

Tobacco Settlement Programs Outcomes Report

FY 2003-04



COUNTY OF ORANGE

HEALTH CARE AGENCY

OFFICE OF THE DIRECTOR

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Dear Colleagues,

n behalf of the Orange County Health Care Agency, I am pleased to present the 2003-2004 Tobacco Settlement Program Outcomes Report, the third annual report on Tobacco Settlement Revenues (TSR) summarizing the measurable results that enhanced the health and well being of Orange County residents. These revenues remain a valuable asset in addressing our community's increasing health needs in an unstable economic climate.

The Health Care Agency is grateful for the support of the Orange County Board of Supervisors, and our community partners who collaborated in developing the TSR priorities and the spending plan for FY 2003-2004. These partners include the Orange County Medical Association, the Orange County Chapter of the American Cancer Society, the Hospital Association of Southern California, the Healthcare Council of Orange County, the Coalition of Orange County Community Clinics, the Mental Health Association of Orange County, the Dayle McIntosh Center, AARP, and the National Council on Alcoholism and Drug Dependency for Orange County.

Many of the programs reviewed in the following report are innovative health care concepts and services are only possible through the careful allocation of Tobacco Settlement Funds. The various services funded through the FY 2003-04 TSR Spending Plan have made significant impacts on the health of many Orange County residents, from newborns to older adults. Tobacco Settlement funds allowed the Orange County Coalition of Community Clinics to provide 98,000 additional medical and dental patient visits in FY 2003-04 through their member clinics. Orange County hospitals received \$1.9 million for uncompensated care. Emergency room physicians and on-call physician specialists received \$9 million in TSR for uncompensated care. The Senior Health Outreach and Prevention Program conducted mental and physical health assessments for 963 high-risk older adults. Key outcomes from fiscal year 2003-04 are summarized in the attached report.

I look forward to sharing the ongoing progress of these programs as well as the many others made possible with Tobacco Settlement Revenue as we work together for a healthier tomorrow.

Respectfully submitted,

viliette A. Poulson, RN, MN

Director

Tobacco Settlement Programs Outcomes Report

Agreement, seven tobacco companies agreed to change the way tobacco products are marketed, and to pay States an estimated \$206 billion. California's share of the settlement is approximately \$1 billion a year. Half of the payment goes to the State's General Fund with the Legislature and Governor determining how it is used. The remainder of the Tobacco Settlement payment is divided, based on population, among California's 58 counties and the four largest cities for use as decided by each local jurisdiction.

Orange County voters approved Measure H in November 2000, creating the Orange County Tobacco Settlement Revenue Fund (TSR) and specifying that the County's TSR funds be allocated as follows:

- 19% to provide health care services for seniors and persons with disabilities
- 12% to tobacco prevention and control, including cessation services, for youth and adults to reduce smoking and the consumption of tobacco, other addiction programs, and community mental health programs and facilities
- 20% to non-profit community clinics
- 23% to fund emergency medical services provided by emergency room physicians and emergency room oncall physician specialists
- 6% to hospitals within Orange County maintaining basic or comprehensive emergency services or trauma centers to cover the costs of providing charity care
- 20% to the Sheriff's Department for public safety programs and services

The Health Care Agency (HCA) and community representatives continue to collaborate on the annual spending plan for TSR health programs. The Orange County Board of Supervisors approved the FY 2003-04 TSR spending plan on June 3, 2003. This plan included the continuation of TSR funded programs as well as new concepts for FY 2003-04.

The third full year of programs supported by Tobacco Settlement funds demonstrated continued success and progress in addressing areas of need. For example, the Senior Health Outreach and Prevention Program (SHOPP) saved lives by successfully linking seriously ill isolated seniors to medical and mental health care. The Community Clinics continued expanded service hours and provided 98,000 primary care visits in FY 2003-04 using Tobacco Settlement Funds.

In summary, the programs funded by TSR revenues have made lasting impacts on the health of a significant number of OC residents, such as the seriously and persistently mentally ill, homebound older adults, teens, and emergency room users. Moreover, organizations have incorporated smoking cessation and anti-smoking components into their programs, which promises to help further reduce smoking-related morbidity and mortality in Orange County. The following report presents a summary of the second year milestones and outcomes for the health programs supported by Tobacco Settlement Funds.

