

Health Director's Report
April 8, 2021

Division/Program: Installation of Bison RAMVAC in Dental

(Accreditation Activity 30.6: The local health department shall ensure cleaning, disinfection and maintenance of clinical and laboratory equipment and service areas and shall document all cleanings, disinfections and maintenance.)

Program description:

- During the Fall of 2019, during maintenance of its RAMVAC unit, the Dental Division learned that the unit had to be replaced. (A RAMVAC is a vacuum unit intended solely for the removal of dental waste material from the oral cavity during dental procedures.)

Statement of goals:

- To ensure maintenance of clinical equipment and service areas, the Dental Division has schedules in place for servicing its equipment.

Issues

- **Opportunities**
 - The Division had identified funds to replace the Dental RAMVAC during FY' 21.
 - After seeking, Benco provided best price for the unit. (The Division already had an established a Preventative Maintenance contract with Benco for dental carts, hand pieces, autoclaves, replacement of amalgam separator, etc.)
- **Challenges**
 - When equipment work cannot be scheduled for a weekend, the clinic must close, and replacing the RAMVAC require the clinic to close for an entire day.
 - There had been issues in the Dental Maintenance Room, where leaks corroded the former RAMVAC. Issues had been reported and it appears all leaks have been repaired.

Implication(s)

- **Outcomes**
 - New unit was installed on February 19th.
 - With proper care and maintenance, the new unit will last up to 20 years.
- **Service delivery**
 - Technician from Benco came back on March 23rd to inspect the unit, and it is operating as designed.
- **Staffing-** Division Director oversaw contract and installation process.
- **Revenue** – N/A - Bison RAMVAC cost \$12,353.61 installed.
- **Other** –N/A

Next Steps / Mitigation Strategies

New unit will be serviced each Fall, and as needed.

Division / Program: Nutrition / DINE / Partnering with PE Teachers to Provide Nutrition Education

(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 DINE program provides nutrition education and cooking classes in many Durham Public Schools (DPS) schools that qualify for the program (50% or more of the school's student body qualifies for the free/reduced price lunch program).
- Typically, DINE nutritionists work with classroom teachers to provide the DINE nutrition curriculum to elementary school students. In response to the COVID-19 crisis, all DPS schools went to online learning in March of the 2019-2020 school year and continued the virtual model for the start of the 2020-2021 school year. Classroom teachers needed to prioritize core subject content instruction during the virtual school day, leaving little room for other subjects (including nutrition education). As a result, several of the DINE elementary school nutritionists partnered with PE teachers to provide the DINE curriculum during the PE block of the online school day.

Statement of goals

- To encourage daily physical activity, healthy meal and snack choices, daily consumption of water, and food safety.
- To encourage increased daily consumption of a varied assortment of fruits and vegetables.
- To reduce obesity, overweight and chronic disease risk in Durham's at-risk youth and their families.

Issues

• **Opportunities**

- PE teachers are tasked with providing health and physical education for students. During a normal school year, most of the PE block is focused on providing a weekly opportunity for physical activity to students, with health messages included. While leading students in physical activity was still possible with online learning, the model presented a new opportunity to provide more health-related curriculum to the students.
- The DINE nutrition curriculum provides content on many health-related themes including increasing consumption of a variety of fruits and vegetables, the practice of healthy habits (getting enough sleep, drinking water, daily physical activity, mindful eating and food safety practices) and healthy meal and snack choices.
- The DINE program partners with 16 eligible elementary schools in Durham and reaches close to 6,000 students in a typical school year. DPS's decision to move to online learning decreased DINE's access to students for nutrition instruction. The partnership with PE teachers allowed DINE programming to reach 1,224 students during the 2020-2021 school year, in addition to the students reached through regular (virtual) classroom instruction.

• **Challenges**

- Not all PE teachers at the 16 elementary schools served by the DINE program responded to the invitation to collaborate during online schooling.

