

28 August 14, 2007

**COUNTY OF SONOMA
AGENDA ITEM
SUMMARY REPORT**

Clerk of the Board Use Only:

Meeting Date Held Until
____/____/____ ____/____/____

Agenda Item No: Agenda Item No:

Department: Health Services

() **4/5 Vote Required**

Contact:
Rita Scardaci

Phone:
565-4700

Board Date:
8/14/07

Deadline for Board Action:

AGENDA SHORT TITLE: Community Health Improvement Action Council

REQUESTED BOARD ACTION:

Receive a report from the Director of Health Services convening a Community Health Improvement Action Council, with participation from health care, business, government, labor, consumer advocates and other stakeholders, to develop recommendations on collaborative approaches to promote the health of our community and improve the health care delivery system.

Authorize the Director of Health Services to execute a consulting contract with Pacific Health Consulting Group from September 1, 2007 through August 31, 2008, and any future amendments that do not significantly change program content (\$74,200).

Resolution amending the Department Position Allocation List – Department of Health Services – adding 1.50 FTE positions.

CURRENT FISCAL YEAR FINANCIAL IMPACT

EXPENDITURES

**ADD'L FUNDS REQUIRING BOARD
APPROVAL**

Estimated Cost \$ 241,737

Contingencies
(Fund Name:)

Amount Budgeted 241,737

Unanticipated Revenue
(Source:)

Other Avail Approp
(Explain below)

Other Transfer(s)
(Source:)

Additional Requested: \$ 0

Add'l Funds Requested: \$ 0

Explanation (if required): A technical adjustment in the amount of \$241,737 has been submitted pending approval of this item.

Prior Board Action(s): 4/17/07 - Directed the Department to initiate a community planning process on access to quality, affordable health care in Sonoma County.

Alternatives – Results of Non-Approval: Lost opportunity to develop short and long term health care solutions.

BACKGROUND: (Note: Contract with Pacific Health Consulting Group is on file with the Clerk of the Board.)

It is widely acknowledged that the local health care delivery system is in crisis. The number of uninsured in Sonoma County is estimated at over 42,000 and growing. Physicians continue to leave the community and specialists are in short supply. District hospitals are struggling financially as the competitive pressures of a rapidly changing health care marketplace continue to threaten and destabilize an already "broken" system.

Sonoma County is not alone in experiencing the impacts of the health care situation. Communities throughout the state have come together seeking solutions at the local level. Dealing with the state's estimated six million uninsured has become the highest priority for the Governor and many in the California legislature. Calls for health care reform from across the nation are likely to make health care a central issue of the 2008 presidential campaign.

The level of community concern about Sonoma County's health care system increased significantly with the January 2007 announcement of the proposed closure of Sutter Medical Center of Santa Rosa. Recognizing the need to act quickly to safeguard certain aspects of local health care, a number of independent groups formed to consider such issues as access to women's reproductive health care, the Sutter Family Practice Residency program, preserving district hospitals, and strengthening the primary care system. These groups, and other community and health care organizations, called on the Board to create a forum to analyze local health care problems and offer solutions. At its public workshop on the proposed hospital closure, the Board directed the Department of Health Services to convene a community health care planning process. The Department agreed to return to the Board with additional detail on a proposed planning structure, scope and membership with the intent to convene the Health Improvement Action Council in the Fall of 2007.

Council Mission and Focus

The Health Improvement Action Council's mission is community health improvement. To achieve its mission, the Council will have a dual focus: 1) to develop initiatives to improve overall community health, and 2) to find solutions to local health care delivery problems. The Council recognizes that community health improvement involves more than just health care. Individual health behaviors and environmental risk factors are proven to have far greater impact on population health than the provision of medical services. Improvements in the health care delivery system will have only a marginal impact on the health of Sonoma County residents absent this combined effort to improve individual behavior and lifestyle choices, and the creation of healthier workplaces, schools and neighborhoods. For these reasons, the goals of the proposed Health Improvement Action Council will be to:

- Engage a broad spectrum of stakeholders in a community dialogue on health and health care reform;
- Enrich the collective understanding of local health and health care issues and solutions;
- Create a shared vision for community health improvement;
- Develop and implement collaborative recommendations to promote and protect community health and improve the local health care delivery system.

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Attachments: Resolution amending the Department Allocation List.

On File With Clerk: Contract with Pacific Health Consulting Group.

