



COUNTY OF LOS ANGELES COMMUNITY PREVENTION AND POPULATION HEALTH TASK FORCE

COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC HEALTH
313 N. Figueroa St., Suite 708
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(213) 288-8252
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TASK FORCE CO-CHAIRS

Veronica Flores, MA

Nomsa Khalfani, PHD, MFT

December 14, 2018

TO: Each Supervisor

FROM: Veronica Flores, Co-Chair
Nomsa Khalfani, Co-Chair

SUBJECT: **COMMUNITY PREVENTION AND POPULATION HEALTH TASK
FORCE - PROGRESS REPORT 2018 CALENDAR YEAR**

This progress report describes the 2018 activities and accomplishments of the Community Prevention and Population Health Task Force.

Part I. Cover Sheet

The Commission Liaison for the Community Prevention and Population Health Task Force (Task Force) is Gayle Haberman, Director of the Department of Public Health Office of Planning.

The Task Force's physical address is 313 North Figueroa Street, Room 708, Los Angeles, CA 90012. The phone number is (213) 288-8252 and fax number is (213) 481-2739.

Task Force's website: thinkhealthla.org.

Task Force members:

Sonya Young Aadam, California Black Women's Health Project
Manal J. Aboelata, Prevention Institute
Mayra Alvarez, The Children's Partnership
Tamika Butler, Consultant
Melinda Cordero-Bárzaga, Visión y Compromiso
Veronica Flores, Community Health Councils
Michelle Fluke, Antelope Valley Partners for Health
Cathy Friedman, Peace Over Violence
Nancy Halpern Ibrahim, Esperanza Community Housing
Anisha Hingorani, Advancement Project
Anne Marie Jones, The LA84 Foundation
Nomsa Khalfani, Essential Access Health
Jim Mangia, St. John's Well Child and Family Centers
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Teresa Nitescu, Northeast Valley Health Corporation
Janae Oliver, Kaiser Permanente
Maryjane Puffer, The Los Angeles Trust for Children's Health
Cori Racela, Western Center on Law & Poverty
Margaret Farwell Smith, Policy Council, Los Angeles County Office of Women's Health
Amanda Staples, American Heart Association
Benjamin Torres, Community Development Technologies Center (CDTech)
Nicole Wong, Redeemer Community Partnership

Part II. Community Prevention and Population Health Task Force Mission

- Report to the Board with priority recommendations to promote health, equity, and community well-being in Los Angeles County (LAC) with a focus on population health improvement.
- Make recommendations to the Board, the Health Agency, and Department of Public Health (DPH) on public health priorities, initiatives and practices that will achieve health equity and healthy communities.
- Provide leadership and strategic direction for community health planning in LAC, which includes the Community Health Assessment (CHA), Community Health Improvement Plan (CHIP), and other strategic efforts to promote strong population health.

Part III. Historical Background

The Community Prevention and Population Health Task Force (Task Force) was established by the LAC Board of Supervisors on August 11, 2015 in the motion that approved the establishment of the Health Agency. The Task Force is responsible for reporting to the Board with priority recommendations for health, equity and community well-being.

The Task Force membership represents a unique, cutting edge “table” where a strong set of local leaders come together, think, strategize, take collective action, and inform DPH, the Health Agency, the Board and other key stakeholders of health equity priorities for LAC. (See full list of current Task Force members in Part I. Cover Sheet.)

The Task Force is the only advisory body in the County with a sole focus on primary prevention and population health. The Task Force represents an innovative model for harnessing the County’s subject matter expertise on community-based prevention and healthy equity—two essential elements of a high-functioning health system.

The first cohort of the Task Force members served a foundational role for defining how the Task Force would advance the health and well-being of residents in LAC. By developing operating principles around equity, the 25 public health champions paved the way for the critical equity work to continue in the second term.

At the end of May of 2018, the first Task Force cohort held its final meeting of the first two-year term. In August, a combination of new and returning members held the first meeting of the second term which extends from May 2018 to May 2020.

Part IV. Summary of Progress

This brief report provides an overview of Task Force activities from January through December 2018. Further details can be provided upon request.

