





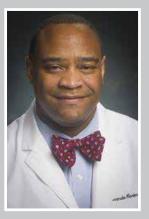
## Jefferson County Board of Health January 1, 2020 - December 31, 2020



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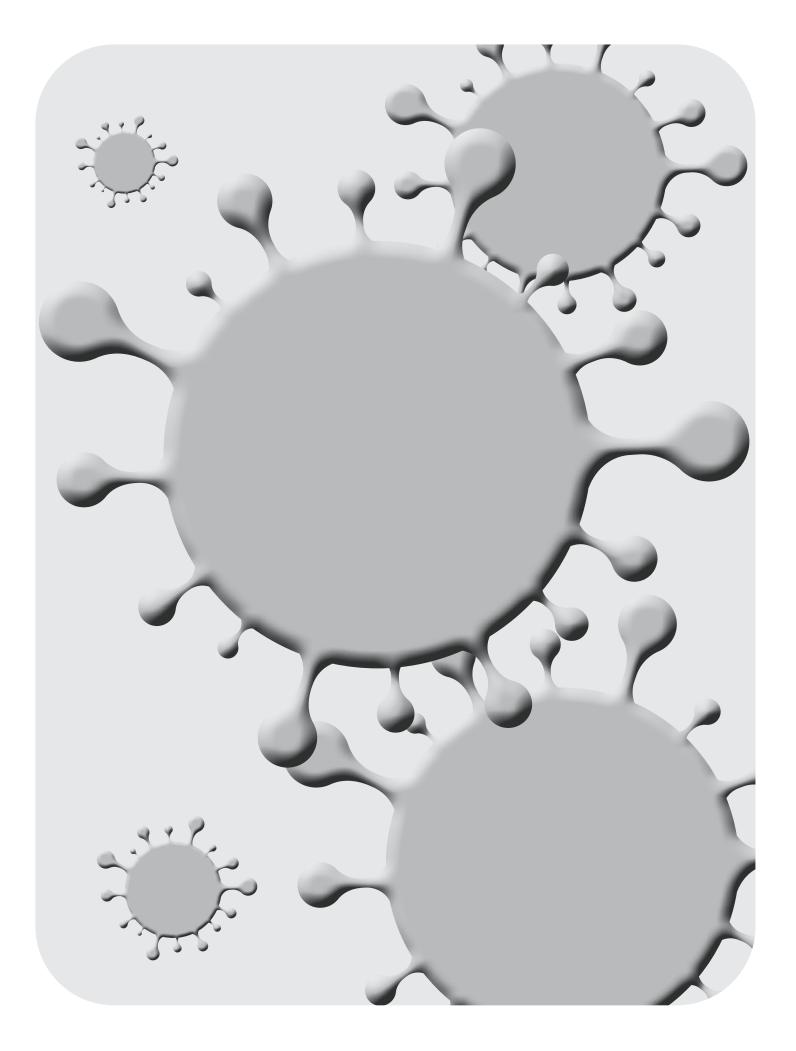
Kenny Murray, MD, MPH

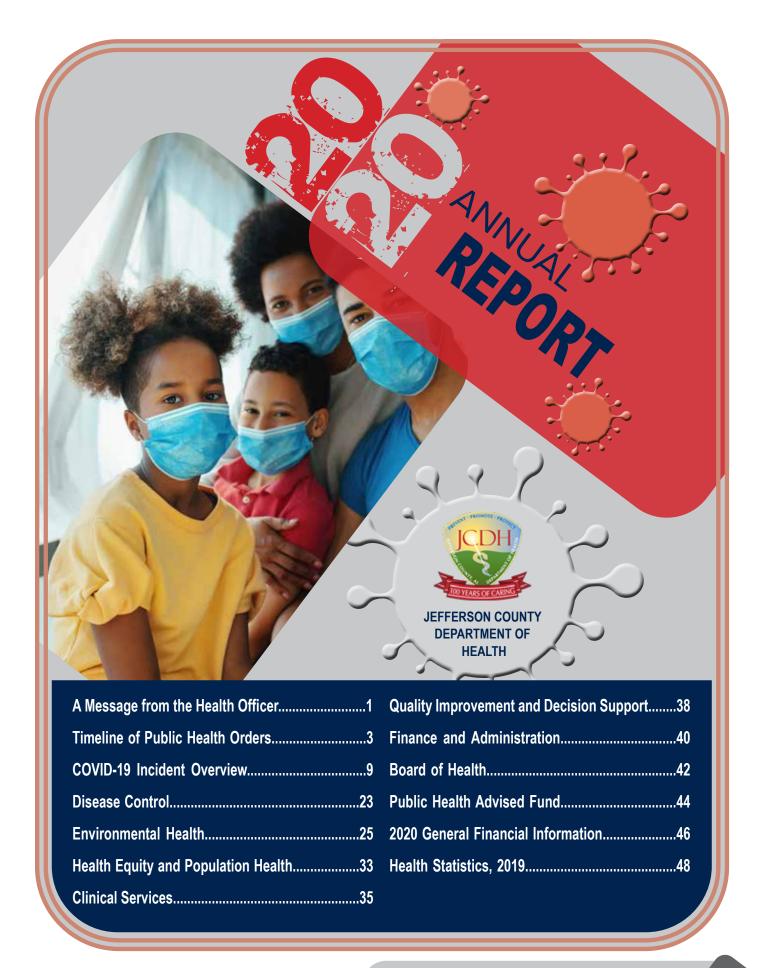


Susan Walley, MD Secretary



**Commissioner Jimmie Stephens** 







## A Message From The Health Officer

The COVID-19 pandemic was the focus of the world during 2020. As the county's public health agency, the pandemic placed the work of the Jefferson County Department of Health (JCDH) in the spotlight and at the forefront of multiple local disease mitigation activities.

The COVID-19 pandemic spread deeply impacted residents of Jefferson County, and the physical, emotional, economic and educational costs have been great. Close to 700 lives were lost from COVID-19 in 2020 in Jefferson County alone, with thousands of

family members, friends and co-workers left grieving.

On January 27, 2020, JCDH activated its Incident Command structure, a standardized approach to the command, control and coordination of emergency response, to maintain situational awareness of the emerging COVID-19 pandemic. COVID-19 was first detected in Jefferson County on March 13, 2020 with 52,339 cases reported as of December 31, 2020. JCDH coordinated or led COVID-19 testing, disease monitoring, contact tracing, quarantine communication, isolation and quarantine for individuals testing positive for

COVID-19, and various additional mitigation efforts countywide. JCDH collaborated with multiple local partners to provide widely-accessible COVID-19 testing for county residents regardless of insurance status or ability to pay. This work included a partnership with the federal Office of the Surgeon General that provided surge COVID-19 testing in late August and early September 2020. In support of COVID-19 mitigation efforts in local schools, ICDH established a pediatric testing site at its Southside location in October 2020.



(from left to right) Dr. Hicks, Audrail Pharris, Dr. Traffanstedt, Julie Cobb, Shila McKinney, US Surgeon General Jerome Adams, Kim Cason, Dr. Wilson, Sarah Estopinal at the Surge COVID-19 testing site

In accordance with Alabama law authorizing and obligating the County Health Officer to institute immediate measures to prevent the spread of notifiable diseases including COVID-19, following consultation with local elected officials, and with the State Health Officer's approval, I issued the first countywide public health order in Alabama on March 16, 2020 and the first countywide face covering order in Alabama on June 26, 2020. In addition to these and subsequent public health orders, JCDH provided guidance to schools, businesses, social organizations, places of worship and other local agencies for reducing the spread of COVID-19. Partnerships with the media, local governments and other organizations were prioritized to distribute accurate and timely information to the public. The JCDH Environmental Health Division helped assure restaurants and other

public facilities were compliant with public health orders and guidelines protecting the public's health.

JCDH staff engaged with multiple community agencies through a Joint Unified Incident Command structure co-led by the Jefferson County Emergency Management Agency Director to implement COVID-19 mitigation strategies and community support. Unified Incident Command is the Incident Command System application used when more than one agency has incident jurisdiction or when incidents cross political jurisdictions. Jefferson County Unified Incident Command helped support Jefferson County residents experiencing homelessness and food insecurity during the pandemic and provided personal protective equipment and other critical resources for first responders and other essential service providers engaged in the overall pandemic response.



Dr. Wilson and Denisa Pridmore reviewing notes in the "War Room" on April 8, 2020

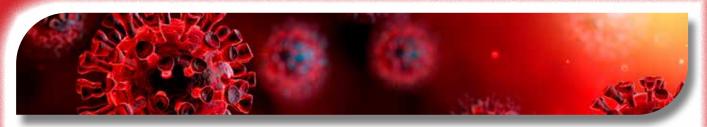
The threats from COVID-19 remain a significant public health challenge in 2021. To reduce disease spread and the negative impacts of COVID-19, it will take all of us consistently engaging in best practices as recommended by the Centers for Disease Control and Prevention (CDC) and obtaining COVID-19 vaccination.

Although COVID-19 defined much of the work of JCDH during 2020, other important public health work was accomplished. JCDH partnered with local agencies to reduce the transmission of HIV through the "Getting to Zero" initiative. The escalating Hepatitis A epidemic was addressed through education and administration of the Hepatitis A vaccine within the homeless, incarcerated and other at-risk populations. Influenza testing was provided through JCDH at two community sites, and influenza vaccination was offered to county residents. JCDH promoted active transportation by providing funding to build a trail to connect downtown Birmingham to Avondale's 41st Street and extend a trail along 1st Avenue South. Revised Communal Living Regulations developed by JCDH's Environmental Health Division were approved by the Jefferson County Board of Health on May 13, 2020, providing updated health and safety standards for communal living facilities. JCDH continued to actively work to reduce opioid-related deaths through education, policy and the distribution of naloxone kits. Through these and other initiatives, JCDH engaged in multiple aspects of health promotion.

2020 was a challenging year for us all. However, JCDH continued its commitment to prevent disease and assure access to quality health care, promote a healthy lifestyle and environment, and protect county residents against public health threats.

Mark E. Wilson, MD Health Officer

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## TIMELINE OF PUBLIC HEALTH ORDERS

## March 6, 2020 through June 30, 2020

Source: https://www.alabamapublichealth.gov/legal/orders.html

## STATE – March 6, 2020 – State Health Officer Emergency Rule Regarding Alabama Notifiable Diseases/Conditions

Dr. Harris, Alabama State Health Officer, issues an order identifying COVID-19 as a notifiable disease

under the Alabama Notifiable Diseases Act.

## FEDERAL – March 13, 2020 – Presidential Declaration of Emergency

President Trump declares a nationwide state of emergency pursuant to section 501(b) of the Stafford Act.

## STATE – March 13, 2020 – Governor Declares State of Emergency

Govenor Ivey issues Proclamation declaring under the AEMA of 1955 that a State Public Health Emergency exists in the state of Alabama. She directs "appropriate state agencies to



Dr. Brittany Sanders (center) conducting COVID-19 specimen collection training on March 12, 2020

exercise their statutory and regulatory authority to assist the communities and entities affected." She also directs the Alabama Department of Public Health to seek federal assistance.

#### FEDERAL – March 16, 2020 – President and CDC Guidance

President Trump and the Centers for Disease Control and Prevention issue the "15 Days to Slow the Spread" guidance advising individuals to adopt far-reaching social distancing measures, including working from home and avoiding gatherings of more than 10 people.

## COUNTY – March 16, 2020 – Jefferson County Health Officer Emergency Order Suspending Certain Public Gatherings Due to Risk of Infection by COVID-19

Dr. Wilson issues an order suspending public gatherings of 25 persons or more or any gatherings that could not maintain a six-foot distance between persons. The order also required the closure of private schools and preschool/childcare centers with 12 or more children. Restaurants, bars, and breweries were forbidden from allowing on-premises consumption of food or drink for one week. Notice was to be publicly given of this order. Organizers of affected events could petition the County Health Officer for an exemption if certain criteria were met. (The Mobile County Health Officer issued a similar order on March 18, 2020).

## STATE – March 17, 2020 – State Health Officer Order Suspending Certain Public Gatherings Due to Risk of Infection by COVID-19

Dr. Harris issues an order substantially similar to the Jefferson County order of March 16, applicable to Blount, Saint Clair, Shelby, Tuscaloosa, and Walker Counties.

#### STATE – March 18, 2020 – Governor Supplements State of Emergency

Gov. Ivey issues a supplement to the State of Emergency, rescheduling the primary election, closing schools, modifying the Open Meetings Act, and expanding bid law exceptions for procurement of emergency supplies.

#### STATE – March 19, 2020 – State Health Officer Order Enabling County Health Officers

Dr. Harris issues an order substantially similar to the state order of March 17, 2020, implementing gathering restrictions statewide, closing schools, delaying all elective dental and medical procedures, etc. The order also authorizes the Jefferson and Mobile County Health Officers to "implement more stringent measures as local circumstances require."

