

Community Health Improvement Plan (CHIP)

for San Mateo County

2024-2026

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"A community health improvement plan helps us work more effectively as a system and raise the overall health and wellbeing of all residents!"

"The plan brings together public and private institutions to care for the health and well being of all people, particularly those most in need."

– CHIP work group members

Message from the Health Officer

We are pleased to present this Community Health Improvement Plan (CHIP). The CHIP reflects the results of a collaborative and community-wide planning process that includes involvement by a variety of community members, agencies, organizations, and leaders. It is aimed at advancing the health and well-being of San Mateo County and is a blueprint for shared action that compels each of us, as individuals, organizations, and systems to dedicate our thinking, energy, time, and commitment to making significant health improvements.

It takes a collective effort to create and maintain a healthy and safe San Mateo County, requiring continued commitment to serve and support each other. The CHIP involves more than the roles and responsibilities of Public Health alone and we are appreciative of the diversity of valuable perspectives that contributed toward this plan. The CHIP moves beyond the realm of conventional public health to propose key strategies that address social conditions in our communities that significantly affect health, such as access to medical care, mental health, and social determinants of health. The priorities and strategies identified through the CHIP process will be implemented at the county level with the goal of improving community health and creating lasting, sustainable change.



By reviewing this plan, we hope you will understand how the community was engaged in this process, how data support the need for addressing the identified health issues, and recommendations for strategies/actions and partnerships to help improve the quality of life for San Mateo County residents.

We would like to thank all the many people who contributed their ideas, expertise, time, and commitment to develop this plan. We are planning for a continuous CHIP process every 3 years and as this is our first CHIP, we are grateful for the lessons learned during this process and will use those lessons to improve future planning.

We look forward to working with you to make a difference in the health of San Mateo County.

In partnership,

Kismet Baldwin-Santana, MD, MPH San Mateo County Health Officer

Community Health Improvement Plan for San Mateo County 2024-2026

Acknowledgements

Thank you to the dedicated individuals from the following local organizations who gave generously of their time and expertise to help guide the development of the Community Health Improvement Plan (CHIP) for San Mateo County 2024-2026:

- Ayudando Latinos A Soñar (ALAS)
- Bay Area Community Health Advisory Council (BACHAC)
- Belle Haven Action
- Cities of Redwood City and East Palo Alto
- Coastside Hope
- El Concilio of San Mateo County

- Health Plan of San Mateo
- One East Palo Alto (EPA)
- Novaworks
- Peninsula Health Care District
- Peninsula Family Services
- Ravenswood Family Health Center
- Redwood City Together

- San Mateo County Pride
- Second Harvest of Silicon Valley
- Senior Coastsiders
- Stanford University
- Star Vista
- Taulama for Tongans
- YMCA

Thank you to the various divisions of San Mateo County Health that contributed to the plan: Aging and Adults Services, Behavioral Health and Recovery Services, Family Health Services, San Mateo Medical Center, Public Health, Policy & Planning (PHPP).

We especially acknowledge the following members of the San Mateo County Health PHPP team who provided guidance and leadership to support the CHIP planning process: Curtis Chan, MD, Deputy Health Officer; Corina Chung, MS, Supervising Epidemiologist; Sara Cohen, PhD, LEAP Institute; Lucinda Dei Rossi, MPA, CPRP, Strategic Initiatives Manager; Heather Eastwood, PhD, Supervising Epidemiologist; Tamarra Jones, DrPH, Health Policy & Planning Manager and Public Health Equity Officer; Darryl Lampkin, Health Equity Management Analyst; Deandra Lee, MS, Racial Equity and Health Senior Community Health Planner; and Karen Pfister, MS, Epidemiology Program Manager.

Consultants

San Mateo County Health commissioned Conduent Healthy Communities Institute (HCI) to support facilitation and development of the CHIP for San Mateo County 2024-2026. Conduent collaborates with clients across the nation to drive improved community outcomes by providing expert guidance for assessing community needs, developing strategies, and implementing evaluation and monitoring processes. Consultants for this project included Era Chaudhry, MPH, MBA, Public Health Consultant and Jane Chai, MPH, Community Health Subject Matter Expert. To learn more about Conduent HCI, visit <u>conduent.com/community-health</u>.

Executive Summary

The Community Health Improvement Plan (CHIP) describes how San Mateo County Health and community partners will work towards a shared vision to improve health and advance health equity in San Mateo County. The plan is a result of a seven-month assessment and planning process engaging more than 90 partners, including representatives from the San Mateo County Health, community-based organizations, behavioral health organizations, hospitals, health plans, and community advocates and leaders. The plan considers findings from the county's most recent community health assessment and outlines objectives and strategies for collective action for the three selected priority areas. This is the first CHIP for San Mateo County; however, partners have previously collaborated on multiple assessments and plans which have informed our collaborative efforts.

Priority Area 1: Access to Health Care Services	 Strategy 1: Expand access to successful community-focused programs that improve access to health care services Strategy 2: Enhance coordination of access to health care services across County and community programs
Priority Area 2: Social Determinants of Health	 Strategy 1: Advocate for policies across sectors that improve the social determinants of health Strategy 2: Enhance coordination of delivery of essential services across County and community programs
Priority Area 3: Mental Health	Mental health is an important aspect of overall health and well-being. The Mental Health Work Group has conducted an extensive review of pertinent data and will utilize lessons learned to develop a plan that will support progress towards improved mental health outcomes in San Mateo County.

