“He who has health, has hope; and he who has hope, has everything.”
– Arabian Proverb
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A New Start for Moms
Conejo Pregnancy Center
El Concilio Family Services
Haydock Intermediate School
Maternal, Child, and Adolescent Health Action Committee
Perinatal Advisory Council
Service Excellence Council – County of Ventura
SPW, VCMC Clinic system
United Parents
Ventura County -Referral Center/ACE
Ventura County Behavioral Health
Ventura County Behavioral Health Youth and Family Division
Ventura County Probation Agency
Ventura Neighborhood for Learning
Ventura Unified School District
Executive Summary

The County of Ventura Service Excellence Council had the foresight in 2009 to begin development of a set of County-wide priorities that helped lay the foundation for the 2011-2016 County of Ventura Strategic Plan. The Strategic Plan includes five focus areas, one of which is Community Well-Being. This focus area includes six strategic goals that center on providing quality healthcare and social services supporting healthy communities. These strategic goals are the basis for this Community Health Improvement Plan (CHIP). The CHIP will serve as the strategic plan for entities delivering health services within the county.

The County of Ventura actively follows Healthy People 2020 (HP 2020) because it creates a strategic framework that unites health promotion and disease prevention issues under a single umbrella. It provides us with the opportunity to engage a wide variety of stakeholders in order to achieve the objectives set forth and guides national research, program planning, and policy adoption to promote health and prevent disease.

With the framework for the CHIP in place, the Ventura County Public Health Department began to engage stakeholders, representing local government, schools, private sector, and non-governmental organizations, during their already established coalition meetings. Stakeholders were presented with data for Ventura County regarding the HP 2020 Leading Health Indicators (LHI) and asked to consider these indicators when developing objectives for their organization to meet the strategic goals outlined in the CHIP.

The LHI provide data-driven outcomes to monitor Ventura County’s progress nationally and help motivate and guide this plan for action. The LHI considered in the development of this plan each fall within one of the priority areas in the boxes below.

Within each of these health priority areas, disparities exist among some populations in Ventura County. We hope that the objectives and measures proposed to meet the strategic goals below begin to eliminate the health disparities and enable all Ventura County residents to live healthy and productive lives.

**Strategic Goal 1:** Set the standard in healthcare excellence by providing quality healthcare in an integrated, fiscally sustainable, and culturally sensitive manner.

**Strategic Goal 2:** Promote an increasingly healthy and well-informed community.
Strategic Goal 3: Provide the community access to an increasing range of public and private healthcare services in their home community.

Strategic Goal 4: Ensure that individuals and families are provided timely and efficient assistance to meet/sustain basic needs, and transition quickly into pathways of productivity and self-sufficiency. Older adults in Ventura County will have access to the resources and services that will enable them to maintain their health, safety, dignity and quality of life.

Strategic Goal 5: Ensure that all children at risk receive the best treatment services to achieve the greatest success.

Strategic Goal 6: Promote and provide for the preservation of healthy and safe communities so that all children may grow and thrive.
Healthy People 2020 Leading Health Indicators

Healthy People 2020 (HP 2020) encompasses in excess of 1,200 measures tied to over 600 objectives in more than 40 topic areas. With greater than 1,200 targets to meet, it is difficult to determine where the focus should be for a local health jurisdiction. Fortunately, in October 2011, HP 2020 released a set of leading health indicators (LHI) which is a condensed list of objectives that should be utilized to communicate high priority health issues. The County used these indicators as a guide to assess whether or not the targets are currently being met and took them into account when developing this plan of action to meet the needs within our community.

The LHI will be tracked, measured, and reported on regularly at the national level, and the County is committed to evaluate our progress towards meeting and/or exceeding these targets throughout the decade. In looking at the strategic planning process, we realize that data is only the beginning of the picture. The fundamental goal of HP 2020 is that we have a society in which all people live long, healthy lives. In order to achieve this goal, the County must think about how the social environment, physical environment, biology and genetics, access to health services, and individual behavior all play a role in population based health outcomes. Through the objectives outlined in this plan, each of our stakeholders are striving to eliminate population health disparities categorized by race/ethnicity, socioeconomic status, gender, age, disability status, sexual orientation, and geographic location.
In this section, you will find a brief synopsis of the HP 2020 targets in each of the priority areas for which data is available for Ventura County. Some of the LHI include targets for which the specific data is not readily available at the County level. For instance, one of the LHI targets reducing the percent of adults with diabetes whose A1c value is greater than 9%. As part of the California Health Interview Survey, Ventura County adults are asked about their diabetes status and type, but nothing regarding the A1c value. The LHI are a guide for strategic program planning. Therefore, even though we do not have the exact data available for a particular LHI, we will utilize all similar and relevant data sources to guide our program planning and evaluate the health status of residents.

