Long Beach Department of Health and Human Services  
Strategic Plan 2014-2019

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Background

Established in 1906, the Long Beach Department of Health and Human Services (Health Department/LBDHHS) is one of three city-operated health jurisdictions in the State of California. The Health Department is able to fulfill its public health mission by providing locally designed and controlled programs to meet the specific needs of the Long Beach community. Moreover, through advocacy, and organized community efforts, the Health Department collaborates with community partners to facilitate health promotion and injury prevention.

This Strategic Plan provides a roadmap for the Health Department to align its programs and services to address key health issues for Long Beach and galvanize resources to strengthen its organizational infrastructure from 2014 to 2019. The Strategic Plan was developed using data from the Community Health Assessment (CHA), feedback from staff and community stakeholders, and the Community Health Improvement Plan (CHIP). The Strategic Plan is guided by the Department’s Statement of Possibility. The Statement of Possibility describes the LBDHHS’ highest aspirations and what success looks like for the Department.

Statement of Possibility

The people of Long Beach are healthy, active, feel safe, and experience wellness. The Health and Human Services Department is an innovative, creative organization seeking excellence in all we do. Our employees are engaged, knowledgeable and appreciated. We are viewed by current and future partners at all levels, as THE leader and change agent for achieving the vision of a Healthy Long Beach with a renewed sense of well-being. We have a culture of effective communication and collaboration, sharing knowledge and resources with the whole community.

Using the Statement of Possibility as a foundation for selecting priorities for the Department, the LBDHHS has identified four goals for 2014-2019:

1. Establish the LBDHHS as THE leader and change agent for achieving the vision of healthy Long Beach.
2. Ensure that the people of Long Beach are healthy, active, feel safe, and experience wellness.
3. Promote and integrate mental health with physical and community wellness.
4. Improve the health, function, and quality of life of older adults, especially the frail and home-bound elderly.

**Organizational Structure**

The Health Department is composed of five bureaus (Community Health, Housing Authority, Environmental Health, Physician Services, and Preventive Health) and is led by a Director who is responsible for the overall administration of the Department. The City Health Officer has direct supervisory oversight for physician services and statutory authority for ensuring compliance with the public provisions of the California Health and Safety Code. Additionally, the mayor-appointed Board of Health and Human Services acts as the advisory board for the Health Department and is comprised of local leaders and community members with public health expertise.

The **Bureau of Community Health (CH)** reflects the City’s commitment to addressing population-based health disparities through economic, environmental, and social strategies that improve community wellness. The Bureau consists of three divisions: Homeless Services, Nutrition Services, and Health Promotion.

The **Housing Authority (HA) Bureau** administers rental housing assistance programs that benefit over 6,600 families in Long Beach. Its largest program, the Housing Choice Voucher (HCV) Program, is designed to provide affordable housing to low-income families, the elderly and disabled residents of Long Beach so they can live in decent, safe, sanitary, and affordable housing. The Bureau also administers a variety of other rental assistance programs that meet the City’s special needs populations. These include: Housing Opportunities for Persons with AIDS; Shelter Plus Care for chronically homeless and disabled; Veterans Affairs Supportive Housing for homeless veterans; housing for the Non Elderly Disabled; and a project based voucher program designed to assist youth aging out of the foster care system. In addition, the Housing Authority also administers the Family Self Sufficiency Program (FSS), which helps participants to become more economically self-sufficient.

The **Bureau of Environmental (EH) Health** is responsible for protecting the public’s health by preventing disease, unsanitary conditions, exposure to toxic substances and by the elimination of environmental hazards in the community. This is accomplished through routine and complaint driven inspections, enforcement of municipal, state and federal laws, and community outreach, prevention and education. The **Bureau of Physician Services (PS)** provides core public health functions and includes the Clinical Services Division and the Laboratory Services Division.
Additionally, the functions of the City Health Officer in supervising the medical services in these areas are critical in addressing key functions of the local health jurisdiction in preventing chronic and communicable disease and disability in Long Beach.

The Bureau of Policy, Planning and Prevention (PPP) consists of the Nursing Services Division, Public Health Emergency Management Programs, Epidemiology and Communicable Disease Control, as well as promoting Department-wide strategic planning and quality improvement. Management of key health indicators is also a function of the Bureau which is critical in population health assessment and necessary for future programming and planning efforts to improve the overall health of the Long Beach community.

