

The Cleveland County Public Health Board met on Tuesday, February 13, 2024, at 6:00 p.m.

Board members present: Chair Sara Karner, Robert Miller, Marty Hamrick, Kale Meade, Christina Alexander, Henry Gilmore, Heather Bridges Moore, Nancy Cline

Remote Attendance: Deanna Moseley Lawrence

Health Department staff present: Tiffany Hansen, DeShay Oliver, Andrea Power, Nathan McNeilly, Leslie McSwain, Hunter Ledbetter, Anne Short

Remote Attendance: Heather Voyles

County Attorney present: Martha Thompson

CALL TO ORDER/WELCOME:

Chair, Sara Karner called the meeting to order at 6:01 pm and welcomed everyone.

Mr. Miller gave the invocation.

CITIZEN RECOGNITION:

No citizens requested to appear before the Board.

APPROVAL OF AGENDA FOR FEBRUARY 13, 2024, PUBLIC HEALTH BOARD MEETING:

Chair Karner presented the proposed agenda for the February 13, 2024, Public Health Board meeting for consideration of adoption.

Motion: A motion was made by Kale Meade with a second by Mr. Miller to adopt the agenda for the February 13, 2024, Public Health Board meeting as prepared. The motion carried unanimously.

APPROVAL OF JANUARY 9, 2024, PUBLIC HEALTH BOARD MEETING MINUTES:

Chair Karner presented the January 9, 2024, Public Health Board meeting minutes for consideration of approval.

Motion: Kale Meade moved that the minutes of the January 10, 2023, Public Health Board Meeting be approved, and Mr. Miller made the second. The motion carried unanimously.

NURSE FAMILY PARTNERSHIP PRESENTATION:

Chair Karner introduced Hunter Ledbetter Freeman with Nurse Family Partnership. Hunter opened her presentation with a quick video about NFP. The vision for NFP is A future where all children are healthy, families thrive, communities prosper, and the cycle of poverty is broken. Nurse Family Partnership has served over 385,375 families since 1996. They are in 40 states plus Washington, D.C., the U.S. Virgin Islands, and some Tribal Communities. For every \$1 invested in NFP, this saves \$5.70 in future costs for the highest-risk families served. Our key goals are to improve pregnancy outcomes, improve child health and development, and improve economic self-sufficiency of the family. How this happens is because specially educated nurses aid the parent from pregnancy through age 2 of the child. During the first 1000 days of life early experiences influence the developing brain. The toxic effects of chronic stress and adversity can lead to lifelong problems. Early intervention can prevent those consequences. A stable, care relationship is essential for development. The brain development during the first two years is greatest for vision, hearing, language, and higher cognitive function. The Gold Standard Research trial outcomes demonstrate that NFP delivers against its three primary goals of better pregnancy outcomes, improved child health and development, and increased economic self-sufficiency. This makes a measurable impact on the lives of children, families, and the communities in which they live. The following outcomes have been observed among participants in at least of the trials. There was a 48% reduction in child abuse and neglect, 56% reduction in ER visits for accidents and poisonings, 50% reduction in language delays of child at 21 months, 67% less behavioral/intellectual problems at age 6, 79% reduction in preterm delivery for women who smoke, 32% fewer subsequent pregnancies, 82% increase in months employed, 61% fewer arrests of the mother, and 59% reduction in child arrests at age 15. In North Carolina 89% of babies were born full term, 85% of mothers-initiated breastfeeding, 89% of babies received all their immunizations by 24 months, and 61% of clients 18+ were employed at 24 months. Program outcomes that were met or were below for Cleveland County compared to the NFP target were premature birth, very low birth weight, lead testing, and initiation of breastfeeding. The outcomes that were not met were low birth weight, subsequent pregnancy, immunization rates, and smoking cessation at 36 weeks gestation. A positive out of the program is that 65% of the clients were an active part of the workforce by age 18 and older and 41.9% of the clients by age 17 and younger. Cleveland County initiated the program in March 2009. We have served 662 clients with 221 program graduates. We have received 178 referrals to date since 2023. We have a staff of 2 nurse home visitors, 1 administrative assistant, and 1 nursing supervisor. We are actively recruiting 2 additional nurse home visitors. The current caseload is 46 cases per home visitor. The criteria for enrollment into NFP are that you must be a 1st time mother, enroll before 28 weeks pregnant, meet pregnancy Medicaid income criteria, be a resident of Cleveland County, and participate voluntarily. Sara asked the reason why clients do not graduate from the program. Hunter explained that those that join the program closer to the 28-week pregnancy mark tend to not finish the program. Tiffany asked Hunter to explain the training process for a nurse home visitor. Hunter explained that there are 3 units in the process of training, and it takes 9 months to a 12 to train a nurse home visitor to be able to take on a full case load. Mr. Miller asked if a mother has a repeat pregnancy, can they still be in the program. Hunter explained that it is for first time mothers only.