Purpose and Context

San Mateo County Health and its community partners are pleased to present the Community Health Improvement Plan (CHIP) for San Mateo County 2024-2026. The CHIP describes how San Mateo County Health and community partners will work towards a shared vision to improve health and advance health equity in San Mateo County. The purpose of the CHIP is to align community-wide strategies addressing key priority areas to improve health and quality of life for all who live, work, learn, and play in San Mateo County. The plan is used by health and other governmental, education, and human services agencies, in collaboration with community partners, to set priorities and coordinate and target resources.

This plan is a result of a seven-month planning process. Starting September 2023, San Mateo County Health Public Health, Policy & Planning (PHPP) facilitated a collaborative process to understand and improve the conditions that impact health in San Mateo County. More than 90 partners, including representatives from San Mateo County Health, community-based organizations, behavioral health, hospitals, health plans, and community advocates and leaders participated in this process.

The CHIP was grounded in a common vision of a healthier San Mateo County considering equity, community, and access as core concepts. Community partners also emphasized equity, community, inclusion, and transparency as key values driving the planning process. Focused on their shared vision and values, community partners reviewed and discussed findings from the recent Community Health Assessment (CHA) and identified three priority areas for collective action in the CHIP:

- Priority Area 1: Access to Health Care Services
- Priority Area 2: Social Determinants of Health
- Priority Area 3: Mental Health



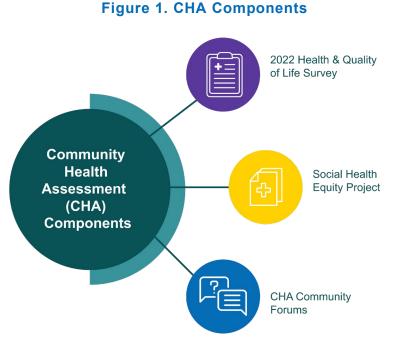
Work groups, composed of community partners and subject matter experts knowledgeable about community needs and services, met to discuss plans for each priority area. Work group members took part in a series of in-person and virtual workshops to gain consensus on goals, objectives, and strategies documented in this plan. The resulting implementation plans consider existing work and on-going initiatives, while also working to engage community partners across San Mateo County Health and community-based efforts.

Community Health Assessment Summary

San Mateo County's Community Health Assessment (CHA) was informed by the 2022 San Mateo County Health & Quality of Life Survey, the Social Health Equity Project led by the Bay Area Community Health Advisory Council (BACHAC), and CHA community forum discussions (see Figure 1).

2022 Health & Quality of Life Survey

The San Mateo County Health & Quality of Life Survey is a rich data source that covers health and quality of life of San Mateo County residents, including physical health, as well as environmental and social factors that influence health. The survey has been conducted every 3-5 years since 1998 by Professional Research Consultants, Inc. (PRC), first commissioned by the Healthy Community Collaborative of San Mateo County and later by the San Mateo County Health Office of Epidemiology and Evaluation. The goal of the survey is to gather information about the health needs and quality of life of San Mateo County resident. More than 3,000 San Mateo County adults completed the 2022 survey with oversampling of key populations including Latinx, African Americans, Pacific Islanders, LGBTQ+ individuals, populations with low income, and individuals from the coast.



The survey included measures on a range of topics including health risk behaviors such as smoking, physical activity, and overweight prevalence; prevention services such as cancer screenings and access to medical care; and quality of life indicators related to housing, social capital, childcare, transportation, and education. The full summary of the 2022 Health & Quality of Life Survey findings are provided in the <u>2023 Community Health Needs Assessment</u> published by San Mateo County Health Office of Epidemiology and Evaluation.

Social Health Equity Project

The Social Health Equity Project was conducted in 2023 by BACHAC using funding through Together Towards Health. The project aimed to continue collaborative efforts that began at the height of the COVID-19 pandemic to address health inequities

and create transformational change. Community members provided input about the process at each stage. The needs assessment included discussions with hospital stakeholders about barriers, collaboration efforts, and findings from each hospital's most recent Community Health Needs Assessment (CHNA). Community members met during a mini-Town Hall on March 22, 2023, to review CHNA results and discuss the impact of social determinants of health. Based on the assessment and conversations, the project developed recommendations related to policy, process, programs, and services. The Social Health Equity Project also identified the following prioritized community health needs: Mental/Behavioral Health; Income and Employment/Economic Stability; Housing and Homelessness; and Access to Care.

CHA Community Forums

In September and October 2023, San Mateo County Health PHPP partnered with community-based organizations to host seven CHA community forums throughout San Mateo County (see Figure 2). Five of the forums were conducted in English and two were conducted in Spanish.

Participants reviewed key findings from the 2022 Health & Quality of Life Survey and the Social Health Equity Project. Small group discussions were then conducted to learn more about community lived experiences using the following prompts:

- What are the top health-related issues people are facing in your community that you would change or improve?
- What types of things would make it easier for people in your community to be healthy?
- What are the barriers that make it harder to improve health issues at a community level?

Figure 2. 2023 CHA Community Forums

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HealthWays

Community Forum in Daly City with HealthWays on September 24

Coastside Hope

Community Forum in Half Moon Bay with Coastside Hope (Spanish) on October 11

Senior Coastsiders

Community Forum in Half Moon Bay with Senior Coastriders on September 20

Youth Community Service

Virtual Community Forum with Youth Community Service on October 19 Bay Area Community Health Advisory Council

Community Forum in San Mateo with Bay Area Community Health Advisory Council (BACHAC) on September 12

El Concilio

Community Forum in Redwood City with El Concilio (Spanish) on October 10

One East Palo Alto

Community Forum in East Palo Alto with One East Palo Alto (EPA) on October 2

CHA Findings

Figures 3 and 4 show the top nine health areas and priority populations identified based on the CHA community forums. The next pages show summaries of key findings from the 2022 Health & Quality of Life Survey and CHA community forum discussions.

