

**Wake County Health and Human Services Board
Meeting Minutes
April 27, 2023**

Board Members Present:

Lily Chen
DaQuanta Copeland
Wanda Hunter
Christine Kushner
Terry McTernan
Ann Rollins
Tanyetta Sutton
Dr. Kelcy Walker Pope
Commissioner James West
Dr. Mary Faye Whisler
Tamara Wilson

Guests Present:

John Myhre

Staff Members Present:

Daryl Beasley
Jennifer Brown
Sheila Donaldson
Caroline Harper
Kevin Harrell
Tony Johnston
Rebecca Kaufman
Annemarie Maiorano
Jenelle Mayer
Yolanda McInnis
Janny Mealor
Ken Murphy
Jessica Sanders
James Smith
Loc Nguyen
Dr. Joseph Threadcraft
LaToya Toussaint
Dr. Theo Udeigwe
Ross Yeager

Call to Order

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

Next Board Meeting – May 25th, 2023

Approval of Minutes

Ms. Ann Rollins asked for a motion to approve the March 23rd meeting minutes. There was a motion by Ms. Christine Kushner and Ms. Tanyetta Sutton seconded. The minutes were unanimously approved.

Treasurer's Report

Ms. Christine Kushner, Treasurer, provided the Treasurer's Report. March's Treasurer's Report listed the Board fund as \$7,830.92. Since then, there had been no additions. Thus, the fund was still at \$7,830.92.

Childhood Lead Poisoning Prevention Program (CLPPP) Overview and Regulatory Update

Accreditation Benchmark #4.2

(Presented by Mr. James Smith)

Mr. James Smith, Environmental Health Program Manager – Food and Lodging, provided a presentation on the Childhood Lead Poisoning Prevention Program (CLPPP). He introduced Mr. Loc Nguyen

(Environmental Consultant – Childhood Lead Poisoning Prevention) and Mr. Daryl Beasley (Environmental Health Manager – Food Sanitation) who work directly within the program.

Mandate and Authority

- 15A NCAC 18A .3100 – Rules Governing Childhood Lead Poisoning Prevention Program
 - NCGS 130A-131.6 through 130A-131.9H
 - All activities are referral-based through the North Carolina Electronic Lead Surveillance System (NC LEAD) or other agencies

Rules are focused on young children given the serious harm exposure to lead can inflict on the youth. Lead causes damage to the brain and nervous system; slowed growth and development; learning and behavior problems; and hearing and speech problems in children. This, in turn, can lower their intelligence quotient (IQ), decrease their ability to pay attention, and lead them to underperform in school according to the Centers for Disease Control and Prevention (CDC).

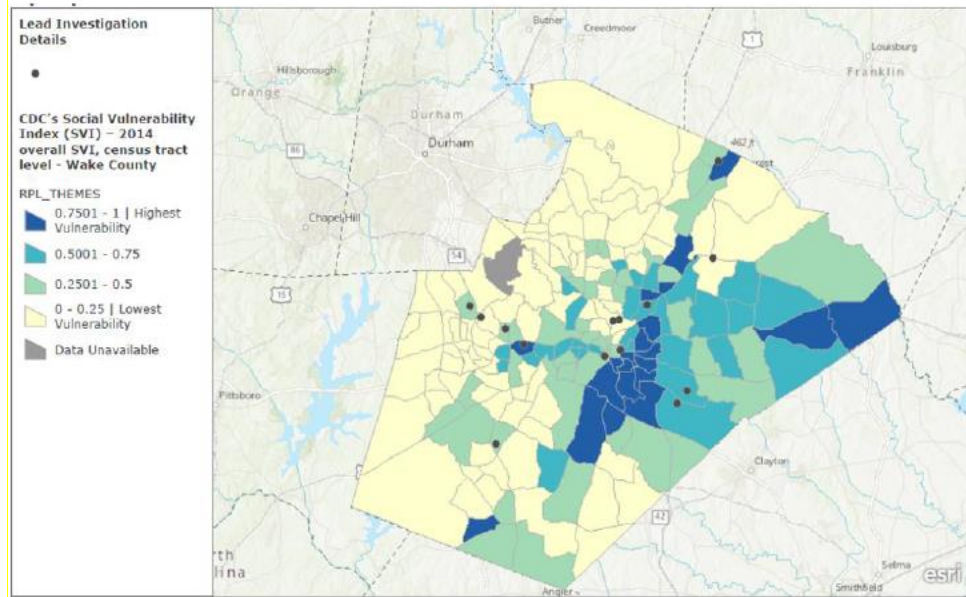
Next, the parameters of lead investigations were reviewed.

