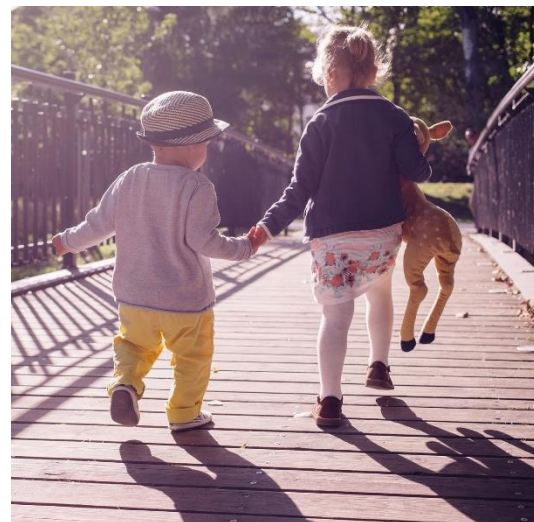


# COMMUNITY HEALTH IMPROVEMENT PLAN



COUNTY OF SAN LUIS OBISPO  
HEALTH AGENCY  
PUBLIC HEALTH DEPARTMENT



2018 - 2023

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# ACKNOWLEDGEMENTS

The Public Health Department acknowledges and thanks the many community partners whose representatives contributed their ideas, expertise and energy to develop this plan.

5 Cities Homeless Coalition  
ACTION for Healthy Communities  
Aegis Treatment Centers, LLC  
Air Pollution Control Board  
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Alzheimer's Association  
Arroyo Grande Community Hospital  
Big Brothers Big Sisters SLO  
Bike SLO County  
California Polytechnic State University (Cal Poly)  
CalFresh Nutrition Education  
CalFresh Alliance  
California State Parks  
Cambria Community Healthcare District  
Casa Solana Inc.  
CenCal Health  
Center for Family Strengthening  
Central Coast Dental Society  
City of Paso Robles  
City of San Luis Obispo  
Cayucos Elementary School District  
Cleath-Harris Geologists  
Coast Smiles on Wheels  
Commission on Aging  
Community Action Partnership  
Community Foundation of SLO County  
Conifer Health  
Community Health Centers  
County Office of Education  
County of San Luis Obispo Departments:  
    Behavioral Health  
    District Attorney  
    Libraries  
    Planning & Building  
    Public Defender  
    Public Health  
    Public Works  
    Probation  
    Social Services  
County Health Commission  
Cuesta College  
Diringer and Associates  
Dignity Health Central Coast  
Family Care Network  
First 5 SLO County  
Food Bank Coalition of San Luis Obispo  
French Hospital Medical Center  
HEAL SLO  
Health Navigator Project  
HomeShareSLO  
Integrated Waste Management Authority  
Latino Outreach Council  
Leadership SLO  
The LINK Family Resource Center  
Long Term Care Ombudsman Services of San  
    Luis Obispo County  
Meals that Connect  
Movement for Life  
Noor Foundation  
Oral Health Coalition  
Peoples' Self-Help Housing  
Planned Parenthood CA Central Coast  
Pregnancy and Parenting Support of SLO County  
Promotoras  
RISE  
San Luis Coastal Unified School District  
San Luis Obispo Chamber of Commerce  
San Luis Obispo Council of Governments  
San Luis Obispo County YMCA  
San Luis Sports Therapy  
Sierra Vista Regional Medical Center  
The Surfrider Foundation San Luis Obispo  
    County Chapter  
United Way of San Luis Obispo County  
University of California Cooperative Extension  
    of San Luis Obispo County  
Tolosa Children's Dental Center  
Transitions-Mental Health Association  
Twin Cities Community Hospital  
Plus unaffiliated community members, dentists,  
physicians and other health care professionals



SLO Health Counts is a collaborative focused on working together for a healthy San Luis Obispo County.

*Learn more at [www.SLOHealthCounts.org](http://www.SLOHealthCounts.org).*

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# WELCOME

I am pleased to present the first San Luis Obispo County Community Health Improvement Plan. This plan represents the vision and commitment of community stakeholders and partners who share a common goal: to ensure all San Luis Obispo County residents have the opportunity to live a healthy life.

This plan provides a broad, systematic approach to address priority issues over the next five years. The goals and objectives address traditional health and wellness issues as well as the social determinants of health affecting our community.

The power of this plan, I believe, is in the diverse partnerships behind the priority issues, goals and objectives. As you look through this document, I hope you will note the names of the lead organizations involved in each work plan. Their diverse perspectives can focus fresh attention on challenging issues and pool new expertise and resources toward their resolution. I'd also like to emphasize that there is room at the table and we welcome new partners: if you would like to get involved in the effort around any of these priorities, please contact me or the leads identified in this plan.

This plan represents a path toward measurable improvements for the health of our community. The process of developing this plan has also strengthened partnerships that will continue to support and sustain these efforts.

With these long-term partnerships in mind, I offer my sincere gratitude and appreciation to the many organizations and individuals who shaped this plan and are putting it in action. I look forward to our journey as we work together to increase the opportunities for a healthier life for all San Luis Obispo County residents.

To Health,



Penny Borenstein, MD, MPH  
Health Officer / Public Health Director  
County of San Luis Obispo

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# EXECUTIVE SUMMARY

## The Challenge and Opportunity

Health improvement is a true community effort. San Luis Obispo County is home to a vast and diverse range of dedicated individuals and organizations working to create a healthy and vibrant future for our community. The work ahead is also vast. Resources are limited. It is through working together that we can most effectively leverage resources and create the greatest collective impact.

## Collective Impact through Planning and Collaboration

For these reasons and more, the County of San Luis Obispo Public Health Department convened community partners to help develop a comprehensive and coordinated community health improvement plan. More than 95 community partners—including service providers, advocates and subject matter experts—came together to identify priorities and plans for action over the next five years. This plan represents the start of that collaborative effort and focuses on priorities identified by partners in each area.

## Measurable Improvement in Priority Areas

The plan is organized into eight priority areas. Each priority area includes a brief introduction to the topic, an overview of the partners involved in the planning process, and a work plan for each goal in the priority area. Work plans detail how the partners will achieve the goals and measure improvement over the next five years. In summary, the priorities, goals and objectives include:



### Access to Care

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#### Improve coordination of health care among service providers.

- Increase number of entities participating in the county's Health Information Exchange
- Re-establish Care Coordination Group
- Establish a recognized lead entity to coordinate consumer navigation services
- Ensure ongoing comprehensive and accurate referral information through 211

#### Increase the proportion of low-income children in SLO County with routine and adequate dental care.

- Increase the percentage of children on Denti-Cal who visit a dentist
- Increase the number of dentists incorporating Re-Think Your Drink and Tobacco Cessation campaigns into their practice
- Provide workforce development in oral health in underserved areas

#### Recruit and retain providers to the Central Coast.

- Increase number of health care provider training program slots
- Create at least two incentive programs to retain providers



### Social Determinants of Health

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#### Increase CalFresh enrollment to reduce hunger and improve health among SLO County residents.

- Increase enrollment of eligible individuals within SLO County

#### Improve access to affordable, attainable, safe and supportive housing.

- Support the development of very low income, low income, moderate and above moderate housing units throughout SLO County



## Maternal, Child & Adolescent Health

**Improve social and emotional supports for new mothers.**

- Increase Perinatal Mood and Anxiety Disorder screening for new mothers

**Implement a Help Me Grow™ (HMG) system in SLO County.**

- Garner participation to perform universal developmental screening by county pediatricians
- Launch a centralized information and referral hub for HMG



## Infectious Disease

**Reduce the rate of undiagnosed hepatitis C in SLO County Jail inmate population.**

- Increase testing and referrals of hepatitis C in jail population

**Reduce the rate of influenza in high-risk SLO County populations.**

- Increase the number of flu vaccines given to jail population

**Reduce the rate of syphilis in SLO County population.**

- Decrease the rate of new syphilis cases



## Chronic Disease & Health Behaviors

**Improve diets and increase physical activity in the environments where people eat, live, learn, work and play.**

- Reduce rates of adult obesity
- Achieve national goal for reducing childhood obesity

**Reduce rates of chronic disease among county residents.**

- Reduce prevalence of type 2 diabetes among adults in SLO County

**Reduce smoking initiation, tobacco use and exposure to secondhand smoke.**

- Increase the number of smoke-free outdoor spaces in the county
- Decrease the percentage of youth in the county who use e-cigarettes



## Injuries

**Reduce falls among seniors.**

- Decrease fall-related injuries among seniors
- Increase the provision of fall prevention materials at hospitals for seniors treated after falls

**Reduce vehicle-related injuries.**

- Reduce number of bicycle-involved motor vehicle collision injuries
- Reduce number of pedestrian-involved motor vehicle collision injuries
- Reduce the number of all motor vehicle collision injuries



## Social & Emotional Wellness

**Improve consistency of care across the continuum of social and emotional wellness services.**

- Adopt a countywide Social and Emotional Wellness Standards of Care policy

**Improve the social and emotional support network for teens in SLO County.**

- Reduce percentage of teens who report chronic sad or hopeless feelings



## Environment

**Increase awareness of Valley Fever within the agriculture community.**

- Provide outreach information to County AWM permittees

**Improve water quality at high priority beach / creek interfaces.**

- Collaborate with organizations for regular collection and sharing of surface water quality data
- Seek grant funding to determine causes of exceedances so they can be corrected

## Reporting Progress

More detail about activities and measurement is available in each section of this report. The Public Health Department will release a report on the progress toward these goals each year. For more information in the meantime or to lend your support to this effort, visit [www.SLOhealthcounts.org](http://www.SLOhealthcounts.org).

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# INTRODUCTION

The community health improvement plan for San Luis Obispo County will guide our community's strategic directions and priorities related to health over the coming five years. The plan describes how the Public Health Department and our partners will work together to improve our community's health. The plan sets forth what we will strive to achieve and provides a road map for how we plan to achieve it. It identifies priority health issues, establishes measurable objectives for improvement and coordinates resources to achieve those objectives.

This plan for San Luis Obispo County reflects the diversity, breadth, commitment and strength of our community's organizations focused on health and wellness.

The community health improvement plan is the second part of a two-part planning effort to improve the health of San Luis Obispo County residents. The first part of this effort involved developing the community health assessment. The assessment used surveys, focus groups and in-depth data analysis to paint a point-in-time picture of the health status of the county and highlight the important social, economic and health conditions that affect our community. This assessment informed the development of this plan.

