Annual Report
FY 2020-21
Table of Contents

Pima County Health Department | 1
The COVID-19 Pandemic | 3
Business Operations | 9
Cross-Functional Operations | 11
Clinical Services | 13
Consumer Health and Food Safety | 15
Community Outreach, Prevention and Education | 17
Public Health Assessment and Preparedness | 25
The mission of the BOH is to serve in an advisory capacity to the department and Board of Supervisors on public health matters.

The BOH is comprised of 11 members of the community appointed by the Board of Supervisors:

- 5 members (1 resident of each of the 5 supervisorial districts)
- 4 members (county-at-large)
- 1 licensed physician
- 1 member of the Board of Supervisors

**APPOINTMENT TERM:** 4-year term

**MEETINGS PER YEAR:** 12

**STANDARD MEETING TIME/DAY:** 3 p.m., 3rd Wednesday of the month

**MISSION**
The Pima County Health Department promotes, protects, and preserves health through leadership, services, education, and partnerships.

**VISION**
Pima County—A safe and healthy community.

---

**PIMA COUNTY BOARD OF HEALTH (BOH)**

The mission of the BOH is to serve in an advisory capacity to the department and Board of Supervisors on public health matters.

The BOH is comprised of 11 members of the community appointed by the Board of Supervisors:

- 5 members (1 resident of each of the 5 supervisorial districts)
- 4 members (county-at-large)
- 1 licensed physician
- 1 member of the Board of Supervisors

**DISTRICT 1**
Charles Geoffrion, Vice President
Mike Humphrey

**DISTRICT 2**
Rene Gastelum
Miguel Rojas

**DISTRICT 3**
Paul R. Horwitz, M.D., President
Gail Smith

**DISTRICT 4**
Kathryn Kohler
Bin An

**DISTRICT 5**
Carolyn Trowbridge
Mary Lou Gonzales

**OTHER MEMBERS**
Dr. Matt Heinz, Board of Supervisors member

Dr. Theresa Cullen, Director, Health Department

---

**NOTE FROM THE DIRECTOR**

The Pima County Health Department (PCHD) is pleased to share with our residents, community partners, elected officials and cross-governmental partners the department’s fiscal year 2020-2021 Annual Report.

We are committed to sharing with you the work of the department over the past County fiscal year to achieve our mission:

*To promote, protect, and preserve health in Pima County through leadership, services, education, and partnerships.*

In addition to leading the COVID-19 public health emergency and epidemiological response for Pima County, the department responded to other public health emergencies, including extreme heat events, impacts from wildfires, outbreaks of West Nile Virus, and other public health concerns. The department delivered on its core responsibilities across all our divisions, as outlined in this report.

The pandemic has shown us:

- Working together is key to transforming our public health, health care, and safety net systems so that we can create the conditions for all our communities to be the healthiest they can be.
- Building a stronger, more robust and equitable public health infrastructure is fundamental to future success moving forward.
- Key community stakeholders and communities experiencing vulnerability must be in the driver’s seat in both future response and recovery efforts.

As a community, there is much to be proud of, as well as to heal, learn, and rebuild through our recovery efforts. The resilience and strength of our communities across the County in both our rural and urban areas has been remarkable. Our community organizations and members stepped up during the pandemic to take care of one another through mutual-aid networks, adapting their services, and opening their doors to testing and vaccination.

I want to thank the staff and team at the department who worked tirelessly to protect the public’s health. We truly appreciate and value you. I also would like to thank the Pima County Administration and our sister County departments and our cross-governmental and community partners who joined forces in the County’s response, and the hundreds of volunteers who came forward at critical times.

We believe a healthy, resilient, and thriving community in the 21st century requires a new understanding of what public health means and requires innovative tools and cross-cutting efforts to uplift community and bring all community members along on this journey.

