HAYWOOD COUNTY
BUDGET ORDINANCE AMENDMENT
FISCAL YEAR 2015-16

PER: _____
JNL: _____

BE IT ORDAINED by the Board of Commissioners of Haywood County that the following amendment be made to the budget ordinance for the fiscal year ending June 30, 2016

Section 1. To amend the General Fund, the expenditures are to be charged as follows:

Department	Account Number	Current Budget	Increase (Decrease)	Amended Budget
HHSA				
Adult Health Services:				
Special Program Materials	115151-523100-16EVD	-	3,027	3,027
Office Supplies	115151-526000-16EVD	-	4,731	4,731
Non-Expendable Office Supplies	115151-526900-16EVD	-	695	695
c/o Data Processing Equip	115151-531100-16EVD	-	7,622	7,622
Training	115151-539500-16EVD	-	425	425
Travel	115151-552000-16EVD	-	1,000	1,000
c/o Medical Equipment	115151-553000-16EVD	-	2,500	2,500
				-
				-

which will result in a net increase of $ 20,000 in the expenditures of the General Fund.

To provide the additional revenue for the above, the following revenues will be increased as the money has been received:

Revenue	Acct. No.	Current Budget	Increase (Decrease)	Amended Budget
Restricted Intergovernmental				
Ebola Preparedness & Response	110050-451360-16EVD	-	20,000	20,000
				-
				-
				-

Section 2. Copies of this budget amendment shall be delivered to the Budget Officer and the Finance Officer for their direction.

Adopted this the 1 day of February, 2016.

Chairman
Haywood County Board of Commissioners

ATTEST:

Clerk to the Board

Explanation:
To recognize the state funding awarded for Ebola
Preparedness and Response for FY 2015-2016 to develop
an operations plan for responding to Ebola Virus Disease.

Division of Public Health
Agreement Addendum
FY 15–16

Haywood County Health & Human Services Agency
Local Health Department Legal Name

Epidemiology/PH Preparedness & Response
DPH Section/Branch Name

613 Ebola Preparedness and Response
Activity Number and Description

Nikki Marshall, (919) 715-1389,
nikki.i.marshall@dhhs.nc.gov
DPH Program Contact
(name, telephone number with area code, and email)

07/01/2015 – 05/31/2016
Service Period

DPH Program Signature **Date**
(only required for a negotiable agreement addendum)

08/01/2015 – 06/30/2016
Payment Period

☒ **Original Agreement Addendum**
☐ **Agreement Addendum Revision #** [illegible]etary Estimate revision # here.)

I. **Background:**
Within the last year, the threat o [illegible] become a top national priority of the Centers for Disease Control an[illegible] Ebola poses as a real threat to North Carolina. Public Health Prepar[illegible]s identified systematic approaches to strategically assist the public h[illegible] of threats, responsiveness to travelers' needs, and a response system to [illegible] exposed individuals and the state of North Carolina. North Carolina is developing [illegible]g public health plans to better care for and protect residents, responders, and persons exposed to an[illegible] or exhibiting symptoms of EVD.

II. **Purpose:**
The purpose of this Activity is to enhance public health emergency preparedness planning and operational readiness for Ebola Virus Disease (EVD).

III. **Scope of Work and Deliverables:**
The Local Health Department shall:

1. Develop a Concept of Operations Plan for responding to Ebola Virus Disease (EVD) by May 30, 2016. The Concept of Operations Plan shall include monitoring, reporting, transportation and treatment plans of the healthcare coalitions, communications and information sharing, and worker safety.
2. Develop an Isolation and Quarantine Plan to include processes and procedures for responding to EVD by May 30, 2016.

Health Director Signature (use blue ink) Date

Local Health Department to complete: (If follow up information is needed by DPH)	LHD program contact name: _____ Phone number with area code: _____ Email address: _____

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

3. Collaborate with community partners including hospitals and law enforcement to convene and facilitate:
    a. One informational sharing session and one training session, meeting, webinar, and/or conference call for responding to EVD by December 31, 2015.
    b. One informational sharing session and one training session, meeting, webinar, and/or conference call for responding to EVD by April 30, 2016.
4. Develop a Personal Protective Equipment (PPE) Plan to include processes and procedures for responding to EVD by May 31 2016.
5. Plan and facilitate Personal Protective Equipment (PPE) training for staff and partners for responding to EVD by April 30, 2016.
6. Develop a Risk Communication Plan to include processes and procedures for responding to EVD by May 31, 2016.

