

NORTHERN NEVADA

Public Health+

Serving Reno, Sparks & Washoe County

FY24 Health Equity Plan Annual Report

August 2024

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Public Health+

Serving Reno, Sparks & Washoe County

MISSION

To improve and protect our community's quality of life and increase equitable opportunities for better health.

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INTRODUCTION

This annual report is a progress review of the results from Northern Nevada Public Health's (NNPH) Health Equity Plan (HEP) with a focus on FY24 initiatives. The organization's HEP is an internal three-year plan to build NNPH's capacity to increase health equity efforts and address health disparities. The first year of the plan was completed in FY23 with 92% of initiatives either fully or partially achieved. Although a high percentage of initiatives were accomplished in the first year many initiatives continued into the second year of the plan to continue to progress with equity work. NNPH is excited to share an update on the second-year initiatives that were accomplished across the organization as various programs and divisions worked collaboratively to increase and enhance the organization's capacity and commitment to health equity.

The initial health equity organizational capacity assessment process that was completed in October 2022 served as a baseline measure of capacity, skills, and areas for improvement to support NNPH's health-equity focused activities. The assessment process also served as an inventory of organizational and individual traits that support the ability to perform effective health-equity-focused work, gather information to guide strategic planning processes and develop strategies that improve capacity, as well as serve as an ongoing tool to assess progress towards identified goals developed through the assessment process. The HEP provides guidance to the organization as to which areas to focus on within health equity in a given year. Part of the ongoing process of organizational-wide health equity work is to annually evaluate the HEP to measure progress towards the identified goals.

HOW TO READ THIS REPORT

The HEP initiatives are presented in the following tables, including activities performed and progress made. The information included is for the fiscal year 2024.

A color-coding system is included to indicate the completion status of each initiative for the second year of the HEP. If an initiative was fully achieved in FY24 it was given a green indicator. If an initiative is in progress and was partially achieved, it was given a yellow indicator. If an initiative was not achieved it was given a red indicator, and if an initiative had not yet started it was given a blue indicator.

	On Target – if the initiative was fully achieved in FY24.
	In Progress – if the initiative was partially achieved in FY24.
	Off Target – if the initiative was not achieved in FY24.
	Not Started – if the initiative did not start in FY24.

GOAL ONE: BUILD HEALTH-EQUITY RELATED COMPETENCY AMONG NNPH STAFF THROUGH FORMAL TRAINING OPPORTUNITIES ALONGSIDE INFORMAL OPPORTUNITIES FOR DIALOGUE AND PRACTICAL APPLICATION.

Initiative: Provide all NNPH staff the opportunity to participate in synchronous, interactive training on topics including diversity, equity, and inclusion; social, environmental, and structural determinants of health; community organizing and Foundational Public Health Services.

Progress: NNPH offered a voluntary DEI and health equity training series that was led by an external consultant. The training series consisted of six trainings that focused on unconscious bias, workplace microaggressions, and diversity vs. inclusion. A total of 132 staff attended the trainings. Additionally, two foundational cultural competency sessions were held for supervisors and division directors. This training was required for NNPH leadership to help gain the knowledge and skills needed to better support their programs and staff. Additional trainings that specific programs/divisions attended included Bridges out of Poverty training and LGBTQIA+ training with Equality California.

Initiative: In partnership with the Larson Institute build asynchronous, online training designed specifically to build health equity competencies from the Council on Linkages and Public Health Practices. Require all new staff to complete within the first 180 days and offer to all existing staff regularly.

Progress: An asynchronous cultural competency in public health course was developed in collaboration with the Larson Institute and published in FY24. The training is a six-module course that covers an introduction to cultural competency (CC) and social determinants of health, individual alignment with principles of CC, the case for CC, strengthening the public health workforce, building culturally competent relationships, and sustaining a culturally competent workforce. The foundation of the training was built upon the Public Health Accreditation Board health equity competencies and also includes short vignettes from statewide equity partners. NNPH incorporated this training into their workforce development efforts by having new staff complete this training as part of their onboarding program. This training is also promoted to existing NNPH staff. Although NNPH provided the initial resources to help build the training this course lives on the [Making Health Happen website](#) and is available and free to all.

Initiative: Promote health-equity related trainings offered by partners including the Larson Institute, Washoe County, National Association of County and City Health Officials (NACCHO) and others.

Progress: Through NNPH Buzz – the internal staff newsletter, multiple training opportunities offered by partners were promoted to staff. These trainings included NOMHE's building health equity capacity workshop series, the CA4Health 21-day racial equity and

social justice challenge, and a special webinar on investigating new approaches to racial healing put on by County Health Rankings & Roadmaps. Additional trainings that were promoted to specific divisions or the Health Equity Committee included building an equitable workplace at local health departments and climate change and health equity, strategies for resilience and environmental justice.

