

Public Health Task Force Meeting Minutes 4.26.2023

In Attendance:

- Kimberly Tissot, Sarah Lyons, Val Bishop, Naomi Lett, Spencer Dickey, Margaret Alewine, David Rotholz, Kelly Cordell, Janet Priest, Megan Branham, Megan Johnson, Eric Bellamy, Karla Buru, Terrance Middleton, Reba Landry, Justina Siuba, Catherine Graham, Nikki Hutchison, Russell Morrison, Larry Wanger, Annie Foster, Beth Franco, Alexis Smith, Julia Martinelli, Mark Gamble, Lawson Clubb, Mike Leach, Robert McBurney

Welcome:

- Kimberly welcomed everyone to the meeting and introduced our guest speaker, Sara Lyons. Sara is the Senior Program Analyst, Health and Disability for [the National Association of County and City Health Officials \(NACCHO\)](#). Sara and Kimberly have worked on a national project addressing how we can ensure that people with disabilities are included during Public Health emergencies.

Presentation by Sara Lyons:

- Sara reviewed NACCHO's strategic priorities and talked about how NACCHO supports Health Departments across the country:
 - There are more than 3000 health departments across the nation.
 - NACCHO is currently holding its 2023 Preparedness Summit. Recovery from COVID-19 is a big focus.
 - They do advocacy work and have a governmental affairs division.
 - In July is NACCHO 360, their annual conference for Public Health professionals.
- The Local Public Health landscape:
 - Health departments operate differently. Sara shared a map in the slideshow that shows the different structures of health departments. Some are operated locally, some are state-run, some states have a combination, and some departments share responsibility between state and local governments. Most health departments serve less than 50,000 people.
- NACCHO's Health and Disability Program:
 - This program promotes the inclusion and engagement of people with disabilities in local health department activities.

- For several years they have had a health and disability fellowship supported by the CDC's National Center on Birth Defects and Developmental Disabilities (NCBDDD).
- There is also a health and disability workgroup. Various people participate, including health educators, preparedness coordinators, etc.
- Sara outlined four focuses of NCBDDD's work:
 - Saving babies through birth defects prevention and research
 - Helping children live to the fullest by understanding developmental disabilities.
 - Protecting people and preventing complications of blood disorders
 - Improving the health of people with disabilities
 - This is what the health and disability program falls under.
 - The slideshow included a lot of statistics about NCBDDD's work. Kimberly added that we could look into these specific numbers for South Carolina since the PowerPoint shows national statistics.
- How NACCHO educates local health departments about the importance of disability inclusion:
 - They offer two trainings:
 - Health & Disability 101: Training for Health Department Employees. Modules can be completed online in an hour. Provides foundational knowledge about including people with disabilities. Over 2000 people have completed it since 2017. It can be accessed through NACCHO University online.
 - New Training: Leveraging Partnerships with Disability Organizations. This training aims to define disability inclusion and etiquette, talk about identifying partners, engagement strategies, etc.
 - They provide technical assistance through grant funding. It is usually on specific topics like emergency preparedness and COVID-19.
 - Sara said that it is difficult to start projects around disability inclusion without having disability organizations at the table. Getting letters of support from them and bringing them in to contribute is important.
 - Kimberly asked Sara to define disability organizations in more detail, explaining that sometimes local health departments and other agencies go straight to DDSN without realizing they don't do cross-disability work.
 - Sara said that the cross-disability approach is something they talk a lot about. They give background on the work that Centers for Independent Living do. They have had a lot of health departments work with developmental disability councils. For government agencies, sometimes it's easier to first work within other government agencies. Through Coalition meetings, they can connect with other disability organizations.

