

**2016**

# El Dorado County Community Health Assessment



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# Welcome Letter

El Dorado County ranked ninth healthiest among counties in California in the 2016 County Health Rankings annual report by the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation. Our County received high marks for its quality of life and positive social and economic factors, such as educational opportunities, decreased unemployment and a low percentage of children in poverty. While we celebrate our successes, we must also look for opportunities to build a healthier community and address health indicators that negatively impact our residents.

More than 900 El Dorado County residents participated in the recent Community Health Survey to create a vivid community profile and give a voice to the residents we have the privilege to serve. As the El Dorado County Health & Human Services Agency moves towards an integrated approach to services, this information will provide a framework to guide our work.

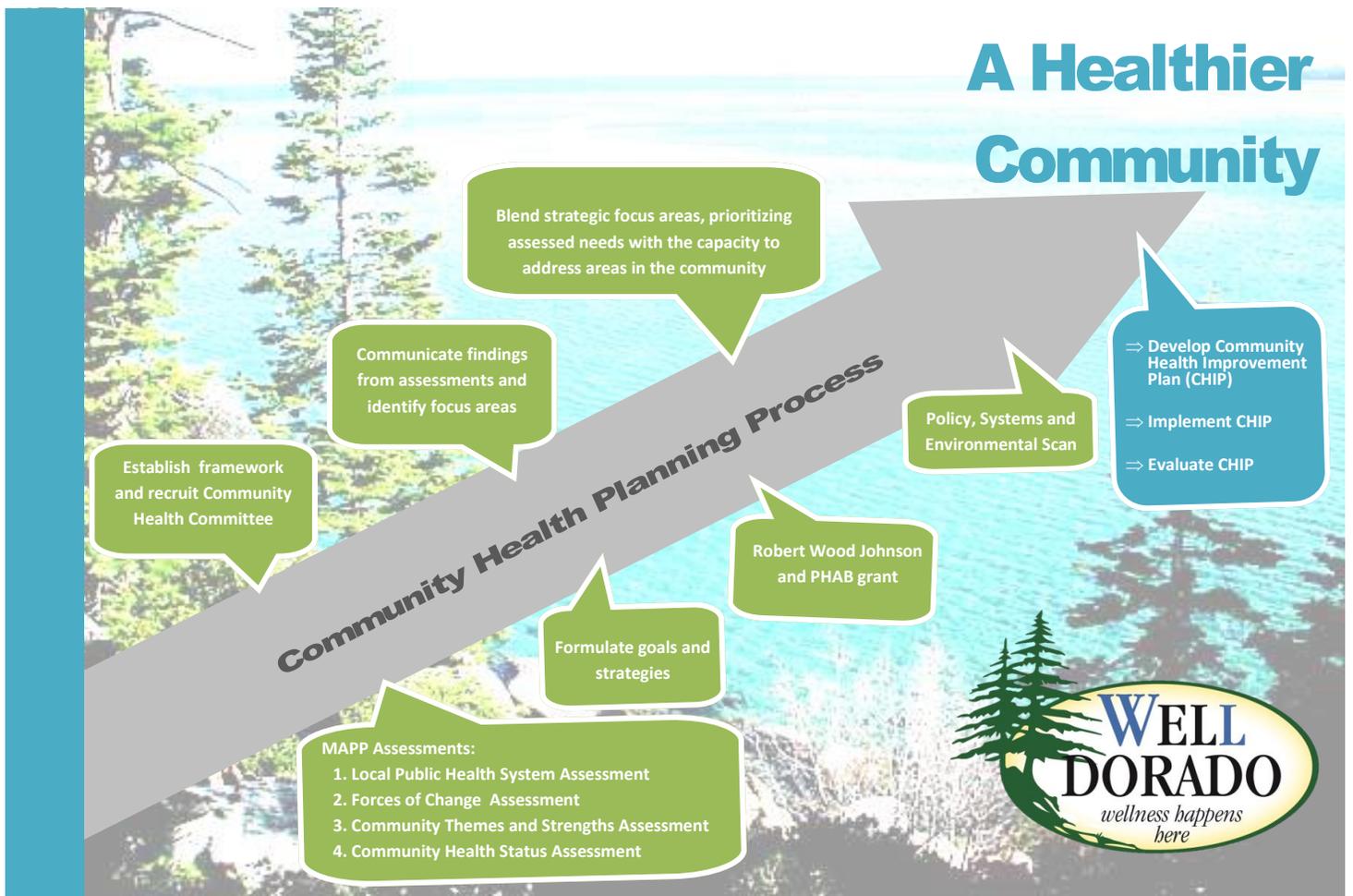
Many individuals and community partners contributed to the Community Health Assessment Process. They offered their commitment, knowledge and played a vital role in the creation of the Community Health Assessment, as well as the development of the Community Health Improvement Plan. It will take all of us doing our parts to transform our community and improve the health and quality of life of the residents of El Dorado County.



**Nancy Williams, MD, MPH**  
Public Health Officer  
El Dorado County Health and Human Services Agency



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# Background

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In 2015, the El Dorado County Health and Human Services Agency – Public Health initiated an 18-month Community Health Assessment process to identify the most pressing health issues facing El Dorado County residents and to commit to a common set of strategies to improve the residents' health and well-being. Over the past year, a dedicated team of community partners and subject matter experts met to conduct and discuss the results of our Community Health Assessment, as well as to determine areas of focus that will guide our program work over the next five years. The four focus areas identified as top priorities in El Dorado County include: *Active Living*, *Healthy Eating*, *Access to Health Services* and *Behavioral Health* (FIGURE 1). The focus areas serve as the foundation of our community health improvement process to develop and implement strategies for action and establish accountability in order to measure health improvement. These strategies will be outlined in our Community Health Improvement Plan (CHIP) which will be completed in 2017.



FIGURE 1: **Community Health Focus Areas**  
EL DORADO COUNTY, 2016-2020

The Community Health Planning process yields two distinct, but connected products:

- Community Health Assessment (CHA)
- Community Health Improvement Plan (CHIP)

## Community Health Assessment (CHA)

The CHA is a compilation of new and existing quantitative and qualitative data sources that are woven together to provide a comprehensive picture of the health of El Dorado County residents.

## Community Health Improvement Plan (CHIP)

The Community Health Improvement Plan (CHIP) is an action-oriented plan for addressing the most significant issues identified in the CHA, thereby improving the health and well-being of El Dorado County residents.

The combined CHA and CHIP aim to establish ownership and accountability to ensure coordinated, measurable health improvement throughout the County, with all agencies and organizations working together toward a collective impact.



FIGURE 2: **Healthy People 2020 Leading Health Indicators**  
Centers for Disease Control and Prevention (CDC), 2016

## Measuring Key Health Factors

Communities commonly measure their health against statewide averages and national objectives such as “Healthy People 2020” (FIGURE 2). “Healthy People 2020” provides a preventive framework for communities in the United States. It is a comprehensive set of key disease prevention and health promotion objectives. The health objectives and targets allow communities to assess their health status and build an agenda for community health improvement.

## National Public Health Accreditation

It is important to note that in addition to the goal of aligning and leveraging resources, initiatives and programming to improve health, the CHA and CHIP are also required prerequisites for the pursuit of National Public Health Accreditation. With accreditation status, El Dorado County Public Health will demonstrate increased accountability and credibility to the public, funders, elected officials and other community partners. Accreditation is governed by the Public Health Accreditation Board (PHAB).

# County Profile

El Dorado County is located in the Sierra Nevada foothills and mountains, bordered by Amador, Alpine, Placer and Sacramento counties in California and by Douglas County in Nevada. The population of El Dorado County has grown as the Greater Sacramento area has expanded into the region.

A total of 185,441 people live in the 1,707 square miles in El Dorado County (Welldorado.org, 2016). The population density for this area, estimated at 107.8 persons per square mile, is less than the population density of California, which is estimated at 237.38 persons per square mile.

Eighty-two percent of El Dorado County’s population resides in unincorporated areas of the County. The cities of Placerville and South Lake Tahoe are the only two incorporated cities within the County.

## Population Overview

Nearly 35% of El Dorado County is considered rural, with approximately 33% of the County’s population residing toward the western border of the County in the El Dorado Hills and Cameron Park communities. The Tahoe Basin, on the eastern border of the County, is the second most populated center in the County. Vast areas of rural land and National Forest are found between these two population centers. The rural nature of many unincorporated areas of the County can often times result in challenges to obtaining health services (e.g. transportation to services, outreach to residents, and public awareness relative to available services).

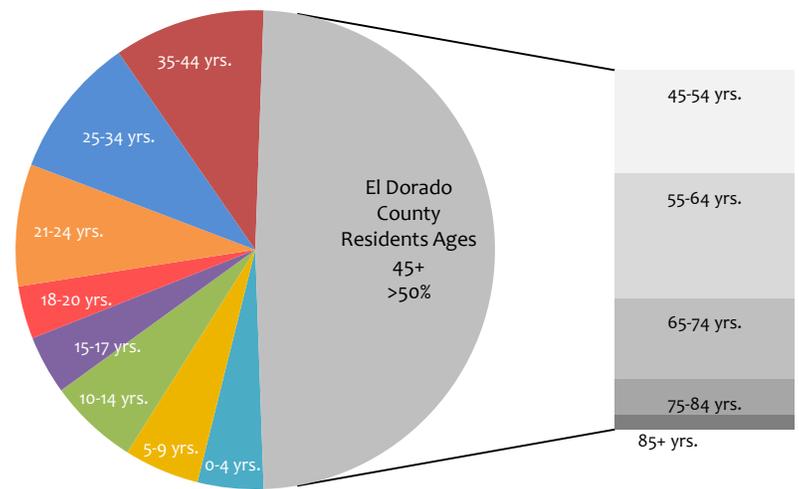


FIGURE 3: **Population by Age**  
EL DORADO COUNTY, 2016

The population of El Dorado County is aging at a faster rate than the State of California as a whole. Just over 50% of residents in El Dorado County are over the age of 45 (FIGURE 3). The largest age group in El Dorado County is the 55-64 range with a median age of 45.5 years, approximately ten years older than the median age of residents in California (Welldorado.org, 2016). Although its overall population growth has been relatively modest, El Dorado County’s senior population has risen at a faster rate than the State’s. This faster growth means there are fewer adults of prime working age. Household size was also of interest and may speak to the aging population, with one or two person households comprising more than 60% of households in the County (FIGURE 4).

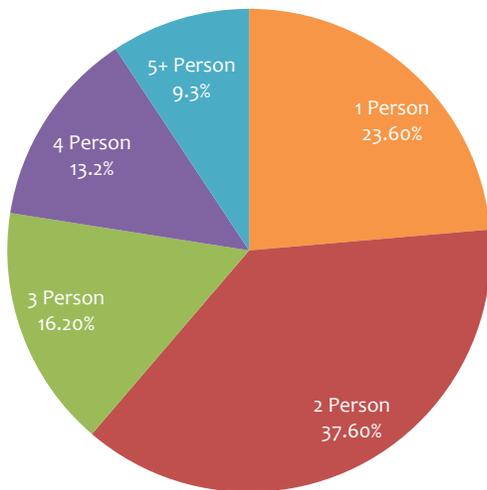


FIGURE 4: **Household (HH) % by Household Size**  
EL DORADO COUNTY, 2016

## Race and Ethnicity

El Dorado County’s racial and ethnic minority populations are proportionately small compared to the rest of California. The terms used to describe racial and ethnic groups in this report are consistent with those used in the 2010 U.S. Census and are self-reports of race or ethnicity. In this format, respondents are first offered two categories for ethnicity (Hispanic/Latino or Not Hispanic/Latino) and then offered seven categories for race identification (White, Black/African American, American Indian/Alaska Native, Asian, Native Hawaiian/Pacific Islander, Some Other Race, 2+ Races). The majority (87.15%) of residents, self-report their ethnicity as Not Hispanic/Latino while 12.85% identify as Hispanic or Latino. Race demographics also present similar make-ups with a predominant number of residents self-reporting as White (TABLE 1). El Dorado County experienced a 2.42% growth rate from 2010 to 2016; racial demographics, however, have remained relatively unchanged.

