



VENTURA COUNTY  

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HEALTH CARE AGENCY

# HealthCare Equity Advisory Council

## REGULAR MEETING

Tuesday, June 21, 2022  
5:30 p.m. - 7:30 p.m.

Large Conference Room, VC Public Health Administration  
2240 E Gonzales Rd., Suite 200, Oxnard, CA 93036

**HEALTHCARE EQUITY ADVISORY COUNCIL  
REGULAR MEETING AGENDA  
Tuesday, June 21, 2022  
5:30 p.m. - 7:30 p.m.  
Large Conference Room, VC Public Health Administration  
2240 E Gonzales Rd., Suite 200, Oxnard, CA 93036**

**PUBLIC COMMENTS BY EMAIL:**

IF YOU WISH TO MAKE EITHER A GENERAL PUBLIC COMMENT OR COMMENT ON A SPECIFIC AGENDA ITEM BEING HEARD, YOU CAN SUBMIT YOUR COMMENT VIA EMAIL BY 9:00 AM THE DAY OF THE MEETING TO THE FOLLOWING ADDRESS: [HEACCouncil@VENTURA.ORG](mailto:HEACCouncil@VENTURA.ORG). PLEASE INCLUDE THE FOLLOWING INFORMATION IN YOUR EMAIL: (A) MEETING DATE, (B) AGENDA ITEM NUMBER, (C) SUBJECT OR TITLE OF THE ITEM, (D) YOUR FULL NAME. DURING PUBLIC COMMENT ON THE AGENDA ITEM SPECIFIED IN YOUR EMAIL, YOUR EMAIL WILL BE SUBMITTED FOR THE RECORD.

**OPENING**

- 1. CALL TO ORDER**
- 2. ROLL CALL**
- 3. APPROVAL OF May 17, 2022 MINUTES**
- 4. ALL PUBLIC COMMENTS FOR AGENDIZED ITEMS & ITEMS NOT ON THE AGENDA (up to 10 minutes)**

**REGULAR AGENDA**

- 5. PRESENTATION: Public Health (45 minutes)**
- 6. MEMBER COMMENTS (15 minutes)**

**BREAK (10 minutes)**

**7. MEMBER EXPERIENCE – Life journey using health services (40 minutes)**

- a. Workgroups – help inform the system where to focus
- b. General understanding of inequities to inform
- c. Report out

**8. CALL FOR FUTURE AGENDA ITEM(S) (5 minutes)**

- a. Next Meeting: July 19, 2022
- b. Agenda Setting

**9. ADJOURN**

Materials related to an item on this Agenda submitted after distribution of the agenda packet are available for public inspection on the Ventura County HEAC website: [Healthcare Equity Advisory Council \(vchca.org\)](http://vchca.org) subject to staff's ability to post the documents prior to the meeting.

Persons who require accommodation for any audio, visual or other disability in order to review an agenda, or to participate in a meeting of the Ventura County Public Safety Racial Equity Advisory Group per the American Disabilities Act (ADA), may obtain assistance by requesting such accommodation in writing addressed to the County Executive Office, 800 South Victoria Avenue, Ventura, CA 93009-1740 or telephonically by emailing to [HEACCouncil@ventura.org](mailto:HEACCouncil@ventura.org). Any such request for accommodation should be made at least 48 hours prior to the scheduled meeting for which assistance is requested.

**Healthcare Equity Advisory Council**  
**Tuesday, May 17, 2022**  
**Minutes**

**Community Voting Members Present:**

Kimberly Cofield – Co-Chair  
Emily Bridges  
Dr. Liz Diaz-Querol  
Kimberly Kelley  
Juliza Ramirez  
Hugo Tapia  
Juana Zaragoza  
Audrey Ford

**Voting Members Absent:**

**Guests:**

Phin Xaypangna  
Kate English

**Administrative Voting Members Present:**

Barry Zimmerman – Chair  
Dr. Theresa Cho  
Dr. Loretta Denering  
Rigoberto Vargas  
Kristina Swaim

**Administrative Voting Members Absent:**

Dr. Sevet Johnson  
Dr. John Fankhauser

**Staff Present:**

Erik Cho  
Selfa Saucedo  
Cynthia Salas

**1. CALL TO ORDER**

The meeting was called to order at 5:37 p.m. by Chair Zimmerman.

**2. ROLL CALL**

**3. APPROVAL OF APRIL 19, 2022 MINUTES**

Moved by J. Ramirez, seconded by K. Kelley. Approved.

**4. ALL PUBLIC COMMENTS FOR AGENDIZED ITEMS & ITEMS NOT ON THE AGENDA**

Oscar Hernandez, Assistant Superintendent Rio School District, commented on Logrando Bienestar expansion, and advocated for more support in the schools and for the Mixteco population. He called for expanded bilingual and trilingual services, allocation of resources according to need, increased communication and collaboration.

Armando Vargas of EL Rio presented the following questions to the Council:

- How does the County include community in decision-making regarding changes or implementation of changes to programs like Medi-Cal; who have you invited to participate (parents, students)?
- What prevention programs are created or planned for adults, families, under 18?
- Why does it take so long to create programs?
- What services have you created to improve the community?
- Those creating programs need to understand the needs of this community, live in the area and have experienced the problems in our environment.



- Where will agency be in 5 years? What are your goals?
- How do you inform the public about the work that you do?

## 5. OVERVIEW OF THE HEALTH CARE AGENCY

Mr. Zimmerman gave a brief overview of the agency organizational structure. We are a safety net system providing the highest standard of care to all. Policy, program approval and funding decisions are directed and overseen by the Board of Supervisors.

## 6. DEFINING EQUITY

Ms. Saucedo, Director of Health Education Public Health and Director, Office for Health Equity, shared a presentation on health equity.

Social determinants of health are all the factors that influence your health: the circumstances in which people are born, raised, live, work, play, and age. For example, people who don't have access to a grocery store with healthy food are more likely to suffer from conditions related to poor nutrition.

Inequity is systemic and avoidable. As an example, in the 93030 zip code where incidence of asthma in children is high, relevant conditions include crowded housing (mold and mildew), agriculture (pesticides), proximity to highways and power plants.

Equity entails adjusting to address the unique circumstances and needs of different communities.

Ms. Kelley emphasized the need to address biases that health care providers bring with them.

Health Literacy for both provider and patient is a good topic for future discussion.

**VCMC/SPH** Mr. Zimmerman shared a brief overview of the County hospitals. VCMC is a designated trauma center for West County, with only pediatric intensive care unit in the area, and houses the Family Medicine Residency Program. Santa Paula Hospital serves the Santa Clara Valley; plans for a new hospital facility are underway. Certain DEI efforts are already underway.

## 7. AMBULATORY CARE

Dr. Cho presented an introduction to the county system of safety net clinics, 18 of which are Federally Qualified Health Centers (FQHCs). FQHC designation allows access to grants to provide dental care, healthcare for the homeless, antiviral medications, etc. Optometry equipment has been installed at Las Islas, and we are looking for an optometrist. Future Santa Paula clinic will have an optometry suite. Schools and churches are an effective way to do outreach and provide medical care.

Ms. Zaragoza related problems with Mixteco language assistance at Las Islas Clinic (information not being interpreted correctly for the patient, offensive comments made about patients).

Dental services at Magnolia clinic in Oxnard and services at proposed Santa Paula clinic will be under the discount program and/or covered by Medi-Cal.

MICOP provides interpretation training but not certification.

## 8. BEHAVIORAL HEALTH

Dr. Denering provided an overview of the Behavioral Health department.

The State mandates services to Medi-Cal beneficiaries with serious mental illness. VCBH provides a continuum of services starting with education and prevention. In 2016 SUS services were reorganized and medical necessity criteria were relaxed, allowing expansion of services and referrals to residential treatment.

**BH Equity:** Ms. Salas, Health Equity/Ethnic Services and Cultural/Linguistic Manager, gave a presentation on Health Equity in Access and Services.

Ms. Kelley commented that it seems that there are very few resources for our youth and so much need. Acknowledging that resources are limited, Dr. Denering noted that peer led services are available through the Wellness Centers at the high schools, and referrals to clinicians can be from there. Plans are in place to expand the Wellness Centers to middle schools.

Ms. Bridges inquired if residential facilities are specialized for disability populations. Dr. Denering replied that we have facilities that can specialize, subject to bed availability.

Dr. Diaz Querol noted that COVID has exploded demand for mental health services, and asked plans are in place to develop the workforce. VCBH is implementing a grant funded program to promote Behavioral Health careers with undergraduate training and internships. There are statewide initiatives for BH and other specialty areas in play. We are also working with Chicano studies students to encourage medical school and Behavioral Health career paths.

Mr. Hernandez advocated for long term goal of developing clinicians from our community that are bilingual and trilingual.

**9. PUBLIC HEALTH** This item will be carried over to next meeting.

**10. MEMBER COMMENTS AND CALL FOR FUTURE AGENDA ITEM(S)**

- a. Council member comments: BHAB is a public meeting also, another opportunity for the community to interact.
- b. Next meeting June 21, 2022.
- c. Agenda Setting: Public Health overview, more specifics on hospital services, incorporation of today's comments, focus on specific issues (work can be broken into subcommittees).

**11. ADJOURN**

Meeting adjourned at 7:31 pm.



VENTURA COUNTY  
HEALTH CARE AGENCY

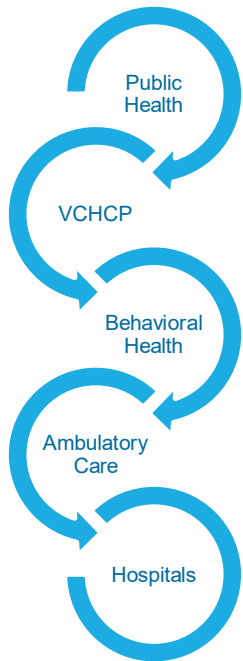
May 17, 2022

# HEALTH CARE AGENCY OVERVIEW

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Barry Zimmerman, Director

# Ventura County Health Care Agency



## Agency Overview

VCHCA is the largest agency in the County with around 3,600 employees. We provide community-based health care services through the following programs and services:

- Ventura County Medical Center
  - Level II Regional Trauma Center
- Santa Paula Hospital
- Ambulatory Care Clinics
- Public Health
- Behavioral Health
- Ventura County Health Care Plan

## Mission

*Provide comprehensive, cost-effective, compassionate health care for our diverse community, especially those facing barriers, through an exceptional workforce, education and forward-thinking leadership.*

## Vision

*Setting the standard in health care excellence. Healthy people in healthy communities throughout Ventura County.*

# County of Ventura

**Supervisor  
Matt LaVere**  
1<sup>st</sup> District



**Supervisor  
Linda Parks**  
2<sup>nd</sup> District



**Supervisor  
Kelly Long**  
3<sup>rd</sup> District



**Supervisor  
Bob Huber**  
4<sup>th</sup> District



**Supervisor  
Carmen Ramirez**  
5<sup>th</sup> District



Total County Government  
*29 Departments/Agencies*  
*~9000 Employees*



Sevet Johnson, Psy.D  
Health Care Agency  
Chief Deputy Director  
(Acting CEO)



# Health Care Agency Executive Leadership



**Barry L.  
Zimmerman  
Director**



**Sevet Johnson, Psy.D  
Chief Deputy Director &  
BH Director  
(Acting CEO)**



**Michael Taylor  
Chief Financial Officer**



**Theresa Cho, MD  
CEO Ambulatory Care**



**John Fankhauser, MD  
CEO County Hospitals**



**Rigoberto Vargas,  
MPH  
PH Director**



**Dee Pupa  
CEO Health Care Plan**



**Amy Towner, MBA  
CEO, HCFVC**



VENTURA COUNTY

**PUBLIC HEALTH**

A Department of Ventura County Health Care Agency

May 17, 2022

# HEALTH EQUITY

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**Selfa Saucedo, MPH**  
**Director of Health Education**



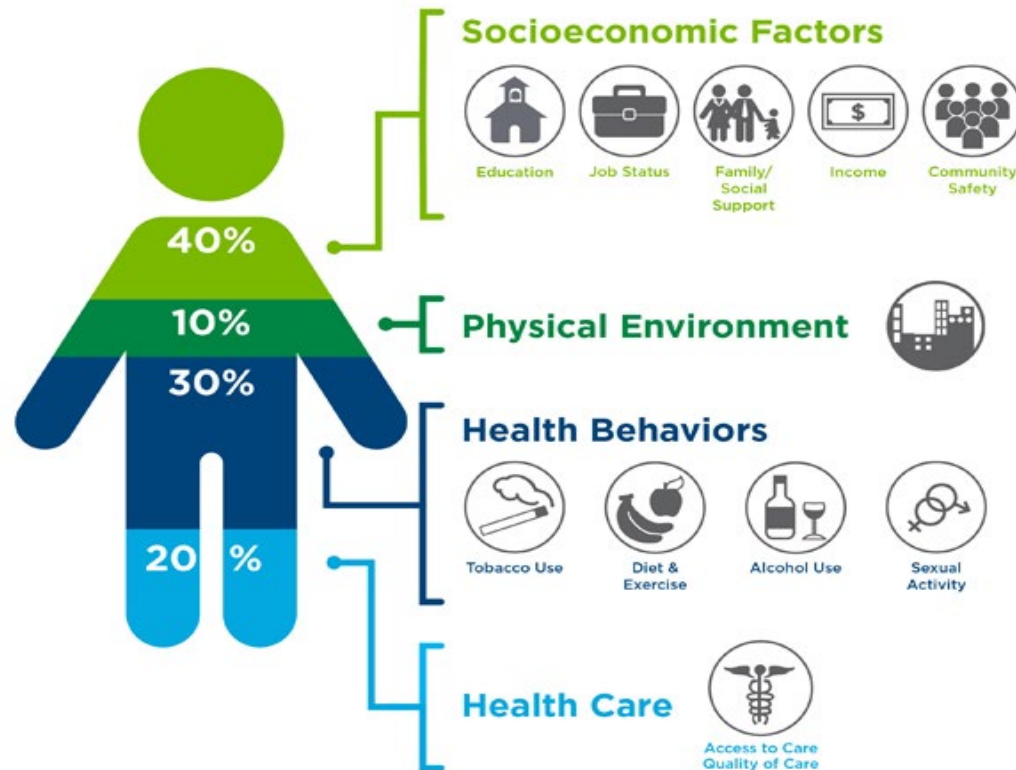
# Health Equity Advisory Council Charter

The World Health Organization (WHO) states that health equity is the absence of unfair, avoidable or remediable differences among groups of people, whether those groups are defined socially, economically, demographically or geographically or by other dimensions of inequality (e.g. sex, gender, ethnicity, disability or sexual orientation.)



# What Goes into Your Health?

## What Goes Into Your Health?



Source: Institute for Clinical Systems Improvement, Going Beyond Clinical Walls: Solving Complex Problems (October 2014)

The Bridgespan Group







# Health Equity

“Health equity means that everyone has a fair and just opportunity to be healthier.” (RWJF)

“No one is disadvantaged from achieving this potential because of social position or other socially determined circumstances.” (CDC)

# Health Disparities

Differences in health outcomes and their causes among groups of people.

Example: African American children are more likely to die from asthma complications compared to non-Hispanic White children.



# Health Inequity

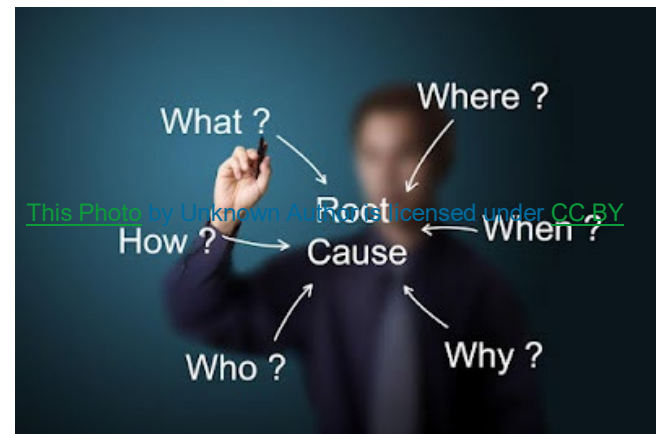
Differences in health status and death rates across population groups that are systemic, avoidable, unfair and unjust.

Example: Latino children who live in the 93030-zip code have a higher incidence of asthma-related ER visits than children in any other zip code.



# Root Causes of Health Inequities

Underlying social inequalities that create different living conditions. Discrimination based on class, race/ethnicity, immigration status, gender, sexual orientation, disability and other “isms” influence the distribution of resources and power.



# Equality vs Equity

What is the difference?

## Equality



## Equity



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VENTURA COUNTY  
MEDICAL CENTER  
SANTA PAULA HOSPITAL

May 17, 2022

**Ventura County Medical Center and Santa Paula Hospital**

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# Our Mission

## Mission

Provide comprehensive, cost-effective, compassionate health care for our diverse community, especially those facing barriers, through an exceptional workforce, education and forward-thinking leadership.

## Vision

Setting the standard in health care excellence  
Healthy people in healthy communities throughout Ventura County.

# Ventura County Medical Center

- 180 licensed beds / 119 in north tower
- West County Level II Trauma Center
- Emergency Department
- Intensive Care Units
- Labor and Delivery Suite
- Medical and Surgical Services
- Stroke Program
- Only PICU in the west county
- Oldest NICU in the county
- Inpatient Psychiatric Unit (43 beds)



# Santa Paula Hospital

- 43 licensed beds
- Labor and Delivery
  - Birthing center environment with birthing tubs and queen sized bed
  - Midwives program
- Intensive Care Unit
- Medical/Surgical Unit
- 3 Operating Rooms
  - 1 C-Section Suite
- Emergency Department
- New State-of-the-Art CT Scanner
- New 3D Digital Mammogram



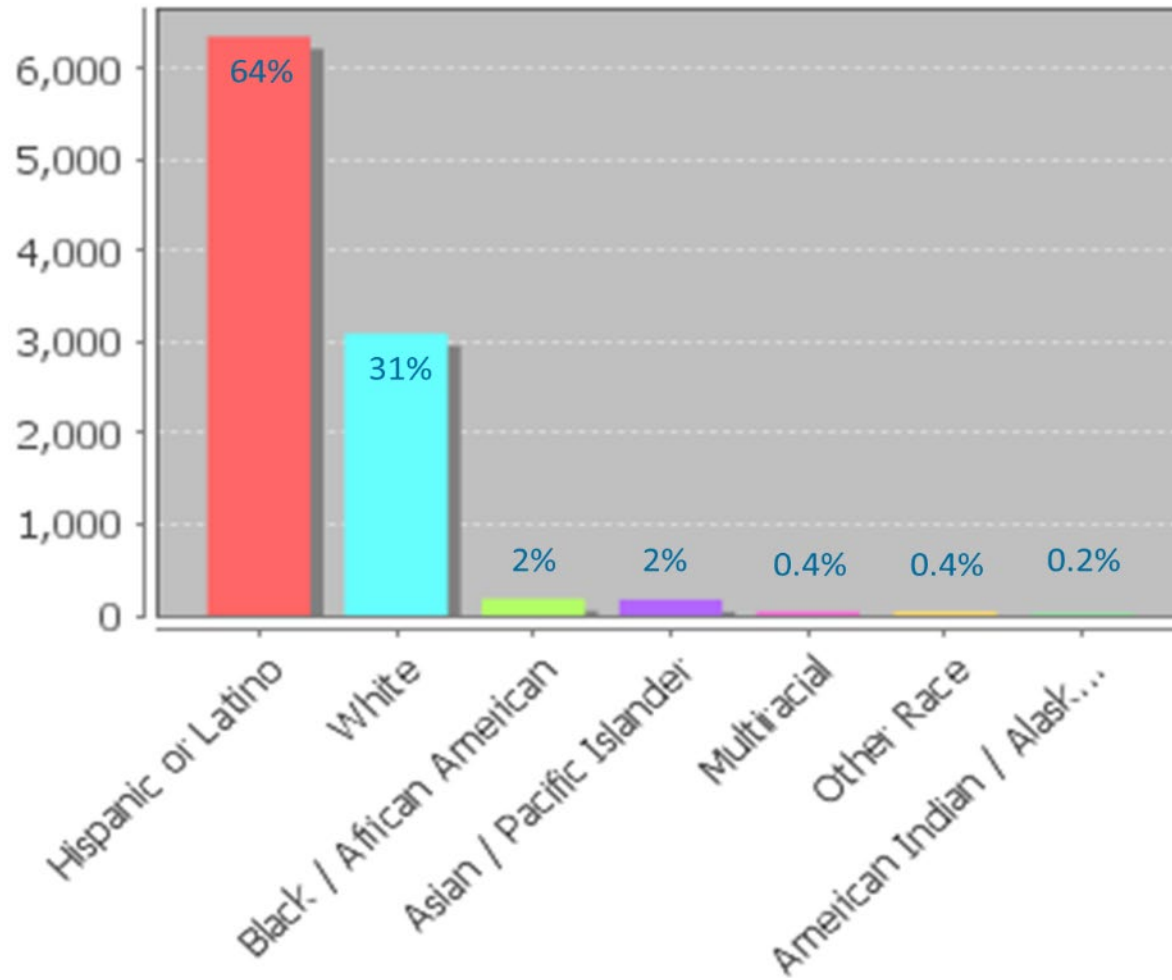
# Family Medicine Residency Program

## Over 50 years training Exceptional Physicians in Family Medicine

- VCMC is one of the original 15 programs approved in Family Practice and has been educating physicians since 1928.
- Graduates of the program are equipped with the skills to work anywhere, especially with the medically underserved.
- VCMC has been ranked **#1 or #2 out of 741 Family Medicine Residencies in the nation** for each of the past 5 years
- Intentional and successful in recruiting a diverse group of residents with outreach to minority medical student organizations.
- Provide farm worker education and backpack medicine program