We look forward to taking this journey with you.
The COVID-19 Pandemic

Overall Impacts
Pandemic Timeline
Innovation and Re-envision
PCHD Ethics Committee
PCHD Community Advisory Committee on COVID-19
Response and Recovery

PCHD began preparing for community spread of COVID-19 on January 21, 2020, when the CDC confirmed the first COVID-19 case in the United States. The first positive case in the County was confirmed on March 9, 2020. The pandemic spread rapidly, surging over the summer and then winter. During the catastrophic second wave, an eight-week period from December to January 2020-21, Pima County recorded 1,195 deaths from COVID-19. On January 4, 2021, at the peak of the winter surge, Pima County confirmed 1,759 new cases in a single day. As of June 30, 2021, there had been over 142,000 people—or one in 10 Pima County residents—who tested positive for COVID-19 and over 2,400 people or one in 450 people who died.

In Pima County, as with the nation at large, the pandemic has highlighted and sharpened racial, ethnic, and social inequities. Communities of color experienced disproportionately high rates of COVID-19 infection. These communities have been historically burdened with high rates of disease burden and health disparity. Disenfranchised communities were effectively “aged” by structural inequities that existed prior to and during the pandemic, causing their health consequences to parallel those of older adults.

Pima County’s pandemic response took aim at the health inequities that have shortened the life expectancies and reduced years of productive life for people of color and other vulnerable communities. On December 1, 2020, on the brink of the deadliest weeks of the pandemic, the Board of Supervisors publicly declared racial inequities and income inequality a public health crisis and tasked the PCHD with driving a multi-departmental, multi-disciplinary effort to address these concerns and help achieve health equity.

1 in 10
Pima County residents who tested positive for CV-19 as of June 30, 2021

1 in 450
Pima County residents who died as a result of CV-19 as of June 30, 2021
## Pandemic Timeline

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>2020</td>
<td>JANUARY 21: First case of COVID-19 in United States. 23: Pima County Virtual EOC is stood up in response to Maricopa County.</td>
</tr>
<tr>
<td></td>
<td>MARCH 9: First confirmed COVID-19 case in Pima County. 13: Tohono O’odham Nation declares a state of emergency. 19: Pima County declares a state of emergency. 31: Governor Ducey issues stay-at-home order. Tohono O’odham Nation institutes a mandatory 9 p.m. curfew.</td>
</tr>
<tr>
<td></td>
<td>APRIL 22: Pima County establishes the Pima County Back-to-Business Task Force.</td>
</tr>
<tr>
<td></td>
<td>MAY 13: Pima County adopts temporary pandemic restrictions and zoning modifications. 15: Governor Ducey lifts stay-at-home order.</td>
</tr>
<tr>
<td></td>
<td>JUNE 19: Pima County issues mask mandate amid summer surge. 29: Governor Ducey shuts down bars, large gatherings.</td>
</tr>
<tr>
<td></td>
<td>SEPTEMBER 15: Pima County issues shelter-in-place order for University of Arizona students for 14 days.</td>
</tr>
<tr>
<td></td>
<td>NOVEMBER 30: PCHD stands up Ethics Committee.</td>
</tr>
<tr>
<td></td>
<td>DECEMBER 4: Pima County declares racism and income inequity a public health crisis amid winter surge. 15: Pima County BOS institutes mandatory curfew. 18: First Pima County resident vaccinated.</td>
</tr>
<tr>
<td></td>
<td>2021</td>
</tr>
<tr>
<td></td>
<td>FEBRUARY 6: Pima County launches first mobile vaccine site.</td>
</tr>
<tr>
<td></td>
<td>MARCH 17: CDC ranks Arizona in top three states for vaccinating high-vulnerability communities. 25: Governor Ducey lifts remaining COVID-19 restrictions. Pima County continues to enforce mask mandate. PCHD Community Advisory Committee is established.</td>
</tr>
<tr>
<td></td>
<td>APRIL 20: Tohono O’odham Nation withdraws mandatory curfew.</td>
</tr>
</tbody>
</table>
INNOVATION AND RE-ENVISION

Though the intermediate to longer-term ramifications of COVID-19 are hard to predict, key indicators suggest the adverse health and wellness effects of the COVID-19 pandemic will not be counted in months or years but in generations. These impacts will continue to exacerbate the known racial and economic disparities that continue to exist—unless we innovate, reimagine, and transform our public health, health care, and social safety nets.

