ASSESSING THE COMMUNITY'S NEEDS

A TRIENNIAL REPORT ON THE

SAN FERNANDO AND SANTA CLARITA VALLEYS

2004

SAN FERNANDO VALLEY / SANTA CLARITA VALLEY
TRIENNIAL COMMUNITY NEEDS ASSESSMENT
2004

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TRIENNIAL COMMUNITY NEEDS ASSESSMENT

I.   INTRODUCTION

Over two million people live in the San Fernando and Santa Clarita Valleys. The social, cultural, health, and economic status of this population reflects the wide diversity of a region that covers over 700 square miles, thirty-six cities, and sixty-five zip codes. Together, these areas compose Service Planning Area 2 (SPA-2). In the San Fernando Valley, SPA-2 extends from Sylmar/Tujunga in the north, Agoura Hills/Calabasas to the west, Glendale/Burbank to the east, and Studio City/Sherman Oaks/Encino/Tarzana to the south. Bordering the San Fernando Valley to the north, the Santa Clarita Valley includes the communities of Newhall, Saugus, Valencia, Canyon Country, Stevenson Ranch, and Castaic.

The Community Needs Assessment for Service Planning Area 2 represents the collaborative effort of over sixty organizations and community stakeholders, including: hospitals, clinics, schools, churches, social service agencies, government agencies, elected officials, and other community stakeholders. This evaluation represents the third collaborative project completed with the cooperation of not-for-profit and public hospitals within SPA-2. Since publication of the first cooperative research in June 1997, the number of organizations, institutions, and groups participating in this triennial study has dramatically increased.

II. OVERVIEW

The community needs assessment for 2004 applied a new methodology of managing and analyzing the date collected to ensure implementation of projects in SPA-2 that identified and answered priority needs effectively. Developed by the National Association of City and County Health Officials and the Centers for Disease Control, Mobilizing for Action Through Planning and Partnerships (MAPP), employs a community-wide strategic planning tool for improving community health. This process allowed for a more in-depth review and analysis of some of the critical health issues facing SPA-2.

Careful analysis of primary and secondary data determined the priority issues confronting communities within the San Fernando and Santa Clarita Valleys. Statistics, when possible, provide detailed information by specific zip code or individual communities within each valley. Comparisons of the priority issues and statistics collected from the assessment completed three years ago provided key indicators for changes, if any, made in meeting the needs of individual communities at that time. Analysis on key studies and assessments completed on SPA-2 identified critical issues and priorities focusing on specific areas. In addition, this community needs assessment implemented a more intensive means of primary date collection. Students from California State University, Northridge conducted phone and in-person interviews to collect information on the priority needs and issues in the community. With this process, more detailed information on the priority issues could be obtained as compared to previous needs assessments which relied only on written surveys as a primary data collection tool.

As with previous community needs assessment projects, the research in assessing community priorities relied on existing studies and data sources, where available; in addition to, the expertise and resources of each participating organization on the committee. The primary and secondary data collected for the current assessment recognized five significant groups within the community. These groups were defined as:

- Children (age 0-17)
- Adults (age 18-64)
- Seniors (age 65+)
- Poor and Medically Indigent
- Special Needs Populations

With this information, participating organizations can support collaborative projects and program development activities that serve their own communities and enrich the lives of all individuals within the San Fernando and Santa Clarita Valleys.

III.   SCOPE OF THE PROJECT

This community needs assessment provides organizations, institutions, social service agencies, government offices, and individual communities with an overview of the San Fernando and Santa Clarity Valleys that compromise SPA-2. It serves as a chronology and index of the health needs and issues prevalent among specific population groups. In addition, the report provides a demographic study that highlights some of the similarities and differences between these two neighboring Valleys.

Similar to previous assessments, the intent of the current project first focused on existing data on the San Fernando and Santa Clarita Valleys. The missing and incomplete data became the impetus for research conducted on primary sources through phone and in-person interviews. These interviews supplemented secondary data and provided missing or unavailable information. The secondary data sources used for the 2004 Community Needs Assessment project included:

- Los Angeles County Department of Health Services Health Survey, 2002-2003
- Los Angeles County Department of Health Services Emergency Medical Services Statistics, 1997 to 2003
- Los Angeles County Department of Mental Health Data
- United States Bureau of the Census Data
- Vital Statistics from the Los Angeles County Department of Health Services
- Los Angeles Unified School District
- California Center for Public Health Advocacy
- United Way of Greater Los Angeles State of the County Report, 2003
- Claritas Demographic Information, 2002
- Office of Statewide Health Planning and Development Hospital Inpatient Discharge Data, 2002
- Office of Statewide Health Planning and Development Long Term Care Data 2002
- Office of Statewide Health Planning and Development Primary Care Clinic Data 2002
- Assessing the Community Needs, A Report on the San Fernando and Santa Clarita Valleys, 2001
- Hospital Emergency Department Principal Diagnosis Data, 2003
- State of California Department of Health Services Vital Statistic Data, 2002
- Valley Care Community Consortium Transportation Study, 2003
- Alzheimer's Association San Fernando Valley Chapter Study, 2002

IV.   COMMUNITY NEEDS ASSESSMENT PARTNERS & PARTICIPATING ORGANIZATIONS

The participation and cooperation of the not-for-profit private and public hospitals, in addition to the many organizations, groups, and institutions made this project possible. Each of these hospitals and organizations provide unique and invaluable services in the community. Some organizations assumed the responsibility of overseeing the development and completion of this project by participating on the Community Benefits Subcommittee of the Valley Care Community Consortium. These organizations included.

Hospitals that collaborated on the 2004 Community Needs Assessment:

- ◆ Glendale Memorial Hospital and Health Center
- ◆ Henry Mayo Newhall Memorial Hospital
- ◆ Kaiser Foundation Hospital, Panorama City
- ◆ Kaiser Foundation Hospital, Woodland Hills
- ◆ Mission Community Hospital
- ◆ Northridge Hospital Medical Center, Roscoe
- ◆ Northridge Hospital Medical Center, Sherman Way

- ◆ Olive View-UCLA Medical Center
- ◆ Providence Holy Cross Medical Center
- ◆ Providence Saint Joseph Medical Center
- ◆ Sherman Oaks Hospital and Health Center
- ◆ Valley Presbyterian Hospital
- ◆ ValleyCare Olive View/UCLA Medical Center
- ◆ Verdugo Hills Hospital

Other organizations assisting with the development and completion of the 2004 Community Needs Assessment included:

- ◆ ACMS Inc.
- ◆ Alzheimer's Association – San Fernando Valley Chapter
- ◆ American Cancer Society, SFV Unit
- ◆ American Lung Association of L.A. County
- ◆ Assemblywoman Cindy Montanez' Office
- ◆ Bet Tzedek Legal Services
- ◆ Community Clinic Association of Los Angeles County
- ◆ City of Los Angeles, Department of Aging
- ◆ Children's Planning Council -SPA 2 Council
- ◆ Cri-Help, Inc.
- ◆ California State University, Northridge
- ◆ California Women's Commission on Addictions
- ◆ Department of Aging LA
- ◆ Department of Children and Family Services
- ◆ L.A. County DHS, Maternal Child Adolescent Health

- ◆ L.A. County DHS, Office of Planning
- ◆ Department of Public Social Services
- ◆ El Proyecto Del Barrio
- ◆ Elder Law Offices of MA Karasov
- ◆ Family Care Healthy Kids
- ◆ Health Care Association of Southern California
- ◆ Healthy Homes LA
- ◆ Healthy Homes Collaborative
- ◆ Kaiser Permanente Public Affairs Department
- ◆ Kid's Community Clinic of Burbank
- ◆ L.A. County Department of Mental Health
- ◆ L.A. County Department of Health Services
- ◆ L.A. Care
- ◆ LAUF/FCHK/VEDC
- ◆ L.A. Unified School District A

- L.A. Unified School District B
- L.A. Unified School District - CHAMP
- Meet Each Need with Dignity (MEND)
- ValleyCare MidValley Comprehensive Health Center
- Neighborhood Legal Services
- Neighborhood Legal Services Health Consumer Center
- Northeast Valley Healthcare Corporation
- NEVHC, Homeless Program
- North Valley Family YMCA
- ONE Generation
- PAC/LAC
- Pacoima Beautiful
- Partners in Care Foundation
- Phoenix House
- Project GRAD Los Angeles
- SPA-2 Public Health Office
- SSG – Census Information Center
- Tarzana Treatment Center
- Third Supervisoral District- L.A. County Board of Supervisors
- Tierra del Sol Foundation
- Urban Education Partnership
- Valley Community Clinic
- Valley Care Community Consortium
- Valley Interfaith Council
- Valley Economic Development Center
- Youth for Positive Change

V.   ASSET MAPPING

To identify and apply current resources to try and address some of the priority needs and issues within a community, an asset mapping survey (see the appendix for a copy of the document) was distributed to organizations and community stakeholders within SPA-2. These organizations, in turn, distributed the worksheets to associate agencies with which they maintain a working relationship for them to identify their programs and services. There were 118 programs represented in this asset mapping exercise.

As a result, this exercise provided valuable information that organizations could utilize for collaborations with other institutions providing similar programs, complementary services, or addressing analogous populations.

