use

- Mental health

- Homelessness

- Food and nutrition

- Public safety

Perceived relationships among themes as discussed by community dialogue participants.
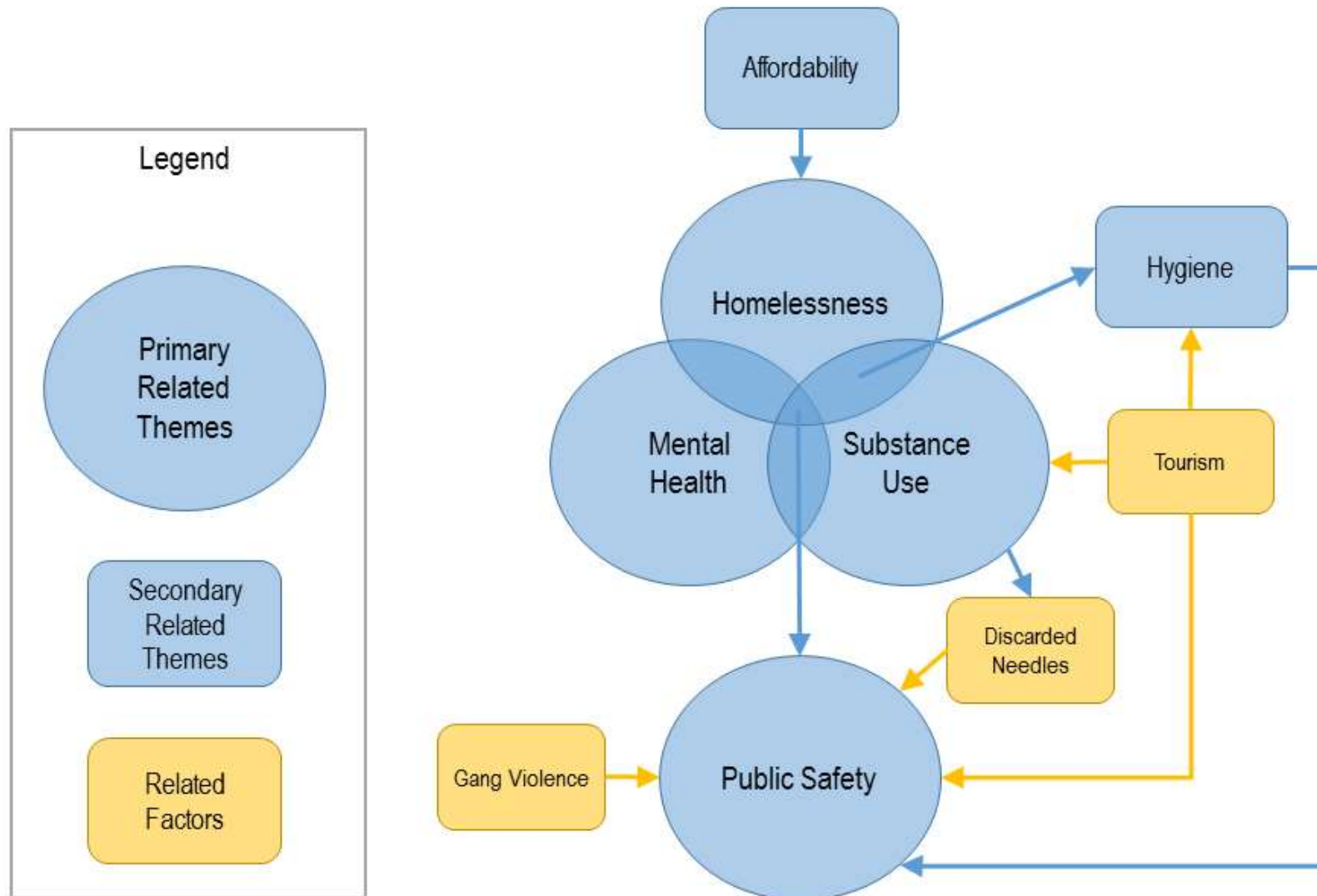
Community Health Status Assessment: Key Findings

➢ WHAT HEALTH CONDITIONS EXIST IN THE COMMUNITY?

Categories of Indicators

Economic

Educational Factors

Social Environment Factors

Safety Factors

Healthcare Access and Quality

Quality of Life

Behavioral Risk Factors

Environmental Factors

Social and Mental Health Factors

Maternal and Child Health Factors

Death, Illness, and Injury

Infectious Disease

Economic Factors

- Percent Unemployed

- Percent of Households below Self-sufficiency Income Standards

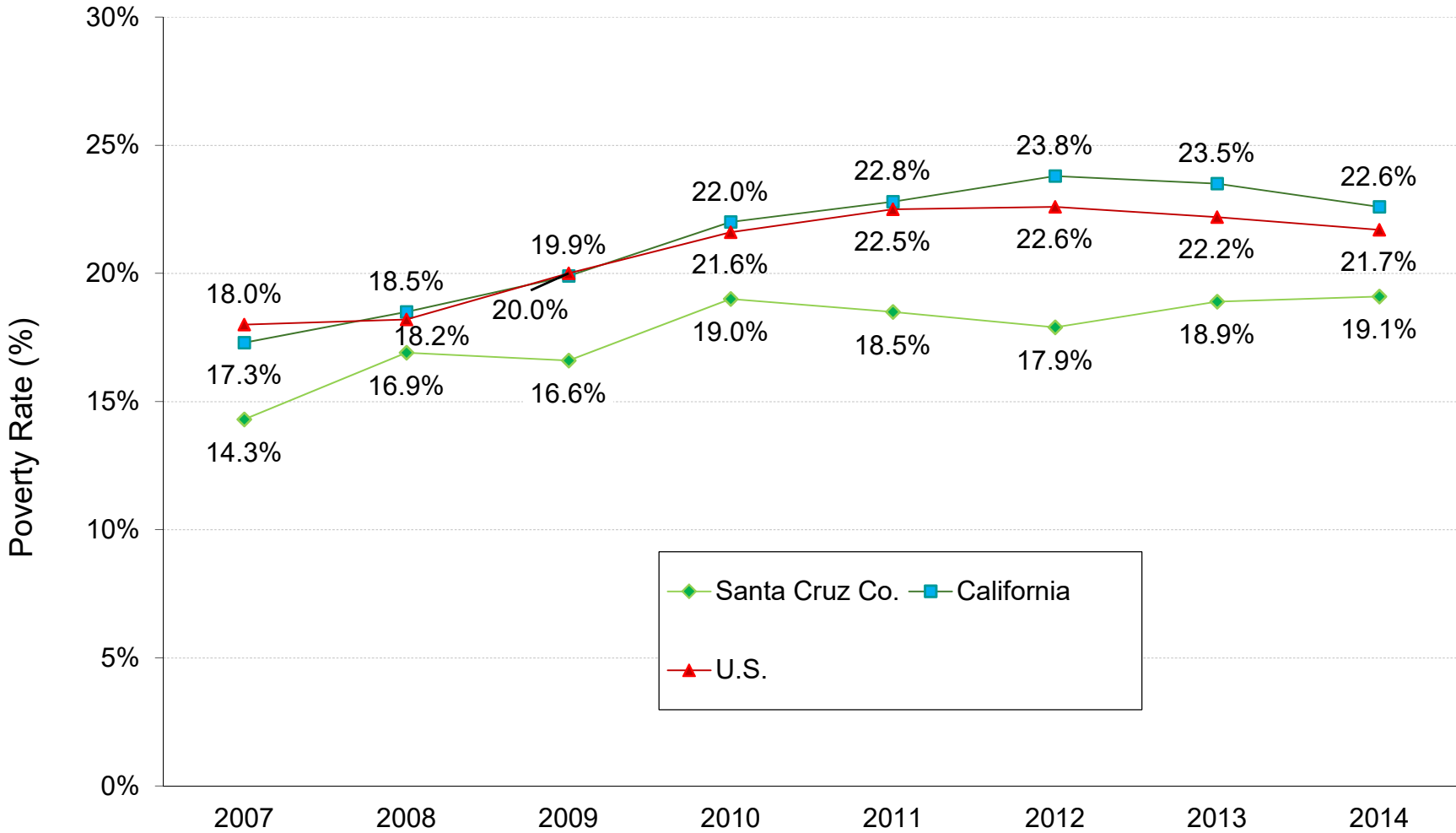- Percent of Children under 18 below 100% Federal Poverty Level

Percent Unemployed, Santa Cruz County and California, 2006-2016 (May)
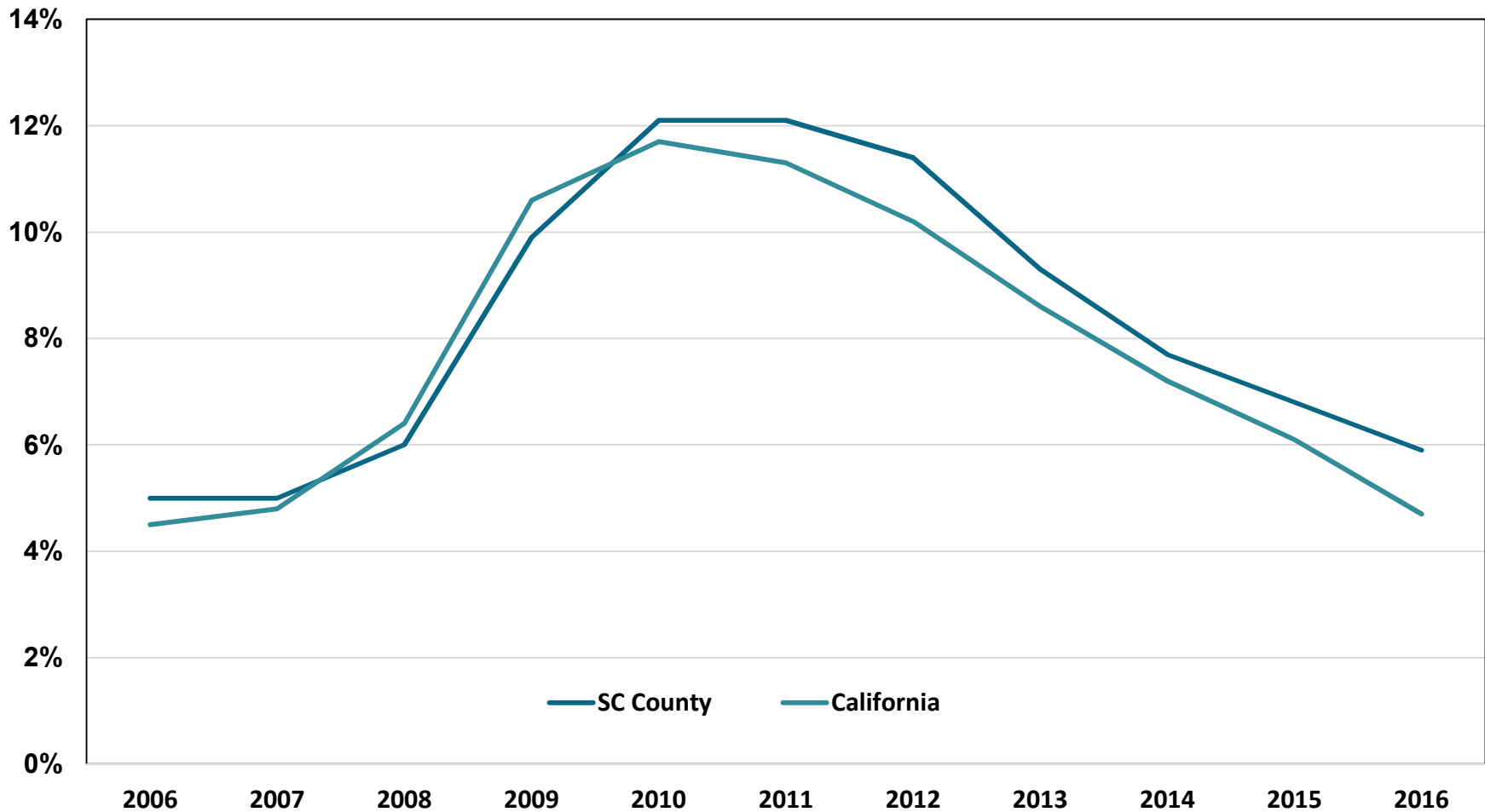
Percentage of Households Below Self-Sufficiency Income Standards, Santa Cruz County, 2012
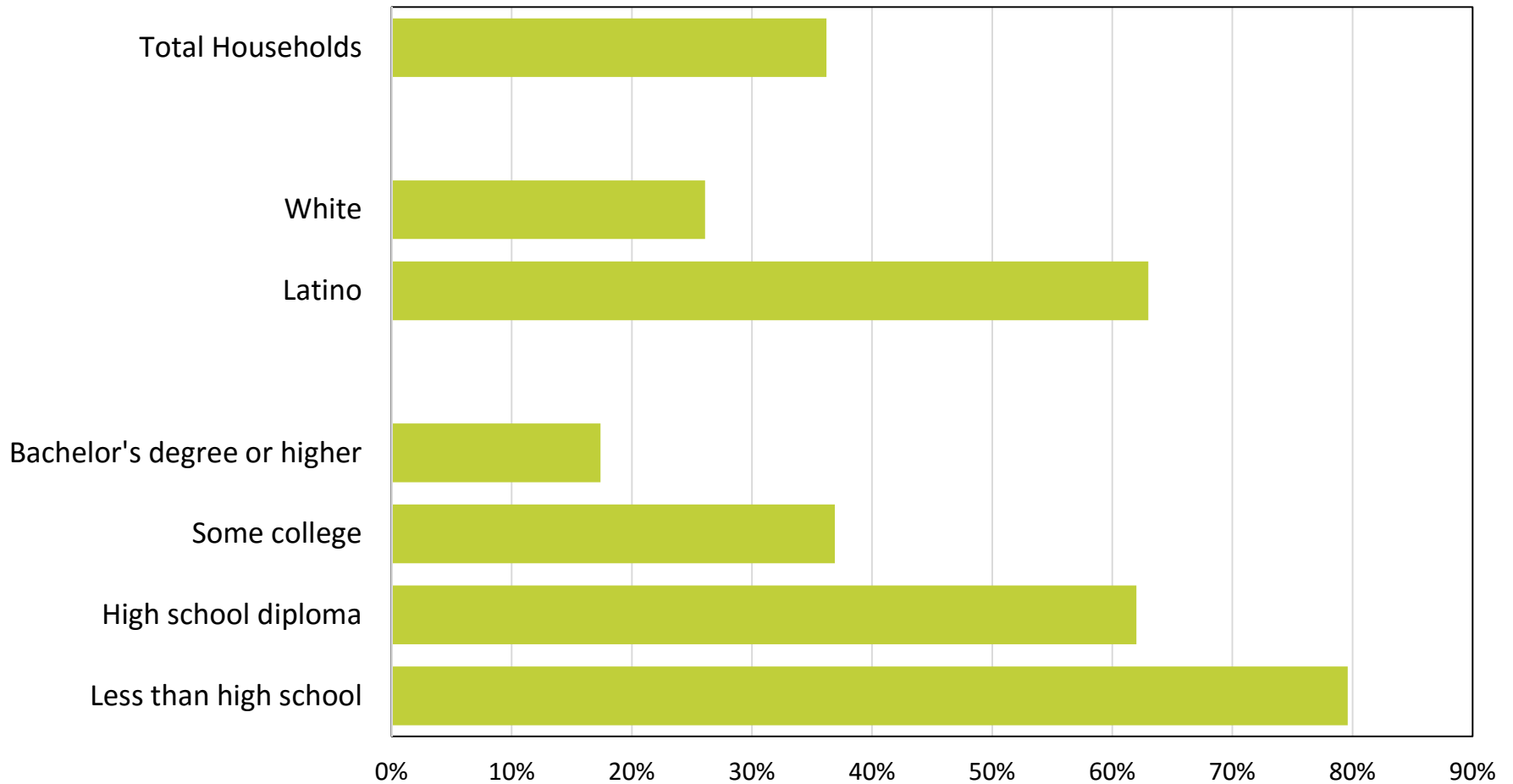
Children (Under 18) in Poverty – Santa Cruz County, CA, and U.S., 2007 - 2014
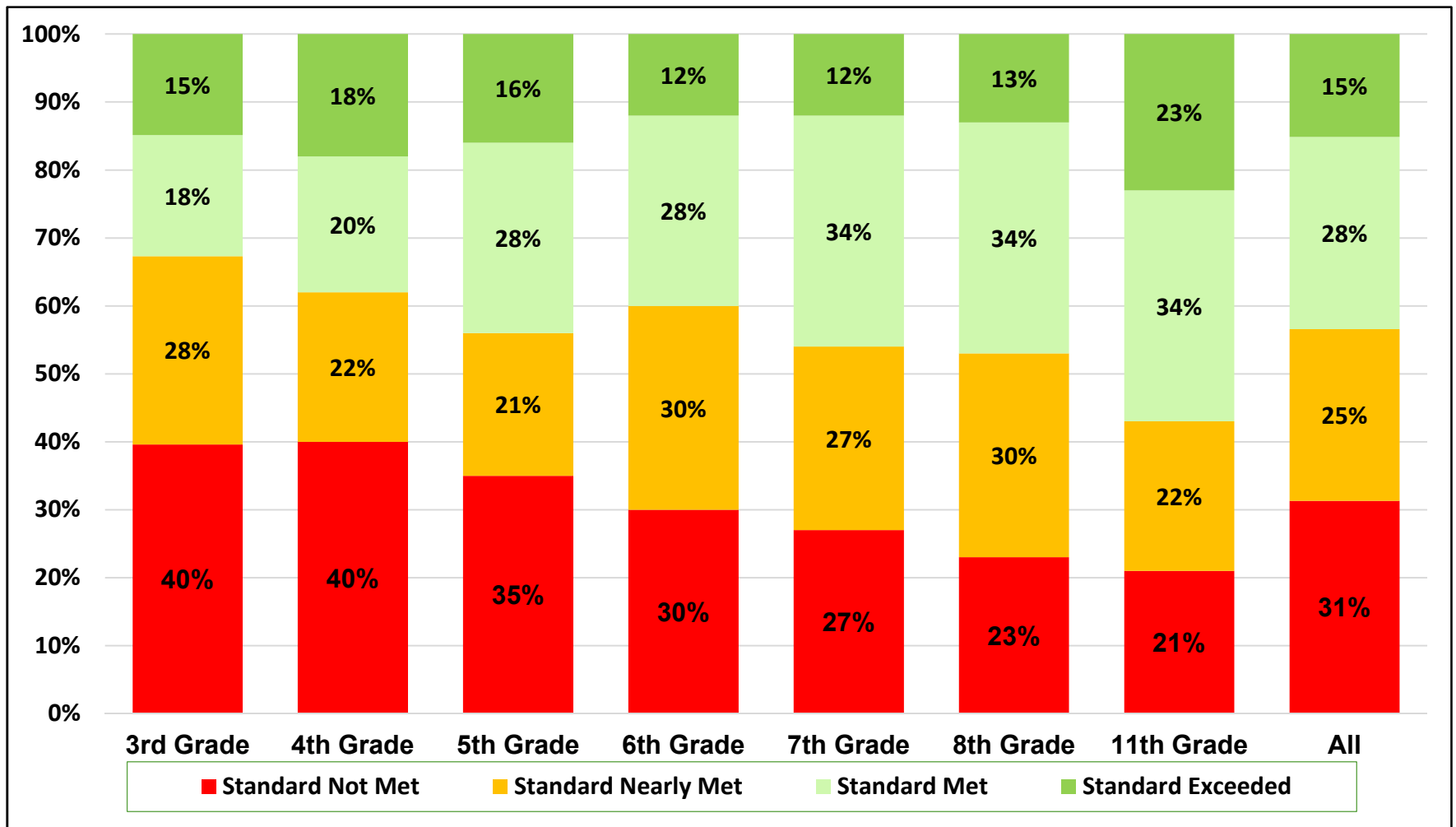

