

Board of Health Meeting August 19, 2025

The Public Health
 Authority of Cabarrus
 County Board Meeting
 Agenda

August 19, 2025
 5:30 pm

A. CALL TO ORDER	Chairperson Lara Pons, MD
B. ADOPTION OF THE AGENDA, <i>Motion</i> August 19, 2025	Chairperson Lara Pons, MD
C. APPROVAL OF THE MINUTES, <i>Motion</i> June 17, 2025	Chairperson Lara Pons, MD
D. INFORMAL PUBLIC COMMENT	
E. BOARD MEMBER INSTALLATION & OATH OF OFFICE	<p>Mariah Kendrick, Governance Program Manager</p> <p>Reappointed: Daryle Adams, Ed.S. Reappointed: Kerry Dove, DDS Reappointed: Asha Rodriguez</p>
F. REPORTS Community Health Needs Assessment Finance Committee Reports Financial Summary Report CHA Snapshot	<p>Jessica Grant, Ed.D. Healthy Cabarrus Executive Director</p> <p>Sue Yates, Chief Financial Officer</p>
G. CONSENT AGENDA, <i>Motion</i> Budget Revisions Finance Policies	<p>Chairperson Lara Pons, MD Sue Yates, Chief Financial Officer</p> <p>Sue Yates, Chief Financial Officer</p>
H. BUSINESS AGENDA Annual Legal Training Annual Review - Board of Health Governing Documents, <i>Motion</i> School Health Software – Waiver of Competition, <i>Motion</i>	<p>Chairperson Lara Pons, MD</p> <p>William Isenhour, Partner at Johnston Allison Hord</p> <p>Erin Shoe MPH, Health Director</p> <p>Sue Yates, Chief Financial Officer</p>
I. HEALTH DIRECTOR REMARKS	Erin Shoe, MPH, Health Director
J. ANNOUNCEMENTS	Chairperson Lara Pons, MD
K. CLOSED SESSION	Chairperson Lara Pons, MD
L. MOTION TO ADJOURN, <i>Motion</i>	Chairperson Lara Pons, MD



B. ADOPTION OF THE AGENDA

Chairperson Lara Pons, MD



C. APPROVAL OF THE MINUTES

Chairperson Lara Pons, MD

June 17, 2025
Meeting Minutes

[*Click here*](#)



D. INFORMAL PUBLIC COMMENTS

Chairperson Lara Pons, MD



E. BOARD MEMBER INSTALLATION AND OATH OF OFFICE

*Mariah Kendrick,
Governance Program
Manager*

Board Member Installation and Oath of Office:

- Daryle Adams, Ed.S, **Reappointed**
- Kerry Dove, DDS, **Reappointed**
- Asha Rodriguez, **Reappointed**



F. REPORTS

Reports:

Community Health Needs Assessment

Jessica Grant, Ed.D, Healthy Cabarrus Executive Director

Finance Committee Reports

- CHA Financial Summary
- CHA Snapshot

Sue Yates, Chief Financial Officer



F. REPORTS

Community Health Needs Assessment

Jessica Grant, Ed.D, Healthy Cabarrus Executive Director

CABARRUS COUNTY 2025 COMMUNITY NEEDS ASSESSMENT

Findings & Future Action

Jessica Grant, Ed.D.
Healthy Cabarrus, Executive Director



The Assessment Process



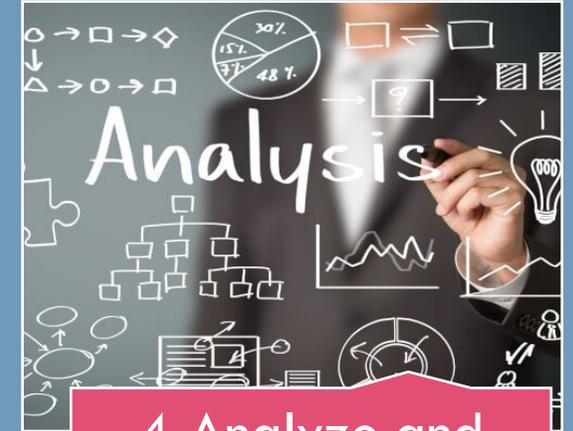
1-Establish CPC



2-Collect Primary Data



3-Collect Secondary Data



4-Analyze and Interpret Data



5-Select Priorities



6-Create Report



7-Share Results



8-Develop Action Plans

Our Journey

- Introduction, Population Demographics, and Family and Social Support

December



- Community Safety, Early Childhood and K-12 Education

January



- Employment, Sexual Health, Health and Wellness and Physical Activity
- **Launch Community Survey**

February



- Clinical Care, Oral Health and Mental Health

March



- Substance Use, Housing and Transportation
- **Launch Focus Groups**

April



- Environmental Health
- **Survey Findings and Data Review**

May



- **Complete Primary Data Review**
- Priority Voting/Selection

June



Decision Making Framework



Magnitude of the Issue



Seriousness of the Consequence



Feasibility for Impact

2025 Priority Needs



Behavioral Health



Housing



Transportation



Early Childhood Education

BEHAVIORAL HEALTH



What We Heard...

"We don't always know where to go for help. There aren't enough people we trust."
-Youth Focus Group

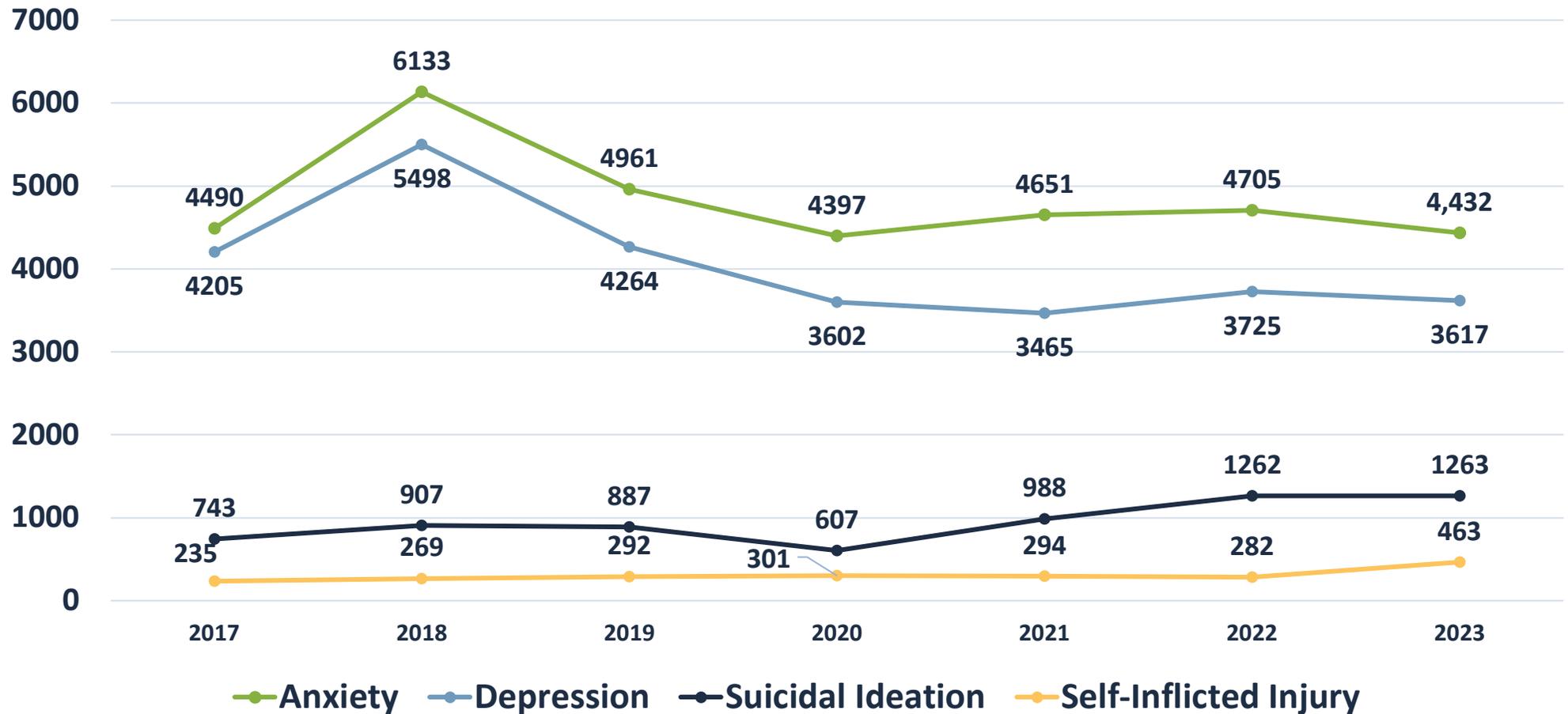
"I don't really need the snacks here, but I do need the socialization and connection to other people. I used to be really depressed."
-LunchPlus Focus Group

"Our children are suffering at school. They're being bullied by other students who tell them to 'go back' or call them 'illegals,' even when they are American citizens."
-Latino Community Focus Group

"There is domestic violence in our community, and we need programs that empower women to speak up, seek help, and know they are not alone."
-Indian Community Focus Group

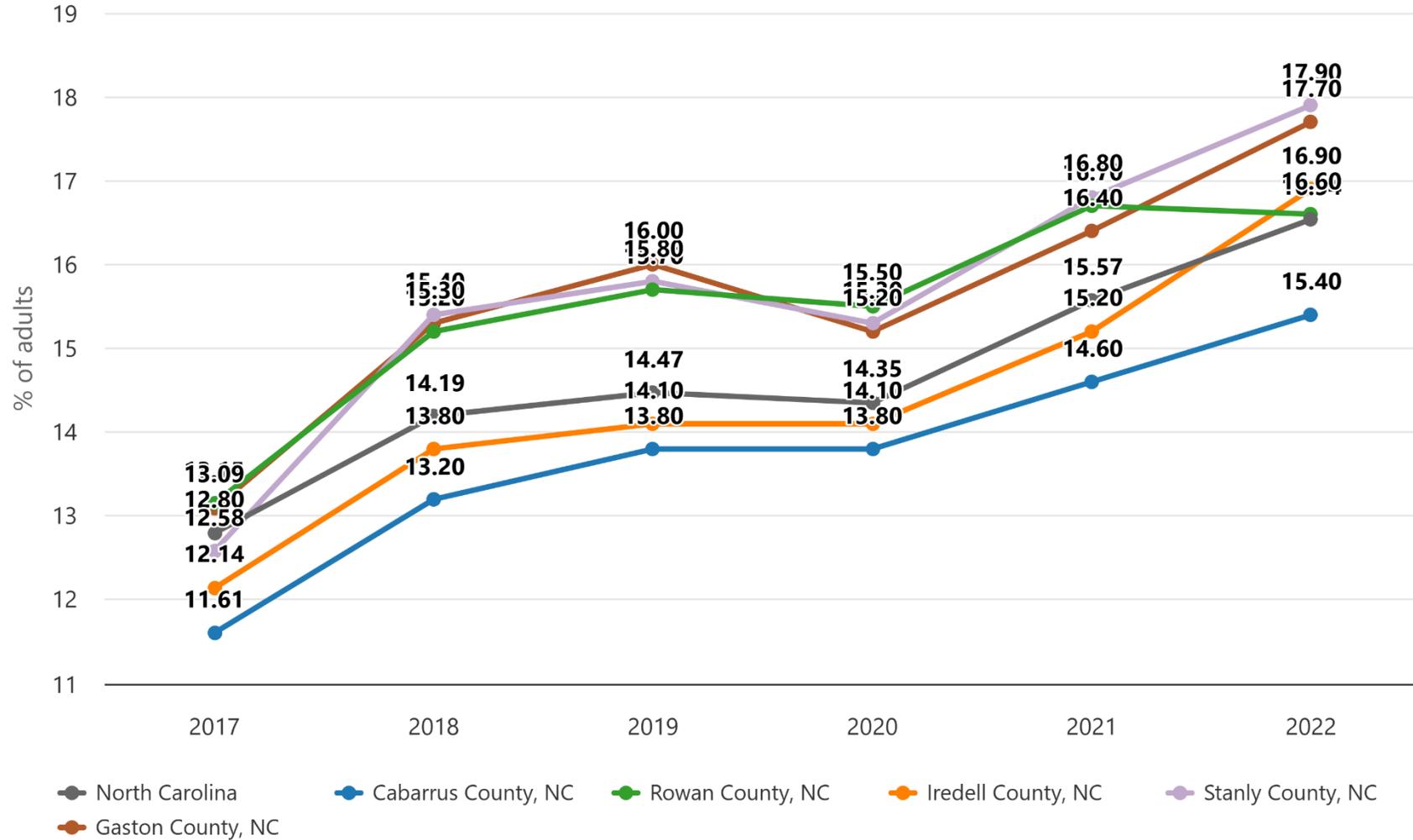
"We're seeing students who are overwhelmed — they're anxious, disengaged, and struggling to connect. Mental health needs are outpacing our capacity to support them."
-Blue Zones Schools Focus Group

Emergency Department Visits for Mental Health Conditions



Poor self-reported mental health

North Carolina and comparison



Created on Metopio | metopio.io | Data source: Centers for Disease Control and Prevention (CDC): PLACES

Poor self-reported mental health: Percent of resident adults aged 18 and older who report 14 or more days during the past 30 days during which their mental health was not good.

Behavioral Health: Additional Insights

Since 2020, there has been an 11.6% increase in the number of adults in Cabarrus County reporting 14 or more days where their mental health was not good.

64% increase in the number of individuals presenting to the emergency department for self-inflicted injuries.

In 2024, **819** Cabarrus County Residents had **6,361 service encounters** at Daymark Facility Based Crisis (FBC) locations – an average of **7.8 encounters per person**

School-based mental health services are increasing significantly. For Cabarrus County Schools, **12,304** students accessed services during the 2023–24 school year. By the end of February 2025, that number had already reached **16,532** — a **35.4% increase**.

Despite investment and focus, the number of **qualified clinicians remains insufficient** to meet the growing demand for mental health services.

The **Regional Behavioral Health Center** will address needs at the high end of the continuum. But to prevent the reoccurring cycle of crisis, appropriate modalities of treatment and innovative approaches are required.

HOUSING



What We Heard...

"I'm concerned about how younger generations, including my own children, will be able to afford housing."

-Male Focus Group

"Affordable housing is limited, especially for seniors. We need housing options that reflect our needs."

-LunchPlus Focus Group

"When we fall behind on rent, we're charged an additional \$20 per day. There's nothing in place to protect us from these fees, and it puts an even greater burden on families already struggling to keep up."

-Latino Community Focus Group

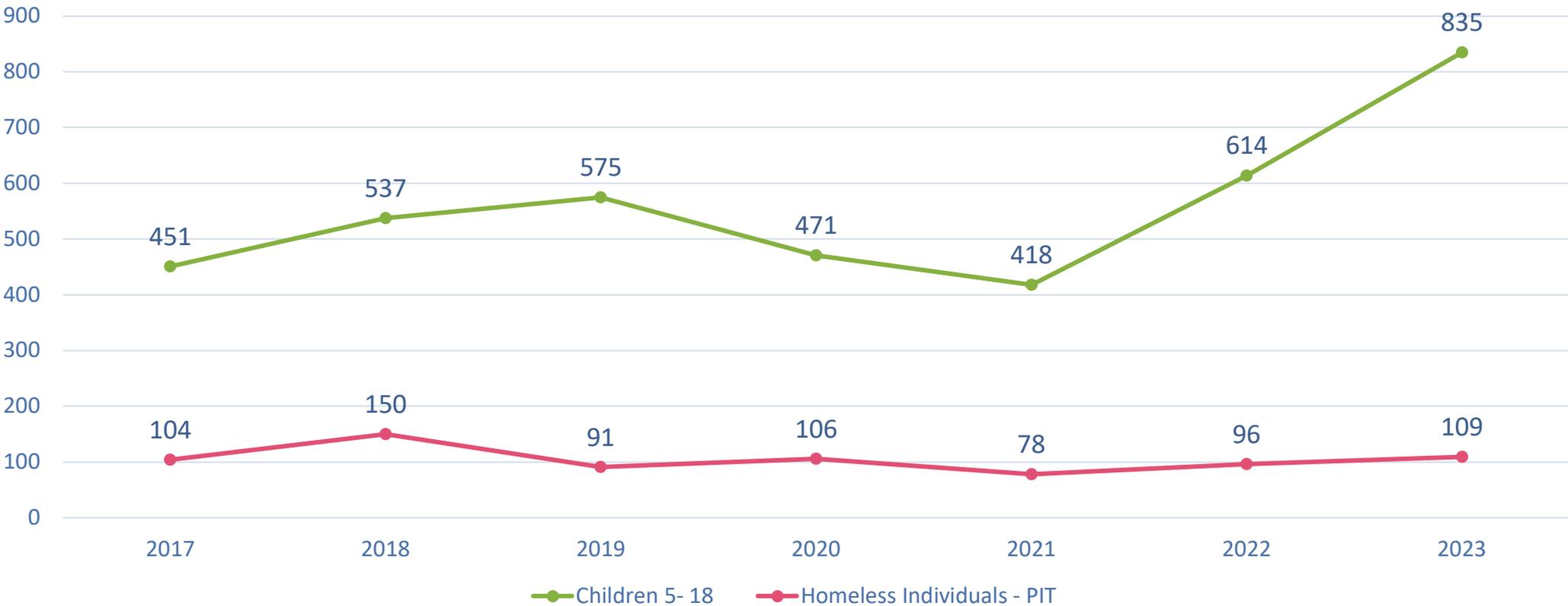
"We need more support here for housing and food – that's where all my stress comes from."

-MAC Focus Group

"Housing is getting so expensive, and now our schools are so packed."

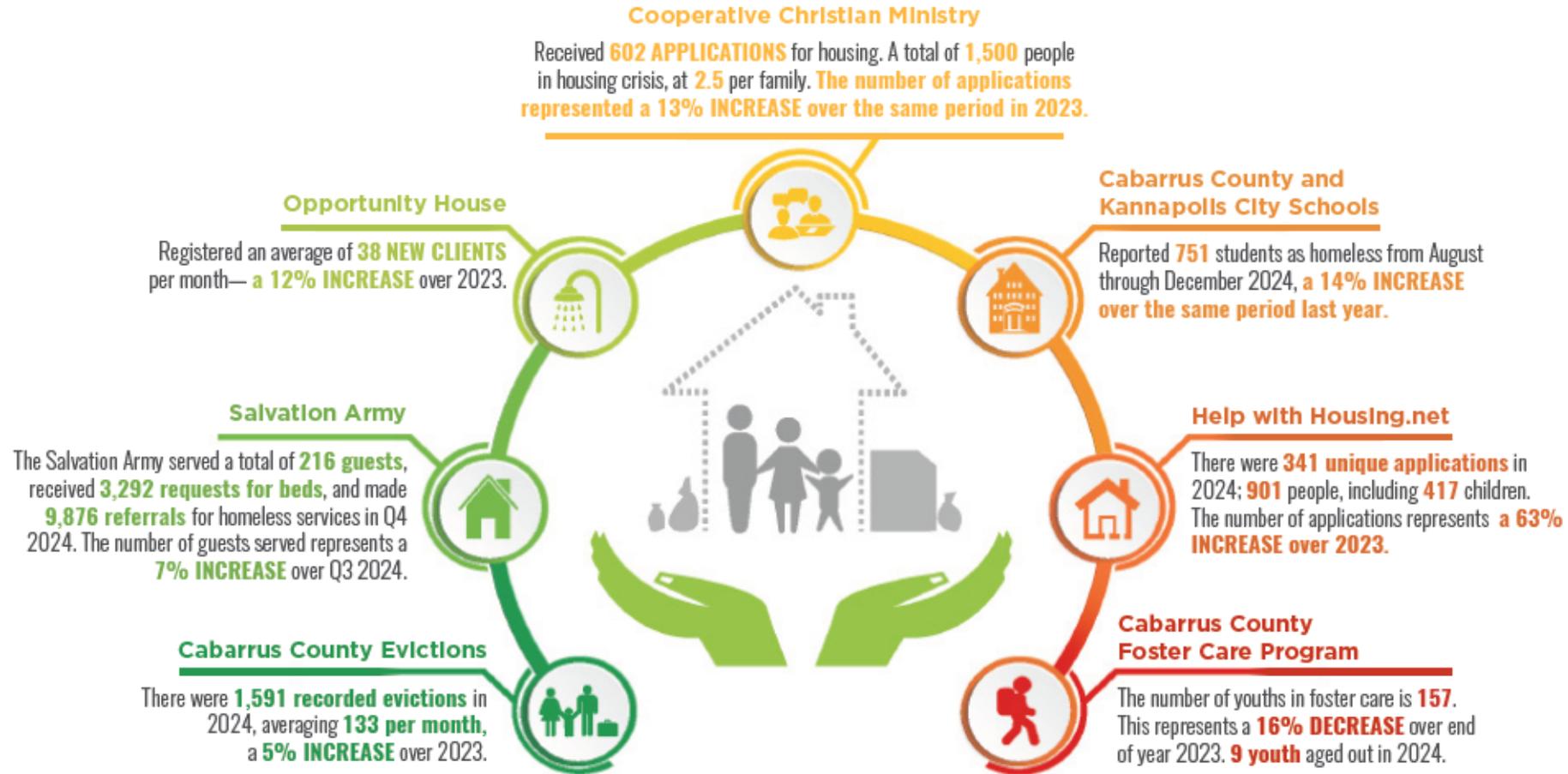
-Youth Focus Group

Number of Homeless Individuals Cabarrus



Homeless Indicators

JANUARY TO DECEMBER 2024 Created by the Cabarrus County Homelessness Task Force





28%

of Cabarrus County
are **cost-burdened**.

21,797 households

Renters
who have difficulty
affording their homes:



51%

10,655 households

Homeowners
who have difficulty
affording their homes:



19%

11,142 households

Average Annual Salaries



Teacher
\$57,930



Childcare
\$29,370



Firefighter
\$36,180

\$35.08 hour Housing Wage:

The hourly wage needed to afford a Fair Market Rent apartment.

\$1,824 monthly Fair Market Rent*:

An income of \$72,960 per year is needed to afford the Fair Market Rent.

Families that spend more than 30% are considered **cost-burdened**, more than 50%, are considered **severely cost-burdened**.

When Housing Costs Too Much

When housing costs become too much, a family can lose their home. This takes an incredible toll not only on a family, but also on the entire community.

When Housing Costs Too Much

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Ranks

#6

for evictions among
renter households.

(1 = highest and 100 = lowest)



247 families faced a foreclosure
this year...



4,467 families faced an eviction
filing this year...



TRANSPORTATION



Current Public Transit Landscape Cabarrus

Systems

- 2 Separate Services
 - Rider Transit
 - Cabarrus County Transportation (CCTS)
- 8 bus routes: 7 Local, 1 Regional
- 60-75 minute bus frequency (Rider)

Coverage

- Gaps
- Unserved or underserved areas in the county
- Limited options for cross-county travel

Capacity

- 39 Vehicles (11 buses, 28 demand response)
- 92 Employees
- 465,000 passenger trips annually
- CCTS also provides door-to-door service for eligible riders
 - Medicaid, AFS, 5310 Elderly and Handicapped, Rural General Public, Vocational Opportunities, Work First)



What We Heard...

"I have to take an Uber when I can afford it. I would have to get on a bus at 5am to get to work so there would be no one there to get my son ready for school. I don't have any other options."

-MAC Focus Group

"Traffic congestion is rapidly increasing, and without timely intervention, we will soon experience significant gridlock."

- Male Focus Group

"There are no sidewalks in our area, making it dangerous for anyone who needs to walk outside, especially children, seniors, and families without cars. It's a serious safety concern."

- Latino Focus Group

"There's not really a way to get around here if you don't drive. You just have to rely on someone else."

-Youth Focus Group

"I had to stay at an appointment all day because I had to wait on transportation to pick me up."