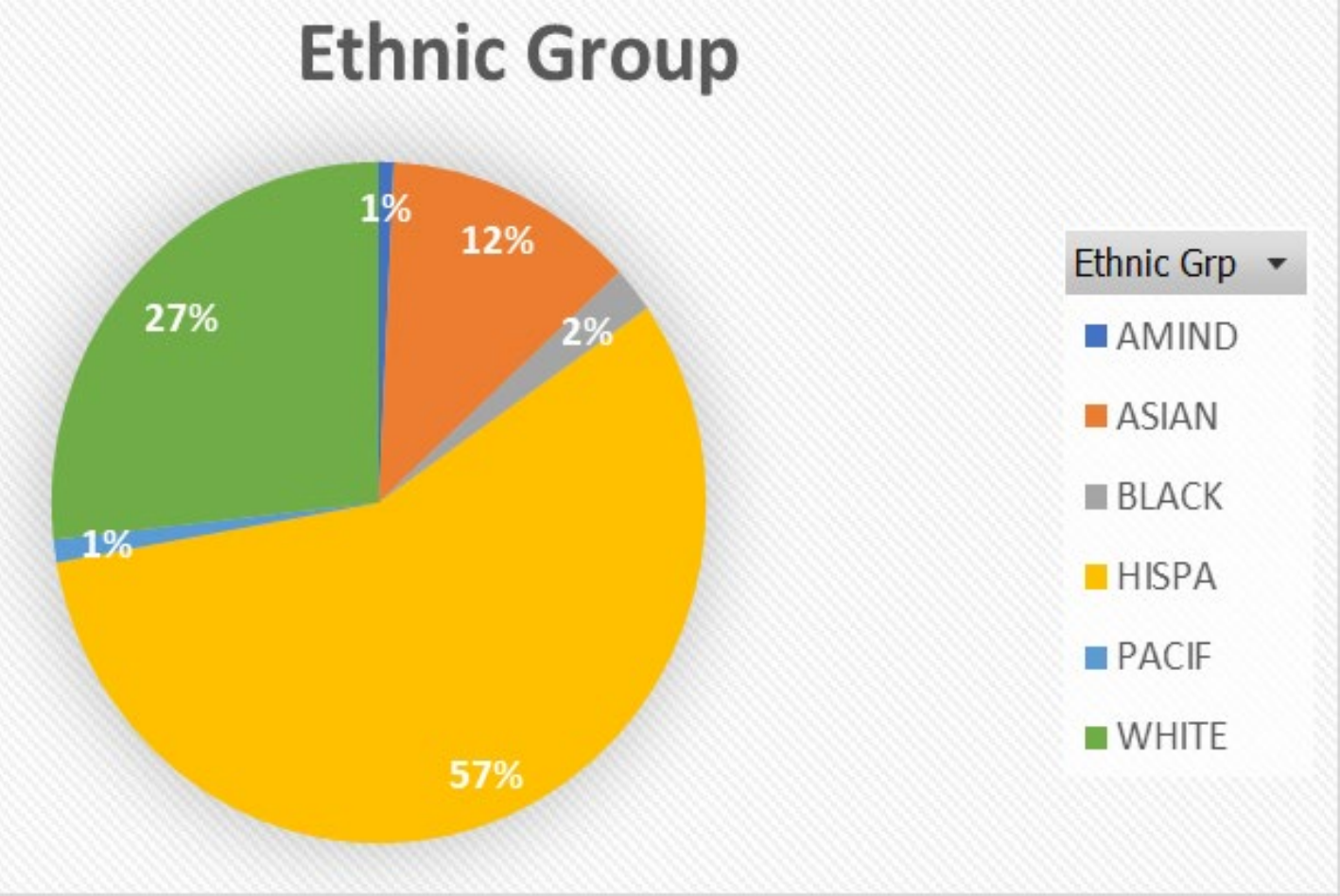


# Hospital Patient Population - Ethnicity

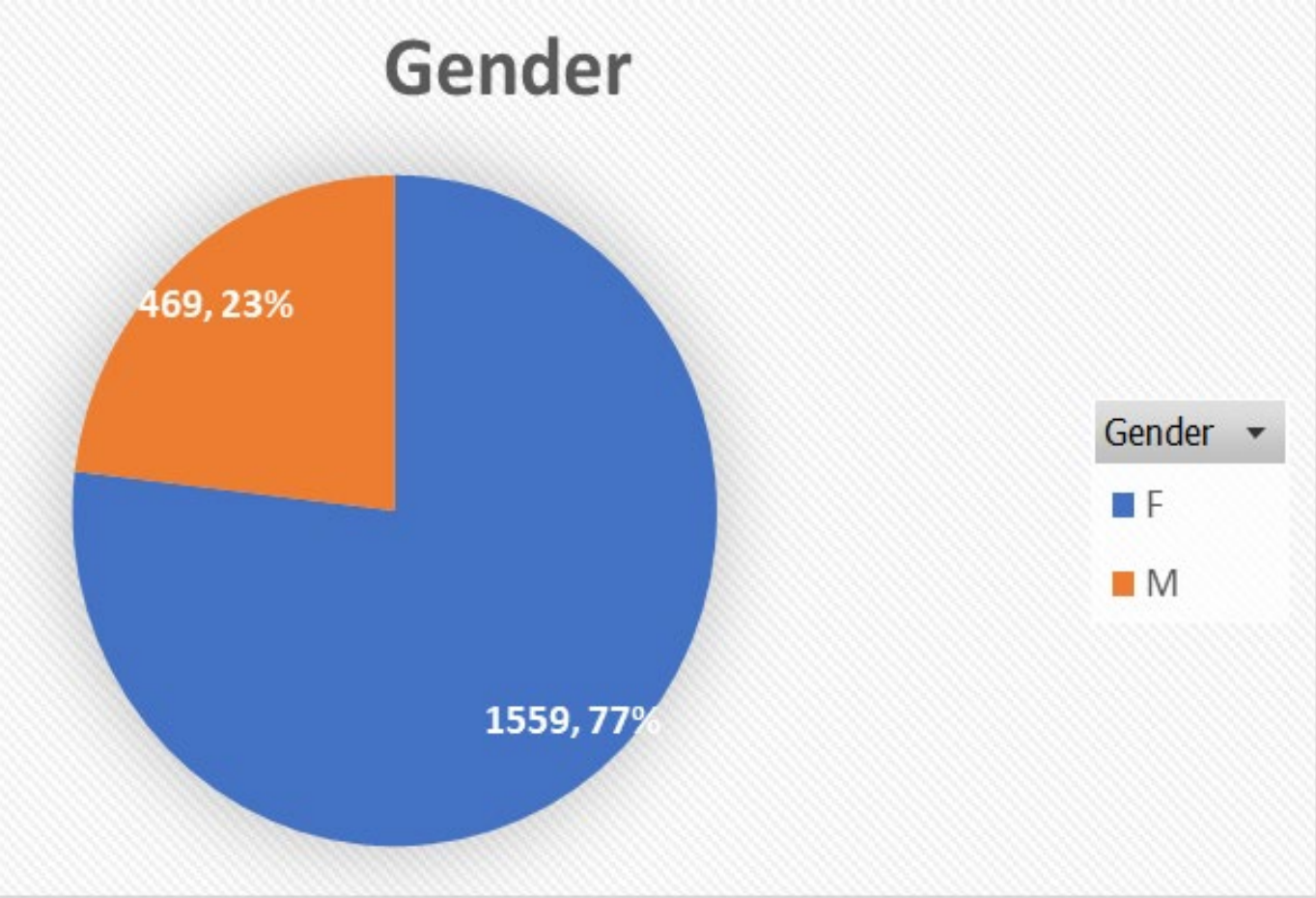




# Staff- Diversity



# Staff- Diversity

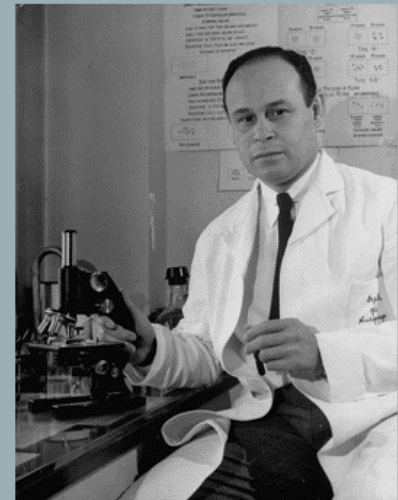




# DEI Initiatives

- Developed a VCMS DEI Advisory Group chaired by Dr. Watabe and Paris Hardy which meets monthly
- Updated our electronic health record to include preferred pronouns prominently
- Celebrating heritage and recognition months with banners, noontime presentations, and highlighting staff and physicians as well as individuals from under-represented groups who have had major influence in healthcare.
- Revised signage to promote inclusiveness.
- Required anti-bias training of all perinatal staff
- Doubling ADA parking spaces and improving accessibility with repaving.
- Created gender neutral bathrooms.

CELEBRATING BLACK  
HISTORY IN MEDICINE



Dr Charles R. Drew

# DEI Initiatives

- Rolled out a new language line program with bedside tablets and immediate access to video translation.
- Expanded Mixteco translation services through on-site trilingual translators and contracted with MICOP for on-site translation services for laboring patients.
- Hosted multiple Facilitated Race Dialogue sessions with physicians and managers led by our Ventura County DEI Director and her team.
- DEI Grand Rounds lectures for staff and physicians twice monthly with topics such as:

*Toxic Exposures in Pregnancy: An Environmental Justice Perspective*

*Roadmap to Immigrant Health: Promoting Health and Equity*

*Addressing Bias and Microaggressions in the Clinical Environment*

*Affirming Trans and Nonbinary People*

*Implicit Bias in the Healthcare Setting*



VENTURA COUNTY  
HEALTH CARE AGENCY

May 17, 2022

# AMBULATORY CARE HEAC PRESENTATION

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Theresa Cho, MD  
CEO Ambulatory Care

# Ventura County Ambulatory Care

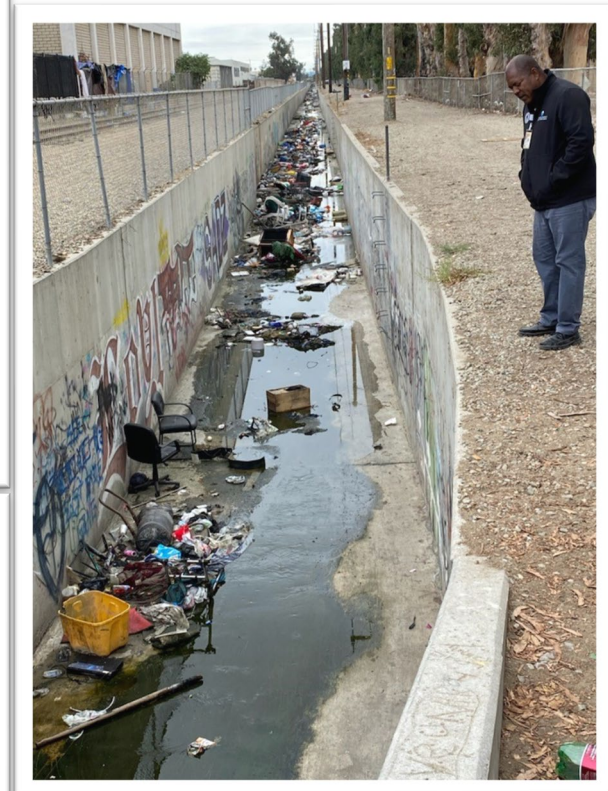
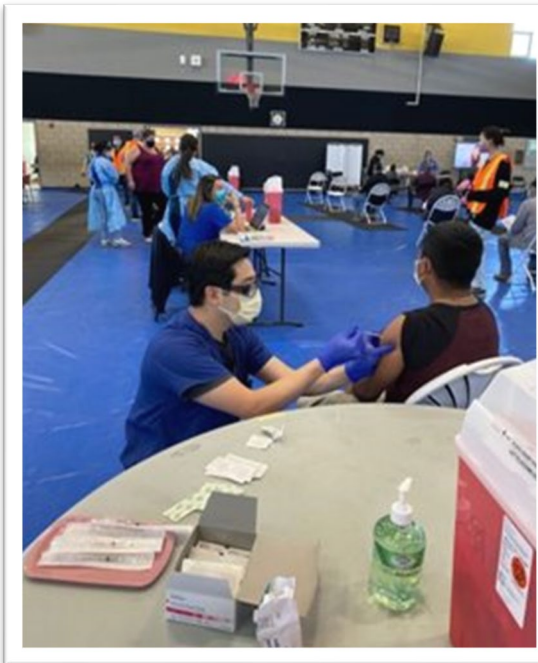
**Ambulatory Care is an integrated system of safety net clinics.**

- **Outpatient Clinics**
  - 26 clinics offering primary and specialty care services
  - 18 Federally Qualified Health Centers



# Ambulatory Care Programs

- Behavioral Health Integration
- Quality Program
- Whole Person Care/Enhanced Care Management
- Homeless Program & Backpack Medicine



# Ambulatory Care Services



## Primary Care

- Family Medicine
- Internal Medicine
- Pediatrics
- Dental Services
- Mental Health Services

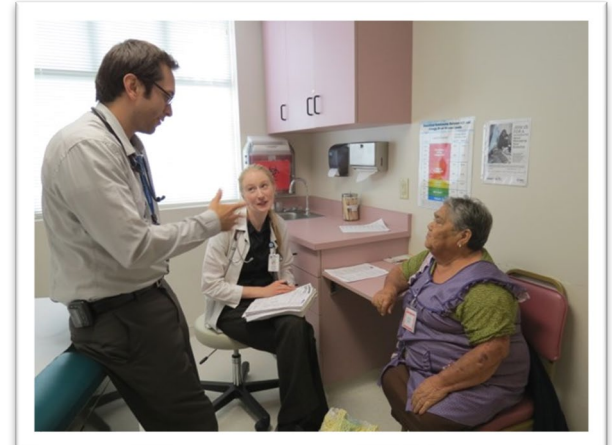
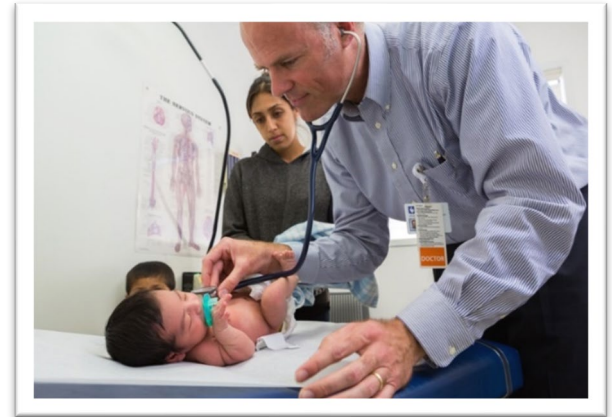
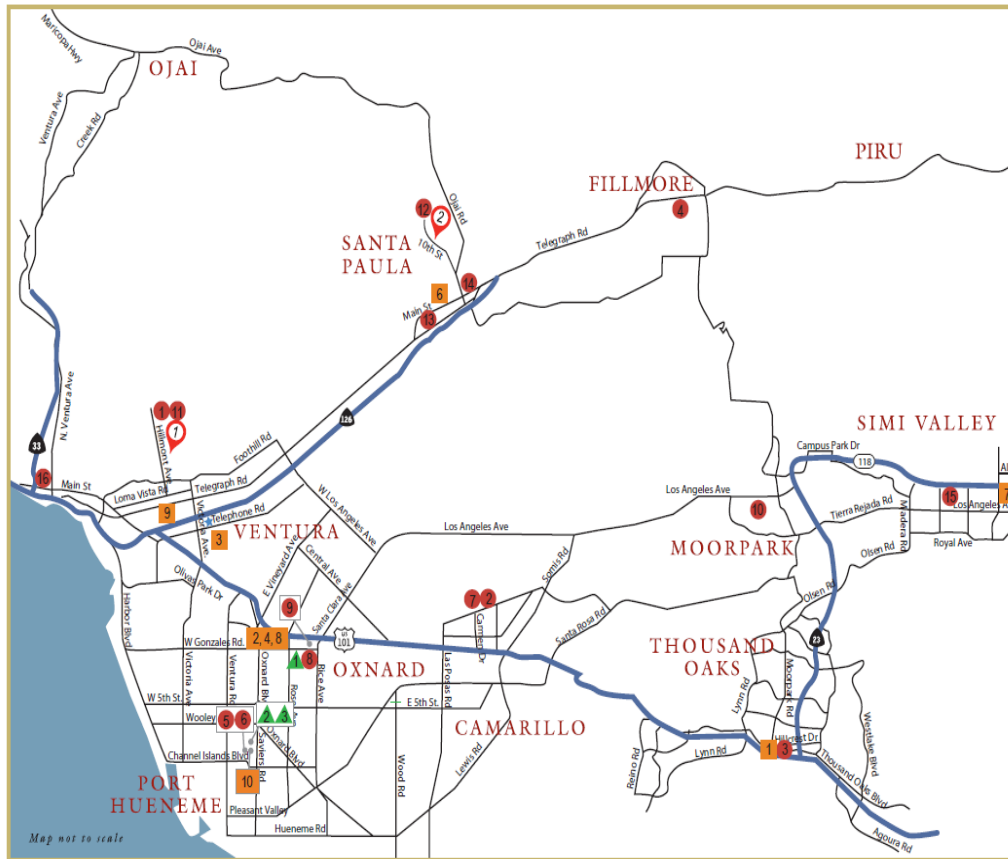
## Specialty Care

- Addiction Medicine
- Cardiology
- Dermatology
- Diabetes
- Endocrinology
- Gastroenterology
- Hematology/Oncology
- Immunology
- Internal medicine
- Infectious disease
- Nephrology
- Obstetrics/Gynecology
- Ophthalmology
- Physiatry
- Pulmonology
- Rheumatology



# Dedicated to Patient Access

## MAP AND LIST OF PRIMARY CARE PROVIDERS



# Federally Qualified Health Centers

Eighteen of the clinics within the County's healthcare system are FQHCs.



Our FQHCs manage more than

**96,000**

patients per year, including approximately

**41,000**

who are below 100% FPL and

**6,000**

who are homeless.

