



# 2017 ANNUAL REPORT

**SAN BERNARDINO COUNTY**  
2015-2020 Community Transformation Plan





**WE ENVISION** a *complete county* that capitalizes on the diversity of its people, its geography, and its economy to create a broad range of choices for its residents in how they live, work, and play.

**WE ENVISION** a *vibrant economy* with a skilled workforce that attracts employers who seize the opportunities presented by the county's unique advantages and provide the jobs that create countywide prosperity.

**WE ENVISION** a *sustainable system* of high-quality education, community health, public safety, housing, retail, recreation, arts and culture, and infrastructure, in which development complements our natural resources and environment.

**WE ENVISION** a *model community* which is governed in an open and ethical manner, where great ideas are replicated and brought to scale, and all sectors work collaboratively to reach standard goals.

From our valleys, across our mountains, and into our deserts, we envision a county that is a destination for visitors and a home for anyone seeking a sense of community and the best life has to offer.

*Adopted by the San Bernardino County Board of Supervisors and San Bernardino Associated Governments Board of Directors*

*June 30, 2011*

# OUR COMMUNITY VITAL SIGNS COMMUNITY TRANSFORMATION PLAN

Our Community Vital Signs Community Transformation Plan 2015-2020 is intended to drive discussion at the community level, and future alignment of strategies and resources in order to achieve wellness in our County.

The information contained in this 2017 Annual Report is intended for use by residents, all sectors, networks and partnerships to review implementation and progress of the Community Transformation Plan, and work completed in addressing the four health priority areas.

- Our **Community Transformation Plan 2015-2020** and **executive summary** are available online at [www.communityvitalsigns.org](http://www.communityvitalsigns.org)
- Our **Community Transformation Plan 2017 Addendum** is available online at: [www.communityvitalsigns.org](http://www.communityvitalsigns.org)
- Our **Community Vital Signs 2013 Final Report** is available online at: [www.communityvitalsigns.org](http://www.communityvitalsigns.org)
- Our **Community Vital Signs Open Performance Site** is available online at: <https://data.communityvitalsigns.org>
- For further information please contact **Community Vital Signs** at: [CommunityVitalsigns.SanBernardinoCounty@dph.sbcounty.gov](mailto:CommunityVitalsigns.SanBernardinoCounty@dph.sbcounty.gov)

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youtube.com/watch?v=bIBECzyDzDo&feature=youtu.be

# MESSAGE FROM THE COMMUNITY VITAL SIGNS STEERING COMMITTEE CO-CHAIRS

November 6, 2017

Dear Community Vital Signs Partners,

Community Vital Signs (Vital Signs) is leading communitywide efforts to improve the health and wellness of all county residents. In June 2015, Vital Signs released the San Bernardino County Community Transformation Plan 2015-2020 as a roadmap to guide the county into improving wellness and quality of life for San Bernardino County residents. The 2017 Addendum to the Community Transformation Plan (CTP) includes Action Plans with goals, objectives, performance measures and cross cutting strategies for the four priority areas of Education, Economy, Access to Health and Wellness and Safety. These Action Plans were developed with community stakeholder input and will serve as a guide for partners to align their work and leverage resources and efforts to empower the community to make healthy choices.

The CTP 2017 Annual Report provides an update on progress made to implement the CTP including data indicators, strategies, areas of collective action and recommendations for next steps. Updates on activities to advance the CVS Community Transformation Plan 2015-2020 in this report were developed from meeting information and lead person/organization reports for the Implementation Action Plans.

We hope that you will find this 2017 Annual Report to be a useful tool as you work with us to build a culture of health and wellness in our community.



**Maxwell Ohikhuare, Co-Chair**  
*San Bernardino County  
Department of Public Health*

A handwritten signature in cursive script that reads "Ohikhuare MD".



**Barbara Alejandre, Co-Chair**  
*San Bernardino County  
Superintendent of Schools*

A handwritten signature in cursive script that reads "Barbara M. Alejandre".



## VISION

We envision a county where a commitment to optimizing health and wellness is embedded in all decisions by residents, organizations and government.

## VALUES

***Community Vital Signs is guided by the following values:***

**Community-Driven:** Shared leadership by and for residents, engaging and empowering all voices

**Cultural Competency:** Respecting and valuing diverse communities and perspectives

**Inclusion:** Actively reaching out, engaging, and sharing power with diverse constituencies

**Equity:** Access to participation, resources and services, addressing historical inequities and disparities

**Integrity and Accountability:** Transparent and cost-effective use of resources

**Collaboration:** Shared ownership and responsibility

**Systemic Change:** Transform structures, processes, and paradigms to promote sustained individual and community health and well-being

## PURPOSE

Community Vital Signs is a community health improvement framework jointly developed by San Bernardino County residents, organizations and government. It builds upon the Countywide Vision by setting evidence-based goals and priorities for action that encompass policy, education, environment, and systems change in addition to quality, affordable, and accessible health care and prevention services. It provides the basis for aligning and leveraging resources and efforts by diverse agencies, organizations, and institutions to empower the community to make healthy choices.



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# ACKNOWLEDGMENTS

Vital Signs would like to thank the members that serve on the Steering Committee, subcommittees and Implementation Action Planning Workgroups, and whose commitment of time, resources and expert counsel has guided the implementation of the Community Transformation Plan.