# COUNTY – March 19, 2020 – Jefferson County Health Officer Emergency Order Suspending Certain Public Gatherings and Closing Nonessential Businesses Due to Risk of Infection by COVID-19

Dr. Wilson issues an order closing all nonessential businesses and services effective March 20 and enumerating a list of nonessential services. The order also provided for the closure of schools and childcare centers with 12 or more children. It also continued regulations from the previous order, such as banning the on-premises consumption of food and drink, prohibiting of visitors to hospitals and nursing homes, and delaying all elective dental and medical procedures.

## STATE – March 20, 2020 – State Health Officer Order Suspending Certain Public Gatherings

Dr. Harris issues an order largely similar to the State Health Officer orders of March 17 and March 19, expanded on a statewide basis.

# COUNTY – March 22, 2020 – Jefferson County Health Officer Amended Emergency Order Suspending Certain Public Gatherings and Closing Nonessential Businesses Due to Risk of Infection by COVID-19

Dr. Wilson issues an order amending his March 19, 2020 order, effectively restating this order in light of the preemption and authorization of action by the State Health Officer on March 19, 2020.

#### STATE – March 23, 2020 – Governor Supplements State of Emergency

Gov. Ivey issues a supplement to the State of Emergency postponing certain state tax obligations.

## STATE – March 23, 2020 – State Health Officer Order Suspending Certain Public Gatherings

Dr. Harris builds on the previous State Health Officer's order, forbidding non-work-related gatherings of more than 10 persons or gatherings that cannot maintain a six-foot distance between persons and closing non-essential businesses, beaches, schools, daycares, and other establishments.

#### CITY – March 24, 2020 – Birmingham City Council Issues Shelter in Place Ordinance

The Birmingham City Council voted to encourage residents to shelter in place and only leave their homes for essential purposes such as work, visiting essential businesses, and exercising.

#### STATE - March 26, 2020 - Governor Supplements State of Emergency

Gov. Ivey issues a supplement to the State of Emergency, mandating alternative methods of instruction for the school year, extending emergency services licensure, modifying notary and witness requirements, permitting the sending and acceptance of electronic records by state agencies, and authorizing localities to issue summons in lieu of arrest.



Dr. Wilson
meeting
with Unified
Command at
the Jefferson
County EMA
on March
28, 2020 to
discuss hospital
surge capacity
planning

#### STATE – April 2, 2020 – Governor Supplements State of Emergency

Gov. Ivey issues a supplement to the State of Emergency that reduces regulations on medical providers, expands the capacity of healthcare facilities, and issues new guidance on notaries, witnesses, public meetings, and remote shareholder meetings, and jails.

#### STATE – April 3, 2020 – Governor Supplements State of Emergency

Gov. Ivey issues a supplement to the State of Emergency to protect residents against evictions.

## STATE – April 3, 2020 – State Health Officer Order Suspending Certain Public Gatherings

Dr. Harris builds on the previous order, ordering residents to shelter in place except to perform essential activities such as obtaining necessary supplies, providing or receiving necessary services, attending religious services, taking care of others, working, or other exceptions.

#### CITY – April 3, 2020 – Birmingham City Council Extends Shelter in Place Ordinance

The Birmingham City Council voted to extend the city's shelter in place ordinance until April 30.

#### STATE – April 12, 2020 – Governor Supplements State of Emergency

Gov. Ivey issues a supplement to the State of Emergency to suspend COVID-19 orders where it would be detrimental to severe weather response, activated the Alabama National Guard to respond to severe weather events, gave notice of the unlawfulness of price gouging, and made other provisions related to severe weather response.

#### STATE – April 13, 2020 – Governor Supplements State of Emergency

Gov. Ivey issues a supplement to the State of Emergency to resume pardon and parole hearings.

## STATE – April 28, 2020 – State Health Officer Order Suspending Certain Public Gatherings

Dr. Harris builds on the previous order, recommending personal distancing and sanitation measures to reduce the transmission of COVID-19 by providing for quarantine of infected persons, and lifting some restrictions on businesses subject to certain safety guidelines.

#### CITY - May 1, 2020 - Birmingham City Council Mask Ordinance

The Birmingham City Council unanimously approves an order requiring the wearing of a face covering in public.

#### STATE – May 8, 2020 – Governor Supplements State of Emergency

Gov. Ivey issues a supplement to the State of Emergency providing liability protections to businesses and healthcare providers against suits related to COVID-19 response activities unless there are injuries as a result of wanton, reckless, willful, or intentional misconduct and limiting damages.

## STATE – May 8, 2020 – State Health Officer Order Suspending Certain Public Gatherings

Dr. Harris builds on the previous order and extends its duration.

#### STATE – May 21, 2020 – Governor Supplements State of Emergency

Gov. Ivey issues a supplement to the State of Emergency permitting the expiration of eviction protections due to the State Health Officer's Safer at Home Order being amended to allow residents to return to work.

## STATE – May 21, 2020 – State Health Officer Order Suspending Certain Public Gatherings

Dr. Harris builds on the previous order and extends its duration.

## COUNTY – May 22, 2020 – Jefferson County Health Officer Emergency Order Suspending Certain Public Gatherings Due to Risk of Infection by COVID-19

Dr. Wilson issues an order recommending that individuals take measures to slow the spread of COVID-19 through minimizing travel, wearing face coverings, washing hands, and disinfecting frequently. The order also requires quarantine for 14 days for persons who have tested positive for COVID-19. The order forbids all non-work-related gatherings of any size that cannot maintain a six-foot distance between persons from different households. The order requires that businesses take sanitary and distancing measures to protect employees and customers and reduces occupancy capacity for retailers. The order permits close-contact service providers, athletic facilities, beaches, educational institutions, daycare facilities, camps, and restaurants to remain open subject to certain distancing/sanitation requirements. High-risk entertainment venues remain closed.

#### STATE – June 9, 2020 – Governor Supplements State of Emergency

Gov. Ivey issues a supplement to the State of Emergency issuing guidance to manage COVID-19 among the state's inmate population.

#### COUNTY – June 26, 2020 – Jefferson County Health Officer Order Requiring the Wearing of Face Coverings in Public Places

Dr. Wilson issues an order requiring persons in Jefferson County to wear a mask of face covering in public places, subject to age, health, and activity exceptions. Business owners were permitted to establish their own policies and procedures depending on whether spaces were open to the public. (The Mobile County Health Officer also issued a mask ordinance on June 30, 2020).



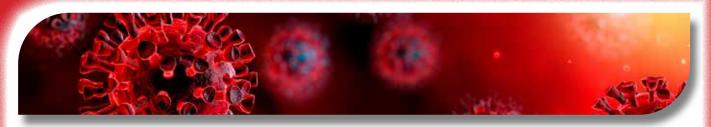
Dr. Wilson meeting with Alabama Army National Guard Deputy State Surgeon LTC Jason Wells (far right) and Romanian military delegation on May 29, 2020

#### STATE – June 30, 2020 – State Health Officer Order Suspending Certain Public Gatherings

Dr. Harris builds on the previous order and extends its duration.

## **COUNTY – June 30, 2020 – Jefferson County Health Officer Order Requiring the Wearing of Face Coverings in Public Places**

Dr. Wilson reissues the facial covering order in light of the previous order's preemption by the State Health Officer's newest order.



## **COVID-19 Incident Overview**

In late December 2019, Chinese officials confirmed dozens of cases of pneumonia from an unknown cause. Several days later, a new coronavirus, SARS-CoV-2, was identified as the agent of what is now called COVID-19. As weeks went on, the outbreak of COVID-19 spread to other countries.

COVID-19 was first confirmed in the United States on January 21, 2020 in a nursing home patient living in the Seattle, Washington area. The Jefferson County Department of Health (JCDH) responded to this event by maintaining situational awareness with the Alabama Department of Public Health (ADPH) and informing the public and the Jefferson County Healthcare Coalition of the evolving situation. The Jefferson County Healthcare Coalition (HCC), a partnership of local healthcare and response organizations established to assist healthcare facilities when a major incident or disaster impacts local healthcare organizations, immediately implemented policies and strategies to ensure the local healthcare system, including JCDH, could support the enhanced demands created by COVID-19.

JCDH activated its internal Incident Command Structure for COVID-19 on January 24, 2020 as more cases were confirmed in the United States. Jefferson County Health Officer, Mark Wilson, MD, assigned Deputy Health Officer, David Hicks, DO, MPH, as the JCDH Incident Commander.

When the World Health Organization (WHO) declared the COVID-19 outbreak a "Public Health Emergency of International Concern" on January 30, 2020, JCDH participated in a news briefing regarding the WHO declaration and its local implications. As cases of COVID-19 spread across the United States and were suspected locally, JCDH assisted clinicians by facilitating the transport of COVID-19 test specimens to the ADPH Bureau of Clinical Laboratories.

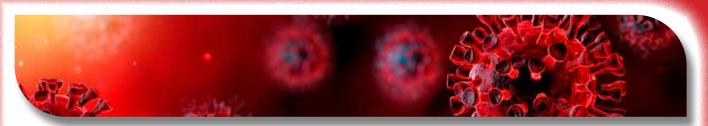
Jefferson County's Health Officer and JCDH legal counsel reviewed Alabama quarantine laws and the process for initiating mandatory quarantine for persons refusing self-quarantine. As the Centers for Disease Control and Prevention (CDC) released new movement and monitoring guidelines for individuals potentially exposed to COVID-19, JCDH and ADPH verified the processes used by federal organizations for notifying ADPH of persons identified at the Birmingham-Shuttlesworth International Airport as having

been in mainland China within the previous 14 days to

enable disease exposure screening.

JCDH's Coronavirus Response Plan was implemented on February 3, 2020, and staff received enhanced internal safety training. JCDH staff working in high-risk areas were fit-tested for N95 respirators to support continuation of clinic operations. In response to the National Association of County and City Health Officials' (NACCHO) Preparedness Policy Advisory Group's offer of resources to help meet local health department needs related to COVID-19, JCDH





requested testing supplies and funding for personal protective equipment (PPE). JCDH immediately began providing its staff with recommended PPE in alignment with CDC and WHO infection control guidance. Due to concerns of a national N95 respirator supply chain shortage, JCDH immediately placed an order for PPE.

On February 26, 2020, the CDC held a COVID-19 Media Telebriefing informing the public that the United States would experience COVID-19 community spread. JCDH thus initiated preparations for the potential of person-to-person disease spread in the county. JCDH also strongly recommended wide uptake of the 2019-2020 influenza vaccine to lessen influenza cases and potentially decrease healthcare system utilization in preparation for widespread COVID-19 activity.

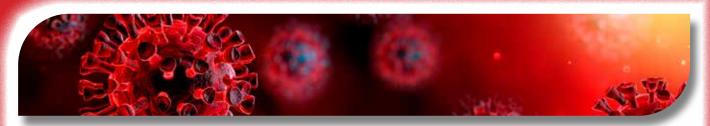
With COVID-19 cases identified in states adjacent to Alabama and considering Jefferson County's increased COVID-19 risk due to population size and interstate traffic, the Jefferson County Health Officer held a news conference on March 12, 2020. At this news conference, Dr. Wilson recommended that public gatherings with more than 500 people be cancelled until further notice.

On March 13, 2020, the Governor of Alabama declared a State of Public Health Emergency. The same day, JCDH reported the first confirmed case of COVID-19 in Jefferson County. In response, on March 16, 2020, the Jefferson County Health Officer issued a public health order prohibiting public gatherings of 25 or more people, prohibiting non-essential visits to nursing homes and long-term care facilities, closing private schools, preschools and childcare centers (public schools had been previously closed by the Alabama State Department of Education), and prohibiting on-premises consumption of food or drink



at restaurants and bars. Prior to issuing the March 16, 2020 order, Dr. Wilson conducted an emergency conference call with the Jefferson County Commission and local mayors apprising them of the COVID-19 threat and soliciting questions, concerns and feedback regarding the proposed public health order. On March 17, 2020, Alabama State Health Officer, Scott Harris, MD, MPH, extended the order enacted by the Jefferson County Health Officer to the Alabama counties surrounding Jefferson County. On March 19, 2020, Dr. Harris extended his March 17, 2020 public health order to include all of Alabama. Further, Dr. Harris entered an additional order authorizing the Jefferson and Mobile County Health Officers, following consultation with the State Health Officer, to implement more stringent COVID-19 control measures as local circumstances required on March 17, 2020. A series of additional public health orders were later issued for the mitigation of COVID-19 spread by Dr. Wilson in Jefferson County following approval by Dr. Harris, and statewide by Dr. Harris in consultation with the Governor's Office over the following weeks.

In mid-March 2020, law enforcement and first responders voiced concerns regarding potential exposure to COVID-19 after responding to a death. In addition, a local hospital reported that a funeral home



refused to take the body of a Person Under Investigation (PUI) for COVID-19. The Jefferson County Medical Examiner's Office collaborated with JCDH to address these concerns. When JCDH confirmed the county's first COVID-19 related death, preparations were made between JCDH and the Medical Examiner's Office for managing increased COVID-19 deaths.



