# CONSOLIDATED HUMAN SERVICES BOARD

Chair J. Phil Seats, R.Ph., MBA

Vice Chair Fleming El-Amin, County Commissioner



**Board Members** 

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

#### CONSOLIDATED HUMAN SERVICES BOARD MINUTES November 7, 2018

# **Board Members Present**

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

# **Board Members Absent**

Ms. Karen Durell, Ms. Amanda Kistler

#### **Others Present**

Ronda Tatum, Victor Isler, Joshua Swift, Emily Young, Sarah Isom, Marie Stephens, Denise Price, Lovette Miller, Geri Harris, Glenda Dancy, Jennifer Tubbs, Ann Roberts, Andrea Gottfried, Amber Humble, David Baker, Jonah Baker, Amanda Taylor, John Thacker, Jamie Rose, Frances Williams, Lindsay Novacek, Shontell Robinson, Mayte, Grundseth, Tony Lo Giudice, Jason Beasley, Phyllis Russell, Lorrie Christie, Tanya Donnell

# North Carolina Department of Health and Human Services (NCDHHS) Service Award Recipients Present

Amy Baker, Willa Davis, Tammy Douthit, Amy Everhart, Paula Graves, Julia Hooker, Linda Jacobs, Ernestine Mitchell, Susan Sebastian, Reyna Smith, Sherri Walker

# Winston-Salem State University (WSSU) Nursing Students Present

Shontia Burns, Shaunesye Gilmore, Caitlin Grubbs, Naomi Hunt, Kristy Lee, Doris Mariche, Destiny Myers, Christy Nall, Anjelica Pendergrass, Taneshia Poole, Brooklyn Powell, Geralyn Ratilla, Autumn Rogers, Pamela Rojas, Jasmine Sanders, Sakina Sears, Claudia Smith, India Speech, Maria Su, Brooke Tickle, Chandra Williams, Destiny Williamson, Brook Wilson

#### **Call to Order**

On Wednesday, November 7 2018, the Forsyth County Consolidated Human Services Board held its regularly scheduled monthly meeting in Meeting Room 2 at the Forsyth County Department of Public Health (FCDPH). The meeting was called to order by Board Chair, Mr. J. Phil Seats at 5:30 p.m.

#### **Moment of Silence**

A moment of silence was observed by all.

# **Introduction of Guests**

Mr. Seats welcomed guests to the CHS Board meeting. Each person introduced themselves. Included among guests were nursing students from WSSU.

# **Consideration of Board Minutes for October 3, 2018**

The minutes from the October 3, 2018 Consolidated Human Services Board Meeting were reviewed. Dr. Peter Robie made a motion to approve; the motion was seconded by Dr. Charles Massler. The minutes were approved unanimously.

# **Employee Recognitions**

Mr. Victor Isler recognized DSS employees who received State recognition from the NCDHHS Division of Social Services. Each employee was presented with a service award for their dedication in providing service to the citizens of North Carolina.

#### Director's Comments – Victor Isler Federal & Statewide Updates

**DHHS Report on Regional Support to Local DSS's is due by 11/15/18:** A letter will be issued on 11/15/18 re: regionalization from the Department of Health and Human Services. This is the timeline that the state has given itself to create a Social Services workgroup to make recommendations around regionalization. Most of the conversation has been around making sure we have offices to provide technical assistance and administrative support. The state will issue a letter re: the overall decision and what direction the state is going to take.

**1115 Medicaid Waiver Approved:** DSS is actively involved in the community and having conversation around what this will mean to us in addition to Medicaid transformation. The goal with Medicaid transformation is to make sure we expand services as it relates to health care delivery for our recipients of Medicaid. More so, with the Medicaid waiver, we will receive federal dollars which is projected to be around 80 million. The federal dollars will be divided across the state in 4 different regions to review at evidence based practices.

**Medicaid Transformation & Health Opportunities of the Piedmont Pilot Proposal:** We are in conversations with The Piedmont Triad Regional Council. They are serving as the backbone agency to the application for our region. We are region 2.

The Medicaid transformation is saying that when you look at overall health, you also have to look at their lifestyle and other social determinants. You also have to look at how DSS and Public Health make sure that we are meeting the needs from a case management perspective. We are going to see an increase of referrals from medical providers helping meet the social determinants of health.

The medical providers will be using NCCARE360 to make sure that their clients are connected with services in the community. It will be a complex process taking place over the next couple of years. We are in the planning phase right now and will keep you informed.

