2021

Community Health Implementation Plan

for the Coachella Valley

DESERT HEALTHCARE
DISTRICT & FOUNDATION

Acknowledgements

As with all work done for the community, the most meaningful and successful work is done with the participation of many different people and organizations. The Desert Healthcare District is immensely grateful for the support of our funders, steering committee, advisory council, and the residents of our Coachella Valley community.

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- Borrego Community Health Foundation
- The California Endowment
- Desert Care Network
- First 5 Riverside

Community Members

Thank you to our community. Our process was intentionally designed to be community-driven, in that we wanted the voices of our community to inform how we understand local health issues and how we address those issues. We appreciate all the community members who provided input and helped us to understand their needs, the disparities, and the opportunities to create meaningful change.

Steering Committee

We would also like to thank the Steering Committee, for helping to oversee our approach and assist with contributing local community health data that was pertinent to this project:

- Borrego Community Health Foundation
- The California Endowment
- Coachella Valley Economic Partnership (CVEP)
- Desert Care Network
- First 5 Riverside
- Inland Empire Health Plan (IEHP)
- Riverside University Health System – Behavioral Health
- Riverside University Health System – Public Health
- University of California Riverside – School of Medicine

Advisory Council

A big thank you to our community partner organizations who helped us to optimally understand the community we serve and who helped us communicate with our community-at-large:

- Alianza Coachella Valley
- Alzheimer's Coachella Valley
- Angel View
- Braille Institute
- CSUSB – Palm Desert
- City of Coachella Water Authority
- Clinicas de Salud del Pueblo
- Coachella Valley Housing Coalition
- Coachella Valley Unified School District (CVUSD)
- Coachella Valley Volunteers in Medicine (CVVIM)
- Comite Civico del Valle
- County of Riverside - Mecca Farmworker's Service Center
- County of Riverside – Office of Supervisor V. Manuel Perez
- Desert AIDS Project (DAP)
- Desert Arc
- Desert Highland Gateway
- Desert Oasis Healthcare
- Desert Sands Unified School District (DSUSD)
- East Agriculture Advisor for Supervisor V. Manuel Perez
- Eisenhower Health
- El Sol Neighborhood Education Center
- FIND Food Bank
- Galilee Center
- Growing Coachella Valley
- Inland Empire Health Plan
- Jewish Family Service of the Desert
- Joslyn Center
- Kaiser Permanente
- Latino Commission
- LGBTQ Community Center of the Desert
- Lideres Campesinas
- Lift to Rise
- Loma Linda University - SAC Health System
- Martha's Village and Kitchen
- Mizell Senior Center
- Molina Healthcare
- Neuro Vitality Center
- OneFuture Coachella Valley
- Office on Aging
- Operation SafeHouse
- Palm Springs Unified School District (PSUSD)
- Planned Parenthood of the Pacific Southwest
- Pueblo Unido Community Development Corporation
- RAP Foundation
- Riverside County Latino Commission
- Riverside County Office on Aging
- Riverside County Sheriff's Department
- Shelter from the Storm
- South Coast Air Quality Management District
- SMaRT Education

Acronym Page

The following acronyms may appear one or more times in this report, so this page can be used as a reference to "decode" those acronyms.

ACEs: Adverse Childhood Experiences

ACS: American Community Survey

AHRQ: Agency for Healthcare Research & Quality

AIDS: Acquired Immunodeficiency Syndrome

AQI: Air Quality Index

ASL: American Sign Language

BIPOC: Black, Indigenous and people of color

CDC: Centers for Disease Control & Prevention

CDP: Census Designated Place

CGR: College-Going Rate

CHIP: Community Health Implementation Plan

CHIS: California Health Interview Survey

CHKS: California Healthy Kids Survey

CHNA: Community Health Needs Assessment

CMS: Centers for Medicare & Medicaid Services

COVID-19: Novel Coronavirus

CVEP: Coachella Valley Economic Partnership

CVUSD: Coachella Valley Unified School District

CVVIM: Coachella Valley Volunteers in Medicine

DAP: Desert AIDS Project

DHCD & F: Desert Healthcare District & Foundation

DRMC: Desert Regional Medical Center

DSUSD: Desert Sands Unified School District

EBT: Electronic Benefits Card

EPA: Environmental Protection Agency

FMD: Frequent Mental Distress

FPL: Federal Poverty Line

FPL: Future Physician Leaders

FTE: Full-Time Equivalent

HARC: Health Assessment & Research for Communities

HCC: Health Career Connections Internship Program

HEAL: Healthy Eating, Active Living

HIV: Human Immunodeficiency Virus

HOSA: Future Health Professionals, formerly known as Health Occupations Students of America

HRSA: Health Resources & Services Administration

ICD-10: International Classification of Diseases, Tenth Revision

IEHP: Inland Empire Health Plan

IMU: Index of Medical Underservice

JFK Memorial Hospital: John F. Kennedy Memorial Hospital

LGBTQIA: Lesbian, gay, bisexual, transgender, questioning, intersex, asexual

MUA: Medically Underserved Areas

MUP: Medically Underserved Population

NCHS: National Center for Health Statistics

OSHPD: California's Office of Statewide Health Planning & Development

PIT: Homelessness Point-In-Time Count

PM: Particulate Matter

POC: People of Color

PSUSD: Palm Springs Unified School District

PTSD: Post-Traumatic Stress Disorder

RCMA: Riverside County Medical Association

RDA: Registered Dental Assistant

RDH: Registered Dental Hygienist

RUHS: Riverside University Health System

SNAP: Supplemental Nutrition Assistance Program (e.g., food stamps)

STD: Sexually Transmitted Disease

STI: Sexually Transmitted Infections

VA: Veterans Affairs

WHO: World Health Organization

Contents

Executive Summary

Introduction
In November 2018, local voters approved an expansion of the Desert Healthcare District and Foundation (DHCD & F) to cover the entire Coachella Valley region. As a result of this District expansion and the need for a new strategic plan, DHCD & F has embarked on the endeavor of conducting a Community Health Needs Assessment (CHNA) of the Coachella Valley, followed by a Community Health Improvement Plan (CHIP).

In January of 2020, DHCD & F hired HARC, Inc. (Health Assessment and Research for Communities), a nonprofit research organization, to conduct a CHNA and CHIP. This report is the CHIP component, the CHNA report can be found here: (link to website address once it is posted online).

CHNA
DHCD & F and HARC collaboratively designed the methods for conducting this CHNA/CHIP process. Specifically, DHCD & F and HARC assembled a Steering Committee, assembled an Advisory Council, and refined a list of more than 100 indicators under 12 categories to assess the health and social determinants of health for our local population. The indicator list was developed using Healthy People 2020's leading health indicators as well as input from the Advisory Council.

HARC gathered a wealth of secondary data across the 12 categories, which was then presented to the community during the community engagement phase. Community input helped to narrow down the needs from 12 categories to the top five health needs. Selection of the top five health needs took into account information from three different sources:

- Community engagement via 40 virtual focus groups consisting of 205 community members.
- Group prioritization with the Advisory Council via eight virtual focus groups consisting of 31 Advisory Council members.
- Six subject matter experts ranked the health needs, using the data from the CHNA report and a prioritization rubric.

HARC and DHCD & F then combined data from these three sources to select the following five health priorities for the Coachella Valley (in alphabetical order):

- Access to Care
- Economic Stability
- Education Access and Quality
- Environment
- Mental Health

CHIP

Next, HARC created draft goals and objectives for each of the top five health needs based on community feedback and Healthy People 2030's objectives. These draft goals and objectives were presented to community leaders through a series of focus groups and key informant interviews. Feedback shaped and changed these objectives while adding activities and potential partners for each of them.

The goals and objectives for each of the top five health needs are as follows:

Access to Care

- Goal: Increase access to comprehensive, high-quality healthcare services.
    - Objective 1: Increase the proportion of people with health insurance.
    - Objective 2: Increase the proportion of people with health insurance who understand and fully utilize their benefits.
    - Objective 3: Increase the proportion of people with a usual primary care provider.
    - Objective 4: Reduce the proportion of people who are not able to obtain medical care or have to delay medical care when they need it.
    - Objective 5: Reduce the proportion of people who can't get prescriptions when they need them.
    - Objective 6: Increase the availability and use of preventative care.
    - Objective 7: Empower community members to engage in healthy behaviors and avoid preventable illnesses/complications.
    - Objective 8: Increase the number of healthcare providers, especially those who accept Medi-Cal, speak Spanish, are primary care providers, who serve the LGBTQ community, and/or those who practice in low-income geographies.