- Confirmed Lead Poisoning (blood lead ≥ 10 μg per deciliter)
 - Referral by a medical provider via NC LEAD
 - Required investigation and remediation
- Elevated Blood Lead Level (blood lead 5-9 μg per deciliter)
 - Referral by a medical provider via NC Lead
 - Voluntary investigation
 - Remediation recommended but not required
- Child Occupied Facility Referral
 - Referral by another agency or office
 - Remediation required if there are ill children or if obtaining a license to operate

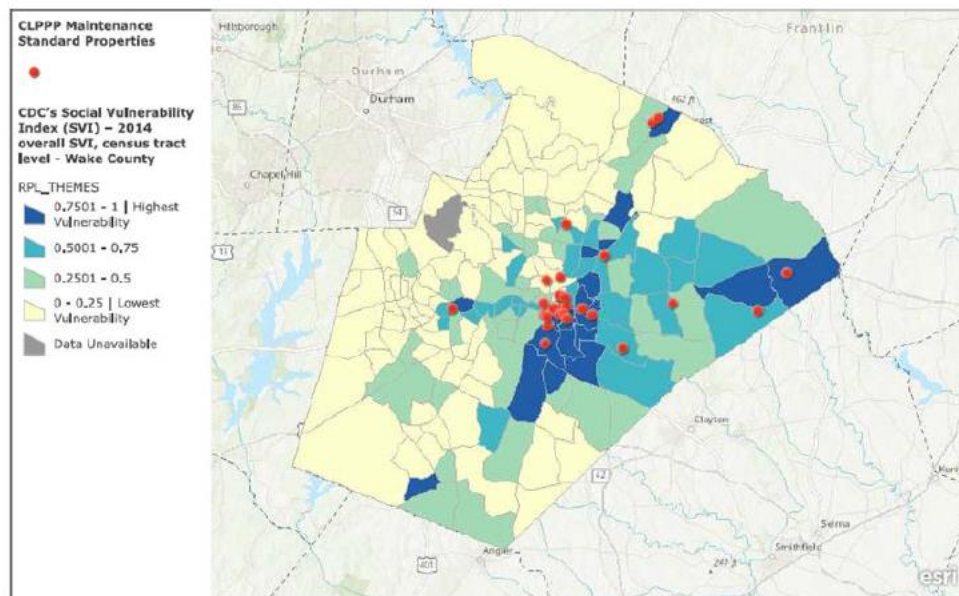
Other activities include remediation plan reviews, clearance visits, annual monitoring of properties, and confirmatory water sampling in childcare centers.

Lead exposure has been found in items brought from overseas (spices, pottery, ritual powders, etc.), aging and/or poorly maintained homes, and renovated housing. Because of this, lead concerns are high for vulnerable communities. The following graphics were derived from layer data at Wake County Open Data (<https://data-wake.opendata.arcgis.com/datasets/ral::cdcs-social-vulnerability-index-svi-2014-overall-svi-census-tract-level-wake-county/explore?location=35.789563%2C-78.650000%2C3.35>).

Lead Investigations Conducted (7/1/22 to 12/31/22)



Lead Maintenance Standard Program Locations



Wake County's CLPPP works with the following partnerships.

