Wake County Health and Human Services Board Meeting Minutes December 16th, 2021

Board Members Present: Staff Members Present:

DaQuanta Copeland Commissioner Vickie Adamson

Dr. Jananne O'Connell
Dr. John Perry
Nannette Bowler

Ann Rollins Commissioner Maria Cervania

Dr. Anita Sawhney
Chris Dillon
Dr. Kelcy Walker Pope
Petra Hager

Dr. Mary Faye Whisler Caroline Harper Commissioner James West Richie Hayner

Duane Holder
Guests Present:
Christine Kushner

Duane Holder
Brittany Hunt
Dr. Caroline Loop

Annemarie Maiorano Karen Morant

Kenneth Murphy
Dr. Nicola Mushanga

Dr. Nicole Mushonga Shanta Nowell Toni Pedroza

Andre Pierce
Paige Rosemond

Liz Scott Ross Yeager

Call to Order

Ms. Ann Rollins called the meeting to order at 7:31 A.M.

Next Board Meeting – January 27th, 2022

Approval of Minutes

Ms. Ann Rollins asked for a motion to approve the November 18th meeting minutes. There was a motion by Ms. DaQuanta Copeland and Dr. Kelcy Walker Pope seconded to accept the minutes. The minutes were unanimously approved.

Treasurer's Report

(Presented by Dr. Jananne O'Connell)

Treasurer Dr. Jananne O'Connell reported that there was no change in the previous reported balance of \$4,680.92.

Advocacy in Wake County

(Presented by Mr. Chris Dillon)

Mr. Chris Dillon, Senior Assistant County Manager, provided an overview of the expected advocacy from Wake County at the legislative, congressional, and administrative level for North Carolina Governor Roy

Cooper and United States President Joe Biden. To establish an understanding, the Board of Commissioners sets two-year goals for legislature on the State and federal level in conjunction with the North Carolina Association of County Commissions (NCACC). As a biannual body, the NCACC has an annual goals conference every other January. When the NCACC adjourns in 2021 in December, they will return in January, meaning that the next conference is scheduled for January 2023. The conference for 2021 was very successful in transferring Wake County goals to the State's goal list. This included some intricately crafted language surrounding the "coverage of healthcare gaps." This term, politically, is preferrable to the commonly used "Medicaid expansion." Such change in language surrounding expansion can allow for movement, which was seen this year in the North Carolina Senate in the bipartisan infrastructure agreement that later became a bill passed by Congress. This bill outlined many positives for the twelve states who have yet to expand Medicaid coverage. Senator Phil Berger from Rockingham County was able to garner enough votes within the Republican majority caucus in the Senate to expand Medicaid. This is a marked shift since the Affordable Care Act (ACA) passed in 2010. Mr. Dillon explained that the problem came in the North Caroline House of Representatives who had a significant number of new members not well versed or educated to the benefits to their community's populations. What came from this change was an agreement in the State budget to form a select committee to investigate what Medicaid expansion looks like for North Carolina.

There is some pressure from federal representatives in regards to the Build Back Better bill, which currently sits in the Senate after having passed the House. While federal representatives will cover expansion gaps in states that have not passed Medicaid expansion, they could not put restrictions such as work requirements on those states. This means that these states would not be able to craft their own plans (as Louisiana, Indiana, and Kentucky have). Mr. Dillon stated that there was pressure on the Republic majority in the House to come to action before this language becomes effective in the event the bill is passed.

In 2022, there is a lot of advocacy expected surrounding hospital groups, rural areas, disparities within counties, and the ongoing opioid crisis. Mr. Dillion said that a lot of Republican counties to the West were pushing hard for the opioid crisis in particular. Though a lot of effort was expected at the legislature for healthcare coverage gaps, the exact details are still unknown. Wake County staff focus their advocacy by informing Representative Erin Paré of Holly Springs – the one member of sixteen in the majority. This is presented as a more informative view of those the coverage will assist directly. There has been a small victory in Medicaid expansion for pregnant mothers that allowed coverage to jump from ninety days to a full year post-maternity. Because this was successful in passing, staff are hoping to build off that victory.

