

AGENDA

REGULAR MEETING

OF THE

STOKES COUNTY

April 28, 2021

3:00 p.m.

BOARD OF SOCIAL SERVICES

ETHICS AND CONFLICT OF INTEREST REMINDER:

In accordance with the State Government Ethics Act, it is the duty of every board member to avoid both conflicts of interest and appearances of conflict. Does any board member have any known conflict of interest or appearance of conflict with respect to any matters coming before board today? If so, please identify the conflict or appearance of conflict and refrain from any undue participation in the particular matter involved.

- I. Call to Order
- II. Discussion/Adjustments to the Agenda
- III. Consent Agenda
 - A. Minutes – Regular Meeting – March 24, 2021
- IV. Board Member Comments
- V. Public Comments (Maximum Allowance of Ten Minutes Per Person)
- VI. Discussion
 - A. DSS Dashboard
 - B. REDA (Recipient Eligibility Determination Audit)
 - C. NC Child Data
 - D. April – Child Abuse Awareness Month
 - E. Compliments
- VII. Action Items
 - A. Old Business
 1. Safety
 - B. New Business
 1. Board Training
“Essentials for Social Services Governing Boards”

VIII. Closed Session

[Per G.S. 143-318.11(a)(1)(6)]

(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.

(6) To consider qualifications, competence, performance, character, fitness, conditions of appointment, or conditions of initial employment of an individual public officer or employee or prospective public officer or employee; or to hear or investigate a complaint, charge, or grievance by or against an individual public officer or employee.

IX. Adjournment

STOKES COUNTY BOARD OF SOCIAL SERVICES

MINUTES

March 24, 2021

The regular meeting of the Stokes County Board of Social Services was held on Wednesday, March 24, 2021 via the Go-To-Meeting platform. Chairman Greg Collins called the meeting to order at 3:02 p.m. Board members present were Vice-Chair Sandy Smith, Member Darlene Bullins, and Member Sonya Cox. Member Katie Tedder absent as she had notified DSS of her immediate resignation on March 22, 2021. Staff present were DSS Director Stacey Elmes, Admin. Officer Becky East, and Income Maintenance Administrator Cindy Joyce.

Chairman Collins read the Ethics and Conflict of Interest Reminder to the Board. Board members were asked if they had a conflict with any of the items listed on the agenda. No conflicts noted.

Chairman Collins asked if there were any Board members that needed to discuss or make adjustments to the agenda. Chairman Collins requested an addition to Section VI. Discussion, Item E. Staff Safety. Member Bullins motioned to approve the agenda as amended. Vice-Chair Smith seconded and the motion carried 4-0.

Chairman Collins asked for approval of the consent agenda. Member Bullins motioned to approve the consent agenda. Member Smith seconded and the motion passed 4-0.

Chairman Collins reiterated that Member Tedder resigned, effective immediately. The position is posted on the county website and the DSS website.

There were no public comments made.

Director Elmes stated that the DSS Dashboard report shows consistent numbers from last month. Some of the program numbers were pulled from NCFast this month but are questionable. The numbers with question marks do not seem accurate. Per request from Member Cox, cumulative totals for the Food and Nutrition program for clients in Stokes County are as follows: 2019 \$5,660,511.00; 2020 \$10,574,888.00; 2021 (thus far) \$8,517,381.00. The numbers for 2021 are higher due to the extra COVID-19 assistance that clients have received and continue to receive. Chairman Collins stated the CPS reports completed in a timely manner dropped to 56%. Director Elmes stated there are many variables that play into that percentage. For instance, there could be a parent issue, a court system issue, or a worker issue.

Director Elmes provided a letter from the North Carolina Department of Labor. The agency had a surprise inspection on February 4, 2021. No violations found.

Director Elmes shared the upcoming fiscal year 2021-2022, Contract log and Budget Request for Expenditures/Revenues. The contract log has all the vendors the agency plans to contract with at this time. Director Elmes stated the Budget Request for Expenditures/Revenues report is minimal, because we do not have information from the finance office for employee salaries. The numbers will increase once the salaries are finalized. Director Elmes requested guidance from the DSS Board on submitting the 2021-2022 budget to the County Manager's Office. Because of the salary study, the agency was able to have several positions reclassified that had been requested in previous budget

years. The following positions were changed: four Processing Assistant IIIs to Processing Assistant IVs, an Income Maintenance Caseworker II to Income Maintenance Supervisor II, and two Social Worker IIs to Social Worker IIIs. Director Elmes pointed out that child welfare social workers had been receiving incentive pay for years with the hope that if salaries ever became more competitive the incentive would go away. This has happened with the new salary study. Five social workers will continue to receive partial incentive until they get up to the appropriate salary. Member Bullins motioned to approve the submitted budget with the consensus of the Board that Director Elmes can amend items as needed before submission to the County Manager's Office. Member Smith seconded the motion. The motion passed 4-0.

Chairman Collins addressed the next item on the agenda, Evaluation of Director. Director Elmes stated in the packet are two examples of evaluations that other counties have used. Member Bullins advised this would need to happen in a closed session. Consensus of the Board is to have a closed session at next month's board meeting to discuss the evaluation. Chairman Collins requested all board members complete the evaluation tool, Stokes County Performance Evaluation for Social Services Director.