Economic Stability

- Goal: Help people earn steady and sufficient incomes that allow them to meet their needs.
    - Objective 1: Increase employment in working-age people/reduce unemployment.
    - Objective 2: Increase the number of jobs that pay a living wage.
    - Objective 3: Reduce the percent of adolescents and young adults who aren't in school or working.
    - Objective 4: Reduce the proportion of people living in poverty.
    - Objective 5: Reduce the percent of families that spend more than 30% of income on housing.
    - Objective 6: Increase the number of homeless people who are successfully housed.

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Education

- Goal: Increase educational opportunities and access to help children and adolescents with the intent to prepare them for post-secondary/vocational success and well-paying jobs.
  - Objective 1: Increase the percentage of students with reading skills at or above the proficient level on their standardized tests.
  - Objective 2: Increase the percentage of students with math skills at or above the proficient level on their standardized tests.
  - Objective 3: Increase the percentage of high school students who graduate in four years.
  - Objective 4: Increase the percentage of high school graduates who enroll in college or vocational training within a year after graduating from high school.
  - Objective 5: Increase the number of Coachella Valley residents enrolled in college who complete a degree or obtain a certification or vocational training.
  - Objective 6: Increase the number and size of scholarships available for Coachella Valley residents, including family stipends.

Environment

- Goal: Promote healthier environments to improve health.
  - Objective 1: Reduce diseases and deaths related to heat.
  - Objective 2: Reduce the number of days people are exposed to unhealthy air, especially as related to the Salton Sea.
  - Objective 3: Reduce health and environmental risks from hazardous sites.
  - Objective 4: Improve drinking water infrastructure within vulnerable communities.
  - Objective 5: Improve infrastructure and public transportation to encourage walkability in communities.
  - Objective 6: Improve infrastructure and public transportation to encourage walkability in communities.

Mental Health

- Goal: Improve mental health.
  - Objective 1: Increase the proportion of people (children, adolescents, adults, and older adults) with mental illness and/or abuse substances who get treatment.
  - Objective 2: Reduce suicide attempts and the suicide rate.

Conclusion

This CHIP will help DHCD & F with strategic planning going forward. Many of the activities listed in this CHIP involve a multitude of partners coming together to make progress on these goals.

Introduction

The Coachella Valley is a unique geographic area in Eastern Riverside County, California. It is a part of the greater "Inland Empire" (the counties of San Bernardino and Riverside) but has many aspects that make it unique, including the relative geographic isolation created by extensive mountain passes.

Desert Healthcare District was created in 1948 to serve residents within a 457-square-mile area of the Coachella Valley. The District included communities in the western end of the valley, with Cook Street as a cutoff. Once established, the District then built and operated Desert Hospital, now known as Desert Regional Medical Center (DRMC).[1]

Through a system implemented in 1998, much of the impact for District residents today results from programs and grants approved by the Board of Directors, creating the Desert Healthcare District & Foundation (DHCD & F). About $4 million per year is committed for its grant-making program to support and collaborate with local nonprofits to improve the health of District residents.

In November 2018, Coachella Valley voters approved extending the District boundaries east of Cook Street. The expansion enlarged the District to include La Quinta, Indio, Coachella, the rest of Palm Desert and Indian Wells, Bermuda Dunes, Thermal, Mecca, North Shore, and other unincorporated communities. This expansion more than doubled the coverage area, and thus it became necessary to reassess the entire Coachella Valley and get a clear picture of the health needs in the District.

In January of 2020, HARC Inc. was hired to conduct a community health needs assessment (CHNA) and create a community health improvement plan (CHIP) to support DHCD & F's ability to strategically address health issues in the region. This CHIP includes a health equity approach to the unique needs of the Coachella Valley as the identified goals/objectives and activities to meet these goals/objectives will vary across geography and cultural/ethnic groups.

First, HARC conducted a CHNA for DHCD & F. The CHNA report can be found at (website address to CHNA report when posted online, hyperlinked). The current report summarizes the CHIP, which followed logically from the CHNA.

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[1] http://www.DHCD.org

Methods

A CHIP is fundamentally intertwined with the CHNA. Thus, in order to understand the CHIP report, a brief summary of the CHNA process and results is presented here.

CHNA

DHCD & F and HARC collaboratively designed the methods for conducting the CHNA/CHIP process. Specifically, DHCD & F and HARC assembled a Steering Committee, assembled an Advisory Council, and refined a list of indicators to assess the health and social determinants of health for our local population. The indicator list was developed using the Healthy People 2030's leading health indicators as well as input from the Advisory Council. There were more than 100 indicators across 12 content areas (presented here in alphabetical order):

1. Access to Care
2. Clinical Preventative Services
3. Economic Stability
4. Education
5. Environment
6. Injury and Violence
7. Maternal, Infant, and Child Health
8. Mental Health
9. Nutrition, Physical Activity, and Obesity
10. Oral Health
11. Reproductive and Sexual Health
12. Substance Use

Secondary data sources were pulled by HARC from a variety of sources including American Community Survey, California Department of Education, and California Health Interview Survey, just to name a few. Additionally, we asked our local partners to provide local data that was pertinent to our list of health indicators. To provide granular data, the results are provided by city and Census-Designated Places (CDPs) whenever possible. There are 21 cities/CDPs in the Coachella Valley.

HARC created a written CHNA report that included the data on the 100+ indicators across the 12 content areas, as well as a shorter visual report designed for sharing with the public. HARC also put the highlights of the results into a PowerPoint for the community engagement phase.

Community engagement is a central part of the CHNA process. HARC gathered community feedback via virtual focus groups. Each of our partners serving on the Advisory Council were invited to help recruit their clients/patients/members for an online focus group. Each focus group was presented with the PowerPoint of data from the CHNA report and was asked to provide feedback—what is the most

common issue in our community, what is most important to address, etc. Focus groups were facilitated by HARC staff with additional note-takers; focus groups were offered in English and in Spanish. All participants were provided with $25 Visa gift cards to compensate them for their time and expertise. There was a total of 40 community focus groups held with 205 members of the community. Data from all the focus groups were compiled, analyzed, and the most common themes were considered the top priorities according to the community.

HARC also gathered feedback from the Advisory Council using a similar process as the community engagement; HARC held a total of eight focus groups held with 31 community leaders. Data from all Advisory Council meetings were compiled, analyzed, and the most common themes were deemed top priorities according to our Advisory Council.

The next step after gathering this information was to prioritize health needs to identify the top five to focus on in the coming years. HARC used three different sources of data to select the top five health issues from the list of 12. These three sources include:

- Community engagement via 40 virtual focus groups consisting of 205 community members.
- Group prioritization with the Advisory Council via eight virtual focus groups consisting of 31 Advisory Council members.
- Six subject matter experts ranked the health needs, using the data from the CHNA report and a prioritization rubric.

HARC and DHCD & F then combined data from these three sources to select the following five health priorities for the Coachella Valley. The priorities listed below are not in order of importance but rather listed alphabetically.

- Access to Care
- Economic Stability
- Education
- Environment
- Mental Health

CHIP

HARC used Healthy People 2030's objectives and data sources, combined with the feedback received during the CHNA process, to create draft goals and objectives for each of the five priorities. These draft goals and objectives were presented to the Advisory Council via a series of virtual focus groups and one-on-one interviews.

Overall, HARC conducted 10 focus groups and 5 key informant interviews, and obtained feedback from 40 representatives of the following organizations:

- Borrego Health
- Clinicas de Salud del Pueblo
- Coachella Valley Volunteers in Medicine (CVVIM)
- Comite Civico del Valle
- Desert Care Network
- Desert Oasis Healthcare
- FIND Food Bank
- Galilee Center
- Inland Empire Health Plan (IEHP)
- Jewish Family Service of the Desert
- Joslyn Senior Center
- Kaiser Permanente
- LGBTQ Community Center of the Desert
- Lift to Rise
- Martha's Village and Kitchen
- Mizell Senior Center
- Molina Healthcare
- Neuro Vitality Center
- OneFuture Coachella Valley
- Palm Springs Unified School District
- Pueblo Unido
- Riverside County Board of Supervisors, 4th District
- RUHS – Behavioral Health
- RUHS – Public Health
- SAC Health System
- SMaRT Education
- South Coast Air Quality Management District
- UC Riverside School of Medicine

Feedback from these experts was used to revise the draft goals and objectives, and to support those with potential activities and partners for each of these efforts. HARC staff took the feedback from these experts, refined it, and organized it. This report summarizes the results of that process.

Results

The results are presented here in five sections:
1. Access to Care
2. Economic Stability
3. Education
4. Environment
5. Mental Health

Each section includes one overall goal for that particular health priority. Each of these goals are then supported by between three to eight objectives; each objective has its own separate page in this report.

Whenever possible, HARC has identified the data source and the level of granularity of measurement (e.g., by city, by Coachella Valley, by county, etc.) that will be used to measure progress towards the objective. These measures will be important for assessing population-level change over the years. There are some objectives that are not currently measured; for these, baseline data should be planned and collected.