## Community Vital Signs Steering Committee

Barbara Alejandre  
Dr. Juan Carlos Belliard  
Sarah Eberhardt-Rios  
Diana Fox  
Mike Gallo  
Peggi Hazlett  
George Lamb  
Josh Lee  
Kathleen McDonnell  
Ron Markegard  
Dr. Maxwell Ohikhuare  
Cid Pinedo  
Keven Porter  
Scott Rigsby  
Dr. Deanna Stover  
Dr. Monica Wilson  
Dr. Jay Fiene

San Bernardino County Superintendent of Schools  
Loma Linda University Health  
San Bernardino County Behavioral Health  
Reach Out  
Kelly Space and Technology  
Ontario Chamber of Commerce  
Faith Advisory Council for Community Transformation  
San Bernardino County Transportation Authority  
Dignity Health  
San Bernardino County Sheriff's  
San Bernardino County Public Health  
National CORE  
Hospital Association of Southern California  
San Bernardino County Public Health  
Community Health Association Inland Southern Region  
San Bernardino County Behavioral Health Commission  
California State University, San Bernardino





## ***Community Vital Signs Joint Committee and Implementation Workgroup Partners***

California State University, San Bernardino

City of Colton

City of Ontario

Community Health Association Inland  
Southern Region

Dignity Health

Faith Advisory Council for Community  
Transformation

First Five San Bernardino

Hope through Housing

Hospital Association of Southern California

Inland Empire Economic Partnership

Inland Empire Health Plan

Kelly Space & Technology

Loma Linda University Health

Marc Steinorth, Assemblyman, 40th District

Molina Healthcare

National CORE

Ontario Montclair School District

Promotoras De Salud Mental

Ontario Chamber of Commerce

Partners for Better Health

Reach Out

Revive Our Old Town –Victorville

San Bernardino City Unified School District

San Bernardino County Administrative Office

San Bernardino County Department of  
Behavioral Health

San Bernardino County Behavioral Health  
Commission

San Bernardino County Board of Supervisor

San Bernardino County Department of Public Health

San Bernardino County District Attorney

San Bernardino County Economic Development Agency

San Bernardino Council of Governments

San Bernardino County Preschool Services Department

San Bernardino County Probation Department

San Bernardino County Public Defender

San Bernardino County Sheriff's Department

San Bernardino County Sheriff's-Coroner Department

San Bernardino County Superintendent of Schools

San Bernardino County Transportation Authority

San Bernardino County Workforce Development Board

St. Mary Medical Center

Transforming Lives Charter School

# COMMUNITY TRANSFORMATION PLAN - PRIORITY AREAS, GOALS, AND OBJECTIVES

## PRIORITY AREA 1: EDUCATION

GOALS	OBJECTIVES
1. <b>Increase high school graduation rates</b>	<ul style="list-style-type: none"> <li>a. Increase high school graduation rates</li> <li>b. Increase the percentage of students who are proficient readers by 3<sup>rd</sup> grade</li> </ul>
2. Increase postsecondary education attainment rates	<ul style="list-style-type: none"> <li>a. Increase the percentage of adults who have a Bachelor's degree or higher</li> <li>b. Increase the percentage of adults who enter or complete college, and/or workforce training with 21<sup>st</sup> century skills</li> </ul>

## PRIORITY AREA 2: ECONOMY

1. <b>Decrease the percentage of families living in poverty</b>	<ul style="list-style-type: none"> <li>a. Decrease the percentage of individuals living in poverty</li> <li>b. Decrease the percentage of children (under 18 years) living in poverty</li> <li>c. Increase Industry Employment by Sector</li> </ul>
2. Increase access to safe and affordable housing	<ul style="list-style-type: none"> <li>a. Decrease the number of homeless individuals</li> <li>b. Decrease the percentage of residents who spend more than 30% of their income on housing</li> </ul>

## PRIORITY AREA 3: ACCESS TO HEALTH AND WELLNESS

1. <b>Increase the percent of residents who have and regularly access a usual source of care</b>	<ul style="list-style-type: none"> <li>a. Increase the percentage of residents who have a usual source of care</li> <li>b. Increase the percentage of residents with health insurance coverage</li> <li>c. Decrease the percentage of residents who delayed or did not get medical care in the past year</li> </ul>
2. Increase behavioral health awareness	<ul style="list-style-type: none"> <li>a. Decrease the percentage of 7th graders who reported feeling sad and hopeless every day for two weeks or more that they stopped doing some usual activities</li> </ul>
3. Increase access to behavioral health services	<ul style="list-style-type: none"> <li>a. Increase the rate of residents accessing behavioral health services under the Department of Behavioral Health, safety net systems, Medi-Cal managed care (IEHP, Molina), and commercial insurance</li> </ul>

Implementation Action Plans were developed for those Priority Area Goals shown in **bold type**. Goals and strategies were defined by the Action Planning Workgroups based on feasibility, effectiveness and resources available between 2016 -2017.

### PRIORITY AREA 3: ACCESS TO HEALTH AND WELLNESS

#### GOALS

#### OBJECTIVES

- |  |  |
|--|--|
| 4. Reduce the misuse and abuse of alcohol, prescription, and other drugs in the community  | a. Decrease the percentage of youth (21 and under) who misused alcohol or other drugs in the past year   |
| 5. Decrease the prevalence and increase the management of chronic diseases (including diabetes, obesity, and cardiovascular disease) | a. Decrease the percentage of the adult population ever diagnosed with diabetes<br>b. Decrease the percentage of adults ever diagnosed with high blood pressure<br>c. Decrease the hospitalization rate for cardiovascular disease (heart disease)<br>d. Decrease the percentage of obese adults<br>e. Decrease the percentage of teens, age 12-17 that are overweight/obese |
| <b>6. Increase the number of residents engaged in active living activities</b>   | a. Increase the percentage of teens (12-17) who met the CDC recommendation of 1 hour or more of daily physical activity<br>b. Increase the number of bike trails   |

