

San Joaquin County
Public Health Services

Annual Report

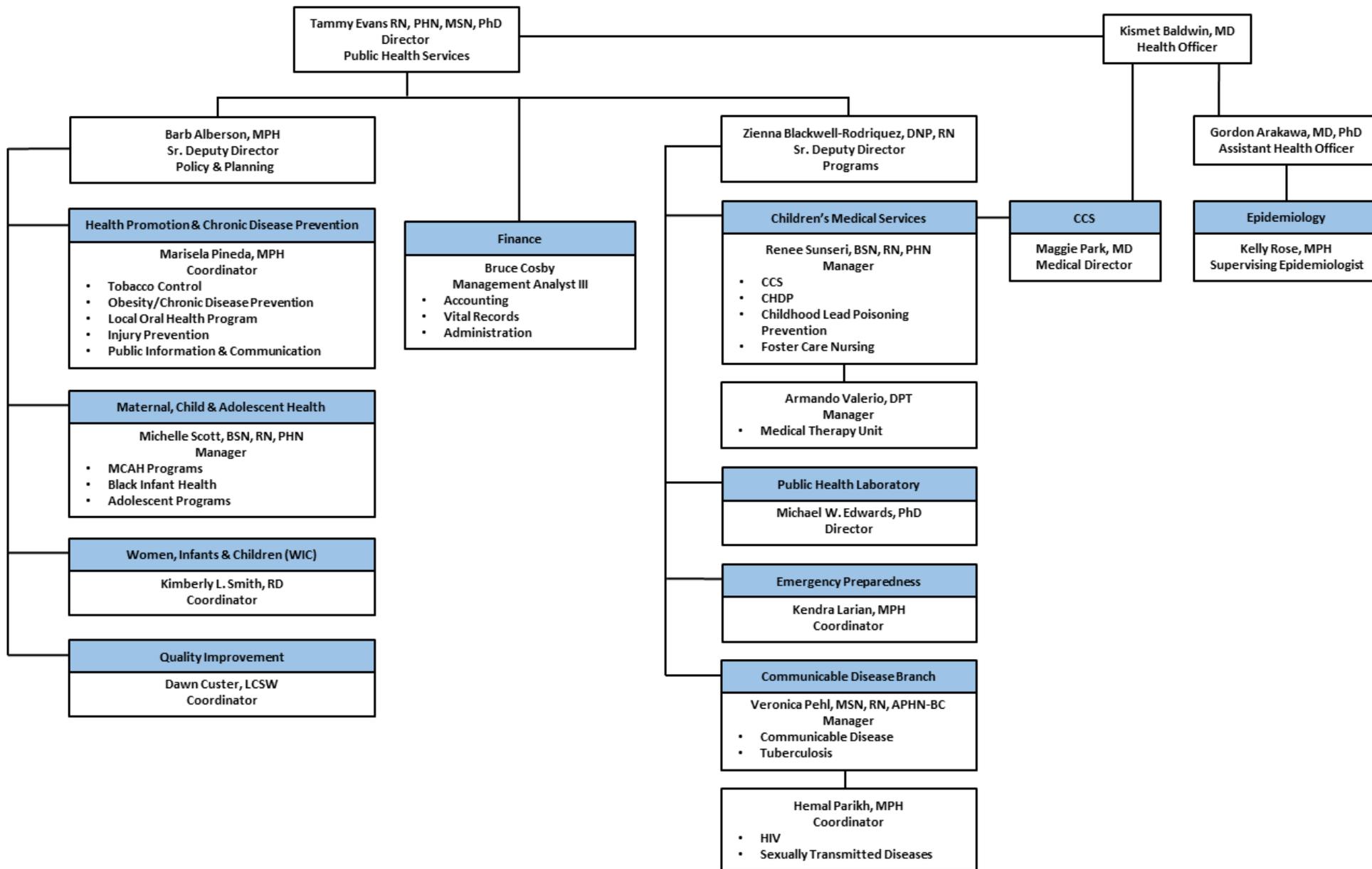
2018



Table of Contents

Organizational Chart	1
Introduction	2
Priorities of the Board of Supervisors	3
Public Health Accreditation	4
Community Health Needs Assessment	5
The Opioid Epidemic	6
Oral Health Initiative	7
Homeless Outreach	8
Communicable Disease and Tuberculosis	9
Syphilis Outreach	10
WIC and the Diabetes Prevention Program	11
California Children’s Services and Medical Therapy Program	12
Selected Reportable Diseases	13
Looking Forward	14
List of Programs	15-17

Organizational Chart



Introduction

San Joaquin County Public Health Services (PHS) provides a broad array of programs and services to protect and promote the health and wellbeing of county residents. PHS is well regarded for its core programs, including a renowned Public Health Laboratory and immunization registry that both serve surrounding counties.