The State budget also has significant monies set aside for mental healthcare as well as pilot programs around North Carolina that could be especially beneficial. Another big item in the budget is \$300 million allocated to moving the Department of Health and Human Services (DHHS) headquarters off of Dorothea Dix and onto Blue Ridge Road (across from the North Carolina Museum of Art). This win allows these employees to stay in Wake county as the original proposal had the headquarters moving to Granville county.

Commissioner James West asked Mr. Dillon to speak more on the monies expected regarding the opioid crisis. While Assistant County Manager Denise Foreman has been largely involved in this process, Mr. Dillon stated that there was a federal settlement with an opioid manufacturer and North Carolina was included in the settlement. While every county will receive funds, they were entered into a formula that looked at county population to determine the final amount each would receive over the next ten to fifteen years. This is very similar to the tobacco settlement, but the opioid settlement money will come directly to the county and must be used for treatment, behavioral health, and risk assessments associated to the opioid crisis. The funds explicitly cannot be used to supplement. Depending on the terms of the settlement and the county's agreement, this money should arrive soon.

Commissioner Vickie Adamson provided further context for newer Board members. The Board of Commissioners (BOC) creates their own legislature agenda for the State and federal levels. Mr. Dillon's task is then to go to a level of government and advocate on behalf of the BOC. Traditionally, the Health and Human Services Board (HHSB) has participated in this process by crafting its own list of advocacy needs. This would allow individuals from the HHSB or the BOC to go as a group and meet with State legislature and delegations to review these needs. Mr. Dillon clarified that there were sixteen members in the legislative delegation – eleven House of Representatives members and five Senators – to represent Wake County. There are two Co-chairs of the delegation – Senator Wiley Nickel of Cary and Representative Julie von Haefen of Southern Wake County. Mr. Dillon suggested having them attend a HHSB meeting to better verbalize the Board's needs so that they can return the information to the full delegation.

There was discussion surrounding previously held advocacy events by the HHSB prior to the COVID-19 pandemic. However, Board Chair Ann Rollins stated that Mr. Dillon's suggestion with the two Co-chairs of the delegation could be especially valuable.

Further details explaining the long session and short session of legislature were presented. Legislators are elected for two-tear terms. Their first year is known as the "long session" where they create the budget for two years. This budget, which lasts for two years, was just recently passed. If there are any "big ticket" items that members want on that budget, this must be done prior to the long session. The "short session" – the year following the long session – can only be used for smaller items as the budget is not being discussed. Because of this, Board members should be prepared to advocate as close to the 2023 budget conference as possible. This is all in contrast to the budget set by the BOC, which is an annual budget. The Board has a chance to advocate when presented with the Health and Human Services Director Nannette Bowler's budget by stating what they would like to prioritize. The majority of funds for Health and Human Services comes from State and federal sources.

Ms. Rollins agreed that addressing individual delegation members during the short session to provide content or education may be the best path forward. In the long session, there is no time for this deep dive into information as the delegation is focused on action. Commissioner Adamson stated that because the members of the delegation only serve two-year terms, many new members are sworn in and go immediately to budget planning. This is a fast-paced process as compared to the BOC's budget that receives full-day retreats and listening sessions for members of the public. Wake county operates under a County management form of government. Between December and January the County Manager's Office takes budget expansion requests from various departments. So Ms. Bowler will present County Manager David Ellis with a budget of what Health and Human Services would like to see. In January, the BOC meets for a couple days to establish goals and priorities – usually upwards of 75. A top five of these seventy-five will be identified and that is where the majority of money will be distributed if there is expansion.

Mr. Ellis presents the budget to the BOC and the public at the same time near the end of April and the beginning of May. This budget is usually a document nearing seven hundred pages. The only way that expansion can occur in Wake county is a tax increase. Understandably, the community will view such an increase as extremely negative. It is then the BOC's responsibility to educate the public on the reasons behind the tax increase and what the community will receive in exchange for higher taxes. This may be a contribution to public education or an increase in workers for Child Protective Services (CPS). Once received, the budget must be finalized by the BOC by June 31st. Because of all this, the HHSB has two levels of advocacy available – once when the County Manager's Office is crafting the budget and again when the BOC receives and finalizes the budget. A tax increase could prompt another opportunity for advocacy if Board members wished to help sell that increase to the community.

