



VENTURA COUNTY  
PUBLIC HEALTH

# Strategic PLAN

July 2015 - June 2020



To Strengthen & Transform THE  
Public's Health IN Ventura County



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## LETTER from the DIRECTOR

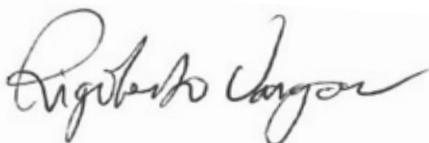
### With much pride and enthusiasm, I share with you Ventura County Public Health's 5-year strategic plan.

Our new vision statement for this plan is for Ventura County to become the healthiest county in the nation. As Public Health Director, I am committed to strengthening existing partnerships, as well as forging new relationships, to make this vision a reality. It will take collective efforts to transform the health of all residents and make the healthy choice the easy choice.

Large-scale health and social changes require broad cross-sector partnerships. Coordinated and significant collaborative efforts are the focus of this strategic plan, and also that of our upcoming community health improvement plan. Our partners for community health are many. They include the residents of this wonderful county, VCPH team members, Healthcare Agency sister departments, and County and non-County agencies. Our health partners also include representatives from a variety of sectors, including education, housing, employment, transportation, planning and public safety. It is only through a collective impact approach that we will significantly improve the well-being of our residents.

After all, behavior and physical environments have a greater influence on health, more so than access to care or family history. In fact, it has been said that our zip code, rather than our genetic code, is a better predictor of health. It is through a focused attention to the social determinants of health and increased partnerships that we make significant strides toward one of the new strategic focus areas in our strategic plan: health equity. Health equity is attained when differences in health outcomes are no longer due to preventable, avoidable or unjust factors.

I look forward to our journey as we work together to create the opportunities and foster the environments needed for everyone to attain their full health potential.



Rigoberto Vargas, MPH  
Director  
Ventura County Public Health



# EXECUTIVE Summary

Ventura County Public Health (VCPH) has engaged staff, community organizations, governmental officials and other stakeholders in the development of its strategic plan for July 2015 – June 2020. The following mission, vision and core values provide the foundation for the development of the priority areas. During this five year plan, VCPH will work to achieve the goals set forth in each of the priority areas with the ultimate goal of improving population health outcomes for all Ventura County residents.



## MISSION

The mission of VCPH is:

**To support environments that protect and promote the health and well-being of everyone in Ventura County.**

Our mission articulates the purpose of our department; it is our roadmap.

## VISION

The vision of VCPH is:

**To be the healthiest county in the nation.**

Our vision statement defines what we want to achieve. It provides guidance and direction in fulfilling our mission.

## CORE VALUES

Our core values provide a foundation for our priority areas as we strive to achieve our department goals.

- Collaboration
- Diversity
- Accountability
- Customer Service Excellence
- Performance Excellence

## PRIORITY AREAS

Our priority areas establish a framework for the development of specific goals and objectives to measure department performance.

1. Health Equity
2. Healthy and Safe Community Environments
3. Preventive Health Care
4. Community-driven Partnerships
5. Public Health Infrastructure

# GOALS for the STRATEGIC PRIORITY AREAS

<b>1. Health Equity</b>	<p>1.1 Strengthen organizational and staff capacity to implement health equity initiatives.</p> <p>1.2 Advocate for new, flexible and sustainable funding to address social determinants of health.</p> <p>1.3 Partner with public and private sector organizations to achieve policy, systems and environmental changes to promote health where people live, learn, work and play.</p>
<b>2. Healthy and Safe Community Environments</b>	<p>2.1 Increase the capacity of communities to support active and healthy living environments.</p> <p>2.2 Increase community safety and decrease potential for injuries and exposure to violence.</p> <p>2.3 Increase community wide preparedness levels for all potential public health emergencies and hazards.</p>
<b>3. Preventive Health Care</b>	<p>3.1 Seek new and sustainable funding to further invest in and prioritize prevention, including at the community level.</p> <p>3.2 Ensure that vulnerable populations served continue to have access to quality preventive and health care services as part of health care reform implementation.</p> <p>3.3 Promote prevention-focused public health, behavioral health and primary care delivery systems.</p>
<b>4. Community-driven Partnerships</b>	<p>4.1 Maximize opportunities, amongst the public health workforce, to build positive, sustainable partnerships with community organizations and residents.</p> <p>4.2 Engage with the community to develop initiatives that address agreed-upon community needs.</p> <p>4.3 Improve staff and partner capacity to help consumers understand health information and how to live a healthy lifestyle where the healthy choice is the easy choice.</p>
<b>5. Public Health Infrastructure</b>	<p>5.1 Maintain a skilled, competent and empowered workforce that is reflective of the communities we serve.</p> <p>5.2 Improve VCPH use of, and contributions to, the evidence-base of public health science and practice.</p> <p>5.3 Develop an integrated process to monitor program performance/improvement and changes in health outcomes.</p>

## BACKGROUND ON Ventura County

Ventura County is a diverse region with geography ranging from agricultural fields to coastal plains to mountain communities. Ventura County covers over 1,845 square miles including 43 miles of coastline. The Los Padres National Forest accounts for 46.7% of its land mass or 860 square miles in the northern portion of the County. Ventura County is home to the only deep-water port between Los Angeles and San Francisco, which is the shipping point for agriculture and is the largest refrigerated fruit terminal on the West Coast.

The California Department of Finance estimates the population of Ventura County was 842,967 in 2014. The population is approximately 47% White, 42% Hispanic, 7% Asian, 2% African American and 2% American Indian or Alaskan Native. Almost one quarter (23%) of the population is foreign-born, and 38% of the population speaks a language other than English at home. In Ventura County, 28% of the population is at or below 200% of the federal poverty level, and 11% of students dropped out at some point during their high school years.



# PUBLIC HEALTH

## Core functions, Essential Services & National Accreditation

Public health touches every individual, every day. Addressing the causes of morbidity, mortality and emergencies cannot be done one person at a time. Population-based public health moves the focus from the individual to the community in order to strategically address the needs. The foundation for public health lies within the three core functions of assessment, policy development and assurance.



**Within these core functions are 10 essential services provided daily by a dedicated, professional Ventura County Public Health (VCPH) team:**

- 1 Monitor health status to identify and solve community health problems.
- 2 Diagnose and investigate health problems and health hazards in the community.
- 3 Inform, educate and empower people about health issues.
- 4 Mobilize community partnerships to identify and solve health problems.
- 5 Develop policies and plans that support individual and community health efforts.
- 6 Enforce laws and regulations that protect health and ensure safety.
- 7 Link people to needed personal health services and assure the provision of health care services.
- 8 Assure a competent public and personal healthcare workforce.
- 9 Evaluate effectiveness, accessibility and quality of preventative health services.
- 10 Research for new insights and innovative solutions to health problems.

