



PERINATAL EQUITY INITIATIVE

County of San Diego Health and Human Services Agency
Public Health Services - Maternal, Child, and Family Health Services

November 5, 2019
Health Services Advisory Board Meeting





BOARD LETTER – Vote to support the following actions:

- Authorize the approval and acceptance of approximately \$1,452,930 in grant funds from the California Department of Public Health, Maternal, Child, and Adolescent Health Division for the period of November 1, 2019 through June 30, 2022 for the Perinatal Equity Initiative grant.
- Authorize the Clerk of the Board to execute all required grant documents, upon receipt, including any annual extensions, amendments, and/or revisions thereto that do not materially impact or alter the services or funding level.
- Authorize the Agency Director, Health and Human Services Agency, to apply for additional funding opportunity announcements, if available, that address improvements of health equity for San Diego County residents.



Background

In June 2018, the Governor signed legislation establishing the California Perinatal Equity Initiative (PEI) within the California Department of Public Health.

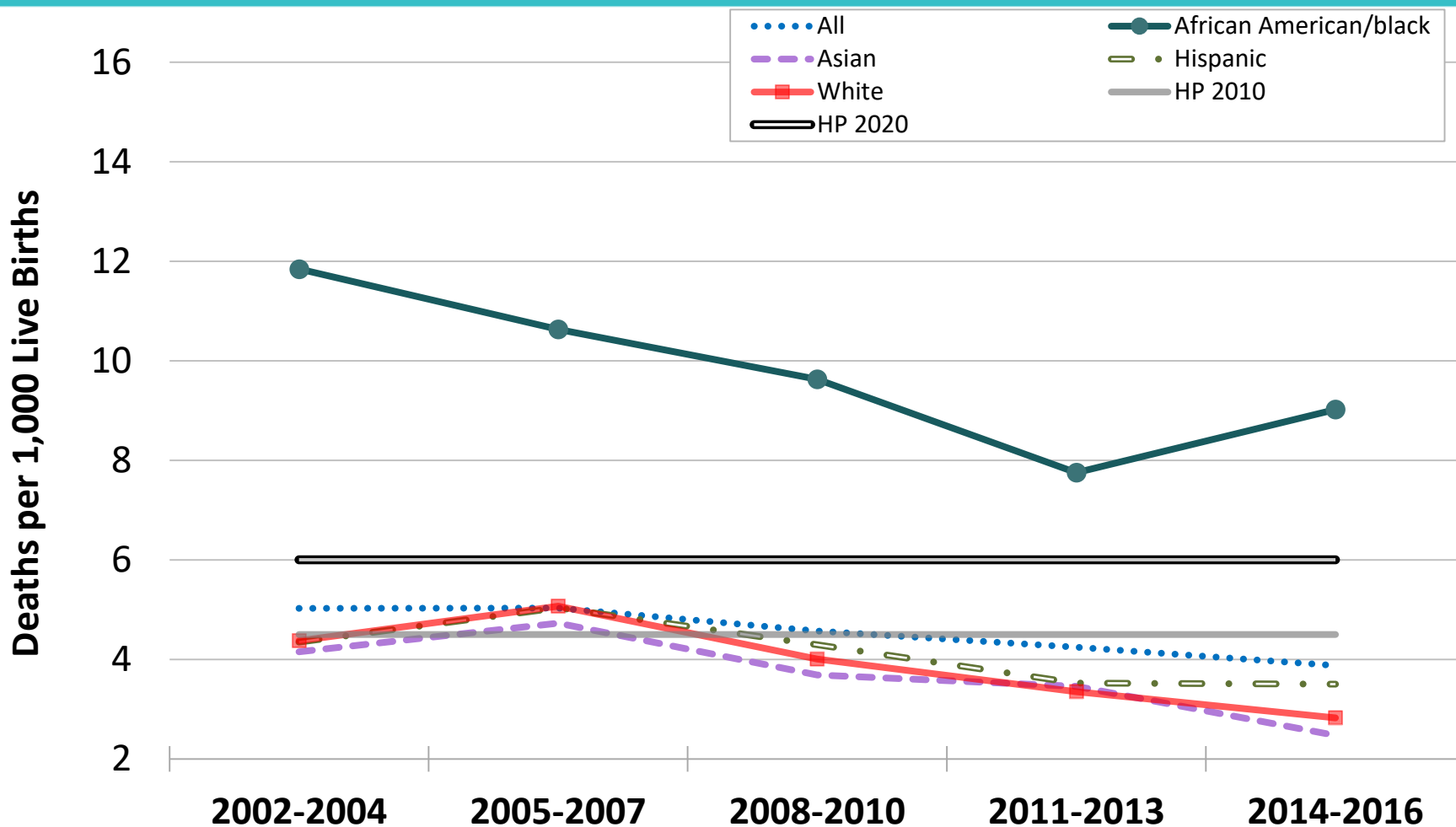




Taking Action

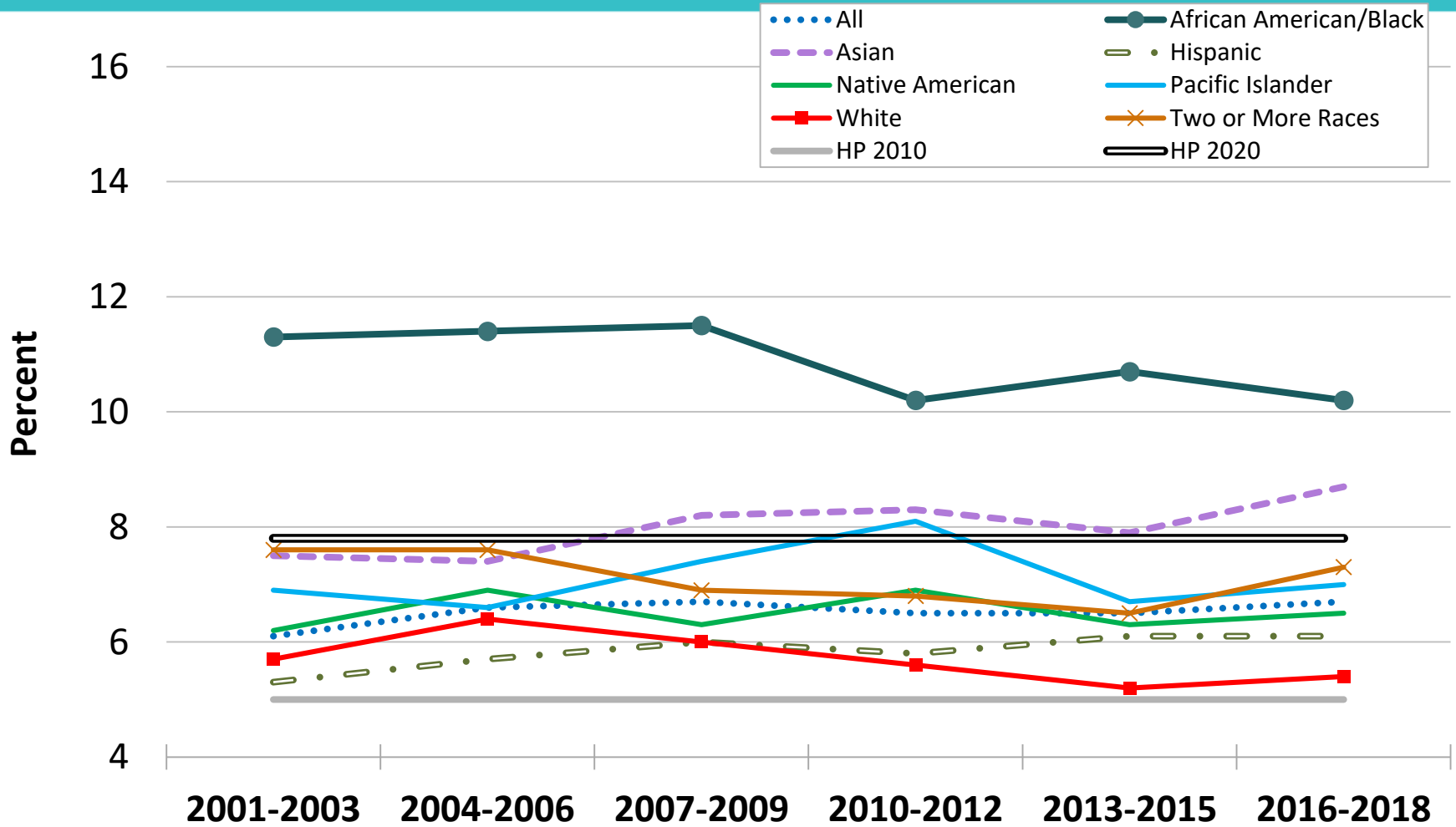
- Address the causes of persistent inequality and identify best practices.
- Promote the use of specific interventions designed to fill gaps in current programming.
- Provide funding to county health departments to promote leadership and coordination for widespread and lasting change in public awareness.

