

**Wake County Human Services Board Retreat
Annual Training & Orientation
Meeting Minutes
February 27, 2020**

Board Members Present:

Edward Buchan
Frank Eagles
Deborah Lawson
Dr. Randy Marsh
John Myhre
Dr. Jananne O'Connell
Dr. John Perry
Margaret Raynor
Ann Rollins
Stephanie Treadway
Angie Welsh
Commissioner James West
McKinley Wooten, Jr.

Guests Present:

Tanya Bass
Song Betancur
Derrick Byrd
Sasha Gomez
Dr. Barbara Ann Hughes
Carmen Muggle
Betty Paesler
Veronica Smith
Rachel Waldman Klayman

Staff Members Present:

Commissioner Vickie Adamson
Debra Baker
Paige Bennett
Craig Burrus
Heidi DeMocker
David Ellis
Petra Hager
Richard Hayner
Leah Holdren
Brittany Hunt
Christopher Kippes
Annemarie Maiorano
Heather Miranda
Kenneth Murphy
Dr. Nicole Mushonga
Michael Orbon
Kelly Owens
Derwick Paige
Antonia Pedroza
Regina Petteway
Andre Pierce
Ginny Satterfield
Elizabeth Scott
Dr. Joseph Threadcraft
Diamond Wimbish
Ross Yeager

Board member attendees included newly appointed Board member Mr. Frank Eagles.

Welcome & Opening Remarks

(Presented by Ms. Angie Welsh)

Wake County Human Services Board Chair Ms. Angie Welsh welcomed everyone to the 2020 Wake County Human Services Board Retreat at Walnut Creek Wetland Park in the Neuse River Room. The meeting was called to order at 8:01 a.m.

Wake County Update

(Presented by Mr. David Ellis)

Chair Ms. Angie Welsh introduced County Manager Mr. David Ellis. Mr. Ellis recognized Human Services Director Ms. Regina Petteway for all her work and dedication to Wake County Human Services. He also thanked the Wake County Human Services Board for their work to support Wake County and its residents.

Mr. Ellis began his presentation by reviewing Wake County population information. As of 2015, Wake County had surpassed one million residents and is now believed to be growing by an average of 64 people per day. This figure includes babies being born within the County and individuals moving in from other counties, states, and countries. Wake is the third fastest growing counties in the United States with one million or more residents as of 2018. Mr. Ellis then reviewed the population growth by age group and shared that there was an increase of 84,000 people in residents 55 and older between 2010 and 2018. This age group now represents 46% of residents in Wake County.

Next, the employment rate of 2.9% was discussed. This rate does not include individuals who are “underemployed” or who does not earn enough pay or hours to fully utilize their abilities, skills, and time. For comparison, in 2010, the Wake County unemployment rate was 9%.

Reappraisal rates were then discussed. Reappraisal is the process of updating Wake County’s real property values to reflect the fair market value as of January 1st, 2020. Fair market value is the most probable price a property would bring in an open and competitive market. The last countywide reappraisal was conducted in January of 2016. As of that same year, Wake County transitioned from an eight-year reappraisal cycle to a four-year cycle. There was ultimately a 20% change in residential, 33% change in commercial, and 23% change in total for Wake County property.

There are several considerations for the Fiscal Year 2021 budget as, to date, the Board of Commissioners has approved property tax increases six years in a row. Mr. Ellis spoke about detailed discussions to consider the needs of Wake County while still respecting and responding to the residents’ complaints about tax increases.

Accomplishments from 2019 regarding affordable housing were reviewed. The Housing Department is now fully staff and 600 affordable housing units were added or maintained. The Preservation Warning System was developed which will look at affordable apartments that have tax credits and when those tax credits will expire. This gives the Housing Department the opportunity to work with non-profits to approach the owner of the apartment complex to inform them of upcoming tax credit expirations. This way, if the owner plans to sell, they could potentially work with a non-profit. Finally, substantial progress has been made to eliminate veterans’ homelessness. More information on this success will be shared over the next few months.

Mr. Ellis then described Wake Prevent!, a new initiative under the Division of Homelessness and Prevention Services. Wake Prevent! launched in November of 2019 and provides rental assistance and case management to people who meet specific criteria. The mission is to help residents on the verge of homelessness. Wake Prevent! is a referral-based and is accessible through the Coordinated Entry System. To access Wake Prevent! as well as shelter and support service, individuals can contact a Coordinated Entry Access Site to set up an appointment.