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Tobacco Settlement Programs Outcomes Report

I. Health Care Services for Seniors & Disabled

Total Budget: \$13,026,677 Total Expenditure: \$7,999,920*

*Expenditure information based on TSR claim as of June 30, 2004. Over \$4 million allocated to senior non-emergency medical transportation will be carried forward and expended in future years as part of the long term implementation of the senior non-emergency medical transportation plan.

Non-Emergency Medical Transportation for Seniors

Program Budget: \$6,470,875

The allocation includes the program Senior Non-Emergency Medical Transportation and the continuation of the ACCESS trainer program to help seniors apply for the OCTA ACCESS program.

Senior Non-Emergency Medical Transportation

A coordinated effort initiated to improve the medical transportation options for seniors in Orange County. This program includes pilot programs, Volunteer Mileage Reimbursement, and Countywide Coordination to meet the non-emergency medical trip needs of Orange County Seniors. The Office on Aging is the facilitator for the transportation program.

- Contracts were issued in late 2003 bringing the total of pilot programs to eight. Currently, 5,987 seniors are enrolled in the programs and over 6,800 trips are being provided monthly. For fiscal year 2003/04, a total of 43,393 trips were provided.
- Phase II is underway and it is expected that implementation of best practices model will result in 3 to 4 providers for complete county-wide coverage.
- County-wide 59% of those served were at or below 150% of the Federal Poverty Level.
- The average age of clients using the program is 76 years old.
- Approximately 1,700 individuals served required assisted transportation and/or door-to-door service.

Senior Transportation Trainer

A Senior Transportation Trainer provided information and assistance to older adults in using existing transportation resources.

Outcomes/Current Status:

- As of June 2004, 20 presentations regarding transit options and OCTA Access awareness were provided throughout county to various senior centers, community programs and service providers.
- Fifteen Train-the-Trainer classes were conducted and 84 volunteers were trained. This year a new approach to providing telephone assistance, and going to the individuals' homes to provide application assistance, resulted in reaching the most needy seniors, about 321, who do not have the capability to access a senior center.

SERVICES FOR SENIORS

Senior Health Outreach & Prevention Program (SHOPP)

Program Budget: \$1,419,368

A specialized program to promote the optimal health of older adults and underserved adults. Public Health Field Nurses and Behavioral Health staff conducted home visits to high-risk elderly with identified mental and/or physical health concerns. Assessments, short-term case management, and linkage to community resources were provided to older adults, their caregivers, and families.

- Over 1,480 initial assessments for mental and physical healthcare issues were conducted for 963 high-risk seniors. Additionally, 1,483 follow-up assessments were completed (1,106 PHN and 377 BH).
- 510 consumers linked to healthcare services; 461 linked to ongoing case management; 315 to support services; 272 to in-home nutrition education and/or meal services; 217 linked to transportation; 81 for housing resources; 104 for mental health services or substance abuse resources.
- A Pharmacist conducted 48 "brown bag" events and reviewed the medications of 275 older adults.
- More than 2,860 professionals and some 4,021 seniors were provided health education at community events and conferences.
- Over 1,380 consumers were provided tobacco education materials and 963 seniors received a tobacco assessment.

Adult Protective Services

Program Budget: \$87,511

Serving adults at risk of abuse, this program develops appropriate services plans and enables Adult Protective Services clients to pay for prescription medications and medical equipment pending approval for Medi-Cal or disability designation.

Outcomes/Current Status:

- Sixty eight (68) medical and behavioral health assessments were provided to at-risk seniors, as well as providing 52 consultations.
- Twenty seniors received durable medical equipment and/or medication for urgent medical needs. State budget cuts will increase need for this service in the upcoming year.

In-home Services for Latino and Vietnamese Older Adults

This program contracted with community based providers to enhance counseling and mental health treatment focusing on socially isolated older adults who were unable or unwilling to access traditional services. Services are available to accommodate the special needs of Latino and Vietnamese older adults.

