

**Health Director's Report**  
**April 9, 2015**

**Division / Program: Community Health/School Health**

**(Accreditation Activity 22.1-When the local health department determines that there are compelling unmet health care needs in the community, the local health department shall develop a plan with community leaders and providers to meet the unmet needs, which may include the establishment and provision of such services by the local health department if the department has the authority, capacity and resources to address the unmet needs.)**

**Program description**

- The Child Health Assessment and Prevention Program (CHAPP) will provide well-child assessments in five (5) Durham Public Schools elementary schools: E.K. Powe Elementary School, George Watts Montessori Magnet Elementary School, Glenn Elementary School, Merrick-Moore Elementary School and Oak Grove Elementary School.
- Students and/or siblings age birth to eighteen (18) are eligible for well-child assessment services.
- Students and or their sibling presenting for well child health assessments are evaluated by Child Health Enhanced Role Nurses (CH-ERNS) utilizing interviews, screening procedures, observations, physical assessments, health record reviews, parent conferences and health care provider consultations.
- CH-ERNS establish a system of referral and follow up of health problems through care coordination and make referrals to reconnect clients to their medical home or to establish a new medical home.
- Two (2) sites opened on March 5, 2015: Glenn Elementary School and Oak Grove Elementary School. Client appointments at these sites will begin April 6, 2015.
- Medicaid, self-pay (sliding scale) and Blue Cross Blue Shield (immunizations only) are the accepted forms of payment.

**Statement of goals**

- Take a leadership role in collaborating with parents/guardians and community agencies to identify and provide services to meet the physical and mental health needs of children and families.
- Manage a well-child screening program within a school setting.

**Issues**

- **Opportunities**
  - An additional point of health care access to attain and maintain the optimal health status of students in order to maximize the benefit from their educational experience.
  - Early identification and referral for health conditions (chronic and acute).
  - Medical home referrals for families without a primary health care provider.
  - Promotion and development of positive health practices and attitudes among students and families to promote lifelong wellness.

- Potential for decreased Medicaid costs.
- **Challenges**
  - Child Health Enhanced Role Nurse (CH-ERN) and physician clinical advisor licensing and documentation requirements for program services.
  - Child Health Enhanced Role Nurse (CH-ERN) training and competency requirements.
  - Health Check Billing and Coding requirements.
  - North Carolina Immunization Program requirements.
  - Development of CHAPP program policies and procedures.
  - Coordinating DCoDPH and Durham Public Schools Information Services and Technology on-site services.
  - Agency agreements for staffing, services and equipment.

**Implication(s)**

- **Outcomes**
  - Students and siblings from age birth to eighteen (18) will have access to additional well-child health care services in the community.
- **Service delivery**
  - Child Health Enhanced Role Nurses received specialized training in child health care and will provide comprehensive well child assessments on site in five (5) elementary schools.
- **Staffing**
  - Two (2) CH-ERNS are providing services at this time. One (1) additional CH-ERN is scheduled to begin providing services later this year.
- **Revenue**
  - Medicaid
  - Blue Cross Blue Shield (immunizations only)
  - Self-pay (sliding scale)

**Next Steps / Mitigation Strategies**

- Durham County Department of Public Health, Durham Public Schools and Duke University Department of Community and Family Medicine will continue to plan strategies to increase public awareness of CHAPP services and activities that promote the health and well-being of students and their siblings, from age birth to eighteen (18).

**Division / Program: Community Health Division/ School Health**

**(Accreditation Activity 12.3-The local health department shall participate in a collaborative process to implement population-based programs to address community health problems.)**

**Program description**

- Durham Public Schools (DPS) Board of Education recognizes and supports the need for additional nurses to staff one nurse per school. Eighteen (18) Public Health School Nurses provide traditional school nurse services and exceptional children’s services in the

general population classrooms in forty-nine (49) of the fifty-five (55) traditional and year-round Durham Public Schools.

- An article summarizing a Durham Public Schools Board of Education committee meeting presentation regarding school nurse services was written in The Herald-Sun on March 10, 2015.
- The National Association of School Nurses (NASN) featured The Herald-Sun article on its website on March 12, 2015 under the “School Nurses in the News” section.

