



Work and Performance Plan FY2022 (HLT)

Gibbie Harris, Public Health



SECTION 1: DEPARTMENT KEY INITIATIVES

Key Initiative #1 -- Health and Human Services Integration Initiative

Link to Strategic Business Plan:

No

Description:

Health and Human Services (HHS) Integration seeks to better coordinate service delivery across Mecklenburg County's Consolidated Human Services Agency which includes the Department of Community Resources (DCR), Community Support Services (CSS), Department of Social Services (DSS) and Public Health (PH). HHS Integration will be achieved by:

- Connecting data software systems across HHS departments to help customers receive information and/or referrals for needed services regardless of which HHS department they first interact with.
- Fully expanding usage of the Single View of the Customer technology platform that streamlines HHS programming to help customers easily access services.
- Ensuring Mecklenburg County residents can receive HHS services as close to their homes as possible through Community Resource Centers.

Rationale:

Many residents receive services from multiple HHS departments, but efficient coordination of these services is difficult because of operational, policy and technology constraints.

HHS Integration takes a broader look at how the HHS Agency can be best organized to serve Mecklenburg County residents. HHS Integration is important because the initiative will:

- Enhance collaboration across HHS departments to offer programs and services in a more coordinated and comprehensive manner.
- Expand the functionality of the Single View of the Customer technology platform to improve customer experience when seeking or receiving services across HHS departments.
- Help HHS customers have a clearer path to independence and stability through greater access to HHS benefits and programs.

Completion Date:

This is a multi-year plan with the final completion date yet to be determined. (The updates or milestones below will be completed during FY22.)

Updates/Project Milestones:

- • Revise the Community Resource Center governance charter to ensure appropriate staffing levels and performance expectations for each HHS department.
- Develop and implement standardized integrated Health & Human Services policies and procedures designed to holistically assess customer needs across CSS, DCR, DSS and PH.
- Develop and implement a project plan for the full implementation of the Single View of the Customer and NCCARE 360.
- Develop a communication strategy outlining how HHS Integration will affect each HHS department, specifically the implications for staff and customers.
- Create and utilize a survey tool to assess staff understanding of HHS integration.



Outcomes/Measures:

End of year reporting

Director Comments: (Year-end)

Executive Team Comments: (Year-end)



Key Initiative #2 -- Community Violence/Community Safety Initiative

Link to Strategic Business Plan:

No

Description:

Collaboration between Mecklenburg County Public Health and Atrium Health, Mecklenburg County's only Level 1 trauma center, working with community partners to develop and implement a plan to address community violence and community safety.

Rationale:

The Mecklenburg County Community Health Assessment (2017-18) identified 4 health priorities, including violence prevention. Health equity and social determinants of health are considered overarching concerns and a part of each priority. Homicide rates in Mecklenburg have increased 26% between 2016 and 2019. Violence takes many forms in our communities including intimate partner violence, child abuse, sexual violence and bullying. Violent acts are not just physical in nature but can be emotional and even social media is used as a platform for bullying and threats. Exposure to violence can negatively impact individuals in a variety of ways. The number of homicides and other violent acts in Mecklenburg has increased significantly in CY 2019, resulting in the need for a more comprehensive approach to violence prevention and community safety. Violence is being considered a public health issue.

Atrium Health serves as the regions only Level 1 Trauma Center. A retrospective cohort study of the trauma registry from 2009-2015 showed 25% of patients discharged from an initial violent injury returned with a second injury. Overall hospital charges in this cohort was \$53 million, with an additional \$16M in charges from subsequent recidivist injuries. And overall, these patients had increased disability and premature death.

Approaching violence as a public health issue means searching for the root causes of this epidemic and using data, tools, and evidence-informed best practices to address those causes. There are four steps to the approach: 1) define and monitor the problem; understanding the "who", "what", "when", "where" and "how" associated with it; 2) identify risk and protective factors; understanding what factors protect people or put them at risk for experiencing or perpetrating violence; 3) develop and test prevention strategies; and 4) assure widespread adoption of prevention programs that have been proven effective. Communities are encouraged to implement evidence-based programs and to evaluate the program's success. Dissemination techniques to promote widespread adoption include training, networking, technical assistance, and evaluation.

Completion Date:

This initiative is part of a multi-year plan with FY22 milestones to be completed presented below.

