



Tobacco Settlement Programs Outcomes Report

Fiscal Year 2010 – 2011



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Dear Colleagues,

On behalf of the Orange County Health Care Agency, I am pleased to present the 2010-2011 Tobacco Settlement Program Outcomes Report, the tenth annual report on Tobacco Settlement Revenues (TSR) summarizing the measurable results that enhanced the health and well-being of thousands of Orange County residents. TSR funds remain a valuable asset in addressing our community's ongoing health needs in an increasingly unstable economic climate.

The Health Care Agency continues to be grateful for the support of our community partners in collaborating on the development of the priorities that guided the annual TSR spending plan for FY 2010-2011. These partners include the Orange County Medical Association, the Hospital Association of Southern California, the Children and Families Commission of Orange County, the Coalition of Orange County Community Clinics, the Mental Health Association of Orange County, Kaiser Permanente, the American Association of Retired Persons, and the National Council on Alcoholism and Drug Dependency for Orange County.

The services funded through the FY 2010-2011 TSR Spending Plan have made significant impacts on thousands of Orange County residents. Tobacco Settlement Revenue funds were used in creative and innovative programs in 2010-2011 that provided services that had not previously been funded through TSR. These included a specialized dentistry program for seniors and persons with disabilities, and an outreach program for families with children at risk of developmental disabilities. TSR continued to provide county-wide non-emergency related trips for our older adults totaling over 100,000 trip miles when combined with a new federal funding source which TSR funds were used to leverage. Orange County hospitals that maintain basic or comprehensive emergency medical services for their patients received nearly \$1.5 million for uncompensated care. Emergency room physicians and on-call physician specialists received just short of \$6 million in TSR funds which helped to augment reimbursements and allowed continued access to healthcare without interruption.

Key outcomes from fiscal year 2010-2011 are summarized in the attached report.

I look forward to sharing the ongoing progress of these programs as well as the many others made possible with Tobacco Settlement Revenue as we continue working together towards a healthier tomorrow.

Respectfully submitted,

Mark A. Refowitz, Director

Tobacco Settlement Programs Outcomes Report

Under the 1998 Tobacco Litigation Master Settlement Agreement, seven tobacco companies agreed to change the way tobacco products are marketed, and to pay States an estimated \$206 billion. California's share of the settlement is approximately \$1 billion a year. Half of the payment goes to the State's General Fund with the Legislature and Governor determining how it is used. The remainder of the Tobacco Settlement payment is divided, based on population, among California's 58 counties and the four largest cities for use as decided by each local jurisdiction.

Orange County voters approved Measure H in November 2000, creating the Orange County Tobacco Settlement Revenue Fund (TSR) and specifying that the County's TSR funds be allocated as follows:

- 19% to provide health care services for seniors and persons with disabilities
- 12% to tobacco prevention and control, including cessation services for youth and adults to reduce smoking and the consumption of tobacco, other addiction programs, and community mental health programs and facilities
- 20% to non-profit community clinics
- 23% to fund emergency medical services provided by emergency room physicians and emergency room on-call physician specialists
- 6% to hospitals within Orange County maintaining basic or comprehensive emergency services or trauma centers to cover the costs of providing charity care
- 20% to the Sheriff's Department for public safety programs and services

EXECUTIVE SUMMARY

The Health Care Agency (HCA) and community representative partners continue to collaborate on the annual spending plan for Tobacco Settlement Revenue health programs in Orange County. The plan summarized in this document included the continuation of valuable TSR funded programs in FY 2010-2011 that affected the lives of thousands of Orange County residents.

The tenth full year of programs supported by Tobacco Settlement funds demonstrated continued success and progress in addressing areas of need. In 2010-2011, TSR funds were utilized for specialty dental services for seniors and persons with disabilities. This innovative program provided diagnostic, endodontic, and oral/maxillofacial surgery services to individuals who would otherwise have nowhere to turn for such highly specialized care. Also new to 2010-2011, a program that was geared towards families with “at risk” to developmental disabilities children was instituted, and with a kernel of funds, was able to leverage additional funding from other sources to realize a highly successful program that served a number of families in need. TSR continues to provide funds for comprehensive tobacco education and cessation program that in sum have helped to make Orange County one of the healthiest and safest communities in the nation in which to live, work and play. As is evident, Tobacco Settlement funds provide countless services that enhance the quality of life for all Orange County residents – from our youngest to our most vulnerable older adults.

In sum, the programs funded by TSR revenues have made lasting impacts on the health of thousands of Orange County residents, such as the seriously and persistently mentally ill, homebound older adults, teens, and emergency room users. Innovation and creativity have become a necessary component of funding choices made by the Health Care Agency and our community partners. Together, we believe we have made lasting strides towards providing quality services to thousands of individuals.

The following report represents a summary of the tenth year milestones and outcomes for the health programs supported by Tobacco Settlement Funds. Program expenditures reflect actual drawdowns from Measure H funds for the time period reported.

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Tobacco Settlement Programs

Outcomes Report

I. Health Care Services for Seniors & Disabled

Total Expenditure \$5,769,023*

**Expenditure information based on TSR claim as of June 30, 2011.*

Non-Emergency Medical Transportation for Seniors

Program Expenditure\$1,997,106

Senior Non-Emergency Medical Transportation (SNEMT)

A coordinated effort to facilitate the health and welfare of Orange County (OC) seniors by providing transportation and access to needed healthcare services where none existed before. The SNEMT program prevents premature institutionalization of older adults, and improves their quality of life by connecting them to important medical services, thereby reducing a large amount of costs for emergency care and/or skilled nursing facility care that would otherwise be incurred by county and other government agencies. The program is one of the many services provided by the Office on Aging that makes Orange County the best place in America to age with dignity.

Outcomes/Current Status:

- At the end of June 2011, more than 7,700 clients were enrolled in the SNEMT program. During FY 2010-11, SNEMT contractors provided a total of 101,345 one-way county-wide trips with TSR and OCTA New Freedom grant funds. Due to the increased frailty of older adults, the majority of SNEMT trips were provided to clients in need of non-ambulatory door-to-door service. The arm-to-arm assisted trips represent 60% (60,798) of all SNEMT trips provided during this period.
- The annual survey of program participants was conducted as a method to monitor SNEMT performance and client satisfaction of transportation services to medical appointments. The response rate for FY 2010-11 was 43% (643 out of 1,485 surveys distributed were returned) and of the participants who responded to the question assessing satisfaction with the overall SNEMT program, 98% indicated a high level of satisfaction with the program.

