

**Wake County Health and Human Services Board
Meeting Minutes
December 19th, 2024**

Board Members Present:

Lily Chen
Dr. Ojinga Harrison
Maty Ferrer Hoppmann
Christine Kushner
Trey McBrayer
Terry McTernan
Dr. Jananne O'Connell
Ann Rollins
Commissioner Cheryl Stallings
Tanyetta Sutton
Birchie Warren

Guests Present:

Deidre McCullers

Staff Members Present:

Jennifer Brown
Sheila Donaldson
Odile Fredericks
Ann Godwin
Barbra Gonzalez
Anika Hamilton
Kevin Harrell
Evan Kane
Rebecca Kaufman
Lee Little
Dr. Joel Lutterman
Annemarie Maiorano
Jenelle Mayer
Ken Murphy
Shanta Nowell
Tina Payton
Antonia Pedroza
Mike Ranck
Kathryn Thompson
Lechelle Wardell
Dana Webb-Randall
Rochelle Whitaker

Call to Order

Chair Ms. Ann Rollins called the meeting to order at 7:33 a.m.

Next Board Meeting – January 23rd, 2025

Approval of Minutes

Ms. Ann Rollins asked for a motion to approve the November 21st, 2024 Board meeting minutes with two edits: Correcting the date of the meeting at the top of the first page (from October to November) and including Mr. Terry McTernan who was erroneously omitted from attendance.

There was a motion by Ms. Christine Kushner to approve the minutes with the recommended changes. Ms. Maty Ferrer Hoppmann seconded. The amended minutes were unanimously approved.

Mr. Ken Murphy (Senior Deputy County Attorney) reminded Board members that the January 2025 Health and Human Services Board meeting would have a full Board discussion and decision on the recent denial of a septic permit by Wake County Health and Human Services. This appeal hearing (with a three-member panel of the Board's members) occurred in early October but the full Board's review was delayed by request of the appellant to January. At the time, the appellant was anticipated to present an oral argument during the meeting. Wake County Health and Human Services and the appellant alike

would both have the same amount of time to present their case (notably without any new evidence submitted). The full Board would then approve the decision made by the three-member panel or reverse it.

When asked if the appeal decision would be made during the actual meeting or afterwards, Mr. Murphy clarified that the discussion and decision would all take place during the regularly scheduled January 23rd Board meeting. If the denial is upheld, the appellant could then take the case to superior court.

Each side will receive twenty minutes to present their argument. It was asked if questions to the appellant or Wake County staff were included in the twenty minutes or in addition to it. Mr. Murphy stated that questions should be incorporated within the twenty minutes but that most did not use the full twenty minutes and it was likely that it would be more than enough time for argument and questions. When asked how Board members can best prepare for the discussion, Mr. Murphy said that the January agenda packet would contain the written decision that the appeal panel came up with including findings of fact, conclusion of law, and exhibits.

Treasurer's Report

Mr. Terry McTernan, Treasurer, provided the Treasurer's Report. In November, the fund was reported as \$9,767.95. Since that report, there had been a \$200 donation to the American Red Cross in memory of Commissioner Vickie Adamson's husband. Thus, the Board's fund was now at \$9,567.95.

Groundwater Rule Revisions Presentation

(Presented by Mr. Mike Ranck)

Mr. Mike Ranck (Environmental Health Program Manager – Groundwater) presented proposed groundwater rule revisions.

During the July 2024 Public Health Committee meeting and subsequent August 2024 Health and Human Services Board meeting, Mr. Kane presented some recent actions at the State level affecting a portion of the Wake County local environmental health rules. Specifically, this includes a position statement from NCDHHS regarding additional county responsibilities if local rules are retained, and recent significant revisions to state wastewater rules. After reviewing these State actions, staff recommended to retain local rules that were affected but to proceed with revisions to each area. The areas of rules affected include wells, onsite wastewater, and pools.

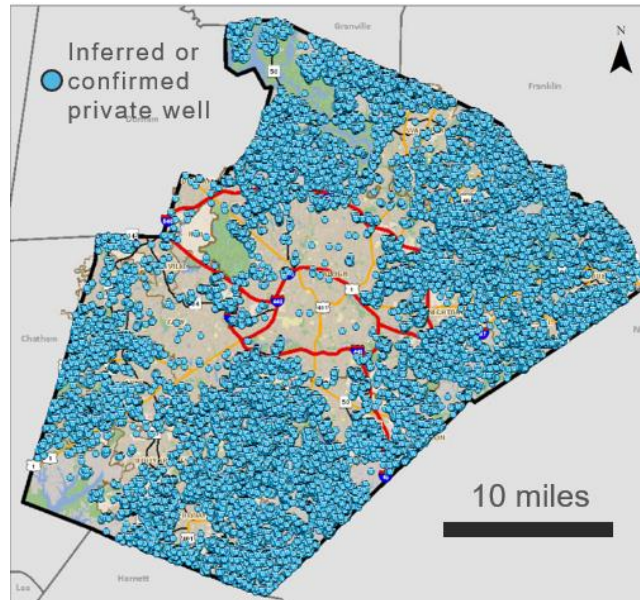
With respect to wells, Mr. Kane presented that a rapid revision would be expedited to add local authority to approve variances to well constructions rules, as the current rule defers to the State to approve variances. This is one of the areas where additional county responsibilities are needed with the presence of local rules. Staff will also initiate a broader review of the well rules over the next few months. A quick update regarding the other environmental health program areas was provided. The onsite wastewater rules are currently undergoing final review by internal staff and pending a review by the North Carolina Department of Health and Human Services (NC DHHS) before proceeding to external stakeholder review this winter.