Environmental Services Director's Update

(Presented by Dr. Caroline Loop)

Dr. Caroline Loop, Deputy Director of Environmental Services, provided four brief updates. The first was that a pre-hearing conference and appeal hearing had been held the day before to address the issuance of a notice of violation (NOV) by Environmental Health and Safety Division. This was issued based on regulatory guidance from the State concerning the use and characterization of a pool. Environmental Health and Safety does anticipate that this will come as an agenda item during the January Health and Human Services Board meeting.

Next, Dr. Loop shared that Environmental Services was hard at work on the budget, including business plans for the three-year period focusing on four key areas.

- Providing excellent customer experience while delivering services
- Enforcing regulations while supporting customer compliance
- Preserving and protecting the environment
- Promoting and positively impacting vulnerable populations (humans and animals alike)

On the hiring front, Mr. James Hawhee would be stepping into the role of Water Quality Director on January 4th, 2022. Mr. Hawhee has worked with the State for eleven years and is a University of North Carolina at Chapel Hill graduate with a Master's degree from the University of Hawaii. He also holds a law degree from the University of Georgia. Mr. Hawhee displayed an impressive ability to address complex issues with a diversity of perspectives and has advanced North Carolina policy, such as nutrient management. This is especially timely as this is expected to be a big issue with nearby lakes getting more nutrient rules, starting with the Neuse River. Mr. Hawhee will lead the Water Quality division and will be deeply involved with water resources, wastewater program, groundwater, and watershed management.

Finally, the County was celebrating the career of Mr. Andre Pierce, Environmental Health and Safety Director, as he entered retirement. Having worked with the County for 32 years, Mr. Pierce would be retiring on January 1st, 2022. Mr. Pierce started his career in onsite wastewater in October 1989 as a Registered Sanitarian and has advanced and become a leader in Environmental Health and Safety not only in Wake county, but also at the State and federal level. Under his tenure, Environmental Health and Safety was awarded the prestigious Samuel J. Crumbine Award for demonstrating unsurpassed achievement in providing outstanding food protection services to the community. This success was partially attributed to the risk factor studies Mr. Pierce presented to the Health and Human Services Board. He is a continued champion of quality and consistency and has made the county a safer place. Mr. Pierce will be stepping into a new position as Retail Food Protection Division Director of the Office of State Cooperative Programs at the United States Food and Drug Administration (FDA).

Commissioner James West noted that the North Carolina Association of County Commissioners had an Environmental Steering Committee that looks at environmental infrastructure and collaborates closely with the Department of Environmental Quality. He asked how Wake County had connected with the Committee, if they have, and Dr. Loop stated that she would work with Mr. Chris Dillon, Senior Assistant County Manager, to obtain additional information about this Committee and their work.

Health and Human Services Director's Update

(Presented by Mr. Ken Murphy, Ms. Rebecca Kaufman, Dr. Nicole Mushonga, Ms. Nannette Bowler, and Ms. Toni Pedroza)

Mr. Ken Murphy, Senior Deputy County Attorney, swore in Ms. Rebecca Kaufman, Public Health Division Director, into her role as local Health Director in Wake County.

After being sworn in per North Carolina law and general statutes, Ms. Kaufman briefly introduced herself. Joining Wake County from South New York, Ms. Kaufman has a Master's in Community Health and started her career as a Public Health Educator. Her previous role was a local Health Director in New York for five years, including those impacted by the COVID-19 pandemic. Ms. Kaufman expressed appreciation for Dr. Nicole Mushonga, Assistant Physician Director and Epidemiology Program Director, and Ms. Nannette Bowler, Health and Human Services Director, for their guidance.