- Wake County Health and Human Services (WCHHS)
- Wake County Attorney's Office
- Wake County Public School System (WCPSS)
- North Carolina Department of Health and Human Services (NC DHHS) Children's Environmental Health
- NC DHHS Health Hazard Control Unit (HHCU)
- NC DHHS Radiation Protection

- NC LEAD and Healthy Homes Task Force
- NC State Laboratory of Public Health
- NC Childcare Licensing

Mr. Smith then provided a regulatory update for Clean Classrooms for Carolina Kids where there were new sampling and inspections (listed below).

- Sampling of Water for Lead Hazards
 - Public Schools Only
- Inspections for Lead Paint and Asbestos
 - Public Schools and Licensed Childcare Facilities
- Private-Sector Inspections and Mitigation/Remediation
 - Does Not Trigger North Carolina Lead Prevention Laws
 - Limited Local Health Department Role

Lead and asbestos rules were previously adopted as temporary rules (10A NCAC 41A. 1001-.1007 – Lead and Asbestos Inspection, Testing, Abatement, and Remediation in North Carolina Public Schools and Licensed Child Care Facilities). As of April 1st, 2023, a rollout is in progress by the NC DHHS and Research Triangle Institute (RTI) International. Both NC DHHS and RTI will manage the program. This program is designed so that all sampling, inspections, and lead-in-water mitigation are funded by American Rescue Plan Act (ARPA) funds. Lead-based paint and asbestos mitigation and/or remediation are subject to reimbursement with ARPA funds. The funding and rule ends on December 31st, 2026 or when funds are expended. The fund amount is around \$150 million. The prioritization of schools is based on the following factors:

- Elementary Schools
- Buildings Built Prior to 1988
- More than 50% Free and Reduced Lunch
- More than 50% Non-White

Ms. Ann Rollins asked if the preschool locations would be included. Mr. Smith stated that if they were regarded as a childcare location, they would be included. Remediation and/or mitigation efforts will be done without cost to the schools. It is, however, a time-limited initiative.

The local health department has the following roles in the program.

- Post-Mitigation Water Sampling
 - Clearance sampling post-mitigation of lead-in-water hazard
- Visual Inspection
 - Ensure lead-based paint hazards are inaccessible for facilities that do not address identified lead hazards
- Consultation – Outreach
 - Be available to help affected facilities and the public understand the process, each agency's role, and the importance of testing for lead hazards
- Documentation
 - Document whether a school has conducted its lead-in-water testing

Attendees may also begin to hear about the lead and copper rule mandating lead-in-water testing in schools by municipal water supplies. There is no formal role for the Wake County CLPPP in this rule. It does, however, contain similar terminology and facilities, so staff expect potential confusion and

questions from the public. Wake County staff have held a couple of collaborative meetings in reference to this rule to help all parties and stakeholders be on the same page.

Dr. John Perry mentioned the data represented in the lead investigations conducted with the social vulnerability index (SVI). Was there data available on the number of lead poisoning cases each year? While this data was not readily available, it would be shared with Board members after the meeting. Mr. Terry McTernan asked if there was a limit with the County's ongoing responsibilities to a property that had been determined to have lead. Mr. Smith confirmed that staff would continue to perform remediation each year until the property was abandoned. The standard maintenance process was ongoing remediation instead of removal.

There were additional questions around the removal of lead-based paint. The exact details would be provided at a later date, but this would essentially be a job for a contractor certified by the State to remove the lead. There were options, however, including encapsulation (certain paneling used to enclose the lead with different materials). It is the deterioration of the structure that poses a threat instead of when it is intact. Ms. Wanda Hunter spoke of the concern with lead, asbestos, and copper. She asked how staff had been preparing for per- and polyfluorinated substances (PFAS). Dr. Joseph Threadcraft, Director of Environmental Services, answered that PFAS testing would fall to Water Quality. A presentation by Mr. Evan Kane (Environmental Health Program Manager – Groundwater) would be coming to the Board at a future meeting to address the County's response to PFAS.