A complete picture of the chronic effects of the virus is still unclear. Lingerinig consequences of COVID-19 have been documented in most, if not all, bodily systems, including cardiovascular (heart), pulmonary (lungs), renal, dermatologic (skin), neurologic (nervous system), and psychiatric (PTSD). The degree to which these effects will lead to chronic health conditions and lasting impact on wellness is unknown.

Likewise, the social change that upended every human life in this County, and the consequent traumas of stress, grief, languishing, loneliness, fear, and uncertainty, have no precedent. Early data reveals a connection between the pandemic and an increase in individual post-traumatic stress, harmful coping mechanisms, depression, anxiety, and other adverse health consequences. The social, emotional, and academic ramifications for the population are large and continuing. PCHD is committed to providing support to help navigate these changes.

PCHD ETHICS COMMITTEE

The department prioritizes embedding ethical decision into strategic operations and integrating ethical practice in day-to-day public health practice. We established an ethics committee in November 2020 as part of our reaccreditation efforts, and to respond to the increasing constraints due to COVID-19 coinciding with the height of the pandemic. Much of the work of the committee has focused on assessing public health ethical issues to guide equitable distribution of resources, and improving access to services for vulnerable populations.

The Ethics Committee was invaluable in providing guidance to the department on vaccine and therapeutic distribution using ethical public health practice and policies.

PCHD COMMUNITY ADVISORY COMMITTEE ON COVID-19 RESPONSE AND RECOVERY

The department convened the COVID-19 Response and Recovery Community Advisory Committee (CAC) on April 28, 2021. The CAC comprises community representatives across diverse stakeholder groups in Pima County, with a focus on communities historically underserved and those hardest hit by the pandemic.

The CAC informs and guides the department’s community response and co-designs culturally relevant and effective strategies that meet the County’s diverse community needs and concerns. The CAC has been a key partner in guiding the ongoing COVID-19 response throughout Pima County, including targeted vaccine outreach efforts, assisting with communications, informing strategies and plans, and exploring community recovery efforts. Looking beyond the pandemic, the CAC will play a vital role in informing and guiding the department’s efforts in building an equitable, inclusive next-generation public health system.

We are grateful for the time and commitment our CAC members have dedicated to support the COVID-19 response.

CAC ACCOMPLISHMENTS: THE FIRST 6 MONTHS

DISCUSSIONS AND VISIONING SESSIONS

• Ways of working
• Shared agreements
• Key community partnerships
• Vision: CAC in 2 years from now
• Retreat planning
• Trust building
• Community concerns
• 6-month reflection

PCHD PLANS REVIEWED

• PCHD community engagement plan
• Strategies to address vaccine disparities in high risk Census tracts
• Community Health Needs Assessment Participation
• Revocery and Resiliency Plan
• As-home self testing protocol
• Opioid Action Plan
• COVID/flu vaccine hesitancy surveys

ACTIVITIES AND OUTCOMES

• COVID-19 updates from Director and community concerns shared
• Community-led mobile vaccine pods and Adopt-a-Site efforts
• 6 mini grant awards to expand Community Champions and seed new organizations (such as the Muslim Community Alliance)
• Community Champions weekly email blasts to partners
• Expanded membership to promote greater diversity and inclusion
• Information exchange on testing/vaccination events, resources and funding opportunities
• CAC business is bilingual
**Business Operations**

**Fiscal Year 2020-21 Budget**

---

**FUNDING**

- Federal Grants: $9,808,077
- Other Revenue: $115,677
- AZ Grants: $1,905,136
- Licenses/Permits: $2,240,187
- Health Fees: $2,423,256
- Operating Transfers: $8,858,987

**TOTAL: $25,351,320**

---

**EXPENDITURES**

- Personnel: $15,455,363
- Supplies: $4,384,663
- Services: $38,001,350
- Transfers Out: $1,976,340
- Capital Purchases: $89,436

**TOTAL: $59,907,152**

*FY2020-21 included $36,510,574.97 in COVID-19 expenses, resulting in a significantly higher total expenditure than typical for the department.

