

Cumberland County Department of Public Health

# STRATEGIC ACTION PLAN

2021-2022



June 2021



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## Letter from the Health Director

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Cumberland County Department of Public Health (CCDPH) provides the three core functions of public health: assessment, policy development and assurance. The jurisdiction of CCDPH includes Cumberland County's nine municipalities and unincorporated areas.

The Cumberland County Department of Public Health's 2021-2022 Strategic Plan is intended to identify the key issues affecting the health of Cumberland County residents and the CCDPH staff and to guide the planning and implementation of the activities of the Community Health Assessment's Action Plans.

Strategic planning is a process of defining its direction and making decisions on how an organization distributes its resources to include its capital and people. It is a step-by-step process which defines the organization's goals and objectives with an end strategy that can be implemented and evaluated.

This document details the Health Department's strategic planning efforts along with the planning and implementation process. This effort started with a retreat for Cumberland County Board of Health (BOH) members in which they reviewed the prioritized community health issues and concerns, and completed a SWOT (Strengths, Weakness, Opportunities, and Threats) analysis. Based on the assessments, board members selected priorities that CCDPH staff will focus. A strategic planning team comprised of CCDPH staff members from all levels developed the Board's priorities into specific goals, objectives, and action steps.

March of 2020 shifted the way the health department provided services due to the increased restrictions due to COVID-19. Despite this emerging virus, the work of the strategic planning team did not stop. However, the plan needed to be shortened from a traditional 3-5-year plan to a two-year plan given the COVID-19 environment. The Cumberland County Department of Public Health did not stop operations and still held up COVID-19 response efforts including contact tracing, testing, vaccinations, while maintaining regular day to day programs.

We invite you to stay up to date and engaged on the implementation of Health Department's strategic plan on the Cumberland County website at [CumberlandCountyNC.gov](https://www.cumberlandcountync.gov), social media platforms, and Board of Health meetings held the third Tuesday of each month at 6 p.m.

## Contributors

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Each local public health agency in North Carolina has a governing board that has responsibility for public health within its jurisdiction. A local board of health in the policymaking, rule-making, and adjudicatory body for public health in the county.

### Board of Health Members

Dr. Olusola Ojo, Chair  
*Pharmacist*

Dr. Cynthia McArthur-Kearney, Vice Chair  
*Registered Nurse*

Dr. Connette McMahon  
*Active OBGYN*

Dr. Jeannette Council  
*Commissioner*

Ms. Sonja Council  
*Public Representative*

Ms. Stacy Cox  
*Public Representative*

Dr. Kent Dean  
*Veterinarian*

Dr. Sam Fleishman  
*Physician*

Mr. John Larch III  
*Professional Engineer*

Dr. Kingsley Momodu  
*Dentist*

Dr. Hakkam Alsaidi  
*Optometrist*

### Senior Leadership Team

Dr. Jennifer Green  
*Health Director*

Ashley Curtice  
*Deputy Health Director*

Dr. Lori Haigler  
*Medical Director*

Dr. Krystle Vinson  
*Director of Nursing*

Candi York  
*Accountant*

### Strategic Planning Team

#### Administration

Dr. Jennifer Green  
Ashley Curtice  
Kelly Smith  
Kristi Herbst  
Martina Sconiers-Talbert  
Andrea Wallace-Williams

#### Health Education

Stepheria Hodge-Nicholson  
Tamra Morris

#### Communicable Disease

Amichia Gainey-Jones  
Lekita Williams

#### CMARC/CMHARP - Care Management for At-Risk Children/Case Management for High Risk Pregnancy

Akua Peprah

#### Environmental Health

Charlisa Davis

#### Nursing

Kimyetta McNeill

#### WIC

Sheena Butler

#### Healthiest Cities and Counties Grant

Gwen McNeill

#### Medical/Vital Records

Monica Short-Owens

## Core Functions of Public Health

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The work of Public Health is organized around nationally developed core functions and the 10 Essential Public Health Services, which are the basis of public health practice. The three core functions of Public Health are Assessment, Policy Development and Assurance. A revised framework for the 10 Essential Public Health Services was released in September 2020.

### Assessment

Public health programs and system evaluations are an important governance function. Evaluations provide feedback to the governing bodies on the effectiveness and efficiency of essential public health services being carried out in local public health centers.

