

Northampton County Health Department

Strategic Plan 2016-2017



Mission

The central purpose and role of the Northampton County Health Department is defined as:

“Promote, provide, and protect the health and safety of the citizens of Northampton County.”

Vision

“A culturally sensitive health organization providing quality services yielding improved health outcomes.”

This document reflects the areas of focus of the Northampton County Health Department during 2016-2017.

The Northampton County Health Department is committed to carrying out the following action plan to improve the health of Northampton County residents.

The Leadership Team of the Northampton County Health Department envisions an agency that strives to meet the following guiding principles.

- **Health Department acquires and maintains Local Health Department Accreditation Status defined in policies and protocols maintained by all programs.**
- **Service deliverables and expansion are driven by community need.**
- **Improved efficiency is attained in all divisions.**
- **Health Department recruits, develops and retains a well-qualified, diverse workforce.**
- **Quality of services is assured through implementation of the quality assurance plan.**
- **Residents experience improved health outcomes and quality of life.**
- **Health Department is accountable to the public in fiscal responsibility and service delivery.**
- **Efforts are conducted through improved internal collaboration and communication.**
- **Expanded service availability is provided through on-going support by the BOH and County Commissioners.**
- **Funding is available to support and improve our programs.**
- **Best practices, as recognized by the public health community are utilized in service provision.**
- **Department is capable of providing a comprehensive response to Public Health emergencies.**

The Northampton County Health Department BOH and Management staff identified following key strengths, weaknesses, threats and opportunities for Northampton County Health Department.

Strengths	Weakness	Threats
<ul style="list-style-type: none"> • Long-term employees • Knowledge of staff • Dedicated staff • Fiscally responsible • Confident clinics • Positive reviews in client satisfaction surveys • Technologically 	<ul style="list-style-type: none"> • Have not implemented Electronic Medical Records yet • County government does not have a general working knowledge of what the Health Department does • Lack of providers • Budgetary constraints 	<ul style="list-style-type: none"> • Federally Qualified Health Center and other competition • Cut in funding • Medicaid expansion • State Lab shortfall • Service accessibility within agency • Decrease in population

current	<ul style="list-style-type: none">• Nursing Director• Difficulty getting positions filled• Language barrier• Lack of behavioral/mental health resources	<ul style="list-style-type: none">• Aging in population
---------	--	---

Strategic Goals

The following goals were identified in the Healthy Carolinians action plans in response to the Northampton County Health Department's Community Health Assessment and by Northampton County Health Department's Program Supervisors.

<u>Goal 1</u>	Reduce exposure to second hand smoke.
<u>Goal 2</u>	Decrease mortality rates of Breast and Prostate Cancer.
<u>Goal 3</u>	Reduce chronic diseases in Northampton County.
<u>Goal 4</u>	Develop and maintain a qualified public health workforce.
<u>Goal 5</u>	Improve the following Home Health Process Quality Measure: Improvement in Bed Transferring.
<u>Goal 6</u>	Improve and enhance the Animal Control and Environmental Health programs.
<u>Goal 7</u>	Continue to improve Case Management.
<u>Goal 8</u>	Improve and enhance clerical efficiency.
<u>Goal 9</u>	Maintain lab certifications.
<u>Goal 10</u>	Continue to improve and enhance the Nurse Family Partnership Program.
<u>Goal 11</u>	Continue to improve Clinical Services.
<u>Goal 12</u>	Improve the Preparedness of the Health Department and County.
<u>Goal 13</u>	Increase WIC caseload through outreach.
<u>Goal 14</u>	Improve and Enhance the

	Administrative services of the Health Department.
--	--

Community Health Assessment 2014

The Northampton County Health Department in collaboration with members from a variety of service agencies such as Northampton County Parks and Recreation, Northampton County Manager's Office, Northampton County Cooperative Extension, Northampton Chamber of Commerce, Northampton County Department of Social Services, Northampton County Human Resources, Eastern Carolina Behavioral Health, Northampton County Schools, Northampton County Office on Aging, Rural Health Group of North Carolina, Halifax Regional Medical Center, Choanoke Area Development Association, Northampton County Public Works Department, and community members all helped to identify health priorities for Northampton County. Focus Groups, key informant interviews, a community survey and analysis of secondary data were all used in defining the 2014 Health Priorities. A full copy of the community health assessment can be found on the departments' webpage at www.northamptonhd.com.

