

A Regular Meeting of the Durham County Board of Health was held February 8, 2024, with the following members present:

Roger McDougal, DDS; Gene Rhea, PharmD, MHA; Rosemary Jackson, MD; Mary Braithwaite, MD, MSPH; James Miller, DVM; Josh Brown; Victoria Orto, DNP, RN, NEA-BC; Commissioner Nida Allam and Darryl Glover, OD

Excused Absence: Anthony Gregorio, MBA

Others Present: Rod Jenkins, Rosalyn McClain, Attorney Nathan McKinney, Kristen Patterson, Liz Stevens, Jeff Jenks, Chris Salter, Marcia Richardson, Lindsey Bickers-Brock, Marissa Mortiboy, Josee Paul, Micah Guindon, Rachel Elledge, Annette Carrington, Malkia Rayner, Shenell Little, Willa Robinson

**CALL TO ORDER:** Chair Roger McDougal called the meeting to order at 5:01 p.m. with a quorum present.

**DISCUSSION (AND APPROVAL) OF ADJUSTMENTS/ADDITIONS TO AGENDA:** There were no adjustments/additions to the agenda.

Dr. Rhea made a motion to approve the agenda. Dr. Orto seconded the motion, and the motion was unanimously approved by the board members as identified in the attendance roster above.

**REVIEW OF MINUTES FROM PRIOR MEETING/ADJUSTMENTS/APPROVAL:**

Dr. Jackson made a motion to approve the minutes for January 11, 2024. Dr. Rhea seconded the motion, and the motion was unanimously approved by the board members as identified in the attendance roster above.

**PUBLIC COMMENTS:** There were no public comments.

**STAFF/PROGRAM RECOGNITION:**

Mr. Jenkins recognized:

Corey Morris-Public Health Preparedness Coordinator. Upon taking the health directorship in 2020, Corey Morris was a Registered Environmental Health Specialist and was one that was interested in preparedness. Little did I know that our preparedness coordinator at the time was set to retire as COVID was upon us. Since that time Mr. Morris has done a fantastic job and has a great attitude and a passion for preparedness. There's nothing that the team can't ask him that he would not do for us, and Durham County and his relationship extends to the County Office of Emergency Services and being a good player with them. I just wanted to really lift him up and just let this board know how valuable he is to our team and to the overall community and we are grateful for his contributions.

**ADMINISTRATIVE REPORTS/PRESENTATIONS:**

**FY 23-24 BUDGET OVERVIEW 1<sup>ST</sup> QUARTER (*Activity 33.6*)**

Micah Guindon, Public Health Local Finance Administrator provided the board with an overview of the expenditures/revenue for 2<sup>nd</sup> Quarter-FY 23-24.

**Summary Information:**

The Department of Public Health's original budget for FY 23-24 is \$28,966,535. Since July 1, 2023, \$6,393,805 has been added in expenditures from budget amendments as well as rollover funds and

2 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

\$3,915,002 has been added in off-setting revenue from budget amendments. Thus, the revised budget for FY 23-24 is \$31,445,338. The Department of Public Health has spent \$25,818,243 thus far this FY, making up 57% of the overall expense budget, including funds encumbered for contracts for the remainder of the year and benefits budgeted in the County's Benefits Fund. Most of these expenses are personnel costs, including salaries and FICA. Contracted services, insurance/bonds, and supplies are also among the highest expenditures this quarter.

The Department of Public Health has brought in \$5,898,794 in revenue, making up 43% of the revenue budget. The highest type of revenue this quarter is from Medicaid (\$3,077,912) and secondly the department's numerous grants (\$2,282,247). Administration, Nutrition/DINE, Pregnancy Care Management (OBCM), Child Health, Tuberculosis Screening, and Health Education are the cost centers that generated the most revenue this quarter.

*(A copy of the PowerPoint Presentation is attached to the minutes.)*

**PUBLIC HEALTH VACANCY REPORT (Activity 37.6)**

The board received a copy of the vacancy report for February 2024 prior to the meeting. The vacancy rate through the end of January 2024 was 15.3%.

*(A copy of February 2024 Vacancy report is attached to the minutes.)*

**QUESTIONS/COMMENTS**

**Chair McDougal:** The report looks fairly standard again, but I will give the floor to Director Jenkins if he wants to make any comments.

**Mr. Jenkins:** I will just say 2024 is starting off pretty well. I did say to the leadership team and it's worth repeating that's usually a time of reflection and we tend to see a lot of resignations but we simple have not seen that which is indicative of the great place that we work in for Durham County. It's noteworthy to indicate to you all that in December the vacancy percentage was about 16.6% and now it's about 15.3% so we are hopeful that we are on a positive trend. I also will say that we have been very successful under the leadership of Director of Nursing, KiKi Rayner and Deputy Health Director, Liz Stevens to have filled some key nursing positions and certainly want to give them their kudos while I'm able to do so. Otherwise, things are looking up as far as vacancies.

**Chair McDougal:** That's awesome and I noticed that the vacancies are down slightly and always good to hear that we're building up that nursing core that's so valuable to us.

**Mr. Jenkins:** We won't smile too much because we do know that we have some retirements coming.

**NOTICES OF VIOLATIONS (NOV) REPORT (Activity 18.2)**

The board received a copy of the Environmental Health Onsite Water Protection Section NOV report through the end of January 2024 prior to the meeting.

*(A copy of February 2024 NOV report is attached to the minutes.)*

**QUESTIONS/COMMENTS:**

**M. Salter:** We just had one additional NOV for the month of January 2024. If you notice line #11 there's some verbiage there about a homeowner and this has been an interesting case to deal with and we will need to get county legal involved with this one unfortunately. There is a message there where the person requested financial assistance which we still don't have anything in place on the county level to do that. This person has already had a septic tank installer out to help identify what the problems are and then after they did the work, they refused to pay them so it's not a good situation and could drag out for a little bit longer it's been on the list since October 2023.

Commissioner Allam: I have a question, is this a residential property?

3 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

**Mr. Salter:** Yes.

**Commissioner Allam:** So, a residential property had a septic issue that they needed to repair, and they didn't pay their contractor...I'm confused on how did the public health department get involved with this?

**Mr. Salter:** Commissioner you know that we in Environmental Health are responsible for evaluating properties and issuing septic permits for properties that aren't connected to municipal sewer and when a system fails and typically that's what we refer to as "surfacing" when you have sewage coming up to the surface of the ground, that is against the law and we issue an NOV and then we try to work with the homeowner. The NOV is really suppose to be taken care of within 30 days but that's an impossible task given the situation we are in today with all the building and installs that are going on and it's impossible to get an installer out there in that short of time plus sometime it takes a while to figure out what's actually wrong with the system (maybe it can or can't be fixed) and in this situation part of the problem was getting someone out there with some heavy equipment to dig part of the system up to identify the problem and then after that the installer said that they refused to pay.

**Commissioner Allam:** That's helpful. I was more so asking about the county's responsibility of payment. It's obviously an unfortunate situation. I can talk to Attorney Massey about how the county gets involved in the payment issue.

