100 Teams Are Better Than One: 

*Building Cross-Sector, State-Local Partnerships to Support Agriculture Worker Health During the COVID Pandemic and Beyond*

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NC Farmworker Health Program  
Office of Rural Health
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INTRODUCTION

Understand

• How is the farmworker population unique compared to other population segments?
• Why is this population particularly challenging to reach?
• How does this population currently access health services?
• Who already has an established relationship with this population?

Develop

• Identify the key players
• Determine tools needed for success
• Identify the best communication method for this farmworker population
• Determine to measure success through metrics and key performance indicators

Prepare

• Develop local county team profiles
• Determine local county team facilitators
• Begin initial reach out to local county team members identified
• Set up initial local county team meetings

Perform

• Conduct initial local county team meetings
• Tailor COVID-19 response strategy to individual county
• Continue facilitation and support for local county teams as needed
• Constant reassessment of need and involvement in teams
NC FARMWORKER POPULATION OVERVIEW

There are approximately **72,000** migrant and seasonal farmworkers in North Carolina:

- 23,000 H-2A visa workers
- 33,000 migrant workers
- 16,000 seasonal workers

What makes this segment unique?

- Typically reside in rural areas
- Cultural differences
- Highly independent
- Untraditional working schedules
- Access to communication tools
- Skepticism of government associations
KEY PLAYERS AT THE COUNTY LEVEL

NC State Cooperative Extension

NCFHP Migrant Clinics and Enabling Sites

Local Health Departments

Community Health Workers

Community Health Clinics and Providers

Community-Based Organizations
**THE STRATEGY**

Our matchmaking begins with and revolves around our local county teams. The local teams connect local providers and vaccinators to the farmers and labor contractors to ensure farmworkers and individuals in the agriculture community have adequate access to the COVID-19 vaccine.

- **Local & Regional Teams** assemble for outreach, prevention activities, and coordination with health providers & farmers for vaccine promotion.
  - Teams include FW health outreach workers, county health departments, Extension agents, CHWs, and others.

- **Local Providers/ Vaccinators** identified & enrolled to vaccinate farmworkers either onsite or at a nearby location.

- **Farmers/ Labor Contractors** contacted by a representative of Local & Regional Teams to arrange for vaccination of their workforce, answer any questions about vaccination, and troubleshoot any issues or challenges.

- **Local & Regional Teams** work with Farmers/Labor Contractors and Local Providers/Vaccinators to set up an onsite vaccine clinic or appointments for off-site vaccination as well as schedule any follow-up appointments for second dose.
THE STRUCTURE

**Key Concepts: Streamlined & Proactive Process**
1. Local teams to coordinate farmworkers’ vaccination by county and by arriving workers
2. Planning, communication & evaluation: Central Teams
3. Execution: Local Teams

**Roles:**
- Planning, monitoring & evaluation
- Select & support local/regional teams
- Engage & communicate with all stakeholders
- Coordinate with immunization branch
- Track & report progress

**Roles:**
- Outreach/prevention/vaccine promotion
- Contact Farmers
- Coordinate with providers
- Schedule immunization
- Assist in CVMS registration
- Track second dose schedule

**Acronyms:**
- CVMS: COVID-19 Vaccine Management System
- DPH: Department of Public Health
- FHP: Farmworkers Health Program
- FQHC: Federally Qualified Health Center
- LHD: Local Health Department

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**NC DHHS Leadership**

**Project Management Team**
(DPH + FHP)

**Local County Teams**

**Immunization Branch**

**Stakeholders**

**Farms***
(farmers & farmworkers)

**Providers**
(LHD, FQHC, other)

*Outreach for farms is organized by county and expected arrivals of farmworkers (migrant & seasonal)
## LOCAL COUNTY TEAM PROFILES

<table>
<thead>
<tr>
<th>Local Team</th>
<th>Agency</th>
<th>First name</th>
<th>Last name</th>
<th>Phone number</th>
<th>Email</th>
<th>Role</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lead/POC</td>
<td>Migrant Clinic</td>
<td>Brad</td>
<td>Swarr</td>
<td>555-555-5555</td>
<td><a href="mailto:bswarr@ncsu.edu">bswarr@ncsu.edu</a></td>
<td>Outreach Coordinator</td>
<td></td>
</tr>
<tr>
<td></td>
<td>NC State Extension</td>
<td>Davey</td>
<td>Hart</td>
<td>555-555-5555</td>
<td><a href="mailto:dhart@ncsu.edu">dhart@ncsu.edu</a></td>
<td>Extension Agent</td>
<td>Chw1</td>
</tr>
<tr>
<td></td>
<td>Community Health Worker</td>
<td>Rusty</td>
<td>Warr</td>
<td>555-555-5555</td>
<td><a href="mailto:rwarr@ncsu.edu">rwarr@ncsu.edu</a></td>
<td>Community Health Worker</td>
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<tr>
<td>Region</td>
<td>Northeast</td>
<td>Jasmine</td>
<td>Porter</td>
<td><a href="mailto:Jasmineapproval@email.com">Jasmineapproval@email.com</a></td>
<td><a href="mailto:Jasmineapproval@email.com">Jasmineapproval@email.com</a></td>
<td>Local health department</td>
<td></td>
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### Core local county team:
- NC State Cooperative Extension
- Primary migrant health clinic
- Community health worker

### Additional local resources:
- Migrant health centers
- Federally qualified health centers (FQHC)
- Community-based organizations