ANNUAL CHILD FATALITY REPORT:

Chair Karner introduced DeShay Oliver with the Annual Child Fatality Report. As part of NC State law, the Child Fatality Prevention Team with local health departments is required to advocate for system improvements and needed resources where gaps and deficiencies may exist and submit a report annually to local county commissioners and boards of health. The purpose of the Child Fatality Prevention Team is to identify deficiencies in the delivery of services to children and families by public agencies, make and carry out recommendations for changes that will prevent future child deaths, and promote understanding of the causes of child deaths. In 2023, the Cleveland County CFPT reviewed 12 child deaths and identified 2 system problems and recommendations for future prevention efforts. Of the 12 deaths reviewed, there was 1 pneumonia/respiratory failure, 1 motor vehicle accident, 1 gunshot wound, 2 unsafe sleep conditions, 2 extreme immaturity/prematurity and 5 were related to neonatal problems at birth, birth defects/congenital abnormalities. Unsafe sleep conditions continue to be an area of concern for Cleveland County. The problem was identified as co-sleeping with parents and/or unsafe sleep conditions. The recommendation was made to continue to provide safe sleep education to citizens of Cleveland County and consider a safe sleep billboard. The death by gun violence was identified as gang violence and the need for gun violence and gang violence prevention. The recommendation was made that Cleveland County should continue to provide gun safety education to the community and should consider gang violence education in the school system. The death by motor vehicle accident was identified as a car seat safety/seat belt safety issue. The recommendation was to continue providing car seat safety checks and seat belt education. DeShay did ask if anyone had any questions or recommendations. Mr. Miller asked how the investigations take place and Tiffany explained that the predominant agencies are law enforcement and social services, and they take the information to the other team members for further evaluation and recommendations. Sara asked if we have any educational resources in the middle schools for gun safety. DeShay said that we do not have any educational classes provided by CCHD, however; the sheriff's department does provide a STAR camp during the summer months for children transitioning to middle school and are interested in attending.

COMMUNITY HEALTH IMPROVEMENT PLANS (CHIP):

Chair Karner introduced Anne Short with the Community Health Improvement Plans. The plans were drawn from the 2019 Community Health Assessment. We focused on teen births and tobacco use. Reproductive health and safety classes were delivered by community health educators during the academic year 22-23 and fall semester of 23-24. The curriculum was delivered in single gender classes and adapted from Making Proud Choices. Since 2010, the teen birth rate has been reduced from 63/1000 females ages 15-19 in 2010 to 32/1000 females ages 15-19 in 2023. Two health educators delivered the curriculum in 9th grade health and physical education classes. Health educators were able to serve 375 female students during the 22-23 school year. Due to the loss of a male educator, health teachers were provided with lesson plans and materials to provide this information to male students. Students participated in a satisfaction survey at the close of the 14-session instructional time. A renewal grant was received in June 2023 with \$100,000 in funding annually for the next four years. As part of the renewal, health educators have focused on several deliverable that consist of development of a new Fidelity Monitoring plan, implementation of a community needs and resource assessment targeting youth-friendly services, and developing a mechanism to assess clinical services within the health department to determine the degree to

which they are youth-friendly. Our strategies for tobacco cessation were to deliver tobacco prevention interventions, in-person or virtually, to students enrolled in Cleveland County Schools. 874 seventh grade students completed the Too Good for Drugs program during the 22-23 school year and first semester of 23-24. This program focuses on building positive communication and refusal skills as well as educating students on the signs and symptoms of addiction to substances. The HALT (Helping Adolescents leave Tobacco), cessation program is facilitated through the school-based health centers in the middle and high schools in the county. Four students enrolled with 1 successful quit attempt in the 22-23 school year and 9 students enrolled in HALT during the 1st semester of the 23-24 school year with 2 successful quit attempts.