TABLE 1:

**Population by Race, EL DORADO COUNTY, 2016**

Race	Individuals	Percentage
White	157,942	85.17%
Black/African American	1,642	0.89%
American Indian/Alaska Native	2,020	1.09%
Asian	7,552	4.07%
Native Hawaiian/Pacific Islander	332	0.18%
Some Other Race	7,907	4.26%
2+ Races	8,046	4.34%
<b>Totals</b>	<b>185,441</b>	<b>100%</b>

**Population by Ethnicity, EL DORADO COUNTY, 2016**

Ethnicity	Individuals	Percentage
Hispanic/Latino	23,834	12.85%
Not-Hispanic/Latino	161,607	87.15%

## Education, Income and Employment

Residents of El Dorado County tend to have more years of formal education when compared to residents in the rest of California. Approximately 93% of residents have a high school diploma (or equivalent) or higher compared to the California average of 81%. In addition, 32.1% of the population aged 25 and older obtained a Bachelor's level degree or higher (FIGURE 5). Education is an important indicator to health because it is closely linked with occupation and income.

Income is the most common measure of socioeconomic status and a strong predictor of the health of an individual or community. The lower an income, the less likely it is a person will follow a healthy diet or participate in regular physical activity and more likely they will use tobacco products. This leads to a greater likelihood of chronic conditions such as depression, obesity, asthma, diabetes, heart disease, stroke and premature death.

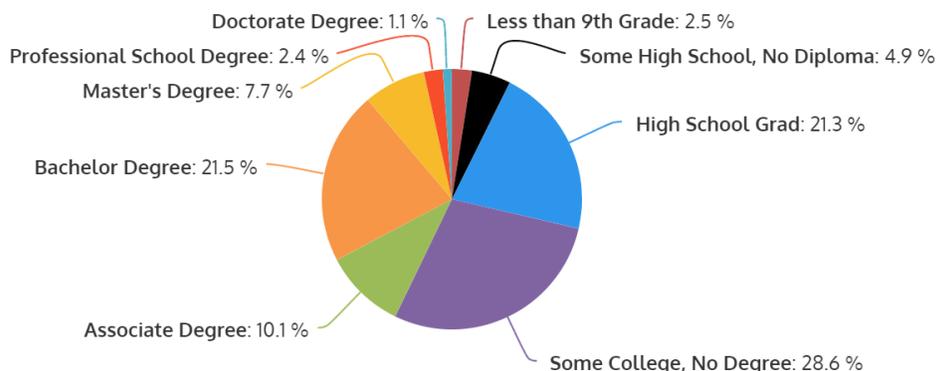


FIGURE 5: **Educational Achievement Level as % of Population**  
EL DORADO COUNTY, 2016

While approximately 8.5% of individuals residing in El Dorado County are living in households with income below the Federal Poverty Level (FPL), several race categories outperform the State when looking at Household Income (FIGURE 6). As a point of comparison, 14.39% of Californians live in a household with income below the FPL.

El Dorado County’s 2015 unemployment rate was 5.3% compared to 6.3% in California, however there are disparities among communities within the County that range from 4.0% in El Dorado Hills to 9.8% in Georgetown. The unemployment rate is a key indicator of the local economy, as a high rate of unemployment has personal and societal effects. During periods of unemployment, individuals are more likely to feel severe economic strain and mental stress. Unemployment is also related to access to health care, as many individuals receive health insurance benefits through their employer.

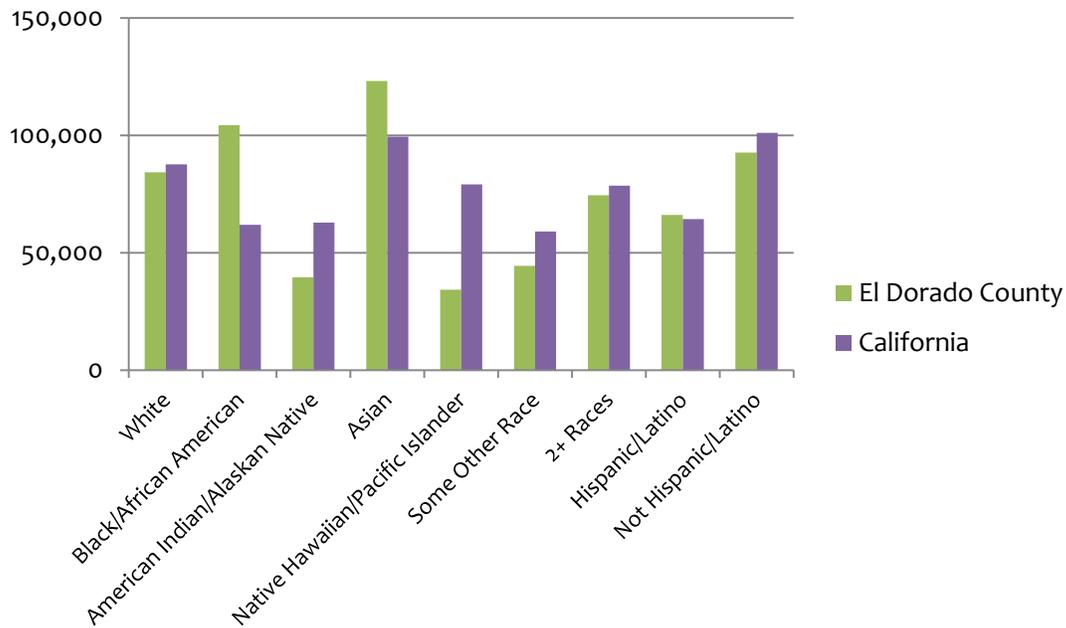


FIGURE 6: **Average Household Income by Race and Ethnicity**  
EL DORADO COUNTY, 2016

## El Dorado County Community Health Planning Process

### Community Engagement

The Community Health Planning Process used a community driven approach. The Community Health Advisory Committee (APPENDIX A) played a vital role in the planning process and also ensured that the information received was representative of the County. The County Epidemiologist issued invitations in early 2015 to individuals, organizations and Tribal representatives to serve on the Community Health Advisory Committee. In addition to providing overall guidance and helpful insights, the Advisory Committee supported the community engagement strategies, helped increase awareness and mobilized the community and facilitated participation in community input activities.

### Mobilizing for Action through Planning & Partnership (MAPP)

The Mobilizing for Action through Planning & Partnerships (MAPP) model was adopted as the community-wide strategic planning framework to guide the development of El Dorado County’s CHA and CHIP process (Figure 7).

As a nationally recognized planning tool, MAPP was used to:

- Convene the various organizations, community groups and individuals that make up the El Dorado County Local Public Health System;
- Develop shared community vision and values;
- Capture an in-depth picture of community health status through quantitative and qualitative data collection methods;
- Identify health priorities; and
- Develop goals, objectives, and strategies, as well as to identify potential partners.

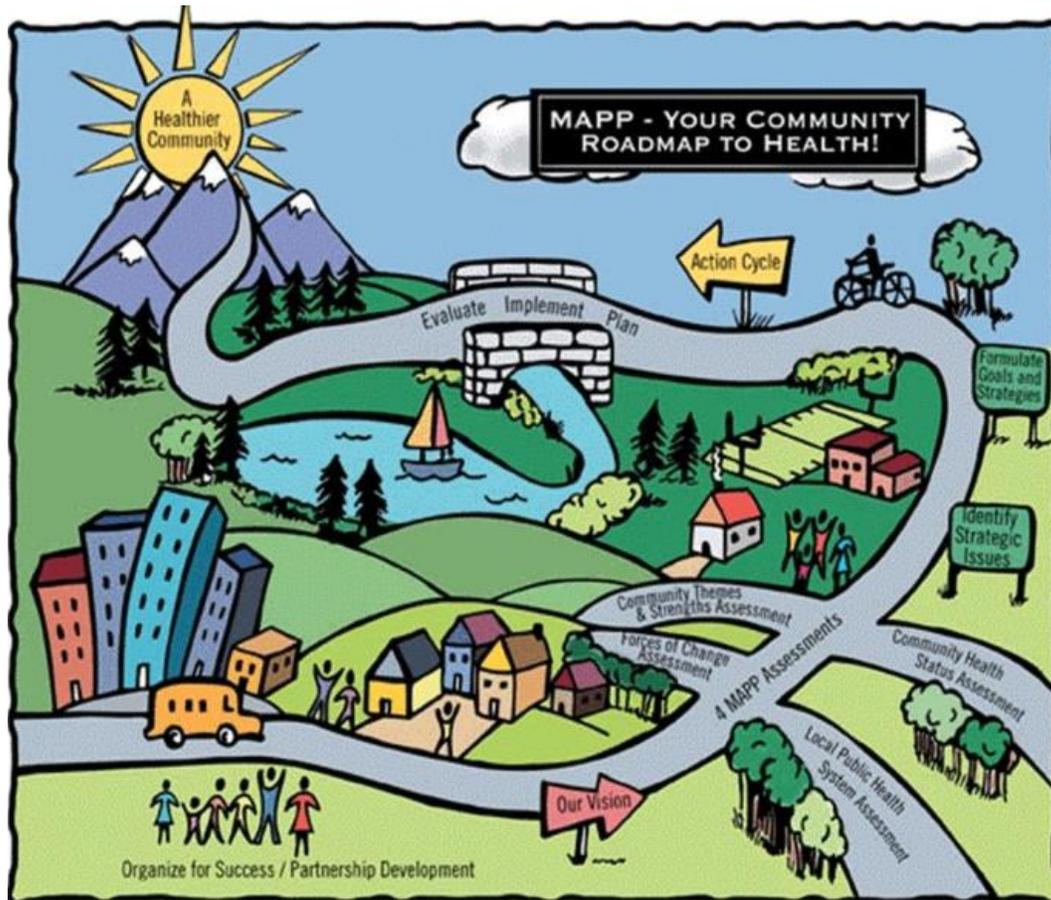


FIGURE 7: **The MAPP Model**

NATIONAL ASSOCIATION OF COUNTY & CITY HEALTH OFFICIALS (NACCHO), 2016

The MAPP process has six phases, each building on one another:

Phase 1: Organizing for Success & Partnership

Phase 2: Visioning

Phase 3: Four MAPP Assessments:

- Community Health Status Assessment
- Community Themes & Strengths
- Local Public Health System Assessment
- Forces of Change Assessment

Phase 4: Identifying Strategic Issues

Phase 5: Formulate Goals and Strategies

Phase 6: Action Cycle

## MAPP Phase 1: Organizing for Success and Partnerships

Local public health system partners in El Dorado County were invited to participate in the Community Health Planning Process to guide the assessment planning efforts of the CHA. Their participation and commitment resulted in the representation of key community leaders, advocates and allies who collectively helped shape and inform this process and provided insight regarding the communities they serve.

## MAPP Phase 2: Visioning

Public Health participated in a visioning process to revise the existing Public Health Vision statement into a shared vision that outlined common core values to guide the CHA and CHIP process and focus on desired outcomes (FIGURE 8).

# Community Health Assessment

## MAPP Phase 3: Four MAPP Assessments

The assessment phase of the MAPP process was designed to produce a complete picture of the community's health status. The combined results of the four MAPP assessments drove the identification of the strategic issues and serve as the foundation on which to build goals, strategies, and action plans. The four MAPP assessments are:

1. **Local Public Health System Assessment**
2. **Forces of Change Assessment**
3. **Community Themes and Strengths Assessment**
4. **Community Health Status Assessment**

The preparation and implementation of the four MAPP assessments that comprise Phase 3 of the CHA were guided by Public Health and the Community Health Advisory Committee. Their guidance and feedback on the proposed methods for the four MAPP assessments were carefully considered throughout the process. The teams also conducted a review of the data collection efforts, as it was important to establish contact with and include non-traditional community partners as equal voices and partners in the implementation of the four MAPP assessments.