Infant Mortality Rate by Race/Ethnicity San Diego County Residents



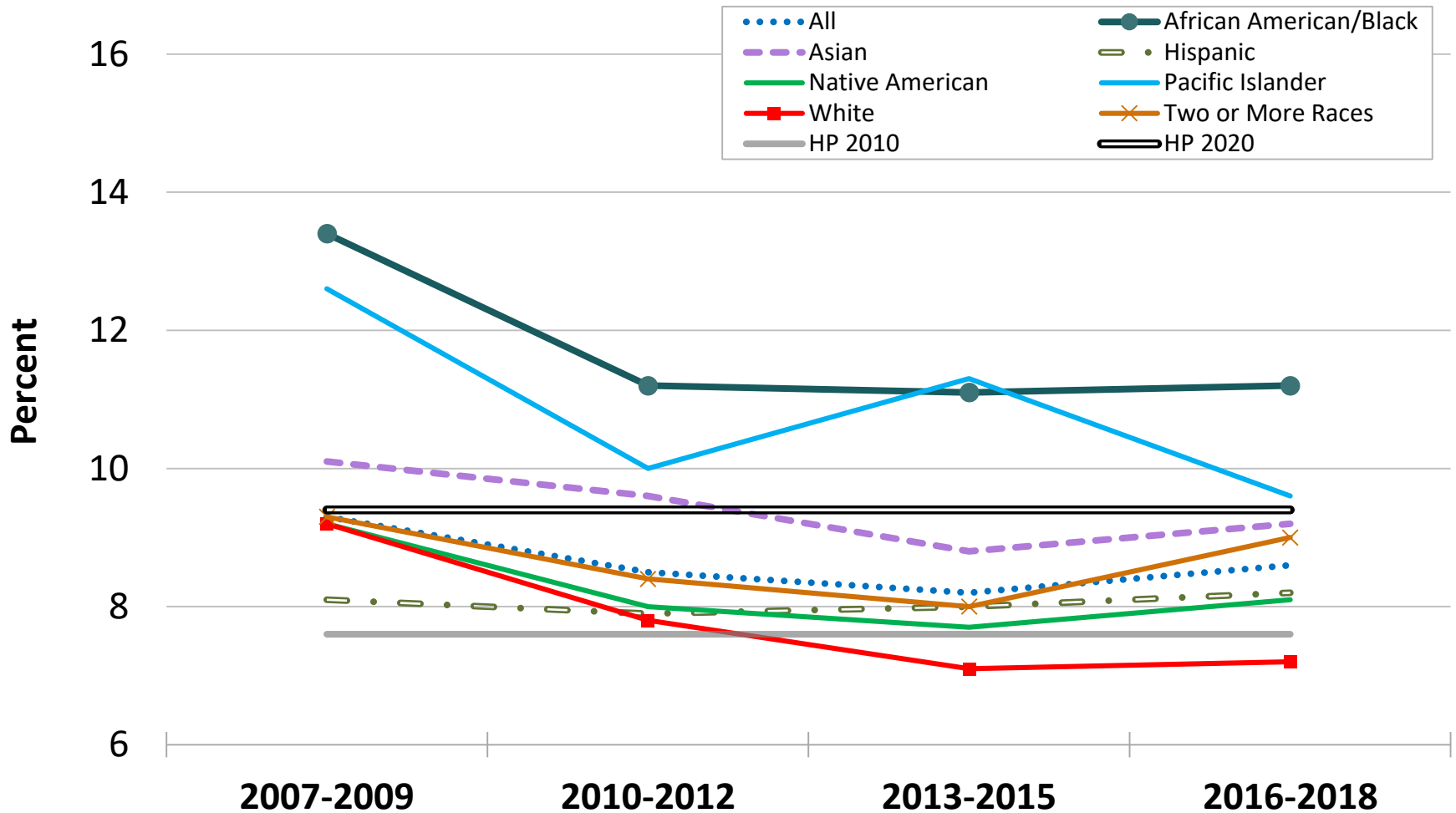
- Unknown race/ethnicity and groups with fewer than 20 events in any period are not shown (Native American/Alaskan, Pacific Islander, Other, and Two or more races).
- Source: CDPH, Health Information and Research Section, Birth Cohort Statistical Master Files.
- Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, MCFHS.