For this meeting, Mr. Ranck was presenting a recommendation on the first change: The quick revision to well rules to grant local authority to approval or deny well variance requests. First, a timeline was presented:

- July 2024: Public Health Committee recommended moving presentation to Health and Human Services Board

- August 2024: Health and Human Services Board approved proceeding to rule revision process
- Fall 2024: Stakeholder engagement, draft revisions
- Fall 2024 and on: Public Health Committee receive revised rules and refer to Health and Human Services Board, Health and Human Services Board public notice and adoption

Next was a high-level overview and background of the well program in Wake County.



There are an estimated 40,000 private water supply wells in Wake County that provide the water supply to approximately 10% of the county population. This is not a static number—about 300 new wells are installed each year as new homes continue to expand into unincorporated areas where municipal water service is not available. Wells are frequently hidden in plain sight not just in rural areas, but also suburban neighborhoods in unincorporated areas of the county.

Due to the large number of private supply wells and significant population dependent on the protection of the wells and groundwater resources, Wake County was one of the first counties in the state to have a county well permitting program. Wake County Health and Human Services implements the rules governing well construction and groundwater protection in Wake County. The county well permitting program was started in 1987 and finally, in 2008, state law required that every local health department in the state institute minimum requirements similar to many of County rules that already existed. Wake County rules were last revised in 2019.

For most wells, current permitting requirements include a review of site plans and proposed well locations to ensure compliance with setbacks and well construction rules, a grout inspection to verify that the well casing has been properly sealed to prevent contamination from entering the well from the surface or shallow groundwater, and, once the well is complete, testing of the well water for bacteria, inorganic chemicals – things like lead, arsenic, iron, fluoride, and nitrate, and naturally occurring radiological contaminants or other man-made contaminants in areas where those things are suspected. Finally, a certificate of occupancy for a new house is dependent upon acceptable sampling results, or installation of water treatment systems and subsequent confirmatory testing if needed.

To protect private water supply wells and the groundwater resource, numerous setbacks are specified in both state and local well construction rules. When approving the siting of a well on a property, there are

numerous setbacks specified in both state and local rules in order to protect both the water supply wells and the groundwater resource. These setbacks include things such as:

- Septic tank and drainfield
- Wastewater lateral lines
- Building perimeters
- Underground storage tanks
- Other potential sources of contamination
- Property boundaries
- Other wells

From time to time, due to a variety of reasons that may include property size, shape of the property, drilling challenges or other various reasons, it is not possible to meet every setback. For these situations, state rules specify two criteria that must be met to approve a well construction variance: The use of the well will not endanger human health and welfare or the groundwaters; and construction in accordance with regulations is not technically feasible in such a manner as to afford a reasonable water supply at a reasonable cost.

There are two goals with these rule revisions: Grant authority to Wake County to approve or deny well variance requests; and update organizational references to reflect current organization. Mr. Ranck then reviewed the steps that had been completed thus far:

- Detailed review of current state rules and comparable local rules at peer counties (Mecklenburg, Person, Johnston, Chatham, Orange)
- Received input from stakeholders including:
 - Home Builders Association of Raleigh
 - Wake County Well Contractor
 - Private Well Owner, Wake County Water Partnership Member
- Received additional feedback from
 - NC DHHS
 - County Attorney's Office
- Proposed rule revision:
 - Replace existing local well variance rule which currently references existing state rules and retains authority to approve well variances at the state level
 - Local Health Director or designee has authority to grant a variance from well construction rules
 - Submittal of variance request in writing using state forms (required by General Statute (G.S.) 87-97)
 - Criteria to approve or deny variance request commensurate with existing state rules
 - Local Health Director or designee must respond in writing in same timeframe (30 days) as required in state rules
 - New definition: Local Health Director
 - Updated references to reflect current organizational structure

Next steps in the well rules revision will include discussion with ample chance for feedback as well as public comment at the Health and Human Services Board's December meeting.

Ms. Christine Kushner asked what setbacks other than variance were considered. Mr. Ranck explained that setbacks would be the only consideration. This would be something an applicant should be looking

for prior to installing the well. While there is no specification on the depth needed for installing a well (with only a minimum depth), the well would have to be placed far enough to reach the water supply.

There was a clarifying question of who the “local health director” referenced was and it was stated to be Ms. Rebecca Kaufman (Health Director). She oversees these cases with guidance from the County Attorney’s office. Mr. Ken Murphy (Senior Deputy County Attorney) added that the rules dictated subject matter experts (SMEs) to consider variance requests as they were submitted. These SMEs would be in onsite wastewater and groundwater protection. After their evaluation, these SMEs would consult with Ms. Kaufman and, based on this consultation, the variance request would be approve or denied.

Ms. Kushner asked if the 300 new wells each year included irrigation wells and it was confirmed that they were counted in this figure as they are technically a water supply well. Most of the rules reviewed today would also apply to an irrigation well. Some rules may be more relaxed in regards to irrigation wells as they would not be certified as being connected to a house. But best practices would still be followed to protect the well and groundwater resource.