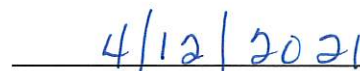
Director Elmes shared that the county has completed and approved a new personnel manual. One new item in the manual is a Carry Conceal Weapons section in County Government Buildings. This would allow employees and clients to lawfully carry weapons with a CCW permit in the DSS building. Allowing weapons in DSS would provide major safety hazards, considering the clientele and circumstances that these clientele experience. Director Elmes polled staff and found that the majority do not and will not feel safe if weapons are allowed to be carried in the building. Board members discussed the pros and cons of the issue. Chairman Collins suggested the board put this item back on the agenda for next month. Member Cox offered to contact an individual who has expertise in this area and who helped the school board in recent years. All board members and Director Elmes were encouraged to take some time to think about this item and to reach out to any resources that they may have for the discussion next month.

Chairman Collins asked if there was any old business that needed to be discussed. Director Elmes stated that Cardinal has sent an agreement for the county to accept funding in the amount of \$300.00 per child member per month during the pandemic and \$200.00 per child member per month when the pandemic is over through June 2022. This will total approximately \$579,300 to be sent at the end of March covering July 1, 2020 through March 2021 and then the county would receive approximately \$35,000 - \$50,000 each month through June 2022. These funds are for emergency placements and assessments of foster children, supplies, such as toiletries, clothing, foster parent training, etc. DSS has received an agreement from Cardinal and has submitted it to the County Manager's office for signature.

Chairman Collins asked if there was any new business to discuss. None noted.

There being no further business, Chairman Collins requested a motion to adjourn the meeting. Member Bullins made a motion to adjourn. Member Cox seconded and the motion passed 4-0. Meeting adjourned at 3:57 p.m.


Secretary


Date

Stokes County DSS Dashboard 2021

	January	February	March	Qrt. Total	Annual Total
ADULT SOCIAL WORK SERVICES					
Guardianship Cases	33	35	34		
New APS Reports Received	14	12	13	39	140
APS Reports Accepted	7	7	7	21	73
Investigations Initiated Timely [Goal 95%]	100%	100%	100%		
Outreach Visits	4	1	4	9	48
In Home Aide Programs/Family Caregiver	33	33	33		
Community Alternatives Program (CAP/DA)	79	79	74		
Representative Payee	14	14	12		
SA - In-Home	57	56	56		
Placement	0	0	0		
Adult Care Homes Monitored	2	0	6		
Total Requests for CIP	73	60	18	151	278
CIP Expenditures	\$ 26,371	\$ 11,921	\$4,854	\$43,146	\$89,633
Total Requests for LIEAP	249	93	14	356	727
LIEAP Expenditures	\$ 30,529	\$ 21,000	\$10,700	\$62,229	\$95,729
Unclaimed Bodies	0	0	0	0	2
Staff Hours Spent at Shelters	0	0	0	0	0
CHILD CARE SUBSIDY					
Children Receiving Services	213	185	180		
Expenditures	\$79,408	\$95,750	\$84,319	\$259,477	\$957,886
Waiting List	0	0	0		
CHILD PROTECTIVE SERVICES					
CPS Reports Received	49	34	45	128	386
CPS Reports Accepted	31	20	26	77	211
Children Opened	37	30	41	108	332
Open Reports	28	24	28		
Reports Substantiated/Services Needed	3	4	8		
Open Case Management	13	11	10		
Courtesy Requests	5	3	9	17	58
Substance Affected Infants Reported to DSS	5	1	2	8	18
Substance Affected Infants Accepted for Inv.	5	1	2	8	18
Reports Initiated Timely [Goal 95%]	100%	100%	100%		
Reports Completed Timely [Goal 75%]	70%	56%	84%		
Children Remaining at Home [Goal 95%]	97%	83%	80%		
CHILD SUPPORT					
Number of Children Served	1,160	1,156	1,165		
Total Collections	\$167,489	\$167,054	\$226,336	\$560,879	\$1,835,232
Paternities Established	5	3	6	14	36
New Court Orders	1	1	15	17	67
FISHING LICENSE WAIVERS					
Fishing License Waivers	0	4	1	5	19
FOOD & NUTRITION SERVICES					
Total Households	2,973	3,043	3,096		
Total Individuals	5,917	6,064	6,153		
Report Card (App. Timeliness) [Goal: 95%]	99%	97%	99%		
Report Card (Recert. Timeliness) [Goal: 95%]	100%	100%	100%		
Benefits Distributed	\$ 1,167,871	\$1,195,878	\$1,425,297	\$3,789,046	\$9,942,678