### Policy Development

The governing body accomplishes its responsibilities by establishing public health policies and assuring their implementation. Public health policies may be either a regulatory or a non-regulatory action. Public health policy development refers to a governing body articulating, in writing, expectations for accomplishing public health goals, measurable objectives, and the expected results that are to be achieved.

### Assurance

Assurance refers to those functions carried out by the governmental presence at the local level that guarantee public health policies and programs are in place and working. The governing body may guarantee public health services by providing them directly, or by making sure that essential public health services are available at the local level through other means. The governing body must assure that some authority is responsible for overseeing and providing public health services at the local level.

At the center of the Essential Public Health Services is equity. The aim of these services is to actively promote policies, systems, and overall community conditions that enable optimal health for all and seek to remove systemic and structural barriers that have resulted in health inequities.

## 10 Essential Public Health Services

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### Assessment

1. Assess and monitor population health status, factors that influence health, and community needs and assets
2. Investigate, diagnose, and address health problems and hazards affecting the population

### Policy Development

3. Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it
4. Strengthen, support, and mobilize communities and partnerships to improve health
5. Create, champion, and implement policies, plans, and laws that impact health
6. Utilize legal and regulatory actions designed to improve and protect the public's health

### Assurance

7. Assure an effective system that enables equitable access to the individual services and care needed to be healthy
8. Build and support a diverse and skilled public health workforce
9. Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement
10. Build and maintain a strong organizational infrastructure for public health

# Mission, Vision & Core Values

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## OUR MISSION

To provide high quality service in a professional, efficient, and fiscally responsible manner while improving the health of Cumberland County.

## OUR VISION

To have healthy people living in a healthy community.

## CORE VALUES

CCDPH follows the County core values of **PRIDE**

**Professionalism**

**Respect**

**Integrity with accountability**

**Diversity**

**Excellent Customer Service**

Recognizing that all people are different, we treat everyone with dignity and serve our diverse population with professionalism, respect, integrity, diversity and excellent customer service (PRIDE).





## Community Health Assessment 2019

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In 2018, Cumberland County completed its first Eastern Regional Community Health Needs Assessment (CHNA). The CHNA offers a regional comprehensive picture of health, needs and resources in the community and its surrounding counties. Its goal is to describe the health needs of our community and surrounding counties, to develop and identify strategies within the region to address the need. The CHNA is the foundation for all local public health strategic planning, priorities, coordinated community action plans, and evaluation. This assessment is conducted every three to four years to meet requirements for accreditation for both local health departments and non-profit hospitals.

Primary data is collected through the distribution of the Eastern Regional Community Health Assessment opinion surveys and focus groups. Surveys measured health indicators to assess the attitude, awareness and perception which impact Cumberland County's community overall quality of life along with 33 additional eastern counties in North Carolina. Secondary data was collected from an array of local, state, national and federal data sources. Conduent Data Management Group analyzed data from both sources. The local public health leaders discussed outcomes, ranked the priorities, and developed a community health improvement plan.

### **The top three ranked priorities for 2016 were:**

1. Reduce the Burden of Chronic Diseases
2. Reduce Sexually Transmitted Infections/Teen Pregnancy Prevention
3. Reduce Substance Abuse and Drug Addition

### **The top five ranked priorities for 2018 were:**

1. Access to Health Services
2. Economy
3. Exercise, Weight, and Nutrition
4. Public Safety
5. Substance Abuse (Misuse)

## Health Priorities

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After receiving the completed Community Health Needs Assessment (CHNA) from Conduent HCI, a Cumberland County Community Coalition was organized to determine CHNA priority areas. The Community Coalition invitees included community leaders, private practitioners, behavioral health providers and representatives from public health agencies, businesses, hospitals, and academic centers.

After examining the results of the CHNA survey (primary data) and secondary health data, the Community Coalition selected five health priorities for the 2019 CHNA process: Access to Health Services; Economy (employment, housing, food security, and living below poverty); Exercise, Weight, and Nutrition; Public Safety, and Substance Abuse.

## Quality Improvement (QI)

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CCDPH engages in a quality improvement process yearly. QI is the use of a deliberate and defined improvement process, such as Plan-Do-Check-Act (PDSA). PDSA is a process focused on a continuous effort to improve the efficiency, effectiveness, performances, accountability, and outcomes of health department programs and services.

