



# **North Carolina Interagency Council for Coordinating Homeless Programs**

**Virtual Meeting**

**Wednesday, March 4, 2026 | 1:00PM – 3:00 PM**

# **Welcome & Opening Remarks**

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## ICCHP Duties

- Advise on housing stability and homelessness
- Align resources through interagency collaboration
- Support strategic plans
- Promote evidence-based practices
- Recommend improvements to programs and policies
- Provide guidance on issues referred by the Governor

## Key Areas of ICCHP Focus

- Increase access to rental and related housing financial assistance (e.g., rent, utilities, fees),
- Increase development of and access to rental units for people experiencing homelessness and those at risk, and
- Increase the availability and quality of housing-focused services, including housing stabilization case management and housing navigation and placement.

# Agenda

- Welcome & Remarks from Co-Chairs
  - Adoption of Minutes
  - State Agency Updates
  - Adoption of a Unified Vision for Supportive Housing
  - Building a Resilient System: Rural Health Transformation Program
  - Community Spotlight: Cross Sector Partners Come Together in a Shared Mission
  - Member Updates
  - Next Meeting & Adjourn
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# **Adoption of Minutes**

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# State Agency Updates

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# **Office of State Budget Management (OSBM)**

**Council Member Brett Altman**

**Assistant State Budget Officer, NC Office of State Budget  
and Management**

**<https://www.osbm.nc.gov/>**

# **North Carolina Housing Finance Agency (NCHFA)**

**Council Member Scott Farmer**

**Executive Director, NC Housing Finance Agency**

**<https://www.nchfa.com/>**

**NC Department of Commerce**

**Stephanie McGarrah**

**Deputy Secretary for the Division of Community  
Revitalization**

# **NC Department of Military and Veterans Affairs (DMVA)**

**Co-Chair Jessica Whichard**

**Chief of Staff, NC Department of Military and Veterans Affairs**

**<https://www.milvets.nc.gov/>**

# **NC Department of Health and Human Services (NC DHHS)**

**Co-Chair Karen Wade**

**Policy Director, NC Department of Health and Human Services**

**<https://www.ncdhhs.gov>**



# **Back@Home Update**

**Debra Farrington, Deputy Secretary of Health  
North Carolina Department of Health and Human  
Services**

**Date: March 3, 2026**

- **Expiration of COVID-era ERA2 funding required scale-down**
- **One-time bridge extends assistance through June 30, 2026**

- **Ending of RRH rental assistance impacts 644 individuals**
- **All individuals have been notified**
- **Providers will continue to support individuals to find alternative supports, rental assistance**

- **Case management services continue during the transition period.**
- **Income-based transitions continue**
- **No override of HUD 24-month RRH cap**
- **SSO referrals to Coordinated Entry**
- **Rental Assistance does not alter lease agreements**

# **NC Department of Health and Human Services (NC DHHS)**

**Co-Chair Karen Wade**

**Policy Director, NC Department of Health and Human Services**

**<https://www.ncdhhs.gov>**

## **State Agency Updates**

- **As time permits, this is a time for questions and discussion**
-

# **Advancing a Unified Vision for Supportive Housing**

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# Background and Discussion

NCDHHS Strategic Housing Plan

Goal Area 1, Objective 1c: Develop and adopt a PSH policy framework

Purpose of Adopting and Implementing PSH Framework:

- Creates common language and expectations across agencies
- Guides training, quality assurance, and program growth

# Clarification Edit

## Prioritization Reflecting Policy Goals

Each PSH program and funding source sets its own eligibility and prioritization of households to serve. In general, North Carolina prioritizes PSH to serve:

- People with disabilities exiting institutions
- Homeless individuals and households
- People with disabilities

## Call for Vote

**Motion before the committee is to adopt the State of North Carolina Permanent Supportive Housing Framework as presented, with the clarification noted.**

# **Building a Building a Resilient System: Rural Health Transformation Program**

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## Overview

- Rural Health Transformation Program (NCRHTP)
- Governance and DHB
- Initiative 5 Deep Dive
- Looking ahead and important next steps



## Why Rural Health Transformation?

### Rural Health Challenges in North Carolina at-a-glance



**28.4% of North Carolinians are rural** (nearly 3 million people).



**Chronic, perinatal, & mental health needs** i.e., 17% higher diabetes rate compared to urban areas; 90 counties are mental health shortage areas; maternal care deserts and higher pregnancy-related mortality; higher infant death rates



**Workforce shortages** where 24 counties lack adequate primary care; shortages in behavioral health, oral health and EMS are acute.



**Financial instability** i.e., 12 rural hospitals have closed or converted since 2006 limiting access to emergency and inpatient care.



**Digital divide** including broadband gaps and low digital literacy limit telehealth and care coordination.

# North Carolina's RHTP in Numbers



**3 million+** rural  
North Carolinians

**6 integrated initiatives**  
addressing workforce, access, technology, behavioral health, chronic disease, and payment models



**420+**  
**stakeholders**  
engaged in application development

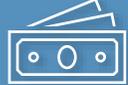


**2<sup>nd</sup> largest**  
rural population in the US



  
**400+**  
rural health facilities to be reached

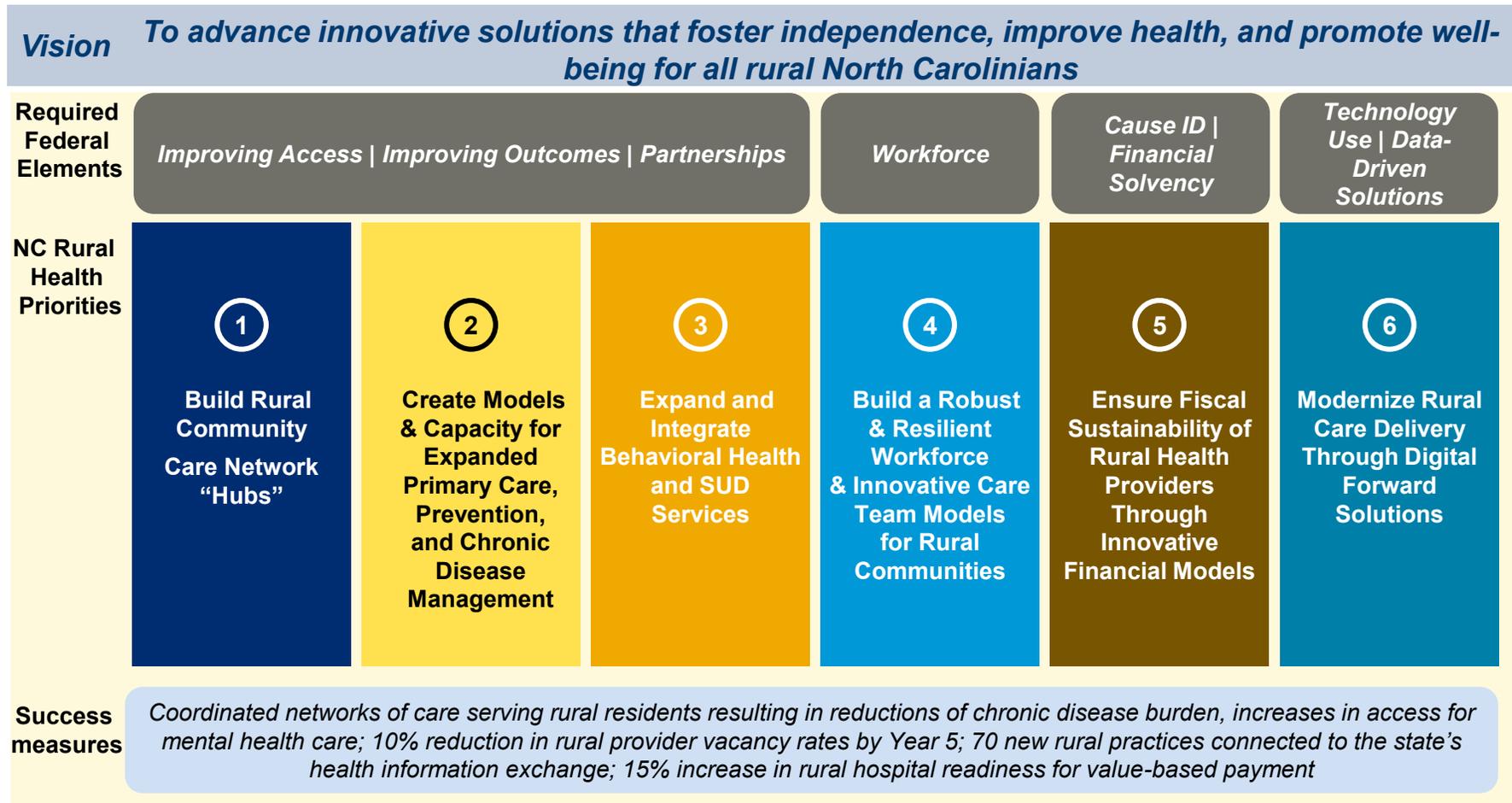
**~\$213 million for Year 1**  
\$1B in federal investment in NC over five years



## Guiding Principles for NCRHTP Implementation

- ✓ **Maximize resources for rural health**
- ✓ **Build out details on high level approaches**
- ✓ **Achieve quick wins**
- ✓ **Plan for long-term sustainability**
- ✓ **Prioritize measurable, community-level impact**
- ✓ **Employ flexible and agile approach; pivot when needed**
- ✓ **Communicate transparently and with integrity**

