

Response to Santa Clara County General Plan Health Element

October 3, 2014

Thank you for inviting the public to submit comments regarding the Health Element. Our comments are solely addressing Strategy #3. We hope that our comments are helpful.

Strategy #3: Ensure equitable access to high quality physical and behavioral health coverage and care for all county residents.

Please consider a revision to the last two sentences of the first paragraph: 1) “In the past, access to health care has focused more on adequate distribution of clinical service...,” and 2) “In current practice, public health emphasizes that ‘access’ is more multifaceted.”

*In the world of primary care, **Access** has always been defined using approaches that assist the community in access to care (i.e. culturally competent providers, prevention, chronic disease management, availability appointments to primary health care, location, etc). **We suggest that the words, “In the past” should be reconsidered.***

Policies:

HE-A.22 - *We suggest that specific types of clinical preventive services be quoted and that a description of the types of “upstream factors” be mentioned in relationship to “timely access to clinical preventative services (i.e. social, physical, systems).*

HE-A.23 – *We suggest that this paragraph elaborate more on the primary care service and include achieving patient engagement and self-management through coordinated care. Further, please consider using terms such as Family Practice Providers and Allied Health Professions to refer to “service providers” (GP term is outdated)*

HE-A.25 – *Suggest mentioning the Affordable Care Act as this is the policy that is driving the increase in healthcare coverage as well as changes in MediCare/MediCal. Perhaps a more local goal would be to develop a response to those that are not covered by the ACA?*

HE-A.26 – *This is similar to HE-A.23 above with respect to using terms for providers. We suggest recognizing the shortage in primary care providers and including the efforts in recruitment and retention.*

Thank you and please do not hesitate to call for further clarification

On behalf of Community Health Partnership Staff

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