The following organizations participated in the asset mapping exercise:

◆ Advocates for Cultural Talk at CSUN
◆ Alzheimer's Association
◆ American Red Cross
◆ Animal Regulation of North Hollywood
◆ Best Friends Animal Sanctuary
◆ Bet Tzedek Legal Services
◆ Blue Cross of California, Community Resource Center
◆ Boys and Girls Club of the San Fernando Valley
◆ California Family Counseling Center
◆ California Health Collaborative
◆ Canoga Park/West Hills – One Stop Center
◆ Chatsworth/Northridge – One Stop Center
◆ Child Health and Disability Prevention Program
◆ CHIME Institute for Children with Special Needs
◆ Clinica Medica San Miguel
◆ Community Counseling Resource Institute
◆ Comprehensive Community Health Center
◆ Consumer Affairs Center
◆ Cri-Help, Inc.
◆ CSUN Career Center Volunteer Program
◆ CSUN Center for Community Service Learning
◆ CSUN Center for Health Research and Community Service

◆ Los Angeles Valley College
◆ Madison Community Collaborative Healthy Start
◆ Meet Each Need With Dignity
◆ Mission Community Hospital
◆ National Center on Deafness
◆ Neighborhood Legal Services
◆ Northeast Valley Health Corporation
◆ Northeast Valley Senior Center
◆ North Valley YMCA
◆ North Valley Occupational Center
◆ Northeast L.A. Satellite – One Stop Center
◆ Northridge Family Practice Center & Residency
◆ Northridge Hospital Medical Center - Roscoe
◆ Northridge Hospital Medical Center – Sherman Way
◆ Nurse Family Partnership Program
◆ Olive View-UCLA Medical Center
◆ Ovarian Cancer Coalition of Greater California
◆ Pacifica Hospital of the Valley
◆ Pacoima Beautiful
◆ Pacoima Skills Center
◆ Partners in Care Foundation
◆ Pioneer House

- CSUN Center for the Achievement of the Physically Disabled
- CSUN Family Environmental Sciences Speaker's Bureau
- CSUN Helpline
- CSUN Language, Speech and Hearing Center
- Department of Children and Family Services, L.A. County
- Department of Health Services, L.A. County
- Department of Public Social Services, L.A. County
- El Nido Family Center
- El Proyecto Del Barrio
- Encino-Tarzana Regional Medical Center
- Family Focus Resource Center
- Glendale Adventist Medical Center
- Glendale Memorial Hospital and Health Center
- Habitat for Humanity
- Hands United Together
- Henry Mayo Newhall Memorial Hospital
- Hillview Mental Health Center
- Hollywood Community Hospital of Van Nuys
- Hospital Association of Southern California
- Kaiser Foundation Hospital – Panorama City
- Kaiser Foundation Hospital – Woodland Hills
- Kid's Community Clinic of Burbank
- L.A. County Public Health, SPA –2
- L.A.U.S.D. (CHAMP)
- Latin American Civic Association
- Los Angeles County Area Agency on Aging

- Providence Holy Cross Medical Center
- Providence Saint Joseph Medical Center
- Santa Clarita Adult Day Health Care Center
- Sherman Oaks Hospital and Health Center
- Special Education Literacy Laboratory
- Suad S. Rayyis, M.D.
- Sun Valley One Stop Center
- Susan G. Komen Breast Cancer Foundation
- Tarzana Treatment Centers, Inc.
- TASC – Adult Skill Center
- Tenant Legal Clinic
- ValleyCare Glendale Health Center
- ValleyCare Mid Valley Comprehensive Health Center
- ValleyCare San Fernando Health Center
- Valley Community Clinic
- Valley Economic Development Center
- Valley Presbyterian Hospital
- Valley Trauma Center
- Verdugo Hills Hospital
- Verdugo Mental Health Center
- Volunteer Center
- Volunteer Income Tax Assistance
- Wellness Community – Valley/Ventura
- West Hills Hospital
- Women's Center

A detailed resource listing all of the programs and services provided by those organizations that completed the asset mapping worksheet has been compiled and will be maintained and updated on the Valley Care Community Consortium web site. This resource manual, sorted by service and population target, will be a reference for community organizations and stakeholders.

The maps on the following pages identify where services exist in relation to the target populations that these organizations serve. This asset mapping project was completed for children, seniors and low income populations.

A detailed resource listing of all of the programs and services provided by those organizations that completed the asset mapping exercise worksheet has been complied and will be maintained and updated on the Valley Care Community Consortium (VCCC) website, www.valleyccc.org. This resource manual, sorted by service and population target, will be a reference for community organizations and stakeholders.

Several maps are given on the following pages. Figure 1 presents a map of SPA 2. Figures 2 through 5 identify where services exist in relation to the target population that these organizations serve, with a map key for the agencies provided in Appendix A. The targeted groups are the same ones used in the community needs assessment methodology in Sections VIII and IX:

- Children (ages 0 to 17)
- Adults (ages 18 to 64)
- Seniors (65 and above)
- Poor and Medically Indigent or Low-Income/Uninsured

One exception for the mapping exercise was Special Needs Population, as a measure such as age or income level could not represent this subgroup.

Figure 1. Service Planning Area 2 (SPA-2) Map
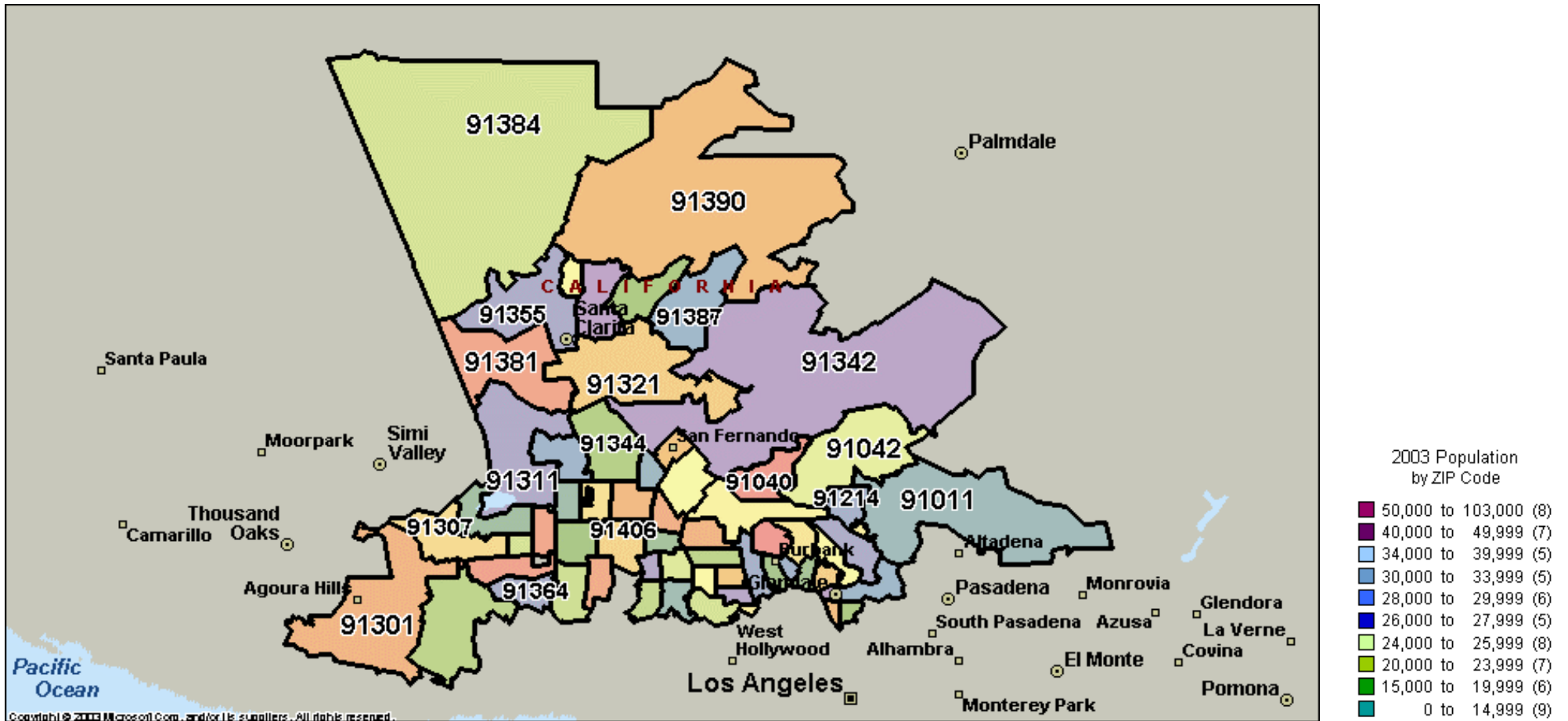
Figure 2. Los Angeles County
Children 0-17 years old below 200% of Federal Poverty Level
Agencies Serving Children 0-17 years old