-LunchPlus Focus Group

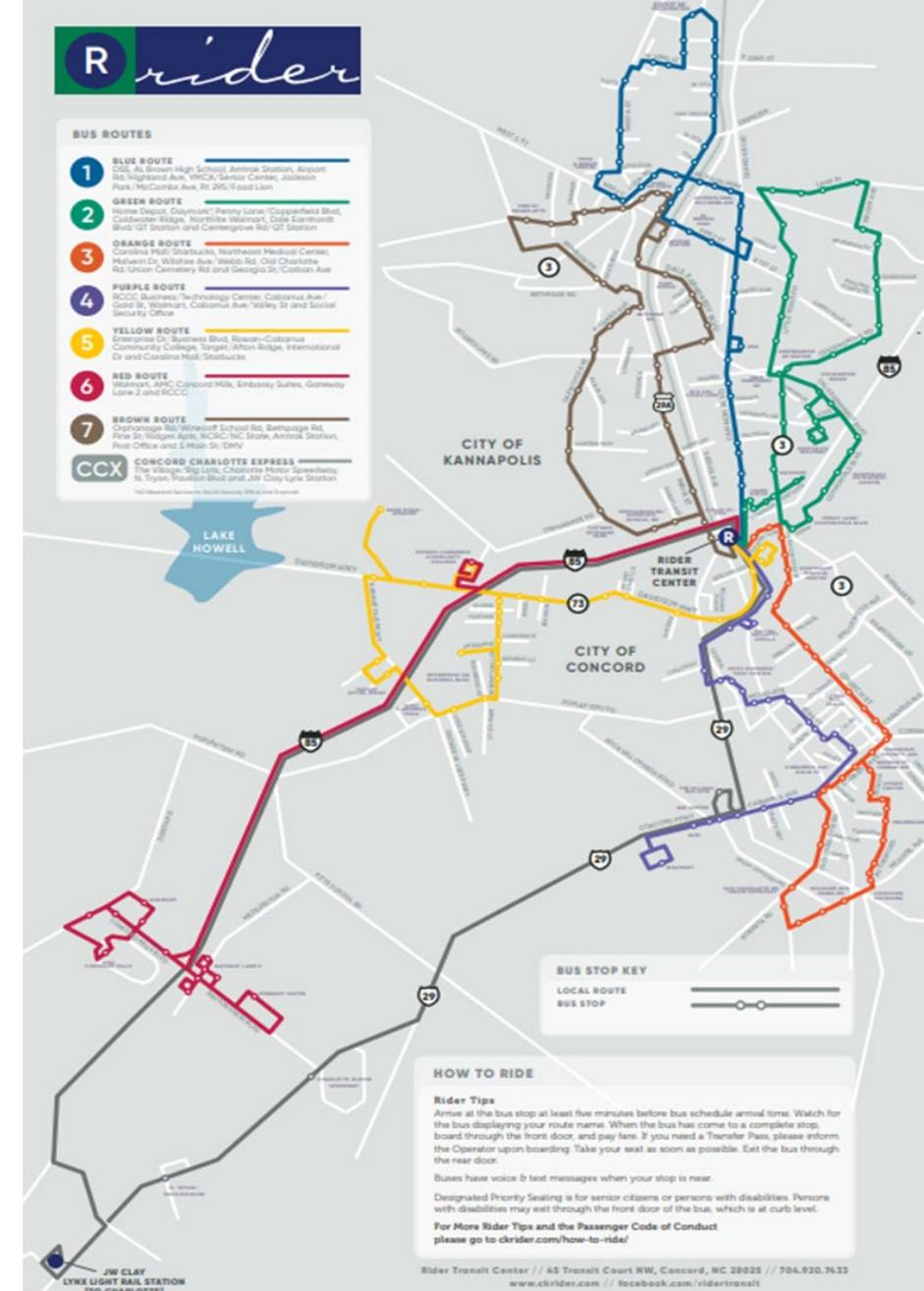
Rider Transit Services

Provides fixed route bus services on seven local fixed routes and the Concord Charlotte Express (CCX)

Hours of Operation:

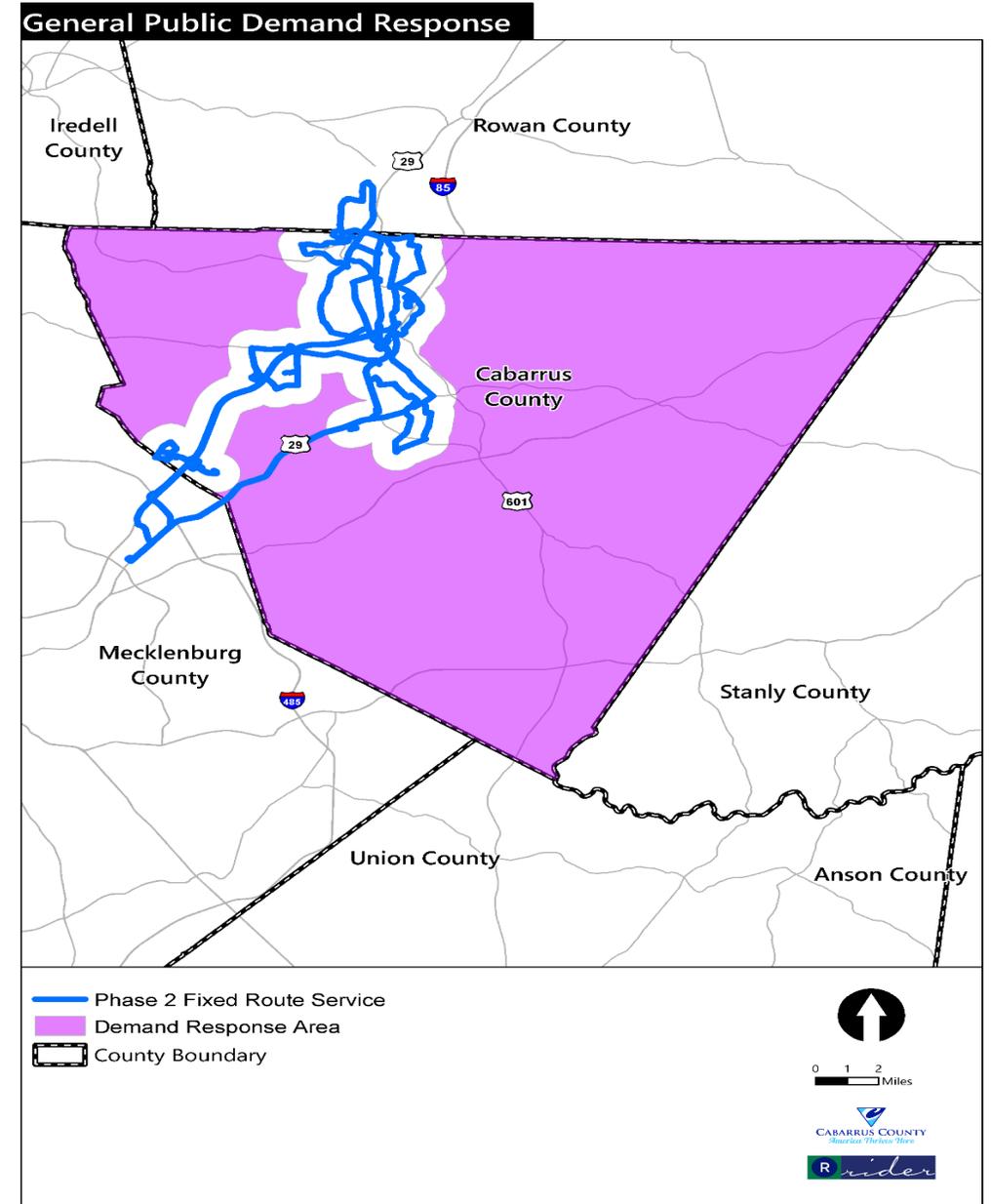
Monday – Friday:
5:30am to 8:30pm

Saturday – Sunday:
8:30am to 8:30pm



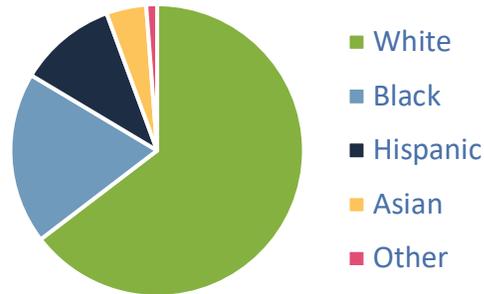
Rider Transit Services

- Americans with Disabilities Act (ADA) Complementary Paratransit service is provided within $\frac{3}{4}$ mile of the seven local fixed routes.

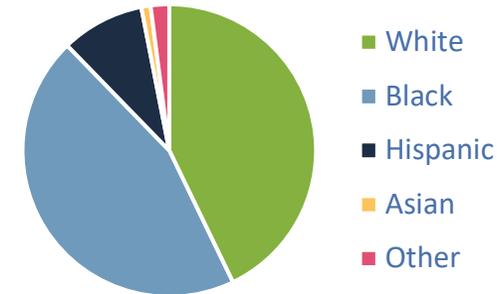


Rider Transit Users: A Demographic Snapshot of Cabarrus County

Cabarrus County Population Demographics
(2020-2023: U.S. Census, ACS, CHA)



Rider Transit 2022 Passenger Demographics
(2022 Rider Transit Title VI Plan)



- **7.5%** under age 65 identified as having a disability
- Median Household Income = \$86,084
- **9.63%** of residents live below the Federal Poverty Level
 - Individual=\$12,880; Family of 4=\$26,500
- **25.2%** of Cabarrus County residents live below 200% of the FPL
 - Individual=\$25,760; Family of 4=\$53,000

- **72%** ride daily; **88%** weekly
- **68%** - Rider is their only transportation
- **55%** - do not have a car at home
- **6%** - English is not their primary language
- **64%** reported a household income of less than **\$20,000** per year
- **93%** under **\$40,000/yr** household income

#1 reason for using transit?

EMPLOYMENT

A Cabarrus Work Trip on Rider Transit

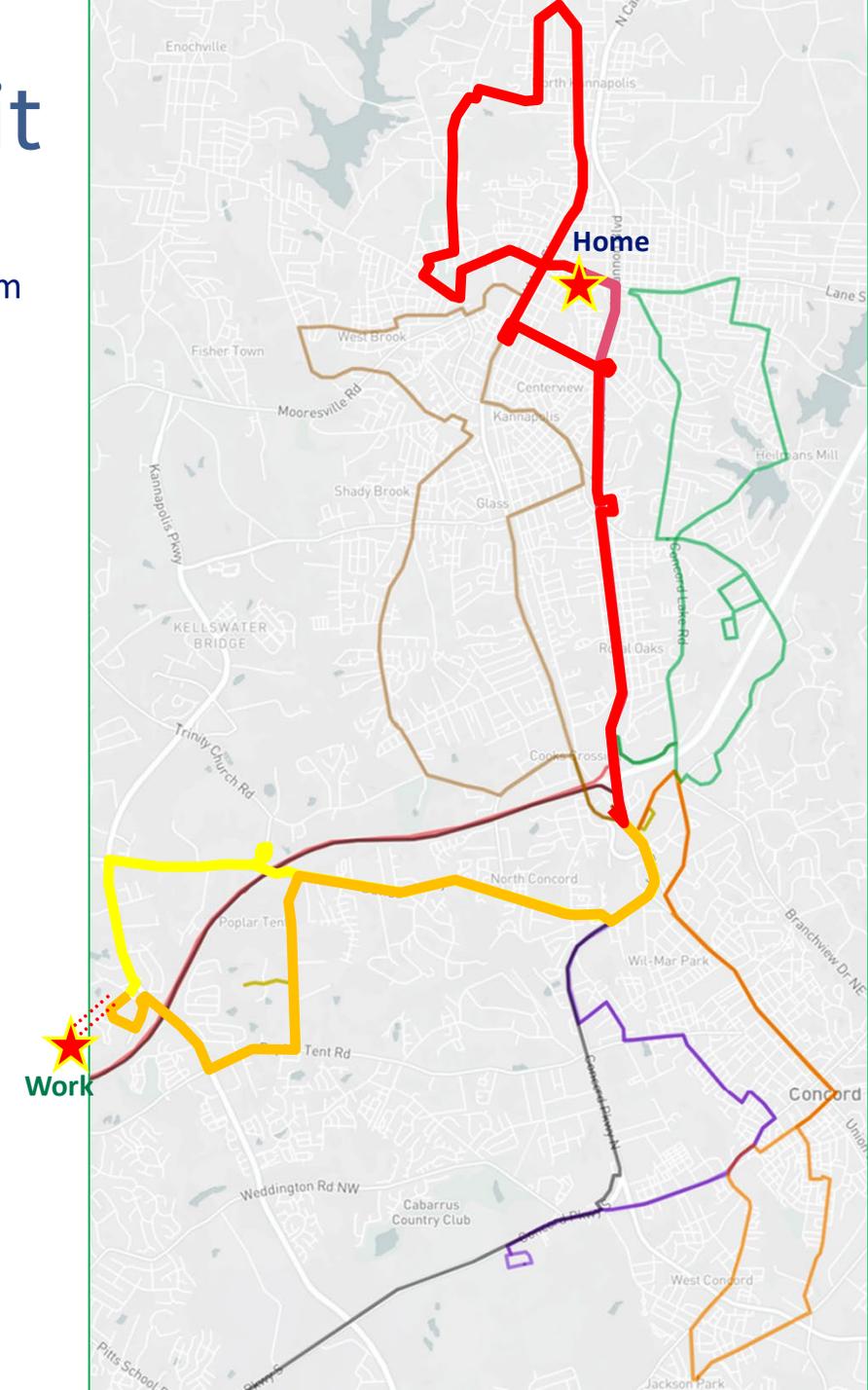
- Board Bus, Alexa Apartments, Jackson Park Road, @ 6:06am, Transfer to Yellow Route @ 6:30am
- Travel to Glen Afton Blvd; off the bus @ 6:56am for work at Amazon DLT3 Delivery Station
- Walk 1.6 miles to get to Amazon (31 minutes), arriving at 7:27am for 8am shift
- **Total Trip time to work: 1:54** (:50 bus, :31 walking, :33 minute wait for shift to begin)
- Off work at 5pm; walk 1.6 miles to get to bus stop (31 minutes), arriving at 5:31pm
- Wait 25 minutes; 5:56pm back on the Yellow Route; transfer to Blue Route @ 6:30pm
- Arrive at stop @ 7:06pm to complete trip home
- **Total Trip time to home: 2:06** (:31 walk, :25 wait, 1:10 bus to get home)

Time Spent Transit/Walking: 4:00 hours (2:00 bus, 1:02 walking, 58 minutes waiting)

Time Spent via Car: 35 minutes (curb to curb)

Time Spent via Uber: 35 minutes (curb to curb)

Average Cost/Day	Car: \$47.30	Uber: \$74.91	Transit: \$ 1.85
Average Cost/Month	Car: \$ 1,025	Uber: \$1,623	Transit: \$ 40
Average Cost/Year	Car: \$12,297	Uber: \$19,477	Transit: \$ 480
ADP Calculator Annual Take Home Salary @ \$10.80:			\$ 19,492



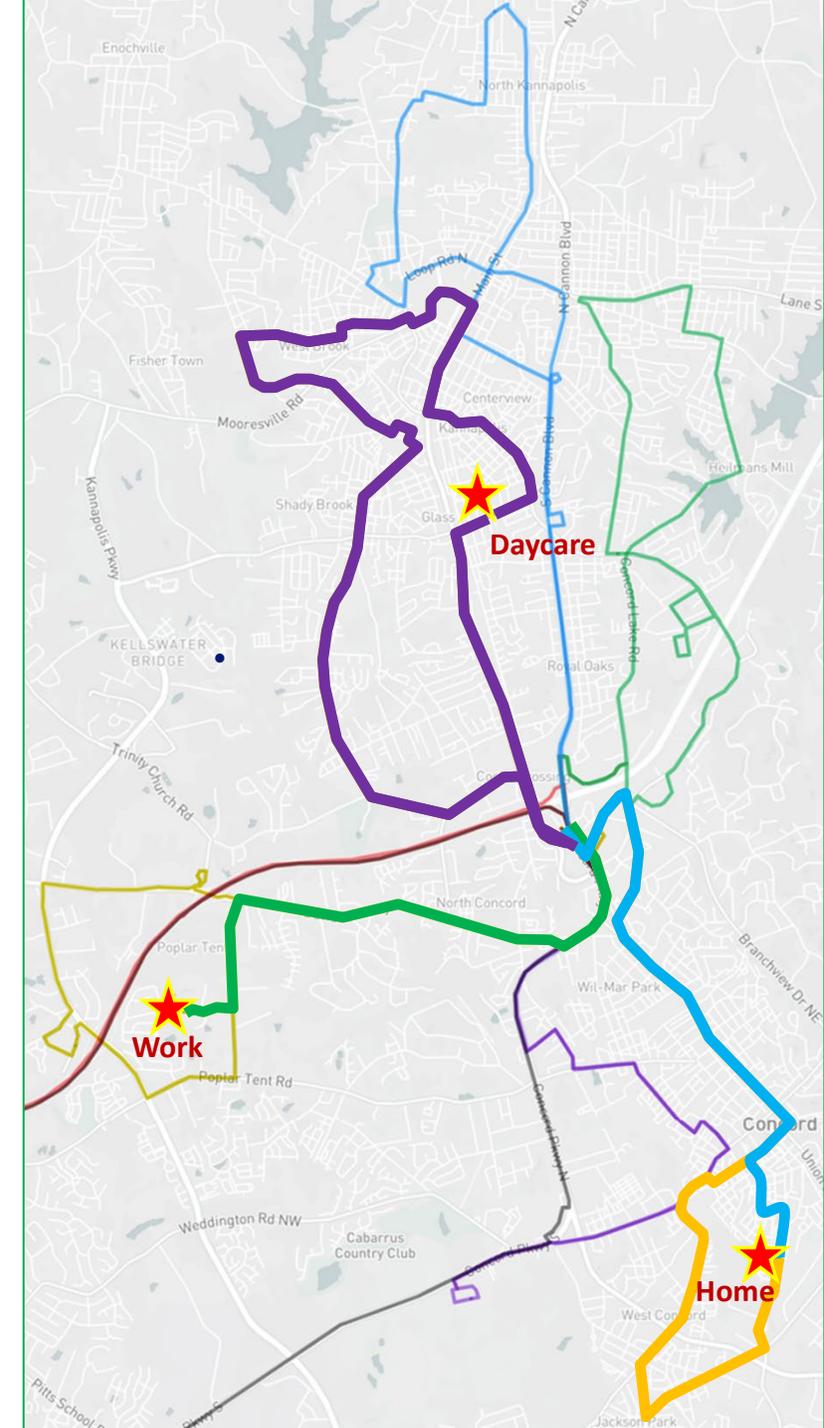
Home to Child Care to Work and Back on Public Transit ... a 13 Hour Day

Board Orange Route in Logan Community @ 6:03am

- Transfer to Brown Route @ 6:30; stop for Daycare drop-off @ 7:10am
- **Wait 60 minutes...**
- Get back on the Brown Route @ 8:10am; transfer to Yellow Route @ 8:30 to International Business Park
- Arrive at stop @ **9:05am** to complete trip to work
- **Total Trip time to work:** 3 hours and 2 minutes
- Leave work and get on Yellow Route @ **3:45pm**
- Transfer to Brown @ 4:15pm; stop for Daycare pick-up @ 5:05pm
- **Wait 62 minutes...**
- Get back on the Brown Route @ 6:07; transfer to Orange Route @ 6:30pm
- Arrive at stop @ 7:03 to complete trip home
- **Total Trip time to home:** 3 hours and 18 minutes

Time Spent Traveling to/from child care and work: 6 hours 20 minutes

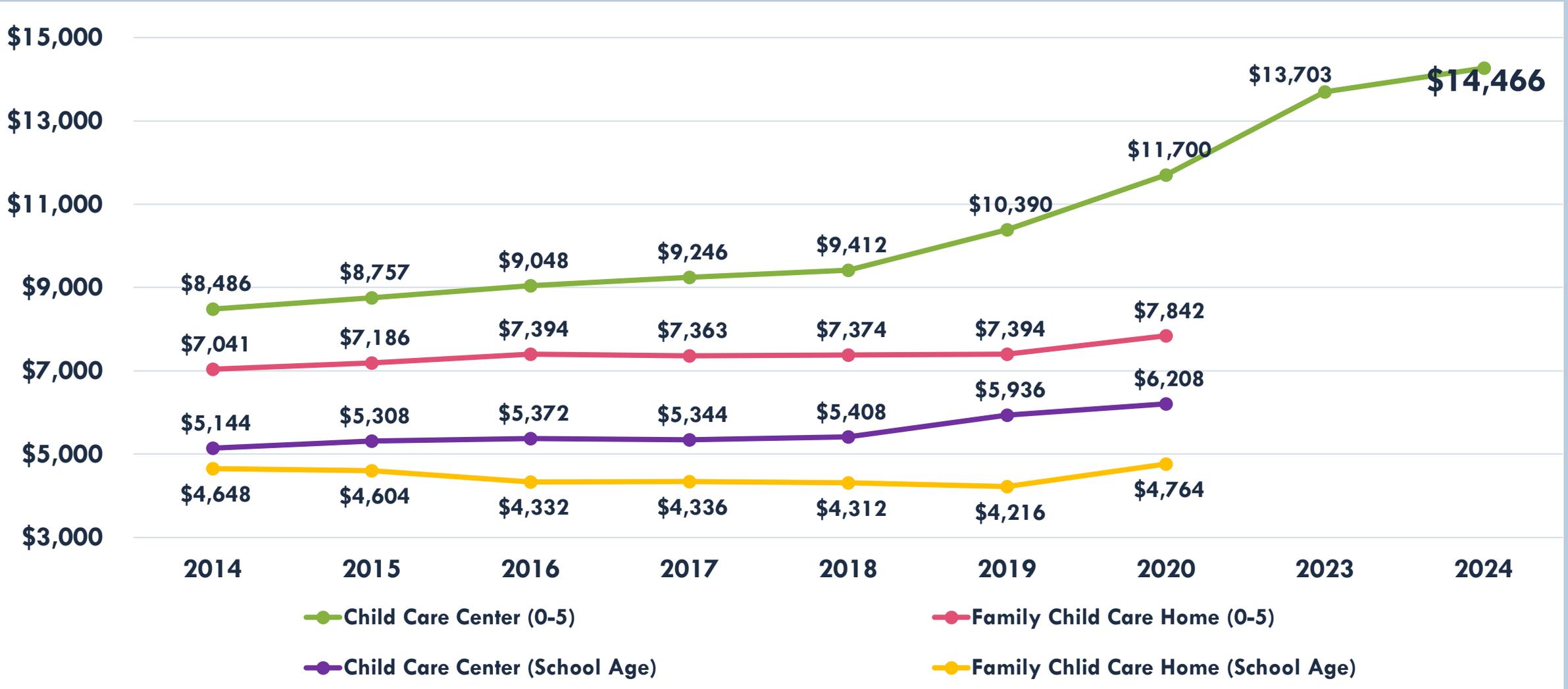
Maximum time available to work: ~ 6 hours 40 minutes



EARLY CHILDHOOD



Average Annual Fees for Child Care Cabarrus



Cost of Child Care

Cabarrus , 2024

Age	Average Cost Monthly	Average Annual Cost	Highest Monthly Cost	Highest Annual Cost	*Lowest Monthly Cost	*Lowest Annual Cost
Infants	\$1,343	\$16,116	\$1,824	\$21,888	\$760	\$9,120
Toddler	\$1,156	\$14,872	\$1,781	\$21,372	\$760	\$9,120
Two's	\$1,174	\$14,088	\$1,669	\$20,028	\$650	\$7,800
Three's	\$1,145	\$13,740	\$1,534	\$18,408	\$650	\$7,800
Four's	\$1,126	\$13,512	\$1,534	\$18,408	\$650	\$7,800

