




What's



NEWSLETTER

JUNE 2021



Director's Message

Dear OC Health Care Agency Team,

We continue to make tremendous progress together in our fight against COVID-19. Vaccine eligibility has now expanded to children age 12 and older, and over 1.4 million people in Orange County (OC) are now fully vaccinated. In addition, 60% of our eligible residents have already received at least their first dose (which includes over 84% of our seniors age 65 and older!).

The vaccine is truly making a difference, as made evident by declining infections and loss of life here in OC. If we look at other parts of the world where vaccines are less accessible, COVID-19 cases remain high and hospital systems continue to be overwhelmed. Various regions in

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Peer-to-Peer **Min Suh**

May's Peer-to-Peer recipient is a true peer. **Min Suh**, Mental Health Services Act (MHSA) Coordination Assistant and Behavioral Health Services (BHS) Peer Workforce Liaison said he realized his calling to join the OC Health Care Agency (HCA) after taking part in the County of Orange's "Consumer Training Program" in 2011. "At that time, I had no idea how someone like me, a person living with a mental illness could be useful at first. But during this life-changing 4-month training, I have to say I learned so much from my peer classmates who were models of recovery for me, as well as our peer instructor Dr. Nikki Duesterberg, and a guest speaker at the time **Dr. Clayton Chau**. They motivated and encouraged me and others to realize we could be more and helped me realize my calling to

work in Behavioral Health. In 2012, after I completed my peer support internship, I was invited to join HCA/BHS as a peer specialist in a new behavioral health program."

As for peer support services, he works to ensure BHS provides quality peer support services, while strengthening this growing peer workforce. "Much of this work is self-driven and requires me to constantly find ways to motivate and encourage myself. I have to often remind myself that change is incremental, and that systems change can take place over a long period of time. Balancing patience and still maintaining a drive can sometimes be quite challenging."

And the drive is there for Min. "I love how dynamic the work is

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THANK YOU, EMERGENCY



During the week of May 16-22, 2021, the OC Health Care Agency (HCA) celebrated our Orange County Emergency Medical Services (OCEMS) community as part of National Emergency Medical Services Week.

Emergency Medical Services, more commonly known as EMS, is a system that provides emergency medical care. Once the system is activated by an incident that causes serious illness or injury, the focus of EMS is emergency medical care of the patient(s).



EMS might be most easily recognized when emergency vehicles or helicopters are seen responding onsite to emergency incidents— but **EMS is so much more than a ride to the hospital.** It is an intricate system of coordinated response and emergency medical care, involving multiple people and agencies. Each component of the EMS system has an essential role to perform. OCEMS comprises the following components:

- ✓ Agencies and organizations (both private and public)
- ✓ Emergency communications and first responders
- ✓ Ambulance response and transportation networks
- ✓ Definitive care and specialty services (hospitals)
 - Base hospital, trauma, ST-elevated myocardial infarction (STEMI), stroke, pediatrics
- ✓ Highly trained professionals
 - Emergency medical technicians (EMTs) and paramedics
 - Nurses, physicians and therapists
 - Administrators and government health officials
- ✓ A well-informed public that knows what to do in a medical emergency!

MEDICAL SERVICES

EMS does not exist in isolation, but integrates with other services and systems to maintain and enhance the community's health and safety. The system operates at the crossroads between health care, public health and public safety, employing a combination of the principles and resources from each area. Since EMS providers work in the community, they are often the first to identify public health problems and issues. The emergence of significant health problems is often signaled by their arrival in the emergency department via EMS. Since EMS providers respond to all kinds of emergencies and hazards, they often work shoulder-to-shoulder with public safety colleagues in law enforcement and fire services, but their primary mission is emergency medical care.

Thanks to a comprehensive EMS system that is on hand 24/7, for every kind of emergency, lives are being saved each and every day.



