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WPCOG - Newsletter

July 2019

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Community & Regional Planning

Summer 2019 EIN Highlights Hickory Metro Migration and Export Trends

The latest issue of the Economic Indicators Newsletter (EIN) addresses Hickory Metropolitan Statistical Area (MSA) unemployment rates, Hickory Metro per capita personal income (PCPI), Hickory MSA migration results and Hickory MSA exports by industry.

A few key highlights of the EIN:

- The Hickory MSA's unemployment rate rose from 3.3% in October 2018 to 4.2% in January 2019 before falling back to 3.4% in April 2019.
- Between October 2018 and April 2019, the estimated number of employed persons grew from 169,953 to 170,240 (287), while the civilian labor force increased from 175,686 to 176,174 (488).
- Federal Hickory MSA Per Capita Personal Income (PCPI) grew from \$33,938 in 2014 to \$38,379 in 2017.
- Current Results from the (5-year) American Community Survey reveal that all four Hickory MSA counties had net in-migration between 2012 and 2016.
- In the previous (5-year) ACS (2007-2011), only Catawba County had positive net in-migration, while Alexander, Burke and Caldwell Counties had net out-migration.
- All Hickory MSA counties had significant net in-migration from several North Carolina counties in both the western and eastern side of the State.
- ACS data results for 2012-2016 indicate that out-migration continues from Hickory MSA counties to several counties in larger North Carolina metropolitan areas including the Asheville and Charlotte MSAs.
- Between 2010 and 2017, Hickory MSA exports increased from \$1.281 billion to \$1.970 billion as an economic recovery occurred across the region, the US and globally.
- Hickory MSA manufacturing exports come from a variety of different industry groups. The largest industry exporter in the Hickory MSA was electrical equipment, appliance and component manufacturing. About 32% of all Hickory MSA exports are from this industry sector, which includes co-axial and copper wire manufacturing.

As of 2017, the Hickory MSA ranked 104 out of 388 MSAs in the US in terms of total exports overseas. Within the state of North Carolina, the Hickory MSA had the sixth highest exports of any metro area.

Figure 8. Hickory MSA Exports (\$Millions), 2010-2017

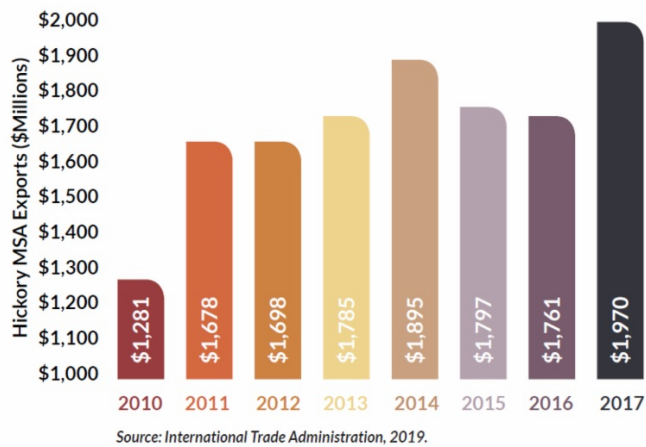
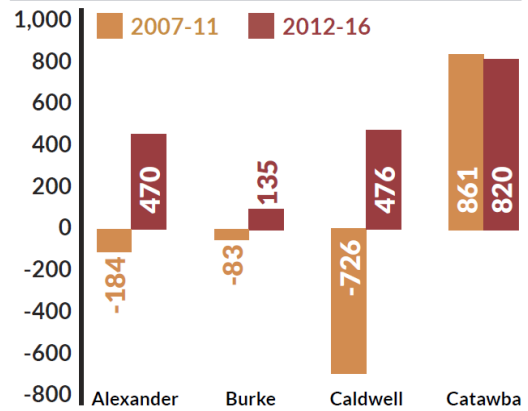


Figure 3. Hickory MSA Net Migration by County, 2007-2011 and 2012-2016 American Community Survey

Source: 2007-2011 and 2012-2016 (5-year) American Community Survey, US Census Bureau, 2019.



[The see the latest issue of the EIN](#)

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Article by Taylor Dellinger

GIS/Data Services

GIS and Data Services Division Merged

On July 1, 2019, the Western Piedmont Council of Governments Geographic Information System (WPCOG GIS) Division merged with the WPCOG Community & Regional Planning/Data Services Department.

The WPCOG GIS/Data Services division will continue to be a central resource of geographic information for the Western Piedmont Region. Services provided by the GIS/Data division include a variety of digital mapping solutions, geospatial data services, drone services, cemetery mapping, work order systems, utility mapping, and demographic data for member governments and other public and private agencies.

For more information about WPCOG [GIS/Data Services](#), visit the GIS/Data Services webpage or contact Senior Data Analyst/GIS Manager Taylor Dellinger, taylor.dellinger@wpcog.org.

