

PUBLIC HEALTH ANNUAL REPORT 2004

County of Sonoma Department of Health Services,
Public Health Division, April 2005

Living Healthy...California Style, Eat Healthy, Be Active, Live Well -

Mary Maddux-González, MD, MPH, Health Officer

The Sonoma County Department of Health Services is proud to announce Public Health Week from April 4 through April 10, 2005. The theme for this year's Public Health Week is Living Healthy...California Style, Eat Healthy, Be Active, Live Well. This theme was selected in recognition of the central role that healthy eating and physical activity play in our health.

Changes over the last several decades in eating habits and physical activity levels have led to a dramatic increase in obesity. Currently 64% of adults in the United States are overweight or obese. Locally, 45% of fifth graders in Santa Rosa Schools are overweight or at risk of overweight. These rates of overweight and obesity put children and adults in our community at risk for lifelong health problems, including diabetes, heart disease, and certain cancers. If the current obesity trend continues, 36% of all babies born today in California will at one point be diabetic.

Many changes in our society working in combination have contributed to the obesity epidemic through a decrease in physical activity, an increase in inactivity and altered eating habits. There are important steps that individuals and families can take to maintain or achieve a healthy weight:

- Get up and get active by engaging in at least 30 minutes of physical activity each day.
- Cut back on inactivity by watching less television and video games.
- Eat 5 helpings of fruits and vegetables a day and cut down on sodas and juice drinks.

A central part of Public Health Week each year in Sonoma County is the selection of Public Health Champions in recognition of the exceptional contributions to the health of our community made by certain local individuals and organizations. The Public Health Annual Report 2004 includes information on this year's champions and their many accomplishments, as well as several articles on some of the many programs and activities of Public Health over the last year. The Sonoma County Department of Health Services hopes you find this report useful and encourages you to incorporate physical activity and healthy eating into your daily routine.

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Sonoma County Health Status Report, 2001-2003

Health Status Indicator	Sonoma County	California	National Objective ²
Low birth rate ³	5.2	6.4	5.0
Breastfeeding initiation ³	92.7	83.3	75.0
Late or no prenatal care ³	12.1	13.6	10.0
Adequate/adequate plus ³ prenatal care	70.3	77.7	90.0
Teen (15-19 yrs) birth rate ⁴	27.0	41.1	N/E
AIDS incidence (13+ yrs) ⁵	11.80	14.73	1.0
Chlamydia incidence ⁵	136.24	310.28	N/A ⁶
Cancer (all) death rate	182.2	169.6	159.9
Female breast cancer death rate	24.3	23.4	22.3
Lung Cancer	50.3	43.8	44.9
Diabetes death rate	17.4	21.3	N/A ⁶
Suicide death rate	11.4	9.5	5.0
Unintentional injury death rate	31.6	28.6	17.5
Firearm injuries	8.3	9.6	4.1
Heart disease death rate	137.6	175.9	166.0
Stroke death rate	61.0	55.6	48.0
Drug-related death rate	11.0	9.4	1.0

¹Rates are per 100,000 population and age-adjusted unless otherwise noted

²Healthy People 2010: N/E National objective not established

³Rate is per 100 births

⁴Rate is per 1,000 females age 15-19 years

⁵Crude case rate; not age adjusted

⁶N/A: Prevalence data is not available in California

Source: California Department of Health Services, County Health Status Profiles for 2005

Preventing Epidemics

Leigh Hall, M.D., Health Officer

Between the sudden shortage of flu shots for the United States in the Fall of 2004 and the rising concern about "bird flu" (avian flu) in the world, influenza kept the Disease Control Unit of the Sonoma County Department of Health Services (SCDHS) busy in 2004. The flu shot shortage raised fears of more than usual human influenza disease in Sonoma County, while avian flu cases in Southeast Asia raised fears of a pandemic. A pandemic is a world-wide epidemic, usually caused by a new virus or strain of virus for which there is no immunity in the human population and no prevention or treatment.

