



Tobacco Settlement Programs Outcomes Report

Fiscal Year 2008 – 2009



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Dear Colleagues,

On behalf of the Orange County Health Care Agency, I am pleased to present the 2008–2009 Tobacco Settlement Program Outcomes Report, the eighth annual report on Tobacco Settlement Revenues (TSR) summarizing the measurable results that enhanced the health and well-being of Orange County residents. These revenues remain a valuable asset in addressing our community's increasing health needs in an unstable economic climate.

The Health Care Agency is grateful for the support of our community partners who collaborated in developing the TSR priorities and the spending plan for FY 2008–2009. These partners include the Orange County Medical Association, the Hospital Association of Southern California, the Children and Families Commission of Orange County, the Coalition of Orange County Community Clinics, Kaiser Permanente, the American Association of Retired Persons, and the National Council on Alcoholism and Drug Dependency for Orange County.

The various services funded through the FY 2008–2009 TSR Spending Plan have made significant impacts on the health of many Orange County residents, from newborns to older adults. Tobacco Settlement Revenue funds allowed the Coalition of Orange County Community Clinics to provide a total of 193,530 primary care, dental and other miscellaneous patient visits in FY 2008–2009 through their member clinics. Orange County hospitals which maintain basic or comprehensive emergency medical services for their communities received nearly \$1.9 million for uncompensated care. Emergency room physicians and on-call physician specialists received over \$7 million in TSR funds which helped to augment reimbursements and allowed continued access to healthcare without interruption. Key outcomes from fiscal year 2008–2009 are summarized in the attached report.

I look forward to sharing the ongoing progress of these programs as well as the many others made possible with Tobacco Settlement Revenue as we work together for a healthier tomorrow.

Respectfully submitted,

David L. Riley, Director

Tobacco Settlement Programs Outcomes Report

Under the 1998 Tobacco Litigation Master Settlement Agreement, seven tobacco companies agreed to change the way tobacco products are marketed, and to pay States an estimated \$206 billion. California's share of the settlement is approximately \$1 billion a year. Half of the payment goes to the State's General Fund with the Legislature and Governor determining how it is used. The remainder of the Tobacco Settlement payment is divided, based on population, among California's 58 counties and the four largest cities for use as decided by each local jurisdiction.

Orange County voters approved Measure H in November 2000, creating the Orange County Tobacco Settlement Revenue Fund (TSR) and specifying that the County's TSR funds be allocated as follows:

- 19% to provide health care services for seniors and persons with disabilities
- 12% to tobacco prevention and control, including cessation services for youth and adults to reduce smoking and the consumption of tobacco, other addiction programs, and community mental health programs and facilities
- 20% to non-profit community clinics
- 23% to fund emergency medical services provided by emergency room physicians and emergency room on-call physician specialists
- 6% to hospitals within Orange County maintaining basic or comprehensive emergency services or trauma centers to cover the costs of providing charity care
- 20% to the Sheriff's Department for public safety programs and services

EXECUTIVE SUMMARY

The Health Care Agency (HCA) and community representatives continue to collaborate on the annual spending plan for TSR health programs. The Orange County Board of Supervisors approved the FY 2008–09 TSR spending plan on Board Date June 24, 2008. This plan included the continuation of TSR funded programs as well as new concepts for FY 2008–09.

The eighth full year of programs supported by Tobacco Settlement funds demonstrated continued success and progress in addressing areas of need. For example, the Senior Health Outreach and Prevention Program (SHOPP) saved lives by successfully linking seriously ill isolated seniors to medical and mental health care. With a consistently high client satisfaction rating, the Senior Non-Emergency Medical Transportation program improved the quality of life of countless seniors by connecting them to important medical services, thereby reducing a large amount of costs for emergency care and/or skilled nursing facility care that would otherwise be incurred by county and other government agencies.

In summary, the programs funded by TSR revenues have made lasting impacts on the health of a significant number of Orange County residents, such as the seriously and persistently mentally ill, homebound older adults, teens, and emergency room users. Moreover, organizations have incorporated smoking cessation and anti-smoking components into their programs, which promises to help further reduce smoking-related morbidity and mortality in Orange County.

The following report represents a summary of the eighth year milestones and outcomes for the health programs supported by Tobacco Settlement Funds. Program expenditures reflect actual drawdowns from Measure H funds for the time period reported.

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Tobacco Settlement Programs

Outcomes Report

I. Health Care Services for Seniors & Disabled

1. Total Expenditure \$6,038,987*

*Expenditure information based on TSR claim as of June 30, 2009.

Non-Emergency Medical Transportation for Seniors

Program Expenditure\$1,976,305

Senior Non-Emergency Medical Transportation (SNEMT)

A coordinated effort to facilitate the health and welfare of Orange County (OC) seniors by providing transportation and access to needed healthcare services where none existed before. Since its inception, more than 200,000 trips have been provided to approximately 10,000 older adults enrolled in the program. The SNEMT program prevents premature institutionalization of older adults, and improves their quality of life by connecting them to important medical services, thereby reducing a large amount of costs for emergency care and/or skilled nursing facility care that would otherwise be incurred by county and other government agencies. The program is one of the many services provided by the Office on Aging that make Orange County the best place in America to age with dignity. This program is 100% funded with TSR funds.

Outcomes/Current Status:

- FY 2008–09 represented the 4th completed year of Phase II for the SNEMT Program. The successful implementation of the Board-directed Phase-Down Plan resulted in a reduced contractor budget amount of \$1,886,817 for FY 2008–09 from \$2,777,984 in FY 2007–08. The phase-down process contributed to a 1,481 (13%) reduction of client enrollment from July 2008 (11,149) to June 2009 (9,668) creating a lower demand for program services this year than in previous years. A total of 49,169 one-way trips county-wide (85% of the 58,000 trips projected for FY 2008–09) and 349,937 trip miles were provided.
- OC Community Services/Office on Aging (OCCS/OoA) received one-time only funds in the amount of \$252,127 from the Health Care Agency's (HCA) unallocated TSR reserves this fiscal year. The Board of Supervisors approved the use of these one-time only funds equally to provide transportation for new clients with immediate need for medical services during the ACCESS approval process, and to accommodate the demand for "Frail" ACCESS waiver trips. Due to the implementation of the Phase-Down plan, the contracted service providers experienced a lack of demand for use of one-time only funds. The majority of the trips funded were door-to-door, resulting in a higher average price per mile.