Article by Trey Schweitzer

Regional Housing Authority

Section 8 Waiting List Policies and Procedures

The Regional Housing Authority (RHA) is maintaining an open Section 8 waiting list. The waiting list has been open since February 20, 2017. Currently, there are approximately 1,800 applicants on the waiting list. The RHA has adopted clear policies and procedures for accepting applications, placing families on the waiting, and selecting families from the waiting list. These procedures are followed to ensure all families have an equal opportunity to apply for and receive housing assistance. The procedures are outlined in the following three sections:

1. The Application Process

- Any family that wishes to receive assistance must apply for admission to the program. HUD requires all applicants to be placed on a waiting list.
- The RHA uses a two-step process. First, those interested must apply for the waiting list. Your application is reviewed for general eligibility, and your placement on the waiting list is determined by preferences, date and time of application submission. Secondly, when the family reaches the top of the waiting list, they are required to provide all the information necessary to determine

eligibility.

- Applications must be complete to be processed. If an application is incomplete, the RHA will notify the family and request additional information.

2. Managing the Waiting List

- The RHA uses one waiting list for all four counties in our jurisdiction. All applicants are placed on the same waiting list by their preferences and the date and time they apply.
- While the family is on the waiting list, they must immediately inform the RHA of changes in contact information, including current residence, mailing address and phone number. These changes **MUST** be submitted in writing.
- The waiting list will be updated as needed to ensure that all applicants and applicant information is current and timely. Periodically, requests will be sent asking families if they are still interested in waiting, those must be returned by the specified due date provided in the letter to remain on the waiting list

3. Selection for Housing Assistance

- As vouchers become available, families are selected for assistance in the order in which they applied and by their preferences.
- The RHA uses four (4) preferences for placing families on the waiting list. A point system is used to rank families who receive those preferences. Four (4) points are given to residents; three (3) points are given to families with a household member who is disabled, while two (2) points are given to veterans, widowers of veterans, or families with an active duty member, and one (1) point is given to homeless individuals.
- When you are selected for housing assistance, you will receive an application for admission by mail; it must be returned by the specified due date provided in the letter to avoid being dropped from the waiting list.
- After the family is determined eligible, based on their application, a briefing will be scheduled by mail. At the briefing, the family will receive a sixty (60) day voucher and they may begin searching for a rental unit.
- Search for available housing - www.gosection8.com

Persons interested in Section 8 rental assistance can apply online. Applicants eager to check their waiting list status or needing to update information can do so online, as well. The link to our online portal is wpcog.housingmanager.com

Article by Kala Guido

Transportation

Federal Certification of Transportation Planning

Every five years, the transportation planning process undertaken in the four-county region must be re-certified by the Federal Government. This typically occurs within a year following the adoption of the region's long-range transportation plan. In our region, the 2045 Metropolitan Transportation Plan was adopted last July. This August, representatives from the Federal Highway Administration and the Federal Transit Administration will visit the WPCOG offices to meet with Greater Hickory MPO staff. During this visit, staff will demonstrate how the MPO has followed a continuing, cooperative, and comprehensive ("3C") planning process, while also following Federal requirements, like environmental review and civil rights protections.

Monday, August 12, 2019, there will be an open house from 4 pm to 6 pm at the WPCOG. The Federal Government is seeking public feedback on the region's transportation planning process. Public comments may also be emailed to bill.marley@dot.gov or mailed to Bill Marley, FHWA-NC Division, 310 New Bern Ave - Ste. 410, Raleigh, NC 27601.

Article by Brian Horton

Workforce Development Board

North Carolina's Workforce Development Boards

What is the charge of the Federal Workforce Innovation and

Article by Wendy Johnson

Area Agency on Aging

Medical Emergency Preparation: Do You Have Your emergency medical file ready?

Would your family and friends know what to tell Medical Professionals about your care in the event of an emergency with you? It is something we never like to discuss. Do your loved ones or your appointed decision-makers know everything they need to know to ensure you receive the care that you need?

Too often, we do not plan, talk about our medications, or discuss our life plan and wishes with loved ones. People often do not want to talk about or plan for needs "just in case" something devastating happens. In the event of a medical emergency, there are vital pieces of information that your loved ones need to ensure you receive appropriate care. It is best to create a file or notebook of information readily available for your family should a crisis occur. This notebook needs to be stored in an accessible location for your decision-makers. The list below should be helpful in what to include.



