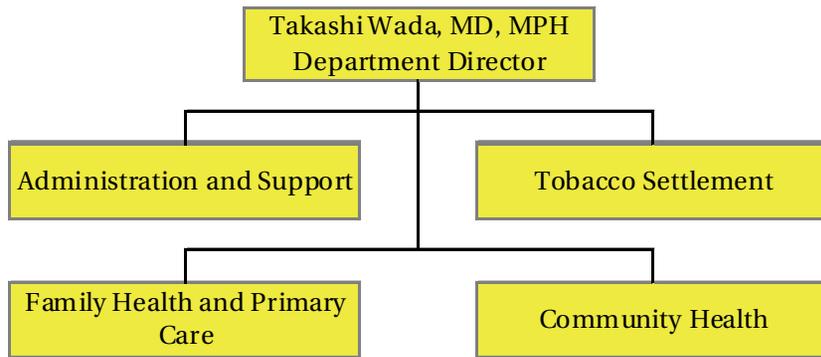
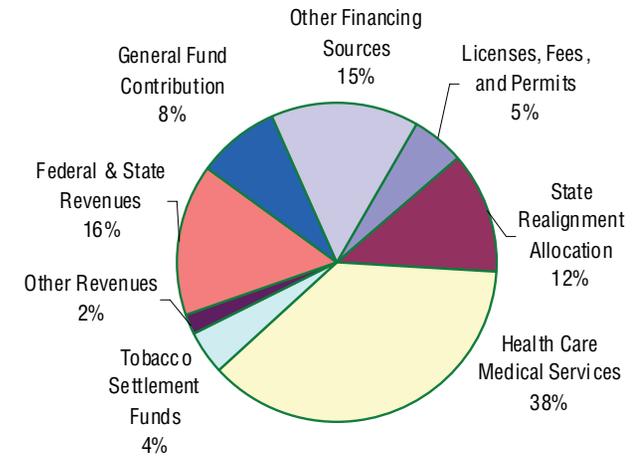


PUBLIC HEALTH

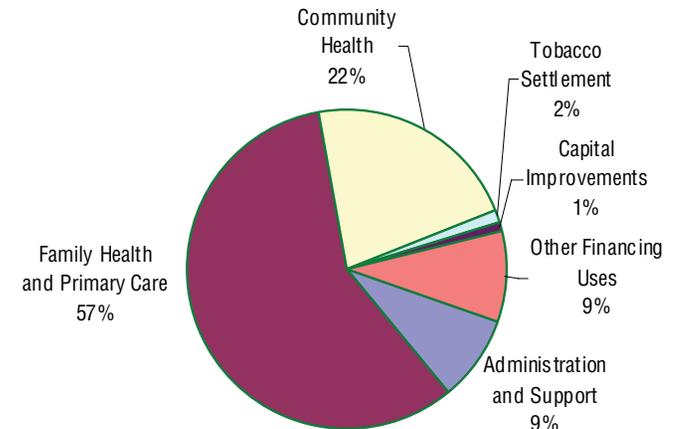
Budget & Positions (FTEs)	
Operating \$	83,928,884
Capital	646,243
Positions	493.5 FTEs



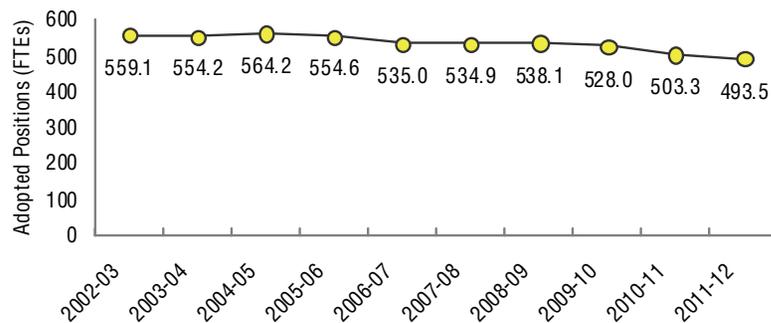
SOURCE OF FUNDS



USE OF FUNDS



STAFFING TREND



PUBLIC HEALTH
Department Summary

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Use of Funds Summary				
<i>Operating Expenditures</i>				
Administration and Support	\$ 7,408,785	\$ 7,788,380	\$ 7,402,021	\$ 8,150,938
Family Health and Primary Care	52,132,942	53,688,719	52,027,705	54,446,171
Community Health	22,994,852	21,864,865	22,394,367	20,671,174
Tobacco Settlement	326,632	1,584,222	2,380,376	1,422,408
Operating Sub-Total	82,863,211	84,926,186	84,204,469	84,690,691
Less: Intra-County Revenues	(620,710)	(902,783)	(746,636)	(761,807)
Operating Total	82,242,501	84,023,403	83,457,833	83,928,884
<i>Non-Operating Expenditures</i>				
Capital Assets	273,425	425,200	1,491,307	646,243
Expenditure Total	82,515,926	84,448,603	84,949,140	84,575,127
<i>Other Financing Uses</i>				
Operating Transfers	5,217,660	4,993,580	4,865,605	3,623,344
20% Endowment Designation	62,261	51,548	14,427	5,316
Tobacco Settlement Designation	4,124,028	4,602,084	4,146,714	4,185,468
Designated for Future Uses	4,423,112	3,317,480	3,614,563	928,213
Department Total	\$ 96,342,987	\$ 97,413,295	\$ 97,590,449	\$ 93,317,468

Character of Expenditures

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
<i>Operating Expenditures</i>				
Regular Salaries	\$ 35,456,235	\$ 37,005,971	\$ 36,243,638	\$ 38,574,806
Overtime	307,217	269,596	329,733	412,168
Extra Help	1,238,108	424,716	1,141,659	130,686
Benefits	16,114,617	17,288,499	16,826,364	20,037,981
Salaries & Benefits Sub-Total	53,116,177	54,988,782	54,541,394	59,155,641
Services & Supplies	27,875,674	28,651,304	28,109,718	25,485,050
Public Assistance Payments	208,027	--	237,476	--
Contributions	1,663,333	1,286,100	1,315,881	50,000
Operating Sub-Total	82,863,211	84,926,186	84,204,469	84,690,691
Less: Intra-County Revenues	(620,710)	(902,783)	(746,636)	(761,807)
Operating Total	82,242,501	84,023,403	83,457,833	83,928,884
<i>Non-Operating Expenditures</i>				
Capital Assets	273,425	425,200	1,491,307	646,243
Expenditure Total	\$ 82,515,926	\$ 84,448,603	\$ 84,949,140	\$ 84,575,127

Note: Presentation of the individual program amounts for fiscal years 2009-10 and 2010-11 have been adjusted to provide a consistent level of detail with the fiscal year 2011-12 budget, however, the totals for 2009-10 and 2010-11 have not been changed.

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Source of Funds Summary				
<i>Departmental Revenues</i>				
Licenses, Fees, and Permits	\$ 5,078,982	\$ 5,227,160	\$ 5,071,157	\$ 5,103,511
State Realignment Allocation	11,965,904	10,933,755	11,605,302	11,605,302
Health Care Medical Services	35,193,105	35,879,054	35,642,775	34,873,945
Federal & State Revenues	16,098,697	15,830,792	15,541,387	14,576,147
Other Charges for Services	345,915	354,791	352,390	355,026
Tobacco Settlement Funds	4,045,048	4,547,777	4,097,997	4,148,556
Tobacco Settlement Interest	70,642	105,855	63,144	42,228
Miscellaneous Revenue	1,886,233	1,658,282	1,710,125	1,279,643
Revenue Sub-Total	74,684,526	74,537,466	74,084,277	71,984,358
Less: Intra-County Revenues	(620,710)	(902,783)	(746,636)	(761,807)
Revenue Total	74,063,816	73,634,683	73,337,641	71,222,551
General Fund Contribution	10,158,398	7,852,355	7,852,356	7,975,629
<i>Other Financing Sources</i>				
Operating Transfers	3,207,029	3,250,120	3,378,040	3,076,498
Use of Prior Fund Balances	8,913,744	12,676,137	13,022,412	11,042,790
Department Total	\$ 96,342,987	\$ 97,413,295	\$ 97,590,449	\$ 93,317,468

	Actual FY 09-10		Adopted FY 10-11		Est. Actual FY 10-11		Recommended FY 11-12	
	Pos.	FTE	Pos.	FTE	Pos.	FTE	Pos.	FTE
Position Summary								
<i>Permanent</i>								
Administration and Support	64.3	58.6	63.5	59.7	63.5	55.8	62.0	59.6
Family Health and Primary Care	301.5	290.7	305.8	285.3	305.8	289.5	307.8	286.9
Community Health	171.5	150.6	167.8	146.4	167.8	145.4	156.8	139.7
Total Permanent	537.3	499.9	537.0	491.4	537.0	490.6	526.5	486.1
<i>Non-Permanent</i>								
Contract	--	2.6	--	3.8	--	2.0	--	4.9
Extra Help	--	23.1	--	8.0	--	25.4	--	2.5
Total Positions	537.3	525.6	537.0	503.3	537.0	518.0	526.5	493.5

Note: FTE and position totals may not sum correctly due to rounding.

MISSION STATEMENT

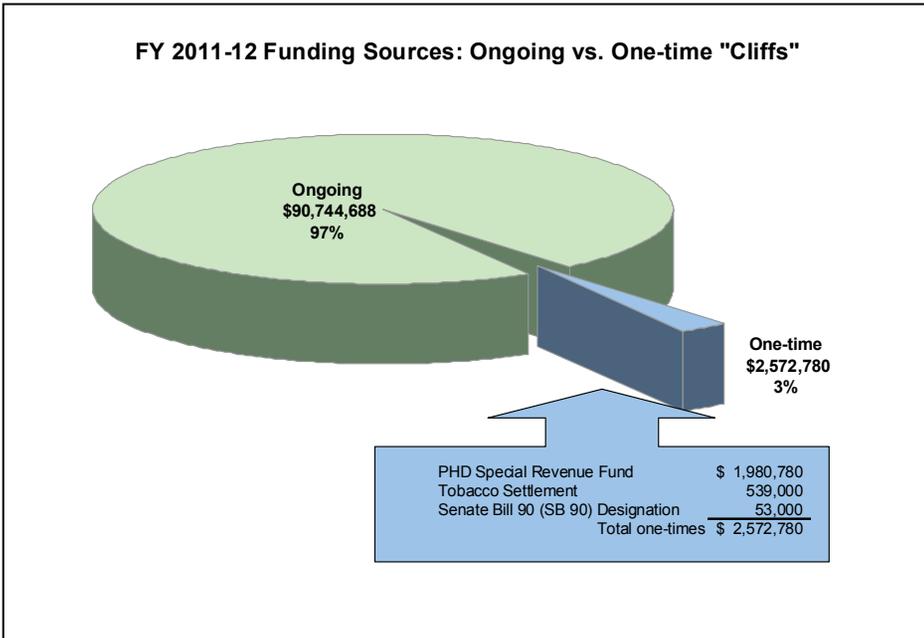
To improve the health of our communities by preventing disease, promoting wellness, and ensuring access to needed health care.

Budget Organization

The Public Health Department has two service divisions, "Community Health" and "Family Health and Primary Care," and two administrative divisions, "Administration and Support" and "Tobacco Settlement." The Department has a total of 494 full-time equivalent employees in 9 permanent locations and a variety of community service locations throughout the County.

Three percent of the Fiscal Year (FY) 2011-12 Recommended Budget is comprised of one-time sources of funding. Designated Senate Bill 90 (SB 90) dollars will fund extra help positions in the Animal Services program for the Responsible Pet Ownership Program (\$53,000); Tobacco Settlement Endowment dollars will fund the Dog Noise Officer, three Kennel Attendants, an Administrative Office Professional, and other services and supplies (\$539,000); and the use of PHD special revenue fund designation will fund clinic operations to sustain primary and specialty care service levels (\$1,980,780). As a result of the use of one-time sources, the department will face an initial budget gap of \$2,572,780 in FY 2012-13, which must be addressed to maintain these services.

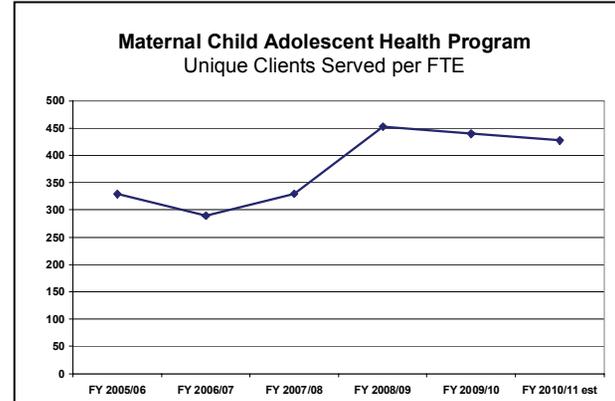
Even with staffing, service level reductions, and cost reductions made in previous years, the special revenue fund is projected to be depleted by FY 2014-15, if additional structural changes, service reductions, and other actions are not taken to restore financial stability. The depletion of the PHD special revenue fund has significant implications to the County and its indigent health-care mandates and to the maintenance of the area's health care safety net.



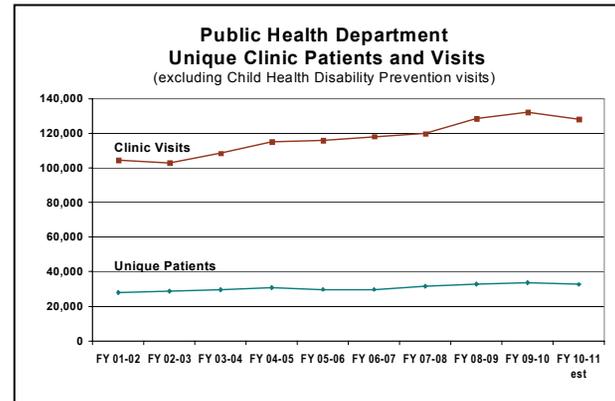
PUBLIC HEALTH

Department Summary (cont'd)

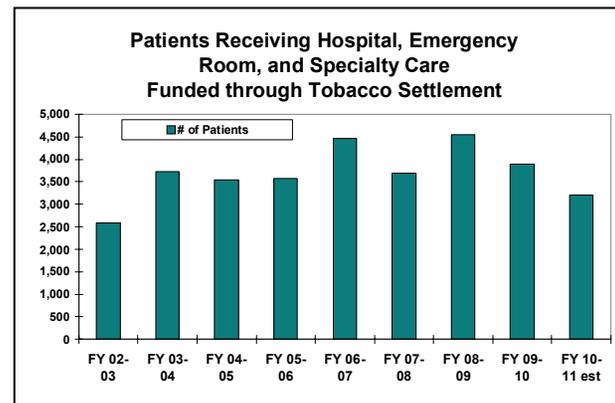
Activity Indicators



Public Health Nurses in the MCAH program provide short-term case management services to mothers and children reaching an average of 400 clients per full-time staff person



More than 128,000 clinic visits were provided in FY 2010-11 – a 23% increase since FY 2001-02. Unique patients served increased 17% over the same period.



