

Wake County Human Services Board
Meeting Minutes
June 27, 2019

Board Members Present:

John Myhre
Dr. James Smith, III
Ann Rollins
Margaret Raynor
Deborah Lawson
Stephanie Treadway
Commissioner Vicki Adamson
Angie Welsh
McKinley Wooten
Commissioner James West
Edward Buchan

Staff Members Present:

Debra Baker
Dr. Kim McDonald
Paige Bennett
Kenneth Murphy
Dr. Caroline Loop
Regina Petteway
Craig Burrus
Paige Rosemond
Cassandra Watford
Evan Kane
Heather Miranda
Ramsay Hoke

Guests Present:

Mayor Frank Eagles

Call to Order

Chair Dr. James Smith called the meeting to order at 7:35am.

Reflections

(Presented by Chair, Dr. James Smith, III)

Dr. Smith spoke about all of the things that the Board and Human Services Staff do for the community. He took a moment to thank everyone for what they do and then spoke about a prostate cancer screening event that his group partnered with Public Health. He thanked the Public Health staff, recognizing Sarah Plentl and Jason Adams for their commitment and their assistance at the event. He hopes to continue to partner in the future. He formally thanked Human Services Staff and also recognized the staff that worked the WIC offices on the Saturday of the event. He spoke about the county continuing to grow and that we have our work cut out for us, but the infrastructure is sound.

Approval of Minutes

Chair Dr. Smith asked for a motion to approve the May 23, 2019 meeting minutes. Mr. John Myhre noted that Commissioner James West is listed under the staff attendees and that he should be moved to the Board member list and identified as Commissioner James West. Mr. McKinley

Wooten then motioned to approve the minutes with this change and Ms. Ann Rollins seconded. The minutes were unanimously approved with the noted change.

Treasurers Report

(Present by Ms. Margaret Raynor)

Treasurer Ms. Margaret Raynor reported that there was no change from the total last month. The current balance of the Board fund is \$3,480.92.

Next Board Meeting – July 25, 2019

Request Input for the Human Services Director's Performance Review [PH Accreditation Benchmark #37.5b]

(Presented by Chair, Dr. James Smith, III)

Dr. Smith informed the Board members of a survey they will receive requesting input for the Human Services Directors annual performance review. This is an opportunity for the Board members to provide input to the County Manager for the Human Services Directors annual review. Dr. Smith then explained that at the regular July Board meeting the Board will enter into a closed session. During the closed session the input collected by the survey will be reviewed and discussed.

Review of Human Services Directors Position Description [PH Accreditation Benchmark #37.4a and #37.4b]

(Presented by Chair, Dr. James Smith, III)

Dr. Smith explained that this is a benchmark item and that what they had received at the meeting is a copy of the Directors job duties and responsibilities. Ms. Petteway then explained that she will be asking Human Resources to provide signed copies of her Position Description Questionnaire (PDQ) to review as well. The PDQ contains a more detailed description of the Directors job duties and responsibilities. Dr. Smith then discussed a section on page 3 and the connection with building a team and community partnerships to help achieve our goals. Dr. Smith then gave an example of the partnerships that has allowed the Summer Food program to grow and feed more children.

Ms. Raynor asked if there was anything that Ms. Petteway noticed that may need to be changed in this list of responsibilities, specifically to add or adjust job duties related to Environmental Services. She noted the rising amount of environmental issues with the contaminated wells as one big item. Ms. Petteway spoke about the list being narrowed down to specific skills and that the skills noted are all that could be needed on the Human Services side and that Dr. Threadcraft has skills on his PDQ that reflect what is needed for his position in Environmental Services.

There was a brief discussion initiated by Commissioner Adamson about a Position Paper published by the Republican party in opposition to the Wake County Summer Feeding program. The objection the Republican party has is that the county uses federal funds and the party feels

that if the federal government is broke that we should not be taking funds from them. Ms. Rollins asked if the Commissioner could share this paper with the Human Services Board and she agreed that she would. Dr. Smith then asked the Board members to advocate for the Summer Food program. Ms. Petteway then spoke about other community programs that are also using federal funds to participate in the Summer Feeding program.