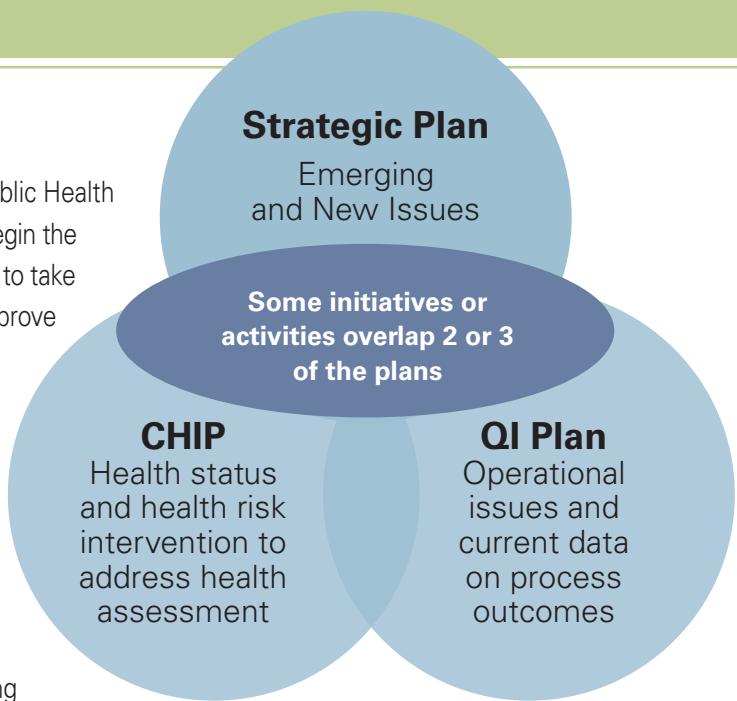
The Public Health Accreditation Board (PHAB) measures health department performance against a set of nationally recognized, practice-focused and evidenced-based standards aligned with the three core functions and 10 essential services of public health. VCPH achieved five-year national accreditation through PHAB in June of 2014. The national accreditation program is jointly supported by the Centers for Disease Control and Prevention and the Robert Wood Johnson Foundation. To receive accreditation, VCPH underwent a voluntary and very rigorous, multi-faceted, peer-reviewed assessment process to ensure we meet or exceed this set of quality standards and measures. VCPH was the first public health department in California to earn this important distinction and one of only 75 in the United States as of May 2015.

# THE PLANNING Process

After obtaining national accreditation, Ventura County Public Health (VCPH) convened a meeting of its senior managers to begin the next phase of strategic planning. VCPH leadership wanted to take the lessons learned from the accreditation process to improve the strategic planning process by making it more participatory through engagement of a broad array of stakeholders. The National Association of County and City Health Officials (NACCHO) strategic planning how-to guide provided the framework for this process.

Separate planning meetings were held with VCPH managers, VCPH line staff, Community Based Organizations, other partner organizations and the County Executive Office. In preparation for these planning meetings, data was gathered from a variety of sources including the most recent community health assessment, a community input survey and an internal organizational capacity survey. A strengths, weaknesses, opportunities, and threats (SWOT) analysis was conducted with the VCPH managers and line staff to help inform the development of strategic priority areas that would be the focus over the next five years. The results of this analysis and a draft list of the strategic priority areas were shared with VCPH community partners to get their feedback and identify opportunities for collaboration.

Following the initial planning meetings, VCPH managers reconvened to finalize the strategic priority areas and set three goals for each priority area that would help VCPH work toward improving the health status of Ventura County residents. In addition, a group of 15 population health indicators were selected that aligned with the priority areas and goals to be tracked over the next five years. These indicators were selected through a review of the most relevant data from: the VCPH Community Health Assessment, Health Matters in Ventura County ([www.healthmattersinvc.org](http://www.healthmattersinvc.org)), Healthy People 2020, the County Health Rankings, the County Health Profiles and the Healthy Communities Data and Indicators Project. In some cases, Ventura County was already meeting the Healthy People 2020 target for a specific indicator; therefore, VCPH set a target of a 5% improvement for each selected indicator over the next five years. These indicators will be



**The Community Health Assessment informs all three plans.**

tracked and reported on as part of the annual review of the strategic plan and as new data becomes available during this strategic plan implementation cycle.

The next phase of the strategic planning process included development of objectives and measures for each of the goals set forth in this plan. The objectives and measures will be tracked quarterly and reported annually to determine whether adjustments need to be made to the plan. By the summer of 2016, VCPH will develop the next community health improvement plan (CHIP) to further engage our partners in addressing the issues identified through the community health assessment and this planning process. This process, as outlined in NACCHO's guide for strategic planning per the diagram above, depicts how this strategic plan relates to the CHIP and Quality Improvement (QI) plan for the department. Essentially, the QI plan is guided by VCPH's policies and strategic direction found in our mission and vision statements, in our strategic plan, and in our health improvement plan. VCPH's Performance Excellence Council (PEC) is responsible for the administration of the QI plan and the strategic plan to ensure implementation of needed process improvements and monitoring of performance measures. The PEC seeks input from both managers and front line staff in order to accomplish its objectives.

# SOCIOECONOMIC STATUS & Its Effect on Health

The 10 leading causes of death in Ventura County in 2012 were cancer, heart disease, stroke, chronic lower respiratory disease, accidents, influenza and pneumonia, diabetes, suicides, chronic liver disease and cirrhosis, and hypertensive renal failure. Five chronic diseases accounted for 61.8% of all deaths in 2012. An estimated \$2.2 billion in health care costs were spent treating six chronic conditions (arthritis, asthma, heart disease, diabetes, cancer, and depression) in 2010, which accounted for 44.6% of all health care spending in Ventura County and was higher than the state average of 42.0% (California Department of Public Health, 2015). Although these conditions are often related to behaviors such as lack of physical activity, poor nutrition, and tobacco and/or alcohol use, socioeconomic status (SES) plays a huge role in one's access to health-care and ability to make good decisions when it comes to their health.

Socioeconomic status of communities has significant impact on the overall health of people in those communities. Reducing socioeconomic disparities require major changes which are often structural and complicated in their political dimensions. Reducing SES related disparities in health will require policy initiatives which should address the components of socioeconomic status such as income, education, and occupation, as well as, the pathway by which these conditions affect health of the community (Nancy E. Adler and Katherine Newman, 2002).

Research suggests that both physical and mental health is strongly associated with SES. In particular, studies suggest that lower SES is linked to poorer health outcomes. Poor health may in turn decrease an individual's capacity to work, thus reducing their ability to improve their SES (American Psychological Association 2012).

