



PUBLIC NOTICE

Board of Directors

**STRATEGIC DIRECTION OVERSIGHT
COMMITTEE**

1819 Trousdale Dr. (Classroom)

<https://us02web.zoom.us/j/86179300431>

Meeting ID: 861 7930 0431

One tap mobile

+12532158782/+12678310333

April 3, 2023

6:00-7:30 PM

A G E N D A

1. Call to Order & Roll Call- Chair Cappel
2. Approval of Minutes: SDOC January, 4 2023
3. Strategic Plan Status: Eric Ryan, MissionMet and CED Wasson
Possible action item:
 - a. Review of activities to date
 - b. PHCD Demographic and Health related data
 - c. Discussion questions & Next Steps
4. Adjournment

Tab A

Pg. 1-3

Tab B

Pg. 4-36

**Next Strategic Direction Oversight Committee meeting:
Wednesday, May 3, 2023**

A



**JOINT MEETING OF THE
BOARD of DIRECTOR'S**

**STRATEGIC DIRECTION OVERSIGHT
& FINANCE COMMITTEES
January 4, 2023**

Meeting Minutes

1. **CALL TO ORDER:** Chair Zell called the meeting to order at 5:00 PM and welcomed members of the Finance Committee.
2. **ROLL CALL:** SDOC members present were Cappel, Aubry, Bandrapalli, Jackson, Johnson. Absent: Pagliaro, Quigg, Emmott, Gutierrez, and McDevitt. Finance members present were Zell, Sanchez, Seto, Fama, and Yee. Absent: Sun
3. **APPROVAL OF MINUTES:** SDOC November 2, 2022
 Motion to approve as written by Aubry; seconded by Jackson
 Roll Call Vote: Ayes –Noes-0; Abstain-0
 Motion Passed:5/0/0
4. **ACTIVE WELLNESS & ACTIVATE PROGRAMS:** CEO Fama & CEO Jill Kinney, **Active Wellness & Activate Programs:** CEO Fama referenced her memo sent out in the meeting materials that summarized PHCD's work to date in exploring Active Wellness as a potential service partner for the District's PWC Hub of Community benefit services. Ms. Kinney is interested in using 15,000 square feet of the Hub for those programs. This joint meeting is intended to provide an opportunity for both Committee's members to get a better understanding of her programs and get answers to any questions they may have. She then turned the floor over to CEO Kinney,

CEO Kinney gave an overview on the history of her organization, examples of business partners such as Provident Health in Oregon and Rossmoor in Walnut Creek, the philosophy and goals of her programs, and her vision for what could be provided in the District's HUB. She then walked through a PowerPoint presentation on her assessment of the demographics and market potential surrounding the PWC Development and the variety of services she could provide in 15,000 square feet in the Hub that would address the Board's vision for the PWC. In addition to gym facilities for all ages, she is proposing her Activate Program would be a unique asset to the Hub and she is exploring the feasibility of putting in a therapy pool as well. She described the **Activate Model**

as a personalized program for people who have chronic conditions that can be improved with exercise, diet, and other lifestyle changes. When a member joins, they are assigned a personal health coach, a personal registered dietician, and a specialty personal trainer. A program is developed for them, and they work closely with this support team for a minimum of 90 days. Members come to Activate for 3-4 supervised workouts each week in a 30-minute custom circuit called EGym. Data on their workouts is collected and driven by AI that evolves these workouts to a target level performance defined by team. They also meet weekly with their health coach and registered dietician on progressive support for diet and behavior changes.

Q&A with CEO Kinney:

What is the capacity for the Hub being considered? A 15,000-sf model with 2,500-3,000 members.

Is Dr. Aubrey familiar with programs like Activate? Dr. Aubrey was but from his experience a physician would make a referral to a facility like this but not be actively involved.

What level of involvement do primary care doctors have with this program? One of the core components of the Activate model is the physician is always in charge. Activate provides subclinical services which involve a support staff of registered dietitians, certified health coaches and specialty trainers who take the physician's objective for a patient and develop a program which is then reviewed and signed off by the physician. The technology that has been incorporated is also a key component as it allows the Activate equipment's data to be embedded in the Electronic Health Record which directly updates the physician on the patient's progress.

How would PHCD's obligation to make Hub services accessible to all PHCD residents be addressed with the Active Wellness programs proposed? This would be done by having a pricing structure that allows for subsidies often provided by community centers and non-profit healthcare organizations.

Would proposed programs be compatible with a therapy pool? Yes, the warm water therapy pool is included in the model and part of the Active Wellness operations.

In regard to CEO Kinney's involvement with these types of facilities for over two decades, has she published any findings on the impact the wellness centers have had on the community? Not yet, but definitely in the future plans.

What would the cost be to move forward and bring the Active Wellness/Activate programs into the Hub? This would include putting together a pro forma with total capital requirements and a 5-year operating pro forma showing the forecasted revenues, operating expense to a break even, profitability and return on investment.

Does Active Wellness program have any focus around mental health? Not yet, but they are currently looking into if this component could be incorporated.

Would the therapy pool have a ramp for patients that use wheelchairs? There is no detail on the design as of yet, but therapy pools usually incorporate a ramp, accessibility, and temperature suitable for all patients.

Comments:

- PHCD should consider a sub-committee with local physicians to maximize the medical component of the Hub.
- The Sutter Research Institute could be reached out to assist with this committee along with a couple of other practicing physicians referring patients.
- PHCD should consider an elevator platform for the therapy pool as it would take up less space than a ramp.

What are the next steps? CEO Kinney needs PHCD's consensus that the program they have outlined is in fact the direction the Board wants to go. After everyone is on the same page in terms of vision then Active Wellness would move forward in developing a pro forma.

Chair Cappel asked if there were any other comments or questions. Hearing none, he thanked CEO Kinney for her presentation and answers.

5. PROGRESS REPORT ON PWC – HUB COMMUNITY SERVICES RESEARCH:

Consultant Alexis Denton summarized progress to date:

- Achieved a good handle on space requirements, big picture goals and needs.
- Affirmed after considering all feedback that the concept is both innovative and sound.
- Working to develop process moving forward to operationalize the Hub.
- Discussions ongoing with potential key partners - Eskaton, Avenidas, Active Wellness, Pearsuite.
- Learning from the Square at the Jewish Home- Daniel Ruth as expert contributor.

Next Steps

- Determine next steps with Active Wellness partnership.
- Decide approach on timing to move forward to operationalize the Hub.
- Develop executive summary of decisions, assumptions, and approach to-date.

Dr. Aubrey asked if the CEO transition would have any effect on the timeline. **Ms. Denton** answered that the timeline has not been established yet. She and CEO Fama are working on a plan for the next phase that will bring in experts who have already been interviewed and engaged in the work to date to work with her to mitigate that transition. **Director Zell**: commended **CEO Fama** on the team she has assembled on the project and thank **Ms. Denton** for her presentation.

Chair Cappel asked if there were any other comments or questions. None were offered.

