SANTA BARBARA COUNTY BOARD AGENDA LETTER



Clerk of the Board of Supervisors 105 E. Anapamu Street, Suite 407 Santa Barbara, CA 93101 (805) 568-2240 Agenda Number:Prepared on:5/18/04Department Name:Public HealthDepartment No.:041Agenda Date:6/1/04Placement:AdministrativeEstimate Time:NOIf Yes, date from:NO

TO:	Board of Supervisors
FROM:	Roger E. Heroux, MPA Director, Public Health Department Tobacco Settlement Advisory Committee Chair
STAFF CONTACT:	Michele Mickiewicz Deputy Director, Public Health Department (681 5446)
SUBJECT:	Tobacco Settlement Advisory Committee Progress Report

Recommendation(s):

That the Board of Supervisors:

Accept and file this progress report on the Tobacco Settlement funding and programs.

Alignment with Board Strategic Plan:

The recommendation(s) are primarily aligned with Goal No. 2.: A Safe and Healthy Community in Which to Live, Work, and Visit.

Executive Summary and Discussion:

Santa Barbara County receives Tobacco Settlement funding as a result of litigation against the tobacco industry to recover the costs of tobacco-related illness. These funds were directed by your Board to be used for county health needs and programs. The first Tobacco Settlement payments were received in fiscal year 1999-00. To date, four years of Tobacco Settlement funding allocations have been made by your Board, providing funding for key health needs in Santa Barbara County.

The attached report describes the health programs and services funded through the Tobacco Settlement and summarizes the accomplishments of each program to date. In addition to the progress report, an overall financial status report is included. The financial status report details the funding received to date, and the amount allocated to programs, the endowment, and County infrastructure.

Mandates and Service Levels:

There are no mandates on the tobacco settlement funds.

Fiscal and Facilities Impacts:

There are no fiscal or facility impacts as a result of accepting this progress report.

Special Instructions:

None.

Concurrence:

Not Applicable.

cc: Tobacco Settlement Advisory Committee Members



Tobacco Settlement Advisory Committee

Progress Report on Funded Programs 2000-2004

Note: This report is for the four-year period 2000-2004. Reported accomplishments include estimated actuals for the final quarter of FY 2003-2004. Not all programs were funded for the entire four-year period.



Access to Care

TSAC allocates funding to reimburse providers for care of uninsured, indigent patients with no other source for their health care. Services are provided at Public Health

Department clinics, by physicians in private practice, by physicians providing care in a hospital setting, by emergency room physicians, and through hospitals countywide. Funding increases access to care for the following services:

- Hospital and Emergency Room Care
- Specialty Care
- Dental Care
- Emergency Room Physician Care

"Access to care is a major public health issue. Approximately 1 in 5 Santa Barbara County Residents has no health insurance."

--Roger Heroux , MPA Director, Santa Barbara County Public Health Department

Hospital & Emergency Room Care

TSAC Allocations	00-01	01-02	02-03	03-04	Total 00-04
	\$500,000	\$500,000	\$500,000	\$777,575	\$2,277,575

TSAC funds reimburse hospitals for the costs of providing care to the uninsured. Hospitals submit claims for reimbursement at Medi-Cal rates. Hospitals receiving TSAC funding include: Goleta Valley Cottage Hospital, Lompoc District Hospital, Marian Medical Center, the Rehabilitation Institute of Santa Barbara, Santa Barbara Cottage Hospital, Santa Ynez Cottage Hospital, and St. Francis Medical Center (until 02-03 when this hospital closed). TSAC funding covers only a small percentage of the uncompensated care being provided each year by hospitals in Santa Barbara County, yet it allows many individuals to receive health care that is greatly needed.

- Funded 1,626 hospital inpatient days for adults and children who are uninsured and not eligible for publicly-funded programs.
- Provided outpatient hospital services to 490 uninsured, indigent patients.