IV. Performance Measures/Reporting Requirements:

The Local Health Department shall:

1. Provide data as requested by PHP&R that supports reporting for the Performance Measures needed by the CDC Public Health Emergency Preparedness Cooperative Agreement. The essential data elements are found in the CDC Public Health Preparedness Capabilities and subsequent updates from CDC. Preparedness activities will be aimed at achieving, at minimum, locally applicable priority elements as defined in the CDC Public Health Preparedness Capabilities document.
2. Complete and submit the following reports:
    a. A copy of the Local Health Department's Ebola Concept of Operations plans for its local jurisdiction by June 30, 2016;
    b. Monthly Expenditure Monitoring Reports (EMRs).
    c. Mid-year activities and progress report by January 15, 2016 and final report by June 30, 2016 to the PHP&R Performance Measures Tracker Database.
3. Provide all plans and documents for review by PHP&R staff when requested. Plans and other documents must be consistent with state and federal requirements and must be specific to your local public health area.

V. Performance Monitoring and Quality Assurance:

PHP&R will provide technical support to the Local Health Department in preparedness planning, training, and exercising. Templates, best practices, and conferences will be provided on an ongoing basis.

PHP&R's Subrecipient Grants Monitor or PHP&R Program Manager's designee will review reports from PHP&R's Progress Check Database and may schedule and conduct on-site visits with the Local Health Department to assess compliance with CDC grant and Agreement Addendum requirements, financials, and/or provide consultative assistance.

Inadequate performance on the part of the Local Health Department directly impacts the capacity of North Carolina's ability in overall preparedness. In the event that performance is deemed inadequate or non-compliant, PHP&R reserves the right to identify the county as "high risk," which may result in a reduction or suspension of funds.

While not necessarily an indicator of inadequate performance, a Local Health Department's inability to spend allocated funds will result in an assessment and potential recall of funds for re-allocation to other local health departments.

VI. **Funding Guidelines or Restrictions:** (if applicable)
Funds may not be used to purchase meals and/or snacks. Equipment and supply purchases exceeding $2,500 for single or multiple items must receive prior written approval from PHP&R. (See Consolidated Agreement, Section B, 14.b. –Funding Stipulations.)

DPH-Aid-To-Counties For Fiscal Year:15/16 Budgetary Estimate Number : 0

Activity 613		AA	1264 2680 M8	Proposed Total	New Total
Service Period			07/01-05/31		
Payment Period			08/01-06/30		
01 Alamance	*	0	20,000	20,000	20,000
D1 Albemarle	*	0	27,000	27,000	27,000
02 Alexander	*	0	20,000	20,000	20,000
04 Anson	*	0	20,000	20,000	20,000
D2 Appalachian	*	0	23,000	23,000	23,000
07 Beaufort	*	0	20,000	20,000	20,000
09 Bladen	*	0	20,000	20,000	20,000
10 Brunswick	*	0	20,000	20,000	20,000
11 Buncombe	*	0	20,000	20,000	20,000
12 Burke	*	0	20,000	20,000	20,000
13 Cabarrus	*	0	20,000	20,000	20,000
14 Caldwell	*	0	20,000	20,000	20,000
16 Carteret	*	0	20,000	20,000	20,000
17 Caswell	*	0	20,000	20,000	20,000
18 Catawba	*	0	20,000	20,000	20,000
19 Chatham	*	0	20,000	20,000	20,000
20 Cherokee	*	0	20,000	20,000	20,000
22 Clay	*	0	20,000	20,000	20,000
23 Cleveland	*	0	20,000	20,000	20,000
24 Columbus	*	0	20,000	20,000	20,000
25 Craven	*	0	20,000	20,000	20,000
26 Cumberland	*	0	20,000	20,000	20,000
28 Dare	*	0	20,000	20,000	20,000
29 Davidson	*	0	20,000	20,000	20,000
30 Davie	*	0	20,000	20,000	20,000
31 Duplin	*	0	20,000	20,000	20,000
32 Durham	*	0	39,000	39,000	39,000
33 Edgecombe	*	0	20,000	20,000	20,000
34 Forsyth	*	0	20,000	20,000	20,000
35 Franklin	*	0	20,000	20,000	20,000
36 Gaston	*	0	20,000	20,000	20,000
38 Graham	*	0	20,000	20,000	20,000
D3 Gran-Vance	*	0	20,000	20,000	20,000
40 Greene	*	0	20,000	20,000	20,000
41 Guilford	*	0	39,000	39,000	39,000
42 Halifax	*	0	20,000	20,000	20,000
43 Harnett	*	0	20,000	20,000	20,000
44 Haywood	*	0	20,000	20,000	20,000
45 Henderson	*	0	20,000	20,000	20,000
46 Hertford	*	0	20,000	20,000	20,000
47 Hoke	*	0	20,000	20,000	20,000
48 Hyde	*	0	20,000	20,000	20,000
49 Iredell	*	0	20,000	20,000	20,000
50 Jackson	*	0	20,000	20,000	20,000
51 Johnston	*	0	20,000	20,000	20,000
52 Jones	*	0	20,000	20,000	20,000
53 Lee	*	0	20,000	20,000	20,000