Another question posed was what action was taken at a facility found to have lead exposure accessible to children. Mr. Smith stated that the regulations look only at children under the age of five. If lead was accessible in a high school, for instance, County staff would work with school staff and encourage them to address the lead. However, with childcare centers serving youth under the age of five, lead exposure puts Childhood Lead Poisoning Prevention (CLPP) and Clean Classrooms for Carolina Kids rules into effect. If the lead is accessible, that center is in violation. This will, in turn, trigger a full investigation. Ms. Hunter recalled that some of the funding was mentioned for education and asked what public outreach looked like. It should, notably, include signs and symptoms of lead poisoning to notify the public on what to look for if their children were impacted. Outreach with Clean Classrooms for Carolina Kids was handled by NC DHHS and RTI. Most of this has been on clean water. General outreach does occur and staff are hoping to increase that outreach with these funds.

Dr. Mary Faye Whisler asked about the policies with pregnant women and lead. Mr. Smith clarified that the rules addressed children under five as well as pregnant women. Ms. Lily Chen had worked with a task force addressing lead poisoning issues. While the goal was to decrease lead level below two µg per deciliter, no level of lead was healthy. Durham County had decreased its lead level below two, so how did the levels for Wake County get selected? Mr. Smith explained that the lead levels were determined by the NC DHHS. While the processes to determine that level was unknown, additional information could be provided after the meeting.

Ms. DaQuanta Copeland asked why lead exposure was a rising concern after so much work had been done in previous decades. Mr. Nguyen stated that lead rules were updated in 2018. Previously, a confirmed lead poisoning case in children was only considered at 20 µg per deciliter or more. Starting in 2018, this was lowered to 10. Because of this, many more cases could be under consideration. Around the same time, many communities in Wake County saw an uptick in lead poisoning due to items rather than homes. Ms. Christine Kushner echoed Ms. Hunter's emphasis on education and outreach and how needed it was from the State and County levels. Other members concurred stating that lead poisoning could lead to irreversible brain damage. Early prevention and work toward no levels of lead being acceptable were both mentioned to remediate the ongoing concern. Mr. Smith added that, historically, the acceptable lead levels had been and were showing a decrease trend year after year.

Ms. Hunter asked if there were efforts to make at-home lead test kits available. Mr. Smith stated that these were available upon request. Others were commercially available. Ms. Tanyetta Sutton thanked the staff for bringing the presentation to the Board. While mental health was a grave concern, it was also important to consider behavioral issues that may be caused by different medical conditions, including lead poisoning. A move to proactive measures from reactive could help address those gaps. Ms. Copeland asked if a home being purchased or rented would have any documentation detailing potential lead exposure. Mr. Smith stated that this would be under Housing instead of Environmental Services, but recent conversations with Housing staff indicated that there were a number of environmental assessments done to any house that receive subsidy.

Dr. Mary Faye Whisler made a motion that the CLPPP presentation and regulatory updates to CLPP be accepted. Ms. DaQuanta Copeland seconded. The motion was unanimously approved.

Environmental Services Director's Update

(Presented by Dr. Joseph Threadcraft and Ms. Jessica Sanders)

Dr. Joseph Threadcraft, Environmental Services Director, briefly introduced Dr. Theo Udeigwe, Water Quality Director. Dr. Udeigwe holds a Bachelor in Soil Science from the University of Nigeria and a Masters and Doctorate in Soil Chemistry from Louisiana State University (LSU). Previously, he was the Chief Scientific Officer at Dynamic Green Concepts and is certified as a Professional Soil Scientist. Dr. Udeigwe had also taught in higher education and had produced an excess of 30 peer-reviewed publications.