Each objective is also supported by several potential activities that could be implemented to "move the needle" and make progress towards the objective and, ultimately, the overall goal. It is worth noting that there are many other activities that could make a difference; this list is by no means exhaustive. Agencies striving to make a difference in these five areas are encouraged to explore innovative ways of reaching the goals and objectives.

It is also worth noting that not all of these activities are activities that DHCD & F will undertake; some activities are more appropriately the domain of other key partners and agencies. A list of potential partners accompanies each objective; the list of partners is by no means exhaustive but does provide a strong starting point for discussions about collaboration.

Access to Care

Goal: Increase access to comprehensive, high-quality healthcare services.
Objective 1: Increase the proportion of people with health insurance.

Measurement for Objective 1:
- Census Bureau American Community Survey 5-Year Estimates: Percent Uninsured (by city/CDP).
- HARC's triennial survey: "Do you have any kind of health care coverage?" (Coachella Valley level)

Potential Activities Under Objective 1:
a. Expand eligibility for Medi-Cal (primary partners: elected officials and lobbyists).
b. Decrease stigma regarding Medi-Cal.
c. Decrease the fear that undocumented individuals/mixed status families have about enrolling in Medi-Cal. Note: requires rebuilding trust.
d. Educate immigrants on the importance of enrolling in health insurance.
e. Educate young adults on the importance of enrolling in health insurance.
f. Provide enrollment assistance (for Medi-Cal, Covered California, Medicare, etc.). Note: must be provided at logical points of contact (e.g., at food distribution sites, at clinic sites, in low-income housing developments, etc.).
g. Encourage employers to educate employees about whether they are eligible for federal insurance programs (e.g., Medi-Cal, Medicare).

Potential Key Players/Partners for Objective 1:
- All healthcare providers, including federally qualified health centers (FQHCs), free clinics, hospitals, for-profit healthcare providers, medical groups, etc.
- Care coordinators, case managers, etc.
- Community health workers/promotores
- Elected officials
- Health insurance plans (e.g., IEHP, Kaiser Permanente, Molina Healthcare, etc.)
- Lobbyists
- Unions

Goal: Increase access to comprehensive, high-quality healthcare services.
Objective 2: Increase the proportion of people with health insurance who understand and fully utilize their benefits.

Measurement for Objective 2: No single good source.
- Will rely on program-specific evaluations.

Potential Activities Under Objective 2:
a. Provide healthcare navigation assistance for all (provided by community health workers/promotores, care coordinators, etc.).
b. Provide easy-to-understand description of benefits and expected copays for healthcare services, in English and Spanish.
c. Promote 24/7 text or call helplines to assist individuals in understanding what is covered by their specific insurance and where they can go for care.
d. Promote websites with live chat to assist individuals in understanding what is covered by their specific insurance and where they can go for care.

Potential Key Players/Partners for Objective 2:
- Care coordinators, case managers etc.
- Community health workers/promotores
- Health insurance plans (e.g., IEHP, Kaiser Permanente, Molina Healthcare, etc.)

Goal: Increase access to comprehensive, high-quality healthcare services.
Objective 3: Increase the proportion of people with a usual primary care provider.

Measurement for Objective 3:

- HARC's triennial survey: "When you are sick or in need of care, where do you usually go?" (Coachella Valley level)
- National data: Medical Expenditure Panel (MEPS) by AHRQ: Number of persons who report that they have a usual primary care provider. We should consider collecting local data using their exact question.

Potential Activities Under Objective 3:

a. Assist in enrollment in health insurance programs (see Access to Care, Objective 1).
b. Increase the number of healthcare providers (see Access to Care, Objective 8).
c. Explore "team-based" healthcare options (see "Evidence Based Programs" appendix for more detail).
d. Expand hours of operation for primary care providers so that individuals who work long hours can still utilize a primary care provider rather than urgent care, emergency department or other after-hours care.
e. Provide education to patients as to which issues warrant use of urgent care vs. emergency department vs. primary care provider routine care.
f. Counsel patients who come into urgent care and/or emergency department for routine issues to find a primary care provider.
g. Increase the telehealth capabilities of local providers and patients. Note: requires solid technological infrastructure (see Mental Health, Objective 1).

Potential Key Players/Partners for Objective 3:

- Healthcare providers and their employers.
- Front-desk staff at healthcare providers' offices and hospitals.

Goal: Increase access to comprehensive, high-quality healthcare services.
Objective 4: Reduce the proportion of people who are not able to obtain medical care or have to delay medical care when they need it.

Measurement for Objective 4: No single good source.
- HARC's triennial survey: "Was there ever a time in the past 12 months when you needed mental health care and could not get it?" (Coachella Valley level). Would need to add other types of care (e.g., physical care) as well to make it a better measure for this objective.
- National data: Medical Expenditure Panel (MEPS) by AHRQ: Number of persons who report not being able to obtain or having delay needed medical care. We should consider collecting local data using their exact question.

Potential Activities Under Objective 4:
a. Assist in enrollment in health insurance programs (see Access to Care, Objective 1).
b. Increase the number of healthcare providers (see Access to Care, Objective 8).
c. Provide healthcare navigation assistance (e.g., care coordinators, etc.).
d. Provide healthcare in locations that are convenient for community members (rather than expecting them to come to the site of the clinic or hospital), for example, mobile units deployed to schools, "street medicine", vaccine clinics at work sites, etc.
e. Increase the use of satellite clinics/part-time space used to expand geographical coverage and reduce travel barriers for patients.
f. Improve technological literacy of our community at-large.
g. Increase the telehealth capabilities of local providers and patients. Note: requires solid technological infrastructure (see Access to Healthcare, Objective 3).
h. Provide sliding scale fees for low-income uninsured/underinsured patients.
i. Support the provision of free healthcare services (e.g., free clinics like CVVIM, free healthcare opportunities like the Flying Doctors event, etc.).
j. Remove transportation barriers by providing low-to-no-cost transportation options for low-income patients (e.g., ride shares, etc.).
k. Extend clinic hours to evenings and weekends.

Potential Key Players/Partners for Objective 4:
- All healthcare providers, including federally qualified health centers (FQHCs), free clinics, hospitals, for-profit healthcare providers, medical groups, etc.
- Community health workers and other trusted messengers who provide health education (e.g., El Sol, promotores, etc.).
- Transportation organizations (e.g., Desert Blind & Handicapped, SunLine/SunBus, etc.).

Goal: Increase access to comprehensive, high-quality healthcare services.
Objective 5: Reduce the proportion of people who can't get prescriptions when they need them.

Measurement for Objective 5: No single good source.

- HARC's triennial survey: "Was there ever a time in the past 12 months when you needed mental health medication and could not get it?" (Coachella Valley level). Would need to add other types of medication as well to make it a better measure for this objective.
- National data: Medical Expenditure Panel (MEPS) by AHRQ: Number of persons who report not being able to obtain or having delay in obtaining needed prescription medications. We should consider collecting local data using their exact question.

Potential Activities Under Objective 5:

a. Assist in enrollment in health insurance programs (see Access to Care, Objective 1).
b. Educate community members on prescription discount programs (e.g., "Good Rx", etc.) and encourage their use.
c. Encourage providers to prescribe generic prescriptions whenever possible.
d. Encourage pharmacies to deliver for low-to-no-cost; educate patients about delivery options.
e. Provide financial assistance to those with high prescription costs (e.g., the way Desert Cancer Foundation pays for expensive cancer drugs for low-income patients with cancer).

Potential Key Players/Partners for Objective 5:

- All healthcare providers, including federally qualified health centers (FQHCs), free clinics, hospitals, for-profit healthcare providers, medical groups, etc.
- Community health workers and other trusted messengers who provide health education (e.g., El Sol, promotores, etc.).
- Nonprofits that provide financial assistance to low-income patients unable to pay for their prescriptions (e.g., Desert Cancer Foundation, Michelle's Place, etc.).
- Pharmacies and pharmacists.

Goal: Increase access to comprehensive, high-quality healthcare services.
Objective 6: Increase the availability and use of preventative care.

Measurement for Objective 6:
- Individual activity measurements are more appropriate (see below) than overall objective measures.