Low Birthweight Births by Race/Ethnicity San Diego County Residents



- Unknown race/ethnicity and groups with fewer than 20 events in any period are not shown (Other).
- Source: CDPH, Health Information and Research Section, Birth Statistical Master Files.
- Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, MCFHS.

Preterm Births by Race/Ethnicity San Diego County Residents

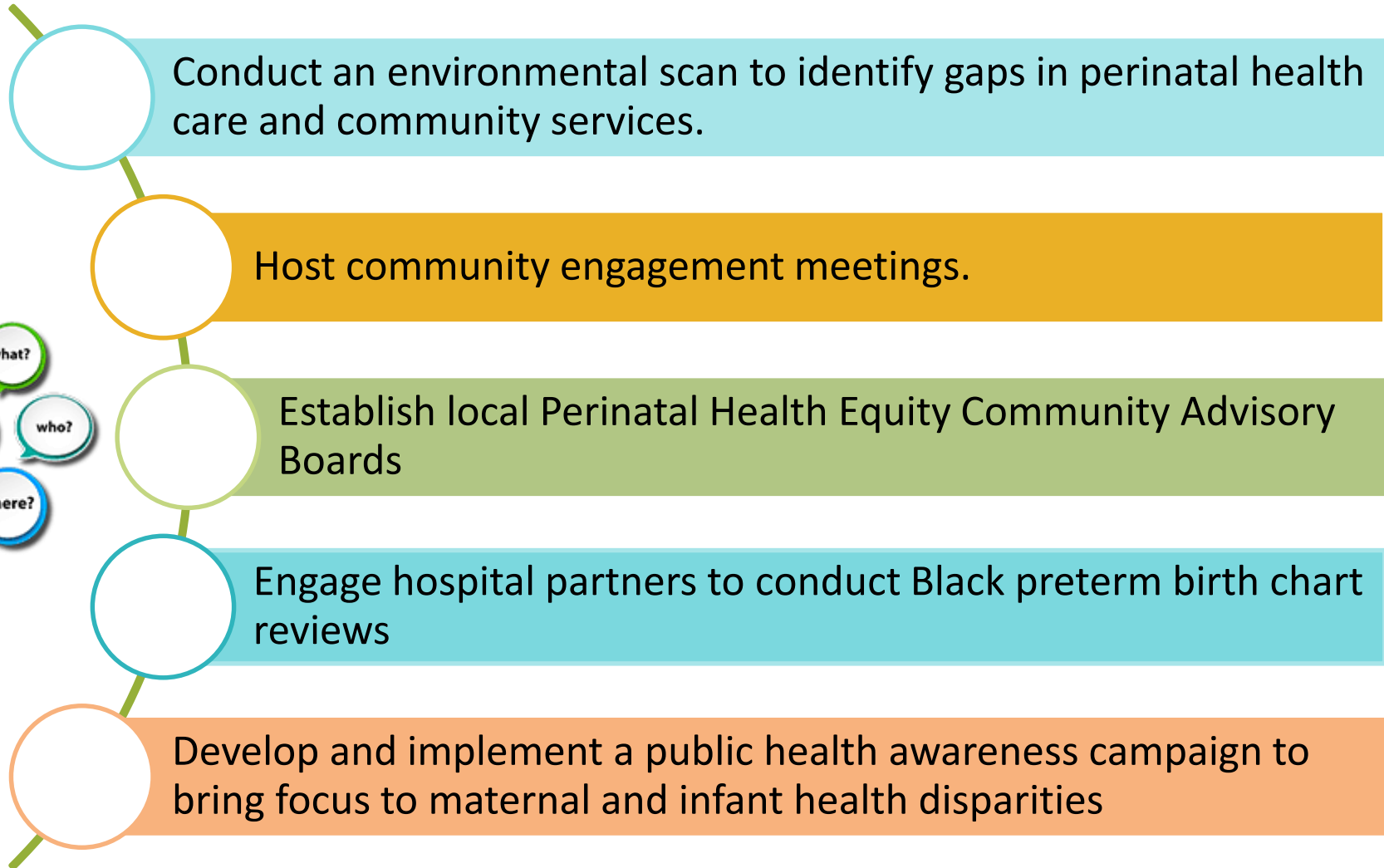


- Unknown race/ethnicity and groups with fewer than 20 events in any period are not shown (Other).

- Source: CDPH, Health Information and Research Section, Birth Statistical Master Files.

- Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, MCFHS.

PEI PLANNING



PEI INTERVENTIONS



Group Prenatal Care

Preconception and Interconception Health

Fatherhood (Partners) Initiatives

Home Visitation

Innovative Interventions:

Doulas, Patient Navigators, Preterm Birth Strategies, Social and Medical Interventions, Implicit Bias Curriculum, etc.,

- **Implicit Bias Intervention**



OUTCOMES TO DATE



Progress to
Date

Hosted Community Engagement Sessions.

Established Community Advisory Board.

Submitted Request for Supplemental Information to
CDPH on September 3, 2019.

In Process

Working on request to obtain preterm birth data from
hospitals with the highest African-American preterm
births.

Preparing for industry day and developing scope of
works for two contracts.

Developing media messages and awareness campaign.

Challenges

