



# LIVE WELL SAN DIEGO

## *Opportunities To Work With The Private Sector*

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*Wilma J. Wooten, M.D., M.P.H.,  
Public Health Officer & Director, Public Health Services*

*October 3, 2014*

*CCLHO/HOAC Fall Semi-Annual Conference*





## WILMA WOOTEN

Within the past 12 months, the presenters have no relationships with a commercial interest, either financial in nature or with the opportunity to affect the content of this CME program.

# TODAY'S AGENDA



- **Disclose a framework for transformation: *Live Well San Diego*.**
- **Share the rationale and methodology for measuring *Live Well San Diego*.**
- **Provide examples of how *Live Well San Diego* engages various sector partners to demonstrate “collective action.”**
- **Describes signs of progress that support the anticipated success of *Live Well San Diego*.**
- **Review next steps to achieve a data-Informed decision making culture for *Live Well San Diego*.**



# LIVE WELL SAN DIEGO:

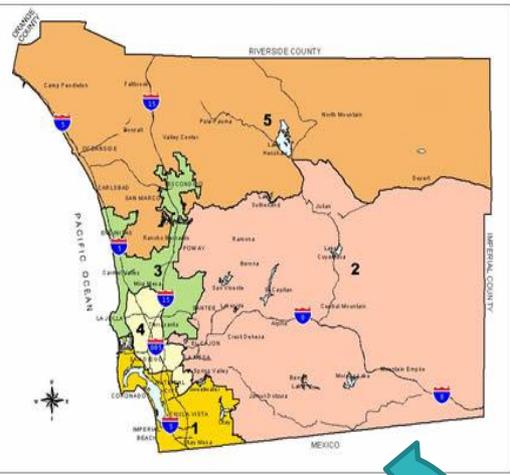
## *A Framework for Transformation*

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### Overview



# SAN DIEGO DEMOGRAPHICS



- 4,261 square miles (larger than 21 U.S. States; same size as Connecticut)
- 5<sup>th</sup> largest U.S. County, 2<sup>nd</sup> largest in CA
- 18 municipalities; 36 unincorporated towns
- 18 tribal nations
- 42 school districts
- 2013 Estimates - 3.1 million population
  - 48% White
  - 32% Latino
  - 11% Asian/PI
  - 4.7% African American
  - 0.5% American Indian
- Region is very diverse

•Over 100 languages  
•Large military presence  
•Largest refugee resettlement site in CA  
•Busiest international border crossing in the world (San Ysidro/MX)



# PROBLEM



 LIVE WELL  
SAN DIEGO



Lack of Exercise

Poor Diet

Smoking

# RESULT



LIVE WELL  
SAN DIEGO



<sup>1</sup> World Health Organization (WHO). "The Global Strategy on Diet, Physical Activity and Health." [http://www.who.int/dietphysicalactivity/media/en/gsf\\_general.pdf](http://www.who.int/dietphysicalactivity/media/en/gsf_general.pdf) (Accessed September 22, 2011).

<sup>2</sup> 3Four50, [www.3four50.com](http://www.3four50.com) (Accessed September 22, 2011).



*The Economic Burden  
of Chronic Disease in  
San Diego County*



OCTOBER 2010

## ECONOMIC IMPACT: \$4.6 BILLION IN SAN DIEGO COUNTY



## CHANGE HOW SERVICES ARE DELIVERED TO IMPROVE HEALTH, SAFETY AND WELLNESS:

- Optimize existing healthcare, public health and social service resources to innovate new service delivery, reduce waste and improve health and cost outcomes
- Create local accountability by all, not some
  - Health (and Safety) In-All-Policies
  - Promote individual responsibility
  - Strengthen self-sufficiency of individuals and families
- Connect the Unconnected thru modernized IT
- Advance evidence-based policy making and planning



# LIVE WELL SAN DIEGO

Building  
Better  
Health

Living  
Safely

Thriving



Access to quality care



Increased physical activity



Healthy eating



Stop tobacco use

[Meet Alex](#)

# LIVING SAFELY



LIVE WELL  
SAN DIEGO



Residents are *protected* from crime and abuse



Neighborhoods are *safe* to live, work and play



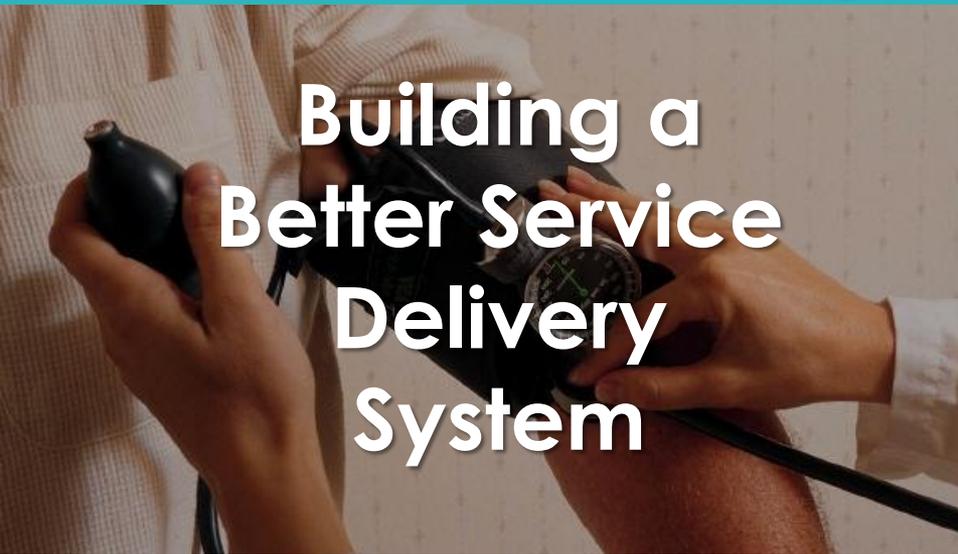
Communities are *resilient* to disaster and emergencies



*Cultivating opportunities for all people and communities to grow, connect, and enjoy the highest quality of life*



# 4 Strategies for LWSD



**Building a  
Better Service  
Delivery  
System**



**Supporting  
Positive, Healthy  
Choices**



**Pursuing Policy  
and  
Environmental  
Changes**



**Improving the  
Culture Within  
County  
Government**





FG<sup>3</sup>

Individuals

Military

Schools



Healthcare  
Community

Non-Profits



Cities



Business  
Community

Faith Community

# MEASURING RESULTS



Areas of Influence	Definition	Top 10 Indicators
 <p>HEALTH</p>	<p>Enjoying good health and expecting to live a full life</p>	<p>Life Expectancy Quality of Life</p>
 <p>KNOWLEDGE</p>	<p>Learning throughout the lifespan</p>	<p>Knowledge</p>
 <p>STANDARD OF LIVING</p>	<p>Having enough resources for a quality life</p>	<p>Unemployment Rate Income</p>
 <p>COMMUNITY</p>	<p>Living in a clean and safe neighborhood</p>	<p>Security Physical Environment Built Environment</p>
 <p>SOCIAL</p>	<p>Helping each other to live well</p>	<p>Vulnerable Population Community Involvement</p>

# COLLECTIVE ACTION TO COMMUNITY IMPACT



## *Actions We Take Collectively Across Sectors*

**County Government**

**Business**

**Community & Faith-Based  
Organizations**

**Schools**

**Healthcare & Technology Providers**

**Law Enforcement & Courts**

**Active Military/Veterans**

**Other Local Jurisdictions**

## *Results We Seek for Community Impact*



HEALTH



KNOWLEDGE



STANDARD  
OF LIVING



COMMUNITY



SOCIAL

# RECOGNIZED PARTNERS



Influential

Going  
Above and  
Beyond

Measuring  
Progress

Forward  
Thinking

Active Across Key Strategies

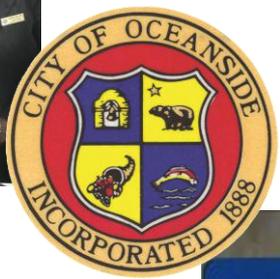
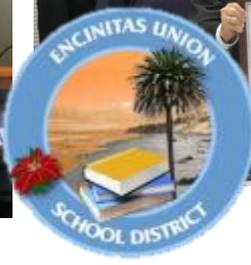
# COMMUNITY PARTNERS



## Over 50 Recognized Partners including

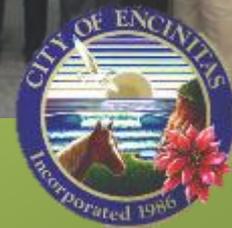
- The largest city in the County - **City of San Diego**
- The largest elementary school district in the State (K through grade 6) - **Chula Vista Elementary School District**
- The largest health care district in the State - **Palomar Health**
- The largest Chamber of Commerce on the west coast - **San Diego Regional Chamber of Commerce**







we're here for you.