SPA 2
San Fernando

SPA1
Antelope Valley

SPA 3
San Gabriel

SPA 4
Metro

SPA 5
West

SPA 6
South

SPA 7
East

SPA 8
South Bay

0   5   10
miles

104
103
48
119
125
81   # 54
33
101   # 9
2 # 16
84   # 66   # 34   # 92
23
39   # 65   # 1   # 86   # 45
75   # 26   # 8
131   # 53   # 6   # 4   # 27   # 102   # 55   # 109   # 43   # 126
113 # 11   # 44   # 10
130   # 40   # 30   # 32   # 19
57
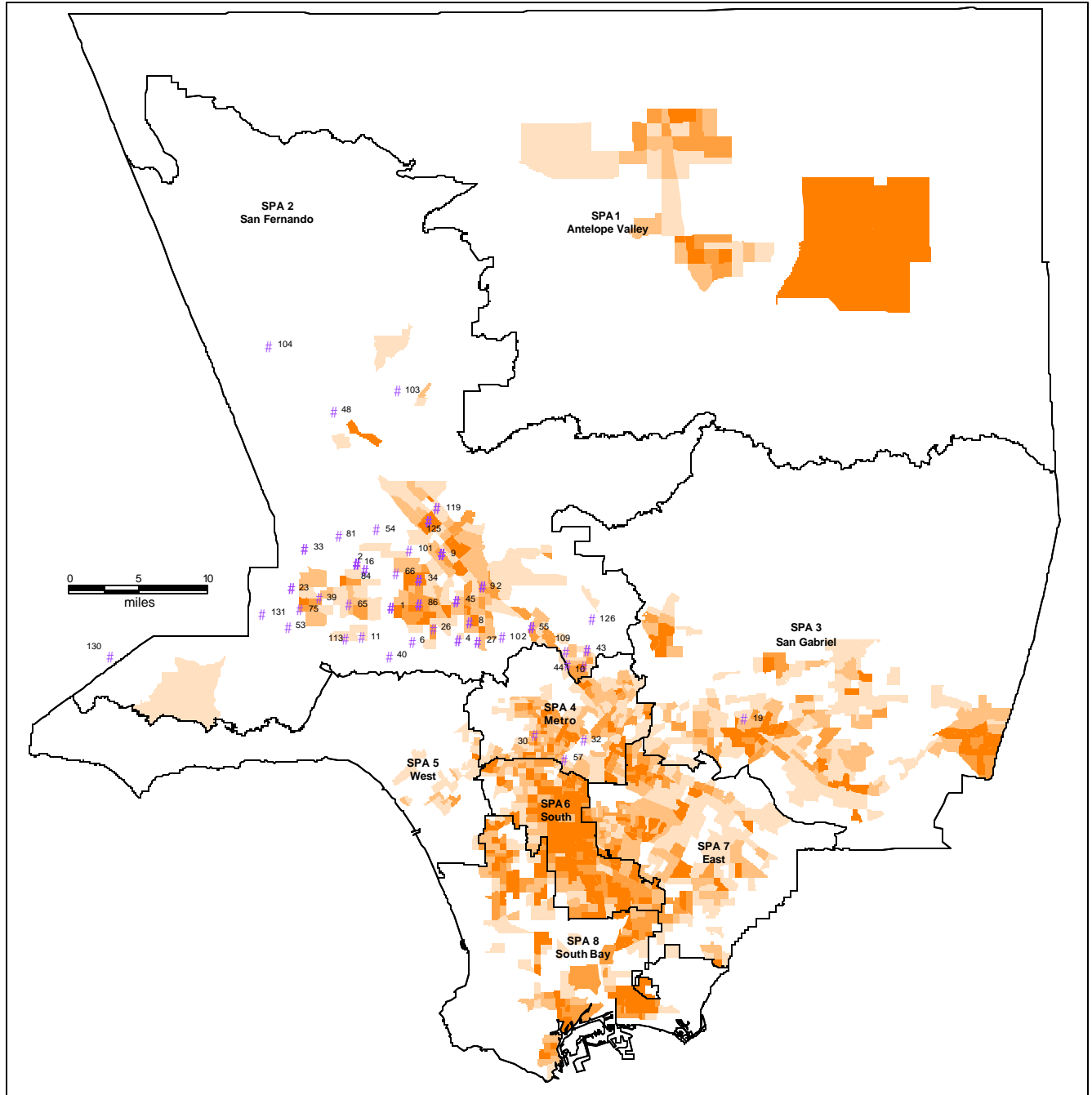
LEGEND
Children 0-17 years old Under 200% FPL per census tract.

1,200 to greater
900 to 1,200
600 to 900
300 to 600
0 to 300

= Agency

Service Planning Area Boundaries

Source: Population Estimation and Projection System, 2002 LAC Urban Research Division (Poverty Estimates for 2002 based on census 2000). Agency Zip Codes provided by VCCC; Agencies are mapped to the Zip Code Centroid.

LAC DHS Office of Planning, August 9, 2004

Figure 3. Los Angeles County
Adults 19-64 years old below 200% of Federal Poverty Level
Agencies Serving Adults 18-64 years old

SPA 2
San Fernando

SPA 1
Antelope Valley

SPA 3
San Gabriel

SPA 4
Metro

SPA 5
West

SPA 6
South

SPA 7
East

SPA 8
South Bay

0   5   10
miles

LEGEND

Adults 18-64 years old Under 200% FPL per census tract.

2,000 to greater

1,500 to 2,000

1,000 to 1,500

500 to 1,000

0 to 500

= Agency

Service Planning Area Boundaries

Source: Population Estimation and Projection System, 2002 LAC Urban Research Division (Poverty Estimates for 2002 based on census 2000). Agency Zip Codes provided by VCCC; Agencies are mapped to the Zip Code Centroid.

LAC DHS Office of Planning, August 9, 2004

Figure 4. Los Angeles County
Seniors 65+ years old below 200% of Federal Poverty Level
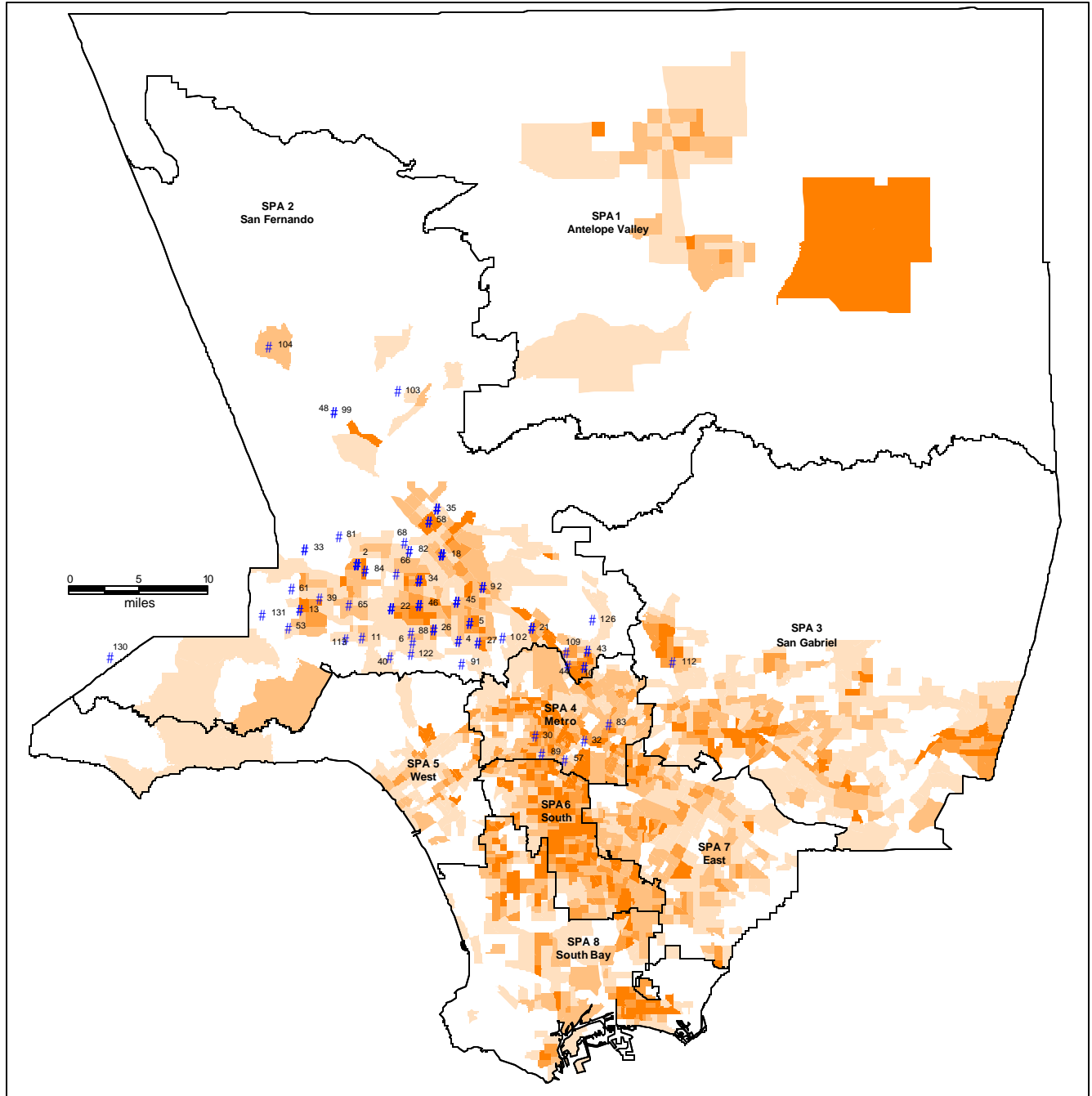## Agencies Serving Seniors 65+ years old

LEGEND

Seniors 65+ years old Under 200% FPL per census tract.

