RANDALL LEWIS HEALTH & POLICY FELLOWSHIP

2019 | 2020

Partners for Better Health

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Quality of Life in the City of Rancho Cucamonga

Why Rancho Cucamonga is a great place to live.

There are uncountable reasons that make Rancho Cucamonga a unique and great place to live. One thing we know for sure is that the City is providing multiple services that promote the health and safety of its residents. And to ensure the effectiveness of these services and keep them in line with the resident's needs, the City is evaluating the quality of life in the community by surveying the residents every five years.

Rancho Cucamonga quality of life survey.

The quality of life survey evaluates residents' insight on the quality of life, community connections & belonging, health information, nutrition and eating habits, access to care, physical activity, and mental health.

The findings of this survey suggest that Healthy RC is having an overall positive impact on the City and improving the health of its residents by making changes in individual knowledge, attitudes, and behaviors.

Quality of life

Respondents reported positively in quality of life measures, with a majority of respondents stating that Rancho Cucamonga was a safe place to live, raise children, and age in.

Health information

The health outcomes within the City of Rancho Cucamonga show downward trends in diabetes, heart diseases, and cancer rates during the implementation of Healthy RC.

Health behaviors

The majority of respondents were physically active and had positive attitudes and motivations toward eating healthy

Mental Health

Residents who were participating in at least one of the city activities reported a better mental health status than the residents who didn't participate in any.

Amber Lancaster | California Baptist University

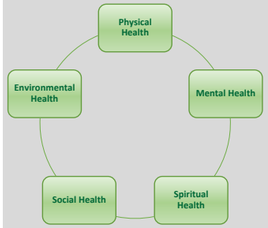
City of Eastvale: Healthy Community Initiative

Amber Lancaster, MPH student California Baptist University

About Healthy Community Initiative

- A proposed policy for the City of Eastvale is to adopt a healthy community initiative that provides residents with information and resources pertaining to health and wellness.
- According to SHAPE Riverside data, chronic illnesses related to obesity and substance abuse are among the greatest health concerns facing the community.
- Health resources made available on the City of Eastvale's website that address not only these health concerns, but other dimensions of health and wellness.

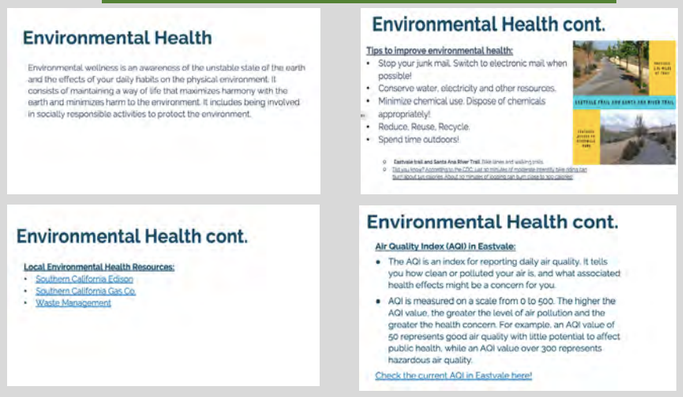
Dimensions of Health



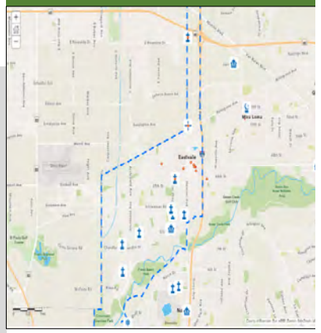
Each of the Dimensions of Health will feature CDC guidelines explaining how to be healthy in these areas. Additionally, there will be links to health resources related to these dimensions that can be accessed in Eastvale and the surrounding community.

City of Eastvale: Healthy Community Initiative

Example of Dimension of Health and Wellness: Environmental Health



GIS Map of Community Resources



Each of the health resources listed on the Healthy Community area of the City of Eastvale website can be found in an interactive GIS map of the city and surrounding areas.

Ami Bhatt | Claremont Graduate University

POMONA'S PROMISE

What is Pomona's Promise?

Pomona's Promise is a collective impact initiative with the common agenda of a building "Safe Neighborhoods, Strong Families and a Healthy Quality of Life". In October 2019, an assessment of Pomona's Promise began to define the structure and current status of the organization. This information was collected through interviews with the leaders of the 5 task groups addressing mutually reinforcing activities. These task groups are: Education and Career Readiness, Community Safety, Healthy in Pomona, Economic Development, and the Community Engagement Board. The assessment will further define the common needs within the organization and make recommendations based on the findings.

Examining Pomona's Promise

Strengths The volunteers that make up Pomona's Promise have high intrinsic motivation to fulfill the goals of their task groups and the initiative as a whole. They have been able to leverage civil sector engagement and existing infrastructure within the community to complete activities. This is despite the limited resources made available to them.

Opportunities The task groups are active in planning events and activities that are mutually beneficial to the other task groups and the backbone organizations. As of 2019, a Governance Committee was created to align Pomona's Promise to meet their goals and to define the structure. The fiscal agent makes applying for funding opportunities possible, this has included the support from Fairplex, PUSD, and the City of Pomona. There are an array of annual events, including Pomona Beautiful, Economic Development Summits, the Homelessness Summit, which have been useful for promoting engagement and collecting information. The EDI report was published in 2019 and has made evaluation and tracking progress possible. The first graduating class of the Pomona Leadership Network has been actively working with each of the task groups.

Aspirations All the task groups, especially Economic Development, aim to build the brand affinity and improve the brand recognition of Pomona. Additionally, there was the need to strengthen internal and external communication mechanisms, and have cohesive relationships between the task groups to better use their resources and support one another's activities was identified. Because much of the labor is volunteer based, there is moderately high turnover with no formal transition procedures, this leads to institutionalized knowledge and a vacuum when a leader leaves. Finally, one of the most commonly cited aspirations of the task groups and PPLT was the activation of the Results Based Framework, with support to upload and maintain data.

Recommendations/Ways Forward Upon analyzing the strengths, aspirations, and opportunities of Pomona's promise, three recommendations are identified to ensure the sustainability of Pomona's Promise:

1. A full-time, paid administrative manager. This individual would fulfill the logistic needs of the task groups, streamline the use of resources, improve collaboration, and manage the data within the Results Based Framework.
2. A regular funding stream. Pomona's Promise has operated on the resources of volunteers and fundraising through supporting organizations to complete activities. A regular funding stream would allow a strategic plan and advanced planning, which would also optimize the use of the resources on an annual basis.
3. A well-defined backbone. Currently, there are many support organizations and a fiscal agent, however the backbone of the collective impact is blurred. As one of the key elements of a collective impact initiative, Pomona's Promise requires a backbone organization to fulfill its goals.

HOMELESSNESS SOLUTIONS TASK FORCE

1. NAVIGATION CENTERS WITH RECUPERATIVE CARE

A. Building 150-bed recuperative care navigation center

i. Strategic plan was approved on November 05, 2019
ii. Wellness center will hold 150 beds
iii. Recuperative care center will hold 50 beds
iv. Separate sleeping centers for men, women, and families
v. Case managers will be assigned for documentation readiness
vi. Workforce training, life skills, and recovery classes
vii. Pets will be sheltered at center
viii. Multi-agency collaboration w/non-profits and government agencies
ix. Respite care included to house homeless discharged from emergency rooms
x. Cuts down on ER recidivism rates and saves health care dollars
xi. Modular construction to for inexpensive building of center (Figure 1)
xii. Street medicine will be implemented to serve homeless population (Figure 2)
xiii. Self-cleaning toilets to be installed in High Desert parks to reduce public waste (Figure 3)

2. MODULAR CONSTRUCTION/STREET MEDICINE/SELF-CLEANING TOILETS

Figure 1

Figure 2

Figure 3

3. HOMELESS TASK FORCE APPROVED FUNDING & INTERVENTIONS

i. $650 million approved in Housing Assistance Payment (HAP) funds
ii. Funds are to be divided between S.F., L.A., & S.B. counties and consortiums of care
iii. S.B. County approved to receive $2,865,000 in grant funding
iv. Continuum of Care (COC) will receive $3,071,059 in grant funding
v. Cities and non-profits apply for funding through the COC
vi. Pet assistance will receive $5 million for food, basic vet services, and kennels for homeless individuals with pets
vii. Legislation is going to provide $750 million for elderly care, state property (old buildings, empty land), and $695 million to increase Medicare/Medicaid programs for the homeless
viii. Going to purchase 17,000 square foot land, former detention center, to build center
ix. One-week stay in hospital is approximately same cost as one-year's rent in apt. (Figure 4)
x. Drug & alcohol counseling will be provided to homeless individuals in respite care
xi. Individuals will be provided case workers to help them find jobs, IDs, and permanent housing
xii. Mental health workers, nurses, and physicians will provide care for individuals

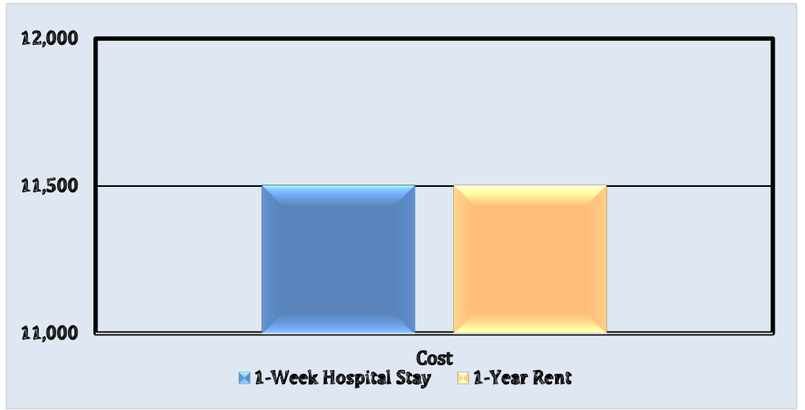


Figure 4

Cailey Barnes | Claremont Graduate University

May 1st, 2020

Written by: Cailey Barnes

HEALTHY ONTARIO

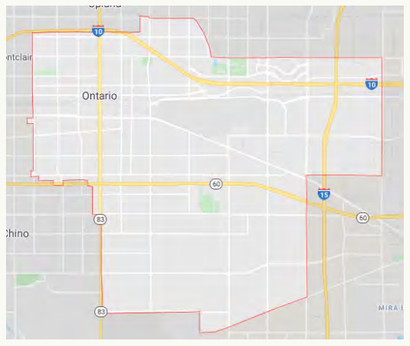
Community Highlight

know your numbers

Hosted by San Antonio Regional Hospital, Know Your Numbers has provided a space for members of the community to record their blood pressure, body mass index, blood glucose and blood cholesterol to monitor risk of diabetes.

Four locations around the city of Ontario provide these screenings once a month for FREE. The program has been a success among the community and each time there is an increase in participants with a portion of the attendees being returning members dedicated to improving their overall wellness.

The city of Ontario has a population of 181,107 residents and is located in the San Bernardino County of California. About 27.5% of Ontario's population was born outside of the United States. Three-quarters of Ontario's residents are Hispanic or Latino and many of these individuals make up the 16.2% of residents living in poverty. They live in underserved neighborhoods with high obesity rates and the city of Ontario is dedicated to improving the lives of these individuals through their Healthy Ontario Initiative.



Map of City of Ontario

The Healthy Ontario Initiative was created to empower the residents of Ontario to improve their physical, social, environmental, and economic health overall. The initiative represents a community-based approach to wellness through four core components to improve health outcomes throughout the entire city. The city of Ontario is working with the Planning Department to update current policies through community programs that improve all aspects of wellness.

May 1st, 2020

Core Components of Healthy Ontario:

PREVENTION & WELLNESS · ACCESS TO HEALTHCARE · EDUCATION & LIFELONG LEARNING · SAFE & COMPLETE NEIGHBORHOODS

Prevention & Wellness:

The city takes action to prevent chronic disease and enhance optimal health and wellness. Ontario strives to increase awareness and improve access to healthy foods, increase opportunity for physical activity and support positive mental health for all residents. The city works with CalFresh, the local recreation centers, Covered California, the local farmer's markets and the San Bernardino County of Public Health to improve wellness of all residents.