## Our Purpose

*We promote the health and safety of individuals, communities and animals in El Dorado County.*

### We are committed to:

**Prevention** – We protect and improve health through injury and illness prevention, education, disease control and promotion of healthy lifestyles.

**Access** – We facilitate access to personal and community health services, to include individuals with mental illness, language, physical, economic and cultural barriers.

**Information** – We monitor the health of communities in the County and gather, analyze, interpret and distribute information to positively impact health outcomes.

**Collaboration** – We partner with local leaders, businesses, community organizations and the public to improve wellness.

**Safety** – We protect health through proactive monitoring, education, intervention and enforcement.

FIGURE 8: **Public Health Vision Statement**  
EL DORADO COUNTY, 2016

## Local Public Health System Assessment

### What it is

The Local Public Health System Assessment (LPHSA) includes all of the organizations and entities that contribute to public health in a community, including the local public health department and public, private and voluntary organizations (FIGURE 9). It also measures the capacity of the public health system to provide the Ten Essential Public Health Services, which are the fundamental framework for all activities that contribute to the health and well-being of communities (FIGURE 10).

### Assessment Findings

Public Health completed a comprehensive service provider review and will analyze and synthesize the information for use when developing the Community Health Improvement Plan (CHIP).

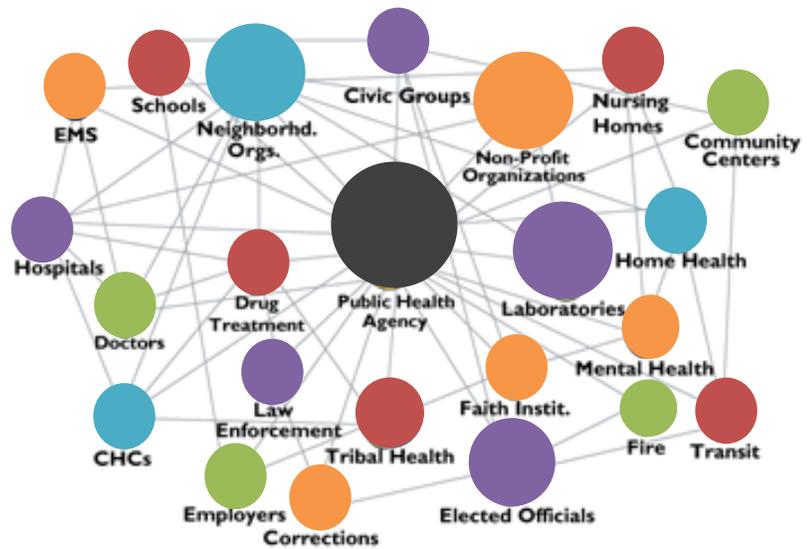


FIGURE 9: Local Public Health System

Centers for Disease Control and Prevention (CDC), 2016

### The Ten Essential Public Health Services

1. Monitor health status to identify and solve community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate and empower people about health issues.
4. Mobilize community partnerships and action to identify and solve health issues.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of healthcare when otherwise unavailable.
8. Assure competent public and personal health care workforce.
9. Evaluate effectiveness, accessibility and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.

FIGURE 10: Ten Essential Public Health Services

NACCHO, 2016

In addition, potential service gaps and leveraging of current resources will also be considered from this assessment. Assessing health care service capacity and access to health care services is important for local public health agencies and their partners to understand. The identification of gaps and barriers to accessing health care services allows effective strategies to be put into place to address the lack of access to health care. Planning services and programs and allocating funds appropriately depend on the availability of local resources. Indicators of resource availability in a community include geographic distribution, supply and capacity relative to a population's health status, risks and disparities.

### Forces of Change Assessment

#### What it is

The Forces of Change Assessment examines the context in which the community and its public health system operate, using trends, factors and events.

- **Trends** are patterns over time, such as migration in and out of a community.
- **Factors** are discrete elements, such as a community's large ethnic population or a jurisdiction's proximity to a major waterway.
- **Events** are one-time occurrences, such as a hospital closure, a natural disaster or the passage of new legislation.

The Forces of Change Assessment identifies factors such as legislation, technology and other impending changes that affect the way the community and its public health system operate.

### **Assessment Findings**

Key Informants in El Dorado County identified a wide array of trends, factors, and/or events at the local, state and national levels that influence the health or quality of life in the County and its local public health system. Forces of Change information can serve as a vital resource for effective health improvement planning within the community. The following list identifies the most important issues gathered during individual interviews with Key Informants:

- The **need to better plan for an aging population** (El Dorado County has a disproportionately high population over age 65 compared to the rest of California) and its impact on chronic diseases and use of health, transportation and social services.
- Sufficient intervention—especially in early childhood— **multigenerational problems of high substance abuse rates and mental health issues.**
- **Maintain an understanding of the Affordable Care Act (ACA)** and its impact at the local level; for example, understanding the needs new enrollees bring with them (e.g., mental health concerns) and the way medical care is paid by Medi-Cal.
- **Increase ways to integrate drug and alcohol and mental/behavioral health with primary care** (still to come with ACA).
- **Look at “healthier communities”** (and reaching consensus on what this means) as a way of reducing future healthcare costs.
- **Increase personal responsibility for managing health, chronic health conditions and changing unhealthy behaviors.** Understand that the healthcare delivery system, including the public health system, has only so much capacity to help and those dollars and human resources are finite.
- Better understand how increased state and federal funding requirements result in **decreased funding available** for direct services, impact our community.
- Respond to increased **rates of childhood obesity** without **interdisciplinary resources** to help.
- Prepare to deal with future Medi-Cal system changes concerning medications and drugs that increase the type of benefits and streamline the continuum of care, with **more people becoming eligible for the benefits.**
- Leverage federal and state transportation funding that emphasizes **walking, public transit and bicycling connections** with all new developments and within existing transportation networks.

Information for the Forces of Change Assessment was collected through key informant interviews conducted with 23 subject matter experts (APPENDIX B). Additionally, Public Health conducted a comprehensive review of secondary data sources to obtain the most current and reliable data to substantiate collected information. The information was then synthesized and organized into categories in the El Dorado County Forces of Change document (APPENDIX C).

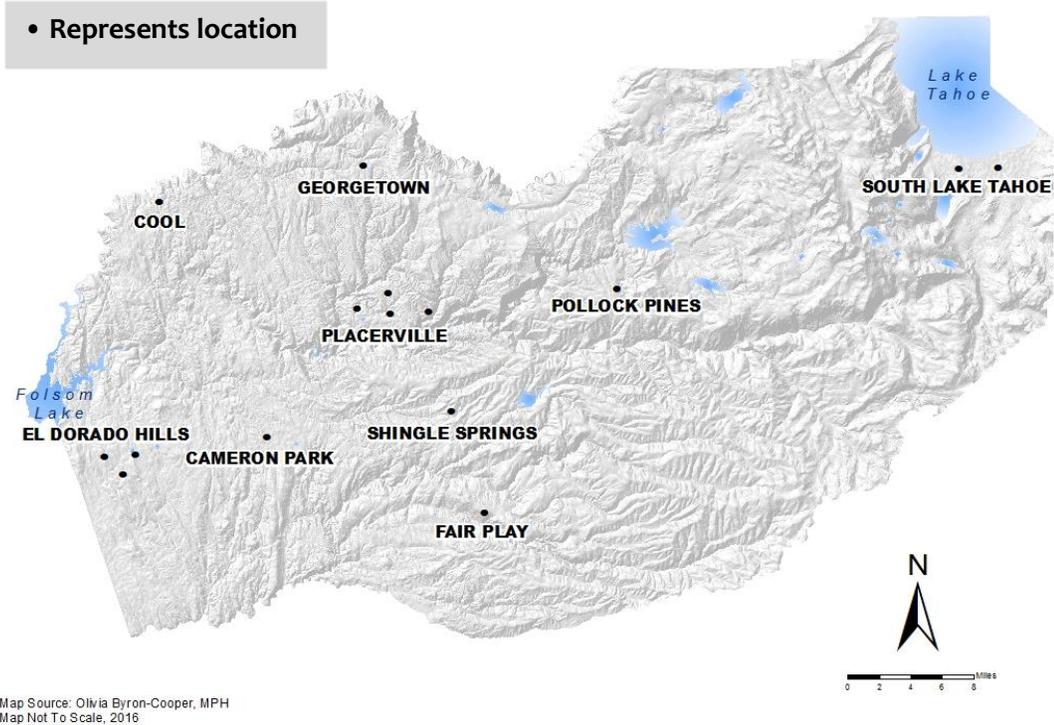


FIGURE 11: **Locations of Focus Groups and Community Meetings**  
EL DORADO COUNTY, 2015

## Community Themes and Strengths Assessment

### What It Is

The Community Themes and Strengths Assessment (CTSA) provides a snapshot of El Dorado County. The CTSA combines the thoughts, opinions and community members’ perceptions about the health issues that matter most to the community and what community members believe to be the greatest strengths and assets that contribute to health and well-being.

The information was gathered during 15 focus groups and general community meetings, and from the 2015 Community Health Survey. The focus groups and community meetings were held in each of the five districts in El Dorado County (FIGURE 11). A total of 141 residents participated in these meetings.

### Assessment Findings

The following question offered a high level of interaction and engaging discussion about community strengths and assets:

*Every community has things about it that make it a healthy or an unhealthy place to live. What do you think are the greatest strengths (assets) in El Dorado County that contribute to health and well-being for people?*

The value of living in an area with the natural resource and outdoor recreation attributes of El Dorado County contributing to good health and well-being was overwhelmingly recognized. The visual (FIGURE 12) depicts the top community assets and strengths mentioned by El Dorado County residents during community meetings, focus groups and responses from the Community Health Survey.

# The Community Health Status Assessment

## What it is

The Community Health Assessment process consisted of gathering information through a variety of approaches including a survey, focus groups and key informant interviews. Data were synthesized on health status, quality of life and risk factors in the community to provide a broad overview of the health and well-being of the community.

The *El Dorado County Community Health Survey* was made available to residents of El Dorado County online and at multiple community locations. Members of the Community Health Advisory Committee also worked to distribute surveys to populations identified as hard to reach. The surveys were distributed in English and Spanish (TABLE 2).

In addition to traditional data collection methods, Public Health partnered with the El Dorado County Youth Commission, whose members are *“appointed by the County Board of Supervisors, to help develop and express the opinions, ideas and visions of El Dorado County youth by partnering with local government and community decision-makers”*.