Priorities identified in the 2014 Community Health Assessment are:

- 1) Cancer (Breast/Prostate)
- 2) Drug/Substance Abuse (Tobacco)
- 3) Physical Activity/ Nutrition

Cancer (Breast/Prostate)- As of July 1, 2014 The United States Census estimates North Carolina's Population is 318,857,056 and Northampton's Population is 20,463. The African American Population for the state is 13.2% and for Northampton County the African American Population is 58.4%. The Female population for North Carolina is 50.8% and for Northampton the population is 51.8.

Source: United State Census Quick Facts

From 2009 -2013 the mortality rate for Breast Cancer in Northampton County is 3% higher than the rate of breast cancer for the state.

Source North Carolina Cancer Registry, 1/2015

The July 1, 2014 The United States Census estimates North Carolina's Population is 318,857,056 and Northampton's Population is 20,463. The African American Population for the state is 13.2% and for Northampton County the African American Population is 58.4%. The male population for North Carolina is 49.2% and for Northampton the male population is 48.2

Source: United State Census Quick Facts

From 2009 -2013 the mortality rate for Prostate Cancer in Northampton is 16.9% higher than for the state for the same time period.

Source: North Carolina Cancer Registry, 1/2015

Drug/Substance Abuse (Tobacco)- The rate of current smokers in Eastern North Carolina is .7% higher than the rate for North Carolina

Source: 2013 State Center for Health Statistics – 2013 BRFSS Tobacco Use Survey Results.

Physical Activity/Nutrition- In Eastern North Carolina 3.2% of residents have a body mass index (BMI) greater than the state.

Source: 2013 BRFSS Survey Results: Eastern North Carolina

Department Work plan

Goal 1		Reduce exposure to second hand smoke.	
Objective # 1		Decrease tobacco use in public/multi-unit housing by five percent.	
Baseline Data		Rate of Current smokers in Eastern North Carolina 20.9% Rate of current smokers in North Carolina 20.2% Source North Carolina State Center for Health Statistics 2013 BRFSS Survey Results.	
CHA Priority Addressed		Tobacco	
Activities	Lead Person	Partners N=New; E=Existing	Timeframe
Continue collaborations with schools, child care centers, faith communities, and public housing on the harmful effects of tobacco use including e-cigs.	Virginia McClary		October 2017
Work with Management in developing a Tobacco Free Policy. Utilize the HUD Tobacco Free Policy in developing the policy	Virginia McClary		October 2017

Goal 2		Increase life expectancy by decreasing Breast and Prostate Cancer rates.													
Objective # 1		Increase the percentage of adults reporting good health by 7%													
Baseline Data		<p>Would you say that in general your health is?</p> <table border="0"> <tr> <td></td> <td>Excellent</td> <td>Very Good</td> <td>Good</td> </tr> <tr> <td>NC</td> <td>18.3%</td> <td>34.4%</td> <td>31.0%</td> </tr> <tr> <td>NH</td> <td>18.2%</td> <td>27.4%</td> <td>34.3%</td> </tr> </table> <p>Source North Carolina State Center for Health Statistics</p> <p>2013 BRFSS Survey Results</p>			Excellent	Very Good	Good	NC	18.3%	34.4%	31.0%	NH	18.2%	27.4%	34.3%
	Excellent	Very Good	Good												
NC	18.3%	34.4%	31.0%												
NH	18.2%	27.4%	34.3%												
CHA Priority Addressed		Cancer													
Activities	Lead Person	Partners N=New; E=Existing	Timeframe												
Continue to educate and urge individuals to get screened.	Virginia McClary		Monthly												

Goal 3		Reduce chronic disease in Northampton County.	
Objective # 1		Increase the percentage of adult citizens receiving the recommended amount of physical activity by five percent. Increase the percentage of Adult Citizens consuming five - nine daily servings of fruit and vegetables by five percent.	
Baseline Data		Adults with a BMI of 25% North Carolina - 66.1% Northampton County – 69.3% North Carolina state Center for Health Statistics BRFSS Results 2013	
CHA Priority Addressed		Physical Activity and Nutrition	
Activities	Lead Person	Partners N=New; E=Existing	Time Frame
Promote Healthy Eating and physical activities in communities of faith <ul style="list-style-type: none"> • Utilize the Faithful Families Eat Smart Curriculum Conduct 9 lessons on Eating Smart and Moving More – co taught by a Lay Leader	Virginia McClary		October 2017
Promote and Increase participation in the Diabetes support groups in Jackson and Rich Square	Virginia McClary		October 2017
Start a new Diabetes Support Group in Garysburg	Virginia McClary		January 2017