Director's Message

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India, for example, have seen a slower pace of vaccination due to lack of supply, and a corresponding rise in deaths. Only 15% of the population in Brazil has received a first dose of vaccine, and they are experiencing new waves.

What does this mean for us? In order to reach herd immunity (a place in which we can feel safe with the majority of our eligible population vaccinated), approximately 281,000 people in OC need to get their first dose. You may know some of them. You may be on the fence yourself. But as we are seeing with the surges in India and Brazil, we won't be able to break out of the pandemic completely unless more people get the shot. And we are tremendously fortunate that the vaccine is widely available here in the United States.

Our county is now in the least restrictive Yellow Tier of the State's Blueprint for a Safer Economy thanks to a decline in our case rates, which means many businesses and entertainment venues are reopening and increasing capacity. We will see our environment relax even more statewide on June 15; however, with our county welcoming many out-of-town visitors, we remain at risk of getting exposed to variants. We also have little information on the long-term health impact of a single COVID-19 illness on a person, whether they're symptomatic or asymptomatic.

The time is now for us to take action. Let's encourage one another and others in our community who are eligible and haven't yet received the vaccine to roll up their sleeves. For valuable tips on how to have a conversation around vaccination with hesitant friends and family, please visit this informative website from the Centers for Disease Control and Prevention: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/talk-about-vaccines.html>.

Sincerely,

Dr. Clayton Chau
HCA Director
County Health Officer

Nurses play a pivotal role in caring for people in our community. You may think of nurses as dedicated individuals who provide direct care to those in the hospital setting, but many other types of nurses contribute to safeguarding the health of our residents. At the OC Health Care Agency (HCA), we have nurses who serve a variety of populations, helping to maximize population health and removing barriers that prevent these populations from getting the health care they need. Across all of our service areas, nurses exercise compassion for their patients, helping to understand their needs, delivering care and support to them, connecting them to resources and helping educate them on how to care for themselves better.

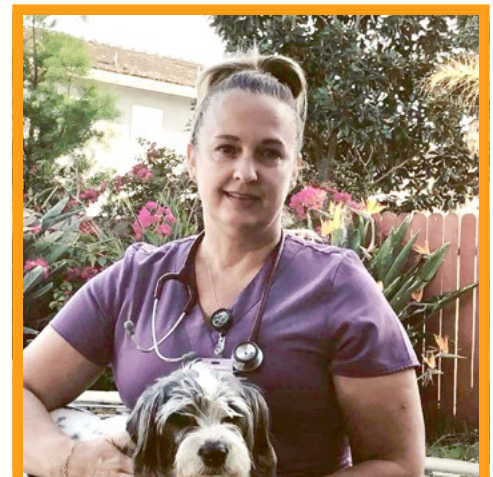
Prior to working at the OC Health Care Agency, **Nelly Blanco** spent about eight years in home health nursing, where she helped people who needed care in their own homes, and one year as a case manager. Now serving as a Senior Comprehensive Care Nurse in Correctional Health Services (CHS), she provides health care support to incarcerated patients, many of whom are homeless or mentally ill. These patients reside at one of three facilities: Men's Jail, Theo Lacy and the Intake and Release Center (IRC). "One of the challenges I experience here is having to do a strong, accurate assessment of their needs when they arrive at the IRC," shared Nelly. "Oftentimes, the patients

don't tell us from the get-go what's going on with them, if they have any medical conditions or mental health problems. It's important for triage nurses to have strong nursing skills so they can help patients get the services they need."

