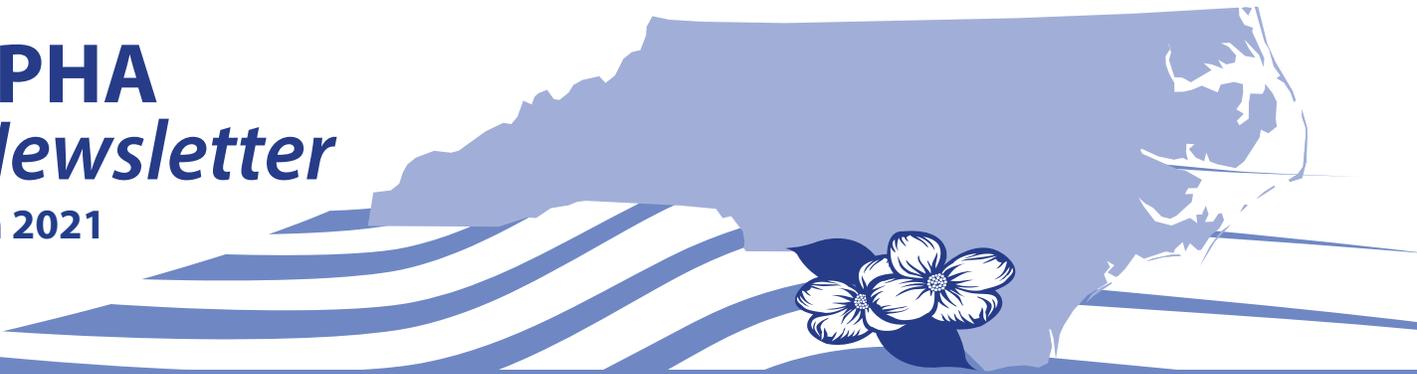


NCPHA E-Newsletter

March 2021



Newsletter from the NC Public Health Association and the NCPHA Public Awareness Committee

Message from the President

– Mike Zelek



Wow, what a start to 2021! I continue to be in awe of the tremendous public health work going on across North Carolina. Your efforts to equitably vaccinate North Carolinians against COVID-19 are both inspiring and lifesaving; know the NCPHA family stands behind you and is grateful for your service. You make us all proud.

I also want to take this opportunity to talk to you all about how our association is connected to two other important public health organizations in NC, specifically the North Carolina Alliance for Public Health Agencies (NCAPHA) and North Carolina Association of Local Health Directors (NCALHD). The relationship between the three organizations (NCPHA, NCAPHA, and NCALHD) is known as the confluence, or trifecta to some. This relationship is formalized through a memorandum of agreement (MOA) and aims to make each organization more impactful and sustainable through mutual support. As the MOA states, "The mission of each Party is better served through a unified system of collaboration that benefits from aligned leadership and mutual perspective."

The organizational chart (on page 19) shows how this all lines up. While each organization has its own governance structure, Katie Griffin serves as the executive director for all three organizations and reports to each executive board and a governance committee of the three presidents. Two representatives from NCPHA's board, the president and president-elect, serve on NCAPHA's board. Kim Dittmann serves as NCPHA's Operations Officer.

Over the years, this relationship has had financial benefits for NCPHA and made us a more sustainable association. This not only helps us to carry our work and host top-notch conferences, it also has allowed us to support important public health initiatives. Moving forward, we are looking to further leverage this partnership to advance, support, and advocate for public health across the state, taking advantage of the resources and expertise that each entity brings to the table. I can't think of a more critical time for us to be doing this and look forward to sharing updates on our progress in the months ahead.

Mike Zelek, MPH
2020-2021 NCPHA President



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NCPHA Legislative Report



Katie Griffin
Executive Director
North Carolina Public Health
Association

NCPHA has been working at the state and federal level to tell the local health department story to our elected officials in Raleigh and Washington, D.C.

On the state level, we've been having two separate funding conversations with state legislators: one around one-time COVID-relief funding that was part of the December 27, 2020, federal relief package, and one around the need for recurring state investment in communicable disease control.

Local health directors have presented to two separate legislative committees so far this year. On February 4, 2021, Stacie Turpin Saunders (Buncombe) and Dr. Marilyn Pearson (Johnston) presented to the House Health Committee on COVID-19 response at the local level. On March 10, 2021, Joshua Swift (Forsyth) and Lillian Koontz (Davidson) presented to the Joint Health Appropriations Committee on local health departments' communicable disease funding needs.

House Bill 196 contains a one-time award of \$84,000,000 to local health departments to be allocated based upon the percentage of the state population served for the purposes allowed under the federal ELC Enhancing Detection Expansion cooperative agreement grant (mainly costs associated with testing, contact tracing, etc.). HB 196 awaits the governor's signature as of the date of this writing.

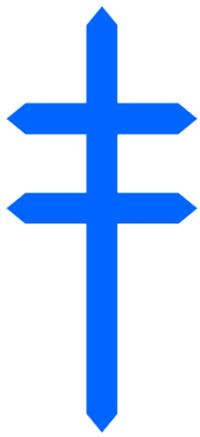
House Bill 61 contains recurring communicable disease funding and was filed on February 8, 2021. Representatives Donna White, Larry Potts, and Donny Lambeth are primary sponsors of the bill. We are pleased that there are currently 31 bipartisan named sponsors for this important legislation. If HB 61 passes, it would provide \$36,000,000 in recurring funding to local health departments for communicable disease control.

We've also been working with the Executive Branch to communicate local health departments' need for communicable disease funding. We've written letters to Governor Cooper and met with his budget staff to request that he include \$36,000,000 for local health departments' communicable disease control efforts in his budget this year.