Dr. Smith closed the review of the Directors position description.

Public Health Fee Policy/Methodology and Schedule of Fees [PH Accreditation Benchmark #33.5a/b/c, #33.7, #39.3]

(Presented by Ms. Heather Miranda)

Ms. Miranda took a moment to introduce herself to the newer members and staff. She then briefly explained the three benchmarks associated with this agenda item and reviewed the governing statutes. She noted that the Board will review the proposed Fee Setting Policy, discuss the process and methods for establishing service costs and fee schedule and changes to fees for FY 2020 as well as the outcomes of Sliding Fee collections for FY 2019. Ms. Miranda then proceeded to review the information in the packet and noted that the data on the Public Health Sliding Fee Scale is updated every February. She then noted the one change to the Public Health Fee Policy was added to show that the Human Services Board is the body that approves the fee setting methodology for Wake County Human Services Health Clinics.

Section II: Added:

The Human Services Board reviews and approves the fee setting methodology for Wake County Human Services Health Clinics.

She then took a moment to review the methodology and review process:

- Previous full review of fees, 2018
- Reviewed best practices- for safety net providers
- Benchmarks indicate setting fees at 70% to 80% of customary, for region
- Criteria for evaluation of fee structure - current service charges, cost of providing the service, and level of Medicaid reimbursement
- Meetings were conducted to review fees and policy: 3/4/19, 3/21/19 and 5/31/19
- Attendees: Cynthia Henderson, Kim McDonald, Cassandra Watford, Kathy Watson, Heather Miranda, Eugene Chalwe, Joann Douglas and Mary Denning

Ms. Petteway asked Ms. Miranda to speak a little about who the people listed on the review team were.

What was found during this process is:

- Upcoming changes to Medicaid will result in the need to reevaluate fees in the near future, making changes at this time a duplicative effort
- Fee increases last year were significant and had not been completed since 2011. In review, there are no services that require significant and immediate changes, at this time, after review by the committee
- Recently contracts have been signed with Sanofi a vaccine manufacturer for immunizations that have provided significant cost savings, not requiring fee increases at this time

Ms. Miranda then reviewed the numbers for the self-pay fee collections for FY 2019:

- Collections for FY 2019 are currently (4/2019): \$948,431
- Expected fiscal year-end total: \$1,034,650
- Increase of nearly \$80,000 in sliding fees collected in FY 2019

There was a question on if services were declining after the last fee increase and Ms. Miranda stated that the numbers have actually increased. There is some concern with turnover due to retiring staff affecting the number of patients that can be seen. However, there are more services being added, such as nutritionists, and dietitians. At the same time, we are working on looking at cost effective measures, such as the CNA model as staff retire.

In closing Ms. Miranda reviewed the strategic approach to preserving patient access and reducing county costs:

- Review of fees annually, to incrementally bring fees in line with 75% of standard and customary
- Service line enhancements
- Business model adjustments and update staffing model
- Consideration of changes to operational model to preserve reimbursement potential lost in Medicaid Transformation
- Better utilization of provider staff, implementation of staffing models based on best practice and improved employee satisfaction
- Increase insurance contracts to optimize revenue
- Leverage technology
- Call reminder system to reduce no-show rates
- Patient friendly fee payment options (under review by the county)

Dr. Smith noted that the Human Services Board had reviewed the information and then he asked for a motion to approve the changes. Ms. Margaret Raynor motioned and Mr. John Myhre seconded, the board then unanimously approved the changes.