**Mr. Salter:** There's no current program in place within the county, some counties do. We have proposed a program, more of an assistance program not the county paying for everything but based on someone's financial situation it could be adjusted like lots of other programs that are out there, but we've never been able to get it pushed all the way through. There was presentation last year I believe going over a program that we proposed, and we can provide you with that information if you would like to have that.

**Commissioner Allam:** Yes. That would be great and also what area of Durham is this like the Southeast where we've been hearing a lot of septic tank issues due to the development like blasting?

**Mr. Salter:** No. This is not impacted by the development at all.

**Health Director's Report  
February 8, 2024**

**Division / Program: Public Health / Environmental Health**  
**(Accreditation Activity – 4.1 The local health department shall engage in surveillance activities and assess, investigate, and analyze health problems, threats, and hazards, maintaining and using epidemiological expertise.)**

**Program description**

- On Wednesday, January 17<sup>th</sup>, Durham County experienced power outages from routine maintenance at a substation damaged equipment. The unexpected damage led to power outages throughout the county that affected food service facilities, school cafeterias, childcare centers, and residential care facilities.

**Statement of goals**

- Collaborate with responding agencies to ensure that staff and general public are safe.
- Coordinate with local facilities to ensure that operations cease and/or unsafe foods are discarded.
- Provide education to facility operators and the public about food safety during a power outage.
- Provide information on warming stations and resources available to Durham County residents.

4 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

**Issues**

- **Opportunities**
  - Environmental Health working with owners and operators to build relations and trust throughout the community.
  - Educate the public on safe food temperatures through social media platforms.
  - Build relationships with other agencies responding to the event.
- **Challenges**
  - Environmental Health staff safely navigating areas and streets without power.
  - Inability to overlap power outage maps from Progress Duke Energy with affected facilities in Durham County.

**Implication(s)**

- **Outcomes**
  - Environmental Health conducted 51 visits that included 32 facilities including restaurants, commissaries, grocery stores, convenience stores, and childcare centers.
  - All childcare centers and residential care facilities received communications from Environmental Health about discarding unsafe foods during an extended power outage and the resources provided by the County due to the extreme cold.
  - Direct communications with Durham County Public School about power outages at 6 public schools.
  - Increased communications and improved relationships between Environmental Health and facilities.
  - Product disposition of unsafe foods occurred at 2 of the facilities that were visited.
- **Service delivery**
  - Operators that were without power or opened following the extended power outage were educated in disposing of unsafe food products.
  - All facilities received communication about food safety during extended power outages.
- **Staffing**
  - 4 DCoPH Environmental Health staff drove through affected areas and documented facilities that were closed due to lack of power on 1/17/24 and 1/18/24.
  - 4 DCoPH Environmental Health staff conducted over 50 visits including visits after power was restored to ensure foods stayed at a safe temperature.
- **Revenue**
  - No revenues associated with this activity

**Next Steps / Mitigation Strategies**

- Look into receiving data from power companies to overlap data with Environmental Health Geoportal.
- Continued public education based on how to safely operate during and after a severe weather emergency.
- Document facilities that have plans for power outages so Environmental Health staff can focus on facilities that are not prepared for emergency power outages.

**Division / Program: Environmental Health/Public Health Preparedness**

**Accreditation Activity 6.2 - County Emergency Operations Plan.**  
**Accreditation Activity 6.3 Regional Exercises/Activities. Accreditation Activity 7.4 - All Hazards Emergency Response Plan. Accreditation Activity 7.5 Local Emergency Manager Communication.**  
**Accreditation Activity 7.6 Response Plan Testing**

5 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

**Program description:**

- On 25 January 2024, the decision was made to activate the City of Durham & Durham County, North Carolina Emergency Operations Plan Sheltering Annex. This activation was the response to an ongoing extended power outage, which affected as many as 11,000 people in eastern Durham. The shelter was located at the old Northern High School at 173 Tom Wilkinson Rd.

**Statement of goals:**

- Notify, mobilize, and assemble our teams for shelter operations for a no-notice incident.
- Conduct an environmental health assessment for mass care operations prior to shelter opening.
- Provide public health services in a mass care shelter once notified of a shelter opening, in accordance with the Durham City/County Shelter Annex and DSS Shelter Operations Handbook.
- Overcome public health-related challenges faced during shelter operations.

**Issues:**

- **Opportunities**
  - Provide public health services for Durham residents who were without power for more than 24 hours.
  - Address Multi-year Training and Exercise Plan training priority #2: Public Health Response in Sheltering.
  - Identify PH sheltering shortfalls and areas for improvement.
- **Challenges**
  - Challenged our rapid communication capabilities, with responders stating they would like to see more effective communication among leadership, supervisors, and front-line employees.
  - Shelter staff report that they would like more training on shelter operations.

**Implication(s)**

- **Outcomes**
  - Despite facing challenges, the agency was able to provide public health services for the four Durham residents who utilized the shelter.
- **Service delivery**
  - This response validated DCoDPH's ability to deliver Public Health Emergency Preparedness and Response Capability 7: Mass Care. Mass care is the ability of public health agencies to coordinate with and support partner agencies to address within a congregate location (excluding shelter-in-place locations) the public health, health care, mental/behavioral health, and human services needs of those impacted by an incident. This capability includes coordinating ongoing surveillance and assessments to ensure that health needs continue to be met as the incident evolves.
  - Overall, this response leaves us better prepared to establish and operate a shelter in response to future events.

6 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

- **Staffing**

- The shelter was staffed by 12 public health nurses and one Advanced Practice Provider, with support from the DCoDPH leadership team, Maintenance Services Coordinator, Medical Services Program Educational Coordinator, and Public Health Preparedness Coordinator.

