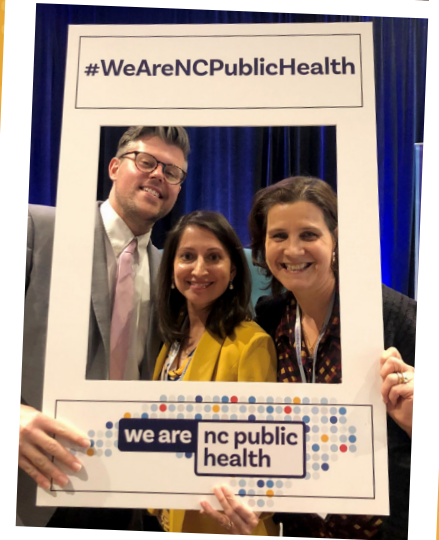




We Are NC Public Health: Leading with Resilience

2023 PUBLIC HEALTH
LEADERS' CONFERENCE

SUMMARY REPORT



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**
Division of Public Health



Opening Remarks by Dr. Susan Kansagra & Lillian Koontz

Dr. Kansagra and Ms. Koontz welcomed the participants to the largest North Carolina Public Health Leaders Conference ever.

Where: Marriott Crabtree, Raleigh, NC

When: March 16-17, 2023



OUR LARGEST
CONFERENCE
EVER

Special Presentations

U.S. Surgeon General Vice Admiral Vivek H. Murthy and NC Governor Roy Cooper delivered video remarks.



“ Thanks for the critical work you do every day to ensure that North Carolinians from Murphy to Manteo are safe and healthy. From testing drinking water, to supporting maternal healthcare and prevention efforts, you are doing critical work to help keep our families safe and our communities healthy.”

— GOVERNOR ROY COOPER



“ I am so glad that the North Carolina Department of Health and Human Services is using this conference to discuss how we build a public health workforce for the future - one that is resilient, inclusive, and supported....Together we can envision a future where ... the health, safety and well-being of you and your colleagues is as much a priority as the well-being of those in your care. We must always have the backs of our fellow health workers, just as you have always had the backs of community members through this pandemic and long before.”

— VICE ADMIRAL VIVEK H. MURTHY, MD, MBA;
U.S. SURGEON GENERAL



Unveiling of the “We are NC Public Health” Campaign

Dr. Susan Kansagra provided a preview of the #WeAreNCPublicHealth Campaign with a brief video featuring highlights of what governmental public health professionals statewide do every day to serve the people of North Carolina.

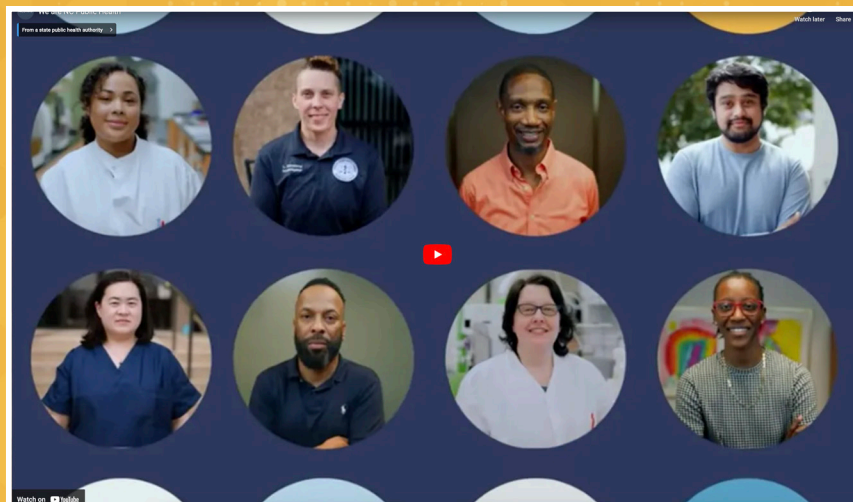
We are NC Public Health is a statewide campaign that aims to:

- Increase awareness of careers in governmental public health, including current openings
- Highlight the essential role public health plays every day in the lives of North Carolinians

Campaign materials are available here: <https://ncdhhs.gov/WeAreNCPublicHealth>



Video: www.youtube.com/embed/hqVGKboQo_8?feature=oembed



Plenary Events

The Future of Public Health in North Carolina and Beyond

SUSAN KANSAGRA, MD, MBA; ROD JENKINS, MHA; DANNY STALEY, MS; JENNIFER GREEN, PHD, MPH; DEBRA FARRINGTON, MSW, LCSW

The panel discussed key contributors to the future of public health in NC, including:

- Developing trust through relationship-building, being present, finding common ground, being honest, transparent, and reliable.
- Eliminating misunderstandings by educating people about the importance, purpose, and scope of public health and by leveraging media strategies to reach out to various communities.
- Building infrastructure for promoting equity in public health, utilizing policy to eliminate barriers to outreach and care.
- Understanding the population we serve and recognizing that “equity” encompasses all aspects of life, including community engagement and inclusivity among decision-makers.
- Building a diverse public health workforce reflective of North Carolina’s population and providing public health professionals with the support needed to thrive.