The Executive Office (EO) include the functions of the Director’s Office, City Health Officer, as well as the administrative functions in the Health Department. These functions support the effective operation of the Department’s services and address the legal requirements and mandates of the operation of a local health jurisdiction. The Executive Office oversees grants management, general accounting, purchasing, budget preparation, technology projects, facility maintenance functions, payroll, and the Department’s safety program.
Vision, Mission, Guiding Values

Vision: *A safe and healthy community for all*

The vision of the Health Department to create a *safe and healthy community for all* underscores its commitment to health equity, prevention of diseases and illnesses, safe and affordable housing, and promotion of health and quality of life (QOL). Furthermore, the Health Department’s vision embodies public health’s significant role in advancing the city of Long Beach’s Strategic Plan which strives for an economically vibrant and livable city.

Mission: *“Improve the quality of life by promoting a safe and healthy community in which to live, work and play.”*

The Health Department’s mission statement reflects public health’s commitment to ensuring optimal health for all its community members and embraces the various Department programs that impact the social determinants of health. Quality of life (QOL) is a broadly defined multidimensional concept that includes health status, jobs, housing, built environment, physical and mental health, education, recreation, leisure time, social belonging, and other factors that lend to a person’s complete well-being.

Guiding Values

The Health Department’s guiding values form the foundation of the Department’s organizational thinking and actions as follows:

1. Quality Service and Excellence—We are committed to delivering exceptional services.
2. Innovation—We seek out opportunities to continue learning and be innovators in the field of public health.
3. Diversity—We embrace diversity and recognize it as a key to our success.
4. Unified Team—We are united in our pursuit of optimal health for our community.
Goals, Strategies and Objectives
The Health Department’s objectives for each goal for 2014-2019 are described below. Specific action steps and target completion dates are found on Appendix B.

Goal 1: Establish the LBDHHS as THE leader and change agent for achieving the vision of healthy Long Beach.

Strategies
1. Meet public health accreditation standards.
2. Promote community understanding of the value of public health.
3. Foster workforce excellence.

Objective 1a: By March 31, 2014, submit application for public health accreditation.

Objective 1b: By December 31, 2019, 90% of LBDHHS employees will “strongly agree” that the Department has a strong communication culture.

Objective 1c: By December 31, 2019, 90% of LBDHHS employees will indicate they are “knowledgeable” in all public health core competencies as measured by a self-assessment tool.

Goal 2: Ensure that the people of Long Beach are healthy, active, feel safe, and experience wellness.

Strategies
1. Promote personal and community wellness through a coordinated system of prevention.
2. Facilitate increased access to healthy lifestyle and medical care.
3. Facilitate individual and community engagement in healthy lifestyle, healthy choices and medical care.
4. Promote safe and healthy housing for all.
5. Inform, educate and empower community partners and other stakeholders to create a healthy and safe environment through improved environmental quality.

Objective 2a: By December 31, 2019, reduce adult and childhood obesity by 5%.

Objective 2b: By December 31, 2019, 85% of adults in Long Beach will report easy access to fresh produce.
**Objective 2c:** By December 31, 2019, 55% of adults in Long Beach will report using walking paths, parks, sports fields, fitness zones, and playgrounds in their neighborhoods.

**Objective 2d:** By December 31, 2019, reduce the percentage of uninsured by 10%.

**Objective 2e:** By June 30, 2014, develop and implement a safe and healthy housing education, awareness, and communications plan targeting other City Departments and community partners.

**Objective 2f:** By December 31, 2019, reduce missed work and school days due to asthma symptoms in West Long Beach residents by 10%.

**Goal 3:** Promote and integrate mental health with physical and community wellness.

**Strategies**

1. Assess the capacity of the Department to provide mental health services and determine key services that the Department is best positioned to deliver in order to address unmet needs.
2. Integrate mental health assessment, education and referrals into existing LBDHHS services where appropriate.
3. Foster awareness of mental health and associated services in Long Beach.
4. Develop internal and external referral systems to appropriately connect people to mental health services.

**Objective 3a:** By September 30, 2014, complete a community and organizational capacity assessment to determine demand and service gaps for mental health services in Long Beach.

