

HAYWOOD COUNTY
BUDGET ORDINANCE AMENDMENT
FISCAL YEAR 2015-2016

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 line item	Account Number	Current Budget	Increase (Decrease)	Amended Budget
HHS - Health				-
Communicable Disease prevention:				-
Operating expense	115185-549500	2,229	49	2,278
				-
Maternal Health	115180-549500	1,826	15,000	16,826
				-

which will result in a net increase (decrease) of \$ 15,049 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
Intergovernmental Revenue:				-
Communicable Disease prevention grants	110050-451519	22,561	15,000	37,561
				-
Maternal Health grants	110050-451519	22,561	15,000	37,561
				-
			30,000	

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

Adopted this the _____ of _____ 2016.

Chairman
Haywood County Board of Commissioners

ATTEST:

Clerk to the Board

Explanation:
To recognize the federal funds for STD prevention for detecting, tracking, investigation, control, treatment and education, specifically to prevent the spread of HIV and STDs.
And to recognize the state grant funding received for implementation of evidence based strategies proven to lower infant mortality rates, and to improve the overall health of children.

DPH-Aid-To-Counties

For Fiscal Year:15/16

Budgetary Estimate Number : 2

Activity 610	AA	1311 462B NB	1311 462C NB	1311 981D HV	1311 981E HV	Proposed Total	New Total
Service Period		06/01-12/31	01/01-05/31	10/01-12/31	02/01-05/31		
Payment Period		07/01-01/31	02/01-06/30	11/01-01/31	03/01-06/30		
01 Alamance	* 2	0	49	0	0	49	2,510
D1 Albemarle	* 2	0	49	0	0	49	2,510
02 Alexander	* 2	0	49	0	0	49	2,510
04 Anson	* 2	0	49	0	0	49	2,510
D2 Appalachian	* 2	0	49	0	0	49	2,510
07 Beaufort	* 2	0	49	0	0	49	2,510
09 Bladen	* 2	0	49	0	0	49	2,510
10 Brunswick	* 2	0	49	0	0	49	2,510
11 Buncombe	* 2	0	49	0	0	49	2,510
12 Burke	* 2	0	49	0	0	49	2,510
13 Cabarrus	* 2	0	49	0	0	49	2,510
14 Caldwell	* 2	0	49	0	0	49	2,510
16 Carteret	* 2	0	49	0	0	49	2,510
17 Caswell	* 2	0	49	0	0	49	2,510
18 Catawba	* 2	0	49	0	0	49	2,510
19 Chatham	* 2	0	49	0	0	49	2,510
20 Cherokee	* 2	0	49	0	0	49	2,510
22 Clay	* 2	0	49	0	0	49	2,510
23 Cleveland	* 2	0	49	0	0	49	2,510
24 Columbus	* 2	0	49	0	0	49	2,510
25 Craven	* 2	0	49	0	0	49	2,510
26 Cumberland	* 2	0	49	0	0	49	2,510
28 Dare	* 2	0	49	0	0	49	2,510
29 Davidson	* 2	0	49	0	0	49	2,510
30 Davle	* 2	0	49	0	0	49	2,510
31 Duplin	* 2	0	49	0	0	49	2,510
32 Durham	* 2	0	49	0	0	49	2,510
33 Edgecombe	* 2	0	49	0	0	49	2,510
34 Forsyth	* 2	0	49	0	0	49	2,510
35 Franklin	* 2	0	49	0	0	49	2,510
36 Gaston	* 2	0	49	0	0	49	2,510
38 Graham	* 2	0	49	0	0	49	2,510
D3 Gran-Vance	* 2	0	49	0	0	49	2,510
40 Greene	* 2	0	49	0	0	49	2,510
41 Gullford	* 2	0	49	0	0	49	2,510
42 Halifax	* 2	0	49	0	0	49	2,510
43 Harnett	* 2	0	49	0	0	49	2,510
44 Haywood	* 2	0	49	0	0	49	2,510
45 Henderson	* 2	0	49	0	0	49	2,510
46 Hertford	* 2	0	49	0	0	49	2,510
47 Hoke	* 2	0	49	0	0	49	2,510
48 Hyde	* 2	0	49	0	0	49	2,510
49 Iredell	* 2	0	49	0	0	49	2,510
50 Jackson	* 2	0	49	0	0	49	2,510
51 Johnston	* 2	0	49	0	0	49	2,510
52 Jones	* 2	0	49	0	0	49	2,510

