



# NEW ORLEANS COMMUNITY HEALTH IMPROVEMENT PLAN 2022-2025

PROGRESS REPORT: YEAR 1, QUARTER 2  
OCTOBER 1-DECEMBER 31, 2022





Dr Jennifer L. Avegno  
Director of Health

# NEW ORLEANS HEALTH DEPARTMENT

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## About Us

### Mission

To promote, protect, and improve the health of all in our community through equitable policies, programs, and partnerships.

### Vision

Building a healthy and equitable New Orleans by supporting the well-being of everyone in the region.

### Values

Our values are the principles that guide how the New Orleans Health Department's team members approach our work and interactions with one another, partner organizations, and community members.

- **Integrity** – We strive to conduct ourselves in an ethical and accountable manner that ensures we are good stewards of public resources.
- **Responsiveness** – We work collaboratively and respond to the needs and feedback of one another, partner organizations, and community members.
- **Excellence**– We deliver high-quality public health services and programs with compassion and respect, with the goal of achieving better health outcomes for all people in New Orleans.
- **Diversity and Inclusion** – We actively welcome, include, and value the input of people with different identifies and experiences on our staff, as partners, and among those we serve.
- **Health Equity** – We strive to deliver programs and services that reduce inequities in our community and ensure every person in New Orleans has a fair and just opportunity to be as healthy as possible.



# CHIP LEADERSHIP

Each of the CHIP priority areas have three supporting working groups co-lead by at least one member of the New Orleans Health Department (NOHD) and one partner organization to facilitate shared planning and implementation. NOHD serves as the backbone organization, providing technical assistance and oversight for the CHI process and ensuring that the CHIP is implemented in alignment with our shared values.

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## Priority 1: Increase Access to Care

Becky Meriwether, St. Charles Center for Faith & Action  
Dana Wilkosz, New Orleans Health Department  
Emily Remington, 504HealthNet  
Flint Mitchell, Louisiana Department of Health  
Helena Likaj, Odyssey House Louisiana  
Mary Beth Campbell, Louisiana Department of Health  
Portia Williams, NOLA BabyCafe  
Ragan Collins, New Orleans Health Department  
Sheneda Jackson, New Orleans Health Department  
Sherrard Crespo, VIA LINK  
Travers Kurr, New Orleans Health Department

## Priority 2: Improve Economic Stability

Andres Melendez-Salgado, New Orleans Health Department  
Jahana Deadmon, New Orleans Health Department  
Jeanie Donovan, New Orleans Health Department  
Jessica Diedling, Ochsner Health  
Lindsay Hendrix, Second Harvest Food Bank  
Taylor Diles, New Orleans Health Department

## Priority 3: Ensure Community Safety

Annelies DeWulf, University Medical Center of New Orleans  
Astacia Shari Carter, New Orleans Mosquito, Termite, & Rodent Control Board  
Hope Levins, New Orleans Health Department  
Jocelyn Pinkerton, New Orleans Health Department  
Marin Stephens, New Orleans Health Department  
Meredith McInturff, New Orleans Health Department

## Community Health Improvement Coordination

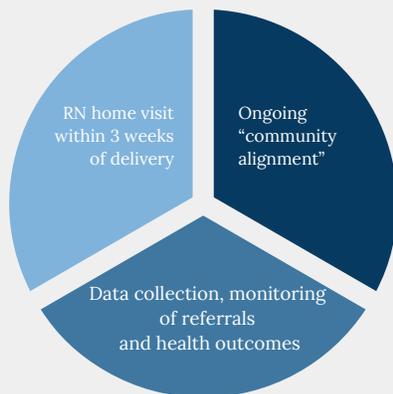
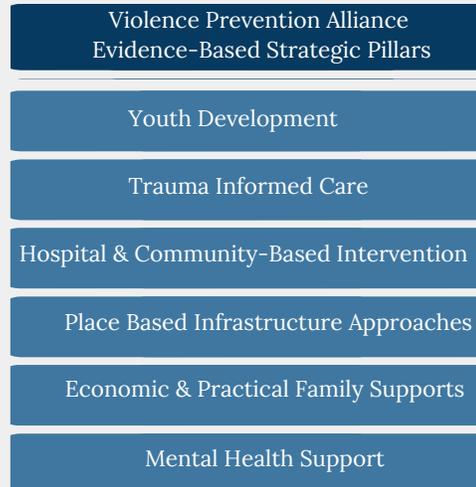
Diana Ishee, New Orleans Health Department  
Jodi Dyer, New Orleans Health Department



