FY17 Department Director Work and Performance Plan

MARCUS PLESCIA, MD, MPH, HEALTH DEPARTMENT
INITIATIVE #1: Health and Human Services Integrated Service Delivery Project

**Description**
Provide executive direction and project leadership in a manner that transforms current service provision from a Regulative Business Model to an Integrative Business Model, expanding the focus beyond eligibility and adherence to policies/regulations to a more comprehensive focus that considers “the root causes of clients’ needs and problems by coordinating and integrating services at an optimum level.”

**Rationale**
Providing human services is a core function of Mecklenburg County government. Numerous residents receive services from more than one human service department. There are many collaborations within the Human Services Agency, however these have occurred at the program or service level. This project will take a broader look at how the County’s Human Services Agency can be organized to serve residents more effectively and efficiently. Focus will be on the following items:

- Improving the health and well-being of Mecklenburg residents, especially people most in need of support and assistance, emphasizing education and prevention and optimal human service delivery.
- Seeking more opportunities to involve and integrate Human Services Agency departments in collaborative service delivery.
- Seek to establish an integrated customer interface to improve both the customer experience as well as the outcome of the services provided.

**Completion Date**
This is a multi-year plan with the completion date yet to be determined.

**Updates/Project Milestones**

- **July 2016—Phase 2 Project Kick Off**
  - Ongoing meetings of the Implementation Leadership Team (all HHS Department Directors)
  - Execute Phase 2 of the project charter & schedule with focus on:
    - Prototype Design & Operations
    - Business/System Architecture
    - Customer Experience Strategy
  - Implement the planned Mail-Room merge for HHS services
  - Complete feasibility determination for HHS consolidated call center
  - CRC Development at Valerie C Woodard through determining needed technology, construction, and employee roles and responsibility
  - Develop strategic road map for data sharing between HHS Services
  - Identify legal/systemic barriers for data sharing due to state and federal requirements. Create strategy for influencing change to external barriers.

**Outcomes/Measures**

<table>
<thead>
<tr>
<th>Successful achievement of established updates and project milestones</th>
<th>Target</th>
<th>Result</th>
<th>% of Target Achieved</th>
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<tr>
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INITIATIVE #2: Development of Population-based Interventions

Description
Identify key partnership strategies and prioritize Health Department-led interventions to impact policy, systems and environmental change to promote health and prevent disease.

Rationale
An essential service of public health is to develop polices and plans that promote community-wide health improvement.

Completion Date
6/30/2017

Updates/Project Milestones
• Launch and conduct a weekly market at Northwest health department site
• Design and launch community-wide effort to increase availability and consumption of water through policy, system and environmental change strategies by 6/30/2017. This will include a media campaign along with encouraging stakeholders to adopt policies that promote water consumption (i.e. similar to vending and healthy meals policies).
• Implement Tobacco Education Response Team to improve compliance with smoke/tobacco-free regulations by 12/31/2016.
• Partner with NCDHHS to evaluate effectiveness and feasibility of utilizing Cash Value Vouchers at Mecklenburg Farmers markets by 3/31/2017.
• Assess feasibility of implementation for policies in tobacco-free workplace and foster care settings by 6/30/2017.
• Complete Mecklenburg County government health vending implementation.

Outcomes/Measures

<table>
<thead>
<tr>
<th>Outcomes/Measures</th>
<th>Target</th>
<th>Result</th>
<th>% of Target Achieved</th>
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</thead>
<tbody>
<tr>
<td>Initiate and conduct first season of Rosa Parks Farmers Market</td>
<td>100%</td>
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<tr>
<td>Implement campaign promoting health benefits of water consumption</td>
<td>100%</td>
<td>0%</td>
<td></td>
</tr>
<tr>
<td>Implement Tobacco Education Response Team</td>
<td>100%</td>
<td>0%</td>
<td></td>
</tr>
<tr>
<td>Evaluate Cash Value Voucher</td>
<td>100%</td>
<td>0%</td>
<td></td>
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<tr>
<td>Complete Tobacco-free policy assessment</td>
<td>100%</td>
<td>0%</td>
<td></td>
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<tr>
<td>Develop unintended pregnancy action plan for 2017-2021</td>
<td>100%</td>
<td>0%</td>
<td></td>
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<tr>
<td>Complete County healthy vending implementation</td>
<td>100%</td>
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## INITIATIVE #3: School Health Team Whole School, Whole Community, Whole Child

### Description
Promote school health by supporting school health teams to adopt the Whole School, Whole Community, Whole Child (WSCC) model.

### Rationale
Adopting the WSCC model will facilitate greater integration and collaboration between education and health to improve students’ cognitive, physical, social and emotional development. This approach is endorsed by the Centers for Disease Control and Prevention (CDC) and the Association for Supervision and Curriculum Development (ASCD).