### **Statement of goals**

- Obtain support for achieving the recommended NASN student: nurse ratio of 1:750 to student learning.

### **Issues**

- **Opportunities**
  - Local and national recognition and support for increasing the capacity to assign a school nurse to each Durham Public School.
- **Challenges**
  - The recommended nurse: student ratio recommended by the state of NC and the National Association of School Nurses is 1:750. The current ratio is approximately 1:1225 in Durham County. Currently, seventeen (17) Public Health School Nurses provide general school health services for forty-nine (49) Durham Public Schools.

### **Implication(s)**

- **Outcomes**
  - Community agencies/citizens were made aware of the need for increasing the number of school health nurses to provide school nurse services in Durham Public Schools.
- **Service delivery**
  - The School Health Program works closely in collaboration with DPS, families and community partners to implement and manage student school health services.
- **Staffing**
  - Public Health School Nurses

### **Next Steps / Mitigation Strategies**

- The School Health Program staff will:
    - Continue to provide and participate in school site and community based services/activities that promote the health and well-being of students, their families and school staff, and
    - Continue to garner support for the provision of additional school nurses to provide these services.
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**Division / Program: Community Health Division/Parenting Program-Triple P**  
**(Accreditation Activity 12.3-The local health department shall participate in a collaborative process to implement population-based programs to address community health problems.)**

**Program description**

- The Triple P – Positive Parenting Program is widely regarded as one of the world's most effective parenting programs. The program has been strategically designed to allow a public-health, population approach to parenting support and it is one of the few based on evidence from ongoing scientific research.
- Christian Barfield, BSW, MSW, Triple P Coordinator for Durham County Public Health, was interviewed March 16, 2015 on *My Carolina Today* in honor of Parent Awareness Month.

**Statement of goals**

- Provide an awareness and understanding of the clinical and practical benefits of the Triple P Parenting Program.
- Promote education and resources for developing parenting skills,

**Issues**

- **Opportunities**
  - To provide a forum to discuss this evidence based, population-based approach to parenting to the community.
  - To demonstrate Durham County Department of Public Health's commitment to making meaningful changes in family resilience, family functioning and emotional and behavioral outcomes for children throughout the Durham community.
- **Challenges**
  - Destigmatizing requests from parents for assistance is one challenge faced by Triple P. The Triple P Coordinator for Durham County is in the process of developing and implementing the Stay Positive media campaign utilizing materials to raise awareness of parenting issues, including seeking assistance. Banners, public service announcements, parent newspapers, Facebook, Twitter and a local website are strategies to promote this media campaign.

**Implication(s)**

- **Outcomes**
  - At the most recent count, 1,730 contacts were made to public health's Facebook page to visit the Triple P, *My Carolina Today* segment. This number of contacts is more than any other number of Facebook contacts ever made to public health's website.
  - The *My Carolina Today* generated interest from parents and providers in the community at large requesting additional information about this parenting program's interventions and service delivery.

- **Service delivery**
  - Durham County’s Triple P Coordinator will work closely with Durham County Public Health’s Information and Communications Manager to implement the Triple P Stay Positive Media campaign.
- **Staffing**
  - Durham County’s Triple P Coordinator

**Next Steps / Mitigation Strategies**

- Durham County Triple P will continue to offer different levels of Triple P trainings to ensure a range of intensities is offered to accommodate all parents' needs. A range of different delivery types (one-on-one, seminars, groups and online) will support the individual preferences of the parent community and practitioner base.
- Durham County Triple P will continue to train a range of practitioners who have regular interactions with parents. These could include family workers, social workers, psychologists, doctors, nurses, school counselors, mental health providers, teachers and clergy.

