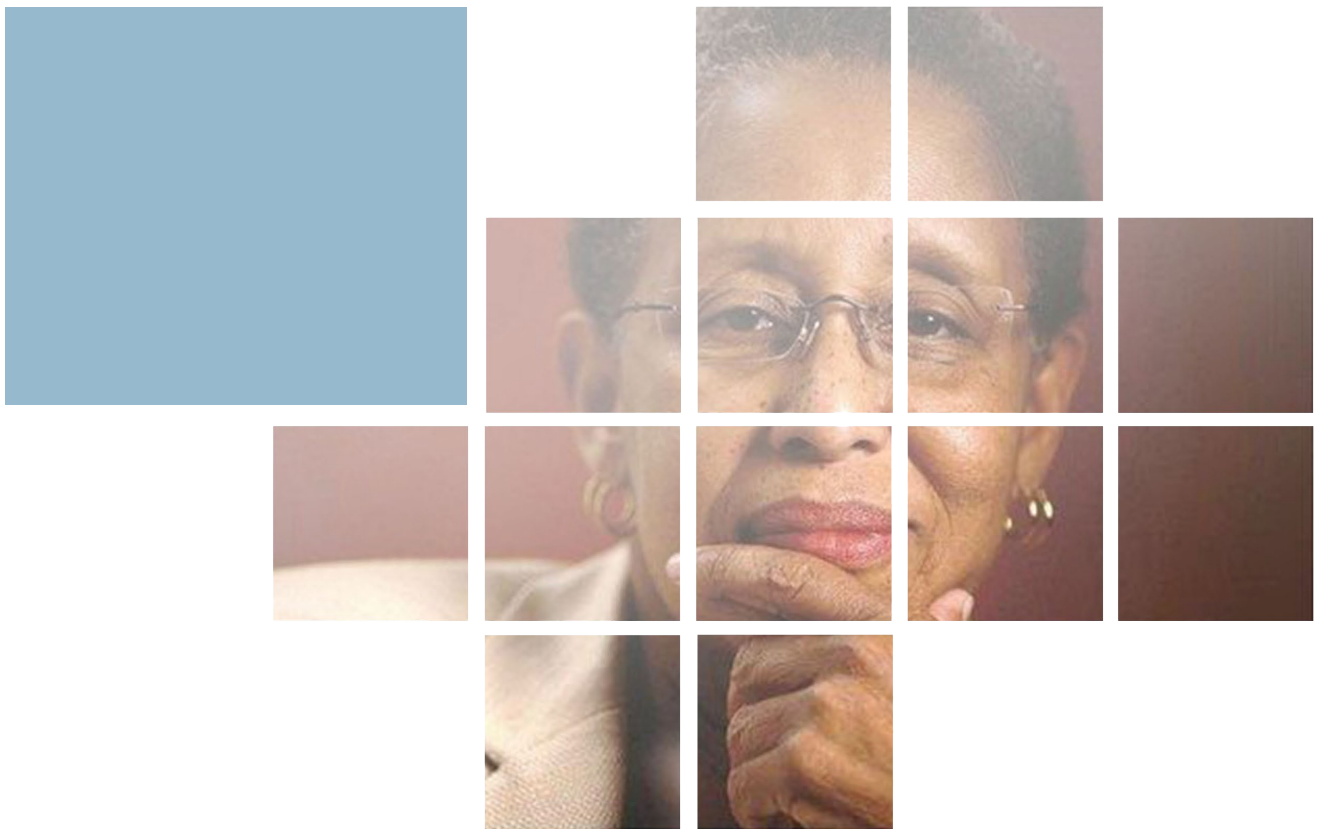

Andrea Harris Social, Economic, Environmental, and Health Equity Task Force

December 2021 Biannual Report





Roy Cooper
Governor

Pamela B. Cashwell
Secretary

Dear Governor Cooper,

I am energized and excited about the work done in the year since the Andrea Harris Social, Economic, Environmental, and Health Equity Task Force (Task Force) submitted its twenty-one recommendations a year ago. Task Force members have continued to meet at least monthly to put these recommendations into action, and thanks to the hard work of the Task Force members and staff, we are close to meeting our goals.