# Six Initiatives Work Together to Achieve NCRHTP Goals



## Six Interlinked Initiatives work synergistically to achieve NCRHTP Vision & Goals

1

### Build Rural Community Care Network “Hubs”

- Entities and networks that coordinate across medical, behavioral health, and social supports
- Build platforms to improve information sharing, joint training, program coordination, and group purchasing
- Care coordination and navigation supports across local networks of care

*Performance Objective: Establish 6 NC “ROOTS” Hubs by program Y2. (Improves access, outcomes, and partnerships)*

2

### Create Models & Capacity for Expanded Primary Care, Prevention, and Chronic Disease Management

- Design and deploy community-tailored services that address physical health, behavioral health, substance use, and upstream wellbeing needs
- Upstream supports and interventions emphasizing prevention and wellness

*Performance Objective: Decrease the % of adults in the target rural population reporting three or more chronic health conditions from 12.1% to 9.7% by Y5. (Improves access, outcomes, and partnership)*

3

### Expand and Integrate Behavioral Health and SUD Services

- Expanded services through the CCBHCs
- Enhanced assessment & treatment programs to address critical care gaps in first episode psychosis, rural crisis, mobile, outreach & response, mobile opioid treatment and medication units, and school-based health
- New collaboratives to connect patients to care.

*Performance Objective: Increase the number of Medicaid patients beginning MH treatment by 5% year through Y5. (Improves access, outcomes, and partnerships)*

## Six Interlinked Initiatives work synergistically to achieve NCRHTP Vision & Goals

4

### Build a Robust & Resilient Workforce & Innovative Care Team Models for Rural Communities

- Expanded rural residencies and fellowships and training/certification for CHWs, peers, direct care workers and other health professionals
  - Expanded simulation & interprofessional training
  - Increased capacity for qualified training sites and faculty/teachers
  - Outreach & high-school-to-job pipelines
- Performance Objective:** Decrease rural county provider vacancy rates by 10% by program Y5. *(Strengthens workforce)*

5

### Ensure Fiscal Sustainability of Rural Health Providers Through Innovative Financial Models

- Rural Medicaid VBP models via two linked programs:
    - Primary care capitation pilot
    - Rural hospital VBP capacity building
  - Reduce operating costs and inefficiencies in care delivery
- Performance Objective:** Increase participating rural hospital and primary care clinic readiness for or engagement in value-based payment models by 10-15% over baseline by program year 5 *(Financial solvency strategy and cause identification)*

6

### Modernize Rural Care Delivery Through Digital Forward Solutions

- Data exchange via rural provider connectivity to the state (HIE)
  - New rural precision public health models
  - Expanded rural provider adoption of AI tools, virtual care models for P2P consults and complex care management in regions where specialty care is limited
  - Improved digital health literacy and digital patient tools in rural communities
- Performance Objective:** Reduce the gap in rural provider HIE connectivity by 70 practices by program Y3 *(Addresses technology use and data-driven solutions)*

## The ROOTs Hubs Support for RHTP Initiatives 2-6

### Initiative 2 Physical Health

ROOTs Hubs will be responsible for assessing regional needs and directly fund projects which closely align with the needs of their community and address three (3) focus areas: Perinatal Health, Chronic Disease, and Food Is Medicine.

### Initiative 3 BH/SUD

The Hub Lead will be responsible for ensuring network partners and community members are aware and have access to appropriate behavioral health and substance use services and referral pathways, and support the integration of these services into the broader regional health strategy and care pathways.

### Initiative 4 Workforce

The Hub Lead will work to establish core workforce needs and strategies for the region. Additionally, Hub Leads may apply for technical assistance and funding for various workforce projects.

### Initiative 5 Financial Sustainability

The Hub Lead will be responsible for coordinating and funding efforts to establish fiscal sustainability for rural hospitals and primary care practices. This will include identifying and funding hospital feasibility studies as well as administering VBP capacity building funds for rural providers.

### Initiative 6 Digital

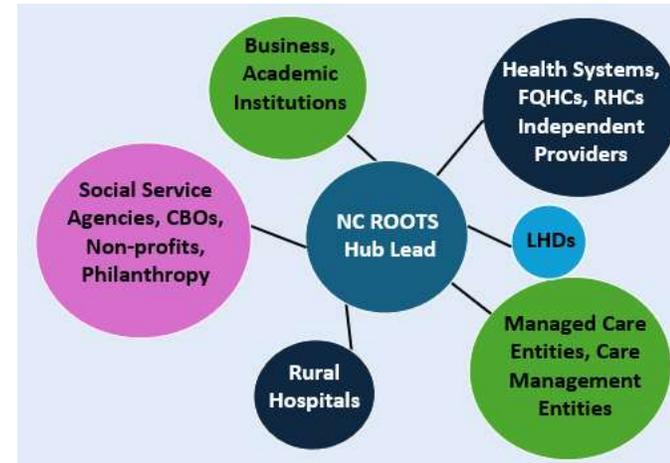
The Hub Lead is NOT responsible for the direct implementation or oversight of digital health infrastructure. Hub Leads will facilitate communication between local providers and state-led digital health programs, promoting awareness of available digital tools and resources

# Initiative 1 - The ROOTs Hubs Responsibilities and Network

The **ROOTs Hubs** will be responsible for implementing a set of mandatory projects associated with NCRHTP Initiatives defined by NCDHHS with the option to implement additional projects suited to regional needs.

The **ROOTs Hub Lead** will be responsible for the following activities to support the Rural Health Programs:

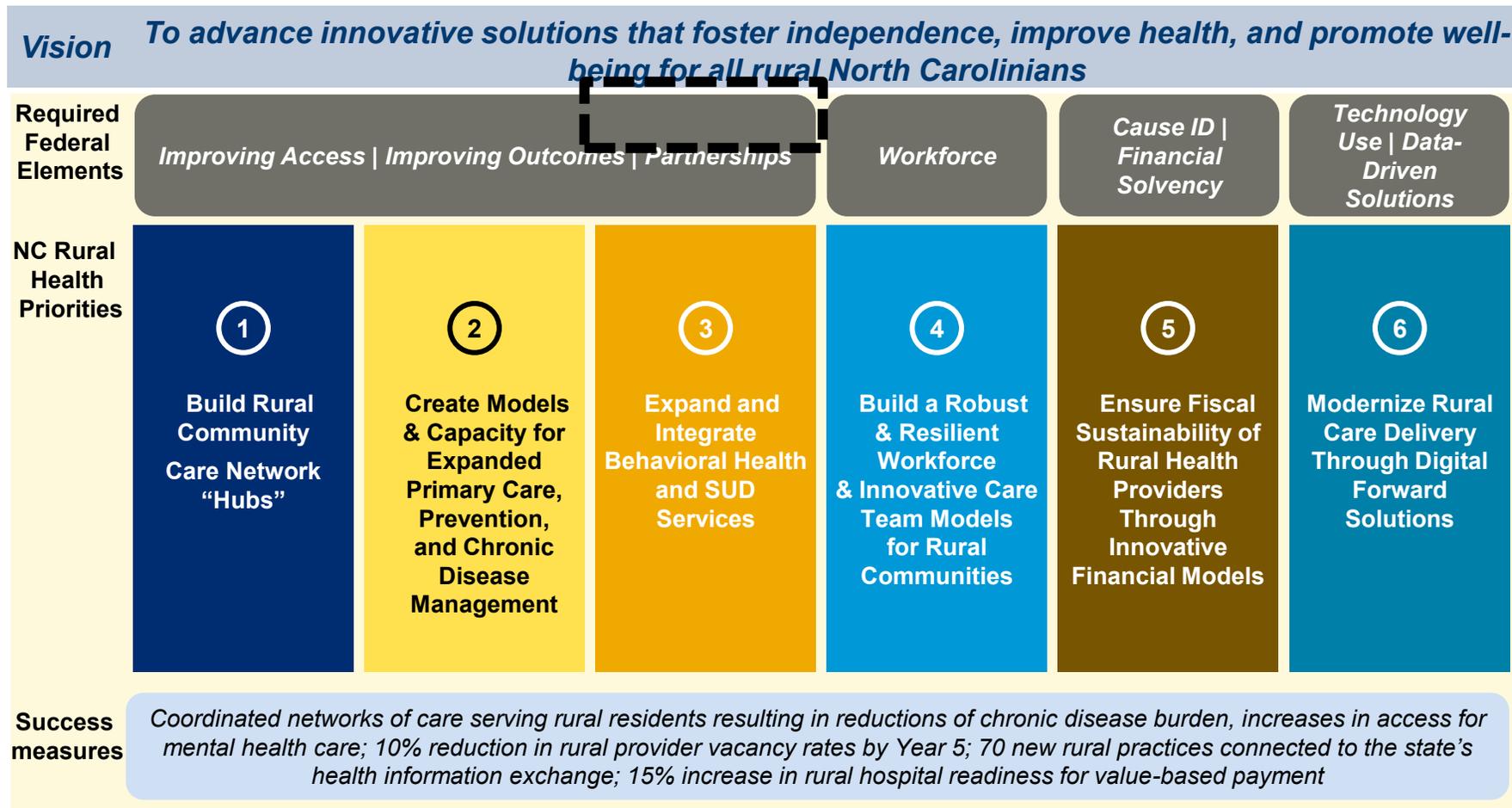
- 1) Standing up a governance structure and establish a network of providers and partners
- 2) Assess regional needs and set shared priorities and actions
- 3) Coordinate the development of models of care with defined care pathways and systems
- 4) Fund and implement programs based on the need of the region and alignment to the RHTP grant
- 5) Collect and analyze data to monitor performance and outcomes of programs against RHTP Goals and KPIs



**NC ROOTS Hub Network** is a diverse set of partners from across sectors that influence health and are invested in making rural North Carolina healthy again. The networks will include, but are not limited to: Safety net providers (hospitals, FQHCs, LHDs, RHCs); Behavioral health providers, CBOs, Academic institutions, Community members

# Six Initiatives Work Together to Achieve NCRHTP Goals

Deep dive next



## Timeline and Milestones for Project Year 2026\*

### January – March 2026

- Submitted revised budget to CMS for \$213M Year 1 funding.
- Establishing statewide program management and governance structures.
- Workplans development
- Release Request for Applications (RFA) for NC ROOTS Hub Lead entities.

