

TUOLUMNE COUNTY PUBLIC HEALTH DEPARTMENT

COMMUNITY HEALTH IMPROVEMENT PLAN

2024

TUOLUMNE COUNTY PUBLIC HEALTH

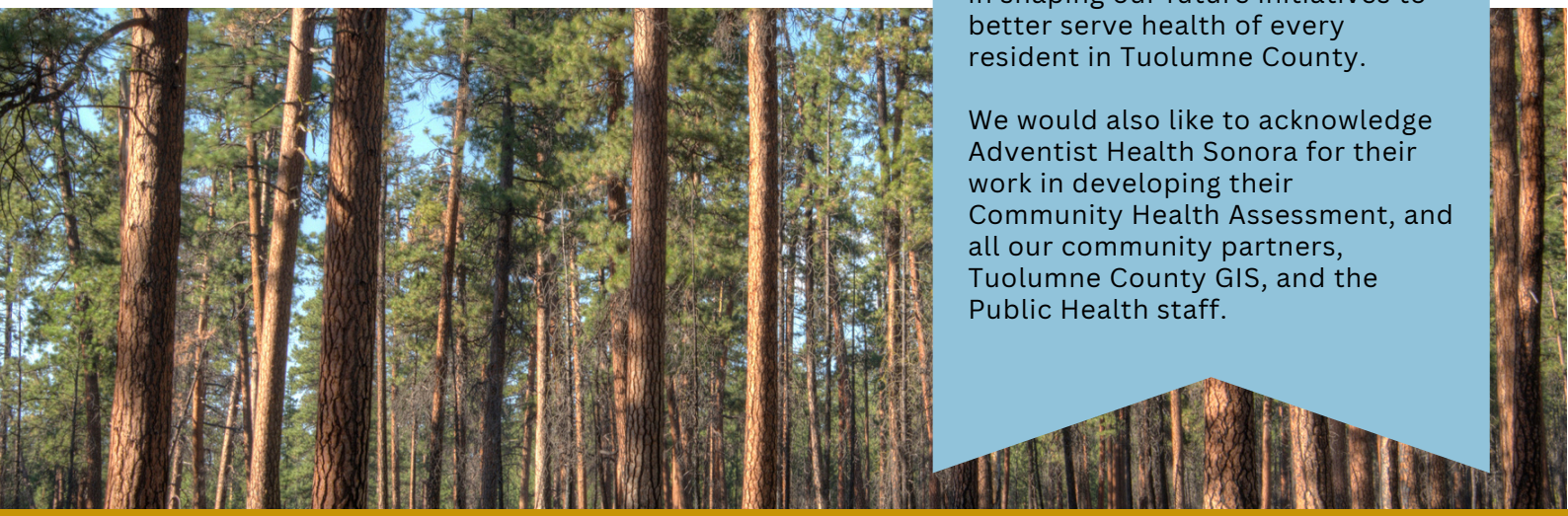
PREVENT · PROMOTE · PROTECT

TABLE OF CONTENTS

Acknowledgements

Thank you to the Tuolumne County community for their invaluable input on the health survey that helped make this report possible. The contributions are instrumental in shaping our future initiatives to better serve health of every resident in Tuolumne County.

We would also like to acknowledge Adventist Health Sonora for their work in developing their Community Health Assessment, and all our community partners, Tuolumne County GIS, and the Public Health staff.



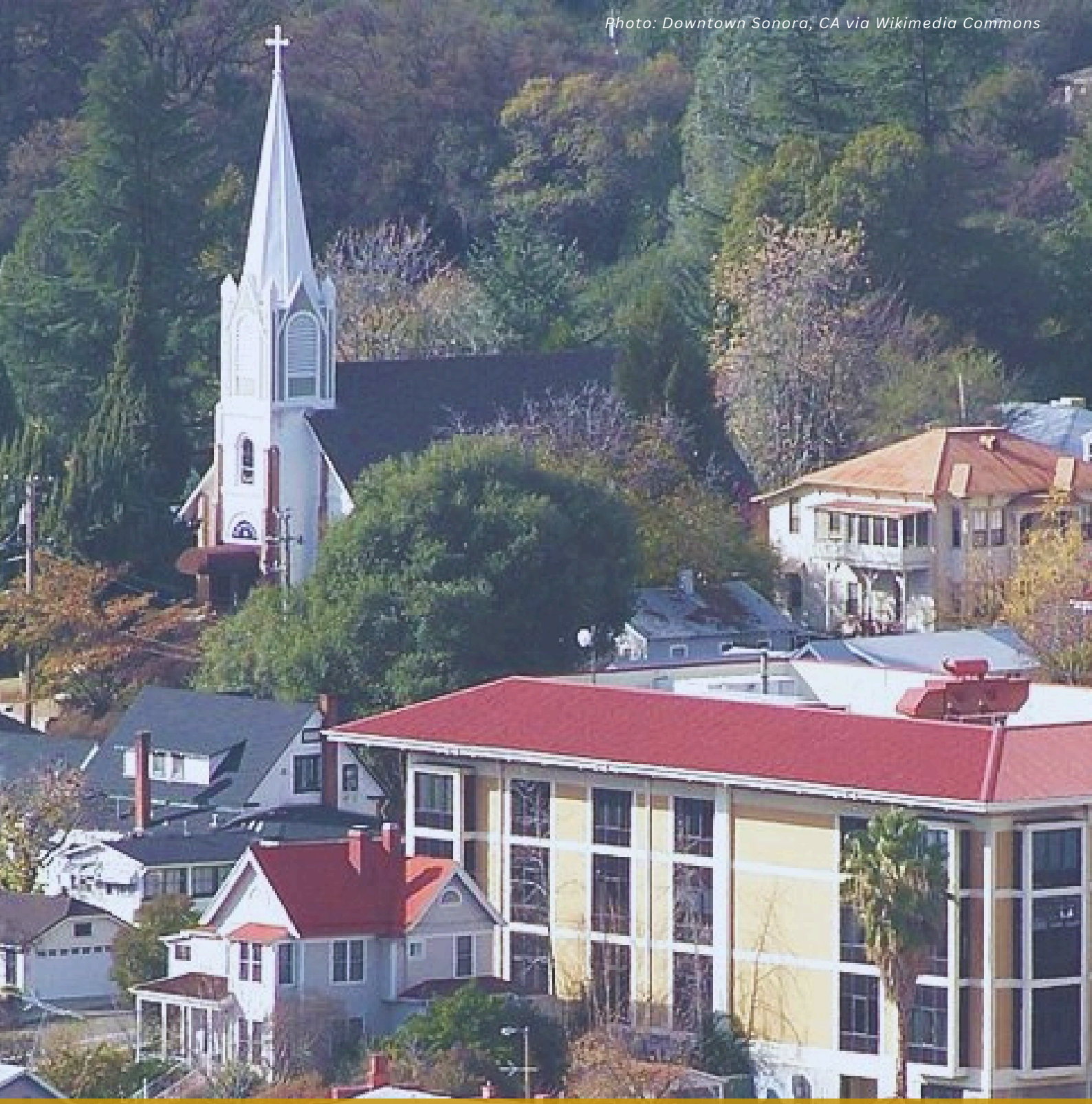


Photo: Downtown Sonora, CA via Wikimedia Commons

VISION

"A safe and thriving community where every person achieves optimal health."

EXECUTIVE SUMMARY

The mission of Tuolumne County Public Health (TCPH) is to protect and promote health and well-being in Tuolumne County. Health departments have a fundamental responsibility to provide public health protections and services in a number of areas, including preventing the spread of communicable disease, ensuring food, air, and water quality are safe, supporting maternal and child health, improving access to clinical care services, and preventing chronic disease and injury. In addition, public health departments provide local protections and services specific to their community's needs. Health departments serve their communities 24/7 and require access to a wide range of critical data sources, robust laboratory capacity, preparedness and policy planning capacity, partnerships with community, and expert staff to leverage them in support of public health protections.

In an effort to fulfill our mission, the department periodically conducts a **community health needs assessment (CHNA)**. The purpose of a CHNA is to identify a community's health status, needs, issues, and available resources through a comprehensive review of local health data and input from community members. The systemic examination of the community's health status indicators, such as health resources and chronic disease rates, are used to identify gaps that may impact community health. The compiled information is then used to develop a **community health improvement plan (CHIP)** that outlines strategies and innovations that better leverage existing multi-sectoral resources and services to improve the health of the community over the next three to five years.

Previous health assessments for Tuolumne County have been led and conducted in partnership with the local non-profit healthcare system, Adventist Health Sonora (AHS) and other community-based organizations. As a non-profit hospital, the AHS health assessment is required every three years. The most recent Adventist Health Sonora Community Health Needs Assessment released in 2022 and compiles data from its primary service area which includes some surrounding jurisdictions outside of Tuolumne County. The 2022 AHS CHNA identified the following high priority needs: **Financial Stability, Housing, and Mental Health.**

The Tuolumne County Public Health Department CHNA builds upon the work of the recently completed AHS CHNA and identifies supplementary health priorities for the purposes of developing a CHIP through a public health lens. The TCPH CHNA looks specifically at Tuolumne County data and includes input from a countywide survey of residents conducted in May 2023. The TCPH CHNA identified the following additional priorities: **Access to Care, Health Risk Behaviors, and Chronic Conditions.**

The supplementary assessment findings were used to develop a TCPH CHIP which will proactively guide our departmental programming and interventions over the next three to five years to address local health issues and work towards improving health outcomes. By implementing evidence-based interventions and fostering community partnerships, the county can work towards achieving a healthier, more equitable, and resilient community for all its residents. The shared vision of TCPH and our community partners is a safe and thriving community where residents achieve optimal health. In that spirit, TCPH will continue to work as an active partner with AHS and other community organizations to reach the shared goal of ensuring the health and social needs of all Tuolumne County residents are addressed.

VIEW THE ADVENTIST HEALTH SONORA CHNA HERE

VIEW THE TUOLUMNE COUNTY PUBLIC HEALTH CHNA HERE

PROCESS

The TCPH CHNA-CHIP is intended to be a supplementary resource to the AHS CHNA-CHIP and builds upon the priorities set by the AHS assessment[1]. Other areas that focused on the social drivers of health that were examined by Adventist Health Sonora included: **health conditions, health risk behaviors, access to care, food security, education, and inclusion and equity.**

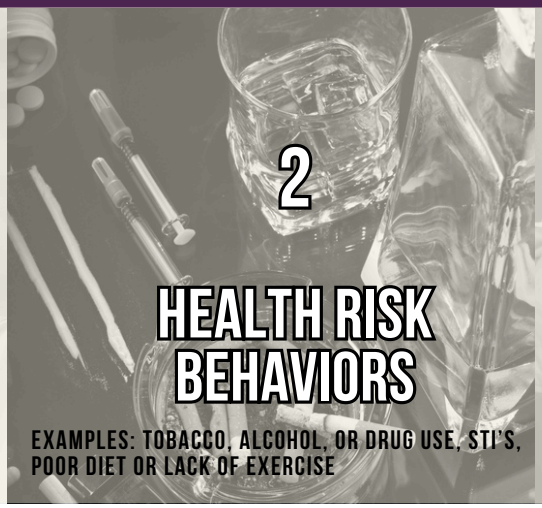
To narrow down additional priorities, TCPH developed and conducted an online survey called "Health in Tuolumne County" to collect qualitative feedback from Tuolumne County residents on local health issues, to rank the six topics in order of importance (on a scale of 'Very Important' to 'Not Important'), and to select three top priorities that they would like TCPH to address in the next few years.

