

DIRECTOR'S REPORT

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Health Disparities

Although this month it may look as if my message is about three different topics, they are connected by a very significant thread: health disparities that result in some members of our community receiving unequal or even no health care and suffering from a higher incidence of illness and death from some diseases.

Talking about Medi-Cal

I've spent a fair amount of time in the last few weeks focusing on the issue of Medi-Cal funding. As a member of the California Association of Public Hospitals' Executive Committee, I testified before the State Legislature's Budget Subcommittee. The subcommittee, which includes Senator Tom Torlakson, was holding hearings on the changes proposed by Governor Arnold Schwarzenegger in his budget for the coming year. My job was to describe what the proposed changes in Medi-Cal funding would mean to health systems like ours. It is important that law makers understand that any change — to benefits, payments or federal funding — would have a potentially devastating impact on funding for our hospital and health centers and other systems like ours.

Because we were concerned that some lawmakers and other important public figures are not aware of how intertwined our health systems are and how careful they need to be in making changes, Doug Bagley, the Chief Executive Officer at Riverside County Regional Medical Center, and I talked about the public hospital system and the safety net infrastructure.

We're the Safety Net

I emphasized that our Medical Center and Health Centers are the primary providers for Medi-Cal services. In Contra Costa, there are close to 90,000 Medi-Cal recipients. They are pregnant women who need prenatal care, kids who need pediatric care, people who are

aged, blind or disabled, people being admitted for heart problems and surgeries. Because there is only one other hospital with a Medi-Cal contract in the county, we deliver 180 babies each month at Contra Costa Regional Medical Center.



— Dr. Walker

Serving the Uninsured

When Medi-Cal funding was established, it was with the understanding that systems like ours serve not only large numbers of Medi-Cal recipients but also serve those who are uninsured and need care. The existing Medi-Cal reimbursement structure acknowledges something that has been true for at least 15 years: we are the largest provider of care in Contra Costa for people with no insurance. There have been conversations for years about how to address the problem of people without insurance. Recently, the legislature passed SB 2, which required health insurance coverage for employees in smaller companies. That law has since been overturned. Annually for years, there also has been an Insure the Uninsured conference which has discussed various proposals. Unfortunately, there is nothing on the horizon that would provide a solution.

In the absence of any other formal mechanism for providing services to the uninsured, the current Medi-Cal funding system is all we have. To change the Medi-

Continued next page

DID YOU KNOW

Our emergency room visits totalled **43,020** last year.

CCHS Brochure, FAQs Available

It isn't always easy to explain a comprehensive, integrated health department like ours to the public, policy makers and other health providers. To make it easier to get information out about CCHS, we've created a brochure that describes how we serve, protect and work with the community. The brochure, which is in color, includes our mission statement, a message from Dr. William Walker, a list of some of our programs, statistics about our services, examples of advisory boards and coalitions we work with and a list of frequently called phone numbers. Because of the size of the brochure, it isn't available on our website, but the phone numbers and our mission statement are. The brochure was published some months ago and will be revised and reprinted this summer. We're also publishing a revision of Frequently Asked Questions about environmental health and hazardous materials issues. Answers focus on how to dispose of old paint, varnish, motor oil and old needles. Other issues highlighted address how to report food poisoning, permits for selling food at events and how to start a food business. Also covered are what to do about exposure to lead and mold, how to deal with fire hazards in a neighborhood and who to call with concerns about environmental health issues.



To order CCHS brochure or FAQs, call Fowzia Younos at 925-313-6823.

Director's Message Continued...

Cal funding system without any real long-term assessment is dangerous for the thousands of people we care for every year and for our system.

Report shows health disparities

I'm particularly concerned now about access to health care for the uninsured because of a new report that we've developed for the Hospital Council of Northern and Central California. The report, which is available at our website cchealth.org, examines a wide variety of key health indicators. I was pleased to see that we have met the federal government's Healthy People 2010 objectives for limiting lung and prostate cancer. But the report shows we are falling short of federal objectives in deaths from other cancers, heart disease, stroke, homicide and unintentional injuries. There are continued disparities in health outcomes for populations of color in our county. For example, African Americans have much higher rates of AIDS, hospitalization for asthma, death from diabetes and homicide and low-weight births.

The report gives us a chance to take a look at the big picture to show us where we can focus both services and prevention not only through public health programs but also with hospitals and other partners. The report didn't have any startling news but shows that disheartening disparities continue to result from lack of insurance and other health access barriers as well as lack of early diagnosis and early treatment.