# JOIN US



Learn how you can  
participate in  
*Live Well San Diego*

Visit the  
“Join Us” page at  
**LiveWellSD.org**

Or

Email us at

[LWSD.HHSA@sdcounty.ca.gov](mailto:LWSD.HHSA@sdcounty.ca.gov)



# COMPREHENSIVE APPROACH



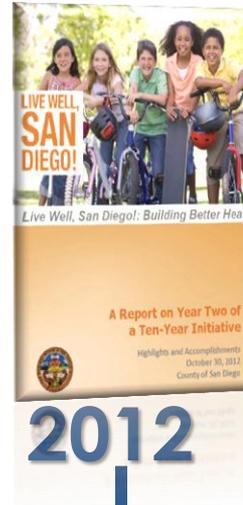
**LIVE WELL**  
SAN DIEGO



# TRANSFORMATION TAKES TIME



**START**



**2008**

**2010**

**2012**

**2012**

**2014**

**2020**

**2009**

**2011**

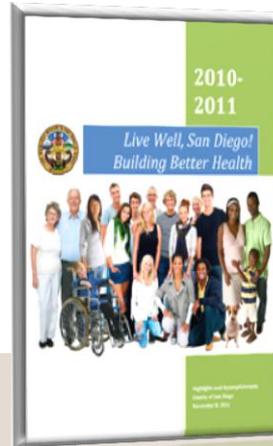
**2013**

**2015**

**2019**



**Beta Test Site**





# LIVE WELL SAN DIEGO: *Measuring for Transformation*

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## Rationale for Methodology

*Wilma J. Wooten, M.D., M.P.H.,  
Co-lead Evaluation Framework*





## Indicator Selection

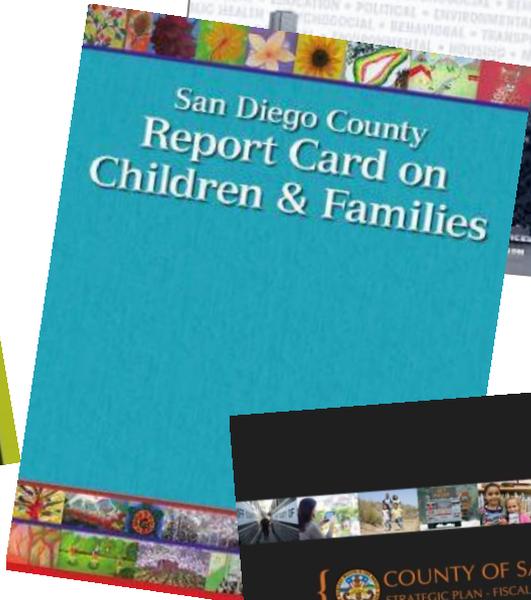
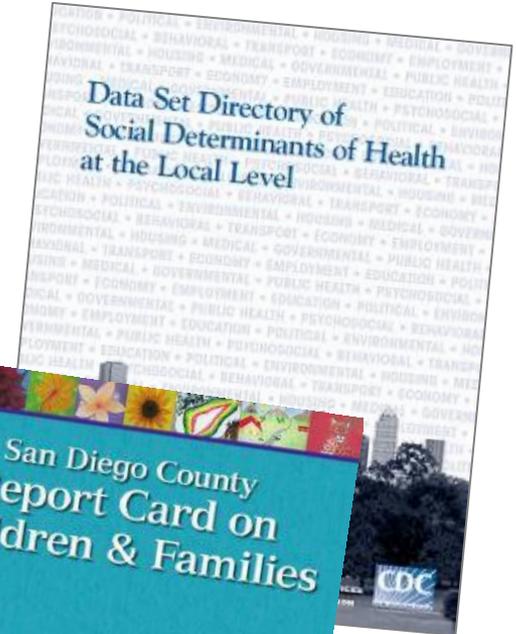
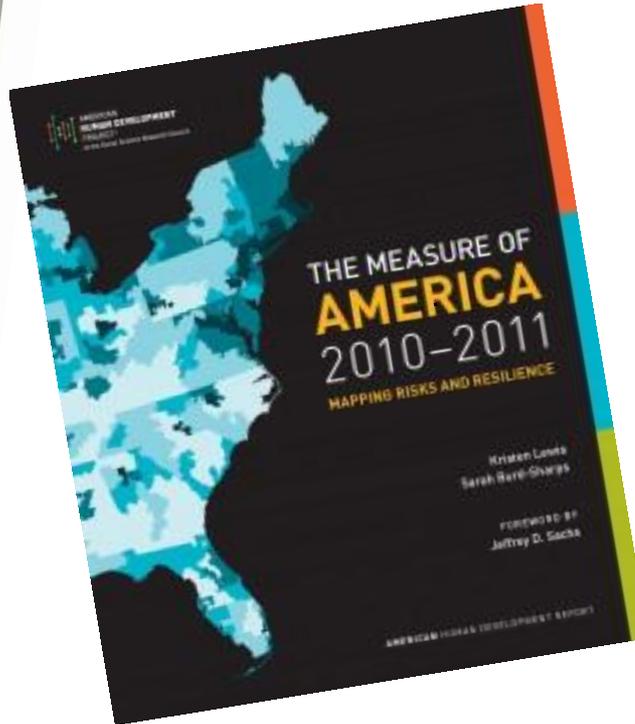
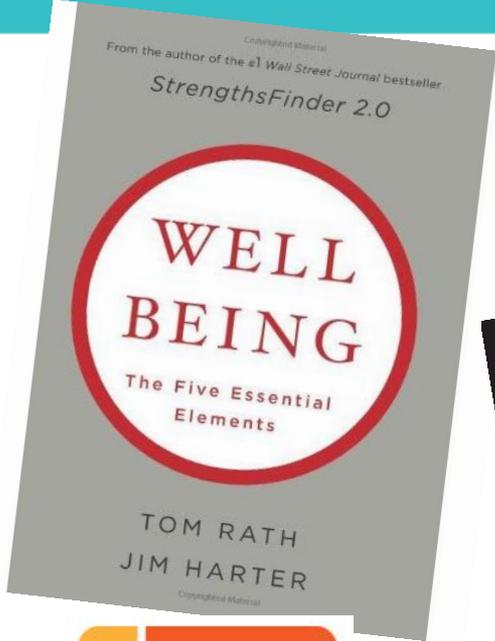
- Keep it simple: a few widely used and understood indicators that resonate
- Indicators that can be “sliced and diced” a number of ways
- Indicators that are comparable to other jurisdictions as well as areas and communities across our region



# BEST PRACTICES



**LIVE WELL  
SAN DIEGO**



**County Health Rankings**  
Mobilizing Action Toward Community Health  
[countyhealthrankings.org](http://countyhealthrankings.org)



# MEASURING RESULTS



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# THE THINKING BEHIND COLLECTIVE IMPACT



## IN SIMPLEST TERMS

1. We can do more together than we could ever do alone
2. We can do different things (things each of us is best at) while contributing to the same positive change
3. We can structure how we do things to draw from the research and best practice, leverage each other efforts, and measure our individual contributions as well as our cumulative impact

# WHAT IS COLLECTIVE IMPACT?



Cross-sector leaders within diverse organizations focus on the same vision to address large-scale social problems