- The OoA is currently in the process of analyzing data collected from customer satisfaction survey conducted in FY 2008–09. The results will be used as a method to monitor SNEMT performance and client satisfaction of transportation services to medical appointments.
- In June 2009, OCCS/OoA received notification from Orange County Transportation Authority (OCTA) on its preliminary award of Federal New Freedom (NF) funds in the amount of \$1,000,000 over a two-year period, with the option to renew for two additional years thereafter. NF funds are intended to provide new transportation services to overcome existing barriers facing Americans with disabilities. The SNEMT program will use the funds to expand services to include new same-day medical transportation trips, additional trips to eligible frail ACCESS clients, trips to eligible older adults awaiting approval of OCTA ACCESS transportation services or those living more than $\frac{3}{4}$ th of a mile from an existing fixed bus route who are not being served by OCTA ACCESS.

Services for Seniors

Senior Health Outreach & Prevention Program (SHOPP)

Program Expenditure\$1,166,247

A specialized program to promote the optimal health of older adults and underserved adults. Public Health Field Nurses (PHN) and Behavioral Health (BH) staff conduct home visits to high-risk elderly with identified mental and/or physical health concerns. Assessments, short-term case management, and linkage to community resources are provided to older adults, their caregivers, and families. Many of the barriers such as inadequate medical insurance, inadequate finances, lack of transportation and cognitive and behavioral issues which prevent clients from accessing health care are overcome through education, advocacy and linkage to community services. TSR funds represented 52% of the total program budget.

Outcomes/Current Status:

- During FY 2008–09, more than 1,500 initial assessments for mental and physical health care issues were conducted for high-risk seniors (700 PHN and 880 BH) and 1,648 (1,062 PHN and 586 BH) clients received services through the SHOPP program. Client community linkages/referrals included 69% to medical care, 44% to long term case management services and 68% to support services among many other services.
- 85% of the referrals received by the program indicated an educational need. From July 2008 to June 2009, PHNs made 1,973 home visits to provide health education. As a result, clients who have refused medical care for years have been convinced to see their doctors for needed health care services. The nurses have taken an active role in teaching blood sugar control to their diabetic clients who comprise 23% of their caseload.

- The number of organizations requesting brown bag medication review sessions provided by the SHOPP pharmacist increased steadily. During this reporting period, a total of 873 consumers were educated regarding the use of over the counter and prescription drugs via brown bag medication or other 1:1 medication review sessions, at other educational sessions or health fairs.
- More than 1,500 consumers were provided tobacco education materials and 700 seniors received a tobacco assessment. PHNs continue to assist and support clients as they choose to stop smoking. SHOPP Public Health Nursing Program has provided tobacco cessation messages to the community based organizations that receive SHOPP funds to promote health-based and relevant information to the community. These organizations have distributed smoking cessation literature to 554 individuals.

In-home Mental Health Treatment Services for Aging

Program Expenditure:..... \$225,523

A program to enhance counseling and mental health treatment, focusing on socially isolated older adults who are unable or unwilling to access traditional services, by contracting with community based providers. Services are available to accommodate the special needs of Latino and Vietnamese older adults through Camino Nuevo and the Value programs. TSR funds represented 100% of the total program budget.

Outcomes/Current Status:

- A total of 119 clients were served within the two programs, Camino Nuevo (67) and the Value program (52). This number is below the target due to reduced funding which resulted in program cuts. However, both programs are dedicated to providing services that best meet the needs of the growing Latino and Vietnamese client population. Many of these elders are highly affected by stigma regarding mental illness. Both the programs have been extremely effective in engaging their clients in mental health services through appropriate mental health education and organizing outreach for them.

Door-to-Door Community Program Targeting Latino Elders

Program Expenditure\$120,096

The goal of this community program is to inform and link older adults and their families, to available home and community appropriate services to protect their health and well-being, and to enhance their personal care. “Care Door-to-Door” serves low-income, high-risk elders in predominantly Latino neighborhoods, with a particular emphasis on isolated, frail older adults. TSR funds represented 100% of the total program budget.

Outcomes/Current Status:

- During this contract period, 352 initial assessments were conducted. More than half of the identified Hispanic older adults lacked medical insurance and did not have resources to obtain one in the near future. Out of the 498 in-depth assessments conducted this year, 353 included home safety inspections and 30% of the identified older adults reported already having fallen at home. This indicates that the contractor successfully identified older adults who are in desperate need of health services.
- To address and strengthen concepts and recommend precautions about safety, night lamps were donated to each senior identified. Moreover, to reinforce the issue of safety, the program has donated Durable Medical Equipment items such as wheelchairs, canes, walkers, and incontinence supplies. The contractor provided 1,583 direct/indirect links to a variety of existing community services. Another accomplishment for this contract year was the partnership with the community based organization dedicated to serving older adults in Orange County.

Friendly Visitor Program

Program Expenditure\$79,923

This program aims to promote optimal health for isolated, homebound seniors by linking them with volunteers for increased social contact and interaction. Tobacco Settlement Funds supported the coordination, training and recruitment of the volunteer visitors for this program. TSR funds represented 100% of the total program budget.

Outcomes/Current Status:

- The program served 211 seniors during FY 2008–09, with the help of 82 active volunteers. More than 3,300 visits were conducted during this fiscal year.
- During this reporting period, a Reassurance Call Specialist (RCS) was hired by the program. Duties of a RCS include referring clients to mental, social or health care services and making weekly calls to clients or monthly calls to family members when potential clients are placed on waiting lists, until a volunteer can be freed to visit.
- The survey findings show 96.3% of the clients expressed satisfaction (excellent or good) with the Caring Connections Friendly Visitor Program. The comments provided by the clients were 100% positive and clearly showed the positive impact the program and the volunteers have on their well-being.

Services for the Disabled

Mental Health Program for Disabled

Program Expenditure\$1,307,439

The Mental Health Program for Disabled continues to leverage funding with other sources to maintain local treatment for seriously and persistently mentally disabled adults. This rehabilitation program focuses on adults who have a concurrent substance abuse disorder along with chronic mental disability and require a secure residential treatment setting. It remains unique among long-term care programs in offering multi-level vocational programming. TSR funds represented 9% of the total budget.