We've partnered with other associations who are interested in supporting local public health. We've asked the North Carolina Association of County Commissioners and the North Carolina Medical Society to include public health funding as one of their Association priorities.

Finally, we've fielded requests from the media regarding local health departments' role in the COVID-19 vaccination effort and local health department funding. One local health director, Lisa Macon Harrison, appeared on national news in a CBS News spotlight of the Granville Vance District health department that she leads. The *News and Observer* and WRAL have published articles highlighting the need for investment in our local public health infrastructure, among other news outlets.





American Lung Association®

State Of The Air



Many people know that the air we breathe is important, but why? Air pollution may sometimes be invisible, but it can leave a big imprint on human health. In fact, evidence shows that air pollution can impact human health in more ways than previously imagined.

Two types of pollution are dominant in the U.S.: **ozone** and **particle pollution**. Both of these pollutants are tracked in American Lung Association's annual "**State of the Air**" report. These two pollutants threaten the health and lives of millions of Americans. Health risks include asthma attacks, premature death, cardiovascular disease, and pulmonary inflammation.

Fortunately, thanks to the Clean Air Act, the air in many North Carolina counties has gotten cleaner in recent years. But there is still work to do. North Carolinians continue to breathe harmful levels of ozone and particle pollution. We need to ensure clean air safeguards remain in place – our health depends on it.

To do so, the American Lung Association is organizing health professionals, individuals, and families to call on our leaders to protect and prioritize efforts that keep our air clean.

What can you do?

1. **Make your voice heard:** Sign up at lung.org/action to receive action alerts, and ask decision-makers in Washington, D.C. to stand up for healthy air protections today. Our decision-makers need to hear that our families' health must come first.
2. **Educate others:** Serve as a health expert for various media opportunities, interviews, and presentations or employ educational materials. Contact Christine Hart for more information.
3. **Stay informed:** Sign up for our **Health Professionals for Clean Air and Climate Action newsletter** to receive the latest news about lung health, including COVID-19, research, air quality, inspiring stories, and resources
4. **Protect yourself from dangerous air pollution:** Check your air quality, especially during heat waves, at [Airnow.gov](https://airnow.gov).
5. **Take actions to reduce your individual contributions to pollution** – such as driving less, opting to use active transportation, carpools or electric vehicles, and using less electricity in your household.

To learn more and get involved with protecting the air we breathe in North Carolina, please contact Christine at Hart@lung.org or 423-661-7593.





Newsletter Survey

Congratulations to our December Survey winner – Jennifer McCracken of Catawba Public Health!

The Public Awareness Committee is always looking for ways to improve the newsletter. We want to make it both informative and enjoyable to read since it's one of the many benefits of being a NCPHA member. Please go to the below link to complete a short survey about the eNewsletter. **Once you've completed all the questions, you will be eligible for a \$25 Visa gift card.** Good luck!

www.surveymonkey.com/r/NCPHAMarch2021

Emerging Leaders Program



Hello, I am Tony V. Locklear, Quality Improvement Coordinator with the Hoke County Health Department. I had the distinct privilege of participating in the NCPHA's Emerging Leaders Program last year. I met new colleagues from different counties who shared similarities in challenges within their current leadership role. The professional acumen was dynamic!

As leaders, we are responsible for the delivery of results to those we manage. The Emerging Leaders Program

provided a holistically-structured framework of leadership principles and tenets that increased my leadership capacity and enhanced my professional toolkit. I had the opportunity to share my thoughts and ideas with fellow participants through peer-to-peer consultation and experiential learning sessions. Through this peer-assisted support and personal self-reflection, I gained new insight and perspective on handling workplace challenges, especially in light of the rapidly changing novel human Coronavirus pandemic (COVID-19).

Overall, I really valued experiential learning. The learning points were personalized and broadened my awareness of my own professional beliefs and behaviors. The way I think impacts how I feel, and consequently, how I behave. The key takeaway is this – my attitude and aptitude can positively or negatively influence others' behavior (e.g. productivity, morale).

As a leader, I must commit to professional growth and development through the utilization of leadership programs such as NCPHA's Emerging Leaders Program. It is without reservation that I recommend this program to anyone interested in improving their leadership knowledge and skill set.



Medicaid Transformation Update – March 2021

The Department of Health and Human Services (DHHS) is changing the way most people receive Medicaid and NC Health Choice services in North Carolina.

Under the current fee-for-service model, DHHS directly reimburses physicians and health care providers based on the number of services provided or the number of procedures ordered. This model will now be known as NC Medicaid Direct. Some people will stay in NC Medicaid Direct.

Approximately 1.6 million of the current 2.5 million Medicaid beneficiaries will transition to NC Medicaid Managed Care. The state is contracting with insurance companies, called prepaid health plans, or PHPs. These insurance companies will be paid a capitated rate, which is a pre-determined set rate per member per month to provide health care service payment directly to providers of care.

In addition, DHHS is contracting with the Cherokee Indian Hospital Authority (CIHA) to support the Eastern Band of Cherokee Indians (EBCI) in addressing the health needs of American Indian/Alaskan Native Medicaid beneficiaries while exercising tribal sovereignty and self-determination. This new delivery system, the EBCI Tribal Option, will manage the health care through a primary care case management model focused on primary care, preventive health, managing chronic disease, and providing a set of care management services to members with significant health and social needs for North Carolina's approximate 4,000 Tribal Medicaid beneficiaries primarily in Cherokee, Graham, Haywood, Jackson, and Swain counties.

Standard plans and the EBCI Tribal Option will go-live on July 1, 2021. The open enrollment period for Medicaid beneficiaries to select a primary care provider (PCP) and enroll in a health plan is March 15, 2021 to May 14, 2021. Medicaid beneficiaries will have the opportunity to choose which PHP they want to be served by and where they want to receive their primary care. Those who do not select a health plan will be enrolled in one automatically beginning May 15, 2021.