VISION AND MISSION

As set forth in the PHS Strategic Plan, 2017-2022:

Vision - All San Joaquin County communities are healthy, safe, equitable, and thriving.

Mission - To protect, promote, and improve health and wellbeing for all who live, work, and play in San Joaquin County.

WORKFORCE

The 212-member multidisciplinary staff reflects the broad diversity of the county's population. While the PHS workforce is predominantly female (78%) with 43% of staff reporting an age between 30-59, the racial and ethnic composition is comparative to the county overall. Results from a PHS staff workforce development survey completed in December 2017 indicate 31% of PHS employees were Caucasian, 24% were Latino/Hispanic, 23% were Asian/Pacific Islander, 7% were African American and less than 5% were Native American/Alaska Native/Hawaiian. PHS staff reported speaking a total of 25 different languages.

HEALTH EQUITY APPROACH

In San Joaquin County's most under-resourced neighborhoods, life span is shortened by more than 20 years as compared to higher income areas. Health is inextricably linked to geography and to structural and social conditions that concentrate resources and opportunities for healthful living. *Where you live determines how well and how long you live.*

Health equity means everyone has a fair opportunity to obtain optimal health. This requires removing barriers to individual and community health, such as poverty and discrimination.

PHS incorporates a *health equity approach* in its programs and services. PHS works with partner agencies and organizations across multiple sectors to improve the social, economic and physical conditions that impact health. All San Joaquin County residents benefit from a healthy community.



Priorities of the San Joaquin County Board of Supervisors

PHS strongly supports the priorities set forth by the Board of Supervisors. Of utmost importance, PHS is committed to **ensuring fiscal responsibility**. The Department routinely analyzes program costs. For example, in the Supplemental Nutrition Program for Women, Infants and Children (WIC), some 7,500 clients receive food packages each month at an average per client cost of \$62.12. Research has documented \$1.77 to \$3.13 reductions in Medicaid cost for every \$1 spent on WIC (National WIC Association). PHS is also very active in seeking additional funding from private, state and federal grants. It has been successful in securing non-County funding for 61% of budgeted expenditures. Senior managers are also active participants in advocating through their professional organizations for increasing local health department funding at the State level.

PHS **promotes good governance** and increases organizational capabilities through cross-training of staff wherever possible. This improves communication and collaboration among staff and allows flexibility to provide services in the areas of greatest need in evolving situations such as communicable disease control. PHS incorporates a health equity lens in its program activities to improve opportunities for disadvantaged and distressed communities. PHS collaborates with partners in law enforcement, transportation, environmental health, cities, education, community services, faith-based organizations, as well as resident grassroots leaders and interested others who can help communities make healthier choices.

PHS strives to **improve public safety** protecting residents from harm through promotion of safe and healthy communities. PHS collaborates with community partners on strategies that address opioid misuse and abuse; promote safer, more walkable neighborhoods; prevent unintentional and intentional injuries; and reduce the impact of both acute and chronic diseases.

PHS **promotes economic development** through programs that focus on reducing barriers to healthy living. Participants receive support to graduate from high school, maintain housing, obtain healthy food, and increase compliance with medical regimens and appointments. Through this support, individuals are better prepared to be healthy contributing members of the community.

Public Health Accreditation

Finish Line is within Reach

As described last year, PHS submitted all required documentation to the Public Health Accreditation Board (PHAB) in December 2017. In the following months, PHAB conducted a review of our 329 documents to ensure “completeness”, followed by a more thorough paper review by the members of the expert team assembled to conduct our in-person site visit. The subsequent in-person PHAB site visit took place in November 2018. During this two-day visit, the site team met with staff, as well as policy makers and community partners, diving deeper with questions to help them evaluate how PHS’ efforts conform to the national standards for public health practice.

PHS recently received the site team’s official report and it was very favorable: of the 100 measures, 86% were fully or highly demonstrated. The report and the team’s recommendation will be submitted to the PHAB board for consideration at their quarterly meeting in March 2019. PHS is proud of its programs and services, and the site visit offered an important opportunity to highlight accomplishments. PHS anticipates that it may achieve national accreditation status by April 2019.