2021	January	February	March	Qtr. Total	Annual Total
FOSTER CARE					
Children Entering Care	1	5	8	14	46
Total Children in Care	90	89	91		
Children Discharged	4	6	6	16	38
Children in Care Over 1 Year	41	44	42		
% Receiving a Monthly Visit [Goal 100%]	100%	100%	100%		
% Visited in the Home [Goal > 90%]	95%	94%	94%		
Foster Care 18-21	7	7	7		
Monitoring of Children No Longer in Custody	4	1	4		
Licensed Foster Homes	27	27	27		
Sanctioned Homes	1	1	1		
# of Individuals/Families Receiving Training	0	0-Jan	0-Jan		
Recruitment Events Held	0	0	0	0	0 (COVID)
Foster Care Costs (county/state/fed)	\$103,320	\$106,605	not available	\$ 209,925	\$776,238
Children Free For Adoption	6	6	5		
Children Open for LINKS	74	67	67		
Adoptions Completed	0	0	0	0	8
Adoption Assistance Cases	180	180	175		
Adoption Assistance Costs (fed & state)	\$17,149	\$16,647	\$18,074	\$51,870	\$176,474
MEDICAID [ADULT, FAMILY & CHILDREN'S]					
# of Cases	9,233	5,250 (??)	5,863 (?)		
Report Card (Timeliness) [Goal: 85%]	99%	100%	98%		
Public Assistance Hearings (All Areas)	3	1	3		
MEDICAID TRANSPORTATION					
Clients Served	252	253	335		
Trips Provided	1,080	1,180	1,455	3,715	9,307
Monthly Cost	\$ 34,372	\$ 38,409	\$ 47,661	\$ 72,781	\$ 305,837
PROGRAM INTEGRITY					
New Claims Established	\$ 1,063.00	\$ 15,057	\$2,593	\$18,713	\$30,155
Total Collections	\$740	\$1,908	\$485	\$3,133	\$8,216
Retained in County	\$739	\$872	\$78	\$1,689	\$2,647
SPECIAL ASSISTANCE					
# of Special Assistance Cases	149	88 (??)	102 (?)		
Benefits Distributed	\$54,031	\$36,383 (?)	\$39,723 (?)	\$130,137	\$490,284
SA/MH LIAISON					
Number of Referrals during the Month	7	12	19	38	105
Open Cases at end of Month	49	48	50		
VACANCIES					
Social Work	3	3	3		
Clerical/Income Maintenance/Child Support	1	3	3		
WORK FIRST					
Total Work First Cases	57	42	43		
Number of Child Only Cases	54	38	40		
Employment Cases	3	1	3		
Referrals for Drug Testing	0	0	0		
Applicants Testing Positive	0	0	0		
Benefits Distributed	\$12,164	7,899	\$8,850	\$28,913	\$103,837
OTHER					
Voter Registrations	0	0	2	2	32
Walk-In Traffic	825	682	604	2,111	6,653

Recipient Eligibility Determination Audit (REDA)

April 2021 (4/20/2021)

20 Cases Being Reviewed

9 correct so far

2 internal control errors (failed to properly verify citizenship prior to application approval & failure to allow MAGI deductions and monthly income entered for spouse is incorrect)

May 2021

NC Child
The Voice for North Carolina's Children



NORTH CAROLINA Child Health REPORT CARD

2021

Focus On:
**THE IMPACT OF THE
COVID-19 PANDEMIC
ON NC FAMILIES**



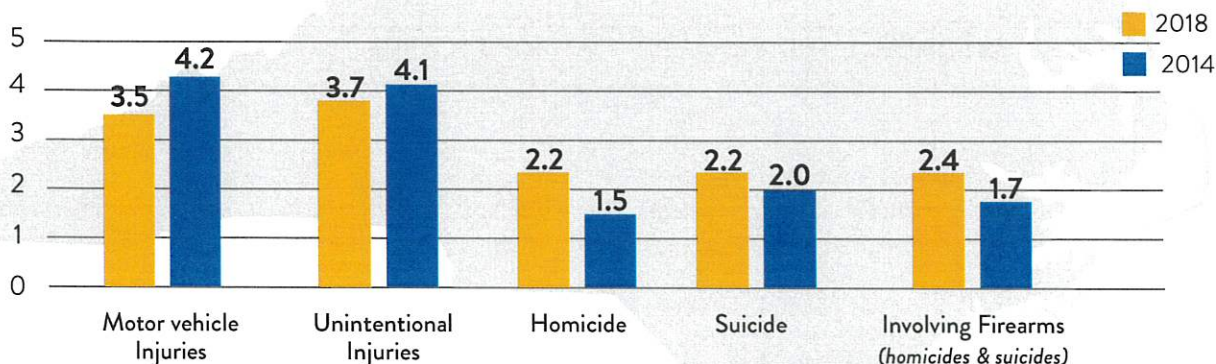
Secure Homes & Neighborhoods

The environment where children live, learn, and play has a huge influence on their health. Approximately 4 out of 10 children live in poor or low-income homes, and 9% of North Carolina's children live in high-poverty neighborhoods. Families living in these conditions have a harder time covering the basics, let alone extra fees for sports, camps, and enrichment. In many low-income communities, families have a much harder time finding safe housing, healthy food, and safe public parks where they can play and exercise — all factors that increase the risk of poor health. Community leaders and policymakers can strengthen communities by investing in public infrastructure like affordable housing, public transit, and parks. Leaders can also use tools to reduce environmental health hazards like lead paint or polluted air and water.

