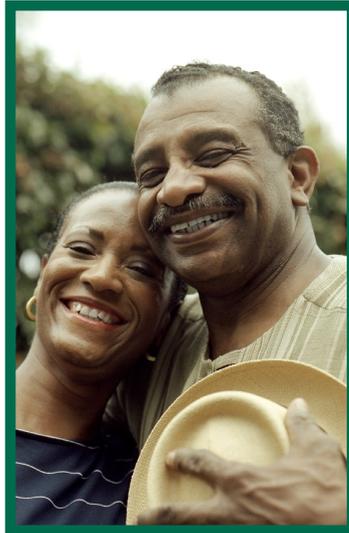


SAN DIEGO COUNTY SENIOR HEALTH REPORT Update and Leading Indicators

HEALTH AND HUMAN
SERVICES AGENCY



COUNTY OF SAN DIEGO
 **HHSA**
HEALTH AND HUMAN SERVICES AGENCY

June 2013

 **LIVE WELL**
SAN DIEGO

SAN DIEGO COUNTY
SENIOR HEALTH REPORT
UPDATE AND LEADING INDICATORS

County of San Diego
Health and Human Services Agency

Public Health Services
Aging & Independence Services

June 2013

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SAN DIEGO COUNTY SENIOR HEALTH REPORT UPDATE AND LEADING INDICATORS

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SAN DIEGO COUNTY SENIOR HEALTH REPORT UPDATE



Healthy, Safe, and Thriving Communities

LIVE WELL SAN DIEGO is an initiative that embodies a countywide effort to achieve the County vision for healthy, safe and thriving communities. This is a 10-year plan to advance the health and overall well-being of the entire region. LIVE WELL SAN DIEGO is being built with community involvement in a phased approach. The first phase – Building Better Health – was adopted by the Board of Supervisors on July 13, 2010, and implementation is ongoing and continuous. The second phase is in the design stages, and the third phase will be initiated following its adoption.

The three phases that encompass the pillars of LIVE WELL SAN DIEGO are:

- **Building Better Health** – focuses on improving the health of residents and supporting healthy choices.
- **Living Safely** – focuses on the Agency's role in ensuring families are connected to services and vulnerable residents are protected from further harm.
- **Promoting Thriving Families** – focuses on the Agency's role in helping families become stable and independent.

Key Strategies for LIVE WELL SAN DIEGO

Each pillar has four strategies upon which our goals and objectives are built. These strategies are:

- **Building a Better Service Delivery System** – maximizing quality and eliminating waste in our services.
- **Supporting Positive Choices** – providing information and tools so that residents can take charge of their well-being.
- **Pursuing Policy and Environmental Changes** – making it easier for people to engage in and adopt positive behaviors.
- **Improving the Culture from Within** – recognizing the importance of the workforce in making and promoting positive choices.

The entire initiative is built on a foundation of operational excellence. The County of San Diego serves the entire San Diego population, with a focus on at-risk and high-need populations. These are defined as:

General Population: The 3.1 million San Diego County residents who may benefit from a more coordinated and comprehensive prevention approach.

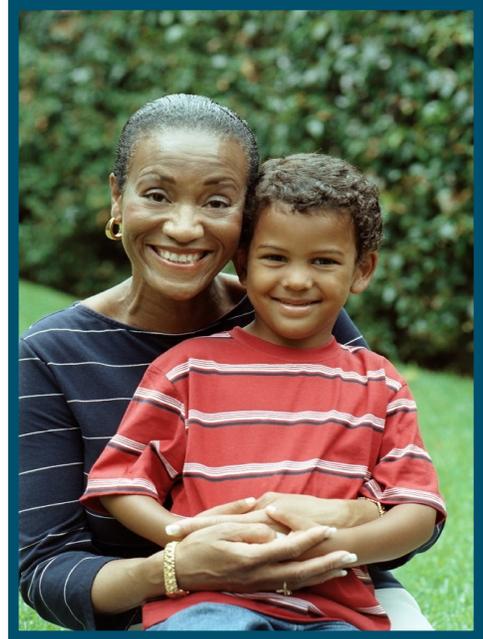
At-Risk Population: Those we will engage with early, proven interventions to stop problems from developing or escalating.