Poverty Rate (%)
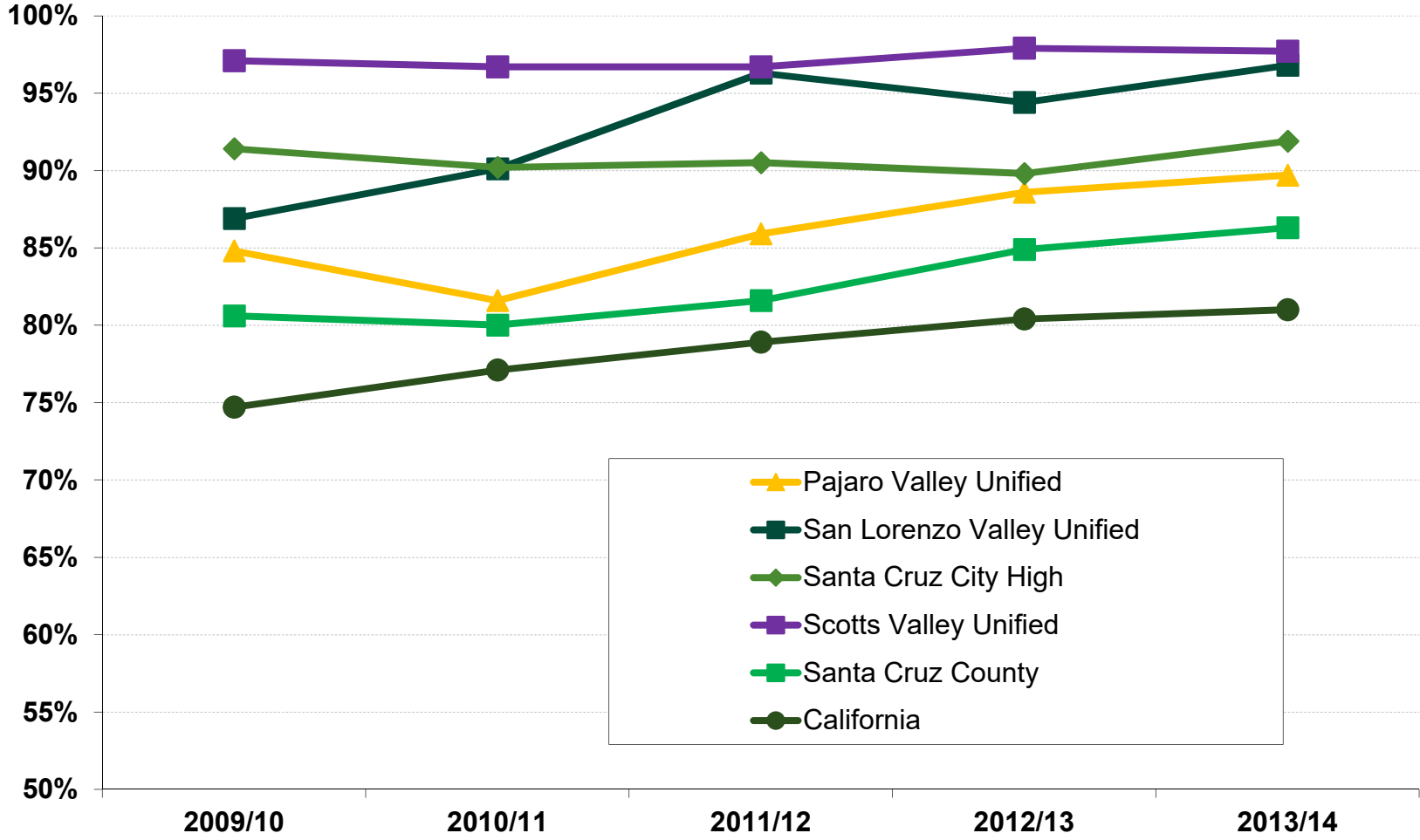
30%

25%

23.8%
23.5%
22.8%
22.0%
22.6%

22.5%
22.6%
22.2%
21.7%

19.9%
20.0%
21.6%
20%
18.0%
18.5%
18.5%
18.9%
19.1%
17.3%
18.2%
19.0%
17.9%
16.9%
16.6%

15%
14.3%

10%

Legend:
- Santa Cruz Co.
- California
- U.S.

5%

0%

2007 2008 2009 2010 2011 2012 2013 2014

Educational Factors

- Percent of Public School 3rd Grade Students Tested Who Score Proficient or Advanced on Reading Test

- Percent High School Students Who Graduate in 4 Years (including GED/special certificate)

- Percent of Children Eligible for Subsidized Preschool Who Are Not Enrolled

English Language Arts/Literacy Achievement Level, Santa Cruz County, 2015

	3rd Grade	4th Grade	5th Grade	6th Grade	7th Grade	8th Grade	11th Grade	All
Standard Exceeded	15%	18%	16%	12%	12%	13%	23%	15%
Standard Met	18%	20%	28%	28%	34%	34%	34%	28%
Standard Nearly Met	28%	22%	21%	30%	27%	30%	22%	25%
Standard Not Met	40%	40%	35%	30%	27%	23%	21%	31%

Legend: Standard Not Met, Standard Nearly Met, Standard Met, Standard Exceeded

High School Graduation Percentage, by School District, Santa Cruz County, 2010-2014

Legend:
- Pajaro Valley Unified
- San Lorenzo Valley Unified
- Santa Cruz City High
- Scotts Valley Unified
- Santa Cruz County
- California

Students Eligible for Subsidized Pre-School, but not Served, by Zip Code, Santa Cruz County, 2015
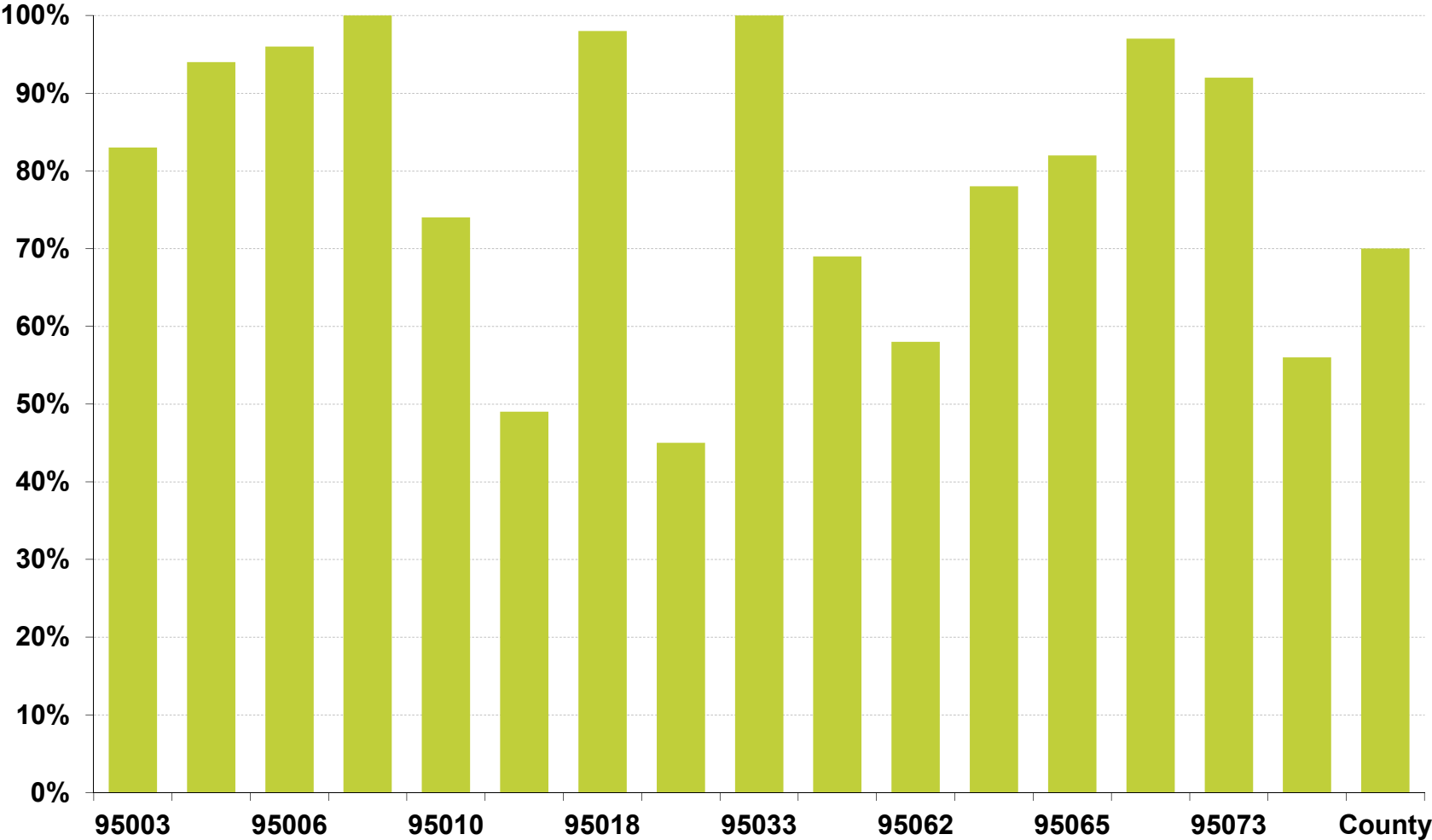
Social Environment Factors

- Number of Homeless

- Number of People Who Receive CalFresh "Food Stamps"

- Percent of People Who Feel that "the People in Your Neighborhood often Help Each Other"

Average Number of People Served Monthly by CalFresh, Santa Cruz County, 2008-2015
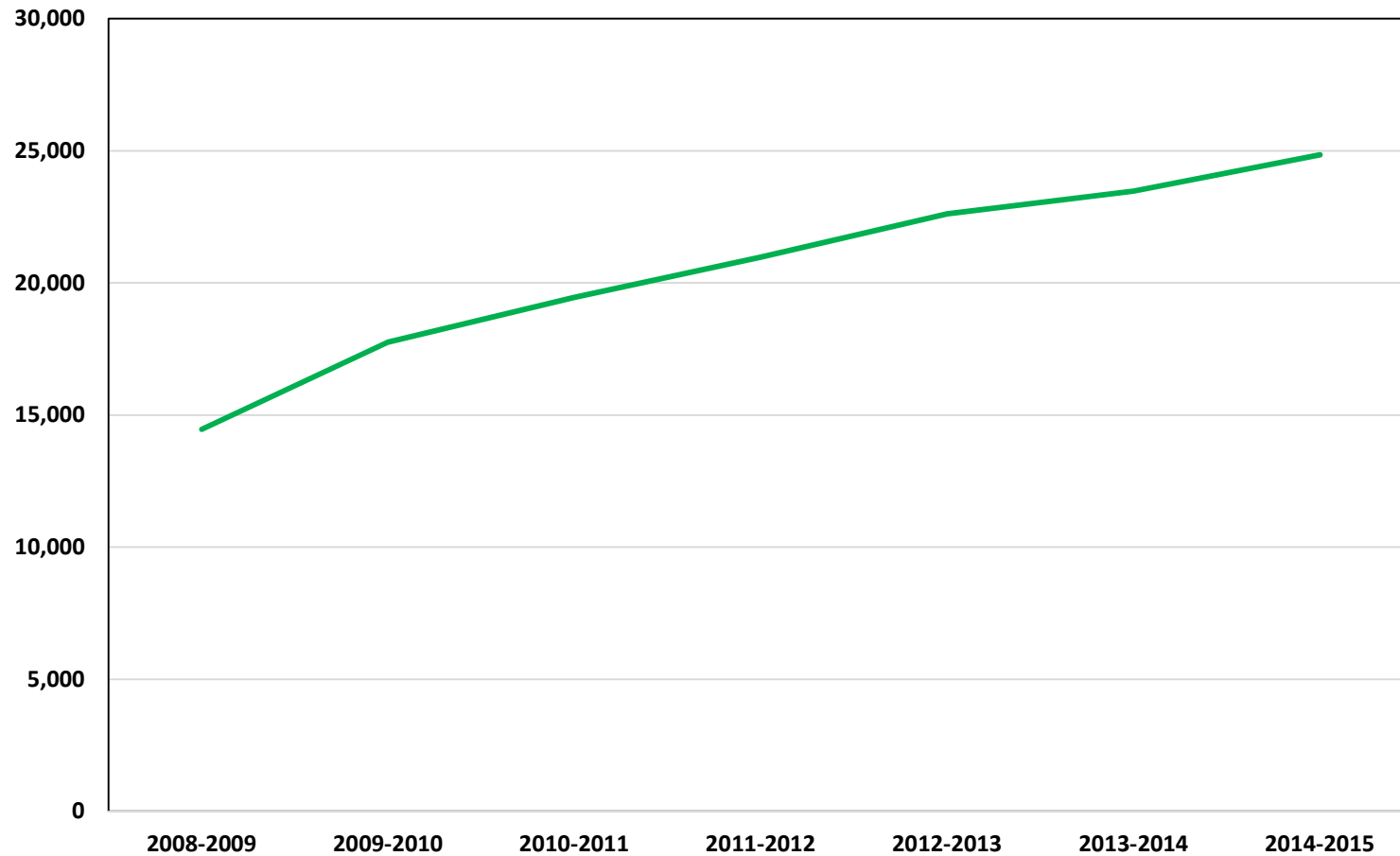
# "Do People In Your Neighborhood Help Each Other Out?" – by Ethnicity, 2015

Legend:
- Strongly Agree
- Agree
- Disagree
- Strongly Disagree

Source: Applied Survey Research. 2015 Santa Cruz County Community Assessment Project, Telephone Survey.