**Lowest Monthly Cost of Care is in Family Homes*

Childcare Facilities

Cabarrus

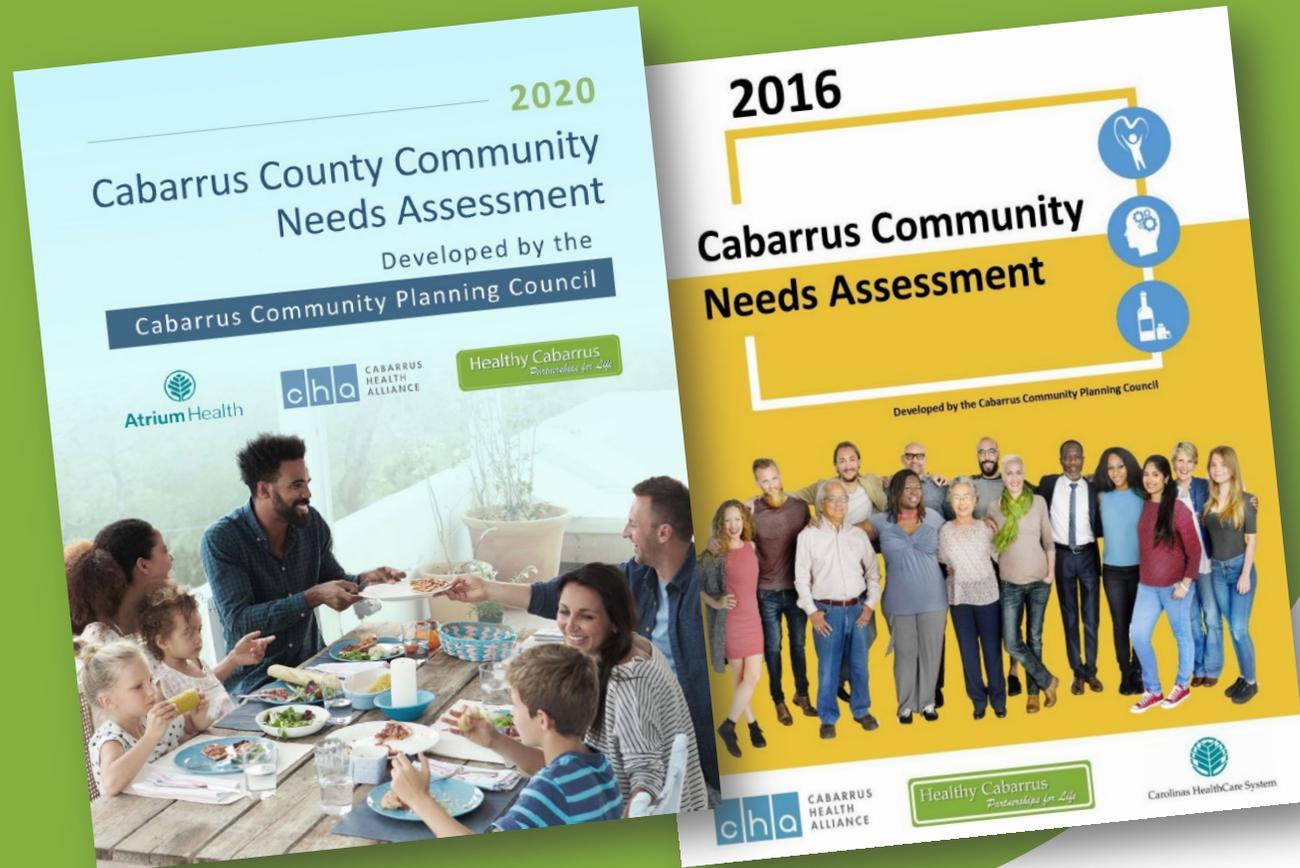
- Currently there are **58** childcare facilities in Cabarrus County. (Up from 51 in August, 2023)
- **12** are Family Homes
- **46** are Child Care Centers
- The Facilities are licensed for **9146**, but only **3823** in care April, 2024
- **5323** slots were open in April (Lack of staff, tuition too high)

Staff Wages

Cabarrus, 2024

Staff Position	Average Pay	Highest Paid	Lowest Paid
Lead Teacher	\$15.75	\$20.00	\$10.00
Asst. Teacher	\$13.90	\$16.50	\$9.50
Support Staff	\$14.00	\$18.00	\$10.50
Admin./ Asst. Admin.	\$21.00	\$25.00	\$10.00

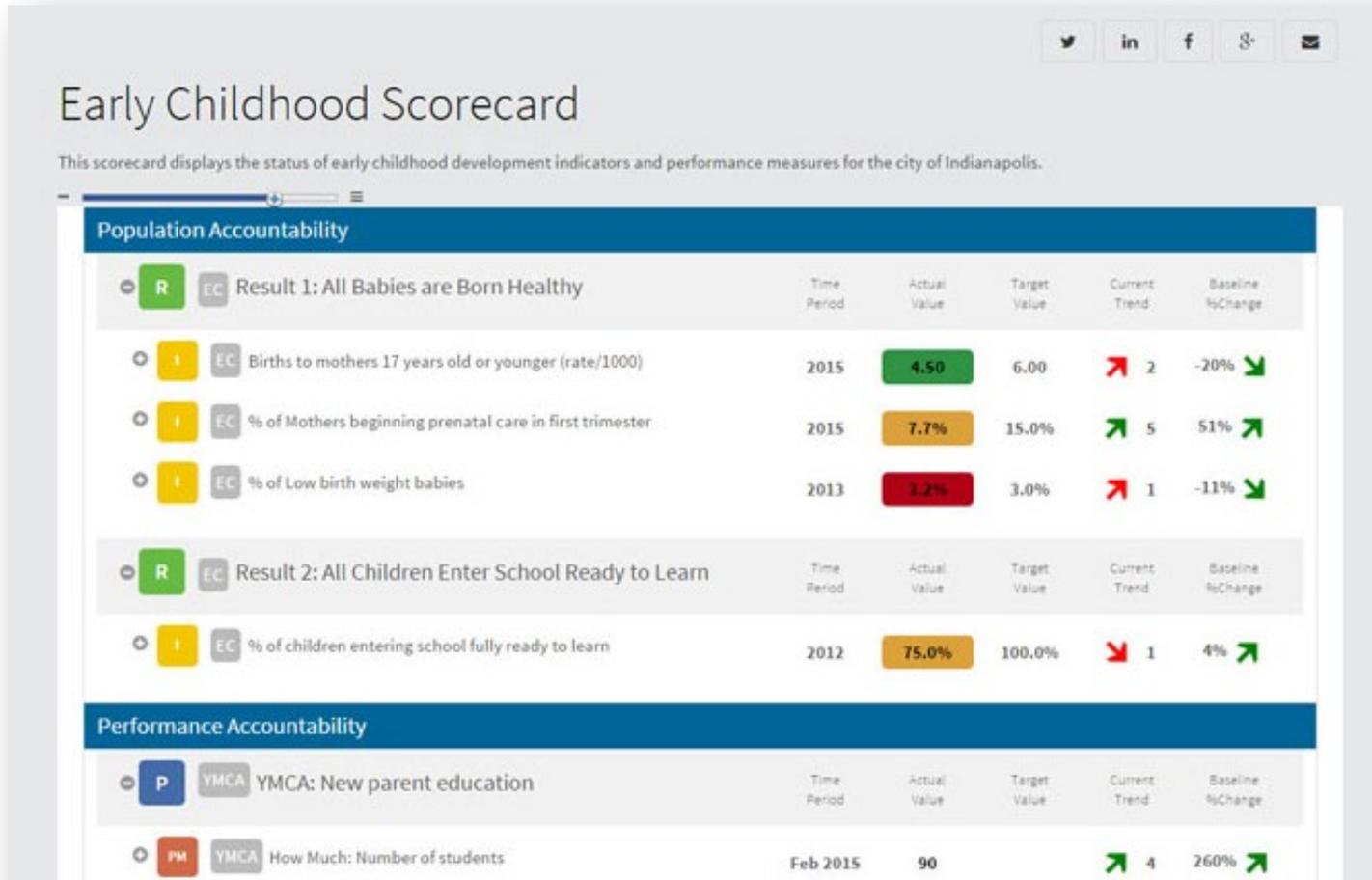
Phase 6: Create a Report



Phase 7: Share Results with the Community



Phase 8: Develop Action Plans





“The best way to predict the future is to create it together.”

-Peter Drucker

Healthy Cabarrus

**THANK
YOU!**

Jessica Grant

Healthy Cabarrus Executive Director
Cabarrus Health Alliance

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Sandra Torres

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Cabarrus Health Alliance

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F. REPORTS

Finance Committee Reports

- CHA Financial Summary
- CHA Snapshot

Sue Yates, Chief Financial Officer



Financial Summary Report

Reviewed and recommended for approval by Finance Committee: 8/12/2025

PUBLIC HEALTH AUTHORITY OF CABARRUS COUNTY FINANCIAL SUMMARY REPORT					FY25 12 Months ending June 30, 2025 Target Percentage 100% Modified Accrual			
	ACTUAL FY 2021	ACTUAL FY 2022	ACTUAL FY 2023	ACTUAL FY 2024	FY 2025 ORIGINAL BUDGET	FY 2025 BUDGET	ACTUAL 06/30/25	Y-T-D % COLLECTED
REVENUES								
INTERGOVERNMENTAL REVENUES	\$ 19,463,540	\$ 24,443,947	\$ 28,216,196	\$ 24,550,592	\$ 25,299,584	\$ 26,170,923	\$ 25,599,140	97.82%
MEDICAID COST SETTLEMENT	\$ 2,893,197	\$ 3,098,145	\$ 2,118,045	\$ 3,740,447	\$ 3,518,447	\$ 4,538,412	\$ 4,577,929	100.87%
MANAGED CARE QUARTERLY PAYMENT	\$ -	\$ -	\$ 529,831	\$ 450,509	\$ 458,174	\$ 397,736	\$ 432,498	108.74%
PERMITS & FEES	\$ 285,057	\$ 340,160	\$ 363,658	\$ 298,053	374,933	369,043	\$ 326,185	88.39%
SALES & SERVICES	\$ 1,716,097	\$ 1,541,742	\$ 1,243,433	\$ 1,177,936	1,285,285	1,163,108	\$ 1,201,564	103.31%
INVESTMENT EARNINGS	\$ 4,223	\$ 15,223	\$ 298,825	\$ 362,632	259,545	339,260	\$ 359,956	106.10%
MISCELLANEOUS	\$ 73,147	\$ 67,453	\$ 76,531	\$ 53,715	45,860	47,216	\$ 70,119	148.51%
CONTRIBUTIONS & PRIVATE GRANTS	\$ 1,002,571	\$ 579,848	\$ 1,476,544	\$ 1,595,583	3,329,705	4,244,056	\$ 3,958,869	93.28%
FUND BALANCE APPROPRIATED	\$ -	\$ -	\$ -	\$ -	902,169	4,288,467	\$ -	0.00%
TOTAL	\$ 25,237,834	\$ 30,086,519	\$ 34,323,063	\$ 32,229,467	\$ 35,473,702	\$ 41,558,221	\$ 36,526,260	87.89%
EXPENDITURES								
ENVIRONMENTAL HEALTH	\$ 1,124,681	\$ 1,429,941	\$ 1,735,411	\$ 1,712,590	1,996,588	1,996,588	1,905,268.31	95.43%
INFORMATION TECHNOLOGY SYSTEMS	\$ 951,084	\$ 1,158,973	\$ 1,092,401	\$ 1,054,304	1,207,803	1,025,635	940,765.39	91.73%
GENERAL ADMINISTRATION	\$ 2,779,340	\$ 3,235,818	\$ 4,665,661	\$ 4,307,096	7,343,403	11,420,937	7,765,537.74	87.99%
FAMILY CARE COORDINATION	\$ 1,109,438	\$ 1,251,848	\$ 1,582,220	\$ 1,341,827	1,492,364	1,644,569	1,519,928.72	92.42%
SCHOOL HEALTH	\$ 3,985,717	\$ 6,979,729	\$ 7,392,127	\$ 4,838,775	5,346,757	5,346,757	5,335,494.17	99.79%
COMMUNITY IMPACT	\$ 1,280,913	\$ 2,502,914	\$ 3,199,702	\$ 3,474,876	3,712,897	4,750,627	4,556,844.60	95.02%
DENTAL HEALTH	\$ 2,939,844	\$ 3,708,063	\$ 4,015,567	\$ 5,180,045	5,419,750	6,373,219	5,859,187.41	91.93%
VITAL RECORDS	\$ 57,832	\$ 70,154	\$ 72,346	\$ 78,036	80,188	80,188	79,244.82	98.82%
COMMUNICABLE DISEASE	\$ 4,657,174	\$ 4,145,338	\$ 5,158,646	\$ 4,228,051	2,595,496	2,585,185	2,057,474.65	79.59%
CLINICAL SERVICES	\$ 3,220,341	\$ 3,816,726	\$ 3,594,777	\$ 2,924,908	3,246,360	3,396,017	2,915,664.42	85.86%
BEHAVIORAL HEALTH	\$ -	\$ 147,966	\$ 807,960	\$ 1,636,290	2,129,454	2,011,567	1,767,898.26	87.89%
WIC	832,770	811,156	880,309	928,672	902,642	926,932	900,682.53	97.17%
TOTAL	\$ 22,898,733	\$ 29,258,426	\$ 34,197,127	\$ 31,705,471	\$ 35,473,702	\$ 41,558,221	\$ 35,603,991	85.67%
Y-T-D FUND BALANCE INCREASE (DECREASE)	\$ 2,339,100	\$ 828,093	\$ 125,936	\$ 523,996	\$ -	\$ -	\$ 922,269	

Snapshot

Reviewed and
recommended for
approval by Finance
Committee: 8/12/2025

Cabarrus Health Alliance Snapshot				
June 30, 2025				
Target Percentage 100%				
Modified Accrual				
	Budget	Actual	YTD Percentage	Comments
Environmental Health				
Revenue	1,996,588	1,944,363	97.38%	
Expense	1,996,588	1,905,268	95.43%	
Information Technology				
Revenue	813,585	813,585	100.00%	
Expense	1,025,635	940,765	91.73%	
General Administration				
Revenue	10,198,046	5,938,534	58.23%	
Expense	11,420,937	7,765,538	67.99%	Brown Mill Fund balance appropriation included in budget.
Family Care Coordination				
Revenue	1,709,669	1,729,166	101.14%	
Expense	1,644,569	1,519,929	92.42%	
School Health				
Revenue	5,346,757	5,340,576	99.88%	
Expense	5,346,757	5,335,494	99.79%	
Community Impact				
Revenue	4,730,627	4,563,782	96.47%	
Expense	4,750,627	4,556,845	95.92%	
Dental Health				
Revenue	7,763,060	7,763,118	100.00%	
Expense	6,373,219	5,859,187	91.93%	
Vital Records				
Revenue	80,188	80,188	100.00%	
Expense	80,188	79,245	98.82%	
Communicable Disease				
Revenue	2,585,185	2,477,380	95.83%	
Expense	2,585,185	2,057,475	79.59%	
Clinical Services				
Revenue	3,396,017	3,164,446	93.18%	
Expense	3,396,017	2,915,664	85.86%	
Behavioral Health				
Revenue	2,011,567	1,900,293	94.47%	
Expense	2,011,567	1,767,898	87.89%	
WIC				
Revenue	926,932	810,830	87.47%	
Expense	926,932	900,683	97.17%	No interruption to WIC services due to agency funding
Green - Revenues are greater than expenses or percentage is within 5% points				
Yellow - Revenues are less than expenses when not anticipated and percentage variance is between 6% and 15%				
Red - Revenues are less than expenses when not anticipated and percentage variance is greater than 16%				



G. CONSENT AGENDA

Chairperson Lara Pons, MD

- **Budget Revisions**
- **Finance Policies**

Sue Yates, Chief Financial Officer



G. CONSENT AGENDA

Budget Revisions

Sue Yates, Chief Financial Officer

[Click here for full documents](#)

Budget Revisions



Summary	Amount Increase or (Decrease)
<p>Brown Mill: Office Equipment & Furniture</p> <ul style="list-style-type: none"> To budget for the Cannon Grant received for Brown Mill Upfit 	\$600,000
<p>Finance:</p> <ul style="list-style-type: none"> To budget for the Hayes Charitable Trust funds received for contract with Capital Development (CapDev) 	\$33,000
<p>Clinical: Child Fatality Case Reporting</p> <ul style="list-style-type: none"> To budget for the Child Fatality Case Reporting Agreement Addendum 	\$2,743
<p>Environmental Health: ARP</p> <ul style="list-style-type: none"> To budget for the ARP Lead Agreement Addendum 	\$11,155
<p>Clinical: SmartStart for Ultrasounds</p> <ul style="list-style-type: none"> To budget for the grant received from SmartStart for Ultrasounds 	\$15,000
<p>Dental: Bilingual Dental Navigator</p> <ul style="list-style-type: none"> To adjust budget based on actuals for a two year grant for Bilingual Dental Navigator 	\$(1,330)



G. CONSENT AGENDA

Finance Policies

Sue Yates, Chief Financial Officer

[Click here for full documents](#)



Finance Policies

Summary

<p>Finance: Program Income Policy</p>	<p>No changes. Program income is the gross income earned by CHA that is directly generated by supported activity or earned as a result of the ARP/CSLFRF Award during the period performance, which closes December 31, 2026.</p>
<p>Finance: Program Management Policy</p>	<p>No changes. Details post award requirements related to property management of property acquired or updated, in whole or in part, with Funds.</p>
<p>Finance: Capital Assets Policy</p>	<p>No changes. To define the criteria for determining capital assets for CHA</p>
<p>Finance: CHA Financial Procedures Policy</p>	<p>New to CHA Board. Provides general information and guidelines to CHA staff on the financial principles of CHA.</p>
<p>Information Technology (IT): Mobile Phone Stipend Policy</p>	<p>Corrected spelling. Updated Standard CHA owned phone Bullet points for clarification. The purpose of this policy is to establish guidance for determining eligibility and a process for receiving a mobile phone stipend for employees conducting CHA business on a personal device.</p>



Annual Legal Training

William Isenhour, Partner, Johnston Allison Hord

Annual Review - Board of Health Governing Documents, *Motion*

Erin Shoe, MPH, Health Director

School Health Software – Waiver of Competition, *Motion*

Sue Yates, Chief Financial Officer

H. BUSINESS AGENDA

Chairperson Lara Pons, MD



H. BUSINESS AGENDA

Annual Legal Training

William Isenhour, Partner, Johnston Allison Hord

Cabarrus Health Alliance

August 19, 2025 Board of Commissioners Meeting
Board Action and Governance Presentation

Topic Agenda

I. Board Meetings

- ▶ Board Meetings Generally
- ▶ Virtual vs In-Person Attendance
- ▶ Agenda Items For Board Meetings
- ▶ Order of Meetings
- ▶ Closed Session

II. Duties and Obligations of Board Members

- ▶ Fiduciary Duties of Board Members
- ▶ Board Member Duty of Confidentiality
- ▶ Legal Obligation of the Board to hire/fire/manage CHA Health Director
- ▶ Conflicts of Interest

III. CHA Governance Documents

- ▶ Governance Documents
- ▶ Governance Documents Order of Priority

IV. Board Committees

Board Meetings Generally

- ▶ Board Meetings are held on the third Tuesday of the month (with some exceptions) per the Meeting Schedule published by CHA.
- ▶ Board meetings are held at 5:30 p.m. at CHA's offices.
- ▶ Board members are expected to attend all Board meetings and actively participate pursuant to the prepared meeting agenda.

Virtual vs In-Person Attendance

- ▶ Currently the CHA Bylaws require that meetings be held in person.
- ▶ During the NC State of Emergency, the NC statutes did allow for certain hybrid and virtual-friendly provisions for public bodies to meet in person and virtually. That State of Emergency was lifted on August 15, 2022.
- ▶ Per the NC School of Government guidance, following the lift of the State of Emergency, public bodies are to meet in person going forward without a hybrid virtual and in-person meeting structure.
 - ▶ The NC School of Government is in the process of issuing a 3-part series in analyzing the legalities surrounding virtual vs. in-person meetings and what, if any, rules and approaches should be taken if a public body chooses to adopt a new hybrid approach to allow for virtual meetings now that the State of Emergency has been lifted.
- ▶ Our general recommendation is that Board members who must attend a meeting virtually may participate in discussions, but they cannot be counted for purposes of a quorum or for voting and taking action.

Agenda Items For Board Meetings

- ▶ While NC law does not require public bodies to have an agenda for meetings, if a public body chooses to prepare agendas, there are two requirements for such agendas:
 - ▶ (1) that the agenda include a public comment period; and
 - ▶ (2) that the agenda for any special meetings state the purposes of that special meeting and limit all agenda items to those particular purposes.
- ▶ **Consent Agendas** - consent agenda items are items used for Board approval of matters that do not require individual consideration for discussion. These matters are listed on the agenda and voted on collectively as a group and the single vote approves all matters (for example, approval of prior Board meeting minutes). The consent agenda should only be used for those items that are not up for discussion or require a vote for a single item.
- ▶ **Business Agenda** - the business agenda will contain all specific items of business for the Board to consider, discuss and vote for each particular item. Any item of business not collectively voted on the consent agenda should be listed on the business agenda.

Order of Meetings

- ▶ Quorum Required for Meetings
 - ▶ Pursuant to CHA Bylaws, a quorum requires a majority of the Board members to be in attendance.
- ▶ Meetings are Open to the Public (unless in Closed Session)
- ▶ Meetings Require Proper Voting
 - ▶ All Board members present must vote unless such member has been recused due to a conflict of interest.

Closed Session

- ▶ Generally, all Board meetings must be conducted in open session and open to the public pursuant to the laws and rules of open meetings set forth in the NC General Statutes.
- ▶ If a topic of discussion falls into an exception to open meetings for the discussion to be in closed session, the Board can discuss in closed session. Common closed session permitted purposes include:
 - ▶ To prevent disclosure of confidential or privileged under law
 - ▶ To consult with CHA's attorney to preserve attorney-client privilege
 - ▶ To discuss personnel and other employment matters
- ▶ Closed Sessions must be properly called by a duly made and adopted motion during the open meeting session.
- ▶ Closed Session discussions must be kept in separate minutes to be held and sealed until such time when the permitted purpose has expired or is no longer needed to remain confidential.

Fiduciary Duties of Board Members

As a board member, you have certain duties to CHA, including fiduciary duties. Such duties include:

▶ The Duty of Care

- ▶ *Board members must discharge their duties with the care an ordinary prudent person in a like position would exercise under similar circumstances.*

▶ The Duty of Loyalty

- ▶ *Board members must act in the best interest of the mission - not for a board member's own advantage.*

▶ The Duty of Obedience

- ▶ *Board members must be true to CHA's purpose, powers and goals as stated in the Certificate of Incorporation and Bylaws of CHA.*

Board Member Duty of Confidentiality

- ▶ Board members, by the nature of their positions, are exposed to confidential information that should not be repeated or discussed except with those recognized by law as having a right to the information.
- ▶ Generally Board members must respect all confidentiality of information that is privileged under applicable law and refrain from disclosure of matters discussed in closed session unless otherwise authorized by the Board.
- ▶ Board Members have an absolute duty to maintain the confidentiality of records as required by law, including any and all personnel records that a Board member may review or come into contact.
- ▶ Additionally, any Board member who obtains access to any personal health information in his or her role as a Board member shall follow all CHA policies regarding such PHI fully in accordance with the Health Insurance Portability and Accountability Act (“HIPAA”).

Legal Obligation of the Board to hire/fire/manage CHA Health Director

- ▶ Per Article V of the CHA Bylaws, the Board shall employ a CEO to serve as the Public Health Director.
- ▶ It is the responsibility of the Board to supervise the Health Director to ensure that the Health Director is performing her functions and responsibilities as required under NCGS Chapter 130A , as set forth in the CHA Bylaws, and as otherwise defined by the Board.
- ▶ Should the Health Director not complete the functions and responsibilities required for the position, it is the responsibility of the Board to do such actions necessary, including firing of the Health Director, to ensure that those functions are properly conducted.
- ▶ If the Board should fire the Health Director, it is the responsibility of the Board to immediately appoint an interim Health Director and then to conduct a search and process to hire a new Health Director.

Conflicts of Interest

- ▶ Generally, Board members should avoid being placed in a position that could create a conflict of interest and refrain from using the Board member's position on the Board for personal or partisan gain.
- ▶ When an individual Board member has a conflict of interest or reasonably believes to have a conflict of interest concerning a matter that is before the Board, the Board member has an obligation to declare the conflict and to abstain from participating in the discussion and voting on the issue.
- ▶ The descriptions for what constitutes a conflict of interest (i.e. contracts for personal benefit, gifts and favors, etc.) and the procedures for the Board in how to handle a potential or identified conflict of interest are contained in CHA's Conflict of Interest Policy.

Governance Documents Generally

- ▶ CHA's Governance Documents include:
 - ▶ Certificate of Incorporation
 - ▶ Bylaws
 - ▶ Policies
 - ▶ Resolutions
 - ▶ Internal Rules

Governance Documents

Order of Priority

- ▶ Certificate of Incorporation
- ▶ Bylaws
- ▶ Policies
- ▶ Resolutions (in most cases, sometimes higher priority)
- ▶ Internal Rules

Board Committees

- ▶ Per CHA's Bylaws, the Board may delegate specific power and authority to committees.
 - ▶ The Board currently has an Executive & Finance Committee.
- ▶ Subject only to lawfully recognized exceptions, all official meetings of Board Committees must be conducted openly and otherwise in compliance with the open meetings laws in which Board meetings are subject (i.e. meetings must be open (unless in closed session for a particular allowed purpose) and minutes must be taken for each meeting).
- ▶ Should the Board determine that additional committees of the Board are needed or recommended, such committees may be created and a separate charter detailing the roles, responsibilities and purposes of such committee must be prepared.