Goal 4		Develop and maintain a qualified public health workforce.	
Objective # 1		Educate and train staff annually.	
Baseline Data		Staff is receiving appropriate trainings on an annual basis.	
CHA Priority Addressed		N/A	
Activities	Lead Person	Partners N=New; E=Existing	Time Frame
Safety Training	Megan Vick		November 2016
Respiratory Fit Testing	Megan Vick		November 2016
Cultural Diversity/ Customer Satisfaction Training	Megan Vick		April 2017

Goal 5		Improve the following Home Health Process Quality Measure: Improvement in Bed Transferring	
Objective # 1		Improve Outcome percentage on Bed transfers to 63%.	
Baseline Data		Based on 12 month time period 7/2015 – 6/2016 from the Casper Reporting system- Agency Rate =52%	
CHA Priority Addressed		N/A	
Activities	Lead Person	Partners N=New; E=Existing	Time Frame
Improve assessment strategies for clinicians by: -staff education on transfer scoring from OASIS guidance manual -staff education on safety factors affecting the correct scoring of bed transfers	Susan/ Anneke		Run Casper process report October 2017 for most recent 12 month time period available (it should be 7/2016-6/2017)
On multidisciplinary patients, the assessing clinician will confer with other team members, such as therapy or aide to assure accuracy and consistency in transfer scoring.	Susan/ Anneke		Run Casper process report October 2017 for most recent 12 month time period available (it should be 7/2016-6/2017)

Goal 6		Improve and enhance the Animal Control and Environmental Health programs.	
Objective # 1		Have Animal Control Attendant trained and certified as a County Certified Rabies Vaccinator.	
Baseline Data		Currently, the Animal Control officer is the only agency employee who is trained and certified as a Certified Rabies Vaccinator.	
Objective #2		Develop/ modify office procedures to make EH office easier to “negotiate” for clients coming in for EH/ Animal Control services.	
Baseline Data		Currently, the office is not entirely conducive to accommodate clients.	
CHA Priority Addressed		N/A	
Activities	Lead Person	Partners N=New; E=Existing	Time Frame
Have the Animal Control Attendant attend and complete necessary training(s) to acquire state certification.	Dana Hardin		October 2017
Rearrange/ refurbish office as necessary to better accommodate clients. Adopt or change official policies as needed to accomplish goal.	John White		October 2017

Goal 7		Continue to improve Case Management.	
Objective # 1		Increase and maintain case load of 30 to 35 annually.	
Baseline Data		As of November 1, 2016, the caseload is currently 29.	
CHA Priority Addressed		N/A	
Activities	Lead Person	Partners N=New; E=Existing	Time Frame
Increase and maintain caseload of 30-35	Carol Lee		October 2017

Goal 8		Improve and enhance clerical efficiency.	
Objective # 1		Train another clerical staff member on Environmental Health clerical aspects such as knowledge of prices, etc.	
Baseline Data		Currently there is only one staff member who is trained on EH clerical duties.	
CHA Priority Addressed		N/A	
Activities	Lead Person	Partners N=New; E=Existing	Time Frame
Supervisor will pick a clerical staff member to be trained in EH clerical duties especially knowledge of prices of EH services, etc.	Julie		October 2017

Goal 9		Maintain lab certifications.	
Objective # 1		Maintain CLIA certification	
Baseline Data		Lab is up for CLIA recertification. The last certificate was issued in November 2014.	
Objective #2		Maintain water certification.	
Baseline Data		The last certificate was issued in August 2016.	
CHA Priority Addressed		N/A	
Activities	Lead Person	Partners N=New; E=Existing	Time Frame
Pass CLIA inspection	Birdie Outland		April 30, 2017
Pass proficiency test twice a year to maintain water certification.	Birdie Outland		February and July of 2017