Serves an Advisory Role to the Department of Public Health (DPH)

Advises DPH on Community Health Improvement Plan (CHIP). The Task Force:

- Critiqued and re-conceptualized the first CHIP in order to make the second CHIP more strategic and effective.
- Prioritized three strategic focus areas for the new CHIP: (1) protection of public health near neighborhood oil and gas development sites, (2) violence prevention, and (3) access to quality affordable housing.

Provides Input and Support to the Center for Health Equity. The Task Force:

- Served in an advisory capacity to the Health Agency's newly formed Center for Health Equity, staffed by DPH.
- Developed Principles of Equity, a set of recommended standards for decision-makers to follow, which were adopted by the Center for Health Equity in January 2018.
- Co-Chairs participated in the Center for Health Equity press event to release a draft action plan in August 2018 and one Co-Chair was interviewed on National Public Radio (NPR) to discuss the importance of elevating equity and the draft action plan.
- Co-sponsored Center for Health Equity community forums throughout the County.
- Provided input on the Center for Health Equity draft action plan and will continue to provide input on various issues as the Center matures.

Advises DPH on Initiatives and Practices that will Achieve Health Equity

- Task Force members provided input on the design of the County lead paint hazard mitigation initiative that DPH is coordinating. Their advice included recommended best practices to conduct quality community outreach about this initiative, including using "promotores" (peer outreach workers), and to implement a successful "local hire" program.

Operational Changes in Second Term of the Task Force

- Task Force members from the first two-year cohort participated in 15-minute exit surveys conducted by DPH's Office of Planning. Task Force leadership and DPH used the data collected to inform improvements in Task Force processes and overall engagement in meetings. Procedural improvements include a new action plan template for ad hoc committees to identify 12-month priorities and new processes for creating ad hoc committees and communicating their progress and next steps to the Task Force.
- Veronica Flores was elected Co-Chair in May 2018 for a term ending in May of 2020.
- DPH and the newly elected Co-Chair organized onboarding activities for nine new Task Force members.
- Nomsa Khalfani was elected Co-Chair in November 2018 for a term ending in May of 2020.

- Task Force Co-Chairs and DPH Office of Planning partnered with Liberty Hill Foundation to plan a customized training that will build capacity to increase the Task Force's impact. Liberty Hill Foundation will conduct the training in 2019, using their Commissioner's Training as the foundation.

Elevated Opportunities to Improve Health Equity and Reduce Health Inequities in LA County Through Collective Action

Principles of Equity Ad Hoc Committee:

An ad hoc committee to implement the principles of equity (POE) was created in 2018. Part of the committee's task is to develop tools that can support the principles' implementation. The committee is supported by Center for Health Equity staff.

CHIP Affordable Housing Ad Hoc Committee:

The Affordable Housing Ad Hoc Committee examined the current housing landscape and identified countywide housing policy priorities to increase access to safe, quality affordable housing. After this committee's sunset, the Task Force created the *CHIP Affordable Housing Ad Hoc Committee* to partner with DPH to design and carry out a community engagement process to partner with multiple stakeholders to develop affordable housing strategies for the new CHIP. In fall of 2018, the Task Force co-hosted with DPH a CHIP community meeting to seek input on policies and systems change needed to promote affordable housing.

Violence Prevention Ad Hoc Committee:

In 2018, the Task Force voted to create a Violence Prevention Ad Hoc Committee to provide input on the development of the strategic plan for the proposed County Office of Violence Prevention (OVP). Task Force members co-convened community listening sessions with DPH and Prevention Institute on residents' concerns about violence and opportunities to prevent violence. Task Force members have provided input to DPH on the new Violence Prevention Strategic Plan.

Public Health Protection Near Neighborhood Oil and Gas Production Facilities Ad Hoc Committee:

In 2018, the Task Force voted to create an ad hoc neighborhood oil and gas committee to provide input to the County and to the City of Los Angeles as they update their oil and gas ordinance. Task Force members met with Department of Regional Planning staff to discuss how to apply the POE to the County of Los Angeles' ordinance revision process and how to center health and safety. Task Force members held an educational presentation on the impacts of oil and gas production near urban neighborhoods at the November 2018 Task Force meeting.

