

**Healthcare Equity Advisory Council**  
**Tuesday, June 21, 2022**  
**Minutes**

**Community Voting Members Present:**

Emily Bridges  
Dr. Liz Diaz-Querol  
Kimberly Kelley  
Juliza Ramirez  
Hugo Tapia  
Juana Zaragoza

**Administrative Voting Members Present:**

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

**Voting Members Absent:**

Audrey Ford  
Kimberly Cofield

**Administrative Voting Members Absent:**

Dr. Sevet Johnson  
Dr. John Fankhauser

**Guests:**

Phin Xaypangna  
Kate English

**Staff Present:**

Selfa Saucedo  
Cynthia Salas

**1. CALL TO ORDER**

The meeting was called to order at 5:34 p.m. by Chair Zimmerman

**2. ROLL CALL**

**3. APPROVAL OF MAY 17, 2022 MINUTES** Moved by K. Kelley, seconded by R. Vargas. Approved.

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

None.

**5. OVERVIEW OF THE HEALTH CARE AGENCY: Public Health** (Rigo Vargas, presentation attached)

Community Health Needs Assessment will be finalized and available on the Health Matters in Ventura County Data Dashboard in 4-6 weeks. [www.healthmattersinvc.org](http://www.healthmattersinvc.org)

Health Equity Index: Can identify greatest need by zip code.

The Real Cost Measure employs additional factors not included in federal definition of poverty.

Ventura County ranked 9<sup>th</sup> healthiest county (12<sup>th</sup> last year) in the state.

**6. MEMBER COMMENTS**

Look at healthiest county ratings to find best practices for promoting healthcare. “Blue Zone Communities” have healthy initiatives we can model.

Survey responses included some housing information, although reporting related to homelessness or housing insecure status for youth may be limited.

Examine metrics and demographics of caregivers to understand caregiver bias. Have medical providers had bias training?

Mr. Vargas will look to see how disability status indicators are or can be included in the report.

Design future surveys to learn how biases affect outcomes.

Partner with educational institutions to address bias, develop cultural humility in the workforce.

How does this report/data inform policy and action?

- Public Health makes reports available to policymakers and stakeholders to highlight need. For example, a vaping trend among youth was identified, and the Board of Supervisors subsequently acted to ban flavored tobacco.
- Health data impacts program design. Hypertension, diabetes, mental health are the biggest issues. Ambulatory Care targets populations where these diseases are prevalent, and focuses efforts to address gaps in care (i.e., provide home blood pressure cuffs).
- Behavioral Health uses data to develop programs, prioritize projects and secure funding.

## **7. MEMBER EXPERIENCE**

What are community members' experiences with healthcare?

- Disparate treatment at ER based on status/race
- Having to go to ER to get primary care/urgent cancer/pain care
- Disparate treatment based on social capital (who you know)
- Mistrust of medical systems, government and info, as well as cost, prompts many to travel to Mexico for care
- Language access: community members choose Clinicas because of language
- Need for programs that address healthcare literacy – meet community where they are
- Proactive/compassionate care and delivery for people with disabilities, whether visible or not and especially where intersecting with other historically disadvantaged communities
- Health literacy, for providers too
- Lack of communication or contradictory communication, i.e., seriousness of condition versus actions of staff
- Especially difficult for speakers of indigenous and other languages besides English/Spanish
- Prevention: Cost causes people to skip care or wait until crisis
- Disadvantaged people in affluent communities need access too
- Health navigation – reports of experiencing racism in the doctor's office
- Cultural responsiveness and humility training needs to be ongoing; outreach to jurisdictions on this is needed, not just outreach to community members
- Older adults: Existing services cannot be accessed because of waitlists, lack of resources
- Craft a Patient Bill of Rights for Ventura County
- Compassion fatigue—address well-being of staff
- Continuum of care from agency to agency. Need for ease of referrals, better navigation,

integrated systems

**Staff Feedback**

- Capitalize on other connection points with community, build on a one-stop model
- Canvassing is a beneficial tool

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

- a. What do we want/need to focus on?
- b. Next meeting July 19, 2022. Please let us know if you are able to attend
- c. Phin Xaypangna will provide an update to Board of Supervisors on July 26 at 2:30 pm. Invitation to join for 15 min presentation (can also participate virtually)
- d. Public Safety Racial Equity Advisory Group – focus on law enforcement, racial justice. Go to <https://www.ventura.org/psreag/>

**9. ADJOURN**

Meeting adjourned at 7:30 pm.



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

6/21/2022

# A Review of Health Equity

## Equal treatment



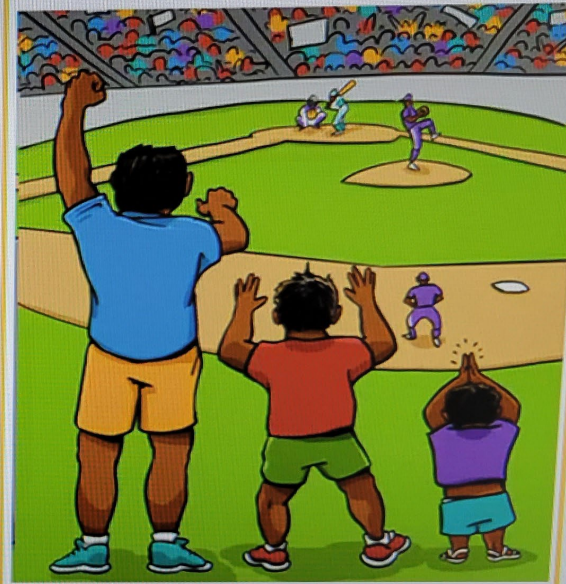
Assumption that all will benefit; starting point for many of our patients is different

## Equitable treatment



Everyone given different supports to provide access; filling gaps (often temporarily)