High-Need Population: Those already in the County system who will benefit from assistance to stabilize and achieve self-reliance.



INTRODUCTION

The San Diego County Senior Health Report brings together health indicators for seniors in San Diego County in one place. The purpose for this compilation is to better understand the current health of seniors, opportunities for enhancements to existing programs, and areas needed for intervention. Highlights of the data are presented below. To review all of the data and sources please see the comprehensive San Diego County Senior Health Report document.



DEMOGRAPHY

In 2011, 361,908 seniors aged 65 years or older lived in San Diego County, representing 11.6% of the total population of 3.1 million. This number is expected to double by the year 2030 to 723,572. Importantly, the number of persons 85 years and older in San Diego County is projected to increase from 57,917 in 2011 to 84,048 in 2030. Many of these residents 65 years or older live in communities in the North Regions of the county as well as communities in the East Region. The senior population percentage in San Diego County is lower than that of the United States as a whole – 11.6% versus 12.9%.

For every age group of adults 55 years and older, females outnumber males, with the proportion of females increasing with each older age group. In 2011, 69.3% of all San Diego County seniors were white. This percentage is expected to decrease between now and 2030, primarily because of an increase in the



number of Hispanic seniors (from 15.8% in 2011 to an expected 22.9% in 2030). More than half of all seniors in San Diego County have completed at least some college education with only 20.1% having less than a high school education. Most seniors only speak English (69.5%) and 19.7% of seniors are unable to speak English very well.

Sources:

1. American Community Survey, U.S. Census Bureau, One-Year Estimates, 2011.
2. Current Population Estimates, San Diego Association of Governments (SANDAG), 2012.

In San Diego County, 15.5% of seniors ages 65 and older remain in the labor force. Just under 9% of seniors in San Diego County live with grandchildren under the age of 18 years. Of those living with grandchildren, 1 out of 6 are responsible for their grandchildren. Overall, 41.7% of seniors live alone, the vast majority female (65.1%). The median income in senior households is \$44,453, with seniors living alone having significantly lower median incomes than those who live with others. Nearly all seniors have Social Security income, more than half have income from retirement plans or savings, and approximately one third have earnings.

**4 out of every 5
San Diego
seniors reported
being in good to
excellent health.**

**1 out of every 25
San Diego
seniors reported
ever seriously
thinking about
committing
suicide.**

HEALTH STATUS

San Diego seniors reported good to excellent health, better than California seniors overall (81.0% versus 72.4%) in 2009. Nearly all seniors reported a usual place to go when sick or needing health advice. In San Diego County, 6.9% of seniors reported needing help for an emotional/mental health or alcohol/drug problem, higher than the 6.0% in California.

HEALTH BEHAVIORS

Being overweight or obese can contribute to or worsen many other health conditions. The percentage of San Diego seniors who were overweight or obese is similar to that of California seniors. In 2009, 36.5% of seniors were overweight and 21.7% were obese. Seven out of ten seniors reported walking for transportation, fun, or exercise in the past week.

Source: California Health Interview Survey, UCLA Center for Health Policy and Research, 2009.
*2011 data not yet available; anticipated release date September 2013.

**7 out of every 10
San Diego
seniors reported
walking for fun,
transportation,
or exercise in
the past week.**

SAN DIEGO COUNTY SENIOR HEALTH REPORT UPDATE

In 2009, 8.8% of San Diego County seniors ate fast food three or more times in the past week. Eleven percent of San Diego County seniors reported binge drinking in the past year, higher than the 9.3% in California. In 2009, 7.0% of San Diego County seniors were current smokers and nearly half of San Diego seniors were former smokers.