Access to Healthcare:

Ontario partners with local, state and regional healthcare workers to provide affordable, quality healthcare for the community. The city takes extra care to address the unique barriers faced by families living in underserved neighborhoods, those living in poverty and individuals with chronic illnesses. Some partners include San Antonio Regional Hospital and Kaiser Permanente of Ontario.

Education & Lifelong Learning:

Located within Ontario is a great variety of quality preschool, elementary, middle school and high schools, colleges and vocational training. By providing access to public libraries, culture, community events and activities, the residents of Ontario are able to continue learning, no matter their age or background. The city strives to provide educational resources and work with local businesses to foster community education and lifelong learning.

Safe & Complete Neighborhoods:

Safe neighborhoods provide residents with options for physical activity, goods, services and entertainment. Ontario strives to support healthy lifestyles, create neighborhoods that sustain economic prosperity and open safe gathering points for the community. The city works with the Ontario fire department, police department, planning department, and Community & Public Safety Agency to ensure the safety of all communities.

Current Initiatives

HEAL Zone

Build

Let's Move!

Healthy People 2020

Choose My Plate

Champions for Change

Promise Scholars

Vital Signs

HEAL Cities Campaign

The BUILD HEALTH Challenge · Community Vital Signs · Promise Scholars

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IEHP® *presents*

the

HEALTH AND WELLNESS HUB!

Written by Cassandra Romero, MHA Student

Site Supervisor: Mollie Mackenzie

"Live Well, Eat Well, Be Well"

Using Technology for A Healthier You!

The Inland Empire (also known as the IE) is quickly becoming the fastest growing region in the nation. It includes both San Bernardino and Riverside counties. With over 4.2 million residents, Inland Empire Health Plan (IEHP) is committed to giving the residents we serve better health outcomes.

Through our **Health and Wellness Hub**, we not only hope to provide our members improved access to health and wellness resources, we also want to bridge the gap in health education.

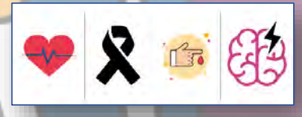
Why Do We Need this Hub?

Currently the data shows Inland Empire residents are suffering from chronic diseases due to lifestyle and eating habits.

Some of these diseases include:

- Heart Disease
- Cancer
- Diabetes
- Stroke

The purpose of this Hub is to help encourage Inland Empire residents to change their behaviors into healthy ones.



Accessible

At IEHP, we understand a good portion of our population is in poverty[1] and cannot afford costly resources.

We want our Hub to be as accessible to the public as possible.

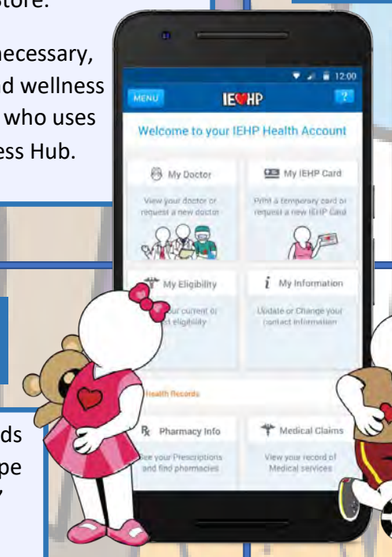
That is why our Hub will be available for free soon in both the Apple App Store and Google Play App Store.

We also hope to give necessary, personalized health and wellness resources to everyone who uses our Health and Wellness Hub.

Educate

A large portion of the San Bernardino (38%)[2] and Riverside county (66%)[3] populations were identified as overweight or obese.

To help mitigate this, IEHP looks forward to providing health and wellness education ranging from health assessments to nutrition to exercise.



Engage

Using the latest methods of engagement, we hope to capture IE residents' interest in our Hub through fun challenges and rewards.

Ranging from leaderboards to obtaining vouchers, our Hub can prove to be entertaining.

Be Well

Like our tagline, IEHP wishes our residents to *Be Well* as they use our Hub for the betterment of their health and wellness.

Inland Empire Health Plan
Information Technology Department
10801 6th St #120, Rancho Cucamonga, CA 91730
(800) 701-5909

References

1 - Overall Poverty. (2015). Retrieved from http://wp.sbcounty.gov/indicators/income/overall-poverty/
Poverty percentage: San Bernardino County, 16%; Riverside County, 12.7%

2 – Overweight and Obesity. (2015).

3 – Healthy Riverside Annual Report. (2015).

PBH
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Charles Eggleston | Azusa Pacific University

WHY PREPARE?

IN 2019-2020 WE'VE SEEN:

WILDFIRES
FLASH FLOODS
MASS SHOOTINGS
EARTHQUAKES
PANDEMIC

TURN OVER FOR A LIST OF 10 ESSENTIAL SUPPLIES

The Carolyn E. Wylie Center for Children, Youth & Families

ASD EMERGENCY 10 MUST HAVE ITEMS

#1 WATER
-
#2 FOOD
-
#3 RADIO
-
#4 FLASHLIGHT
-
#5 CELL PHONE & CHARGER

#6 FIRST AID KIT
-
#7 MEDICATIONS
-
#8 FAMILY & EMERGENCY CONTACT INFORMATION
-
#9 SENSORY NEEDS (HEADPHONES, ETC.)
-
#10 COPING ITEMS FOR TRIGGERS

TELL ONE PERSON ABOUT THIS LIST

Christopher Aono

Randall Lewis Health Policy Fellowship

Adventist Health White Memorial Hospital

Introduction

Adventist Health White Memorial is one of California region's leading non-profit, faith-based teaching hospital that provides a full range of medical services such as inpatient, outpatient, emergency, and diagnostic testing to communities near downtown Los Angeles. Their mission is living to live by God's love by inspiring health, wholeness, and hope. Their vision is to transform the health experience of community members by improving physical, mental, and spiritual health by enhancing interactions and providing services that are more accessible and affordable to community members.

Comparative Resource Matrix Development for Community Members

in Downtown Los Angeles

Methods

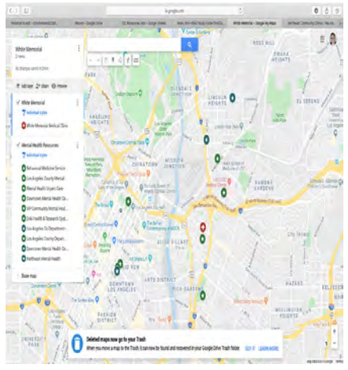
In order to garner community support for the Resource Mobile Application we administered pre-test surveys to obtain the community members' understanding community resources available. Weekly workshops were then facilitated by providing information available resources by different staff members and volunteers at the resource center.

The goal was to raise awareness by educating community members and health providers the potential health outcomes, if resources are not available to community members. We then provided post surveys to assess whether the attendees gained new knowledge during the workshop.

At the completion of the presentation, attendees were encouraged to participate a pilot application workshop.

Results

Throughout the program we were able to collect a total of 150 resources to build the resource application. However, after the completion of data clean up, we condensed the information to 100 resources to provide to community members. All information was entered into a simplified matrix system for patients to navigate. These resources provide additional links and services to community members that have been translated into multiple languages, smart phone compatible, and ADA compliant.



Conclusion

We concluded that many community members and healthcare providers were unsure of the available services near the hospital. This was a learning experience because in order develop a successful program, strong leadership and communication amongst the departments should be implemented.

MPH Competencies Addressed

MPH 7. With the use of ArcGIS mapping, I was able to assess the population needs, assets, and capacities that affect the communities' health.

UH 5. I am able to apply ethical and professional principles to urban public health issues and initiatives

Thank you to Randall Lewis Fellowship and to Adventist Health White Memorial Hospital for this experience.

Establish close working relationships and mutual-aid agreements with

- Emergency Management Agencies (EMAs)
- Emergency Medical Services (EMS)
- Medical/health/behavioral care providers
- Fire, law enforcement, and other federal, state, local, and tribal response organizations

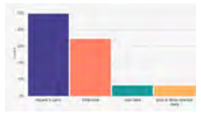
Preparing for a Health Response protocols

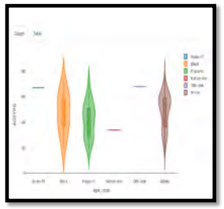
- **Participate in hazard vulnerability and risk assessments for your area(s).**
- **Acquire resources and surge capacity necessary to perform the basic missions assigned to public health.**
- Develop operation objectives of public health emergency response

Dashboard preliminary data

- **In terms of race, Black Americans had the most OD deaths in Riverside County.**

Riverside County Demographics





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Opioid Public Health Response Protocols Research

Darelle Agbayani Amores, MPH, Epidemiology

Riverside University HEALTH SYSTEM

LOMA LINDA UNIVERSITY
School of Public Health

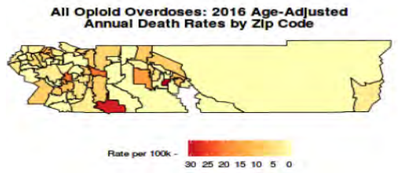
PBH
Partners for Better Health

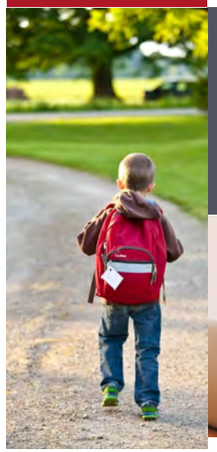
Background

Riverside County drug overdose death numbers and rates have dramatically increased in recent years. Overdose related emergency department (ED) visits and hospitalizations are also on the rise.

ACE

In addition, Riverside County residents experience high rates of adverse childhood experiences (ACEs) and adverse community experiences (ACERs).

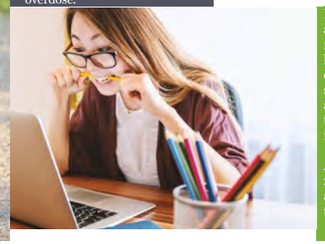




Surveillance

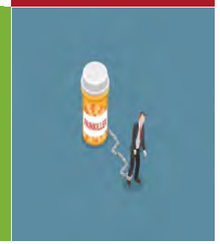
Riverside Overdose Data to Action enhances surveillance of overdose morbidity and mortality in Riverside County Data. It will help determine the frequency of ACEs/ACERs on overdose incidence in Riverside County and create more responsive and collaborative prevention efforts to address the upstream causes of substance use disorders and overdose.

"In 2016, more than 2 million Americans had an addiction to prescription or illicit opioids" – Whitehouse.gov



From the data and meta-analysis of the compiled research, minority groups have increased risk in OD death. Appropriate protocols such as creating an appropriate fatality review team and protocol strategies is vital to limiting OD deaths.

Analysis also showed at risk zip codes for OD and further analysis is needed to further to explore this.



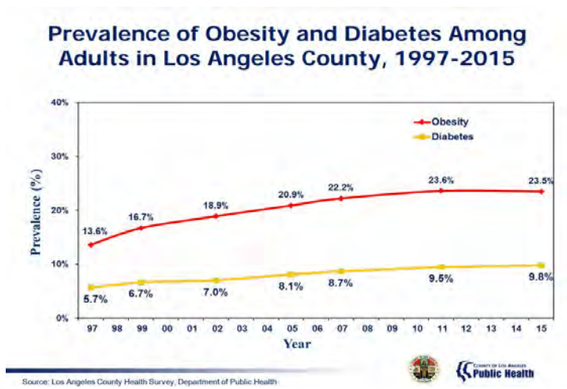
Walking With Purpose

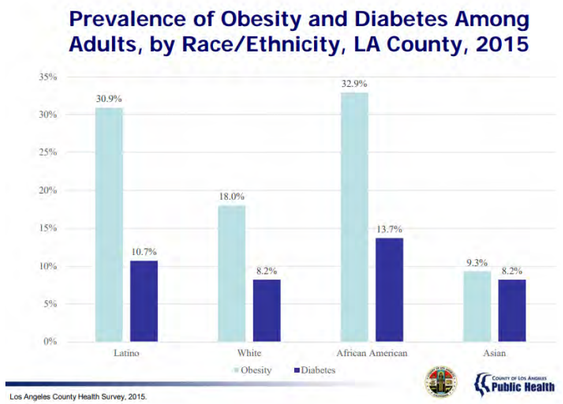
David Flores
B.S. Kinesiology, MPH Urban Community Health

Los Angeles Walks is a non-profit organization based in the heart of Downtown, Los Angeles. In order to increase opportunities for physical activity, the 'Walking With Purpose' module was created. The purpose of this training is to increase walking behaviors for community members by implementing the Golden Circle approach of 'why, how, and what'. This was tailored towards built environments that do not offer accessible sidewalks.