Goal 10		Continue to improve the Nurse Family Partnership Program.	
Objective # 1		Staff will attain and maintain a caseload of 25 clients.	
Baseline Data		As of November 1 2016, one nurse home visitor (nhv) has a caseload of 25, one nhv has 21 clients, one nhv has 18 clients, one nhv has 15 clients, and one nhv has a caseload of seven (new and is building caseload at the rate of three to four clients a month.	
CHA Priority Addressed		N/A	
Activities	Lead Person	Partners N=New; E=Existing	Time Frame
Nurse will enroll above 25 clients when she has several inactive clients or when a client is on a reduced visit schedule.	All NHV		September 2017
Increase outreach to increase number of referrals. (hospitals, churches housing schools, pregnancy care centers, OB/GYN's in all five counties)	All NFP Staff		September 2017
Monitor retention rates including pregnancy, infancy, and toddler stages.	Tia Alfonso		Monthly
Enroll at least three to four clients per month until full caseload achieved.	All NHV		Monthly

Goal 11		Continue to improve and enhance Clinical Services.	
Objective # 1		Implement LARC in OB and FP clinic.	
Baseline Data		LARC is the most effective method for preventing unplanned pregnancy and is not offered.	
Objective # 2		Obtain Meaningful Use with Cure MD.	
Baseline Data		Attestation for Meaningful Use is in process.	
Objective # 4		Complete Nurse Competency policy, process, and develop tools for clinical nursing staff for clinical nursing staff.	
Baseline Data		A policy has been developed. It needs to be approved by the BOH.	
Objective # 5		Revise audit policy to include coding audit.	
Baseline Data		Coding audit is not in the current policy.	
CHA Priority Addressed		N/A	
Activities	Lead Person	Partners N=New; E=Existing	Time Frame
Implement LARC in OB and FP clinic.	Judi Northcott	(N) Dr. Singer (N) Linda Cross (N) WHB nursing consultant	January 1, 2017
Obtain Meaningful Use with Cure MD including utilizing the system as an EHR, e-prescribe, lab, and patient portal.	Judi Northcott	(N) Angela Holley (N) Julie Martin	March 2017
Complete Nursing Competency policy and develop tools for clinical nursing staff.	Judi Northcott		December 31, 2016
Begin a process for evaluations using new Nursing Competency policy.	Judi Northcott		January 2017
Revise Audit policy to include coding audit.	Judi Northcott Julie Martin		Prior to next scheduled chart audit

Goal 12		Improve the Preparedness of the Health Department and County.	
Objective # 1		Complete all AA requirements for the Ebola AA that ends May 31, 2017.	
Baseline Data		Before May 31, 2017, there are certain requirements and plans that need to be addressed that are listed below.	
Objective # 2		Conduct a tabletop for security functions as it relates to POD management and medical countermeasure materials.	
Baseline Data		Currently, there has not been a tabletop done.	
CHA Priority Addressed		N/A	
Activities	Lead Person	Partners N=New; E=Existing	Time Frame
Complete Home Health tabletop exercise	Megan Vick/ Home Health staff		November 2017
Conduct one informational sharing session for Zika.	Megan Vick		May 2017
Develop and implement a public health message campaign for mosquito vector control.	Megan Vick		May 2017
Write a Concept of Operations plan	Megan Vick		May 31, 2017
Conduct a tabletop on POD operations specifically targeting security	Megan Vick	Sheriff Smith	May 31, 2017

Goal 13		Increase WIC Caseload.	
Objective # 1		Increase WIC Caseload by Outreach to Healthcare Providers and Public Assistant Offices.	
Baseline Data			
CHA Priority Addressed		N/A	
Activities	Lead Person	Partners N=New; E=Existing	Time Frame
Place WIC outreach posters in county facilities including DSS, Private Provider Offices, etc.	Sheila Person		October 2017
Place brochure holders with outreach materials in Private Provider Offices, Convenience stores and maintain on a quarterly basis	WIC Staff		Quarterly in 2017

Goal 14		Improve and enhance the Administrative services of the Health Department.	
Objective # 1		Train Administrative Assistant on HIPAA, Spiceworks, State Budget, and the contract system.	
Baseline Data		New staff member started on October 24 and has started training.	
CHA Priority Addressed		N/A	
Activities	Lead Person	Partners N=New; E=Existing	Time Frame
Train Administrative Assistant on HIPAA, Spiceworks, State Budget, and contract system.	Cheryl Warren		October 2017