---

**VITAL RECORDS**

The Vital Records program provides birth and death certificates, amends birth and death records, and connects County residents to the statewide vital records systems. Staff rigorously verify the eligibility of requesters to receive certificates, assists customers with their applications, and certifies the legal documents they release. Vital Records also registers home births into the statewide system, establishing the legal record for children born outside licensed facilities and hospitals.

- **$1.8M** generated revenue in FY21
- **11,888** completed amendments and corrections

---

**100,000+ printed and distributed certificates**

- Nearly 20,000 Birth Certificates
- Over 85,000 Death Certificates
- Processed more than 13,000 applications in January 2021 alone
CFO
Cross-Functional Operations

Public Health Accreditation
Strategic Planning
Quality Improvement
Project Samples

PUBLIC HEALTH ACCREDITATION
The department received public health accreditation status in May 2016 from the Public Health Accreditation Board. The department is actively preparing for reaccreditation and will submit its application package in June 2022.

STRATEGIC PLANNING
The department is required to conduct a comprehensive strategic planning process every five years as part of national public health accreditation standards and measures. Planning began in October 2020. More than 2,100 Pima County stakeholders and 33 public health subject matter experts were consulted to help identify factors that will be considered in the strategic planning process.

QUALITY IMPROVEMENT PROJECT SNAPSHOT
In FY 2020-21, three quality improvement (QI) projects were identified. All QI projects used the department’s QI implementation guide, which follows the Plan-Do-Study-Act model.

The first was a QI project to increase the number of clinicians that have completed the waiver for buprenorphine but are not currently prescribing. The goal of the second QI project was to increase screening and education for syphilis in our clinics and to increase community awareness, education, accessibility, and referrals about/for syphilis. The third QI project focused on reducing the processing time for birth and death certificates in the Vital Records program.

2,100+
stakeholders consulted

33
public health subject
matter experts consulted
Clinical Services

CONGREGATE CARE PROGRAM
The congregate care team identified and addressed the need to provide advocacy and communication to congregate populations during the pandemic. This team is now a permanent fixture within the health department and collaborates with all of our programs.

Some initiatives include:
- Coordinated ongoing vaccination and COVID testing effort.
- Provided guidance and support for long-term care facilities, behavioral health, and Division of Developmental Disabilities (DDD) group homes.

HIV PREVENTION PROGRAM
The HIV Prevention team provided COVID-19 response and logistics support at the PCHD central warehouse during the pandemic. This team was instrumental in managing inventory and stocking of incoming PPE supplies from ADHS and FEMA. This team also provided limited services for HIV/STI prevention through the Teen Mobile program and static clinic locations.

HIV/STI SURVEILLANCE PROGRAM
This program assisted neighboring counties with linkages to care for newly diagnosed patients as well as assisting with investigations throughout the pandemic.

ORAL HEALTH
For most of FY 2020-21 Oral Health was reassigned to other internal teams to assist with the PCHD COVID-19 Response Efforts. First Smiles Matter and the Cavity Free AZ programs continued to address grantor requests and reporting.

TITLE X FAMILY PLANNING PROGRAM
The Family Planning program saw approximately 6,000 clients, with a chlamydia-screening rate of 93%, higher than all Title X providers in the State of Arizona.

VACCINE IMMUNIZATION PROGRAM
The immunization and vaccine program continues to manage Pima County immunizations and COVID-19 vaccinations through the pandemic response.

Managed new and existing grant money to expand vaccination programs and reduce disease burden in community.

Managed allocation of approximately 481,300 doses of COVID-19 vaccine to Pima County vaccinators as well as ongoing childhood and adult immunizations.

WELL WOMAN HEALTH CHECK PROGRAM
The Well Woman Health Check program focused on improvement in interoperability and access to care by implementing electronic referrals from our EHR to our community partners and transitioning into electronic billing processes as recommended under ADHS guidelines. These changes enabled PCHD to establish direct provider relationships to perform colposcopy and loop electrosurgical excision procedures.