Local & State Energy and Synergy in Building the Future of Public Health

FACILITATOR: STACIE TURPIN SAUNDERS, MPH; PANELISTS: CLARLYNDA WILLIAMS-DEVANE, PHD; ROSE BYRNES, MSW, MSPH; LISA MACON HARRISON, MPH; & LILLIAN KOONTZ, MPA

The panel discussed several local and state initiatives currently underway focusing on the Future of Public Health. The panel discussed how the initiatives began, funding associated with the work, success and challenges of building the future, and where the different efforts are aligned. Specifically:

- NCALHD use of philanthropic funds to support focused priorities in Workforce, Communication, Reporting/Data and Funding.
- DPH use of ARPA Workforce funding to support Data modernization, Health Equity, and workforce priorities and the transition to Public Health Infrastructure to continue the modernization and support of Foundational Capabilities.
- UNC Institute of Public Health discussed the [Foundational Gap Analysis](#) findings and all parties discussed how this data can and should inform local and state investment areas.
- Panelist discussions also included use and importance of data — both tell the story of public health and drive decision-making toward health improvement, investment in workforce in key to future success, innovation occurring in the regional resource model, etc.
- To face the many challenges data presents, NCDHHS has organized a [Data Summit](#) on May 15-16, 2023, including the brightest technological minds in North Carolina Public Health to develop cutting-edge, long-lasting solutions that will enhance public health for all residents of the state.

NC State Health Improvement Plan – Partnering for Results

Co-leads from the [North Carolina State Health Improvement Plan \(NC SHIP\) Community Council](#) spoke about the importance of community partnership, successes, and challenges. Panelists emphasized keys of sustainable relationships, including:

- Recognizing the importance of community representation
- Acknowledging community members as the true experts of their respective communities
- Providing protected space for empowered community members to share and being ready to listen



From left to right: Tish Singletary, MA; Wanda Boone, PhD, RN; Stephen Sills, PhD; ClarLynda Williams-DeVane, PhD

Remarks by Secretary Kody Kinsley, MPP

Secretary Kody Kinsley thanked the workforce for their significant efforts and expressed pride for the impact of public health state-wide. He also acknowledged the underfunding of public health in North Carolina, and the opportunity Medicaid expansion offers to yield significant gains for population health.

Larry Michael and Dr. Vicki Mobley were honored with the Ron Levine Award



From left to right: Dr. Vicki Mobley, Dr. Ron Levine, Larry Michael, Dr. Susan Kansagra

Every year, outstanding public health leaders are honored with the Ronald H. Levine award, named for Dr. Ron Levine, a public health leader who served as North Carolina's State Director for 18 years and who made an everlasting impact on public health. This year's awardees are Larry Michael and Dr. Vicki Mobley. Larry Michael has been with the state for over 27 years and is a champion and leader in Environmental Health. Dr. Vicki Mobley is recognized as a state and national communicable disease expert and continues to promote equitable care for all. Larry and Vicki provide the Division of Public Health with strong leadership and amazing work that continues to support the health of North Carolinians everywhere.

Closing Remarks

BETSEY TILSON, MD, MPH, STATE HEALTH DIRECTOR AND DHHS CHIEF MEDICAL OFFICER

Dr. Tilson closed the conference by summarizing the many challenges and successes North Carolina public health has faced during the pandemic, reiterating that the term "resilient" characterizes both North Carolina's public health response and its workforce. As we emerge from the pandemic and shift our priorities in the coming months, she encouraged public health leaders to reflect on how well we have survived the last 3 years. Moving forward, there is excitement that North Carolinians are once again ready to thrive, with new and inspiring public health initiatives in the pipeline.

