



CABARRUS
HEALTH
ALLIANCE



2020-2025 Cabarrus Health Alliance Strategic Plan



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Thank you.

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Executive Summary

As the first county health department in North Carolina to serve as an autonomous governmental entity, Cabarrus Health Alliance (CHA) has proven that a bold and innovative approach to public health can be an effective force in improving community health outcomes and in the provision of essential services. Like other health care providers, CHA faces many of the same challenges, including regulatory changes and restrictions, financial limitations, and increasing demand for services by the patients and clients we serve. In addition to these challenges, CHA must navigate a potentially volatile political climate, an increased burden of chronic diseases, and emerging public health trends that are drastically impacted by the social determinants of health (SDOH). The SDOH are conditions in the places where people live, learn, work, and play that affect a wide range of health and quality-of-life risks and outcomes¹.

CHA has created a strategic plan to assist with the continued and enhanced provision of top-quality public health services to Cabarrus County. Further, this strategic plan is designed to enhance CHA's ability to work efficiently and recognize the valuable contributions the agency can provide to others through capacity-building. This strategic plan focuses on four priority areas: (1) Use data to improve health, (2) Develop internal and external practices, programs, and policies that achieve equity, (3) Build and sustain collaborative systems that address social determinants of health, and (4) Transform agency capacity, culture, and practices to achieve excellence.

The implementation of this strategic plan will provide the agency direction and guidance, improve governance and workforce practices, build a stronger infrastructure, increase fiscal diversity, utilize technology effectively, and more efficiently utilize human resources.

We will continue our tradition of providing the highest quality services while evolving as the Chief Health Strategist for improving public health in the region we serve.



Cabarrus Health Alliance

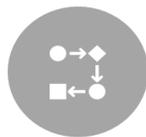
MISSION: To Achieve the Highest Level of Individual and Community Health through Collaborative Action.

VISION: Cabarrus Health Alliance is dedicated to enhancing the quality of life for the Cabarrus County Community.

Public Health 3.0 as Guiding Principles: To address new challenges, public health must take a collective effort to ensure the conditions in which everyone can be healthy. Public Health 3.0 recognizes the need to focus on the social determinants of health in order to create lasting improvements for the health of all in America.² Creating optimum health requires strategic collaboration across all sectors to build a complete infrastructure of healthy communities.



**CHIEF HEALTH
STRATEGIST**



**STRUCTURED,
CROSS-SECTOR
PARTNERSHIPS**



**ACTIONABLE
DATA/CLEAR
METRICS**



ACCREDITATION



**SUSTAINABLE,
INNOVATIVE FUNDING
MODELS**



Cabarrus Health Alliance

Accreditation

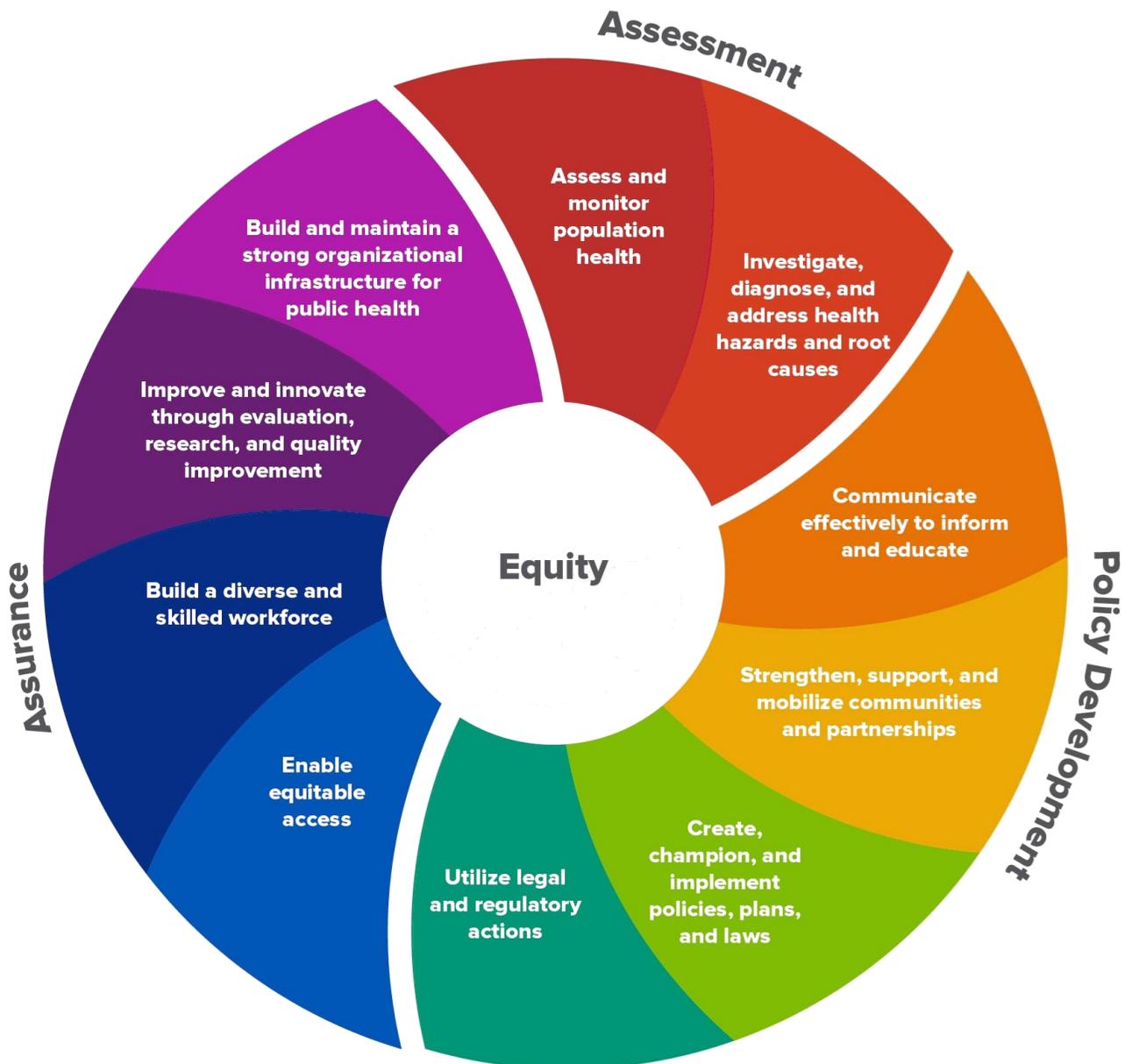
A strategic plan is fundamental to effective management and is one of three prerequisites for any local health department (LHD) seeking national, voluntary accreditation through the Public Health Accreditation Board (PHAB), the national accrediting body for Tribal, state, local, and territorial public health departments. According to PHAB a “strategic plan results from a deliberate decision-making process and defines where an organization is going³. The plan sets the direction for the organization and, through a common understanding of the mission, vision, goals, and objectives, provides a template for all employees and stakeholders to make decisions that move the organization forward.”⁴