Implication(s)

- **Service delivery**
 - The PE teachers provided DINE nutritionists with a Zoom link for the scheduled classes and the nutritionists taught nutrition lessons via Zoom.
 - DINE nutrition lessons were provided during PE classes at five elementary schools (Bethesda, Lakewood, Southwest, YE Smith and WG Pearson Elementary Schools).
- **Staffing**
 - Four DINE elementary school nutritionists provided nutrition education in collaboration with PE teachers this school year.
- **Revenue**
 - No revenue is generated through this educational outreach.

Next Steps / Mitigation Strategies

- These new partnerships between DINE nutritionists and PE teachers provide the opportunity for future collaborations to promote healthy habits to DPS families while meeting DINE grant deliverables.

Division / Program: Pharmacy & Health Education / Safe Syringe Program

(Accreditation Activity 10.1 -The local health department shall develop, implement, and evaluate population-based health promotion/disease prevention programs and materials for the general public.)

Program description

- On April 2, 2018, the DCoDPH Pharmacy launched the Safe Syringe Program based on the guidance and program requirements from the NC Division of Public Health.

Statement of goals

- To offer new needles, syringes, and injection supplies to reduce the transmission of HIV and Hepatitis C in the community.
- To offer free HIV and Hepatitis C testing and follow-up care.
- To offer education, treatment information, and referrals to community members.
- To provide a safe method of disposal for used needles and syringes.

Issues

- **Opportunities**
 - Reduce the transmission of HIV and Hepatitis C by offering new needles, syringes, and injection supplies.
 - Reduce the risk of bacterial infections (i.e. endocarditis) that occur when injection supplies are reused.
 - Connect participants with community resources including treatment options, health care, and housing assistance.
 - The following items are provided in the Safe Syringe Kit:
 - 10 sterile 1.0mL syringes with fixed needles
 - Alcohol swabs
 - Tourniquet
 - Condoms
 - Sharps Container
 - Additional injection supplies
 - Participant ID card
 - Printed material for harm reduction and ancillary services

- Fentanyl testing strips and Naloxone kits are also offered with each SSP Kit.
- **Challenges**
 - Ensure that used needles and syringes are properly discarded in a puncture proof container. Sharps containers are included with SSP Kits and participants are encouraged to use of them and return the container to the DCoDPH Pharmacy.
 - Ensure that used needles and syringes are not deposited in the medication drop box in the HHS lobby.

Implications

- **Outcomes**
 - The following statistics have been collected for January-February 2021:
 - New participants: 5
 - Total contacts: 19
 - Syringes dispensed: 410
 - Syringes returned*: ~150
 - Sharps containers dispensed: 8
 - Fentanyl strips dispensed: 36
 - Naloxone kits distributed (with SSP): 18
 - Naloxone kits distributed (non-SSP): 130
 - Naloxone reversals reported: 0
 - Year-to-date statistics, FY20-21:
 - New participants: 18
 - Total contacts: 74
 - Syringes dispensed: 1,740
 - Syringes returned*: ~500
 - Sharps containers dispensed: 33
 - Fentanyl strips dispensed: 159
 - Naloxone kits distributed (with SSP): 70
 - Naloxone kits distributed (non-SSP): 369
 - Naloxone reversals reported: 1

*“Syringes returned” metric includes needles/syringes returned directly to staff regardless of usage (i.e. substance use, medical use, prescription use)

- **Service delivery**
 - Planning and implementation were completed by the Opioid Response Committee with guidance and support from the NC Division of Public Health, Injury and Violence Prevention Branch.
- **Staffing**
 - Pharmacy, Health Education, and Bull City United team members have received training from the NC Division of Public Health and the NC Harm Reduction Coalition regarding harm reduction strategies and Safe Syringe Program practices.

Next Steps / Mitigation Strategies:

- Statistics from the Safe Syringe Program will be monitored and reported to the Board of Health monthly.
- The Opioid Response Committee will continue to work with the NC Division of Public Health to improve our program and develop strategies to further our goals.

Division / Program: Pharmacy/ Medication Drop Box

(Accreditation Activity 10.1 -The local health department shall develop, implement, and evaluate population-based health promotion/disease prevention programs and materials for the general public.)

