Wake County Health and Human Services Board **Meeting Minutes December 15th, 2022**

Board Members Present: Staff Members Present:

DaQuanta Copeland Commissioner Vickie Adamson

Wanda Hunter Nannette Bowler Christine Kushner Richie Havner Dr. John Perry Duane Holder Ann Rollins **Brittany Hunt** Rebecca Kaufman Dr. Anita Sawhney Tanyetta Sutton Katie LaWall

Dr. Kelcy Walker Pope Annemarie Maiorano Commissioner James West Yolanda McInnis Dr. Mary Faye Whisler

Janny Mealor Tamara Wilson Ken Murphy

Shanta Nowell **Guests Present:** Antonia Pedroza Cathy Eagles Morgan Poole Frankie Eagles Nicole Singletary

Lea Eagles Commissioner Cheryl Stallings

John Myhre Dr. Joseph Threadcraft John Riley LaToya Toussaint Lechelle Wardell

Ross Yeager

Call to Order

Chair Ms. Ann Rollins called the meeting to order at 7:37 A.M.

Next Board Meeting – January 26th, 2023

Approval of Minutes

Ms. Ann Rollins asked for a motion to approve the November 17th meeting minutes. There was a motion by Ms. DaQuanta Copeland and Ms. Christine Kushner seconded to accept the minutes. The minutes were unanimously approved.

There was one clarification to an item in the agenda packet (outside of the minutes) which represented the survey results of the preferred time for the Health and Human Services Board to meet. This change will be rectified on that particular document, but was not an official part of the minutes.

Treasurer's Report

(Presented by Chair, Ms. Ann Rollins)

In the absence of Treasurer Ms. Jananne O'Connell, Chair, Ms. Brittany Hunt, Executive Assistant of the Health and Human Services Board, provided the Treasurer's Report. During the November meeting, the Board fund was \$7,230.92. There had been an addition of \$350.00 of stipends donated to the fund by Board members. Thus, the current Board fund was at \$7,580.92.

Health and Human Services Board Officers and New Members Oath of Office

(Presented by Mr. Ken Murphy)

Mr. Kenneth Murphy, Deputy County Attorney, administered the Oath of Office to:

Ms. Ann Rollins - Health and Human Services Board Chair

Ms. DaQuanta Copeland – Health and Human Services Board Vice Chair

Ms. Wanda Hunter – New Health and Human Services Board Member

Ms. Tamara Wilson – New Health and Human Services Board Member

February 2023 Board Orientation Discussion and Retreat Planning

(Presented by Chair, Ms. Ann Rollins)

Historically, the Board has met annually in February for a Board orientation and retreat. This event serves as the Health and Human Services Board meeting for February and addresses several Public Health accreditation benchmark as well as serving for training for new and veteran Board members alike. The Board retreat for 2023 will be on February 23rd from 7:30 a.m. to 11:30 a.m. Planning is currently being conducted to construct a dynamic agenda. Currently, there are plans to keep the annual presentations from County Manager David Ellis and Senior Deputy County Attorney Ken Murphy. There will also be cross-referencing of the goals of Live Well Wake (LWW), the priorities of the Wake County Board of Commissioners (BOC), and the highlights from the 2022 Health and Human Services Board retreat.

Mr. John Myhre asked if members of the Public Health Committee and Social Services Committee (the two subcommittees of the full Health and Human Services Board) would be invited to the retreat as they had in years past. There was confirmation that the members would be invited to attend the event on February 23rd. Ms. Wanda Hunter asked if there was a committee that was planning the event. Ms. Rollins stated that she, Deputy County Manager Duane Holder, Health and Human Services Director Nannette Bowler, and Health and Human Services Board Vice Chair DaQuanta Copeland were planning the event, but Board members were encouraged and welcome to join and submit ideas.

Public Health Report: Injury Prevention Report

(Presented by Ms. Katie LaWall)

Ms. Morgan Poole, Epidemiology Program Manager, introduced Ms. Katie LaWall, Senior Epidemiologist, as a new member of the Epidemiology team. Ms. LaWall and Ms. Nicole Singletary, Drug and Injury Prevention Unit Manager, presented on the Public Health Report: Injury Prevention. This report describes injuries and their impact on the health of those who live, work, play, and learn in Wake County. Areas of concerns include unintentional poisoning deaths, unintentional fall injuries leading to emergency department (ED) visits and hospitalizations, and the demographics impacted by fall deaths. Ms. LaWall shared an image of the "injury iceberg" – a pyramid of injuries listed by severity (see below). As with every year, the report held a spotlight. For 2022, the spotlight was the Wake County Drug Overdose Prevention Initiative.