- Catherine Graham asked if NACCHO partnered with disability organizations to develop and update the training annually. Sara answered that the workgroup members and fellows created the training. There were two AUCD (Association of University Centers on Disabilities) partners, and people within the CDC's health and disability program, who provided feedback. In terms of updating the training, last year, they noticed some accessibility issues for screen reader users that were addressed, and some data was updated. They can't make annual updates because it requires a new contract. They look every few years at things like language changes. Sara updated the training to include both person-first and identity-first language. Kimberly added that we tested the training, and it is disability approved.
- Grant funding example:
 - Addressing needs of people with disabilities in COVID-19 Local Preparedness Planning, Mitigation and Recover Efforts Project
 - For this project, they are not just doing work around COVID. They are also working on emergency preparedness across the board. This was a pilot project that started in late 2020. They have sustained additional funding for four more years due to the project's success.
 - Sara discussed the project's purpose outlined in the PowerPoint and reviewed data about people with disabilities at an increased risk for severe illness or death from COVID-19. Data was gathered from over 500 organizations, and Intellectual disability was the highest risk factor.
 - This reinforced what we knew from previous public health emergencies like Katrina and H1N1.
 - There were monthly calls for this project, especially during the vaccine rollout.
 - Kimberly added that we had to do a lot of advocacy work to ensure that people with disabilities were included in the vaccine rollout in SC.
 - Sara discussed the grant awardees for the first two years listed in the PowerPoint.
 - New Orleans did a lot of work around evacuation plans. They are still learning from Katrina years later.
 - For year 2, they have one territory represented, the Northern Mariana Islands. A lot of the grant awardees are at the Preparedness Conference this week.
 - Sara discussed the Disability Specialist role. Each health department that receives funding has a specialist. Some are partnering with other disability

organizations. The responsibilities of the Disability Specialist are outlined in the PowerPoint and the key project activities.

- How are departments funding these positions? The grant funding is \$75,000 per awardee. Everyone approached hiring for the specialist role a little differently. Some used hiring agencies or created a full-time position. Many subcontracted with specific disability organizations. Last year health departments subcontracted with 2 CILs. One department subcontracted with a local Easter Seals. Sara discussed how awardees are collaborating with disability organizations.
- Opportunities for local health departments and disability partners to collaborate (what they have learned from grant funding and other projects):
 - Health departments should seek out disability organizations for training, coalitions, accessibility expertise, etc.
 - Kimberly shared that the South Carolina Emergency Management Division (SCEMD) works with people with disabilities and disability organizations to test emergency and disaster preparedness plans.
- How to contact Sara and learn about grant funding opportunities:
 - E-mail: slyons@naccho.org
 - Grant opportunities are in a monthly newsletter. You can sign up for it on [NACCHO's health and disability webpage](#).
 - Kimberly added that Able SC is creating a partnership guide with NACCHO about partnering with disability organizations in preparing for emergencies and public health crises.

Mission Statement

Kimberly shared the task force's new mission statement that was previously voted on.

Committee Structure:

The three proposed committees and what they will focus on:

- 1) Planning Committee
 - a) State policies and procedures around medical rationing
 - b) Also, planning within your entities/programming to ensure people with disabilities are being protected.
- 2) Education & Integration Committee
 - a) Providing education to public health entities and your organizations
 - i) For example, Advocacy Day for Access and Independence was yesterday; many still wore masks. They were likely people who were at risk and protecting themselves. We must ask within our organizations if we are still doing everything possible to protect

people. If you enter a consumer's home, are you asking if they would like you to wear a mask?

3) Accessibility Committee

- a) Ensuring information being sent out regarding public health and emergencies is accessible.
- b) Are modifications needed to programs?
- c) Are events and vaccine clinics accessible?
 - i) A lot of hospitals do rural outreach on buses. But if buses are not accessible, many people can't access preventative screenings.

Additional discussion about committees:

- We will likely have subcommittees. Please let Kimberly know if you're interested in leading a committee.
- Beth Franco is interested in the planning committee.
- David Rotholz said that we can identify where CDR can provide support as we look more closely at what each committee does.
- Eric Bellamy: The Education and Integration committee is of interest to the Children's Trust
- Kimberly asked Karla if DHEC could look into South Carolina statistics for individuals with birth defects and other developmental disabilities. Karla will check on that and report back.
- Val Bishop added that it will be easier to work on planning while not in the midst of the pandemic. We need to identify what was missing before COVID. Val and Kimberly were on a task force for vaccine rollout. They realized there was a lack of understanding of what disability means and that it is so broad. They received push-back about in-home vaccination, for example. They were told that individuals weren't at risk if they weren't leaving their homes, but they didn't consider PCAs and family members entering the home.

Next meeting: May 24, 1:00-2:30 PM

We will send out the presentation and meeting minutes. Mandy Halloran will be leading next month's meeting.

Adjourn: 2:19 PM