1. **Insurance cards and identification:** The first section in your packet should hold a copy of your identification, such as a copy of your driver's license or photo id. Next, you should include copies of your insurance card(s). Health insurance cards are vital. However, you may also want to include your auto or homeowner's policy numbers in the event the incident involves those entities.
2. **Medications:** Always have a list of all prescription and over the counter medications you are taking. Make sure your physician has a complete list of the medications you take. Most medical facilities are now using electronic records to pull up medication listings. If your physician is not aware you are taking medication or over the counter pill, it can be life-threatening in an emergency. The best resource for a list of medications is the physician's office visit summary provided to you at the end of your routine physician's visit. Review the list to ensure it is accurate and include it your packet, or make your own.
3. **Allergies:** It is important for the medical provider to know any allergies you have. It is especially important if you have allergies to medications. However, all allergies need to be included. This information should be on record with your primary physician to ensure the alert is on your electronic medical record and should appear on the office visit summary you receive at the end of your routine visit. You should include this information on the bottom of your medication list if you do not use the office visit summary as your medical communication.
4. **List of physicians with phone numbers:** You should have an updated list of physicians that treat you. If you are incapacitated, your family should know not only which doctor you see for which condition, but should also have quick access to the contact information for that physician.
5. **Medical conditions:** Include a written medical history of important surgeries and dates (if you know them) in addition to current diagnoses and treatments.
6. **Legal paperwork including medical directives:** This includes "do not resuscitate/ DNR" orders, MOST forms, living will, advance directives, health care power of attorney, and even durable power of attorney. In the event of an emergency, people assisting with decision-making will need quick and easy access to paperwork to ensure that your needs are fulfilled in the means you desire and by the person you designated to provide for your wishes.
7. **Most recent lab work:** Especially if you are in the midst of a health issue, having the most recent lab work quickly accessible can assist treating physicians compare historical information to current data and make the best decisions to treat you.

- 8. Emergency Contact Telephone list:** Please include a list of important people to contact with their contact numbers. In this electronic age, many people rely on contact information in cell phones. In an emergency, there may be a loss of power, a broken cell phone, or a time that a person cannot use a cell phone. Be safe, be informed, and ensure others are informed. Have the list.

When creating the file, consider who will be using the information. Your family, friends and medical personnel can use this information to give the life-sustaining treatment you need. While it does not matter if this vital information is prettily organized, the more accessible the information, the less worry your family will have in the event of an emergency. The best idea is to have the information separated with tabs or at least include a cover sheet to indicate information located in the notebook/folder.

The notebook/folder is worthless if no one knows you have it or where it is located. Yes, it is difficult to have a conversation about "what might happen if I." What if I am in a car accident, what if I have a heart attack, what if the unexpected occurs? You want your family and decision-makers to have the information they need to respect your wishes. Have the conversation.

Creating this file is not a once and done thing. Each time there is a change in your medical history or a change in medications, you need to update the folder/notebook. Make sure the packet has the most recently updated information or it can become downright dangerous. Using the office visit summary from your medical appointment as the update is a best practice. Take the old list out and put the new one in after each appointment.

Most people need more than one copy of their emergency medical packet. Some people keep a copy in their car, at home and give a copy to the substitute decision-maker. It is a hassle to make copies of your medication list each time you see the doctor, but it could save your life. All of these things can save vital time when the right information is in the right person's hands.

Now is the time for you to be responsible for your medical care and make sure others are informed of your wishes. Set a deadline for yourself to get the paperwork together, put it in a folder, and inform your decision-makers where the information is stored. Do not forget to keep it updated!

Article by Karen Phoenix

Community & Economic Development

Synergy Labs receives \$500K grant through WPCOG, NC Commerce



Pet products developer and manufacturer Synergy Labs has been awarded a \$500,000 Building Reuse Grant from the North Carolina Department of Commerce Rural Economic Development Division in order to renovate a former hosiery site in Hildebran.

WPCOG staff assisted Synergy Labs through the grant process that will transform the 24-acre site containing more than 206,000 square feet. The renovations are part of a broader investment of over \$12 million by the company.

Currently based in Fort Lauderdale, Fla., Synergy Labs has been in operation for nearly 25 years and has 50 full-time employees. Per the grant terms, Synergy Labs will be creating 42 new, full-time jobs during the next two years. The expansion is part of a broader growth strategy that will grow the company to more than 230 employees within five years and shift the entire corporate headquarters to Hildebran.

Synergy Labs specializes in manufacturing grooming aids, stain and odor removers, training aids, flea and tick prevention, over-the-counter veterinary pharmaceuticals, catnip, and nutritional supplements. With the added space at the Hildebran site, the company will be adding food manufacturing to its product line.

Article by Paul Teague



WPCOG Calendar

July

22 - Region E Aging Providers (2-4PM)

24 - Joint Transportation Advisory Committee (TAC) & Technical Coordinating Committee (TCC) (2PM)

23 - WPCOG Policy Board Meeting (6pm) - Newton

25 - Water Quality Conference at Belk Centrum (LRU) (9AM)

26 - Air Quality Conference at Belk Centrum (LRU) (9AM)

August

12 - Regional Aging Advisory Committee (RAAC) (12-2PM)

22 - Workforce Development Board Meeting (8:30AM) - WPCOG

September

12 - Regional Aging Advisory Committee (RAAC) (12-2PM)

25 - Joint Transportation Advisory Committee (TAC) & Technical Coordinating Committee (TCC) (2PM)

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