Davie County Health and Human Services 154 Government Center Drive, Mocksville, 27028 12:00 PM

AGENDA
DAVIE COUNTY HEALTH & HUMAN SERVICES BOARD
Regular Meeting September 27, 2022

I. Roll Call/Sign in

Attendee Name	Title	Status	Arrived
Brian Baker	Optometrist	Present	
Joe Boyette	At-Large/Consumer	Present	
Kathy Cornatzer	Nurse/At-Large/Consumer	Present	
Andreia Collins	Social Worker/Consumer	Present	
	Engineer	N/A	
Jessica McCaskill	Veterinarian	Absent	
Richard B. Poindexter	Commissioner	Absent	
Terry N. Renegar	Chairman	Present	
Andrew Rivers	Dentist	Present	
	Psychologist	N/A	
Sherri Jefferies	At-Large/Consumer	Present	
Clio Austin	Physician	Absent	
Sara Buchanan	Pharmacist	Present	

II. Call to Order

"Pursuant to NCGS 160A-86 and the Davie County HHS Code of Ethics and Conflict of Interest Section included in the HHS Board Operating Procedures adopted September 22, 2020, I would ask each of you before you adopt the agenda today if there is any actual, potential or perceived conflicts of interest with respect to any matter on the proposed agenda which will come before the Board today for a vote. If so, please speak up and let the Board know at this time before the agenda is adopted."

Mr. Renegar read the conflict of interest disclosure section from the HHS Board Operating Procedures. There were no conflicts self-reported by any Board member.

Mr. Renegar welcomed guests to the meeting and asked for introductions of everyone in attendance. Brian Barnett, County Manager, and Elizabeth Brown, DCHHS Business Operations Manager, were in attendance**.** Both are new in their roles with Davie County.

III. Invocation

Chairman Renegar provided the invocation**.**

IV. Discussion & Approval of Agenda

1. Approval of Agenda:

Mr. Renegar asked Board members to review the agenda that was provided to them for today's meeting.

Vote: After review, **Andreia Collins made a motion to approve the agenda as presented. Dr. Brian Baker seconded. The motion carried.**

V. Review of Minutes

1. Consolidated Human Services Board Meeting – June 21 2022

Chairman Renegar asked Board members to review meeting minutes provided from June 21, 2022.

Vote: **Dr. Brian Baker made a motion to approve the meetings minutes from June 21, 2022 as provided. Andreia Collins seconded. The motion carried**

VI. Public Comment **

The Board sets aside part of each meeting for individuals or groups to address the board.

Any person wishing to address the Board can place their name on the sign-up sheet before the meeting is scheduled to begin. The chair will call each speaker in the order in which his or her name appears on the sign-up sheet. Each speaker is limited to three minutes to address the Board. At the end of the Public Comments section of the meeting the chair will open up the floor for comment from any member of the public who wishes to speak and has not yet had the opportunity to do so. It should be noted that the Public Comments section of the meeting is for members of the public to address the Board. Board members will not render an opinion or give any comment with regard to the subject matter presented by members of the public.

Ms. Wright indicated that no one signed up to speak under public comments.

VII. Presentations

- Monkeypox – Luann Angell

Monkeypox is a rare disease caused by an orthopox virus typically found in West and Central Africa. As such, most cases in the US, prior to 2022, have been travel associated. A previous outbreak in 2003 associated with pet rodents did result in local transmission in the US.

The disease typically begins with a prodrome of fever, exhaustion, headache, and sometimes sore throat and cough. Lymph nodes may swell in the neck, armpits, or groin, on one or both sides of the body. Shortly after the prodrome symptoms, a rash appears. In some of the recent cases, the first symptom was a rash. The rash goes through four stages; flat (macular), to raised (papular), to fluid-filled (vesicular), to pus-filled (pustular) and may umbilicate (the center may open or sink in) before scabbing over and resolving. This happens over a period of 2-3 weeks. Lesions may be all over the body, including the palms, feet, and head, or located only on specific body parts such as the genitals or around the buttocks. The rash may be painful and during healing stages may itch.

CASE NUMBERS

GLOBAL 65,933 cases reported as of yesterday

United States 25,162 cases reported as of yesterday

North Carolina 510 cases reported as of 9/22/22, 97% male 70% black

Davie County 1 case male over age 18 tested and diagnosed by their PCP and reported to Public Health and NC DHHS.