54 Lenoir	*	0	20,000	20,000	20,000
55 Lincoln	*	0	20,000	20,000	20,000
56 Macon	*	0	20,000	20,000	20,000
57 Madison	*	0	20,000	20,000	20,000
D4 M-T-W	*	0	23,000	23,000	23,000
60 Mecklenburg	*	0	39,000	39,000	39,000
62 Montgomery	*	0	20,000	20,000	20,000
63 Moore	*	0	20,000	20,000	20,000
64 Nash	*	0	20,000	20,000	20,000
65 New Hanover	*	0	20,000	20,000	20,000
66 Northampton	*	0	20,000	20,000	20,000
67 Onslow	*	0	20,000	20,000	20,000
68 Orange	*	0	40,000	40,000	40,000
69 Pamlico	*	0	20,000	20,000	20,000
71 Pender	*	0	20,000	20,000	20,000
73 Person	*	0	20,000	20,000	20,000
74 Pitt	*	0	20,000	20,000	20,000
76 Randolph	*	0	20,000	20,000	20,000
77 Richmond	*	0	20,000	20,000	20,000
78 Robeson	*	0	20,000	20,000	20,000
79 Rockingham	*	0	20,000	20,000	20,000
80 Rowan	*	0	20,000	20,000	20,000
D5 R-P-M	*	0	23,000	23,000	23,000
82 Sampson	*	0	20,000	20,000	20,000
83 Scotland	*	0	20,000	20,000	20,000
84 Stanly	*	0	20,000	20,000	20,000
85 Stokes	*	0	20,000	20,000	20,000
86 Surry	*	0	20,000	20,000	20,000
87 Swain	*	0	20,000	20,000	20,000
D6 Toe Rriver	*	0	23,000	23,000	23,000
88 Transylvania	*	0	20,000	20,000	20,000
90 Union	*	0	20,000	20,000	20,000
92 Wake	*	0	39,000	39,000	39,000
93 Warren	*	0	20,000	20,000	20,000
96 Wayne	*	0	20,000	20,000	20,000
97 Wilkes	*	0	20,000	20,000	20,000
98 Wilson	*	0	20,000	20,000	20,000
99 Yadkin	*	0	20,000	20,000	20,000
Totals			1,815,000	1,815,000	1,815,000

Sign and Date - DPH Program Administrator [signature] 5/27/15	Sign and Date - DPH ~~Section Chief~~ Contracts Office [signature] 5-29-15
Sign and Date - DPH ~~Contracts Office~~ Section Chief [signature] 5/28/15	Sign and Date - DPH Budget Officer [signature] 6/2/15

MSW 6/2/15

Budget Plan for Ebola Funds = $20,000.00

Equipment:

Dell Latitude E15 5000 Laptop 15.6 HD Screen
Win 7 64-bit, 4GB RAM, modem, Bluetooth, No Optical Drive, 3 year Service & Accidental Damage
$3,200.00

3 - Dell Venue 11 Pro Tablet
Windows 8, 64-bit, 8GB RAM, 256GB SSHD
$1,474.00 x 3= $4,422.00

Apple iPad Air – Targus Carrying Case w/keyboard
$57.83 x 4= $231.32

Training & Update for Incident Management System:

Item	Description	Unit Price	Quantity	Ext. Price
192619	WASP Upgrade IC Pro To ICV7 RF Professional	$695.00	1	$695.00
008052	WASP 3-Hr. Training Services Via Web	$425.00	1	$425.00
		Subtotal:		$1120.00
		S & H		
		VAT		
		Total:		$1120.00

PPE Equipment:

N95 Masks :

3M-	1860S	(Small)	3 boxes = $75.00
INOVEL	1500	(Medium)	3 boxes = $90.00
Moldex	2201	(Small)	3boxes = $90.00

Tyvek Suits:

Model No.	Description	Size	Qty./Box	Price Per Box
S-13895	Deluxe Coverall	M	25	$175.00
S-13895	Deluxe Coverall	L	25	$175.00
S-13895	Deluxe Coverall	XL	25	$175.00
S-13895	Deluxe Coverall	2XL	25	$175.00
S-13895	Deluxe Coverall	3XL	25	$175.00

Item Description	Item #	Cost	Quantity	Total
3M Air-Mate PAPR System	Ux-40220-14	$579.00	2	$1158.00

Supplies and Materials

Miscellaneous Items:

Road Safety Kit: C. Streamlight Road Safety Kit – Includes SL-20XP LED Flashlight with AD charger (FI411: S119.00) and an orange traffic safety wand (S11.99). 2K-FI396 = $114.99 & Battery Stick 2k-FI314 – $29.99.

5 new stethoscopes- General Practice Stethoscope + 65.10 x 6 = $400.00 approximately

2NTB-E1: Spot Vital Signs with NIBP, Nellcor Pulse Oximetry and Sure Temp Thermometer on rolling stand (from Welch Allyn) - $2,500.00.

Travel: $1,000.00

Supplies: Paper, Ink cartridges, etc. = $ 2,500.00

+ Misc Program materials/supplies