Outcomes/Current Status:

- Program has provided in-home services to 295 consumers.
- Additional psychiatric and medical services were provided to 54 seniors, including the need for 37 emergency room visits and 16 calls to paramedics.

Door-to-Door Community Program Targeting Latino Elders

Program Budget: \$340,411

The goal of this community program is to inform and link older adults and their families, to available home and community appropriate services to protect their health and well being, and to enhance their personal care. "Care Door-to-Door" serves low-income, high-risk elders in predominantly Latino neighborhoods, with a particular emphasis on isolated, frail older adults.

- Over 3,400 assessments including 1,444 initial assessments, 2,000 in-depth assessments including home safety checks were completed.
- 1,992 direct links to community resources have been completed and 89 older adults and their families have received educational sessions.

- 22 support group events were organized in response to the prevalent isolation identified among older adults in the target community.
- 129 follow-up evaluations were conducted to assess improvements in participants' quality of life.
- This program has been a great success; far exceeding it's goals of helping frail older adults.

Friendly Visitor Program

Program Budget: \$125,000

This program aims at promoting optimal health for isolated, homebound seniors by linking them with volunteers for increased social contact and interaction. Tobacco Settlement Funds supported the coordination, training and recruitment of the volunteer visitors for this program.

Outcomes/Current Status:

- Fifty nine (59) volunteers participated in the program and they provided over 1,095 hours of service to 66 isolated seniors.
- Fifteen agencies and 9 faith groups joined Caring Connections.

SERVICES FOR THE DISABLED

Mental Health Rehabilitation Center

Program Budget: \$1,470,000

The Mental Health Residential Center Program (MHRC) continues to leverage funding with other sources to maintain local treatment for seriously and persistently mentally disabled adults during FY 2003-04. This rehabilitation program focuses on adults who have a concurrent substance abuse disorder along with chronic mental disability and require a secure residential treatment setting.

- Operating at near full capacity with an average daily census of 60 patients, serving a total of 121 consumers for FY 2003-04.
- Improved effectiveness and continuity of treatment was indicated by 10% reduction in length of stay, which shortened from 304 days to 277 days.
- 75% of all discharged consumers went to a less restrictive level of care, compared to 69% in FY 2002-03 and 44% in FY 2001-02. The increase is a result of a program developed at the MHRC that prepares clients for independent living in the community.
- All consumers attended prevocational skills training classes that served to build selfesteem and readiness for discharge to a less restrictive level of care.

- 51 participated in on-site educational classes conducted by the local school district, for a total of 1,435 hours. One consumer obtained a G.E.D during their stay at the MHRC, and several others are preparing for the test.
- All consumers participated in weekly tobacco cessation education classes, 71 consumers expressed an interest in quitting smoking, and 71 reduced the number of cigarettes smoked per day and 41 attempted to quit smoking.

Transitional Community Living Program

Program Budget: \$733,054

The Transitional Community Living Program is a specialized, intensive program for 40 mentally ill disabled adults who are transitioning from inpatient treatment to community treatment.

Outcomes/Current Status:

- The contract provider experienced delays in obtaining state approvals. The required changes caused delays in completing the construction.
- The budget and staffing pattern were finalized, and all program staff were hired and trained. DHS licensure was obtained as of August 10, 2004. The program formally began receiving patients August 12, 2004.

Crisis Assessment Team

Program Budget: \$407,442

This dedicated team of mental health professionals is available to respond to community requests to conduct specialized evaluations of adults who may require hospitalization. The team provides a single point of contact for the community and allows for timely follow-up for consumers who may not require hospitalization.

- For fiscal year 2003-04, a total of 710 calls were received. Emergency response services were provided to over 568 clients (80%) who required a crisis assessment. Of those assessments 37% (209) required involuntary hospitalization.
- A total of 1,257 follow-ups (including home visit, hospital visit, linkage to provider and family intervention) were conducted for those clients who required an assessment.
- Average of 2.5 follow-up contacts per client following a crisis evaluation within a 60day period.
- 500 clients were successfully referred to community providers, primary care physicians
 or county mental health for continued treatment, including a total of 209 involuntary
 holds.