Tobacco Settlement funding provides access to hospital and specialty care for more than 3,200 patients who do not qualify for coverage through Medi-Cal or other programs.

PUBLIC HEALTH

Department Summary (cont'd)

Significant Changes (FY 2010-11 Adopted to FY 2010-11 Estimated Actual)

Expenditures

The Estimated Actual operating expenditures decreased by \$722,000, to \$84,204,000, from the Adopted Budget of \$84,926,000. This .85% decrease is the result of:

- -\$1,300,000 - Inpatient and specialty referral costs for the Medically Indigent Adults (MIA) program, due to improved efforts at securing Medi-Cal eligibility status for and case-management of clients;
- +\$908,000 - FY 2009-10 Tobacco Settlement hospital allocations released from the Tobacco Settlement Fund during FY 2010-11 for use in an Inter-Governmental Transfer (IGT), that provided for federal matching opportunities;
- +\$777,000 - Extra help and overtime costs to cover vacancies;
- -\$762,000 - Salaries and benefits due to vacancies and recruiting difficulties, particularly with licensed professional staff;
- -\$670,000 - Cost and volume decreases in pharmaceutical costs;
- -\$462,000 - Benefits costs due to vacancies and recruiting difficulties;
- +\$410,000 - Computer purchases for: 1) the Electronic Health Record (EHR) project and 2) replacement of aging and inadequate equipment;
- -\$245,000 - Maddy/Padilla/Nava Fund revenues for physicians and hospitals;
- +\$237,000 - Audit Settlement for the Multi-Integrated System of Care (MISC) program for FY 05-06;
- +\$102,000 - Physician, nursing registry, and costs for contract labor associated with the EHR project;
- +\$93,000 - Professional services, supplies, and equipment costs associated with an extension of H1N1 preparedness funding;
- +\$84,000 - Clinical Laboratory software maintenance costs for the integration of the EHR project;
- +\$80,000 - Consulting fees for the Low Income Health Project (LIHP) as part of the State's Section 1115 Medicaid Waiver;
- +\$67,000 - Building maintenance and improvements, furniture, and fixtures;
- +\$57,000 - Women, Infant, and Children (WIC) program peer counseling grant project;
- -\$55,000 - Tobacco Settlement Allocation Committee (TSAC) administrative costs;
- -\$37,000 - Miscellaneous services and supplies, such as office supplies and travel;
- -\$36,000 - State Immunization grant reductions; and
- +\$30,000 - Warming Shelter passthrough dollars to Community Based Organizations (CBOs).

The Estimated Actual operating revenues decreased by \$453,000, to \$74,084,000, from the Adopted Budget of \$74,537,000. This .6% decrease is the result of:

- +\$671,000 - Vehicle License Fee and Sales Tax Realignment;
- -\$450,000 - Receipts from the Master Tobacco Settlement agreement;
- -\$443,000 - Medi-Cal and other patient service revenues;
- +\$437,000 - Public Health Emergency Response (PHER) funds extension for the H1N1 vaccination surge and preparedness programs;
- -\$218,000 - California Children's Services revenues;
- -\$207,000 - Reduced funding from the AIDS Drug Assistance Program (ADAP);
- -\$160,000 - HIV/AIDS State grant programs reductions;
- +\$150,000 - Women, Infants, and Children (WIC) program Peer Counseling grant;
- -\$139,000 - Cancer Detection Program State grant reductions;
- -\$129,000 - Animal Service program revenues;
- +\$99,000 - American Medical Response (AMR) contract revenue for Information Technology position;
- -\$98,000 - Interest income;
- -\$95,000 - Immunization Programs State grants reductions;
- +\$80,000 - Blue Shield Foundation grant to study the feasibility of a Low Impact Health Program (LIHP) provided for by the State's 1115 Medicaid waiver;
- +\$71,000 - Receipts from legislation (AB1900 Nava and SB1236 Padilla) that continued funds available to area physicians, surgeons, and hospitals after the sunset of the Maddy bill;
- +\$50,000 - Health Resources Services Administration (HRSA) Expanded Medical Capacity (EMC) funding for increased medical services under our 330(e) Community Health Center status;
- -\$42,000 - State passthrough dollars to community clinics for vaccines; and
- -\$30,000 - Environmental Health Services Land Use program service revenues.

Capital

The Estimated Actual expenditures increased by \$1,066,000, to \$1,491,000, from the Adopted Budget of \$425,000. This 39.8% increase is the result of capital purchases of hardware, software, and exam room upgrades for the department's implementation of the GE Centricity Electronic Health Record.

Significant Changes (FY 2010-11 Estimated Actual to FY 2011-12 Recommended)

Expenditures

The Recommended Budget's operating expenditures will increase by \$486,000 to \$84,691,000, from the prior year's Estimated Actual of \$84,204,000. This .58 % increase is the result of:

- +\$3,212,000 - Retirement, health insurance, and other benefit rate increases for licensed clinical professionals and other staff;
- +\$2,331,000 - Wage increases and step adjustments;
- -\$1,266,000 - Human Services allocations and Warming Shelter dollars to CBOs;
- -\$929,000 - Extra help, overtime, and temporary employee costs;
- -\$908,000 - FY 2009-10 Tobacco Settlement hospital allocations released from the Tobacco Settlement Fund during FY 2010-11 for use in an Inter-Governmental Transfer (IGT), that provided for federal matching opportunities;
- -\$346,000 - Professional services, supplies, and equipment costs associated with the H1N1 vaccination surge and funding extension;
- -\$292,000 - Physician, nursing registry, and costs for contract labor associated with the EHR project;
- -\$257,000 - Computer purchases for 1) The EHR project and 2) replacement of aging and inadequate equipment;
- -\$245,000 - Minor medical equipment and supplies, due to cost saving measures;
- -\$237,000 - Audit Settlement for the Multi-Integrated System of Care (MISC) program for FY 05-06;
- -\$210,000 - Maddy/Padilla/Nava Fund disbursements to physicians and hospitals;
- +\$151,000 - EHR hardware maintenance;
- +\$150,000 - Environmental Health Services septic system improvement projects;
- -\$150,000 - State HIV/AIDS grants reductions;
- -\$144,000 - Office supplies, memberships, travel, and other miscellaneous costs, due to cost saving measures;
- -\$110,000 - Building maintenance and improvements, furniture, and fixtures;
- +\$100,000 - E-prescribing system costs for EHR project;
- -\$84,000 - Information Technology services costs;
- -\$80,000 - Consulting fees for the Low Income Health Project (LIHP) as part of the State's Section 1115 Medicaid Waiver;
- -\$77,000 - County wide cost allocation charges;
- -\$75,000 - Professional services, supplies, and equipment associated with the American Recovery and Reinvestment Act (ARRA) grant received for Increased Demand for Services (IDS); and
- -\$48,000 - Liability and Malpractice insurance.

PUBLIC HEALTH

Department Summary (cont'd)

Revenues

The Recommended Budget's operating revenues will decrease by \$2,100,000, to \$71,984,000 from the Estimated Actual of \$74,084,000. This 2.8% decrease is the result of:

- -\$1,741,000 - Patient Service revenues from Medi-Cal and Medicare, mostly due to temporary productivity losses as staff adjust to a new EHR;
- +\$637,000 - Medicaid Meaningful Use incentive dollars for the adoption of an EHR;
- -\$582,000 - Public Health Emergency Response (PHER) funds for the H1N1 vaccination surge and other preparedness programs;
- -\$291,000 - American Recovery and Reinvestment Act (ARRA) funds for Capital Improvement Projects (CIP) and Increased Demand for Services (IDS);
- -\$218,000 - Cancer Detection Program;
- -\$213,000 - Maddy/Padilla/Nava Fund revenues for physicians, surgeons, and hospitals;
- +\$172,000 - California Children's Services program State allocations;
- +\$150,000 - Environmental Health Services Tire Waste grant;
- -\$150,000 - State HIV/AIDS grants reductions;
- +\$144,000 - American Medical Response (AMR) contract revenue for Information Technology position;
- +\$120,000 - Health Resources Services Administration (HRSA) Expanded Medical Capacity (EMC) funding for increased medical services under our 330(e) Community Health Center status;
- -\$81,000 - Interest income;
- -\$80,000 - Blue Shield Foundation grant to study the feasibility of a Low Impact Health Program (LIHP) provided for by the State's 1115 Medicaid waiver;
- +\$51,000 - Master Tobacco Settlement allocations;
- -\$37,000 - Immunization Programs State grants reductions; and
- +\$19,000 - Animal Service program revenues.

Capital

The Recommended Budget's operating expenditures will decrease by \$845,000, to \$646,000, from the prior year's Estimated Actual of \$1,491,000. This 56.7% decrease is the result of capital purchases for hardware, software, and exam room upgrades for the department's implementation of the GE Centricity Electronic Health Record that span both the FY 2010-11 and FY 2011-12 fiscal years.

PUBLIC HEALTH

Department Summary (cont'd)

Fiscal year 2011-2012 funding constraints require the department to implement certain service level reductions.

The department has incorporated service level impacts of \$2,906,823 and -9.8 FTEs to meet its general fund target and to address funding reductions and expenditure increases, primarily due to negotiated salary and benefit rate increases. Some of these impacts result from increasing efficiencies of existing staffing and streamlining business processes by utilizing technology. If there is no funding restoration to the Human Services program, grant funding to community-based organizations will be eliminated.

Departmental Priorities and Their Alignment With County Goals

The Public Health Department vision is "Healthier communities through leadership, partnership, and science." The Department's strategic actions are primarily aligned with the following adopted County Strategic Goals:

Goal 1: Efficient and Responsive Government: An Efficient, Professionally Managed Government Able to Anticipate and to Effectively Respond to the Needs of the Community;

Goal 2: Health and Safety: A Safe and Healthy Community in Which to Live, Work and Visit;

Goal 4: Quality of Life: A High Quality of Life for All Residents;

Goal 6: Families and Children: A Community that Fosters the Safety and Well-Being of Families and Children.

Among the eight Strategic Plan Critical Issue Areas, Issue 7: Health Care and Social Service Delivery continues to be the Public Health Department priority for Fiscal Year 2011-12.

The following focus areas have been identified for 2011-12:

Focus Area 1: Ensure Access to Health Care:

Proposed Strategic Actions:

- Ensure access to primary health care
- Ensure quality of the emergency medical services system
- Administer funding to address County health and human service needs

Proposed Key Projects:

- Implement recommendations from the Health Management Associates (HMA) report regarding improving communication among safety net providers.
- Complete analysis to determine the level of participation in the Low Income Health Program (LIHP).
- Continue implementation of an Electronic Patient Care Report (ePCR) for pre-hospital care providers.

Focus Area 2: Focus on Core Public Health Functions:

Proposed Strategic Actions:

- Prevent or reduce chronic and communicable diseases
- Promote early identification and prevention of disease in the provision of care
- Prevent or reduce environmentally induced illness
- Prepare for and respond to disasters

Proposed Key Projects:

- Implement the provider portal for the CalREDIE surveillance and reporting system (phase two) to enable physicians and other health care providers to report communicable diseases via the Internet allowing outbreaks to be monitored real-time.
- Implement a waste tire monitoring program to ensure waste tires are disposed of in a safe and appropriate manner.
- Develop and implement a *Promotores* program to provide health education and resources for Latinos at high risk for health problems.
- Receive and place state disaster medical supplies caches in strategic locations across the County.

Focus Area 3: Optimize Public Health Infrastructure:

Proposed Strategic Actions:

- Build and support a competent, efficient and responsive PHD infrastructure

Proposed Key Projects:

- Renovate and improve disability access at Lompoc Animal Shelter.
- Significantly upgrade the Health Care Centers' practice management system and develop an internal training team to enhance use of the system.

Focus Area 4: Enhance Quality of Services:

Proposed Strategic Actions:

- Provide effective tools to promote patient safety and improve quality of care
- Promote high quality customer service

Proposed Key Projects:

- Implement the Electronic Health Record (EHR) project at all Health Care Centers.
- Replace the Pharmacy system and implement e-prescribing.
- Expand services after hours for emergency death certificates to better serve our community.
- Fully implement the Diabetes Initiative practice improvement project.
- Improve electronic payment options for PHD services.

Focus Area 5: Responsible Fiscal Stewardship:

Proposed Strategic Actions:

- Reduce Public Health Department structural deficit

Proposed Key Projects:

- Improve cash collections at the point of service in the Health Care Centers.
- Maximize the funding available through the HITECH Act and meaningful use of a certified Electronic Health Record.

Current Year (FY 10-11) Accomplishments:

- Responded to a pertussis epidemic in order to limit the spread of whooping cough in Santa Barbara County.
- Completed contract negotiations for the Electronic Health Record (EHR) project and developed the organization, infrastructure, and personnel plan to move project forward.
- Implemented the CalREDIE system, a statewide communicable disease tracking system.
- Prepared analysis of efficacy of Public Health Department primary care service fees and system of sliding scale discounts.
- Implemented Project PetSafe to increase animal licensing and reduce animal shelter population.
- Upgraded the Clinical Lab system.
- Awarded Community Health Center status (Federal CHC 330e) status by Health Resources Services Administration (HRSA) which includes establishment of community advisory board to increase community participation in Health Care Center policies and projects.
- Installed networked monitoring of refrigerators to safeguard vaccine.
- Researched improvements to the Medically Indigent Adult (MIA) program and possible participation in the Low Income Health Program (LIHP).
- Developed the Tobacco Retail Licensure ordinance which restricts the licensing of new tobacco retailers within 1000 feet of schools.
- Implemented the Comprehensive Cardiac Program (STEMI) with all Advanced Life Support (ALS) providers and hospitals in the County.
- Successfully leveraged Tobacco Settlement funds to increase inpatient care for uninsured County residents in a difficult economic environment.
- Established new processes for coordination of care between Alcohol, Drug, and Mental Health Services for patients with mental and physical health conditions.