481,300 doses of COVID-19 vaccine allocated

6,000 patients seen

93% chlamydia-screening rate
GRANTS TO COUNTIES PROGRAM
CHFS received two grants from the Food and Drug Administration, totaling $135,000, to achieve conformance with the Voluntary National Retail Food Regulatory Program Standards for standards 2, 3, 4 and 5. Additionally, CHFS received a training grant from the Association of Food and Drug Officials, allowing four staff members to virtually attend the Conference for Food Protection.

COVID-19 INSPECTIONS AND INVESTIGATIONS
CHFS helped enforce Pima County Board of Supervisors (BOS) mandates in permitted and non-permitted facilities through compliance investigations. As a part of routine food safety inspection, temporary event mitigation measures were enforced, and environmental assessments were completed for possible COVID-19 outbreak investigation. Conducting inspections based on the BOS COVID-19 Safety Measures Proclamation were linked to a reward system known as “Ready For You,” wherein permitted facilities found 100% compliant with the BOS Proclamation would receive an emblem to place near entrances.

CHFS addressed over 3,500 COVID-19 complaints that were received by the Department.

CHFS conducted 5,248 in-person COVID-19 compliance assessments of BOS Proclamation and Face Covering Resolution in both permitted and non-permitted facilities.

TRAINING AND CLASSES
During and continuing through the pandemic, PCHD offered Virtual ServSafe food handlers training for free through 2021.

3,500+ COVID-19 complaints received
5,248 in-person COVID-19 compliance assessments conducted

832 courses issued
53 courses in progress
376 courses not started

ENVIRONMENTAL HEALTH
INSPECTIONS
4,135 Food service establishment inspections
537 Food service establishment re-inspections
891 Pre-operational inspections
335 Temporary food establishment inspections

FOOD BORNE ILLNESS (FBI)
92 FBI complaints received
396 Non-FBI complaints investigated

92 FBI complaints received
396 Non-FBI complaints investigated
The Arizona Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides nutrition education, breastfeeding support services, supplemental nutritious foods and referrals to health and social services. PCHD WIC saw a 12 percent increase in participation at the onset of the pandemic. Additionally, federal COVID aid provided $480 million for four months of enhanced WIC benefits. This funding increased the Cash Value Benefit (the money WIC participants have to spend on fruits and vegetables each month) from a maximum of $11 to $35 for each participant over age 1.

The PCHD WIC program also receives funding to provide Breastfeeding Peer Counseling (BFPC) services for pregnant and breastfeeding WIC participants, allowing PCHD WIC to offer peer-to-peer breastfeeding support focused on increasing initiation and duration of breastfeeding.
**BICYCLE AND PEDESTRIAN PROGRAM**

The Bicycle and Pedestrian Program provided 41 community members, including 17 tribal members, with training on traffic skills and bicycle mechanic, as well as providing 225 bicycle helmets to K-12 students coupled with on-road and in-person class training on bicycle safety education and instruction.

- **41** community members trained
- **225** bicycle helmets provided to K-12 students

---

**CHILD CARE HEALTH CONSULTANT (CCHC)**

In Pima County, almost 45,000 children attend childcare programs each day. PCHD has provided health consultation services to childcare centers, Head Start programs, and family childcare providers since 1987. Since 2009, these services have been funded primarily through a grant from First Things First in support of Arizona’s quality improvement and rating system.

Currently the CCHC program is providing services to 196 childcare programs in the First Things First

- **196** childcare programs served

---

**CHRONIC DISEASE PROGRAM**

The Chronic Disease Program worked closely with schools throughout the county.

Some initiatives include:

- Collaborated with the American Heart Association to collect donations of new CPR kits for schools.
- Recruited 62 teachers from 53 schools to participate in the Southern Arizona School Wellness Coalition (SASWC).
- Provided technical assistance to 24 schools on the adoption of a hands-only CPR policy.
- Provided technical assistance, training and support to over 250 schools participating in Pima County’s Stock Inhaler Program.

- **62** teachers recruited to participate in SASWC
- **24** schools assisted with hands-only CPR policy
- **250+** schools provided support in Pima County’s Stock Inhaler Program

---

**COMMUNITY MENTAL HEALTH AND ADDICTION (CMHA)**

In April 2020 a series of alerts were distributed regarding increased risk of suicide during the pandemic. In response to the alerts, AHCCCS applied for emergency grant funding and incorporated data from CMHA as supporting evidence. Ultimately, they were awarded $800K and the funding was distributed locally to providers serving our local community.

