


Introduce yourself! Post your name, title, organization and **what's on top of your fridge** in the chat box.

The meeting will begin momentarily



WELCOME TO THE
CAROLINAS
PANDEMIC
PREPAREDNESS TASK
FORCE – MEETING 1

A joint task force of the South Carolina Institute of Medicine and Public Health (IMPH) and the North Carolina Institute of Medicine (NCIOM)

Task Force Co-Chairs



South Carolina Institute of
Medicine & Public Health



Harris Pastides, PhD, MPH

Interim President


University of South Carolina



Machel Baker Sanders, MHA

Secretary

North Carolina Department of Commerce



THE CAROLINAS PANDEMIC PREPAREDNESS TASK FORCE

Maya H. Pack, MS, MPA, Executive Director, IMPH

Kathy Colville, MSW, MSPH, President and CEO, NCIOM

About the Institutes

- **The South Carolina Institute of Medicine & Public Health (IMPH)** is an independent entity serving as an informed nonpartisan convener around the important health issues in our state, providing evidence-based information to inform health policy decisions through research, task forces and the Health Policy Fellows Program.

- Read more:

<https://imph.org/about/>

- **The North Carolina Institute of Medicine, NCIOM**, is an independent organization focused on improving the health and well-being of North Carolinians by providing analysis on the health and well-being of North Carolinians, identifying solutions to the health issues facing our state, building consensus toward evidence-based solutions, and informing health policy at the state and local level.

- Read more:

<https://nciom.org/about-us/>

History and Evolution

Why this Task Force? Why now?

As the challenges of illness, job loss, isolation, economic distress and educational interruptions due to the COVID-19 pandemic became clear, stakeholders across both states identified the need to develop consensus-driven and actionable recommendations for timely, coordinated response efforts, with the goal of improving pandemic response and addressing community resilience.

Feedback from Crisis Response Stakeholders

NCIOM and IMPH sought feedback from state leaders and experts on the scope and timing of Task Force from:

- NC DHHS
- NC AHEC
- UNC Health Care
- NC local health directors
- BCBS Foundation of NC
- Kate B. Reynolds Charitable Trust
- SC Office of Rural Health
- SC DHEC
- SC AHEC
- SC Office of the Governor
- BCBS Foundation of SC
- SC Department of Social Service
- Medical University of SC
- SC Hospital Association

Goals of the Task Force

1. Assess lessons learned during the first year of the current pandemic
2. Develop consensus on actionable recommendations for resilient response
3. Focus on equity and develop an approach to address the needs of historically marginalized communities, which have been disproportionately impacted by COVID-19

The Task Force will focus on several key areas/themes

1. Health and human services, including health care, social services, aging and long-term care services, and educational systems;
2. Infrastructure and communication needs;
3. Ensuring economic stability for communities, including businesses, individual employees and families, to mitigate against economic impacts;
4. Expediting access to essential pandemic response services in rural communities; and
5. Building resilience in communities across the state.

The Four Pillars



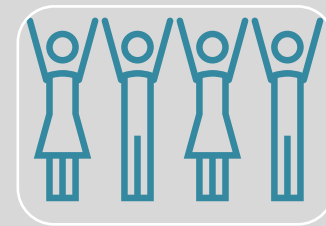
Health



Education



Equity



Economic &
Social Stability

Task Force Meeting Dates

Date of Meeting
July 19 th , 2021
August 18 th , 2021
September 20 th , 2021
October 18 th , 2021
November 15 th , 2021
January 24 th , 2022
February 28 th , 2022
March 21 st , 2022
April 25 th , 2022

Final Reports Released: June 2022

Steering Committee

South Carolina

Graham Adams, PhD, Chief Executive Officer, South Carolina Office of Rural Health

Angel Bourdon, Innovation Manager, South Carolina Hospital Association

Pat Cawley, MD, MBA, President and Chief Executive Officer, Medical University of South Carolina

Abdoulaye Diedhiou, PhD, Director, Division of Acute Disease Epidemiology, South Carolina Department of Health and Environmental Control

Melanie Matney, MHA, Chief Operating Officer, South Carolina Hospital Association

Kathia Valverde, Community Health Worker, PASOS

North Carolina

Cardra Burns, DBA, MPA, CLC, Deputy Secretary, Operational Excellence, North Carolina Department of Health and Human Services

Ellen Essick, PhD, Section Chief, NC Healthy Schools, North Carolina Department of Public Instruction

Kelly Fuller, President, NC Chamber Foundation

Tatyana Kelly, Vice President, Planning/Strategy & Member Services, North Carolina Healthcare Association

Lillian Koontz, MPA, Health Director, Davidson County

Will Ray, MPH, Chief of Staff, Emergency Management, North Carolina Department of Public Safety

Polly Welsh, RN – BC, MPH, Executive Vice President, North Carolina Healthcare Facilities Association

Guiding Principles

- **Consensus** means that, even though the decision may not be the first choice of everyone, everyone can live with and will support the decision. Consensus does not mean unanimous agreement.
- **Inclusivity**: Effective collaboration requires transparency and inclusiveness, equality among all participants and active participation from all partners.
- **Impact**: Effective collaboration requires acknowledging capacity and scaling interventions to realistic goals.
- **Strategic Alignment**: Effective collaboration requires all participants to disclose when our own interests are in conflict with those of the task force.
- **Respect**: Effective collaboration requires mutual trust and respect for organizational boundaries, continuity in communication and interaction and a distinction between policy analysis and political commentary.