6. STRATEGIC INITIATIVES UPDATES:

CEO Fama reported there have been two vaccination clinics since the SDOC's last meeting at which more than 180 vaccinations were given. The District will be partnering with Safeway to do another vaccination event at the Millbrae Senior Resource Fair on January 20th and on January 29th at the Millbrae Lunar New Year Festival. **CEO Fama** also update the Board on the progress of the RIP Medical Debt Relief Program and after partnering with the CFO of the San Mateo Medical Center over 14,400 residents will be receiving medical debt relief.

6. Adjournment

B



DATE: March 31, 2023

TO: Strategic Direction Oversight Committee

FROM: Ann Wasson, CED

SUBJECT: **Strategic Direction Plan**

The power point and slides that follow provide background information on our strategic planning process to date. Eric Ryan will be joining us on Monday evening to present and discuss the proposed plan.

The slides:

We start with an overview of District demographics which show very diverse ethnicities and ages. The next slides highlights the areas in the District – ZIP codes 94401 and 94066 - with the most need as measured by the Healthy Places Index put together by the Public Health Alliance.

The next slides show the geographic areas with the greatest percentage of families living below the poverty line and students receiving free and reduced lunch. Not surprisingly, wealth disparities often translate into health disparities.

Drilling down, we can see opportunities for preventive measure to improve overall health, particularly in terms of physical activity. Likewise, there are disparities in mental health which also represent opportunities for us to improve outcomes.

PHCD Strategic Plan Discussion with Strategic Direction Oversight Committee



April 3, 2023

Key Meeting Outcomes

The Strategic Directions Committee will leave this meeting...

- ...with a good overall understanding of the planning process thus far, the draft plan framework, and how the plan will be tracked over time.
- ...having provided feedback regarding the draft plan.

Agenda Items

- **Eric will walk the committee through the slides and table of focus areas/goals**
- **Discussion**
- **Clarify next steps**

Assessment Summary

The Assessment Process

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- 15 interviews with board, staff, and key stakeholders since November
- Review of over two dozen key documents and surveys, including the strategic information that Ann compiled previously
- Numerous discussions with staff/board/planning committee
- Board retreat on March 3 and staff review on March 27
- Staff leadership conversations, especially with Cheryl and Ann

Assessment Summary

Organizational Excellence and Impact

- PHCD is a financially secure organization and appears to be creating a very positive impact on the health and wellness of the district's residents.
- With a larger staff and high impact projects on the horizon, the organization can further expand and strengthen its work.

Covid

Covid both provided an opportunity to deeply serve the community but was also a distraction to some of the ongoing programmatic initiatives.

Staffing

- Staff interviewed appear to be highly committed to the work.
- Our interviewees agreed that Cheryl and Ann are doing excellent work, both in conducting the work and in establishing positive community relationships.

Assessment Summary (cont.)

Impact

PHCD was highly effective with its response to Covid through vaccinations, etc. The organization should remain nimble but should also maintain a focus on long-term community resilience. The numbers served remain stable (Fitness Center) or are on the rise (Sonrisas), and based on Q4 reports there is a high satisfaction rate (over 90%) at Trousdale among employees, residents, and families.

Use of Data

- It is somewhat unclear how health data is used for decision-making and how success is measured and tracked.
- "I am not sure how the district gets and uses data."

Assessment Summary (cont.)

Programs

- Looking forward, PHCD will benefit from a clarified set of programs, clear metrics for the success of each program, and action plans/reporting to ensure success. “They need to conduct careful evaluation to find things that others can't or won't do.”
- Four programmatic areas seemed like priorities – Seniors, Mental Health, Dental Health, and Physical Activity / Nutrition. A variety of other areas of interest were shared: developmental disabilities, expanded immunizations in schools, homelessness and housing insecurity, substance abuse, food insecurity, and workforce development.
- The grants program provides wonderful opportunities but could be more targeted. “We have amazing proposals, but can't fund them all...we shouldn't just jump around, but focus on things for the long haul.” And, “For their projects it doesn't appear that they evaluate them in terms of duplicating or supplementing services, and where is their niche. Mostly (they have) reactive decisions.”
- A desire by several to move quickly on projects like allcove and the Hub. “Let's get shovels in the ground.”

Assessment Summary (cont.)

Community Engagement

- PHCD has an established set of solid partnerships with leaders across the community.
- That said, the community, at large, is unfamiliar with the District and the organization could benefit from enhanced communications and marketing, in particular with diverse and marginalized populations.
- “They (PHCD) provide a wealth of information and support, but remain unknown and unappreciated.”
- Engagement with community leaders and listening circles have proven useful for identifying critical needs, but identified needs are wide-ranging.

Two Core Needs Heard Over and Over

- 1. Programmatic Focus:** We need to clearly identify the need being addressed for each program and determine if the health benefit is commensurate with PHCD funding required for sustainability.
- 2. Key Metrics:** Need to set key metrics and outcomes to track success in carrying out the plan and measure impact on the health of District residents.

PHCD's New Strategic Planning Process

Annual Planning Cycle

What We're All Creating Now

A plan with a three-year vision (2023-25) and one-year goals (for 2023)

Beginning of 2024

Review/revise the three-year vision and create 2024 goals

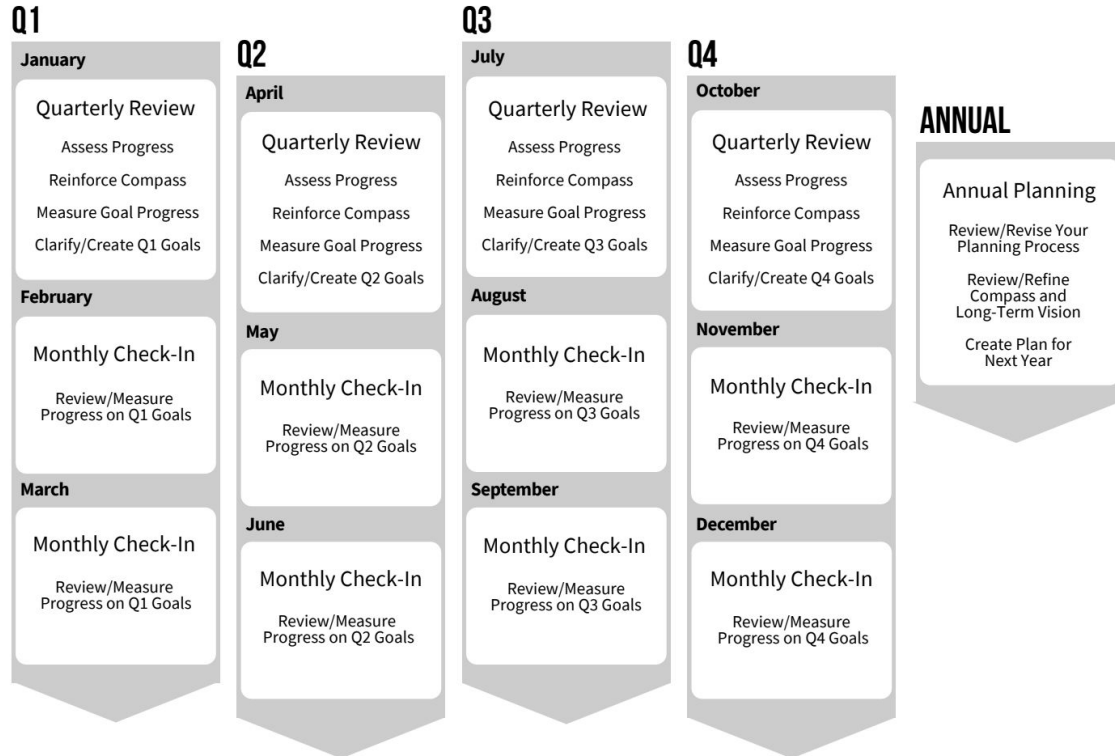
End of subsequent years

Review/revise the three-year vision and create next year's goals

Result

You have an ongoing annual planning process that includes a plan with a current three-year vision and set of one-year goals

Calendared...



