

CDC - COVID-19 Public Health Workforce Development Funding (American Rescue Plan Act of 2021)

1. Local Health Jurisdiction Name: Fresno County Department of Public Health

Grant Number: 1 NU90TP922174-01-00

2. EPO has provided the State's overall workplan for the PH Workforce Development funding which includes 8 Goals.

Local Health Jurisdictions should review the State's Objectives, Outcomes and Activities for each of the 8 Goals and then insert the LHJs Objectives, Outcomes and Activities that differ from the State's.

Over the past couple of months, CDPH partnered with LHDs to outline the infrastructure needs to address COVID-19 suppression and recovery for the year after June 15th, developing a plan entitled 2021 Beyond the Blueprint. Building on that planning effort, specific scenarios were outlined that described possible changes to the scope of the COVID-19 response which could be used to prepare CDPH and other Departments. Eight strategic planning goals are outlined in this workplan.

GOAL 1: Deploy effective communications and engagement strategy for ALL Californians that aims to reduce transmission by addressing vaccine hesitancy and employs a harm reduction strategy with a focus on hardest to reach populations and communities at risk.		
Objectives	Outcomes	State Activities
Continue and expand comprehensive communications plan through the following objectives: 1. Use surveillance data to inform and update communication messages and modalities. 2. Focus public education & engagement efforts to bolster vaccine confidence and uptake. 3. Enhance public education to employ harm reduction model for ALL Californians. 4. Coordinate community engagement efforts and focus on key messages that support communications objectives for bolstering vaccine confidence, employing harm reduction strategies, and providing direct appointment assistance.	1. Shift the proportion of undecided by at least 5% from the 15% undecided in June 2021 to Supporters (vaccinated or plan to vaccinate) by 9/1/21. 2. Decrease proportion of populations that have negative perceptions of vaccine efficacy. 3. Increase proportion of unvaccinated people wearing masks indoors by at least 5% by August (based on results of planned survey).	1. Develop a department-wide data governance, facilitating a department-wide data strategy, and developing and deploying a unified technology platform that will establish interoperability between diverse data sets in CDPH programs. 2. Implement a Policy and Guidance team to work with policy makers in Agency and the Governor's Office to develop content that is in line with existing and upcoming science and policies. 3. Provide LHDs with current state information and help ensure Californians are prepared for and know how to prevent the virus, plus improve and expand upon existing communications structure. 4. Enhancements to media response, outreach and education, social media, web communications and
Local Objectives: Department of Public Health (DPH) will recruit Department staff, elected officials, leaders in the community, and community based organizations to help with communication, harm reduction strategies, and barrier aspects, as well as countywide education regarding vaccinations.		

Local Outcomes: Increase workforce mask wearing and vaccination for Department and County staff. Department vaccination rate is currently 80%. Increase vaccinations by 5% per year for two years. Current eligible population vaccination rate for Fresno County is 63%. Increase eligible population vaccinations to 75% during the next two years.

Local Activities: DPH will also conduct communication and public speaking training to all staff in order to have staff help disseminate information on the importance of vaccinations, using a data driven, fact based approach. Continue to utilize community based organizations (CBOs) to provide outreach, education, and vaccination efforts.

GOAL 2: Achieve community immunity through effective vaccination strategy.

Objectives	Outcomes	State Activities
<p>1. Plan to administer booster based on CDC recommendation – either J&J requires mRNA booster and/or a third dose of the mRNA vaccine is needed due to waning immunity.</p> <ul style="list-style-type: none"> a. Ensure effective communications to public. b. Ensure easy access by expanding provider network. c. Scale support to LHDs and providers with staffing, mobile clinics, communications, and other distribution resources if needed. d. Stand up Allocation team if needed for equitable prioritization and distribution of boosters. e. Ensure long-term care facilities have access to boosters. f. Develop planning and technical assistance for 	<p>1. Outcome 1: Increase percent of 12-17-year-olds vaccinated with at least one dose to at least 50% by August 30, 2021 and at least 80% by November 30, 2021.</p> <p>2. Outcome 2: Increase percent of all Californians with at least one dose to 80% by November 30, 2021(if vaccination of <12-year-olds approved by then).</p> <p>3. Outcome 3: Reduce race/ethnicity disparities in vaccination rates & increase vaccination amongst African Americans by 10% by October 31, 2021 date.</p> <p>4. Outcome 4: Reduce disparities in at least one dose vaccination rate for 12-years and older HPI Quartile 1 population from 60% to 70% by September 1, 2021.</p>	<p>1. Review publications and other external data regarding vaccine effectiveness.</p>

Local Objectives: DPH will work with CBO partners to ensure that hard to reach communities have access to vaccines including boosters available for vaccination. This includes vaccines to the farm labor community. DPH will also work on effective multi-lingual communication to the public.