**1 out of every 9
San Diego seniors
engaged in binge
drinking in the past
year.**

**1 out of every 11
San Diego seniors eat
fast food three or
more times per week.**



PREVENTION

In 2009, 69.4% of seniors in San Diego County received a flu shot. Nearly 60% of seniors in the county had ever been told that they have high blood pressure, with 89.3% of those taking medication to control it.

**1 out of every 14
San Diego
seniors currently
smoke.**

**Nearly 7 out of 10 San Diego seniors have had
a flu shot in the past 12 months.**

Source: California Health Interview Survey, UCLA Center for Health Policy and Research, 2009.
*2011 data not yet available; anticipated release date September 2013.

There are several cancer screenings that are recommended for seniors. At the time of recommendation by their doctor, 79.2% of seniors in San Diego County complied with colorectal cancer screening in 2009. In San Diego County, 76.9% of senior men have ever had a Prostate-Specific Antigen (PSA) test to screen for prostate cancer. The percent of females aged 65 and older in San Diego County, who had a mammogram in the past two years, was 81.9%.

4 out of every 5 San Diego senior women had a mammogram in the past 2 years.

UTILIZATION OF MEDICAL SERVICES

Seniors in San Diego County use the 9-1-1 system at higher rates than any other age group. In 2011, 68,817 calls were made to 9-1-1 for seniors in need of prehospital care in San Diego County. This represents a call for one out of every five seniors. That same year there were 108,853 seniors treated and discharged from San Diego County emergency departments, representing nearly one out of every three senior residents. In 2011, 97,647 seniors aged 65 and over were hospitalized in San Diego County. Also in 2010, 14,526 seniors died of all causes. The leading cause of death for seniors aged 65-74 and 75-84 years was cancer, followed by heart disease. These two causes were reversed for seniors aged 85 years and older.

CHRONIC DISEASE INDICATORS

In 2009, 19.8% of San Diego County seniors had been told by a doctor that they have any kind of heart disease, about the same as California seniors. In 2011, the rate of coronary heart disease hospitalization for San Diego County seniors was 1,423.8 per 100,000. The rate was highest for those aged 85 years and older. The death rate for coronary heart disease was 738.6 per 100,000 in 2010. This rate was highest in those aged 85 years and older.

In 2011, there were 4,777 hospitalizations due to cancer among San Diego seniors (1,319.9 per 100,000). In 2010, the death rate from cancer among seniors in San Diego County was 952.2 per 100,000. The death rate was highest among those aged 85 years and older.

Sources:

1. California Health Interview Survey, UCLA Center for Health Policy and Research, 2009.
*2011 data not yet available; anticipated release date September 2013.
2. Prehospital MICN Database, County of San Diego, HHS, Emergency Medical Services Branch, 2011.
3. Emergency Discharge Database (CA OSHPD), County of San Diego, HHS, Emergency Medical Services Branch, 2011.
4. Patient Discharge Database (CA OSHPD), County of San Diego, HHS, Epidemiology & Immunization Services Branch, 2011.
5. Death Statistical Master Files (CDPH), County of San Diego, HHS, Epidemiology & Immunization Services Branch, 2010.

SAN DIEGO COUNTY SENIOR HEALTH REPORT UPDATE

In San Diego County, 15.1% of seniors reported ever being told by a doctor that they had diabetes, lower than the 19.6% of seniors in California. The rate of emergency department discharge for patients with a principal diagnosis of diabetes was 352.0 per 100,000 in 2011 while the rate of hospitalization was 323.8 per 100,000. Hospitalizations were higher for those aged 75-84 years old and males. The death rate from diabetes for San Diego County seniors was 118.0 per 100,000 in 2010. The death rate increased with age.



