Georgia Board of Public Health

November 14, 2017
Call to Order

Cynthia Mercer, M.D., Board Chair
Roll Call

Robert Harshman, M.D., Board Secretary
Approval/Adoption of Minutes

Robert Harshman, M.D., Board Secretary
Commissioner’s Update

J. Patrick O’Neal, M.D., Commissioner
Community Health Worker Initiative

Christine Wiggins, M.S., CHES/Chronic Disease Prevention, Planning and Partnerships
What is a Community Health Worker?

“A community health worker (CHW) is a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served” (APHA, 2017).

“Assist individuals and communities to adopt healthy behaviors. Conduct outreach for medical personnel or health organizations to implement programs in the community that promote, maintain, and improve individual and community health” (Bureau of Labor and Statistics, 2010).

CHWs are also known as navigators, lay health educators, community health advocate, promotoras, peer support specialists, and home visitors. Some groups, such as public health nurses and community paramedics sometimes refer to themselves as CHWs.
The Role of a CHW

Physicians, Nurses, Case Managers, etc. <-> Clinical Care team
Health System, Payor System <-> Systems
Employment, Education, Housing, Nutrition, etc. <-> SDOH

gap

CHW

Individual
How We Got Started

• Changes in federal payment policy promoting pay for performance rather than value model
• Recognition of the role of CHW models in controlling chronic diseases
• CHW Steering Team began meeting in the summer of 2016
• DPH, Kaiser Permanente, United Way of Atlanta, Morehouse School of Medicine, Grady Health System, ARC, ARCHI
• First CHW Forum- November 2016
  o 130 attendees
  o Presentations on CHW models, discussion of proposed definitions for CHW, baseline training needs
Feedback from first forum resulted in:

• Development of a CHW webpage
  https://dph.georgia.gov/community-health-workers
• Statewide Advisory Board
• Planning for a 2nd Annual Forum in the Fall of 2017
CHW Advisory Board

• Advises the Department of Public Health
• 18 individuals from various sectors (health, public health, academia, CBO, CMO, physicians, nursing, CHWs, social workers)
• CHW definition for Georgia
• Developing a consensus document that includes recommendations on:
  1. Training
  2. Certification
  3. Payment and reimbursement of CHW services
Recommended CHW Definition for Georgia

“A Community Health Worker (CHW) is a frontline health worker who is a trusted member of and/or has a demonstrated working knowledge of the community and individuals served.”
2017 CHW Forum

Nov. 29, 2017, Atlanta

Purpose: To gain input and support on the consensus document currently being developed

Desired Attendees:
- CHWs, physicians, nurses, social workers, and other members of the care team
- Health Systems, Health Plans, Payors
- Public Health, Behavioral Health, Community Health
- Community and Faith Based Organizations
- Academia
- Legislators
Looking Ahead

• January 2018 - create a document for legislators outlining the need for a CHW training and certification program

• Form a CHW Coalition in 2018 (external from DPH)

• Primary goal- bring standardization and credibility to a profession that currently exists, but is often not recognized and is undervalued
Questions?
Georgia DPH
A Regulatory Organization

Sid Barrett, J.D., General Counsel
America’s Health Rankings

Overall Rankings for Women and Children’s Health

Georgia Ranking:
Infant mortality: #43
Maternal mortality: #48

Source: United Health Foundation
Infant Mortality

Source: CDC National Vital Statistics
Infant Mortality Rate by County 2007-2016

Source: DPH OASIS
Infant Mortality by Geography 1994-2016

Infant Mortality Rate by Geography, Georgia, 1994-2016

Source: DPH OASIS
Infant Mortality by Race 1994-2016

Source: DPH OASIS
Top Causes of Infant Mortality In U.S.

1. Birth defects (21%)
2. Preterm/ LBW (18%)
3. Maternal factors (7%)
4. Sleep-related (7%)
5. Other

Interpregnancy Interval 2014-2015

- <1 YEAR: 12.34% Preterm Birth, 87.66% Full Term Birth
- 1 TO <2 YEARS: 9.78% Preterm Birth, 90.22% Full Term Birth
- 2 YEARS: 7.90% Preterm Birth, 92.10% Full Term Birth
- >2 YEARS TO 3 YEARS: 7.67% Preterm Birth, 92.33% Full Term Birth
- 3-4 YEARS: 8.24% Preterm Birth, 91.76% Full Term Birth
- 4-5 YEARS: 8.71% Preterm Birth, 91.29% Full Term Birth
- >5 YEARS: 10.68% Preterm Birth, 89.32% Full Term Birth
Birth by Maternal Race & Ethnicity 2014-2015

Source: College of Public Health, University of GA in partnership with March of Dimes
Maternal Complications 2014-2015

Term
- 93% No
- 7% Yes

Preterm
- 82% No
- 18% Yes

Source: College of Public Health, University of GA in partnership with March of Dimes
Questions?
Workforce Development

Lee Rudd, Chief Workforce Management Officer
Agenda

• Workforce Snapshot
• Evolution of DPH Human Resources
• Workforce Development Goals
• DPH Workforce Management Results
• Workforce Challenges
Current Workforce Projections

- 38% Exit
- 62% Retention

- Career Opportunities/Development
- Compensation/Benefits
- Relationship with Supervisor/Peers
- Retirement

Source: PH Wins Survey (ASTHO)
Potential Workforce

- Want to Positively Impact World
- Desire Work & Life Balance
- Less Hierarchy/Participative Decision Making
- Require Access to Technology

Source: PH Wins Survey (ASTHO)
Evolution of DPH Human Resources

2012-2013
- Compliance Focus
  - Transactions

2014-2017
- Performance Focus
  - Partnering

Current
- Sustainability/Focus
  - Strategic
Workforce Development Goal

21 Initiatives

Reduce Turnover
FYR '16 -16.08%
2017 Workforce Management Results

Implemented Career Paths
  • Career Ladders for Nursing, Environmental, EPIs
  • New Compensation Approach (Compa Ratio)

Accelerated Learning & Development
  • 4 Mandatory Training Classes
  • 21 Instructor Led Classes
  • 41 Web Based Training Classes

Created New Recruitment/Selection Processes
  • Focuses on Branding
  • Use of Social Media (Linked In)
  • Behavioral Interviews
Ongoing Challenges

Funding for Compensation Needs
- Competitive Salaries for Specific Disciplines
- State Lab Workforce
  - Certified Technologists (8% - 10% Below Market)
  - Salary Compression

Workforce Composition Changes
- Growing Diversity
- Boomerang Employees
- Gig Workers (Not On Payroll)
Questions?
Closing Comments

Cynthia Mercer, M.D., Board Chair
The next Board of Public Health meeting is scheduled for Tuesday, January 9, 2018 @ 1 P.M.

To be added to the notification list for upcoming meetings, e-mail: huriyyah.lewis@dph.ga.gov