The Task Force was established by Executive Order 143 to address the social, environmental, economic, educational, and health disparities in communities of color disproportionately impacted by COVID-19. Thanks to your leadership, along with Secretary Dr. Mandy Cohen, North Carolina has become a national model for prioritizing equity in our response to the pandemic. However, we know more work is needed to address the systemic disparities in North Carolina. This report highlights the progress made by the Task Force and cabinet agencies in implementing policy recommendations along with details about critical new programs with funding allocated by the Fiscal Year (FY) 2021-2023 budget relevant to the Task Force's recommendations.

I look forward to working with my colleagues in other cabinet agencies as we all move the recommendations into sustainable actions.

Sincerely,

A handwritten signature in black ink that reads "Pamela B. Cashwell". The signature is written in a cursive, flowing style.

Pamela B. Cashwell
Secretary

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December 2021 Biannual Report Executive Summary

The Task Force was established June 4, 2020, to create economic stability, eliminate health disparities, and achieve environmental justice in North Carolina by convening testimony, identifying best practices, and reporting findings to the Office of the Governor. The December 2020 Biannual Report was submitted to the Office of the Governor with 21 proposed policy recommendations. The June 2021 report provided updates on the implementation of the policy recommendations. As required by Executive Order 143, this biannual report provides updates on the status of the Task Force and its recommendations.

In the year since the Task Force gave its recommendations, the administration has been working to implement them with advice and guidance from the Task Force subcommittees. To date, progress toward implementing all 21 recommendations has begun, and seven recommendations are fully implemented. In addition, recommendations that required funding were in the Governor’s budget proposal, and American Rescue Plan use proposal. Many priorities made it into the final [Fiscal Year \(FY\) 2021-2023 budget](#), including:

- Over \$1 billion for broadband infrastructure, which includes funding devoted to digital literacy.
- \$150 million to remediate lead pipes and asbestos in public schools and childcare centers.
- \$94 million appropriated from American Rescue Plan dollars for funding equity and prioritizing populations disproportionately affected by COVID-19.
- \$36 million to local health departments to expand communicable disease surveillance and control to address COVID-19.
- \$3 million to establish Historically Underutilized Business (HUB) Academies.
- \$3.5 million to establish a new apprenticeship grant program through the Community College system.
- \$10 million to American Indian Tribes to mitigate and respond to the impact of the pandemic.
- \$73,578 to fund a new position within the Commission of Indian Affairs dedicated to research the impact of the pandemic on NC tribes.

The Task Force's most significant recommendation is full Medicaid expansion, which was not included in the final budget. However, the Governor remains committed to expanding Medicaid, and the Task Force will continue to support those efforts fully.

For this December 2021 report, Task Force members and staff identified implementation progress through programmatic changes, initiatives, and new funding that align directly with the mission and recommendations of the Task Force. This report is organized by implementation progress from "completed," "in progress and awaiting external action," "in progress," and "not started." Within each progress section, the recommendations are organized by subcommittee. This report provides updates on the efforts of state agencies and subcommittees or other stakeholders to accomplish each recommendation.

Andrea Harris Task Force Members

Chair: Pamela B. Cashwell, Secretary, NC Department of Administration

Access to Healthcare Subcommittee

Secretary Dr. Mandy Cohen
Victor Armstrong
Dr. Giselle Corbie, MD, MSc
Dr. Catherine Harvey Sevier
Andres Henao
Rep. Donny Lambeth
Dr. Viviana Martinez-Bianchi,
Dr. Carlos Rish
Dr. Christy Clayton

Enhanced Patient Engagement Subcommittee

Cornell Wright
Eugene Woods
Fernando Little
Yazmin Garcia Rico
Juvencio Rocha Peralta
Dr. Rhett Brown
Dr. Cedric Bright
Dr. Charlene Green
Dr. John Lumpkin

Business Engagement Group

Justin Truesdale

Economic Opportunities & Business Development Subcommittee

Rep. Yvonne Holley
Stephanie McGarrah
C.C. Lamberth, Jr.
Dale Jenkins
Trey Rabon
Kevin J. Price
Adriana Chavela
Walter Baucom
Lynn Bottone

Educational Opportunity Subcommittee

Pat Martinez
Dr. Lenora Campbell
Dr. Sonyia Richardson
Margaret Weller-Stargell
Quinny Sanchez Lopez
Annette Taylor

Environmental Justice and Inclusion Subcommittee

Secretary Elizabeth Biser
Greg Richardson
Dr. James H. Johnson Jr.
Reverend Dr. Jonathan Augustine
Reverend Dr. T. Anthony Spearman

The following members are no longer on the Task Force.

