I. Welcome and Introductions
   - David Souleles welcomed all in attendance. Attendees introduced themselves.

II. Health Improvement Partnership Business
   - **Review November 9, 2017 Highlights**: Members reviewed the November 9 meeting highlights (handout) and approved them with no changes.
   - **Approval of New Membership Applications**: The group reviewed a matrix of HIP membership and applications to the HIP (handouts). Members approved Jared Bigman, Patricia Cantero, Ashley Ferreira, Carol Kim, and Sora Tanjasiri as new members of the HIP.
   - **Steering Committee**: Patricia Cantero was approved as Latino Community representative for the HIP Steering Committee.

III. Early Childhood Framework Task Force Presentation
   - Barry Ross presented on the Early Childhood Framework Task Force (handout). The Early Childhood Policy Framework is a guide for comprehensive early childhood systems. The framework is intended as a resource to allow various sectors and stakeholders to align in order to help children prosper.

IV. OC Partnerships to Improve Community Health
   - Dolores Barrett provided an overview of the activities implemented under the Orange County Partnerships to Improve Community Health (OCPICH) (handout). Funding was obtained from the Centers for Disease Control and Prevention (CDC) for three years to support initiatives around reducing the burden of chronic diseases in Anaheim, Garden Grove, and Santa Ana.
V. CalOptima Member Health Needs Assessment
- Claudia Hernandez presented on CalOptima’s recent Member Health Needs Assessment (handout). The assessment aimed at obtaining a comprehensive understanding of CalOptima’s member’s needs. Almost 7,000 members participated from all over Orange County and the various needs identified are summarized in the Executive Summary (handout).

VI. HIP Work Plan 2018 – Public Health System
- Jane Chai updated attendees on the HIP Work Plan on the public health system (handout). The plan outlines strategies that were identified from the public health system assessment conducted in June 2016, current status, and planned next steps.

VII. Priority Area Updates
- **Behavioral Health:** Amy Buch reported on activities related to alcohol and drugs. With new marijuana laws in place as of 2018, the focus has been on disseminating resources and information on OC Healthier Together.

- **Diabetes:** Barry Ross, chair of the Orange County Diabetes Collaborative, reported that the diabetes collaborative has created has reviewed the diabetes data and found an increase from the previous year. The collaborative is currently focusing on creating a campaign to create urgency around the topic. In addition, the collaborative is looking at the activities being led by the American Diabetes Association and how those resources can be leveraged. The American Diabetes Association has partnered with WalMart to provide free screenings every three months. The collaborative will work on promoting those screenings and provide resources.

- **Obesity:** Amy Buch, chair of the Health Improvement Partnership Obesity Work Group, reported that work group had a presentation on school wellness policies using the WellSAT assessment by the Orange County Food Access Coalition. The work group also reviewed the latest California Physical Fitness Test data and examined where disparities and correlations may exist. The work group will be looking at collective impact next and presenting on OC PICH at the next HIP meeting.

- **Older Adult Health:** Helene Calvet, co-chair of the Orange County Healthy Aging Initiative (OCHAI), shared that the Annual Wellness Visit Toolkit is now available online. The work group may be looking at a new platform to host the tool kit and is also planning on creating promotional materials.

- **Access to Health Care:** David Souleles indicated that Health Funders Partnership of Orange County (HFPOC) is planning a convening on access to health care in September 2018.

- **Oral Health:** David Núñez shared that the county will be receiving Proposition 56 funding to conduct assessment, planning and coordination around oral health. The work plan and contract have been approved for five years. A needs assessment is planned for the first six months of 2018, with identified strategies for the following four years.

- **Infant and Maternal Health:** David Núñez shared that EveryWomanOC.org is now live. A press release has been released and additional promotion is being planned. The Orange County Perinatal Council continues to work on goals related to prenatal care and breastfeeding. The
prenatal guide is still being promoted and distributed. In addition, seven out of 15 hospitals are now baby friendly.

- **Social Determinants of Health:** Marklem Valdovinos updated the committee on changes made to a survey to ask the OCHT email list about their practices around SDOH. The work group had planned on conducting a survey with the HIP to determine areas of synergy and gaps. No date is set for distribution of survey, but it will most likely occur by the end of the month.

- **Data Work Group:** Jane Chai shared that there are updates to the OC Healthier Together site. The City Profiles have been updated and the Older Adult Dashboard is also scheduled to be updated. A new Location Report Builder tool was added to the site.

