

Response to Grand Jury Report

Report Title: Maternal, Child, and Adolescent Health - *Caring for the Most Vulnerable*

Report Date: June 15, 2017

Response By: Barbie Robinson

Title: Health Services Director

Ellen Bauer

Title: Public Health Division Director

Agency: Sonoma County Department of Health Services

READ AND CONSIDERED
9.8.17 Ballinger
DATE BY
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SUPERIOR COURT OF CALIFORNIA
COUNTY OF SONOMA
SEP 18 2017
BY 
Deputy Clerk

FINDINGS

F1. Miscommunication related to retirement benefits in the Public Health Division contributed to the resignation of experienced Public Health Nurses.

We disagree wholly or partially with finding numbered F1.

Response: Information circulating in the community in June 2016 regarding a possible settlement to a lawsuit related to retiree health benefits (Sonoma County Association of Retired Employees versus Sonoma County) seemed to be an issue of concern that spurred a number of experienced Public Health Nurse and other County employee retirements prior to June 30, 2016. The County of Sonoma did not share information publicly on confidential mediation proceedings that were underway in the spring of 2016. (Note: An August 7, 2016 article in the Press Democrat reported a total of 47 County retirements in June 2016, a 175 increase from the previous year, including ten in Permit & Resource Management Department and six in Department of Transportation & Public Works.)

F2. Poor communication between the upper management of Department of Health Services and the staff in the trenches has resulted in poor morale.

We agree with finding numbered F2.

Response: It is true that the wave of Public Health Nurse retirements in June 2016 and the inability to fill Public Health Nurse vacancies created a feeling of concern and low morale among the remaining Public Health Nurse team and that a historic lack of communication between management and staff regarding fiscal challenges contributed to the low morale. The Department's Executive Team, however, has taken a number of significant steps to improve communication.

Upon assuming the Health Services Director position in September 2016, the Director initiated and recently completed a series of "listening tours" throughout the Divisions to learn about program services and challenges and share with staff her vision for the future. In addition, the Director initiated all-staff meetings (webcasts) to bring issues of importance directly to staff, including sharing with staff the fiscal challenges facing the Department. Since September 2016, two all-staff meetings (webcasts) have been held. The intent is to hold two meetings per year going forward. In addition, with the goal of improved communication across the Department and increased operational efficiencies, the Director requested the Assistant Director convene an ongoing meeting with experienced administrative managers across the organization prior to new guideline and policy implementation.

It is the responsibility of management throughout the organization to provide leadership, communication, and guidance to all staff including proactively sharing information with staff. Each member of the Executive Team is committed to providing additional regular and timely two-way communication with staff, with the goal of continued improvement in staff morale (see Communication Plan below).

F3. The policy of reducing Public Health Nurse outreach to at-risk populations creates the appearance of efficiency by failing to count these clients, and thus creates a false impression of achievement.

We disagree wholly or partially with finding numbered F3.

Response: The Department is committed to improving health outcomes for the highest need residents in Sonoma County, including at-risk pregnant women, their babies and families. There is no policy to reduce Public Health Nurse outreach to at-risk populations. Instead, the Department continues to implement best practices, evaluate outcomes, and foster partnerships to deliver services in the most efficient and effective ways to meet the needs of our clients.

There are approximately 2,000 low-income births each year in Sonoma County. Of these 2,000 births, the Department's Field Nursing program prioritizes families with the highest medical/social needs. Over 80 percent of Field Nursing clients have two or more risk factors, in addition to being low income. The most common risk factors are mental health concerns, homelessness or housing insecurity, substance use, domestic violence, and medical concerns for mother or baby.

Partnership with clinics, hospitals, community-based organizations, and other county departments are critical to the success of these efforts, given that client needs are multiple and complex. The Department of Health Services is committed to identifying the right services, at the right level, in the right places. This may mean identifying partners who are better positioned to deliver a continuum of services in order to achieve higher levels of efficiency and effectiveness.

Increased outreach could help engage additional at-risk women and babies who are not connected to services. The Department recognizes that an effective strategy for identifying and delivering comprehensive services involves agencies well beyond the county. Given limited resources, the Department is actively pursuing strategies to utilize existing funding in a more effective way through coordinating and leveraging expertise of other programs and providers. The Department is committed to collaborating within the Departments' divisions, with other county and community providers to ensure that we are providing the highest quality of services, breaking down silos, and sharing resources to meet the needs of high-risk families.

F4. Maternal, Child and Adolescent Health's ability to prevent Adverse Childhood Experiences has been seriously undermined by the reduction in Field Nursing staff from eleven to six.

We disagree wholly or partially with finding numbered F4.

Response: Childhood experiences, both positive and negative, have a tremendous impact on the health and well-being of a child. Adverse childhood experiences include a broad range of stressful and traumatic events such as physical abuse/neglect, sexual abuse, violence, substance abuse, parental separation/divorce, incarcerated household member, etc. While it is true that home visiting professionals are uniquely positioned to talk with parents about adverse childhood experiences and how their adverse childhood experiences histories may be influencing their lives, the Department and the Maternal, Child and Adolescent Health

program is actively working to prevent and address the negative impacts of adverse childhood experiences in many other ways along the spectrum of prevention. For example, through its Mobilizing Action for Resilient Communities grant, Adverse Childhood Experiences and Resiliency Fellowship, and participation in the Sonoma County Adverse Childhood Experiences Connection coalition, the Department is working to build broader community understanding and expand community capacity to prevent the transmission of adverse childhood experiences to future generations. Similar to other public health issues, a successful strategy will require the Department coordinate and build relationships with community providers through strong collaborative efforts.

RECOMMENDATIONS

R1. To avoid a rise in financial and social costs associated with Adverse Childhood Experiences, the Director of Department of Health Services should develop a plan for maintaining or increasing adequate staffing levels of Maternal, Child and Adolescent Health Public Health Nurses. It is recommended that improvements be implemented no later than October 31, 2017; and it is requested that information on the plan be submitted to the Sonoma County Grand Jury by that date.

This recommendation will not be implemented.

Response: The Department continually assesses our current delivery models and options for expanding and strengthening the impact of all of our programs, including the home visiting programs, within available resources.

The Department has historically had difficulty hiring and retaining Public Health Nurses (including bilingual staff) as a result of private sector entities able to offer more competitive compensation packages. The Department's recruitment efforts will continue to be aggressive in order to ensure qualified individuals are aware of these recruitments and the benefits of working for the County of Sonoma. The Department will work with our community partners to develop recommendations for potential improvements to our Maternal Child Adolescent Health system of care, including exploration of possible new funding sources. However, the preparation of a meaningful plan does not change the market factors that impact our Public Health Nurse recruitments, and would only serve to add additional burden on limited resources.

R3. The Directors of Department of Health Services and Public Health Division develop a plan to improve communication between all positions within the Department of Health Services.

This recommendation has been implemented and will continue to be implemented.

Response: The Directors of Department of Health Services and Public Health Division have developed a communication plan (see below) that builds on principles of change management and will be helpful in aligning our team, building support for the validity of our direction, and energizing the team to rise to the challenges and opportunities ahead.

The Department's FY 17/18 Communication Plan includes:

- Weekly or bi-weekly all-staff emails from the Director regarding issues of significance to the Department and staff, and other announcements and information sharing to nurture greater cross-Department awareness.
- Weekly Communication Summaries by DHS Communications Manager.
- In-person reinforcement of key messages and questions at unit and program meetings throughout the Department by Directors, Managers, and Supervisors.
- Bi-annual all-staff webcasts by Director.