**Priority Area: Access to Health Services**

Access to health services, especially clinical preventive health services, moves the focus from expensive tertiary care to more cost effective preventive care which can extend the length and quality of life for residents. Currently, we are not meeting the HP 2020 targets for health insurance coverage status, proportion of persons within a usual primary care provider, or proportion of adults receiving colorectal screening based on most recent guidelines. Between 2004 and 2008, the percent of patients discharged from Ventura County hospitals that had no insurance increased from 4.1% to 5.5%. This number is only expected to increase given the 6.1% rate increase in unemployment between 2007 and 2010 in Ventura County. In terms of access to health services, there are disparities in unemployment by geographic area which correlates with health insurance coverage and disparities by age for health insurance coverage and having a usual primary care provider.

### Access to Health Services

<table>
<thead>
<tr>
<th>Medical Insurance (Health Insurance Coverage Status)</th>
<th>Increase the proportion of persons with a usual primary care provider (usual place to go when sick)</th>
<th>Increase the proportion of adults receiving colorectal screening based on most recent guidelines</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ventura County - 83.7%</td>
<td>HP 2020 Target - 100.0%</td>
<td>Ventura County - 68.5%</td>
</tr>
</tbody>
</table>
Priority Area: Injury and Violence Prevention

Injury and violence prevention remain an important priority for Ventura County even though we are meeting the HP 2020 targets for fatal injuries and homicides. Motor vehicle crashes, drug overdoses, suicide, and homicide were all among the top ten causes of premature death (death before the age of 75, <1 not included) from 2006-08. Children, exposed to violence and maltreatment, are more likely to engage in high risk behaviors such as smoking, alcohol and drug use, and risky sexual behavior which can lead to adverse health outcomes. Those children are also more likely to attempt suicide; in Ventura County, teens aged 15-19 years old have the highest rate of non-fatal emergency department visits for self-inflicted injury, followed by 20-24 year olds. There is a disparity between age groups for rate of hospitalizations for non-fatal self-inflicted injury; a focus on intervention and prevention for these age groups may result in a reduction of the suicide rate to meet the HP 2020 target.

Priority Area: Maternal, Child, and Infant Health

While Ventura County is meeting the targets for percent of pre-term births and infant deaths per 1,000 live births, there is work to be done to incorporate the Life Course Perspective into maternal and child health program planning. The Life Course Perspective suggests that a complex interplay of biological, behavioral, psychological and social protective and risk factors contributes to the health outcomes across the span of a person’s life. Particularly relevant to maternal and child health is the concept of early programming both prenatally (i.e. exposure in utero) and prior to conception. A mother’s health status prior to and during pregnancy can have a direct impact on the health of the baby and her future developing child. The concept of early programming may help explain some disparities that exist between ethnicities in terms of percentage of babies born at a low birth weight (Black and Pacific Islander mothers are more likely to deliver a low birth weight baby). This perspective also suggests that there are critical periods (i.e. during fetal development, childhood) where a person may be more sensitive to an adverse event. Adopting this perspective will move the focus to preconception and inter-conception care for prospective mothers because early entry into prenatal care may be too late to reverse some early fetal programming.
Priority Area: Nutrition and Weight Status

In Ventura County, the top 7 leading causes of death are chronic diseases; coronary heart disease is the leading cause of death and also leading cause of premature death within the county. Chronic diseases are often preventable or their onset may be delayed by maintaining a healthy weight and diet. In the Child Health and Disability Prevention Program, 21.4% of children from Ventura County are considered to be obese which is well above the HP 2020 target of 14.6%. There is a disparity between school districts in terms of the percentage of overweight and obese students; those school districts with higher concentrations of Hispanic and low income students have a higher prevalence of overweight and obese students. While we are meeting the target for adults in terms of proportion of them considered to be obese according to the California Health Interview Survey, a recent random chart audit of five Ambulatory Care clinics found that 73% of adults were either overweight or obese with a BMI over 25.
Priority Area: Social Determinants
Ventura County falls well below the HP 2020 target of a 97.9% high school completion rate. An education provides opportunities; adults with a bachelor’s degree are 3 times more likely to be employed than adults with less than a high school education. With unemployment usually comes lower socioeconomic status and in turn, increased risk for many diseases, including cardiovascular disease, arthritis, diabetes, chronic respiratory diseases, and cervical cancer.