The plan is organized into eight priority areas. Each priority area includes a brief introduction to the topic, the partners involved in the planning process and a work plan for each goal in the priority area. Work plans detail how teams will achieve the goals and measure improvement over the next five years.

## Vision & Values

A collaborative plan begins with a shared vision. Partners identified the following vision and values for achieving optimal health in San Luis Obispo County. These helped guide the selection of priorities in the planning process and the strategies chosen to address them.

### ***Vision***

A county where community members will take responsibility for improving and sustaining health through shared leadership, strategic planning, meaningful community engagement and coordinated action.

### ***Values***

- access
- prevention
- quality
- collaboration
- affordability
- equity

## Planning Process

This plan was developed in partnership with a wide variety of organizations throughout San Luis Obispo County. These partners include hospitals, community health centers, city and county agencies, local schools, universities, law enforcement agencies, foundations and other community-based organizations. Together these partners form SLO Health Counts, a collaborative focused on working together for a healthy San Luis Obispo County.

SLO Health Counts partners began their work on this plan with the development of a joint vision of health in San Luis Obispo County. Partners proposed meaningful vision and values statements and ultimately voted to determine their top choice. The collaborative also voted to assess key health indicators by level of importance to the community's health. Their ranked indicators formed the basis for the plan's eight priority areas. These priority areas are:

- Access to Care
- Social Determinants of Health
- Maternal, Child & Adolescent Health
- Infectious Disease
- Chronic Disease & Health Behaviors
- Injuries
- Social & Emotional Wellness
- Environment

Planning teams formed around the eight priority areas, using data, best practices and partner expertise to define goals, develop measurable objectives and outline effective strategies at an all-day planning session in February 2018. Ninety-five partners in attendance shared information on the strategies they currently use and their perceptions of gaps in services, available resources and ideas for better coordination among partner agencies.

The Public Health Department made relevant data available to teams, including a data kiosk with public health epidemiologist on-site to answer questions, access to the data website,

## Partner Ranking of Key Health Indicators

- 1 Access to Primary Care
- 2 Access to Mental Health Providers
- 3 Mental Illness
- 4 Uninsured/Insured
- 5 Income, Poverty and Employment
- 6 Housing
- 7 Social or Emotional Support
- 8 Substance Abuse
- 9 Access to Specialty Providers
- 10 Access to Dentists
- 11 Food Security
- 12 Obesity, Diet and Exercise
- 13 Suicides
- 14 Active Transportation
- 15 Violence and Crime
- 16 Diabetes
- 17 Educational Attainment
- 18 Water Quality
- 19 Water Availability
- 20 Pneumonia and Influenza
- 21 Heart Disease
- 22 Oral Health
- 23 Prenatal Care
- 24 Tobacco Use
- 25 Air Quality
- 26 Cancer
- 27 Hepatitis A/B/C
- 28 Veterans' Services
- 29 Pesticides and Toxic Substances
- 30 Childhood Immunizations
- 31 Stroke
- 32 Food-Borne Illnesses (e.g. E. coli, salmonella)
- 33 Infant Mortality
- 34 Asthma
- 35 Built Environment
- 36 HIV/AIDS
- 37 Bike and Pedestrian Accidents
- 38 COPD / Respiratory Disease
- 39 Falls
- 40 Teen Births
- 41 Sexually Transmitted Diseases
- 42 Valley Fever
- 43 Motor Vehicle Accidents
- 44 Vector-Borne Diseases (e.g. Zika, West Nile)



www.SLOHealthCounts.org, and the availability of several reports, including the Community Health Assessment and ACTION for Healthy Communities Vital Signs report.

Using this data, teams developed a comprehensive list of priority issues. They then considered whether issues were feasible, consequential and well-positioned for action. They assessed each issue on the basis of the following criteria:

- Impacts a large number or high percentage of people
- Consequences of not acting are severe
- Health disparities or inequities exist
- Good chance of improvement if addressed
- Community support exists, including political will
- Sufficient local resources are available or obtainable
- Ability to track progress or impact
- Existing momentum to build upon

Once the teams selected top priority issues, they outlined the objectives and activities they planned to undertake. While teams outlined many of their goals, objectives and activities during the full-day planning session, some teams convened several times after the initial meeting to further define or refine objectives and activities in their areas. Note that each section in this document includes a list of priority issues that were not ultimately chosen to include in the plan. These issues may factor into later planning discussions or be added as objectives in the future.

Their resulting plan for improvement is detailed in each of the eight following sections.

## Planning Context

Many local, state and national factors affect the community's ability to achieve optimal health. For this reason, the health improvement planning process was conducted with several considerations in mind. These included:

### ***National Priorities***

National priorities set by Healthy People 2020 serve as a blueprint for improving health and well-being across the country and thus served as a natural guide for this planning process. Healthy People 2020 provides a comprehensive set of 10-year, national goals and objectives for improving the health of all Americans. It was developed by members from the U.S. Department of Health and Human Services, the Institute of Medicine, the Secretary's Advisory Committee on National Health Promotion and Disease Prevention, and the National Prevention Strategy.

### ***State Priorities***

The collaborative also looked to California's health improvement planning framework, Let's Get Healthy California, which launched in 2012 with the purpose of developing a ten-year plan to make California the healthiest state in the nation. Today, it includes six goal areas and key indicators important to Californians' health. Let's Get Healthy California is led by a task force composed of California leaders in health and health care from both public and private sectors.

## ***Current Health Status***

This plan is part of a community health improvement planning process that began with a community health assessment, a comprehensive report of the state of health in San Luis Obispo County. The 2018 assessment examines the health status, health behaviors and social and environmental conditions affecting the health of all community members.

The assessment showed that while San Luis Obispo County ranks relatively well in many of the health indicators established by Healthy People 2020 and Let's Get Healthy California, portions of the county's population experience poorer health outcomes than the overall population. Additionally, the county ranks relatively low on several indicators, including rates of suicide, sexually transmitted diseases (STDs), binge drinking and substance use.

For these reasons, the community health assessment provided a helpful guide in identifying health priorities. The collaborative considered many of the local indicators included in the assessment, including the leading causes of death; the rates of chronic disease, communicable and vaccine-preventable disease; health behaviors (like tobacco use, physical inactivity and poor diet); and indicators related to the physical environment. The collaborative also considered the far-reaching impacts of social determinants of health, such as housing, violence, poverty, unemployment and limited access to healthy foods.

## ***Community Assets and Resources***

The collaborative also considered the local assets and resources currently available in the county that can be mobilized to address health. These included both physical and non-physical assets and resources. Physical assets include parks, open space, markets, clinics and other aspects of a community that can affect a person's opportunity to get and stay healthy. Non-physical assets include the skills of residents; the power of local associations, like service or professional groups; local institutions, like faith-based groups, local foundations, government institutions and institutions of higher learning; social capital; community resilience; and a strong business community.

Community assets and resources are especially important for populations with the greatest health disparities—those who are most vulnerable and are experiencing conditions that make it difficult to get and stay healthy. For a local asset inventory compiled by partners throughout the assessment process, visit [www.slohealthcounts.org/healthassets](http://www.slohealthcounts.org/healthassets).

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## NEXT STEPS

The collaborative will track strategies and metrics described in this plan on a quarterly or annual basis, depending on the activity. Each year, the collaborative will share a progress report at [www.SLOhealthcounts.org](http://www.SLOhealthcounts.org). The report will document the effectiveness of the proposed strategies, any changes in priorities or the strategies to address them, additional resources and community assets needed and any challenges that groups faced in achieving their selected goals.

For more information or to lend your support to this effort, visit [www.SLOhealthcounts.org](http://www.SLOhealthcounts.org).

# PRIORITY AREAS & GOALS

Access to Care	Improve coordination of health care among service providers.
	Recruit and retain providers to the Central Coast.
	Increase the proportion of low-income children in SLO County with routine and adequate dental care.
Social Determinants of Health	Increase CalFresh enrollment to reduce hunger and improve health among SLO County residents.
	Improve access to affordable, attainable, safe and supportive housing.
Maternal, Child & Adolescent Health	Improve social and emotional supports for new mothers.
	Implement a Help Me Grow™ (HMG) system in SLO County.
Infectious Disease	Reduce the rate of undiagnosed hepatitis C in SLO County Jail inmate population.
	Reduce the rate of influenza in high-risk SLO County populations.
	Reduce the rate of syphilis in SLO County population.
Chronic Disease & Health Behaviors	Improve diets and increase physical activity in the environments where people eat, live, learn, work and play.
	Reduce rates of chronic disease among county residents.
	Reduce smoking initiation, tobacco use and exposure to secondhand smoke.
Injuries	Reduce falls among seniors.
	Reduce vehicle-related injuries.
Social & Emotional Wellness	Improve consistency of care across the continuum of social and emotional wellness services.
	Improve the social and emotional support network for teens in SLO County.
Environment	Increase awareness within the agriculture community of the risks associated with Valley Fever and prevention/treatment needed.
	Improve water quality at high priority beach / creek interfaces.

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## ACCESS TO CARE



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# ACCESS TO CARE

Those who lack a dependable source of health care often have more difficulties obtaining care when needed, receive fewer preventive health services and are more likely to wait until their conditions worsen before seeking treatment. The issue of access to care came up at several points throughout this planning initiative: in focus groups, in partner surveys and in Dignity Health's 2016 Community Needs Assessment, which ranked access to health care as its number one significant community need. In discussing the issue, residents cited a lack of providers, lack of walk-in clinics and clinics with extended hours and lack of health insurance. For this reason, the access to care team identified recruiting and retaining providers to the Central Coast and improved coordination among existing service providers as priority issues. Access to dental care is also a well-known access issue, leading it to be chosen as the third priority.

Other issues discussed at the convening but ultimately not chosen include other incentives to recruit and retain providers (such as tax relief, housing, job assistance for spouses, practice management support, or loan reimbursement) and ways to support infrastructure (brick and mortar) development (including expansion of Federally Qualified Health Centers, Tolosa, Noor, Detox center and recuperative care centers).