TABLE 2: **Community Health Survey Respondents**  
EL DORADO COUNTY, 2015

Community	Number of Respondents	Percent of Respondents
Placerville, Diamond Springs, El Dorado	231	26
El Dorado Hills, Latrobe, Cameron Park, Shingle Springs, Rescue	179	20
South Lake Tahoe	120	13
Camino, Pollock Pines	71	8
Mt. Aukum, Grizzly Flat, Pleasant Valley, Somerset, Outingdale, Fair Play	45	5
Kelsey, Garden Valley, Georgetown, Mosquito, Swansboro, Greenwood	34	4
Cool, Lotus, Coloma, Pilot Hill	13	2
Out of County	32	4
Unknown	180	18
<b>Totals</b>	<b>905</b>	<b>100%</b>

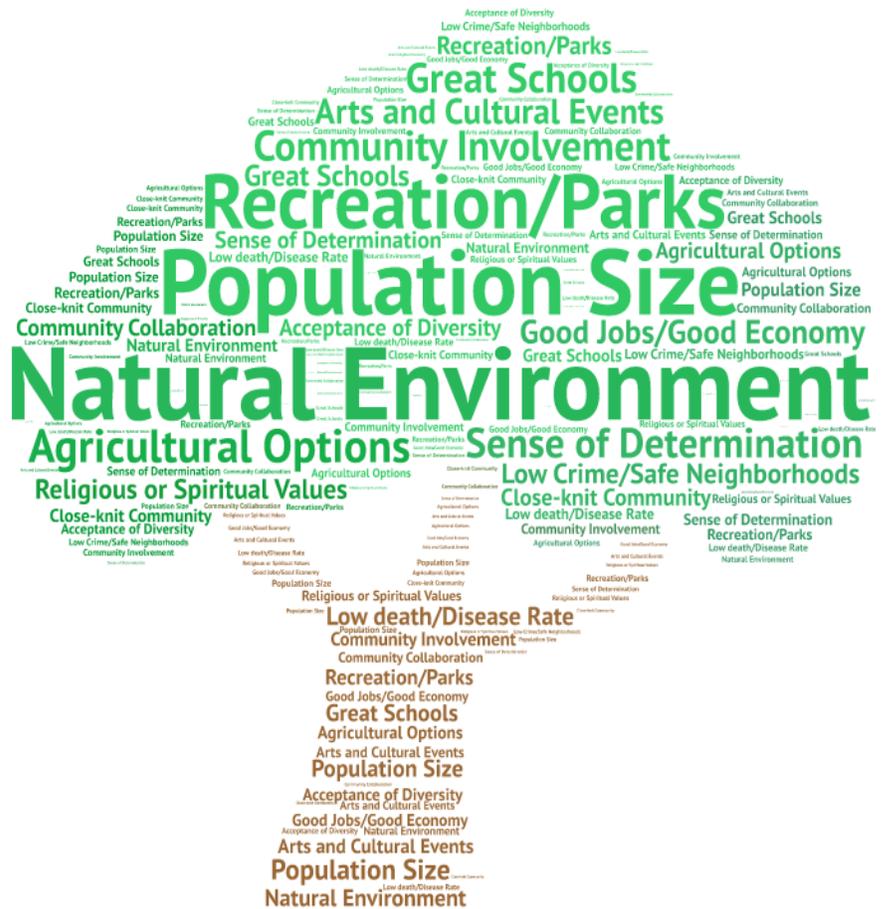


FIGURE 12: **Community Health Survey responses to ‘What assets contribute to health and well-being in El Dorado County?’, 2015**

Youth participated in the photovoice project entitled *‘Health Through My Eyes’ (HTME)*. Photovoice is a data collection method by which people share their perspectives of their community through photography and stories. The HTME photovoice project captured what youth believe contributes to good and poor health in our community. A video featuring youth narratives can be viewed at [www.Welldorado.org](http://www.Welldorado.org); along with a small sample of images included in this report (APPENDIX D).

## Assessment Findings

A total of 905 surveys were completed; 15 focus groups were conducted (141 total participants) and 23 key informants were interviewed to represent a cross section of the health of our community. The majority (58%) of the Community Health Surveys were completed online and in English (94%). Fifty-one Community Health Surveys (6%) were completed in Spanish.

The Community Health Survey produced a broad picture of how the community views health within El Dorado County. (APPENDIX E). Community Health Survey respondents were asked to identify the **three most important** health issues in El Dorado County from a provided list. Their responses were then incorporated into a “word cloud” graphic (FIGURE 13) with more frequently identified factors depicted by larger text.

While it is important to identify community strengths, it is also important to evaluate opportunities for improvement. These responses will be used further during the development of the Community Health Improvement Plan (CHIP).

## Understanding the Data

Findings from the four MAPP Assessments produced large amounts of data which was then used to create infographics, bringing the data to life. Nearly two dozen data sources were used to compile these visuals. The full listing of sources and additional information is available at [www.WellDorado.org](http://www.WellDorado.org). This website is sponsored by the Health and Human Services Agency, providing easily accessible and reliable data specific to El Dorado County. The site is maintained by Community Health Solutions and monitored by the El Dorado County Epidemiologist. The community is encouraged to use the site as a tool to support collaboration, promote best practices, identify local resources and drive decisions based on data.

The following infographics display a select group of health indicators within El Dorado County and are grouped into the following topic areas:

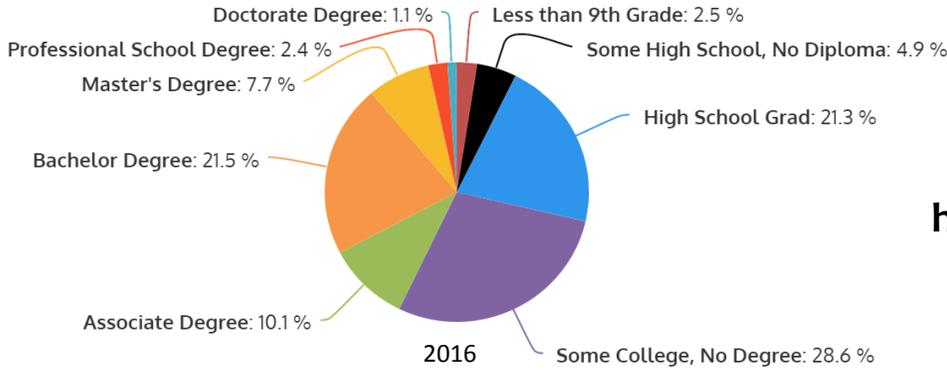
- Demographics
- Access to Care
- Wellness & Lifestyle
- Nutrition & Weight
- Chronic Disease
- Family Health
- Mental Health
- Substance Use & Abuse



FIGURE: 13, **Community Health Survey responses to ‘What are the three most important health issues in El Dorado County?’, 2015**

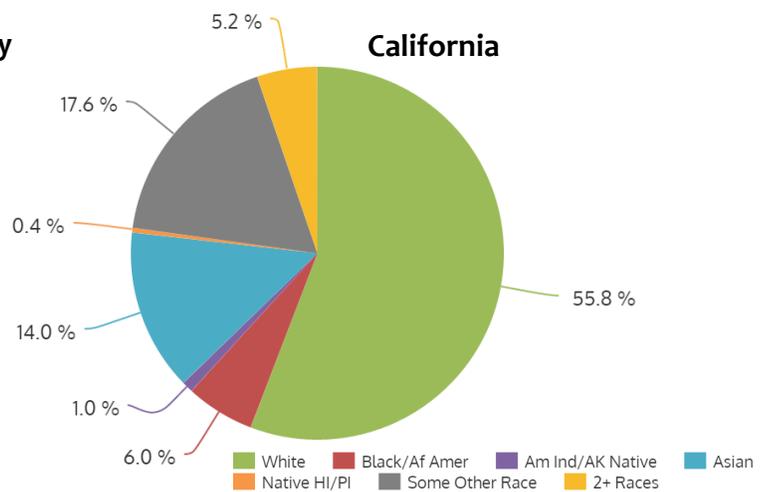
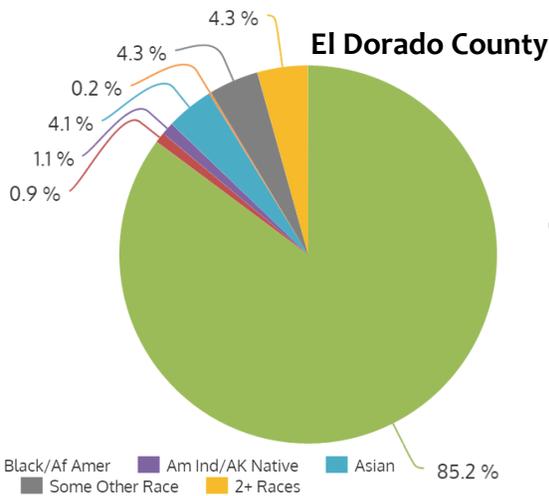
# EL DORADO COUNTY DEMOGRAPHICS

Demographics are the statistical characteristics of a population, such as age, race/ethnicity, sex, economic status, level of education and income level. Demographic factors are important because they are often associated with being more or less healthy.

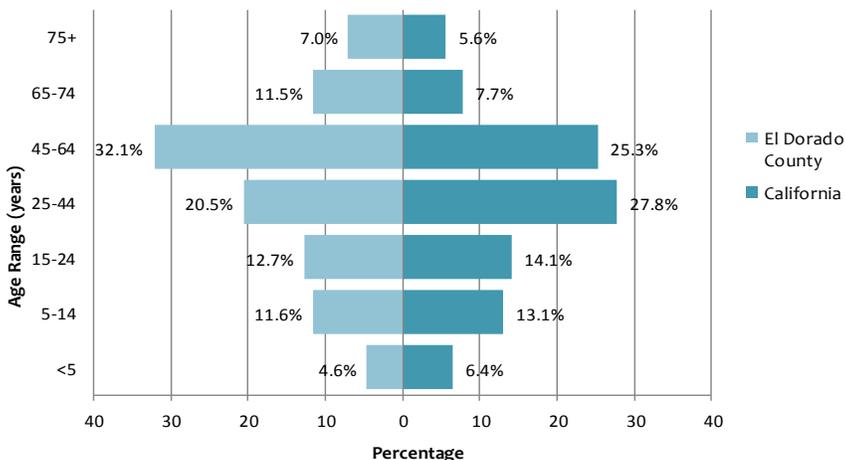


**92.6% of Adults**  
(25 years +) have a  
**high school diploma or greater**  
in El Dorado County.

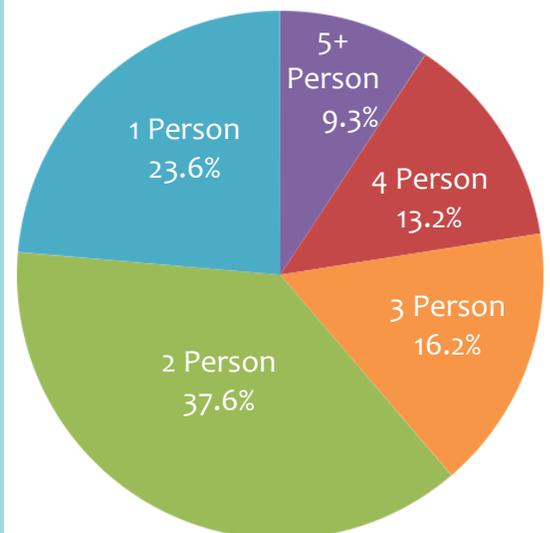
## 2016 Population by Race—El Dorado County and California Comparison



## 2016 Population Pyramid by Age El Dorado County and California

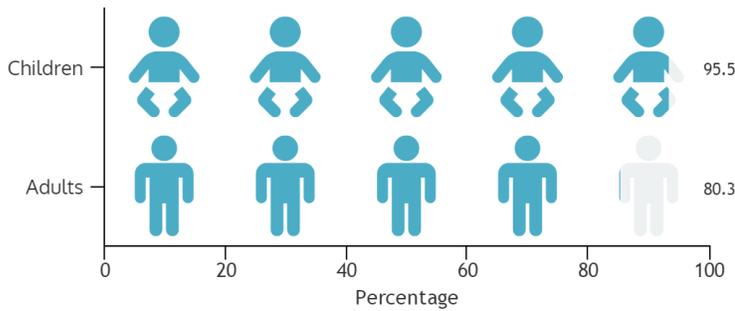


## EDC Household (HH) by HH Size—2016



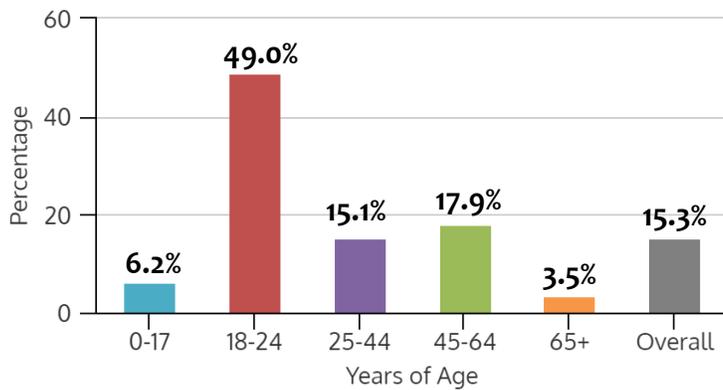
# ACCESS TO CARE

Medical costs in the United States are extremely high, which means people without health insurance may not be able to afford medical treatment or prescription drugs. They are also less likely to get routine checkups and screenings; consequently if they do become ill they will not seek treatment until the condition is more advanced and often more difficult and costly to treat.