Services for Seniors

Senior Health Outreach & Prevention Program (SHOPP)

Program Expenditure\$1,123,330

A specialized program to promote the optimal health of older adults and underserved adults. Public Health Field Nurses (PHN) and Behavioral Health (BH) staff conduct home visits to high-risk elderly with identified mental and/or physical health concerns. Assessments, short-term case management, and linkage to community resources are provided to older adults, their caregivers, and families. Many of the barriers such as inadequate medical insurance, inadequate finances, lack of transportation and cognitive and behavioral issues which prevent clients from accessing health care are overcome through education, advocacy and linkage to community services. TSR funds represented 52% of the total program budget.

Outcomes/Current Status:

- During FY 2010-11, the SHOPP program received a total of 910 referrals. A total of 2,658 assessments for physical and mental health care issues were conducted (1,661 initial and follow-up PH and 997 BH SHOPP assessments) and 1,774 clients (1,109 for PHN and 665 for BH) received services including advocacy, and linkage to physicians and community resources. Of the referrals to medical providers with known outcomes, 10% resulted in hospitalization, 28% resulted in a medication change and 28% resulted in diagnostic tests, surgery or new treatment. Community service referrals with known outcomes resulted in clients receiving service and being satisfied 81% of the time.
- An educational need was indicated in 85% of the referrals to the SHOPP program during FY 2010-11. PHNs made 3,720 client contacts (home visits and phone visits) to provide assessment, case management and health education. Safety (43%), blood pressure (31%), orthopedic (29%) and diabetes (29%) were the most frequent client issues.
- In-home tobacco assessments were provided to 776 older adults. PHNs distributed tobacco education materials at 14 health fairs and through community outreach reaching 2,674 individuals.
- During the reporting period, the SHOPP pharmacist provided 410 individual medication reviews. Medication reviews were expanded to different venues to include senior centers, senior residences, health fairs and individual home visits to the frail and elderly. Topics such as “Medication Management,” “Medications for Different Disease States” and “The Dangers of Mixing Alcohol and Medications” were presented to 851 consumers and 83 professionals.

In-home Mental Health Treatment Services for Aging

Program Expenditure \$171,505

A program to enhance counseling and mental health treatment, focusing on socially isolated older adults who are unable or unwilling to access traditional services, by contracting with community based providers. Services are available to accommodate the special needs of Latino and Vietnamese older adults through Camino Nuevo and the Value programs.

Outcomes/Current Status:

- During FY 2010-11, 90 individuals were served within the two programs ranging in age from 59 to 94 years old. Eleven referrals were received during the course of the year and all were accepted. Five new clients were added from July 2010 to December 2010 and six new clients were added from January 2011 to June 2011.
- Cultural Barriers, such as family values, belief systems, fear of stigma hindered access to care, as well as outreach efforts by staff. Some elders were receptive to assistance, and successes included linkage to housing and to increased social supports in their communities. This in turn helped to reduce isolation, as well as incidents of overuse of emergency rooms and psychiatric hospitalization as a means of treatment. The program was discontinued at the end of June 2011.

Door-to-Door Community Program Targeting Latino Elders

Program Expenditure \$99,813

The goal of this community program is to inform and link older adults and their families to available home and community appropriate services to protect their health and well-being, and enhance their personal care. “Care Door-to-Door” serves low-income, high-risk elders in predominantly Latino neighborhoods, with a particular emphasis on isolated, frail older adults. TSR funds represented 100% of the total program budget.

Outcomes/Current Status:

- During this contract period, a total of 4,392 outreach contacts were conducted by door-to-door outreach. The program identified 397 older adults for intake assessments with a large proportion of the individuals lacking medical insurance. A total of 465 in-depth intake assessments were conducted, including 385 in-home safety instructions/inspections, 39 mental health, and 41 physical health assessments. A total of 1,689 direct or indirect links/referrals were made by the program including 186 to community clinics; 238 to the food banks; 31 to the Health Insurance Counseling and Advocacy Program (HI-CAP); 271 to OoA; 143 to the Seniors Centers, 31 to Linkages and 215 to Alzheimer’s Association among others.

- The contractor found that a significant number of the elderly served had experienced a fall, clearly reflecting the importance of fall prevention education among the elderly. To address and strengthen concepts and recommend precautions about safety, night lamps were donated to each elderly identified. Moreover, to reinforce the issue of safety, the program donated Durable Medical Equipment items such as wheelchairs, canes, walkers, and incontinence supplies. The number of donations for this contract year was 35.

Services for the Disabled

Mental Health Program for Disabled

Program Expenditure\$1,307,439

The Mental Health Program for Disabled continues to leverage funding with other sources to maintain local treatment for seriously and persistently mentally disabled adults. This rehabilitation program focuses on adults who have a concurrent substance abuse disorder along with chronic mental disability and require a secure residential treatment setting. It remains unique among long-term care programs in offering multi-level vocational programming. TSR funds represented 9% of the total budget.

Outcomes/Current Status:

- The Mental Health Rehabilitation Center (MHRC) admitted 77% more clients during FY 2010-11 compared to the previous fiscal year, and operated at 94% capacity with an average daily census of 75. A total of 199 consumers were served during this year.
- In FY 2010-11 the beds at the facility were increased from 65 to 80 to allow a larger number of residents from Institutions of Mental Disease (IMD) to step down to the MHRC level of care. This objective was successfully met. One in three (33%) of the 119 consumers admitted were from IMD, 3% from State Hospitals, and 21% from Royale TRC (RTRC). Patients who get placed from RTRC, generally present with more challenging behaviors than those placed from the other Therapeutic Residential Centers (TRC), as the beds at RTRC are used as an interim placement for patients who are waiting for an IMD bed. Of the remaining admissions, 40% were from acute hospitals and 3% from other TRCs.
- Of the discharges from the program, 71% were to a lower level of care, which is an important measure of program effectiveness. This is an increase over last year and is noteworthy given the much higher percentage (36%) of clients admitted from IMD and State Hospital levels of care. Even more noteworthy is the reduction in discharges to higher levels of care, from 31% last fiscal year to 10% this fiscal year.
- The MHRC more than doubled family involvement (from 56 families last year to 124 families) in treatment and discharge planning over last fiscal year.

- The number of consumers participating in the pre-vocational skills training classes (128) and the on-site work program (39) increased from last year. However, the increase in the number of consumers admitted from IMDs with more challenging behaviors and the goal of a reduced length of stay in the facility resulted in a decrease in the hours of vocational training in the work program.
- Twelve consumers participated in educational classes held on site this year and two consumers were studying to take the G.E.D. In the second half of this fiscal year, the Saddleback Valley School District eliminated funding for the instructor who had been providing classes two days per week at MHRC.
- Tobacco cessation classes, on-site AA meetings and a Dual Diagnosis group were offered weekly to consumers. The facility has gone “smoke free” in this period. Overall, as a result of going “smoke free” the culture around smoking has been changed. Patio breaks now offer consumers an opportunity to engage in healthful outdoor activities throughout the day without cigarettes.