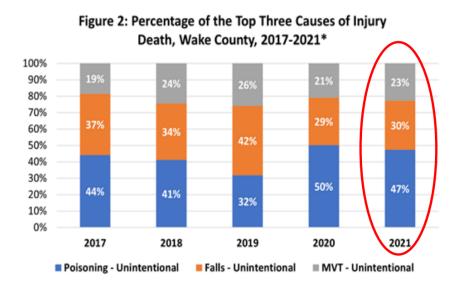


Ms. LaWall provided definitions for intentional versus unintentional injuries. Intentional was used to refer to injuries resulting from purposeful human action, whether directed at oneself or others. This included self-inflicted and interpersonal acts of violence intended to cause harm. Unintentional was used to refer to injuries that were unplanned and could be defined as events in which the injury occurred in a short period of time (seconds or minutes), a harmful outcome was not sought, or the outcome was the result of one of the forms of physical energy in the environment or normal body functions being blocked by external means (i.e., drowning).

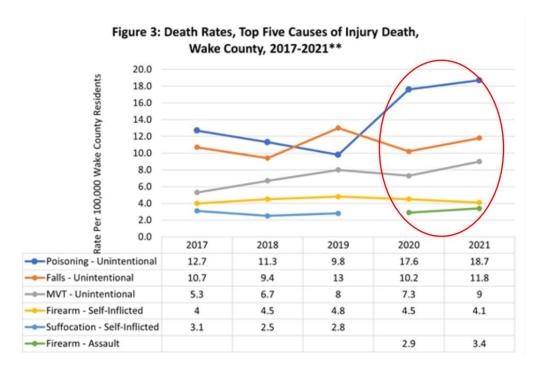
Unintentional falls were the top cause of injury ED visits from 2019 to 2021. This displaced unintentional motor vehicle traffic injuries which had previously been the top cause. The table below outlines the top cause of injury hospitalizations from 2017 to 2021.

Table 1: Top Five Causes of ED Visits by Injury (All Ages), Wake County, 2017-2021*															
	2017			2018		2019		2020			2021				
Cause of Injury	Cases	Rate	Rank	Cases	Rate	Rank	Cases	Rate	Rank	Cases	Rate	Rank	Cases	Rate	Rank
MVT - Unintentional	11,195	1,044.1	1	11,789	1,079.3	1	11,876	1,068.2	2	8,833	780.1	2	9,968	880.4	2
Fall - Unintentional	9,843	918.0	2	11,655	1,067.0	2	11,892	1,069.7	1	10,274	907.4	1	11,009	972.3	1
Natural/ Environmental- Unintentional [®]	2,861	266.8	3	2,769	253.5	3	2,765	248.7	3	2,109	186.3	3	2,132	188.3	3
Unspecified Unintentional **	-	-	-	1,858	170.1	4	1,912	172.0	4	-		-	-	-	
Other Specified/ Unintentional*	1,911	178.2	4	1,847	169.1	5	1,788	160.8	5	1,645	145.3	4	1,625	143.5	4
Poisoning - Unintentional	1,242	115.8	5		•	-		-	-	1,202	106.2	5	1,473	130.1	5

Top injury deaths were unintentional poisonings, unintentional falls, and unintentional motor vehicle traffic (MVT). Figure two (below) lists the percentage of the top three causes of injury death in Wake County from 2017 to 2021.



Included below are the death rates of the top five causes of injury death in Wake County from 2017 to 2021.



There were 779 unintentional poisoning deaths in Wake County in 2017-2021 – a 15.6% from the 2016-2020 report. Non-Hispanic White males aged 25-54 had the highest percentage of poisoning deaths. The non-Hispanic African-American poisoning death rate increased by 37.4% from the 2016-2020 report.

Unintentional overdose deaths were broken into several sections. Cocaine overdose deaths increased by 18.1% from the 2016-2020 report. During 2016-2020, non-Hispanic African-Americans died from cocaine overdoses at over twice the rate of non-Hispanic White residents and more than five times the rate of Hispanics. Heroin overdose deaths decreased by 7.4% from the 2016-2020 report. Males died from heroin overdoses at much higher rates than females. Non-Hispanic White residents died from heroin overdoses at higher rates than all other racial/ethnic groups. A discussion expanded how the use of heroin had likely increased over the years due to it being easily accessible and less expensive than alternative prescription and recreational drugs. However, buyers may be unaware what they are actually purchasing (i.e., cocaine, cocaine laced with Fentanyl, or Fentanyl being claimed as cocaine). Other synthetic narcotic overdose deaths (ex. Fentanyl) increased by 29.1% from the 2016-2020 report. There was an additional increase among non-Hispanic African-America males aged 25-44. Psychostimulant overdose deaths (ex. Methamphetamine) increased by 82.3% from the 2016-2020 report. Non-Hispanic White males represented most of the psychostimulant deaths.