PUBLIC HEALTH

Department Summary (cont'd)

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Department-wide Effectiveness Measures				
As an efficient and responsive government, the County will maintain a quality workforce through completing 100% of departmental Employee Performance Reviews (EPRs) by the anniversary due date.	92% 610 660	100% 525 525	91% 480 525	100% 525 525
Maintain the percent of claims denied by Medi-Cal and Family Pact to less than or equal to 5%.	8% 13,250 165,432	6% 9,000 150,000	5% 8,250 167,000	5% 8,250 167,000
Increase cash collections at the point of care in the Health Care Centers by 5% annually.	-- --	-- --	0% 0 614,000	5% 31,000 645,000
Increase the number of unique homeless clients served by the Health care for the Homeless Program.	5,400	5,700	5,500	5,700



PUBLIC HEALTH
Administration and Support

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Use of Funds Summary				
<i>Operating Expenditures</i>				
Administration	\$ 1,929,171	\$ 1,780,413	\$ 1,658,164	\$ 1,717,903
Information Tech	2,166,964	2,259,800	2,209,819	2,484,181
Human Resources	377,458	499,348	415,387	494,801
Fiscal Services	2,388,667	2,690,953	2,593,892	2,884,236
Facilities	546,525	557,866	524,759	569,817
Operating Sub-Total	7,408,785	7,788,380	7,402,021	8,150,938
Less: Intra-County Revenues	(367,310)	(449,968)	(360,417)	(392,734)
Operating Total	7,041,475	7,338,412	7,041,604	7,758,204
<i>Non-Operating Expenditures</i>				
Capital Assets	8,212	27,000	27,000	12,500
Expenditure Total	7,049,687	7,365,412	7,068,604	7,770,704
<i>Other Financing Uses</i>				
Operating Transfers	9,088	9,097	9,097	--
Designated for Future Uses	209,920	225,083	225,082	--
Division Total	\$ 7,268,695	\$ 7,599,592	\$ 7,302,783	\$ 7,770,704

Character of Expenditures

<i>Operating Expenditures</i>				
Regular Salaries	4,012,520	4,474,930	4,216,486	4,653,163
Overtime	16,398	8,700	7,150	5,650
Extra Help	37,085	--	30,000	--
Benefits	1,951,612	2,070,719	1,927,430	2,393,234
Salaries & Benefits Sub-Total	6,017,615	6,554,349	6,181,066	7,052,047
Services & Supplies	1,391,170	1,234,031	1,220,955	1,098,891
Operating Sub-Total	7,408,785	7,788,380	7,402,021	8,150,938
Less: Intra-County Revenues	(367,310)	(449,968)	(360,417)	(392,734)
Operating Total	7,041,475	7,338,412	7,041,604	7,758,204
<i>Non-Operating Expenditures</i>				
Capital Assets	8,212	27,000	27,000	12,500
Expenditure Total	\$ 7,049,687	\$ 7,365,412	\$ 7,068,604	\$ 7,770,704

Source of Funds Summary

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
<i>Departmental Revenues</i>				
State Realignment Allocation	\$ 3,443,714	\$ 3,790,228	\$ 3,755,854	\$ 3,733,589
Health Care Medical Services	782,859	941,704	949,735	985,606
Federal & State Revenues	114,057	97,000	83,000	94,600
Other Charges for Services	37,957	41,381	41,996	41,472
Miscellaneous Revenue	559,270	488,458	341,827	272,251
Revenue Sub-Total	4,937,857	5,358,771	5,172,412	5,127,518
Less: Intra-County Revenues	(367,310)	(449,968)	(360,417)	(392,734)
Revenue Total	4,570,547	4,908,803	4,811,995	4,734,784
<i>General Fund Contribution</i>				
	2,036,664	2,690,789	2,490,788	2,764,195
<i>Other Financing Sources</i>				
Operating Transfers	--	--	--	85,367
Use of Prior Fund Balances	661,484	--	--	186,358
Division Total	\$ 7,268,695	\$ 7,599,592	\$ 7,302,783	\$ 7,770,704

	Actual FY 09-10		Adopted FY 10-11		Est. Actual FY 10-11		Recommended FY 11-12	
	Pos.	FTE	Pos.	FTE	Pos.	FTE	Pos.	FTE
Position Summary								
<i>Permanent</i>								
Administration	7.8	7.4	7.5	8.0	7.5	7.1	6.0	7.5
Information Tech	16.5	15.0	16.0	15.4	16.0	15.3	16.0	16.1
Human Resources	4.0	3.4	4.0	4.0	4.0	3.2	4.0	4.0
Fiscal Services	31.0	27.2	31.0	27.3	31.0	25.3	31.0	27.1
Facilities	5.0	5.6	5.0	5.0	5.0	5.0	5.0	5.0
Total Permanent	64.3	58.6	63.5	59.7	63.5	55.8	62.0	59.6
<i>Non-Permanent</i>								
Extra Help	--	1.0	--	--	--	0.9	--	--
Total Positions	64.3	59.6	63.5	59.7	63.5	56.7	62.0	59.6

SERVICE DESCRIPTION

Provide an executive focus on community partnerships, leadership, and medical science that is responsive to both internal and external demands for financial planning and accounting, information technology development, human resource guidance, and facility management.

Significant Changes (FY 2010-11 Adopted to FY 2010-11 Estimated Actual)

Estimated Actual operating expenditures decreased by \$386,000, to \$7,402,000, from the Adopted Budget of \$7,788,000. This 4.9% decrease is the result of:

- -\$403,000 - Salaries and benefits due to staff vacancies and retirements;
- +\$50,000 - Computer hardware and software replacement costs;
- +\$30,000 - Extra help due to vacancies;
- -\$30,000 - Reprographics costs;
- -\$18,000 - Utilities; and
- -\$15,000 - Travel, motor pool, and other miscellaneous expenses.

Significant Changes (FY 2010-11 Estimated Actual to FY 2011-12 Recommended)

The Recommended Budget's operating expenditures will increase by \$749,000, to \$8,151,000, from the prior year's Estimated Actual of \$7,402,000. This 10.1% increase is the result of:

- +\$466,000 - Retirement, health insurance, and other benefit rate increases;
- +\$435,000 - Wage increases and step adjustments;
- -\$100,000 - Computer hardware and software replacements;
- -\$30,000 - Extra help, overtime, and temporary employee costs; and
- -\$22,000 - County wide cost allocation charges.

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
Administration				
Respond to 99% of customer requests to the Contracts Unit within 1 working day.	--	99%	99%	99%
	--	380	222	294
	--	384	224	297
As an efficient and responsive government, the Department will reduce or maintain the rate of General Liability claims filed from the previous year's actual claims filed.	100%	100%	75%	100%
	4	4	3	3
	4	4	4	3

PUBLIC HEALTH

Administration and Support (cont'd)

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
As an efficient and responsive government, the Department will reduce or maintain the rate of Medical Malpractice Liability claims filed from the previous year's actual claims filed.	100%	100%	100%	--
	1	1	1	0
	1	1	1	0
As an efficient and responsive government, the Department will reduce or maintain the rate of Workers' Compensation claims filed from the previous year's actual claims filed.	140%	100%	102%	98%
	59	42	60	58
	42	42	59	59
As an efficient and responsive government, the County will maintain a productive workforce through a Departmental lost time rate of 5.9% or less.	5.9%	5.9%	6.2%	5.9%
	61,638.0	72,331.0	31,566.0	64,267.0
	1,043,648.0	1,225,942.0	513,066.0	1,089,264.0
Information Tech				
Resolve at least 85% of computer technical support calls immediately.	91%	85%	89%	85%
	6,390	5,950	6,862	6,375
	7,039	7,000	7,688	7,500
Provide data reports by the requested deadline at least 90% of the time.	98%	90%	98%	90%
	128	135	128	144
	131	150	130	160
90% of the time, staff will be contacted within 4 hours of calling the Help Desk if their call is referred.	--	90%	88%	90%
	--	540	730	1,013
	--	600	826	1,125
Human Resources				
Ensure that 100% of HR requisitions are submitted within 2 business days upon receipt of approved new hire requests.	--	100%	95%	100%
	--	65	104	100
	--	65	109	100
Fiscal Services				
At least 98% of medical chart reviews will document accurate medical records coding and service documentation.	79%	95%	98%	98%
	158	190	196	196
	200	200	200	200

PUBLIC HEALTH
Administration and Support (cont'd)

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
Facilities				
Ensure that 95% of requests assigned to Public Health Department Facilities will be completed within the timeline goals.	85%	85%	85%	95%
	175	186	136	162
	207	220	160	170

	Actual FY 09-10 Pos.	Adopted FY 10-11 Pos.	Est. Actual FY 10-11 Pos.	Recommended FY 11-12 Pos.
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Position Detail

Administration

Public Health Dir/Health Officer	1.0	1.0	1.0	1.0
Deputy Director	1.0	1.0	1.0	1.0
Chief Financial Officer	1.0	1.0	1.0	1.0
Team Leader	1.0	1.0	1.0	1.0
Dept Business Specialist	1.0	--	--	--
Admin Office Pro	2.8	3.5	3.5	2.0
Sub-Division Total	7.8	7.5	7.5	6.0

Information Tech

IT Manager	1.0	1.0	1.0	1.0
EDP Office Auto Spec	2.0	2.0	2.0	2.0
EDP Sys & Prog Anlst	3.0	3.0	3.0	3.0
EDP Sys & Prog Anlst Sr	1.0	1.0	1.0	1.0
Computer Systems Specialist Supv	1.0	1.0	1.0	1.0
Admin Office Pro	3.5	3.0	3.0	3.0
Computer Systems Specialist	5.0	5.0	5.0	5.0
Sub-Division Total	16.5	16.0	16.0	16.0

Human Resources

HR Manager	1.0	1.0	1.0	1.0
Dept Business Specialist	1.0	1.0	1.0	1.0
Admin Office Pro	2.0	2.0	2.0	2.0
Sub-Division Total	4.0	4.0	4.0	4.0

Actual FY 09-10 Pos.	Adopted FY 10-11 Pos.	Est. Actual FY 10-11 Pos.	Recommended FY 11-12 Pos.
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Position Detail

Fiscal Services

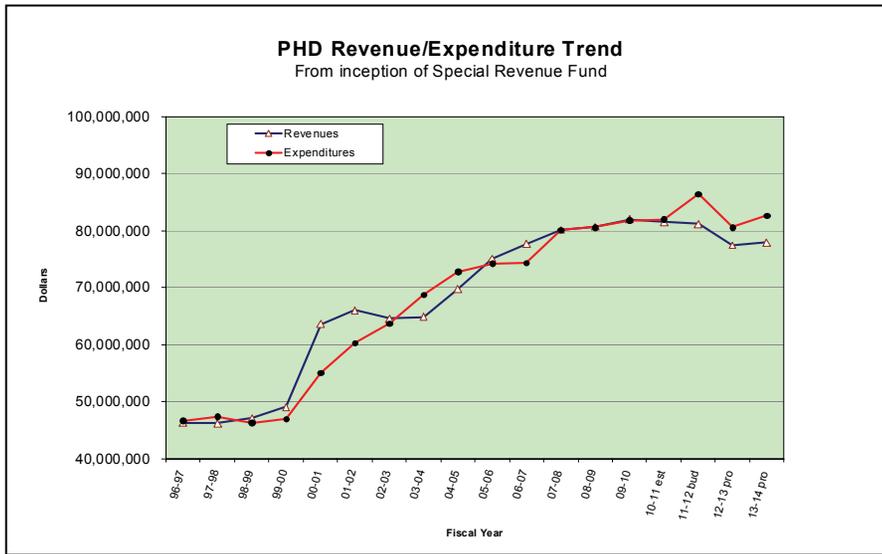
Cost Analyst	3.0	3.0	3.0	4.0
Dept Business Specialist	2.0	2.0	2.0	3.0
Admin Office Pro	2.0	2.0	2.0	--
Financial Office Pro	20.0	20.0	20.0	19.0
Accountant	4.0	4.0	4.0	5.0
Sub-Division Total	31.0	31.0	31.0	31.0

Facilities

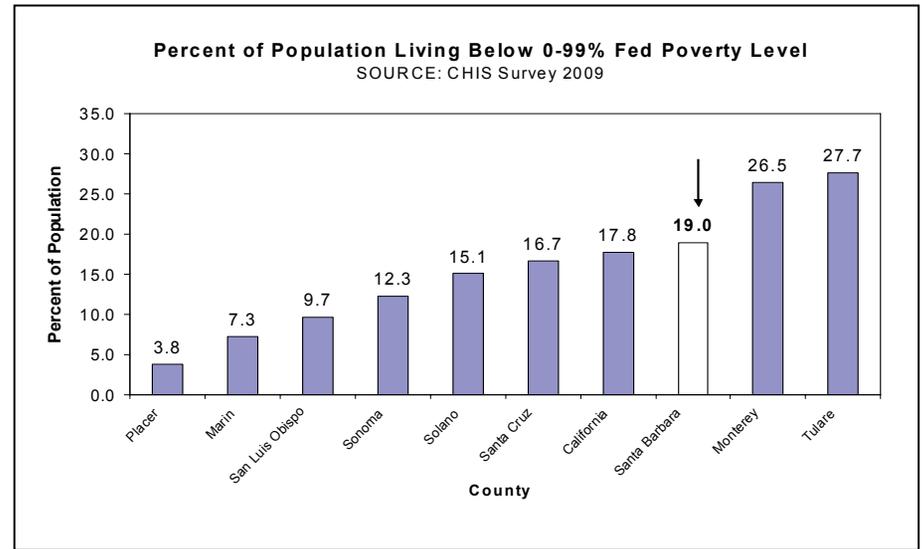
Admin Office Pro	1.0	1.0	1.0	1.0
Building Maintenance Worker	1.0	1.0	1.0	1.0
Store keeper	1.0	1.0	1.0	1.0
Utility Clerk	2.0	2.0	2.0	2.0
Sub-Division Total	5.0	5.0	5.0	5.0
Division Total	64.3	63.5	63.5	62.0



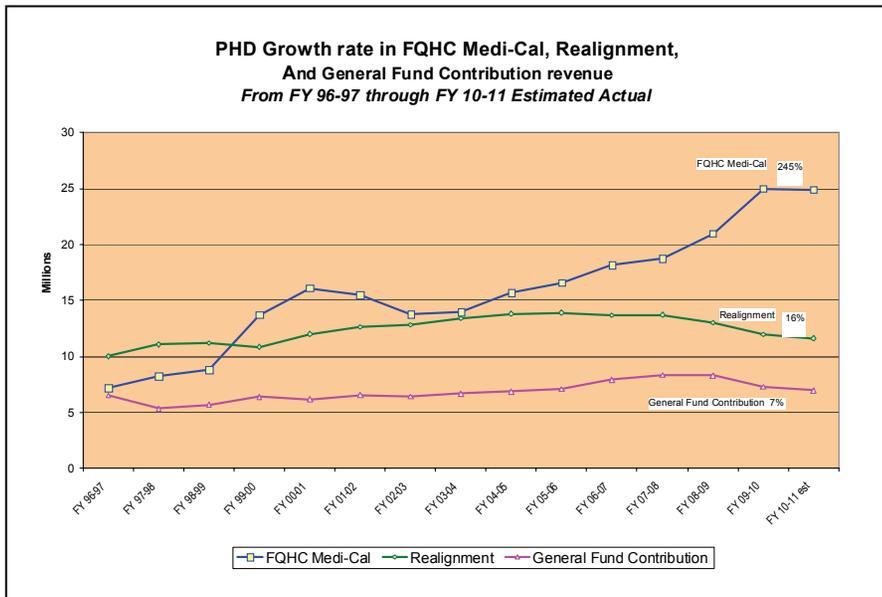
PUBLIC HEALTH
Administration and Support (cont'd)