GOAL TWO: GROW CAPABILITY AND BUILD CAPACITY TO INTEGRATE HEALTH EQUITY EFFORTS IN PROGRAMS ACROSS NNPH.

Initiative: Provide training and technical assistance regarding community organizing principles and health equity best practices. Help programs identify how these community organizing, and health equity best practices apply to their program/role.

Progress: Technical assistance regarding community organizing (CO) and health equity best practices was provided in FY24. The Health Equity Team (HET) collaborated with divisions and programs on a number of projects/initiatives to serve as thought partners and provide recommendations on how to apply an equity lens. A few examples include:

- The HET and Communications team collaborated with the Food Safety Program on a health inspection score placarding pilot program. The HET served as advisors to identify the most equitable approach to placards. The goal of the placards was to develop placards to facilitate the public making informed health decisions when dining out. However, reducing barriers for restaurant owners and community members who have limited English proficiency needed to be considered.
- Next, the HET, Communications Team, and the Air Quality Management Division collaborated with the Desert Research Institute on a Heat and Smoke Project. This project focused on recruiting households without air conditioning units to study the health effects of exposure to high heat and wildfire smoke. When creating outreach materials, the Health Equity and Communications team recommended that the project team consider the target audience, literacy level, languages materials would be available in, and images that would appeal to the target audience in high-need zip code areas according to the CHA.

- The HET and Communications team also collaborated with NNPH's WIC team and the Nevada Maternal and Child Health Coalition on a Mamma Care Kits project. This project focused on providing support to underserved mothers through Mama Care kits during their postpartum period. The HET connected the Women, Infants, and Children (WIC) program with non-profit organizations such as Women and Children of the Sierra, Tu Casa Latina, and Our Place to help distribute the Mama Care Kits. The HET also connected them with non-traditional donor partners such as credit unions, hospitals with community give-back programs, and managed care organizations to provide financial support to build more kits.
- Lastly, the HET met with the Washoe County Green Team to discuss strategies to incorporate community feedback into their first ever County Climate Action Plan. The HET connected Washoe County's Green Team to local CBOs and community leaders to discuss the action plan and provide their feedback. So far, the Green Team has met with the Latino Stakeholder Council, the Asian Community Development Council, and the Nevada Office of Minority Health and Equity.

Initiative: Pursue categorical funding opportunities to promote health equity and address health disparities and inequities. Incorporate health equity initiatives in existing categorical funding applications whenever possible.

Progress:

- NNPH received funding from the CDC Public Health Infrastructure (PHI) grant to continue health equity initiatives that started under the CDC Reducing Health Disparities grant. The CDC PHI grant is a five-year grant that aims to strengthen and support public health infrastructure that is critical to ensure every community has the staff, services, and systems needed to promote and protect health. Four members of the health equity team will be moving from the CDC Reducing Health Disparities grant to the PHI grant.
- The CCHS division has a COVID-IZ vaccine grant where 75% of the funding must incorporate health equity.
- NNPH applied for a Robert Wood Johnson Foundation grant focused on addressing childhood obesity and health inequities. NNPH has submitted a concept paper for this grant and is waiting to hear if they will move forward in the process which would include submitting a full proposal.

GOAL THREE: BUILD PARTNERSHIPS WITH DIVERSE COMMUNITIES WITHIN WASHOE COUNTY TO IMPROVE PUBLIC HEALTH.

Initiative: Build partnerships as part of the Community Health Improvement Plan to address health priority focus areas identified in the Community Health Assessment with emphasis on addressing health disparities and health inequities utilizing community organizing principles.

Progress: Various partnerships have been built as part of the Community Health Improvement Plan (CHIP) to address health priority focus areas with an emphasis on addressing health disparities. Below are examples of those partnerships.

- The Aca Entre Nos initiative is led by the Nevada Hispanic Medical Association and is focused on destigmatizing mental health among Spanish speaking families.
- Anything but the Gym is an initiative led by the Black Community Collective with a focus on improving coping skills for stress, anxiety and depression as well as increasing efficacy to engage in physical activity among African American, Black and other minority women.
- The Indigenous Wellness retreats are led by Tribal Minds, Sawabe Muhano Native Wellness Center, Reno Sparks Tribal Health Center, A Life More Sacred, among others. The primary goal is to address the pressing issue of mental health within Washoe County's Native youth community, specifically focusing on reducing the prevalence of suicide ideation and attempts through a range of culturally sensitive mental, physical, emotional, and spiritual workshops.
- The financial literacy initiative is led by Hello Real Estate to increase access and utilization of financial literacy tools among the Spanish-speaking community. The classes are conducted in both English and Spanish with a presenter from the community who can connect with cultural norms while discussing finances.
- Lastly, language accessibility is a focus area of the CHIP and NNPH is currently collaborating with Washoe County on their Language Access Plan for all County departments.