Katherine Minnicucci, who is also a Senior Comprehensive Care Nurse and has served at CHS for over 20 years, says she enjoys working in the correctional health environment because it's an opportunity for her to use her critical thinking and physical assessment skills to help a historically underserved population. "In Corrections, we're always trying to promote better health care for our patients," says Katherine. "A lot of them suffer



James Trimmer

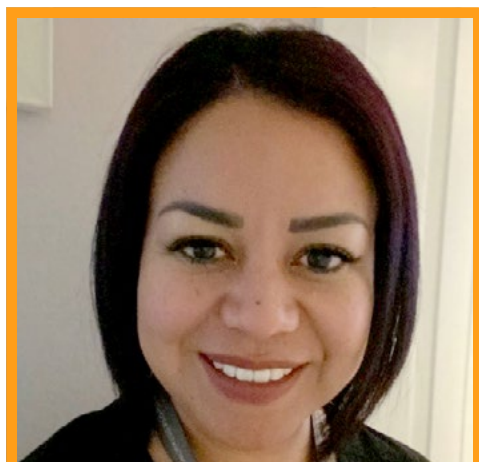


Katherine Minnicucci



Lorena Hermogeno

Difference



Nelly Blanco



Ronie Bunao

from mental and substance use disorder, and it's our job to help them be better, to help them transition into the community, starting on day one when they first come in. It's a very rewarding experience being able to help them and I find that our patients are usually grateful for our time and care."

Ronie Bunao and James (Jim) Trimmer also spent some time in the past as nurses in CHS, but now serve in separate roles

as Comprehensive Care Nurses II in Behavioral Health Services (BHS).

Jim spent about 19 ½ years in CHS before joining the Crisis Stabilization Unit (CSU) in BHS, where he now helps to resolve mental health crises for clients as well as assessing them for medical problems to make sure that the clients' medical needs are being addressed before transferring them to a different level of care. "Clients are often referred from emergency departments, police departments, the crisis assessment team, and their own family members; some are even walk-ins," says Jim. "I really enjoy helping each client who walks through the door, no matter who they are. Just to get that person food, shower, clean clothing, a bed, medications - that's not a lot to ask for. When I see that happen, that's the start of something good."

Ronie, on the other hand, started out with the CSU eight years ago and also spent some time in Correctional Health, but now works in Behavioral Health Inpatient Services supporting long-term care placement services. Many of his clients are deemed to be gravely disabled and assigned to a conservatorship by the court. "They generally have chronic mental illness and require a structured placement," shared Ronie. "My role is to help coordinate the placements of clients in suitable long term care facilities throughout southern California while also monitoring the County's contracts with these facilities." Ronie says he loves

teaming up with staff to help get clients placed. "I love interacting and troubleshooting their issues, and it makes my work worthwhile knowing that it is all aimed at helping adults become more stable and reintegrated into the community."

Prior to the pandemic, **Lorena Hermogeno** spent almost 20 years supporting the Health Care Program for Children in Foster Care. Her role as a Senior Public Health Nurse involved working with social workers, connecting foster care children and caregivers to community services and medical providers, as well as helping emancipated youth transition to adulthood. "We would act as consultants to the social workers in helping families get set up for success at home and connected to resources in the community," says Lorena. "We're also that lifeline to the foster and biological families to help them with various medical needs, like refilling medications, navigating CalOptima and overcoming any roadblocks to getting the children's medical needs met."

Since the pandemic started, Lorena transitioned into a myriad of roles in support of Public Health Services' COVID-19 response, including COVID-19 specimen testing with the Disaster Response Team, contact tracing and investigation, educating long-term care facilities on how to manage outbreaks, and now supporting the Incident Management Team with clinical operations at the Super PODs (point of dispensing sites) and

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A LOOK BACK on WHOLE PERSON CARE

by **Nicole LeMaire**, Program Manager

With Medical Health Services' Whole Person Care (WPC) transitioning its services to the California Advancing and Innovating Medi-Cal (CalAIM) initiative on January 1, 2022, it's time to take a look back at the accomplishments of this groundbreaking program. On October 24, 2016, the County of Orange was approved by the California Department of Health Care Services (DHCS) to implement a WPC Pilot Program in Orange County (OC). The program seeks to improve access and navigation of services for the homeless population by promoting increased communication between shelters, hospitals, CalOptima, community clinics, WPC contract providers, and OC Health Care Agency's (HCA) Behavioral Health Services, Public Health Services, and Medical Health Services divisions.

