

Ukiah Valley Medical Center

Community Health Needs Assessment

2013



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Executive Summary

In 2013, Ukiah Valley Medical Center collaborated with a coalition of Mendocino county non-profits to launch the Healthy Mendocino website to meet the requirements for future development of the triennial Community Health Needs Assessment (CHNA). The community health needs assessment is conducted not only to fulfill the requirement of California's Community Benefit Legislation (SB 697) and the Affordable Care Act (H.R. 3590); but also in response to the mission of our hospital: "...by providing physical, mental, and spiritual healing".

Key Findings:

- According to the California Department of Finance, the older adult population, 60 and older increased slightly over 30% in Mendocino County between 2000 and 2010 whereas the adult population, 30-59 decreased by 7% in the same time period.
- Chronic diseases account for the four leading causes of death in Mendocino County with cancer (including lung cancer) and heart disease causing over 50% of all deaths followed by stroke and chronic lower respiratory diseases.
- The suicide death rate for Mendocino County (23.7 per 100,000) is significantly worse than the rate for California (9.6 per 100,000) or Healthy People 2020 (4.8 or less per 100,000).
- An estimated 27.7% (more than one-fourth) of Mendocino County residents were diagnosed with arthritis compared to 19% statewide.
- In 2009, 17.4% (almost 1 in 5) of Mendocino County adults were current smokers; and 38.2% (almost 2 in 5) of adults engaged in binge drinking in the past year.

After reviewing the CHNA we asked the following questions: **1) What is really hurting our communities? 2) How can we make a difference? 3) What are the high impact interventions? 4) Who are our partners? and 5) Who needs our help the most?** From this analysis, three priority areas were identified:

- Behavioral Health
- Chronic Disease with emphasis on: *diabetes heart disease, stroke, and cancer prevention*
- Advanced Aging Care with emphasis on: *accident prevention and orthopedic care*

Moving forward, these priority areas will be used to guide the development of a Community Health Plan, with initiatives designed to address these concerns. Building a healthy community requires multiple stakeholders working together with a common purpose. We invite you to explore our health challenges in Mendocino County outlined in this report. More importantly though, we hope you use the findings in this report to conceptualize collective solutions, establish sustainable partnerships, and work towards a healthier Mendocino County.

Letter from the CEO

Dear Community,

What an exciting time in Ukiah Valley Medical Center's history to be assessing the healthcare needs of the wonderful community we are privileged to serve.

As this assessment comes to completion, Ukiah Valley Medical Center (UVMC) will have recently broken ground on a brand new Emergency Department and Intensive Care Unit, a project made possible by the generous support of you, our community, and our Adventist Health family.

These newly renovated facilities will allow us to better meet the growing critical care needs of Mendocino County, expanding our ability to care for the vulnerable populations identified in the following report.

This project is just but one example of how UVMC is continually exploring and opening avenues to provide the best resources available for the families we serve throughout a 3,700-square mile service area. Throughout this assessment, you will see examples of how UVMC has taken actions to work with our community partners to provide active support for some of the most emergent trends affecting us.

Our mission is to share God's love to our community by providing care to the whole person; mind, body and spirit. Our mission guides our work every day and I hope you experience it as compassionate care through each and every one of your interactions with us.

As the face of healthcare continues to evolve with a myriad of complex regulatory changes, I am energized to meet the needs of Mendocino County alongside such a mission-driven team of healthcare professionals, a generous community, strong set of community partners, and Adventist Health.

It is an honor and a privilege to serve you in this new era of healthcare; our community, our partners, our neighbors . . . our family.

Sincerely,



Gwen Matthews
Chief Executive Officer, Ukiah Valley Medical Center



Introduction

Where and how we live is vital to our health. As you read this document, think about health in Mendocino County as the environment in which we live, work, and play. Economic opportunities, access to nutritious foods, green space, and the availability of social networks, are key determinants in shaping our health. Our hope is to focus beyond pressing health care challenges to see the resources and assets that exist in our community and how we can align them for better health outcomes.

Ukiah Valley Medical Center, part of Adventist Health, is dedicated understanding our community and contributing to its' growth and well-being. In 2011, Ukiah Valley partnered with 19 other community organizations to create and fund *Healthy Mendocino*. Healthy Mendocino is a collaborative effort to track key indicators of health in Mendocino County and make this information publicly available through the HealthyMendocino.org website. Information on the website includes traditional health measures plus data on the economy, natural and social environments, education, public safety, transportation, and more:

- Dashboard of local health and quality of life indicators, with comparison graphics
- Database of 1800+ Promising Practices from across the U.S., with contact information
- Links to local resources such as 211 (a service clearinghouse) and other initiatives and websites
- 2012 Community Health Needs Assessment

For 2013, Ukiah Valley has officially adopted Healthy Mendocino's CHNA to satisfy the legal requirements of the Affordable Care Act (full report can be found in Appendix A).