Dr. Nicole Mushonga provided a COVID-19 update, starting with the new Omicron variant. There are currently many unknowns and staff are trying to understand how transmissible the variant is. However, all appearances point to the Omicron variant being highly spreadable – much more so than the Delta variant. Currently, there are two detected cases of Omicron in North Carolina – one in Mecklenburg and another very recent case in an unknown county. Staff do know that this unknown case was not in Wake county. The Omicron variant has been identified in over half of the nation and has even spread to the point of causing closures in New York. Because of this, staff are closely monitoring new studies and potential impacts to guidelines from the Centers for Disease Control and Prevention (CDC). Current research about the vaccine that is available does indicate that a third dose of the vaccine is recommended. Though based on early and preliminary data, this report indicates the booster does provide protection – especially against Omicron.

Recently a new presidential campaign was unveiled with nine recommendations for the COVID-19 pandemic.

- Make boosters accessible for all adults
- Make vaccines accessible to protect kids and keep schools open
- Expand at-home free testing
- Craft stronger Public Health protocols for international travel
- Establish protections to workplaces to keep the economy open
- Support rapid response teams to help with rising cases
- Provide COVID-19 treatment pills to prevent hospitalization and deaths
- Continued commitment to global vaccine efforts
- Ensure preparation for future pandemics

Dr. Mushonga also shared that Wake County had moved to an appointment program for COVID-19 testing. This system allows staff to prioritize those who have been exposed and need testing as directed by Public Health. By monitoring those with symptoms, it creates the ability to more effectively track them. The system also allows staff to increase the number of tests if there is a surge in requests. Currently, just under 5,000 tests are being offered per day. With tests available via appointment for twelve hours a day and six days a week, this is a large capacity that allows some sharing of resources with the community. This sharing means that at-home testing is more accessible.

Public Health recently had an audit for their COVID-19 vaccination and immunization programs and celebrated receiving 100% compliance across all vaccination sites. Staff were recognized with a thank you postcard with words of affirmation from leadership as well as donuts (a total of thirty-seven dozen donuts were ordered). This included staff that took on responsibilities outside of their work duties to assist with COVID-19 operations. Another cause for celebration was a promise to attend and present Geographic Information Services (GIS) mapping to the International Conference on Emerging Infectious Diseases. GIS mapping was used to identify areas of high case rates or low vaccination rates for COVID-19. This allowed staff to strategically deploy intervention by Public Health officials. This conference will be held in March 2022 in Atlanta, GA.

When asked how staff navigate the political aspect of COVID-19, Dr. Mushonga responded that they stuck to the science and facts of the pandemic. It was important to be transparent about why any changes or movements were occurring as the reassurance needed to focus on the act as a team effort. This means that others should be encouraged to share their thoughts and opinions, no matter if it differs from guidance or established facts. People deserve to be heard and receive the reason as to why things are occurring.

Ms. Nannette Bowler thanked the staff for their work during the pandemic. She informed the Board that Public Health was currently going through a restructuring that had already been presented to County Manager David Ellis and Mr. Duane Holder, Deputy County Manager. As soon as more details are solidified. Ms. Bowler will return to review the new structure.

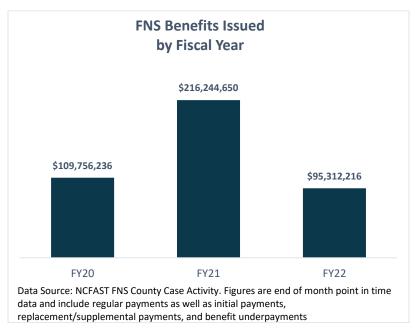
Ms. Toni Pedroza, Deputy Director of Social Services, provided updates surrounding the programs in Social Services. First, she shared that Governor Roy Cooper announced that the North Carolina Department of Health and Human Services (NCDHHS) Secretary Mandy K. Cohen, M.D. will be stepping down from the agency after five years of service to the state. Governor Cooper has appointed Mr. Kody Kinsley, current NCDHHS Chief Deputy Secretary for Health, to succeed Ms. Cohen beginning January 1st, 2022. Mr. Kinsley is also the current lead of the COVID-19 operations for the state.