**Test to Treat:** one of 200 FQHCs selected to pilot direct distribution of COVID antivirals



## Grant-Funded Projects

- Access to dental care, mental health services, and substance use disorder treatment programs
- Healthcare for the homeless
- Community outreach
- Health education
- Quality initiatives
- Sliding fee discount program



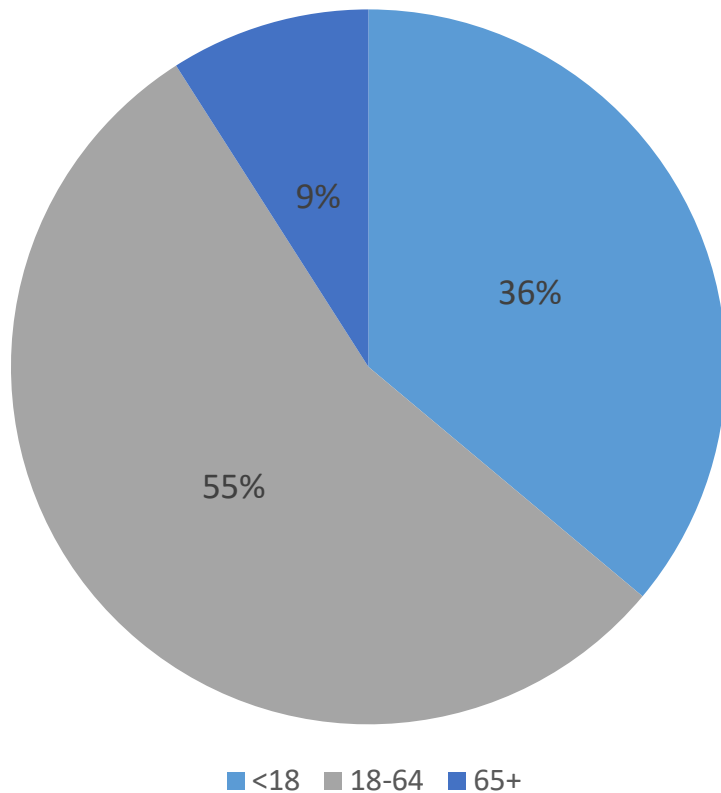
# Our Population in 2021

<b>Health Plan</b>	<b>% of Population</b>	<b>Individuals</b>
<b>Medi-Cal</b>	<b>64%</b>	<b>61,482</b>
<b>Medicare</b>	<b>8%</b>	<b>7,961</b>
<b>Commercial</b>	<b>21%</b>	<b>20,043</b>
<b>Uninsured</b>	<b>7%</b>	<b>7,109</b>

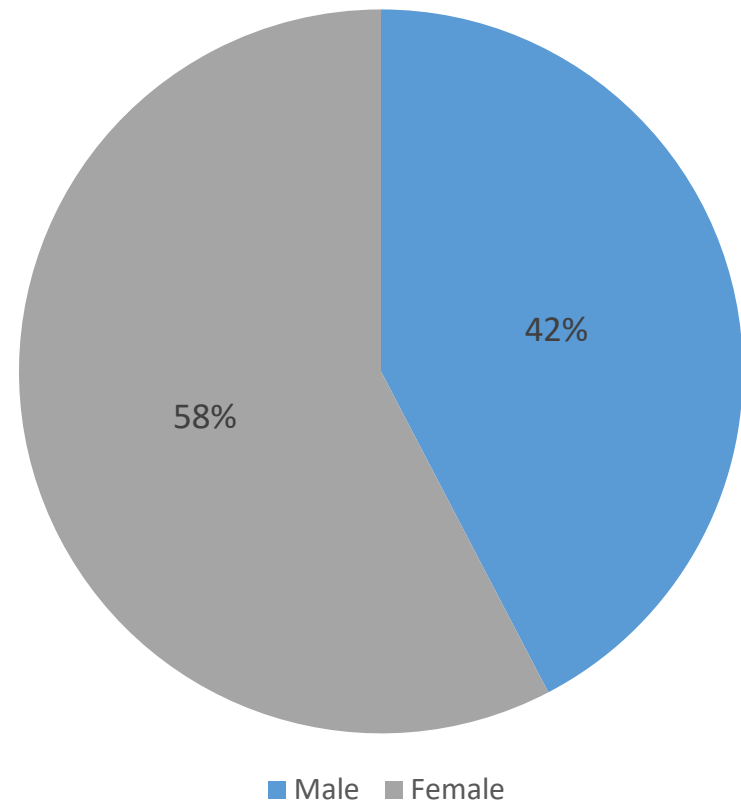


# Patients by Age & Sex at Birth

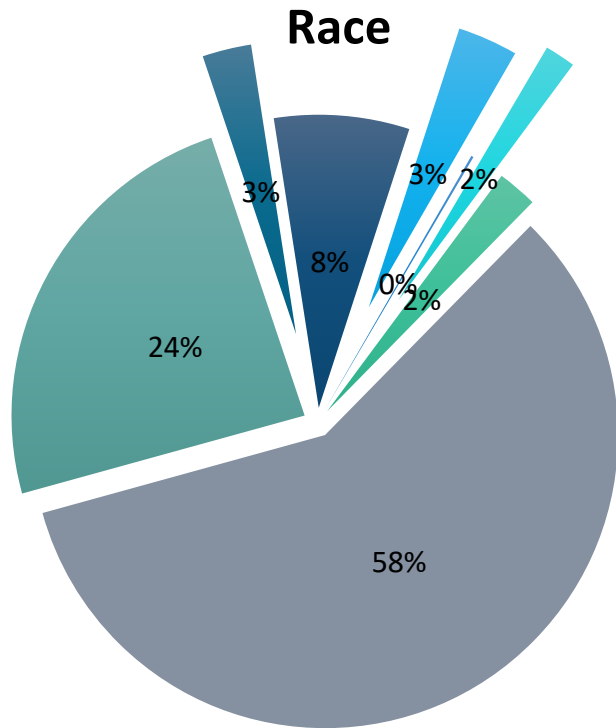
By Age



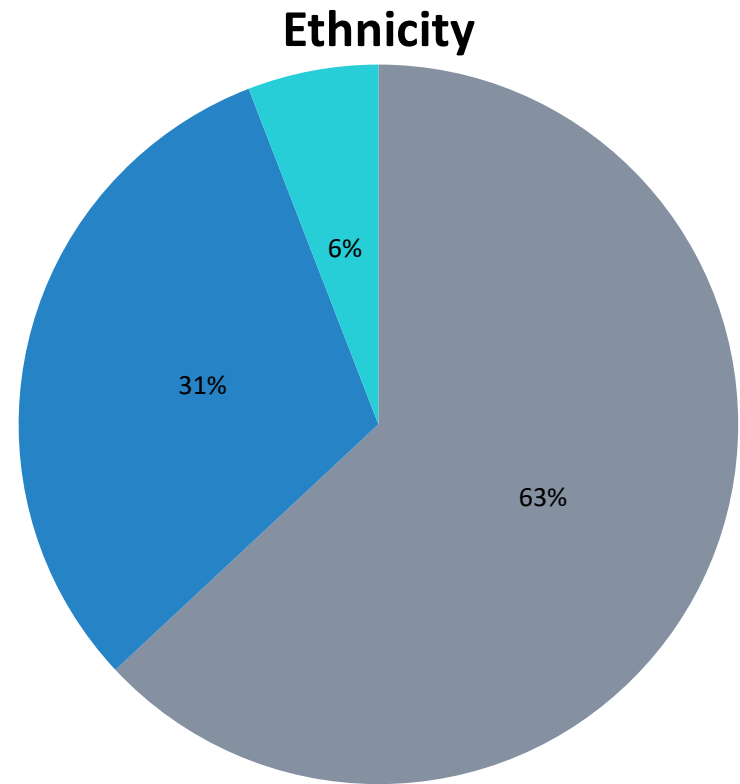
By Sex at Birth



# Patients by Race & Ethnicity



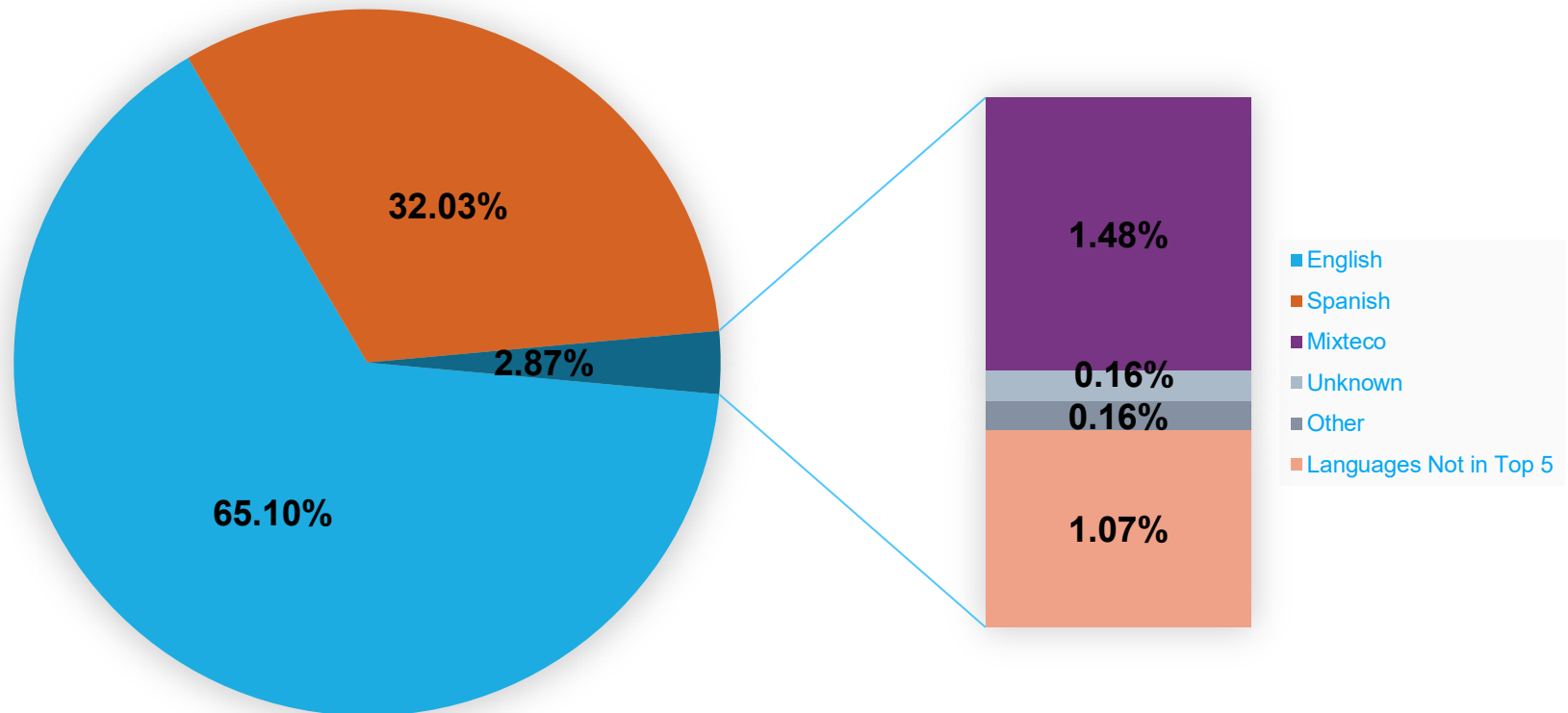
- Asian
- Black/African American
- White - Hispanic
- More than one race
- Hawaiian/Other Pacific Islander
- American Indian/Alaska Native
- White - Non-Hispanic
- Unreported/Refused to report



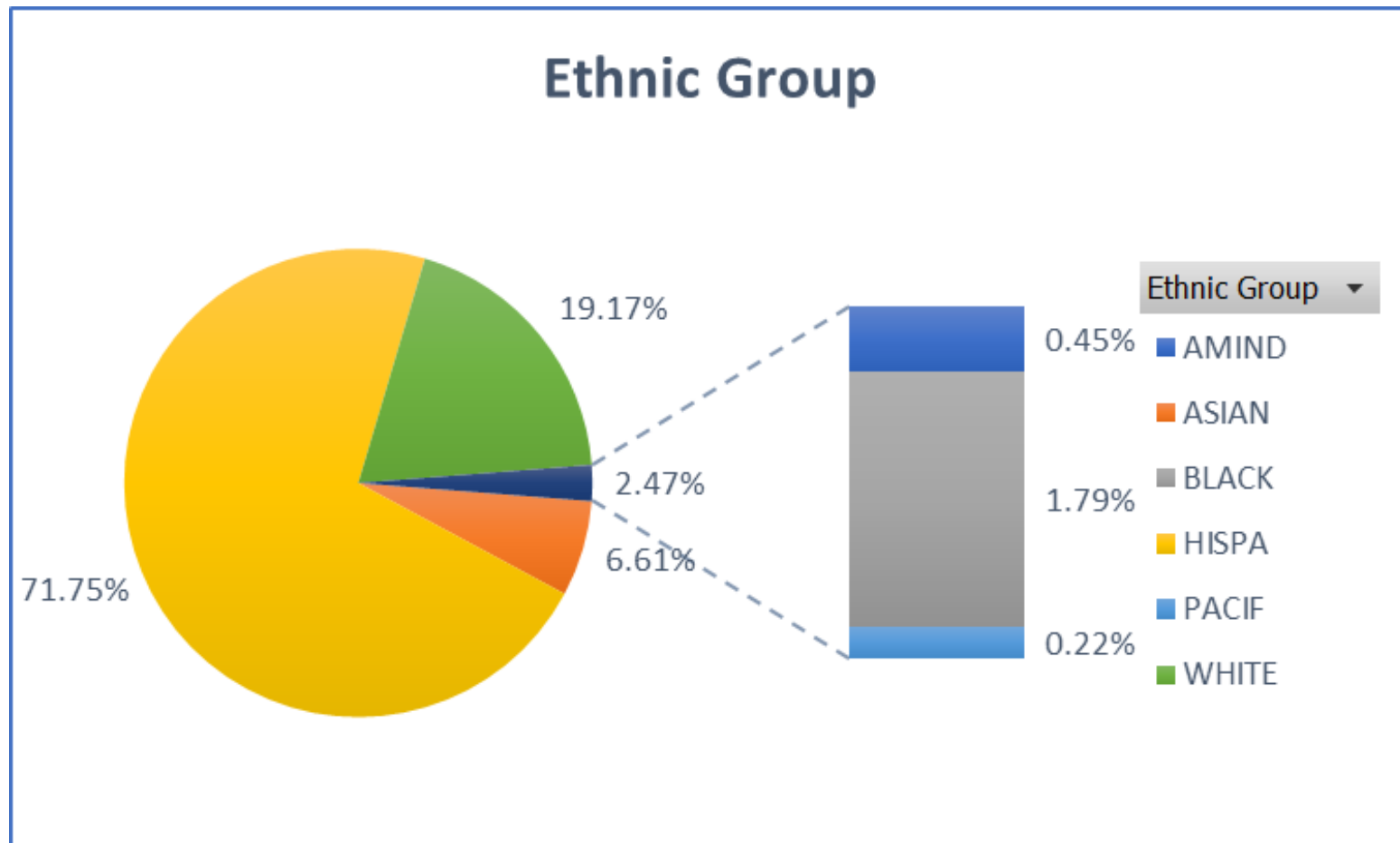
- Hispanic/ Latino
- Non Hispanic/ Latino
- Unreported/Refused to Report Ethnicity

# Patients by Preferred Language

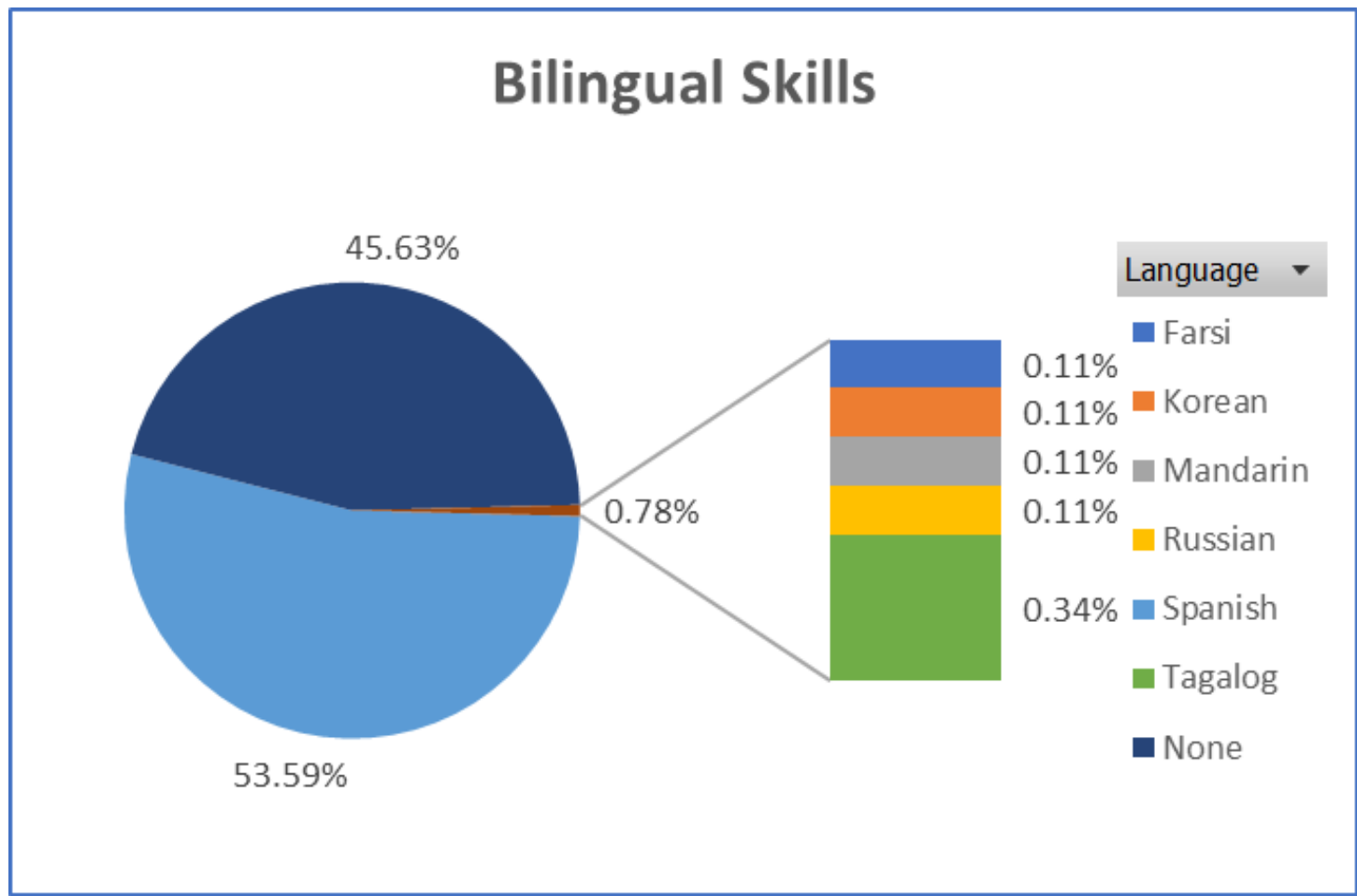
## Universal



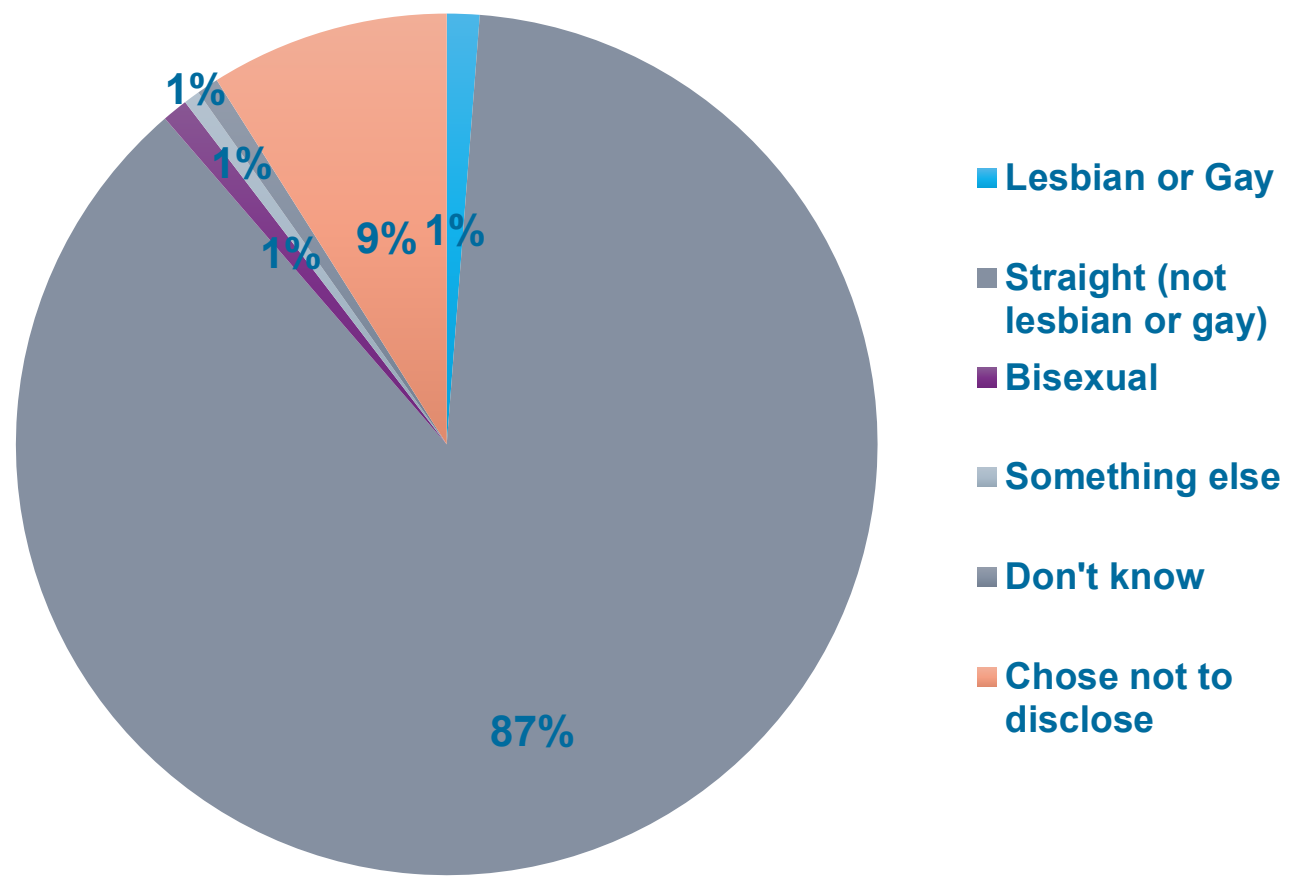
# Ambulatory Care Staff by Race/Ethnicity



# Ambulatory Care Staff by Language Skills



# Patients by Sexual Orientation



# Patients by Gender Identity

Gender Identity	Patients
Male	18233
Female	31600
Transgender Male/ Transgender Man/ Transgender Masculine	99
Transgender Female/ Transgender Woman/ Transgender Feminine	80
Other	107
Chose not to Disclose	910
Unknown	45266



# Top Diagnoses

DIAGNOSIS	% OF HOMELESS
Hypertension	1 23.1%
Overweight/Obesity	2 21.8%
Diabetes	3 13.9%
Anxiety, incl. PTSD	12.4%
Depression & other mood	10.3%