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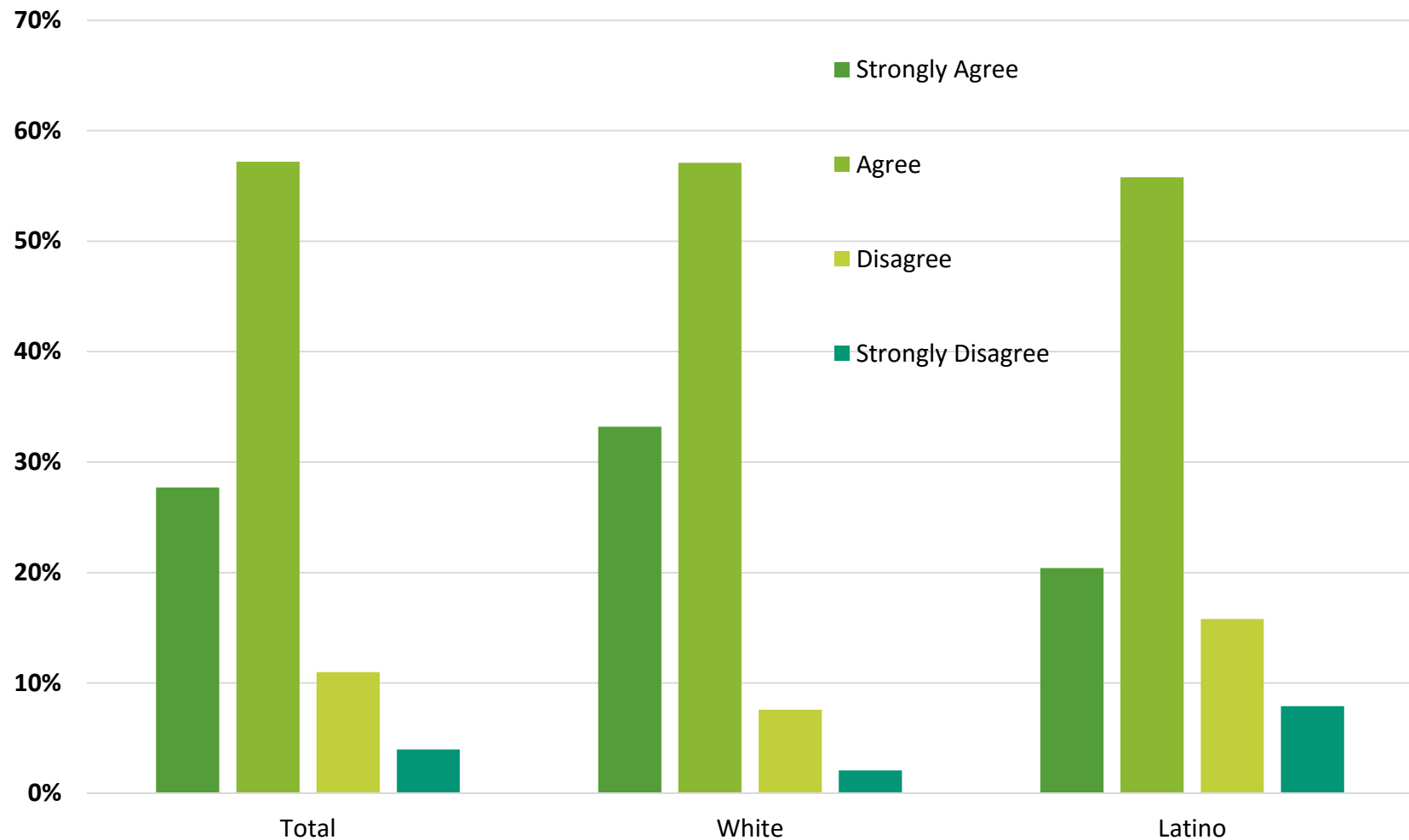
Safety Factors

- Violent Crimes per 100,000 People

- Substantiated Cases of Child Abuse per 1,000 Children under 18

Violent Crimes, Santa Cruz County, 2005 - 2014
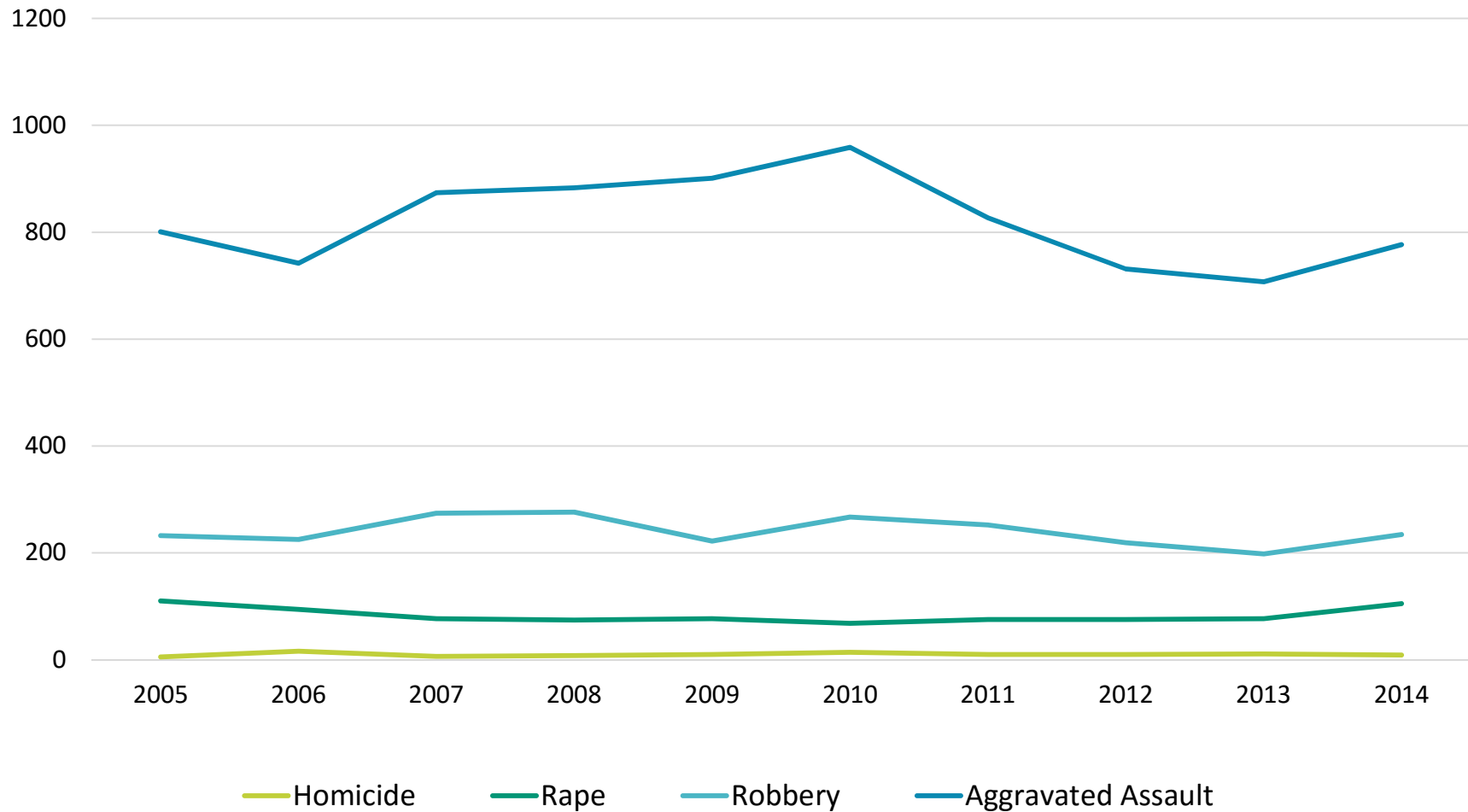
Legend: Homicide — Rape — Robbery — Aggravated Assault

Rate of Substantiated Cases of Child Abuse per 100,000 Children, Ages 0-17, Santa Cruz County and CA, 2008 - 2014
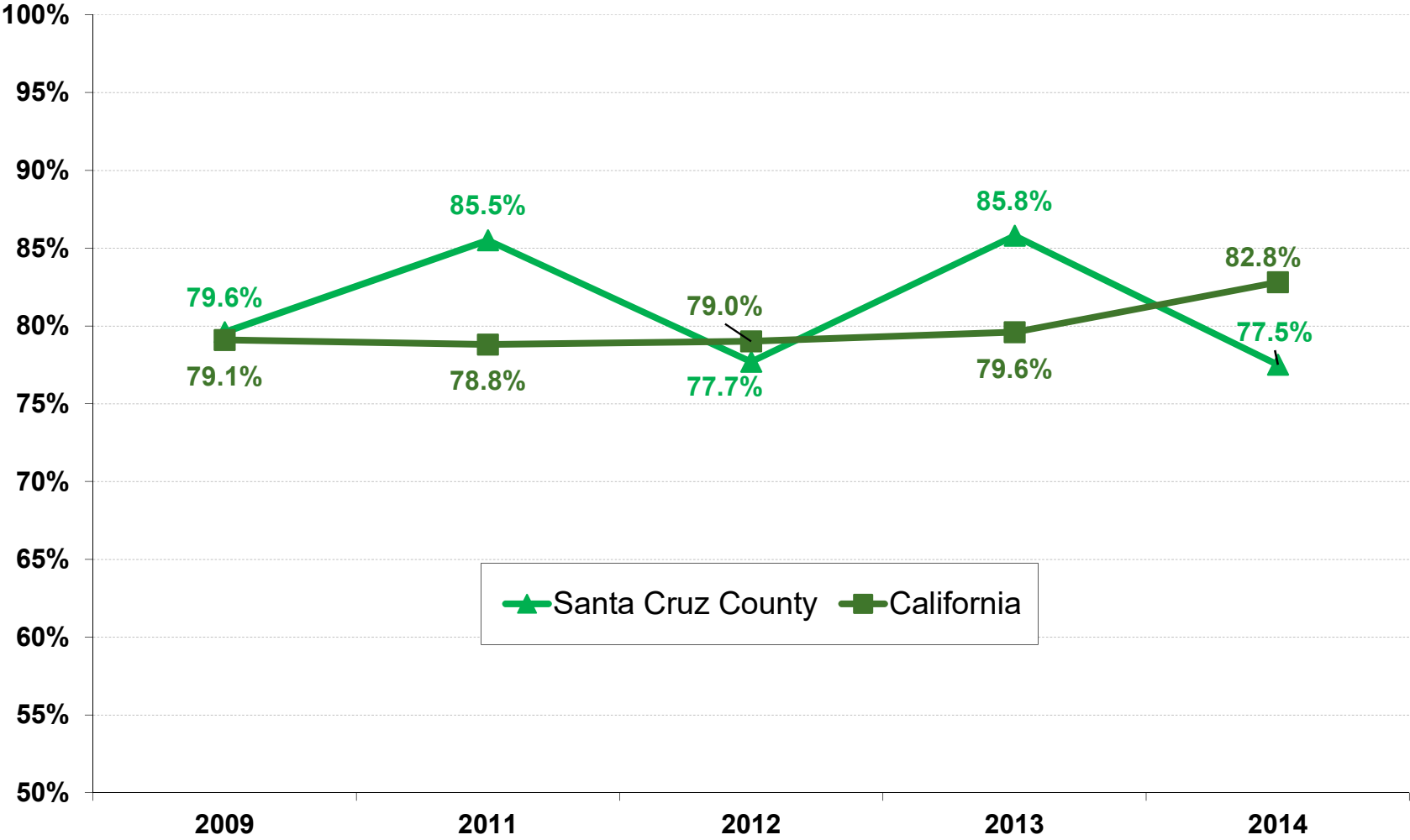
SOURCE: ???
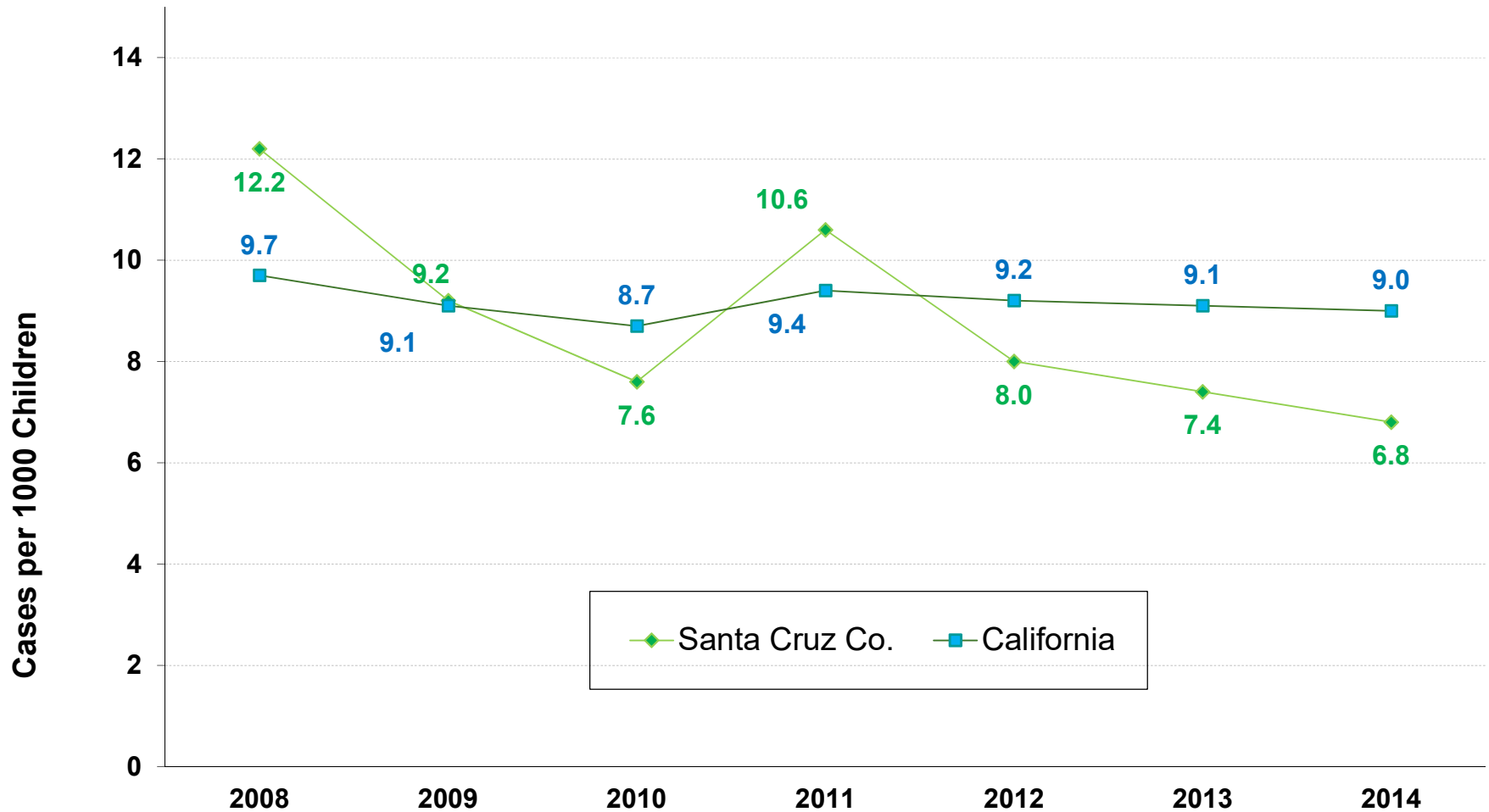
Health Care Access and Quality

- Percent Uninsured (18-64)

- Ratio of Population to Primary Care Physicians

- Percent of Population Who Received Dental Care in Past 12 Months
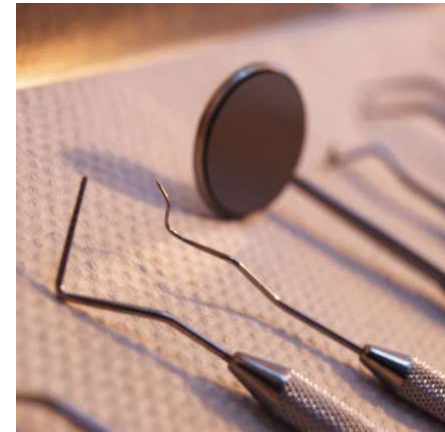
# Percentage of Adults (18-64) Currently Insured, Santa Cruz County, 2010-2014

Line chart showing percentage of adults (18-64) currently insured for Santa Cruz County and California from 2009 to 2014.