Dr. Wilson (far left), Jonathan Stanton (3rd from left), and Dr. Hicks (not pictured) scoping out a warehouse on April 5, 2020 as a possible quarantine site for persons experiencing homelessness

In compliance with a Federal Emergency Management Agency (FEMA) directive, the Jefferson County Unified Incident Command of Jefferson County government agencies was established on March 28, 2020. Unified Incident Command enables effective and efficient response to an emergency situation across political jurisdictions. With Jefferson County's Health Officer and the Jefferson County Emergency Management Agency (EMA) Director serving as Joint Unified Incident Commanders, Unified Incident Command staff met with local hospital administrators and the Army Corp of Engineers to initiate hospital surge capacity planning.

ADPH's Infectious Diseases and Outbreaks Division, as part of standard case investigation procedures, consulted with JCDH's Prevention and Epidemiology Program Manager regarding the determination of COVID-19 deaths. In coordination with

ADPH, JCDH implemented a physician-led review process to standardize COVID-19 death certification. Such deaths were recorded in a public health database and officially reported to the CDC.

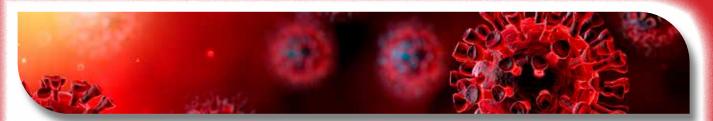
On June 17, 2020, Dr. Wilson provided a presentation to the Jefferson County Mayor's Association which included a review of the existing evidence on the effectiveness of cloth face coverings in reducing the spread of COVID-19. At that time, COVID-19 cases were rapidly increasing in the wake of the Memorial Day weekend. On June 30, 2020, with approval by the State Health Officer, Dr. Wilson issued a public health order requiring face coverings in most public locations. This order was Alabama's first countywide face covering order. Alabama's



Dr. Khan and Stephanie Ayers-Millsap reviewing death records on April 9, 2020

Governor announced on July 15, 2020 a face covering order for all of Alabama, an amendment to the prior statewide public health order.

JCDH began advising several local schools and institutions of higher learning on reopening plans beginning in May 2020. Local public school system superintendents and heads of private schools were invited to virtual information sessions conducted July 16 and 23, 2020. During the July 16, 2020 session, school system superintendents requested recommendations for school reopening. Dr. Wilson, with



the assistance of several advisors and feedback from school leaders and local elected officials, issued "Guidance and Concerns for Reopening Schools in Jefferson County" on July 27, 2020. This document was reissued following minor revisions on July 31, 2020.

With Dr. Wilson serving as Co-Joint Unified Incident Commander for Jefferson County, Dr. Hicks, the Deputy Health Officer for Jefferson County, oversaw JCDH's operations to enable Dr. Wilson to focus on cross-jurisdiction COVID-19 pandemic response. Throughout the year, JCDH's COVID-19 response was broad, varied and involved JCDH staff from all divisions. JCDH implemented and revised its Incident Command leadership and structures in real-time in response to changes related to COVID-19. The following narrative briefly describes these positions and the functions of individuals and structures within COVID-19 Incident Command.

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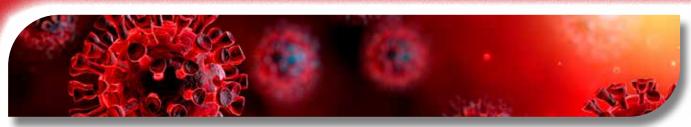
Jefferson County's Deputy Health Officer, David Hicks, DO, MPH, served as the JCDH COVID-19 Incident Commander. Within this role, Dr. Hicks established and revised the JCDH Incident Command Structure, and provided executive leadership for COVID-19 operations conducted by JCDH. The Incident Commander also provided leadership to the Public Health Branch of Unified Incident Command. In both roles, the JCDH Incident Commander maintained situational awareness at the organizational, community, state, federal and international levels and used this knowledge to direct activities to mitigate COVID-19 spread.

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An Incident Manager was activated to assist the Incident Commander manage JCDH's COVID-19 activities and ensure a coordinated response among the other Incident Command staff. Throughout the COVID-19 response, the Incident Manager facilitated weekly calls with Incident Command System staff and Section Leaders, assisted the Logistics Section Chief with identifying product and service vendors, coordinated JCDH's participation in a PPE federal decontamination program extending the shelf life of N95 respirators, coordinated the set-up and operation of two federal COVID-19 testing sites, assisted community partners in establishing testing sites, and facilitated the delivery of scarce resources within the healthcare community.

#### 

A JCDH Liaison Officer was activated to assist in assessing and mitigating the impact of COVID-19 response activities on hospitals, nursing homes, the Emergency Medical Service (EMS) system and other healthcare providers. The Liaison Officer's initial actions included the management of scarce resources and planning for the potential activation of an alternate care site for patients requiring hospital-level



care. Subsequent actions included coordination of federally required data entry for healthcare facilities, consistent messaging regarding COVID-19 testing availability, quarantine guidance for businesses, and education for partnering agencies. Once the first COVID-19 vaccine was approved for emergency use in the United States in December 2020, the Liaison Officer initiated planning with key organizations for phased vaccine and resource allocation within Jefferson County.



#### Anthony Gordon placing first Moderna vaccine shipment in freezer

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The JCDH Public Information Officer (PIO) developed messaging related to COVID-19 and disease mitigation efforts for the public and media. The PIO was also assigned to oversee Unified Command's Joint Information Center, a central point of contact for local public information officials. JCDH's Incident Command and Disease Control staff participated in multiple media engagements via television, radio, and print outlets organized through the PIO.

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The JCDH Safety Officer monitored COVID-19 incident operations and advised the Incident Commander on matters related to safety. The Safety Officer worked directly with JCDH's Lead Medical Director and Subject Matter Expert for the COVID-19 response regarding isolation and quarantine involving JCDH employees.

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Dr. Willeford (Lead Medical Director) taking notes regarding community testing strategy on April 20, 2020

JCDH's Director of Disease Control, Wesley Willeford, MD, was assigned to the roles of Lead Medical Director for JCDH Incident Command and Subject Matter Expert for Unified Incident Command. Edward Khan, MD, served as Subject Matter Expert for JCDH Incident Command. In early January 2020, JCDH teams led by Dr. Willeford initiated early preparations for response to the emergence of COVID-19 within Jefferson County including the development of clinical evaluation protocols, infection control measures and preparedness planning. To maintain clear lines of communication on current management of COVID-19, Dr. Willeford and staff from JCDH's

Prevention and Epidemiology subdivision and other subdivisions worked closely with ADPH and the CDC through recurring calls and teleconferences. In addition, the Disease Control Division secured over



\$10,000,000 in federal grants through the Coronavirus Aid, Relief and Economic Security Act (CARES Act) to support activities related to mitigating COVID-19 spread.

The Scientific Response Unit, led by the Prevention and Epidemiology subdivision, worked directly under the Lead Medical Director to provide situational awareness. Staff coordinated with local first responders on contact tracing, case investigation, and the creation of protocols for maintaining continuity of operations for first responders. Outreach was provided for local school systems to support contact tracing and case investigation. Additionally, review of school-level plans for the safe return of students to in-person classes was given.

Multiple engagements with local governmental organizations informed guidance on COVID-19 issues. Guidance was developed for reopening local businesses after the initial COVID-19 restrictions were lifted. Enhanced guidance and educational materials were created about COVID-19 testing.

#### SELECT COVID-19 MITIGATION STATISTICS

Metric	Number
COVID-19 Cases Investigated	19,912
COVID-19 Case Contacts Identified	24,576
Assisted Living Facilities Visited for Infection Control Planning	13

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To improve worker safety, a multi-disciplinary infection control team was formed to monitor CDC guidance, review and revise protocols, implement infection control measures, train staff, evaluate, select and procure supplies and PPE, monitor PPE use, and ensure utilization of appropriate disinfectants. In May 2020, JCDH organized a team of employees to assist the CDC and ADPH with implementation of Infection Control Assessment and Response (ICAR) tools in local long-term care facilities. ICAR tools systematically assess a healthcare facility's infection prevention and control practices and guide quality

improvement activities by addressing identified gaps in practices. The ICAR team accompanied CDC and ADPH on several long-term care facility site visits, participated in telephone conferences with various facilities, and performed on-site assessments in the Jefferson County area.

### //// Planning and Operations Section ///////

The Planning and Operations Section of JCDH's Incident Command maintained primary responsibility for incident action



Incident Command "War Room" utilized by Dr. Wilson, Dr. Hicks, and Shila McKinney



planning and execution of the COVID-19 Incident Action Plan. The roles performed by the various branches and units of the Planning and Operations Section are described individually.

#### 

The Personnel/Resources Unit organized the COVID-19 related work of more than 400 employees throughout the COVID-19 pandemic response. In March 2020, JCDH implemented employee teleworking to reduce exposure to COVID-19. In continuing critical JCDH services, staff who remained on-site were assigned to teams. For work functions with an increased risk of exposure to COVID-19, two teams performed the same work. This allowed for service continuation in the event of COVID-19 exposure by one team.

As the number of COVID-19 cases increased in Jefferson County in late spring 2020, the number of case investigations and need for contract tracing dramatically increased, exceeding the capacity of the JCDH personnel initially assigned to these tasks. To increase capacity to conduct case investigations and contact tracing seven days per week, JCDH dentists and dental hygienists were reassigned to assist the Prevention and Epidemiology subdivision. During April and May 2020, an additional 75 JCDH employees were added to the Case and Contact Tracing Team including nurses from JCDH's Health Centers and Specialty Clinics, Disease Intervention Specialists from the Sexually Transmitted Disease and Tuberculosis programs, Public Health Language Workers, Social Workers, and Quality Improvement and Decision Support Division staff. JCDH also contracted with a staffing firm which provided an additional 40 employees for case investigation and contact tracing. Throughout the pandemic, the Prevention and Epidemiology subdivision provided training on case and contact tracing.

During the COVID-19 pandemic, physicians, dentists, nurses, medical examiners, hospital and long-term care administrators, lab directors, school principals, and childcare directors were responsible for reporting notifiable diseases, including COVID-19, occurring in Alabama. Performing laboratories were required to report negative and positive COVID-19 test results by electronically or manually entering test results into a specific surveillance system. During the initial months of the pandemic, a team consisting of a nurse, two medical assistants and a clerk were assigned to a strike team that assisted a local laboratory with entering COVID-19 test information into the surveillance system while an interface between the lab's information system and the surveillance system was developed.

In preparation for the approval of COVID-19 vaccines, the Personnel Unit collaborated with JCDH's Human Resources subdivision and the Personnel Board of Jefferson County to increase staffing capacity for community vaccination. Temporary Public Health Nurse, Licensed Practical Nurse, and Medical Assistant positions were created. Through recruitment efforts for these positions, the Human Resources subdivision received and processed over 900 applications.



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A Public Orders Branch of the Planning and Operations Section was activated in February 2020. This branch consisted of the Public Order Surveillance, Public Order Enforcement, and Quarantine (Isolation) Notification Units. When the first cases COVID-19 were diagnosed in Jefferson County, several employees from JCDH's Environmental Health Division initiated surveillance activities for adherence to isolation and quarantine public health orders. As COVID-19 cases increased, additional staff were assigned to the Public Order Surveillance Unit. Data review indicated that very few quarantine and isolation order violations were observed; thus, staff from the Public Order Surveillance Unit were reassigned in July 2020 to other COVID-19 activities.

The Public Order Enforcement Unit from the Environmental Health Division visited local businesses, provided guidance regarding COVID-19 regulations and orders, and investigated complaints. Inspectors from Environmental Health's Food and Lodging subdivision distributed Food and Drug Administration (FDA) and ADPH guidelines for reopening restaurants as Alabama began reopening businesses. As each public health order was executed, the number of complaints received by JCDH increased. Between March and July 2020, JCDH investigated over 300 complaints, most commonly related to social distancing and masking violations.

#### STANDING CORONAVIRUS QUARANTINE ORDER OF THE JEFFERSON COUNTY HEALTH OFFICER December 11th, 2020

#### WHEREAS:

- The 2019 Coronavirus ("COVID-19") is designated as a notifiable disease of epidemic potential by the Alabama Department of Public Health, as authorized by Ala. Code § 22-11.A-1.

  A state public health emergency was declared by Kay Ivey, Governor of the State of Alabama, on March 13, 2020.

  The Jefferson County Health Officer has the authority to investigate instances of notifiable diseases and, if they are in imminent danger of spreading, "institute immediate measures to prevent the spread of such disease." Ala. Code § 22-3-5(2).

- The Jefferson County Health Officer has the authority and discretion to quarantine or isolate a person afflicted with a notifiable disease or condition. Ala. Code § 22-11A-3.

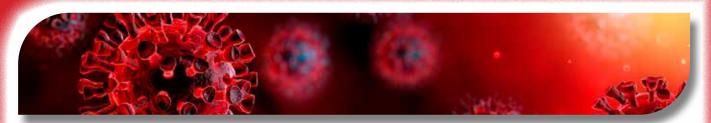
  Persons who have been reported as having any notifiable disease are required by law to obey the instructions and directions given
- by the State Health Officer or County Health Officer to prevent the spread of the disease. Ala. Code § 22-11A-7.
- Failure to comply with the State Health Officer or County Health Officer orders regarding quarantine may result in involuntary commitment proceedings. Ala. Code § 22-11A-27 et seq. See also Ala. Admin. Code Rule 420-4-1-05 et seq.