<table>
<thead>
<tr>
<th>Social Determinants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase the proportion of the population that completes high school education</td>
</tr>
<tr>
<td>Ventura County - 82.3%</td>
</tr>
</tbody>
</table>

Priority Area: Substance and Tobacco Use
Although Ventura County is meeting the HP 2020 goals for proportion of adults engaging in binge drinking and proportion of adolescents who smoked in the past 30 days (among 11th graders), we are still below the target for percent of adults who are current smokers. Deaths from drug overdoses (3rd), lung cancer (5th) and chronic liver diseases (6th) all made the top ten causes of premature death in Ventura County from 2006-08. This underscores the need for prevention and education and a further look into how factors such as gender, age, ethnicity, income level, and educational attainment all play a role in substance and tobacco use.

<table>
<thead>
<tr>
<th>Substance and Tobacco Use</th>
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</thead>
<tbody>
<tr>
<td>Reduce the proportion persons engaging in binge drinking in past month (Adults 18+ yrs)</td>
</tr>
<tr>
<td>Ventura County - 14.9%</td>
</tr>
<tr>
<td>Reduce the proportion of adolescent who smoked in the past 30 days</td>
</tr>
<tr>
<td>Ventura County - 11th (F) - 12.9%, 11th (M) - 15.0%</td>
</tr>
<tr>
<td>Reduce the percent of adults who are current smokers</td>
</tr>
<tr>
<td>Ventura County - Adults - 12.1%</td>
</tr>
</tbody>
</table>
Strategic Goal 1

Set the standard in healthcare excellence by providing quality healthcare in an integrated, fiscally sustainable, and culturally sensitive manner.

Key Message: The County of Ventura healthcare system continuously seeks excellence by setting benchmarks beyond required mandates. We design programs and services that meet the needs of our communities. We take care to keep our system financially stable so that the services we design are sustainable over time.

- **Objective 1.1**: Ventura County Behavioral Health (VCBH) will implement evidence based and promising practices to address frequently treated diagnoses. – VCBH asked that this objective be removed from the plan beginning in FY 13/14.

- **Measure 1.1**: Report on the number of clients in individual and group settings who receive intervention.

- **Objective 1.2**: A New Starts for Moms assures a competent staff by tracking staff certifications and trainings in alcohol and drug treatment.

- **Measure 1.2**: Report on the number of certifications held by staff and the number of trainings in which they participated.

- **Objective 1.3**: All Ventura County Public Health programs will be compliant with Centers for Medicare & Medicare Services (CMS) reporting Electronic Health Record (EHR) standards.

- **Measure 1.3**: Report on the status of electronic reporting of confidential morbidity reports and laboratory reports.

- **Objective 1.4**: The Perinatal Advisory Council will provide evidence-based information and education to hospitals and healthcare professionals.

- **Measure 1.4**: Report on the number of educational seminars provided to healthcare professionals.

- **Objective 1.5**: Ventura Unified School District school nurses will provide case management and specialized health care services (SPHC) for all children eligible for services.

- **Measure 1.5**: Report on the number of children eligible for services and the percent receiving case management and SPHC by school nurses.

- **Objective 1.6**: Ventura County SELPA will ensure that students have health services included on their Individualized Education Plan (IEP).
Measure 1.6: Report on the % of children that have health services included on their IEP. - Revised for FY 13/14 to: Report on the # of children that have specialized physical health care plans.
Strategic Goal 2

Promote an increasingly healthy and well-informed community.

Key Message: Education gives everyone the opportunity to care for their health. Our community can help each other by sharing information, gaining understanding, and knowing how to get help.

- **Objective 2.1:** Haydock Intermediate School will provide four (4) presentations for students/parents per year that address health issues in the community.

