**California Directors of Public Health Nursing**

Strategic Plan
FY 2017-2020

Last updated: May 27,2018

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# Letter from the 2016-2017 DPHN Executive Committee

Dear Colleagues,

It is with great pleasure and enthusiasm that we present the California Directors of Public Health Nursing (DPHN) Strategic Plan for 2017-2020, which was developed by and for Directors of Public Health Nursing in the 61 public health jurisdictions in California. This strategic plan builds upon the work of the DPHN strategic plan initiated in the fall of 2009, continuing to move us toward achievement of our vision of healthy people in healthy communities through excellence in public health nursing.

DPHN’s mission is to advance the practice of public health through innovative and effective public health nursing leadership. We encourage each of you to participate actively in the implementation of the goals and objectives listed below.

Working together and with our partners, we will continue to increase our positive impact on the contribution nursing makes to public health in California.

Sincerely,

DPHN Executive Committee

2016-2017

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| **EXECUTIVE COMMITTEE 2016-2017** |
| **Past-President**Megan Steffy, MSN RN PHNVentura County | **President**  Tina Venable, RN PHNPlumas County | **President-Elect** Rose Mary Rahn, PHNFresno County |
| **South** Bruce Coon, MSN, RN, PHNSan Diego County  | **Central**Cathy Volpa, RN PHNTulare County |
| **Bay**  Laura Brunetto, DNP MSN RNSanta Clara County | **North**Cindy Wilson, MSN RN PHN Nevada County |
| **Secretary**Cindy Watson, MSN RN PHNSolano County | **Secretary**Pamela Dudley, MSN PHN San Luis Obispo County |

# Introduction

California Directors of Public Health Nursing (DPHN) is a statewide organization of Nursing Directors from the 61 public health jurisdictions in California, established in 1952. Due to the large geographic spread of California, DPHN is organizationally divided into four sub-regions: North, Central, Bay and South. Of the 61 jurisdictions, 22 are in the Northern region, 15 are in the Central region, 13 are in the Bay region, and 11 are in the Southern region. The sub-regions collaborate with one another to achieve common goals and support achievement of DPHN’s overall strategic plan. The sub-regions meet regularly (typically monthly) and the four regions meet together twice a year.

## The Role of a Director of Public Health Nursing

The Director of Public Health Nursing is an executive level position in a Local Health Department. The Director of Public Health Nursing is recognized as integral to the organization and mandated in the California Code of Regulations and the California Health and Safety Code (California Code of Regulations, Title 17. Public Health, Division 1. State Department of Health Services, Chapter 3. Local Health Service, Subchapter 1. Standards for State Aid for Local Health Administration, Article 3. Personnel, section 1301. Director of Public Health Nursing).

Public health nursing is the “practice of promoting and protecting the health of populations using knowledge from nursing, social, and public health sciences” (APHA PHN Section, 2013). The Director of Public Health Nursing plans, organizes, evaluates, and directs nursing staffs in public health jurisdictions. The Director of Public Health Nursing provides advocacy, direction, and support to all nurses regarding nursing scope of practice, professional development, public health emergency preparedness, communicable disease response, and establishes and maintains strategies and processes for achieving population health improvement.

## About California

According to the US Census, California is the most populous state in the Nation with over 38 million residents. California has a diverse population, with over 38% Hispanic, 14% Asian, 7% African American, and 39% White (non-Hispanic). Over 27% of California’s residents were foreign born and over 43% speak a language other than English at home. California’s land area encompasses over 155 thousand square miles, finding itself the third largest state in terms of land area, only behind Alaska and Texas. California’s population is approximately 94% urban and 6% rural, including 7 of the 10 most densely populated urbanized areas in the nation (US Census, 2013).

With such a large and diverse population in California, it is important to assure that the nursing workforce is keeping pace. California requires that any registered nurse (RN) working as a public health nurse be specifically certified by the California Board of Registered Nursing. There are over 390,000 RNs with active licenses in California, 54,000 whom also have a Public Health Nurse certification. Very few—less than 4%—of California RNs work in Community/Public Health settings (Board of Registered Nursing, 2013). Therefore, it is imperative that DPHN identifies priority goals to assure that California’s public health nursing workforce has the leadership, resources, skills and competencies to build a healthier California.

# Vision, Mission and Values

## Vision

Healthy people in healthy communities through excellence in public health nursing.

## Mission

To advance the practice of public health through innovative and effective public health nursing leadership.