Santa Cruz County: 2009: 79.6%, 2011: 85.5%, 2012: 77.7%, 2013: 85.8%, 2014: 77.5%

California: 2009: 79.1%, 2011: 78.8%, 2012: 79.0%, 2013: 79.6%, 2014: 82.8%

Primary Care Provider Ratio (PCPs per 100,000 Population), Santa Cruz County and California, 2010-2013
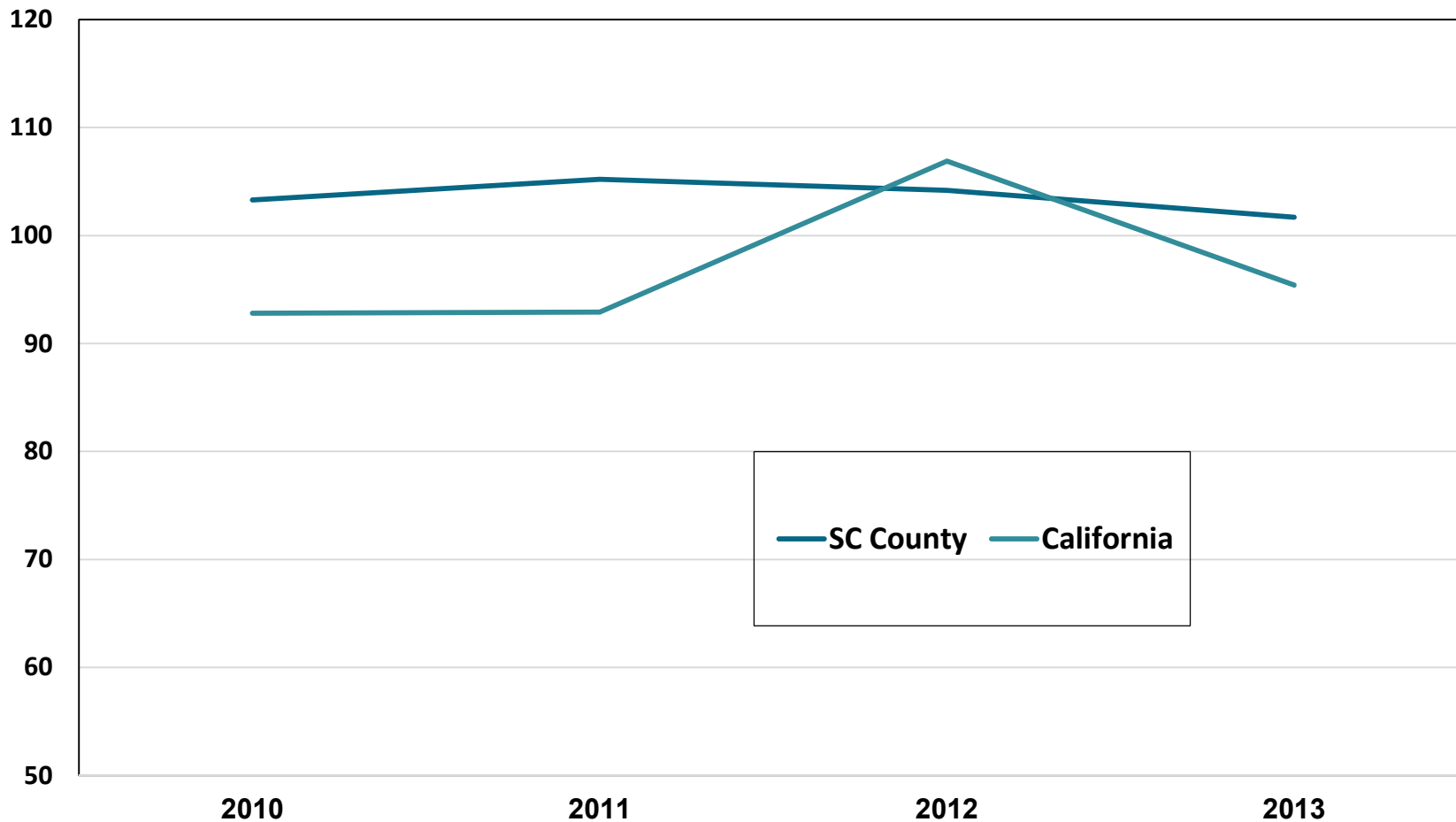
Percentage Receiving Dental Care in Last 12 Months, Santa Cruz County, 2013 & 2015

Source: Santa Cruz County Community Assessment Project, Telephone Survey
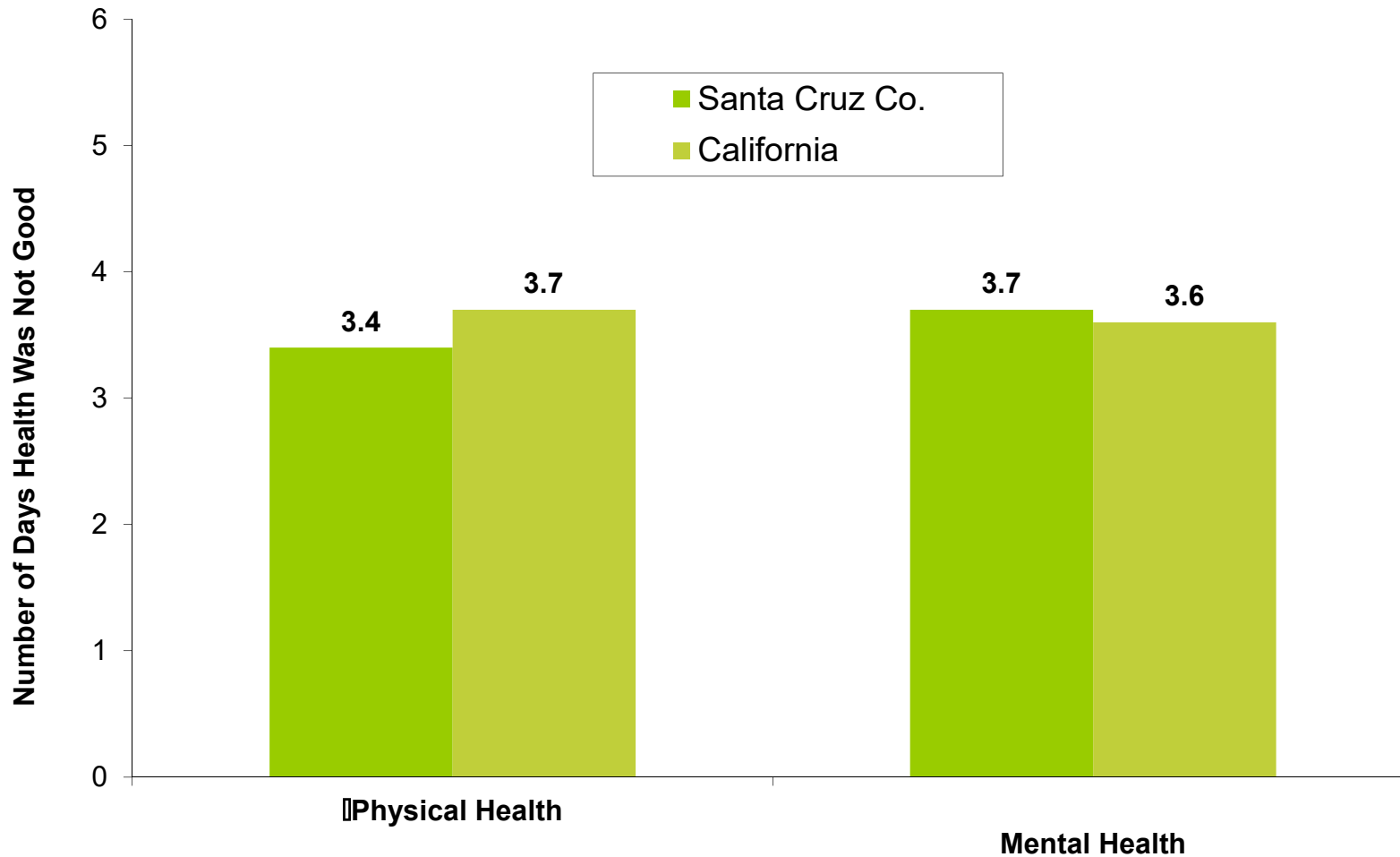
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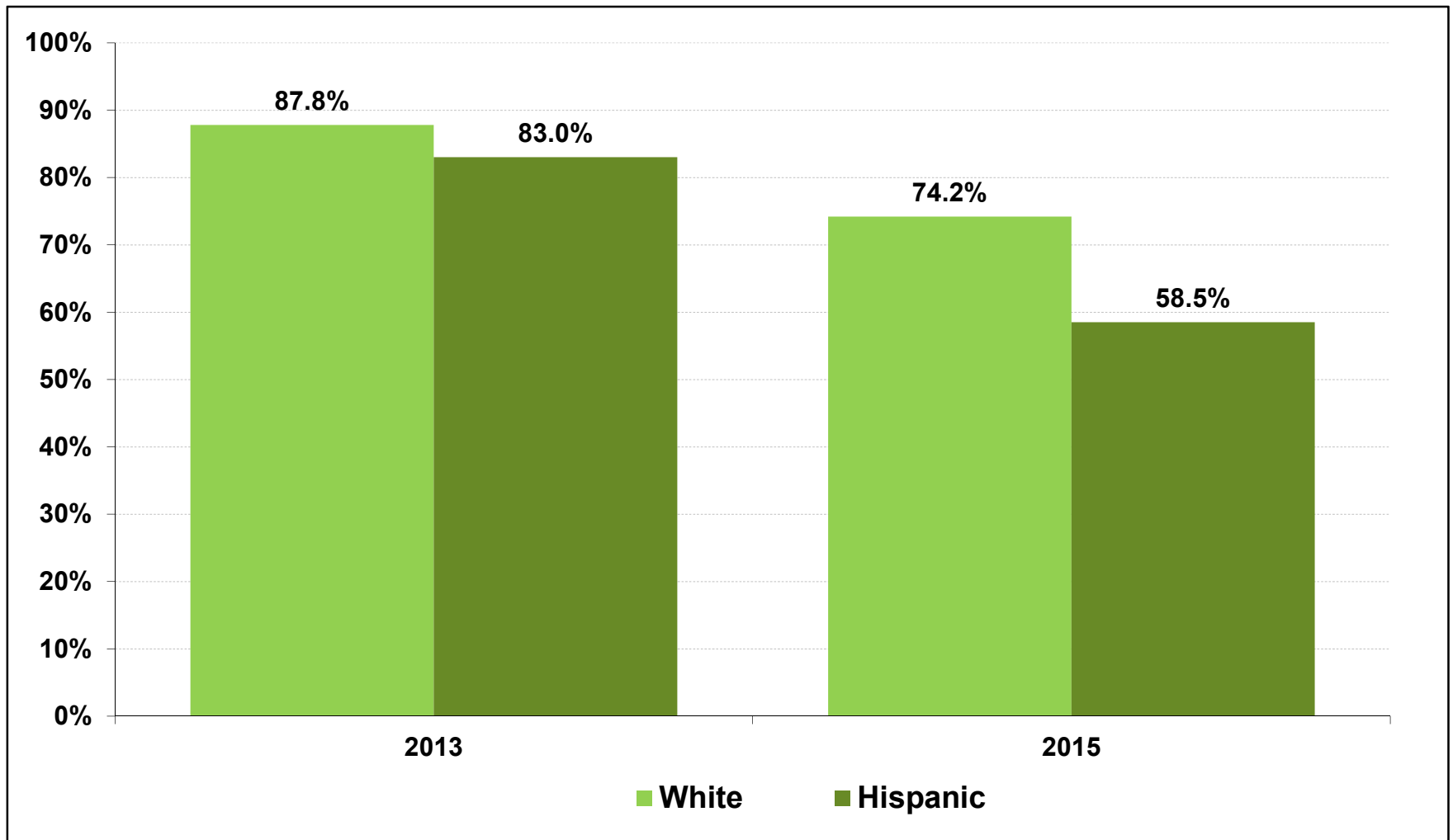
Quality of Life

- Percent Who Report Health Is Excellent, Very Good, or Good

- Average Number of Days during Past 30 Days when Mental Health Was "Not Good"

Percentage of Adults (18+) Reporting "Good," "Very Good," or "Excellent" General Health Status, Santa Cruz County and California, 2003-2011/12

SOURCE: CHIS, restricted to 18+
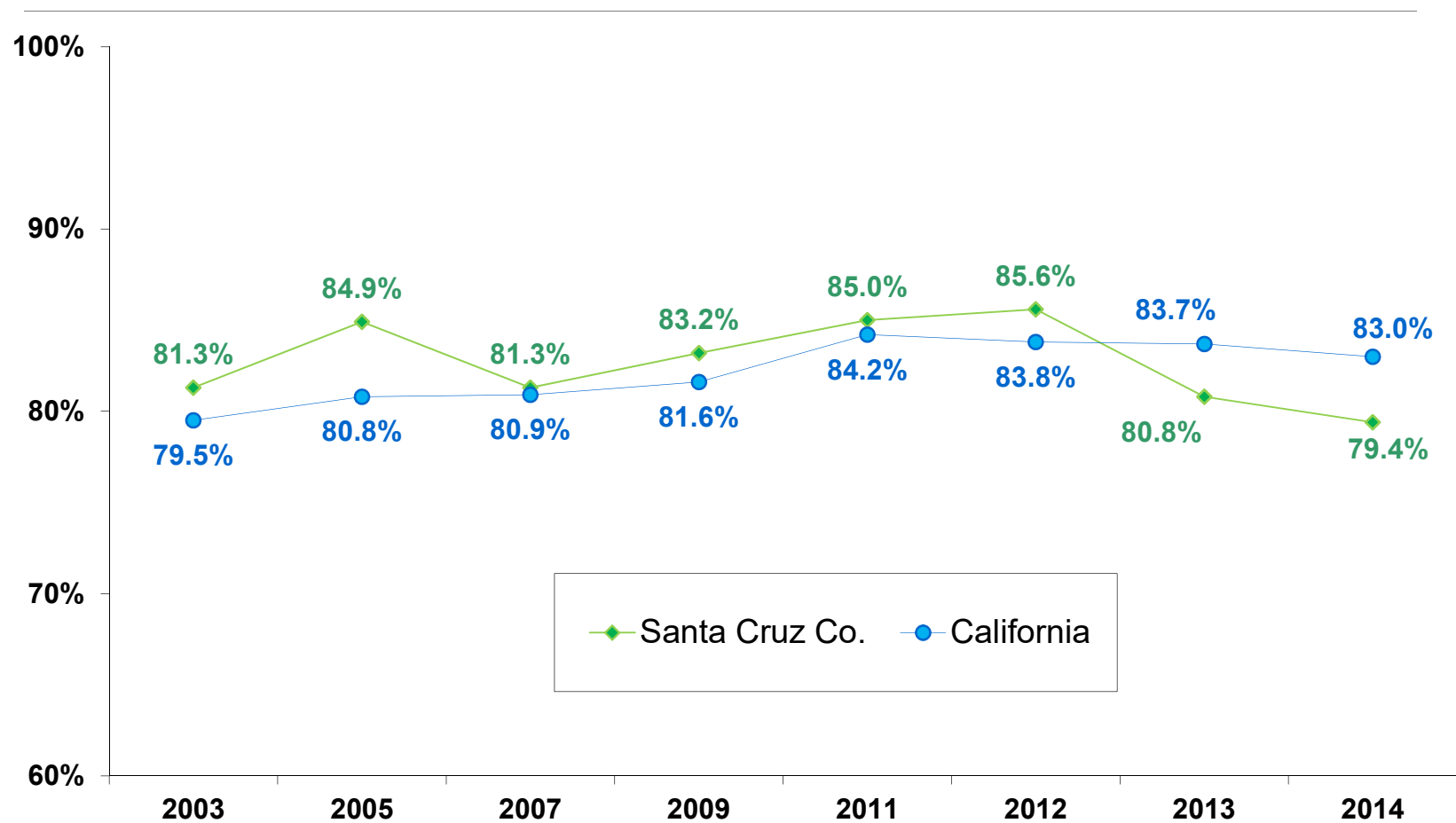
Average Number of Days When Physical or Mental Health Was "Not Good" During Past 30 Days, Santa Cruz County and California, 2006-2012

