
Eleanor Littman: Local health-care needs can't wait for federal assistance

"Don't wait!" Ed O'Neil, Ph.D., urged members of the local Health Improvement Partnership HIP of Santa Cruz County back in 2007. "Don't wait for Sacramento or Washington to expand health care coverage to reform the local health care system."

Dr. O'Neil, director of the UC San Francisco Center for the Health Professions, was addressing HIP's annual board meeting. HIP includes representatives from 23 different local health care organizations, working together to tackle common problems affecting the health of county residents. At the time, his advice seemed discouraging. Against a state and national backdrop that leaves many residents uninsured and doesn't adequately cover primary care and prevention even for those who are insured, how could HIP succeed in its health improvement goals?

Since that 2007 evening, Sacramento and Washington have tried and failed to enact meaningful reforms, although there is some hope that initial national reform steps are finally in motion. As we look ahead to 2010, we are reminded of Dr. O'Neil's wisdom. This year, HIP will focus once again on what we can accomplish locally.

A crucial tool is the set of local health care and other data provided by the Community Assessment Project CAP. Now in its 15th year, CAP's ongoing telephone survey of county residents gives us a current snapshot and a view of trends over time, including where we've made progress, where persistent trouble spots are, and what we should anticipate in the future.

The 2009 CAP survey results available online at www.santacruzcountycap.org point to an increase in the number of uninsured, including children and those who are newly uninsured and lack a consistent "medical home." HIP members are creating a Health Navigator program funded with federal dollars to help uninsured patients establish a medical home, get coverage if they are eligible, find assistance with medications, and access transportation or other social services as needed.

More county residents than in the past lack a regular source of health care. Those who do have a regular source of health care name Emergency Departments EDs as one of those sources. EDs serve an important function in our health system, but substituting for a regular source of routine care is not a cost-effective role. Two HIP work groups - the Safety Net Clinic Coalition and the Pediatric Vision Group -- have endorsed the concept of patient-centered medical homes to coordinate health care services. In 2010, individual safety net clinics will be developing their urgent care capacity to help decrease the demand for ED use as a regular source of care.

Overall, CAP data indicate that there are two experiences of health care in our county: Latino and non-Latino. These overlap with other categories: low-income below \$35,000/year versus more affluent over \$65,000, and Pajaro Valley versus the rest of the county. These local disparities in health care experiences -- which encompass much more than health insurance coverage -- will need to be addressed, too, before the gap widens even more.

In 2010, HIP's members will continue to use data like these to guide our efforts and help ensure that our local health care system builds a common experience of quality, primary care for all county residents. If we receive a state or national assist in these efforts, we will welcome it -- but as Dr. O'Neill suggested back in 2007, we're not holding our breath. Local health needs are too urgent to wait.

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