TSAC Allocations	00-01	01-02	02-03	03-04	Total 00-04
	\$500,000	\$500,000	\$650,000	\$777,575	\$2,427575

Specialty Care & Specialty Care Testing

TSAC funds were allocated to provide access to specialty physician care for patients without insurance or a means to pay for their services. Specialty care services included oncology, neurosurgery, orthopedic surgery and cardiology as well as specialty surgery for needs of an urgent, emergency, or traumatic nature. Services were provided by specialists in private practices in the community. Funding was also made available to reimburse for ancillary services and diagnostic testing related to specialty care.

- Maintained reimbursement levels for physicians providing specialty care services to 6,372 adults in the MIA (Medically Indigent Adult) Program.
- Provided access to needed specialty care on referral from PHD clinics for 1,125 indigent adults and children.
- Reimbursed specialty care providers for services rendered in the hospital or in a private practice setting to 1,958 uninsured, indigent adults.



Dental Care							
TSAC Allocations	00-01	01-02	02-03	03-04	Total 00-04		
	\$100,000	\$100,000	\$100,000	\$97,197	\$397,197		

TSAC funds reimburse the costs for dental care provided to children from birth to age 19, who are not eligible for Medi-Cal, and whose families' income falls below 200% of the poverty level.

Accomplishments 2000-2004

• Dental care was provided to 1000 children with unmet dental health needs.



Emergency Room Physician Care

TSAC Allocations	00-01	01-02	02-03	03-04	Total 00-04
	N/A	N/A	\$100,000	\$194,394	\$294,394

TSAC funding offsets the costs to emergency room physicians of providing uncompensated care for the uninsured throughout Santa Barbara County. Reimbursement is at State Medi-Cal rates.

Accomplishments 2002-2004

• 2,613 emergency room physician encounters were funded with TSAC dollars for FY 2002-2004. Funds were exhausted in the first two quarters of the year.



Abuse is getting old.



Let's do something about it! Adult & Aging (AAN)

TSAC Allocations	00-01	01-02	02-03	03-04	Total 00-04
	\$100,000	\$100,000	\$50,000	\$48,598	\$298,598

The Adult and Aging Network (AAN) provides community services to older and disabled adults, and to their families and caregivers. TSAC dollars support a variety of AAN efforts:

- Educating network member community agencies on key issues affecting these populations and effective ways to assist these groups in responding to the challenges they face.
- Conducting an annual assessment of the status of older and disabled adults in terms of their physical and mental health, population trends, safety and unmet needs. This assessment is published in an annual report distributed to the community and organizations and agencies providing services to this population.

"Of adult smokers in Santa Barbara County, 9.3% are over the age of 50."

• Building a concrete consortium of advocates for older adults and the disabled throughout the community.

Community forums developed and sponsored by AAN include: important legislation impacting seniors and disabled adults; disaster planning for vulnerable populations; identifying and prosecuting elder and dependent adult abuse; and abuse proofing residential and skilled nursing facilities.

- Published 2001, 2002 and 2003 Adult and Aging Network Community Report on the Status of Older and Disabled Adults in Santa Barbara County.
- Sponsored 52 Community Forums to inform and educate the community on the status of disabled and older adults. Attendees were service providers, community activists, elected officials, and disabled and older adults themselves.
- Educated the Network's 60 member agencies on available delivery programs for older adults and adults with diseases or disabilities throughout the County.
- Collected and compiled data on tobacco use by disabled and older adults which was included in the AAN Community Status Report.



Asbestos (in ruptured sacks) and hazardous materials dump discovered by APCD inspector surveillance.

Air Pollution Control District (APCD)

TSAC Allocations	00-01	01-02	02-03	03-04	Total 00-04	
	\$85,000	\$85,000	\$85,000	\$82,617	\$337,617	

The APCD enforces air pollution laws that protect public health. People with compromised lung function (for example, smokers and those with breathing ailments) are directly affected by air pollution and poor air quality. TSAC funding was used to fill a north county inspector position that was vacant due to revenue reduction. The inspector provides services to the community in complaint response, surveillance of air pollution sources, public outreach, and enforcement of the APCD's air pollution rules. An increase in inspection staff resulted in enhanced enforcement of air pollution laws and improved compliance and awareness on the part of business owners.