Under the leadership of **Dr. Clayton Chau**, HCA Director and County Health Officer, and **Steve Thronson**, Director of HCA Medical Health Services, the WPC Pilot Program is managed by a small, yet mighty team of seven full- and part-time staff.

WPC is the coordination of physical, behavioral health, and social services in a patient-centered approach with the goals of improved health and well-being through more efficient and effective use of resources for Medi-Cal beneficiaries struggling with homelessness. WPC's target populations include individuals who are: high utilizers of medical and behavioral health services (i.e., multiple hospital admissions, emergency room visits, and mental health/crisis admissions); have chronic physical conditions, severe mental illness and/or substance use disorder; experience or are at-risk of homelessness; or are justice-involved.

Since its inception in 2016, the WPC Pilot Program has addressed a multitude of needs for its target populations, including:

- Expansion of a community referral network addressing non-medical needs of the population.
- Inclusion of shelter bed providers as WPC participating entities for improved care and supportive services coordination.
- Expansion of Recuperative care beds, including some specifically targeted to: 1) medically fragile individuals in shelter programs, 2) those medically fragile with added mental health needs, 3) those medically fragile with added substance use disorder needs, 4) those with combinations of #2 and #3 that have been released from incarceration, and 5) those who are medically fragile with any combination of the above who also need assistance with daily living.
- Addition of homeless outreach and navigation staff to eight hospitals and nine community clinics.
- Expansion of Behavioral Health Outreach and Engagement staff.
- Dedicated resources to find housing opportunities for persons who are also living with mental illness.
- Peer mentoring services to aid persons living with mental illness to stay in housing once placed.
- Housing navigation and sustainability services for persons struggling with homelessness who are not living with mental illness.
- Liaison services and housing support between HCA, city housing authorities, and contracted housing providers to optimize and expedite housing placement for various housing vouchers.
- Assistance with move-in expenses associated with housing placements.
- Nursing staff support for the review of medical acuity appropriateness for recuperative care admissions (authorized, short-term stays in social model settings based upon acute medical and behavioral health needs of the clients).
- Funding for the bi-directional, electronic sharing of care plan information between the WPC Pilot partners and contract providers and CalOptima via WPC Connect (web-based care coordination platform).
- Additional funding for HCA's administrative costs associated with the WPC program.

PROGRAM STATS

The WPC Pilot Program has accomplished a tremendous amount of work over the past five years, with the number of clients and volume of services well exceeding Orange County's proposed unduplicated count of 7,760 clients to be served in 2016 when the program was launched. The following stats offer a glimpse of these accomplishments over the lifetime of Orange County's WPC program:

PILOT

12,879 of unduplicated Medi-Cal beneficiaries enrolled to 12/31/2020

- 8,697 beneficiaries engaged by hospitals and clinics
- 1,241 beneficiaries engaged by shelters
- 831 beneficiaries engaged by Behavioral Health Services
- 525 beneficiaries engaged by housing providers
- 947 beneficiaries engaged by Fee for Services providers (i.e., recuperative care)
- 524 beneficiaries engaged by other providers

3,978 unduplicated WPC enrollees received Behavioral Health Services

- **48.9% decrease** in ambulatory care/emergency department visits since the onset of WPC
- **50.8% decrease** in inpatient utilization/general hospitalization since the onset of WPC

RECUPERATIVE CARE

- 1,843 unduplicated WPC enrollees received Recuperative Care Services
- 85,135 Recuperative Care bed days provided to WPC enrollees
- Average length of stay in WPC Recuperative Care is 46 bed days
- Hospitals represented 62% of the referrals to WPC Recuperative Care contract providers, with 1% from Community Clinics, 13% from Shelters, 9% from skilled nursing facilities, and 15% from Other (various community providers)