### April – October 2026

- Conduct award process for regional hubs; Select and onboard Regional Hub Lead entities; Regional hubs develop action plans and local governance.
- Expand reach of existing statewide efforts aligned with NCRHTP.
  - Expanded behavioral health/SUD services
  - Expanded perinatal mental health support
  - Increased HIE participation, digital literacy efforts, & Rural Health Innovation Fund
  - Workforce initiatives launched
- Submit first annual progress report to CMS.
- Maintain continuous engagement with stakeholders and CMS to monitor success and progress toward goals.

**Note: Year-two funding is conditional upon Year-one success.**

*\* Assuming timely approvals from CMS and state administrative process, follows federal fiscal year*

**Thank You!**

**To learn more, including links to FAQs, January Town Hall recording,  
and other NC award information visit:  
[ncdhhs.gov/rhtp](https://ncdhhs.gov/rhtp)**

**Community Spotlight:  
Cross-Sector Partners Come Together  
in Shared Mission**

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# Blake Bourne

Executive Director

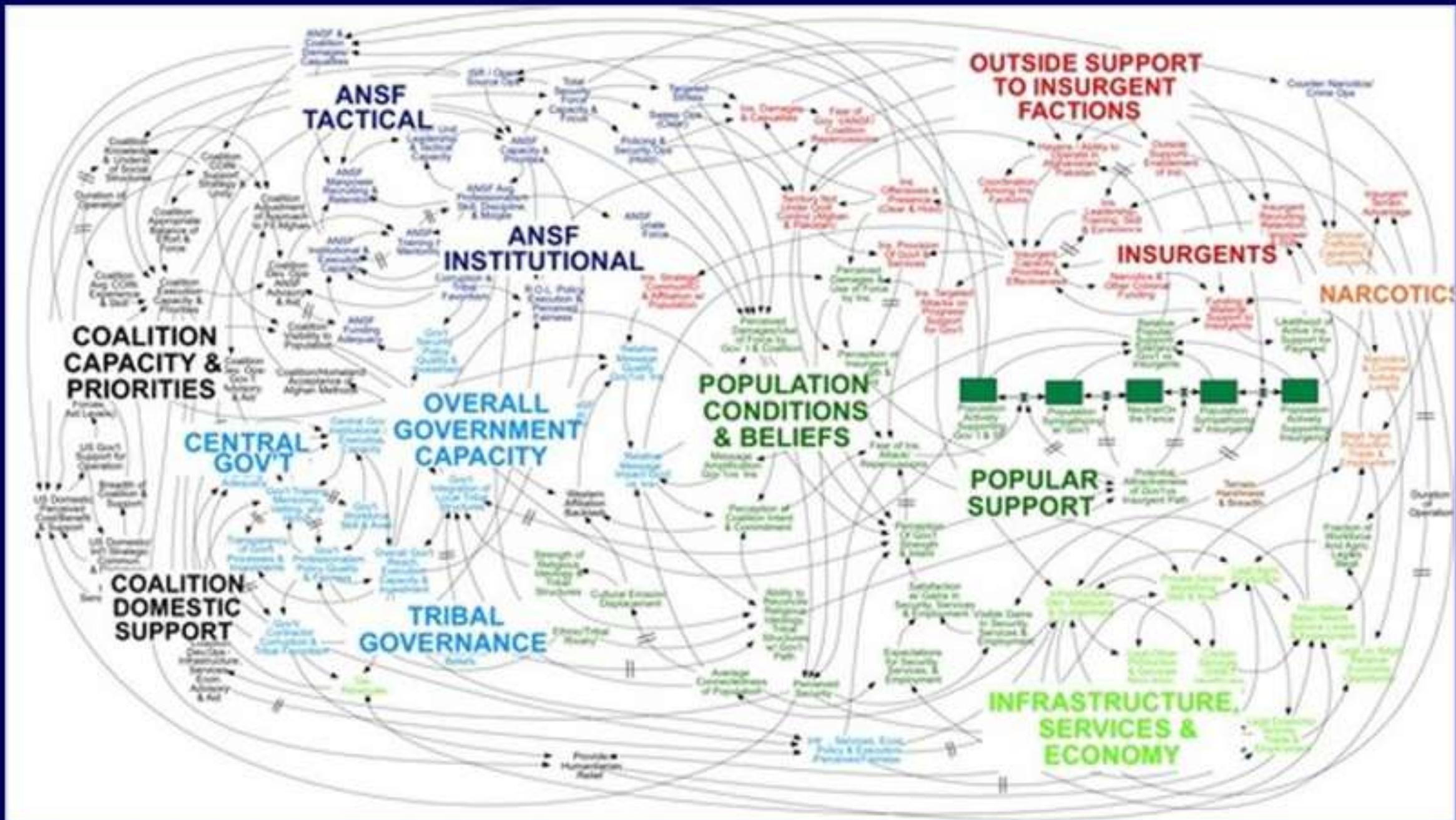
[www.VeteransBridgeHome.org](http://www.VeteransBridgeHome.org)

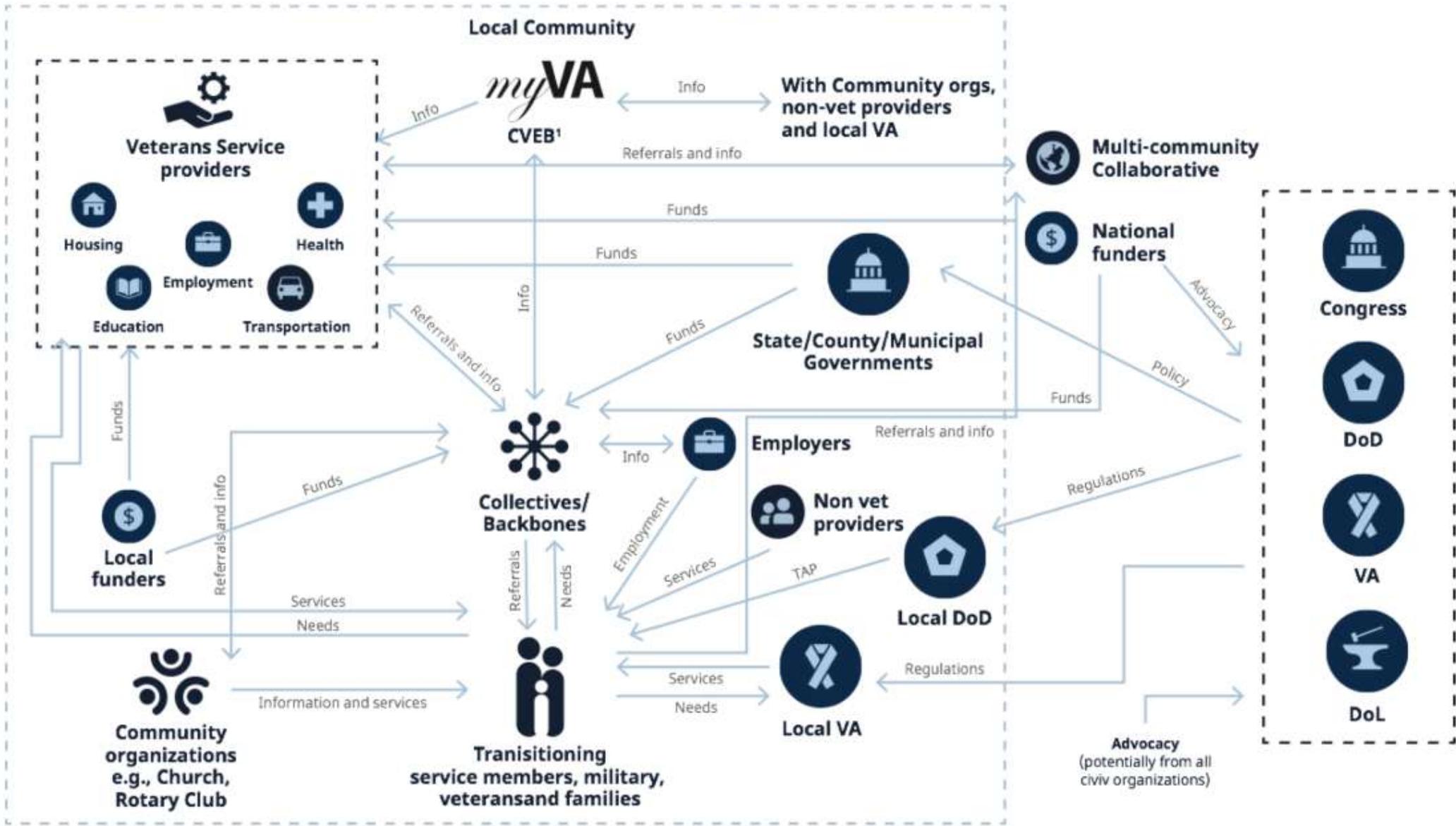
[bbourne@veteransbridgehome.org](mailto:bbourne@veteransbridgehome.org)