The culture of Los Angeles is a vehicle dependent one, so individuals have become less physically active. Active transportation is not the main method of transit because the built environment of Los Angeles favors vehicle transportation. Los Angeles Walks wishes to change that norm by advocating for a more accessible and safer infrastructure by shifting the current vehicle transit into a more walkable built environment.

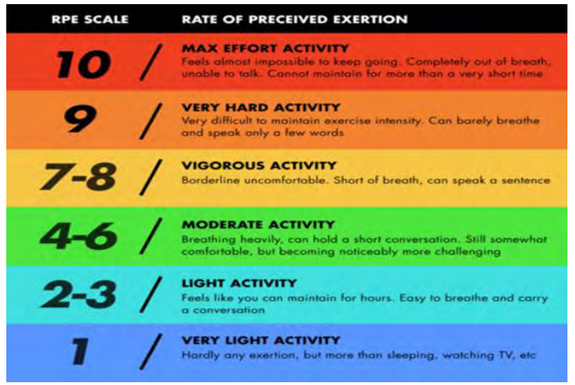
In 2015, a health survey done by the Department of Public Health revealed that 1-in-10 people residing in Los Angeles had diabetes and 1-in-4 people were obese. From the year 1997 - 2015, the prevalence of diabetes and obesity has nearly doubled in Los Angeles County. Type-2 diabetes is a component of metabolic syndrome and is a major public health issue that affects millions of people.

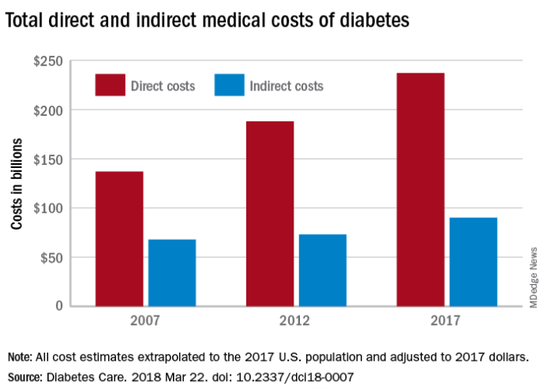




By increasing opportunities for physical activity, the prevalence of metabolic syndrome such as heart disease, obesity, and type-2 diabetes can be prevented and managed with a walking regimen at a moderate intensity. Walking With Purpose aims to improve the health and the economy of Los Angeles by increasing the opportunities to walk, especially for demographics living in low socioeconomic status areas.

Walking is the most common form of 'moderate' physical activity and can be done with little-to-no cost. Walking at a moderate intensity may help reduce and manage the risk of metabolic syndrome. To gain the health benefits from walking, the rate of perceived exertion (RPE) is a tool used to measure an individual's relative intensity for physical activity, walking in this case. Ideally, walking at a moderate intensity should be between the ranges of 2-4 on the RPE scale.





Note: All cost estimates extrapolated to the 2017 U.S. population and adjusted to 2017 dollars.
Source: Diabetes Care. 2018 Mar 22. doi: 10.2337/dci18-0007

The rising cost of healthcare can be regressed with a healthy regimen of walking because it is an accessible form of physical activity that can be done for little-to-no cost. By reimagining the built environment of Los Angeles, walking can become an intervention that can passively improve the quality of life of its residents and reduce the risk of metabolic syndrome one step at a time.

The ABCs *of* FASDs

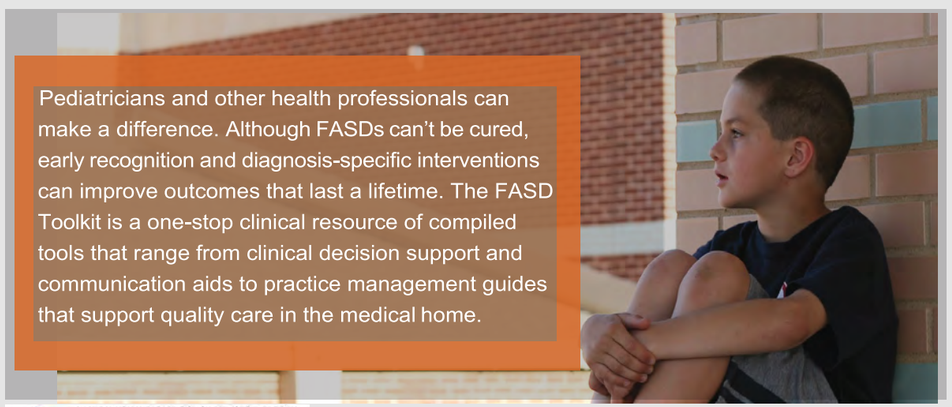
Fetal Alcohol Spectrum Disorders (FASDs) are estimated to affect as many as 40,000 infants annually in the U.S., or 1 in every 100 infants; thus, approximately 2% to 5% of schoolchildren may benefit from therapeutic interventions, including special education services. The prevalence of FASDs is comparable to spina-bifida and Down syndrome rates.

All children are at risk and **should** be screened

Behavioral health interventions last a lifetime

Clinicians can work with patients/ families to improve outcomes

Find the trusted approach and resource information you need in the FASD Toolkit: **aap.org/fasd**



Pediatricians and other health professionals can make a difference. Although FASDs can't be cured, early recognition and diagnosis-specific interventions can improve outcomes that last a lifetime. The FASD Toolkit is a one-stop clinical resource of compiled tools that range from clinical decision support and communication aids to practice management guides that support quality care in the medical home.

a program to enhance the health & development of infants & children
Fetal Alcohol Spectrum Disorders Program

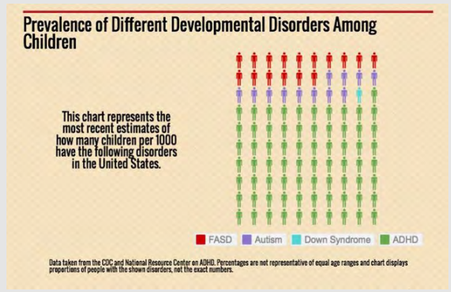
American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN®

AZUSA PACIFIC UNIVERSITY

CENTER *for* BETTER BEGINNINGS
Promoting Maternal Health And Child Development

PBH
Partners for Better Health

Screening Children for Fetal Alcohol Spectrum Disorders



Prenatal Alcohol Exposure. No safe amount. No safe time. No safe alcohol. Period.(NOFAS.org)

- **Fetal Alcohol Spectrum Disorders (FASD) is a preventable birth defect, and a leading cause of developmental disabilities**
- **FASD occurs due to fetal exposure to alcohol during pregnancy**
- **FAS and FASD is a serious public health problem affecting as many as 10% of children (May et al., 2018).**
- **The effects of FAS and FASD are significant, lifelong, and costly.**
- **Early diagnosis and intervention improves long-term outcomes for children with FAS and FASD.**
- **Diagnosis of FASD can be challenging**
- **Prevalence of screening practices is not fully understood**
- **Stigma is a serious barrier to screening.**
- **Work needs to continue to increase public and health care provider awareness, prevent FAE, and improve screening and early diagnosis of FAS and FASD**

Contributing authors: Dayna M. Holt, DNP(c), MSN, RN & Teresa Dodd-Butera, PhD, RN/DABAT

References:

1. Centers for Disease Control and Prevention. (2019). Basics about FASD. Retrieved from https://www.cdc.gov/ncbddd/fasd/facts.html
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Deena Hattouni - Randall Lewis Health Policy Fellow – University of La Verne – Master of Health Administration – Jamboree Housing Corporation

"Jamboree delivers high-quality affordable housing and services that transform lives and strengthen communities."

"Every person will live in a strong, healthy, sustainable community."

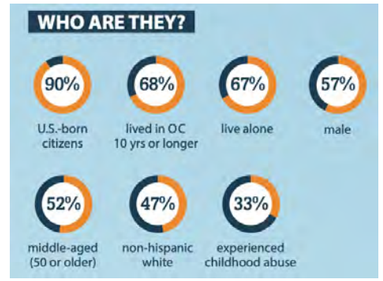
FOUR GOALS

- Deliver quality housing and services
  - The power of community used to bring hope to those who are starting over.
- Leverage resources
  - Strategic funding provides partnerships and innovative alliances to integrate successful neighborhoods.
- Transform lives
  - Allowing residents to reach their full potential by providing successful live/work strategies.
- Strengthen communities
  - Smart growth designs to build sustainable and impactful communities.

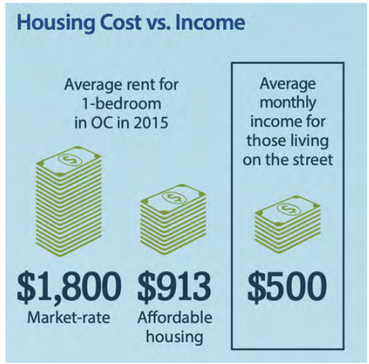
3 STEPS TO PERMANENT SUPPORTIVE HOUSING

Permanent supportive housing demonstrates that housing first allows the chronically homeless to rebuild their lives. Jamboree believes that stable housing is the strong foundation on which lives are built. 24/7 access to supportive services allows residents to transform their lives from the ground up. While the services are voluntary, they are shown to keep the residents housed over time which will result in high residency retention rates and lower hospitalizations.

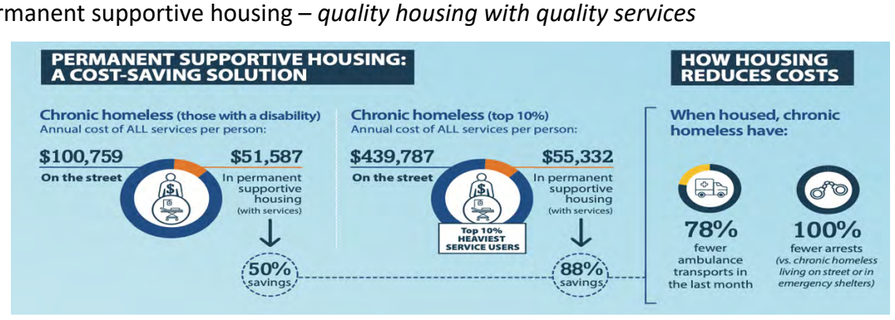
1. CREATE
   - Awareness of the homeless community and their needs



2. FORMALIZE
   - Goals and roles



3. DEVELOP
   - Permanent supportive housing – *quality housing with quality services*



Project Overview

All permanent supportive houses were interviewed and surveyed in accordance to the Housing First Standards Assessment Tool developed by the U.S. Department of Housing and Urban Development (HUD). At a system-level, this tool is intended to assess the fidelity and autonomy of the housing complexes to promote the housing first model at a macro level.

The results of the housing first surveys show that all permanent supportive housing complexes were up to the standards of HUD. They show that they adhere to the best practice standards recommended by HUD which include but are not limited to providing housing that does not deny assistance for unnecessary reasons and promotes participant choice in services provided.

Dulce Martinez | California Baptist University

BUILDING STRONGER AND HEALTHIER COMMUNITIES

CBU Public Health Sciences · Jamboree · PBH

Written By: Dulce Martinez Luna

Date: April 20, 2020

Who is Jamboree Housing Corporation ?

- A non-profit agency with a 25-year history of providing high-quality affordable housing and services to strengthen communities.
- Creates supportive housing for low income families, veterans, and senior citizens across communities in the state of California.
- Transform lives by generating job opportunities, promoting healthy living, and providing supportive, life-enhancing services.

With more than 93 communities in Southern California!

How does it look like?

