

Division of Public Health

Agreement Addendum

FY 22-23

Administrative, Local and Community
Support/Local Technical Assistance & Training

DPH Section / Branch Name

Susan H. Little, 919-215-4471
susan.little@dhhs.nc.gov

DPH Program Contact

(name, phone number, and email)

Local Health Department Legal Name

110 General Aid-to-Counties

Activity Number and Description

06/01/2022 – 05/31/2023

Service Period

07/01/2022 – 06/30/2023

Payment Period

Original Agreement Addendum

Agreement Addendum Revision # _____

DPH Program Signature

(only required for a negotiable Agreement Addendum)

Date

I. **Background:**

This funding is the only unrestricted funding for local health departments that they may use for locally determined needs or purposes. The General Aid-to-Counties Activity was begun in the early 1970s with a fiscal year allocation of slightly less than \$5 million. The total allocation for FY 2022-23 is \$11,306,871.

The funding provided by this Activity is to support the delivery of the **10 Essential Public Health Services** (<https://publichealth.nc.gov/mission.htm>), the core functions of public health, and the specific health needs or health status indicators selected by each local health department.

II. **Purpose:**

This Agreement Addendum enhances the Local Health Department's ability to deliver the essential services that it should provide to those living in the community it serves and to meet locally determined needs for which there is no or not enough categorical funding.

The North Carolina General Statute § 130A-1.1(b) states: a local health department shall ensure that the following 10 Essential Public Health Services are available and accessible to the population in each county served by the local health department:

1. Monitoring health status to identify community health problems.
2. Diagnosing and investigating health hazards in the community.
3. Informing, educating, and empowering people about health issues.
4. Mobilizing community partnerships to identify and solve health problems.
5. Developing policies and plans that support individual and community health efforts.

Health Director Signature (use blue ink or verifiable digital signature)

Date

LHD to complete:

[For DPH to contact in case

follow-up information is needed.]

LHD program contact name: _____

Phone and email address: _____

Signature on this page signifies you have read and accepted all pages of this document.

6. Enforcing laws and regulations that protect health and ensure safety.
7. Linking people to needed personal health care services and ensuring the provision of health care when otherwise unavailable.
8. Ensuring a competent public health workforce and personal health care workforce.
9. Evaluating effectiveness, accessibility, and quality of personal and population-based health services.
10. Conducting research.

III. **Scope of Work and Deliverables:**

These funds may be used for any public health program or purpose, any locally identified need or current health status data, and to support the delivery of the 10 Essential Public Health Services. The Local Health Department **must report at the end of the fiscal year** how the funds were spent related to the 10 Essential Public Health Services and locally determined needs. These funds may NOT be used to supplant current state, federal or local funding to the agency.

To qualify for these funds, the Local Health Department must have a Permanent or Interim Health Director per NC GS § 130A-40. In addition, if that Health Director has never served in that role in North Carolina previously, that Health Director must participate in the *Orientation for New Local Health Directors* coordinated by the North Carolina Association of Local Health Directors. Additionally, the Local Health Department must be currently accredited by the North Carolina Local Health Department Accreditation Board.

Additionally, to qualify for these funds, the Local Health Department must employ a public health nurse leader or leaders to meet the expectations for the administration of nursing service as set forth in 21 NCAC 36.0224(j).

To improve communication between Local Health Department leadership and Division of Public Health leadership, local health department governance structure and contact information for key leadership staff is required to be submitted annually to the Local Technical Assistance and Training Branch (LTAT) Branch Head using the Smartsheet dashboard. This information includes:

1. Agency's legal name
2. Address of record
3. Governance Structure
4. Name and contact information for:
 - a. Health Director
 - b. Senior Public Health Nurse Leader
 - c. Clinical Services Manager (if different from the Nursing Leader)
 - d. Medical Director
 - e. Finance Officer
 - f. Environmental Health Director

IV. **Performance Measures / Reporting Requirements:**

1. **Performance Measures**

- a. **Measure #1:** The Local Health Department shall provide information on how the funds were allocated among the 10 Essential Public Health Services and provide at least one example on the impact these funds had on the health of its community.

- b. **Measure #2:** The Local Health Department shall provide local health department updates on governance and leadership staff annually to the LTAT no later than June 30, 2023.

2. **Reporting Requirements**

Complete the following reports via the Smartsheet dashboard, which can be accessed at <https://app.smartsheet.com/b/publish?EQBCT=82018408e7b44ef9b44e113b6e536ffb>.

- a. **Essential Services Report:** The information reported must reflect the work performed during the service period of this FY 22-23 Agreement Addendum, June 1, 2022–May 31, 2023. The report must be completed no later than June 30, 2023.
- b. **Key Leadership Staff Report:** The annual reporting includes all of the information listed above in Section III. Scope of Work and Deliverables. The report must be completed no later than June 30, 2023.

V. **Performance Monitoring and Quality Assurance:**

The LTAT Branch Head will monitor performance by reviewing the Essential Services Report and the Key Leadership Staff Report. If additional information is required, a phone conference will be conducted.

VI. **Funding Guidelines or Restrictions:**

- 1. Requirements for pass-through entities: In compliance with 2 CFR §200.331 – *Requirements for pass-through entities*, the Division of Public Health provides Federal Award Reporting Supplements to the Local Health Department receiving federally funded Agreement Addenda.
 - a. Definition: A Supplement discloses the required elements of a single federal award. Supplements address elements of federal funding sources only; state funding elements will not be included in the Supplement. Agreement Addenda (AAs) funded by more than one federal award will receive a disclosure Supplement for each federal award.
 - b. Frequency: Supplements will be generated as the Division of Public Health receives information for federal grants. Supplements will be issued to the Local Health Department throughout the state fiscal year. For federally funded AAs, Supplements will accompany the original AA. If AAs are revised and if the revision affects federal funds, the AA Revisions will include Supplements. Supplements can also be sent to the Local Health Department even if no change is needed to the AA. In those instances, the Supplements will be sent to provide newly received federal grant information for funds already allocated in the existing AA.