Source: National Center for Health Statistics, Health Indicators Warehouse. Accessed May 12, 2015.
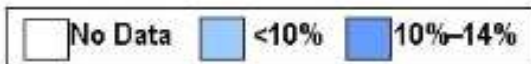
Behavioral Risk Factors

- Percent of Overweight or Obese Adults
- Percent of 11th Graders Who Report Cigarette Smoking in Last Month

Obesity Trends Among U.S. Adults

Obesity Trends* Among U.S. Adults
BRFSS, 1990
(*BMI ≥30, or ~ 30 lbs. overweight for 5' 4" person)
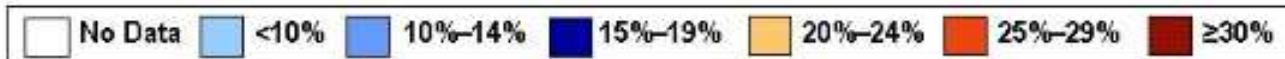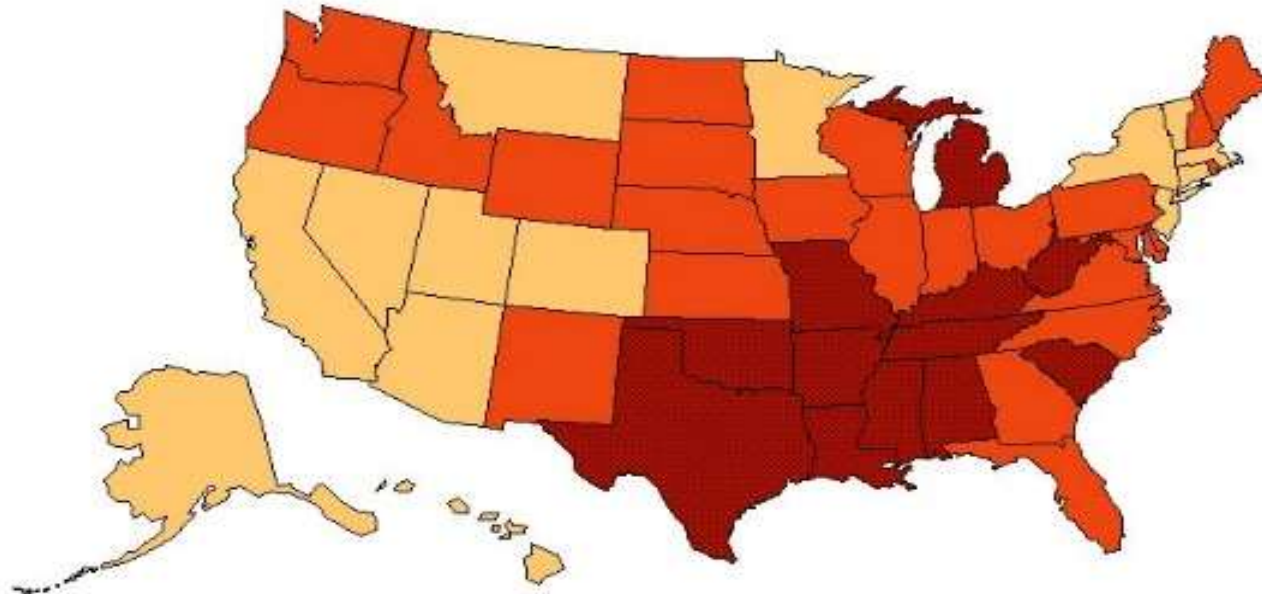
No Data   <10%   10%–14%

Source: Behavioral Risk Factor Surveillance System, CDC.

CDC

Obesity Trends Among U.S. Adults

Obesity Trends* Among U.S. Adults
BRFSS, 2010
(*BMI ≥30, or ~ 30 lbs. overweight for 5' 4" person)

Legend: No Data | <10% | 10%–14% | 15%–19% | 20%–24% | 25%–29% | ≥30%
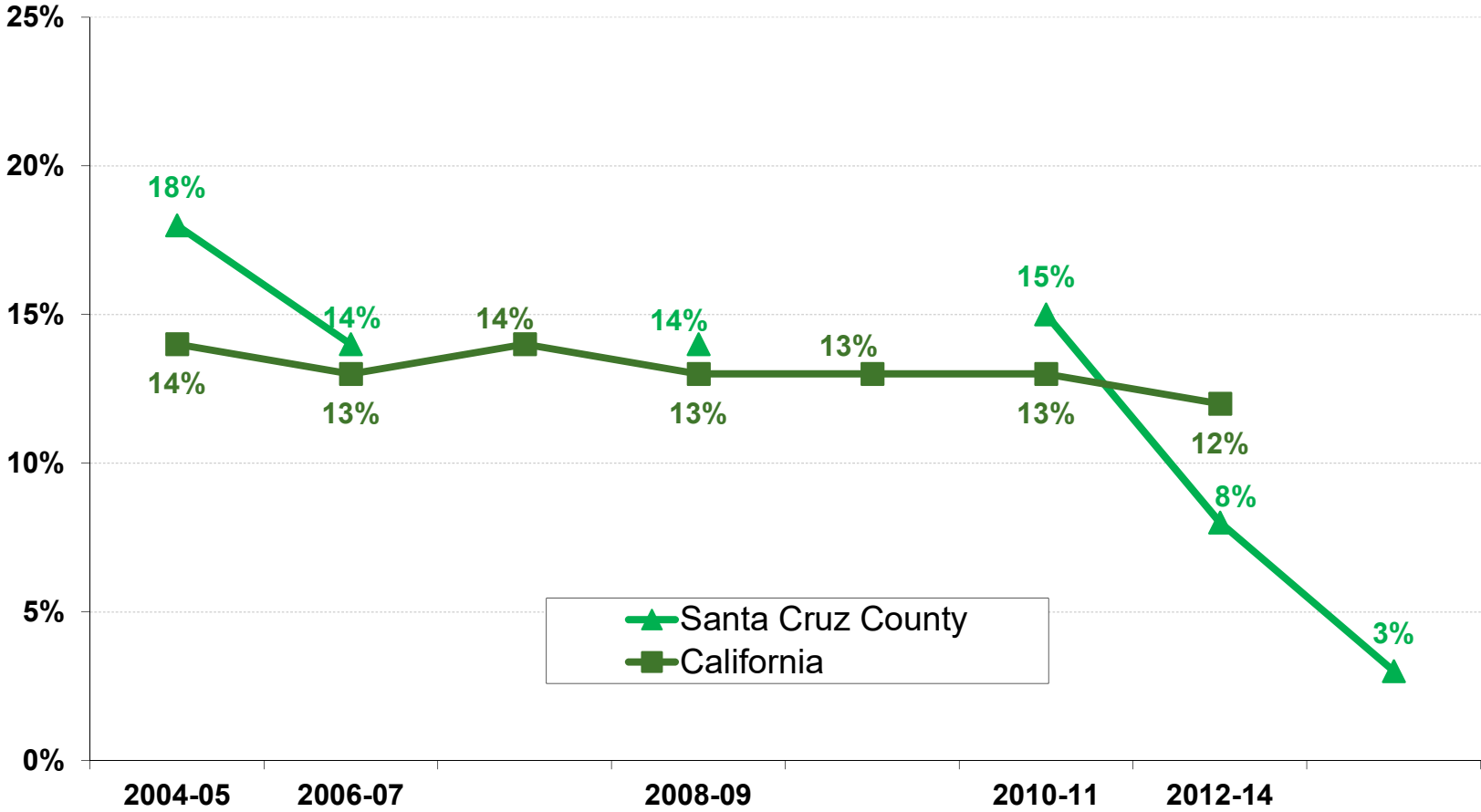
Source: Behavioral Risk Factor Surveillance System, CDC.

Overweight and Obesity Trends Among Adults, CA and U.S. 1990-2013

Legend:
- Overweight (CA)
- Overweight (US)
- Obesity (CA)
- Obesity (US)

SOURCE: ???
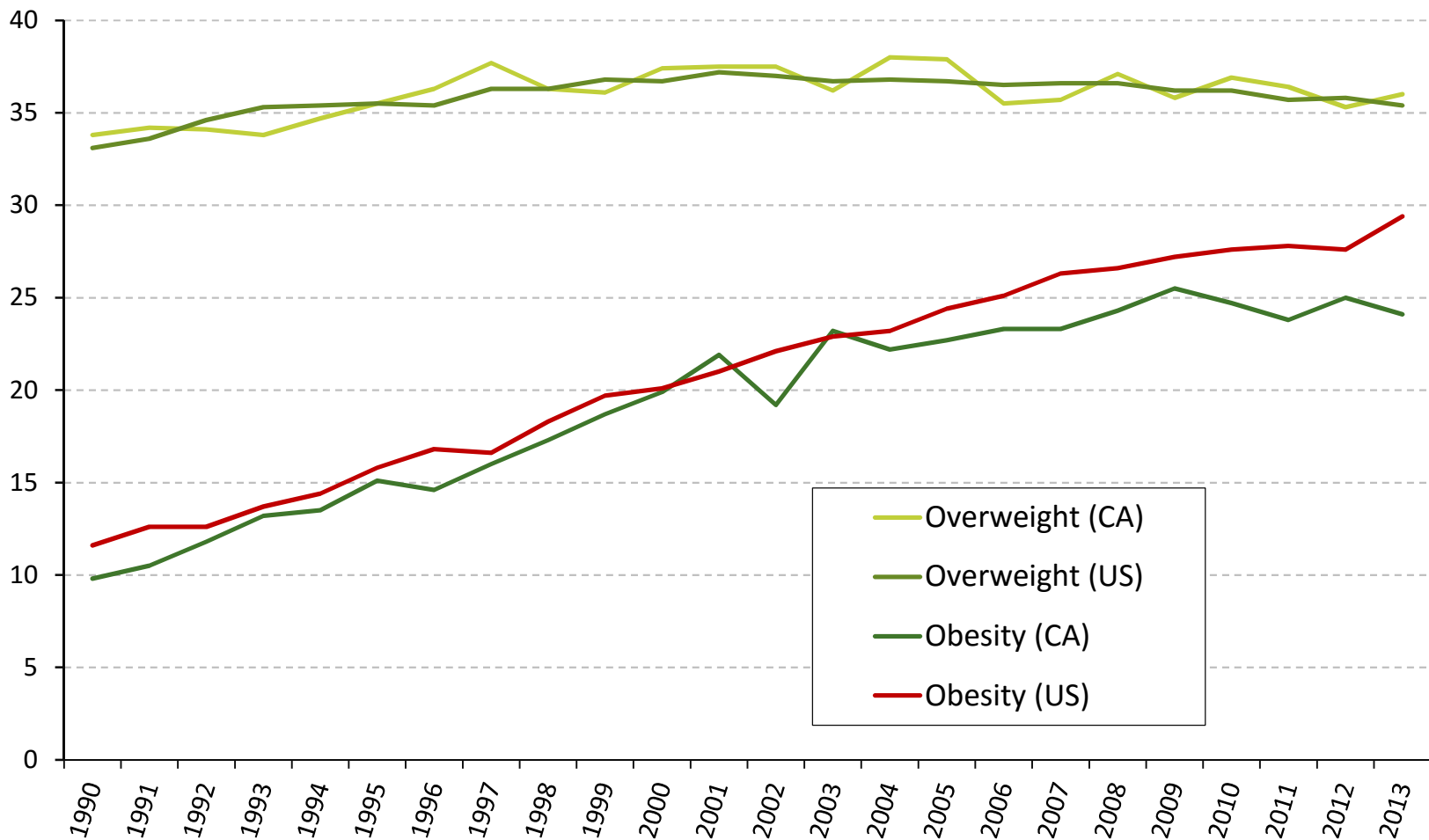
Percentage of 11th Grade Students Who Smoked Within the Last Month, Santa Cruz County, 2010-2014
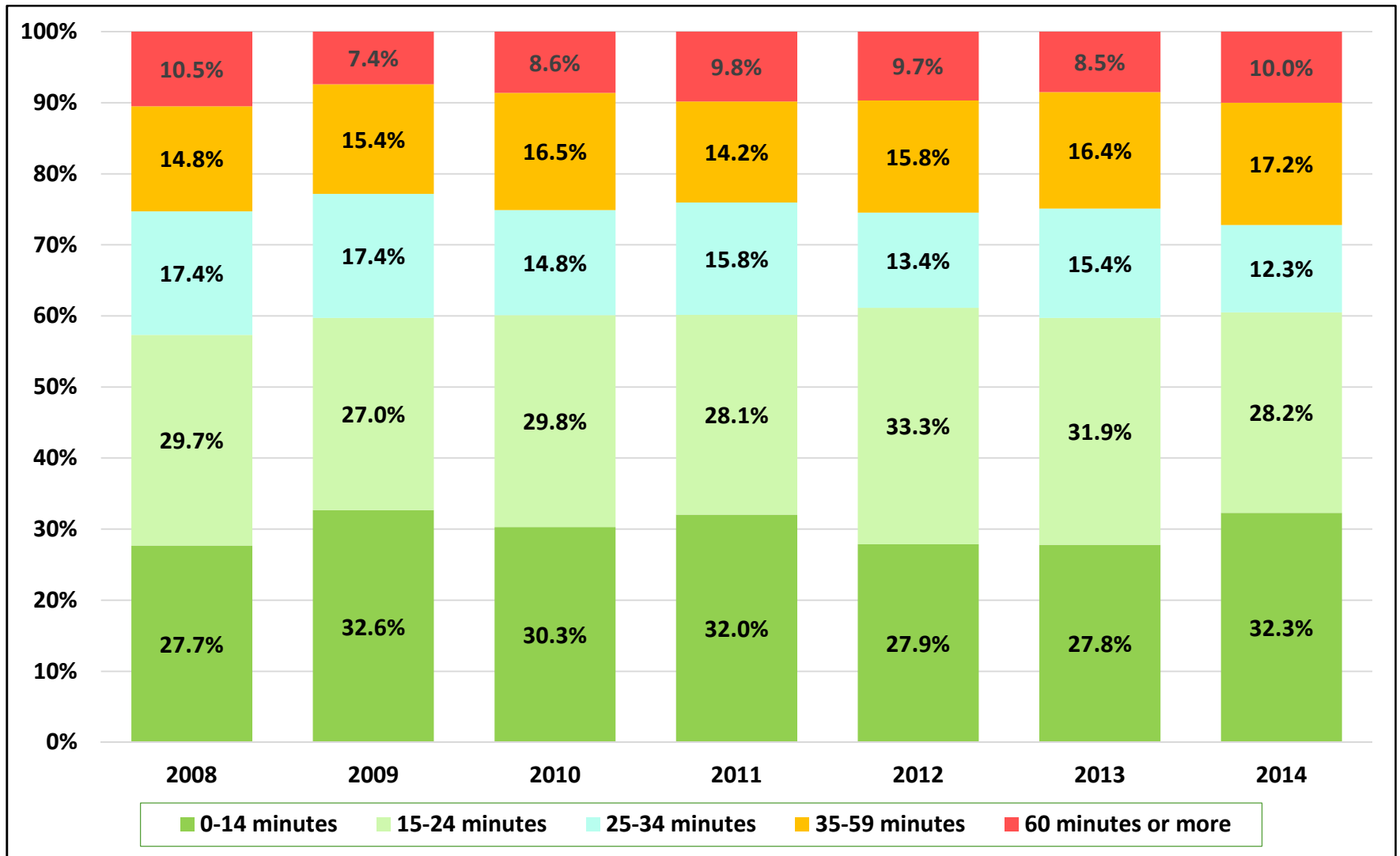

School years shown are for Santa Cruz County; time periods for California overlap, but match only approximately.