Conclusion/Questions?



H. BUSINESS AGENDA

Annual Review – Board of Health Governing Documents, *Motion*

Erin Shoe, MPH, Health Director

- 1. Board of Health Bylaws*
- 2. Corporate Resolution*
- 3. Board of Health Operating Procedures*
- 4. Conflict of Interest Policy*
- 5. Rule Making and Adjudication*
- 6. Public Comments*

[Click here for full documents](#)



Annual Review - Board of Health

Governing Documents, *Motion*

Summary	
Board of Health Bylaws	<u>Changes were made</u> to include the updated mission statement and values of CHA. The purpose of this policy is to establish an internal decision-making structure and board operating procedures to ensure compliance.
Corporate Resolution	<u>No changes to this policy.</u> The purpose of this policy is to provide transparency, accountability, and proper execution of decisions made by the Board.
Board of Health Operating Procedures	<u>No changes to this policy.</u> The purpose of this policy is to provide a set of rules and guidelines to ensure meetings are conducted effectively, decisions are made transparently, and board responsibilities are fulfilled.
Conflict of Interest Policy	<u>No changes to this policy.</u> The purpose of this policy is to protect the interests and perception of CHA when entering into a transaction or arrangement that might benefit the private interest of one of its Board members.
Rule Making and Adjudication	<u>No changes to this policy.</u> The purpose of this policy is to ensure effective promotion of public health, and has the authority to adopt rules necessary for that purpose.
Public Comments	<u>No changes to this policy.</u> The purpose of this policy is to invite and reserve space at each meeting for the public to have an opportunity to provide public comment.



H. BUSINESS AGENDA

School Health Software – Waiver of Competition, *Motion*

Sue Yates, Chief Financial Officer

[Click here](#)



I. HEALTH DIRECTOR REMARKS

Erin Shoe, MPH



J. ANNOUNCEMENTS

Chairperson Lara Pons, MD



K. MOTION TO ENTER INTO CLOSED SESSION

Chairperson Lara Pons, MD

Motion to Enter into Closed Session pursuant to NCGS 143-318.11 (a)(1) to prevent the disclosure of information that is privileged or confidential pursuant to North Carolina Law.



L. MOTION TO ADJOURN

Chairperson Lara Pons, MD



Supplementary Documents Linked to Agenda Items



Public Health Authority of Cabarrus County
Board Meeting Minutes
June 17, 2025

A regular meeting of The Public Health Authority Board was held on Tuesday, June 17, 2025.

Board members attended in-person at CHA.

Members Present: Lara Pons, MD, Chair
Mark Spitzer, Vice-Chair
Amy Jewell
Kerry Dove
Cecilia Plez
Daryle Adams

Members Absent: Laura Lindsey, Natasha Lipscomb, & Asha Rodriguez

Staff Present: Erin Shoe, Rolanda Patrick, Mariah Kendrick, April Sloop, Sue Yates, & Melissa Blovsky

Guest and Members of the Public Present: Kyla Paladino & Nick Paladino

CALL TO ORDER

Chairperson, Dr. Lara Pons, called the meeting to order at 5:34pm.

ADOPTION OF THE AGENDA

Chairperson, Dr. Lara Pons, requested a motion to adopt the agenda. Kerry Dove moved. Mark Spitzer seconded. Motion and approval carried unanimously.

APPROVAL OF THE MINUTES

Chairperson, Dr. Lara Pons, requested a motion to approve the May 2025 minutes. Cecilia Plez moved. Mark Spitzer seconded. Motion and approval carried unanimously.

RECOGNITIONS

Health Director, Erin Shoe, introduced guest Kyla Paladino and father Nick Paladino. Kyla is a rising junior at the University of South Carolina. Kyla aims to work in public health following graduation. Ms. Paladino remarked appreciating the opportunity to gain valuable insight into the budget planning process and the organization's strategic direction.

Erin Shoe, recognized Charles Rhodes, MD, as the new Senior Physician of Clinical Services. Charles began working at CHA at the beginning of June 2025. Charles played an instrumental role at CHA during the covid vaccine drive-

through clinics. Dr. Rhodes has been associated with CHA for 38 years. Patients are excited for his services and we are happy to have him join CHA!

Deputy Health Director, Rolanda Patrick, introduced the CHA summer interns:

June Barney, a Community Impact intern, is a sophomore at UNC Chapel Hill. June's objective is to complete the UNC Nursing Program and earn her BSN, followed by pursuing a master's degree in public health. Afterwards, June aims to work as a nurse focusing on disaster relief for an international healthcare organization, such as the Red Cross.

Tajay Brown, a Social Media Marketing intern, will be attending her last semester at UNC Charlotte this year - completing her communications major with a concentration in public relations and a minor in political science. Tajay's career goals consists of working in corporate social responsibility and community relations for a sports team.

Emma Griffin, an Environmental Health intern, is a student at UNC Chapel Hill studying Environmental Health Science. Emma's career goals include working in Environmental Health in a rural area focusing on water or air quality.

Jackson Plemmons, an Environmental Health intern, is entering his 2nd year in the MPH program at UNC Charlotte. Jackson studied Medical Anthropology at UNC Chapel Hill during his undergraduate experiences and hopes to pursue a PhD in Public Health Policy after his master's program.

INFORMAL PUBLIC COMMENTS

No public comments.

PUBLIC HEARING: FISCAL YEAR 2026 BUDGET

No public comments.

REPORTS

Green Burial Presentation

Vital Records Supervisor and HIPAA Privacy & Compliance Officer, Melissa Blovsky, presented the Green Burial Presentation.

The Non-Licensed Data Contributor (NLDC) designation, commonly known as Green Burials, permits an individual acting in the capacity of a funeral director to register death without the involvement of a licensed funeral home.

Health departments must apply for NLDC authorization, complete required training, and receive formal approval to provide services. Upon approval, access is granted in the NC DAVE system to initiate and complete a death certificate. This process is typically utilized when a family chooses not to engage a funeral home, often due to financial considerations or a preference for a natural or "green" burial.

This approach supports families seeking environmentally conscious and cost - effective end - of - life arrangements while ensuring compliance with state registration requirements.

Finance Committee Reports

Chief Finance Officer, Sue Yates, presented the following reports:

- CHA Financial Summary as of April 30, 2025. The summary includes revenues and expenditures, actuals for past and present fiscal year and the year-to-date collected percentages.
 - Reviewed and recommended for approval by Finance Committee on 6/6/2025
 - Net positive amount \$868,943
- CHA Snapshot as of April 30, 2025. The snapshot shows the budget, actuals, and year-to-date percentage collected for each department.
 - Reviewed and recommended for approval by Finance Committee 6/6/2025
 - All departments are in 'the green' except Women, Infant & Children (WIC). WIC is yellow due to an expense exceeding revenues. There are no interruptions to WIC services due to agency funding.

CONSENT AGENDA

Budget Revisions

Sue Yates, presented an overview of the Budget Revisions. There are currently seventeen (17) Budget Revisions. All were reviewed by the Executive and Finance Committee on 6/6/2025.

The Budget Revisions include the following:

1. Behavioral Health: Pediatric - increase \$4,129
2. Clinical: Newborn Post-Partum Program – decrease \$ (2,949)
3. Clinical: Pregnancy Care Management – increase \$102, 511
4. Clinical: Receipt of Donation- increase \$250
5. Clinical: Opioid Settlement Funds –
 - a. OSMAT – increase \$34,818
 - b. OSSUN – increase \$29, 345
6. Clinical: Comprehensive Opioid, Stimulant, and Substance Use Program (COSSAP) Grant – increase \$8,792
7. Community Impact: Cooking Classes – increase \$370
8. Community Impact: Women, Infants, and Children (WIC)
 - a. Client Services funds – increase \$96, 418
 - b. Nutrition Education funds – increase \$8,787
 - c. Breastfeeding Peer Counselor Program (BPCP) funds – increase \$14,510
9. Dental: Kannapolis Dental – increase \$56,840
10. Finance: Overages and Shortages – increase \$5,965
11. Finance International Travel – increase \$4,272
12. Information Technology – increase \$94

The Budget Revisions for division-to-division transfers only with no net change to budget include the following:

1. Brown Mill: Office Equipment
 - a. Move funds to Brown Mill for office equipment from Care Management: \$65, 100
 - b. Move funds to Brown Mill for office equipment from Dental: \$132,144
2. Finance: Information Technology to Finance
 - a. Move funds from Information Technology to Finance: \$187,387

BUSINESS AGENDA

Public Hearing: Fiscal Year 2026 Budget

No public comments.

Fiscal Year 2026 Budget

No changes since presented at May meeting.

Budget Ordinance

Chairperson, Dr. Lara Pons, introduced the Budget Ordinance for Fiscal Year 2025-2026.

Total estimated revenues for fiscal year beginning July 01, 2025 and ending June 30, 2026 is \$38,303,948.

Total expenditures for operations and activities for the fiscal year beginning July 01, 2025 and ending June 30, 2026 is \$38,303,948

Adoption of the Fiscal Year 2026 Budget

Chairperson, Dr. Lara Pons, requested a motion to adopt the Fiscal Year 2026 Budget. Amy Jewell moved. Mark Spitzer seconded. Motion and approval carried unanimously.

HEALTH DIRECTOR REMARKS

Erin Shoe, shared the Health Director's Remarks.

1. The Community Health Needs Assessment retreat was held this morning. The Community Planning Council consisted of 50 community members from various industries. The priorities selected include: Behavioral Health, Housing, Transportation, and Early Childhood Education. Staff now get to work on the full report and will return in August to present to this board.
2. Two CHA staffers graduated from Leadership Cabarrus this year. Congratulations to Tammy Alexander, our School Health Director, and Branisha Smith, a Behavioral Health Program Manager.
3. Sarah Vingoe and I met with Congressman Mark Harris' staffers last week to discuss public health at the local level. We look forward to further support Mr. Harris and his work in DC.
4. Brown Mill is running on time with target certificate of occupancy by end of December. We are looking at tentative ribbon cuttings in January.
5. Dental served campers at the Cabarrus County Boys & Girls Club for the first time this week utilizing our school based oral health model for the summer!
6. Cayla Ifill (Adolescent Health) was acknowledged as a community partner at the KCS Board Meeting in May 2025.
7. We lost a long-term colleague last week. Thank you for your kind words of support for the team. Greg Stewart was an amazing advocate for health and wellness. We are supporting staff in a number of ways and considering how to honor Greg's memory for years to come.

ANNOUNCEMENTS

Amy Jewell, stated CHA staff did a fantastic job presenting on their divisions.

MOTION TO ADJOURN

No further business to come before the Board.

Chairperson, Dr. Lara Pons, requested a motion to adjourn the meeting. Mark Spitzer moved. Amy Jewell seconded the motion. Motion and approval carried unanimously.

The meeting was adjourned at 6:16pm.

The next meeting of the Board will be August 19, 2025 at 5:30pm.

Lara Pons, MD, Chair
Public Health Authority Board of Commissioners

Minutes Taken by Mariah Kendrick
Governance Program Manager

DRAFT



Cabarrus Health Alliance Board Meeting Agenda Form

Meeting Date: August 19, 2025

Name of Item: Budget Revision Request

Submitted by: Sue K Yates

Expected Length of Presentation: 5 minutes

Brief Summary:

Budget revisions are being requested due changes in revenues and expenses. These changes are due to either an increase or decrease in a funding source, new source of funding, or realignment of revenues and/or expenses.

Requested Action:

Approval of budget revisions

1. Cannon Grant received for Brown Mill Upfit. \$600,000
2. Mariam and Robert Hayes Charitable Trust funds received for contract with CapDev. \$33,000
3. Budget for Child Fatality Case Reporting Agreement Addendum. \$2,743
4. Budget for the ARP Lead Agreement Addendum. \$11,155
5. Smart Start Grant received for Ultrasounds for uninsured patients. \$15,000
6. Reduce carryover budget for Smart Start Bilingual Dental Navigator. \$(1,330)

Previous Action/Discussion on this item? If yes, explain

Yes, reviewed by the Finance Subcommittee.

Items reviewed by:

Erin K Shoe, Health Director
Sue K Yates, Chief Financial Officer



CABARRUS HEALTH ALLIANCE

Budget Revision/Amendment Request

#1

Date: 8/19/2025

Amount: \$ 600,000

Type of Adjustment:

Health Director: Erin Shoe

Internal Transfer Within Program

Purpose of Request: To budget for the Cannon grant received for Brown Mill Upfit.

Transfer Between Programs

Supplemental Request

Account	Account Name	Present Approved Budget	Increase	Decrease	Revised Budget Amount
00265815-6825-404	Cannon Foundation Inc.-BM	\$ -	\$ 600,000	\$ -	\$ 600,000
00295815-9860-404	Equipment&Furniture-BrownMill	\$ -	\$ 600,000	\$ -	\$ 600,000

Finance Office Use Only

Finance Director _____ Health Director _____ Chairman of Cabarrus Health Alliance _____
 Approved/Denied Date _____ Approved/Denied Date _____ Approved/Denied Date _____

CABARRUS HEALTH ALLIANCE

Budget Revision/Amendment Request

#2

Date: 8/19/2025

Amount: \$ 33,000

Type of Adjustment:

Health Director: Erin Shoe

Internal Transfer Within Program

Purpose of Request: To budget for the Hayes Charitable Trust funds received for contract with CapDev.

Transfer Between Programs

Supplemental Request

Account	Account Name	Present Approved Budget	Increase	Decrease	Revised Budget Amount
00265815-6825-41100	Cannon Foundation	\$ -	\$ 33,000	\$ -	\$ 33,000
00295815-9447-41100	Contracted Svcs-Admin	\$ 140,000	\$ 33,000	\$ -	\$ 173,000

Finance Office Use Only

Finance Director _____ Health Director _____ Chairman of Cabarrus Health Alliance _____
 Approved/Denied Date _____ Approved/Denied Date _____ Approved/Denied Date _____

CABARRUS HEALTH ALLIANCE

Budget Revision/Amendment Request

#3

Date: 8/19/2025

Amount: \$ 2,743

Type of Adjustment:

Health Director: Erin Shoe

Internal Transfer Within Program

Purpose of Request: To budget for the Child Fatality Case Reporting Agreement Addendum.

Transfer Between Programs

Supplemental Request

Account	Account Name	Present Approved Budget	Increase	Decrease	Revised Budget Amount
00265832-6200-50701	CHA Grant - CFCR	\$ -	\$ 2,743	\$ -	\$ 2,743
00295832-9102-50701	Part Time > 1000 Hours-CFCR	\$ -	\$ 1,700	\$ -	\$ 1,700
00295832-9201-50701	Social Security-CFCR	\$ -	\$ 106	\$ -	\$ 106
00295832-9202-50701	Medicare-CFCR	\$ -	\$ 25	\$ -	\$ 25
00295832-9205-50701	Group Hospital Insurance-CFCR	\$ -	\$ 353	\$ -	\$ 353
00295832-9206-50701	HRA-CFCR	\$ -	\$ 235	\$ -	\$ 235
00295832-9210-50701	Retirement-CFCR	\$ -	\$ 244	\$ -	\$ 244
00295832-9211-50701	401K Match-CFCR	\$ -	\$ 34	\$ -	\$ 34
00295832-9230-50701	Worker's Comp-CFCR	\$ -	\$ 10	\$ -	\$ 10
00295832-9640-50701	Insurance and Bonds - CFCR	\$ -	\$ 26	\$ -	\$ 26
00295832-9659-50701	Unemployment - CFCR	\$ -	\$ 10	\$ -	\$ 10

Finance Office Use Only

Finance Director _____ Health Director _____ Chairman of Cabarrus Health Alliance _____
 Approved/Denied Date _____ Approved/Denied Date _____ Approved/Denied Date _____

CABARRUS HEALTH ALLIANCE

Budget Revision/Amendment Request

#4

Date: 8/19/2025

Amount: \$ 11,155

Type of Adjustment:

Health Director: Erin Shoe

Internal Transfer Within Program

Purpose of Request: To budget for the ARP Lead Agreement Addendum.

Transfer Between Programs

Supplemental Request

Account	Account Name	Present Approved Budget	Increase	Decrease	Revised Budget Amount
00265805-6200-50914	CHA Grant-Lead	\$ -	\$ 11,155	\$ -	\$ 11,155
00295805-9101-50914	Salaries & Wages-Lead	\$ -	\$ 5,858	\$ -	\$ 5,858
00295805-9201-50914	Social Security-Lead	\$ -	\$ 454	\$ -	\$ 454
00295805-9202-50914	Medicare-Lead	\$ -	\$ 106	\$ -	\$ 106
00295805-9205-50914	Group Hospital Insurance-Lead	\$ -	\$ 1,245	\$ -	\$ 1,245
00295805-9206-50914	HRA-Lead	\$ -	\$ 241	\$ -	\$ 241
00295805-9210-50914	Retirement-Lead	\$ -	\$ 943	\$ -	\$ 943
00295805-9211-50914	401K Match-Lead	\$ -	\$ 147	\$ -	\$ 147
00295805-9230-50914	Workers' Compensation-Lead	\$ -	\$ 44	\$ -	\$ 44
00295805-9355-50914	Other Operation Costs-Lead	\$ -	\$ 2,000	\$ -	\$ 2,000
00295805-9640-50914	Insurance & Bonds-Lead	\$ -	\$ 92	\$ -	\$ 92
00295805-9659-50914	Unemployment Comp-Lead	\$ -	\$ 25	\$ -	\$ 25

Finance Office Use Only

Finance Director _____ Health Director _____ Chairman of Cabarrus Health Alliance _____
 Approved/Denied Date _____ Approved/Denied Date _____ Approved/Denied Date _____

CABARRUS HEALTH ALLIANCE

Budget Revision/Amendment Request

#5

Date: 8/19/2025

Amount: \$ 15,000

Type of Adjustment:

Health Director: Erin Shoe

Internal Transfer Within Program

Purpose of Request: To budget for the grant received from SmartStart for Ultrasounds.

Transfer Between Programs

Supplemental Request

Account	Account Name	Present Approved Budget	Increase	Decrease	Revised Budget Amount
00265875-6286-239	Smart Start Funding-Ultrasound	\$ -	\$ 15,000	\$ -	\$ 15,000
00295875-9445-239	Purchased Services-SSUS	\$ -	\$ 15,000	\$ -	\$ 15,000

Finance Office Use Only

Finance Director _____ Health Director _____ Chairman of Cabarrus Health Alliance _____
 Approved/Denied Date _____ Approved/Denied Date _____ Approved/Denied Date _____

CABARRUS HEALTH ALLIANCE

Budget Revision/Amendment Request

#6

Date: 8/19/2025

Amount: \$ (1,330)

Type of Adjustment:

Health Director: Erin Shoe

Internal Transfer Within Program

Purpose of Request: To adjust budget based on actuals for a two year grant for Bilingual Dental Navigator from Smart Start.

Transfer Between Programs

Supplemental Request

Account	Account Name	Present Approved Budget	Increase	Decrease	Revised Budget Amount
00265855-6286-187	Cabarrus Partnership for Child	\$ 108,919	\$ -	\$ 1,330	\$ 107,589
00295855-9101-187	Salaries & Wages-DBPN	\$ 75,295	\$ -	\$ 2,530	\$ 72,765
00295855-9346-187	Fuel	\$ -	\$ 1,200	\$ -	\$ 1,200

Finance Office Use Only

Finance Director _____ Health Director _____ Chairman of Cabarrus Health Alliance _____
 Approved/Denied Date _____ Approved/Denied Date _____ Approved/Denied Date _____

SUBJECT: CHA FINANCIAL PROCEDURES POLICY

EFFECTIVE DATE: January 15, 2004

REVISION DATE(S): May 16, 2008; July 22, 2009; July 28, 2010; December 31, 2012; December 18, 2014; December 30, 2015; December 28, 2017; October 30, 2019; October 29, 2020; September 15, 2021, August 19, 2025

DATE OF LAST REVIEW: May 16, 2008; July 22, 2009; July 28, 2010; December 8, 2011; December 3, 2012; January 9, 2014; December 18, 2014; December 30, 2015; December 28, 2016; December 28, 2017; December 28, 2018; October 30, 2019; October 29, 2020; September 15, 2021; September 20, 2022; September 25, 2023, August 23, 2024, August 19, 2025

POLICY STATEMENT: The primary objective of these overall financial procedures provides general information and guidelines to CHA staff on the financial principles of the Public Health Authority of Cabarrus County dba Cabarrus Health Alliance (CHA). Its purpose is to enable CHA to achieve a long-term stable and positive financial condition. CHA's financial management processes include integrity, prudent stewardship, planning, accountability, and full disclosure.

The more specific purpose is to provide guidelines to the Chief Financial Officer (CFO) in planning and directing the day-to-day financial affairs, and in developing recommendations to the Chief Executive Officer (CEO) and CHA's Board of Directors.

The scope of these procedures generally spans, among other issues, accounting, auditing, financial reporting, internal controls, operating and capital budgeting, revenue management, cash and investment management, expense control, and planning concepts, in order to:

- (1) Present fairly and with full disclosure the financial position and results of financial operations of CHA in conformity to Generally Accepted Accounting Principles (GAAP), and
- (2) Determine and demonstrate compliance with finance-related legal and contractual issues in accordance with provisions of The Local Government Budget and Fiscal Control Act.

Full participation, cooperation and support of CHA personnel are necessary and required to ensure the sound fiscal activities of CHA.

PROCEDURES TO BE FOLLOWED:

1. GENERAL IMPLEMENTATION AND COMPLIANCE GUIDELINES

1.1. IMPLEMENTATION, COMPLIANCE, ACCOUNTABILITY AND REVIEW

The CFO will be accountable for implementing these procedures and will to the best of his/her knowledge make the CEO aware of any variances in practice from these procedures or any other deviation from prudent financial practices in accordance with GAAP, federal laws, state laws or ethics of the profession. Any variances will be

presented as soon as the variance is determined.

1.2. ANNUAL REVIEW

The Financial Services Policies will be reviewed annually and updated, if necessary.

2. ACCOUNTING, AUDITING, AND FINANCIAL REPORTING

2.1. ACCOUNTING

2.1.1. CHA is solely responsible for reporting its financial affairs, both internally and externally. The CFO is responsible for establishing the Chart of Accounts and for properly recording financial transactions in the General Ledger.

2.1.2. *Reconciliation* – All bank statements are reconciled daily and monthly.

2.2. EXTERNAL AUDITING

2.2.1. *Annual Audit* – CHA will be audited annually by external independent accountants ("auditor"). The CFO will be responsible for contacting the auditor's representative for the annual audit.

2.2.2. *Auditor Reputation* – The external auditor must be a CPA firm of national reputation and must demonstrate that it has the breadth of experience and depth of staff to conduct CHA's audit in accordance with generally accepted auditing standards and contractual requirements.

2.2.3. *Schedule* – The external Auditor's report on CHA's financial statements will be completed within 90 days of CHA's Fiscal Year end.

2.2.4. *Management Letter* – The external auditor will prepare and will jointly review the Management Letter with the CFO. Within 30 days of this receipt, the CFO shall respond in writing to the CEO regarding the auditor's Management Letter, addressing the issues contained therein. The CEO, upon acceptance of the recommendations from the CEO concerning the Management Letter, shall forward the Management Letter and the response to CHA's Board of Directors.

2.2.5. *Rotation of External Auditor* – CHA does not require an external auditor rotation, but will circulate requests for proposal for audit services every 3 years with the option to extend the term of award without bid process if desired.

2.3. FINANCIAL REPORTING

2.3.1. External Reporting

(a) *Scope* – The Annual Comprehensive Financial Report shall be prepared in accordance with GAAP and the Governmental Accounting Standards Board (GASB).

(b) *Schedule* – The Annual Comprehensive Financial Report shall be provided to

the Board of Directors within 6 months of CHA's Fiscal Year end. The CFO will inform the CEO of any delay and the reasons therefore.

(c) *Standards* – The CFO shall prepare annually the Annual Comprehensive Financial Report to standards, such as those of the Government Finance Officer's Association (GFOA) or any recognized group, for submission, evaluation and consideration for the Certificate of Achievement for Excellence in Financial Reporting.