During open enrollment, beneficiaries may enroll in a health plan and select a Primary Care Provider (PCP) or Advanced Medical Home (AMH) by:

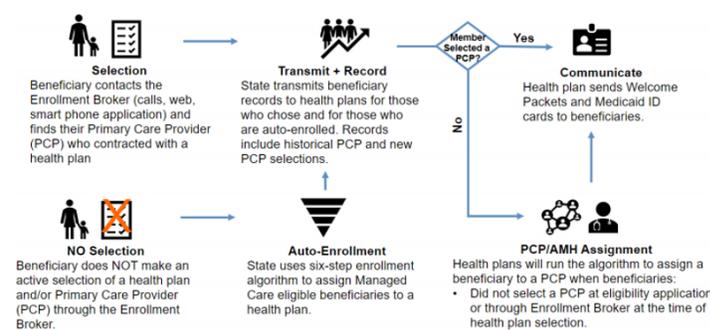
- Calling 833-870-5500 (toll free)
- Visiting [ncmedicaidplans.gov](https://www.ncmedicaidplans.gov)
- Completing the paper enrollment form found in their enrollment packet and returning it by fax or

mail

- Using the NC Medicaid Managed Care mobile app

If a choice is not made during the open enrollment period, beneficiaries will be automatically enrolled in a health plan and assigned a PCP/AMH.

The diagram below outlines the member enrollment process.



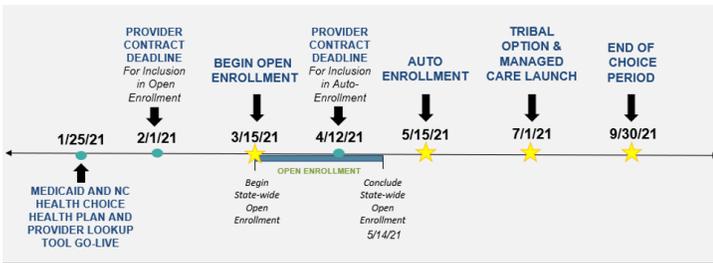
Provider Contracting

In order to be included in the Medicaid and NC Health Choice Provider and Health Plan Look-up Tool, as well as the health plan member-facing provider directories used by beneficiaries as open enrollment begins (March 15, 2021), the Department recommended providers submit signed contracts to health plans by Feb. 1, 2021. In order for a provider's information to be used in auto-enrollment (May 16, 2021), the Department recommends contracts be signed and submitted to health plans by April 12, 2021. If providers are unable to sign contracts by these dates, providers can still continue to negotiate and execute contracts with health plans and be available to provide services to beneficiaries through that health plan after the contract is effective.

Once the contracting process is complete and the health plan has all the necessary information from the provider, it typically takes at least 2-3 weeks to load a provider into the health plan's system and begin showing as an in-network provider. A provider can help expedite this process by beginning to share physician roster information with the health plans in advance of finalizing their contract. This allows the health plans to begin processing this information and be prepared to enroll a provider most quickly.

Providers should contract with health plans in a timely fashion to avoid losing patients when health plans assign

Medicaid Transformation Update – March 2021 Continued



can make the most informed choice for their health plan and primary care provider is a top priority. NCTracks is the “system of record” for provider enrollment data, which is then shared with health plans to inform contracting and provider directories. If provider information is not current, then the data that flows forward to the health plans and the enrollment broker will not be accurate.

beneficiaries to in-network providers. For more information on contracting with a health plan, contact them directly. Contact information for each health plan is available on the Medicaid Health Plan Contacts and Resources web page at medicaid.ncdhhs.gov/transformation/health-plans/health-plan-contacts-and-resources. Questions and answers relating to provider contracting dates are available on the Provider Contracting with Health Plans webpage at medicaid.ncdhhs.gov/providers/provider-contracting-health-plans.

For provider inquiries and complaints regarding health plans, NC Medicaid has created a Provider Ombudsman to represent the interests of the provider community. Provider Ombudsman inquiries, concerns, or complaints can be submitted to Medicaid.ProviderOmbudsman@dhhs.nc.gov, or received through the Provider Ombudsman line at 919-527-6666. The Provider Ombudsman contact information is also published in each Health Plan’s provider manual.

Provider Directory – Medicaid and NC Health Choice Provider and Health Plan Look-Up Tool

The Medicaid and NC Health Choice Provider and Health Plan Lookup Tool is now available at ncmedicaidplans.gov. The provider directory contains all active Medicaid and NC Health Choice providers, including primary care providers, specialists, hospitals, and organizations.

Enrolled providers should utilize this resource now to thoroughly review and confirm the accuracy of their individual and organization provider information as well as the health plans they are contracted with prior to the Beneficiary Open Enrollment period. More information is available [here](#).

Providing the most accurate and complete provider information so Medicaid and NC Health Choice beneficiaries

Provider Resources

NC Medicaid has created several resources to support providers in the transition to Medicaid Managed Care.

Provider Playbook Updates – The Provider Playbook medicaid.ncdhhs.gov/providers/provider-playbook-medic-aid-managed-care has the latest information, tools, and other resources to help providers smoothly transition to Medicaid Managed Care. Visit the Provider Playbook often as resources will be added as they become available.

NC Medicaid Help Center – The Help Center ncgov.servicenow.com/sp_ncmedicaid?id=kb_view_help-center has knowledge articles that providers can search to easily find answers to their questions.

Webinar Series for Medicaid Providers and Practice Leaders – NC Medicaid and North Carolina Area Health Education Centers (AHEC) have partnered to host a series of webinars on the first and third Thursdays of each month to increase engagement with providers, practice managers, and quality managers. The latest schedule, registration and information about previous webinars is available on the AHEC Medicaid Managed Care page available at www.ncahec.net/medicaid-managed-care.