# CITYWIDE HEALTH UPDATES

## New Orleans Gun Violence Prevention Strategy

- New Orleans' 2022 murder rate is 10x higher than the national average, with homicide being the 7th leading cause of death for Orleans Parish residents overall and the 4th leading cause of death for Black men
- In response, New Orleans City Council has charged NOHD with developing a violence prevention strategy, including an implementation plan and available resources
- The multi-sector collaborative will employ six evidence-based strategic pillars for violence prevention

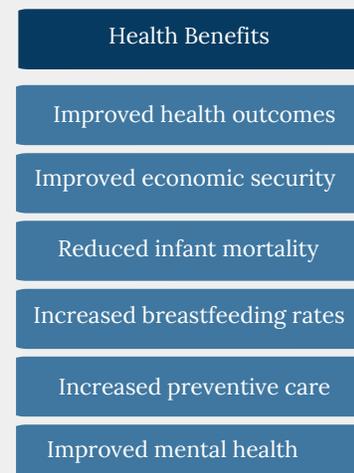


## Family Connects New Orleans

- NOHD was recently funded by New Orleans City Council to promote linkages to care and provide comprehensive family support for improved birth outcomes
- All families residing in Orleans Parish who give birth locally will be eligible for services
- Program specialists at Ochsner Baptist and Touro will go bedside to educate families about program, enroll, and schedule a home visit regardless of age, income, or race
- Currently creating a referral network for family resources and will collect outcome data in hopes that the model can be funded throughout the State

## Paid Family Leave Policy

- Paid family leave provides employees with paid time off for circumstances such as recent birth or adoption, a parent or spouse with a serious medical condition, or a sick child
- At the state level, a statewide paid family leave coalition formed, engaging new partners who historically have not been involved in these discussions; events are planned for legislators to educate on need for statewide policy
- Actuarial study on paid family leave systems for all workers underway by Louisiana Workforce Commission
- In Orleans Parish, City Council, the CAO's office, and Civil Service have all been engaged to discuss the public health benefits of expanded paid family leave



# PLAN ALIGNMENT: LOUISIANA SHIP

Alignment with national, state, and local plans that share priorities for health improvement is key to the overall success and impact of the CHIP. The State Health Improvement Plan (SHIP), developed by the Louisiana Department of Health (LDH), offers a unique opportunity for alignment. Both NOHD and LDH are accredited by the national Public Health Accreditation Board and are required to meet certain standards for community health assessment and improvement planning. Additionally, collaboration between the two initiatives allows for shared data and measurement and strategy implementation at many geographic levels, as well as shared accountability and success.

Although not on the same implementation timelines, the two plans very clearly share the same priorities for health improvement. Recognizing the benefits of alignment, NOHD and LDH have been very intentional about ensuring that collaboration between the initiatives is maintained and consistent and both have committed to monthly coordination meetings. Although only halfway through the first year of the CHIP, these efforts have increased partner engagement and knowledge of health improvement priorities. As this effort continues, NOHD will be tracking the outcomes of this new way of working together.



