# Wake County Human Services Board Meeting Minutes October 22, 2020

**Board Members Present:** Staff Members Present:

Ed Buchan Commissioner Vickie Adamson

John MyhreCaroline HarperDr. John PerryLeah HoldrenAnn RollinsBrittany Hunt

Frank Eagles Commissioner Sig Hutchinson

Stephanie Treadway

Angie Welsh

Commissioner James West

Maiorano

Heather Miranda

McKinley Wooten Ken Murphy
Dr. Nicole Mushonga

Guests Present:Toni PedrozaNonePaige Rosemond

Kim Scott

Dr. Joseph Threadcraft

#### Call to Order

Chair Ms. Angie Welsh called the meeting to order at 7:35 A.M.

## **Approval of Minutes**

Chair Ms. Angie Welsh asked for a motion to approve the September 24<sup>th</sup> meeting minutes. There was a motion by Mr. Frank Eagles and Mr. John Myhre seconded to accept both minutes. The minutes were unanimously approved.

Next Board Meeting – November 19, 2020

## **Treasurers Report**

(Presented by Chair, Ms. Angie Welsh)

Board Chair Ms. Angie Welsh reported that the current balance of the Board fund is \$3,630.92. This reflects both the donation to the foster youth graduating high school and the donation to Child Welfare to better their visitation rooms.

#### **Human Services Board Officers Elections**

(Presented by Mr. Kenneth Murphy)

Mr. Kenneth Murphy, Deputy County Attorney, began by opening the floor for nominations for the Human Services Board Chair. There was one nomination for Dr. John Perry and Mr. Murphy asked if there were any other nominations at this time. There were no other nominations and a move was made to close nominations and it was seconded. Mr. Murphy asked for a vote and Dr. Perry was unanimously voted in as the Human Services Board Chair.

Mr. Murphy then proceeded with the Vice Chair nomination. There was one nomination for Ms. Ann Rollins and Mr. Murphy asked if there were any other nominations at this time. There were no other nominations and a move was made to close nominations and it was seconded. Mr. Murphy asked for a vote and Ms. Rollins was unanimously voted in as the Human Services Board Vice Chair.

Mr. Murphy then proceeded with the Treasurer nomination. There was one nomination for Mr. McKinley Wooten and Mr. Murphy asked if there were any other nominations at this time. There were no other nominations and a move was made to close nominations and it was seconded. Mr. Murphy asked for a vote and Mr. Wooten was unanimously voted in as the Human Services Board Treasurer.

## **Ad Hoc Nominating Committee Update**

(Presented by Vice Chair, Dr. John Perry)

Dr. John Perry, Human Services Board Vice Chair, gave an update on the Ad Hoc Nominating Committee. He thanked Commissioner James West, Commissioner Vickie Adamson, and Ms. Ann Rollins for their collaboration and discussion on the Committee. The Board can have a total of nineteen members with seven of those positions currently vacant. Three additional Board members – Ms. Angie Welsh, Mr. John Myhre, and Ms. Stephanie Treadway – will term out of their positions on November 2020. This will mean that ten positions will be vacant on the Human Services Board.

The Ad Hoc Nominating Committee is identifying prime candidates for these positions and working with current members of the Board, former members of the Board, and local experts in the appropriate sectors. There is a need for diversity – both geographically with members that span the County and with perspectives and insight. This is so the Human Services Board is representative of Wake County citizens. It was acknowledged that this may mean transportation assistance will be needed in order to help members reach meetings. Technology barriers might also need to be addressed.

Mr. McKinley Wooten noted the potential value in a "buddy system" that would link a new Board member with a "veteran" Board member to allow them to ask questions freely and become acclimated to the Board. This would also help ward off intimidation and help the new members feel empowered to have their voices heard. In this respect, Board members also discussed the interview process. Usually, this is done with the full Board and may be intimidating for those attending the meeting for the first time. It was decided that the Committee could interview the potential candidates so that a smaller number of individuals would be

involved. Ultimately, the Wake County Board of Commissioners makes the decision on which members to approve, so the Committee working with candidates is within the Board's guidelines.

# Review of Wake County Human Services Board Operating Procedures – GOV. BRD 100 [Accreditation Benchmark #34.1 and 34.2]

(Presented by Chair, Ms. Angie Welsh)

In light of the requested changes during the September 2020 Human Services Board meeting, two proposed edits were presented to the Board Operating Procedures.