Figure 3. Top 9 Health Areas

Top 9 Health Areas

(Alphabetical order)

- Access to Health Care Services
- Cancer
- Chronic Conditions (Heart Disease, Kidney Disease)
- Diabetes
- Mental Health & Mental Disorders
- Nutrition & Healthy Eating, Physical Activity
- Respiratory Diseases (Asthma, Other Lung Issues)
- Social Determinants of Health (Economic, Housing, Employment, Transportation)
- Substance Use (Alcohol & Drug Use, Tobacco Use)

Figure 4. Priority Populations

Priority Populations

(Alphabetical order)

- Adolescents (age 13-17 years*)
- Asian American populations
- Black or African American populations
- Children (age 1-12 years*)
- Immigrant, migrant, and refugee
 populations
- Latino / Latina / Latine / Latinx / Hispanic populations
- Lesbian, gay, bisexual + populations
- Older adults (age 65+ years*)
- Pacific Islander populations
- People experiencing homelessness
- Transgender populations

*Estimated age ranges provided to offer common terminology, but were not explicitly defined during community forums.

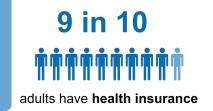
"We saw consistent themes with priorities across all health systems and County CHAs"

"Based on the work that BACHAC conducted, other CHAs showed that mental health, economic stability, housing and homelessness, and access to care were the top priorities."

– CHIP Kick-Off participants

2022 Health & Quality of Life Survey – Key Findings

Health insurance coverage increased from 87.7% in 2013 to 91.5% in 2022.



2 in 10 adults live with asthma

adults live with diabetes

Prevalence of chronic conditions such as arthritis, asthma, diabetes, and overweight and obesity have all increased from 2013 to 2022.

Homelessness increased by three times. from 1.4% in 2013 to 3.6% in 2022.



5.1% Food insecurity increased from 2.1% in 2013 to 5.1% in 2022.

3 in 4 adults rated availability

of affordable local housing as fair or poor.



Source: San Mateo County Health 2023 Community Health Needs Assessment

Average number of **poor** mental health days experienced in the last month in 2022. This is an increase from 2.1 days in 2013.

4.1

004 0 4 0



adults experienced depression in 2022. This is an increase from almost 1 in 4 in 2013.

1 in 10 adults reported being emotionally affected by racism.



2.4 Average number of days marijuana was used in the last 30 days in 2022. This is an

increase from 1.6 days in 2018.



22.8% of adults reported ever vaping in 2022 compared to

1 in 6

15.2% in 2018.

adults reported binge drinking in the last month.



2023 CHA Community Forums – Key Findings and Quotes



"Lack of insurance causes people to delay or not receive health care and their problems get worse."

"We are a wealthy community but we don't distribute it equitably."

"There is a need for a multi interdisciplinary approach to meet the needs of the community."

"Systemic racism seems to be one of the largest problems from what I'm noticing."

"Many in our community bring with them a culture of reluctance in seeking proper counseling and assistance with regards to health issues."

"Income is a barrier to healthy living."

"Cultural experiences affect mental health use of resources."

Language in quotes are direct quotations with original wording, spelling, and punctuation.

CHIP Planning Structure

The aim of the CHIP is to be a transparent community-driven process with shared leadership in future assessment, planning, and implementation processes. As this is the first CHIP for San Mateo County and no prior CHIP planning structure existed, San Mateo County Health PHPP provided guidance and leadership for this CHIP planning process.

Figure 5 shows the working and intended planning structure for the CHIP. To sustain future planning and implementation of the CHIP, the planning structure will evolve to include the San Mateo Community Health Improvement Collaborative with broad membership from community-based organizations.

- The San Mateo Community Health Improvement Collaborative will be established to guide and support the implementation of this and future iterations of the CHIP.
- CHIP Work Groups will be composed of San Mateo County Health and community partners with knowledge and expertise about the priority areas. Work groups will guide and support the development and ongoing work for each priority area.
- The CHIP Steering Committee will provide overall leadership for the CHIP. The committee will include representation from the San Mateo Community Health Improvement Collaborative and CHIP work group leadership.
- San Mateo County Health PHPP will continue to provide backbone support, offering capacity and administrative resources for the CHIP.



Figure 5. CHIP Planning Structure

Work group co-leads will work to further establish steering committee and provide overall leadership for the CHIP

Provide backbone support for the Community Health Improvement Collaborative

CHIP Planning

IN-PERSON PRIORITY AREA Workshops

November-December 2023

- Review CHA findings for each priority area
- Discuss current activities, barriers, and potential actions

CHIP KICK-OFF

November 1, 2023

- Discuss shared vision and values
- Review CHA findings
- CHIP prioritization activity

VIRTUAL PRIORITY AREA Workshops

December 2023-March 2024

- Refine vision, overarching goal, community level indicators
- Develop implementation plans

The Community Health Improvement Plan (CHIP) planning process started with a Kick-Off on November 1, 2023, and continued with a series of in-person and virtual workshops. As this is the first CHIP for San Mateo County and no prior CHIP planning structure existed, San Mateo County Health Public Health, Planning & Policy (PHPP) provided guidance and leadership for the planning process with broad participation from community partners.

More than 90 community partners attended the virtual Kick-Off session where San Mateo County Health PHPP shared the goals of the CHIP and the aim for the CHIP to be a community-driven process. Participants then discussed their shared vision and values, reviewed findings from the Community Health Assessment (CHA), and completed a process to prioritize the significant health areas to work on in the CHIP.

Vision and Values

Kick-Off attendees participated in an activity to identify their shared vision and values for the CHIP. Participants answered the following questions:

- What words come to mind when you think of healthier San Mateo County?
- What values do you think we should keep in mind as we create a Community Health Improvement Plan (CHIP) for San Mateo County?