Outcomes/Current Status:

- Operating at an average of 94% capacity, the Mental Health Rehabilitation Center (MHRC) served a total of 136 consumers during FY 2008–09, maintaining an average daily census of 61 patients. There was a reduction in the overall number of admissions (69, compared to 85 last year) which may be attributable to the new procedure followed by MHRC, of verifying each resident’s social security income status prior to admission, as well as retroactively determining eligibility and adjust income amounts for consumers already in the program.
- The average length of stay of 233 days was three days shorter than last year. There was a significant increase in the percentage of admissions from a higher level of care (74% this year compared to 62% last year); admissions from a lateral level of care decreased from 33% last year to 25% this year. This decrease is reflective of the efforts the MHRC has made to accept increasingly symptomatic patients for admission.
- The discharges to a less restrictive level of care significantly increased from 53% last year to 74% this year. Importantly, discharges to a higher level of care decreased from 34% last year to 9% this year. Discharge to a less restrictive level of care is an important measure of program effectiveness.
- MHRC has continued to actively promote weekly multi-family groups and family involvement, maintained their tracking system and were able to encourage and sustain a high level of family involvement. The number of families participating this fiscal year increased by 16% over last year. The program continues to have a high number of privately conserved residents which means that 100% of these families are participating in the residents’ treatment in some manner.

- MHRC remains unique among the long-term care programs in offering multi-level vocational programming and it continues to break down the barriers preventing consumers from obtaining viable work experience which is critical to establishing future independence in the community. It also continues to offer residents the opportunity to participate in formal educational programming as a means to enhance consumer self-esteem and build independent living skills. The number of consumers participating in the on-site work program and the average number of hours worked increased significantly (79%) over last year. This year, one consumer successfully obtained a G.E.D and three others were studying to take the G.E.D.
- MHRC has continued the substance abuse treatment program components including on-site weekly AA meetings and a weekly Dual Diagnosis group. Thirty-two consumers reported they benefited from the classes and expressed interest in quitting smoking as compared with 21 last fiscal year. The number of patients who attempted to quit or reduced their smoking also increased considerably (35%, n = 36) over last year and six consumers reported successful abstinence from tobacco.

Transitional Community Living Program

Program Expenditure\$305,455

The Transitional Community Living Program is a specialized, intensive program for 45 mentally ill disabled adults who are transitioning from inpatient treatment to community treatment. The services are provided at the West Anaheim Therapeutic Residential Center (WATRC) inpatient facility. TSR funds represented 10% of the total budget.

Outcomes/Current Status:

- Operating at 95% capacity with an average daily census 42.8, WATRC continues to improve their ability to handle increased acuity of the referred patients.
- This year, the overall number of admissions to WATRC increased by 19%. The number of consumers transitioning from an IMD level of care also increased notably from 2% last year to 10% this year.
- Fifty percent of the planned discharge placements this year were to a less restrictive level of care, compared with 41% last year. Additionally, the number of consumers discharged to a higher level of care decreased significantly from 54% to 40%.

Crisis Assessment Team

Program Expenditure\$241,590

This dedicated team of mental health professionals is available to respond to community requests to conduct specialized evaluations of adults who may require hospitalization. The team provides a single point of contact for the community and allows for timely follow-up for consumers who may not require hospitalization. TSR funds represented 69% of the total program budget.

Outcomes/Current Status:

- A total of 509 calls for assessment were received. 270 (53%) of those clients required involuntary hospitalization. 239 clients (47%) assessed were not hospitalized, but were followed up for 30 days to ensure linkage with community providers, primary care physicians, or county mental health staff for continued treatment.
- The follow-up visits including home visit, hospital visit, linkage to provider and family intervention, continued to increase (total 1,689 or 3.1 per client) during this reporting period. Numerous follow-up contacts are usually required to assess the client's ability to engage in services and locate appropriate treatment providers in lieu of diminished resources. Staff continues to attend community provider forums and work collaboratively with community partners to assist clients, family members, and caregivers in receiving the most appropriate services.
- More than 43% of all referrals received during this period were received from local law enforcement to provide assessments in the community. The increased number of calls for assistance can be attributed to the strong partnership with law enforcement. It allows for early intervention which decreases arrests and injury rates for people with mental illness, increases officer and citizen safety, and enhances the ability of individuals to receive services necessary to maintain themselves in the community.

Program for Assertive Community Treatment (PACT)

Program Expenditure\$314,861

PACT's goal is to provide intensive outpatient services to mentally ill, disabled persons and thereby increase support systems and assistance needed to prevent their hospitalization and possible incarceration. TSR funds represented 49% of the total program budget.

Outcomes/Current Status:

- At the end of June 2009, there were 67 clients engaged in services. For this fiscal year there were a total of 29 referrals, 10 of these are currently engaged in services with PACT, 9 are in the assesment/engagement process and are pending. PACT program has been fully staffed since January 2009. An average of 1.0 MD contacts and 6.5 Care Coordinator contacts were maintained per client per month.
- The current PACT team is very cohesive and productive which is very valuable for managing the difficult cases referred to and enrolled in the program. During this reporting period, the number of hospitalization days decreased by 62%, and the number of hospitalizations decreased by 53%.
- During this fiscal year 11 PACT clients have graduated to lower levels of care. In order for a client to graduate PACT, they must remain out of the hospital for at least one year, have stable housing for at least three months, have stable income and a support network outside of PACT.

Access to Health Services for Persons with Disabilities

Program Expenditure\$203,004

The goal of this program is to improve access to health care services for persons with disabilities through outreach, education, counseling and advocacy. TSR funds represented 100% of the total program budget.

Outcomes/Current Status:

- Each contractor (Council on Aging and Legal Aid Society) of this program conducted several outreach and educational activities focused on becoming better consumers of existing services, reaching almost 1,600 persons through professional and public presentations, as well as educational events.
- More than 1,100 persons with disabilities received assistance with resolving problems related to health care services and programs through one-on-one counseling, advocacy, direct intervention or referral. The Council on Aging also conducted four self-advocacy seminars.
- The Council on Aging distributed more than 1,000 educational materials to clients in English, Spanish and Vietnamese in audio or large print format. Additionally, one-time TSR funds were used to purchase medical organizers. Contractor began integrating use of the tools into their education efforts and distributed to clients.
- NAMI (National Alliance on Mental Illness), the subcontractor for Legal Aid Society, successfully implemented the Stigma Elimination Program with presentations on assistance in identifying and referring individuals to mental health professionals. Presentations on destigmatizing attitudes were also made to high priority audiences. A variety of community groups were reached through the presentations, made at faith based organizations, schools, police departments, NAMI walk event and other locations.
- NAMI, the subcontractor for Legal Aid Society, successfully held Family-to-Family and Hand-to-Hand classes in English (8) and Spanish (4), and offered support groups in English (4) and Spanish (1). However, the Vietnamese language support group did not get established this year.