When asked if there were rules for when wells were decommissioned, Mr. Ranck confirmed that there were. This process is termed “well abandonment” and is part of a State rule. The rule is in place to protect groundwater resources and dictates what kind of professionals can formally abandon a well as well as the process of the abandonment. Essentially, the well is filled with concrete, but there is such a way that professionals are trained to conduct to ensure there are no issues moving forward. The local health department approves well abandonments and conducts them at no charge with an inspection done to ensure proper abandonment. The process, on the whole, is a rather quick one once initiated.

Dr. Jananne O’Connell inquired about the uranium and radon found in eastern Wake County well water and if variance requests had any bearing on these contaminants. Mr. Ranck stated that the reference to variance is slim, but the State does require notification concerning testing for certain contaminants. But the interaction would be limited to the notification. When asked about the public service campaign focused around the uranium and radon in eastern Wake County, it was recalled that this effort began just prior to COVID-19 with the pandemic impacting the full impact. The department now wanted to review and reengage with the community as a part of a separate, much larger stakeholder process.

Ms. Kaufman asked staff to comment further on the 2019 campaign (while noting that it strayed from the focus of setback variances). Mr. Evan Kane (Onsite Water Protection Director) explained that the awareness campaign was issued about naturally occurring uranium and radon primarily in the eastern half of the county. Direct mailers were sent to 19,000 households. Community meetings were held with a man focus to encourage residents to test for these particular contaminants. Because of the sheer volume of the impacted area, those who did test were directed to private labs unless they met income qualifications to receive free or reduced priced testing through a county lab. Staff reached out to private labs to inquire about the customers received during that timeframe and approximately 1,300 households (a response rate of less than 7%) got the recommended testing. This means that the issue is still very much present with one in five wells in the area having issues with uranium, radon, or both. Staff continue to provide regular education efforts with realtors and homeowners and have published information on the County website (<https://www.wake.gov/departments-government/onsite-water-protection/groundwater-protection-and-wells/well-water-testing/naturally-occurring-contamination>). Staff are also engaged with partners in conversations on how the County can best deal with the issue.

Mr. Terry McTernan asked if there were any regulations for when a home changes ownership for an opportunity to test wells that may have been missed. Mr. Kane explained that there was some opportunity and that education to realtors had been provided. Of note, many were note familiar with exactly what contaminants needed to be tested or, conversely, what a general test searched for and what it did not. The

only regulation in North Carolina is with the sale of an existing home that had already been occupied being required to issue a real estate disclosure. There was a recently added requirement asking if the well had been tested prompting sellers to provide those results. However, admittedly, this was essentially voluntary. Because of this, there was no guarantee that the results would be shared with the new owner.

Ms. Tanyetta Sutton asked how the campaign was conducted and if it was done in multiple languages. The mailers were in both English and Spanish and, as mentioned above, were sent to 19,000 addresses in eastern Wake County. Staff did send mailers to the address of the homeowner on file if the address was different from the location address. There were also television interviews and radio interviews conducted. Unfortunately, presentations were still ongoing even up to February of 2020, right before the onset and global shutdown brought on by the COVID-19 pandemic.

Ms. Maty Ferrer Hoppmann noted that the News & Observer – an English newspaper popular in the area – was informed and asked if the campaign extended to Spanish newspapers as these were often referenced by the community for resources. The campaign admittedly limited newspaper notification to the News & Observer but staff were grateful for the suggestion and would keep this in mind for future efforts with the awareness campaign.

Ms. Ann Rollins asked if this campaign was something that the Health and Human Services Board could assist with as far as educating residents or helping refine processes and outreach. Staff shared that there was abundant opportunity for the Board to give feedback on regulatory aspects of the issue as well as technical assistance with policies, planning, and so forth. There is quite a bit of water quality data taken from wells in Wake County that is taken into account with regulatory revisions. The intention is to bring a great deal of information before the Board in a consumable manner in order to receive as much stakeholder input as possible. Ms. Rollins thanked staff and noted that there were often ample opportunities for Board participation as well as Committee participation from the Public Health Committee with taskforces and other efforts from staff.

Ms. Toni Pedroza (Senior Deputy Director of Health and Human Services) added that part of the lack of response was likely related to the cost of remediation as there was no public source of funding to address the issues if found. Ms. Ferrer Hoppmann asked how much it would cost to fix issues with uranium or radon. Mr. Kane explained that the cost ranged dependent on the level of and specific contaminants found. The cost could be \$1,000 to \$1,500 on the low end to install a reverse osmosis cartridge under the kitchen sink to treat the water there (i.e., ONLY the water from the kitchen sink would be addressed, not throughout the rest of the house). On the high end, it could be \$15,000 to install a treatment system to treat all of the water used throughout the home.

Ms. Sutton reminded attendees that many in the community were distrustful of government entities and involvement, likely leading to at least part of the lack in response. Partnering with a community leader to help reach out to people could help instill a sense of trust and reliability. Without that community leader – a trusted and validated voice – the message would continue to get lost.