Census Day 2020 was also discussed, which will be held on April 1st, 2020. Vice Chair Commissioner Vickie Adamson is heading the Census 2020 initiative for Wake County. It is critical that all residents of Wake County are counted in order to maximize several benefits, including funds distributed from the Federal Emergency Management Agency (FEMA) during disasters. For the first time, residents will be able to submit their data online or by calling a 1-800 number.

Annual Legal Training and Orientation [PH Accreditation Benchmark #34.2, 36.1, 36.2, 36.3] – Duties of Human Services Board, Board Member Roles, General Statute

References

(Presented by Ms. Ginny Satterfield and Mr. Kenneth Murphy)

Ms. Ginny Satterfield led the Human Services Board through an interactive challenge to present on the details from the legal training. Three groups had been given leaders with prior knowledge of the challenge to lead them through the presentations to the group. Each presentation addressed duties of the Human Services Board as well as Board member roles and reference the general statutes that informed those duties and roles. Mr. Kenneth Murphy, Deputy County Attorney, was present to work with the groups and review their materials before their presentations. Each group then went forward one-by-one to present their materials to the full audience in attendance.

Annual Legal Training and Orientation [PH Accreditation Benchmark #34.2, 36.1, 36.2, 36.3] – Board Operating Procedures

(Presented by Mr. Christopher Kippes)

Mr. Christopher Kippes, Public Health Division Director, presented information on the Board Operating Procedures. He began by reviewing the positions comprising the Human Services Board before moving forward with a list of the committees whose work carry out the work of the Board. There was a note from Board members that the current Board Operating Procedures needed to be updated to accurately reflect the Regional Networks Committee as a standing committee. This was a change that the Board enacted during 2018. This was noted and will be revisited at a future Human Services Board meeting.

The members of the Executive Committee of the Human Services Board were detailed. Mr. Kippes then explained that up to ten community members could serve as community representatives on each standing committee. The requirements for Board members' terms and expected attendance were also shared. Quorum was discussed as well as the expectations for hearing panels. Mr. Kippes noted that the Wake County Human Services Board Operating Procedures were printed and available in the Board members' handbooks.

Human Services 101 (Organization Structure and Service Provision) [PH Accreditation Benchmark #36.3]

(Presented by Ms. Regina Petteway, Ms. Antonia Pedroza, Ms. Heather Miranda, and Ms. Annemarie Maiorano)

Director Regina Petteway gave an overview of Wake County Human Services. In 1996, Wake County consolidated Public Health, Social Services, Behavioral Health, Child Support Enforcement, and Housing and Community Revitalization agencies into the first integrated county Human Services agency in North Carolina. By 2012, Wake County had partnered with Durham County to launch Alliance Behavioral Healthcare to manage Behavioral Health services. Divestiture of Behavioral Health services to private companies was completed by July 2013. And in 2019, Wake County invested in strategies to decrease homelessness and increase the supply of affordable housing. Thus, the Housing and Community Revitalization Department was created.

Wake County Human Services serves as an agent of the State of North Carolina in the performance of the following:

- Public Health Code Implementation and Enforcement
- Benefits Administration

- Child Protection
- Elderly and Disabled Protection
- Child Support Services
- Emergency and Disaster Preparedness and Response

General statues information for Social Services and Public Health were reviewed as well as appropriate federal regulations and collaborations with the North Carolina Department of Health and Human Services (NCDHHS). Director Petteway then shared the vision, values, and mission statement of Wake County Human Services and noted how employees familiarized themselves with and exemplified these statements. Wake County Human Services serves over 200,000 people each year out of fifteen locations across the County.

Ms. Antonia Pedroza, Deputy Director of Social Services, then presented about Economic Services and Child Welfare. Economic Services covers the following areas:

- Medicaid
- Food and Nutrition Services (FNS)
- Child Support
- Child Care Subsidy
- Work First
- Energy Assistance
- Employment Services
- Senior and Adult Services

With Child Welfare, Child Protective Services or CPS ensures safe, permanent, nurturing families for children by protecting them from abuse and neglect while attempting to preserve the family unit. CPS also provides services – called Permanency – to safely reunify families whenever possible. This reduces the length of time in care by achieving permanent homes for children. Prevention is also a part of Child Welfare and provides up to twelve months of services for at-risk families to decrease entry and re-entry into the child welfare system. Due to this work, Social Services has received many awards and recognitions that Ms. Pedroza reviewed with the Board.