- *Secretary Machel Sanders (Former Chair)
- *Benjamin Money
- *Secretary Michael Regan
- *Secretary Dionne Delli-Gatti

Liaisons and Agency Staff Support List

The following staff members from state agencies support the Task Force subcommittees in their work.

Name	Agency	Subcommittee
Michael Leach*	DHHS	Access to Healthcare
Nick J. Galvez	DHHS	Access to Healthcare
Emma Sandoe	DHHS	Access to Healthcare
Tammie Hall*	DOA	Economic Opportunity and Business Development
Alicia Lyon	DOA	Economic Opportunity and Business Development
Betty Marrow-Taylor	Commerce	Economic Opportunity and Business Development
Jenni Harris	Commerce	Economic Opportunity and Business Development
Tunya Smith	DOT	Economic Opportunity and Business Development
Regina Streaty	OSHR	Economic Opportunity and Business Development
Dr. Charrise Hollingsworth*	Governor's Office	Educational Opportunity
Judykay Jefferson	Community College System	Educational Opportunity
Jeff Sural	DIT	Educational Opportunity
Abigail Waldrupe	DNCR	Educational Opportunity
Tracey Burns	DNCR	Educational Opportunity
Carolina Fonseca Jimenez*	DEQ	Environmental Justice and Inclusion
Brian Strong	DNCR	Environmental Justice and Inclusion
Brittany Morra	DOA	Environmental Justice and Inclusion
Yasmine Shepard*	DHHS	Patient Engagement
Michael J. Arnold	OSBM	Patient Engagement

*Primary staff liaison member for subcommittee

Implementation Process Overview

RTI International (RTI), an independent nonprofit research organization that uses scientific rigor and technical proficiency to help solve critical problems, continued to support the Andrea Harris Task Force through August 2021, the remaining term of their contract.

RTI developed a policy implementation matrix based on the initial recommendations to guide the implementation process. The North Carolina Department of Administration (DOA) developed a live implementation tracker based on the initial matrix, which is updated regularly by staff liaisons and DOA staff. Thanks to Policy Development Analyst Bailey Recktenwald for leading that work. The tracker includes the following fields for each recommendation:

- Subcommittee responsible
- Progress category (not started; in progress; in progress, awaiting external action; or completed)
- Implementation lever (state law, executive order, programmatic or procedural change)
- Associated cabinet agency for each recommendation
- Up-to-date description of progress
- Next steps
- Outstanding questions

The implementation tracker helps members and agency staff measure progress and outcomes based on the 2020 recommendations submitted by the Task Force and guides content for the biannual reports.

This December 2021 report groups all recommendations by progress rather than by subcommittee and visually illustrates the progress made during the past year. Task Force staff determine the progress category a recommendation falls under using the following definitions:

Completed - The Task Force took all available actions to implement the recommendation. Recommendations with this status are in the ownership of

the appropriate state agency or other entity for long term implementation and sustainability.