- Low SES is associated with increased morbidity and mortality (Adler, 1994).
- Low income individuals are 2-5 times more likely to suffer from a diagnosable mental disorder than those in the top SES bracket (Bourdon K.H., 1994).
- Within families, economic hardship can lead to marital distress and disrupted parenting that may increase mental health problems among children, such as depression, substance abuse and behavior problems (Conger, 2010).
- Educational and employment opportunities may be hindered by mental health problems (Murray, 1997).
- Access to health insurance and preventive services are part of the reason for socioeconomic health disparities (McGinnis, 2002).
- Research shows that SES is associated with a wide array of health, cognitive, and socio-emotional outcomes in children, with effects beginning prior to birth and continuing into adulthood (Bradley, 2002).
- Individuals with low SES often experience barriers to obtaining mental health services, including lack of or limited access to mental health care, child care and transportation (McGrath, 1990).
- Child pedestrian collisions are nine times more likely to occur in low income neighborhoods compared to high income neighborhoods (Chakravarthy B et al.)
- Education has a positive and statistically significant impact on the health of individuals (Sillies, 2009).



# SOCIOECONOMIC STATUS & Its Effect on Health

CONTINUED

## POVERTY STATUS

In Ventura County (VC), 11.1% of the population was living below the federal poverty level in 2013. In 2013, the poverty guideline for a family of four was \$23,550. Families with children were more likely to be living in poverty in 2013 as 16.0% of children under 18 years of age in VC lived below the poverty level. Figure 1 shows that the rate of poverty varies significantly between cities.

The level of poverty among children is higher than the poverty level among the population in general. The cities of Fillmore, Oxnard, Port Hueneme and Santa Paula all have a higher percentage of the population living in poverty, including children; a significant percentage of Ventura County's children grow up in poverty during the early and vulnerable years of their lives.

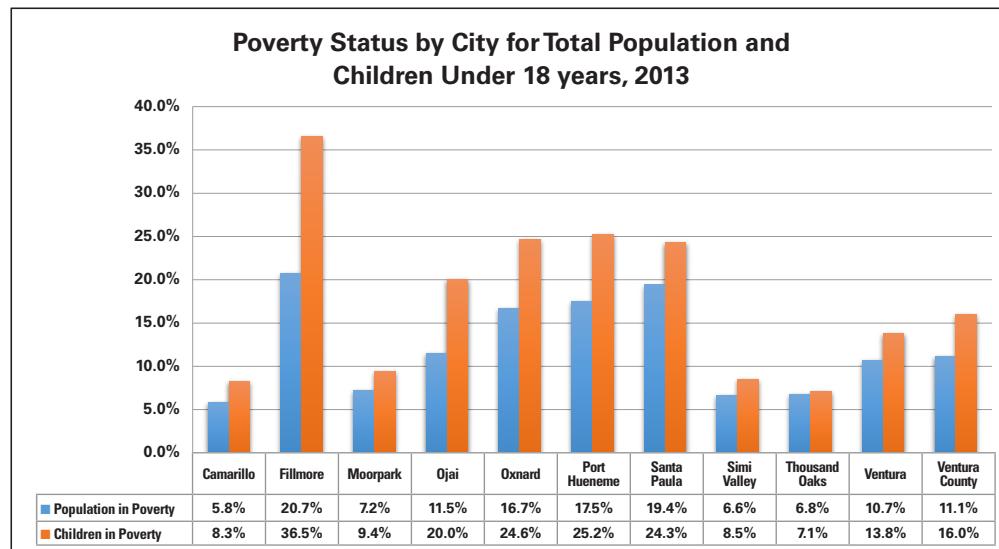


FIGURE 1 - SOURCE: U.S. CENSUS BUREAU, 2013 AMERICAN COMMUNITY SURVEY (2009-2013 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES)

## HOME OWNERSHIP

Home ownership is associated with a number of social and economic issues, such as economic stability and the quality of life. If an individual owns a home, they are more likely to enjoy a better quality of life simply because they can afford home ownership. Although the age distribution of a population has a significant relationship to the proportion of rented housing and homeownership, a higher proportion of homeownership is positively correlated with a safe and healthy living environment. Figure 2 shows that the pattern of homeownership in the county varies by city. There is far more homeownership, proportionally, in cities such as Camarillo, Moorpark, Simi Valley, and Thousand Oaks.