882 San Diego seniors died due to stroke in 2010.

In 2011, 238.7 per 100,000, county seniors were treated and discharged from the emergency department due to stroke. The hospitalization rate for stroke among San Diego County seniors was 1,306.4 per 100,000. The hospitalization rate was highest for seniors aged 85 years and older. In 2010, the death rate for San Diego County seniors due to stroke was 243.7 per 100,000 and increased with age.

Sources:

1. California Health Interview Survey, UCLA Center for Health Policy and Research, 2009.

*2011 data not yet available; anticipated release date September 2013.

2. Emergency Discharge Database (CA OSHPD), County of San Diego, HHS, Emergency Medical Services Branch, 2011.

3. Patient Discharge Database (CA OSHPD), County of San Diego, HHS, Epidemiology & Immunization Services Branch, 2011.

4. Death Statistical Master Files (CDPH), County of San Diego, HHS, Epidemiology & Immunization Services Branch, 2010.

In 2011, the emergency department discharge rate for San Diego County seniors with a principal diagnosis of chronic obstructive pulmonary diseases (COPD) was 606.8 per 100,000. In the same year, the hospitalization rate for COPD was 609.0 per 100,000. In 2010, the death rate for San Diego County seniors was 256.4 per 100,000 and increased with age.

More than 5,100 San Diego seniors were hospitalized due to COPD.

Over 3,000 San Diego seniors were discharged from an emergency department due to arthritis.

The rate of emergency department discharge due to arthritis for seniors in San Diego County was 850.5 per 100,000 and the hospitalization rate was 1,400.9 per 100,000 in 2011.

MENTAL HEALTH INDICATORS

The emergency department discharge rate for San Diego County seniors with a mental illness or depression diagnosis was 442.4 per 100,000 in 2011. In the same year, the hospitalization rate for seniors in San Diego County with a principal diagnosis of mental illness or depression was 625.3 per 100,000. In 2010, the rate of suicide among San Diego County seniors was 18.0 per 100,000.

Sources:

1. Emergency Discharge Database (CA OSHPD), County of San Diego, HHSA, Emergency Medical Services Branch, 2011.
2. Patient Discharge Database (CA OSHPD), County of San Diego, HHSA, Epidemiology & Immunization Services Branch, 2011.
3. Death Statistical Master Files (CDPH), County of San Diego, HHSA, Epidemiology & Immunization Services Branch, 2010.

Over 400 San Diego seniors were discharged from an emergency department with a principal diagnosis of substance use or abuse.

INJURY INDICATORS

Unintentional injuries are among the leading causes of death for seniors in San Diego County. The rate of emergency department discharge for unintentional injuries was 6,501.9 per 100,000 while the hospitalization rate was 2707.3 per 100,000 in 2011. In 2010, the rate of death due to unintentional injuries among seniors was 90.6 per 100,000.

328 San Diego seniors died because of an unintentional injury in 2010.

More than 15,400 San Diego seniors were discharged from an emergency department due to a fall in 2011.

The most frequent unintentional injuries among seniors are falls. The San Diego County emergency department discharge rate for seniors was 4,277.6 per 100,000, while the hospitalization rate was 1,995.0 per 100,000 in 2011. Emergency department discharge and hospitalization rates both increased with age. The hospitalization rate due to hip fracture for San Diego County seniors was 595.7 per 100,000 and also increased with age.

Treatment for assault injuries for seniors in San Diego County was low with an emergency department discharge rate of 33.2 per 100,000 and a lower hospitalization rate (13.0 per 100,000) in 2011. In fiscal year, 2010/2011, there were 7,069 reports of abuse of seniors and dependent adults to Adult Protective Services.

Over 2,100 San Diego seniors were hospitalized due to hip fracture in 2011.

Sources:

1. Emergency Discharge Database (CA OSHPD), County of San Diego, HHSA, Emergency Medical Services Branch, 2011.
2. Patient Discharge Database (CA OSHPD), County of San Diego, HHSA, Epidemiology & Immunization Services Branch, 2011.
3. Death Statistical Master Files (CDPH), County of San Diego, HHSA, Epidemiology & Immunization Services Branch, 2010.