Local Outcomes: DPH will work to increase the farm labor community's vaccination rate, including 12-17 year old's, by 10% of the eligible population. DPH will also work towards improving the vaccination rates of Fresno County's 9 lowest vaccinated ZIP codes in HPI quartile 1 to at least 50% of the eligible population.

Local Activities: DPH will target communication and public information to the farm labor community and HPI Quartile 1.

GOAL 3 and Goal 5: Achieve suppression of SARS-CoV2 transmission and COVID-19 outcomes and Goal 5: Mitigate the impact of variants of concern and high consequence (combined)

Objectives	Outcomes	State Activities
<p>1. Surveillance for monitoring, early detection, investigation, and response.</p> <ul style="list-style-type: none"> a. Maintain dashboard of cases, hospitalizations, death, and testing positivity, including race/ethnicity and add data by vaccination status as feasible. b. Continue ongoing modeling of proposed scenarios and policy impact c. Monitor spread of existing variants of concern (VOCs). d. Measure emergence of increased transmissibility and/or virulence of VOCs. <p>2. Develop multi-disciplinary field strike teams (“Cluster Busters”) framework to support Local Health Jurisdictions in managing case outbreak response and increased prevalence of variants.</p> <ul style="list-style-type: none"> a. Utilize existing Testing Strike Team & Contact Tracing structure and adapt to incorporate “Cluster Buster” Framework for deploying contact tracing, testing, and vaccination (including halo) resources jointly. b. Epidemiological support for Local Health Jurisdictions. <ul style="list-style-type: none"> i. Develop epidemiological strike team program to support LHJs/state agencies with investigation and management of outbreaks. ii. HAI Program Infection Preventionist (IP) team to continue to serve as a resource for deployment to healthcare and congregate residential non-healthcare settings (e.g., homeless or evacuation shelters, correctional facilities). iii. Coordinate with Contact Tracing program in launching a link to a virtual agent to distribute contact tracing surveys to individuals who test PCR+, to improve Isolation & Quarantine practices. c. Coordination across teams <ul style="list-style-type: none"> i. Local Coordination Team will coordinate communication with LHJ leadership to identify and confirm the mix of multi-disciplinary teams needed to deploy or engage for technical assistance/resourcing, e.g. Testing, Vaccination, Epidemiological, HAI Program, Contact Tracing. ii. Connect with assigned local coordinator to identify any additional contextual or historical information to increase situational awareness. 	<ul style="list-style-type: none"> 1. Maintain low to moderate levels of community transmission (per CDC levels). 2. Decrease disparities in outcomes between HPI quartiles and race/ethnicity. 3. Maintain relatively lower cumulative death rates per capita in California (e.g.: <10% lower than other large states). 	<ul style="list-style-type: none"> 1. Enhancing the ability to measure the pandemic recovery in near real-time through dashboards and reporting, automated monitoring to increase the COVID applications performance, and streamline message the data exchange and sharing. 2. Continue the work of redirected staff for the last 17 months (since April 2020) to serve as the single point of contact for all Local Health Jurisdiction leadership and key COVID-19 response leads at the city/county level.

Local Objectives: DPH would implement a mandatory training in contact tracing, case investigation, and the incident command system for all DPH employees as well as require two staff members from each County Department to train and hold refresher courses on contact tracing. Select staff will also receive training on DOC and EOC emergency management training to boost overall coverage in the emergency operations center (EOC) and the department operation center (DOC) roles. DPH will also work with local schools to create internships or syllabus for future epidemiologists, emergency management in regards to public health, and environmental health professionals.

Local Outcomes: DPH would increase our staff capacity to 100% trained in contact tracing and case investigation. An increase in interest in students to pursue careers in public health measured by surveys, internships and the addition of student workers on County staff. Establishing the Epidemiology Division within DPH.

Construct and build a training module for contact tracing and an Incident Command System (ICS) which is easy to understand and work through for all types of classifications. Outreach to local schools in a two pronged approach - 1) Recruitment to Public Health through job magnet and exploration programs and 2) work with schools to have districts adopt DPH created syllabus to incorporate into sociology, healthy living or health education classes. Dispatch newly trained contact tracers to immediately assist and reach contacts of positive cases with the hope of mitigating transmission and educating on variant type. A larger contact tracing workforce will allow us to dispatch more people to reach a broader audience which will limit transmission.

GOAL 4: Reduce and drive to eliminate racial/ethnic and sociographic inequities amongst all age groups across the key COVID-19 outcomes listed below.