In March 2020, a Quarantine Notification Unit was organized to ensure Jefferson County residents testing positive for COVID-19 received a letter from the Health Officer, quarantine order, and COVID-19 educational material. Administrative staff sent packets with these materials via certified mail. By August 2020, electronic communication of

quarantine notices and educational material allowed staff to be reassigned to other efforts.

The first Jefferson County residents diagnosed with COVID-19 reached the end of the identified isolation period before the end of March 2020. A Quarantine (Isolation) Release Team led by the Quality Improvement and Decision Support (QIDS) Division was activated. This Team developed and implemented, based on current science, the process and procedure for assessing and documenting the appropriateness of releasing Jefferson County residents with COVID-19 from isolation.

Initially, QIDS researched the criteria for isolation release, inclusive of elapsed time since symptoms presented, the date of the positive COVID-19 test, or the date the positive COVID-19 test was resulted and status of key disease symptoms at the end of the expected isolation period. QIDS collaborated with the Management Information Systems (MIS) and Disease Control Divisions to create a data repository within JCDH's Disease Control COVID System (DCCV) capturing data supporting the decision to terminate or extend the isolation period.



Jefferson County residents with COVID-19 for whom epidemiologic case investigation and contact tracing had been completed were contacted by the Quarantine Release Team to assess readiness for isolation termination; this status was documented within the DCCV. Assessments were conducted seven days per week beginning April 3, 2020. Individuals failing to meet the symptom-based criteria for isolation termination were reassessed on an established basis until recovery or death.

On April 3, 2020, the JCDH Quality Improvement Officer was asked to provide assessment of University of Alabama at Birmingham (UAB) employees for isolation termination in coordination with UAB Employee Health to assist in ensuring adequate hospital staffing. Later in the month, the same service was provided for Brookwood Baptist Health.

As new COVID-19 cases increased substantially beginning in late May 2020, the initial Quarantine Release Team's staffing was supplemented through JCDH's Clinical Services, Dental Health and Environmental Health Divisions. Over the spring and summer of 2020, numerous changes in the duration of the isolation period and symptom-based criteria for isolation termination were implemented based on emerging data and recommendations from the CDC. With each change, the Quarantine Release Team was retrained and the data repository adjusted. Between April 3 and mid-August 2020, when self-assessment for isolation termination was implemented, thousands of persons were assessed for quarantine release and hundreds of orders terminating isolation were issued to recovered patients supporting return to work and school.

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JCDH activated a team of nurses from its Clinical Services and Disease Control Divisions to provide COVID-19 testing and training. These nurses volunteered for this role and were mobilized to collect test specimens. Training and specimen collection were performed before, during and after JCDH's regular business hours and on weekends. COVID-19 test specimens were collected for persons experiencing homelessness, and at the Downtown and Bessemer campuses of the Jefferson County Jail, Juvenile Detention Center, and various nursing homes.

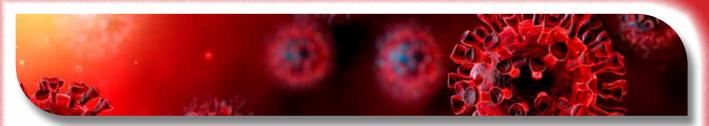


Nursing home COVID-19 test collection team



Launch of Legion Field COVID-19 testing site on May 15, 2020





To ensure the competency of staff from various agencies in COVID-19 test collection procedures, JCDH provided training and competency evaluation on test collection techniques, including staff-collected nasal/nasopharyngeal swabs and self-collection. Test collection training was conducted at the Jefferson County Jail, Juvenile Detention Center, nursing homes, and the Legion Field testing site.

JCDH provided staffing for a number of local COVID-19 testing sites. Multiple divisions within JCDH contributed to the testing effort through planning assistance, staffing events, printing educational material, procuring and delivering supplies, and promoting COVID-19 testing events.

JCDH assisted UAB Medicine by providing more than 20 employees from JCDH's Clinical Services and Environmental Health Divisions to staff a COVID-19 drive-thru testing site located on University Boulevard between March and July 2020. JCDH's General Services subdivision provided daily transportation to and from this testing site. The UAB COVID-19 test site on University Boulevard operated four hours per day, seven days per week and collected 150 to 350 tests daily. JCDH also provided staff to support UAB's additional COVID-19 "mobile" community testing sites located throughout Jefferson County.

JCDH joined forces with the cities of Birmingham and Homewood in establishing COVID-19 testing sites at Legion Field and the Homewood Athletic Complex. Employees from the Environmental Health and General Services provided oversight and assisted with traffic control at the Legion Field site and supported traffic control at the Homewood site. JCDH's Emergency Preparedness, Purchasing and General Services staff ensured testing sites maintained adequate supplies. Staff from the JCDH Print Shop printed educational materials for distribution.

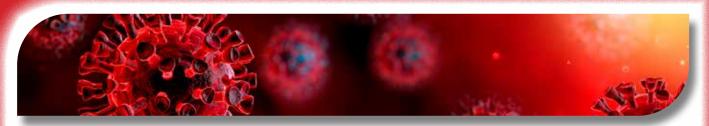
JCDH collaborated with the United States Office of the Surgeon General beginning in August 2020 to launch two surge testing sites in Center Point and Hoover, respectively. The location of these



Kim Cason, Julie Cobb, and Jonathan Stanton organizing supplies at the HHS Surge Testing Site

sites was based on the prevalence of COVID-19 within the county at that time. Surgeon General Jerome M. Adams, MD, MPH, visited the Hoover testing location in August 2020. A total of 6,370 COVID-19 test specimens were collected at the two surge testing sites over the two week period of operation.

At the request of Children's of Alabama and several pediatricians, JCDH launched a pediatric COVID-19 testing site at the JCDH Annex in October 2020. In preparation for the pediatric COVID-19 testing site, JCDH collaborated with Golden Point Solutions to design an electronic scheduling system where parents could create household accounts and register children for testing. Patients were referred to this testing site by school nurses, local pediatric and family medicine practices, and hospital emergency



departments. The pediatric testing site collected 441 COVID-19 test specimens.



Triage site for persons experiencing homelessness

During November 2020, JCDH with the federal government, AIDS Alabama, La Casita and Alabama Regional Medical Services provided COVID-19 testing at La Casita in Homewood to expand testing access to the Jefferson County Hispanic community. Staff from JCDH's Emergency Preparedness and Response subdivision and the Language Services Program informed the planning and implementation phases of this effort. The La Casita site tested 370 individuals for COVID-19 during November and December 2020.

Through Unified Incident Command, JCDH implemented expedited COVID-19 testing for public safety, municipal staff, and county governmental personnel through Golden Point Solutions. Various governmental jurisdictions identified

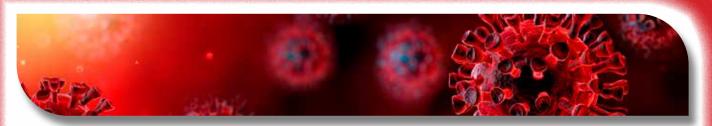
personnel who were trained by JCDH to observe nasal swab self-collection and package and transport test specimens. JCDH established a Call Center staffed by administrative personnel from the Clinical Services Division to receive calls, verify consents, and create lab requisitions in the Golden Point Solutions Lab Information System for these groups. Test results were sent directly to the tested individual via text message. During the year, 2,715 public safety, municipal staff and governmental employees were tested through this expedited testing process.

As outdoor temperatures dropped below freezing in late Fall 2020, the City of Birmingham opened warming stations for persons experiencing homelessness. JCDH provided consultation regarding the site to ensure social distancing and isolation of individuals experiencing symptoms of COVID-19 or another illness. On-site JCDH personnel screened individuals for illness and administered COVID-19 rapid testing. In addition, JCDH offered Influenza and Hepatitis A vaccines at no cost to individuals at these warming stations. JCDH participated in seven warming stations.

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The COVID-19 pandemic prompted JCDH to change its delivery of essential services to patients and the community. By ensuring the continuation of immunization services, Jefferson County residents were protected from vaccine-preventable diseases while the burden of respiratory illness during the influenza season was reduced.

As schools began to reopen in August 2020, requests for immunizations and Certificate of Immunization (COI) forms escalated. An appointment-based outdoor clinic was established for giving immunizations and providing COIs. This outdoor clinic reduced waiting time and allowed adherence to COVID-19 safety guidelines while services were rendered.



Nursing staff and medical clerks assessed vaccination status and administered vaccines. Clinical Services' Call Center, including dental assistants and staff from Clinical Services Administration were temporarily reassigned to issue COIs for persons whose vaccinations were up-to-date. Environmental Health Division staff assisted with traffic control for the outdoor clinic while Emergency Preparedness and Response staff provided oversight.

The demand for routine childhood vaccinations was decreased during the weeks leading up to the 2020-2021 school year in comparison to previous years. The vaccination clinic was relocated from its outdoor location into JCDH's Guy M. Tate (GMT) Building on September 8, 2020 after local school systems were back in session. JCDH experienced a surge in immunization requests during October 2020 and was unable to meet the demand using a single clinic location. Thus, a second vaccination clinic was opened at Eastern Health Center while the Logistics Branch explored service delivery options. After consideration, a portable building was placed at the Guy M. Tate Building in December 2020 for providing vaccinations.

As the demand for COIs remained high throughout August and September 2020, Dental Health, Call Center and Clinical Services' Administrative staff completed immunization documentation when an appointment was made and issued the COIs curbside in the parking lot. Between August 1 and December 31, 2020, 1,312 COIs were issued.

Reducing the spread of respiratory illnesses, including influenza, was more important during the COVID-19 pandemic. In November 2020, JCDH launched a no-cost, drive-thru flu vaccine clinic for Jefferson County residents over the age of six months. This clinic provided 2,923 influenza vaccinations.

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As the first cases of COVID-19 were identified in Jefferson County, JCDH implemented measures to protect its employees and the public from exposure. In March 2020, JCDH's Eastern and Western Health Centers were closed to the general public. Patients of closed JCDH health centers were provided services at the Central Health Center located in the GMT Building; however all JCDH Dental Clinics were closed. In accordance with CDC guidance, access to the GMT Building was limited to a single entrance and exit. Entrance Screening Stations were established at all JCDH facilities.

While expansive social media and public relations campaigns informed the public of the closure of the two JCDH facilities, a small number of persons continued to present at Eastern and Western Health Centers. Using on-site staff, JCDH assessed needs, provided information, and offered limited services in an outdoor setting at these centers. Entrance Screening Stations at Eastern and Western Health Centers were staffed by dental, nursing, and nutrition employees with oversight provided by dentists and nurse administrators.

The Entrance Screening Station at the GMT Building was staffed by employees from multiple divisions with oversight provided by a dentist and nurse administrator. Dental Assistants served as the primary



screeners at all locations. Nurses from Clinical Services and the Specialty Clinics provided triage services and assisted individuals presenting with medical questions and problems. Medical Clerks from Clinical Services and the Specialty Clinics ensured patients had appointments prior to building entry.

Throughout the pandemic, individuals continued to present to the GMT Building requesting birth, death, marriage and other certificates. Vital Records staff assigned to the GMT Building Entrance Screening Station implemented procedures for issuing certificates curbside while allowing the requestor to remain in his or her vehicle. Implementation of curbside services decreased disease exposure for employees and limited the number of individuals requiring building entry screening.

With in-person visits to the Environmental Health Division suspended, staff at the GMT Building's Entrance Screening Station assisted individuals presenting for services. A documentation drop-off station outside the GMT Building collected water samples, permitting fees, septic tank plans and other documents. Rabies specimens were received at the Entrance Screening Station and transported to a storage area. Educational materials providing general information for accessing Environmental Health's services were created and distributed. As select JCDH services were again provided on-site beginning in November 2020, Entrance Screening Station staff screened persons entering the building and monitored the number of individuals allowed entry to the Environmental Health Division to ensure social distancing.

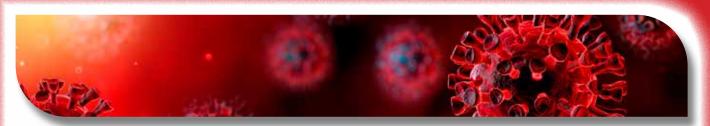
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The GMT Building Phone Operators and Clinical Services' Call Center played an integral role during the pandemic. As JCDH's healthcare services were limited or suspended for much of 2020 and COVID-19 cases increased, the Call Center quickly became the first line of communication with the community, JCDH patients, local medical providers and public health partners. The large increase in call volume, over 800 calls per day at its peak, required a significant staffing increase. The Call Center also scheduled appointments for the clinical services JCDH offered during 2020.

GMT Building Phone Operators and the Clinical Services Call Center routed calls pertaining to public health orders and Environmental Health's services to the Environmental Health Call Center. Calls received included requests from schools, businesses and the public seeking clarification on public health order compliance and complaints of non-compliance with public health orders. Using an intake procedure, Environmental Health provided guidance on public health orders, clarified changes to environmental health regulations, and responded to questions from the public.