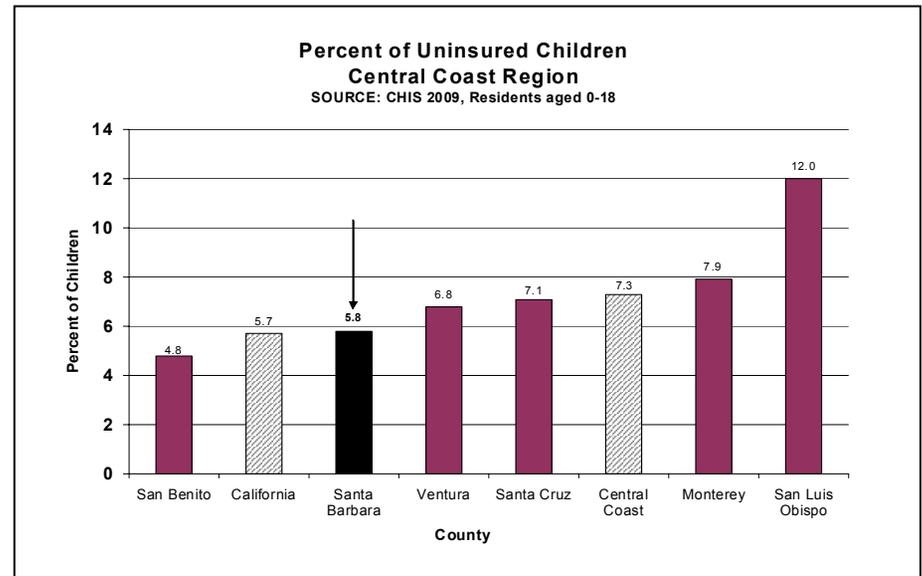
Increasing health care costs and declining revenues are projected to lead to a structural deficit, although one-time revenues will be used to sustain services in FY 2011-12



Demand for services continues to grow. 19% of Santa Barbara County residents lives in poverty (less than \$22,350 for a family of four).



The PHD has successfully increased Medi-Cal revenues to make up for falling State Realignment revenue and decreased General Fund Contribution to cover increasing health care costs.



In 2009, 5.8% of children in Santa Barbara County were uninsured, down from 6.8% in 2007

PUBLIC HEALTH
Family Health and Primary Care

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Use of Funds Summary				
<i>Operating Expenditures</i>				
FH/PC Administration	\$ 4,805,998	\$ 4,221,431	\$ 4,004,856	\$ 3,996,332
Childrens Medical Services	5,609,207	5,168,940	5,202,928	5,787,646
MIA/Indigent Care	7,107,363	8,534,278	6,943,426	6,780,524
CHIP	1,998	914	914	--
Healthcare for the Homeless	1,861,992	1,882,626	1,978,029	2,014,819
Clinical Labs	2,099,464	2,070,630	2,179,901	2,126,029
Radiology	332,800	311,922	308,934	290,894
Pharmacy	4,292,461	4,935,918	4,240,337	4,339,250
Inmate Health	20,716	35,141	20,800	20,842
Medical Records	1,406,371	1,532,875	2,289,584	3,061,015
Lompoc Clinics	6,268,044	6,509,374	6,227,335	6,852,545
Santa Maria Clinics	4,015,956	4,057,255	4,371,419	4,418,954
Carpinteria/Franklin Clinics	4,449,310	4,513,614	4,426,891	4,323,706
Calle Real Clinics	6,355,716	6,314,428	6,117,509	6,671,816
Santa Maria Women's Health Center	3,505,546	3,599,373	3,714,842	3,761,799
Operating Sub-Total	52,132,942	53,688,719	52,027,705	54,446,171
Less: Intra-County Revenues	(128,266)	(112,247)	(94,201)	(92,700)
Operating Total	52,004,676	53,576,472	51,933,504	54,353,471
<i>Non-Operating Expenditures</i>				
Capital Assets	192,716	124,700	1,351,602	633,743
Expenditure Total	52,197,392	53,701,172	53,285,106	54,987,214
<i>Other Financing Uses</i>				
Operating Transfers	32,376	32,218	33,276	--
Designated for Future Uses	3,187,315	2,535,098	2,606,472	852,405
Division Total	\$ 55,417,083	\$ 56,268,488	\$ 55,924,854	\$ 55,839,619

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Character of Expenditures				
<i>Operating Expenditures</i>				
Regular Salaries	21,358,409	22,189,550	21,845,562	23,587,945
Overtime	160,936	160,424	239,387	341,197
Extra Help	655,740	129,003	749,028	7,574
Benefits	9,507,058	10,320,585	10,041,084	12,252,259
Salaries & Benefits Sub-Total	31,682,143	32,799,562	32,875,061	36,188,975
Services & Supplies	20,450,799	20,889,157	19,152,644	18,257,196
Operating Sub-Total	52,132,942	53,688,719	52,027,705	54,446,171
Less: Intra-County Revenues	(128,266)	(112,247)	(94,201)	(92,700)
Operating Total	52,004,676	53,576,472	51,933,504	54,353,471
<i>Non-Operating Expenditures</i>				
Capital Assets	192,716	124,700	1,351,602	633,743
Expenditure Total	\$ 52,197,392	\$ 53,701,172	\$ 53,285,106	\$ 54,987,214
Source of Funds Summary				
<i>Departmental Revenues</i>				
State Realignment Allocation	\$ 8,522,190	\$ 7,143,527	\$ 7,849,448	\$ 7,875,556
Health Care Medical Services	33,438,276	33,749,823	33,560,744	32,582,847
Federal & State Revenues	6,849,208	6,988,795	6,625,317	6,470,008
Other Charges for Services	250	--	500	--
Miscellaneous Revenue	1,037,957	958,213	1,041,216	772,703
Revenue Sub-Total	49,847,881	48,840,358	49,077,225	47,701,114
Less: Intra-County Revenues	(128,266)	(112,247)	(94,201)	(92,700)
Revenue Total	49,719,615	48,728,111	48,983,024	47,608,414
General Fund Contribution	1,343,072	1,169,923	960,155	1,514,702
<i>Other Financing Sources</i>				
Operating Transfers	2,065,436	2,002,249	1,915,574	1,739,188
Use of Prior Fund Balances	2,288,960	4,368,205	4,066,101	4,977,315
Division Total	\$ 55,417,083	\$ 56,268,488	\$ 55,924,854	\$ 55,839,619

SERVICE DESCRIPTION

Provide early healthcare intervention and medical services at six Federally Qualified Health Care Centers and four satellites. Ensure access to primary medical care, and assessment for infants, children, teens, and adults.

	Actual FY 09-10		Adopted FY 10-11		Est. Actual FY 10-11		Recommended FY 11-12	
	Pos.	FTE	Pos.	FTE	Pos.	FTE	Pos.	FTE
Position Summary								
<i>Permanent</i>								
FH/PC Administration	5.0	4.7	5.0	5.1	5.0	4.8	5.0	5.0
Childrens Medical Services	49.6	43.4	48.9	40.8	48.9	43.1	48.4	43.2
MIA/Indigent Care	16.0	13.9	16.0	15.2	16.0	13.5	17.0	15.4
Healthcare for the Homeless	8.5	6.9	6.5	6.8	6.5	8.0	7.0	7.8
Clinical Labs	14.5	13.6	14.5	14.0	14.5	14.0	14.5	14.0
Radiology	3.0	3.5	3.0	3.2	3.0	3.0	3.0	3.0
Pharmacy	12.0	12.0	12.0	12.0	12.0	12.0	12.0	12.0
Inmate Health	--	0.1	--	0.3	--	0.2	--	0.2
Medical Records	18.5	17.7	18.5	17.9	18.5	17.2	21.5	20.0
Lompoc Clinics	48.1	47.7	49.2	46.1	49.2	47.6	49.2	45.2
Santa Maria Clinics	34.8	32.5	33.8	30.4	33.8	34.5	34.8	31.4
Carpinteria/Franklin Clinics	34.7	35.9	35.7	36.3	35.7	33.8	34.5	32.7
Calle Real Clinics	36.6	35.8	37.5	34.1	37.5	35.3	38.2	35.2
Santa Maria Women's Health Center	20.3	23.0	25.3	23.2	25.3	22.5	22.8	21.9
Total Permanent	301.5	290.7	305.8	285.3	305.8	289.4	307.8	286.9
<i>Non-Permanent</i>								
Contract	--	1.8	--	2.3	--	1.0	--	1.7
Extra Help	--	11.7	--	2.1	--	14.7	--	0.3
Total Positions	301.5	304.2	305.8	289.8	305.8	305.1	307.8	288.8

Significant Changes (FY 2010-11 Adopted to FY 2010-11 Estimated Actual)

Estimated Actual operating expenditures decreased by \$1,661,000, to \$52,028,000, from the Adopted Budget of \$53,689,000. This 3.2% decrease is the result of:

- -\$1,300,000 - Inpatient and specialty referral costs for the Medically Indigent Adults (MIA) program, due to improved case management efforts at securing Medi-Cal eligibility status for clients;
- -\$701,000 - Cost and volume decreases in pharmaceutical costs;
- +\$620,000 - Extra help and overtime costs to cover vacancies in periods of increased clinic patient volume;
- -\$545,000 - Salaries and benefits due to vacancies and recruiting difficulties, particularly with licensed professional staff;

PUBLIC HEALTH

Family Health and Primary Care (cont'd)

- +\$251,000 - Computer purchases for the EHR project;
- -\$245,000 - Maddy/Padilla/Nava Fund revenues for physicians, surgeons, and hospitals;
- +\$84,000 - Clinical Laboratory software maintenance costs for the integration of the EHR project;
- +\$80,000 - Consulting fees for the Low Income Health Project (LIHP) as part of the State's Section 1115 Medicaid Waiver;
- +\$80,000 - Contract labor in support of the EHR project;
- +\$62,000 - Minor medical equipment and supplies costs, due to increases in patient volume; and
- -\$47,000 - Tobacco Settlement allocations.

Significant Changes (FY 2010-11 Estimated Actual to FY 2011-12 Recommended)

The Recommended Budget's operating expenditures will increase by \$2,418,000, to \$54,446,000, from the prior year's Estimated Actual of \$52,028,000. This 4.6% increase is the result of:

- +\$2,211,000 - Retirement, health insurance, and other benefit rate increases for licensed clinical professionals and other staff;
- +\$1,844,000 - Wage increases and step adjustments;
- -\$741,000 - Extra help, overtime, and temporary employee costs;
- -\$260,000 - Temporary physicians and registry nursing costs;
- -\$210,000 - Maddy/Padilla/Nava Fund disbursements to physicians, surgeons; and hospitals;
- -\$165,000 - Minor medical equipment and supplies, due to cost saving measures;
- +\$151,000 - EHR hardware maintenance;
- -\$127,000 - County wide cost allocation charges;
- +\$100,000 - E-prescribing system costs for EHR project;
- -\$80,000 - Consulting fees for the Low Income Health Project (LIHP) as part of the State's Section 1115 Medicaid Waiver;
- -\$75,000 - Professional services, supplies, and equipment associated with the American Recovery and Reinvestment Act (ARRA) grant received for Increased Demand for Services (IDS);
- -\$64,000 - Office supplies, memberships, travel, and other miscellaneous costs, due to cost saving measures;
- -\$49,000 - Computer hardware and software replacement costs;
- -\$45,000 - Utilization review and orthopedics referral costs;

PUBLIC HEALTH

Family Health and Primary Care (cont'd)

- -\$38,000 - Contract labor in support of the EHR project;
- -\$21,000 - Liability insurance; and
- -\$14,000 - Outside Laboratory referral costs, due to efficiencies afforded by the EHR project.

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
FH/PC Administration				
Provide medical care to 34,000 indigent patients each year.	34,000	32,000	32,000	34,000
Ensure that 99.1% of infants born at >37 weeks gestation weigh equal or greater than 2,500 grams (5.5 lbs.)	--	99% 1,424	99% 1,306	99% 1,437
	--	1,436	1,320	1,450
Childrens Medical Services				
At least 95% of people completing the California Children's Services (CCS) Family Survey will rate the overall experience of getting their child CCS services as good or very good.	95% 464 487	95% 475 500	95% 475 500	95% 494 520
Provide occupational or physical therapy evaluations to at least 80% of California Children's Services (CCS) eligible children within 30 days.	86% 86 100	80% 64 80	93% 50 54	80% 48 60
Site visits for triennial recertification of CHDP Program providers will be completed for 100% of approximately 10 provider sites in Santa Barbara County, per State requirements.	100% 9 9	100% 10 10	100% 15 15	100% 13 13
MIA/Indigent Care				
UR Case Management will screen all MIA referrals for potential eligibility for non-MIA, non-PHD funding sources and assist in successfully obtaining coverage for at least 120 patients per fiscal year.	--	40	120	120

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
All of an estimated 20 significant report trends and events with a severity level of F (temporary harm with hospitalization or increased length of stay in hospital) or above will be analyzed and referred to the appropriate group for corrective action.	--	100% 20	100% 15	100% 20
	--	20	15	20
Healthcare for the Homeless				
Per HRSA standard, increase to 40% the percentage of diabetic homeless patients whose HbA1c levels are less than 7%.	--	--	--	40% 118
	--	--	--	293
Per HRSA standard, increase the percentage of adult homeless patients, 18 years and older, with diagnosed hypertension whose blood pressure is less than 140/90 (adequate control) to 65% or greater.	--	--	--	65% 341
	--	--	--	526
Clinical Labs				
At least 99% of proficiency tests in the clinical laboratory will be accurate.	99% 1,266 1,275	99% 1,266 1,275	99% 1,266 1,275	99% 1,266 1,275
Ensure that 100% of Critical Values as defined in the Laboratory Policy Manual are reported to the requesting provider or designee within one hour of receipt in the Clinical Lab.	99% 742 753	100% 700 700	98% 551 560	100% 600 600
Ensure that 97% of urgent test requests are completed and reported within one hour of receipt in the Clinical Laboratory.	97% 524 542	97% 513 528	98% 560 572	97% 560 575
Radiology				
Achieve quality digital x-rays on the first take 100% of the time (national benchmark = 96%).	99% 13,709 13,864	100% 18,200 18,200	99% 14,972 15,108	100% 16,320 16,320