### Completion Date
6/30/2017

### Updates/Project Milestones
- District level School Health Steering Committee will meet at least 3 times each school year.
- Train all school health staff with the WSCC model.
- Identify and assess school health team activity in each school.
- Develop an action plan to support the development of functional school health teams and document progress in implementing the WSCC model

### Outcomes/Measures

<table>
<thead>
<tr>
<th>Outcomes/Measures</th>
<th>Target</th>
<th>Result</th>
<th>% of Target Achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td># Staff trained in WSCC</td>
<td>150</td>
<td></td>
<td>0%</td>
</tr>
<tr>
<td># Schools assessed</td>
<td>75</td>
<td></td>
<td>0%</td>
</tr>
<tr>
<td>WSCC implementation action plan development % complete</td>
<td>100</td>
<td></td>
<td>0%</td>
</tr>
<tr>
<td># functioning school health teams</td>
<td>12</td>
<td></td>
<td>0%</td>
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</tbody>
</table>
INITIATIVE #4: Children’s Developmental Services Agency (CDSA)

Description
Ensure the provision of high quality, evidence based early childhood intervention practices for families who have children, aged birth to three with special needs who are enrolled in the CDSA.

Rationale
Research is clear in regards to the significant amount of brain development that occurs from birth to age three. This period is critical and it offers a window of opportunity to make a positive difference in how a child develops and learns. The reauthorization of the Individuals with Disabilities Education Act, Part C (P.L. 108-446) § 303.32 adds to the federal regulations a requirement that interventions be informed by scientifically based research. Research for supporting families with infants and toddlers with disabilities supports the use of natural learning environment practices and coaching with families to increase caregiver capacity, competence and confidence. The CDSA continues the work of implementing these evidenced based practices across a staff of 100 and a Provider Network of more than 200 early intervention practitioners.

Completion Date
6/30/2017

Updates/Project Milestones
• Train CDSA and Provider Network Staff in Family Infant and Preschool Program to become Master Coaches. Training will enable staff to utilize evidenced based natural learning environment practices and family coaching (9/30/16).
• 4 CDSA staff will receive 6 months of intensive training from the Family Infant Preschool Program. Upon completion of the training, staff will receive certification as Fidelity Coaches for evidenced based early intervention practices. Fidelity Coach Certification will allow staff to train Master Coaches to fidelity with these practices (12/30/16).
• Trained Master Coaches, as part of the Coach2Coach mentoring program will provide one on one mentoring to CDSA and provider network staff to support natural learning environment practices and family coaching (6/30/17).
• 120 CDSA Staff and providers will receive general training on natural learning environment practices and family coaching (6/30/17).
• 4 CDSA Licensed Mental Health Clinicians will be trained in Attachment and Biobehavioral Catch-up (ABC), an evidenced based therapeutic intervention for children who have experienced maltreatment or disruptions in care (9/30/16).

Outcomes/Measures

<table>
<thead>
<tr>
<th>Outcomes/Measures</th>
<th>Target</th>
<th>Result</th>
<th>% of Target Achieved</th>
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<tbody>
<tr>
<td># of newly trained Master Coaches</td>
<td>14</td>
<td>0</td>
<td></td>
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<tr>
<td># of Certified Fidelity Coaches</td>
<td>4</td>
<td>0</td>
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<tr>
<td># of staff and providers receiving one on one mentoring by a Master Coach</td>
<td>25</td>
<td>0</td>
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</tr>
<tr>
<td># of staff and providers receiving general training on natural learning</td>
<td>120</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td># of staff trained in Attachment Biobehavioral Catch-up (ABC)</td>
<td>4</td>
<td>0</td>
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</table>
### INITIATIVE #5: Integrating Behavioral Health Interventions

**Description**
Identify key partnership strategies and prioritize Health Department-led interventions to impact policy, systems and environmental change to promote health and prevent disease.

**Rationale**
An essential service of public health is to develop polices and plans that promote community-wide health improvement. Behavioral health issues are a priority of the county community health needs assessment and a number of evidence-based strategies have emerged that can be implemented at a community wide level. Mecklenburg County Public Health must engage more assertively in these issues.

**Completion Date**
6/30/2017

**Updates/Project Milestones**
Engage stakeholders in planning community forum on challenges of opioid addiction; assess scope of problem; identify effective responses

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<thead>
<tr>
<th>Outcomes/Measures</th>
<th>Target</th>
<th>Result</th>
<th>% of Target Achieved</th>
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<tbody>
<tr>
<td>Complete opioid addiction impact assessment</td>
<td>100</td>
<td>0%</td>
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<tr>
<td>Develop opioid addiction response plan</td>
<td>100</td>
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