## Values

* ***Health Equity:***DPHN promotes the attainment of the highest level of health for all people.
* ***Leadership:*** DPHN stands at the forefront to innovate and improve the effectiveness of nursing services and practice within public health.
* ***Quality:*** DPHN promotes use of evidence to inform practice in order assure provision of the highest quality nursing services within public health jurisdictions across the state, and evaluates its effectiveness.
* ***Collaboration:*** DPHN collaborates with organizations at the local, state and national level on matters relating to public health and public health nursing.
* ***Advocacy:*** DPHN advocates for the needs of public health and public health nursing through education and policy development.
* ***Diverse and Competent Workforce:***DPHN develops and assures knowledge, behaviors, and skills for a competent public health nursing workforce that reflects the diversity of the community it serves.

# Strategic Priorities and Goals

Priority Area 1: Health Equity—Overview
Lead: Southern Region

According to the Centers for Disease Control and Prevention (CDC), Health equity is “achieved when every person has the opportunity to ‘attain his or her full health potential’ and no one is disadvantaged from achieving this potential because of social position or other socially determined circumstances” (Brennan Ramirez, 2008). DPHN believes that the role of the nurse in public health is critical in achieving health equity across California cities and counties. Nursing leaders in public health are positioned to design and implement interventions that are known to promote health equity through reducing and/or eliminating health disparities and achieving optimal health for all Californians. DPHN addresses health equity by creating opportunities to build knowledge, skills, and resources for California’s public health nursing leadership.

### GOAL 1.1: Increase Public Health Nurse’s ability to understand and influence the social determinants of health that contribute to health inequity for the population they serve.

* + 1. Develop and implement an action plan.

| Priority Area 1: Health Equity—Action Plan **Lead: Southern Region** |
| --- |
| **GOALS** | **OBJECTIVES** | **ACTIVITIES** | **UPDATE** | **STATUS** |
| Increase Public Health Nurse’s ability to understand and influence the social determinants of health that contribute to health inequity for the population they serve.    | Develop and implement an action plan.  | Throughout this Strat Plan timeframe, participate in the CDPH Office of Health Equity Advisory Committee to share resources & best practices to be utilized in the development of the plan. | 1.1.1.1.1DPHN Representative continues to attend bi-monthly Health Equity Advisory Committee meetings. DPHN representative sends out Bi-monthly Health Equity Newsletter to all DPHN members. | **ON TARGET** |
| By 09/30/18, develop a document that can serve as an addendum to LHJs existing/established Patient/Family Assessment tool Identifying Social Determinants of Health. | 1.1.1.2.1Workgroup is collecting examples of tools used in representative counties. Group will compare/contrast and use input to create the addendum. | **ON TARGET** |
| By 03/31/19, develop a set of guidelines for the use of the addendum to existing/established Patient/Family Tool. | 1.1.1.3.1Guidelines will be developed after assessment guidelines document is finalized. | **Pending**  |
| 1.1.4.1By 09/30/19, develop recommendations for training new PH staff regarding the Social Determinants of Health. | 1.1.1.4.1Recommendations will be developed after assessment addendum is finalized. | **Pending**  |

Priority Area 2: Unified Message: The Value and Role of a PHN—Overview
**Lead: Bay Region**

In light of the current political climate, access to clinical care will change in a post Affordable Care Act (ACA) environment. The demand for Public Health Nurses (PHNs) will continue to grow in order to support prevention-focused interventions, especially for those with chronic conditions and the increasing older adult population. The health care needs and the demographics of the country are changing. US health outcomes are among the worst when compared to similar nations. US life expectancy is near the bottom in rankings compared to similar countries. The US infant mortality rates are the highest among these countries, and are worse than some less developed countries at 5.87 deaths per 1,000 live births in 2013 (compared to 4.63in Cuba). The Center for Communicable Disease reports that while racial/ethnic gaps in outcomes have been narrowing in many measurements, an evaluation of 10 key indicators shows a persistent gap in outcomes based on race/ethnicity. Although the CDC notes progress in many areas, it also notes that disparities of some kind remain in all 10 areas ranging from infant mortality to life expectancy and vaccination rates.

The foundation of the work of any PHN is to protect and promote the health and well-being of populations. Implementation of evidenced based methods and best practice approaches that have consistently shown desirable results in achieving improvements in health status and nursing practice are a priority for DPHN. As such, DPHN has embarked on an effort to better articulate the scope and practice and value of the work of the public health nurse in California.

