

The Cleveland County Consolidated Human Services Board met on Tuesday, December 9, 2025, at 6:00 p.m.

Board members present: Sara Karner, Kale Meade, Robert Miller, Marty Hamrick, Christina Alexander, Henry Gilmore, Nancy Cline, Paula Canipe, Allison Gragg, Danny Blanton, Mary Accor, Deb Hardin

Staff present: David Cotton, DeShay Oliver, Tiffany Hansen, Andrea Power, Lindsay Bralley, Holly Thornburg, Rebecca Johnson, Sherry Vess, Destiny Davidson, Ali Wilson, Leslie McSwain, Anne Short, Nathan McNeilly, Heather Voyles

County Attorney present: Logan Roberts

CALL TO ORDER/WELCOME:

County Manager, David Cotton called the meeting to order at 6:00 pm and welcomed everyone.

CITIZEN RECOGNITION:

No citizens requested to appear before the Board.

OATH OF OFFICE TO CONSOLIDATED HUMAN SERVICES BOARD MEMBERS:

David Cotton, County Manager, explained that he would read the Oath of Office for the appointed members of the newly formed Consolidated Human Services Board and have everyone repeat after him as a group. Each appointment will need to sign their Oath of Office, and they will be notarized by the Clerk for recordkeeping purposes.

ELECTION OF CONSOLIDATED HUMAN SERVICES BOARD CHAIR:

Mr. Cotton asked for nominations for the position of Consolidated Human Services Board Chair.

Motion: A motion was made by Marty Hamrick with a second by Nancy Cline to nominate Sara Karner to serve as Chair to the Consolidated Human Services Board. The motion carried unanimously.

ELECTION OF CONSOLIDATED HUMAN SERVICES BOARD VICE-CHAIR:

Chair Sara Karner asked for nominations for the position of Consolidated Human Services Board Vice-Chair.

Motion: A motion was made by Robert Miller with a second by Mary Accor to nominate Allison Gragg to serve as Vice-Chair to the Consolidated Human Services Board. The motion carried unanimously.

APPROVAL OF AGENDA FOR THE DECEMBER 9, 2025, CONSOLIDATED HUMAN SERVICES BOARD MEETING:

Chair Karner presented the proposed agenda for the December 9, 2025, Consolidated Human Services Board meeting for consideration of adoption.

Motion: A motion was made by Marty Hamrick with a second by Robert Miller to adopt the agenda for December 9, 2025, Consolidated Human Services Board meeting as prepared. The motion carried unanimously.

RECOMMENDATION OF CONSOLIDATED HUMAN SERVICES DIRECTOR:

County Manager David Cotton did make the recommendation of Tiffany Hansen as the Assistant County Manager/Director for the Consolidated Human Services Agency. The board approved the appointment.

OPERATING PROCEDURES/CONFLICT OF INTEREST:

Chair Karner introduced Attorney Logan Roberts with the Operating Procedures and Conflict of Interest for the Consolidated Human Services Board. These procedures are instructions on how the board will now operate. Each member was emailed a copy of the operating procedures ahead of this meeting. Each board member also received a printed copy with their orientation handbook at the beginning of the meeting. Logan also reviewed the Conflict-of-Interest policy that must be adhered to by those that serve on the CHS board. Logan to explain that if you serve on another Cleveland County board that you will need to recuse yourself from voting on items that are a conflict of interest. The operating procedures and conflict of interest statements will need to be signed and returned to the clerk for record keeping purposes.

Motion: A motion was made by Mary Accor with a second by Marty Hamrick to approve the Operating Procedures and Conflict of Interest Policy for the Consolidated Human Services Board. The motion carried unanimously.