# BUILDING BRIDGES TRANSFORMING LIVES

Collective Impact in Action





# The Problem: Navigating the Sea of Good Will

American GI Forum  
American Ex-Prisoners of War  
American Legion  
American Red Cross  
AMVETS  
Army & Navy Union USA  
Blinded Veterans Association  
Catholic War Veterans & Auxiliary  
Disabled American Veterans  
Fleet Reserve Association  
Gold Star Wives  
Italian American War Veterans  
Jewish War Veterans  
Legion of Valor  
Marine Corps League  
Military Officers Association of America  
Military Order of the Purple Heart  
National Association of County Veterans Service Officers (NACVSO)  
National Association of Black Veterans  
National Veterans Legal Service Program  
Paralyzed Veterans of America  
Polish Legion of American Veterans  
Swords to Plowshares  
TREA Enlisted Association  
Veterans of Foreign Wars  
Veterans Coalition  
Vietnam Veterans of America  
Wounded Warrior Project  
Air Force Sergeants Association  
American Gold Star Mothers  
American War Moms  
Blue Star Mothers of America  
Congressional Medal of Honor Society  
Korean War Veterans Association  
Military Chaplains Association USA  
Military Order of the World Wars  
Navy Club USA  
United States Submarine Veterans  
Women's Army Corps Veterans' Association - Army Women  
United (WACVA-AWU)  
Armed Forces Services Corporation

Navy Mutual Aid Association  
Air Force Association  
American Division Veterans Association  
American Merchant Marine Veterans  
American Veterans for Equal Rights  
Army Aviation Association of America  
Association of Military Surgeons (AMSUS)  
Blinded American Veterans Foundation  
Bowlers to Veterans Link  
Cold War Veterans Association  
Commissioned Officers Association of the Congressional Black  
Caucus Veterans US Health Service  
Commit Foundation  
Daughters of Union Veterans of the Civil War  
Destroyer-Escort Sailors Association  
Eighth Air Force Historical Society  
Enlisted Association of the National 68  
National Guard of the US  
Fisher House  
Help Heal Veterans  
Hiring Our Heroes  
Hope For Warriors  
Iraq/Afghanistan Veterans of America  
Japanese American Veterans Association  
Marine Corps Reserve Association  
Military Child  
Military Family Advisory Network  
MarineParents.com  
Military Spouse Corporate Career Network  
MilitarySaves.org  
The Mission Continues  
National American Indian Veterans  
National Association of American Veterans  
National Association of Atomic Veterans  
National Association of Black Military Women  
National Association of Fleet Tug Sailors  
National Disabled Veteran Business Council  
National 4th Infantry Division Association  
National Guard Association of the US  
National Gulf War Resource Center  
National League of POW-MIA Families  
National Military Family Association

National Society Daughters of the American Revolution  
National Veterans Foundation  
Naval Enlisted Reserve Association  
Navy League of the United States  
Navy Nurse Corp. Association  
Navy Seabee Veterans of America  
Operation We Are Here  
Our Military Kids  
Reserve Officers Association of the United States  
Society of Medical Consultants to the Armed Forces  
Society of Military Widows  
Student Veterans of America  
Team Rubicon  
Team RWB  
The Forty & Eight  
Red River Valley Fighter Pilot Association  
Salvation Army  
TLC Brotherhood  
Tragedy Assistance Program for Survivors  
Travis Manion Foundation  
U.S. Army Warrant Officers Association  
USMM Veterans of World War II  
U.S. Navy Cruiser Sailors Association  
USCG Chief Petty Officers Association  
Veterans and Military Families for Progress  
Veterans for Common Sense  
Veterans of Modern Warfare  
Veterans of the Battle of the Bulge  
Vietnam Veterans Memorial Fund  
Women In Military Service for America Memorial Fndn  
Women Marines Association  
Women Overseas Service League  
Army Wife 101  
Army Wife Network  
Army Wife With Daughters  
Former Military Spouse  
Her Money Moves  
Jessica Lynn Writes  
Jo My Gosh  
Macho Spouse

MilitaryWives.com  
Military Spouse  
Military Spouse Advocacy Network  
Military Spouse Fest  
Military Spouse JD Network  
Military Travel Mama  
More Than a Mrs  
Nextgen Milspouse  
Seasoned Spouse  
Semi-Delicate Balance  
She is Fierce  
Singing Through The Rain  
Soldier's Wife, Crazy Life  
The Frugal Navy Wife  
The Military Wife & Mom  
The Millie Journal  
The Navy Mom  
Military.com  
MilitaryBenefits.info  
Military Times  
Stripes  
Task & Purpose  
College Recon  
G.I. Jobs  
Military-Transition.org  
Veterans Transition Support  
Military Transition Network  
Help Vet  
VA Benefit Blog  
VA Watchdog  
VeteransToday.com  
VeteransToday.org  
Veterans Aid Benefit  
Veterans Law Blog  
Veteran Resources  
Veterans Today Network  
Vets 4 Veterans  
U.S. Veterans Magazine

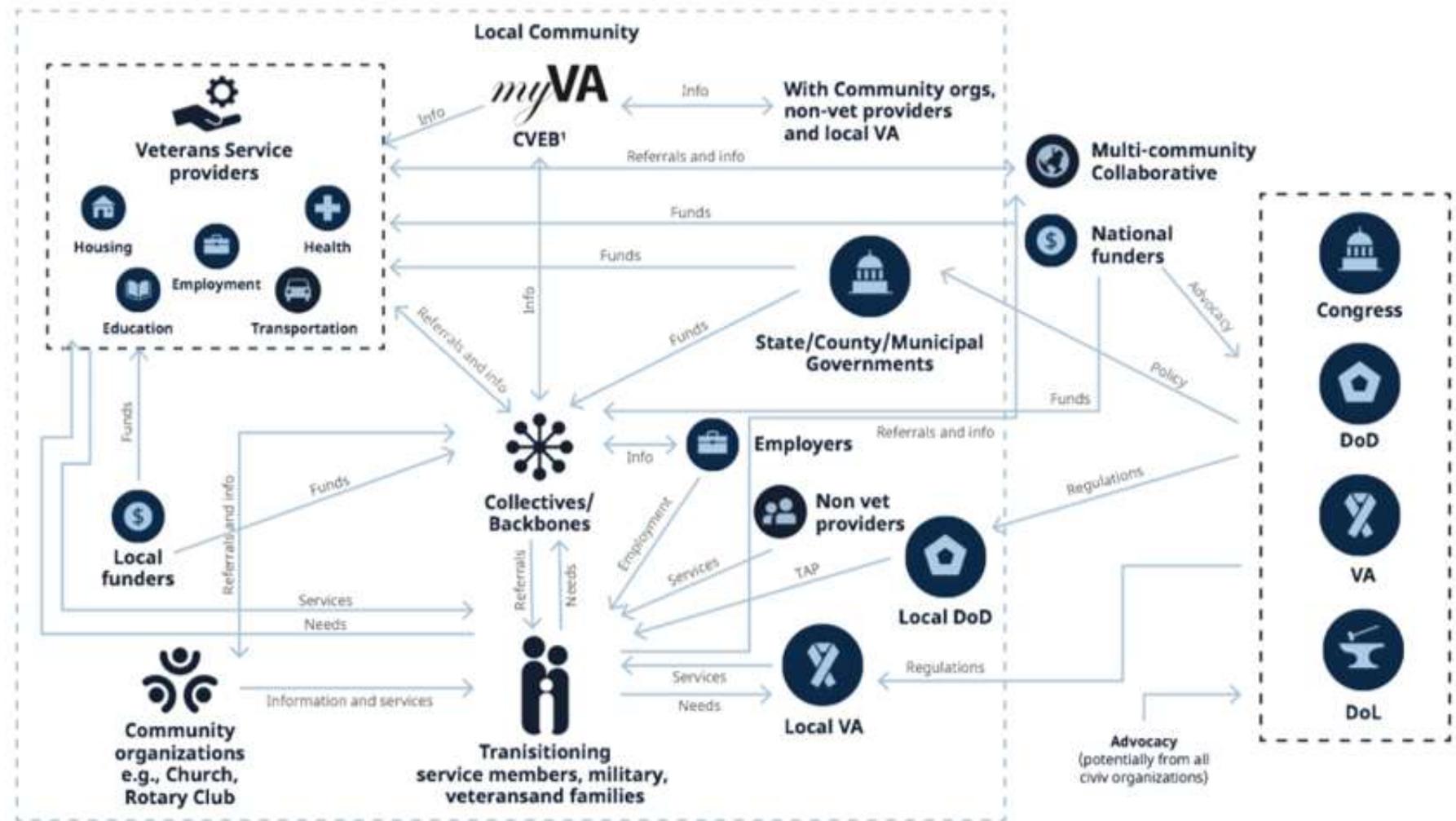
**+44,000 More**



# Our Approach: Build & Strengthen Local Veteran Ecosystems

Over 18.2 million veterans live in our nation's 3,141 counties. Access to services that meet their needs varies from community to community because systems aren't integrated. In short, **resource navigation is challenging.**