Program for Assertive Community Treatment (PACT)

Program Budget: \$564,309

PACT's goal is to provide intensive outpatient services to mentally ill, disabled persons and thereby increase support systems and assistance needed to prevent their hospitalization and possible incarceration.

Outcomes/Current Status:

- A total of 189 clients have been referred to the program since March 2003 and for this fiscal year there have been a total of 86 referrals.
- 44 clients are currently enrolled in the program.
- Intensive outpatient services included an average of 7 contacts per month per client allowing for early crisis intervention and prevention of hospitalizations.

II. Tobacco Prevention & Control, Other Addiction Programs & Community Mental Health Services

Total Budget: \$5,120,494 Total Expenditure: \$4,938,534*

Tobacco Prevention and Cessation Programs

Tobacco Free Communities

Program Budget: \$1,518,643

Tobacco-Free Communities (TFC) is a multi-year, comprehensive campaign focusing on community-school linked tobacco education and cessation programs. Funding supports the implementation of a comprehensive program including smoking cessation, media campaigns, youth mobilization, and enforcement of regulations, working through schools and city park and recreation programs.

- This health education program includes several initiatives whose common goal was to reduce prevalence of tobacco use and the exposure to environmental tobacco smoke.
- 27% decrease in smoking in the automobile and 14% decrease in smoking inside the home in all four cities targeted by this program.

^{*}Expenditure information based on TSR claim as of June 30, 2004.

- · 24 apartment/condo complexes adopted and implemented new nonsmoking policies.
- 87.5% increase in bar and club compliance with the Smoke-free workplace law.
- 43 tobacco retailers reduced their tobacco advertising on store windows by 25% and 13 tobacco retailers agreed to eliminate in-store advertising completely.
- · 23 tobacco retailers eliminated in-store advertising by 4 feet from the floor.
- · 26 tobacco merchants were awarded "5-Star Merchant" award.
- 60% reduction in the number of illegal sales of tobacco to minors from baseline.
- 346% increase in smokers calling the quit line from a baseline of 171 requests for cessation services increasing to 921 in the third year.
- Results of the cessation services showed a 33% quit rate after 90 days for the 1,304 individuals who participated in cessation services.
- Over 2,600 9th 11th grade students engaged in activities intended to reduce tobacco use in their schools and community and smoking prevalence among this group was reduced by 9% from baseline.
- 17 post secondary education institutions increased their smoking restrictions on campus and increased the promotion of cessation services.
- 36 businesses and/or organizations promoted cessation and provided cessation services/ resources for their employees or members.

Countywide Anti-Tobacco Event

Program Budget: \$15,000

A countywide Anti-Tobacco event was carried out with community organizations to increase residents' awareness of smoking prevention and cessation resources available to them in the county.

- A tobacco awareness event with 25 interactive tobacco education booths including voluntary health organizations, clinics, and community service agencies was attended by over 1,000 Orange County residents.
- 130 participants responded to an assessment that indicated that the event increased their knowledge of smoking issues and their support for smoke-free communities, parks and beaches.
- Huntington Beach subsequently passed an ordinance making their beach smoke-free.

Substance Abuse Prevention

Substance Abuse Prevention efforts include the following three projects:

Program Budget: \$350,791

Community Based Substance Abuse Prevention Programs

Three community-based organizations were contracted to increase the number of alcohol outlets that enforce a responsible beverage service policy and comply with window advertisement regulations.

Outcomes/Current Status:

- Twenty seven on-sale and 25 off-sale alcohol outlets adopted and enforced a responsible
 alcohol beverage service policy that included annual training for staff, making safe
 transportation options available, checking identification of all patrons, and posting
 signage that promotes responsible alcohol use and sales.
- Two cities, Cypress and Huntington Beach, have committed to creating a window signage regulation protocol.

Alcohol, Tobacco and Other Drug Data Collection

The goal of this project is to provide scientific data to support ATOD prevention planning, programming and evaluation.

- Alcohol and Other Drug (AOD) data collection by Cypress, Los Alamitos, and Seal Beach police departments is ongoing since January 2003. AOD problem environments are identified in each community and special analyses/reports prepared at the request of local police.
- Working with each local police department on using Alcohol/Drug-Sensitive Information Planning System (ASIPS) to enhance crime analysis applications.
- Collaborative plans for specific community-based initiatives have been developed and implemented to address AOD-related problems.