Public Health Accreditation Board
5.3.1: Department strategic plan
<p>Provide the most recent version of the health department’s strategic plan. The plan must include:</p> <ul style="list-style-type: none">• Strategic priorities• Goals and objectives with measurable time-framed targets (SMART Goals)• Consideration of agency infrastructure and capacity required for efficiency and effectiveness; for example, information management, communication (including branding), workforce development, financial stability, etc.• The identification of changing or emerging trends that affect the effectiveness and/or strategies of the health department• A description of how the strategic plan links to the community health improvement plan.
North Carolina Local Health Department Accreditation
Benchmark 15: The local health department shall develop plans to guide its work
Activity 15.1: The local health department shall develop or update annually an agency strategic plan that:
<ul style="list-style-type: none">• Includes a review and analysis of factors influencing the health department’s ability to improve the community’s health• Uses local health status data and information to set goals and objectives• Uses community input where applicable• States desired outcomes for each element• Sets priorities, and uses community collaborations to implement activities

Cabarrus Health Alliance

Ten Essential Services

Cabarrus Health Alliance has long strived to provide services to the community based on need, strategic direction, and mandate. On September 9, 2020 a revised version of the 10 Essential Public Health Services (EPHS) was unveiled with the intention to reflect current and future public health practices. CHA uses the 10 EPHS to drive decision making, provide a working definition of public health, and establish a guiding framework for the responsibilities of local public health systems. The 10 EPHS acts as a guidepost to spur innovation by supporting practitioners to implement the tenets of innovation within each service and across the services, in order to best protect the public's health.⁵