44%
of children live in
poor or low-income
households

GRADE	INDICATOR	DATA YEARS	CURRENT	BASE	% CHANGE	AFRICAN AMERICAN or BLACK	AMERICAN INDIAN	ASIAN	HISPANIC or LATINX	OTHER	WHITE
F	Housing & Economic Security										
	Children who live in high-poverty neighborhoods	2014-2018, 2010-2014	9.0%	14.0%	-35.7%	20.0%	21.0%	5.0%	15.0%	8.0%	3.0%
	Children who live in poor or low-income households (<200% FPL)	2018, 2014	44.0%	50.0%	-12.0%	61.0%		33.0%	68.0%	49.0%	29.0%
B	Environmental Health										
	Children who have an asthma diagnosis	2018-2019, 2016-2017	11.0%	12.7%	-1.7%	14.7%		3.0%	9.3%	6.3%	11.1%
D	Child Abuse and Neglect										
	Children who are investigated for child abuse or neglect	July 2018 - July 2019, July 2014 - July 2015	4.5%	5.7%	-21.6%	7.3%	6.8%		3.3%		4.2%
	Children who exit to a permanent living situation within 24 months	2018-2019, 2015-2016	59.9%	63.2%	-5.3%	53.6%	73.2%	90.9%	57.2%	56.8%	62.7%

North Carolina Resident Child (Ages 0-17) Death Rates by Type of Death per 100,000



Access to Care

Whether a family can get affordable health care has a huge influence on their children's health and well-being. Health care coverage is critical for ensuring that children receive necessary preventive care. Just as with healthy babies, a child's health is closely tied to whether their parents have good health care. The number of North Carolina parents without health insurance decreased from 17% in 2017 to 14% in 2018. Unfortunately, the pandemic has meant huge declines in employer-provided health coverage in 2020. We expect to see a corresponding increase in parents without health coverage. Oral health is also an important part of overall child health. Many North Carolina families struggle to find and afford oral health care for their children. In 2019, approximately 16% of North Carolina kindergarten students showed signs of untreated tooth decay.

GRADE	INDICATOR	DATA YEARS	CURRENT	BASE	% CHANGE	AFRICAN AMERICAN or BLACK	AMERICAN INDIAN	ASIAN	HISPANIC or LATINX	OTHER	WHITE
C	Oral Health Kindergarten students with untreated tooth decay	2018-2019, 2017-2018	16%	15.7%	1.9%						
D	School Health School nurse ratio School counselor ratio	2018-2019, 2015-2016 2018-2019, 2015-2016	1:1,021 1:354	1:1,086 1:375	6.4% 5.9%						
B	Health Services Utilizations and Immunization Children with Medicaid who received a well-child checkup in the past year Children ages 19-35 months with appropriate immunizations Adolescents ages 13-17 who have received 1 or more HPV vaccinations	2018, 2014 2019, 2015 2019, 2016	59.5% 80.1% 71.3%	59.3% 80.0% 57.5%	0.3% 0.1% 24.0%						
A	Insurance Coverage Percent of children with health insurance coverage Parents without health insurance coverage	2019, 2015 2019, 2016	94.2% 15.1%	95.7% 13.7%	-1.5% 10.2%	96.1% 13.4%	93.7% 19.1%	94.7% 7.1%	86.7% 50.0%	83.3% 13.2%	95.6% 9.3%

Healthy Births

One of the most important factors in an infant's health is their mother's health before and during pregnancy. Low birth weight, birth defects, and even infant death are tied to factors such as access to prenatal care, health risk factors, and health behaviors like smoking or drinking alcohol. Importantly, structural racism presents consistent barriers to healthy outcomes for women of color and their babies. While almost 70% of all women in North Carolina receive prenatal care in the first trimester, African American and Hispanic women are less likely to receive prenatal care compared to their white counterparts. Racial disparities also impact North Carolina's appalling infant mortality rate: African American babies are as more than twice as likely as to die before their first birthday than white babies.

GRADE	INDICATOR	DATA YEARS	CURRENT	BASE	% CHANGE	AFRICAN AMERICAN or BLACK	AMERICAN INDIAN	ASIAN	HISPANIC or LATINX	OTHER	WHITE
C	Breastfeeding Newborns who are breastfed exclusively for at least 6 months	2017, 2014	23.3%	26.1%	-10.7%						
C	Preconception and Maternal Health and Support Women ages 18-44 with health insurance coverage Women who receive early prenatal care	2018, 2014 2019, 2014	79.9% 67.5%	75.0% 68.2%	7.0% -1.0%	83.9% 61.0%	63.0% 61.2%		35.8% 55.9%	94.1% 66.5%	87.9% 74.2%
F	Birth Outcomes Infant mortality rate per 1,000 live births Babies who are born before 37 weeks of pregnancy	2019, 2014 2019, 2014	6.8 10.7%	7.10 9.8%	-4.2% 9.2%	12.5 14.3%	12.0 10.8%		5.6 9.4%	3.8 8.6%	4.7 9.5%
B	Teen Births Rate of births to teen girls ages 15-19 per 1,000	2019, 2014	24.0	32.3	-25.7%	34.4	41.5		40.9	11.0	15.0

Health Risk Factors

Many of the behaviors we pick up in youth can last a lifetime. That is particularly true of healthy behaviors, such as exercise and healthy eating, and unhealthy behaviors, such as tobacco and alcohol use. The good news is that cigarette and alcohol use have gone down among North Carolina youth in recent years. However, the increasing popularity of electronic vapor products is very concerning, with approximately 3 in 10 high school students reporting using these products. Health leaders should address the rise of vaping and use of other substances with increased investment in substance use prevention and cessation programs targeting youth.