There is a QI team that works with CCDPH departments to create a yearly project that directly ties to the goals and objectives outlined in this Strategic Plan. See QI plan [here](#) on our website for more information.

## Summary of Strategic Planning Process

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Beginning in January 2020, the Cumberland County Board of Health and the CCDPH staff underwent a yearlong strategic planning process. A summary of the strategic planning process is outlined in this section.

In February 2020, the Board of Health gathered for a retreat to set strategic priorities for the CCDPH. Cumberland County Assistant County Manager, Sally Shutt, facilitated this process for the Board of Health. Prior to, and during the retreat, Board of Health members were provided an overview of relevant national, state, and local data including Healthy North Carolina 2030, Robert Wood Johnson County Health Rankings, the CHNA, and the annual State of the County Health (SOTCH) Report.

After a discussion of the data, board members participated in a **SWOT** (Strengths, Weakness, Opportunities, and Threats) analysis. A SWOT analysis identifies both internal and external factors that may impact an organization. Strengths are internal positive attributes of the organization and weakness are internal attributes that may hinder the success of an organization. Opportunities are external factors that may facilitate the activities of the organization, while threats are external factors that may prevent the organization from meeting its goals.

Board members used a nominal group process to brainstorm priorities individually and then in small groups. Each group reported to the full Board their list of identified priorities. After each group resented, the full list of priorities was then discussed by the Board of Health. The Board developed a narrowed list of four externally focused priorities and three internally focused priorities. The Board voted to approve these priorities. These priorities were reported to the Board of County Commissioners, to Cumberland County staff, and to the public.

Due to a shift in focus to the COVID-19 Pandemic, the strategic planning process was put on hold between March 2020 and May 2020. In May 2020, strategic planning activities were reinitiated. While many traditional strategic plans are three to five years, this plan was developed as a short-term two-year plan due to COVID-19. The department will engage in a longer more extensive strategic planning process in future years.

CCDPH staff established a **Strategic Planning Team** to develop timebound and specific goals and objectives based on the board approved priorities. There was an intentional effort to recruit staff members from all levels of the department and from each program in the agency as all CCDPH staff were eligible to be members of the Strategic Planning Team. The Strategic Planning Team convened monthly between June and November to develop specific goals and objectives for each internal and external priority developed by the Board of Health. Updates were provided to CCDPH in the department's weekly newsletter and during all staff meetings. Staff had the opportunity to provide feedback on developed goals and objectives via the department's anonymous Digital Solution Box.

During the November 2020 public Board of Health meeting, staff presented the developed goals and objectives for Board members. In December 2020, the Board of Health provided an opportunity during the monthly meeting for the public to provide input on the developed strategic plan. In November and December, the Strategic Planning Team used this feedback to develop "worksheets" with specific action steps, resources, and responsible parties for implementing the internal and external goals and objectives (see example in Appendix A) The Board of Health approved the final Strategic Plan during the March 2021 Board of Health meeting.

Activity	Feb. 20	May 20	Jun. 20	Jul. 20	Aug. 20	Sep. 20	Oct. 20	Nov. 20	Dec. 20	Jan. 20	Feb. 21	2021- 2022
<b>Board of Health Retreat - Established Strategic Priorities</b>	X											
<b>Final Report on FY 19-20 Board of Health Goals</b>		X			X							
<b>Strategic Planning Meetings</b>			X	X	X	X	X	X	X	X		
Recruit and Establish CCDPH Strategic Planning Team		X	X									
Drafted internal Goals/Objectives Selected and Submitted for Staff input				X								
Finalize goals/Objectives/Strategies and Responsible party for internal priorities					X							
Drafted external Goals/Objectives Selected and submitted for staff input					X							
Finalize goals/Objectives/Strategies and Responsible party for external priorities						X						
<b>Board of Health Meetings</b>												
Present goals and objectives/available for public input						X						
Present draft strategic plan for approval/available for public input										X		
<b>All Staff Meetings/Communication</b>												
Updates during weekly update/available for feedback			X	X	X	X	X	X	X	X	X	X
<b>Written strategic plan drafted</b>										X		
<b>Final strategic plan published</b>											X	
<b>Quarterly Strategic Planning Updates</b>												X
<b>Annual Reports</b>												X

## Board of Health Priorities

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Based on extensive input from the community through the Community Health Assessment, the Board of Health Retreat, the CCDPH staff and the strategic planning team and public comment, the Board of Health selected the following priorities.