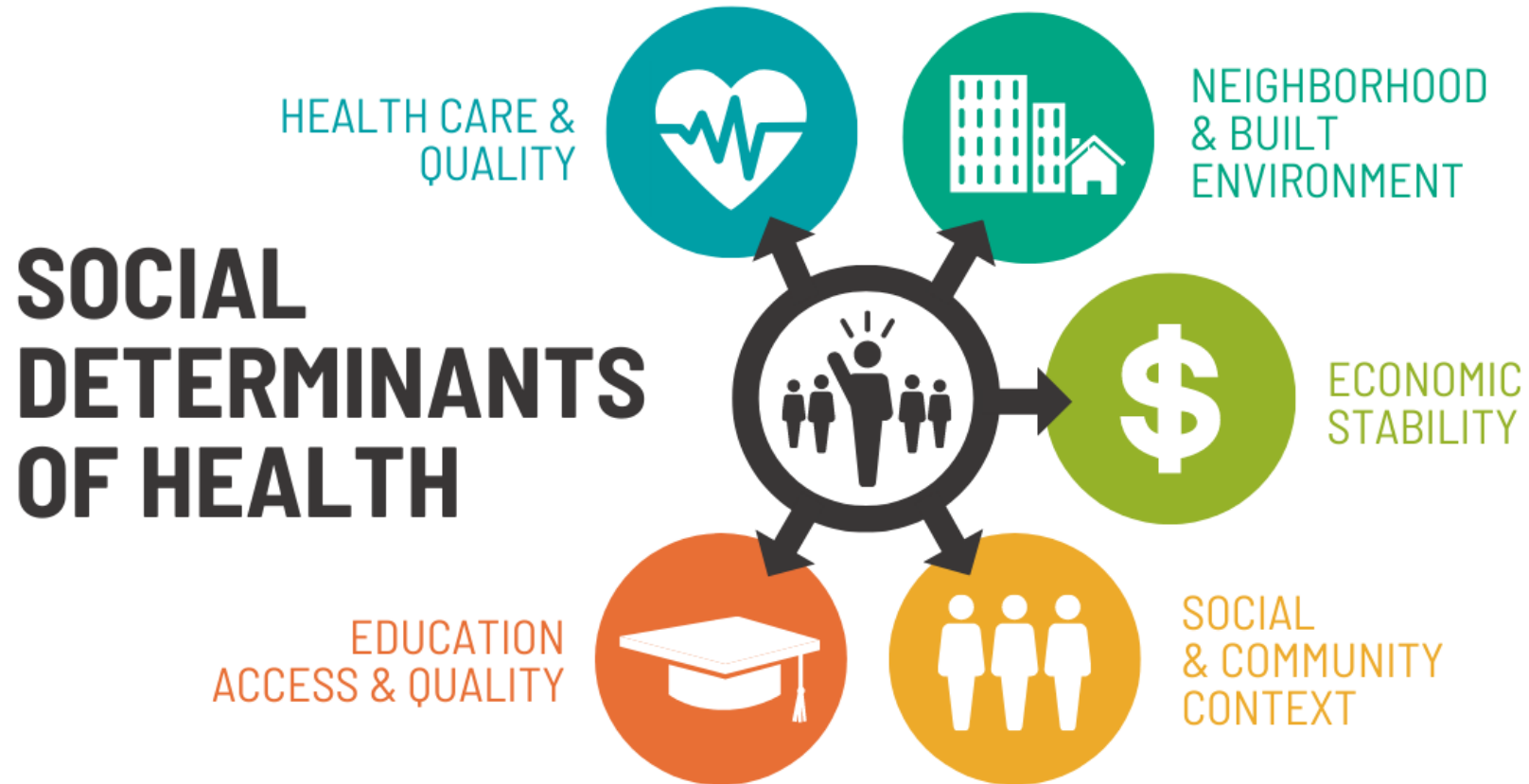
## True Equity



All have access without supports needed; root cause of inequity addressed, structural barrier removed



# A Review of SDOH



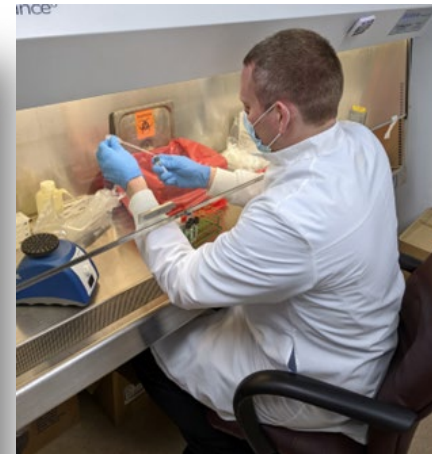


# Public Health: our Mission, Vision and Initiatives

- **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)





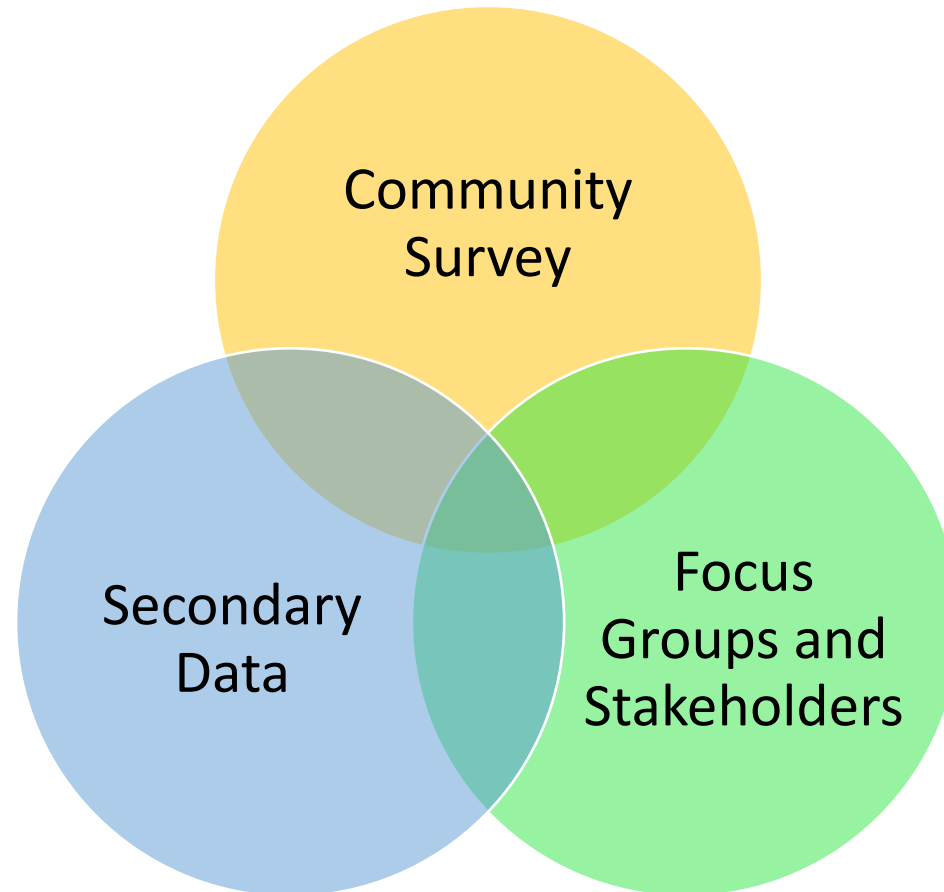
# Ventura County Community Health Improvement Collaborative



