Partnerships in Times of Crisis

Lessons Learned from COVID-19 Response Efforts in NC

Presenters



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About NCFHP





Summary NCFHP's COVID-19 Response



Evaluation Methodology



Lessons Learned from Partnership Strategies



About the North Carolina Farmworker Health Program



Our mission is to improve the health and well-being of agricultural workers and their families by providing funding, training and guidance to a statewide network of partners.

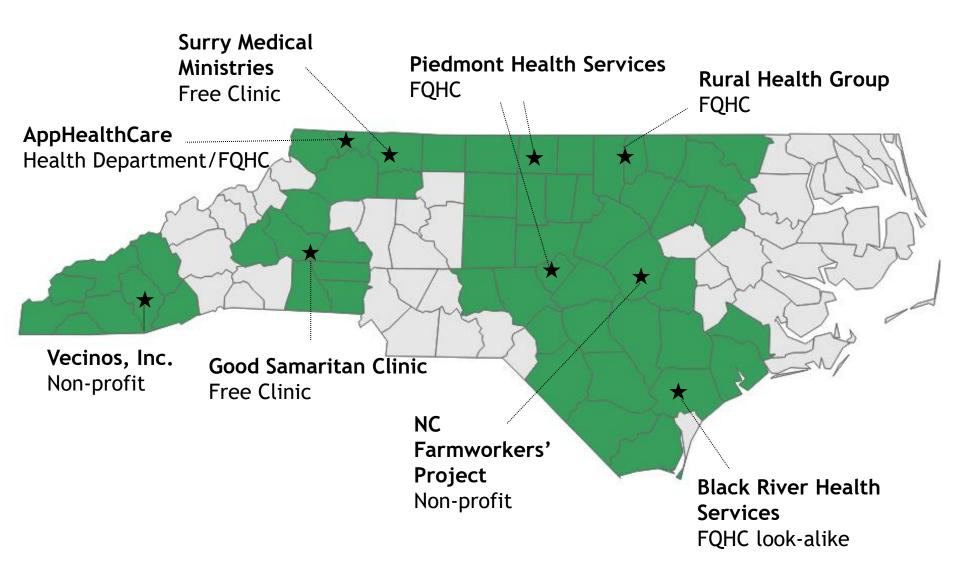
NCFHP Program Overview

- HRSA BPHC-funded Migrant Health Voucher Program
- ▶ 11,987 patients served in 2022





Partner Sites



Learning Objectives



Resources State agencies can provide to support emergency response work of farmworker-serving organizations



Practical techniques for evaluating programs



Strategies for successful collaboration in emergency response

NCFHP's COVID-19 Response



- Communications and virtual training
- Internet connectivity and digital inclusion
- Outbreak technical assistance
- Partnerships at the state-level
- County-level local teams
- Reception Hub



Statewide Partnerships

- NC Community Health Center Association
- NC Department of Labor
- NC Agromedicine Institute
- NC DHHS-Communicable Disease Branch
- NC Cooperative Extension
- NC Department of Commerce
- NC Growers Association

Local Teams

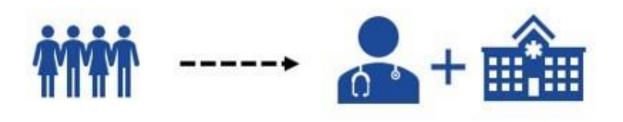
Core Team

- ➤ NC Cooperative Extension
- ➤ Local Health Department
- ➤ Migrant Clinics

Additional Members

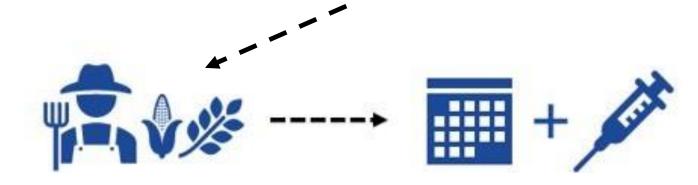
- Community Health Clinics
- Communitybased organizations
- Community Health Workers
- Vaccine providers
- Faith-based organizations