PUBLIC HEALTH

Family Health and Primary Care (cont'd)

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
Pharmacy				
Maintain pharmacy wait time at 20 minutes or less for at least 85% of 4,080 new prescriptions randomly selected each quarter for audit.	85%	85%	85%	85%
	3,821	4,080	4,080	4,080
	4,488	4,800	4,800	4,800
Medical Records				
Ensure that 90% of all Social Security Administration requests will be processed within 10 business days from receipt of request.	--	--	--	90%
	--	--	--	270
	--	--	--	300
Lompoc Clinics				
Ensure that the kept appointment rate for the primary care clinic is 85% of all appointments booked at the Lompoc Health Care Center.	--	--	89%	85%
	--	--	19,068	17,000
	--	--	21,436	20,000
Patients will have an OB registration appointment available to them within 3 days at the Lompoc Health Care Center.	--	--	--	3
60% of age appropriate women (40-69) will have a screening mammogram within a two year period, exceeding the national standard of 50% at the Lompoc Health Care Center.	--	60%	60%	60%
	--	1,210	1,200	1,200
	--	2,016	2,000	2,000
Santa Maria Clinics				
Ensure that the kept appointment rate for the primary care clinic is 85% of all appointments booked Santa Maria Health Care Center.	--	--	85%	85%
	--	--	10,945	10,625
	--	--	12,876	12,500

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
Carpinteria/Franklin Clinics				
Ensure that the kept appointment rate for the primary care clinic is 85% of all appointments booked at the Carpinteria Health Care Center.	--	--	85%	85%
	--	--	9,920	9,225
	--	--	11,670	10,853
Calle Real Clinics				
Ensure that the kept appointment rate for the primary care clinic is 85% of all appointments booked at the Calle Real Health Care Center.	--	--	85%	85%
	--	--	10,200	10,200
	--	--	12,000	12,000
Patients will have an OB registration appointment available to them within 3 days at the Calle Real Health Care Center.	3	5	3	3
Santa Maria Women's Health Center				
Patients will have an OB registration appointment available to them within 3 days at the Santa Maria Women's Health Center.	4	5	4	3
Ensure that the kept appointment rate for the primary care clinic is 85% of all appointments booked at the Santa Maria Women's Health Center.	--	--	85%	85%
	--	--	10,868	10,795
	--	--	12,786	12,700

PUBLIC HEALTH

Family Health and Primary Care (cont'd)

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
	Pos.	Pos.	Pos.	Pos.
Position Detail				
FH/PC Administration				
Medical Director	1.0	1.0	1.0	1.0
Asst Director	1.0	--	--	--
Deputy Director	--	1.0	1.0	1.0
Project Manager	1.0	1.0	1.0	1.0
Admin Office Pro	2.0	2.0	2.0	2.0
Sub-Division Total	5.0	5.0	5.0	5.0
Childrens Medical Services				
Staff Physician II	0.8	0.8	0.8	0.8
Program Manager	1.0	1.0	1.0	1.0
Therapy Coordinator	1.0	1.0	1.0	1.0
Public Health Nurse Supervisor	1.0	1.0	1.0	1.0
Supervising Therapist	4.0	4.0	4.0	4.0
Physical/Occupational Therapist	13.1	13.3	13.3	12.8
Admin Office Pro	10.0	9.0	9.0	10.0
Public Health Nurse	8.0	8.0	8.0	7.5
Medical Social Svcs Practitioner	0.8	0.8	0.8	0.8
Health Educator	0.5	0.5	0.5	0.5
CCS/Occ/Phys Ther Asst	1.0	1.0	1.0	1.0
Caseworker CCS	6.0	6.0	6.0	5.5
Therapy Attendant	2.5	2.5	2.5	2.5
Sub-Division Total	49.6	48.9	48.9	48.4
MIA/Indigent Care				
Program Administrator	1.0	1.0	1.0	1.0
Utilization Review Manager	1.0	1.0	1.0	1.0
Staff Nurse Senior	2.0	1.0	1.0	2.0
Admin Office Pro	1.0	1.0	1.0	1.0
Financial Office Pro	2.0	2.0	2.0	2.0
Senior Services Supervisor	--	1.0	1.0	1.0
Medical Social Svcs Supervisor	1.0	1.0	1.0	1.0
Medical Social Svcs Practitioner	1.0	1.0	1.0	1.0
Medical Social Svcs Worker	2.0	2.0	2.0	2.0
Medical Services Representative	5.0	5.0	5.0	5.0
Sub-Division Total	16.0	16.0	16.0	17.0

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
	Pos.	Pos.	Pos.	Pos.
Position Detail				
Healthcare for the Homeless				
Program Administrator	1.0	1.0	1.0	1.0
Health Care Practitioner	2.0	2.0	2.0	2.0
Staff Nurse Supervisor	--	--	--	0.5
Public Health Nurse	2.5	2.5	2.5	2.5
Medical Assistant	1.0	--	--	--
Health Services Aide	2.0	1.0	1.0	1.0
Sub-Division Total	8.5	6.5	6.5	7.0
Clinical Labs				
Health Services Lab Supervisor	1.0	1.0	1.0	1.0
Financial Office Pro	1.0	1.0	1.0	1.0
Clinical Lab Technician	5.5	5.5	5.5	5.5
Laboratory Assistant	7.0	7.0	7.0	7.0
Sub-Division Total	14.5	14.5	14.5	14.5
Radiology				
Radiological Technician Supv	1.0	1.0	1.0	1.0
Radiological Technician	2.0	2.0	2.0	2.0
Sub-Division Total	3.0	3.0	3.0	3.0
Pharmacy				
Pharmacist Supervisor	1.0	1.0	1.0	1.0
Pharmacist in Charge	3.0	3.0	3.0	3.0
Pharmacy Technician	8.0	8.0	8.0	8.0
Sub-Division Total	12.0	12.0	12.0	12.0
Medical Records				
EDP Office Auto Spec	--	--	--	2.0
Project Manager	--	--	--	1.0
Program Manager	--	--	--	1.0
EDP Sys & Prog Anlst	--	--	--	1.0
Dept Business Specialist	--	--	--	1.0
Admin Office Pro	17.5	17.5	17.5	15.5
Medical Records Admin	1.0	1.0	1.0	--
Sub-Division Total	18.5	18.5	18.5	21.5

PUBLIC HEALTH

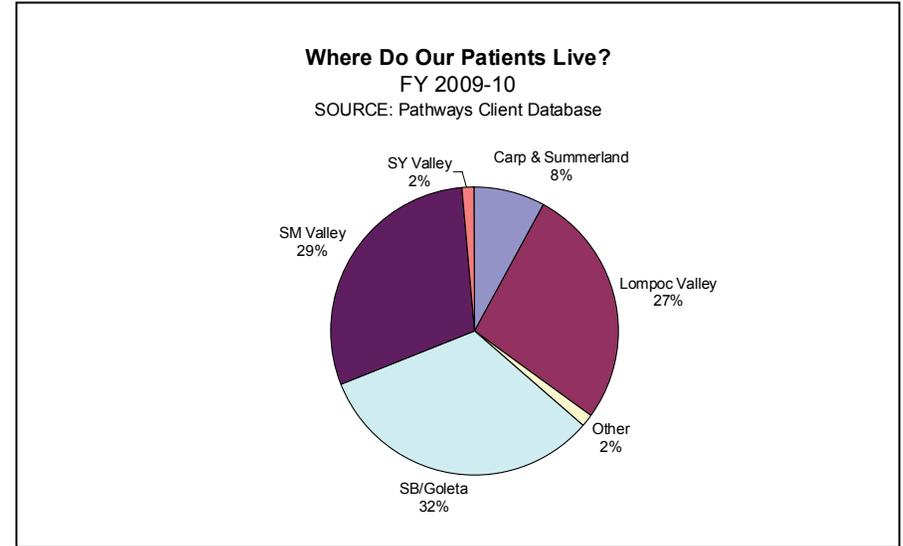
Family Health and Primary Care (cont'd)

Position Detail	Actual	Adopted	Est. Actual	Recommended
	FY 09-10	FY 10-11	FY 10-11	FY 11-12
	Pos.	Pos.	Pos.	Pos.
Lompoc Clinics				
Staff Physician I	1.0	--	--	1.0
Staff Physician II	4.5	5.6	5.6	3.6
Health Center Administrator	1.0	1.0	1.0	1.0
Health Care Practitioner	2.0	2.0	2.0	2.0
Staff Nurse Supervisor	2.0	2.0	2.0	2.0
Admin Office Pro	12.0	11.0	11.0	11.0
Financial Office Pro	5.0	7.0	7.0	7.0
Staff Nurse	6.6	6.6	6.6	6.6
Medical Records Admin	--	--	--	1.0
Medical Assistant	13.0	13.0	13.0	13.0
Health Services Aide	1.0	1.0	1.0	1.0
Sub-Division Total	48.1	49.2	49.2	49.2
Santa Maria Clinics				
Staff Physician Supervising	1.0	1.0	1.0	1.0
Staff Physician II	3.0	3.0	3.0	3.0
Health Center Administrator	1.0	1.0	1.0	1.0
Health Care Practitioner	1.0	1.0	1.0	1.0
Performance Improve Coordinator	1.0	1.0	1.0	1.0
Staff Nurse Supervisor	1.0	1.0	1.0	1.0
Admin Office Pro	9.0	9.0	9.0	9.0
Financial Office Pro	4.0	4.0	4.0	4.0
Staff Nurse	4.5	3.5	3.5	4.5
Medical Assistant	9.3	9.3	9.3	9.3
Sub-Division Total	34.8	33.8	33.8	34.8
Carpinteria/Franklin Clinics				
Staff Physician I	1.0	--	--	1.0
Staff Physician II	2.5	3.5	3.5	2.3
Health Center Administrator	1.0	1.0	1.0	1.0
Health Care Practitioner	1.2	1.2	1.2	1.2
Staff Nurse Supervisor	2.0	2.0	2.0	1.0
Admin Office Pro	8.0	8.0	8.0	8.0
Financial Office Pro	6.0	6.0	6.0	6.0
Staff Nurse	3.0	3.0	3.0	3.0
Licensed Vocational Nurse	1.0	1.0	1.0	1.0
Medical Assistant	9.0	10.0	10.0	10.0
Sub-Division Total	34.7	35.7	35.7	34.5

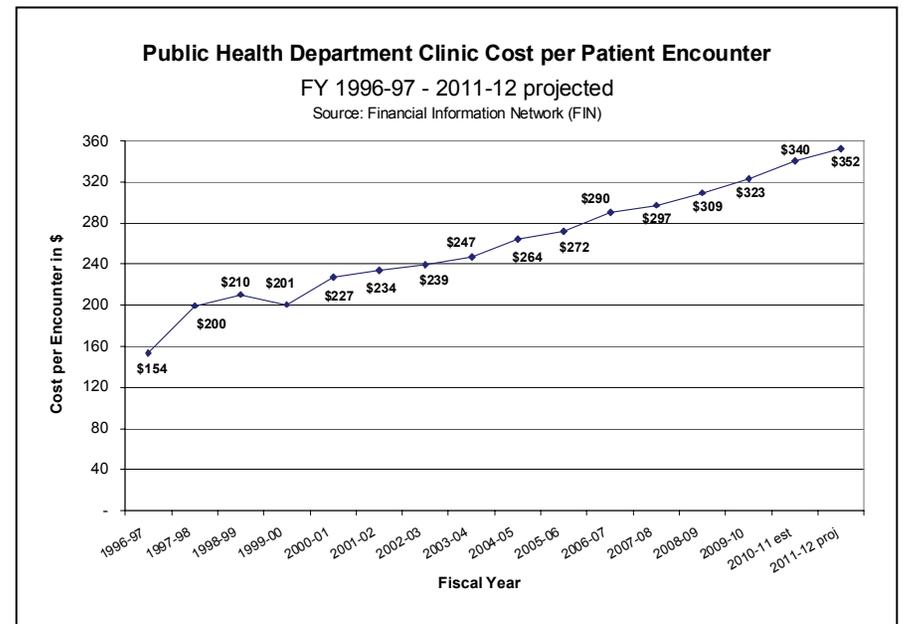
Top 10 Causes of Death 2008 Santa Barbara County			
Rank	Cause for 2008	Frequency	Percent of County Deaths
1	Heart Disease	735	25.2%
2	Stroke/Cerebrovascular Disease	202	6.9%
3	Lung Cancer	153	5.2%
4	Chronic Lower Respiratory Disease	149	5.1%
5	Alzheimer's Disease	146	5.0%
6	Mental/Behavioral Disorders	105	3.6%
7	Diseases of the Digestive System	86	2.9%
8	Diabetes Mellitus (Type 2)	58	2.0%
9	Influenza & Pneumonia	55	1.9%
10	Liver Disease/Cirrhosis/Hepatitis	54	1.9%
Subtotal of Top Ten Ranks		1,743	59.8%
Other Causes		1,174	40.2%
Total Deaths to County Residents		2,917	100.0%

PUBLIC HEALTH
Family Health and Primary Care (cont'd)

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
	Pos.	Pos.	Pos.	Pos.
Position Detail				
Calle Real Clinics				
Staff Physician Supervising	1.8	1.9	1.9	1.9
Staff Physician II	1.5	2.3	2.3	3.5
Health Center Administrator	1.0	1.0	1.0	1.0
Health Care Practitioner	1.0	2.0	2.0	2.0
Staff Nurse Supervisor	2.0	2.0	2.0	2.0
Admin Office Pro	5.0	4.0	4.0	4.0
Financial Office Pro	7.0	7.0	7.0	7.0
Staff Nurse	6.8	4.8	4.8	5.3
Health Education Associate	0.5	0.5	0.5	0.5
Licensed Vocational Nurse	1.0	1.0	1.0	1.0
Medical As sistant	9.0	10.0	10.0	10.0
Health Services Aide	--	1.0	1.0	--
Sub-Division Total	36.6	37.5	37.5	38.2
Santa Maria Women's Health Center				
Staff Physician II	--	3.0	3.0	3.0
Health Care Practitioner	1.8	1.8	1.8	1.8
Staff Nurse Supervisor	1.0	2.0	2.0	1.0
Admin Office Pro	1.0	1.0	1.0	1.0
Financial Office Pro	3.0	3.0	3.0	3.0
Staff Nurse	2.5	3.5	3.5	2.0
Health Education Associate	1.0	1.0	1.0	1.0
Medical As sistant	10.0	10.0	10.0	10.0
Sub-Division Total	20.3	25.3	25.3	22.8
Division Total	301.5	305.8	305.8	307.8

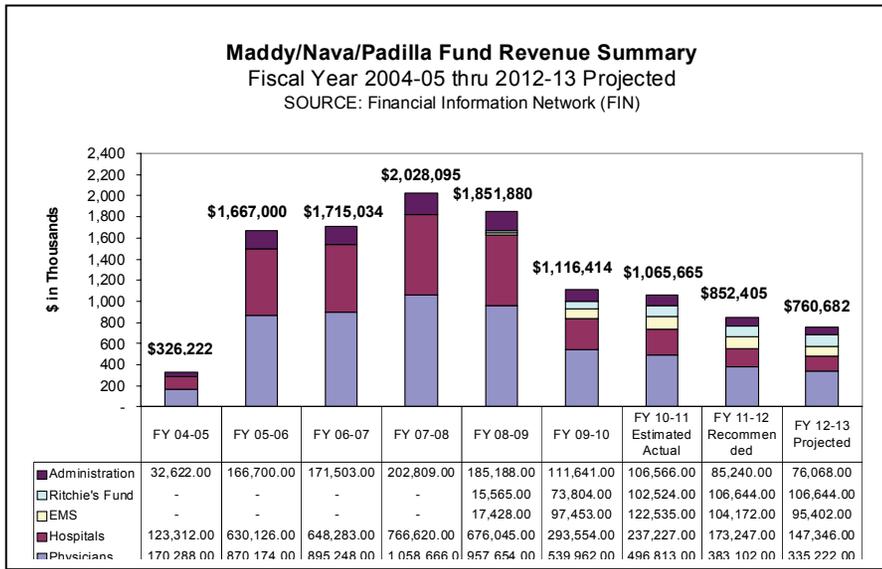


58% of patients served by the Public Health Department live in the North County.