An additional centralized telephone answering service, the Expedited Testing Call Center, was established within JCDH to support the Unified Incident Command's effort to expedite COVID-19 testing for municipal and governmental employees, as well as public safety workers. The Expedited Testing Call Center received more than 5,950 calls, and 2,715 COVID-19 tests were arranged through this expedited testing system.

As the volume of calls received by the Prevention and Epidemiology subdivision increased,



administrative support personnel throughout JCDH were reassigned to assist with managing calls. To increase efficiency and minimize call transfers, the Management Information Services Division created a call tree enabling the caller to identify the purpose of the call. Based on the caller's selection, calls were channeled appropriately.

Throughout 2020, JCDH responded to the ever-evolving COVID-19 pandemic through both countywide Unified Incident Command and JCDH Incident Command structures and processes. As the needs of the community changed, these formal structures and activities required the reassignment of staff to new roles. Despite the impact of the COVID-19 pandemic, JCDH continued to protect the health of Jefferson County residents through more typical activities of its divisions, sub-divisions and programs which are briefly described in the following sections of this report.



Note placed on "War Room" door by employee Sophia Hussain on April 23, 2020

## **Disease Control**

Jefferson County Department of Health's Disease Control Division's activities prevent or reduce the spread of infectious disease in Jefferson County. This division consists of the Sexually Transmitted Disease, Prevention and Epidemiology, Tuberculosis, and the Specialty Clinic subdivisions.

### Sexually Transmitted Disease (STD) Program

During 2020, STD Disease Intervention Specialists provided fast track screening, contact tracing with associated testing and treatment, and partner services to prevent the spread of sexually transmitted infections (STIs). While an overall increase in STIs was observed, the number of syphilis cases in pregnant women was of particular concern and required aggressive treatment and partner notification for the prevention of congenital syphilis.

### Prevention and Epidemiology

The Prevention and Epidemiology (P&E) subdivision investigates notifiable diseases, diseases required by law to be reported to governmental entities. These investigations include emerging infectious diseases, such as COVID-19, as well as outbreaks of a number of other infectious diseases. P&E collaborates closely with community partners including medical providers, schools and long-term care facilities to prevent and mitigate disease transmission.

There were two major community-wide disease outbreaks in Jefferson County in 2020: hepatitis A and COVID-19. The Incident Command System structure was initiated for both outbreaks, and P&E coordinated with community partners to reach vulnerable populations with education and vaccination programs. P&E led Jefferson County's case investigation and contact tracing for the COVID-19 pandemic response. This work, performed in association with the Alabama Department of Public Health (ADPH) and the Centers for Disease Control and Prevention (CDC), forged closer working relationships with community partners including schools, hospitals, long-term care facilities, jails and prisons.



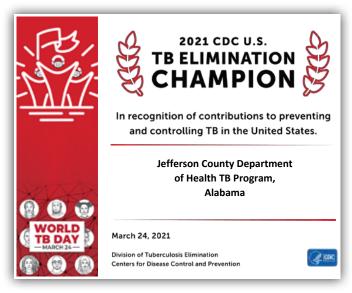
### **Tuberculosis**

The Tuberculosis (TB) Control subdivision provides services to prevent and treat TB. The overall objective of the TB Program is reducing the burden of TB within Jefferson County. This is achieved through education, evaluation, and provision of therapy for county residents with suspected or confirmed active TB or latent TB infection. Medication for active and suspected TB cases is directly observed to ensure completion of the prescribed therapy and to reduce drug resistance to available treatments. As it became increasingly difficult to observe TB cases face-to-face daily during the COVID-19 pandemic, ADPH developed a video-based Directly Observed Therapy protocol. During 2020, an

increase in TB cases among foreign-born residents was observed representing 30 percent of TB cases in Jefferson County.

## **Disease Control**

The TB Program followed 12 active TB cases during the year, a decrease from 2019. A contact investigation for each TB case was initiated to identify, evaluate and treat exposed individuals and prevent disease spread. During the year, over 60 TB case contacts were identified and screened. As a result of its efforts, the JCDH TB Program was recognized by the CDC as a TB Elimination Champion for 2020.



### Specialty Clinic

The Specialty Clinic, the JCDH clinic that treats patients with known or suspected STIs or TB, and evaluates persons with travel and other infectious disease related needs, administered 920 doses of hepatitis A vaccine in response to the county's hepatitis A outbreak during the year. Hepatitis A vaccines were administered to 340 high-risk and 580 low-risk individuals. In March 2020, Jefferson County had 12 identified cases of hepatitis A disease. By the end of 2020, over 150 confirmed cases of hepatitis A disease were documented. Throughout the COVID-19 pandemic, JCDH continued to address the hepatitis A disease outbreak in high-risk communities. While collecting COVID-19 test specimens in Jefferson County and Birmingham jails, JCDH provided 145 doses of hepatitis A vaccine. JCDH also continued to offer hepatitis A vaccine through its Sexual Health Clinic where 659 doses were given in 2020. JCDH's Child Health Clinic offered hepatitis A vaccine as part of routine childhood immunizations.

Throughout the year, 9,089 unique patients received care in the Specialty Clinic. Due to the COVID-19 pandemic, the delivery method for some Specialty Clinic services was altered to reduce risk of transmission of the virus causing COVID-19. Telehealth services were implemented to decrease the length of appointments and risk of COVID-19 exposure. The International Travel Clinic discontinued pre-travel consultations in April 2020 but administered 303 doses of Yellow Fever vaccine for persons with a prescription. Overall, the Specialty Clinic administered 1,396 vaccines to Jefferson County residents. Through the Sexual Health Clinic, 241 HIV Pre-exposure Prophylaxis (PrEP) appointments were provided, and 82 patients were evaluated for hepatitis C infection.



In recognition of its PrEP program, the Sexual Health Clinic received a Model Practice Award from the National Association of County and City Health Officials (NACCHO).

The Jefferson County Department of Health (JCDH) Environmental Health Division includes the Community Environmental Protection, Air and Radiation Protection, Food and Lodging Protection, Community Assessment, and Emergency Preparedness and Response subdivisions.

### Community Environmental Protection

The Community Environmental Protection (CEP) subdivision includes the Onsite Sewage, Public Swimming Pool, Community Sanitation, Rabies Control, Vector Control, Body Art and Watershed Protection sections. Each section completes inspections, conducts investigations and provides education on environmental health issues affecting residents of Jefferson County.

Investigation of environmental concerns and inspection of select facilities allow JCDH to monitor compliance with regulations; however, education is used as a proactive means of preventing health concerns and improving environmental health conditions. The Watershed Protection section conducted training on erosion and sedimentation control and stormwater standard operation procedures for 33 builders and municipal officers during 2020. The Watershed Protection section also provided additional community education through pamphlets entitled, "How to Keep Our Water Clean," "Protecting Streams and Storm Drains from Pet Waste Pollution" and "Proper Disposal of Pesticides."

JCDH and the Valley Creek Cleanup Committee held its 10th Biannual Cleanup on the Valley Creek Watershed from August 13 through August 15, 2020. Over 3.52 tons of trash and debris were removed from the watershed by JCDH staff and 219 volunteers during this event.

JCDH, Storm Water Management Authority, Inc., and the City of Bessemer and Jefferson County Stormwater programs conducted a Household Hazardous Waste



Valley Creek Cleanup volunteers



Trash and debris removed from the Valley Creek Watershed

# COMMUNITY ENVIRONMENTAL PROTECTION ISSUED PERMITS

ТҮРЕ	NUMBER
Mobile Home Park	52
Body Art Facility	48
Solid Waste Transfer Station	2
Total	102

#### COMPLAINT INVESTIGATIONS

BOM EXITT INVESTIGATION			
ТҮРЕ	NUMBER		
Sanitation	872		
Animal Exposure	705		
Water Quality	338		
Onsite Sewage Disposal	295		
Total	2,210		

Collection Day on July 25, 2020. JCDH staff and 90 volunteers received and properly disposed of 316,158 pounds of waste received from 1,359 community members.



Vehicles line up for Household Hazardous Waste Day on July 25, 2020



Waste items collected from Jefferson County residents



Over 300,000 pounds of waste was collected at the 2020 Household Hazardous Waste Day



Volunteers gather items for proper disposal

INSPECTIONS				
ТҮРЕ	NUMBER			
Onsite Sewage Disposal	2,072			
Pool/Spa	1,117			
Industrial Stormwater Runoff	536			
Stormwater Samples	250			
Garbage Hauler	216			
Mobile Home Park	104			
Body Art Facility	91			
School and Jail	31			
Solid Waste Facility	15			
Solid Waste Transfer Station	2			
Total	4,434			



### Air and Radiation Protection Subdivision

The Air and Radiation Protection subdivision includes the Air Pollution Control, Air Monitoring and Radiological Health Programs.

The Air Pollution Control Program regulates sources of air pollution encompassing industrial sources. Area sources of pollution include gasoline stations and tanker trucks, dry cleaners, open burning, and asbestos demolition and renovation activities.

For industrial and area sources of air pollution, JCDH staff conducted routine and periodic inspections of facilities, ensured consistent compliance with regulations through receipt of reports and review of records, and initiated regulation enforcement actions when warranted.

The Air Monitoring Program operates a complex network of air monitoring stations located throughout Jefferson County to assess ambient air quality. Data from these monitors are used to determine compliance with the Environmental Protection Agency's National Ambient Air Quality Standards for criteria pollutants.

The Air Monitoring Program issues daily air quality forecasts for the Birmingham area based on the Air Quality Index (AQI). The AQI is a color-coded scale displaying the level of air pollution and the level's associated health effects. Fine particle ( $PM_{2.5}$ ) pollution forecasts are provided by JCDH year-round; the Alabama Department of Environmental Management forecasts ozone (O<sub>3</sub>) levels during the warm season. An Air Quality Alert is issued when a high AQI is forecast. The public is encouraged to decrease emissions from personal activities such as automobile use on days with higher air pollution levels.

	AQI BASICS FOR OZONE AND PARTICLE POLLUTION				
Daily AQI Levels of Values of Description of Air Quality Color Concern Index					
Green	Good	0 to 50	Air quality is satisfactory, and air pollution poses little or no risk.		
Yellow	Moderate	51 to 100	Air quality is acceptable. However, there may be a risk for some people, particularly those who are unusually sensitive to air pollution.		
Orange	Unhealthy for Sensitive Groups	101 to 150	Members of sensitive groups may experience health effects. The general public is less likely to be affected.		
Red	Unhealthy	151 to 200	Some members of the general public may experience health effects; members of sensitive groups may experience more serious health effects.		
Purple	Very Unhealthy	201 to 300	Health Alert: The risk of health effects is increased for everyone.		
Maroon	Hazardous	301 and higher	Health warning of emergency conditions: Everyone is more likely to be affected.		

The Radiological Health Program evaluates equipment and operating procedures of x-ray and tanning facilities throughout the county. Assuring compliance with regulations provides protection against accidental harmful exposures during medical x-rays and tanning salon visits.

During the COVID-19 pandemic, Air and Radiation Protection Program staff also performed actions supporting disease mitigation including, but not limited to:

- Providing critical staffing at some of the county's first COVID-19 testing sites;
- Performing quarantine surveillance;
- Delivering COVID-19 test specimens to labs;
- Assisting with the set-up and staffing of test sites for at-risk groups, including persons experiencing homelessness or in drug rehabilitation;
- Staffing and implementing mobile COVID-19 testing locations;
- Developing online processes for providing critical services, and
- Assisting with the operation of the two federal COVID-19 testing locations in August and September 2020.

### Food & Lodging Protection

The Food & Lodging Protection (FLP) subdivision regulates food establishments, lodging facilities, communal living facilities and childcare centers. Each of these industries is governed by separate regulations, and for these, FLP is responsible for permitting, inspecting, investigating complaints, and implementing regulation enforcement action. In addition, FLP provides guidance to each industry on sanitary operations and regulatory compliance. Consumer food safety information and formal food safety education programs for industry personnel are also provided.

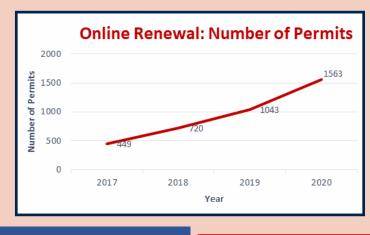
As the effects of COVID-19 impacted many business entities, regulated industries under FLP jurisdiction were likewise impacted. In response, FLP shifted focus from recommending ways to conduct normal business with social distancing and disinfection to providing guidance for industry in a lockdown environment. When the first countywide public health order was issued for Jefferson County, FLP responded to requests for interpretation and methods of order compliance, the criteria for essential business determination, and complaints of businesses alleged to be in order violation. Each issuance of the additional 20 Jefferson County and statewide public health orders necessitated review and interpretation, a consensus on the interpretation, and new guidance for staff and industry.