# Community Health Assessment Process

## Secondary Data Collected:

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



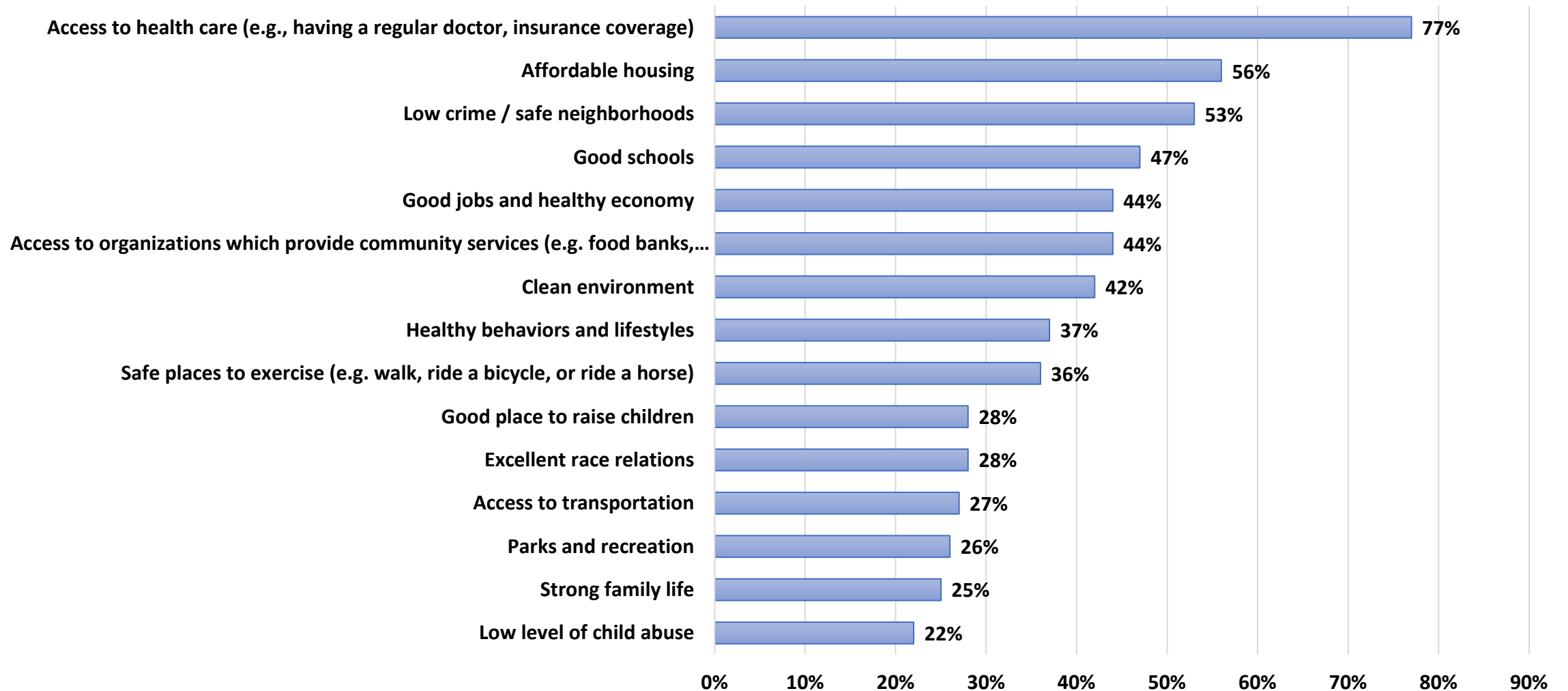
## Primary Data Collected:

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

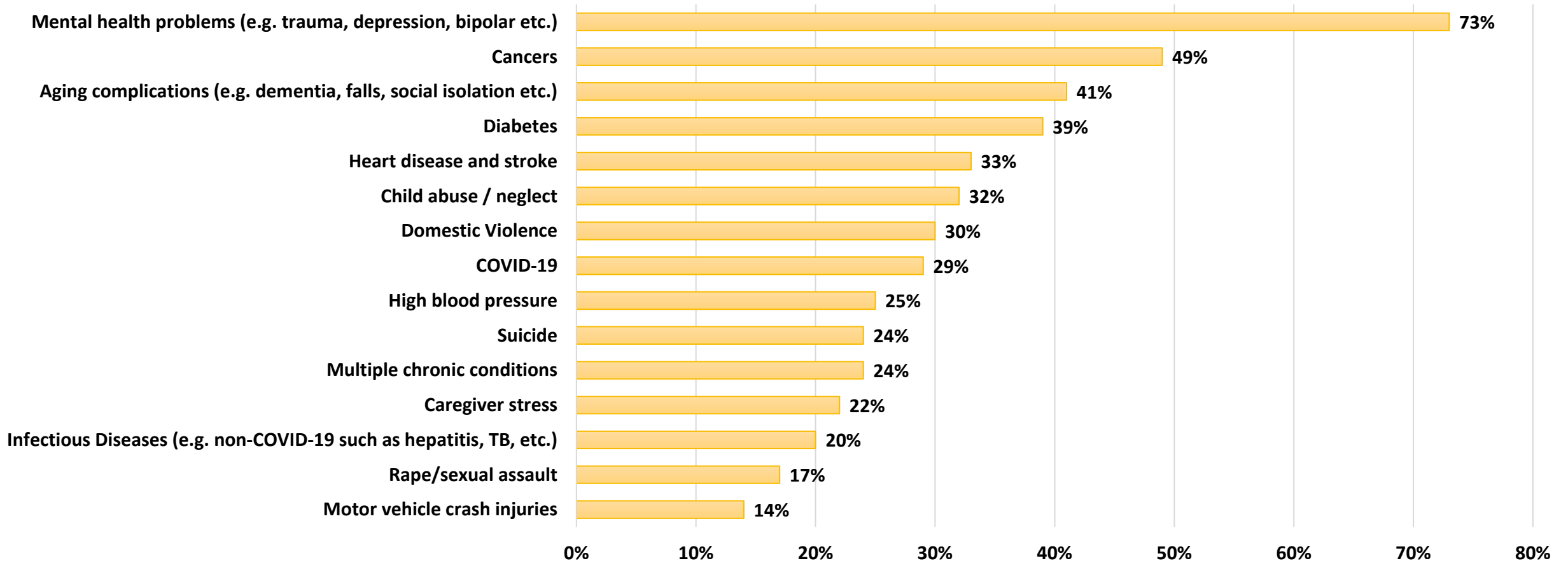
# Current Race/Ethnicity Demographics

	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>

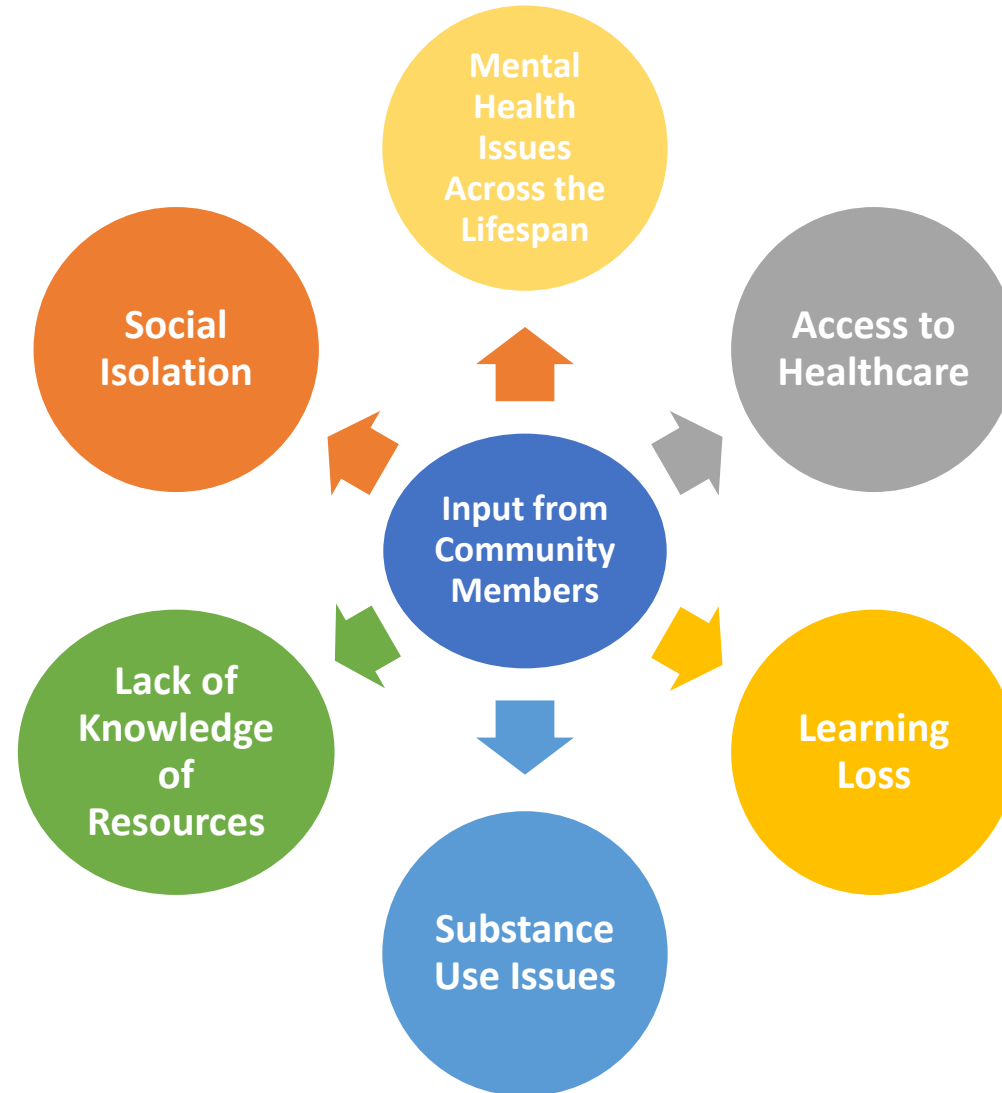
# What makes a Healthy Community?



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



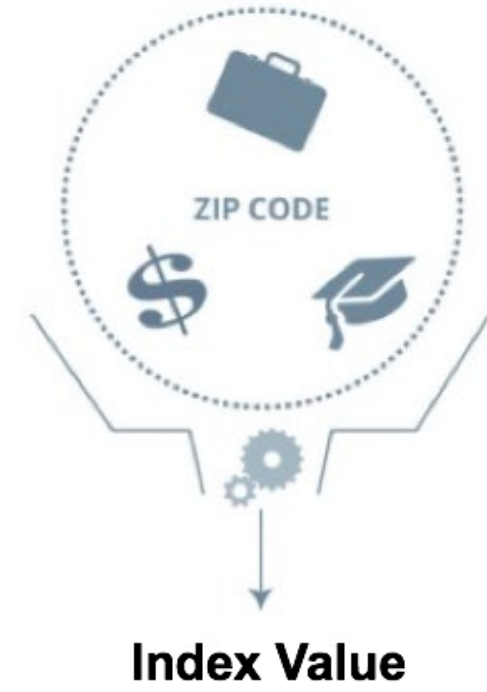
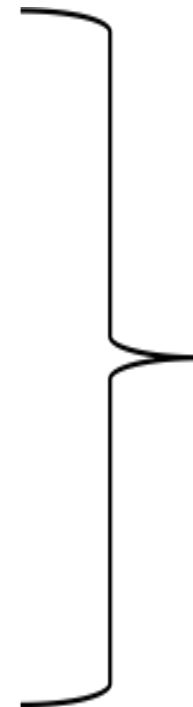
# Key Themes from Focus Groups



