2020 Board Goals and Initiatives Update

August 10, 2020











Background

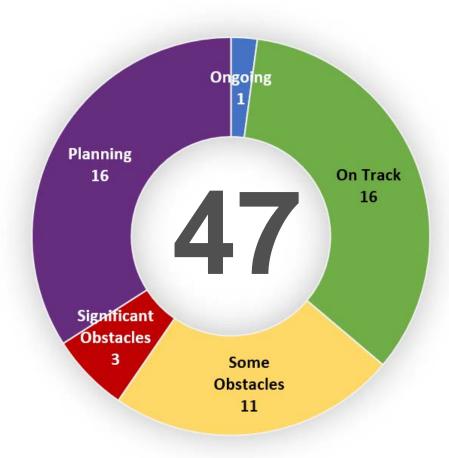
- Feb 7 BOC developed draft initiatives at the annual retreat
- Mar 3 First case of COVID-19 identified in North Carolina in Wake County
- Mar 13 Wake County declares State of Emergency in response to COVID-19
- Mar 16 BOC approves 2020 goals, objectives and initiatives at regular meeting
- Mar 26 Wake County issues Stay-At-Home mandate
- June 22 -- BOC received memo update memo summarizing COVID-19 impacts

COVID-19 and the effects on initiative progress

- The COVID-19 emergency response is the County's top priority.
- Pandemic has significantly changed how County staff operates.
- COVID-19 disrupted the planning cycle at a critical time.
 - Delayed development of staff work plans
 - Especially new initiatives and revised initiatives

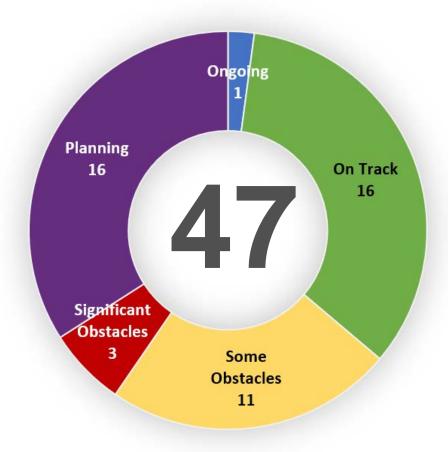
Initiative Status

April / May 2020

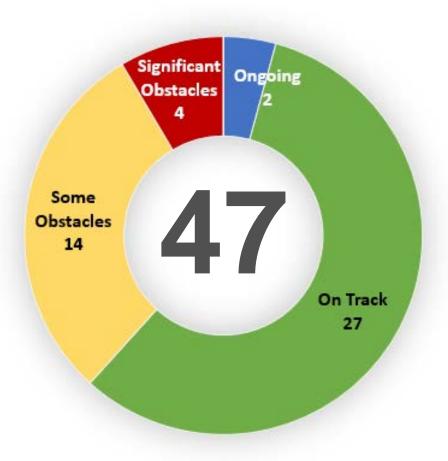


Initiative Status

April / May 2020



August 2020



Handout

- Summarizes all 47 initiatives
- Provides additional notes regarding status, highlights, and/or 2020 work plan.

Wake County Board of Commissioners - 2020 Goals, Objectives, and Initiatives

Community Health

Goal: Promote a behavioral and physical health system that benefits all residents.

Objective	Initiative	2020 Priority	Status	Status Indicator	Notes
CHT: Support and build capacity through a comprehensive Behavioral Health Plan for the treatment and management of recidents who experience behavioral health challenges.	CH 1.1: Develop programs for assisting detained and/or incarcerated individuals that suffer from mental illness.		On Track		Wake County has completed the transition to a internally managed behavioral health provider to assess and care for jail residents in 2019. For 2020, the County will be looking for ways to enhance services (e.g. anger management) offered by the Internal behavioral health provider. Additionally, County staff are working with the Wake County Sheriff's Office and community partners to provide mental health prescriptions upon release.
	CH 1.2: Develop a sustainable financial plan to support future WakeGrook operations.		Some Obstacles		The total funds committed to WakeBrook could be exhausted within two fiscal year resulting in a greater sense of urgency to develop the long-term financial plan. Our hospital partners are focused on COVID-19 so a financial plan may not be available until 2021.
	CH 1.3: Leverage Wake County Human Services and our partners to enhance data sharing related to behavioral health services.		On Track		The County will focus on the Familiar Faces program in 2020 to develop a data sharing model that may be expanded in the future. Previous updates included the implementation of programs such as the NCCARE360 and Oak City Cares referrals programs. During the 2020 retreat, the BOC clarified the definition of "data sharing" as the transfer of treatment information, not only referrals.
	CH 1.4: Enhance the availability and diversification of substance abuse treatment options.	*	Some Obstacles		The 2020 work plan includes: 1) keeping Recovery Court stable with funding and supportive services; 2) working with Aliance and community providers to expand medically assisted treatment services; 3) the expansion of peer support linking individuals to treatment and keeping them connected; and 4) consideration of capital request for treatment and recovery programs (i.e. Healing Transitions and Fellowship Home).
	CH 1.5: Evaluate performance and current metrics of crisis services to identify additional needs or service gaps.		On Track		Evaluations are planned for Behavioral Health Urgent Care and the EMS Mobile Crisis to prepare for budget considerations in FY2022. Staff will also evaluate expanding crisis service options to reduce reliance on law enforcement.