Performance Management System

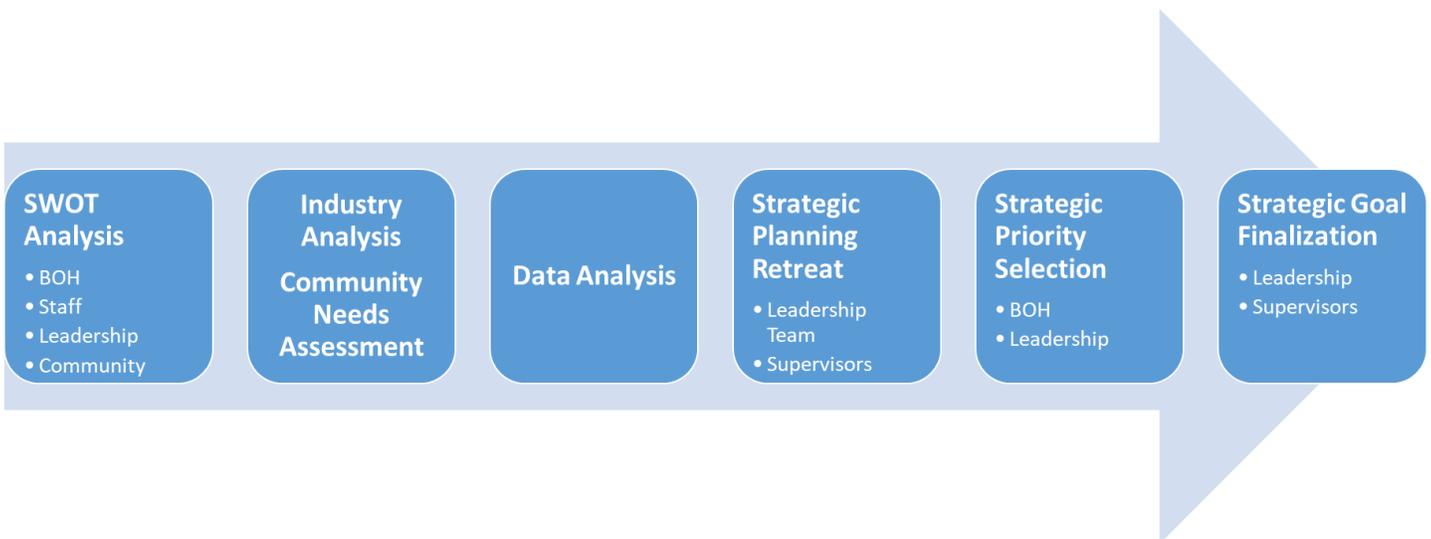
The strategic plan is fundamental to the Performance Management (PM) System. The strategic plan is one part of an overall performance management system with the plan at a 30,000-foot view describing where the agency is going and how it will get there.⁶ The Community Needs Assessment (CNA) informs the Community Health Improvement Plan (CHIP) and the strategic plan. CHA works with community partners to align with CHIP priorities when designing the agency strategic plan. To achieve the agency's mission and vision, (including environmental factors impacting agency performance) the PM System includes the Quality Improvement Plan, Annual Strategic Map and Workforce Development Plan. The PM system is a means of fulfilling the vision through planned actions and improvements at a mid-level overview at a 20,000 foot view. The Department/Program Action Plan from a 10,000-foot view identifies SMART goals and objectives which describes how the daily work will be accomplished. At sea level, CHA's plans integrate all the way down to individual employee contributions, roles, and performance related to the strategic plan.



Strategic Planning Process

CHA's strategic planning process for the fiscal year 2020 to 2025 began in January 2020. The strategic plan is specific to CHA and includes emerging and new initiatives that are informed by public health trends and the community needs assessment.

Staff were engaged at all levels with a shared responsibility to create and implement this strategic plan. Members of the Strategic Planning SWOT Analysis Committee coordinated and facilitated a series of focus groups with CHA staff, CHA leadership, community stakeholders, and Board of Health members. The strategic plan was well informed by conducting an industry analysis and several iterations of the SWOT (strengths, weaknesses, opportunities, and threats) analysis. This process includes goals and objectives that are timely with measurable targets for tracking.