In an average flu season in the United States 30-50 million people are infected with the flu virus, 115,000 are hospitalized and about 36,000 die despite efforts to immunize. At the beginning of the 2004-2005 influenza season (usually November to March), the supplier of about one-half of the vaccine for the US announced it would not be able to supply any shots. The SCDHS, working closely with CDC and the California Department of Health Services, prioritized available shots to high-risk individuals, established a respiratory hygiene public education campaign (reaching 4700 elementary school children, 550 teachers/administrators and 8 long-term care facilities) and made efforts to get more vaccine into the County in time to help.

The SCDHS eventually bought a large number of shots when they became available and helped the Sonoma County Flu Task Force, a coalition of community health care providers, organize a series of public clinics to vaccinate as many people as possible. SCDHS also made new supplies of vaccine available to health care providers. Fortunately, flu activity in the State and County was much lower than average, at least through the beginning of March.

In the meantime, human avian flu infections remained confined to only about 60 people in 3 countries in Southeast Asia, and there has been no evidence of significant human-to-human transmission so far. SCDHS has developed a comprehensive written plan to respond to a flu pandemic, should it occur, and is monitoring the situation in Southeast Asia on a continuous basis.



Assuring the Quality and Accessibility of Health Services

Sharon Oman, MCAH Coordinator

Teen Health Advocacy Committee (THAC) of the Sonoma County Maternal Child and Adolescent Health (MCAH) Advisory Board, a collaboration of community health providers and representative teens in the county produced a teen health video—Teen Clinics in Sonoma County—to promote health for Sonoma County adolescents

The efforts of the THAC are driven by the knowledge that the health and well being of Sonoma County teens has a major impact on the overall social and economic health of our county. Statistically, teens have the lowest utilization of health services for any given age group. In addition, many of the current adult health and social problems can be averted during adolescence.



Teen health advocates formed the following goals:

- To help teens understand what teen health services are and how they can access them.
- To educate teens about minor consent laws and the requirement of confidentiality for sensitive services (pregnancy, STI's, contraception, drug abuse and mental health services).
- To provide teens with information about Teen Health Clinics in Sonoma County, what they look like and where they are.

With 6 weekends of preparation, filming was done during spring break 2004. Core teen members were: Julianne Beaudoin, Khahn Cao, Joaquin Flores-Gibbens, Keith Pullin, Kathryn Small, and Jessica Williams. Mike Cox, an aspiring film maker filmed, edited and produced the film.

Traffic scenes at intersections were used throughout the film to symbolize choices teens are given, and directions they decide to take. Stop signs and screeching tire sound effects were created to draw the viewer's attention to the facts about confidentiality, abstinence, and other messages. A classroom scene with a teen playing the role of the teacher gave the opportunity to impart facts and added some humor.

Teen reactions to the video:

"Even though my personal bias is towards abstinence, I respect the fact that it presented the safe sex option for those who choose not to abstain."

"I learned how confidential the clinics are. What kinds of things the clinics are for."

"There are several ways to get information on sex and depression."

THAC members and teens are reaching out to multiple places where teens gather to distribute the video and clinic referral information. Pocket size cards accompany the video in English and Spanish – Teen Clinics in Sonoma County— listing specialized teen clinics, hours and locations. The contents of the video will compliment efforts of life skills and science teachers to inform youth about available health services.

"It's Confidential, It's Free, and It's for You and Me"—slogan stated throughout the video to inform teens about teen sexuality and mental health services.

Call Maternal, Child and Adolescent Health Program at 565-4553 for the video and accompanying clinic information cards. Or go to web: www.sonoma-county.org/mcah

Assuring the Quality and Accessibility of Health Services (continued)

A New Multi-disciplinary Service Delivery System For CCS Medical Therapy Unit Children

Maureen Flynn-Garcia, Supervising PHN, California Children's Services

California Children Services (CCS) is a state program that helps children receive treatment for debilitating illnesses, physical limitations, or chronic health problems. Twenty-five percent of CCS cases are open to the Medical Therapy Unit for Physical Therapy, Occupational Therapy, where they receive monitoring and clinic review with MTU specialty physicians.