HOUSING NAVIGATION AND SUSTAINABILITY SERVICES (HNSS)

- 227 unduplicated WPC enrollees received BHS involved HNSS
- 332 unduplicated WPC enrollees received non-BHS involved HNSS
- 141 unduplicated WPC non-BHS enrollees were housed (permanent/scattered) via Orange County Housing Authority, Santa Ana Housing Authority and Anaheim Housing Authority Mainstream and Other vouchers such as VASH, etc.
- 189 unduplicated BHS-involved WPC enrollees were housed (permanent/scattered) via vouchers
- Average length of stay in WPC Housing Navigation and Sustainability Services (non-BHS involved) is 118.52 days

◀ WPC Staff

(Pictured from left to right)

Program Manager: **Nicole LeMaire**

Project leads: **Liz Amantine-Taylor** and **Sharon Boles**

Researcher: **Hang Nguyen**

Senior Public Health Nurse: **Jocelyn Argame**

Staff Specialist: **Louis Garcia**

Retiree: **Melissa Tober** (not pictured)

COLLABORATION

Over the years, the WPC Pilot Program has benefited from the support of staff across multiple HCA services areas, including **Dr. Scott Hardy**, Medical Director from the Employee Health Services team; **Karen Lawson**, a Senior Public Health Nurse from the Medical Safety Net team; and **Alaka Nafday**, Researcher from the Office of Strategy & Special Projects, along with several student interns. Administrative support from Financial Services, Accounting Services, and Procurement and Contract Services has also been invaluable for countless day-to-day operations.

All of these staff – old and new, combined with the leadership of the Orange County Board of Supervisors, former HCA Director Richard Sanchez; former Chiefs of Operations for Medical Health Services, Cheryl Meronk and Denise Fenessey; and former Strategic Projects Manager Melissa Tober, whose vision and leadership over the first four years of the Pilot Program so greatly contributed to the pilot's incredible success – deserve tremendous thanks for being our champions and mentors.

The WPC team also would not have been able to accomplish its mission without the continuous efforts and support of its partners and contract

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OC Health Care Agency AlertHCA

On Wednesday, May 12, 2021, starting at 9 a.m., County of Orange (County) emails and pre-identified cell phones received an alert from AlertHCA. A large number of OC Health Care Agency (HCA) staff did not realize there was an internal communication platform called “AlertHCA.” We hope by the end of this short article, everyone will be aware of it and how important it is to ensure rapid notification.

AlertHCA is the HCA’s emergency alert system. It is for Agency personnel only and not for the public

or other County employees. It can be used for such things as sending an alert that a building has been closed because of damage from an earthquake to a facility needing to evacuate due to a wildfire. During the beginning of the COVID-19 pandemic, we sent out requests for staffing of our Agency Operations Center (AOC) and our warehouse.

All HCA employees, when hired by the County, are added to AlertHCA with their email address. They then receive an invitation to enroll their profile. It is highly encouraged that you enter a cell phone

number and other alternative ways of being contacted. It is also encouraged to enter your work addresses. By having the addresses, we can send out an alert to a specific geographical location.

Our biggest problem is that large majorities of employees do not register at all or when they do register, oftentimes their information is left incomplete. This means if something happens during off-hours, HCA personnel cannot be contacted. A large number of employees cannot check their emails from home. Without an alternative means of receiving alerts, a lot of staff will not receive the alert and vital communications. A good example of this would be a fire in the middle of the night. If a County facility is affected and is going to be closed, an alert can be sent out informing staff of the closure and further directions of what to do. In

Seeing a Dentist is **SAFE D**

The OC Health Care Agency’s (HCA) Local Oral Health Program (LOHP) has responded to a request by the California Department of Public Health (CDPH) Office of Oral Health to promote the need for oral health awareness due to the COVID-19 pandemic. According to the CDPH many people have not been able to see their dentist during the pandemic because dental offices have closed or

have limited access. In response to the CDPH request the LOHP, in partnership with community health centers, has created a video to highlight safety measures implemented in dental offices and to encourage Orange County (OC) residents to visit their dentist. “We wanted to reach out to the community to make people aware that it is important and safe to visit the dentist for their regular exams and

necessary treatments,” said **Jerome Samonte**, Dental Hygienist, LOHP. “This video highlights some of the investments and steps that have been taken to keep patients, staff and the community safe.”