Pediatric Developmental Screening Services

Program Expenditure\$98,544

The goal of this program is to support child health providers in efforts to initiate formal developmental screenings consistent with the American Academy of Pediatrics (AAP) guidelines and change practices to include these screenings as a routine at well-child visits in pediatricians' office. TSR funds represented 100% of the total program budget.

Outcomes/Current Status:

- The 18-month contract for this program began on January 1, 2008. An Advisory Board was established on January 24, 2008. South Orange County was selected for this pilot project as there were no other developmental projects that were focused in this area. Also, data indicated that approximately 5–8% of Orange County’s 0–5 year old children reside in the south part of the county and developmental screening would be important to identify mild to moderate developmental delays in this population. At completion of project in June 2009, MOU agreements were signed with eight physicians surpassing the target of three physician sites, one community clinic and three child care centers. AAP exceeded the expectations by completing a total of 1,900 developmental screenings.

II. Tobacco Prevention & Control, Other Addiction Programs & Community Mental Health Services

Total Expenditure \$3,957,355*

**Expenditure information based on TSR claim as of June 30, 2009.*

Tobacco Prevention and Cessation Programs

Program Expenditure\$1,564,370

Tobacco Prevention and Cessation Projects is a multi-year, comprehensive campaign focusing on community-school linked tobacco education and cessation programs. The overall goal of these projects is to reduce death and disability due to tobacco use and exposure to environmental tobacco smoke. Funding includes two projects: (1) Tobacco Prevention and Cessation Projects – Cessation Providers and (2) Tobacco Prevention and Cessation Projects – Prevention Providers. TSR funds represented 100% of the total program budget for both the projects.

Tobacco Prevention and Cessation Projects – Cessation Providers

The goal of this project is reduce alcohol, tobacco and other drug abuse among youth and adults.

Outcomes/Current Status:

- Three providers were contracted to provide cessation services in each of the three regions: West/Central region, North Region and South region.

- The majority of the tobacco cessation objectives were met or exceeded in all regions. Tobacco Cessation services to adult tobacco users included individual or structured counseling; 90-minute cessation counseling; a series of five 45-minute cessation sessions; and for young adult tobacco users ages 18–24 years it included “quick kits” to assist them in quitting smoking, followed by a series of one-hour counseling sessions; a series of five 45-minute cessation sessions, and a 60-minute counseling seminar. A mass media cessation promotion was conducted by each provider in the Region and surrounding areas such as schools, colleges, businesses, and medical facilities, to promote the 1-866-NEW-LUNG line and cessation services.
- For Alcohol and Other Drug (AOD)/Mental Health-related cessation, providers out-reached and recruited 152 health care professionals, treatment centers, facilities that work directly with mental health, or AOD use client populations from the West/Central, North, and South regions. Clients were given cessation materials and a short intervention. A series of seven group cessation sessions lasting at least 30 minutes that focused on AOD use clients or mental health population were provided in each region and a total of 281 adults participated in the sessions. In collaboration with TUPP (Tobacco Use Prevention Program), three educational media campaigns were created and implemented in the three regions on the success of providing cessation services to the mentally ill or AOD use clients to encourage them to quit smoking.

Tobacco Prevention and Cessation Projects – Prevention Providers

The goal of this project is to reduce the prevalence of tobacco use among adults and youth. For FY 2008–09, there were three prevention projects, each focusing on a specific area of need. The first project targeted tobacco use prevention for high school students, while focus for the second project was the at-risk population between the ages 18–24 years. The third project focused on social and merchant/retailer education regarding minor or youth access to tobacco.

Outcomes/Current Status:

- To promote 1-866-NEW-LUNG and free cessation services, 31 presentations were conducted on three high school campuses for school staff, and 12 presentations were conducted to district level staff. Twelve tobacco prevention/cessation educational presentations were completed for 192 persons in the age group 18–24 years old. Two hundred forty-five parents at Capistrano Valley High School and San Clemente High School received an educational presentation regarding tobacco prevention, education, and cessation for youth.
- More than 1,200 ninth grade students received media literacy presentations at Capistrano Valley High School, San Clemente High School, and Serra High School. Cessation classes were provided to students at Serra High School on a weekly basis throughout the year. One cessation seminar was provided to students in the Alternative to Suspension Program through Capistrano Unified School District.

- Eighty-nine educational, promotional, and/or incentive items were developed to promote the 1-866-NEW-LUNG helpline and provide tobacco prevention education. Ads or articles promoting the 1-866-NEW-LUNG line were developed (15 targeting High School students and 53 for 18–24 year olds) and placed at venues such as school newspaper, PTSA newsletter, on the High School marquee, school yearbooks, city newsletter, bus shelter ads, bill boards, and new lung website.
- Three tobacco prevention cartoon workshops and two cartoon artwork festivals were conducted for students from Capistrano Valley and San Clemente High Schools. Eleven campus-wide tobacco education events were held at Capistrano Valley High School, San Clemente High School, and Serra High School. A total of 40 students participated in the student task forces at Capistrano Valley High School, San Clemente High School, and Serra High School to plan and implement these events.
- To institutionalize tobacco prevention education activities and promotion of cessation services in the two cities, cessation classes were arranged as an alternative to suspension at San Clemente High School; fax request form was distributed to all district middle and high school campuses for free cessation materials; a student task force for tobacco prevention is being permanently integrated within the Character Clubs and ASB curriculum so that events and activities will continue after the contract period ends.
- Institutionalization packets were mailed to 75 businesses and community organizations that cater to or employ 18–24 year olds. Santa Ana College, Taller San Jose, Cypress College and the Art Institute have agreed to institutionalize tobacco prevention education and promotion of cessation services within their organization. Twenty-five businesses and organizations that serve youth were recruited to participate in the coalition or task force to address youth tobacco use prevalence issues.
- Merchant education interventions were provided to 278 tobacco retailers on their city’s exterior window signage laws. Compliance checks were conducted on 266 stores. 5-Star Merchant recognition was awarded to 142 stores. A “5-Star Merchant” means compliance with all laws governing the sale and advertising of tobacco. Programs to measure community awareness of the 5-Star merchant program and of issues to lower youth access to tobacco were conducted. Four hundred community members received an educational presentation on state access laws.

Substance Abuse Prevention

Community Based Substance Abuse Prevention

Program Expenditure\$338,519

The overall goal of this project is to reduce alcohol, tobacco and drug abuse among youth and adults. The Community Based Substance Abuse Prevention includes funding for Regional Projects, Alcohol Sensitive Information Planning System (ASIPS) project and DUI Education Campaign. TSR funds represented 30% of the total program budget for this project.