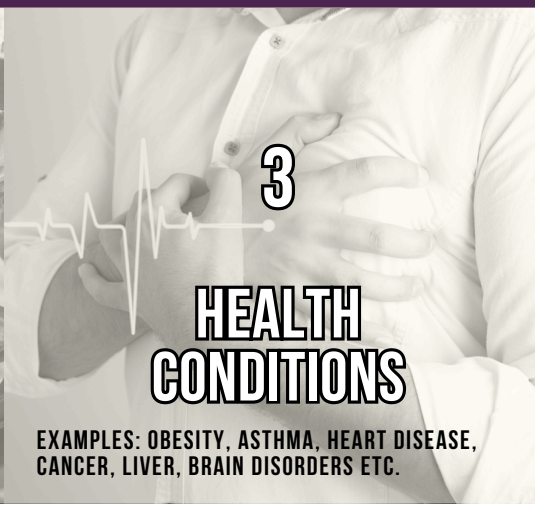
The survey was administered from April to May 2023. It was made available online via departmental social media, and website. Paper survey copies were made available at local community partner offices including: the Tuolumne County Library, Senior Center, Center for a Non Violent Community, Amador-Tuolumne Community Action Agency, and Interfaith. Additionally, TCPH staff were queried to provide feedback via an interactive voting poster and similarly ranked topics to prioritize. Of the 500 responses received, 485 respondents were Tuolumne County residents. Out-of-county responses were removed from the final aggregated results used to ascertain the top three priorities.

To complete the supplement, the TCPH CHNA-CHIP Committee and Epidemiology Unit compiled secondary data sources from state and federal sources, applied age-adjusted rates for applicable indicators, and also utilized TCPH programmatic data to highlight the key health and social needs in Tuolumne County.

TCPH 2023 CHNA PRIORITY AREAS

From data analysis and the Health in Tuolumne 2023 feedback survey, the following priorities were identified for inclusion in the TCPH health assessment:

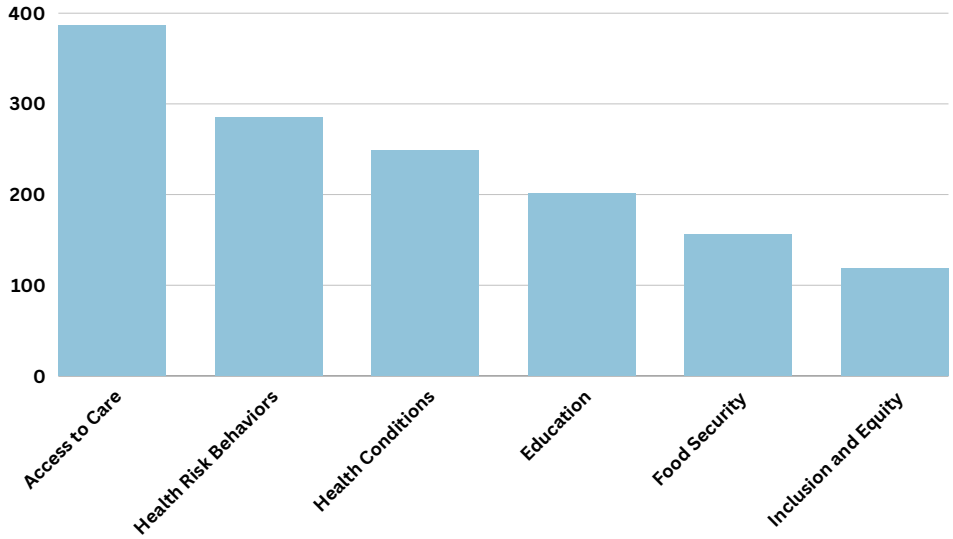




The "Health in Tuolumne County 2023" survey respondents ranked access to care, health risk behaviors, and chronic conditions as top priorities. While education, food security, and inclusion & equity received a handful of votes as 'Important' or 'Very Important', the TCPH CHNA committee considered the numerous survey comments that centered around themes of challenges in accessing healthcare and concerns over prevalence of substance use and chronic disease which further supported the selection of the top three priority areas.

HEALTH IN TUOLUMNE SURVEY 2023

HEALTH TOPICS RANKED BY PRIORITY



FINAL PRIORITIES

INCLUDING ADVENTIST HEALTH SONORA CHNA RESULTS

- **Financial Stability**
- **Housing**
- **Mental Health**
- **Access to Care**
- **Health Risk Behaviors**
- **Health Conditions**

"HEALTH IN TUOLUMNE COUNTY" SURVEY RESPONDENT COMMENTS

"

It's really hard to get health care and people aren't staying due to health care and housing.

"

We are outgrowing our services. Meaning we don't have enough care to provide our community in a timely manner.

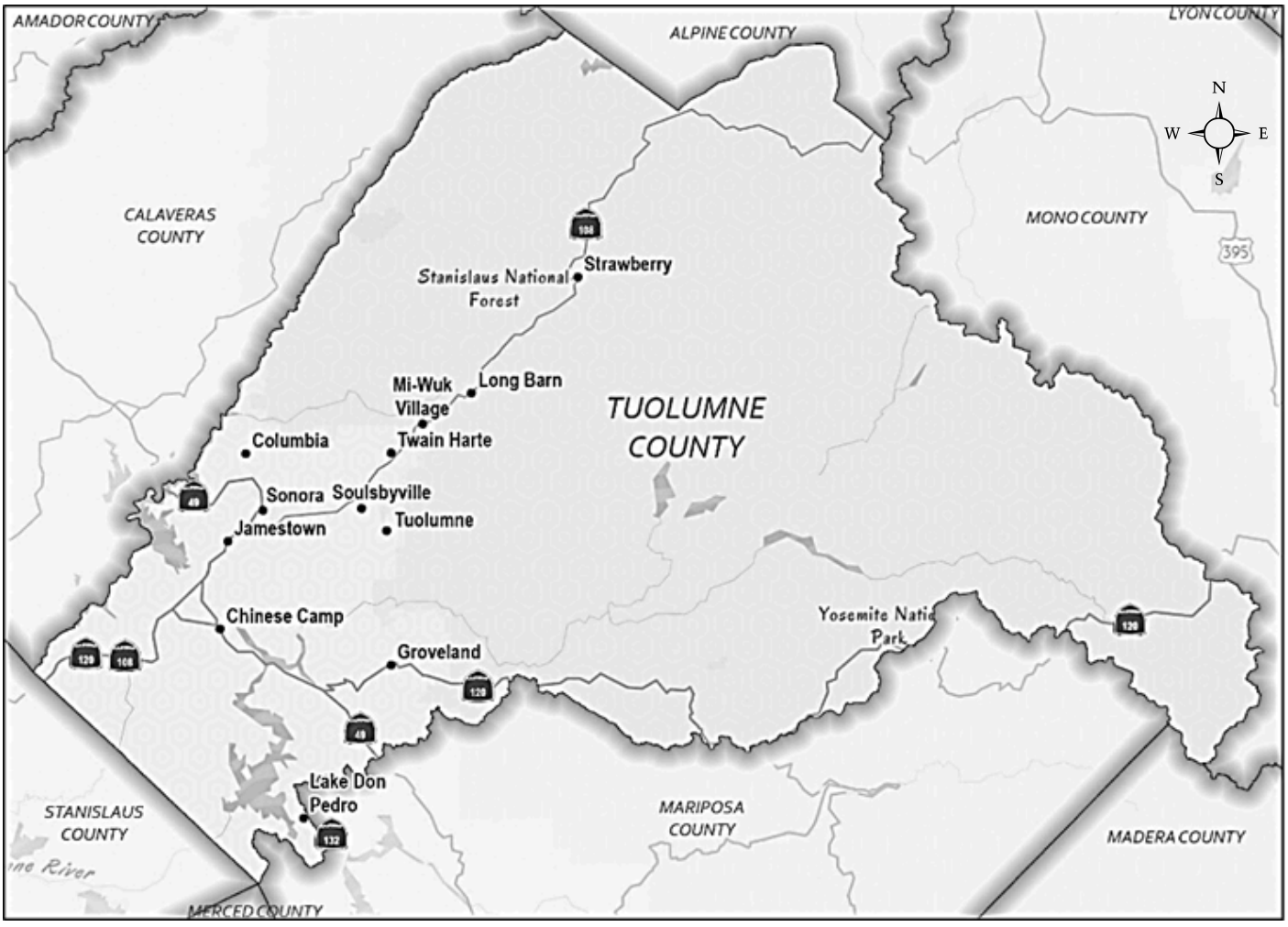
"

Drug addiction and mental heath issues need to be addressed in this county. Proper help and facilities need to be provided to help individuals with these two issues. It is very vital and important.

COMMUNITY PROFILE

Tuolumne County, CA

Tuolumne County is in the central eastern section of California and are the tribal lands of the Central Sierra Me-Wuk. The county covers 2,221 square miles and ranges in elevation from about 300 feet in the Sierra Nevada foothills to almost 13,000 feet in the mountainous eastern regions. Bordered by rivers to the north and south and the Sierra Nevada to the east and the San Joaquin valley to the west, Tuolumne County represents the southern reach of the historic Mother Lode Gold Country and one of the gateways to Yosemite National Park. The City of Sonora is its single incorporated city and the county has several smaller towns that line Highway 108, Highway 120, and Highway 49. Tuolumne County is the heart of California's gold country and has a rich history, vibrant tourism and recreation sectors, and growing, diverse communities.



MAP OF TUOLUMNE COUNTY

**Internal Source: Tuolumne County GIS Department, 2023*

COMMUNITY PROFILE

POPULATION 2023
52,932*[2]