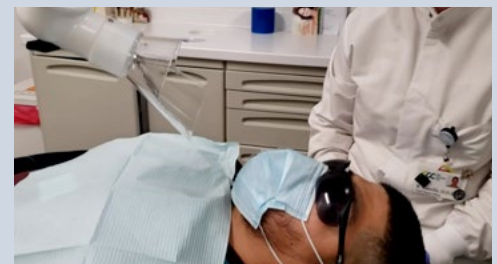
“It is important to remember that oral care is part of our overall health care,” said **Sam Monroy**, Program Supervisor, LOPH. “Delaying treatment can lead to more pain, treatment needs, and higher



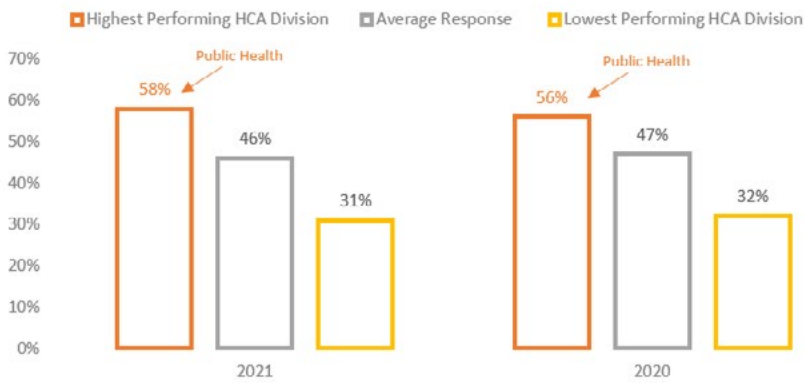
Patient screenings are performed prior to dental visits.



Some dental offices perform Rapid COVID-19 testing which can give results in as little as 15 minutes.



Air cleaners are used to vacuum aerosols.



that example, it could tell everyone to report to a different building to work for the day or to work from home.

In closing, we hope you see the importance of enrolling your profile. If you need to update your information and cannot remember your username or you want to register for the first time, please contact me, Mr. Mike Chiles, by email at mchiles@ochca.com.

Mike Chiles, Program Supervisor II, Emergency Medical Services, Health Emergency Management-Contributor

The above graph shows the percentage of HCA staff who responded to the 2021-second quarter AlertHCA Notification Drill, compared to 2020. The HCA Public Health Services was this quarter's highest performer with a response rate of 58%! The goal is 100%. The average for 2021-second quarter was 46%.

HCA's Nurses Make a Difference

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mobile clinics. "It's been really eye-opening being able to step outside my regular role in foster care. In every aspect of COVID-19, I had the opportunity to partner with so many great, hard-working people and I'm grateful for the experience. So many man-hours have been put into this effort."

Karen Lawson, a Senior Public Health Nurse for Medical Health Services, has spent 20 years at the HCA, starting out at Employee Health where she supported the health needs of our 18,000 County of Orange employees, such as administering flu shots and COVID-19 tests, pre-placement physical exams, assessing health problems for employees who need medical advice, and treating bloodborne pathogen exposures. She now balances roles between Employee Health and Medical Safety Net (MSN), a program that helps covers urgent medical expenses for OC residents who are low income and uninsured. "With MSN, I provide follow-up care and referrals to specialists, warm handoffs to community clinics, as well as outreach calls to clients to get them access to resources like Covered California or Long Term Care," says Karen. "A big challenge with helping the uninsured population is finding specialists to accept them, so we're always hustling. But I really enjoy the variety in my work, learning something new every day. And you can always count on me to give a straight answer without any judgment. That's what we do as nurses."