Developing priorities and targeting interventions from knowledge gained through this assessment, increases our ability to improve the health of our community. **Developing a shared understanding of challenges** and opportunities is a critical next step to creating and implementing a community health plan that addresses each priority area identified.

Building a healthy environment requires multiple stakeholders working together with a common purpose. We invite you to explore the health status in our community, which is outlined in this assessment. More importantly though, we hope you imagine a healthier region, where we collectively prioritize our health concerns and find solutions across a broad range of sectors to create healthier communities for ourselves and our families.

Methodology/Requirements

The CHNA is conducted not only to fulfill the requirement of California’s Community Benefit Legislation (SB 697) but also in response to the hospital’s mission, “We reflect God’s love to our community by providing physical, mental and spiritual healing”. The CHNA also meets the requirements of the Patient Protection and Affordable Care Act of 2010 (H.R. 3590) for nonprofit hospitals. The primary focus of this assessment is on elevating the health of our community by identifying community needs and prioritizing our response to those needs. As such, we have adopted Healthy Mendocino’s CHNA for 2012. This will allow for alignment of priority areas and provide opportunities for future collaborative efforts.

Quantitative Data

- Data on key health indicators, morbidity, mortality, and various social determinants of health were collected from the HealthyMendocino.org Community Dashboard. Indicators available on this site were collected from a variety of sources including: the United States Census Bureau, California Department of Public Health, California Health Interview Survey, County Health Rankings, and other various local, state and federal databases.

Qualitative Data

To validate data and ensure a broad representation of the community, qualitative data was collected as follows:

- Key informant interviews with community leaders to engage them in the development of our interventions and elicit their input to improve the health of our region

Information Gaps

It should be noted that the key informant interviews are not based on a random sample of community leaders. The key informants were not chosen based on random sampling technique, but were invited because their comments represented the underserved, low income, minority, or chronically ill populations. Finally, this assessment relies on several national and state entities with publicly available data. All limitations inherent in these sources remain present for this assessment.

Community Profile

Ukiah Valley Medical Center (UVMC) is a 67-bed, not-for-profit hospital located in Ukiah, the county seat of Mendocino County. As the largest and most comprehensive healthcare facility in the county, UVMC offers a complete range of health care services for the communities we serve. Our emergency department operates with a physician on duty 24-hours a day and is designated as a Level IV Trauma Center. Each year, UVMC treats more than 25,000 patients in its emergency room, performs more than 5,000 surgical procedures in its hospital based and ambulatory surgery center, delivers nearly 850 babies, and performs more than 43,000 radiology tests. Our facilities include:

- 24-hour Emergency Care and Trauma Center
- Advanced Wound Center
- Intensive Care Unit
- Level II Intensive Care Nursery
- Family Birth Center
- Women's Services
- Cardiac Services
- Pediatrics
- Family Practice
- Pain Management Center
- Rapid Care Extended Hours
- State-of-the-art Diagnostic Services
- Inpatient & Outpatient Surgical Services
- Rehabilitation Services
- Health Education

Ukiah, California, in Mendocino County, is 55 miles NW of Santa Rosa, California and 100 miles NW of Sacramento, California. The city has a population of 15,497.

Ukiah rests in the heart of Mendocino County, California. Mendocino County is a 3,509 square mile rural county in Northern California wherein some geographic areas are actually designated as frontier. It is the 15th largest county in California, and topographically diverse, with ocean, inland valleys, mountains, lakes and rivers and redwood forests.



According to the Office of Statewide Health Planning and Development (OSHPD), in 2011 the majority of patients discharged from Ukiah Valley reside in Ukiah (84.4%, 95482 zip code). The remainder resides in Willits (15.6%, 95490 zip code).

Age and Gender

Age is a critical component of understanding a community's profile and provides elements in planning for needed health services. Younger populations require more prevention and health education while older populations are prone to certain chronic diseases and require health services in higher acuity settings. With the Baby Boomer Generation aging, chronic diseases are expected to increase. January 2011 marked the beginning stage of Baby Boomers entering the Medicare program. Having an accurate count of the age distribution of the service area is imperative in ensuring availability of adequate health care services.

Males and females have differing healthcare needs and require targeted services.

Understanding gender distributions of the community can ensure appropriate healthcare delivery. Gender also has important health implications in terms of access to resources and services, engagement in risk behaviors, and environmental exposures.

2012 Emergency Department Encounters, by Age

Age Groups	Number	Percent
01-09	2,576	11.89%
10-19	2,534	11.70%
20-29	3,757	17.34%
30-39	3,000	13.85%
40-49	2,778	12.82%
50-59	2,736	12.63%
60-69	1,701	7.85%
70-79	1,026	4.74%
80 years +	1,079	4.98%
Under 1 year	479	2.21%
Total	21,666	100.00%

Note: Percentages may not equal 100% because of rounding. Data source: OSHPD Healthcare Atlas (2013).