Potential Activities Under Objective 6:
a. Educate the community on the importance and guidelines of preventative healthcare.
b. Increase the availability and administration of appropriate vaccinations for children.
    - Measurement:
        o California Department of Public Health, Immunization Branch: Percent of kindergarteners with all immunizations (county-level data only).
        o HARC's triennial survey: "Has your child ever had the HPV vaccine?" (Coachella Valley level).
c. Increase the education, availability, and administration of appropriate vaccinations for adults (e.g., annual flu shots, COVID-19 vaccinations, shingles vaccinations, etc.).
    - Measurement:
        o RUHS - Public Health for COVID-19 shots (by city/CDP by special request)
        o HARC's triennial survey: "During the past 12 months, have you had a flu vaccine in any form?" (Coachella Valley level). Would need to add this question back in (removed from the 2019 survey).
d. Increase the number of people who have had a preventive healthcare visit or check-up in the past year.
    - Measurement: HARC's triennial survey: "About how long has it been since you last visited a doctor for a routine check-up?" (Coachella Valley level).
e. Increase the proportion of adults who receive cancer screenings (e.g., lung, breast, colorectal, cervical, etc.).
    - Measurement: HARC's triennial survey (Coachella Valley level), including:
        o "Have you ever had a mammogram?"
        o "Have you ever had a Pap smear?"
        o "Have you ever had a colonoscopy or sigmoidoscopy to check for colon cancer?"
f. Provide free HIV testing for all so that everyone is aware of their HIV status.
    - Measurement: HARC's triennial survey: "Have you ever been tested for HIV?" (Coachella Valley level).
g. Provide community education on the importance of preventative healthcare (including oral care), especially for the Latinx community.

h. Bring healthcare services to patients in their community spaces (e.g., mobile units, school-based clinics, visiting mobile home parks or tribal grounds, etc.; see Mental Health, Objective 1).

i. Increase accessibility of bilingual service providers and/or translators.

Potential Key Players/Partners for Objective 6:

- All healthcare providers, including federally qualified health centers (FQHCs), free clinics, hospitals, for-profit healthcare providers, medical groups, etc.
- Community health workers and other trusted messengers who provide health education (e.g., El Sol, promotores, etc.).
- Pharmacies and pharmacists.

Goal: Increase access to comprehensive, high-quality healthcare services.

Objective 7: Empower community members to engage in healthy behaviors and avoid preventable illnesses/ complications.

Measurement for Objective 7: No single good source.

Potential Activities Under Objective 7:
a. Provide health education to children and youth (in school or outside of school) that empowers them to make healthy decisions.
b. Provide health education to adults. Note: needs to be accessible, encouraging, and in settings that are comfortable and convenient for adults. Should include information about healthy eating, active living as well as education on chronic diseases (e.g., asthma, cancer, diabetes, heart disease, etc.).
c. Encourage healthy eating/healthy cooking, especially programs that promote healthy foods that are culturally appropriate.
d. Provide text message-based health interventions, especially for self-management of chronic conditions.
e. Provide opportunities for free-or-low-cost exercise in community-based settings (e.g., Zumba, kickboxing, salsa dancing, etc.).
f. Provide healthy socialization programming, especially for seniors or others at risk for social isolation (e.g., book clubs, lotería, volunteerism, etc.).

Potential Key Players/Partners for Objective 7:
- Community health workers and other trusted messengers who provide health education (e.g., El Sol, promotores, etc.)
- Community-based organizations providing healthy eating, active living programming (e.g., Boys & Girls Clubs, Desert Recreation District, senior centers, etc.).
- Faith-based communities
- School districts: CVUSD, DSUSD, PSUSD and other educational institutions

Goal: Increase access to comprehensive, high-quality healthcare services.

Objective 8: Increase the number of healthcare and mental health providers, especially those who accept Medi-Cal, speak Spanish, are primary care providers, who serve the LGBTQ community, and/or those who practice in low-income geographies.

Measurement for Objective 8:

- California Office of State Health Planning and Development (OSHPD): Patient care hours by week by physician specialty (by special request based on ZIP codes/cities; delivered at the Coachella Valley level).
- Department of Consumer Affairs: Number of Physician Licenses (by city).

Potential Activities Under Objective 8:

a. Encourage high school students to attend college and pursue health professions (see Education, Objective 4).
b. Provide support (such as counselor check-ins, college navigating mentors, support groups, etc.) to college students to finish their degrees (see Education, Objective 5).
c. Provide financial support for students pursuing an undergraduate or graduate healthcare degree (see Education, Objective 6).
d. Encourage the career pipeline to "grow our own" healthcare providers, starting in high school.
e. Support and expand Health Academies to foster interest in health careers in high schoolers.
f. Provide local internships and other opportunities for aspiring healthcare professionals to obtain hands-on experience in the healthcare field (especially paid opportunities).
g. Support existing, local residency programs for new healthcare professionals; add additional residency programs whenever possible.
h. Recruit physicians from out of area, with a focus on those who help meet the gaps in our services.
i. Incentivize providers to accept Medi-Cal.
j. Incentivize providers to practice in the East Valley.
k. Improve the cultural competency of physicians in our region (e.g., as it pertains to underserved populations such as Hispanics, African Americans, blind, deaf, LGBTQ+, etc.).
l. Increase the number of sponsorships of Visas for foreign students.

Potential Key Players/Partners for Objective 8:

- OneFuture Coachella Valley
- School districts: CVUSD, DSUSD, PSUSD (especially Health Academies)
- Organizations that encourage youth to be interested in healthcare (e.g., FPL, HOSA, etc.)
- Internship programs that provide students with experience in healthcare (e.g., HCC, etc.)
- Higher education, including medical schools (e.g., COD, CSUSB, UCR, etc.)

- Organizations that run residency programs (e.g., hospitals, FQHCs)
- Riverside County Medical Association (for recruiting)
- Employers of healthcare providers (e.g., hospitals, clinics, private practice etc.)

Economic Stability

Goal: Help people earn steady and sufficient incomes that allow them to meet their needs.

Objective 1: Increase employment in working-age people/reduce unemployment.

Measurement for Objective 1:

- California Employment Development Department: Local Area Unemployment Statistics (LAUS).
- California Employment Development Department: Monthly Labor Force Data (by city/CDP).
- HARC's triennial survey: "Are you currently employed for wages, self-employed, out of work, a homemaker, a student, retired, or unable to work?" (Coachella Valley level).

Potential Activities Under Objective 1:

a. Create more opportunities for job skills training, internships, and network building (see other Economic Stability objectives).
b. Provide training on how to prepare/enter the workforce (e.g., the basics such as completing applications, what to wear, doing well in an interview, creating a resume, arriving on time, appropriate communication skills with supervisors and coworkers, etc.; see Economic Stability, Objective 3).
c. Provide support for jobseekers to find and apply for possible jobs (e.g., providing aptitude tests, assessing potential jobs based on previous education and experience, assistance navigating job posting sites, etc.).

Potential Key Players/Partners for Objective 1:

- Center for Employment Training (CET)
- Desert Best Friend's Closet
- Higher education (e.g., California Indian Nations College, College of the Desert, CSUSB, UCR, etc.)
- Martha's Village and Kitchen
- Riverside County Workforce Development Department
- One Future Coachella Valley

Goal: Help people earn steady and sufficient incomes that allow them to meet their needs.

Objective 2: Increase the number of jobs that pay a living wage.

Measurement for Objective 2:

- Quarterly Census of Employment and Wages (QCEW) Major Industry Level (county level only)

Potential Activities Under Objective 2:

a. Recruit companies that have a high average earnings wage to operate in the Valley such as wind and solar, logistics, etc. (see other Economic Stability objectives).
b. Diversify the economy of the Coachella Valley.
c. Improve access and quality of Internet available.
d. Create additional career pathways for local students that lead to high wage jobs.
e. Create more opportunities for job skills training/internships, especially paid opportunities (see Economic Stability, Objective 3).
f. Increase the minimum wage (see other Economic Stability objectives).
g. Promote labor unions among organizations (see Economic Stability, Objective 4).
h. Incentivize employers that provide professional development opportunities to employees and promote from within.

Potential Key Players/Partners for Objective 2:

- Coachella Valley Economic Partnership (CVEP)
- Community Action Partnership (CAP) of Riverside County
- Economic Development Departments within each of the nine cities
- Elected officials
- HARC's Workplace Wellness Awards
- Internet service providers
- Lobbyists
- OneFuture Coachella Valley
- Riverside County Workforce Development Department
- Unions

Goal: Help people earn steady and sufficient incomes that allow them to meet their needs.

Objective 3: Reduce the percent of adolescents and young adults who aren't in school or working.

Measurement for Objective 3:

- Census Bureau ACS 5-Year Estimates: Youth aged 16 to 19 who are not enrolled in school and not working (by city/CDP)

Potential Activities Under Objective 3:

a. Encourage graduation from high school or completion of a general equivalency degree (GED, see Education, Objective 3).
b. Encourage college enrollment among young adults (see Education, Objective 4).
c. Provide training on how to prepare/enter the workforce (e.g., the basics such as completing applications, what to wear, doing well in an interview, creating a resume, arriving on time, appropriate communication skills with supervisors and coworkers, etc.; see Economic Stability, Objective 1).
d. Create more opportunities for job skills training/internships, especially paid opportunities (see Economic Stability, Objective 2).
e. Incentivize and encourage young people to go to school (e.g., food, financial incentives, social engagement/activities/hobbies, etc.).