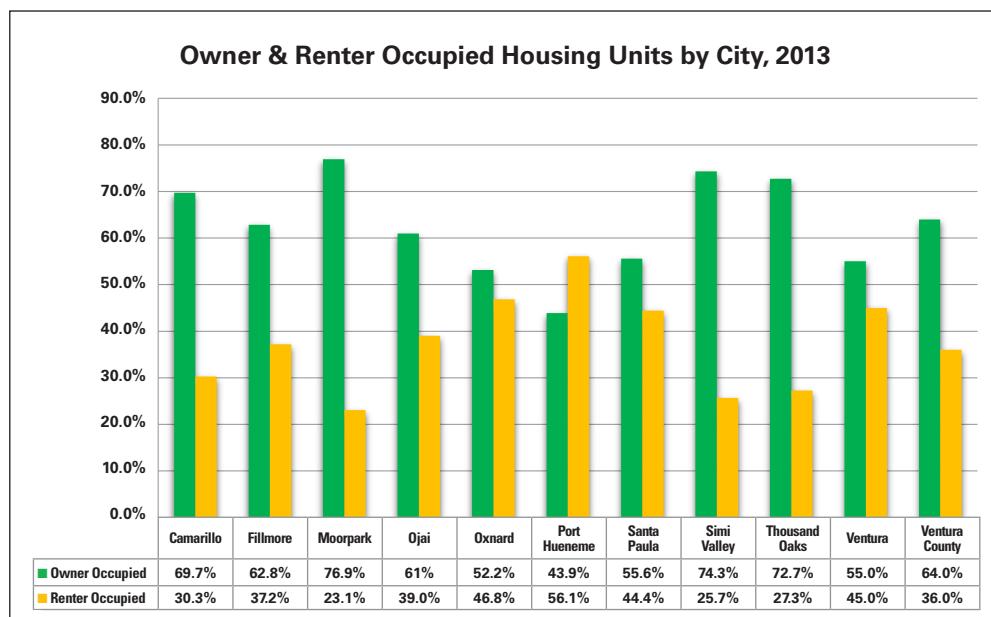


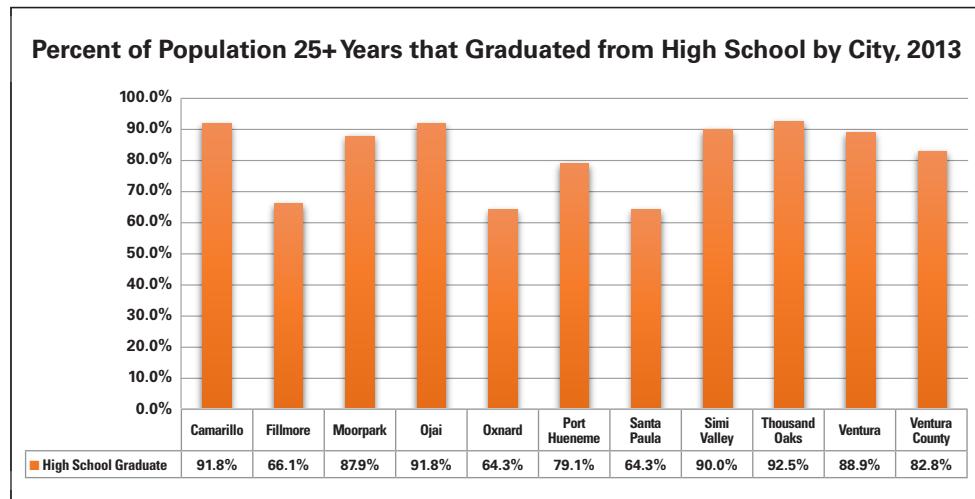
FIGURE 2 - SOURCE: U.S. CENSUS BUREAU, 2013 AMERICAN COMMUNITY SURVEY (2009-2013 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES).

# SOCIOECONOMIC STATUS

## EDUCATIONAL ATTAINMENT

Educational attainment is one of the key indicators of the health status of a community and access to health care services. Figure 3 shows that the rate of high school graduation varies remarkably within the county. The Healthy People 2020 (HP2020) target is to have 82.4% of students graduate with a diploma within 4 years of beginning the 9th grade.

Cities such as Oxnard, Fillmore, Santa Paula, and Port Hueneme have the lowest rates of high school graduation and are not meeting the HP2020 target. All other cities within the county meet the HP2020 target and exceed the county average of 82.8%.



**FIGURE 3** - SOURCE: U.S. CENSUS BUREAU, 2013 AMERICAN COMMUNITY SURVEY (2009-2013 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES).

# A Healthy Community

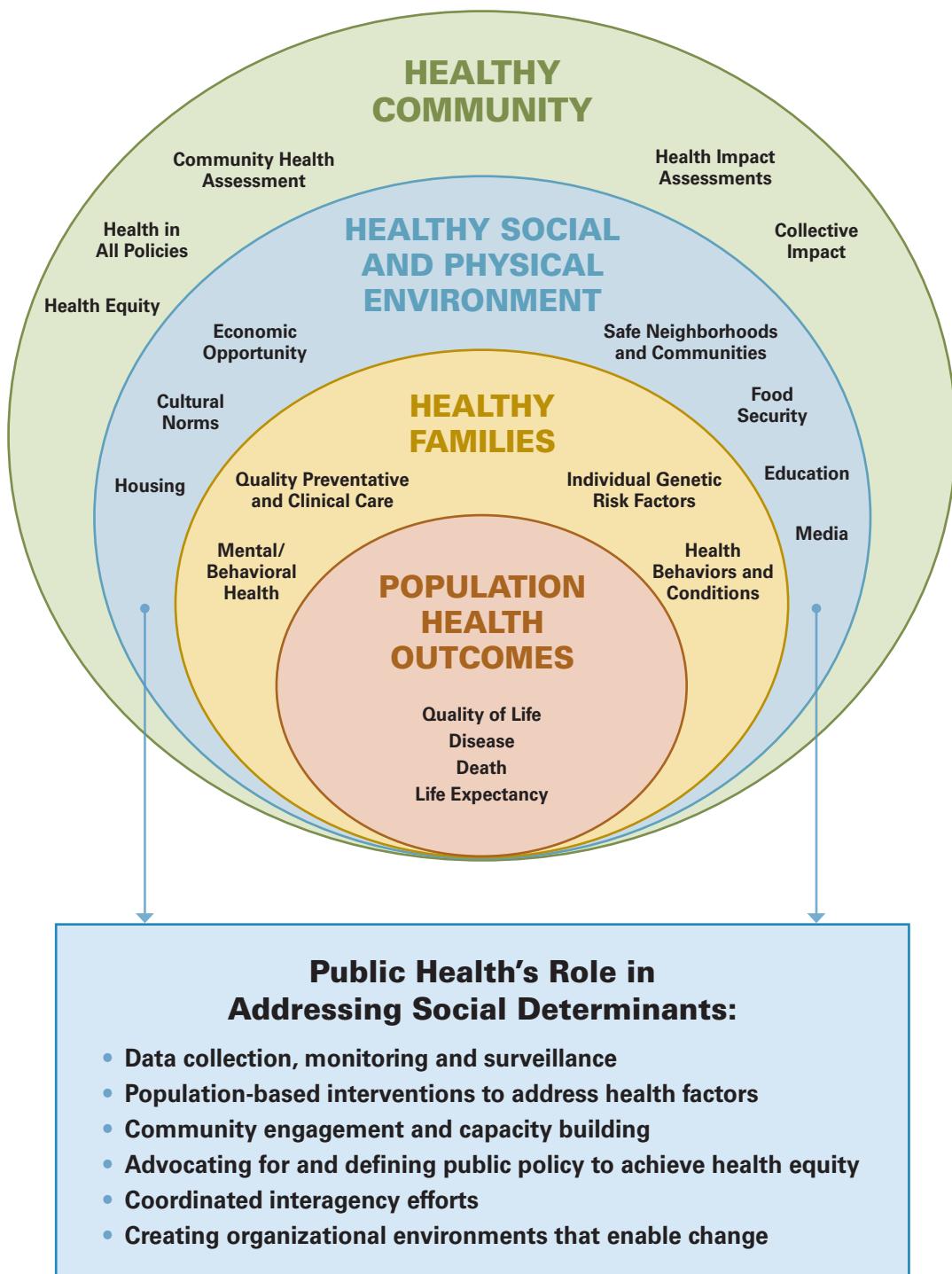
The World Health Organization defines health as "a complete state of physical, mental and social well-being, and not merely the absence of disease or infirmity."

Ventura County Public Health (VCPH) utilizes this same definition of health and has worked to further define the ideal **Healthy Community**. VCPH staff, community partners, government officials and other stakeholders were asked what factors are necessary to create and maintain a healthy community; the graphic above represents the consensus of the group.



# VENTURA COUNTY PUBLIC HEALTH

## Model for a Healthy Community



*A Healthy Community provides for a quality and sustainable environment, adequate levels of economic and social development, health and social equity, social relationships that are supportive and respectful, and meets the basic needs of everyone across the lifespan.*

# DESCRIPTION OF THE Model for a Healthy Community

VCPH believes that a Healthy Community provides for a quality and sustainable environment, adequate levels of economic and social development, health and social equity, social relationships that are supportive and respectful and meets the basic needs of all across the lifespan. In order to improve population health outcomes, we need to shift the focus from addressing health factors to addressing the social and environmental determinants of health. The VCPH model for a Healthy Community helps to define those social determinants as well as public health actions that can be taken to begin to address them.