### PRIORITY AREA 4: SAFETY

- |  |  |
|--|--|
| 1. <b>Reduce the crime rate across San Bernardino County</b> | a. Decrease the crime rate per capita<br>b. Decrease the number of gang members<br>c. Increase positive relationships between residents and Police/Fire Departments<br>d. Decrease juvenile crime rate |
| 2. Improve children's perception of safety at school         | a. Increase the percentage of 9 <sup>th</sup> grade students who reported feeling safe or very safe at school  |



# COMMUNITY TRANSFORMATION PLAN 2015-2020

## 2017 Annual Report

### INTRODUCTION

In June 2015, the Community Vital Signs Initiative (Vital Signs) released the Community Transformation Plan (CTP) 2015-2020 to serve as a health improvement framework for San Bernardino County. The CTP aligns with the Countywide Vision calling for community collaboration on creating a vibrant, physically, and economically healthy county over the next 20 years. The purpose of the CTP is to describe how partners and the community will work together to create opportunities to transform San Bernardino County into a healthier place to live, work, learn and play. The CTP is intended to be a long-term systematic effort to address priority issues that affect community health. The Community Transformation Plan includes collective goals, indicators to measure success, and potential crosscutting strategies and policy recommendations for addressing the health priority areas of: (1) Education; (2) Economy; (3) Access to Health and Wellness (includes: Access to Healthcare, Behavioral Health, and Healthy Behaviors), and (4) Safety (includes: Community Safety and School Safety).

The Community Transformation Plan 2017 Annual Report provides an update on progress made to implement the CTP and covers the timeframe between July 2015 to October 2017. This report describes progress made on strategy implementation and includes any revisions made to the strategies and performance indicators as the CTP was reviewed and assessed in collaboration with stakeholders, partners and the community during the CVS Joint Committee, Implementation Action Planning Workgroup Meetings and community presentations between January and September 2017. Revisions can be based on the feasibility and effectiveness of the strategies and/or changing priorities, resources, or community assets. In September and October 2017, Implementation Action Plans were reviewed with the Key Partners/Responsible Organization to assess progress made to achieve activities and any revisions needed.

The CTP 2017 Annual Report contains a summary of process indicators used to measure the progress toward meeting CTP goals and objectives, data dashboards and progress toward implementing various strategies. The data dashboards summarize the review of key data indicators for each health priority area as compared to the baseline values published in the CTP 2015-2020. County trend indicator arrows are colored based on **green** (good progress being made toward objective), **yellow** (slow progress being made toward objective) and **red** (stagnation or movement in the opposite direction of objective). Under each data dashboard are the action plans outlining the health priority area goal, strategy, activities and achievements. The 2017 Annual Report contains ~~struck~~ or underlined text to show revisions. For example, the Access to Health and Wellness Goal 6 action plan strategy has been revised by adding an overarching statement to “promote health in all policies as it relates to the built environment” and the reference to promoting health elements in city general plans has been moved to the list of activities under the strategy. The progress notes column reflects the 2017 status of each activity for each quarter. The 2017 Annual Report was presented and discussed at the CVS Steering Committee meeting on November 20, 2017.

# 2017 CTP PROGRESS REVIEW

**CTP 2015-2020 Progress:** The following process indicators were used to measure progress toward achieving CTP goals and objectives.

2015-2020 Process Indicator		2017 Progress Review
2015	1. <b>By August 2015</b> , begin the bimonthly CTP Implementation and Communication Committee Meetings	Ongoing; Committees joined in 2016 and meet bi-monthly
2016	2. <b>By February 2016</b> , develop, distribute and analyze CVS Partner Activation Inventory Survey	Completed
	3. <b>By January 2016</b> , develop the CVS Strategic Communications Plan	Completed
	4. <b>By December 2016</b> , discuss CTP goals, objectives and align potential strategies into the CTP Implementation Strategy Grid	Completed
2017	5. <b>By January 2017</b> outline progress tracking and evaluation activities	Completed
	6. <b>By February 2017</b> begin biweekly priority area Implementation Action Planning (IAP) Workgroup meetings	Completed; IAP Workgroup meetings; held from February-October 2017
	7. <b>By March 2017</b> , promote CVS Initiative at the San Bernardino City-County Conference through the Vision2BActive campaign	Completed
	8. <b>By May 2017</b> , present on the CVS Open Performance Site, Access to Health and Wellness Priority Strategies for the built environment and community health workers at the 2017 National Innovative Communities (NIC) Conference in Ontario, CA	Completed
	9. <b>By June 2017</b> integrate the CTP population measures and launch the Community Vital Signs Open Performance Site (open data portal)	Completed; Launched May 24, 2017
	10. <b>By July 2017</b> , establish quarterly CTP Implementation Progress Tracking	Ongoing
	11. <b>By October 2017</b> develop and disseminate Community Transformation Plan 2015-2020, 2017 Addendum	Completed; CVS SC approved CTP 2017 Addendum September 2017
	12. <b>By November 2017</b> create and disseminate the first CTP 2017 Annual Report	Completed; CVS SC approved the 2017 Annual Report on November 20, 2017
	13. <b>By November of each year</b> publish annual CTP Annual Report	Ongoing

# CTP 2015-2020 DATA DASHBOARDS AND STRATEGY IMPLEMENTATION

Highlights from the 2017 review of key data indicators for each CTP Priority Area as compared to the baseline values published in the CTP 2015-2020 is provided below. The 2020 target value is what, in the year 2020, we hope to see for the most recent data year available. Indicator sources can be found in the 2017 Addendum, Appendix C: Indicator Data.

County trend indicator arrows are colored based on **green** (good progress being made toward objective), **yellow** (slow progress being made toward objective) and **red** (stagnation or movement in the opposite direction of objective).