Breakout Sessions

Breakout sessions occurred concurrently. Links to presentations are included [here](#)

Using Your Voice: Communication Strategies for Public Health Leaders

TRACY ZIMMERMAN

During the pandemic, at a time when people are losing faith in public institutions, trust in NCDHHS increased among North Carolinians (35%) overall, with greater increases among Black (47%) and Hispanic/Latinx (39%) people.

- Key tactics for building trusting relationships include:
 - Flooding the community with simple, accurate information.
 - Engaging trusted messengers, including staff utilizing personal and professional networks to enhance information sharing.
 - Meeting people where they are, understanding how people make decisions about COVID-19 vaccinations.
 - Creating culturally and linguistically appropriate campaigns.
- Trust should be earned before it is needed, building authentic relationships within communities now, learning from them, and showing that their voices are heard with meaningful actions.

Growing the Career Pipeline for Public Health in NC

PATRICK BROWN, PHARMD; RHONDA STEPHENS, DDS; BRYLE HENDERSON HATCH, PHD

Panelists offered insights and answered questions about ways to support pipeline development to recruit North Carolina's future public health workforce:

- Strengthen internal and external partnerships, including leveraging NCDHHS's relationships with Historically Black Colleges and Universities (HBCUs) and Minority Serving Institutions (MSIs).
- Create new programs and internships that aim to introduce public health to younger populations, such as middle- and high school-aged students, to bolster interest in and later professional commitment to public health careers.
- Offer financial incentives in the form of higher compensation for current public health professionals and/or publicizing loan repayment options for those working in health professional shortage areas to discourage people from leaving the public health workforce.
- Promote interdisciplinary connections and partnerships that underscore public health linkages between medical providers, pharmacists, social workers, public health dentists, and others.

Innovative Approaches for Enhancing Surveillance and Guiding Programmatic Direction

ERICA WILSON, MD, MPH; ARIEL CHRISTENSEN, MPH; CHRIS KIPPES, MS

- North Carolina Wastewater Monitoring Network was developed and deployed by NCDHHS as a surveillance tool for determining prevalence and identifying variants of Covid-19 infections.
- Wastewater surveillance offers an early-warning tool that captures information for many types of infections, including asymptomatic Covid-19, and provides community-level data quickly and efficiently, often showing trends 4-6 days before those same trends are seen clinically.
- A single wastewater sample captures the infection status of populations with thousands to millions of individuals, including those without access to or utilization of medical care, allowing state and local entities to create targeted public health initiatives and messaging.
- Future implications for wastewater surveillance include monitoring for other diseases, pinpointing infections to specific neighborhoods and/or to those characterized by social vulnerability; tracking circulating and emerging variants in the population.

Building resilience in a Local Health Department

ELLIS MATHESON, DNP, RN; JESSICA SILVER, REHS

Buncombe County Public Health officials shared the steps they took to create a “Public Health Workforce Collective Care Culture” including:

- Providing space for employees to share their thoughts and experiences through anonymous debriefing events called “Facts and Feels.”
- Incorporating a social work-focused Organizational Care Model to engage all staff at every level of the department.
- Using feedback to guide revisions to their Hazards, Preparedness, and Strategic Plans.

Leading a Resilient Workforce

MORGAN WHITE, CHES, MS; RUBY BROWN-HERRING, MED

Leaders are gatekeepers and play an essential role in ensuring their employees are healthy, productive and thriving.

- With our ongoing need for extreme resilience, how can we be more conscious of our team and own well-being?
- Role modeling; balancing the workload; practicing complete transparency and empathy; and recognizing when to seek help are some of the tools and best practices to help lead a more resilient team.

Suicide Prevention Programs, Tools, and Training in North Carolina

ANNE GEISSINGER, MPH; JANE MILLER, MPH; ABIGAIL COFFEY, MPH, CHES

Anyone can be at risk for suicide at any time, a fact particularly true among youth. Public health leaders can help reduce suicide rates by:

- Educating ourselves and busting the myths about suicide
- Spreading awareness about the suicide hotline (988)
- Promoting suicide prevention and intervention skills trainings open to all, such as Gatekeeper training
- Expanding access to suicide prevention resources in areas affected by mental health provider shortages through programs like Faith Leaders for Life

Firearm Injuries and Deaths: From Data to Action

SCOTT PROESCHOLDBELL, MPH; ANNA WALLER; BETSEY TILSON, MD, MPH;
KELLA HATCHER, JD; BILLY LASSITER; SUE ANN PILGREEN; BREANNA CULLER