*INCLUDES SIERRA CONSERVATION CENTER POPULATION: 2020 APPROX. 2,807

CITY OF SONORA: APPROX. 4,940

MEDIAN AGE
48.6

AVG. HOUSEHOLD SIZE
2.24

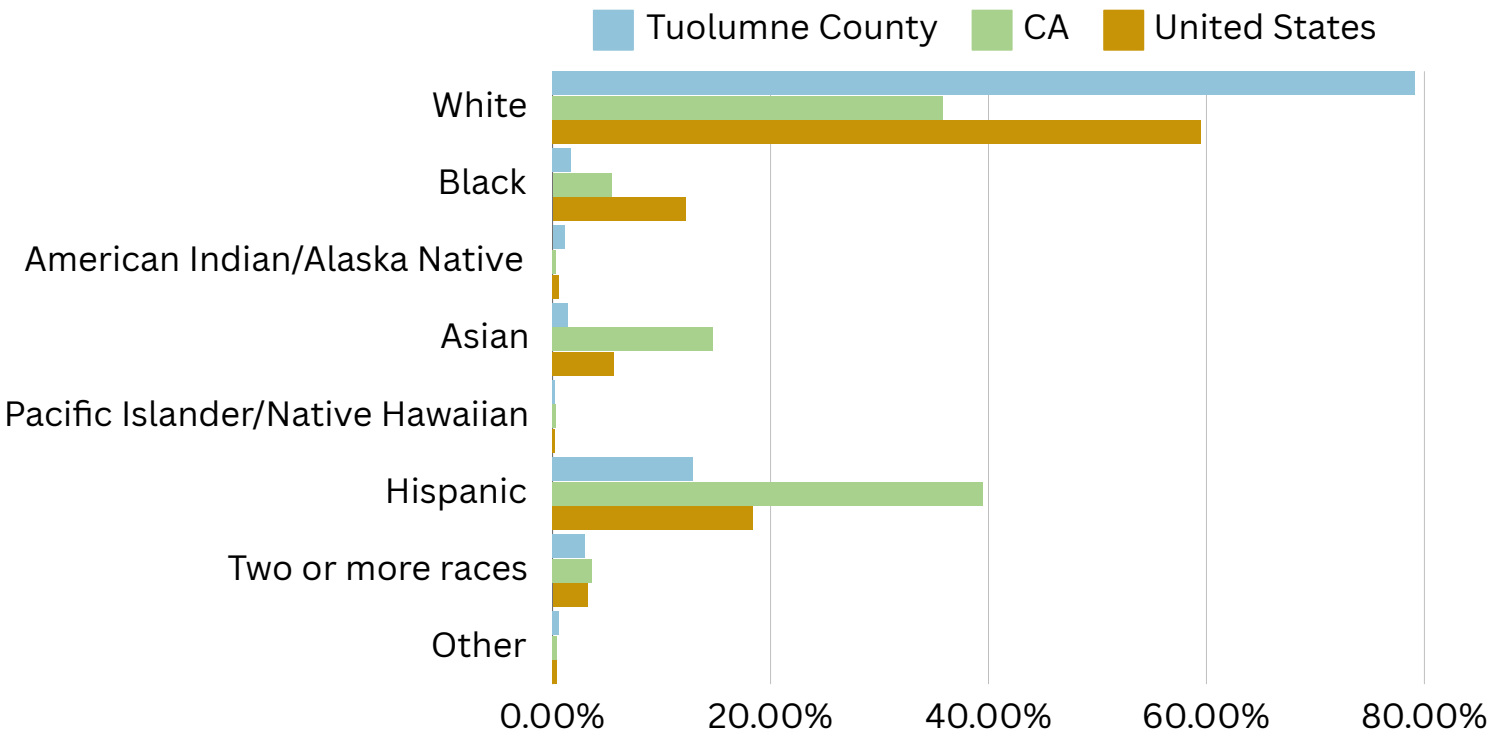
MEDIAN HOUSEHOLD INCOME
$66,846

POPULATION UNDER 100% FEDERAL POVERTY LEVEL
9.9% (CA: 12.3%)

Source: American Communities Survey Census 2021 [3,4]

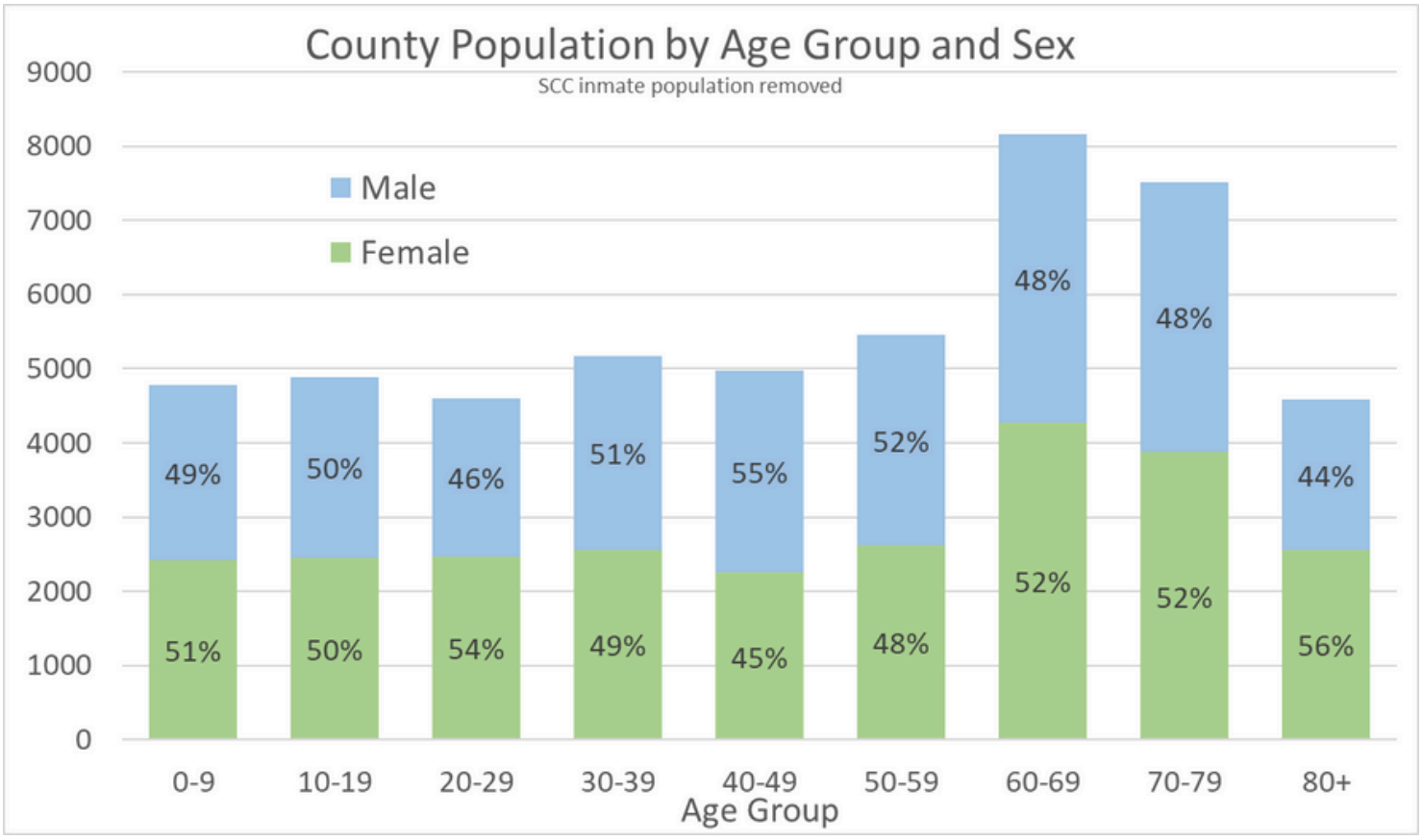
COMMUNITY PROFILE

POPULATION BY RACE/ETHNICITY



Source: American Communities Survey Census 2021 [3,4]

TOTAL POPULATION BY AGE GROUP & SEX



Source: American Communities Survey Census 2021 [3,4]

California Department of Finance [2]

COMMUNITY PROFILE

SOCIAL DETERMINANTS OF HEALTH (SDOH)

Social Determinants of Health[5] are the societal, economic, and environmental factors that profoundly influence an individual's well-being and health outcomes. These include income, education, access to healthcare, housing, and community conditions. They are vital because they shape people's health status and can lead to health inequalities. Recognizing and addressing these determinants is essential to achieving health equity and improving public health.

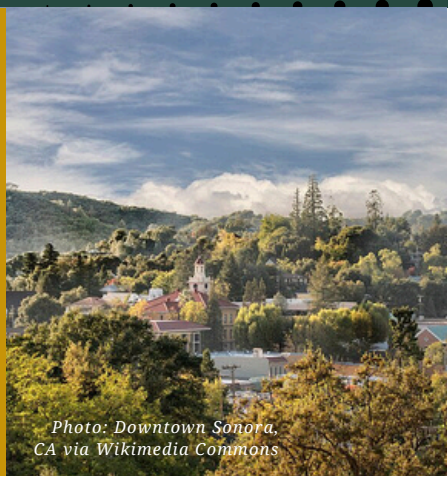
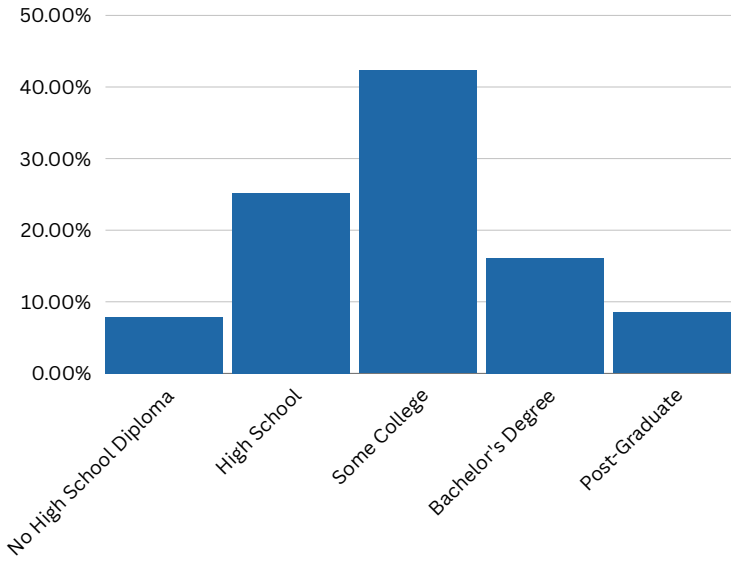


Photo: Downtown Sonora, CA via Wikimedia Commons

EDUCATIONAL ATTAINMENT

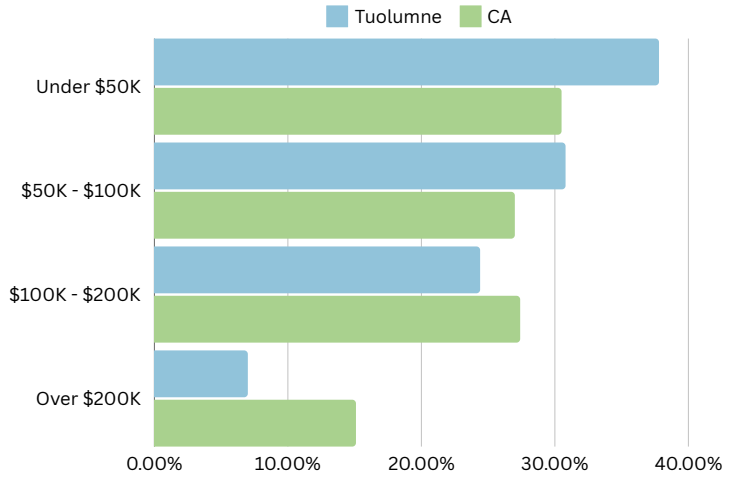


90.6% — **Tuolumne County resident high school graduation rate**
(four-year adjusted cohort)

92.1% — **Percent of Tuolumne County residents ages 25 years and older that have a high school diploma or higher which is above the state average of 84.7%**

1 IN 4 — **Tuolumne County residents have a Bachelor's degree or higher compared to the state rate of 1 in 3**

HOUSEHOLD INCOME



INSURANCE COVERAGE STATUS

9.6% — **of Tuolumne County adults between 19-64 years old were uninsured in 2021 The California rate was 10.2%**

1 IN 3 — **Tuolumne County adults are enrolled in the Medi-Cal program**
(over 4000 Tuolumne County children are enrolled in Medi-Cal)

6.3% — **of Tuolumne County youth under the age of 19 years old do not have health insurance compared to the state rate of 3.3%**

Source: American Communities Survey Census 2021[3,4]

COMMUNITY PROFILE

IS THE HEALTHY CHOICE THE EASY CHOICE?