- 800 to greater
- 400 to 800
- 200 to 400
- 100 to 200
- 0 to 100
- ✂ = Agency
- ▬ Service Planning Area Boundaries

Source: Population Estimation and Projection System, 2002 LAC Urban Research Division (Poverty Estimates for 2002 based on census 2000). Agency Zip Codes provided by VCCC; Agencies are mapped to the Zip Code Centroid.

LAC DHS Office of Planning, August 9, 2004

Figure 5. Los Angeles County
Low-Income Population Under 200% of Federal Poverty Level
Agencies Serving Low Income Populations

Source: Population Estimation and Projection System, 2002 LAC Urban Research Division (Poverty Estimates for 2002 based on census 2000). Agency Zip Codes provided by VCCC; Agencies are mapped to the Zip Code Centroid.

LAC DHS Office of Planning, August 9, 2004

LEGEND

Population Under 200% FPL per census tract.
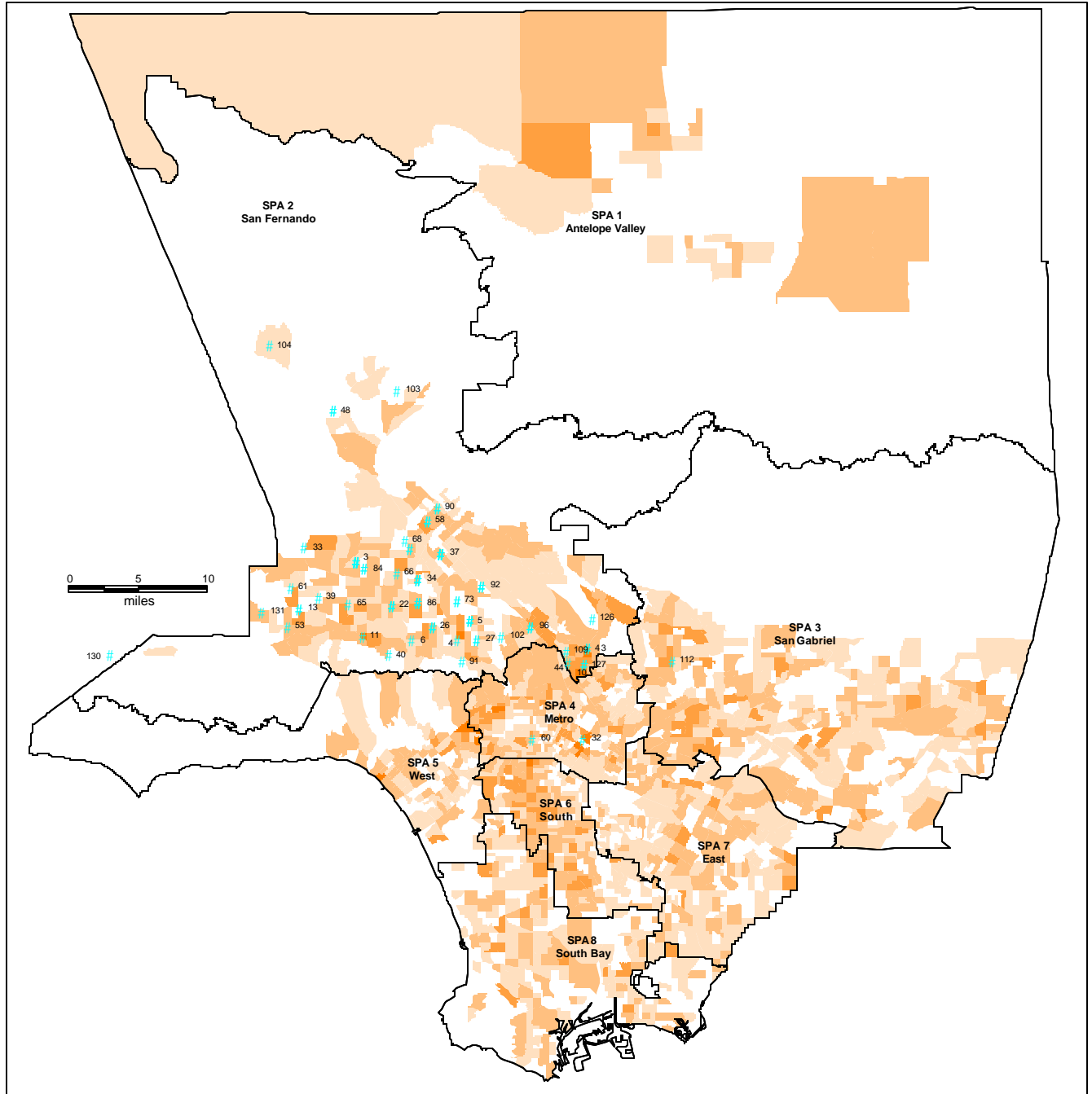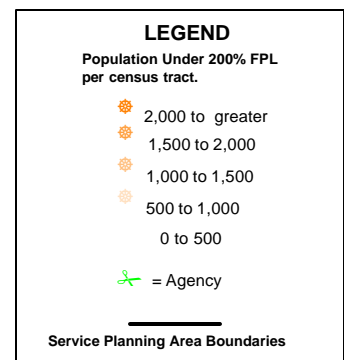
- 2,000 to greater
- 1,500 to 2,000
- 1,000 to 1,500
- 500 to 1,000
- 0 to 500

= Agency

Service Planning Area Boundaries

VI.   DEMOGRAPHIC PROFILE

The population of SPA-2 consists of two distinct social, cultural, and economic areas as shown in the following statistics. Over 1.8 million people live in the San Fernando Valley, while the Santa Clarita Valley includes a growing population of over 217,000 people. An examination of the population size and growth, race and ethnicity, household income levels, age, and education provides a framework to identify specific communities within this study that helps to identify specific local priority needs and issues

Population Size:

The largest population centers in the San Fernando Valley:

Community	Population	% of Total Valley Population
Glendale	182,140	9.9%
Van Nuys	174,835	9.5%
North Hollywood	158,705	8.6%
Burbank	106,009	5.7%
Pacoima	101,070	5.5%

The largest populations centers in the Santa Clarita Valley:

Community	Population	% of Total Valley Population
Canyon Country	61,659	28.4%
Valencia	48,622	22.4%
Saugus	41,449	19.1%

Population Growth:

The population of the San Fernando Valley is projected to increase by approximately 130,000 people by the year 2007 or an increase of 7%. The greatest population growth in the San Fernando Valley over the next five years is projected to be among the population 45-64 years (17.3% increase) and those 85+ (14.6% increase).

Within the Santa Clarita Valley the population is projected to increase by over 28,800 people by the year 2007 or an increase of 13%. The population segments projected to experience the greatest population growth over this period in the Santa Clarita Valley are those persons 85+ (24.4% increase) and persons between the ages of 45-64 years (24.2% increase).

Population by Race and Ethnicity:

The racial and ethnic composition of SPA-2 remains diverse, especially in the San Fernando Valley where many cultures have converged in one area and no racial group currently represents a majority. In contrast, the population of the Santa Clarita Valley is still homogenous with Caucasians comprising the majority of the population.

The racial composition of the San Fernando Valley:

Caucasian	43.9%
Hispanic	38.7%
Asian	9.8%
African American	3.6%

The racial composition of the Santa Clarita Valley:

Caucasian	66.0%
Hispanic	21.6%
Asian	5.9%
African American	3.3%

Communities in the San Fernando Valley with a large Hispanic population include:

Community	Population	% of Total Valley Latino Population
Van Nuys	93,215	13.0%
North Hollywood	86,882	12.2%
Pacoima	84,151	11.8%
Sylmar	57,284	8.0%
Panorama City	50,993	7.1%

Communities in the Santa Clarita Valley with a large Hispanic population include:

Community	Population	% of Total Valley Latino Population
Canyon Country	14,697	31.3%
Newhall	12,357	26.3%
Castaic	7,276	15.5%

Asians represent approximately 9.8% of the San Fernando Valley population. Communities in the San Fernando Valley with a significant Asian population include:

Community	Population	% of Total Valley Asian Population
Glendale	29,076	16.1%
Northridge	16,336	9.1%
Van Nuys	11,098	6.2%
North Hollywood	10,910	6.0%
Burbank	10,182	5.6%

Asians comprise approximately 5.9% of the total population in the Santa Clarita Valley. Communities in the Santa Clarita Valley with a significant Asian population include:

Community	Population	% of Total Valley Asian Population
Valencia	3,609	28.3%
Canyon Country	3,162	24.8%
Saugus	2,061	16.2%

African Americans comprise approximately 3.6% of the total population of the San Fernando Valley. Communities in the San Fernando Valley with a concentration of African Americans include:

Community	Population	% of Total Valley African American Population
Van Nuys	9,664	14.6%
North Hollywood	7,429	11.3%
Sylmar	5,152	7.8%
Pacoima	4,875	7.4%
Northridge	4,154	6.3%

Communities in the Santa Clarita Valley with a concentration of African Americans include:

Community	Population	% of Total Valley African American Population
Castaic	2,659	37.5%
Canyon Country	2,130	30.0%

Household Income Levels:

Household income levels illustrate the disparities that exist in SPA-2. Approximately 17.5% of the households in the San Fernando Valley report annual incomes below $25,000. In the Santa Clarita Valley only 8.7% of households report annual incomes below $25,000.

