

Agenda Report

TO: PASADENA CITY COUNCIL DATE: January 29, 2007

FROM: CYNTHIA J. KURTZ, CITY MANAGER

SUBJECT: ADOPTION OF THE MAP COMMUNITY HEALTH ACTION PLAN

RECOMMENDATIONS:

It is recommended that the City Council take the following actions:

- 1) Approve the draft MAP Community Health Action Plan (Attachment A).
- 2) Approve the implementation of the initial year of the MAP Community Health Action Plan, and direct staff to investigate potential financing to implement strategies and support the next four years of implementation, evaluation, planning and assessment.

EXECUTIVE SUMMARY

Based on a national health improvement initiative implemented by nine leading cities and counties, the Pasadena area is the first community in Southern California to take the lead in implementing this powerful, community-driven approach to address quality of life and health issues. Called the *MAP Campaign* to underscore the need for mapping or charting a shared course of direction, an important belief of *MAP* is that genuine quality of life and good health can only be achieved by all when its community members are actively engaged in identifying and reaching common health goals. To this end, the *MAP Campaign* has already brought together residents, from youth to seniors, as well as businesses, schools, healthcare providers, faith institutions, non-profit organizations, government officials and staff, to address shared health priorities that will create greater health, wellness and quality of life in the Pasadena area. During the initial launch of the *MAP Campaign* and in the development of the MAP Community Health Action Plan document, over 4,500 community members were reached, 11 health priorities were identified, and action plans to address the top four community health issues were developed.

R0881

MEETING OF 1/29/07

AGENDA ITEM NO. 7.A.3.

BACKGROUND:

The *MAP Campaign* is a community-wide strategic planning initiative to create positive change in community health.¹ In 2004, spearheaded by the Pasadena Public Health Department and guided by a core group of community leaders dedicated to making real changes in the greater Pasadena area, the *MAP Campaign* is committed to helping a community identify important community health issues, developing a plan of specific action steps towards addressing them, and securing needed resources.

Several recent community health improvement and planning efforts set the framework for the development of the *MAP Campaign*. In the 1990's the City of Pasadena was a founding member of the international Healthy Cities movement that sought to assess and promote health from a quality of life perspective, encompassing physical, mental, social, spiritual, economic and environmental aspects of health. As a result, the *Pasadena/Altadena Quality of Life Index*, first written in 1992, was one of the first of its kind in the nation—a community "report card" that measured the health of the city, serving as a resource and catalyst for people to transform quality of life areas about which they care deeply. In 1996, the California Wellness Foundation selected Pasadena as one of only nine communities funded to foster successful models of collaboration, creating the Pasadena/Altadena Health Partnership. In 2000, the California Endowment funded the Partnership for the Public's Health initiative to create further partnerships among the Public Health Department and local neighborhoods.

The MAP Campaign and the MAP Community Health Action Plan build upon successes and lessons learned from these past efforts in order to plan out achievable community health improvement objectives that are strongly participatory in nature. The MAP Campaign stands out because of its inclusivity and comprehensive assessment approach. The MAP Campaign reached over 4,500 individuals through information gathering, community conversations about community health, strategic planning and implementation. Community members expressed their concerns and needs as well as became actively involved in positive changes. As a result of this community-wide involvement, 11 health priorities were identified, and MAP workgroups were formed to target the top four priority areas and develop specific strategies or action plans.

IMPLEMENTATION OF MAP COMMUNITY HEALTH ACTION PLAN

According to the *MAP Campaign's* assessment findings, 11 health priorities were identified overall. The first year of implementation of the MAP Community Health Action Plan will focus on the community's top four health priorities: 1) to ensure access to quality healthcare services, 2) to promote community wellness and healthy lifestyles, 3) to develop the public health and healthcare workforce to meet the growing shortage, and 4) to promote community, family and youth engagement in civic life and community activities.

¹ The MAP Campaign is based on Mobilizing for Action through Planning and Partnerships, a community health improvement model developed by the Centers for Disease Control and Prevention in collaboration with the National Association for City and County Health Officials.