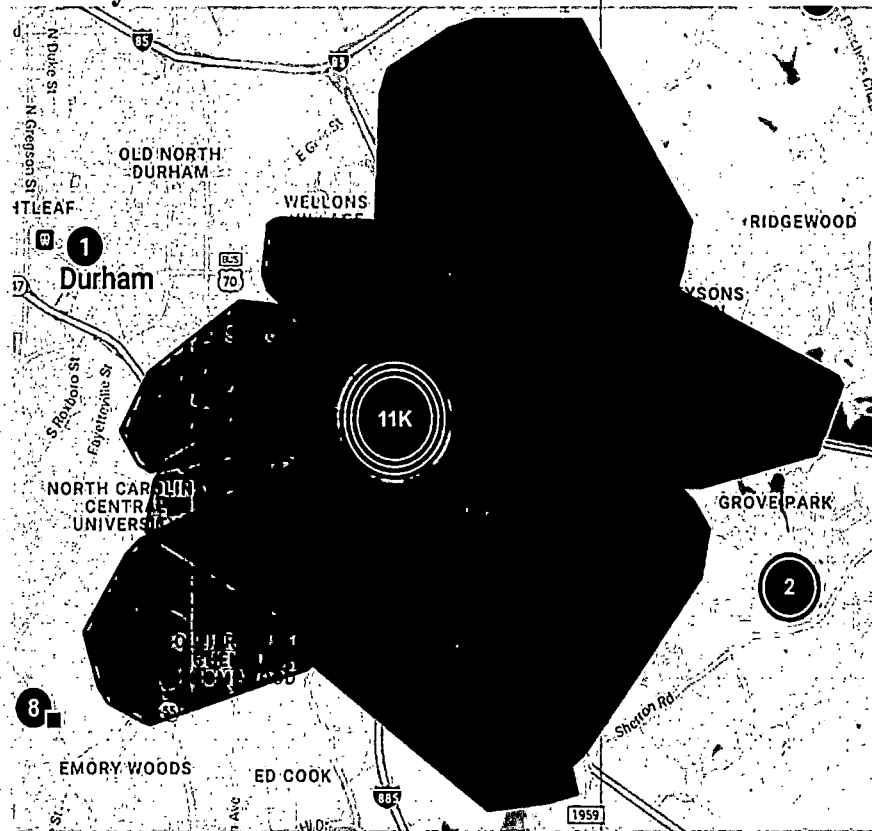
- **Revenue**

- N/A

**Next Steps / Mitigation Strategies**

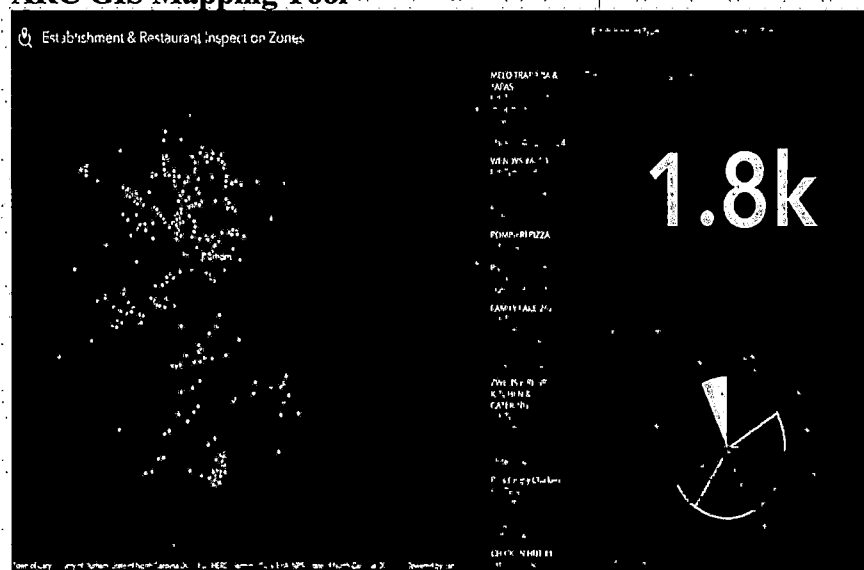
- While the after-action review is still underway, initial findings indicate a need for improvements in communications and staff training. These will be incorporated into our improvement plan based on the after-action report and addressed promptly.

**Durham County Power Outage Map**  
**January 2024**



7 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

**General Inspections (Food, Lodging & Institutions)**  
**Territory/Establishment Management**  
**ARC GIS Mapping Tool**



**Division / Program: Population Health / Workforce Development**

**Activity 24.2:** The local health department shall have a staff development plan that includes identifying and addressing the training and continuing education needs of the staff.

**Program description**

The PH WINS (Public Health Workforce Interests and Needs Survey) supports the governmental public health workforce by measuring strengths and weaknesses to inform future investments in funding, training, recruitment, retention and. PH WINS is the only nationally recognized source of data regarding the public health workforce. Durham County Department of Public Health participated in a special administration PH WINS from the public health workforce in local health departments in 2022.

**Statement of goals**

- Determine strengths and gaps to inform future allocations in funding, training, recruitment, and retention of the DCoDPH workforce.

**Issues**

- **Opportunities**
  - There is an opportunity to take this information into consideration when DCoDPH staff make updates to the agency's workforce development plan.
- **Challenges**
  - Due to the amount of information that was collected and analyzed, the timing of the survey results was delayed. The results were provided one year after the data was collected.

**Implication(s)**

- **Outcomes**
    - Key Findings for DCoDPH staff (92 total respondents, 44.4% of 207 staff members):  
Demographic Data for survey respondents:
      - 89% of the agency's workforce self-identifies as a woman.
      - More than half of the agency's workforce self-identifies as white.
      - Half of the agency's workforce is between the ages of 31 and 50 years.
- Educational Attainment

**8    A Regular Meeting of the Durham County Board of Health,**  
**held February 8, 2024.**

- 24% of the agency's workforce has an advanced degree.
  - o 22% have a master's degree.
  - o 2% have a Doctoral degree.
- 6% have a specialized degree in public health.

**Supervisory Status/Job Role**

- 3 out of 4 agency staff work in a non-supervisory role.
- 22% of staff worked in a public health sciences job role, which includes program staff, epidemiologists, and contact tracers, among others.

**Tenure at Agency**

- Nearly half of the agency's workforce in 2022 had served at their agency for 5 years or less.
- 14% had served 21 or more years.

**Intent to Leave/Stay**

- 17% of agency employees are considering leaving their organization within the next year.
- 12% reported that the COVID-19 pandemic impacted their decision to stay or leave.
  - o Among those who intend to leave, 25% said the pandemic impacts their decision.

**Reasons for Leaving/Staying**

- Top reasons for leaving among agency staff who intend to leave include:
  - o Work Overload/Burnout
  - o Stress

**Areas for Training Needs**

- o Budget and financial management
- o Systems and strategies thinking
- o Community engagement
- o Policy Engagement
- o Change Engagement

**Well-Being**

- 13% of agency staff rate their mental health as either "poor" or "fair."

**Perceptions About Workplace**

- 100% of agency staff had the perception that the work they do is important.

- **Staffing**

- o The PH WINS process at DCoDPH was coordinated by the Project Manager for Quality & Policy.

- **Revenue**

- o None

**Next Steps / Mitigation Strategies**

- The survey results should be considered when DCoDPH makes budget allocations and for decision-making for training, recruitment, and retention.
- An infographic of the information will be developed to share to staff and stakeholders in spring 2024.

**Division / Program: Population Health / Partnership for a Healthy Durham**

**Accreditation Activity 15.1 The local health department shall develop plans to guide its work.**

**Program Description**

In partnership with Duke Health, the Partnership for a Healthy Durham applied for a grant from The Duke Endowment through Healthy People Healthy Carolinas in 2021. Duke Health and the Partnership for a Healthy Durham were awarded \$750,000 for January 1, 2022-December 31, 2027. Healthy People Healthy Carolinas is an initiative of The Duke Endowment



9 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

and is a community-based approach to respond to chronic health diseases like diabetes, unhealthy weight, and heart disease. These funds have been dedicated to the work of the Physical Activity, Nutrition, and Food Access (PANFA) committee.

**Statement of goals**

- Utilize grant funds and learning opportunities to operationalize racial equity principles in the Partnership.
- Align efforts with Community Health Improvement Plans (CHIPs) with other county-wide initiatives to improve rates of obesity, diabetes, and food access for those most impacted in Durham County.
- Build and center community through authentic engagement and centering voices of those most impacted by the health conditions.

