Agenda

1. COVID-19
   a. Timeline
   b. Survey responses
   c. Things for ACTs to consider
2. ACT status reports
   a. AQC
   b. HC
   c. HF
   d. HL
3. Council member updates
4. Wrap up
New Jersey lost a public health hero and friend this weekend.

Colette Lamothe-Galette passed away on Saturday, April 4th at the age of 45.

She was a true public health champion, serving 14+ years at NJDOH including as director of OMMH, as the first director of OPH, and the driving force behind NJDOH attaining Public Health Accreditation in 2017. She dedicated her professional life to eliminating health disparities and addressing health equity. In 2019, she joined the Nicholson Foundation as Senior Program Manager, leading early childhood and health initiatives.

She will be remembered for her kind and generous spirit and ability to light up any room with her smile. We will miss her brilliance, her love of people and her infectious laugh.

❤️
COVID-19 and HNJ2030 Development

• Balance the need to slow down our process and keep it moving forward
  o Ensure each member of HNJAC & HNJCC can contribute, including insights from this outbreak for the resilience components of each ACT
  o Maintain momentum and support the ACTs that have already started their work

• Utilize HNJ network to disseminate COVID-related information and form response-related partnerships
HNJAC & HNJCC members directly involved in COVID-19 related work

• Megan
• Marissa
• Victoria
• Suzanne
• Corynna
Timeline

**Month**
- March
- April-May
- June-July
- August
- Sept. +

**ACTs**
- Focus issues
- Review guidance
- Select draft objectives, get data
- Set targets
- Action plans

**HNJAC**
- Approve focus issues
- Approve objectives, etc.
- Review comments, approve all
- Approve action plans

**Other**
- Health Equity Community Conversations
- Public comment on objectives
- Publish final objectives and targets

Add ?? months to each
Work changes related to COVID-19

Survey responses

1. Lay off or furlough staff?
2. Changed operations and procedures?
   a. Maintain essential functions?
   b. Modified protocols to reduce risk of transmission?
3. Role/focus/priorities/activities shifted?
4. Cleaning/sanitation procedures?
5. Needs of the community you serve changed?
6. Resources or supports needed most?
7. Resources or supports your community members need most?
8. Biggest challenge your organization is currently facing?
9. Engaging volunteers?
10. Providing any services or education remotely?
11. Providing funding to communities in need?
12. Do you see your role changing with HNJ2030?
1. Has your organization had to lay off or furlough staff in response to COVID-19? If so, approximately how many?

<table>
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<tr>
<th>Layoffs</th>
<th>Responses</th>
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<td>2</td>
</tr>
<tr>
<td>Not yet but expected</td>
<td>2</td>
</tr>
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<td>6</td>
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- How many?
  - about 10,000 part and full time staff statewide
2. How has COVID-19 changed your organization’s operations and procedures?

- Remote work/instruction
- Reallocation of dollars has paused many interventions and deliverables. We are in a holding pattern.
- Operations have moved to remote, but the workload has increased, as emergency services are needed right away.
2a. Are you able to maintain essential functions? If so, are you doing this in person or remotely?

- Yes
- Yes, by working remotely
- Yes, by utilizing telehealth and finding many folks are not coming into the ER.
- Maintaining essential operations to serve communities.
  - Acute care hospitals including ERs and essential services remain operational in-person.
  - Elective surgeries and procedures have been cancelled/rescheduled per guidelines.
  - Non-essential staff have moved to remote working, however remaining operational.
- Unable to maintain essential functions, working remotely when possible.
2b. How have you modified protocols to reduce risk of transmission to employees, volunteers, and community members?

- Essential employees only, others work remotely, staggering shifts, maintaining 6 ft distance
- No visitors, limited visitors, no volunteers
- Only one entrance and everyone’s temperature taken.
- Mask use and PPE use. Universal masking policy for all staff (clinical and non-clinical) in our hospitals, patient care settings, physician offices, home care providers. N95 masks are issued to: All colleagues working in the Emergency Department (ED); direct caregivers in the Intensive Care (ICU), Medical Surgical, and Maternal Child Health units with confirmed or suspected COVID-19 patients.
- Considering tele-health for interventions with our clients/patients.
- Mobile ER for COVID positive and extra morgue space.
- Cafeteria is not allowing staff to get own food. Everything prepackaged.
- Large orders for PPEs for essential childcare, shelter, and food access staff.
- Daily protocol updates.
3. How have your organization’s role, focus, priorities, and activities shifted in response to COVID-19?

- All work, research with human subjects, and teaching is remote.
- Student needs are now more of a priority.
- Working from home and creating new ways to teach and learn. Dramatically increased prep-time.
- Emergency needs in childcare, shelters, houseless families, and food access.
- Ensure needs of most vulnerable NJ residents are met, as well as the economic drivers for our organizations.
- Working with grantees and stakeholders to understand effects on their organizations and patients, what protocols have been put in place, etc.
- No elective procedures, community events, education tours for OB patients, in-person consults (consults are over the phone for inpatients).
- Utilizing expanded space for COVID-positive patients.
- PPE protocols for all.
- Engaging in COVID-19 research.
- Functions continue to be supported by staff while a COVID-19 response team works with the state to support members as they care for patients.
- We are only working on COVID-19 activities at this time.
- IT overwhelmed with needs of staff working remotely.
4. What cleaning/sanitation procedures has your organization put into place in response to COVID-19?

