

### **Gaston County**

Gaston County Board of Commissioners www.gastongov.com

# DHHS - Public Health Division Board Action

File #: 22-504

Commissioner Brown - DHHS (Health Division) - To Accept and Appropriate Additional State Grant Funds Received from the NC Division of Public Health for the Public Health Communicable Disease Clinic (\$1,579)

#### **STAFF CONTACT**

Cheri Singleton - Community and Support Services Nursing Administrator - DHHS (Public Health Division) - 704-853-5042

#### **BUDGET IMPACT**

Appropriate 100% State Grant Revenue.

#### **BUDGET ORDINANCE IMPACT**

Increase State Grant Revenue by \$1,579 and appropriate \$1,579 into the program project account.

#### **BACKGROUND**

The Gaston County Department of Health and Human Services - Public Health Division received additional State Grant funds from the NC Division of Public Health to enhance latent tuberculosis infection and active tuberculosis disease screening and treatment for refugees. These funds will help support increased caseload due to refugees and humanitarian parolees by expanding tuberculosis-related services. The funds will be used for program supplies for testing and treatment. These are Non-County funds.

#### POLICY IMPACT

N/A

#### **ATTACHMENTS**

**Budget Change Request (BCR)** 

#### DO NOT TYPE BELOW THIS LINE I, Donna S. Buff, Clerk to the County Commission, do hereby certify that the above is a true and corr taken by the Board of Commissioners as follows: NO. CCloninger AFraley BHovis KJohnson TReigher DATE M1 M2 **CBrown** 2022-384 Α 12/13/2022 BH KJ Α Α **DISTRIBUTION: Laserfiche Users**

## GASTON COUNTY BUDGET CHANGE REQUEST (BCR)

TO:	Dr. Kim S. Eagle					_co	COUNTY MANAGER		
FROM:	1000	1000 Health							
De	ot. Code Department Name				ne				
	<b></b>	Stephen Ea	ton		12/13/2	022			
	Department Director			Date		Э			
REQUEST TYPE:									
Line-Item Transfer Within Department & Fund Line						e-Iter	n Transfer Betwee	n Funds*	
Project Transfer Within Department & Fund  Addit						dition	al Appropriation of	Funds*	
Line-Item Transfer I	Between De	partments			* Re	quires	resolution by the Boa	rd of Commissioners	
ACCOUNT DESCRIPTION			JNT NUMBER				AMOUNT**		
As it appears in Munis	4	3 3	5		7 4	2	6 5	Whole dollars only	
Ex. Employee Training	Ex.	Dept Div		****** ***	Prog Future	Eune xx 0000	Obj Proj ******* ****** -01-520011-	Ex. \$5,000 Ex. (\$5,000)	
FedGrtRev:DHHS:TB Refugee Fndg	1000-HLT-253-00000-ComDis-0000000-0000-05-410					10000	D-G0056	(1,579)	
ProgSupp:DHHS:TB Refugee Fndg	1000-HLT-	253-00000-C	omDis-0	000000-	0000-05-5	20002	2-G0056	1,579	

#### **JUSTIFICATION FOR REQUEST:**

The Gaston County Department of Health and Human Services – Public Health Division received additional State Grant funds from the NC Division of Public Health to enhance latent tuberculosis infection and active tuberculosis disease screening and treatment for refugees. These funds will help support increased caseload due to refugees and humanitarian parolees by expanding tuberculosis-related services. The funds will be used for program supplies for testing and treatment. These are Non-County funds.

<sup>\*\*</sup> Decreases in expenditures and increases in revenue accounts require brackets. Increases in expenditures and decreases in revenue do not require brackets. Please note that transfers between funds require inter-fund transfer accounts.