Software...

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The screenshot shows a web-based software interface for planning. At the top, there is a navigation bar with 'Strategy' (dropdown), 'Active Plan', and 'Plan Settings'. On the right, it displays 'PHCD', a user profile icon, a settings icon, and a help icon. Below the navigation bar are three tabs: 'Plan View' (selected), 'Timeline View', and 'Presentation View'. The main content area is titled 'Peninsula Health Care District' and '2023-25 Plan -- Draft in Progress'. It features a section titled 'Section 1: Compass' with a help icon and two buttons: 'Manage Key Metrics' and 'Add Element'. The 'Compass' section contains three items, each with an up/down arrow icon, a title, a description, and an 'Edit Element' button with a three-dot menu:

- VISION STATEMENT**: All district residents are living their optimal health.
- MISSION STATEMENT**: To support district residents achieving optimal health and wellness through education, prevention, and access to basic health care services.
- CORE VALUES**:
 - Collaboration**: Working in partnership with others committed to improving the health of our community.
 - Inclusion**: Ensuring that the health care needs of all District residents will be considered regardless of financial and health status.
 - Transparency**: Conducting the District's business through processes that encourage public input, review, and comment.

Draft Strategic Plan Framework

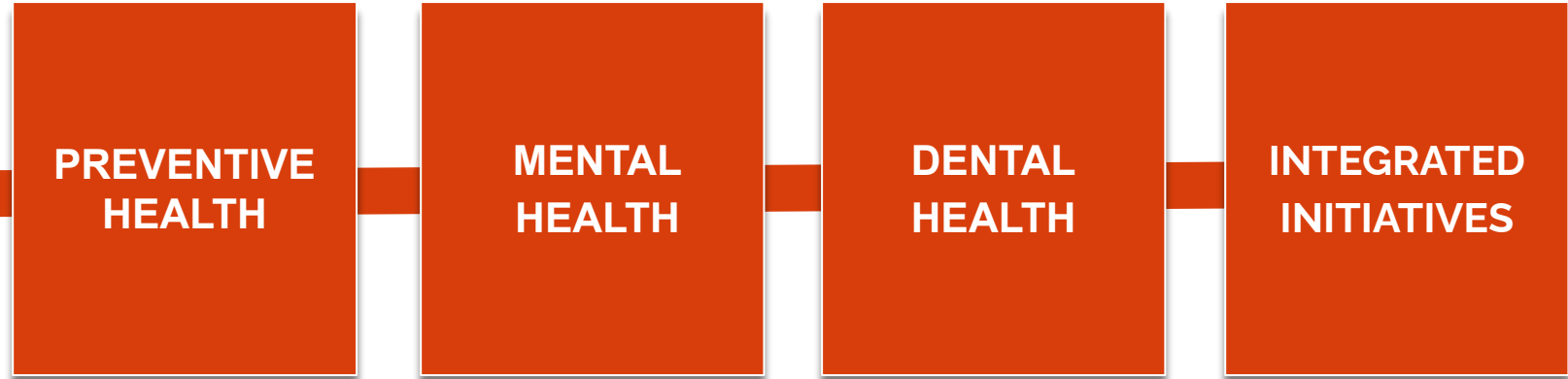
Draft Framework of 2023-25 Strategic Plan

VISION All district residents are living their optimal health.

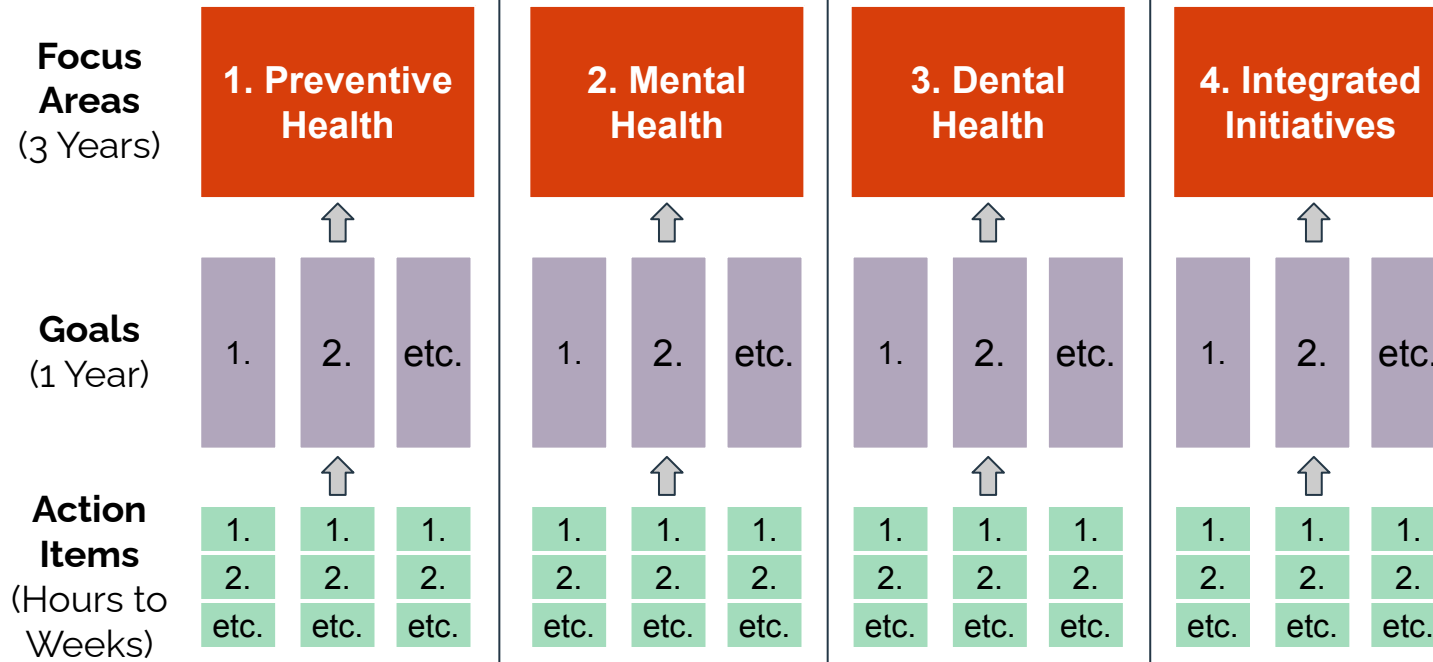
MISSION To support district residents of all ages achieving optimal health and wellness through education, prevention, advocacy, and safeguarding community access to basic health services.