Mr. Birchie Warren inquired about the safety of usual water systems where radon and uranium were concerned. Mr. Kane said that the contaminant source is exclusively from groundwater. Most Wake County residents get their water supply from Falls Lake, Jordan Lake, or other surface reservoirs. The City of Raleigh serves multiple municipalities with Falls Lake while Jordan Lake serves the Town of Cary and western Wake County. Surface water supplies do not have this problem as other community water supplies (such as Aqua) use wells as water supplies regulated as community water systems. These systems are regulated under the Safe Drinking Water Act. This Act mandates an assessment for radiological contaminants with periodic testing based on an initial assessment.

Mr. Warren also inquired about the acceptable level of uranium in water. Mr. Kane noted that the uranium standard is 30 milligrams per liter. This standard is not set based on radioactivity but instead uranium's behavior as a heavy metal interfering with kidney function. This is but one measurement as the County also uses the gross alpha level in their formal testing requirements. This is measured in picoCuries per liter (pCi/L) and the level set by the Environmental Protection Agency (EPA) is 15 pCi/L.

Ms. Sutton asked what a person would do if they were exposed to uranium or radon. Mr. Kane stated that the first step would be providing the person guidance on the use of water and alternatives available. Alternatives may be as simple as bottled water in the interim until the issue is addressed or looking for availability to connect into a public water supply. Staff would then advise the person on their options for a treatment system. The person would want to seek treatment from their doctor as the water and contamination represent only one factor of health that would need to be considered for proper medical treatment.

Ms. Rollins asked if staff were reviewing a variance and there was a Stated determined setback range if the setbacks would be such that the denial would mean that the person(s) could no longer live at the residence due to lacking a water source. Mr. Ranck stated that this would be extremely rare. While not every setback may be able to be met or mitigated, staff were trained to prioritize those that were the most important to address. Septic tank and drain field issues were of top priority given the dire importance of them working for the health of the well and residence.

There was a discussion around legal ramifications with entities or individuals competing for a water source. Mr. Murphy stated that there was a well interference ordinance that used to go to the Planning Board. Mr. Kane stated that the Health and Human Services Board had a set of regulations for well interference investigation. This is on the agenda to review in terms of effectiveness and authority of regulation. The legal ramifications mentioned were likely from a particular incident in North Raleigh years before with a number of private wells and community wells competing for resources during a time of severe drought.

Mr. Terry McTernan asked if this was a State requirement extended to all counties in North Carolina. Mr. Ranck confirmed that it was applied to all one hundred counties in the state. When asked if the State was pleased with the proposed rule revisions, it was confirmed that staff had sent the revisions in for review with one adjustment already made from the State's comments. The State rule leaves authority at the State level with counties asked to refer back to that rule. Most counties have already done this.

Board members commended staff on their research, their outreach efforts, and their explanations of the rules revisions.

Mr. Terry McTernan made a motion to approve the proposed revisions. Ms. Christine Kushner seconded the motion. The motion was unanimously passed.

Health and Human Services Director's Update

(Presented by Ms. Rebecca Kaufman and Ms. Toni Pedroza)

Ms. Rebecca Kaufman (Health Director) provided the following updates.

- The County held a World AIDS Day event with the Board's own Mr. Trey McBrayer in attendance. The event was a success with many partners in attendance to provide resources and a fun, engaging celebration to the public and impacted patients and survivors alike.
- The Maternal and Child Health unit was now looking at reviewing the home nurse visiting program. The unit has a close relationship with WakeMed but is looking to expand its reach to

include other hospital systems. Rex, in particular, has been extremely interested in what staff can provide to birthing parents and new babies.

- In addition to the above, there were several pilot programs ongoing to look at maternal and infant mortality.
- There were upcoming budget requests that would be shared with the Board as budget season approached. The two largest of note were for an Electronic Medical Records (EMR) system and new technology that will be required for moving into the new Public Health building at the end of 2025. Many meetings discussing not only the budget requests but the upcoming move were being held. The technology, in particular, was of interest as staff had toured a WakeMed Wake Forest facility earlier in the month that shared many features with the newly designed Public Health building. This helped breathe life into the sometimes flat blueprints being received. Staff asked if they could do another tour as more and more staff were eager to physically see what the new building could be. Graciously, the facility agreed. Staff are extremely excited and there was a great deal of hope and optimism about the upcoming move.

Ms. Ann Rollins noted that out in the western United States, there had been cases of avian flu. When asked if Wake County had seen any cases, Ms. Kaufman stated that no recorded cases had appeared as of yet. However, staff are always monitoring these cases and will update if and when those cases are reported.

Commissioner Cheryl Stallings asked Ms. Kaufman to provide an update on addressing the outcomes and disparities with Black and Brown mothers. Ms. Kaufman responded that 2024 had been an extremely exciting year for the Maternal and Child Health unit thanks to the new leadership of Ms. Dauline Singletary (Maternal & Child Health Section Manager). Ms. Singletary had a true passion for maternal and child health that shone through in all her work and leadership in the unit. Of note, the unit's previous Improving Community Outcomes for Maternal and Child Health (ICO4MCH) was being rebranded as "Best Baby Wake." Best Baby Wake has focus areas with breastfeeding, parenting, and, recently added, doula services. Staff are working to develop policies and procedures surrounding these efforts.

WakeMed had provided feedback on how doulas can best support birthing parents during and with birth. Best Baby Wake will allow the County to hire doulas through a temp agency thanks to grant funding. There is also a partnership with the American Heart Association that allows staff to disseminate blood pressure cuffs to pregnant women to monitor their blood pressure. This was an exciting pilot as data was gathered that could then be studied. As mentioned previously, home visiting services were being expanded.