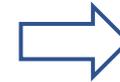
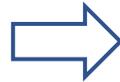
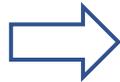
60% of veterans and their families agree that navigating benefits is the biggest challenge.\*



\* [chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://ivmf.syracuse.edu/wp-content/uploads/2022/01/2021\\_USAA\\_Brief1\\_finalDIGITAL\\_12.16.21\\_V2-FINAL-ua.pdf](https://chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://ivmf.syracuse.edu/wp-content/uploads/2022/01/2021_USAA_Brief1_finalDIGITAL_12.16.21_V2-FINAL-ua.pdf)

# The Solution: Coordinated Care

*Through our coordinated network, we better serve clients, providers, and improve Social Determinants of Health (SDOH) outcomes across the communities we serve.*



## **RIGHT VETERAN**

## **RIGHT PARTNER**

## **RIGHT SERVICE**

## **LEAST TIME**

*Our initial focus has been from the start to connect a veteran, family member, or transitioning service member to a service that aligns with their needs.*

*We have more than 3,000 providers in our State-wide network focused on serving their clients through the referral platform and knowledge exchange network.*

*Our outcomes continue to show greater impact to clients – more accurate and appropriate referrals are being made to partners across 24 different service types.*

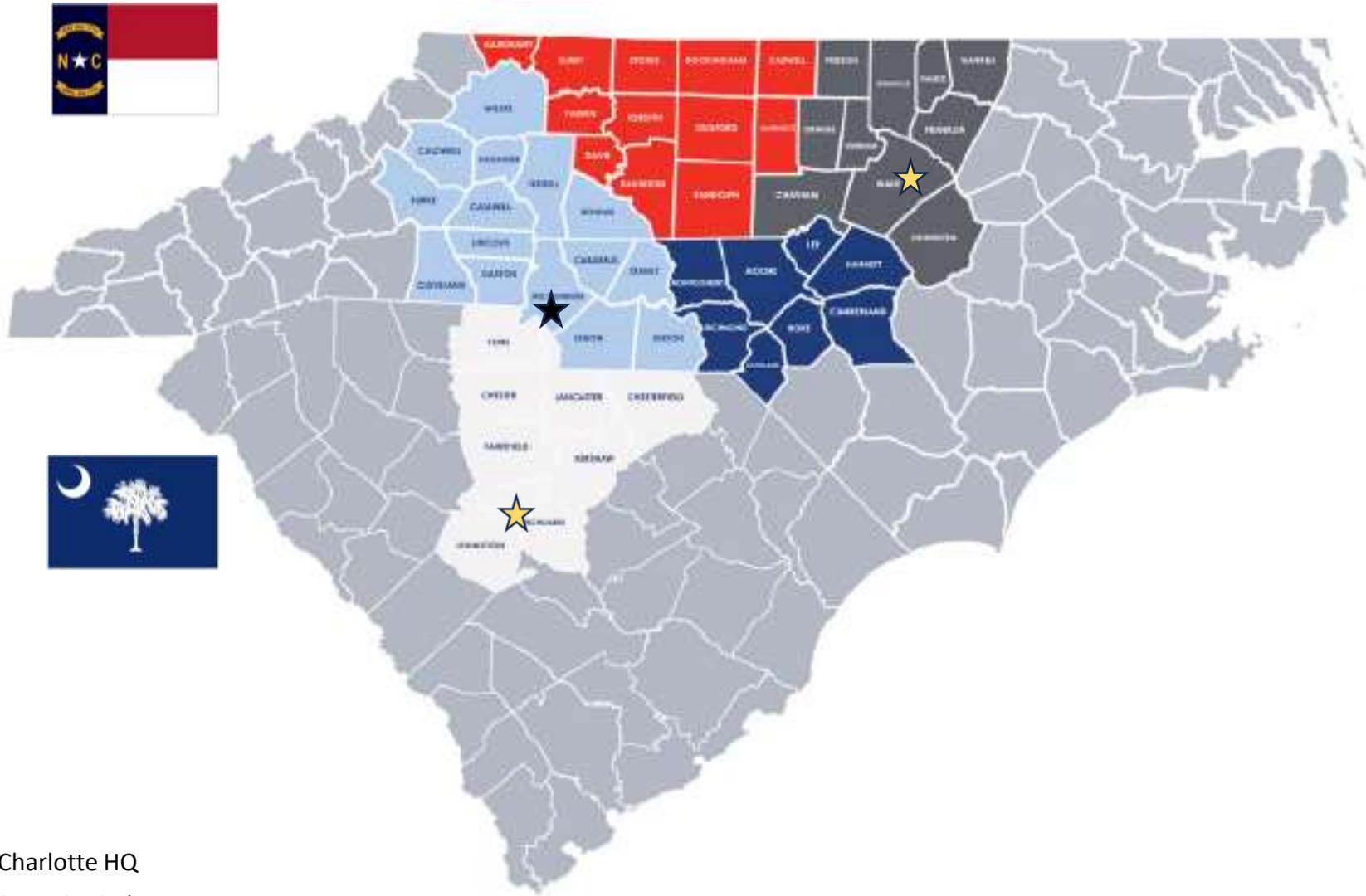
*Our outcomes are continuing to show efficiency at scale – more timely referrals are being made across the state.*



# MISSION

**To connect, lead, and advocate in communities to ensure service members, veterans and their families thrive.**

# VBH Communities



- **2 States**
  - North Carolina
  - South Carolina
- **5 Markets**
  - METROLINA
  - TRIAD
  - TRIANGLE
  - SANDHILLS
  - MIDLANDS
- **53 Counties**
  - 45 in NC
  - 8 in SC
- **550,000 Veterans**
- **700+ Partner Network**
- **400+ Companies**
- **200 Events**

★ Charlotte HQ  
★ State Capital

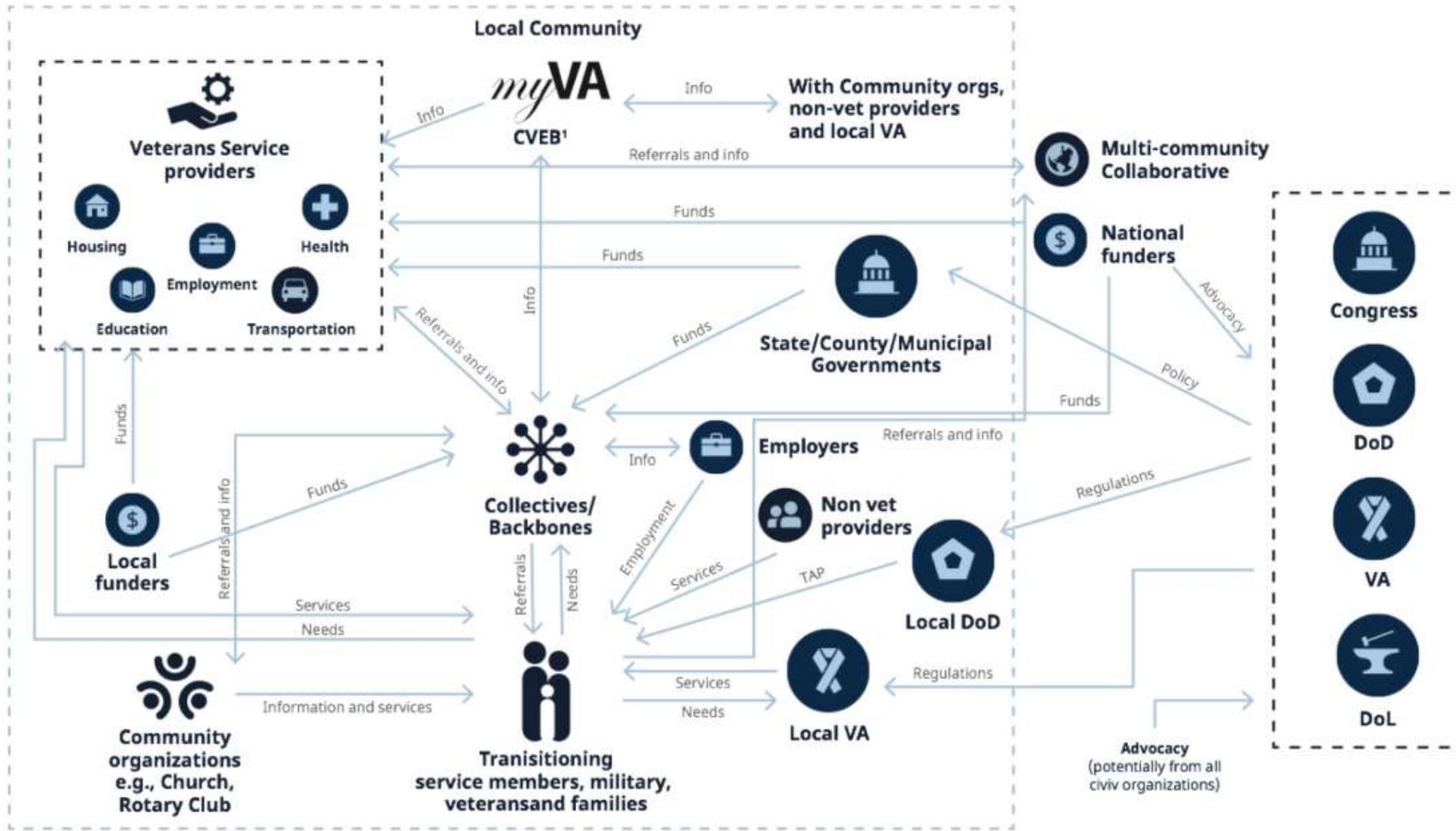
# Building stronger communities, one veteran at time.