**Issues**

• **Opportunities**

- Review and make changes to Durham Community Health Improvement Plans to ensure equity for those most impacted by obesity, diabetes, and food access.
- Support work of the Durham County Food Security Coordinator
- Host first in-person Partnership meeting since March 2020
- Support Triangle Double Bucks program
- Collaborate with Continuing efforts through (Matching Excess and Needs for Stability) MEANS Database to connect excess food with food recipients.
- Develop plans to aid in local vaping prevention efforts.
- Support Safe Routes to School in Durham.
- Connect with Durham Bicycle Pedestrian Advisory Commission to evaluate a walk audit around the Braggtown neighborhood.

• **Challenges**

- Lack of an established contract for simultaneous translation services for quarterly and monthly Partnership meetings prevented this from being offered.
- Difficulty identifying food recipients for food recovered through MEANS Database.
- Barriers to identifying long-term solutions to road safety issues that don't require sidewalk repair or other labor from transportation departments.
- Limited capacity of local partners (i.e. school physical education teachers) in programming

**Implication(s)**

• **Outcomes**

- Hiring of full-time county position dedicated to PANFA work.
- Development of an electronic resource highlighting free and low-cost physical activity resources throughout Durham County.
  - This is available on the Partnership website at [www.healthydurham.org](http://www.healthydurham.org) and was posted through social media.
- Maintenance of current Healthy Mile Trails and signage
- Purchasing large order of small wares and food preparation supplies for Durham Public School Nutrition Department.
- Purchasing of Shur-Tite curb bike lane protectors for a City of Durham transportation improvement project
- Building capacity in the community and through partner agencies by sponsoring:

10    A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

- 17 Partnership and community members to attend local Racial Equity Institute (REI) trainings, January to March 2024,
- A community partner to attend the Food Waste NC Summit in Asheville, NC in November 2023 to learn more about and guide PANFA's work related to food recovery practices and reducing food waste.
- 14 individuals throughout the community to participate in a Duke University grant-writing class. Preference was given to individuals from smaller organizations and those who would not normally be able to attend.
- Attendance of BikeWalk NC conference to learn about active transportation and policy.
- Communications and spread of resources related to Community Eligibility Provision (CEP), the program allowing for students to receive free school meals.
- **Staffing**
  - Partnership for a Healthy Durham Coordinator
  - PANFA Specialist
  - PANFA committee Co-Chairs
- **Revenue**
  - \$750,000 over five years
    - \$150,000 per year

**Next Steps / Mitigation Strategies**

- The PANFA committee plans to create multiple Story Walk trails on or around parks, trails, and/or schools.
- PANFA will host at least three Community Cafes focused on food security and physical activity in areas most impacted by these issues beginning in spring of 2024.
- The Partnership plans to hire two community members to engage with PANFA work and ensure prioritization of racial equity principles starting in spring 2024.
- The PANFA Specialist and Partnership Coordinator are working to establish a contract to update the Partnership's website, which will allow ease of use, ensure ADA compliance for visually impaired, and allow more compatibility for community programming in the future.
- PANFA plans to purchase litter cleanup kits from Keep Durham Beautiful and will work with Durham County Library staff to initialize a check-out system, promoting beautification and physical activity.
- PANFA will work with Durham Public School and DINE staff with the Unbox Program for students, assisting where needed.
- Work with Durham Community Fridges on increasing the reach of community fridges in Durham.
- The PANFA Specialist will continue conversations with early childhood education center stakeholders to implement better physical activity and/or nutrition programs.
- PANFA will continue its efforts of reaching and working with the school health advisory council (SHAC) in Durham Public Schools.
- PANFA will continue conversations of community-wide physical activity campaigns and incentivize community members to participate.

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

11 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

**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 (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 Durham County Department of Public Health (DCoDPH).
- On November 2, 2023, Durham County Department of Public Health co-hosted the first annual Trauma-Informed Care Healthcare Provider Symposium at Durham Technical Community College. The Adverse Childhood Experiences and Resilience Coordinator, Jess Bousquette, and the Nurse Planner, Sky Rusciano, worked closely with Southern Regional AHEC, Durham Tech, and providers at Duke to develop the agenda, recruit speakers, and host the event.

**Statement of goals:**

- **Adverse Childhood Experiences and Resilience Program goals**
  - Durham becomes more trauma-informed and supportive of strategies that strengthen individual, family and community buffers that can prevent or alleviate the effects of adverse childhood experiences and adverse community environments.
  - To mitigate sources of individual and community trauma, support the ways individuals, families, and communities manage stress and trauma, and promote health and wellbeing across age groups.
- **2023 Trauma-Informed Care Healthcare Provider Symposium goals**
  - To increase provider skills and self-efficacy to provide trauma-informed care in Durham County.
  - To strengthen knowledge and skills for healthcare and behavioral health providers to implement trauma-informed care in a clinical setting.
  - To increase understanding and skills related to self-care for healthcare providers.

**Issues:**

- **Opportunities**
  - Following a successful trauma-informed care and substance use webinar series in October 2022, the ACEs Coordinator, Southern Regional AHEC, and several Duke providers decided to create a longer, in-person continuing education opportunity focused on skills building.
  - The Planning Committee consisted of 2 DCoDPH staff, 1 Durham Technical Community College staff member, 1 trainer/consultant, 2 Duke providers, and 1 member of staff from Duke Community Health. They met regularly over the course of 9 months to plan the event.
- **Challenges**
  - Identifying committee members who could be consistently present for planning meetings.
  - Ensuring nurses and other clinical staff could participate in the day long training. While DCoDPH staff were strongly encouraged to attend as part of their work time, nurses at other

12 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

facilities had to take PTO to participate, which reduced attendance.

- Identifying sufficient speakers who were available for requested topics was challenging, but DCoDPH staff members were able to step in for a few sessions successfully.

**Implication(s):**

- **Outcomes**

- 50 healthcare professionals attended the event. Half of the attendees were DCoDPH staff, and a quarter of attendees were from Duke University Hospital System.
- 100% of attendees said they learned one new thing that they would incorporate into their daily work, particularly in the areas of current best practice, communication skills, collaboration, and patient-centered care.
- Over 80% of participants would like another full day continuing education event in the future.
- 42% of attendees were nurses (including public health nurses), and 21% of attendees work within mental health and behavioral health.
- Evaluations from the event were overwhelmingly positive and indicate an increase in knowledge among attendees.

- **Service delivery**

- The free full day event was held at Durham Technical Community College and included 5.25 hours of continuing education credit for nurses, social workers, physicians, psychologists, nurse practitioners, and counselors.
- Skills-building workshops were offered based on potential attendee feedback collected during the planning process.
- Sessions included:
  - Trauma-informed Patient Communication,
  - Trauma-Informed De-escalation Skills,
  - Culturally Affirming and Relevant Care,
  - Developing Physical and Psychological Safety,
  - Reflective Supervision, and
  - Provider Wellness (agenda provided at the end of this report).