Spending year 1 funding in a short-time frame and procuring contracts.

Identifying effective evidence-based intervention curriculums.

Limited resources for implementing PEI.

Solutions

Identifying resources needed for implementing PEI to allow for spending down of funding.

Holding an industry day to solicit feedback from community and coordinating with other counties to assess what is currently being implemented.

Requesting to hire a PEI Coordinator to lead program and oversee contracts.





LOCAL ORAL HEALTH PROGRAM

County of San Diego Health and Human Services Agency
Public Health Services - Maternal, Child, and Family Health Services

November 5, 2019
Health Services Advisory Board Meeting





Prop 56

California Healthcare, Research and Prevention Tobacco Tax of 2016

- Passed by California voters in November 2016
- Increased the tax by \$2.00 per pack of cigarettes
- Revenue will be allocated to:
 - ✓ physician training
 - prevention and treatment of dental diseases
 - Medi-Cal
 - tobacco use prevention
 - research into cancer, heart, and lung diseases, and other tobacco-related diseases
 - school programs focusing on tobacco use prevention and reduction



November 14, 2017, the Board of Supervisors:

- Approved and authorized the Clerk of the Board (COB), upon receipt, to sign the Tobacco Tax Health Education Revenue Agreements from the California Department of Public Health to support a Local Oral Health Program in an amount not to exceed \$4,206,950 for the period of January 1, 2018 through June 30, 2022.