Transitional Community Living Program

Program Expenditure\$305,455

The Transitional Community Living Program is a specialized, intensive program for 45 mentally ill disabled adults who are transitioning from inpatient treatment to community treatment. The services are provided at the West Anaheim Therapeutic Residential Center (WATRC) inpatient facility. TSR funds represented 10% of the total budget.

Outcomes/Current Status:

- WATRC’s average daily census decreased slightly to 93% overall for the fiscal year as a result of the overall reduction in referrals to Long Term Care programs in the second half of the year. The reduction in occupancy resulted in the facility needing to consider admission of clients with more treatment resistant behaviors in order to maintain a full census, despite the limited psychiatrist time allowed under the contract.
- There was an increase in the overall number of admissions (n = 62) to WATRC this fiscal year with 47% from higher level of care facilities such as IMDs (7%) and Acute care hospitals (40%), and 53% of the admissions from lateral level of care facilities. The Behavioral Health (BH) Long Term Care program continues to work with care coordinators from the Lanterman Petris Short (LPS) unit to increase the number of referrals to WATRC from IMD.
- WATRC has been agreeable to accepting consumers back into their program once stabilized. Of the 64 discharges during this period, nine (14%) consumers were discharged to higher levels of care but subsequently returned to the program once stabilized to continue to work toward their longer term goals. Of the remaining, more than half (57%) were to a less restrictive level of care and 17% were discharged to a lateral level of care. The remainder of discharges (26%) was to a higher level of care for psychiatric or medical stabilization.

- This year Cypress College Disabled Student Services added back the additional funding to the educational programming. WATRC maintained the same level of attendance in the educational programming as last year. The facility contracted on their own with a music therapy program, which has been beneficial for consumers. Program residents continue to be linked with reduced fare bus cards which facilitate travel in the community, an important step in preparation for movement to a lower level of care.
- Tobacco cessation groups were offered on a weekly basis at WATRC. In addition, the facility worked closely with residents to offer alternatives such as nicotine patches for those who expressed an interest in quitting. The Tobacco Use Prevention Program (TUPP) conducted an in-service training for staff members in order to enhance knowledge about smoking cessation. Attendance at the Dual Recovery Anonymous groups held constant. WATRC has reduced the number of smoke breaks over the past year and has worked to change the culture around these break times so that cigarettes are not the primary focus.

Crisis Assessment Team

Program Expenditure\$172,698

This dedicated team of mental health professionals is available to respond to community requests to conduct specialized evaluations of adults who may require hospitalization. The Crisis Assessment Team (CAT) provides a single point of contact for the community and allows for timely follow-up for consumers who may not require hospitalization. TSR funds represented 69% of the total program budget.

Outcomes/Current Status:

- Of the 437 clients assessed during FY 2010-11, 157 (36%) were diverted from hospitalization and were followed-up for 30 days to ensure linkage with community providers, primary care physicians, or county mental health staff for continued treatment. Twenty-six percent (26%) of all referrals received during this period (112 of 437), were received from local law enforcement to provide assessments in the community. A total of 258 involuntary holds were written.
- An average of 2.8 follow-up contacts was required to assess client's ability to engage in services and locate appropriate treatment providers. A total of 1,208 follow-up contacts including home visit, hospital visit, linkage to provider and family intervention were provided during this reporting period.
- The underserved culturally diverse population has been reliant upon CAT to assist with emergency psychiatric evaluations. Almost 60% (260) of the 437 clients assessed during this period were culturally diverse (35% Hispanic, 7% Asian/ Pacific Islanders, 11% African American).

Program for Assertive Community Treatment (PACT)

Program Expenditure\$361,969

PACT's goal is to provide intensive outpatient services to mentally ill, disabled persons and thereby increase support systems and assistance needed to prevent their hospitalization and possible incarceration. TSR funds represented 49% of the total program budget.

Outcomes/Current Status:

- At the end of June 2011, 81 clients were enrolled in PACT. A total of 49 referrals were received during the fiscal year from AMHS clinics, hospitals and jail. With the ease of the modified referral process that was implemented in November 2009, the program was able to fill vacancies quickly and the individual caseloads had reached the maximum capacity at the end of the year. To accommodate new referrals, a waiting list is maintained as vacancies become available. Clients are on the waiting list for 3 weeks on average until they are assigned to a care coordinator.
- With the new direct admission criteria based on a minimum of 2 hospitalizations/incarcerations, clients require a lengthier engagement process into the participation in services. Clinicians are required to spend more time encouraging participation by developing rapport, providing extensive outreach and education about the intensive services, and overcoming treatment barriers such as active substance use. Despite the challenge of increased caseload size and decreased availability of doctor time due to one less one-half time psychiatrist, the PACT team maintained an average of 1.0 MD contacts per client per month, and 5.0 care coordinator contacts per month.
- For this fiscal year, the number of hospitalization days since enrollment into the treatment program decreased by 68% (from 7,432 to 2,363 days). The number of hospitalization incidents decreased by 35% (from 202 to 131). The number of incarceration days since enrollment into PACT decreased by 78% (from 2,365 to 512). The number of incarceration incidents since enrollment decreased by 34% (from 47 to 31). Eleven clients graduated to lower levels of care, and at the end of June 2011 there were approximately 9 clients scheduled to graduate in the next 6 months.

Access to Health Services for Persons with Disabilities

Program Expenditure\$135,415

The goal of this program is to improve access to health care services for persons with disabilities through outreach, education, counseling and advocacy. TSR funds represented 100% of the total program budget.

Outcomes/Current Status:

- Disability Rights Legal Center (DRLC) and Legal Aid Society of Orange County (LASOC) were the two contractors for this project during FY 2010-11. DRLC conducted 14 public educational presentations including 5 webinars reaching 206 persons, and 6 presentations reaching 126 healthcare professionals. LASOC conducted 17 public presentations reaching 269 persons and 13 presentations reaching 239 healthcare professionals.
- Both contractors provided assistance to individuals through one-on-one counseling and advocacy in either face-to-face or telephone hotline interactions (DLRC: 361 individuals; LASOC: 508 individuals) and by distributing educational materials (DLRC: 4,645 individuals; LASOC: 1,525 individuals).
- For the Stigma Elimination program DLRC provided 4 trainings to 466 participants through 14 separate presentations, while LASOC presented 14 programs at faith-based organizations, schools and businesses reaching 239 persons, and 9 presentations to High Priority Audiences reaching 295 participants.
- DLRC conducted 16 trainings regarding disability rights reaching 397 persons. Six task force meetings were conducted involving on average 13 participants monthly to develop, implement and evaluate specific strategies to improve existing health care services for persons with disabilities and to advocate for filling gaps in services.
- LASOC held four Family-to-Family classes and two Peer-to-Peer classes reaching 70 people on issues relating to persons with disabilities, where the disability arises from mental illness. There were nine on-going support groups, including one each in Spanish and Vietnamese with attendance averaging 60 participants per month.