Program description

- On March 15, 2018, the DCoDPH Pharmacy partnered with Project Pill Drop to install a Medication Drop Box in the lobby of the HHS building.

Statement of goals

- To offer a safe method of disposal for unused and expired over-the-counter and prescriptions medications.

Issues

- **Opportunities**
 - The following items are accepted in the box:
 - Over-the-counter medications
 - Prescription medications
 - Prescription patches
 - Prescription ointments
 - Vitamins
 - Reduce environmental concerns caused by flushing unwanted medications.
 - Alleviate prescription drug abuse from expired medications left in medicine cabinets.
- **Challenges**
 - Ensuring that used needles and syringes are not deposited in the drop box. The needle/syringe disposal box is located next to the medication drop box.
 - Due to COVID-19, the hours of operation for the HHS building decreased in Q4 of FY19-20 and FY20-21, although this was not reflected in program participation.

Implications

- **Outcomes**
 - Quarterly statistics, FY20-21 Q3
 - ~50 lbs of medication disposed
 - Year-to-date statistics, FY20-21
 - ~110 lbs of medication disposed
 - Previous year statistics, FY 19-20
 - ~102 lbs of medication disposed

- **Service delivery**
 - Planning and implementation were completed by the Pharmacy Manager and Allied Health Division Director.
 - General Services installed the drop box in the HHS lobby with input from Security and General Services.
- **Staffing**
 - Pharmacy staff will regularly monitor the drop box and empty when necessary.
 - Assurant Waste Disposal is contracted to dispose of the medications.

Next Steps / Mitigation Strategies:

- The drop box will be monitored regularly and emptied when necessary.
- Statistics will be monitored and reported to the Board of Health quarterly.

Division / Program: Pharmacy / Needle Disposal Box

(Accreditation Activity 10.1 -The local health department shall develop, implement, and evaluate population-based health promotion/disease prevention programs and materials for the general public.)

Program description

- In September 2018, DCoDPH Pharmacy installed a Needle Disposal Box in the lobby of the HHS building.

Statement of goals

- To offer a safe method of disposal for used or expired needles and syringes.

Issues

- **Opportunities**
 - The following items are accepted in the box:
 - Used or expired needles and syringes
 - Used or expired medications with attached needles (i.e. Epipens)
 - Reduce environmental concerns caused by improper needle disposal.
 - Reduce accidental needle sticks caused by improper needle disposal.
 - Reduce the transmission of HIV and Hepatitis C by disposing of needles after each use coupled with offering new needles, syringes, and injection supplies through the Safe Syringe Program.
 - Reduce the risk of security personnel being exposed to used needles by placing the disposal box before the security checkpoint.
- **Challenges**
 - Ensuring that used needles and syringes are not deposited in the medication drop box. Both drop boxes have clear signage in English and Spanish.
 - Due to COVID-19, the hours of operation for the HHS building decreased in Q4 of FY19-20 and FY20-21, although this was not reflected in program participation.

Implications

- **Outcomes**
 - Quarterly statistics, FY20-21 Q3
 - ~11,240 needles/syringes returned
 - Year-to-date statistics, FY20-21

- ~36,530 needles/syringes returned
 - Previous year statistics, FY20-21
 - ~57,605 needles/syringes returned

- **Service delivery**
 - Planning and implementation were completed by the Pharmacy Manager and Allied Health Division Director.
 - General Services installed the drop box in the HHS lobby with input from Security and General Services.
- **Staffing**
 - Pharmacy staff will regularly monitor the drop box and empty when necessary.
 - Piedmont Biomedical is contracted to dispose of the used needles and syringes.

Next Steps / Mitigation Strategies:

- The disposal box will be monitored regularly and emptied when necessary.
- Statistics from the Needle Disposal Box will be monitored and reported to the Board of Health quarterly.