### GOAL 2.1: To have a unifying message of the role and value of Public Health Nurses in our Community.

* + 1. Communicate the impact of public health nurses.
		2. Continue to review and highlight public health nurse best practices ongoing

| Priority Area 2: Best Practices—Action Plan **Lead: Bay Region** |
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| **GOALS** | **OBJECTIVES** | **ACTIVITIES** | **UPDATE** | **STATUS** |
| To have a unifying message of the role and value of Public Health Nurses in our Community.  | Communicate the impact of public health nurses. | By April 2017, review The High Achieving Governmental Department in 2020 as the Chief Health Strategist and the APHN White Paper on the Value of Public Health Nursing and APHA Paper and CCLHO documents. |  |  |
| By April 2017, explore options to work with consultants/facilitators to facilitate project. |  | **Completed**  |
| By June 2017, conduct facilitated meeting. |  | **Completed** |
| By September 2017, present draft of products in development at Fall conference. |  | **Completed** |
| 2.1.1.5 By February 2018, test message with a few counties. |  | **Completed** |
| 2.1.1.6By May 2018, present finalize draft to Executive Committee |  | **On Target** |
| 2.1.1.7By September 2018, present final product within our communities.  |  | **On Target** |
| 2.2Continue to review and highlight public health nurse best practices ongoing | 2.2.1Twice annually, request Counties submit any best practices that meet criteria. |  | **Ongoing** |
| 2.2.2As Received, BAND will review submitted practices and identify recommendations. |  | **Ongoing** |
| 2.2.3As Received, present recommendations at Fall Conference. |  | **Ongoing** |
| 2.2.4By October of year submitted, post approved best practices on DPHN website. |  | **Ongoing** |

Priority Area 3: Workforce—Overview
**Lead: North Region**

Assuring a competent and effective nursing workforce in public health is a top priority for DPHN. The current and future nursing workforce must be adequately prepared for their role in order to fully contribute to achieving optimal health outcomes for Californians. Effective recruitment and retention of highly qualified and diverse nurses in public health continues to be an important variable. Through achievement of this strategic plan, DPHN will develop a ‘PH Nursing Workforce Toolkit’ to communicate the role of public health nursing to support recruitment efforts.

### GOAL 3.1: Promote hiring of a qualified and diverse public health nursing workforce.

* + 1. Conduct a survey of DPHN membership related to current strategies being used to recruit highly qualified nurses into public health settings.
		2. Develop a Speakers Toolkit to be used by local public health jurisdictions to communicate the role of public health nursing to support recruitment efforts.

### GOAL 3.2: Increase recruitment and retention of PHNs throughout California

3.2.1 Identify perceived barriers to recruitment and retention of PHNs from the perspective of DPHNs

3.2.2 Identify perceived barriers to recruitment and retention of PHNs from the perspective of currently working PHNs

3.2.3 Develop recommendations to increase recruitment and retention of PHNs

3.2.4 Develop dissemination of recruitment and retention recommendations

| Priority Area 3: Workforce Development—Action Plan**Lead: Central and North Region** |
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| **GOALS** | **OBJECTIVES** | **ACTIVITIES** | **UPDATE** | **STATUS** |
| 3.1 - **Central**Improve wellness of DPHN members  | 3.1.1Assist and encourage DPHN members in pursuing wellness for themselves and for their workforce | 3.1.1.1DPHN Conference in Fall 2017 to focus on wellness | September 2017 | **COMPLETED** |
| 3.1.1.2Provide tools to support day to day workplace wellness activities by September 2017. | September 2017 | **COMPLETED** |
| 3.1.1.3Collect best practices in employee wellness from each LHJ, collate, and post on DPHN website as a toolkit by December 30, 2017. | Complete by Quarter 2 of 2017/18 | **ON TARGET** |
| 3.1.1.4Quarterly, develop and send wellness messages to DPHN Membership by December 30, 2017. | Complete by Quarter 2 of 2017/18 | **ON TARGET** |
| 3.1.1.5Develop and implement one wellness activity at each DPHN conference by Spring 2018.  | Complete Spring of 2017/18 | **ON TARGET** |
| 3.1.1.6Offer reframing partners for interested DPHN Members to provide mutual support by Spring 2018. | Complete Spring of 2017/18 | **ON TARGET** |
| GOAL 3.2: **North** Increase recruitment and retention of PHNs throughout California | 3.2.1 Identify perceived barriers to recruitment and retention of PHNs from the perspective of DPHNs. | 3.2.1.1Survey DPHNs utilizing Sherylin Taylor’s RWJF project survey by March 2017. | March 2017 | **Completed** |
| 3.2.1.2Disseminate draft results to DPHNs by March 2017. | March 2017 | **Completed** |
| 3.2.1.3Disseminate final result to DPHNs and others by October 2017. *(target date revised)* | March 2018 | **Completed** |
| 3.2.1.4Review and discuss survey results by December 2017.*(target date revised)* | March 2018 | **Completed** |
|  | 3.2.2 Identify perceived barriers to recruitment and retention of PHNs from the perspective of currently working PHNs. | 3.2.2.1Survey PHNs utilizing Sherylin Taylor’s RWJF project survey by May 2017. | March 2018 | **Completed** |
| 3.2.2.2Disseminate results to DPHNs by March 2018.*(target date revised)* | March 2018 | **Completed** |
| 3.2.2.3Review and discuss survey results by March 2019.*(target date revised)* | March 2018 | **Completed** |
|  | 3.2.3 Develop recommendations to increase recruitment and retention of PHNs | 3.2.3.1Utilize data from surveys and identify at least 5 recommendations by March 2019. |  | **On Target** |
| 3.2.3.2Prepare and present recommendations and solicit input from DPHNs by September 2019 |  | **On Target** |
| 3.2.3.3Develop “2-sheet” handout with recommendations by September 2019. |  | **On Target** |
| 3.2.3.4Develop PowerPoint presentation with recommendations by September 2019. |  | **On Target** |
|  | 3.2.4 Disseminate recruitment and retention recommendations.  | 3.2.4.1Identify partner organizations by September 2019. |  | **On Target** |
| 3.2.4.2Make at least 10 presentations at conferences, trainings, and meetings by September 2020. |  | **On Target** |