NCDHHS is reporting two monkeypox cases in people under the age of 18, both of whom are older adolescents. Neither had household exposure to the virus. The report also includes 10 cases in a female. For privacy reasons, NCDHHS will not provide additional information on these cases.

Monkeypox in North Carolina

North Carolina's first case was identified on June 23, 2022. Nearly all monkeypox cases in North Carolina have been in men who have sex with men, consistent with findings from other jurisdictions. NCDHHS is working with local health departments and community partners to identify and respond to every case of monkeypox. Addressing disparities and advancing health equity is central to our response. NCDHHS will publish demographic data weekly to provide insight into who in North Carolina is getting monkeypox and vaccines.

Monkeypox virus can be spread person-to-person through infected body fluids (including saliva and lesion fluid), items that have been in contact with infected fluids or lesion crusts, and respiratory droplets. The incubation period is usually 7−14 days but can range from 5−21 days. People with monkeypox are infectious from the start of symptoms (before the rash forms) until the lesions heal and new skin forms underneath scabs and the scabs have all fallen off.

Monkeypox Testing

Testing is widely available and encouraged if you had close contact with someone who has been diagnosed with monkeypox, or have symptoms of monkeypox including unexplained bumps, sores, blisters, or pimples that look like monkeypox. There is no shortage of testing supplies, and people with symptoms of monkeypox should go to their health care provider or a or local health department to get tested. Samples must be collected by a health care professional, and they must follow a specific procedure to collect a good sample for testing. NCDHHS recommends providers test any patient with a suspicious lesion or sore.

- Davie County Division of Public Health has tested only 1 male patient with atypical lesions and the result was negative. Patient tested positive for syphilis.

Monkeypox Vaccinations

- NC DHHS reports there have been 18,577 vaccinations administered as of 9/22/22.

Vaccines are available to protect against monkeypox or to reduce disease severity. **NCDHHS has expanded the vaccine eligibility criteria to include**:

1. Anyone who had close contact in the past two weeks with someone who has been diagnosed with monkeypox; or
2. Gay, bisexual, or NC DHHS reports men who have sex with men, or transgender individuals, who are sexually active; or
3. People who have had sexual contact with gay, bisexual, or other men who have sex with men, or transgender individuals in the past 90 days; or
4. People living with HIV, or taking medication to prevent HIV (PrEP), or who were diagnosed with syphilis in the past 90 days.

As of 8/19/2022, 18,448 doses of Jynneos have arrived in NC. More doses will become available under phase

4 of the U.S. Department of Health and Human Service's (HHS's) National Vaccine Strategy. A pilot program from the White House and HHS will also offer additional vaccines to states hosting large LGBTQI+ events. Find a list of vaccine locations.

VIII. Action Items

- **N/A**

VIIII Consent Agenda

- **Financial update – Elizabeth Brown**

  YTD Comparison Report

  - **Health** – The majority of the differences seen between FY 22 and FY 23 is due to receiving a cost settlement payment for about $60K and receiving funds from Covid billing in the amount of $17K. For expenses, the difference is due to a voided check in the amount of $42K that should have been in FY 22 but didn't process until FY 24. Also we had to front about $51K in non-federal share as part of the quarterly cost settlement under the Medicaid cost settlement (but we'll receive 100% back in reimbursement).
  - **DSS** – The difference in revenue is $131K for Adoption and Promotion. Most will carry over into 2023, but will not be reflected as revenue in 2023.

  - **Senior Services**- In FY 22 there was more revenue due to congregant meal grant in the amount of about $30K. There was $20K more in expenses due to increase of salary and fringe in operational costs and the purchase of a new software program.
  - **Veteran's Services -** Consistent with previous year.
  - **Domestic Violence –**Consistent from previous year except for negative revenue from TI Voca Grant which revenue is anticipated in period 2 or 3.

- **In Home Aide Contract, Home Care Independence Grant, and General Services Grant – Kim Shuskey**

  - Our In Home Aide program has been hit hard since the pandemic due to the industry wide staffing shortage of Aides. However, as you remember we switched providers in June and the new provider has been able

to improve service since last year. We currently have 2 clients on Level I not being served, 2 clients on level II not being served, and 1 client on level III not being served. That means there are 5 existing clients still waiting for service and 24 existing clients being served. In addition, we have a large waiting list and have funds to clear some off, but they don't have the staff.