Clinic Self Pay Report [Accreditation Benchmark #33.6a]

(Presented by Ms. Cassandra Watford)

Ms. Watford began by reviewing the comparison chart that shows comparisons by clinic. Dr. Smith asked what FLU stood for on the chart and Ms. Watford let him know that it stands for the immunization clinic. Dr. Smith then asked what the rise in clinic E was attributed to. Ms. Heather Miranda spoke about implementing more travel medicine visits. They have added more availability and connected with the pharmacy so that patients can get their visit and go right to the pharmacy to complete their immunization more quickly. Dr. Smith asked about the much lower income in the regional center clinics. Ms. Miranda noted that mostly this is due to staff vacancies creating a challenge in the number of patients being seen. She noted that there were 4 providers just brought onboard, so volume should be increasing. At any given time, there are only 1-2 providers seeing patients as opposed to 4-5 providers in the clinics at the Public health building so there would obviously be much more visits total. Ms. Miranda also noted that now that we have the regional centers listed separately with Medicaid we are hoping it will direct more people to the regional centers. She stated she has already gotten reports showing some people are getting assigned to the regional centers. Some of the issues are that at times some people do not know what services are available at the regional centers. She noted that specifically Millbrook has a very robust amount of services and is slated to do about 3000 visits with only one provider and most of these are prenatal reimbursements, which are not very high.

Ms. Rollins asked about the number of patients seen in each clinic and Ms. Miranda discussed the differences in the clinics. Ms. Rollins then asked if there could be another column added for how many people are seen in each clinic. Ms. Petteway also asked that Ms. Watford add this column to the report in the future as well as a key for which clinic does what.

Dr. Smith noted that the Board members have reviewed the information and asked for a motion to accept the clinic self-pay report. Ms. Stephanie Treadway motioned and Ms. Margaret Raynor seconded. The motion was unanimously approved.

Consolidated Agreement and Other Payor Services [Accreditation Benchmark #33.6a]

(Presented by Ms. Cassandra Watford)

Ms. Watford explained that this report shows funding by our payor source for our public health and preventive services. Ms. Petteway noted that the consolidated agreement is the agreement with the State. Ms. Watford went on to explain what types of services were included in the funding data in this report. This report also identifies each clinic by name. Noted on the report is the amount of funding that is received for this year, through the end of May, by the consolidated agreement, grants, and other allocations listed as Misc. type of revenues, clinic fees, Medicaid and Medicare settlements, private insurance, etc. for a total operations funding for Public Health. Ms. Watford noted that the Medicaid settlement had not yet been received. Once the Medicaid settlement is received it will be coded into this account.

Dr. Smith asked if the Medicaid/Medicare total has stayed the same or changed over the last three years. Ms. Watford noted that it has stayed the same but that last year or the year before the State was late in making the payment to us so there was a large gap in our report that looked like an increase. Ms. Petteway also noted that one year the formula had changed so it also affected the report.

Ms. Rollins asked about the difference in maternal health from FY17/18 to FY18/19. Ms. Watford was not sure what change had happened to affect the number and stated that she would look in to this.

Dr. Smith asked for a motion to review and accept the consolidated agreement and other payor services report. Mr. John Myhre motioned and Mr. Edward Buchan seconded.

Official Notice to Wake County Well Owners [PH Accreditation Benchmark # 9.1a, 10.1a, 10.1b]

(Presented by Mr. Evan Kane)

Mr. Kane introduced himself and noted that he runs the program for permitting and technical assistance for private well users. He noted that 85% of Wake County residents are serviced by a community well system. The remaining 15% of residents rely on private wells as their primary water supply and the responsibility of monitoring and maintaining those private systems falls on the well owner. He explained that the Wake county well program is there to assist these private owners in testing their wells and to watch over the water quality in Wake county as well as to help residents understand what the risks are from various contaminates. The county role in this process has shown us over the years that the most common chemical contaminate in wells is uranium and related elements derived from uranium. These contaminates far exceed any manmade chemical issues. The three common contaminates can affect health and increase the risk of cancers. Mr. Kane took a few moments to discuss mitigation options for those affected, such as using bottled water, connecting to public water, installing point of use or whole-house treatment/equipment. He then spoke about the types of treatment options available. He then explained the water testing process and passed out a Wake County Request for Well Water Testing form that is available for those residents that choose to test their well water.