Regional Projects

The goal of this project is to educate alcohol owners, managers and servers on responsible beverage serving (RBS) practices. RBS is a key prevention strategy that research has shown to be effective in reducing alcohol-related problems. TSR funds represented 8% of the total budget of this project.

Outcomes/Current Status:

- Nineteen RBS trainings were conducted throughout the county and almost all of the attendees (99% of 349 participants) demonstrated an increased confidence in their ability to manage alcohol-related problems. Topics covered during the training included age identification, how to spot false IDs, pacing drinks to prevent intoxication, signs of intoxication, and cutting off service to an intoxicated patron.

Alcohol Sensitive Information Planning Systems (ASIPS)

The purpose of this program is to provide ASIPS services including collection of data on alcohol/drug involvement in police activity by partnering with local law enforcement agencies, data analysis and reporting to identify AOD-related problems in the communities of Fullerton, Garden Grove and Newport Beach that can be applied in the development of prevention plans. TSR funds represented 57% of the total budget of this project.

Outcomes/Current Status:

- Community Tour reports based on CY 2008 police data were produced for each of the es, together with special analysis/reports requested by ASIPS community partners. In June, 2009, the Web MCAP system was implemented, giving police and planning departments direct internet access to their community's ASIPS data and enabling community partners of the program to query the data on their own initiative.
- The police and planning departments of the three current ASIPS community partners have each submitted letters expressing both their appreciation of the services provided by the ASIPS program and their strong support for continuation of these services in their respective communities. Additionally, the South Orange County cities of Laguna Hills and Lake Forest have stated their intent to participate in the ASIPS program and are currently working with relevant parties within the OC Sheriff's Department to provide the requisite police data for ASIPS analysis.
- Three town hall meetings focusing on over-the-counter and prescription drug abuse among youth in Orange County were conducted in Anaheim Hills, Huntington Beach and Rancho Santa Margarita. On average 8 out of 10 participants, including parents, youth and community members increased their knowledge on this topic. In May 2009, the multi-disciplinary workgroup established to review research literature, existing data sources and develop regional reports on prescription and over the counter drug abuse in Orange County, hosted an all-day strategic planning session in which data and promising strategies to address prescription and over the counter drug abuse were presented. The participants in turn developed and prioritized prevention strategies. A comprehensive report including these strategies, along with countywide and regional data is being prepared.

DUI Education Campaign

The goal of this project is to develop an impaired driving media campaign for Costa Mesa and Newport Beach that will address the financial consequences of driving under the influence. TSR funds represented 100% of the total budget of this project.

Outcomes/Current Status

- Alcohol Impaired Driving Force of Costa Mesa worked with a graphic designer to develop printed materials such as bus ad, posters, post cards, wallet sized Tipping chart cards, and wallet sized Blood Alcohol Concentration chart (BAC) cards for the DUI educational campaign. Fourteen agencies showcased and/or distributed printed materials.
- The bus ad provided additional exposure to other parts of the county even though the media campaign targeted Costa Mesa and Newport Beach, as one bus line runs from the Newport Beach peninsula to the city of Yorba Linda.

Substance Abuse Treatment

Perinatal Substance Abuse Treatment

Program Expenditure\$512,395

TSR partially funds a perinatal residential substance abuse services program for 20 pregnant or parenting women and up to 24 of their children, with the goal of increasing the number of women with children that can be served and improving the quality of life for their children. In FY 2008–09, the Perinatal Residential Alcohol and Drug Abuse Services funding included two locations: Heritage House – North (HHN) and Heritage House – Costa Mesa (HHCM). TSR funds represented 34% of the total program budget for this project.

Outcomes/Current Status:

- 100% of the babies born (n=21) between the two locations during this evaluation period were drug-free. All 35 pregnant women (100%) served by the program between both locations received prenatal care. Depending on how high the risk level, a minimum of one to two visits are required per pregnant client.
- The retention rate for this fiscal year was 76%, with 45% of all clients served (n = 121) graduating from the program and 31% still enrolled in the program at the end of June 2009.
- Most of the clients who had completed both a CESI (Client Evaluation of Self at Intake) and a CEST (Client Evaluation of Self and Treatment) at discharge during this reporting period showed some improvement in motivation over the course of treatment. Compared to HCA norms, most clients were above average in all of the psychosocial assessment subscales at discharge.

- Tobacco cessation classes were offered at both the locations. Heritage House, Costa Mesa made a significant impact on tobacco cessation. Forty-three percent of their clients who attempted to quit smoking actually quit smoking.

Domestic Violence Program

Program Expenditure\$360,754

This program expanded Alcohol and Drug Abuse Services (ADAS) to families with domestic violence (DV) cases involving substance abuse. The goal of the program is to provide effective outpatient assessment, treatment, and counseling to the perpetrators and victims of domestic violence and to reduce the incidence of any substance abuse by both parties. TSR funds represented 100% of the total program budget for this project.

Outcomes/Current Status:

- The program successfully screened 1,090 clients for domestic violence issues during FY 2008–09. Of those, 140 (13%) were identified as having domestic violence issues and were able to receive needed referral and treatment.
- The program provided treatment to 71 clients this fiscal year. At the end of June 2009, two thirds of the clients served were either still enrolled in treatment or had successfully completed the treatment, for a retention rate of 68%.

Early Intervention and Prevention – Children

Program Expenditure\$189,298

The goal of the program is to reduce the impact of substance abuse and chemical dependence on children who have been exposed to households where substance usage has occurred. TSR funds represented 100% of the total program budget for this project.

Outcomes/Current Status:

- An assessment tool in the form of a questionnaire that encourages discussion about the child's exposure to substance abuse, coupled with their family history and experience with substances was developed and 19 children were assessed.
- An interactive educational program that includes a 6–8 session educational tool for parents/caregivers, and another 6–8 session educational tool for children were developed and delivered to eight community transitional living homes. Six transitional homes completed all eight sessions and two are in process. Participation in the educational groups included 130 first time parent/caregiver attendee. Nineteen first time children attendees were participants in their own educational groups.

- A pre/post questionnaire was developed for each of the parenting and children's sessions, but in consideration of the time required to administer the test that is taken away from actual curriculum, it was decided to administer tests only in session two which covers the vital concepts regarding parenting styles. The number of tests administered this fiscal year was not sufficient to draw any conclusions regarding the effectiveness of the educational programs. However, the experience of administering tests and the results are being used to find better ways for introducing the concept of testing that will reduce overall anxiety that was noticed in some parent groups as well as for improving the test content.