The Board of Health agreed to four **external**, or community focused, priorities for the short and long term:

- Increase partnerships and collaboration with groups from various sectors, including academic, military, healthcare and faith-based organizations
- Expand mental health and substance abuse services
- Improve health literacy through expanded communication platforms and school outreach efforts
- Explore expanding community access to the Health Department services

The Board of Health also established **internal** priorities for the department:

- Increase staff recruitment and retention, assess employee satisfaction and improve morale
- Improve quality and efficiency of services through Electronic Health Records and other methods
- Expand outreach through Health Department specific social media platforms

## Goals and Objectives

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The Strategic Planning Team developed goals and objectives for each priority established by the Board of Health. Goals and objectives establish criteria and standards against which you can measure the performance of the strategic plan. A goal is a broad statement about the long-term expectation of what should happen as a result of your program (the desired result). Objectives are statements that describe the results to be achieved, and the manner in which they will be achieved. SMART attributes were used to develop clearly-defined objectives. These attributes include:

**Specific, Measurable, Achievable, Relevant or Realistic, and Time-bound.**

## Internal Priorities

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### Priority 1:

### Increase staff recruitment and retention, assess employee satisfaction and improve morale

#### Goal: Increase employee satisfaction

- **Objective 1:** By July 2022, 67% of staff perceive employee morale to be good or great (Note: Baseline data collected on the employee satisfaction by June 30, 2021)
- **Objective 2:** By July 2022, 70% of employees who agree or strongly agree there is effective communication with their direct supervisor
- **Objective 3:** By July 2022, 70% of employees who agree or strongly agree communication from Senior Leadership Team is effective
- **Objective 4:** By July 2022, 70% of employees who agree or strongly agree there is effective communication between health department programs
- **Objective 5:** By December 2021, 100% of supervisors will attend leadership or supervisor training within the first 12 months of hire.

#### Goal: Increase the number of new staff recruited

- **Objective 1:** By July 2021, CCDPH staff from 5 different departments will attend at least 4 recruitment events, annually
- **Objective 2:** By July 2022, the average time to hire will be no more than 3 months from the time the position is vacated
- **Objective 3:** By July 2021, 90% of supervisors will go through interview training and role play and will renew yearly
- **Objective 4:** By July 2021, increase the diversity of candidates selected to be interviewed

#### Goal: Decrease number of people planning to leave their position within two to three years for reasons other than retirement, based on survey data

- **Objective 1:** By December 2021, 75% of new positions will be posted with a salary within 3% of other counties in North Carolina to be competitive
- **Objective 2:** By June 2021, 70% of new staff will complete post hire check ins at 3, 6 and 12 months of hire. Note: The intent of these check-ins is different than monthly check-ins
- **Objective 3:** By June 2022, 85% of full-time positions are filled at any given time

#### Goal: Improve transparency and objectivity in performance reviews

- **Objective 1:** By June 2021, 80% of staff will have completed their annual summary of performance in the Performance System

#### Goal: Increase staff training and personal growth opportunities

- **Objective 1:** By June 2021, 80% of staff will have completed at least one training in the Learn System

## Internal Priorities

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### Priority 2:

### Improve quality and efficiency of services through Electronic Health Records (EHR) and other methods

#### Goal: Improve quality of services

- **Objective 1:** Within six months of Go-Live date 85% of clinical staff will use the selected EHR daily
- **Objective 2:** By July 2022, reduce the average no show rate across clinics by 3%
- **Objective 3:** By July 2022, each clinic will serve 75% of their target number of clients
- **Objective 4:** By July 2022, in each clinic, the average wait time from arrival is no more than 20 minutes after scheduled appointment time (Time from check-in with registration to being seen by nurse/provider)

#### Goal: Improve access of services through newEHR

- **Objective 1:** By July 2022, 50% of clients who identify as needing a mental health referral will have received a referral
- **Objective 2:** By July 2022, WIC will increase the average participation rate (percent of base caseload) by 5%. Baseline: 92.03% as of 9/24/2020
- **Objective 3:** By July 2022, at least one staff member in each department will make referrals via NCCARE360
- **Objective 4:** By July 2022, 20% of patients seen in the clinics will schedule appointments online within the patient portal