In addition, progress toward meeting CTP goals and strategies as well as key partners/responsible organizations are provided.



## EDUCATION

There is much evidence linking educational attainment and high school graduation rates to improved health outcomes.

### EDUCATION DATA DASHBOARD

Education Objectives	HP 2020	CTP Baseline Data	Current San Bernardino County Data	2018 Target (5% improve)	2020 Target (10% improve)	County Trend
Increase high school graduation rates	82%	78.6% (2012-13)	83% (2015-16)	82.5%	86.5%	↑ 2018 Target Met
Increase percentage of students who are proficient readers by 3 <sup>rd</sup> grade*	NA	31.0% (2014-15)	37.8% (2016-17)	32.6%	34.1%	↑ 2020 Target Met
Increase percentage of adults who have a Bachelor's degree or higher	NA	19.1% (2013)	20% (2016)	20.1%	21.0%	↑
Increase the percentage of adults who enter or complete college, and/or workforce training with 21 <sup>st</sup> century skills	NA	NA	NA	NA	NA	Indicator Under Development

**NA:** Not Available, **HP2020:** Healthy People 2020

\*This indicator was not available at the time the CTP was published.



# STRATEGY IMPLEMENTATION PROGRESS

CTP Goals and Strategies	Key Partners/ Responsible Organization	2017 Q1 Status	2017 Q2 Status	2017 Q3 Status
<p><b>Education Goal 1:</b> Increase high school graduation rates</p> <p><b>Strategy 6:</b> Strengthen the connection between 0-5 and K-12 education <u>by successfully implementing the Footsteps2Brilliance (F2B) early literacy mobile platform for ages 0-5 years to improve literacy attainment to increase the number of children who will be proficient readers by 3<sup>rd</sup> grade.</u></p>	<p>Vision2Read</p> <p>Partners: SBCSS County Preschool Services, First 5 San Bernardino, Children's Fund</p>	<p>First F2B cohort of 1,500 students established</p>	<p>F2B campaign launched April 2017. National press conference held on April 2017; F2B demo presented at the May 2017 NIC Conference in Ontario, CA</p> <p>5M words read.</p>	<p><b>In Progress</b></p> <p>SBCSS launched the F2B literacy platform in early 2017 and established cohort of 1500 students. F2B summer data showed 4.5M words read. As of November, 28 million words were read by children countywide and F2B was honored with the Polaris Award. Literacy programs were identified and linked on the V2R website. A curriculum was developed and used for F2B training of the trainers. F2B continues to conduct outreach and promotional events; and trainings.</p>
<p><b>Education Goal 1:</b> Increase high school graduation rates</p> <p><b>Strategy 33:</b> Improve information sharing, data collection, and reporting systems to identify, analyze and communicate information across all sectors to improve outcomes for at-risk students, residents, and communities, including:</p> <ul style="list-style-type: none"> <li>a) Enable data sharing across managed care, hospitals, government, and other primary and behavioral health providers;</li> <li>b) Create a consumer-focused information web portal for county that guides users and simplifies resource navigation within the county; and</li> <li>c) Include active Transportation and nutrition information/resources</li> </ul>	<p>SBCSS</p>	<p>SBCSS identified funding for Open Data Platform (public and secure portals) for three years. Developed scope of work with legal guidance. Contract executed with BrightBytes</p>	<p>Open Data Portal (public) was launched.</p> <p>SBCSS encouraged Superintendents to support the portal.</p> <p>SBCSS solicited districts to develop a secure portal; 10 districts interested in the project.</p>	<p><b>In Progress</b></p> <p>The public data portal was launched in June 2017 and work is in progress for the secure portal. SBCSS is working with various partners for data sharing and collection. The portal is active and linked to schools districts' data. Work will continue to monitor use of portal. SBCSS will continue work with the Interactive Cradle to Career Roadmap to identify evidence-based practices for each pillar of support.</p>
<p><b>Education Goal 1:</b> Increase high school graduation rates</p> <p><b>Strategy 40:</b> Consider development of community resident advisory groups (to increase parent, consumer, and youth involvement) to inform health policy and practices:</p> <ul style="list-style-type: none"> <li>a) Educate family members about behavioral health issues and recovery as well as treatment support;</li> <li>b) Encourage participation of consumers' family and supports in their loved ones' behavioral health treatment;</li> <li>c) Increase parent/caregiver engagement with schools; and</li> <li>d) Involve youth in planning</li> </ul>	<p>SBCSS</p>	<p><b>In Progress</b></p>	<p><b>In Progress</b></p>	<p>State recognition: San Bernardino County Superintendent of Schools Awarded the Golden Bell Award November 2017</p>



# ECONOMY

Economic factors including poverty, employment opportunities and access to affordable housing have been shown to influence access to health care and health outcomes.

## ECONOMY DATA DASHBOARD

Economy Objectives	HP 2020	CTP Baseline Data	Current San Bernardino County Data	2018 Target (5% improve)	2020 Target (10% improve)	County Trend
Decrease the percentage of individuals living in poverty	NA	19.1% (2013)	17.7% (2016)	18.1%	17.2%	↓ 2018 Target Met
Decrease the percentage of children (under 18 years) living in poverty	NA	26.6% (2013)	26% (2016)	25.3%	23.9%	↓
Increase Industry Employment by Sector	NA	NA	NA	NA	NA	Indicator Under Development
Decrease the number of homeless individuals	NA	2,321 (2013)	1,886 (2017)	2,205	2,089	↓ 2020 Target Met
Decrease the percentage of residents who spent more than 30% of their income on housing*	NA	44.6% (2013)	43.6% (2016)	42.4%	40.1%	↓

**NA:** Not Available **HP2020:** Healthy People 2020

\*The baseline data presented in the CTP for this indicator was incorrect and has been updated to the correct value.