- **Staffing**

- Adverse Childhood Experiences and Resilience Coordinator dedicated an average of 5-10 hours a month to the planning.
- Nurse Planner dedicated 2-3 hours a month to the planning.
- Five county staff participated as speakers at the event. Director Rod Jenkins (DCoDPH) provided welcoming remarks, Christine Balen (DCoDPH) spoke on the healthcare provider panel, Karen McLeod (DCoDPH) led a breakout room on reflective supervision, Jess Bousquette (DCoDPH) led a skills workshop on trauma-informed de-escalation, and Tremaine Sawyer (Justice Center) led the end of day debrief and reflection.
- Members of the planning committee dedicated about 1-3 hours a month.
- The Health Education Administrative Assistant contributed about 5-10 hours

- **Revenue**

- None, the event was offered free of charge to remove barriers to participation.
- The event strengthened relationships with key partners.

13 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

**Next Steps / Mitigation Strategies:**

- DCoDPH, Durham Tech, and Southern Regional AHEC have started the planning process for another full day continuing education event on trauma-informed care for October 2024 with lessons learned and feedback from attendees as a guide.

**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.
- Medication drop-off is available during the hours of operation for the HHS building.

- **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.

**Implications**

- **Outcomes**

- Quarterly statistics, FY23-24 Q2
  - ~40 lbs. of medication disposed
- Year-to-date statistics, FY23-24
  - ~70 lbs. of medication disposed
- Previous year statistics, FY22-23
  - ~220 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 regularly monitor the drop box and emptied when necessary.
- Trilogy MedWaste Southeast, LLC is contracted to dispose of the medications.

**Next Steps / Mitigation Strategies:**

14 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

- The drop box is monitored regularly and emptied when necessary.
- Statistics are 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 public.)

**Program description**

- In September 2018, DCoDPH Pharmacy installed a Needle Disposal Box in the lobby of the HHS building. In June 2020, the box was relocated to the pharmacy sub-lobby.

**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 staff needlesticks by providing sharps containers to *all* clients prior to needles being deposited in Needle Disposal Box (implemented August 2021).
  - Needle disposal is available during the hours of operation for the HHS building.
- **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 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. Both drop boxes have clear signage in English and Spanish.

**Implications**

- **Outcomes**
  - Quarterly statistics, FY23-24 Q2
    - ~5355 needles/syringes returned
  - Year-to-date statistics, FY23-24
    - ~6793 needles/syringes returned
  - Previous year statistics, FY22-23
    - ~17694 needles/syringes returned
- **Service delivery**

15 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

- 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 it when necessary.
  - Carolina Biomedical Disposal is contracted to dispose of the used needles and syringes.

**Next Steps / Mitigation Strategies:**

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

**Division / Program: Pharmacy / 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 1.0 mL syringes with fixed needles
    - 10 Alcohol swabs
    - 1 Tourniquet
    - 6 Condoms
    - Sharps Container
    - Additional injection supplies
    - Participant ID card
    - Printed material for harm reduction and ancillary services
    - Fentanyl test strips
    - Xylazine test strips
    - Naloxone kits
  - Xylazine testing strips are offered in addition to the fentanyl testing strips as of September 2023.
- **Challenges**

16 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

- 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 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.
- Hours of distribution were changed effective September 06, 2022, due to conflicting demands of pharmacy operations. Staffing is now devoted to serve the SSP clients during the following specified hours:

*Tuesday/ Thursday: 9AM – 12Noon*

*Wednesday/ Friday: 1PM – 4PM*

**Implications**

- **Outcomes**

- The following statistics have been collected for FY23-24 Q2:
  - New participants: 12
  - Total contacts: 42
  - Syringes dispensed: 209
  - Syringes returned\*: ~5355
  - Sharps containers dispensed: 24
  - Fentanyl Test Strip dispensed: 43
  - Xylazine Test Strips dispensed: 51
  - Naloxone kits distributed to SSP participants: 29
  - Naloxone kits distributed non-SSP participants: 133
  - Naloxone reversals reported: 12

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

- **How this measure is trending?**

- The volume for total program contacts has decreased by 19 % when compared to Q1 FY24 and increased by 37 % when compared to Q2 FY23. The volume for unique program contacts remains the same when compared to Q1 FY24 and increased by 100 % when compared to Q2 FY23. Possible explanations for this measure include the possibility of increased community-wide access to safe syringe resources.

- **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 and Health Education 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 quarterly.
- 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.



17 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

- The DCoDPH team submitted a grant proposal to NASTAD on January 20, 2023, to request funding to expand the program and establish a dedicated Safe Syringe Program Coordinator. Unfortunately, our proposal was declined.

**Division / Program: Nutrition / Nutrition Clinic (Accreditation**

**Activity 10.2 - The local health department shall carry out or assist other agencies to development, implement and evaluate health promotion/disease prevention programs and educational materials targeted to groups identified as at-risk in the CHA)**

**Program description**

- DCoDPH Nutrition Clinic, in collaboration with Lincoln Community Health Center (LCHC), participated in orienting 2 new staff with Lincoln's HealthySteps Program to DCoDPH and specifically to service in the Nutrition Clinic for pediatric patients, ages 0-5 years old.
- LCHC was awarded an Early Childhood Development grant by the Health Resources & Services Administration (HRSA). Goals of the grant include: 1) increase the number of children ages 0-5 who receive recommended developmental screenings, 2) increase the number of children and their families accessing appropriate follow-up services, and 3) build early childhood development expertise into Lincoln's care teams.

**Statement of goals**

- To introduce LCHC's Early Childhood Specialist and Pediatric Case Manager to services provided in DCoDPH's Nutrition Clinic.
- To introduce the Nutrition Clinic's Special Nutrition Grant, which allows pediatric patients, without insurance, to be seen free of charge, and prevents any barriers from nutrition services being provided for pediatric patients.
- To network and collaborate with staff from LCHC.
- To improve continuity of care for patients, ages 0-5, by developing a system to ensure patients continue to come to the Nutrition Clinic for follow-up visits.
- To develop strategies for improving communication between LCHC providers and DCoDPH Registered Dietitians (RDs).

**Issues**

• **Opportunities**

- LCHC is DCoDPH Nutrition Clinic's primary referral source. Clinic staff have a close working relationship with Lincoln's Chief of Pediatrics, meeting with her and some of her staff at LCHC, as well as, inviting her to the DCoDPH to tour the facility and the Nutrition Clinic, and to attend a program clinic staff requested DSS present regarding DSS services and eligibility requirements.
- Added collaboration with HealthySteps Program staff will strengthen DCoDPH's relationship with providers at LCHC and ensure continued mutual benefit to both organizations.
- HealthySteps Program staff will be liaisons between busy PCPs at LCHC, and the Nutrition Clinic's Registered Dietitians. The collaboration will provide a new source to reach out to when RDs have concerns about pediatric clients seen for nutrition counseling.
- The orientation allowed DCoDPH Nutrition Clinic staff to share information about services offered throughout the Health Department. HealthySteps Program staff were introduced to programs that target 0-5-year-olds (CMARC, Triple P, School Health, Dental Clinic, MH Centering Program).