Vaccination Strategy



Local teams assemble

Identify vaccine providers



Contact farmers

Coordinate vaccine events

State Resources in Support of Local Teams



County profiles



Communication channels



Meeting facilitation



Interpretation services

Evaluation Methodology

- Evaluation Committee
- ✓ Create logic model
- Purpose of evaluation
- Develop evaluation questions
- Identify stakeholders
- Select methods for data collection



Choosing Evaluation Methods

Methods:

- Online survey
- In-person survey
- Focus groups
- Interviews

Turn to the person next to you and discuss:

- What data collection methods have you used?
- Which ones have worked well for you?
- What has not worked well and why?

Considerations for Choosing Evaluation Methods

Sample size

Time available for data collection and analysis

Richness of data

Surveys vs Interviews/Focus groups

Cultural considerations

 How Latinx staff prefer to give feedback

Choosing Evaluation Methods

Mixed methods: Qualitative & Quantitative

Interviews Statewide partners

Focus groups
Outreach workers

Online survey | Local team members

Evaluation Question

To what extent have NCFHP's COVID-19 response efforts been successful in supporting local response and developing collaborations to mitigate the effects of the COVID-19 Pandemic for NC Farmworkers?

Data Collection

Local Teams Questionnaire

- Sent to 413 contacts
- Two rounds of data collection
- Total responses: 92 (22% response rate)

Purpose:

- Learn experiences of organizations with their counties' Local Team
- Assess NCFHP's role in supporting vaccination and prevention efforts
- Assess NCFHP's role in supporting collaborations at county level

Data Collection

Key Informant Interviews with statewide partners (5/25-6/10)

- 8 invitations to partners
- ▶ 6 completed interviews

Purpose:

- Learn how NCFHP worked well and areas for improvement.
- How their agencies' collaborations changed because of the coordinated efforts.

Data Collection

Focus Groups with Outreach Staff from NCFHP supported sites 10/5/22

- ▶ 3 focus groups
- 24 outreach workers

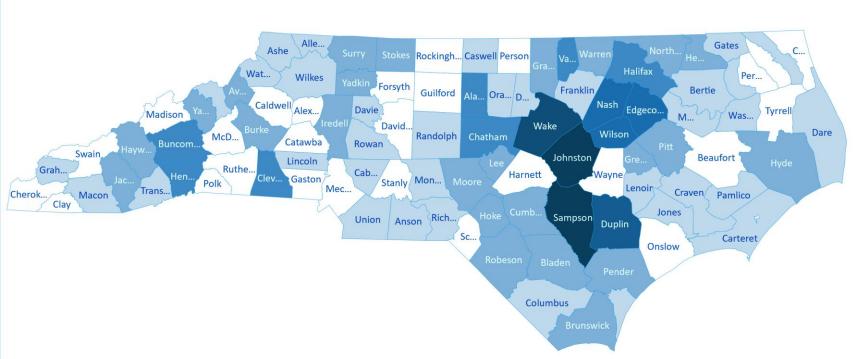
Purpose:

- Understand how well NCFHP provided training and support to outreach staff
- Understand to what extent NCFHP's coordination helped establish/strengthen local partnerships.

Local Teams Questionnaire Respondents by Role

Role	N	%
Cooperative Extension Representative	36	39%
Local Health Department Representative	29	32%
Farmworker Health/Migrant Clinic Outreach Worker	15	16%
Community Health Worker	4	4%
Community-Based Organization Representative	4	4%
Community Health Clinic Provider	3	3%
Other	1	1%
Total	92	100%