Division of Public Health

Agreement Addendum

FY 15–16

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

164 Evidence-Based Strategies for Maternal and Child Health
Activity Number and Description

04/01/2016 – 05/31/2016
Service Period

05/01/2016 – 06/30/2016
Payment Period

Women’s and Children’s Health Section / Women’s Health Branch
DPH Section/Branch Name

Leslie deRosset, 919-707-5690
 leslie.derosset@dhhs.nc.gov
DPH Program Contact
 (name, telephone number with area code, and email)

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

- Original Agreement Addendum**
 Agreement Addendum Revision # _____ (Please do not put the Budgetary Estimate revision # here.)

I. Background:

In Session Law 2015-241, the North Carolina General Assembly allocated funding to be distributed to local health departments to implement evidence-based strategies that are proven to lower infant mortality rates, improve birth outcomes, and improve the overall health status of children ages birth to five. The law requires the establishment of a competitive process to award local health departments to implement evidenced-based strategies to achieve these aims starting in FY 2016-17.

In 2014, the State’s overall infant mortality rate was 7.1 deaths per 1,000 live births. This represents a small overall increase from the 2013 rate of 7.0. The white non-Hispanic rate decreased 7.3 percent; after remaining the same for the previous three years. The Native American non-Hispanic and other non-Hispanic rates both decreased more than 14 percent. Significant racial disparities remain. The African American non-Hispanic rate was 2.5 times higher than the white non-Hispanic rate. The Hispanic rate showed the largest increase over the course of one year. The rate was six per 1,000 births in 2008. The rate declined steadily for the following five years, but rose again from 2013 to 2014 and is now 6.2 per 1,000 births.

In North Carolina, 53% of children 0 to 8 years of age live in poverty according to the 2014 Kids Count data. In 2011-12, the total percentage of children who were reported as having less than very good health was 15%. Of the African American population, 30% were reported as having less than very good health; 34% of the Hispanic population as compared to 8% of the non-Hispanic White population was reported as having less than very good health.

 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.

II. Purpose:

This Agreement Addendum enables local health departments to complete planning and capacity building activities to implement evidence-based strategies to lower infant mortality rates, improve birth outcomes, and/or improves the overall health status of children ages birth to five.

III. Scope of Work and Deliverables:

The Local Health Department shall:

1. Plan and provide capacity-building activities which will lead to improved birth outcomes, improved overall health status of children ages 0 to 5, and a lowering of the infant mortality rate;
2. Identify the Local Program Manager by April 15, 2016 and initiate planning through a leadership matrix/community action team;
3. Develop and utilize a leadership matrix team/community action team for planning, including multiple levels, i.e., management, client, and family leadership. At least 25% of the planning team should be composed of women, children, and fathers who utilize the services. Family representation cannot include one person representing more than one role on the team;
4. Support client and family leadership involvement by providing transportation and meeting attendance stipends.
5. Utilize quantitative data provided by the state and supplemented with local data (quantitative and qualitative) to perform the community analysis for planning and implementation. The qualitative data can be from focus groups, key informant interviews, town hall meetings, etc.;
6. Gather and report data and outcomes as requested; and
7. Submit two (2) reports to document the process, findings, decisions, and use of data in developing priorities and solutions. A template for this report will be furnished by the Women's and Children's Health Section, Division of Public Health (DPH).