### VIII. Member Updates:

- Pam Pimental encouraged members to attend the Community Health Research Exchange meetings hosted by UCI Institute for Clinical and Translational Science.
- Jared Bigman invited members to attend the Asthma Educator Institute on April 9 and April 10, 8:00 AM – 4:00 PM at UC Irvine. It is a prep course for practitioners who work with patients with asthma.
- Barry Ross shared that the Alliance for a Healthier Orange County is having a meeting on March 29 looking at policy in Orange County.
- Lauren Tabios invited members to attend the 2018 Spirituality Conference hosted by Hoag. The conference will be taking place March 15 and will be offering CE.
- Dolores Barrett asked that organizations encourage people to complete their taxes and take advantage of free tax preparation services available throughout the county.
- Ilia Rolon shared information about the work on the early childhood index that the Children and Families Commission of Orange County has engaged in.
- Marklem Valdovinos shared that the annual Heart Walk will take place on March 24 at the Angel Stadium. In addition, the blood pressure guidelines have changed and may increase the number of people in the hypertension category.
- Vattana Peong shared that the Cambodian Family Community Center is offering free visual arts workshops for both youth and adults. In addition, the center is serving as an enrollment center for older adults for various benefit programs.
- Robynn Zender shared that Translational Science Day will be on May 4 and the Institute of Clinical and Translational Science will be showcasing the work conducted at UC Irvine.
- Patricia Cantero shared that Latino Health Access will be hosting the 2nd Annual Health Week on April 2.
- Christy Cornwall announced that UCI and Mission Hospital have partnered to offer the “Bleeding Control Basics” training as part of the Stop the Bleed Campaign. The campaign aims at training people on how to control bleeding during an emergency.
- Chris Leo shared that California State Auditor’s audit of Mental Health Services Act is now available on their site.

### IX. Adjournment:

The meeting was adjourned at 4:04 PM.
Orange County prospers when its children are valued, nurtured, healthy and thriving.

Children thrive when the people, places and environments impacting them are aligned with a shared vision.

**Why Early Childhood?**

"Early experiences affect how the brain develops, shaping how children learn, behave, and grow."

- The Center for the Developing Child at Harvard University

**Why it Matters for Orange County**

**EDUCATION INDICATOR**

- Only half of Orange County's children are ready with the skills they need to succeed when they enter kindergarten.

Source: University of Chicago Economics Professor James Heckman – The Heckman Equation Project

Source: Orange County Conditions of Children Report, 2017
Why it Matters for Orange County

EDUCATION INDICATOR
• Only half of Orange County’s children meet 3rd grade achievement standards.

Source: Orange County Conditions of Children Report, 2017

Why it Matters for Orange County

• By the time they reach 5th grade, nearly one in five students are obese.

Source: Orange County Conditions of Children Report, 2017

Why it Matters for Orange County

• 37% of Orange County child care providers have had to expel a child due to challenging behavior.

Source: Orange County Community Indicators Report, 2017

Why it Matters

1 in 5 of the 40,000 children born in Orange County each year live below the poverty level.

Source: Orange County Conditions of Children Report, 2017

A Children’s Policy Framework – What is It?

A shared vision that will help us to leverage our work, resulting in greater impact for children and families through:
• Aligned policies and goals across all sectors
• Improved communication and coordination
• Identification of strengths and addressing of gaps

How the Policy Framework was Created

• Collaborative Effort
• Patterned after Colorado’s successful model
• Specific enough to support young children and families
• Broad enough for every sector to participate
Collaborative Effort – 2+ Years in the Making

Policy Framework Development Representation

- Pediatricians
- Health Systems
- Prenatal to Age 3
- Early Learning
- Pre-K through 12 Education
- Higher Education
- Science Education
- Family Support & Parent Education
- Social, Emotional & Mental Health
- Philanthropy
- County Government
- Community Housing
- Public Broadcasting System
- Professional Development

Core Principles

1. Children and families thrive regardless of income, language and culture
2. Supports and services are coordinated and integrated across settings and sectors
3. Policies and practices are family-centered

Strategies for Action

- Promote and share knowledge
- Identify and eliminate barriers
- Build community capacity
- Make data-informed decisions
- Encourage public-private approaches
- Advance adequate and sustainable funding
- Implement quality standards
- Embed continuous quality improvement
- Ensure coordinated messaging

Goals

Three Goal Areas:

1. Resilient families
2. Quality early learning
3. Comprehensive health & development

Are organized by:

- Access: recognizes that the availability of services are important
- Quality: recognizes that it is not enough for services to simply exist but they must meet a standard of quality
- Equity: recognizes that special populations need special attention

Results

- Young children reach their developmental potential and are ready to succeed in school and life
- Adults are knowledgeable, responsive and interact effectively with other adults, children and the family unit
- Environments that impact children are safe, stable, healthy and supportive
- Orange County attains economic and social benefits by prioritizing children and families...

Which brings us full circle – Orange County prospers when its children are valued, nurtured, healthy, and thriving!
You are Here!