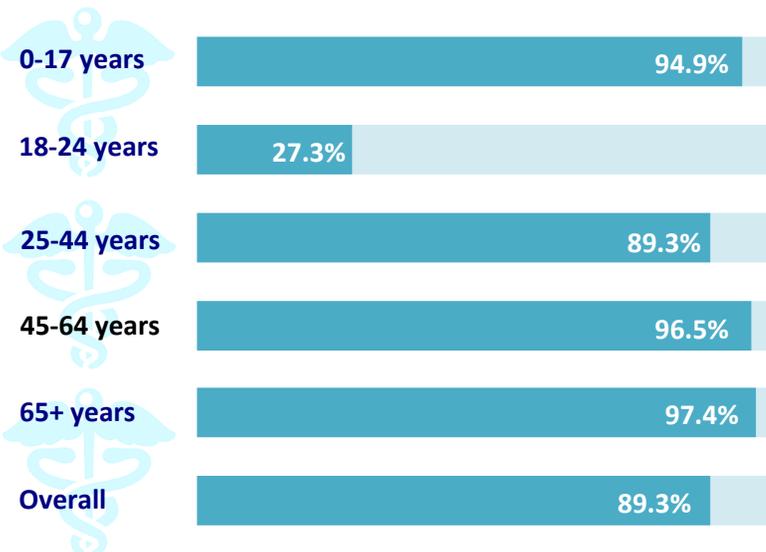
In 2014, **95.5% of Children** and **80.3% of Adults** had health insurance in El Dorado County.

Delay or Difficulty Obtaining Health Care in El Dorado County—2014



Access to primary care, specialty care and mental health care providers increases the likelihood that community members will have routine check-ups and screenings.

People with a Usual Source of Health Care, El Dorado County, by Age—2014

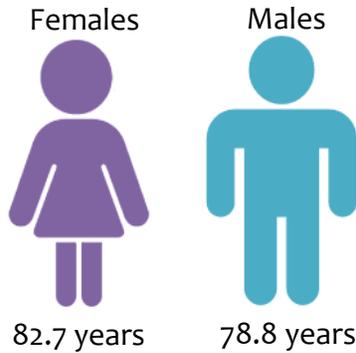


“Access to Care”  
Healthy People 2020 Target:



# WELLNESS & LIFESTYLE

When people feel healthy they are more likely to feel happy and participate in their community socially and economically. Areas with unhealthy populations lose productivity due to lost work time. Healthy residents are essential for creating a vibrant and successful community.



The **life expectancy**  
in El Dorado County for  
**Females is 82.7 years** and  
**Males is 78.8 years.**

Average travel time to work for solo drivers is **28 minutes.**



**54.7% of Renters** spend 30% or more of their household income on rent.

With a limited income, paying a high rent may not leave enough money for expenses such as food, transportation and medical.

**Commuting to Work:** Workers who drive alone to work contribute to traffic congestion and air pollution. This sedentary habit is associated with decreased levels of physical activity and health problems such as headaches, anxiety and increased blood pressure. Alternatives to driving alone include: **carpooling, biking, public transportation and walking.**



**Seat Belts and Car Seats Save Lives.**

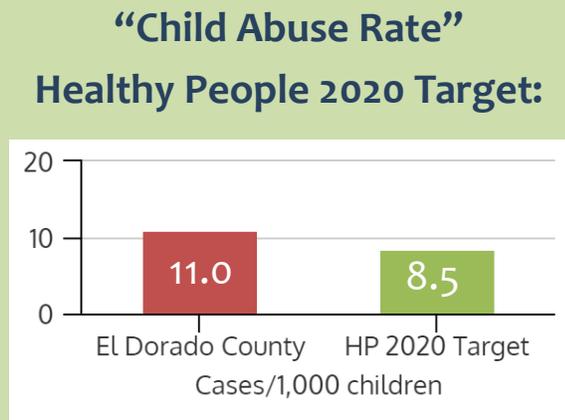
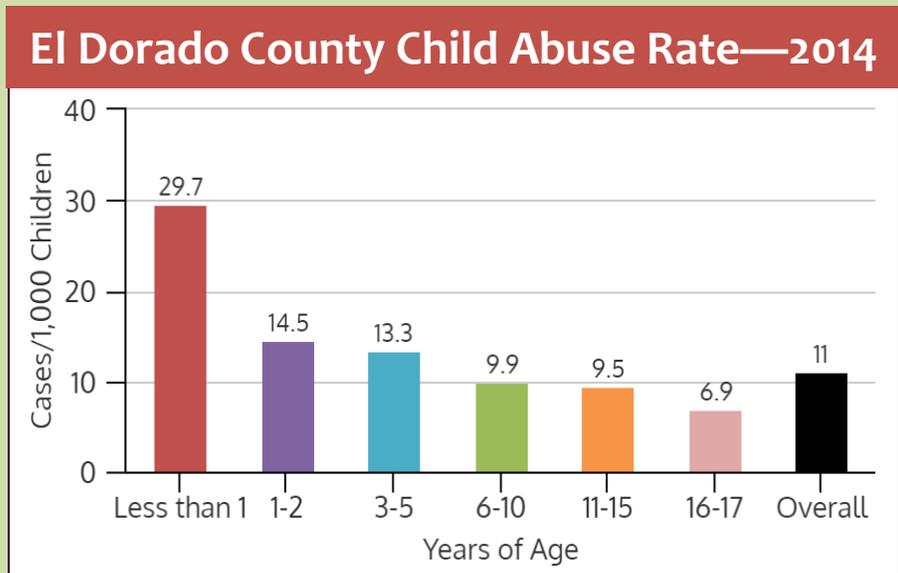
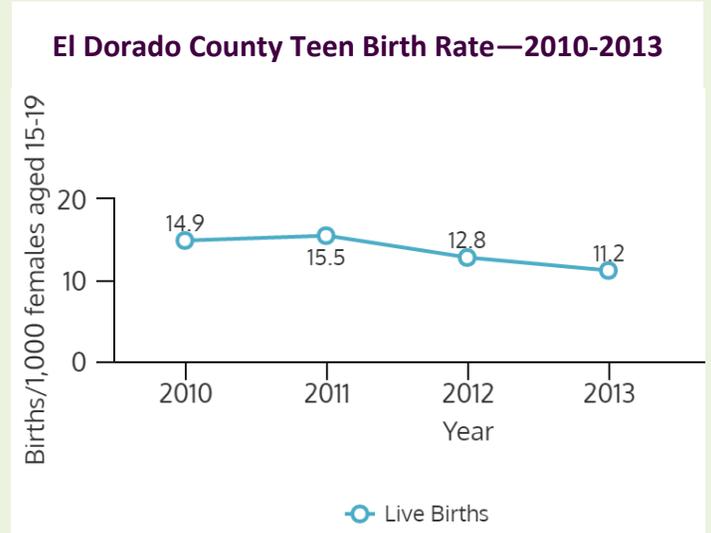
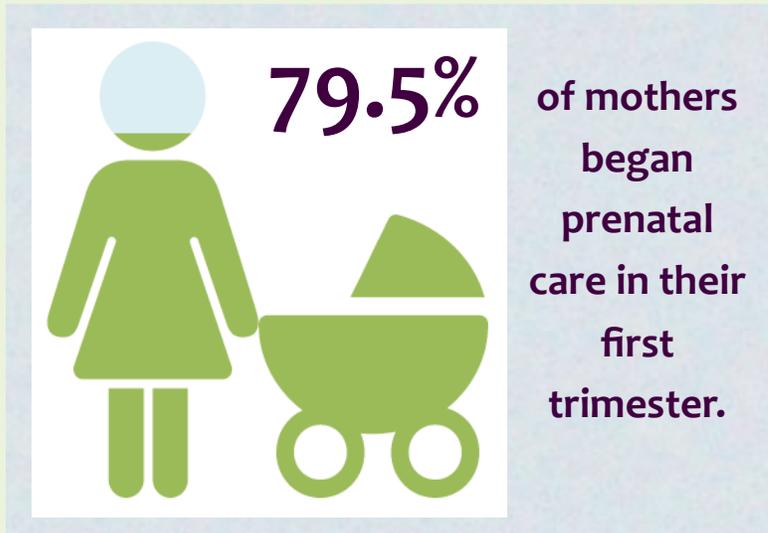
**Buckle Up  
Every Age,  
Every Seat,  
Every Trip**

# FAMILY HEALTH

Family health is more than personal health of the individuals who form the family. Family health takes into consideration relationships among family members and the relationship of the family to both social and environmental influences.

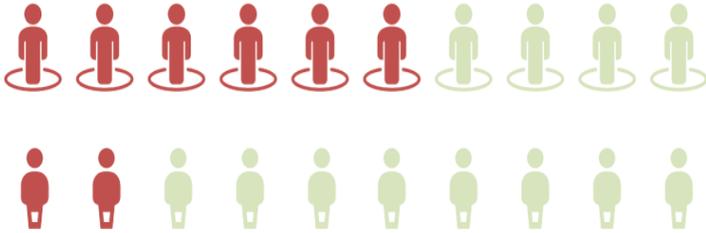


**9** out of **10** Children enrolled in **Kindergarten** in El Dorado County have received **all required immunizations.**

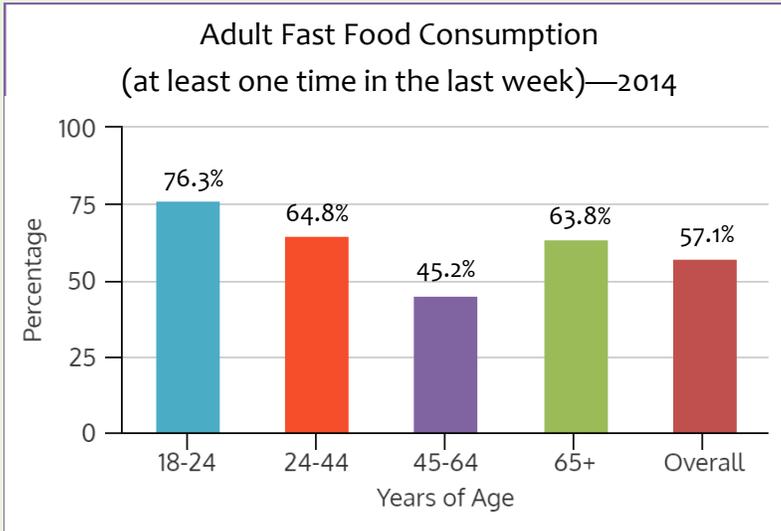


# NUTRITION & WEIGHT

A lack of access to healthy foods is often a significant barrier to healthy eating habits. People living farther away from grocery stores are more likely to consume unhealthy foods that may be readily available at convenience stores and fast food outlets.



**Over half of adults** and fewer than a quarter of adolescents in El Dorado County are **overweight or obese.**

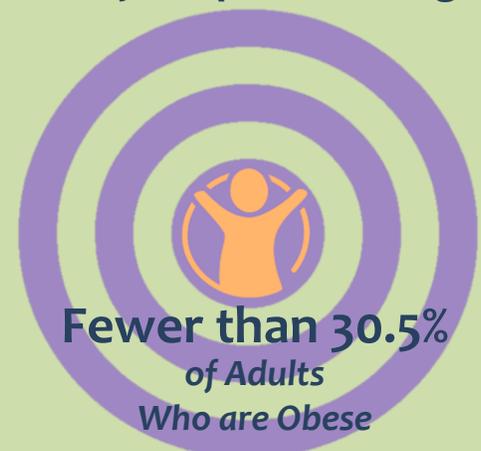


Being overweight or obese affects quality of life and puts individuals at risk for developing many diseases, especially heart disease, stroke, diabetes and cancer.