# COLLECTIVE ACTION TO COMMUNITY IMPACT



## *Actions We Take Collectively Across Sectors*

**County Governments**

**Business**

**Community & Faith-Based  
Organizations**

**Schools**

**Healthcare & Technology Providers**

**Law Enforcement & Courts**

**Active Military/Veterans**

**Other Local Jurisdictions**

## *Results We Seek for Community Impact*



HEALTH



KNOWLEDGE



STANDARD  
OF LIVING



COMMUNITY



SOCIAL



# COLLECTIVE ACTION TO COMMUNITY IMPACT



## *Actions We Take Collectively Across Sectors*

County Government

**Health Care Providers**

Community & Faith-Based Organizations

Business

Schools

Law Enforcement and Courts

Military

Other Local Jurisdictions

## *Results We Seek or Community Impact*

**Behavior Changes in Population**

- Short Term: w/in 3 years

**Risk Factor Changes in Population**

- Mid-Term: w/in 7 years

**Outcome Changes in Population**

- Long Term: w/in 10 years

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# COLLECTIVE ACTION FOR MEASURABLE IMPACT



## Actions We Take

## Results We Seek

Approach	Program or Effort	Objective
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## Population Outcomes

**Short Term:** w/in 3 years    **Mid-Term:** w/in 7 years    **Long Term:** w/in 10 years



TOP TEN INDICATOR



# COLLECTIVE ACTION FOR MEASURABLE IMPACT:

## Reducing Chronic Disease



### Actions We Take

Approach	Program or Effort	Objective
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#### HHSA



#### LUEG



#### CBO



#### Business



#### Schools



#### Other local jurisdictions



### Results We Seek

## Population Outcomes

**Short Term:** w/in 3 years    **Mid-Term:** w/in 7 years    **Long Term:** w/in 10 years



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# 5 CONDITIONS OF COLLECTIVE IMPACT



**Common Agenda**

**Shared  
Measurements**

**Mutually  
Reinforcing  
Activities**

**Continuous  
Communication**

**Backbone  
Organization**

John Kania & Mark Kramer. *Collective Impact*.  
*Stanford Social Innovation Review*. Winter 2011.

# 1 – COMMON AGENDA



Shared vision for change



**LIVE WELL**  
SAN DIEGO

Building  
Better  
Health

Living  
Safely

Thriving

# 2 – SHARED MEASUREMENTS



Using the same measurement system to track progress

*Actions We Take Collectively  
Across Sectors*

*Results We Seek  
for Community Impact*

County Governments

Business

Community & Faith-Based  
Organizations

Schools

Healthcare & Technology Providers

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Other Local Jurisdictions



HEALTH



KNOWLEDGE



STANDARD  
OF LIVING



COMMUNITY



SOCIAL

# 3 – MUTUALLY REINFORCING ACTIVITIES



Each partner uses their unique skills to do their part-differentiated but coordinated activities

The screenshot shows the 'PARTNERS' page on the Live Well San Diego website. At the top, there is a navigation bar with 'ABOUT', 'NEWS', 'CALENDAR', 'PARTNERS', 'START LIVING WELL', 'MAKE AN IMPACT', and 'JOIN US'. Below the navigation, the main heading is 'GET TO KNOW OUR PARTNERS'. A paragraph explains that Live Well San Diego involves partners in all sectors, from government to business, to schools, to faith-based and community organizations, working together for a healthy, safe, and thriving San Diego County. A 'Learn More' button is provided. Below this is a photo of a diverse group of people, with a callout for 'SENIOR COMMUNITY CENTERS' mentioning their partnership since January 10, 2014, and a 'Read More' link. At the bottom, a 'Tips & Tools for Partners' section features a tree diagram with four categories: Best Practices for Businesses, Best Practices for Schools, Best Practices for Cities and Governments, and Best Practices for Community & Faith-Based Organizations.





**Consistent and open communication – Partners regularly share results with each other**

Regional  
Leadership  
Teams

Integration  
Leadership  
Team

LiveWellSD.org  
and Live Well  
blogs

Upcoming  
Partner events  
and summits

# 5 – BACKBONE ORGANIZATION



Serves as backbone for the entire initiative – helps mobilize, coordinate and facilitate





# COLLECTIVE ACTION TO MEASURABLE IMPACT

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*Shared Measurements*





## Research says

- Healthy eating and active living are behaviors associated with variations in **life expectancy** and all aspects of a person's well-being

## Best practices are

- School Wellness Programs
- Farm-to-School Initiatives
- Safe Routes to School



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# School Sector: BMI Toolkit

## *BMI Surveillance*





# CHULA VISTA ELEMENTARY SCHOOL DISTRICT HEIGHT & WEIGHT PROJECT

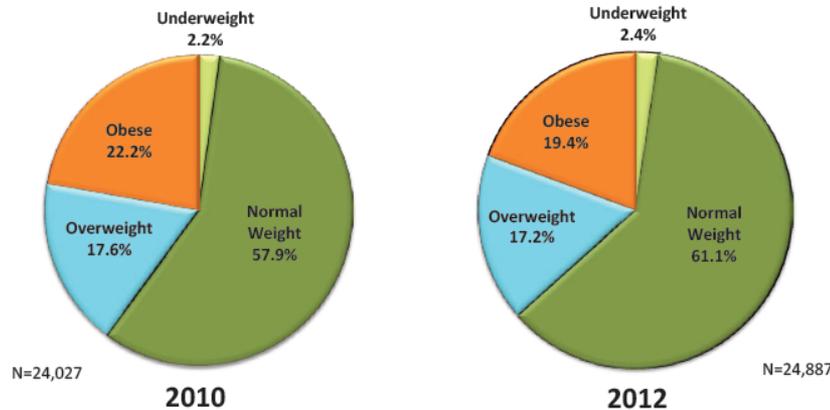


- 2010 CVESD measured over 25.000 preschool - 6<sup>th</sup> grade students
  - GOAL – Get a “first look” at grade level groups to use as a starting point
- 2012 CVESD repeated the project measuring close to 26.000 preschool – 6<sup>th</sup> grade students
  - GOAL – To see if District and School level interventions had any effect on H&W measures



Figure: Percent of students in each weight category, all grades (N = 24,887)\*\*

## Chula Vista Elementary School District Body Mass Index (BMI) Project Kindergarten through Sixth Grade



Percent of students in each weight category

### Changes

The # of students in the Normal range *increased* by 3.2%

The # of students in the Obese/Overweight range *decreased* by 3.2%

Source: Chula Vista Elementary School District, 2010 and 2012; Compiled by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit.



## Problem: To combat childhood obesity

### 2010

Almost 40% of the students were at an unhealthy weight, and with every proceeding grade, that unhealthy range grew larger.

### 2012

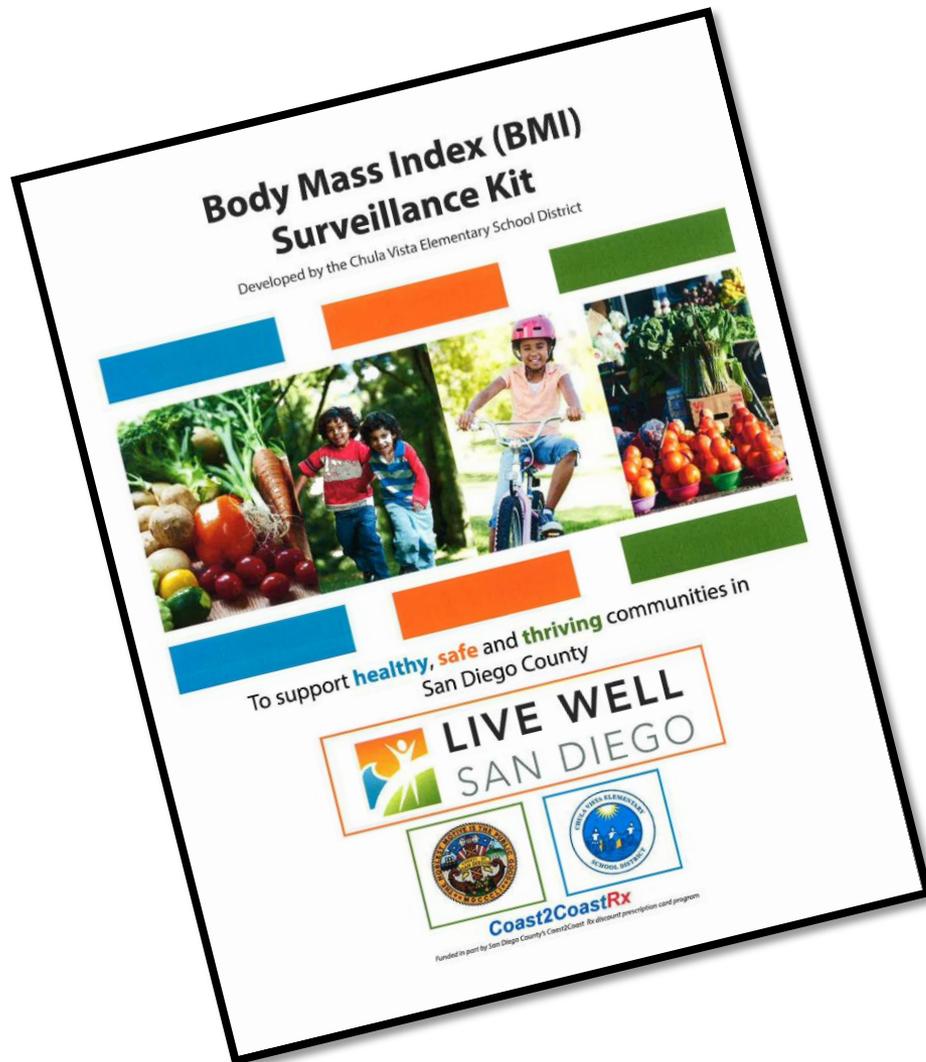
There was a 3.2% decrease in obese or overweight range for all students, and a 3.2% gain in the normal range. Additionally, there was a decline in the obese range at every grade level, especially at the sixth grade (5.1%).