CORE VALUES Collaboration Stewardship Inclusion Transparency

4 FOCUS AREAS



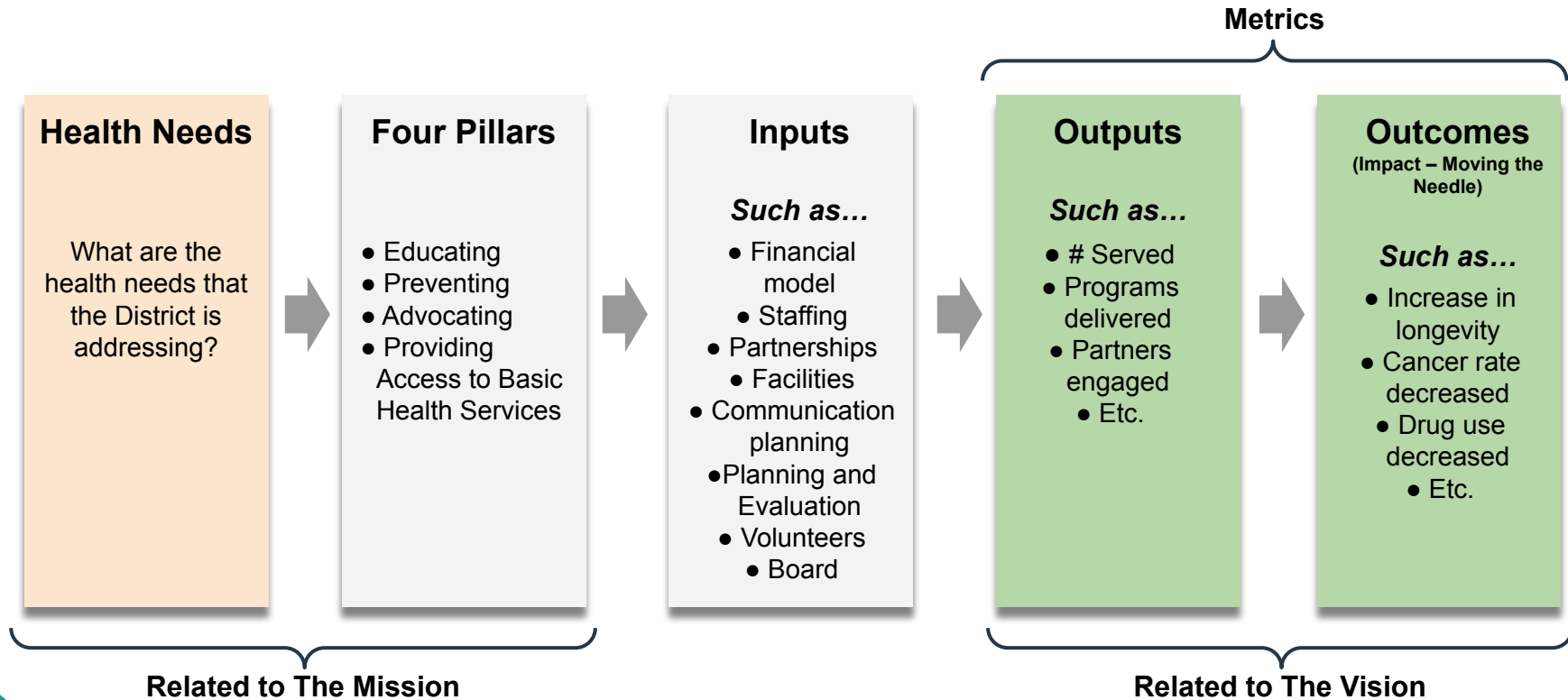
Logic and Structure of Section 2 of the Strategic Plan – “Actions”²¹



Two Strategic Themes

2023-2024 – A Strategic Framework for Programs: Create a common strategic framework for each of our core programs, with a focus on establishing metrics and funding support commensurate with the community benefit.

A Sample Strategic Framework for Core Programs



Two Strategic Themes, continued

2023-2024 – A Strategic Framework for Programs: Create a common strategic framework for each of our core programs, with a focus on establishing metrics and funding support commensurate with the community benefit.

2025 – Key Metrics: Establish and begin tracking success on a set of key health metrics for the District in each focus area:

- Preventive Health
- Mental Health
- Dental Health
- Integrated Initiatives

Discussion

Next Steps

- SDOC to provide feedback/suggestions on :
 - Focus Areas
 - Strategic Framework
 - Goals
- FY '23-'24 Plan presented to community for input
- Board approves plan
- Plan provides foundation for FY'24 Budget
- Plan uploaded into MissionMet software for tracking, executing, and supporting our ongoing process

Two Strategic Themes

1. **2023-2024 – A Strategic Framework for Programs:** Create a common strategic framework for each of our core programs, with a focus on establishing metrics and funding support commensurate with the community benefit.
2. **2025 – Key Metrics:** Establish and begin tracking success on a set of key health metrics for the District in each focus area:
 - Preventive Health
 - Mental Health
 - Dental Health
 - Senior Health
 - Integrated Initiatives

Focus Area Structure – Draft Three-year Vision and One-year Goals

| Focus Area | Three-year Vision | One-year Goals |
|-----------------------------|--|---|
| I. Preventive Health | <ul style="list-style-type: none"> ● A Framework for Programs: A strategic framework, with a focus on metrics and financial viability, will have been created for each of the core preventive health programs. ● Health Metrics: We will have established and begun tracking a small set of overall key metrics regarding preventive health in the District. | <ol style="list-style-type: none"> 1. Community Health Events: Serve as a partner/sponsor for at least four community health resource events. 2. Vaccination Programs: Create a strategic framework for the District’s vaccination programs. 3. Blue Zones: Identify and implement opportunities for carrying out key components of the Blue Zone program across the District. 4. Substance Misuse: Review and analyze the community’s need for substance education / intervention programs (i.e., Fentanyl, vaping, etc.) and make a recommendation for future services if needed. |

| | | |
|----------------------------------|--|---|
| | | 5. Health and Fitness Center: Create a strategic framework to define new products to achieve a doubling of memberships, such as becoming a Medicare-eligible provider, bringing in the Activate program, affiliating with the Age-friendly Cities program, etc. |
| II. Mental Health | <ul style="list-style-type: none"> ● A Framework for Programs: A strategic framework, with a focus on metrics and financial viability, will have been created for each of the core mental health programs. ● Health Metrics: We will have established and begun tracking a small set of overall key metrics regarding mental health in the District. | <ol style="list-style-type: none"> 1. allcove: Launch the program with a focus on attracting clients, quality care, service integration, and financial strategies. 2. Youth Mental Health Program: Collaborate with the County Office of Education, County Health, and others to develop a countywide Youth Mental Health Strategic Plan. 3. Care Solace: Effectively promote and review the impact of the Care Solace program. |
| III. Dental Health | <ul style="list-style-type: none"> ● Financial Model: The District's financial model regarding Sonrisas will have been clarified. | <ol style="list-style-type: none"> 1. Sonrisas: Review and revise, as needed, the District's financial model and financial commitment to and with Sonrisas. |
| V. Integrated Initiatives | <ul style="list-style-type: none"> ● A Framework for Programs: A strategic framework, with a focus on metrics and financial viability, will have been created for significant additional programs. ● Health Metrics: We will have established and begun tracking a small set of overall key metrics regarding additional programs in the District. | <ol style="list-style-type: none"> 1. Peninsula Wellness Community: Define the community hub's business model. 2. Grants Program: Review and analyze the grants program and provide a recommendation for the program's future. |