INFECTIOUS DISEASES

In 2011, there were 1,318 residents over 50 years old in San Diego County known to be living with HIV. There were only small numbers of chlamydia, gonorrhea, and syphilis reported in San Diego County among seniors. In 2011, there were 70 (19.3 per 100,000) new active cases of tuberculosis reported in San Diego County among seniors aged 65 years and older. In the same year, there were a total of 1,096 (302.8 per 100,000) cases of flu and pneumonia discharged from local emergency departments among county seniors aged 65 years and over.

AGING & INDEPENDENCE SERVICES

Aging and Independence Services (AIS) offers more than 30 programs for seniors and disabled adults. These programs are in the following areas: protection and advocacy, health independence, home-based services, enrichment and involvement, and caregiver services. AIS offers a single phone number, (800) 510-2020, as the gateway for services and elder abuse reporting. In fiscal year 2010/2011, there were 49,068 calls made to the AIS Call Center.

There were 7,069 cases of elder abuse reported in San Diego County.

SELECTED SENIOR HEALTH INDICATORS

The following table shows some of the leading health indicators discussed in this report. These indicators were selected because they represent Health and Human Services Agency programs could have measurable impacts on the health of seniors. These indicators cut across different areas and are compiled for quick reference. These selected indicators will be tracked over time.

Sources:

1. HIV/AIDS Epidemiology Report, County of San Diego, HHS, HIV/AIDS Epidemiology Unit, 2012.
2. San Diego County Community Profiles, County of San Diego, HHS, Community Health Statistics Unit, 2012.
3. Emergency Discharge Database (CA OSHPD), County of San Diego, HHS, Emergency Medical Services Branch, 2011.

SAN DIEGO COUNTY SENIOR HEALTH REPORT UPDATE

LEADING INDICATORS

INDICATOR		MEASURE	SD			CA		
<i>General Health¹</i>			2007	2009	2011	2007	2009	2011
1	Health Status	Percent of population reporting excellent, very good, or good health	76.2%	81.0%	NYA	69.4%	72.4%	NYA
2	Needed Help for Mental Health/ Substance Abuse	Percent of the population that needed help for emotional/mental health problems or use of alcohol/drugs in past year	5.1%	6.9%	NYA	6.0%	6.0%	NYA
<i>Health Behaviors¹</i>								
3	Overweight and Obese	Percent of population that is overweight and/or obese	56.0%	58.2%	NYA	55.7%	58.6%	NYA
4	Physical Activity	Percent of population that walks for transportation, fun, or exercise in past week	N/A	68.9%	NYA	N/A	68.3%	NYA
5	Diet	Percent of population that ate fast food 3 or more times in the past week	7.9%	8.8%	NYA	6.6%	7.7%	NYA
6	Smoking	Percent of population that currently smokes	6.4%	7.0%	NYA	6.4%	7.5%	NYA
<i>Prevention Activities¹</i>								
7	Flu Vaccination	Percent of population that reported they had a flu vaccine in past 12 months	71.2%	69.4%	NYA	68.9%	65.9%	NYA
8	Mammogram Screening	Percent of female population who had a mammogram in past 2 years	75.6%	81.9%	NYA	77.4%	80.1%	NYA

*NYA = Not yet available; anticipated September 2013.

¹Source: California Health Interview Survey (CHIS), UCLA Center for Health Policy and Research, 2007-2009.

