# Mitigating the Pandemic and Beyond
## *Serving Target Populations*

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# Agenda

- Overview
- Target Populations
  - Senior Community
  - Long-term Care Communities
  - Homeless Population
  - Homebound Individuals
  - Black and Brown Communities
- Lessons Learned
- Post-Pandemic Landscape
- Questions

# Overview: Baltimore County

Baltimore County Demographics
- Baltimore County has 830K residents
  - Suburban
  - Urban
  - Rural
- Third-most populous county in MD (24 local jurisdictions)
- Third-largest area in MD (~682 square miles)
  - ~598 square miles of land
  - ~83 square miles of water

# Overview: Poverty

- The suburbanization of poverty is one of the most important demographic trends of the last 50 years.

- Poverty rates across the suburban landscape have increased by 50 percent since 1990.

- The number of suburban residents living in high poverty areas has almost tripled in that time.

  - **Unemployment rates increasing in suburbs compared to decade ago**

  - **Suburbs lack the resources (funding/grants) needed to respond to growing poverty**

# Overview: BCDH Mission

Our mission is to promote health and prevent disease through Education, Advocacy, Linkage to resources and treatment. We do that Heart to heart and Home to home.

H**EALT**H

Educate • Advocate • Link • Treat

# Overview: COVID-19

- BC began tracking new virus: December 2019
- W.H.O. named the disease caused by this coronavirus - COVID-19: February 11, 2020

- First Confirmed BC Case: March 12, 2020
- First Confirmed BC Death: March 18, 2020

- Current BC Confirmed Cases: 65,813 06/14/2021
- Current BC Confirmed Deaths: 1,626 06/14/2021

# Overview

## COVID-19 Environment

*Simultaneously running 6 **additional** massive operations*

- **Hot Line**
  - > 58K Calls Responded To 06/14/2021
- **Safety Kit Distribution** *(PPE and educational supplies)*
  - > 260K Safety Kits Distributed 06/14/2021
- **Contact Tracing**
  - > 43K Cases Handled 06/05/2021
  - > 47K Contacts Reached 06/05/2021
- **Outbreak Investigations**
  - 08 Active Outbreaks 06/14/2021
- **COVID Testing**
  - > 104K 06/14/2021
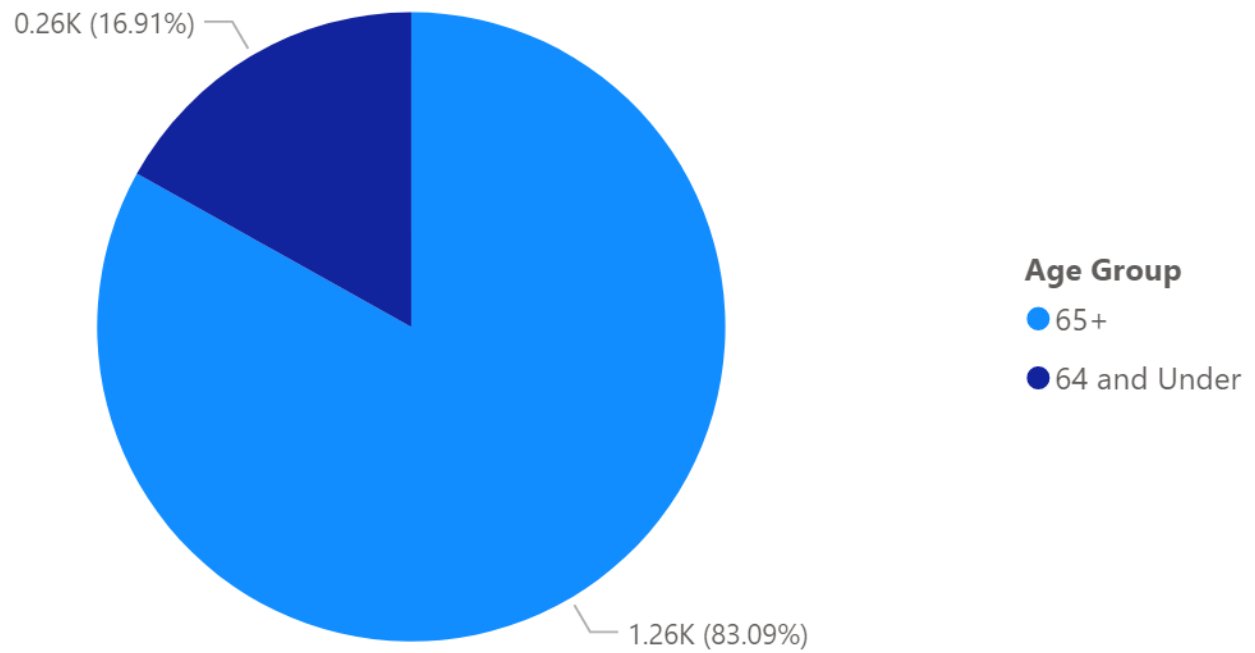- **COVID Vaccination**
  - > 234K 06/14/2021