# 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

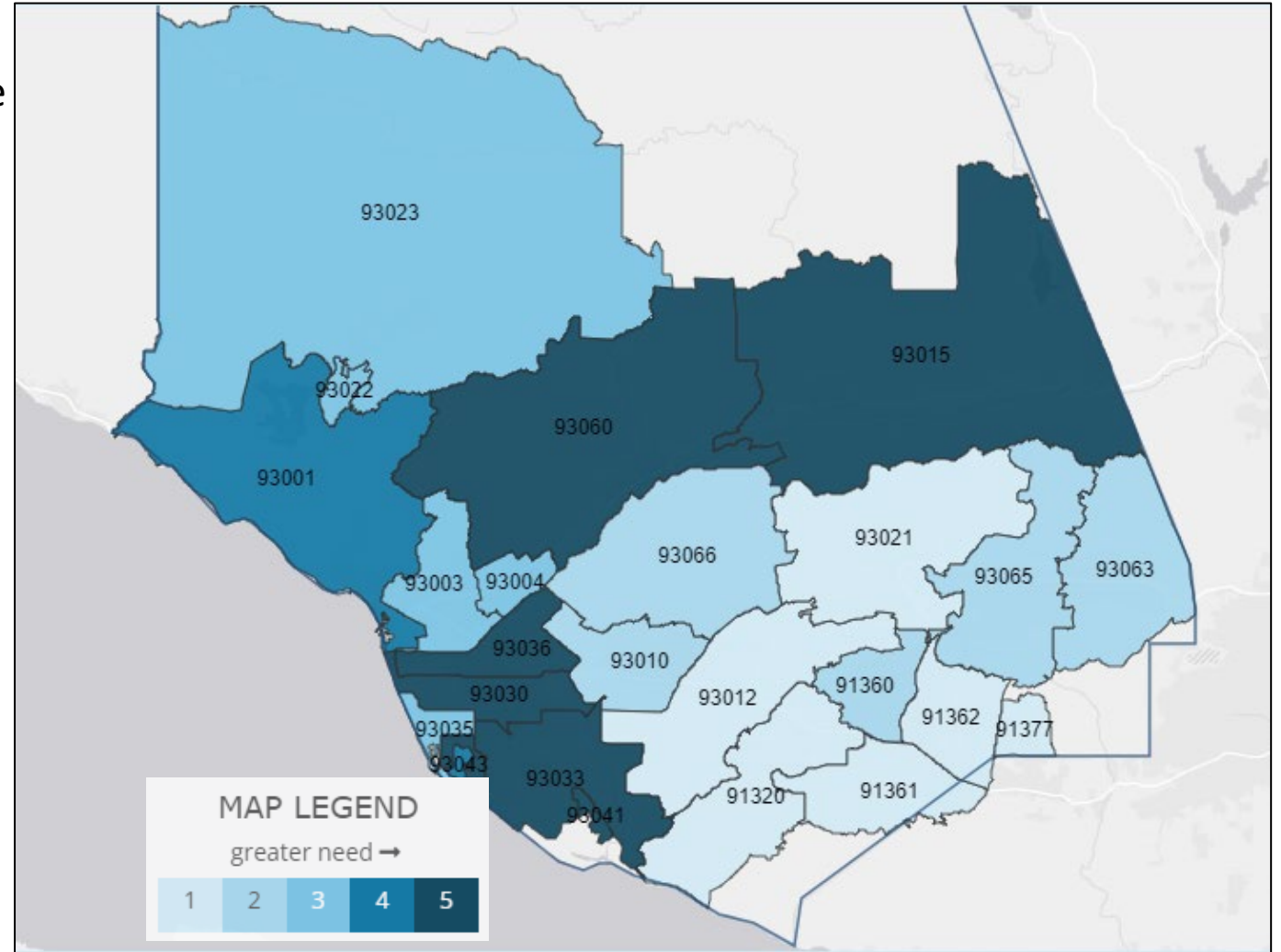




# Place Matters

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

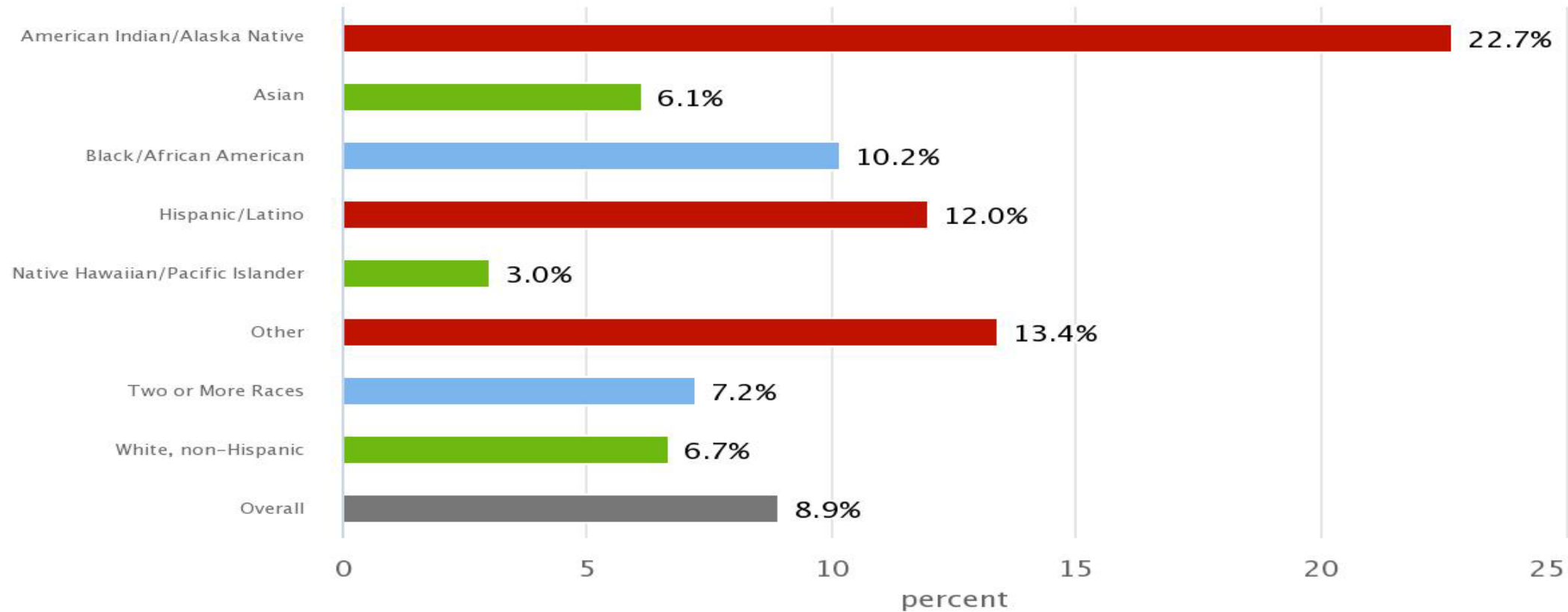
Zip Code	HEI Value	Rank
93033	94.7	5
93060	88.6	5
93030	85	5
93015	76.4	5
93036	70.4	5