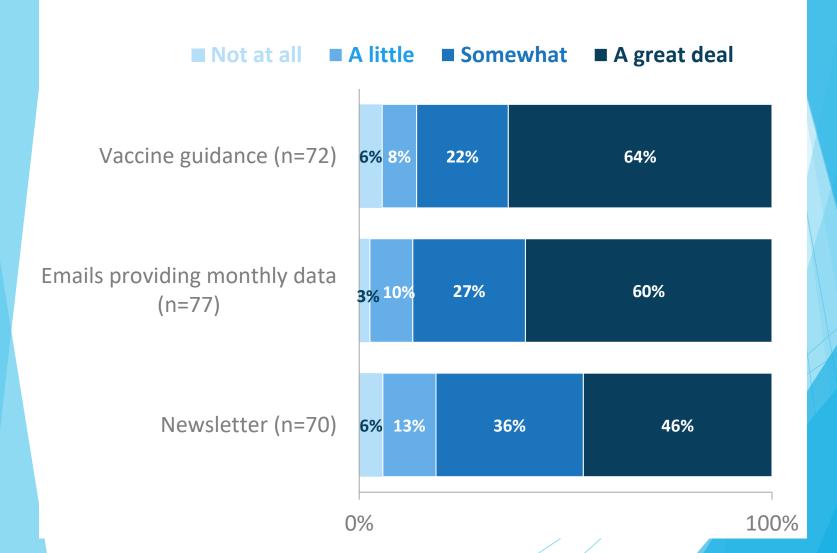
73 counties identified by respondents as primary counties of Local Team participation.

Responses from Counties

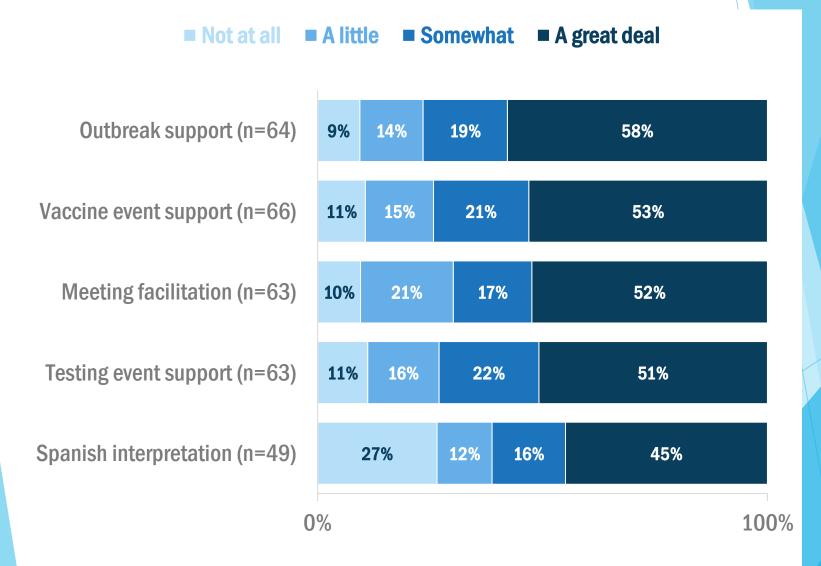
- Responses from 73 counties
 - Includes 19 responses that identified a service area (multiple counties) as primary county not an individual county.
- Five Counties (Duplin, Johnston, Sampson, Wilson, Wake)
 - These counties had responses from Cooperative Extension, LHD and Farmworker Health Clinic/Outreach Worker
 - Identified as priority counties

Feedback on support provided to Local Teams

Over 60% of survey respondents rated vaccine guidance and email updates from NCFHP to be a *great deal* helpful



Over 50% of survey respondents found activities coordinated by NCFHP to be a *great deal* helpful