Alcohol and Drug Treatment Expansion

Program Expenditure\$149,451

These funds were intended to expand treatment services focused on adult and juvenile clients who require residential treatment to reduce the county-wide incidence of substance abuse, as well as the likelihood of relapse. TSR funds represented 9% of the total program budget for this project.

Outcomes/Current Status:

- Phoenix House served a total of 142 adults and 73 adolescents during this reporting period. The program was successful in retaining in treatment 66% of the adults served during this time (44% graduated while 22% were still in this 6-month treatment program at the end of June 2009). More than half of the adult clients discharged from the program during this time completed the treatment. Retention rate for the juvenile program was 38%, with 25% of the clients still enrolled in the program at the end of June 2009 and about 14% of the juveniles served graduating from the program.
- During this reporting period, 102 new adult clients were admitted to Phoenix House and 60% of those completed a CESI (Client Evaluation of Self at Intake) psycho-social assessment survey. Of the 63 clients who graduated from the program during this period, 49% completed a CEST (Client Evaluation of Self & Treatment) psycho-social assessment survey. Fifty-six new juvenile clients were admitted to the program and of those, 93% completed a CESI at intake, while 7 of the 10 individuals that graduated completed a CEST. The challenge for the program in the future will be to ensure that all clients complete both a CESI at intake and a CEST at discharge.
- Based on the CEST scores of the adult clients who completed the surveys, most clients had a greater desire for help, greater readiness for treatment, stronger participation in treatment, better rapport with their counselors and a greater sense of peer and social support compared to HCA norms.
- During this fiscal year, 15 smoking cessation classes were offered at the adult facility. Almost all adult clients (180 of 182) who attended cessation classes smoked and 37% of those were trying to quit. Of those who were attempting to quit, 9% successfully quit smoking while in the program.

Medical-Psychiatric Beds for Acutely Mentally Ill

Program Expenditure\$842,568

This program has made it possible to substantially improve the overall quality of care provided to indigent consumers with psychiatric and a co-occurring medical condition, and allow the opportunity for many Orange County hospitals to receive reimbursement for the care they would otherwise deliver without remuneration. TSR funds represented 14% of the total budget.

Outcomes/Current Status:

- HCA Behavioral Health Services maintained contracts for FY 2008–09 with three contracted hospitals from last year. The program continues to face the challenge of maintaining their contract hospital network in the face of escalating costs for the providers. One of the contracted hospitals, University of California, Irvine Medical Center in Orange, has opted not to renew their Adult Mental Health Inpatient (AMHI) contract for the next fiscal year.
- Of the total 6,297 bed-days used by clients admitted under the expanded contract, 1,340 were paid from the TSR allocation. HCA/BHS utilized the entire allocation of TSR funds in the first half of this fiscal year for patients with co-morbid medical issues. TSR funding has been reduced back to the FY 2007–08 level of \$752,819 for FY 2009–10. The per bed cost has also been increased in an effort to attract and maintain contract partners for this program. Together, this represents a loss of 134 beds at the current rate of per bed cost; this will present a challenge to HCA/BHS as the indigent patient population increasingly presents with co-morbid medical issues.
- HCA Behavioral Health Emergency Treatment Service (ETS) staff continued to efficiently monitor the referrals to TSR-funded beds. 60% of the 829 admissions under the contract in FY 2008–09 required concurrent medical evaluation and/or medical treatment, and 32% had a diagnosis of a persistent co-occurring substance related disorder.
- 93% of the 782 TSR-funded persons, who were discharged to the community, received a referral either to adult mental health outpatient services, alcohol and drug abuse services or private outpatient clinics, 4% did not have a documented linkage to aftercare, either left against medical advice or refused linkage. The remaining individuals were discharged to non-outpatient locations, such as medical hospitals, long-term care psychiatric placement. It will be a challenge for HCA/BHS in FY 2009–10 to support hospital providers in linking patients to community resources, given the reduction in outpatient clinic staffing and more stringent review of admission criteria to the County Outpatient Clinics.

III. Community Clinics

Total Expenditure \$ 5,502,655*

**Expenditure information based on TSR claim as of June 30, 2009*

This allocation enhanced healthcare services provided by community clinics. Services and/or hours of operation continued to be expanded. Outcome measures included increasing access to primary or specialty medical services, expanding access to medical care, strengthening operational capacity, development of a system of care, and external evaluation. About 8% of this allocation is used for services provided by the Coalition to the participating community clinic organizations, including management of individual contracts and effective oversight to ensure that the best available health care is provided to patients and that tobacco settlement funds are effectively utilized.

Outcomes/Current Status:

- Tobacco Settlement dollars were used by community clinics to expand access for primary care, as well as dental and mental health services by adding staff and equipment and remaining open on weekends. Per the terms of their subcontracts, clinics carried out individualized scopes of work that target unmet community needs for such services as childhood asthma, mammograms, after hours care, diabetic services, counseling, or oral health services.

Overall, the number and types of services provided during FY 2008–09 included:

- 106,155 primary care visits
- 33,910 dental visits
- 5,465 mental health visits
- 21,904 health education visits
- 122,359 support services visits
- 4,572 miscellaneous services

Total = 294,365

A break-down of services provided by individual clinics is included in Appendix B.

- The Coalition maintained medical and dental forums during FY 2008–09. The forums provide educational presentations, continuing education units, resources, reports from coalition and community committees, shared best practices, process development for coalition-wide projects. In addition to coalition-wide activities for improving access to care, standardization of vital sign measurements, integration of smoking cessation and prevention, other major coalition-wide quality management (QM) and quality improvement (QI) projects included:

- ▶ Oral Health Disease Management and Prevention – The goal of this project is to improve health outcomes by integrating an oral health assessment as part of a comprehensive medical evaluation, and the means to do this into a pediatric or primary care provider setting. The oral health screening assessment schema and tools were identified and medical providers were trained on both. The oral screening will be implemented in one pilot clinic providing primary care.
- ▶ Adult Diabetes Initiative – This initiative is an essential piece of a larger landscape of the Total Quality Management vision for Quality improvement (QI) in the Coalition. For improving quality of care, management and prevention of diabetes four standardized clinical measures were identified. The Chronic Disease Data Collection system is being implemented across clinics. The available resources and support services include educational classes that focus specifically on Nutrition, Peer support, preventive healthy living; a counselor that offers an optional One-on-One for their obese children population to increase the need for preventative health; a diabetic van, registered dietician; optometry and podiatry have also been implemented into the case management for diabetics.