# Serving Senior Community

- **16.5%** of BC residents are **65 and over**
- High case rate among this population early in the pandemic
- Once vaccine was received, this population was prioritized for vaccination

# Serving Senior Community



Deaths by Age Group

0.26K (16.91%)

1.26K (83.09%)

**Age Group**
● 65+
● 64 and Under

# Serving Senior Community

**Challenges:**

- Navigating registration portal
- Link sharing
- Transportation
- Navigating mass clinic locations

# Serving Senior Community

## Response

- Provided Hotline Number (open 7 days a week)
- Provided COVID email box (to respond to FAQs)
- Direct scheduling done by Office of Aging staff and Health Department staff
- Mounted special clinics for 65 and over
- Contracted with Uber to provide transportation
- Provided "**Disney World Experience**" from arrival to departure at mass clinic sites

# Serving Long-Term Care Communities

- BC is the third largest county in the state, however we have the greatest number of congregate care facilities

# Serving Long-term Care Communities

## Challenges:

- Outbreaks common in congregate care facilities
- Often addressing > 50 active outbreaks in Long-term care facilities at any given time

# Serving Long-term Care Communities

**Response:**

- Provided dedicated Outbreak Team
- Worked directly with facilities to:
  - Develop and Mitigate containment protocols
  - Implement and confirm use of Best Practices
  - Closely monitor active cases | manage day-to-day operations
  - Help identify short-term staffing needs during outbreaks
- Provided critical PPE during national shortage of needed items
- Prioritized staff vaccinations at BC Clinics

# Serving Homeless Population

- We recognized early on that we would need to re-think how we provide services to this congregate care community

# Serving Homeless Population

**Challenges:**

- Homeless shelters are not conducive to social distancing

- Transitory nature of this population make containing spread difficult

- The economic downturn brought on by COVID would increase the number of people who are homeless

- Management of freezing weather shelters during the winter months (November 15th – April 15th)

# Serving Homeless Population

**Response:**

- Provided shelter nurses and onsite testing at shelters
- First County to remove the most vulnerable out of the shelters
- Made hotel placements/meal deliveries for those testing positive
- Avoided shelter outbreaks due to protocols put in place
- Continue to provide testing/vaccinations at shelter sites

# Serving Homebound Individuals

- Recognizing that lack of transportation is not the primary barrier for these individuals meant developing a dedicated system to address their need.

