



Jim Lindley
Director

Mission Statement
The Public Health Department promotes and improves the health, safety and quality of life of San Bernardino County residents and visitors.



GOALS

PREVENT DISEASE AND DISABILITY AND PROMOTE HEALTHY LIFESTYLES

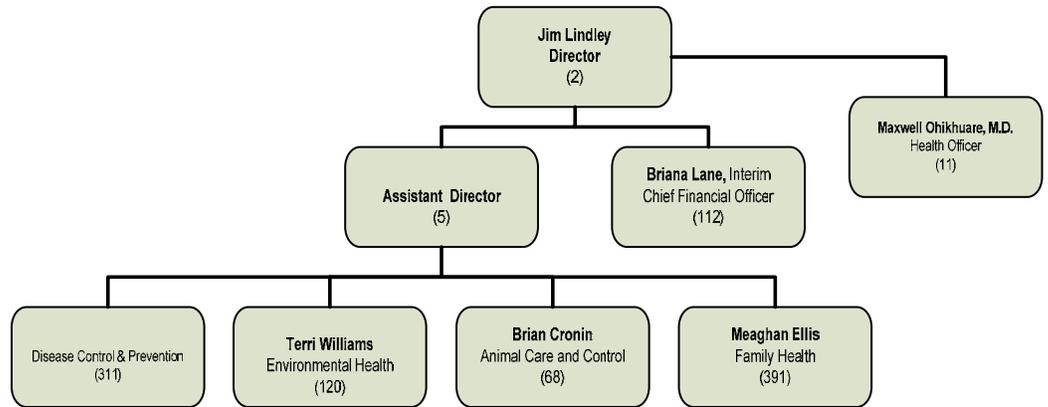
PROMOTE AND ENSURE A HEALTHFUL ENVIRONMENT

DEVELOP INTEGRATED COUNTYWIDE COMMUNITY CLINICAL SERVICES



PUBLIC HEALTH

ORGANIZATIONAL CHART



DESCRIPTION OF MAJOR SERVICES

The Department of Public Health (Public Health) provides a wide range of services to prevent diseases and improve the health, safety, and quality of life for residents and visitors of San Bernardino County. Many services are mandated by the State Health and Safety Code. Key delivery areas for 2010-11 include Healthy Communities, Preparedness and Response, Communicable Disease Control and Prevention, Environmental Health, Animal Care and Control and California Children’s Services.

Healthy Communities is a countywide initiative to support collaborative efforts to improve the quality of life for all residents. Preparedness and Response ensures the county capacity to respond to public health or bioterrorism emergencies. Communicable Disease Control and Prevention provides for surveillance and prevention of tuberculosis and HIV/AIDS, and immunizations to prevent disease.

Environmental Health prevents, eliminates, or reduces hazards adversely affecting the health, safety, and quality of life through integrated programs such as Food Protection, Vector Control (including West Nile Virus surveillance) and Regulatory Water activities. Animal Care and Control protects the public from rabies through dog vaccinations, stray animal abatement, wildlife rabies surveillance, and public education. California Children’s Services provides case management, diagnosis, and treatment services to individuals up to 21 years of age with severe qualifying medical conditions.

2009-10 SUMMARY OF BUDGET UNITS

	Appropriation	Revenue	Local Cost	Fund Balance	Staffing
General Fund					
Public Health	83,092,275	79,820,646	3,271,629		863
California Children's Services	18,031,236	13,421,503	4,609,733		157
Indigent Ambulance	472,501	-	472,501		-
Total General Fund	101,596,012	93,242,149	8,353,863		1,020
Special Revenue Funds					
Bio-Terrorism Preparedness	3,095,535	2,576,813		518,722	-
Tobacco Use Reduction Now	422,480	403,760		18,720	-
Vital Statistics State Fees	726,967	150,752		576,215	-
Vector Control Assessments	3,582,526	1,634,436		1,948,090	-
Total Special Revenue Funds	7,827,508	4,765,761		3,061,747	-
Total - All Funds	109,423,520	98,007,910	8,353,863	3,061,747	1,020

GOALS, OBJECTIVES, AND PERFORMANCE MEASURES

GOAL 1: PREVENT DISEASE AND DISABILITY AND PROMOTE HEALTHY LIFESTYLES.

Objective A: Decrease the number of babies born with exposure to drugs and/or alcohol due to their mother's substance abuse during pregnancy.

Objective B: Increase compliance among providers of children's immunizations.

MEASUREMENT	2007-08 Actual	2008-09 Actual	2009-10 Target	2009-10 Estimate	2010-11 Target
1A. Percentage increase of pregnant women screened for drug use (7,850 women in 2005-06).	6% (10,273)	7% (10,970)	5% (11,519)	2% (11,189)	2% (11,413)
1B. Number of visits to immunization providers with less than 90% of children up-to-date for age per the Advisory Committee on Immunization Practices' recommended immunization schedule.	N/A	172	200	204	200

Status

1A. The Perinatal Screening, Assessment, Referral, and Treatment Program continues to successfully screen pregnant women for tobacco, drug, and alcohol use. The department anticipates screening 11,189 women for 2009-10. The 2010-11 target of 11,413 reflects an ongoing leveling of the screenings. Women testing positive for substance usage are case managed by Public Health. First 5 continues to fund Public Health and Behavioral Health for case management services and to allow staff to make home visits to high risk clients.

