

CONSOLIDATED HUMAN SERVICES BOARD



Board Members

Dr. B. Keith Cash, OD
Mr. John Davenport, Jr., PE
Ms. Karen Durell
Dr. Palmer Edwards, MD
Dr. Calvert Jeffers, DVM
Ms. Amanda Kistler, RN
Dr. Charles Massler, DDS, M.Ed.
Ms. Heather Parker
Mr. David Plyler, County Commissioner
Ms. Sharon A. Rimm, LCSW
Dr. Peter Robie, MD
Dr. Ricky Sides, DC
Ms. Claudette Weston
Ms. Gloria D. Whisenhunt, County Commissioner

Chair

J. Phil Seats, R.Ph., MBA

Vice Chair

Fleming El-Amin, County Commissioner

CONSOLIDATED HUMAN SERVICES BOARD MINUTES October 3, 2018

MEMBERS PRESENT

Mr. J. Phil Seats, Chair
Mr. Fleming El-Amin, Vice Chair
Dr. Keith Cash
Mr. John Davenport
Ms. Karen Durell
Dr. Palmer Edwards
Dr. Calvert Jeffers
Ms. Amanda Kistler
Dr. Charles Massler
Ms. Heather Parker
Ms. Sharon A. Rimm
Dr. Peter Robie
Dr. Ricky Sides
Ms. Claudette Weston
Ms. Gloria Whisenhunt

MEMBERS ABSENT

Mr. David Plyler

GUESTS PRESENT

Ms. Shontell Robinson, Forsyth County, Human Resources
Ms. Phyllis Russell, Forsyth County, Budget Office
Ms. Emily Young, Forsyth County, Human Resources
Winston-Salem State University Nursing Students

Call to Order:

On Wednesday, October 3, 2018, the Forsyth County Consolidated Human Services Board held its regularly scheduled monthly meeting in Meeting Room 2 at the Forsyth County Department of Public Health (FCDPH). Mr. J. Phil Seats called the meeting to order at 5:30pm and welcomed everyone to the meeting.

PH/DSS STAFF PRESENT

Ms. Ronda Tatum
Mr. Jason Beasley
Ms. Lorrie Christie
Ms. Glenda Dancy
Ms. Sheryl Emory
Mr. David Foster
Ms. Mayte Grundseth
Ms. Sarah Isom
Mr. Daniel Lemons
Ms. Tina Lewis
Mr. Tony Lo Giudice
Dr. Lovette Miller
Mr. Blake Pate
Ms. Denise Price
Ms. Ann Roberts
Ms. Marie Stephens
Ms. Gayle Swain
Mr. John Thacker
Ms. Jennifer Tubbs
Ms. Shantele F. Williams

Moment of Silence:

A moment of silence was observed by all.

Introduction of Guests - Winston-Salem State University Nursing (WSSU) Students:

Mr. Seats asked Board Members to introduce themselves and then gave the WSSU Nursing Students the opportunity to introduce themselves and tell where they were from.

Oath of Office - New Board Members:

Mr. Seats swore in new Board Members (Dr. Palmer Edwards and Ms. Sharon Rimm) and congratulated them for joining the Board.

Consideration of Minutes:

The minutes of the September 5, 2018 Consolidated Human Services Board (CHSB) were reviewed. Dr. Charles Massler made a motion to approve and the rest of the Board seconded. Approved unanimously.

Public Comment:

None

Consolidated Human Services Director's Comments - Ms. Ronda Tatum gave the following Social Services (DSS) and Public Health (PH) updates:

Social Services

- Mr. Victor Isler, Director, Department of Social Services (DSS) is participating in Leadership Winston-Salem and will not be attending the meeting.
- ***Federal Updates***
 - Congress averted a Federal shutdown. Senate passed Labor HHS spending bill for all FY2019 - the House is expected to approve measure before recessing this Thursday and the President is expected to sign it. There is a provision extending government programs and operations without a final FY2019 appropriations bill until December 7th.
- ***Statewide Updates***
 - Recommendations for Social Services Reform (Regional Support, Compensation Study - Leveling Salaries across the state, Clear Statewide Strategic Plan, User Friendly Policy Structure and Training Opportunities).
 - Child Residential Services Pilot Project - working with Cardinal Innovations and other triad counties to reduce the use of Therapeutic Foster Care and other high-end residential treatments for children by providing training and crisis response to traditional foster care families contract with DSS. If successful, this will reduce trauma on children and potentially reduce costs.