Serves the Board of Supervisors

- At the closing of the first term, appointed Task Force members met with their respective Supervisor and/or Health Deputies to discuss major highlights of the first two-year cohort.
- Task Force members provided testimony in support of strategies, policies and approaches that advance health equity and community-based prevention in LAC, as appropriate.
- Task Force members sent a letter to the Board of Supervisors requesting their response to the pending changes to Federal public charge language. The letter highlighted the importance of protecting Immigrant families' access to health and social services. (See Attachment I) Task Force members provided testimony at the October 2018 Board meeting supporting the Board's Motion to engage in activity related to public charge.

The Community Prevention and Population Health Task Force would like to express its appreciation to the Board of Supervisors for its commitment to equity principles in LAC. The urgency to improve health outcomes, eliminate health inequities, create improvements in our health care system, reduce health care and related costs --among other reasons, make it imperative that LAC harnesses its subject matter experts, dedicated advocates, public health, health care, academic and community-based leaders toward a shared vision of a healthy and equitable LAC. We stand ready to work alongside the DPH, the Health Agency and the Board to advance population health, community-based prevention and health equity. We believe that this Task Force can continue to be a vital resource to the Board and all residents of LAC.

In Partnership,



Veronica Flores
Co-Chair



Nomsa Khalfani
Co-Chair

Attachment

- c: County Counsel
Executive Officer, Board of Supervisors
Board Deputies
Dr. Barbara Ferrer, Director, LA County Department of Public Health
Community Prevention and Population Health Task Force



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TASK FORCE CO-CHAIR
Veronica Flores, MS

July 5, 2018

The Honorable Board of Supervisors
County of Los Angeles
Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, CA 90012

PROTECTING IMMIGRANT FAMILIES' ACCESS TO HEALTH AND SOCIAL SERVICES

Dear Supervisors:

As members of the Community Prevention and Population Health Task Force (Task Force), we write to express our collective concern regarding a U. S. Department of Homeland Security draft rule that would allow immigration officials to deny an individual the opportunity to become a legal permanent resident or bar an individual seeking admission to the U.S. simply because an immigrant or his or her family members enrolled in a public benefit program. These proposed changes threaten the health, security and safety of individual residents as well as the Los Angeles County community at large. We sincerely appreciate your leadership in preparing for the rule through the recent executive assignment to all Departments. As you move forward with preparing official public comment for when the rule is published in the Federal Register, we have included information for you to make clear the impacts that the changes would have on County services, the well-being of populations served by the County, and the overall public health of Los Angeles County.

The U.S. Department of Homeland Security has informed the Office of Management and Budget (OMB) that it plans to propose regulations that discard longstanding policy about the meaning and application of the “public charge” provisions of immigration law.¹ “Public charge” has been part of our nation's immigration policy for more than 100 years and requires certain non-U.S. citizens who are seeking to enter the U.S. or to obtain lawful permanent resident (LPR) status to show that, based on all their circumstances, they are not likely in the future to rely on the government for subsistence. Under current policy, immigration officials can only look to cash

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Jim Mangia · Ramella Markarian · Damon Nagami · Lauren Nakano · Elisa Nicholas · Theresa “Missy” Nitescu · Janae Oliver
Maryjane Puffer · Cori Racela · Margaret Smith · Amanda Staples · Benjamin Torres · Nicole Wong

assistance or long-term institutional care paid for by government when making a public charge determination.

Based on the draft leaked to the media, the proposed rule would greatly expand the benefits that immigration officials consider when determining whether a person is likely to become a public charge. Benefits that *could* be considered under the leaked draft rule would include nonemergency Medicaid and the Children's Health Insurance Program (known together in California as Medi-Cal), the Supplemental Nutrition Assistance Program (CalFresh), the Special Supplemental Nutrition Program for *Women, Infants, and Children (WIC)*, Section 8 housing vouchers, the Low-Income Home Energy Assistance Program, the earned income tax credit, and financial assistance provided through the health insurance marketplaces established under the Affordable Care Act (Covered California).² Immigrants' use of programs related to their health and wellbeing — or that of their family members, including U.S. citizen children — would be a factor in deciding whether to grant lawful permanent residence (a green card). And, state or locally funded programs that are means tested, like My Health LA, might be factored into a public charge determination as well.

This policy change would essentially force families, including those with U.S. citizen children, to choose between getting the help they need to prosper – from crucial programs that provide medical care, food assistance, housing assistance, and economic security – and reuniting with those they love. These are not consistent with the ideals of our county, our state, or our country.