A community's environment contributes to the its health. This is true for the natural environment, including factors like air and water quality, and also for the built environment, including factors like the quality of stores, parks, or sidewalks. For example, some parts of Tuolumne County could be called a "food desert" - an area where there are no or very few options to buy food. Other parts could be called a "food swamp" - an area where there are many options to buy fast food and unhealthy products, but no place to buy fresh, healthy foods. People living in a food desert or a food swamp often have to go out of their way to make healthy choices, which is not always easy.

FOOD ACCESS

According to the Tuolumne County Public Health 2022-2023 Commercial Tobacco Campaign Public Opinion Survey,[6] many people can't usually afford good quality, healthy fresh fruits and vegetables, even when they can find them.

CAN YOU USUALLY FIND GOOD QUALITY FRUITS AND VEGETABLES WHERE YOU LIVE OR SHOP?

CAN YOU USUALLY AFFORD GOOD QUALITY FRUITS AND VEGETABLES WHERE YOU LIVE OR SHOP?

BY THE NUMBERS

In Tuolumne County, there are *approximately*:

- **3** CERTIFIED FARMERS MARKETS *
- **11** GROCERY STORES *
- **26** FAST-FOOD RESTAURANTS* [7]
- **35** DENTISTS *
- **40** PRIMARY CARE PHYSICIANS [8]
- **56** STORES THAT SELL TOBACCO [9]
- **67** STORES THAT SELL ALCOHOL [10]

*2020 estimate. Fast food defined as establishments primarily engaged in providing food services where patrons generally order or select items and pay before eating.

Source: Tuolumne County Public Health Programs Internal Data

VIEW THE HEALTHY STORES, HEALTHY COMMUNITIES SURVEY HERE

ACCESS TO CARE

Access to Care was ranked as the leading concern in the “Health in Tuolumne County 2023” survey. Per the Agency for Healthcare Research and Quality,[11] access to healthcare is defined as "timely use of personal health services to achieve the best health outcomes." Access to healthcare is a significant social determinant of health (SDOH)[4] and addresses factors and barriers to care such as proximity to healthcare services, the cost of care, insurance coverage, and availability of quality services and providers. Challenges in affordable, timely healthcare can greatly impact an individual's health outcomes. Access to care has been identified as a priority area for several years on previous Tuolumne County health assessments.

According to the Centers for Medicaid and Medicare Services (CMS),[12] rural county residents experience barriers to accessing comprehensive, high-quality and affordable healthcare services and also are more likely to not have health insurance. Additionally, rural areas face shortages in practitioners for primary, dental, behavioral health, and specialty care which are compounded by challenges in lack of transportation to facilities and proximity of healthcare facilities in geographically isolated areas. While there are multiple factors that may influence the community's health-seeking behavior, barriers in access to care are likely significant.

Respondents in the “Health in Tuolumne County 2023” survey shared significant concerns regarding lack of healthcare access or difficulty accessing healthcare services for both primary and specialty services. Centers for Disease Control (CDC) Places[13] data found that 65% of Tuolumne County adults report having had a routine health check-up in the last year. Dental providers serving children and those on Medi-Cal are limited in the county. Feedback from Tuolumne County school-based oral health partners indicated that pediatric dental care options within the county are limited and many families report seeking care out of the area for pediatric dental and specialty care. Delays in receiving timely dental care can result in worsening existing dental caries and other oral health conditions among children.

Per the University of Wisconsin Survey, County Health Rankings & Roadmaps,[14] Tuolumne County has less primary care physicians per capita in 2020 than in previous years. The health ranking data reflects 1 physician per 1650 residents while the California average is approximately 1 physician per 1200 residents. Additionally, a CDC report on Physician Visit Patterns[15] found that older adults account for higher per capita medical appointments and that visits for chronic disease issues increased with age. As Tuolumne County’s population has a higher proportion of older adults, the limited number of physicians required to meet the appointment burden of this demographic poses access to care challenges. The significant distance to other medical facilities and specialists that are often located outside of the county is another factor that negatively impacts our residents’ access to care.

ACCESS TO CARE

Use of preventative healthcare screening and care	Age Adjusted Prevalence	
	Tuolumne	United States
Colorectal cancer screening among adults aged 50–75 years old	60.3%	70.6%
Mammography use among women aged 50–74 years old	68.2%	77.8%
Older adult men aged ≥ 65 years old who are up-to-date on a core set of clinical preventive services: flu shot in the past year, PPV shot ever, colorectal cancer screening	39.8%	44.0%
Older adult, women aged ≥ 65 years old who are up-to-date on a core set of clinical preventive services: flu shot in the past year, PPV shot ever, colorectal cancer screening, and a mammogram in the past 2 years	32.4%	37.4%
Taking medicine for high blood pressure control among adults aged ≥ 18 years old with high blood pressure	50.5%	56.3%
Visits to the doctor for routine checkup within the past year among adults aged ≥ 18 years old	65.5%	73.0%

Source: University of Wisconsin Survey, County Health Rankings & Roadmaps [14]
**PPV-Pneumococcal Polysaccharide Vaccine*

TUOLUMNE COUNTY'S MAJOR HEALTHCARE CENTERS

- Adventist Health Sonora Hospital and Outpatient Services
- MACT Health Board Medical and Dental Clinic
- Mathiesen Memorial Health clinic
- Tuolumne Me-Wuk Indian Health Center and Dental clinic.
- Veteran's Administration (VA) Medical Clinic

ORAL HEALTH ACCESS*

- There is approximately 1 dentist for every 1,412 county residents.
- Only 4 out of 27 (15%) of local dental practices accept Medi-Cal dental insurance.
- There are zero dental practices that provide pediatric surgery/sedation for pediatric dental work in Tuolumne County.
- 26% of surveyed Tuolumne County residents report that they cannot find quality, affordable dental care in Tuolumne County. [6]

**Source: Tuolumne County Public Health Programs Manual Count Internal Data*

TO VIEW LOCAL DENTAL PROVIDER INFORMATION CLICK HERE

ACCESS TO CARE IMPROVEMENT PLAN

OBJECTIVE 1: Provide support and education to current and prospective local healthcare providers

STRATEGY	TIMELINE	PARTNERS	METRICS
Strategy 1.1: Coordinate with partners and stakeholders to re-establish the Tuolumne County Medical Society	June 2024 to December 2025	Public Health. Adventist Health Sonora (AHSR), Blue Zones	Coordination meeting agendas and minutes, meeting participant rosters
Strategy 1.2: Support new medical residents coming to Tuolumne County in collaboration with the hospital's training program	July 2024	AHSR	Tracking log of medical providers per capita

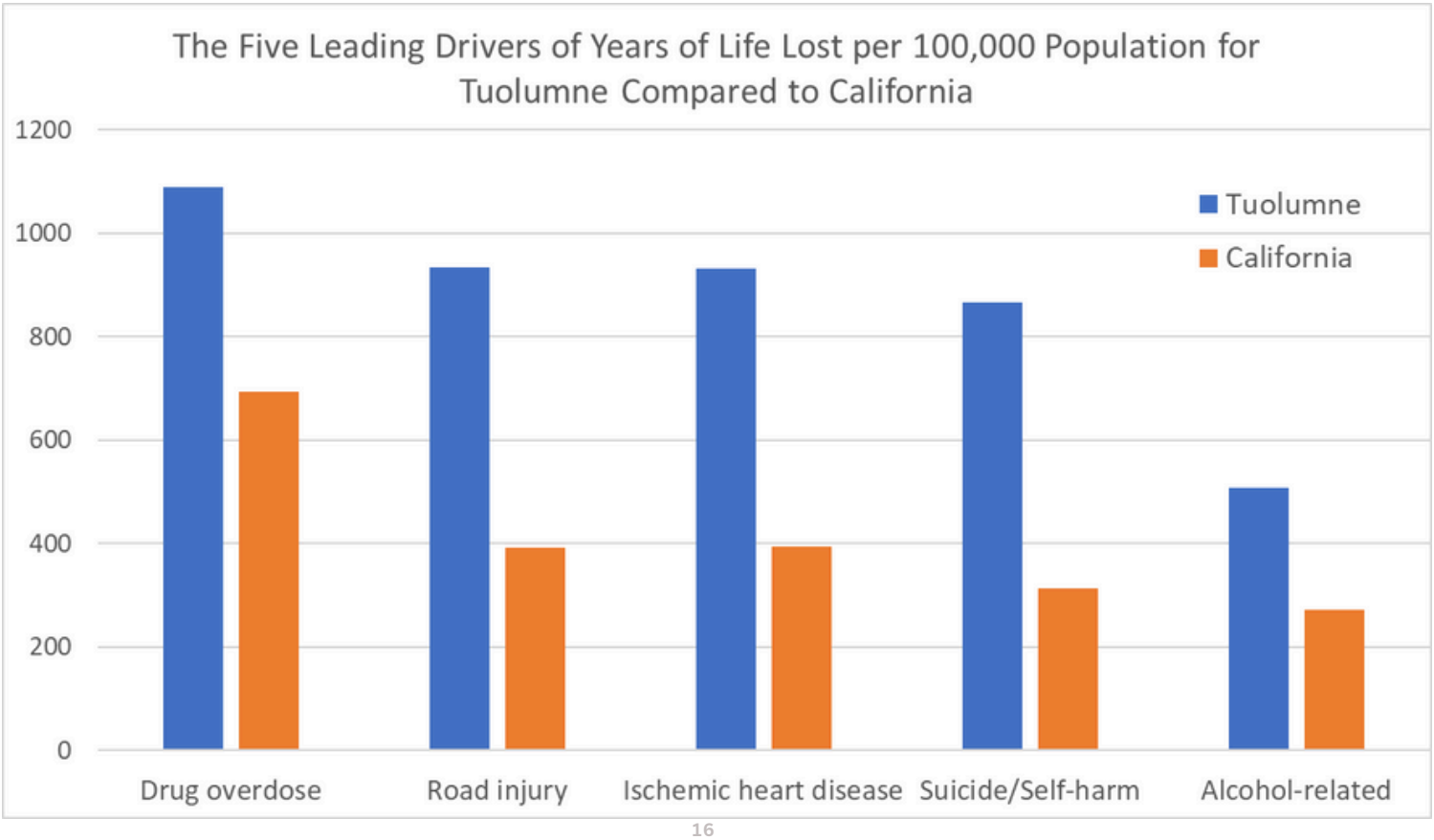
OBJECTIVE 2: Facilitate community education and care connection

STRATEGY	TIMELINE	PARTNERS	METRICS
Strategy 2.1: Agencies and partners will sustain current programming and continue to seek additional program opportunities that provide client healthcare connection and coordination	Ongoing	Tuolumne County Health & Human Services Agency (HHSA), AHSR, local tribal clinics	Resource directory, partner coordination and connection program metric reports
Strategy 2.2: Health Links van will provide care coordination to clients to help facilitate getting into health services	Ongoing	TCPH	Tracking log of number of clients linked to accessing care and receiving care coordination
Strategy 2.3: Reduce preventable emergency room visits by supporting wraparound services from various community groups that connect residents to services	Ongoing	HHSA, local homeless groups, law enforcement	Report of emergency room visit trends
Strategy 2.4: Increase referrals and connections to services through 2-1-1 provider	Ongoing	TCPH	Data report of 2-1-1 calls and referral data
Strategy 2.5: Increase usage of healthcare service transportation methods available in the county	Ongoing	Medi-Cal Managed Care Plans (MCPs)	MCP transportation service quarterly reports
Strategy 2.6: Agencies and partners participate in the annual Tuolumne County Health Fair	Fall	Discover Life Adventist, Adventist Health	Tracking log of a partners and event participants

HEALTH RISK BEHAVIORS

YEARS OF LIFE LOST

Years of Life Lost (YLL) is a public health metric that quantifies premature mortality by calculating the years between an individual's age at death and a standardized life expectancy of 75 years old. Years of Life Lost weights conditions that impact younger people and is sometimes referred to as "premature death". This helps identify causes of early and preventable deaths in a community. **In Tuolumne County, four of the top five causes of YLL can be directly linked to health risk behaviors including drug overdoses, road injuries, suicide/self-harm, and alcohol-related deaths.** Together these causes accounted for 1,758 years of life lost in Tuolumne County in 2022 and a rate of 3,398.5 years of life lost per 100,000 population which is double the state rate from these causes. Most alarmingly, Tuolumne County had the highest rate of suicide-related years of life lost of any county in California in 2022 (per CDPH Community Burden of Disease Engine.[16]



Source: CDPH Community Burden of Disease Engine[16]

HEALTH RISK BEHAVIORS

Health risk behaviors were the second most important issue identified in the "Health in Tuolumne County 2023" responses. Health risk behaviors were defined as use of tobacco, alcohol, and other drugs, self-harm, sexually transmitted infections (STI's), poor diet, and lack of exercise. Tuolumne County ranks above the California rates for certain health behaviors, including tobacco use, excessive alcohol use (including alcohol-impaired driving deaths), and substance use.