Potential Key Players/Partners for Objective 3:

- Center for Employment Training (CET)
- Community Action Partnership (CAP) of Riverside County
- Higher education (e.g., California Indian Nations College, College of the Desert, CSU San Bernardino, UC Riverside)
- Internship programs such as Health Career Connections
- Riverside County Workforce Development Department (especially the Youth Opportunity Centers)
- School districts: CVUSD, DSUSD, PSUSD

Goal: Help people earn steady and sufficient incomes that allow them to meet their needs.

Objective 4: Reduce the proportion of people living in poverty.

Measurement for Objective 4:

- Census Bureau ACS 5-Year Estimates: Percent below the poverty line (by city/CDP)

Potential Activities Under Objective 4:

a. Recruit companies that have a high average earnings wage to operate in the Valley, such as wind and solar, logistics, etc. (see other Economic Stability objectives).
b. Encourage graduation from high school or completion of a general equivalency degree (GED, see Education, Objective 3).
c. Encourage college enrollment among young adults (see Education, Objective 4).
d. Encourage completion of technical training programs (other than college) that can lead to a living wage (e.g., apprenticeships for electricians or plumbers, etc.).
e. Provide assistance (e.g., one-on-one support, reduced paperwork requirements, etc.) for creating a bank account for people who've never had a bank account to reduce the use of predatory businesses such as check cashing businesses and payday loans.
f. Provide low-to-no-cost job retraining opportunities.
g. Promote labor unions among organizations (see Economic Stability, Objective 2).
h. Increase the minimum wage (see other Economic Stability objectives).
i. Provide financial literacy/financial management classes to the public. Note: needs to be by trusted providers, also available in Spanish (see other Economic Stability objectives).

Potential Key Players/Partners for Objective 4:

- Center for Employment Training (CET)
- Coachella Valley Economic Partnership (CVEP)
- Community Action Partnership (CAP) of Riverside County (especially "Saving for Success" and education)
- Economic Development Departments within each of the nine cities
- Elected officials
- Higher education (e.g., California Indian Nations College, College of the Desert, CSU San Bernardino, UC Riverside, etc.)
- Lobbyists
- Riverside County Workforce Development Department

Goal: Help people earn steady and sufficient incomes that allow them to meet their needs.

Objective 5: Reduce the percent of families that spend more than 30% of income on housing.

Measurement for Objective 5:

- Census Bureau ACS 5-Year Estimates: Housing cost burden (renters and homeowners paying more than 30% of their income on mortgage or rent; by city/CDP)

Potential Activities Under Objective 5:

a. Increase the number of well-paying jobs and incomes to pay for housing (see other Economic Stability objectives).
b. Provide assistance to help people improve their rental and credit history.
c. Increase the availability of affordable housing by diversifying the portfolio of new housing to include low-income housing, multi-family housing, apartment/condo housing, tiny homes, etc. All should be visually appealing and desirable. Key partners: construction companies and housing developers.
d. Lessen restrictions on entry into housing (see Economic Stability, Objective 6).
e. Provide financial literacy/financial management classes to the public. Note: needs to be provided by trusted providers, also available in Spanish (see other Economic Stability objectives).

Potential Key Players/Partners for Objective 5:

- California Department of Social Services
- Coachella Valley Association of Governments (CVAG)
- Construction companies
- Hope Through Housing Foundation
- Housing developers
- Lift to Rise
- Riverside County Economic Development Agency
- Riverside County Housing Authority
- United Way of the Desert

Goal: Help people earn steady and sufficient incomes that allow them to meet their needs.

Objective 6: Increase the number of homeless people who are successfully housed.

Measurement for Objective 6:

- Coordinated Entry and Homeless Management Information Systems (HMIS) data.
- County of Riverside, Homeless Management Information System (HMIS) data (by provider).
- McKinney-Vento Education for Homeless Children and Youth (EHCY) Program.
- Riverside County Point-in-Time Homelessness Count (by cities and unincorporated areas).

Potential Activities Under Objective 6:

a. Conduct check-ins and assessments of formerly homeless people who become housed.
b. Address mental health and substance use when housing people.
c. Increase the availability of affordable housing by diversifying the portfolio of new housing to include low-income housing, multi-family housing, apartment/condo housing, tiny homes, etc. All should be visually appealing and desirable. (already listed below)
d. Lessen restrictions on entry into housing (see Economic Stability, Objective 5).
e. Provide financial literacy/financial management classes to the public. Note: needs to be provided by trusted providers, also available in Spanish (see other Economic Stability objectives).
f. Increase funding (including number of vouchers and length of time) for paying rent.
g. Increase permanent supportive housing programs.
h. Provide job-training for recently housed individuals.

Potential Key Players/Partners for Objective 6:

- Coachella Valley Association of Governments (CVAG)
- Coachella Valley Rescue Mission
- Construction companies
- Housing developers
- Lift to Rise
- Martha's Village and Kitchen
- Path of Life Ministries
- Riverside County Continuum of Care
- Riverside County Department of Social Services
- Riverside County Housing Authority
- SafeHouse of the Desert
- School districts: CVUSD, DSUSD, PSUSD
- Shelter from the Storm

Education

Goal: Increase educational opportunities and access to help children and adolescents with the intent to prepare them for post-secondary/vocational success and well-paying jobs.

Objective 1: Increase the percentage of students with reading skills at or above the proficient level on their standardized tests.

Measurement for Objective 1:

- California Department of Education - California Assessment of Student Performance and Progress: Meeting/exceeding English/Language Arts standards (available in the following grades: 3rd, 6th, 8th, 11th; by school district)

Potential Activities Under Objective 1:

a. Promote a community holistic approach to improve education in the Coachella Valley (see Education, Objective 2).
b. Support school districts' abilities to provide sufficient education to children with low literacy.
c. Empower parents to assist with their child's reading development (e.g., providing them with books, literacy lessons for adults, education to emphasize the importance of reading to children in the home, etc.).
d. Conduct book fairs at elementary schools.
e. Implement "Reach Out and Read", which incorporates literacy support into well-child healthcare visits.
f. Provide out-of-school reading programs/projects at community-based organizations to combat the losses encountered over breaks (e.g., spring break, summer vacation, etc.).
g. Increase the number of informal educators with external, community-based organizations (see Education, Objective 2).

Potential Key Players/Partners for Objective 1:

- Boys & Girls Clubs (Cathedral City, Coachella Valley, Palm Springs)
- First 5 Riverside
- Local libraries
- Nonprofits related to reading (e.g., Literacy, Language and Cultural Centers (LiLaC), Read with Me Volunteers, Tools for Tomorrow, etc.)
- School districts: CVUSD, DSUSD, PSUSD
- United Way

Goal: Increase educational opportunities and access to help children and adolescents with the intent to prepare them for post-secondary/vocational success and well-paying jobs.

Objective 2: Increase the percentage of students with math skills at or above the proficient level on their standardized tests.

Measurement for Objective 2:

- California Department of Education - California Assessment of Student Performance and Progress: Meeting/exceeding math standards (available in the following grades: 3rd, 6th, 8th, 11th; by school district)

Potential Activities Under Objective 2:

a. Promote a community holistic approach to improve education in the Coachella Valley (see Education, Objective 1).
b. Support school districts' abilities to provide sufficient education to children with low math skills.
c. Provide out-of-school math programs at community-based organizations to combat the losses encountered over breaks (e.g., spring break, summer vacation, etc.).
d. Provide summer vacation math programming/projects to combat the losses encountered over breaks (e.g., spring break, summer vacation, etc.).
e. Increase the number of informal educators with external, community-based organizations (see Education, Objective 1).
f. Provide camps, classes, competitions, etc. that make math fun and encourage practical use of math skills (e.g., robotics, programming, app creation, etc.)

Potential Key Players/Partners for Objective 2:

- Boys & Girls Clubs (Cathedral City, Coachella Valley, Palm Springs)
- College of the Desert's Summer Robotics Camp for Middle Schoolers
- Nonprofits related to math (e.g., SMaRT Education, Children's Discovery Museum of the Desert, Desert Recreation District's Robotics Camps, etc.)
- School districts: CVUSD, DSUSD, PSUSD

Goal: Increase educational opportunities and access to help children and adolescents with the intent to prepare them for post-secondary/vocational success and well-paying jobs.

Objective 3: Increase the percentage of high school students who graduate in four years.

Measurement for Objective 3:

- California Department of Education DataQuest: Four-year cohort graduation rate (by school district).

Potential Activities Under Objective 3:

- Support school districts' abilities to implement evidence-based programs that increase the graduation rate, such as career academies (see "Evidence-Based Programs" appendix).
- Conduct attendance interventions for chronically absent students to identify barriers to attendance and create strategies for overcoming those barriers.
- Provide mentorship for students in school and out of school.
- Provide students with socio-emotional skills training.