Participants submitted their responses via Mentimeter, an interactive online presentation tool. Figures 6 and 7 show the word clouds generated based on collective responses. Larger words were submitted more times, highlighting consensus around the importance of those words to participants. As shown, some common words participants submitted for a vision of a healthier San Mateo County included:

- Equity
- Access
- Community

Community partners also emphasized key values for the planning process including:

- Equity
- Inclusion
- Transparency
- Community
- Honesty







Determining CHIP Priority Areas

After discussing their shared vision and values, the Kick-Off participants reviewed the key findings from the CHA (described in the CHA Summary section). Participants were then given time to access an online link and assign a score to each of the top nine health areas identified through the CHA. Participants were asked to consider the following:

- Significant health needs identified in the CHA
- How the health need or area aligned with the prioritization criteria (described below)
- The participant's knowledge, experience, and expertise

The following were the prioritization criteria and prompts to guide participants in scoring:

1. **Magnitude of the Issue** – How many people in the community are or will be impacted? How does the identified health need impact health, quality of life, and the conditions in which we live, work, and play? Has the need worsened over time? Are there differences in how the issue is experienced between different communities?



2. Ability to Impact – Can actionable and measurable goals be defined to address the health need? Are those goals achievable in a reasonable time frame? Does San Mateo County Health Public Health, Policy and Planning and its partners, including community-based organizations, have the expertise or resources to address the identified health need? Are organizations already addressing the health issue?

Key reflections for participants also included how these areas related to the root causes of health inequities, health disparities, and social determinants of health. Participants assigned a score of 1-3 to each health topic and criterion, with a higher score indicating a greater need for that topic to be prioritized. Numerical scores for the two criteria were equally weighted and averaged to produce an aggregate score and overall ranking for each health topic. The aggregate ranking is shown in Figure 8 on the next page.

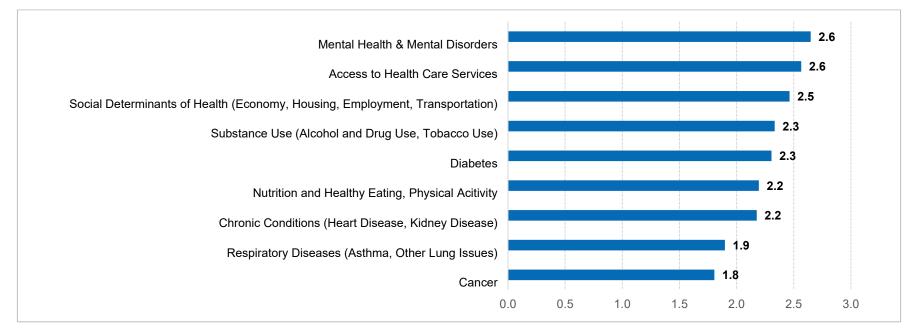


Figure 8. Overall Results of CHIP Prioritization Activity

Figure 9 shows the overall results of the CHIP prioritization activity. Based on results of the prioritization session, the top five health priorities identified were: Mental Health and Mental Disorders; Access to Health Care Services; Social Determinants of Health (including Economy, Housing, Employment, Transportation); Substance Use (Alcohol and Drug Use, Tobacco Use); and Diabetes.

The top three prioritized health areas were chosen as priority areas for the CHIP for San Mateo County 2024-2026 (Figure 8):

- Priority Area 1: Access to Health Care Services
- Priority Area 2: Social Determinants of Health
- Priority Area 3: Mental Health

Figure 9. San Mateo County CHIP Priority Areas



CHIP Planning Workshops

Once the priority areas were identified, Conduent Healthy Communities Institute (HCI) facilitated a series of in-person and virtual workshops with work groups for each priority area. Participants included community partners, providers, and subject matter experts knowledgeable about community needs and services for the priority area.

The first in-person workshop took place over a two-and-ahalf-hour meeting. Before the first workshop, participants received *Pre-Workshop Worksheets* and a list of evidencebased resources to prepare them for the conversation. During the workshop, Conduent HCI facilitated a group discussion on the questions below. The conversation was captured using Miro Board, a collaborative digital board (see Figure 10 for example). Participants discussed:

- Changes they would like to see based on findings from the CHA to inform the group's vision, goals, and community-level indicators to track progress
- Existing programs, activities and resources addressing the priority area
- Common barriers blocking improvement in the area
- Potential actions that the group could commit to that can inform the work group's strategies

After the initial in-person workshop, follow-up virtual sessions were held to refine the draft vision, overarching goal, and community-level indicators, and develop implementation plans for each priority area. Collaborative online tools including Miro Board, Google Jamboard, and shared Google documents were used to encourage engagement and interaction in the development of the plan during the virtual meetings. In some cases, smaller work groups met to foster more engaged discussions in completing details of the plans.

Figure 10. Access to Health Care Workshop Miro Board

Planning Framework Priority Health Area: Access to Health Care Quality of care and Quality Services for Net We Hone digital access) and flexible /ision Family Life Health lealth teracy poking at the current realities we've discussed, what substantial us get to our vision? Creating an Using the Elder Poverty umbrella Sharing income rganization fo Index as a eligibility collaborative eligibility policymakers fo model of care criteria policy change Resource availability to make changes rainings et Create a PI focus master menu healthcare provider or navigator of resources vesting in knowledge about the provider with grading and healthcare services are too high system nomeless oculation

The CHIP implementation plans outline the strategies that work groups will implement for

Plan Implementation and Progress Tracking

each priority area. The following components are outlined: 1) broad vision and goals and community-level indicators to track long-term progress; 2) strategies with measurable shorter-term objectives; and 3) specific activities, timelines, and lead organizations or individuals responsible. Priority area work groups will meet regularly to implement activities and track progress. The CHIP implementation plans will be regularly reviewed and revised to reflect evolving community needs, assets, and activities. Progress and updates will be shared on the San Mateo County All Together Better website at: <u>smcalltogetherbetter.org</u>.