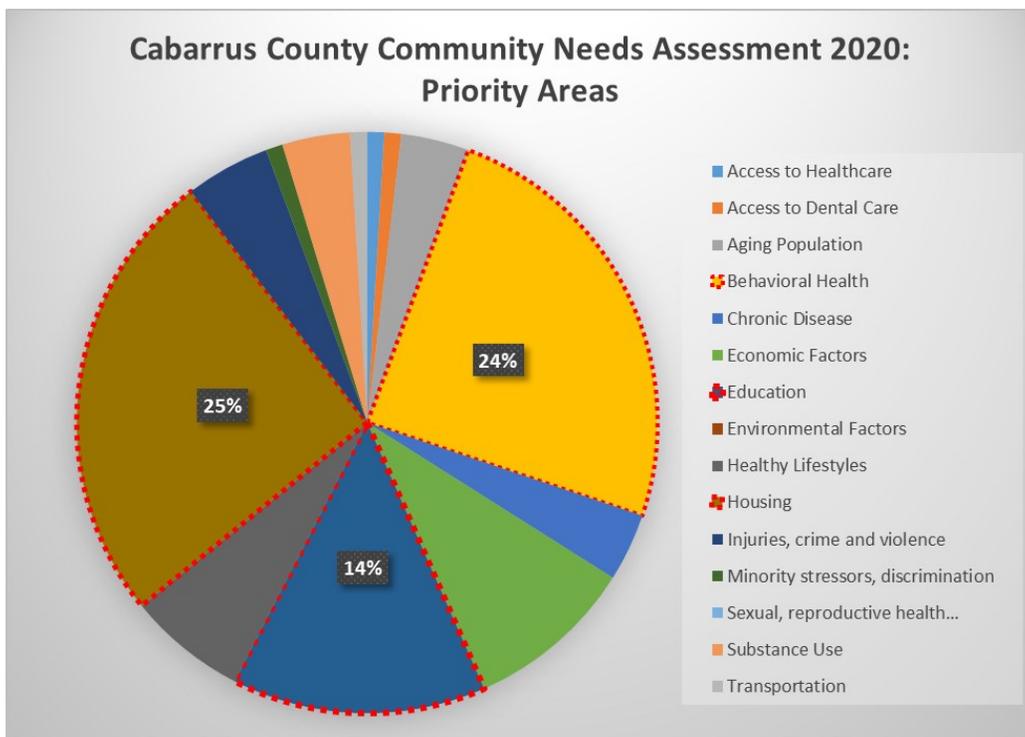
Community Needs Assessment

Cabarrus County, North Carolina

Cabarrus County, North Carolina

Based on 2019 census data, the population of Cabarrus County is 216,453, which is an increase of 19,691 individuals in a mere 5 years (2015). There are slightly more females (51.2%) than males and the majority of the population falls in the 5 – 17 years (26.1%) and 65+ years (13.4%) age brackets. Children under 5 years account for less than one tenth (6.4%) of the total population; adults (18 – 64 year olds) make up 55.0% of the population. The population includes a racial distribution that is 72.4% Caucasian, 19.6% African American, and <5% Asian/Native Hawaiian/Pacific Islander. Persons of Hispanic or Latino origin has steadily increased from 10.1% to 11.1% of the population since 2016. The American Indian and Alaska Native population of Cabarrus County is 0.7%.⁷

Although Cabarrus County was ranked the 9th healthiest county within the Health



Outcomes category in North Carolina according to the 2020 Robert Wood Johnson County Health Rankings Report, there continues to be areas of improvement in need of CHA's efforts.⁸ The Community Needs Assessment occurs every four years and is a comprehensive assessment of the health status of a

Top 3 priority areas identified by focus groups included Housing, Behavioral Health, and Education.

community's citizens and the environment. This report highlights the importance placed on a more comprehensive set of indicators that include the root causes of disease and the social determinants of health. The Healthy Cabarrus partnership completed the Community Needs Assessment process in 2020. The final report will be made available in 2021 and will include the following three issues as priority needs in the community: (1) Housing, (2) Behavioral health, and (3) Education (Early Childhood).

Strategic Planning SWOT Analysis

A SWOT analysis views all positive and negative factors inside and outside of an organization and its ability to drive its mission. SWOT is an acronym for Strengths, Weaknesses, Opportunities and Threats. By definition, Strengths (S) and Weaknesses (W) are considered to be internal factors over which the agency has some measure of control. Also, by definition, Opportunities (O) and Threats (T) are considered to be external factors over which the agency does not have a sense of control.

Members of the Strategic Planning SWOT Analysis Committee facilitated a series of focus groups with CHA staff, CHA leadership, community stakeholders, and Board of Health members. There were a total of 19 SWOT focus groups held, with 53 percent being facilitated in person. The remaining 47% were conducted virtually due to COVID-19 meeting restrictions. Attendees were provided an overview of the 2018-2019 Strategic Map, purpose of strategic planning, focus group engagement rules as well as definitions and examples for each SWOT category.

Overall, SWOT participation was significantly increased by at least 70% for all surveyed groups (117 total participants), whereas participant classifications were as follows: 76 CHA staff, 15 CHA leadership members, 20 community stakeholders, and 6 board members.



Strategic Planning SWOT Analysis

After initial collection of feedback, participants were asked to vote on their top three selections for each SWOT category. In person participants used a dot or check mark system to identify their selections, whereas those engaged virtually submitted their selections via email. The selections with the most votes were tagged and ranked. Once all focus groups were completed, the feedback was themed and summarized given the categories utilized in the 2016 SWOT analysis to allow for consistent comparison.

Themes	Theme Descriptions
Community Partnerships	Community collaboration and engagement with outside agencies and partners
Financial Resources & Service Structure	Funding streams, services, and programs offered as part of our mission and vision of the organization
Employee Relations	Staff satisfaction, communication, and culture among employees
Service Delivery & Customer Relations	Quantity and quality of the services that are offered
Facility and Equipment	Location and tangible equipment within or lacking from the agency
Workforce Development	Training, professional development, and continuing education
Political Climate, Local, and Global Concerns	Political, global health crises, and local community concerns
Quality Processes	Quality improvement, protocols, and accreditation
Employee Benefits	Tangible incentives, wellness, schedules, and health benefits
Talent Recruitment	Well-trained, subject matter expert employees

Strategic Planning SWOT Analysis

The themed data was later assessed for magnitude, feasibility, and seriousness for every focus group category.

Criteria	Measured by
Magnitude of the theme. How widespread is this theme among the agency? How much of a burden is this theme placing on the agency?	Numerator: # of comments on this theme Denominator: total # of comments of all themes
Seriousness of the consequences of the theme if left unaddressed. Would other issues be improved if this theme was addressed?	Numerator: sum # of weaknesses and # of opportunities within that theme Denominator: total # of comments within theme
Feasibility of correcting the theme. Consider the context. Can this issue be addressed with existing assets (technology, staff capacity, resources) within the agency? Is the agency ready for the strategy and will they support it?	Numerator: sum # of strengths and # of opportunities within that theme Denominator: total # of comments within that theme
Based on the Criteria	
Feasible strategies: The # of strengths and opportunities are greater than the # of weaknesses and threats with that theme	
Challenging strategies: The # of weaknesses and threats are great than the # of strengths and opportunities within that theme	

Strategic Planning SWOT Analysis

The chart below provides an outline of the magnitude of the themed responses from the 2016 and 2020 SWOT evaluations.