Legislative Oversight Committee Presentation (October 9th) - The Project has gotten support from Senators Joyce Krawiec and Phil Berger; Cardinal has hired Cansler Collaborative to prepare a presentation, draft language for a bill and advocate on the state level; Mr. Isler and Ms. Tatum will attend the presentation to answer questions that may arise. This has been cancelled for October.

- ***Community Partnerships and Collaborations*** - Meetings are being held with Providence Kitchen, Forsyth Tech, Goodwill Industries and Goler CDC to come into DSS to provide training.
- ***Agency Operations and Processes*** - The vacancy rate is at 11% (57 vacancies). Ms. Gloria Whisenhunt asked if that rate was high or low and Ms. Tatum responded it is right in line with where it historically rates. DSS is completing a functional assessment for an Electronic Records System for Child Support. Child Support function will never go into NCFast due to the federal nature of the operation. Child Support is more of a Federal program than a State program. It is a very paper intensive operation and due to space needs, etc., a look at an electronic records system is necessary.

Public Health

- Vacancy rate is 10.7% (31 vacancies). Currently assessing long-term vacancies (some positions vacant since 2016). Challenged leadership to look at vacancies and assess the need for these positions and possibly reallocate and/or reclassify to more needed areas.
- Continuing to do ride-alongs with Environmental Health.
- Flu Clinics - now through October 26th.
- We are looking more at performance outcomes versus outputs (outcome of client contact versus number of clients seen); we will begin comparing program performance to funding addendum requirements.
- Community Partnerships - applying for an Opioid Mitigation Grant with Twin City Harm Reduction.

Hurricane Florence

- Challenged our emergency preparedness support function. Difference in the role of DSS and PH based on Federal Emergency Management Agency levels (Support Function #6 Mass Shelter, Emergency Assistance, Housing, Health and Human Services, etc., versus Support Function #8 Public Health and Medical Services).
- The Lawrence Joel Veterans Memorial Coliseum (LJVM) was activated as a state shelter. Need to address the following issues: communications, support and direction.
- DSS is at a more critical level than PH - DSS serves at an emergency support function #6 (responsible for mass care, emergency assistance, housing and human services); PH serves at an emergency support functions #8 (public health and medical services).
- Mosquitoes - after the storm there is concern about the potential migration of other species to our area (hope to see a decrease as the temperature drops during Fall).
- 2 PH nurses were deployed to a Pitt County shelter and there were several nurses at the LJVM shelter - we need to take a look at the skill sets that are needed. PH presence was not as vast as the DSS presence.
- The food area was checked by Environmental Health staff for any areas of concern.

Health Director Position

- An offer was made and we are awaiting a decision. We have received unofficial confirmation from the state that the candidate does meet the qualifications of a local PH Director in North Carolina (NC).

Other Board Notes

- Ms. Tatum reminded Board Members to complete the New Board Member Training if they have not done so. Ms. Lorrie Christie will send the link to the members who were sworn in at tonight's meeting.
- Working on Board Operating Procedures from both the old PH and DSS manuals to present to the Board Chair and Vice Chair before the next meeting.

Ms. Claudette Weston asked who at the state level was in charge of the Office of Emergency Management and said they need to step up to the plate the next time and added that a lot of people wanted to volunteer.

Dr. Peter Robie asked that everyone be given a hand for their work with Hurricane Florence.

Old Business:

None

New Business:

Flu Season and Emergency Preparedness

- ***Flu Season*** - Ms. Sarah Isom, Health & Human Services Emergency Preparedness Coordinator for PH, gave an update on last year's flu season. Ms. Isom stated that last year was a bad year, considered a high severity season. It was elevated and wide spread for an extended period of time across the US. Last season was one of the longest seasons recorded, at 19 weeks. There were 389 deaths from October 1, 2017 through May 19, 2018 in NC (highest seen since recorded in NC). The highest peaks were mid January through end of February. Population infected was highest in the US, at 7.5%. The predominant strain was Influenza A (H3N2). Overall vaccine effectiveness against both A and B strains of the viruses was reported to be approximately 40%. Vaccination is the best way to prevent flu. Flu clinic started giving vaccinations Monday, October 1st and will go through October 26th. Vaccinations are free for anyone. The department will have ongoing outreach during flu season. Public Health is partnered with DSS through social media and partnership cards (see full report on file in the Administrative Binder).
- ***Emergency Preparedness*** - Ms. Isom and Ms. Gayle Swain, Health & Human Services Emergency Preparedness Coordinator for DSS gave the following updates on emergency preparedness (see full report on file in the Administrative Binder):
 - PH emergencies are (bioterrorism, pandemics, outbreaks, chemical, radiological and natural disasters).
 - Mandates governing PH response are (Homeland Security Presidential Directive (HSPD-5; HSPD-8 and HSPD-21) - PH and Medical Services is an Emergency Support Function #8 and DSS is an Emergency Support Function #6.
 - Mandates governing DSS response are (The Stafford Act, Chapter 166.A NC Emergency Management Act and DHHS - Emergency Support Function #6, Mass Care/Sheltering).
 - CDC Public Health Emergency Preparedness (PHEP) Cooperative Agreement provides funding for state, local and tribal PH departments.
 - 15 capabilities serve as public health preparedness standards.

