Health Director's Report

June 11, 2021

<u>Division / Program: Dental Division / Oral Health Screenings in Durham Public Schools</u>

Accreditation Activity 20. 1- The local health department shall collaborate with community health care providers to provide personal and preventative health services.)

Program description

- Per an MOU with Durham Public Schools, the Dental Division conducts dental screenings for children in Kindergarten and 5th grades during the school year. For schools visited by the Tooth Ferry, the hygienist will screen 1st 4th graders as well.
- The Division also screens in Head Start programs and provides exams with fluoride in Early Head Start Programs.
- Parents are provided letters detailing the screening, and they have the option to opt-out. After the screening, parents receive a letter with the results immediately after screening is completed. The letters state whether the child has or does not have caries and explains that if the child does not have a dental home the parent can call the Health Department Dental Clinic to schedule an appointment.

Statement of goals

- Annual dental screenings provide indications of the prevalence of dental disease in school aged children in the County- and how Durham compares with other counties within the state.
- The State Oral Health Section sends their hygienist to screen two schools, and this data is used in their report.

Issues

• Opportunities

- The screenings serve as a positive dental experience for students, assisting in collecting vital information to help improve children's dental health programs.
- Those children without a dental home may have the opportunity to begin dental treatment when the Tooth Ferry visits their school and/or complete treatment plan in the clinic if needed.
- The screenings provide education to the students and includes oral health presentations at the school.
- The Division works with Durham Head Start and Early Head Start to provide dental screening and presentations.

Challenges

- o Some schools have been hesitant to supply classroom rosters, promote the screenings, etc. which led to additional conversations with school leadership.
- o Some schools had been allowing the Smiles Van to screen children.
- o There are often last-minute adjustments to the screening schedule when arriving at the schools, including finding space for the hygienist and assistant.

Implication(s)

Outcomes

After being unable to screen for the past eighteen months, the Division completed a dental screening in May at Merrick Moore Elementary School. The State Oral Health Section sent their hygienist for two half-days during this period.

• Service delivery

The Division screened 247 students at Merrick Moore Elementary Schools. The Dental Division's PH hygienist also provided three presentations to Kindergarten classes.

• Staffing

o Fariba Mostaghimi, Public Health hygienist, completed the screening, assisted by a dental team member.

• Revenue

 \circ N/A

• Other

o N/A

Next Steps / Mitigation Strategies

• The Division will continue to meet with school administrators to establish a screening and presentation schedule for the 2021-22 school year. The Division will also train a second Public Health hygienist to help with screening and presentation.

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, heath care, and housing assistance.
- o 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
- o Fentanyl testing strips and Naloxone kits are also offered with each SSP Kit.

Challenges

- o 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

- o The following statistics have been collected for March-April 2021:
 - New participants: 7
 - Total contacts: 22
 - Syringes dispensed: 740
 - Syringes returned*: ~500
 - Sharps containers dispensed: 12
 - Fentanyl strips dispensed: 65
 - Naloxone kits distributed (with SSP): 23
 - Naloxone kits distributed (non-SSP): 83

- Naloxone reversals reported: 0
- Year-to-date statistics, FY20-21:

• New participants: 25

■ Total contacts: 96

Syringes dispensed: 2,480

■ Syringes returned*: ~5000

Sharps containers dispensed: 45

• Fentanyl strips dispensed: 224

Naloxone kits distributed (with SSP): 93

Naloxone kits distributed (non-SSP): 452

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: Health Education & Community Transformation / Communicable Disease and Maternal Child Health Programs

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.

Program Description

• A team of seven health educators focus on improving lifestyle choices and behaviors for individuals, groups, and communities (from pre-birth to death), relating to a variety of issues, policies, and trends related to communicable diseases and maternal and child health.

Statement of Goals:

• Enhancing health outcomes by increasing social equity and reducing disparities related to communicable diseases, maternal health outcomes and child health outcomes, including breastfeeding rates and infant mortality.

Issues:

• Opportunities

- o COVID-19 has necessitated virtual educational opportunities and more policy work. This has been valuable for the focus on several topics (i.e. breastfeeding and PrEP).
- o Hiring new staff has brought new skills and experiences to the team.
- o Examining different ways to perform regular work priorities during the pandemic has encouraged thinking outside the box.
- COVID-19 response has provided opportunities to utilize skills and knowledge often overlooked. Several health educators have been asked to serve lead roles in Public Health response to COVID.
 - o Increased community resources
 - Strengthened bonds with partners
 - o Established long-lasting relationships with new partners

Challenges

- COVID-19, and related local and NC executive orders restricting gatherings and faceto-face educational opportunities, severely limited the group's usual ability to do community outreach.
- o Effects of the cyber-attack lasted for many months.
- Constant changes without much time to prepare has limited the ability to maximize staff coordination and made it tougher to plan priority outreach efforts that are not related to COVID.

Implication(s):

- Outcomes: 80% of regular program objectives were met during this unusual programming year.
- Service delivery: Work looked different than usual, with staff operating remotely and within the Public Health building. Much planning and community connections occurred virtually.

