

**Annual
Report 2016**

Building
**INFRA
STRUC
TURE**
for Health



Butte County Public Health Department

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social...



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Director's Welcome

If 2015 was the year of building a healthy foundation, 2016 was definitively the year of building a healthy infrastructure. The first few months of the year were spent completing our application for National Public Health Accreditation and the remainder of the year was spent beginning to institutionalize many of the foundational changes we had implemented in 2015.

The Strategic Plan was revised, twice, as we worked to better align our strategies to our goals. This resulted in having to revise the dashboards, and reassessing the Quality Improvement and Performance Management plans. Employees had to be trained in the use of the new investigative protocols, and recently adopted policies and procedures had to be revised to reflect needed changes. Both the Performance Management Quality Improvement Team and the Employee Recognition and Engagement Committee were reconstituted to better promote their work and improve outcomes.

Senior leadership has been actively engaged in training on performance management concepts and quality improvement systems. There has been a paradigm shift in that Quality Improvement is no longer perceived to be a stand-alone concept, but a process that is invoked when performance goals haven't been met. A new interest in public health ethics and public health law has spawned a better and more proactive relationship with the County Council's office. The department's IT infrastructure has been expanded with the move to SharePoint, the development of the electronic room reservation system, the revision of the Public Health Employees System, and the review of the eClinicalWorks system.

Finally, the importance of promoting health equity by improving cultural competence is being reinforced by leadership through training opportunities and continuing the work on Strategic Priority Area 3 Goals.

A lot of progress has been made, but there is still a long way to go...improvement never ends.

Cathy Raevsky
Public Health Director



Accreditation Update

The Department continues to strive to become a nationally accredited health department. In July 2016, the department submitted final documentation to the Public Health Accreditation Board (PHAB). These documents were carefully selected and annotated to demonstrate our conformity with the required PHAB Standards and Measures. Health departments

are allowed up to 12 months to complete the documentation submission process. We are very proud to have accomplished this feat in 5 months and 17 days!

Now that our documentation is submitted, a three person PHAB appointed team is in the process of reviewing and scoring our documents. We anticipate a PHAB site visit to occur in mid-2017. The site visitors will ask questions related to our documentation and operation of the department.

During the site visit, we will have an opportunity to describe our relationship to the community, our processes and systems, and provide other qualitative information. Going through the accreditation process has allowed our department to identify and address gaps, initiate continuous quality improvement, and demonstrate how we meet and/or exceed national standards.

Workforce Development



ENSURING A COMPETENT WORKFORCE

Part of building the infrastructure for the department requires the workforce to achieve and maintain public health competencies.

The department is committed to maintaining a work environment that supports continuing education and job relevant trainings for all current and prospective employees. On January 1, 2016 the department launched its Learning Management System (LMS) as a major tool in continuing to develop our Public Health Workforce. As part of the LMS, the department identified

required trainings for staff to complete that will help ensure that the public health workforce is fully prepared to carry out the services of the department. The department's Workforce Development Plan that was developed in April 2016 sets out a plan to continue to provide additional trainings based on the department strategic plan priority areas and Public Health Core

Competencies. Additionally, the plan included an assessment of all staff that gave them the opportunity to provide input on other trainings that they may be interested in for their own professional development. With this feedback, the department included a section in the LMS for non-required trainings that the staff identified as being beneficial to them in their professional development.





Assessing and improving access to care is a fundamental building block of the department's infrastructure.

Access to Care

BUILDING THE INFRASTRUCTURE FOR IMPROVED DENTAL CARE: THE VIRTUAL DENTAL HOME

Many children in Butte County face serious obstacles in obtaining dental services. For those who rely on Medi-Cal/ Denti-Cal, access to reliable, quality preventive care, not to mention transportation to get to appointments, is almost impossible to find. These barriers result in severe oral health outcomes which are directly related to income, age, ethnicity, geography and social conditions. Children end up with “bombed out mouths”, a harsh and graphic phrase which describes the abscesses, decayed teeth, and severe pain that results from a lack of preventive care and delayed treatment. At this stage, the only solution is costly dental surgery, which could have easily been avoided with proactive preventive dental care. Improving access to dental care for children is a fundamental building block of the department's infrastructure. In 2016, the department was one of 15 grantees to receive a Local Dental Pilot Project grant