Initiative: Identify and implement opportunities among NNPH programs to build partnerships to address health disparities and health inequities utilizing community organizing principles.

Progress: In FY24 there were multiple opportunities among NNPH programs to build partnerships to address health disparities. A few examples include:

- The HET collaborated with the Food Safety team to translate guidance documents to provide accessible guidance for food establishment operators. A total of 32 documents were translated in Spanish, Chinese, Vietnamese, and Tagalog.
- The HET worked with Washoe County HR and the Food Safety team to pilot Wordly, which is a live AI translation tool. The Food Safety team encounters language and communication barriers in the field when conducting restaurant inspections with restaurant owners who experience limited English proficiency. This tool aims to reduce language barriers to meet community need and create a better experience for both NNPH employees and restaurant owners during inspections.
- To support new and existing restaurant owners and food establishments, the Food Safety Team developed an active managerial control course to provide educational training videos on food safety and food handling procedures. The training videos were created in English and Spanish to increase access to Spanish-speaking communities. The HET and Communications Team helped develop the videos by playing an active role in the bilingual videos.
- Additionally, the Food Safety and Communications team partnered with the City of Reno to host a [Sidewalk Vending Permit Public Forum](#). The event included bilingual presentations about the permitting steps for sidewalk vendors and recent changes to Reno Municipal Code following the passage of Nevada Senate Bill (SB) 92 in 2023. The goal of this forum was to support street food vendors who mostly identify as Hispanic/Latino.
- Lastly, the Food Safety team partnered with a dozen local and state agencies including City of Reno, Sparks, and the Nevada Secretary of State to host a bilingual Food Business Fair designed to help individuals obtain the necessary permits and licenses required to sell food items in Reno, Sparks, and Washoe County. The Health Equity and Communications teams along with IC Media Strategy supported this effort through event promotion, recruitment, outreach, and translations/interpretation services. During the event the HET assisted with bilingual triage to connect attendees to the specific resources and information they need to be successful.

Initiative: Establish participatory leadership opportunities for leaders to influence public health initiatives through advisory boards, committees, and task forces. Start with the CHIP Steering Committee and CHIP Priority Area Committees and add others as needed to support specific programs and initiatives.

Progress: The community organizers met and identified potential partners to be incorporated into year two of the CHIP. Tribal Minds Inc. and Hello Real Estate each began to lead their own CHIP initiatives relating to Indigenous wellness and financial literacy. Additionally, during the HET's involvement in the Family Health Festivals, the Planning Committee grew with the addition of several new members representing Washoe County School District and United Way of Northern Nevada as well as Renown.

Initiative: Encourage NNPH staff to seek out opportunities to learn more about diverse communities within Washoe County.

Progress: The health equity committee received a community presentation from the Silver State Fair Housing Council to learn more about their organization, programs, and services. The committee received various resources on housing rights ranging from criminal background checks, assistance animal guidance, familial status protections, housing for people with disabilities, and housing discrimination. Another community-based presentation from One APIANevada was scheduled but later canceled by the presenter. Additionally, a few meetings did not contain community presentations as the committee needed time to revise the second year of the health equity plan. However, there are still opportunities to encourage staff to learn more about diverse communities within Washoe County.

GOAL FOUR: ENSURE UNDER-SERVED COMMUNITIES HAVE ACCESS TO CULTURALLY AND LINGUISTICALLY APPROPRIATE PUBLIC HEALTH INFORMATION.

Initiative: Maintain and increase Spanish language presence on live media and social media. Add Instagram and Spanish-language Facebook content. Increase presence on Spanish-language radio.

Progress: In FY24, 378 culturally and linguistically appropriate relevant posts were published on NNPH en Español that included information on topics such as immunizations, physical activity, nutrition, sexual health, among others. This resulted in 2,017,758 impressions, 13,019 engagements and an 11.8% audience increase. On Instagram, there were 508 posts that generated 2,093,656

impressions, 5,131 engagements and a 50% audience increase. The top three posts by engagement included two reels highlighting NNPH staff's work that were part of a Public Health Week campaign and a graphic announcing Washoe County Health District's name change to Northern Nevada Public Health. Other content included topics about COVID-19, Northern Nevada Pride, Sexual Health, Air Quality, Mosquito prevention, among others.

During this period, contracts for two radio segments ended and could not be renewed due to lack of funding. A Tu Salud radio segment with Juan 101.7 concluded in March and El COVID-tazo radio segment with La Tricolor concluded in June. Despite the conclusion of these paid media opportunities the communications team continues to send Spanish press releases ensuring earned media coverage from local Spanish speaking news media outlets such as Univision Nevada and Telemundo Reno and from the above-mentioned radio stations, to name a few.