Themes	Magnitude of all comments (2016)	Magnitude of all comments (2020)
Community Partnerships	8.7%	12.26%
Financial Resources & Service Structure (Inclusive of the 2016 Grants Category)	11.7%	22.49%
Employee Relations	25.1%	12.47%
Service Delivery & Customer Relations	22.6%	17.27%
Facility and Equipment	7.1%	5.86%
Workforce Development	4.0%	4.58%
Political Climate, Local, and Global Concerns	6.4%	10.77%
Quality Processes	5.5%	3.41%
Employee Benefits	5.3%	6.18%
Talent Recruitment	3.4%	4.69%

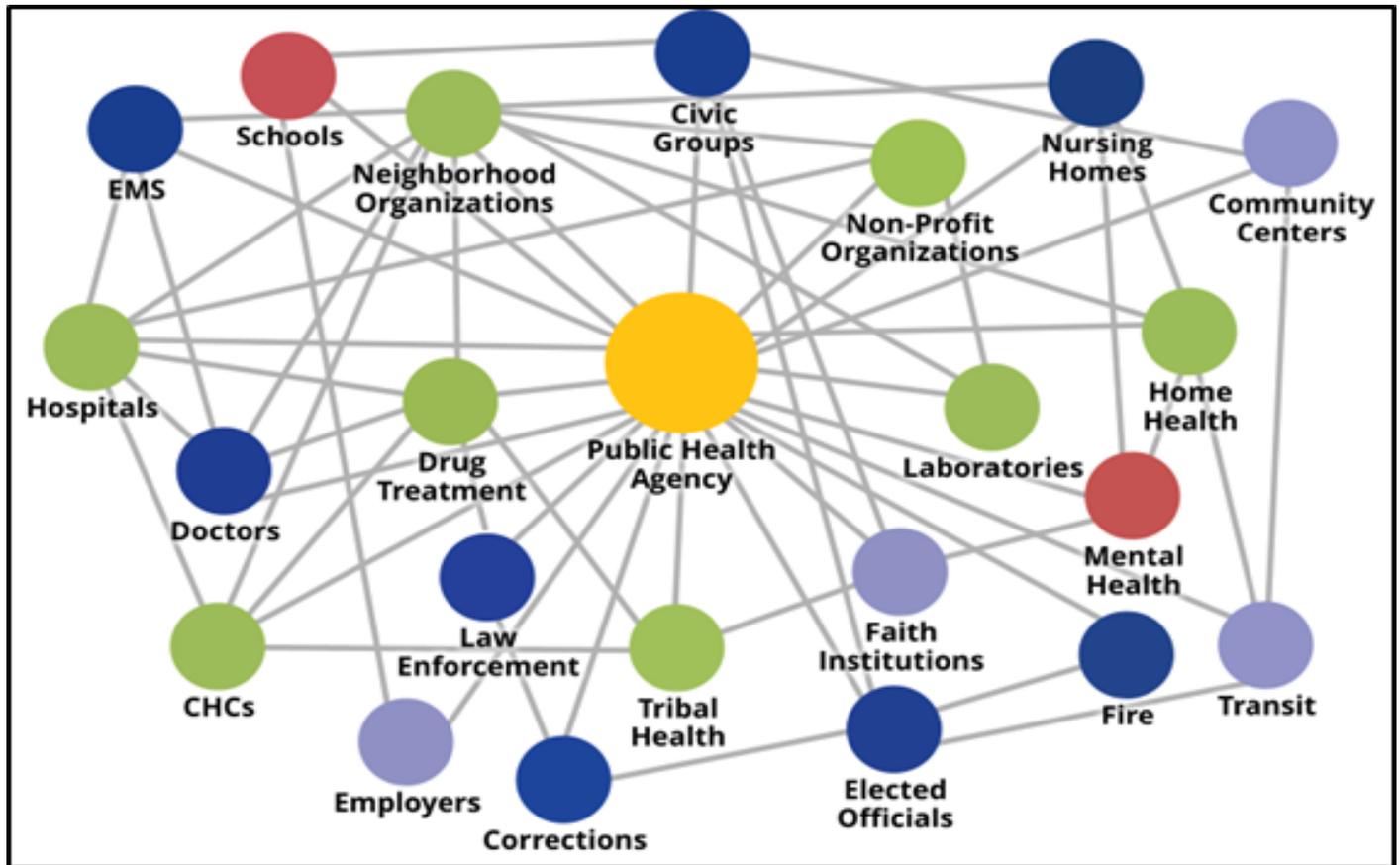
Strategic Planning SWOT Analysis

The chart below indicates the priority areas for each of the 2020 focus groups categories.