IV. Performance Measures/Reporting Requirements:

The Local Health Department shall:

1. Notify the DPH Program Manager when the Local Program Manager is hired or identified by April 15, 2016. This shall be evidenced by the written notification.
2. Maintain leadership matrix/community action team that convenes at least monthly and more often as needed. The team should include management, client, and family leadership. Other representatives should include hospital executives, faith leaders, MCH providers, and other partners working to improve the population health of women, infants, children, and families. This shall be evidenced by the minutes and sign-in sheets.
3. Participate in program skill building meetings and conference calls as required by the DPH Program Manager. This shall be evidenced by webinar sign-in or other manner.
4. Submit interim and final reports to include process utilized, findings, decisions, and use of the data. These reports will be due by May 1, 2016 and June 30, 2016. A template will be provided by the DPH Program Manager. This shall be evidenced by copies of the biannual reports.
5. Ensure that any gift cards and travel vouchers acquired with Activity 164 Evidence-based Strategies for Maternal and Child Health program funds will be logged by serial number within 24 hours of purchase and maintained in locked storage. Each gift card and travel voucher recipient must sign and

date a log when they receive a gift card or travel voucher. This shall be evidenced by the gift card and travel voucher log sheet reviewed during every site visit.

6. Participate in all evaluation and program activities as required by the DPH Program Manager. This shall be evidenced by the roster lists maintained by the Program Manager.

V. Performance Monitoring and Quality Assurance:

1. The Branch will monitor the Local Health Department by reviewing the required reports by the DPH Program Manager to determine that program deliverables are being met. If deliverables are not being met, the DPH Program Manager will request a written response from the Local Health Department to document any barriers that are preventing deliverables from being met.
2. If the Local Health Department is deemed out of compliance, the DPH Program Manager shall provide technical assistance and funds may be withheld until the Local Health Department is back in compliance with deliverables. If technical assistance does not prove beneficial, the Agreement Addendum may then be terminated.
3. The Local Health Department shall adhere to the following service quality measures:
 - a. All services will be completed in a culturally appropriate manner.

VI. Funding Guidelines or Restrictions: (if applicable)

1. Utilize funds received solely for the purpose of planning and providing capacity-building activities in order to improve birth outcomes, improve overall health status of children ages 0–5, and lower the infant mortality rate.
2. Funds may be used to hire a local program manager to complete the required activities.
3. Funds may not be used for subcontracted activities without preapproval by the Division of Public Health.
4. Counties that intend to work together to plan may elect to designate a lead county to accept all the planning dollars. In that event, the lead county shall pay the travel and subsistence for the other county/counties' delegations to the MCH Action Institute.

Activity 164	AA	13A1 5700 00	Proposed Total	New Total
Service Period		11/01-05/31		
Payment Period		12/01-06/30		
01 Alamance		0	0	20,000
D1 Albemarle	* 1	60,000	60,000	200,000
02 Alexander		0	0	20,000
04 Anson		0	0	0
D2 Appalachian		0	0	60,000
07 Beaufort		0	0	20,000
09 Bladen		0	0	0
10 Brunswick		0	0	0
11 Buncombe		0	0	20,000
12 Burke		0	0	0
13 Cabarrus		0	0	0
14 Caldwell		0	0	20,000
16 Carteret		0	0	20,000
17 Caswell		0	0	0
18 Catawba		0	0	20,000
19 Chatham		0	0	20,000
20 Cherokee		0	0	0
22 Clay		0	0	20,000
23 Cleveland		0	0	20,000
24 Columbus		0	0	0
25 Craven		0	0	0
26 Cumberland		0	0	18,000
28 Dare		0	0	20,000
29 Davidson		0	0	0
30 Davie		0	0	0
31 Duplin		0	0	0
32 Durham	* 1	145,000	145,000	165,000
33 Edgecombe		0	0	20,000
34 Forsyth		0	0	0
35 Franklin		0	0	0
36 Gaston		0	0	20,000
38 Graham		0	0	20,000
D3 Gran-Vance		0	0	0
40 Greene		0	0	20,000
41 Guilford	* 0	130,000	130,000	130,000
42 Halifax		0	0	20,000
43 Harnett		0	0	0
44 Haywood	* 0	15,000	15,000	15,000
45 Henderson	* 0	70,000	70,000	70,000
46 Hertford		0	0	20,000
47 Hoke		0	0	18,000
48 Hyde		0	0	0
49 Iredell		0	0	20,000
50 Jackson		0	0	20,000

