Siskiyou County Health and Human Services Public Health Division



Community Health Improvement Plan 2019-2022







Table of Contents

Introduction	
Mission, Vision, Values	4
Process and Planning	
Summary of the Community Health Assessment	5
Community Health Assessment and Community Health Improvement Plan	
Process	7
Community Health Improvement Plan	
Health Priority- Maternal/Child Health	8
Health Priority- Mental Health	10
Health Priority- Access to Care	12
Appendix	
Consideration of State and National Priorities	14



Introduction

The 2019 Siskiyou County Public Health Community Health Improvement Plan (CHIP) is the result of a multi-sector, community driven planning process lead by the Siskiyou County Health and Human Services Agency, Public Health Division. The process is a continuation of the formal partnership between Public Health, Fairchild Medical Center, and Mercy Medical Center Mt Shasta, which resulted in the Community Health Assessment.

In January 2019, the committee Siskiyou Well was formed. Siskiyou Well consists of above mentioned organizations (hereby referred to as the "key partners"), along with numerous community based organizations, clinics, and local non-profits. Together, the group engaged the community and key stakeholders to develop the county's first collaborative Community Health Needs Assessment (CHNA).

The 2019 CHNA and CHIP are designed to promote community participation and engage organizations at all levels and locations in the county. The CHIP is an action-oriented plan which promotes a collective-impact, multi-faceted approach. The goals and objectives developed under each health priority were carefully considered to have the greatest impact on the health and wellness of Siskiyou County's most at risk residents while leveraging existing community and organizational activities and goals.

It is important to Public Health and our community partners to continue to emphasize health equity in the planning of all our programs and initiatives. Health equity is achieved when everyone has the opportunity to obtain his/her full health potential. Social determinants of health are conditions in a person's environment that affect their quality of life. In order to achieve health equity, we must continue to address the social determinants of health which negatively impact our community, such as food security, education, socioeconomic status, housing, and the health care system.

By systematically identifying where the greatest gaps are in our community, organizations throughout the county can continue to respond to our ever changing needs, propelling us further in achieving our goal of health equity. Based on the analysis of the data collected in the CHNA, priorities were selected in which to focus on during this CHIP cycle. Meetings were then held to

brainstorm and identify what enables individuals to achieve better outcomes in each of the selected priority areas. From this discussion, goals and objectives for the priority areas were created.

Over the next three years, the 2019 CHIP will be a living document which will guide organizational efforts throughout our community. It inspires a common vision of health which we hope to be adopted by not only the organizations involved in the process, but by the entire community. Together, we are creating a whole which is greater than the sum of its parts.

Mission, Vision, Values

At Siskiyou County Public Health Division, we are continuously committed to engaging in activities which align with our mission, vision, and values. It is through the work of our dedicated staff that we are able to so.

Mission

To promote and improve the health and wellness of the people of Siskiyou County through community empowerment and meaningful partnerships.

Vision

The goal of Siskiyou County Public Health Division is to promote individual and community wellness, effectively monitor and evaluate health status, and develop policies and plans that support individual and community health efforts. It is our goal to accomplish this through confidential and respectful services, health education, prevention and outreach.

Values

At Siskiyou County Public Health, our work will continue to be guided by our commitment to excellence, community, service, innovation, and collaboration. Through these values, we look to lead Siskiyou County to a future full of achievement, health, and prosperity.

Excellence

We promote organizational excellence by providing services formed by evidence based practices and continuously encouraging the development of our employees, both personally and professionally.

Community

We are committed to promoting the health and wellness of our community by providing education, information, and services in a transparent and accessible manner.

Service

We are devoted to providing all of our services with compassion, honesty, and integrity.

Innovation

We aim to foster the growth of our organization through creative thinking and problem solving.

Collaboration

We believe through collaboration with community members and community partners, we will be able to respond to the ever growing and changing needs of our community.

Process and Planning

Summary:

Community Health Needs Assessment

Beginning in 2018, Siskiyou County Public Health Division partnered with Fairchild Medical Center and Mercy Medical Center, Mt Shasta, to complete the county's first collaborative Community Health Needs Assessment (CHNA). The steering committee Siskiyou Well was formed, garnering the support and participation of organizations from a variety of disciplines throughout the county. The vision of Siskiyou Well is to meet the needs of our community through collaboration and intentional planning to ensure access to quality services, care, and education that support the health and wellness of the whole person. The purpose of the collaborative CHNA is to identify and prioritize the health priorities of Siskiyou County and to create an action plan based on the results.