- Jamboree explores the social, economic, and educational impact of its residents
- Follows the Social Determinants of Health (SDOH) to identify areas of improvement and enhance the overall well-being of their residents
- SDOH includes where you were born, have lived, played, worked, worshiped, and aged

Did you know that a person's health and well-being is influenced by their personal, economic, environmental, and social factors?

- Studies have found that low socioeconomic status is associated with an increased risk for arthritis, cardiovascular disease, chronic respiratory diseases, diabetes, and cervical cancer as well as for mental distresses.

SOCIAL DETERMINANTS OF HEALTH

https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health

1

CITY OF BANNING: TACKLING FOOD INSECURITY AND SEDENTARY LIFESTYLE HABITS

Public Health Issue: Food Insecurity and Sedentary Lifestyle

- From the residents sentiments collected in surveys, from comments given in town hall meetings, and many expressing their concerns in public forums, the City of Banning wished to tackle the issues of food insecurity and Sedentary Lifestyles for this upcoming year.
- To address the food insecurity and the lack of affordable and good quality food, the city decided to make space for a community garden. The first steps we addressed this year were of three main concerns; where should the garden be built, what are the costs of building one, what are the costs of maintaining, and how many individuals can we reach? To answer this question we used ESRI's ArcGIS Pro software for selecting the best location. The main criteria for the location was that it must be owned by the city.
- To address sedentary life style changes, we analyzed the data of participation and type of events the Department of Parks and Recreations holds on a yearly basis. What we found is that there are a lot of exercise programs with only a hand few having many participants. We also found that when holding health education events, participation for the exercise events and programs increased drastically. We encouraged the city to plan more health education events, as it increased the number of participants and brought in more donations to help fund many other exercise programs.

City of Banning

Three main projects:
Community Garden: Addressing Food disparity and inaccessibility due to price
Health Education Programs: Promoting healthy habits and exercise
Program Survey: Promoting more community work and unity

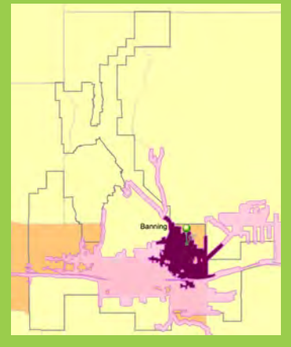
Experience

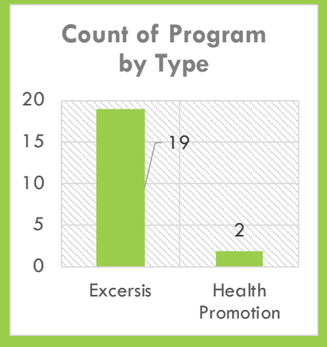
Working fore the city of Banning has been a great experience for me
I want to thank every individual for providing me with support and a helping hand when I was stuck or found myself unable to find a solution forward. I am grateful for the experience, from the interdisciplinary cooperative projects with many personnel of the City and the WRCOG fellow, to the help of my professors and use of epidemiological tools and methods to problem solve and better the communities health.

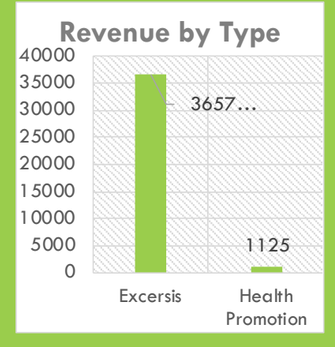
Project One: Community Garden
- Location at Hargrave and E. Theodore
- Being split between Community Garden and a new substation
- Simple lessons and classes prepared for education of the participants
- We are hoping to begin as soon as the substation is ready
- Location would reach 3,000 residents, and 10 min drive would reach 95% of residents

Project Two: Program Survey
- We surveyed individuals from the city, including managers from each department.
- Parks & Recs answered the most
- Many want to add education-based health programs to the exercise events that occur year round

Project Three: Health Education Programs
- City of Banning has health-based programs year-round promoting exercise and an active life.
- To strengthen the programs, they want to add a health-based portion
- Adding health education, nutritional education, and variety in exercise.
- 2 Health based programs a year, 19 exercise-based programs a year
- Goal? Incorporate 3 more classes during the exercises by the end of the year







Eleeza Babaknia | University of Southern California

IMPROVING SENIOR SAFETY AND HEALTH OUTCOMES
SAFE ROUTES FOR SENIORS IN UNINCORPORATED LOS ANGELES COUNTY

Los Angeles County Department of Public Health
PLACE Program

Background

As people age in unincorporated Los Angeles communities, it is vital to implement policies and programs that promote safe, walkable streets for all populations, namely those that are more vulnerable (ie; seniors age 65+).

Exposure to safe walking environments provides opportunity to improve social determinants of health and quality of life through increased levels of physical activity and upgraded pedestrian access to senior serving facilities.

Strategies for Implementation of Policy Change for Positive Environmental and Health Behavior Outcomes

Safety Walk Audits

Partnerships

Senior Surveys

Collaborating with local stakeholders & partnering up with local community-based organizations aims to maximize awareness and advocacy. This aims to improve senior participation through disseminating important health information for education and creating a deeper sense of community engaagement.

Eleeza Babaknia April 2020
Randall Lewis Health Policy Fellowship

PBH Partners for Better Health | UNIVERSITY OF SOUTHERN CALIFORNIA MASTER OF PUBLIC HEALTH PROGRAM | COUNTY OF LOS ANGELES Public Health

IMPROVING SENIOR SAFETY AND HEALTH OUTCOMES
SAFE ROUTES FOR SENIORS IN UNINCORPORATED LOS ANGELES COUNTY
Los Angeles County Department of Public Health
PLACE Program

From 2010 to 2030, LA's population of people over 65 is expected to nearly double, from 1.1 million to 2.1 million. Seniors in Los Angeles are overrepresented in fatal and serious pedestrian crash data.

Goals of Implementing Safe Routes For Seniors

The recommended course of action for the County of Los Angeles is to take both preemptive and preventative measures to provide viable alternatives, both physical and educational.

The County should follow the City of San Francisco's model.

Eleeza Babaknia April 2020
Randall Lewis Health Policy Fellowship

PBH Partners for Better Health | UNIVERSITY OF SOUTHERN CALIFORNIA MASTER OF PUBLIC HEALTH PROGRAM | COUNTY OF LOS ANGELES Public Health

Erica Rodriguez | California State University, San Bernardino

Breastfeeding and Maternal Child Health

Supporting mothers, creating healthy babies

Ericka Rodriguez, RN

World Health Organization: Baby friendly hospitals aim to support breastfeeding mothers and provided them with the education and support needed for exclusive breastfeeding.

American Academy of Pediatrics: Recommends exclusive breastfeeding for 6 months, and continuation of breastfeeding for one year or longer as desired.

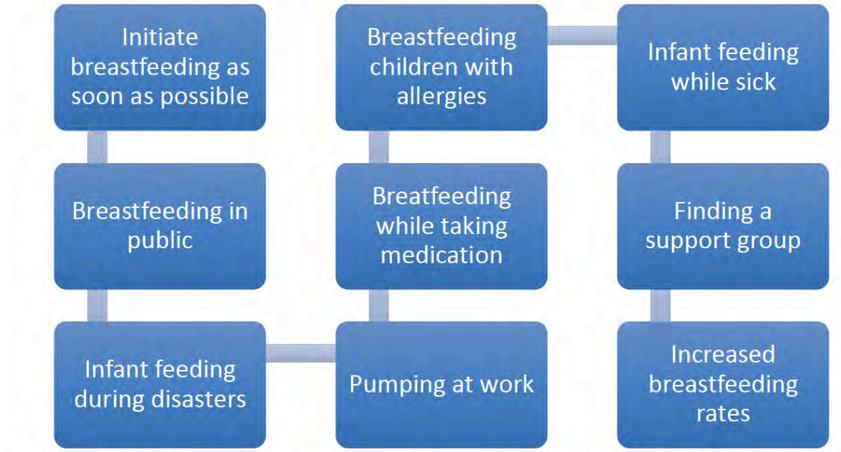
Center for Disease Control: Mothers offered breastfeeding support have higher rates of exclusively breastfeeding then those who do not receive support

- Research has shown that breastfeeding is recognized as the best source of nutrition for most infants. [1]
- There is a 36% reduction in sudden infant death syndrome (SIDS) among babies who breastfed compared to those who did not. [2]
- Breastfed infants are less likely to be obese in adolescence and adulthood. [2]
- Breastfed infants are less vulnerable to developing type 1 and type 2 diabetes. [2]
- Breastfed babies have a lower risk of milk allergy, atopic dermatitis, and wheezing early in life, if breastfed for at least 4 months. [2]
- Healthy People 2020, maternal, infant, and child health (MICH) objectives state; currently 33.6% of woman nationwide exclusively breastfeed at 3 months with a target goal of 46.2%. [3]

The Baby Friendly Hospital Initiative began in 1991, funded by the World Health Organization and United Nations Children's Fund. There are currently 95 baby friendly hospitals in the state of California, with 35 residing in Los Angeles County. These hospitals employ steps to create a supportive learning environment for new mothers. Low exclusive breastfeeding rates indicates the need for policy change, education, and support. Currently 8.3% of California's population does not have health insurance and 12.8% live in poverty. [4] The need for additional breastfeeding education and support in a hospital environment, with trained professionals, is evident.

PBH Partners for Better Health

CALIFORNIA STATE UNIVERSITY SAN BERNARDINO



- Providing new mothers with breastfeeding education on admission to labor and delivery can help increase breastfeeding initiation rates in hospitals and baby friendly hospitals alike.
- Promoting public breastfeeding policies will help new mothers feel safe and at ease while breastfeeding outside of home and private areas.
- Education on continuation of breastfeeding during disasters such as fires and earthquakes will ensure breastfeeding continuation during troubled times.
- Increasing awareness of infant food allergies will provide new mothers with education, support, and options to continue their breastfeeding journey.
- Providing education that allows new mothers to continue breastfeeding while taking prescribed medications will increase breastfeeding duration.
- Encouraging continuation of breastfeeding for the working mother will decrease cessation of breastfeeding.
- Addressing ways to keep baby safe while sick will reassure new mothers that breastfeeding while sick is possible if done safely.
- Attending a support group will help assure mothers that their ae ups and downs in every breastfeeding journey, having needs met will increase breastfeeding duration.
- Creating breastfeeding and maternal child health policies leads to increased staff education, leading to increased maternal support and increased breastfeeding rates

MotherToBaby
Medications & More During Pregnancy & Breastfeeding
Ask The Experts

References:

1. Centers for Disease Control and Prevention. Strategies to Prevent Obesity and Other Chronic Diseases: The CDC Guide to Strategies to Support Breastfeeding Mothers and Babies. Atlanta: U.S. Department of Health and Human Services; 2013.
2. American Academy of Pediatrics. (2020). Retrieved from https://www.aap.org/en- us/Pages/Default.aspx
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Hannah Petersen | Claremont Graduate University

Upland Unified School District

Hannah Petersen- Health Policy Fellow

CHECC & Farm to School

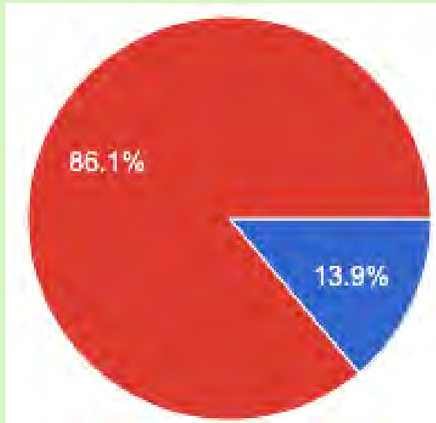
'Creating Healthy Environments in Cafeterias through Change - Schools' is a current project with the Upland Unified School District (UUSD) being implemented in three elementary schools for the 2019-2020 school year. Today, problems facing elementary school children is a high prevalence of anxiety associated with the school day and also a low consumption of fruits and vegetables at school throughout the lunch period. In particular, lunchtime during the school day is associated with higher levels of anxiety, social or separation, which can lead to children not eating enough throughout the day and not receiving essential nutrients that in turn can then lead to increased anxiety. Over **7%** of children aged 3-17 have some form of diagnosed anxiety that can lead to a loss of appetite.