**Objective 3b:** By January 31, 2015, develop and implement a community educational campaign to reduce the stigma of mental health issues and increase community awareness of mental health resources in Long Beach.

**Objective 3c:** Mental health services are integrated with LBDHHS services.

**Goal 4:** Improve the health, function, and quality of life of older adults, especially the frail and home-bound elderly.

**Strategy:**

1. Build upon existing partnerships with the Department of Parks, Recreation and Marine (PRM) and community organizations to promote and expand programs for older adults.
Objective 4a: By August 31, 2014, develop and implement a fall prevention education program for seniors.

Objective 4b: By January 31, 2015, build a community support system for seniors.

Objective 4c: By December 31, 2019, 90% of program participants will increase their knowledge of how to control or avoid asthma triggers.

Objective 4d: By December 31, 2019, reduce number of older adults exposed to vector-borne diseases by 5%.

External Trends and Factors and the Health and Human Services Department’s Response

Healthcare Reform and Its Implications for Public Health
The implementation of the Affordable Care Act will have a significant impact on public health practice. The positive effects of having the majority of the local population covered by health insurance provides an opportunity for thousands of individuals to receive preventive based treatment and services, avoiding significant health impacts and improving overall community health. Local public health agencies will play a major role in providing outreach and education to the local population and to assist in maximizing the enrollment into Covered California health insurance programs. Covered California implementation will also include a review of the provision of public health services and will impact the mechanism by which the Department receives reimbursement for public health core services such as immunizations, testing and treatment for HIV/AIDS, STD and tuberculosis, family planning and wellness screenings including chronic disease prevention for diabetes, obesity, hypertension and mental health, respectively.

Obesity and Associated Chronic Diseases
Over half of all Long Beach youth are overweight or obese and type-two diabetes is on the rise. It is critical to the overall health of Long Beach residents that the Department promotes healthy lifestyles through physical activity and improved nutrition. Because access to healthcare alone cannot address health concerns; environmental, economic and social factors also have an impact on community health indicators and outcomes and must be addressed. The Health Department works in collaboration with the Long Beach Unified School District, City Departments and nonprofit agencies aligned to link nutrition education and physical activity efforts to promote healthy lifestyles. The Health Department provides important linkages between public health services and primary care providers citywide in an effort to promote healthy eating and physical
activity as a part of broader prevention based programs designed to promote overall health.

**Economic Sufficiency through Safe Housing**

Safe housing is an important component of a healthy community. The Homeless Services Division provides street outreach and case management for at risk and homeless residents to promote economic self-sufficiency. The Housing Authority is key in the provision of permanent housing through the Housing Choice Voucher Program, which provides housing to almost 7,000 families in Long Beach each year. Other field based health programs that promote safe housing and healthy lifestyles include The Center for Family and Youth Family Preservation program, Public Health Nursing, and Healthy Homes lead based paint abatement program.

**Environmental Health**

The Health Department also ensures important public health protection services for Long Beach residents. Environmental Health programs protect the public via food and restaurant inspection services, beach water quality testing, tobacco enforcement, vector control and hazardous material programs, including responding to emergency chemical and sewage spills. Environmental health works closely with Epidemiology to protect the public from illness borne from environmental sources, while preventing the spread of diseases such as West Nile virus, typhus and food-borne illnesses.

**Workforce Development and Capacity**

According to the, National Association of City and County Health Officials (NACCHO), local Health Departments (LHDs) across the country have suffered devastating workforce and capacity loss due to large budget cuts at the federal, state and local levels. Although the country as a whole shows signs of economic recovery, the same is not true for many local Health Departments. During 2011, 57 percent of all LHDs reduced or eliminated at least one program, a larger percentage than in any 12-month period since the recession began in 2008. Emergency preparedness was among the hardest hit, with 23 percent of LHDs reporting a reduction to this program. An equal percentage of LHDs cut clinical health services, such as comprehensive primary care, mental health services, immunization, and maternal, child, and adolescent programs. Between 2008-2012, the LBDHHS lost over 150 positions as a result of budget cuts.
Assessment of Strengths and Weaknesses

On January 28-29, 2013, staff and managers from the Health Department volunteered to participate in information gathering sessions, and provided information for the initial steps in the strategic planning process. Each session contained a review of the current Health Department mission statement, collected input on developing a vision statement and identifying department core values. Participants also contributed to a strengths, weaknesses, opportunities and threats (SWOT) analysis. The commonly identified strengths and weaknesses are listed below.