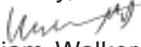
Our diabetes and obesity efforts

There are some bright spots in all of this. Within our own system, we've recently created an inter-divisional work group to look at diabetes and obesity. This is a topic that has hit the national radar screen and for which new funding has recently become available to address those issues in a more comprehensive way. In some ways, these topics are excellent indicators for health disparities, since they are more common among people of color, especially African Americans, Latinos and Native Americans. Too many people of color go undiagnosed, are diagnosed late in the disease process, tend to have more complications and are more likely to die prematurely from the disease.

The Work Group, which includes representatives of Public Health, CCRMC/Health Centers, the Directors' Office and the Health Plan, reflects our understanding that we can't continue to take care of diabetes in our health centers without focused actions to prevent it. And we can't work on prevention without improving our systems for helping people with diabetes. The Work Group can build on New Kids, an existing cross-division program to address pediatric obesity through clinical and community components. The Work Group's goal is to develop a comprehensive, coordinated system of prevention and care for those suffering from obesity and diabetes – or who are at risk for those conditions.

Efforts like the Diabetes and Obesity Work Group and the coalitions we participate in are promising. While we cannot magically eliminate all societal problems that lead to health disparities, we can implement systemwide prevention and treatment strategies that, over time, can reduce health disparities among the people and communities we serve.

Sincerely,


William Walker, M.D.

The Director's Report is published monthly. Deadline for the April edition is March 14. Publicize your upcoming events and successes by sending information to Julie Freestone at 597 Center Avenue, Suite 255, Martinez 94553, fax 925-313-6219, email: jfreestone@hsd.co.contra-costa.ca.us. The Director's Report is available online at cchealth.org and on the Intranet at cchs.

GOING THE EXTRA MILE FOR SERVICE EXCELLENCE

Honor Roll

Fowzia Younos

Administrative Staff
Communications Unit

For efficiently distributing more than 25,000 fliers to promote the Earn It, Keep It, Save It! tax assistance campaign. She persistently and effectively contacted dozens of community and county partners to encourage them to distribute the flyers.

—Nominated by Julie Freestone

Anne Wolf

Prenatal Care Guidance home visitor and case manager
Family, Maternal and Child Health Programs

For assisting a high-risk pregnant teen in gaining access to prenatal care in a timely manner and in interacting with the referring high school in a professional manner.

—Nominated by Joanna Greenwood PHN

Russ Emery

Medical Records Technician
CCHP

For prompt replies to a Health Plan member's phone calls, research into available options and overall sincerity in trying to help. "He was always professional and pleasant, keeping a positive attitude."

—Nominated by a patient

Scott Weingold, MD and Officer Mike Von Savoye

Contra Costa Forensic Multi-Disciplinary Team

For helping to reunite a homeless man with his family after a 10-year absence. Officer Von Savoye alerted Mental Health to the plight of the man. Dr. Weingold tracked down the man's family. He returned to sit at his mother's death bed and help his grieving father. He is now doing well.

—Nominated by John D. Allen

Annabelle Cadiz, RD, MS

Nutritionist with California Children Services and Child Health and Disability Prevention Program

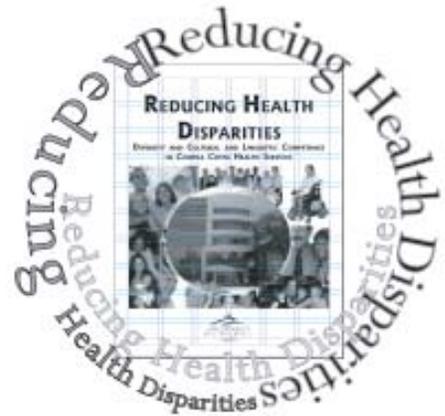
For providing excellent nutritional consultation to children with serious medical conditions and their families, training and support to health care providers, and leadership in county and statewide projects to improve outcomes for children with anemia, obesity and other medical conditions requiring specialized intervention.

—Nominated by Paula Hines and Barbara Sheehy

Employee Milestones

Congratulations to these employees who have given us long years of service: Bridget Brown, Mary Falco, Dina Alvarez, Frances Crockett, Cheryl Kohl, Tracy Kelly (10 years); Jan Lake, Hugo Javierre, Denise Oldham, Kathryn Gawley, Deborah Oehrlein, Deborah Gordon, Paul Andrews, Eric Jonsson, Sonny Khoo, Kimberly Davis (15); Sherry Boney, Jonathan Wong, Patti Villarreal, Fe Magbitang (20); Janie Decesare, Jose Martin (25); and Joan West (30) years. *(We know there are lots of other dedicated employees with long years of service. Because of space limitations, we are only reporting those with 10, 15, 20, 25 and 30 years.)*

This page brings news of how the implementation of the CCHS Plan for Reducing Health Disparities is progressing and highlights program efforts. Our divisions have been working on three key areas to reduce health disparities. These are improving linguistic access, implementing educational activities on diversity and cultural and linguistic competence and developing an organizational climate that values patient, customer and employee diversity.