Additional Practice Support – In coming months, NC Medicaid and AHEC will host health plan and EBCI Tribal Option Provider Meet-N-Greets and Virtual Office Hours sessions with a focus on Medicaid Managed Care readiness. Details will be posted as available on the [AHEC Medicaid Managed Care page](#).

In addition to the resources above, providers may find the all of the latest information about NC Medicaid in the [Medicaid Bulletin](#) or by subscribing to the [NCTracks mailing list](#).



2021 Spring Educational Virtual Conference

Reading Between the Lines, Improving Equitable Messaging in Public Health

Tuesday, May 18, 2021

Cost: \$25/members, \$50/non-members

Register: ncpha.memberclicks.net/spring-educational-conference
CHES Credits will be offered for the conference.

Agenda:

9:00 am **Welcome** Mike Zelek, NCPHA President

Keynote: *Becoming Better Messengers to Communicate Public Health*
Gene Matthews, JD, Director, Southeastern Region, Network for PH Law,
NC Institute for Public Health, Adjunct Professor, Health Policy and Management

10:15 am **Break**

10:30 am **Workshop: *Skill-Building to Create More Equitable Messages Using the Foundational Moral Values Framework***
Gene Matthews

12:00 pm **Lunch *Storytelling Without Harm: Telling Strategic and Ethical Stories***
Mark Dessauer, Vice President, Learning Team, Spitfire Strategies

Objectives:

- Describe the value and power of using stories to engage audiences in a strategic manner.
- Identify six different types of stories to use when engaging audiences.
- Explain techniques for creating powerful stories, including both the process of telling stories and the content.
- Understand the ethics of storytelling and how they can change the way they collect, create, and share stories in a manner that is respectful for the protagonist and community.

1:00 pm **Break**

1:15 pm **Presentation: *Planting Seeds of Transformation: Advancing Racial Equity in Local Government***
Kweli Rashied-Henry, DRPH(C), MPH
Racial Equity Officer, Durham County Health Department

2:15 pm **Break**

2:30 pm **Presentation: *Hospital & Community Collaborations Through the Pandemic & Beyond***
Emily Roland, Senior Director, Community Health, North Carolina Healthcare Association (NCHA)

Objectives:

- Share the innovative ways we've seen hospitals engaging with their public health partners in response to COVID-19
- Provide tips for how public health partners can improve collaboration with hospitals and health systems
- Explain how we are engaging partners in this work as a Foundation (messaging, successes, challenges, opportunities, future work)

3:30 pm **Closing** Mike Zelek, NCPHA President



SAVE THE DATE

2021 Fall Educational Conference

October 6-8, 2021

*Connectedness and Equity:
Public Health Creates a Healthier North Carolina*



Crowne Plaza Hotel and Golf Resort, Asheville

Upcoming Important Dates for the Conference:

May 1 – May 31

Nomination period for the NC GSK Foundation Child Health Recognition Awards

May 1– July 12

Submissions begin for the below. Deadline for all is July 12

- NCPHA Scholarships – Associate/Technical, Graduate/Undergrad, Child of Member, WCH Section Scholarship, Robert Parker Leadership
- NCPHA Emerging Leaders Program
- Dr. Ann Wolfe Mini-Grants
- NCPHA Major Awards – Reynolds Achievement Award, Rankin Legacy Award, Distinguished Service Award, Partners in Public Health, All-Star Awards, and the Dr. Sarah Taylor Morrow Health Departments of the Year Award

June 1

Conference registration and hotel reservations begin

Several NCPHA sections also offer awards and scholarships. Please check the NCPHA website and forthcoming emails for more details.



NCPHA

Member Introductions

This issue we meet Public Health Strategist, Honey Yang Estrada, Public Health Director, Rod Jenkins, and Social Work Supervisor, Kim McNeal.



NCPHA Member Introductions



Honey Yang Estrada

Public Health Strategist
Catawba County Public Health

Hometown: Newton, NC

Education: MPH

How long have you worked in public health:

I've worked in healthcare for the majority of my adult life and transitioned to working in our local health department in 2019.

What do you like most about your job:

Working alongside community partners to improve health equity for the community members of Catawba County.

If you could have dinner with three people, who would they be?

The same three people I have dinner with almost every evening – my husband, my daughter, and my son.

If you could change one thing about public health, what would it be? (money is no object)

This one's tough, but definitely to achieve equity.

FAVORITES:

Hobby: Zumba and weightlifting

Food: Anything my mom makes, she's the best!

Movie: Hands down, The Goonies

Song/Artist: You Can't Stop Me by Andy Mineo

Sport/Team: My favorite sport is fitness. My favorite team is definitely the one I practice with every week.

Color: Green

Book: I have so many, but currently reading *Winning the War in Your Mind: Change Your Thinking, Change Your Life* by Craig Groeschel. Phenomenal!



NCPHA Member Introductions



Rod Jenkins

Public Health Director
Durham County Department of Public Health

Hometown: Charleston, SC

Education: B.S. of Business Administration-The Citadel-
The Military College of South Carolina
Master of Health Administration-University of South
Carolina-Columbia

How long have you worked in public health:
10 years

What do you like most about your job:
I enjoy motivating people and assisting them in meeting their goals. I enjoy working with a great team of professionals who care about the community.

If you could have dinner with three people, who would they be?

John Sidney Ashe (my Great, Great Grandfather), Former President Barak Obama, and Eddie Murphy

If you could change one thing about public health, what would it be? (money is no object)

The order of importance in the eyes of our leaders. A global pandemic should not have to highlight the relevance of Public Health. We are here... always have been and always will be!