Accomplishments 2000-2004

- Increased response to public complaints; worked with local permitted businesses to ensure they meet air pollution control requirements; and conducted surveillance activities to identify illegal sources of air pollution.
- Responded to 322 citizen complaints in the North County area.
- Identified 548 violations of air pollution control laws.
- Achieved a reduction of more than 23,401 pounds of toxic air pollution through the identification of violations of air pollution control laws.
- Identified 39 illegal industrial/business operations emitting unregulated air pollution.

In 2001, for the first time since such standards were put in place, Santa Barbara County air met the federal, health-based standard for groundlevel ozone – a primary component in smog.



Alcohol and Drug Program (ADP)

TSAC Allocations	00-01	01-02	02-03	03-04	Total 00-04
	\$170,000	\$170,000	\$150,000	\$145,795	\$635,795

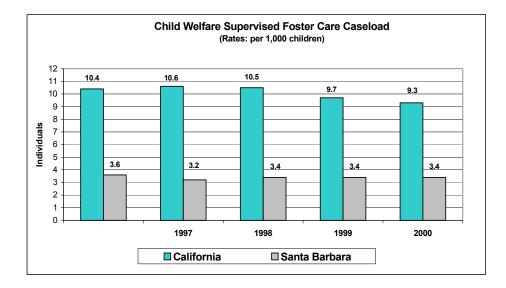
The Alcohol and Drug Treatment Program (ADP) philosophy is to create a unified system of care for all populations suffering from substance abuse. This includes: supporting alternative sentencing placement models for adolescents and adults; integrating family-focused alcohol and addiction services with appropriate mental health, public health and other community services; and strengthening outcome-based evaluation efforts. TSAC funding contributes to the following ADP Programs:

• Adult Drug Court: Adult Drug Court provides alternative sentencing for non-violent alcohol and drug offenders - treatment instead of incarceration. SATC incorporates 5 phases of treatment over 18 months with three progressive treatment tracks: Stabilization, Intensive Treatment, and Transition.

"That was a real godsend. A lot of people can't believe I made it after being a hardcore addict for some 30 years and in prison for more than 20 years." *--Former drug addict, convict and Adult Court graduate*

- Juvenile Drug Court: Juvenile Drug Court has many of the same goals as SATC. Treatment services are offered by community-based agencies and include treatment, recovery or rehabilitative services for adolescents and family members.
- **Perinatal Services:** Services delivered to pregnant and postpartum women with substance abuse problems.

- Direct service staff, employees, and interns received training to encourage cessation of tobacco use and learned methods of incorporating tobacco use cessation into the treatment plans and counseling content of program participants.
- To support the goal of assisting clients in facing their substance abuse, tobacco cessation goals were incorporated into the treatment plans of approximately 50% ADP clients who were identified as tobacco users.
- 39% of ADP program participants graduated from the program.



Children's System of Care (formerly MISC)

TSAC Allocations	00-01	01-02	02-03	03-04	Total 00-04
	\$500,000	\$500,000	\$500,000	\$437,386	\$1,937,386

The Children's System of Care, part of the Department of Alcohol, Drug and Mental Health Services (ADMHS), provides multi-agency, targeted case management for

children and youth who are at-risk for out-of-home placements, psychiatric hospitalization, arrest, abuse, and school failure. Through the program's strengths-based, family focused approach, the System of Care assists families with at-risk children to grow and thrive together as full and active members of their communities. TSAC funds support children and youth served by the Children's System of Care who are uninsured and ineligible for publicly-

"Families consistently report that the System of Care approach has made significant changes in their lives."

--Dr. James Broderick, Director Alcohol, Drug and Mental Health Services

funded programs. Services are provided countywide through three regional clinics in Santa Maria, Lompoc, and Santa Barbara.

- Provided access to mental health services for 2,913 uninsured children and youth.
- Reduced the number of new out-of-home placements from 128 in 2000-01; 89 in 2001-02; 96 in 2002-2003 and 54 for the first three quarters of 03-04.
- Reduced the number of new psychiatric hospitalizations for children in the Children's System of Care from 121 in 2000-01; 98 in 2001-02; 35 in 2002-2003 and 51 for the first three quarters of 03-04.
- Assessed tobacco use on client intake and at annual reassessment. Smoking cessation referrals have been provided to 590 clients.
- Currently working with the Tobacco Prevention Program to identify ways to include tobacco prevention and cessation education into program services.



