

Rowan County Health Department

Strategic Plan 2007-2008



Introduction

Demonstrating the Rowan County Health Department's commitment to a healthy community, the 2007-2008 Rowan County Strategic Plan describes our local public health priorities and our agency's planned approach for mitigating these problems over the next two years.

While the Health Department is appropriately taking the lead in responding to priority community health issues presented in this strategic plan, our success in its resolution will depend on close partnering with the greater community. Everyone has a role in the public's health: all citizens, elected officials, governmental agencies, private business, and the faith community. We all have a shared responsibility in assuring Rowan County is a healthy place to live, work and play.

Mission

Preparing this strategic plan and putting it into practice supports the Health Department in fulfilling its mission **"To improve the health of Rowan County citizens by identifying public health needs, providing community programs and client services, promoting a safe and clean environment and developing public health policies."** The range of priority issues and their respective goals, strategies and objectives presented in this plan reflect not only an assessment of community health, but also a careful review and analysis of factors influencing the Health Department's capacity to improve the health of people living in Rowan. The plan, a roadmap with mile markers, provides direction and specific goals for delivering health-related services and programs, creating environments conducive to good health and the developing policies that encourages and supports healthy living.

The Planning Process

The Rowan County Health Department's Management Team, representing all agency divisions, prepared this strategic plan. First, team members identified community health problems for inclusion in the plan. Their assessment included:

1. Review of national and state public health goals
2. Participation in community-wide health and human services needs assessments and priority-setting exercises
3. Assessment and analysis of primary and secondary health data for Rowan County and North Carolina
4. Discussions with public health colleagues within and outside the Health Department, conversations with clients

Second, the team met in small groups to discuss community health problems and identify which issues were public health priorities and should be included in the strategic plan. Each group was asked to present a specific priority problem to include in the plan and a written justification supporting their position. A combination of factors informed the selection of these problems to include:

1. the magnitude and severity of the problem
2. the present and future availability of resources to confront priorities
3. concern about the issue among clients, citizens and community leaders including elected officials
4. the presence of effective public health practices and interventions to resolve the priority area
5. laws, regulations or ordinances requiring action to address the problem

6. the general consensus of respected public health institutions (government, nonprofit and academia) that the matter required concerted attention.

For each public health priority, the groups also moved forward in formulating goals, strategies and measurable and time-bound objectives that provided direction for confronting the particular health challenge and specified milestones to track progress toward resolving the problem.

Third, the public health priorities chosen by the groups were shared with the Management Team. Members reviewed and discussed each issue to include the reasons why the area was considered a priority and the associated goal, strategies and objectives. By consensus, all priority issues were adopted for inclusion in the strategic plan. During the strategic planning process several reports and documents were used, *References* (Appendix A).

Priority Public Health Issues

The Rowan County Health Department Strategic Plan focuses attention and resources toward several priority public health issues:

- Reducing vaccine preventable disease among children (Appendix B)
- Many animals are not spayed or neutered after adoption from the Rowan County Animal Shelter (Appendix C)
- Protecting private water supplies (Appendix D)
- Pandemic influenza preparedness (Appendix E)
- Infant mortality disparity between African American and White babies (Appendix F)

Strategic Plan Elements

The strategic plan presents the following elements for each priority public health issue

- Why is this a priority issue?
- Goal
- Strategies
- Objectives

Summary

The 2007-2008 Rowan County Health Department Strategic Plan describes the key public health issues that the agency will address between January 2007 and June 2008. In reviewing the plan, it is readily apparent that the Health Department confronts a broad range of problems that taken together impact the health and well-being of everyone working or residing in Rowan County. To effectively intervene across these multi-faceted and complex issues, the Health Department will need to engage our community. By sharing our strategic plan with governing bodies, businesses, nonprofits and Rowan County citizens, residents and others, it is our desire that it creates common ground that joins us together in solving these significant issues that affect the public's health.

- 2004 Healthy Rowan! Quality of Life Report Card. Healthy Rowan! Task Force.
- 2006 Healthy Rowan! Quality of Life Report Card. Healthy Rowan! Task Force.
- Healthy Rowan! Health Priorities Activity: Summary Report. February 2006. Healthy Rowan! Task Force.
- Healthy People 2010. Office of Disease Prevention and Health Promotion. U.S. Department of Health and Human Services.
- NC 2010 Health Objectives. Office of Healthy Carolinians. NC Department of Health and Human Services.
- Racial and Ethnic Health Disparities in North Carolina: Report Card 2006. Office of Minority Health and Health Disparities and State Center for Health Statistics. NC Department of Health and Human Services.
- Rowan County 2006 Health and Human Services Needs Assessment. Rowan County United Way.