# Serving Homebound Individuals

**Challenges:**

- This population often not ambulatory

- Prone to contracting the virus from family members and caregivers

- Special vaccine transport and waste avoidance concerns *(temperature requirements, timeliness of usage, chain of custody, etc.)*

# Serving Homebound Individuals

## Response:

- Developed dedicated mobile team
- Special mobile unit dedicated for transport
- Special access to scheduling done via Hotline and COVID vax email account
- Avoiding vaccine waste
  - Coordinating vaccinations of caregivers/family members while on site for homebound individual
  - Coordinating close proximity patients

# Serving Black and Brown Communities

- Pre-existing health conditions like diabetes, heart disease and obesity are common in communities of color

- These chronic illnesses were identified early on in the pandemic as contributing factors for more severe cases of the virus

- These factors increased risks of poor outcomes as fear of contracting COVID kept many individuals from seeking

Seven-Day Case Rate (per 100k) Average by Race
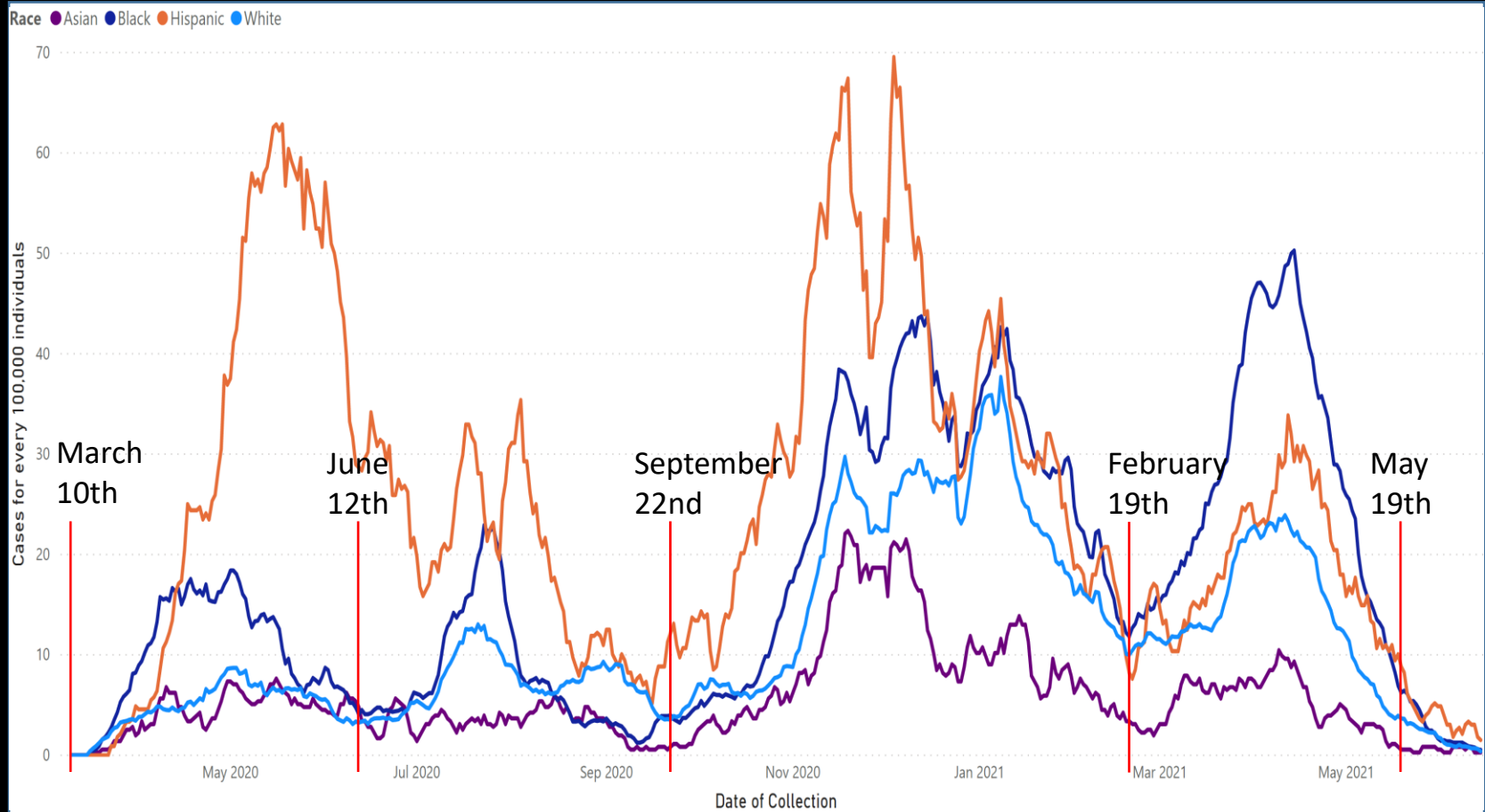
# Serving Black and Brown Communities