Farm to School is another project with UUSD which enriches the connection communities have with fresh, healthy food and local food producers by changing food purchasing and education practices at schools and early care and education settings.

Uninviting, dark, transactional environment → **Increased levels of anxiety during the lunch period** → **Lowered consumption of essential nutrients through fruits and vegetables**

800 SURVEY RESPONSES

Prior to establishing the CHECC project we surveyed staff, teachers and students at 3 elementary schools to determine problem areas. With this data we developed CHECC. (First image based upon 511 student responses of the question, 'Does the cafeteria or lunchtime make you nervous?' (13.9% responded Yes)



Based upon evidence-based research and the schools survey responses we began the cafeteria makeovers. Crafted and put fruit and vegetable art, positive reinforcement posters and facts for students on how various fruits and vegetables nourish our bodies.
(Second image)

The Farm to School project within the Upland Unified School District aims to implement gardens and garden education in the 14 schools around the district. I was able to be part of the creation of 8 gardens and 2 garden clubs.
(Third image is of the Cabrillo Elementary school garden)

Contributing Randall Lewis Health Policy Fellow
Hannah Petersen, MPH
Contributing UUSD Personnel
Ksenia Glenn- Director of Nutrition Services
Cassidy Furnari- Farm to School Project Manager

Jennifer Corral | University of LaVerne

Buy to Pay: Impact Spending Helping Diverse Small Business

Jennifer Corral MHA Student
University of La Verne

Background

Initiatice for a Competative Inner City (ICIC) is a national nonprofit organization founded in 1994 by Michael Porter a Harvard Buisness School Professor. " ICIC's mission is to drive economic prosperity in America's under-resourced communities through private sector investments to create jobs, income and wealth for residents. Inner City Capital Connections (ICCC) is an Urban Buisness Anitiative Program of ICIC. Kaiser Permanente(KP) partnership with ICCC has a shared value of community good. ICCC's mission to reduce income disparities and improve lives by revitalizing low to moderate income economies. Which aligns to KP's mission of improving community health by adressing the social determinants that impact health-particularly in the areas where there are glaring economic and health disparities". I have obtained a position in which I support the planning of the 2020 cohorts.

Methods

- ICCC is a mini- MBA program in which **Research and Planning Development** is needed to analyse the buisness landscape in a city
- **Community Engadgement** is a soft launch also known as a **Kick-off Day i**n which KP Impact Spending, ICIC, community health and local community leadership discuss the program with stakeholders, eliciting recruitment for small diverse buisness.

Recruitment / Program Implementation is the beginning of the nomination process in which small buisnesses who meet the requiermens such as:

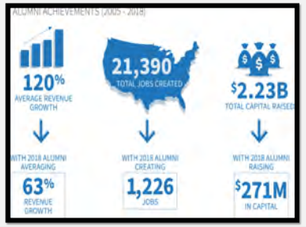
- Be an independent, for-profit/non-for profit proprietorship
- Have annual revenue of at least $500k
- Have more than 40% employees residing in economically distressed areas... etc

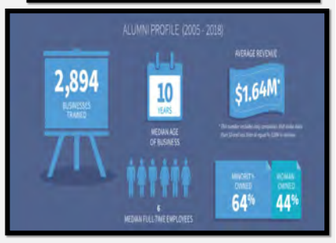
Meeting the following criterias small buisness can start their **application** process with ICCC to receive admission to **Training Day the mini MBA course** where small buisness owners are taught how to leverage capital, capacity, speak to panaels of debt lenders and equity investors, funding and other questions.

2020 ICCC Cohort's Market's where in the followinng Cities: Atlanta, Baltimore, Fresno, Honolulu, Inland Empire, Portland, Stockton, San Diego, Washington DC. Some of these marketplaces had a completed **Kick-off** day prior to COVID-19. Planning for these cohorts have been switched from in person conferences to virtual conferences. With some cohorts postponing their **Training Day to a later date. Results for 2019-2020 are to be dertmined due to COVID-19.**

Results

These ICCC/ KP cohorts yield in creating jobs in Inner Cities. With job creation in small diverse buisness, increases income in household areas residing in economically distressed areas. Therefore creating spend within communities, increasing household incomes, and gaining access to better healthcare.





Jessica Jaiyeola | Claremont Graduate University

Feasibility Study: Life Speak

Adapted by: Jessica Jaiyeola MPH, DrPH
RLHPF

IEHP
A Public Entity
Inland Empire Health Plan

Goal | Projects | Tasks

IEHP GOAL: To provide the IEHP community with a means to recieve information about wellness and manage their health

IEHP PROJECT: Create a community wellness app that promotes community engagement

FELLOW TASKS: Evaluate LifeSpeak to determine if they have the software and framework to accomplish the Goal.

LIFESPEAK

About LifeSpeak : LifeSpeak is a well-being digital platform with the primary focus of helping organizations promote the wellness of their employees. The platform's main goal is to support employees with help tools and skills, so that they can maintain their minds and bodies at work.

Results: LifeSpeak is a great platform to improve the wellness of IEHP employees. However, there are many aspects of an employee wellness program that Lifespeak does not touch.These aspects are important because the attributes of LifeSpeak will have to work in community settings in order to achieve the goal.

Jeffrey Massin | Claremont Graduate University

Telemedicine & the SCAG Region Amid the COVID-19 Pandemic
Current Efforts & Future Recommendations

Jeffrey Massin, MPH(c)

Reshaping Accessibility & Delivery

The SCAG Regions' 6 Counties (Los Angeles, Orange, San Bernardino, Ventura, Riverside, & Imperial) are home to large amounts of diversity. Age, gender, race/ethnicity, and built/natural environment are affluent between counties. This means that SCAG is able to study diverse enclaves of health outcomes/trends and develop proposals specific to these communities.

Every four years, SCAG releases regional transportation plans that are viewed as investments towards economic, environmental, and quality of life goals. As millions of people depend on transportation modes, it is important to integrate public health into discussions to address not only needs for transportation but needs of the SCAG communities..

Comparison of Health Focus Areas

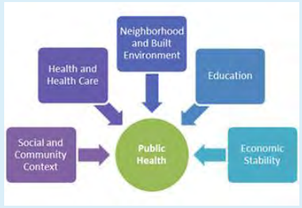


Figure 1. *Office of Disease Prevention & Health Promotion Social Determinants of Health (SDOH)*

1. Social and Community Context
2. Health and Health Care
3. Economic Stability
4. Education
5. Neighborhood and Built Environment.

Figure 2. *SCAG's Public Health Focus Areas*

1. Access to Essential Services
2. Affordable Housing
3. Air Quality
4. Climate Change
5. Economic Opportunity
6. Physical Activity
7. Transportation Safety

Examples of Efforts

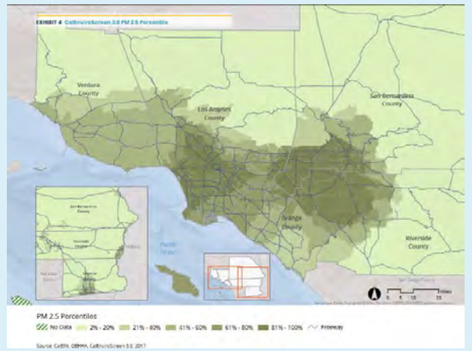


Figure 3. *PM 2.5 Percentiles*

Pollutants (PM & Ozone)
By identifying high areas of pollution, SCAG can gain insight on high priority areas for pollution and develop proposals and goals for these areas. Both maps can provide insight can also paint a picture of why these pollutants occur, how communities health is impacted, and possible solutions.

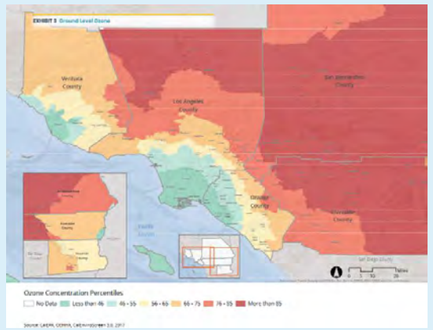


Figure 4. *Ozone Concentration Percentiles*

Other Examples of Surveillance/Research That Affect Public Health

- Housing Affordability
- Access to Mobility
- Access to Healthy Foods
- Climate Change
- Economic Opportunities

Recommendations

Continue harboring Collaboration & Engagement at the Regional Level

- Data Sharing (maps, demographics, analysis)
- Pursue more engagement/maintain relationships with stakeholders

Policy Support

- Pursue relationships with public health schools
- Expand fellowship opportunities for public health students
- Update/maintain access to public health data for the SCAG region

Support at the Regional Level

- Provide technical assistance (ie. technology based task)
- Reduce knowledge gaps in public health knowledge through informational pamphlets/trainings.
- Identify grant opportunities & relay them to city level teams.

May 2020

CITY OF RIALTO
HEALTHY COMMUNITIES INITATIVE

Achieving Equity Through Community Engagement

Healthy Eating and Active Living

IMPROVED HEALTH, IMPROVED LIFE, IMPROVED RELATIONSHIPS

Healthy Rialto was established in 2008, as a Healthy Communities Initiative designed to enrich and empower the lives of the people in the community. Specifically by providing innovative and proactive solutions to everyone that has the desire to get fit stay healthy and supporting safe and healthy environments where people live, eat, work, and play. Initiatives like Healthy Rialto work to create equity amongst those communities/populations to combat the overlying disparities by providing educational services, community events, and opportunities to enrich lives and experiences. With improved knowledge and resources these communities are empowered. Thereby creating community champions that work from within and a multi-generational impact to improving long-term health outcomes.

Rialto Certified Farmers' Market

EVERY WEDNESDAY 10 AM - 1 PM

The Rialto Certified Farmers' Market is dedicated to supporting farmers and community development projects designed to serve and address health related issues; such as food insecurity, food access, and poor nutrition giving residents an opportunity to buy fresh food at prices that are normally lower than supermarkets. In 2014, the Supplemental Nutritional Assistance Program (SNAP) / Electronic Benefit transfer (EBT) was implemented affording EBT cardholders the option to use their SNAP benefits to purchase fresh fruits and vegetables and as of June 2020, funded by the Ecology Center Market Match grant, all SNAP/EBT purchases will be matched dollar-for-dollar. Having the availability of SNAP/EBT at the Rialto Certified Farmers' Market allows the City of Rialto to join forces with California Department of Social Services providing fruits and vegetables to families looking for healthier food choices. Also in partnership with the Rialto Certified Farmers' Market the San Bernardino County Aging and Adult Services passes out $20.00 Senior Farmers' Market Nutrition Program (SFMNP) vouchers to seniors who are at least 60 years old and have household incomes of not more than 185% of the federal poverty income guidelines, as well as OmniTrans Bus Passes.

Demographics

Total Population
107,041

Median Household Income
54,962

Health Statistics
Obesity: 43.4%
Diabetes: 13.9%
Heart Disease: 4.4%
Physical Activity: 28.6%

Long-Term Goals

Sustained Economic Growth in the City of Rialto

Serving All Income Levels

Reducing the Prevalence of Obesity & Chronic Disease

Nourishing Communtiies with Affordable Health Food Options

EAT WELL, BE WELL Nutrition Class

EMPOWERING COMMUNITY CHAMPIONS

Funded by Kaiser Permanente and in collaboration with IHelpIE Senior Services, Healthy Rialto sponsored a nutrition/lifestyle education class for low-income families and seniors. Over the span of 6-weeks, the class emphasized Healthy Eating and Active Living awareness by providing educational tools, tips for improved dietary habits i.e. plant-based food diet and promotion of Kaiser's Healthy Plate towards reducing the prevalence of obesity and chronic disease such as diabetes, hypertension, and high cholesterol. Additional nutrition class topics included the benefits to reading the nutrition facts label, how to eat on a budget, emphasis on physical activity, establishing personal goals (short-term/long-term) towards individual behavior change, and promotion of locally available healthy food options at the Rialto Certified Farmers' Market.