Initiative: Implement public information campaigns designed to promote health equity and reduce health disparities. Include 5210 Healthy Washoe and other campaigns targeting co-morbidities of COVID.

Progress: In FY24, several public information campaigns were launched on various topics related to health equity. These included New Mamma Care Kits, Street Vending Permit Public Forum, COVID-19 vaccine outreach, Prescription Drug Take-Back Day, congenital syphilis, 5210 Healthy Washoe for Childhood Obesity Month, among others. Several advertising campaigns around 5210 Healthy Washoe were launched during this period. One campaign aimed to create awareness of healthy eating and active living, while other aimed to show how the community can achieve this in a three-part video series on how to shop for and cook healthy meals, and exercise at local parks. The video collection features recipes for each cooking video and are available at www.5210washoe.com under "creative collection".

Initiative: Strategically participate in community outreach activities that meet the following criteria to bring public health information directly to communities.

Criteria:

- Outreach/tabling is intended to reach and connect with underserved communities.
- Participation in the event contributes to health equity.
- Participation is a relationship building opportunity with health equity partners, leaders and/or organizations.

Progress: 11 outreach activities were completed in FY24. Some of the events attended by NNPH staff include:

- Family Health Festivals
- Cinco de Mayo event
- Juneteenth

- Holi- India Association of Norther Nevada
- Sun Valley Community Event
- Faith and Blue Soccer Scrimmage
- Bethel AME Halloween event
- Law enforcement & Faith-Based Breakfast
- Older American's Month Senior Fair
- ACDC Resource Fair at Little Flower Church
- Lemmon Valley Elementary Fair

The public health information brought directly to communities focused on NNPH resources and services such as family planning, sexual health, chronic disease and injury prevention, immunizations, WIC, etc. NNPH staff were able to connect with diverse populations through outreach opportunities.

Initiative: Identify, prioritize, and implement language accessibility best practices that have the highest impact on health disparities and inequities.

The list below includes the organizations collective efforts to implement language accessibility bet practices:

- In FY24 the organization underwent a rebrand and name change from Washoe County Health District to Northern Nevada Public Health (NNPH). The health equity team utilized the rebrand to launch a document and forms project where each division was responsible for evaluating their documents to either keep or retire a document and update kept documents with new logos, assess kept documents for readability/literacy, ADA compliance, accessibility, and translation needs.
- Through the support of the organization's CDC Reducing Health Disparities Grant programs were asked to identify vital public-facing documents for translation and prioritize each document as a 1, 2, or 3 with 1 being the most important. The organization was able to complete two rounds of translations with an external vendor and translate all priority one and two documents.
- In FY24 Nevada Assembly Bill 266 passed requiring governing bodies of cities and counties of a certain population size to develop a language access plan. Although "health districts" were removed from the list of entities subject to AB266 NNPH recognizes the importance of language accessibility and developed a jumpstart language access plan (LAP), which was a short-term plan to help move forward a few language accessibility initiatives while NNPH was waiting for the County to release their

LAP. On April 15th the County's Board of County Commissioners approved the County's Language Access Policy and Plan. NNPH is currently reviewing the County's plan to identify where the County and NNPH can align efforts.

GOAL FIVE: COLLECT, EVALUATE, AND LEVERAGE HEALTH EQUITY DATA AND INCREASE EVIDENCE-BASED KNOWLEDGE TO INFORM PROGRAM AND POLICY DEVELOPMENT, AND DECISION-MAKING EFFORTS TO ACHIEVE GREATER HEALTH OUTCOMES AND REDUCE DISPARITIES.

Initiative: Utilize recent Community Health Assessment results to inform program planning to address health disparities and inequities.

Progress: In the Community Health Assessment (CHA) the top four ranked health topics include mental health, social determinants of health, access to health services, and preventative health behaviors. Whenever possible, the CHA included demographic data which highlighted where disparate health outcomes exist among certain populations.

Mental Health - For mental health, the CHA reports that in 2019 high school students who identified as American Indian/Alaska Native had the highest proportion reporting they had attempted suicide in the past 12 months (37.2%) compared to students who identified as Black (5.7%). This led to a collaboration with Tribal Minds on their 2024 Native youth wellness retreats designed to offer a range of culturally sensitive mental, physical, emotional, and spiritual wellness workshops to 24 Native American youth aged 12-18. The retreats, titled "Rez Girls Wellness Retreat" and "Chiefs Good Day Camp," aim to foster a holistic well-being among participants while simultaneously reducing suicidal ideation. Mental health is also a stigmatized topic

Social Determinants of Health - The CHA reports that more than 30% of monthly income is spent on rent and mortgage. Income is also tied to level of education, employment, salary, and economic stability. NNPH collaborated with Hello Real Estate on a financial literacy initiative called, Un Plan Financiero para Abrir Puertas to host bilingual financial literacy sessions among underserved and Hispanic/Latino populations. This initiative works with other financial partners and institutions that are bilingual and work outside of

traditional working hours to create awareness and spark conversations about how to utilize financial literacy tools such as the importance of credit, how to save for a home, the difference between a checking and savings account, etc.