Education is an important driver of health. Under-investment in Black, brown, and low-income communities has created a legacy of racial disparities that persist across education indicators. African American, American Indian, and Hispanic children are less likely to read at grade level and graduate on time than white children. Research shows that adults with higher levels of education earn more, are less likely to be unemployed, and live longer and healthier lives.

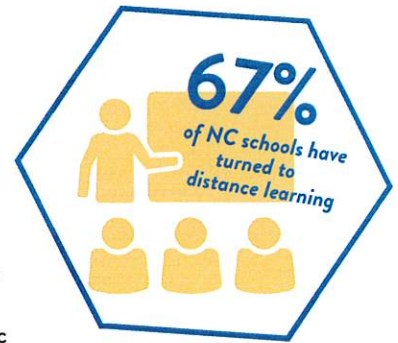


GRADE	INDICATOR	DATA YEARS	CURRENT	BASE	% CHANGE	AFRICAN AMERICAN or BLACK	AMERICAN INDIAN	ASIAN	HISPANIC or LATINX	OTHER	WHITE
D	Healthy Eating & Active Living										
	Children ages 10-17 who are overweight or obese	2018-2019, 2016-2017	30.7%	30.6%	0.3%						
	Children who live in food insecure households	2018, 2016	19.3%	20.9%	-7.7%						
F	Tobacco, Alcohol, and Substance Use										
	High school students who currently use:										
	Cigarettes	2019, 2017	8.3%	12.1%	-31.4%	4.4%		2.6%	9.7%	5.8%	9.0%
	Electronic vapor products	2019, 2017	35.5%	22.1%	60.6%	25.7%		27.3%	33.5%	41.0%	41.1%
	Alcohol (including beer)	2019, 2015	24.2%	29.2%	-17.1%	14.9%		13.4%	26.4%	24.7%	28.7%
F	High school students who have ever used:										
	Prescription drugs without a doctor's prescription	2019, 2017	16.6%	15.0%	10.7%	15.8%		12.9%	20.3%	19.3%	14.8%
	Mental Health										
	High school students who attempted suicide in the past year	2019, 2017	9.7%	8.2%	8.5%	9.6%		3.9%	15.4%	15.6%	7.6%
C	Past-year major depressive episode among adolescents aged 12-17	2019, 2017-2018	15.1%	12.0%	25.8%						
	Percent of adolescents aged 12-17 with major depressive episode who received treatment for depression	2019, 2018	43.3%	41.4%	4.6%						
	Education										
C	Third grade students reading at grade level	2019, 2016	56.8%	59.5%	-4.5%	40.8%	44.5%	75.6%	42.6%	59.5%	70.1%
	High school students who graduate on time	2019-2020 SY, 2015-2016 SY	87.6%	85.9%	2.0%	85.2%	85.1%	94.4%	81.7%	85.3%	90.8%



NC Pathways to Grade-Level Reading Whole Child Measure of Success. Learn more at: www.buildthefoundation.org/pathways

Special Issue: The Impact of the COVID-19 Pandemic on NC Families



The COVID-19 pandemic has touched the lives of all North Carolina families. As many families try to find their footing, the pandemic is putting a harsh spotlight on the deeply embedded barriers that create massive racial and economic inequities in health and well-being. Children are quite resilient by nature. But when parents lose jobs or income, as so many have recently, it can cause a cascade of other traumatic events for children.

Losing a home, skipping meals, or having a parent struggling with depression can result in serious long-term consequences for kids. Before COVID-19, nearly half of children in North Carolina lived in a family that was struggling with poverty. Now, many more families are having a hard time meeting their children's basic needs. COVID-19 is also changing the way children receive education across the state. While most schools have turned to full-time or part-time distance learning (67.3%), access to the internet and computers remains a challenge for many families, particularly for low-income households and rural communities.



The U.S. Census Bureau's weekly Household Pulse Survey is capturing the social and economic impact of the pandemic on families across the country in real time. Approximately 1 in 4 families with children struggle to pay rent, while a fifth of homeowners with children are behind on mortgage payments. Twenty percent of households with children report not having enough to eat over the past week. More than half of parents are struggling with anxiety and depression symptoms and have not received mental health care.

THE DATA PROVIDES A STARTING POINT FOR A PATH TO RECOVERY IN NORTH CAROLINA. Stakeholders can do much to support families during the pandemic, including:



Strengthening health coverage as a crucial part of North Carolina's public health response to COVID-19. Expanding access to affordable health coverage - for adults and children alike - is important to children's physical, mental, and emotional health. When parents are insured, they are better able to stay healthy and care for their children. Likewise, their children are more likely to have health insurance and to use it. Hundreds of thousands of North Carolina caregivers have lost the health coverage they previously received through their employers. Without health insurance, it can be nearly impossible for parents and caregivers to get health care when they need it.



Removing barriers to health and health care for North Carolina's most vulnerable families. We can ensure that thousands of families get the high-quality care they need, because we understand the barriers. Some of the biggest are not having a car to get to health appointments, a shortage of local health care providers, unaffordable services, and a shortage of providers who understand their patients' language and/or culture.