51 Johnston			0	0	0
52 Jones			0	0	20,000
53 Lee			0	0	0
54 Lenoir			0	0	0
55 Lincoln			0	0	0
56 Macon			0	0	20,000
57 Madison			0	0	20,000
D4 M-T-W			0	0	60,000
60 Mecklenburg	*	1	125,000	125,000	145,000
62 Montgomery			0	0	20,000
63 Moore			0	0	0
64 Nash			0	0	18,000
65 New Hanover	*	0	60,000	60,000	60,000
66 Northampton			0	0	18,000
67 Onslow			0	0	20,000
68 Orange			0	0	20,000
69 Pamlico			0	0	20,000
71 Pender			0	0	0
73 Person			0	0	0
74 Pitt	*	1	70,000	70,000	90,000
76 Randolph			0	0	0
77 Richmond			0	0	20,000
78 Robeson	*	1	40,000	40,000	60,000
79 Rockingham			0	0	20,000
80 Rowan			0	0	0
D5 R-P-M			0	0	60,000
82 Sampson			0	0	20,000
83 Scotland			0	0	20,000
84 Stanly			0	0	0
85 Stokes			0	0	0
86 Surry			0	0	0
87 Swain			0	0	0
D6 Toe Rriver			0	0	60,000
88 Transylvania	*	0	15,000	15,000	15,000
90 Union			0	0	20,000
92 Wake			0	0	20,000
93 Warren			0	0	0
96 Wayne			0	0	20,000
97 Wilkes			0	0	20,000
98 Wilson			0	0	0
99 Yadkin			0	0	0
Totals			730,000	730,000	1,942,000

Sign and Date - DPH Program Administrator <i>Kelenda Patterson</i> 3/7/16	Sign and Date - DPH Section Chief <i>John Anderson</i> 3/7/16
Sign and Date - DPH Contracts Office <i>A. Hill</i> 3-7-16	Sign and Date - DPH Budget Officer <i>D. Gray</i> 3/7/16 <i>W. S. [unclear]</i> 3/7/16

FOR 2016 11

ACCOUNTS FOR:	ORIGINAL	TRANFRS/	REVISED			AVAILABLE	PCT
11 GENERAL	APPROP	ADJSTMTS	BUDGET	YTD EXPENDED	ENCUMBRANCES	BUDGET	USED

115185 COMMUN./T-B CONTROL PROJECT							

115185 549500 OPERATING EXPENSE	2,229	0	2,229	1,985.97	242.58	.45	100.0%*
TOTAL COMMUN./T-B CONTROL PROJECT	2,229	0	2,229	1,985.97	242.58	.45	100.0%
TOTAL GENERAL	2,229	0	2,229	1,985.97	242.58	.45	100.0%
TOTAL EXPENSES	2,229	0	2,229	1,985.97	242.58	.45	

FOR 2016 11

ACCOUNTS FOR:	ORIGINAL	TRANFRS/	REVISED			AVAILABLE	PCT
11 GENERAL	APPROP	ADJSTMTS	BUDGET	YTD EXPENDED	ENCUMBRANCES	BUDGET	USED