(Left to right) Ken Stuart, EH Director, Roberto Rodriguez, Senior Registered Environmental Health Specialist and Vanessa Cordier, Supervising Environmental Health Specialist.

Environmental Health Tackles Linguistic Barriers

Department-wide efforts to reduce health disparities inspired our Environmental Health Division (EH) to look for ways to improve linguistic access for the public. EH, which oversees permitting and inspection of food service facilities among other things, tackled

language barriers that exist for some restaurant owners and food vendors. For example, many non-English speaking restaurant owners were bringing their friends, relatives and even children to interpret for them at administrative hearings on health or safety violations, said Vanessa Cordier, Supervising Environmental Health Specialist. "We were uncertain if information was being translated accurately. If a person isn't able to understand, they won't be able to make corrections," said Vanessa, who is a member of our Reducing Health Disparities Initiative (RHDI) work group. EH decided to make use of our department-wide contracts with interpretation services vendors, which already provide interpreters in a variety of languages at the hospital and elsewhere. EH inspectors can use the vendors to arrange for an interpreter to come to a restaurant or business, depending on the urgency of the situation. This will help people understand and comply with regulations and orders to make improvements, Vanessa said. Two inspectors also are bilingual in Spanish. The division is working on two more ways to increase linguistic access, said EH Director Ken Stuart. One is updating their phone system to provide more options in Spanish. Another is using CyraCom International, which already serves some of our other divisions, for immediate interpretation services by phone. This would be a vital service when an inspector isn't able to communicate with a business owner or worker during an emergency, such as a sewage leak. EH also will participate along with other divisions as beta testers for a computer program that can instantly translate spoken and typed words.

 For more information, call Vanessa Cordier at 925-646-5225, ext. 207 or e-mail her at vcordier@hsd.co.contra-costa.ca.us

Going the Extra Mile in Reducing Health Disparities

Roberto Rodriguez, Senior Registered Environmental Health Specialist, is one of Environmental Health's bilingual inspectors who speaks Spanish. During his free time, he teaches a food safety class in Spanish at Richmond Adult School. The class is required for certification as a safe food handler and every restaurant is required to have at least one employee certified. The class was only being offered in English until another inspector started the Spanish course several years ago. Roberto took over the class when the other inspector left. Roberto said he is glad to help reduce health disparities and only wishes he could speak even more languages. "I got into this field to help people keep safe," he said. "If we don't offer the class in a person's native language then we aren't doing our best to educate them."



Top Languages Spoken at Home in Contra Costa County (Population 5 Years and Over)

Language	Percent of Residents
English	74.0%
Spanish	13.1%
Tagalog	2.6%
Chinese, Korean, Vietnamese	each between 0.8 and 0.4%
Persian, Japanese	
French, Italian	
German	

Population age 5 years and over = 883,762. Source: 2000 Census. Prepared by Kenneth Knight, CHAPE.

The California Endowment has awarded \$125,000 to our Reducing Health Disparities Initiative to complete and pilot our curriculum for educating CCHS managers on health disparities and culturally competent service excellence.

Physician Publishes Article on Anemia

The journal *Pediatrics* recently published Dr. Keith White's article "Anemia is a Poor Predictor of Iron Deficiency Among Toddlers in the United States: For Heme the Bell Tolls." The article says that while many toddlers in the United States have their hemoglobin levels measured periodically in the hopes of detecting iron deficiency, the practice does not appear to be worthwhile, as hemoglobin levels are a poor predictor of iron deficiency in this population. Keith, a pediatrician at the Concord Health Center, analyzed data from 1,289 children 12 to 35 months old. He found that most young U.S. children with iron deficiency are not anemic, and the absence of anemia cannot correctly rule out iron deficiency. He suggests prophylactic iron supplementation is more likely to be effective than hemoglobin screening in preventing iron deficiency in young children in developed countries. In an interview with Reuters, he says "We worry about iron deficiency and iron deficiency anemia in children because they are associated with developmental problems. This study shows that anemia is due to iron deficiency only about one third of the time, the other two thirds of the time [it is] probably due to infectious processes or genetic causes. On the other hand, a low hemoglobin only accompanies iron deficiency about one third of the time, so relying on this test overlooks two thirds of the children who are affected by iron deficiency. We know that iron deficiency and iron deficiency anemia will affect more children after their first birthday," he added. "It is wiser to try to prevent a known problem than to attempt to detect an established disease and try to cure it."