# Poverty Status by Race/Ethnicity, 2020

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



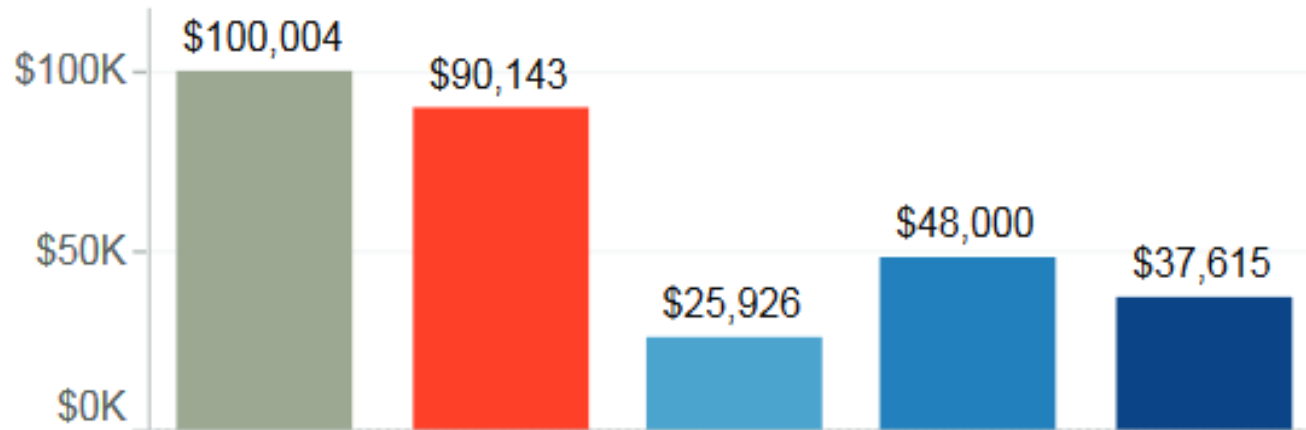
Source: American Community Survey (2016–2020)



# 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.



## Real Cost Measure (RCM) 2019:

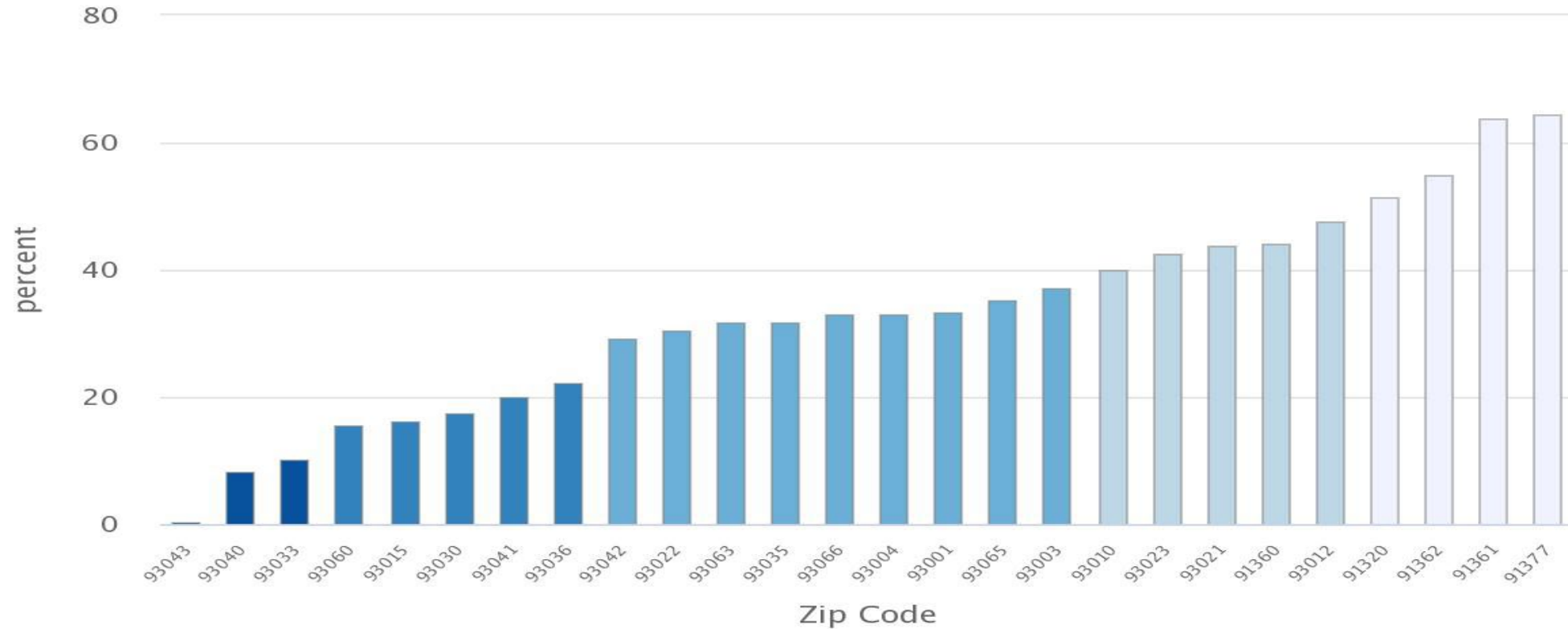
- 26% of VC under RCM vs 9% FPL
- 48% of Latino/as vs 15% of Whites
- 70% for less than HS vs 11% for college degree or higher