Themes	Staff	Leadership	Board Members	Community Members
Community Partnerships		X	X	X
Financial Resources & Service Structure (Inclusive of the 2016 Grants Category)	X	X	X	X
Employee Relations	X	X		
Service Delivery & Customer Relations	X		X	X
Facility and Equipment				
Workforce Development				
Political Climate, Local, and Global Concerns				X
Quality Processes				
Employee Benefits				
Talent Recruitment				

Industry Analysis

According to the Centers for Disease Control and Prevention (CDC), Public Health is defined as the science of protecting and improving the health of communities and populations by addressing health disparities and determinants of health.⁹ Large scale solutions include the promotion of healthier lifestyles, injury prevention, acknowledging health disparities and the detection, prevention and response to infectious diseases.



CDC mapping of the public health system

Several factors affect the availability and success of public health programming such as funding, politics, and partnerships. In order to best serve the community, CHA continues to create innovative avenues of funding in response to scarce public health resources and competition for limited dollars. Effective programming and funding is not possible without cross collaboration between community partners. The CDC encourages local health departments to collaborate with community entities in what is known as a ‘public health system.’ Public health systems are defined as “all public, private, and voluntary entities that contribute to the delivery of essential public health services within a jurisdiction.” This concept ensures that all entities’ contributions to the health and well-being of the community are recognized in assessing the provision of public health services.

Industry Analysis

Public Health Trends

In the last century, national leading causes of death have transitioned from infectious diseases such as tuberculosis, polio, and measles to largely chronic diseases (heart disease, cancer, stroke, etc.) and unintentional injuries (motor vehicle accidents, poisoning, etc.). Social factors (education, employment, and housing) and health behaviors (physical fitness, healthy eating, etc.) affecting and contributing to poor health are now being recognized as root cause of these chronic diseases. In addition, the link between race and health outcomes is now better understood and accepted.



- **National Trends**

1. Heart Disease
2. Cancer
3. Unintentional Injuries
4. Chronic Lower Respiratory Disease

- **North Carolina Trends:**

1. Cancer
2. Heart Disease
3. Unintentional Injuries
4. Chronic Lower Respiratory Disease

NC Healthy 2020 Goals

Areas that have improved:

- Overall life expectancy
- Tobacco use among adults
- Rate of new HIV infections
- Mortality rates for cardiovascular disease

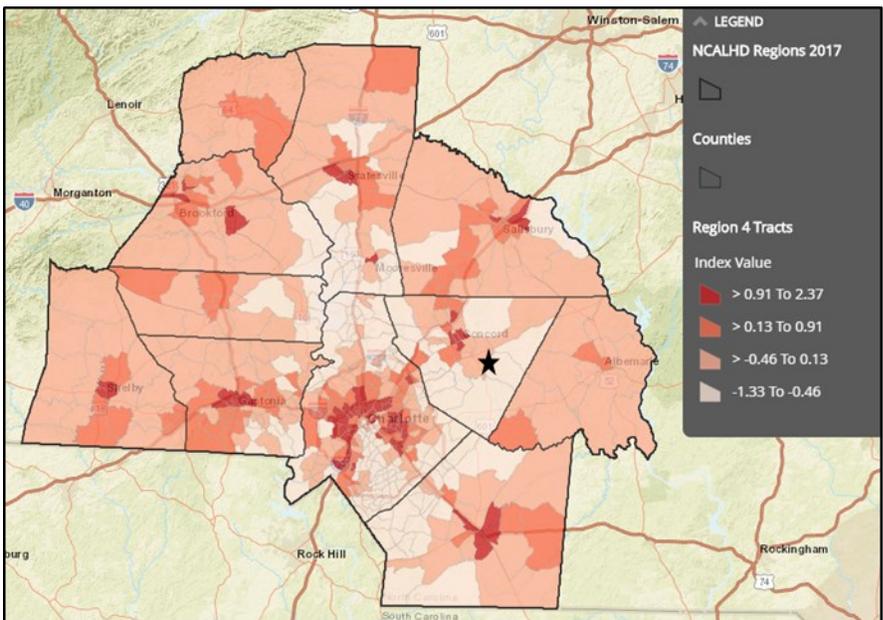
Areas that have worsened

- STD rates among youth
- Unintentional poisoning mortality (opioids)
- Affordable housing
- Tobacco use among youth
- Infant mortality disparities among Black and White mothers