1B. The department conducted 172 visits in 2008-09 to immunization providers. For 2009-10 the department estimates completing 204 visits to providers. The 2010-11 target reflects anticipated level staffing and a maintenance of the visit rate. The visits may include the following to facilitate up-to-date immunization rates: 1) quality assurance review, e.g. vaccine storage and handling, immunization documentation, 2) Comprehensive Clinic Assessment Software statistical analysis of provider immunization rates, 3) comprehensive chart reviews, 4) physician and office staff training, 5) compliance plan development and implementation, and 6) VaxTrack immunization registry recruitment and training. Following the initial assessment visit, providers receive a written report with their findings—this report is also submitted to the California Department of Public Health Immunization Branch. Providers with low up-to-date rates receive additional visits in which strategies and interventions are presented and documented in a compliance plan to improve immunization practices and up-to-date rates.

2008-09 ACCOMPLISHMENTS

- ❖ *Implemented the Healthy Communities Institute Network*
- ❖ *Healthy Communities was awarded a Safe Routes to School grant for non-infrastructure projects specific to the High Desert communities*
- ❖ *The emergence of the H1N1 flu virus resulted in the activation of the Public Health Department Operations Center in April 2009 and utilizing the web Emergency Operations Center to enhance coordination, communication and response activities*
- ❖ *The Public Health Lab continues to provide testing for the H1N1 outbreak*
- ❖ *Animal Care and Control*
 - *Responded to 35,884 field service calls*
 - *Cared for 16,231 animals at County operated shelters*
 - *Adopted 3,762 animals for a 30% increase from the prior year*
- ❖ *Maternal and Child Health developed a model of collaboration between hospitals, private health care providers and local stakeholders to reduce the number of elective labor inductions*

GOAL 2: PROMOTE AND ENSURE A HEALTHFUL ENVIRONMENT.

Objective A: Enhance the level of sanitation in food facilities by increasing the number of trained and certified restaurant food handlers.

Objective B: Establish additional Joint Powers of Authority (JPA) to regionalize animal care and control services.

MEASUREMENT	2007-08 Actual	2008-09 Actual	2009-10 Target	2009-10 Estimate	2010-11 Target
2A. Percentage increase of restaurant food handlers receiving training and certification.	9% (39,065)	10% (43,140)	5% (45,120)	0% (43,140)	0% (43,140)
2B. Increase the number of municipalities that participate in the Animal Care and Control Joint Powers of Authority.	N/A	1	2	1	2

Status

2A. In 2006-07 the department implemented a new training program for food handlers to enhance the level of sanitation in food facilities and thus reduce food borne illnesses. For 2007-08 the department certified 39,065 food handlers. In 2008-09 the department certified 43,140 food handlers, which was above the estimate of 42,972. The department had anticipated increasing this number by 5% in 2009-10 for a total of 45,120. Due to the impact of the ongoing economic downturn, the department anticipates certifying only 43,140 in 2009-10 and again in 2010-11.

2B. The department established the first JPA to provide Animal Care and Control and Shelter Services with the Town of Yucca Valley in 2008-09. The previous target was to have two municipalities in the newly formed JPA, but the uncertainty of the economy along with other factors did not provide an appropriate opportunity to realize this objective. The department proposes to establish another JPA in partnership with a second municipality in 2010-11.

GOAL 3: DEVELOP INTEGRATED COUNTYWIDE COMMUNITY CLINICAL SERVICES.

Objective A: Develop unique strategic plans for integrating countywide, community clinical services offered by Public Health, Arrowhead Regional Medical Center (ARMC), and Behavioral Health into single full scope, area diagnostic and treatment centers.

MEASUREMENT	2007-08 Actual	2008-09 Actual	2009-10 Target	2009-10 Estimate	2010-11 Target
3A. Produce individual plans detailing patient demographics, site locations, systems integration, fiscal requirements and program design for two of the proposed integrated service models in the eleven identified catchment areas throughout the county.	N/A	N/A	Complete January 2010	75% Complete July 2009	Complete June 2011

Status

3A. The Department of Public Health, Arrowhead Regional Medical Center, and the Department of Behavioral Health are in collaboration to integrate health services by aligning clinical access to customer oriented comprehensive coordinated healthcare services. This integrated model would eliminate duplication of service provision and optimize resource effectiveness in the overall delivery of outpatient care. Recognition of patient needs for varying services would be immediate and result in a "warm hand off" to a qualified healthcare provider.

The initial pilot for integrating services on a defined scale occurred at Holt Clinic in Ontario where Behavioral Health staffs were embedded into Public Health services and eligibility workers were strategically placed in Maternal/Child Health. The success of the pilot at the Holt Clinic contributed to the relocation of mental health and alcohol and drug services from a Chino facility to the Ontario site. This merger further advances integrated care and forms the new Ontario Community Counseling center.