2012 Hospital Discharge Summary, by Age

Age Groups	Number	Percent
01-09	47	1.0%
10-19	166	3.4%
20-29	690	14.0%
30-39	532	10.8%
40-49	333	6.7%
50-59	485	9.8%
60-69	598	12.1%
70-79	481	9.7%
80 years +	669	13.6%
Under 1 year	935	18.9%
Total	4,936	100.0%

Note: Percentages may not equal 100% because of rounding. Data source: OSHPD Healthcare Atlas (2013).

2012 Emergency Department Encounters, by Gender

Gender	Number	Percent
Female	11,622	53.64%
Male	10,044	46.36%
Total	21,666	100.00%

Note: Percentages may not equal 100% because of rounding. Data source: OSHPD Healthcare Atlas (2013).

2012 Hospital Discharge Summary, by Gender

Gender	Number	Percent
Female	3,059	62.0%
Male	1,877	38.0%
Total	4,936	100.0%

Note: Percentages may not equal 100% because of rounding. Data source: OSHPD Healthcare Atlas (2013).

Key Findings:

- In 2012, 17.34% of emergency department encounters were among patients aged 20-29 years.
- 18.9% of all hospital discharges were among patients under one year old.

Race and Ethnicity

A health disparity is defined as a persistent gap between the health status of minorities as compared to non-minorities in the United States. Despite continued advances in health care and technology, racial and ethnic minorities continue to have higher rates of disease, disability, and premature death than non-minorities.

2012 Emergency Department Encounters, by Race

Race	Number	Percent
American Indian or Alaska Native	1,520	7.02%
Asian	127	0.59%
Black or African American	412	1.90%
Native Hawaiian or Other Pacific Islander	4	0.02%
Other Race	536	2.47%
Unknown	565	2.61%
White	18,502	85.40%
Total	21,666	100.00%

Note: Percentages may not equal 100% because of rounding. Data source: OSHPD Healthcare Atlas (2013).

2012 Emergency Department Encounters, by Ethnicity

Ethnicity	Number	Percent
Hispanic or Latino	4,190	19.34%
Non-Hispanic or Non-Latino	17,032	78.61%
Unknown	444	2.05%
Total	21,666	100.00%

Note: Percentages may not equal 100% because of rounding. Data source: OSHPD Healthcare Atlas (2013).

2012 Hospital Discharge Summary, by Race

Race	Number	Percent
Asian/Pacific Islander	49	1.0%
Black	59	1.2%
Native American/ Eskimo/Aleut	262	5.3%
White	4,118	83.4%
Other	73	1.5%
Unknown	375	7.6%
Total	4,936	100.0%

Note: Percentages may not equal 100% because of rounding. Data source: OSHPD Healthcare Atlas (2013).

2012 Hospital Discharge Summary, by Ethnicity

Ethnicity	Number	Percent
Non-Hispanic	3,701	74.98%
Hispanic	900	18.23%
Unknown	335	6.79%
Total	4,936	100.00%

Note: Percentages may not equal 100% because of rounding. Data source: OSHPD Healthcare Atlas (2013).

Key Findings:

- The majority of hospital discharges and emergency department encounter were among Non-Hispanic/Non-Latino patients.

Existing Facilities and Resources

As part of our assessment, we compiled a list of existing facilities and resources in the area who were working to address health needs in our community. This was done not only to fulfill the legal requirements set forth by the Affordable Care Act, but also to educate ourselves on community partners and to look for potential connections.

Name	Location	Facility Type
Anderson Valley Health Center	13500 Airport Road Boonville, CA 95415	Total Care Clinic: Primary Care, Dental, Behavioral Health, Pharmacy
Consolidated Tribal Health Project, Inc.	6991 N. State St. Redwood Valley, CA, 95470	Total Care Clinic: Primary Care/Medical, Dental, Behavioral Health
County of Mendocino, CA Behavioral Health & Recovery Services: Fort Bragg	790-B South Franklin Street Ft. Bragg, CA 95437	Behavioral Health
County of Mendocino, CA Behavioral Health & Recovery Services: Ukiah	1120 South Dora Street Ukiah, CA 95482	Behavioral Health
County of Mendocino, CA Behavioral Health & Recovery Services: Willits	221-B South Lenore Avenue Willits, CA 95490	Behavioral Health
County of Mendocino, CA: Fort Bragg Health Center	120 West Fir Street Ft. Bragg, CA 95437	Public Health Center
County of Mendocino, CA: Ukiah Health Center	1120 South Dora Street Ukiah, CA 95482	Public Health Center
County of Mendocino, CA: Willits Health Center	221-B South Lenore Avenue Willits, CA 95490	Public Health Center
Frank R. Howard Memorial Hospital*	One Madrone Street Willits, CA 95490	Hospital
Hillside Health Center	333 Laws Avenue, Ukiah, CA 95482	Total Care Clinic: Primary Care/Medical, Dental, Behavioral Health, Specialty Care, Women's Health
Jerold Phelps Community Hospital	733 Cedar St Garberville, CA 95542	Hospital