Industry Analysis

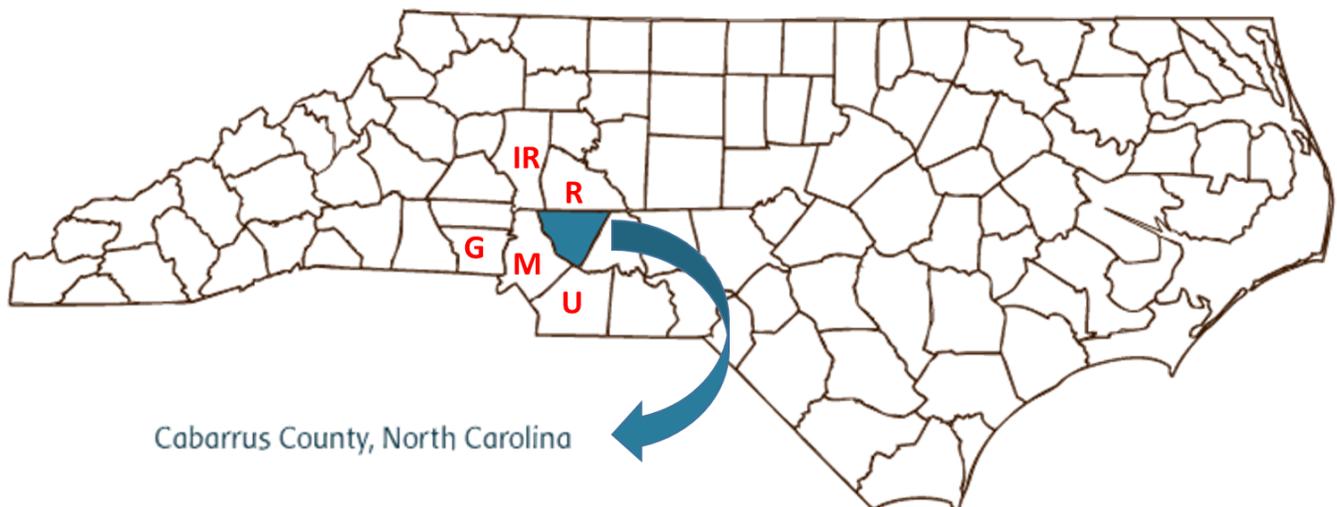
Public Health Trends

Among the health disparities that residents of North Carolina face, minorities and people of color are disproportionately affected. According to the 2018 North Carolina Health Equity Report, racial and ethnic minorities fared worse than their White counterparts in many categories including: income, education, employment, HIV and Chlamydia infection rates, and the ability to access a physician for many services including prenatal care.¹⁰



Overlay of the 12 social determinants of health maps for Region 4. Star indicates Cabarrus County. Created by the North Carolina Center for Health Statistics.

Cabarrus County is part of a group of counties in North Carolina known as Region 4. Higher index values indicate census tracts with the highest disparities among the social determinants of health.



Industry Analysis

Chief Health Strategist

As Chief Health Strategist, CHA will lead Cabarrus County's health promotion efforts in partnership with leaders in widely diverse sectors.¹¹ Our goal as a public health agency is to minimize duplication, and focus on collaboration. CHA is the only entity in the county that focuses exclusively on public health, although it is not a part of county government and does not receive the majority of its funding from the county.

To maximize resource utilization, as a Chief Health Strategist, CHA is a convener of partners. CHA "emphasizes catalyzing and taking actions that improve community well being thereby playing a vital role in promoting the reorientation of health system towards prevention and wellness".¹¹ Various organizations offer similar services; however, CHA focuses on residents in the community who have limited access to essential public health services that they may not receive otherwise. Though some CHA clients have private insurance, most are

uninsured, underinsured, or have Medicaid.

Collaborators include: local healthcare organizations that accept Medicaid, non-profit organizations, and private testing companies.



Atrium Health Cabarrus - Formally known as Carolinas Healthcare System NorthEast located in Concord, North Carolina. The hospital has more than 400 beds and 1,100 physicians on site. Historically, an executive from Atrium Health Cabarrus has held a seat on the CHA Board of Commissioners. Atrium Health Cabarrus has comprehensive services that meet needs of Cabarrus County residents, some of which overlap with services that are currently available at CHA. In addition, since the Affordable Care Act was enacted and significant changes took effect in 2014, many primary care practices that have been purchased by Atrium Health Cabarrus are now accepting new patients with ACA or Medicaid.

Private Physician Practices - CHA collaborates with private dental and primary care practices that accept Medicaid for children and adults. Health providers who may operate under Atrium Health, Novant, or through private ownership often offer another option for the Medicaid/Health Choice population for primary care services, including pediatric services.

Industry Analysis

Federally Qualified Healthcare Centers (FQHC) - The Cabarrus Rowan Community Health Center (CRCHC) has two locations in Concord (Logan and McGill) and two locations in Rowan County (nearby China Grove and Northern Rowan). Community Health Centers are heavily supported by the federal government and must be located in an area of high need, provide services to all people regardless of their ability to pay, and provide comprehensive services including primary care, mental health, and oral health. Services are provided to children and adults with Medicaid, Health Choice, Medicare, private insurance, and those who are uninsured. Community Health Centers receive a higher Medicaid reimbursement. CRCHC collaborates with CHA for its Medicaid/Health Choice population. These services include physicals, sick care, and chronic disease management. For families who wish to have all of their medical care at the same facility, they may choose CRCHC for their medical needs.



Community Youth Services - There are several community youth services in Cabarrus County.



The Memorial YMCA has strengthened the families of Cabarrus County since its founding in 1908. With three locations in Kannapolis, West Cabarrus and Harrisburg, the Y focuses on youth development, healthy living and social responsibility. Many of the youth services create community development efforts including collaboration with schools, youth and teen programs, and healthy living programming.

KANNAPOLIS YMCA Many families who may have adequate financial resources may choose these options for their healthy living and youth programming needs.