- **Measure 2.1:** Report on the number of presentations provided that address health issues.

- **Objective 2.2:** A New Start for Moms will serve as a representative on two community committees to keep abreast of the needs and attitude of the community and the resources available.

- **Measure 2.2:** Report on the number of meetings attended by New Start for Moms staff by committee.

- **Objective 2.3:** Ventura County Behavioral Health (VCBH) will participate in two community events, through collaboration with schools, community based and faith based organizations, per month to educate the public about its services. – VCBH asked that this objective be removed from the plan beginning in FY 13/14.

- **Measure 2.3:** Report on the number of community events in which VCBH participated.

- **Objective 2.4:** Santa Paula West (a VCMC Clinic) will offer health education materials in English and/or Spanish for 100% of sick and follow-up visits.

- **Measure 2.4:** Report the number of client contacts and the percentage that received education materials.

- **Objective 2.5:** Conejo Pregnancy Center will educate patients at every appointment, provide two community presentations per month in schools and churches, and distribute information at community fairs as requested.

- **Measure 2.5:** Report on the number of patient education interventions, number of community presentations provided, and the number of community fairs attended.

- **Objective 2.6:** Ventura Neighborhood for Learning will provide Public Health Providers space and time to provide health promotion workshops or classes for families attending the VNfL Family Centers.

- **Measure 2.6:** Report the number of health promotion seminars offered at sites throughout the year.
■ **Objective 2.7:** Ventura Unified School District Health Services will provide a minimum of 15 classroom educational opportunities on a variety of health related topics; provide outreach to families through collaborative meetings and programs and participate in county and community collaborative groups to share and access information at each school in the district.

■ **Measure 2.7:** Report on the number of classroom educational opportunities provided and attendance at collaborative meetings.

■ **Objective 2.8:** Rainbow Connection Family Resource Center will provide presentations for families with children with special needs and the community.

■ **Measure 2.8:** Report on the number of presentations provided for families with children with special needs and the community.

■ **Objective 2.9:** All Ventura County Public Health programs will incorporate physical activity, healthy eating in their messaging to the public by December 2013.

■ **Measure 2.9:** Report on the number of programs that have implemented this messaging in their interaction with the public.
**Strategic Goal 3**

Provide the community access to an increasing range of public and private healthcare services in their home community.

**Key Message:** People should be able to receive the care that they need without having to travel away from their home community.

- **Objective 3.1:** Ventura County Behavioral Health Youth and Family Division will establish a new clinic in Fillmore and work to grow community partnerships in both Fillmore and Santa Paula. – VCBH asked that this objective be removed from the plan beginning in FY 13/14.

- **Measure 3.1:** Report on the progress of the new clinic establishment and the number of partnerships established in Santa Paula and Fillmore.

- **Objective 3.2:** ACE – Access Coverage Enrollment Program will continue to assign enrollees to primary clinic nearest to their residence.

- **Measure 3.2:** Report on number of enrollees by zip code and report on number of enrollees by Primary Clinic. Compare the geographic distribution.

- **Objective 3.3:** El Concilio’s Client Assistance Program (CAP) will provide comprehensive bilingual, one-on-one referral service assistance to clients to access health and human services available in their community, primarily for Latino immigrants.

- **Measure 3.3:** Report on the number of clients referred for services in their community.

- **Objective 3.4:** A New Start for Moms will provide transportation for clients to their site as well as child watch services.

- **Measure 3.4:** Report on the number of clients provided with transportation to site and child watch services.

- **Objective 3.5:** All Ventura County Public Health programs will assess clients for health coverage and refer as needed.

- **Measure 3.5:** Report on the number of programs that have implemented a health insurance referral process.

- **Objective 3.6:** Ventura Neighborhood for Learning (VNfL) will provide space and time for providers of developmental screenings, oral health services and CHDP services to provide their services to VNfL families on site.

- **Measure 3.6:** Report the number of children provided with developmental screenings, oral health services and CHDP services at the VNfL.
- **Objective 3.7:** Haydock Intermediate School will employ a full time Outreach Counselor that helps families access services in the community.

- **Measure 3.7:** Report on the number of families served by the Outreach Counselor.

- **Objective 3.8:** Ventura Unified School District school nurses will make home visits to follow up with families that are dealing with healthcare issues and provide appropriate referrals to community healthcare resources.