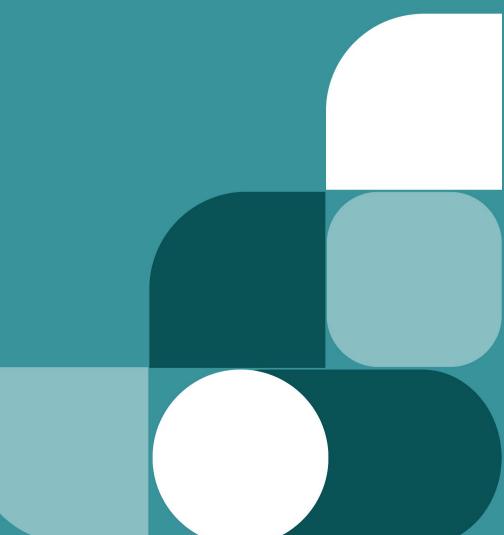
Limitations

- As this is the first CHIP for San Mateo County, San Mateo County Health PHPP staff
 provided guidance and leadership for the assessment and planning process. This may
 have limited communication with communities and impacted the ability for communities to participate or lead decision making.
 The aim of the CHIP is to be a transparent community-driven process with shared leadership in future assessment, planning, and
 implementation processes.
- Quantitative data reviewed as part of the CHA focused mostly on data from the 2022 Health and Quality of Life Survey, which
 included only adult participants, and to a lesser degree the 2020-2021 California Healthy Kids Survey, which surveys youth and
 adolescents. Findings from recent assessments about specific community groups conducted by community partners were not
 fully incorporated into the CHA. Future CHAs will aim to include more information about children, youth, and families, as well as a
 more complete assessment of information available through community partners.
- The CHIP Kick-Off and planning sessions were conducted in English, which limited participation from community members or partners who are unable to participate in English-only sessions. Some meetings were conducted virtually, which may have impacted participants with limited digital access or devices to join or fully participate in meetings.
- No specified funding exists to support objectives or activities identified in the CHIP. While there is aspiration to solicit future funding, or assess resources for redistribution, to support priorities, unfortunately there is no guarantee of funding. In addition, participating organizations are involved in implementing the CHIP on a voluntary basis. Typically, partners are engaged because they see the work as aligned with their mission or priorities. However, the funding uncertainty may limit the ability for some community partners to participate in the process and the types of activities that can be implemented as part of the CHIP.

"I am excited for a stronger and healthier future for San Mateo County with this great dream team of changemakers!"

- CHIP Kick-Off participant

CHIP Priority Areas and Plans



Priority Area 1: Access to Health Care Services

Expanding access to health services is important to improving health outcomes and reducing health disparities. Affordable health insurance and addressing economic, social, cultural, and geographic barriers are important factors to increasing access to health services.¹

Assets and Resources

San Mateo County has a range of existing resources to support access to health care services including, but not limited to:

- Safety net services providing health care services to those without insurance or are otherwise unable to access care
- Care navigation services that help individuals and families access needed health care
- Outreach and education services offered by County and community-based organizations
- Health and supportive health services such as oral health care, mental health care, substance use treatment, and nutrition services that support all aspects of wellness

Underlying Barriers

Some underlying barriers blocking improvement of access to health care services include:

- Workforce shortages, especially among those who can meet the cultural and linguistic needs of those most impacted by health inequities
- High cost of living in San Mateo County impacting the ability to retain quality health care staff and for community members to pay for services
- Need for more services and systems that meet the cultural, language, and literacy needs of community members
- Structural racism and mistrust in the health care system

"Healthcare is a human right – we cannot have a vibrant, livable and healthy community without easy access to high quality healthcare services."

– Access to Health Care Services Work Group member

Quick Facts

1 in 12 San Mateo County adults lack health insurance coverage.

1 in 5 San Mateo County adults experienced difficulty getting to a physician in the past year.

3 in 10 San Mateo County adults did not visit a dentist in the past year.

Source: San Mateo County Health 2023 Community Health Needs Assessment

¹Office of Disease Prevention and Health Promotion. (n.d.). Access to health services. *Healthy People 2030*. U.S. Department of Health and Human Services. <u>https://health.gov/health.go</u>

Priority Area 1: Access to Health Care Services

Vision: All individuals and communities in San Mateo County can easily access quality health care services that meet their holistic needs.

Overarching Goal: Increase the proportion of San Mateo community members who can easily

access quality health care services that meet their holistic needs, especially individuals and communities who are experiencing barriers caused by structural inequities including, but not limited to, racism, sexism, classicism, ageism, and homophobia.