Project Clean Water (PCW)

TSAC Allocations	00-01	01-02	02-03	03-04	Total 00-04
	\$600,000	\$600,000	\$259,000	\$50,542	\$1,509,542

Project Clean Water (PCW) was established to identify and implement solutions to reduce contamination in local creeks and storm-drain collection systems that contributes to water quality problems and closures at local beaches on the South Coast. Improving the health of local creeks and ocean water is accomplished by:

- **Community Awareness and Education**: TSAC funding was crucial to the creation of The South Coast Watershed Resource Center at Arroyo Burro County Beach. Opened August 2001, the WRC educates the public about local watershed ecology and issues, and how to protect water quality.
- Monitoring the Health of Area Watersheds: During wet weather events, PCW staff collect and analyze water samples from at least 17 watersheds in Santa Barbara County. Samples are analyzed for a full suite of pollutants, including bacteria, heavy metals, pesticides, nutrients, and oil and grease.
- **Pilot Street Sweeping:** Implemented in 2001, street-sweeping takes place in targeted locations to remove sediment, debris, metals, litter and trash to reduce pollutant loading to creeks and the ocean.
- **Public Complaints Protecting Local Creeks:** Respond to public complaints regarding water quality.

- The Watershed Resource Center has provided educational experiences and curriculum to 13,084 students from Santa Barbara County.
- 271 water samples were collected from area creeks and analyzed by PCW staff.
- 321 tons of potential pollutants were removed through street-sweeping.
- PCW staff responded to 194 complaints from 2000-2004.



Santa Barbara Neighborhood Clinics (SBNC)

TSAC Allocations	00-01	01-02	02-03	03-04	Total 00-04
	N/A	N/A	\$100,000	\$97,196	\$197,196

Santa Barbara Neighborhood Clinics operate three community clinics in southern Santa Barbara County. The clinics provide free or low-cost primary medical and dental care services, as well as periodic health screenings and immunizations for children up to the age of 19. TSAC dollars support two specific programs at SBNC:

• **Community Outreach:** SBNC hired an outreach coordinator who provides outreach to increase the number of eligible patients in the CHDP, FamPACT, Medi-Cal, and Healthy Family insurance

programs.

• Hepatitis C: The SBNC Hepatitis C Program performs screening, testing, and counseling of high-risk individuals on Hepatitis C risk factors and consequences. For those confirmed positive for the disease, the program provides educational and support services on preventing the spread of the disease, behavior modifications, and treatment options. "Outreach funding certainly saves costs by allowing SBNC to reach people who have little or no prior understanding of preventative medicine. A timely visit to our medical clinics often avoids the cost of much more expensive emergency room visits, hospitalization, or chronic disease control."

--David Landecker Executive Director, S.B.N.C.

- Made 11,169 contacts with potential program participants for purposes of advising them about available medical support options such as Healthy Families, MediCal, CHDP, BCCCP, etc.
- 196 new annual enrollments into Healthy Families medical insurance program.
- 1,792 in-clinic patient vists by homeless individuals.
- Provided Hepatitis C risk-assessment and testing to 839 individuals.
- Conducted education sessions for 240 local area health care professionals to increase knowledge and awareness of Hepatitis C issues.



Tobacco Prevention Settlement Program (TPSP)

TSAC Allocations	00-01	01-02	02-03	03-04	Total 00-04
	\$815,000	\$815,000	\$806,000	\$783,407	\$3,219,407

The Tobacco Prevention Settlement Program of the Public Health Department has the goal of protecting the public from the harmful effects of tobacco. TSAC funds allow expanded tobacco prevention and treatment services in the following areas:

- **Cessation:** Helping those who currently use tobacco to quit. TPSP operates offices in both Santa Barbara and Santa Maria to ensure support and counseling services for citizens countywide.
- **Prevention:** Teaching youth and young adults about the health effects of tobacco use and secondhand smoke. The program works with over 35 subcontractors, many of them non-profit community based organizations, to carry out prevention programs throughout the county.
- **Media:** Developing a countywide media campaigns targeted at teens and young adults to promote non-smoking and targeted at current tobacco users to raise awareness of the availability of cessation classes.
- **Evaluation:** Administers an integrated evaluation system to monitor tobacco use and its effects countywide.
- **Enforcement:** Supporting enforcement of tobacco-related laws. TPSP coordinates surveillance and enforcement activities with local police and sheriff's departments to ensure compliance with local and state tobacco laws, including the sale of tobacco to minors.