**Division / Program: Community Health Division/Communicable Disease Program/Adult Health STD Clinic**

**(Accreditation Activity: Activity 10.3-The local health department shall employ evidence-based health promotion/disease prevention strategies, when such evidence exists.)**

**Program description**

- HIV pre-exposure prophylaxis, or HIV PrEP, is a way for people who do not have HIV but who are at substantial risk of getting it, to prevent HIV infection by taking a pill every day.
- The pill (brand name Truvada) contains two medicines (tenofovir and emtricitabine) that are used in combination with other medicines to treat HIV.
- When someone is exposed to HIV through sex or injection drug use, these medicines can work to keep the virus from establishing a permanent infection.
- When taken consistently, PrEP has been shown to reduce the risk of HIV infection in people who are at high risk by up to 92%.
- PrEP is a powerful HIV prevention tool and can be combined with condoms and other prevention methods to provide even greater protection than when used alone.
- People who use PrEP must commit to taking the drug every day and seeing their health care provider for follow-up every 3 months. (CDC)

**Statement of goals**

- Identify clients at high risk for HIV infection who receive services through the Adult Health STD Clinic; clients at high risk include
  - Men who have sex with other men (MSM) and engage in unprotected anal intercourse
  - Individuals in a sexual relationship with a partner known to have HIV infection
  - Transgender individuals engaging in high-risk behaviors
  - Individuals who trades sex for money, drugs, or housing

- Injection drug users who shares injection
- Provide individualized behavioral risk-reduction counseling to high risk clients
- Provide general information about PrEP, and to determine client eligibility for PrEP
- Provide referral to a PrEP provider (LCHC Primary Care, UNC, Duke)
- Provide follow-up testing as needed, if client presents for that service

### Issues

- **Opportunity**
  - To collaborate with community partners and others to offer a high impact prevention strategy which can significantly reduce the risk of HIV transmission.
  - To serve as a pilot HIV PrEP referral site for the NC Communicable Disease Branch.
- **Challenges**
  - To integrate the HIV PrEP screening and referral process into the busy Adult Health STD clinic with minimal disruption.
  - To develop materials to effectively advertise and explain the PrEP option to clients.

### Implication(s)

- **Outcomes**
  - HIV PrEP referrals will be implemented in mid-April 2015.
  - Data will be collected and submitted to the state for analysis.
- **Service delivery**
  - Clients at high risk for HIV who present for STD services will be referred by the clinic providers to clinic counselors for further risk screening, education, counseling, and referral.
- **Staffing**
  - The Registration staff, STD clinic admin support staff, STD clinic providers and counselors work together to provide this service.
- **Revenue**
  - Clients are not billed for HIV PrEP referrals.
- **Other**
  - Materials have been created and will be posted within DCoDPH, on the DCoDPH website, and in other locations to advertise HIV PrEP.

### Next Steps / Mitigation Strategies

Continue to monitor and review data to enhance and improve the service.

### **Division / Program: Dental Division: Staff Training in Helping Children with Autism** (Accreditation Activity 24.2-Assure competent public and personal healthcare workforce)

#### Program description

- The Dental Division has been participating in training programs that highlight on helping children with Autism.

- As Autism is one of the fastest growing developmental disabilities in the United States (a 2014 CDC report notes that 1 in 58 children in North Carolina are identified with an Autism Spectrum Disorder), staff members received treatment-specific strategies to assist children on the spectrum.
- These disorders contribute to difficulties in repetitive behavior and social and communication issues.

### **Statement of goals**

- Provide staff members learning opportunities to enhance their abilities to effectively interact with children diagnosed with Autism.

### **Issues**

- **Opportunities**
  - The training provided opportunities for the dental team to receive an overview on the Autism Spectrum Disorder (presented by Dr. Nigel Pierce, NCCU), and Autism and Nutrition (Diane Ritchie, RD, DCoDPH).
- **Challenges**
  - Because the Division has been understaffed, and lost days due to inclement weather, trainings had to be scheduled to accommodate clinic operations.

### **Implication(s)**

- **Outcomes**
  - The team enjoyed the training and are more comfortable in their knowledge of Autism. In addition, the training highlighted Asperger's Syndrome (differs from Autism Spectrum Disorders by preservation of linguistic and cognitive development), and encouraged the team to use their understanding of communication styles in their work with all patients.
- **Service delivery**
  - The training has provided the team with a basic understanding of the autism spectrum, reducing stigmas and misperceptions, which will enhance service delivery.
  - The clinic is planning to host a day to treat youth with Autism and Asperger's in April. The presiding faculty member during the session will be Dr. Thomas McIver (UNC School of Pediatric Dentistry), who hosts clinics to treat youth on the spectrum.
- **Staffing**
  - All Dental Division staff members participated in the training.
- **Revenue**
  - N/A

### **Next Steps / Mitigation Strategies**

- Due to the effectiveness of the training, future sessions have been scheduled with Dr. McIver.