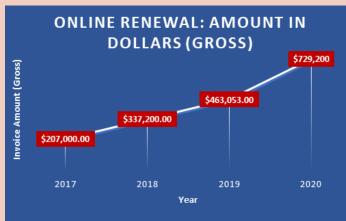
During 2020, FLP received, investigated or referred 1,046 complaints. Throughout the progression of public health orders and as businesses proposed reopening, FLP reviewed reopening plans for compliance with local and state orders and alignment with Centers for Disease Control and Prevention (CDC) guidance for numerous individual businesses and events ranging from childcare to the Alabama State Fair. FLP also provided guidance on school system plans for student meal provision. Additionally, FLP field staff performed surveillance for order compliance in retail stores and businesses.

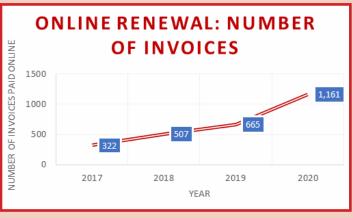
Throughout 2020, the use of the FLP online payment system continued to increase as compared to use during previous years. Online payment created efficiencies for both owner/operators and JCDH.

YEAR	NUMBER OF PERMITS* PAID ONLINE	PERCENT CHANGE FROM PREVIOUS YEAR	NUMBER OF Invoices Paid Online	PERCENT CHANGE FROM PREVIOUS YEAR	AMOUNT PAID ONLINE (GROSS)	PERCENT CHANGE FROM PREVIOUS YEAR
2017	449		322		\$207,000	
2018	720	60%	507	57%	\$337,200	63%
2019	1,043	45%	665	31%	\$463,053	116%
2020	1,043	50%	1,166	75%	\$729,200	57%

<sup>\*</sup>A proprietor may have more than one permit included on an invoice.







Data and graphs demonstrate increased use of the online payment renewal system

Surprisingly, while there were fewer new food permits issued by the FLP subdivision in 2020 than in 2019, fewer food permits were inactivated during 2020. These changes resulted in a similar net gain in the number of total food permits issued in 2020 compared to 2019.

PERMITS				
FOOD PERMITS/ESTABLISHMENTS	2020 Number	2019 Number	PERCENT Change	
Food Service Establishment	1,753	1,777	-1.3%	
Limited Food Service	802	797	0.6%	
Limited Retail Food Store	323	325	-0.6%	
Mobile Food Vendor	230	186	23.7%	
Childcare Center (food permit)	213	214	-0.5%	
Retail Food Store	207	213	-2.8%	
Public School Lunchroom	161	158	1.9%	
Bar and Lounge	153	148	3.4%	
Ballpark Concession Stand	148	147	0.7%	
Temporary Food Service Vendor	119	199	-40.2%	
Food Processor	82	73	12.3%	
Nursing Home Kitchen	50	50	0%	
Elderly Feeding Site	32	33	-3.0%	
Private School Lunchroom	24	24	0%	
Other Institutional Kitchen	17	17	0%	
Hospital Kitchen	14	14	0%	
Charitable Non-Permitted Food Establishment	9	9	0%	
Jail and Prison Food Service	5	6	-16.7%	
Summer Feeding Site	4	4	0%	
Total Permitted (Food)	4,346	4,394	-1.1%	
OTHER FACILITY PERMITS BY TYPE	2020 NUMBER	2019 NUMBER	PERCENT CHANGE	
Childcare	274	287	-4.5%	
Hotel/Motel	131	131	0%	
Communal Living	51	57	-10.5%	
Camp	17	13	30.8%	
Other Facilities Total	473	488	-3.1%	
Total Permitted Facilities	4,819	4,882	-1.3%	

INSPECTIONS						
2020 2019 PERCENT Number Number Change						
Food Inspections	8,633	12,819	-32.7%			
Lodging (hotel/motel)	43	112	-61.6%			
Communal Living	11	47	-76.6%6			
Camp	0	6	-100%			
Childcare	204	175	16.6%			
<b>Total All Inspections</b>	8,891	13,164	-32.5%			

COMPLAINTS INVESTIGATED					
2020 2019 PERCENT Number Number Change					
Total Number of Complaints Received	601	802	-25.1%		
Total Number of Complaint Investigations	846	1,256	-32.6%		

FOOD SAFETY EDUCATION					
FOOD HANDLER TRAINING 2020 2019 PERCENT BY TRAINING LOCATION NUMBER NUMBER CHANGE					
Classroom (at JCDH)	304	1,307	-76.7%		
Satellite (offsite)	0	566	-100%		
Online	8,173	12,279	-33.4%		
Total	8,477	14,152	-40.1%		

CERTIFIED MANAGER COURSE					
2020 2019 PERCENT Number Number Change					
Number of Classes/Exams	3	20	-85%		
Number of Participants	67	375	-82.1%		
Number of Certifications Issued	37	207	-82.1%		

### **Environmental Health**

OTHER SERVICES				
	2020 Number	2019 Number	PERCENT Change	
Temporary Food Events	37	83	-55.4%	



Jonika Smith received the 2020 Alabama People Against a Littered State Governor's Award and the Jean McRady Service Award

#### Community Assessment

In 2020, the Community Assessment subdivision supported the Environmental Health Division's response to COVID-19 while performing typical roles in tobacco use prevention and control, community health improvement and stormwater management. Notably, an Environmental Health Specialist from Community Assessment received the 2020 Alabama People Against a Littered State (AL PALS) Governor's Award and the Jean McRady Service Award in recognition of ongoing work, dedication and enthusiasm for reducing litter in and around Jefferson County and along local waterways.

### Emergency Preparedness and Response

The Emergency Preparedness and Response (EP) subdivision utilizes an "all hazards" approach for preparing, exercising, training and responding to all types of emergencies and public health events. With the emergence of the COVID-19

pandemic, EP capitalized on previous planning and exercises to respond to the novel public health threat. In collaboration with numerous community partners, EP assisted in activating the Regional Distribution Site for receiving and distributing personal protective equipment (PPE) for healthcare partners from state and federal stockpiles when these resources were in short supply.

At the emergence of the COVID-19 pandemic, EP coordinated specimen transport to the Alabama Department of Public Health (ADPH) Bureau of Clinical Laboratories for COVID-19 testing. Knowledge gained from previous training and mock drive-thru vaccination and medication administration clinics was instrumental in assisting community partners in the establishment and operation of COVID-19 testing sites. Prior relationships with state and local partners and new relationships formed during 2020 enabled EP to more efficiently collaborate and respond to the needs of the local healthcare community. Networks established through the Jefferson County Healthcare Coalition (HCC) were crucial in coordinating healthcare efforts, maintaining situational awareness, and providing critical guidance to HCC Coalition members throughout 2020.

# Health Equity and Population Health

In 2020, JCDH launched its Health Equity and Population Health Division. Multiple internal and external partners were engaged in mapping this new division's future.

Throughout the year, Health Equity and Population Health continued previous work on the Overdose Data to Action (OD2A) grant. As part of this grant, an online naloxone training platform was implemented. Following a Declaratory Ruling of the Alabama Board of Medical Examiners, JCDH began physician-driven dispensing of mail order naloxone kits for Alabamians at risk of opioid overdose or in a position to assist someone at risk of opioid overdose. Through the coordination of multiple data sources, JCDH developed the ability to identify overdose hot spots within 24 hours of an overdose event. Due to the increased number of overdoses during the COVID-19 pandemic, JCDH launched the Jefferson County COVID-19 Related Overdose Task Force, bringing together community partners to collaborate on overdose solutions. In partnership with One Roof, JCDH significantly increased naloxone outreach to persons experiencing homelessness and provided naloxone use training in multiple sites across the county. Despite the challenges of the COVID-19 pandemic, JCDH trained 1,008 individuals to use naloxone to reverse the effects of opioid overdose.



Naloxone kits are free to anyone who completes training

Multiple additional duties comprised the activities of the Health Equity and Population Health Division during 2020. Staff served as team leads at the federal COVID-19 Testing Site in Hoover, Alabama. Pre-diabetes education was provided during Fiesta, a celebration of Hispanic culture. As the 2020 Fiesta was conducted virtually, JCDH produced a series of fun and informational videos on prediabetes, healthy eating and taking the American Diabetes Association's Online Risk Test.

In 2019, JCDH received grant funding from the Alabama Department of Public Health (ADPH) to improve awareness of prediabetes, diabetes and support services. Sixteen health coaches were trained through this funding to deliver a nationally recognized diabetes prevention curriculum, PreventT2. This training prompted the launch of the PreventT2 program for JCDH employees, led by JCDH health coaches. Due to the COVID-19 restrictions on gatherings, the program was paused. However, PreventT2 groups met regularly until March 2020, and the feedback from participants was very encouraging. The PreventT2 co-worker cohorts motivated each other toward healthier lifestyles and preventing diabetes.

From Day One (FDO) is JCDH's comprehensive patient-centered program educating and supporting expectant mothers from the first trimester of pregnancy through the child's first year of life as a strategy to reduce the county's high infant mortality rate. FDO utilizes a Community Health Worker (CHW) model to provide direct service, including client assessment, infant safety, home environmental assessment, medical adherence evaluation, health goal monitoring, primary health care visit appointment reminders, postpartum depression screening, food insecurity screening and health education, to pregnant women living in poverty.

The CHWs providing clinical support through FDO have a deep understanding of the community they serve. Among the program's four CHWs, two are bilingual in Spanish. From the 350 referrals made to FDO through the UAB Maternity Program, 101 active clients participated in the FDO Program, and 72 women graduated from it.

To address some of the social determinants of health impacting infant mortality, FDO maintains partnerships with

# **Health Equity and Population Health**

the following organizations: Cribs 4 Kids, IMPACT Family Counseling, Bundles of Hope, St. Vincent's Maternity Department, Highland United Methodist Church's Project ID, JCDH Dental Health, and numerous clothing closets, food pantries, and local educational organizations offering GED completion services.

FDO Program participants also participate in a Baby Safety Shower. The Baby Safety Showers are held quarterly in collaboration with various professional organizations and provide information on safety and childhood injury prevention. A total of ten baby safety showers served 130 FDO maternity clients and 141 family members. In March 2020, due to COVID-19 restrictions, FDO restructured the Baby Safety Shower to a virtual format with drive-by, touchless educational incentive distribution.

Through a partnership with IMPACT Family Counseling, low-income maternity patients and maternity patients with Medicaid are offered safe sleep education to further reduce infant mortality.

FDO received a National Association of County and City Health Officials Model Practice Award in 2020 based on the program's responsiveness and innovation, community collaboration, evaluation and sustainability.

The Maternal and Child Health (MCH) Roundtable, another initiative supported by the Health Equity and Population Health Division, grew to include 69 stakeholder organizations. The MCH Roundtable collaborates to provide information on available resources and coordinate services to improve maternal health and birth outcomes.



FDO Baby Safety Showers provide new mothers with supplies to improve newborn safety

### Clinical Services

The Clinical Services Division of the Jefferson County Department of Health (JCDH) includes Adult Health, Family Planning, Child Health, Public Health Language Services, Social Services, the Special Supplemental Nutrition Program for Women, Infants and Children (WIC), and Dental Health.

#### Adult Health

COVID-19 significantly affected the operations of JCDH clinics in 2020. Adult Health Clinics initially transitioned to a telemedicine care delivery model in April 2020. However, due to decreased patient volume over the past few years and increased primary care access through Federally Qualified Health Centers, the Adult Health Clinics at JCDH were discontinued on September 30, 2020.

#### Family Planning

After JCDH's clinics discontinued in-person appointments in early April 2020 due to COVID-19 restrictions, Family Planning implemented telemedicine appointments with drive-thru contraceptive distribution using a mobile unit. This delivery model allowed access to contraceptive services for approximately 1,000 patients per month. In-person Family Planning Clinic services resumed in late September 2020 at Central and Eastern Health Centers, while telemedicine services remained available.

#### Child Health

Beginning March 23, 2020, all Child Health visits, with the exception of newborn visits, were provided via telemedicine. Due to the community-wide stay-at-home orders and JCDH staff shifting focus to support COVID-19 efforts, total monthly Child Health clinic visits decreased by 39% between April 2019 and April 2020. As Personal Protective Equipment (PPE) became more readily available, Child Health slowly began to increase in-person visits. Despite not returning to full capacity by the end of fiscal year 2020, Child Health increased its monthly visits to 58% of the total child health visits of October 2019. Child Health Clinic visits increased through telemedicine, providing well-child visits and immunizations at Central Health Center, using negative pressure rooms to examine and treat infants born to mothers testing positive for COVID-19 at delivery, and providing well-child and in-person sick child clinics at Western Health Center starting September 21, 2020. Despite the challenges, the Child Health program experienced in 2020, patient satisfaction increased as measured by patient surveys.