Staff will also be reviewing the Infant Mortality Report developed four years prior. Mr. Kevin Harrell (Preventive Health Director) and Ms. Kaufman were working with Commissioner Shinica Thomas in order to establish a group to look into the report. Admittedly, the report lost a lot of progress due to the onset of the COVID-19 pandemic. However, staff were still encouraged by all the success that was achieved despite the global shutdown. One change that will be occurring is adding maternal mortality into the report, not just infant mortality as it is a disservice to birthing parents to look only at the infants. All of this will be happening in 2025 and beyond. Ms. Kaufman commended the leadership of both Mr. Harrell and Ms. Singletary with looking at innovative ways to address maternal and infant mortalities while investigating other counties' efforts. Doula services, notably, were one area the County hoped to elevate and replicate other counties' successes in supporting birthing parents and newborns.

When asked how long the Best Baby Wake grant lasted, it was shared that the grant lasted for two years. Though the County was on the second round of two-year funding, staff would be reapplying for the funding at the end of the grant cycle. The funds are promoted through the North Carolina Department of Health and Human Services (NCDHHS).

Ms. Sutton asked if there were opportunities for interested members of the community to seek training through Wake County Health and Human Services (most notably with a peer-to-peer lens). Staff explained that the grant allows workers to identify and train doulas who provide prenatal, labor and delivery, and postpartum support services. But the training was not open to the public. The biggest reason for this was that some doulas had overstepped their supportive roles to come into conflict with medical recommendations from the doctors providing care to the parents and newborns. By the County contracting with a private agency that the doulas work through, this ensures accountability on all sides. Ms. Kaufman added that if anyone in the community was interested in becoming a doula, they were encouraged to reach out to Ms. Singletary or Mr. Harrell to be considered or connected with the proper resources. Staff want members of the community who can provide their own personal insight to the parents and children served.

Ms. Lily Chen inquired about the number of people served through the Maternal and Child Health unit. With the blood pressure cuff dissemination, there is an initial agreement for fifty blood pressure monitors. However, staff can request more monitors if needed. Elsewhere in the unit, there are roughly forty home visitors between Nurses and Social Workers – each with their own caseloads for clients receiving visits. With multiple high-risk pregnancies occurring at any given time, these home visits are crucial. Additionally, thanks to data analytics, staff were able to review overlaps in mapping of processes between Public Health and Child Welfare. This gives the benefit of staff being able to refer clients to resources for a holistic care approach. Ms. Chen thanked staff for now expanding the doula services and encouraged more peer supports in the community.

Mr. Harrell added that staff had been working with the Black Pearl Society. Its 2024 Black Maternal and Child Health Conference had been held in Durham County. However, in 2025, the third annual statewide conference would be coming to Wake County. Staff were excited and Board members expressed interest in helping promote this event.

Ms. Rollins spoke to her representation of the Board on the North Carolina Child Fatality Taskforce. She uplifted Ms. Shanta Nowell (Child Welfare Assistant Division Director) who served on the Taskforce as well. There was a discussion around the continued need for outreach surrounding safe sleep practices. A lack of these practices is regularly brought up during Taskforce meetings and the need remains to educate not only the birthing parent but all connections involved in the child's life. Ms. Toni Pedroza (Senior Deputy Director of Health and Human Services) commented on outreach efforts including the crib, playpen, and other options being given to those in need of safe sleeping locations for their newborns. However, even in spite of these efforts, children in these homes still find themselves at risk when nights are long, the children inconsolable, and the parents desperate for sleep for their children as well as themselves. Ms. Sutton commented on the generational norm that sleeping with a child in the bed could be. Between survivorship bias and general exhaustion, the stakes were simply too great to children passing from preventable circumstances. There was a call to conduct outreach efforts while also addressing the systemic issues that promote such behavior.

Ms. Toni Pedroza (Senior Deputy Director of Health and Human Services) reported on the following.

- The leadership of Health and Human Services (HHS) had completed a business plan and presented it to the County Manager's Office and Business Office. This would be brought to the Board in the new year and may be part of the revisions for the upcoming budget process. Essentially, the business plan is for all intents and purposes the strategic plan of HHS that feeds into the County's overall strategic plan. Many identified areas of focus had been developed and would be worked on in the coming years.
- This week, Food and Nutrition Services (FNS) reached 94% timeliness. The State standard is 95% timeliness. Ms. Pedroza stated that, in terms of transparency, these percentages could

fluctuate with the holidays. However, overall, the timeliness rates were going in the right direction.