Priority Area 4: Leadership—Overview
**Leads: Northern and Bay Region**

Directors of Public Health Nursing (DPHN) works to build a membership with strong leadership and a strong voice statewide. To that end, a purpose statement will be developed and activities identified to facilitate cohesiveness within DPHN. Through active recruitment of Associate Members, DPHN builds partnerships with others who possess diverse skill sets, hence promoting a strong voice throughout the state and the nation.

Laws in the state of California mandate that Public Health Departments have on staff a Director of Public Health Nursing who also supervises the Public Health Nursing staff. A recent review of Bay Area public health directors of nursing job descriptions revealed variation in the role and responsibilities of the director of nursing coupled with the reality that many vacant directors of nursing positions across the state remained unfilled. The creation of a platform statement and a standard public health director of nursing job description would draw attention to the legal mandates, communicate the characteristics of the role, define best practices in education, knowledge, and skills, and certify the quality of the position.

### GOAL 4.1: Build robust membership in DPHN (Northern Region)

* + 1. Develop a DPHN-Associate recruitment and retention plan.
		2. Build and develop a plan for identifying, welcoming and mentoring new California Directors of Public Health Nursing.

### GOAL 4.2: Communicate and clarify the role and responsibilities of the public health director of nursing (Bay Region)

* + 1. Finalize a job description (based on initial work by Bay Region), to include the minimum statutory requirements for a director of public health nursing.
		2. Develop and disseminate a platform statement on the public health director of nursing’s roles and responsibilites.

| Priority Area 4: Leadership—Action Plan**Leads: Northern Region and Bay Region** |
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| **GOALS** | **OBJECTIVES** | **ACTIVITIES** | **UPDATE** | **STATUS** |
| 4.1.Build a robust membership in DPHN.(North Region) | 4.1.1.Develop a DPHN-Associate recruitment and retention plan.  | 4.1.1.1By 6/30/2015, review associate member list and consider other potential members to outreach to and invite to participate.  | 3/4/15: Survey is developed and will be developed in Survey Monkey. Will be sent9/23/14: considering ways to connect more closely with BSN and MSN Schools of Nursing to promote DPHN. Plan will be to solicit contacts from membership and then survey lead contacts to get input on how best to promote DPHN. | **COMPLETED** |
| 4.1.1.2By 6/30/2016, write up guidelines for associate members on benefits and values of DPHN membership.  | 3/3/16: Survey sent to potential associate members; letter drafted for potential members with benefits highlighted, will present to Exec 3/3/16; listserve developed and will be shared with Exec 3/3/16 | **ON TARGET** |
| 4.1.2Build and develop a plan for identifying, welcoming and mentoring new California Directors of Public Health Nursing. | 4.1.2.1By 6/30/2015, review new member packet on share drive and update as needed. |  3/4/15: reviewed and made preliminary changes. Will make final electronic changes and post on sky drive. | **COMPLETED** |
| 4.1.2.2By 6/30/2015, develop a welcome packet and letter. | 3/4/15: In progress.9/17/15 – Template for welcoming new members developed and ready for use | **COMPLETED** |
| 4.1.2.3By 9/30/2015, identify a mentor from each region to welcome and support new members in the region. | 3/4/15: two people from each region will be identified to serve as mentors. Plan in progress.9/17/15 – Some responsibilities taken by Regional Reps, need others to share their experience and expertise3/3/16: Each region to determine best process to identify second mentor as there is great diversity in regions; North has begun process through regional meetings | **COMPLETED**  |