Ms. Jessica Sanders, Environmental Health Program Manager – Plan Review, presented the process improvements made for pool inspections. Pool inspections have begun. Every year Environmental Services works to make the process better and better. The goal is to reduce health and safety risk factors at public swimming pools to protect Wake County residents. Public pools are usually all but those at a personal residence. There are a total of 1,352 public pools in the county with 84% being seasonal pools. There are 74 inspectors in the Environmental Health and Safety (EHS) and Water Quality divisions. Pools must pass inspection before they can open and, with seasonal pools, permits are issued from April 1st to October 31st. Typically, most pool operators want to open their pools by the Memorial Day holiday weekend (which in 2023 would be May 27th with the holiday falling on May 29th).

After 2022's pool season ended, there was a departmental effort to improve the process for inspections. In 2023, staff are excited about a bolstered communication plan with website enhancements, annual invoices, staff training, and media outreach. More information than ever is available to pool owners and operators. Service delivery expectations have also been implemented with pool inspections scheduled within three business days of the request for inspections. Metrics will be closely monitored in advance of the Memorial Day holiday. Inspectors will be following up with pool operators that have not reached out. The operational goal is to have 85% of pools inspected by Memorial Day. Historically, not all pools want to open by the holiday and other pools may run into repair needs or staffing issues that make 100% an unrealistic goal.

These changes are occurring for the following reasons.

- Encourage operator readiness for inspection – More tools provided so operator can be prepared for the inspection
- Improve customer experience – Prepared operators will be more likely to pass inspection
- Improve staff efficiency – Less re-inspections allow inspectors to conduct other assigned work
- Shift work to prevent bottleneck – Encourage operators to request an inspection sooner

There is a checklist on the Wake County website so that pool operators can review what inspectors will look for when inspecting their pool (<https://www.wake.gov/departments-government/environmental-health-safety/public-swimming-pools> in “Opening Inspection Checklist”). If a pool passes inspection, there is a better experience all around with inspectors not needing to return for re-inspection. This also improves staff efficiency.

There is advocacy for recruitment for a pool technician recently posted on the Wake County website. This is a great summer job option for students that runs from June to August. It is independent work that requires use of the employee’s vehicle with mileage reimbursement provided. Staff are hoping to fill nine positions.

Health and Human Services Director’s Update

(Presented by Ms. LaToya Toussaint, Ms. Rebecca Kaufman, and Ms. Janny Mealor)

- Ms. LaToya Toussaint, Senior Deputy Director of Health and Human Services, discussed the following.
 - Ms. Toussaint reminded the attendees that the following Monday (May 1st), County Manager David Ellis would be presenting the Fiscal Year (FY) 2023-2024 budget to the Wake County Board of Commissioners. This will be available online livestreamed at 5:00 p.m. on May 1st.
- Ms. Janny Mealor, Adult and Family Services Assistant Division Director, discussed the following.
 - In the Energy Program, the special funding program titled Low Income Household Water Assistance Program (LIHWAP) was originally scheduled to end in September 2023 or when funds were exhausted. However, the State has monitored spending and is not seeing as much traction as hoped. In order to maximize these dollars, the State will be ending LIHWAP at the end of May 2023, take the remaining funds not disbursed, and provide a supplemental payment to individuals who received assistance under the program. The amount of this supplemental payment is currently unknown, though more information is expected in August 2023.
 - Ms. DaQuanta Copeland asked if the LIHWAP funds had not been utilized in Wake County. Ms. Mealor clarified that the evaluation was statewide. While Wake County had seen a great deal of success, many dollars were being left behind by other counties.
 - Food and Nutrition Services (FNS) recently held a number of large recruitment efforts. The day before alone, thirty interviews had been conducted with fourteen candidate selections made. Salaries were being determined and offers were being made with hopes to have new hires join in the next few months. These efforts were ongoing in an attempt to properly fill positions long left vacant.
- Ms. Rebecca Kaufman, Health Director, discussed the following.
 - On December 5th, Fuquay-Varina voted and approved a smoke-free and vapor-free ordinance. This ordinance covers smoke- and vapor-free buildings, vehicles, parks and recreation areas, and smoke-free and vapor-free grounds with designated areas for employees. On March 14th, the town of Morrisville voted to approve a new tobacco-free ordinance covering buildings, vehicles, parks and recreation areas. Tobacco is also prohibited on town grounds within fifty feet of any building entrance.
 - In addition, the Youth Tobacco Summit was held earlier in the month. The youth had an engaging presentation and shared a wealth of knowledge gained through their projects. The Summit, hosted at the Poe Center for Health Education, included panel discussions.