Strengths
- Diverse staff mirrors the community
- Good understanding of the community’s needs
- Strong and long history of collaboration with community partners and agencies
- Well-trained, dedicated and committed staff
- City-run independent Health Department
- Leadership and support for staff

Weaknesses
- Poor staff morale due to series of layoffs and staff assuming more workload without additional assistance or increase in compensation
- Categorical grant funding creates silos
- Bureaucratic challenges with hiring staff
- Ineffective communications with staff and the public
- Lack of visibility in the community

The Strategic Plan contains three strategic priorities that seek to address the strengths and weaknesses identified by staff, namely increasing community understanding of the value of public health, effective communication, and workforce development.

Linkages with the Community Health Improvement Plan (CHIP) and Quality Improvement (QI)

Community Health Improvement Plan and Strategic Plan (SP)

The Health Department held a strategic planning retreat on April 19, 2013 to define priorities for the Department. The Community Health Improvement Plan (CHIP) was used as one of the key documents to help inform the prioritization of health and organizational issues for the Department’s Strategic Plan. Seven objectives contained
in the Strategic Plan are aligned with the health priorities identified in the Community Health Improvement Plan. The illustration above summarizes the goals, objectives, and strategies that are similar in the Strategic Plan and CHIP.

The goals of the CHIP are aligned with national and state priorities established in Healthy People 2020 and Let’s Get Healthy California Task Force Final Report. The objectives are based on readily available data sources and possible performance indicators that are realistic for Long Beach. The data used in the CHIP and SP are derived from the Community Health Assessment (CHA) compiled by Health Department in 2012 from multiple data sources such as the 2010 Census, California Health Interview Survey, HealthyCity.org, and the Los Angeles County Health Survey. Every effort was made to compile the most recent Long Beach-specific data available at the time of the analysis.
Data from the CHA was used to provide justification for the criticality of addressing a top health issue identified by the Health Department staff and community members. More importantly, the health issues prioritized in the SP were ranked by staff at strategic planning retreat held on April 19, 2013. Additional guidance was also provided by the Board of Health on the selection of strategic priorities for the Department.

Quality Improvement (QI) Plan and Strategic Plan

Quality improvement (QI) in public health is the use of a deliberate and defined improvement process, such as Plan-Do-Check-Act (PDCA), which is focused on activities that are responsive to community needs and improving population health. It refers to a continuous and ongoing effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes, and other indicators of quality in services or processes, which achieve equity and improve the health of the community (Public Health Accreditation Board, 2011).

The QI plan for the Health Department is based on the ten essential public health services (EPHS) and serves as the foundation for creating and sustaining a culture of continuous learning and improvement in order for staff to be empowered to develop, implement, evaluate and refine programs to better serve the changing needs of the community. Using a PDCA cycle as a QI tool, the Health Department will use specific projects or activities performed under the EPHS improve service delivery and efficiency. Because the Health Department’s QI plan is rooted in the ten EPHS, all programs will have the opportunity to participate in a QI project and will touch upon the programs identified as leads in the implementation of the Strategic Plan.

Sustainability through Staff Engagement, Recognition, Communication, Continuous Improvement and Senior Management Accountability

A strategic plan results from a deliberate decision-making process and defines where an organization is going. The plan sets the direction for the organization and, through a common understanding of the mission, vision, goals and objectives, provide a template for all employees and stakeholders to make decisions that move the organization forward (Public Health Accreditation Board, 2011).
A strategic plan is only as effective as its wholehearted implementation. The Health Department’s approach to the implementation of the Strategic Plan is rooted in meaningful staff engagement, recognition and celebration of staff contributions to the fulfillment of goals and objectives, regular communication of progress, continuous improvement and senior level management level accountability.