EMPOWERED PEOPLE, EMPOWER PEOPLE

ACHIEVING SUSTAINABILITY

The social determinants of health encompass aspects, such as socioeconomic status, community environment, and access to resources, that impact our quality of life. The City of Rialto works to improve these disparities through community interventions such as the Healthy Eating and Active Living initiative, the Rialto Certified Farmers' Market, and the Eat Well Be Well Nutrition Class. Thereby, promoting community health, wellness, and wholeness through education, resources, and activities. Providing innovative and proactive solutions to to reduce disparity and increase equity amongst communities of all income levels.

INTERVENTION IMPACTS

Combat Poor Nutrition

Fight Against Food Insecurity

Improve Awareness & Develop Individual Behavior Change

Provide Accessible and Affordable Healthy Food Options

Cultivate Peer to Peer Encouragement

Empower Community Champions

Contributing Randall Lewis Health Policy Fellow
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Katrina Leong | Azusa Pacific University

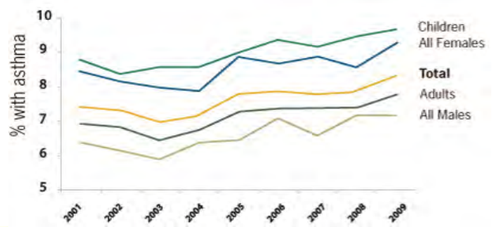
Health Policy and Air Pollution: An Application for a Pediatric Asthma Program in Southern California

Katrina Leong, FNP-C, PHN, Randall Lewis Health Policy Fellow, Azusa Pacific University
Preceptor: Teresa Dodd-Butera, PhD, RN/DABAT

Problem: Based on Healthy People 2020 - majority of asthma patients in America were not receiving appropriate asthma care based on the NHLBI National Asthma Education and Prevention Program asthma guidelines (USDHHS, 2020)

- Asthma is the *most common* chronic disease of childhood (Hay et al., 2014)
- Affects > 7 million children each year in US (CDC, 2011)
  - This number continues to grow despite current treatments (CDC, 2011)
- Asthma care in US has cost $272 million in one year (Pearson, Goates, Harrykissoon, & Miller, 2014)
- Other costs difficult to measure (Hay, Levin, Deterding, & Abzug, 2014)
  - Loss of childhood productivity due to missed school days
  - Loss of parent productivity due to lost work days

Figure 1. Despite effective treatments and interventions for asthma, rates of asthma in all ages continue to increase each year (CDC, 2011)



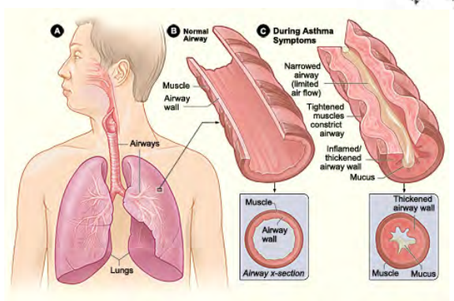


Figure 2. This image illustrates what happens in the lungs in an individual with asthma. The airways in the lungs become swollen, muscles become tight, and mucus build-up occurs. The airways are also very sensitive and easily react when you are exposed to your asthma trigger (Burns et al., 2017)

Purpose: The purpose of this project was to apply an evidence-based program and process for asthma management, considering environmental health policies and triggers, at a pediatric clinic in Los Angeles County. This project will address the following question: In a pediatric clinic, how does utilization of a gap and policy analysis promote evidence-based practice for asthma management over a three-month period of intervention with healthcare providers?

Individual: The immediate needs of the pediatric asthma patient are met to promote asthma control and improve quality of life through policy and protocol development and implementation in the clinic setting.

- The asthma policy and protocol project ensures that healthcare providers treat asthma patients based on proven and effective evidence for asthma management in order to improve asthma control and keep patients out of the hospital.

Community: Findings of policy and protocol are shared and presented to other providers and leaders in the community to influence and improve asthma care for asthmatic patients in neighboring communities.

- Information about common factors of asthma control such as seasonal infections and allergies, air quality, and cultural influences can benefit these neighboring asthma communities.

Systems: The impact of big picture issues such as respiratory infection control via vaccination during flu season or air quality concerns can be addressed from a large systems perspective.

- Change makers can carry this project forward and affect air quality and pollution policies that extend from the community to the state and national levels.

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Kristie Nguyen | Loma Linda University

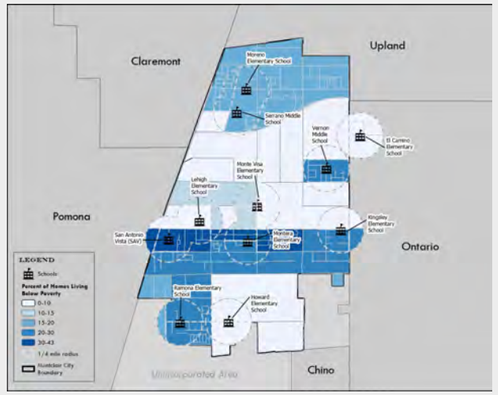
BUILDING A HEALTHY MONTCLAIR

June 2020

"THE PEOPLE ARE THE CITY"

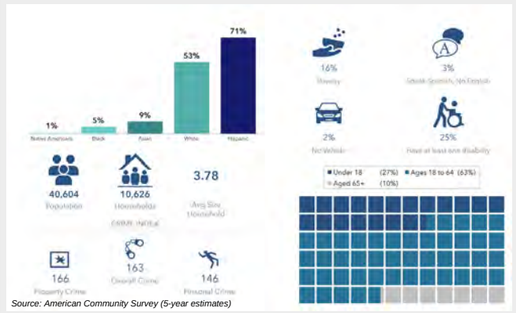
Active Transport Plan (ATP) and Safe Routes to School (SRTS) Plan

As part of a city-wide initiative to build a sustainable and healthy community, the City of Montclair received funding from the Southern California Association of Governments (SCAG) to increase safety and access to biking, walking, and transit. While both plans look to improve the alternative travel experience, the ATP focuses on initiatives for the city as a whole and the SRTS Plan focuses on neighborhoods in close proximity of schools.



Demographic analysis: evaluating socio-economic conditions to help identify needs of the community

Consideration for disadvantaged groups is important to ensuring equitable built improvements. Lower income and minority groups in California face disproportionate challenges from inadequate transportation environments. Though they are more likely to walk or bike, they are less likely to have safe streets to travel on.



Source: American Community Survey (5-year estimates)

Data Collection: Oct 2019 - Feb 2020

With assistance from environmental consulting company, KOA Corporation, the City conducted a series of activities including community workshops, walking safety assessments, and surveys. This provided opportunities for community members to voice ideas or concerns they had regarding their commute experience.

Upon evaluation of travel patterns, safety hazards, and feedback from the community, recommendations are made towards engineering infrastructural improvements and programs that educate and encourage the community.

Technical Advisory Committee Meeting (Feb 2020): Reviewing transportation proposals and alternatives

Education and encouragement activities teach and inspire community to safely interact with the built environment

Montclair Afterschool Program (MAP) Artshow

At an annual community event showcasing K-8 student artwork, a traffic safety booth was present to encourage and educate students on pedestrian and biking safety. Scenario cards aided in presentation.

Montclair Little League Opening Day

At the opening of Montclair's baseball little league, City staff engaged with the community to promote safe pedestrian practices. Flyers with safety tips and upcoming events were disseminated

MacArthur Park Playground Build

In partnership with KABOOM!, Krispy Kreme, and the City, volunteers worked together to build a community playground.

The Human Services Department coordinates a wide variety of activities, services and programs benefiting City residents. Recreational programs for residents of all ages, professional medical services, health education, early childhood education, after-school programs, and senior citizen programs including daily meal service

Monrclair to College (MTC)
A college readiness program offered to Montclair High School students which provides students with paid tuition, a counselor, books, and a car pass for two years at Chaffey College.

Montclair After School Program (MAP)
An afterschool program for 1st-8th grade students, offering academic assistance (help with homework), physical education, and enrichment programs.

Senior Center
The senior center offers educational, social, and recreational programs to senior citizens. As a nutrition site, hot lunches are served during the week and birthday parties celebrated monthly.

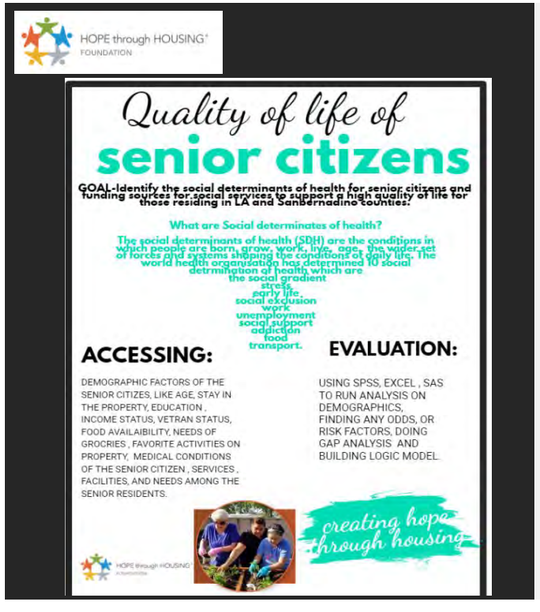
Montclair Medical Clinic provides treatment and preventive medical care to individuals who may have no form of health coverage for low cost, sliding scale fees based on income and family size

Monclair Community Garden
A 28-plot garden rentable by residents on an annual basis. The garden is meant to be a place to engage and educate the community through farming nutritious fresh, food

Monclair Fruit Park
Open and free to the community, the fruit park is meant for residents to pick and enjoy as fruit ripen.

by Kristie Nguyen, Loma Linda University - School of Public Health

Manisa Bhuyan | Loma Linda University



LOMA LINDA UNIVERSITY
School of Public Health

Social determinates of health found to be a major factor which significantly impact the life of senior citizens. According to a study Housing accessibility for senior citizens is also affected by environment barriers

By using enabler instrument the environmental barrier were assessed. Senior population being the most venerable population I got a chance to analyze the needs and requirement of the them across various properties.

Collaborating with all the services coordinator among various properties we conducted surveys for 3- 4months and access the needs and requirements . The purpose of our project was to determine if there are any needs and requirements by the senior residents which could be fulfilled by Hope Through Housing organization.

HOPE through HOUSING
FOUNDATION

The most common trends in the need's assessment were , need for Grocery assistance , need of proper transportation, need of monthly grocery replenishment and conducting their most famous games or activity like Bingo.

There is a need of transportation and grocery assistance services among the seniors which would require hope through organization to put more focus. May be finding a way out to give discount coupons for Uber or Lyft would be beneficial for the senior residents. The most household requirement by the residents was toilet paper, napkins , shampoo. While conducting different events by HTH across the properties, all the above items could be given to residents as gifts rather than giving them stuffs which they might not get benefits from.

The most favorite activities by the residents was walking , HTH could plan a walking activity daily in their properties where all the residents could go for a walk together.

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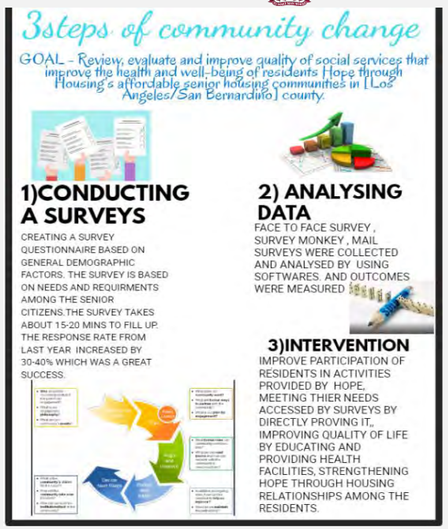


Manisa Bhuyan, June 2020

Improving Population Health in Riverside County by Mariana Osorio

Riverside County is comprised of a diverse community, all of whom have various barriers to receiving quality care which can exacerbate social determinants of health.