# **Community Partnerships & Collaborations**

**Letter of Support:** We provided a letter of support through Adult Services to the NC PACE program to expand into Forsyth County. It will be a great program for our adults and aging

population. The support services will expand beyond what DSS can do. DSS has been in planning sessions with Family Services and Smart Start on how we can maximize our subsidy allocations between both providers as it relates to who is eligible and the age of children. We want to make sure we can refer people on and off the waiting list to maximize so we don't have any seats not being utilized.

**Home and Community Care Block Grant Funding Increase:** We were awarded \$29,911.00 which supports our In-Home Services program. Please note: We received an estimated additional \$150,000.00 which is divided up between aging community providers. With that allocation we represent 20%. We will make sure that we pull that money down with our In-Home Aide Program.

**FCDSS Director as Guest Panelist:** Mr. Isler was the guest panelist for Family Services viewing of the Florida Project on 10/25/18 which is looking at the social determinants of health and how community based organizations can help support families that are in poverty.

**November is Adoption Awareness Month:** The Resolution was read on 11/1/18. We recognized one of our key community partners, Seven Homes, who helps us on a daily basis with the placement of foster children. We will be celebrating with our adoption families on 11/17/18 at the WFU vs. Pitt football game.

# **Agency Operation & Processes:**

We submitted our FEMA reimbursement request through our County EOC. Based on the labor that was provided, the itemized request was for \$39,160.00. We did a wonderful job helping man the shelter.

We had a round table discussion on 10/23/18 re: DSS parking. We have limitations with our parking sites for our DSS employees. We want to make sure that we have some sufficiency for workers who are in and out multiple times throughout the day. We came up with some recommendations with the staff who attended. Hopefully by the end of November, we will have a policy for approval.

We have an IV-E audit coming up on 12/13/18 which is our federal reimbursement for our Child Welfare cases. In addition, our Guardianship Assistance Program and Medicaid Administrative Claiming will be audited as well. Currently, there are no glaring concerns.

Program Integrity is the program that makes sure our citizens are appropriately eligible. They review and investigate any concerns of citizens misusing benefits and they recoup funds if necessary. Program Manager, Tiffany Lamarque has done a wonderful job in getting us onboarded.

The Food and Nutrition Services audit will be similar to the USDA Audit that we had in May of 2018 which we passed with flying colors. We do not expect any glaring concerns.

# Director's Comments – Ronda Tatum Updates from Public Health

**Infant Mortality:** The State released the infant mortality numbers for 2017. There was an uptick for Forsyth County. It went from 9.3 in 2016 to 9.8 in 2017. It is a numerator

denominator effect. In 2016, we had 42 infant deaths and in 2017 we had 43 which created a big impact. We will delve into those numbers. North Carolina went down a little as a whole. There are several factors involved in the infant mortality rate. You will also see the disparity rate between African Americans and non-Hispanic White. It was 1.95 in 2016 and 2.21 in 2017. We have to be more targeted in what we are doing when addressing the issue. Public Health as a department can not address this issue alone or take ownership of it alone. There are several complex things that go into it. It is not just a matter of how many babies die but why. We can get some very good information from our Child Fatality Prevention Team and our Infant Mortality Reduction Coalition. We will focus on things that we know work and can get the best bang for our buck. We have several great programs here and a lot of intensive case management here we just need to beef those up. We also have programs that aren't working as well and we need to ramp those down and focus those dollars on other areas. We will not do a comparison to other counties because of the complexities and it would be comparing apples and oranges because each community is different as are the reasons for their rates.

**State Immunization Branch:** They did an unannounced visit on 10/18/18, they found no deficiencies. We also had a site visit on 10/18/18 from Breast and Cervical Cancer Prevention. A nurse consultant came in to evaluate our enhanced role Registered Nurse, Michelle Metscher. She did an outstanding job, no issues there. They were very impressed with her processes and procedures.

Our CD Nurse, Rizza Tonsay, was asked to co-author an article with CDC regarding her investigation of a case involving Johnston County Hams Inc. Her work actually found the problem. We're not guaranteed that her abstract will be picked up but it is an awesome acknowledgement of her work.

We are concerned about our Baby Love Plus Program. Our current funding ends 3/31/2019. We have four staff members who are allocated to that program. This program operates on a federal five-year funding cycle. In the last cycle, the State received \$1.8 million dollars for six counties but the new proposal has been decreased to \$950,000. Initially, we were told that Forsyth or Guilford would not meet the criteria based on the 2013-2015 Infant Mortality Data. Ms. Tatum reported that she received a phone call on 11/1/18 and was told that we could use our targeted population which is African American babies and apply jointly for funding with Guilford County's non-profit to get an application submitted for funding by November 27th.