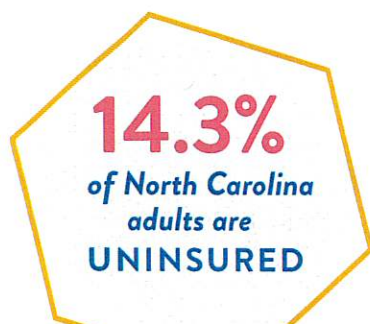


Preventing long-term harm to kids by investing in the programs that are proven to insulate families against the harmful effects of poverty. Programs such as Medicaid, SNAP, WIC, and high-quality early childhood education are proven to boost school success, and help keep kids healthy throughout their lives.



Expanding access to broadband internet. State legislators have an opportunity to get broadband internet to the 200,000 homes with students in North Carolina that still have no internet access at home. Currently, these families don't have the wi-fi access they need for their kids to attend class, and can't access telehealth services or apply for jobs or needed benefits like Medicaid or SNAP.

State legislators and health officials are justly prioritizing COVID-19 recovery efforts this year. The pandemic has had a hugely disproportionate impact on communities of color, so solutions must address the long-standing structural racism that leads to disparities in health outcomes for children and their families. Prioritizing an equitable recovery will get us closer to the goal that all children and families can thrive.



HOUSEHOLDS with NO CHILDREN

Adults who reported feeling nervous, anxious, or on edge

58.1%

Adults who reported feeling down, depressed, or hopeless

46.9%

Adults who delayed getting medical care because of COVID-19

27.0%

HOUSEHOLDS with CHILDREN

66.5%

54.6%

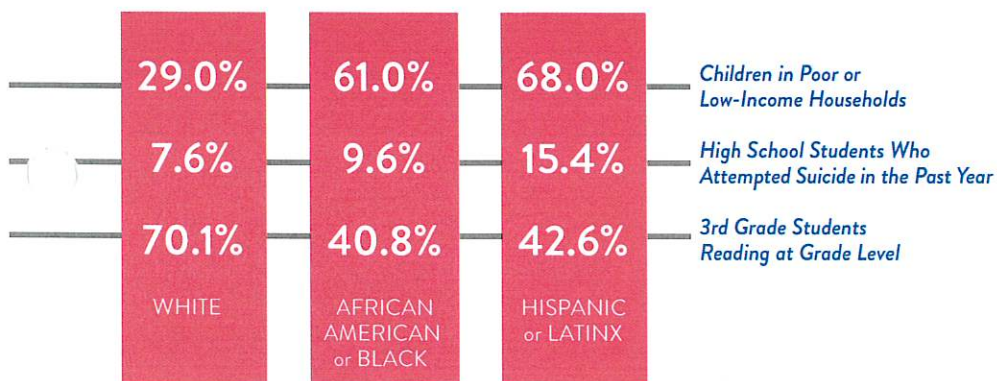
38.8%

DEMOGRAPHICS



	TOTAL CURRENT	AFRICAN AMERICAN or BLACK	AMERICAN INDIAN	ASIAN	HISPANIC or LATINX	OTHER	WHITE
Number of babies born (Live births)	118,957	28,719	1,608		18,359	5,634	64,632
Percent of total live births	100%	24.1%	1.4%		15.4%	4.7%	54.3%
Children under age 18 (%)	100% (2,293,972)	22.9% (526,308)	1.3% (30,829)	2.9% (66,012)	16.7% (383,487)	5.3% (121,607)	51.6% (1,182,808)

DISPARITIES BY RACE PERSIST IN NORTH CAROLINA ACROSS MANY AREAS OF CHILD WELL-BEING:



INFANT MORTALITY rate per 1,000 live births

White	4.7
Hispanic	5.6
Black	12.5



GRADES AND CHANGE OVER TIME: Grades are assigned by a panel of health experts to bring attention to the current status of North Carolina children in salient measures of health and well-being. Grades are subjective measures of how children in North Carolina are faring in a particular area, and are not meant to judge the performance of a state agency or agencies providing data or services. Please note that several agencies have made a great deal of progress in recent years, which may not be reflected in these grades.

Percent changes have not been given for population count data involving small numbers of cases. Grades and trends are based on North Carolina's performance year-to-year, disparities by race/ethnicity, and what level of child health and safety North Carolina should aspire to, regardless of how we compare nationally.

Data sources and additional references can be found online at:
www.nciom.org or www.ncchild.org

This project was supported by the Annie E. Casey Foundation. NC Child and the North Carolina Institute of Medicine thank our supporters and acknowledge that the findings and conclusions do not necessarily reflect the opinions of financial supporters.

QUESTIONS?