SAN DIEGO COUNTY SENIOR HEALTH REPORT UPDATE

LEADING INDICATORS

INDICATOR		MEASURE	SD			CA		
<i>Chronic Disease Indicators</i> ^{2,3}			2007	2009	2011	2007	2009	2011
9	Diabetes	Rate of death due to diabetes	110.7 per 100,000	111.1 per 100,000	118.0 per 100,000 (Year 2010)	135.9 per 100,000	119.1 per 100,000	122.2 per 100,000 (Year 2010)
10	Heart Disease and Stroke	Rate of death due to CHD	829.2 per 100,000	773.7 per 100,000	738.6 per 100,000 (Year 2010)	978.0 per 100,000	869.3 per 100,000	836.7 per 100,000 (Year 2010)
11		Rate of death due to stroke	277.3 per 100,000	249.6 per 100,000	243.7 per 100,000 (Year 2010)	311.4 per 100,000	272.4 per 100,000	271.6 per 100,000 (Year 2010)
12	Respiratory Diseases	Rate of death due to asthma	3.2 per 100,000	3.0 per 100,000	3.0 per 100,000 (Year 2010)	5.4 per 100,000	5.1 per 100,000	4.9 per 100,000 (Year 2010)
13		Rate of death due to COPD	252.8 per 100,000	220.3 per 100,000	256.4 per 100,000 (Year 2010)	268.1 per 100,000	262.0 per 100,000	261.3 per 100,000 (Year 2010)
14	All Cancer	Rate of death due to all cancer	992.9 per 100,000	904.1 per 100,000	952.2 per 100,000 (Year 2010)	961.3 per 100,000	929.1 per 100,000	918.3 per 100,000 (Year 2010)
<i>Mental Health Indicators</i> ^{4,5}								
15	Mental Illness	Rate of ED discharges with mental illness as a principal diagnosis	461.7 per 100,000	506.1 per 100,000	442.4 per 100,000	N/A	N/A	N/A
16	Alzheimer's Disease	Rate of ED discharge with Alzheimer's as any diagnosis	547.1 per 100,000	494.1 per 100,000	703.5 per 100,000	N/A	N/A	N/A
17	Substance Use/Abuse	Rate of ED discharge with SUA as a principal diagnosis	96.8 per 100,000	141.0 per 100,000	131.0 per 100,000	N/A	N/A	N/A

*Death data for 2011 is not yet available; anticipated September 2013.

**N/A = Not available for California.

²Source: Death Statistical Master Files (CDPH), County of San Diego, HHS, Epidemiology & Immunization Services Branch, 2010.

³Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Compressed Mortality File 1999-2010 on CDC WONDER Online Database, 2010.

⁴Source: Emergency Discharge Database (CA OSHPD), County of San Diego, HHS, Emergency Medical Services Branch, 2011.

⁵Source: Patient Discharge Database (CA OSHPD), County of San Diego, HHS, Epidemiology & Immunization Services Branch, 2011.

SAN DIEGO COUNTY SENIOR HEALTH REPORT UPDATE

LEADING INDICATORS

INDICATOR		MEASURE	SD			CA		
Injury Indicators			2007	2009	2011	2007	2009	2011
18	Unintentional Injury ^{2,3}	Rate of death due to unintentional injury	82.5 per 100,000	79.0 per 100,000	90.6 per 100,000 (Year 2010)	70.5 per 100,000	68.2 per 100,000	68.0 per 100,000 (Year 2010)
19	Unintentional Fall Injury ^{3,4}	Rate of ED discharge due to fall injury	3,267.0 per 100,000	3,595.8 per 100,000	4,277.6 per 100,000	3,309.9 per 100,000	3,619.7 per 100,000	4,018.8 per 100,000
20	Hip Fracture ⁵	Rate of hospitalization due to hip fracture	595.5 per 100,000	591.5 per 100,000	595.7 per 100,000	N/A	N/A	N/A
21	Suicide ^{2,3}	Rate of death due to suicide	19.0 per 100,000	17.1 per 100,000	18.0 per 100,000 (Year 2010)	14.8 per 100,000	15.9 per 100,000	16.8 per 100,000 (Year 2010)
Service Indicators ⁶								
22	Elder Abuse	Number of reports of elder adult abuse	6,902	6,423	7,069	N/A	N/A	N/A
	Elder Abuse	Percent of confirmed elder adult abuse reports	19.7%	22.4%	25.2%	N/A	N/A	N/A

*Death data for 2011 is not yet available; anticipated September 2013.