18 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

- **Challenges**

- The Early Childhood Specialist and Pediatric Case Manager are new to LCHC and there will be a learning curve before they are up and running in the positions.
- Lincoln's HealthySteps Program employees are in the process of meeting with several community organizations, and Nutrition Clinic staff will need to reach out to them again to remind them of Nutrition Clinic services.
- Often there is overlap in programs offered by different organizations but by introducing HealthySteps Program employees to services offered at DCoDPH, they will be aware of what is already available in the community and will not need to focus on organizing programs that already exist.

**Implication(s)**

- **Outcomes**

- The Early Childhood Specialist, Pediatric Case Manager and 2 RDs shared their visions for the new collaboration. HealthySteps staff were not aware of several programs offered at DCoDPH and verbalized interest in reaching out to them.

- **Service delivery**

- On December 12, 2023, two Registered Dietitians from the DCoDPH Nutrition Clinic met with the Early Childhood Specialist, and the Pediatric Case Manager from Lincoln's HealthySteps Program to discuss both organizations programs. The meeting was held at DCoDPH, and the RDs were able to give a tour of the Nutrition Clinic and introduce them to staff. RDs also explained DCoDPH's electronic medical record system UNC-EPIC and the referral process.
- The Pediatric RD from DCoDPH discussed procedures already in place with the Pediatric Department at LCHC. She shared information about her patient load, availability, and types of services offered.
- The other RD at the meeting discussed the possible collaboration with other clinics in the health department and particularly focused on DCoDPH's Centering Program as an avenue for reaching parents of 0-5-year-olds.

- **Staffing**

- Two DCoDPH RDs participated in the orientation. One of the RDs sees DCoDPH's Pediatric population exclusively. The other RD sees pediatric patients and works closely with DCoDPH's Centering Program.

**Next Steps / Mitigation Strategies**

- DCoDPH's Nutrition Division will continue to partner with LCHC's HealthySteps Program and staff. RDs from DCoDPH will reach out to these new colleagues and connect them to CMARC, Triple P, School Health, Dental Clinic, and MH Centering Clinic staff at DCoDPH.

**Division/Program: Nutrition Division/DINE/Community Eligibility Provision**

**(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 United States Department of Agriculture (USDA) National School Lunch and Breakfast programs are two of the largest food security programs utilized by Durham County residents. The

19    A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

Community Eligibility Provision (CEP) is a USDA meal service option that allows high-poverty schools to provide school breakfast and lunch at no cost to all students. Durham County now qualifies for district-wide CEP.

- Durham Public Schools (DPS) Board of Education and Durham County Commissioners discussed the possibility of implementing district-wide CEP at a public meeting on November 17. During this meeting, many questions were raised about how district-wide CEP might affect the allocation of DPS's Title I funds. Title I is a federally funded program that provides financial assistance to schools with high percentages of students from low-income families to help ensure that all students meet academic achievement standards.
- Two DINE staff and Durham's Food Security Coordinator met with staff from the Food Research Action Coalition (FRAC), an antihunger advocacy organization that works closely with USDA, to learn more about the benefits and drawbacks of implementing CEP in Durham. Mary Oxendine reported these findings to the Board of County Commissioners.

**Statement of goals**

- To maximize the number of DPS students who have access to free school breakfasts and lunches.
- To provide elected officials with accurate information about Title I and CEP for Durham County.

**Issues**

- **Opportunities**
  - To qualify for CEP, at least 25% of students must be directly certified for free school meals due to participation in other federal programs such as the Supplemental Nutrition Assistance Program. DPS has participated in CEP for numerous years at the school and school group level. Twenty-eight out of 56 DPS schools are participating in CEP for the 2023-2024 school year.
  - DPS currently qualifies for district-wide (all schools) CEP based on their Identified Student Percentage (ISP) of students who are directly certified.
  - Universal free school meals would greatly benefit DPS students and families. Participation in school meals has been linked to positive improvements in academic performance, student physical and mental health, as well as food security/economic security for the whole family.
  - DPS use of CEP at a district-wide level would provide reimbursement for school breakfast and lunch for all students/all schools. Participation in this meal program would result in an estimated annual net gain of \$1,567,479, because currently DPS provides breakfasts for free to all students without receiving the federal reimbursement available from CEP.
- **Challenges**
  - CEP can have implications on Title I funding allocation because families are no longer required to complete free and reduced-price lunch applications. These applications are often used by school districts, including DPS, to rank schools on Title I funding allocation.
  - DPS would need to determine a new poverty metric for Title I allocations if they choose district-wide CEP. Based

20     A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

on the research conducted, there is an allowed formula that would yield similar results to the current free and reduced-price lunch metric for DPS.

**Implication(s)**

- **Outcomes**
  - An email was sent to the County Commissioners explaining the information provided by FRAC regarding district-wide CEP:
    - DPS would continue to have flexibility in their Title 1 allocation decisions regardless of the metric they choose.
    - Four other school districts in North Carolina (Beaufort, Haywood, Rutherford, and Wilkes) have similar free/reduced-price meal percentages and have successfully implemented district-wide CEP.
- **Staffing**
  - Two DINE staff and the County Food Security Coordinator conducted this research. The County Food Security Coordinator wrote the email to County Commissioners.

**Next Steps / Mitigation Strategies**

- DINE staff and the County Food Security Coordinator/Cooperative Extension office are available to answer questions and provide more information about CEP as requested.

**Division / Program: Nutrition Division / DINE FFY23 Outputs and Outcomes**

**(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 public.)**

**Program description**

- DINE is a team of Registered Dietitians and nutrition professionals who champion better food access and enjoyable eating. DINE seeks to enhance the health and well-being of Durham residents.
- DINE primarily serves SNAP-eligible families and provides nutrition education, facilitates policy, systems and environmental (PSE) changes, and implements a social marketing campaign.
- DINE is funded by a grant from USDA’s SNAP-Ed program and by Durham County. The DINE team conducts surveys and screenings to evaluate the outputs and outcomes of the program.

**Statement of goals**

DINE will help/encourage Durham residents to:

- Establish healthy eating patterns, maintain a physically active lifestyle, and drink more water.
- Facilitate policies, systems, and environmental changes that promote healthy eating.

**Issues**

- **Opportunities**
  - DINE received an Ann Wolfe Mini Grant (\$8,000) from the NC Public Health Association in FFY22 and was able to continue to create/improve outdoor learning spaces in early child education settings throughout FFY23.
  - A new partnership between DINE and the DCoDPH Dental Clinic allowed the “Say Yes to Water” social marketing campaign to reach more individuals.

21 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

- **Challenges**

- A vacancy for part of the year on the DINE in Schools team limited the middle school team's capacity to reach students with nutrition education.
- Blue Cross Blue Shield of North Carolina (BCBSNC) has funded Durham Double Bucks since FFY19 and did not renew funding for the 2023 market season. However, DINE secured funding for the 2023 market season from Duke Office of Community Health. Durham County provided additional funds for the three markets within Durham County lines.