DIAGNOSIS	% OF EVERYONE
Overweight/Obesity	1 20.3%
Hypertension	2 14.2%
Diabetes	3 9.7%
Anxiety, incl. PTSD	7.6%
Depression & other mood	5.8%

# Top Services

SERVICE	% OF HOMELESS
Influenza Vaccine	1 16.0%
Smoking Cessation	2 12.7%
Novel Coronavirus Diagnostic Test	3 11.3%
Selected Immunizations	10.9%
Health Supervision Age 0-11	10.4%

SERVICE	% OF EVERYONE
Influenza Vaccine	1 17.0%
Health Supervision Age 0-11	2 17.0%
Selected Immunizations	3 14.0%
HIV Test	6.8%
Novel Coronavirus Diagnostic Test	6.1%



VENTURA COUNTY  
**AMBULATORY CARE**

**THANK YOU**

**ACADMIN@VENTURA.ORG**

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VENTURA COUNTY

**BEHAVIORAL HEALTH**

A Department of Ventura County Healthcare Agency

# BEHAVIORAL HEALTH SYSTEM OVERVIEW

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**Dr. Loretta Denering, Assistant Director**

# Mental Health Plan Mandate

The Mental Health Plan (MHP) *shall*

**provide**, or **arrange** and **pay** for,

the following **medically necessary** covered

**S**pecialty **M**ental **H**ealth **S**ervices (SMHS)

*to Medi-Cal beneficiaries with serious mental illness.*

# Services Provided Currently by County Behavioral Health Plan

Mental health services

Medication support  
services

Day treatment intensive

Day rehabilitation

Crisis intervention

Crisis stabilization

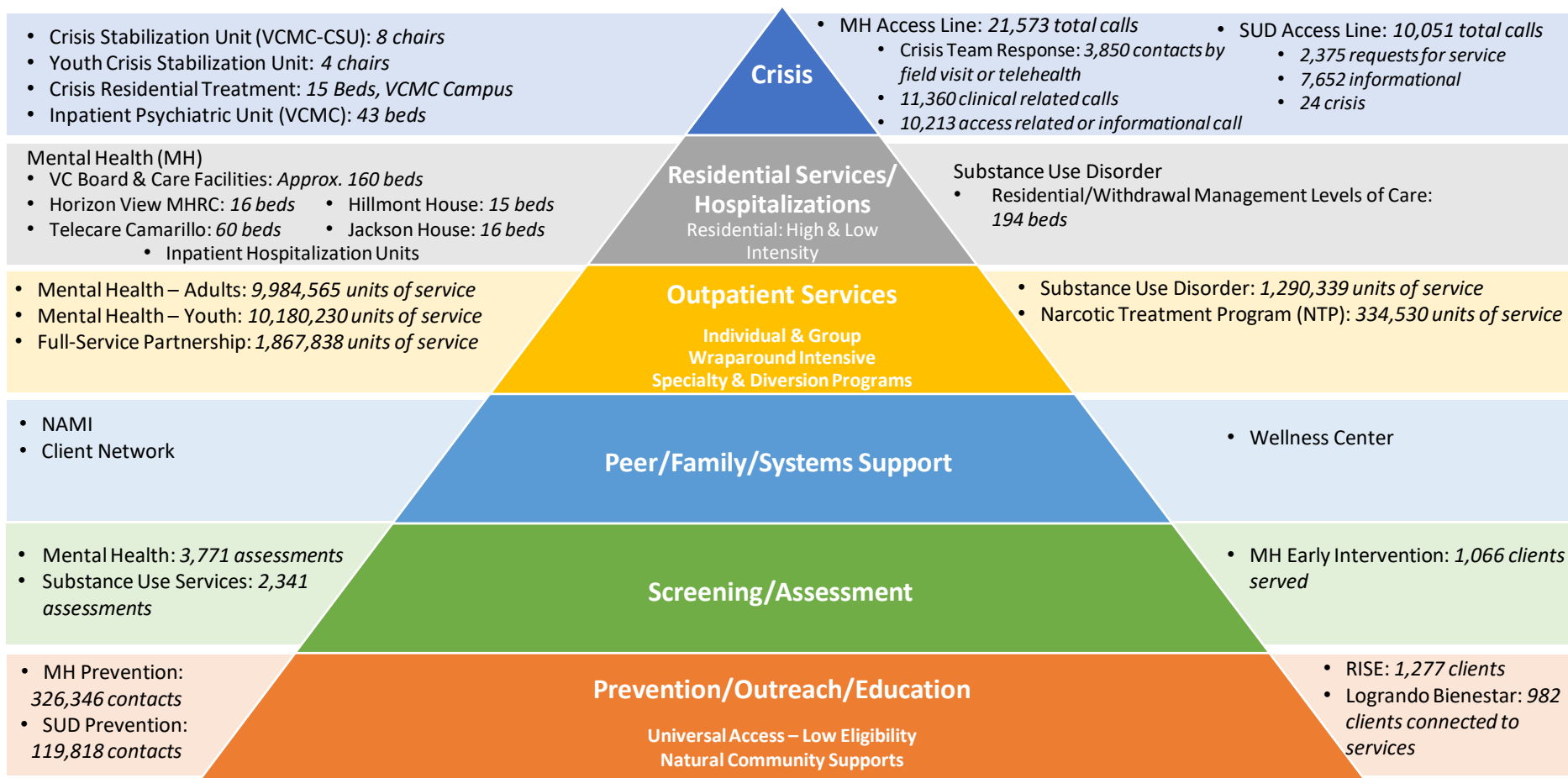
Adult & Children  
residential treatment  
services

Crisis residential  
treatment services

Psychiatric health facility  
services & inpatient  
hospital services

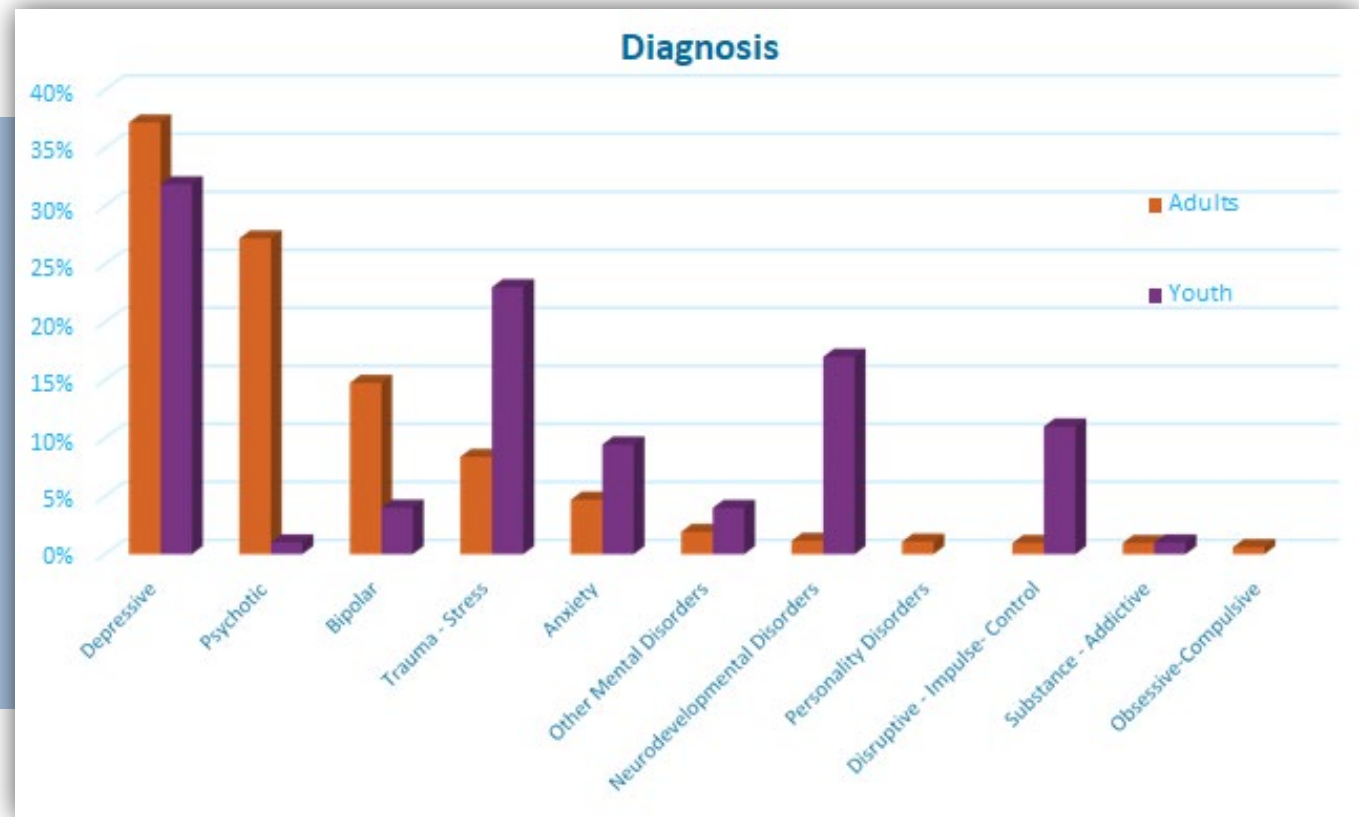
Therapeutic behavioral  
services, Intensive home  
based services and  
coordination

# VCBH Services: Continuum of Care FY 2020-21



# Target Population

Medi-Cal beneficiaries suffering from severe mental illness or children with severe emotional disturbance.





# Accessing Services: *No Wrong Door*

## STAR Program

- Screening, Triage, Assessment and Referral
- Centralized Point of Access
- 24/7 Access Line



## Regional Clinics

- Direct access for consumers
- Collaboration with STAR to expedite access



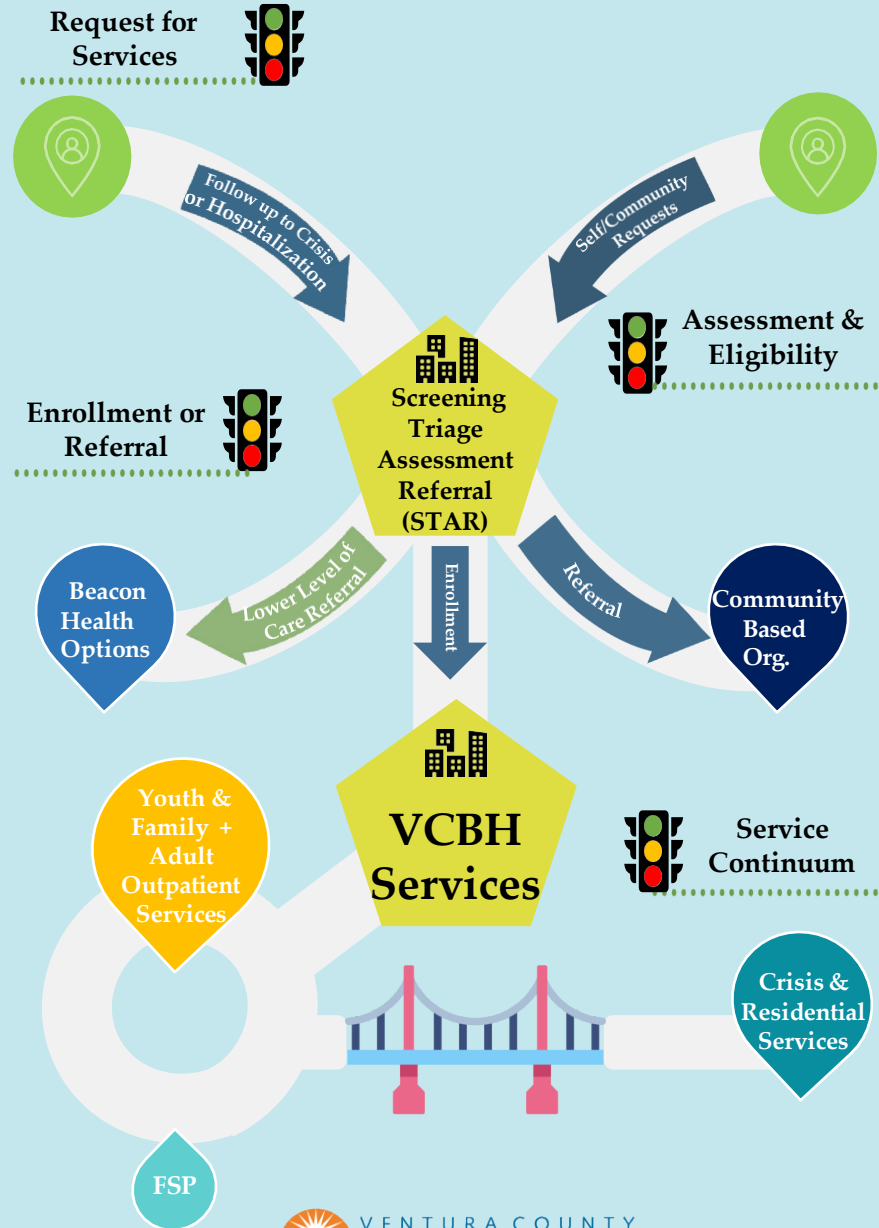
## Contracted Providers

- Embedded in communities
- Assessments and Services



# VCBH Roadmap to Services

As of July 17, 2021



# Adult Services Division

# Adult Services Division: Who We Serve

- ❖ Adults with a serious mental illness and significant functional impairment who fall into one of three age groups:
  - ❖ Transitional-Aged Youth (18-25)
  - ❖ Adults (26-60)
  - ❖ Older Adults (60+)
- ❖ Vast majority of treatment is voluntary, outpatient services with roughly half of the adult clients enrolled less than 2 years.
  - ❖ Some VCBH clients are under full conservatorship and require placement in locked facilities.



# County Operated Programs: Adult Services

Six Regional Outpatient Clinics

Services to Jails / Justice Involved

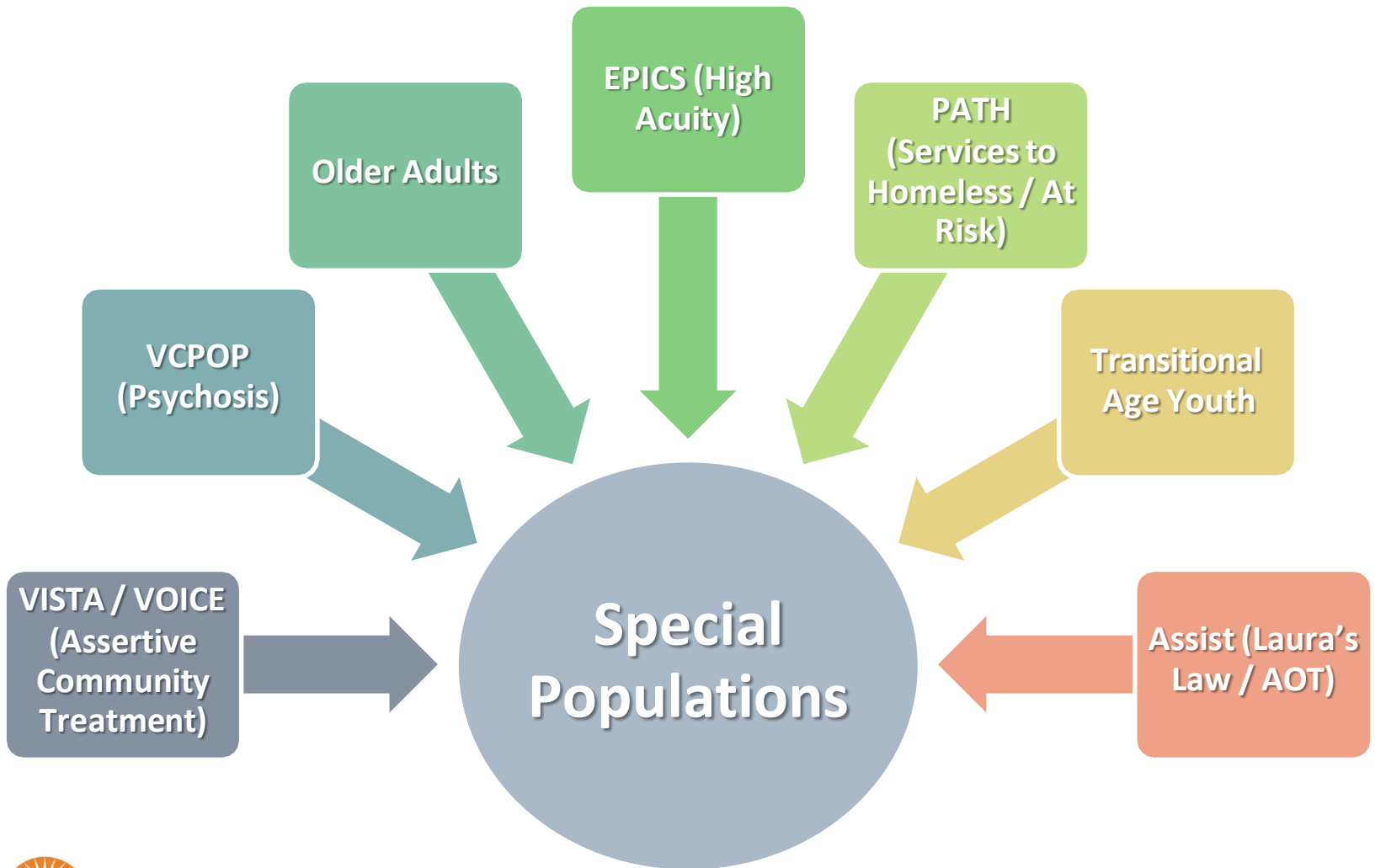
Residential Services

Crisis Response Services

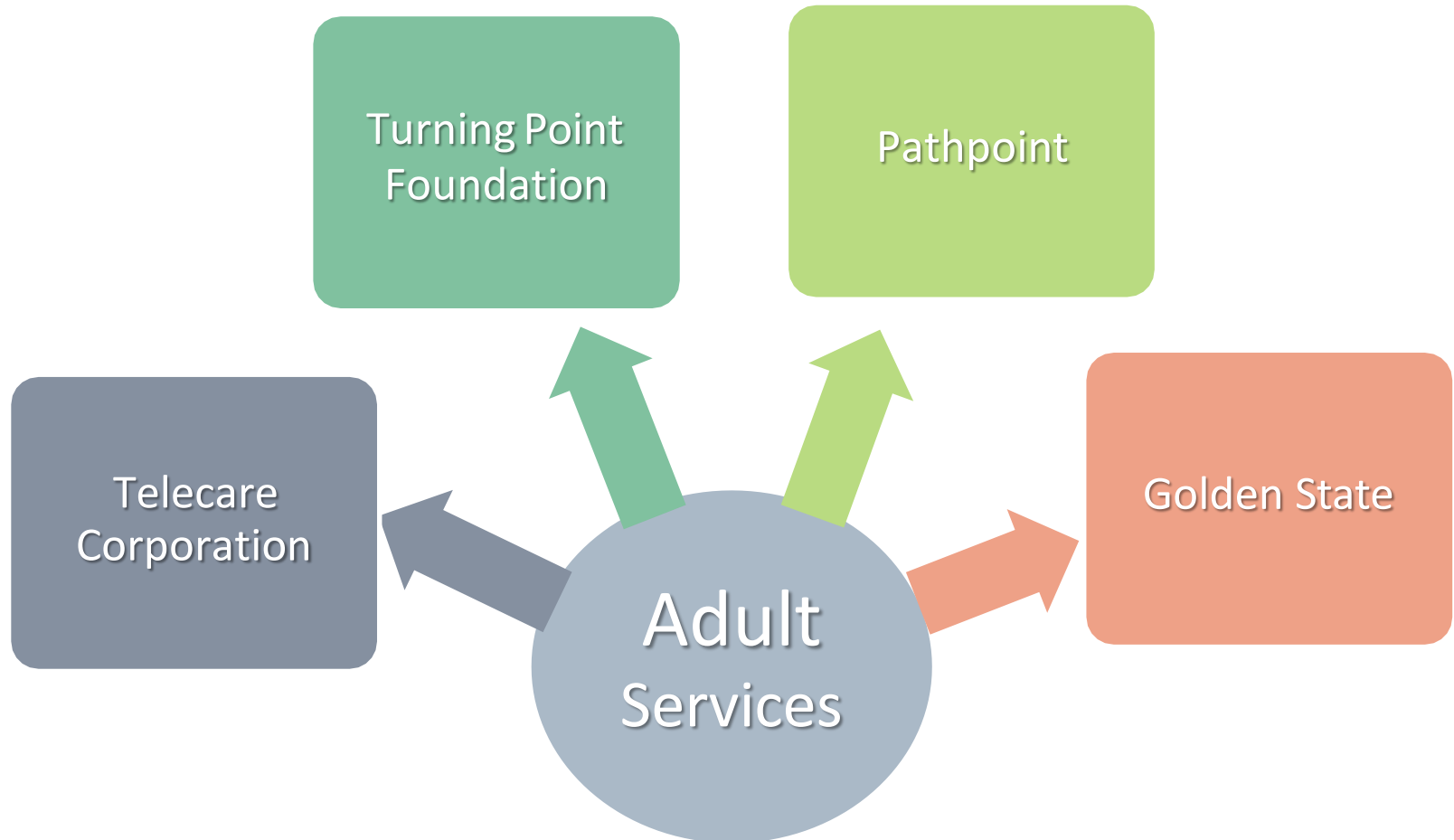
Crisis Stabilization Services

Inpatient Psychiatric Services

# Specialized Services and Programs



# Our Valued Partnerships – Adult Services





# Fundamentals of Specialty Mental Health Treatments of Adults

## Functional Impairment

demonstrated abilities over time

		High	Low
Acuity current presentation	High	<b>Intensive MH Services</b> High staff to client ratios <b>and/or</b> clinical placement	<b>Psychiatric Stabilization</b> Medication, possible hospitalization, to return to living situation
	Low	<b>Maintenance of Psychiatric Stability</b> insured compliance with treatment <b>and</b> appropriate living situation	<b>Transition in Care</b> still requiring specialty mental health services?