Quality Improvement

PHS implemented its new Quality Improvement (QI) Plan this year. Although this was also a requirement under Accreditation, PHS viewed it as a prime opportunity to embed continuous quality improvement into everyday practice throughout the department. All of the department’s major programs successfully conducted a rapid QI project this first go-around. They focused most often on improving program operations; their projects ranged from developing a client satisfaction survey for the car seat safety program to reducing “missed appointments” in WIC by conducting same-day phone follow-up to encourage re-engagement. This fall, programs launched their second project. They now understand and value the role of QI and that it is to be built into on-going program implementation and evaluation.

The Opioid Epidemic

Background - According to the California Department of Public Health (CDPH), while San Joaquin County saw a decline in opioids prescribed from 2015 to 2017, our county still experienced 69 deaths in 2017 due to all opioid-related overdoses, the most recent calendar year data available. Alarming, this was a 50% increase from 2015. These statistics underscored the need for a comprehensive countywide effort to address opioid misuse and abuse.

Getting Started - Public Health Services (PHS) secured grant funds from the Sutter Health Foundation to convene a SJC Opioid Safety Coalition in November 2017. Launched in early 2018, this group includes partners from across the county, e.g., hospitals, emergency responders, public safety officers, educators, community advocates, and service providers.

Coalition Efforts - The Coalition developed a Strategic Plan to guide its activities. PHS is assisting Coalition Subcommittees in carrying out the following Plan objectives:

Education and Outreach is planning a media campaign using billboards and social media in 4-5 high-risk zip code areas.

Prescriber and Pharmacy Education has identified four physician members to participate in Academic Detailing (AD). They will receive training in early 2019 on safer pain management strategies and prescribing guidelines. They will then conduct one-on-one educational visits with local health care providers.

Overdose and Treatment is compiling a list of local treatment services to be publicized through channels that best reach the target audiences. PHS will also coordinate with hospital emergency departments to build “warm hand-off” programs to move overdose patients into treatment.

PHS Naloxone Distribution Project - in October 2017, through a grant from CDPH. PHS received 453 free kits of Narcan (nasally administered Naloxone) to distribute directly to community members at risk for opioid overdose death. Training on how to administer the Narcan was a prerequisite for receiving the kits. In March 2018, PHS sponsored a Naloxone training for service providers, first responders, and law enforcement to encourage them to use Narcan during acute overdose situations. As a result, the following entities received Narcan:

Correctional Health

Behavioral Health Services

University of Pacific

Fire departments through EMS distribution

Gospel Rescue Mission

Sheriff and Stockton Police Department via Aegis distribution

PHS also distributed the kits through its TB and STD/HIV programs and to residents “walk-ins”.

Sustaining Momentum - PHS will continue to facilitate the implementation of Coalition priorities to reduce deaths attributed to opioids. Since much of this work has been grant-funded, PHS and its partners are seeking additional resources to help sustain momentum.

Homeless Outreach

The Triad Project, funded by HealthNet, consisted of nine outings where PHS staff went to homeless camps in Lodi and Stockton to provide health screenings. Services provided at each outing included syphilis testing and treatment, tuberculosis screening, Hepatitis A and Influenza vaccine, and Naloxone distribution. To effectively provide this number of services required cross program collaboration from the PHS team. Staff from the following programs assisted in assuring this project was a success: TB/CD, HIV/STD Programs, Maternal Child and Adolescent Health, Immunizations, Epidemiology, Emergency Preparedness, Health Promotion, and the PHS Laboratory.



Table 1. Project Overview		
Total Screened	253	
Field Services	#	%
1. Hepatitis A Vaccine	180	71.1%
2. Influenza (flu) Vaccine	159	62.8%
3. Rapid Syphilis Test (RST)	230	90.9%
4. Blood Draws	221	87.4%
5. Syphilis Treatment	31	n/a
6. Naloxone Kits Distribution	19	n/a
Four Services (1-4)	117	46.3%
Five Services (1-5)	14	5.5%

A total of 253 people were screened during the nine outings. The number of clients screened each day ranged from 16 to 47 with a median of 27. A large percentage (46%) of clients received four services: hepatitis A vaccine, influenza vaccine, blood draw, and rapid syphilis testing (RST). [Table 1]

From the screenings, 25 new syphilis cases (10%) were identified and all were treated in the field except one. Twenty-four (12%) clients were positive for tuberculosis and are undergoing follow-up for additional services.

Drug use was reported by 75% of the individuals screened; 12% reported opioid use which resulted in 19 naloxone kits distributed.

