



# Yolo County Health & Human Services Community Health Branch

## Chronic Disease Prevention Work Group Minutes

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**Date:** Thursday, August 20, 2015      **Time:** 2:30 – 4:00 pm  
**Location:** Gonzalez Building, Community Rooms  
**Attendees:** Craig Blomberg, Haydee Dabritz, Amy Dyer, Genevieve Hansen, Lisa Larsen, Ashley Logins-Miller, John McKean, Rebecca Tryon, Emily Vaden

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### Welcome

- Emily welcomed the group.

### Brainstorm Further Strategies & Identify Gaps

- Please see Attachment A for the strategies and gaps that were identified.

### Next Steps

- *Genevieve to send scope of work for certification.*
- Emily will have a draft of the CHIP available for the next meeting. The next meeting will focus on data.

### Next Meeting

- Thursday, September 17<sup>th</sup> 2:30 – 4:00 pm Thomson Room #1600
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# Yolo County Health & Human Services Community Health Branch

## Attachment A

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### Chronic Disease Prevention Goals & Strategies

# Chronic Disease Prevention Goal 1: Strengthen the support network for chronic disease prevention and management.

PARTNER	PROGRAM	NOTES	GAPS	REP
Non-profits	American Heart, Cancer, etc			
HHSA	<ul style="list-style-type: none"> <li>• Healthy Living for Older Adults</li> <li>• NHV</li> <li>• WIC</li> <li>• NEOP training IHSS &amp; other HHSA staff</li> <li>• NEOP</li> <li>• Tobacco Prevention</li> </ul>		Maybe add NEOP training to orientation for IHSS providers?	
Schools	Teachers, nurses			
Healthcare providers	Case managers, MD's health educators			
Assisted living/board & care				
STEAC				
IOPCM partnership	Disease management			
Promoteres				
Utilizing gyms to provide info				
Health Fairs				
Faith Based organizations	<ul style="list-style-type: none"> <li>• Food</li> <li>• Rotating Winter Shelter's</li> <li>• 4<sup>th</sup> &amp; Hope</li> </ul>			
Senior Centers	<ul style="list-style-type: none"> <li>•</li> </ul>			
Food resources	<ul style="list-style-type: none"> <li>• Food bank</li> <li>• School lunch program</li> </ul>		Training for all case managers	
Referral network	<ul style="list-style-type: none"> <li>• Yolo Healthy Aging</li> <li>• Senior Link</li> <li>•</li> </ul>			
Diagnosis based pathway	<ul style="list-style-type: none"> <li>• American heart</li> <li>• Cancer</li> </ul>			

# Chronic Disease Prevention Goal 1: Strengthen the support network for chronic disease prevention and management.

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PARTNER	PROGRAM	NOTES	GAPS	REP
Pharmacies	<ul style="list-style-type: none"><li>• Vaccinations</li><li>• Urgent Care models</li></ul>			
Dentists	<ul style="list-style-type: none"><li>• Blood pressure checks</li></ul>			
ETMs & First Responders	<ul style="list-style-type: none"><li>•</li></ul>			
Mental Health Ride along Program	<ul style="list-style-type: none"><li>•</li></ul>	Riding with first responders		
Classes	<ul style="list-style-type: none"><li>•</li></ul>	Exercise		

## Other Gaps:

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## Potential Strategies:

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# Chronic Disease Prevention Goal 2: Increase consumption of fruits and vegetables.

PARTNER	PROGRAM	NOTES	GAPS	REP
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## Other Gaps:

- Farmworker access.
- Funding
- Repeated exposure

## Potential Strategies:

- HOM expansion
- Increase availability of fruits & vegetables in corner stores.
- System linkage Medi-Cal to CalFresh & free reduced lunch program
- Identifying specific strategies for specific populations
  - Homeless/undocumented/low income
    - Community meals/loaves & fishes
  - Working f&v events with dependent children: parental modeling
  - Seniors: antioxidants/more energy