The Recovery Path is the movement between these four quadrants.

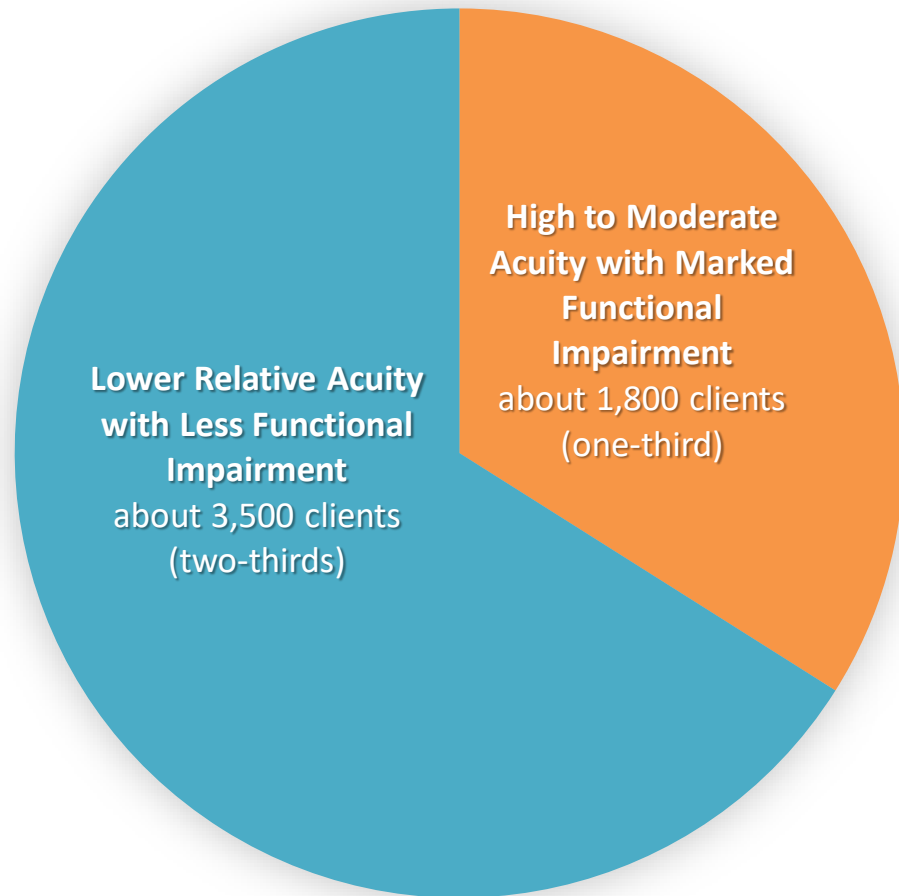
# Acuity and Functional Impairment Operationalized

## ❖ **Acuity Index**

a “high,” “moderate,” or “low” designation generated in VCBH’s electronic health record based on the number and recency of a client’s psychiatric hospitalizations.

## ❖ **Functional Impairment**

Based on the Milestones of Recovery Scale (MORS) a standardized tool which treating staff assign based on the client’s level of functioning in the community.



# Caring for those with the highest acuity and marked functional impairment

VCBH's approach to care strives to be client-centered and with the diverse array of clients we treat, we need to be able to draw on a wide range of clinical options.

- ❖ Different levels of care/placement
- ❖ Different characteristics and specialties/expertise
- ❖ Different sizes and locations

The combination of County “operated” and other contracted facilities affords us the maximum flexibility in individualizing the treatment approach and responding to changing demand.

# Services through Contracted Providers

Mental Health Rehabilitation Centers

Adult Residential Care Facilities

Adult Crisis Residential Treatment Center

TAY / Adult Wellness Centers

# Further Development along the Continuum of Care

There is a number of county-private partnerships which promise to add to VCBH's continuum of care:

- ❖ **120-bed locked Mental Health Rehabilitation Center (MHRC)**  
*Discussions are in place and plans moving forward to bring to County.*
- ❖ **15-bed Crisis Residential Treatment (CRT)**  
*Facility is set to open Fall 2021.  
(Alvarado Parkway Institute, API)*
- ❖ **Retainment of 60 beds**  
*Board & Care and a Residential Care for the Elderly: worked with new owners and Turning Point Foundation to continue operation of this vital housing/treatment resource.  
(Luke McCarthy and MTI Capital)*
- ❖ **Awarded Behavioral Health Integration Grant** *through Gold Coast Health Plan to add 2 positions to provide linkage to services following hospital discharge.*

# Youth and Family Services Division

# Youth and Family Division: Who we Serve

**Youth (0-21) and their families who fall into one or more of the following:**

**Largest group is our Medi-Cal recipients who are assessed and meet “medical necessity criteria” per California Code of Regulations**

- ❖ Mental health diagnosis
- ❖ Significant functional impairment or a probability of impairment developing
- ❖ Cannot be addressed with physical medicine

**Youth we serve through contracts / collaborations with other agencies**

- ❖ Contracted services with School Districts
- ❖ Collaborations with Humans Services Agency for children in dependency
- ❖ Contracted services with our Juvenile Justice Center
- ❖ Contracted services for CalWORKs parents





# County Operated Programs: Youth Services

Assessment and Referral

Individual, Family and Group Therapy

Intensive Care Coordination

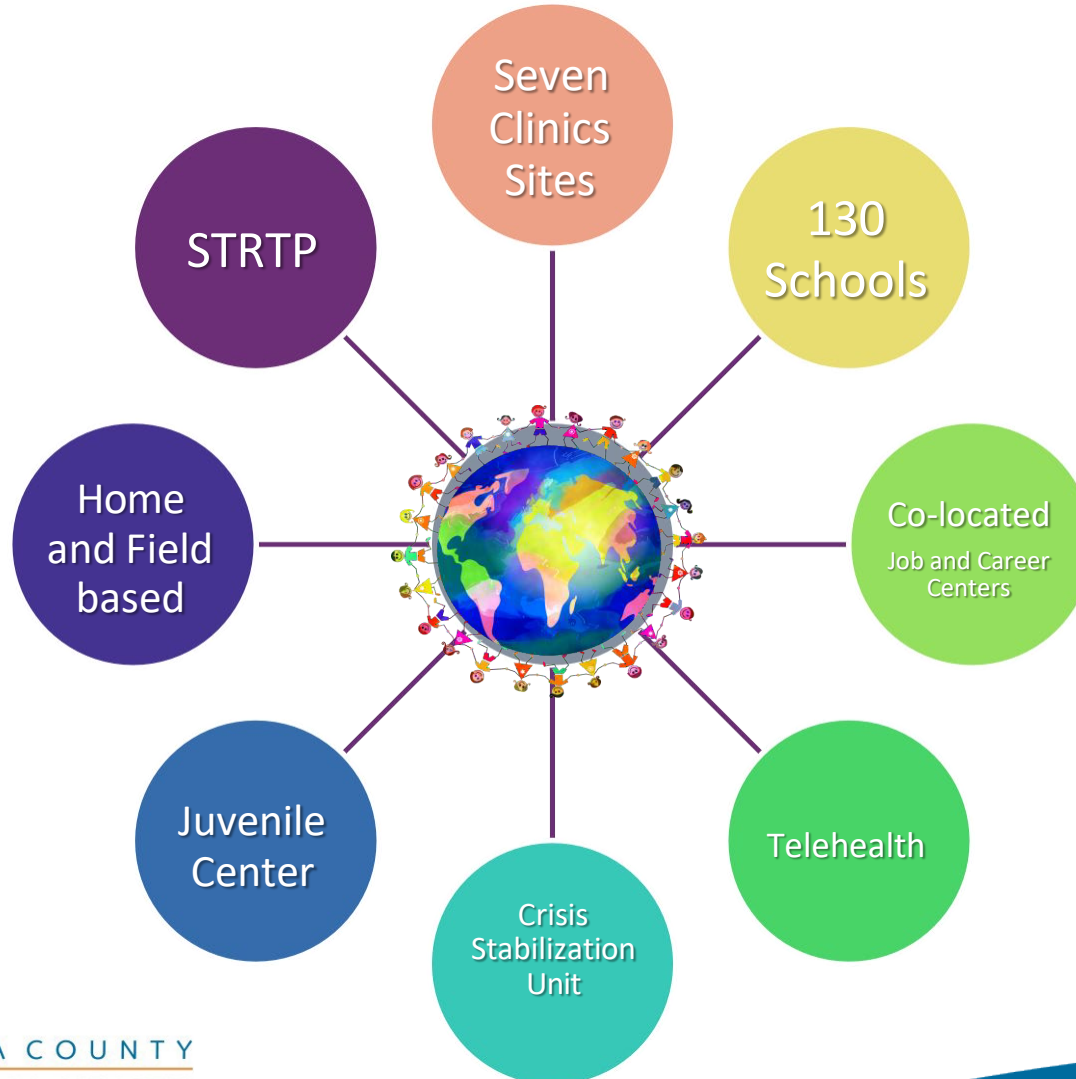
Behavioral Services (TBS/IHBS/WRAPAROUND)

Medication Administration and Monitoring

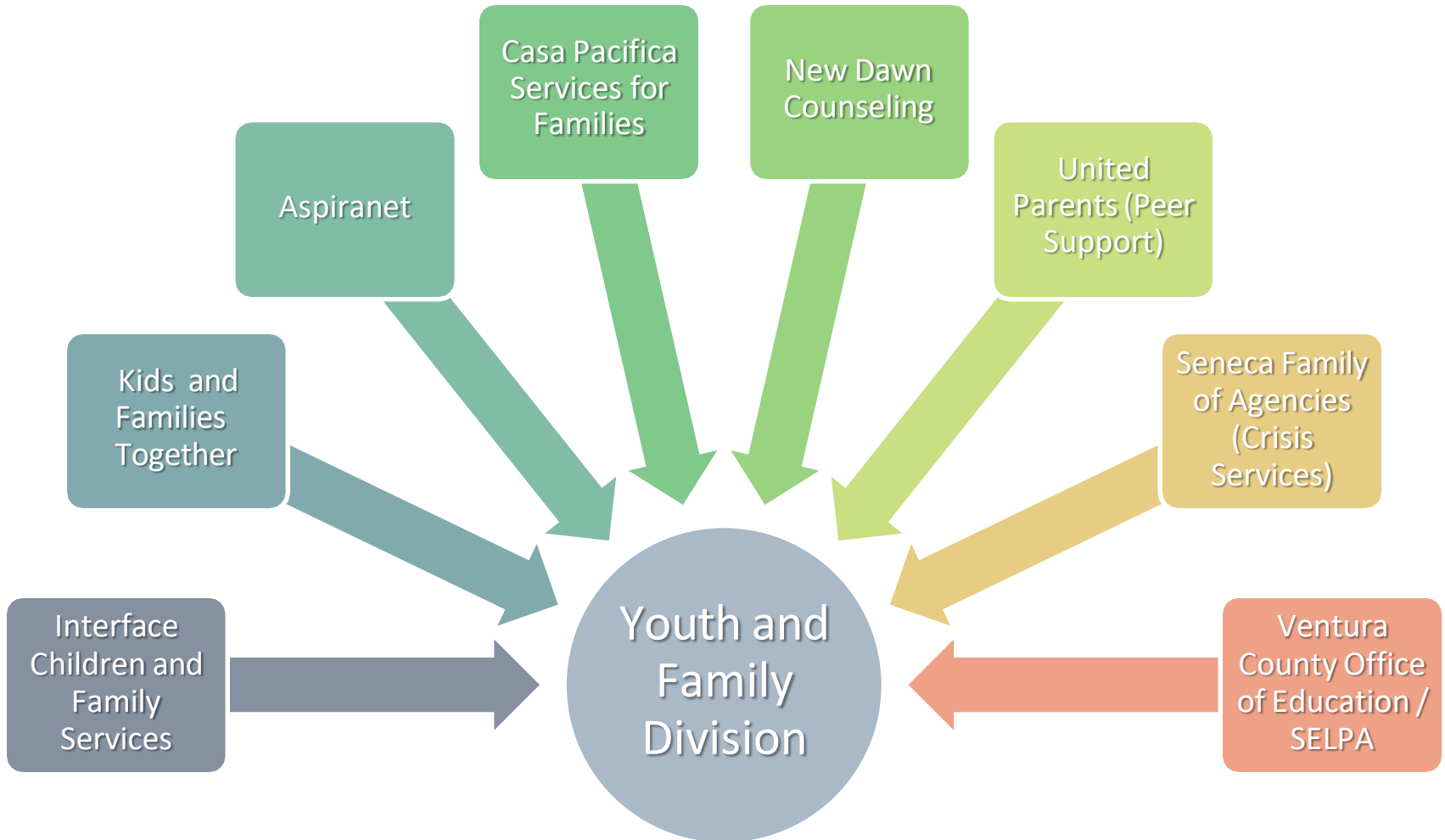
Crisis Intervention Services/CSU/Disaster Response

Teaming: IEP, Child and Family Team Meetings, ICMC

# County Operated Programs: Youth Services Venues



# Our Valued Partnerships



# Substance Use Services Division

# Substance Use Services (SUS) Division: Who We Serve

## PRIMARY POPULATION

### Drug Medi-Cal (DMC) Beneficiaries

Adult and adolescent DMC beneficiaries meeting “medical necessity criteria” for a Substance Use Disorder (SUD) per Department of Health Care Services (DHCS) regulations

### Justice Involved Clients

Individuals referred through the Probation Department and other agencies that need medically necessary SUD treatment

### Perinatal Clients

Specialized medically necessary SUD treatment services for pregnant and parenting women

### “At-risk” Individuals

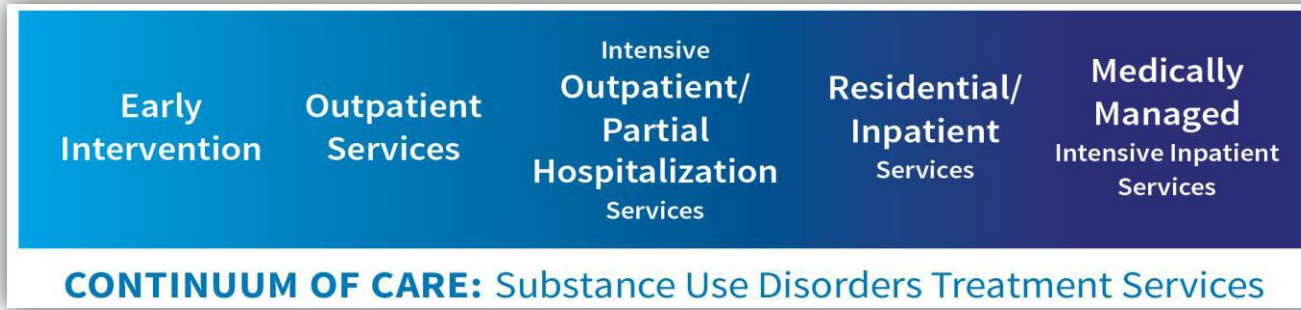
*Clients address problematic lifestyle issues related to their substance use through research-based, flexible and practical educational curriculum.*

### Community

*Through multiple community-based primary prevention initiatives, we engage in strategic and data-driven environmental prevention strategies to address local substance use and misuse.*

# Substance Use Disorder Plan Mandate

The **Drug Medi-Cal Organized Delivery System** (DMC-ODS) is a California Department of Health Care Services (DHCS) managed care plan that organizes and transforms the delivery of health care services for Medicaid-eligible individuals with substance use disorders (SUD).



DMC-ODS counties are required to provide a continuum of services to eligible beneficiaries modeled after the ASAM Criteria. These services also include:

- ❖ 24/7 SUD Access Line (844) 385-9200
- ❖ Withdrawal Management (Detox)
- ❖ Multiple Levels of Residential Treatment
- ❖ Care Coordination
- ❖ Recovery Support Services
- ❖ Medication Assisted Treatment (MAT)

# VCBH Delivered Mandated Substance Use Treatment Levels Of Care

## ADULT AND YOUTH SERVICES

Six County-operated substance use disorder outpatient/intensive outpatient clinics and multiple field-based sites provide the following services:

Screening

American Society of Addiction Medicine (ASAM)-based Assessment

Individual and Group Counseling

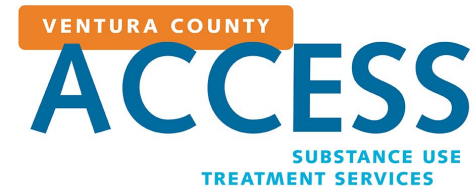
Crisis Intervention

Family Therapy

Case Management

Recovery Support Services

Medications for Addiction Treatment (MAT)



**ACCESS LINE**  
**1-844-385-9200**

Toll-free • 24/7



# VCBH Contracted Mandated Substance Use Treatment Levels Of Care

## Residential Treatment

Three levels of short-term 24-hour residential care for rehabilitation services in a non-institutional setting for adults, perinatal, and youth

## Residential/Inpatient Withdrawal Management (Detox)

Intake, observation, medication services and discharge services

## Opioid (Narcotic) Treatment Program

Daily or several times weekly opioid agonist medication and counseling available to maintain stability for those with opioid use disorder

## Specialty Outpatient Treatment for Justice Involved Clients

Individuals are referred through the Probation Department and other agencies who need medically necessary SUD treatment that incorporates evidence-based practices to address criminogenic problems

# Mandated Driving Under The Influence Programs

The Ventura County Driving Under the Influence (DUI) Program offers a First Offender DUI Program and a Multiple Offender DUI Program for individuals convicted of driving under the influence of any substance.