Community  
Health  
Improvement  
Plan Priorities

Increase Access to Care

Improve Economic Stability

Ensure Community Safety



State Health  
Improvement  
Plan Priorities

Behavioral Health

Chronic Disease

Community Safety

Maternal & Child Health

# CHI PARTNERSHIP

## Ongoing Recruitment

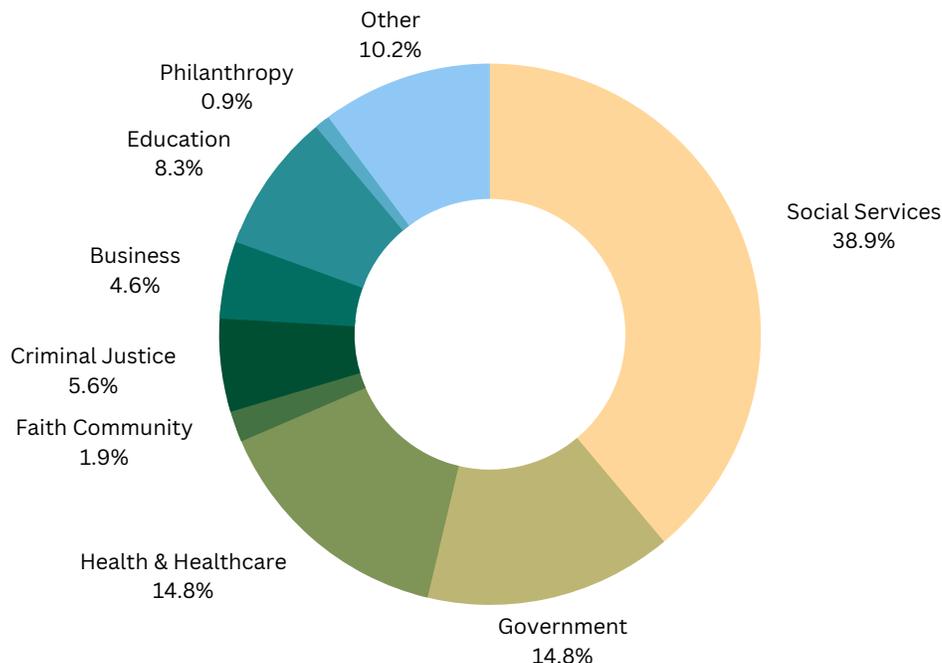
CHI is a collaborative and inclusive effort requiring the contribution of a wide array of individuals and organizations to ensure that there is a diversity of perspectives and experiences represented in our work. As the backbone organization of the CHI Partnership, NOHD is charged with tracking the makeup of our partnership to ensure that the breadth and depth of representation is maintained and enhanced.

This quarter, targeted recruitment activities have primarily been carried out by members of NOHD leadership and existing CHI partners in order to fill gaps in resources, skills, and capacity at the working group level. By the end of December the partnership welcomed individuals from five new organizations, a seven to eight percent increase in partnership size overall.



## Cross-Sector Representation

Using a collaborative approach, CHI brings partners from all backgrounds to work together, recognizing the interconnectedness of sectors and their ability to shape the health of a population. One of the desired outcomes of this effort is to ensure that a cross-sector approach is taken to addressing health issues. Currently, the partnership has broad sector representation, with social services, government, and health and healthcare represented the most.



# CHIP IMPLEMENTATION

## Building Capacity and Garnering Funding

The end of quarter two marks the midpoint of year one, action plans are being implemented, and so much progress has already been made! This quarter, working groups have gained valuable insight into what is feasible with existing capacity and resources, and what might require additional support and funding. This has led to the refining of action plans, closing gaps in capacity, and addressing data needs.

Across the CHIP, several working groups have applied for grants to build capacity and gain funding to more efficiently and effectively implement strategies. One example of this is two organizations in the Supportive Environments working group, StepUp Louisiana and NOHD. These organizations applied for the Power Building Partnerships for Health 2023 cohort which would provide \$30,000 in flexible funding to further develop a Workers' Bill of Rights for all workers in New Orleans. This strategy would help to improve social and economic conditions which have the greatest impact on our health in the form of impacting the foods, housing, and healthcare individuals can afford.

Along with the recruitment of new partners to fill gaps in the partnership and help in implementing strategies, several working groups have been actively looking for interns. The purpose of hiring interns is to assist CHIP leads in administrative tasks, research, and specific projects that working groups have discussed but do not have the capacity to implement.



"Cross-sector collaboration is a crucial mechanism for public health to address the social determinants of health and is recognized as a fundamental driver of community health improvement."

Carlin & Peterman,  
Journal of Public Health Management and Practice, 2019



## Cross-Sector Strategy Implementation

Of the approximately sixty-six strategies being implemented in year one, least a quarter are uniquely CHIP-derived, meaning that they were identified and initiated within the CHI process, as opposed to strategies that were previously established in some form. This is an intended outcome and inherent benefit of collaborative initiatives like the CHIP.