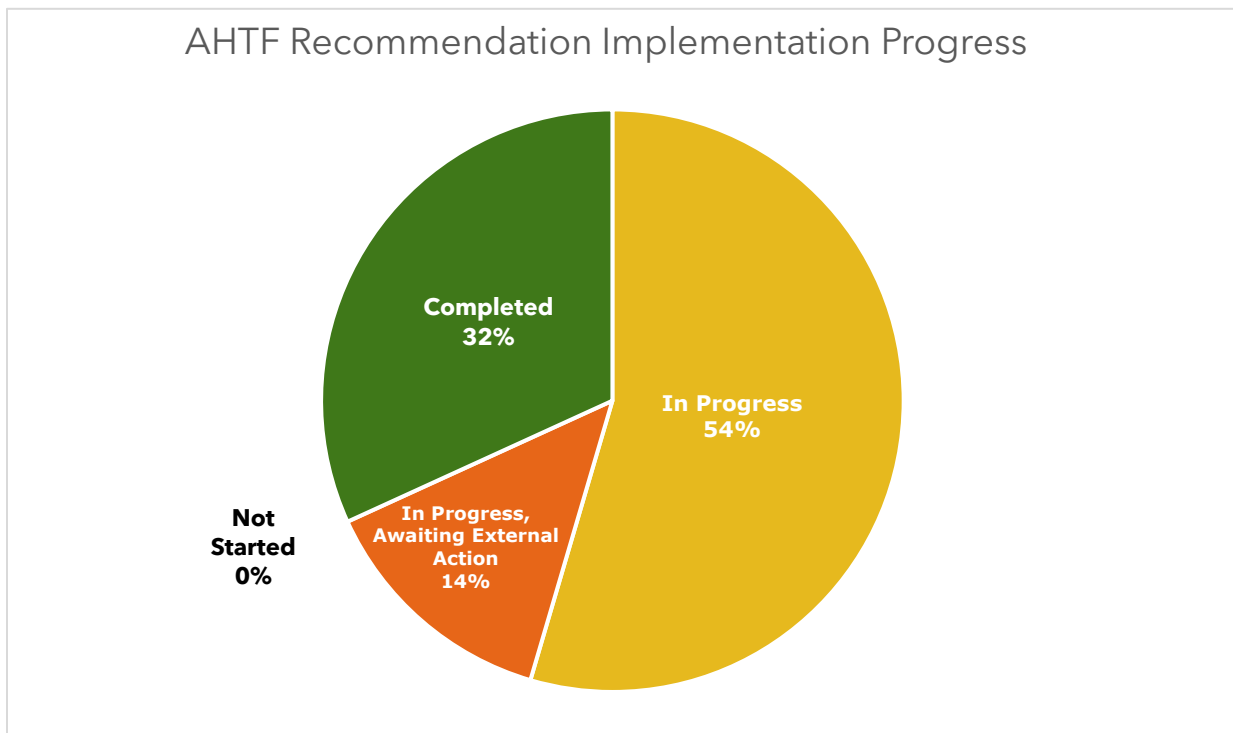
In progress, awaiting external action - The implementation steps needed on recommendations with this status are beyond the purview of the Task Force or DOA. Additional steps to transition these recommendations to “Completed” status require actions by another agency or an external body, i.e., the General Assembly.

In progress - The Task Force continues to their work to transition these recommendations to “Completed” status.

Not started - These recommendations do not have identifiable actions associated with their implementation. Although an external entity may be working in this area, the Task Force has not started the implementation process.

At the publishing of this report, the implementation process has started for each recommendation, with one-third of all recommendations completed.

Figure 1. Status of recommendations as of December 1, 2021



Implementation Progress

The remainder of this report details the status of each recommendation within each progress category.



Completed

Access to Healthcare for Underserved Communities

Recommendation: *Appropriate \$1,257,642 in state funds for the Office of Rural Health’s Health Information Technology Assistance Program.*

Status: The program was awarded a 2-year Center for Disease Control (CDC) grant to assist providers with NCCARE360 implementation and electronic medical record integration. The integration will help providers adopt the new technology into their existing electronic medical record workflows.

Recommendation: *Increase investments in rural hospitals, community health centers, and federally qualified health care centers (FQHCs) to provide quality health care, digital literacy training, vaccinations, and vaccination awareness campaigns to increase the number of undocumented, low-income, and other vulnerable patients served and vaccinated.*

Status: Rural health centers and FQHCs have received substantial funding from federal COVID-19 packages. In addition to existing federal funding, the FY 2021-2023 budget will allocate an additional \$36 million to local health departments to expand COVID-19 mitigation efforts.

FQHCs specifically have funding to support care for undocumented, low-income, and other vulnerable patients. The North Carolina Department of Health and Human Services (DHHS) has also been in regular communication with migrant farmworker advocacy groups to provide support for vulnerable frontline farmworkers and promote vaccinations in farmworker communities. In addition, the DHHS Office of Rural Health offers health equity training to hospitals and will share lessons learned

with twenty Critical Access hospitals and determine measurable outcomes for the communities.

The Office of Rural Health (ORH) has been instrumental in increasing access to healthcare in rural areas. ORH granted \$4.9 million to 19 hospitals for COVID testing and mitigation through the Small Rural Hospital Program. The Office of Rural Health Information Technology Program also partnered with the Department of Information Technology (DIT) to create and pilot a digital and health literacy curriculum with three pilot healthcare entities through a two-year Appalachian Regional Commission grant. The Office of Rural Health also administers the Community Health Worker Program, connecting North Carolinians to wraparound services for those impacted by COVID-19. Community health workers educate and assist within their local community. As of December 2021, there are 480 community health workers with plans to hire more. Women comprise 82% of the community health workers, and 90% of community health workers identify as African American and/or Hispanic/Latinx. Community health workers have served over one million individuals to date.