FAVORITES:

Hobby: Working out (weightlifting, cycling, running, swimming)

Food: Any Seafood-especially Shrimp

Movie: The Shawshank Redemption, Full Metal Jacket, Moana, All Marvel Movies, and The Godfather I & II

Song/Artist: "I Was Made to Love Her"-Stevie Wonder, "The Big Payback"-James Brown, "Never Can Say Goodbye"-Jackson Five--I love music!

Sport/Team: The Dallas Cowboys

Color: Royal Blue and Purely White

Book: *The Kite Runner* by Khaled Hosseini



NCPHA Member Introductions



Kim McNeal

Social Work Supervisor
Rockingham County Health and Human
Services

Hometown: Reidsville, NC

Education: BA Psychology/Certified Case Manager (CCM)

How long have you worked in public health:
17 years

What do you like most about your job:

This job brings something new every day. It gives me the opportunity to help others and constantly reminds me how blessed I am.

If you could have dinner with three people, who would they be?

Mary, the mother of Jesus, Queen Elizabeth, and Dean Smith

If you could change one thing about public health, what would it be? (money is no object)

I would change the perception of public health. I hope that after the pandemic is over people will continue to remember and appreciate the work done every day by public health, not just in times of crisis. I hope that people would realize that public health is for everyone.

FAVORITES:

Hobby: Exercising/Walking, Shopping

Food: Anything chocolate!!

Movie: A Few Good Men (It was the first movie my husband and I saw together.)

Song/Artist: Prince and James Taylor

Sport/Team: UNC Tarheels

Color: Pink

Book: I am honestly not a big reader. I wouldn't call it a favorite but the most moving books I've ever read is a series by Dave Pelzer: *A Child Called It*, *The Lost Boy*: *A Foster Child's Search for the Love of a Family*, & *A Man Named Dave: A Story of Triumph and Forgiveness*

Women's and Children's Health Section

NC Women in Public Health: Three Generations of the Morrow Family Women

WOMEN'S HISTORY MONTH



Dr. Sarah Morrow

The WCH Section wants to celebrate Women's History Month by sharing this story. For more information about Women's History Month please check out: <https://womenshistorymonth.gov/> Thank you to Ms. Lynne Perrin for providing and writing these stories about her grandmother, mother, and herself!

Lois Eunice McKeown: Dr. Lois Taylor: Charlotte Dentist

Lois Eunice McKeown was the youngest of 9 children who decided early on that she wanted to be a doctor. However, her parents who were farmers were not supportive of that idea because they did not want her to run all across the countryside at night in a horse and buggy. As a result, Lois decided that she would become a dentist. After going to school in Gaston county, she packed up and went to University of Maryland where she got dental degree.

Dr. Lois Taylor moved to Charlotte with her two children after divorcing her husband. She opened a dental office in her home in the late 1920's on East Boulevard. Dr. Taylor practiced dentistry in Charlotte for over 65 years.

Sarah Alice Taylor: Dr. Sarah Morrow: Secretary of NC Department of Health and Human Services

Sarah Alice Taylor was born to Dr. Lois E. McKeown and Dr. Frank Taylor. Sarah earned her Medical Doctorate degree in 1944 at the age of 23. She then went to intern at Charlotte Memorial Hospital and was one of the first three women to be accepted into a pediatric residency program at Grady Memorial in Atlanta.

Sarah dropped out of her residency in 1946 in order to marry her college and medical school sweetheart Dr. Thomas Lacy Morrow. After Lacy served several years in the military, they moved to Chester, S.C. where Lacy opened a surgical practice in 1951. Together Sarah and Lacy had six children but during these years, Lacy unfortunately suffered from depression and alcoholism.

Sarah's life in Chester was filled with her children and the children of many residents of the county. This was the beginning of her lifelong work as a champion for children and maternal health and a leader in public health where she went on to become the Chester County Public Health Director.

continued



NC Women in Public Health: Three Generations of the Morrow Family Women

It soon became clear to Sarah that she was going to carry the responsibility for raising and educating her six children. Bernard Greenberg, PhD, head of the UNC Department of Biostatistics, offered Sarah an opportunity to come to Chapel Hill in 1959 and earn her MPH in Maternal and Child Health.

Armed with her MD and her MPH degrees, Sarah accepted a position as the deputy director of the Guilford County Department of Public Health in 1960. She became the Health Director in 1966. This was where she excelled in building her administrative skills. She led their effort to get a million-dollar federal Children and Youth grant to focus on high-risk children. This grant, along with the cooperation of local private pediatricians, allowed for a huge expansion of preventive health services for mothers and babies throughout the county.

In Dr. Morrow's role as a hard-working pediatric Health Director, she wrote to Governor Hunt to give him advice about what should be the qualities of his new secretary of health and human services. This led to Sarah becoming the Secretary of the NC Department of Human Resources (Health and Human Services) under Governor James Hunt from 1977-1985. Dr. Morrow also created the NC Division of Medical Assistance to manage the Medicaid program.

After serving with Governor Hunt for eight years, she left State Government and took a job with Electronic Data Systems, a Texas based computer data company started by Ross Perot. In this job she served as a medical administrator in Indiana, California and then back in North Carolina. In total she worked for about 20 years for EDS until she retired at the age of 84. Dr. Morrow is a mother of six, grandmother of 13 and great-grandmother of five. She is a talented piano player and lover of music and life. She has a great sense of humor and has always enjoyed the beach, the ocean waves and boating. Dr. Morrow is looking forward to celebrating her 100th birthday on July 27, 2021 surrounded by her family in Wilmington, NC.