**Implication(s)**

- **Outcomes**

- During FFY23, DINE provided nutrition education to 9,937 Durham residents.
  - 78% of participants surveyed demonstrated increased knowledge after DINE classes.
  - 75% of survey respondents showed improved behavior related to nutrition after DINE classes.
- The DINE team facilitated 67 policy, systems and environmental (PSE) changes reaching 23,572 Durham residents. These took place in schools, childcare centers, farmers' markets, Durham County buildings, and via a web-based food access map. Some of the changes include:
  - DINE worked alongside the DPS Outdoor Education Program to provide students with additional opportunities for outdoor education and an overnight camping trip that included hiking and outdoor cooking.
  - DINE created classroom garden kits with materials and lesson plans for teachers to help students grow microgreens in the classroom, while reinforcing academic subjects.
  - DINE helped expand the Double Bucks program from four markets in one county to seven markets in three counties. In addition, DINE assisted with new programming that reached WIC families and seniors in our community and offered additional financial incentives.
  - DINE continues to manage, promote, and update an online, searchable map of food resources including farmers' markets, food pantries, summer meal sites, congregate meal sites and more, with the goal of improving access to healthy foods.
- A "Say Yes to Water" social marketing campaign reached 18,938 Durham residents through workshops and health fairs, a monthly e-newsletter, social media posts, and posters.
- The attached "FFY23 Evaluation Report" provides a full summary of the DINE program's outputs and outcomes from this past year.

- **Service delivery**

- During FFY23, DINE provided services at 22 elementary and middle schools, 16 childcare centers, 7 farmers' markets, and other settings. DINE also reaches Durham residents via Instagram, Facebook, and an e-newsletter.
- DINE conducts program evaluation through pre/post screenings, participant surveys, and parent and teacher surveys.

- **Staffing**

- The DINE program is staffed by nine full-time and three part-time Registered Dietitians, one processing assistant, and two program managers. Four positions are funded by Durham County; five positions are funded by SNAP-Ed.

**Next Steps / Mitigation Strategies**

- DINE will modify its programming based on the FFY23 evaluation.
- DINE has plans to hire an additional full-time grant-funded bilingual Nutrition Specialist to work with Durham's Spanish-speaking community.

**Division / Program: Nutrition Division/DINE Participation in Farm to School Coalition of North Carolina Steering Committee** (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 Farm to School Coalition of North Carolina (F2SCNC) brings together a dedicated group of farm to school (F2S) stakeholders to expand and strengthen farm to school initiatives across the state. Farm to school connects local agriculture, schools, and partners to benefit students, educators, farmers, families, and communities.
- The F2SCNC Steering Committee is comprised of state agencies, non-profit organizations, and school and community partners.
- The Durham County Department of Public Health DINE program has long worked on farm to school initiatives collaboratively with individual schools, school gardens, Durham Public Schools (DPS) School Nutrition Services, DPS Outdoor Learning, the DPS Hub Farm, the Inter-Faith Food Shuttle, Farmer Foodshare, and other partners.
- In June 2023, a DINE team member was invited to apply to participate as a member of the statewide F2SCNC Steering Committee and Working Groups.

**Statement of goals**

The Farm to School Coalition of North Carolina's goals are to:

- o Encourage networking and relationship building among farm to school stakeholders.
- o Support and encourage resource development and capacity building for farm to school in North Carolina.
- o Strengthen data collection and identification of common measures among stakeholders and partners to demonstrate the impact of farm to school in North Carolina.

**Issues**

- **Opportunities**
  - o Serving on the F2SCNC Steering Committee provides an opportunity for DINE to learn about farm to school projects occurring in other areas of the state. It also provides an opportunity to share successes from Durham.
  - o F2SCNC creates opportunities for collaboration on farm to school initiatives across the state.

**Implication(s)**

- **Outcomes**
  - o The DINE Healthy School Environments Nutrition Specialist was selected to serve as a F2SCNC Steering Committee member. She is also participating in the Education and Engagement Working Group.
- **Service delivery**
  - o The F2SCNC Steering Committee meets every other month for 90 minutes.

23 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

- The Education and Engagement Working Group meets periodically as needed.
- **Staffing**
  - One DINE team member, the Healthy School Environments Nutrition Specialist, serves on this committee.

**Next Steps / Mitigation Strategies**

- DINE will continue to actively serve on the F2SCNC Steering Committee and the Education and Engagement Working Group.
- The F2SCNC Steering Committee will hold listening sessions in February 2024 for farm to school partners across the state. The purpose of these sessions is to learn about farm to school initiatives, successes, barriers, and needs. The information will be used to help F2SCNC best meet the needs of these partners.

**Division / Program: Nutrition /DINE Small Farmer Training on Farm to School Programs (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**

- DINE works with Durham Public Schools (DPS), the DPS Hub Farm, and other community organizations on farm to school initiatives to promote local food/agriculture, school gardens, and healthy eating.
- DINE partnered with the DPS Outdoor Learning Specialist, Hub Farm staff and DPS School Nutrition Services (SNS) to create a training session that was offered during the Carolina Farm Stewardship Association's (CFSA) annual Sustainable Agriculture Conference in Durham. CFSA is a non-profit organization that advocates, educates, and builds connections to create sustainable food systems centered on local and organic agriculture in the Carolinas. The annual conference joins community farmers, consumers, and educators to celebrate, share and innovate together for sustainable agriculture.
- DINE's part of the co-delivered session taught participants about the concept of farm to school, provided ideas for forming a farm to school committee in their area, gave examples of DPS farm to school initiatives, and provided a list of relevant resources. The session concluded with DINE demonstrating how to lead a cooking activity that could be part of a farm to school program.

**Statement of goals**

- To reinforce one of DINE's nutrition education and behavior change goals, increasing consumption of fruits and vegetables, through farm to schoolwork with community partners.
- To strengthen DINE's local farm to school collaborations, which strive to connect community members with fresh, nutritious food and local food producers.
- To teach area small farmers and growers about national and state farm to school initiatives and provide ideas and resources to begin or advance their own farm to school programs.

**Issues**

- **Opportunities**
  - As part of the DPS Farm to School partnership, DINE and school and community partners often collaborate to provide

24 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

education and resources to teachers and staff interested in implementing this work in their schools. The Sustainable Agriculture Conference provided an opportunity to teach and equip farmers with tools to utilize similar activities with children and families at their farms.

- Most participants were owners or employees of small, local farms. Participating in farm to school programming is an opportunity for these farms to diversify their revenue opportunities by offering on-farm education and/or selling produce to school districts.
- **Challenges**
  - DINE did not receive detailed information about participants such as personal demographics or context about their farms/organizations. This limited the degree to which the presentation could be tailored to the audience.

**Implication(s)**

- **Outcomes**
  - Thirteen participants attended the workshop. All participants were farmers or farm educators. Most were from North Carolina, and several were from other states in the Southeast, including South Carolina and Louisiana.
- **Service delivery**
  - DINE staff conducted a hands-on cooking demonstration during the presentation to model how to lead a food preparation activity with children. Participants made Cilantro Lime Coleslaw with vegetables grown at the Hub Farm.
  - DINE staff, with DPS Farm to School partners, created a resource sheet for participants with a summary of the presentation and additional relevant information.
- **Staffing**
  - Two DINE staff participated in the planning and presentation of the workshop.
  - Other partners who were involved included DPS staff from Outdoor Learning, the Hub Farm, and School Nutrition Services.

**Next Steps / Mitigation Strategies**

- DINE will consider presenting at this conference in the future as part of the DPS team.