Staffing

- Seven full-time program staff have supported this work over the last year: Lakieta Sanders, Dennis Hamlet, Chris Mack, Tim Moore, Ashley Bueno, Aubrey Delaney, and Jamillae Stockett.
- Annette Carrington has served as the Program Manager, alongside significant COVID-19 response tasks.
- **Revenue:** Three grants and County funding support these programs. Funding for the FY21 fiscal year included:

- o Integrated Targeted Testing Services AA: \$483,246/year, supporting 1.8 FTE
- o Jail testing AA: \$194,164/year, supporting 2.4 FTE
- o Improving Community Outcomes for Maternal and Child Health AA: \$500,000 year, supporting 1.75 FTE

Next Steps / Mitigation Strategies

- Resume normal operations in FY22
- Develop a written contingency plan for the team, to address potential future service disruptions

Division / Program: Health Education & Community Transformation / Health Promotion and Wellness Challenges for Durham County Government Employees

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

Program description

• The Health Promotion & Wellness team at the Durham County Department of Public Health developed a series of wellness challenges while the organization's fitness centers were closed due to COVID-19. Employees indicated that they are engaged in walking and other cardiovascular activities, the focus was on other dimensions of physic activity. During the third quarter, three challenges were introduced: Squat Challenge, Mindful Moments and the Plank Challenge. All challenges were created in-house and implemented virtually from January – March 2021.

Statement of goals

- Health promotion is the process of enabling people to increase control over and to improve their health. It moves beyond a focus on individual behavior towards a wide range of social and environmental interventions. Educational and community-based programs encourage and enhance health and wellness, helping people make informed decisions and attain the tools to make improvements, reduce risks and increase safety.
- The virtual wellness challenges worked to build employees' muscular strength, self-efficacy around strength training, and social supports for regular physical activity.

Issues

Opportunities

- Health Promotion & Wellness has a history of successful employee wellness programming.
 - The team built upon those past successes by developing new programmatic offerings that showcased creative talent and flexibility among Health Program & Wellness staff.
- Offering programs virtually affords the opportunity to partner with other organizations in and out of Durham County Government.

Challenges

- Some participants did not continue to participate once they missed a few days of activities. Others "doubled up" and stayed on course.
- Engagement must be planned to keep participants interested. After the first series, the health educators built in more engagement opportunities to include a virtual "social" mid-way.
- While participants indicated that four weeks was sufficient, evaluations indicated an interest in a longer challenge period.
- The pre and post assessments were important to gauge progress. While more participated, 62% of squat challenge participants, 37% of plank challenge participants, and 56% of mindful moments participants completed initial assessments.
 - Show rates for educational events are in general are better than face-to-face events. Health educators have used e-mail to remind participants of events, but they have found better response rates via text message. This may be a reminder method that should be considered in the future for both remote and in-person events.
- Post-challenge assessments and post-event feedback surveying yielded poor response rates.

Implication(s)

Outcomes

- o Squat Challenge: 4 weeks
 - 78 registrants from 16 departments.
 - 55 actively engaged participants
 - 62% average increased improvement between baseline and post-challenge assessment
- o Mindfulness Moments: 3 weeks
 - 29 registrants
 - 16 participants actively engaged throughout challenge
- O Plank Challenge: 4 weeks
 - 71 registrants across 14 departments
 - 37 actively engaged participants
 - 52% average increased improvement between baseline and post-challenge assessment

Service delivery

- Virtual programs and educational materials were developed and delivered by health educators.
- Assessments were completed in person in the Public Health Board room to allow for observation and personalized feedback.
- Events are communicated via social media (through the Public Health Communications Officer), marketing and promotions by team members and sometimes community partners.

Staffing

o Two health educators and Wellness Attendant Contractor

• Revenue

o No revenue is received through this programming.

Next Steps / Mitigation Strategies

- The Squat Challenge was modified for a community offering during the month of May 2021. The plank challenge will be considered as well once modified.
- Additional challenges will be offered in the Fall of 2021 but modified using the results from the evaluation of FY21 events implemented.

Division / Program: Administration / Information Technology

Accreditation Activity 32.1: The local health department shall have computer equipment and software needed to interface with state data management systems.

Program description

- DCHD uses information technology to decrease the time it takes to design, deliver, and
 market the benefits and services it offers, increase access to information, document care,
 bill for services delivered, and integrate value-added functions. Electronic Medical
 Record (EMR) is for quality improvement to increase HIPAA compliance, provide
 quality services to clients, and increase revenue by the adoption of meaningful use
 programs.
- To increase the overall quality of customer service to both internal and external customers and increase knowledge among staff with the Durham County Health Department.

Statement of goals

- To employ expanded use of modern technologies
- To utilize data and information resources to improve service delivery
- To ensure IT planning, integration and effectiveness become a cultural phenomenon throughout the organization
- To ensure customer service standards for internal and external customers.

Opportunities

- We have successfully implemented interoperability throughout the Public Health Department. This includes integration of Dental, Lab, all clinical areas including Maternal Health into one system.
- One system provides continuity of care for our patient populations that we serve at Durham County.

Challenges

- Scheduling training due to the needs of the department for all of Administration due to Covid-19 work scheduling.
- o Due to the pandemic we have change the dates as the Pandemic increased.

Implication(s)

Outcomes

• The outcome of the implementation will meet the needs of continuity of care across the department by using one system.

• Service delivery

- o Completion of the Epic EMR System met 2 goals.
 - Continuity of Care for our Public Health customers
 - Discontinue the use of 4 different EMR systems into 1 system for Durham County Department of Public Health Department.

• Staffing

o N/A

Revenue

Next Steps / Mitigation Strategies

- Continue working with the providers to streamline process as they become proficient in using the Epic System.
- Continue to provide support with Epic and have weekly calls discussing reporting capabilities and Super-user meetings to discuss processes, and updates to Epic.