DHHS also launched Healthier Together, a public private partnership to increase COVID-19 vaccinations among minority populations. \$1.5 million in grants have been awarded to community-based organizations that support equitable access to COVID-19 vaccines. From June 2021 to November 2021, Healthier Together community-based organizations contacted over half a million people to encourage vaccination in minority and low-income communities.

The FY 2021-2023 budget funds several initiatives to improve access to healthcare for underserved communities. Namely, the budget allocates \$94 million in American Rescue Plan dollars for funding equity and prioritizing populations disproportionately affected by COVID-19. Of those funds, \$500,000 will be allocated to the University of North Carolina at Pembroke to operate mobile medical units in at-risk communities to respond to the pandemic; \$10 million will be allocated to American Indian tribes in NC to mitigate and respond to the impact of the pandemic, and a new position is funded within the Commission of Indian Affairs dedicated to research the impact of the pandemic on NC tribes. Over \$3.5 million will be used for nutrition services for older adults in response to the pandemic. And \$3 million will be allocated over two years to support the detection and mitigation of COVID-19 within homeless populations.

Economic Opportunities and Business Development

Recommendation: *Implement a Tier 1 and Tier 2 Subcontracting Plan: The Economic Opportunity and Business Development subcommittee recommends requiring corporations who do business with the state to commit to supporting the HUB program and its goals, including by subcontracting business to minority-owned businesses.*

Status: The DOA has created standardized inclusion language for solicitations to include in the required documents for contractors to review. If signed by a contractor, the voluntary memorandum of understanding commits the company to a spending goal of 8% of their total procurement spend in North Carolina being dedicated to historically underutilized businesses. Participating corporations will report their program activities annually to the Office of Historically Underutilized Businesses (HUB Office).

Educational Opportunity

Recommendation: *Assist, advocate for, and encourage the North Carolina Department of Public Instruction, and other required administrative or academic bodies, to adopt a digital literacy curriculum and toolkit that is accessible to all students and parents in their native language.*

Status: The Subcommittee secured \$650,000 in funds from the Governor's Emergency Education Relief fund to expand the State Library's (within the Department of Natural and Cultural Resources) existing digital literacy toolkit and create a new digital literacy program. Subcommittee members reviewed the curriculum material for cultural inclusivity, cultural competency, and accessibility and then presented opportunities for improvement and program evaluation. Utilizing digital navigators, the State Library is launching a pilot program to implement the digital literacy toolkit in three county libraries (Hoke, Iredell, Duplin) and is moving forward with the first pilot to start in January 2022. By 2023 up to seven additional libraries will be added to the program. The subcommittee also provided recommendations to the State Library for recruiting bilingual digital navigators, considering outreach to community colleges with library science programs to identify digital navigators, and crafting digital navigator job descriptions that would attract diverse candidates.

In addition, the FY 2021-2023 budget appropriates \$25 million over two years to improve awareness and training aimed at enabling North Carolinians to realize the benefits of high-speed internet through digital literacy and to develop new skills in accessing the digital economy. On July 1, 2021, Governor Cooper created the Office of Digital Equity and Literacy within the Department of Information Technology. The subcommittee looks forward to continued collaboration with the office to further increase digital literacy skills across the state.

Environmental Justice and Inclusion

Recommendation: *Support the creation of environmental justice, equity, and inclusion positions at the Departments of Commerce, Transportation, Natural and Cultural Resources, and the Division of Emergency Management and consider other agencies where such positions might benefit community access to state decision-making.*

Status: All identified agencies have created or expanded environmental justice and inclusion positions. Additional information about these positions can be found in the June 2021 Task Force Report.

Recommendation: *Support funding the efforts to remediate the environmental issues in public schools.*

Status: The FY 2021-2023 budget allocates \$150 million to DHHS to fund new programs that will remediate lead and asbestos in public schools and child care centers. Over \$30 million will be used to test drinking water and replace pipes in public schools and childcare facilities where necessary. In addition, \$109 million in nonrecurring funds will go towards lead paint and asbestos abatement for public schools and childcare facilities. Part of the funding will also be used to develop statewide databases containing the results of lead testing, asbestos, and lead paint removal in schools.