Commissioner West asked about financial assistance for those residents that have contaminated well water and cannot afford to install any of the necessary equipment to clean their water. Mr. Kane noted that there are some assistance programs available to lower income residents. He then spoke about the Wake County response to the issue of radionuclides in well water in the eastern part of the county. Residents were notified via a letter mailed to approximately 19,000 residents encouraging private wells be tested for these contaminates. There have also been community meetings as well as radio and TV ads notifying residents of the contaminate issues in their area and encouraging residents to test their water.

Ms. Welsh spoke about the great job that has been done by Environmental Services in notifying the residents of the well contaminates issue and that Mr. Kane is a wonderful spokesperson for the County. She noted that Mr. Kane's presentation is consistently clear, and he speaks in terms that anyone can understand. Ms. Welsh suggested that Mr. Kane connect with Dr. John Perry to discuss speaking about this topic at a near future Grand Rounds. Mr. Kane thanked Ms. Welsh and the Human Services Board and then recognized individuals on his team that have been invaluable in this process. He noted that the website is being closely monitored and updated every day to make information as up to date as possible. The website is wakegov.com/wells.

Commissioner West asked if there was a matrix to show the data on how many people test their water and the number of contaminated wells. Mr. Kane stated that since this is the responsibility of private well owners that they will not have information for all homes. He went on to say that they will have data for the lower income residents that are assisted as well as information from at least one water testing company that has committed to sharing the number of private wells they test and the results of those tests.

Chair Dr. Smith asked for a motion to accept this report. Ms. Ann Rollins motioned and Mr. John Myhre seconded, the motion was unanimously approved.

Wake County Drug Overdose Prevention and Tobacco Use Initiative Annual Report
(Presented by Mr. Ramsay Hoke)

Mr. Hoke explained that he would give an overview of the final report which was passed out to Board members during the meeting. He first went over the partners and staff that had been involved in the report and he briefly noted the names and titles as shown in his presentation. He then went over the data included in the report, the demographics, and the goals:

Goal 1: Create a coordinated infrastructure in Wake County for access to prevention, treatment and recovery support services for drug and tobacco misuse (9 objectives) -100% of objectives were completed

Goal 2: Increase the availability for peer support recovery training (3 objectives) – 33% were completed and 66% are still in progress

Goal 3: Expand access to prevention, treatment and recovery support services for those with substance use disorders - data compiled from multiple stakeholders

Goal 4: Increase community awareness on the prevention of substance misuse and tobacco use – created and distributed an overdose pocket guide, created a video to bring awareness to the newly passed “Good Samaritan” Law (GS 900-96.2)

Goal 5: Make Naloxone widely available

Mr. Hoke then reviewed the challenges and other successes:

Challenges:

- Approval of *Peer Support Recovery-Focused Curriculum*
- Engaging individuals in recovery process takes time!
 - Huge demand (# of clients) on CPSS staff and trust building
 - Significant deficits in resources for clients (i.e., MAT funding, transportation)

Other Successes:

- Additional 10-month DHHS grant funding (ends in August 2019)
- Strong partnerships built around Rapid Response Team
- Strengthened referral pathways

There was some discussion on some of the successes and challenges and then Mr. Hoke reviewed the recommendations for year 2:

- Improvement in referral processes/coordination
- Additional support for staff + family/friends of clients
- Better community awareness of available resources
- Information management improvement
- Sustained sources of funding and centralized programmatic home

Dr. Smith spoke about his psychiatric practice purchasing a software interface system so that his practice can talk within the hospitals concerning methadone prescriptions prior to giving anything to their patients. He spoke about the need to require Dr.'s to join this system and to check the control data reporting system before they write any controlled substance prescription. Ms. Petteway and Dr. Smith noted that this was an advocacy that the Human Services Board should look in to.

Dr. Smith thanks Mr. Ramsay Hoke for his presentation.

Human Services Directors Report

(Presented by Ms. Regina Petteway)

Ms. Petteway asked Ms. Paige Bennet to update the group on the new Live Well Wake program. Ms. Bennet is the hiring manager and gave a brief update on the status of interviews for the new position. Commissioner West asked if there was a representative on the interview panel for Social and Economic Vitality. Ms. Petteway explained that her involvement on the panel represented the Social and Economic Vitality group. Ms. Bennet then spoke about a new communications committee that Mr. Andrew Sawyer will assist with. The purpose is to stay up to date on communication needs, especially to get the message out on Medicaid Transformation.