Objectives	Outcomes	State Activities
<ol style="list-style-type: none"> 1. Continue monitoring of COVID-19 prevention, transmission, and outcome data. 2. Secure and distribute funding for COVID-19 mitigation and recovery. 3. Coordinate and collaborate needed emergency services and resources for COVID-19 mitigation and recovery. 4. Continue support for COVID-19 testing and vaccination to Reduce the number of COVID-19 cases in HPI Q1 and Q2. 5. School resourcing and providing technical assistance: Increase COVID-19 related resourcing and technical assistance for schools to increase safe in-person attendance in HPI Q1 and Q2 communities benchmarked against race and 	<ol style="list-style-type: none"> 1. Reduce racial/ethnic and sociographic disparities in the number of cases to less than 10% by January 1, 2022. 2. Reduce racial/ethnic and sociographic disparities in hospitalizations and deaths to less than 10% by January 1, 2022. 3. Reduce racial/ethnic and sociographic disparities in vaccine rates to less than 10% by January 1, 2022. 4. Reduce racial/ethnic and sociographic disparities in safe, in-person school attendance. 	<ol style="list-style-type: none"> 1. Provide Quality Improvement, Lean and Six Sigma training, Quality Improvement project facilitation, and policy and procedure writing services to increase efficiencies throughout the workforce for CDPH and Local Health Jurisdictions.

Local Objectives: DPH would implement a mandatory diversity training for all staff members in order to understand health inequities and its correlation to COVID-19 and other virus spread. Education on ways to lower barriers for racial, sociographic and ethnic communities.

Local Outcomes: DPH would increase our staff's understanding of racial, ethnic and sociographic inequities.

Local Activities: DPH would implement a training using best practices gained through a review of programs available on racial/ethnic and sociographic inequities.

GOAL 6: Ensure schools are safe for full-time, in-person attendance.

Objectives	Outcomes	State Activities
<ol style="list-style-type: none"> 1. Upkeep of data-informed guidance and school operations support (e.g.: on topics such as masks, testing, ventilation). 2. Prevention, containment, and mitigation support for schools. <ol style="list-style-type: none"> a. Support ongoing CI/CT work on school campus through facilitating Disease Investigation Unit “strike teams” and in coordination with LHJs <ol style="list-style-type: none"> i. Updating Contact Tracing in Schools resources with new 2021/22 School Guidance. b. Provide guidance on mitigation measures (HVAC, internet, etc.) through training and technical assistance including Virtual Training Academy curriculum. 3. Support for vaccination (families and eligible students). 4. Communicate to families that it is safe to return to school this fall. 5. Address disparities in schools reopening and students returning to in-person instruction. 	<ol style="list-style-type: none"> 1. Outcome 1: >95% percent of K-12 schools in CA reopen for full in-person instruction for 2021-2022 school year. 2. Outcome 2: K-12 School districts and systems stay open for in-person instruction throughout the 2021-2022 school year. 3. Outcome 3: Number of school days lost is no more than 10% of average from pre-COVID school years (or something like that). 4. Outcome 4: Ensure at least 90% of students representing racial/ethnic and sociographic populations are attending full-time instruction. 	<ol style="list-style-type: none"> 1. Hire school Immunization Champions. 2. Create virtual training for school staff and Immunization Champions. 3. Enhance school immunization information website for school staff (shotsforschool.org).

Local Objectives: *DPH will work alongside local K-14 school districts to offer onsite vaccination capabilities for the 2021-22 school year for students, faculty, and families*

Local Outcomes: *In vaccination efforts, at least 50% of the eligible countywide student population and 75% of the eligible countywide faculty population to be vaccinated by the end of the 2021-22 school year.*

Local Activities: *Execute a contract with local county office of education and school districts to provide COVID-19 vaccine and influenza shots available on campus either directly through the school nursing offices or through mobile clinics.*

GOAL 7: Ensure health systems readiness for adults and pediatric populations.

Objectives	Outcomes	State Activities
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<ol style="list-style-type: none"> 1. Ensure that hospitals can flex inpatient staffed beds (including pediatric units) 20% to manage potential pediatric surge. 2. Create plans for pediatric patient movement and treatment, as not all hospitals have pediatric floors or currently treat pediatric patients. 3. Create policy regarding when to execute waivers and contract staff (what will triggers be for deployment of contract staff/MOUs?). 4. Coordinate with skilled nursing facilities and other congregate care facilities to ensure they are prepared for potential surges. <ol style="list-style-type: none"> a. Ensure SNFs are prepared to address increased community transmission and potential impact on staff and residents. b. Ensure state facilities are prepared to address increased community transmission and potential impact on staff and residents. c. Ensure Adult and Residential Care Facilities are prepared to address increased community transmission and potential impact on 	<ol style="list-style-type: none"> 1. Adequate beds, staff, and equipment to address surge in the demand for healthcare throughout the state such that no hospital needs to operate under crisis care. Patient movement plans are in place to avoid movement into crisis care. 2. Hospitals are able to meet staffing ratios without requiring staffing waivers and/or CDPH is prepared to issue statewide staffing ratio flexes as defined trigger points. 3. Adequately trained pediatric staff to address surge in pediatric patient needs. Contracts are updated to include pediatric trained staff. 4. Positive SNF and other RCF residents are maintained at their home facility; moving positive residents only when absolutely necessary (i.e., unable to meet medical needs or staffing shortage). 	<ol style="list-style-type: none"> 1. Update the State’s emergency response plans to address potential surges resulting from COVID-19 cases.
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Local Objectives: *Implement policy that will allow the County Health Officer to deputize individuals that are medically trained to provide assistance to local area clinics, hospitals, triage centers, urgent care centers, and health offices to provide for increased workforce liquidity in the case of surges in medical emergency events.*