Child Fruit and Vegetable Consumption—2012

**“Adults Who are Obese”  
Healthy People 2020 Target:**



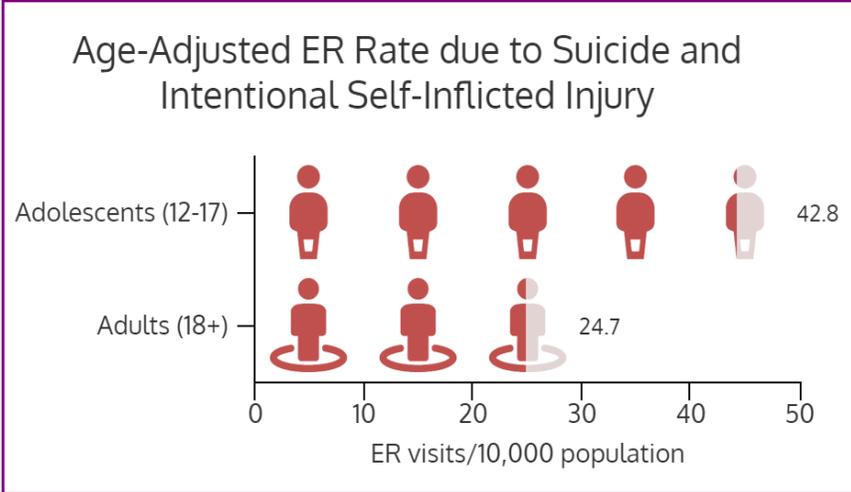
Source: WellDorado.org 2016

# MENTAL HEALTH

Psychological distress can affect all aspects of our lives. It is important to recognize and address potential psychological issues before they become critical. Delays in mental health treatment can lead to increased morbidity and mortality, including the development of various psychiatric and physical comorbidities.

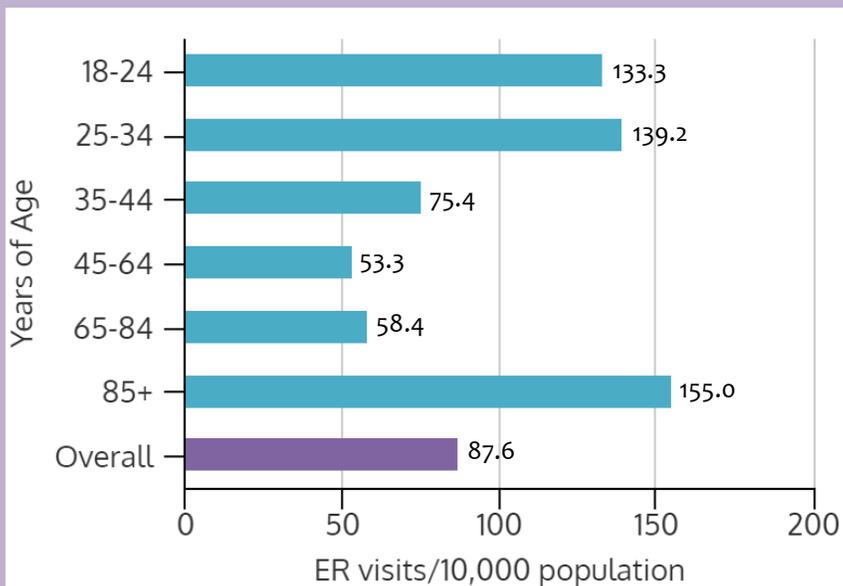


**65.3% of adults** in El Dorado County who report needing care for **emotional, mental health or substance issues** obtained help in the past year.

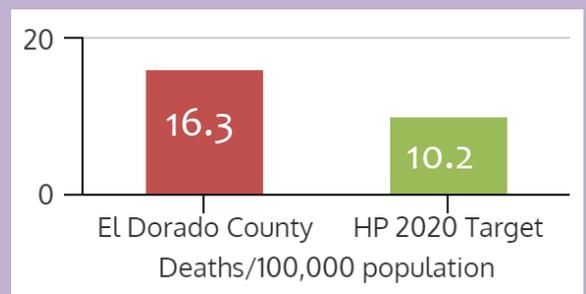


Suicide is a major public health issue that affects people of all ages. Studies show that addressing psychiatric illness through early recognition, intervention and treatment is an effective way to combat suicidal behavior.

## ER Rate Due to Mental Health by Age



## “Age-Adjusted Death Rate Due to Suicide” Healthy People 2020 Target:



# SUBSTANCE ABUSE

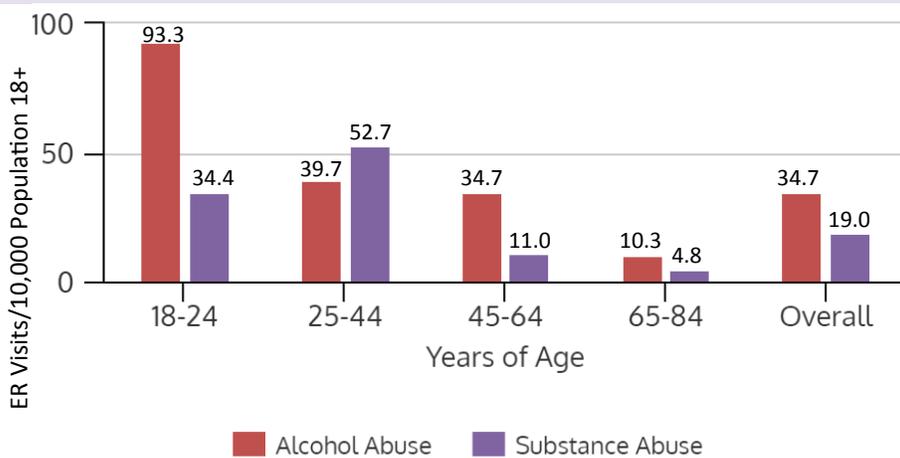
Substance abuse is a major public health issue that has strong impact on individuals, families and communities. The use of illicit drugs, abuse of alcohol and addiction to pharmaceuticals is linked to serious health conditions such as heart disease, cancer and liver diseases, costing over \$60 billion annually in lost work productivity, healthcare and crime.

**15.9% of Adults** and **10.8% of Adolescents**

in El Dorado County are  
**Current Smokers**

(Does not include e-cigarettes or vapes)

## Age Adjusted ER Rate Alcohol/Substance Abuse by Age

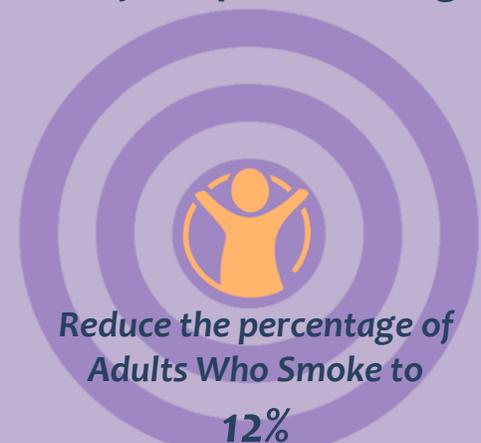


**Alcohol and substance abuse** are associated with a variety of **negative health and safety outcomes**, including alcohol-related traffic accidents and other injuries, employment problems, family disputes and other interpersonal problems, which **can result in injury or death.**

**44%**

of motor vehicle crash deaths in El Dorado County involve alcohol

**“Adults Who Smoke”  
Healthy People 2020 Target:**



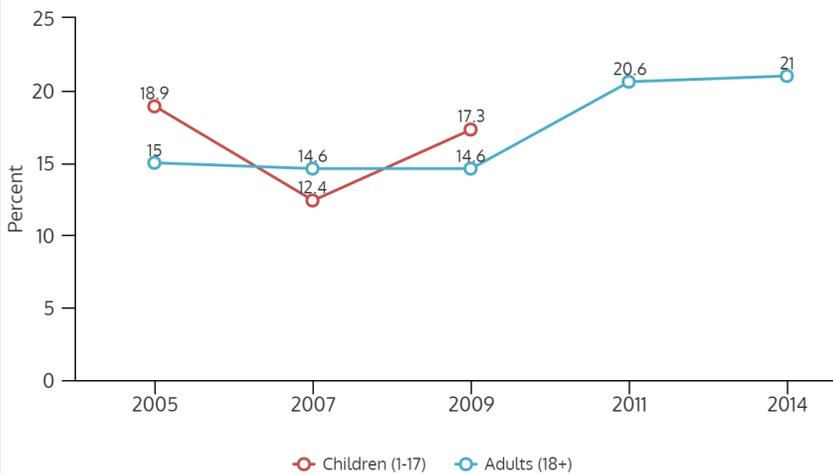
# CHRONIC DISEASE

Chronic diseases are responsible for 7 out of 10 deaths each year, and treating people with chronic diseases accounts for 86% of our nation's health care costs. Chronic diseases and conditions, such as heart disease, stroke, cancer, type 2 diabetes, obesity and arthritis are among the most common, costly and preventable of all health problems.



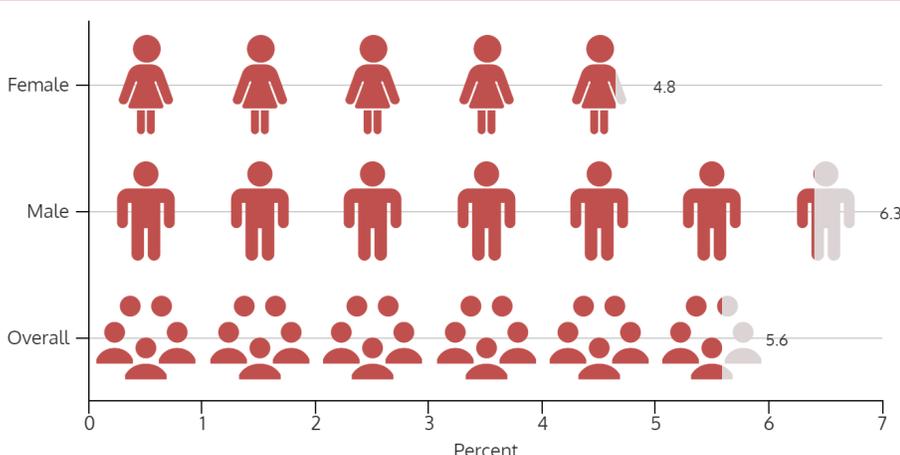
**32.7% of Females** and  
**39.1% of Males**  
in El Dorado County  
have **HIGH** blood pressure.

Children and Adults with Asthma, El Dorado County 2005-2014

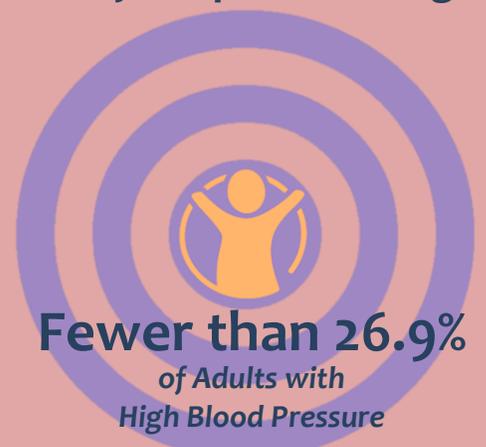


Asthma is a condition in which a person's air passages become inflamed making it difficult to breathe. Asthma is one of the most common chronic childhood diseases and it can significantly impact quality of life.

## Adults with Diabetes—2013



**“High Blood Pressure”**  
**Healthy People 2020 Target:**



# Community Health Improvement Planning Process

## MAPP Phase 4: Identifying Strategic Issues

The Community Health Advisory Committee, assisted by the El Dorado County Epidemiologist, conducted a review and analysis of the available data. The most common themes were identified and organized to align within the health equity framework.