2.3.2. Internal Reporting – The CFO will prepare internal financial reports sufficient to plan, monitor, and control CHA's financial affairs.

(a) *Scope/Format* – The level of detail presented should be line item. Information included should be current month budget and actual, budget and actual year-to-date, and variance from Budget.

(b) *Schedule* – At a minimum on a quarterly basis, the CFO shall prepare a summary of CHA's financial affairs. The report shall be submitted to the CEO within 15 calendar days following the end of the calendar month for their review. The most current monthly report will be shared at the Cabarrus Health Alliance Board meetings for review by the Board of Directors. Each such report shall accurately reflect CHA's current cash position, revenue, and expense performance as well as any additional information that reflects CHA's fiscal position.

3. OPERATING BUDGET

3.1. PREPARATION

Budgeting is an essential element of the financial planning, control, and evaluation process of CHA. CHA utilizes one budget for operation, maintenance, and capital improvements for their annual financial operating plan.

3.1.1. *Budget Scope and Format* – The annual budget process shall begin by the CEO reviewing the current year's budget status, the Multi-Year Forecast, any changes in policy requested by the Board of Directors and any changes in health, environmental and governmental industry practices that would require changes in the management of CHA. A proposed budget shall be prepared by the CFO reflecting the guidelines set by the CEO, with the participation of all CHA's management. The budget shall include four basic segments for review and evaluation. These segments are: (1) Budget Message, including a financial overview of operations and cash flow, (2) Budget Ordinance, (3) Budgeted Revenues, and (4) Budgeted Expenses. A three-column format should be used such that prior year actual, current year estimate and next year proposed are all clearly shown.

3.1.2. *Basis of Budgeting* – The basis of budgeting will conform to the requirements of

The Local Government Budget and Fiscal Control Act, that is prepared on the modified accrual basis of accounting in recording transactions except as otherwise provided by regulation of the Commission, local governments and public authorities.

- 3.1.3. *Budgetary Process* – The Budget is prepared by the CFO based on guidelines outlined by the CEO and with the cooperation of CHA management. The Budget is reviewed in detail with the CEO to assure compliance with CHA policy. Upon completion of the Budget, the CEO shall submit it to the Board of Directors for its review and recommendation for official adoption at the Board's regular June meeting (or at a Special Meeting held prior to June 30 year end if circumstances so require). The CFO will inform CHA's management of the approval, denial or modifications to their budget submissions.
- 3.1.4. *Budget Adoption* – Upon presentation of a proposed Budget to the Board of Directors, it is the goal that it be acted upon and approved by the Board during the month of June.
- 3.1.5. *Budget Amendments* – At any time during the fiscal year, the CFO and/or management may recommend amendments to the adopted budget. Budget amendments approved by the CEO are submitted to the Board of Directors for adoption.
- 3.1.6. *Standards* – The CFO shall prepare annually the Budget document to standards that meet or exceed the requirements set forth in The Local Government Budget and Fiscal Control Act.

3.2. BALANCED BUDGET

It is intended that the Annual Budget be balanced with Current Revenues, exclusive of beginning resources, greater than or equal to Current Expenses. CHA's share of Net Remaining Revenue shall be held in reserve.

3.3. REPORTING

Periodic financial reports will be prepared to enable CHA's management to manage their Budgets and to enable the CFO to monitor and control the Budget as authorized by the CEO. Summary financial reports will be presented to the Board of Directors annually. Such reports will be in a format appropriate to enable the Board to understand the budget status at a level of summary executive detail.

3.4. CONTROL

Operating Expense Control is addressed in Section 6.

3.5. OPERATING POSITION

The guidelines that CHA should be following to assure fiscal stability are those outlined in Financial Conditions, Reserves, and Stability Ratios (Section 9).

4. REVENUE MANAGEMENT

4.1. CHARACTERISTICS

CHA will strive for the following optimum characteristics in its revenue system:

- 4.1.1. *Simplicity* – CHA, where possible and without sacrificing accuracy, will strive to keep the revenue system simple in order to reduce compliance costs and to make it more understandable.
- 4.1.2. *Certainty* – A thorough knowledge and understanding of all revenue sources increases the reliability of the revenue system. CHA will understand its revenue sources and enact consistent collection procedures to provide assurances that the revenue base will materialize according to budgets and plans.
- 4.1.3. *Equity* – CHA shall make every effort to maintain fairness in its revenue system structure. CHA shall require that there be a balance in the revenue system; i.e., the revenue base will have the characteristic of fairness and neutrality.
- 4.1.4. *Administration* – The benefits of a revenue will exceed the cost of producing the revenue. The cost of collection will be reviewed annually for cost effectiveness.
- 4.1.5. *Diversification and Stability* – In order to protect itself from extreme fluctuations in a revenue source due to changing economic conditions, variations in funding, or other external issues, CHA will maintain a diversified revenue system which will provide a stable source of income with a goal of balancing revenues and expenses.

4.2 SOURCES OF FUNDS

The following considerations and issues will guide CHA in its revenue policies concerning specific sources of funds:

- 4.2.1 *Non-Recurring Revenues* – One-time or non-recurring revenues will not be used to finance current ongoing operations. Non-recurring revenues should be used only for one-time expenses such as special projects/programs needed in the community. The anticipated expenses should have a matching lifespan as the revenue. They will not be used for budget balancing purposes.
- 4.2.2 *Debt Collection Policy* – See CHA’s Debt Management Policy.
- 4.2.3 *Interest Income* – Interest earned from investment of available monies, will only be used if needed.
- 4.2.4 *Client/Clinical Services Revenues* – See CHA’s Eligibility and Fee Policies.
- 4.2.5 *Other User-Based Fees and Service Charges* – For special services associated with a user fee or charge, the direct and indirect costs of that service will be offset by the fee where possible. There will be an annual adjustment of rates and charges to ensure that fees provide adequate coverage of costs of services.
- 4.2.6 *Grants* – Any potential grants will be examined for matching requirements. These

revenue sources should be used only for program or projects consistent with CHA's goals and objectives to meet the community needs. Continuation of the project, operation and maintenance costs, and future funding of the project should be considered before making application for the grant.

4.2.7 *Revenue Monitoring* – Revenues actually received will be compared regularly to budgeted revenues, and variances will be reviewed. This process will be summarized in the appropriate budget report. Any material discrepancy will be reported to the CEO for further review.

5. EXPENSE CONTROL

5.1. FUNDING AUTHORIZATION

The level of budgetary control for the annual budget is the department level. When budget adjustments between departments are necessary, they must be approved by the CEO. Budget adjustments at all levels of control shall be made in accordance with the procedures described in Section III of the Annual Budget Ordinance.

5.2. CENTRAL CONTROL

Upon recognition of any significant budgetary deficit or savings in a Department, it shall be reported to the CFO for inclusion in a Budget Review Report. Any reprogramming of recognized savings should be reviewed by the management with the CFO and the CEO before the funds are recommitted.

5.3. PROJECT CONTROL

Employees are to code their time to the project which they are working. Projects are to be available in the Timesheet program. Payroll will be coded to the appropriate project.

5.4. PROMPT PAYMENT

All invoices approved for payment by the proper CHA officials shall be paid by the Office of Finance within thirty (30) calendar days of receipt, unless otherwise specified in the contract.

The CFO shall establish and maintain proper procedures which will enable CHA to take advantage of all purchase discounts. Where no payment discounts are offered, payment will be made by the earliest of the payment due date or 30 days from receipt of the invoice.

5.5. EQUIPMENT FINANCING

Equipment may be leased/financed if the cost advantages provide a clear and definitive benefit to CHA.

5.6. RISK MANAGEMENT

Every opportunity will be aggressively pursued to conserve and protect CHA's resources from accidents and loss exposures affecting its human, financial, natural, and physical resources. The goal shall be to minimize and uncover significant loss exposures which would threaten CHA's assets. The Risk Management program will emphasize a proactive safety and loss prevention program and a comprehensive claims management program as an important part of the agency's management.

All reasonable financing methods will be reviewed to provide sufficient funding to meet loss situations if and when they occur. Such options may include the purchase of insurance and self-insurance.

5.7. REPORTING

Reports will be prepared for the Board of Directors and CHA management, and shared at each Board meeting including year to date revenues, expenses, actual to budget information and cash flow. Reports will also include analysis of accounts receivable, cash receipts, grants, payments and other material as necessary to provide information on the fiscal condition of CHA.

6. ASSET MANAGEMENT

6.1. INVESTMENTS

6.1.1.The CFO or designee shall promptly invest available CHA funds in accordance with the provisions of CHA's Corporate Resolution, Fund Management, Section No. 007.

6.1.2.At the end of each Fiscal Year, a report on investment performance will be provided to the CEO and Board of Directors.

6.1.3.All investments will be reconciled monthly.

6.2. CASH MANAGEMENT

6.2.1.CHA's cash flow will be managed to maximize the cash available to invest. Such cash management will entail the centralization of cash collections, where feasible. See CHA's Cash Receipts Policy.

6.2.2.The Accounting Department shall, on payments authorized by CHA, use the accounting software, bearing the signature of the appropriate signing officials.

6.2.3.The CFO, or designee, may transfer funds via electronic transfer through the banking portal to CHA's Depository for investment purposes or for payment of any obligation of CHA. Payment authorization shall be in accordance with criteria as defined in the current Bank Depository Agreement, stipulating the conditions and control procedures on such activity.

6.2.4.All cash accounts will be reconciled monthly.

6.3. CAPITAL ASSETS AND INVENTORY

6.3.1.Capital assets will be reasonably safeguarded and properly accounted for and prudently insured. See CHA's Purchasing Policy.

6.4. SYSTEM DATA SECURITY

6.4.1. The CFO shall provide for the security of its Financial Management system and data files.

7. CAPITAL EXPENSES

7.1. SCOPE

Capital expenses of CHA may be budgeted in the annual budget.

(a) Furniture and Equipment meeting the capital asset level are budgeted in line item 9860, by project code, within each requesting department (i.e., lab refrigerator, microscope, vehicles, and medical/dental equipment).

(b) The planning, design and construction of major improvements are budgeted in line item 9820, by project code, within each requesting department, in the annual budget (i.e., building renovations and construction of new facility).

7.2. BUDGET PREPARATION

CHA's Budget will be prepared annually on a fiscal year basis.

7.3. BUDGETARY CONTROL

The CFO must verify the availability of funds within the Budget before any equipment or capital facility project contract is presented to the CEO and the Board of Directors for approval.

7.4. EQUIPMENT MAINTENANCE AND REPLACEMENT

CHA recognizes that deferred maintenance and deferred replacement of equipment increases future capital costs. Therefore, a portion of the annual Budget will be set aside each year to maintain the quality of CHA's equipment in a contingency line item or utilization of fund balance.

8. FINANCIAL CONDITIONS, RESERVES, AND STABILITY RATIOS

8.1. OPERATIONAL COVERAGE - (NO OPERATING DEFICITS)

CHA will maintain an operational coverage of at least \$1.00, such that current operating revenues will equal or exceed current operating expenses.

Deferrals, short-term loans, or one-time sources will be avoided as budget balancing techniques. Reserves will be used only for emergencies or non-recurring expenses, except when balances can be reduced because their levels exceed guideline minimums as stated in Paragraph 9.2.

8.2. OPERATING RESERVES/FUND BALANCE

CHA's fund balance should equal at least 15% of the annual budget.

8.3. LIABILITIES

Procedures will be employed to maximize the realization of any discounts offered by creditors. Current liabilities will be paid within 30 days of receiving the invoice.

8.4. RECEIVABLES

CHA's accounts receivable are due according to CHA's Eligibility, Debt Management, and Fees Policies. Accounts receivable procedures are targeted to begin at 30 days from the service date, with any receivables aged past 30 days to be considered delinquent. See CHA's Debt Management Policy for write-off requirements.

9. CASH MANAGEMENT

CHA's cash flow position will be reviewed periodically to determine performance of cash management and investment policies. Detailed procedures will be followed with respect to Cash/Treasury Management. The guiding principle will be that idle cash will be invested with the intent to (1) safeguard assets, (2) maintain liquidity, and (3) maximize return. Where legally permitted, pooling of investments will be done.

10. INTERNAL CONTROLS

10.1. WRITTEN PROCEDURES

Wherever possible, written procedures will be established and maintained by the CFO for all functions involving cash handling and/or accounting throughout CHA. These procedures will embrace the general concepts of fiscal responsibility set forth in this financial handbook. See CHA's Internal Control Policy.

10.2. MANAGEMENT RESPONSIBILITY

Each member of management is responsible for ensuring that good internal controls are followed throughout his/her Department/Program, that all internal controls are implemented, and that all internal control recommendations made by the internal and external auditors are addressed.

11. STAFFING AND TRAINING

11.1. ADEQUATE STAFFING

Staffing levels will be adequate for the fiscal functions of CHA to operate effectively. As a general rule, overtime shall be used only to address temporary or seasonal demands that require excessive hours. Workload shedding alternatives will be explored before adding staff.

11.2. TRAINING

CHA will support the continuing education efforts of all financial staff including the investment in time and materials for maintaining a current perspective concerning financial issues. Staff will be encouraged and expected to communicate, teach, and share with other members all information and training materials acquired from seminars, conferences, and related education efforts.

11.3. CREDENTIALS AND RECOGNITION

CHA will support staffs efforts which result in meeting standards and receiving exemplary recitations on behalf of any of CHA's fiscal policies, practices, processes, products, or personnel. Staff certifications may include, but are not limited to Certified Public Accountant, Management Accountant, Certified North Carolina Government Finance Officer, Certified Local Government Purchasing Officer, and Certified Coding Specialist.

CHA will strive to maintain a high level of excellence in its accounting policies and practices as it prepares its Annual Comprehensive Financial Report. The CFO shall strive to present annually the Annual Report to the Governmental Finance Officers Association or any other similarly recognized organization, for review of qualifications necessary to obtain the Certificate of Achievement for Excellence in Financial Reporting.

12. GLOSSARY

Board of Directors: The current appointed officials of CHA as set forth in CHA's by-laws and enabling legislation.

Bank Depository Agreement: A contract between a municipality and a depository negotiated and entered into in accordance with the specifications of Local Government Code, Title 4, Chapter 105, Subchapter B, which sets forth the agreements between the parties regarding banking services.

Budget: The document containing the annual Budget Message, Budget Ordinance, and anticipated revenues and expenses based on a fiscal year.

Annual Comprehensive Financial Report: The official annual financial report of the Public Health Authority of Cabarrus County. It includes financial statistics and related notes prepared in conformity with GAAP. Supplemental statistical and narrative information regarding CHA's activities is also included.

Capital Assets: Assets of a long-term nature which are intended to be held or used, such as land, building, improvements other than buildings, machinery, equipment and other items of personal property.

Capital/Major Project Expense: An expense which results in the acquisition or addition of a fixed asset or the improvement to an existing fixed asset.

CEO: The individual appointed by the CHA Board who is responsible for the administration of the activities of CHA.

CFO: The person appointed by the CEO who is responsible for recording and reporting the financial activities of CHA and for making recommendations regarding fiscal policies and procedures.

Chart of Accounts: A chart detailing the system of general ledger accounts.

Current Operating Expense: An obligation of CHA as a result of an incurred expense that is due for payment within a 12-month period.

Current Revenue: The revenues or resources of CHA convertible to cash within a 12-month period.

Emergency: An unexpected occurrence, i.e., communicable disease outbreak or event that requires

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the unplanned use of CHA funds.

Equity: See fund balance.

Expense: Decreases in net financial resources for the purpose of acquiring goods or services.

Fiscal Year: A 12-month budget period, generally extending from July 1 through the following June 30.

Fund: An independent fiscal and accounting entity with a self-balancing set of accounts recording cash and/or other resources together with all related liabilities, obligations, reserves, and equities which are segregated for the purpose of carrying on specific activities or attaining certain objectives.

Fund Balance (Equity): The excess of fund assets over liabilities. Accumulated balances are the result of an excess of revenues over expenses during some period. A negative fund balance is a deficit balance.

GAAP: See Generally Accepted Accounting Principles.

GASB: See Governmental Accounting Standards Board.

General Ledger: The collection of accounts reflecting the financial position and results of operations for CHA.

Generally Accepted Accounting Principles (GAAP): Uniform minimum standards of and guidelines to financial accounting and reporting as set forth by the Government Accounting Standards Board (GASB).

GFOA: Government Finance Officers Association of the United States and Canada.

Governmental Accounting Standards Board (GASB): The authoritative accounting and financial reporting standard-setting body for government agencies.

Investments: Securities held for the production of income in the form of interest.

Management Letter: A written report from the independent auditors to the CHA Board reflecting observations and suggestions as a result of the audit process.

Non-Recurring Revenues: Resources recognized by CHA that are unique and occur only one time or without pattern.

Official Budget: The budget as recommended by the CEO and adopted by the CHA Board of Directors.

Revenue: An increase in assets due to the performance of a service or the sale of goods. Revenues

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are recognized when earned, measurable, and reasonably assured to be received within 60 days.

Risk: The liability, either realized or potential, related to CHA's daily operations.

Self-Insurance: Appropriating sufficient funds in advance to meet estimated losses, including enough to cover possible losses in excess of those estimated.

Date Board Chairman

Revised 5/16/2008: Changed format to accreditation standards and renamed CHA Financial Procedures. Replaced Financial Policies Handbook. (tmharkey.5/16/2008)

SUBJECT: PROGRAM INCOME POLICY RELATED TO ARP/CSLFRF AWARD**EFFECTIVE DATE:** October 25, 2022**REVISION DATE:** October 25, 2022**REVIEW DATE:** September 5, 2023; August 7, 2024; August 19, 2025**POLICY STATEMENT:**

WHEREAS the Public Health Authority of Cabarrus County *d.b.a.* Cabarrus Health Alliance (hereinafter referred to as “CHA”), has received an allocation of funds from the Coronavirus State and Local Fiscal Recovery Funds of H.R. 1319 American Rescue Plan Act of 2021 (hereinafter “ARP/CSLFRF Award” or “Funds”); and

WHEREAS, CHA shall comply with the terms of ARP/SCLFRF Award, and the U.S. Department of Treasury’s (“Treasury”) federal regulations governing the spending of Funds, including the Final Rule, and Treasury’s regulations governing expenditures of Funds, including the Award Terms and Conditions, Compliance and Reporting Guidance for the State and Local Fiscal Recovery Funds (together the “Federal regulations”), and any additional guidance Treasury has issued or may issue governing the spending of Funds.

WHEREAS, CHA shall comply with the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, 2 C.F.R. Part § 200 (the “UG”); and

WHEREAS, CHA shall account for program income per the requirements set forth in the UG, including, but not limited to, 2 C.F.R. § 200.307, and as stipulated in Compliance and Reporting Guidance for the State and Local Recovery Funds, which provides: “Recipients of CSLFRF funds should calculate, document, and record the organization’s program income. Additional controls that your organization should implement include written policies that explicitly identify appropriate allocation methods, accounting standards and principles, compliance monitoring checks for program income calculations, and records.”¹

Now, therefore, be it Resolved, that the governing board of CHA hereby adopts and enacts the following policies and procedures for the use of program income earned from the expenditure of Funds pursuant to the ARP/CSLFRF Award.

¹ Compliance and Reporting Guidance, p. 9.

PROGRAM INCOME POLICY

I. PURPOSE AND SCOPE

CHA enacts the following procedures for its use of program income earned from the expenditure of Funds to ensure compliance with the UG, including, but not limited to, 2 C.F.R. § 200.307, the ARP/CSLFRF Award, and all applicable Federal regulations governing the use of program income. CHA agrees to administer program income according to the requirements set forth in this policy and as required by the Federal regulations and State law.

The responsibility for following this policy lies with CHA's Finance Director or designee, who are charged with the administration and financial oversight of the ARP/CSLFRF Award. Questions on the use and/or reporting of program income should be directed to CHA's Finance Director or designee.

II. DEFINITIONS²

- a. *ARP/CSLFRF Award* means the Federal program governing the use of Coronavirus State and Local Fiscal Recovery Funds as provided in the Assistance Listing and as administered by the U.S. Department of Treasury pursuant to the American Rescue Plan Act of 2021 ("ARPA"), Pub. L. No. 117-2 (Mar. 11, 2021).
- b. *CSLFRF Funds* means the portion of Federal financial assistance from the Coronavirus State Fiscal Recovery Funds and Coronavirus Local Fiscal Recovery Funds (collectively "Funds") awarded to the CHA pursuant ARPA.
- c. *Federal award* means the Federal financial assistance that a recipient receives directly from a Federal awarding agency or indirectly from a pass-through entity, as described in 2 C.F.R. § 200.101. The Federal award is the instrument setting forth the terms and conditions of the grant agreement, cooperative agreement, or other agreement for assistance.
- d. *Federal awarding agency* means the Federal agency that provides a Federal award directly to a non-Federal entity.
- e. *Federal financial assistance* means the assistance that non-Federal entities receive or administer in the form of grants, cooperative agreements, non-cash contributions, direct appropriations, food commodities, or other financial assistance, including loans.
- f. *Federal program* means all Federal awards which are assigned a single Assistance Listings Number.
- g. *Non-Federal entity* means a State, local government, Indian tribe, Institution of Higher Education (IHE), or nonprofit organization that carries out a Federal award as a recipient or subrecipient.
- h. *Period of performance* means the total estimated time interval between the start of an initial Federal award and the planned end date, which may include one or more funded portions, or budget periods. The period of performance for the ARP/CSLFRF Award ends December 31, 2026.
- i. *Program income* means gross income earned by the non-Federal entity that is directly generated by a supported activity or earned as a result of the Federal award during the period of performance except as provided in 2 C.F.R. § 200.307(f).

² Excluding the first two, the definitions in this section are found in 2 C.F.R. § 200.1.

III. PROGRAM INCOME OVERVIEW

For purposes of this policy, program income is the gross income earned by the CHA that is directly generated by a supported activity or earned as a result of the ARP/CSLFRF Award during the period of performance, which closes December 31, 2026. 2 C.F.R. § 200.1.

Program income includes, but is not limited to, the following sources of income:

- The collection of fees for services performed.
- Payments for the use or rental of real or personal property.
- The sale of commodities or items fabricated under the Federal award.
- The payment of principal and interest on loans made under the Federal award.

Program income does not include fees or revenue from the following:

- The use of rebates, credits, discounts, and interest earned on any of them.
- Governmental revenues, such as taxes, special assessments, levies, or fines.
- Proceeds from the sale of real property, equipment, or supplies.³

IV. USE OF PROGRAM INCOME

2 C.F.R. § 200.307(e) sets forth three methods for how program income may be accounted for: the deduction method, the addition method, and the cost sharing/matching method. Treasury has indicated that program income earned pursuant to expenditures of Funds shall be accounted for pursuant to the addition method. CHA agrees to add program income to the total award amount and expend it on eligible projects during the period of performance.⁴

V. REPAYMENT OF PRINCIPAL AND INTEREST ON LOANS MADE WITH ARP/CSLFRF FUNDS

Treasury has imposed different requirements on loans of Funds under the revenue loss category and loans of Funds under other expenditure categories. CHA agrees to appropriately account for the repayment of loaned Funds according to the ARP/CSLFRF Award terms, as follows:

- (1) Loans made under the revenue loss eligibility category.** Loans of Funds under the revenue loss eligibility category may be considered to be expended at the point of disbursement to the borrower, and repayments on such loans are not subject to program income requirements.⁵ Accordingly, CHA shall not separately account for the repayment of principal and interest on loans of Funds under the revenue loss eligibility category.

³ 2 C.F.R. Section 200.1 and 2 C.F.R. Section 200.307 each define and limit the sources of program income.

⁴ Treasury updated its guidance on 4/27/2022 to clarify that the addition method applies to all program income generated from the ARP/CSLFRF Award expenditures. The addition method allows units to spend program income on any other ARP-eligible project.

⁵ Final Rule FAQ 4.9.

(2) Non-revenue loss loans (i.e., loans made under the public health emergency/negative economic impacts category and/or the necessary water, sewer, and broadband infrastructure category)

- a. **Loans that mature or are forgiven on or before December 31, 2026:** CHA shall add the repayment of principal and interest (program income) to the ARP/CSLFRF Award pursuant to 2 C.F.R. Section 200.317(e)(2). When the loan is made, CHA shall report the principal of the loan as an expense. CHA shall expend the repayment of principal only on eligible uses and is subject to restrictions on the timing of the use of Funds pursuant to the ARP/CSLFRF Award.
- b. **Loans with maturities longer than December 31, 2026:** CHA is not required to separately account for the repayment of principal and interest on loans of Funds with maturities after the ARP/CSLFRF Award's period of performance. CHA shall expend Funds for only the projected cost of the loan. CHA shall project the cost of the loan by estimating the subsidy cost according to one of the calculation methods outlined in Treasury's Final Rule FAQs, question 4.9 (updated 4/27/22).