## Intervention: Implemented the school wellness plans

# BMI Toolkit



**LIVE WELL  
SAN DIEGO**



- Provides a replicable model for gathering surveillance data in schools and/or school districts.
- Data can be used to identify age, grade, gender, individual school and district results.
- Translated into a strategic and focused planning, policy development, and implementation district wide or school-by-school.



## Research says

- Access to healthcare and healthcare screening can lead to early diagnosis and treatment which may reduce the risk of premature death and improve a person's **life expectancy**.

## Best practices are

- Education about the importance of screenings for early detection and diagnosis.
- Regular doctor check-ups, healthy diets and increased exercise to prevent chronic disease



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***All Sectors: Love Your Heart***  
***Blood Pressure Screenings***





## Population-Based Strategies to Combat Heart Disease and Stroke



Ama  Corazón

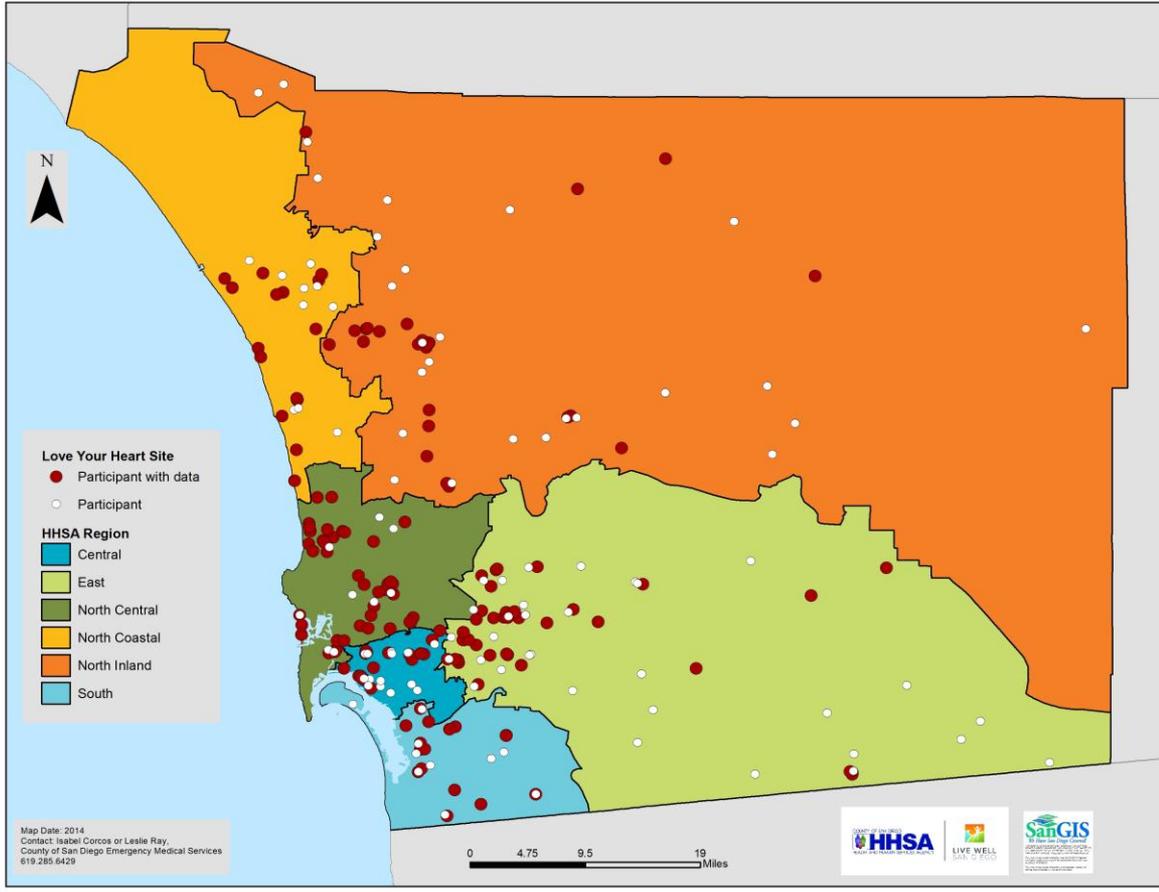
Love  Heart

**Feb 14, 2014 - Blood Pressure Screening**

# OUR PARTNERS



- ♥ Fire stations, libraries, airport, businesses, healthcare facilities, etc.)
- ♥ Acted as public-facing or internally-focused Love Your Heart sites
- ♥ Actively promoted the Love Your Heart event to the public
- ♥ Collected and submitted data on all BP's performed
  - ♥ Sites represented by red dots submitted blood pressure range data
  - ♥ Sites represented by white dots submitted total blood



# COLLECTIVE IMPACT



- 17,774 Blood Pressure Screenings conducted at over 200 sites across 60 organizations and County facilities
- 57% (10,079) BP results not provided; 43% (7695) provided
- 3781 (normal BP); 3908 (51%) had abnormal BP
- Essentially 1 out of every 2 individuals with BP levels provided had elevated blood pressure
- 57 individuals identified as having urgent or emergent hypertension requiring immediate medical referral

Ama  Corazón

Love  Heart



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***Healthcare Sector:  
The Right Care Initiative  
and its Be There Campaign  
Provider and Patient Activation***



# Participants Include:



LIVE WELL  
SAN DIEGO



MultiCultural IPA  
MultiCultural Primary Care Medical Group, Inc.



Right Care  
Initiative

- Communities of Best Practices
- Sharing BP/Cholesterol Data



*The campaign  
to make  
San Diego a  
heart attack and  
stroke-free  
zone.*

**be there.**  
*san diego*



- **Concept: “Heart Attack and Stroke-free Zone**
  - Audacious goal to capture attention
  - Extends the risk reduction efforts to all citizens
  - Actively engages persons in their own health (care)
  - Conveys ownership to population
  - Taps in to community pride
- **Aim:** Achieve both screening for risk factors and compliance with interventions
- **Funding:** philanthropy, CTG , CMMI round-2 pending
- **Leadership:** Private-public partnership

# Be There Campaign



 **LIVE WELL**  
SAN DIEGO



IT'S HER TIME TO SHINE.  
BE THERE.

Heart Attack and Stroke are preventable. See your doctor today to find out your risk for heart disease and stroke and to get on the right treatments to reduce your risk for premature death.