| Priority Area 4: Leadership—Action Plan**Leads: Northern Region and Bay Region** |
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| **GOALS** | **OBJECTIVES** | **ACTIVITIES** | **UPDATE** | **STATUS** |
| 4.2Communicate and clarify the role and responsibilities of the Director of Public Health Nursing (Bay Region) | 4.2.1Finalize a job description to include the minimum statutory requirements and PHN core competencies for a director of public health nursing. | 4.2.1.1By 12/31/13, collect and review Bay Region DPHN job descriptions to create common and non-common elements. | 9/23/14: Bay region met and completed the comparative analysis of the various job descriptions. | **COMPLETED** |
| 4.2.1.2By 6/30/14, research legal mandate for DPHN requirements and PHN Core Competencies for knowledge and skills to include in job description.  | 9/23/14: Bay region researched legal mandates and core competencies. | **COMPLETED** |
| 4.2.1.3By 8/31/14, present draft of updated job description to Executive Committee for review and comment. | 9/23/14: Exec Committee reviewed the draft at the August exec committee meeting. | **COMPLETED** |
| 4.2.1.4By 9/30/14, present updated job description to members at Fall Conference for review and comment. | 9/23/14: Job description placed in Fall Conference packet; Membership reviewed draft job description at Fall Conference Business Meeting on 9/23/14. | **COMPLETED** |
| 4.2.1.5By 10/31/14, submit revised DPHN job description to Northern Regional Reps for final development. | 3/4/15: Bay Area continues to edit the document and submitting to Northern Region today.9/23/14: Submission of revised document to Northern Regional Representative pending Bay Region’s inclusion of membership comments from Fall Conference 2014. | **COMPLETED** |
| 4.2.1.6By 11/30/14, present final draft of the job description to Executive Committee for review and approval. |  | **ON TARGET** |
| 4.2.1.7By 12/31/14, distribute final job descriptions to membership by 12/31/14. |  | **ON TARGET** |
| 4.2.2Develop and disseminate a platform statement on the Public Health Nursing Director’s role and responsibilites. | 4.2.2.1By 6/30/15, create platform statement and present to Executive Committee for review and comment at the 2/2015 Exec Committee meeting.*(target date revised)* | 3/4/15: Bay regions developed talking points to support Northern Region in developing platform state.9/23/14: Bay region meeting hosted in Santa Clara County. By 1/15/15, survey BAND members to provide 3 reasons for why having a standardized DPHN job description is a benefit to PHN. | **ON TARGET**  |
| 4.2.2.2By 3/31/15, present platform statement to members at Spring Conference for review and comment. |  | **ON TARGET** |
| 4.2.2.3By 4/30/15, present updated draft platform statement to Northern Region for final development. | 9/23/14: Submission of revised document to Northern Regional Representative pending Bay Region’s inclusion of membership comments from Spring Conference 2015. | **ON TARGET** |

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# California Public Health Jurisdictions (City and County)

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| Northern RegionButte CountyColusa CountyDel Norte CountyEldorado CountyGlenn CountyHumboldt CountyLake CountyLassen CountyMendocino CountyModoc CountyNevada CountyPlacer CountyPlumas CountySacramento CountyShasta CountySierra CountySiskiyou CountySutter CountyTehama CountyTrinity CountyYolo CountyYuba CountySouthern RegionImperial CountyInyo CountyLong Beach CityLos Angeles CountyOrange CountyPasadena CityRiverside CountySan Bernardino CountySan Diego CountySanta Barbara CountyVentura County | Central RegionAlpine CountyAmador CountyCalaveras CountyFresno CountyKern CountyKings CountyMadera CountyMariposa CountyMerced CountyMono CountySan Joaquin CountySan Luis Obispo CountyStanislaus CountyTulare CountyTuolumne CountyBay RegionAlameda CountyBerkeley CityContra Costa CountyMarin CountyMonterey CountyNapa CountySan Benito CountySan Francisco CountySan Mateo CountySanta Clara CountySanta Cruz CountySolano CountySonoma County |

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