(3) Contributions to revolving loan funds: CHA may contribute funds to a revolving loan fund if the loaned Funds are restricted to financing eligible uses. The amount of Funds contributed to a revolving loan fund must be limited to the projected cost of loans made over the life of the revolving loan fund, following the approach described above for loans with maturities longer than December 31, 2026.

- a. Any contribution of CSLFRF revenue loss funds to a revolving loan fund shall follow the approach of loans funded under the revenue loss eligible use category outlined in Section V, paragraph 1.⁶

VI. ALLOCATION OF PROGRAM INCOME

CHA shall only expend program income on costs that are reasonable, allocable, and allowable under the terms of the ARP/CSLFRF Award.⁷ To adhere to these requirements, CHA shall comply with the cost principles included in 2 C.F.R. § 200, as outlined in CHA's Cost Principles Policy. CHA shall allocate program income to the ARP/CSLFRF Award in proportion to the pro rata share of the total funding (e.g., if Funds cover half of a project's cost, with general revenue covering the other half, the unit shall allocate 50% of any program income earned to the ARP/CSLFRF Award and account for its use pursuant to 2 C.F.R. § 200.307).

VII. ADDITIONAL PROGRAM INCOME REQUIREMENTS

- (a) **Identifying, Documenting, Reporting, and Tracking.** To ensure compliance with the requirements of program income as outlined by the Federal regulations, the terms and conditions of the ASP/CSLFRF Award, and the requirements set forth herein, each

⁶ *Id.*

⁷ 2 C.F.R. § § 200.404, 408.

department shall identify potential sources of program income and properly report the program income for the period in which it was earned and dispersed.

Program income shall be accounted for separately. CHA shall not comingle program income earned from programs supported by Funds with the general award of ARP/CSLFRF Funds the CHA received from Treasury. Any costs associated with generating program income revenue shall be charged as expenditures to the ARP/CSLFRF Award.

- (b) **Program Income Earned After the Period of Performance.** CHA shall have no obligation to report program income earned after the period of performance (December 31, 2026). However, CHA shall report program income expended after the period of performance if that program income was earned on or before December 31, 2026.
- (c) **Subawards.** CHA agrees to ensure that any subrecipient of Funds abides by the award of the terms and conditions of this policy and is aware that the subrecipient is responsible for accounting for and reporting program income to CHA on a quarterly basis.
- (d) **Compliance with State law.** Program income shall not be expended for purposes prohibited under State law.
- (e) **Subject to Audit.** CHA recognizes that its use of program income may be audited and reviewed for compliance with Federal laws and regulations, State law, and the terms of the ARP/CSLFRF Award.

VIII. IMPLEMENTATION OF POLICY

CHA’s Finance Director or designee will adopt procedures to identify potential program income during the project eligibility and allowable cost review, document actual program income, and follow the requirements in this policy related to the treatment of program income.

Date

Board Chairman

SUBJECT: PROPERTY MANAGEMENT POLICY RELATED TO ARP/CSLFRF AWARD**EFFECTIVE DATE:** October 25, 2022**REVISION DATE:** October 25, 2022;**REVIEW DATE:** September 5, 2023, August 20, 2024; August 19, 2026**POLICY STATEMENT:**

WHEREAS the Public Health Authority of Cabarrus County *d.b.a.* Cabarrus Health Alliance (hereinafter referred to as “CHA”), has received an allocation of funds from the Coronavirus State and Local Fiscal Recovery Funds of H.R. 1319 American Rescue Plan Act of 2021 (hereinafter “ARP/CSLFRF” or “Funds”); and

WHEREAS the Funds may be used for projects within these categories, to the extent authorized by state law.

1. Support COVID-19 public health expenditures, by funding COVID-19 mitigation and prevention efforts, medical expenses, behavioral healthcare, preventing and responding to violence, and certain public health and safety staff;
2. Address negative economic impacts caused by the public health emergency, including economic harms to households, small businesses, non-profits, impacted industries, and the public sector;
3. Replace lost public sector revenue, using this funding to provide government services to the extent of the reduction in revenue experienced due to the pandemic;
4. Provide premium pay for essential workers, offering additional support to those who have borne and will bear the greatest health risks because of their service in critical infrastructure sectors; and,
5. Invest in water, sewer, and broadband infrastructure, making necessary investments to improve access to clean drinking water, support vital wastewater and stormwater infrastructure, and to expand access to broadband internet; and

WHEREAS the Funds are subject to the provisions of the federal Uniform Grant Guidance, 2 CFR § 200 (hereinafter “UG”), as provided in the Assistance Listing; and

WHEREAS the Compliance and Reporting Guidance for the State and Local Fiscal Recovery Funds (v3.0 February 2022) provides, in relevant part:

Equipment and Real Property Management. Any purchase of equipment or real property with Funds must be consistent with the UG. Equipment and real property acquired under this program must be used for the originally authorized purpose. Consistent with 2 CFR § 200.311 and 2 CFR § 200.313, any equipment or real property acquired using Funds shall vest in the non-Federal entity. Any acquisition and maintenance of equipment or real property must also be in compliance with relevant laws and regulations.

WHEREAS Subpart D of the UG dictates title, use, management, and disposal of real property, equipment, and supplies acquired in whole or in part with Funds;

BE IT RESOLVED that the governing board of CHA hereby adopts and enacts the following UG Property Management Policy for the expenditure of Funds.

Property Standards for Real Property, Equipment, and Supplies Acquired with American Rescue Plan Act of 2021 Coronavirus State and Local Fiscal Recovery Funds

I. POLICY OVERVIEW

The UG, specifically Subpart D, details post award requirements related to property management of property acquired or updated, in whole or in part, with Funds.

2 CFR § 200.311 through 2 CFR § 200.316 detail property standards related to the expenditure of Funds. CHA, shall adhere to all applicable property standards, as detailed below.

II. DEFINITIONS

The definitions in 2 CFR § 200.1 apply to this policy, including the following:

Computing devices: machines used to acquire, store, analyze, process, and publish data and other information electronically, including accessories (or “peripherals”) for printing, transmitting and receiving, or storing electronic information. See also the definitions of supplies and information technology systems in this section.

Equipment: tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by CHA for financial statement purposes, or \$5,000.

Information technology systems: computing devices, ancillary equipment, software, firmware, and similar procedures, services (including support services), and related resources. See also the definitions of computing devices and equipment in this section.

Intangible property: property having no physical existence, such as trademarks, copyrights, patents and patent applications and property, such as loans, notes and other debt instruments, lease agreements, stock and other instruments of property ownership (whether the property is tangible or intangible).

Personal property: property other than real property. It may be tangible, having physical existence, or intangible.

Property: real property or personal property.

Real property: land, including land improvements, structures and appurtenances thereto, but excludes moveable machinery and equipment.

Supplies: all tangible personal property other than those described in the definition of equipment in this section. A computing device is a supply if the acquisition cost is less than the lesser of the capitalization level established by the local government for financial

statement purposes or \$5,000, regardless of the length of its useful life. See also the definitions of computing devices and equipment in this section.

III. REAL PROPERTY

Title to Real Property: Title to real property acquired or improved with Funds vests with CHA. 2 CFR § 200.311(a).

Use of Real Property: Real property acquired or improved with Funds must be used for the originally authorized purpose as long as needed for that purpose, during which time CHA must not dispose of or encumber its title or other interests. 2 CFR § 200.311(b).

Insurance of Real Property: CHA must provide the equivalent insurance coverage for real property acquired or improved with Funds as provided to property owned by CHA. 2 CFR § 200.310.

Disposition of Real Property: When CHA no longer needs real property purchased with Funds for ARP/CSLFRF Award purposes, CHA must obtain disposition instructions from US Treasury. The instructions must provide for one of the following alternatives:

1. CHA retains title after compensating US Treasury. The amount paid to US Treasury will be computed by applying US Treasury's percentage of participation in the cost of the original purchase (and costs of any improvements) to the fair market value of the property. However, in those situations where CHA is disposing of real property acquired or improved with Funds and acquiring replacement real property under the ARP/CSLFRF Award, the net proceeds from the disposition may be used as an offset to the cost of the replacement property.
2. CHA sells the property and compensates US Treasury. The amount due to US Treasury will be calculated by applying US Treasury's percentage of participation in the cost of the original purchase (and cost of any improvements) to the proceeds of the sale after deduction of any actual and reasonable selling and fixing-up expenses. If the ARP/CSLFRF Award has not been closed out, the net proceeds from sale may be offset against the original cost of the property. When CHA is directed to sell property, sales procedures must be followed that provide for competition to the extent practicable and result in the highest possible return.
3. CHA transfers title to US Treasury or to a third party designated/approved by US Treasury. CHA is entitled to be paid an amount calculated by applying the CHA's percentage of participation in the purchase of the real property (and cost of any improvements) to the current fair market value of the property. 2 CFR § 200.311(c).

IV. EQUIPMENT

Title to Equipment: Title to equipment acquired or improved with Funds vests with CHA. 2 CFR § 200.313(a).

Use of Equipment: CHA must use equipment acquired with Funds for the project for which it was acquired as long as needed, whether or not the project continues to be supported by the ARP/CSLFRF Award, and CHA must not encumber the property without prior approval of US Treasury. 2 CFR § 200.313(a)(1)-(2).

When no longer needed for the original project, the equipment may be used in other activities supported by a Federal awarding agency, in the following order of priority:

1. Activities under a Federal award from the Federal awarding agency which funded the original project, then
2. Activities under Federal awards from other Federal awarding agencies. This includes consolidated equipment for information technology systems. 2 CFR § 200.313(c)(1).

During the time that equipment is used on the project for which it was acquired, CHA must also make equipment available for use on other projects or programs currently or previously supported by the Federal Government, provided that such use will not interfere with the work on the project for which it was originally acquired. First preference for other use must be given to other programs or projects supported by US Treasury and second preference must be given to programs or projects under Federal awards from other Federal awarding agencies. Use for non-federally-funded programs or projects is also permissible. User fees should be considered if appropriate. 2 CFR § 200.313(c)(2).

Noncompetition: CHA must not use equipment acquired with the Funds to provide services for a fee that is less than private companies charge for equivalent services unless specifically authorized by Federal statute for as long as the Federal Government retains an interest in the equipment. 2 CFR § 200.313(c)(3).

Replacement Equipment: When acquiring replacement equipment, CHA may use the equipment to be replaced as a trade-in or sell the property and use the proceeds to offset the cost of the replacement property. 2 CFR § 200.313(c)(4).

Management of Equipment: CHA will manage equipment (including replacement equipment) acquired in whole or in part with Funds according to the following requirements.

1. CHA will maintain sufficient records that include
 - a) a description of the property,
 - b) a serial number or other identification number,
 - c) the source of funding for the property (including the Federal Award Identification Number (FAIN)),
 - d) who holds title,
 - e) the acquisition date,
 - f) cost of the property,
 - g) percentage of Federal participation in the project costs for the Federal award under which the property was acquired,
 - h) the location, use and condition of the property, and
 - i) any ultimate disposition data including the date of disposal and sale price of the property.
2. CHA will conduct a physical inventory of the property and reconcile results with its property records at least once every two years.
3. CHA will develop a control system to ensure adequate safeguards to prevent loss, damage, or theft of the property. Any loss, damage, or theft will be investigated by the CHA or its authorized representative.

4. CHA will develop and implement adequate maintenance procedures to keep the property in good condition.
5. If CHA is authorized or required to sell the property, it will establish proper sales procedures to ensure the highest possible return, in accordance with state and federal law.

Insurance of Equipment: CHA must provide the equivalent insurance coverage for equipment acquired or improved with Funds as provided to property owned by CHA. 2 CFR § 200.310.

Disposition of Equipment: When the equipment is no longer needed for its original ARP/CSLFRF Award purpose, CHA may either make the equipment available for use in other activities funded by a Federal agency, with priority given to activities funded by US Treasury, dispose of the equipment according to instructions from US Treasury, or follow the procedures below. 2 CFR § 200.313(e).

1. Equipment with a per-item fair market value of less than \$5,000 may be retained, sold or transferred by CHA, in accordance with state law, with no additional responsibility to US Treasury;
2. If no disposal instructions are received from US Treasury, equipment with a per-item fair market value of greater than \$5,000 may be retained or sold by the CHA. CHA must establish proper sales procedures, in accordance with state law, to ensure the highest possible return. CHA must reimburse US Treasury for its federal share. Specifically, US Treasury is entitled to an amount calculated by multiplying the current market value or proceeds from sale by the ARP/CSLFRF funding percentage of participation in the cost of the original purchase. If the equipment is sold, US Treasury may permit CHA to deduct and retain from the Federal share \$500 or ten percent of the proceeds, whichever is less, for its selling and handling expenses.
3. Equipment may be transferred to US Treasury or to a third-party designated by US Treasury in return for compensation to CHA for its attributable compensation for its attributable percentage of the current fair market value of the property.

V. SUPPLIES

Title to Supplies. Title to supplies acquired with Funds vests with CHA upon acquisition. 2 CFR § 200.314(a).

Use and Disposition of Supplies: If there is a residual inventory of unused supplies exceeding \$5,000 in total aggregate value upon termination or completion of the ARP/CSLFRF project and the supplies are not needed for any other Federal award, CHA must retain the supplies for use on other activities or sell them, but must, in either case, compensate the Federal Government for its share. The amount of compensation must be computed in the same manner as for equipment. 2 CFR § 200.314(a).

Noncompetition. As long as the Federal Government retains an interest in the supplies, CHA must not use supplies acquired under the ARP/CSLFRF Award to provide services to other organizations for a fee that is less than private companies charge for equivalent services, unless specifically authorized by Federal statute. 2 CFR § 200.314(b).

VI. PROPERTY TRUST RELATIONSHIP

Real property, equipment, and intangible property, that are acquired or improved with Funds must be held in trust by CHA as trustee for the beneficiaries of the project or program under which the property was acquired or improved. US Treasury may require CHA to record liens or other appropriate notices of record to indicate that personal or real property has been acquired or improved with a Federal award and that use and disposition conditions apply to the property. 2 CFR § 200.316.

VII. IMPLEMENTATION OF POLICY

CHA's Finance Director shall adopt procedures to track all real property, equipment, and supplies (collectively, property) acquired or improved in whole or in part with Funds. At a minimum, those procedures must address the following:

- Ensure proper insurance of property
- Document proper use of property
- Working with the Finance Director or designee, record and maintain required data records for equipment
- Conduct periodic inventories of equipment, at least every two years
- Create processes for replacement and disposition of property
- Establish other internal controls to safeguard and properly maintain property

Date

Board Chairman

SUBJECT: CAPITAL ASSET POLICY

EFFECTIVE DATE: August 16, 2022

REVISION DATE:

REVIEW DATE: August 16, 2022; September 5, 2023; August 20, 2024; August 19, 2025

POLICY STATEMENT:

1. CAPITAL ASSETS

To define the criteria for determining capital assets for CHA. A capital asset is tangible in nature and has a useful life longer than one (1) year. A capital asset is classified as land, land improvements, buildings, furniture and equipment, vehicles, and motorized equipment. It is CHA's policy that items of insignificant value or value less than \$5,000.00 are normally expensed instead of being considered a capital asset.

Local governments and public authorities are required by NC General Statute 159-26(b) (8) to maintain "a ledger or group of accounts in which to record the details relating to the general fixed assets of the unit or public authority."

- 1.1 Classification of Capital Assets: Capital assets owned by CHA should be recorded in the accounting records. Accounting classifications of capital assets are as follows:
 - 1.1.1 **Land:** A capital asset account that reflects the value of land and the rights to land owned by the governmental unit. It includes all land held in fee simple and all rights to land that has no termination date.
 - 1.1.2 **Buildings and Building Improvements:** A capital asset account that reflects the acquisition value of permanent structures owned by CHA used to house persons and property. Permanently installed fixtures to or within these structures are considered parts of the structures. The costs of major improvements to structures are included in this account.
 - 1.1.3 **Land Improvements:** A capital asset account that reflects the acquisition value of permanent improvements (other than buildings) that add value to the land or improve the use of the land. Examples of such improvements are: fences, retaining walls, draining systems, sidewalks, parking lots and driveways (Note that when used with capital assets, the terms "improvement" and "betterment" have different meanings. "Improvements" are capital assets permanently attached to the land. "Betterments" are additions to or changes in existing depreciable assets intended to increase their efficiency or prolong their useful lives.)

- 1.1.4 **Equipment, Vehicles and Furniture:** A capital asset account that reflects the value of tangible property not permanently affixed to real property, used in carrying out the operations of the governmental unit. Examples of equipment are machinery, furniture and vehicles.
- 1.1.5 **Construction in Progress:** A capital asset account that reflects amounts expended on an incomplete building or other capital construction project. When the project is complete, the cumulative costs are transferred to another appropriate capital asset account.
- 1.2 Valuation of Capital Assets: Capital assets should be accounted for at cost or if the cost is not practicably determinable, at estimated historical cost. Donated capital assets should be recorded at their estimated fair market value when received. Valuations considerations by category of capital assets include:
 - 1.2.1 **Land:** If the land is purchased, the valuation includes such costs as purchase price, legal fees, filling and excavation, and other costs directly related to the acquisition of the land and its preparation for use. Rights-of-way and easements are recorded at purchase cost plus legal costs. If land is acquired as a gift (donation), the valuation recorded should be the appraised value at the time of acquisition. Proceeds from the salvaging of any assets removed from the land reduce the land's value.
 - 1.2.2 **Buildings and Building Improvements:** If purchased or constructed, the valuation of buildings includes such costs as the purchase price, acquisition legal fees, and other professional fees (related to design or construction). If acquired as a gift (donation), the valuation recorded should be the appraised value at the time of acquisition.
 - 1.2.3 **Land Improvements:** The basis for valuation is the same as for buildings and building improvements.
 - 1.2.4 **Equipment, Vehicles and Furniture:** The basis for valuation of purchased equipment includes the net contract price, transportation charges, and the cost of installing special devices or other preparations required to ready the asset for its intended use. The basis for valuation of donated equipment is the appraised value at the date acquired.
- 1.3 Accounting for Capital Assets
 - 1.3.1 Capital assets transactions arrive primarily from acquisitions and disposals of capital assets. These transactions appear first in the expenditure ledger as purchases. It is important that capital assets' records be maintained once they have been established.

1.4 Capital Assets' Inventory

1.4.1 The existence and condition of all capital assets should be verified at least annually by each department. Any discrepancies discovered should be brought to the attention of the Purchasing Agent for correction.

1.5 Recording Capital Assets: CHA may acquire capital assets by several methods. Possible acquisition methods include the following: purchase, lease-purchase, installment purchase, construction, eminent domain, tax foreclosures, and gifts donations). Listed below are the categories in which we record assets at CHA

1.5.1 **Land:** All land and permanent rights to land (e.g., easements) should be recorded without regard to value.

1.5.2 **Buildings and Building Improvements:** All buildings should be recorded at acquisition cost without regard to significant value. Additions costing \$5,000.00 or more should be recorded as capital assets.

1.5.3 **Land Improvements:** Improvements other than buildings that cost \$5,000.00 or more should be recorded as capital assets (e.g., parking lots, sidewalks, and fences).

1.5.4 **Equipment, Vehicles and Furniture:** Equipment (aggregate and used together as one) costing \$5,000.00 or more should be recorded as capital assets.

1.5.5 **Construction in Progress:** All costs incurred in the construction of buildings or other capital construction projects which have not been completed by the end of the fiscal year should be capitalized.

When CHA decides to increase the dollar value for capitalization, all old assets not meeting the new requirement should be removed from the capital assets records.

1.6 Controlling Capital Assets

1.6.1 Each month Capital Assets will be updated by the CFO or designee. Any department with changes in their Capital Assets listing will receive a report which indicates the changes made. For any addition (excluding transferred items which will already be tagged) made to a department, a tag will also be sent that should be attached to the asset.

1.6.2 At least annually, a current Capital Asset report will be submitted to each department, listing all assets maintained by the respective department. The report should be reviewed upon receipt. Each Department Head should assign a person to assume responsibility for that department's capital assets. This person should physically identify the capital asset in the appropriate place. This person should also be responsible for informing the Purchasing Agent of any transfers, to another department or to surplus for disposal/auction or if any item is no longer utilized and might be useful in another department.

1.6.3 Any time a department wishes to transfer a capital asset to another department, or to surplus, an e-mail must be sent to the Purchasing Agent.

The basic information needed for each asset is the original department location, description, serial number, tag number, destination department/surplus and date of transfer.

1.7 Replacement Plan for Capital Assets

- 1.7.1 Department Heads and/or their designee will evaluate the capital assets for their respective departments, at least annually, to determine if and when the assets will need to be replaced. Replacement items will be requested on the annual budget Capital Outlay Justification form for approval. However, if an asset breaks, becomes hazardous, and/or not useable at any time, the process to “Purchase Capital Outlay Not Included in the Budget”, (Section 25), will be followed.
- 1.7.2 The Facility Manager will monitor agency fleet to determine when replacement is necessary. The 100,000-mile odometer reading is the target for replacement. However, if there is a vehicle that is not repairable, hazardous, or not cost-efficient to repair will be replaced according to the “Purchase Capital Outlay Not Included in the Budget”, (Section 25).

1.8 Disposal of Capital Assets

- 1.8.1 Capital Assets will be disposed of in accordance with NC General Statute 160A- Article 12: Sale and Disposition of Property

2 PURCHASE OF CAPITAL OUTLAY NOT INCLUDED IN BUDGET

To establish budget authorization to make a capital outlay purchase that was not part of the adopted or amended budget. Authorization must be obtained by the CEO and/or CFO before the purchase is authorized.

- 2.1 Submit request to CEO and/or CFO.
2.2 Upon approval, submit a budget revision for approval.
2.3 If approved, follow the purchasing procedures required based on the amount/type of purchase.

Date

Board Chairman

SUBJECT: MOBILE PHONE STIPEND POLICY

EFFECTIVE DATE: July 1, 2009

REVISION DATE: August 11, 2009; July 26, 2010; February 28, 2014; September 29, 2014; December 30, 2017; October 31, 2019; October 28, 2020; September 13, 2021; August 16, 2022, August 19, 2025

REVIEW DATE: August 11, 2009; July 26, 2010; December 8, 2011; December 31, 2012; February 28, 2014; September 29, 2014; December 30, 2015; December 30, 2016; December 30, 2017; December 30, 2018; October 31, 2019; October 28, 2020; September 13, 2021; August 16, 2022; September 5, 2023; August 20, 2024, August 19, 2025

POLICY STATEMENT: The purpose of this policy is to establish guidance for determining eligibility and a process for receiving a mobile phone stipend for employees conducting CHA business on a personal device.

Mobile phone technology is a valuable communication tool and is integral to the operations of CHA. The voice functionality of mobile phones combined with other mobile phone features, such as email, messaging and access to numerous online resources, establishes the mobile phone as a necessary and effective tool for certain employees of CHA.

Due to the possibility of protected health information (PHI) being stored on a personal mobile communications device, employees must review and adhere to the IT Policy IT-113 Mobile Devices for CHA Business Purposes regarding proper usage and security.

APPLICABILITY

All CHA employees required to purchase and carry a mobile phone as part of their job duties are subject to this policy. This policy is effective July 1, 2009 and supersedes all previous mobile phone policies. The CEO and/or designee, and the Chief Finance Officer (CFO) have the authority to make exceptions to this policy for employees (within IRS regulations).

STIPENDS FOR EMPLOYEE-OWNED MOBILE PHONES

CHA will determine positions required to purchase and carry mobile phones to fulfill their current job requirements. Managers must establish the need for a mobile phone and/or Smartphone functionality for each employee. The Information Technology (IT) Department may be consulted by the manager to assist in decision making. All requests for mobile service or benefits must be approved by the agency CEO and/or designee.

- Employees are paid a taxable stipend in each paycheck. Levels of stipends are described below and are dependent on the required level of accessibility/availability:
 - o \$20.00 - Part time employees who are expected to answer calls, teams and emails during work hours.
 - o \$30.00 - Full time employees who are expected to answer calls, teams and emails during work hours.