- Work on the tobacco and vapor crisis is continually being made by Ms. Michelle Mulvihill, Wake County Health Promotion and Chronic Disease Prevention – Public Health Educator.
- There may be updates from the Tobacco 21 Ordinance (a uniform age limit of 21 to purchase tobacco products across the United States) coming in the near future.
- Ms. Ann Rollins stated that the Wake County Public School System (WCPSS) was in a class action lawsuit that won \$6.2 million in settlement dealing with tobacco. The same youth that attended and presented at the Summit worked with the law firm on this lawsuit. The distribution and focus of these funds had yet to be determined.
- Attendees commended the youth working to combat the rise of tobacco. Their leadership, dedication, and passion for the work kept the importance of this public health crisis at the forefront.
- Public Health was celebrating a successful audit in the areas of the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and Child Health. Since the start of the public health emergency (PHE), WIC had been functioning remotely with visits made through phone calls. Despite the remote setting, WIC was found to be extremely compliant by the auditors.
 - As the PHE comes to an end, there will be a transition to a hybrid model (a combination of remote and on-site work).
 - The remote setting actually encouraged residents to seek benefits previously only accessible in-person. Staff want to make the application process and guidance for applicants as accessible as possible for as long as possible.
 - While the PHE officially ends on May 11th, WIC has until August 1st to return to 100% in-person interviews.
- With the public health emergency (PHE) ending, COVID-19 clinics are being shut down with COVID-19 tests and vaccinations being moved into the regular Health Clinics. COVID-19 tests will also incur a cost in the future due to the end of the PHE. In response, staff are placing a large order for test kits before the price goes into effect. However, the timing for this move seems appropriate as COVID-19 case numbers have remained low for quite some time.
 - Ms. DaQuanta Copeland asked how these remaining tests will be distributed and/or how residents were being notified about them. The test kits are available at the following locations:
 - Regional Centers
 - Eastern Regional Center (ERC)
 - 1002 Dogwood Dr, Zebulon, NC 27597
 - Departure Drive
 - 5809 Departure Drive, Raleigh, NC 27616
 - Northern Regional Center (NRC)
 - 350 E Holding Ave, Wake Forest, NC 27587
 - Southern Regional Center (SRC)
 - 130 N Judd Pkwy NE, Fuquay-Varina, NC 27526
 - Western Health and Human Services Center (WHHSC)
 - 111 James Jackson Avenue, Cary, NC 27513
 - Wake County Sunnybrook Health and Human Services Building
 - 10 Sunnybrook Road, Raleigh, NC 27610
 - Various Community Outreach Events

- Between all of the buildings listed above, there are an average of 20,000 COVID-19 at-home test kits taken per month. Staff will be able to maintain this for a while after the PHE ends due to the bulk order.
- An exciting development is the planned continuation of the wastewater testing done during the pandemic. The program will be shifting from County operation to State operation. Previous testing was so insightful that State staff will be adding flu testing with a possibility to add in respiratory syncytial virus (RSV) testing as well.
 - The current County wastewater testing will end at the end of June due to funding. However, with the State working out contracts and increasing wastewater sampling and testing, the transition should be a seamless one.
 - Ms. DaQuanta Copeland asked if the State would still have the “heat maps” readily available (with areas of high confirmed cases highlighted). These maps are still being updated, but on a far less frequent basis due to the low number of cases. However, if data begins to show a spike in cases, this is still a valid form of public health education and/or outreach to the public.

