Community Health Equity & Promotion (CHEP): Supporting Health Equity in the Tenderloin Neighborhood

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Overview of CHEP Branch program areas and performance measures

In-depth look at CHEP efforts aimed to improve health in the Tenderloin neighborhood
Guided by Strategic Vision, Action Plans, and Values

DATA SCIENCE & KNOWLEDGE INTEGRATION* (ARCHES, CPHR, Bridge HIV)

STRATEGIC PLANNING: Office of Health Equity & Quality Improvement

HEALTHY PLACES (Protection)  
- - - Environmental Health

HEALTHY PEOPLE (Promotion)  
- - - Community Health Equity and Promotion

DISEASES (Prevention)  
- - - Disease Prevention and Control

DISASTERS (Preparedness)  
- - - Emergency Preparedness and Response, and EMS

SF Health Network (SFHN) and Community & Academic Partners

1. Safe and Healthy Living Environments (CHIP)
2. Healthy Eating and Physical Activity (CHIP)
3. Access to Quality Care and Services (CHIP)
4. Black / African American Health
5. Maternal, Child, and Adolescent Health
6. Health for People at Risk or Living with HIV

OPERATIONS: Office of Operations, Finance, and Grants Management

WORKFORCE: Center for Learning and Innovation
Alignment of CHEP Program Areas with DPH initiatives

Through community engagement, improve health and ensure health equity

- Community-Based HIV Prevention
- Community-Based STD Prevention
- Drug User Health Initiative
- Chronic Disease Prevention
- Safe & Healthy Environments
- Community-Clinical Linkages
CHEP Performance Measures: Examples

Collective Impact Level: HCV
• Increased # screened and # initiating primary care-based treatment

Branch Level: Black/African American Health
• Increased % of CHEP programs that intentionally address Black/African American health disparities

Program Area Level: STD Prevention
• Increased # of venue-based chlamydia, gonorrhea, and syphilis tests among men who have sex with men

Individual Program Level: Newcomers Health Program
• Increased % of health insurance enrollment of newly documented refugees and asylees in SF
Hepatitis C
Increased # screened and
# initiating primary care-based treatment

2,150 people screened
for HCV since 2014*
Target: 3,318 by the end of 2016

231 patients initiating primary care-based HCV treatment to date**
Target: 360 by the end of 2016

*Glide, St. James Infirmary, SF AIDS Foundation,
ZSFG Opiate Treatment Outpatient Program,
Westside, BAART Market & Turk, Bayview Hunters Point Foundation

**Data currently reflects Tom Waddell Urban Health Clinic,
Positive Health Program, Southeast Health Center. More clinics to be added as data becomes available.
## Black/African American Health Disparities: CHEP Program Assessment

**Assessment Domains:**
- Program elements
- Data
- Program locations
- Community input
- Customer/Client satisfaction
- Organizational partners
- Capacity-building
- Participant involvement in services/activities
- Cultural humility
- Program staffing

<table>
<thead>
<tr>
<th>Domain</th>
<th>Examples</th>
<th>Program Self Rating</th>
<th>Description of How the Program Addresses This Domain (or justification for why it’s not relevant)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Elements</td>
<td>• YUTHE</td>
<td>0 – No or N/A</td>
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<tr>
<td></td>
<td>• Tobacco Free Project smoking cessation</td>
<td>1 – Could be improved</td>
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<td></td>
<td>2 – Sufficient</td>
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<td>Data</td>
<td>• Pedestrian safety data</td>
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<tr>
<td></td>
<td>• HIV behavioral surveillance data</td>
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<tr>
<td></td>
<td></td>
<td>2 – Sufficient</td>
<td></td>
</tr>
<tr>
<td>Program locations</td>
<td>• Food Guardians</td>
<td>0 – No or N/A</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• District 10 Wellness Collaborative</td>
<td>1 – Could be improved</td>
<td></td>
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<td></td>
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<td>2 – Sufficient</td>
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</tbody>
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STD Prevention

Increased # of venue-based chlamydia, gonorrhea, and syphilis tests among men who have sex with men
Newcomers Health Program
Increased % of health insurance enrollment of newly documented refugees and asylees in SF

Percent of Refugee and Asylee Referrals Enrolled in Health Insurance/Primary Care

- 2011/12: [251 of 429] (59.17%)
- 2012/13: [280 of 444] (63.04%)
- 2013/14: [243 of 484] (50.31%)

Graph showing the percentage of refugee and asylee referrals enrolled in health insurance/primary care from 2011/12 to 2013/14.
Some of Our Customers in the Tenderloin

Community Partners

- SFPD
- TL Neighborhood Association
- SFUSD schools
- SFHN
- Community based organizations
- Workers in massage establishments & restaurants

Patients & Clients

- People with and at risk for HIV and STDs
- People who inject drugs
- Low income Black/African American and Latino communities
- Pedestrians
An Example of How We Work: Collaboration for Collective Impact

These efforts contribute to: Reduced alcohol-related harms, reduced chronic disease, reduced HIV and HCV transmission
CHEP Working for Health Equity in the Tenderloin

- Vision Zero
- Healthy Retail SF
- Deemed Approved Ordinance
- Tobacco Free Project
- Syringe Access & Disposal
- HIV, HCV, and STD testing
  … and much more
Thank you

Thanks to:

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• CHEP Branch and DPH Leadership