## OBJECTIVES

- ❖ Reduce the number of repeat DUIs
- ❖ Provide opportunity for clients to explore problems related to their alcohol or other drug use
- ❖ Satisfy court and DMV terms/return of driver's license

## MANDATED SERVICES FOR DUI

- ❖ Intake and Orientation
- ❖ Assessment of substance use/misuse with referrals to treatment when indicated
- ❖ Face to face brief interventions
- ❖ Group sessions
- ❖ Educational sessions
- ❖ Re-entry group for clients with multiple DUI offenses
- ❖ Exit interviews



# Substance Use Block Grant (SABG) Mandated Prevention Services



***Thank You!***

***[www.vcbh.org](http://www.vcbh.org)***

***[www.wellnesseveryday.org](http://www.wellnesseveryday.org)***



VENTURA COUNTY

**BEHAVIORAL HEALTH**

A Department of Ventura County Healthcare Agency

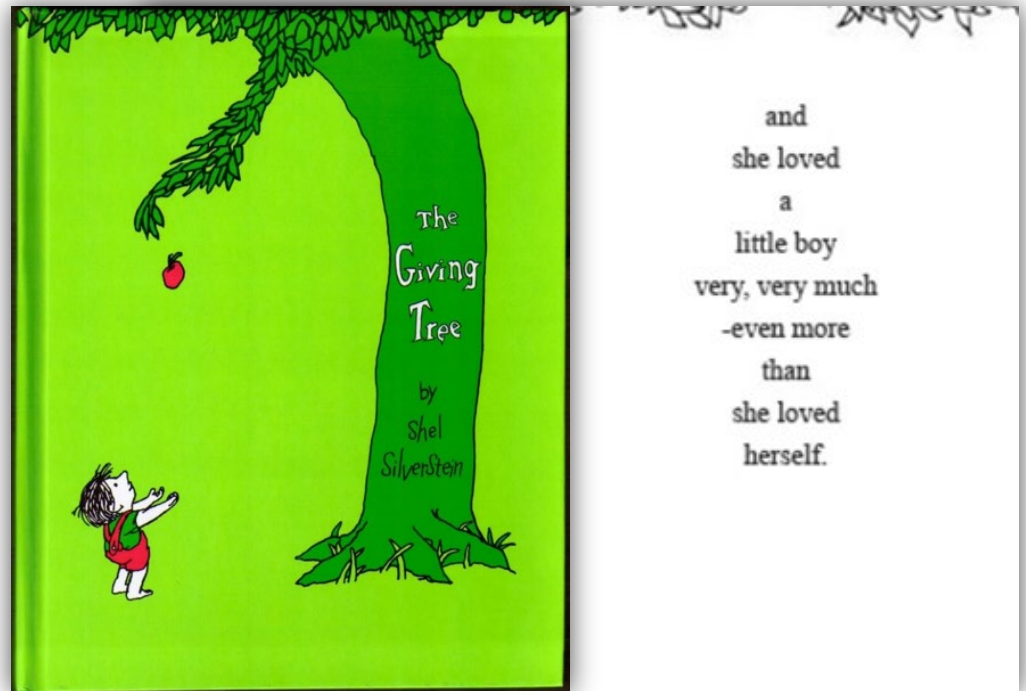
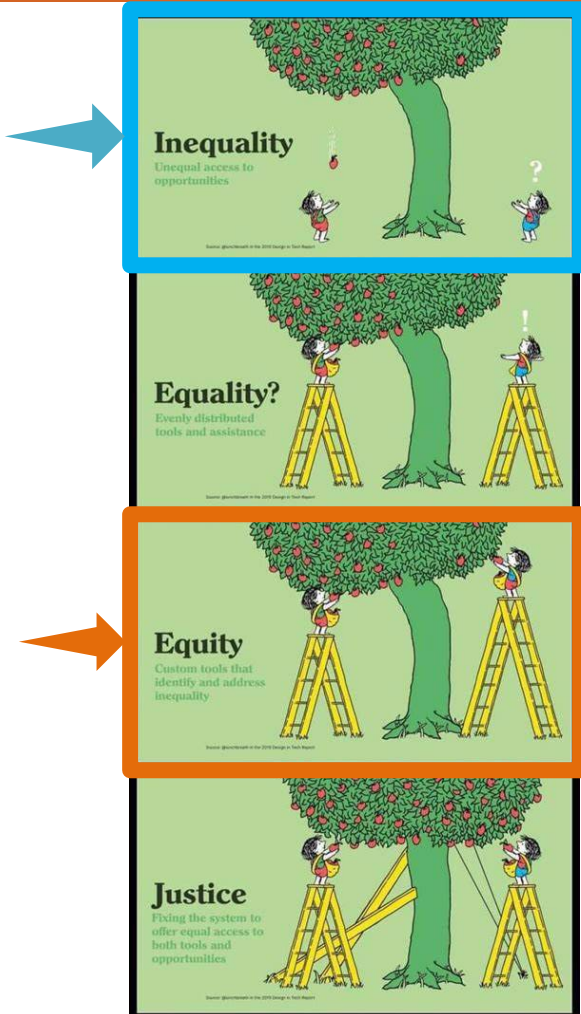
# BEHAVIORAL HEALTH DEPARTMENT

## Health Equity in Access and Services Overview

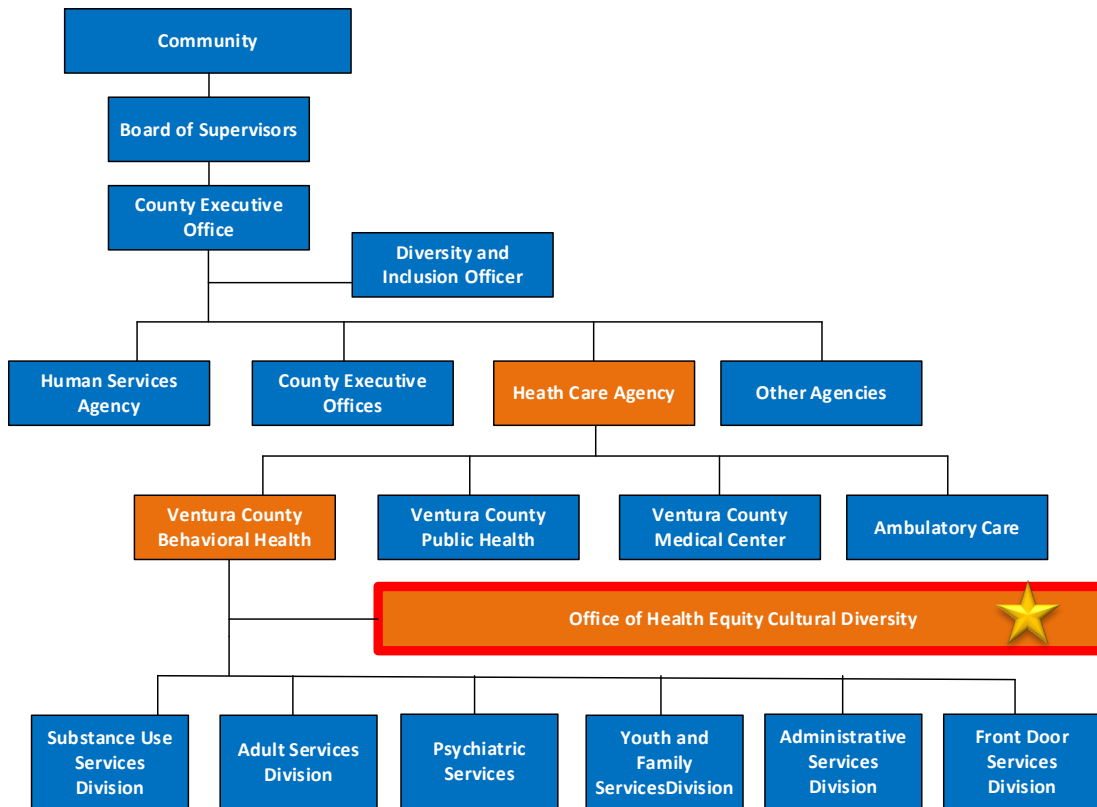
**Cynthia Salas**

Health Equity/Ethnic Services and Cultural/Linguistic Manager

# Equity



# County of Ventura Organizational Chart





# Mandates

Civil Rights Act (1964)

U.S. DHHS Office of  
Minority Health

- Culturally and Linguistically Appropriate Services (CLAS) Standards

State Statutory Mandates

- State Department of Health Care Services
- Title 9 California Code Regulations Section 1810.410

Clinical Standards of  
Practice



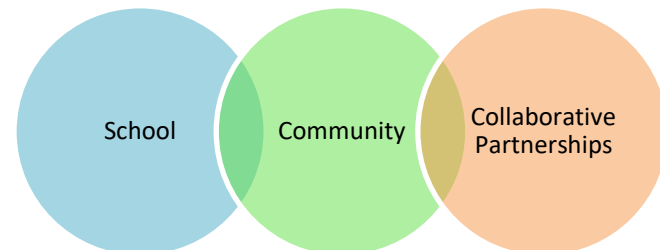
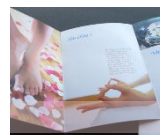
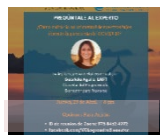
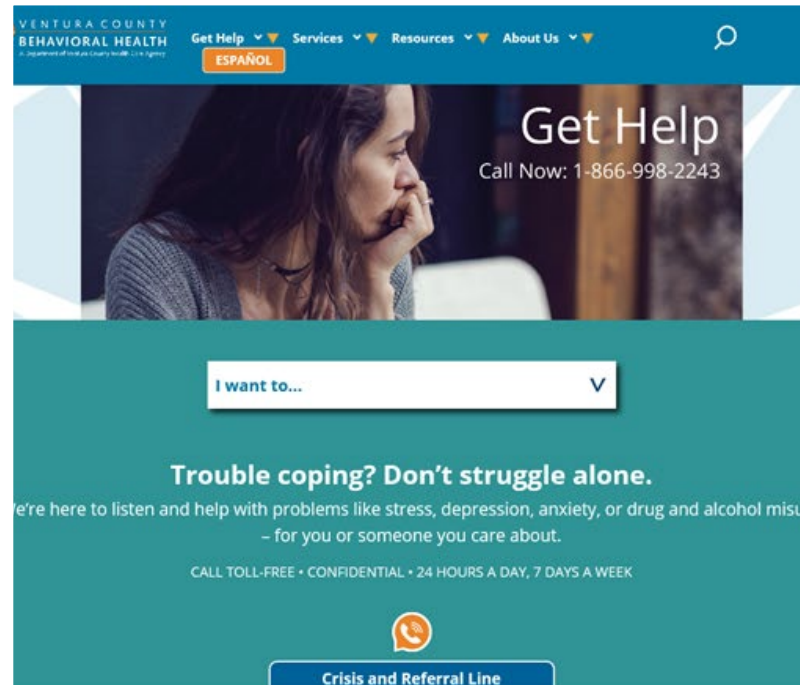
# Office of Health Equity and Cultural Diversity: Outreach and Engagement

## Outreach

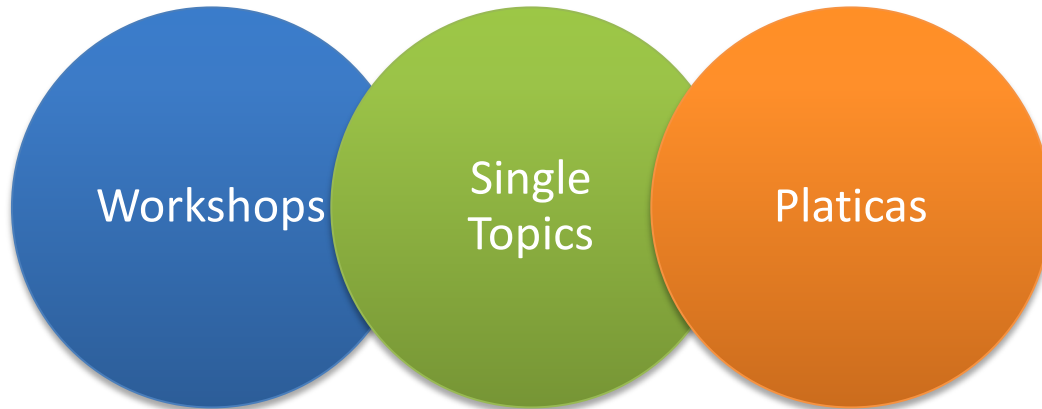
- Printed Materials
- Social Media
- Present in community functions
- Informational sessions

## Engagement

- Platicas
- Support to linkage and access
- Support with navigating health cares system
- Support with connecting with resources



# Office of Health Equity and Cultural Diversity: Community Education



**LA CLAVE**

**What is La CLAVE?**  
La CLAVE is a guide to the symptoms of serious mental illness.

**C False beliefs or delusions**  
Creencias falsas o ideas delirantes  
"He has a camera hidden here and he's watching me to see if I still love him..."

**L Disorganized speech**  
Lenguaje desorganizado  
"Only if I can fly away with the pigeons and then I can run away to the carnival and buy a vacuum cleaner and clean up the streets..."

**A Hallucinations**  
Alucinaciones  
Mistakenly seeing and hearing things that are not seen or heard by other people. Two examples are the following:  
**V Seeing things that others do not see**  
Ver cosas que otros no ven  
"I saw my dead father but no one else in the room saw him. I know he was there. It scared me."

**E Hearing sounds or voices that others do not hear**  
Escuchar sonidos o voces que otros no escuchan  
"I was hearing this man yelling at me, swearing at me. But I was alone."  
For more descriptions visit our website at [UseLaClave.com](http://UseLaClave.com)

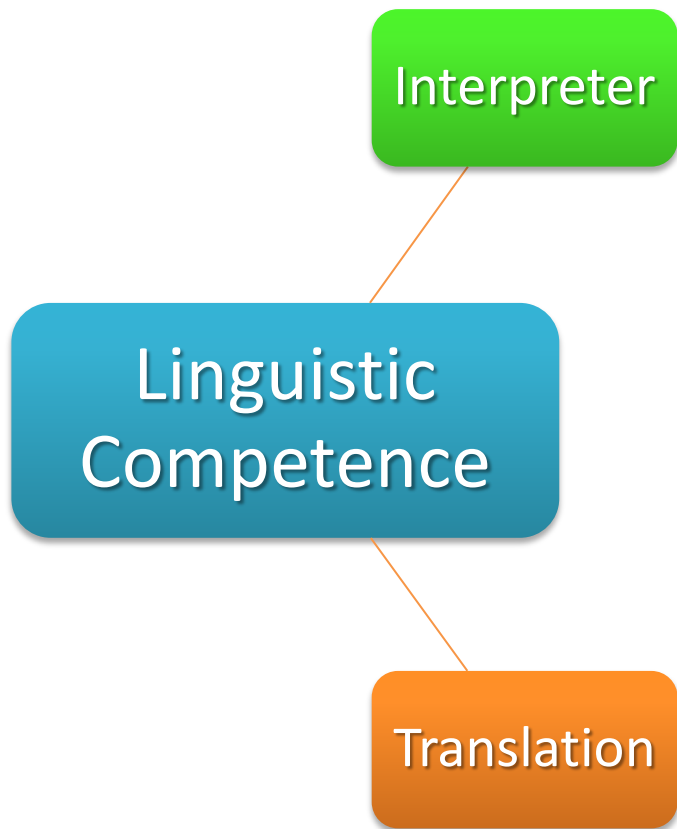
**The Key to Getting Help for Serious Mental Illness**

[UseLaClave.com](http://UseLaClave.com)

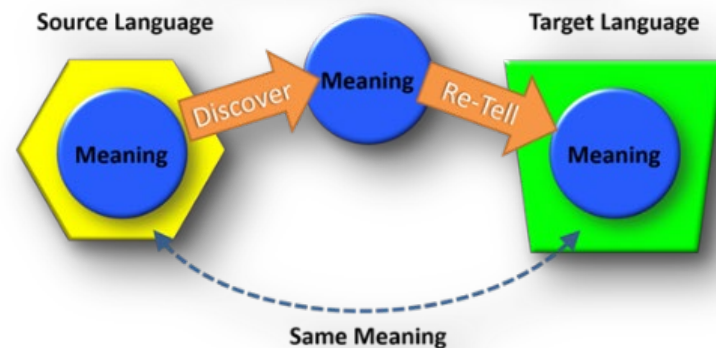
**Get help today!**

For more information about La CLAVE and other resources visit [UseLaClave.com](http://UseLaClave.com)  
This campaign is coordinated by USC University of Southern California

# Office of Health Equity and Cultural Diversity: Linguistic Competence



## Translation Process



# What is Cultural Competency?

## It is the ability to

- ❖ Interact effectively with diverse groups and individuals;
- ❖ Affirm and value worth of individuals, families, and communities; and
- ❖ Protect and preserve dignity; and
- ❖ A core set of knowledge, skills, and abilities that can be learned to respectfully and effectively communicate and serve diverse populations.





# Office of Health Equity and Cultural Diversity: Cultural Competence



# Racial Equity

The promise of our nation is that  
**every American**  
has an **equal** chance to get ahead.

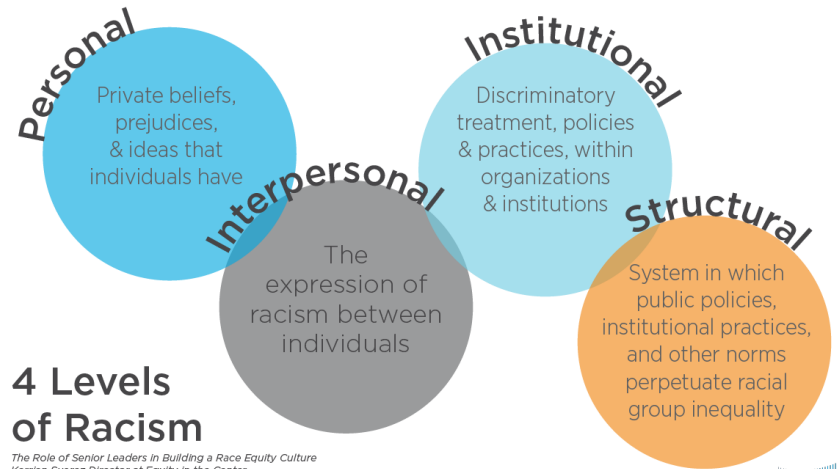
**Yet, *persistent* systemic racism and barriers to opportunity have *denied* this promise for so many.**

President Biden is putting **equity** at the center of the agenda with a whole of government approach **to embed racial justice** across Federal agencies, policies, and programs.

And, President Biden will take bold action to advance a **comprehensive equity agenda** to

- ❖ *deliver* criminal justice reform,
  - ❖ *end* disparities in healthcare access and education,
  - ❖ *strengthen* fair housing, and
  - ❖ *restore* Federal respect for Tribal sovereignty, among other actions
- so that **everyone** across America has the opportunity to fulfill their potential.

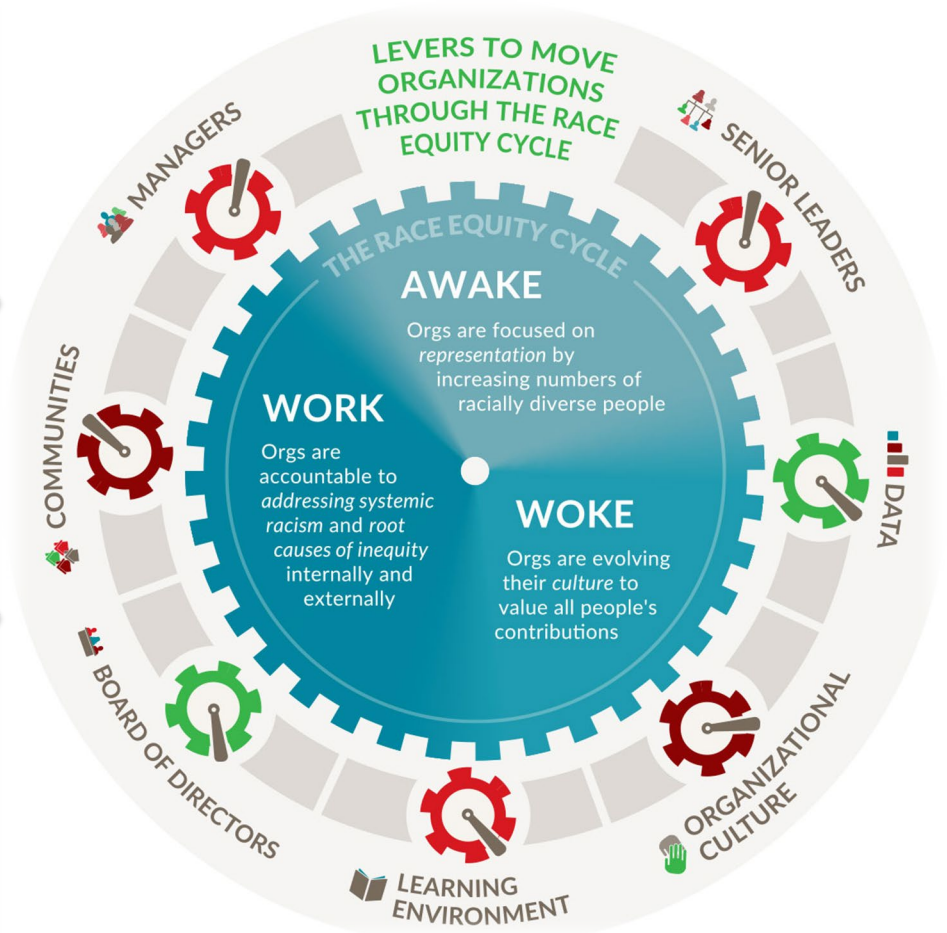
# Office of Health Equity and Cultural Diversity: Racial Equity



*The Role of Senior Leaders in Building a Race Equity Culture*  
Kerrien Suarez Director at Equity in the Center



# Office of Health Equity and Cultural Diversity: Racial Equity





# Cultural Equity Advisory Committee at VCBH

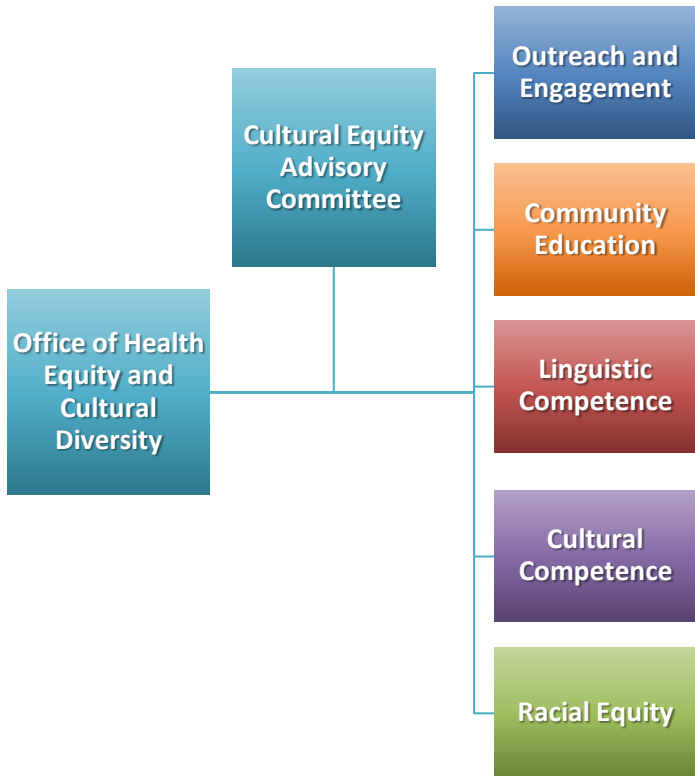
Community Based Organizations

Protected Groups

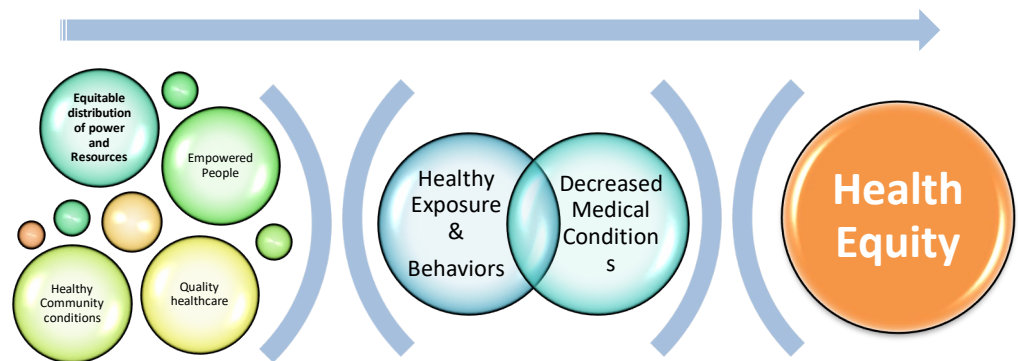
Members with Lived Experience

County Agencies

Office of Health Equity and Cultural Diversity



## Trajectory of Health Equity



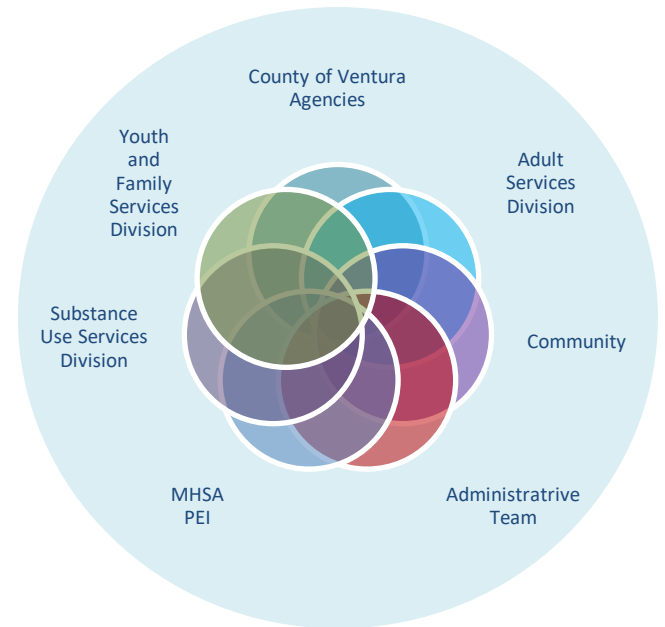
# Thank you for the Space



**Cynthia Salas**

[Cynthia.Salas@ventura.org](mailto:Cynthia.Salas@ventura.org)