**Division / Program: Health Education/Nutrition/Durham Diabetes Coalition/Diabetes Day at Healing with CAARE, Inc.**

**(Accreditation Activity 10.2 -The local health department shall carry out or assist other agencies in the development, implementation and evaluation of health promotion/disease prevention programs and educational materials targeted to groups identified as at-risk in the community health assessment.)**

**Program description**

- The Durham Diabetes Coalition (DDC) holds a weekly educational session/food pantry at Healing with CAARE, Inc. (CAARE, Inc.) aimed at high-risk diabetes patients.

**Statement of goals**

- Improve health outcomes and quality of life for diagnosed and undiagnosed adults living with Type 2 diabetes in Durham County
- Address food insecurity in Durham County, while providing education and support to high risk DDC patients

**Issues**

- **Opportunities**
  - Location provides patients with the opportunity to connect with other community resources that might help with overall health and wellbeing.
  - Ability to recruit participants from weekly meeting to other events, increasing the likelihood of greater attendance for future DDC events.
  - Patients are able to connect with one another and provide mutual support in managing their diabetes.
  - Patients are able to connect with food resources to decrease food insecurity and increase diet quality.
  - Patients are able to receive clinical care while attending sessions.
- **Challenges**
  - Attendance is limited to patients who are able to access transportation.
  - No guidelines have been established to determine participant eligibility.
  - Food is limited to donations from local stores; quality of donations is not always high.

**Implications**

- **Outcomes**
  - Weekly sessions consist of educational presentations and activities performed by health educators or nutritionists. Educational sessions cover topics pertaining to diabetes awareness and management, such as blood glucose testing and healthy cooking demonstrations.
  - To address high rates of food insecurity within the patient population, attendees are given a bag of healthy food to take home each week.
  - An average of 6 participants attend each session.
- **Service delivery**
  - Diabetes Day is held at CAARE, Inc., 214 Broadway Street, from 1-3 pm every Wednesday.



- **Staffing**
  - Staffed collaboratively by 2 Health Educators and 1 Nutritionist funded by the DDC, 1 physician partially funded by the DDC, 1 Nurse Practitioner partially funded by the DDC, and 1 Senior Project Manager funded by the DDC.
- **Revenue**
  - None

#### **Next Steps / Mitigation Strategies**

- Continue to offer the Diabetes Day on weekly basis at CAARE, Inc. as a pilot project.
- Conduct evaluation to assess sustainability and future directions of this program.

### **Division / Program: Administration / Communications and Public Relations**

#### **Program description**

- The Communications and Public Relations program provides accurate, timely, and relevant information to the residents of Durham County on key health issues as well as informing the public about department programs and services availability. Information is disseminated in many forms, included broadcast, print, and multimedia (web-based).

#### **Statement of goals**

- Increase the public's awareness and understanding of important health information and the Department of Public Health's programs and services availability
- Increase the public's utilization of the Department of Public Health's programs and services.
- Become the main, trusted and dependable choice for journalists seeking information and assistance to develop compelling and balanced stories on Public Health issues.

#### **Issues**

- **Opportunities**
  - With staff dedicated to communications and public relations, the Department of Public Health can provide more information to the public on health issues
  - Media/reporters are eager to use information provided to them by the Department of Public Health for their viewers/readers. Television and radio announcers often request follow-up information and interviews.
- **Challenges**
  - Prioritizing the topics to publicize.
  - Staff balancing external media requests with internal needs to review/revise/develop new media to promote programs and services.

#### **Implication(s)**

- **Outcomes**
  - Communication surrounding various health issues and department programs and services are being publicized in a timely, organized manner and with greater frequency.