NC Child

The Voice for North Carolina's Children

3101 Poplarwood Court, Suite 300

Raleigh, NC 27604

www.ncchild.org | 919.834.6623

NCIOM

Keystone Office Park

630 Davis Drive, Suite 100

Morrisville, NC 27560

www.nciom.org | 919.445.6500

STOKES COUNTY

2020 NC DATA CARD

NORTH CAROLINA

Child population: 2,311,348
Percent under age six: 31%
Number of live births: 118,957

STOKES

Child population: 8,497
Percent under age six: 28%
Number of live births: 396



A STRONG START

Women who receive
early prenatal care:

74.2%

2018

79.5% 2017

Babies born at
a low birthweight:

9.1%

2018

7.4% 2017

Babies born
pre-term:

9.6%

2018

13.6% 2017



FAMILY ECONOMIC SECURITY

Children living in
poor or low-income homes:

44.3%

2018

42.9% 2017

Children in households
that are food insecure:

20.4%

2017

21.3% 2016

Median family
income:

\$46,169

2014-2018

\$44,490 2013-2017



NURTURING HOMES & COMMUNITIES

Delinquency rate per
1,000 youth ages 6-15:

16.9

2018

-- 2017

Children assessed for
abuse or neglect per 1,000:

56.6

2018

50.8 2017

Teen births per
1,000 girls ages 15-17:

--

2018

-- 2017



HIGH-QUALITY EDUCATION

3rd grade students
scoring proficient in reading:

51.6%

2018-2019

59.5% 2017-2018

High school students
graduating on time*:

83.1%

2019

83.3% 2018

Residents with bachelor's
degree or higher:

13.3%

2018

13.9% 2017



HEALTH & WELLNESS

Children without
health insurance:

9.4%

2018

6.2% 2017

Infant mortality per
1,000 live births:

7.6

2018

0 2017

Child deaths
per 100,000:

44.9

2018

59.2 2017



NC Pathways to Grade-Level Reading whole-child Measure of Success.
Learn more at: www.buildthefoundation.org/pathways.

NC Child
The Voice for North Carolina's Children

STOKES COUNTY

HERE'S WHAT IS CHANGING FOR KIDS SINCE THE PANDEMIC STRUCK

Fallout from the Coronavirus pandemic has meant that many more families are struggling with basic needs. These County Data Cards highlight key indicators of child well-being that elected officials should track, and respond to, in their communities.

- These data benchmarks indicate how North Carolina's children were faring before COVID-19 struck.
- Many families are fighting new and increased stressors like job loss, hunger, untreated health concerns, and isolation away from community support. Traumatic episodes like these are shown to have long-term impacts on children's healthy development.
- Officials should use these data points as a baseline and watch for changes as we move from emergency response into long-term recovery.

QUESTIONS for ELECTED OFFICIALS and CANDIDATES:

1

Many families are experiencing hunger for the first time. School and child care-based feeding programs have become lifelines in many communities. *What is your plan to ensure families can continue meeting basic needs, like affordable food?*



44% of

STOKES COUNTY

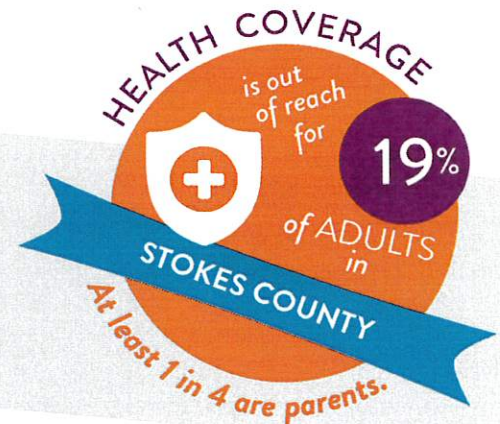
CHILDREN live in POOR or LOW-INCOME homes

2

When the emergency period ends, a second crisis will hit many families. Parents and caregivers will have to pay off months of housing, utilities, and other bills that were put on hold. *What policies will you focus on to help families who are financially struggling to make ends meet so they can provide for their children?*

3

Hundreds of thousands of North Carolina families have lost the health insurance they previously received through their jobs. *What is your plan to get affordable health coverage to more parents and caregivers in North Carolina?*



Share this County Data Card with leaders and elected officials in your community!

April is Child Abuse Awareness Month

Child abuse and neglect is a serious problem affecting every segment of our community. Our children are our most valuable resources and will shape the future of Stokes County and the world. Kimberly Childress, Child Welfare Supervisor said, "the Stokes County Department of Social Services is committed to ensuring that our children are safe and cared for. Between March 2020 and February 2021, we received 496 child protective services reports. Of those, 289 were investigated. These 289 investigated reports involved 449 children. Safety is paramount when we are involved in the lives of families."

If you suspect any of the following involving a minor child or children under the age of 18, you have a duty to report:

Physical Abuse – child has a non-accidental physical injury

Sexual Abuse – child is being sexually abused by a parent/caretaker; child is being sexually abused by a sibling and the parent/caretaker has knowledge and is doing nothing to protect; child is being abused by anyone and the parent/caretaker has knowledge and is doing nothing to protect

Improper Supervision – child is under the age of 8 and is left alone for extended periods of time; child is left with an older sibling that is not capable of providing supervision; child is unsupervised and at-risk of immediate harm

Improper Care – is the parent/caretaker providing food, clothing, and shelter; is the parent ensuring the child receives basic education

Improper Discipline – child has lasting marks, injuries, or cuts from discipline

Neglect Due To Substance Use – child is without a sober/appropriate caretaker

Neglect Due to Domestic Violence – child is present/within earshot/or has knowledge of a domestic violence incident (must be physical or serious threat of harm)

Please contact the Stokes County Department of Social Services at (336)593-2861 Monday through Friday from 8:30 a.m. to 5:00 p.m. if you suspect abuse or neglect of a child. If a report needs to be made after hours, on weekends or on holidays, please call Stokes County Communications at (336)593-8130.