The team also conducted surveillance of overdose trends and supplied critical data regarding racial disparities observed in fatality rates for Blacks and American Indians/Alaska Natives.

Throughout the pandemic, the team also created monthly vulnerability assessments to county leadership to monitor socially vulnerable areas in Pima County. The CMHA team identified the CDC Social Vulnerability Index as an ideal tool to monitor these areas on the map during a natural disaster. As a result, a quartile system was developed that is still in use locally, and the system has been acknowledged at the national level. By the end of 2020, the maps had been applied to multiple projects, including equitable vaccine distribution, drug overdose clusters, and suicide prevention variables. The work is now a permanent fixture in the department.

Lastly, the team was also acknowledged for advanced surveillance methods during the opioid overdose crisis. AzDHS has recommended our system for surveillance (monitor>alert>respond) to multiple counties and also submitted our program name to participate as one of nine for a national interview project through the CDC that examined new and emerging practices for opioid surveillance.
MATERNAL AND CHILD HEALTH (MCH)—TITLE V PROGRAMMING

MCH led several initiatives, including:

- The Youth Violence Prevention (YVP) Program partnered with the Pima County Schools Superintendent’s Office to encourage K-12 teachers to participate in the state’s bullying prevention training.
- YVP collaborated with PCHD’s Teen Mobile Clinic to create a system for referring male adolescent victims of physical violence to Boys to Men, a mentorship program.
- YVP held an “Autism: Education & Equity – A Public Health Discussion” virtual conference. YVP coalition meetings were on hold throughout the year due to the COVID-19 pandemic but resumed in April 2021.
- The Coordinated School Health Program co-developed and distributed two physical activity videos for elementary school aged youth with Playformance with 9,412 impressions/views.
- The Car Seat Installation Program installed more than 80 car seats coupled with one-hour car seat installation training for parents and guardians.

MITIGATING COVID IN COMMUNITIES OF COLOR

Data has shown that communities of color, including refugee and immigrant communities, have been impacted disproportionately by COVID-19. In response to this inequity, PCHD partnered with the International Rescue Committee to create the “Mitigating the Impact of COVID-19 in Communities of Color” program, or “mc3” for short. This program was funded with federal CARES Act dollars through The Arizona Department of Health Services. Among its goals was to test 2,000 people from September 2020 – February 2022.

The MC3 Program was nationally recognized by the National Association of County and City Health Officials (NACCHO) for the 2021 Innovative Practice in recognition of “programs developed in response to the COVID-19 pandemic demonstrating effective community partnerships and collaboration, adaptability and program resilience, and remarkable innovation.” Out of 76 local health departments national wide, MC3 was one of eight gold award winning programs.

To date the program has tested a total of 7,784 people across 57 sites from September 2020 – June 2021, surpassing the goal by 389% to areas with the highest Social Vulnerability Index scores in the county. The CDC Social Vulnerability Index determines the social vulnerability of every census tract. The SVI ranks each tract on 15 social factors, including poverty, lack of vehicle access, and crowded housing. The SVI can be used to identify communities who are may need additional support.

HEALTH START

Health Start is a community based, evidence informed home visiting program that utilizes community health workers to provide education, support and advocacy services to pregnant and postpartum women and their families in targeted areas in our community. Women and their families receive home visits and case management at no cost. During the grant year 2020-2021, the Pima County Health Start program enrolled 31 families virtually and conducted 486 virtual home visits.

31 families virtually-enrolled

486 virtual home visits conducted

NURSE FAMILY PARTNERSHIP

Nurse-Family Partnership (NFP) is an evidence-based home visiting model for first-time mothers. During the COVID-19 pandemic, in-person visitation stopped and NFP nurses provided services using only telehealth, including telephone calls and video chat. NFP nurses discovered new strategies to engage clients using telehealth visits by changing their visit structure, using email and text messages to share NFP handouts, and by mailing books and other program incentives to clients.