- 1. On page fourteen, formally removed Regional Networks Committee from list of Standing Committees per request to the Board on September 24<sup>th</sup>, 2020
- 2. On page fifteen, added an eighth guideline under the section titled "Public Comment." As follows: "In the event the WCHS (Wake County Human Services) Board meeting convenes virtually, the procedures outlined above should be followed to the best of the ability and discretion of the Board Chair." This was added per request of the Board on September 24<sup>th</sup>, 2020 in response to changes demanded by the COVID-19 pandemic

Board members noted that continued discussion should be given to the process for allowing public comments at the Board meetings. Although it is not common for members of the public to attend Board meetings, an endeavor should be made to make the process easy and accessible to all.

Ms. Angie Welsh noted that the Board members have reviewed the suggested edits and asked for a motion to approve the Board Operating Procedures with the indicated changes. Mr. John Myhre motioned and Mr. Ed Buchan seconded. The Board members voted unanimously to accept and approve the Board Operating Procedures with the edits discussed.

# Review of Wake County Human Services Board Policy on Consumer and Community Input – Board Policy 300 2.3 [Accreditation Benchmark #38.3]

(Presented by Chair, Ms. Angie Welsh)

As with the "Board Operating Procedures," edits were made to the Board Policy on Consumer and Community Input to reflect the changes demanded by the COVID-19 pandemic. The following line was suggested on page four as number eight of Appendix A: "In the event the WCHS (Wake County Human Services) Board meeting convenes virtually, the procedures outlined above should be followed to the best of the ability and discretion of the Board Chair."

Ms. Angie Welsh noted that the Board members have reviewed the suggested edit and asked for a motion to approve the Board Policy on Consumer and Community Input with the indicated change. Dr. John Perry motioned and Mr. Frank Eagles seconded. The Board members voted unanimously to accept and approve the Board Policy on Consumer and Community Input with the edit discussed.

#### **Live Well Wake Presentation and Discussion**

(Presented by Ms. Kimberly Scott)

Ms. Kimberly Scott, Live Well Wake Program Manager, shared an initiative overview with the Human Services Board. Built on the premise that everyone has a right to live well, Live Well Wake is a community-led initiative bringing people together across sectors to find innovative solutions for Wake County's biggest challenges. Live Well Wake combines the Population Health Task Force (PHTF) recommendations with the Community Health Needs Assessment (CHNA) process. Live Well Wake is comprised of seven workgroups. As follows:

## **CHNA Priorities**

- 1. Transportation
- 2. Employment
- 3. Access to Care
- 4. Mental Health/Substance Abuse
- 5. Housing/Homelessness

#### PHTF Focus Areas

- 6. Familiar Faces
- 7. Vulnerable Populations

These seven workgroups have been established to align with identified priority and focus areas. Each appoint two to three individuals to serve as co-chairs. The workgroups convene community stakeholders to develop, implement, and assess Live Well Wake strategic action plans. They also create strategies, including alignment and coordination focused strategy, gap strategy, and policy and practice strategy. The Live Well Wake Advisory Team (LWWAT) is a governing body for Live Well Wake that provides strategic oversight for the initiative, including evaluation, business engagement, municipality engagement, and capacity building and fund support. The LWWAT also oversees the CHNA process, which is conducted every three years. LWWAT was formerly known as the Community Health Assessment Team (CHAT).

There are four overarching initiative strategies for Live Well Wake:

- 1. Ensure multisector strategic *alignment* to improve the population health of Wake County residents
- 2. Advocate for *policies* that aim to expand access to healthcare for all Wake County residents
- 3. Foster an *equitable* culture by promoting the voices, values, and lived experiences of vulnerable populations through programming, policy, practice, and funding
- 4. Identify grants and resources to support Live Well Wake strategy implementation

With the Access to Care workgroup, the desired result is an environment that supports equitable healthy opportunities for all Wake County residents. This will be achieved through the following:

- 1. Advocate for equitable health insurance coverage for all
- 2. Encourage accessibility to healthcare services for all

3. Promote equitable access to healthy lifestyle resources and activities for all

With the Employment workgroup, the desired result is an increased economic security for Wake County's most vulnerable residents. This will be achieved through the following:

- 1. Advocate for hiring policies supportive of "fair-chance" employment for vulnerable populations (e.g. persons with physical and developmental disabilities, previously incarcerated, etc.)
- 2. Advocate for policies that support living wage
- 3. Increase access to local workforce development and skills training initiatives among vulnerable/resilient populations (e.g. Wake Works Apprenticeship Program, Capital Area Workforce Development Program, Jobs for Life, NC Works, EEASI, etc.)
- 4. Conduct community education and outreach campaign to promote resources for Wake County small businesses

With the Housing/Homelessness workgroup, the desired result is that all Wake County residents have equitable access to quality, safe, affordable housing choices. This will be achieved through the following:

- 1. Support implementation of House Wake! COVID-19 response and recovery plan
- 2. Sustain and expand countywide homeless and housing support policies/systems changes expanded through COVID-19 recovery funding streams
- 3. Conduct multiphase community education campaign aiming to disseminate resources, supports, and information related to housing continuum topics like homelessness, emergency shelter, affordable housing options, permanent housing, and permanent supportive housing

With the Mental Health/Substance Abuse workgroup, the desired result is that all Wake County residents will live in caring communities with compassion for and a determination to respond effectively and respectfully to the mental health and substance misuse needs of all citizens. This will be achieved through the following:

- 1. Establish a continuum of care to reduce opioid misuse, use disorder, overdose, and related health consequences
- 2. Conduct education and outreach to combat stigma associated with mental health and substance use problems emphasizing vulnerable populations (youth, racial/ethnic minority groups, and others to be determined)

With the Transportation/Transit workgroup, the desired result is safe, healthy, and equitable transportation options that allow people to thrive with dignity. This will be achieved through the following:

- 1. Encourage equitable transit-oriented development through updated development and zoning regulations to better integrate land use and transportation planning
- 2. Implement equity-centered mobility management strategies
- 3. Continue implementation of Wake County Transit Plan

With the Familiar Faces workgroup, the desired result is improved health and quality of life for frequent users of Wake County behavioral health, homeless, emergency, and law enforcement services. This will be achieved through the following:

- 1. Establish a methodology to identify those Familiar Faces and those at high risk of becoming familiar faces
- 2. Develop data-driven early intervention system to prevent familiar faces and improve services delivery

With the Vulnerable Populations workgroup, no desired result was specified. Strategies outlined were as follows:

- 1. Improve practices and operations of Live Well Wake initiative and partner organizations
- 2. Promote capacity-building opportunities for Live Well Wake partners, constituents, and stakeholders to address equity
- 3. Identify opportunities to support countywide COVID-19 pandemic response and recovery efforts
- 4. Support new and established community initiatives that aim to uplift and support identified vulnerable populations (e.g. Social and Economic Vitality (SEV), Best Baby Zone (BBZ), Aging, GOLD Coalition, etc.)
- 5. Create citizens' council plan to build capacity to transition Live Well Wake to a community led effort

Live Well Wake is now looking forward to implementing new data visualization tools as well as a regular webinar series. Also in the future is the implementation of the Community Health Improvement Plan as well as the 2021 State of the County Health (SOTCH) Report and 2022 Community Health Needs Assessment (CHNA) Planning Report.

# **Public Health Report: Communicable Disease [Accreditation Benchmark #2.4c]** (Presented by Dr. Nicole Mushonga)

Dr. Nicole Mushonga, Associate Medical Director and Epidemiology Program Director, presented the Public Health Report: Communicable Disease to the Board. In diseases preventable by vaccines, there was a decreasing trend from 2015 to 2019. There was a 27% decrease in Haemophilus influenzae cases in Wake County and a 61% decrease in Pertussis cases. Meanwhile the 2019-2020 flu season was reported as milder than it had been in previous years. Vaccine effectiveness was at 45% overall for influenza A and B and even higher for children at 55%. Influenza A was the most predominant strain of the season. Wake County Human Services administered 9,140 vaccine doses – 7,736 to the community and 1,404 to Wake County employees.

Next, Dr. Mushonga reviewed a brief timeline of the COVID-19 pandemic. On December 31<sup>st</sup>, 2019, a cluster of pneumonia cases of unknown etiology were reported in Wuhan City of the Hubei Province of China. Nearly one month later, the World Health Organization (WHO)

declared the novel coronavirus a Public Health Emergency of International Concern (PHEIC). The first case of COVID-19 in Wake County (as well as North Carolina) was reported on March 3<sup>rd</sup>, 2020. Ten days later, WHO would declare COVID-19 a pandemic. By April 28<sup>th</sup>, the United States had reported one million cases of COVID-19. As of September 25<sup>th</sup>, there were over seven million cases in the United States.