Updates from 2015-2016 Strategic Planning

Tobacco

- **Provide education and activities during health awareness months in child care centers, schools, faith communities and multiunit/public housing. *Goal Met***
- **Work with management in developing a Tobacco Free Policy. Utilize the HUD Tobacco Free Policy in developing the policy. *Goal On-going***
- Provided education and activities on tobacco use and exposure to residents in public housing during the health awareness months for Heart Health, Colon Cancer Awareness, Minority Health Awareness, Asthma and Allergy Awareness, Stroke, and Women's Health.
- Provided resources and information for display in common areas on tobacco use for all public housing facilities.
- Provided Regional Director with information from the State on tobacco use in public housing, including how to implement a policy to become a tobacco free facility.
- Provided smoking cessation class at one public housing site.
- More than 250 middle and high school students attended a presentation by a former teen tobacco user and throat cancer survivor.
- 35 5th grade students received education on puberty and healthy life styles including tobacco use and e-cigs.
- Five faith based communities received education on healthy life style changes including tobacco use.
- Three child care centers received education on healthy life styles for youth including tobacco use and e-cigs.

Cancer

Breast

- **Provide education and activities to improve general health during health observance months in faith based communities. *Goal Met***
- 79 female participants from three faith based communities received education on women's health issues including breast cancer.
- 25 women participated in a breast cancer education conference and screening.

Prostate-

- **Provide education and activities to improve general health during health observance months in faith based communities. *Goal Met***
- 46 participants in four faith based communities received education on prostate health during Men's Health month.
- Male offenders in one correctional facility received education on men's health issues including prostate cancer and healthy lifestyles.
- 88 men were screened for prostate cancer including 47 African American males.

Physical Activity and Nutrition

- **Promote healthy eating and physical activity in communities of faith. Utilize the Faithful Families Eat Smart Curriculum. Conduct nine lessons on Eating Smart and Moving More – co taught by a Lay Leader. *Goal met***
- Implemented the Faithful Families Eat Smart Move More Curriculum in two faith based communities.
- Education was provided on:
 - ✓ Plan what is for dinner
 - ✓ Shop - Get the Best for Less
 - ✓ Shop for Value, Check the facts
 - ✓ Fix Fast eat at Home
 - ✓ Choosing More fruits and Vegetables
 - ✓ Fix it Safe
 - ✓ Making Smart Drink Choices
 - ✓ Choosing to move more
 - ✓ Making the Connection
- Food preparation, food tasting and physical activity are included in the lessons.
- 17 individuals participated in the curriculum

Develop and maintain a qualified public health workforce.

Educate and train staff annually. *Goal met*

- Safety Training completed November of 2015
- Respiratory Fit Training completed November of 2015
- Cultural Diversity/ Customer Service Training completed May 2016

Improve Home Health process

Improve the Home Health process measure for timely initiation of care.

Goal was 90%, *Goal met* with 92%.

Environmental Health

Conduct renovations and improvements to the agency's pound. *Goal Met*

- During spring 2016, major Facility upgrades were completed by J.T. Barnes Construction at the Facility. These renovations included new fencing in the runs, painting, ceiling installation, door repair, roof repairs, front of building improvements, and the installation of County Water.
- These renovations should allow our Facility to better comply with NC Dept. of Agriculture and Consumer Services Animal Welfare Laws and Rules. Additionally, the appearance of the facility is greatly improved, and the interior is much cleaner and brighter, which also has the benefit of improving the safety of the shelter for both staff and animals.

Case Management

Continue to improve Case Management. (Increase and maintain a caseload of 35-45 annually) *Goal not met*

Goal not met because screenings are not received in a timely manner and deferrals are sometimes three to four people in a month's time. Staff member is averaging 30-35 right now.

Identify one person at pregnancy medical home for contact about pregnancy risk screenings. *Goal not met*

Goal not met because all nurses complete screenings for patients. Staff member has no problem getting what she needs from the nurses if the screening is not completed.

Clerical

Improve the efficiency of the clerical aspects of General Clinic. Develop a new appointment system for sick patients and STD's. *Goal met*

Clerical staff member did not complete QI 101 Training. The project was still conducted and completed. Appointment books for STD scheduling and Nurse Practitioner's scheduling are being used.

Lab

Improve Lab efficiency. Have the FP Lead Nurse proficient in lab. *Goal not met*

After multiple attempts to get staff member in lab, nurse is still not proficient in UPT, Hemoglobin, Glucose, finger sticks, and venipunctures after a year.