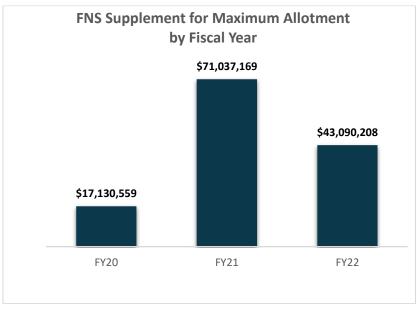
The Low Income Household Water Assistance Program (LIHWAP) is a temporary emergency program to help families afford water and wastewater services. The program runs from December 1st, 2021 to September 30th, 2023 or until the funds are exhausted. Households that currently receive Food and Nutrition Services (FNS), Work First/Temporary Assistance for Needy Families (TANF) or those that received assistance from the Low Income Energy Assistance Program (LIEAP) between October 1st, 2020 and September 30th, 2021 are automatically eligible to receive this benefit. The first priority group is for those whose service has already been disconnected followed by the second priority group of those households in danger of disconnection. These groups will be served before the program is open the third and final priority group – anyone who needs help with water assistance. Applications will be accepted beginning January 3rd, 2022. Wake County's initial allocation for LIHWAP is \$946,382 for water assistance and \$184,997 for administrative costs. An additional allocation will be received now that the state budget has passed. The eligibility criteria for the LIHWAP is outlined below.

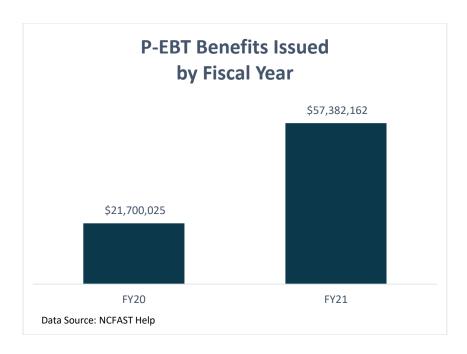
- Household contains at least one United States citizen or eligible non-citizen
- Income is equal to or less than 150% of the Federal Poverty Level
- Is responsible for the water and/or wastewater bill
- For the first and second priority groups, must have services that are disconnected or are in jeopardy of disconnection or an outstanding bill
- The third priority group is for anyone who meets the eligibility criteria

The next update was in Food and Nutrition Services (FNS) where a temporary 15% increase in benefits had ended on September 30th, 2021. Beginning on October 1st, 2021, a permanent 25% increase went into effect and raised the average per-person benefit from \$121 to \$157. There are two current waivers that also increase access to FNS benefits. The first are waivers which are tied to the State of North Carolina Emergency Declaration and end when the governor rescinds the declaration or on December 31st, 2021. This calls for telephonic signatures for applications/recertifications, waiver or interview requirements, extension of certification periods, and maximum household allotment supplements. The second are waivers tied to the federal declaration, which will end thirty days after the federal Public Health Emergency ends. The Able-Bodied Adults Without Dependents (ABAWD) waiver does have time limits as it holds student work requirements for certain college students.

The Pandemic EBT (P-EBT) provided additional food benefits to school-aged children in FNS and non-FNS households who were not able to access free or reduced price meals at school during the pandemic. This also includes preschool-aged children in FNS households. The most recent P-EBT issuance was in the summer of 2021. P-EBT will be available for the 2021-2022 school year, but benefits will not start to be issued until the end of January. Benefits for September through December will be issued in January and monthly thereafter through May (to be issued in June). School children will be eligible based on their number of virtual learning days and COVID-19-related absences. Data surrounding FNS figures were shared (below).







Additional options for food insecure families are the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC); Curbside Meals, which provides meals for children and teens up to age eighteen; free or reduced price meals at school; and community food hubs.