**Meaningful Staff Engagement**
To foster and ensure meaningful staff engagement, the Strategic Plan Workgroup which was convened to develop the Plan, will continue to serve as stewards of the plan, responsible for monitoring the implementation of the Plan and serve as liaisons to their respective bureaus. As stewards of the Plan, the members of the Strategic Plan Workgroup will promote the Plan and educate staff about its purpose, goals and objectives; solicit feedback on how the Department is performing; and provide advice to senior managers on ways to keep staff knowledgeable and enthusiastic about their participation in implementing the Plan. In addition, senior managers will be responsible for providing an orientation to their staff who are members of the lead programs identified in the plan. The orientation is necessary in order to communicate clearly what is expected of staff and to assess what support and tools they need to succeed in accomplishing the goals and objectives.

**Recognition and Celebration of Staff Contributions**
Staff contributions to the implementation of the Plan and successful completion of objectives will be recognized through awards, certificates and articles in the Department’s newsletter. In addition, quarterly progress reports will be released and made available on the Department’s intranet, internet, and newsletter. The quarterly reports will acknowledge staff contributions for moving the Plan forward. Staff and program recognitions will also be highlighted at the Department’s All Staff meetings.

**Regular Communication of Progress**
The regular reporting of the Health Department’s performance in implementing the Strategic Plan will be a critical part of communicating successes and challenges to staff and the community at large. A quarterly progress report card will be developed and disseminated to staff via emails, the Department newsletter and at bureau level or program staff meetings. In addition, lunch brown bags will also be convened to provide a formal presentation on the quarterly progress report cards. The report cards
will also be posted on the Department’s website for the community and included in the Friday Newsletter for the City Manager, elected officials and other city department heads.

Continuous Learning and Improvement
The Health Department’s philosophy in the development and implementation of the Plan is based on continuous learning for all staff and fostering opportunities to reward staff for high levels of program performance. Programs that demonstrate progress in meeting the objectives under each strategic priority, will receive certificates of recognition from the Health Department Director. As part of the Department’s QI plan, the SP will undergo biannual QI review by the QI Committee to ensure that the organization is on track in meeting its targets and to modify goals and objectives, as necessary. The Health Department’s approach to quality improvement is described in the Department’s Quality Improvement Plan. Lessons learned from the implementation of the Plan will be documented and shared with staff as part of the annual strategic planning retreat.
Appendix A-Glossary of Acronyms and Terms

- ACA—Affordable Care Act
- CH-Community Health
- CHA-Community Health Assessment
- CHIP- Community Health Improvement Plan
- Covered California (CC)-Operated by the State of California, Covered California is the marketplace that will connect Californians to accessible, high-quality health coverage.
- EH-Environmental Health
- EO-Executive Office
- EPHS-Essential Public Health Services
- ERC-Employee Recognition Committee
- FSS-Family Self Sufficiency
- HA-Housing Authority
- HCV-Housing Choice Voucher
- LBDHHS-Long Beach Department of Health and Human Services
- LHDs-local Health Departments
- Medi-Cal- the name of the California’s Medicaid program serving low-income families, seniors, persons with disabilities, children in foster care, pregnant women, and certain low-income adults.
- MTF-Marketing Task Force
- NACCHO- National Association of City and County Health Officials
- PDCA-Plan-Do-Check-Act
- PH-Preventive Health
- PHAB-Public Health Accreditation Board
- PS-Physician Services
- QOL-Quality of Life
- SP-Strategic Plan
- SS-Support Services
- SWOT-Strengths, Weaknesses, Opportunities and Threats
- QI-Quality Improvement
Appendix B-ACTION PLAN AND PERFORMANCE MEASURES FOR STRATEGIC GOALS AND OBJECTIVES

Goal 1: Establish the LBDHHS as THE leader and change agent for achieving the vision of healthy Long Beach.

Strategies:
1. Meet public health accreditation standards.
2. Promote community understanding of the value of public health.
3. Foster workforce excellence.

Objective 1a: By March 31, 2014, submit application for public health accreditation.

Activities and Timeline
1. Complete community health improvement and strategic plans (CHIP & SP) and secure approval from Director and Board of Health (BOHS)(12/31/13).
2. Present CHIP and SP to BOH (11/1/13).
3. Present approved CHIP and SP to accreditation task force, managers and staff (12/31/13).
4. Complete required online accreditation orientation for Director (12/31/13).
5. Submit letter of intent for public health accreditation (1/31/14).

Performance Indicators and Measures
- Submission of accreditation application by March 31, 2014
- Submission of required accreditation documents 12 months after submission of accreditation application.