The access to care team included the Alliance for Pharmaceutical Access; CenCal Health; Community Foundation of San Luis Obispo County; Community Health Centers of the Central Coast; County of San Luis Obispo Behavioral Health and Public Health Departments; Dignity Health Central Coast; Diringer and Associates; Health Commission; The Sage Associates; SLO Noor Foundation, Tenet Health; and Tolosa Children's Dental Center.

## Goals:

- Improve coordination of health care among service providers
- Recruit and retain providers to the Central Coast
- Increase the proportion of low-income children in San Luis Obispo County with routine and adequate dental care

*For more information on the data used to help create the goals/objectives in this priority area, see the [Community Health Assessment: Access to Health Services section](#) and [Appendix 4: Indicators at a Glance](#).*

# Access to Care



**Priority Issue:** Better coordination of care and services among service providers

Goal: Improve coordination of health care among service providers	Performance Measures	Lead	Data Source	Data Baseline	Improvement Target	Reporting Frequency
<b>Objective 1:</b> Increase number of hospitals, County divisions and physicians participating in the county's Health Information Exchange (HIE), by December 2019.	# of entities "live" in HIE system	Public Health, HIE Stakeholders Working Group	HIE System	3 hospitals 0 physicians 0 county agencies (as of 1/18)	5 hospitals by 12/18 15 physicians by 12/19 3 county divisions (BH, PH, EMS) by 12/19	Semi-Annual
Activity 1.1: Reach out to lead person/ organization to learn status to date of this initiative.	Communication logs	Public Health	HIE Manager	n/a	Communication completed	Annual
Activity 1.2: Brainstorm gaps in types of providers and names of provider groups that should participate (including assessing barriers to entry for providers).	# meetings held to discuss	Access to Care Group	HIE Manager	n/a	Two meetings held to discuss	Annual
Activity 1.3: Develop outreach plan to increase provider participation in HIE.	Outreach plan developed (Y/N)	Access to Care Group	HIE Database	n/a	Yes, outreach plan developed	Annual
<b>Objective 2:</b> Re-establish Care Coordination Group and hold at least quarterly meetings for remainder of 2018.	# of coordination meetings	CenCal, Public Health	Personal correspondence	n/a	2 meetings by 12/18	Annual
Activity 2.1: Garner commitment from high-level managers/administrators in key stakeholder organizations.	# participating CEO/COO/CFO/CMO/Deputies/County Managers	CenCal, Public Health	Committee Chair	n/a	6	Annual

Activity 2.2: Define charter, purpose and membership of group.	Charter, purpose and member list	CenCal, Public Health	Committee documents	n/a	Existence of charter, purpose, membership list	Annual
Activity 2.3: Schedule meetings with clear agenda.	# meetings scheduled	Committee Chair	Meeting minutes	0 meetings (as of 2/08/18)	2 meetings by 12/18	Annual
Activity 2.4: Create action plan to implement at least 1 care coordination project.	# of action plans	CenCal, County, CAPSLO, Hospitals, CHC, others	Committee documents	0 action plans	1 action plan	Annual
<b>Objective 3:</b> Establish a recognized lead entity to coordinate consumer navigation services currently in place through a variety of health care and human services throughout the county, by Dec. 2018.	Lead entity acknowledged (survey)	Public Health, CenCal, Center for Family Strengthening	Care Coordination Committee Chair	n/a	Lead entity named	Annual
Activity 3.1: Work through Care Coordination Group to establish lead entity in consumer navigation services.	Lead entity acknowledged (survey)	Public Health, CenCal, Center for Family Strengthening	Care Coordination Committee Chair	n/a	Lead entity named	Annual
Activity 3.2: Obtain sustainable funding for community-based health navigation program (e.g. <i>Promotores</i> ).	Amount of funding committed	Public Health, CenCal, Center for Family Strengthening	Lead Consumer Navigation entity	n/a	TBD	Annual
Activity 3.3: Train navigators in access to care linkages and referrals.	# navigators trained	Lead Consumer Navigation entity	Lead Consumer Navigation entity	n/a	5	---
<b>Objective 4:</b> Ensure ongoing comprehensive and accurate referral information for providers and consumers through 211.	# added/updated/verified records	United Way, Access to Care Team	United Way survey	3,766 records added, updated, or verified (2017)	4,000 records added, updated, or verified (2018)	Annual
Activity 4.1: Review and update access referral information on 211.	# added/updated/verified records	United Way, Access to Care Team	United Way survey	3,766 records added, updated, or verified (2017)	4,000 records added, updated, or verified (2018)	Annual



# Access to Care



**Priority Issue:** Shortage of primary care, specialty care, psychiatry and dental providers

Goal: Recruit and retain providers to the Central Coast	Performance Measures	Lead	Data Source	Data Baseline	Improvement Target	Reporting Frequency
<b>Objective 1:</b> Increase # of health care provider training program slots by 10%, by July 2020.	# of health care provider training program slots	Dignity Health, CHC	Personal correspondence	21 program slots (18 for Marian + 3 for CHC)	24 program slots	Annual
Activity 1.1: Retain Marian residency program.	# of health care provider training program slots	Dignity Health	Personal correspondence	18 program slots	18 program slots	Annual
Activity 1.2: Apply to ACGME for additional program slots in Marian residency program.	# of health care provider training program slots	Dignity Health	Personal correspondence	18 program slots	20 program slots	Annual
Activity 1.3: Retain/expand CHC Physician Assistant teaching program.	# of physician assistant training program slots	CHC	Personal correspondence	3 program slots	4 program slots	Annual
Activity 1.4: Investigate development of a (clinic-based) Teaching Health Center residency program in SLO County.	# of clinic-based residency program slots	CHC	Personal correspondence	0 residency programs	1 residency program	Annual
Activity 1.5: Investigate creation of a Dental Residency Program.	# of dental residency programs	Tolosa Dental	Personal correspondence	0 dental residency programs	1 dental residency program	Annual
<b>Objective 2:</b> Create at least two incentive programs to retain providers, by December 2019.	# of incentive programs	SLO Medical Association, Tenet, Dignity, CHC	Personal correspondence	0 incentive programs	2 incentive programs	Annual
Activity 2.1: Create a local recognition (awards) program for providers.	# of recognition programs	SLO Medical Association, Tenet, Dignity, CHC	Personal correspondence	0 recognition programs	1 recognition program	Annual

Activity 2.2: Create tools/resources to assist with practice management.	# of practice management toolkits	SLO Medical Association, Tenet, Dignity, CHC	Personal correspondence	0 practice management toolkits	1 practice management toolkit	Annual
Activity 2.3: Create "welcome wagon" program for new providers.	# practicing providers in County	SLO Medical Association, Tenet, Dignity, CHC	Personal correspondence	n/a	Program created	Annual
Activity 2.4: Create incentives for Registered Dental Hygienist/Registered Dental Assistant students to receive certification.	# RDH/RDAs in SLO County	SLO Public Health, Oral Health Program, CHC	Personal correspondence MOUs with Alan Hancock Community College, Community Foundation	n/a	Program created	Annual

# Access to Care



**Priority Issue:** Too many children in SLO County fail to receive routine dental care

<b>Goal:</b> Increase the proportion of low-income children in SLO County with routine and adequate dental care	<b>Performance Measure</b>	<b>Lead</b>	<b>Data Source</b>	<b>Data Baseline</b>	<b>Improvement Target</b>	<b>Reporting Frequency</b>
<b>Objective 1:</b> Increase the percentage of children on Denti-Cal who visit a dentist by 10 percentage points, by June 2022.	% Denti-Cal children who receive at least 1 visit	Oral Health Program / Coalition	State Medi-Cal, Denti-Cal database	24% (FY 14-15)	34% (2022)	Annual
Activity 1.1: Increase Denti-Cal provider participation by conducting outreach to private dentists.	# new Denti-Cal dentists	Oral Health Program Manager & Coalition	State Medi-Cal Denti-Cal database	4 active Denti-Cal providers (2017)	6 active Denti-Cal providers (2020)	Annual
Activity 1.2: Perform screenings at low-income housing projects and case manage appointments for children without a source of dental care.	# clinics / year	Oral Health Program Manager & Coalition	Oral Health Program	0	5-8 clinics (per year)	Annual
Activity 1.3: Provide Virtual Dental Home services in schools and have dentists review cases and make treatment recommendations as needed.	# schools visited; # children seen	Private dentist(s); Oral Health Coalition; Tolosa	Private dentist(s); Tolosa database	0	6 schools 1,000 students (Private dentist(s) + Tolosa) (2022)	Annual
Activity 1.4: Provide outreach at schools to implement a dental sealant program at school sites.	# of schools	Oral Health Program Manager & Coalition	OHPM Data	0 schools	3 schools (2022)	Annual

Activity 1.5: Provide outreach at schools to provide fluoride varnish at school sites.	# of schools	Oral Health Program Manager & Coalition	OHPM Data	7 schools	3 schools (2022)	Annual
<b>Objective 2:</b> By June 2022, increase the number of dentists incorporating Re-Think Your Drink and Tobacco Cessation campaigns into their practice.	# of dental practices	Oral Health Program / Coalition	OHPM Data	0	8 dental practices (2022)	Annual
Activity 1.1: Outreach to private dentists to educate them on Re-Think Your Drink and Tobacco Cessation campaigns so that they will educate patients on common risk factors and protective factors for oral and other chronic diseases related from tobacco use and sugar.	# of dental practices incorporating cessation referrals and RYD education to clients	Oral Health Program Manager & Coalition	OHPM Data	0	8 dental practices (2022)	Annual
<b>Objective 3:</b> Expand oral health care delivery in the region by promoting workforce development in underserved areas, by June 2022.	# of dental practice staff helped to achieve higher licensure	Oral Health Program Manager & Coalition	OHPM Data	0	8 per year	Annual
Activity 3.1: Provide scholarships to Registered Dental Assistants (RDA) to boost dental workforce.	# scholarships awarded	Oral Health Program Manager & Coalition	OHPM Data	0	6 scholarships (per year)	Annual
Activity 3.2: Provide scholarships to Registered Dental Hygienists in Alternative Practice (RDHAP) students to boost dental workforce.	# scholarships awarded	Oral Health Program Manager & Coalition	OHPM Data	0	2 scholarships (per year)	Annual

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# SOCIAL DETERMINANTS OF HEALTH



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# SOCIAL DETERMINANTS OF HEALTH

The social determinants of health are the conditions in which people are born, grow, live, work and age that affect health, functioning and quality of life. These conditions include access to neighborhood parks, grocery stores, good schools, jobs, safe and affordable housing and more.