to test innovative solutions to these problems. This project is in partnership with four of our neighboring counties: Plumas, Nevada, Sutter and Yuba. The department chose to implement a model known as the “Virtual Dental Home,” which is an oral health delivery system in which preventive and early intervention therapeutic services are received in a community setting. Equipped with portable imaging equipment and an internet-based dental record system, a Registered Dental Hygienist (RDH) will see the child in a community setting where they are already receiving other services (i.e. State pre-school, WIC, etc.). Electronic dental records such as x-rays, photographs, charts of dental findings, and dental and medical histories will be collected and uploaded to a secure website where they will be reviewed by a collaborating dentist. The dentist will review the patient's information and

create a dental treatment plan. The RDH will perform the procedures that can be conducted in the community setting. If the patient needs treatment beyond this level, the patient will be referred to the connected dental office for an appointment with the dentist. They will be guided in this process by a Dental Navigator, who assists the family with needed information and resources to ensure follow through with the appointment.

By the time the project is completed in December of 2020, it is estimated that approximately 1,900 Butte County children, ages 0-5, will have been served. Data will be available to determine if this is a model that should be continued after the grant dollars are no longer available.

Capitolizing on technology to improve the timeliness and efficiency of services delivered is key to building infrastructure across all environmental health programs.

Hazardous Materials

To educate local farmers about regulations and the inspection protocol for agricultural facilities, staff conducted a series of public education outreach events. Hazmat staff then began to inspect agricultural facilities that stored hazardous materials, and assisted approximately 50 farms in becoming compliant with State hazardous materials regulations.

The Hazmat team, equipped with field laptops, began processing inspection reports while in the field through the Envision Connect Remote database. This technical advance provides a better service for the regulated public and more efficient use of staff work time.

Consumer Protection

The Butte County Food School was started in 2016 and held four classes. Commercial food handlers from facilities throughout the county voluntarily attended these 3-hour classes, which focused on safe food handling practices.

Educational flyers were created for distribution to food handlers during on-site inspections. The flyers address the major food safety categories and are now part of the working toolbox for food facility inspectors.



Because of concerted efforts by the Consumer Protection team, major health violations during routine inspections of food facilities decreased by 22% during 2016.

Land Use

The Land Use team began recording and tracking all new well locations with GPS coordinates and loading this data into the GIS tracking system, which is a county-wide tool for Environmental Health and Development Service departments.

The Land Use team began participating in 'Fast Track Thursday,' a Development Services strategy to expedite over-the-counter permit clearances. Fast Track Thursday has become very popular with the development community.

**MAJOR HEALTH VIOLATIONS
DURING FOOD FACILITY
INSPECTIONS DECREASED BY
22% IN 2016**

BUILDING SERVICES FOR DISEASE PREVENTION

Reducing or eliminating the spread of communicable disease is a fundamental building block of public health and essential to building public health infrastructure.

Hepatitis C (HCV) is one of the most widely reported communicable diseases in Butte County, with 350 cases reported in 2016. In response, the department applied for and received a three-year HCV Linkages to Care Demonstration Project Grant through the California Department of Public Health (CDPH). The project focuses on policy and system-level solutions to assure we are reaching individuals who may be infected with HCV and assisting them to find entry into appropriate health care. Through grant project efforts, the infrastructure was built for expanding HCV disease prevention efforts by 1) offering targeted field services using a rapid HCV diagnostic test, 2) adding new services to the Public Health Lab for confirmatory HCV testing, 3) facilitating major improvements in hospital laboratory protocol for confirmatory testing and 4) partnering with health care providers to take new patients.



Striving to go further, in December 2016 the department submitted and was awarded another disease prevention three-year grant, this time through the County Medical Services Governing Board. The grant funding allows even more expansion of disease prevention services throughout the community. Using the Public Health Mobile Medical Unit (MMU) to reach high-risk populations in the field, staff provide rapid testing for syphilis, HCV and HIV, as well as prevention education and case management services.