The two tables below outline additional data on unintentional overdose deaths.

Table 8: Commonly Prescribed Opioid Overdose Deaths, Wake County, 2017-2021*							
	Number	Percent	Rate per 100,000				
Sex							
Female	41	28.1	1.4				
Male	105	71.9	3.9				
Race/Ethnicity**							
White (NH)	115	78.8	3.4				
Black (NH)	25	17.1	2.2				
American Indian (NH)	0	0.0	0.0				
Asian (NH)	***	***	***				
Hispanic	***	***	***				
Other (NH)/Unknown	***	***	***				
Age Group							
0-14	***	***	***				
15-24	12	8.2	1.6				
25-34	44	30.1	5.4				
35-44	36	24.7	4.4				
45-54	28	19.2	3.6				
55-64	22	15.1	3.5				
65+	***	***	***				
Total	146	100	2.6				

Table 10: Benzodiazepine Overdose Deaths, Wake County, 2017-2021*							
	Number	Percent	Rate per 100,000				
Sex							
Fem ale	45	30.8	1.6				
Male	101	69.2	3.7				
Race/Ethnicity**							
White (NH)	123	84.3	3.7				
Black (NH)	17	11.6	1.5				
American Indian (NH)	0	0.0	0.0				
Asian (NH)	***	***	***				
Hispanic	5	3.4	0.9				
Other (NH)/Unknown	0	0.0	0.0				
Age Group							
0-14	0	0.0	0.0				
15-24	20	13.7	2.7				
25-34	54	37.0	6.6				
35-40	30	20.6	3.6				
45-54	24	16.4	3.1				
55-64	15	10.3	2.4				
65+	***	***	***				
Total	146	100	2.6				

Next, there was a review of the report's spotlight – the Wake County Drug Overdose Prevention Initiative. Over 2,000 individuals have been served by the rapid responder Post Overdose Response Team (PORT) between January 1, 2018 and June 30, 2022. The PORT staff has referred 971 individuals to rehabilitation services as well as paraprofessional Mutual Aid programs as of June 30, 2022. Transportation services are provided to those who have difficulty getting to their medication-assisted treatment (MAT) providers. Individuals who are at high risk for recurrent overdoses are supplied with Narcan and Fentanyl Test Reagents and instructed in the use of both. Over 35% of the engaged clients remain connected with their PORT Peer Support staff for over one year.

The table below lists data for Unintentional Fall Deaths. Death rates for males were slightly higher in the 2016-2020 report and heavily impacted non-Hispanic individuals of or over the age of 65.

Table 3: Unintentional Fall Deaths, Wake County, 2017-2021*								
	Number	Percent	Rate per 100,000					
Sex								
Female	331	54.1	11.6					
Male	281	45.9	10.4					
Race/Ethnicity								
White (NH**)	535	87.4	15.9					
Black (NH)	42	6.9	3.7					
American Indian (NH)	0	0.0	0.0					
Asian (NH)	11	1.8	2.5					
Hispanic	24	3.9	4.2					
Other (NH)/Unknown	0	0.0	0.0					
Age Group								
0-14	0	0.0	0.0					
15-24	***	* **	***					
25-34	5	0.8	0.6					
35-44	8	1.3	1.0					
45-54	16	2.6	2.0					
55-64	34	5.6	5.4					
65+	546	89.2	82.3					
Total	612	100	11.0					

Data was shared about motor vehicle traffic (MVT), pedestrian, and bicycle deaths. There were 404 MVT deaths in Wake County between 2017 and 2021. Non-Hispanic African-American males aged 65 and older had the highest MVT death rates. Ninety-three pedestrians were killed in crashes involving automobiles (including on roadways and other areas) between 2017 and 2021. Six cyclist deaths occurred from crashes involving automobiles (including on roadways and other areas) between 2017 and 2021. Most pedestrian and cyclist injuries from crashes involving automobiles were categorized as "possible injury" or "suspected minor injury."