- **Measure 3.8:** Report on the number of home visits conducted by school nurses.

- **Objective 3.9:** Ventura County SELPA will provide transportation for families to access special education and Early Start services.

- **Measure 3.9:** Report on the number of families served that have transportation issues that were helped.

- **Objective 3.10:** United Parents will help families with transportation issues access services by researching services available within their neighborhood and/or referring them to faith-based organizations or other families that may be able to provide transportation. - **Revised for FY 13/14 to:** United Parents will provide services that strengthen and support families throughout Ventura County to facilitate access

- **Measure 3.10:** Report on the number of families served that have transportation issues that were helped. - **Revised for FY 13/14 to:** Report the number of families served in each of the different locations around the county including support group meetings, presentations, and individual programs.
Strategic Goal 4

Ensure that individuals and families are provided timely and efficient assistance to meet/sustain basic needs, and transition quickly into pathways of productivity and self-sufficiency. Older adults in Ventura County will have access to the resources and services that will enable them to maintain their health, safety, dignity and quality of life.

Key Message: People who receive our services can count on a responsive system to timely meet their needs.

- **Objective 4.1:** VCBH Youth and Family Division will evaluate “time to service” for clients to determine whether or not the division meets Agency standards and address needed improvement. – VCBH asked that this objective be removed from the plan beginning in FY 13/14.

- **Measure 4.1:** Report on the average “time to service” for clients and whether or not it meets Agency standards.

- **Objective 4.2:** ACE Referral Center will develop and implement E-Referral software applications for specialty care referral and appointment scheduling aligned with referral guidelines.

- **Measure 4.2:** Report on the progress of development and implementation of E-referral software applications.

- **Objective 4.3:** A New Start for Moms will respond to each client phone call within 24 hours and will contact clients who attend orientation within 24 hours for intake and admittance to the program.

- **Measure 4.3:** Report on the average response time to return client phone calls and percent of clients who are contacted within 24 hours of attending orientation for intake and admittance.

- **Objective 4.4:** Conejo Pregnancy Center will schedule appointments within one week and see walk-in clients that same day.

- **Measure 4.4:** Report on the time between request and scheduled appointment for clients who call, and the average wait time for walk-in clients.

- **Objective 4.5:** Santa Paula West (VCMC Clinic) will schedule an appointment within 2 weeks for sick patients and those in need of follow-up and within 2 months for those requiring a physical.

- **Measure 4.5:** Report on the average time between request and scheduled appointment for sick, follow-up, and physical visits.
■ **Objective 4.6:** All Ventura County Public Health programs will promote maternal health.

■ **Measure 4.6:** Report on the number of providers utilizing the 4P’s Plus Screening tool for identifying substance use during pregnancy.
Strategic Goal 5

Ensure that all children at risk receive the best treatment services to achieve the greatest success.

Key Message: Our services touch a child’s life with support and compassion. We take child abuse/neglect personally, and diligently work to safeguard children. We are committed to investing in children.

- **Objective 5.1:** VCBH Youth and Family Division will assign a single clinician to follow youth referred through the Children and Family Services (CFS) throughout any move that a child experiences in the system. – VCBH asked that this objective be removed from the plan beginning in FY 13/14.

- **Measure 5.1:** Report on the number of children referred through CFS that have been assigned a clinician to follow them.

- **Objective 5.2:** A New Start for Moms will refer to Public Health Nursing when a child exhibits any signs of slow development and/or failure to thrive.

- **Measure 5.2:** Report on the number of children referred to Public Health Nursing for signs of slow development and/or failure to thrive.

- **Objective 5.3:** Ventura Unified School District support staff (counselors, psychologists, nurses) will follow the Response to Intervention (RtI) model to provide universal, selective and indicated support services to students at risk in order to help them achieve success.

- **Measure 5.3:** Report on the percentage of counselors, psychologists, nurses that have received training in two or more strategies under the Response to Intervention (RtI) model to provide support services to students.

- **Objective 5.4:** Rainbow Connection Family Resource Center will provide parent to parent support, information, and training to help parents develop skills and strategies for parenting a child with special needs and dealing with the associated stress.

- **Measure 5.4:** Report on the number of parents supported and/or trained of children with special needs.