#### Goal: Improve efficiency of internal processes

- **Objective 1:** By July 2022, CCDPH will be able to pay for medical records online
- **Objective 2:** By July 2022, members of the public will be able to pay Environmental Health fees online
- **Objective 3:** By July 2022, 35% of Cumberland County death certificates will be filed within 5 days (average baseline is 30.4%)
- **Objective 4:** Within 6 months of Go-Live date with Energov, 85% of Environmental Health staff will use daily

## Internal Priorities

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### Priority 3:

#### Expand outreach through Health Department specific social media platforms

##### **Goal: Obtain/Utilize Social Media for the Health Department**

- **Objective 1:** By July 2022, each health department program will have a monthly average of at least 2 unique posts/content
- **Objective 2:** By July 2022, individuals will spend an average of 1-2 minutes on health department links
- **Objective 3:** By December 2021, the health department will have an average of 100 views per social media posts
- **Objective 4:** By December 2021, the health department social media page will have 1000 followers across social media platforms

##### **Goal: Create social media team for the Health Department**

- **Objective 1:** By July 2021, CCDPH will create a social media team to implement social media for the health department
- **Objective 2:** By December 2021, 75% of health department programs will have a representative on the social media team



## External Priorities

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### Priority 1:

**Increase partnerships and collaboration with groups from various sectors, including academic, military, healthcare and faith-based organizations**

**Goal: Identify new needed partnerships in the community**

- **Objective 1:** By January 2022, conduct at least 2 focus groups to identify areas where new community partnerships are needed
- **Objective 2:** By June 2022, identify at least 2 new agencies or coalitions to join

**Goal: Strengthen Current Partnerships**

- **Objective 1:** By December 2021, Triple P will engage with at least 3 new partners
- **Objective 2:** By April 2021, CCDPH will partner with P4P and the greater sector partnership and will create a listserv where groups can share community wide events and collaborate on projects
- **Objective 3:** By June 2022, host at least 10 events in collaboration with at least one other partner organization each year
- **Objective 4:** By June 2022, the Military Health and Readiness Initiative will have the first convening of partners and stakeholders to address tobacco use in the military

### Priority 2:

**Expand mental health and substance abuse services**

**Goal: Establish in house mental health and substance abuse services**

- **Objective 1:** By July 2022, CCDPH will have at least host at least one psychiatry resident annually
- **Objective 2:** By July 2022, CCDPH will have in house substance abuse referral program

**Goal: Utilize Increase referrals to mental health and substance abuse services**

- **Objective 1:** By July 2020, 50% of clients who identify as needing a mental health referral will have received a referral
- **Objective 2:** By July 2022, the CCDPH Triple P program will train at least 2 mental health agencies to implement Triple P
- **Objective 3:** By July 2022, CCDPH will see a 5% increase in QuitlineNC referrals from behavioral health providers

## External Priorities

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### Priority 3:

#### Improve health literacy through expanded communication platforms and school outreach efforts

##### Goal: Improve health literacy through expanded communication platforms

- **Objective 1:** By June 2022, 100% of school health nurses will have access to the language line via mobile devices to use in the schools
- **Objective 2:** By June 2021, CCDPH will provide Chronic Disease information on at least 2 platforms for community members to access
- **Objective 3:** By December 2021, at least 50% of printed materials will be at no higher than an 8th grade reading level and in both English and Spanish

##### Goal: Improve health literacy through outreach efforts

- **Objective 1:** By June 2022, include at least one health literacy question on the 2021 Community Health Assessment

### Priority 4:

#### Explore expanding community access to the Health Department services

##### Goal: Improve Community perception of the Health Department

- **Objective 1:** By June 2022, 80% of those who take customer service survey, will report positive perception of the health department
- **Objective 2:** By June 2022, 100% of clinics will have offerings for telemedicine or telephonic appointments

##### Goal: Increase outreach efforts and secondary sites

- **Objective 1:** By June 2022, health department clinics and programs will expand their services in the community a least 4 times yearly
- **Objective 2:** By June 2022, CCDPH will obtain and utilize a mobile unit for at least 4 clinical and community outreach