Potential Key Players/Partners for Objective 3:

- Mentoring programs (e.g., Big Brothers Big Sisters of the Desert, Ophelia Project, etc.).
- OneFuture Coachella Valley
- School districts: CVUSD, DSUSD, PSUSD

Goal: Increase educational opportunities and access to help children and adolescents with the intent to prepare them for post-secondary/vocational success and well-paying jobs.

Objective 4: Increase the percentage of high school graduates who enroll in college or vocational training within a year after graduating from high school.

Measurement for Objective 4:
- California Department of Education DataQuest: College-going rate (by school district).
- Vocational school enrollment

Potential Activities Under Objective 4:
a. Promote FAFSA or California Dream Act completion by all high school seniors.
b. Increase A-G completion rates (UC/CSU readiness).
c. Increase access to college and financial aid navigators from within the community.
d. Raise awareness among high school students and their parents as to the benefits of a college education.
e. Raise awareness among undocumented high school students and their parents that college is an option, and they are eligible for financial aid, despite lack of documentation.
f. Provide college campus tours for high school students, including meeting with first-generation college students who are currently enrolled in college.
g. Increase the number of high school students that have a post-secondary and financial aid plan by high school graduation.
h. Raise awareness among high school students and their parents of vocational training opportunities.

Potential Key Players/Partners for Objective 4:
- California Nurses Educational Institute
- Center for Employment Training (CET)
- Desert Valley Nursing Institute
- Dreamer Resource Centers and organizations (e.g., Alas Con Futuro from College of the Desert, Undocumented Student Success Center from CSU San Bernardino, etc.)
- Higher education institutions: Cal Baptist University, California Indian Nations College, College of the Desert, CSU San Bernardino, Loma Linda University, UC Riverside, University of Redlands, etc.
- Milan Institute of Cosmetology
- OneFuture Coachella Valley
- School districts: CVUSD, DSUSD, PSUSD

Goal: Increase educational opportunities and access to help children and adolescents with the intent to prepare them for post-secondary/vocational success and well-paying jobs.

Objective 5: Increase the number of Coachella Valley residents enrolled in college who complete a degree or obtain a certification or vocational training.

Measurement for Objective 5: No single good source.
- U.S. Census Bureau American Community Survey 5-Year Estimates: Educational Attainment adults 25+ (by city/CDP)
- Vocational school graduation numbers

Potential Activities Under Objective 5:
a. Provide support groups for first-generation college students.
b. Support higher education institutions' ability to have counselors check in regularly with students to assess barriers to completion and help brainstorm ways to overcome those barriers.
c. Provide college-navigating mentors for students.
d. Provide financial aid for students (see Education, Objective 6).
e. Encourage students to enroll in programs that assist with student retention, such as the Educational Opportunity Program (EOP) or Extended Opportunity Program and Services (EOPS).
f. Encourage students to enroll in vocational training programs with viable career paths.
g. Strengthen English as a Second Language (ESL) opportunities.

Potential Key Players/Partners for Objective 5:
- California Nurses Educational Institute
- Center for Employment Training (CET)
- Desert Valley Nursing Institute
- Higher education institutions: (e.g., Cal Baptist University, California Indian Nations College, College of the Desert, CSU San Bernardino, Loma Linda University, UC Riverside, University of Redlands, etc.)
- Milan Institute of Cosmetology
- OneFuture Coachella Valley
- School districts: CVUSD, DSUSD, PSUSD

Goal: Increase educational opportunities and access to help children and adolescents with the intent to prepare them for post-secondary/vocational success and well-paying jobs.

Objective 6: Increase the number and size of scholarships available for Coachella Valley residents, including family stipends.

Measurement for Objective 6: No single good source.

- Can get some good data from each of the potential key players/partners (such as financial aid departments within the higher education institutions of the Coachella Valley including College of the Desert, CSU San Bernardino, and UC Riverside), but no single population-level source of data.

Potential Activities Under Objective 6:

a. Create resource list consisting of scholarships and stipends available for students.
b. Leverage matching funds from private philanthropists, foundations, etc. to maximize the number and amount of scholarships available.
c. Support a Coachella Valley based, regional approach for scholarship funding.
d. Provide more educational opportunities for people to go into the health field.

Potential Key Players/Partners for Objective 6:

- Boys & Girls Clubs of Coachella Valley
- Dr. Carreon Foundation
- Higher education (e.g., California Indian Nations College, College of the Desert, CSU San Bernardino, UC Riverside, etc.)
- OneFuture Coachella Valley

Environment

Goal: Promote healthier environments to improve health.
Objective 1: Reduce diseases and deaths related to heat.

Measurement for Objective 1:

- Public Health: Causes of death (by city/CDP upon special request)
- California Office of Statewide Health Planning and Development: Age-adjusted ER rate/hospitalization rate due to dehydration (county level only)

Potential Activities Under Objective 1:

a. Expand and increase the number of cooling centers; promote and publicize use of the emergency cooling centers.
b. Increase the number of shade stations at bus stops
c. Add transportation options for people to access emergency cooling centers.
d. Add splash pads to parks that do not have any.
e. Promote the more affordable electricity programs for low-income families.
f. Provide air conditioning units to low-income families who could not otherwise afford them.
g. Electricity providers should continue to provide assistance programs to low-income customers to make electricity bills more affordable.

Potential Key Players/Partners for Objective 1:

- City governments
- Community Action Plan (CAP) of Riverside County (especially the utility assistance program, the weatherization program, etc.)
- Electricity providers: Imperial Irrigation District, Southern California Edison
- Sunline Transit Agency

Goal: Promote healthier environments to improve health.
Objective 2: Reduce the number of days people are exposed to unhealthy air, especially as related to the Salton Sea.

Measurement for Objective 2:
- U.S. Environmental Protection Agency Air Quality System (AQS):
  - 2.5 PM pollutant (monitoring stations: Indio – 29 Palms Reservation, Indio – Jackson Street, Palm Springs – Fire Station, Salton Sea Park)
  - 10 PM pollutant (monitoring stations: Indio – 29 Palms Reservation, Indio – Jackson Street, Torres Martinez Administration Site, Mecca – Saul Martinez, Palm Springs – Fire Station, Salton Sea Park)
  - Ground level ozone (monitoring stations: Indio – 29 Palms Reservation, Indio – Jackson Street, Palm Springs – Fire Station)
- California Environmental Health Tracking Program: 10 PM pollutant

Potential Activities Under Objective 2:
a. Incentivize the use of hybrid/electric vehicles.
b. Incentivize travel via active transportation (e.g., walking, bicycling, etc.) or mass transit (e.g., bus routes).
c. Advocate for legislation that promotes healthy air (e.g., Clean Air Act, etc.). Key partners: elected officials, lobbyists.
d. Support efforts to address the exposed playa around the Salton Sea and windborne playa particles (e.g., Dust Suppression Action Plan by the Salton Sea Management Program).
e. Seek funding and policy changes to continue with habitat restoration projects around the Salton Sea.

Potential Key Players/Partners for Objective 2:
- Coachella Valley Resource Conservation District
- Comite Civico del Valle
- The County of Riverside
- Federal Government /EPA
- Salton Sea-related agencies (e.g., Salton Sea Action Committee, Salton Sea Authority, State of California Salton Sea Management Program, etc.)
- South Coast Air Quality Management District
- Public Health Institute
- Tribes

Goal: Promote healthier environments to improve health.
Objective 3: Reduce health and environmental risks from hazardous sites.

Measurement for Objective 3: No single good source.

- United States Environmental Protection Agency SEMS: measures human exposure that is under control vs. not under control. There are four sites in the Coachella Valley, however, all four have insufficient data to determine human exposure.
- Toxic Release: Environmental Protection Agency: Risk-Screening Environmental Indicators (RSEI). RSEI scores are estimates of potential human health risk based on modeling of chemical concentrations at specific points in the environment, like in the air around a facility or in the water downstream from a facility. Data available at the facility level and updated annually.
- Cleanup Sites: Department of Toxic Substances Control. EnviroStor. Provides a database of sites that have known or potential contamination as well as facilities permitted to treat, store, or dispose of hazardous waste. Contains number of cleanup sites and site type. Data available at the facility level and continuously updated.
- Hazardous Waste: Department of Toxic Substances Control. EnviroStor. Provides a database of sites that have known or potential contamination as well as facilities permitted to treat, store, or dispose of hazardous waste. Contains number of cleanup sites and site type. Data available at the facility level and continuously updated.