• Where do you see your current work in the Framework’s goals?

• What goals in the Framework would you like to address in the future?

• What are opportunities to partner with other organizations to promote these goals?

Building a Movement

• Community Engagement

• April 2018 Early Childhood Policy Framework Forum

• Annual Gatherings & Stories of Success
What is OC PICH?
Orange County Partnerships to Improve Community Health

Grant Focus
- Policy
- System
- Environment

Policies Passed
City of Santa Ana
- Vision Zero
- Fill it from the Tap

City of Garden Grove
- Garden Grove Unified School District adopted a tap water policy into the District’s school wellness policy
- pending: Active Streets Plan

City of Anaheim
- Master Bike Plan
- pending: Tap Water Policy

System Change
- Fit Kits / Fit Kid Centers
- Parent-led recess
- Walk to School
- After school organized physical activities
Farmer’s Markets

Santa Ana
Promoting Market Match and HOTM $15 will be $30 on produce

Anaheim
Promoting Market Match and HOTM $10 will be $20 on produce

*Market Match for CalFresh recipients only*

Built Environment Improvements

- City of Santa Ana – installed crosswalks, bike lanes and bike racks, markers for walking path and enhanced 9 intersections in the downtown area to promote safe physical activities and active transportation
- City of Anaheim – installed fitness equipment, walking and running paths and a hydration station at Edison Park as well as hydration stations at 7 additional Anaheim parks
- City of Garden Grove – installed fitness equipment in both Garden Grove Park and Eastgate Park and also installed a walking path at Eastgate Park

Communications & Media

- Increase the number of public and partner education messages promoting healthy lifestyles (nutrition and physical activity)
  - Water Campaign
  - Safety (biking and walking) Campaign
  - Flyers, newsletters, bus ads, print media, radio, etc.
  - Includes ads in ethnic media – Spanish-speaking and Vietnamese-speaking

Public Service Announcements (PSA) in 3 languages

- Active Transportation
- Physical Activity/Child’s Play

Public Service Announcements (PSA) in 3 languages

- Drink Tap Water!
- Nutrition

Sustainability

- RLA (Resident Leadership Academy) Classes in the 3 PICH cities to educate the community members and students on how to advocate for themselves on issues that matter to them
Member Health Needs Assessment
Orange County Health Improvement Partnership
February 28, 2018
Claudia S. Hernandez
Manager, Strategic Development

A better study offering deeper insight, leading to a healthier future.

A Better Study
⇒ More Comprehensive
⇒ More Engaging
⇒ More Personal

More Comprehensive
• Reached new groups of members whose voices have rarely been heard before
  • Young adults with autism
  • People with disabilities
  • Homeless families with children
  • High school students
  • Working parents
  • New and expectant mothers
  • LGBTQ teens
  • Homeless people in recuperative care
  • Farsi-speaking members of a faith-based group
  • PACE participants
  • Chinese-speaking parents of children with disabilities
(Partial List)

More Comprehensive (Cont.)
• Gathered responses from all geographic areas of Orange County

More Comprehensive (Cont.)
• Probed a broader view of members’ lives beyond immediate health care needs
  • Hunger
  • Child care
  • Economic stress
  • Housing status
  • Employment status
  • Physical activity
  • Community engagement
  • Family relationships
  • Mental health
  • Personal safety
  • Domestic violence
  • Alcohol and drug consumption
(Partial List)
More Comprehensive (Cont.)

- Asked more tailored, relevant and targeted questions, in part to elicit data about social determinants of health
  - Have you needed help with housing in the past six months?
  - How often do you care for a family member?
  - How often do you get enough sleep?
  - How many jobs do you have?
  - In the past 12 months, did you have the need to see a mental health specialist?
  - How open are you with your doctor about your sexual orientation?
  - How sensitive are your health care providers in understanding your disability?

(Partial List)

More Engaging: Members

Focus Groups
- 31 face-to-face meetings in the community
- 353 members

Telephone Conversations
- 534 live interviews in members’ languages

Mailed Surveys
- Nearly 6,000 surveys returned

Electronic Responses
- More than 250 replied conveniently online

More Engaging: Member Advocates

- Abrazar Inc.
- Access CA Services
- Alzheimer’s OC
- Boys & Girls Club
- The Cambodian Family
- CHOC
- Dayle McIntosh
- La Habra Family Resource Center
- Latino Health Access
- Korean Community Services
- Mercy House
- MOMS Orange County
- OMID
- SeniorServ
- South County Outreach
- State Council on Developmental Disabilities
- Vietnamese Community of OC Inc.