SWOT Analysis – March 2023

Paul and Eric's PHCD SWOT Analysis

Internal Strengths

- A clear passion for the District's health care purpose among staff and board
- Financial stability and diverse asset mix
- Good relationships among community leaders; they are supportive of the District and its efforts
- Leadership and staff well-respected in the community
- A strong and long track record of efforts to improve the health of the District's community members
- Enhanced visibility due to allcove and grantee programs

Internal Weaknesses

- No documented/consistent strategic framework to organize programs, including metrics for key outputs and outcomes
- Unclear processes for consistently collecting, reporting, and analyzing health data in strategic decision-making
- A lack of alignment and clarity about what it really means to "move the needle" in the District
- Inconsistent perspectives on the grants program, its impact, and how/if it should be organized going forward
- Lack of time set aside for the board and staff to really dig in on strategic topics

External Opportunities

- Deeper and consistent engagement with underrepresented groups in the community
- Unrestricted funding opportunities through grants and large donors
- Stronger board representation at community events
- Improved knowledge of non-Peninsula Wellness Center programs
- increased cross collaboration with grantees, and deeper relationships through fewer grants

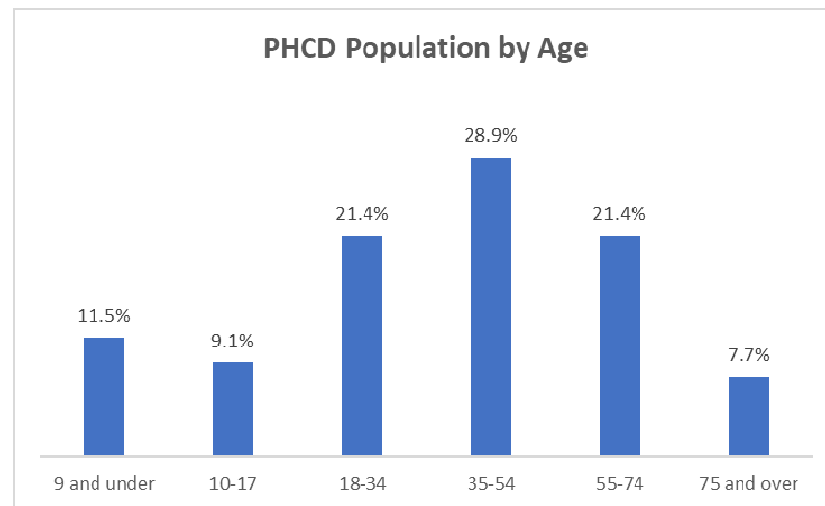
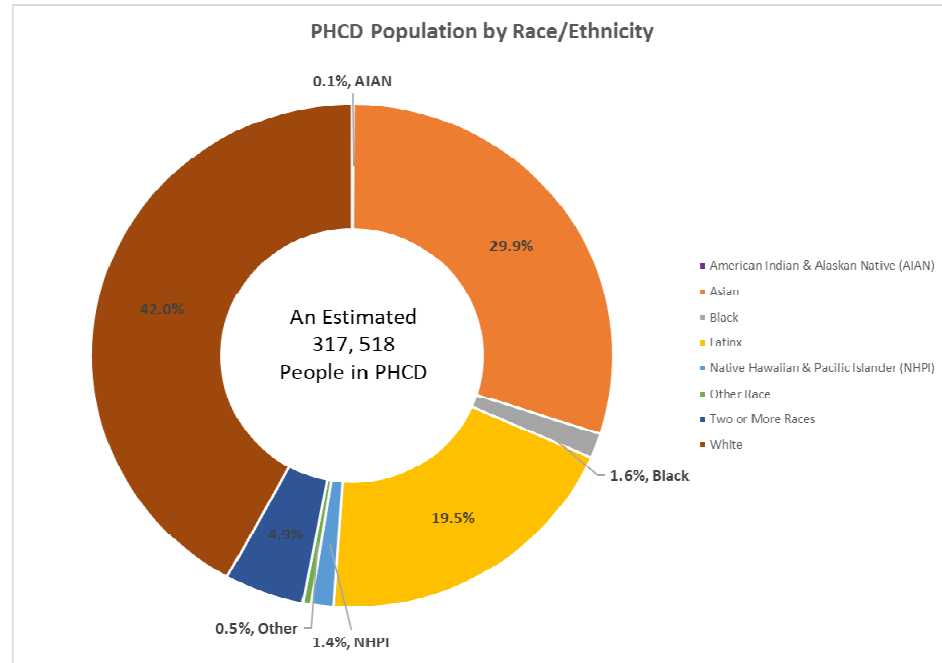
External Threats

- Lack of consistent/clear process or communication with underrepresented groups in the community
- Another health crisis or emergency, like Covid
- Lack of understanding and familiarity about the District among community members
- Challenging economy
- Supply chain issues resulting in project delays

| | | |
|---|-------|------|
| American Indian & Alaskan Native (AIAN) | 0.1% | 0.1 |
| Asian | 29.9% | 29.9 |
| Black | 1.6% | 1.6 |
| Latinx | 19.5% | 19.5 |
| Native Hawaiian & Pacific Islander (NHPI) | 1.4% | 1.4 |
| Other Race | 0.5% | 0.5 |
| Two or More Races | 4.9% | 4.9 |
| White | 42.0% | 42.0 |
| 9 and under | 11.5% | 11.5 |
| 10-17 | 9.1% | 9.1 |
| 18-34 | 21.4% | 21.4 |
| 35-54 | 28.9% | 28.9 |
| 55-74 | 21.4% | 21.4 |
| 75 and over | 7.7% | 7.7 |