Did you know that compared to its neighboring county (Los Angeles County), where almost 28% of residents are considered obese, **32%** of the total population in Riverside County classify as obese? This is because the average body mass index (BMI) of Riverside County is of **30** or higher. Keep in mind that a BMI over 25 is considered overweight.

As health leaders have proved, lack of physical activity and infrequent consumption of fruits and vegetables increases the likelihood of developing heart disease issues, suffering from a stroke, or getting diagnosed with type-2 diabetes.

With this in mind, Riverside University Health System – Public Health has developed Healthy Communities Element, with the aim of addressing the intersection of public health and city/urban planning. This includes focusing n issues such as transportation and active living, access to nutritious foods, access to health care, mental health, quality of life, and environmental health.

SCHOOL OF
COMMUNITY & GLOBAL HEALTH
Claremont Graduate University

pbh Partners for Better Health
RANDALL LEWIS HEALTH & POLICY FELLOWSHIP

There have been **3** major initiatives undertaken to bridge the gap between public health and city planning:

1. The SB1000 Forum and Roundtable, where environmental justice and public health stakeholders met to collaborate on ways to implement and improve regional implementations of SB1000, a policy that requires counties and cities in California to address environmental health concerns and implement environmental justice ideals into their city planning objectives.
2. The preparation and publishing of the HCN Connect Newsletter on a monthly basis
3. The creation and publication of profiles on all 28 Riverside County cities based on various health indices

The dissemination of city profile fact sheets/ infographics would be a good way for stakeholders and residents of these cities to understand whether their cities are in good health standing or if residents are experiencing poor health outcomes.

These infographics have the potential to impact city policies if taken to a city official and would be crucial in justifying future public health initiatives within Riverside County.

Breaking down the data will allow the public health department to tailor their programs to the needs within their communities and implement innovative strategies for residents in various geographical areas shown in poor health.

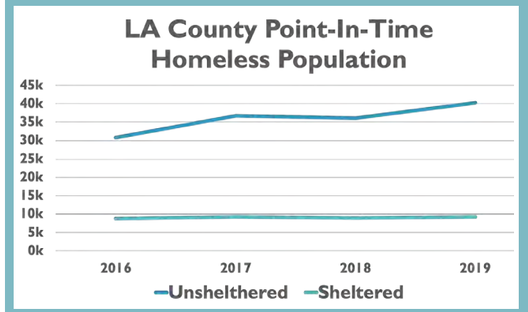
PROVIDENCE ST. JOSEPH HEALTH

Megan Fuelling | Health Policy Fellow

SB 1152 + PSJH

HOMELESSNESS IN LA COUNTY

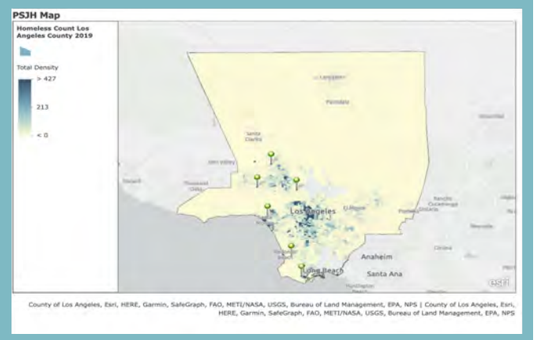
In 2018, the Los Angeles Homeless Services Authority's (LAHSA) point-in-time count of those experiencing homelessness in Los Angeles County totaled 52,765. During 2018, 21,631 individuals were placed into housing while 27,080 were able to get housing on their own (LAHSA). However, an estimated 54,882 individuals became homeless. 2019's point-in-time count revealed a 12% in those experiencing homelessness for a total of 58,936. 36,165 of these individuals reside in the City of Los Angeles (the City), which experienced a 16% increase during the same time period (LAHSA).



Reference:
Los Angeles Homeless Services Authority. (n.d.). 2019 Homeless Count by Community/City. Retrieved from https://www.lahsa.org/data?id=13-2019-homeless-count-by-community-city

CALIFORNIA SENATE BILL 1152

California Senate Bill 1152 (SB 1152) came into effect in July 2019. The purpose of the bill is to ensure those experiencing homelessness are prepared to return to the community by connecting them with treatment, shelter, community resources, or other support services. The bill required hospitals to create documentation of providing these services to ensure compliance.



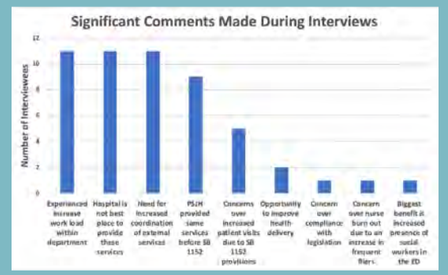
PSJH

PSJH has six locations in LA County, and thus a vested interested in making sure that they are efficiently implementing SB 1152. In addition, their Catholic-based values create an agenda focused on caring for the disenfranchised populations, such as LA County's homeless.

EVALUATING PSJH + SB 1152

Internal stakeholders from the six PSJH locations and the Southern California Region were interviewed for qualitative data collection. Patient discharge logs were examined for quantiative data collection.

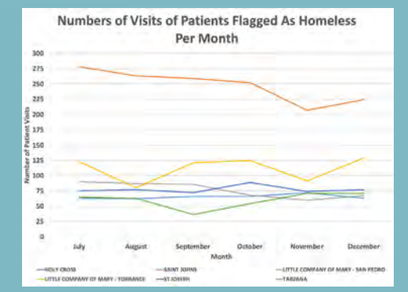
INTERVIEWS



Stakeholders were mainly concern with how effective the legislation can be without a mandatory increase in external services, such as recooperative care shelters, and associated coordination of these services.

PATIENT VISITS

Despite caregivers' concerns that SB 1152 would cause an increase in patient visits, this was not observed in the discharge logs.



RECOMMENDATIONS

The homeless population is expected to continue increasing. PSJH therefore should leverage the required documentation to improve their ability of tracking the health of this population. PSJH should work with caregivers to ensure that the increased workload from documentation and providing the required resources does not create undue stress.

Contributing Randal Lewis Health Policy Fellow: Megan Fuelling, MPH
Contributing PSJH Personnel: Megan McAninch-Jones, MBA, M.Sc., Josh Mendez, and Catherine Romberger, MPH

April 15, 2020

CITY OF PERRIS

Building Healthy Communities through Active Transportation

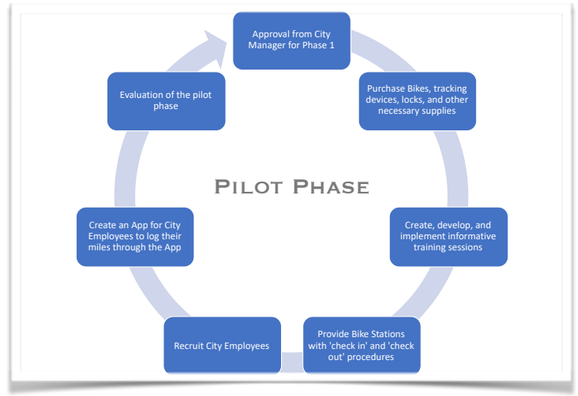
Written by: Michelle Deterville

Perris is a growing community with a population of 79,133, with a consistent growth of 15.4% since 2010. The City of Perris is committed to reducing the city's carbon footprint through the promotion of active transportation. This will create a healthier community while protecting the city's environment and air quality.

There are 2 phases to this program. The first pilot phase was approved by the City Manager on September 2019 and was funded through the CDBG and the AQMD Grants. The pilot phase is first being implemented to city employees. Once this phase is successful, it will expand to city residents and visitors.

Randall Lewis Health Policy Fellowship

For more information email: memartinez@cityofperris.org



Pilot Phase

There are 98 employees that currently work for the city of Perris. To date, there are 49 employees that have completed and utilize the bike program. Employees can use these bikes for different reasons. For example: to go pick up coffee at the local coffee shop, pick up lunch at a nearby restaurant, attend meetings at city hall grounds, or even just to get some fresh air.

Measurements of Success

One way of determining the success of this program is through the amount of individuals who sign up for the program. This measurement of success is determined by having 90% of city employees actively riding and involved in the program. Another measure of success would include consistent high demand of bike usage and employees maintaining a log of their miles. During the use of all bikes, mileage will be logged via the mobile GEAR mobile app. The miles will be submitted quarterly to fulfill the necessary submissions to the AQMD Grant. As a positive reinforcement tool, employees will have the opportunity to receive rewards for their consistent use of the bikes. This ranges from a helmet, glasses, or gloves.

Future Adjustments to the Program

Phase 2 will extend this program out to the residents and visitors of Perris in which GEAR will be adjusted to Getting Everyone Actively Riding instead of only to Employees. Another adjustment will be adding bike lanes and bike stations throughout the city to make riding safer for the community through the reward of the CDBG Grant. Additionally, the city will also add bike racks and bike repair stations.

Randall Lewis Health Policy Fellowship

For more information email: memartinez@cityofperris.org

Naomie Olivos | Loma Linda University

Creating Healthy Communities
Naomie Olivos
Health Policy Fellow

Build Healthy Places Network

Background

Policymakers have been concerned about improving living conditions in the US. Debates about how to efficiently address the issue have emphasized the importance of direct investment in communities to improve conditions in troubled neighborhoods, while others have expanded on mobility strategies, facilitating the movement of the poor out of the worse areas and into "neighborhoods of opportunity" in other areas. However, research has shown the benefits of a person's community and how it can influence one's future. Furthermore, extensive research has demonstrated that poverty and its resultant, such as homelessness, lack of jobs, lack of a quality education, are barriers that prevent building a thriving community. Further, research reveals that individuals from low-income families who grow up in communities with adequate housing, community facilities, and job opportunities have improved economic outcomes.

City of San Bernardino

Aim of Research

The aim of this project is to revitalize low-and moderate-income communities in the City of San Bernardino; Arrowhead Grove and Eastpointe, and aid residents and small business owners to help communities thrive.

Eastpointe & Arrowhead Grove

BHPN Mission

Our mission is to shift the way organizations work across the health, community development, and finance sectors to collectively advance equity, reduce poverty, and improve health in neighborhoods across the United States.

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LOMA LINDA UNIVERSITY School of Public Health

Creating Healthy Communities
Naomie Olivos
Health Policy Fellow

Build Healthy Places Network

Project Overview

1. Gather and assess existing reports, initiatives and key players in the City of San Bernardino
2. To help create a data-driven process that thinks about neighborhood stabilization & anticipates neighborhood change
3. Gather current data and demographics on the City of San Bernardino through various data sources and online mapping, such as PolicyMap.
4. Create a pipeline of potential projects for PRO Neighborhoods effort

Partnerships for Raising Opportunity in Neighborhoods

Build Healthy Places Network (BHPN) has been awarded the PRO Neighborhoods planning grant from JPMorgan Chase. This planning grant has allowed BHPN to work on revitalizing low-and moderate-income communities in the City of San Bernardino and aid residents and small business owners to help communities thrive.

Additionally, BHPN has partnered with Nonprofit Finance Fund (NFF) and National Community Renaissance (National CORE) to support locally driven solutions and address key drivers of inequality and increase investments in housing, community facilities, and small businesses.

Principles for Building Healthy and Prosperous Communities

Principle 1: Collaborate with the community

Principle 2: Embed equity

Principle 3: Mobilize across sectors

Principle 4: Increase prosperity to improve health

Principle 5: Commit over the long term

Limitations

Lack of funding, rising land costs, zoning laws, neighborhood resistance, and legal issues which will hinder transitioning vacant land to permanent housing.

Findings/Outcomes

Increasing investments in housing, community facilities, and small businesses, will serve as key components to address persistent community development challenges, as an effective strategy to improve the health of San Bernardino residents in Eastpointe and Arrowhead Grove by providing them with housing stability and a thriving community.

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LOMA LINDA UNIVERSITY School of Public Health

Nahyaab Shaikh

Randall Lewis Health Policy Fellowship

Adventist Health White Memorial

Garden-Based Nutrition for Elementary School Students in Downtown Los Angeles

Introduction

Adventist Health White Memorial's mission is "living God's love by inspiring health, wholeness and hope". Their vision includes improving the physical, mental and spiritual health of the community, enhancing interactions with our patients, providers and employees, managing people's health to help make care more affordable. They provide many services a few of which include cancer care and rehabilitation services. I am working with the community engagement department of AHWM to create and implement a program to increase health outcomes for the community by engaging the youth to learn about and grow their own food.