Employers | Veterans | Non-Profits

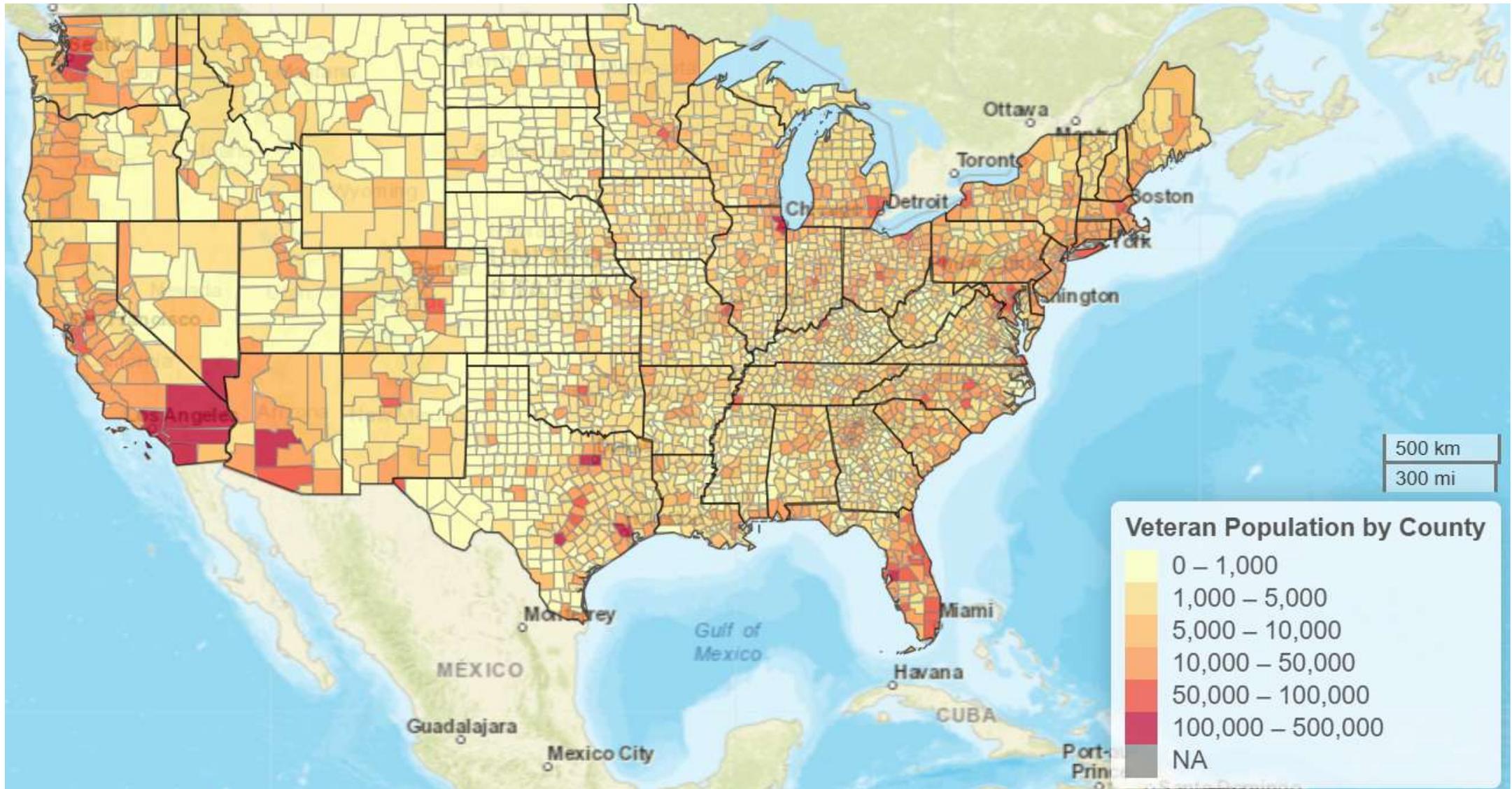
#BeTheBridge



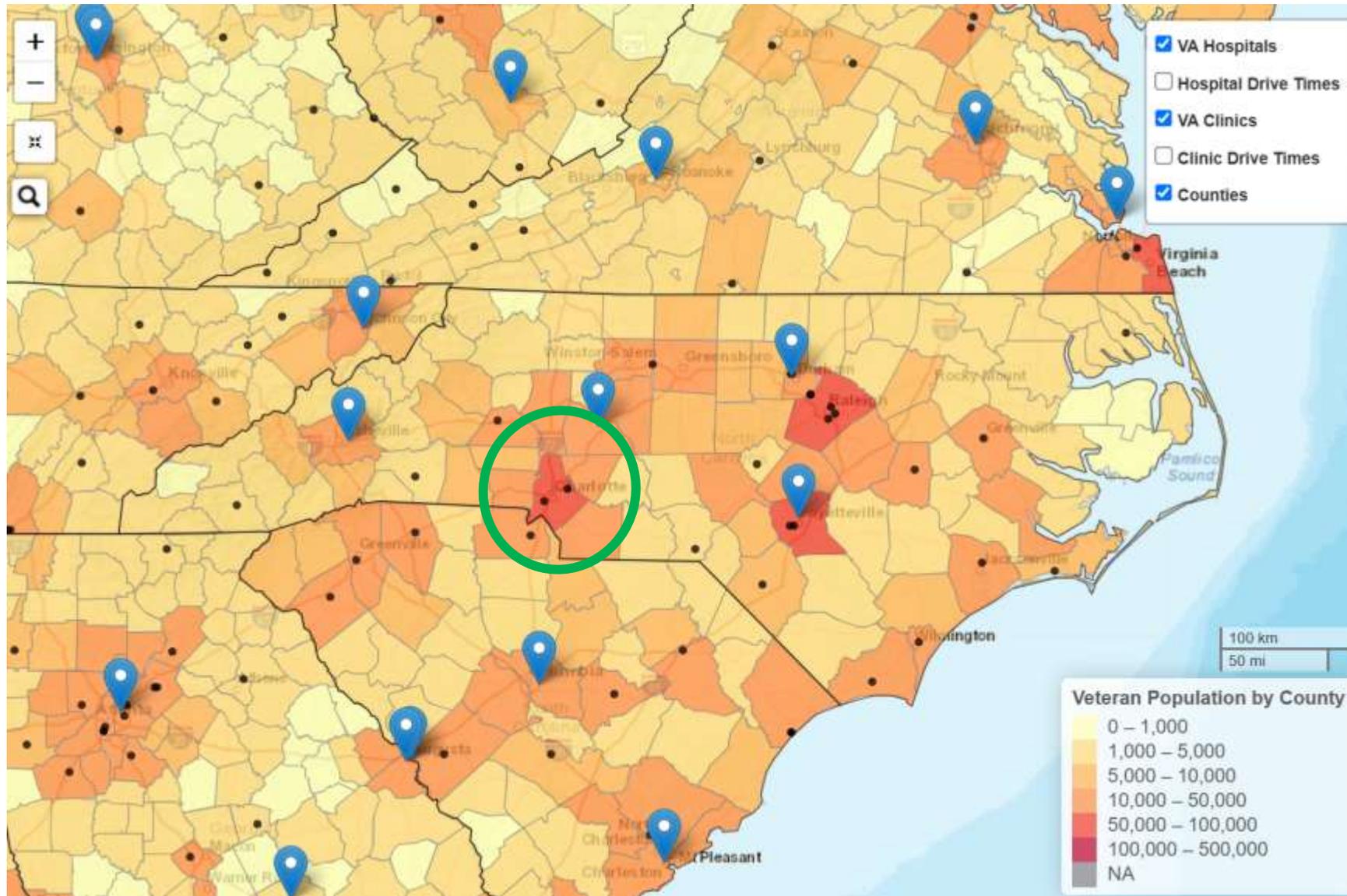
# The Solution: *CONNECTED COMMUNITIES*



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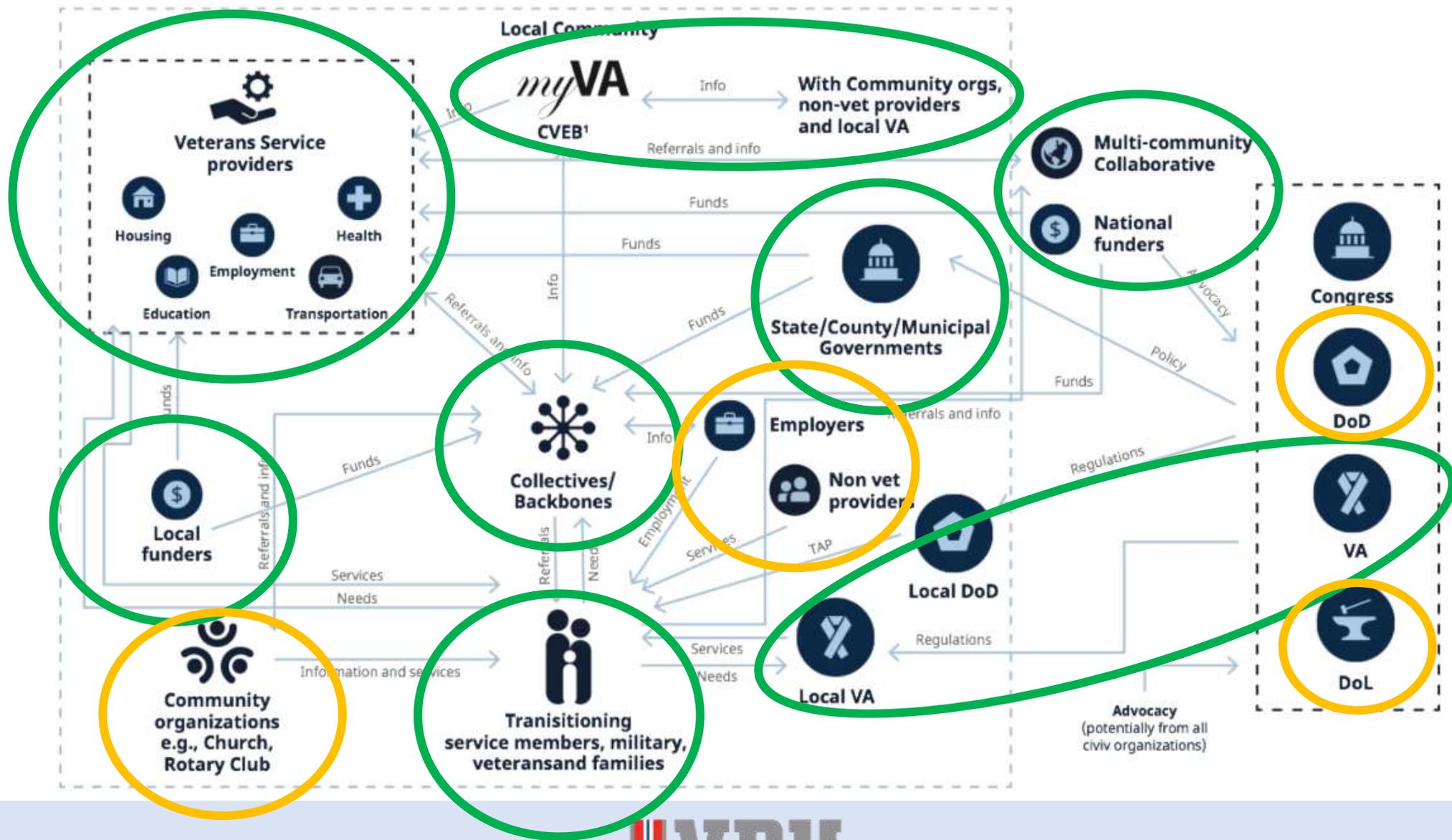
# CVEB & COUNTY LEVEL



- 1 CVEB
- 3-7 Counties
- 40 Mile radius
- 100k+ Vets