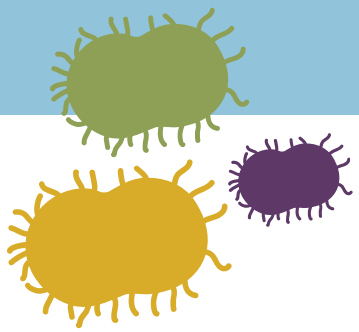
Health Factors	Age Adjusted Prevalence		
	Tuolumne	California	United States
Adult Smoking	14%	9%	16%
Excessive Drinking	23%	18%	19%
Alcohol-Impaired Driving Deaths	35%	28%	27%
Physical Inactivity	18%	21%	22%
Access to Exercise Opportunities	75%	95%	84%
Adult Obesity	29%	30%	32%
Food Environment Index (1-10, higher is better)	7.5	8.8	7
Sexually Transmitted Infections per 100,000 (new chlamydia diagnosis)	218.4	452.2	481.3
Teen Births per 1,000 females aged 14-19	14	16	19

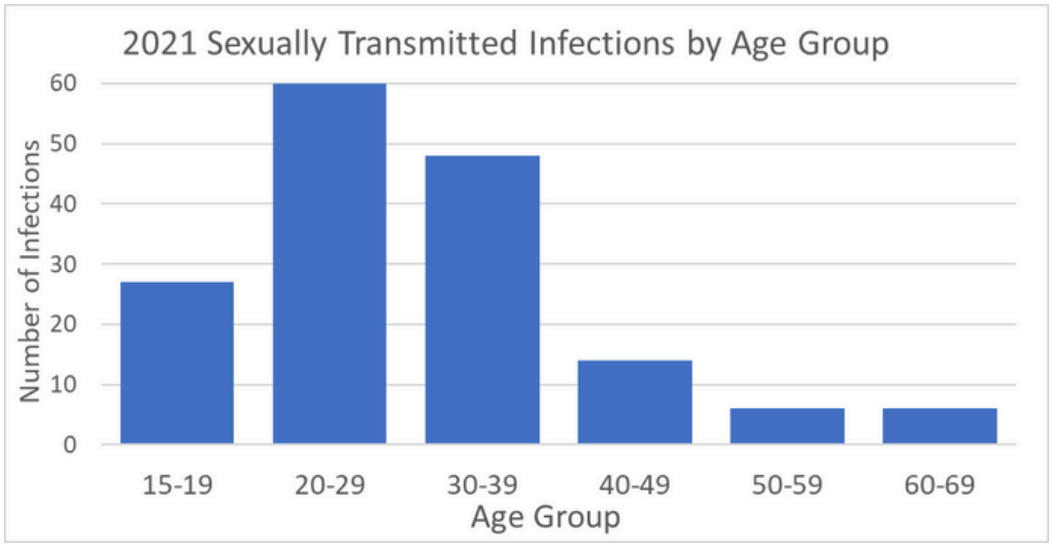
Source: University of Wisconsin Survey, County Health Rankings & Roadmaps[14]

SEXUALLY TRANSMITTED INFECTIONS

161

cases of chlamydia, gonorrhea, and syphilis were newly diagnosed in 2021



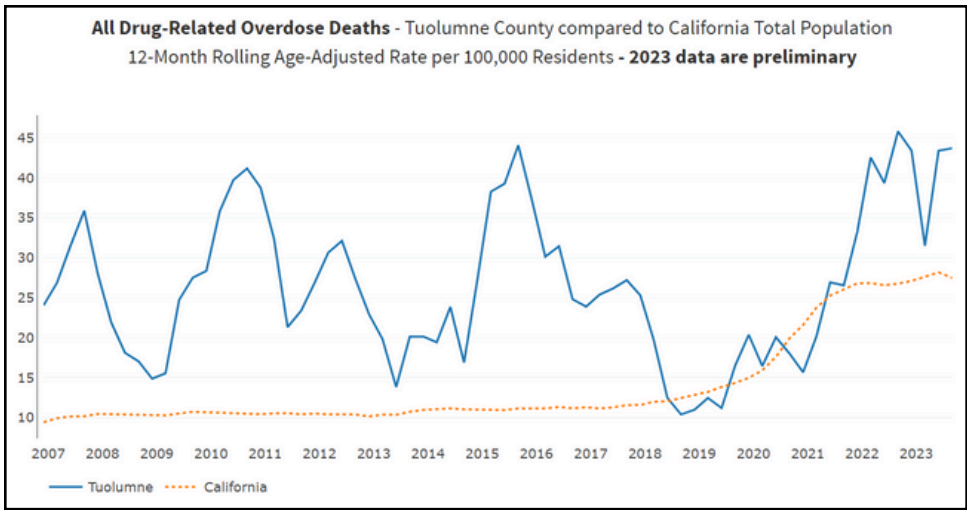


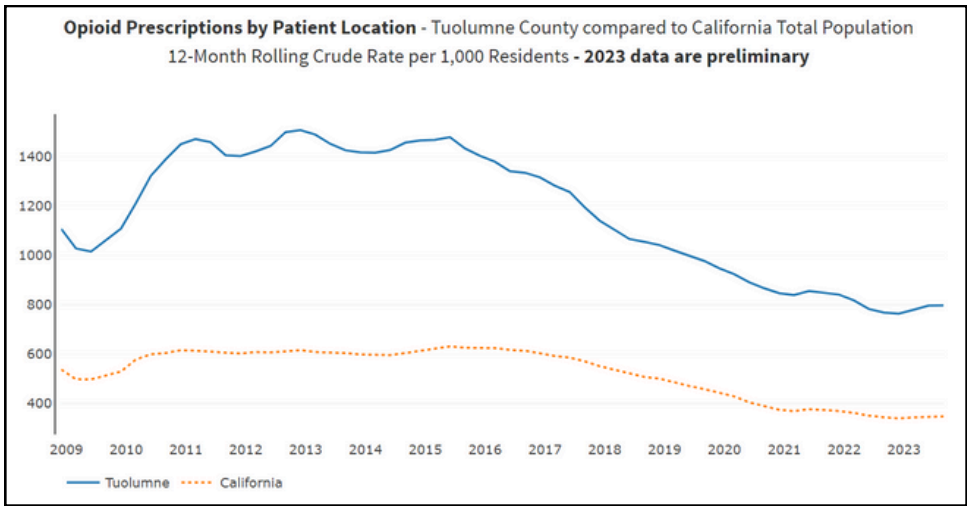
***Source: Tuolumne County Public Health Programs, Communicable Disease*

VIEW STI TESTING AND PREVENTION RESOURCES HERE

HEALTH RISK BEHAVIORS

Tuolumne County experiences alarming opioid prescription rates and prescription overdose deaths. According to the California Opioid Overdose Surveillance Dashboard,[17] in 2021, **Tuolumne County had the highest rate of opioid prescriptions in the state with 84 prescriptions per 100 residents which was more than double the state average**. The county also faces the second highest opioid-related overdose hospitalization rate and the highest daily Morphine Milligram Equivalent (MME) prescribed per resident in the state. Additionally, Tuolumne County has the most residents per capita prescribed over 90 MME of opioids per day. This 90+MME rate poses a significant increased risk for potential overdose; and in general, high prescription rates correlate to higher addiction levels and overdose deaths.





Source: CDPH Overdose Surveillance Dashboard [17]

TUOLUMNE COUNTY OPIOID SAFETY COALITION

Tuolumne's opioid crisis requires urgent and dedicated efforts to:

- **reform prescribing practices**
- **improve access to alternative pain therapies**
- **expand addiction treatment resources.**

Comprehensive strategies encompassing prescribers, patients, law enforcement, and the healthcare system are needed to reduce opioid misuse and protect the safety of Tuolumne County residents.

VIEW THE "PAIN IN THE NATION: THE EPIDEMICS OF ALCOHOL, DRUG, AND SUICIDE DEATHS 2022 REPORT" HERE

HEALTH RISK BEHAVIORS

- 23% of Tuolumne County Adults reported binge or heavy drinking in 2020.[14]

- **ADULTS**: According to the Tuolumne County Public Health 2022-2023 Commercial Tobacco Campaign Public Opinion Survey[6] approximately:
  - **24% of adults use tobacco/nicotine products**
    - 18% smoke (cigarettes, cigars, cigarillos and/or pipe tobacco), 8% vape, 3.5% chew or use smokeless products, and 1% did not specify. Note: 5.5% use more than one type of tobacco (smoking and vaping together is most common).
  - **29% of adults use cannabis/marijuana**
    - 11% use daily and 18% use occasionally
- **YOUTH**: According to the 2022 California Healthy Kids Survey,[18] by their third year of high school, approximately:
  - 26% of high school juniors regularly vape
  - 3% of high school juniors smoke cigarettes
  - 21% of high school juniors use marijuana

Respecting Culture – Keeping Tobacco Sacred

- Tribal communities have been using traditional or sacred tobacco for thousands of years. Traditional or sacred tobacco differs from commercial tobacco in that Indigenous people use it to connect with Creator, Mother Earth, and one another.
- Traditional or sacred tobacco is grown, dried, and has no additives. Native American elders teach that tobacco was one of the 4 sacred medicines (Tobacco, Cedar, Sage and Sweetgrass), which was given by the Creator to the first peoples of this land.
- Commercial tobacco products are not the same thing as traditional or sacred tobacco. Commercial tobacco is filled with chemicals and additives that not only make it highly addictive, but also extremely harmful to human health. Commercial tobacco is full of carcinogens and synthetic chemicals that are lethal and destroy the integrity of the sacred medicine and its purpose to heal and connect. For more information, visit https://keepitsacred.itcmi.org/.