Next, Ms. Heather Miranda, Clinical Operations Director, stood in for Dr. Kim McDonald, Physician Director, to present information about Public Health and Health Clinics. Public Health encapsulates several aspects of Human Services, including the following:

- 4-H Youth Development
- Communicable Disease Prevention and Surveillance
- Disaster Preparedness and Response
- Epidemiology
- Health Promotion and Disease and Injury Prevention
- HIV/STD Community Outreach
- Immunization Outreach
- Maternal Child Health Programs
- School Health
- Vital Records
- Community Health Needs Assessment

Health Clinics also encompasses a vast swath of services. Clinical Services covers immunization/travel medicine and refugees as well as STDs/HIV and pharmacies. Women and Children Clinical Care covers dental services, child health, WIC, and family planning and prenatal/postpartum care. Health Clinics provided over 97,000 visits in Fiscal Year 2019, which was an increase of 5% over Fiscal Year 2018. Patient payment collections continue to be a strong focus with self-pay collections increasing by more than \$72,000 in Fiscal Year 2019. In addition, an appointment reminder system has reduced patient no-show rates by 13%. This work has resulted in several awards and recognitions for Health Clinics that Ms. Miranda shared with the Board. Ms. Miranda also spoke briefly to the accomplishments achieved through the Live Well Wake initiative.

Ms. Annemarie Maiorano, Deputy Director of Operations, then reviewed Administration and Operations. She began by reviewing GoWake Access – a Community Transportation Program designed to help close the gaps in Wake County’s transportation network for special populations. It provides mandated and non-mandated services to specific populations based upon system capacity and available funding sources. Next, Ms. Maiorano described the “Voice of the Customer.” This phone line provides client advocacy in a neutral system (unembedded with any service division) and assists customers with system navigation support. Using this, the phone line manages the agency’s traditional complaint and customer service concern service and compiles customer experience data to provide feedback to programs for use in quality improvement.

The presentation was wrapped up by Ms. Maiorano detailing items “on the horizon.”

- Wake County’s population is expected to continue to increase by 50 to 60 people per day. This will impact the volume of mandated services and focus on reducing disparities across Wake County
- Currently, 10.4% of the County population is uninsured
- Twelve percent of Wake County children (0 to 18 years) live in poverty
- African-Americans and other minorities are disproportionately affected by chronic diseases with African-American males in Wake County leading in disease mortality among most of the chronic diseases
- African-American infants in Wake County are twice as likely to die in the first 12 months of life as babies born to moms of other races
- For the aging population, 22% are living at 200% below the federal poverty level. Projected growth over the next twenty years is 91% for ages 65-74, 189% for ages 75-84, and 247% for ages 85 and older. Thirty-one of the projected populations will be persons with one or more disabilities

There are also State and Federal Policy changes that will impact Wake County Human Services. With Raise the Age legislation, the State estimates 1.5% of new juveniles will receive a “County Child Welfare Custody” disposition. This is expected to be about thirteen per year in the next few years for Wake County. The North Carolina Division of Social Services (NC DSS) will move to a regional supervision model, so some changes in local support are anticipated. The impacts of this are unclear at this point. The Family First Prevention Services Act will eliminate reimbursement for services in group homes after two weeks, and there are insufficient numbers of family-like settings to meet the needs of this population. Implementation will also require that Child Welfare provide twelve months of prevention services. The current average is six months.

Responses to identified challenges were also shared.

- Millbrook Human Services Center will be moved to a new site on Departure Drive in July 2020. This move will result in more space and an increased number of services in the new location
- Administrative staff will move to the Somerset Building on Bland Road within the next year, which will free space for more direct client service delivery on the central campus
- The design and operational planning for a new Public Health building, to be located adjacent to Swinburne, is underway and anticipated by 2025
- Work continues with community partners to launch a new Western Human Services Center within the next five years
- More self-service options are being explored for customers coming into centers
- Wake County Human Services will continue to expand collaborations internally and within the community to maximize collective impact on addressing social determinants of health
- Listening to the employees will continue to be a priority

Environmental Services 101 (Organization Structure and Service Provision) [PH Accreditation Benchmark #36.3]

(Presented by Dr. Joseph Threadcraft)

Director of Environmental Services Dr. Joseph Threadcraft gave the Board an overview of Environmental Services, which oversees an Administration Team, Animal Services, Environmental Health and Safety, Solid Waste, and Water Quality.

Administration provides centralized support for accreditation and quality improvement. This allows Environmental Services to comply with State mandates, focus on quality improvement, and meet standards of service. Administration's outcomes are outlined below:

- Fiscal accountability is linked to operations
- Projections and analyses are transparent and fact-based
- Customer Service is responsive, accurate, and courteous

Dr. Threadcraft then provided details about Animal Services. Dr. Jennifer Federico, Animal Services Director, has eliminated animal euthanasia for space and animal euthanasia for upper respiratory infection. The number of feral cats euthanized has also drastically lowered since Fiscal Year 2011. Animal Services has also achieved its target of over 90% for live pet release rate. Future strategies for cultivating the success in Animal Services include growing foster and transfer programs, evaluating customer service through surveys, growing a community cat program, and building a new animal center. The latter will have separate entrances for adoption and surrender, contain double-sided housing for all animals, grow community programs, improve medical space, and create more space for cruelty and bite quarantine cases.