IV. Emergency Room Physicians & On-Call Physician Specialists

Total Expenditure \$7,251,562

This allocation provides funding to compensate emergency room physicians and emergency room on-call physician specialists for services for nonpaying patients, contributing to the continued availability of these services. The Emergency Medical Services Fund (EMSF) program continues to have a positive impact in Orange County as a result of the infusion of TSR monies as directed by Measure H.

Outcomes/Current Status:

- Funds have helped augment emergency physician and on-call specialist reimbursements and allowed continued access to healthcare without interruption. One OC emergency department (Irvine Regional Hospital and Medical Center ER) closed in the 2008–09 fiscal year.
- In FY 2008–09 more than 130,000 claims for uncompensated care to Orange County emergency rooms were processed.
- While emergency departments in the County continue to face significant overcrowding and uncompensated care issues, the EMSF program is assisting in keeping them open and ensuring that physicians receive some payment for the services they provide. Without TSR funds, the emergency room crisis in Orange County would be a much bigger problem.

V. Hospitals Providing Charity Care

Total Expenditure \$1,901,713

Orange County hospitals that maintain basic or comprehensive emergency medical services (or trauma centers) for their communities received TSR support, year-to-date, in the amount of \$1,901,713 in FY 2008–09. Additional payments will be made up to the total amount of TSR funds available. This amount was distributed to hospitals for the uncompensated care burden borne by each local hospital. The largest distribution of these funds, year-to-date, approximately 17%, was made to UCI Medical Center, Orange County’s largest provider of uncompensated hospital care.

Outcomes/Current Status:

- Orange County hospitals serving as paramedic receiving centers and operating at least basic emergency services provided in excess of \$253,784,163 in charity care, as well as \$298,997,532 in bad debts for a total of \$552,781,695 in uncompensated hospital care costs for the four quarters ending September 30, 2008.*

**Based on data from Office of Statewide Health Planning and Development (OSHPD)*

Appendix A

Contractors for TSR-Funded Programs, Sections I and II

TSR Program	Contractor Name	FY 08-09 Total Contract Amount	FY 08-09 TSR Funding Level	Sub-contractor Name	Sub-contractor Service Type	FY 08-09 Sub-contract Total Amount
Health Care Services for Seniors & Disabled						
Access to Health Services for Persons with Disabilities	Legal Aid Society of Orange County	\$65,541	\$65,541	National Association Mentally Ill	Stigma Elimination program	\$22,712
Access to Health Services for Persons with Disabilities	Council on Aging of Orange County	\$91,472	\$91,472	Dayle Macintosh Center	Community Educator with direct access to persons with disabilities population	\$19,895
Door to Door Community Program Targeting Latino Elders	Latino Center for Prevention and Action in Health and Welfare dba Latino Health Access	\$102,406	\$102,406	N/A	N/A	\$0
Friendly Visitor Program for Elderly	Council on Aging of Orange County	\$88,981	\$88,981	N/A	N/A	\$0
In-home Mental Health Services for Aging	College Community Services	\$4,782,321	\$270,797	Pauline Le – Prelicensed Therapist	Mental Health Outpatient Services	\$5,280
In-home Mental Health Services for Aging	College Community Services	\$4,782,321	\$270,797	Dr. Robert Lopez	Mental Health Outpatient Services	\$3,249
Mental Health Program for Disabled	Royale Health Care Center – Mission Viejo	\$7,174,488	\$1,307,349	GN Medical Associates, Inc.	Primary Care Services	\$15,768
Pediatric Development Screening Services	California Chapter 4, American Academy of Pediatrics	Maximum Obligation for 1/1/08 – 6/30/09: \$133,412	\$113,788	Various	Pediatric Developmental Screening	\$40,864
Senior Health Outreach and Prevention Program Services (SHOPP)	Community SeniorServ, Inc.	\$40,000	\$40,000	N/A	N/A	\$0
Senior Health Outreach and Prevention Program Services (SHOPP)	Council on Aging of Orange County	\$40,000	\$40,000	N/A	N/A	\$0

Appendix A (cont.)

TSR Program	Contractor Name	FY 08-09 Total Contract Amount	FY 08-09 TSR Funding Level	Sub-contractor Name	Sub-contractor Service Type	FY 08-09 Sub-contract Total Amount
Senior Health Outreach and Prevention Program Services (SHOPP)	South County Senior Services	\$40,000	\$40,000	N/A	N/A	\$0
Transitional Community Living Program (WATRC)	Extended Care Hospital of Westminster	\$2,961,517	\$305,455	N/A	N/A	\$0
Tobacco Prevention & Control, Other Addiction Programs & Community Mental Health Services						
Community Based Substance Abuse Prevention & Treatment – South Region	National Council on Alcoholism and Drug Dependence – Orange County	\$423,675	\$85,000	N/A	N/A	\$0
Community Based Substance Abuse Prevention & Treatment – North and Central Regions	Community Service Programs, Inc.	\$847,350	\$170,000	N/A	N/A	\$0
Med-Psych Beds for Indigents	College Hospital of Costa Mesa; University of California at Irvine Medical Center; Western Medical Center at Anaheim	\$6,145,999	\$752,819	None	N/A	N/A
Tobacco Prevention and Cessation Projects – Prevention Services	America On Track DBA Orange County On Track	\$277,000	\$277,000	N/A	N/A	\$0
Tobacco Prevention and Cessation Projects – Prevention Services	Community Service Programs, Inc.	\$277,000	\$277,000	N/A	N/A	\$0
Tobacco Prevention and Cessation Projects – Prevention Services	National Council on Alcoholism and Drug Dependence, Orange County	\$277,000	\$277,000	N/A	N/A	\$0

Appendix A (cont.)

TSR Program	Contractor Name	FY 08-09 Total Contract Amount	FY 08-09 TSR Funding Level	Sub-contractor Name	Sub-contractor Service Type	FY 08-09 Sub-contract Total Amount
Tobacco Prevention and Cessation Projects – Cessation Providers	Anaheim Memorial Medical Center	\$202,000	\$202,000	N/A	N/A	N/A
Tobacco Prevention and Cessation Projects – Cessation Providers	Nhan Hoa Comprehensive Healthcare Clinic	\$202,000	\$202,000	Korean Community Services	Korean-speaking Health Educator Services	\$7,000
Tobacco Prevention and Cessation Projects – Cessation Providers	Phoenix House Orange County, Inc.	\$202,000	\$202,000	N/A	N/A	N/A
Perinatal Residential Alcohol & Drug Abuse Services	Heritage House North	1,384,917	\$467,395	N/A	N/A	\$0
Expansion of Contracted Residential Alcohol and Drug Treatment Services – Adults	Phoenix House	704,633	\$64,136	Dr. Igor Koutsenok	Drug and alcohol rehabilitation services, case supervision, and case review services.	\$6,000
Expansion of Contracted Residential Alcohol and Drug Treatment Services – Adults	Phoenix House	704,633	\$64,136	Jill Tait Machany, R.D.	Dietician consultation to clients and staff; Educational/nutritional seminars and workshops, menu planning, and visitation inspections.	\$7,880
Expansion of Contracted Residential Alcohol and Drug Treatment Services – Adolescents	Phoenix House	\$937,317	\$85,315	Dr. Stephen Winston	Adolescent psychological analysis and assessment for Drug Rehabilitation	\$14,561