### Public Health Language Services

During 2020, JCDH's Public Health Language Workers (PHLW) provided phone-based interpretation for multiple

JCDH services. Five PHLWs conducted COVID-19 contact tracing to serve Jefferson County's Limited English Proficiency (LEP) population. PHLWs assisted the COVID-19 Call Center in providing education to meet language access needs and conducted interpretation for telemedicine appointments. In addition, collaboration with media outlets serving the LEP community improved communication regarding COVID-19. JCDH provided American Sign Language (ASL) interpretation for news conferences conducted by the Jefferson County Health Officer. JCDH's ability to provide ASL interpretation on demand was strengthened through an enhanced internal Wi-Fi



JCDH Public Health Language Workers

## **Clinical Services**

system. During 2020, interpretation services were provided for 43,245 JCDH encounters and in an array of languages including Spanish, K'iche', Vietnamese, Arabic, Russian, Portuguese, Luganda, Mandarin, Cantonese, Korean and French.

JCDH's COVID-19 pandemic response resulted in increased need for the translation of written communications into the many languages of community residents. During 2020, 713 document translations were prepared by JCDH's PHLWs.

Again in 2020, JCDH participated in Fiesta, the largest celebration of Hispanic culture and language in Alabama, by assisting with the online event. Several PHLWs provided ideas for making the event a success.

#### Social Services

JCDH's Social Services program provided medical and social support services to patients and providers. The COVID-19 pandemic created many challenges for the community and exposed significant service gaps. Embodying the definition of teamwork, Social Services responded to new and enhanced challenges by expanding roles and collaborating to provide assistance in other JCDH program areas. Management of needs such as prescription assistance, breast and cervical cancer screening enrollment, immunization adherence, lead poisoning prevention, coordination with homeless services, HIV pre-exposure prophylaxis (PrEP), hepatitis A and C education, overdose prevention, Medicaid enrollment, and community resource referral were continued. In addition to 5,544 patient encounters, Social Services delivered a human trafficking presentation and provided over 50 Medicaid Application Assister certifications.

#### **WIC**

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) continued to offer nutrition education and breastfeeding support to WIC-eligible families at Central, Eastern, Morris and Western Health Centers. The WIC Mobile Clinic project was completed in January 2020 to temporarily house limited WIC services after Morris Health Center officially closed on April 1, 2020.



WIC mobile unit

To continue service provision for the most vulnerable WIC families, the WIC Mobile Clinic was stationed in the Guy M. Tate Building parking deck to serve special formula families, breastfeeding families, and meet other requests.

On average, 12,985 WIC participants were served monthly during 2020. Participants received education on proper

COVID-19 challenged the WIC Program to implement new models for service delivery. The Alabama WIC Program received waivers from United States Department of Agriculture Food and Nutrition Services on March 24, 2020 allowing flexibility in some WIC certification requirements. These changes enabled JCDH to provide services via phone.



Linda Walker, RN and Margaret Smith, CRNP in front of WIC mobile unit

## **Clinical Services**

nutrition and choosing human milk as baby's first food. JCDH's Breastfeeding Peer Counselor Program remained active during 2020, and four JCDH nutritionists completed the requirements to become International Board Certified Lactation Consultants.

#### **Dental Health**

Oral health is essential for overall health, but oral health disparities exist for certain populations. The Dental Health subdivision continued to pursue health equity in oral health during 2020. Dental Health provided preventative care and treatment to underserved and/or uninsured individuals in Jefferson County to reduce the risk factors and disease burdens of preventable diseases. During January, February and the first week of March 2020, Dental Health provided 2,030 patient visits for preventative or treatment services at Central, Eastern and Western Dental Clinics.



As poor oral health is linked to adverse birth outcomes such as preterm birth and low birth weight, Dental Health continued to collaborate with From Day One (FDO) by providing dental care for the program's participants. New FDO enrollees without a dental home are eligible for referral to the JCDH Dental Clinic. Oral health education was included in the FDO Baby Safety Showers.

Through ongoing collaboration with Project Homeless Connect and One Roof, dental care was provided for the local homeless population at no charge to the patient. Ongoing collaborations with Cooper Green Mercy Health Services' Primary Care and

the JCDH Adult Health program allowed referral of patients with diabetes to JCDH Dental Clinics.

Until April 2020, Dental Health promoted oral health awareness and disease prevention through outreach at schools and community events and promoted the importance of a dental home and regular dental care. In partnership with the Alabama Department of Public Health (ADPH), a public service video was produced and distributed educating viewers on the HPV vaccine, cancer prevention, and the importance of preventive dental visits for pregnant women. The video was released during October, which is recognized as National Dental Hygiene Month.

Protecting oral health for the future requires a well-trained workforce. During 2020, Dental Health provided lectures on the topics of dentistry and public health. In March 2020, JCDH's dental services were suspended due to the COVID-19 pandemic and lack of adequate personal protective equipment (PPE) to ensure worker and patient safety. However, JCDH dentists provided consultation for patients experiencing dental problems via telephone, teledentistry visits, and referrals for in-person care, as needed.

As national attention was given during the COVID-19 pandemic to infection prevention and control, JCDH Dental Health staff remained abreast of current scientific guidance and provided infection control expertise internally and externally. Dental Health staff reviewed updated guidelines from the Centers for Disease Control and Prevention, Occupational Safety and Health Administration, the Organization for Safety Asepsis and Prevention, and the American Dental Association. Staff additionally reviewed educational resources related to dentistry in the age of COVID-19, researched enhanced engineering controls such as air purification and ultraviolet germicidal lighting systems, and reviewed potential PPE products and disinfectants in preparation for returning to in-person services.

# **Quality Improvement and Decision Suppport**

The Quality Improvement and Decision Support (QIDS) Division provides assessment, planning and evaluation services for internal and external operations of the Jefferson County Department of Health (JCDH). QIDS leads JCDH's quality improvement and performance management programs. Beginning in April 2020, QIDS developed, implemented and provided core staffing for the JCDH Incident Command Quarantine (Isolation) Release Team. Additionally, QIDS supported COVID-19 case and contact tracing, conducted research and provided technical writing for the Subject Matter Experts Unit of the Unified Incident Command.

QIDS continued to develop, with numerous partners, the goals, strategies, tactics and metrics for the strategic issues identified within Jefferson County's five-year strategic plan for health, the <u>Community Health Improvement Plan for Jefferson County</u>, <u>Alabama (CHIP)</u>. The five strategic issues are:

- Control Gun Violence and Improve Community Safety;
- Provide a Timely, Safe, Equitable and Well-maintained Public Transportation System;
- Improve Mental Health Care Access and Utilization;
- Decrease Obesity, and
- Advance Health Equity through Equitable Policies and Access to Resources and Services.

As a result of the partnership and learning initiative between JCDH, Faith in Action Alabama, the City of Birmingham's Office of Peace and Policy, Mom's Demand Action, the UAB Trauma and Burns Division, and other agencies targeting violence prevention, a decision was made to explore the feasibility of a hospital-based violence intervention program (HVIP) in Jefferson County. HVIPs are an evidence-based strategy for reducing violence using a multi-disciplinary approach to provide linkage to hospital and community-based resources addressing the underlying risk factors for violence for hospitalized violence victims and their families. JCDH executed a contract for training and technical assistance with the Health Alliance for Violence Intervention to assist in potentially launching an effective HVIP in 2021.



As a result of COVID-19, many partner agencies shifted internal priorities to meet the challenges of the pandemic; however, progress was realized in developing and launching aspects of the CHIP including engagement with the Birmingham Jefferson County Transit Authority (BJCTA) on its Transit Re-imagining Initiative, enhancements to the provision of mental health assessment and support services for children, improving food security, and offering services to address obesity. Throughout the CHIP's development and implementation, as well as JCDH's response to the COVID-19 pandemic, have been intentional actions to advance health equity through policy and access to resources and services.

QIDS and other divisions within JCDH continued to support the Health Action Partnership of Jefferson County, (HAP), a coalition of over 100 organizations working collaboratively to make Jefferson County, Alabama a healthier place to live, learn, work, worship and play. The HAP Optimizing Healthcare



Access Priority Group, co-chaired by JCDH's Khalilah Brown, MD and Darlene Traffanstedt, MD, includes several subgroups. The Maternal and Child Health Roundtable conducted a partner survey identifying the needs of mothers and children exacerbated by COVID-19. The Drug Overdose subgroup, in response to a substantial increase in opioid drug overdose deaths in Jefferson County, identified drug overdose hotspots using funding from the Centers

# **Quality Improvement and Decision Suppport**

for Disease Control and Prevention's Overdose Data to Action grant. The Drug Overdose subgroup also requested full funding for the Alabama Perinatal Quality Collaborative to increase treatment beds for pregnant women and women with small children experiencing substance use disorders. The Safety Net Leaders subgroup, comprised of healthcare providers serving uninsured and underinsured populations, continued development of a strategic plan for coordinating indigent healthcare within Jefferson County and filling service gaps.

The HAP's Health Equity Priority Group explored providing its Health Equity Orientation and Equity, Diversity and Inclusion trainings using a virtual platform with the intent to offer these services to agencies and the community.

QIDS led several teams in implementing the 2017-2021 JCDH Strategic Plan. Included in this work were employee focus groups and data analysis regarding employee awareness of health equity concepts, as well as the continued development of JCDH's performance management system.

Quality improvement activities conducted in 2020 included ongoing data analysis to inform improvements in the New Employee Orientation Program, enhancing community satisfaction with Sexual Health Clinic access, data support for the Centers for Disease Control and Prevention's Gonococcal Isolates Surveillance Project, and survey design and analysis for the 2020 Household Hazardous Waste Day.

The Let's Get Down 35211: A High Blood Pressure Management Program, an intervention designed to reduce uncontrolled high blood pressure in residents of the 35211 zip code through a 12-week lifestyle modification program, continued enrollment through the first three months of 2020. Individuals enrolled in the program received coaching and assessments virtually between April and August 2020.



## Finance and Administration

The Finance and Administration Division of the Jefferson County Department of Health (JCDH) includes Accounting, Central Billing Office, General Services, Human Resources, Management Information Systems, Public Relations and Vital Records.

#### **Human Resources**

During 2020, 39 full-time employees and 19 interns were hired and onboarded by Human Resources. There were 26 retirement applications processed. Additionally, temporary employees were hired to assist with COVID-19 activities.

Every year, staff training is a focus for JCDH. All employees participated in online annual compliance and privacy training. Further, JCDH management staff completed a *Data Analytics for Public Health* course and training on coaching and giving feedback to employees.

The main focus of the Human Resources Department and its Risk Management section for 2020 was support of JCDH's COVID-19 activities. Human Resources and Risk Management worked closely with JCDH's COVID-19 Incident Command to keep employees safe and well during the pandemic.

#### **General Services**

The General Services subdivision is responsible for the facilities management of 16 department properties including renovation, remodeling, maintenance, custodial services, overall safety and security, landscaping, and upkeep of grounds. General Services also includes the operations and activities of the Print Shop and Record Management. Key projects initiated or completed in 2020 included:

- Logistical support and recommendations for multiple COVID-19 related projects;
- Completion of the Guy M. Tate (GMT) Building renovation project, and
- Improvement of safety and security at the GMT Building through:
  - o hiring of additional security staff;
  - o initiating an upgrade of JCDH's security and surveillance systems, and
  - o initiating the installation of an integrated paging system.

## **Management Information Systems**

A 2020 priority for the Management Information Systems (MIS) subdivision was workspace mobility. Prior to COVID-19, MIS issued dozens of laptops annually to JCDH divisions. Once the COVID-19 pandemic began to impact JCDH operations, MIS issued over 200 additional laptops and more than 65 additional iPhones. Wi-Fi access points were added outside JCDH buildings to allow employees access to the internal network while on JCDH property without entering the facilities.

The MIS Data Management Team and the JCDH Health Equity and Population Health Division created a near real-time opioid overdose rapid response platform with funding from the Overdose Data to Action grant. This work involved automating and geocoding multiple data feeds from community partners to create a dashboard for analyzing and informing actions to combat opioid overdoses.

The MIS Data Management Team, JCDH's Disease Control Division, UAB Center for AIDS Research, and Harvard University Center for AIDS Research collected legacy and current patient data from the JCDH Sexual Health Clinic

### Finance and Administration

to apply a predictive analytic algorithm for identifying segments of the community at highest risk of acquiring new HIV infection. In addition, the Data Management Team rapidly built GIS-centric infrastructure to assist the Disease Control Division in monitoring COVID-19 spread.

The MIS Development Team implemented two iOS applications, an employee telephone directory and a JCDH Storm Water application. The Development Team also created custom epidemiology software and reports to support JCDH's Disease Control Division.

#### **Public Relations**

In 2020, the Public Relations subdivision expanded JCDH's digital reach by hiring a full-time employee to manage the emerging digital space which includes social media, website, marquee, and video production. Public Relations partnered with UAB, the Birmingham City Council and the Birmingham Mayor's Office during 2020 to transfer public relations activities to virtual platforms. JCDH provided subject matter experts and shared timely and potentially lifesaving information with Jefferson County audiences through numerous media outlets. Hundreds of local interviews and some national interviews were fielded by JCDH experts.



The Graphics section of Public Relations produced signage and infographics for individuals and businesses to print and post, as well as key signage to help Jefferson County residents access COVID-19 testing. Creation of directional signage in English and Spanish for JCDH facilities assisted clients navigate JCDH's modified service hours and procedures.