Division / Program: Population Health / Epidemiology

(Accreditation Activity 9.1: The local health department shall publish and disseminate data and information on current local health issues to the general public, community partners, and elected and appointed officials.

Program description

The COVID-19 vaccine data distribution dashboard provides information on vaccine doses administered to Durham County, NC residents. The dashboard is updated weekly with information regarding vaccine completion percentages, vaccination provider sites, demographics and spatial mapping.

Statement of goals

- Provide accurate and timely data regarding Durham County COVID-19 vaccine distribution.
- Provide COVID-19 vaccine data and resources for Durham County residents.
- Provide COVID-19 vaccine data in an interactive format that is easy to understand.

Issues

- **Opportunities**
 - Provide data to the media, stakeholders, partners, elected officials and community residents.
 - Provide a clear and comprehensive picture of Durham County residents being vaccinated and where.
 - Analyze data to track disparities in vaccine distribution and develop strategies to address them.

- **Challenges**
 - Data is obtained from an outside source, the North Carolina Department of Health and Human Services on a weekly basis.

Implication(s)

- **Outcomes**
 - March 2021 Vaccine Distribution Webpage Analytics
 - Total webpage visits- 1,451
 - Unique Page Views 1,233
 - Average time on Page, 3 Minutes 7 seconds
- **Staffing**
 - The Durham County Department of Public Health epidemiologist maintains the site. Durham County IS&T assists with troubleshooting issues.
 - The Population Health Division Director, epidemiologist and Durham County IS&T analyst worked together to develop the look and features of the site. The Durham County IS&T analyst built the dashboard.
- **Revenue**
 - None

Next Steps / Mitigation Strategies

- Continue to update the dashboard on a weekly basis with new data and update features and information as needed.
- Develop tailored strategies for equitable vaccine distribution based on Durham County vaccine data.

Division / Program: Population Health / Epidemiology

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

Program description

A Community Health Assessment (CHA) is a process by which community members and stakeholders gain an understanding of the health issues that affect their county by collecting, analyzing and sharing information about community assets and needs. The process results in the selection of community health priorities. The 2020 CHA document was created as a collaboration among the Partnership for a Healthy Durham, the Durham County Department of Public Health and Duke Health.

Statement of goals

- Provide a comprehensive set of valid and reliable information about the health of the Durham community
- Meet the standards related to Community Health Assessment established by (a) the North Carolina Local Health Department Accreditation Board.
- Meet the requirements of the Federal Patient Protection and Affordable Care Act (ACA), one of which requires hospital systems to conduct a Community Health Assessment every three years.

Issues

- **Opportunities**
 - Provide data and context regarding disparities to the stakeholders, partners, elected officials and community residents.
 - Provide a clearer picture of what impacts health in Durham County.
 - Focus intentionally on equity.
 - Include a new chapter on climate change and a more inclusive history of Durham County.
- **Challenges**
 - Balancing completing the 2020 CHA with COVID-19 response.
 - Communicating results in virtual or electronic formats, without being able to gather in person.
 - Postponing the listening sessions from spring 2020 to spring 2021 due to COVID-19.

Implication(s)

- **Outcomes**
 - The final report is 524 pages with 15 chapters and 50 sections.
 - This Community Health Assessment has 117 authors, some of whom also assisted with the survey. Volunteers and writers represent local government, health care systems, colleges and universities, community-based organizations and non-profits in sectors of physical and mental health, transportation, education, housing, research, food access, planning, environment and more. 117 authors for the report
 - The 2020 assessment process included 612 resident surveys in County wide and Hispanic or Latino neighborhood samples. The County wide survey sample size was doubled in 2019 to analyze data by race and ethnicity for the first time.
 - Durham's community survey was carried out by 243 community volunteers, Partnership members and staff from the Durham County Department of Public Health and Duke University.
- **Staffing**
 - The Partnership for a Healthy Durham Coordinator led the process and compiled the final draft of the 2020 CHA.
 - The epidemiologist planned and led the CHA survey process in 2019.
 - The Public Health Director reviewed and edited half of the 2020 CHA chapters and sections.
 - Many health department staff participated in the process as survey volunteers and writers throughout the process.
- **Revenue**
 - None

Next Steps / Mitigation Strategies

- Completion of a one-month comment period for the 2020 CHA on April 5, 2021.
- Make final edits to the 2020 CHA by mid-April.
- Publicize CHA results to the community.
- Hold virtual community listening sessions in April and May 2021.
- Create Community Health Improvement Plans (CHIPs) around Durham County's top health priorities using data, community input and information from the 2020 CHA.