In San Luis Obispo County, two key social determinants of health are housing and food security. Access to quality, safe and affordable housing is one of the most powerful predictors of health. Research has linked housing instability to elevated stress levels, depression and an increase in certain chronic health conditions. Conversely, stable and affordable housing enables low and moderate-income families to spend more on basic necessities, like nutritious food, health care and reliable child care.

Access to affordable, healthy food is critical for health and well-being. Food insecurity, or not having reliable access to a sufficient quantity of affordable, nutritious food, can contribute to higher levels of obesity and other diet-related diseases. For these reasons, the social determinants of health team chose to focus on housing and food access as priority issues. Other important issues discussed at the convening but ultimately not chosen include adverse childhood experiences (ACEs) and efforts to influence the built environment and walkability in the county.

The social determinants of health team included the 5 Cities Homeless Coalition; City of San Luis Obispo Planning Commission; Community Action Partnership of SLO County; HomeShare SLO; Hospice of San Luis Obispo County; Health Commission; Peoples' Self-Help Housing; San Luis Obispo Council of Governments (SLOCOG); and the County of San Luis Obispo Department of Social Services, Public Libraries and Public Health Department. Other partners who will be involved in this priority area include SLO Chamber of Commerce; Adult Services Policy Council; Commission on Aging; The Housing Authority of the City of San Luis Obispo; and the Economic Vitality Corporation.

## Goals:

- Increase CalFresh enrollment to reduce hunger and improve health among San Luis Obispo County residents
- Improve access to affordable, attainable, safe, supportive housing

*For more information on the data used to help create the goals/objectives in this priority area, see the [Community Health Assessment: Social Determinants of Health section and Appendix 4: Indicators at a Glance](#)*

# Social Determinants of Health



**Priority Issue:** Limited access to healthy food for low income individuals

<b>Goal:</b> Increase CalFresh enrollment to reduce hunger and improve health among SLO County residents	<b>Performance Measures</b>	<b>Lead</b>	<b>Data Source</b>	<b>Data Baseline</b>	<b>Improvement Target</b>	<b>Reporting Frequency</b>
<b>Objective 1:</b> Increase enrollment of eligible individuals within SLO County to 85%, by June 30, 2022.	CalFresh Enrollment	CalFresh Alliance	CDSS CalFresh Data	41% (CA 70% US 83%)	85%	Annual
Activity 1.1: Integrate text and email notifications for applicants to give notice of upcoming renewals and to reduce “churn” (disruption of services).	Process documentation	DSS	DSS correspondence	n/a	1 updated procedure	Annual
Activity 1.2: Reach out to individuals on Medi-Cal who are not enrolled in CalFresh to encourage their enrollment.	% of individuals on Medi-Cal who are also enrolled in CalFresh	DSS	DSS correspondence	35% (2018)	45% (2022)	Annual
Activity 1.3: Review “My Benefits CalWin” data on approvals and denials to troubleshoot barriers to online application process.	Assessment	DSS	DSS correspondence	0	1 assessment (2022)	Annual
Activity 1.4: Continue CalFresh Outreach grant to increase student enrollment in CalFresh at Cuesta and Cal Poly.	# of students enrolled	Cal Poly Health Center	Cal Poly correspondence	0	Enroll at least 150 students per year (2022)	Annual
Activity 1.5: Work with community-based organizations to integrate GetCalFresh.org as an alternate application method.	Outreach to community partners	DSS	DSS correspondence	0	7 community partners (2022)	Annual
Activity 1.6: Work with local school districts to promote CalFresh.	Enrollment form	DSS	DSS correspondence	0	3 school districts (2022)	Annual

# Social Determinants of Health



**Priority Issue:** Lack of affordable, attainable, safe, supportive housing with proximate access to employment, services and opportunities for recreation

<b>Goal:</b> Improve access to affordable, attainable, safe and supportive housing	<b>Performance Measures</b>	<b>Lead</b>	<b>Data Source</b>	<b>Data Baseline</b>	<b>Improvement Target</b>	<b>Reporting Frequency</b>
<p><b>Objective 1:</b> Support the development of very low income, low income, moderate and above moderate housing units throughout SLO County, with a goal of staying on track annually with regional housing targets (RHNA).</p>	<p># of housing units permitted annually in SLO County by RHNA income category</p>	<p>Healthy Communities Workgroup</p>	<p>CA Dept of Housing and Community Development's <u>Regional Housing Needs Allocation (RHNA)</u>  (from jurisdictions' Annual Progress Reports to HCD)</p>	<p>V Low 23.7% Low 29.7% Mod 47.1% A Mod 80.7%  (Dec 2016; 54.5% through 5.5-year RHNA cycle)</p>	<p>V Low 100% Low 100% Mod 100% A Mod 100%  (by June 30, 2019)</p>	<p>Annual  (data collected from jurisdictions' Annual Progress Reports to HCD)</p>
<p>Activity 1.1: Speak at public comment (e.g. during city council, Board of Supervisor meetings, etc.) to encourage elected officials to support new housing, modify existing development standards and expand housing options for the region.</p>	<p># of times someone spoke</p>	<p>Healthy Communities Workgroup</p>	<p>Tracking sheet</p>	<p>0x per year</p>	<p>5-8x per year</p>	<p>Annual</p>
<p>Activity 1.2: Reach out to, or meet one-on-one, with elected officials in all 8 jurisdictions (7 cities plus County) (and extend invitation to attend Healthy Communities workgroup).</p>	<p># of jurisdictions contacted</p>	<p>Healthy Communities Workgroup</p>	<p>Tracking sheet</p>	<p>0x per year</p>	<p>2x per year</p>	<p>Annual</p>
<p>Activity 1.3: Speak at service clubs (Rotary, etc.) and community groups to develop community support on housing issues and to introduce alternative housing solution (home share, etc.).</p>	<p># of talks given per year</p>	<p>Healthy Communities Workgroup</p>	<p>Tracking sheet</p>	<p>0x per year</p>	<p>5x per year</p>	<p>Annual</p>



Activity 1.4: Advocate with local employers to support housing development and augment rental housing supply to help recruit and retain employees.	# of employers contacted	Healthy Communities Workgroup	Tracking sheet	0x per year	5x per year	Annual
Activity 1.5: Develop a fact sheet on the impacts of housing stability on health and gather other educational materials that support YIMBY.	Fact Sheet	Healthy Communities workgroup	---	0 fact sheets	1 fact sheet (reviewed annually)	Annual
Activity 1.6: Sponsor an event on housing and health for the public, community partners and elected officials during Healthy Communities month.	Event	Healthy Communities workgroup	---	0 events	1 event (by Oct 2018)	Once
Activity 1.7: Submit letters of support when new housing developments come before government bodies (planning commissions, city council meetings etc.)	# of letters submitted	Healthy Communities workgroup	Workgroup records	0x per year	5x per year	Annual
Activity 1.8: Utilize the Healthy Communities Project Checklist for assessing housing-related development projects from a healthy community's perspective.	# of project reviews	Healthy Communities workgroup	Workgroup records	0 project reviews	5 project reviews	Annual
Activity 1.9: Participate in housing needs methodology discussion with SLOCOG before next cycle's RHNA allocation determination.	Participation records	Healthy Communities Workgroup	Participation records	0 discussions	1 discussion	Once

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# MATERNAL, CHILD & ADOLESCENT HEALTH



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# MATERNAL, CHILD & ADOLESCENT HEALTH

Beginning life as a healthy baby provides the best opportunity for lifelong health. For this reason, health within the first years of life is closely analyzed. This includes analyzing such factors as birthweight, breastfeeding, prenatal care and more.

Early identification of developmental or learning delays is critical for diagnosing problems and providing early therapeutic interventions. This not only takes the work of health care providers and involved parents, but also the work of caregivers, child care providers and educators. With the right supports in place, early intervention can shape a child's long-term health. For this reason, the maternal, child and adolescent health team identified developmental screening as a priority issue.

Healthy childhood development also depends on the health of the parents. Postpartum depression and anxiety, which 50-80 percent of women experience in some form following birth, can negatively affect childhood development, as women who suffer from postpartum depression are less likely to play with, tell stories to, or read books to their children. Addressing this early with increased screening and providing parents with the right supports can positively affect children and create environments that support lasting health. For this reason, the team identified social and emotional supports for new mothers as another priority.

Other issues discussed at the convening but ultimately not selected include child abuse and neglect; late start to prenatal care; teen births and unintentional pregnancy; safe, affordable child care; child social-emotional health; equitable access to services; babies who suffer from neonatal abstinence syndrome; and sudden infant death syndrome (SIDS).

The maternal, child and adolescent health team included Cal Poly Center for Health Research; Center for Family Strengthening & The LINK Family Resource Center; Community Action Partnership of San Luis Obispo County; Community Health Centers of the Central Coast; County of San Luis Obispo Public Health Department; First 5 SLO County; Planned Parenthood of California Central Coast; and Pregnancy and Parenting Support of San Luis Obispo County.