No other staff member was trained to read wet mounts and report out no growth GC plates. *Goal not met*

Nurse Family Partnership

Staff will attain and maintain a caseload of 25 clients. *Goal not met with the exception of one nurse.*

One nurse is at caseload, one at 21, one at 19 and the 2 new nurses are building their case load and are not expected to have 25.

Increase pregnancy retention rate from 72.7% to 90%. *Goal TBD*

Cannot update this statistic at this time due to problems with the data at the national level.

Maintain our infancy retention rate above 80%. *Goal TBD*

Cannot update this statistic at this time due to problems with the data at the national level.

Increase our toddler retention rate from 80.5% to 90%. *Goal not met*

Our Toddler Retention rate has improved to 82.9%

Maintain our premature birth rate below 11.4%. *Goal met*

Our premature birth rate for this year is 0%.

Decrease low birth weight rate from 8.3% to 7.8%. *Goal met*

Low birth weight is 6.9%

Clinical Services

Continue to improve and enhance clinical services. Explore ways to increase access to Long-Acting Reversible Contraception (LARC) for all appropriate patients. *Goal not met. Goal modified.*

With no trained provider for LARC we were unable to utilize the available funding to purchase the LARC devices. New OB contracted physician will implement LARC when here for clinic.

Obtain Meaningful Use with Avatar. *Goal modified due to the approval of a different system.*

About 10% complete. New EHR vendor CureMD was approved after an extended contract process. The time it took to get the legal teams (on both sides) to approve the contract hindered full implementation this year. Current status – Attestation for Meaningful Use is in process. Awaiting payment of invoice for 25% of the system so that we can move forward. Full implementation will include policy overhaul of HIPAA and Medical Records policies; staff training and setting a “go-live” date and then going live. Time frame is hard to predict and dependent on Cure MD schedule, local IT and staff education.

Develop Nurse Competency policy, process, and tools for clinical nursing staff for each Public Health Nursing position. *Goal on-going.*

50% complete – The policy has been developed but has not been taken to the BOH for approval. It has not been shared with staff nor implemented at this time.

Supervisor is developing competency tools. New training orientation and competency tools for FP and title X have been sent out by WHB for October 1 implementation. These need to be added to the FP policy.

Begin pre-work for completion of the Practice Management Consultative support. *Goal not met. No longer needed.*

Many health departments have ceased to request Practice Management Consultative support. This is no longer a goal for us.

Bioterrorism

Improve the Preparedness of the Health Department and County. Complete Home Health tabletop exercise. *Goal not met*

Home Health staff decided to wait to do this until further information on the new requirements are pushed down.

Conduct Respiratory Fit Testing for LE and EMS. *Goal met with the exception of EMS*

EMS has not moved forward with wanting testing.

Conduct PPE training on Ebola PPE. *Goal met*

PPE training on Ebola PPE completed April 2016.

Update Isolation and Quarantine Plans to be compliant with Ebola AA. *Goal met*

Write an Ebola Virus Disease Response Plan to be compliant with Ebola AA. *Goal on-going due to date change*

Agreement Addenda changed completion date to May 2017.

Begin process of developing a special needs registry for at risk populations for the health department and county by meeting with Ronnie Storey and Chuck Joyner. *Goal met*

Meeting was held July 21st.

Attend monthly drill task force meetings. *Goal met*

WIC

Increase WIC caseload by Outreach. Increase WIC Caseload by Outreach to Healthcare Providers and Public Assistant Offices. *Goal met*

Outreach posters were placed in private provider offices in Northampton and Halifax counties.

Outreach material was placed in county stores. Brochure holders and materials were placed in private provider offices in both Halifax and Northampton Counties. A check to replenish brochures is scheduled quarterly.

Administrative

Improve and enhance the Administrative services of the Health Department. Train Administrative Assistant on State funding. *Goal on-going due to staff change.*

The Administrative Assistant was being trained on the State Budget. We had discussed Agreement Addenda and had begun to learn the expenditure report that is necessary to claim State funding in the WIRM. The AA took another position on September 12, 2016. Her replacement was hired on October 24, 2016. Once her initial orientation is complete, we will begin the process. We have already discussed what the Agreement Addenda is and when they are received from the State.