805 981-4229





VENTURA COUNTY  
**COMMUNITY HEALTH**  
IMPROVEMENT COLLABORATIVE

# Public Health Overview and Community Health Assessment



VENTURA COUNTY  
PUBLIC HEALTH

Presenter: Rigoberto Vargas, MPH, Director  
Ventura County Public Health

5/17/2022



# Public Health: our Mission, Vision and Initiatives

- **Mission:** To support environments that protect and promote the health and well-being of everyone in Ventura County.
- **Vision:** To be the healthiest county in the nation
- **Key Initiatives and Focus Areas**
  - Community Health Planning: Health Assessment and Community Health Improvement Collaborative
  - Healthiest County by 2030 Initiative: National County Health Rankings
  - Social Determinants of Health and Health Equity

# Department Overview: Programs and Services from “A to W”

- AIDS/HIV Programs
- Adolescent Family Life Programs
- Birth/Death Registration (Vital Records)
- Children’s Medical Services
- Communicable Disease Control
- Chronic Disease Prevention
- EMS and Emergency Preparedness Office
- Field Nursing Programs
- Immunization Programs
- Lead Prevention and Abatement
- Maternal, Child Adolescent Health
- PH Clinics, including TB Specialty Clinic
- PH Laboratory
- Women, Infant and Children (WIC)





# Ventura County Community Health Improvement Collaborative

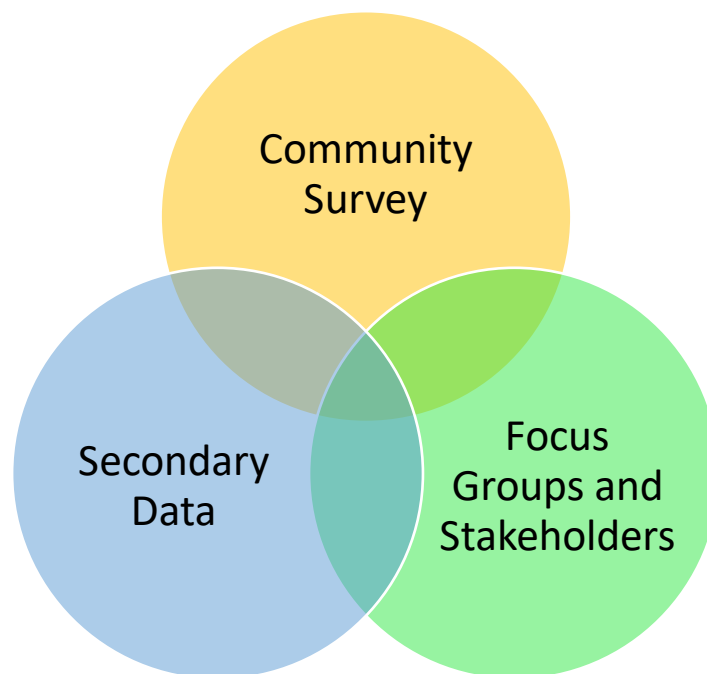




# Community Health Assessment Process

## Secondary Data Collected:

- American Community Survey
- CDPH
- California Healthy Kids Survey
- CDC
- Hospitalization Data
- And many more....



## Primary Data Collected:

- Community Input Survey
- Focus Groups with Special Populations and Stakeholders
- Analysis of Vital Records Data



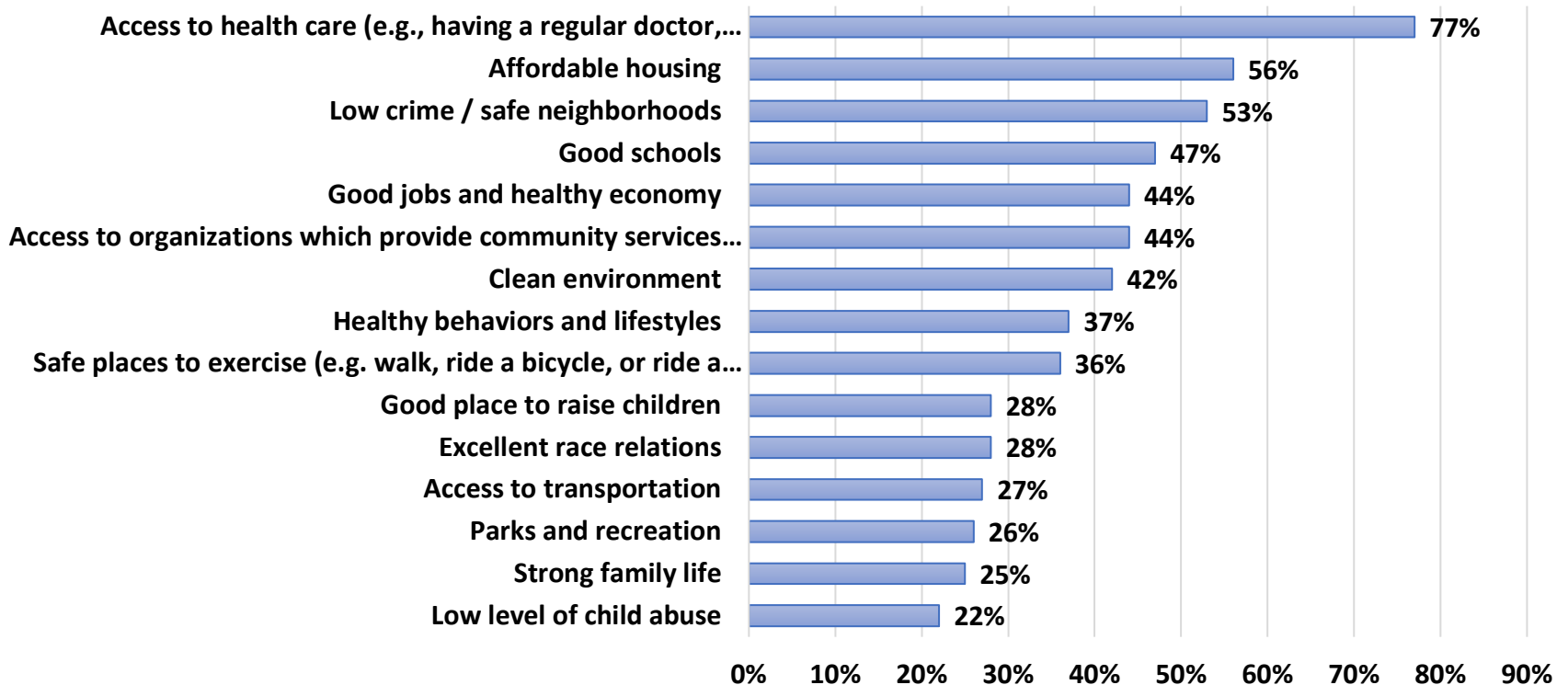
# Current Race/Ethnicity Demographics

	Ventura County	California
<b>Total Population</b>	<b>842,465</b>	<b>39,725,146</b>
<b>% Black/African American (NH)</b>	<b>1.8%</b>	<b>5.4%</b>
<b>% American Indian/Alaska Native (NH)</b>	<b>0.3%</b>	<b>0.4%</b>
<b>% Asian (NH)</b>	<b>7.4%</b>	<b>15.0%</b>
<b>% Native Hawaiian/Pacific Islander (NH)</b>	<b>0.2%</b>	<b>0.4%</b>
<b>% Population White (NH)</b>	<b>42.9%</b>	<b>36.4%</b>
<b>% 2+ races (NH)</b>	<b>2.6%</b>	<b>3.1%</b>
<b>% Some other race (NH)</b>	<b>0.2%</b>	<b>0.2%</b>
<b>% Population Latino/a</b>	<b>44.7%</b>	<b>40.5%</b>

Source: Claritas estimates, 2022 from healthmattersinvc.org.

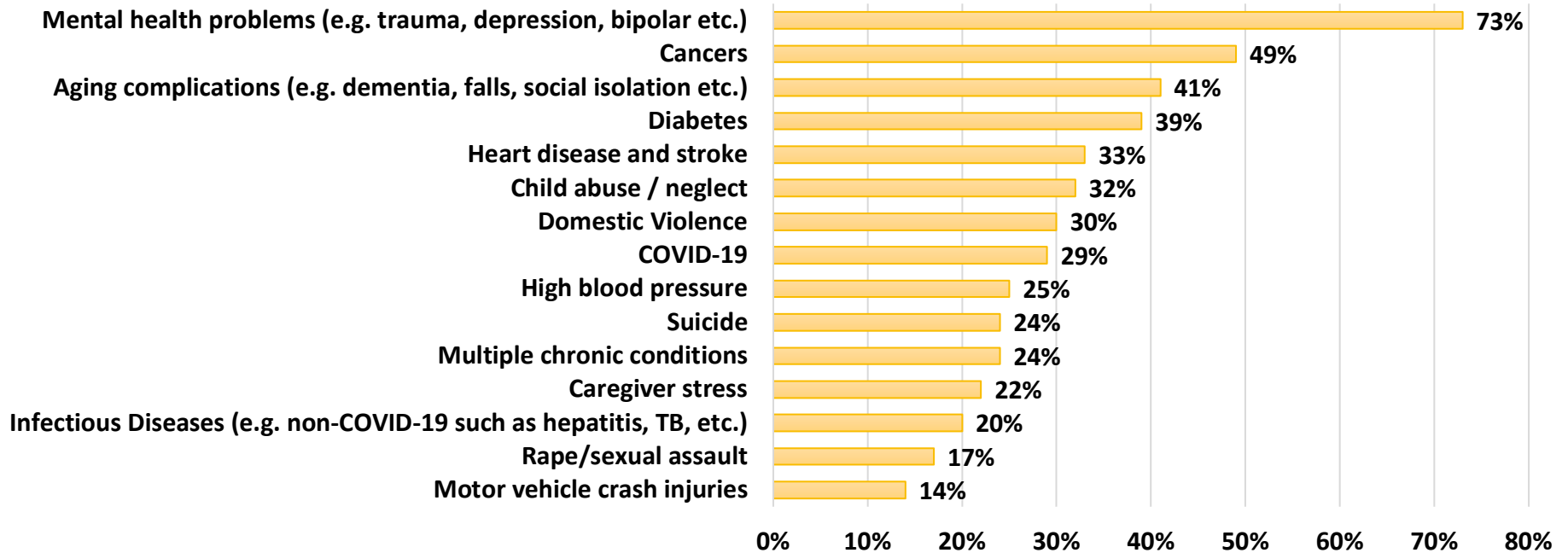


# What makes a Healthy Community?



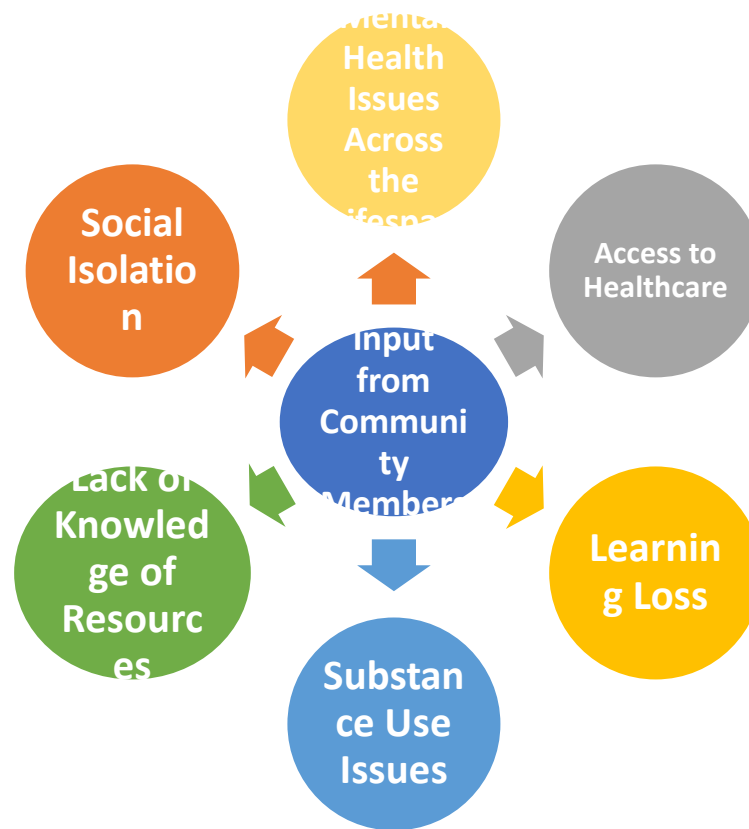
N-2,982; Source: 2022 Community Health Assessment Survey

# What are the most important health problems in our community?



N=2,959; Source: 2022 Community Health Assessment Survey

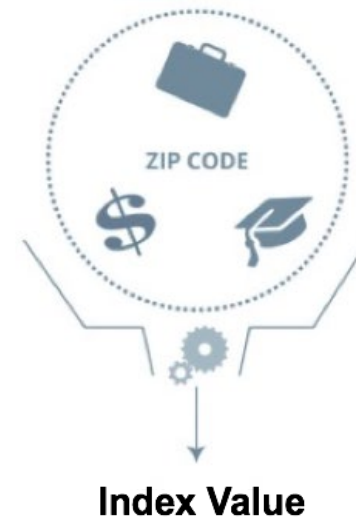
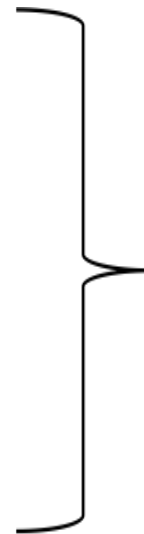
# Key Themes from Focus Groups



# Health Equity Index –

*Incorporates estimates for 6 **social and economic determinants** of health that are associated with poor health outcomes. **Zip codes** with higher values are estimated to have **higher socioeconomic need**, which is correlated with **poorer health***

Income
Poverty
Unemployment
Occupation
Education
Language



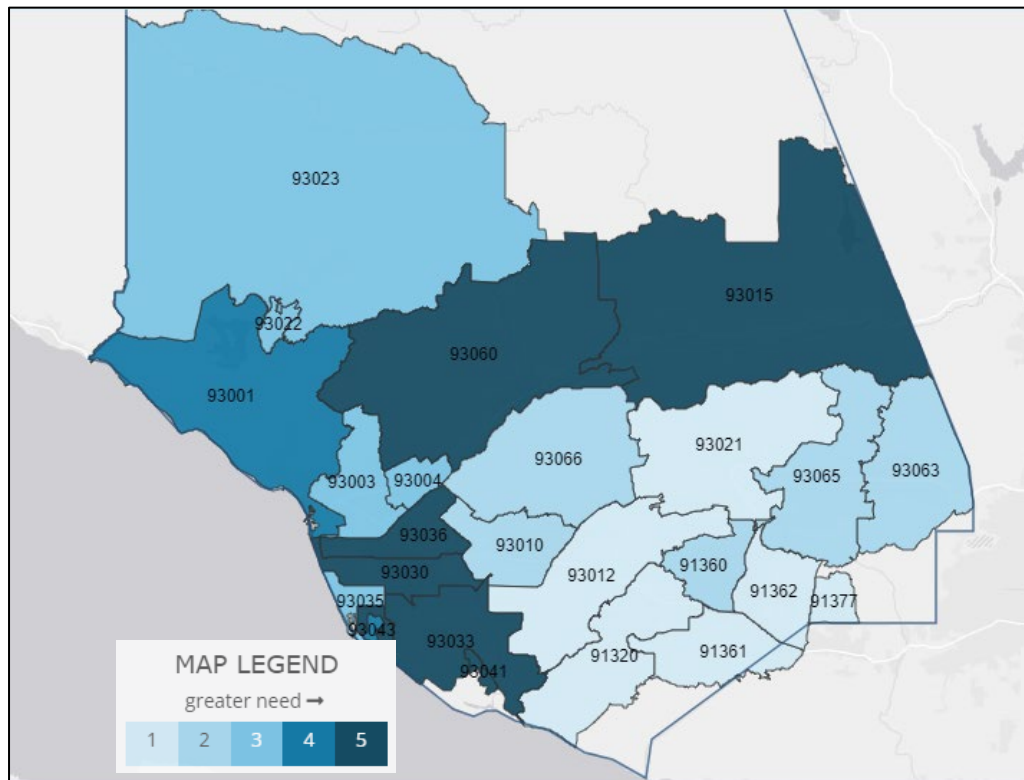
Healthy Communities Institute – All Rights Reserved – Private & Confidential



# Place Matters

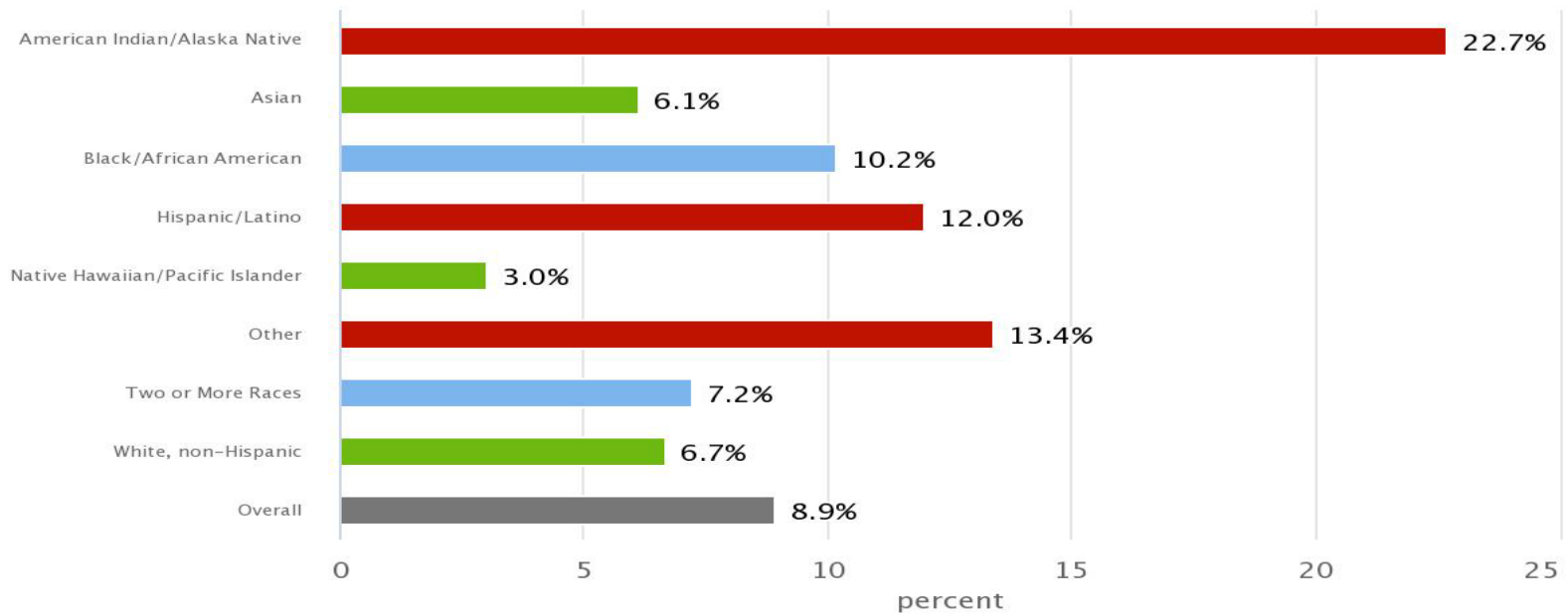
In high HEI zip codes, residents are expected to experience greater burdens related to preventable health issues

Zip Code	HEI Value	Rank
93033	94.7	5
93060	88.6	5
93030	85	5
93015	76.4	5
93036	70.4	5



# Poverty Status by Race/Ethnicity, 2020

People Living Below Poverty Level by Race/Ethnicity  
County: Ventura



Source: American Community Survey (2016–2020)

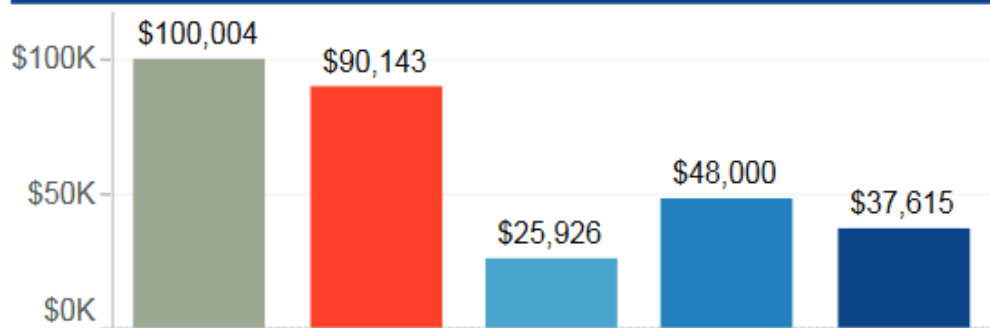
[www.healthmattersinvc.org](http://www.healthmattersinvc.org)

Source: American Community Survey, 2016-20.