Potential Activities Under Objective 3:

a. Follow-up with regulation and legal sanctions and fines for illegal dumping.
b. Provide fire prevention efforts to prevent mulch fires and other hazardous fires.
c. Ensure that all workers have access to personal protective equipment as needed.
d. Provide disaster preparedness training/education.

Potential Key Players/Partners for Objective 3:

- Bureau of Indian Affairs
- Bureau of Land Management
- California Integrated Waste Management Board
- California Natural Resource Agency
- Coachella Valley Association of Governments (CVAG)
- Comite Civico del Valle
- Local city governments
- Riverside County Department of Environmental Health
- Riverside County Department of Waste Management
- Riverside County Fire
- Torres Martinez Desert Cahuilla Indians
- U.S. Environmental Protection Agency

Goal: Promote healthier environments to improve health.
Objective 4: Improve drinking water infrastructure within vulnerable communities.

Measurement for Objective 4:
- Arsenic levels in water samples: Environmental Protection Agency (EPA)
- Safe Drinking Water Information System (SDWIS), EPA/OW databases
- Safe Drinking Water: Unites States Environmental Protection Agency. Safe Drinking Water Information System (SDWIS) Federal Reporting Services. Provides a database of public water systems and violation information including monitoring schedules, treatment techniques, maximum contaminant levels, and failing to communicate information to customers. Data available at the facility level and seems to be annually updated.
- Groundwater Threats. CA State Water Resources Control Board. Geo Tracker. Provides a database for sites that require cleanup, such as Leaking Underground Storage Tank (LUST) Sites, Department of Defense Sites, and Cleanup Program Site. GeoTracker also contains records for various unregulated projects as well as permitted facilities including: Irrigated Lands, Oil and Gas production, operating Permitted USTs, and Land Disposal Sites. Data available at the facility level and seems to be annually updated.

Potential Activities Under Objective 4:
a. Find alternative sources of water or point of entry systems.
b. Expand water services to rural areas to reduce the reliance on well water, which may be contaminated.
c. Increase the emergency water sources available.

Potential Key Players/Partners for Objective 4:
- Alianza
- Coachella Valley Resource Conservation District
- Environmental Protection Agency
- Local and state government
- Pueblo Unido
- The Water Districts (e.g., Coachella Valley Water District, Desert Water Agency, Mission Springs Water District, etc.)

Goal: Promote healthier environments to improve health.

Objective 5: Improve infrastructure and public transportation to encourage walkability in communities.

Measurement for Objective 5:

- Walkscore.com: 0 to 100 score that describes whether a car is needed for daily errands (ranges from car-dependent to somewhat walkable to very walkable to walker's paradise). Available by city.

Potential Activities Under Objective 5:

a. Provide low-to-no cost bus passes for low-income people.
b. Expand the bus service (e.g., more stops, more frequent routes, etc.).
c. Modify bus schedules to improve efficiency in the time it takes a person to commute.
d. Include sidewalks and bike lanes in all new street constructions.
e. Construct sidewalks and bike lanes in communities that are currently lacking them.
f. Provide more mixed-use zoning to allow grocery stores and workplaces to be within walking distance of residential homes.
g. Provide safe spaces for active transportation (e.g., CV Link).

Potential Key Players/Partners for Objective 5:

- Coachella Valley Association of Governments (CVAG)
- Local cities (especially the planning departments of each city)
- Safe Routes to Schools
- Sunline Transit Agency

Mental Health

Goal: Improve mental health.

Objective 1: Increase the proportion of people (children, adolescents, adults, and older adults) with mental illness and/or abuse substances who get treatment.

Measurement for Objective 1:
- HARC's triennial survey: questions about mental health diagnoses and concerns, treatment for mental health disorders/concerns by primary care providers, by mental health care providers, by medication. Also questions on inability to get mental healthcare when needed, inability to get mental health medication when needed. Additionally, questions related to binge-drinking, marijuana use, and prescription drug abuse. Available at the Coachella Valley level.
- CHIS: Adults needing and receiving behavioral health care services (only county-level data available).

Potential Activities for Objective 1:
a. Assist in enrollment in health insurance programs (see Access to Care, Objective 1).
b. Increase the proportion of people with health insurance who understand and fully utilize their benefits (see Access to Care, Objective 2).
c. Reduce the proportion of people who can't get prescriptions when they need them (see Access to Care, Objective 5).
d. Increase the number of mental healthcare providers (see Access to Care, Objective 8).
e. Provide education to reduce stigma about mental illness and treatment-seeking.
f. Increase the telehealth capabilities of local providers and patients. Note: requires solid technological infrastructure (see Access to Healthcare, Objective 3).
g. Provide sliding scale fees for low-income uninsured/underinsured patients.
h. Integrate behavioral health into primary care practice.
i. Bring healthcare services to patients in their community spaces (e.g., mobile units, school-based clinics, visiting mobile home parks or tribal grounds, etc.; see Healthcare Access, Objective 6).
j. Strengthen resources and treatment related to substance abuse.

Potential Key Players/Partners for Objective 1:
- Acadia Healthcare
- All mental healthcare providers, including federally qualified health centers (FQHCs), free clinics, hospitals, for-profit healthcare providers, medical groups, etc.
- Community health workers and other trusted messengers who provide health education (e.g., El Sol, promotores, etc.).
- Nonprofit organizations that provide mental health services (e.g., JFS of the Desert, Joslyn Senior Center, LGBTQ Community Center of the Desert, etc.).

- Palm Desert Veteran's Affairs (VA) Clinic
- Riverside University Health System (RUHS) – Behavioral Health
- The State of California

Goal: Improve mental health.
Objective 2: Reduce suicide attempts and the suicide rate.

Measurement for Objective 2:
- California Office of Statewide Health Planning and Development (OSHPD): Age-adjusted ER rate due to suicide and intentional self-inflicted injury (adolescents and adults; county-level only).
- Riverside University Health System - Public Health: Suicide deaths (by city/CDP; upon special request)

Potential Activities for Objective 2:
a. Build resiliency among adults and children.
b. Provide mental health education for children (in schools and in after-schools programming) to include mental illness, bullying, suicide, and positive mental health (e.g., accomplishment, fulfillment, self-care, joy, etc.).
c. Raise awareness of suicide prevention hotlines that are available.
d. Ensure that healthcare providers and pharmacists follow-up repeatedly with people who do not refill their mental healthcare prescriptions.
e. Encourage medication adherence among people with mental health prescriptions.
f. Provide healthy socialization programming, especially for seniors or others at risk for social isolation (e.g., book clubs, lotería, volunteerism, etc.) - (see Access to Care, Objective 7).
g. Teach "Mental Health First Aid" (a skills-based training course that teaches people to identify, understand, and respond to mental health and substance use issues) to as many people as possible.

Potential Key Players/Partners for Objective 2:
- Organizations that provide socialization programs (e.g., Desert Recreation District, senior centers, community centers, teen centers, etc.).
- Riverside University Health System (RUHS) – Behavioral Health
- Safehouse of the Desert
- School districts: CVUSD, DSUSD, PSUSD

Conclusion and Next Steps

DHCD & F will use this CHIP to inform strategic planning going forward. Staff at DHCD & F will utilize this CHIP to design specific workplans, including approaching potential partners, creating SMART goals (goals that are specific, measurable, achievable, relevant, and time-bound) with program-specific evaluation, and setting timelines for change.

For questions or concerns, please contact DHCD & F or HARC:

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Appendix: Evidence-Based Programs

This appendix provides a sampling of evidence-based programs—that is, those that are supported by scientific evidence as effective—that pertain to each of the five health priorities. Note that this appendix is by no means exhaustive; there are many other evidence-based programs available that pertain to the five health priorities. This simply provides a sampling of evidence-based programs that can be implemented to address these goals and objectives.

To look for more evidence-based programs, HARC recommends the use of the Results First Clearinghouse Database created by the Pew Charitable Trust:

> *"The Results First Clearinghouse Database is an online resource that brings together information on the effectiveness of social policy programs from nine national clearinghouses. It applies color-coding to the clearinghouses' distinct rating systems, creating a common language that enables users to quickly see where each program falls on a spectrum from negative impact to positive impact. As such, this database can help users easily access and understand the evidence base for a variety of programs."*

As of this writing, the database contains information on more than 3,000 programs and is updated at least once a month. Visit https://www.pewtrusts.org/en/research-and-analysis/data-visualizations/2015/results-first-clearinghouse-database# to search for evidence-based programs.