**N/A = Not available for California.

²Source: Death Statistical Master Files (CDPH), County of San Diego, HHSA, Epidemiology & Immunization Services Branch, 2010.

³Source: EPICenter California Injury Data Online, California Department of Public Health, Safe and Active Communities Branch Report, 2010.

⁴Source: Emergency Discharge Database (CA OSHPD), County of San Diego, HHSA, Emergency Medical Services Branch, 2011.

⁵Source: Patient Discharge Database (CA OSHPD), County of San Diego, HHSA, Epidemiology & Immunization Services Branch, 2011.

⁶Source: County of San Diego, HHSA, Aging & Independence Services, APS Reports, FY 2007-2011.

AGING & INDEPENDENCE SERVICES HEALTH SUPPORT PROGRAMS

Aging & Independence Services (AIS), a federally designated Area Agency on Aging, provides a variety of services to older adults and persons with disabilities. Below is a snapshot of AIS programs that support health self-management, care coordination and improved health outcomes.

CARE TRANSITIONS INTERVENTIONS (CTI)

The human and financial cost of unnecessary hospital readmissions is astonishing. Addressing the issue of avoidable readmissions requires a community approach in which health care and community-based social service professionals partner to achieve better health outcomes. The Care Transitions Intervention (CTI), a four week evidence based program developed by Dr. Eric Coleman, supports patients with complex needs who are at high risk for readmissions to transition from hospital to home. Through one hospital and one home visit and a series of follow-up phone calls by a trained Transitions Coach whose primary role is “to coach, not do”; patients with chronic health conditions develop improved capacity in the areas of medication management, personal health record keeping, knowledge of “Red Flags,” and follow-up care with primary care providers and specialists.

Contact: Brenda Schmitthener (858)495-5853 or Brenda.Schmitthener@sdcounty.ca.gov

TEAM SAN DIEGO (TSD)

Improving health outcomes and reducing health care costs for adults with complex needs requires interdisciplinary consultation and care coordination across the healthcare and social service delivery systems. TEAM SAN DIEGO, an innovative community initiative, engages health care and social service professionals in creating virtual care teams. By coordinating communication, patient education and record-keeping methods, health care and community-based social service providers act as a multidisciplinary team without having to be co-located. The team approach allows health care and social service professionals to more easily manage large caseloads, produce better outcomes and exercise more effective cost control.

Contact: Brenda Schmitthener (858)495-5853 or Brenda.Schmitthener@sdcounty.ca.gov

CHRONIC DISEASE SELF-MANAGEMENT (AKA, “HEALTHIER LIVING”)

Designed at Stanford University and for people with conditions such as arthritis, depression, heart disease, diabetes, COPD, or any chronic illness, this program has been proven to achieve positive health outcomes and reduced health care expenditures. The program consists of a workshop that meets 2 ½ hours per week for six weeks, led by two trained peer educators, who also have a chronic condition. It promotes patient activation by teaching behavior management and personal goal setting. Topics include diet, exercise, medication management, cognitive symptom management, problem solving, relaxation, communication with healthcare providers, and dealing with difficult emotions. These “Healthier Living” workshops are available at sites throughout the county.

Contact: Charlotte Tenney, (858)495-5230 or Charlotte.Tenney@sdcounty.ca.gov

DIABETES SELF-MANAGEMENT (AKA, “HEALTHIER LIVING WITH DIABETES”)

Designed for people with type 2 diabetes, this program has been proven to achieve positive health outcomes (including reduced HbA1c levels) and reduced health care expenditures. The program consists of two individual consultations with a Registered Dietician and a group workshop designed at Stanford University. The workshop meets 2 ½ hours per week for six weeks and is led by two trained peer educators who also have diabetes. It promotes patient activation by teaching behavior management and personal goal setting. Topics include diet, exercise, medication management, blood glucose monitoring and management, foot care, complications of diabetes, problem solving, stress reduction, and communication with healthcare providers. The Healthier Living with Diabetes programs are available at sites throughout the county.