URING COVID-19

out-of-pocket expenses."

"This video will help move the needle and help reach our goals and overarching objectives for 2025 and Healthy People 2030," said **Tamarra Jones**, DrPH, Division Manager, Health Promotion and Community Planning Division. "Our LOHP partnered with the Orange County Coalition of Community Clinics and a few Federally Quali-

fied Health Centers (UC Irvine Health, St. Joseph Health, Alta-Med, KCS Health Center, Vista Community Health Center, Share Our Selves, Camino Health Center, and Southland Health Center) to create this video."

The video has been submitted to local media and is posted on www.smilehabitsoc.org where you can find more resources for accessing oral health and oral health education information. The video will be used with additional public service announcements that highlight proper dental care at home, benefits of teledentistry for those fearful of returning to the dental office, and oral health resources in the community.



Equipment is sterilized and covered to ensure safety for patients.



ZEST For Health

June is Great Outdoors Month®! It's a great opportunity to encourage and teach children the importance of outside play and how getting out and about can be a part of a healthy lifestyle. Make a plan to get outdoors and add active play to your daily routine. Here are some tips to add more activity to your family's busy schedule;

- **Start small.** Begin by introducing one new activity and adding more when everyone is ready.
- **Turn off the TV!** Instead of a TV show, play an active family game, dance to favorite music or go for a walk.
- **Plan and track your progress.** Let your kids help plan activities and write them down on your family calendar.

For more tips, visit [CalFresh Healthy Living Be Active Page](#).

Don't forget to take a healthy snack with you to keep you energized! This can be as simple as making your own trail mix! Just combine your favorite unsalted nut, cereal and dried fruit. If you're feeling more adventurous, try making this Tropical Fruit and Nut Snack Mix.



Tropical Fruit and Nut Snack Mix

Serves 6

Ingredients:

- | | |
|--|---------------------------------|
| 1 tablespoon Butter | Nonstick Cooking Spray |
| ¼ cup Honey | ½ cup Almonds, sliced |
| 1 teaspoon Almond Extract or Coconut Extract | ¾ cup Dried Tropical Fruit Bits |
| 1 teaspoon Ground Cinnamon | ½ cup Banana Chips |
| 2 cups Old Fashioned Oats | ¼ cup Raisins |

Directions:

1. Preheat oven to 350°F.
2. Melt butter in a medium saucepan. Add honey, almond or coconut extract, and cinnamon; mix well.
3. Stir in oats and transfer to a baking sheet coated with nonstick cooking spray. Spread into a 1-inch thick layer.
4. Bake for 10 minutes, stirring once. Stir in almonds and bake for 5-10 minutes more.
5. Remove from oven and toss with dried fruit. Let cool.

Christine Baun, Public Health Nutritionist II - Contributor

Reducing Food Waste: Patty Stabile, Public Health Nutritionist II - Contributor

Prep Now, Eat Later



Preparing fresh foods soon after shopping makes it easier to serve snacks and make meals later in the week. Prep Now, Eat Later ensures less food waste while saving time, effort, and money.

Helpful Food Prep Tips:

- 1. Right Away:** When you get home from the store, wash, dry, chop, dice, slice and place your fresh food in clear storage containers for snacks and easy cooking.
- 2. Prepare for Freezer Storage:** Prepared fruits and vegetables can be frozen in a single layer on baking sheets and then put into bags, jars or other freezer safe storage containers. Label the containers with the date and contents.
- 3. Each Week:** Cut time spent preparing food each week by batch cooking meals and storing them in the fridge or freezer. For example, bake and freeze chicken breasts or cook and freeze taco meat.