115180 MATERNAL HEALTH							

115180 549500 OPERATING EXPENSE	1,826	0	1,826	.00	1,826.00	.00	100.0%*
TOTAL MATERNAL HEALTH	1,826	0	1,826	.00	1,826.00	.00	100.0%
TOTAL GENERAL	1,826	0	1,826	.00	1,826.00	.00	100.0%
TOTAL EXPENSES	1,826	0	1,826	.00	1,826.00	.00	

FOR 2016 11

ACCOUNTS FOR:	ORIGINAL	TRANFRS/	REVISED			AVAILABLE	PCT
11 GENERAL	APPROP	ADJSTMTS	BUDGET	YTD EXPENDED	ENCUMBRANCES	BUDGET	USED

110050 RESTRICTED INTERGOVERNMENTAL							

110050 451130 DENTAL CLINIC REVENU	-324,904	-6,584	-331,488	-149,435.17	.00	-182,052.83	45.1%*
110050 451260 57150 IMMUNIZATION AC	-13,944	-7,791	-21,735	-10,705.00	.00	-11,030.00	49.3%*
110050 451360 00003 ENVIRONMENTAL H	-4,000	0	-4,000	-2,523.00	.00	-1,477.00	63.1%*
110050 451360 03BIO INT REV-FED BIO	-33,733	0	-33,733	-32,759.16	.00	-973.84	97.1%
110050 451360 16EVD INTG REVENUE-NO	0	-20,000	-20,000	-2,699.58	.00	-17,300.42	13.5%*
110050 451360 16MCO INTG REVENUE-NO	0	-10,000	-10,000	-8,630.72	.00	-1,369.28	86.3%*
110050 451360 54520 BREAST & CERVIC	-20,655	0	-20,655	-20,485.00	.00	-170.00	99.2%
110050 451360 SNCCI INTG REV-NC COA	0	-34,950	-34,950	.00	.00	-34,950.00	.0%*
110050 451420 DEPTL SVC-THIRD PART	-500,000	0	-500,000	-114,961.12	.00	-385,038.88	23.0%*
110050 451510 STATE AID TO COUNTIE	-85,725	0	-85,725	-74,273.22	.00	-11,451.78	86.6%*
110050 451515 FAMILY PLANNING-DHS	-108,664	-8,930	-117,594	-94,272.34	.00	-23,321.66	80.2%*
110050 451519 MATERNAL HEALTH	-13,312	-9,249	-22,561	-4,679.00	.00	-17,882.00	20.7%*
110050 451520 CHILD HEALTH	-106,887	-5,018	-111,905	-52,340.57	.00	-59,564.43	46.8%*
110050 451545 WIC	-268,461	0	-268,461	-180,905.66	.00	-87,555.34	67.4%*
110050 451555 COMM DISEASE/TUBERCU	-16,757	-4,168	-20,925	-15,929.00	.00	-4,996.00	76.1%*
110050 451560 SCHOOL NURSE-2	-100,600	0	-100,600	-70,420.00	.00	-30,180.00	70.0%*
110050 451561 SCHOOL NURSE INITIAT	-100,000	0	-100,000	-92,440.40	.00	-7,559.60	92.4%
110050 451565 ADULT HEALTH SERVICE	-26,831	-9,573	-36,404	-26,645.87	.00	-9,758.13	73.2%*
110050 451874 MISC.ENVIR HEALTH-FO	0	-11,768	-11,768	.00	.00	-11,768.00	.0%*
110050 451875 16ZKA ENV HEALTH GRAN	0	-2,942	-2,942	.00	.00	-2,942.00	.0%*
TOTAL RESTRICTED INTERGOVERNMENTAL	-1,724,473	-130,973	-1,855,446	-954,104.81	.00	-901,341.19	51.4%
TOTAL GENERAL	-1,724,473	-130,973	-1,855,446	-954,104.81	.00	-901,341.19	51.4%
TOTAL REVENUES	-1,724,473	-130,973	-1,855,446	-954,104.81	.00	-901,341.19	