Private Environmental Health Specialist and Testing Companies - 15A NCAC 18E now allows for individuals to become an Authorized On-site Wastewater Evaluator (AOWE) who is credentialed to perform soil evaluations and submit their findings and system designations to the LHD/CHA for acceptance.

Collaborating with Private companies ensure citizens are now provided the option of using county resources (non-profit/CHA) or a private business for testing purposes. The private AOWE is not licensed, so standards for delegation are not as rigorous; however, the private AOWE will not have the overall public health interest as their main priority.



2020-2025 Strategic Priorities



Use Data to Improve Health



Develop Internal and External Practices, Programs, and Policies that Achieve Equity



Build and Sustain Collaborative Systems that Address Social Determinants of Health



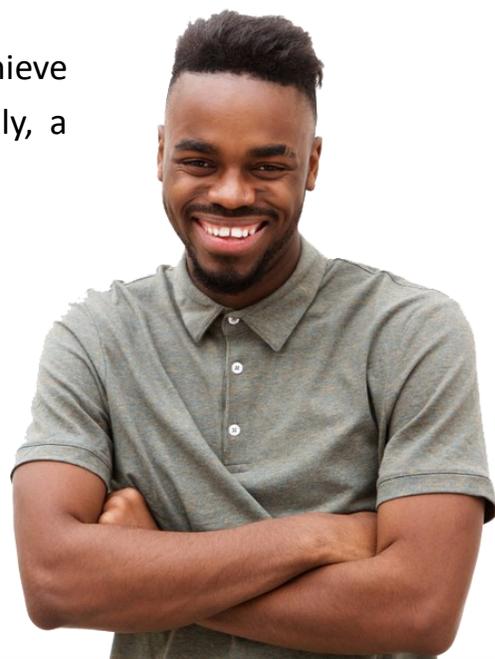
Transform Agency Capacity, Culture and Practices to Achieve Excellence



Use Data to Improve Health

The intent of this strategic priority is to use data to drive actions that lead to improved health outcomes. At Cabarrus Health Alliance we believe that an organization’s ability to generate value is dependent on how effectively it can unlock the power of data and generate insights by connecting, combining and securely sharing data with collaborative partners and regional counties.

Cabarrus Health Alliance is dedicated to using data to achieve better, more personalized health outcomes and ultimately, a shift towards prevention rather than treatment.



Goal 1	Goal 2	Goal 3
Create a public facing data repository to inform the community and enhance decision making	Use an equity lens for data collection, analysis, use and dissemination	Make strategic decisions and create work environments that foster the data integration, sharing, and analysis necessary to support better health outcomes

Develop Internal and External Practices, Programs, and Policies that Achieve Equity



Cabarrus Health Alliance is dedicated to creating a more equitable and inclusive environment. The U.S. Department of Health and Human Services defines health equity as attainment of the highest level of health for all people.¹⁰ To get a better understanding of how CHA can improve its ability to further embed principles of equity and inclusion we found that clear and consistent communication of the commitment to equity and inclusion and the ownership of these three goals by all employees is the first step. Our goals are not designed as a “one size fits all” equity and inclusion initiative; we understand that each department/program has its own distinct personality and culture. Therefore, each department/program will develop their own objectives for each goal.



Goal 1	Goal 2	Goal 3
Ensure equitable access to services, programs, opportunities, and information	Transform our workplace to be inclusive and equitable for employees from marginalized and underrepresented communities	Integrate diversity, equity, and inclusion within our work to continuously improve the health of our community



Build and Sustain Collaborative Systems that Address Social Determinants of Health

Cabarrus Health Alliance realizes that there must be a coordinated, cross-sector approach to address the social determinants of health and the advancement of health equity. The CDC has reported that social determinants of health- the social and economic factors that impact health- accounts for up to 75% of health outcomes. Various focus groups, the SWOT analysis and community input lead to the creation of these four goals. CHA will use community collaboration and engagement to achieve all four goals.



Goal 1	Goal 2	Goal 3	Goal 4
Lead the development of Community Health Improvement Plan (CHIP) based on the identified priority needs	Align programs, and services with the CHIP to ensure staff are engaged and actively involved in the plan development	Expand and maximize community partnerships to effectively address social determinants of health	Align and integrate public health programs to address social determinants of health

Transform Agency Capacity, Culture and Practices to Achieve Excellence



In order to operate and achieve excellence in a forever changing climate, Cabarrus Health Alliance recognizes that strategies and priorities need to be in place to cultivate cultural and organizational transformation. The five goals associated with this priority area ensure CHA’s dedication to create optimum wellbeing for our staff, patients, clients, and community.



Goal 1	Goal 2	Goal 3	Goal 4	Goal 5
Adopt Public Health 3.0 strategies as guiding principles to ensure CHA is prepared to respond to community needs this decade	Maintain a culture of quality improvement to advance departmental performance	Adapt and adopt staffing models and funding sources that reduce the number of positions and programs that are short-term and grant funded	Expand CHA capacity to include alternative service delivery and outreach models that improve access to care	Enhance the existing workforce development plan and program

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