# Another Measure of Poverty: Real Cost Measure

## Annual Income Comparison *(based on a household of 2 adults, 1 pre-schooler, 1 school-aged child)*



*\*based on \$12.00 per hour, 40 hours per week, 50 weeks per year.*

- Median Adjusted HH Income
- RCM Budget
- Median Poverty Threshold
- 2 Minimum Wage Jobs \*
- Supplemental Poverty Measure

## Real Cost Measure (RCM) 2019:

- 26% of VC under RCM vs 9% FPL
- 48% of Latino/as vs 15% of Whites
- 70% for less than HS vs 11% for college degree or higher

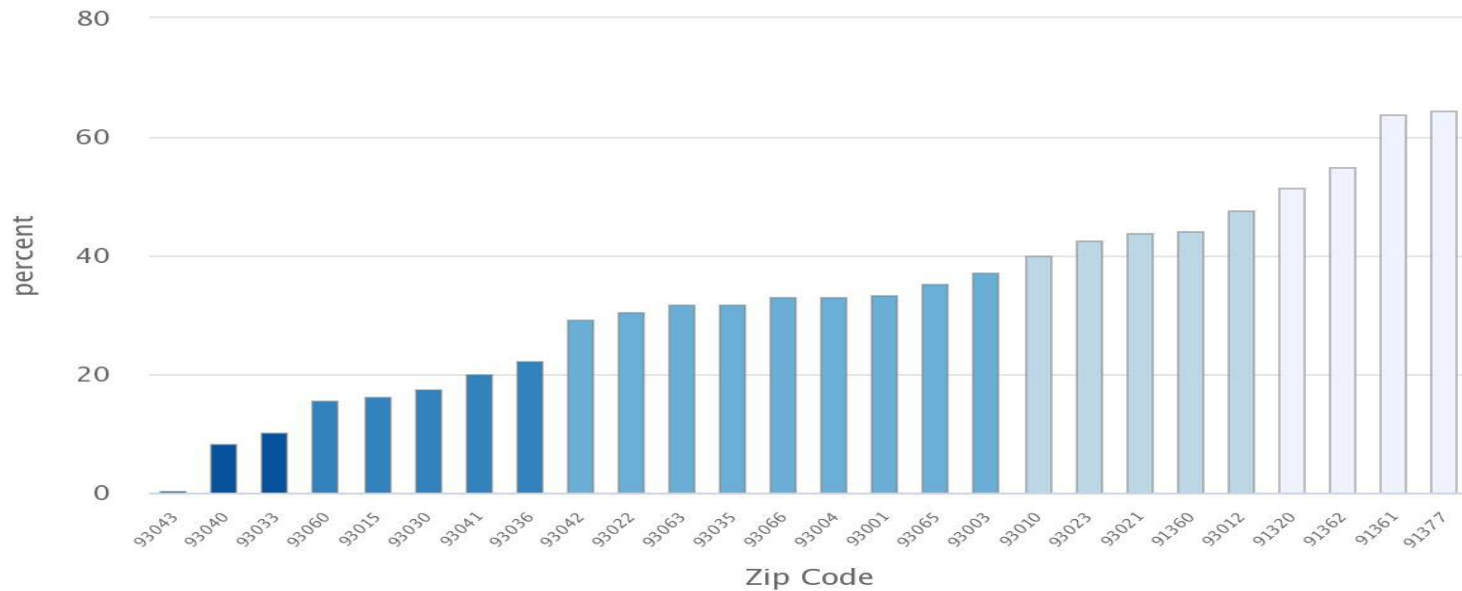
Source: United Way Real Cost Measure, 2019.



# Higher Education by Zip

www.healthmattersinvc.org

People 25+ with a Bachelor's Degree or Higher



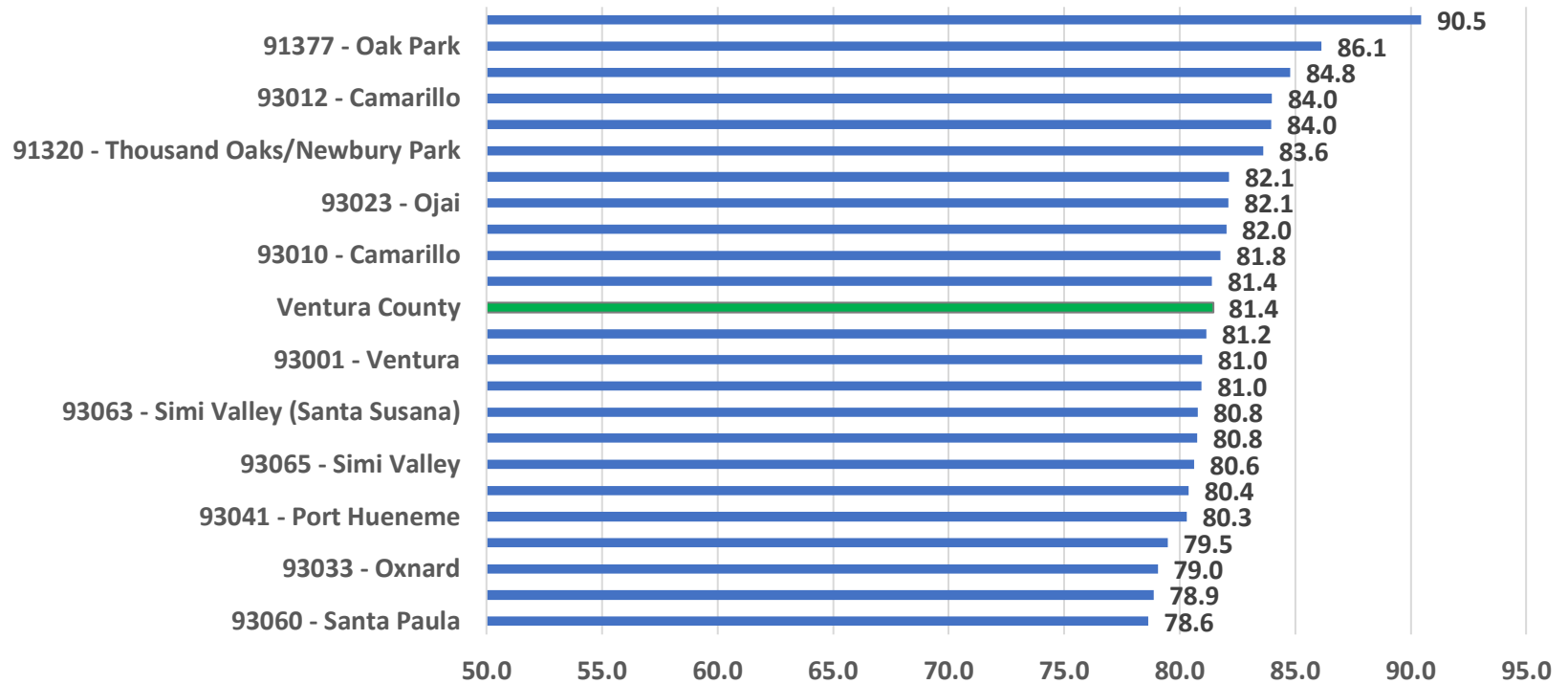
Source: American Community Survey (2015–2019)

Source: American Community Survey, 2015-19 and 2016-20.





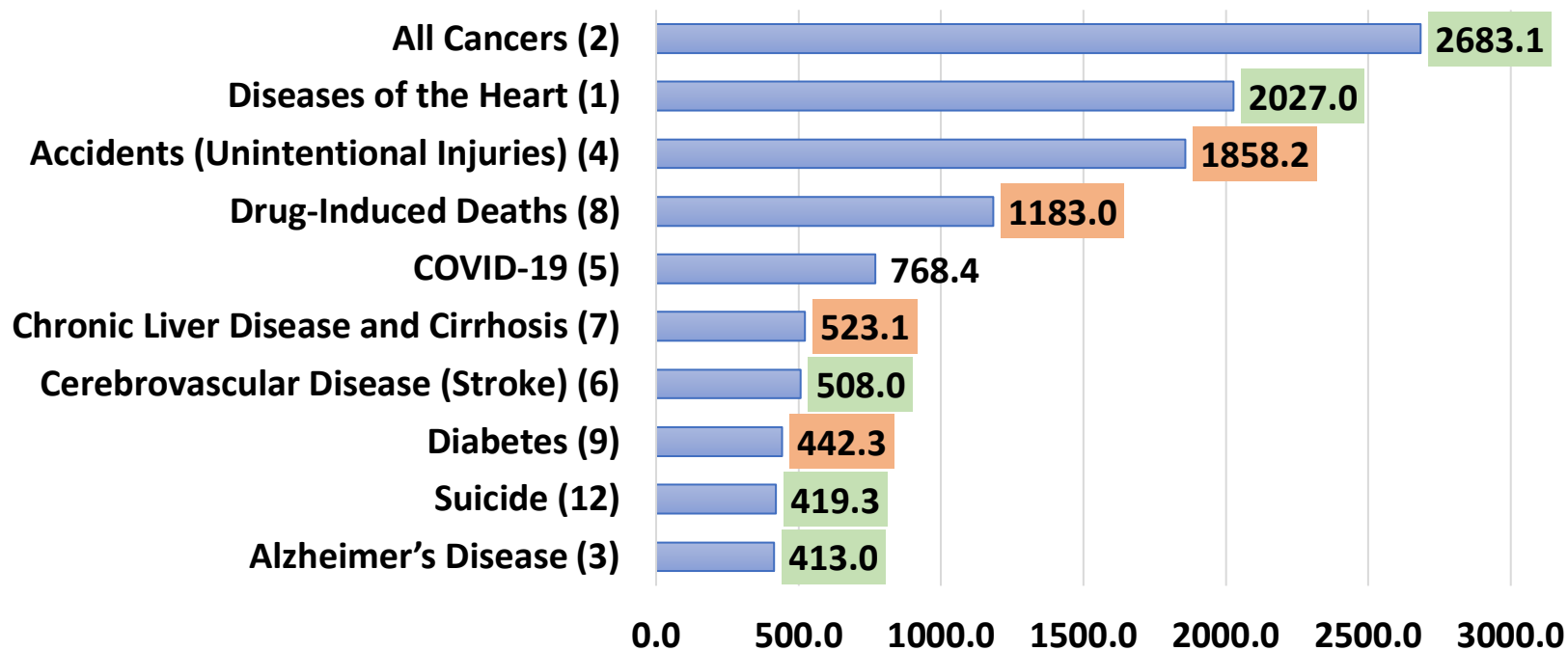
# Life Expectancy by Zip Code, 2019-21



Source: Analysis by VCPH Epidemiologist utilizing VRBIS, California Department of Finance Population Projections and Claritas Estimates, 2019-2021.



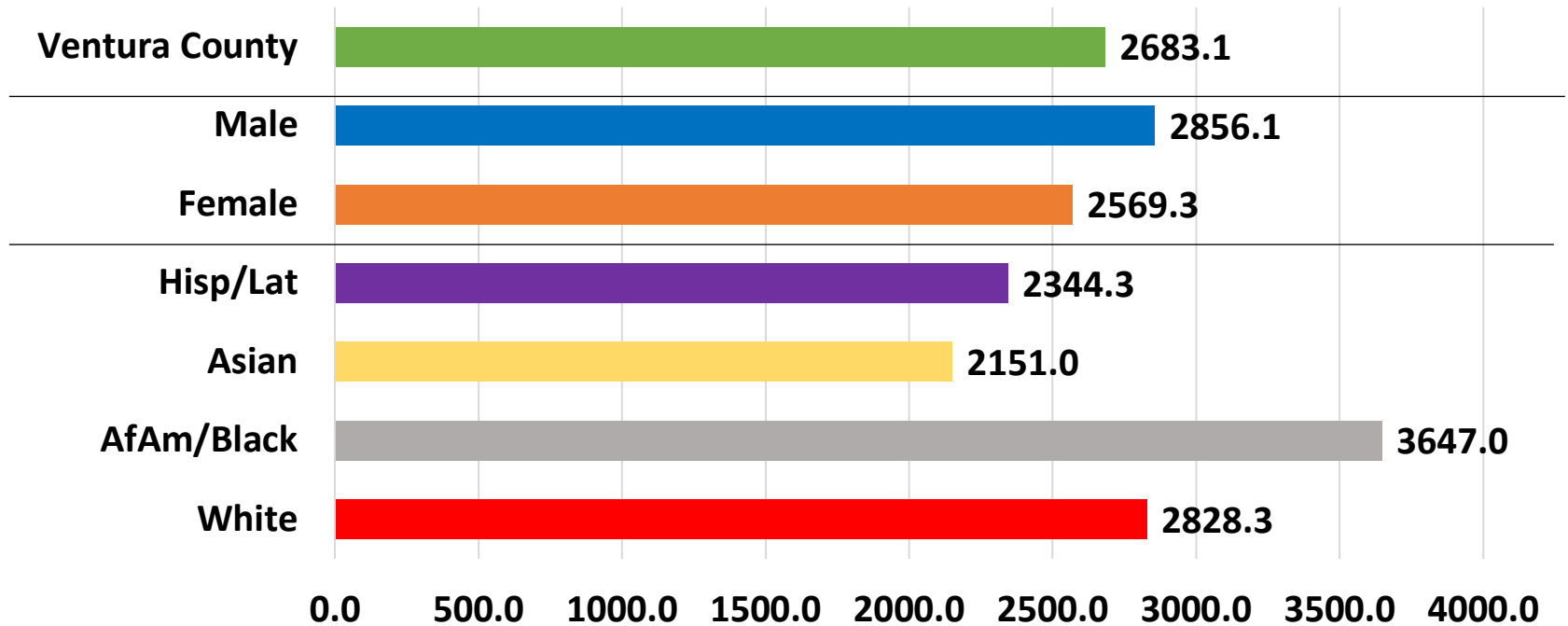
# Age-Adjusted Years of Life Lost Rate per 100,000 population per year, 2019-21



Source: Analysis by VCPH Epidemiologist utilizing VRBIS, California Department of Finance Population Projections and Claritas Estimates, 2019-2021.

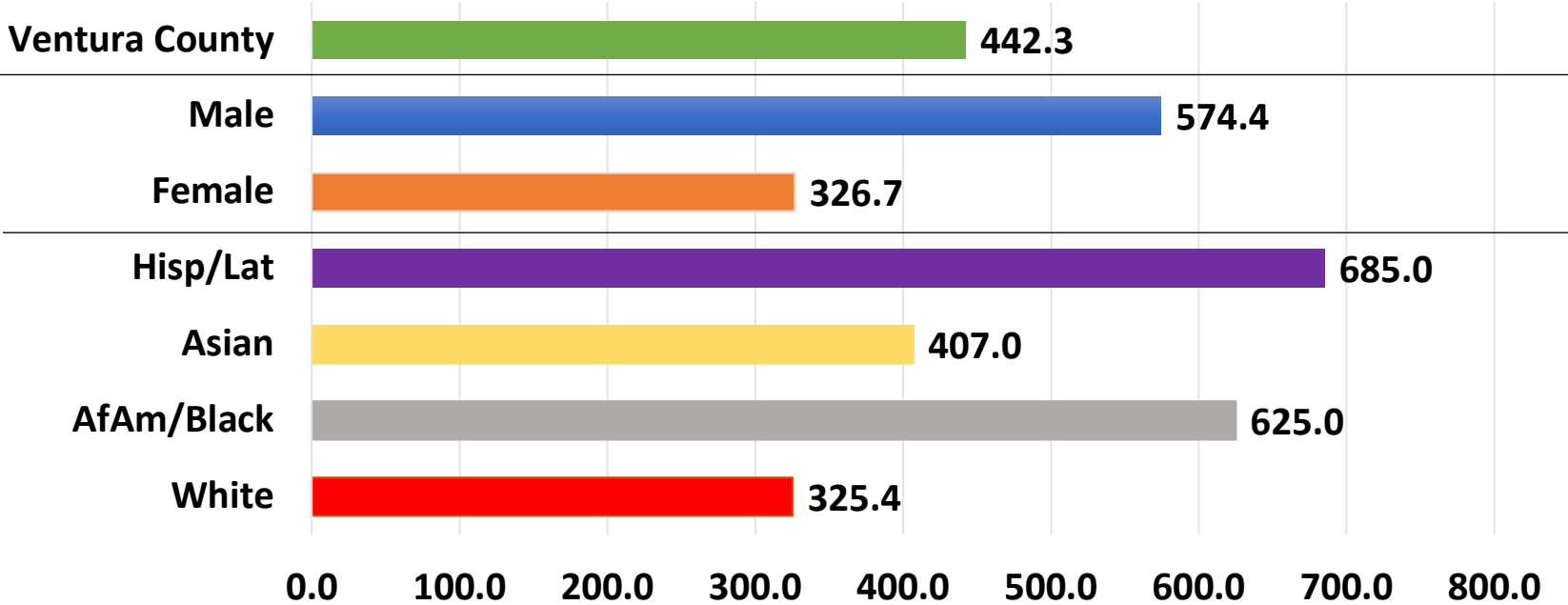


# All Cancers: Age-Adjusted Years of Life Lost Rate per 100,000 population per year, 2019-2021



Source: Analysis by VCPH Epidemiologist utilizing VRBIS, California Department of Finance Population Projections and Claritas Estimates, 2019-2021.

# Diabetes: Age-Adjusted Years of Life Lost Rate per 100,000 population per year, 2019-21



Source: Analysis by VCPH Epidemiologist utilizing VRBIS, California Department of Finance Population Projections and Claritas Estimates, 2019-2021.

# In Progress: Assessment Priority Areas

- **Addressing Mental Health and Substance Use Across the Lifespan**
  - Adverse Childhood Experiences
    - Substance Use
    - Education
    - Housing Overcrowding
  - Health and Wellness for Older Adults
- **Prevention of Chronic Conditions by Promoting Healthy Lifestyles**
  - Cancer
  - Diabetes
  - Heart Disease and Stroke
  - Nutrition and Healthy Eating
  - Physical Activity
- **Advancing Equitable Access to Healthcare**

## Strategies to Advance Health Equity

- Improve the living conditions that are fundamental **determinants of health**
- Protect populations against preventable **disease**
- Support **programs, policies and initiatives** that promote health
- *Help Make the **Healthy Choice the Easy Choice** where people live, work, learn and play*



# Possible Data Next Steps for HEAC

- Deeper analysis of the primary data collected
- Review healthcare utilization (ER and Hospital) data
- Review of prenatal care utilization from birth records
- Visit data dashboard: [www.healthmattersinvc.org](http://www.healthmattersinvc.org)

The screenshot shows the homepage of the Health Matters in Ventura County website. At the top, the logo features the text "Health Matters in VC" in blue and yellow, with a graphic of a sun, mountains, and trees. Below the logo is a navigation bar with links for "Find Data", "City Profiles", "Strategic Plan", "Resources & Tools", and "About Us". A search bar and a "Translate To" dropdown are also present. The main heading reads "Welcome to Health Matters in Ventura County". Below this is a paragraph of introductory text. A large image of people surfing is featured, with a sidebar on the right containing links for "Community Input Survey", "Community Health Assessment", "Community Health Improvement Plan", and "VCPH Strategic Plan". At the bottom, three blue icons represent "Find Health Data", "Find Demographics Data", and "Track Progress".