MAP Workgroups have been formed to address the four health priorities in Pasadena and are implementing Year One action plans as fully described in pp. 24-53 of Attachment A.

- Access to Services Workgroup. The long-term goal is to ensure greater access to healthcare and social services by improving relationships between providers and by raising public awareness of existing services. After successfully providing data and justification that helped secure grant support and launch the new Pasadena Healthcare Link, a 24/7 nurse advice and referral line, this workgroup is now working 1) to provide recommendations for development of an urgent care center for the greater Pasadena area; 2) to improve public awareness about accessing community health and social services; and 3) to expand the reach of promotoras de salud, or health promoters, who educate, support and refer patients outside of a clinical setting. See pp. 27-28 of Attachment A for details.
- Community Wellness & Healthy Lifestyles Workgroup. The long-term goal is to support and sustain an engaging, thriving community culture that integrates health and wellness. Their immediate objectives are 1) to spread awareness about the need to improve personal health status and how to improve personal and community health; 2) to increase community engagement from businesses, families and youth who take part in MAP wellness activities; and 3) to increase community members'—including families and youth—access to public health and healthcare information and services by increasing awareness and visibility of available services. See p. 37 of Attachment A for details.
- Public Health & Healthcare Workforce Development Workgroup. The long-term goal is to increase awareness of both healthcare and public health career opportunities among local middle, high school and alternative school students and among their families and across the greater Pasadena community. In its first year, the workgroup plans: 1) to increase the number of local middle and high school students who are aware of jobs, opportunities, health education and training pathways which lead to jobs in the healthcare and public health fields; 2) to increase access to health education and training opportunities for local students; and 3) to improve the level of coordination and collaboration between local institutions that prepare individuals for careers in healthcare and public health. See pp. 44-46 of Attachment A for details.
- Community, Family & Youth Engagement Workgroup. The workgroup's goal is to increase community member skills and capacities to contribute and be involved in their community, resulting in increased community resident engagement in civic activities and issues. The workgroup's three objectives for the first year are: 1) to ensure active and meaningful youth participation in the 2006 Pasadena Neighborhood Summit (accomplished); 2) to increase opportunities and support for more active youth, family and community member engagement and participation; and 3) to create a framework for youth-focused community groups with common goals to work together for richer and more sustainable outcomes. Please see pp. 51-53 of Attachment A for details.

In addition to these four initial workgroups, community feedback strongly indicated a need to create more direct funding resources for public health and to gather local Pasadena-specific health data in order to assess health status, measure progress and assign funding to the greatest public health needs.

Adoption of the MAP Community Health Action Plan

The proposed recommendations support the City's emphasis on quality of life and community health with the goal of making the greater Pasadena area a healthier, thriving community that values and promotes overall wellness. Adoption of the MAP Community Health Action Plan and Year One implementation will formally establish a model for a continuous cycle of participatory assessment, planning, implementation and In this model, responsibility for the public's health rests jointly among conventional components of the local public health system (e.g., local public health departments, hospitals, clinics, physicians, pharmacies, other health service providers, community nonprofits and social service agencies) and more non-traditional facets (area advocates and activists, businesses and employers, faith institutions, community leaders, individuals and neighbors). Adoption will formally recognize a paradigm shift and will bring increased visibility and recognition to a self-perpetuating approach for community health improvement, where community health planning is inclusive, comprehensive and proactive. Outcomes from the MAP Campaign process have already proven invaluable in grant-seeking and health planning and have supported a more collaborative atmosphere. We will focus on ways to drive reliable area-specific data for Pasadena as a next step in our assessment process.

FISCAL IMPACT:

Approval of the MAP Community Health Action Plan has no fiscal impact. Approval of staff support to investigate potential financing to implement strategies and support the next four years of implementation, evaluation, planning and assessment will have no fiscal impact through June 2007. Any future appropriations needed to implement the MAP Community Health Action Plan will come to the City Council as separate budget requests.

Respectfully Submitted

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