During the COVID-19 pandemic, JCDH's Public Relations Manager served as lead for the Joint Information Center alongside Public Information Officers from the Jefferson County Emergency Management Agency (EMA), City of Birmingham, University of Alabama at Birmingham (UAB), Jefferson County, City of Hoover,

Veterans Administration, Birmingham City Council, Birmingham Airport Authority and numerous other entities. One of most highly publicized local events of 2020 was a COVID-19 testing news conference featuring Vice Admiral Jerome M. Adams, MD, MPH, Surgeon General of the United States.

#### Vital Records

Vital Records, a Finance and Administration subdivision, issued over 91,000 birth, death, marriage or divorce certificates in 2020.

VITAL RECORD CERTIFICATES ISSUED IN 2020			
CERTIFICATE TYPE	NUMBER OF CERTIFICATES		
Death	60,646		
Birth	28,634		
Marriage	1,391		
Divorce	394		

### **Board of Health**



The Jefferson County Board of Health (Board), the governing body of the Jefferson County Department of Health (JCDH), is comprised of six members: five physicians elected by the Jefferson County Medical Society and the President of the Jefferson County Commission. The Board approves JCDH's annual budget and all contracts. The Board is authorized to revise or adopt certain public health regulations, endorse policies and legislation promoting health, and take other actions advancing public health. The Board receives regular updates from the Jefferson County Health Officer, Mark Wilson, MD, presentations from JCDH staff on programs and quality improvement activities, and occasional presentations from external health partners.

Among the 2020 actions of the Board of Health were:

- Approval of a contract with a consulting firm to work with UAB, JCDH, and a coalition of safety net
  providers to develop a plan of action to help the partners improve collaboration, strengthen communication
  and more effectively and efficiently provide care adult indigent health care in Jefferson County;
- A resolution to allow regular Board of Health meetings to be conducted via telephone to minimize public gatherings following Governor Kay Ivey's declaration of a State Public Health Emergency in the State of Alabama due to the growing number of COVID-19 cases;
- A resolution to approve creation of the COVID-19 Unified Incident Command System structure. Officials from JCDH and the Jefferson County Emergency Management Agency implemented the Unified Incident Command structure under directive from the Administrator of the Federal Emergency Management Agency (FEMA) specifically addressing local public health agencies. Jefferson County Health Officer, Mark Wilson, MD, and the Director of the Jefferson County Emergency Management Agency, Mr. Jim Coker, served as the Joint Unified Incident Commanders for Jefferson County. Dr. Wilson designated Dr. David Hicks, Deputy Health Officer, and Mr. Rodney Holmes, Director of Finance and Administration, as designees of the Health Officer for specified Human Resources duties in policies and procedures and for the purpose of executing and entering into contracts on behalf of JCDH;



• Approval of updated Communal Living Facilities (CLF) Regulations;

## **Board of Health**

- A resolution approving JCDH to apply for Coronavirus Aid, Relief, and Economic Security (CARES) Act funding reimbursement from the Jefferson County Commission to offset some expenses incurred responding to the COVID-19 pandemic;
- A resolution to adopt Title V Operating Permit Fees for calendar year 2019, payable in 2020, at an increased rate of \$97 per ton of regulated pollution. These fees, required by the Environmental Protection Agency (EPA), fund JCDH's direct and indirect costs related to air pollution monitoring and control such as labor, equipment, and administrative expenses for the larger industrial sources of air pollution emissions issued Title V Operating Permits by JCDH;
- A resolution authorizing JCDH to transfer funds to the Public Health Advised Fund, managed by the Community Foundation of Greater Birmingham, to support the Recovery Resource Center (RRC) of Jefferson County and the Nurse Family Partnership (NFP) to further the Board's public health work. The RRC provides a place where people with addiction or their families can receive in-person information, assessment, referral, and peer navigation to direct individuals to the most appropriate addiction treatment. The NFP is a visiting nurse program for first-time, low-income pregnant women designed to reduce maternal and infant mortality and strengthen families, and
- A resolution authorizing the purchase and distribution of antiviral medicine for treatment of influenza during the COVID-19 pandemic with the intent of potentially decreasing hospitalizations.



### Public Health Advised Fund

The Jefferson County Department of Health maintains a funding mechanism through the Public Health Advised Fund of the Community Foundation of Greater Birmingham to support community health initiatives within Jefferson County. During 2020, \$1,787,836 in grant funding was distributed for community-based projects led by local organizations including:

• Two grants to the UAB School of Nursing for continuation of the Nurse Family Partnership (NFP), a nationally recognized home visiting model for first-time mothers and their children demonstrated to improve prenatal health, birth outcomes and child development, as well as reduce childhood adverse events;



Nurse educating a first-time mother on infant care



- Two grants to the Crisis Center to continue operation of the Recovery Resource Center (RRC) in assisting individuals and families impacted by opioid addiction navigate the substance abuse treatment system;
- Two grants to the Medical Foundation of Jefferson County to support Process Access, a program linking uninsured Jefferson County residents to specialty care services;
- A grant to the UAB Minority Health Research Center for COVID-19 prevention, testing and treatment navigation support;



- A grant to Bush Hills Connections supporting garden production and addressing community food needs during the COVID-19 pandemic;
- Three grants to Bib and Tucker Sew Op for the production of 25,000 face masks for essential workers during the early phase of the COVID-19 pandemic and management of a community-wide mask making project;



## Public Health Advised Fund

• Two grants to One Roof to provide safety and sanitation supplies for homeless individuals during the COVID-19 pandemic;



• A grant to the Addiction Prevention Coalition for a digital marketing campaign supporting substance abuse reduction in the Ensley area;



• A grant to the Titusville Development Corporation supporting the purchase and retrofitting of the Magic City Blightmobile van and trailer used to deliver equipment and supplies for blight remediation within select neighborhoods, and

Magic City Blightmobile

• A grant to Chocolate Milk Mommies for the provision of breastfeeding education and support to new and expectant teenage mothers and assistance with the creating of breastfeeding friendly policies in schools.



### 2020 General Financial Information

#### Revenues (General Fund - \$52,763,058)

#### 1. Ad Valorem Tax Revenue (\$7,605,073 - 14% of General Fund Revenues)

Alabama Act 77-231 provides that the County (and municipalities within the County) shall pay to the Board of Health annually a sum not less than 2% or more than 6% of all ad valorem taxes collected within the County excluding ad valorem taxes collected for the State of Alabama and all Boards of Education located in the County. These funds are forwarded to JCDH as the taxes are collected.

#### 2. Sales Tax Revenue (\$23,334,661 - 44% of General Fund Revenues)

JCDH receives approximately one-fifth of every one cent of Jefferson County sales tax.

#### 3. State and Federal Contracts (\$7,067,308 - 13% of General Fund Revenues)

These are primarily dollars received from the Alabama Department of Public Health (ADPH) resulting from contracts or subcontracts to administer selected public health responsibilities for State Public Health Area 4, Jefferson County. Examples include developing community and educational programs and monitoring activity in nationally identified public health focus areas such as Maternal and Child Health, Family Planning, Immunization, Tuberculosis, Sexually Transmitted Disease and Hepatitis.

#### 4. Clinical Health Care Revenue (\$8,566,617 - 16% of General Fund Revenues)

This category represents the amount of reimbursement received for all clinic-related services provided by JCDH. In 2020, these services included pediatric and adult primary care, family planning and dental care.

Using the Federal Poverty Guidelines, JCDH offers reduced service fees for patients meeting financial and residential guidelines. Approximately 93% of JCDH's reimbursement is obtained from Medicaid, 6% from Blue Cross, and the remaining 1% from all other payers combined (e.g., Medicare, etc.).

#### 5. Environmental Health Services (\$3,102,533 - 6% of General Fund Revenues)

This category represents reimbursement received locally for environmental health services. Alabama law allows fees to be charged for Environmental Health Division services such as restaurant inspection, septic system plan review and inspection, air pollution permit fees, open burning permits, radiological equipment inspections and food handler training.

#### 6. Other Revenue (\$3,086,866 - 6% of General Fund Revenues)

This category is primarily reimbursement received for indirect costs (administration and building overhead) associated with federal grants and contracts such as the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and Air Pollution. Also included are allowable fines levied for violation of public health laws (e.g., air pollution violations), rental fees, parking lot and meter receipts, and fees received for copies of vital records. This category also includes earnings from cash and investments. All JCDH investments are based on a Board of Health approved Investment Policy that strictly follows state and county guidelines.

# **2020** General Financial Information

### Expenditures (General Fund - \$48,169,282)

Expenditures are generally classified by major public health program with administrative costs and the Capital Fund transfer separately identified. General Fund expenditures for fiscal year 2020 included:

Salaries and Benefits	\$35,440,947	74%
Materials and Supplies	\$6,796,485	14%
Contract Services	\$4,731,850	10%
Capital Fund Transfers	\$1,200,000	2%
Total	\$48,169,282	100%

JCDH has nine Special Revenue Funds totaling \$6,552,127. Funding is received from federal awards passed through JCDH and designated for activities related to immunization, nutrition, stormwater, emergency preparedness and air pollution. These funds are operated in accordance with the funding requirements of special grants and appropriations.

# Health Statistics, 2019

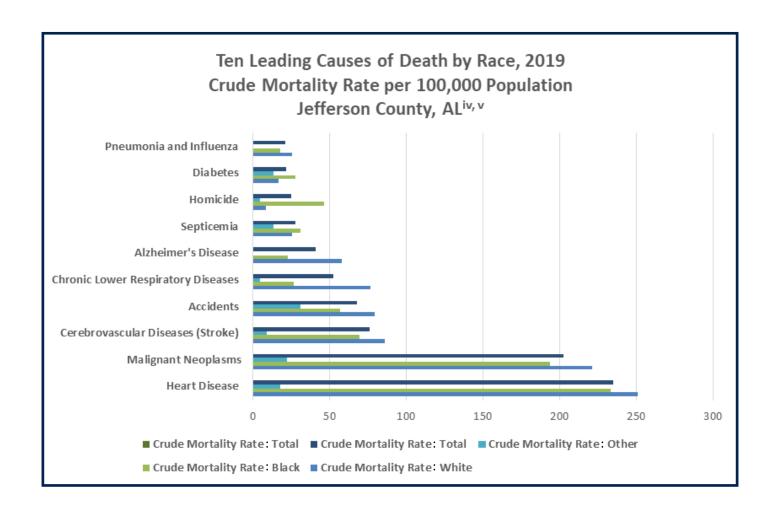
Jefferson County's Population by Age (2019 Census Bureau	Age	Number of Residents
1 year- Estimates)	<1 year <sup>i</sup>	8,465
	1-14 years	125,338
	15-24 years	81,417
	25-64 years	343,522
	65 years and older	108,296
	Total Population	667,038

MATERNAL AND CHILD HEALTH, 2019 (NUMBER AND RATE OR PERCENT) <sup>ii, iii</sup>				
	Number	Jefferson County	Alabama	United States
Live Births (women ages 15-44)	8,465	62.4 per 1,000 women	61.6 per 1,000 women	58.3 per 1,000 women
Low Birthweight Births (<2,500 grams)	745	8.8 %	8.6 %	8.3 %
Very Low Birthweight Births (<1,500 grams)	183	2.2%	1.9%	1.4 %
Live Births to Teens (women ages 15 to 19)	447	21.9 per 1,000 women ages 15-19	25.6 per 1,000 women ages 15-19	16.7 per 1,000 females
Infant Mortality (among live births)	85	10.0 per 1,000 live births	7.7 per 1,000 live births	5.7 per 1,000 live births (2018 rate)
Note: All birthweight and infant mortality data is based on live births.				

CHRONIC DISEASES, 2019 (CRUDE MORTALITY RATE PER 100,000 POPULATION) <sup>11, 111</sup>				
	Jefferson County Alabama			
Heart Disease	235.2	274.2		
Cancer	202.6	209.3		
Stroke	76.1	64.0		
Chronic Lower Respiratory Disease	52.4	72.0		
Alzheimer's Disease	40.5	54.2		

## Health Statistics, 2019

COMMUNICABLE DISEASES, 2019 (RATES PER 100,000 POPULATION) <sup>11, 111</sup>				
	Jefferson County	Alabama	United States	
Chlamydia	844.85	638.9	552.8	
Gonorrhea	449.91	296.5	188.4	
Syphilis (primary & secondary)	19.7	12.6	11.9	
Tuberculosis (TB)	2.7	1.8	2.7	



<sup>&</sup>lt;sup>i</sup> Alabama Vital Records Database

ii Alabama Department of Public Health (ADPH); www.alabamapublichealth.gov/healthstats

iii Centers for Disease Control and Prevention (CDC); www.cdc.gov

iv Rates are based on the 2019 Community Survey 1-year estimates for Jefferson County; www.census.gov

<sup>&</sup>lt;sup>v</sup> Accidental Deaths include deaths due to unintended drug overdose

<sup>\*2020</sup> Selected Health Statistics will be available in the 2021 Annual Report



WIC staff encourage co-workers: "We Can Do It"