## Goals:

- Improve social and emotional supports for new mothers
- Implement a Help Me Grow™ (HMG) system in San Luis Obispo County

*For more information on the data used to help create the goals/objectives in this priority area, see the [Community Health Assessment: Maternal, Child and Adolescent Health section](#) and [Appendix 4: Indicators at a Glance](#).*

# Maternal, Child & Adolescent Health



**Priority Issue:** Lack of social and emotional supports for new mothers

Goal: Improve social and emotional supports for new mothers	Performance Measure	Lead	Data Source	Data Baseline	Improvement Target	Reporting Frequency
<b>Objective 1:</b> Increase the proportion of new mothers who are screened for Perinatal Mood and Anxiety Disorder (PMAD) to 50% by CY 2020.	% new mothers screened for PMAD	MCAH Coordinator	New database	N/A	50% (2020)	Annual
Activity 1.1: Develop data collection, tracking and reporting system.	Database	MCAH Coordinator	MCAH	0	1 database launched (Dec 2018)	Quarterly
Activity 1.2: Outreach to OB-GYN offices to implement PMAD screening using validated tool at least once during perinatal period.	# practices that adopt screening	MCAH staff	MCAH	0	5 OB practices (2020)	Quarterly
Activity 1.3: Train hospital labor/delivery staff, community-based providers, hotline volunteers on use of screening tools.	# trained	MCAH staff	MCAH	0	100 (2020)	Quarterly
Activity 1.4: Provide resources (webpage, information cards) for pregnant and new moms.	Webpage complete # cards distributed	MCAH staff/PMAD project team	MCAH	0	1 webpage launched Info cards printed (2020)	Quarterly

# Maternal, Child & Adolescent Health



**Priority Issue:** Young children in SLO County lack a coordinated system of screening, problem identification and referral to treatment for developmental and socio-emotional disabilities or deficits

Goal: Implement a Help Me Grow™ (HMG) system in SLO County	Performance Measure	Lead	Data Source	Data Baseline	Improvement Target	Reporting Frequency
<p><b>Objective 1:</b> Garner participation of the five largest pediatric practices in the county to perform universal developmental screening using standardized tools (e.g., ASQ, PH9, M-CHAT, Edinburgh, ACE Score) by June 2022.</p>	<p># pediatric practices conducting universal developmental screening using standardized tools</p>	<p>First 5 SLO</p>	<p>First 5 Staff</p>	<p>Unknown; possibly 0</p>	<p>5 practices (2022)</p>	<p>Annual</p>
<p>Activity 1.1: Conduct and invite pediatric providers to continuing medical education meetings about HMG, available developmental screening tools and how to incorporate into a busy practice.</p>	<p>Events held</p>	<p>First 5 SLO</p>	<p>First 5 Staff</p>	<p>n/a</p>	<p>1 event/year</p>	<p>Annual</p>
<p>Activity 1.2: Work with interested practices on incorporating screenings into EHR systems and office work flow practice.</p>	<p># clinics/practices worked with</p>	<p>Community pediatric practices CenCal Health</p>	<p>Peds Practices</p>	<p>0</p>	<p>8 clinic/practice sites (2022)</p>	<p>Annual</p>
<p>Activity 1.3: Conduct best practice research looking at most successful mechanisms for completing screening on young children (e.g., at home by parent, at early childcare centers with educator assist, at medical office with health educator/support staff assist).</p>	<p>Completion of research project</p>	<p>First 5 SLO</p>	<p>MHSA</p>	<p>n/a</p>	<p>Project completed (2020)</p>	<p>Annual</p>

<b>Objective 2:</b> Launch a centralized information and referral hub for HMG by June 2020.	HMG information and referral hub operational	First 5 SLO, Hub Organization (TBN)	Phone # Website URL	n/a	Hub launched (2020)	Annual
Activity 2.1: Work with community organizations to identify a willing, able and sustainable organization to operate a HMG centralized hub.	Hub organization	First 5 SLO	First 5 Staff	n/a	Selection of Hub organization (2019)	Annual
Activity 2.2: Identify funding stream(s) to maintain a staffed hub and written (stand-alone or on-line) informational material.	Amount of funding	First 5 SLO	First 5 Staff	n/a	\$250k annual funding secured (2019)	Annual
Activity 2.3: Build a new, or augment an existing, website for use by the public to access HMG information and referral resources, to exist independently of and in coordination with a staffed resource.	Existence of website	Hub Organization (TBD)	Hub Org. Staff	n/a	Website live (2020)	Annual
Activity 2.4: Establish a public awareness campaign to educate families and service providers on early developmental milestones and referral/intervention resources.	Educational campaign	First 5 SLO	First 5 Staff	n/a	1 educational campaign conducted	Annual
Activity 2.5: Identify resource gaps for San Luis Obispo County.	Analysis conducted	Hub Organization (TBD)	Hub Org. Staff	0 (2018)	1 gap analysis (2020)	Annual
Activity 2.6: Maintain a database to track countywide screening, referral and intervention numbers.	Database implementation	Hub Organization (TBD)	Hub Org. Staff	n/a	Database launched	Annual

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# INFECTIOUS DISEASE



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# INFECTIOUS DISEASE

Infectious disease may be an unavoidable fact of life, but many strategies are available to help us protect ourselves from infection and to treat a disease once it has developed. Infectious, or communicable, diseases are caused by organisms, such as bacteria, viruses, fungi, or parasites and can be transmitted from human to human, from vectors to humans (e.g., infected ticks or mosquitoes) and from contaminated food or water to humans. Today's infectious disease challenges are broader and more complex than ever, from increased opportunities for emergence and spread of infectious diseases in our globalized world to the growing concern over antimicrobial resistance.

Endemic, new and resurgent infectious diseases cause immense suffering and death and impose enormous financial burdens on society. Substantial progress has been made in reducing the burden of vaccine-preventable diseases, yet continued cases and outbreaks of these diseases persist, driven by various contributing factors. Furthermore, endemic diseases such as chronic hepatitis, HIV and other sexually transmitted infections affect millions of individuals and widen health disparities.

Improving awareness, screening, diagnosis and prevention of these illnesses can have long-term impacts on health and well-being, reducing mortality rates overall and improving quality of life for county residents.

The infectious disease team included Cal Poly Biological Sciences Department; Community Health Centers of the Central Coast; County of San Luis Obispo Departments of Public Health and Environmental Health; the Health Commission; Long Term Care Ombudsman Services of San Luis Obispo County; Planned Parenthood California Central Coast; and San Luis Obispo Syringe Exchange Program.

## Goals:

- Reduce the rate of undiagnosed hepatitis C in San Luis Obispo County jail inmate population
- Reduce the rate of influenza in high-risk SLO County populations
- Reduce the rate of syphilis in San Luis Obispo County population

*For more information on the data used to help create the goals/objectives in this priority area, see the [Community Health Assessment: Infectious Disease section and Appendix 4: Indicators at a Glance.](#)*



# Infectious Disease



**Priority Issue:** Lack of hepatitis C screening among high-risk jail population

Goal: Reduce the rate of undiagnosed hepatitis C in SLO County jail inmate population	Performance Measure	Lead	Data Source	Data Baseline	Improvement Target	Reporting Frequency
<b>Objective 1:</b> Increase testing and referrals of hepatitis C in jail population by 60%, by Dec. 2020.	# of jail population screened	ASN, Public Health, Jail	Jail records	0	100 (2020)	Annual
Activity 1.1: Create screening algorithm for determining high-risk patients to test.	# of algorithms	ASN, Public Health, Jail	---	0	1 screening algorithm	Annual
Activity 1.2: Create process for referrals to care at ASN.	# of processes	ASN, Public Health, Jail	---	0	1 referral process	Annual
Activity 1.3: Create policy/procedure for who and how to treat patients.	# of policies	ASN, Public Health, Jail	---	0	1 policy	Annual
Activity 1.4: Research affordable testing and treatment options (grants, reimbursement strategies, insurance).	# of lists	ASN, Public Health, Jail	---	0	1 list of funding options	Annual
Activity 1.5: Conduct screening of high-risk inmates.	# of jail population screened	ASN, Public Health, Jail	---	0	100 (2020)	Annual

# Infectious Disease



**Priority Issue:** Influenza severity on the rise

Goal: Reduce the rate of influenza in high-risk SLO County populations	Performance Measure	Lead	Data Source	Data Baseline	Improvement Target	Reporting Frequency
<b>Objective 1:</b> Increase the number of flu vaccines given to jail population by 5%, by Dec. 2020.	# of jail population vaccinated	Jail	Jail records	185 (2017)	195 (2020)	Annual
Activity 1.1: Analyze target audiences most in need of flu messaging/intervention (e.g., jail population, health care personnel, long term care residents, preschool staff).	Analysis of target audience groups	Jail, Public Health	---	0	1 analysis of target audience groups	Annual
Activity 1.2: Determine <u>best practices</u> for reaching high-priority target audience.	Report of best practices	Jail, Public Health	---	0	1 report	Annual
Activity 1.2: Create tailored messaging or strategy for target audience.	# of campaigns	Jail, Public Health	---	0	1 campaign	Annual

# Infectious Disease



**Priority Issue:** Increasing syphilis rates in SLO County

Goal: Reduce the rate of syphilis in SLO County population	Performance Measure	Lead	Data Source	Data Baseline	Improvement Target	Reporting Frequency
<b>Objective 1:</b> Decrease the rate of new syphilis cases/100,000 population to <3.0, by 2020.	Newly diagnosed cases/100k pop	Public Health	<a href="#">State STD Surveillance Report</a>	3.6/100k pop. (2015)	3.0/100k pop. (2020)	Annual
Activity 1.1: Encourage/assist universities, OB/GYN providers and others to offer routine, opt-out testing.	# clinical settings adopting routine opt-out testing	Public Health	---	0	5 providers	Annual
Activity 1.2: Increase patient education about the importance of testing and treatment.	# of campaigns	Public Health	---	0	1 campaign	Annual

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# CHRONIC DISEASE & HEALTH BEHAVIORS



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# CHRONIC DISEASE & HEALTH BEHAVIORS

Nationally, chronic diseases and conditions—such as cancer, diabetes, cardiovascular diseases like heart attacks and stroke and respiratory diseases such as COPD and asthma—are among the most common, costly and preventable of all health problems.

This is true in San Luis Obispo County as well, with cancer, heart disease and stroke accounting for a little over half of countywide deaths. According to the Centers for Disease Control and Prevention, four health behaviors are responsible for much of the illness and death related to these diseases: lack of physical activity, poor nutrition, tobacco use and excessive alcohol consumption. For these reasons, the chronic disease and health behaviors team identified healthy diets, physical activity and tobacco use as top priorities.

Other issues discussed at the convening but ultimately not chosen include sugar-sweetened beverages; fast food density; promotion of transit-oriented development; agricultural education; nutrition and school garden education; age-friendly health systems (improved care for an aging population); and active transportation and walk to school days.

The chronic disease and health behaviors team included the Central Coast chapter of the American Cancer Society; County of San Luis Obispo Public Health Department; Dignity Health Central Coast; Food Bank Coalition of San Luis Obispo; Health Commission; Leadership SLO; Oral Health Coalition; San Luis Obispo County YMCA; San Luis Sports Therapy; and University of California Cooperative Extension of San Luis Obispo County.