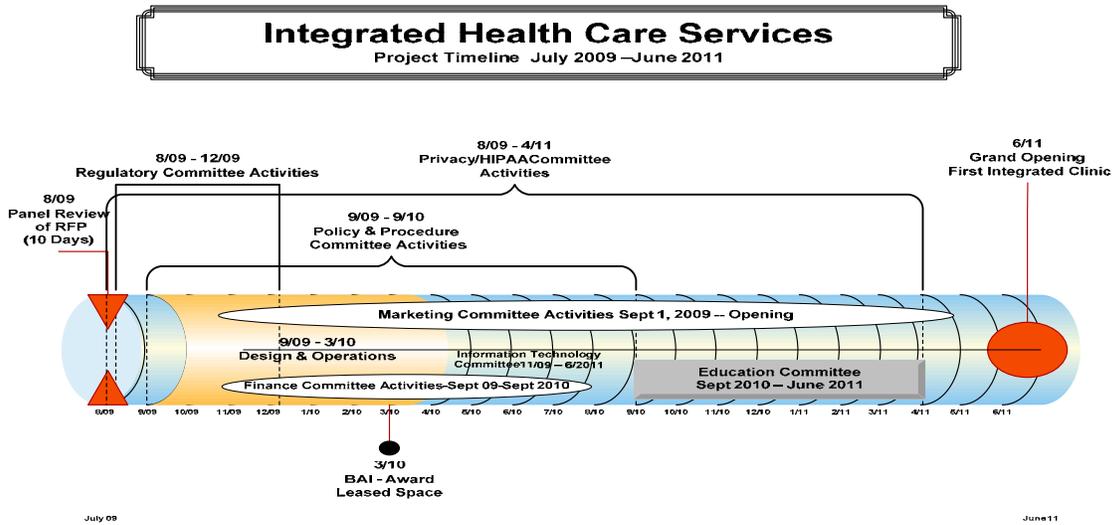
The next prototype of full scope service is designed to integrate primary care from Westside Family Health Center, Maternal Health, Reproductive Health and the Women, Infant and Children (WIC) Programs from Public Health and Individual/Group Counseling from Behavioral Health.

On June 9, 2009, the Board of Supervisors accepted the report on the Integrated Healthcare Project and approved the release of a RFP for approximately 41,000 square feet of office and medical space for the first Integrated Clinic in the Westside of San Bernardino County. The project report highlighted the services that would be offered, a financial proforma which identified challenges to the project, and a justification for the selection of the first catchment area. The RFP has been released and proposals are under evaluation. The site location and vendor selection is anticipated to be completed by March 2010, with the project design phase and production set to begin immediately upon Board of Supervisors approval. The anticipated completion date is June 2011.

Throughout 2009-10, the Integration Team has established six committees to address the operation and functions of the proposed clinic, with specific focus on completion of several goals including a marketing plan, evaluation of regulatory bodies, legal requirements and code compliance needs, development of a policy and procedure manual, education and training needs for involved staff as well as the design and operational flow for this flagship Integrated Healthcare Clinic.

For 2010-11, the Integration Team will continue these efforts, complete and open the doors to the first clinic, and return to the Board of Supervisors with a request to release a RFP for the second Integrated Healthcare Clinic.

Following is a timeline for the current project:



2010-11 REQUESTS FOR GENERAL FUND FINANCING

Brief Description of Policy Item or CIP request	Budgeted Staffing	Appropriation	Dept. Revenue	Local Cost
1. Additional one-time funding for construction of new facility to serve the San Bernardino County/Town of Yucca Valley Animal Care Joint Powers Authority (CIP).		1,312,500	-	1,312,500

MEASUREMENT	2007-08 Actual	2008-09 Actual	2009-10 Target	2009-10 Estimate	2010-11 Target
P1. Award contract for construction of a new animal shelter to serve the San Bernardino County/Town of Yucca Valley Animal Care Joint Powers Authority					Construction contract awarded by December 2010

2010-11 PROPOSED FEE/RATE ADJUSTMENTS

DESCRIPTION OF FEE REQUEST

1. The department proposes amending various fees contained within Title 1, Division 5, Chapter 2, Section 16.0213A of the San Bernardino County Code for a total Animal Care and Control fee revenue increase of \$1,626.
2. The department proposes amending various fees within Title 1, Division 6, Chapter 2, Section 16.0213B of the San Bernardino Code for the Environmental Health Division to cover costs associated with recent law changes and to cover the cost of school inspections. The Department also proposes a 5% fee increase to EHS fees to cover rising expenses associated with increasing costs.

SERVICE IMPACTS

The department is changing several fees in animal control to cover the actual cost of services, encourage adoptions and simplify the adoption and relinquishment process.

The changes in fees will allow Environmental Health to cover actual cost to perform its state mandated services, perform school inspection, and to enforce the provisions of AB 1020.

If there are questions about this business plan, please contact Jim Lindley, Director, at (909) 387-9146.



Animal Care and Control in action



Promoting Health Babies at the Child and Family Health Services Health Fair



Spraying to prevent West Nile Virus