Accomplishments 2002-2004

Cessation:



- Funds 15 cessation providers, who have provided 142 cessation classes throughout the county.
- 1,173 smokers attended in TPSP-funded cessation classes, about 300 per year.
- 55% of program participants received nicotine replacement or other pharmacological aids. In combination with cessation counseling, nicotine replacement and pharmacological aids increase the successful quit rate up to 50%.
- 47% of cessation class participants reported being tobacco-free at 3-month assessment and 32% report being tobacco-free at 6 months.
- Increased capacity to provide cessation services, by conducting cessation trainings attended by 51 individuals from local community-based organizations.

Media – Cessation:

• Developed and aired three distinct media campaigns, in English and Spanish to motivate smokers to quit. Promotion of cessation classes with media increases enrollment by 200%. In 2003, the estimated total exposures in our target demographic to the media campaign were 2.6 million.

Prevention:

Media - 18-24 year olds:

- In concert with a local media firm, developed communication campaigns addressing tobacco use among 18-24 year olds, the fastest growing group of smokers. From 2000 to 2004, a total of four different campaigns have been created and delivered to the target audience.
- Media campaigns in both English and Spanish are delivered via a mix of media vehicles, targeting young adults via TV, print ads in college newspapers, radio, bus ads inside and out, movie theaters, posters on campus and in coffee shops, and special events and promotions. In 2003 the estimated total exposures to the media campaign were 4.3 million.
- Demonstrated an average 85% recognition rate among 18-24 year olds who participated in a postmarket campaign recall survey.
- 30% of tobacco users said the ads caused them to "change their behavior" and they were less likely to use tobacco.
- 32% of young adults said they had discussed the campaign with a friend or family member.

"I have tried to quit and I need reminders like these ads" —Julie, 24



"I don't smoke but it confirmed that I didn't want to start. It shows how much of a waste smoking is." Nate, 19

Youth Prevention:

- Provided tobacco education and prevention activities to a total of 35,899 youth countywide through contracting with up approximately 20 community-based agencies and schools.
- Funded 45 youth and special population grants to local area non-profits to provide tobacco prevention education countywide. Activities included: poster contests, advocacy campaigns, such as celebrity post-card projects, targeted chew tobacco education activities, creation of school-based murals and plays, sponsoring school assemblies and smoke-free events in the community, prevention education in elementary and middle schools countywide, and youth cessation classes in schools and community centers.

Enforcement:

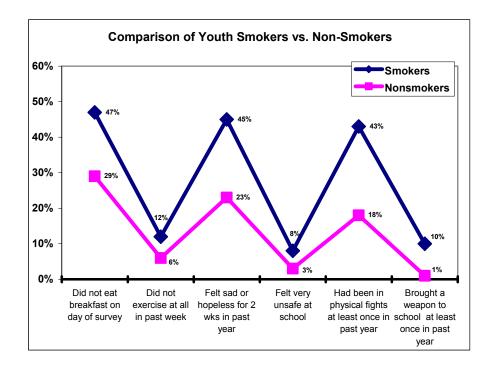
• Compliance with California's Smoking in the Workplace Law (Labor Code 6404.5) in bars and restaurants in Santa Barbara County has increased from 70% in 2001 to 90% in 2002 to 95% in 2003.

- Promoted the active enforcement of LC 6404.5, resulting in one criminal and 5 civil judgments against business owners in violation of state law.
- Coordinate and fund enforcement agencies to conduct ongoing surveillance/inspection programs. Two enforcement programs which initiated with TPSP-funding have now been integrated into regular enforcement operations.
- Provided technical assistance and signage to encourage the development of local policies that reduce of environmental tobacco smoke (ETS). Allan Hancock and Santa Barbara City College adopted policies restricting smoking to designated outdoor smoking areas.
- Developed and maintain a database of all licenses and violations for tobacco retailers. Ongoing coordination and initiation of enforcement of Penal Code 308a, with the County Sheriff, citing retail clerks that sell tobacco products to minors.
- Provided signage for 150-200 county and city parks in support of the new state law (AB 1867) requiring a 25-foot smoke-free zone surrounding all playgrounds, and to many private businesses.