Public Health then facilitated a meeting with the Community Health Advisory Committee and used the multi-voting technique recommended by the National Association of County and City Health Officials (NACCHO) to define and select focus areas. The identified focus areas will be addressed in the CHIP. Committee members used the following criteria to prioritize the focus areas:

- Seriousness of the issue to health
- Immediate consequences if the issue is not addressed
- Number of people affected
- Assists ability to address other issues
- Importance to the community
- Feasibility
- Alignment with County Strategic Plan

The following diagram (FIGURE 14) illustrates the process and types of indicators that were identified through primary and secondary data analysis and provided to the Community Health Advisory Committee. These indicators will be used to develop goals and objectives within each identified focus area in the Community Health Improvement Plan (CHIP). The Community Health Assessment process took place during yearlong collaborative meetings in an effort to capture as many community partners as possible.

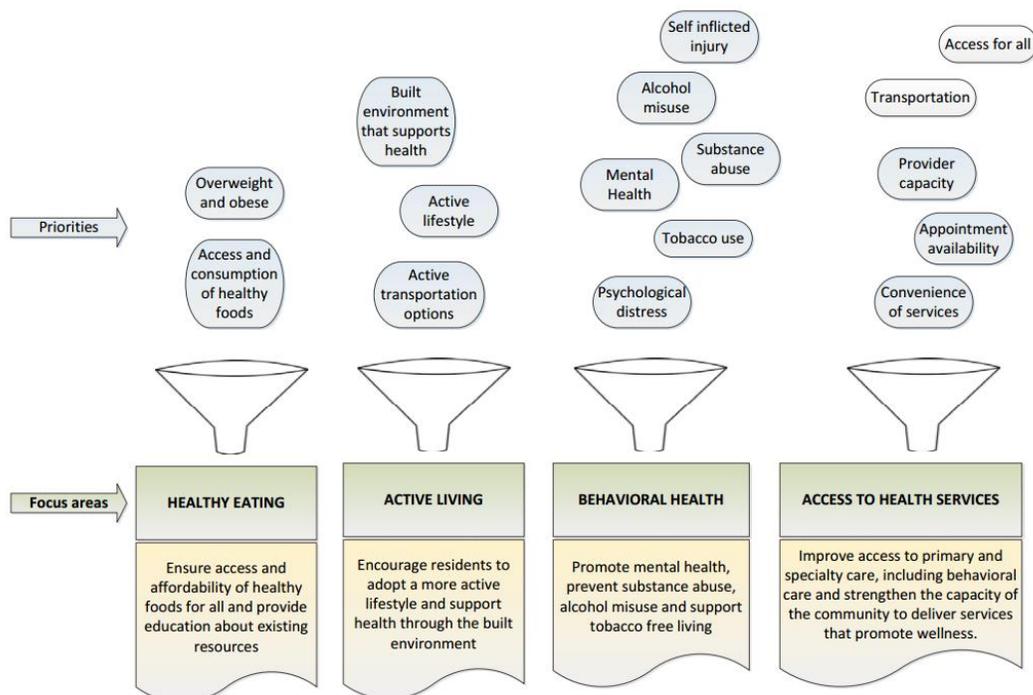


FIGURE 14: Community Health Advisory Committee Focus Area Selection Process  
EL DORADO COUNTY, 2016

# El Dorado County

## Summary of Community Health Assessment Focus Areas

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### Focus Area: Active Living

*Improve the community environment to support an active lifestyle for all*

Physical activity is essential to promote health and well-being in the community. People who are physically active tend to live longer and have lower risk for chronic disease, including heart disease, stroke, type 2 diabetes, depression and some cancers. Physical activity can also help with weight control and mental health.



### Focus Area: Healthy Eating

*Ensure access to healthy affordable food and existing resources*

Diets high in vegetables, fruits, whole grains, and lean proteins can help maintain a healthy weight and avoid chronic diseases such as diabetes, cancer and heart disease.



### Focus Area: Access to Health Services

*Improve access to and capacity to deliver health care services*

Access to health services directly impacts the overall physical, social and mental health status of the community. When administered and delivered appropriately and in a timely fashion, health services - including primary, behavioral and specialty care services - help prevent disease and disability, detect and treat health conditions, improve quality of life, avoid preventable death and increase general life expectancy.



### Focus Area: Behavioral Health

*Promote mental health, prevent substance abuse and support tobacco free living*

Deaths related to mental illness, drug overdoses, chronic liver diseases and lung cancer made the top ten causes of premature death in El Dorado County in 2015. This underscores the need to support collaboration among professionals, strengthen infrastructure and reduce the negative stigma that surrounds these issues.



## Next Steps

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The next step in the Community Health Planning Process (FIGURE 16) is the successful development of the Community Health Improvement Plan (CHIP). The findings of the Community Health Assessment (CHA) will be used extensively to inform the prioritization of health issues during the development of the Community Health Improvement Plan (CHIP), expected in 2017.

The CHIP will require a collaborative effort to leverage the entire Local Public Health System. As steering committees and workgroups are formed, progress will be tracked and presented to the community through a variety of messaging efforts, including up-to-date status reports at [www.WellDorado.org](http://www.WellDorado.org). The Community Health Planning Process will continue to guide our work to positively affect the health and well-being of all El Dorado County residents.

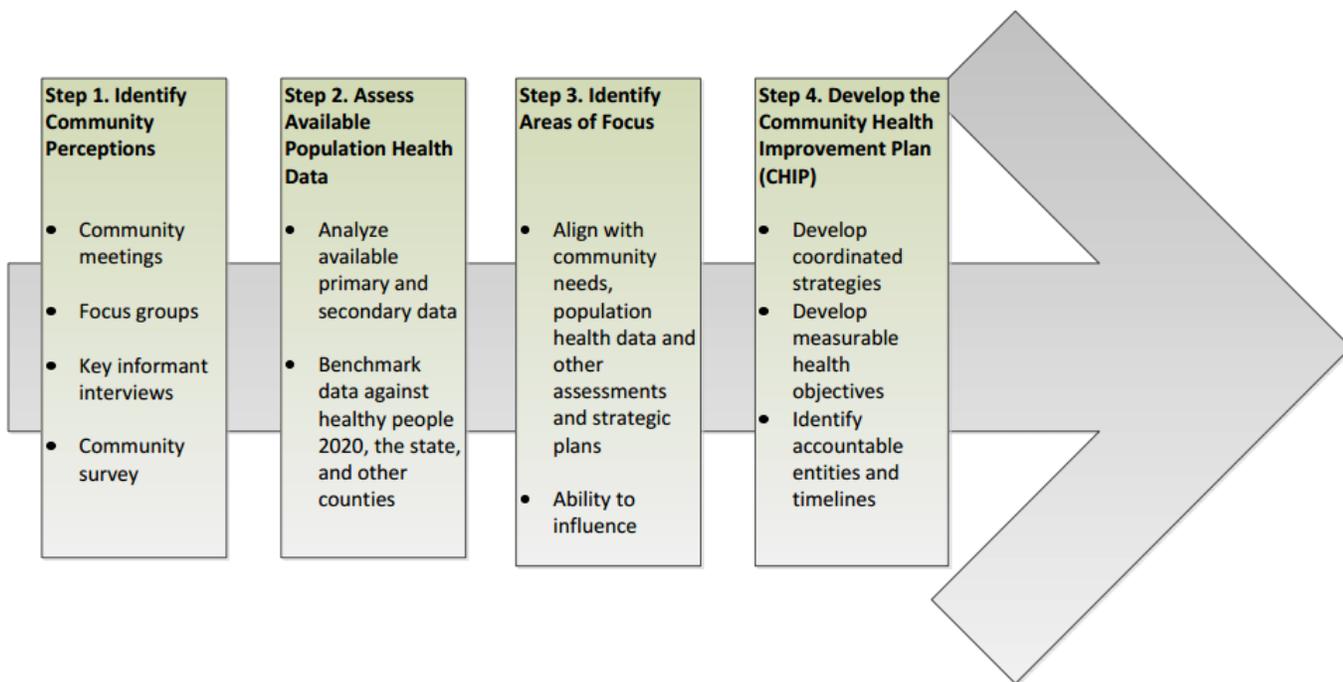


FIGURE: 16: **Community Health Planning Process**  
EL DORADO COUNTY, 2016

**EL DORADO COUNTY COMMUNITY HEALTH ADVISORY COMMITTEE**

(Alphabetical order by first name)

**Alexis Zoss**

Chief Assistant Director  
El Dorado County Health & Human Services Agency

**Christopher Weston, MPH**

Deputy Director  
Public Health  
El Dorado County Health & Human Services Agency

**Doris Jones, MA**

Mental Health Services Act Program Coordinator  
Workforce Education & Training Coordinator  
Mental Health Patients' Rights Advocate  
El Dorado County Health & Human Services Agency

**Jennifer Taylor, MS, CTRS**

Department Analyst II  
Public Health  
El Dorado County Health & Human Services Agency

**Josefina Solano**

Supervising Health Education Coordinator  
Public Health-Children Medical Services  
El Dorado County Health & Human Services Agency

**Kasey Lonbaken, R.N.**

Clinic Manager  
Shingle Springs Health & Wellness Center

**Kathi Guerrero**

Executive Director  
First 5 El Dorado

**Kathryn Lang**

Administrative Services Officer  
El Dorado County Health & Human Services Agency

**Kristine Oase-Guth, MPH**

Program Manager  
Public Health  
El Dorado County Health & Human Services Agency

**Lindell Price**

El Dorado County resident and  
Pedestrian/ Bicycle advocate

**Nancy J. Williams, MD, MPH**

Public Health Officer  
El Dorado County Health & Human Services Agency

**Olivia Byron-Cooper, MPH**

Program Manager/Epidemiologist  
Public Health  
El Dorado County Health & Human Services Agency

**Ren Scammon**

Program Manager  
Utilization Review Coordinator  
El Dorado County Health & Human Services Agency

**Susan Forrester**

Senior Office Assistant  
Public Health  
El Dorado County Health & Human Services Agency

**Terri Stratton, MPH**

Executive Director  
El Dorado County Community Health Center

**Woodrow Deloria**

Senior Transportation Planner  
El Dorado County Transportation Commission

## KEY INFORMANT INTERVIEWS AND OTHER CONTACTS

(Alphabetical order by first name)

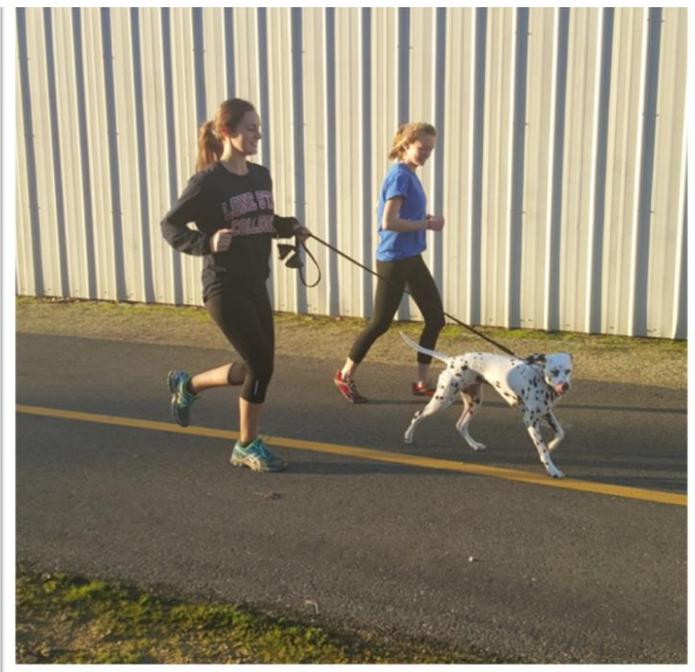
Person Contacted	Agency/Organization
<i>Key Informant Interviews</i>	
Alexis Zoss	Chief Assistant Director, El Dorado County (EDC) Health and Human Services Agency (HHSA)
Dr. Alicia Paris-Pombo	Health Officer, EDC Public Health
Amy Andersen	Executive Director, Special Services, El Dorado County Office of Education (EDCOE)
Anna Gleason	Executive Director, Summitview Child & Family Services, Inc.
Don Ashton	Executive Director, EDC HHSA
Gail Healy	Assistant Executive Director, Child Development Programs, EDCOE
Jan Melnicoe	President, National Association of Mental Illness (NAMI) El Dorado County
Jim Abrams	Commissioner, EDC Mental Health Commission
Kasey Lonbaken	Clinic Manager, Shingle Springs Tribal Health Center
Kaye Caldwell (Medellin)	Executive Director, Child Development Programs and Services, EDCOE
Kristin Brinks	Deputy Director-Community Services, EDC HHSA
Leanne Wagoner	Community Relations Manager, Barton Health
Lynnan Svensson	Nursing Program Manager, MCAH Program Director, EDC Public Health
Michael Ungeheuer	Community Public Health Nursing Division Manager, EDC Public Health
Patricia Charles-Heathers, Ph.D.	Assistant Director of Health Services, EDC HHSA
Patricia Moley	Assistant Director of Human Services, EDC HHSA
Randy Peshon	Undersheriff, EDC Sheriff 's Office
Shannon Truesdale	Chief Operating Officer, Marshall Medical Center
Shirley White	Division Manager, EDC Alcohol and Drug Program
Tammy Van Warmerdam	Nursing Coordinator, EDCOE
Terri Stratton	Executive Director, El Dorado County Community Health Center
Dr. Veronica Velasquez-Morfin	Medical Director, El Dorado County Community Health Center
Woodrow Deloria	Senior Transportation Planner, EDC Transportation Commission