# Higher Education by Zip

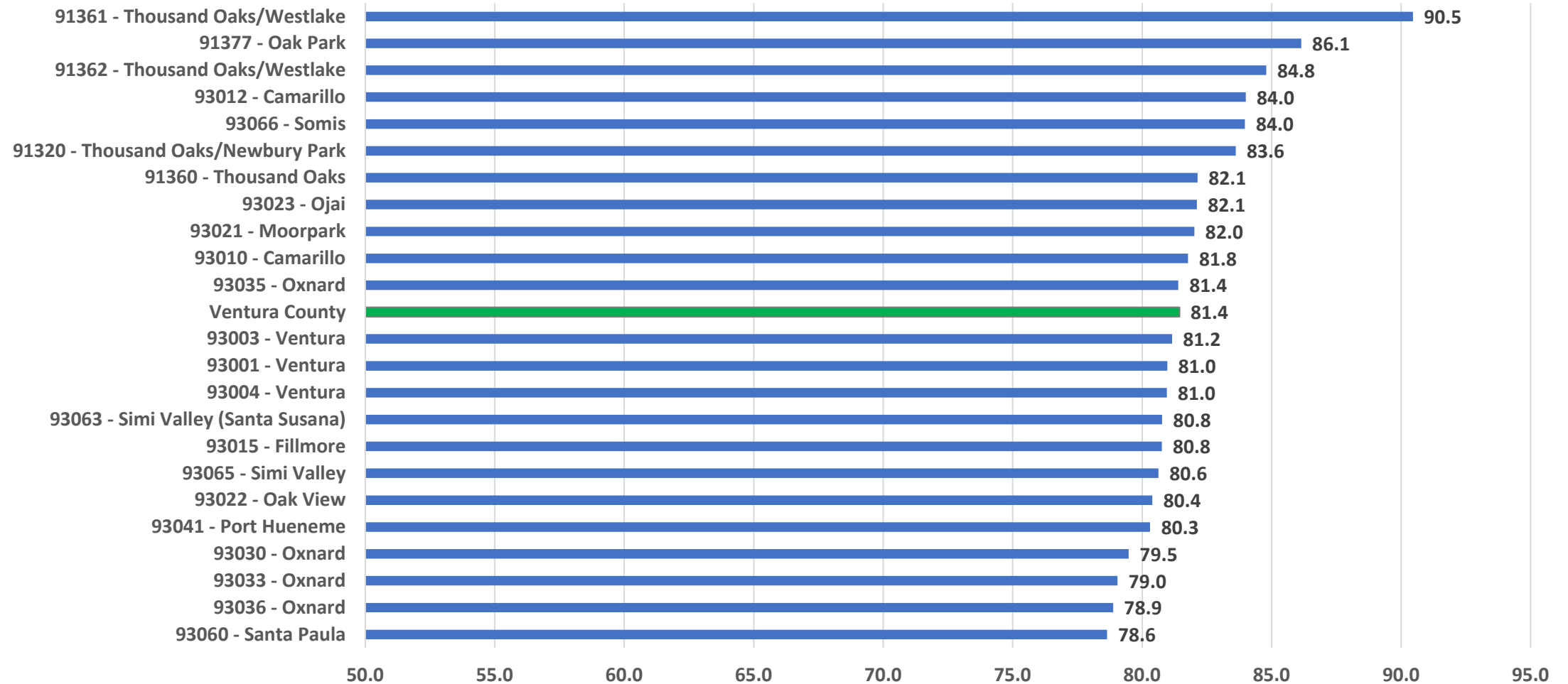
www.healthmattersinvc.org

People 25+ with a Bachelor's Degree or Higher

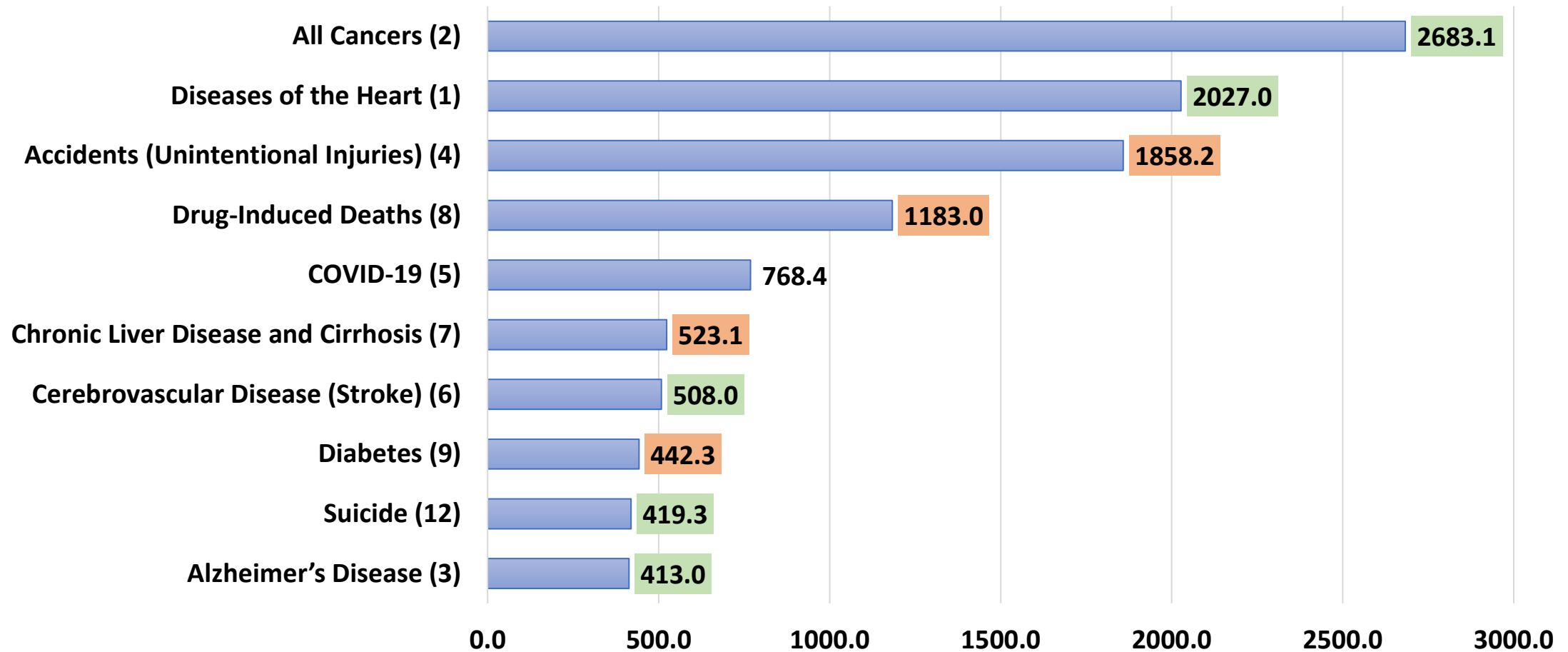


Source: American Community Survey (2015–2019)