Staff working off site in the Mobile Medical Unit to provide free disease testing.



E-CIGS: BIG TOBACCO'S NEXT CHANCE TO MAKE A KILLING

In 2016 the Tobacco Education Program conducted a “Communities of Excellence” (CX) assessment. CX uses a defined list of specific items or measures for assessing needs and strengths. The goal of CX is to explore where the community is now and provide a “snapshot” that can be looked at, compared to other communities, and analyzed. Conducting the CX assessment helps to:

- Broaden the involvement of the community in planning efforts;
- Establish the development of comprehensive plans based on the findings;
- Focus the future plans on community norm change;
- Strengthen and improve program evaluation efforts; and
- Standardize the assessment of community needs & assets across all local health departments.

During three community meetings, tobacco-related indicators in four priority areas were rated. The priority areas were: limiting tobacco-promoting influences, reducing the availability of tobacco, reducing exposure to secondhand smoke, and promoting tobacco cessation services. The group also rated tobacco control assets such as funding, social capital, and cultural diversity. After the indicators and assets were rated and scored, the group prioritized the areas they wanted to see addressed. The result was a well-balanced 2017-18 work plan that includes objectives to reduce the availability of tobacco products, reduce exposure to secondhand smoke, and grow/diversify the Tobacco Prevention Coalition so that more sectors of Butte County’s population are represented.

Safeguarding the health of future generations has been part of the underpinning of public health since its inception. Central to this theme is improving the health of mothers and babies.

“

We want a support group and workshops. Bring someone with credentials or an OBGYN to educate us. We can share our experiences with young wives, mothers to be, and those who are young and uneducated about pregnancy.”

-quote from focus group participant

INFORMING THE PUBLIC THROUGH CONSUMER INPUT AND COMMUNICATIONS IMPROVEMENTS

Maternal Child and Adolescent Health

From 2011-2015, only 55% of Asian women in Butte County had entered prenatal care within the first trimester of pregnancy.

Focus groups were conducted with Hmong women to identify why they were not entering prenatal care in the first trimester. They were asked about their cultural beliefs and practices, earliest entry into care, possible barriers to seeking care, and ways to educate other Hmong women. It was discovered that Hmong cultural practices and beliefs about pregnancy are passed down from mother or mother-in-law to daughter, and were identified as both supernatural and practical by participants. Translation services and knowledge deficit were also identified as barriers in entry to care.

The focus groups clearly identified the need for outreach, education and support groups. An educational support group for Hmong women is being formed.



SUSTAINING PARTNERSHIPS WITH ACCESS TO DATA

California Children's Services

The California Children's Services Program (CCS) is a state program for children up to 21 years old with eligible diseases or health problems. At 21, the child ages out of the program, and is no longer eligible to receive case management services from the Public Health Nurses (PHN) within the CCS program.

Over the last two years, the PHNs have been working with Chico State Social Work interns to identify children, aged 14 years or older, who are expected to have chronic health conditions that will extend past their twenty-first birthday. Once identified, the PHN and intern work with the family to put a transition plan in place for the child.

Family participation is key to successful transition planning. To increase family participation

and engagement within the CCS program, staff worked directly with the department's Communications Manager to design informational brochures, a resource guide for transitional aged youth, and online materials.

Information is now more available for participating families to access the care they need during and after their participation in the program. This has set the foundation to increase family engagement and participation within the program.

IMPROVED COMMUNICATION TOOLS



Did You Know...

All 58 counties in California have their own First 5 and they are funded based on each county's annual birth rate.

Butte County accounted for 2,464 of the 502,879 births in California.

This past year, First 5 funded 25 partner programs, serving 10,269 children and caregivers.

First 5 Butte County Children and Families Commission contracted with Persimmony International, Inc., in 2016, for use of Persimmony's software system. Through its work with 20 additional First 5 Commissions throughout California, Persimmony has gathered extensive experience and an in-depth understanding of the unique work of First 5 Commissions and their partners.