A Look Back on Whole Person Care *continued from page 6*

providers, including the CalOptima managed care plan and network providers, hospitals, community clinics, advocacy agencies, recuperative care services, housing navigation and sustainability services, web-based care coordination platform, community referral network, housing authorities, shelters and internal Agency departments.

The WPC team thanks each and every one involved for their tireless efforts and dedication to our WPC population. Without you, the WPC Pilot Program could not have impacted the lives of approximately 13,000 OC residents struggling with homelessness and other complex issues over the past five years. This sixth and final year of transition is an opportunity for us to reflect on this rewarding experience, our contributions and hard work, and the lives we have changed.

The WPC team now collaborates closely and frequently

with the DHCS and CalOptima to develop a plan for transitioning services under the WPC Pilot Program to California Advancing and Innovating MediCal (CalAIM) effective January 1, 2022. CalAIM is a multi-year initiative by DHCS to improve the quality of life and health outcomes of our population by implementing broad delivery system, program and payment reform across Medi-Cal managed care plans such as Orange County's CalOptima. The major components of CalAIM will build upon the successful outcomes of the WPC Pilot Program as well as other State pilot programs to result in a better quality of life for Medi-Cal members as well as long-term cost savings/avoidance.

here. The range of assignments can be really broad, and it keeps things interesting. I really enjoy collaborating with my team to take on challenging projects/assignments. I also find my work supporting peer specialists on an organizational level very rewarding.”

“Peer Specialists are trained professionals who have experienced a life-changing mental health condition, have taken an active role to regain wellness, and are willing to share those experiences to inspire, educate, and guide others with similar conditions. Our lived-experience is really our unique qualifier, and I have been given opportunities to be in my current position because of it.”

Min says what makes for a good Peer Specialist is their willingness to be open, honest and proud about their peer identity. He says those qualities lead to results. “Recovery happens! I am a true believer in the value of peer support because I have firsthand benefited from it both as someone who has received and provided peer support. I want more people to have a chance to experience peer support, see what it can do for our recovery and I believe those who receive it will also want to give back, because providing peer support strengthens our recovery tremendously, too. That kind of cycle is the vision I have for the mental health consumer community here in Orange County.”

His attitude has only been strengthened during the COVID-19 pandemic. “The past year has been quite challenging working on projects and holding events on virtual platforms. During this time, I am proud of my work in developing and deploying a countywide survey we conducted to learn about the emotional well-being of our residents during the COVID-19 pandemic, for which we received over 10,000 responses. Our

office has not conducted surveys on such a scale before, and it was a great learning experience. Also, this year, I’m proud of my involvement in our annual MHSA community engagement meetings which in other years would have been through in-person meetings. Our office was able to conduct over 20 different community engagement meetings with various consumer and family member stakeholder groups over a virtual platform. Our team worked so hard to make this happen, often meeting with community members/stakeholders in the evenings and I am so proud of what we accomplished! Lastly, I am proud of collaborating with peers and administrators from other counties to help develop series of recommendations to the State Department of Health Care Services for the upcoming implementation of California’s Peer Certification program – which I am really excited about!”

Min also finds challenges when he’s not at work. “I have a passion for the outdoors, especially hiking. I love going to the Mount Baldy area for hiking in the winter, as the snow makes the hikes much more challenging, yet more fun! Another passion of mine is food – people who work with me know how much I love to talk about all different kinds of cuisines and dishes. Plus, I really love learning about another culture through food!”

cchealth
CARE AGENCY

VISION
Quality health for all.

MISSION
In partnership with the community, deliver sustainable and responsive services that promote population health and equity.

GOALS
Promote quality, equity, and value. Ensure the HCA's sustainability. Offer relevant services to the community.

Connect with Us

The **What's Up** newsletter is created and distributed monthly by HCA Communications. We welcome your ideas, input and/or insight into HCA people and programs. To contribute, comment or connect please email us at hacomm@ochca.com or call (714) 834-2178. Thank you!