3

Priorities

9

Goals

32

Objectives

66

Strategies

# P1: INCREASE ACCESS TO CARE

## Chronic Disease Prevention & Management

- Revised campaign messaging around hypertension and diabetes
- National CLAS standards training received by staff of several FQHCs
- Increased number of Community Health Workers trained for local workforce
- Incentives provided to receive vaccinations at local community events

## Maternal & Child Health

- Criteria and process established for Doulas to become registered in Louisiana
- NOHD Manager and Community Alignment Specialist hired to implement universal home visiting program
- Healthy Start New Orleans service delivery expanded for women at high risk for substance use disorder
- Preliminary findings released from focus groups on maternal mental health
- Maternal & child health collaboratives convened to facilitate alignment of local efforts

## Behavioral Health

- Sobering Center started receiving eligible patients triaged and transported by EMS
- Client enrollment and referrals to supportive services by diversion programming continued
- Local health information exchange presentation received to inform potential care coordination improvement strategies
- Individuals trained in the administration of Naloxone



3

individuals trained as community health workers

3

FQHCs received CLAS standard training

\$2.8k

in gift cards used to incentivize 113 resident vaccinations

5

MCH collaboratives convened for alignment

520

Individuals trained in Naloxone administration

1,509

Naloxone doses distributed

34

clients currently enrolled in LEAD program

27

LEAD client referrals for supportive services provided

## Strategy Spotlight

### Standardize Naloxone Education & Distribution Training



Odyssey House Louisiana, Louisiana Department of Health, Metropolitan Human Services District, Access Health Louisiana, Tulane University, Trystereo, CrescentCare, and NOHD worked together to develop a standardized harm reduction guide by compiling information considered key in overdose response trainings. The guide was used and adapted for training over 40 service industry staff to recognize and respond to an overdose and provide post-Naloxone administration support. The group plans to continue outreach to organizations and businesses to increase trainings that provide Naloxone to participants.



# P2: IMPROVE ECONOMIC STABILITY

## Supportive Work Environments

- Engaged local workers to provide input on the Workers' Bill of Rights framework
- Applied for a grant to support the development of a local Workers' Bill of Rights
- Scheduled the first planning session for advancing a state paid family leave bill
- Secured a contractor to conduct an actuarial study on state paid family leave program

## Food Security & Nutrition

- Developed portal for Healthy Kids Meal Beverage Ordinance 311 complaints
- NOHD Chronic Disease Prevention Specialist hired to address food insecurity
- Initiated review of healthy retail policies to develop a Healthy Dollar Store project
- Disseminated Healthy Kids Meal Beverage ordinance education to local restaurants and evaluated menus for compliance
- Surveyed parents and caregivers about children's sweetened beverage consumption
- Conducted outreach to disseminate SNAP materials and provide application assistance

## Healthy Homes

- Healthy Homes ordinance passed with revisions offering increased renter protections and landlord accountability
- Initiated the development of a concept note for a housing rehabilitation program



3

town halls hosted to inform creation of Workers Bill of Rights

180

restaurant menus reviewed for compliance with Healthy Kids' Meal Beverage ordinance

1,000

Parents and caregivers surveyed about kids' sweetened beverage consumption

2,650

SNAP outreach materials disseminated

97

SNAP applications submitted with assistance provided

## Strategy Spotlight Healthy Kids' Meal Beverage Ordinance



**WHAT IS THE HEALTHY KIDS' MEAL BEVERAGE ORDINANCE?**

The Healthy Kids' Meal Beverage Ordinance is a law that was passed by the New Orleans City Council and is effective January 1, 2023. The ordinance is part of an effort to address childhood obesity and chronic disease rates. The ordinance requires restaurants that sell children's meals to make the default beverage options with that meal, one or more of the following:

- Water (unflavored, unsweetened, uncarbonated)
- Milk (plain, pasteurized cow's milk with no added caloric sweeteners, low-calorie sweeteners, or flavorings), nonfat or one (1) percent milk, or non-dairy milk alternatives containing no more than 130 calories per container and/or serving
- 100% fruit juice, 6.75 oz or less

**RETHINK YOUR DRINK**

presented by **new orleans health department**

**FAQs**

**DOES A RESTAURANT NEED TO REMOVE BEVERAGES NOT LISTED AS A DEFAULT BEVERAGE FROM THE CHILDREN'S MENU?**

**YES.** Restaurants are required to remove items that are not listed as a default beverage from the children's menu. This includes a child's menu, menu board, menu, sign, menu, and menu board.