##### Goal: Increase access to the health department

- **Objective 1:** By June 2022, explore expanding services by expanding hours of operations
- **Objective 2:** By June 2022, 10% of referrals will be made to mental health/substance abuse services in NCCARE 360
- **Objective 3:** By June 2022, increase WIC client caseload by 5 %
- **Objective 4:** By June 2022, 10% of CCDPH staff will make referrals via NCCare360
- **Objective 5:** By June 2022, 50% of patients seen in the clinics will schedule appointments online within the patient portal

## Implementation and Tracking

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Implementation and tracking of the strategic plan will begin in February 2021. Successful implementation of the strategic plan will take participation from all health department staff and collaboration with new and existing community partners. The Strategic Planning Team developed “worksheets” with specific action steps and resources needed to be successful. Resources include staffing, funding (new and/or existing), community partnerships, materials, supplies, etc. See example in Appendix. We anticipate these worksheets to be living documents that will be adjusted overtime based on funding, staff, and the availability of other resources.

For each strategic goal and objective these worksheets designate an associated “person responsible” within the CCDPH department or program that is directly affected by the goal or objective to guide implementation and keep the department on track to achieve its objectives within the identified timeframes. In addition to the “person responsible,” the Strategic Planning Team is split into three groups that are also assigned one internal and one external BOH priority. Each group will track the priority for the two years and report quarterly to the Health Director and Deputy Health Director during quarterly Strategic Planning Team Meetings. The strategy leads will be responsible for keeping plans up to date and meeting milestones. A more in-depth Strategic Planning Document has been created and used internally to guide progress (example seen in Appendix A).

Quarterly, the Board of Health will receive progress updates on specified goals and objectives. Board of Health (BOH) meetings are held the third Tuesday of each month at 6 p.m. The Board of Health members invite and encourage the public to join the BOH meetings virtually (or in-person as COVID-19 restrictions allow) and to provide ongoing feedback during the public comment period. An evaluation will be done on each goal and objective at the end of the two years to assess how successful the plan was, what barriers were encountered and to begin planning for the next three years. A final report will be made available on the Health Department website at [CumberlandCountyNC.gov/health](https://CumberlandCountyNC.gov/health).

## Appendix A: Strategic Planning Team Documents and Worksheets

### Sample Internal Tracking Spreadsheet

<b>Priority 3: Improve health literacy through expanded communication platforms and school outreach efforts</b>
<b>Goal 1 : Improve health literacy through expanded communication platforms</b>
<b>Objective 1:</b> By July 2022, 100% of school health nurses will have access to the Language Line via mobile devices to use in the schools
<b>Strategy 1:</b> Assess current funding and grant opportunities to supply the mobile devices.
<b>Strategy 2:</b> Train school health nurses on using the Language Line
<b>Objective 2:</b> By June 2021, CCDPH will provide chronic disease information on at least two platforms for community members to access
<b>Strategy 1:</b> Utilize EHR for patients to contact with questions about their medications, etc., and send out a easy to understand breakdown document for the patient to use
<b>Strategy 2:</b> Create a FAQ section on the websitefor chronic condition questions (hypertension, diabetes, substance misuse, etc.) most prevalent in Cumberland County
<b>Objective 3:</b> By December 2021, at least 50% of printed materials will be at no higher than an 8th grade reading level and in both English and Spanish
<b>Strategy 1:</b> Establish materials and handouts for clinics to utilize when discussing conditions with patients in both English and Spanish
<b>Goal 2: Improve health literacy through outreach efforts</b>
<b>Objective 1:</b> By June 2022, include at least one health literacy question on the Community Health Assessment
<b>Strategy 1:</b> Fireside Chats quarterly that will address health concerns, strategies for improvement and available resources
<b>Strategy 2:</b> Implement evidence-based health literacy interventions <a href="https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/health-literacy-interventions">https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/health-literacy-interventions</a>
<b>Strategy 3:</b> Promote health literacy videos on social media/play in waiting rooms (Questions to Ask Your Doctor) <a href="https://www.ahrq.gov/questions/index.html">https://www.ahrq.gov/questions/index.html</a>
<b>Strategy 4:</b> Distribute health literacy materials to provider offices
<b>Strategy 5:</b> Distribute health literacy materials for churches, community agencies and nursing homes

## Person Responsible Worksheet

Priority #? Internal or External?	Goal?	Objective #?	Who's Responsible?	Resources Needed?