HIGHER LEVELS OF UNHEALTHY MARKETING IN RURAL COMMUNITIES

Rural communities experience a disproportionate burden of commercial tobacco marketing and have higher availability of tobacco products compared to the state. [19]

56

STORES SELL TOBACCO IN TUOLUMNE COUNTY WHICH EQUATES TO 1 STORE FOR EVERY 883 RESIDENTS[9] IN THE COUNTY

TO LEARN MORE ABOUT TOBACCO PREVENTION IN TUOLUMNE COUNTY, CLICK HERE

HEALTH RISK BEHAVIORS IMPROVEMENT PLAN

OBJECTIVE 1: Sustain community partnerships and resources and collaboratively expand and improve resource availability			
STRATEGY	**TIMELINE**	**PARTNERS**	**METRICS**
Strategy 1.1: Continue to collaborate and share information and resources with community partners and coalitions	Ongoing	Public Health, Blue Zones	Coordination meeting agendas and minutes, meeting participant rosters
Strategy 1.2: Sustain and expand the Tuolumne County Opioid Coalition and website	Ongoing	Public Health	Coalition meeting agendas, minutes, and participant rosters. Website analytic reports.
Strategy 1.3: Partner with the Tuolumne County Superintendent of Schools (TCSOS) Office to develop a website dedicated to drug prevention resources for families	March 2025	TCSOS, Public Health	California Healthy Kids Survey (CHKS) reports and website analytic reports.
Strategy 1.4: Collaborate with community partners to offer resources and trainings on Adverse Childhood Experiences (ACES)	Ongoing	Public Health	Tracking log of training dates, participant lists, and training feedback surveys
OBJECTIVE 2: Sustain and expand community outreach and education activities			
Strategy 2.1: Continue to implement, evaluate, and work to expand substance abuse prevention programming to reduce alcohol, tobacco, and other drug use and uptake among youth	Ongoing	Public Health	CHKS Survey data reports
Strategy 2.2: Provide and support community partner programs for tobacco and vaping cessation	June 2025	Public Health, AHS	Tobacco use rates data
Strategy 2.3: Continue participating in and/or hosting mental health community outreach events focused on youth	Fall	Behavioral Health, Public Health, Tuolumne Me Wuk Indian Health Center	Tracking log of event dates and participating organizations.

HEALTH RISK BEHAVIORS IMPROVEMENT PLAN

OBJECTIVE 2 continued: Sustain community partnerships and resources and collaboratively expand and improve resource availability

STRATEGY	TIMELINE	PARTNERS	METRICS
Strategy 2.4: Continue to collaborate with community partners to expand education and outreach to schools and general community on health risk behaviors such as: sexual health, substance abuse, personal safety, violence prevention, etc.	Ongoing	Public Health, violence prevention non-profits	Tracking log of events and participants
Strategy 2.5: Provide equipment, such as car seats, life jackets and helmets, to promote and provide safety information to families in the community	Ongoing	Public Health, California Highway Patrol Sonora	Event tracking log, equipment distribution tracking log
Strategy 2.6: Expand harm reduction items and reduce barriers to access by providing a health resources vending machine to provide naloxone, safe sex kits, tobacco cessation kits, etc. in easy to access places in the community	December 2024	Public Health	Log of all vending machines and inventory/dispensing reports.
Strategy 2.7: Provide STI education, information, and resources for care through the Health Links Van	Ongoing	Public Health	Tracking log of van outreach events and distribution log of STI materials and items

HEALTH CONDITIONS

HEALTH CONDITIONS AFFECT OUR ABILITY TO FUNCTION AND ENJOY LIFE.

Per the CDC,[20] chronic diseases are defined as conditions that "last 1 year or more and require ongoing medical attention or limits the activities of daily living or both". Common health conditions include: chronic lung disease, heart disease, stroke, diabetes, Alzheimer's disease, and chronic kidney diseases. These diseases can often be prevented or controlled when certain risk factors are mitigated such as diet, exercise, and reducing tobacco and alcohol use. The "Health in Tuolumne Survey" identified Health Conditions as the third priority for the community's health efforts.

According to the 2023 County Health Rankings and Roadmaps which ranks current health status in the state,[14]

TUOLUMNE IS RANKED 33RD OUT OF THE 58 CALIFORNIA COUNTIES

In 2021, the leading causes of death in Tuolumne County were:

- COVID-19
- ALZHEIMER'S DISEASE
- ISCHEMIC HEART DISEASE
- STROKE
- CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)

Between 2011 and 2021, the following conditions have seen the greatest increase in age-adjusted death rates:[16,21]

- Diabetes mellitus increased by 90.8% increase
- Cardiomyopathy increased by 74.2%
- Hypertensive Heart Disease increased by 49.3%

Alternatively, lung cancer and ischemic heart disease experienced the greatest decrease in age-adjusted death rates at 48% and 33.6%, respectively.[16,21]

Chronic health conditions can impart a significant burden on both the persons experiencing them but also on the families, caregivers, and medical system. Alzheimer's disease, in particular, has seen a 138% increase of age-adjusted death rate over the last 20 years.[16,21]

Additionally, the increase in the number of the medically vulnerable in our population and those requiring skilled nursing care has been significant in Tuolumne County. This vulnerability was highlighted during the COVID-19 pandemic in 2020-2023.

RURAL DATA SETS

Tuolumne County has a small and demographically distinctive population that poses challenges for comparing rates of some diseases and chronic conditions to state averages. The small population sample sizes may significantly impact year to year rates compared to trends when rates are compared over longer periods of time.

HEALTH CONDITIONS

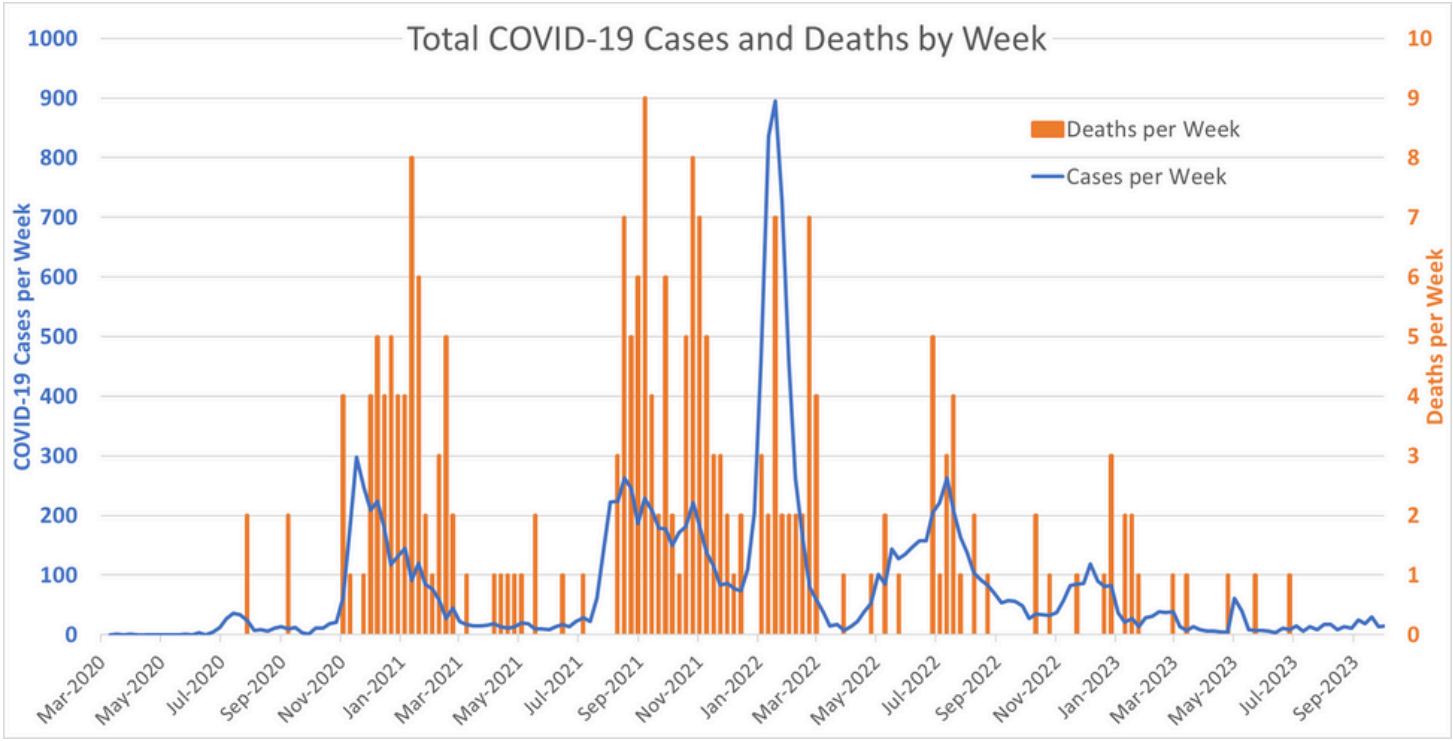
COVID-19

Starting in January of 2020, Tuolumne County Public Health began responding to the global COVID-19 pandemic. From the first confirmed case in March 2020 through September 2023, the county recorded over 15,332 COVID-19 community cases as well as an additional 3,387 non-community cases in the local state prison, Sierra Conservation Center (SCC).

8,300 women and 7,000 men had reported testing positive for the virus before testing and reporting methods changed at the end of the declared pandemic. The highest rate of infection was among those who were 25-49 years old where almost 40% of residents tested positive compared to around 25% of people over the age of 75.

There were at least 225 deaths attributed to COVID-19 in our community. In 2021, COVID-19 was the leading cause of death in Tuolumne County, with an age-adjusted date rate of 128.8 per 100,000 compared to the state rate of 91.1 per 100,000 [10]. Deaths were more common among older men, with 140 men dying compared to 85 women. Men over 75 years old experienced a case fatality rate of 9.7% compared to 6.3% among women. The case fatality rate for all ages was 1.5%, meaning 1 in 68 confirmed COVID-19 infections led to death. Among cases age 80 and older, almost 1 in 10 died.

While the number of cases have significantly decreased through 2023, COVID-19 transmission continues to occur in the community and the department continues to coordinate disease mitigation and COVID-19 vaccination efforts.



Internal Source: Tuolumne County Public Health COVID-19 Response Data

HEALTH CONDITIONS IMPROVEMENT PLAN

STRATEGY	TIMELINE	PARTNERS	METRICS
OBJECTIVE 1: Increase community member awareness of and access to nutritious foods.			
Strategy 1.1: Increase mobile access to fresh fruits and vegetables throughout the community	December 2026	Blue Zones, Tuolumne Thrives Coalition	Tracking log of available mobile farmer's markets
Strategy 1.2: Promote the new Women, Infants, and Children (WIC) food package expansion of available healthy food	June 2024 to June 2026	Public Health, WIC	Tracking log of WIC participants served in the program
Strategy 1.3: Provide nutrition education in youth settings such as schools, youth centers, etc. to educate about how to incorporate fruits and vegetables into a healthy, balanced diet.	Ongoing	Public Health, Tuolumne Thrives Coalition	Tracking log of educational classes and outreach performed
Strategy 1.4: Support community partner efforts to host and provide group cooking demonstrations to promote healthy eating to adults	Ongoing	Public Health, Blue Zones	Tracking log of van outreach events and distribution log of STI materials and items
Strategy 1.5: Support community partner activities to expand healthy dining options and healthy restaurant certifications (such as Blue Zones-Approved)	Ongoing	Blue Zones	Tracking log of Blue Zones-approved dining establishments
OBJECTIVE 2: Improve access to and opportunities for active living.			
Strategy 2.1: Develop and distribute print and online resources such as the Tuolumne Go Guide, Recreation Department Guide, Visitor's Bureau, and Resource Directory, to promote active living activities such as trails and parks	June 2024	Public Health	Copies of guides
Strategy 2.2: Support partner efforts to develop, expand, or sustain low or no-cost community physical activity opportunities such as walking groups, park events, etc.	Ongoing	Public Health, Blue Zones	Copies of physical activity flyers, program brochures, and promotion materials

HEALTH CONDITIONS IMPROVEMENT PLAN

OBJECTIVE 3: Empower individuals to manage their health through education and promotion of wellness programs			
STRATEGY	**TIMELINE**	**PARTNERS**	**METRICS**
Strategy 3.1: Identify health condition issues and provide appropriate health education and resource referrals for participants of the Health Links Van to manage conditions	Ongoing	Public Health	Tracking log of Health Links van screenings and participation logs
Strategy 3.2: Support workplace wellness initiatives in the community and among employers in the county	Ongoing	Public Health, Blue Zones, business community partners	Copies of workplace adopted wellness policies, tracking log of workplaces with official or Blue Zones-approved policies

SUMMARY

Tuolumne County Public Health envisions a safe and thriving community where every person achieves optimal health. We appreciate the input of our community partners and residents in the development of our Community Health Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP) through which we identified priority areas and achievable goals aimed to attain this vision.