Patient Engagement

Recommendation: *Increase funding to strengthen the capacity of federally qualified health care centers (FQHCs) to increase number of undocumented, low-income, and other vulnerable patients served.*

Status: Rural health centers and FQHCs have received substantial funding from federal COVID-19 packages, and DHHS has made Medicaid specific payment modifications for FQHCs. FQHCs specifically have funding to support care for undocumented, low-income, and other vulnerable patients. FQHCs must represent the communities served and have a deliberate and strong focus on testing and vaccination administration equity. In addition to the existing federal funds, the FY 2021-2023 budget allocates \$94 million in American Rescue Plan dollars for funding equity and prioritizing populations disproportionately affected by COVID-19.



In Progress, Awaiting External Action

Access to Healthcare for Underserved Communities

Recommendation: *Increase opportunities for patients to utilize telehealth services.*

Status: Governor Cooper signed SB 146 on July 23, 2021, expanding telehealth for dental services. Additionally, HB 149, "Improving Access to Care Through Telehealth," would require health insurance plans to provide coverage for telehealth services. HB 149 passed the House and passed its first reading in the Senate. At the publishing of this report, the bill remains in the Senate Rules and Operations Committee.

The FY 2021-2023 budget provides over \$1 billion in broadband investment which is critical to access telehealth options. Specifically, \$90 million in targeted grants will be used to address local infrastructure needs to connect unserved and underserved households.

Access to Healthcare for Underserved Communities and Patient Engagement

Recommendation: *Expand Medicaid.*

Status: The North Carolina General Assembly failed to fully expand Medicaid in the FY 2021-2023 state budget. The budget does expand Medicaid coverage for pregnant people with incomes equal to or less than 196% of the poverty line for twelve months postpartum. Medicaid coverage for pregnant people previously ended after just 60 days postpartum. The state budget also creates an 18-member joint legislative committee to study health care access and Medicaid expansion. Governor Cooper remains committed to full Medicaid expansion in North Carolina.

Educational Opportunity

Recommendation: *Advocate for the North Carolina General Assembly to pass a comprehensive budget that includes funding for HB 924, which provides for personal financial literacy for high school students, as well as a similar mandatory requirement for post-secondary institutions.*

Status: The State Board of Education adopted updated K-12 social studies standards on February 4, 2021, including the personal financial literacy course required in HB 924. The law remains unfunded by the General Assembly. The subcommittee is reviewing the legislation and proposed curriculum to determine the extent the financial literacy lessons include language on equity and economic mobility, and financial empowerment, instead of solely focusing on budget management and debt reduction. The subcommittee is also interested in identifying additional actions to support advancing this recommendation in marginalized communities, including opportunities to expand partnerships with community libraries and other youth-centered settings.



In Progress

Access to Healthcare for Underserved Communities

Recommendation: *Expand opportunities for people of color and historically marginalized populations to participate in state government affairs by actively seeking input from individuals with shared experiences, community leaders, advocacy groups and interested parties in public policy decisions including, but not limited to, state plans, waivers, and policy mandates to reflect government values that support diversity of opinions, inclusive decision making, equal language access, equitable participation, transparency and trustworthiness.*

Status: The Governor's Boards and Commissions Office reported to the subcommittee on the current demographic makeup of Governor appointed positions and efforts the Office has taken to ensure boards and commissions reflect the people of the state. Upon further discussion, the subcommittee expressed the desire to focus on overall increased opportunities for the public to participate in state government. The subcommittee adopted a revised recommendation to better reflect the intent of the subcommittee's goal for increased public participation in state government. The original recommendation read as follows:

Increase opportunities for historically marginalized populations to participate in state government affairs to ensure community input in policies to demonstrate transparency and trustworthiness. The composition of state advisory boards should represent 60% of persons with lived experience.

With the original language revised, the subcommittee will work on strategies to improve public participation in state government activities. The subcommittee is reviewing the Department of Environmental Quality's Public Participation Plan as a potential model for increasing community access in state government affairs.