Name	Location	Facility Type
Lakeside Health Center	5335 Lakeshore Boulevard, Lakeport, CA 95453	Total Care Clinic: Primary Care/Medical, Dental, Behavioral Health, Women's Health
Little Lake Health Center	45 Hazel St., Willits, CA 95490	Total Care Clinic: Primary Care/Medical, Dental, Behavioral Health, Specialty Care, Women's Health
Long Valley Health Center	50 Branscomb Road Branscomb, CA 95417	Total Care Clinic: Primary Care, Dentistry, Acupuncture, Chiropractic
Mendocino Coast Clinics: South Street	205 South Street Fort Bragg, CA 95437	Total Care Clinic: General Medical, Dental, Behavioral Medicine, Counseling
Mendocino Coast Clinics: Sequoia Circle	855 Sequoia Circle Fort Bragg, CA 95437	Total Care Clinic: OB/GYN, Perinatal, Women's Health Care, Patient Advocates
Mendocino Coast Clinics: Cypress Street	510 Cypress Street Fort Bragg, CA 95437	Pediatric Clinic
Mendocino Coast District Hospital	700 River Drive Fort Bragg, CA 95437	Hospital
Northbrook Nursing and Rehabilitation Center	64 Northbrook Way Willits, CA 95490	Skilled Nursing, Rehabilitation
North Coast Family Health Center	721A River Drive Fort Bragg, CA 95437	Total Care Clinic: Mental Health, Osteopathy Care, Primary Care, Pediatrics, Surgery
North Valley Behavioral Health	1535 Plumas Court Yuba City, CA 95993	Behavioral Health
Redwood Coast Medical Services: Gualala Medical Center	46900 Ocean Drive Gualala, CA 95445	Total Care Clinic: Primary Care, Urgent Care, Women's Health, Pediatric Care, Chronic Disease Management, Behavioral Health
Redwood Coast Medical Services: Point Arena Medical Center	30 Mill Street Point Arena, CA 95468	Total Care Clinic: Primary Care, Urgent Care, Women's Health, Pediatric Care, Chronic Disease Management, Behavioral Health
Redwood Coast Medical Services: Point Arena Dental Center	175 Main Street Point Arena, CA 95468	Dental Clinic
Southern Humboldt Community Clinic	509 Elm St, Garberville, CA 95542	Total Care Clinic: Primary Care/Medical
St. Helena Hospital*	10 Woodland Road, St. Helena, CA 94574	Hospital
St. Helena Hospital for Behavioral Health*	525 Oregon Street Vallejo, CA 94590	Behavioral Health
The Center for Life Choices	425 S Orchard Ave Ukiah, CA 95482	OB/GYN, Sexual Health, Patient Advocates
Ukiah Convalescent Hospital	1349 South Dora Street Ukiah, CA 95482	Skilled Nursing, Rehabilitation

*Member of Adventist Health

Community Partners

Ukiah Valley would like to acknowledge and thank our community partners for serving as a resource in conducting this community health needs assessment and assisting in the process:

- Alliance for Rural Community Health (ARCH)
- Anderson Valley Health Center
- Cancer Resource Centers of Mendocino County and UCSF Institute for Health Policy Studies
- Community Development Commission
- Community Foundation of Mendocino County
- Consolidated Tribal Health Project, Inc.
- FIRST 5 Mendocino
- Frank R. Howard Memorial Hospital
- MCAVHN
- Mendocino Coast Clinics
- Mendocino Community Health Clinic
- Mendocino County Sheriff's Office
- Mendocino County Health and Human Services Agency
- Mendocino County Youth Project
- MendoLake Credit Union
- North Coast Opportunities (NCO)
- Redwood Children's Services
- Redwood Coast Medical Services
- United Way of the Wine Country



Key Informants

The following is a list of key informants who were interviewed as a part of this community health needs assessment. Key informant interviews were comprised of key leaders from an array of agencies across Mendocino County from not-for-profits, faith based organizations, policy groups, elected officials and their staff, education, and local businesses. These were conducted through email, phone, or in person. When applicable, their comments were also intended to represent the underserved, low income, minority, and chronically ill populations.