### Sample Internal Priority Spreadsheet

<b>Priority:</b> Increase staff recruitment and retention, assess employee satisfaction and improve morale			
<b>Goal:</b> Increase employee satisfaction			
<b>Objective:</b>			
Internal/External Partners Needed		Resources	Group Responsible
Internal	External		

### Sample External Priority Spreadsheet

<b>Priority:</b> Increase partnerships and collaboration with groups from various sectors, including academic, military, healthcare and faith-based organizations			
<b>Goal:</b>			
<b>Objective:</b>			
Internal/External Partners Needed		Resources	Group Responsible
Internal	External		

## Appendix B: Evaluation and Highlights

The Cumberland County Department of Public Health Team (CCDPH) chose to do a two-year strategic plan to better encompass the climate and environment that society was in due to COVID-19. CCDPH had many successes and challenges throughout the 2021-2022 Strategic Plan timeframe. Below highlights some of the team's successes and accomplishments with completing and utilizing the strategic plan for those two years.

### NCCARE360

NCCARE360 onboarded September 2021. In the Fall of 2021, each division of CCDPH designated a person(s) as a referral user. Self-paced module trainings or live webinar trainings were given to users to learn the system and start making referrals. The highest referral made from December 2021-December 2022 was housing according to the outbound referral records. All referral users have at least 3 days to follow-up on an incoming referral or any open cases. CCDPH is 2nd behind Catawba County in referrals sent through NCCare360.

By July 2021, 10% of clients who identified as needing a mental health/substance abuse referral, were referred by the CCDPH Social Worker, prior to the rollout of NCCARE360. By January 2022, all clinics started utilizing the network, with clinic staff implementing an assessment form which screened patients for mental health and substance abuse needs. Since the inception of new NCCARE360 Network, few mental health service providers were listed, however, CCDPH continued to make referrals to Alliance Health, Mobile Crisis Unit, and the Cumberland Crisis Collaborative, to ensure that LHD patients had some form of linkage to needed services. As the network continues to improve and expand, we will continue to use NCCARE 360 as a referral source. There were 594 cases to which we referred. Of those 594 cases, 65 were for mental health and 3 were for substance abuse.

### Triple P

Triple P trained two mental health agencies and served in various community groups to increase participation with Triple P online. Presentations were made to several community groups to increase awareness of Triple P and the availability of training. Triple P rolled out a plan to work with the legal system to use Triple P as a court mandated resource with implementation planned for March 2023.

### Expanded Services

Various departments across CCDPH provided expanded services throughout the county to include the reinstitution of late clinics on the second Tuesday of every month, expanding clinical hours until 7 p.m.

Several outreach events aimed at expanding screening services (HIV & syphilis), providing educational materials, and offering COVID tests and vaccines were conducted throughout 2021-2022.

Some of these events included PrideFest, Dog Day at the Botanical Gardens, Vax Your Pet/Vax Yourself Day, Operation Cease Fire, Bridging the Gap: World AIDS Day, Hope Mills Community Resource Day, among many others.

### Late Night Clinics

In August 2021, the health department resumed late night clinic hours. The Health department is open on the second Tuesday of each month until 7 PM for late night services.

Clinical services (STD, maternity, child health, immunizations, and family planning), WIC, and the Baby Store is open during late night clinic.

### Customer Service Surveys

Out of the clients who took the customer service surveys in our varying clinics, the following results occurred.

**100%** of those that completed the survey for STD clinic stated they would recommend our clinic and would return when needed.

**90%** of customers who visited the Health Education Baby Store shared that they were satisfied with the amount of time the staff member spent with them addressing their needs.

**90%** of customers who worked with Environmental Health staff stated that a staff member answered their questions and Environmental Health staff effectively shared how they came about their findings.

**100%** of customers who worked with Environmental Health staff stated that our staff acted in a professional manner.

### QuitlineNC

CCDPH saw a 5% increase in QuitlineNC referrals from behavioral health providers.

In addition, CCDPH began implementation of QuitlineNC integration with the new EHR CureMD with finalization happening in 2023.