- In 2020, five North Carolinians per day meet a firearm-related death. While men account for 86% of firearm deaths and non-fatal injuries, children and families are also among the most impacted; firearms are the leading cause of child injury and death.
- NCDHHS has adopted a public health approach that utilizes surveillance systems to monitor gun violence and identify protective and risk factors for firearm violence; tests prevention strategies that reduce access to lethal means and increase protection for individuals at highest risk; and plans for widescale rollout of initiatives such as the NC Action Plan for School Safety, the NC Suicide Prevention Action Plan, the NC Safe Storage Campaign, Educating Kids about Gun Violence (EKG), and developing county gun safety teams.
- The recently-created Office for Violence Prevention, established by an Executive Order from Governor Cooper, aims to enhance collaboration and coordination across state agencies; improve data collection and sharing; and manage grant programs to pursue and direct federal funding to communities focused on violence prevention.

Clean Classrooms for Carolina Kids – An Expansion of the Clean Water for Carolina Kids Program

ED NORMAN, MPH; JENNIFER HOPONIK REDMON, MSES, MPA

Recently allocated federal funds are expanding the work of the North Carolina DHHS Childhood Lead Poisoning Prevention and Asbestos and Lead-Based Paint programs.

- Modeled after the Clean Water for Carolina Kids program, the expansion of Clean Classrooms for Carolina Kids will identify lead and asbestos hazards, providing abatement funding for childcare facilities and public schools across NC.
- In addition to testing for lead in drinking and cooking water in all public schools across NC, the program will expand “into the classroom,” assessing lead-based paint and asbestos hazards at childcare facilities and schools.
- There will be optional reimbursement funding for facilities that choose to abate lead-based paint or asbestos hazards and mitigation funding to assist water quality improvements at the tap.

A New Trifecta: Equity, Environmental Justice, & Community Health Assessments

VIRGINIA GUIDRY, PHD, MPH; JOE BOWMAN, BSN, RN; ARLINDA ELLISON, DHSC, MS, HHC

- Environmental justice means “equal access to a healthful environment for all.”
- NCDHHS’ efforts to address environmental justice concerns include initiatives to listen to and lift up community perspectives about environmental justice impacts; to document the individual and cumulative impacts of environmental racism; to implement policies to change institutional patterns (NC Clean Transportation Plan and Governor Cooper’s Executive Orders 246 on climate and equity and 271 on growing NC’s zero-emission vehicle market); and to lift up examples of Alamance County and others who have highlighted environmental justice in their community health assessments.
- NCDHHS also encourages inclusion of environmental justice in community health assessments, and has established a program to provide coordination, guidance, and assistance for all NC county health departments to partner and collaborate with Community Based Organizations (CBOs) to assess environmental justice impacts in their counties, and to include these findings as a chapter in their tri/quadrennial community health assessments.

Making Room for Inclusion & Belonging

MILAGROS RUSSELL, BA, MA; KIVA ELLIOTT

Facilitators from RIOTT for Change, a Diversity, Equity, and Inclusion (DEI) consulting firm, discussed the concept and growing importance of a sense of “belonging” among the current workforce, including:

- Belonging’s influence on workforce recruitment and retention
- The four pillars of belonging – Environment, Leadership, Connection, and Accountability
- Creating a “culture of belonging” requires leaders to focus on trust, safety, and meaningful relationships with their employees, while remaining authentic and transparent

Physician Leadership in Public Health

VELMA TAORMINA, MD, MSE; STEPHEN KEENER, MD, MPH; SHAUNA GUTHRIE, MD, MPH

Local Health Department Medical Consultant/Director's role varies widely from county to county:

- DHHS has incorporated a standardized orientation into their established trainings for Health Directors and Public Health Nurses and Supervisors to help them add value to their work through effective leadership.
- Additional resources include the Kanof Institute for Physician Leadership's Leadership College, and Gillings School of Global Public Health's Public Health Leadership Program that prepare public health practitioners for leadership positions by developing population-level knowledge and skills with an interdisciplinary emphasis.

Working with State and Local Government to Leverage Opioid Settlement Funding for Overdose Prevention

ASHLEY WURTH, MA, LCASA, LCMHCA; STEVE MANGE, JD; NIDHI SACHDEVA, MPH; TYLER YATES

Across the US, most states have opted into a \$26B "global" settlement agreement with drug distributors.

- The funding presents a unique opportunity for local health departments, harm reduction organizations, and state and local governments to collaborate in addressing the overdose crisis.
- Over the next 18 years the state of North Carolina will receive \$750M, 85% of which will be allocated to counties and municipalities across the state.
- The North Carolina Attorney General's Office, NCDHHS, and the North Carolina Association of County Commissioners are working with county and municipal governments to ensure that these dollars positively impact the lives of those affected by substance use disorder.