Environmental Health Factors

- Percent of Air Quality Complaints
- Average Commute Time to Work

Commute Time to Work, Santa Cruz County, 2008-2014

	2008	2009	2010	2011	2012	2013	2014
60 minutes or more	10.5%	7.4%	8.6%	9.8%	9.7%	8.5%	10.0%
35-59 minutes	14.8%	15.4%	16.5%	14.2%	15.8%	16.4%	17.2%
25-34 minutes	17.4%	17.4%	14.8%	15.8%	13.4%	15.4%	12.3%
15-24 minutes	29.7%	27.0%	29.8%	28.1%	33.3%	31.9%	28.2%
0-14 minutes	27.7%	32.6%	30.3%	32.0%	27.9%	27.8%	32.3%

Legend: 0-14 minutes, 15-24 minutes, 25-34 minutes, 35-59 minutes, 60 minutes or more

Social and Mental Health Factors

- Age-adjusted Suicide Rate

- Percent Who Think It Is Acceptable for Adults to Provide Alcohol to Persons under 21, Other than Own Children, in Their Home

Suicides per 100,000 Residents, Santa Cruz County, California, and U.S., 1995-2014
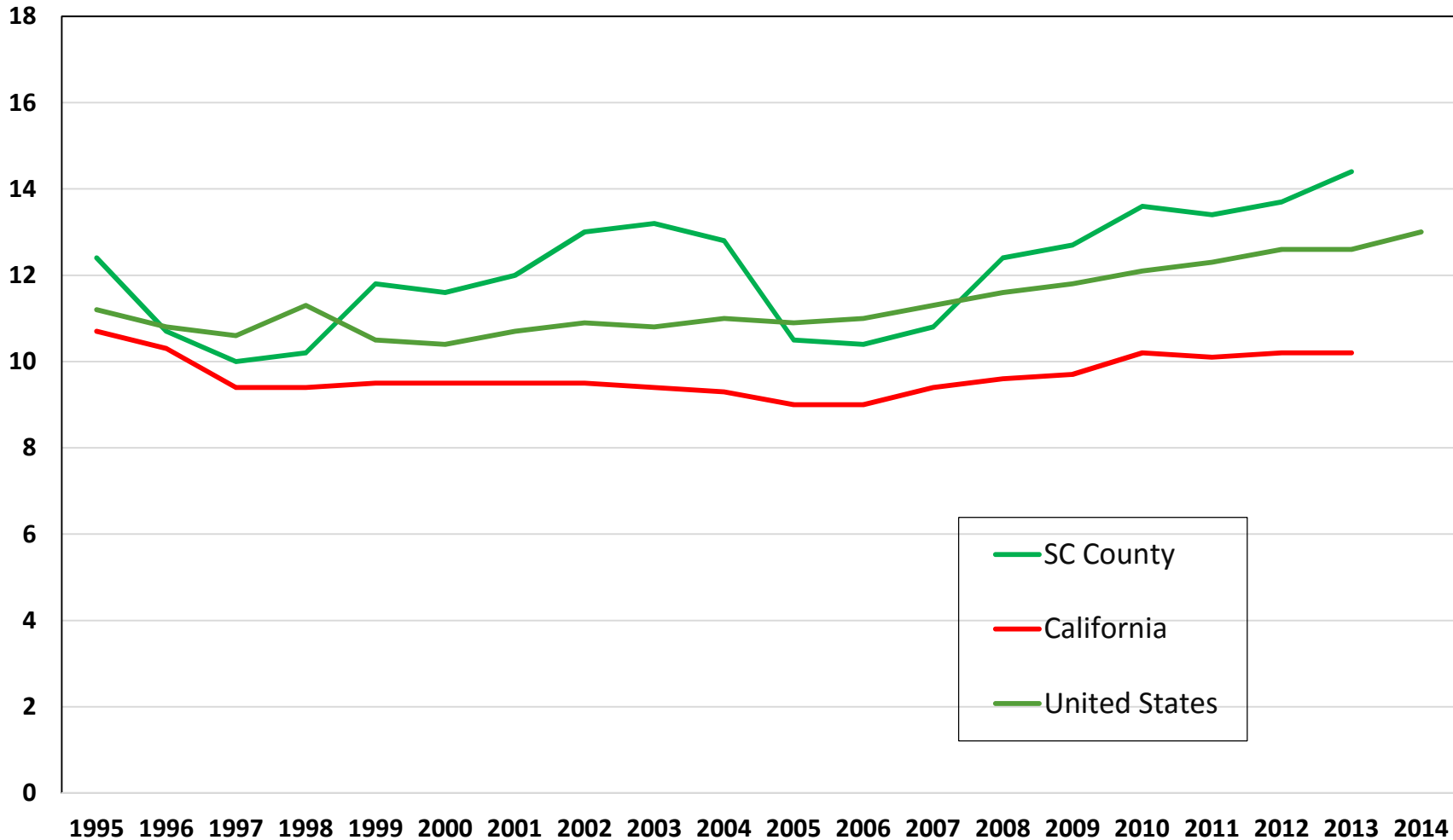
Maternal and Child Health Factors

- Percent of Births for which Mother Received Prenatal Care in First Trimester

- Percent of Mothers Who Exclusively Breastfeed at Birth

- Percent of Child Care Center and Kindergarten Entrants Who Receive All Immunizations

Percent Early Prenatal Care, CA Compared to Santa Cruz County, 1994 - 2013

Legend: California — Santa Cruz County
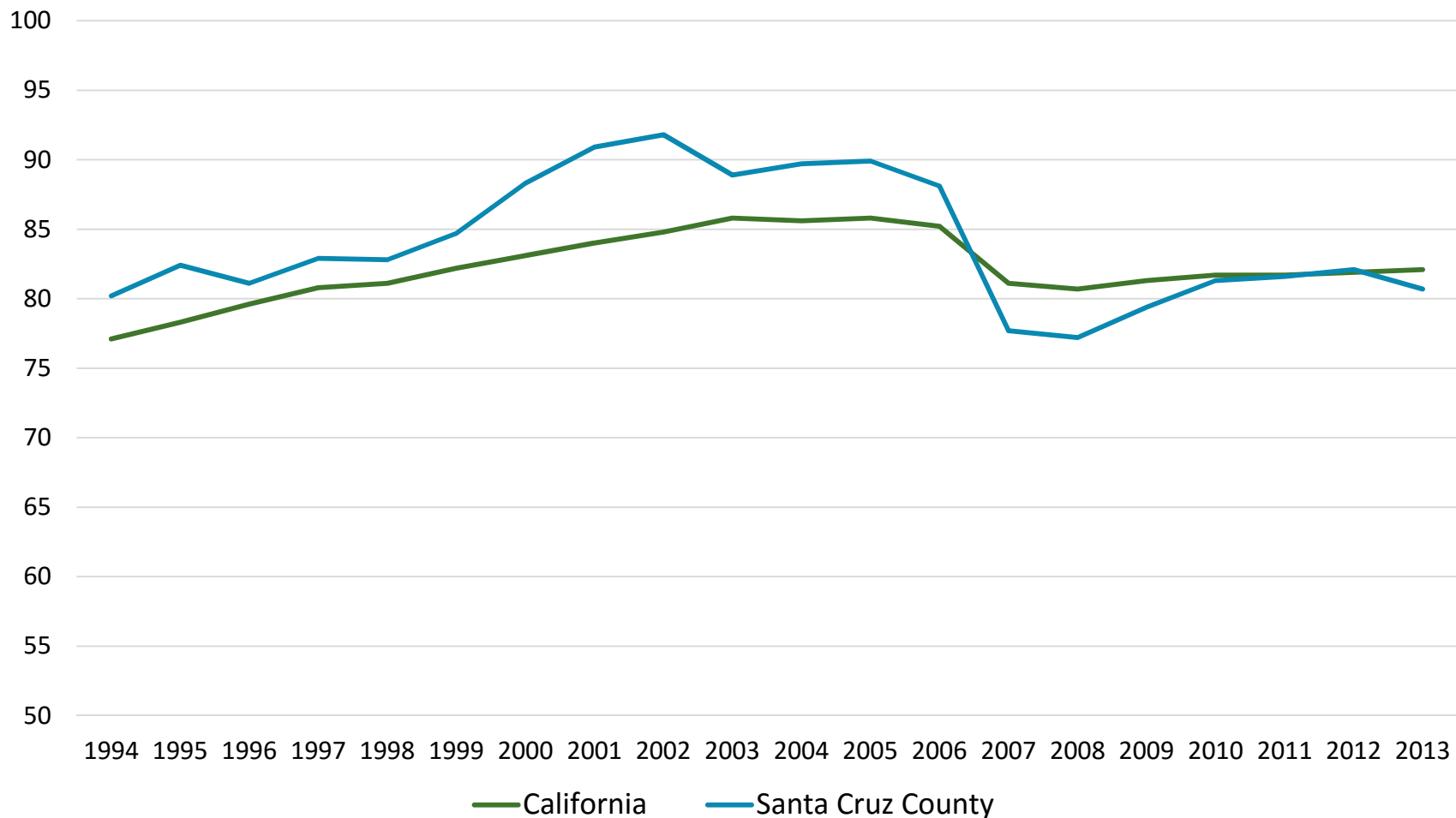
Percent Early Prenatal Care, White Compared to Latina Mothers, Santa Cruz County, 1994 - 2013

Percentage of Mothers Exclusively Breastfeeding at Birth, by Infant Ethnicity, Santa Cruz County and California, 2013
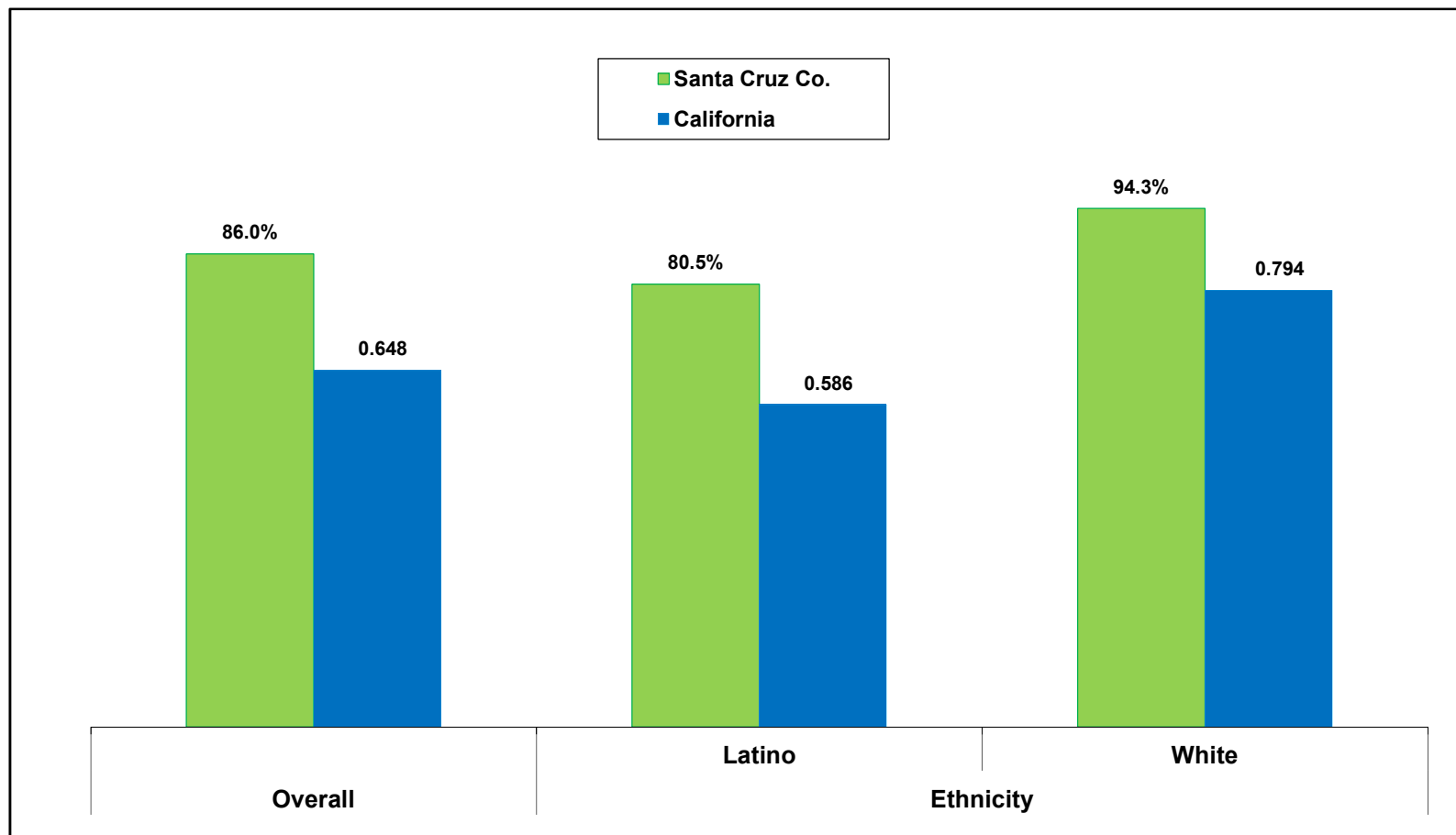
Legend:
- ■ Santa Cruz Co.
- ■ California