Division / Program: Health Education & Community Transformation / Regional Tobacco Prevention and Control

(Accreditation Activity 10.1: The local health department shall develop, implement and evaluate population-based health promotion/disease prevention programs and educational materials for the general public; Accreditation Activity 10.3: The local health department shall employ evidence-based health promotions/disease prevention strategies, when such evidence exists.)

Program description:

- Durham County Department of Public Health is now the host for the Region 5 Tobacco Prevention Manager position. On December 14, 2020, Natalie Rich, MPH, was hired to fulfill this role.
- This position provides tobacco prevention policy and program expertise and assistance to the eight counties of Region 5: Durham, Chatham, Orange, Alamance, Guilford, Rockingham, Caswell, and Person.

Statement of goals:

- The goals of this position are outlined by the Centers for Disease Control and Prevention (CDC) grant that funds the position and are as follows:
 - Prevent the initiation of smoking and other tobacco use
 - Eliminate exposure to secondhand smoke
 - Help tobacco-users quit; and
 - Identify and eliminate tobacco-related health disparities among N.C. populations and communities
- The Region 5 Manager is currently focusing on the third and fourth goals as priorities for this fiscal year.

Issues:

- **Opportunities**
 - Positions Durham County as a leader in tobacco prevention in Region 5 and in the state of North Carolina
 - Provides an opportunity to replicate the program and policy successes of Durham in other counties
- **Challenges**
 - COVID-19 presents a challenge in mobilizing any tobacco prevention efforts because so many agencies are focused on immediate COVID-19 response
 - Tobacco prevention policies and programs often face resistance in tobacco-producing states like North Carolina

Implication(s):

- **Outcomes**
 - Evaluation efforts will focus on two priority goals: helping tobacco users quit and identifying and eliminating tobacco-related health disparities.
 - The outcome related to helping tobacco users quit is to increase utilization of the NC Quitline, 1-800-QUIT-NOW, an evidence-based statewide telephone counseling

service that helps NC residents quit tobacco. Baseline number of NC Quitline calls for Region 5 (December 2020): 91.

- The outcome related to eliminating tobacco-related health disparities is that all health facilities that receive any Medicaid funds will successfully implement a tobacco-free policy, in accordance with Medicaid transformation requirements.
- **Service delivery**
 - The Region 5 Manager is not permitted to provide direct service to tobacco users trying to quit (examples of direct service: one-on-one quit coaching, tobacco cessation classes). The position is focused on implementing policies and helping agencies and health facilities adopt and/or improve tobacco prevention and intervention programs.
 - To increase the utilization of the NC Quitline, the Region 5 Manager has partnered with Radio One (97.5, 103.9 The Light, and Foxy 107.1) to implement a radio and digital ad campaign. To date, the radio ads have played over 110 times and the digital ads have had 45,000+ impressions. The campaign will continue through May 2021.
 - To assist health facilities in successfully implementing tobacco-free policies in accordance with the new Medicaid requirements, the Region 5 Manager has partnered with Alliance Health to develop and deliver a “Tobacco Treatment and Nicotine Replacement Therapy” [training](#) for behavioral health providers. To date, 217 behavioral health providers have attended the trainings.
- **Staffing**
 - The Region 5 Manager is employed by DCoDPH and works closely with a Region 5 Collaborative Team of health providers throughout the region. The Manager also works closely with the NC Tobacco Prevention and Control Branch.
- **Revenue**
 - This position is funded by the Center for Disease Control and Prevention and is administered through the NC Tobacco Prevention and Control Branch.