Promoting Health: How to Promote Community Engagement

VICKI MOBLEY, MD, MPH; ERIKA SAMOFF, PHD, MPH

- Despite a steady rise in early and congenital syphilis cases over the last five years, 68% of women with symptomatic cases are receiving delayed treatment.
- Given that 45% of men and 3% of women with syphilis also have HIV, HIV PrEP should be offered to all with syphilis.
- Health departments can engage with and guide medical providers through health alerts and location-specific epidemiologic facts and trends. In turn, medical providers can engage patients by ensuring all staff are striving for cultural understanding and outwardly promote inclusivity of, and information for, LGBTQ+ patients
- Social Marketing is a tool for community engagement that has been successful for several NC public health initiatives, including the Western NC AIDS Project, Western NC Community Health Services, Positive Wellness Alliance, and Triad Health Project.

Reproductive Health: Legislation and Access to Contraception

JILL MOORE, JD, MPH; ROCIO ANDERSON; RACHEL URRUTIA, MD

- In North Carolina disparities in unintended pregnancies persist, causing adverse health effects for pregnant people and their children, with higher rates among Black, Latino individuals and those with lower income and lower education levels.
- There are several strategies available to improve access to contraceptive care:
 - Developing systems for the same-visit provision of contraception
 - Stocking a broad range of contraceptive methods (at least one of each type of FDA-approved, provider-dependent method)
 - Providing and supporting appropriate training for all staff
 - Reducing the cost burdens for users through Title X, 340B pricing, Postpartum Medicaid Extension, and Medicaid Expansion
 - Building a system to assess pregnancy intentions at every encounter
 - Using patient-centered and reproductive justice frameworks, like [Upstream](#), that work against implicit bias
- The “Increasing Access to Contraception” [toolkit](#) enables family planning clinics and LHDs to estimate location-specific accessibility to contraception and offers other resources.

Maternal Morbidity & Mortality: Coverage for Perinatal Care

BELINDA PETTIFORD, MPH; EMMA SANDOE, PHD, MPH; TARA OWENS SHULER, MED, LCCE, CD; EBONY TATE, MSN, CNM; NALA FAIRLEY, BIRTH DOULA

North Carolina has a longstanding history of reviewing pregnancy-associated deaths and is among 31 states funded by the CDC’s Enhancing Reviews and Surveillance to Eliminate Maternal Mortality (ERASE MM) Program.

- In North Carolina, about 70% of pregnancy-related deaths have been deemed preventable, with Black women 1.8 times more likely to die from pregnancy-related causes compared to White women.
- North Carolina Medicaid’s 2023 \$27M Maternal Morbidity & Mortality Reduction Bundle offers increased maternity provider reimbursement for bundled payments to increase parity with Medicare rates from 59% to 100%.
- The bundle will address maternal care deserts, providing incentives for providers to participate in Medicaid-approved care as well as implementing coverage of doula services and group prenatal care.



**THANK
YOU!**

Thank you to the conference committee members and summary report authors, including: Carla Moore, Erin Fry Sosne, Sharon Rhyne, David Brown, Iulia Vann, Leah Mayo, Sharon Nelson, Tish Singletary, Sheresa Walker-Brown, Jessica Johnson, Candice DuVernois, Suzanne Metcalf, Robert Rowe, Naomi Vining, Niketa Williams, Alverina Hall-Clay, Brandon Rector, Cassandra Bell, Milton Torres, Greg Edwards, Kim Dittman, Karen Davis, Nighat Khan, Emma Doran, and Emily Jonczyk

Join the #WeAreNCPublicHealth campaign!

Here are five ways to get involved today:



TELL US YOUR PUBLIC HEALTH STORIES!

We want to highlight the work you do every day in your communities.



ENCOURAGE your local community college, alma mater, university, and/or high school to host a public health career panel. Click [here](#) for a template letter and draft event outline.



SHARE job postings with your [LinkedIn community](#). Follow #WeAreNCPublicHealth. Post and re-share relevant content.



OFFER to speak on a career panel/career day/job fair with a local community college, high school, etc. Here is a [sample email](#).



FORWARD this slide to five colleagues and ask how they plan to get involved in the campaign. Follow-up to see how it's going!

We are
educators, protectors,
investigators, advocates, scientists.