In the spring of 2004, CCS broadened its team approach to provide more detailed attention for the care of the children at the MTU. Two Public Health Nurses were assigned to handle all MTU cases, to be present at the MTU clinics, and to expedite authorizations requested by specialty physicians. This model proved so successful that shortly thereafter a similar redistribution was done amongst social work staff, assigning two social workers to cover all MTU children.

This approach has facilitated program communication between the MTU staff and the administrative team.

The new MTU team provides these seriously ill and disabled children with full-scope services including improved access to healthcare, health insurance and family support and resources. Gail Winmill-Lee, Chief Therapist at the MTU, summarizes the change by saying, "Having two consistent nurses and social workers physically present at the MTU has been wonderful. Information can be accessed on the statewide system during the clinics. This enhanced coordination of services has helped the program to run more efficiently and improved communication with families. I'm looking forward to continued changes to help our program do what it was designated to do...Help the kids!"

Responding to Disasters

Stephen Rios, LCSW, Training & Education Coordinator



In 2004, a movie titled "Smallpox: Silent Weapon" was broadcast on television. Viewers were left wondering if the health authorities in their communities are prepared to respond to such a disaster.

To answer this question we must consider how well our public health emergency response team is educated and trained to respond to health-related emergencies. This team includes public health employees, volunteers, and all types of health professionals, who will work together with emergency personnel during an emergency response.

In October 2002, the Centers for Disease Control and Prevention began providing funding to address the specific training needs of public health emergency response teams. Thanks to this funding, the

Responding to Disasters *(continued)*

training efforts of the Sonoma County Department of Health Services have been focused into a comprehensive training plan to prepare our public health emergency response team to take action during a public health disaster.

These responders are receiving ongoing training in a variety of subjects, including Emerging Infectious Diseases, Smallpox, Recognizing Unusual Events, and Emergency Communications, to enable them to be more responsive and competent when dealing with disasters and public health emergencies. Up-to-date information about workshops, presentations and other training events is available at: www.sonoma-county.org/phtraining

An important component of the public health emergency response team is the Sonoma County Medical Reserve Corps (MRC). This volunteer group is comprised of health care professionals, such as nurses, physicians and pharmacists, as well as non-medical community members, who desire to serve as volunteers in our community during health-related emergencies.

These volunteers play an important part during a disaster, and receive the same high-level of training as our public health employees. Community members interested in joining this volunteer effort can visit the MRC website at: www.sonoma-county.org/mrc

In 2005, the training program will conduct four (4) daylong emergency preparedness workshops. These workshops will train the public health emergency response team on many emergency-related topics, and will help the teamwork as part of the County's overall emergency response efforts. These workshops are the result of collaboration of public health with regional partners, the Health Services divisions of Environmental Health and Mental Health, the Department of Emergency Services, the Public Health Laboratory, and local hospitals, and will help ensure a coordinated and effective level of response during a public health emergency.

Courses offered for 2004	# of Attendees
Influenza Vaccine	50
West Nile Virus	84
Emergency Preparedness	72
Grab/Go Emergency kit	27
Intro. To Epidemiology	25
Immunization	19
Geographic Systems	28
Laboratory Tabletop	21
SNS Warehouse Tabletop	66
Enhanced Tabletop Design	42
CD Surveillance	10
Respiratory Hygiene	14
Medical Reserve Corps	350



Training and Education Milestones

Training & Education program implemented to address public health preparedness training needs.	All 7 County Hospitals trained in smallpox.	Public Health Preparedness training website launched.	350 Medical Reserve Corps Trained to help meet surge capacity. Attendance at monthly Grand Rounds presentations reaches standing room only	Sonoma County training curriculum used as model for regional preparedness training curriculum.
December 2002	September 2003	October 2004	November 2004	December 2004

popularity.

Responding to Disasters *(continued)*

David Yong, Ph.D., HCLD, Director of Laboratory Services

On May 12, 2004, the Sonoma County Public Health Laboratory was appointed by the State Department of Health Services to be the North Bay's Level B Laboratory, otherwise called a LRN (Laboratory Response Network) Reference Laboratory. Our assignment includes the catchment area of Sonoma, Lake and Mendocino Counties. We will also provide surge capacity coverage to the counties of Marin, Napa and Solano. The Laboratory Response Network (LRN) and its partners maintain an integrated national and international network of laboratories that are fully equipped to respond quickly to emerging infectious diseases, acts of biological and chemical terrorism, and other public health threats and emergencies.