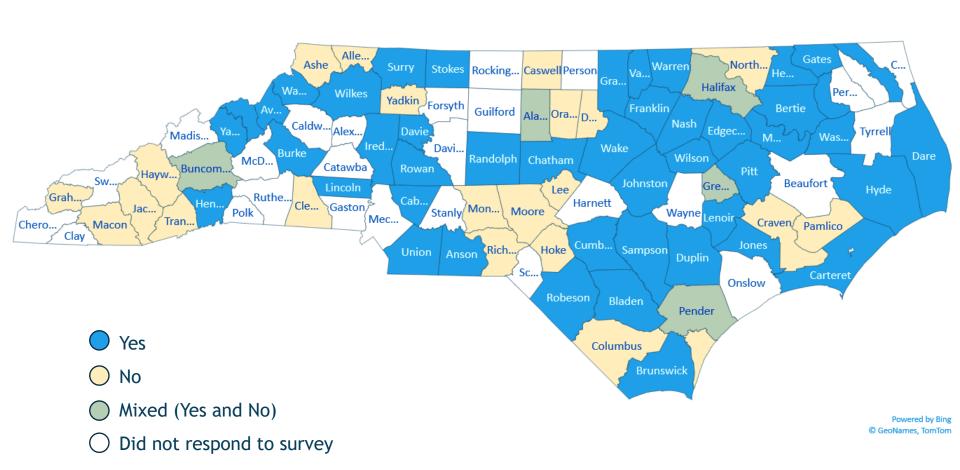
Take Home Message: Local agencies benefited from the local team structure through new partnerships in their local county.

Over 70% of respondents agree that participation in a Local Team allowed them to collaborate with new partners.

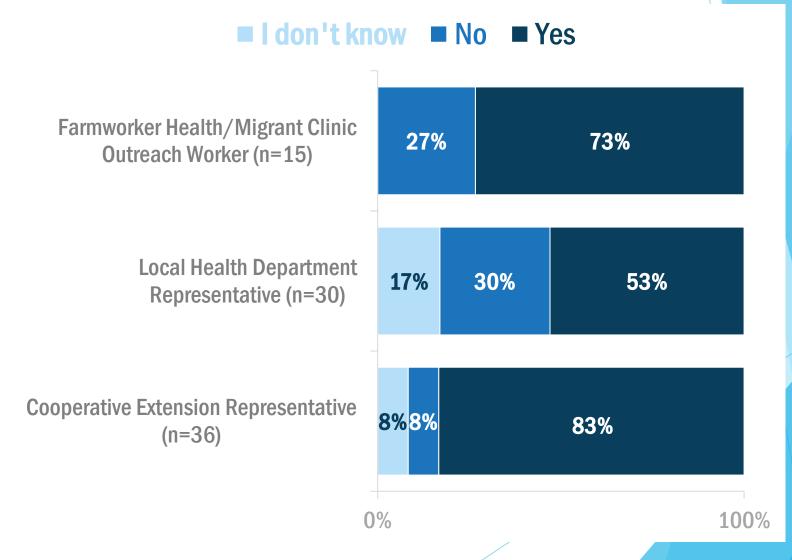


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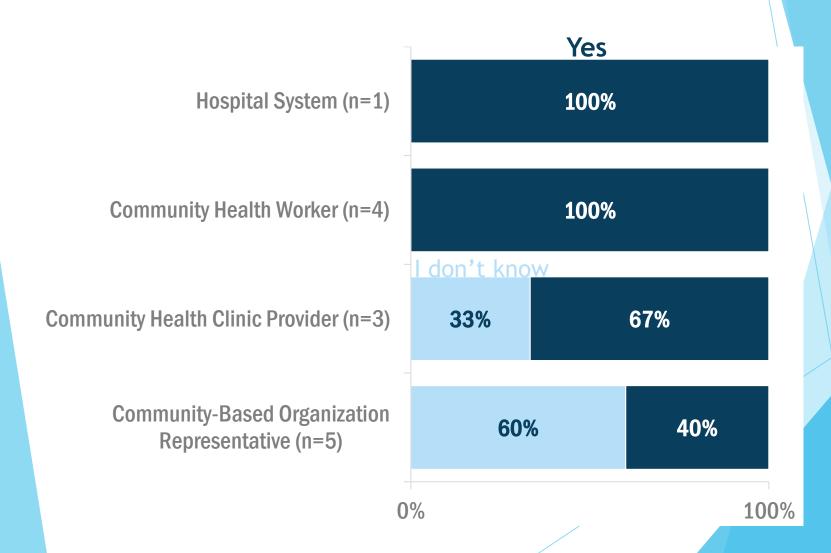
About half of all counties reported collaboration with new partners.