Specialty Dental Care for Seniors and Persons with Disabilities

Program Expenditure\$63,702

The overall goal of this project is to make specialty dental services, including diagnostic, endodontic, oral and maxillofacial surgery, accessible to Seniors and Persons with Disabilities. TSR funds represented 100% of the total program budget.

Outcomes/Current Status:

- HCA and Share Ourselves (SOS) successfully negotiated an agreement for Specialty Dental Care Services for Seniors and Persons with Disabilities for FY 2010-11. Meaningful reporting criteria were collaboratively developed by HCA and SOS, and inclusion of the targeted reporting information into a single report was implemented.
- The program initially experienced some challenges of addressing their patient's fragile medical conditions. At the end of June 2011, specialty dental services were being provided at anticipated levels. A total of 84 seniors or persons with disabilities received services during this time frame. Funding for the specialty dental services is shared between patient contributions, Share Our Selves free clinic, and the County. The cost of providing the specialty dental services to the County during this period was \$63,702.

Developmental Disabilities Program

Program Expenditure\$30,591

The overall goal of this project is to conduct classes to train parents with a child (ages 6 months through 35 months) who is “at risk” for developmental/cognitive delays, with techniques to help their child be successful and ready for school. TSR funds represented 100% of the total program budget.

Outcomes/Current Status:

- The Education and Early Intervention program “Yes You Can,” was developed and became operational on October 1, 2010. The first class of the 12-class program was held on October 19. A total of 159 participants attended 49 classes that were offered during the reporting period October 2010 to June 2011. Scheduling the classes at a time convenient to all family members is a primary design component of the “Yes You Can” program. It is noteworthy that 60% of the families attending included the father as a participant of the class as well. Parental pre- and post-test surveys reflected an improvement of 6% on average in the knowledge about how to care for their “at-risk” child.

II. Tobacco Prevention & Control, Other Addiction Programs & Community Mental Health Services

Total Expenditure \$3,490,914*

**Expenditure information based on TSR claim as of June 30, 2011.*

Tobacco Prevention and Cessation Programs

Program Expenditure\$1,662,759

Tobacco Prevention and Cessation Projects is a multi-year, comprehensive program focusing on community based and school linked tobacco education and cessation programs. The overall goal of these projects is to reduce death and disability due to tobacco use and exposure to environmental tobacco smoke. Funding includes two projects: (1) Tobacco Cessation Projects and (2) Tobacco Prevention Projects. TSR funds represented 100% of the total program budget for both the projects.

Tobacco Cessation Projects

The goal of this project is to reduce the prevalence of tobacco use among youth and adults. For this project, Orange County cities were divided into three geographic regions: North, South and West/Central.

Outcomes/Current Status:

- Tobacco cessation services to adult tobacco users included individual or structured telephone counseling, 90-minute cessation counseling seminars, and a series of five 45-minute cessation classes. Nicotine patches were provided during the cessation seminars and classes. The percentage of adult participants reporting abstinence from tobacco 3 months after participating in a cessation service ranged from 41% to 47%. A pilot project conducted through community clinics provided 45 cessation class participants with medication to assist in quitting tobacco. More than half (55%) of the adults who used medication were tobacco-free at 30-days.
- Young adult tobacco users between the ages 18-24 years were provided with “quit kits” to assist them in quitting smoking, followed by a one-hour telephone cessation counseling session. 57% of participants were tobacco free 3 months after completing the service. Other tobacco cessation services to youth tobacco users included a series of five 45-minute cessation classes and a 60-minute seminar; the percentages of youth participants reporting abstinence from tobacco 3 months after participating in these cessation sessions were 62% and 70% respectively.

Tobacco Prevention Projects

The Prevention Projects this fiscal year included: Lowering Youth Prevalence of Tobacco; Reducing Tobacco Prevalence Disparities; and Lowering Youth Access to Tobacco. The first project focused on tobacco education and prevention of 11th grade students at the high schools in the cities of San Clemente and San Juan Capistrano. The focus of the second project was young adults in the age group 18-24 years, while the third project was focused on educating tobacco retailers in the targeted areas on existing tobacco laws, including violations related to tobacco sale to a minor.

Outcomes/Current Status:

- Prevention activities that focused on 11th grade students at selected high schools included: Two educational presentations for more than 200 parents on the impact of tobacco use; Thirty seven educational presentations on social norms reaching more than 1,200 students at the 3 high schools; Five campus-wide social norms and youth tobacco use artwork campaigns conducted at the high schools, with winning artwork displayed at 32 different school campus locations and other community locations. Campus-wide tobacco cessation awareness campaigns on high school campuses including 16 presentations on 1-866-New-Lung and free tobacco cessation services at the three high schools.
- Post-surveys of 11th graders conducted at the 3 high schools to measure the change in the tobacco use prevalence over the 3 years of the project showed a significant decrease at Capistrano Valley High School and San Clemente High School (7.5%). However, there was a 17% increase in prevalence at Serra Continuation High School from year 1. One of the reasons is that students do not participate in school consistently, therefore limiting their exposure to the program. Also, continuation school students have a higher overall prevalence rate throughout Orange County.

- Prevention activities geared toward 18-24 year old youth included: 24 tobacco prevention education/cessation presentations reaching more than 400 young adults; A 30-bus shelter ad media campaign throughout all 11 cities in the West/Central Region; An updated website to promote the 1-866-NEW-LUNG line and free cessation services; A video public service announcement (PSA) entitled “Broke From Tobacco” that demonstrated the harms and consequences of tobacco use for 18 – 24 year olds and also promoted the 1-866-NEW-LUNG line. Nearly 1,500 individuals in this age group and other community members who cater to or employ this population were reached via 16 community events and were provided tobacco prevention education and the free cessation services.
- Post-surveys of 18-24 year olds in 3 cities in the selected region were conducted to measure the percentage change within 3 years in tobacco use prevalence among this population. The survey results indicated a 14.2% decrease in prevalence.
- Merchants at more than 270 commercial tobacco retail locations were provided education on topics related to tobacco sales to minors, including State tobacco access laws, \$200 fine associated with the sale of tobacco to a minor, State and local exterior window signage laws and the social sources of tobacco awareness program. Pre- and post-surveys conducted at each training indicated increased compliance, specifically, 97% decrease in the number of tobacco retailers who would have sold tobacco to a minor, 46% increase in the number of retailers complying with window signage laws, 25% increase in the knowledge about existing tobacco laws.
- All merchants from Year 2 of the project maintained a 100% compliance rate with the “Stop Tobacco Access To Kids Enforcement” (STAKE) Act and the posting of the State tobacco retailer license. A total of 184 merchants out of the 274 compliance check surveys conducted reached a “5-star Merchant” status, which means compliance with all laws governing the sale and advertising of tobacco.