Strategy 1: Expand access to successful community-focused programs that improve

access to health care services

Strategy 2: Enhance coordination of access to health care services across County and community programs

Community-Level Indicators: The following indicators from the 2022 Health & Quality of Life Survey were identified to help track long-term progress towards the goal:

Inc	dicators	2022 Value
•	Increase percentage of adults with health insurance coverage	91.5%
•	Increase percentage of adults who did not have transportation	91.7%
	barriers to access medical care in the past year	
•	Increase percentage of Pacific Islander adults with health	81.1%
	insurance coverage	
•	Increase percentage of adults living below 200% of the federal	
	poverty level who:	
	Have health insurance coverage	81.2%
	 Visited a dentist in the past year 	47.5%
	• Did not have transportation barriers to access medical care in the past year	79.1%

Access to Health Care Services Work Group

- Bay Area Community Health Advisory Council (BACHAC)
- Belle Haven Action
- Coastside Hope
- El Concilio of San Mateo County
- Health Plan of San Mateo
- Peninsula Family Service
- Peninsula Health Care District
- San Mateo County Health Edison & Mobile Clinics, Family Health, Health Policy & Planning, Office of Epidemiology & Evaluation, San Mateo Medical Center
- Senior Coastsiders
- Stanford University



Priority Area 1: Access to Health Care Services

Overarching Goal: Increase the proportion of San Mateo community members who can easily access quality health care services that meet their holistic needs, especially individuals and communities who are experiencing barriers caused by structural inequities including, but not limited to, racism, sexism, classicism, ageism, and homophobia.



Strategy 1:

Expand access to successful community-focused programs that improve access to health care services **Objective 1.1:** By December 2026, increase knowledge about successful community-focused programs that improve access to health care services, especially for populations impacted by structural inequities, among community providers.

Strategy 2:

Enhance coordination of delivery of health care services across County and community programs **Objective 2.1:** By December 2026, increase utilization of community navigators (e.g., community health worker, promotoras, family and community engagement coordinator) among medical providers.

Objective 2.2: By December 2026, increase completed referrals by successful programs that improve access to health care services, especially for populations impacted by structural inequities, among community providers.

Priority Area 2: Social Determinants of Health

Social determinants of health (SDOH) are the conditions in which people live, learn, work, and play that have a major impact on health, well-being, and quality of life. Examples of SDOH include safe housing, experiences of racism or discrimination, education and job opportunities, and access to clean air and water.²

Assets and Resources

San Mateo County has a range of existing resources to support social determinants of health including, but not limited to:

- Community navigation services that help link community members to needed services
- Food and nutrition services such as food banks offering food assistance or education about healthy eating
- Housing services to assist with housing costs or linkage to housing services
- Programs supporting financial literacy and economic development
- Transportation resources that help community members get to medical or other needed services

Underlying Barriers

Some underlying barriers blocking improvement of social determinants of health include:

- High cost of living and income inequality in San Mateo County
- Reactive rather than proactive approach to planning for services
- Separate or siloed workflows and funding streams, especially among organizations working in different sectors
- Mistrust and lack of visibility of the public health system

"We owe it to our communities, those with the greatest need and disparities, to have equitable access to the most basic needs for better health and wellbeing."

– SDOH Work Group member

Quick Facts

1 in 5 San Mateo County adults live below 200% of the federal poverty level.

4 in 9 San Mateo County adults have considered leaving the county due to cost of living in the past year.

1 in 6 San Mateo County adults living below 200% FPL did not have enough food on a regular basis.

Source: San Mateo County Health 2023 Community Health Needs Assessment

² Office of Disease Prevention and Health Promotion. (n.d.). Social determinants of health. *Healthy People 2030.* U.S. Department of Health and Human Services. <u>https://health.gov/healthypeople/priority-areas/social-determinants-health</u>

Community Health Improvement Plan for San Mateo County 2024-2026

Priority Area 2: Social Determinants of Health

Vision: A well-coordinated system across sectors that helps all individuals and communities in San Mateo County meet their essential needs.

Overarching Goal: Improve coordination among organizations providing essential services across sectors to all individuals and communities in San Mateo County, especially those currently experiencing disparities.

Strategy 1: Advocate for policies across sectors that improve the social determinants of health Strategy 2: Enhance coordination of delivery of essential services across County and community programs

Community-Level Indicators: The following indicators from the 2022 Health & Quality of Life Survey were identified to help track long-term progress towards the goal:

Indicators	2022 Value
 Increase percentage of adults who have enough food on a regular basis 	94.9%
 Increase percentage of adults who did not have transportation barriers to access medical care in the past year 	91.7%
 Increase percentage of adults living below of the 200% federal poverty level who did not have transportation barriers to access medical care in the past year 	79.1%
 Increase percentage of adults with a high school education or less who: 	
 Live above 200% of the federal poverty level 	51.3%
Have enough food on a regular basis	87.8%

Social Determinants of Health Work Group

- City of East Palo Alto
- City of Redwood City
- El Concilio of San Mateo County
- Health Plan of San Mateo
- Novaworks
- Peninsula Family Service
- Peninsula Health Care District
- Redwood City Together
- San Mateo County Health Communicable Disease Control & Prevention, Health Policy & Planning, Office of Epidemiology & Evaluation
- San Mateo County Pride
- Second Harvest of Silicon Valley
- Stanford University





Priority Area 2: Social Determinants of Health

Overarching Goal: Improve coordination among organizations providing essential services across sectors to all individuals and communities in San Mateo County, especially those currently experiencing disparities.



Advocate for policies across sectors that improve the social determinants of health **Objective 1.1:** By December 2026, increase knowledge about the policy ecosystem among the Community Health Improvement Collaborative.

Objective 1.2: By December 2026, increase knowledge about the impact of social determinants of health policies among major public and private entities/organizations/networks.

Strategy 2:

Enhance coordination of delivery of essential services across County and community programs **Objective 2.1:** By December 2026, increase social determinants of health screening by 50% at all client visits among all provider types (medical and social services).

Objective 2.2: By December 2026, increase completed referrals addressing social determinants of health.