San Fernando Valley communities with a large percentage of households with annual incomes below $25K per year:

Community	Households	% of Total Valley Households with Incomes below $25K
Glendale	15,699	14.2%
North Hollywood	13,333	12.0%
Van Nuys	12,408	11.2%
Burbank	8,505	7.7%
Pacoima	5,101	4.6%

Santa Clarita Valley communities with a large number of household incomes below $25K per year include:

Community	Households	% of Total Valley Households with Incomes below $25K
Canyon Country	2,016	32.9%
Newhall	1,645	26.9%

San Fernando Valley communities with a large number of households with annual incomes over $150K include:

Community	Households	% of Total Valley Households with Incomes above $150K
Glendale	5,946	8.8%
Northridge	5,216	7.8%
Woodland Hills	4,465	6.6%
Encino	4,158	6.1%
Sherman Oaks	3,867	5.7%

Santa Clarita Valley communities with a large number of households with annual incomes over $150K:

Community	Households	% of Total Valley Households with Incomes over $150K
Valencia	2,787	31.2%
Canyon Country	2,121	23.8%

Population by Age:

Comparing the Santa Clarita Valley to the San Fernando Valley shows that the age composition of the Santa Clarita Valley is younger compared to the San Fernando Valley. Children (those between the ages of 0 to 19 years) comprise 32.2% of the Santa Clarita Valley population while in the San Fernando Valley this age group represents 28.6% of the total population.

San Fernando Valley communities with a large number of children (0-19):

Community	*Population*	*% of Total Valley 0-19 yrs Population*
Van Nuys	53,458	10.1%
North Hollywood	47,709	9.0%
Glendale	44,110	8.3%
Pacoima	38,299	7.2%
Sylmar	29,638	5.6%

Santa Clarita Valley communities with a large number of children (0-19):

Community	*Population*	*% of Total Valley 0-19 yrs Population*
Canyon Country	20,789	29.7%
Valencia	15,196	21.7%

Seniors (age 65+) comprise over 10% of the total population in the San Fernando Valley. In the Santa Clarita Valley seniors comprise 6.2% of the total population.

San Fernando Valley communities with a large concentration of seniors:

Community	*Population*	*% of Total Valley Senior Population*
Glendale	25,370	13.0%
Van Nuys	14,310	7.3%
Burbank	13,473	6.9%
North Hollywood	12,420	6.3%
Northridge	9,926	5.1%

Santa Clarita Valley communities with a large number of seniors include:

Community	Population	% of Total Valley Senior Population
Valencia	3,706	27.7%
Canyon Country	3,338	24.9%
Newhall	3,257	24.3%

Population by Levels of Education:

Inequalities appear relevant in regards to levels of education achieved by adults 25 years and over and household incomes. The following shows the various levels of education according to communities within SPA-2. Within the San Fernando Valley, approximately 24% of the population 25+ has not graduated from high school. In the Santa Clarita Valley 13.8% of persons 25+ have not graduated from high school.

San Fernando Valley communities according to greatest number of individuals (25+) with less than a ninth grade education:

Community	Population	% of Total Valley Population with Less Than 9th Grade Education
Pacoima	18,292	13.0%
North Hollywood	17,942	12.7%
Van Nuys	16,234	11.5%
Glendale	15,639	11.1%
Sylmar	8,453	6.0%

Santa Clarita Valley communities according to greatest number of individuals (25+) with less than a ninth grade education:

Community	Population	% of Total Valley Population with Less Than 9th Grade Education
Newhall	1,733	32.6%
Castaic	1,425	26.8%

San Fernando Valley communities according to the greatest number of individuals (25+) with a graduate degree:

Community	Population	% of Total Valley Population with a Graduate Degree
Glendale	11,758	11.3%
Van Nuys	7,499	7.2%
Northridge	7,057	6.8%
Woodland Hills	6,823	6.6%
Sherman Oaks	5,791	5.6%

Santa Clarita Valley communities with the greatest number of individuals (25+) with a graduate de gree:

Community	Population	% of Total Valley Population with a Graduate Degree
Valencia	3,088	32.7%
Canyon Country	2,104	22.3%

Population by Levels of Home Ownership:

The following shows communities with less than 24% of home ownership within SPA-2.

San Fernando Valley communities with the lowest percentage of people owning homes:

Community	Housing Units	% of Home Owners in the Community
Valley Village	12,066	26.63%
North Hollywood	51,189	29.09%
Glendale	59,790	30.21%
Van Nuys	53,398	31.08%
Panorama City	16,535	32.91%

Santa Clarita Valley communities with the lowest number of home ownership:

Community	Housing Units	% of Home Ownership in the Community
Newhall	8,953	54.25%
Canyon Country	16,675	63.58%

Foreign Born Residents:

SPA-2 has become a more diverse area as immigrants from other countries have relocated here. In some communities foreign born residents comprise more than half of the population of the community.

San Fernando Valley communities with a large number of foreign born persons:

Community	*Number of Foreign Born*	*% of Total Population of the Community*
Glendale	100,065 56.6%	
Panorama City	36,467	55.1%
Pacoima	45,762	47.0%
Sun Valley	21,633	46.7%
North Hollywood	72,543	46.5%

In the Santa Clarita Valley the communities with the largest percentage of foreign born residents includes:

Community	*Number of Foreign Born*	*% of Total Population of the Community*
Newhall	8,392	27.7%
Castaic	2,114	20.7%

VII.   SELECT HEALTH STATISTICS

Greatest Number of Births:

San Fernando Valley communities with the greatest number of births in 2002:

Community	Births	% of Total Valley
Van Nuys	2,927	11.7%
North Hollywood	2,465	9.8%
Pacoima	1,995	8.0%
Glendale	1,948	7.8%
Sylmar	1,501	6.0%

Santa Clarita Valley communities with the greatest number of births in 2002:

Community	Births	% of Total Valley
Valencia	706	24.0%
Canyon Country	668	22.7%

Mothers with Early Prenatal Care:

San Fernando Valley communities with the highest percentage of births with prenatal care in the first trimester of pregnancy:

Community	% of births
Calabasas	97.0%
Westlake Village	97.0%
Encino	96.9%
Woodland Hills	96.0%

Santa Clarita Valley communities with the highest percentage of births with prenatal care in the first trimester of pregnancy:

Community	% of births
Valencia	96%
Castaic	96%

Mothers Without Early Prenatal Care:

The following communities in SPA-2 need improvements in early prenatal care for pregnant mothers in their first trimester.

San Fernando Valley communities with high numbers of births without prenatal care in the first trimester:

Community	*Births without early prenatal care*	*% of Total Births*
Van Nuys	292	10.0%
Pacoima	287	14.4%
Sylmar	213	14.2%
North Hollywood	205	8.3%
Panorama City	148	10.4%

Santa Clarita Valley communities with high numbers of births without prenatal care in the first trimester:

Community	*Births without early prenatal care*	*% of Total Births*
Newhall	65	11.5%

Low Birth Weight Births:

San Fernando Valley communities with birth weights under 1500 grams:

Community	*Cases*	*% of Total Valley Low Birth Weight*
Van Nuys	36	12.1%
Pacoima	29	9.7%
Glendale	19	6.4%

Santa Clarita Valley communities with birth weights under 1500 grams:

Community	*Cases*	*% of Total Valley Low Birth Weight*
Newhall	9	29.03
Saugus	8	25.81

Births to Teen Mothers:

Communities in the San Fernando Valley with a large number of births to teenage mothers (under 18) include:

Community	*Live Births to Teen Mothers*	*% of Total Teen Births in the SF Valley*
Pacoima	273	14.2%
North Hollywood	251	13.1%
Van Nuys	245	12.8%

Communities in the Santa Clarita Valley with a large number of births to teenage mothers include:

Community	*Live Births to Teen Mothers*	*% of Total Teen Births in the SC Valley*
Newhall	48	39.0%
Canyon Country	46	37.4%

Leading Causes of Death for 2002:

The leading causes of death in the San Fernando Valley (for the entire population) based on number of cases include:

Causes of Death	*Cases*	*% of Total Deaths*
Heart Disease	3,752	34%
Cancer	2,517	23%
Stroke/Cerebrovascular Accident	768	7%
Influenza and Pneumonia	480	4%
Chronic Respiratory Disease	477	4%

The leading causes of death in the Santa Clarita Valley (for the entire population) based on number of cases include:

Causes of Death	Cases	% of Total Deaths
Heart Disease	271	29%
Cancer	253	27%
Unintentional Injuries	58	6%
Stroke/Cerebrovascular Accident	50	5%

Greatest Number of Deaths by Area:

San Fernando Valley communities with the highest number of deaths:

Community	Deaths	% of Total Deaths in the Valley
Glendale	1,286	12%
Van Nuys	953	9%
North Hollywood	817	7%
Burbank	813	7%

In the Santa Clarita Valley the communities with the greatest number of deaths include:

Community	Deaths	% of Total Deaths in the Valley
Canyon Country	242	26%
Saugus	222	23%

VIII. ASSESSMENT METHODOLOGY

Numerous data sources were utilized in compiling the community needs assessment. The community needs assessment completed in 2001 was used as a foundation to guide the process for this project. The targeted groups identified for the community needs assessment included:

- Children (ages 0 to 17)
- Adults (ages 18 to 64)
- Seniors (65 and above)
- Poor and Medically Indigent
- Special Needs

In the two previous community needs assessments that were completed on SPA-2, written surveys were used as the primary data gathering tool for compiling information on the priority needs in the two Valleys. This year a different methodology was used to conduct the primary research for this study. In person and phone interviews were conducted with key community stakeholders to gather information on the community. This information when compared to the secondary data collected on the community would provide insight into the priority issues and needs for SPA-2.