Committee Chairs Update

(Presented by Ms. Ann Rollins, Dr. Mary Faye Whisler, and Ms. Wanda Hunter)

Ms. Ann Rollins, Health and Human Services Board Chair, referred Board members to the agenda packet for a full list of March 2023 highlights for the Regional Centers and Network of Care. She did, however, touch on a few high points (listed below).

- On March 8th, the Northern Regional Center (NRC) was a host site for media to raise awareness on State tornado drills.
- The Eastern Regional Center (ERC) recently had pilot micro-transit staff on-site conducting focus groups.
- A partnership between the Southern Regional Center (SRC), Departure Drive, and the Health Clinics produced a recruitment process for a Regional Clinic Operation Manager. This position will provide management with the clinics in respective Centers.
- At Departure Drive, Telamon was on-site in March 2023 to promote and register children for their Head Start Program.
- Western Health and Human Services Center’s (WHHSC) Community Advocacy Committee (CAC) Food Security Action Group continues to provide emergency food distributions in ten neighborhood sites. A total of 1,647 produce boxes were distributed in March 2023 alone. Clearly, the need is still great. With the Action Group at over thirty members strong, this promises to be an impactful initiative.

Dr. Mary Faye Whisler, Chair of the Public Health Committee, stated that many of the reports made to the Committee had been made to the Board. There was one report on engaging and assisting private well users that would be presented at a future Board meeting. Otherwise, Committee members met Dr. Theo Udeigwe (Water Quality Director) and received the pool inspections PowerPoint from Ms. Jessica Sanders, Environmental Health Program Manager – Plan Review. Finally, the previous Saturday was National Drug Take Back Day. There is a permanent drop-off box at the Wake County Sunnybrook Health and Human Services Building. Other locations, too, accept unused prescription drugs. The recommendation by pharmacists is to get rid of any prescription medication that is not being used and/or is expired.

Ms. Wanda Hunter, Co-chair of the Social Services Committee, shared that the Committee met on April 14th. Ms. Sheila Donaldson, Child Welfare Division Director, presented on Child Abuse Prevention

Month (recognized in May). A kick-off event for Foster Care Awareness Month will be taking place on May 2nd at the Wake County Swinburne Health and Human Services Building at 1:00 p.m. Ms. Sydney Mierop, Food Security Program Manager, presented on the Food Security Plan recently adopted by the Wake County Board of Commissioners (BOC). This was a plan developed from an inclusive process including community voices and voices from the Capital Area Food Network (CAFN). The plan will be supported by American Rescue Plan Act (ARPA) funds. This is extremely timely given the additional food benefits ending in March 2023. The loss of those benefits caused a heavy burden on some households already facing inflation challenges. Fertile Ground, a new food co-op, held its inaugural event the past Sunday at the Southeast Raleigh YMCA. Southeast Raleigh is in dire need of food resources for residents so that they do not have to travel to receive assistance. A map for the Summer Food Program (outlining locations and times that food will be provided) is being constructed. Of note, children do not need to be a Wake County Public School System (WCPSS) student to participate in the Summer Food Program. Finally, work for transitional housing for aged out foster care youth at St. Augustine's University (SAU) remains at a standstill. More information is needed on an alternative location on campus to house these clients. Building sustainability must also be verified.

2023 Health and Human Services Board Priorities Work Session

(Presented by Ms. Ann Rollins)

Ms. Ann Rollins (Health and Human Services Board (HHSB) Chair) led a discussion around the five selected HHSB priorities, listed below.

- Social and Economic Mobility
- Mental Health
- Access to Integrated Services
- Food Insecurity
- Senior Services

Each of the priorities had an issue brief and sample action plan provided in the HHSB agenda packet. The image below shows a sample for Social and Economic Mobility.