**POPULATION HEALTH OUTCOMES** VCPH monitors population health outcomes such as quality of life, disease incidence and prevalence, life expectancy, and death to assess the health of families in Ventura County.

**HEALTHY FAMILIES** VCPH believes that families need access to quality preventive and clinical care, including mental and behavioral health services. The health of a family is affected by individual/genetic risk factors as well as health behaviors and conditions, nevertheless VCPH realizes that healthy social and physical environment play a greater role for a family in achieving overall health.

**HEALTHY SOCIAL AND PHYSICAL ENVIRONMENT** Healthy **housing** can support occupants throughout their life stages, promote health and safety, and support mental and emotional health. **Cultural norms** can influence beliefs about health care, behaviors that contribute to food choices, attitudes regarding mental health and values concerning social status. Living in **poverty** and being **unemployed** are associated with poor physical and mental health outcomes across all races and ethnicities. **Neighborhood** characteristics have significant impact on health outcomes because they influence an individual's ability to adopt behaviors that promote health. People in low income neighborhoods often have less access to **affordable, healthy food** options, and have more access to cheap fast-food outlets. People with higher levels of **educational attainment** consistently experience lower risks for a wide array of illnesses and increased life expectancy. Exposure to **media**, especially among youth, may affect health behaviors such as substance use, sexual activity, and eating habits. VCPH wants to address these social determinants of health by utilizing data to inform policy, engaging community residents and partner organizations, building capacity, and creating organizational environments that enable change to achieve a healthy community.

**HEALTHY COMMUNITY** According to the Centers for Disease Control and Prevention (CDC), health equity is achieved when every person has the opportunity to "attain his or her full health potential" and no one is "disadvantaged from achieving this potential because of social position or other socially determined circumstances." VCPH is committed to conducting periodic community health assessments and utilizing the Health in All Policies (HiAP) framework to improve the accountability of decision-makers to recognize the health impacts at all levels of policy-making. VCPH will collaborate more with existing stakeholders and also engage non-traditional stakeholders because it is only through collective impact that we can begin to make changes necessary to improve the health and well-being of residents and make Ventura County the healthiest county in the nation.

# GUIDING PRINCIPLES & Frameworks

Ventura County Public Health (VCPH) relies upon several principles and frameworks to help guide the department in program planning and policy development to improve the overall health of Ventura County residents.

## National Prevention Strategy

The National Prevention Strategy (NPS), released June 16, 2011, aims to guide our nation in the most effective and achievable means for improving health and well-being. The Strategy prioritizes prevention by integrating recommendations and actions across multiple settings to improve health and save lives. For more information on the NPS, visit <http://www.surgeongeneral.gov/initiatives/prevention/strategy/>.



## Healthy People 2020

Healthy People 2020 (HP2020) creates a strategic framework that unites health promotion and disease prevention issues under a single umbrella. It provides us with the opportunity to engage a wide variety of stakeholders in order to achieve the objectives set forth and guides national research, program planning and policy adoption to promote health and prevent disease.

Most importantly, this framework requires tracking of data-driven outcomes to monitor progress and focus our interventions. The fundamental goal of HP2020 is that we have a society in which all

people live long, healthy lives.

In order to achieve this goal, the County must think about how the social environment, physical environment, biology and genetics, access to health services and individual behavior all play a role in population-based health outcomes. Through the goals outlined in this plan, Ventura County Public Health is striving to eliminate population health disparities categorized by race/ethnicity, socio-economic status, gender, age, disability status, sexual orientation and geographic location. For more information on HP2020, visit <http://www.healthypeople.gov/>.

**Healthy People  
2020**

## Life Course Perspective

The life course perspective (LCP) suggests that a complex interplay of biological, behavioral, psychological and social factors contribute to health outcomes across the span of a person's life. This leads to the fact that health is a developmental process occurring throughout the lifespan, a process which can be closely linked to community and neighborhood settings. The key concepts of the LCP include pathways or trajectories, early programming, critical or sensitive periods, cumulative impact and risk and protective factors. Research documenting the

important role that early life events play in influencing health outcomes into adulthood provides a new perspective on how to assess health care needs and service delivery within Ventura County.

One's health pathway or trajectory is shaped continually through exposures, experiences and interactions. Social, economic and environmental exposures that influence an optimal healthy development trajectory can be predicted for populations and communities. The optimal healthy

# GUIDING PRINCIPLES & Frameworks

development trajectory can only be obtained through risk reduction and health promotion strategies, which is where transforming communities through policy intervention becomes important. Implementation of policies and environmental

changes that promote health and reduce an individual's risk will help empower residents to improve their overall health. For more information on the LCP, visit [http://mchb.hrsa.gov/lifecourse\\_approach.html](http://mchb.hrsa.gov/lifecourse_approach.html).

## Strengthening Families Framework

The Strengthening Families Framework (SFF) focuses on mobilizing partners, communities and families to build family strengths, promote optimal development and reduce child abuse and neglect. The Five Protective Factors are the foundation of the SFF approach; they include parental resilience, knowledge of parenting and child development, social and emotional competence of children, social connections and concrete support in times

of need. Extensive evidence supports the common sense notion that when these Protective Factors are present and robust in a family, the likelihood of abuse and neglect diminish. Research also shows that these are the factors that create healthy environments for the optimal development of all children. For more information on the SFF, visit [http://www.cssp.org/reform\\_strengtheningfamilies](http://www.cssp.org/reform_strengtheningfamilies).

## Healthy Outcomes From Positive Experiences

Healthy Outcomes from Positive Experiences (HOPE) integrates two trends in our understanding of early childhood: the growing adoption of positive frameworks for action (e.g., Center for Study of Social Policy's (CSSP), SFF and the CDC's Essentials of Early Childhood) – and the increased attention to the implications of emerging knowledge in developmental brain science, life course science, epi-genetics and the effects of adverse childhood experiences on health in later life. The goal of this initiative is to promote better results for children, families and communities by developing, testing and using a framework for action that incorporates positive experiences into research, policy and practice.

The social-ecological way of thinking about HOPE contains hypotheses in five domains of impact:

- Children experience both adverse and positive experiences in their lives. The sum of total experience influences the child's life course.
- Particularly for young children, families are the most important contributors to the child's

experiences. Stronger families, as described in the SFF and supported by research, are likely to provide fewer adverse experiences and more positive experiences for their children.