- Language barrier
  - Migrant farm worker complexes

- Friday's table
- Yolo food pantry

## Strategies/behavior modification

- Education – master food preservers/demonstration, public booth @ food distribution sites, segment to each target populations
  - Migrant farm worker complexes
  - Recruit “demonstrators”
- Marketing
- Accessibility/Cost disincentive
  - Raley's selling discount produce
- Taste testing
- Palate development
- Garden based ed

## Chronic Disease Prevention Goal 3: Decrease consumption of fast food and sugar sweetened beverages.

PARTNER	PROGRAM	NOTES	GAPS	REP
Food Bank		Cooking classes		
Woodland United Methodist Church	Free Meal			
Community Gardens				
Gleaners				
Meals on Wheels			Expand (nutrition and reach)	
Congregate meals				
Schools		Providing healthier food & drink options. Removing soda machines – replacing with water.		
Employers		Places of employment providing incentive programs to employees	Expand	
Esparto High School	Garden/cooking classes		Developing wellness policies Making healthy meal prep mandatory curriculum in school districts.	
HHSA	Wellness Center NEOP/HY	Cooking classes Spa water		
Grocery stores	Providing imperfect fruits and vegetables at discount prices.	Market Match (Raley's & Nugget)		
Farmer's Markets	Market match		Cooking classes	
SNAP Education		Including migrant populations		
Promotores				
Davis Beverages	Default drink for kids meal is water or milk.			

### Other Gaps:

- Education of why it is important to make healthy food choices – media.

- Improve water
- Making good/health food affordable.

## Chronic Disease Prevention Goal 4: Increase the percentage of the population adhering to recommended physical activity standards.

PARTNER	PROGRAM	NOTES	GAPS	REP
Woodland Bike Campaign				
RISE bike program				
Davis	Bicycle Safety Helmets			
Health care providers		Messaging		
Municipal parks & rec depts.		Messaging & programs <ul style="list-style-type: none"> <li>• Par courses</li> <li>• Labyrinth courses</li> </ul>		
City General Plan		Encouraging pedestrian & biking, safe paths/planning		
Clubs & Organizations		Messaging and programs		
Yolo County	Employee Incentives			
UCD	Employee Incentives			
Prison Bike Donation Program				
Schools		Messaging & programs		
Religious organizations		Messaging & programs		
Media/Outreach		Messaging		
Law Enforcement		Safe environment/planning		
City of Woodland	<ul style="list-style-type: none"> <li>• Commit2Fit</li> </ul>			
Safe Routes to School	<ul style="list-style-type: none"> <li>• Helmets</li> </ul>			
Themed months		May – Bike Month		

### Other Gaps:

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### Potential Strategies:

- Identify evidence based models
- Employee wellness/work environment (waking mtgs, etc)
- Bikeshare
- Stretches etc at crosswalk

# Chronic Disease Prevention Goal 5: Increase use of preventive health care and effective chronic disease management.

PARTNER	PROGRAM	NOTES	GAPS	REP
Sutter	<ul style="list-style-type: none"> <li>“Stoplight”</li> </ul>			
4 <sup>th</sup> & Hope Migrant centers	Health Screenings/ Health fairs (pre-screening = referrals)	4 <sup>th</sup> and Hope		
Community Clinics		Ex: Health ed programs		
HHSA	Healthy Living Program NEOP	Adults 60+ with dual dx Nutrition education classes, resources (other community groups also)		Yes
Promotoras Programs		Chronic Disease focus		
Woodland Health Care		“master trainers” for Stanford SDSMP course.		

## Other Gaps:

- MD rx for healthy food/pa
- Community awareness of programs & how to access
- A resource “pathway” based on chronic disease
- Coordinated/integrated outreach and referral process
- Gaps in funding for innovative models/pilot projects
- Clearinghouse of validated/evidence based approaches or resources for CDM classes/programs.

## Potential Strategies:

- Outreach to farmworkers screening @ work site.
- Medical Groups/HMO classes & programs
- Adjunct health professional doing some basic screening (ex: dentist takes BP – standard, pharmacies) – can they do more?



## **Chronic Disease Prevention Goal 5:** Increase use of preventive health care and effective chronic disease management.

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- ACA – free preventive care health visits