**Health and Human Services Board
2023 – 2026 Strategic Plan – Social and Economic Mobility Action Plan**

Goal: To implement and initiate an action plan that will enhance the social and economic mobility of Wake County residents.

Objective: TBD

Initiative: TBD

Actions: TBD

Executive Assistant to the Health and Human Services Board: Brittany Hunt

Committee Members: Wanda Hunter, Dr. Anita Sawhney, Dr. Kelcy Walker Pope, Commissioner James West
(Chair (MUST be Board Member):)

STRATEGY 1 –

Key Action Steps	Person/Workgroup Responsible	Date due	Resources -HR/Comm	Resources - Budget	Resources - IT	Performance Measure	Status
1. TBD	TBD	12/31/2023	TBD	TBD	TBD	1.TBD	In development
1. TBD	TBD	12/31/2023	TBD	TBD	TBD	1.TBD	In development
1. TBD	TBD	12/31/2023	TBD	TBD	TBD	1.TBD	In development
1. TBD	TBD	12/31/2023	TBD	TBD	TBD	1.TBD	In development
1. TBD	TBD	12/31/2023	TBD	TBD	TBD	1.TBD	In development

The goal for each action plan would be “to implement and initiate an action plan that will enhance (priority) in Wake County” (or a similar sentiment). Ms. Wanda Hunter asked Ms. Brittany Hunt, Executive Assistant to the HHSB, if she could provide a definition for each of the focal points (i.e., objective, initiative, actions) for the plan to help when working with the guideline. Ms. Hunt agreed and will be updating these action plan drafts.

Looking to the table included, each key action step would require the following:

- Description of key action step
- Person/Workgroup responsible
- Date due (flexible – December 31st, 2023 used as a temporary date)
- Resources – HR/Comm (What Human Resources or Communications do we need to achieve this key action step?)
- Resources – Budget (What budget resources do we need to achieve this key action step?)
- Resources – IT (What technical assistance do we need to secure to achieve this key action step?)
- Performance Measure – How will the success of the key action step be determined?
- Status (flexible and dependent on each key action step – In development used as a temporary status)

In addition to reviewing reference materials, Board members were allowed to volunteer as a Chair or Vice Chair of each Temporary Advocacy Committee (TAC). The results of this were the following leadership for TAC. Please note that this is still in development and will very likely change over time (either due to Board members’ terms ending or simply moving focus from one group to another).

- Social and Economic Mobility

- I. Chair: Dr. Kelcy Walker Pope
 - II. Vice Chair: VACANT
- Mental Health
 - I. Chair: Tanyetta Sutton
 - II. Vice Chair: Lily Chen
- Access to Integrated Services
 - I. Chair: DaQuanta Copeland
 - II. Vice Chair: VACANT
- Food Insecurity
 - I. Chair: Tamara Wilson
 - II. Vice Chair: VACANT
- Senior Services
 - I. Chair: Terry McTernan
 - II. Vice Chair: Ann Rollins

With this work complete, there were some additional conversations about meetings. Quarterly reports out may not be feasible with each and every TAC, so staggered reporting will be used with the hope to hear from the TACs semi-regularly when updates are available. Quarterly joint meetings between the Public Health Committee and Social Services Committee would be scheduled in the future. The next step would be scheduling the first meeting to determine key action steps, recorder for summaries or minutes, and understanding of additional presentations and/or stakeholders needed to inform, bolster, and sustain the TACs. Notably, these TAC meetings must be held after giving public notice (ten days for the public to be aware of and be able to attend the meeting). Ms. Hunt will work with TACs to ensure public notice is given.

- **Public Comments**
 - None

Adjournment

The meeting was adjourned at 9:41 A.M.

Board Chair's Signature:  **Date:** __05/25/2023__

Respectfully submitted by Ms. Brittany Hunt