### Additional details of camps (Location/Description) is available upon request to Farmworker Outreach Clinics

### H-2A arrivals by month

<table>
<thead>
<tr>
<th>Month</th>
<th>Number of Workers</th>
<th>Arrival Date</th>
<th>Departure Date</th>
<th>Number of Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan-22</td>
<td>12</td>
<td>Mar-22</td>
<td>30</td>
<td>204</td>
</tr>
<tr>
<td>Feb-22</td>
<td>12</td>
<td>Apr-22</td>
<td>30</td>
<td>204</td>
</tr>
<tr>
<td>Mar-22</td>
<td>12</td>
<td>May-22</td>
<td>30</td>
<td>204</td>
</tr>
<tr>
<td>Apr-22</td>
<td>12</td>
<td>Jun-22</td>
<td>30</td>
<td>204</td>
</tr>
<tr>
<td>May-22</td>
<td>12</td>
<td>Jul-22</td>
<td>30</td>
<td>204</td>
</tr>
<tr>
<td>Jun-22</td>
<td>12</td>
<td>Aug-22</td>
<td>30</td>
<td>204</td>
</tr>
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### Testing vendor coverage

<table>
<thead>
<tr>
<th>Vendor 1</th>
<th>Name 1</th>
<th>Vaccine 1</th>
<th>Vaccine 2</th>
<th>Vaccine 3</th>
<th>Vaccine 4</th>
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<tr>
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### Additional resources:
- Camps registered with the NC Department of Labor
- Information for growers receiving H-2A workers
- Available vaccine providers
- Non-congregate sheltering status
LOCAL COUNTY TEAM MEETINGS

97 introductory calls conducted with the local county COVID response teams

150+ organizations represented across local county teams

~25 recurring local county COVID response team meetings held through 2021

BILINGUAL meetings held to ensure team members are communicating in their preferred language
VARYING COUNTY NEEDS LEADS TO TAILORED “EXPERIENCES”

Independent

Local County Teams

Light Touch

Local County Teams + Sponsored Vaccine Sites

High Touch

Local County Teams + Sponsored Vaccine Sites + Centralized Vaccine Site

Full Boat

Local County Teams + Sponsored Vaccine Sites + Centralized Vaccine Site + Mobile Vaccine Services
THE BENEFITS

Before

- Duplicative and Redundant meetings
  - Low bandwidth to perform activities due to meetings

- Duplicative and Competing Efforts
  - Vaccine/health events scheduled at the same time and same area

- Inefficient Communication
  - Confusion among organizations and farmworker community

After

- Concise and effective meetings
  - Reduced meetings resulting in high bandwidth to perform activities

- Coordinated Efforts
  - Joint vaccine/health events resulting in time in cost savings

- Efficient Communication
  - Farmworker community has most up to date info to make informed decisions
**KEY METRICS**

<table>
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<tr>
<th></th>
<th>2021</th>
<th>2022 (through 2/28/22)</th>
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<tbody>
<tr>
<td><strong>Local Teams</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># agencies reported at least one survey</td>
<td>93</td>
<td>27</td>
</tr>
<tr>
<td># agencies reported at least one dose</td>
<td>77</td>
<td>18</td>
</tr>
<tr>
<td>Main series* doses administered</td>
<td>23,720</td>
<td>293</td>
</tr>
<tr>
<td>Booster doses administered</td>
<td>601</td>
<td>447</td>
</tr>
<tr>
<td><strong>H-2A Reception Hub</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of vaccine events</td>
<td>51</td>
<td>4</td>
</tr>
<tr>
<td>Main series doses administered</td>
<td>4,815</td>
<td>2</td>
</tr>
<tr>
<td>Booster doses administered</td>
<td>503</td>
<td>496</td>
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*Includes doses administered when type of dose not reported

*Data provide a snapshot of farmworker vaccination plan efforts, not a complete picture of farmworker vaccine access/uptake. Vaccination efforts target migrant and seasonal workers but are inclusive of year-round farm staff and growers.*
FACILITATING VACCINE/BOOSTER ACCESS AND BEYOND

Vaccines and Boosters

- Effectively facilitate vaccine/booster access
- Disseminate most updated guidance
- Coordinate community events
- Track and report metrics

Beyond

- Outbreak response
- PPE distribution
- Health education and outreach
- Response for future needs
COMMUNITY HEALTH CENTERS

Provide Access to Care

Establish Community Relationships

The Role of Community Health Centers

Safety Net for Mental Health Care

Build Community Trust

Multidisciplinary Patient Care
OUTREACH WORKERS

Connect Individuals to Health Entities

The Role of Outreach Workers

Notify Team of Outbreaks for Faster Response

Promote Health and Vaccine Events

Facilitate Distribution of PPE Equipment

Bring Attention to the Needs of the Farmworker
CHALLENGES

- Bandwidth and availability of team members
- Shortage of staff across organizations
- Maintaining teams across all 100 counties
- Accessibility to growers and farmworkers
- Ensuring everyone has the most updated information
VACCINATION EFFECT ON CASES/OUTBREAKS

<table>
<thead>
<tr>
<th>Year</th>
<th>Outbreak</th>
<th>Cases</th>
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</thead>
<tbody>
<tr>
<td>2020</td>
<td>36</td>
<td>868</td>
</tr>
<tr>
<td>2021</td>
<td>32</td>
<td>246</td>
</tr>
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78% decrease in outbreaks from 2020 to 2021
It has been great to be part of the Local Team model. Through outbreaks and the vaccination process it helped to bring those of us who were working with farmworkers in our local counties together. During such a busy time for all of us it brought us together and we were able to see what was going on across the board and how we could work together to stop the spread of COVID. The NCFHP team was able to give us very important guidance and ideas of things that were helping other programs across the state. It was also a space where we were able to look at all the accomplishments we have made on a local level.

Erin Torres
Farmworker Health Program Coordinator
AppHealthCare
Thank you!