NEW BOARD MEMBER ORIENTATION:

Chair Karner introduced DeShay Oliver with the New Board Member Orientation presentation. DeShay explained that in order to meet accreditation requirements each new board member must complete orientation. DeShay asked everyone to sign and date the document located at the back of the orientation binder that states you have completed orientation. DeShay reviewed the organizational chart for the Health Department, Roles and Responsibilities of Boards of Health, 10 Essential Services of Public Health, Service Guide for CCHD, and the Community Health Assessment for 2023. The next CHA will be completed in 2027. The CHA focuses on health priorities and how we are doing with them in the County. DeShay also went over General Statutes

for local boards of health and consolidated human services boards. Allison asked about the organization chart and if there would be an updated chart that includes DSS. Tiffany did explain that we would create an organizational chart that includes everyone.

ROLES AND RESPONSIBILITIES OF CHS BOARD MEMBERS:

Chair Karner introduced DeShay Oliver with the Roles and Responsibilities of CHS board members. DeShay began by explaining that the purpose of the NC Local Health Directors Association is to help maintain the capacity of the local health department to perform at a prescribed, basic level of quality. The basic components of the process include a self-assessment by the agency that takes place in 4-year cycles. We are currently in the cycle for 2023-2027. We must complete 147 activities and 41 benchmarks during the assessment period. At the end of the 4-year cycle we will have a site visit performed by peer volunteers that include administration, environmental health, nursing and Board of Health. This visit will include review of documentation, tour facilities and conduct interviews. Upon completion of the site visit a report will be submitted with the recommendation for accreditation. Accreditation status is determined by an independent Accreditation Board. The activities and scoring requirements for accreditation are assessed under the following categories: Agency Core Functions and Essential Services, Facilities and Administrative Services, and Governance. Accreditation requirements are mandated by law. Senate Bill 804 established the NC Local Health Directors Association within NC Institute for Public Health where 17 members are appointed by the NC Department of Health and Human Services Secretary. It directs commission to adopt rules establishing standards for local health departments, and it mandates all local health departments to obtain and maintain accreditation. Rule 10A NCAC 48B defines the scoring requirements by core function and describes benchmarks and activities. The role that the board plays in accreditation is to ensure that they are provided with required policies, procedures or materials, hear or review local health department reports, discuss service costs, need for new/amended rules or ordinances, approve fees and budgets, and take other actions or be involved with efforts to assure the health department has what it needs to do its job. The board must review financial reports, discuss service costs as well as approve fees and budget, and advocate with a wide array of funders in support of local health department's efforts to secure financial resources to provide essential services. The board must also ensure input on community health improvement efforts, hear reports on community health, support partnership and coordination of resources, and educate and advocate with community leaders about community health issues and support for these issues. The board must (if the Health Director position becomes vacant) make and implement plans to recruit and secure a credentialed and qualified Health Director, and review and approve the Health Director's job description and performance evaluation. These functions can also be performed by the Consolidated Human Services director. Board members must receive initial and ongoing training on Board of Health roles and responsibilities, and the board must have operating procedures, an updated handbook and training on policies and procedures. The board must have access to legal counsel and statutes, have policies for rulemaking and appeals and demonstrate it is following said policies. Along with the local health department the board must evaluate the need for additional or amended rules/ordinances, and support prohibition of tobacco within 50 feet of LHD facilities.

POLICY REVIEW:

Chair Karner introduced DeShay Oliver with Policy Review. DeShay began by explaining that in order to meet accreditation standards we have several policies that must be reviewed and approved annually. DeShay will present each policy with a summary of the policy and any revisions made. At the end of presenting all the policies, the board will need to make a motion to either approve or make revisions to the policies. The first policy presented was the CHS Board Adjudication Policy. This policy provides the process for adjudication of any local health rules passed by the CHS Board when acting as Board of Health, this is adopted directly out of statute. The only revisions were the changed language to reflect “Consolidated Human Services Board” throughout. The next policy is the CHS Board Financial Eligibility and Fee collection Policy. This policy outlines how fees are set for health department services. Fees for health department services are authorized under N.C.G.S. 130A-39 provided they are in accordance with a plan recommended by the Health Director and approved by the CHS Board and County Commissioners, and they are not otherwise prohibited by law. Clinic fees are based on a Medicaid rate plus 25% unless cost is higher than Medicaid rate, the fee is 25%. All fees are presented to the BOCC as part of the annual budget process. This policy outlines clinical program eligibility requirements based on funding sources. Revisions made to this policy were the changed language to reflect “Consolidated Human Services Board” throughout, added fee to be recommended by the CHS Director, determination of gross income—removed overtime pay as a consideration, added “No residency restrictions” to the programs in which patients are not required to live in Cleveland county or NC based on funding source requirements. The next policy for review is the CHS Board Orientation Policy. This policy requires that all CHS Board members complete online board training. All CHS Board members will receive a copy of statutes governing public health services and review policies/procedures governing health departments. Additional training may be provided as needed. Revisions made to the policy were changed language to reflect “Consolidated Human Services Board throughout, and we added an overview of health department programs and services to the information that will be received by the Board. The next policy is Participating in Community Health Improvement Policy. This policy is in compliance with accreditation requirements, outlines how the CHS Board will ensure public participation in community health improvement. It also includes ways the public may participate but are limited to: Community Health Assessment survey and focus groups, coalitions, taskforces, and community partnerships, public comment at CHS Board meetings, and community and customer satisfaction surveys. The only revision made to this policy was the changed language to reflect “Consolidated Human Services Board” throughout. Our next policy is the CHS Board Policy on Policies.

HEALTH DIRECTOR JOB DESCRIPTION REVIEW:

Chair Karner introduced Tiffany Hansen with the Health Director job description review. Tiffany began by explaining some of the responsibilities included with the Health Director job description as listed below:

- Formulates agency policies and procedures and recommends to the governing Board for consideration; implements policies established by the Board.
- In consultation with technical and professional staff, evaluates existing programs and initiates changes directed toward improvement of programs.

- Detects administrative and management problems concerning fiscal personnel and general business activities of the agency; establishes necessary procedures and controls.
- Represents the agency at meetings and conferences with local and state groups.
- Establishes and maintains effective relationships with agency personnel, county and state officials and the general public.
- Planning and communicating with other community leaders concerning the public health mission.
- Determine and present budget each year to the Board of Health and County Commissioners for approval.
- Hires and manages departmental personnel; evaluates job performance and completes performance appraisals; and discharges employees, as necessary.
- Other duties as assigned.

Upon explaining the overall job description Tiffany explained that the action requested would be for a board member to make a motion to approve the current health director job description as presented or if anyone has any revisions that a motion would be made to approve the health director job description with revisions. Tiffany also let the board members know that a link to the health director's performance review survey would be sent out via email tomorrow to all of them. She appreciates completing this survey and providing feedback. The responses provide valuable insight that is taken into consideration when the County Manager completes the annual performance review.

Motion: A motion to approve the health director's job description as presented was made by Kale Meade and a second was made by Henry Gilmore. The motion carried unanimously.

COMMUNICABLE DISEASE PREVENTION PRESENTATION:

Chair Karner introduced Holly Thornburg with the Communicable Disease Surveillance presentation. Holly began by explaining that communicable diseases are classified as illnesses that spread from one person to another person, an animal to a person, a contaminated surface, the air, and contaminated food. The Cleveland County Health Department is responsible for the tracking of Communicable Disease for Cleveland County residents. Staff conduct contact investigations, evaluation of diseases, provide guidance on treatment to health care providers, and monitor patient's course of illness to provide follow-up for reportable diseases. Investigation and reporting of a disease in a timely manner to the NC division of Public Health via the NC Electronic Disease Surveillance System. North Carolina law mandates healthcare providers and laboratories to report over 70 diseases or conditions to their local health department. Some examples of the reportable communicable diseases include Hepatitis A, B & C, influenza deaths, measles, and salmonella and other food borne illnesses. Cleveland County reportable disease rate saw an overall decrease in 2024. Chlamydia had 582 cases in 2024 versus 600 cases in 2023, Gonorrhea had 214 cases in 2024 versus 246 in 2023, Syphilis had 30 cases in 2024 versus 43 in 2023, and HIV remained the same at 13 cases for 2023 and 2024.