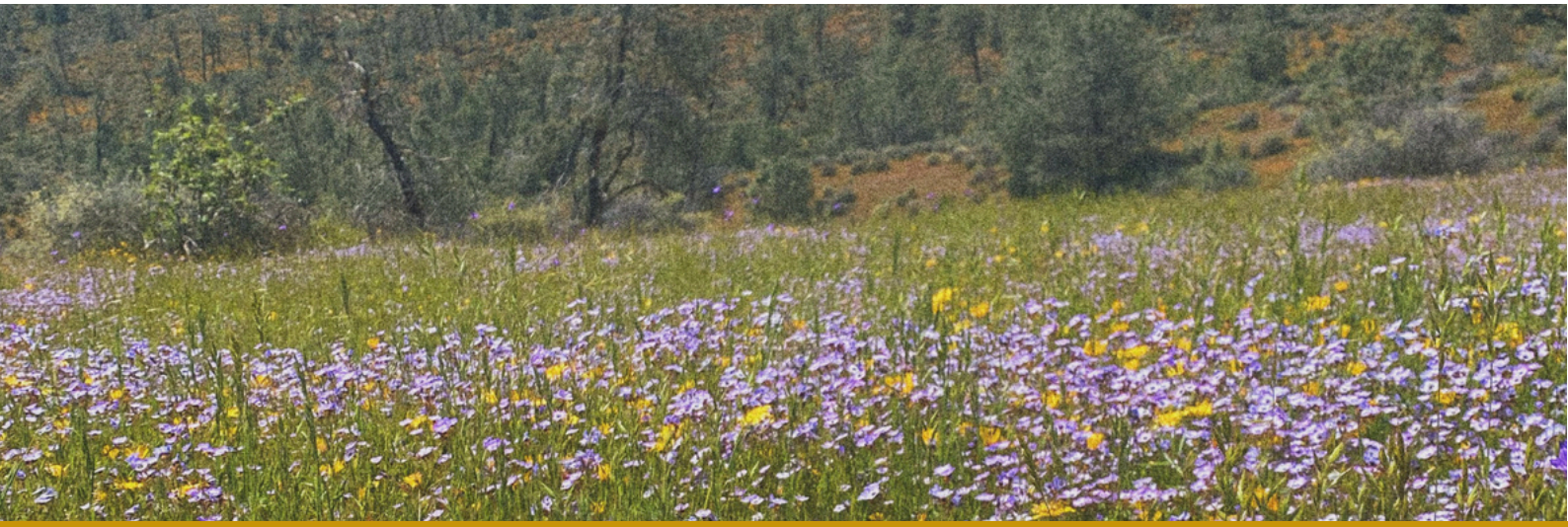
The objective of the CHA and CHIP is to address challenges and leverage the existing strengths of the community and its diverse organizations to improve the health and well-being of all Tuolumne County residents.

Tuolumne County has many strengths that can be utilized to achieve these objectives, including strong partnerships between agencies, established and active coalitions, and vibrant community outreach and engagement. Collaboration with other agencies will be essential in implementing and evaluating solution-focused opportunities to improve health in the county. Meeting the unique health and wellness needs of the community is a substantial and evolving challenge and it will be vital to work together.

As we implement the Improvement Plan, we will continue to track and analyze data to evaluate the effectiveness of interventions. This data will be transparently presented via our website and through updates to the Board of Supervisors. With this collective commitment to wellness, we can move the needle towards a healthier, thriving Tuolumne County.

"Start where you are.
Use what you have.
Do what you can."

-Arthur Ashe



REFERENCES

1. Adventist Health Sonora. Adventist Health Sonora Community Health Assessment 2022. Published December 31, 2022. Accessed May 15, 2023. https://www.flipsnack.com/E7DDD888B7A/adventist-health-sonora-2022-chna-report/full-view.html
2. California Department of Finance, County Population Projections (2020-2060), P-2C County Population by Sex and Age Group. Retrieved November 2023. https://dof.ca.gov/forecasting/demographics/projections/
3. U.S. Census Bureau. (2021). American Communities Survey, ACS 5-Year Estimates Data Profiles, Retrieved November 1, 2023. https://data.census.gov/table?g=050XX00US06109_040XX00US06&y=2021&d=ACS+5-Year+Estimates+Data+Profiles
4. U.S. Census Bureau. (2021). American Communities Survey, ACS 5-Year Estimates Subject Tables, Retrieved November 1, 2023. https://data.census.gov/table?g=040XX00US06_050XX00US06109&y=2021&d=ACS+5-Year+Estimates+Subject+Tables
5. Centers for Disease Control and Prevention. Social Determinants of Health at CDC. Last Reviewed: December 8, 2022. Accessed September 2023 https://www.cdc.gov/about/sdoh/index.html
6. Tuolumne County Public Health Department. 2022-2023 Commercial Tobacco Campaign Public Opinion Survey 2022-2023.
7. SparkMap website. Fast Food restaurant, Rate(Per 100,000) by County, CBP 2017. Accessed October 2023. https://sparkmap.org/map-room/?ids=31877
8. California Health Care Foundation. California Maps: How Many Primary Care and Specialists Are in Your County. Published August 18, 2017. Accessed August 2023 https://www.chcf.org/publication/california-maps-primary-care-specialist-physicians-county/
9. California Department of Tax and Fee Administration. California Cigarette & Tobacco Products Licensees. Accessed September 2023. https://www.cdtfa.ca.gov/taxes-and-fees/cigarette-licensees.htm
10. California Department of Alcoholic Beverage Control. License Report Ad-Hoc. Accessed September 2023. https://www.abc.ca.gov/licensing/licensing-reports/adhoc-report/?RPTTYPE=8&COUNTY=55
11. Agency for Healthcare Research and Quality. Topic: Access to Care. Accessed October 16, 2023 https://www.ahrq.gov/topics/access-care.html
12. Centers for Medicare & Medicaid Services. Rural Health. Accessed September 2023 https://www.cms.gov/priorities/health-equity/rural-health
13. Centers for Disease Control and Prevention. CDC Places: Local Data for Better Health. Accessed August 2023 https://places.cdc.gov/?view=county&locationIds=06109
14. University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2023. Accessed June, 12 2023 www.countyhealthrankings.org
15. Ashman J, Santo L, Okeoda T, et al. Characteristics of Office-based Physician Visits by Age. 2019. CDC National Health Statistics Report. 2023; 184. Accessed August 2023 https://www.cdc.gov/nchs/data/nhsr/nhsr184.pdf
16. California Department of Public Health. CDPH Community Burden of Disease Engine. Accessed August 2023 https://skylab.cdph.ca.gov/communityBurden/
17. California Department of Public Health (CDPH - Substance and Addiction Prevention Branch (SAPB) . California Overdose Surveillance Dashboard. Accessed November 8, 2023. https://skylab.cdph.ca.gov/ODdash/
18. California School Climate, Health, and Learning Surveys (CalSCHLS). California Healthy Kids Survey. Published 2021-2022. Accessed September 2023. https://calschls.org/about/the-surveys/#chks
19. American Psychological Association. American Psychological Association Fact Sheet, Smoking and Tobacco Use in Rural Populations. Accessed September 2023. https://www.apa.org/pi/health-equity/resources/smoking-rural-populations/
20. Centers for Disease Control and Prevention. National Center for Chronic Disease Prevention and Health Promotion. Accessed September 27, 2023. https://www.cdc.gov/chronicdisease/about/index.htm
21. California Department of Public Health. California State Health Assessment Core Module 2023, Tuolumne County Data. Accessed September 2023 https://skylab.cdph.ca.gov/communityBurden/_w_1e518dfd/SOPH/2023/Full%20Report.html

DEFINITIONS

Access to Care: ability to obtain healthcare services such as prevention, diagnosis, treatment, and management of diseases, illness.

Age-Adjusted Rate: a statistical process applied to rates of disease, death to allow comparison of different age groups**.**

Aggregated Data: data that is combined from multiple sources or measures.

Chronic Disease and Rates: conditions that last 1 year or more, and the percentages of those diseases in populations.

Community Health Needs Assessment: a systematic process for determining health needs of a population or community.

Community Health Improvement Plan: a long term systematic effort to address public health problems identified in a community health assessment.

Feasibility: degree of being easily done.

Financial Stability: able to pay monthly living expenses with extra money left over.

Food Security: having reliable access to enough affordable food.

Goal Alignment: process to move toward a shared objective to maximize performance.

Health Conditions: condition of the body and the state of health.

Health Data: data related to health conditions.

Health Resources: the means available to function well physically, mentally, socially, also the means available to operate health systems.

Health Risk Behaviors: acts that can increase the risk of disease or injury.

Health Status and Indicators: a measure(s) of how people perceive their health, a measurable characteristic.

Inclusion and Equity: a culture that is welcoming to all people and ensuring access and resources to grow especially those who have been underrepresented and disadvantaged.

Innovations: new ideas or techniques.

Leverage: to use to obtain a desired result.

Mortality: proportion of deaths to population.

Social Determinants of Health: the conditions in the environments where people are born, grow, work, live, and age. Learn more at: https://health.gov/healthypeople/priority-areas/social-determinants-health

Strategies: a plan of action or policy to achieve a goal.

Systemic: relating to a system.