There was also a 48% overall increase in foodborne diseases from 2015 to 2019. With sexually transmitted infections (STIs), HIV and AIDS cases and rates remained stable in that same time period. Gonorrhea and chlamydia cases showed a slight increase. There was a 23% increase in early syphilis cases from 2018 to 2019 after remaining stable from 2015 to 2018.

In 2019, there were 24 tuberculosis (TB) cases in Wake County. These cases were represented by the following demographics:

• Cases aged 30-39: 29%

• Cases born outside the United States: 79%

• Cases with Hispanic ethnicity: 38%

• Cases among males: 75%

• Cases of pulmonary TB: 75%

In response to these figures, Wake County's Immunization Tracking Team has seen 741 clients with medical home at Wake County Human Services. The Immunization Tracking Team ensures children and adults in wake County are age-appropriately immunized. Those 741 clients exceeded the North Carolina statewide average in all categories. The HIV/STD Community Program was the recipient of the North Carolina AIDS Action Network 2019 Local Health Department of the Year Award. This award recognizes Wake County Human Services' work to prevent HIV transmission and supports people living with HIV.

Ms. Angie Welsh noted that the Human Services Board had received the report. Mr. John Myhre made a motion to accept the report and Ms. Ann Rollins seconded. The report was unanimously accepted.

## **Committee Chairs Update**

(Presented by Mr. John Myhre, Ms. Angie Welsh, and Mr. Frank Eagles)

Mr. John Myhre briefly shared details from the recent Public Health Committee and thanked Mr. Paul Koh, Assistant Superintendent of Student Support Services in the Wake County Public School System, for providing the Committee with an update. This will become a regular part of the Committee's meetings as they attempt to more fully address public health across the County.

Ms. Angie Welsh noted that the previous Social Services Committee was the last meeting for Dr. Randy Marsh. Since Dr. Marsh was Chair of the Committee, Mr. Derrick Byrd would be

stepping in to lead the November meeting. Once the Board Officers had been sworn in for the Human Services Board, a Chair for the Social Services Committee would need to be identified.

Mr. Frank Eagles provided a detailed report from the Regional Networks Committee. The Millbrook/Departure Human Services Center staff and Community Advocacy Committee (CAC) members participated in a "Back to School" community event to promote the Human Services Center's new address and future services. The Western Human Services Center CAC Chair participated in two televised interviews – one airing on BBC and another on WRAL – to highlight the Center's Food Security Action Group's Collective Impact. This had served 155,000 hot meals to children, nine tons of produce, and more than 25,000 prepared donated meals to adults. The Western Human Services Center also partnered with the Wake County Food Security team to host four "hubs" and sixteen neighborhood food and resource access sites. Census, voting, and Wake housing materials were distributed at these sites. Each town in the region was able to partner with the Center to distribute over 12,000 masks.

The Southern Regional Center (SRC) in Fuquay-Varina hosted a drive-thru hiring event with Manpower, which hired employees on behalf of John Deere. Advance Community Health also began weekly COVID-19 testing at the SRC in September. Since it re-opened on August 24<sup>th</sup>, the SRC Administration and Operations team has provided limited lobby services to nearly seven hundred residents. The Eastern Regional Center (ERC) in Zebulon is also open and has served 1,000 patients since June in its Clinic Services. Early voting also took place at the ERC while staff work with the Social and Economic Vitality (SEV) program to distribute bulk quantities of masks and hand sanitizers to local partners.

At the Crosby Garfield Center (CGC), the SEV program hosted a three-day virtual community day event from October 16<sup>th</sup> to October 18<sup>th</sup>. This event featured twelve community-based resource presentations, a youth entrepreneurship panel, minority-owned businesses, and drive-thru brake and brunch resource distribution. In collaboration with WakeMed and the City of Raleigh, SEV also plans to facilitate a larger mask distribution effort. Already 70,000 masks have been distributed since June 2020. There was a recent donation of 250,000 masks and bottles of hand sanitizer from the Bank of America, Wells Fargo, and Blue Cross Blue Shield. The Crosby Advocacy Group continues to meet monthly, albeit virtually. The September meeting focused on workforce development.

Finally, the Northern Regional Center (NRC) continues to partner with Wake County Public Schools to serve meals via a drive-thru system. In September, over 3,000 lunches and 3,000 breakfasts were served. Several NRC CAC members are co-leads of the Northern Community Food Security Team (NCFST). The group expanded to include the Rolesville Food Security Team. The group was awarded \$65,229 in CARES Act funding to serve as a food "hub" for northern communities in the County.