Los Angeles County, home to more immigrants than any other county in the nation, will be disproportionately impacted by changes to public charge policy. This policy would affect 1.2 million noncitizens and 2.4 million people living in families with noncitizens in Los Angeles County alone.³ This includes more than half of all children in the county who live with at least one immigrant parent.⁴ The fear generated by these rules would extend far beyond any individual who may be subject to the “public charge” test by creating a chilling effect that will harm entire communities as well as the infrastructure that serves all of us. This policy change would undermine access to essential health, nutrition and other critical programs for eligible immigrants and their family members. It would also make child poverty worse by discouraging enrollment in programs that address health, hunger and economic security, with profound consequences on families' well-being and long-term success.

Further, the proposed new policy would add burdensome administrative costs to state and local agencies administering health, nutrition, housing and other programs. Any change that expands the types of benefits that will be considered in public charge determinations or that includes benefits received by an immigrant's family and children will require benefits agencies to change their systems, forms, and procedures. Application systems will need to be redesigned to give applicants direct control over which benefit types they are applying for, for each member of their families, and delinked so that people are not unwittingly enrolled in benefits programs that will place them at increased risk to be considered a public charge.

Changes to public charge regulations present a significant threat to the health and well-being of more than two million Los Angeles County families. In communities today, children and

families are already living in fear, scared to visit a doctor or pick up food or play at a park because of the threat of immigration enforcement. The current crisis of family separation manufactured by the Department of Homeland Security is further evidence of a complete disregard for the well-being of immigrant families. The proposed changes to public charge regulations would make the situation for Los Angeles immigrant families even worse. On behalf of the Community Prevention and Population Health Task Force, we stand ready to work with you so that all families in Los Angeles County can lead healthy lives.

Respectfully,



Veronica Flores, MA, Co-Chair

Members:

Sonya Young Aadam, California Black Women's Health Project
Manal Aboelata, Prevention Institute
Mayra Alvarez, The Children's Partnership
Tamika Butler, Los Angeles Neighborhood Land Trust
Melinda Cordero-Bárzaga, Visión y Compromiso
Veronica Flores, Community Health Councils
Michelle Fluke, Antelope Valley Partners for Health
Cathy Friedman, Peace Over Violence
Nancy Halpern Ibrahim, Esperanza Community Housing
Anisha Hingorani, Advancement Project
Anne-Marie Jones, The LA 84 Foundation
Nomsa Khalfani, Essential Access Health
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Cori Racela, Western Center on Law & Poverty
Margaret Smith, Policy Council, Los Angeles County Office of Women's Health
Amanda Staples, Investing in Place
Benjamin Torres, Community Development Technologies Center (CDTech)
Nicole Wong, Redeemer Community Partnership

c: Executive Office, Board of Supervisors

¹ Inadmissibility Based on Public Charge Grounds, RIN # [1615-AA22](#), was received by the Office of Management and Budget on March 29, 2018. <https://www.reginfo.gov/public/jsp/EO/eoDashboard.jsp>

² "Trump proposal would penalize immigrants who use tax credits and other benefits," The Washington Post, March 28, 2018. The Washington Post inked to the leaked draft here: https://www.washingtonpost.com/world/national-security/trump-proposal-would-penalize-immigrants-who-use-tax-credits-and-other-benefits/2018/03/28/4c6392e0-2924-11e8-bc72-077aa4dab9ef_story.html?utm_term=.c52e0402a554

³ This is based on noncitizens or people in families with noncitizens in Los Angeles County with incomes below 250% of the FPL under the leaked draft proposed rule, which includes a heavily weighed positive factor for individuals who can demonstrate income of 250% of the FPL or higher. 2012-2016 5-Year American Community Survey Public Use Microdata Sample (ACS/PUMS); 2012-2016 5-Year American Community Survey (ACS) estimates accessed via American FactFinder; Missouri Census Data Center (MCDC) MABLE PUMA-County Crosswalk. Custom Tabulations by Manatt Health, 5/16/2018.

⁴ Children Living with One or More Foreign Born Parent, kidsdata.org U.S. Census Bureau, [American Community Survey](#) (Dec. 2015). <https://www.kidsdata.org>