Objective 1b: By December 31, 2019, 90% of LBDHHS employees will report that they “strongly agree” that the Department has a strong communication culture.

Activities and Timeline
1. Hire a development specialist to assume lead responsibility for developing, implementing and coordinating marketing and branding initiatives for the LBDHHS (3/31/14).
2. Develop an internal communications team to improve communication among staff within the Department (1/15/14).
3. Develop Department logo (5/14).
4. Revise the “Department Overview” (5/14).
5. Complete website revamp (5/14).
6. Develop key “story” for the LBDHHS that staff and community partners can use in conversations about the value of public health.
7. Update the Health Department general brochure and use as a standard handout at all health fairs and events (5/15).
8. Increase presence in social media (1/14 & ongoing).
9. Develop a common calendar of events for all LBDHHS health fairs and activities and post on the Department website (6/14).
10. Develop an internal communication plan to improve communication within the Department (6/14).
11. Routinely attend major business association meetings to inform and educate the business sector about the LBDHHS (ongoing).
12. Distribute LBDHHS promotional and educational materials to all council field offices, city hall, other departments, and community agencies as appropriate.
13. Administer employee survey annually and develop a plan to address identified needs.

**Performance Indicators and Measures**
- Increased use of Department website
- Increased health department messages sent through e-notify, Facebook, Twitter and other social media
- Increased media coverage of LBDHHS activities and programs
- Increased percentage of staff reporting effective communication within LBDHHS

**Objective 1c:** By December 31, 2019, 90% of Health Department employees will indicate that they are “knowledgeable” in all public health core competencies as measured by a self-assessment tool.

**Activities and Timeline**
1. Implement the LBDHHS Workforce Training Plan 2014-2019 (1/14).
2. Develop a course list of available online training for staff (focused on core competencies of public health and results of staff survey) (1/14).
3. Develop and implement workshops on the following topics for year 1: customer service, effective communication, public health sciences, Community Guide to Prevention (6/14).
6. Develop and implement workshops on the following topics for year 2: leadership and management, financial planning & management, and leadership and systems thinking (2/15).
7. Develop and implement workshops on the following topics for year 3: analytical/assessment, policy development and program planning, and communication (7/15).
8. Develop and implement workshops on the following topics for year 4: cultural competency, community dimensions of public health, customer service (3/16)
10. Develop and implement all core competencies workshops for year 5 (9/16).
12. Administer public health core competencies self-assessment survey to staff on annual basis beginning on December 2014.
13. Develop a staff orientation program complete with information on each bureau’s services and programs.

Performance Indicators and Measures
- Implementation of LBDHHS Workforce Training Plan by March 31, 2014
- Increased staff training and workshops
- Increased staff participation in training and workshops
- Increased percentage of staff reporting they receive the training needed to do their job well
- Increased number of LBDHHS employees who indicate that they are “knowledgeable” in all public health core competencies as measured by a self-assessment tool.

Goal 2: Ensure that the people of Long Beach are healthy, active, feel safe, and experience wellness.

Strategies
1. Promote personal and community wellness through a coordinated system of prevention.
2. Facilitate increased access to healthy lifestyle and medical care.
3. Facilitate individual and community engagement in healthy lifestyle, healthy choices and medical care.
4. Promote safe and healthy housing for all.
5. Inform, educate and empower community partners and other stakeholders to create a healthy and safe environment through improved environmental quality.
Objective 2a: By December 31, 2019, reduce adult and childhood obesity by 5%.

Activities and Timeline
1. Convene a workgroup to develop a strategy and plan for coordinated funding, access, and community engagement in health and wellness (4/14).
2. Determine essential partners to establish a coordinated system of health and wellness in Long Beach (4/14).
3. Convene meetings with community partners to secure commitment and designate specific roles for partners (6/14).
4. Develop and implement effective referral system to keep people engaged (7/14).
5. Implement a foundational framework for a coordinated system of health and wellness in Long Beach (8/14).

Performance Indicators and Measures
- Reduced percentage of obese children and adults in Long Beach
- Number of organizations involved in the coordinated system of health and wellness

Objective 2b: By December 31, 2019, 85% of adults in Long Beach will report having easy access to fresh produce.