April is Child Abuse Awareness Month

Child abuse and neglect is a serious problem affecting every segment of our community. Our children are our most valuable resources and will shape the future of Stokes County and the world. Children and families are facing unprecedented stress during the pandemic. "April is a time to help our community members remember the important role they play in fostering safe, stable, nurturing relationships and environments that our children need for healthy development," explained Kimberly Childress, Child Welfare Supervisor, Stokes County DSS.

Recognizing possible child abuse and/or neglect is a very important. The following actions from children may signal the presence of child abuse or neglect:

- Shows sudden changes in behavior or school performance
- Displays overt sexualized behavior that is inconsistent with age
- Has not received medical attention for a physical injury that has been brought to the parents attention
- Child's mental health is not being addressed even after it is brought to the parent(s) or caretaker(s) attention
- Is always watchful, as though preparing for something bad to happen
- Comes to school early, stays late, and doesn't want to go home
- Has bruises or marks in non-prominent, "fleshy" areas of the body (inside biceps or behind knees)
- Seems afraid of parents or cries when it is time to go home
- Reports injury by a parent or another adult caregiver

The following actions from parents or caretakers may signal the presence of child abuse or neglect:

- If a parent/caretaker shows little concern for the child (rarely responding to school's requests for information, conferences or home visits)
- Denies or blames the child for problems in school or at home
- Sees/speaks of the child as evil, bad, or a burden
- Gives conflicting, non-convincing, or no explanation of a child's injury
- Has a history of child abuse themselves
- Uses harsh physical discipline with the child

If you suspect child abuse or neglect involving a minor child or children under the age of 18, you have a duty to report.

Please contact the Stokes County Department of Social Services at (336)593-2861 Monday through Friday from 8:30 a.m. to 5:00 p.m. if you suspect abuse or neglect of a child. If a report needs to be made after hours, on weekends or on holidays, please call Stokes County Communications at (336)593-8130.



Stacey S. Elmes

From: kimber grabs <kimbersgrabs@gmail.com>
Sent: Thursday, April 1, 2021 11:00 AM
To: Stacey S. Elmes
Subject: Compliment

CAUTION: This email originated from outside of the County Network. Do not click links or open attachments unless you recognize the sender and know the content is safe.

I forget to tell you about a conversation I had yesterday with a detective from Forsyth County LE:

After we reviewed the case facts , he commented how much better Stokes DSS was than Forsyth, his general experience. Kim

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DISCLAIMER : Email correspondence to and from this sender is subject to the N.C. Public Records Law and may be disclosed to third parties.

Stacey S. Elmes

From: Brittany Norris
Sent: Wednesday, April 14, 2021 12:17 PM
To: DSS Foster Care Unit
Subject: FW: Great Workers

Wanted to share this positive message we got from

Kudos to Brandy and Kanci ☺

Begin forwarded message:

From:
Date: April 13, 2021 at 1:41:25 PM EDT
To: Anne Gladstone <agladstone@co.stokes.nc.us>
Subject: Great Workers

CAUTION: This email originated from outside of the County Network. Do not click links or open attachments unless you recognize the sender and know the content is safe.

I just want to take a moment and send you an email bragging on Brandy & Kanci! From talking with other foster parents across the state plus just working with Brandy & Kanci I have seen how much of diamonds they truly are. They are wonderful!! We always look forward to them stopping by for home visits and such, C is always asking me when they are coming to visit again and how they are his friends. Kanci has done an amazing job not only advocating for C but his whole family I feel like, and Brandy does an amazing job supporting us as foster parents. So I just wanted to shoot you an email and brag on them! Hope you guys have a great week!! ☺

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Essentials for Social Services Governing Boards Webinar

August 5 – 6, 2021

Online – Zoom

We are pleased to announce the registration is opening for our **Essentials for Social Services Governing Boards Webinar!** This class will be offered virtually via Zoom, and will take place over two mornings. It will be held from Thursday, August 5th from 9:30 am – 12 pm and Friday, August 6th from 9:30 am – 12 pm. A recording of this class will be provided for free to all course registrants.

Registration: To register for this course, please visit the [course webpage](#). The registration fee is \$195.

Topics: Join the School of Government for the Essentials for Social Services Governing Boards Webinar, a five-hour program spread over two days that will serve as an orientation for social services governing boards.

Topics to be covered include:

- How do social services agencies and governing boards fit into the human services framework in North Carolina?
- What are the legal powers and duties of the social services governing board?
- When can board members be held liable for their work with the board?
- How can your board best support your agency and community?
- Who are some of your board's key partners across the state, including professional associations and state agencies?

This webinar will be available on-demand after the live airing.

Faculty coordinator: Aimee Wall at wall@sog.unc.edu

For more information: Contact Rachel Mintel, program associate, at mintel@sog.unc.edu

We have had several questions regarding the training for DSS/Governing Boards that will be presented in August. After consultation with Aimee Wall, the following information is provided to assist in your planning:

- Several of you expressed the desire to provide this training during a board meeting with everyone in attendance. Boards can gather, watch and discuss as a group. One person will need to register and only that person's name will have a documented attendance record. The viewing can be done during the live presentation of the webinar or there will be the ability to purchase the on-demand version for later viewing.
- There will not be CLEs or CE credits offered at this time. This is the decision of the School of Government.