SCHOOL HEALTH PRESENTATION:

Chair Karner introduced Lindsay Bralley with the Annual School Health Report. Lindsay began by explaining that school health staff are dedicated to making a difference in the lives of our children, and thus the future of our community. The school health team consists of 12 registered nurses that serve the elementary, intermediate, Turning Point Academy, Cleveland Early College High School, North Shelby School, and Alexander Youth Network Day Treatment. Four registered nurses operate the 4 middle school health centers, four Nurse Practitioners operate each of the high school health centers, there is 1 clerical support staff, 1 RN nursing supervisor, and a medical director. We are also very proud that we have 9 nurses on our team who are Nationally Certified School Nurses. The contract agreement with Cleveland County Schools is for services for 28 school sites. The school nurses provide assessments and screenings, communicable disease prevention, referrals and follow-up, case management of chronic health issues and health care plan development, education and training of both students and school staff, and support in exceptional children's program and multi-tiered system of support collaboration. There are approximately 14,500 students enrolled in Cleveland County schools. There were 31,089 nursing encounters with a student with 28,406 of those students who were able to return to class. There were forty 911 calls made. The total number of health conditions among students has increased significantly since the years 2020-2021. In the year 2020-2021, 2031 health conditions were reported in Cleveland County schools, and in the year 2024-2025 that number has risen to 3774 conditions. The number of emergency action plans for seizures in middle and high schools has increased from 22 in 2020-2021 to 70 in 2024-2025. Lindsay also informed the board about the mobile dental unit that was recently deployed to James Love Elementary. The unit will spend 3-4 weeks at the various Elementary schools in Cleveland County. This unit will help with assessment and treatment for the children in Cleveland County. During the 2024-2025 school year the dental team was able to screen Casar, Union, Bethware, Fallston, James Love, Elizabeth, Township #3, West, Jefferson, Boiling Spring, North and East Elementary Schools. Out of the 3344 students that were screened, there were 689 of those students identified as having high needs for dental care. During the 2025-2026 screenings we were able to identify the schools in order of highest need to lowest need for dental services. This screening helps in placing the mobile dental unit at the schools with highest needs first. Lindsay opened the floor for any questions. Mr. Miller asked why the number of health conditions has increased. Lindsay explained that there isn't a definitive answer to this question, but numbers did rise after Covid. Heather also explained that more students are allowed to attend school with health conditions because there are plans in place for treatment. Marty asked about the 911 calls that were made. Lindsay explained that sometimes those calls are made if the school nurse isn't present at the school as nurses do have more than one school that they work with. Destiny asked if the numbers provided include mental and behavioral health issues, and Lindsay answered that the 911 calls include that information. Sara asked when permissions forms are sent out for dental care. Lindsay answered that the permission forms are available online at the beginning of the school year, however if they are unable to complete them online then paper copies are sent home. Medicaid for dental work was mentioned and Sara commented and said that around 45% of children have Medicaid in Cleveland County, however most dental offices do not accept Medicaid.

2026 CHS BOARD MEETING SCHEDULE:

The Karner introduced Tiffany Hansen with the proposed 2026 Consolidated Human Services board meeting schedule. The schedule proposed is for the second Tuesday of every month (excluding July and December) at 6:00 PM at the Cleveland County Public Health and Social Services Building.

Motion: A motion to approve the 2026 CHS Board Meeting Schedule as presented was made by Mr. Miller and a second was made by Marty Hamrick. The motion carried unanimously.

MISCELLANEOUS:

Chair Karner asked if there was any additional business to discuss. Tiffany Hansen did express that since there were so many items to discuss at this meeting for accreditation purposes that we were unable to present the executive summary that is historically presented at the DSS Advisory Board meetings. We plan on resuming with a summary for the Agency during our CHS Board meeting in January.

ADJOURN: 7:29 PM

There being no further business, Chair Karner called for a motion to adjourn.

Motion: Mr. Miller moved, with a second by Marty Hamrick, that the Cleveland County Consolidated Human Services Board meeting be adjourned. The motion carried unanimously.

RESPECTFULLY SUBMITTED,

Tiffany Hansen, Secretary
Cleveland County Consolidated Human Services Agency