**QUESTIONS/COMMENTS:**

**Mr. Jenkins:** This month we provided you with a very robust health director's report. Our most excellent DINE program annual report and lots of good information and I feel as if I can't really thank them or applaud them enough but that's a well run and very dedicated bunch that does a not of great work inside the community but for the purpose of this report, I just want to lift up two things for the sake of time. One of the things that public health does that don't get a whole lot of attention is "shelters" and as I spoke about our Emergency Preparedness Coordinator, Corey Morris that is one of the things in tow with our Director of Nursing and public health staff overall that's one of our main responsibilities. In the month of January on relatively short notice we were required to setup one shelter due to the extreme weather and I just wanted the board to really be able to read up an really understand that at times it's a herculean event if you will but they did a masterful job of really being able to set it up rather quickly and although we didn't get a lot of people I think it was roughly about 4-6 people but nevertheless we made comfort available to them when their power was out. Then of course, our Population Health Division project manager, Antrel Branch Thomas, really did a good job with our PH WINS survey (Public Health Workforce Interests and Needs Survey). The survey was done back in 2022 and it endeavors to take a deep dive into the



workforce by surveying the workforce. We had about a 40% penetration rate as far as the survey participants but the most important thing that came out of it is the data in as much as us being able to really ascertain how our staff feel about the work they do, burn-out and things that we can do to keep them. So, I'm proud to say that public health has engaged in a lot of the activities that were recommended but it is equally enlightening to know that over 80% of our staff still feel as if they are in the right place, their doing the right work and they want to continue to do this public health work. So, again I just wanted to lift those two things up in the health director report. Lots of good reading this month but I'm happy to answer any questions.

**Chair McDougal:** I have one question, it's really...I don't see Corey Morris on the call so in the discussion about the emergency shelter you mentioned that one of the challenges that was cited the responder stating there were some improvements that could have been made in communications. Can you give any specific examples of the communication shortfalls?

**Mr. Jenkins:** I'll make a statement and then I will certainly call on our Director of Nursing, KiKi Rayner because she was certainly "boots on the ground" but again with communication it's more or less like us really getting the call or knowing in advance what is needed. We tend to do things in advance and try to be as responsive as we can and then there were also communication issues from department to department (general services to public health, public health to social services, social services to emergency management) so again you know whenever you have an emergency event it's never going to be perfect and if there's not necessarily a command structure in place where we call a "EOC" there's an opportunity for lapse in communication but I will defer to KiKi to see if she has any further comments.

**Ms. Rayner:** I don't you said it all in a nutshell. We're just striving to be better and keep improving.

**Chair McDougal:** Thank you both and not really a question at all just a comment just to pile on with the kudos to the great work that the entire department is doing but particularly I was impressed with the work that is being done by F2SCNC Steering Committee and of course DINE is a powerhouse. They're always doing great work. Kudos to everyone but particularly to those two divisions.

**Dr. Rhea:** A quick follow-up Director Jenkins on the comment about the communication and this is just for my own understanding. This was due to the electrical outage, correct? Was essential that there wasn't a command center setup because of just the uniqueness of this incident, and you weren't sure how long it was going to last and what was needed as opposed to break full event like a winter storm or something like that were a command center would typically be set up?

**Mr. Jenkins:** That is exactly the cause Dr. Rhea. There was a lot of uncertainty as to whether or not we needed to setup a shelter and I think sort of at a last-minute decision that was made the team responded in kind and just made it happen so again, very proud of the team but communications could have been a lot better.

**Dr. Rhea:** Completely understood. That was an extremely unique and unfortunate situation.

#### **COMMITTEE REPORTS:**

There were no committee reports discussed.

#### **OLD BUSINESS:**

**Mr. Jenkins:** I want to report back on something Commissioner Allam requested which was information about behavioral health. Lots of money possibly coming to Durham as a result of the vice-presidential visit last month which she was in attendance. I did find out that it's \$12million dollars that is coming to the State of North Carolina. I also found out that they have not necessarily decided the funding allocations for the

26     A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

designated counties. It's still pending. The \$12 million will provide a lot of support to those who are most vulnerable.

**NEW BUSINESS:**

•     **BUDGET AMENDMENTS:**

The Board is requested to recognize funds in the amount of \$150,000 from the Department of Health and Human Services Division of Public Health Women, Infant, and Community Wellness Section for additional funding for Supporting Women's Health Services in the Durham County Department of Public Health.

This funding has been established for local communities to increase contraceptive access and/or to improve maternal and infant health for underserved, uninsured, or medically indigent patients. Under the Supporting Women's Health Services program, local health departments/districts will implement evidence-based strategies (EBSs) that have been proven to be an effective means to improve birth and maternal outcomes through addressing pregnancy intendedness, and/or infant or maternal mortality.

The Board is requested to recognize funds in the amount of \$1,000 from Nadine Barrett.

Durham County Department of Public Health (DCoDPH) was awarded funds from Dr. Nadine Barrett to support activities of the Men's Health Council. The Men's Health Council was established in 2014 and works with volunteers to promote health and conduct outreach for the volunteers to mentor others. There are no restrictions related to this donation.

The Board is requested to recognize funds in the amount of \$30,000 from Guilford County.

These funds are intended to be used to offer training and professional development to staff members of the Local Health Department. Guilford County's Division of Public Health is the lead for Region 5 ARPA Public Health Workforce Development Grant (AA621). Funds may be used to recruit, hire, and train personnel to fill critical gaps in Public Health Infrastructure Foundational Capabilities to respond to the COVID-19 pandemic; promote a diverse workforce who are representative of, and have language competence for, the communities served; and/or train the public health workforce.

Dr. Orto made a motion to approve the (3) budget amendments mentioned above. Dr. Rhea seconded the motion, and the motion was unanimously approved by the board members as identified in the attendance roster above.

•     **BUDGET RATIFICATION:**

Dr. Rhea made a motion to accept FY24 Sliding Fee Schedule as the fee schedule for all clinical services with the exception of dental services effective February 1, 2024. The dental services will use the same scale but will have \$25 dollars as a minimum fee. Dr. Jackson seconded the motion, and the motion was unanimously approved by the board members as identified in the attendance roster above.

*(A copy of FY24 Sliding Fee Scale is attached to the minutes.)*

•     **AGENDA ITEMS FOR NEXT MEETING:**

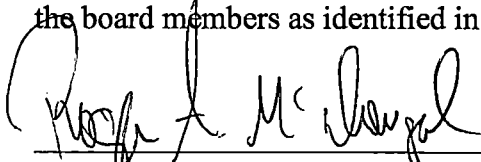
- Update: DCoDPH Vision Care Services

**INFORMAL DISCUSSION/ANNOUNCEMENTS:**

There were no informal discussion/announcements discussed.

27 A Regular Meeting of the Durham County Board of Health,  
held February 8, 2024.

Dr. Rhea made a motion to adjourn the regular meeting at 5:40pm. Dr. Orto seconded the motion, and the motion was unanimously approved by the board members as identified in the attendance roster above.



Roger McDougal, DDS, Chair



Rodney E. Jenkins, Public Health Director