Ms. Lynne Morrow Perrin: NC Division of Medical Assistance - Chief of Facility and Community Based Services

Ms. Lynne Perrin graduated from UNC-Chapel Hill with a major in economics, class of 1971. Lynne started her career working on a federal project with the health department in Greensboro in 1972. The next year she got a job with the Guilford County Department of Social Services. In 1975, at the age of 25, she became a supervisor; shortly thereafter was promoted to a policy and program administrator position.

Lynne had a special interest in the elderly and in long-term care policy which led her to become the Area Agency on Aging Director for 6 counties. Not satisfied with the fragmented approach in services for the elderly, Lynne and the Director of the local council on aging sought a grant to create an information and referral and care management program for the elderly in Guilford County. Lynne, with the support of local leaders, formed a non-profit company called Community Care Management Systems. Funding was difficult to sustain for this fledgling organization, so with the help of one of her board members, she ended up working for Jim Hunt's Finance Committee as he sought a third term as Governor.

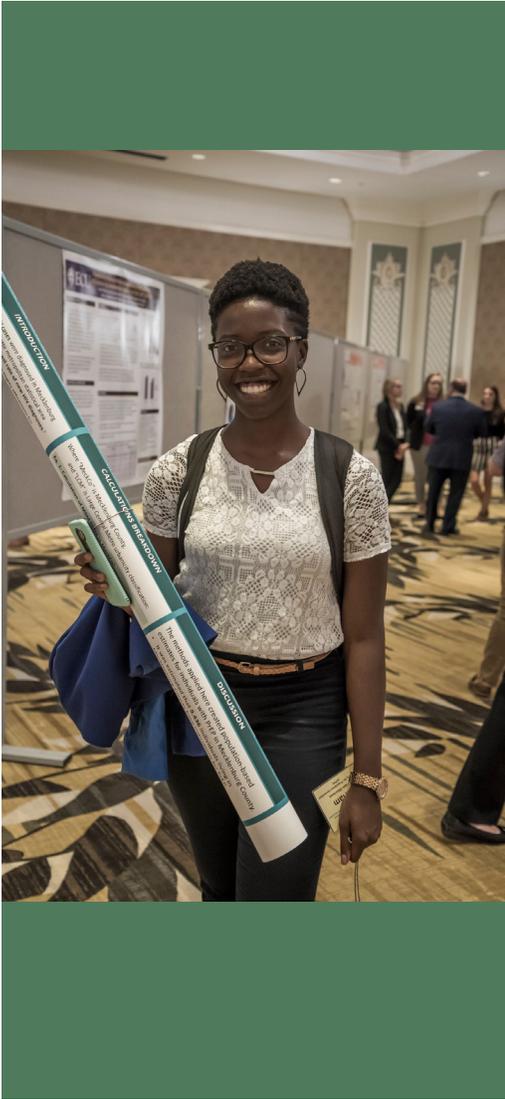
Following the 1992 election, Lynne was appointed as the Assistant Secretary for Aging by then Secretary of the Department of Health and Human Services, former Congressman Robin Britt. She commuted from her home in Greensboro to Raleigh each week staying with her mother during the week which gave her an opportunity to talk with a former Secretary every evening. These talks proved invaluable.

In 1999, Lynne ended up at the NC Division of Medical Assistance as Chief of Facility and Community Based Services overseeing the clinical and Medicaid policies for hospitals, nursing facilities, adult care home, and an array of aging and disability services for the state.

Lynne retired from the state in 2007. After doing some consulting work, Lynne became the Network Director for Community Health Partners which was a care management organization affiliated with Community Care of North Carolina. Ms. Perrin was such a valuable champion for primary care case management that she eventually went to work with Community Care of North Carolina at the state. She is contemplating retirement but is challenged by her mother and grandmother who both worked until they were 84.



Academic Practice Based Research (APBR) Section



As planning begins for the NCPHA 2021 Fall Educational Conference to be held October 6-8, 2021 in Asheville, NC, the Academic Practice Based Research (APBR) section will be releasing their "Call for Abstracts" in April 2021. The APBR Section provides a forum through which researchers, practitioners, and students statewide can interact and work together to improve public health systems and services.

As in past conferences, we will be having three presentation formats:

1. Podium Style: 15-20-minute formal oral presentation during the conference
2. Poster Session: Networking style with informal presentation to visitors of the session
3. Speed Round: 5-minute oral presentation focusing on what you did, what you found, and why it matters to public health

The APBR Section awards prizes for student and practitioner presentations:

- \$100 for Student Podium Presentation Winner, \$100 for Practitioner Podium Presentation Winner
- \$100 for Student Poster Winner, \$100 for Practitioner Poster Winner
- \$50 for Student Speed Round Winner, \$50 for Practitioner Speed Round Winner

Stay tuned for more information on how to submit an abstract, dates for submissions, as well as more details on the presentations themselves which will be posted on the NCPHA Website. We hope to see many of you consider sharing your work with others at the Fall Educational Conference.