The Siskiyou Well CHNA analyzed many aspects of health and well-being, rather than simply the absence or presence of clinical care, to obtain a comprehensive understanding of the factors which influence the quality of life and health in our county. Information was gathered on topic areas such as health outcomes, mortality rates, economic factors, health behaviors, and access to care. This process involved a combination of quantitative and qualitative data. Data was collected

via three avenues: community health survey, key stakeholders survey, and secondary data collection. For a detailed description of the 2019 CHNA process and results, please refer to the original report.

Following the initial analysis of the collected data, the areas below were identified as the preliminary health priorities for Siskiyou County:

- Abuse and Neglect
- Access to Care
- Aging
- Chronic Disease
- Drug, Alcohol, and Tobacco Use
- Food and Nutrition
- Homelessness

- Infectious Disease
- Maternal/Child Health
- Mental Health
- Oral Health
- Pain Management
- Reproductive Health
- Unintentional Injury

After review of the data and prioritization criteria, the following three primary health priorities were identified and are listed in alphabetical order:



- Access to Care
- Maternal/ Child Health
- Mental Health

Thank you to the following organization for their involvement in the CHIP process:

Siskiyou County Health & Human Services

Public Health Division

Behavioral Health Division

Social Services Division

Fairchild Medical Center

Mercy Medical Center, Mt Shasta

Community Resource Center Collaborative

First 5 Siskiyou

Shasta Cascade Health Centers

Mountain Valley Health Center

Siskiyou Healthcare Collaborative

Siskiyou County Office of Education

Local Child Care Planning Council

Great Northern Services

Partnership Health Plan

Klamath Health Services INC

CHNA and **CHIP** Process

Phase Six

In order to be good stewards of limited organizational resources, Siskiyou Well opted for a mixedmethod approach. To best accommodate the needs of the key partners and the community, key elements from the Mobilizing for Action through Planning and Partnership process were adapted. The modified process included an initial four phases which resulted in the collaborative CHNA, and an additional two phases resulting in the Siskiyou County Public Health CHIP. In order to remain compliant with IRS regulations, Fairchild Medical Center and Mercy Medical Center Mt Shasta, the key partners of the CHNA, completed independent health improvement plans, but remained highly involved in the CHIP process.

> **Phase One** Organization and Partner Development **Phase Two** Visioning and Assessment Development **Phase Three Data Collection** Phase Four Prioritization and Asset Identification Phase Five Goals and Objective Formation

> > **Action Cycle**

The Siskiyou Healthcare Collaborative, a local health alliance, has adopted the CHIP as a strategic priority. In partnership with Siskiyou County Public Health Division, the Siskiyou Healthcare Collaborative will lead initiative outlined in the CHIP, ensuring the successful implementation of the plan. Quarterly reports will be presented to the Siskiyou Healthcare Collaborative by Public Health, along with an annual review of the completed projects, data indicators, and next steps.

The CHNA and CHIP process is an ongoing effort to be renewed every three years to reflect the ever changing needs of our community. Each of the participating organizations recognizes that the difficulties which Siskiyou County's residents face are not limited to the issues identified in the following plan. As such, we will continue to diligently address issues which align with the mission's of our individual organizations, and seeking collaboration when appropriate.

Community Health Improvement Plan

Health Priority: Maternal Child Health

Goals:

- Supporting and improving healthy beginnings for Siskiyou County residents
- Promoting and supporting healthy families



Overview and Background:

Siskiyou County currently has many well established organizations which work diligently to improve the conditions of children and families in our community. These organizations provide invaluable services to the county such as parenting classes, nutrition services, home visiting, education, and more. While we recognize the great work that is currently being carried out, we also recognize the need in our county is still greater. In order to continue to decrease the impacts of social determinants of health and increase health equity in our community, we must further align our efforts to gain more ground.

Currently, approximately 21% of Siskiyou County residents are under the age of 18. Childhood poverty is among the highest in the state at 30.3%, compared to the state rate of 19.9%. Approximately 8%, compared to the state rate of 5.7%, of Siskiyou County children are uninsured. 36% of families are single parent households. The domestic violence call rate per 100,000 residents is double the state rate at 802/100,000 compared at 406/100,000. Childhood food insecurity is among the top challenges for children in the county. Children in Siskiyou County experience the second highest food insecurity rate in the state at 31.8%, compared to

the 22.9% state rate and 11.8% national rate. Infant mortality is significantly higher than the state rate at 7.3 per 1,000 live birth, compared to 4.2 state rate.