A majority of core team members agreed that they were able to collaborate with agencies they had not collaborated with previously.



Supporting team members also agreed that local team model helped them collaborate with other agencies.



Benefits of Collaboration

Covered a larger area

Improved collaboration

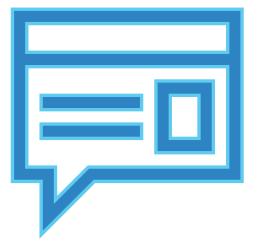
Strengthened bonds with other agencies

Understood resources available

Reduced duplication of efforts

Built new partnerships

Stayed up-todate regarding Covid-19 Raised awareness about farmworkers' needs Comments from Local Team
Members about Collaboration



Comments from Local Team Members



Learned of new resources not currently serving farmworkers who were interested in adapting their service models to meet farmworkers' needs. Other agencies became aware of challenges facing farmworkers and the presence of farmworkers in their county.



We have worked together again on other county-based issues. It got us out of our silos.



We were able to make sure that a larger area was covered.



Broader reach into the community with increased manpower. Increased inclusion of vulnerable populations with assistance of community health workers.

What we heard from key informants

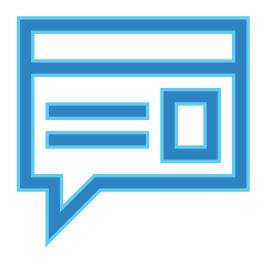
"The local team, I think, changed everything basically, just from the standpoint of having that local structure, but also from having a lot of communications between the partners that are playing key role".

- Key Informant #5

"The local teams [strategy]...it encouraged relationships between Cooperative Extension and growers and the health departments and outreach workers. And I think that was the best thing that came out of all of this". - Key Informant #2



What we heard from outreach workers





"It was in those meetings [local team meetings] where I was able to talk with different agencies. The Local Health Department said 'we can give you the vaccine, but we don't have the staff' and Cooperative Extension would say "I don't have vaccines or staff, but I have contact with the growers. So, I said 'ok, I have staff and I can call the growers, call the farmworkers and I can make sure they show up.' Before, when would the health department tell me they would give me x thing? Never."

-Outreach staff #6



"In previous years we tried to collaborate with Local Health Departments, and we didn't have any success, NCFHP helped us connect to the X County Local Health Department and make that connection and we hope to collaborate in the future."-Outreach staff #5

<u>Take Home Message</u>: The local team strategy was successful in facilitating the delivery of vaccines to farmworkers, which, in turn, helped decrease outbreaks.

"[We were] able to facilitate booster shots within the county for incoming farm workers, sharing of worker vaccination information allowed me to offer greater support to local farms" - Cooperative Extension Representative

"The farmworkers benefited from having vaccinations, food, toiletries, and health screenings." Community Health Worker

"Being able to collaborate with other agencies to provide vaccines at the camp sites...when farmworkers are done working. It is difficult for them to leave to go to pharmacies or health departments. -Farmworker serving agency

Local Teams Vaccination Efforts 2021 and 2022

Vaccination effort	2021 Number doses administered	2022 Number doses administered**
Local teams	24,321	3,147
Initial series*	23,720	711
Boosters	601	2,436
Reception hub	5,318	3,221
Initial series	4,815	4
Boosters	503	3,217
Total	29,639	6,368
*Includes doses administered when type of dose not reported **Vaccine efforts reported through 11/30/2022		

Note: The numbers reported provide a snapshot of farmworker vaccination efforts but are not a complete picture of vaccine uptake, an undercounted is possible. Some vaccination events were community-wide efforts, and it was difficult for local teams to report only farmworker data. Sometimes it was difficult for teams to report any data at all.