Public Health Leaders' Section

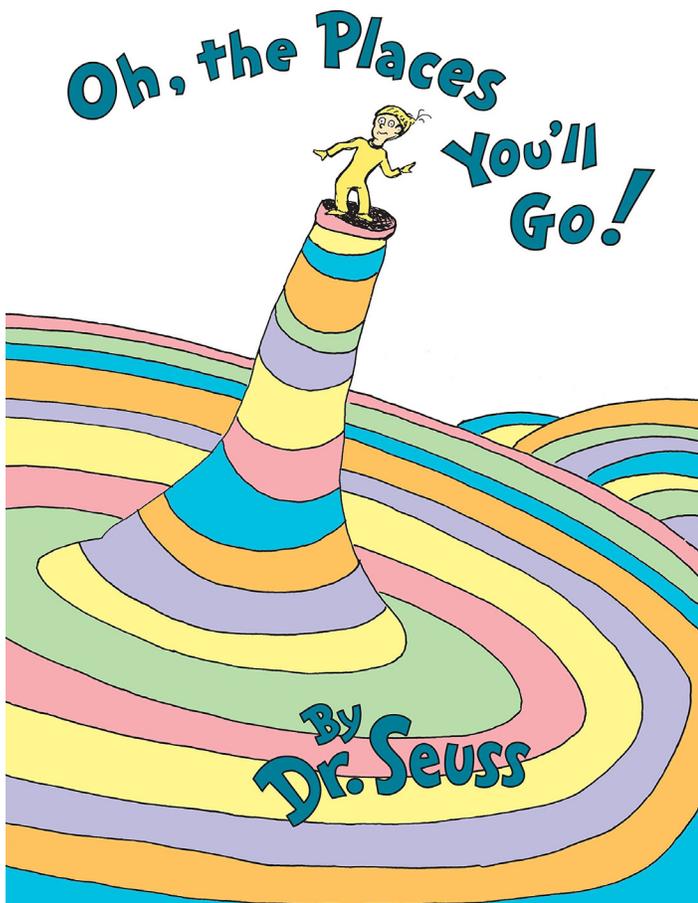
— Pamela Brown, Chair

It may or may not be hard to believe that public health has been in full pandemic response mode for over a year now. This year has tested our knowledge, stamina, courage, fortitude, convictions, assumptions along with a host of other things, but you remained strong and resilient and committed to the communities you serve. Since I have never seen anything like this year, I lack the words to say how much I appreciate your tireless work, the words of encouragement you have spoken to one another, and the amazing way you have overcome constant surprises and obstacles to provide outstanding service to your jurisdictions. The Public Health Leaders section salutes you and your teams. When everyone in the world has had to become a public health practitioner, there has never been a time when public health leaders were more needed, and you answered the call fabulously!!

Get Involved in NCPHA! Read Why You Should!

Encouraging Volunteerism as Professional Development

– Victoria Hudson, EH Section – Membership Committee



Recruitment has been tough enough for the EH Section over the past several years. An assessment of the EH Section membership in 2016 illustrated that membership in NCPHA was slacking for EHS in their first five years and the middle years, 10-15. Here is the take-away message for every new Environmental Health Specialist and should be offered to those mid-career EHS by their supervision: Volunteering is a great way to develop professionally.

I cannot quit "joining." At the light suggestion of collaboration, there I am. These adventures are often time-consuming, taking away precious time from the work, but incredibly fascinating and rewarding. The opportunities are plentiful in a professional association, say, like NCPHA. Belonging to the membership might also mean stepping up into leadership or committee roles. Regrettably, folks want to help, but may not be sure they will have agency support to volunteer, have enough time, or have the confidence to try.

Volunteering in a professional association is the perfect place to develop new skills. Many can testify that a volunteer experience at NCPHA or in a Section leads to some task or chance never, ever thought or spoke. This inevitably helps one to discover a skill or interest. Volunteering in a professional association offers the space to practice skills in a relatively risk free environment, observing others and selecting best practices. It helps one to retain and to sharpen old skills, too.

Serving on a Section or NCPHA committee is a great way to learn group dynamics and teamwork. Group work not only fosters teamwork, but also offers opportunities to learn more about different perspectives. Health Departments will recruit premium well-rounded individuals who have good teamwork and goal setting skills. Serving as a committee chair increases facilitation skills. Program planning for the annual conference and implementing a major fundraising event can develop goal setting, planning, and budgeting skills. Working with the professional association teaches public administration concepts, such as strategic thinking, change management, and conflict resolution.

"You'll get mixed up, of course, as you already know. You'll get mixed up with many strange birds as you go. So be sure when you step. Step with care and great tact and remember that Life's a Great Balancing Act. Just never forget to be dexterous and deft. And never mix up your right foot with your left."

– Dr. Seuss, Oh, The Places You'll Go!

Supervising and training other volunteers simply helps to develop supervisory and training skills. Volunteering in the professional association creates new leaders. Managing a group of volunteers is not the same as managing employees. Why? Volunteer groups are usually a group of peers. They are

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responding more to the leadership than the “management.” Learn to lead by persuasion and innovation.

Volunteering offers incredible networking opportunities. New members should be encouraged to at least volunteer at a time that fits the schedule if nothing more than for the networking, as seen in the Young Professionals group, or individual Sections, like the Environmental Health Section. The new member is only at risk for developing lifelong personal and professional friendships; for learning about job openings; for gathering insider employment information; and for courting great references. Not bad.

Admitting the limitation of how volunteerism is encouraged, this is not talking about being voluntold. As is the case so much in public health and local government, there is this job description item that sneaks up: other duties as needed. There are committees, task forces, consortiums, coalitions, and the such. These are absolutely

necessary to organizational operations. Here and there, a person is just not given the option to volunteer; it happens without the person’s express consent or knowledge, by someone with a higher authority to do it.

In short, volunteering for NCPHA or a Section drives up the value for the member and also benefits the organization. Volunteering can be energizing and renewing. Sometimes it is a welcome break in the routine of work. It gives that satisfaction of knowing the job is well done. If someone feels strongly about something that is happening or not happening in the profession, this gets them involved. The greatest members volunteer for the sustainability of the profession, for those emergent trends and issues, for the membership needs and resources, etc. It is a little infectious. “Joiners” get others to join, who get others to join, to craft solutions to this profession’s problems.