**EL DORADO COUNTY  
FORCES OF CHANGE**

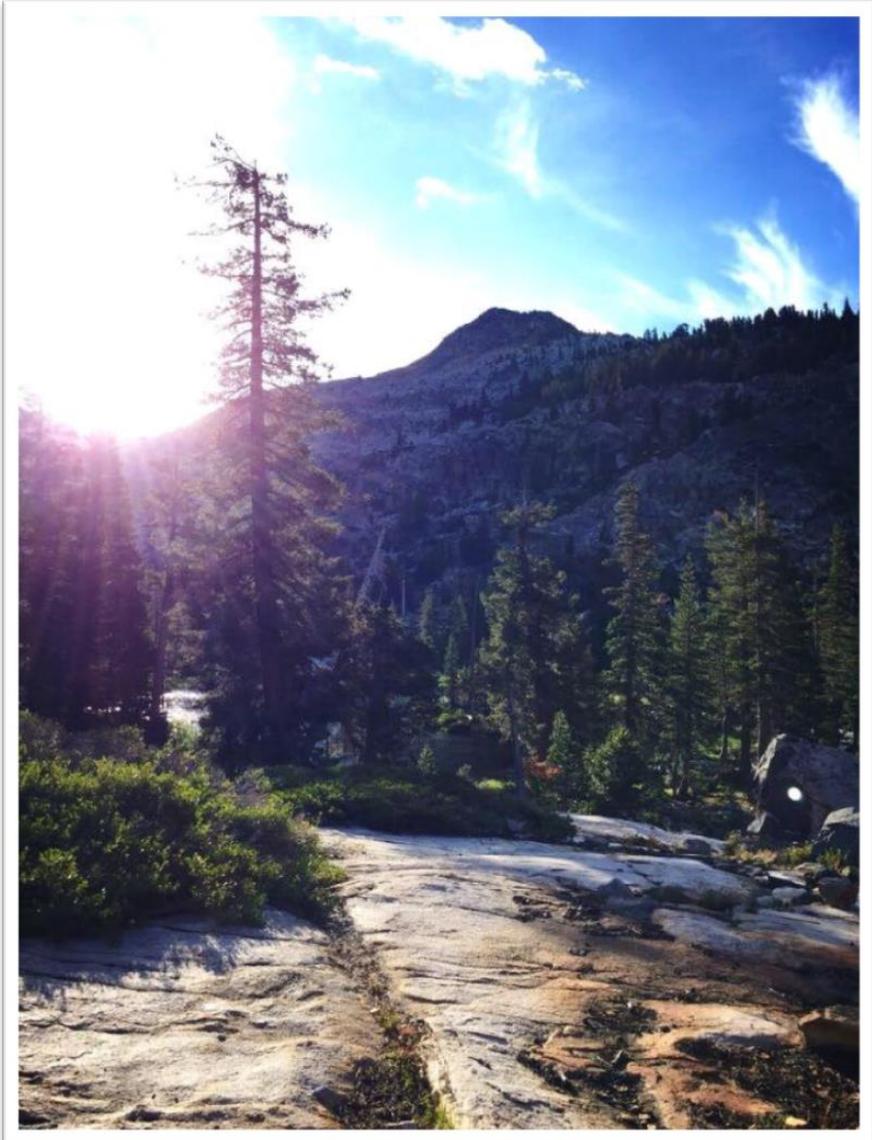
Sector	Forces	Opportunities	Vulnerabilities
<b>Economic and Social</b>	Demographic shifts (e.g., aging population, migration)	Continuum of care model  Prevention education for chronic disease	Increased need for long-term support services  Higher prevalence of chronic disease  Lack of medical specialists to serve the changing population  Need to establish/provide services to rural population  Limited job opportunities for families and young professionals
<b>Science and Technology</b>	Access to care	Expand broadband internet to rural communities for telehealth  Increased use of electronic health records  Mobile clinic services	Affordability, access, coverage  Lack of funds for operations  Limited number of specialists/qualified personnel
<b>Community</b>	Mental health, substance use/abuse;	Community based mental health services  Outpatient and residential treatment for addiction/substance abuse  Transitional housing; homeless shelters	Growing demand for services  Lack of local providers for spectrum of services  Alcohol-impaired driving deaths trending upwards

<b>Community (cont.)</b>	Service integration	Increased coordination to optimize existing services, improving future efficiencies  One stop shop for services- common assessment for all services	Restriction of funding designation  One-time allocation versus ongoing allocation
	Early Childhood Intervention	Awareness and prevention strategies to improve childhood outcomes	Increased prevalence of child abuse and neglect
	Healthy Communities	Cross-jurisdictional health care planning and implementation strategies.  High quality K-12 health education to address prevention issues  Community-based violence prevention program	Limited awareness of impact of violence on communities
<b>Government/Political</b>	Funding	Collective impact to meld funding streams to address issues	Increased health care costs
	Affordable Care Act	Increased prevention and early intervention (e.g. upstream care)	Expanded Medi-Cal enrollees impacts  Eligibility staffing levels
<b>Environment</b>	Built environment	Environments to support a healthier lifestyle  Public Health active participation and input in land use, zoning, transportation and built environment issues/decisions/planning	
	Transportation	Active transportation and transit elements with new construction and maintenance  Integrate low-cost, high-impact transportation solutions	

EL DORADO COUNTY YOUTH PHOTOVOICE PROJECT- *HEALTH THROUGH MY EYES\**



\*These are a sample of images. See video with youth narratives at [www.Welldorado.org](http://www.Welldorado.org)





## ADDITIONAL RESOURCES

### Centers for Disease Control and Prevention 10 Essential Public Health Services

<http://www.cdc.gov/nphpsp/essentialservices.html>

### Centers for Disease Control and Prevention Public Health System

<http://www.cdc.gov/nphpsp/essentialservices.html>

### El Dorado County Public Health

<http://www.edcgov.us/PublicHealth/>

### El Dorado County Youth Commission

<http://charter.edcoe.org/resources/edc-youth-commission>

### Healthy People 2020

<https://www.healthypeople.gov/>

### Mobilizing for Action through Planning and Partnerships (MAPP)

<http://archived.naccho.org/topics/infrastructure/Mapp/index.cfm>

### National Association of County and City Health Officials

<http://www.naccho.org/>

### Well Dorado

<http://www.WellDorado.org>

In addition, the following assessments were used to develop the information within the Community Health Assessment.

Full copies of the assessments are linked below and available at <http://www.WellDorado.org>

[Barton Health Community Health Needs Assessment](#), (2015).

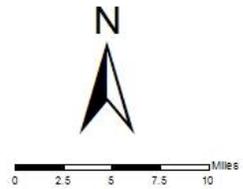
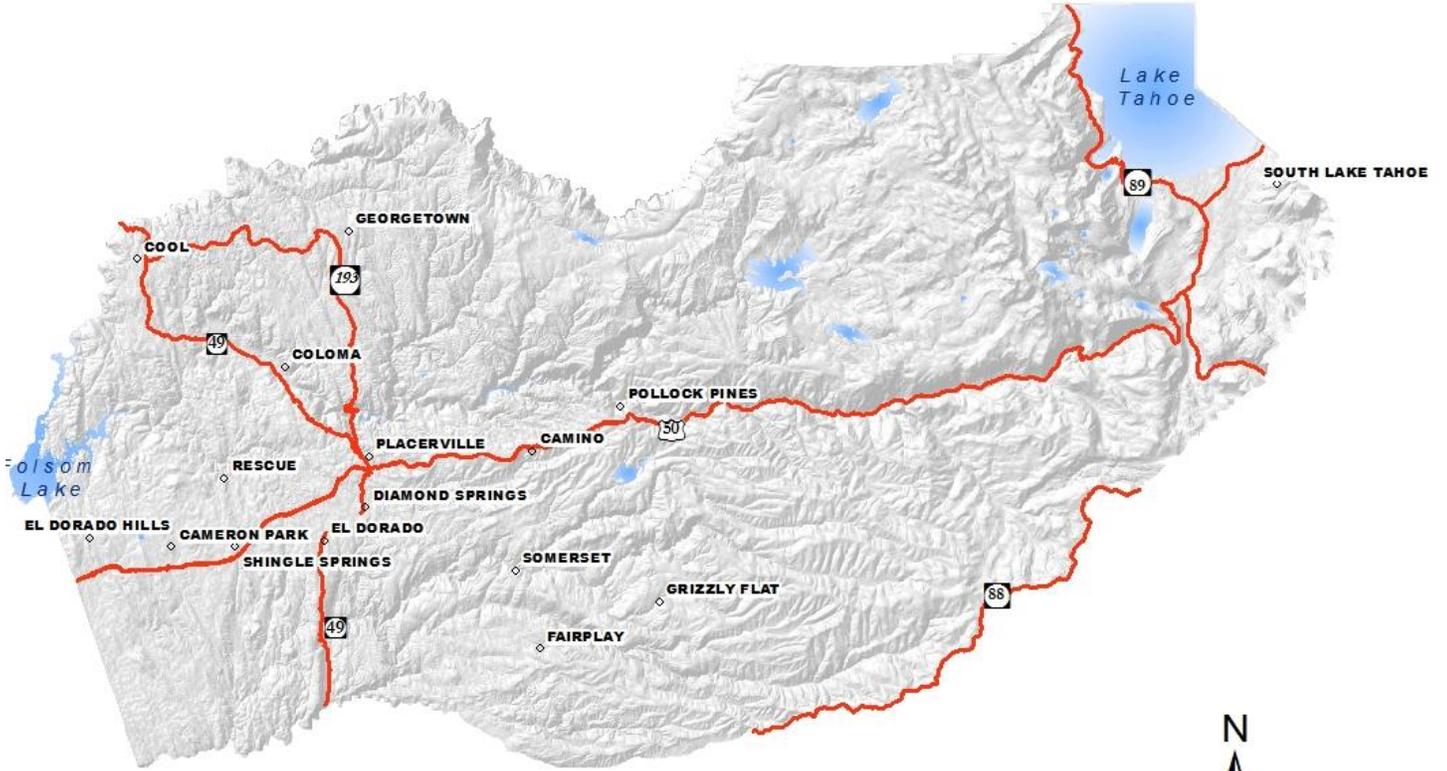
[El Dorado County Maternal Child Adolescent Needs Assessment](#), (2015).

[First 5 Community Needs Assessment](#), (2015).

[Healthy El Dorado County](#) (Community Health Status Assessment), (2014).

[Marshall Hospital Community Health Needs Assessment](#), (2013).

# El Dorado County, California



Map Source: Olivia Byron-Cooper, MPH  
2016