The award includes funds to renovate an existing space next to the present laboratory, converting it into a state-of-the-art laboratory testing facility for the safe handling of highly infectious microorganisms and harmful chemicals. The new laboratory will allow the laboratory workers to work in a safe and fully protected environment.

The Sonoma County Public Health Laboratory will also receive new testing instruments that are capable of rapid detection and identification of harmful organisms and chemicals. The cutting edge testing equipment will be able to very rapidly detect and then identify difficult-to-grow, highly infectious micro-organisms such as those causing tuberculosis, influenza and whooping cough (pertussis).

In addition to the equipment and space renovations, the award provides funding to hire 2 additional Public Health Microbiologists to carry out the important work of the laboratory.

The improved infra-structure of the Public Health Division's laboratory will significantly improve the health and safety of the residents of Sonoma and neighboring counties. The new facility will be fully operational in early to mid 2006.

Public Health Phone Numbers

	<u>PHONE</u>	<u>FAX</u>
Public Health Information	565-4400	565-4558
California Children's Services	565-4500	565-4520
Child Health and Disability Prevention	565-4460	565-4473
Commission on AIDS	565-4624	565-4637
Disease Control and Surveillance	565-4567	565-4565
Families First Home Visiting	565-4507	565-4558
HIV Testing and Counseling	565-4620	565-4637
Maternal Child Adolescent Health Coordination	565-4552	565-4550
Maternal Child Health Field Nursing	565-4440	565-4430
MCH Toll Free Line	1-800-427-8982	
Program Support	565-4401	565-4411
Public Health Clinic	565-4820	565-4797
Public Health Officer/Division Director	565-4401	565-4411
Teen Parent Connections	565-4480	565-4499
Vital Statistics - Birth/Death Certificates	565-4407	565-4413
Women, Infants, Children	565-6590	565-6524

Protecting Against Environmental Hazards

Laura Barnthouse, REHS, ND, Community Outreach Specialist

Sonoma County is blessed with scenic beauty, a temperate climate, and a bustling economy. Water is a vital component of this picturesque landscape, both in terms of natural resources and as an essential component of peoples' lives.



While water quality in our county is generally very good, some contaminants have been detected in groundwater in some areas of the county. These contaminants are of potential concern not only to the approximately 40,000 private well owners scattered predominantly throughout the more rural reaches of the county, but also to small public water systems in urban areas that depend on wells as their water source.

The Sonoma County Groundwater Contamination Response Plan, approved by the Board of Supervisors in August of 2003, specifies that whenever the Environmental Health Division of the Sonoma County Department of Health Services becomes aware of a groundwater contamination, notification will be promptly made to all property owners that are at potential risk. This is usually done through mailing notices to property owners within a specific radius of the contamination detection. This notification alerts the community to the possibility of contamination in their wells and advises them of the potential health risks associated with the chemical detected. If potential health risk is imminent, door-to-door canvassing of the neighborhood can occur.

The notification process of the Response Plan informs people about one of the most essential and important aspects of their daily lives—water. With notification, citizens are empowered to make informed choices not only about the water they drink, but also about the water in which they come into daily contact bathing, washing, cooking, and cleaning. Armed with information, people can choose to test their well water and are better informed about their options.

Property owners who rely on private domestic wells are encouraged to test their water quality. Water quality in private wells is not regulated by any government agency, which makes the Response Plan notifications even more vital.

Citizens concerned about their water quality are encouraged to call the Division of Environmental Health at (707) 565-6565. Additional water quality information, including access to Geotracker, the state's database of known regulated contamination sites, is available on the internet at: http://www.sonoma-county.org/health/eh/water_quality.htm

Preventing Illness and Injury

Beth Dadko, Prevention and Planning Health Information Specialist

Reckless teen driving and the provisional licensing law appeared as tragic topics in the local press this past year due to fatal crashes that killed some of our teens. This is not an anomaly. In Sonoma County, motor vehicle crashes are the leading cause of unintentional injury for youth ages 15-19, accounting for almost half of unintentional injury deaths and 41% of unintentional injury hospitalizations (1998-2001). Also, the hospitalization rate in Sonoma County is significantly higher than that of California State (197.72 vs. 163.26/ 100,000 from 1999-2002). Teen drivers are not the only ones at risk. Two out of three teens who die as passengers are in a vehicle driven by another teen. Statistically, every time you add another teen passenger, a teen driver is more likely to be involved in a crash, especially among new drivers ages 16-17.