During the prioritization meetings, several additional areas of concern were discussed by partners, including child abuse and neglect, adverse childhood events, family planning services, access and utilization of preventive services, and parental support services and education. Through extensive discussion and consideration on numerous levels, the below goals and objectives were established:

Goal	Objectives	Activities/ Strategies
Goal: Supporting and improving the healthy beginnings for Siskiyou County	Increase initiatives to expand community knowledge of services with a focus on parents and adolescents	Promote partner participation at health fairs and community events
residents		
Measure: Timeframe: 2019- 2022	Increase comprehensive and meaningful population specific engagement and educational opportunities	Support multi-sector partnerships to engage underserved youth
Goal: Promoting and supporting healthy families	Promote social well-being by increasing health screenings,	-Increase opportunities and availability of health screening through partner collaboration
Measure:	education, and linkages to services	-Promote health and wellness education aimed at reducing stigma and promoting timely access to care
Percentage of children receiving recommended vaccinations	Promote childhood preventive health	-Increase education and activities related to childhood education, nutrition, well-child exams, and other preventive screenings
Timeline : 2019-2022		-Engage non-traditional partners in education and promotion activities

Health Priority: Mental Health



Goal:

Promote mental and social well-being of Siskiyou County residents

Overview and Background:

Mental health has been a growing concern in the United States for a number of years. Increased attention to the issue has brought additional funding and resources to areas throughout the county, yet the fight for healthy minds continues. Siskiyou County experiences many issues related to mental health, several of which relating to the rural, geographically isolated nature of our communities. Many health challenges which county residents face have been linked to increased rates of depression and poor mental health status, including lower socioeconomic status, isolation, unemployment, food insecurity, and substance abuse.

Many statistics related to mental health raise additional areas of concern for our community. The suicide rate is double the state and national rates at 25.1 per 100,000 population compared to 11.1 and 13.5. Thirty-seven percent of Siskiyou County 11th graders stated they felt chronically sad or hopeless in the last 12 months in the 2018 California Healthy Kids Survey. The Siskiyou Well Community Health Survey asked two questions related to mental health. The first, question 39, asked "Have you had two years or more in your life when you felt depressed or sad most days, even if you felt okay sometimes?", to which 42% of respondents answered "yes". The second, question 40, asked "Have you ever sought help from a professional for a mental or emotional problem?" to which 50% responded "yes". Stigma related to mental health was also noted in the surveys as a top concern for county residents. According to Siskiyou County Behavioral Health Division, stigma regarding mental health and substance use disorder has been identified as a significant barrier in focus groups. Small, rural counties such as Siskiyou have increased potential for stigma, often delaying people from seeking the services they need.

The top areas of concern for mental health in Siskiyou County identified in the initial prioritization meetings were access to services, barriers to entry, suicide, and mental health with a co-occurring diagnosis of substance abuse. Following the goals and objectives planning/brainstorming meeting, an additional meeting between Public Health and Behavioral Health was conducted to ensure alignment of activities. Below are the goal and objectives resulting from those discussions:

Goal	Objectives	Activities/ Strategies
Goal: Promote mental and social well-being of	Expand access and utilization of mental health screenings	-Provide opportunities for multi-sector trainings to administer mental health screenings
Siskiyou County residents Measure: By 2022, initiate at least one	Promote the use of non-clinician administered screening tools, emphasizing at-risk population groups	-Compile a resource list of screening tools which are easily administered, including linkages to care -Identify opportunities to administer screenings to at-risk population groups
new mental health screening program Timeframe: 2019-2022	Increase evidence based activities and programs which reduce likelihood of suicide and major depressive episodes	-Initiate and expand support groups and other nationally recognized initiatives throughout Siskiyou County

Health Priority: Access to Care

Goal:

- Increase community participation in preventive health care services
- Develop and support the Siskiyou County health care system



Overview and Background:



Access to care in Siskiyou County, much like in other rural counties, is a continuous struggle for the community. Physician shortages throughout the state have a particularly heavier impact on the healthcare landscape of rural communities. With rural areas' payer mix being less ideal, along with a smaller population to support the physician's practice, shortages of physicians persist year

after year. While incentive programs exist to entice practitioners to rural areas, housing shortages and geographical isolation present additional barriers.

Accessing care due to shortage of practitioners affects nearly every area of healthcare services in Siskiyou County. When conducting the community health survey, primary care, specialty care, mental health, and dental care were continuously cited by community members as increased challenges and barriers. The absence and shortages of specialty care provides force resident s to seek care in neighboring counties. For many community members, transportation outside of the county presents a new set of challenges and burdens. Access to dental care, particularly for the Medi-Cal population, is perhaps the most challenging. Currently, there are four dental clinics which accept Medi-Cal, three of which are located in the northern part of the county. New patients often wait upwards of one year to be seen. For children, there are no specialty pedicatric dentists in Siskiyou County. Children with Medi-Cal who need major dental work are referred outside of the county, once again with wait times for appointments upwards of one year. While the root cause of access to care issues for the county lies in practitioner shortages, this is not an issue which can be realistically addressed through the CHIP. During the planning sessions, the group was asked to think of opportunities to improve access to care which practitioner participation was not central. Below are the goals and objectives which resulted from those discussions:

Goal	Objectives	Activities/ Strategies
Goal: Increasing community participation in preventive health care services	Promote access to preventive health screenings and services	Increase opportunities for at-risk individuals to access services through multi-sector collaborations
Measure: Breast cancer screening rate Timeframe: 2019-2022	Improve community knowledge of preventive health measures and health management skills	Increase availability of diabetes and other chronic illness management resources
Goal: Develop and support the Siskiyou County health care system Measure:	Increase access and utilization of coordination of care and other integrated care models	-Expand utilization of multi-disciplinary teams -Increase number of community resource navigators, health navigators, and similar occupations
By 2022, initiate at least one new system integration model, process, or policy Timeline: 2019-2022	Promote system integration through education and improved system navigation	-Develop education campaigns focusing on understanding points of entry

Appendix

Consideration of State and National Priorities

Siskiyou County's local public health system is made up of organizations throughout the county that empower our community to improve our overall health status. This system is not exclusive to community based or healthcare organizations, but includes other branches of government and non-government agency, businesses, schools, and many others. Just as different organizations make up the fabric of our local public health system, our local system is an integral part of the state and national public health systems. The driving force behind the collaborative 2019 CHNA and CHIP process is to create the opportunity for collective impact and collaboration. In alignment with this goal, Public Health staff carefully researched the current state and national priorities stated in the plans *Let's Get Healthy California* and *Healthy People 2020* to present at the planning meetings for consideration of the group. Below is a table of the state and national priorities presented:

Priority One: Maternal Child Health

Goals:

- Supporting and improving healthy beginnings for Siskiyou County residents
- Promoting and supporting healthy families

Let's Get Healthy California	Healthy People 2020
Healthy Beginnings:	MICH-1 Reduce the rate of fetal and infant
-Decrease infant deaths	deaths
-Increase vaccination rates	MICH-5 Reduce the rate of maternal mortality
-Decrease childhood trauma	MICH-6 Reduce maternal illness and
-Increase early learning	complications due to pregnancy (complications during hospitalized labor and delivery)
-Decrease childhood asthma	MICH-10 Increase the proportion of pregnant
-Increase childhood fitness and healthy diets	women who receive early and adequate
	prenatal care

MICH-16 Increase the proportion of women
delivering a live birth who received
preconception care services and practiced key
recommended preconception health behaviors
MICH-19 Increase the proportion of women
giving birth who attend a postpartum care visit
with a health care worker
MICH-21 Increase the proportion of infants who
are breastfed
MICH-31 Increase the proportion of children with
special health care needs who receive their care
in family-centered, comprehensive, and
coordinated systems
-

Priority Two: Mental Health

Goals:

Promote mental and social well-being of Siskiyou County residents

Healthy People 2020 HMD-1 Reduce the suicide rate HMD-2 Reduce suicide attempts by olescents HMD-4 Reduce the proportion of persons who
olescents
HMD-4 Reduce the proportion of persons who
perience major depressive episodes (MDEs) HMD-5 Increase the proportion of primary care
cilities that provide mental health treatment site or by paid referral
HMD-6 Increase the proportion of children with ental health problems who receive treatment
HMD-9 Increase the proportion of adults with ental health disorders who receive treatment
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MHMD-10 Increase the proportion of persons
with co-occurring substance abuse and mental
disorders who receive treatment for both
disorders

MHMD-11 Increase depression screening by primary care providers

Priority Three: Access to Care

Goals:

- Increasing community participation in preventive health care services
- Develop and support the Siskiyou County health care system

Let's Get Healthy California	Healthy People 2020
Redesigning the Health System:	AHS-1 Increase the proportion of persons with
-Increase access to primary and specialty care	health insurance
-Increase culturally and linguistically appropriate services	AHS-2 Increase the proportion of persons with a usual primary care provider
-Increase coordinated outpatient care	AHS-6 Reduce the proportion of persons who
-Increase hospital safety and quality of care	are unable to obtain or delay in obtaining necessary medical care, dental care, or
Lowering the Cost of Care:	prescription medicines
-Decrease number of uninsured	AHS-9 Reduce the proportion of hospital
-Increase affordable care and coverage	emergency department visits in which the wait
-Decrease rate of growth in health spending in California	time to see an emergency department clinician exceeds the recommended timeframe
-Increase people receiving care in an integrated system	
-Increase transparent information on cost and quality of care	