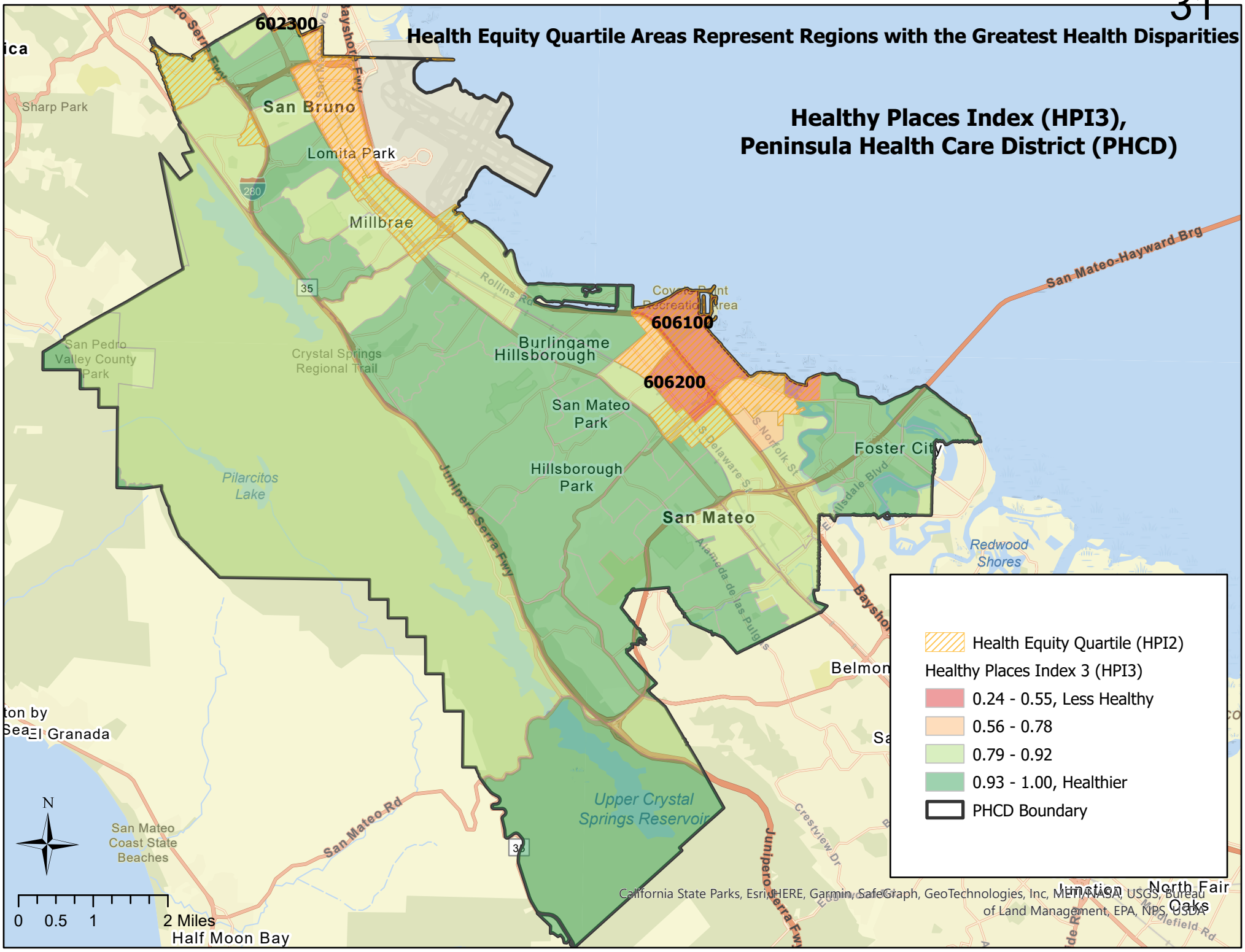
Race Chart Source: ACS 2020 B03002 Series
Race Groups are Non-Hispanic

Age: ACS 2020 B01001 Series

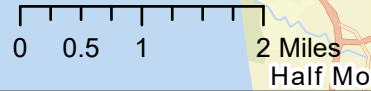


Health Equity Quartile Areas Represent Regions with the Greatest Health Disparities

Healthy Places Index (HPI3), Peninsula Health Care District (PHCD)



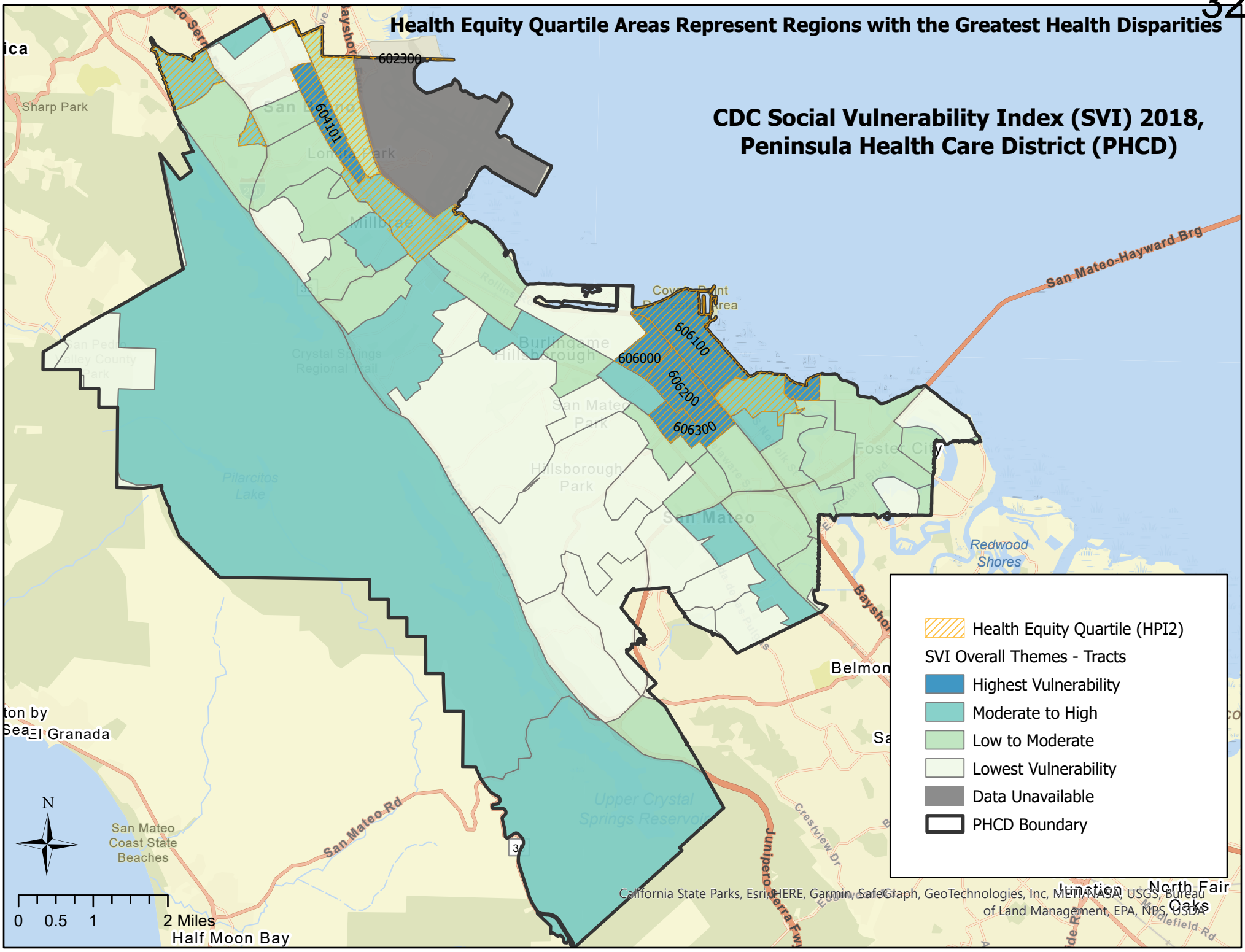
| | |
|--------------------------------------|-------------------------------|
| | Health Equity Quartile (HPI2) |
| Healthy Places Index 3 (HPI3) | |
| | 0.24 - 0.55, Less Healthy |
| | 0.56 - 0.78 |
| | 0.79 - 0.92 |
| | 0.93 - 1.00, Healthier |
| | PHCD Boundary |