Dr. Mary Faye Whisler asked if motorcycles would be included for the figures for MVT. Ms. LaWall stated that she would check with the Department of Motor Vehicles (DMV) as they provided the figures. Ms. Wanda Hunter asked if the figures for cocaine overdoses included crack cocaine. It was confirmed that both the powder and crack forms of cocaine were included. Ms. Tamara Wilson asked I there was data for the socioeconomic status of those who had overdosed – particularly if it was noted that they were suffering from homelessness. Ms. LaWall shared that current data did not include information about home security vs. homelessness, but there may be a way to determine if the individual who overdosed had insurance or not. Ms. DaQuanta Copeland asked if there were demographics available for the hotspots of places impacted by overdose deaths. While this was not currently available, staff stated that they were already collaborating with community partners (namely Healing Transitions) who may be able to assist with this. In addition, staff could work with Mr. Michael Wescott, Business Analytics Manager, to use area zip codes of those who overdosed to craft a "geo map" of the county's most impacted areas.

Commissioner Vickie Adamson shared that work with SouthLight (https://www.southlight.org/) had encouraged staff to make evening hours available where previously only morning options existed. This has only began in the last month, so data is still coming in. But this is a huge opportunity as these appointments and supervision are required for treatment.

There was discussion around the continued collaboration and evaluation of priorities and goals for the county from various entities and stakeholders (Live Well Wake, Wake County Board of Commissioners, etc.). Ms. Bowler stated that, with time, staff were looking to adopt an assessment utilizing the Social

Determinants of Health (https://health.gov/healthypeople/priority-areas/social-determinants-health) to ensure every client that comes in is treated for the root of their needs – not just one specific or predominant issue. A request for proposal (RFP) will be sent out by the Wake County Health and Human Services Internet Technology (IT) department to obtain a tool to connect those individuals to outcomes that can be supported and tracked.

Ms. Wanda Hunter asked if any of those working with PORT had lived experience with overdoses and/or substance abuse. Ms. Nicole Singletary, Drug and Injury Prevention Unit Manager, confirmed that all of the Certified Support Specialists working with PORT had lived experience.

Dr. John Perry asked if it was possible to break some of the listed five-year trends (particularly with the unintentional poisonings and overdoses) into annual numbers. It could be beneficial to see the changes – the increases and declines – of such data from year-to-year as opposed to or in addition to a five-year period. Ms. LaWall said that some of the data would contain numbers so small as to not be reliable/be overly identifying. Other figures are provided by the State, so this information may be even more difficult to obtain.

There was a motion by Ms. DaQuanta Copeland to approve the Public Health Report: Injury Prevention and Ms. Christine Kushner seconded the motion. The report was unanimously approved.

Annual Review of Wake County Health & Human Services Board Policy on Consumer and Community Input, Board Policy 300 2.5 (Accreditation Benchmark #37.2 and 38.3)

Ms. Ann Rollins asked if there were any suggestions, recommendations, or concerns with the Board Policy 300 2.5. None were made.

There was a motion by Dr. Mary Faye Whisler to approve the policy and Ms. DaQuanta Copeland seconded the motion. The Wake County Health & Human Services Board Policy on Consumer and Community Input, Board Policy 300 2.5 was unanimously approved.

Annual Review of Wake County Health & Human Services Board Rules of Appeal GOV.BRD Procedure 300 (Accreditation Benchmark #35.1)

Ms. Ann Rollins asked if there were any suggestions, recommendations, or concerns with the Board Rules of Appeal GOV.BRD Procedure 300. None were made.

There was a motion by Commissioner James West to approve the procedure and Ms. Christine Kushner seconded the motion. The Wake County Health & Human Services Board Rules of Appeal GOV.BRD Procedure 300 was unanimously approved.

Review of Proposed Changes to Wake County Human Services Board Operating Procedures GOV.BRD 100 (Accreditation Benchmark #34.1)

Ms. Ann Rollins asked if there were any suggestions, recommendations, or concerns with the Board Operating Procedures GOV.BRD 100. None were made

There was a motion by Dr. Mary Faye Whisler to approve the procedure and Ms. Kelcy Walker Pope seconded the motion. The Wake County Human Services Board Operating Procedures GOV.BRD 100 was unanimously approved.

Mayor Frank Eagles Community Service Award

(Presented by Mr. Ross Yeager)

The first annual Mayor Frank Eagles Community Service Award was presented to members of Mr. Eagles' family. Staff spoke of the innumerable contributions Mr. Eagles made to the Board, Wake County, and others through his dedication to help others.