Updates/Project Milestones:

- 1) The newly established Office of Violence Prevention will continue work on the violence prevention strategic plan gathering community input via focus groups, key informant interviews and community surveys with a targeted completion at the end of Q2.
- 2) Launch the Peacekeepers Academy, an interactive learning series to help grassroots community based organizations to develop sound infrastructure and capacity building at end of Q1 to Q2.
- 3) Partner with ReCAST to host a five-part speaker series violence prevention, stress and trauma , sessions will take place at the end of Q1.
- 4) Continue working in collaboration with the City of Charlotte, Youth Advocates Program (YAP), and other partners to reduce violence in the Beattie Ford LaSalle Corridor via Alternatives to Violence
- 5) Increase youth engagement in violence prevention efforts through the 100 Youth Advisory Council.
- 6) ReCAST will host community trainings around trauma informed care to reduce trauma, avoid re-traumatization, build resiliency, improve access to and quality of services provided to historically marginalized communities
- 7) ReCAST will host community workshops around resiliency approaches to address trauma, toxic stress, and anxiety in everyday life and provide community stakeholders with strategies on ways to manage stress and anxiety, tools for self-care, and information about the impact of stress on overall wellbeing



Outcomes/Measures:

Successful completion of project milestones.

Director Comments: (Year-end)

Executive Team Comments: (Year-end)



Key Initiative #3 -- Community HIV Prevention Plan

Link to Strategic Business Plan:

No

Description:

Provide executive direction and project leadership in implementation of the Community HIV Prevention Plan "Getting to Zero Mecklenburg"

Rationale:

Developed in 2017 and supported by the Board of County Commissioners (BOCC), "Getting to Zero Mecklenburg" is a comprehensive plan to lower HIV rates in the community. It is based on the three-fold approach of increased access to testing, Pre-Exposure Prophylaxis (PrEP) and Treatment as Prevention (TasP).

Completion Date:

This initiative is part of a multi-year plan with FY22 milestones to be completed presented below.

Updates/Project Milestones:

The milestones for FY22 are:

1. Utilize CDC EHE award to increase PrEP uptake in AA women, Latinx and people of Trans experience who are at high risk of acquiring HIV
2. Review and update EHE plan as necessary
3. Increase community awareness of HIV/STI and availability of associated care and prevention services.
4. Expand HIV/STI testing through non-traditional methods in the LatinX, African America, MSM, Transgender, African American women and youth (18-24) populations
5. Utilize HRSA EHE award to implement activities that will increase linkage to HIV care for persons newly diagnosed with HIV.
 - a) Utilize HRSA EHE award to implement activities that will increase number of persons who are virally suppressed.
6. Continue development of a Charlotte HIV/AIDS Rapid Tracking System (CHARTS)
7. Continue to build relationships and partnerships with the Faith Based community in the planning and implementation of HIV/STI related activities.

Outcomes/Measures:

Successful completion of project milestones.

Director Comments: (Year-end)**Executive Team Comments: (Year-end)**



Key Initiative #4 -- Response to Communicable Disease Outbreaks and Exposures

Link to Strategic Business Plan:

No

Description:

Ensure timely and appropriate response to communicable disease outbreaks and exposures in the community.

Rationale:

In addition, to our COVID-19 pandemic response (detailed as a separate Key Initiative), the emergence and re-emergence of communicable disease, the threat of bioterrorism and the potential for natural and manmade disaster, all necessitate the local health department be poised to respond immediately and effectively in a coordinated manner. Disease surveillance is vital to provide early indication for action. Environmental Health services help prevent and halt disease transmission via food, facilities, water and mosquitos. Immunization services provide protection in the face of outbreaks or exposures. In the advent of a large event, the entire department may be mobilized, led by Preparedness staff. In recent years, Public Health has had to respond to emerging diseases Ebola and Zika as well as local outbreaks and exposures such as Hepatitis A.

Completion Date:

This is a multi-year plan with the completion date yet to be determined.

Updates/Project Milestones:

The milestones for FY22 are:

1. Review, revise and simulate disaster response plans internally and for the community
2. Meet CDC, North Carolina Public Health accreditation, Mecklenburg County requirements
3. Maintain and manage cross-agency Incident Command System and mobilization plan
4. Guide response to communicable disease outbreaks and exposures through direct services and by providing expert guidance to the medical provider community
5. Provide timely, accurate and actionable information to the public regarding outbreaks or other health advisories.
6. Promote and provide access to vaccines to reduce/prevent the spread of infectious diseases
7. Increase advocacy and opportunities for required childhood immunizations
8. Work with NC DPH on communicable disease response
9. Participate with Mecklenburg County Emergency Preparedness in planning efforts, exercises, etc.
10. Assure Communicable Disease and Environmental Health staff have the resources needed to assess and respond appropriately.
11. Actively work toward 100% of mandated regulatory food and lodging facility inspections
12. Address other environmental public health issues as needed

Outcomes/Measures:

Successful completion of project milestones.