Mr. Andre Pierce, Environmental Health and Safety Director, was recognized by Dr. Joseph Threadcraft. With Environmental Health and Safety, the mission is to "improve public health through education, plan review, and regulation." A future opportunity for Environmental Health and Safety will be for a compression analysis that will allow current senior employees' salary to be reviewed and readjusted based on their experience and education. This will ideally increase the retention of highly qualified staff. Dr. Threadcraft then reviewed data on Environmental Health and Safety inspections. While Durham County, Mecklenburg County, and Wake County

all conduct roughly the same percentage of required inspections, the amount of inspections that each inspector must make are incredibly different. For Durham, their 13 inspectors have made roughly 257 inspections per person per year with a requirement of 343 per person per year to meet inspection mandates. For Mecklenburg, their 39 inspectors have made 300 inspections per person per year with a requirement of 379 per person per year to meet inspection mandates. Meanwhile, Wake County's 22 inspectors have made almost 420 inspections per person per year with a requirement of 562 per person per year to meet inspection mandates.

In Solid Waste, the mission is "to protect the public health and safety of Wake County citizens by providing quality solid waste and recycling services that are efficient, cost effective, and environmentally responsible." Wake County has an agreement with all municipalities' disposal providers apart from Holly Springs. The South Wake Landfill opened in 2008 with a liner system and monitoring to protect heavily regulated groundwater. The Landfill operates on six megawatt-hours (MWh) of power, which is enough energy to power 6,000 homes, and generates \$600,000 in annual revenue. The life of South Wake Landfill was initially expected to last until 2032 but is now believed to last until 2040-2042. Though this time period is far off, there are already conversations about what waste disposal looks like past this expiration date.

Dr. Joseph Threadcraft recognized Mr. Michael Orbon, Water Quality Director, in attendance. Water Quality "promotes leadership in water management, sustainability, and health by protecting high quality water throughout Wake County." The three primary areas of service in Water Quality are Wastewater Permits and Technical Assistance, Groundwater Protection and Education, and Watershed Management. Dr. Threadcraft reviewed performance of the Wastewater Management Mandated Inspections (CAP) and noted that reallocation of labor impacted results in Fiscal Year 2019 after a strong Fiscal Year 2018. After Fiscal Year 2019, the expectation is that such reallocations can be avoided and 80%-91% of inspections will be completed through Fiscal Year 2025. Dr. Threadcraft also spoke briefly to the efforts of informing private well users of the importance of testing their well water. At the October 2019 North Carolina State Fair, Wake County had an educational outreach event called "Imagine a Day Without Water." The event was a success with 34 volunteers from seventeen agencies, including various universities, non-profits, and private companies. This included a "water bar" where visitors could sample water from the City of Raleigh, the Town of Cary, bottled water, and private wells to taste the difference of water from different sources.

For challenges and horizon issues for Environmental Services, it will be a goal to better hire and retain a highly qualified workforce, acquire property and build a new Animal Services Facility, determine the future of municipal solid waste disposal for the County, and enhance the sustainability of water quality and quantity in the County.

Wake County Health Disparities Report

(Presented by Ms. Regina Petteway and Dr. Nicole Mushonga)

Ms. Regina Petteway, Director of Human Services, and Dr. Nicole Mushonga, Epidemiology Program Manager, presented on the Wake County Health Disparities Report. The Health Disparities Report was in draft form and Board members were asked to submit their feedback and questions about the report to the Director by March 10th, 2020 so that the report could be further defined in a finalized version.

Health disparities are defined as preventable or controllable differences experienced by socially disadvantaged racial, ethnic, or other population groups and communities. Some areas with disparities in Wake County include chronic diseases, communicable diseases, homelessness,

injuries, infant mortality, income, food security and poverty, and school suspensions. Due to the length of the document, Director Petteway highlighted a few key pages. The first was in “Chronic Diseases – Cancer” with death rates from 2013 to 2017. Here, African-American men had the highest death rates by race and by gender. Minus the “other” ethnic/race category, Hispanic women had the lowest death rate by race and gender. Meanwhile, White men had the highest number of deaths. In the same time period, African-American men had the highest death rates for cancer of the trachea/bronchus/lung, prostate, colon, and pancreas. Meanwhile, African-American women had the highest death rates for cervical cancer and breast cancer. The highest death rate for skin cancer was in White men.