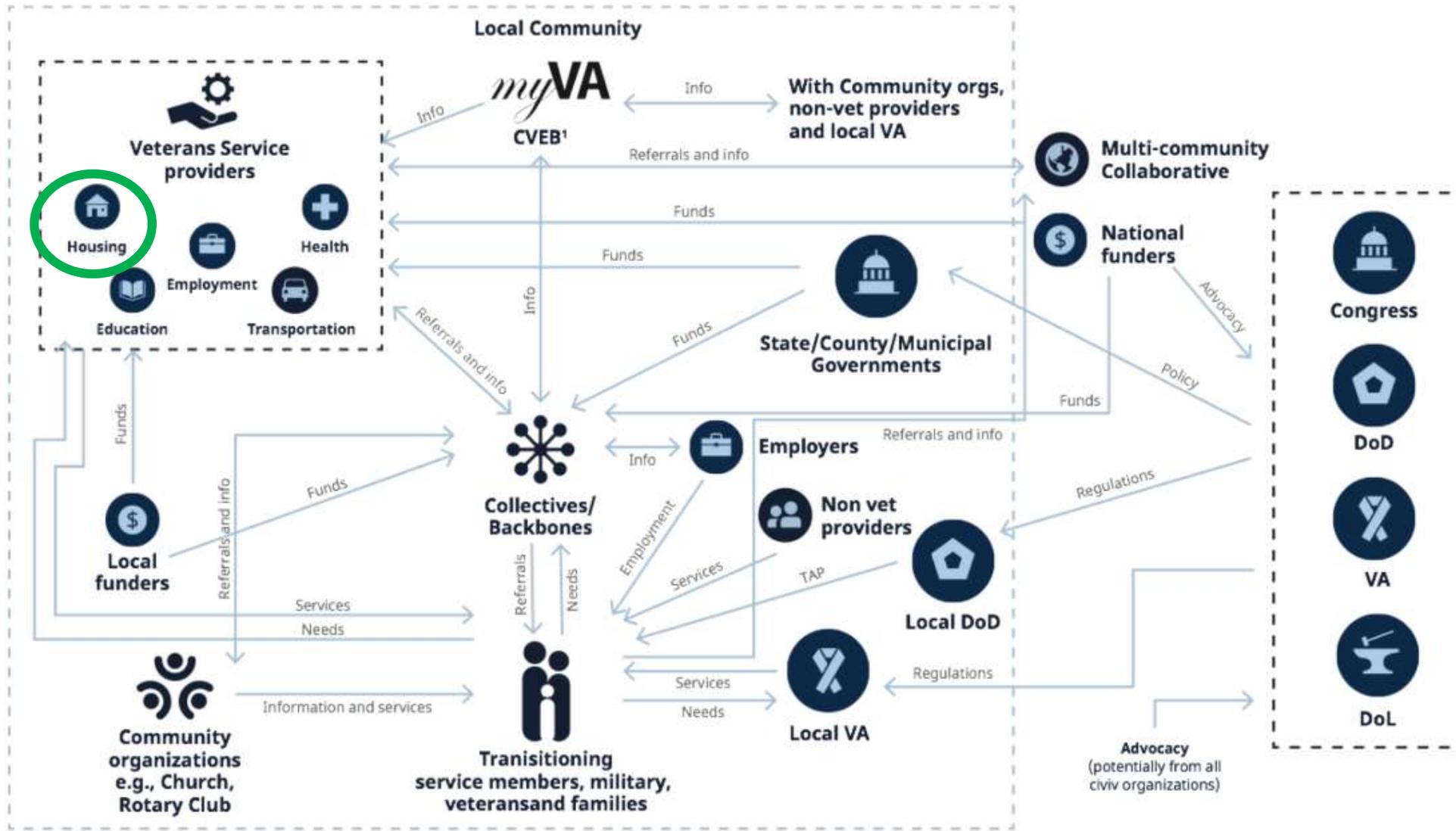
- Do You know your neighbor?
  
- 6 Key Social Determinants of Health
  - Housing
  - Healthcare
  - Education
  - Employment
  - Benefits & Financial Assistance
  - Social Enrichment

# The Solution: *CONNECTED COMMUNITIES*

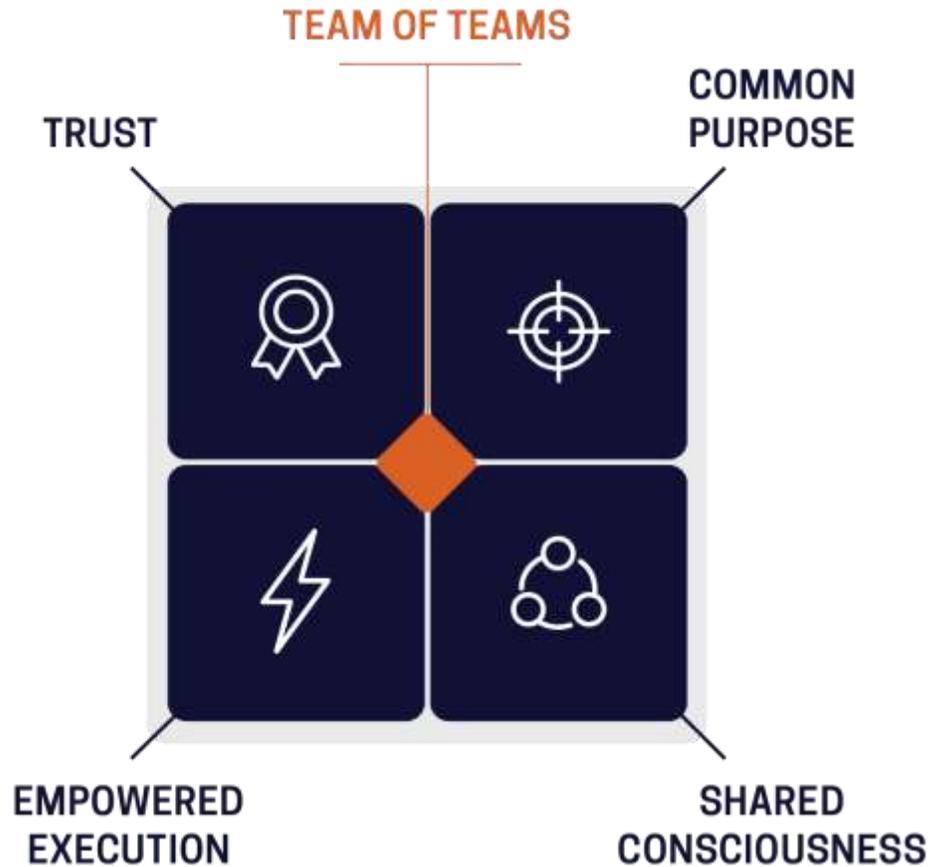
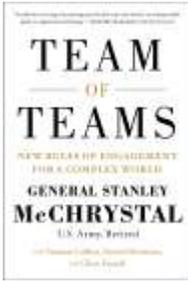