Selected Program Highlights

General Communicable Disease (CD)

There was a mild increase in the number of bats identified carrying the Rabies virus compared to last year; these rabid bats were associated with known contact with pet dogs. Public Health Services worked with the county Animal Control officers to enforce strict quarantine rules for the pet dogs exposed to these rabid bats.

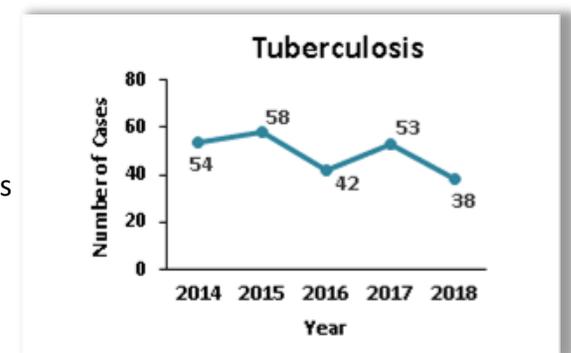


The program continued to emphasize timely Rabies vaccinations for pet dogs and cats. Working with area Veterinarians, the program enforced strict rules governing granting of Rabies vaccine exemptions for pet dogs and cats.

Tuberculosis (TB)

The Tuberculosis (TB) Control Program works closely with community members, clinicians, and public and private organizations to protect the health of County residents and visitors. Staff coordinate with State and Federal officials, as well as correctional facilities and schools, monitor communicable disease outbreaks, alert clinicians to public health threats, and investigate cases and contacts. In 2018, the TB Control Program introduced targeted provider training to the area hospitals to improve the initial diagnosis of patients with suspected Active TB and to area clinics to increase the treatment rate of those individuals with suspected latent TB infection.

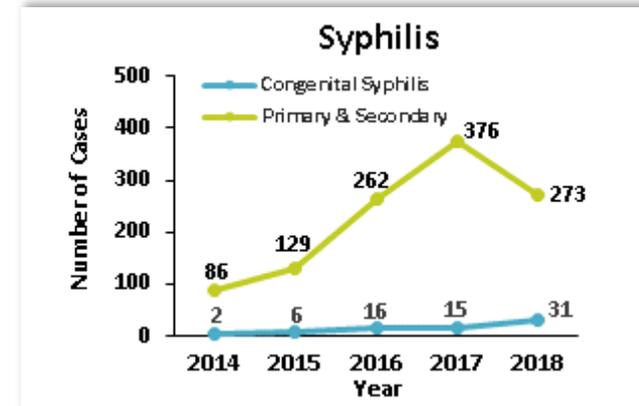
The number of TB cases decreased from 53 in 2017 to 38 in 2018. Although the number of active cases decreased in 2018, 7 of the 38 active cases were a result of a multiyear outbreak that is the fourth largest in the nation. Over 600 contacts were evaluated for TB exposure as a result of this outbreak alone.



Syphilis Outreach

Combatting syphilis remains a priority. In 2018, there was a decrease in the number of primary and secondary syphilis cases but congenital syphilis cases continued to increase. This year, PHS sought to enhance its ability to reach out into communities who may not otherwise access medical care or testing. Communicable Disease Investigators in the sexually transmitted diseases (STD) and HIV program participated in an intensive phlebotomy training class through San Joaquin Delta College. Staff obtained certification to draw blood, providing PHS the opportunity to take disease testing to the field. The Homeless Outreach Project was a successful example of this approach. Rapid syphilis testing (RST) was also performed by STD program staff during outreach projects. Implementation of RST is another important tool for combating rising syphilis rates; while standard testing requires blood collection, locating community members with positive test results can be difficult. When RST is done in the field, staff are able to obtain quick results and treat if necessary while the patient is still available.

STD staff also increased community outreach and education regarding syphilis. Staff have provided guidance to providers regarding current guidelines for screening, diagnosis and treatment, and persistently pursued identified cases to ensure the patient and their contacts received appropriate treatment. News media and infographic posters were also utilized to increase community awareness regarding the rising syphilis numbers in the state and county. Staff collaborated with Correctional Health staff to continue syphilis testing for inmates in the County jail; approximately 17% of inmates tested were diagnosed with syphilis and received treatment while incarcerated. PHS is seeking to expand the percentage of inmates who are screened in and accept testing.



Women, Infants, and Children (WIC)

WIC opened a new site in the San Joaquin General Hospital clinic wing. WIC Staff at this new site promote utilization of combined services including the nutrition program, breastfeeding support, health and Medi-Cal services to patients, hospital staff, and families in the surrounding areas.

