

### **Gaston County**

Gaston County Board of Commissioners www.gastongov.com

# DHHS - Public Health Division Board Action

File #: 23-340

Commissioner Brown - DHHS - Health Division - To Accept and Appropriate Additional Federal Grant Funds received from Health and Human Services - Health Resources and Services Administration and Passed Through the NC Division of Public Health - Women, Infant, and Community Wellness Section (\$12,000)

#### STAFF CONTACT

Paula Black - Nursing and Clinical Services Administrator - DHHS (Public Health Division) - 704-853-5071

#### **BUDGET IMPACT**

Appropriate 100% Federal Grant Revenue.

#### **BUDGET ORDINANCE IMPACT**

Increase State Grant revenue by \$12,000 and appropriate \$12,000 into the program supplies account.

#### **BACKGROUND**

The Gaston County Department of Health and Human Services - Public Health Division received additional Federal Grant funds from Health and Human Services Health Resources and Services Administration - Maternal and Child Health Bureau passed through NC Division of Public Health - Women, Infant, and Community Wellness Section. The grant funds provide one-time funding to purchase supplies to support the management of hypertension and diabetes during pregnancy and in the postpartum period. These supplies will be distributed to pregnant and postpartum women who are enrolled in maternal health services. These are non-County funds.

#### POLICY IMPACT

N/A

#### **ATTACHMENTS**

Budget Change Request (BCR)

	. Buff, Clerk t he Board of C					reby cert	ify that the	above is a true and correct copy of action
NO.	DATE	M1	M2	CBrown	CCloninger	AFraley	BHovis	KJohnson TKeigher RWorley Vote
2023-239	07/27/2023	ВН	AF	Α	А	Α	А	A A A U
DISTRIBU								

## GASTON COUNTY BUDGET CHANGE REQUEST (BCR)

TO:	Dr.	Kim S. Eagle		COUNTY MANAGER				
FROM:	HLT	DHHS - Put	olic Health	ealth				
The state of the s	Dept. Code	Departme	nt Name					
	Bri	ittain Kenney	7-27-2	23				
	Departr	ment Director	Date	<b>)</b>				
REQUEST TYPE:								
Line-Item Transfer	•			e-Item Trans				
Project Transfer W	ithin Departmen	it & Fund	<b>√</b> Add	itional Appro	opriation of	Funds*		
Line-Item Transfer	Between Depar	tments	* Rec	quires resolutio	n by the Board	d of Commissioners		
ACCOUNT DESCRIPTION  As it appears in Munis	4 3	ACCOUN	5	AMOUNT** Whole dollars only				
Ex. Employee Training	Fund Dept		rog SubProg Future  (XXX XXXXXX XXXX  )00000-0000000-0	Fune ОБ) XX XXXXXX 0000-01-5200	Proj xxxxx )11-	Ex. \$5,000 Ex. (\$5,000)		
FedGrtRev: Mgmt of Chronic Illness	1000-HLT-253	1000-HLT-253-00000-Matern-0000000-0000-05-410000-G0076						
ProgSupp: Mgmt of Chronic Illness	1000-HLT-253		\$12,000.00					

#### JUSTIFICATION FOR REQUEST:

The Gaston County Department of Health and Human Services – Public Health Division received additional Federal Grant funds from Health and Human Services Health Resources and Services Administration – Maternal and Child Health Bureau passed through NC Division of Public Health – Women, Infant, and Community Wellness Section. The grant funds provide one-time funding to purchase supplies to support the management of hypertension and diabetes during pregnancy and in the postpartum period. These supplies will be distributed to pregnant and postpartum women who are enrolled in maternal health services and are uninsured, for their use outside their scheduled appointments.

<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.