Name, Title	Organization
Wayne Allan President	Mendocino Coast District Hospital
Tom Allman Sheriff	Mendocino County Sheriff Department
Carmel Angelo CEO	County of Mendocino, California
Margie Handley President	Howard Foundation
Linnea Hunter CEO	Mendocino Community Health Clinic
Jann Lamprich Executive Director	Howard Foundation
Dr. Jeremy Mann Chief Medical Officer of Ambulatory Services	Adventist Health Northern California Network
Anne Molgaard Executive Director	First 5 Mendocino
Carol Mordhorst Consultant; Former County HHSA Director	
Susanne Norgard Executive Director	Mendocino Community Foundation
Catherine Rada Grant Administrator	Mendocino Community Health Clinic
Freddie Rundlet Executive Director	Consolidated Tribal Health Project, Inc.
James Russ Executive Director	Round Valley Tribal Health
Cass Taaning Grant Writer	County of Mendocino, California Public Health
Dr. Marvin Trotter Chief Medical Officer	Ukiah Valley Medical Center

The Art of Listening and Stories Behind the Statistics

A community health assessment would not be complete without hearing from the population of concern: the local community. As professionals at a health institution, we occupy a unique position that allows for the modeling of health programs, initiatives, and agendas capable of addressing local social determinants of health and other inequalities in our surrounding community.

As such, our approach must place emphasis on the importance of community participation in our efforts. This begins by using one of an often forgotten God-given gift—the ability to listen.

Our strategy must adapt to meet current health needs, while anticipating future needs. To facilitate the change in health status seen in our communities, policies have adapted to include standards such as the following:

1. Incentivizing agencies and practitioners to shift their focus to upstream interventions as part of service delivery
2. Recommending the exploration of the dynamic and potential partnership between health care providers and the communities they serve.

Both strategies emphasize flexibility and exhibit allocative efficiency by remaining responsive to the needs of the community. It is in the context of these two strategies that qualitative research methods were employed to explore health outcomes in our service area, to explore the perceptions of health and relative needs as expressed by the community, and to highlight existing assets and networks in our local community. This also helps us to remember there is a story behind every number and static listed in our assessment. Join us as we explore opportunities for working together as a health system to improve the health in our community.

Overview

Ukiah Valley conducted key informant interviews to engage community leaders in the formation of our priority areas and interventions. The key informants were asked three central questions, with probing and follow-up questions when necessary:

- What is your vision of a healthy community?

- What is your perception of our hospital in general and of specific programs and services?
- What can we do to improve the health and quality of life in the community?

Key informant interviews were comprised of key leaders from an array of agencies across Mendocino County, ranging from not-for-profits, faith-based organizations, policy groups, elected officials and their staff, to educational institutions and local businesses. These were conducted by phone.

What We Did with the Data

Ukiah Valley reviewed all the information given, found common themes and summarized the key points listed in the next section. By identifying common themes, Ukiah Valley can address the needs of the entire community.

Emergent Themes

Community leaders consider Ukiah Valley to be a valuable asset to the Ukiah community. In addition, it was noted that Ukiah Valley has a good outreach program, excellent emergency department, and a high quality of care. Leaders noted that the economic downturn has had a substantial impact on their community. Many families in the community have experienced a shift from middle class to lower class status, causing financial hardships. Leaders would like to see more partnerships among organizations to provide a better spectrum of care for the community's most vulnerable citizens. Finally, community leaders expressed a need for the hospital to increase strategic collaborations with organizations in the community. They expressed a perception that the current climate is grounded in competition; yet they crave collaboration and believe it would strengthen the continuum of care. They would like to see more collaborative efforts at the local level, greater transparency around hospital policies, and better partnerships with federally qualified health centers.

Community Voices

- *"[A healthy community provides] growing opportunities for people of all ages to lead healthy lives and to work, learn, create, contribute, and prosper."*
- *"[In a healthy community] people are safe, drug-free...engage in non-risky behaviors and actions, and have opportunities to maintain and promote health"*

- *“Is social media being used effectively for health promotion? Communication is more than public relations. We should be informing the public on health problems, solutions, and successes”*
- *“[Ukiah Valley should] have a voice in the community conversations.”*

The Voice of Our Community for a Healthy Living Environment

The following section outlines the major themes identified as necessary for a healthy community.

Collaboration and Communication

- Strong partnerships with community organizations, businesses, government, and rural clinics
- Engaged parents
- Partnering for a drug-free and safe community

Strong Economy

- Job opportunities
- Affordable, quality housing
- Prioritize the needs of the working poor

Prevention

- Stronger continuum of care
- Support of aging population
- More mental health care
- More upstream interventions
- Prevention on all levels—from school-based to senior citizens

Health Promotion

- Improved health fairs
- Recognition of mental illness and proper training to respond
- Access for all—to information and services

Built and Physical Environment

- Walkability
- Good air, water, and land

- Access to nutritious foods

The Voice of Our Community for an Unhealthy Living Environment

The following section outlines the major themes identified as contributing to an unhealthy community.