**Challenges:**
- Distrust of government entities & processes
- Language barriers
- Hours of operation
- Clinic locations
- Accessing reputable information
- Dispelling myths
- High presence of chronic health issues

# Serving Black and Brown Communities

## Response:

- Instituted Baltimore County's V.O.I.C.E.
  - **V**accine **O**utreach **I**nitiative for **C**ommunity **E**quity
- Provided non-traditional hours for testing and vaccine clinics
- Opened testing and vaccine clinics in Black and Brown communities
- Launched Mobile Clinics
- Conducted grass roots community outreach
- Provided information in different languages
- Provided safety kits and educational information
- Partnered with community leaders and trusted personalities
- Use data to determine COVID hotspots

# Post-Pandemic Landscape

## Vaccines Save Lives!

Areas of high vaccination rates generally have fewer community spread cases, with an analysis of vaccination and case data finding a negative correlation between vaccination rates and community-spread.



**Percent of Eligible Population Vaccinated**

% Vaccinated
<25
>75
No Data/Suppressed

Sources: Esri, HERE, Garmin, FAO, NOAA, USGS, © OpenStreetMap contributors, and the GIS User Community

0 1 2 4 6 Miles
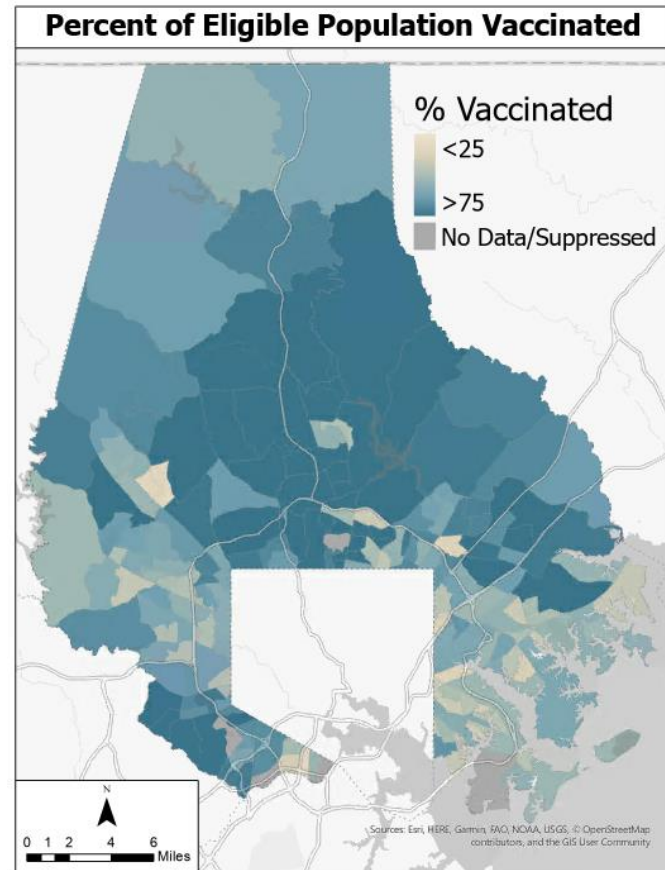
# Post-Pandemic Landscape

**Response:**

- Vaccine **VS.** Variants
- Continue grassroots/community education efforts
- Continue Mobile and Pop-Up vaccination clinics in community hotspots
- Offer Homeless Individuals financial incentives to get vaccinated
- Provide COVID vaccination clinics at all of our Community Health Centers