(Partial List)

More Personal

- Met in familiar, comfortable locations at convenient times for our members
  - Apartment complexes
  - Churches
  - Community centers
  - Schools
  - Homeless shelters
  - Recuperative care facilities
  - PACE center
  - Community clinics
  - Restaurant meeting rooms

More Personal (Cont.)

- We spoke their language
  - English
  - Spanish
  - Vietnamese
  - Korean
  - Farsi
  - Chinese
  - Arabic
  - Cambodian
  - Marshallese
  - American Sign Language

The Voice of the Member

Offering Deeper Insight

- Barriers to Care
- Lack of Awareness About Benefits and Resources
- Negative Social and Environmental Impacts
Notable Barriers to Care

- Study revealed that members encounter structural and personal barriers to care
  - Structural
    - It can be challenging to get an appointment to see a doctor
    - It takes too long to get an appointment
    - Doctors do not always speak members’ languages
    - Interpreter services are not always readily available
    - Doctors lack understanding of members’ cultures
  - Personal
    - Members don’t think it is necessary to see the doctor
    - Members have personal beliefs that limit treatment
    - Members are concerned about their immigration status
    - Members are concerned someone would find out they sought mental health care

Barriers to Care (Cont.)

Examples

- 52% Don’t think it is necessary to see the doctor for a checkup
- 28% Takes too long to get an appointment
- 26% Concerned someone would find out about mental health needs
- 41% Didn’t think it is necessary to see a specialist, even when referred

Notable Lack of Awareness

- Survey revealed a lack of understanding about available benefits and services
  - 25 percent of members who needed to see a mental health specialist did not pursue treatment
  - 38 percent of members had not seen a dentist in more than a year
  - Focus group participants commented frequently about having difficulty regarding certain resources
    - Interpreter services
    - Social services needs
    - Transportation

Lack of Awareness (Cont.)

Examples

- 40% Didn’t know who to ask for help with mental health needs
- 41% Didn’t see a dentist because of cost (i.e., didn’t know dental care was covered)
- 25% Don’t have or know of a dentist

Negative Social and Environmental Impacts

- Survey revealed significant social and environmental difficulties
  - Lack of well paying jobs and employment opportunities
  - Lack of affordable housing
  - Social isolation due to cultural differences, language barriers or fear of violence
  - Economic insecurity and financial stress
  - Lack of walkable neighborhoods and the high cost of gym programs

Negative Impacts (Cont.)

Examples

- 32% Needed help getting food in the past six months
- 56% Accessing other public assistance
- 43% Needed help to buy basic necessities
- 29% Needed help getting transportation
Negative Impacts (Cont.)

Stakeholder Perspective

“There’s a significant issue with improper nutrition. They may not have enough money or the ability to go to the grocery store to buy the right foods. They get what they can, and that’s what they eat.”

—Interviewee

Leading to a Healthier Future

➔ Funding
➔ Requests for Proposal
➔ Moving Forward

Funding

$14.4 Million

Total Available IGT 5 Funds

➔ Member Health Needs Assessment results drive funding allocations

➔ Eight Requests for Proposal (RFPs) to expand access to mental health, dental and other care, and outreach/education services

Eight RFPs

<table>
<thead>
<tr>
<th>Description</th>
<th>Funding Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expand Access to Mental Health Services and Provide Outreach to Promote Awareness of Services</td>
<td>$5 million</td>
</tr>
<tr>
<td>Expand Mental Health and Socialization Services for Older Adults</td>
<td>$500,000</td>
</tr>
<tr>
<td>Expand Access to Mental Health/Developmental Services for Children 0–5 Years</td>
<td>$1 million</td>
</tr>
<tr>
<td>Nutrition Education and Fitness Programs for Children and Their Families</td>
<td>$1 million</td>
</tr>
<tr>
<td>Medi-Cal Benefits Education and Outreach</td>
<td>$500,000</td>
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<tr>
<td>Expanded Access to Primary Care and Programs Addressing Social Determinants of Health</td>
<td>$4 million</td>
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<tr>
<td>Expand Adult Dental Services and Provide Outreach to Promote Awareness of Services</td>
<td>$1.4 million</td>
</tr>
<tr>
<td>Expand Access to Children’s Dental Services and Provide Outreach to Promote Awareness of Services</td>
<td>$1 million</td>
</tr>
</tbody>
</table>

Total $14.4 million

Moving Forward

• Eight Grant Applications/RFPs
  ➢ Expand access to mental health, dental and other care services
  ➢ Expand access to childhood obesity services regarding nutrition and fitness
  ➢ Support outreach and education regarding social services and covered benefits
• RFPs to be released in March 2018
• Recommended grantees to be presented at June Board meeting

CalOptima’s Mission

To provide members with access to quality health care services delivered in a cost-effective and compassionate manner