California State Parks, Esri, HERE, Garmin, SafeGraph, GeoTechnologies, Inc., Microsoft, NASA, USGS, Bureau of Land Management, EPA, NPS, USDA

Health Equity Quartile Areas Represent Regions with the Greatest Health Disparities

CDC Social Vulnerability Index (SVI) 2018, Peninsula Health Care District (PHCD)



Legend

- Health Equity Quartile (HPI2)
- SVI Overall Themes - Tracts**
- Highest Vulnerability
- Moderate to High
- Low to Moderate
- Lowest Vulnerability
- Data Unavailable
- PHCD Boundary

Scale and Orientation

0 0.5 1 2 Miles

Half Moon Bay

California State Parks, Esri, HERE, Garmin, SafeGraph, GeoTechnologies, Inc., Microsoft, NASA, USGS, Bureau of Land Management, EPA, NPS, USDA

Wealth Disparities Translate Into Health Disparities: Zip Codes 94401 and 94066 Represent Areas of Greater Need



Students Eligible for Free or Reduced Price School Meals: 2018 - 2021

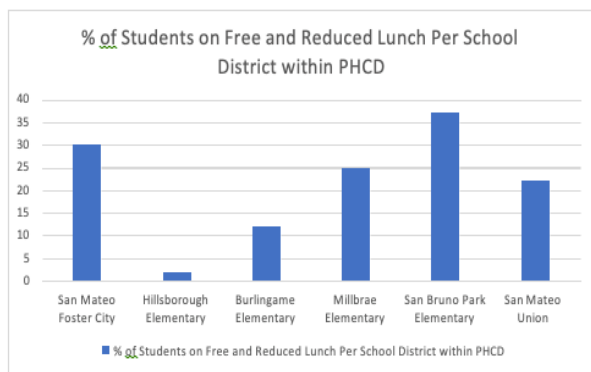
| Locations | Percent | | | |
|--|---------|-------|-------|-------|
| | 2018 | 2019 | 2020 | 2021 |
| San Mateo County | 34.3% | 34.2% | 32.8% | 31.3% |
| Burlingame Elementary (School District) | 12.7% | 11.9% | 11.6% | 11.1% |
| Hillsborough City Elementary (School District) | 1.7% | 2.1% | 1.9% | 3.1% |
| Millbrae Elementary (School District) | 24.3% | 25.9% | 26.4% | 25.6% |
| San Bruno Park Elementary (School District) | 38.6% | 37.3% | 35.8% | 31.2% |
| San Mateo Union High (School District) | 24.0% | 24.6% | 23.4% | 22.0% |
| San Mateo-Foster City (School District) | 30.3% | 30.0% | 26.5% | 28.9% |

Definition: Percentage of students ages 5-17 enrolled on census day who are eligible to receive free or reduced price school meals (e.g., on census day in the 2021 school year, 58.8% of California students were eligible to receive free or reduced price school meals).

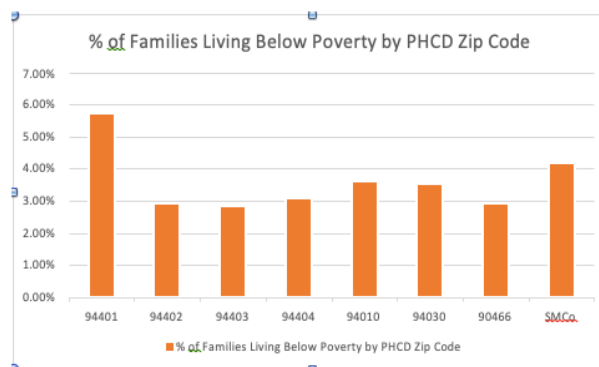
Data Source: As cited on kidsdata.org, California Dept. of Education, Free or Reduced-Price Meal (Student Poverty) Data; National Center for Education Statistics, Digest of Education Statistics (Jul. 2021).

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<https://www.kidsdata.org/topic/518/school-meals/table#fmt=675&loc=4,13,28,8,20,24,27&tf=141,110,124,108&sortType=asc>



Source: California Department of Education Student Poverty FRPM Data

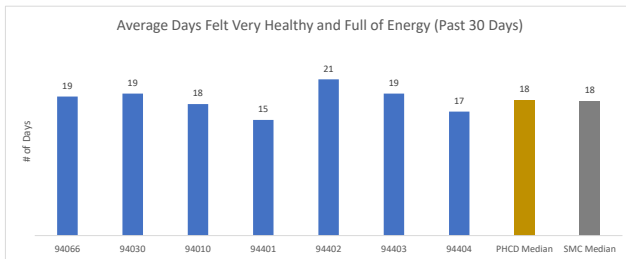


Opportunities For Preventive Health

Physical Quality

During the past 30 days, for about how many days have you felt very healthy and full of energy?

| PHCD Zip Codes | Average |
|----------------|---------|
| 94066 | 18.5 |
| 94030 | 18.9 |
| 94010 | 17.5 |
| 94401 | 15.4 |
| 94402 | 20.8 |
| 94403 | 18.9 |
| 94404 | 16.5 |
| PHCD Median | 18.1 |
| SMC Median | 17.9 |

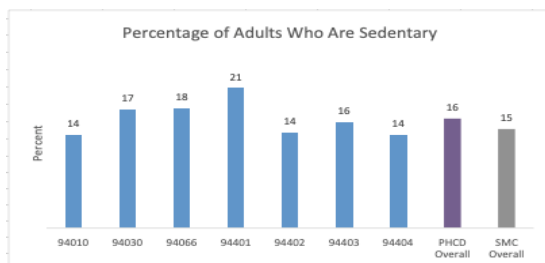


Percentage of Adults who are Sedentary

Indicator shows percentage of adults who did not participate in any leisure-time activities (physical activities other than their regular job) during the past month.

Adults who are sedentary are at an increased risk of many serious health conditions. These conditions include obesity, heart disease, diabetes, colon cancer, and high blood pressure.

| PHCD Zip Code | Average |
|---------------|---------|
| 94010 | 13.6 |
| 94030 | 17.4 |
| 94066 | 17.5 |
| 94401 | 20.5 |
| 94402 | 14.0 |
| 94403 | 15.5 |
| 94404 | 13.7 |
| PHCD Median | 16.0 |
| SMC Median | 14.5 |



CDC Healthy Places

7th Grader who are Physically Fit

Indicator shows the percentage of 7th grade students that achieve the Healthy Fitness Zone for the aerobic capacity portion of the annual California Physical Fitness test.

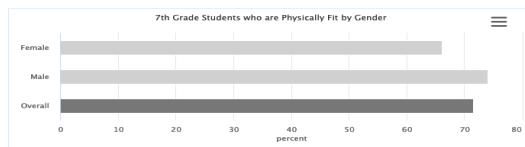
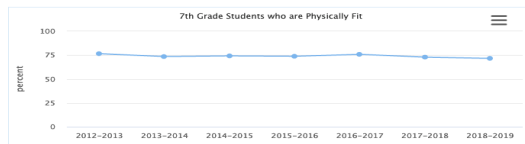
Why is this important?