Priority Issue: Reducing vaccine preventable disease among children

Appendix B

Vaccine preventable diseases are diseases that can be prevented through multiple immunizations available to the medical community.

Why is this a Priority Issue?

- According to the Centers for Disease Control and Prevention (CDC), vaccine-preventable disease levels are at or near record lows. Even though most infants and toddlers have received all recommended vaccines by age 2, many under-immunized children remain, leaving the potential for outbreaks of disease. Twenty-seven percent of the nation's two year-olds have no documentation of being up-to-date on immunizations in 2003.
- Because 23 percent of U.S. children change healthcare providers by age two and/or they receive immunizations from more than one provider, incomplete records are scattered among different providers resulting in both redundant and insufficient vaccination documentation. Many children are being over immunized because of insufficient records.
- The first North Carolina Immunization Program 2010 objective is to increase the age-appropriate immunization levels of two year-old children to 90% or more.
- The second North Carolina Immunization Program 2010 objective is to ensure that 95% of North Carolina children (0-18 years old) are represented in the North Carolina Immunization Registry (NCIR is an immunization information system that has been implemented statewide to track immunizations).
- The 2006 Immunization assessment rate for children 2 years and younger in Rowan County is only 69%. The immunization assessment rate is the number of children 2

years old and younger who have received the appropriate required immunizations (Diphtheria, Tetanus & Pertussis; Polio; Haemophilus Influenzae B; Measles, Mumps and Rubella; and Hepatitis B)

- Only 2 of 13 healthcare providers in Rowan County that provide childhood immunizations are NCIR participants

Goal:

Reduce vaccine preventable disease among children living in Rowan County by improving healthcare provider participation with the NC Immunization Registry and assuring that all 2-year-old children have received age appropriate immunizations.

Strategies:

- Increase the number of providers who are utilizing the North Carolina Immunization Registry (NCIR).
- Encourage the State Immunization Branch to mandate that private providers receiving state vaccine to utilize NCIR in instead of the Vaccine Information Logs (VALS).
- By educating healthcare providers and the community about the importance of childhood immunizations, increase the proportion of children receiving immunizations.

Objectives:

- By January 15, 2007, meet with the State Immunization Consultant to develop a strategy for contacting private providers and arranging for their voluntary initiation of NCIR in their offices.
- By March 15, 2007, contact 4 private providers to discuss the Immunization Registry and provide them with NCIR information from the State Immunization Branch.
- By April 15, 2007, place information about the importance of child immunizations on the Health Department website.
- By May 15, 2007, provide educational materials to private providers in Rowan County about the importance of childhood immunizations and provide a variety of websites/resources to obtain ongoing immunizations updates.
- By June 30, 2007, contact North Carolina State Immunization Branch Head to encourage the Immunization Branch's support for mandating NCIR participation among private providers who receive free state vaccine for children.
- By August 30, 2007, increase the number of private providers practicing in Rowan County that participate in NCIR from 2 to 4 providers.
- By October 30, 2007, submit a public service announcement to the Salisbury Post educating parents about the importance of childhood immunizations and informing the community about NCIR, the percent of local children who are current for their immunizations at 2 years age, and the percent of healthcare providers participating in NCIR.
- By November 30, 2007, increase Rowan County immunization rate for children from 69% to 75%.

- By December 30, 2007, increase the number of private providers practicing in Rowan County that participate in NCIR from 4 to 6 providers.
- By June 30, 2008, increase the number of private providers practicing in Rowan County that participate in NCIR from 6 to 8 providers.

Priority Issue: Many animals are not spayed or neutered after adoption from the Rowan County Animal Shelter

Appendix C

Why is this a Priority Issue?