WIC also collaborated with First 5 of San Joaquin and SupplyBank.org on a one-year pilot project to educate parents about the importance of clean diapers. Together, they developed an educational handout on “diaper need” and then SupplyBank.org provided WIC with diaper kits (each with 80-100 diapers and wipes) to distribute routinely to 200 infants and toddlers on the WIC Program. WIC replenished the supply of diapers during clinic visits. This project has provided an important dividend for eligible families in that it eases financial burdens; diapers are often an expensive part of a family’s budget.



Diabetes Prevention Program (DPP)

PHS established the Diabetes Prevention Program (DPP) with funding from CDPH to address ever-escalating rates of diabetes in our county and the fact that 48% of our adult residents are now “pre-diabetic.” PHS convened an Advisory Committee to help raise awareness of prediabetes and to promote referrals to DPP classes across the county. These DPP classes are for those who are at high risk of becoming a diabetic and are led by lifestyle change coaches. The classes focus on lifestyle changes such as eating healthier, stress management, and physical activity.



As part of building capacity for DPP, PHS facilitated training for 32 lifestyle change coaches from eight (8) different community organizations as well as trained two (2) new DPP Master Trainers. To date, PHS has enrolled over 144 participants in both online and in-person DPP classes and has launched a countywide media campaign to raise awareness about diabetes and what can be done to prevent it.

California Children's Services (CCS)

PHS provided specialized medical case management, that is not funded through the managed care plans, for nearly 4,000 children. Care was provided to children ages 0 to 21 with complex and life-threatening conditions. Assisted with arrangement and payments for medical care, diagnostic evaluations, pharmaceuticals, durable medical equipment, rehabilitation services, and transportation to special care centers.

Eligible medical conditions may include:

Congenital Heart Disease	Cancers	Cerebral Palsy	Cystic Fibrosis
Chronic Lung Disease	Diabetes	Epilepsy	Hearing Loss
Hemophilia	Kidney Disease	Muscular Dystrophy	Rheumatoid Arthritis
HIV	Sickle Cell Anemia	Traumatic Injuries	Severe Burns
	Cataracts	Cleft Lip & Palate	

Medical Therapy Program (MTP)

MTP collaborated with UC Davis Department of Pediatrics and Physical Medicine Rehabilitation in successfully obtaining grant funding for the School-Based Tele Psychiatry Assistance for Rehabilitation and Therapeutic Services (STARS) from the Agency of Health Care, Research, and Quality (AHRQ). The grant provides five years of financial support to implement a new model of care using telemedicine to deliver pediatric psychiatrist medical direction to Medical Therapy Units serving children with disabilities in rural or underserved areas.

San Joaquin and Butte counties are the only two CCS/MTPs participating in this pilot project. Staff worked with UC Davis to install the teleconferencing equipment and develop technical and operational procedures at the Medical Therapy Unit at Hoover Elementary School in Stockton. The telemedicine services went into effect January 2019.



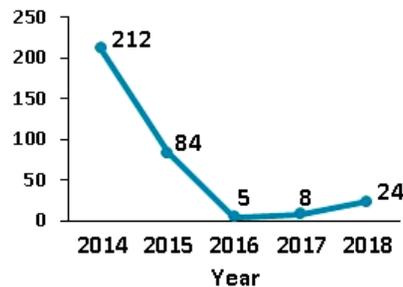
Selected Reportable Diseases

There are over 80 diseases and conditions that are reportable to PHS. The total number of reports increased 45% in the past five years from 7,683 in 2014 to 11,115 in 2018 due to electronic lab reporting. While not all reports are cases, some diseases have decreased in 2018, while other diseases, such as Gonorrhea and Valley fever, continue to increase especially in the last three years.