Mentoring Program for Youth

This program provided professional development and staff support for the Orange County Mentoring Partnership (OCMP), including facilitating collaboration among mentor programs.

Outcomes/Current Status:

- 100 mentors were recruited during fiscal year 2003-04.
- Six Orange County businesses were successfully recruited to promote volunteer mentoring opportunities for their employees and patrons.
- Seven media pieces were published promoting mentoring.

Countywide Methamphetamine Partnership

Program Budget: \$49,800

The purpose of this program is to collect research data and maintain a hotline to report suspected use, dealing or manufacturing of methamphetamine (Drug Use Warning Network - DAWN), and to link law enforcement to community-wide drug prevention efforts.

- The "Power of One" conference was held in October 2003, in which policy makers/community leaders from law enforcement, education, health and courts were asked to identify at least one action to help reduce methamphetamine use in Orange County.
- The third edition of the OC Methamphetamine Task Force Report was completed in October 2003.
- Eleven rental/leasing establishments signed policies agreeing to educate their employees about hazards and signs of meth production.

Substance Abuse Treatment

Perinatal Substance Abuse Treatment

Program Budget: \$375,000

TSR partially funds a perinatal residential substance abuse services program for 20 pregnant or parenting women and up to 24 of their children, with the goal of increasing the number of women with children that can be served and improving the quality of life for their children.

Outcomes/Current Status:

- 100% of the babies born (n=5) during this evaluation period were drug-free.
- 60% of all clients admitted to the 6-month program at Heritage House North graduated from the program.
- Assessment scores for clients who received 45 or more days of treatment indicated an average 68% decrease in drug use and 53% improvement in the psychiatric status.

Domestic Violence Program

Program Budget: \$348,511

This program expanded Alcohol and Drug Abuse Services (ADAS) to families with domestic violence cases (DV) involving substance abuse. The goal of the program is to provide effective outpatient assessment, treatment, and counseling to the perpetrators and victims of domestic violence and to reduce the incidence of any substance abuse by both parties.

- 134 new clients have been assessed and treated in addition to the 163 DV clients in the previous two fiscal years.
- Less than 1% of 4,218 drug/alcohol tests performed were positive.
- Clients who received 45 or more days of treatment revealed significant improvement in psychological, social, and occupational functioning. For the majority of clients (87%), their level of functioning improved (56%) or was stabilized (31%) following treatment.

Alcohol and Drug Treatment Expansion

Program Budget: \$467,519

These funds are intended to expand treatment services focused on adult and juvenile clients with both substance abuse and mental health problems who require residential treatment and outpatient treatment. The allocation includes \$158,680 for residential treatment services and \$308,839 for outpatient treatment services.

Outcomes/Current Status

- Phoenix House Residential Program: 39% of the adults who were treated graduated while 26% remained in this long-term treatment program. 27% of the juveniles admitted during FY 2003-04 graduated from the program.
- Dual Diagnosis Outpatient Program: The number of new dually diagnosed clients increased by 84, up to 245. Over ninety percent (93%) of the clients showed improved (64%) or stabilized (29%) functioning.
- During this fiscal year, 23 smoking cessation classes were offered for adults and 40 classes were offered at the juvenile facility. 16% of the adult smokers and 99% of the juvenile smokers who attended one or more classes successfully quit smoking.

Psychiatric Services for Substance Abuse Programs

Program Budget: \$614,210

The goal of this program is to provide effective psychiatric assessment and evaluation, treatment and counseling to adults and adolescents with identified co-occurring substance abuse and mental illness diagnoses. These services are provided at both County-contracted programs and at County-operated outpatient clinics. The recruitment for the psychiatrist is ongoing.