# STRATEGY IMPLEMENTATION PROGRESS

CTP Goals and Strategies	Key Partners/ Responsible Organization	2017 Q2 Status	2017 Q3 Status
<p><b>Economy Goal 1:</b> Decrease the percentage of families living in poverty across the county</p> <p><b>Strategy 13:</b> Identify and implement policies that incentivize work and eventually move families off of government assistance:</p> <ul style="list-style-type: none"> <li>a) Identify opportunities that offer incentives for employment to small businesses offering work readiness and employment opportunities; and</li> <li>b) Increase awareness for tax incentives for employers hiring employees with criminal backgrounds and/or receiving government assistance</li> </ul>	<p>Potential partners:</p> <ul style="list-style-type: none"> <li>-Kelly Space &amp; Technology</li> <li>-SBC Workforce Development Board</li> <li>-Public Health</li> <li>-IHPC</li> </ul>	<p>Not Started</p>	<p><b>In Progress.</b></p> <p>Public Health/CVS staff began dialogue with Economy Workforce Champions, Kelly Space, IHPC, and staff from the SBC Workforce Development Board to explore feasibility of alignment with Strategy 13. Further discussion and collaboration is still needed to identify county resources and activities that can effectively align.</p> <p><b>Challenge/Barriers Experienced:</b></p> <p>Limited resources amongst partners has been a factor, although CVS will keep this strategy through 2017 and will later address feasibility which may result in a revision and/or removal of the strategy.</p>
<p><b>Economy Goal 1:</b> Decrease the percentage of families living in poverty across the county</p> <p><b>Strategy 22:</b></p> <p>Identify opportunities to prepare students to enter the economic workforce in fields necessary for the local economy.</p> <ul style="list-style-type: none"> <li>a. Increase internships and work-based learning opportunities across health disciplines.</li> <li>b. Identify opportunities to increase the number of health pathways in high schools.</li> <li>c. Consider creation of articulation agreements between health pathways/Regional Occupational Programs and higher education to allow concurrent enrollment in health professions courses</li> </ul>	<p>IHPC ROPs School Districts Health Industry Employers</p>	<p>In Progress</p>	<p><b>In Progress.</b></p> <p>Partners completed activities throughout 2017 to increase opportunities for student preparation in health fields. Trainings, externships, and a conference were achieved.</p> <p>A two-day teacher resource day event was conducted to support teacher professional development. 115 employers provided work experience and 102 students were placed in work based areas with learning opportunities. Employers recruited 16 students in health settings.</p> <ul style="list-style-type: none"> <li>a. During the 2016-17 year, the LIFE field experience program was developed and 30 students piloted the program.</li> <li>b. SBC Unified School District is developing wall to wall pathway programs, which also includes health among other sectors.</li> <li>c. Work is in progress to develop articulation agreements that will be a service offered to community colleges under the Guided Pathway initiative.</li> </ul>



# ACCESS TO HEALTH AND WELLNESS

Access to Health and Wellness Priority Area encompasses many aspects of health outcomes affecting San Bernardino County residents including access to health care, behavioral health and healthy behaviors.

## ACCESS TO HEALTH AND WELLNESS DATA DASHBOARD

Access to Health and Wellness Objectives	HP 2020	CTP Baseline Data	Current San Bernardino County Data	2018 Target (5% improve)	2020 Target (10% improve)	County Trend
Increase the percentage of residents who have a usual source of care	95%	83.7% (2011)	87.7% (2016)	87.9%	92.1%	↑
Increase the percentage of residents with health insurance coverage	100%	81% (2013)	91.5% (2016)	85.1%	89.1%	↑ 2020 Target Met
Decrease the percentage of residents who delayed or did not get medical care	4%	10.6% (2012)	11.2% (2016)	10.1%	9.5%	↑
Decrease the percentage of 7 <sup>th</sup> graders who reported feeling sad and hopeless	NA	NA	NA	NA	NA	Indicator Under Development
Increase the rate of residents accessing behavioral health services	NA	NA	NA	NA	NA	Indicator Under Development
Decrease the percentage of youth (21 and under) who misused alcohol or other drugs in the past year	NA	NA	NA	NA	NA	Indicator Under Development
Decrease the percentage of the adult population ever diagnosed with diabetes	NA	11.1% (2011)	11.4% (2016)	10.5%	10.0%	↑
Decrease the percentage of adults ever diagnosed with high blood pressure <sup>+</sup>	26.9%	31.3% (2011)	31.1% (2016)	29.7%	28.2%	↓
Decrease the hospitalization rate for cardiovascular disease <sup>+</sup>	NA	92.7 (2012)	82.4 (2015)	88.1	83.4	↓ 2020 Target Met
Decrease the percentage of obese adults	26.9%	33.5% (2011)	36% (2016)	31.8%	30.2%	↑
Decrease the percentage of teens age 12-17 who are overweight/obese	NA	34.7% (2012)	NA	NA	NA	Indicator Under Review
Increase the percentage of teens (12-17) who meet the CDC recommendation of 1 hour or more daily physical activity	20%	19% (2009)	NA	NA	NA	Indicator Under Review
Increase the amount of bike trails (Class I-III)*	NA	504 (2015)	504 (2015)	529	554	Baseline data serves as current data until source updates data

**NA:** Not Available **HP2020:** Healthy People 2020

This indicator was not available at the time the CTP was published.

\*The baseline data presented in the CTP for this indicator was incorrect and has been updated to the correct value.