Weak Economy

- Loss of jobs due to downsizing and outsourcing
- Larger “working poor” population
- Shift from middle class to lower class
- Lowered ability to secure safe, quality housing

Drug/Substance Abuse

- High rates of marijuana use
- Large marijuana culture and belief that use is okay
- High rates of methamphetamine use
- Issues with influx of seasonal marijuana workers

Lowered Access to Care

- Lowered access to specialty care
- Lack of appropriate services for mental illness and substance abuse
- Lack of consistent approach to mental health crises
- Limited care for working poor and aging population

Physical Health and Nutrition

- Apathy about health and healthcare (sedentary lifestyle)
- Abundance of fast food restaurants and lack of other options
- High rates of obesity, diabetes, high blood pressure, and depression
- High rates of tobacco use
- High mortality from chronic diseases

The Voice of Our Community on Opportunities for Improvement

Improved Partnerships and Collaboration

Our community understands the need for strong partnerships among all sectors in the community, but lacks a system for collaboration. Our community welcomes the opportunity to network and partner with Howard Memorial Hospital; such opportunities include:

- Creating school-based partnerships for health promotion and to influence nutritional policies
- Creating partnerships with organizations serving aging populations (senior centers)
- Creating a system for collaboration with collaborative reporting, data collection, planning, and implementation
- Alignment of hospital's priorities with the County's to create a stronger safety-net

Improved Communication with the Community

Our community understands the importance of healthy lifestyles, yet lacks the resources to enact such behaviors. Opportunities for education and health promotion include:

- More outreach within the Hispanic community
- Educating providers on how to shift from a medical model to a population health model that utilizes a social-ecological lens
- Better health promotion activities that educate all facets of the community
- Educating the community on how to identify and appropriately respond to mental health crises

Better Utilization of Healthcare Pipelines and Expansion

Our community understands the need for health related professions but may not be aware of the existing educational programs. Opportunities for building awareness and use of pipelines include:

- Better promotion of existing pipeline programs (i.e. Project ACHIEVE, Rural Scholars Program, AmeriCorps)
- Promotion of emergency medical services and nursing careers at junior college level
- Promotion of healthcare careers across the continuum—from elementary to college levels

Next Steps: Creating a Healthier Community In 2014

After reviewing the CHNA we asked the following questions: 1) What are the major challenges our community face? 2) How can we make a difference? 3) What are the high impact interventions? 4) Who are our partners? and, 5) Who needs our help the most?

Using this perspective, the following key priority areas were identified:

- Behavioral Health
- Chronic Disease with emphasis on: *diabetes, heart disease, stroke, and cancer prevention*
- Advanced Aging Care with emphasis on: *accident prevention and orthopedic care*

Behavioral Health

Good mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively, and is able to make a contribution to his or her community. It is estimated that about 17% of U.S adults are considered to be in a state of optimal mental health. Depression is the most common type of mental illness, affecting more than 26% of the U.S. adult population. It has been estimated that by the year 2020, depression will be the second leading cause of disability throughout the world, trailing only ischemic heart disease. In addition, alcohol or substance abuse can greatly decrease mental functioning, increase symptoms of mental illness, and decrease overall quality of life. **Ukiah Valley Medical Center recognizes the importance of whole person care and is striving to improve behavioral health outcomes in our community.**

- Mendocino County had almost twice the rate of substance use during pregnancy than California for tobacco, alcohol, and marijuana. 55.5% of pregnant women in Mendocino County reported use of these substances prior to knowledge of pregnancy compared to 23.7% for California.
- The suicide death rate for Mendocino County (23.7 per 100,000) is significantly worse than the rate for California (9.6 per 100,000) or Healthy People 2020 (4.8 or less per 100,000).

- According to the California Department of Justice, felony and misdemeanor adult (19-69 years old) drug-related arrest rates per 1,000 in Mendocino County continue to be considerably higher than the State rates.

Chronic Disease

Chronic disease management is a broad term that encompasses many different models for improving care for people with chronic diseases. Elements of a structured chronic disease management program may include a treatment plan with regular monitoring, coordination of care between multiple providers and/or settings, medication management, and support for patient self-management. **Ukiah Valley Medical Center is taking an active role in improving the continuum of care for individuals experiencing chronic disease** and is committed to bridging preventive strategies in the clinical setting, as well as, in the community. This strategy will be focused on heart disease, stroke, cancer, and associated co-morbidities (such as obesity); with coordination among services/programs, as necessary.

- According to the County Health Status Profiles 2011, the 3-year average for 2007-2009 age adjusted death rate for Coronary Heart Disease in Mendocino County per 100,000 population was 139.4 compared to 128.0 statewide.
- Mendocino County's rates are considerably higher than the State for Breast Cancer and slightly higher for Lung Cancer. Rates for Mendocino and State Colorectal Cancer are similar.