Environmental Services Director's Update

(Presented by Dr. Joseph Threadcraft)

Dr. Joseph Threadcraft, Environmental Services Director, gave an update on several items:

- Environmental Services was currently working through the 2023 to 2024 Fiscal Year (FY) budget.
- The previous day, Environmental Services had presented the One Water Plan initiative to County Manager David Ellis and his Deputies. The One Water Plan was constructed under the belief that, regardless of where a resident lives in Wake County, they deserve access to clean water. This fifty-year plan is not a requirement of the county, but instead an effort from Environmental Services to make a positive change in the community. Wake County is second in the quickest growing counties in the nation and this effort could put the county on the national radar.
- Animal Services, for the first time in six years, may need to euthanize animals for space. They are currently experiencing the highest intake of animals especially dogs that they have seen in the last seven years.
 - The state of the economy is one of the contributing factors with residents surrendering animals out of desperation.
 - Dr. Jennifer Federico, Animal Services Director, made the difficult decision to limit calls to emergencies only. While this is not a popular option, Animal Services are doing everything they can to control the capacity concerns.
 - Commissioner Vickie Adamson added that the County was looking to expand the current Animal Shelter, but the space was ultimately deemed less than ideal for such an expansion. An alternate location is currently being scouted, though requirements include caution around areas with businesses and residential properties as the noise from the shelter can sometimes be bothersome to neighbors. The current site is in an industrial area which works in favor of this constraint.
 - Ultimately, a bigger shelter is still a "Band-aid fix" as intake always rises
 with the holidays. Pets that are gifted are sometimes surrendered and
 other pets with seemingly secure homes are surrendered when families
 travel for holidays but do not seek/cannot secure sitting services.
 - Two years ago around Thanksgiving, a family hoping to travel did not have daycare and surrendered five dogs at once. The shelter staff feared euthanasia would be required to keep capacity, but foster families and Dr. Federico herself came to these dogs aid to ensure that they would not be euthanized.
 - There was a group, titled Friends of the Wake County Animal Center, that would provide free dog food and cat litter and the like to help alleviate some issues that lead to obstacles when providing pet care. While they seek to help how they can, funds and resource are limited (they cannot, for example, cover vet bills).
 - Ultimately, there is a need for pet foster families to help alleviate some of these concerns.

Health and Human Services Director's Update

(Presented by Ms. Toni Pedroza and Ms. Rebecca Kaufman)

- Ms. Antonia Pedroza, Deputy Director of Social Services for Health and Human Services
 - The State and County were actively working to address children on waitlist for childcare and to much celebration waitlists have been cleared. Every person on a waitlist received a letter and application to reapply for childcare. Families/children will still need to meet eligibilities of the childcare center, but the waitlist obstacle itself has been removed.
 - Staff are highly aware and working on the upcoming ramifications of the end of the federal public health emergency status, expected to last through to April 2023. These Social Services waivers include a Food and Nutrition Services (FNS) maximum allotment waiver that allowed families regardless of their income to earn the maximum allotment for their family size.
 - In a very generic and fictitious example, a family of two parents and four children may, due to their income bracket, be eligible for payments of \$400 per month. Because of the waiver made possible by the public health emergency, the income bracket would be ignored and the payment could be increased to up to double the amount (in this case \$800 per month).
 - Recipients have been receiving the maximum allotment for around two years. The elimination of this waiver comes as food prices are on the rise and families are all too familiar and possibly dependent on that maximum allotment to survive.
 - Staff are working with the County's Communications team to make sure clients are well informed in advance of April and the end of the benefits. In addition, the State will b sending out a letter to all those currently receiving benefits.
 - Ms. Nannette Bowler (Health and Human Services Director) noted the very real reality that many of these individuals will be faced with the choice between paying for rent and paying for food. This "perfect storm" of economic distress and supportive waivers ending is expected to not only harmfully impact the community, but also set huge workloads on the shoulders of already overworked staff.
 - There was a brief discussion on the implications and impact of "poverty." This was an extremely difficult topic as governments usually spoke of the federal poverty level when speaking of and evaluating data for poverty. However, this level may not always be truthfully representative of poverty from county to county. When the waiver allotment ends in April, many people possibly riding the line of poverty would be thrust into it with limited warning or ways to regain stable financial footing. Residents will likely be hurt, angry, and confused on who exactly to contact to understand their situation, options, and opportunities.
 - Another example is of the Medicaid waiver that allowed anyone eligible for the benefits to remain even if they had become ineligible for the benefits and would have had them terminated prior to the public health emergency. Usually recipients would have to undergo an annual review as many become ineligible due to a change in job and/or living situation. The last two years removed that annual review. These waivers, too, are expected to end in April.
 - Yet another causality will likely be the Pandemic Electronic Benefit Transfer (P-EBT) program that provides extra financial support to families with children who receive free and/or reduce price lunch at school. Unfortunately, these waivers are in the hands of the government at State and federal levels. The Health and

Human Services Board and other concerned Wake County entities and individuals could advocate for these waivers, but advocacy was unfortunately the only course of action available at the county level.