- Strategic National Stockpile - stockpile of medicines and supplies that assist with a rare or unexpected health threat when state and local supplies run out (maintained by CDC).
 - Partnerships include (NC DHHS, Office of PH Preparedness and Response, W-S/FC Emergency Management, DSS, Public Safety Agencies, Medical Systems, Triad Healthcare Preparedness Coalition, Local Colleges and Universities)
 - Behind the Scenes Preparedness (ongoing staff training, annual exercises, monthly meeting with Central Region Counties and surrounding counties, FC Incident Management Team, Steering Committee for Triad Regional Healthcare).
- ***Hurricane Florence Response - PH and DSS***
- PH - deployed 2 nurses to Pitt County, on Thursday, September 13th to a State-run, Special Medical Needs Shelter.
 - PH - evaluated nursing needs at shelter on Sunday, September 16th in preparation for influx of evacuees from Wake County.
 - PH - assisted Florida Dept. of Health nursing strike teams and American Red Cross with nursing needs from September 17th - September 20th at LJVM. Provided 4 nurses for each shift, two shifts a day on Monday-Wednesday, 3 nurses for overnight shifts on Monday and Tuesday evenings, and 2 nurses on Thursday morning AM shift.
 - DSS provided staff 24/7 (3 shifts - 8am to 4pm; 4pm to Midnight; Midnight to 8am).
 - All DSS divisions were represented.
 - DSS Core Responsibilities - feeding, dormitory, donations, escorts, childcare and information.
 - DSS had 154 employees who worked for a total of 1,149 hours.
 - Both PH and DSS (with other partners) worked as a team to manage the event.

Service Area Spotlights:

Community Health Services - Ms. Denise Price, Assistant Health Director, gave the following updates on her service areas (see full report on file in the Administrative Binder):

- ***Environmental Health (EH)*** - Introduced Mr. Daniel Lemons, Director. EH is responsible for the functions that are mandated by state and local laws, ordinances and regulations. The goal is to prevent the spread of communicable and environmentally-related diseases within Forsyth County. Functions that fall under EH include Food, Lodging and Institutions, Plan Review, Pool Program, Onsite Water and Wastewater, Rabies, Childhood Lead Poisoning Prevention and Vector. EH has 44 positions. New Legislations - SB 711 - NC Farm Act of 2018 - vetoed by the Governor; overridden, effective October 1, 2018. HB 374 - Regulatory Reform Act of 2018 (Amends GS 130A-336(b1)(S.L.2017-211 (SB16)) - vetoed by Governor, overridden.
- ***Laboratory*** - High complexity lab, with 5 positions. Introduced Mr. Blake Pate, Medical Lab Supervisor. The lab is regulated and inspected by COLA - Laboratory Accreditation Program Bureau and has CLIA certification. It primarily serves clinics, we have 27 tests available (86,947 tests performed in-house for fiscal year (FY) 2018; 13,144 specimens processed/sent to State Lab); prepares rabies specimens for State Lab.

- **Pharmacy** - Located at 725 Highland Avenue. The Pharmacy has 3 primary customers (Behavioral Health - Daymark, EMS and Clinics). Introduced Mr. David Foster, Pharmacy Manager through December 29, 2018 - will be retiring. Ms. Price reviewed volume of prescriptions, the sample and Pharmacy Assistance Program, revenue sources, the limited formulary and number/type of pharmacy positions.
- **WIC** - Women, Infants and Children Program that provides breastfeeding, education, nutritious foods and improved healthcare access for low and moderate income women and children up to the age of 5 or at risk of developing nutrition related health problems. There are certain eligibility guidelines to be followed. Congress passed a bill in 1972 to create WIC - came to NC in 1974. Introduced Ms. Mayte Grundseth, Nutrition Program Director. Special projects included the Summer Feeding Program and the Summer Farmer's Market. WIC has 38 full time employees (includes 3 vacancies/actively recruiting). WIC provides services to approximately 8,500 individuals annually and infuses \$6.5 million into our local economy.
- **Public Health Educator** - This position promotes Community Health Services programs, engages stakeholders, develops section materials, implements tattoo education and participates in Childhood Lead Poisoning Program Investigations. There is one full time employee.
- **Accreditation** - Accreditation is the responsibility of the entire department. There are 41 benchmark with 147 activities. Accreditation takes place once every four years. The department was last accredited February 2018, with honors (145/147 activities were met). A revised version of the Health Department Self Assessment Instrument (HDSAI) was issued January 1, 2018.