Evaluation & Surveillance:

- All TPSP funded projects have performance targets and grantees are monitored on the accomplishment of their objectives. In addition, a comprehensive tobacco prevalence survey was conducted with 800 residents in 2001. Survey results provide invaluable local data about tobacco use and attitudes.
- TPSP spearheaded a joint project with the schools districts that has resulted in a rich source of information about a wide range of health behaviors among school-aged youth. The following chart depicts the telling comparison between teen smokers versus their non-smoking counterparts on a number of variables. This data and school/community partnership is a direct result of TPSP funding.



Tobacco Settlement Funding by Use of Funds FY '00-'01 through '04-'05

% of 04-05 % of Total 00-01 01-02 02-03 04-05 Recommended Total % of Program 03-04 Allocation Recommended Allocations Description Allocation Allocation Allocation Allocations Total Allocations Allocations: Adult & Aging Network 100,000 100,000 50,000 48,598 40.000 1.2% 338,598 2.0% 0.9% 2.1% Air Pollution Control District 85,000 85,000 85,000 82,617 30,000 367,617 4.4% ADMHS - Psychiatric Crisis & Recovery 150,000 150,000 0.9% 97,197 3.0% 2.9% Dental Care 100,000 100,000 100.000 100,000 497,197 In-Home Supportive Services (IHSS) 0.0% 194.394 194.394 1.1% Multi-Agency Integrated System of Care 500,000 500,000 500,000 437,386 280,000 8.3% 2,217,386 13.0% Primary & Specialty Care - County 100.000 100.000 3.0% 2.9% 100.000 100.000 100.000 500.000 Project Clean Water 259.000 50.542 9.0% 600.000 600.000 37.000 1.1% 1.546.542 Substance Abuse Treatment Court 150.000 170.000 170.000 145.795 80.000 2.4% 715.795 4.2% 24.0% Tobacco Prevention & Education 815,000 815,000 806,000 783,407 811,000 4,030,407 23.6% **Total County Program Allocations** 48.1% 10,557,936 61.7% CADA - Cacique Shelter 0.2% 40,000 1.2% 40,000 -Community Clinics (Hep C & Outreach) 100,000 97,197 95,000 2.8% 292,197 1.7% **Emergency Room Physicians** 5.3% 474,394 2.8% _ 100,000 194,394 180,000 FSA-211 After Hours Web Based Access 40,000 1.2% 40,000 0.2% Hospital & ER 500,000 500,000 500.000 777,575 730.000 21.6% 3,007,575 17.6% Primary & Specialty Care - Non-County 400.000 400.000 550.000 677.575 630.000 18.6% 2.657.575 15.5% SBRHA Foundation 1.2% 0.2% 39,766 39,766 --51.9% Total Non-County Program Allocation 6.551.507 38.3% **Total Program Allocations** 3.300.000 3,370,000 3,370,000 3,686,677 3,382,766 17,109,443 69% Infrastructure: Alcohol, Drug, & Mental Health Services 626,362 140,203 315,470 291,591 1,373,626 Public Health Department 939,542 210,304 359,205 53,458 1,562,509 Infrastructure Total 345,049 1,565,904 350,507 674,675 2,936,135 12% Endowment: Endowment-Principal 802,495 856,440 947,567 1,006,062 850,426 4,462,990 Endowment-Interest 77.044 127.886 175.648 170.169 550.747 Loan to General Fund (800,000)(800.000)879.539 984,326 1,123,215 1,176,231 50.426 4,213,737 **Endowment Total** 17% Administration/Overhead 140.000 140.000 140.000 136.076 130.000 686.076 3% Grand Total 5.955.443 4.844.833 5.237.890 5.344.033 3,563,192 24.945.391 100%

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