Local Polio History Project

As part of the polio vaccine's 50th anniversary this year, our Communicable Disease program is compiling a local history of polio's impacts on our county during the 1940s and 1950s. The polio vaccine became available in the United States in 1955 and the disease has been eradicated in the Western Hemisphere and many other countries. However, polio remains a real threat in other parts of the world. Polio survivors, their relatives and the doctors who treated them are encouraged to share their stories, pictures and mementos.



For more information or to share stories, contact project manager Dale Jenssen at 925-313-6362.

Meals on Wheels Launches New Website

Meals on Wheels of Contra Costa is proud to announce the launch of its new website:

www.mealsonwheelsofcontracosta.org, The site allows the non-profit group to provide instant access to important information about the organization's history and challenges. Visitors can learn how to access Meals on Wheels services anywhere in the county. Contra Costa residents can also see many ways that businesses, civic organizations, church groups and individuals can contribute to the continued success of Meals on Wheels services in their community.

Website visitors can even donate online via credit card through a secure third party administrator. Since credit card fees are completely underwritten by the financial institution, 100% of on-line contributions via the website go directly to Meals on Wheels. Visit the website and use the handy email message system to let us know what you think, ask questions, or make suggestions for improvement.



Homeless Count 2005

About a dozen county workers were among 125 community volunteers who participated in our first-ever homeless count on January 26. The U.S. Department of Housing and Urban Development (HUD) asked our county and other communities that receive federal homeless funds to conduct the counts to get a more accurate number of people who are homeless. The HUD funds provide our Homeless Program with \$8 million this year for housing and services. The volunteers were trained on how and who to count and were dispatched during the early morning hours to drive through assigned sections of the county. Specially trained crews, which included Homeless Program staff, went on foot to check freeway underpasses and other areas where homeless people set up encampments. The volunteers counted 1,463 homeless people. Service providers also counted another 5,629 people either staying in shelters or transitional housing or receiving other services. This will provide a baseline count for charting progress in implementing our 10-year plan and ending homelessness in our county, Homeless Program Director Cynthia Belon said.



More information about Contra Costa Health Services' Homeless Program is available online at cchealth.org/groups/homeless

Medical Staff Continue Tsunami Relief

Medical Resident Kinari Webb is in Lamno, Indonesia doing tsunami relief work. From a friend's website (www.tropicaltrees.org/aceh) comes a "warm-and-fuzzy" story about a child whose mother brought her to the clinic. The little girl hadn't slept since the tsunami, and was so petrified she would not leave her mother's side. Kinari checked her out and told her mother that she was physically fine, but had sakit hati (heartache). Kinari gave her a fuzzy toy and sat her on her lap, and the girl seemed transformed. Kinari then noticed 20 other kids at the windows; the translator told her they wanted to sit on her lap too. She reports that the orphans are the biggest problem and children's books are in demand. International Medical Corps's website (imcworldwide.org) reports on CCHS' Roger Barrow, MD, who was also in Lamno conducting, among other things, an eagerly anticipated mass measles immunization campaign targeting nearly 2,000 children in 11 camps. "It's obvious that Roger and Jeff (Goodman, another doctor) have done this many times before, and all but the youngest kids seem determined to enjoy themselves, even if they are getting stuck with needles."



Dr. Barrow treats a young patient.



Website Keeps Growing

Whether it's information for health providers about reporting nail infections or tips about preventing Sudden Infant Death Syndrome, our cchealth.org website is attracting more and more visitors. They're using the site to get information about jobs, CCHS services, insurance and hot health topics. People are reading Healthy Outlook columns that appeared in the Contra Costa Times, checking topics for Contra Costa TV shows like Ask the Doctor and Vida Sana En Vivo and sending us email to inquire about a wide range of topics from restaurant inspections and mold to job opportunities and health data. They're downloading patient education information, newsletters and articles. In January, our site recorded a new record 46,215 visits from non-CCHS computers. We also set a new record for number of pages read during a visit (3.24) and time spent on the site (2.06 minutes).

Employee Emergency Hotline:
925-646-9911

CCHS Intranet:
type cchs in your browser

Health Emergency Hotline:
888-959-9911

CCHS Internet:
www.cchealth.org