Preventing Illness and Injury (*continued*)

Increased risk with additional teen passengers is attributed to distraction and risk-taking factors, which have serious ramifications for new drivers with little driving experience. Similar state-wide data are what influenced the creation of California's provisional licensing law, but there is evidence that many teens violate the law.

The Prevention and Planning Division has taken a leadership role, supported by Public Health and community partners, to address the issue. Securing a grant, the teen motor vehicle safety action team, comprised of multiple community partners, is creating a social marketing campaign targeting the parents of new teen drivers and teens. The social marketing campaign to be released in fall 2005 is to reach at least 75% of the 15, 16, and 17 year olds in Sonoma County and their parents, and to increase public awareness and education about teen motor vehicle safety and the provisional licensing program in Sonoma County.

The provisional licensing law has been in effect since 1998 and states that newly licensed drivers ages 16 and 17 have a provisional license. For the first 6 months or until turning 18, no passengers under age 20 are allowed in the car unless accompanied by a licensed driver age 25 years or older. For the first 12 months, or until turning 18, no driving is permitted between 12:00 a.m. (midnight) and 5:00 a.m. unless accompanied by a licensed driver age 25 years or older. There are specific exceptions requiring prior authorization. For more information call Beth Dadko at 565-6678.

Promoting Healthy Behaviors

Bobbie Berins, Program Analyst, Families First Program

The Families First program, funded by the First Five Commission provides three home visits for every first time parent in Sonoma County. Information is provided on a variety of subjects and home visitors link parents and babies with available services to help support them based on their wishes. The administrative arm of Families First is within Public Health and home visits are contracted out to multiple agencies within the community, as well as two Public Health programs, Field Nursing and Teen Parent Connections.

In 2004 there 3,465 overall visits made to first time parent. Important health topics were discussed such as:

- **Secondhand Smoke:** While this topic was introduced to all homes, 64% of parents asked to discuss it further and learned new ways to protect their infants from second hand smoke by keeping their homes and cars smoke-free.
- **Breastfeeding Support:** Especially important in the first visit, 67% of parents received significant assistance and support

in breastfeeding to continue through the first weeks which might be more challenging and for a longer duration of their child's first year. One mother provided feedback saying, "Without these visits I would have given up breastfeeding."

- **Infant Development:** Although infant development is discussed at each visit, the third visit allows the home visitor time to use the Ages and Stages Questionnaire to provide parents with many ideas on how they can understand and support their baby's development. Referrals were made on 2% of the infants to have a more in-depth developmental screening.

Overall, parents have responded very positively to the home visits and have been linked to valuable services of which they were often unaware. Comment such as, "This service was very helpful. I was feeling lost and didn't know where to turn. Now I have several options I can begin with to become a better parent. Thank you."

For more information call Bobbie Berens at 565-4543.

Public Health Champions

Promoting Healthy Behaviors

Rev. and Mrs. Coffee have dedicated their lives to improving the health and well being of their church members and the community at large. Rev. Coffee was a key figure in getting city officials to make the Race Equality Week festival a reality. The event entailed an International Village Parade in the Roseland neighborhood and a cultural diversity festival at the Finley Community Center. In all capacities, Rev. and Mrs. Coffee display sensitivity to the needs of a diverse population and work tirelessly to create a tolerant and hate-free community that celebrates all cultures and ethnic heritages.

Another shining example of the Coffees' work has been the development of a community event in honor of Martin Luther King, Jr. which includes a health and community service fair, presentations by doctors on issues such as heart disease and sickle cell anemia, volunteer opportunities, and civil rights movie viewing. Countless hours are spent working with committees to plan and facilitate this event. For more than ten years, the annual event has drawn at least 400 diverse community members, including many youth. Whether it is a team or as individuals, this remarkable couple consistently works towards making Sonoma County a healthy and tolerant place to live.