- Staff are also working diligently with Communications and Wake County partners on the implications of Medicaid Expansion in Wake County. Soft planning is underway as, currently, Medicaid Expansion is expected to pass. Up to 50,000 people will be eligible dependent upon their household earnings.
 - Though workload is anticipated to increase, there are currently no plans to add positions to next year's budget to address this upcoming need. Instead, staff are looking at staffing and funding needs that can be met internally.
 - The State reimburses 75% of costs with the Medicaid process. This means that the County only needs to cover 25% of the overall costs.
 - Dr. John Perry pointed out that there were approximately 100,000 uninsured in Wake County, meaning around 65% of these individuals would be eligible for Medicaid Expansion. Ms. Toni Pedroza confirmed that these projections were correct.
- O There are a couple of interesting lawsuits currently holding some pieces of Social Services in the balance. The legal ramifications could impact children especially, so staff are eager to see the results and respond accordingly to the needs of the community.
- Ms. DaQuanta Copeland pointed out that there had been five suicides at North Carolina State University (NCSU) since August of 2022. With her work allowing her to closely connect with NCSU students, she noted that students are unaware of the resources that are available or are unaware of how to access them/make them more available for themselves and classmates. Additional advocacy will be needed to bolster support for these and other students and individuals across the county to combat the rise in suicides.
- Ms. Rebecca Kaufman, Health Director for Health and Human Services
 - The "Tripledemic" of COVID-19, respiratory syncytial virus (RSV), and influenza-like illness (ILI, otherwise known as the flu) was still showing high rates in Wake County. Staff were working hard to encourage residents to the proper locations for testing for these conditions versus seeking treatment for the conditions as Emergency Departments (EDs) had been bombarded lately.
 - o Public Health was excited to announce the hire of two new leadership team members.
 - Mr. Kevin Harrell would be acting as the Prevention Health Director after moving to Public Health from Wake County Child Welfare.
 - Ms. Jenelle Mayer would be stepping into the brand new role of Surveillance and Compliance Health Director.
 - The last vacant position of the Public Health leadership team the Medical Director would have interviews for candidates in the following week.

Committee Chairs Update

(Presented by Ms. Ann Rollins, Dr. Mary Faye Whisler, and Ms. DaQuanta Copeland)
Ms. Ann Rollins briefly covered a high level of highlights for the Regional Centers. Northern Regional
Center in Wake Forest was recently reaccredited by the State as a level two NCWorks Career Center. The
Western Health and Human Services Center in Cary celebrated their five-year anniversary with a
celebratory breakfast and recognition event with their Community Advocacy Committee (CAC). Southern
Regional Center in Fuquay-Varina is continuing to serve clients in their health clinics. Sixty-eight patients
were served in November 2022 with thirty-eight served through the Advanced Community Health Clinic.
Departure Drive in Raleigh has recently opened Registered Deed services. Finally, the Eastern Regional
Center in Zebulon held their annual retreat in November 2022. Ms. Rollins noted that Board members

were always encouraged to become a part of the Regional Centers' various CACs as well as visit the Centers to see the wonderful work being done by staff.

Dr. Mary Faye Whisler withheld a report as the Public Health Committee would be meeting the following day (December 16th, 2022).

The Social Services Committee had wrapped up 2022 with a signed memorandum of understanding (MOU) between Saint Augustine's University (SAU), the Hope Center at Pullen, and Wake County Health and Human Services (WCHHS). SAU would be renovating a residence hall to house aged out of foster care youth who would have previously been living in a hotel in the interim between securing safe housing. These youth would be afforded the same access as SAU students had on campus to services, including the cafeteria and library.

ann Rouns

• Public Comments

• None

Adjournment

The meeting was adjourned at 9:38 A.M.

Board Chair's Signature:

Date: 01/26/2023

Respectfully submitted by Ms. Brittany Hunt