The Child and Family Well-Being Division is one step in an overall transformation happening at the state level. The state has a goal of moving from Child Welfare to Child Protection and Well-Being. North Carolina's Child Protection System refers to state and county agencies primarily responsible for implementing federal and state legislation on preventing child abuse and neglect, protecting children from further maltreatment, reuniting children safely with their families, and finding permanent families for children who cannot be safely reunited with their families. The child protection system includes the DHHS Division of Social Services Child Welfare Services section and County departments of Social Services. North Caroline's Child- and Family-Serving Systems include state and local child protection agencies; Division of Health Benefits/Medicaid; Division of Mental Health, Developmental Disabilities, and Substance Abuse Services; Department of Public Safety, including the juvenile justice section; Division of Social Services' economic stability sections; Department of Public Instruction; Division of Public Health; Division of Child and Family Well-Being; and non-governmental entities such as community-based service providers, hospitals, housing supports, educational institutions, childcare, and trust community institutions.

Finally, Ms. Pedroza shared that the NCDHHS announced that it would be realigning its programmatic section areas while establishing a new division. The goal of this division is to focus on whole-person health, transparency, accountability, and health equity work to create a healthier North Carolina. The new Division of Child and Family Well-Being will include four programmatic areas:

- Food and Nutrition Services (FNS)/Supplemental Nutrition Assistance Program (SNAP)
- Community Nutrition Services (which includes the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and the Child and Adult Care Food Program (CACFP))
- Early Intervention (infant to toddler program for children with special needs)
- Whole Child Health (which includes child behavioral health programs and children and youth health programs). Partners with the community and school systems. Triple P program and nurse consultations.

These programs were formally in Social Services, Public Health, and Mental Health, Developmental Disabilities, and Substance Abuse divisions at the state level.

Committee Chairs Update

(Presented by Ms. Annemarie Maiorano, Mr. Darryl Blevins, Ms. Petra Hager, Mr. Richie Hayner, Ms. Karen Morant, and Mr. Ross Yeager)

Ms. Annemarie Maiorano, Deputy Director of Operations, thanked the Health and Human Services Board for allowing the Regional Center Directors to attend the meeting to report out on their specific centers and highlights from 2021.

Mr. Darryl Blevins, Director of the Eastern Regional Center (ERC) in Zebulon, provided an update covering July 2021 to November 2021. During that timeframe, the ERC had administered 17,632 COVID-19 tests and 4,138 vaccines. Its clinic served 1,061 patients and 635 summer meals were distributed through the food hubs in the Carver Center and YMCA at Knightdale Station. The ERC brought in \$335,155.35 in revenue during this time. With community partnerships, over 1,000 resource documents were distributed throughout the community. Over 3,000 residents assisted via the distribution of resources at ERC. The Center continues to hold regular virtual meetings with its Community Advocacy Groups and providers to share information on services and County updates. The ERC continues to work with the Wake County Social and Economic Vitality (SEV) Team to strengthen partnerships in the East. Current focus is centered on increasing entrepreneurial opportunities and expanding access to programs. ERC staff have been working with Wake county Transportation to promote the new GoWake SmartRide Northeast transportation service, which starts in January 2022. The ERC plans to host free computer training for seniors where participants will learn how to schedule rides on the new service.

Ms. Petra Hager, Director of Departure Center in Raleigh, outlined the following highlights from July 2020 to November 2021.

- 76,504 total COVID-19 tests from December 2020 to March 2021
- 23,372 total COVID-19 vaccinations from April 2021 to November 2021
- December 2020 Center opened its new location at 5809 Departure Drive in Raleigh
- December 2020 through March 2021 Center was utilized as a COVID-19 testing site
- April 2021 Center being utilized as a COVID-19 vaccination site
- August 1, 2021 Center started offering mental health services with 53 clients receiving assistance from August to November
- August 17, 2021 Prenatal Clinic started offering services two days a week. Just over 260 clients were seen from August to November

Ms. Hager also briefly touched on the North Central Community Advocacy Committee (CAC), which continues to hold monthly virtual meetings while supporting Emergency Food Assistance, Summer Food Program, vaccination efforts by Census track in the North Central Zone, and the 2022 Community Health Needs Assessment (CHNA).