Access to Healthcare - According to the CHA, in Washoe County 17.5 % of the population is enrolled in Medicaid and only 69.2% of adults had a routine check-up within the past year. The Food Bank of Northern Nevada started an initiative known as Greet, Eat, and Meet in collaboration with NNPH and other community partners. This initiative focused on engaging with the Medicaid and uninsured community to increase awareness of Medicaid benefits and gather data on barriers communities are facing with accessing medical appointments, transportation, language barriers, and understanding insurance benefits. The Managed Care Organizations were also present at these community conversations whenever possible to help answer questions.

Preventative Health Behaviors – For preventative health behaviors, the CHA reports on percent of adults classified as overweight based on BMI categories. The demographic data shows that Black and African Americans have the highest percentage of adults who are overweight. The Black Community Collective (BCC) created a program called, anything but the Gym and partnered with NNPH. This free, four-week program is intended for Black, African American, and other minority women to help women transition from a sedentary lifestyle to an active lifestyle to address chronic diseases. The program offers gentle at-home workouts to reduce barriers to physical activity such as cost, transportation, busy schedules, and limited experience in physical fitness. The program also includes health coaching sessions and an adherence plan to support women to remain physically active after the conclusion of the program.

Additionally, according to the CHA, zip codes 89512 and 89502 are considered to have a high Community Needs Index (CNI) score, indicating residents in these communities are more likely to experience health disparities. Residents living in these two zip codes are also challenged with limited access to food stores that offer a variety of healthy and affordable foods. The Healthy Corner Store (HCS) program aims to work with local convenient stores in neighborhoods that are more than one mile away from a grocery store and encourages convenient stores to offer healthier food options. These newly added food options include labels to help promote healthier choices such as low-sodium canned items, and frozen fruits or vegetables. The newest HCS to be added is Carniceria Tres Amigos located in 89512.

Initiative: Provide easily accessible community health data utilizing the Truckee Meadows Tomorrow data platform. Update regularly as new data becomes available

Progress: In March 2024, Truckee Meadows Tomorrow and NNPH unveiled a new [online community health dashboard](#) that presents up-to-date information on key community health indicators, including mental health, social determinants of health, and access to

care. The community health dashboard was inspired by the latest Washoe County 2022-2025 Community Health Assessment (CHA) [report](#), a comprehensive overview of health-related statistical and community data, completed every three years to serve as a resource for those working to improve health outcomes.

Initiative: The Epidemiology program will track data analyses, which are stratified by demographic variables, for internal and external partners as requested.

Progress: The Epidemiology program provided Washoe County demographic information on gender, race, ethnicity, and age to compare Washoe County demographics to NNPH staff demographics.

Initiative: Explore opportunities for programs to stratify data by demographic variables whenever possible to inform programmatic efforts.

Progress: This initiative did not begin in FY24. Conversations have not yet been had with programs to see which programs already stratify data by demographic variables and which programs currently do not.

GOAL SIX: INTEGRATE HEALTH EQUITY EFFORTS INTO ORGANIZATIONAL DEVELOPMENT EFFORTS.

Initiative: Integrate health equity goals, outcomes, and initiatives within the strategic plan.

Progress: For FY24, there were 17 health equity goals, outcomes, or initiatives across the organization. Some of these equity initiatives included district-wide DEI training, number of culturally relevant or health equity social media posts, reaching 10,000 people per quarter through paid media featuring health equity content, pursue funding opportunities to promote health equity and address health disparities, provide outreach to underserved communities, and increase COVID-19 vaccination capacity across Washoe County including high risk and underserved populations.

Initiative: Annually review the Health Equity Organizational Capacity Assessment and Plan to assess needed updates.

Progress: The initial Health Equity Organizational Capacity Assessment and Plan was completed in FY23. This document serves as the annual review for the second year of the Health Equity Plan (HEP). The Health Equity Committee will review the annual report to reflect on the progress made over the last fiscal year and consider any updates for the third year of the HEP for FY25.

Initiative: Continue and increase internal communications that provide for transparency for NNPH employees and increase equitable access to information.

Progress: Since the hire of the Media and Communications Support Specialist, 16 staff newsletters have been sent. The NNPH employee newsletter, called NNPH Buzz, provides staff with updates on the people and work of the district, as well as the latest ideas and information in public health. From celebrating work anniversaries and program successes to staff book recommendations and public health trivia, the bi-weekly newsletter's goal is to keep NNPH employees informed on initiatives outside their day-to-day duties, and connect staff with one another in a personal way.