- Service providers, teachers, and health professionals themselves have significant roles to play in supporting families and their children (including adolescents) and particularly families and children facing adversity. This timely and tailored support can play a big role in preventing and mitigating adversity and providing the positive experiences that influence the life course.
- Similarly, communities play a significant role – including healthy and safe physical environments, economic opportunity and stability, social norms, ease of access to needed resources, and informal, as well as, formal supports available to young children and their families.
- Government agencies, employers and businesses can create conditions that support the essential elements that children require to flourish.

# GUIDING PRINCIPLES & Frameworks

## Trauma Informed Community Building

Trauma Informed Community Building (TICB) recognizes the impact of pervasive trauma on a community and creates a process to address the resulting challenges to traditional community building approaches. Through intentional strategies that de-escalate chaos and stress, build social cohesion and foster community resiliency over time, TICB can increase the community's readiness to engage in traditional community building efforts. The outcomes of effective TICB

are the conditions for sustainable individual and community change. They are also the foundation and support for a coordinated program and service delivery system that can address individual and community needs such as mental and physical healthcare, educational attainment, economic self-sufficiency, safety and healthy child development. For more information on TICB, visit [http://bridgehousing.com/PDFs/TICB\\_Paper5.14.pdf](http://bridgehousing.com/PDFs/TICB_Paper5.14.pdf).

## Health In All Policies

Health in All Policies (HiAP) is defined by the World Health Organization as a framework to systematically account for the health and health systems implications of decisions across the multitude of public policy organizations, agencies and institutions to work together to improve health and health equity. It emphasizes the consequences of public policies on health and aims to improve the accountability of policy-makers to recognize the health impacts at all levels of policy-making.

There are five key elements of HiAP:

- 1) Promoting health, equity and sustainability;
- 2) Supporting intersectoral collaboration;
- 3) Benefiting multiple partners;
- 4) Engaging stakeholders; and
- 5) Creating structural or process change.

*The County of Ventura believes that in order to build strong communities and a strong economy, it is necessary to commit to investing in health, equity, and sustainability. The Ventura County Board of Supervisors also recognizes that providing County leaders and decision makers with tools to view all decisions through a health equity lens will benefit all entities. It is therefore the intent of the Board to support, promote, and maintain a Health in All Policies approach throughout all county departments and agencies.*

This policy statement was formally adopted by the Ventura County Board of Supervisors on January 27, 2015; under the leadership of VCPH, the County of Ventura will implement the "Health in all Policies (HiAP) Framework" as the next step in achieving the desired health outcomes for our community.

### For more information on HiAP, visit

<http://www.euro.who.int/en/health-topics/health-determinants/social-determinants/policy-entry-points-for-addressing-socially-determined-health-inequities/health-in-all-policies-hiap>

## STRATEGIC PRIORITY AREAS,

# Goals & Objectives

The strategic priority areas and goals will remain consistent throughout this five year plan. Annually, the objectives will be revisited to determine if they will be continued, therefore, the timeline for implementation of these objectives will be by June 30, 2016. An annual report will be produced to provide an update on the progress of each objective.

## STRATEGIC PRIORITY 1 HEALTH EQUITY

*Support each person in Ventura County in attaining his or her full health potential regardless of socially determined circumstances.*

### Goal 1.1: Strengthen organizational and staff capacity to implement health equity initiatives.

Obj. 1.1.a. Utilize the Bay Area Regional Health Inequities Initiative (BARHII) guidance on applying the social determinants of health indicator data for advancing health equity.

Obj. 1.1.b. Develop an environmental risk assessment form to be completed by community health nurses in the field.

Obj. 1.1.c. Research the family health history and health appraisal questionnaires from the Adverse Childhood Experiences (ACE) study to determine whether or not they should be utilized as a screening tool for the population.

Obj. 1.1.d. Train 100% of managers and coordinators on the Health in All Policies (HiAP) framework; 75% of participants will report an increase in knowledge as a result of the training.

*\*\*Ventura County Strategic Plan Objective\*\**

## MISSION

The mission of VCPH is:

**To support environments that protect and promote the health and well-being of everyone in Ventura County.**

Our mission articulates the purpose of our department; it is our roadmap and the reason for our existence.

## VISION

The vision of VCPH is:

**To be the healthiest county in the nation.**

Our vision statement defines what we want to achieve.

It provides guidance and direction in fulfilling our mission.

## CORE VALUES

Our values guide us in focusing on our priority focus areas and achieving our department goals.

- Collaboration:** we use teamwork to achieve common goals and partner on solutions to transform our health system and community environment to focus on prevention and well-being.
- Diversity:** we support the development of a productive, creative and accountable workforce that reflects the diversity of the community we serve.
- Accountability:** we deliver quality services with transparency and integrity as responsible stewards of public funds.
- Customer Service Excellence:** we provide exceptional service with professionalism and respect.
- Performance Excellence:** we utilize evidence-based practices and foster a culture of continuous quality improvement to achieve service efficiency and efficacy.

## STRATEGIC PRIORITY AREA 1 Health Equity cont.

### Goal 1.2: Advocate for new, flexible and sustainable funding to address social determinants of health.

Obj. 1.2.a. Collaborate with Adolescent Family Life Program (AFLP) agencies and stakeholders state-wide to advocate to restore state funding that was eliminated in the 2009-2010 FY.

Obj. 1.2.b. Seek funding to further research and implement health equity initiatives within the department.

### Goal 1.3: Partner with public and private sector organizations to achieve policy, systems and environmental changes to promote health where people live, learn, work and play.

Obj. 1.3.a. Collaborate with at least one jurisdiction to incorporate a ban on e-cigarette use within their comprehensive outdoor smoking ordinance.

Obj. 1.3.b. Increase collaboration among agencies participating in the prenatal workgroup, a subcommittee of the Maternal, Child, and Adolescent Health Action (MCAHA) committee, and focus on ways to increase prenatal care access.

Obj. 1.3.c. Partner with First5 of Ventura County and the United Way to incorporate poverty as a priority

health concern within the Community Health Improvement Plan (CHIP).

Obj. 1.3.d. Increase the number of sentinel providers within Ventura County from three to five.

Obj. 1.3.e. Audit four schools with a high percentage of conditional entry students to increase vaccine compliance.

Obj. 1.3.f. Increase the number of emergency departments that have implemented the Centers for Disease Control and Prevention (CDC) recommendation, for opt-out HIV screening for 13-64 yrs., from two to three.

Obj. 1.3.g. Partner with West Ventura Family Care and CMH Family Care to provide Prescriptions for Physical Activity for 90% of youth and adults with a body mass index (BMI) at the 95th percentile or above for youth and greater than 30 for adults.

Obj. 1.3.h. Participate in a minimum of 12 collaborative visits to increase resources for community exercise/activity options for their clients.

Obj. 1.3.i. Collaborate with Reiter Affiliated Companies in Oxnard CA to train Field Supervisors on implementation of a lactation accommodation policy for field workers.



