

Kern Health Equity Partnership's

Kern County Health Equity Plan

January 2024- December 2026

Presented to Kern County Board of Supervisors on January 09, 2024

Background:

Kern County has over 900,000 residents of diverse backgrounds, life experiences, and demographics. Kern County also spans 8,000 square miles and consists of diverse geographies and communities with varied levels of access to health services.

Kern County Public Health set forth to identify challenges and barriers that Kern County residents experience to identify ways to close gaps and address community needs along with partners *Adventist Health, Anthem Blue Cross, Bakersfield American Indian Health Project, Bakersfield Memorial Hospital, Community Action Partnership of Kern, Kern Behavioral Health and Recovery Services, Kern Community College District, Kern County Network for Children, Kern County Superintendent of Schools, Kern Health Systems, United Way of Central Eastern California*, and others. In July of 2023, the Kern Health Equity Partnership was established, and the strategic planning series was organized to guide this process.

Kern County Public Health engaged over 200 community members and partners, and convened over 86 partners throughout Kern County through the 6 month-long strategic planning series. These sessions aimed to assess challenges that exist within organizations in serving families throughout Kern County to identify areas of focus listed within this 3-year plan. The goals and objectives are based upon the SMARTIE framework by which they must be Specific, Measurable, Action oriented, Relevant, Time bound, Inclusive, and Equitable. This process included listing organizations throughout the communities of Kern, organizing them into categories to identify domains, and lastly, listing challenges that exist within each domain.

The domains are:

- **Access to Care:** *Lack of Providers, Distance/Geography, and Transportation*
- **Education/Health Literacy:** Literacy Levels, Cultural, and Community Health Workers/Promotoras/Social Service Providers
- **Socio-economic Status/Poverty:** Living Wage, Economic Workforce Development, and Systemic Barriers

Over 130 potential activities were identified in this process that were grouped and refined within the goals and objectives in this plan. This work requires systemic change and partnership among all local health agencies. While some objectives may be specific to community groups and geographic areas, the goals and objectives are designed to establish a blueprint that can be replicated in communities experiencing similar needs. Thus, this plan aims to establish a framework of work that can be replicated in communities throughout all of Kern County.

Goals and Objectives:

Access to Care

Goal 1:

By December 31, 2026, the Kern Health Equity Partnership will improve the access to health care in rural communities by addressing geographical barriers and lack of providers for Kern County communities who are underserved and challenged with accessing service providers.

Objective 1: Lack of Providers

By December 31, 2024, the Kern Health Equity Partnership will conduct an initial gap analysis of providers to identify communities of California City/Mojave that do not have provider adequacy to inform the development of strategies that address lack of providers in communities with geographical barriers.

Objective 2: Distance/ Geography

By December 31, 2026, the Kern Health Equity Partnership will create telehealth infrastructure to co-locate health services in at least three (3) non-traditional care settings, such as churches, school districts, senior centers, libraries, community rooms, or veteran's halls, to better serve families experiencing geographical barriers.

Objective 3: Transportation

By March 31, 2025, the Kern Health Equity Partnership will conduct an initial gap analysis of transportation service providers that are designated to health care services and develop strategies that will strengthen transportation services that are high-capacity ADA compliant vehicles, equipped with car seat, in rural areas of Kern County communities.

Education/ Health Literacy

Goal 2:

By December 31, 2026, the Kern Health Equity Partnership will increase opportunities for health literacy by addressing literacy levels, cultural differences, and supporting community health workers, promotoras, and social service providers for the Hispanic community and all communities impacted by Social Determinants of Health.

Objective 1: Literacy Levels

By March 31, 2025, the Kern Health Equity Partnership will host sessions aimed to obtain community input for at least five (5) different geographic communities, to identify health topics that will increase education and literacy for residents impacted by Social Determinants of Health.

Objective 2: Cultural

By March 31, 2025, the Kern Health Equity Partnership will create at least two (2) paths for agencies to be trained and commit to Diversity, Equity, Inclusion and Belonging (DEIB) practices aimed to support belonging, acceptance, and build awareness of cultural diversity of the communities of Kern.

Objective 3: Community Health Workers/Promotoras/Social Service Providers

By December 31, 2026, the Kern Health Equity Partnership will create at least three (3) opportunities for in-person community conversations and trainings between health care agencies, clinical providers, community health workers, promotoras, and social service providers in Kern County aimed to understand community experiences, share universal best practices, and support service delivery.

Socio-Economic Status/ Poverty

Goal 3:

By December 31, 2026, the Kern Health Equity Partnership will contribute to the improved socio-economic status for rural communities and low-income households by conducting a gap analysis, creating pathways to employment opportunities, and advocating with legislative officials at the local and state level.

Objective 1: Living Wage

By December 31, 2026, the Kern Health Equity Partnership will partner to create at least two (2) pathways to quality jobs that address the special needs of rural communities.

Objective 2: Economic & Workforce Development

By March 31, 2025, the Kern Health Equity Partnership will create at least one (1) gap analysis and develop strategies around workforce opportunities to support rural communities.

Objective 3: Systemic Barriers

By June 30, 2025, the Kern Health Equity Partnership will advocate for equitable changes in policies and practices to prioritize resources for workforce recruitment of low-income households by engaging with at least three (3) elected and appointed officials at the local and state level.