CLERK OF THE BOARD USE ONLY		MOTION	AYE	NO
Board Action (If other than "Requested") _____ _____ _____ _____	Vote: KERNS		✓	
	SMITH		✓	
	KELLEY		✓	
	REILLY		✓	
	BROWN		✓	

BACKGROUND: (continued)

Planning Process Overview

Building on the success of Healthy Kids and Medi-Cal Managed Care planning projects, and the interest and commitment of community stakeholders, the Department will convene a diverse group of recognized community leaders and health care experts. Consistent with Goal III of the County Strategic Plan, which is to *Enhance the capacity of County programs and community systems to more effectively meet the changing needs of individuals, families and communities in Sonoma County*, the collaborative group will develop specific recommendations to promote the health of our community and improve the health care delivery system.

By September 2008, the Council will return to the Board with initial recommendations. While most of the Council's recommendations will not require Board action, the Board's support will be valuable in encouraging and supporting local initiatives at all levels. The Council will then prioritize its recommendations and develop action plans for execution. Specific project implementation will begin in the Spring of 2009.

Key Milestones

- October 2007 – Convene Council and establish task force structures.
- October 2007 - June 2008 – Facilitate collaborative learning and dialogue to build consensus on priority issues and begin development of recommendations.
- July 2008 – Convene public forums to present Council findings and preliminary recommendations and gather public feedback.
- October 2008 – Present recommendations to the Board and begin implementation planning.
- Spring 2009 – Complete implementation planning, present action plans to the Board, and assemble task groups to implement and monitor progress on action plans.
- Fall 2009 – Report progress to the Board; evaluate the effectiveness and accomplishments of the Council and determine its continued role.

Council Membership, Leadership and Structure

The Health Services Director and one Board member will serve as co-chairs. Members of the Council will be appointed by the Health Services Director and will include representatives from the physician community, hospital and health maintenance organizations, community clinics, the County Health Officer, local employers, local governments, labor organizations and consumer advocates. Approximately 30-35 members, selected for their demonstrated leadership and expertise, will be recruited to serve on the Council for an initial two-year term. Council membership will be configured to balance the interests of the community's diverse stakeholder groups and to reflect the county's geographic and ethnic diversity.

To accomplish its objectives, the Council will create two advisory task forces, one to examine the delivery system and the other to focus on community health issues. Task forces will identify priority health care issues, gather relevant data, conduct analysis and develop preliminary recommendations for consideration by the Council. Chaired by Council members and comprised of Council appointees, the task forces will extend the reach of the Council by engaging expertise beyond Council membership and linking to key health care work groups and consumer advocacy organizations. Monthly Council and task force meetings will be open to the public.

Relationship to Proposed Hospital Closure

Recent activities related to the proposed hospital closure highlight the challenges and opportunities to address ongoing problems in the Sonoma County health care delivery system. While the County will continue its process to assure that the provisions of the Health Care Access Agreement are met by Sutter Medical Center, the Council will provide an additional forum for health care organizations and other stakeholders to explore the issues raised by the proposed hospital closure and, as feasible, continue their work on the development of collaborative solutions to these and other challenges. In

BACKGROUND: (continued)

this way, the Council serves as a community platform from which initiatives and partnerships, large and small, can be developed, launched, supported and evaluated.

Community Engagement

Expanding community engagement is a key component of the planning project. Department staff has already participated in meetings with health care partners and other stakeholders to present preliminary plans for the Council and obtain feedback and suggestions. These meetings included the Board of Directors of the Sonoma County Medical Association, the Sonoma Health Access Coalition Steering Committee, representatives of the newly-formed district hospital Joint Powers Authority, and other groups. Response has been consistently positive with stakeholders expressing support for the Council and for a collaborative process to develop and implement the Council's recommendations. These groups will be actively involved in the Council, through its membership and task force structures, and will play a key role in defining the Council's priorities and focus. A series of public forums is planned for Spring 2008 to publicize the Council's work, gather public input, and to educate the broader community about critical local health and health care issues.

FISCAL IMPACTS:

The budget for the first year of Council operation is \$241,737. Funds will be utilized for staff salaries and benefits to oversee and coordinate the project (\$137,342); a technical assistance contract with Pacific Health Consulting Group (\$74,200); other potential contracts as needed (\$15,945); and office supplies, materials and other operating expenses (\$14,250). Based on the number of past and future retirements, the Department is not requesting a limited term position. Pending approval of this item a technical adjustment using \$241,737 of realignment funds will be made to the FY 07-08 Proposed Budget. The Department is actively seeking resources to support the Council from a variety of sources such as California Endowment, California Wellness Foundation and California Health Care Foundation. The Department will also collaborate with local endowment organizations, health care partners, and other stakeholder groups to develop the matching support necessary to engage the foundations and fully fund the planning process. There is no contribution from the General Fund.