GOAL SEVEN: REFINE AND IMPROVE HIRING PRACTICES TO IDENTIFY, RECRUIT, RETAIN AND PROMOTE A DIVERSE NNPH WORKFORCE THAT REPRESENTS THE COMMUNITY WE SERVE.

Initiative: Increase promotion of job opportunities using methods designed to reach diverse audiences including targeted communication strategies, sending opportunities to community partners, and encouraging referrals from existing staff.

Progress: A comprehensive list of community-based organizations (CBOs) was developed to share NNPH job opportunities with, to better reach diverse audiences. A total of four job opportunities were promoted to this community list. Those positions included Emergency Medical Services Coordinator, Program Coordinator, Director of Programs and Projects, and Human Services Support Specialist I.

Initiative: Review targeted job descriptions for systemic barriers such as language, educational requirements, or other access issues, starting with those positions that have the highest potential to impact health equity.

Progress: NNPH is piloting a project with Washoe County HR around efforts related to recruiting and hiring a diverse workforce. The project team has been in the planning phase of the project and meeting with other local and state public health departments to learn more about their efforts with infusing equity in their hiring, retention, and recruitment processes. Although no job descriptions were reviewed in FY24 the project team has identified a few open positions at NNPH to review the class specifications for in FY25.

Initiative: Annually review how the demographics of the NNPH workforce compare to the demographics of the community we serve.

Progress: Please refer to Appendix A to review the demographic breakdown of Washoe County compared to the NNPH workforce.


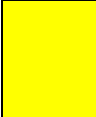
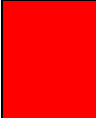

Initiative: Assess the current hiring and promotion process with an equity lens to identify barriers recruiting, promoting, and selecting candidates from a variety of backgrounds.

Progress: NNPH is piloting a project with Washoe County Human Resources around efforts related to recruiting and hiring a diverse workforce. The project team has built out a skeleton for the project and has decided to review all of the phases of hiring which include recruitment, screening, interviewing, and hiring. This project will be a multi-year project with a phased-out approach. One of the first steps is to review class specifications for open positions at NNPH.

CONCLUSION

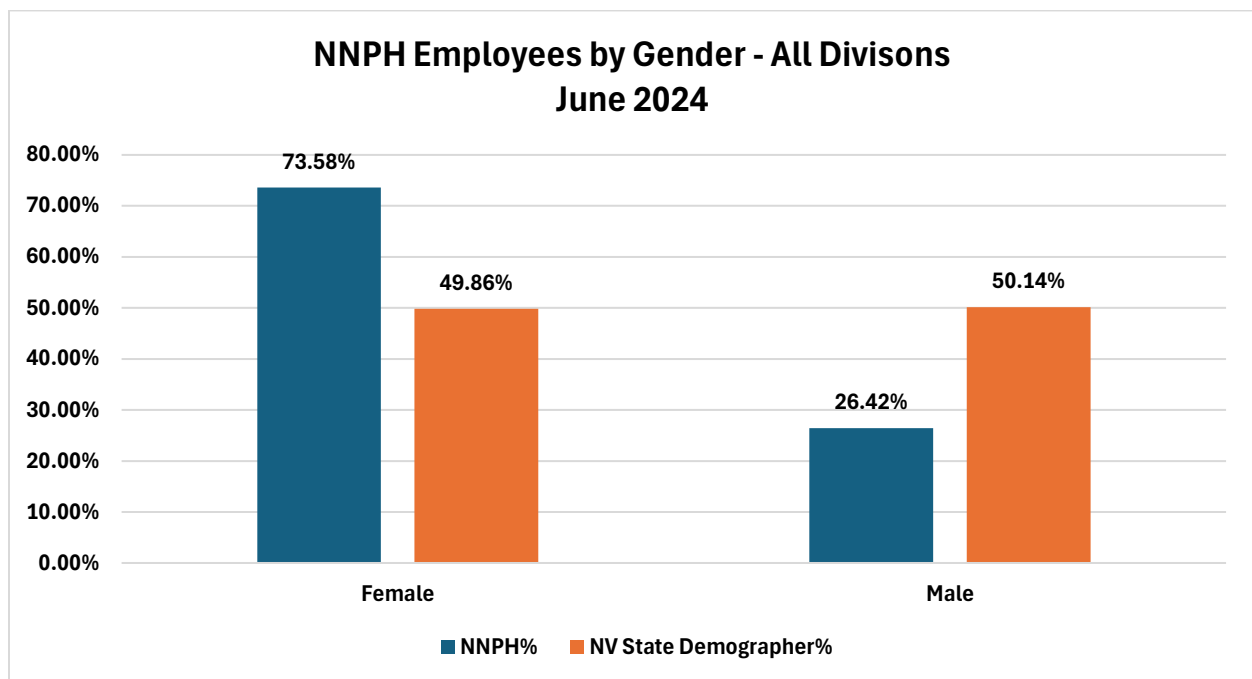
The 2024 annual report celebrates the progress and collaborative efforts made throughout NNPH programs and divisions to continue to build organizational capacity to increase health equity efforts and address health disparities. About 92% of year-two initiatives in the HEP were either fully or partially achieved in FY24. A breakdown of the overall initiatives in the color-coding system can be found below.