- Research conducted by the Rowan County Humane Society shows that only 28% of vouchers issued from January through November 2005 were used at local veterinarian's offices (858 pets were adopted and 240 vouchers were used).
- When an animal is adopted, the adopter signs an agreement that they will get the animal spayed/neutered within 30 days. At the present time, there is not a mechanism in place that allows Animal Control staff to see if the procedure has been done.
- During the past three years, Animal Control has averaged 4,025 requests for service per year pertaining to stray animals running loose. Adopted animals that are not spayed or neutered contribute to the stray animal problem in Rowan County.

Goal:

Ensure that all animals adopted from the Rowan County Animal Shelter are spayed or neutered.

Strategies:

- Research will be done to find out why many adopters do not use the vouchers and have their animals sterilized.
- Explore the possibility of using county issued vouchers at clinics outside of Rowan County.
- Investigate our current computer software program to see if it has the ability to alert staff when an adopter's date for spaying/neutering their pet is due in order to verify their animal has been spayed or neutered.
- Provide knowledge and information about the importance of spaying and neutering our pets to county citizens.

Objectives:

- By January 1, 2007, have in place a revised list of veterinarian's offices and clinics where county issued vouchers can be used.
- By January 1, 2007, using our existing Shelter Management computer software program, have in place a system where staff is reminded of the due date of adopters to have the animals spayed or neutered.
- By January 1, 2007, have a policy in place to contact guidance counselors at all area high schools and colleges to solicit volunteers to assist Animal Control staff in verifying adopters have had their animals spayed or neutered.

- Between January 1, 2007 and June 30, 2008, conduct a marketing campaign to provide the citizens of Rowan County with information on the importance of spaying and neutering their pets.
- Every 6 months, review data of pets adopted verses pets spayed/neutered to determine the effectiveness of the plan. Conduct review in June and December 2007 and June 2008.
- By June 30, 2008, increase the percent of adopted animals spayed or neutered from 28% to 32%.

Priority Issue: Protecting private water supplies

Appendix D

On July 19, 2006, House Bill 2873 titled “An act to require permitting and inspections of new private drinking water wells and to require water quality testing of private drinking water wells” was ratified. The requirements of this bill become effective July 1, 2008.

A private water supply well is defined as a well that serves less than fifteen (15) connections or less than twenty-five (25) people.

Why is this a Priority Issue?

- Approximately one-half of the population of Rowan County obtains their drinking water from private water supply wells.
- At present, there is no comprehensive inspection/sampling program in place.
- Research conducted by the Rowan County Environmental Health Department has revealed that approximately twenty-five percent of private water supply wells are contaminated with bacteria.
- Because of the rural nature of Rowan County, private water supply wells will be the primary water source for the majority of the population for the foreseeable future.

Goal:

Insure that all new private water supply wells are properly constructed and are providing safe water.

Strategies:

- Develop a well construction and testing program.
- Provide knowledge to the local well drillers about proper construction standards.
- Provide knowledge and information about drinking water safety to the citizens of Rowan County.
- Secure necessary resources to carry out this objective.

Objectives:

- By February 28, 2007 fill existing Environmental Health Specialist position.

- By April 30, 2007 adopt local rules to address the construction and sampling of new private water supply wells.
- By April 30, 2007 Environmental Health Specialist will be trained in well construction
- By May 30, 2007 conduct a public information campaign informing residents, building contractors, well drillers, realtors and other interested parties about permitting and inspections requirements.
- By July 1, 2007 implement a permitting process for all newly constructed private water supply wells.
- Between July 1 and September 1, 2007 purchase necessary equipment (vehicle, downhole camera, protective equipment, etc.).
- Between July 1 and December 31, 2007 add an additional Environmental Health position.
- Between July 1 and December 31, 2007 implement construction/inspections program.
- Between January 1 and June 30, 2008 implement water-sampling program.

Priority Issue: Pandemic influenza preparedness

Appendix E

According to the World Health Organization, “an influenza pandemic occurs when a new influenza virus appears against which the human population has no immunity, resulting in several, simultaneous epidemics worldwide with enormous numbers of deaths and illness.”

Why is this a Priority Issue?

- The impact of an influenza pandemic on the healthcare system will be devastating. It has been estimated that in the United States, a moderate pandemic could result in 20 to 47 million people becoming ill; 18 to 42 million outpatient visits; 314,000 to 734,000 hospitalizations; and 89,000 to 207,000 deaths.
- Based on observations from previous pandemics, the Centers for Disease Control and Prevention (CDC) has estimated that the economic losses in the United States associated with the next pandemic will range from \$71 billion to \$166 billion.
- Pandemics are as unpredictable as the viruses that cause them. Different pandemics have shown very different levels of mortality, severity of illness, and patterns of spread.
- Supplies of vaccines and antiviral drugs – the two most important medical interventions for reducing illness and deaths during a pandemic – will be inadequate in all countries at the start of a pandemic and for many months thereafter.