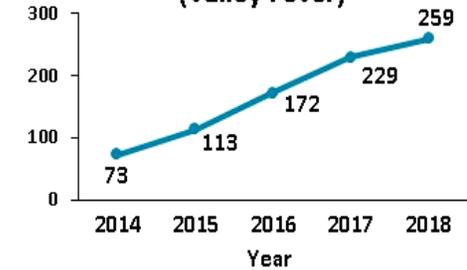
All Reportable Diseases



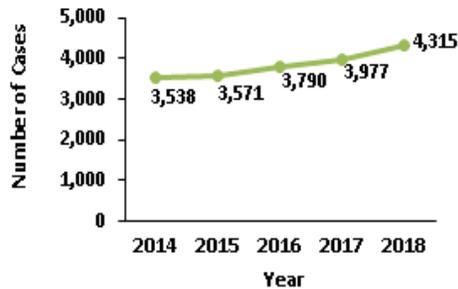
Pertussis



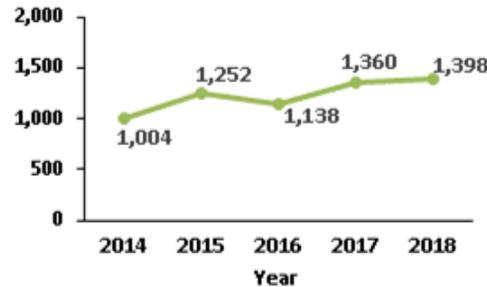
Coccidiomycosis (Valley Fever)



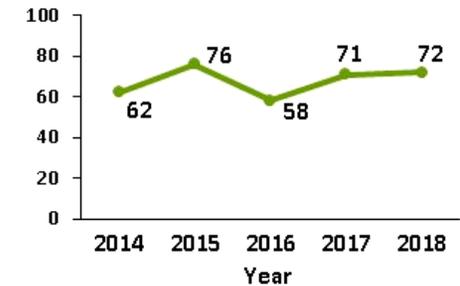
Chlamydia



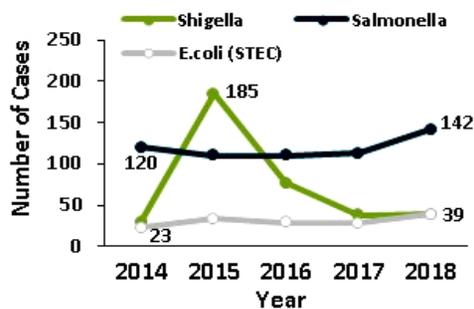
Gonorrhea



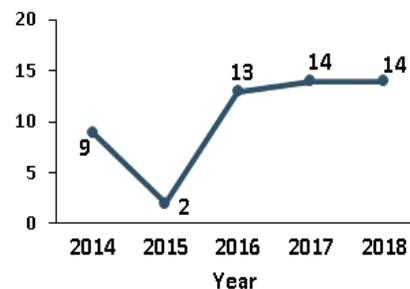
HIV



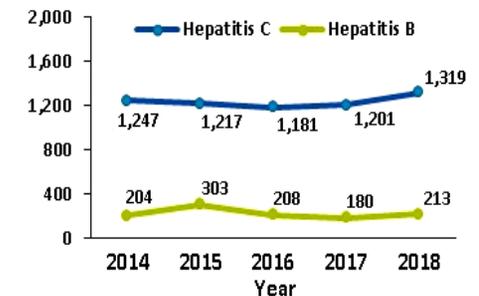
Enterics



West Nile Virus



Chronic Hepatitis



Looking Forward

Technology

Public Health Services initiated use of digital tablets for both case management and field investigations. Use of digital tablets reduce the waste and inefficiencies of paper charts and forms, promotes real time data entry and allows for rapid assessment and analysis of data.

Software Development

Case management of Active TB cases functions as a cornerstone of the Public Health Services TB control Program. Depending on the severity of the TB infection and sensitivity of the TB bacteria to drug therapy, an Active TB case could be followed daily by the TB control program for up to 24 months. Many of these paper-based Case Management charts contain many hundreds of pages. In order to decrease paper waste and to increase efficiency, PHS developed a digital Case Management software application. This application virtually eliminates the need for paper charts and provides additional data analysis tools to improve the care of persons with Active TB.

Whole Genome Sequencing

Through the use of Homeland Security Grant Program funding, the public health laboratory is in process of purchasing equipment to conduct Whole Genome Sequencing as a tool to aid in communicable disease investigations and identify outbreaks sooner. Whole genome sequencing is a fast and affordable way to obtain high-level information about the bacteria using just one test, by analyzing the entire DNA sequence of microorganisms to create a DNA fingerprint. In past local communicable disease outbreaks, we have relied on testing to be completed at a state or federal level, which can take weeks to identify. By having this technology in house, we will be better situated to identify outbreaks in real time, thus lessening the disease impact on the community.