Local Outcomes: *The County Health Officer under an emergency order would be able to authorize individuals, such as former military combat medics, to assist in the event of surges or mass casualty events.*

Local Activities: *Have Deputy Health Officer work with policymakers in allowing for medically trained individuals with proper credentials who don't typically administer vaccines or provide non-COVID medical assistance in a clinical or triage setting to be able to assist local area facilities in care. This would allow for facility staff to be redeployed to assist in surge or mass casualty events. Set up training by Deputy Health Officer on vaccination administering.*

GOAL 8: Ensure adequate administrative staff to support hiring, contracting, training and grants management.		
Objectives	Outcomes	State Activities

<ol style="list-style-type: none"> 1. Support programs for the recruitment and hiring of COVID-19 staff. 2. Support programs to ensure safety and health for all job duties performed. 3. Coordinate the funding requests and providing oversight for emergency fiscal resources. 4. Ensuring COVID-19 expenditures are paid correctly according to Department of Finance's (DOF) guidelines. 5. Provide direct financial management support services to the CDPH emergency response programs and taskforces. 6. Track and coordinate all CDPH COVID-19 contracts and purchasing. 7. Streamlining cost reporting for the emergency response. 8. Training to programs overseeing COVID-19 funds on how to better manage the various COVID-19 awards to ensure accuracy. 9. Reporting expenditures and spending trends for all COVID-19 funding resources to leadership. 	<ol style="list-style-type: none"> 1. Timely hiring of staff. 2. Timely execution of staffing contracts. 3. Robust onboarding for new staff. 4. Streamlined and accurate cost account reporting. 	<ol style="list-style-type: none"> 1. Hire additional Grant Management staff to assist in the coordination and management of the WF Dev CoAg. 2. Develop and train programs on new streamlined approach on financial management to ease the administrative burden when programs report on monthly expenditures into the new COVID-19 Fiscal Management team. 3. Hire staff that will have a working knowledge of all COVID-19 funding available and maintain the program budgets within their respective program. 4. Ensure all COVID-19 invoices are paid timely and are accurately coded. 5. Establish a new Special Projects COVID Fiscal Unit fully dedicated to COVID fiscal response efforts and will work in coordination with the newly established COVID-19 Fiscal Management team. 6. Track, communicate, and update approved funding allocations; develop funding requests for external approvals from HHS Agency, DOF, and the Legislature; and conduct grant management – including seek COVID-19 related awards and view of what awards can fund. 7. Provide additional centralized contract and purchasing support for the thousands of CDPH purchases and contracts executed under the Emergency Proclamation for COVID-19 Response. 8. Recruit, hire, and train the public health workforce necessary for COVID-19 prevention, preparedness, response and recovery activities. 9. Professional development training for CDPH staff; workforce development and succession planning; and development of classification and pay proposals
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Local Objectives: DPH will perform an audit of internal divisions to determine the feasibility of additional grant funded programs directed at supporting mitigation efforts to maintain department integrity in the event of additional COVID-19 control efforts and scenarios. DPH will review external grants available to continue further department feasibility beyond FY 2024 to strengthen DPH's mission and values to County of Fresno residents. DPH will perform cross training and backup logistical support to provide for an easier and streamlined rapid new employment or change of employment for staff. DPH would also survey County departments and divisions on best quality improvement measures and key performance indicators to maintain a reliable and efficient workforce as well as work to ensure accuracy and precision of department outcomes through quality assurance and quality control mechanisms.

Local Outcomes: DPH will work towards developing a robust and timely training for all current and future DPH staff

Local Activities: Hiring of Two Staff Analysts and one Program Technician to assist in the establishment of a grant management, quality improvement, performance indicators section. Filling of currently vacant and funded Business Systems Analyst to provide cross trained individual and backup internal logistics support. Hiring of Executive Secretary to work with Assistant Director and Deputy Public Health Officer on external workforce development.