BUDGET AMENDMENTS:

Chair Karner introduced Leslie McSwain with the budget amendments.

ITEM NUMBER ONE:

The Cleveland County Health Department has been awarded a Neonatal Abstinence Syndrome (NAS) grant from Kintegra in the amount of \$40,000 to provide services and support aimed at reducing the incident and impact of NAS through reduction of opioid abuse, misuse, and overdose. These funds will be utilized to increase access to naloxone and educate the community about opioid use disorder and connect residents to resources available in our community. We are requesting these funds to be budgeted in our CODAP (548) department.

ITEM NUMBER TWO:

The Cleveland County Health Department has been allocated \$81,033 from NCDHHS Epidemiology/Immunization branch. This provides funding to be used towards maintaining COVID-19 vaccines for uninsured/underinsured adults through the CDC Bridge to Access Program. We will use the funds towards advertising campaign, equipment to be utilized in clinic. We are asking that these funds be budgeted in our Carolina Access/COVID 19 (546) department.

Motion: A motion to recommend the proposed budget amendments to the Board of Commissioners was made by Robert Miller and a second was made by Henry Gilmore. The motion carried unanimously.

MISCELLANEOUS:

Chair Karner asked if there was any miscellaneous business to discuss.

Anne Short updated the board on the Community Health Assessment (CHA). Anne did update everyone on the 2023 weighted priorities. A handout was given to all board members with the priorities that were developed from the 2023 ballots. There are 21 indicators with the main two indicators for CCHD being work on Teen Birth Rate and Drug Overdose Deaths. The weighted priorities provided on the handout are as follows:

| 2019 Ranking | 2023 Ranking | Indicator | 2023 Weighted Score |
|--------------|--------------|---|---------------------|
| 1 | 1 | Individuals Living at or below 200% Federal Poverty Level | 147 |
| 2 | 2 | Adverse Childhood experiences | 120 |
| 5 | 3 | Severe Housing Problems | 105 |
| 4 | 4 | Teen Birth Rate | 88 |
| 6 | 5 | Third Grade Reading Proficiency | 76 |
| 12 | 6 | Drug Overdose Deaths | 74 |
| 7 | 7 | Limited Access to Healthy Food | 72 |
| 15 | 8 | Suicide Rate | 56 |
| 8 | 9 | Primary Care Workforce | 52 |
| 3 | 10 | Tobacco Use | 49 |
| 11 | 11 | Unemployment | 45 |
| 14 | 12 | Access to Exercise equipment | 29 |
| 10 | 13 | Uninsured | 23 |
| 16 | 14 | Sugar-Sweetened Beverage Consumption | 19 |
| 21 | 15 | Excessive Drinking | 18 |
| 17 | 16 | HIV Diagnosis | 18 |
| 13 | 17 | Infant Mortality | 17 |
| 20 | 18 | Life Expectancy | 16 |
| 9 | 19 | Early Prenatal Care | 11 |
| 19 | 20 | Short-Term Suspensions | 7 |
| 18 | 21 | Incarceration Rate | 6 |

- There were 70 responses from key stakeholders in 2024 and 65 responses in 2019.
- Priority 1= 5 points, 2=4 points, 3=3 points, 4=2 points, 5=1 point
- Same ranking for Individuals living at or below 200% Federal Poverty Level, Adverse Childhood Experiences, Teen Birth Rate, Limited Access to Health food, and Unemployment.
- Moved up in ranking: Severe Housing Problems, Drug Overdose Deaths, Suicide Rate, Access to Exercise Opportunities, Sugar-Sweetened Beverage Consumption, Excessive Drinking, HIV Diagnosis, Life Expectancy.
- Dropped in ranking: Third Grade Reading Proficiency, Primary Care Workforce, Tobacco Use, Uninsured, Infant Mortality, Early Prenatal Care, Short-Term Suspensions, Incarceration.

ADJOURN: 7:03 PM

There being no further business, Chair Karner called for a motion to adjourn.

Motion: Mr. Miller moved, with a second by Kale Meade, that the Cleveland County Public Health Board meeting be adjourned. The motion carried unanimously.

RESPECTFULLY SUBMITTED,

Tiffany Hansen, Secretary
Cleveland County Public Health Board