The HEP continues to provide direction to NNPH by facilitating efforts to promote health equity and improve disparate health outcomes. The progress of HEP initiatives will be evaluated on an ongoing basis to assess needed updates and revisions. The HEP will also continue to change and evolve over time as new information, priorities, and insights emerge. Through continued commitment and collaboration, Northern Nevada Public Health can have a significant impact on ensuring everyone has the opportunity to attain their full health potential.

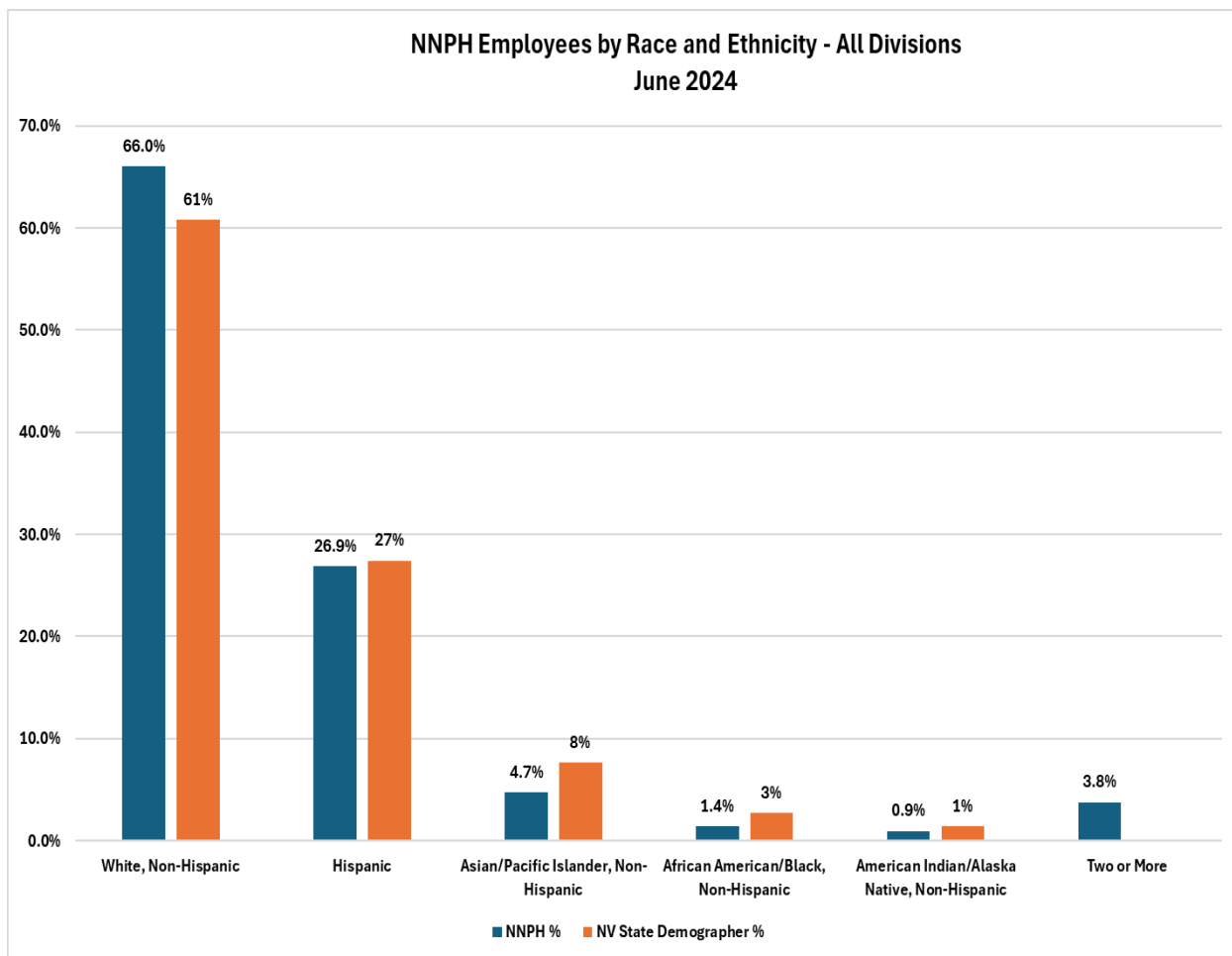
	16 initiatives received a green indicator. Green representing that the initiative was fully achieved in FY24.
	6 initiatives received a yellow indicator. Yellow representing that the initiative was in progress and partially achieved in FY24.
	0 initiatives received a red indicator. Red representing that the initiative was not achieved in FY24.
	2 initiatives received a blue indicator. Blue representing that the initiative did not start in FY24.