- Remote work
- Following CDC guidelines
- Increased cleaning
5. Have the needs of the community you serve changed in response to COVID-19? If so how and to what extent?

- Grants have been disrupted.
- Canceling of routine dental care, emergency treatment only.
- Partner organizations may face bankruptcy, closures of many sites in the state.
- Most vulnerable residents that have lost access to services.
- Only students on campus are those with significant needs and cannot return home. Campus food pantry closed. Tech support needed.
- Community has requested lots of guidance docs about COVID-19
- Hospitals, long-term care facilities, home health, rehab, etc. needs vary but common thread is PPE need.
- Human subjects projects have been impacted by COVID-19.
- Paused activities that involve health care providers and the general public.

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<thead>
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<th>Changed?</th>
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<td>Resource/Support</td>
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<tr>
<td>Childcare for essential workers</td>
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<td>Cleaning supplies</td>
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<td>Funding/money</td>
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<td>Guidance</td>
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<td>PPE</td>
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<td>Staff</td>
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7. What resources or supports do community members you serve most need at this time?

- Basic technology
- Food
- Income, financial relief
- Mental health services
- Quarantine space
- Secure telehealth
- Shelter
- Testing - more and faster
- Transportation (for drive thru testing)
HNJAC Meeting #8
Part 2
April 14, 2020
10 a.m. – 12 p.m.
GoToMeeting
8. What is the biggest challenge your organization is currently facing as a result of COVID-19?

- COVID testing
- Field work stopped
- Funding
- Future planning that maintains our accreditation standards
- Increased workload, staff needed
- Organizational vitality
- PPE
- Uncertainty
9. Is your organization currently engaging volunteers? If so, please provide more detail.

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"They’re too much to manage and we are dealing with protected medical information."

"Call to action to gather donations for necessities for houseless students and their families; possible connection to Rowan students for meal delivery, other volunteers interested in supporting childcare."

"We have suspended our volunteer program, except for pastoral care volunteers, chaplains, and clergy."
10. Has your organization been providing any services or education remotely? If so what?

• Early intervention services
• Education, advising, and support remotely
• Educational and patient care services
• Educational events
• Meetings/work
• Primary care sites are utilizing telehealth
• PSE trainings
• Spring and summer courses will be taught remotely
• TA around food access, childcare, and sheltering for the homeless

Remote? | Responses
---|---
Yes | 8
Blank | 2
11. Is your organization providing funding to communities in need? If so, please elaborate.

- Feeding houseless students and their families, including activities for the children and meal delivery.
- Anticipate reallocating additional dollars where needed.
- Continuing to provide essential services to our communities.
- Food access program continues to operate: Mobile Farmers Market repurposed as Mobile Food Pantry.
- Set up a “Coronavirus Emergency Fund” to gather any donations to help support the work we are doing to meet the growing needs of the community.

<table>
<thead>
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12. Do you see your role changing with HNJ2030 because of COVID-19? If so, how?

- I am concerned that state resources are limiting my capacity greatly.
- Looking at health disparities as it relates to COVID-19
- I will have to participate much less for the time being
- It will be challenging for me to take long phone calls since I have two small children at home.
- Feels like a belly-flop right now, but once emergency needs are met, will be able to dive in head first!

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<th>Change?</th>
<th>Responses</th>
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<tr>
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Topic Area development & COVID-19

- Resilience, Equity, and Policy
- Lessons learned
- ...
ACTION
CHANGES
THINGS
ACT Next steps

Continue
- Continue narrowing down your focus issues
- What your Topic Area means
- What things define your Topic Area

Report
- Report back to HNJAC as needed
  - Make sure you’re not overlapping or “poaching”
  - Make sure we’re not missing anything when all are combined

Review
- Review objective selection and target setting guidance
  - Still to be sent out and discussed
Access to Quality Care

Bageshree
Kwaku
Megan

1st call: March 18
Next call: April 15
5 of 10 members on call
Progress thus far
Questions for the Council?
Healthy Communities

Diane
Regina
Jeanne

1st call: March 16
Next call: April 9

14 of 19 members on call

Progress thus far

Questions for the Council?
March 2 and 10 calls

HNJAC and HNJCC only on calls

Progress thus far

Questions for the Council?
Healthy Living

John
Alycia
Sherry

1st call: April 2
Next call: June 4

12 of 14 members on call

Progress thus far

Questions for the Council?
HNJAC Updates

Marissa
Megan
Bageshree
Kwaku
Diane
Regina
Jeanne
Victoria
Tyree
Alysia
John
Sherry
Alycia
KEEP CALM AND STAY WELL

Thank you!!