APPENDIX 1

COMMUNITY HEALTH IMPROVEMENT PLAN 2024
OBJECTIVES & STRATEGIES

ACCESS TO CARE

OBJECTIVE 1: Provide support and education to current and prospective local healthcare providers

STRATEGY	TIMELINE	PARTNERS	METRICS
Strategy 1.1: Coordinate with partners and stakeholders to re-establish the Tuolumne County Medical Society	June 2024 to December 2025	Public Health. Adventist Health Sonora (AHSR), Blue Zones	Coordination meeting agendas and minutes, meeting participant rosters
Strategy 1.2: Support new medical residents coming to Tuolumne County in collaboration with the hospital's training program	July 2024	AHSR	Tracking log of medical providers per capita

OBJECTIVE 2: Facilitate community education and care connection

STRATEGY	TIMELINE	PARTNERS	METRICS
Strategy 2.1: Agencies and partners will sustain current programming and continue to seek additional program opportunities that provide client healthcare connection and coordination	Ongoing	Tuolumne County Health & Human Services Agency (HHSA), AHSR, local tribal clinics	Resource directory, partner coordination and connection program metric reports
Strategy 2.2: Health Links van will provide care coordination to clients to help facilitate getting into health services	Ongoing	TCPH	Tracking log of number of clients linked to accessing care and receiving care coordination
Strategy 2.3: Reduce preventable emergency room visits by supporting wraparound services from various community groups that connect residents to services	Ongoing	HHSA, local homeless groups, law enforcement	Report of emergency room visit trends
Strategy 2.4: Increase referrals and connections to services through 2-1-1 system	Ongoing	TCPH	Data report of 2-1-1 calls and referral data
Strategy 2.5: Increase usage of healthcare service transportation methods available in the county	Ongoing	Medi-Cal Managed Care Plans (MCPs)	MCP transportation service quarterly reports
Strategy 2.6: Agencies and partners participate in the annual Tuolumne County Health Fair	Fall	Discover Life Adventist, Adventist Health	Tracking log of a partners and event participants

APPENDIX 1

COMMUNITY HEALTH IMPROVEMENT PLAN 2024
OBJECTIVES & STRATEGIES

HEATLTH RISK BEHAVIORS

STRATEGY	TIMELINE	PARTNERS	METRICS
OBJECTIVE 1: Sustain community partnerships and resources and collaboratively expand and improve resources			
Strategy 1.1: Continue to collaborate and share information and resources with community partners and coalitions	Ongoing	Public Health, Blue Zones	Coordination meeting agendas and minutes, meeting participant rosters
Strategy 1.2: Sustain and expand the Tuolumne County Opioid Coalition and website	Ongoing	Public Health	Coalition meeting agendas, minutes, and participant rosters. Website analytic reports.
Strategy 1.3: Partner with the Tuolumne County Superintendent of Schools (TCSOS) Office to develop a website dedicated to drug prevention resources for families	March 2025	TCSOS, Public Health	California Healthy Kids Survey (CHKS) reports and website analytic reports.
Strategy 1.4: Collaborate with community partners to offer resources and trainings on Adverse Childhood Experiences (ACES)	Ongoing	Public Health	Tracking log of training dates, participant lists, and training feedback surveys
OBJECTIVE 2: Sustain and expand community outreach and education activities			
Strategy 2.1: Continue to implement, evaluate, and work to expand substance abuse prevention programming to reduce alcohol, tobacco, and other drug use and uptake among youth	Ongoing	Public Health	CHKS Survey data reports
Strategy 2.2: Provide and support community partner programs for tobacco and vaping cessation	June 2025	Public Health, AHS	Tobacco use rates data
Strategy 2.3: Continue participating in and/or hosting mental health community outreach events focused on youth	Fall	Behavioral Health, Public Health, Tuolumne Me Wuk Indian Health Center	Tracking log of event dates and participating organizations.
Strategy 2.4: Continue to collaborate with community partners to expand education and outreach to schools and general community on health risk behaviors such as: sexual health, substance abuse, personal safety, violence prevention, etc.	Ongoing	Public Health, violence prevention non-profits	Tracking log of events and participants

APPENDIX 1

COMMUNITY HEALTH IMPROVEMENT PLAN 2024
OBJECTIVES & STRATEGIES

HEATLTH RISK BEHAVIORS (CONTINUED)

STRATEGY	TIMELINE	PARTNERS	METRICS
Strategy 2.5: Provide equipment, such as car seats, life jackets, and helmets, to promote and provide safety information to families in the community	Ongoing	Public Health, California Highway Patrol Sonora	Event tracking log, equipment distribution tracking log
Strategy 2.6: Expand harm reduction items and reduce barriers to access by providing a health resources vending machine to provide naloxone, safe sex kits, tobacco cessation kids, etc. in easy to access places in the community	December 2024	Public Health	Log of all vending machines and inventory/dispensing reports.
Strategy 2.7: Provide STI education, information, and resources for care through the Health Links Van	Ongoing	Public Health	Tracking log of van outreach events and distribution log of STI materials and items

HEALTH CONDITIONS

OBJECTIVE 1: Increase community member awareness of and access to nutritious foods.

STRATEGY	TIMELINE	PARTNERS	METRICS
Strategy 1.1: Increase mobile access to fresh fruits and vegetables throughout the community	December 2026	Blue Zones, Tuolumne Thrives Coalition	Tracking log of available mobile farmer's markets
Strategy 1.2: Promote the new Women, Infants, and Children (WIC) food package expansion of available healthy food	June 2024 to June 2026	Public Health, WIC	Tracking log of WIC participants served in the program
Strategy 1.3: Provide nutrition education in youth settings such as schools, youth centers, etc. to educate about how to incorporate fruits and vegetables into a healthy, balanced diet	Ongoing	Public Health, Tuolumne Thrives Coalition	Tracking log of educational classes and outreach performed
Strategy 1.4: Support community partner efforts to host and provide group cooking demonstrations to promote healthy eating to adults	Ongoing	Public Health, Blue Zones	Tracking log of van outreach events and distribution log of STI materials and items
Strategy 1.5: Support community partner activities to expand healthy dining options and healthy restaurant certifications (such as Blue Zones approved)	Ongoing	Blue Zones	Tracking log of Blue Zones-approved dining establishments

APPENDIX 1

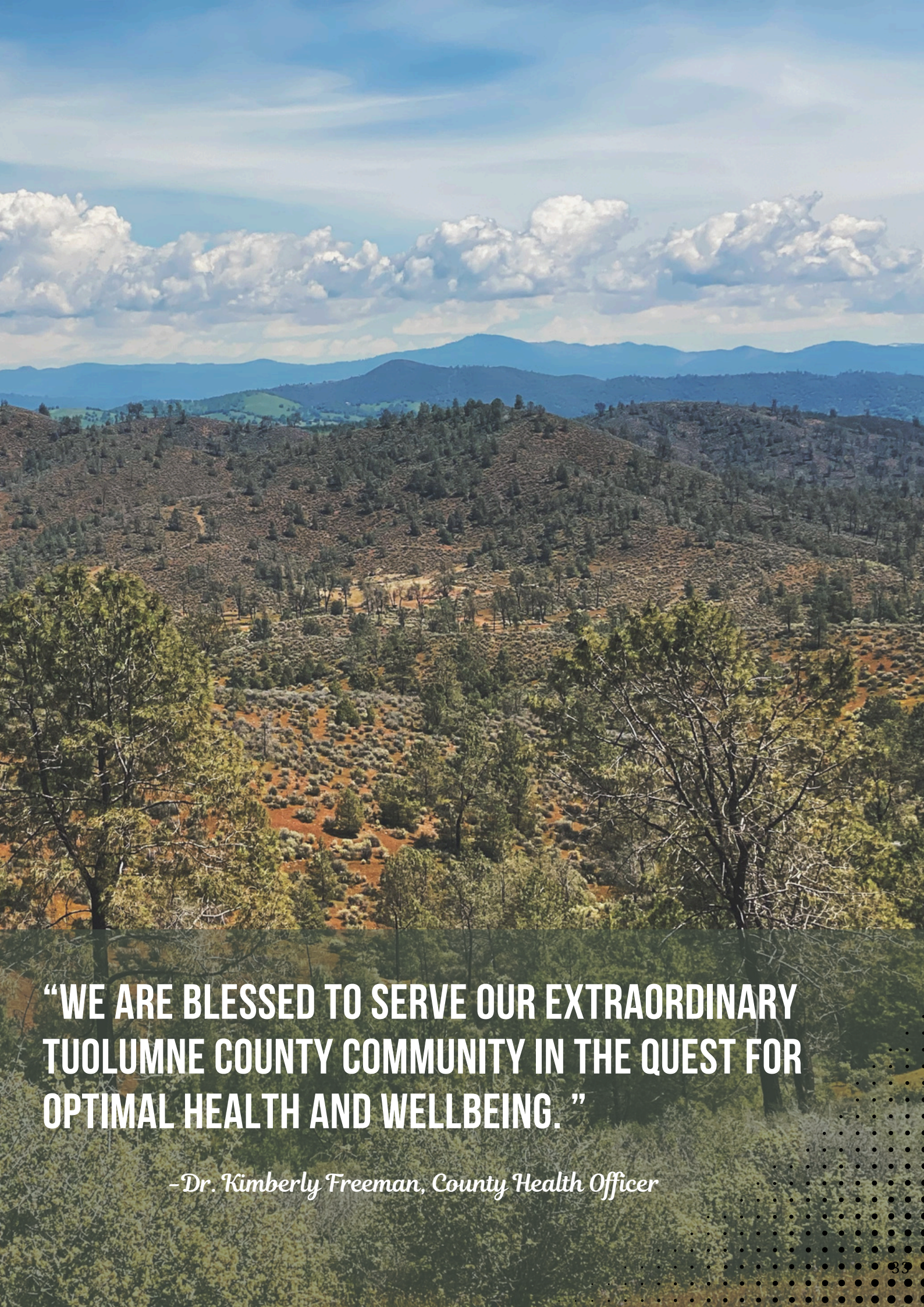
COMMUNITY HEALTH IMPROVEMENT PLAN 2024
OBJECTIVES & STRATEGIES

HEALTH CONDITIONS (CONTINUED)

STRATEGY	TIMELINE	PARTNERS	METRICS
OBJECTIVE 2: Improve access to and opportunities for active living.			
Strategy 2.1: Develop and distribute print and online resources such as the Tuolumne Go Guide, Recreation Department Guide, Visitor's Bureau, and Resource Directory to promote active living activities such as trails and parks	June 2024	Public Health	Copies of guides
Strategy 2.2: Support partner efforts to develop, expand, or sustain low or no-cost community physical activity opportunities such as walking groups, park events, etc.	Ongoing	Public Health, Blue Zones	Copies of physical activity flyers, program brochures, and promotion materials
OBJECTIVE 3: Empower individuals to manage their health through education and promotion of wellness programs			
Strategy 3.1: Identify health condition issues and provide appropriate health education and resource referrals for participants of the Health Links Van to manage conditions	Ongoing	Public Health	Tracking log of Health Links van screenings and participation logs
Strategy 3.2: Support workplace wellness initiatives in the community and among employers in the county	Ongoing	Public Health, Blue Zones, business community partners	Copies of workplace adopted wellness policies, tracking log of workplaces with official or Blue Zones-approved policies

“THIS IS OUR COMMUNITY, A WONDERFUL ONE. TOGETHER WE CAN IDENTIFY & WORK ON WAYS TO MAKE IT EASIER FOR EACH PERSON TO LIVE THEIR BEST & HEALTHIEST LIFE IN TUOLUMNE COUNTY.”

–Michelle Jachetta, Public Health Director



"WE ARE BLESSED TO SERVE OUR EXTRAORDINARY TUOLUMNE COUNTY COMMUNITY IN THE QUEST FOR OPTIMAL HEALTH AND WELLBEING. "

-Dr. Kimberly Freeman, County Health Officer

TUOLUMNE COUNTY PUBLIC HEALTH

PREVENT · PROMOTE · PROTECT

Connect with us!

FACEBOOK

LINKTREE

WEBSITE

(209) 533-7401

health@tuolumnecounty.ca.gov

20111 Cedar Road North, Sonora, CA 95370