Ms. Petteway then asked Ms. Paige Rosemond to speak about Child Welfare. Ms. Rosemond let the Board know that Child Welfare had recently received a grant from Duke Endowment for \$1.1 Million over the next 3 years to hire 4 nurses. These nurses will accompany social workers on home visits to assist with assessing the environment, injury identification and also to support medical and behavioral mental health coordination. The goal is to lessen the likelihood of further penetration into the child welfare system. They will focus on prevention and will work with families during assessments. Ms. Rosemond then went on to let the Board members know that the foster care unification rate for the 4th quarter has increased to 41%, in alignment with the state average. She noted that last year's average was between 15-18%. Ms. Rosemond stated that she appreciates the efforts of the Human Services Board and then Ms. Petteway thanked Ms. Rosemond for her leadership of Child Welfare.

Ms. Petteway then asked Ms. Liz Scott for an update on Medicaid transformation. Ms. Scott noted that the state was sending out notifications tomorrow and it will be the first notification that Wake county residents receive that notifies them that they will need to choose another health plan. Ms. Scott noted that staff is being trained and additional staff members are being placed in the call center to handle any additional incoming calls. We are not sure what to expect but have been very engaged with the enrollment broker who has been assisting us and they have been very responsive. Ms. Petteway spoke about the deadline for enrollment and that there will be a grace period as well.

Environmental Services Director's Report

(Presented by Dr. Caroline Loop)

Dr. Loop followed up on a few things concerning groundwater and treatment systems. She noted that the Ground Water program had held a session and had invited the providers, home inspectors, etc. to join the group for this meeting. The meeting was focused on groundwork prior to the wake county well water contamination issue being publicized, and residents being notified.

Dr. Loop then spoke about Commissioner West's questions concerning resources for residents with contaminated groundwater. Dr. Loop stated they have been monitoring website traffic, on the 1st day there were over 16k unique hits, the next day there were about 6k unique hits and they will be researching the data on these numbers. She anticipates that the number of hits will increase again as testing begins and more information is disseminated. She stated that there have been over 551 calls to date to the helpline. They are measuring all of this data to gauge decision making as time progresses.

Dr. Loop also spoke about how to keep the well water issue on the radar of the public to make sure they are aware it is an ongoing issue. Another Environmental Services discussion is the business plan and how it connects to accreditation. She stated they are looking at all of the programs to see the impact as things move forward.

Public Comments

- Mayor Frank Eagles took a moment to speak about the Summer feeding program, noting some statistics to show the activity to date.
- Mayor Frank Eagles took a moment to speak about the lack of a county water system and he stated that the Board of Commissioners should be working to expand water lines into other areas of the county.

Participation in Community Events

- Mr. Myhre asked when they would hear anything else about the mock accreditation inspection. Ms. Petteway stated that she would speak with Ms. Pendra Lundy about sending out information as soon as possible.
- Commissioner West took a moment to let everyone know that he had attended the Millbrook Center's 10th anniversary celebration.

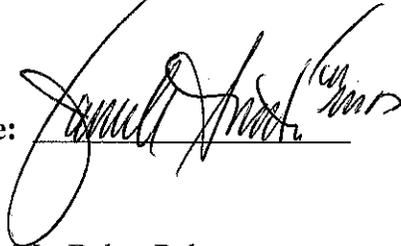
ACTION ITEMS:

- Ms. Debra Baker to send an organizational chart to show Environmental Services leadership team, specifically Dr. Threadcraft' s position.
- Commissioner Adamson noted that she would send the Republican Position Paper to the Human Services Board members
- Ms. Debra Baker to email a link to the Wake County Drug Overdose Prevention and Tobacco use Initiative Annual Report to the Human Services Board members.

Adjournment

The meeting was adjourned at 9:59am.

Board Chair's Signature:



Date:

7/25/19

Respectfully submitted by Ms. Debra Baker