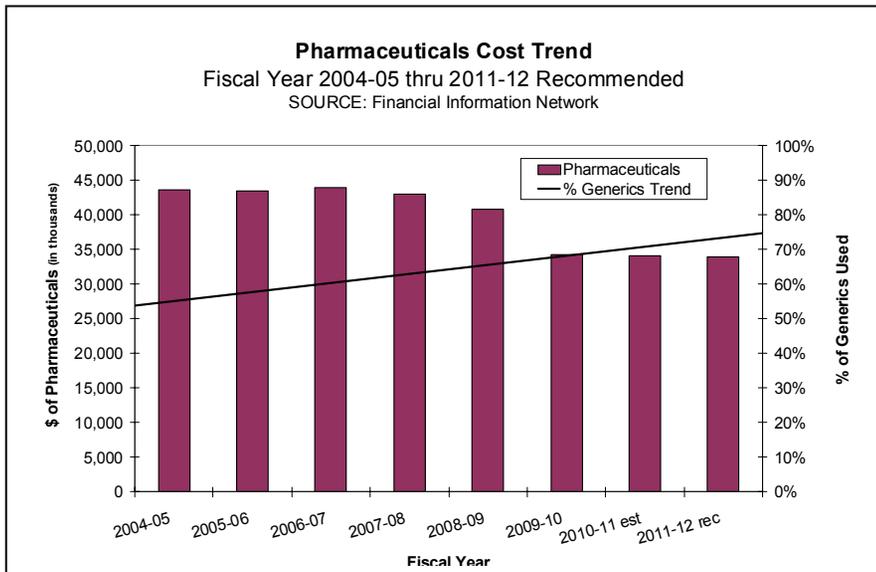


The rising PHD cost per patient encounter mirrors national healthcare trends. The implementation of an electronic health record has the potential to decrease future costs and increase quality of care.

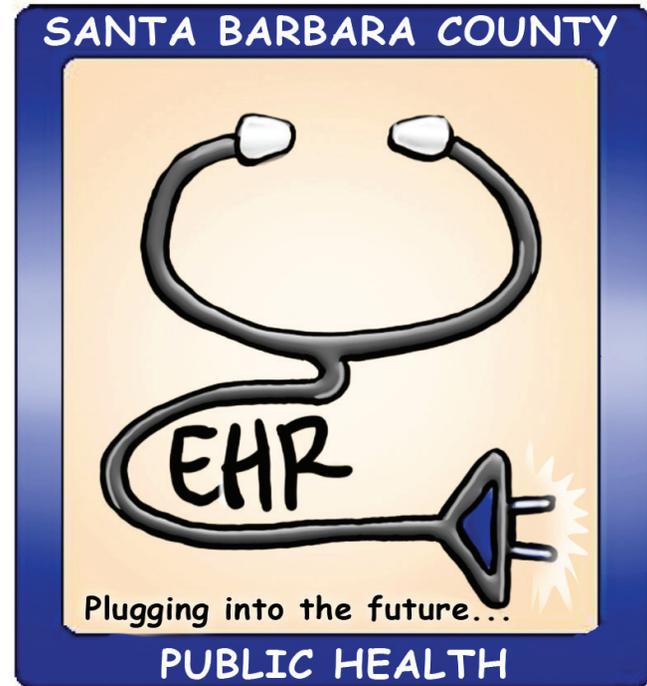
PUBLIC HEALTH
Family Health and Primary Care (cont'd)



Maddy funding for emergency medical and trauma care for the uninsured in Santa Barbara County has steadily decreased since 2008.



Department initiatives to increase the use of generic drugs have successfully decreased pharmaceutical costs.



The winning design for the Public Health Department's Electronic Health Records (EHR) logo came from a staff physician. The department's EHR will be operational in FY 2011-12.

PUBLIC HEALTH
Community Health

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Use of Funds Summary				
<i>Operating Expenditures</i>				
CH Administration	\$ 1,558,851	\$ 1,359,967	\$ 1,445,808	\$ 1,421,511
Health Promotion	419,124	412,521	325,164	256,421
Nutrition Services	3,209,994	3,367,059	3,612,802	3,805,183
Disease Control and Prevention	2,642,177	2,686,801	2,516,249	2,487,392
Epidemiology Unit	317,397	363,531	311,017	344,415
HIV/AIDS	1,136,942	1,066,595	977,161	822,035
Animal Services	3,533,294	3,773,303	3,722,626	3,827,385
EMS	2,263,449	1,469,127	1,849,492	1,627,005
Human Services	1,985,815	1,484,462	1,506,355	--
Environmental Health Services	3,473,628	3,571,271	3,549,011	3,866,877
Tobacco Control	628,211	610,680	629,487	506,086
Family Programs	1,825,970	1,699,548	1,949,195	1,706,864
Operating Sub-Total	22,994,852	21,864,865	22,394,367	20,671,174
Less: Intra-County Revenues	(125,134)	(340,568)	(292,018)	(276,373)
Operating Total	22,869,718	21,524,297	22,102,349	20,394,801
<i>Non-Operating Expenditures</i>				
Capital Assets	72,497	123,500	112,705	--
Expenditure Total	22,942,215	21,647,797	22,215,054	20,394,801
<i>Other Financing Uses</i>				
Operating Transfers	475,927	307,502	313,444	320,925
Designated for Future Uses	1,167,914	557,300	783,011	75,808
Division Total	\$ 24,586,056	\$ 22,512,599	\$ 23,311,509	\$ 20,791,534

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Character of Expenditures				
<i>Operating Expenditures</i>				
Regular Salaries	10,085,306	10,341,491	10,181,590	10,333,698
Overtime	129,883	100,472	83,196	65,321
Extra Help	545,283	295,713	362,631	123,112
Benefits	4,655,947	4,897,195	4,857,850	5,392,488
Salaries & Benefits Sub-Total	15,416,419	15,634,871	15,485,267	15,914,619
Services & Supplies	5,707,073	4,943,894	5,355,743	4,706,555
Public Assistance Payments	208,027	--	237,476	--
Contributions	1,663,333	1,286,100	1,315,881	50,000
Operating Sub-Total	22,994,852	21,864,865	22,394,367	20,671,174
Less: Intra-County Revenues	(125,134)	(340,568)	(292,018)	(276,373)
Operating Total	22,869,718	21,524,297	22,102,349	20,394,801
<i>Non-Operating Expenditures</i>				
Capital Assets	72,497	123,500	112,705	--
Expenditure Total	\$ 22,942,215	\$ 21,647,797	\$ 22,215,054	\$ 20,394,801

Source of Funds Summary

<i>Departmental Revenues</i>				
Licenses, Fees, and Permits	\$ 5,078,982	\$ 5,227,160	\$ 5,071,157	\$ 5,103,511
State Realignment Allocation	--	--	--	(3,843)
Health Care Medical Services	971,970	1,187,527	1,132,296	1,305,492
Federal & State Revenues	9,135,432	8,744,997	8,833,070	8,011,539
Other Charges for Services	307,708	313,410	309,894	313,554
Miscellaneous Revenue	289,006	211,611	327,082	234,689
Revenue Sub-Total	15,783,098	15,684,705	15,673,499	14,964,942
Less: Intra-County Revenues	(125,134)	(340,568)	(292,018)	(276,373)
Revenue Total	15,657,964	15,344,137	15,381,481	14,688,569
<i>General Fund Contribution</i>				
	6,778,662	3,991,643	4,401,413	3,696,732
<i>Other Financing Sources</i>				
Operating Transfers	1,141,593	1,247,871	1,462,466	1,251,943
Use of Prior Fund Balances	1,007,837	1,928,948	2,066,149	1,154,290
Division Total	\$ 24,586,056	\$ 22,512,599	\$ 23,311,509	\$ 20,791,534

SERVICE DESCRIPTION

Prevent disease and promote healthy behaviors by monitoring, investigating, and controlling environmental hazards and communicable diseases. Inform people about nutrition, maternal child and family health, and chronic diseases.

	Actual FY 09-10		Adopted FY 10-11		Est. Actual FY 10-11		Recommended FY 11-12	
	Pos.	FTE	Pos.	FTE	Pos.	FTE	Pos.	FTE
Position Summary								
<i>Permanent</i>								
CH Administration	4.0	3.5	4.0	2.9	4.0	4.1	3.8	3.7
Health Promotion	3.5	2.8	5.0	2.7	5.0	2.3	2.3	2.0
Nutrition Services	36.5	33.4	37.5	34.1	37.5	33.9	39.0	35.4
Disease Control and Prevention	24.5	21.9	23.0	22.2	23.0	21.1	22.3	19.0
Epidemiology Unit	5.5	3.9	4.0	3.2	4.0	3.6	3.5	3.0
HIV/AIDS	5.0	3.1	4.0	2.2	4.0	2.2	1.8	1.8
Animal Services	29.0	30.0	30.0	28.9	30.0	26.5	29.0	28.6
EMS	6.0	6.9	5.0	5.6	5.0	6.0	5.8	5.6
Human Services	1.5	1.4	2.0	1.4	2.0	1.5	--	--
Environmental Health Services	30.0	27.1	30.0	26.8	30.0	27.0	30.0	26.0
Tobacco Control	4.5	3.9	3.8	3.8	3.8	4.0	3.8	3.0
Family Programs	21.5	12.7	19.5	12.7	19.5	13.2	15.8	11.7
Total Permanent	171.5	150.6	167.8	146.4	167.8	145.4	156.8	139.7
<i>Non-Permanent</i>								
Contract	--	0.8	--	1.5	--	1.0	--	3.3
Extra Help	--	10.4	--	5.9	--	9.8	--	2.2
Total Positions	171.5	161.8	167.8	153.8	167.8	156.1	156.8	145.1

Significant Changes (FY 2010-11 Adopted to FY 2010-11 Estimated Actual)

Estimated Actual operating expenditures increased by \$530,000, to \$22,394,000, from the Adopted Budget of \$21,865,000. This 2.4% increase is the result of:

- +\$237,000 - Audit Settlement for the Multi-Integrated System of Care (MISC) program for FY 05-06;
- -\$216,000 - Salaries and benefits due to holding vacancies and recruiting difficulties, particularly with licensed professional staff;
- +\$115,000 - Computer hardware and software replacement costs;
- +\$93,000 - Professional services, supplies, and equipment costs associated with an extension of H1N1 preparedness funding;
- +\$78,000 - Pharmaceuticals, medical supplies, minor equipment and other miscellaneous medical costs;
- +\$67,000 - Extra help and overtime costs;

PUBLIC HEALTH

Community Health (cont'd)

- +\$60,000 - Furniture, fixtures, and building maintenance;
- +\$57,000 - Women, Infant, and Children (WIC) program peer counseling grant project;
- +\$52,000 - Tuberculosis contract tracing and laboratory testing costs;
- -\$36,000 - State Immunization grant reductions;
- +\$30,000 - Warming Shelter passthrough dollars to Community Based Organizations (CBOs);
- -\$29,000 - Miscellaneous services and supplies, such as office supplies and travel; and
- +\$22,000 - Lompoc Animal Services shelter roof and kennel repairs.

Significant Changes (FY 2010-11 Estimated Actual to FY 2011-12 Recommended)

The Recommended Budget's operating expenditures will decrease by \$1,723,000, to \$20,671,000 from the prior year's Estimated Actual of \$22,394,000. This 7.7% decrease is the result of:

- -\$1,266,000 - Human Services allocations and Warming Shelter passthrough dollars to Community Based Organizations;
- +\$35,000 - Retirement, health insurance, and other benefit rate increases;
- -\$346,000 - Professional services, supplies, and equipment costs associated with the H1N1 vaccination surge and funding extension;
- -\$240,000 - Extra help, overtime, and temporary employee costs;
- -\$237,000 - Audit Settlement for the Multi-Integrated System of Care (MISC) program for FY 05-06;
- +\$150,000 - Environmental Health Services septic system improvement projects;
- -\$150,000 - State HIV/AIDS grants reductions;
- +\$134,000 - Wage increases and step adjustments;
- -\$123,000 - Computer purchases and Information Technology services;
- +\$67,000 - County wide cost allocation charges;
- -\$59,000 - Office supplies, memberships, travel, and other miscellaneous costs, due to cost saving measures;
- -\$52,000 - Tuberculosis contract tracing and laboratory testing costs;
- -\$49,000 - Furniture, fixtures, and building maintenance;
- -\$40,000 - Pharmaceuticals, medical supplies, minor equipment and other miscellaneous medical costs;
- -\$25,000 - Administrative charges to the Human Services program; and
- -\$22,000 - Lompoc Animal Services shelter roof and kennel repairs.