## **Environmental Services Director's Report**

(Presented by Dr. Joseph Threadcraft)

Dr. Joseph Threadcraft, Environmental Services Director, shared details about the Permit Improvement Committee. This subcommittee will focus on the customer satisfaction when community members apply for a wastewater permit, particularly as it relates to construction.

When an applicant applies for a building permit, their wait time should ideally be seven to ten business days for approval or disapproval. The goal of the subcommittee is to de-couple the building application from the wastewater application. Oftentimes a sceptic permit takes much longer to process. Environmental Services want to educate builders and developers on this option and include them in the subcommittee in order to gain their feedback and insight. The Permit Improvement Committee will meet on a weekly basis for approximately four to six weeks and includes Public Health Committee members Dr. Barbara Ann Hughes and Dr. Sharon Foster as well as Board members Mr. John Myhre and Ms. Ann Rollins (as alternate).

## **Human Services Director's Report**

(Presented by Ms. Toni Pedroza, Ms. Paige Rosemond, Dr. Nicole Mushonga, Mr. Christopher Kippes, and Ms. Heather Miranda)

Ms. Toni Pedroza, Deputy Director of Social Services, provided a brief update about the Human Services Director search. Candidates were still being reviewed after October's assessment centers and the County Manager's Office would be narrowing down the applicants to the final choice.

Ms. Pedroza also shared that WakeHELPS, a utility bill payment assistance program, had been extended through December 2020. This program is funded by the CARES Act and helps households impacted by COVID-19 pay back what they owe to their utility providers. Additional information may be found at <a href="https://covid19.wakegov.com/wakehelps/">https://covid19.wakegov.com/wakehelps/</a>

COVID-19 has also had a severe impact on schoolchildren, particularly in their access to resources to "attend" virtual school. The County is working to ensure all children have remote access through the help of community partners. Further resources attempt to assist when (a) parent(s) and/or guardian(s) have trouble finding adequate childcare and assistance for their children attending school virtually. The goal, of course, is to bring all schoolchildren back into the classroom and transitions are beginning to happen. But the number one priority is safety and the assurance that precautions for the pandemic have been taken into account.

On Saturday, December 12<sup>th</sup>, NC MedAssist will be holding a drive-thru event giving free over-the-counter medicine to people with no insurance. This will take place at the Southeast Raleigh YMCA (1436 Rock Quarry Road, Raleigh, NC 27610). Items will include medication for colds, coughs, flu, pain relief, and vitamins. Children's medication will also be available.

Ms. Paige Rosemond, Child Welfare Division Director, shared that the number of Child Welfare cases had increased and was its highest in September 2020. Thirty-seven children had been removed, likely exacerbated by the stress and challenges of COVID-19. The last time this figure was this high in one month was back in 2015. There is also an ongoing need and push for advocacy for youth with complex developmental and mental needs. There are not enough suitable placements for these youth and staff struggle to keep up with the demands for assistance.

Dr. Nicole Mushonga provided a brief update about the COVID-19 numbers. So far, Wake County has had over 20,000 cases with 267 confirmed deaths due to COVID-19. North Carolina as a state has had 250,592 cases. There is concern that the approaching holiday seasons could cause an increase in cases due to people gathering in enclosed spaces. Next, Mr. Christopher

Kippes, Public Health Division Director, shared that COVID-19 Mass Testing would be making a move to a fixed site at the Millbrook/Departure Human Services Center. Moving from Sunnybrook to Millbrook/Departure will allow testing room to grow when the transition is made to vaccinations as a priority. At the end of September 2020, the Emergency Operations Center (EOC) was progressed out into a programmatic COVID-19 response. Over 120 positions were hired with six being permanent to allow County staff once working in the EOC to return to their "normal" jobs.

Ms. Heather Miranda, Clinical Operations Director, briefly noted how COVID-19 had increased the impact on the Special Supplemental Nutrition Program for Women, Infants and Children (WIC). There was discussion about how the County would respond to the community's needs post-COVID-19 and the importance of considering the vulnerable populations so heavily impacted by the pandemic.

## **Public Comments**

None

## Adjournment

The meeting was adjourned at 9:45 A.M.

Respectfully submitted by Ms. Brittany Hunt

Board Chair's Signature: Ongie C. Welsh