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Nursing Section



This year, the nursing section is proud to encourage the professional development of all public health professionals, but especially public health nurses, through the Certified in Public Health (CPH) certification. The CPH certification is considered the national standard of not only knowledge of public health sciences, but also commitment to the field through continuing

education on emerging and established public health issues. We want to promote and develop public health nurses to the level of leadership, and credentialing is one way to do that. The nursing section has worked with the National Board of Public Health Examiners (NBPHE) to get a great discount on the initial exam for all members of NCPHA—usually \$385, but now \$250 for members. Additionally, we have created a blog to follow and study along as we prepare to take the exam as well, and we encourage you to join our journey through the exam’s ten domains of public health. You can find our blog here ncphncph.wordpress.com.

Our goal is to take the exam in late August or early September so we can celebrate at Fall Educational Conference in October! Our study blog will keep pace with this plan, and we hope we can celebrate your success in getting, or maintaining, your CPH certification this year as well.

If you want to know more about the CPH exam (including eligibility and how to apply), please browse to www.nbphe.org.

Social Work Section

— *LaSonya Tuttle, BSW, Chair*



Greetings from the North Carolina Public Health Association’s Social Work Section. The Public Health Social Work Section has been active for 36 years. Please check out what the Section has to offer at ncpha.memberclicks.net/social-work.

Social Work began as a response to address the needs of the poor. Over the years, it has evolved from not only working with the poor, but to advocate against disparities and social injustices and to advocate for civil and women’s rights, just to name a few. The sole purpose of social work is not to take children from families. You can find social workers in healthcare, corrections, Departments of

Social Services, school systems, mental health and counseling, financial, research, policy, military, and many more areas.

Each March, social workers are celebrated. This year’s theme is “Social Workers Are Essential”. The past year helped prove how much social workers are needed. Many of us had to find new and inventive ways to work with and advocate for our communities. Home and office visits could not happen as usual. We still had to make sure families were safe, basic needs were met, counseling sessions took place, services were accessible, while helping people navigate through and cope with the public health crisis of COVID-19.

Social work is the helping profession. As social workers continue to help improve lives and communities and fight against injustices, please take the time to acknowledge and thank a social worker. We will continue to work for and with the community.

Social work matters. Social workers care. Social workers are essential!



2020 SOCIAL WORK AWARDS



LaSonya Tuttle

Outstanding Achievements Award

Restricted to current NCPHA SW Section members who has made outstanding achievements in the field of Social work in Public Health

Sonja Bohannon-Thacker

Outstanding Contributions Award

Restricted to a non-member of NCPHA SW Section who has made significant efforts to advance the cause of Public Health Social Work



Kelsey Milam

Award for contributions as the 2019-2020 Social Work Section Chairperson



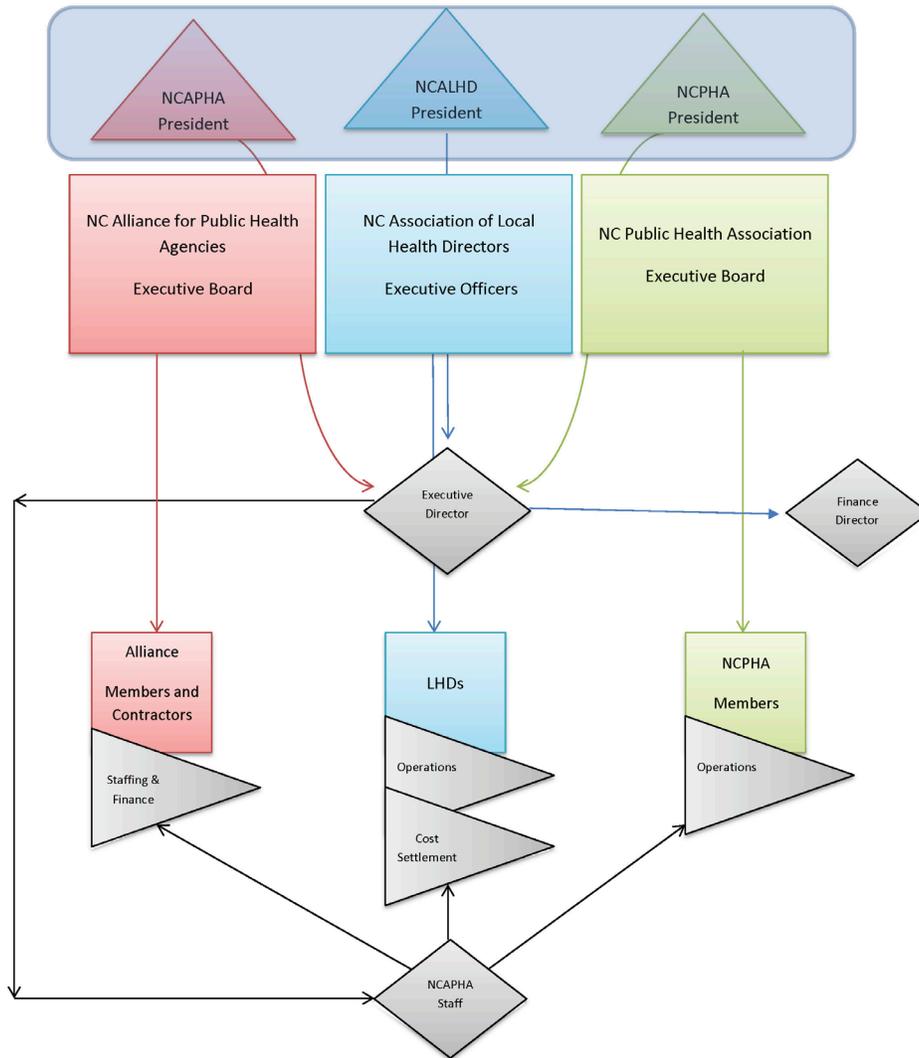
Dolly Huffman-Clayton

Award for contributions as the 2019-2020 CETAC Chairperson



Joint Advancement for Public Health Agencies

Organizational Governance and Management for JAPHA



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