## Goals:

- Improve diets and increase physical activity in the environments where people eat, live, learn, work, and play
- Reduce rates of chronic disease among county residents
- Reduce smoking initiation, tobacco use, and exposure to secondhand smoke

*For more information on the data used to help create the goals/objectives in this priority area, see the [Community Health Assessment: Chronic Disease, Health Behaviors, and Access to Health Services](#) sections and [Appendix 4: Indicators at a Glance](#).*

# Chronic Disease & Health Behaviors



**Priority Issue:** Unhealthy weights among children and adults

<b>Goal:</b> Improve diets and increase physical activity in the environments where people eat, live, learn, work and play	<b>Performance Measures</b>	<b>Lead</b>	<b>Data Source</b>	<b>Data Baseline</b>	<b>Improvement Target</b>	<b>Reporting Frequency</b>
<b>Objective 1:</b> Reduce rates of adult obesity by 2% (to 18.1%), by Dec. 2022.	% of adults who are obese	Public Health / HEAL SLO / hospitals	CHIS	20.1% adult obesity (2014-2016)	< 18.1% adult obesity (2022)	Annual
Activity 1.1: Create communications plan between stakeholders to share targeted, coordinated messaging around healthy eating and active living.	# of communications plans	Public Health / HEAL SLO / hospitals	---	0 Communication plans	1 Communication plan	Annual
Activity 1.2: Create tool kit for educating policy/decision makers about healthy eating and active living issues (e.g. health element in general plans, sugar sweetened beverage policy, zoning for fast food, etc.).	# of tool kits	Public Health / HEAL SLO / hospitals	---	0 tool kits	1 tool kit	Annual
Activity 1.3: Educate community groups about upcoming healthy eating active living related topics to enhance capacity for providing public comment on local policies.	# of community groups	UCCE / HEAL SLO / Public Health	---	0 groups	6 groups	Annual
Activity 1.4: Increase the review of proposed land use projects, ordinance and general plan amendments from a healthy community's perspective.	# of project reviews	Healthy Communities workgroup	Workgroup records	0 project reviews	5 project reviews	Annual
Activity 1.5: Identify priority communities with higher rates of obesity.	# of target communities	Public Health / HEAL SLO / hospitals	---	0 target community lists	1 target community list	Annual

<b>Objective 2:</b> Achieve national goal (Healthy People 2020) metric of <14.5% for childhood obesity, by Dec. 2022.	% of children and adolescents who are obese	Public Health / HEAL SLO / hospitals	<u>CDE / NHANES</u> Percentage of 7th graders who scored in the Physical Fitness test category 'Needs Improvement - Health Risk.'	17.0% child obesity (2015-2016)	<14.5% child obesity (2022)	Annual
Activity 2.1: Support the establishment of school wellness councils at school sites to improve, enhance and implement districts' school wellness policies.	# of schools with active school wellness councils	School districts/ UCCE / Public Health / HEAL SLO	---	4 schools	12 schools	Annual
Activity 2.2: Partner with school districts to implement school garden programs.	# of schools adopting school garden programs	One Cool Earth/UCCE/PHD/COE/HEAL SLO	---	18 schools	43 schools	Annual
Activity 2.3: Conduct nutrition and exercise educational programs during school and after school.	# educational sessions held	YMCA / UCCE/ Public Health / HEAL SLO	---	25 sessions/year	50 sessions/year	Annual

# Chronic Disease & Health Behaviors



**Priority Issue:** High rates of chronic disease

Goal: Reduce rates of chronic disease among county residents	Performance Measures	Lead Person/ Organization	Data Source	Data Baseline	Improvement Target	Reporting Frequency
<b>Objective 1:</b> Reduce prevalence of type 2 diabetes among adults in SLO County by 1%, by 2022.	% of adults with diabetes	FMMC/AGCH	CHIS	5.6% of adults with diabetes (2014-2016)	4.6% (2022)	Annually
Activity 1.1: Increase number of participants in chronic disease self-management program (CDSMP) and Diabetes Empowerment Education Program (DEEP) workshops, aimed at reducing subsequent ER visits.	# workshop attendees engaged annually	FMMC/AGCH	FMMC/AGCH database	46 workshop attendees/year (2017)	65 workshop attendees/year (2022)	Annually
Activity 1.2: Partner with physician champions to support hard referrals to chronic disease self-management workshops.	# physicians who will champion the program	FMMC/AGCH	FMMC/AGCH database	0 (2017)	3 physicians/ groups (2022)	Annually
Activity 1.3: Partner with health care providers to make hard referrals to chronic disease self-management workshops.	# health care providers participating / making referrals	FMMC/AGCH	FMMC/AGCH database	0 (2017)	1 health care provider (2022)	Quarterly
Activity 1.4: Partner with county agencies to promote chronic disease workshops and share fliers on social media/website to their clients.	# times shared	UCCE, Public Health, HEAL SLO	Personal correspondence	0 (2017)	3 shares/year (2022)	Quarterly



# Chronic Disease & Health Behaviors



**Priority Issue:** Tobacco use among adults and adolescents in San Luis Obispo County

<b>Goal:</b> Reduce smoking initiation, tobacco use and exposure to secondhand smoke	<b>Performance Measures</b>	<b>Lead Person/ Organization</b>	<b>Data Source</b>	<b>Data Baseline</b>	<b>Improvement Target</b>	<b>Reporting Frequency</b>
<b>Objective 1:</b> Increase the number of smoke-free outdoor spaces in the county by 25%, by June 30, 2021.	# of smoke free outdoor "places" (dining, entryways, public events, recreation areas, service areas, sidewalks, worksites) in the county	Tobacco Coalition	American Lung Assoc. "State of Tobacco Control: SLO County"	25 (2017)	31 (2021)	Annual
Activity 1.1: Provide trainings for a minimum of 10-20 youth (e.g. local leadership classes, Friday Night Live chapters) to increase leadership, capacity and skills to address tobacco control issues in their community.	# of trainings with local youth	Tobacco Coalition, Behavioral Health	Activity Log	2 (2017)	3/year	Annual
Activity 1.2: Conduct presentations or public comment with youth leaders to city council in targeted jurisdictions to educate local policymakers about the public health benefits of creating and strengthening smoke-free outdoor spaces.	# of presentations to city council	Tobacco Coalition	Activity Log	2 (2017)	3/year	Annual
Activity 1.3: Place paid advertisements in local media outlets to educate the public on secondhand smoke and the importance of comprehensive local policies.	# of paid advertisements	Tobacco Coalition	Activity Log	---	4/year	Annual

<p><b>Objective 2:</b> Decrease the percent of youth in the county who use e-cigarettes by 30%, by June 30, 2021.</p>	<p>% of Grade 11 students that have used electronic cigarettes or other vaping devices in the past 30 days</p>	<p>Tobacco Coalition</p>	<p>California Healthy Kids Survey</p>	<p>19% (2013-2014)</p>	<p>12%</p>	<p>Bi-annual</p>
<p>Activity 2.1: Develop and distribute educational packets per year in targeted jurisdictions designed to educate policymakers and other key stakeholders on the harmful effects of e-cigarettes, youth access to tobacco and/or tobacco industry marketing.</p>	<p># of education packets distributed</p>	<p>Tobacco Coalition</p>	<p>Activity Log</p>	<p>---</p>	<p>20/year</p>	<p>Annual</p>
<p>Activity 2.2: Conduct onsite inspections of tobacco retailers in targeted jurisdictions to assess illegal sales to young adults, ages 18-20 and compliance with other local and state retail laws (with a focus on flavored tobacco).</p>	<p># of stores inspected</p>	<p>Tobacco Coalition, local law enforcement</p>	<p>Young Adult Tobacco Purchase Survey</p>	<p>---</p>	<p>50/year</p>	<p>Annual</p>
<p>Activity 2.3: Conduct presentations to community organizations involved in alcohol and drug prevention, other public health programs, local law enforcement and professional organizations (30-45 minute presentations will focus on the harmful effects of e-cigarettes, youth access to tobacco and/or tobacco industry marketing).</p>	<p># of presentations to community organizations</p>	<p>Tobacco Coalition</p>	<p>Activity Log</p>	<p>---</p>	<p>6/year</p>	<p>Annual</p>

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# INJURIES



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# INJURIES

Each year, millions of people across the country are injured. Injuries can result from a variety of causes, intentional or unintentional, including motor vehicle accidents, poisonings, falls, bike accidents, fires, near-drownings, firearms and other causes. People with serious injuries often face life-long mental, physical and financial problems that can affect quality of life and economic stability.

In San Luis Obispo County, the leading cause of non-fatal hospitalization from injuries in the county is falls, followed by motor vehicle accidents. For this reason, these two priorities were chosen for this planning effort.

Other issues discussed at the convening but ultimately not chosen included sports-related injuries and concussions.

The injuries team included the Commission on Aging; Community Foundation of SLO County; County Office of Education; County of San Luis Obispo Emergency Medical Services Authority and Public Health Department; Dignity Health Central Coast; HEAL SLO; Healthy Communities workgroup; Injury Prevention Coalition; RISE; San Luis Obispo Council of Governments; and San Luis Sports Therapy.