Objective 2c: By December 31, 2019, 55% of adults in Long Beach will report using walking paths, parks, sports fields, fitness zones, and playgrounds in their neighborhoods.

Activities and Timeline
1. Disseminate information to community members on free or affordable places to shop for fresh fruits and vegetables and venues for physical activity through traditional and social media (2/14 and ongoing).
2. Disseminate health and wellness toolkit to non-profits, City partners, faith-based organizations and businesses to encourage their staff and clients to adopt healthy lifestyles (2/14 and ongoing).
3. Conduct healthy cooking classes throughout the city (3/14 and ongoing).
4. Work with the city council offices to host and lead walking clubs and other social opportunities around exercise (5/14 and ongoing).
5. Develop toolkit for local corner stores on effective product placement strategies for fresh fruits and vegetables (2/15 and ongoing).
6. Develop a “healthy vendor” recognition program for corner stores who increase fresh produce inventory (4/15 and ongoing).
Performance Indicators and Measures

- Increased percentage of population who report easy access to fresh produce (fruits and vegetables)
- Increased percentage of adults who report using walking paths, parks, sports fields, and playgrounds in their neighborhoods
- Increased percentage of adults who consume 5+ servings of fruits and vegetables in past day
- Decreased percentage of population who eat fast food 1 or more times per week
- Decreased percentage of population who drink 1+ sodas/sugary beverages per day
- Increased percentage of population who meet federal recommendations for exercise each week

Objective 2d: By December 31, 2019, reduce the percentage of uninsured by 10%.

Activities and Timeline

1. Increase outreach and educational awareness activities to enhance community knowledge about the importance of health insurance coverage (1/14 & ongoing).
2. Continue health screenings, mobile clinic services, and other preventive clinical services to link individuals to care (1/14 & ongoing).
3. Support the implementation of Covered California (CC) by enrolling individuals into expanded Medi-Cal, CC, and promoting enrollment messages and education about tax incentives for small businesses, and subsidies and health plan options for individuals (10/13 and ongoing).
4. Increase community partnerships and engagement about ACA implementation (8/13).

Performance Indicators and Measures

- Decreased percentage of population without health insurance
- Increased percentage of population with regular source of care
- Decreased percentage of population who had difficulty getting medical care when needed

Objective 2e: By June 30, 2014, develop and implement a safe and healthy housing education, awareness, and communications plan targeting other City Departments and community partners.
**Activities and Timeline**

1. Develop an educational tool that frames safe and healthy housing as a public health issue and use it to help inform policy development in the City (3/14).
2. Host community events to inform and educate the community about the importance of safe and healthy housing to improving health and quality of life (5-6/14 and ongoing).

**Performance Indicators and Measures:**
- Number of city policies that advance safe and healthy housing
- Number of education meetings or engagement activities with city and community partners

**Objective 2f:** By December 31, 2019, reduce missed work and school days due to asthma symptoms among Long Beach residents by 10%.

**Activities and Timeline**

1. Inform LBDHHS staff about the Community Asthma and Air Quality Resource Education (CAARE) and Asthma Life Skills Academy Adults (ALSAA) programs to encourage referrals for eligible clients (2-3/14).
2. Provide policy and research briefs to elected officials, community partners and other stakeholders on asthma prevention and control (6/14 and ongoing).
3. Conduct community forums on asthma control and prevention (5/14 and ongoing).

**Performance Indicators and Measures:**
- Reduced missed work and school days due to asthma symptoms
- Percent of children with current prevalence of asthma
- Days of school missed due to asthma in the past year
- Number of program participants

**Goal 3:** Promote and integrate mental health with physical and community wellness.

**Strategies:**

1. Assess the capacity of the Department to provide mental health services and determine key services that the Department is best positioned to deliver in order to address unmet needs.
2. Integrate mental health assessment, education and referrals into existing Health Department services where appropriate.
2. Foster awareness of mental health and associated services in Long Beach.
3. Develop internal and external referral systems to appropriately connect people to mental health services.

**Objective 3a:** By September 30, 2014, complete a community and organizational capacity assessment to determine demand and service gaps for mental health services in Long Beach.

**Activities and Timeline**
1. Convene mental health workgroup to determine priority for services that the Health Department could meet to address unmet needs (5/14 & ongoing).
2. Develop mental health priority service recommendations (1/15).
3. Integrate mental health services into appropriate LBDHHS programs (1/15).