Responding to Disasters and Assisting Communities in Recovery

Cindy Jones volunteers as the Disaster Health Services Coordinator for the Sonoma County Chapter of the American Red Cross. She recruits, trains, and coordinates all ARC health service volunteers and oversees the disaster health services program at the chapter. Cindy is available to help 24/7 on-call Disaster Action Team. Night and day she responds to local disasters. To meet the dietary needs of ARC shelter populations, she designed ethnic menus to be used for fixed and mobile feeding. In addition, she has worked to recruit Hispanic volunteers to work in disaster health services.



Cindy has worked with fire and flood victims as they move towards recovery. She helps disaster clients replace their medications, coordinates shelter needs for those disaster clients with special concerns, and watches out for the health needs of volunteer disaster workers at the local chapter. On one Thanksgiving when a fire destroyed six apartments and impacted 60 residents, Cindy responded to the 6:00 a.m. disaster call. She spent the next 10 hours helping people take care of their health and replace almost \$500 worth of medications for one client. Her only statement was, "It was a honor to give up my Thanksgiving to assist people in need."

Assuring the Quality and Accessibility of Health Services

For many years Elizabeth Van Tassel, DDS has been the only dentist locally to provide sedated-dentistry service for Medi-Cal and other poorly insured children. When dental disease in children becomes so severe that it can only be treated with sedation, gaps in service become almost insurmountable. She has partnered with local hospitals for subsidized operating room access to provide the needed treatment. She also initiated a program to prevent "repeats" in sedated service, by providing education, surveillance, preventive treatments, and guidance for hygiene and nutrition. She also serves the developmentally disabled who are frequently not capable of cooperating in their dental treatments. Besides helping children to preserve their physical health, she has contributed to their mental and social health by preserving their smiles.

Dr. Van Tassel has served tirelessly on the Oral Health Partnership, initiating innovations for providing care pathways where they have not existed, and keeping the primary care community informed of her availability, and where services need to be increased. Her dedication to the immediate patient need and the systemic policy needs have been inspirational.



Public Health Champions

Assuring the Quality and Accessibility of Health Services

Jean Merwin, Executive Director of the Redwood Community Health Coalition has demonstrated outstanding leadership to improve the quality and accessibility of health services for all members of our diverse community. A partial list of accomplishments includes:



- Helped develop the Children's Health Initiative to provide universal health coverage for all local children.
- Obtained resources to coordinate enrollment of children in health insurance programs such as Healthy Families (over 5,000 children enrolled in Healthy Families throughout the county).
- Oversees management of two immunization projects that increased the immunization rates for infants.
- Obtained resources to develop Chronic Disease Management models in the community health centers emphasizing patient self-management of chronic disease (to improve clinical practice and health outcomes).
- Obtained resources to improve the infrastructure and organizational capacity of health center partners to utilize technology for clinical data tracking and future implementation of electronic health records.
- Provided resources to community health centers seeking designation as Federally Qualified Health Centers (bringing over 2.5 million dollars per year into the safety net delivery system to support health care for the uninsured and under-insured in diverse communities).

Jean Merwin's contributions and commitment to the development of the health care safety net in Sonoma County over the last ten years are truly exceptional.

Impacting Environmental Factors Toward Better Health

John Abrahams has served as a member of the Alcohol and Other Drug Advisory Board since 1997 and Chair of the Board since 1999. This Board is advisory to the Board of Supervisors on alcohol and other drug issues and provides a valuable connection with community. He has contributed efforts to prevent alcohol related crime, enhance access to AOD treatment, reduce stigma associated with addiction and advocate for environmental and policy changes to improve community health.

A few examples of John's efforts include:

- Advocate for enhanced community treatment options and educating policy members (making numerous public appearances at planning commissions and city councils to advocate for community-based treatment sites).
- Key leader in the Advisory Board's work to develop and implement a workplace alcohol and other drug policy for the County.
- Helping convene a county-wide, very successful conference for city planners, law enforcement, elected officials, and others on the use of land use policy tools to prevent community alcohol problems.