Evidence-Based Programs Related to Access to Care

Relevant Objective	Program	Link
Empower community members to engage in healthy behaviors and avoid preventable illnesses/ complications	"Healthy Eating and Active Living (HEAL) Toolkit for Community Educators" by the California Department of Public Health	https://snaped.fns.usda.gov/library/materials/healthy-eating-and-active-living-heal-toolkit-community-educators
Empower community members to engage in healthy behaviors and avoid preventable illnesses/ complications	"Promising Strategies for Creating Healthy Eating and Active Living Environments" by the Prevention Institute	https://www.preventioninstitute.org/sites/default/files/publications/promisingstrategies.pdf
Empower community members to engage in healthy behaviors and avoid preventable illnesses/ complications	Text-message based health interventions	https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/text-message-based-health-interventions
Increase the availability and use of preventative care	"Screen Out Cancer" by the Centers for Disease Control and Prevention	https://www.cdc.gov/screenoutcancer/interventions/index.htm
Increase the availability and use of preventative care	"Adaptation of an Evidence-Based Intervention to Improve Preventive Care Practices in a Federally Qualified Health Center in Appalachian Kentucky"	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5609805/
Increase the availability and use of preventative care	"What Works: Cancer Screening" by the Community Guide	https://www.thecommunityguide.org/sites/default/files/assets/What-Works-Factsheet-CancerScreening.pdf
Increase the proportion of people with a usual primary care provider	"Comprehensive Primary Care Plus" by the Centers for Medicare and Medicaid Services	https://innovation.cms.gov/innovation-models/comprehensive-primary-care-plus
Increase the proportion of people with a usual primary care provider	"Creating Patient-Centered Team-Based Primary Care" by Agency for Healthcare Research and Quality	https://pcmh.ahrq.gov/page/creating-patient-centered-team-based-primary-care
Increase the proportion of people with a usual primary care provider	TeamSTEPPS for Office-Based Care	https://www.ahrq.gov/teamstepps/officebasedcare/index.html

Evidence-Based Programs Related to Economic Stability

Relevant Objective	Program	Link
Increase employment in working-age people/reduce unemployment	"Post-Assistance Self-Sufficiency (PASS) Program" by the Riverside County Department of Public Social Services	https://www.mdrc.org/public ation/results-post-assistance-self-sufficiency-pass-program-riverside-california
Increase employment in working-age people/reduce unemployment	"Minnesota Family Investment Program" by Minnesota Department of Human Services	https://www.mdrc.org/projec t/minnesota-family-investment-program#overview
Increase employment in working-age people/reduce unemployment	Adult vocational training	https://www.countyhealthran kings.org/take-action-to-improve-health/what-works-for-health/strategies/adult-vocational-training
Increase employment in working-age people/reduce unemployment	Transitional jobs	https://www.countyhealthran kings.org/take-action-to-improve-health/what-works-for-health/strategies/transitional-jobs
Increase the number of homeless people who are successfully housed	Housing First"	https://www.ncbi.nlm.nih.gov /pmc/articles/PMC4679127/
Increase the number of homeless people who are successfully housed	"Housing for Health: Permanent Supportive Housing Program"	https://www.rand.org/pubs/r esearch_reports/RR1694.html
Reduce the percent of adolescents & young adults who aren't in school or working	"Job Corps" by the U.S. Department of Labor	https://crimesolutions.ojp.gov /ratedprograms/270
Reduce the proportion of people living in poverty	"JobsFirst: Greater Avenues for Independence (GAIN)" by County of Los Angeles	https://evidencebasedprogra ms.org/programs/the-los-angeles-jobs-first-greater-avenues-for-independence-gain-program/
Reduce the proportion of people living in poverty	Per Scholas Employment Training for Low-Income Workers	https://evidencebasedprogra ms.org/programs/per-scholas-employmenttraining-program-for-low-income-workers/

Evidence-Based Programs Related to Education

Relevant Objective	Program	Link
Increase the percentage of students with math skills at or above the proficient level on their standardized tests	"Knowledge is Power" Program (KIPP)	https://ies.ed.gov/ncee/wwc/Intervention/1188
Increase the percentage of students with reading skills at or above the proficient level on their standardized tests	"Project Learn" by Boys & Girls Clubs of America	https://www.bgca.org/programs/education/project-learn
Increase the percentage of students with reading skills at or above the proficient level on their standardized tests	Annual Book Fairs in High-Poverty Elementary Schools	https://evidencebasedprograms.org/programs/annual-book-fairs-in-high-poverty-elementary-schools/
Increase the percentage of high school students who graduate in four years	Learning Accounts	https://evidencebasedprograms.org/programs/learning-accounts/
Increase the percentage of high school students who graduate in four years	Health Equity: High School Completion Programs	https://www.thecommunityguide.org/findings/health-equity-high-school-completion-programs
Increase the percentage of high school students who graduate in four years	Career Academies	https://evidencebasedprograms.org/programs/career-academies/
Increase the percentage of high school graduates who enroll in college within a year after graduating from high school	Dual Enrollment Programs	https://ies.ed.gov/ncee/wwc/Intervention/1043
Increase the number of Coachella Valley residents enrolled in college who complete a degree	Accelerated Study in Associate Programs (ASAP)	https://evidencebasedprograms.org/programs/accelerated-study-in-associate-programs-asap/
Increase the number of Coachella Valley residents enrolled in college who complete a degree	First Year Experience Courses	https://ies.ed.gov/ncee/wwc/Intervention/825
Increase the number of Coachella Valley residents enrolled in college who complete a degree.	Success Boston Coaching	https://ies.ed.gov/ncee/wwc/Intervention/1618

Evidence-Based Programs Related to Environment

Relevant Objective	Program	Link

Improve infrastructure and public transportation to encourage walkability in communities	"At the Intersection of Active Transportation and Equity: Joining Forces to Make Communities Healthier and Fairer" by Safe Routes to Schools	http://saferoutespartnership.org/sites/default/files/pdf/At-the-Intersection-of-Active-Transportation-and-Equity.pdf
Improve infrastructure and public transportation to encourage walkability in communities	"Environmental Justice and Safe Routes to School: Healthier Communities for Children and Their Families to Walk, Bike, and Thrive: Jurupa Valley Case Study" by Safe Routes to Schools	https://www.saferoutespartnership.org/sites/default/files/resource_files/ds-11789_vfhk_case_studies_jurapavalley.pdf
Improve infrastructure and public transportation to encourage walkability in communities	"Move This Way: Making Neighborhoods More Walkable and Bikeable" by ChangeLab Solutions	http://changelabsolutions.org/sites/default/files/MoveThisWay_FINAL-20130905.pdf
Improve infrastructure and public transportation to encourage walkability in communities	Complete streets and streetscape design initiative	https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/complete-streets-streetscape-design-initiatives
Improve infrastructure and public transportation to encourage walkability in communities	Mixed use zoning	https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/mixed-use-development
Improve infrastructure and public transportation to encourage walkability in communities	Safe Routes to Schools	https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/safe-routes-to-schools
Reduce the number of days people are exposed to unhealthy air, especially as related to the Salton Sea	Clean diesel technology fleet transition program	https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/clean-diesel-technology-fleet-transition-programs

Evidence-Based Programs Related to Mental Health

Relevant Objective	Program	Link
Increase the proportion of people (children, adolescents, adults) with mental illness who get treatment	"The Way Forward: Federal Action for a System that Works for All People Living with SMI and SED and Their Families and Caregivers" by SAMHSA	https://store.samhsa.gov/product/The-Way-Forward-Federal-Action-for-a-System-That-Works-for-All-People-Living-With-SMI-and-SED-and-Their-Families-and-Caregivers-Full-Report/PEP17-ISMICC-RTC
Increase the proportion of people (children, adolescents, adults) with mental illness who get treatment	"Assertive Community Treatment (ACT) Evidence-Based Practices (EBP) KIT" by SAMHSA	https://store.samhsa.gov/product/Assertive-Community-Treatment-ACT-Evidence-Based-Practices-EBP-KIT/SMA08-4344
Increase the proportion of people (children, adolescents, adults) with mental illness who get treatment	"Treatment of Depression in Older Adults Evidence-Based Practices (EBP) KIT" by SAMHSA	https://store.samhsa.gov/product/Treatment-Depression-Older-Adults-Evidence-Based-Practices-EBP-Kit/SMA11-4631
Increase the proportion of people (children, adolescents, adults) with mental illness who get treatment	"Strategies to Improve Mental Health Care for Children and Adolescents" review by the Agency for Healthcare Research and Quality.	https://effectivehealthcare.ahrq.gov/products/mental-health-children/research
Reduce suicide attempts and the suicide rate	"Treatment of Suicidal Ideation, Self-Harm, and Suicide Attempts Among Youth" by SAMHSA	https://store.samhsa.gov/sites/default/files/SAMHSA_Digital_Download/PEP20-06-01-002.pdf
Reduce suicide attempts and the suicide rate	"Zero Suicide Toolkit" by Suicide Prevention Resource Center	https://zerosuicide.edc.org/toolkit
Reduce suicide attempts and the suicide rate	Cyberbullying Prevention and Intervention Programs	https://crimesolutions.ojp.gov/ratedpractices/98