- Senior Services received a new grant, the Home Care Independence Program. This is part of the Recovery Act funds. This is a grant for $150,000 and it provides funds to allow those who need In-
- Home Aide Services to hire their own worker. This program requires a Social Worker to assess clients to ensure they are appropriate for the program and to do regular assessments, check-ins, etc. We will hire a p/t worker to serve in that role. The grant must be spent by 9/30/2024, but we anticipate funds running out prior to that date.
- If this program works well, a solution may be to divert some of the HCCBG funds for In Home Aide over to this program to use for clients on the waiting list. However, we will have to find funds for the social worker, as the Home Care Independence Grant funds can only be used to pay the social worker working with the HCI clients, not any In Home Aide clients.
- Senior Services received $10,901 for our General Purpose Grant. This grant is given to all senior centers across the state. Certified centers receive more funding than non-certified centers. So because we are certified as a NC Senior Center of Excellence we receive the top tier of funding. A match of $3,634 is required.

- **Regional ARPA Funds for Environmental Health/Budget Amendment – Justin White**

There $650,000 state ARPA funds directed to Region- 3 (10 counties) for environmental health purposes, which means $65,000 for Davie. This funding is intended for hiring and/or retaining EH staff. Davie County Division of Public Health will be focusing on retention of our current staff through the means of updating technology components to make the evaluation/ permitting / and information gathering systems efficient and smoother for field staff. The updates and additional technology will include:

- GPS units used in the field to gather data and specific location,s which will translate into easier and quicker methods of system design, while also increasing accuracy and repeatability on site for staff and contractors.
- We will be looking at getting 3-4 gps units along with any other hardware and software needed to integrate the gps data into our permitting system as well as our county GIS system.
- I (Justin) am working with the county GIS analyst and Technology Solutions Chief Operating Office to development and implement the full-scale system.

- Also with regional ARPA funding, we will be providing continuing education funding for staff to attend, which would include any travel, registration, and associated staff salary time and costs

- Davie Center for Violence Prevention Grants – Kim Shuskey

  Davie Center for Violence Prevention received notification of grant funding amounts for the following grants:

  - NC Council For Women Domestic Violence Grant - $51,856.47 ($10,371.29 match required)
  - NC Council For Women Sexual Assault Grant - $28,109.51 ($5,621.90 match required)
  - Marriage License Fees Grant - $17,500 (no match required)
  - Divorce Filing Fees Grant - $19,000 (no match required)

- **Preparedness Monitoring and TB Audit – Justin White**

  - Public Health Emergency Preparedness is in compliance with Public Health Agreement Addenda (AA) 514 and 619
  - The preparedness monitoring visit happened on Sep 21, 2022. The preparedness monitoring team reported that all preparedness work in Davie was within the requirements of the AA and positive comments were shared about our work. The monitoring team shared a few comments on changes and updates that will be implemented in the near future. Regional consultants will with work our team on AA compliance related to these changes/updates moving forward.
  - Ben Justice, a new DCHHS, Division of Public Health staff member, will soon take over the preparedness coordinator role once training is complete
  - TB Audit was also completed last week for the clinic. All positive feedback. CD funding has also changed from the state, so we are able to put Luann fully into CD nurse role, so she is able to fully devote her time to CD, including the TB program.

  Vote: Andreia Collins made a motion to approve items on the consent agenda. Dr. Brian Baker seconded. The motion carried.

X. Director's Comments

Director comments are presented during the meeting and will be provided in writing to HHS Board Members as well.

- **Opioid Project Update**

Agenda Leadership Davie participants reached out to DCHHS leadership to learn about opioid response resources and how they could help support local efforts. *Leadership Davie is a comprehensive training program that develops leaders who want a behind-the-scenes peak at what makes a county run. Participants learn about our rich history and future potential. They share insightful knowledge from top quality leaders and speakers, using a hands-on approach to understand life in our community. This program is for those who invest in our county as a resident, employee, or both and want to see if flourish for generations to come*. Leadership Davie participants originally planned their project around providing support to Jason Ijames and the SAFE project in Davie but were unable to move forward with their plans. In partnership with DCHHS leadership, Summer Scardino, Community Opioid Response Coordinator, and several community partners, Leadership Davie will now help coordinate the second opioid task force meeting and a kick-off community awareness event planned for November 15th – 6:00-8:00 PM at the Government Center. Community partners – Sheriff's Office/detention center, EMS/Community Paramedic and DCHHS Community Opioid Response Coordinator/Child Welfare met recently to plan speakers for the upcoming event. The goal is to bring awareness to the opioid crisis and many available programs and resources in Davie County. In addition, the group will present plans for year one of the Opioid Settlement Funds and brainstorm ways to best utilize the funds for greatest impact and favorable outcomes.