ACEing Parenting Pilot Program

ACEing Parenting is a new collaboration with PHS, the Child Abuse Prevention Council (CAPC) and San Joaquin General Hospital (SJGH), funded by Dignity Health. The goal is to help parents of young children who may be struggling with unaddressed trauma from their own Adverse Childhood Experiences (ACEs). This one-year pilot is being launched this spring in SJGH Pediatrics and Family Practice clinics. It will gauge the efficacy of a strategy where physicians engage the parents in a discussion about ACEs prompted by a special self-administered ACEs questionnaire. If the parents have a high score on the questionnaire, the physician will provide a “warm hand off” to CAPC who will link them to resources and services for unaddressed trauma. By helping parents understand and cope with what happened to them when they were young, it should ultimately help to mitigate a cycle of abuse. If the pilot is successful, the goal is to embed the process into clinical practice and share it with other community providers.

List of Programs

<p>Administration Supports major functions of the Department such as department management, health statistics and reporting, personnel, accounts payable, purchasing, payroll processing, expense reimbursement claims.</p>	(209) 468-3411
<p>Black Infant Health Program (BIH) Provides support, education, and referrals for high-risk African-American families and infants up to one year of age; empowerment-focused group support services and case management. In 2018, 127 women were recruited and the program performed over 1,300 supportive activities.</p>	(209) 953-7074
<p>Birth Certificates and Other Vital Records Registers births, deaths and fetal deaths occurring in the county. Provides certified paper copies of birth certificates and other vital records (e.g., burial permits and death certificates). In 2018, there were 18,836 documents issued.</p>	(209) 468-8600
<p>California Children's Services (CCS) Statewide program that coordinates and pays for medical care and therapy services for eligible clients under 21 years of age. Served nearly 4,000 children across the county including more than 500 infants who were hospitalized in the NICU in 2018.</p>	(209) 468-3900
<p>Cal-Learn Provides support, education, and referrals for pregnant and parenting teens receiving CalWORKs cash aid to help them finish high school or get a GED. A Maternal, Child and Adolescent Health (MCAH) program</p>	(209) 468-3880
<p>Child Health and Disability Prevention Program (CHDP) Provides oversight to CHDP medical providers and community clinics as well as connects low-income children and children in foster care to community resources in relation to preventative health care, treatment services and diagnostic referrals for ages 0 - 21.</p>	(209) 468-8335
<p>Child Passenger Safety Program Provides one-on-one car seat installation assistance to parents and caregivers by appointment at PHS and at community check-up events, conducts car seat education classes in the community.</p>	(209) 953-7309
<p>Childhood Lead Poisoning Prevention Program (CLPPP) Provides education and resources for the community in order to raise awareness of the dangers of lead poisoning. Home visitation and inspections are also available for children found to be severely lead-poisoned.</p>	(209) 468-2593
<p>Chronic Disease and Injury Prevention Programs Works with community partners across the County on strategies to reduce the risks associated with diabetes, hypertension, and other chronic conditions (e.g., healthier diets, more physical activity, monitoring blood pressure, appropriate medications). Also, works with traditional and non-traditional partners on the prevention of injuries (e.g., as a result of traffic, pedestrian, and bike crashes, senior falls, drowning, suffocation, poisoning, etc.).</p>	(209) 468-3368
<p>Communicable Disease Control Program Conducts case investigation of reportable communicable diseases, outbreak management, contact identification, patient and community education, and consultation to physicians, infectious disease practitioners, nursing facilities, schools, and day care programs.</p>	(209) 468-3822

List of Programs

<p>Emergency Preparedness Program (EP) Provides education and training to improve public health emergency readiness for individuals, families and the community-at-large. The EP Program reached more than 21,000 people during National Preparedness Month in September 2018.</p>	(209) 468-9361
<p>Epidemiology Provides surveillance and monitoring of health data as well as supporting programs' needs for health-related data (e.g., social determinants of health); shares health information with the community through data reports and requests.</p>	(209) 468-9841
<p>Fetal Infant Mortality Review Program (FIMR) Member of Countywide multi-disciplinary team that reviews fetal and infant deaths to identify, develop, and implement recommendations that will improve community resources and health service delivery systems for women and children. The goal is to reduce the overall number of deaths as well as the disparity of fetal and infant deaths among African Americans. A MCAH program.</p>	(209) 468-3004
<p>In Home Supportive Services (for Elderly, Blind and Disabled) Nurses assess homes and provide referrals and recommendations to families. A MCAH program.</p>	(209) 468-2202
<p>Laboratory California State and Federally certified facility that provides high-complexity testing services for San Joaquin as well as a number of neighboring Counties. The Lab conducted nearly 23,500 billable tests in 2018.</p>	(209) 468-3460
<p>Local Oral Health Program In partnership with SJ TEETH, provides coordination of oral health activities to reduce the burden of oral disease among vulnerable and underserved populations throughout the County.</p>	(209) 468-8620
<p>Maternal, Child, and Adolescent Health Program (MCAH) Set of integrated programs designed to improve the health of California's women of reproductive age, infants, children, and adolescents, and their families. Last year, MCAH conducted nearly 1,200 home visits, received 800 referrals, provided nearly 16,000 educational materials to families, and screened more than 40,000 people for insurance coverage.</p>	(209) 468-3004
<p>Medical Therapy Program Provides Physical Therapy and Occupational Therapy for children with physical disabilities up to age 21 years with a qualifying medically eligible condition. Served more than 500 children and provided 577 prescriptions for Durable Medical Equipment in 2018.</p>	(209) 943-6361
<p>Nurse Home Visiting Program Conducts home visits for high-risk families with infants; nurses conduct developmental assessments, provide parent education, and make care referrals. A MCAH program.</p>	(209) 468-3004
<p>Nutrition Education and Obesity Prevention Program (NEOP) Conducts education, outreach, as well as policy, systems, and environmental changes to promote increased access to and consumption of healthy foods and beverages, physical activity, and food security with the goal of preventing obesity and related chronic diseases.</p>	(209) 468-3842