## GOALS & OBJECTIVES

### STRATEGIC PRIORITY 2

## HEALTHY AND SAFE COMMUNITY ENVIRONMENTS

*Support and develop neighborhoods and institutions that support healthy lifestyles.*

#### **Goal 2.1: Increase the capacity of communities to support active and healthy living environments.**

Obj. 2.1.a. Provide education to 40 licensed daycare providers to decrease the percent of children with personal belief exemptions.

Obj. 2.1.b. Increase the amount of healthy foods offered by retail markets, by 5 or more items, in Communities of Excellence (CX3) neighborhoods serviced by the Nutrition Education and Obesity Prevention Program (NEOP).

Obj. 2.1.c. Establish a support group for teen mothers that participate in the Women, Infants, and Children Program (WIC).

Obj. 2.1.d. Collaborate with the other counties, involved in the Lead Remediation Project, to develop a procedure/process to prioritize lead abatement projects in high risk homes throughout the county.

Obj. 2.1.e. Increase the percent of Medical Therapy Program (MTP) clients that have a current exercise program plan that includes a community exercise activity to 80%.

#### **Goal 2.2: Increase community safety and decrease potential for injuries and exposure to violence.**

Obj. 2.2.a. Ensure that 90.0% of children served by the Child Abuse Prevention Program (CAPP) will remain in their homes and outside the Child Welfare System.

Obj. 2.2.b. Offer Narcan to 100% of clients at the syringe replacement sites throughout the county to help prevent deaths from opioid overdoses.

Obj. 2.2.c. Increase the percent of patients, who triage into Step 1, 2, or 3 trauma, who are directly

transported to a trauma center to 95%.

Obj. 2.2.d. Establish a quarterly data report to utilize real time surveillance data from Epicenter to create and deliver prevention messages related to unintentional injuries to children 0-17 years of age.

#### **Goal 2.3: Increase community wide preparedness levels for all potential public health emergencies and hazards.**

Obj. 2.3.a. Combine the Fetal Infant Mortality Review (FIMR) and the Child Death Review Team (CDRT) into the Maternal and Child Death Review (MCDR) in order to streamline data collection and increase prevention efforts.

Obj. 2.3.b. Purchase automated specimen processing equipment that will increase capacity for molecular detection of emerging diseases.

Obj. 2.3.c. Initiate an investigation for all diseases, covered by the Public Health Emergency Preparedness (PHEP) surveillance grant, within 24 hours of receiving a confidential morbidity report (CMR).

Obj. 2.3.d. Increase membership on the Ventura County Health Care Coalition (VCHCC) by 20 facilities.

Obj. 2.3.e. Provide training on resource requesting within the Medical and Health Operational Area (MHOA) for operational area stakeholders.

*\*\*Ventura County Strategic Plan Objective\*\**



## GOALS & OBJECTIVES

### STRATEGIC PRIORITY 3 PREVENTIVE HEALTH CARE

*Improve the availability, use, and integration of prevention-focused, evidence-based health care services.*

#### **Goal 3.1: Seek new and sustainable funding to further invest in and prioritize prevention, including at the community level.**

Obj. 3.1.a. Collaborate with California Children's Health Initiative (CCHI) to identify and apply for funding to increase enrollment into health coverage and utilization of preventive services.

Obj. 3.1.b. Increase the number of HIV screening tests ordered by physicians at Ventura County Medical Center (VCMC) and Santa Paula Hospital (SPH) emergency departments (EDs) by 5%.

#### **Goal 3.2: Ensure that vulnerable populations served continue to have access to quality preventive and health care services as part of health care reform implementation.**

Obj. 3.2.a. Increase knowledge on safe sex, birth control and family planning for 65% of clients ages 10-19, served by Community Health Nursing (CHN) and the Adolescent Family Life Program (AFLP).

Obj. 3.2.b. Provide nine community clinics to distribute flu vaccine to vulnerable populations.

Obj. 3.2.c. Establish a memorandum of understanding (MOU) with Clinicas Del Camino Real to provide dental services to HIV/AIDS clients being case managed by the program.

Obj. 3.2.d. Reduce the median interval time from 911 to brain image report time for strokes from 70 min to 55 min.

Obj. 3.2.e. Decrease the repeat birth rate to 3% or less for Adolescent Family Life Program (AFLP) clients enrolled in the program for 12 months.

Obj. 3.2.f. Offer an oral health education session to 100% of the Women, Infants, and Children Program (WIC) families with an infant.

Obj. 3.2.g. Establish a medical home for 98% of California Children's Services (CCS) clients regardless of payor source.

Obj. 3.2.h. Ensure 100% of California Children's Services (CCS) clients have a correct payor source to allow for seamless continuity of care.

#### **Goal 3.3: Promote prevention-focused public health, behavioral health and primary care delivery systems.**

Obj. 3.3.a. Engage in provider outreach to increase the number of California Children's Services (CCS) paneled providers in Ventura County.

Obj. 3.3.b. Ensure 90% of children of Adolescent Family Life Program (AFLP) clients are up-to-date on their immunizations.

Obj. 3.3.c. Establish a collaboration between Help Me Grow Ventura County, VC PACT, HMG National Coordinated Care Collaborative (CCC), Project ABC, VC Interagency Coordinating Council (ICC), etc. to access current capacity for linking at-risk children to needed services.

Obj. 3.3.d. Conduct a developmental screening for 100% of children 0-6 years who enter the foster care system.

\* \*Ventura County Strategic Plan Objective\*\*

Obj. 3.3.e. Assess the capacity of the department to implement universal Ages and Stages Questionnaire (ASQ) screening for children 0-6 years.

\* \*Ventura County Strategic Plan Objective\*\*

Obj. 3.3.f. Screen 75% of adults 65 years and older, served by Adult Protective Services (APS) public health nurses, for cognitive deficits and refer to appropriate behavioral health and primary care resources.

Obj. 3.3.g. Ensure that 100% of children who enter the foster care system receive a medical and dental exam.

Obj. 3.3.h. Link 75% of adolescents age 17-21 to an adult primary care provider to ensure for seamless continuity of care after they transition out of California Children's Services (CCS).

## STRATEGIC PRIORITY AREA 3 Preventative Health Care cont.

Obj. 3.3.i. Implement sexually transmitted infection (STI) screening and treatment at both public health clinic locations.

Obj. 3.3.j. Offer dental varnish to 100% of clients 0-5 years served by the public health clinics.

## STRATEGIC PRIORITY 4 COMMUNITY-DRIVEN PARTNERSHIPS

*Collaborate with existing stakeholders and non-traditional stakeholders to increase the collective impact for improving health and well-being.*

### Goal 4.1: Maximize opportunities, amongst the public health workforce, to build positive, sustainable partnerships with community organizations and residents.