- **Mental Health Project Update**:

  Davie County HHS has been working with our local mental health advocates, Wendy Horne and Partners Behavioral Health Management (LME-MCO) to provide information and mental/behavioral health resources for families with children in Davie County Schools. Several informational and resource materials have been reviewed, ordered and sent to Davie County Schools (via Wendy) for use during back to school orientation days. A flyer developed by Partners was co-branded with the DCHHS logo for use with the other resource materials provided. The co-branded flyer was sponsored by DCHHS and will be included in an upcoming edition of DavieLife Magazine for promotional and awareness purposes. In addition, the Opioid Community Partners group – DCSO, DCEMS/Community Paramedic, and DCHHS/Child Welfare and Public Health are working to organize a local CIT training and develop plans for a potential mental health crisis response team. There will be additional funding and staffing needs for full implementation of the plans.

- **Atrium Health Lung Bus** – Local Screening Opportunity:

  DCHHS met with Atrium Health and representatives from Davie Medical Center to coordinate, refer patients to, and promote a lung cancer screening for residents of Davie County. Atrium Health's Mobile

Lung Cancer Screening Bus will be on site at Davie County Government Center Wednesday, November 16th. Between now and November 16th, local medical providers will be working to refer individuals meeting criteria for free screening. Please see the attached flyers for more information. There are two types of referrals being accepted – one for the uninsured, underinsured and those with Medicaid (55-80 years of age), and one for the insured (any type) and uninsured (40-54 years of age).

Tailored Plans:

DCHHS signed with 5 of the 6 Tailored Plans last week – Partners Behavioral Health Management, Vaya Health, Sandhills Center, Eastpointe and Alliance Health. *A Tailored Plan is an integrated health plan for individuals with significant behavioral health needs and I/DDs. Only LME/MCOs were eligible to bid on the contract to become and operate Behavioral Health I/DD Tailored Plans, and it is a legislative requirement that Tailored Plans must contract with a licensed prepaid health plan (PHP) that covers services required under a Standard Plan contract. The Tailored Plans will also serve other special populations, including Innovations and Traumatic Brain Injury (TBI) waiver enrollees, and waitlist members, and be responsible for managing the state's non-Medicaid (state funded) behavioral health, developmental disabilities and TBI services for uninsured and underinsured North Carolinians. Qualifying beneficiaries will be assigned to one of six Tailored Plans based on their administrative county. Beneficiaries will be allowed to choose a primary care provider (PCP) and a Tailored Care Management provider. Tailored Care Management provider types include Care Management Agencies (CMAs), who deliver behavioral health, substance use, and/ or intellectual and developmental disability services and care management, or Advanced Medical Homes (AMH+) who deliver both primary care services and tailored care management services*

- **LEPC Meeting**

Davie County held its Local Emergency Planning Committee (LEPC) Meeting at DCHHS last week. Under the Emergency Planning and Community Right-to-Know Act (EPCRA), Local Emergency Planning Committees (LEPCs) must develop an emergency response plan, review the plan at least annually, and provide information about chemicals in the community to citizens. Plans are developed by LEPCs with stakeholder

participation. There is one LEPC for each of the more than 3,000 designated local emergency planning districts. The LEPC membership must include (at a minimum):

- Elected state and local officials
- Police, fire, civil defense, and public health professionals
- Environment, transportation, and hospital officials
- Facility representatives
- Representatives from community groups and the media

Davie County had representation from multiple departments and agencies including, Davie County Management and Administration, Emergency Management, EMS, DCHHS/Public Health, Fire, State Emergency Management, Duke Energy, Davie County Schools, Davie Medical Center, triad regional healthcare preparedness center (TRHPC), Brakebush Brothers, General Services, Public Utilities, and the Sheriff's Office.

