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, and was increased by $6.8 million during a two-year period in Fiscal Years 2008 and 2009. The allocation for Fiscal Year 2018 is slightly more than $11.4 million.

The funding provided by this Activity is to support delivery of the 10 Essential Public Health Services (http://www.cdc.gov/nphpsp/essentialservices.html), the core functions of public health, and the specific health needs or health status indicators selected by each local health department; this is consistent with how local health departments have always used this unrestricted funding.

II. **Purpose:**
This Agreement Addendum enhances the Local Health Department’s ability both to deliver the essential services which 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.

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 in place a Permanent or Interim Health Director who either meets the qualifications to serve as a county health director as required in NC GS 130A-40, or has an approved exception and has been sworn in using the Oath of Office so that he or she can fulfill the statutory functions assigned only to a local Health Director. 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, in order 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).

IV. Performance Measures/Reporting Requirements:
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.

This Activity 110 Aid-to-Counties Essential Services Report for FY18 (Attachment A) is to be submitted to the Local Technical Assistance & Training Branch (LTAT) by June 29, 2018, and is to report information for the FY18 Service Period of June 1, 2017 – May 31, 2018. Do not return Attachment A with the signed Agreement Addenda 110.

V. Performance Monitoring and Quality Assurance:
Performance will be monitored by a review of the Essential Services Report by the LTAT Branch Head. If additional information is required, a phone conference will be conducted.

VI. Funding Guidelines or Restrictions: (if applicable)
1. Requirements for pass-through entities: In compliance with 2 CFR §200.331 – Requirements for pass-through entities, the Division 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 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.
Attachment A

Activity 110 Aid-to-Counties Essential Services Report for FY18

Local Health Department: ________________________________________________________________

Attachment A is for FY18, which is for the Service Period of June 1, 2017 – May 31, 2018.

Complete this form and return it between June 1–29, 2018. For each of the 10 Essential Public Health Services, enter the funds spent for FY18 as a percentage of the total amount provided:

| % | ES1 | Monitor health status to identify community health problems. |
| % | ES2 | Diagnose and investigate health problems and health hazards in the community. |
| % | ES3 | Inform, educate and empower people about health issues. |
| % | ES4 | Mobilize community partnerships to identify and solve health problems. |
| % | ES5 | Develop policies and plans that support individual and community health efforts. |
| % | ES6 | Enforce laws and regulations that protect health and ensure safety. |
| % | ES7 | Link people to needed personal health services and secure the provision of health care when not otherwise available. |
| % | ES8 | Assure a competent public health workforce and personal health workforce. |
| % | ES9 | Evaluate effectiveness, accessibility and quality of personal and population-based health services. |
| % | ES10 | Research for new insights and innovative solution to health problems. |

100 % total

Provide at least one example from FY18 of the impact of these funds on the health of your community (such as better access to care, improved health outcomes, new service provided, new clients getting services). Include enough information to show legislators and others the importance and impact of these funds:

______________________________
Signature of Local Health Director

______________________________
Date

Return this Attachment A to Beth Murray in the LTAT Branch by June 29, 2018 by email, fax, or mail.

Email: beth.murray@dhhs.nc.gov
Fax: 919-870-4833
Mail: 1916 Mail Service Center, Raleigh, NC 27699-1916

Revised July 2014