- Staff welcomed Ms. Stantavia Wright (Food & Nutrition Services Assistant Division Director) to FNS. Ms. Wright had been working closely with staff and was commended for jumping directly into work.
- For Medicaid applications, staff were going on five years (including with the onset of the COVID-19 pandemic) where timeliness standards have been met (as outlined by the State). Recertifications, unfortunately, have not met timeliness standards due to extenuating circumstances. During COVID-19, anyone who applied for Medicaid, on the whole, was likely eligible even if only for family planning to ensure access to treatment. During the three-year period of the public health emergency (PHE) of the pandemic, staff were not able to terminate a Medicaid plan. Because of this, caseloads grew and grew.
 - While the highest number of recertifications prior to COVID-19 per month were around 8,000 to 9,000. Now recertifications commonly reach 14,000 in any given month. While this will even out, the process will take time.
 - Having said this, Ms. Pedroza acknowledged that the intake would likely never lower to the pre-COVID figures, just less than 14,000 per month.
 - As an example of this, Ms. Pedroza gave a hypothetical scenario where one month 10,000 of the 14,000 recertifications are processed. The following month, staff will have the remaining 4,000 added to their total meaning instead of 14,000 recertifications, there will be 18,000 to complete. The cycle continues until the numbers begin to drop naturally.
 - Ms. Pedroza acknowledged Ms. Kathryn Thompson (Economic Benefits Assistant Division Director) who now had six or seven teams working on a pilot model of staff focusing on applications through recertifications. This helps improve casework and management plans as staff can work more closely with the families. This has been a huge and positive shift for staff as many had felt so bogged down by caseloads as to feel like they were solely focused on data entry rather than being caseworkers. Because of this, it has been a great change for morale.
 - Notably, recertifications for Medicaid happen annually. Recertifications for FNS occur every six months.
- Staff were extremely excited to welcome and introduce Mr. Lee Little, the new Adult and Family Services Assistant Division Director. Mr. Little joins Wake County having previously worked at Durham County with a great deal of experience both with services and in leadership.
- In Child Care Subsidy, the waitlist now has over 1,000 families. This elongated waiting is a clear stressor on families in the community. Despite the waitlist status, there are some priority groups (such as children at risk of coming into custody, those who are homeless, those whose parents are receiving Temporary Assistance for Needy Families (TANF) for Work First) that are still being served. This includes the roughly 500 families raising children that are not their own (whether their grandchildren or nieces or nephews). This is allowed through funds the State allocates specifically for those who cannot be placed on the waitlist.
- Unfortunately, there will be a decrease in energy funds in 2025 with the State already announcing a \$50 million decrease from the 2024 funds. All energy funds except for Low Income Energy Assistance Program (LIEAP) monies have been exhausted for 2024. Of note, LIEAP was harder to qualify for when compared to other energy programs. Because of this, the need for energy assistance is only anticipated to grow.
 - Warmth for Wake, a solely donation-based program, is struggling in 2024. Ms. Annemarie Maiorano (Deputy Director of Operations) shared that in 2023, Warmth for Wake had an excess of \$20,000 in donated funds. In 2024, this had dwindled to \$3,000. Because of this, staff were working on marketing and were informing the Social Services

Committee of opportunities to host a heater drive. Communications is actively engaged with Warmth for Wake staff to hopefully turn the tide of donations as the need exists year round when considering for extreme cold and hot temperatures alike.

- The need for energy assistance has grown so great that even the Wake County Emergency Assistance (WCEA) funds set aside by the County in the amount of \$900,000 has been all but exhausted. There is now only a few thousand dollars left. The need – and simultaneous struggle from COVID-19 that many have not been able to recover from – is indeed dire.
- Adult Protective Services (APS) reports are going up. During this time of year for reasons unknown, reports in both APS and Child Welfare (CW) tend to rise. However, for APS, these reports having been increasing steadily all year long.
 - The Special Assistance In Home (SAIH) program cases are also increasing. As a reminder, the SAIH is a Medicaid program that provides actual dollars to assist aging people to age in their homes. If someone is eligible for Medicaid, they are also eligible for SAIH. Years ago, prior to the COVID-19 pandemic, there was, at times, a waitlist for SAIH. However, in July of 2023, there was a mandate for counties to serve anyone who is eligible. Because it is a Medicaid program, Medicaid pays for half of the positions while the County incurs the second half of the cost.
 - Commissioner Cheryl Stallings asked what types of services SAIH provided. Ms. Pedroza stated that most Medicaid programs provided assistance for individuals that was very much client-driven insofar as seeking out a doctor or other services. For SAIH, staff work directly with the clients to form a plan. This plan is a list of supports which could be anything from assistance buying natural foods, purchasing mobility aids, installing a wheelchair ramp, or truly anything that is deemed necessary through the collaborative plan constructed. It is, ultimately, a Medicaid insurance program service with resources secured through the guidance of a Social Worker.
 - When Commissioner Stallings proposed that this might include home repairs or referrals to an agency such as Rebuilding Together of the Triangle (now Preserve Home, <https://www.preservehome.org/>) in Cary, Mr. Little agreed that it could apply to this if included in the plan developed with the Social Worker.
 - There was a question about who qualified for SAIH and Mr. Little explained that there was an application that needed to be submitted for staff to fully review each case through an eligibility process.
 - Ms. Tanyetta Sutton asked if the plan helps to prevent the elderly from being taken advantage of financially. This would be a part of the discussion of the client's overall wellbeing and safety. In addition, this would be considered (financial) exploitation under APS where a report could be submitted.
- HHS will also be asking for key positions during its budget expansion requests, notably for two workers to help relieve the burden of increased services needed with the ever-growing aging population. There was a brief discussion about the recent increase in housing specifically for aging populations though it was acknowledged that more affordable housing (both overall and for aging groups) was needed.
 - Ms. Christine Kushner asked if hiring the employees was more cost effective than temps (as it had been mentioned that the work referenced was currently being done by temps). It was confirmed to be more cost effective given the turnover rate for temps.