**CAN A RESTAURANT STILL SELL SODA WITH A CHILDREN'S MEAL?**

**YES.** The ordinance does not prohibit restaurants from selling a children's meal with a soft drink. However, the ordinance requires that the soft drink be sold as a separate item, not as part of the children's meal. If a child's meal is sold with a soft drink, the child's meal must be sold as a separate item, not as part of the children's meal.

**CAN A RESTAURANT PUT SODA SOMEWHERE ELSE ON THE MENU?**

**YES.** Restaurants are required to sell a soft drink as a separate item, not as part of the children's meal. However, a restaurant can sell a soft drink as a separate item, not as part of the children's meal, if it is sold as a separate item, not as part of the children's meal.

Healthy for Good

The American Heart Association, Tulane and Xavier universities, NOLA311, NO Regional Black Chamber of Commerce, Hispanic Chamber of Commerce of LA, and NOHD worked together to create the Healthy Kids' Meal Beverage Ordinance. As part of an effort to address childhood obesity and chronic disease rates, this ordinance requires restaurants to make the default beverage for kid's meals water, milk, or 100% fruit juice. Partners have supported ordinance implementation through outreach & communications with restaurants, setting up systems for compliance and complaint monitoring, and developing an evaluation plan.

# P3: ENSURE COMMUNITY SAFETY

## Public Health Threats

- Hosted events to train individuals in emergency response topic areas
- Surveyed community members in Mid/Central City, New Orleans East, and Algiers to identify underlying causes of vaccine hesitancy
- Hosted COVID-19 and flu vaccine events in District E
- Surveyed and interviewed unsheltered residents to identify barriers to emergency shelters

## Violence Prevention

- Advocacy Initiated Response (AIR) program expansion fully funded in 2023 City budget
- Victims of domestic violence were contacted and received referrals for services
- Trauma Recovery Clinic funding allocated
- Defined scope and secured data sources to conduct violent crime landscape analysis
- Created policy and forms related to firearm returns
- Funding received for the purchase of gun locks

## Transportation Safety

- Secured data for Transportation Safety Dashboard
- Consultant selected to conduct comprehensive scan of New Orleans street infrastructure for use in Complete Streets monitoring
- Secured discounted ride vouchers to Bounce to Zero Ball



51

Individuals trained in emergency response

277

residents surveyed about vaccine hesitancy

\$20k

in ARPA funds received by NOHD for gun safety

218

Domestic violence victims contacted after incident, one-third referred for services

201

unsheltered residents surveyed to identify barriers to sheltering, half were also interviewed about shelter experiences

400

discounted ride vouchers donated by Uber

## Strategy Spotlight Emergency Shelter Barrier Analysis



**NOHD, UNITY of New Orleans, NOLA Ready, homeless service providers, and emergency shelters** worked together to identify barriers to access for emergency shelters to reduce the number of unsheltered homelessness. Over 200 surveys and over 100 follow-up interviews were conducted with unsheltered residents. Preliminary findings reveal issues at shelters including individuals having to leave very early or

during the day, not having flexible intake times for clients who work, and being treated poorly by staff or fellow clients. This has provided valuable insight for future strategy implementation in efforts to ensure that unsheltered residents access shelters when needed. A report of findings will be published in the coming months.

# NEXT STEPS

## Where do we go from here?

This CHIP is a continuous work in progress. As the backbone organization, NOHD is always looking for ways to improve and grow to support the CHI partnership network. These four areas are where efforts will be focused behind the scenes to support CHIP implementation and the partnership.



01

### Data Needs

Continue to work with the CHI partnership to prioritize measurement and data collection



02

### Working group capacity

Continue targeted recruitment of cross-sector partners and building internal capacity through new hires and internships



03

### Collaborative Funding

Continue to identify opportunities to further strengthen strategy implementation



04

### Technical Assistance

Continue to provide technical assistance in strategy implementation and reporting progress



## Contact

### New Orleans Health Department

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