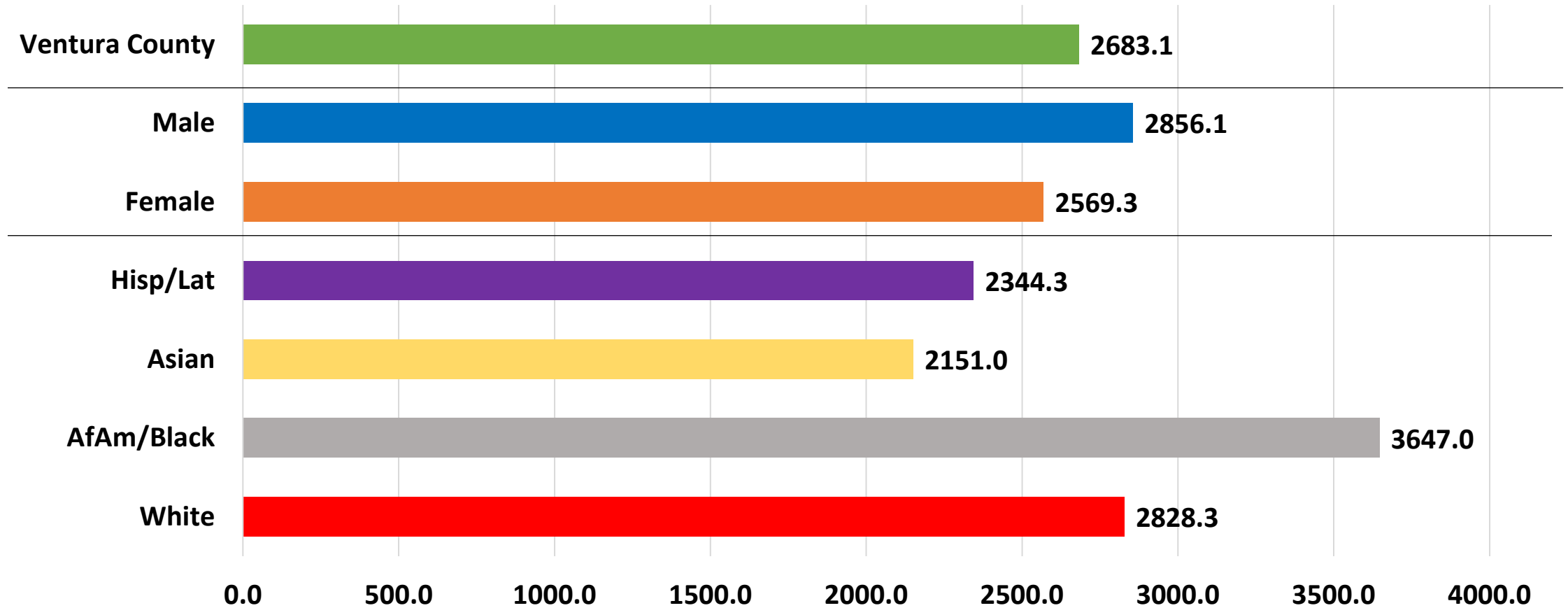
# Life Expectancy by Zip Code, 2019-21



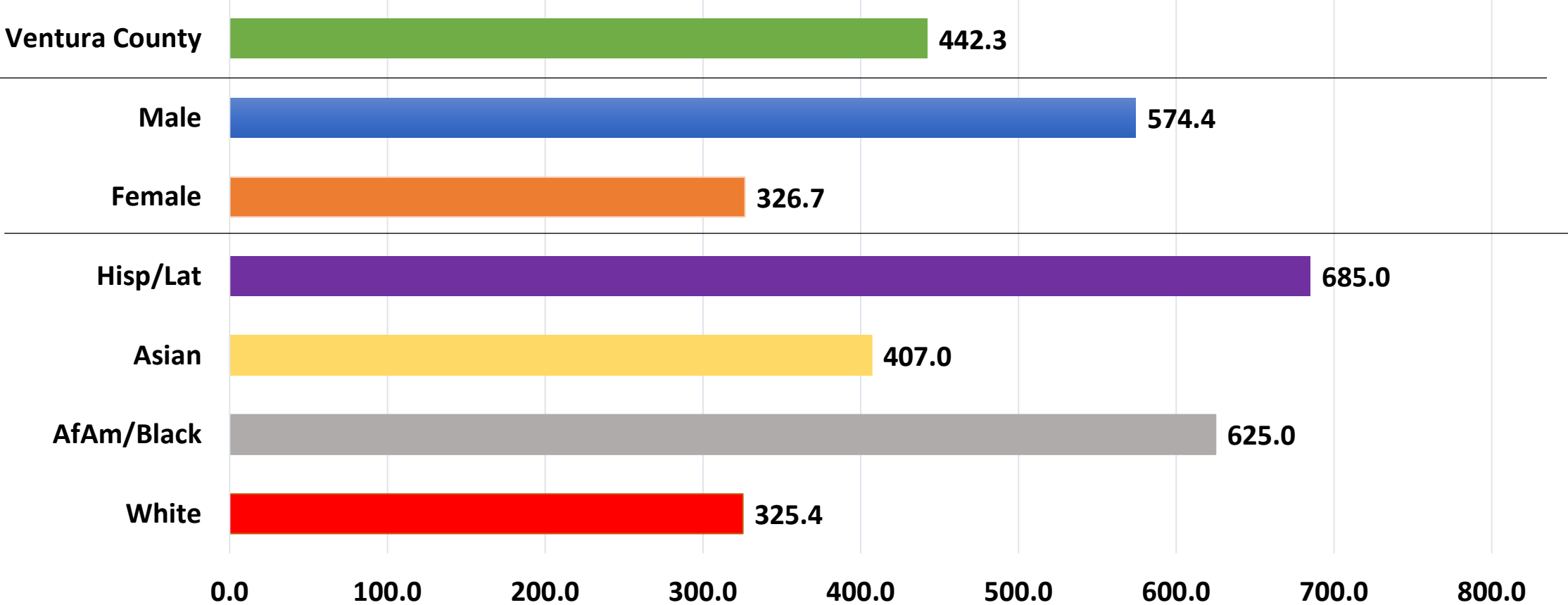
# Age-Adjusted Years of Life Lost Rate per 100,000 population per year, 2019-21



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



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



# 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 reads "Health Matters in VVC" 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 is "Welcome to Health Matters in Ventura County". Below this is a paragraph of introductory text. A large banner image shows people at a beach. To the right of the banner is a vertical menu with links: "Community Input Survey", "Community Health Assessment", "Community Health Improvement Plan", and "VCPH Strategic Plan". At the bottom, there are three icons with labels: "Find Health Data" (house icon), "Find Demographics Data" (people icon), and "Track Progress" (target icon). A small URL "key.com%2Fs%2FVVCCommunityInput" is visible at the bottom left of the screenshot.