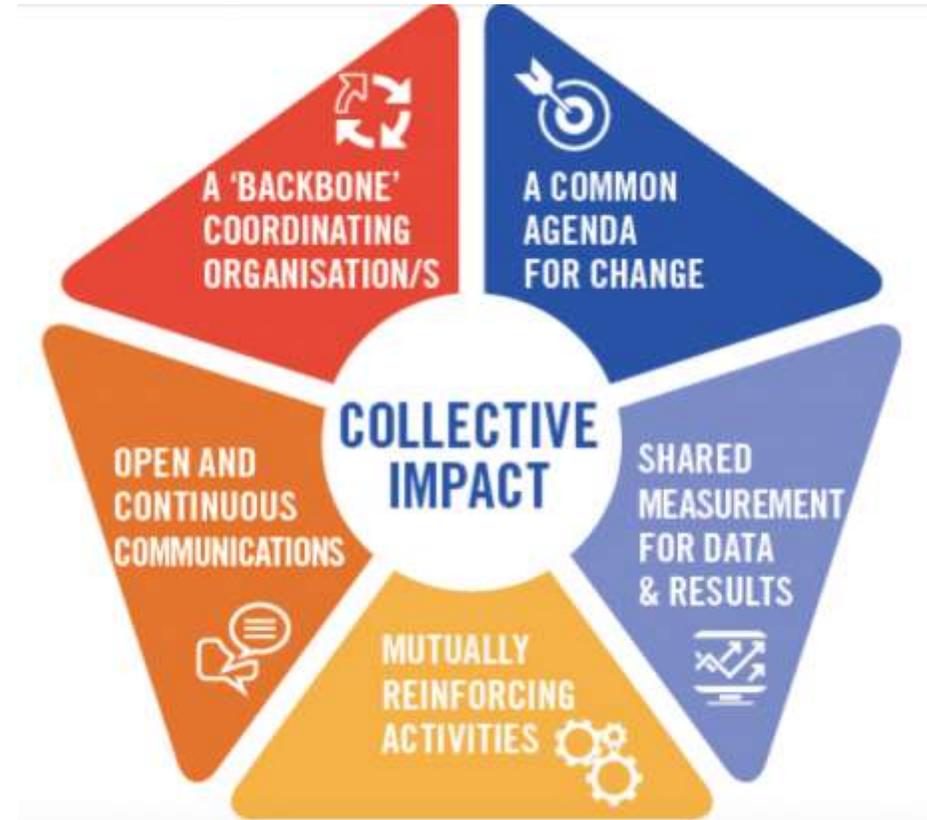
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# Team of Team vs. Collective Impact



<https://www.mcchrystalgroup.com/team-of-teams---a-foundational-course>



<https://collectiveimpactforum.org/what-is-collective-impact/>

# NC – 505: COMMUNITY ALIGNMENT & GROWTH

## TIMELINE:

- **2013:** “100 in 100” Task Force work – More than **450 homeless veterans in CLT**
- **2014:** Housing our Heroes – CoC Subcommittee Created by City of CLT & VBH
  - Monthly meetings, Formal Membership, 2x Co-Chairs
- **2015:** [NC-505 Char-Meck Continuum of Care](#) (CoC) joins [Built for Zero\(BFZ\)](#)
- **2018:** Achieved Quality by-name data for Veterans (comprehensive & real-time)
  - Part of an ongoing effort to improve data utilization, [highlighted by BFZ](#)
- **2019:** Mecklenburg County assumes responsibility of CoC from City of Charlotte
- **2020:** <https://mecklenburghousingdata.org/> launched for real time data visibility
- **2021:** Built for Zero – **Flex Funding = \$170k** (VBH & Meck County – 108 families served)
  - By-Name-List = **243 Veterans experiencing Homelessness**
  - Community Solutions Highlights NC-505’s [progress and coordination](#)
- **2022:** September – **BFZ Flex Funding “Sprint” = \$30k**, 18 veterans served
- **2023:** **\$1.5M ARPA Grant** Awarded to VBH to address Veteran Homelessness
  - Case for support built on success of BFZ Flex Funding efforts in ‘21 & ‘22
  - 326 Veterans served
- **2023:** *“Successfully reduced veteran homelessness by 25% from 2018 to 2023”*
- **2024:** January - [The Park at Ferentino acquired](#) for **\$31M** (216 units, 50% for Veterans)  
[Community Solutions announces \\$135M Large Cities Housing Fund](#)
  - Including Investments from Levine Foundation, Wells Fargo, Truist, etc.



# NC – 505: COMMUNITY ALIGNMENT & GROWTH

## 2013-2014:

- “100 in 100” Task Force work –



- More than 450 homeless veterans in CLT
- Weekly by-name meetings
- 4-5 partners to 12 to 20+

- **Housing our Heroes** – CoC Subcommittee Created by City of CLT & VBH



- Monthly meetings, Formal Membership, 2x Co-Chairs
- <https://www.youtube.com/watch?v=34JjUvc2wrM>



# NC – 505: COMMUNITY ALIGNMENT & GROWTH

## **2015-2020:**

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# NC – 505: COMMUNITY ALIGNMENT & GROWTH



## 2023-PRESENT:

- **2023:** “Successfully reduced veteran homelessness by 25% from 2018 to 2023”
- **2024:** January - [The Park at Ferentino acquired](#) for \$31M
  - 216 units, 50% for Veterans

[Community Solutions announces \\$135M Large Cities Housing Fund](#)

- Including Investments from Levine Foundation, Wells Fargo, Truist, etc.



## JANUARY 2026 – By Name List <https://mecklenburghousingdata.org/housing-data-snapshot/>

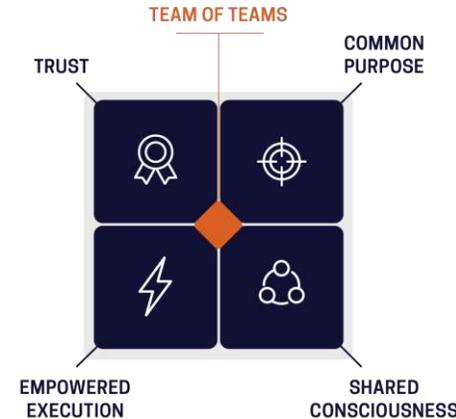
- Veterans experiencing homelessness = 151
- Chronically Homeless Veterans = 39



# NC – 505: COMMUNITY ALIGNMENT & GROWTH

## LESSONS LEARNED:

- **DON'T WORRY WHO GETS CREDIT** – Shared Leadership & Trust
- **BE FLEXIBLE** – doing whatever is necessary, as a group!
- **MEASURE & STORY TELL** – CONSTANTLY reinforcing small wins.
- **PATIENCE** - in the midst it feels slow, stay focused on the goal in the face of changes
- **VERTICAL ALIGNMENT:** You need Local, State, & National resources to be aligned



# How to Support Veterans? - "Be The Bridge!"

**Attend Veteran Events**



**Sponsor Veteran Events**



**Workout with Veterans**



**Volunteer with Veterans**



**Recognize Your Veterans**



**Honor Veterans**

# How can I help or get connected?



**Sign up for the VBH Newsletter**

**Like us on Facebook, LinkedIn, Instagram**

**Get to know & Connect your Service Member, Veteran Neighbors**

**Attend a VBH Workout, Coffee, or Volunteer Event**

**OR**

**Make a Donation - any amount helps!**

[www.veteransbridgehome.org](http://www.veteransbridgehome.org)

704-332-8802



# Member Updates

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## Member Updates

**Start with Who You Are** - Name, role, and agency

### Examples of Updates

- **Actions Underway:** regional initiatives, pilots, or strategies
  - **New Resources:** recent funding, new programs, or partnerships
  - **Unresolved Issues:** barriers that need state attention
  - **Celebrations:** New units opened, positive program outcomes
-

**Next Meeting**

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## ICCHP Meeting Dates

Next Meeting: June 17, 2026 1:00 PM – 3:00 PM (Virtual)



**website:** <https://bit.ly/NC-ICCHP>

**email:** [ICCHP@dhhs.nc.gov](mailto:ICCHP@dhhs.nc.gov)

**Adjourn**

**Thank you for all that you do!**

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