Over and above his position as Chief Public Defender, John has been a committed volunteer, attending evening meetings and participating fully in planning workshops and subcommittee work. He has stayed at late-night city council meetings to advocate for a treatment site, attended breakfast meetings to "pitch" to city managers, and given his time for strategy sessions or the "Recovery Happens" march.

Public Health Champions

Preventing Epidemics

Dr. Jeff Miller is Chief of Health Education and Disease Prevention at Kaiser Permanente. Dr. Miller provides his volunteer time and expertise for all parents in our community to have the necessary support and skills to be the primary teacher of their children.



Over several years he helped the local Medical Association create the Children's Network (now known as Kids Net). This service linked school age children with acute medical needs and no health care coverage or primary care to volunteer physicians in the community who rendered care. Dr. Miller has served for over ten years on the California Parenting Institute Board of Directors to institutionalize parenting education for parents with diverse cultural and varying languages. He has provided health education for the CPI newsletter, reaching 1,000s of patients through the community. In addition, Jeff has played a leadership role in addressing the epidemic of child overweight and in developing local strategies to address this critical public health issue.

Dr. Miller has also provided volunteer medical services at the Roseland Children's Clinic. This clinic, based in an area where families have financial, cultural, language and educational challenges, creates a welcoming atmosphere and respect for parents who work hard to improve the health of their children.

In 2002 the Sonoma County Medical Association Physician of the Year for Community Service for his work with children centered nonprofit agencies over the last 25 years.

Assisting Communities in Recovery

The Community Quilt Project was started by the Santa Rosa Quilt Guild. The Santa Rosa Quilt Guild started as a small group in 1976. They are a non-profit organization taking only donations and currently have over 200 members. Last year the Santa Rosa Community Quilt Guild made and distributed 720 quilts. The quilts come in all sizes are quite beautiful, rich with color and different textures. The quilts are donated to the following community organizations: The Sutter Neonatal Unit, The Memorial Neonatal Unit, The YMCA Women's Emergency Center, The YMCA "A Special Place," The Valley of the Moon Children's Center, The Sonoma Developmental Center, Easter Seals, The Catholic Charities Family Support Center, The Teen Parent Connections Program, The Maternal Child Health Field Nursing Unit and FISH in Sonoma.

The Community Quilt's Projects' desire is to help the community by helping Sonoma County's residents who are often in traumatic situations and in need of kindness and support. Lavella Cassinelli, the chairperson, states: "Quilts are a comfort and are made with love. People that receive them have a great warm feeling for knowing that someone cares for them."



Examples of the impact the Community Quilt Project has had on the community include:

1. The children who are removed from their homes due to child abuse and/or neglect and go to the Valley of the Moon's Children Center are immediately given a quilt upon arrival. The quilt is often the only possession the child has at the Center and the children often hang tightly onto them for comfort and support.
2. The parents of the infant in the neonatal units pick out the quilt they want. The quilts are placed by the infant's isolette. Thus the parent's can instantly identify their infant. These quilts cheer up the neonatal units, which can often be a traumatic place for parents.

The nominee's awareness of and sensitivity to the diverse needs of the community is demonstrated by the diverse community organizations the quilts are donated to. Thank you the Santa Rosa Quilt Guild for the loving and supportive work you provide to Sonoma County.

Leading Reportable Diseases, Sonoma County, 2004

<u>Disease</u>	<u>Number</u>	<u>Ten-Year Average</u>
Chlamydia	612	542.7
Hepatitis C, Chronic	195	344.2
Gonorrhea	142	64.3
Campylobacteriosis	107	130.8
Salmonellosis	60	56.4
Hepatitis B, Chronic	53	69
Meningitis, Viral	35	20.2
Giardiasis	32	66.9
AIDS	19	58.8
Shigellosis	12	27.7
Hepatitis A	8	36.9
Pertussis	8	36.8

County of Sonoma
DEPARTMENT OF HEALTH SERVICES
Public Health Division
625 Fifth Street
Santa Rosa, CA 95404-4428



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