BOARD LETTER – Vote to support the following actions:

- Authorize the COB to execute all required grant documents, including any annual extensions, amendments and/or revisions thereto that do not materially impact or alter the services or funding level for the Tobacco Tax Health Education Revenue Agreement from the California Department of Public Health to support the Local Oral Health Program.
- Authorize the Agency Director, Health and Human Services Agency, to apply for additional funding opportunity announcements, if available, that address improvements of health equity for San Diego County residents.



Purpose

- The County's Local Oral Health Program funds will be used for the purpose of increasing capacity to support activities to achieve the California Oral Health Plan (COHP) goals and objectives.

Areas of Focus

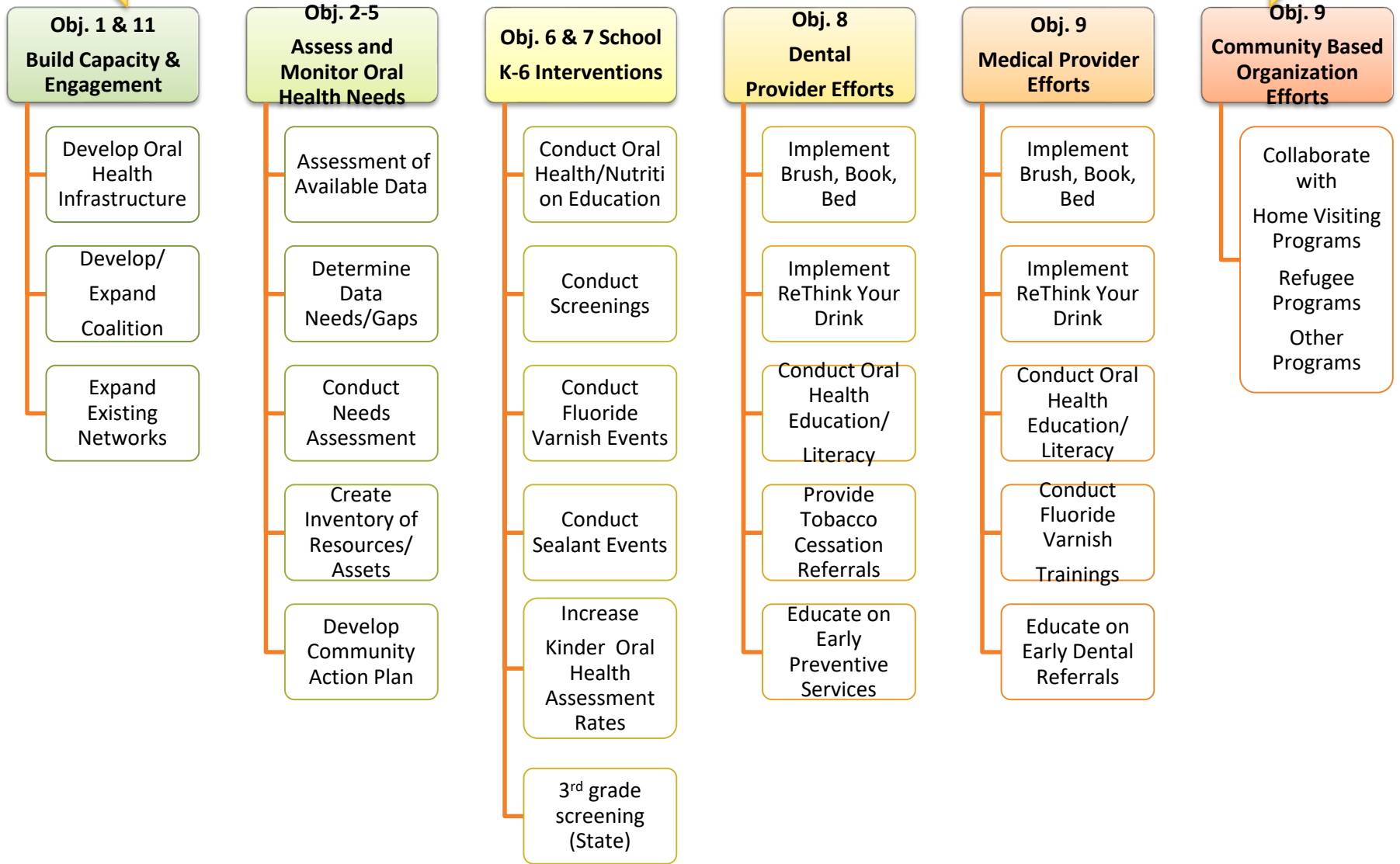
- Education
- Disease prevention
- Linkage to treatment
- Case management
- Surveillance