Contact: Kristen Smith (858)495-5061 or Kristen.Smith@sdcounty.ca.gov

FALL PREVENTION

Scientific evidence indicates that comprehensive fall prevention for older adults include management of medical risk factors, environmental safety, safe behaviors, and exercise that focuses on strength, flexibility and balance. Our website, www.SanDiegoFallPrevention.org offers a Toolkit and Resource Guide for service providers, including contact information for local organizations that address different facets of fall prevention. In addition, AIS offers three nationally recognized and standardized evidence-based fall prevention programs:

- ◆ **Matter Of Balance** - This program is designed to reduce the fear of falling, improve confidence, and increase the activity levels of older adults who have concerns about falls. Outcomes include participant improvement in viewing falls as manageable and exercise level.
- ◆ **Stepping On** - This program is designed to reduce the risk of falling for people at moderate risk of falls. Throughout this program participants learn balance and strength exercises, vision's role in balance, how medication can contribute to falls, staying safe when out in the community, how to identify safe footwear, and how to check the home for safety.
- ◆ **Tai Chi Moving for Better Balance**- This program is designed to reduce the risk of falling for people at moderate risk of falls. Program goals include improvement in: mental wellbeing, balance , physical functioning, and self-confidence in performing daily activities as well as an increase in social participation, enhanced life independence and overall health.
Contact: Kristen Smith (858)495-5061 or Kristen.Smith@sdcounty.ca.gov

FEELING FIT CLUB

The Feeling Fit Club is a functional fitness exercise program offered via three different delivery methods throughout San Diego County: 1) on-site classes with trained instructors at various community sites, 2) a television program that is shown twice daily on three stations, and 3) a video/DVD program for home use. All moves and exercises are designed to be adapted to various physical abilities and can be performed from a seated or standing position. Program evaluation has shown improvement in participants' strength, flexibility, balance, and ability to perform activities of daily living. The exercises in the home based program are focused on more frail seniors who are home-bound. The television programs are shown twice per day, Monday through Friday at 8:00 a.m. and 1:00 p.m.

Contact: Kari Wasilenko (858)495-5998 or Kari.Wasilenko@sdcounty.ca.gov

DATA SOURCES

1. Adult Protective Services Abuse Reports, County of San Diego, HHSA, Aging & Independence Services, FY 2007-2011.
2. American Community Survey, U.S. Census Bureau, One-Year Estimates, 2011.
3. California Health Interview Survey, UCLA Center for Health Policy and Research, 2009. Accessed online at www.chis.ucla.edu, 04/28/2013.
4. Compressed Mortality File 1999-2010 on CDC WONDER Online Database, Centers for Disease Control and Prevention, National Center for Health Statistics, 2010.
5. Current Population Estimates, San Diego Association of Governments (SANDAG), 2012.
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8. EPICenter California Injury Data Online, California Department of Public Health, Safe and Active Communities Branch Report, 2010.
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10. Patient Discharge Database (CA OSHPD), County of San Diego, HHSA, Epidemiology & Immunization Services Branch, 2011.
11. Prehospital MICN Database, County of San Diego, HHSA, Emergency Medical Services Branch, 2011.
12. San Diego County Community Profiles, County of San Diego, HHSA, Community Health Statistics Unit, 2012.

San Diego County Board of Supervisors



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Donald F. Steuer

General Managers

<p>David Estrella General Manager Community Services Group</p>	<p>Tracy Sandoval Chief Financial Officer/General Manager Finance & General Government Group</p>	<p>Nick Macchione Agency Director Health and Human Services Agency</p>	<p>Sarah E. Aghassi General Manager Land Use & Environment Group</p>	<p>Ron Lane General Manager Public Safety Group</p>
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