PUBLIC HEALTH
Community Health (cont'd)

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
CH Administration				
Ensure that 85% of all Public Health Nurses will have annual clinical skills testing to confirm readiness for pandemic influenza.	100%	88%	88%	85%
	34	23	23	22
	34	26	26	26
Health Promotion				
To promote healthy lifestyles, produce and broadcast 20 Healthy for Life TV shows: 10 in English and 10 in Spanish.	18	20	20	20
Screen 3,500 low-income women over 50 years old in the Tri-Counties for breast cancer.	8,672	5,500	4,000	3,500
Three hundred fifty Tri-Counties women, from medically underserved priority populations will receive health education on breast and cervical cancer and referral.	1,226	600	540	350
Nutrition Services				
Train 8 peer educators to provide nutrition education to 40 peers in Santa Maria.	--	--	-	40
Ensure 90% or more of Women, Infants, Children (WIC) program participants surveyed rate customer service as good or excellent.	95%	90%	95%	95%
	572	540	476	476
	600	600	500	500
Women, Infants, Children (WIC) program allocated caseload will be maintained at greater than or equal to 97% on a monthly basis.	96%	97%	95%	97%
	18,416	18,867	18,478	18,867
	19,100	19,450	19,450	19,450
A minimum of 32% of infants in the Women, Infants, Children (WIC) program each month will be exclusively breastfed.	31%	28%	30%	32%
	1,155	1,064	1,080	1,175
	3,749	3,800	3,600	3,672

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
Provide nutrition education to 500 students, teachers and parents in La Cumbre Junior High School community which meets the low-income requirement.	--	500	500	500
Disease Control and Prevention				
Maintain a turnaround time of 72 hours or less for 85% of an estimated 14,000 DNA Probe specimens for chlamydia and gonorrhea.	96%	80%	90%	85%
	13,709	11,200	13,050	12,325
	14,243	14,000	14,500	14,500
Ensure that 80% of infected TB contacts receive a CXR to rule out active TB disease within 14 days of TST or QFTc confirmation date.	79%	80%	70%	80%
	52	60	35	40
	66	75	50	50
Complete DNA lab tests for tuberculosis within 72 hours at least 90% of the time.	100%	90%	98%	90%
	80	90	98	90
	80	100	100	100
Ensure that 100% of workers excluded from work due to shigellosis, salmonellosis, and campylobacteriosis infections are released for work within 24-hours of laboratory clearance date.	100%	100%	93%	100%
	16	25	26	28
	16	25	28	28
Maintain a turn around time of 1 working day to the original requestor for 100% of an estimated 45 Priority 1 rabies tests per year.	98%	100%	98%	100%
	47	45	49	50
	48	45	50	50
Epidemiology Unit				
Respond to 100% of all food borne illness complaints within 1 working day using the Initial Assessment form.	--	100%	100%	100%
	--	25	12	12
	--	25	12	12
Verify medical and physician data and issue MMID for 100% of qualified patients within 30 days of application.	--	100%	100%	100%
	--	150	100	100
	--	150	100	100

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
HIV/AIDS				
Ensure at least 35 HIV positive individuals at risk of homelessness retain their housing.	--	35	30	35
Provide annual cervical cancer screening to at least 76% of HIV positive women.	--	76%	84%	76%
	--	28	32	29
	--	37	38	38
Animal Services				
Operate the public spay/neuter clinic for owned dogs and cats 1 day per week and alter 600 animals annually.	--	--	415	600
Increase dog license sales by 5% annually.	--	4.8%	5.0%	5.0%
	--	1,122	1,177	1,240
	--	23,556	23,556	24,734
Vaccinate at least 2,200 owned dogs and cats for rabies at low cost clinics.	2,002	2,000	2,000	2,200
EMS				
Ensure that the EMS System meets or exceeds 92% of the 121 California EMS Authority Standards and Guidelines.	94%	92%	95%	92%
	114	111	115	111
	121	121	121	121
Ensure that 100% of trauma center registry data submitted to the State is compliant with CEMSIS.	100%	100%	100%	100%
	1,732	1,500	1,650	1,500
	1,732	1,500	1,650	1,500
Ensure EMS 911 calls are answered within 10 seconds, 90% of the time and track monthly for compliance.	100%	90%	97%	90%
	10,977	38,219	41,339	38,250
	10,992	42,466	42,469	42,469
Ensure PHD, coordinating with other healthcare partners, is ready to respond to disasters by ensuring 100% of after action reports and corrective action plans for 3 annual exercises or real events are completed in 60 days.	100%	100%	100%	100%
	3	3	3	3
	3	3	3	3

PUBLIC HEALTH
Community Health (cont'd)

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
Ensure that the response times of the County Advanced Life Support (ALS) providers are compliant in each of the seven EMS zones of the County. This includes the ambulance contractor, AMR, and the ALS fire departments.	98%	90%	96%	90%
	33,189	24,950	29,286	27,987
	33,771	27,750	30,608	31,220
With the goal of 90% compliance, conduct monthly PHD disaster communications drills utilizing satellite phones, radios and ReddiNet with hospitals, PHD clinics and EMS providers to ensure redundant communications in the event of a disaster.	73%	92%	92%	92%
	8	11	33	33
	11	12	36	36
Ensure 100% of PHD executive staff receive training for activation of the DOC/EOC for wild land fires and other disasters.	100%	100%	100%	100%
	8	20	20	20
	8	20	20	20
Maintain GIS mapping and disaster database information collection for vulnerable population facilities in the county at 95%.	100%	95%	97%	95%
	323	247	252	247
	323	260	260	260
Environmental Health Services				
Complete initial plan checks for pool and food facility plans within 21 days.	89%	100%	94%	100%
	437	250	425	300
	490	250	450	300
Respond to 100% of all food borne illness complaints within 1 working day.	99%	100%	98%	100%
	126	100	98	100
	127	100	100	100
Annually inspect at least 90% of retail food facilities each year.	105%	95%	80%	90%
	5,713	2,199	1,852	2,097
	5,461	2,315	2,315	2,331

PUBLIC HEALTH
Community Health (cont'd)

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
Tobacco Control				
As a result of the passage of the Tobacco-Free Parks and Beaches ordinance, reduce cigarette butt litter by 25% at 6 targeted parks and beaches annually.	83%	25%	25%	25%
	3,633	1,286	362	271
	4,372	5,143	1,447	1,085
Reduce sales of tobacco products to youth in the unincorporated areas of the County from 12% to 8% by June 2012.	--	--	-	8%
	--	--	-	5
	--	--	-	59
Family Programs				
Ensure that 75% of family cases referred with a high risk factor receive a PHN (face to face) assessment within 10 working days of initial referral.	78%	75%	80%	75%
	1,010	975	800	750
	1,299	1,300	1,000	1,000
Ensure that 85% of Maternal Child Adolescent Health (MCAH) infants and children under age 18 obtain health insurance within 2 months of Public Health Nurse referral.	91%	85%	85%	85%
	1,075	935	799	799
	1,178	1,100	940	940
Ensure examiners are available to provide medical-legal sexual assault exams a minimum of 95% of days each year.	--	95%	96%	96%
	--	347	350	350
	--	365	365	365

	Actual FY 09-10 Pos.	Adopted FY 10-11 Pos.	Est. Actual FY 10-11 Pos.	Recommended FY 11-12 Pos.
Position Detail				
CH Administration				
Deputy Director	1.0	1.0	1.0	1.0
Staff Physician II	--	--	--	0.8
Nursing Director	1.0	1.0	1.0	--
Project Manager	1.0	1.0	1.0	1.0
Admin Office Pro	1.0	1.0	1.0	1.0
Sub-Division Total	4.0	4.0	4.0	3.8
Health Promotion				
Program Administrator	1.0	1.0	1.0	--
Program Manager	1.0	1.0	1.0	1.0
Public Health Nurse	1.0	1.0	1.0	--
Health Educator	--	1.5	1.5	0.8
Health Education Associate	0.5	0.5	0.5	0.5
Sub-Division Total	3.5	5.0	5.0	2.3
Nutrition Services				
Program Manager	1.0	1.0	1.0	1.0
Admin Office Pro	2.0	2.0	2.0	1.5
Nutrition Services Supervisor	1.0	1.0	1.0	1.0
Nutrition Site Supervisor	4.0	4.0	4.0	4.0
PH Program Coordinator	0.9	0.9	0.9	0.9
Health Educator	2.5	2.8	2.8	2.8
Lactation Consultant	1.6	1.6	1.6	1.6
Nutritionist	6.5	6.8	6.8	6.8
Health Education Assistant	17.0	17.5	17.5	19.5
Sub-Division Total	36.5	37.5	37.5	39.0

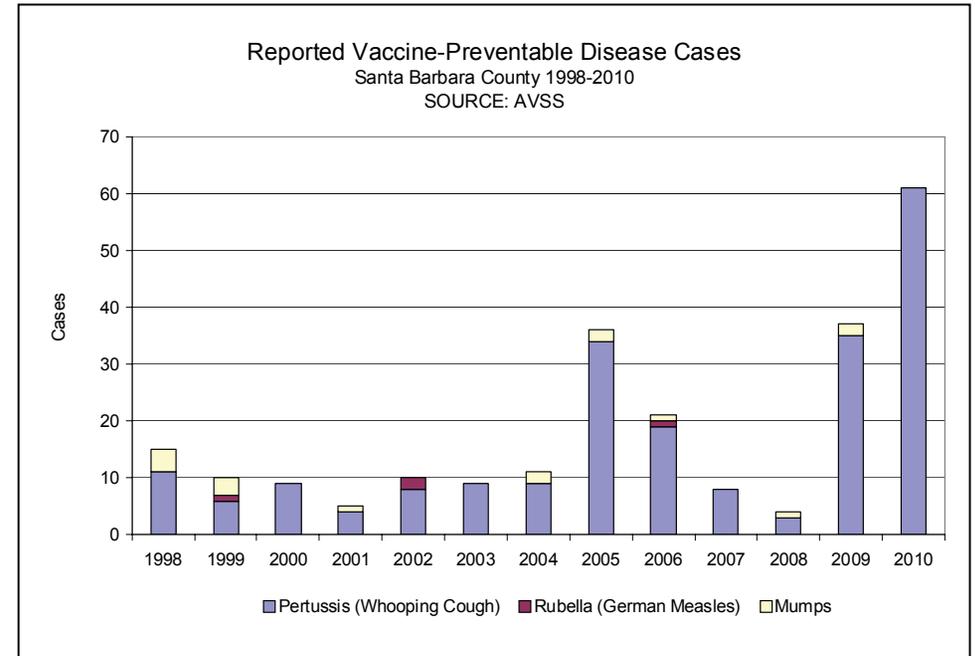
Position Detail	Actual	Adopted	Est. Actual	Recommended
	FY 09-10	FY 10-11	FY 10-11	FY 11-12
	Pos.	Pos.	Pos.	Pos.
Disease Control and Prevention				
Staff Physician II	1.0	--	--	--
Program Administrator	1.0	1.0	1.0	1.0
Program Manager	1.0	1.0	1.0	1.0
Lab Supervisor	1.0	1.0	1.0	1.0
Public Health Nurse Supervisor	2.0	2.0	2.0	3.0
Dept Business Specialist	--	--	--	1.0
Admin Office Pro	4.5	5.0	5.0	3.0
Public Health Nurse	5.0	4.0	4.0	4.3
Microbiologist	4.0	4.0	4.0	3.0
Health Education Associate	1.0	--	--	--
Medical Assistant	1.0	1.0	1.0	1.0
Laboratory Assistant, Sr	1.0	--	--	--
Health Services Aide	2.0	3.0	3.0	3.0
Laboratory Assistant	--	1.0	1.0	1.0
Sub-Division Total	24.5	23.0	23.0	22.3
Epidemiology Unit				
Epidemiologist	1.0	0.5	0.5	0.5
Admin Office Pro	3.5	2.5	2.5	2.0
Epidemiologist/Biostatistician	1.0	1.0	1.0	1.0
Sub-Division Total	5.5	4.0	4.0	3.5
HIV/AIDS				
Program Administrator	1.0	--	--	--
Dept Business Specialist	--	1.0	1.0	--
Admin Office Pro	1.0	1.0	1.0	0.8
Health Educator	1.0	--	--	--
Health Education Associate	1.0	1.0	1.0	1.0
Health Services Aide	1.0	1.0	1.0	--
Sub-Division Total	5.0	4.0	4.0	1.8

PUBLIC HEALTH
Community Health (cont'd)

Recurring Performance Measures	Actual	Adopted	Est. Actual	Recommended
	FY 09-10	FY 10-11	FY 10-11	FY 11-12
Animal Services				
Animal Health & Reg Dir	1.0	1.0	1.0	1.0
Dept Business Specialist	1.0	1.0	1.0	--
Admin Office Pro	5.0	5.0	5.0	5.0
Financial Office Pro	2.0	2.0	2.0	2.0
Community Outreach Coordinator AH	1.0	1.0	1.0	1.0
Animal Control Officer Supervising	3.0	3.0	3.0	3.0
Registered Veterinary Tech	1.0	1.0	1.0	1.0
Animal Control Officer	9.0	9.0	9.0	9.0
Animal Shelter Attendant	6.0	7.0	7.0	7.0
Sub-Division Total	29.0	30.0	30.0	29.0
EMS				
Program Administrator	1.0	1.0	1.0	1.0
Program Manager	1.0	1.0	1.0	1.0
Performance Improve Coordinator	2.0	2.0	2.0	1.8
Admin Office Pro	1.0	1.0	1.0	1.0
Microbiologist	--	--	--	1.0
Senior Services Supervisor	1.0	--	--	--
Sub-Division Total	6.0	5.0	5.0	5.8
Human Services				
Program Administrator	1.0	1.0	1.0	--
Dept Business Specialist	0.5	--	--	--
Admin Office Pro	--	1.0	1.0	--
Sub-Division Total	1.5	2.0	2.0	--
Environmental Health Services				
Program Manager	1.0	1.0	1.0	1.0
EDP Sys & Prog Anlst	1.0	1.0	1.0	1.0
Environmental Health Supervisor	3.0	3.0	3.0	3.0
Dept Business Specialist	1.0	1.0	1.0	1.0
Admin Office Pro	4.0	4.0	4.0	4.0
Financial Office Pro	1.0	1.0	1.0	1.0
Environmental Health Specialist	17.0	17.0	17.0	17.0
Accountant	1.0	1.0	1.0	1.0
Environmental Health Technician	1.0	1.0	1.0	1.0
Sub-Division Total	30.0	30.0	30.0	30.0