Goal:

Reduce illness and death and minimize social/economic disruption caused by pandemic influenza.

Strategies:

- Prepare, update, and maintain a Pandemic Influenza Plan and integrate it into the County Emergency Operations Plan.

- Update and maintain the Strategic National Stockpile Plan and integrate it into the County Emergency Operations Plan.
- Exercise and evaluate the County Strategic National Stockpile Plan and Pandemic Flu Plan at least annually.
- Raise public awareness regarding the threat of bio-terrorism and potential bio-terrorism agents and provide citizens/business/schools, etc with information on steps to take to prepare for a biological threat or other public health crisis.
- Provide N95 respirators and other personal protective equipment to staff to be used during a public health crisis (i.e., N95 respirators, surgical masks gloves, gowns, face shields, etc).
- Have all new Health Department employees complete the Staff Preparedness Orientation Training and Incident Command training.

Objectives:

- The Rowan County Strategic National Stockpile (SNS) Plan will be updated and/or revised bi-annually. The first revision for CY 2007 will be conducted by June 30, 2007 and the second revision will be conducted by December 31, 2007.
- By June 1, 2007, plan, conduct and evaluate a Preparedness and Prevention Tabletop Exercise involving key healthcare professionals, first responders and the Rowan County Health Department.
- By April 1, 2008, plan and conduct a series of Planning Preparedness workshops to target 50% of all childcare centers and daycare providers in Rowan County.
- Annually, conduct personal protective equipment (PPE) fit testing training and fit test all Rowan County Health Department employees for N95 respirator masks.
- All Rowan County Health Department employees that play a role in responding to a Bio-terrorism and disaster events will complete an on-line Incident Command System (ICS) 100 Training and National Incident Management System (NIMS) 700 training within 45 days of the date they are hired.
- All Rowan County Health Department employees will complete Staff Preparedness Orientation Training within 45 days of the date they are hired.

Priority Issue: Infant mortality disparity between African American and White babies

Appendix F

Infant mortality is defined as a baby's death before one year of age. Mirroring our state and nation, African American babies in Rowan County are dying at a much higher rate than White babies.

Why is this a Priority Issue?

- The public health profession considers infant mortality to be one of the most sensitive indicators of community health. Poor infant health reflects poor community health.
- In Rowan County, for the 5-year inclusive period (2001-2005), the African American infant mortality rate exceeded the White infant death rate by 31%.

- Resolving the infant death disparity between African American and White babies is a national, state and county health goal.

Goal:

Eliminate the infant death disparity between African American and White babies.

Strategies:

- Assist low-income African American families in accessing healthcare, nutrition services, and family support services.
- Strengthen self-sufficiency among low-income African American families by improving educational and employment opportunities.
- Provide knowledge and tangible support that enables low-income African American women of childbearing age to adopt a healthy lifestyle before, during and after pregnancy.
- Secure additional resources to provide family support services to more low-income African American families.

Objectives:

- By April 30, 2007, establish an Infant Mortality Reduction coalition comprised of local organizations and volunteers dedicated to reducing infant death disparities.
- By June 30, 2007 secure additional grant funds to extend family support services to more low-income African American families.
- By August 31, 2007, contract a second outreach worker.
- Between January 1, 2007 and June 30, 2008, case manage all clients receiving Health Link services using Visit Tracking software.
- Between July 1, 2007 and June 30, 2008, 250 low-income families will receive one-on-one consultation or counseling services through Health Link.
- Between July 2007 and June 30, 2008, Health Link will directly refer 225 low-income parents to community resources or services.
- By June 30, 2008, 85% of families receiving Health Link family support services will optimally space the birth of their babies by at least 2 years.
- By June 30, 2008, 85% of pregnant African American women receiving Health Link services will secure prenatal care within the first trimester.
- By June 30, 2008, 90% of African American families whose infant is receiving Health Link services will adopt practices that prevent SIDS (Sudden Infant Death Syndrome).