Advanced Aging Care

The way we define healthy living, wellness, and aging has become increasingly significant over the past decade as the growth of the aging population has continued to outpace that of any other demographic group. Today, as the U.S. healthcare system prepares to implement sweeping changes brought about by legislative action, the focus on disease prevention and chronic care management has taken center-stage, and the aging population is a key player. Aging, however, does not commence at a specific point; it is instead a continuum running across the breadth of the lifespan, and both an individual and communal process. **Ukiah Valley Medical Center is dedicated to preserving and increasing quality of life among our aging community.**

- According to the California Department of Finance, the older adult population, 60 and older increased by slightly over 30% in Mendocino County between 2000 and 2010 whereas the adult population, 30-59 decreased by 7% in the same time period.
- In 2012, 26.20% (more than 1 in 4) of the total population was 60+ where 38.50% (slightly less than 2 in 5) was between 30 and 59 in Mendocino County.

- In 2011, 78% of all non-fatal hospitalizations for unintentional falls occurred among persons aged 60 years and older in Mendocino County.
- In 2011, 32% of all non-fatal emergency room visits for unintentional falls occurred among persons aged 60 years and older in Mendocino County.

References

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Appendix A: Community Health Data, Mendocino County

Source: www.healthymendocino.org

Health


Access to Health Services

[Adults with Health Insurance](#) MAP Comparison: CA Counties 

[Adults with Private Health Insurance](#) MAP Comparison: CA Counties 

Cancer

[Age-Adjusted Death Rate due to Lung Cancer](#) MAP Comparison: CA Counties 

[Breast Cancer Incidence Rate](#) MAP Comparison: U.S. Counties 

[Cervical Cancer Incidence Rate](#) MAP Comparison: U.S. Counties 

[Colon Cancer Screening](#) MAP Comparison: CA Counties 

[Colorectal Cancer Incidence Rate](#) MAP Comparison: U.S. Counties 

[Lung and Bronchus Cancer Incidence Rate](#) MAP Comparison: U.S. Counties 

[Mammogram History](#) MAP Comparison: CA Counties 

[Oral Cavity and Pharynx Cancer Incidence Rate](#) MAP Comparison: U.S. Counties 

[Pap Test History](#) MAP Comparison: CA Counties 

[Prostate Cancer Incidence Rate](#) MAP Comparison: U.S. Counties 

Diabetes

[Adults with Diabetes](#) MAP Comparison: CA Counties 

Disabilities

[Adults with Disability](#)

Comparison: CA State Value



[Disabled Persons with Health Insurance](#) M.A.P.

Comparison: CA Counties



Exercise, Nutrition, & Weight

[5th Grade Students who are at a Healthy Weight or Underweight](#) M.A.P.

Comparison: CA Counties



[7th Grade Students who are Physically Fit](#) M.A.P.

Comparison: CA Counties



[9th Grade Students who are at a Healthy Weight or Underweight](#) M.A.P.

Comparison: CA Counties



[Adult Fast Food Consumption](#) M.A.P.

Comparison: CA Counties



[Adults Engaging in Regular Physical Activity](#) M.A.P.

Comparison: CA Counties



[Adults who are Obese](#) M.A.P.

Comparison: CA Counties



[Adults who are Overweight or Obese](#) M.A.P.

Comparison: CA Counties



[Child Fruit and Vegetable Consumption](#) M.A.P.

Comparison: CA Counties



Family Planning

[Teen Birth Rate](#) M.A.P.

Comparison: CA Counties



Heart Disease & Stroke

[Age-Adjusted Death Rate due to Cerebrovascular Disease \(Stroke\)](#) M.A.P.

Comparison: CA Counties



[Age-Adjusted Death Rate due to Coronary Heart Disease](#) M.A.P.

Comparison: CA Counties



[High Blood Pressure Prevalence](#) M.A.P.

Comparison: CA Counties



Immunizations & Infectious Diseases

Chlamydia Incidence Rate M.A.P.	Comparison: CA Counties	
Gonorrhea Incidence Rate M.A.P.	Comparison: CA Counties	
HIV Prevalence Rate	Comparison: CA State Value	
Kindergartners with Required Immunizations M.A.P.	Comparison: CA Counties	
Syphilis Incidence Rate M.A.P.	Comparison: CA Counties	

Maternal, Fetal & Infant Health

Babies with Low Birth Weight M.A.P.	Comparison: CA Counties	
Infant Mortality Rate M.A.P.	Comparison: CA Counties	
Mothers who Received Early Prenatal Care M.A.P.	Comparison: CA Counties	
Preterm Births M.A.P.	Comparison: CA Counties	

Mental Health & Mental Disorders

Adults Needing and Receiving Behavioral Health Care Services M.A.P.	Comparison: CA Counties	
Adults with Likely Psychological Distress M.A.P.	Comparison: CA Counties	
Age-Adjusted Death Rate due to Suicide M.A.P.	Comparison: CA Counties	

Oral Health

Dentist Rate M.A.P.	Comparison: U.S. Counties	
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Prevention & Safety