Priority Area 3: Mental Health

Mental health is an important aspect of overall health and well-being. Mental health and physical health are intertwined. Mental disorders such as depression and anxiety can make it difficult to take part in healthy behaviors. Similarly, physical health problems can make it harder for people to get treatment for mental disorders.³

Assets and Resources

San Mateo County has a range of existing resources to support mental health including, but not limited to:

- School and community-based mental health programs and resources
- An integrated behavioral health services model and multiple locations
- Peer-based programs
- Warm and hotlines for mental health services
- Tailored programs for Pacific Islander, Samoan, Tongan, Black, Latinx, LGBTQ+, older adult, and Spanish-speaking communities
- Health equity initiatives in support of activities in diverse communities

Underlying Barriers

Some underlying barriers blocking improvement of mental health include:

- Stigma around discussing mental health issues
- Underfunding of resources and staffing
- Siloed funding and deliverables based on funding sources
- Structural racism and lack of cultural humility in the service system
- Uncertain trust in the service system

"In my area, mental health is a big problem [because] of the environment, youth are facing mental health issues, people are traumatized."

– CHA community forum attendee

Quick Facts

1 in 6 San Mateo County adults didn't have someone to turn to in the past month if they needed or wanted help.*

1 in 3 San Mateo County adults experienced symptoms of depression lasting more than two years.*

1 in 3 San Mateo County students felt so sad or hopeless for two or more weeks that they stopped doing usual activities in the past year.**

Sources: *San Mateo County Health 2023 Community Health Needs Assessment; **California Healthy Kids Survey

³ Office of Disease Prevention and Health Promotion. (n.d.). Mental health and mental disorders. *Healthy People 2030.* U.S. Department of Health and Human Services. <u>https://health.gov/healthypeople/objectives-and-data/browse-objectives/mental-health-and-mental-disorders</u>

Priority Area 3: Mental Health

The Mental Health Work Group met over a series of meetings starting November 2023. Due to the complex nature of this topic, the Mental Health Work Group utilized its time to consider additional assessments recently conducted by community partners to better understand the landscape for mental health services in order to develop a more well-rounded plan.

In early 2024, the work group reviewed data from the California Healthy Kids Survey as well as findings and recommendations from three local community assessments:

- African American Community Assessment presented by Bay Area Community Health Advisory Council (BACHAC)
- Latino/a/e Community Wellbeing Assessment presented by Ayudando Latinos A Soñar (ALAS)
- San Mateo County Tongan Community Assessment presented by Taulama for Tongans

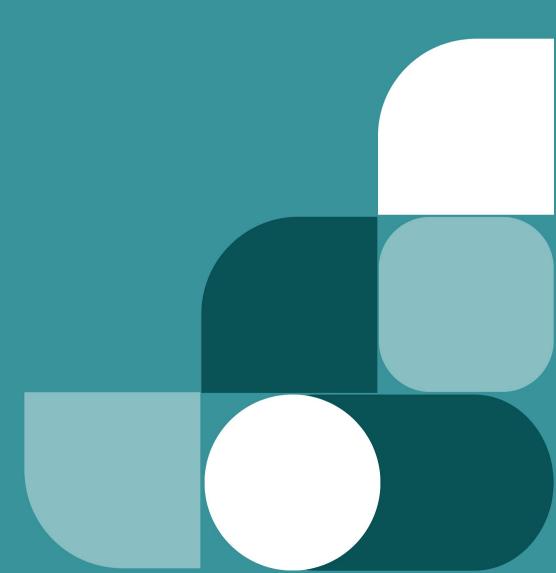
The Mental Health Work Group has conducted a thorough review of data and will focus future efforts on developing a plan that considers findings and recommendations from the additional community assessments to determine the best course forward for supporting progress towards improved mental health outcomes in San Mateo County.



Mental Health Work Group

- Ayudando Latinos A Soñar (ALAS)
- Bay Area Community Health Advisory Council (BACHAC)
- El Concilio of San Mateo County
- Health Plan of San Mateo
- One EPA
- Peninsula Health Care District
- Ravenswood Family Health Center
- San Mateo County Health Aging and Adult Services, Behavioral Health and Recovery Services, Edison Clinic, Family Health, Health Policy & Planning, Office of Epidemiology & Evaluation
- Stanford University
- Star Vista
- Taulama for Tongans
- YMCA

Appendices



A. Glossary of Key Terms

The following are working definitions of key concepts or terms in this report. These definitions may be updated as shared understanding of the terms evolve with continued community conversations.

Black and African American: Black refers to people of the African diaspora, which includes those in the Americas, the Caribbean, and Europe. African American refers to Americans of African descent. Preference of one over the other is up to individuals.

Community Health Assessment (CHA): A CHA is a process involving the community that identifies key health needs and issues of the community through comprehensive data collection and analysis. A CHA can also be referred to as a Community Health Needs Assessment or CHNA. San Mateo County's most recent CHA was informed by the 2022 San Mateo County Health & Quality of Life Survey, the Social Health Equity Project led by the Bay Area Community Health Advisory Council (BACHAC), and CHA community forums.

Community Health Needs Assessment (CHNA): A CHNA is a process involving the community that identifies key health needs and issues of the community through comprehensive data collection and analysis. A CHNA can also be referred to as a CHA (see above).

Community Health Improvement Plan (CHIP): A CHIP is a report developed with the community that outlines key objectives and strategies to improve health in a community based on the CHA. The CHIP for San Mateo County describes how San Mateo County Health and community partners will work towards a shared vision to improve health and advance health equity in San Mateo County. The purpose of the CHIP is to align community-wide strategies addressing key priority areas to improve health and quality of life for all who live, work, learn, and play in San Mateo County.

Community-Level Indicators: Indicators at the population or community level that help track long-term progress towards goals.

Health Disparities: Preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by populations that have been disadvantaged by their social or economic status, geographic location, and environment.