Mr. Fleming El-Amin was stopped by someone in the community who had a hot dog from a food cart - the person had lots of questions that Mr. El-Amin did not have the answers to. Ms. Price encouraged Mr. El-Amin to have the person call us and we will be happy to answer their questions and share information with them.

Adult Protective Services - Ms. Ann Roberts, Director, provided the following updates for August (see full report on file in the Administrative Binder):

- **Adult Protective Services** - provides services to adults 18 years and older who are elderly or disabled to promote independence and self-sufficiency. The Social Workers accept reports of abuse, neglect and exploitation of disabled adults. The current caseload is 55; served 94 individuals.
- **Adult Guardianship** - the DSS Director can be appointed legal guardian by the clerk of court, when an adult 18 years or older has been adjudicated incompetent by the courts and there are no other available or appropriate individuals or corporations to serve. Social Work staff will serve as a representative for the Director in most cases. The current caseload is 244; served 253.
- **Employment Services** - employment assistance is provided to any DSS customer with a need. In conjunction with the on-site Employment Center and community partners, an array of services are offered. The current Work First Employment caseload is 195; served 367 individuals.
- **In-Home Services** - services offered to elderly or disabled adults 18 years and older to help them remain in their home. The current caseload 244; served 250 individuals.

- ***In-Home Aide Services*** - provides transportation assistance as well as assistance with light housekeeping and meal preparation for 1-2 hours per week. The current caseload is 168; served 170 individuals.
- ***Adult Placement Services*** - assists the public with navigating the process for facility placement; primary duties include monitoring and investigating complaints of 36 Assisted Living/2 Adult Day Care facilities in Forsyth County. The current Placement caseload is 4; processed 3 unclaimed bodies.
- ***Adult Services Intake*** - no adult protective services or Medicaid. Processed 137 intakes and 41 after hours calls.
- ***Adult Medicaid*** - includes private living, special assistance, long term care and community alternative program. Current combined caseload is 22,334; served 22,939.
- ***Budgetary and Economic Impact Considerations*** - Staffing to provide mandated services; funding sources need to be utilized responsibly; adult Medicaid cases were 22,334 for a total January - August expenditures of \$47,335,334 (17,269 claims).
- ***Audits and High Risk Areas*** - Audits in Divisions of Aging and Adult Services, Health Services Regulation, Social Services, and Health Benefits. Areas where errors could result in payback include Work First Family Assistance and Adult Medicaid. Adult Guardianship is a very restricted program, they have to educate the court system and there is greater need for financial support - more wards without sufficient income (did a study with other counties to see what they do to help wards).
- ***Performance Measures for the Adult Division*** - in a trial period right now. Meeting or exceeding most measures, but have some improvement to do with SA Medicaid and Work First participation rate - this rate is rarely met across the state, but doing what we can to improve.
- ***Community Partnerships*** - rely on relationships/partnerships with Forsyth County citizens, law enforcement, District Attorney's Office, local hospitals, NC Works Career Center, Senior Services, Shepherd's Center, just to name a few. Will launch partnership with NC Works November 1, 2018.

Dr. Robie asked if an individual has been beaten by a family member and it is suggested to them they call DSS or the authorities, sometimes they will not. The situation may or may not meet the criteria for Adult Protective Services - very specific in that the adult must have an incapacitating disability. Another factor is the adult's capacity to understand what is happening to them - adults with capacity can make their own, sometimes poor, choices. It could be a domestic violence situation, or Adult Protective Services. Can always call DSS either way, but the reports may or may not be screened in for intervention.

Other Business or Announcements:

None

Adjourn:

Mr. Seats asked for a motion to adjourn. Mr. El-Amin made a motion and Dr. Keith Cash seconded. The meeting adjourned at 7:38pm.

RT/lgc

Next Meeting: November 7, 2018 - 5:30pm