NFP maintained their client caseload goal. NFP served 86 first-time mothers and completed 926 telehealth visits. NFP enrolled 26 new mothers in the program, and 13 mothers successfully graduated from the program.

86 first-time mothers served

926 telehealth visits completed
The Tobacco Program mentored and provided technical support to 74 students representing four Students Working Against Tobacco (SWAT) youth coalitions during this fiscal year. The Tobacco Program provided support and technical assistance to the Pima County Task Force Group (PCTFG) with 24 representatives from all 12 school districts to address youth vaping. The Tobacco Program trained five behavioral health agencies on Arizona Smokers’ Helpline (ASHLine) services and held two Freedom From Smoking Clinics for tribal members (in partnership with Tucson Indian Center).

74 student-representatives supported

24 PCTFG representatives supported

5 behavioral health agencies trained on ASHLine services

RACIAL AND ETHNIC APPROACHES TO COMMUNITY HEALTH (REACH)

The REACH Program (Racial and Ethnic Approaches to Community Health), in collaboration with the REACH The Loop Community Coalition, drafted a Chuck Huckelberry Loop Improvement Plan to improve public access from neighborhoods in south and southwest Tucson to the Loop. The improvements spanned more than 14 miles and included bike racks, paved connector paths, bollards, benches, wayfinding signs, and safety signage. The REACH Program trained 24 community leaders as nationally certificated bicycle instructors to lead community bike rides and provide bicycle education to youth and adults in priority neighborhoods. The REACH Program created an 18-member interdisciplinary team of internal staff and external partners to build a secure resource database system called “Care Resource Coordination” (CRC) to connect individuals reached by the COVID-19 contact tracers to needed social and health resources. From July to December 2020, the CRC connected over 10,000 people to needed health and social services, such as food, childcare and health insurance.

14 miles of Loop improvements

10,000+ people connected to needed services via CRC

1,400+ flu shots administered

REACH FLU PROGRAM

REACH Flu partnered with the PCHD Clinical Services Division and public health nurses to conduct flu outreach messaging, host mobile flu shot clinics, train healthcare providers on flu messaging, and conduct media and social media campaigns such as radio PSAs, flyers, newsletters, toolkits, and posters. The REACH Flu Program delivered and connected over 1,400 people to flu shots in October and November 2020. The REACH Flu program was interviewed by the CDC to highlight their Flu Fighters campaign and presented at NACCHO in January 2021 on “Increasing Vaccination Coverage Among Racial and Ethnic Groups.”

74 student-representatives supported

24 PCTFG representatives supported

5 behavioral health agencies trained on ASHLine services
Public Health Assessment and Preparedness

Public Health Emergency Preparedness
Epidemiology Program

Public Health Emergency Preparedness

Public Health plays a critical role in emergency preparedness. The program works to prepare staff and partners in the event of public health emergencies, and during these emergencies, offers guidance, processes, and resources. A significant response activity also includes public and partner messaging, incorporating emergency crisis risk communications networks and strategies. The division facilitates training of staff in the National Incident Management System to ensure understanding and enhance accountability and safety during an emergency.

FY2020 Accomplishments:

• County and department staff worked nearly around the clock to develop appropriate policies and workplans to distribute PPE, manage testing efforts as well as vaccine supply and create and implement registration systems, POD operations, communications, and other systems to support the COVID-19 response effort.

• Pima County met its vaccine rollout goal of inoculating 300,000 persons with first doses by March 31, 2021. By that date, the health department and partners had administered at least one vaccine dose to more than 360,000 persons. Pima County has among the highest vaccination rates in Arizona and the nation.

Epidemiology Program

The Epidemiology Program provides epidemiologic surveillance services for the Pima County population, including investigation of all reportable communicable disease and outbreaks listed under Arizona Administrative Codes (R9-6-9-202). The program focuses on monitoring and reporting infectious disease of public health importance as well as assisting with control measures to prevent disease spread and outbreaks. During 2020, the program established accelerated case investigation and contact tracing in response to the COVID-19 pandemic, ensuring appropriate and timely response to the pandemic.

360,000+
people who received at least one COVID-19 vaccination by March 31, 2020