- **New Medical Director for the Division of Public Health**

DCHHS Division of Public Health announced it clinical Medical Director change recently. Dr. George Kimberly has served as either the back-up clinical Medical Director or Supervising Medical Director for the past 14 years. Dr. Kimberly will remain under contract with Davie County Health and Human Services through the end of September. He will always be part of the DCHHHS/health department family; his caring and contributions are unmatched. While we honor and recognize Dr. Kimberly for his service to this department and community, we will also be welcoming a new Medical Director, Dr. Allison Snider. Dr. Snider is currently under contract with DCHHS and will take on the Supervising Medical Director role for the Division of Public Health at the end of September. She is currently working alongside Dr. Kimberly until the transition occurs. As mentioned above, Dr. Snider also serves as the Medical Director for our Employee Wellness and Acute Care Clinic. Dr. Snider owns a private practice where she provides direct patient care to individuals not covered by insurance.

- **Strategic Plan and Focus Area Accomplishments**: Specific Public Health Focus

Based on preliminary reports from Cindy Chapman, prior to updates, DCHHS met its overall performance measure goals. Each County Department is expected to meet 90% of its performance measures. Preliminary results showed DCHHS meeting 93.4% of its performance goals but additional information was updated, which show DCHHS with greater than 93.4%. There were still a few performance areas required by NCDHHS that were difficult for DCHHS to meet this past year. In addition, there were performance measures that show positive trends for DCHHS as compared to the state and other counties, but not required measures

for NCDHHS. The performance measure for Child Welfare staff turnover rates is one example. For public health accreditation purposes, DCHHS and the Division of Public Health would like to highlight bigger picture successes in its strategic plan performance. Securing additional funding for a communicable disease nurse has been part of public health strategic priorities for several years. This past year, the Governor's budget included funding for a full time Communicable Disease nurse. Luann Angell is now able to focus solely on communicable disease. The funding also allowed the Division of Public Health to have a few additional nurses

cross-trained in Communicable Disease so they can serve as back-up to our primary CD nurse. Public Health Emergency Response is also a priority area under the strategic plan. As you can see from Focus Area 1.1: Safe and Health Community: Foster a safe, secure and healthy community through coordinated, efficient, and effective public safety and human services. DCHHS was highlighted for its work around COVID-19 response and ongoing COVID-19 vaccinations efforts; its efforts with successfully transitioning LME-MCOs from Cardinal to Partners Behavioral Healthcare and signing with five out of 6 Tailored Plans; forming partnerships with Kintegra Family Medicine – a Federally Qualified Health Center- to increase access to primary care and dental services for adults, dental services for children, and behavioral health services for adults and children, including MAT for pregnant women in Davie County. And finally, one other area that DCHHS continues to develop is its partnership with Monarch New Horizons to provide life skills for intellectually and developmentally disabled adult population through its on-site café/coffee shop operations at the Government Center. The full strategic plan, focus areas, and goals are available on the county website and a copy is being provided in your Board meeting packet today.

Focus Area 1.1: Safe & Healthy Community: Foster a safe, secure and healthy community through coordinated, efficient and effective public safety and human services.

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Highlights/completions: Davie County Sheriff's Office, Emergency Services, 911 Communications and Davie County Health & Human Services staff have been intentional about keeping our community members safe and healthy during this coronavirus outbreak. Staff members have worked closely with County Administration to keep everyone abreast of new developments and responses.

County Health Department has provided (and continues to provide) Covid booster shots at the Health Department location.

Davie County transitioned to Partners Local Management Entity / Managed Care Organization (LME-MCO) in November 2022.

Davie County now offers Family Medicine Healthcare services through Kintegra Health. Services include Adult well/sick care; Diabetes and chronic disease management; Preventative care; and Behavioral Health counseling.

Davie County Sheriff's Office began providing contract law enforcement services for the Town of Mocksville on July 1, 2022.

Davie County Communications implemented the Emergency Police Dispatch system in September 2021. Radio upgrades are in process.

Issues & disruptions: The onset of COVID-19 in March 2020 has affected every dimension of how services are provided. This is a major disruption that has continued to impact FY2021-2022. Departments have collaborated well to respond to community needs.

XI. Other Business

XII. Closed Session:

- 143-318.11. **(1) To prevent the disclosure of information that is privileged or confidential pursuant to the law of this State or of the United States, or not considered a public record within the meaning of Chapter 132 of the General Statutes.**

XIII. Adjourn -