Overall: 86.0% / 0.648
Latino: 80.5% / 0.586
White: 94.3% / 0.794

Ethnicity

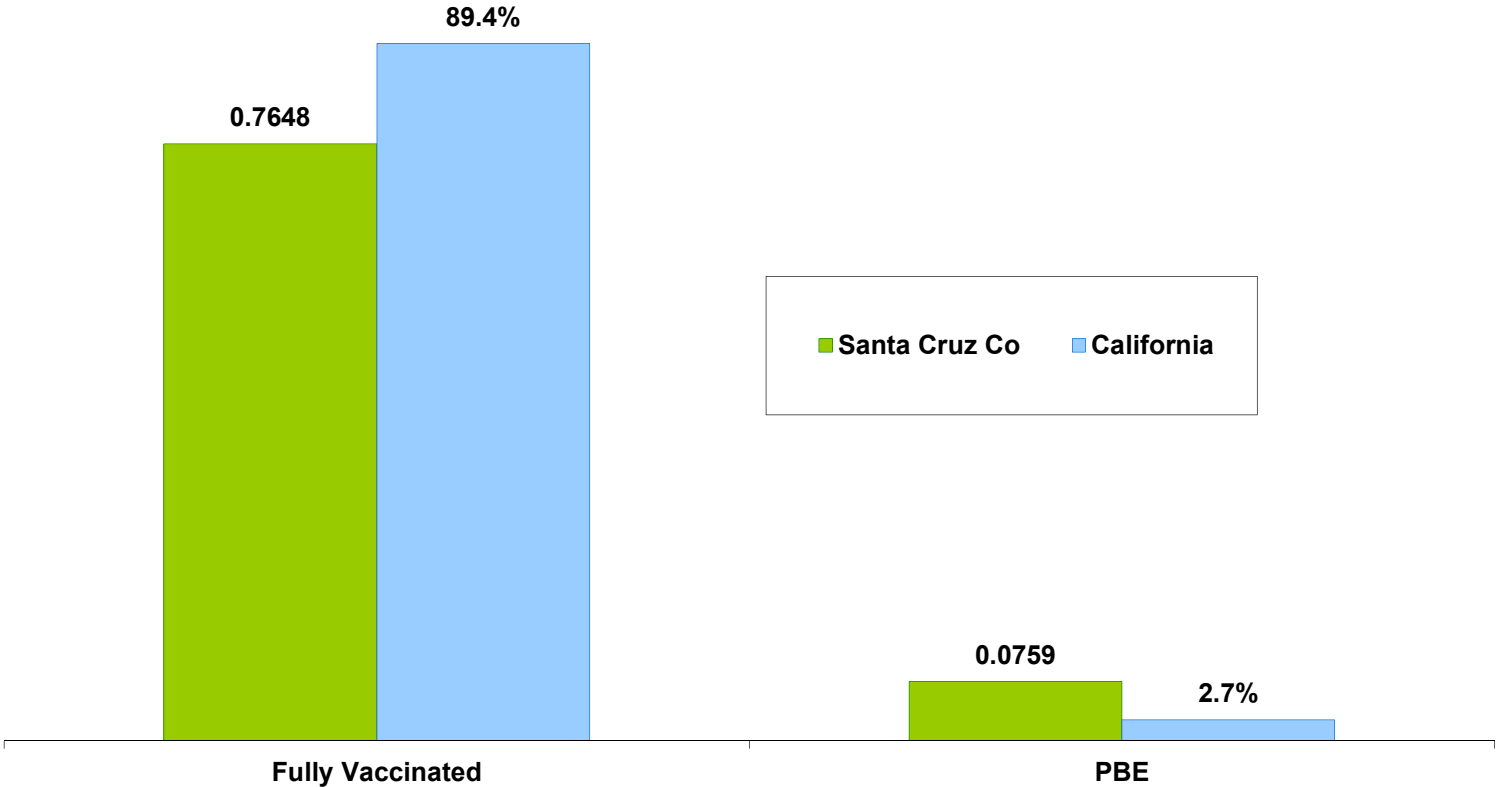# Percentage of Mothers Exclusively Breastfeeding at Birth, by Infant Ethnicity, Santa Cruz County, 2010-2013
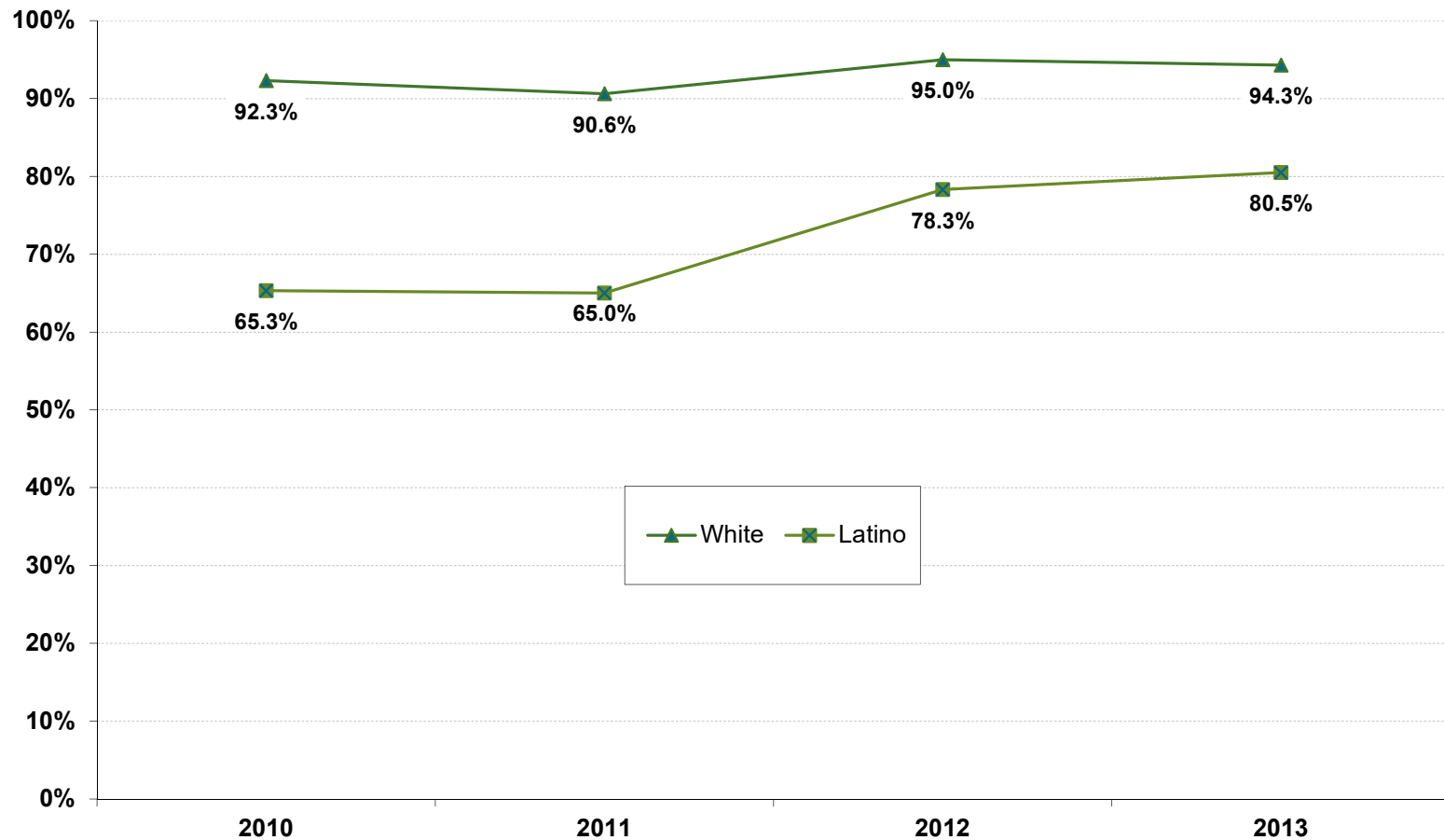
Percentage of Child Care Attendees Fully Vaccinated or With Personal Belief Exemptions (PBE), Santa Cruz County and California, 2014-15

Fully Vaccinated: Santa Cruz Co 0.7648, California 89.4%

PBE: Santa Cruz Co 0.0759, California 2.7%

Legend: ■ Santa Cruz Co ■ California

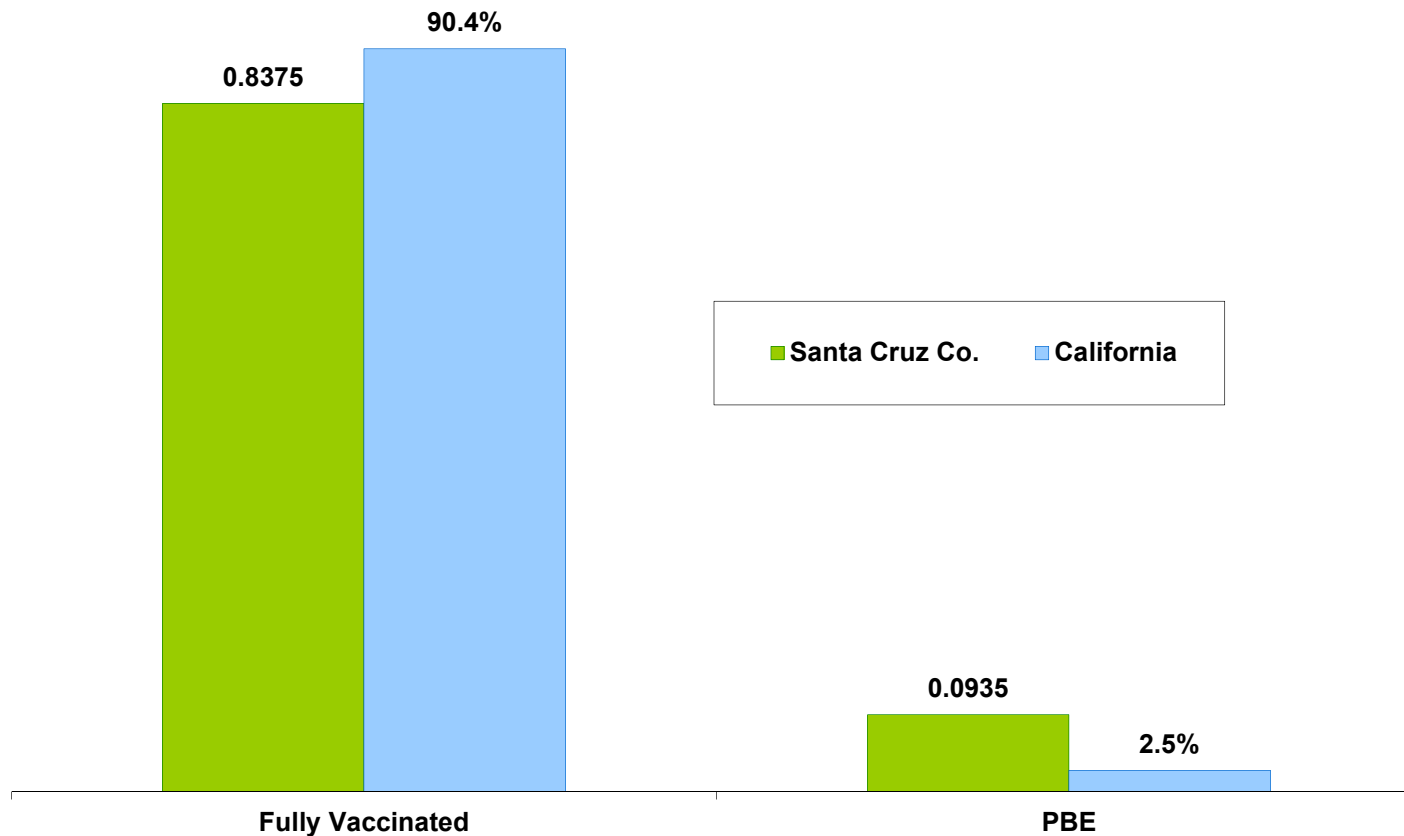# Percentage of Kindergartners Fully Vaccinated or With Personal Belief Exemptions (PBE), Santa Cruz County and California, 2014-15

Legend: ■ Santa Cruz Co. ■ California

Fully Vaccinated: 0.8375 (Santa Cruz Co.), 90.4% (California)

PBE: 0.0935 (Santa Cruz Co.), 2.5% (California)

Death, Illness, and Injury

- Leading Causes of Death

Age-Adjusted Rates of Death per 100,000 Population by Cause, 2012 - 2014
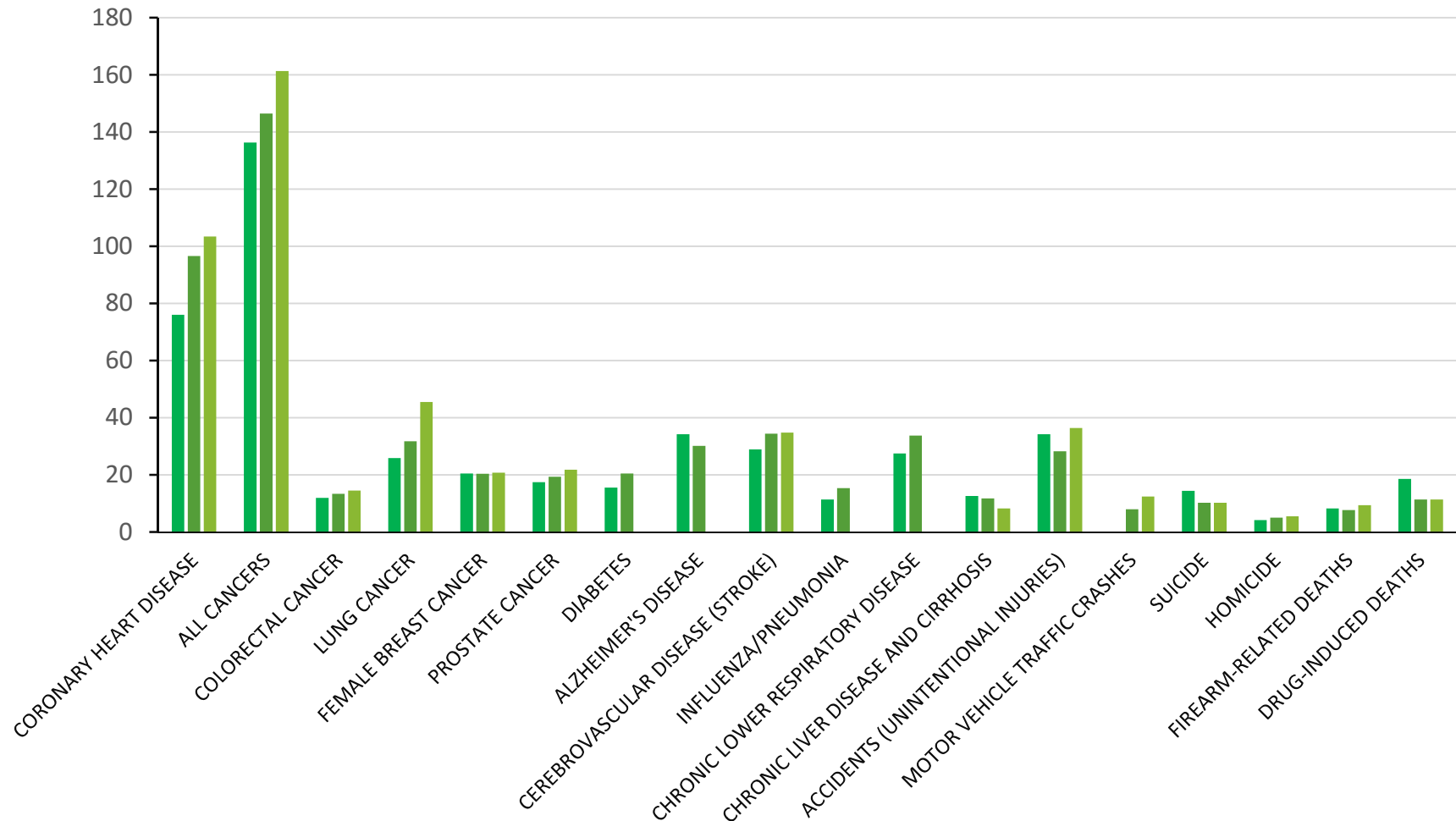
Infectious Disease

- Rates of Chlamydia, Gonorrhea, and Syphilis

- Rates of Measles, Pertussis, and Other Vaccine Preventable Diseases
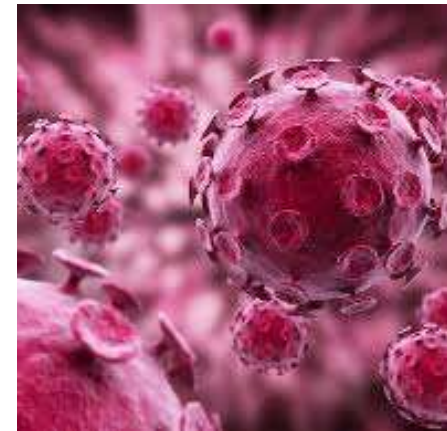
Average Annual Numbers of Selected Reportable STIs, Santa Cruz County, 2011-12 and 2013-14
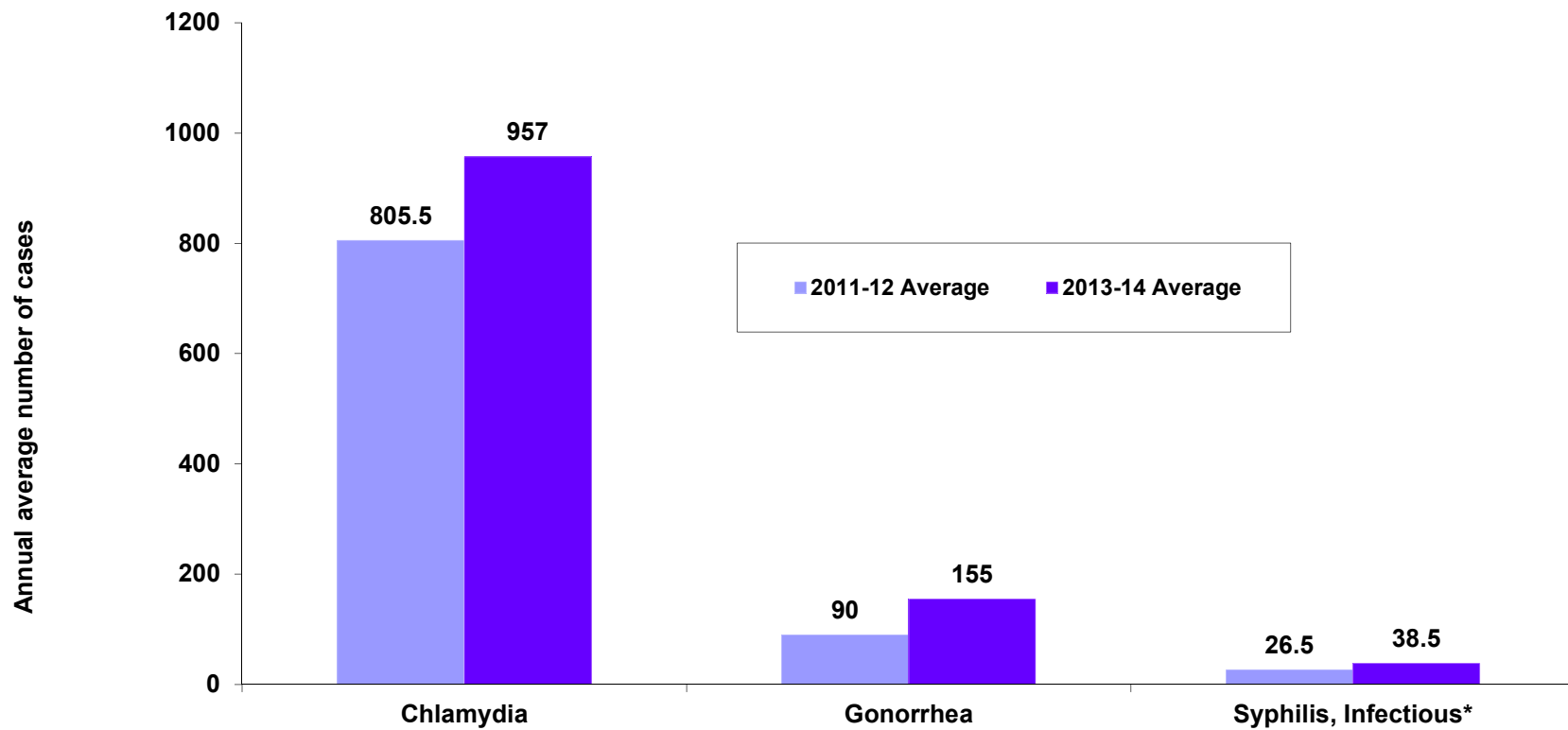
* Infectious syphilis includes primary, secondary, and early latent stages.