Health Equity: The state in which everyone has a fair and just opportunity to attain their highest level of health. Achieving health equity requires efforts to address historical and existing injustices, overcome social and economic obstacles to health and healthcare, and eliminate preventable health disparities.

Health Inequities: The uneven distribution of social and economic resources that impact an individual or community's health. Health inequities often result in disparities in health outcomes between populations.

Latine or Latinx: Latine and Latinx are a gender-neutral terms often used in lieu of the gendered "Latino" or "Latina" when referring to individuals with cultural ties to Latin America and to individuals of Latin American descent.

LGBTQ+: LGBTQ+ is an adjective applied to communities of people who identify as lesbian, gay, bisexual, transgender, and/or queer.

Pacific Islander: These terms refer to a person having origins in any of the indigenous peoples of Hawaii, Guam, Samoa, Tonga, or other Pacific islands. They encompass a diverse set of at least twenty distinct communities that originated in Melanesia, Micronesia, and Polynesia. The Pacific Islander community can also be referred to as "Native Hawaiian and Pacific Islander" or "Native Hawaiian and Other Pacific Islander."

Quality Health Care Services: Quality health care services refers to services that improve health outcomes while ensuring equity and patient well-being. To realize the benefits of quality health care, health services should be provided in a timely manner with minimal wait times and delays, provide care equitably to all individuals and communities, and offer the full range of services to support optimal health and well-being.

Racism: A system of structure, policies, practices, and norms that assigns values and determines opportunities based on the way people look or the color of their skin. This results in conditions that unfairly advantage some and disadvantage others. Racism can negatively affect the mental and physical health of people and prevent them from attaining their highest level of health.

Social Determinants of Health (SDOH): Social determinants of health are the conditions in which people live, learn, work, play, and worship that have a major impact on health, well-being, and quality of life. Examples of SDOH include safe housing, experiences of racism or discrimination, education and job opportunities, and access to clean air and water.

Structural Racism: Structural racism refers to the way key areas of society (education, employment, health care, housing, and law enforcement) are structured to benefit the group in power and hinder racial and ethnic minority groups. Because of structural racism, health care can be difficult to access, navigate, and pay for, especially for historically marginalized groups.

B. Additional Strategies Considered

Access to Health Care Services

The Access to Health Care Services Work Group identified two strategies to work on together in the next three years.

- Strategy 1: Expand access to successful community-focused programs that improve access to health care services
- Strategy 2: Enhance coordination of access to health care services across County and community programs

In addition to the above strategies, the Access to Health Care Services Work Group identified strategies that they felt could best be addressed through collaboration and support with other planning bodies and activities:

- Establish a thoughtful community-driven multisector body to support the CHIP's progress. The CHIP Steering Committee will lead this effort as this strategy applies to the work of the CHIP, rather than a single work group.
- Advocate for policy solutions that mitigate underlying systems of health inequities. The work group agreed that
 addressing the underlying causes of health inequities by advocating for policy solutions was an important aspect of
 increase access to health care services and supports the Social Determinants of Health Work Group in their work in
 this area.
- Support and advocate for investments to address workforce development and retention. The work group felt this was an important strategy addressing a common cause impacting access to health care services. However, rather than working on this strategy directory, the work group felt San Mateo County Health Public Health, Policy & Planning (PHPP) may be more effective in making progress in this area in the next three years. The work group has requested that San Mateo County Health PHPP incorporate this strategy in their upcoming strategic planning process and has agreed to provide support where needed.

Social Determinants of Health

The Social Determinants of Health (SDOH) Work Group identified two strategies to work on together in the next three years.

- Strategy 1: Advocate for policies across sectors that improve the SDOH
- Strategy 2: Enhance coordination of delivery of essential services across County and community programs

In addition to the above strategies, the SDOH Work Group identified strategies that they felt could best be addressed through collaboration and support with other planning bodies and activities:

- *Establish a thoughtful community-driven multisector body to support the CHIP's progress.* The CHIP Steering Committee will lead this effort as this strategy applies to the work of the CHIP, rather than a single work group.
- Align San Mateo County Health activities to build community trust and elevate public health work. The work group will provide input and has requested that San Mateo County Health PHPP incorporate this strategy in their upcoming strategic planning process.

C. Additional Resources

San Mateo County Health 2023 Community Health Needs Assessment: This report brings together community health and quality of life indicators in San Mateo County gathered from both primary and secondary data sources by San Mateo County Health Office of Epidemiology and Evaluation. The report includes findings from the 2022 San Mateo County Health & Quality of Life Survey that contributed to the Community Health Assessment (CHA) for this plan. In addition, the report also includes additional data sources on the health of San Mateo County residents, including California Department of Public Health birth and death data, California Department of Finance population estimates, California Department of Education student data, California Health Kids Survey, the U.S. Census Bureau American Community Survey, and many others. The full report is available at: smcalltogetherbetter.org/content/sites/sanmateo/Reports/SMC_CHNA_2023.pdf

San Mateo County Health Public Health, Policy & Planning (PHPP) Strategic Direction website: This website provides information and resources related to the 2023 community health assessment and planning process. The website is available at: <u>smchealth.org/phpp-strategic-direction-0</u>

San Mateo County (SMC) All Together Better website: This website, sponsored by San Mateo County Health PHPP, contains data on health outcomes, health behaviors, health care access, and socioeconomic conditions for San Mateo County, including data from the San Mateo County Health & Qualify of Life Survey. Progress and updates about San Mateo County's CHA and Community Health Improvement Plan (CHIP) will be shared on the website. The website is available at: smcalltogetherbetter.org

Community Health Improvement Plan (CHIP) for San Mateo County 2024-2026

More info at: <u>smcalltogetherbetter.org</u>