Next Steps / Mitigation Strategies

- Continue to promote NC Quitline, and other evidence-based tobacco treatment programs throughout Region 5.
- Continue to provide expertise and assistance to health facilities implementing a smoke- or tobacco-free policy.
- Work with the Region 5 Collaborative Team and Region 5 county leadership to identify and implement tobacco prevention policies.

Division / Program: Health Education & Community Transformation / Adverse Childhood Experiences and Resilience

(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 Adverse Childhood Experiences (ACEs) and Resilience Coordinator was hired in August 2020. In this position, Jess Bousquette supports the activities of the Durham Adverse Childhood Experiences and Resilience Taskforce (DART), contributes to the development of the Durham Early Childhood Action Plan, and works to increase trauma-informed care within the Department of Public Health.

Statement of goals:

- Guide the adoption of the Durham Adverse Childhood Experiences and Resilience Action Plan
- Develop strategic goals for Durham County Public Health related to adverse childhood experiences, trauma-informed care, and resilience
- Develop a resource development approach for Durham County Public Health to contribute to ACEs and Resilience work

Issues:

- **Opportunities**
 - There is community and institutional energy around early childhood and trauma-informed care.
 - A UNC Chapel Hill Injury Prevention Research Center program – the ACEs and Suicide Prevention in a Remote Environment (ASPIRE) Learning Collaborative – has provided a forum for planning and engagement between Public Health (ACEs and Resilience), Cooperative Extension (Durham’s Early Childhood Coordinator and Welcome Baby), the Department of Social Service (CPS In-Home & Prevention), and Durham Office on Youth.
 - DART membership is expanding, and there is a desire to define the Taskforce’s role and scope more clearly.
- **Challenges**
 - The process of defining DART’s role, scope, and vision with additional community input rightfully requires additional time and may slow the process of finalizing an implementation plan.
 - The Adverse Childhood Experiences and Resilience Coordinator has been working full-time on COVID-19 vaccination scheduling, January – March 2021.

Implication(s):

- **Outcomes**
 - The Durham ACEs and Resilience Taskforce has met five times since October after a 7 months hiatus due to COVID-19 and staffing limitations.
 - The Durham ACEs and Resilience Coordinator has actively contributed to the development of the Durham Early Childhood Action Plan through the Safe and Nurtured Work Group. She is currently actively involved in the Child and Family Social-Emotional Health, Mental Health, and Resilience Action Team.
- **Service delivery**
 - In partnership with the Deputy Health Director and Director for Health Education and Community Transformation, the ACEs and Resilience Coordinator co-presented on secondary traumatic stress and burnout to DCoDPH supervisors in December 2020.
 - The ACEs and Resilience Coordinator initiated a contract with the Exchange Family Center to support parental resiliency through the Community Resilience Model to address familial stress related to the COVID-19 pandemic. Additionally, the contract provides support to meet emergency needs of families which drive parental stress.
 - The Early Childhood Action Plan is expected to be released in June 2021.
- **Staffing**
 - The ACEs and Resilience Coordinator is a new, full-time County position as of this fiscal year.

- The Health Education Office Assistant supports monthly DART meetings for 2.5 hours a month.
- The Director of Health Education & Community Transformation supports strategic direction and community engagement for DART approximately 5 hours a month.
- **Revenue**
 - The County's Adverse Childhood Experiences and Resilience efforts do not provide any revenue generating programs nor receive any grant funds currently.

Next Steps / Mitigation Strategies:

- This summer, a graduate public health student will be hired as an Adverse Childhood Experiences and Resilience Evaluation Fellow to develop a plan to evaluate ACEs and resilience work within DCoDPH and DART.
- The ACEs and Resilience Coordinate will continue guiding the finalization of DART's mission, vision, and values with a goal to plan for meaningful, sustained community engagement in DART.
- The ACEs and Resilience Coordinator will continue meeting with the County's Early Childhood Coordinator about strategic alignment of Durham County's early childhood work and ACEs work.