List of Programs

<p>Public Information and Communication Develops and coordinates communication and outreach strategies from PHS to the community (e.g., programs' educational materials, social media activities) as well as maintains media relations. In 2018, more than 43,000 unique visitors viewed the PHS website 215,000 times. PHS' Facebook and Twitter posts were viewed 109,000 and 62,000 times, respectively.</p>	(209) 468-3571
<p>STDs/HIV/AIDS Programs Coordinates STD and HIV/AIDS related services. Provides counseling as well as education and prevention services that include street-based outreach and activities at schools and correctional facilities. Tested over 800 people for HIV /STDs and performed over 2,000 STD investigations. Provided case management for more than 370 people living with HIV/AIDS.</p>	(209) 468-3820
<p>STOPP Smoking Prevention Program Works in partnership with the Smoking & Tobacco Outreach and Prevention Coalition to promote a tobacco-free county.</p>	(209) 468-8211
<p>STOPP Helpline* (local number) Makes referrals to community programs to help stop smoking.</p>	(209) 468-2415
<p>Sudden Infant Death Syndrome Program (SIDS) Provides supportive services, referrals, and education for families experiencing the death of an infant due to SIDS. A MCAH program.</p>	(209) 468-3004
<p>Tuberculosis (TB) Control Program Provides support and treatment for clients with active TB, as well as seeking out others in contact with that person to assess if they, too, have been infected and need treatment, referral, and monitoring.</p>	(209) 468-3828
<p>WIC Program (Supplemental nutrition program for women, infants, and children) Helps families by providing nutrition education and breastfeeding support, issuing checks for healthy supplemental foods, and making referrals to healthcare and other community services. In 2018, WIC served a total of 15, 121 individuals.</p>	(209) 468-3280
<p>Quality Improvement (QI) Program Guides QI activities within PHS. Applies the principles of continuous QI to enhance the quality of PHS services to the community as well as internal day-to-day operations. QI efforts rely on teamwork to solve problems together.</p>	(209) 468-2183



Cover photos (clockwise from top right):

Communicable Disease Investigator taking blood during a homeless outreach event

Physical Therapist and patient during MTP's first telemedicine session

CHDP Outreach Worker at a health fair

Safe Kids San Joaquin County members educate the community on pedestrian safety at Children and Youth Day at Pixie Woods

PHS staff completing a team building exercise at a QI meeting

Nutrition Education and Obesity Prevention staff showcasing Safe Routes to School activities at SNAP-Ed statewide forum

PHS Microbiologist conducting a test

Report photos

Community Health Needs Assessment (L to R): CHNA Steering Committee meeting, Steering Committee member during a planning exercise

The Oral Health Initiative (T to B): Vision brainstorming activity during the PHS Oral Health Strategic Planning Retreat, Health Educator demonstrating fluoride varnish application

Homeless Outreach: PHS staff taking blood from screening participants

CD: PHS Microbiologist processing a TB specimen

Syphilis Outreach: Public Health Nurse performing a Rapid Syphilis Test

WIC: Family receives diaper kit

DPP: Motivational interviewing training for community health connectors, trust builders, and healthcare providers

MTP: Physical Therapist and patient during MTP's first telemedicine session

Special thanks to the PHS staff for all their work and achievements in 2018.

To access electronic copies of this report visit: <http://www.sjcphs.org/>