There were two questions directed to Commissioner Cheryl Stallings on anticipated hires. One was for an update with the Health and Human Services Director position. Commissioner Stallings stated that she would inquire about where the application process was in terms of the position being posted and hoped to have an update in January. There was then a question about a formerly teased Health and Human Services

Lobbyist position. However, it sounded as though staff were hoping to hire the Director position first before pursuing the Lobbyist position. There was a Countywide Lobbyist already in place, but Commissioner Stallings stated that she would report back about any updates with the lobbyist intended for Health and Human Services.

Health and Human Services Board 2025 Orientation/Retreat and Advocacy Event Planning

(Presented by Ms. Ann Rollins)

Ms. Ann Rollins informed the Board that the 2025 Health and Human Services Board orientation and retreat was scheduled for February 27th. This meeting would last from 7:30 a.m. to 11:30 a.m. (instead of the Board's typical 7:30 a.m. to 9:30 a.m. time slot). The retreat will be held at the same room that the Board uses for its meetings – Somerset room 1700 (4401 Bland Road, Raleigh, NC 27609). The Board retreat would include a presentation from Ms. Natasha Bowen (Accreditation and Quality Assurance Coordinator) who would walk Board members through outstanding accreditation benchmark items as 2025 would close out the current accreditation cycle.

Ms. Rollins added that, in reference to the advocacy event, the long session would soon be coming into session. The recommendation from Mr. Ben Canada (Wake County Manager's Office Chief of Staff) was to work to appear on the legislation agenda to present limited advocacy efforts. As available, Mr. Canada was requested to present at the Board retreat in February as well.

There was already an inclusion of children living in Health and Human Services Building awaiting placement in foster care on the legislative agenda for the County. Ms. Rollins asked Commissioner Cheryl Stallings if there were any updates from the Wake County Board of Commissioners (BOC) in this regard. Commissioner Stallings stated that there was not currently an update, but that the foster care system as well as behavioral health were two large focuses of the BOC. She shared that the County had established a standalone department of Behavioral Health with Ms. Denise Foreman (Director of Behavioral Health) leading the department. The BOC want to be as aggressive as possible to ensure better access to mental health services to individuals of all ages in Wake County.

Ms. Christine Kushner asked when the Behavioral Health department would be launched. Commissioner Stallings shared that Ms. Foreman had already been acknowledged as the head of the department with further information to come. She hoped to have more information to share after the BOC's retreat the first Thursday and Friday of January 2025. She would provide information to the Health and Human Services Board members and promised a continued focus on expanding mental health services as best as possible in Wake County.

Ms. Rollins brought up the continued efforts of the Health and Human Services Board to elevate issues concerning the aging population in Wake County.

Commissioner Stallings revisited the discussion on legislation and shared that Wake County hosted the State County Commissioner Association around a month ago. While the legislative agenda had been worked on during this meeting, it had yet to be published. However, she could share that foster care services was acknowledged as a statewide issue with all in attendance agreeing to elevate the issue with lobbying to the General Assembly. There was a mention of seven children living in the Swinburne Health and Human Services building the prior week (though the timeline for this figure was vague and not specific). Ms. Toni Pedroza (Senior Deputy Director of Health and Human Services) added that many of the children waiting for placement were left in limbo due to high acuity needs. Proper placement was a huge indicator of a child's success and without enough providers to assist with high acuity needs and with room short, these children were left waiting in Health and Human Services buildings which only added to the trauma of entering the foster care system.

Health and Human Services Board – Application Review: Dr. Irv Trust (Pharmacist)

(Presented by Ms. Ann Rollins)

Ms. Ann Rollins noted that the Nominating Committee (composed of the Executive Committee or three Health and Human Services Board Officers) had received, reviewed, and recommended the application of Dr. Irv Trust to fill the vacant position of Pharmacist. This position was left vacant after Dr. Mary Faye Whisler's departure in October 2024.

There was brief discussion about the application including commending Dr. Trust as he had been an active presence in the Health and Human Services Board's retreats in years passed.

A motion was made to approve Dr. Irv Trust's application for the Pharmacist seat of the Wake County Health and Human Services Board with a recommendation to refer the application for final approval to the Wake County Board of Commissioners (BOC). The motion was properly seconded and unanimously passed.

Ms. Rollins added that if this application was formally approved by the BOC, the only vacant seat for the Board would be Optometrist. This had historically been a difficult position to fill with it being left vacant for many years.

Committee Chairs Update

(Presented by Ms. Ann Rollins)

Ms. Ann Rollins referenced the Regional Networks report in the agenda packet. She read out one highlight – the Northern Regional Center (NRC) in Wake Forest, in partnership with the Wake County Animal Shelter (WCAS), held a Community Pet Day on November 10th. In addition to reduced cost rabies; Distemper, Hepatitis, Parainfluenza, Parvo (DHPP for dogs); and Feline Viral Rhinotracheitis, Calicivirus, Panleukopenia (FVRCP) vaccines, other services included microchipping and useful information regarding general pet care and health. Community Pet Days are regularly held and, on average, a total of 300 cats and dogs are seen during each three-hour event.