Economic Opportunities and Business Development

Recommendation: *Create economic incentives to encourage participation with Historically Underutilized Businesses (HUB).*

Status: The Subcommittee has met with and garnered support from the Department of Commerce and the Economic Development Partnership of North Carolina to broaden incentives offered to businesses to align with the state’s diversity and inclusion initiatives. Commerce has also developed the [First In Talent Economic Development Strategic Plan](#), which includes designation of responsibility within Commerce to help coordinate and implement policies and strategies that encourage women and minority entrepreneurship.

Recommendation: *Offer educational support and mentorship to diverse businesses, leverage partnerships with NC Historically Black Colleges and Universities (HBCUs) to develop executive education programs available to minority-owned businesses doing business in the state.*

Status: The FY 2021-2023 state budget allocates \$3 million in nonrecurring funds for the creation of HUB Academies. The HUB Academies will teach small subcontractors and specialty contractors the basics of operating a successful construction company that can compete for state-funded projects and will be held at least three HBCUs or community colleges around the state.

The subcommittee has drafted a memorandum of understanding to develop a corporation and HUB businesses mentor-protégé program. The program is designed to help emerging HUB businesses learn best practices from established corporations in North Carolina. Several states have similar programs. The subcommittee has presented the program idea to executive leadership in Commerce and is waiting to determine the next steps and feasibility.

Recommendation: *Support apprenticeships and workforce pipelines that create job growth.*

Status: The FY 2021-2023 state budget funds a new apprenticeship grant program to be run through the North Carolina Community College System. The program will expand apprenticeship opportunities for high school apprentices and non-high school apprentices between ages 16 and 25 by providing grants to small businesses in high-demand fields. The small business will be reimbursed up to \$2,000 for fees associated with the apprenticeship and receive a 1 to 1 match to pay for salary.

Caroline Sullivan from the NC Business Committee for Education (NCBCE) presented to the subcommittee about the exciting apprenticeship and work-based learning

opportunities that NCBCE is leading. Subcommittee members advised on potential avenues to make the programs even more inclusive and continue looking for ways to partner with NCBCE.

Educational Opportunity

Recommendation: *Support community health centers by implementing telehealth and telemedicine initiatives, including, but not limited to, ensuring adequate funding for health education, and partnering with state agencies and other groups that share similar goals of increasing broadband access and addressing health literacy.*

Status: The subcommittee is reaching out to DHHS and other agency partners to learn more about ongoing health literacy initiatives across the state. DHHS's Office of Rural Health presented to the Task Force at the December 2021 meeting about the identified need for health literacy in marginalized communities.

Additionally, the group is researching opportunities for collaboration between community health centers located in the same communities as the digital literacy program related to another recommendation from the subcommittee. Partners at the Department of Natural and Cultural Resources and the State Library have recently expressed interest in incorporating health literacy aspects into the implementation and evaluation of the digital literacy project.

To guide its work as a subcommittee, the group adopted a revised definition for health literacy previously presented by the North Carolina Institute of Medicine: "health literacy is the degree to which diverse individuals and communities have the capacity to obtain and understand the basic health information and services needed to make appropriate health decisions."

The FY 2021-2023 state budget invests an unprecedented \$1 billion in broadband expansion. The budget allocates some of that money for specific initiatives that will improve education for underserved populations. For example, the budget provides \$4.6 million in recurring funds for the School Connectivity Initiative, bringing connectivity to all K-12 public schools in North Carolina. Another \$15 million in nonrecurring funds will go toward improving broadband for 25 rural community colleges. Moreover, an additional \$90 million in targeted grants will be used to address local infrastructure needs to connect unserved and underserved households.

Recommendation: *Establish a statewide health literacy coordinating council and corresponding regional health literacy councils as consistent with the Area Health Education model.*

Status: The subcommittee is researching previous attempts to establish health literacy coordinating councils in the state of North Carolina. This research will help uncover challenges that must be addressed to successfully implement this recommendation and identify the appropriate implementation levers.

Environmental Justice and Inclusion

Recommendation: *Utilize existing training and incentive programs to create jobs initiatives in disadvantaged communities geared toward remediation and resiliency work on public and low-income buildings in those communities, with a specific focus on public schools within the demonstration sites of Robeson and Edgecombe Counties.*

Status: One subcommittee member is in conversations with the Robeson County and Edgecombe County superintendents and evaluating various programs at community colleges that may contribute to job creation in remediation and resiliency in disadvantaged communities. The subcommittee member has also submitted a grant proposal that may assist in furthering this work.