# Post-Pandemic Landscape

Address the need for affordable housing and food security *(Suburbanization of Poverty)*

- Pandemic associated hardships have increased the housing insecurity

- With summer here and schools closing, many children will be without regular meals

# Post-Pandemic Landscape

**Response:**

- Support efforts to provide affordable housing
- Utilize $68M in funding for Eviction Prevention effort
  - Emergency Rental Assistance Funding (ERAP) from the U.S. Treasury Dept.
- Address Food Insecurity issues
  - Promote the Supplemental Nutrition Assistance Program (Food Stamps)
  - Partner with Food Pantries and Food Co-ops to provide meals in communities
  - Coordinate with 'eating together' programs and other food resources to ensure that those in need have access to nutritious meals

# Lessons Learned

- **Develop** and **maintain** infrastructure **BEFORE** the need arises *(Don't continue to 'build the plane while flying it')*
  - Information Technology
  - Storage |Supplies | Staffing
- Create, nurture and maintain partnerships among special populations
- Be aware of barriers that exist in these communities
- Focus on erasing long-held distrust
- Engage target populations when looking to address health equity issues
- Provide supports that address issues secondary to the public health emergency
- This is a Marathon; Not a Sprint!

# Post-Pandemic Landscape

Opioid Deaths (*Epidemic within a Pandemic*)



**Figure 3. Intoxication Death by Opioid Type**
*2011 through 2020\**
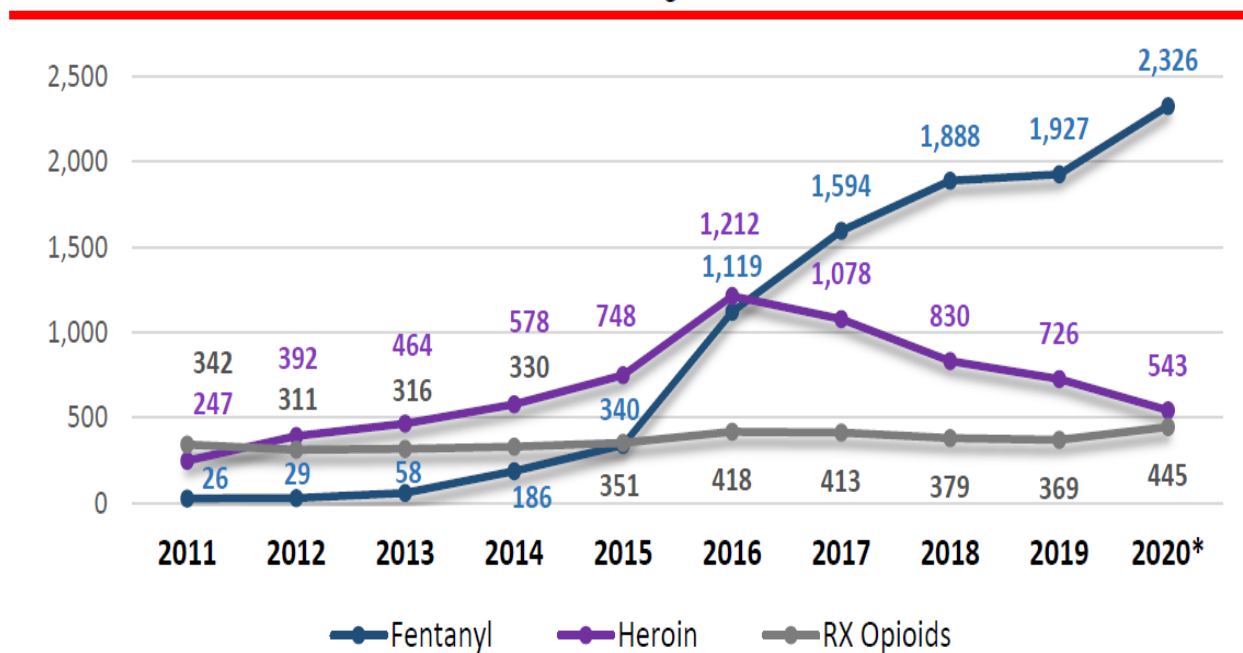
# Post-Pandemic Landscape