Director Comments: (Year-end)**Executive Team Comments: (Year-end)**



Key Initiative #5 -- Equity and Inclusion Initiative

Link to Strategic Business Plan:

Yes

Description:

Continue the implementation of the County's Equity Action Plan.

Rationale:

Mecklenburg County is committed to addressing its racial inequities through an intersectional analysis. In order to become a more equitable institution, strategies must be implemented and enforced that enhance the work Mecklenburg County has already completed to promote equity and inclusion. The County has partnered with the Government Alliance on Race and Equity (GARE) to create both a racial equity training curriculum for County staff, an Equity Action Toolkit and a three-year enterprise-wide Equity Action Plan. To continue to build the capacity of the organization, it is critical that the County continue to implement the agreed upon action items identified in the Equity Action Plan despite COVID-19.

Completion Date:

This is a multi-year project (FY2020-FY2022).

Updates/Project Milestones:

Continue implementation of the County's Equity Action Plan that were postponed due to COVID-19:

- Continue rollout of "Advancing Racial Equity Training" for all County employees to enhance abilities to advance racial equity.
- Re-establish Department Equity Action Teams (DEAT) for select Departments to begin training and to initiate development of department specific equity action plans (pending further guidance from the County Manager's Office); and
- Provide training on Racial Equity Tool usage to County mid-senior management.

Implementation of FY22 action items for those departments with specific accountabilities.

- 1) Review HLT policies to ensure they align with CLAS standards and propose adjustments as appropriate
- 2) The internal DEAT will continue meeting to operationalize plan objectives. The objectives currently address workforce equity (promotion, retention, etc), infrastructure development (adherence to CLAS standards, employee development, etc), and health equity (community engagement, review of services/delivery, etc).

Outcomes/Measures:

End of Year Reporting

Director Comments: (Year-end)**Executive Team Comments: (Year-end)**



Key Initiative #6 -- MCPH COVID-19 Response

Link to Strategic Business Plan:

No

Description:

Cases of COVID-19 were first reported in NC and in Mecklenburg in March 2020. This global pandemic has dramatically impacted the residents of Mecklenburg County with job losses, shift to remote learning for K-12 and university students, and cancellation of nearly all public events and gatherings. With cases rising during the second half of FY20, health care system capacity was stressed and critical medical supplies were lacking. Public Health agencies, both locally and nationally emerged as leaders of the COVID-19 response. Locally, our department is working with the managers of the County, City and Towns as well as Mecklenburg County Emergency Management to coordinate and communicate response efforts.

Rationale:

With the department providing leadership for the response to COVID-19, we have provided direction and guidance and made shifts in our department to accommodate the work which includes public messaging and communication, setting local policies and mandates, case investigation, contact tracing, adjustment of services, and collaboration with local, state and federal partners. In July 2021, the department organized a 26-person COVID-19 unit to manage our continued response. These positions were approved by the BOCC as part of the FY22 budget and will be funded for a period of two to three years through funding from the federal and State government. The establishment of this unit coincides with the Welcome Back Mecklenburg plan that begins to phase back in the services that had transitioned to virtual formats and allows staff who had been serving in a COVID response role to return their focus to their regular job duties.

Completion Date:

This is an on-going, and evolving initiative

Updates/Project Milestones:

- 1) Ongoing Case investigation and Contact Tracing for COVID-19 as integrated into MCPH Communicable Disease to help reduce new cases and support all facilities experiencing case clusters and outbreaks.
- 2) Provide active outreach and community engagement with community partners to provide COVID-19 education and vaccination
- 3) Partner with community providers to bring vaccination events to prioritized areas/populations.
- 4) Partner with KEPRO to streamline social work services to COVID-19 patients and identified close contacts.
- 5) Continue to offer the COVID-19 hotline to respond to calls from the general public on any issue related to COVID-19
- 6) Collect, analyze and release COVID-19 data
- 7) Communicate regularly with public via website, press conferences and other methods to provide clear and up to date information on preventive measures or new mandates intended to reduce spread

Outcomes/Measures:

End of Year Reporting

Director Comments: (Year-end)**Executive Team Comments: (Year-end)**



Key Initiative #7 -- Health Disparities

Link to Strategic Business Plan:

No

Description:

The BOCC, as part of the FY21 Budget Process, requested a specific county initiative to increase access to and reduce racial disparities in health care, including expanding the Village Heartbeat Program, increasing investments to prevent maternal mortality and severe maternal morbidity, especially for Black women, addressing the social determinants of health, such as housing, transportation, nutrition counseling, healthy foods, lactation support, wellness, access to reproductive health services, stress management, and support for doulas, hiring additional health care professionals to increase service hours at county clinics and investing in mobile health clinics and investing in scholarships and workforce training for public health workers. In addition, the BOCC, also funded an initiative to increase equitable access to food and eliminate food deserts in the crescent. This appropriation would support land acquisition, leasing, subsidy, incentives, goods, or services supporting the effort to mitigate food insecurity. The needs of our communities continue to change as the face of our communities' change. The crescent, especially in the West corridor, is experiencing changes in demographics. There needs to be attention paid to these changes as they influence the location of food deserts in Mecklenburg County.

In addition, the COVID-19 Recovery and Renewal Task Force was established to examine and help address COVID-19 impact issues specific to employees, businesses, public health, education, the economy, and the overall well-being of the Mecklenburg County residents. The Task Force will develop a comprehensive Recovery and Renewal Plan of Action in the following substantive areas:

- Working families and vulnerable populations
- Access to health care and eliminating health disparities
- Housing and homelessness
- Mental and emotional health
- Jobs and workforce development
- Economic recovery, including help for small business
- Food security
- Non-profit recovery and human services
- Arts and culture
- Education and childcare

Rationale:

While Mecklenburg residents have enjoyed improvements in many health indicators, it is well understood that good health is not equally within reach for all demographic groups. Persistent health disparities exist, particularly among African Americans and LatinX/Hispanic communities who experience lower life expectancies compared to White residents. The root causes of these disparities, or social determinants of health, are found in differences in how the places that we live, learn, work, play and worship make good health easy to achieve. To adequately address and eliminate health disparities, we must look holistically at these areas and understand how to address them.

Two key priorities identified in Mecklenburg County's Community Health Assessment were improving access to care and chronic disease prevention. Locally and nationally chronic diseases, such as cancer, diabetes and heart disease, are the leading causes of disability and premature deaths. These conditions disproportionately impact African American and LatinX/Hispanic communities. In Mecklenburg County, prevalence of chronic conditions like hypertension, diabetes, and obesity are as much as three times higher among African Americans compared to White residents.

Despite disparities in chronic health conditions, access to care among these same communities is lower. African Americans are nearly 2 times more likely to be uninsured or avoid care due to cost compared to Whites in Mecklenburg County.



In addition, 1 in 5 mothers in Mecklenburg report inadequate levels of prenatal care. African American infants are 2 times more likely to be born prematurely. African American infants are 5 times more likely to die during their first year of life than White infants.

Food security is an important social determinant of health impacting the ability to achieve and maintain good health and manage chronic diseases. Food security is defined as a household's ability to access nutritious foods, which contributes to an active and healthy life through physical, social, and economic means. In 2018, an estimated 14.9% of Mecklenburg County households reported experiencing food insecurity. Rates of food insecurity are even higher in the six Public Health Priority Zip Codes, who also experience lower median incomes, lower access to grocery stores or supermarkets and are more likely to receive nutrition assistance.

Additionally, not having easy access to grocery stores or supermarkets can lead to poorer diets, which contributes additional risk of chronic conditions like obesity, type-2 diabetes, and heart disease in these communities. These same communities are more likely to be exposed to advertising for unhealthy food products and even when access to food is improved, healthy foods tend to cost more.

Increasing access to healthy food is not just a means for reaching improved health outcomes. Equally as important are the accompanying economic benefits—ranging from new jobs, wages, and tax revenues, to stimulating local economic activity and social cohesion in neighborhoods (PolicyLink, 2013).