Appendix B

Contracted Community Clinics, Section III

Services Provided in FY 2008 – 2009

Clinic	Funding Allocated	Type of Service	Services	Target Population	Number of Visits
AltaMed / CCHC	\$348,822	Medical	Primary Medical Care Services	Adults & Adolescents	3,201
		Support	Screen New Patients	Adults & Adolescents	939
	\$72,060	Dental	Dental Care Services	All Patients	3,048
		Miscellaneous	Dental Care Services	All Patients	180
Camino Health Center	\$228,044	Medical	Primary Medical Care Services	All Patients	3,778
Central City Health Center	\$178,356	Medical	Primary Medical Care Services	Adults	2,269
		Support	New Patients	Adults	597
CHOC Mobil Primary Services	\$75,257	Medical	Primary Medical Care Services	Children	1,285
CHOC – Breathmobile	\$102,470	Medical	Asthma Screenings	Children	2,897
CHOC – Clinic Support Services	\$47,840	Medical	Primary Medical Care Services	Children & Teens	22,404
Friends of Children	\$103,123	Medical	Primary Medical Care Services	Children	4,193
		Education/Prevention	Distributed Medical and Dental Educational Books	Children	1,493
	\$128,230	Dental	Dental Care Services	Children	1,589
Gary Center – Dental	\$126,835	Dental	Dental Care Services	Adults & Children	1,544
		Outreach	Dental Outreach Activities	Adults & Children	9
Gary Center – Community Counseling		Mental Health	Mental Health Counseling for Groups in Specific Programs	Children, Youths & Adults	4,428

Appendix B (cont.)

Clinic	Funding Allocated	Type of Service	Services	Target Population	Number of Visits
Healthy Smiles for Kids of Orange County	\$190,807	Dental	Advanced Dental Services	Children	3,547
			General Dentistry for School Aged Children	Children	3,548
		Support	Link patients w/no insurance to a plan	Children	0
La Amistad Family Health Center	\$94,930	Dental	Dental Care Services	Adults	1,502
Laguna Beach Community Clinic	\$196,587	Medical	Medical Care Visits	Adults	16,974
			Medical Care – Provide Anonymous HIV Testing	Adults	812
Lestonnac Free Clinic	\$248,984	Medical	Medical Care Services	All Patients	5,786
		Miscellaneous	Medical Care Services – Unduplicated Patients	All Patients	2,708
	\$20,282	Dental	Dental Care Services	Children & Adults	1,774
Nhan Hoa – Comprehensive Healthcare Clinic	\$60,994	Education/Prevention	Hypertension Education	Adults	1,056
	\$75,365	Medical	Medical Care Services for Women	Women	5,452
	\$86,870	Dental	Dental Care Services	Adults	2,494
Orange County Rescue Mission	\$227,377	Medical	Primary Medical Care Services	All Patients	2,926
		Mental Health	Mental Health Services	All Patients	201
			Mental Health Services Provided by Interns	All Patients	411

Appendix B (cont.)

Clinic	Funding Allocated	Type of Service	Services	Target Population	Number of Visits
Planned Parenthood of Orange and San Bernardino Counties	\$264,648	Education/Prevention	Patient Education Sessions – Reproductive Health	Teens	10,246
			Patient Education Sessions – Reproductive Health – Preteens	Preteens	52
			Train the Trainer Workshops	Parents, Guardians, & Caregivers	849
			Patient Education Sessions – Reproductive Health – Developmentally Disabled	Teens & Young Adults	85
			Patient Education Sessions – Health Education & Development	Adults, Caregivers, Preteens & Persons w/ Disabilities	8,123
Puente a la Salud – New Bridges	\$135,068	Medical	Primary Medical Care Services	Agricultural Workers	1,874
		Miscellaneous	Optometric Care Services	Agricultural Workers	264
Puente a la Salud – Adult Dental	\$86,436	Dental	Dental Care Services	Adults	966
Share Our Selves	\$183,792	Medical	Primary Medical Care Services	All Patients	7,178
			Advanced Medical Specialty Care	All Patients	2,162
		Support	Medications for Medical Care Management	All Patients	4,354
			Lab Tests	All Patients	2,450
			Screening for Chronic Care Program Eligibility	All Patients	4,852
	\$162,896	Dental	Dental Care Services	Adults	3,363
			Emergency Dental Care	Adults	1,091
			Provide Dental Visits for Adults	Adults	5,674
	Sierra Health Center	173,715	Medical	Primary Medical Care Services	Adults

Appendix B (cont.)

Clinic	Funding Allocated	Type of Service	Services	Target Population	Number of Visits
St. Jude – Primary Care	245,573	Medical	Primary Medical Care Services	Children & Adults	2,639
		Miscellaneous	Primary Medical Services to 200 New Patients	Children & Adults	251
		Support	Specialty Care Referrals	Children & Adults	783
			Subsidized Prescriptions	Children & Adults	668
		Mental Health	Mental Health Care Services	Children & Adults	425
		Miscellaneous	Mental Health Care Services to New Patients	Children & Adults	81
St. Jude – After Hours Collaborative	25,000	Support	Access to patients to after hours phone triage and physician call group	Adult	100,649
		Miscellaneous	Emergency Visits Avoided	Adult	186
UCI – Anaheim/ Santa Ana	82,054	Medical	Medical Care Services	Senior Health	7,181
			Anti-Coagulation Therapy	Senior Health	1,076
	Outreach	Outreach Events	Senior Health	46	
	96,183	Support	Chronic Care Diabetes	All Patients	812
	82,070	Support	Language Interpretations for Primary Medical Care Services	All Patients	6,255
	103,362	Dental	Dental Care Services	All Patients	1,064
VNCOC Asian Health Center – Medical	99,621	Medical	Medical Care Services	All Patients	6,426
		Miscellaneous	Unduplicated Medical Patients	All Patients	847
	75,141	Dental	Dental Care Services	All Patients	2,706