1 of 11 8/5/2020

WAKE COUNTY

Key Takeaways

- County staff are resilient
- Making progress in many areas by:
 - Expanding the use of virtual meetings
 - Reengaging with community partners
 - Modifying initiative work plans (when needed)
- However, expect fewer initiatives reaching a 'complete' status in 2020.

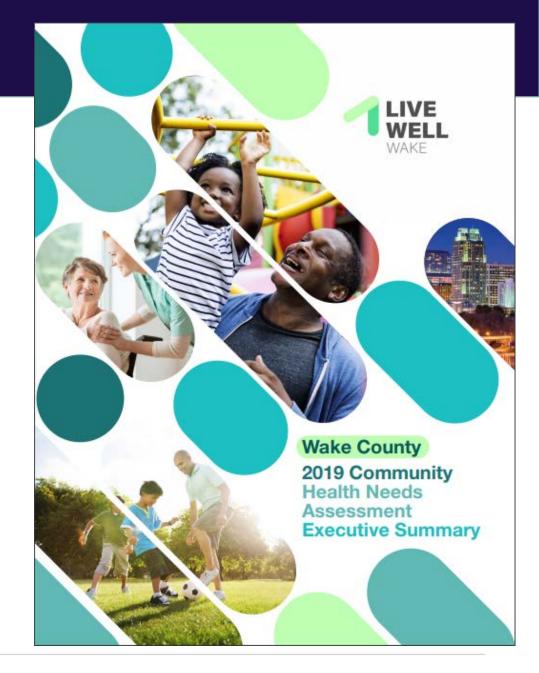
Key Takeaways

- COVID-19 will delay some initiatives. Examples include:
 - CH 2.4 Medicaid Transformation (specifically implementing the 'Healthy Opportunities' grant)
 - E 1.4 Community College Affordability
 - GG 5.2 Budget Process Engagement
 - GS 4.2 Unified Development Ordinance Amendments
 - PS 2.1 Hazardous Materials Risk Preparedness

Highlighting Progress

CH 2.2 – Live Well Wake

- 2019 Community Health Needs
 Assessment (CHNA) submitted and
 approved by the state.
- Human Services staff are assisting seven established workgroups implementing strategies.



Highlighting Progress

CH 2.3 – Healthy Babies and Moms

- Infant Mortality 2020 Workgroup Report completed this summer.
- A 'Improving Community Outcomes for Maternal Child Health' (ICO4MCH) grant provides resources to hire 3 staff to address 3 of 6 focus areas.
- Staff continue to pursue other grant opportunities to advance priorities.



Highlighting Progress

PS 4.1 – Emergency Service Volunteers

- Recruitment materials provided to each non-profit fire department
- Non-monetary grant assistance from International Association of Fire Chiefs and Volunteer Workforce Solutions
- Federal SAFER grant provides personal protective equipment, transportation reimbursement, and additional duty crew funding.
- Fire Services receive semi-annual reports from participating departments



Work Session Topics

- Potential considerations in the fall include:
 - GG 5.1 Community Engagement
 - GS 2.1 Comprehensive Solid Waste Plan
 - GS 4.1 PLANWake

Transparency Portal

- Next staff update planned for the fall
- For the latest information, visit <u>http://www.wakegov.com/trans</u> <u>parency/goals</u>



WAKE COUNTY

Discussion