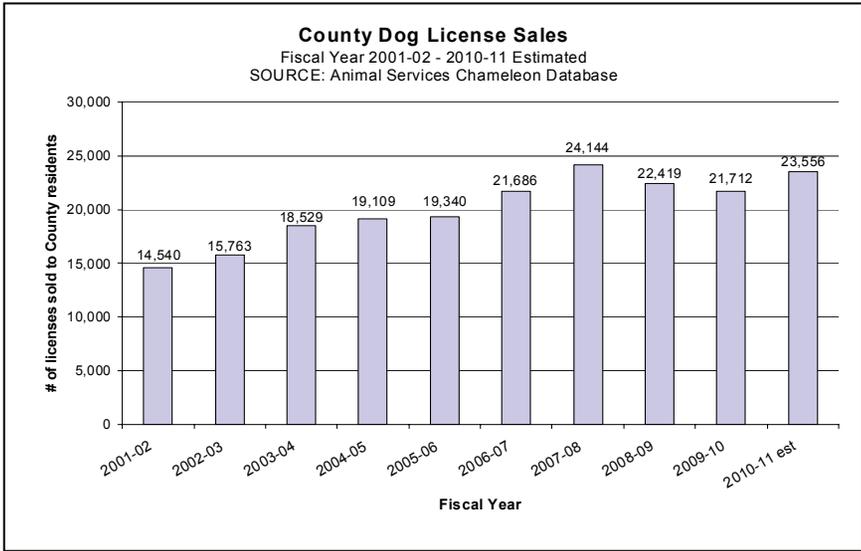
PUBLIC HEALTH
Community Health (cont'd)

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
	Pos.	Pos.	Pos.	Pos.
Position Detail				
Tobacco Control				
Program Administrator	1.0	1.0	1.0	1.0
Admin Office Pro	0.8	0.8	0.8	0.8
Health Educator	1.8	1.0	1.0	1.0
Health Education Associate	1.0	1.0	1.0	1.0
Sub-Division Total	4.5	3.8	3.8	3.8
Family Programs				
Program Administrator	0.5	0.5	0.5	0.5
Program Manager	1.0	1.0	1.0	1.0
Public Health Nurse Supervisor	3.0	3.0	3.0	2.0
Admin Office Pro	1.0	1.0	1.0	1.0
Public Health Nurse	7.5	7.5	7.5	6.8
Medical Social Svcs Practitioner	0.5	0.5	0.5	0.5
PH Caseworker	--	1.0	1.0	--
Health Services Aide	8.0	5.0	5.0	4.0
Sub-Division Total	21.5	19.5	19.5	15.8
Division Total	171.5	167.8	167.8	156.8

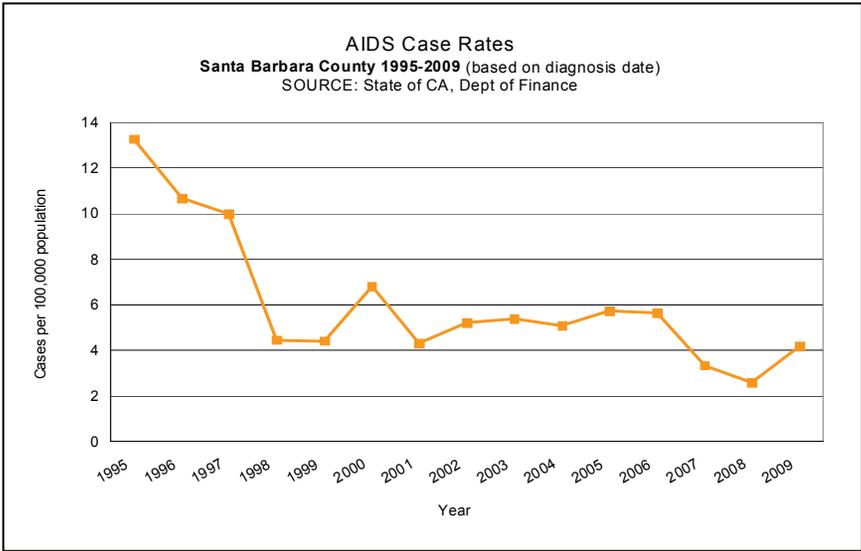


Cases of pertussis (whooping cough) continue locally and statewide. Because the effectiveness of the vaccine against pertussis decreases over time, all students grade 7-12 are now required to have a pertussis booster vaccine.

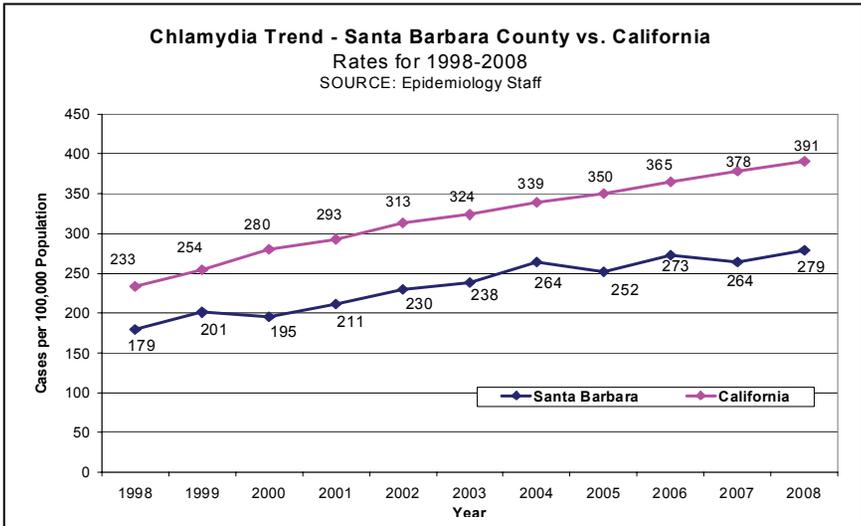
PUBLIC HEALTH
Community Health (cont'd)



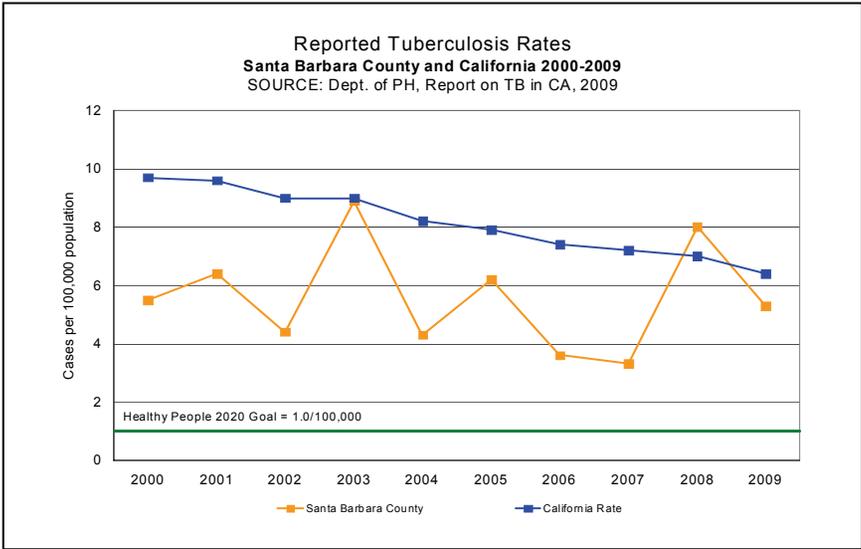
State and local laws require that all dogs over 4 months are licensed. Animal Services door-to-door canvassing and outreach efforts are increasing licensing rates in Santa Barbara County.



The number of new AIDS cases declined significantly in the 1990s after the introduction of anti-retroviral medications.



Chlamydia is the most frequently reported Sexually Transmitted Infections locally and in the nation. While Chlamydia rates in Santa Barbara County are below the rates in the state, both have been on the rise since 1998.



Progress is being made to control TB locally and statewide due to public health efforts to identify cases and prevent the spread of TB.

**PUBLIC HEALTH
Tobacco Settlement**

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Use of Funds Summary				
<i>Operating Expenditures</i>				
Administration	\$ 61,943	\$ 95,000	\$ 39,314	\$ 40,000
Prevention	200,000	1,424,222	2,276,062	1,333,658
Treatment	64,689	65,000	65,000	48,750
Expenditure Total	326,632	1,584,222	2,380,376	1,422,408
<i>Other Financing Uses</i>				
Operating Transfers	4,700,269	4,644,763	4,509,788	3,302,419
20% Endowment Designation	62,261	51,548	14,427	5,316
Tobacco Settlement Designation	4,124,028	4,602,084	4,146,714	4,185,468
Division Total	\$ 9,213,190	\$ 10,882,617	\$ 11,051,305	\$ 8,915,611

Character of Expenditures

<i>Operating Expenditures</i>				
Services & Supplies	326,632	1,584,222	2,380,376	1,422,408
Expenditure Total	\$ 326,632	\$ 1,584,222	\$ 2,380,376	\$ 1,422,408

Source of Funds Summary

<i>Departmental Revenues</i>				
Tobacco Settlement Funds	\$ 4,045,048	\$ 4,547,777	\$ 4,097,997	\$ 4,148,556
Tobacco Settlement Interest	70,642	105,855	63,144	42,228
Revenue Total	4,115,690	4,653,632	4,161,141	4,190,784
<i>Other Financing Sources</i>				
Use of Prior Fund Balances	5,097,500	6,228,985	6,890,164	4,724,827
Division Total	\$ 9,213,190	\$ 10,882,617	\$ 11,051,305	\$ 8,915,611

Significant Changes (FY 2010-11 Adopted to FY 2010-11 Estimated Actual)

Estimated Actual operating expenditures increased by \$796,000 to \$2,380,000, from the Adopted Budget of \$1,584,000. This 50.2% increase is the result of:

- +\$908,000 - FY 2009-10 Tobacco Settlement hospital allocations released from the Tobacco Settlement Fund during FY 2010-11 for use in an Inter-Governmental Transfer (IGT), that provided for federal matching opportunities;
- -\$57,000 - Reductions to allocations due to decreases in the Master Tobacco Settlement allocation; and
- -\$55,000 - Administrative expenditures.

Significant Changes (FY 2010-11 Estimated Actual to FY 2011-12 Recommended)

The Recommended Budget's operating expenditures decreased by \$958,000, to \$1,422,000, from the Estimated Actual of \$2,380,000. This 40.2% decrease is the result of:

- -\$908,000 - FY 2009-10 Tobacco Settlement hospital allocations released from the Tobacco Settlement Fund during FY 2010-11 for use in an Inter-Governmental Transfer (IGT), that provided for federal matching opportunities; and
- -\$50,000 - Reductions to allocations due to decreases in the Master Tobacco Settlement allocation.

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
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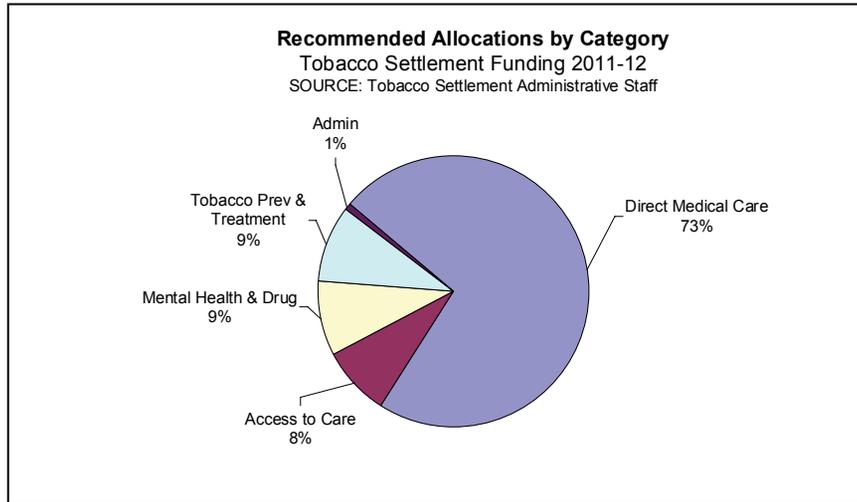
Recurring Performance Measures

Prevention

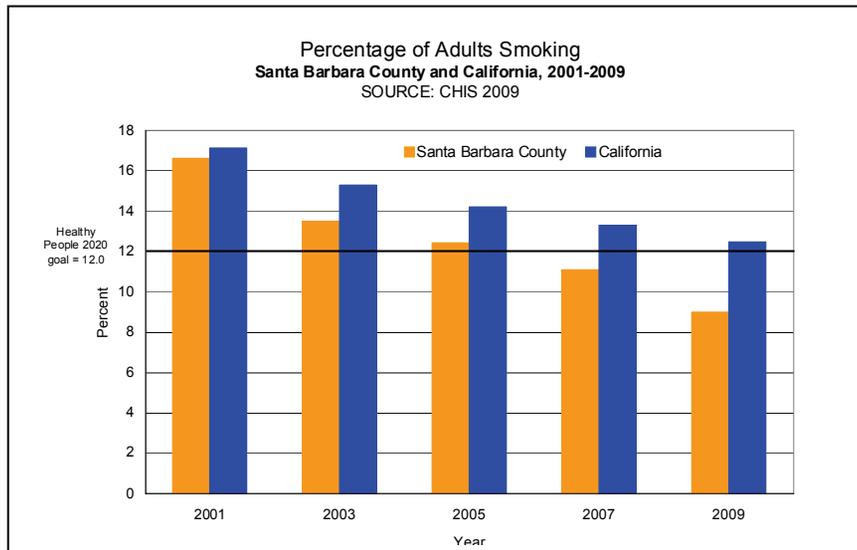
Provide funding for dental care for 90 uninsured children through tobacco settlement funding each year.	91	90	90	90
Provide funding for health benefits for 150 children through tobacco settlement funding.	905	200	153	150

SERVICE DESCRIPTION

The Tobacco Settlement Division administers the tobacco settlement revenues and the programs funded.



Almost three quarters of Santa Barbara County's tobacco settlement funding is allocated to fund direct medical care for the uninsured and underinsured.



Ongoing public health efforts have decreased smoking among Santa Barbara County adults to 9% - below the Healthy People 2020 goal of 12%.

PUBLIC HEALTH

Tobacco Settlement (cont'd)



FEEL LIKE A KID AGAIN

Kids have energy.
Lots and lots of energy.
What would you do if you had some of that? Take a flight of stairs without stopping?
Play touch football?
Walk the dog with you in the lead?
Quitting smoking is like tapping into a fountain of youth.
The world is waiting.

When you're ready to quit smoking, we're here to help.
The tools, medication and motivation to quit are yours.*
Classes start now.

Community Health Center

2801 Santa Maria Way,
Conf. Room, Santa Maria.
Classes start on April 1st.
Classes will be held in English and Spanish.

For English class enrollment
call **346-7275**.

For Spanish class enrollment
call **938-0935 x619**.

*\$20 suggested donation.

LIFE WITHOUT SMOKE. IT'S A BEAUTIFUL WORLD.

Your Tobacco Settlement Dollars at Work. Santa Barbara County Public Health Department.
Santa Barbara: 681-5407 • Santa Maria: 346-7275