**Budget:** Snapshot of 1<sup>st</sup> quarter, July, August, & Sept.: There are only a couple of things glaring - one is that our materials and supplies are a little higher than they normally are, especially in our Lab. One reason is that we slowed down at the end of the last fiscal year and made a large purchase in the beginning of the new fiscal year. Also, the workload of the lab has increased which compounds the situation. We had to cover a large outstanding invoice from the previous fiscal year as well so we will need to monitor this very closely. We may need to make some adjustments at some point. All of this information is included in your packets. If you have questions on what the categories are feel free to ask.

**Revenue:** Revenues are hard to target from one year to the next. License and permits are fees for plumbing, tattoo parlor, pool, septic and permits. We are actually up for the first quarter which is an indication of where the economy is right now. Environmental Health is about four weeks behind on their permit process but overall they are doing an excellent job. This information is included in your packets as well.

Ms. Tatum stated that she is very pleased at where we are right now with the budget; staff is doing a good job managing their programs and funds.

We are going into another budget cycle. At the February, meeting you will start hearing more about position requests and budget implications from DSS and Public Health so that we can submit our budgets on time.

Question: Has budgeting for health insurance for staff been a problem? The County is self insured. Our administrator is Blue Cross Blue Shield. They are still working on the projection for next year. It is a large budget item. The fringe benefits such as health and retirement for Public Health usually runs about forty percent.

# **Public Comment:**

No public comment.

**Recommendation for Consumer Capacity Member:** The position was reposted due to confusion in the way the description/title was written. The position was posted as Consumer/At Large. Four applications for this position were received. Three out of four applicants did not answer the conflict of interest question. Mr. Seats suggested moving forward to make a recommendation and vote. The board members were given ballots to complete.

# Review/Approval - PH Policy on Policies: (handout included in packet)

The Public Health Policy on Policies provides the guidance and direction for policy and procedures for the department. It governs the operation of the health department as well as management in making program development and implementation. It is required for the accreditation standards on agency functions and essential services.

It bench marks activities 15.3, 15.5 and 31.1; all require evidence that we do have a policy on policies. The policies are reviewed annually. Ms. Tatum shared that she has read, edited and signed over 100. PH staff assisted in the review process. The PH Policy on Policies was presented to the CHS Board for approval.

Motion made to approve by Mr. El-Amin and properly seconded. PH Policy on Policies was approved unanimously.

**Review/Approval – CHS Board Operating Procedures:** (handout included in packet) Ms. Tatum highlighted several sections for discussions which flowed over from the DSS and Public Health policies being combined.

Page 2, Section 3; Membership: Based on the law, the CHS Board can have up to 25 members. At minimum the CHS Board can have 15 members. The capacity is: one commissioner, four consumers, eight professional capacities, one psychiatrist, and one doctor position.

The at large capacity was created to accommodate the four Social Services seats that we allowed to come on the board when the CHS Board was created. Since one Commissioner/At Large resigned from the board the question is: Do we want to make that change in the Resolution that the Board of Commissioners approved? They created 18 members, or such, as determined by the Board of Commissioners at a later date. If it is recommended to drop that one slot, the Board of Commissioners will have to approve it or we can leave it at 18 and add another At Large member to the board.

It was discussed by the CHS Board. Mr. Seats stated that it is an odd number and that he would support having the 17; Ms. Claudette Weston agreed. Mr. El-Amin shared that the two Commissioners on the Board should be sufficient.

Motion made to approve that the CHS Board would consist of 17 seats by Mr. Seats, and seconded by all other board members. The Board unanimously approved.

Page 3, Section 4; Officers and Committees: The Chair would need to approve a nominating committee. In addition we need to decide, when the chair and vice chair will be selected. They can be selected by the calendar (Jan.) or fiscal year (July). The challenge is that in 2019 there will not be a meeting in January or July. Since Mr. El-Amin and Mr. Seats started their terms in August 2018, it was decided by the Board to hold the election at the meeting in the month of August each year.

A motion was made to approve a nominating committee; a motion was also made on which month the chair and vice chair would be selected by Ms. Weston. It was seconded by Mr. El-Amin. The Board approved unanimously.

Page 4, Section 5; Regular meetings; Meeting rotations between DSS and PH are posted on the website. The concern is that it could be confusing to the public.

