

MEETRO

Extensive Survey to Aid Public, Private Health Planning

By PETER M. WARREN
TIMES STAFF WRITER

In what local health officials are calling the most sweeping look at medical needs ever undertaken by a California county, Orange County has for 11 months been taking the pulse of the 2.7 million people who live here.

The examination, which costs \$400,000 and includes a poll of 5,000 residents, will conclude early this year with an in-depth report detailing the hows and whys of who gets sick and who gets cared for in the county.

The project has been undertaken by a broad group of public and private agencies and will propose priorities for improving health services countywide. More broadly, its authors hope it will serve as a road map for public officials as they make decisions about where to spend tax dollars as well as a marketing aid for hospitals and medical professionals as they devise services to sell the public.

Called the Orange County Health Needs Assessment, the report will describe the health habits of residents—from whether children wear bicycle helmets to whether lovers use condoms—along with a look at such statistics as

birth and death rates and the primary causes of illnesses and hospitalizations.

"It is essentially a snapshot of the health of the community," said County Director of Public Health Dr. Hugh Stallworth.

Some of the data has been available in other forms, but much of it—particularly the information gathered from a 400-question poll asked of 5,000 residents and ancillary data from focus groups—is new.

Stallworth uses a doctor-patient analogy in describing the report's importance, likening it to the data a doctor gets before making decisions about a patient's care.

"You don't try to treat a patient's problem without getting a good medical history and physical examination of a patient," he said. "In public health, this community with its 2.7 million people is the patient, and there has never been a comprehensive assessment of this patient."

It was created in response to a 1994 state law that required nonprofit hospitals to analyze the health needs of the people they serve and outline a plan to fill those needs. But Orange County's health needs assessment will go far beyond that, according to project director Pamela Austin.

Stallworth and officials at leading hos-

pitals felt it would be far more useful to get a countywide picture rather than use a fragmented, hospital-by-hospital approach. Eventually all 27 hospitals in the county—private and nonprofit—formed a partnership to do the assessment, along with the county Health Care Agency, CALOPTIMA (the county's health plan for the poor) and several dozen other agencies ranging from Cal State Fullerton to 100 Black Men of Orange County.

More than 50 agencies are represented on the collaborative effort's steering and advisory committees. Key contributions came from the county, hospitals, the

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Healthcare Assn. of Southern California and the California Endowment.

The report is expected to be released by March 1. Though it will provide hard facts to replace assumptions about county health needs, some wonder whether it will provoke action or just gather dust.

"The data is wonderful, but we need to take it and do something with it," Austin said.

Whether supervisors will embrace the report or its recommendations is unclear.

Supervisor William G. Steiner said it is unlikely to contain "any surprises because the gaps in health care are painfully evident." But, he said, "the board will appreciate a strategic plan that sets

priorities, because there is never enough money to meet all the needs."

Health and local officials describe the report as the most comprehensive ever undertaken for a county or municipality this size. San Diego County, which was a trendsetter three years ago when its health care network teamed to do a countywide assessment, was the previous leader, but its report lacked the polling and focus groups included in the Orange County effort.

Particularly noteworthy is the poll, which cost about one third of the \$400,000 budget, Austin said. The survey of 5,000 people asked about their health and insurance status, whether they are happy with them, where they get medical treatment, whether they get general checkups and go to the dentist. It assessed general health issues ranging from disease history to back problems, and tried to define barriers to treatment, such as economics, lack of insurance and transportation problems.

People were asked how much they exercise and smoke, what they eat, and whether they use seat belts and practice safe sex.

The focus group program included a look at issues involving the elderly, teens, pregnant women and users of child-care and mental-health services.

"One of the most interesting groups involved adolescents," Austin said. Among the things researchers learned was that most teens feel that health care professionals "are not paying enough attention to teenage abuse of cigarettes and alcohol because the focus is so much on illegal drugs," she said.

Jon Gilwee, a spokesman for the hospital trade group Healthcare Assn. of Southern California, called the cooperative project and the report "extremely significant," adding it would "provide a basis for

identifying needs countywide so there can be a more collaborative approach to deploying charitable and government resources to the community."