Methods

The task was to implement a garden-based nutrition workshop for elementary school students that lived near the community garden that was overseen by AHWM. The goal of the project was to promote healthy eating in downtown LA through cultivating produce from community gardens and at home. The objective was to create a lesson plan to get these students to engage with growing their own produce and to assess results to be able to use in other communities. A few activities to promote the objective was to get these students to participate in seeing the community garden, learn about the five different food groups and to taste fruits and vegetables grown in the garden.

Results

If this lesson plan garnered success, the workshop could be utilized in other communities in downtown Los Angeles. Many families in DTLA are underprivileged, and as a result often are forced into eating cheap and unhealthy foods. Using the open space in communities and outside homes to produce food can not only increase health through healthy eating, it can also increase their livelihood by allowing them to save money on food. They can use the money they save on food and healthcare to put into use other ways to promote their own and their family's livelihood.

Conclusion

Overall this project has great potential to make significant positive change in the lives of those who live in DTLA. Not only can it provide healthier eating and increased savings (from buying less produce and health costs) it also allows children an outlet to engage with the environment and stimulate their mind with developing useful gardening skills. This community needs nutritional health and this workshop is addressing needs while allowing the community to utilize assets to improve health. Collaborating with others and assessing community needs are at the forefront of this project to promote healthy and happy communities.

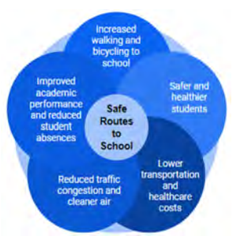
Southern California Association of Governments

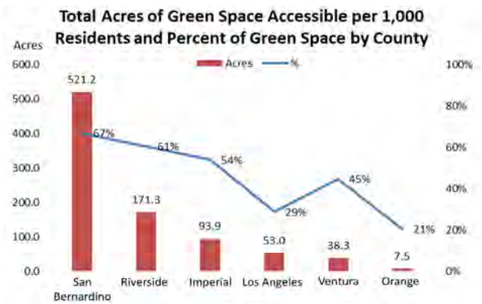
Healthier and Safer Living in Regional Planning: Safe Routes to School and Safe Routes to Parks in SCAG

Oscar Yeh April, 2020

Background

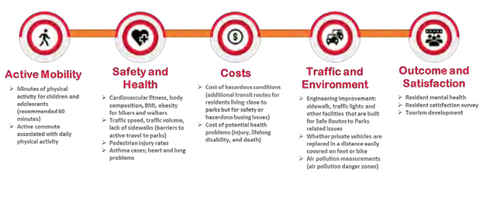
This research aims to promote a public health perspective in regional planning; to explore how SCAG can further support jurisdictions in developing Safe Routes to School/Parks Programs; to support local jurisdictions as they take steps to develop healthy and equitable communities; and to improve access to essential services, transportation safety, and physical health.





Existing Condition

The region is home to nearly four million public and private school K-12 students, representing about 21 percent of the region's population. The travel demands of these students have significant impacts on the regional transportation system. The SCAG region is also home to many parks, including protected open space, national parks, local parks, national forests and, state and federal open spaces.



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Southern California Association of Governments

Healthier and Safer Living in Regional Planning: Safe Routes to School and Safe Routes to Parks in SCAG

Safe Routes to School

Safe Routes to School Strategies

(1) Develop publicly available SRTS tracking tools; (2) Develop an overarching SCAG Safety Strategic Plan that includes SRTS components; (3) Provide more funding to develop SRTS Plans and High Injury Network; (4) Share best practices via stakeholder forums/working groups; (5) Continue to offer SCAG's Go Human resources; (6) Strategize with locals to sustain their programs; (7) Provide technical assistance for developing active transportation or SRTS plans; (8) Incorporate SRTS infrastructure, educational, and encouragement strategies in the long-range plan, Connect SoCal.

UCLA Fielding School of Public Health

Safe Routes to Parks

Active Mobility	Minutes of physical activity for children and adolescents; Active commute associated with daily physical activity.
Safety and Health	Cardiovascular fitness, body composition, BMI, obesity for bikers and walkers; Traffic speed, traffic volume, lack of sidewalks (barriers to active travel to parks); Pedestrian injury rates; Asthma cases; heart and lung problems.
Costs	Cost of hazardous conditions; Cost of potential health problems.
Traffic and Environment	Engineering improvement; Whether private vehicles are replaced in a distance easily covered on foot or bike; Air pollution measurements.
Outcome and Satisfaction	Resident mental health; Resident satisfaction survey; Tourism development.

Safe Routes to Parks Strategies

(1) Develop publicly available SRTP tracking tools for programs; (2) Develop an overarching SCAG Safety Strategic Plan that includes SRTP considerations; (3) Provide technical assistance to develop SRTP Plans and High Injury Networks that consider serious injuries and fatalities near parks/open space; (4) Share SRTP best practices and the use of prioritization criteria and methodologies; (5) Hold Safe Routes to Parks stakeholder forums or working groups; (6) Strategize with locals on ways to sustain their programs.

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SAFER WAYS TO AGE IN PLACE: A SAFE ROUTES FOR SENIORS PROGRAM IN THE SOUTHERN CALIFORNIA REGION

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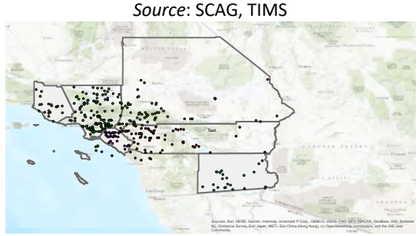
SCAG is the largest Metropolitan Planning Organization (MPO) in the nation, both in terms of population and geographic size. The SCAG region includes more than 19 million people spread over six diverse urban, suburban, and rural counties (Imperial, Los Angeles, Orange, Riverside, San Bernardino, and Ventura) and 191 cities in an area covering more than 38,000 square miles.

Southern California's most precious resource is its people. In order to understand how changes will impact them, Connect SoCal, SCAG's the Regional Transportation Plan and Sustainable Communities Strategy, projects growth in employment, population, and households at the region, county, city, town, and neighborhood levels. By 2045, the horizon year of the plan, roughly 20 percent of the population, or one in five people, will be 65 or older. The aging of the region's population will pose new public health challenges, particularly since many seniors are not relocating from California when they retire. In 2017 less than 1% of the senior population in California, or about 20,000 people, chose to retire to other states.

Figure 2: Map of traffic collisions in the SCAG region resulting in fatal or severe injuries to persons over the age of 65
Source: SCAG, TIMS



With an aging population comes an increased need to plan for walkable and compact urban environments to support seniors choosing to age in place. Walkability is a key component in the retention of positive health outcomes and allowing seniors to age in place. Walking improves both physical and mental condition in the aging, allows for access to important goods and services, and can even help seniors remain socially and civically active.

Figure 2: Population Pyramids, SCAG Region, 2016 and 2045
Source: SCAG CA Department of Finance

A Safe Routes for Seniors Program targets pedestrian improvements in areas with large numbers of senior residents to improve safety and walkability in these communities. These programs can help improve older adult access to essential services, transportation safety, and physical health. Safe Routes for Seniors Programs engage seniors in areas where they live, and work with them via workshops, forums, and community walks to understand their needs and concerns for moving safely about their communities. These programs often include an educational component, where seniors are educated about pedestrian safety. Through outreach and research, Safe Routes for Seniors Program coordinators and planners can assemble plans that identify areas of importance and concern, and locations for potential future capital improvements.

Currently the major mode of transportation for older adults is automobiles, with three of every four seniors in the state having a driver's license. Currently California law requires that anyone over the age of 70 renew their driver's license in person. The CDC reports that older drivers have a higher crash rate deaths than middle-aged drivers primarily because of their increased vulnerability in a crash. Safe Routes for Seniors Programs aim to make communities more pedestrian friendly, allowing seniors to use more active modes of transportation and decreasing the need for them to be in cars.

Safe Routes for Seniors Programs are a relatively new and have only recently been implemented. From the evaluation of programs that are currently existing or have existed previously, interviews, and literature reviews, the following best practices were identified that could be incorporated into future Safe Routes for Seniors Programs.

Recommendations: SCAG Level

1. Create a centralized data resource for relevant senior data, including areas with high concentrations of senior residents, senior housing, senior trip generators, and crashes involving seniors.
2. Develop guidelines for an 'Age-Friendly' community and designations that can be awarded to communities for their efforts.
3. Establish an Aging or Safe Routes for Seniors working group or task force that meets regularly to discuss best practices, new research, and current efforts.
4. Provide funding for local jurisdictions to develop Safe Routes for Seniors Plans or programmatic activities (e.g., Go Human-related pop up installations or outreach to seniors).
5. Update the High Injury Network to take into account crashes with seniors (either a separate network or heavier weighting for crashes involving seniors on the existing network).
6. Incorporate Safe Routes for Seniors infrastructure changes, strategies, and outreach into the long-range plan, Connect So-Cal.

Recommendations: County and City Level

1. Identify relevant senior data, including areas with high concentrations of senior residents, senior housing, senior trip generators, and crashes involving seniors.
2. Conduct needs-assessments, walk audits, and data collection to identify the areas of highest need in the community. Using both quantitative data, such as crash statistics and population densities, as well as qualitative data, such as Strengths, Weaknesses, Opportunities, and Threats (SWOT) analysis and interviews with community members and health professionals, identify problem spots in the community.
3. Develop local stakeholder networks, including local senior groups, to advocate for changes on behalf of the seniors in the area.
4. Develop Safe Routes for Seniors Plans or incorporate seniors specifically as a vulnerable population into existing or future safety strategic plans.
5. Participate in region-wide Safe Routes for Seniors working group or best practices forum.

INLAND EMPIRE ECONOMIC PARTNERSHIP

Tanvi Reddy - Randall Lewis Health Policy Fellow

INTRODUCTION

As the Inland Empire continues to evolve with regards to its economy and population, the patient care of residents must also be met. However, there seems to be a reduced rate of development when it comes to health care providers and their ability to match the rapid development within the region.

THE STATISTICS

Health care within the Inland Empire is the highest source of major growth according to the 2018 occupational pay level data available through the EDD, therefore matching the rapid development in the inland region is imperative in reducing restricted access to health care.

SOME FACTS

Given the forecast estimations of the population and economic growth within the region, actions must be taken in order to fulfill or bridge the potential and existing gap between healthcare providers and patients. To challenge this issue head-on, a grassroots level approach is best.

Population growth, one of the key promoters for the demand for healthcare is estimated to grow from 4.59 million people to 4.92 million people between the years 2018 – 2023

This demand would require construction of hospitals, clinics and urgent care clinics. The follow up will be met with the increased demand for essential employees. Consequently, these employees would acquire residence within the region, promoting further growth in development as well as a rise in population.

HEALTHCARE PIPELINE PROGRAMS SURVEY

For the Inland Empire Region

BRIDGING THE GAP

In order to address the gaps in education and lack of higher career placement within the regional empire, understanding the reach of pathway/pipeline programs was important. Adding more students to these programs could help breach the gap between healthcare providers and those in need of healthcare.

Initiation of a survey attempted to address all the pipeline and pathway programs within the Inland Empire from K-12, community colleges, four-year programs as well as medical schools.

SURVEY ASPECTS

Sections included but were not limited to:

- target populations
- eligibility requirements
- student recruitment
- enrollment periods offered
- duration of the course
- requirements to qualify
- costs (if any)
- housing (if avalibale)
- maximum number of students enrolled annually
- the number of applications received or accepted
- preferred or required outcomes from students

RECCOMENDATIONS

Due to low survey response, IEEP should work closely with organizations that have already researched pipeline programs in order to help promote growth at the grassroots level and to gain deeper engagement in present programs

A follow-up survey for schools and colleges that offer programs should be conducted to map the growth and progression of pipeline programs in health care related fields.

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