Physical fitness has been linked to higher academic performance, better concentration, and increased confidence and self-esteem. Students who are more physically fit are less likely to suffer from stress, anxiety, and depression.

In addition, physical fitness helps to develop lifelong habits that can reduce the likelihood of chronic diseases such as diabetes, high blood pressure and heart failure.

Source: California Department of Education
 Measurement period: 2018-2019
 Maintained by: Conduent Healthy Communities Institute
 Last update: April 2020

Technical note: Physical Fitness Exams were suspended for the 2019-2020 and 2020-2021 school years due to COVID-19.



Opportunities For Preventive Mental Health

Poor Mental Health Days: 14+ Days

This indicator shows the percentage of adults who stated that their mental health was not good 14 or more days in the past month.

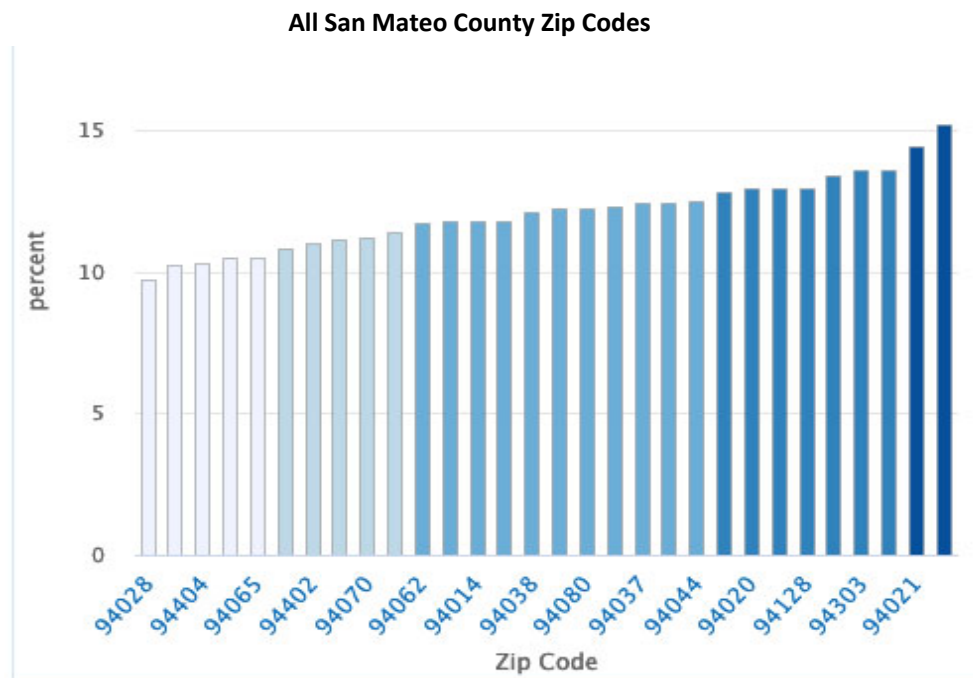
Why is this important?

Psychological distress can affect all aspects of our lives. It is important to recognize and address potential psychological issues before they become critical. Occasional down days are normal, but persistent mental/emotional health problems should be evaluated and treated by a qualified professional.

Measurement period: 2020

Source: CDC-Healthy 2020

| PHCD Zip Codes | Average |
|----------------|--------------|
| 94010 | 10.8 |
| 94030 | 10.5 |
| 94066 | 12.4 |
| 94401 | 13.6 |
| 94402 | 11 |
| 94403 | 11.8 |
| 94404 | 11.8 |
| Median Value | 12.2 |
| Range | 9.7% - 15.2% |



Opportunities For Preventive Mental Health

Age Related Hospitalization Rate due to Adolescent Suicide and Intentional Self-inflicted Injury

Measurement period: 2018 - 2020

Data Source: California Department of Health Care Access and Information

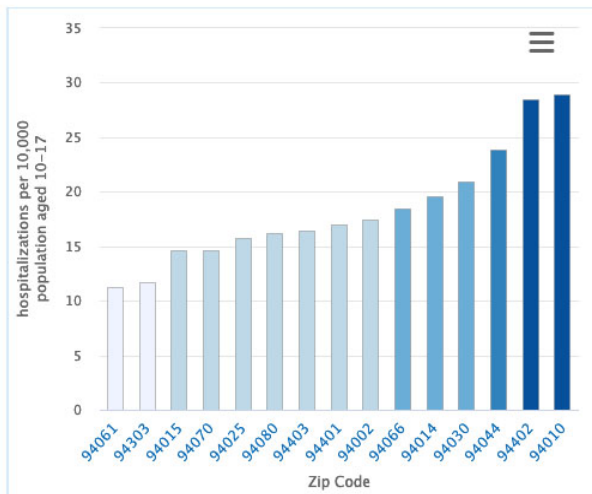
This indicator shows the average annual age-adjusted hospitalization rate due to suicide or intentional self-inflicted injury per 10,000 population aged 10-17 years. Admissions are included if a primary or additional diagnosis code indicates suicide or intentional self-inflicted injury.

Why is this important?

Suicide among adolescents is a serious public health issue in the United States. It is a leading cause of death for youth; approximately 4,600 lives are lost each year due to suicide. Many more adolescents survive suicide attempts than actually die. Approximately 157,000 youth receive medical care at EDs for intentional self-inflicted injuries each year. Risk factors include depression, physical/mental illness, alcohol/substance abuse, incarceration, and loss or other stressful life events. Gender differences are apparent: although females are more likely to report attempting suicide than males, males are more likely to actually commit suicide than females. Studies show that addressing psychiatric illness through early recognition, intervention, and treatment is an effective way to combat suicidal behavior.

All Zips - San Mateo County

| PHCD Zip Code | Average |
|---------------|---------------|
| 94066 | 18.5 |
| 94030 | 20.9 |
| 94010 | 28.9 |
| 94401 | 17 |
| 94402 | 17.4 |
| 94403 | 16.4 |
| 94404 | 23.9 |
| Range | 11.3% - 28.9% |
| Median Value | 17 |



Age-Adjusted ER Rate due to Pediatric Mental Health

Measurement period: 2018 - 2020

Source: CA Dept Health Care Assesnan Information

Last update 2022

This indicator shows the age-adjusted emergency room visit rate due to mental health per 10,000 population under 18 years.

Cases include adjustment disorders; anxiety disorders; attention deficit conduct and disruptive behavior disorders; delirium, dementia, amnestic and other cognitive disorders; disorders usually diagnosed in infancy, childhood, or adolescence; mood disorders; personality disorders; schizophrenia and other psychotic disorders; and impulse control disorders not elsewhere classified.

Why is this important?

Psychological distress can affect all aspects of our lives. It is important to recognize and address potential psychological issues before they become critical.

All San Mateo County Zips

| PHCD Zip Code | Average |
|---------------|-------------|
| 94066 | 28.1 |
| 94030 | 21.3 |
| 94010 | 27.9 |
| 94401 | 30.2 |
| 94402 | 17.6 |
| 94403 | 30.9 |
| 94404 | 11.5 |
| Range | 11% - 35.2% |
| Median Value | 25.8 |