Persimmony is an easy-to-use Internet-based data management system that enables First 5 to effectively track the measurements and outcomes of the programs and services it helps to fund. Numerous ready-made reports are easily available within the system, and customized reports can be easily developed. The adaptability and flexibility of the system ensures staff can not only enter important data but can also retrieve data that is useful and meaningful to varied community stakeholders.

First 5 chose Persimmony not only for its usefulness to First 5 but also because of its benefits to our partners and grantees. Each partner and/or grantee has individualized access to their own part of the Persimmony data system. Besides entering data required for First 5 funding, users are also able to record data for non-First 5 funded programs. The hope is that use of Persimmony can support both grantees and partners in their long-term sustainability plans for various programs and services critical to the health and well-being of our community's children and families.

Animal Control

Increasing the number of licensed dogs in Butte County is a key element of promoting and protecting the health of animals and citizens. New online dog licensing has created the infrastructure for a more protected community.

Low-Cost Vaccination Clinics

Animal Control staff conducted four low-cost vaccination clinics in 2016, vaccinating 56% more animals than the previous year. In addition to the normal clinic locations in Oroville and Chico, and with the help of community partners, successful clinics were held in the outlying communities of Berry Creek and Gridley. SPCA and Butte County staff also assisted residents with microchipping and dog licensing services, both of which help to get lost animals home fast and safely.

Online Dog Licensing

Online dog licensing was launched for unincorporated Butte County residents in July of 2016. The process aims to give dog owners an easier and faster method of licensing their dogs. The application is available 24 hours a day and can be done from any computer or mobile device with internet access. To apply for an online dog license, residents can complete a brief application and attach a photo of the rabies certificate for the dog. Animal Control staff will review the application and reply with a personal reference number and a link to a secured payment site to complete the transaction.

Since its launch, 6.7% of all dog licenses have been generated from online sales with 10% during the months of October, November, and December.

Prior to online licensing, residents were limited to licensing their dog in person or by mail, which can take up to 2 weeks. Animal Control anticipates seeing the percentage of online license sales increase, making this the standard method of licensing for residents.

NEW ONLINE DOG LICENSING EXPEDITES PROCESS FOR RESIDENTS



VACCINATION CLINICS REACH NEW COMMUNITIES

2015-2016 FINANCES

Expenditures	Amount
Salaries & Employee Benefits	\$11,014,190
Services & Supplies	\$4,252,530
Other Charges	\$1,380,600
Capital Assets	\$132,131
Other Financing	\$551,570
Total:	\$17,331,021

2015-2016 Fiscal Year
Expenditures
 Total: \$17,331,021

Revenue	Amount
Licenses, Permits & Franchises	\$97,863
Fines, Forfeitures & Penalties	\$10,790
Use of Money & Property	\$194,518
Intergovernmental Revenues	\$11,440,355
Charges for Services	\$3,320,018
Miscellaneous Revenues	\$8,181
Other Financing Sources	\$1,299,898
Special Items	\$1,493
Total:	\$16,373,116

2015-2016 Fiscal Year
Revenue
 Total: \$16,373,116

BUTTE COUNTY



CALIFORNIA



GENE AZPARREN

Award of Excellence
Creative work and collaboration in improving the health status of people living in Butte County.

Gene has collaborated with hundreds of local health partners during the accreditation process to connect the dots on all PHAB requirements. His work has guided community members through the assessment and planning process to, ultimately, improve the community's health.



DAVID BURRELL

Outstanding Customer Service
Demonstrates a customer focused approach by creating and implementing a service standard in a program or division.

Dave has set a service standard of trust and professionalism in all that he does. He consistently does more than asked or required of him. He works hard to make sure our facilities are comfortable and safe. He makes each person feel like their needs are a priority.



SANDY HENLEY

Quality Improvement
Improved a process or program in a way that demonstrates methods of efficiency relating to time and/or money.

Sandy literally brought QI to the department. He worked many hours to help staff understand the importance and process of QI projects. His leadership and consistency in this area have proven invaluable.