Using interviews with key community stakeholders would allow for the collection of more detailed information on the key target groups mentioned above. Organizations were carefully selected for the interviews to ensure that all of the key target groups identified would be represented as part of the primary data collection. The members of the Community Benefits Committee of the Valley Care Community Consortium worked to develop a series of questions to be asked during the interview process (a copy of the questionnaire is included in the appendices of this report). Members of the Committee also identified the key stakeholders in the community to be contacted for interviews.

Undergraduate and graduate students from California State University, Northridge assisted with the data gathering. These students contacted the stakeholders identified and conducted a 45 minute to one hour interviews with each of these individuals. There were a total of 79 interviews conducted as part of this data gathering exercise which helped to identify some of the priority needs facing each of the targeted groups mentioned above.

IX.   KEY FINDINGS AND NEEDS BY TARGET GROUP

This section provides an overview of the key issues and needs identified from the data compiled for this project. Both primary and secondary data sources were utilized for the community needs assessment. The secondary data sources included previous assessments, studies and data collected on select target groups, communities, each Valley or the entire SPA.

The primary data source for this project were the in person or phone interviews mentioned previously in which respondents were asked about priority needs and issues for the five key targeted groups including:

- Poor and Medically Indigent
- Children
- Seniors
- Adults
- Special Needs Populations (e.g. disabled, mentally ill, etc.)

This section provides a summary of the key findings from the data for each of these five targeted population groups.

CHILDREN (Ages 0 to 17)

Key Findings:

- Children comprise 28.6% of the population in the San Fernando Valley and 32.3% of the population in the Santa Clarita Valley. Communities with the highest percentages of the total number of children in SPA-2 are:

    San Fernando Valley:
    - ✓ Van Nuys
    - ✓ North Hollywood
    - ✓   Glendale

    Santa Clarita Valley:
    - ✓ Canyon Country
    - ✓ Valencia

- In SPA-2, 15.4% of children have special health care needs.
- Approximately 27,000 children in SPA-2 have no regular source of medical care.
  - ✓ The West Valley Health District has the highest number with 13,000 children.

- The most common inpatient DRGs for children in SPA-2 include:
  - ✓ Neonate with other significant problems (SFV=3,176; SCV=476)
  - ✓ Psychoses (SFV=1,974; SCV=219)
  - ✓ Full Term Neonate with Major Problems (SFV=1,325; SCV=182)
  - ✓ Bronchitis and Asthma (SFV1,204; SCV=160)
  - ✓ Vaginal Delivery without Complicating Diagnosis (SFV=1,089;SCV=130)

- The most common diagnoses for children seen in Emergency Departments within SPA-2 include:
  - ✓ Acute Upper Respiratory Infection
  - ✓ Otitis Media
  - ✓ Noninfectious Gastroenteritis

- Approximately 44,000 children in SPA-2 are uninsured.
- Approximately 174, 660 children under age 17 are MediCal Beneficiaries
- 18% of children in grades 5, 7 & 9 are considered overweight (BMI above 95th percentile)
- There are 35,218 children enrolled in the Healthy Families Program in the San Fernando Valley and 1,930 children enrolled in the Santa Clarita Valley.
- Approximately 10% of the infants born in SPA-2 were to mothers receiving late or no prenatal care.
- Teen births represented 8% of the total births in the San Fernando Valley in 2002 and 4% of the births in the Santa Clarita Valley.
- Approximately 45,000 children in SPA-2 have asthma or 8.4% of the population.
  - ✓ The San Fernando Health District has the highest number of children with asthma at 23,000.

- Communities with the highest risk for childhood lead poisoning in SPA-2 include:
  - ✓ Glendale
  - ✓ Northridge
  - ✓ Reseda
  - ✓ Sun Valley
  - ✓ Van Nuys
  - ✓ North Hollywood
  - ✓ Tujunga
  - ✓ Pacoima
  - ✓ San Fernando
  - ✓ Panorama City
  - ✓ Burbank

Key Needs:
Based on the interviews conducted with key community stakeholders, the following were identified as some of the key priority needs for children in SPA-2:

- Affordable health services
- Affordable dental services
- Programs to help combat obesity
- Programs focused on personal development for adolescents
- Mental health services, especially geared for adolescents
- Facilities for providing youth services were seen as insufficient in SPA-2
- Funding was seen as the biggest barrier for expanding the capacity of programs serving youth in SPA-2
- More preventive care and wellness programs are needed for children
- Increase parental involvement in children's school and recreational activities

ADULTS (Ages 18 to 64)

Key Findings:
- Adults between the ages of 18 to 64 comprise 60.8% of the population in the San Fernando Valley (SFV) and 61.6% of the population in the Santa Clarita Valley (SCV). In terms of numbers this population represents over 1.1 million people in the SFV and over 133,000 people in the SCV.
- The adult population is closely split between males (49%) and females (51%) in the SFV. In the SCV males outnumber females 51% versus 49%.
- Approximately 24.5% of adults ages 18 to 64 years are uninsured.
- Approximately 18.7% of adults have no regular source of medical care.
    - ✓ Adults in the West Valley Health District have the greatest number with no regular source of medical care at 115,000 individuals.

- Approximately 315,000 adults did not obtain dental care in the past year in SPA-2 because they could not afford it.
- An estimated 92,000 adults (18 and above) are diagnosed with diabetes in SPA-2.
    - ✓ The West Valley Health District has the largest number of adults with diabetes at 32,000.

- Overweight adults make up 37% of the SPA-2 population. 15.9% of adults are considered obese.

- Approximately 41.8% of adults in SPA-2 are sedentary.
- 18.4% of adults feel their health is fair to poor.
- Several areas in SPA-2 have an inadequate primary care dentists-to-population ratio. Pacoima and Sun Valley are currently at or below the Federal Health Professional Shortage Area (HPSA) ratio at 1:5000. Other areas with low dental coverage are North Hollywood, Panorama City, Chatsworth, Granada Hills, Van Nuys, Reseda, Mission Hills, and most of the Santa Clarita Valley.
- 18.7% of adults have been diagnosis with hypertension in SPA-2.
- 10% of adults have been diagnosed with depression in SPA-2.
- Approximately 77.6% of women ages 50 and over had a mammogram within the last 2 years.
- There are 162.6 deaths to cancer per 100,000 population. Other Cancer mortality rates per 100,000 population are:
  - ✓ Breast Cancer – 24.8
  - ✓ Lung Cancer – 37.7

- Approximately 15.1% of adults in SPA-2 smoke cigarettes.
- Other disease related mortality rates per 100,000 population in SPA-2:
  - ✓ Cardiovascular Disease – 192.2
  - ✓ Diabetes – 18.2
  - ✓ Stroke – 46.4
  - ✓ Stroke (African-American) – 70.2

- The rate of drug-related deaths among adults per 100,000 population is 7.6.
- Binge drinking (5 or more alcoholic drinks for men/4 for women) on at least one occasion in the last 30 days is 16.2% among adults in SPA-2.
- The top inpatient DRGs among persons ages 18 to 44 years (based on 2002 OSHPD data) include:

  San Fernando Valley:
  - ✓ Vaginal Delivery without Complicating Diagnosis (13,635)
  - ✓ Cesarean Section without cc (5,887)
  - ✓ Psychoses (3,030)
  - ✓ Cesarean Section with cc (1,276)
  - ✓ Vaginal Delivery with Complicating Diagnosis (1,131)

Santa Clarita Valley:
- ✓ Vaginal Delivery without Complicating Diagnosis (1,780)
- ✓ Cesarean Section without cc (722)
- ✓ Psychoses (317)
- ✓ Cesarean Section with cc (168)
- ✓ Vaginal Delivery with Complicating Diagnosis (156)

- The top inpatient DRGs among adults ages 45 to 64 years (based on 2002 OSHPD data) include:

  San Fernando Valley:
  - ✓ Psychoses (2,568)
  - ✓ Chest Pain (1,903)
  - ✓ Uterine and Adnexa Procedures for Non-Malignancy (1,214)
  - ✓ Hearth Failure and Shock (793)
  - ✓ Major Limb and Joint Replacement Procedures of the Lower Extremities (639)

  Santa Clarita Valley:
  - ✓ Chest Pain (335)
  - ✓ Psychoses (187)
  - ✓ Uterine and Adnexa Procedures for Non-Malignancy (152)
  - ✓ Major Limb and Joint Replacement Procedures of the Lower Extremities (103)
  - ✓ Simple Pneumonia and Pleurisy (90)

- The most common Emergency Department diagnoses for persons ages 18 to 44 treated in SPA-2 include:
  - ✓ Abdominal Pain
  - ✓ Respiratory/Other Chest Pain
  - ✓ Sprain of Neck

- The most common Emergency Department diagnoses for persons ages 45 to 64 treated in SPA-2 include:
  - ✓ Respirator/ Other Chest Pain
  - ✓ Abdominal Pain Unspecified Site
  - ✓ Migraine/Headache

Key Needs:

Based on interviews with community stakeholders the following priority needs were identified for adults in SPA-2.