[Age-Adjusted Death Rate due to Unintentional Injuries](#) MAP

Comparison: CA Counties



Respiratory Diseases

[Adults with Asthma](#) MAP

Comparison: CA Counties



Substance Abuse

[Adults who Binge Drink](#) MAP

Comparison: CA Counties



[Adults who Smoke](#) MAP

Comparison: CA Counties



[Teens who Smoke](#)

Comparison: CA State Value



[Teens who Use Alcohol](#)

Comparison: CA State Value



[Teens who Use Marijuana](#)

Comparison: CA State Value



[Teens who Use Methamphetamines](#)

Comparison: CA State Value



Wellness & Lifestyle

[Self-Reported General Health Assessment: Good or Better](#) MAP

Comparison: CA Counties



Economy

Employment

[Unemployed Workers in Civilian Labor Force](#) NEW MAP

Comparison: U.S. Counties



Government Assistance Programs

[Households with Cash Public Assistance Income](#) MAP

Comparison: U.S. Counties



Homeownership

[Homeownership](#) MAP

Comparison: U.S. Counties



Housing Affordability & Supply

[Renters Spending 30% or More of Household Income on Rent](#) MAP

Comparison: U.S. Counties



Income

[Median Household Income](#) MAP

Comparison: U.S. Counties



[Per Capita Income](#) MAP

Comparison: U.S. Counties



Poverty

[Children Living Below Poverty Level](#) MAP

Comparison: U.S. Counties



[Families Living Below Poverty Level](#) MAP

Comparison: U.S. Counties



[Low-Income Persons who are SNAP Participants](#) MAP

Comparison: U.S. Counties



[People 65+ Living Below Poverty Level](#) MAP

Comparison: U.S. Counties



[People Living 200% Above Poverty Level](#) MAP

Comparison: U.S. Counties



[People Living Below Poverty Level](#) MAP

Comparison: U.S. Counties



[Students Eligible for the Free Lunch Program](#) MAP

Comparison: U.S. Counties



Education

Educational Attainment in Adult Population

[High School Graduation](#) MAP

Comparison: CA Counties



Higher Education

[People 25+ with a Bachelor's Degree or Higher](#)

MAP

Comparison: U.S. Counties



School Environment

[Student-to-Teacher Ratio](#)

MAP

Comparison: U.S. Counties



Student Performance K-12

[10th Grade Students Passing the California High School Exit Exam: English](#)

MAP

Comparison: CA Counties



[10th Grade Students Passing the California High School Exit Exam: Math](#)

MAP

Comparison: CA Counties



[2nd Grade Students Proficient in English/Language Arts](#)

MAP

Comparison: CA Counties



[2nd Grade Students Proficient in Math](#)

MAP

Comparison: CA Counties



[4th Grade Students Proficient in English/Language Arts](#)

MAP

Comparison: CA Counties



[4th Grade Students Proficient in Math](#)

MAP

Comparison: CA Counties



Environment

Air

[Annual Ozone Air Quality](#)

MAP

Comparison: Air Quality Index



[Annual Particle Pollution](#)

MAP

Comparison: Air Quality Index



[Daily Particle Pollution](#)

Comparison: Air Quality Index



[Recognized Carcinogens Released into Air](#)

NEW

Comparison: Prior Value



Built Environment

[Farmers Market Density](#)

Comparison: U.S. Value



[Fast Food Restaurant Density](#) MAP

Comparison: U.S. Counties



[Grocery Store Density](#) MAP

Comparison: U.S. Counties



[Households with No Car and Low Access to a Grocery Store](#) MAP

Comparison: U.S. Counties



[Low-Income and Low Access to a Grocery Store](#) MAP

Comparison: U.S. Counties



[Recreation and Fitness Facilities](#)

Comparison: U.S. Value



Toxic Chemicals

[PBT Released](#) NEW

Comparison: Prior Value



Water

[Drinking Water Safety](#) MAP

Comparison: U.S. Counties



Government & Politics

Elections & Voting

[Voter Turnout](#) MAP

Comparison: CA Counties



Public Safety

Crime & Crime Prevention

[Adult Arrest Rate](#)

Comparison: CA State Value



Transportation Safety

[Bicycle-Involved Collision Rate](#) MAP

Comparison: CA Counties



[Pedestrian Death Rate](#) MAP

Comparison: CA Counties



[Social Environment](#)

Children's Social Environment

[Child Abuse Rate](#) MAP

Comparison: CA Counties



[Children and Adolescents who Watch 3+ Hours of Television](#) MAP

Comparison: CA Counties



Family Structure

[Single-Parent Households](#) MAP

Comparison: U.S. Counties



[Transportation](#)

Commute To Work

[Mean Travel Time to Work](#) MAP

Comparison: U.S. Counties



[Workers who Drive Alone to Work](#) MAP

Comparison: U.S. Counties



Public Transportation

[Workers Commuting by Public Transportation](#) MAP

Comparison: U.S. Counties