Recommendation: *Support a legislative strategy to look at additions and changes to statutes and rules to incorporate environmental Justice criteria into regulatory actions.*

Status: The subcommittee is partnering with the Governor's Office of Public Engagement and Inclusion (OPEI) to host a Listening Session. The Listening Session will allow for input from community members on a legislative strategy for additions and changes to statutes and rules to incorporate environmental justice criteria into regulatory actions. The subcommittee has defined the scope for the listening session and approved a draft agenda. Agency staff are now working to schedule the listening session.

Patient Engagement

Recommendation: *Establish mandatory, uniform cultural methods of collecting demographic patient information, including race, ethnicity, gender identity, sexual orientation, etc., across all health care systems.*

Status: DHHS's testing and vaccination administration programs have a strong focus on equity, and contracts for programs have specific clinical, administrative, and data reporting requirements which include collecting demographic information. DHHS does not currently require the collection of sexual orientation. The subcommittee heard a presentation from Dr. Rhett Brown, a Family Medicine Specialist at Novant Health and a member of this subcommittee, about the challenges LGBTQ+ patients encounter in healthcare and the best practices to better serve this community.

Recommendation: *Ensure and strengthen medical sick leave policies for essential workers, particularly that of historically marginalized backgrounds.*

Status: The subcommittee has expressed interest in recommending the expansion of paid parental leave for state employees. Under current policy, eight weeks of paid parental leave are currently available for birthing parents and four weeks for non-birthing parents. The subcommittee is exploring similar initiatives in other states to define further specific recommendations. The Office of State Human Resources (OSHR) presented to the subcommittee on the current status of the paid parental leave program. According to OSHR, in Fiscal Year 2020-2021, 1,145 state employees utilized paid parental leave. 56% of employees that used paid parental leave were men. OSHR has not received anecdotal complaints from agencies about the leave policy and views it as a useful tool to recruit and retain younger adults for state government jobs. The subcommittee is exploring the appropriate next steps for an expansion that would not strain employers. The subcommittee has also heard presentations on the potential for paid parental leave to be implemented by the federal government and is monitoring the status of that initiative.

Recommendation: *Strengthen medical school admission pipeline programs for students of color.*

Status: The subcommittee has met with multiple groups to learn more about existing healthcare workforce and education pipelines and ideas on the best way to achieve this recommendation. They are focused on learning more about existing pipelines across hospital systems to potentially act as a convener so hospital systems can exchange best practices for establishing and maintaining successful workforce pipelines from high-school onward.

The subcommittee has also concluded that strengthening pipelines in healthcare for communities of color extends beyond medical school. The Office of Rural Health has

established a comprehensive pipeline to recruit and train community health workers. The Office of Rural Health is partnering with NC HBCUs, UNC Pembroke, and community colleges in developing and hosting community health worker training opportunities. Several private and public partners have established a sustainable pipeline for recruitment and retention of community health workers who can support individuals through the pandemic and beyond. The pipeline process includes assessment, certification, mentorship, networking, coordination, advocacy, training, professional development, and continuing education.



Not Started

The implementation process has begun for all 21 of the Task Force's Recommendations.

About Andrea Harris

“We need to make sure we always have people at the table who are most affected.”

–Andrea Harris (2019)



The Andrea Harris Social, Economic, Environmental, and Health Equity Task Force is named in honor of the late Andrea Harris. A native North Carolinian, Andrea Harris was a trailblazer for minority businesses and communities. Harris graduated from Bennett College and became one of the youngest community agency directors in the nation, helping fight poverty across three rural North Carolina communities. With an unwavering passion for helping others in need, she co-founded the NC

Institute of Minority Economic Development in 1986, where she served as president in 1990. Located in the heart of Durham, the Institute supports minority and women-owned businesses. Harris was named the Lifetime Achievement Winner in Triangle Business Journal’s Leaders in Diversity Awards in 2014 and retired from the Institute that same year. After retiring from the Institute, Harris continued to serve on several boards, including the State’s Advisory Council for Historically Underutilized Businesses, where she was appointed in 2017. She is a recipient of numerous awards and honors, including the Order of the Long Leaf Pine, the highest award for state service granted by the Office of the Governor, as well as an honorary doctorate from her alma mater, Bennett College.

END OF REPORT