**Performance Indicators and Measures:**
- Completion of assessment report
- Identification of key mental health services that the Department is best suited to provide for the community
- Number of people served through LBDHHS

**Objective 3b:** By January 31, 2015, develop and implement a community educational campaign to reduce the stigma of mental health issues and increase community awareness of mental health resources in Long Beach.

**Activities and Timeline**
1. Convene mental health workgroup with representatives from the community to develop a public awareness campaign aimed at reducing the stigma of mental health issues (4/14 & ongoing).
2. Develop marketing campaign plan and associated collaterals (6/14-10/14).
3. Implement public awareness campaign plan or scope of work (1/16)

**Performance Measures:**
- Completion of community educational campaign by January 31, 2015
- Increased percentage of population who receive needed mental health services

**Goal 4:** Improve the health, function, and quality of life of older adults, especially the frail and home-bound elderly.
Strategy:
1. Build upon existing partnerships with the Department of Parks, Recreation and Marine (PRM) and community organizations to promote and expand programs for older adults

Objective 4a: By July 31, 2014, develop and implement a fall prevention education program for seniors.

Activities and Timeline
1. Develop fall prevention education curriculum, promotional materials, and calendar of classes (2-3/14).
2. Promote fall prevention education program to community partners (4-5/14)
3. Implement fall prevention education program (7/14 and ongoing).
4. Begin implementation of other components of the Long Beach Strategic Plan for Older Adults (8/14 and ongoing).

Performance Indicators and Measures:
• Decreased death rate due to unintentional falls among older adults aged 65 and older
• Number of fall prevention education workshops and participants

Objective 4b: By January 31, 2015, build a community support and referral system for seniors.

Activities and Timeline
1. Engage the Senior Citizens Advisory Commission, local colleges and universities, and other community agencies serving older adults in identifying feasible models and develop a community support system (i.e., Village model, neighborhood calls) for older adults (4/14).
2. Promote the Senior Links program as a key source of information and referral for older adults in Long Beach through traditional and social media (5/14 and ongoing).

Objective 4c: By December 31, 2019, 90% of program participants will have an increased awareness of how to control or avoid asthma triggers.

Activities and Timeline
1. Increase enrollment of seniors in CAARE and ALSAA programs through targeted outreach (4/14).
2. Enhance education to senior residents with asthma living in impacted areas (4/14).
3. Provide workshops and education to senior population regarding control of asthma and access to resources (5/14 and ongoing).

**Performance Indicators and Measures**
- Increased awareness of how to control or avoid asthma triggers among program participants
- Increased number of seniors enrolled in program
- Increased number of participants in workshop and outreach sessions

**Objective 4d:** By December 31, 2019, reduce number of older adults exposed to vector-borne diseases by 5%. A vector-borne disease is transmitted between hosts by a vector organism such as a mosquito or tick.

**Activities and Timeline**

1. Develop education curriculum and materials targeted to older adults (4/14).
2. Implement outreach and education activities targeting senior centers, skilled nursing facilities and other community centers (4/14).
3. Target abatement activities in areas with higher populations of seniors (6/14 and ongoing).

**Performance Indicators and Measures**
- Reduced number of older adults exposed to vector-borne diseases
- Number of outreach events and presentations
- Number of abatement activities in targeted areas
<table>
<thead>
<tr>
<th>Date</th>
<th>Description of Changes</th>
<th>Changes Made By</th>
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<tbody>
<tr>
<td>12/31/14</td>
<td>Page 5 - Organization name change for Preventive Health to Policy, Planning and Prevention</td>
<td>Cheryl Barrit</td>
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<tr>
<td></td>
<td>Pages 21-22 - Updated various indicators based on review of current data sources and staff feedback.</td>
<td>Cheryl Barrit</td>
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<tr>
<td></td>
<td>Pages 24-25 - Changed indicator for senior health. Fixed typo on page 25.</td>
<td>Cheryl Barrit</td>
</tr>
<tr>
<td>1/27/15</td>
<td>Page 9 - Corrected error of omission by adding in objective 4d.</td>
<td>Angie Johnson</td>
</tr>
</tbody>
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For questions, ideas, or feedback, please contact:

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