Dr. Jananne O'Connell commonly attends these events and shared that the involvement from the staff of the Wake County Animal Shelter created phenomenal events for pets and the community as a whole. One concern in the animal aspect was many vets in Wake County refusing to accept spay and neuter vouchers. Dr. O'Connell's own practice in Durham was accepting clients driving in from southern Wake County as far as Fuquay-Varina and Garner to have the voucher honored and no cost spay and neuter services provided. This gave an opportunity for the Board to advocate with local vets in Wake County. Some of the spay and neuter surgeries can admittedly be a bit technically difficult and demanding varying on the size and breed of the dog. If the dog is a female, then giving birth to (a) litter(s) may also cause complications and cause difficulties. However, refusal to acknowledge the spay and neuter voucher was a huge burden to pet owners who then had to locate providers out of the county to get their pet care.

Ms. Rollins commented on the local vet school in Wake County being a possible partner in this initiative. Dr. O'Connell agreed and added that partnering with the North Carolina Veterinary Medical Association (NC VMA) could also help elevate education efforts. Even if a fraction of clinics were able to accept the vouchers, this would relieve a lot of the stress on the animal healthcare system as well as pet owners. Dr. O'Connell did admit that reimbursements for these vouchers were not large, oftentimes covering the cost of the surgery alone. However, her practice often opened some slots with calls made to a waitlist if availability became open. The day after Christmas, all of her bookings were from pets with Wake County owners desperately trying to find a clinic that would accept the voucher.

Ms. Rebecca Kaufman (Health Director) noted that the rabies vaccine was paid for through Communicable Disease funds. She asked Dr. O’Connell if, prior to the year before, the vaccine was free. Dr. O’Connell shared that this depended on dollars available. Sometimes the rabies vaccine was provided for free. At other times the cost was \$5. The microchip was provided free through a grant secured with other grant monies readily available. Ms. Kaufman stated that the funds through Communicable Disease would be exhausted in May of 2025. Dr. O’Connell clarified that there were four Community Pet Days held in the spring and four more held in the fall. Because of this, it was possible that the rabies vaccine would continue to be provided for free for the first four events held in the spring.

Dr. O’Connell added that typical spay and neuter clinics of the past now couldn’t find veterinarians to staff the clinics. Because of this, they had largely closed with the Friends of Wake County Animal Shelter taking over the efforts of maintaining the sterilization vouchers.

Ms. Rollins recalled that, in addition to the obstacles already discussed surround animal and pet care, there was also the continued frustration of apartments and rental properties having weight limits for pets – if pets were allowed to stay at all. Many applications demanded pets (notably dogs) be less than 30 pounds in order to live in the property. It was confirmed that this was a landlord policy – not a rule or policy from an entity. Dr. O’Connell agreed that it was a dire situation driving the proliferation of emotional support animals (ESAs) as under the Fair Housing Act they could not be turned away. However, this creates a very strange unregulated situation with people forced through processes to secure ESA designation for their pets in order to keep living with them and keep them with the family. While there was the option to approach the Apartment Association with advocacy efforts, the actual effectiveness of such a campaign was likely low. However, it was pointed out that continued limitations could prove damaging to those attempting to move into Wake County as various stories from those looking to move ended with those individuals not taking jobs or otherwise not moving to the county due to the inability to keep their pets.

Ms. Wanda Hunter was not in attendance, but other members commented on the December Social Services Committee meeting. There were current plans to meet to conduct a heater drive for Warmth for Wake and another meeting scheduled to discuss possible advocacy for a livable wage in Wake County. With Warmth for Wake, it was noted that need did not end when the cold turned to warm in the change of seasons. In fact, the lack of air conditioning and the summer heat was a far bigger risk for harm and death than cold weather. Because of this, Warmth/Cool for Wake and other County supports needed resources, education, and elevation year round.

Public Comments

- Ms. Deidre McCullers asked if the January retreat for the Wake County Board of Commissioners (BOC) was open to the public. Commissioner Cheryl Stallings confirmed that it was open and the public was encouraged to attend.
- Ms. McCullers asked if the Black Maternal and Child Health Conference being held in Wake County in 2025 from the Black Pearl Society would be open to the public. Mr. Kevin Harrell (Preventive Health Director) confirmed that it was open and the public was encouraged to attend.
- Ms. McCullers stated that the conversation surrounding doulas was steeped in discrimination. The mentions of limitations on the doulas left little room for directly impacted people to be assisted by other directly impacted people. The generational and ongoing trauma of slavery could not be overstated in every aspect of life – including with birth and with tending to a newborn. Education could only do so much when this trauma was still so raw and so real.

- Ms. McCullers reminded staff that when making new policies and events surrounding animals to consider phobias. There are many people who have genuine phobias of animals of all species and types.
- Ms. McCullers inquired about the number of children currently living in Health and Human Services buildings in Wake County. There was a disparity – at some point seven living in the building the week prior whereas Ms. Sheila Donaldson (Child Welfare Division Director) had told Ms. McCullers that there were three. This discrepancy was likely due to the fact that the number can fluctuate from day-to-day or even hour-to-hour based on placements and other factors. Ms. McCullers emphasized the corrupt policies that likely led to the children being forced to live in the building.

Adjournment

The meeting was adjourned at 9:19 a.m.

Board Chair's Signature: 

Date: 02/04/2025

Respectfully submitted by Brittany Hunt