**Take charge of your health today and visit:**  
[www.betheresandiego.org](http://www.betheresandiego.org)



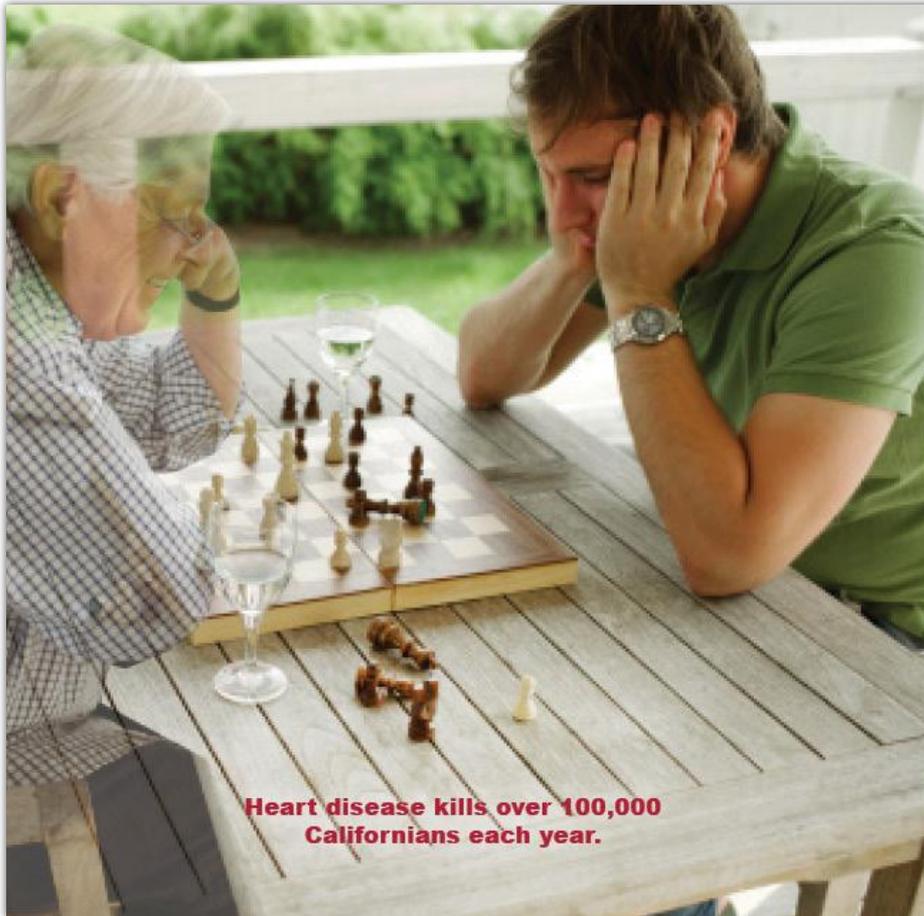
**be there.**  
*san diego*

The campaign to make San Diego a heart attack and stroke-free zone.

# Be There Campaign



 **LIVE WELL  
SAN DIEGO**



**Heart disease kills over 100,000  
Californians each year.**

DAD, YOU NEVER LET ME WIN.  
NOW, I WOULD DO ANYTHING TO  
HAVE YOU BEAT ME ONE MORE TIME.

Heart Attack and Stroke are preventable. See your doctor today to find out your risk for heart disease and stroke and to get on the right treatments to reduce your risk for premature death.

**Take charge of your health today and visit:  
[www.betheresandiego.org](http://www.betheresandiego.org)**

The campaign to make San Diego a heart attack and stroke-free zone.

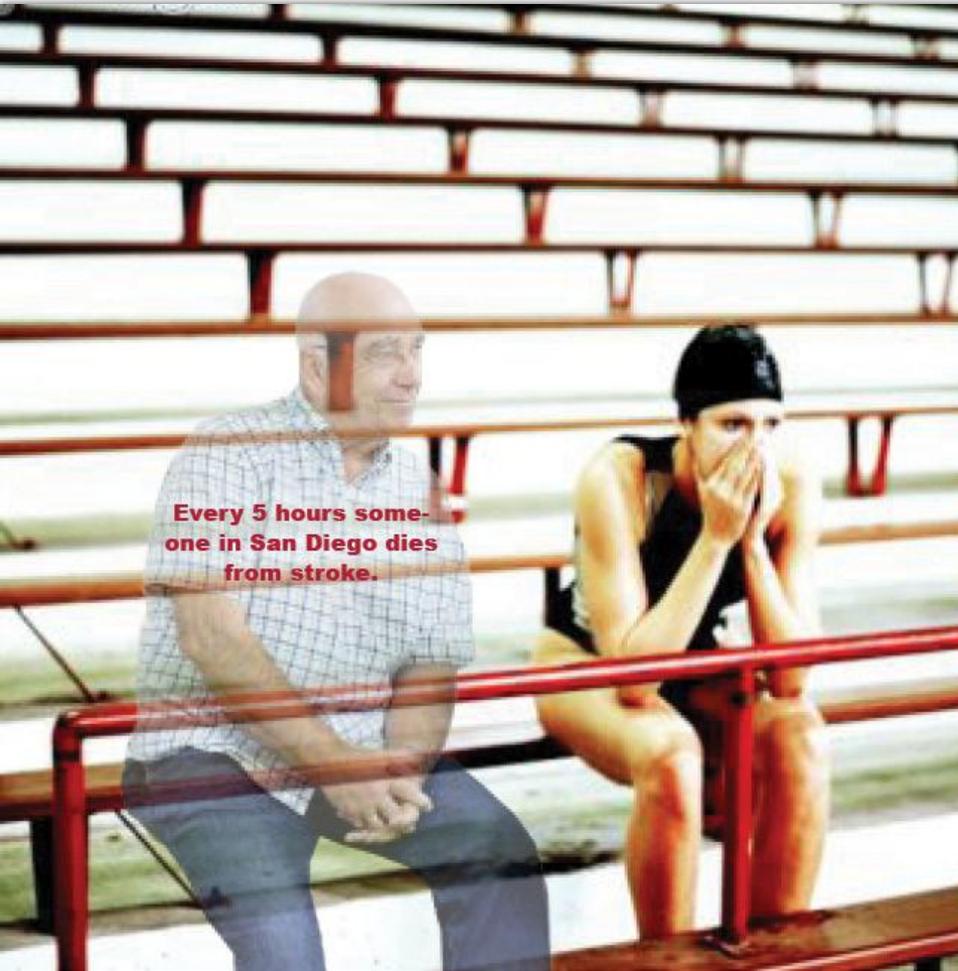


**be there.**  
*san diego*

# Be There Campaign



 **LIVE WELL  
SAN DIEGO**



**Every 5 hours some-  
one in San Diego dies  
from stroke.**

“THE THING I MISS MOST, DAD,  
IS OUR HEART-TO-HEARTS.”

Heart Attack and Stroke are preventable. See your doctor today to find out your risk for heart disease and stroke and to get on the right treatments to reduce your risk for premature death.

**Take charge of your health today and visit:  
[www.betheresandiego.org](http://www.betheresandiego.org)**

The campaign to make San Diego a heart attack and stroke-free zone.



**be there.**  
*san diego*



## Research says

- That employee wellness programs improve employee health and well-being

## Best practices are

- Effective communication strategies.
- Opportunities for employees to engage.
- Leadership engaged at all levels.
- Use of existing resources and relationships.
- Continuous evaluation.



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# ***Business Sector: LiveWell@Work***

## ***A Worksite Wellness Strategy***





*Journal of Occupational and Environmental Medicine (New Study, April 2011)*

- Study conducted by Health Enhancement Research Organization (HERO)
- Showed that high-quality employee wellness programs offered by small businesses improve employee health and well-being which, in turn, decreases absenteeism, healthcare costs, and disability claims
- Showed that workplace wellness can be successful in smaller businesses, as well as their larger counterparts





## Implement Worksite Wellness Programs

### Objective:

- Increase # of employers who develop/enhance/implement worksite wellness programs (cardiovascular health focus – stroke and heart attack prevention)
- Increase # of employers that implement systems to increase employee uptake of clinical prevention services.