There is room for improvement in some collaborations

Needs to be better organized and providers need to understand this is not a competition

We have no farmworkers, so our team didn't have any action items. We met initially and filled out the survey when requested but we didn't need this program in our county.

Basically, our team was the Health Department only.

We had a vaccine event with [a vaccine provider] but we also needed [health center] to come on a different day to support with COVID-19 vaccines and a Mobile Clinic, but unfortunately, they never confirmed in time for the event. This has been one of many issues we have had with [health center] since day one.

Challenges moving forward

"In our experience, the local teams were helpful in those initial [days] when everyone had clear responsibilities. But when it was more about collaborating that is when the sustainability of those local teams was...it didn't work anymore, no one was taking accountability, went back to the same system we had before... everyone is doing their own thing. Everyone is forgetting about agricultural workers again." -Outreach staff #1

Reflect about your local collaboration experiences.

- What agencies do you collaborate with on a local level (for emergency response or other purposes)?
- What has worked well when collaborating with these agencies?
- What challenges have you experienced?
- What lessons have you learned about collaborating effectively?



Statewide Collaborations



Take Home Message: Involving all players in agriculture led to finding realistic solutions that had a positive impact in the agricultural community overall

Communication

"One of the biggest problems was that there is not one button that you can push in North Carolina and it goes out to everybody who's in agriculture. Being able to think about how we streamline those communications so that this group could collectively have the same information and get it out to the people who needed it."

-Key Informant #3

"One thing that was really important is that we were all pushing out the same information. Here in NC we are really lucky we have a great support system for farmers and farmworkers. But one of the things we realized, there are some of us with overlapping roles to an extent. So just wanted to be sure we were pushing out consistent messaging, so people would know what to do in the event of an outbreak." -Key Informant #2

"Getting those, those consistent streamlined messages and then as new pieces of information were being developed, you know we were able to review those and give feedback to whoever was working on those, whether it was someone in Farmworker Health or Communicable Diseases or both."- Key Informant #3

Understanding different perspectives

"Farmworker health program and the Communicable Disease section would come up with some guidance, you know, from their perspective and what needed to happen. Like a really good example would be, part of the guidance from CDC and DHHS would be the six feet of separation. In migrant housing [there are] different set of standards that they [growers] must comply with... So just kind of collaborating on and like just talking through the guidance versus what really is enforceable and what's feasible."

- Key Informant #2

Take Home Message: NCFHP's coordination efforts are well regarded by key partners and continued collaborations would be beneficial.

"It's been an excellent experience and I'll look forward to it continuing, I think it was needed and so grateful that the pandemic brought us all together. So I just look forward to continuing, you know, collaborating and working together. It was a good experience. -Key Informant #2

"I did not hear any about much of anything that was an issue with the way all this was done...I think that whole collaboration, I know there was a ton of meetings...I was incredibly impressed with the farmworker program and just Department of Health and Human Services in general because, I see lots of ways that we could and should continue to collaborate." -Key Informant #1

Reflect about your experiences at a regional/statewide/national level.

- What agencies do you collaborate with on a regional/state/national level (for emergency response or other purposes)?
- What has worked well when collaborating with these agencies?
- What challenges have you experienced?
- What lessons have you learned about collaborating effectively?

Summary/Take aways

- Local partnerships increased/improved during COVID
- Multiple benefits of collaboration were identified
- Collaborations facilitated the delivery of vaccines to farmworkers, which, in turn, helped decrease outbreaks.
 - Statewide collaborations with farmworker-facing and grower-facing agencies ensured consistent collaborations
- Strategize for continued partnerships post-COVID. These vary by county and availability of resources.

Questions????



Thank you!

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