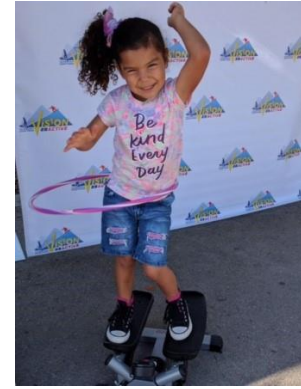
# STRATEGY IMPLEMENTATION PROGRESS

CTP Goals and Strategies	Key Partners/ Responsible Organization	2017 Q2 Status	2017 Q3 Status
<p><b>Goal 1:</b> Increase the percentage of residents who have and regularly access a usual source of care</p> <p><b>Strategy 32:</b> Encourage and integrate the use of Community Health Workers (CHWs), <u>health navigators and health educators in public and private settings</u> to inform and empower residents in their own communities to access care, navigate health systems and know who to talk to; connect residents to medical homes and sign them up for health insurance; and explore model programs for the use of CHWs and/or student nurses in schools</p>	<p>IHPC            LLU/San Manuel Gateway College            HASC            CHAIRS            AHW Workgroup</p>	<p><b>In Progress</b></p>	<p><b>In Progress</b></p> <p>Four hospitals that have integrated CHWs were identified: St. Mary's, St. Bernardine, San Antonio, LLU, and one Federally Qualified Health Center. 13 key informant interviews were completed and are still in progress. Work will still continue to identify roles of CHWs within the hospital/clinic settings; identify expected outcomes; identify education and training requirements; and to develop recommendations for CHWs integration for access to care improvement. LLU/San Manuel Gateway College 6 students completed community health and education worker training and will work with the San Bernardino City Unified School District. 14 students completed the clinic-based CHW training and are completing practicums at 3 different clinic sites.</p>
<p><b>Goal 6: Access to Health and Wellness:</b> Increase the number of residents engaged in active living activities</p> <p><b>Strategy 11:</b> Promote <u>health in all policies as it relates to the built environment</u> including promote health elements in city general plans; <u>promote environmental justice elements</u>; promote Active Transportation Plans (ATPs); Promote Safe Routes to Schools program to ensure students have a safe environment to and from school; Promote adoption of Complete Streets Policies in additional cities; increase the use and access to farmer's markets; promote policies that address zoning for equitable food access and limits on <del>en-</del>locations for tobacco and alcohol <del>facilities</del> sales; identify model programs that promote designation and awareness of healthy menus in retail food facilities</p>	<p>Access to Health and Wellness Workgroup;            Public Health Healthy Communities            CVS Staff;            San Bernardino County Transportation Authority;            Reach Out</p>	<p><b>Completed</b></p> <p>Tool Kit developed; presented. and distributed at the National Innovative Comm. Conference May 23-24, 2017 in Ontario, CA</p>	<p><b>Completed</b></p> <p>Public Health Healthy Communities (HC) engaged in the Vision2BActive (V2BA) countywide campaign to promote physical activity and promote health in all policies as they related to the built environment A V2BA website was created and featured maps, trails, and physical fitness focused community events. Healthy Communities identified resources and opportunities for residents and families and shared them via the V2BA websites. HC participated in 28 community events/presentations to increase awareness of the V2BA campaign. HC also collaborated with the SBC Employee Wellness Program to promote V2BA and will potentially reach 16,000 employees to encourage active living activities. CVS and SBCTA collaborated and developed the Built Environment Guidance and distributed at 3 venues: 2017 NIC Conference, Healthy Communities Quarterly Partners meeting, and placed on the CVS website.</p>

## Goal 6 – Increase the number of residents engaged in active living activities

### Strategy 11: Promote health elements in all policies as it relates to the built environment

Engaging county residents in active living is essential for health and wellness. The Department of Public Health, Healthy Communities Program provided county residents opportunities for active living activities via the 2017 Vision2BActive (V2BA) countywide campaign. The V2BA campaign promoted fitness-based events and encouraged residents to participate in a multitude of events across the county. To support the V2BA campaign, the Healthy Communities Program participated in the; Let's Move on the Trail in Fontana, the Reading Rally in San Bernardino, and International Walk to School Day at Ruth Musser Middle School. Healthy Communities also encouraged physical activity at home by handing out free hula-hoops at its various community events.



*Hula-hoops add physical fun!*

To increase access to information, the Vision2BActive website was created to support the campaign and promote events in the community that encourage physical activity. Website resources included trail maps, bike paths and parks throughout the County, and a link to nominate an Action Hero.

In addition, the Healthy Communities Program collaborated with the County's Employee Wellness Program, "My Health Matters", to heighten awareness and promote employee resources to support healthy choices. The Employee Wellness Program has now incorporated the Vision2BActive link to their website, program email communications, and printed materials. These promotional materials have reached nearly 16,000 County employees.

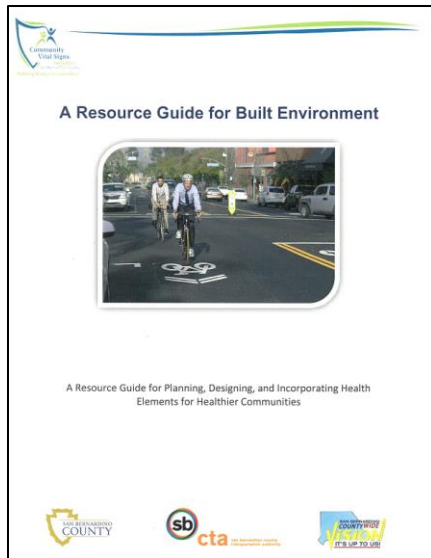


*"Hit a Home Run for Health" at the Inland Empire 66ers Game*

To promote active environments and the County's Vision2BActive campaign, a cross-county collaboration between San Bernardino County Public Health and Riverside County Public Health was established for both agencies to co-host a "Hit a Home Run for Health" event at the Inland Empire 66ers game. Over 4,000 County employees and families participated in fun physical activities such as; the YMCA dance activity, relay race and fit challenge.