Substance Abuse Prevention

Community Based Substance Abuse Prevention

Program Expenditure\$193,737

The overall goal of this project is to reduce alcohol and drug abuse among youth and adults. The Community Based Substance Abuse Prevention projects include Responsible Beverage Service (RBS) training to persons involved in serving or selling alcoholic beverages; Alcohol Sensitive Information Planning Systems (ASIPS) Project; educating health professionals in the selected four cities on methods to reduce prescription and over-the-counter drug abuse; educating youth within selected cities to increase their awareness of the marketing strategies employed by the alcohol industry to promote alcohol use among youth; and a countywide impaired driving media campaign. TSR funds represented 30% of the total program budget for this project.

Responsible Beverage Service (RBS) Training

The goal of this project is to educate alcohol retail owners, managers and servers on responsible beverage serving (RBS) practices. RBS is a key prevention strategy that research has shown to be effective in reducing alcohol-related problems.

Outcomes/Current Status:

- The cities of Anaheim, Huntington Beach, Santa Ana and Orange were selected to receive responsible beverage service training, with the goal of training at least 150 persons involved in serving or selling alcoholic beverages within these cities. A total of 19 trainings were conducted during this fiscal year. Of the 205 alcohol servers, sellers and managers who received responsible beverage service training, 99% achieved a passing score on the post-training exam. The program was successful in fostering partnerships with the Orange County Restaurant Association, local law enforcement, local restaurant associations and with management of a outdoor shopping venue.

Alcohol Sensitive Information Planning Systems (ASIPS)

The purpose of the ASIPS program is to compile data on alcohol/drug involvement in police activities through partnerships with local law enforcement agencies. Analyses of these data serve to identify AOD-related community problems and provide information for planning local prevention efforts. Current ASIPS partners include the communities of Fullerton, Garden Grove, and Newport Beach.

Outcomes/Current Status:

- The contract for the ASIPS Project is off-cycle (Sept. 16, 2010 to Sept. 15, 2011), therefore the timetable for achieving project outcomes is adapted to the contract year, rather than the fiscal year. Community Tour reports for each community partner are prepared on a calendar-year basis. ASIPS Community Tour reports for CY 2009 were distributed to the three participating communities. Fullerton Police Department continues to utilize ASIPS data as an effective resource in monitoring operations at selected alcohol outlets, especially in the downtown area. At the end of June 2011, police data for CY 2010 were collected from each community partner and were being processed and analyzed for preparation of the three respective ASIPS Community Tour reports.

Educating Health Professionals In The Four Selected Cities On Methods To Reduce Prescription And Over-The-Counter Drug Abuse

The goal of this project is to increase knowledge of a minimum of 175 health professionals regarding methods of reducing prescription and over-the-counter drug-abuse. This project is focusing services in the cities of Fullerton, Orange, Newport Beach and Mission Viejo.

Outcomes/Current Status:

- During this fiscal year, educational services were provided to 210 health professionals in the cities of Fullerton, Orange, Newport Beach and Mission Viejo. Workshops took place at various locations including California State University, Fullerton, Children's Hospital of Orange County, Mission Hospital, and at the Newport Mesa Unified School District. The post survey analysis showed that 98% of the health professionals educated demonstrated increased knowledge of methods to reduce prescription and over-the-counter drug abuse.

Educating Youth Within Selected Cities On The Marketing Strategies Employed By The Alcohol Industry To Promote Alcohol Use Among Youth

The goal of this project is to increase youth awareness of marketing strategies employed by the alcohol industry to promote alcohol use among youth in the cities of Laguna Beach, Newport Beach, Dana Point and Anaheim.

Outcomes/Current Status:

- Educational services were provided to a total of 511 youth in the cities of Laguna Beach, Newport Beach, Dana Point and Anaheim. Eighty-four percent (84%) of participants reported an increased awareness of the alcohol industry's marketing strategies. These educational workshops resonated with the youth, with 63% stating a willingness to support and/or be involved in future efforts to reduce underage drinking.

Countywide impaired driving media campaign

The goal of this project is to develop an impaired driving media campaign for all of Orange County that will address the perception of being arrested while driving under the influence of alcohol and other drugs.

Outcomes/Current Status:

- The Alcohol & Drug Education & Prevention Team (ADEPT), together with several members of the Orange County Driving under the influence (DUI) Task Force, worked with a professional graphic/media design consultant to develop new messages for the countywide media campaign. The design of the media campaign looked at ways to merge messaging from the previous campaigns with the newly developed media materials. A media campaign distribution plan was developed which included key locations to feature this media, such as within local alcohol retail establishments, at high-visibility public venues and at large scale community events. Also as a part of the overall media campaign distribution plan, four video public service announcement (PSA) vignettes focusing on increasing the perceived risk of being arrested while driving impaired were created.

Substance Abuse Treatment

Perinatal Substance Abuse Treatment

Program Expenditure\$467,395

TSR partially funds a perinatal residential substance abuse services program for 20 pregnant or parenting women and up to 24 of their children, with the goal of increasing the number of women with children that can be served and improving the quality of life for their children. The Perinatal Residential Alcohol and Drug Abuse Services funding included two locations: Heritage House-North (HHN) and Heritage House-Costa Mesa (HHCM). TSR funds represented 34% of the total program budget for this project.