- o \$40.00- Full time employees who are expected to answer calls, teams and emails during work hours and within a reasonable time period outside of work hours.
- Employees should **not** use personal cell phones for CHA business and are not expected to answer text messages. Employees are expected to reply to such text messages on a CHA approved method - Teams message, email, or phone call.
- Employees purchase a phone and plan of their choice as long as it meets minimum criteria identified by the supervisor necessary for the specific job of the recipient.
- Employees agree to allow CHA to publish their number internally for business purposes and to accept business calls and/or messages while receiving a stipend.
- Employee and carrier are responsible for technical support of the phone, plan, and functionality.
 - o The IT Department may be consulted to help setup the interface to CHA email and other CHA systems and to assist with occasional questions.
- Employee must retain an active mobile phone contract as long as a mobile phone stipend is in place. A copy of the invoice may be requested yearly to verify the plan is active.
- Employee will be responsible for all costs related to the phone including replacement, accessories, insurances, etc.
- If for any reason CHA should terminate an employee's mobile phone stipend, CHA shall not be responsible for any costs or fees associated with ongoing service costs or contract termination fees.
- Stipend rates will be reviewed at least annually by the CFO to determine if stipend amounts are appropriate.
- Stipends can be discontinued or paid at a lower rate if phone calls and emails are not answered during the agreed upon hours as determined by the supervisor.
- Stipends can be prorated based on hours worked. For instance, a full-time employee may receive half the stipend amount if they worked only 40 hours before terminating employment or before going out on FMLA leave.
- If mobile phone stipends are discontinued for budgetary reasons, a 90-day notice of such termination will be given by CHA to stipend recipients.

PROCEDURES TO BE FOLLOWED:

When an employee is required to purchase and carry a mobile phone as part of their position responsibilities, the employee will complete a Mobile Phone Stipend Form (Exhibit I) on the CHA intranet with the required information. As explained, the Form should be forwarded to their supervisor for approval/signature and then to Finance for review and processing. The form must include the mobile phone number assigned to the phone and the name of the carrier supplying the service. The IT Department will be available to help setup Smartphones to interface to the CHA network.

Employees that will have the ability to access their email, calendar, and contacts on their mobile device must be aware, review and adhere to the IT Policy IT-113 Mobile Devices for CHA Business Purposes regarding proper usage and security.

If an employee is out of work for more than 30 days, their phone privileges must be suspended. The employee's stipend would be suspended. Human Resources will notify the parties responsible when these situations arise.

All employees who wish to receive mobile phone privileges from CHA under this policy must agree to abide by all of the provisions of this policy. Any employee found to be out of compliance with the provisions of this policy may have their mobile phone privileges revoked and be subject to other disciplinary measures.

STANDARD CHA OWNED PHONE

CHA may purchase mobile phones in situations where the phone is assigned for functions where more than one employee shares a phone. CHA may purchase mobile phones for employees. Mobile phones will be purchased for certain functions, e.g. mobile units, on-call referrals, etc. where deemed necessary.

- Personal calls are prohibited unless it is considered an emergency.
-
- Employees will be held primarily responsible for complying with the Mobile Phone Policy. (Department managers with shared phones should develop their own internal mobile phone review process.
-

DEFINITIONS

Standard Phone: A mobile phone with the standard features to allow voice calling.

Stipend: A taxable sum of money paid on a regular basis included in an employee's paycheck.

Smartphone: A mobile phone offering advanced capabilities beyond a typical mobile phone, often with PC-like functionality. These advanced capabilities usually include email and Internet functionality and normally require a data package to be purchased with the service provider's plan. At a minimum the Smartphone must be capable of sending and receiving messages through CHA's email server.

Personal Call: A call made by a CHA employee that is personal in nature and not related to CHA business. The term personal call also includes personal text messages or emails.

Emergency Personal Call: An infrequent personal call that is of an urgent nature where using a CHA owned mobile phone is the best option available.

Date

Board Chairman



BYLAWS OF THE
PUBLIC HEALTH AUTHORITY OF CABARRUS COUNTY

ARTICLE I.

Name, Seal and Offices

1. Name. The name of the Public Health Authority of Cabarrus County (the “Authority” or “Public Health Authority of Cabarrus County”) is set forth in the Articles of Incorporation of the Authority (the “Articles”) as the “Public Health Authority of Cabarrus County.” The Authority may also be referred to generally as “Cabarrus Health Alliance” or “CHA” and the Authority is authorized to file such assumed name certificates in that name in Cabarrus, Rowan and such other counties as may be advisable or required by law.
2. Seal. The corporate or official seal of the Authority shall consist of a circle inside of which is inscribed the name of the Authority and in the center of which shall be the established date of 1997 and the words “official seal”.
3. Offices. The principal office of the Authority shall be 300 Mooresville Road, Kannapolis, North Carolina 28081, or at such other place as the Commissioners of the Authority may from time to time provide (the “CHA Office”).

ARTICLE II.

Appointment, Tenure, Resignation and Replacement of the Commissioners

1. Membership.
 - (a) The members of the Authority shall be appointed as provided by the North Carolina Hospital Authorities Act, i.e. Part B of Article 2 of Chapter 131E of the General Statutes of North Carolina, as amended (the “Act”), the Articles of the Authority, and these Bylaws.
 - (b) There shall be nine (9) members of the commission of the Authority (the “Commission”) and each member of the Authority shall be called a Commissioner of the Authority (a “Commissioner”).
 - (c) Commissioners shall be appointed and removed as follows:
 - (i) All appointments of Commissioners shall be for three (3) year terms. Vacancies from resignation or removal from office shall be filled for the unexpired portion of the term. Except as set forth below, no Commissioner shall serve more than two (2) consecutive full or partial terms without at least a one (1) year respite between the dates of leaving the Commission and taking office for another term. The Commission may waive the term limit and/or the one (1) year respite for one or more Commissioners and allow him or her to serve one or more additional terms upon the recommendation of the Nominating Committee and for good and specific cause shown and reflected in the meeting minutes of the Commission. These term limits shall not apply to the individuals serving on behalf of the Board of Commissioners of Cabarrus County and Atrium Health-Cabarrus, who may (but are not required to) remain as Commissioners for so long as they serve in such capacities for each of Cabarrus County and Atrium Health-Cabarrus.

- (ii) Commissioners may be removed, in accordance with Section 131E-22 of the Act, by the Chairman of the Board of Commissioners of Cabarrus County with the advice of the Commission as well as of the Board of Commissioners of Cabarrus County.

- (iii) The Commission shall appoint a Nominating Committee (the “Nominating Committee”) to recommend individuals suitable for consideration by the Commission for future appointment to the Commission. The Nominating Committee shall be comprised of the Clerk to the Commission, at least one (1) Commissioner, and at least one (1) other person who need not be a Commissioner. The Nominating Committee shall research and recommend potential candidate(s) in writing for each seat on the Commission which is vacant or may be coming vacant in the near future. Such candidates shall be considered by the Commission, along with any other individuals who may be suggested by the Commission. The Commission shall then approve and prepare the list of approved candidates, which shall then be provided to the Chairman of the Board of Commissioners of Cabarrus County for appointment as provided in Article II, Section 3 below.

- (iv) Candidates for membership on the Commission shall be chosen as follows:
 - (1) Candidates shall have significant knowledge, expertise or professional experience in the fields or businesses generally engaged in by the Authority. Due consideration shall be paid to appointing a Commission which is diverse in this regard. For example, if the member appointed by the hospital system as provided below is an infectious disease specialist, then appointing another infectious disease specialist should be avoided if possible in favor of a person with experience in, for example, mental health, or some other field in which the Authority engages which may not be otherwise then currently represented on the Commission. Multiple appointees from the same organization or affiliation should be avoided to the extent reasonably possible.

 - (2) Due consideration shall be given to appointing a Commission which is diverse in its overall makeup with regard to gender, ethnicity, and geographic location of residence within the areas the Authority serves.

 - (3) The Commission has historically and in accordance with its Articles been composed of members representing certain fields or organizations. Due to the passage of time and changes in such organizations, many of these organizations no longer exist. The matters engaged in by the Authority have also changed over time. Therefore, in consideration of these factors, the Commission shall now consist of members representing the following fields or organizations:
 - (a) One (1) member who is a practicing dentist or has previously practiced dentistry in Cabarrus County.

 - (b) One (1) member with significant knowledge, expertise and professional experience in the field of infectious diseases.

 - (c) One (1) member who is a currently or previously practicing physician in the field of family medicine, internal medicine or community health

whose primary practice is/was located in Cabarrus County.

- (d) One (1) representative of the Cabarrus County School System or Kannapolis City School System, which shall alternate no less often than every two (2) terms.
 - (e) One (1) member of the Board of Commissioners of Cabarrus County.
 - (f) One (1) member appointed by the local governing or advisory board of the main hospital located in Concord, currently known as Atrium Health-Cabarrus.
 - (g) Three (3) public members with significant interest, knowledge, expertise or professional experience in the fields or businesses generally engaged in by the Authority, and especially the fields of community health, mental health, and/or other areas of community concern as identified by the periodic community needs assessment conducted by the Authority along with its community partners.
- (d) Commissioners who have served at least ten (10) years in the aggregate may request emeritus status. This status would be granted by the existing Commission. After leaving the Commission as an active Commissioner, emeritus status shall allow the former Commissioner to sit at the Commission table during meetings, to participate in discussions, to represent the Commission as directed, but not to vote. Emeritus status shall not preclude subsequent appointment to future terms as an active, voting Commissioner, but the one (1) year respite period set forth in Article II, Section 1(c)(i) above shall apply between any emeritus term and any subsequent active voting appointment.
2. Resignation. Any Commissioner may resign from membership of the Commission at any time by giving written notice of such resignation to the Authority and to the Chairman of the Board of Commissioners of Cabarrus County. Notwithstanding any resignation, a Commissioner shall continue to hold office until his or her successor has been appointed, qualified and taken office, unless the Commission takes action to make a resignation effective as of a different date.
 3. Vacancies. Any vacancy in the membership of the Authority shall be filled for any new or unexpired term by the Chairman of the Board of Commissioners of Cabarrus County, with the advice of the Board of Commissioners of Cabarrus County, from a list of nominees supplied by the Commission as set forth in Article II, Section 1(c) above. Every effort shall be made to fill any vacant or resigned seat within ninety (90) days of the vacancy or the resignation giving rise to the vacancy.
 4. Oath of Office. Each Commissioner, before entering upon his or her duties as a member of the Authority, shall take and subscribe an oath of affirmation to support the Constitution of the United State and of the State of North Carolina and to discharge faithfully the duties of his or her office as Commissioner, and a record of each oath or affirmation shall be filed with the Secretary of the Authority and kept among its official documents.

ARTICLE III.

Meetings

1. Annual Meetings. Annual meetings of the Commissioners shall be held in August of each year at the time and place designated in the notice of the respective annual meeting. Written notice of the time and place of each annual meeting shall be given by the Secretary or Chairman of the Commission to each Commissioner not less than (10) days prior to the date of such annual meeting.
2. Regular Meetings. The Commissioners may establish a schedule of regular meetings to be held on a monthly basis, but regular meetings shall be held at least once per quarter. No notice of the purpose or purposes of a regular meeting shall be required to be given to the Commissioners, and all business of the Authority may be transacted at such meeting, provided a quorum is in attendance. Regular meetings shall be held on Tuesday evenings at the CHA Office.
3. Special Meetings and Emergency Meetings. Special meetings and emergency meetings of the Commissioners may be called by the Chairman or Vice-Chairman of the Commission. At special meetings, only action reasonably related to the matters described in the notice of the special meeting may be taken.
4. Notice of Meetings. Notice of each meeting (regular, special or emergency) shall be given in accordance with the requirements of Section 143-318.12 of the General Statutes of North Carolina, as amended, as well as the requirements of this Article III.
5. Agenda. The Secretary or Clerk, or its designee, shall prepare an agenda for each meeting. Any Commissioner who wishes to place an item of business on the agenda shall submit a request to the Secretary or Clerk at least ten (10) business days before the Commission meeting. For regular meetings, the Commission may add items to the agenda or subtract items from the agenda by a majority vote. The agenda for a special or emergency meeting may be altered only if permitted by and in accordance with Article 33C of Chapter 143 of the North Carolina General Statutes, as amended (the "Open Meetings Statute").
6. Minutes. The Secretary or Clerk, or its designee, shall prepare full and accurate minutes of each Commission meeting. Copies of the minute shall be made available to each Commissioner before the next regular Commission meeting. At each regular meeting, the Commission shall review the minutes of the previous regular meeting as well as any special or emergency meetings that have occurred since the previous regular meeting, making any necessary revisions and approving the minutes as originally drafted or as revised. The public may obtain copies of the minutes of the meetings of the Commission as allowed under the Open Meetings Statute.
7. Quorum. A majority of the membership of the Commissioners shall constitute a quorum, including any vacant seats, and the affirmative vote of a majority of all present and constituting a quorum shall constitute official action taken by the Commission on behalf of the Authority.

If at any meeting there is less than a quorum present, a majority of the Commissioners present may adjourn the meeting to a later date and time no less than one (1) day nor more than ten (10) days from the date of the original meeting, with reasonable notice of the rescheduled meeting provided to any absent Commissioner, with no further official notice of any kind being necessary except as

may otherwise be required by law.

8. Meetings to be Open to the Public.

Subject only to lawfully recognized exceptions, all official meetings of the Commissioners, including committee meetings, shall be conducted openly and otherwise in compliance with the Open Meetings Statute.

At each meeting of the Commissioners, the presiding officer shall devote an agenda item to hearing petitions and requests to the Commissioners from the public. When this agenda item is reached, the presiding officer shall determine whether any member of the public wishes to petition or make any request of the Commissioners, and the Commissioners may hear petitions and requests for such period as they deem appropriate. Reasonable time limitations may be placed upon such speakers by the presiding officer.

The Commissioners encourage public attendance at all of their meetings. Only such discussion or participation by visiting persons as is invited by consent of the Commissioners shall be permitted at times other than when petitions and requests are being heard.

9. Duty to Vote. No Commissioner shall be excused from voting, except on matters involving consideration of his or her own official conduct or when such Commissioner is excused or recused from voting when a Commissioner has a defined conflict pursuant to the Conflict of Interest Policy adopted by the Authority.
10. Other Operating Procedures. The Commission shall refer to the current edition of *Robert's Rules of Order Newly Revised* to answer procedural questions not addressed in these Bylaws, so long as such procedures prescribed do not conflict with North Carolina law.

ARTICLE IV.

Officers

1. Designation. The officers of the Authority shall be a Chairman, a Vice-Chairman, and a Secretary. Only the Chairman and Vice-Chairman are required to also be Commissioners of the Authority.
2. Election and Terms. The officers provided for in Article IV, Section 1 shall be elected at each annual meeting of the Commissioners and shall hold office until the next annual meeting or until their successors are elected, qualified, and take office.
3. Officer Succeeding Self. Any officer may be elected by the Commissioners to succeed himself or herself in office, provided that the requirement that the Chairman and Vice-Chairman also be members or Commissioners of the Authority be observed.
4. Chairman. The Chairman shall preside at all meetings of the Commissioners and shall have and exercise such authority and perform such duties as shall be determined by the Commissioners.
5. Vice-Chairman. At the request of the Chairman, or in the event of the absence or disability of the Chairman, the Vice-Chairman shall perform the duties and possess and exercise the authority of

the Chairman; and the Vice-Chairman shall have such other powers and exercise such other authority and perform such other duties as shall be determined by the Commissioners.

6. Secretary. The Secretary, or the Secretary's appointed designee, which may be the Clerk to the Commission, shall have charge of such books, documents and papers as the Commissioners may determine and shall have the custody of the corporate or official seal. The CEO shall serve as the Secretary of the Commission. The Secretary, or appointed designee, shall attend and keep the minutes of all the meetings of the Commissions. The Secretary shall keep a record of the names of all persons who are Commissioners, the dates of their appointments and dates of expiration of their terms, and their places of residence, and such record shall be open for inspection as prescribed by law. The Secretary, or Clerk to the Commission, shall notify in writing the Chairman of the Commission at least ninety (90) days prior to the expiration of the term for which a Commissioner was appointed so that the Commission may have time to propose the reappointment of such person or to undertake the nomination process as set forth in Article II hereof. The Secretary shall, in general, perform all duties incident to the office of Secretary, subject to the control and direction of the Commissioners, and shall perform such other duties as may be determined by the Commissioners.

7. Removal from Office.

(a) Grounds. Any officer provided for in Article IV, Section 1 who is also a Commissioner of the Authority may be removed from his or her office (but not from being a Commissioner of the Authority) by the Commissioners:

- (i) For mental or physical incapacity to perform properly and adequately the duties and functions of the respective office;
- (ii) For repeated absence from meetings of the Commissioners or from the offices of the Authority or meetings of committees of the Commissioners to the extent that such absences constitute gross neglect in the performance of the duties of such office to the inconvenience, damage or disadvantage of the Authority in carrying on its functions and purposes;
- (iii) For any act of dishonesty;
- (iv) For any act or series of acts or omissions which are contrary to the best interests of the Authority and tend to impede or obstruct the carrying on of its functions and purposes in an orderly manner, or
- (v) For any other cause which is deemed less than reasonably satisfactory performance of the duties and function of such office.

(b) Procedure. In the event, the Commissioners for any reason request the resignation of an officer to which subsection (a) above applies and such request is declined, the Commissioners may by resolution state the grounds upon which they claim such officer should be removed from office, and such statement shall be served upon such officer at least ten (10) days prior to a meeting at which action is to be taken thereon. Such officer is entitled to be present at such hearing and be heard if he or she so desires and is also entitled to offer such evidence as he or she may deem appropriate in response to the statement

served upon such officer. The decision of the majority of the Commissioners in such matter shall be final.

ARTICLE V.

Personnel

1. General. The Commission may employ such personnel as may be necessary or convenient in carrying out the objectives and purposes for which the Authority was created, define their duties and functions and set their terms of employment, such as compensation, fringe benefits, separation from service arrangements, and other pertinent details.
2. CEO. The Commissioners shall employ a Chief Executive Officer ("CEO"), who shall also serve as the Public Health Director. The CEO shall be responsible for the efficient administration of the operations of the Authority and shall carry out the policies and directives of the Commissioners and is authorized to sign those documents as may from time to time be approved by the Commission. The CEO shall serve as the Secretary of the Commission. The CEO or her designee shall attend all official meetings of the Commissioners and, when requested, all committee meetings of the Commissioners, shall be entitled to notice of all meetings, and shall be entitled to take part in discussions of matters before the Commissioners but shall have no vote. The CEO shall be responsible for obtaining and furnishing to the Commissioners financial and other reports as may be required by the Commissioners, and he or she shall recommend to the Commissioners from time to time such measures as he or she shall deem necessary or advisable. The CEO shall be responsible for the preparation and submission to the Commissioners of the proposed annual budget, shall keep the Commissioners informed as to the financial needs and condition of the Authority and shall perform such other duties as may be determined by the Commissioners.
3. Professional Assistance. The Commissioners may employ or engage such accountants, engineers, legal counsel and other professional experts for assistance as they may determine to be necessary or advisable and fix and determine the terms of such employment or engagement.

ARTICLE VI.

Compensation/Expenses

1. Compensation of Commissioners. For their services as Commissioners, the Commissioners shall receive no compensation.
2. Expenses. Commissioners shall be entitled to reimbursement for the amount of actual necessary expenses including travel expense incurred by them in the discharge of their duties, and the Commissioners may make policies concerning such reimbursement.
3. Compensation of Persons Other Than Commissioners. Any officer, agent or employee of the Commissioners or the Authority, other than a Commissioner, and any professional expert retained by the Commissioners shall receive such compensation and be reimbursed for such expenses as the Commissioners may approve by resolution or otherwise.

ARTICLE VII.

Reports

1. Annual Report. At each annual meeting, the Commissioners shall receive from any person who has been charged with such responsibility a full and accurate report of the operations of the Authority during the preceding fiscal year, the assets and liability of the Authority as of the end of such fiscal year, the financial condition of the Authority as of the end of such fiscal year and any and all other information which may have a significant bearing upon the condition and operation of the Authority. Such report shall include such matters as may be directed by the Commissioners and shall be filed with the minutes of such meeting and be open to inspection by the public.
2. Other Reports. The Commissioners may require the filing of reports other than annual reports on a monthly, quarterly or other basis containing such information in such detail as they may deem appropriate.

ARTICLE VIII.

Contracts

The Commissioners may, except as herein or by law otherwise provided, authorize any officer or other person to enter into any contract or execute and deliver any written instrument in the name of an on behalf of the Authority, and such authority may be general or confined to a specific instance; and unless so authorized by the Commissioners no officer or other person shall have any power or authority to bind the Authority by any contract or engagement or to render it liable pecuniarily for any purpose or in any manner.

ARTICLE IX.

Advisory Committees

1. Committees Generally. The Commissioners may from time to time appoint from among the Commissioners or such other persons as the Commissioners may deem fit one or more advisory committees for recommendatory purposes only. The members of such committees shall serve at the pleasure of the Commission and be disbanded at such time as the Commission may elect. None of the authority or responsibility vested in the Commissioners may be delegated or surrendered to any such committee.
2. Committee Meetings. Any meetings of any committee appointed by the Commission must adhere to the notice requirements, the open meetings provisions and the requirements to keep full and accurate minutes as set forth in the Open Meetings Statute and these Bylaws for meetings of the Commission.
3. Committee Operations. Each committee will be described and follow such operating procedures as set forth in a charter pertaining to the purpose of such committee and approved in form by the Commission.

ARTICLE X.

Fiscal Year

The fiscal year of the Authority shall begin on July 1 and end on the following June 30.

ARTICLE XI.

Amendments

The Commissioners may amend and repeal these bylaws provided that such action shall be taken only at an annual, regular or special meeting of the Commissioners.

Before any amendment or repeal of any bylaw may be made, written notice thereof and of the text of the proposed amendment or repeal shall be given to the Commissioners at least seven (7) days prior to the date of the meeting at which official action with respect thereto is to be taken.

This and the foregoing nine (9) pages contain the amended bylaws adopted by the Commissioners of the Public Health Authority of Cabarrus County on this 20th day of June, 2023.

Chairman of the Commission of Cabarrus Health Alliance

Printed name: Dr. Lara J. Pons, M.D.

Date signed: June 20, 2023

ATTEST:

Raquesha B. Franklin
Clerk to the Board of Cabarrus Health Alliance

Established February 18, 1997

Amended August 14, 2012

Reviewed January 8, 2013

Reviewed February 11, 2014

Reviewed May 12, 2015

Revised May 10, 2016

Revised May 14, 2019

Reviewed and Adopted by the Cabarrus County Board of Commissioners June 17, 2019

Revised August 3, 2020

Revised April 13, 2021

Revised May 17, 2022

Revised June 20, 2023

Public Health Authority of Cabarrus County (“CHA”)

Corporate Resolutions of the Board of Commissioners (the “Board”)

- 001 - Policy Development
- 002 - Chief Executive Officer
- 003 - Annual Fiscal Year
- 004 - Fiscal Management
- 005 - Public Relations & Information
- 005a - Notification of BOH in Event of Emergency
- 006 - Conflict of Interest
- 007 - Fund Management
- 008 - Compensation of Board Members
- 009 - Board Attorney
- 010 - Board Governance Philosophy
- 011 - Payroll Administration
- 012 - Solicitation Policy
- 013 - Incurred but Not Reported Expenses
- 014 - Fleet Policy
- 015 - Provision of Agency Vehicles
- 016 - Fee Policy

Public Health Authority of Cabarrus County

Section No. Admn. 001 Page 1 of 1

SUBJECT: Policy Development

EFFECTIVE DATE: July 1, 1997

REVISION DATE: June 17, 2008; June 20, 2023

REVIEW DATE: May 12, 2009; June 1, 2010; June 14, 2011; February 11, 2014; May 12, 2015;
May 10, 2016; August 8, 2017; August 14, 2018; August 13, 2019;
August 3, 2020; June 14, 2022; June 20, 2023; August 20, 2024; August 19, 2025

Purpose:	To establish methods and guidelines to be followed by the Board and staff in the formulation and establishment of CHA Board policies.
Policy:	It is the policy of the Board to require the Chief Executive Officer to present all matters requiring policy guidance by the Board in written form. The primary responsibility for initiating policy actions rests with the Board and the Chief Executive Officer. The guidelines identified in this policy will be followed by the Board and CHA staff in the development of any CHA Board policies.
Policy Guidelines:	<p>The following procedures will be followed by the Board in carrying out its responsibility for policy planning:</p> <ol style="list-style-type: none">1. All potential issues, problems, concerns (whatever the source) likely to require policy determination will be referred to the Chief Executive Officer.2. The Chief Executive Officer will make an initial determination of whatever applicable policy exists; whether current policy is ambiguous; whether current policy is incomplete or absent.3. The Chief Executive Officer will consider whether the issue, problem, or concern warrants policy determination at the present time.4. The Board may request policy guidance and refer to the Chief Executive Officer to develop draft policy alternatives as well as his/her recommended policy.5. Except in a case of an emergency, the Board will follow the following steps in approving a new policy:<ol style="list-style-type: none">a. The draft policy presented in written format as a consideration item at a Board meeting.b. At the next scheduled Board meeting the draft policy is presented as an action item for the Board.6. The Board has final responsibility for the establishment of CHA policy.7. The Chief Executive Officer is responsible for implementing the policies of the Board.8. The Board shall review and update each administrative policy at least every four (4) years.