- **Objective 5.5:** The Ventura County Office of Education (VCOE) will provide courses in Health Education, risk assessment, drug/alcohol prevention/education, support groups, support for parenting teens, and information regarding access to community health programs to expelled and incarcerated youth.

- **Measure 5.5:** Report on the number of expelled and incarcerated youth that were supported by program by VCOE.
- **Objective 5.6:** United Parents reaches out to parents prior to their children’s removal by offering affordable educational opportunities to prevent their children from being removed from the home. - **Revised for FY 13/14 to:** United Parents will provide support, resources and referrals to strengthen and support families to prevent their children from being removed from the home, from out of psychiatric hospitals, juvenile hall, or out of home placement.

- **Measure 5.6:** Report on the number of families served that were in jeopardy of having their children removed from the home.

- **Objective 5.7:** All Public Health programs will encourage dental and medical providers to promote regular oral exams per American Pediatric Academy standards.

- **Measure 5.7:** Report on the percentage of children utilizing their dental coverage.
Strategic Goal 6

Promote and provide for the preservation of healthy and safe communities so that all children may grow and thrive.

Key Message: We need the community to work together so that all adults know how, and where, to get help when a child needs it.

- **Objective 6.1:** Haydock Intermediate School will join the Oxnard Alliance for Community Strength as a fully participatory partner in the implementation of the Action Plan of 2011-14 with a focus on the School’s Goal: “All youth have coordinated support for at-risk youth”. This plan was developed by the Prevention Institute in close partnership with the Oxnard Alliance with funding from The California Endowment and the City of Oxnard.

- **Measure 6.1:** Report on the number of HART meetings and the number of students/families helped by this group.

- **Objective 6.2:** A New Start for Moms will provide parenting and perinatal education groups for all women who are pregnant and have young children.

- **Measure 6.2:** Report on the number of parenting and perinatal education groups established and the number of women served by these groups.

- **Objective 6.3:** Ventura Neighborhood for Learning (VNfL) will provide parent and child together classes for all families which promote healthy attachments, early learning experiences and family support for children ages birth to five.

- **Measure 6.3:** Report on the number of participants in parent and child together classes provided by the VNfL.

- **Objective 6.4:** The Perinatal Advisory Council will consult with hospitals on programs to improve health based on community perinatal needs.

- **Measure 6.4:** Report on the number of programs implemented in the hospitals with assistance from the Perinatal Advisory Council.

- **Objective 6.5:** Ventura Unified School District will ensure that each school has a safe school plan and distribute a community resource guide in both English and Spanish to students and families.

- **Measure 6.5:** Report on the percentage of schools that have a safe school plan and report on number of community resource guides distributed.

- **Objective 6.6:** Ventura County SELPA will facilitate conferences for professionals and families of children with special needs.
- **Measure 6.6:** Report on the number of conferences facilitated for professionals and families of children with special needs.

- **Objective 6.7:** Ventura County Public Health will influence partners to implement healthy living strategies and initiatives. – This objective was removed from the VCPH strategic plan and will not be reported on for FY 13/14.

- **Measure 6.7:** Report on the number of cities with increased access to farmers markets and the number of schools with increased salad bar offerings and vegetable gardens.
Evaluation Plan

The Ventura County Public Health Department will be responsible for evaluation of progress towards completion of the objectives within each strategic goal. Agencies that contributed to the development of the plan will be asked to report on their measures annually to determine whether or not the objectives are being met. This plan is a working document and will be re-evaluated for completeness after the development of the Community Transformation Grant (CTG) Community Needs Assessment and Implementation Plan. The CTG Implementation Plan should be developed by the end of FY 13/14 and may replace this plan.

Resources


California Department of Public Health, Vital Statistics Birth Statistical Master Files, 2009

California Department of Public Health, Vital Statistics Death Statistical Master Files, 2009

California Health Interview Survey, 2009

California Healthy Kids Survey (WestEd), 2006-08

California Office of Statewide Health Planning and Development, Inpatient Discharge and Emergency Department Data, 2009

California Department of Finance Population Estimates, 2009


Family Health Outcomes Project, Birth Statistical Master Files, 2008


Pediatric Nutrition Surveillance System (PedNSS), 2009

U.S. Census Bureau, American Community Survey, 2005-09