Outcomes/Current Status:

- One-hundred percent (100%) of the babies born (n=23) between the two locations during FY 2010-11 were drug-free. All 47 pregnant women (100%) served by the program between both locations received prenatal care. Depending on how high the risk level is, a minimum of one to two visits are required per pregnant client.
- A total of 128 clients were served between these two locations. At the end of June 2011, the combined retention rate at both locations was 64% (51/128 graduated and 31/128 still enrolled in treatment). More than half (53%, n = 51) of the 97 clients that were discharged during this period completed the treatment successfully.
- The program exceeded its goal of administering a CEST (Client Evaluation of Self and Treatment) survey at discharge to all discharged clients (100%) at both locations. The goal of administering a CESI (Client Self Evaluation at Intake) to more than 80% of clients at intake was also exceeded (HHN 88%, HHCM 84%). Compared with HCA norms, most clients at HHCM were above average, at discharge, in all of the psychosocial assessment subscales. Most HHN clients were above average compared to HCA norms in their peer and social support, but most HHN clients were below average compared to HCA norms in their readiness for treatment, participation in treatment and rapport with counselors.
- Smoking cessation classes were offered at both locations. The TUPP program distributed nicotine patches to help those who wished to quit smoking. Given that it is a significant challenge for those with substance use disorders to quit smoking cigarettes while concurrently giving up drugs, it is notable that more than half of the clients who attempted to quit smoking at each location successfully quit smoking.

Alcohol and Drug Treatment Expansion

Program Expenditure\$149,451

These funds were intended to expand treatment services focused on adult and juvenile clients who require residential treatment to reduce the county-wide incidence of substance abuse, as well as the likelihood of relapse. Phoenix House is the contractor for both Adult and Juvenile residential programs. TSR funds represented 9% of the total program budget for this project.

Outcomes/Current Status:

- Phoenix House served a total of 148 adults and 57 adolescents during this reporting period. The program was successful in retaining in treatment 61% of the adults served during this time with 59 clients completing the program and 31 still enrolled in treatment at the end of June 2011. Of the 117 adults discharged this year, 59 completed the program for a treatment completion rate of 50%. The retention rate for the juvenile program was 56% (16 graduated and 16 remained in treatment at the end of June 2011), and 39% (16 of 41) of the juvenile clients discharged during the fiscal year completed the treatment.
- More than half of the adult clients who completed a CEST (Client Evaluation of Self & Treatment) psycho-social survey at discharge scored above local norms on most of the measures; nearly 2 out of 3 juvenile clients completing a CEST were above average, at discharge, in their desire for help while half were above average in degree to which they engaged in treatment and their level of peer support in the program.
- Of the adults who completed both a CESI (Client Evaluation of Self at Intake) psycho-social assessment and a CEST surveys, a large proportion showed improvement or maintained their desire for help and treatment readiness during the course of treatment, while 89% of the juvenile clients who completed both a CESI and a CEST surveys showed improvement in motivation for recovery.
- During this fiscal year, 14 smoking cessation classes were offered at the adult facility. All 120 adults who attended cessation classes smoked and 29% of those were trying to quit. Of those who were attempting to quit, 17% successfully quit smoking while in the program.

Outpatient Adolescent Substance Abuse Treatment Services

Program Expenditure\$264,753

The overall goal of this project is to respond to the existing need for youth-specific treatment for abuse of Alcohol and Other Drugs (AOD) through a dedicated funding source. The target population for this program is the self-referred and Probation-referred adolescent clients with substance abuse problems. This is a combined funding for two locations, Alcohol and Drug Abuse Services (ADAS) clinics at Anaheim and Westminster. TSR funds represented 100% of the total budget.

Outcomes/Current Status:

- This fiscal year in addition to Anaheim and Westminster locations, ADAS implemented Adolescent outpatient programs in two more of their other existing AOD programs - in Santa Ana and Aliso Viejo. A total of 209 clients were served overall and 836 individual treatment sessions were offered at these locations. The program at the Anaheim clinic had an outstanding “show” rate of 80% (173 out of 216 sessions) at the individual treatment sessions with 50% of clients attending the first 4 sessions. Programs at the Aliso Viejo and Santa Ana clinics had a late start and data for these two locations covered only the second half of the fiscal year. Overall, 38% of clients attended the first 4 treatment sessions and 73% of all individual treatment sessions were with “show.”
- The average length of stay at the Westminster clinic was 95 days. The average length of stay at the Aliso Viejo clinic where the program started in November was 80 days. The Santa Ana clinic where the program was not in full operation until late December had an average length of stay of 81 days. The length of stay for most clients at the Anaheim clinic, which outperformed the rest of the clinics with an outstanding “show” rate, was only 65 days. This may be an outcome of one of the challenges faced by the program. A majority of the referral resources will allow these adolescent clients to actually cut down on attendance or stop attending altogether for testing clean on their drug test.

Medical-Psychiatric Beds for Acutely Mentally Ill

Program Expenditure\$752,819

This program has made it possible to substantially improve the overall quality of care provided to indigent consumers with psychiatric and a co-occurring medical condition, and allow the opportunity for many Orange County hospitals to receive reimbursement for the care they would otherwise deliver without remuneration. TSR funds represented 19% of the total budget.

Outcomes/Current Status:

- College Hospital of Costa Mesa, and Western Medical Center of Anaheim were the two Orange County hospitals contracted with HCA/BHS for FY 2010-11 to provide acute medical-psychiatric beds for the uninsured indigent population.
- There continues to be a significant and on-going need for acute psychiatric inpatient hospital services for indigent uninsured persons in the community with co-morbid medical conditions. The entire TSR portion (\$752,819) of the contract was expended during the first half of the fiscal year and purchased 1,197 medical psychiatric bed days. An additional 5,059 bed days were purchased during the fiscal year with monies from the Adult Mental Health Inpatient contract.
- HCA/BHS successfully ensured that TSR funds were used for their intended purpose. More than half (57%) of the 949 admissions under the contract between July 1, 2010 and June 30, 2011, required concurrent medical evaluation and/or medical treatment, and 49% had a diagnosis of a persistent, co-occurring substance related disorder.

- For uninsured indigent consumers with multiple concerns, including co-occurring chronic medical problems, substance abuse disorders, and homelessness, who leave acute psychiatric hospital services to return to independent living in the community, linkage to outpatient services is a crucial element in ensuring continuity of care. Of the 949 TSR-funded admissions, 96% of the individuals were discharged to the community. Of those, 86% received a referral either to AMH outpatient services, alcohol and drug abuse services or private outpatient clinics; 8% were discharged to locations outside of Orange County with “Out of County” referrals made. Only 2% of those who were discharged to the community did not have a documented linkage to aftercare.

III. Community Clinics

Total Expenditure \$5,663,917*

**Expenditure information based on TSR claim as of June 30, 2011*

This allocation helped maintain the enhanced healthcare services provided by community clinics, to improve access to primary services. Based on a policy decision adopted by the Board of Supervisors, HCA moved from reimbursing for program costs to a Fee for Service methodology. As a result, the contracts only allowed reimbursement for Direct Medical, Dental, and Mental Health services. FY 2010-11 is the second year that the community clinics are reporting under the fee for service model and the first year the County has directly performed administrative services.