- Visibility of public health information from the department has substantially increased.
- **Service delivery**
  - As of March 27, three (3) media advisories/releases were disseminated and staff responded to three (3) direct (unsolicited) inquiries from reporters. A total of 16 media pieces featuring or mentioning the Department were aired (television), printed in the news, or were posted to the web by local media during the month. This included coverage of activities including this month's *My Carolina Today* segment on Triple P, County Health Rankings (1), National Nutrition Month, the expansion of school nurse coverage within Durham Public Schools, and restaurant inspection scores. Of note, the *My Carolina Today* segment on Triple P broke an all-time record on the Department's Facebook page, reaching a total of 1,777 people (to date). **(Accreditation Activity 5.3- Health Alerts to Media, 9.1- Disseminate Health Issues Data, 9.5- Inform Public of Dept. / Op. Changes, 10.2- Health Promotion – Disease Prevention, 21.2- Make Available Information About LHD Programs, Services, Resources)**
  - On March 7, the department hosted a film production team working with the North Carolina Department of Public Instruction (NCDPI) is collaborating with FOX 50, Durham Public Schools and the NC HIV Prevention and Care Branch to create a training video for school nurses and social workers to encourage them to refer students to local health departments for HIV testing and other sexual health needs. Staff involved in the production were Earline Parker, RN, and Dr. Arlene Sena. The video will tentatively make its debut later this spring, and will be shared with all 115 Local Education Agencies (LEAs) throughout the state. **(Accreditation Activity 10.2- Health Promotion –Disease Prevention, 21.2- Make Available Information About LHD Programs, Services, Resources)**

#### **Next Steps / Mitigation Strategies**

- Continue building/developing various communication channels as well as the Department of Public Health's delivery of information and communications.

#### **Division / Program: Health Education / Partnership for a Healthy Durham**

**(Accreditation Activity 1.1 – The local health department shall conduct a comprehensive community health assessment every 48 months)**

#### **Program description**

- The Community Health Assessment (CHA) is systematic collection, analysis, and dissemination of information about the health of the community. The CHA is performed every three years in partnership with the local hospital system, Duke Medicine.

#### **Statement of goals**

- Understand health concerns that affect residents
- Identify factors that affect the health of a population
- Determine resources available to address these factors

## Issues

- **Opportunities**
  - Share results with community members across the county
  - Use results as conversation starters regarding health priorities and factors that affect health
  - Use results to develop community health improvement plans for Durham
  - Work with community partners and community members to develop strategies for addressing health priorities in Durham
- **Challenges**
  - Ensuring that the results are shared with all areas of Durham County
  - Getting guidance from the state on action plans

## Implication(s)

- **Outcomes**
  - The CHA is made of 50 sections in 13 chapters with a total of 720 pages. Topics range from determinants of health, lifestyle behavior factors, chronic disease, acute illnesses, reproductive health, injury and violence, oral health and environmental health.
  - A new chapter on older people and people with disabilities was added to the 2014 assessment.
- **Service delivery**
  - Authors were given a chapter framework to update with more recent data. Duke Medicine and the Durham County Department of Public Health worked together to review and edit chapters, write the executive summary and compile the final document.
- **Staffing**
  - The Health Education Division Director and Partnership for a Healthy Durham Coordinator facilitated the process and received support from Duke Medicine Division of Community Health and community partners.
- **Revenue**
  - Last fiscal Duke Medicine (\$10,000), City of Durham (\$3,500), and United Way of Greater Triangle (\$1,000) contributed funds to support the community health assessment and survey. Duke Medicine also provided in-kind contributions by designating a staff person to assist with listening sessions and the document.

## Next Steps / Mitigation Strategies

- The 2014 CHA was submitted to the North Carolina Division of Public Health on March 2.
- The executive summary will be translated into Spanish and copies of the English and Spanish versions will be distributed to the community.
- The electronic version of the CHA will be posted on the Partnership for a Healthy Durham website at [www.healthydurham.org](http://www.healthydurham.org) by April 1.

- A press release, social media postings and community presentations will follow the release of the electronic version of the report.
- Committees will complete Community Health Improvement Plans by June 2015.