### Health Literacy Team

CCDPH formed the Health Literacy Team including several employees from various departments. Through coordinated efforts, the Health Literacy Team was able to collect 100% of all printed materials throughout the health department to ensure appropriate literacy levels in both English and Spanish.

Printed materials were checked for standardization (using current and proper health department logos) and those embedded into the new electronic health system were checked for compliance. Educational materials used from outside agencies and organizations such as the Centers for Disease Control and Prevention (CDC) were determined to be appropriate for patient use.

### Language Line

Current usage of the language line was assessed. Current utilization of the language line did not indicate a need to deploy mobile language line units in the school-based setting.

In addition, it was determined that it would be cumbersome for the nurses to move the mobile units (ipads) between the more than 80 schools in which they are providing services. The school health nurses still have access to utilize the language line using the phone line. School health nurses will receive refresher training on the use of the language line. We will continue to assess the need for the mobile interpreter units in school based settings.

### Social Media

The Health Department set up a social media team that currently has 12 members from varying departments in the agency as outlined in the plan. The agency now has Facebook and Instagram. Branding of media and an increased usage of social media boosting is occurring regularly when promoting events, health observances and staff appreciation. Facebook currently has 560 followers at the time of this report and Instagram has 113.

### Equity

16 individual staff have completed Racial Equity Institute Groundwater or Phase One racial equity courses.

The health department has implemented a health equity and microaggressions session within the agency orientation.

The agency has also created an Equity committee to continue progress on equity related work.



## Community Outreach & Partnerships

In 2020, the Health Department purchased a mobile unit to utilize for community outreach events. The Health Department has participated in more than 100 community outreach events to expand health department services. Staff have implemented immunization clinics (flu, COVID-19, and Hepatitis) vaccine clinics in collaboration with Fayetteville-Cumberland Parks and Recreation, Fayetteville Housing Authority, Fayetteville FAST Transit Center and Cumberland HealthNet, Compare Foods, Operation Inasmuch, Manna Dream Center, Methodist University, Fayetteville State University, and Fayetteville Technical Community College, Fayetteville Urban Ministry, and numerous faith-based agencies.

In 2021, the Health Department launched our now twice annual, Vax Your Pet/Vax Yourself event. During the event, community members bring their pets to receive a required rabies vaccine and have the opportunity to get vaccinated for COVID-19, back to school immunizations, and flu. The event has expanded to include HIV and STD testing.

In 2022, held back to school immunization clinics on Cumberland County school campuses to encourage students to get their required back to school vaccinations before the required deadline. Staff provided HIV testing during outreach events in collaboration with the Cumberland County HIV Taskforce.

Staff also distributed Narcan, masks, and COVID-19 At home test kits during community outreach events.

During the Community Health Assessment process and during meetings with external agencies, staff identified opportunities establish new partnerships. In July 2021, the Cumberland County-Ft. Bragg Food Policy Advisory Council was established to address food insecurity. In August 2022, the Jail

Health Committee meetings were re-established with Cumberland County Detention Center, the jail health provider, hospital, and representatives from the criminal justice system. In addition, staff joined the Justice Services Advisory Council (JSAC) to improve the efficiency and effectiveness of the Cumberland County Criminal Justice System. Staff also participated in the Murchison Choice Neighborhood Steering Committee and the Partnership for Children Community Advisory Council.

Staff also worked to enhance our current partnerships. Health department staff engaged with community agencies to implement outreach events and increase access to services.

In 2021, staff launched the inaugural Vax Your Pet, Vax Yourself event to encourage people to vaccinate their pet against rabies and to receive COVID-19, flu, and other back to school immunizations for themselves. Community partners provide informational booths during these events.

COVID-19 vaccine and testing events were hosted in collaboration with Cumberland-Fayetteville Parks and Recreation Center, Healthier Together, Cumberland HealthNet, the FAST Transit Center, Manna Dream Center, Operation Inasmuch, Fayetteville Housing Authority, and local colleges and universities (Fayetteville Technical Community College, Fayetteville State University, and Methodist University, and numerous faith based agencies).

Back to School immunization clinics were held onsite for kindergartners and seventh and twelfth grades to increase immunization rates for required childhood vaccinations.

Staff have also partners with homeless serving agencies and the Cumberland County HIV Taskforce to increase access to Hepatitis vaccinations, HIV testing, and Narcan.



Department of Public Health