After presenting this information, Director Petteway posed two table questions to the group to discuss – “What is more important, rates or numbers? Why?” and “Why do African-American men have the worst disparities for Chronic Diseases?” For the first question, Northern Regional Center Director Mr. Ross Yeager noted that the initial response would lead to rates, but that both figures are critically important to consider. While rates are very important, numbers themselves should not be ignored. For the second question, Ms. Antonia Pedroza, Deputy Director of Social Services, noted that the reasons are likely numerous, but may include access to labor care, bias, and institutional racism. Also noted were possible genetic and environmental factors that could impact a person’s likelihood of having cancer.

Director Petteway then reviewed disparities in homelessness. Of the 351 adults and children counted on January 30th, 2014 by the Coalition to End Homelessness, 228 were children age 17 and under (66%) and 296 were African-American (84% of the 351 population count). The Infant Mortality Rate for White infants in 2017 was 1.9 per 1,000 live births. For African-American infants, it was 11.4 per 1,000 live births. In other words, an African-American infant was six times more likely to die within the first year of life than a White infant in Wake County. The causes of death show a disparity for prematurity and low birth weight. Of all deaths in this category in 2017, 34.9% were African-American, 34.3% were Hispanic, and 18.8% were White. African-American and Hispanic women have a lower percentage of women who start prenatal care in the first trimester compared to White women (54.6%, 49.4%, and 77.8% consecutively). A table question was then posed about how race and poverty contribute to disparities in infant mortality and homelessness. Institutional racism was mentioned once again, but attendees also noted how high stressors could negatively impact carrying a child.

Director Petteway thanked the Board for their consideration of the draft and encouraged them to submit feedback. Once this is received and the draft is reviewed and edited, the Wake County Health Disparities Report will be formally published.

Equity Orientation

(Presented by Ms. Tanya Bass)

Ms. Tanya Bass, Cultural and Community Health Initiatives Program Supervisor at the North Carolina Department of Health and Human Services (NCDHHS), led the Human Services Board through equity orientation. Ms. Bass explained that her Office (the Office of Minority Health and Health Disparities) was founded in 1992 to address health disparities and health equity. Any marginalized, stigmatized, or ostracized communities are ones that this Office stands for according to Ms. Bass. The Minority Health Advisory Council (MHAC) was also established in 1992 by the North Carolina General Assembly. Its mission was to advance the elimination of health and health care disparities among racial/ethnic minorities and underserved populations through health equity advocacy. The MHAC consists of legislators, community leaders, and

health and human services professionals from across North Carolina. The Director of this Council is Dr. Cornell P. Wright. The Office of Minority Health and Health Disparities and the MHAC work closely together to address disparities.

Ms. Bass noted the reality of failing the local and state community and explained that much more could be done to address these disparities and promote equity. The presentation made was meant to be an overview in order to spark the conversation needed to move forward and learn more about becoming more active and more aware of these obstacles facing Wake County and North Carolina. Ms. Bass spoke to the unintended consequences of not considering these obstacles and the pain that it could cause the community even with providers attempting to make positive changes. As Ms. Bass explains, racial, economic, and social oppression is very present in the history of Health and Human Services in North Carolina. Eugenics was mentioned as an example. Ms. Bass explained that such history still impacts the community and conversations of today. And though those in Human Services now were not a part of this practice, it is still something that must be kept in mind and recognized if addressing the community with an informed perspective is a goal.

Ms. Bass then coordinated an interactive discussion with the group by having attendees talk to one another to decide which of their key words matched with others' descriptions. All of these words were related to equity, such as racial justice, cultural humility, and implicit bias. After the group had found the right definition (as confirmed by Ms. Bass) they would they discuss together how that word might still impact conversations between Human Services and the public. This would allow a unified understanding of the language being used.

Next Steps/Deliverables/Comments

(Presented by Ms. Angie Welsh)

Board Chair Ms. Angie Welsh noted the importance of the data shared and how the Wake County Health Disparities Report might be reviewed more thoroughly in the future once edits have been made. She thanked everyone for attending the 2020 Human Services Board Retreat.

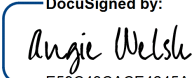
Public Comments

- None

ACTION ITEMS

- The Human Services Board will investigate the change to the Board Operating Procedures regarding the Regional Networks Committee.
- The Human Services Board will review the Wake County Health Disparities Report and submit any feedback or changes to Director Regina Petteway by March 10th.

Board Chair's Signature: _____

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7/9/2020

Date: _____

Respectfully submitted by Ms. Brittany Hunt