LOHP Objectives



Evaluation: Objectives 1-9 & 11



ASSESS AND MONITOR– OBJECTIVE 2 -5



Conducted a countywide oral health needs assessment and compiled results in four (4) reports:

- San Diego County Oral Health Coalition Assessment Report
- Community Engagement Assessment Report
- Inventory of Assets Report
- Available Local Oral Health Data Report



Convened stakeholders to develop the Community Oral Health Improvement Plan (COHIP) and Objectives.

Developed a database to track implementation of enhanced oral health activities by pediatric and dental providers

SCHOOL EFFORTS – OBJECTIVE 6 & 7



Coordinating with schools to establish/expand partnerships to provide oral health education and preventive screenings in school setting.

Collaborating with San Diego County Office of Education, Live Well Schools, and other programs to enhance partnerships with schools and leverage resources.

Collaborating with the Child Health Disability Prevention Program on quality improvement project to enhance Kindergarten Oral Health Assessments.

Coordinating with CDPH to pilot oral health results-based accountability.



DENTAL OFFICE EFFORTS – OBJECTIVE 8



Identified two (2) oral health champions.

Trained 27 dental providers/staff on enhanced oral health activities (EOHA).

- 27 conducting brush, book, bed (BBB)
- 27 providing Rethink Your Drink materials and education
- 27 providing tobacco cessation information
- 20 providing services to children by age 1 to prevent early childhood caries
- 24 implementing oral health literacy education
- 6 implementing EOHA at 6 months



MEDICAL OFFICE EFFORTS – OBJECTIVE 9



Identified three (3) medical provider champions

Trained 28 medical providers/staff on enhanced oral health activities (EOHA)

- 28 conducting brush, book, bed (BBB)
- 27 providing Rethink Your Drink
- 8 implementing fluoride varnish in office
- 26 conducting early referrals
- 7 additional providers trained through train-the-trainer
- 14 implementing EOHA after 6 months



COMMUNITY BASED ORGANIZATIONS

OBJECTIVE 9



Provided trainings to home visiting staff to implement oral health education in home visits.

Conducted trainings and attended community events providing oral health education.

- Participated in a total of 52 trainings/presentations and community events (September 2018-September 2019).
- Reached 2,069 parents, children and community members.

Collaborated with Dental Health Initiative- Share the Care on the Give Kids A Smile Event.

- Sealants were placed on 157 children a value of \$45,180.
- Fluoride varnish was applied to 263 children a value of \$10,520.

LESSONS LEARNED



All staff should be included in in-service (e.g., dentist, RDH, DA).

The term "training" was reframed to "in-service".

Preexisting relationships were essential to the initial program implementation.

Forms and consent forms need to be in multiple languages.

Parents are delighted that their medical provider is taking an active interest in their child's oral health.



Challenges

Obtaining approval to provide oral health screenings at the school setting.

Implementing fluoride varnish in medical setting due to limited time to administer and staff turnover.

Scheduling trainings with providers can be time intensive and it takes effort to coordinate a time that works with all parties.

Limited resources (staffing, providers, etc.).

Solutions

Building upon existing school partnerships and identifying school personnel to serve as oral health champions.

Assisting providers with other strategies and systems on applying fluoride varnish within the medical setting.

Coordinating with providers to identify best days/times and other resources (e.g., online trainings).

Leverage resources with community partners, schools, medical/dental professionals, and community clinics.





QUESTIONS?

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