### Key Activities:

- Establish CCPS Leadership Advisory Team and Employers Stakeholders Work Group.
- Identify status of workplace wellness program and policies.
- **Develop system to evaluate worksite wellness programs and policies.**
- Implement an outreach and communication plan.
- Develop/launch a database (website) for employers.
- Recruit employers, conduct formal worksite wellness assessment, and provide technical assistance for implementation

# ACCOMPLISHMENTS

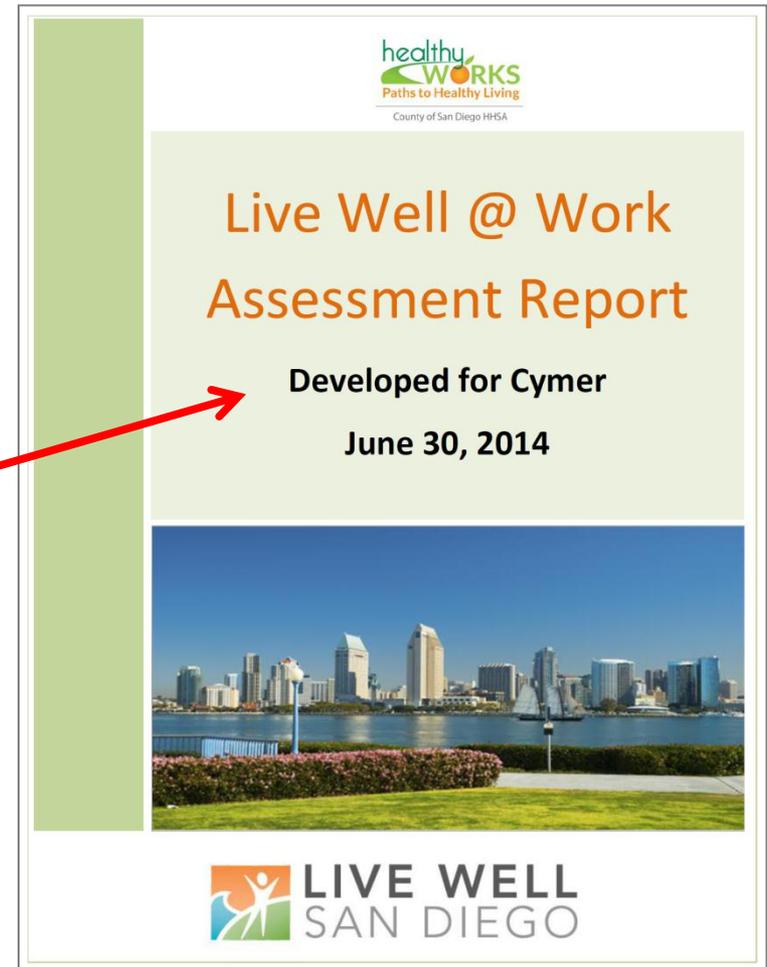


- Completed an **initial baseline inventory** of employer policies and programs
  - 120 participated: 61% large employers > 500 employees (N=73), 39% small to mid-sized employers <500 employees (N=47)
  - 18 industry sectors represented
    - 64% of employers indicated that they offer some kind of worksite wellness programs or activities.
    - 59% of employers indicate that they do not have worksite wellness policies in place.
    - 22% of employers plan to offer worksite wellness programs or activities within the next six months.
- Established “Live Well @ Work” branding
- Established Worksite Wellness Policy and Program Assessment tool
- Developed and launched worksite wellness website with resource library
  - Tools and resources covering over 20 key worksite wellness topics
  - Developed the *Live Well @ Work* Toolkit and Action Plan



## Current status:

- Recruited 12 large employers to-date (in various stages of engagement) :
  - Scripps Health
  - SDG&E
  - Encore
  - UCSD
  - Watkins
  - Harrah's
  - Cohu
  - **Cymer**
  - Salk Institute
  - San Diego Police Department
  - City of Chula Vista
  - SD Convention Center



# NEXT STEPS



- Continue to recruit additional employers
  - Target: 15 additional in FY13-14
  - Continue thru other funding after CTG ends
- Technical Assistance ongoing
  - Based on assessments
  - **Toolkit and Action Plan**
  - Policy development
  - Programmatic strategies
  - Preventive services utilization

LIVE WELL @WORK

Promoting Prevention and Cardiovascular Health in the Workplace

Support your employees' heart health starting today.

A 12-Month Action Plan

Made possible by the Centers for Disease Control and Prevention (CDC) through the County of San Diego Health and Human Services Agency.

healthy WORKS  
Partners for Healthy Living  
County of San Diego/HRSA

UC San Diego  
SCHOOL-MEDICINE

LIVE WELL  
SAN DIEGO

American Heart Association  
American Stroke Association



# SIGNS OF PROGRESS

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# ENCOURAGING TREND: 3-4-50



## 3-4-50 Deaths Among San Diego County Residents, 2000-2012



† 3-4-50 Deaths include Stroke, Coronary Heart Disease (CHD), Diabetes, COPD, Asthma, and Cancer.

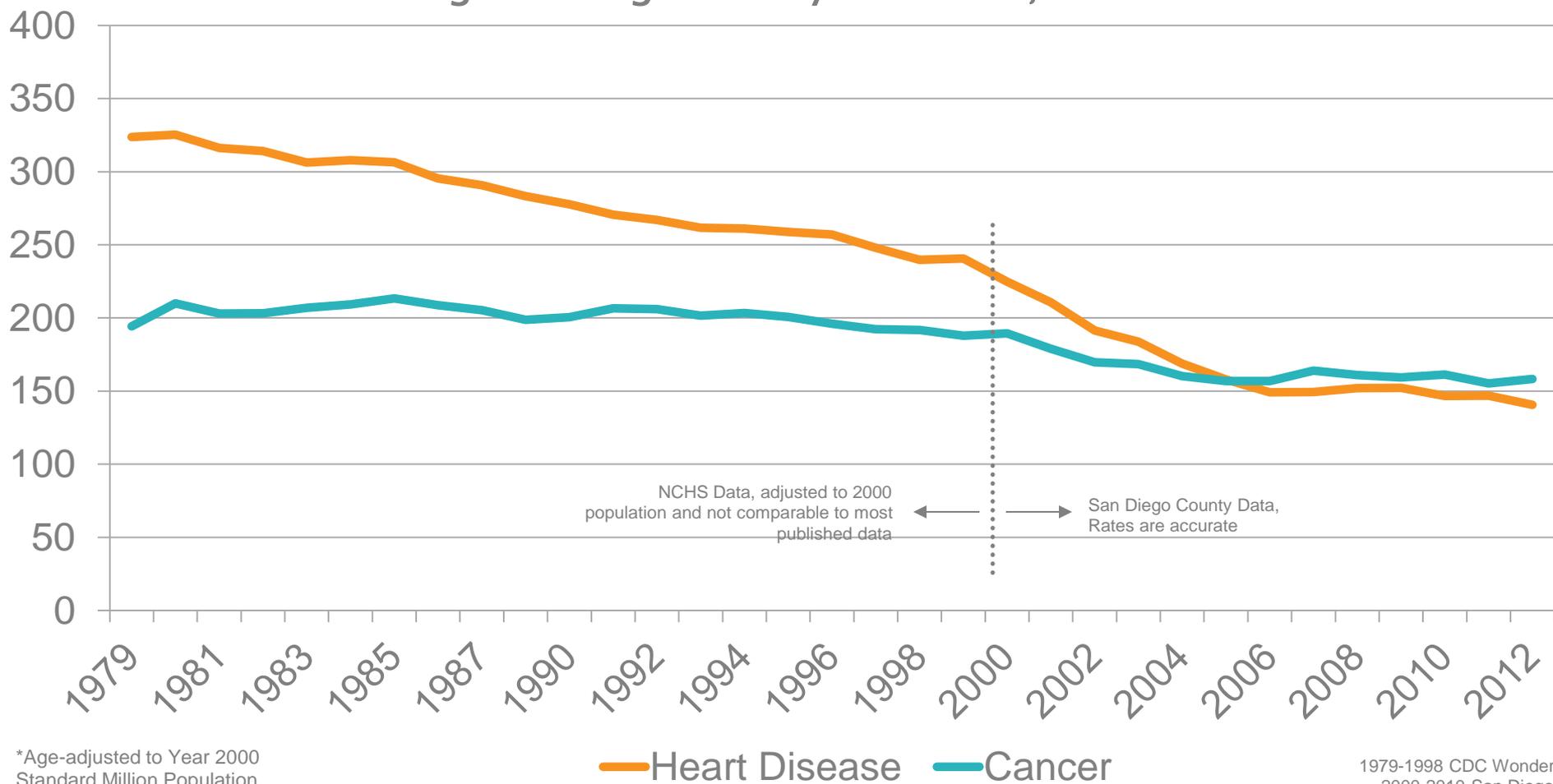
Source: Death Statistical Master Files (CA DPH), County of San Diego, Health & Human Services Agency, Epidemiology & Immunization Services Branch; SANDAG, Current Population Estimates, 10/2012.

Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Community Health Statistics, 5/8/2014.

# ENCOURAGING TREND: HEART DISEASE



## Trends For Cancer vs Heart Disease Among San Diego County Residents, 1979–2012



NCHS Data, adjusted to 2000 population and not comparable to most published data

San Diego County Data, Rates are accurate

— Heart Disease — Cancer

1979-1998 CDC Wonder  
2000-2010 San Diego  
County Death Data

\*Age-adjusted to Year 2000  
Standard Million Population

All rates are per 100,000 population. Adjusted rates are adjusted to 2000 U.S. Standard Population.  
Source: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Death Statistical Master Files; SANDAG January 1 population estimates (2001-2013 estimate released January 2014)

# Stroke Deaths by Race/Ethnicity

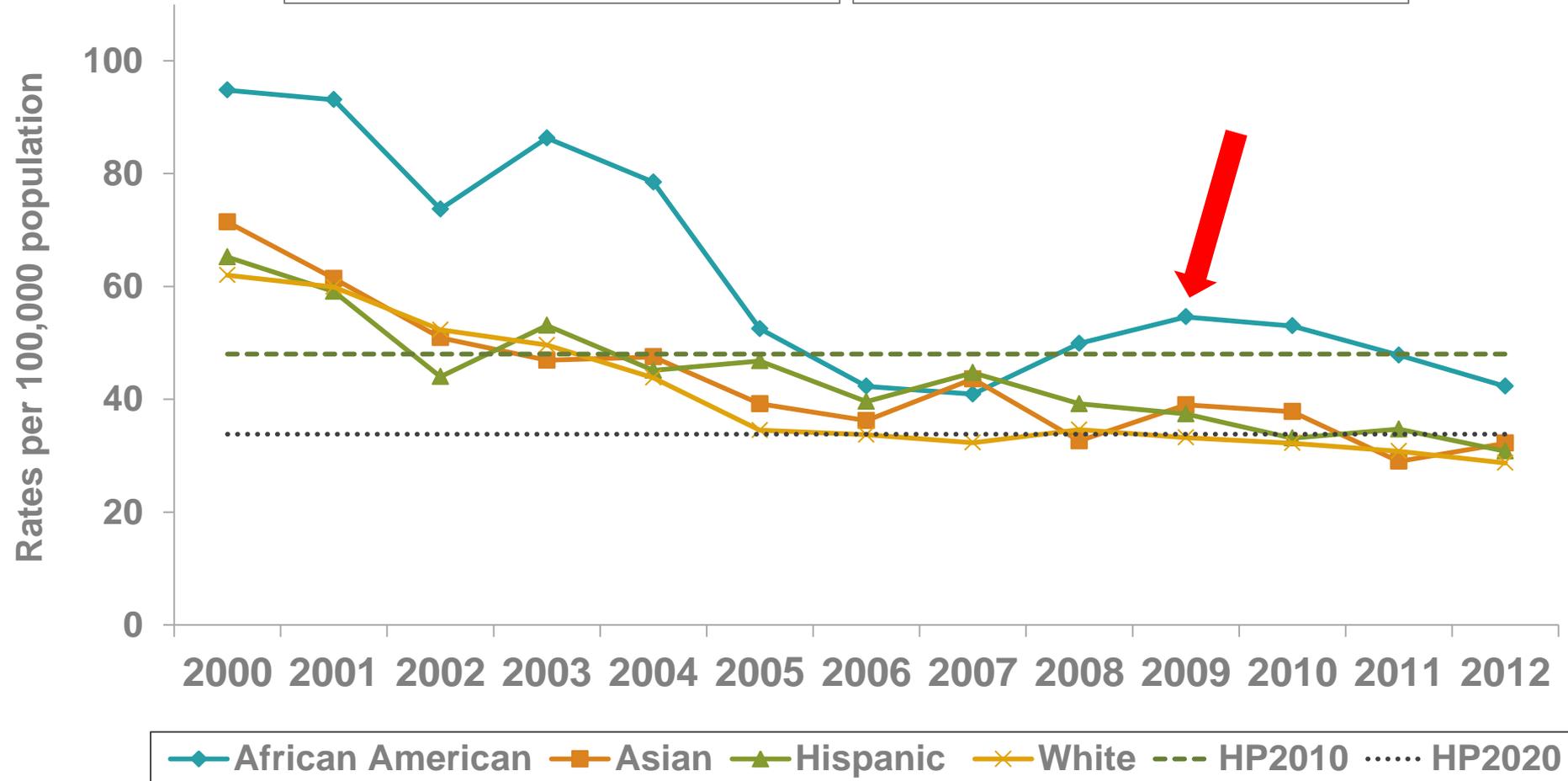
San Diego County, 2000-2012



## Age-Adjusted Rates

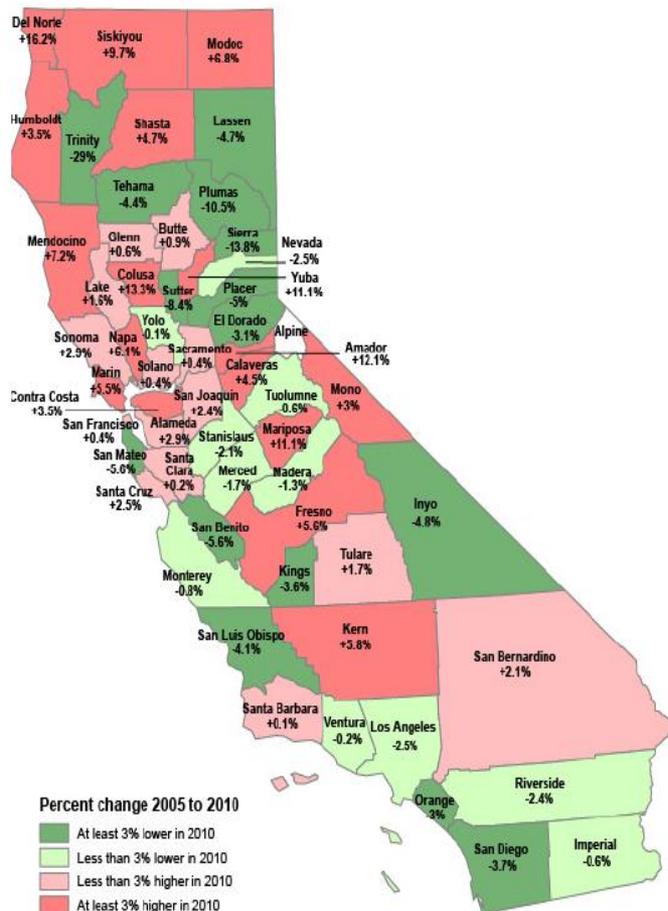
**Healthy People 2010 Target:**  
48 deaths per 100,000 population

**Healthy People 2020 Target:**  
33.8 deaths per 100,000 population



All rates are per 100,000 population. Adjusted rates are adjusted to 2000 U.S. Standard Population.  
Source: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Death Statistical Master Files; SANDAG January 1 population estimates (2001-2013 estimate released January 2014)

# ENCOURAGING TRENDS: 10 YEARS OF OBESITY PREVENTION WORK



Between 2005 and 2010, the total % of children that are overweight/obese decreased by 3.7% in San Diego County - the biggest percentage decline among the top 10 largest counties in California

Source: Babey SH, Wolstein J, Diamant AL, Bloom A, Goldstein H. A Patchwork of Progress: Changes in Overweight and Obesity Among California 5th-, 7th-, and 9th-Graders, 2005- 2010. UCLA Center for Health Policy Research and California Center for Public Health Advocacy, 2011.