Infectious Syphilis Rates by Year of Diagnosis, United States (2007-2013), California, and Santa Cruz County, 2007-2014
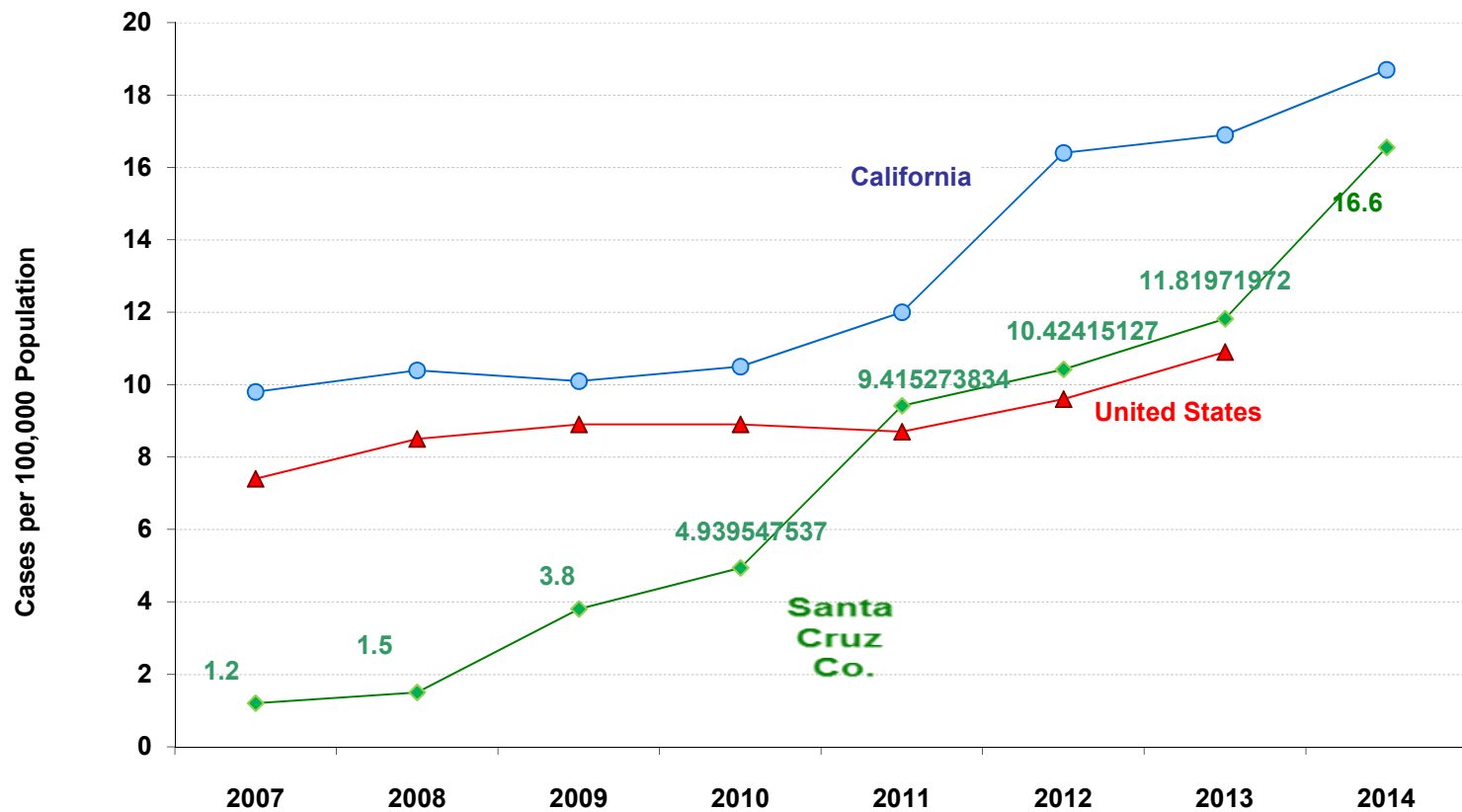
60

Pertussis Incidence Rates per 100,000 Population, Santa Cruz County and California, 2010-2014

Rate per 100,000 population

Legend: Santa Cruz Co. ■ California

Year	Santa Cruz Co.	California
2010	33.1	24.5
2011	8.3	8.0
2012	4.8	2.7
2013	19.9	6.6
2014	60.8	29.2
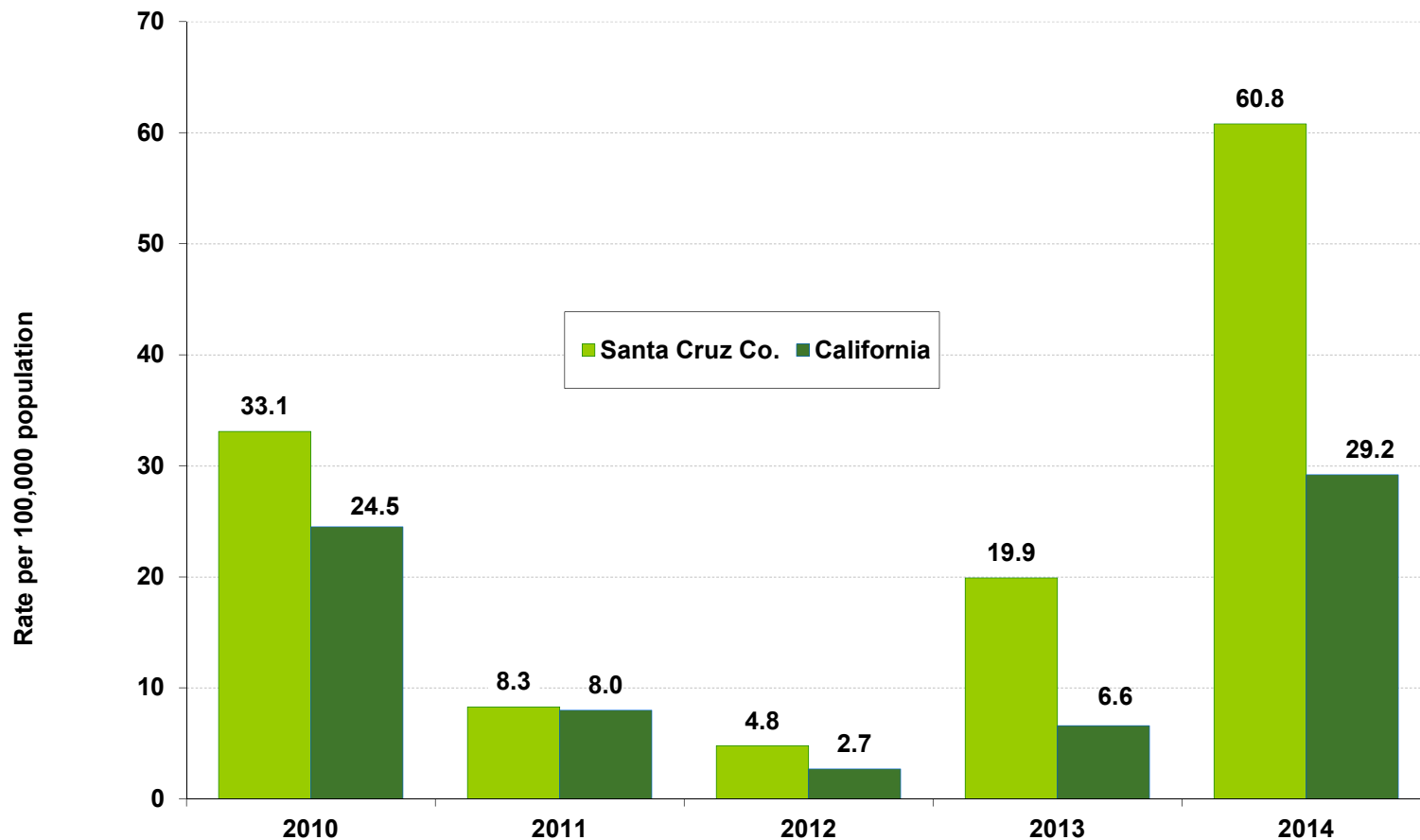
Identifying Areas for Improvement

Next Step: Create a Community Health Improvement Plan

Community Health Improvement Planning

As Is

CHIP

To Be (vision)

The CHA describes the current status of the community's health

The Community Health Improvement Plan (CHIP) is the roadmap that directs the partners toward its vision

From the Redwoods through the Valleys to the Sea: Embracing Communities, Enhancing Wellbeing
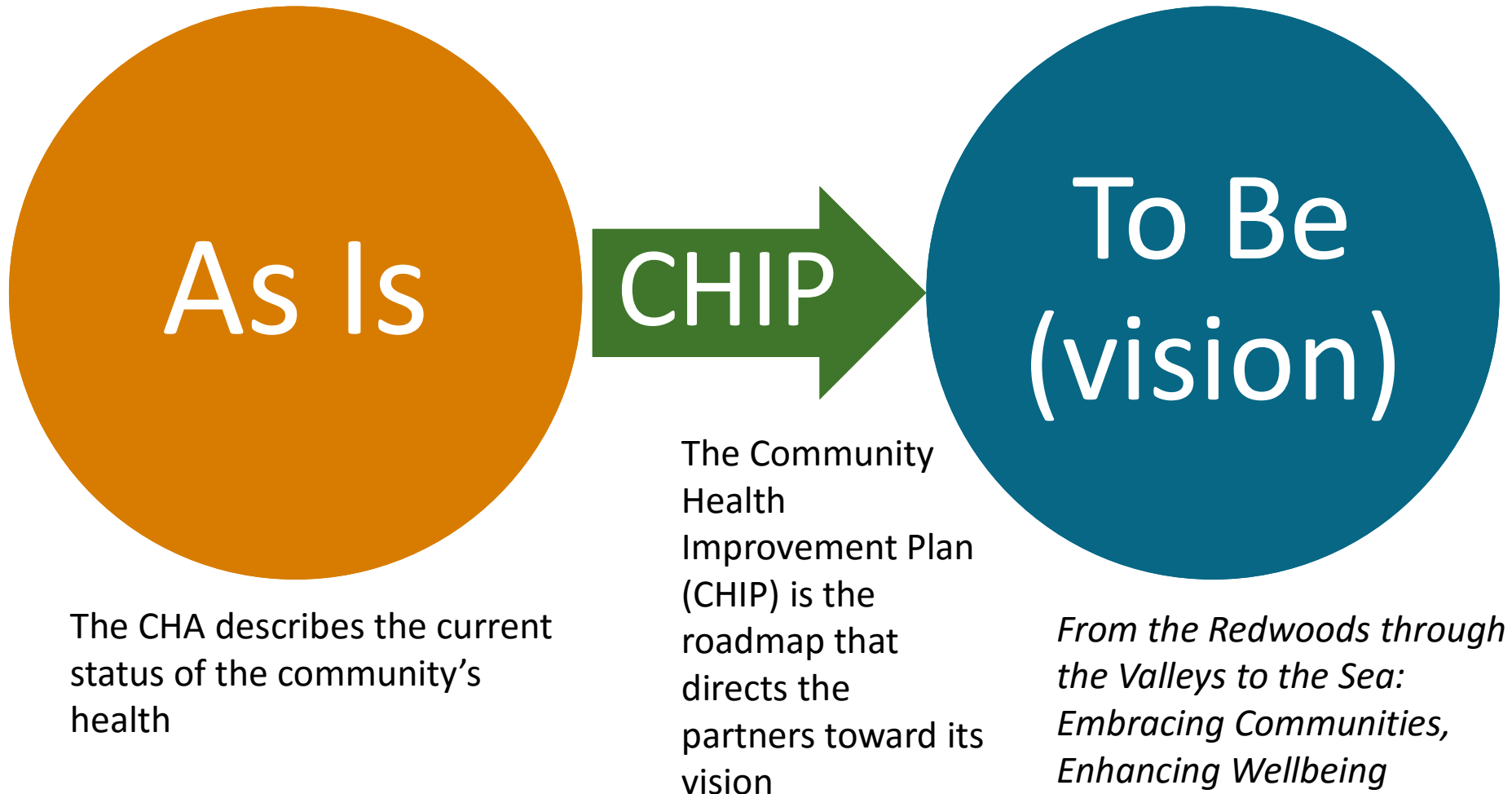
Discuss Strategic Issues

- What issues are critical to the success of the local public health system?
- What fundamental policy choices or critical challenges must be addressed in order for the community to achieve its vision?

From the Redwoods through the Valleys to the Sea: Embracing Communities, Enhancing Wellbeing

Determine if an Issue is Strategic

Is the issue related to our community's vision?

Will the issue affect our entire community?

Is the issue something that will affect us now and in the future?

Will the issue require us to change the way we function?

In order to address the issue, do we need leadership support?

Are there long-term consequences if we do not address this issue?

Does the issue require the involvement of more than one organization?

SMALL GROUP WORK

Create List of Strategic Issues

Prioritization

Uses an agreed upon set of criteria

Helps to identify which issues are most pressing

Aids in coordinating and focusing efforts

Note that there are quality tools available to make the process more objective

Prioritization Criteria

Feasibility: Is it realistically doable given the available resources?

Seriousness: To what degree does this issue lead to death, disability, or impairment to quality of life?

Community Reach: To what extent are we reaching all communities?

Using the Prioritization Matrix

Issues are placed in both the column (x) and row (y) headers

Using predetermined criterion, compare x with y

◦ Does x contribute more than y to the goal, using the specified criterion
◦ 1: x and y are equally important
◦ 5: x is significantly more important
◦ 10: x is exceedingly more important
◦ 1/5 or 0.2: x is significantly less important
◦ 1/10 or 0.1: x is exceedingly less important

Prioritization Matrix (cont'd)

Assign a value to the issue contributing more and the reciprocal score to the other issue

Total the scores by row and prioritize the issues, highest to lowest

Calculate the relative decimal value by adding the row total column then take each row total and divide by the grand total

Create a list in order of priority (highest values have highest priority)

Criteria: Financial Feasibility

	Cohesive & broad health education programs	Population Growth Management	Cultural Competance	Collective Impact	Community Engagement & Collaboration	Chronic Disease Prevention (Diabetes priority)	STDs	African American Disparities	Workforce			0				Attribute Criteria Weight	Percent of Total Criteria
Cohesive & broad health education programs	■	0.1	0.2	0.1	0.1	5.0	1.0	5.0	1.0							12.50	5.7%
Population Growth Management	10.0	■	1.0	0.2	0.2	10.0	5.0	10.0	10.0							46.40	21.1%
Cultural Competance	5.0	1.0	■	1.0	1.0	5.0	5.0	10.0	10.0							38.00	17.2%
Collective Impact	10.0	5.0	1.0	■	1.0	5.0	5.0	10.0	10.0							47.00	21.3%
Community Engagement & Collaboration	10.0	5.0	1.0	1.0	■	5.0	5.0	10.0	10.0							47.00	21.3%
Chronic Disease Prevention (Diabetes priority)	0.2	0.1	0.2	0.2	0.2	■	1.0	5.0	5.0							11.90	5.4%
STDs	1.0	0.2	0.2	0.2	0.2	1.0	■	5.0	5.0							12.80	5.8%
African American Disparities	0.2	0.1	0.1	0.1	0.1	0.2	0.2	■	1.0							2.00	0.9%
Workforce	1.0	0.1	0.1	0.1	0.1	0.2	0.2	1.0	■							2.80	1.3%
										■							
											■						
												■					
													■				
														■			
															■		
																■	

100.0%

Review Your Group's Issues to Prioritize them

Next Steps