Opioid Deaths (*Epidemic within a Pandemic)*

- Prescription Opioid-related deaths increased significantly in 2020
  - 445 Fatal Overdoses (the most on record)
  - 20.6% Increase from 2019
- Fentanyl involved in more Opioid-related deaths
  - 2,326 Opioid deaths involving Fentanyl in 2020
  - 20.7% Increase from 2019

# Post-Pandemic Landscape

## Response:



Overdose Response Training and Naloxone Distribution

Deterra Drug Deactivation Bags

# Post-Pandemic Landscape

## Response:

# Post-Pandemic Landscape

## Response:

| | |
|---|---|
| Provider Training | → | CME Training Academic Detailing |

| | |
|---|---|
| Target Specialized Training | → | Collaborative Systems of Care: MD Primary Care Project; OB-GYN providers implementing |

| | |
|---|---|
| Identify Problem Areas | → | High-overdose geographic areas Prescribers treating clients at high risk of overdose |

# Post-Pandemic Landscape

Mental Health (*Crisis Response, **FY2020***)

- **5,513** BC residents accessed inpatient/emergency department care for suicide/self harm concerns

- Individuals ages18 to 24 represented **12.7% of total visits**

- MDH data show upward trend of intentional self-harm by individuals ages 10 to 19

- BC Child Fatality Review recorded increase in youth suicide deaths (surpassing homicide and accidental deaths)

- Black youth suicide trend line increased above that of white youth suicide trend line
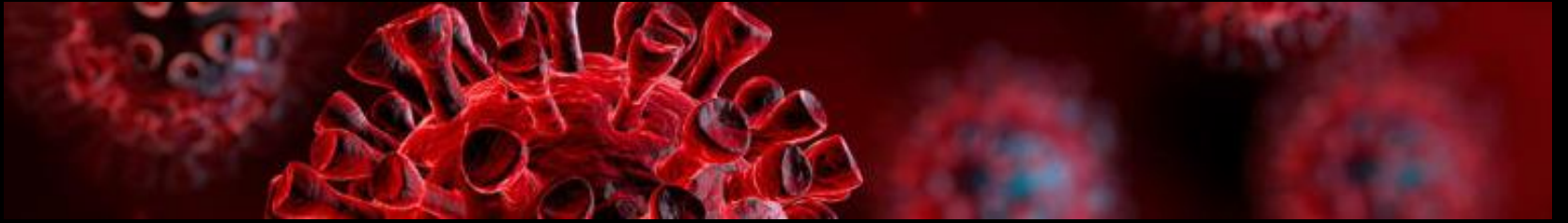
# Post-Pandemic Landscape

## Response:

- Address increased need for public behavioral health services (especially among the elderly and among youth) resulting from these contributing factors:
    - Increased Stress
    - Social Isolation/Loneliness
    - Trauma
    - Environmental Factors
    - Economic Decline/Poverty
    - Bereavement

- Increase the capacity of the Mobile Crisis Team

- Enhance early diversion opportunities at the 9-1-1 Center by using Call Center Clinicians

- Increase the ability to accept community referrals for persons in crisis

- Fill Service Gaps with accessible, coordinated and comprehensive behavioral health services

# Where Are We Now? Tired, Yet Strong!

- Pandemic coming to an end but Public Health remains on the Job!

- Vaccinating 12 and over while preparing for traditional/scheduled *(school and flu vaccines)* vaccines and authorization for 11 and under.

- High Supply/Low Demand requires much greater outreach

- Providing services for Public Health threats without long-term resources and infrastructure
  - Staff |Supplies & equipment |Storage
  - IT

- Suburbanization of Poverty

# QUESTIONS