**Goal 6** – Increase the number of residents engaged in active living activities

**Strategy 11:** Promote health elements in all policies as it relates to the built environment



*A Resource Guide for Built Environment*

## **A Resource Guide for Built Environment**

The Community Vital Signs Initiative is addressing how the physical parts of where we live, work, and play impacts our resident's overall health and wellness. This important element that impacts our resident's quality of life is called the built environment (e.g., homes, buildings, streets, open spaces, and other types of infrastructure.)

In early 2017 Vital Signs and the San Bernardino County Transportation Authority (SBCTA) worked collaboratively to develop **A Resource Guide for Built Environment** as a result of an established activity that was formulated within the 2015-2020 Community Transformation Plan's Priority Area Access to Health & Wellness Work Group.

The Resource Guide for Built Environment highlights three toolkits that provide a point of reference to seek the adoption of HiAP considerations when undertaking planning projects and reviewing policy implementation.

Once the Resource Guide was developed, its accessibility was also considered. Three specific venues were selected for its distribution; the 2017 National Innovative Communities Conference (NICC), 2017 Yucaipa Healthy Communities Meeting, and both the Healthy Communities and Community Vital Signs websites.

One of the main challenges was identifying and selecting the specific toolkits that covered the full range of complex and current health challenges that planners face in creating healthier communities. This was addressed by ensuring that the publications and models covered a broad scope of HiAP concepts and considerations with a focus on effective strategies and best practices.

As we look ahead we envision further expansion to the Resource Guide to include new and innovative concepts and developments within the built environment sector.



# SAFETY

Healthy and safe environments allow people to access resources and make healthy choices they might not otherwise be able to make.

## SAFETY DATA DASHBOARD

Safety Objectives	HP 2020	CTP Baseline Data	Current San Bernardino County Data	2018 Target (5% improve)	2020 Target (10% improve)	County Trend
Decrease the crime rate <sup>+</sup>	NA	31.6 (2010)	30.7 (2016)	30.0	28.4	↓
Decrease the number of gang members	NA	17,401 (2011)	14,100 (2015)	16,531	15,661	↓ 2020 Target Met
Increase positive relationships between residents and Police/Fire Departments	NA	NA	NA	NA	NA	Indicator Under Development
Decrease juvenile crime rate <sup>*</sup>	NA	12.3 (2010)	7.9 (2015)	11.7	11.1	↓ 2020 Target Met
Increase the percentage of 9 <sup>th</sup> grade students who reported feeling safe or very safe at school	NA	50%	NA	52.5%	55%	Indicator Under Review

NA: Not Available HP2020: Healthy People 2020

\*This indicator was not available at the time the CTP was published.

+The baseline data presented in the CTP for this indicator was incorrect and has been updated to the correct value.



## STRATEGY IMPLEMENTATION PROGRESS

CTP Goals and Strategies	Key Partners/ Responsible Organization	2017 Q2 Status	2017 Q3 Status
<p><b>Safety Goal 1:</b> Reduce the crime rate across San Bernardino County</p> <p><b>Strategy 17:</b> Explore opportunities to restore services for offenders impacted by Proposition 47 (downgrading penalties for non-violent property and drug crimes to misdemeanors). offenders who have been released through realignment initiatives.</p>	<p>CVS Safety Workgroup Public Health Dept. Healthy Communities Reentry Collaborative</p>	<p><b>In Progress</b> CVS Safety Workgroup identified potential organizations for alignment. CVS SC and Safety Workgroup were invited to present and propose a partnership alignment with the San Bernardino County Reentry Collaborative.</p>	<p><b>In Progress.</b> The CVS Safety Workgroup identified the SBC Reentry Collaborative as an opportunity for alignment and leverage of resources. The Safety Workgroup made a call to action at the September Reentry meeting to work collectively to address the safety goals and strategies. The workgroup presented at a second meeting in October to assess resources and gaps for improving services to offenders recently released.</p>

## Goal 1: Reduce crime rate across San Bernardino County

**Strategy 17:** Explore opportunities to restore services for offenders who have been released through realignment initiatives

Achieving better health in our communities requires commitment towards a broad set of solutions from leaders not only in health care, but across other sectors such as from law enforcement and its related partners. Community Vital Signs (Vital Signs) and the San Bernardino County Reentry Collaborative (Reentry Collaborative) established a collaborative partnership for resource alignment to address and support the formerly incarcerated population to re-enter back into the community with the goal of reducing recidivism rates in the County.

The Reentry Collaborative and Vital Signs established a partnership to collectively support implementation of the Safety Action Plan from the County's 2015 Community Transformation Plan. The partnership has provided a forum for Reentry Collaborative and Vital Signs to share a vision to work on solving the issues that lead to recidivism within the county. An example of this was the joint effort to participate in an assessment exercise to identify the most important work and activities occurring throughout the county. The top activities identified through this exercise included: the Sheriff's Gangs & Drugs Task Force; San Bernardino Police Department's Team VIP; Abundant Living Church's "24" program; the Welcome Home Resource Center; Sheriff's START program; California State University San Bernardino's Project Rebound; and the County's Transitional Assistance Department Welfare to Work program. Grant funds awarded to the county's Health Department will help fund and support these reentry implementation efforts.