Outcomes/Current Status:

- For FY 2010-11, the clinics exceeded their goals in all service areas. The breakdown of visits through June 2011 included 90,625 medical, 28,150 dental, and 5,828 mental health visits for a grand total of 124,603. Details of services provided by individual clinics are included in Appendix B.
- HCA committed to providing funding to three community clinics in FY 2009-10 (VNCOC Asian Health Center and Camino Health Center and Sierra Health Center). Due to the complexity of the application processing for an FQHC designation, Camino Health Center’s agreement was extended into FY 2010-11 to ensure the application was completed. There was no additional funding associated with the extension of time to complete the application. HCA also decided to contract the funding for VNCOC Asian Health Center beginning July 1, 2010. Both Camino Clinic and VNCOC submitted their application prior to December 31, 2010. VNCOC was awarded FQHC status.

- During FY 2010-11, the Coalition's quality improvement activities included: design and implementation of the Healthcare Effectiveness Data and Information Set (HEDIS) of 4 measures; expansion of the Patient Satisfaction Survey tool to include community health centers for standardized data collection; collaboration with Medical Services Initiative (MSI) and CalOptima to train staff in the use of the recognition tool for assessment of clinics readiness to obtain National Committee for Quality Assurance (NCQA) medical home status; developing Pay for Performance (P4P) program for all member clinics using HEDIS results and developing guidelines for Meaningful Use of Electronic Health Records.
- The Coalition receives monthly operational reports from the clinics related to the use of data to improve patient flow and identify need for access. Other activities toward improving access included development of electronic database to streamline referrals for Specialist services; recruiting medical specialists and working with community clinics to integrate specialty care coordination and planning.

TSR Mobile Clinic Services for the Homeless

Total Expenditure \$90,381

This allocation complements Contractor's existing mobile clinic services to provide mobile clinic services to homeless. The TSR Mobile Clinic Services Agreement is for \$100,000 and is for the period March 29, 2010 through March 28, 2011.

Outcomes/Current Status:

- The contractor Hurtt Family Clinics provided a total of 1,711 mobile visits to homeless patients during the contract year (March 2010 - March 2011) expending nearly 100% of the budget. Of those, 1,373 visits were provided between July 2010 and March 2011, for a total expenditure of \$90,381 during this fiscal year. The services were provided at multiple locations including, but not limited to the Brea Community Center, Loaves and Fishes, El Dorado Motel, Valencia Motel, Neighborhood Church, Highland Church, and the Fullerton and Santa Ana Armories.

IV. Emergency Room Physicians & On-Call Physician Specialists

Total Expenditure \$5,973,629

This allocation provides funding to compensate emergency room physicians and emergency room on-call physician specialists for services for nonpaying patients, contributing to the continued availability of these services. The Emergency Medical Services Fund (EMSF) program continues to have a positive impact in Orange County as a result of the infusion of TSR monies as directed by Measure H.

Outcomes/Current Status:

- Funds have helped augment emergency physician and on-call specialist reimbursements and allowed continued access to healthcare without interruption.
- In FY 2010-11 more than 126,000 claims for uncompensated care to Orange County emergency rooms were processed.
- While emergency departments in the County continue to face significant overcrowding and uncompensated care issues, the EMSF program is assisting in keeping them open and ensuring that physicians receive some payment for the services they provide. Without TSR funds, the emergency room crisis in Orange County would be a much bigger problem.

V. Hospitals Providing Charity Care

Total Expenditure \$1,558,338

Orange County hospitals that maintain basic or comprehensive emergency medical services (or trauma centers) for their communities received TSR support, year-to-date, in the amount of \$1,558,338 in FY 2010-11. Additional payments will be made up to the total amount of TSR funds available. This amount was distributed to hospitals for the uncompensated care burden borne by each local hospital. The largest distribution of these funds, year-to-date, approximately 12%, was made to UCI Medical Center, Orange County's largest provider of uncompensated hospital care.

Outcomes/Current Status:

- Orange County hospitals serving as paramedic receiving centers and operating at least basic emergency services provided in excess of \$255,673,369 in charity care as well as \$318,220,146 in bad debts for a total of \$573,893,515 in uncompensated hospital care costs for the four quarters ending September 30, 2010.*

**Based on data from Office of Statewide Health Planning and Development (OSHPD)*

Appendix A

Contractors for TSR-Funded Programs, Sections I and II

TSR Program	Contractor/ Service Provider Name	FY 2010-11 Total Funding Amount	FY 2010-11 TSR Funding Level	Subcon- tractor Name	Sub- contractor Service Type	FY 2010-11 Subcon- tract Total Amount
Health Care Services for Seniors & Disabled						
Access to Health Services for Persons with Disabilities	Legal Aid Society of Orange County	\$95,006	\$95,006	National Alliance on Mental Illness, Orange County	Stigma Elimination Program	\$24,345
Access to Health Services for Persons with Disabilities	A. Milton Miller Memorial Fund, dba Disability Rights Legal Center	\$62,007	\$62,007	N/A	N/A	N/A
Developmental Disabilities Program	Family Support Network	\$50,000	\$50,000	Kim Smith, Kathy Goodspeed, and Gina Ramshaw	Classroom teachers and Rotating Specialists	\$36,320
Door-to-Door Community Program Targeting Latino Elders	Latino Center for Prevention and Action in Health and Welfare dba Latino Health Access	\$102,406	\$102,406	N/A	N/A	N/A
In-home Mental Health Services for Aging	College Community Services	\$164,922	\$96,866	N/A	N/A	N/A
In-home Mental Health Services for Aging	Pacific Clinics	\$98,000	\$98,000	N/A	N/A	N/A
Mental Health Program for Disabled	Royale Health Care Center – Mission Viejo	\$6,971,146	\$1,307,439	N/A	N/A	N/A
Senior Health Outreach and Prevention Program Services (SHOPP)	Community SeniorServ, Inc.	\$40,000	\$40,000	N/A	N/A	N/A
Senior Health Outreach and Prevention Program Services (SHOPP)	Council on Aging of Orange County	\$40,000	\$40,000	N/A	N/A	N/A
Senior Health Outreach and Prevention Program Services (SHOPP)	Age Well Senior Services (formerly know as South County Senior Services)	\$40,000	\$40,000	N/A	N/A	N/A

Appendix A (cont.)