## Goals:

- Reduce falls among seniors
- Reduce vehicle-related injuries

*For more information on the data used to help create the goals/objectives in this priority area, see the [Injuries](#) section of the [Community Health Assessment and Appendix 4: Indicators at a Glance](#).*

# Injuries



**Priority Issue:** Falls cause the most unintentional injury-related deaths in San Luis Obispo County

Goal: Reduce falls among seniors	Performance Measures	Lead	Data Source	Data Baseline	Improvement Target	Reporting Frequency
<b>Objective 1:</b> Decrease fall-related injuries among seniors (> 65 years) by 20%, by 2023.	# of seniors with fall-related hospitalizations	Public Health	<u>CDPH EpiCenter</u> (non-fatal hospitalization for seniors >65 years)	642 (2014)	514 (2023)	Annual
Activity 1.1: Increase senior classes on fall prevention.	# of classes held	Fall Prevention Specialist (Public Health)	Public Health	12/year	15/year	Annual
Activity 1.2: Create marketing materials to inform older adults about risk factors.	# of marketing materials created	Fall Prevention Specialist (Public Health)	Public Health	0/year	3/year	Annual
Activity 1.3: Conduct in-home assessments to increase knowledge of risk factors related to the physical environment.	# of in-home assessments conducted	Fall Prevention Specialist (Public Health)	Public Health	2/month	3/month	Annual
Activity 1.4: Identify available resources in the county to prevent falls.	Resource directory created	Injury Prevention Coalition	Public Health	0 (2018)	1 resource directory (2019)	Annual
Activity 1.5: Identify resource gaps for San Luis Obispo County.	Analysis conducted	Injury Prevention Coalition	Public Health	0 (2018)	1 gap analysis (2020)	Annual
Activity 1.6: Provide appropriate resources or materials to address identified gaps.	# new resources	Injury Prevention Coalition	Public Health	0 (2018)	1 list of new resources (2022)	Annual

<b>Objective 2:</b> By 2023, local hospitals will provide fall prevention education materials at discharge to 75% of senior patients treated for fall-related injuries.	# of patients receiving fall prevention education materials	ER doctors, medical providers	Discharge data	0 (2018)	5,000 patients (2023)	Annual
Activity 2.1: Identify fall-related ICD-10 codes.	List of ICD-10 codes	ER doctors, medical providers	Personal correspondence	0 (2018)	1 list (2019)	Annual
Activity 2.2: Review emergency room discharge instructions for the selected codes.	Analysis conducted	ER doctors, medical providers	Personal correspondence	0 (2018)	1gap analysis (2020)	Annual
Activity 2.3: Incorporate fall-related instructions into discharge instructions for certain diagnoses.	Recommendation provided	ER doctors, medical providers	Personal correspondence	0 (2018)	1 recommendation for discharge language (2023)	Annual

# Injuries



**Priority Issue:** High number of vehicle-related injuries (VRI) (including motor vehicle occupants, pedestrians & cyclists)

Goal: Reduce vehicle-related injuries.	Performance Measures	Lead	Data Source	Data Baseline	Improvement Target	Reporting Frequency
<b>Objective 1:</b> Reduce number of <i>bicycle</i> -involved motor vehicle collision injuries by 10%, by Dec. 2022.	# of victims killed or injured in bicycle-involved motor vehicle collisions	Bike SLO County	<a href="#">CA Office of Traffic Safety</a>	109 (2015)	98 (2022)	Annual
Activity 1.1: Promote intersection improvement/traffic calming improvements at high frequency collision sites (utilize UC Berkeley's <a href="#">Transportation Injury Mapping System</a> to inform).	# of intersection improvements	Bike SLO County	Lead agency correspondence	0	2 (2022)	Bi-annual
Activity 1.2: Expands safe routes program to middle/high schools.	# of schools engaged	SLOCOG Safe Routes to School	Lead agency correspondence	5 (2017)	8 (2022)	Bi-annual
Activity 1.3: Add bike lanes/rumble strips in high frequency collision sites.	# of added	Bike SLO County	Lead agency correspondence	0	2 (2022)	Bi-annual
<b>Objective 2:</b> Reduce number of <i>pedestrian</i> -involved motor vehicle collision injuries by 10%, by December 2022.	# of victims killed or injured in pedestrian-involved motor vehicle collisions	Bike SLO County	<a href="#">CA Office of Traffic Safety</a>	65 (2015)	58 (2022)	Annual
Activity 2.1: Promote intersection/traffic calming improvements at high frequency collision sites.	# of intersection improvements	Bike SLO County	Lead agency correspondence	0	2 (2022)	Bi-annual

Activity 2.2: Encourage distracted pedestrian education through CCDDAP classes.	# of individuals taking distracted pedestrian classes	Central Coast Distracted Driving Awareness Partnership (CCDDAP)	Lead agency correspondence	0	TBD (2022)	Bi-annual
<b>Objective 3:</b> Reduce the number of all <i>motor vehicle</i> collision injuries by 10%, by December 2022.	# of victims killed or injured in motor vehicle collisions	Bike SLO County	<u>CA Office of Traffic Safety</u>	1,499 (2015)	1,349 (2022)	Annual
Activity 3.1: Promote intersection improvement/traffic calming improvements at high frequency collision sites.	# of intersection improvements	Bike SLO County	Lead agency correspondence	0	2 (2022)	Bi-annual
Activity 3.2: Encourage distracted driving awareness through CCDDAP public information campaign.	Campaign	Central Coast Distracted Driving Awareness Partnership (CCDDAP)	Lead agency correspondence	0	1 campaign (2022)	Bi-annual



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## SOCIAL & EMOTIONAL WELLNESS



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# SOCIAL & EMOTIONAL WELLNESS

Social and emotional wellness is essential to overall health. Mental health problems affect thinking, mood and behavior and affect our ability to cope with the stresses of life, work productively and contribute to our community. Adults, children and adolescents with untreated mental illness are at higher risk for unsafe behaviors, including alcohol or drug abuse and suicide.

In San Luis Obispo County, the system of mental health support services has been largely fragmented and has struggled to meet high demand with insufficient resources. For this reason, the social and emotional wellness team chose to focus on greater coordination and consistency of care across social and emotional wellness services as a priority. The aim is to amplify existing efforts, providing greater service to residents by coordinating current resources.

The team also noted that intervention during the adolescent years had largely been neglected in favor of programs aimed at earlier interventions (birth to five years) in San Luis Obispo County. While these earlier interventions will still be a central focus for local agencies, community partners have also selected teen social and emotional wellness as a key priority area for this planning effort.

The social and emotional wellness team included Cal Poly Center for Health Research; Cal Poly Wellness; The Center for Family Strengthening; Community Action Partnership of San Luis Obispo County; Community Health Centers of the Central Coast; County of San Luis Obispo Departments of Social Services, Public Health and Behavioral Health; Dignity Health Central Coast; Family Care Network; First 5 SLO County; Health Commission; Latino Outreach Council; The Link Family Resource Center; RISE; Transitions-Mental Health Association; Planned Parenthood of California Central Coast; and Pregnancy and Parenting Support of San Luis Obispo County.

## Goals:

- Improve consistency of care across the continuum of social and emotional wellness services
- Improve the social and emotional support network for teens in SLO County

*For more information on the data used to help create the goals/objectives in this priority area, see the [Community Health Assessment: Social and Emotional Wellness section](#) and [Appendix 4: Indicators at a Glance](#).*

# Social & Emotional Wellness



**Priority Issue:** No agreed-upon standard of care for providers to provide consistency of best practices across the continuum of social and emotional wellness services

Goal: Improve consistency of care across the continuum of social and emotional wellness services	Performance Measure	Lead	Data Source	Data Baseline	Improvement Target	Reporting Frequency
<b>Objective 1:</b> Adopt a countywide Social and Emotional Wellness Standards of Care policy, by June 30, 2020.	# of Policies	T-MHA; Family Care Network; Behavioral Health	Policy Adoption	0	1 (2020)	Annually
Activity 1.1: Convene 3-5 stakeholder focus group sessions to begin developing common needs, standards of care (SOC), training and development best practices before December 31, 2018.	# of stakeholder sessions, preliminary write-ups	Behavioral Health	Stakeholders/ Focus Groups	0	3 (2018)	Quarterly
Activity 1.2: Establish Policy Development Committee to collect findings and draft standards of care policy, by June 30, 2018.	Draft Policy, # of meetings	Behavioral Health	Stakeholders/ Focus Groups	0	3 (2018)	Monthly
Activity 1.3: Begin introducing concept of SOC policy to system leaders and providers via staff trainings, meetings, media and information campaign.	# of flyers, training docs, press releases	T-MHA; Family Care Network; Behavioral Health	Meeting rosters, info notices, etc.	0	15	Monthly
Activity 1.4: Ratification of countywide Social and Emotional Wellness Standards of Care policy by Board of Supervisors; County Office of Education; and major provider Boards by June 30, 2020.	# of Policies	T-MHA; Family Care Network; Behavioral Health	Policy Adoption	0	1 (2020)	Annually

# Social & Emotional Wellness



**Priority Issue:** Lack of social and emotional supports for teens

<b>Goal:</b> Improve the social and emotional support network for teens in SLO County	<b>Performance Measure</b>	<b>Lead</b>	<b>Data Source</b>	<b>Data Baseline</b>	<b>Improvement Target</b>	<b>Reporting Frequency</b>
<b>Objective 1:</b> Reduce percentage of teens who report chronic sad or hopeless feelings in the past year by 5%, by Dec 2023.	% of 11 <sup>th</sup> graders who self-report chronic sad or hopeless feelings (CHKS table A8.4)	Teen Task Force, Public Health	<a href="#">California Healthy Kids Survey</a>	33% (2015-2016)	28% (2023)	Annual
Activity 1.1: Create campaign to promote career and technical training for high school aged youth.	# of campaigns	Teen Task Force incl: DSS, Public Health, Ekerd, SLO Partners/SLOCOE, CAPSLO, Asset Development Network	---	0 campaigns (webpage; social media; flyers) (by 2023)	1 campaign (webpage; social media; flyers) (by 2023)	Annual
Activity 1.2: Conduct analysis of current mentoring opportunities for middle and high school aged youth and young adults in SLO County.	Analysis	Teen Task Force incl: DSS, SLO Partners/SLOCOE, CAPSLO, Ekerd	---	0 analysis	1 analysis (by 2023)	Annual
Activity 1.3: Create one new mentoring opportunity in identified area of need based on the analysis.	# new mentoring opportunities	Teen Task Force incl: SLO Partners/SLOCOE, DSS, CAPSLO, Ekerd	---	n/a	1 new mentoring opportunity	Annual
Activity 1.4: Host a conference or workshop on available youth supports for middle/high school counselors, mental health providers and staff who work with youth.	# workshops	Teen Task Force incl: CAPSLO, DSS, Asset Development Network, Behavioral Health, T-MHA	---	0 workshops	1 workshop (by 2023)	Annual

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# ENVIRONMENT



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# ENVIRONMENT

Safe air, soil and water are fundamental to a healthy community environment. An environment free of hazards, such as secondhand smoke, carbon monoxide, allergens, lead and toxic chemicals, helps prevent disease and other health problems. Implementing and enforcing environmental standards and regulations, monitoring pollution levels and human exposures, building environments that support healthy lifestyles and considering the risks of pollution in decision-making can improve health and quality of life.

In recent years, the incidence of Valley Fever—a disease caused by fungus found in the soils of San Luis Obispo County as well as other parts of the Southwest—has increased, reaching record highs in 2017. Because of the increasing impact and relative obscurity of Valley Fever, the environment team chose this as a priority issue. Beach water quality is important in our community, as many residents and visitors take advantage of bountiful ocean fishing and recreation opportunities. For this reason, beach water quality was chosen as a second priority area.