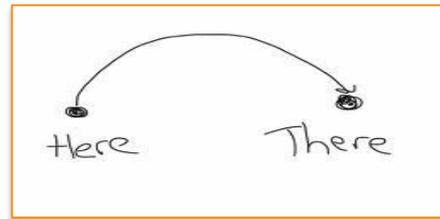
# NEXT STEPS: STRENGTHENING DATA-INFORMED DECISION MAKING

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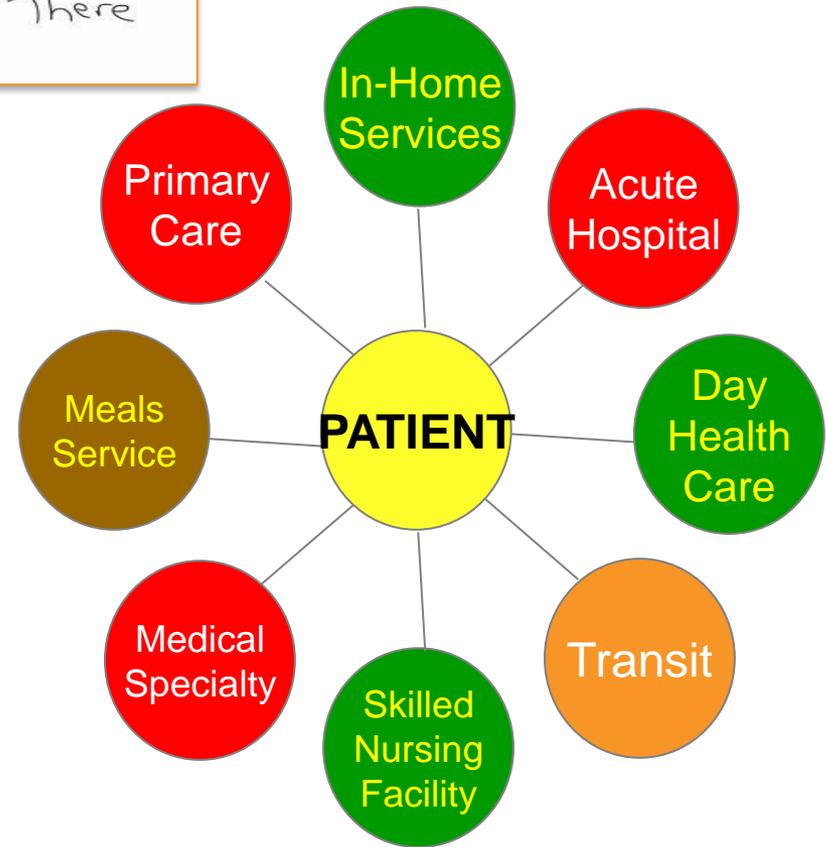
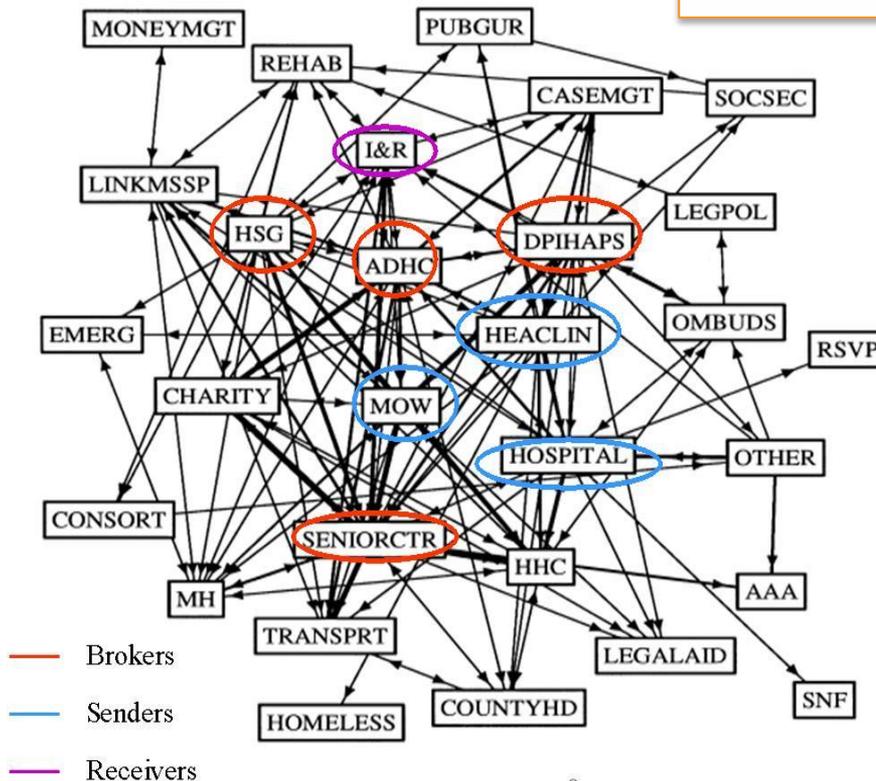
## *Knowledge Management*



# ACCOUNTABLE CARE COMMUNITY



Client Referral Patterns



# SAN DIEGO KNOWLEDGE EXCHANGE



# MONITORING INDICATORS

- Track short-term, intermediate, and long-term outcomes that feed the top indicators
- Utilize a Performance Management Tool
- Measure Collective Impact



*Row in the same direction  
for collective impact*



LIVE WELL  
SAN DIEGO



# Cultivating and Maintaining *Live Well San Diego* Partnerships



SEARCH

SHARE

ABOUT CALENDAR **PARTNERS** START LIVING WELL MAKE AN IMPACT JOIN US NEWS

HOME // PARTNERS

## GET TO KNOW OUR PARTNERS

*Live Well San Diego* involves partners in all sectors – from government, to business, to schools, to faith-based and community organizations – through a shared purpose. Working together allows for planning and implementation of innovative and creative projects to bring *Live Well San Diego's* vision of a healthy, safe and thriving San Diego County to life.

[Learn More](#)



SENIOR COMMUNITY CENTERS  
SENIOR COMMUNITY CENTERS





**Integration of thought, action, purpose**

# TO LEARN MORE



 **LIVE WELL  
SAN DIEGO**

Learn how you can  
participate in  
*Live Well San Diego*

Visit the  
“Join Us” page at  
**LiveWellSD.org**

Or

Email us at

[LWSD.HHSA@sdcounty.ca.gov](mailto:LWSD.HHSA@sdcounty.ca.gov)



The screenshot shows the homepage of the Live Well San Diego website. At the top, there is a navigation bar with the Live Well San Diego logo and links for ABOUT, NEWS & SUCCESS STORIES, CALENDAR, PARTNERS, START LIVING WELL, MAKE AN IMPACT, and JOIN US. Below the navigation bar is a large hero image of a woman and a child playing with a dog in a park. The text on the hero image reads "STRIVING TO CREATE A COUNTY THAT IS HEALTHY, SAFE AND THRIVING." and includes a "JOIN US" button. Below the hero image is a paragraph of text: "Live Well San Diego is an initiative of the County of San Diego to improve health and wellness for all residents. It represents a shared vision that can only be accomplished through collaboration across partners from every sector. This vision calls on every resident to take action to improve their own health, safety and well-being, as well as that of their families and neighbors." Below this text are three main content sections: "START LIVING WELL" with a "Read More" button, "NEWS AND SUCCESS STORIES" with a "Read More" button, and "MAKE A PROMISE TO LIVE WELL" with a "Share" button. At the bottom of the page, there is a footer with the County of San Diego logo, the Live Well San Diego logo, and links for ABOUT, CONTACT, and START LIVING WELL.



# CONTACT INFO



 LIVE WELL  
SAN DIEGO

COUNTY OF SAN DIEGO



# HHSA

HEALTH AND HUMAN SERVICES AGENCY

[www.sdcounty.ca.gov/hhsa](http://www.sdcounty.ca.gov/hhsa)

[www.livewellsd.org](http://www.livewellsd.org)

**(619) 338-2895**

[www.sdhealthstatistics.com](http://www.sdhealthstatistics.com)

[dale.fleming@sdcounty.ca.gov](mailto:dale.fleming@sdcounty.ca.gov)

**(619) 685-2214**

[wilma.wooten@sdcounty.ca.gov](mailto:wilma.wooten@sdcounty.ca.gov)

**(619) 542-4181**