Completion Date:

This is an on-going initiative

Updates/Project Milestones:

1. Provide quarterly updates to the BOCC
2. Expand existing prevention resources and services related to COVID-19 disparities
3. Hire one new epidemiology specialist to improve data collection for populations experiencing disparate health outcomes
4. Hire one new LatinX outreach specialist to build partnerships and actively engage with our growing LatinX community
5. Explore mobile vaccination options, including the procurement of a mobile unit
6. Continue to monitor changing demographics and needs within the crescent, define issues and, develop specific strategies to address food insecurity in appropriate locations within the County.
7. Define strategic mobile food options to address changing areas of need within the county.
8. Continue to scale ongoing food security initiatives and best practices in Mecklenburg county public health priority areas like the Healthy Corner Store initiative, edible landscapes and expanding the use of SNAP benefits to farmers markets.
9. Review proposals aimed at creating a program to promote and supplement grocery delivery options for SNAP and WIC participants.
10. Launch citizen advocate program which will hire outreach specialists to improve vaccine uptake among key demographic groups.
11. Establish a COVID-19 learning collaborative within the Village HeartBEAT's TC Elder Community Health Leadership Academy to better understand vaccine hesitancy and barriers
12. Expand multimedia and grassroots education campaigns to improve vaccine uptake among our diverse populations
13. Increase diabetes screening and linkage to care for patients seen in Clinic A through expanded screening criteria and rapid point-of-care testing for hemoglobin A1c.
14. Launch a Maternal and Child Health Community Health Worker Initiative to provide services to high-risk pregnant women and new families, focused on reducing perinatal health disparities.
15. Support grassroots community organizations to pilot initiatives to address health disparities.
16. Hire 2 additional epidemiologists to increase capacity to conduct health disparities focused analyses and evaluations.



Outcomes/Measures:

End of year reporting

Director Comments: (Year-end)

Executive Team Comments: (Year-end)



Key Initiative #8 -- Workplace Culture & Staff Development

Link to Strategic Business Plan:

No

Description:

Mecklenburg County Public Health will offer opportunities for staff engagement at the department, division, and programmatic levels to create a sense of connectedness and pride among employees and programs.

Rationale:

A continued focus on workplace culture is critical to establishing a welcoming environment where staff feel valued and engaged in the work of the department. With COVID-19 causing a shift to remote work for many staff for the past 18 months, it is even more critical that the department maintain and enhance efforts to establish a positive and collaborative work environment for all staff. Further, as MCPH is a large and growing department, we have on-boarded many new team members during this period who have not yet had the opportunity meet coworkers, collaborate with other programs, or have opportunities for fellowship.

Completion Date:

This is a multi-year plan with the completion date yet to be determined.

Updates/Project Milestones:

1. Host a staff appreciation event for public health staff in September to provide all staff with the opportunity to connect with coworkers in a relaxed, COVID-19 appropriate environment
2. Dedicate a portion of the quarterly Middle Managers meetings to staff development activities or opportunities.
3. Participate in the de Beaumont Foundation's Public Health Work Force Interests & Needs Survey (PH WINS) to assess staff development needs and interests
4. Continue to operationalize and reinforce our service essentials (OUR PACTT) and demonstrate our core value that "when we serve each other well, we will better serve our community."
5. Review results from the Employee Climate Survey and internal Customer Satisfaction Surveys and create a plan of action to address any issues of critical importance.
6. Use weekly Health Buzz email to highlight staff accomplishments and examples of superior customer service.

Outcomes/Measures:

End of year reporting ONLY.

Director Comments: (Year-end)**Executive Team Comments: (Year-end)**



Key Initiative #9 -- Executive Leadership Transition

Link to Strategic Business Plan:

No

Description:

Ensure a seamless transition in leadership for the Mecklenburg County Public Health

Rationale:

In July 2021, Health Director Gibbie Harris announced her retirement, effective December 31, 2021 at which time Deputy Director Raynard Washington will move into that role. Since joining the department in March 2020, Raynard Washington has worked closely with Gibbie Harris in the management and oversight of both regular departmental operations as well as leading the county's response to the COVID-19 pandemic. This promotion will create a vacancy for the Deputy Health Director position along with the additional vacancies on the executive leadership team that need to be filled immediately. Ensuring a smooth leadership transition is essential to achieving the goals outlined in this work plan. A formal transition plan for Public Health Director position will be developed and implemented over the first 6 months of the FY 22.

Completion Date:

June 30, 2022

Updates/Project Milestones:

1. Execute transition plan for Public Health Director role (see attachment in "Notes" section of PM System)
2. Meet at least twice per week to orient Raynard to essential functions, internal business operations, community commitments and partnerships, etc. through December 2021
3. Recruit, hire, on-board and develop 12-month plans for the Deputy Health Director and other vacant executive team positions
4. Plan and execute a leadership development, strategic planning and team building retreat for new executive team

Outcomes/Measures:

Successful completion of project milestones.

Director Comments: (Year-end)**Executive Team Comments: (Year-end)**