The environment team included Air Pollution Control District; Cleath-Harris Geologists; County of San Luis Obispo Department of Agriculture, Weights and Measures, Public Health and Public Works Departments; Health Commission; San Luis Obispo County Integrated Waste Management Authority; and the Surfrider Foundation San Luis Obispo County Chapter.

## Goals:

- Increase awareness within the agriculture community of the risks associated with Valley Fever and prevention/treatment needed
- Improve water quality at high priority beach/creek interfaces

*For more information on the data used to help create the goals/objectives in this priority area, see the [Community Health Assessment: Environment section](#) and [Appendix 4: Indicators at a Glance](#).*

# Environment



## Priority Issue: Increasing incidence of Valley Fever

<b>Goal:</b> Increase awareness within the agriculture community of the risks associated with Valley Fever and of prevention/treatment needed	<b>Performance Measure</b>	<b>Lead Person/ Organization</b>	<b>Data Source</b>	<b>Data Baseline</b>	<b>Improvement Target</b>	<b>Reporting Frequency</b>
<b>Objective 1:</b> Provide outreach information to 95% of County AWM permittees by July 1, 2019.	% of AWM permittees contacted	Agriculture Weights and Measures (AWM)	AWM database	0% of AWM permittees contacted	95% of AWM permittees contacted (by July 1, 2019)	July 2, 2019
Activity 1.1: Develop public message and outreach brochure/material in English and Spanish for the Agricultural Community.	# of outreach brochures	Public Health Communications	Public Health Communications	0 brochures	5000 copies (by January 1, 2019)	Annual
Activity 1.2: Create map of hot spots for Valley Fever with an overlay of AWM permitted facilities.	Map of Valley Fever hot spots	Public Health Environmental Health Services	Public Health Epidemiology and AWM	0 maps	1 map (by July 1, 2018)	Every 3 years
Activity 1.3: Explore whether dust mitigation conditions should be expanded for permits that require a CEQA evaluation process and are located in hot spot areas.	Review of Dust Mitigation Conditions	County APCD/Planning and Building	Public Health Epidemiology	0 existing dust mitigation conditions	Complete review of dust mitigation conditions for hot spot areas (by July 1, 2019)	July 2, 2019

# Environment



## Priority Issue: Water quality at the beach/creek interfaces

Goal: Improve water quality at high-priority beach/creek interfaces	Performance Measure	Lead	Data Source	Data Baseline	Improvement Target	Reporting Frequency
<b>Objective 1:</b> By January 1, 2019, collaborate with organizations that collect surface water quality data relevant to the goal so that information collected can be shared regularly.	Identify way to connect the public with available data on region's water quality	Public Health-Environmental Health Services Division and Department of Public Works	Partner websites (County Public Works, SurfSafeSLO.org, Cal Poly Center for Coastal Marine Sciences, Regional Water Quality Control Board)	Activity-based (outlined below)	Activity-based (outlined below)	TBD
Activity 1.1: Identify the surface water quality constituents of concern and identify and contact organizations that collect the data.	List of water quality pollutants	PH-Environmental Health Services, Public Works	Partner websites	Water quality testing results	1 list (by July 1, 2018)	TBD
Activity 1.2: Collaboratively determine the platform and procedure for sharing data.	# platforms	PH-Environmental Health Services, Public Works	Partner websites	0 platforms	1 platform (by January 1, 2019)	TBD
Activity 1.3: Establish the platform and implement the procedure.	# platforms for collecting and sharing water quality data	PH-Environmental Health Services, Public Works	Partner websites	0 platforms	1 platform (by January 1, 2019)	TBD
<b>Objective 2:</b> By January 1, 2023, seek grant funding for a study to determine the cause of exceedances so they can be corrected where possible.	# grants pursued for water quality at beach/creek interfaces	Public Works	Grants pursued	0 grants pursued	1 grant pursued (by January 1, 2023)	TBD
Activity 1.1: Identify where exceedances occur and what contaminant it is.	Beach sampling location exceedances	PH-Environmental Health Services	SurfSafeSLO.org	0 lists	1 list	TBD
Activity 1.2: Apply for grants to fund source study(ies) including appropriate dedicated monitoring equipment and identification of feasible prevention solutions.	# grants pursued	Public Works	Grants pursued	0 grants pursued	1 grant pursued	TBD



Activity 1.3: Coordinate with applicable organizations to implement feasible prevention solutions through grants, best management practices, education and other cooperative efforts.	# coordinating meetings held after study is completed	Public Works	study findings	0 meetings held	TBD	TBD
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## APPENDIX 1

# SUMMARY OF PUBLIC COMMENTS

A draft version of this report was released in November 2018 for public comment. In total, 17 comments were received on the report. Below is a summary of the comments received during the two-week public comment period (November 15-30, 2018). Note this summary does not include public comments regarding line-level edits or points of clarification.

Comments	Responses
Consider planning community gatherings alongside this plan, such as an annual symposium, to ensure momentum on these objectives.	We recognize the importance of continuing this discussion in-person and will facilitate the gatherings needed to maintain momentum.
Several comments praised the collaborative process in the plan's development and the use of evidence-based practices, and commented that the plan was well composed with health priorities, goals, objectives, and activities clearly stated.	No response needed.
I am happy to see our county working diligently on improving the overall health and wellness of its citizens. I would like to get more information on the social determinants of health and the Healthy Communities Workgroup meetings. I subscribe to the theory that stable and affordable housing is a key element to physical health, mental health and overall well-being.	More information about the Social Determinants of Health team and how to get involved is available here: <a href="http://www.SLOHealthCounts.org/chip">www.SLOHealthCounts.org/chip</a> .  Information about the Healthy Communities Workgroup and how to join is available here: <a href="http://www.healslo.com/healthy-communities-work-group">www.healslo.com/healthy-communities-work-group</a>
Consider using a different data source than CHIS diabetes rates under Goal #2 under Chronic Disease and Health Behaviors, as the activities are more about managing current chronic disease than prevention.	We will work with partners in this area to find a metric more suited to the activities listed.
Consider adding Diabetes Empowerment Education Program (DEEP) to activity 1.1 under Chronic Disease and Health Behaviors.	The team working on this priority area added this program to the activity in question.
The plan follows the national Healthy People 2020 format which creates a standardized template and helps compare SLO health data with the country and regions throughout the country. While HP 2020 is a very helpful scorecard/guide to assessing health status at given points in time and over time,	This will be addressed through communications and outreach campaigns for the plan as a whole and for specific action areas. We welcome support and collaboration in this area.

<p>it hasn't always been clear that it is an inspired call to action.</p>	
<p>Surfrider Foundation San Luis Obispo appreciates the inclusion of the priority issue "Water Quality at the Beach/Creek Interfaces" and looks forward to partnering with SLO County, Cal Poly, and the community with the goal of resolving water quality issues and the health problems they can create.</p>	<p>No response needed.</p>
<p>An executive summary would be helpful so that key stakeholders, work groups and community members can quickly see the whole picture.</p>	<p>This has been addressed with the addition of an executive summary.</p>
<p>Consider the creation of a collaborative community task force of key stakeholders and influential leaders who meet at least quarterly and assist with the vision and monitoring of the identified priorities and strategies.</p>	<p>We recognize the importance of continuing this collaborative work in-person and are considering quarterly gatherings of the 16 team leads of the existing collaborative. Additional stakeholders and community leaders are invited to get involved. Subscribe to receive regular updates and hear about opportunities to get involved at <a href="http://www.SLOHealthCounts.org/subscribe">www.SLOHealthCounts.org/subscribe</a>.</p>
<p>Best practices for large-scale health improvement projects like this should be in the report so they can be incorporated in stakeholder oversight.</p>	<p>Teams considered best practices and case studies in selecting their priority areas and activities, and the overall community health improvement planning process uses the framework recommended by leading national public health authorities. However, we recognize that the plan did not adequately describe this part of the development process. Promising practices and other county success stories are showcased on <a href="http://www.SLOhealthcounts.org">www.SLOhealthcounts.org</a>, under the Resources tab.</p>
<p>While the overall plan is comprehensive and wide ranging in scope might it be valuable to identify and focus on two-three critical areas on an annual basis.</p>	<p>Agreed, and this will be discussed with teams at a future meeting. We hope the five-year timeline on these activities and the division of efforts into eight action teams will make the far-reaching scope more manageable.</p>
<p>Consider time limited trials and pilot projects to see what works the best in creating meaningful change.</p>	<p>This will be discussed with teams at a future meeting, though some have already incorporated this strategy into their work plans. This has also been noted in the document itself.</p>
<p>Consider greater prioritization in the juggernaut problem of mental health.</p>	<p>Mental health has been included in the plan as one of eight priority areas. The team that determined the priorities in this area decided to start with what they see as a necessary first step, that of providing a uniform expectation to consumers about their treatment rights. As discussions continue, the team</p>

	will have the option to add other activities to this priority area.
Consider telemedicine and tele-mental health as a way to reach difficult populations and remote areas.	This strategy will be brought to the Social and Emotional Wellness team for consideration as they add to their list of current activities. The Access to Care team continues to discuss telemedicine options.
Identify the role of SLO City leaders and other key stakeholders. What is the role of Cal Poly in terms of health education, thought leadership and leading research?	We will continue our efforts to expand the participation of community members, local government leaders, and other stakeholders, including Cal Poly, to help frame the ongoing work of this coalition.
I found it particularly important that the plan emphasized affordable housing as a critical health issue and discussed how these inequities are having a profound impact on the health of our county. Including these issues in the plan positions the County well to address these issues over the next five years.	No response needed.
Why no mention of homelessness in your report? In my humble opinion, it's the worst problem we have, by far.	Though not explicitly mentioned, the issue of homelessness has been included, at least in part, in the plan's discussion of housing and mental health coordination. This population subgroup will be brought to the Social and Emotional Wellness and Social Determinants of Health teams.



## Learn more and stay connected.

This community health improvement plan is part of a long-term health improvement planning effort for San Luis Obispo County. If you would like to be part of this effort or would like to share comments on this report, please contact the Public Health Department at [slopublichealth@co.slo.ca.us](mailto:slopublichealth@co.slo.ca.us) or 805-781-5500.

For regular updates, please visit [www.SLOHealthCounts.org](http://www.SLOHealthCounts.org).



SLO Health Counts is a collaborative focused on working together for a healthy San Luis Obispo County.