Obj. 4.1.a. Partner with American Medical Response (AMR) to provide Direct Observed Therapy afterhours and on weekends to 100% of clients that require this service.

Obj. 4.1.b. Collaborate with two community hospitals to ensure that the pregnant Women, Infants, and Children Program (WIC) participants who deliver at those hospitals, and are in urgent need of an electric breast pump, obtain one in a timely manner.

### Goal 4.2: Engage with the community to develop initiatives that address agreed-upon community needs.

Obj. 4.2.a. Provide lactation support to Bright Beginnings (BB) clients to increase the percent of clients exclusively breastfeeding at the 3rd home visit to 80%.

Obj. 4.2.b. Implement a new molecular testing protocol for monitoring recreational water quality that will reduce processing times from 48 hours to within 24 hours.

Obj. 4.2.c. Partner with Santa Paula West Clinic to perform HIV screening for the Lesbian, Gay, Bisexual, and Transgender (LGBT) Clinic.

Obj. 4.2.d. Work in partnership with school district representatives, Cal SAFE, and Cal Learn to eliminate barriers for Adolescent Family Life Program (AFLP) clients to attend school.

Obj. 4.2.e. Collaborate with Gold Coast Health Care Plan to access data on preventive service utilization.

Obj. 4.2.f. Encourage providers to conduct an oral health risk assessment on all patients and provide education, referrals, and fluoride varnish application in conjunction with the Oral Health Collaborative.

\* \*Ventura County Strategic Plan Objective \*\*

Obj. 4.2.g. Work together with FOOD Share and community partners from public housing and youth/ senior centers to expand mobile fresh produce distribution sites.

\* \*Ventura County Strategic Plan Objective \*\*

### Goal 4.3: Improve staff and partner capacity to help consumers understand health information and how to live a healthy lifestyle where the healthy choice is the easy choice.

Obj. 4.3.a. Increase access to nutrition education for parents and students at 10 elementary schools.

Obj. 4.3.b. Highlight the work and strategic plan efforts of one program each quarter on the Health Matters in Ventura County website.



## GOALS & OBJECTIVES

### STRATEGIC PRIORITY 5 PUBLIC HEALTH INFRASTRUCTURE

*Strengthen Ventura County Public Health to remain a high-performing and innovative organization.*

#### **Goal 5.1: Maintain a skilled, competent and empowered workforce that is reflective of the communities we serve.**

Obj. 5.1.a. Maintain competencies in Positive Youth Development, adolescent and child development.

Obj. 5.1.b. Assess staff to determine how many employees are eligible for the Certified Health Education Specialist/Masters Certified Health Education Specialist (CHES/MCHES) exam from the National Commission for Health Education Credentialing, Inc.

Obj. 5.1.c. Increase knowledge of employees on public health programs and services offered.

Obj. 5.1.d. Design and implement workforce development activities to enhance nursing skills and increase the capacity of public health nurses (PHNs) to respond to emergent community needs.

Obj. 5.1.e. Ensure that 98% of employees receive disaster preparedness training.

*\*\*Ventura County Strategic Plan Objective\*\**

Obj. 5.1.f. Implement the workforce development plan as required by Domain 8 for Public Health Accreditation.

#### **Goal 5.2: Improve VCPH use of, and contributions to, the evidence-base of public health science and practice.**

Obj. 5.2.a. Submit the Bright Beginnings pilot project at Ventura County Medical Center to the Internal Review Board for approval.

Obj. 5.2.b. Increase the percent of STEMI (ST segment elevation myocardial infarction) patients identified in the field, who have a pre-hospital to balloon time of less than 90 minutes, to 90%.

Obj. 5.2.c. Submit the Bus of Tobacco Horrors project to the Ventura County Medical Center Internal Review Board for approval to collect data for research purposes.

Obj. 5.2.d. Collaborate with the California Immunization Registry (CAIR) to develop a report allowing VCPH Clinics to determine missed opportunities for immunizations on clients they have served.

#### **Goal 5.3: Develop an integrated process to monitor program performance/improvement and changes in health outcomes.**

Obj. 5.3.a. Monitor 100% of perinatal Hepatitis B (Hep B) positive mothers to provide education and promote Hep B and Hepatitis B immune globulin (Hbig) vaccine to prevent transmission of the infection.

Obj. 5.3.b. Develop and adopt a communication plan for sharing information across programs, internally and externally.

Obj. 5.3.c. Conduct an assessment of existing agencies that develop health status reports to determine if there are opportunities for collaboration.



# POPULATION HEALTH Indicators

These population health indicators were selected because they aligned with the priority areas and goals to be tracked over the next five years. Ventura County Public Health set a target of a 5% improvement for each selected indicator by 2020. To track our progress and see how we are doing as a collective community, visit <http://www.healthmattersinv.org>.

Strategic Planning Indicators	Ventura County Data	VC 2020 Target	Previous Period	HP 2020 Target	HP 2020 Met	Source	Time Period
5th Grade Students who are at a Healthy Weight or Underweight	62.0%	65.1%	Increasing	N/A	N/A	California Department of Education	2013-14
Access to Exercise Opportunities	94.8%	99.5%	N/A	N/A	N/A	County Health Rankings	2014
Adults who are Obese	22.7%	21.6%	Increasing	30.5%	Yes	California Health Interview Survey	2011-12
Adults with Health Insurance	79.3%	83.3%	Decreasing	100.0%	No	California Health Interview Survey	2011-12
Child Abuse Rate	7.6 per 1,000 kids	7.2	Increasing	8.5	Yes	Child Welfare Dynamic Report System	2013
Children Living Below Poverty	16.0%	15.2%	Increasing	N/A	N/A	American Community Survey	2009-13
Children with Health Insurance	92.1%	96.7%	Decreasing	100.0%	No	American Community Survey	2013
Chlamydia Incidence Rate	299.8 per 100,000 population	284.8	Decreasing	N/A	N/A	California Department of Public Health, STD Control Branch	2013
Food Insecurity Rate	11.6%	11.0%	Decreasing	N/A	N/A	Feeding America	2012
High Blood Pressure Prevalence	25.5%	24.2%	Increasing	26.9%	Yes	California Health Interview Survey	2011-12
High School Graduation	82.5%	86.6%	Decreasing	82.4%	Yes	California Department of Education	2012-13
Infant Mortality	4.5 per 1,000 births	4.3	Increasing	6	Yes	California Department of Public Health	2012
Mothers who Receive Early Prenatal Care	83.3%	87.5%	Increasing	77.9%	Yes	Automated Vital Statistics System	2014
Needed help for emotional/mental health problems or use of alcohol/drug	18.4%	17.5%	Increasing	N/A	N/A	California Health Interview Survey	2011-12
Preterm Births	8.0%	7.6%	Decreasing	11.4%	Yes	Automated Vital Statistics System	2014

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