Also, section 5B re: Special Meetings; The Chair can call a special meeting as well as four board members.

Motion made to hold all meetings at Public Health by Mr. Seats, seconded by Ms. Weston. The Board approved unanimously.

Section 7; Other Procedural Matters, Part B. In the public comment section, 30 minutes is allotted for public sessions that give speakers three minutes to speak on their issue. (No Change)

Sec. 10; Response to public and media inquiry; Mr. Seats does not want to impede anyone's ability to speak; the goal is to have a unified response. It was decided that inquiries of the Board would be directed to the Chair, who would then respond or direct the inquiry to the proper party with expertise, to make the response.

Motion made to approve the amendments to the Policy and Procedures with the amendments by Mr. Seats. It was properly seconded. The Board approved unanimously.

#### Jail Medical Services Overview -- Lindsay Novacek

Dr. Novacek gave an overview of the jail medical services that are provided by Public Health. (Detailed handout provided.)

Dr. Novacek has been laying the ground work and creating working relationships with the medical team, Wellpath (formerly Correct Care Solutions), at the Forsyth County Jail. Dr. Novacek shared that she has learned a lot from them as she has been able to shadow. Wellpath has been responsible for doing monthly contract compliance meetings, usually with operational and security staff. They also provide weekly meetings with security staff regarding special needs of patients i.e. housing or medical concerns.

Beginning in November 2018, Dr. Novacek will take control of the meetings. Wellpath will be required to continue to provide the compliance data i.e. the eleven compliance indicators as well as staffing and other measures. The difference will be that Dr. Novacek will also provide data which will show discrepancies and trigger the need for any improvement plans. Wellpath is contracted by the County to provide the services. Jail population on an average day is 850.

Dr. Robie shared that he is supportive of what Dr. Novacek and Wellpath are doing. He is interested in doing a visit to meet the staff and offer support to the efforts.

Question for Dr. Novacek. Why was this position created? Ms. Gloria Wisenhunt addressed the question. This position was created to monitor medical services provided in the jail and to help protect the commissioners and the sheriff.

Question from Mr. El-Amin: Why would an inmate have to pay for health services/tests? Dr. Novacek shared that inmates are not charged for emergency medical or mental health services, if they have a chronic care need. They may be charged a co-pay for non emergency request. Care is never denied based on the ability to pay.

# Service Area Spotlights

#### Personal and Clinical Services - Glenda Dancy

Ms. Dancy gave an overview of the Personal Health and Clinical Services that are provided by Public Health. Detailed handout provided.

Family Planning, Clinic 1: Services are provided on a sliding scale fee. Also, Medicaid is billed for the services received. Most of what this clinic provides are the long-acting contraceptives which are devices that last three to five years. The clinic has seen a 20% increase due to starting walk in hours on Wednesday and Thursday.

Sexually Transmitted Infection, Clinic 2: Testing is provided for all customers who come into the clinic. The clinic has had a 34% increase.

Immunization, Clinic 3: This clinic also provides free flu shots. The clinic has given almost 2000 flu shots from October 1 to November 1.

Tuberculosis, Clinic 4: Evaluations of customers is provided in this clinic.

POSSE: This mobile unit usually averages around 500 tests a month. They have worked a lot with Needle and Chain programs.

School Health: The school nurses provide an array of services. As of Nov. 1, we have a total of 102 kids that needed to be excluded because they did not get immunizations.

Communicable Disease: A lot of education is provided, especially in long-term care facilities. The team of five has done 350 CD investigations through September 2018

Nurse Family Partnership: The program started in 2012. They assist low income pregnant women and families.

Stepping Up: Currently in the second year. Attorneys refer clients to the program.

Pregnancy Care Management: This program works to have healthy moms and babies; work with a system to prioritize and engage women who are more at risk for poor outcome. As of October 2018 we have started seeing our moms face to face.

Care Coordination 4 Children: CC4C works with at-risk children when mom has a history of substance abuse. They also work along with DSS Foster Care and doctor's offices.

# **Other Business or Announcements**

Mr. Seats announced that a letter was received from Commissioner Dave Plyler dated October 24, 2018 stating the he has resigned from the Consolidated Human Services Board due to meeting scheduling conflicts.

By majority vote, the CHS Board voted to recommend Linda Petrou to the County Commissioners in the capacity of Consumer for a 4-year term.

# Adjournment:

Mr. El-Amin made a motion to adjourn the meeting. It was properly seconded. Meeting adjourned at 6:45 p.m.

RT/td

Next Meeting: December 5, 2018