APPENDIX A: NORTHERN NEVADA PUBLIC HEALTH AND WASHOE COUNTY DEMOGRAPHICS

The column charts below compare the demographic breakdown of Washoe County to the NNPH workforce to see how reflective NNPH staff are to the communities they serve. The demographics focused on for comparison include gender, race and ethnicity, and age. NNPH staff demographics were collected from Washoe County Human Resources. Washoe County demographics were provided by NNPH's Epidemiology team who collects the data from the State demographer. After comparing the demographic breakdown of NNPH staff to Washoe County, the data shows:

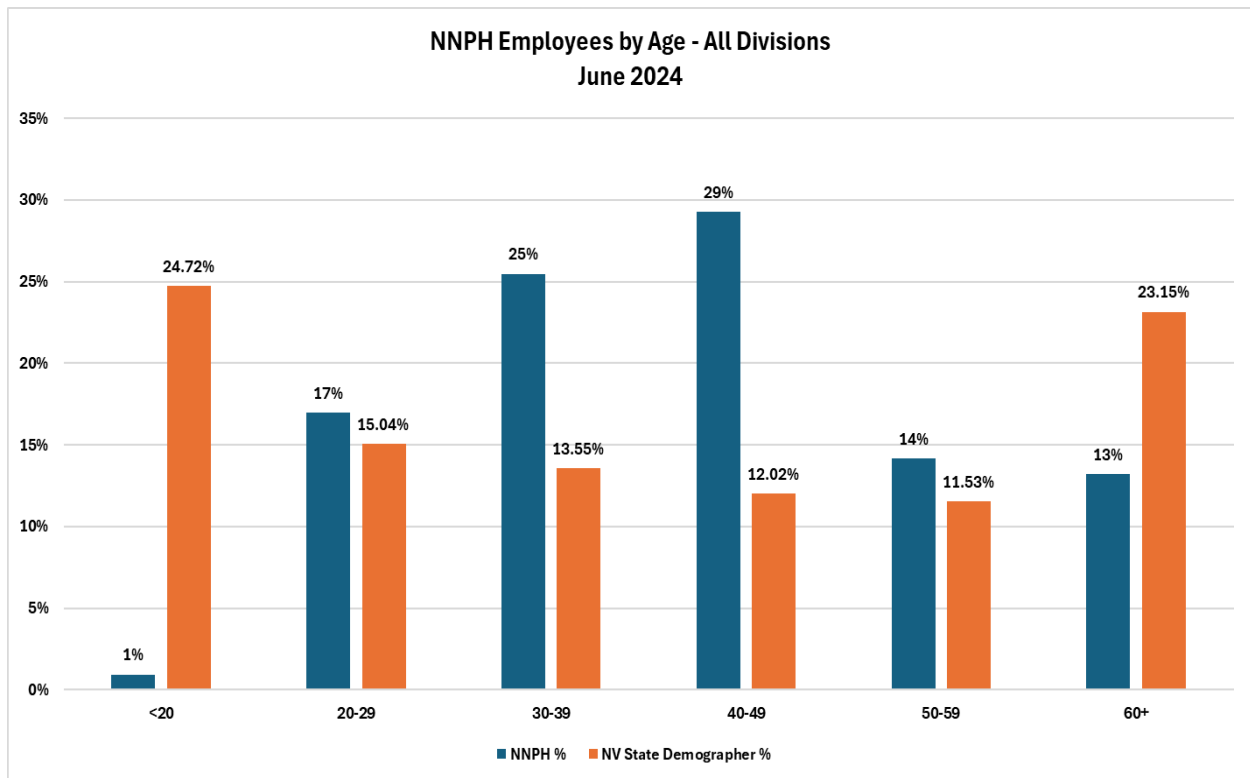


Gender – NNPH employs a higher percentage of females than males compared to Washoe County demographics.



*State demographer does not include a category of two or more races.

Race and Ethnicity – Those who identify as White, Non-Hispanic are overrepresented among the NNPH workforce compared to Washoe County demographics. The racial and ethnic groups that are underrepresented at NNPH compared to Washoe County demographics are Asian/Pacific Islander, non-Hispanic and African American/Black, non-Hispanic. It is important to note that while NNPH staff are more reflective of the racial and ethnic demographic breakdown of Washoe County, there is less racial and ethnic diversity among NNPH leadership.



Age – Employees at NNPH are distributed across the adult age spectrum distribution of Washoe County, with most of its employees falling in the 30-39 and 40-49 range.



Please contact Camarina Augusto for
questions or comments at,
Caugusto@NNPH.org