- With the addition of the TSR-funded clinical staff, the psychiatric treatment capacity of the mental health plan has increased to an average of 1,539 ADAS dually diagnosed clients during this fiscal year.
- From July 2003 to June 2004, the psychiatrist at the county contracted programs served 233 new dually diagnosed clients from both the county contracted programs as well as county clinics. On average, 84 clients received services from the psychiatrist monthly. The Mental Health Care Coordinator served 186 new dually diagnosed clients from the contracted programs. On average, 43 clients received services from the Mental Health Care Coordinator monthly, The average waiting time to see a psychiatrist has been reduced from 14 days (prior to TSR funding) to 4 days.

Medical-Psychiatric Beds for Acutely Mentally Ill

Program Budget: \$671,940

This program has made it possible to substantially improve the overall quality of care provided to indigent consumers, and allow the opportunity for many Orange County hospitals to receive reimbursement for the care they would otherwise deliver without remuneration.

Outcomes/Current Status:

- There were a total of 139 admissions covered by Tobacco Settlement Funds from July 2003 through June 2004. Most of the admissions came from local hospital emergency departments.
- 90% of admissions required concurrent medical treatment and 32% included a substance-related disorder diagnosis.
- 96% of persons hospitalized were referred at discharge to an aftercare program, 70% to county outpatient programs.
- The 139 admissions resulted in a total of 1,443 acute hospital bed days being used this fiscal year, averaging about 4 beds per day.

III. Community Clinics

Total Budget: \$6,859,081 Total Expenditure: \$6,304,146*

This allocation enhanced healthcare services provided by community clinics. Services and/or hours of operation continued to be expanded. Outcome measures include increasing access to primary or specialty medical services, expanding access to medical care, strengthening operational capacity, development of a system of care, and external evaluation.

Outcomes/Current Status:

 Tobacco Settlement dollars were used by community clinics to expand access for primary care as well as dental and mental health services by adding staff and equipment and remaining open on weekends.

Expanded services included:

- 63,194 primary care patient visits
- 3,239 dental visits
- 586 mental health visits
- 35,841 health education visits
- 1,918 miscellaneous services

^{*}Expenditure information based on TSR claim as of June 30, 2004.

- Expanded services to fill service gaps (including Oral Health Collaboration) during FY 2003-04 included:
 - 30,343 primary care visits
 - 17,530 dental visits
 - 4.792 mental health visits
 - 13.220 health education visits
 - 41,684 miscellaneous services provided

IV. Emergency Room Physicians & On-Call Physician Specialists

Total Budget \$9,019,789

Total Expenditure: \$9,019,789*

This allocation provides funding to compensate emergency room physicians and emergency room on-call physician specialists for services for nonpaying patients, contributing to the continued availability of these services. The Emergency Medical Services Fund (EMSF) program continues to have a positive impact in Orange County as a result of the infusion of TSR monies as directed by Measure H.

- Funds have helped augment emergency physician and on-call specialist reimbursements and allowed continued access to healthcare without interruption. No OC emergency departments were closed in the 2003-04 fiscal year.
- In FY 03-04 more than 102,000 claims for uncompensated care to Orange County emergency rooms were processed.
- While emergency departments in the County continue to face significant overcrowding
 and uncompensated care issues, the EMSF program is assisting in keeping them open
 and ensuring that physicians receive some payment for the services they provide.
 Without TSR funds, the emergency room crisis in Orange County would be a much
 bigger problem.

^{*}Expenditure information based on TSR claim as of June 30, 2004.

V. Hospitals Providing Charity Care

Total Budget: \$1,908,584 Total Expenditure: \$1,908,584*

Orange County hospitals that maintain basic or comprehensive emergency medical services (or trauma centers) for their communities received TSR support in the amount of \$1,908,584 in FY2003-04. This amount was distributed to hospitals for the uncompensated care burden born by each local hospital. The largest distribution of these funds, approximately 21%, was made to UCI Medical Center, Orange County's largest provider of uncompensated hospital care.

Outcomes/Current Status:

- Orange County hospitals serving as paramedic receiving centers and operating at least basic emergency services provided in excess of \$99,928,000 in uncompensated hospital care costs for the four quarters ending September 30, 2003.*
- No hospitals were forced to downgrade or curtail their emergency medical services in FY 2003-2004.

(*Based on data from Office of Statewide Planning and Development)

^{*}Expenditure information based on TSR claims as of June 30, 2004.