TSR Program	Contractor/ Service Provider Name	FY 2010-11 Total Funding Amount	FY 2010-11 TSR Funding Level	Subcon- tractor Name	Sub- contractor Service Type	FY 2010-11 Subcon- tract Total Amount
Senior Non-Emergency Transportation Program (SNEMT)	St. Anselm's Cross-Cultural Community Center, Inc. (Area 1 – North County)	\$862,910	\$650,933	N/A	N/A	N/A
Senior Non-Emergency Transportation Program (SNEMT)	Age Well Senior Services, Inc. (Area 2 – South County)	\$845,701	\$616,225	N/A	N/A	N/A
Senior Non-Emergency Transportation Program (SNEMT)	Abrazar, Inc. (Area 3 – Central/West)	\$1,172,637	\$862,162	N/A	N/A	N/A
Transitional Community Living Program (WATRC)	Extended Care Hospital of Westminster	\$1,423,129	\$305,455	N/A	N/A	N/A
Tobacco Prevention & Control, Other Addiction Programs & Community Mental Health Services						
Community Based Substance Abuse Prevention & Treatment – South Region	National Council on Alcoholism and Drug Dependence – Orange County	\$388,675	\$50,000	Assessment and Associates International	Professional Evaluation Services	\$1,560
Community Based Substance Abuse Prevention & Treatment – North and Central Regions	Community Service Programs, Inc.	\$777,350	\$100,000	N/A	N/A	N/A
Med-Psych Beds for Indigents	College Hospital and Western Medical Center	\$5,139,393	\$752,819	N/A	N/A	N/A
Tobacco Prevention and Cessation Projects – Prevention Services	America On Track DBA Orange County on Track	\$277,000	\$277,000	N/A	N/A	N/A
Tobacco Prevention and Cessation Projects – Prevention Services	Community Service Programs, Inc.	\$277,000	\$277,000	N/A	N/A	N/A
Tobacco Prevention and Cessation Projects – Prevention Services	National Council on Alcoholism and Drug Dependence, Orange County	\$277,000	\$277,000	N/A	N/A	N/A
Tobacco Prevention and Cessation Projects – Cessation Services	National Council on Alcoholism and Drug Dependence, Orange County	\$177,000	\$177,000	N/A	N/A	N/A

Appendix A (cont.)

TSR Program	Contractor/ Service Provider Name	FY 2010-11 Total Funding Amount	FY 2010-11 TSR Funding Level	Subcon- tractor Name	Sub- contractor Service Type	FY 2010-11 Subcon- tract Total Amount
Tobacco Preven- tion and Cessation Projects – Cessation Providers	Anaheim Memorial Medical Center	\$177,000	\$177,000	N/A	N/A	N/A
Tobacco Preven- tion and Cessation Projects – Cessation Providers	Nhan Hoa Comprehensive Healthcare Clinic	\$177,000	\$177,000	N/A	N/A	N/A
Perinatal Residen- tial Alcohol & Drug Abuse Services	Heritage House North	\$1,384,917	\$300,000	N/A	N/A	N/A
Expansion of Contracted Resi- dential Alcohol and Drug Treatment Services – Adults	Phoenix House	\$437,310	\$64,136	Debra Poulalion, M.A.	Recovery Counseling	\$13,920
Expansion of Contracted Residential Alcohol and Drug Treat- ment Services – Adolescents	Phoenix House	\$937,317	\$70,061	1) Stephen Winston, Ph.D and 2) Jill Tait Machany, RD	1) Psycho- logical evaluation services and 2) dietician consultant services respectively	1) \$14,561 and 2) \$7,850 for a total of \$22,411

Appendix B
Contracted Community Clinics, Section III
Services Provided in FY 2010 – 11

Clinic	Funding Allocated	Type of Service	Services	Target Population	Number of Visits
AltaMed Health Services, Inc.	\$269,311	Medical	Primary Medical Care Services	Adults & Adolescents	5,056
	\$-	Dental	Dental Care Services	All Patients	0
Birth Choice Pregnancy Centers, Inc.	\$162,926	Medical	Medical Care Services	Teens and Adults	2,279
Camino Health Center	\$258,006	Medical	Primary Medical Care Services	All Patients	6,415
Central City Community Health Center	\$178,510	Medical	Primary Medical Care Services	Adults	2,329
	\$22,410	Dental	Dental Care Services	Adults	420
	\$9,520	Mental Health	Mental Health Services	Adults	248
Children's Hospital of Orange County	\$265,966	Medical	Primary Medical Care Services	Children and Teens	2,677
Friends of Children Health Center	\$178,866	Medical	Primary Medical Care Services	Children	2,533
	\$45,937	Dental	Dental Care Services	Children	1,239
Healthy Smiles for Kids of Orange County	\$206,766	Dental	Dental Care Services	Children	3,232
Hurtt Family Health Center	\$242,544	Medical	Primary Medical Care Services	All Patients	5,293
	\$5,917	Dental	Dental Care Services	All Patients	1,933
Laguna Beach Community Clinic	\$229,709	Medical	Medical Care Services	Adults	4,838
Lestonnac Free Clinic	\$288,007	Medical	Medical Care Services	All Patients	15,586
	\$-	Dental	Dental Care Services	Children and Adults	2,188
	\$-	Mental Health	Mental Health Services	Adults	524
Nhan Hoa Comprehensive Healthcare Clinic	\$232,821	Medical	Medical Care Services	All Patients	4,805
	\$52,053	Dental	Dental Care Services	All Patients	3,255

Appendix B (cont.)

Clinic	Funding Allocated	Type of Service	Services	Target Population	Number of Visits
North Orange County Regional Health Foundation	\$75,000	Medical	Primary Medical Care Services	Adults	1,334
Share Our Selves Free Clinic	\$236,544	Medical	Primary Medical Care Services	All Patients	11,720
	\$157,444	Dental	Dental Care Services	Adults	5,584
Sierra Health Center	\$191,187	Medical	Primary Medical Care Services	Adults	2,890
St. Joseph – La Amistad	\$109,000	Dental	Dental Care Services	Adults	2,681
St. Joseph – Puente a la Salud	\$200,721	Medical	Primary Medical Care Services	Agricultural Workers	2,732
St. Jude	\$169,260	Medical	Primary Medical Care Services	Children and Adults	7,367
	\$84,001	Dental	Dental Care Services	Children and Adults	1,560
UCI Family Health Center – Anaheim & Santa Ana	\$391,624	Medical	Medical Care Services	All Patients	9,829
	\$35,000	Dental	Dental Care Services	All Patients	660
The Gary Center	\$243,422	Mental Health	Mental Health Services	Children, Youths, & Adults	5,056
	\$152,070	Dental	Dental Care Services	Children and Adults	2,564
VNCOC – Asian Health Center	\$142,800	Medical	Medical Care Services	All Patients	2,942
	\$54,036	Dental	Dental Care Services	All Patients	2,834
Total	\$4,891,378				124,603