- Affordable primary and specialty medical services
- Affordable health insurance
- Improved employment opportunities
- Preventive care and wellness programs
- Better education on the programs and services available in the community
- Improve health education and disease management programs for conditions such as diabetes
- More involvement in health care decisions including better understanding of care options and risks

SENIORS (Age 65+)

Key Findings:

- Seniors comprise 10.6% of the population in the San Fernando Valley and 6.2% of the population in the Santa Clarita Valley.
- Approximately 6.5% of persons living below the poverty level in the San Fernando Valley and 5.9% of persons in the Santa Clarita Valley living below poverty are seniors. Communities representing the largest number of seniors living below the poverty level include Glendale, Van Nuys, North Hollywood, and Burbank.
- The most common inpatient DRGs for seniors in the San Fernando Valley include:
  - ✓ Heart failure and shock (3,931)
  - ✓ Simple pneumonia and pleurisy (2,990)
  - ✓ Rehabilitation (2,215)
  - ✓ Major joint and limb reattachment procedures of the lower extremity (1,892)
  - ✓ Chronic obstructive pulmonary disease (1,883)

- The most common inpatient DRGs for seniors in the Santa Clarita Valley include:
  - ✓ Heart failure and shock (331)
  - ✓ Chronic obstructive pulmonary disease (234)
  - ✓ Chest Pain (217)
  - ✓ Simple pneumonia and pleurisy (210)
  - ✓ Rehabilitation (201)

- For seniors treated in the Emergency Departments within SPA-2, the most common diagnoses included:
  - ✓ Pneumonia, Organism
  - ✓ Chest Pain/Respiratory Symptoms
  - ✓ Urinary Tract Infection

- Approximately 73% of adults 65 years or older were vaccinated for influenza in the last year.
- There are approximately 31,345 cases of Alzheimer's disease and related dementia in the San Fernando Valley. Glendale, North Hollywood and Burbank have the largest number of cases in the San Fernando Valley. In the Santa Clarita Valley there are approximately 1,751 cases of Alzheimer's disease and related dementia with Canyon Country and Newhall having the largest number of cases.
- The suicide rate among mature adults (those 55+) in SPA-2 is 14.8 per 100,000 population.

Key Needs:
Based on the interviews with community stakeholders, the following priority needs were identified for seniors in SPA-2.

- Access to affordable and reliable transportation services
- Lack of financial resources for seniors and limited incomes which hinders their ability to access needed services
- Insufficient capacity with existing senior programs which is due in part to limited funding available for these programs
- Affordable prescriptions/medications
- Expanded programs and service of all types for seniors
- Affordable housing options for seniors on fixed incomes

POOR AND MEDICALLY INDIGENT

Key Findings:

- Approximately, 14.6% of the population in the San Fernando Valley and 6.1% of the population in the Santa Clarita Valley live below the poverty level. The areas in each of the valleys with large numbers of people living below the poverty level include

  San Fernando Valley:
  - ✓ Van Nuys (34,612)
  - ✓ North Hollywood (33,209)
  - ✓ Glendale (28,636)
  - ✓ Pacoima (18,626)

Santa Clarita Valley:
- ✓ Canyon Country (3,959)
- ✓ Newhall (3,940)

- The public high school dropout rate in SPA-2 is 12%.
- Over 20% of adults did not receive adequate dental care because they could not afford.
- Approximately 15.5% of the population in the San Fernando Valley received some type of public assistance (e.g. Medi-Cal, AFDC, etc) in 2001 while in the Santa Clarita Valley 4.7% of the population received public assistance. Areas with the largest number of people on public assistance include:

San Fernando Valley:
- ✓ Glendale (44,908)
- ✓ Van Nuys (37,046)
- ✓ North Hollywood (34,881)
- ✓ Pacoima (24,246)
- ✓ Panorama City (19,274)

Santa Clarita Valley:
- ✓ Canyon Country (4,025)
- ✓ Newhall (3,401)

- There are approximately 288,000 adults (18-64) who do not have health insurance in SPA-2.
  - ✓ The West Valley Health District has the largest number of adults who don't have health insurance estimated at 129,000.

- The number of children in SPA-2 who do not have health insurance is estimated to be 44,000.
  - ✓ Similar to adults, the West Valley Health District has the largest number of children without health insurance estimated at 20,000.

- The number of patients treated at primary medical clinics in SPA-2 in 2002 was 108,660.
- In the San Fernando Valley, over 322,082 children, adults, and seniors received MediCal benefits. In Santa Clarita, 16,881 people received MediCal benefits (January, 2004). The largest group receiving MediCal were adults ages 21-44 in SFV. More Women are MediCal beneficiaries than man (217,167 women in SFV to 163,048 men in SFV).
- A decrease in the total MediCal enrollment from October 2003 to January 2004 occurred in the San Fernando Valley (23%); while a slight increase occurred in the Santa Clarita Valley (2.86%) during this same time period.

- Persons without health insurance had the highest percentage of those having difficulty getting needed medical care.
- In the San Fernando Valley 17% of households reported annual incomes below $25,000 while in the Santa Clarita Valley 8.7% of households reported annual incomes at this level.

Key Needs:

Based on interviews with community stakeholders, the following priority needs were identified for the low income and uninsured group.

- Affordable health insurance
- Expanded primary and specialty medical services for the uninsured
- Reliable and affordable public transportation
- Limited capacity in programs serving the low income population due to funding constraints
- Housing assistance programs
- Expanded community and social services for the low income
- Better communication and coordination with programs serving the low income population.

SPECIAL NEEDS POPULATIONS

Key Findings:

- Approximately 18.2% of adults have a disability.
- In the San Fernando Valley there are 329,703 residents with disabilities; 23,235 in Santa Clarita Valley. The highest concentrations of disabled residents according to age are:

    Disabled Children (ages 5-15 years) in SPA-2:
    - ✓ North Hollywood – 1,185
    - ✓ Van Nuys – 1,225
    - ✓ Canyon Country – 566

    Disabled Teenagers (ages 16-20 years) in SPA-2:
    - ✓ Van Nuys – 2,067
    - ✓ North Hollywood – 1,984
    - ✓ Glendale – 1,829

    Disabled Adults (ages 21-64 years) in SPA-2:
    - ✓ Van Nuys – 25,594
    - ✓ Glendale – 25,271
    - ✓ North Hollywood – 22,897
    - ✓ Canyon Country – 4,732

    Disabled Senior Adults over 65 in SPA-2:
    - ✓ Glendale – 12,211
    - ✓ North Hollywood – 6,075
    - ✓ Van Nuys – 5,930
    - ✓ Val Verde – 1,443
    - ✓ Canyon Country – 1,296

- The highest rates of asthma hospitalization occurred in Sylmar, Pacoima, Reseda, Van Nuys/Panorama City, North Hollywood, and Santa Clarita.

- There are 34 mental health institutions in SPA-2. The majority of patients (41.9%) treated at these facilities were diagnosed with major depression. Another 30% of the clients were dually diagnosed and 21.8% were diagnosed with schizophrenia.
- Psychoses remains one of the top ten DRGs why people are admitted to the hospital in SPA-2 for children (0-17) and adults (18-64 years).

Key Needs:

Based on responses to the interviews conducted with community stakeholders, the following priority needs were identified for the special needs population.

- Expanded mental health services especially for those with low incomes.
- Specialized medical services
- Improved community and social services for the special needs population
- Better communication and coordination with programs serving this population
- More community based services and programs including expanded support groups for the special needs population
- Programs for the special needs population are at capacity due to financial/funding constraints and limited facilities
- Services need to be better coordinated along the continuum of care for this population

X.   COMMON THEMES

Based on a review of the primary and secondary data collected for this community needs assessment, some priority issues were identified across the targeted population groups (e.g. poor and medically indigent, children, seniors, adults, and special needs).

- Access to primary medical services continues to be a need identified across population groups.
- Affordable health insurance continues to be identified as a need among the targeted population groups.
- Many programs serving the targeted population groups identified that they were operating at capacity and funding was the main issue that limited how many clients they could serve.
- There needs to be better coordination, communication and education regarding the resources and programs available in the community.
- Respiratory illness is a condition for which people get treated in the hospital emergency department across age groups.
- Hospital emergency departments continue to treat a large number of patients and remain one of the main points of accessing medical care for the uninsured.. Hospital E.D. diversion hours have increased from 12,395 in SPA-2 in 1997 to 46,963 hours in 2003.
- Mental health continues to be a priority need in SPA-2 that is included in the top ten inpatient DRGs (psychoses) for all age groups except seniors.
- Chronic diseases (e.g. asthma, bronchitis, diabetes) account for many of the acute care inpatient admissions in SPA-2 across age groups signaling a need for better disease management programs.
- Pneumonia remains one of top ten reasons for hospital admission for children, seniors and middle aged adults.
- Communities that represent significant numbers of under-served and vulnerable populations in the San Fernando Valley include:
  - ✓ Glendale
  - ✓ North Hollywood
  - ✓ Pacoima
  - ✓ Panorama City
  - ✓ Van Nuys

- Communities that include a larger proportion of under-served and vulnerable populations in the Santa Clarita Valley include:
  - ✓ Newhall
  - ✓ Canyon Country

XI.   COMPARISON OF THE 2001 AND 2004 COMMUNITY NEEDS ASSESSMENTS

Comparing the data from the community needs assessment completed in 2001 to the current study reveals some of the priority issues that are still areas of focus for SPA-2. These priorities include:

- The number of uninsured and access to medical services for this segment of the population continues to be a priority. In 2004, estimates show that approximately 332,000 adults and children remain without health insurance in SPA-2, which represents 25% of the adult population (18-64) and 8.3% of children (0-17). Affordable health insurance continues to be identified as a priority need in our community.
- Hospital emergency departments continue to see an increase in volume as E.D. diversion rates have increased from 32,031 when the needs assessment was completed three years ago to 46,963 hours as of 2003.
- Mental health continues to be a top priority as psychoses remains one of the top ten inpatient diagnoses in hospitals for children and adults in both the 2001 and 2004 study.
- Disease management continues to be high priority need in SPA-2 for conditions such as asthma and diabetes. The mortality rate from diabetes has increased by 48% over the past decade in Los Angeles County.
- The population of SPA-2 continues to increase with 71,684 additional persons in the San Fernando Valley and 12,179 additional persons in the Santa Clarita Valley since the last community needs assessment was completed three years ago.
- Financial constraints continue to remain a major reason why organizations have limited capacity to serve additional clients.
- The need for additional wellness and disease prevention programs was again identified by community stakeholders in the 2004 needs assessment which matches with the same priority identified in the 2001 study.
- Better coordination and communication between organizations continues to be identified as a priority to better serve the targeted clients and may offer opportunities for increasing capacity.
- Rates of poverty in SPA-2 continue to remain a concern especially in light of increasing property values in the area, which results in many families having to rent versus being able to purchase a home.

XII.   CONCLUSION

The purpose of the 2004 Community Needs Assessment has been compiled for hospitals, organizations, and institutions as an information resource on the communities they serve. The data collected identifies common needs, issues, and priorities across various segments of the population, as well as, those unique to particular age, gender, economic,, and social groups within the community. This information provides a foundation for program development, fund development, and strategic planning activities.

This project represents a collaborative effort involving many organizations, groups, and individuals. Hopefully, this spirit of cooperation will continue as organizations identify specific issues in the community that need attention, develop mutual strategies to meet these priorities, and work together to implement programs and services that benefit individuals and families in their area, as well, as the entire region. While the attempt to address common interests should be one catalyst for organizations to collaborate on projects addressing priority needs in their community, a greater motivation remains the health and spirit of the larger community which relies on each of us to share the common burden of service to others.

XIII. APPENDICES

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APPENDIX A

SAN FERNANDO VALLEY &
SANTA CLARITA VALLEY

ZIP CODES AND COMMUNITIES

Zip Codes by City
San Fernando Valley   **Santa Clarita Valley**

City	Zip Code	City	Zip Code	City	Zip Code
Agoura Hills	91301	Burbank	91501	Val Verde	91310
Calabasas	91302		91502	Newhall	91321
La Canada	91011		91504	Saugus	91350
La Crescenta	91020		91505		91390
	91214		91506	Canyon Country	91387
Sunland	91040	North Hollywood	91601		91351
Tujunga	91042		91602	Valencia	91354
Winnetka	91306		91605		91355
Woodland Hills	91364		91606	Castaic	91381
	91367	Studio City	91604	Stevenson Ranch	91384
West Hills	91307		91608		
Sun Valley	91352	Valley Village	91607		
Tarzana	91356	Sherman Oaks	91403		
Woodland Hills	91364		91423		
	91367	Panorama City	91402		
Van Nuys	91401	Glendale	91201		
	91405		91202		
	91406		91203		
	91411		91204		
Panorama City	91402		91205		
Canoga Park	91303		91206		
	91304		91207		
Chatsworth	91311		91208		
Encino	91316	Pacoima	91331		
	91436	Reseda	91335		
Northridge	91324	San Fernando	91340		
	91325	Sylmar	91342		
	91326	North Hills	91343		
Granada Hills	91344	Mission Hills	91345		

APPENDIX B

ASSET MAPPING SURVEY QUESTIONNAIRE
AND MAP KEY

San Fernando & Santa Clarita Valleys Community Needs Assessment
Community Asset/Resource Inventory Survey

Organization Name:	
Address:	
City/Zip:	
Phone:	
Web Address:	
Contact Person and Title:	
Days/Hours of Operation:	
Multiple Sites?	o Yes o No
Description of Key Services Provided:	
Population(s) Served:	o Children (0-17) o Adults (18-64) o Seniors (65+) o Special Needs o Low Income/Uninsured o Other?
What Communities Does Your Organization Serve?	
What Unique Services or Resources Do You Offer the Community?	
Languages Your Organization Can Accommodate:	
What Method of Payment Does Your Organization Accept? (check all that apply)	o Cash o Government Programs (e.g. Medicare, Medi-Cal) o Private Insurance o HMO o Sliding Fee Scale o Other – Please List:
Does Your Organization Have Capacity to Serve Additional Clients?	o Yes o No – What is the waiting period for new clients?
Do Other Organizations Offer Similar Services in the Community?	o Yes – Which Organizations? o No
Do You Work Collaboratively With Other Organizations?	o Yes - Which Organizations? o No
Would You Like Your Organization Listed in a Resource Directory?	o Yes o No

APPENDIX C

COMMUNITY NEEDS ASSESMENT
INTERVIEW QUESTIONS

San Fernando Valley and Santa Clarita Valley (SPA-2) Community Needs Assessment
Interview Questions

1. What population(s) do you serve?
   o Children(0-17 years) o Adults (18-64 years) o Low Income   o Seniors (65 and above)
   o Special Needs Population (specify: _____)

2. What type of organization do you operate?
   o Health Services o Mental Health o Social Services o Church o School o Other (_____)

3. What communities does your organization serve?

4. Does your organization provide specialized services? If so, please specify.

5. What ethnic/racial groups represent the majority of the clients you serve (check all that apply)?
   o Caucasian o Latino o African American o Asian o Other (specify: _____)

6. What do you feel is the greatest barrier to accessing the services provided to the population you serve?

7. How do you coordinate services for your clients with other organizations?

8. Do you think there is awareness among your clients regarding the services available to them?

9. Is there a need for improved cultural competency among organizations in SPA-2?

10. How do you feel that language, literacy and cultural issues impact access among your clients to services available in the community?

Organizations Serving Children (0 to 17 years)

1. What do you see as two or three of the most pressing needs facing children today in SPA-2?

2. What do you see as two or three key needs/issues among adolescents (12-17yrs) in our community?

3. What programs/services do you feel are needed for children in SPA-2 that would address the needs you identified?

4. Are you aware if any of these programs/services currently exist in SPA-2?

5. Is there capacity within your organization to serve additional clients? If not, what are the biggest barriers impacting capacity?
   o Funding o Availability of Trained Staff o Size of Facility o Other (_____)

6. How could parents/guardians get more involved in decisions affecting their children?

Organizations Serving Adults (18 to 64 years)

1. What do you see as two or three of the most pressing needs facing adults today in SPA-2?

2. What programs/services do you feel are needed by adults in SPA-2 that would address the needs you identified?

3. Are you aware if these programs/services currently exist in SPA-2?

4. Are your clients involved in decisions regarding the services they are receiving? If yes, how do you involve clients in these decisions?

5. Is there capacity within your organization to serve additional adults? If not, what are the biggest barriers impacting capacity?
   o Funding o Availability of Trained Staff o Size of Facility o Other (_____)

Organizations Serving Low Income and Uninsured

1. What do you see as two or three of the most pressing needs facing the low-income population today in SPA-2?

2. What programs/services do you feel are needed by the low-income population in SPA-2 that would address the needs you identified?

3. Are you aware if these programs/services currently exist in SPA-2?

4. Do you feel that clients are provided with sufficient information to make informed decisions? If no, how could clients be involved more in decisions regarding the services they are receiving?

5. Is there capacity within your organization to serve additional low-income clients? If not, what are the biggest barriers impacting capacity?
   o Funding o Availability of Trained Staff o Size of Facility o Other (_____)

6. What do you feel are some of the key barriers to accessing services for the low-income population?

7. Do you serve an undocumented population? If so, what do you see as some of the key issues among this group?

Organizations Serving Seniors (65+)

1. What do you see as two or three of the most pressing needs facing the senior population today in SPA-2?

2. What programs/services do you feel are needed by the senior population in SPA-2 that would address the needs you identified?

3. Are you aware if these programs/services currently exist in SPA-2?

4. What do you feel are some of the key barriers to accessing services for the senior population?

5. Do you feel that the current availability of services for seniors is sufficient for current and future demand? If no, what types of senior programs/services do you feel need to be expanded?

6. Is there capacity within your organization to serve additional seniors? If not, what are the biggest barriers impacting capacity?
   o Funding o Availability of Trained Staff o Size of Facility o Other (_____)

Organizations Serving Special Needs Populations

1. What do you see as two or three of the most pressing needs facing this special needs population today in SPA-2?

2. What programs/services do you feel are needed by this special needs population in SPA-2 that would address the needs you identified?

3. Are you aware if these programs/services currently exist in SPA-2?

4. How well do you think agencies in SPA-2 coordinate services for the special needs population? What area do you feel that services could be better coordinated for this population?

5. Is there capacity within your organization to serve additional clients? If not, what are the biggest barriers impacting capacity?
   o Funding o Availability of Trained Staff o Size of Facility o Other (_____)

6. What is the biggest barrier to access for this special needs population?

APPENDIX D

SECONDARY DATA TABLES