*October 25, 2017 Reentry Collaborative and Vital Signs Assessment Exercise.*

Funding from the voter-approved Proposition 47 will be used to support services for the formerly incarcerated individuals who have mental health disorders and/or substance abuse issues. Seeing this new grant-funded potential program as a great opportunity, Public Health applied for a Prop 47 grant and became an inaugural grantee. The funds will specifically focus on services provided in the High Desert area. Services that will be offered to "clients" will include

transportation, job skills training, peer advocacy, mental health, and substance abuse services. These services will enhance public safety by reducing recidivism through rehabilitation and reentry services.



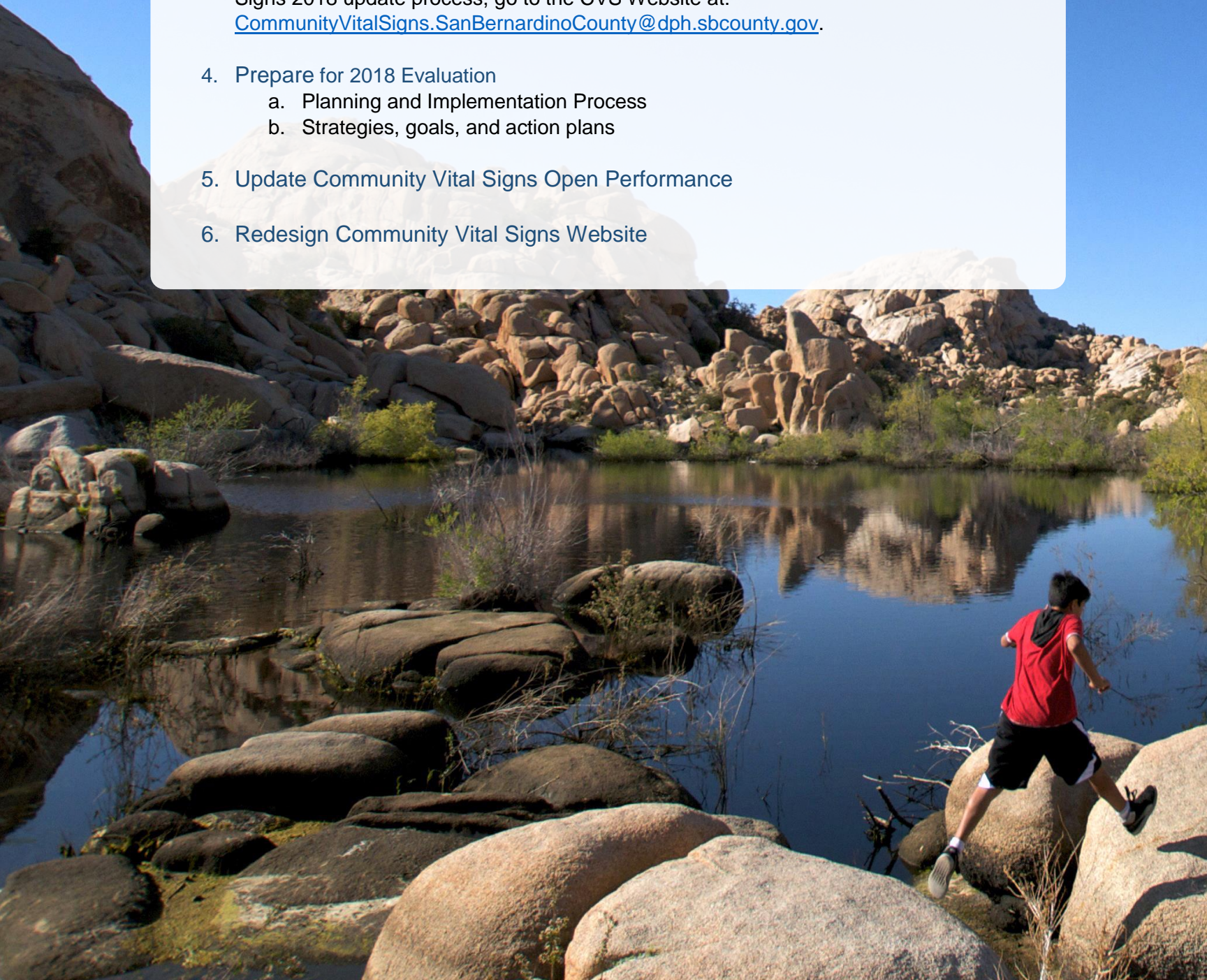
*Vital Signs sharing the Safety Goals and Strategies with the Reentry Collaborative*

This new cross-sector partnership between the Reentry Collaborative and Vital Signs will help focus on programs, services, and system strategies in a structured way to improve county health outcomes.



# NEXT STEPS

1. Continue Implementation and Monitoring Progress of Action Plans  
The development of the Implementation Action Plan progress tracking tool and reporting through the CVS Open Performance Site continues. Partners will be trained on this process so that they can report results quarterly
2. Continue Implementation Committee meetings
3. Plan for next Our Community Vital Signs 2018 Update  
The Vital Signs Steering Committee will reconvene the Data Subcommittee to work collaboratively on Our Community Vital Signs 2018 (Community Health Assessment) update. The Data Subcommittee will meet throughout 2018 and will be co-chaired by the Department of Public Health, with members from the Vital Signs Steering Committee, key stakeholders and academic partners. To participate in the Our Community Vital Signs 2018 update process, go to the CVS Website at: [CommunityVitalSigns.SanBernardinoCounty@dph.sbcounty.gov](mailto:CommunityVitalSigns.SanBernardinoCounty@dph.sbcounty.gov).
4. Prepare for 2018 Evaluation
  - a. Planning and Implementation Process
  - b. Strategies, goals, and action plans
5. Update Community Vital Signs Open Performance
6. Redesign Community Vital Signs Website









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