Mr. Richie Hayner, Director of the Southern Regional Center (SRC) in Fuquay-Varina, reviewed data points from July 2021 to November 2021.

- 832 Tax revenue transactions
- \$854,394.33 Tax revenue collected
- 616 death certificates provided

- 158 birth certificates provided
- 7 marriage licenses provided
- 78,283 COVID-19 tests administered
- 4,975 COVID-19 vaccines administered
- 33,654 instances of foot traffic in the SRC

The SRC Health Clinics completed their renovations with services set to resume in January 2022. Advance Community Health was open one day per week in the month of October. SRC has served 206,121 meals through its food security food hubs located in the Garner YMCA, Juniper Level Baptist Church, and Pine Acres Community Center. Municipal Elections were also held at the SRC where 340 members of the community voted. In the NCWorks Career Center, over one hundred and twenty individuals obtained employment. The Career Center boasts a 99% customer service satisfaction rate. Finally, Monarch resumed its mental health services on July 1st, 2021.

Ms. Karen Morant, Director of the Western Health and Human Services Center (WHHSC), explained that the Western region service zone and Network of Care in 2021 covered Apex, Cary, Morrisville, and other "outstanding unincorporated" Western Wake communities. The WHHSC prioritizes affordable housing, food security, seniors' health and wellbeing, workforce development, mental health, and transportation. Ms. Morant outlined the important of the Western Region Community Advocacy Committee (WRCAC). Its vision statement is as follows – "A Network of Care that implements sustainable programs, broadens services and resources, and has a positive impact on the quality of life in the Western Wake community." WRCAC Network of Care anchor partners include the White Oak Foundation (Goshen Clinic), Western Wake Crisis Ministry, Dorcas Ministries, Advance Community Health, Taylor YMCA, Cary First Christian Church, Kirk of Kildaire Presbyterian Church, the Carying Place, Town of Apex, Town of Cary, Town of Morrisville, and Wake County Health and Human Services. The collective impacts for the WRCAC are outlined below.

- Leveraging partnerships to establish testing and vaccinations in the Western Region
- Optimizing service delivery capacity to sustain food security in marginalized neighborhoods through June 2022. Received \$188,702.21 in County funds for six months
- WRCAC Affordable Housing Action Group partnered with faith and town leaders to develop affordable housing. Currently there is a proposal for around 600 housing units
- WRCAC Executive Committee advancing the vision of a Western Regional Network of Care and Western Regional Center to increase access and equity through an integrated service delivery system across the region

While the WHHSC itself did not perform COVID-19 tests or vaccinations, it did distribute 296,691 meals through its four food hubs.

Mr. Ross Yeager, Director of the Northern Regional Center (NRC) in Wake Forest, outlined data points from July 2021 to November 2021. The NRC administered 90,850 COVID-19 tests and 3,964 COVID-19 vaccinations. With food security, the NRC provided 2,834 lunches to the Wake County Public School System (WCPSS). Their food hub distributed 3,659 boxes for a total of 73,947 meals. Excluding those present for COVID-19 testing and vaccinations, there was a total of 13,233 individuals for foot traffic. The NRC brought in \$763,738.17 in revenue. The NRC partnered with the Wake Forest Library to host scavenger hunts and story time events during the WCPSS Summer Nutrition food efforts. They also continued to offer drive thru services for birth certificates and revenue collections. Staff were able to promote health summer activities for youth by partnering with the Boys and Girls Club as well as the Parks and Recreation departments in Wake Forest and Rolesville. Four outstanding entry-level staff members were promoted to higher level positions within Health and Human Services. The Northern

Regional Center Community Advocacy Committee (NRCCAC), in partnership with the Rolesville Chamber of Commerce, has been simulcasting a monthly webcast called Northern Living in Good Health Together (L.I.G.H.Ts). Each month guests speakers are featured and discuss issues that are timely and impact the local community health and well-being.

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• None

Adjournment

The meeting was adjourned at 9:35 A.M.

Respectfully submitted by Ms. Brittany Hunt