Approved: August 19, 2025

Signed: _____
Dr. Lara J. Pons, Board Chairman,
Cabarrus Health Alliance

Date: August 19, 2025

Signed: _____
Erin Shoe, Chief Executive Officer,
Cabarrus Health Alliance

Date: August 19, 2025

Public Health Authority of Cabarrus County

Section No. Admn. 002
Page 1 of 2

SUBJECT: Chief Executive Officer

EFFECTIVE DATE: July 1, 1997

REVISION DATES: June 1, 2010; June 20, 2023

REVIEW DATES: May 12, 2009; February 9, 2010; June 14, 2011; January 8, 2013;
February 11, 2014; May 12, 2015; May 10, 2016; August 8, 2017;
August 14, 2018; August 13, 2019; June 14, 2022; June 20, 2023;
August 20, 2024; August 19, 2025

Purpose:	To state general policies which will guide CHA in its use of a Chief Executive Officer.
Policy:	<p>It is the Board's policy:</p> <ol style="list-style-type: none">1. To employ a Chief Executive Officer and delegate to him/her the authority and responsibility for the overall management of the affairs of CHA in accordance with written Board policies and the Bylaws of CHA. In the absence of written policies, the Chief Executive Officer is guided by an application of Board intent as established in other policies and counseled where appropriate by the officers of the Board.2. To establish a job description for the position of Chief Executive Officer, including appropriate qualifications of education, experience, personal factors, and skills. The Chief Executive Officer shall guide his/her activities by the content and spirit of the job description.3. That the Chief Executive Officer must administer CHA within conformance of a reasonable interpretation of the North Carolina General Statutes.4. That any agreement involving commitment or implicit intent of commitment of credit and good faith beyond a fiscal year is subject to specific prior approval of the Board.5. That the responsibilities of the Chief Executive officer include:<ol style="list-style-type: none">a. The implementation of programs, policies, fiscal plans.b. Performance of management functions which will assure that program services will be available, accessible, acceptable, coordinated to promote continuity of care and meeting appropriate standards.c. Delegation of authority and accountability for program functions to CHA staff who are assigned managerial responsibilities.d. Coordination of information with other governmental and private groups concerned with the planning and delivery of health and social services for which clients of the area are eligible.e. Performance of administrative functions which will provide accountability for funds received and expended and assure that all regulations and requirements are satisfied. Performance of these duties may be delegated to CHA's Chief Financial Officer.f. Management of CHA staff addressing such functions as recruitment, staff development, job descriptions, evaluation, termination, grievance procedures, pension and related employee benefits.

	<ul style="list-style-type: none">g. Use of statistical and other relevant information for determining needs, planning services, monitoring staff and program activity, and evaluating the attainment of objectives.h. To present to the Board issues which may require Board policy statements.i. To approve contracts for services for amounts approved by the Board in the budget ordinance or revision of CHA.j. To approve the purchase of capital equipment approved by the Board in the budget ordinance or revision of CHA.k. To develop the organizational structure for CHA, prepare current organizational charts, and establish lines of communication. <p>6. The Chief Executive Officer will be evaluated on an annual basis. Such evaluation should be done by a committee appointed by the Chairman of the Board and this report may be added in Executive Session of the Board, if needed. The Board will establish criteria upon which such an evaluation will be necessary for a merit raise consideration.</p>
Responsibility:	It is the responsibility of the Board to hire and terminate, if necessary, the Chief Executive Officer. It is the responsibility of the Board to at least every three (3) years review and approve a job description for the Chief Executive Officer.

Approved: August 19, 2025

Signed: _____
Dr. Lara J. Pons, Board Chairman,
Cabarrus Health Alliance

Date: August 19, 2025

Signed: _____
Erin Shoe, Chief Executive Officer,
Cabarrus Health Alliance

Date: August 19, 2025

Public Health Authority of Cabarrus County

Section No. Admn. 003
Page 1 of 2

SUBJECT: Annual Fiscal Year

EFFECTIVE DATE: July 1, 1997

REVISION DATES: June 21, 2005; July 17, 2008; June 20, 2023

**REVIEW DATES: May 12, 2009; June 1, 2010; July 14, 2011; January 8, 2013; February 11, 2014;
May 10, 2016; August 8, 2017; August 14, 2018; August 13, 2019;
August 3, 2020; June 14, 2022; June 20, 2023; August 20, 2024; August 19, 2025**

Background:	The Local Government Budget and Fiscal Control Act (the "Act") requires that the Board approve a budget ordinance prior to the start of each new fiscal year (July 1).
Purpose:	To establish methods and guidelines to be followed by the Board and Chief Executive Officer in the formulation, approval and execution for the annual fiscal plan.
Policy:	<p>It is the policy of CHA Board that:</p> <ol style="list-style-type: none">1. The Chief Executive Officer shall submit to the CHA Board a proposed annual fiscal plan no later than May preceding the start of the new fiscal new year. The proposed plan shall delineate the types of services contracted, the vendors of service, the amount of service contracted for and the amount of funds allocated to each contract. The Board shall review and approve any contracts as outlined in the approved budget ordinance.2. In preparing the fiscal plan, the Chief Executive Officer shall ensure:<ol style="list-style-type: none">a. expenses do not exceed revenues;b. revenue projections are conservative;c. any fund balance budgeted is clearly explained;d. any new services proposed shall correspond to the Board priorities;3. A public hearing on the annual fiscal plan will be held prior to the plan's adoption at the June Board meeting of CHA.4. The CHA Board will adopt a budget ordinance for the annual fiscal plan at the June Board meeting of CHA preceding the start of the new fiscal year. This budget adoption shall be in conformance with the Act. <p>Implementing the Annual Fiscal Plan</p> <ol style="list-style-type: none">1. Following the adoption of the annual fiscal plan by the CHA Board, the Chief Executive Officer is authorized to execute contracts with vendors approved in the fiscal plan.2. The Chief Executive Officer shall ensure that there is a positive cash flow during the fiscal year.3. The Chief Executive Officer may expend two percent (2%) of the budget for capital equipment before needing to request Board approval.4. The Chief Executive Officer shall make every effort to ensure the annual fiscal plan is administered to end the fiscal year with a surplus. <p>Revising the Fiscal Plan</p>

	<ol style="list-style-type: none">1. The CHA Board delegates authority to the Chief Executive Officer to make budget revisions as needed during the year.2. The Board may consider any other revision to the fiscal plan at any CHA Board meeting. <p>Monitoring</p> <p>The Board shall engage the service of a certified public accounting auditing firm to conduct an annual fiscal and compliance audit. Such auditor shall be chosen from a bid process every three (3) years, with an option to extend the term of award without bid process if desired by the Board.</p>
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Approved: August 19, 2025

Signed: _____
Dr. Lara J. Pons, Board Chairman,
Cabarrus Health Alliance

Date: August 19, 2025

Signed: _____
Erin Shoe, Chief Executive Officer,
Cabarrus Health Alliance

Date: August 19, 2025

Public Health Authority of Cabarrus County

Section No. Admn. 004
Page 1 of 2

SUBJECT: Fiscal Management

EFFECTIVE DATE: July 1, 1997

REVISION DATES: June 17, 2008; June 1, 2010; June 20, 2023

REVIEW DATES: May 12, 2009; June 14, 2011; January 8, 2013; February 11, 2014;
May 12, 2015; May 10, 2016; August 8, 2017; August 14, 2018;
August 13, 2019; August 3, 2020; June 14, 2022; June 20, 2023; August 20,
2024; August 19, 2025

Purpose:	To assure the development of a financial management system and to delegate authority and responsibility for CHA 's fiscal management systems.
Policy:	<p>It is CHA's policy that a financial management system be established and that it shall be based on sound fiscal procedures. CHA 's financial management system shall incorporate the following:</p> <p>Accounting system:</p> <ol style="list-style-type: none">1. An accounting system which provides for reporting of all revenue and expenditures by fund.2. A system of maintaining financial records to allow for the determination of costs by program and service.3. A system of providing adequate accounting reports to allow for the preparation of CHA's financial reports.4. A system to ensure proper administration and accounting controls over CHA 's cash disbursements. The opening of bank accounts shall be authorized by resolution of the CHA Board and checks shall always require two (2) signatures by persons approved by CHA. The Board Chairman, Board Vice-Chairman, Chief Executive Officer, and Chief Financial Officer are all authorized to sign checks for CHA. CHA checks must be counter-signed by at least two (2) of the above officials. <p>Audit:</p> <p>CHA shall contract with a certified public accountant for an annual fiscal and compliance audit.</p> <p>Regulations:</p> <p>CHA staff must conform to all accounting rules and regulations promulgated by the Division of Health Services, the OMB Common Rule, General Accepted Accounting Principles (GAAP) and the Local Government Budget and Fiscal Control Act.</p> <p>Capital Assets:</p> <ol style="list-style-type: none">1. CHA shall establish or be covered by a perpetual basis detailed inventory record system for capital equipment as defined.2. CHA shall take a physical inventory of equipment, as defined, on or before June 30 of each fiscal year, or, in the case of a project, grant with other than a June 30 ending

	<p>date, on or before the last day of a project/grant. The results of the physical count shall be compared to the perpetual records.</p> <p>3. It shall also be the policy of CHA to investigate any loss, damage or theft of property.</p> <p>4. Adequate preventive maintenance procedures shall be performed and related records documenting such maintenance shall be maintained. Any major repairs will also be documented noting mileage/utility factors at the time of repair, cost of repair, and detailed description of the repair.</p> <p>Purchasing: It shall be CHA's policy to place all purchase orders on the basis of CHA's Purchasing Policy, the direction of the Board, and in compliance with the North Carolina General Statutes.</p> <p>Record Retention: It is the CHA's policy that a record retention schedule be established in compliance with the OMB Common Rule, the North Carolina General Statutes, the Division Regulations and CHA's Record Retention Policy.</p>
<p>Policy Guidelines:</p>	<p><u>Authority:</u> CHA shall be responsible for engaging a certified public accountant to annually review the CHA's financial management system and reporting such a review to CHA.</p> <p><u>Director:</u> The Chief Executive Officer shall assure the implementation of the CHA's financial management system including its compliance with all applicable laws, rules, and regulations. The Chief Executive Officer shall ensure that the capital asset and purchasing policy is adhered to.</p> <p><u>Program Managers:</u> It shall be the responsibility of the supervisor of the program producing the records/documents to ensure that the retention schedule is adhered to.</p>

Approved: August 19, 2025

Signed: _____
Dr. Lara J. Pons, Board Chairman,
Cabarrus Health Alliance

Date: August 19, 2025

Signed: _____
Erin Shoe, Chief Executive Officer,
Cabarrus Health Alliance

Date: August 19, 2025

Public Health Authority of Cabarrus County

Section No. Admn. 005
Page 1 of 1

SUBJECT: Public Relations and Information

EFFECTIVE DATE: July 1, 1997

REVISION DATES: June 1, 2010, June 20, 2023

REVIEW DATES: May 12, 2009; June 14, 2011; January 8, 2013; February 11, 2014;
May 10, 2016; August 8, 2017; August 14, 2018; August 13, 2019;
August 3, 2020; June 14, 2022; June 20, 2023; August 20, 2024; August 19, 2025

Purpose:	To establish guidelines for informing the public of the functions and activities of CHA and to enhance public understanding of CHA.
Policy:	<p>It is the Board's policy</p> <ol style="list-style-type: none">1. To keep residents and individuals employed in the service area regularly and thoroughly informed about CHA through all possible channels of communication. Information about CHA services and how to acquire them and about regular and special activities of the Board will be provided to local and county-wide media both directly and through cooperation with the CHA Board.2. To protect information gathered from CHA clients to the maximum extent provided for under the law.3. To prohibit representatives of the news media to photograph clients unless the client or guardian gives written consent.4. In instances when there is some type of emergency (i.e. client injury or death, damage to property, etc.), only the Chairman of the Board or Chief Executive Officer is the official spokesman of the CHA.
Responsibilities:	<p><u>Board:</u></p> <p>The Board shall be responsible for the following:</p> <ol style="list-style-type: none">1. Providing leadership for and support to all efforts to provide information to the community.2. Delegating responsibility to the Chief Executive Officer for assuring adequate information flow to the community. <p><u>Chief Executive Officer:</u></p> <p>The Chief Executive Officer shall be responsible for providing information to the community under the direction of this policy.</p>

Approved: August 19, 2025

Signed: _____
Dr. Lara J. Pons, Board Chairman,
Cabarrus Health Alliance

Date: August 19, 2025

Signed: _____
Erin Shoe, Chief Executive Officer,
Cabarrus Health Alliance

Date: August 19, 2025

Public Health Authority of Cabarrus County

**SUBJECT: NOTIFICATION OF PUBLIC HEALTH
AUTHORITY BOARD OF COMMISSIONERS IN
THE EVENT OF A PUBLIC HEALTH
EMERGENCY**

Section No. Admn. 005a
Page 1 of 1

EFFECTIVE DATE: July 1, 2009

REVISION DATES: June 20, 2023

REVIEW DATES: June 1, 2010; June 14, 2011; January 8, 2013; February 11, 2014 ; May 12, 2015;
May 10, 2016; August 8, 2017; August 14, 2018; August 13, 2019;
August 3, 2020; June 14, 2022; June 20, 2023; August 20, 2024; August 19, 2025

Purpose:	CHA plays a major role in all aspects of communication involving a public health emergency through its health alert network, risk communication, and other public health information dissemination mechanisms. Communication to the members of the CHA Board regarding public health emergencies is another vital element of the communication plan.
Policy:	The CEO/Public Health Director of CHA or his or her designee will speak with the Board Chair to determine what and when information needs to go out to the Board and how best to communicate that information depending on the event/situation. The CEO/Public Health Director or designee may communicate with the CHA Board members by phone or e-mail, as appropriate to the situation. The CHA Board group e-mail will be utilized to keep Board members notified/updated during events. These updates will be short, concise bulleted points as to the situation and what CHA is doing in response. The CHA Board will receive press releases in the event of a public health emergency prior to, or at the time they are released to the public.
Responsibilities:	CHA Board members are free to speak to media, as long as they make it known they are not speaking as an official representative of CHA, but as a public citizen. The exception would be if a CHA Board member is officially delegated to speak on behalf of CHA by the CEO/Public Health Director.

Approved: August 19, 2025

Signed: _____
Dr. Lara J. Pons, Board Chairman,
Cabarrus Health Alliance

Date: August 19, 2025

Signed: _____
Erin Shoe, Chief Executive Officer,
Cabarrus Health Alliance

Date: August 19, 2025

Public Health Authority of Cabarrus County

SSUBJECT: **Conflict of Interest**

EFFECTIVE DATE: July 1, 1997

Section No. Admn. 006 Page 1 of 1

REVISION DATES: June 1, 2010; June 20, 2023

REVIEW DATES: May 12, 2009; June 14, 2011; September 13, 2011; January 8, 2013;
February 11, 2014; May 12, 2015; May 10, 2016; August 8, 2017;
August 14, 2018; August 13, 2019; August 3, 2020; June 14, 2022;
June 20, 2023; August 20, 2024; August 19, 2025

Purpose:	To delineate instances where staff and/or CHA Board members may have a conflict of interest.
Policy:	<p>It is the policy of the Board:</p> <ol style="list-style-type: none">1. No paid staff members of CHA shall serve as a member of the CHA Board.2. No paid staff member of the Board shall be on the board of any incorporated "Affiliate Agency" (defined below) *.3. No paid staff member of any Affiliate Agency may serve on the board of another Affiliate Agency without prior approval of the Board.4. Any Board member who is on the board of an Affiliate Agency must abstain from any voting on any funding allocation to the particular Affiliate Agency.5. No paid staff member of the Board may place Board business with a financial entity in which the staff member has a financial interest.6. No member of the Board shall violate the provision of North Carolina General Statute 14-234** or any other law or regulation prohibiting conflict of interest.7. CHA staff, employees and the Board shall abide by the Conflict of Interest Policies in place by CHA as they pertain to employees, staff members and the Board members, respectively. <p>* Affiliate Agency - An organization or agency that is related to another organization or agency through some type of control or ownership or structural relationship with each other.</p> <p>**NC General Statute in Policy #6 should reference 131E-21 which applies to a hospital authority, in addition to NCGS 14-234.</p>

Approved: August 19, 2025

Signed: _____
Dr. Lara J. Pons, Board Chairman,
Cabarrus Health Alliance

Date: August 19, 2025

Signed: _____
Erin Shoe, Chief Executive Officer,

Date: August 19, 2025

Cabarrus Health Alliance

Public Health Authority of Cabarrus County

Section No. Admn. 007 Page 1 of 1

SUBJECT: Fund Management

EFFECTIVE DATE: July 1, 1997

REVISION DATES: June 17, 2008; February 11, 2014; June 20, 2023

REVIEW DATES: May 12, 2009; June 1, 2010; June 14, 2011; January 8, 2013; May 12, 2015;
May 10, 2016; August 8, 2017; August 14, 2018; August 13, 2019;
August 3, 2020; June 14, 2022; June 20, 2023; August 20, 2024; August 19, 2025

Purpose:	To assume the development of a fund management system and to delegate authority for CHA's financial management system.
Policy:	It is CHA's policy that a fund management system be established and that it shall be based on sound fund management procedures. CHA's financial management system shall incorporate: A. All surplus funds (funds in excess of current operating expenses) shall be deposited in the North Carolina Capital Management Trust. This is a money market mutual fund offered exclusively to local governmental units in North Carolina. This trust has been certified by the North Carolina Local Government Commission as a legal investment for temporarily available cash. B. Current operating funds (those expected to be utilized in ninety (90) days or less) may be deposited in short term collateralized Certificate of Deposit accounts (which are approved by the Local Government Commission) and in commercial paper graded at least A1P1.
Responsibility:	The Chief Executive Officer shall be responsible for insuring compliance with this fund management policy of CHA.

Approved: August 19, 2025

Signed: _____
Dr. Lara J. Pons, Board Chairman,
Cabarrus Health Alliance

Date: August 19, 2025

Signed: _____
Erin Shoe, Chief Executive Officer,
Cabarrus Health Alliance

Date: August 19, 2025

Public Health Authority of Cabarrus County

SUBJECT: Compensation for Board Members

Section No. Admn. 008
Page 1 of 1

EFFECTIVE DATE: July 1, 1997

REVISION DATES: June 20, 2023

REVIEW DATES: May 12, 2009; June 1, 2010; June 14, 2011; January 8, 2013; February 11, 2014; May 12, 2015; May 10, 2016; August 8, 2017; August 14, 2018; August 13, 2019; June 14, 2022; June 20, 2023; August 20, 2024; August 19, 2025

Purpose:	To set limitations and guidelines for the compensation of Board members from time to time while conducting business on behalf of the Board.
Policy:	<ol style="list-style-type: none">1. Board members may receive as compensation for their services per diem and subsistence allowance for each day during which they engaged in the official business of the Board and they shall not exceed those rates authorized for CHA employees or staff members.2. Board members may be reimbursed for all necessary travel expenses and registration fees in amounts set by the Board.

Approved: August 19, 2025

Signed: _____
Dr. Lara J. Pons, Board Chairman,
Cabarrus Health Alliance

Date: August 19, 2025

Signed: _____
Erin Shoe, Chief Executive Officer,
Cabarrus Health Alliance

Date: August 19, 2025

Public Health Authority of Cabarrus County

SUBJECT: Board Attorney

Section No. Admn. 009 Page 1 of 1

EFFECTIVE DATE: July 1, 1997

REVISION DATES: June 1, 2010; June 20, 2023

REVIEW DATES: May 12, 2009; June 14, 2011; January 8, 2013; February 11, 2014;
May 12, 2015; May 10, 2016; August 8, 2017; August 14, 2018;
August 13, 2019; August 3, 2020; June 14, 2022; June 20, 2023; August 20,
2024; August 19, 2025

Purpose:	To establish the Board's guidelines for the use of an attorney and the management of legal issues.
Policy:	<p>It is the policy of the Board to retain the services of an attorney to provide advice and services to both Board and CHA staff.</p> <p>The following are the responsibilities of the Board attorney:</p> <ol style="list-style-type: none">1. Advise the Board on all legal issues presented to the Board.2. Initiate any legal action authorized by the Board.3. Review and approve all prototype* contracts used by CHA to contract for services and provide advice regarding the execution of each contract when needed.4. Review and approve contracts relating to insurance, fringe benefits, preferred provider status and any other major business contracts of CHA.5. Advise staff on legal issues surrounding client care.6. Other duties as required by the Board. <p>*Prototype contracts are purchase of service and total cost contracts that are used with multiple affiliate agencies.</p>

Approved: August 19, 2025

Signed: _____
Dr. Lara J. Pons, Board Chairman,
Cabarrus Health Alliance

Date: August 19, 2025

Signed: _____
Erin Shoe, Chief Executive Officer,
Cabarrus Health Alliance

Date: August 19, 2025

Public Health Authority of Cabarrus County

SUBJECT: Board Governance Philosophy

EFFECTIVE DATE: July 1, 1997

Section No. Admn. 010 Page 1 of 1

REVISION DATES: June 20, 2023

**REVIEW DATES: May 12, 2009; June 1, 2010; June 14, 2011; January 8, 2013; February 11, 2014;
May 12, 2015; May 10, 2016; August 8, 2017; August 13, 2019; August 3, 2020;
June 14, 2022; June 20, 2023; August 20, 2024; August 19, 2025**

Purpose:	To establish a policy to be followed on the Board's governance policy.
Policy:	<p>CHA fully realizes that it is responsible for how it governs the organization. The Board is responsible for meeting attendance, the agenda, and the capability to envision the future.</p> <p>This Board will approach its task of governing the organization in a manner which emphasizes strategic leadership more than administrative details, clear distinction of Board and staff roles, future rather than past or present, and productivity rather than reactivity. In this spirit, the Board will:</p> <ol style="list-style-type: none">1. Keep its major focus and involvement on the long-term impact of the organization, not with the administrative or programmatic means of attaining these impacts.2. Direct, control, and inspire the organization through the careful deliberation and establishment of policies. Policies will be statements of values or approaches which address:<ol style="list-style-type: none">a) The services to be offered;b) Administrative constraints on staff;c) Board roles and responsibilities; andd) The Board/staff relationship.3. Enhance upon itself whatever discipline is needed to govern with excellence. Discipline will apply to attendance, policy making, respect of clarified roles, speaking with one voice, and self-policing of Board tendencies to stray from rigorous governance.4. Be accountable to the general public and the Cabarrus County Commissioners for competent, conscientious, and effective accomplishment of its obligations as a body. This will allow no officer, individual, or committee to usurp the role of and authority of the Board.5. Be an initiator of policy and responsible for its own performance.6. Evaluate the performance of the Chief Executive Officer on an annual basis.7. Monitor the approved policies of CHA.8. Issues presented to the Board should be discussed in the following content:<ol style="list-style-type: none">a) What policies are represented here?b) How do these proposed actions relate to previous policies adopted by the Board?

Approved: August 19, 2025

Signed: _____
Dr. Lara J. Pons, Board Chairman,
Cabarrus Health Alliance

Date: August 19, 2025

Signed: _____
Erin Shoe, Chief Executive Officer,
Cabarrus Health Alliance

Date: August 19, 2025

Public Health Authority of Cabarrus County

SUBJECT: Payroll Administration

Section No. Admn. 011
Page 1 of 1

EFFECTIVE DATE: July 1, 1997

REVISION DATES: June 20, 2023

REVIEW DATES: May 12, 2009; June 1, 2010; June 14, 2011; January 8, 2013; February 11, 2014;
May 12, 2015; May 10, 2016; August 8, 2017; August 14 2018; August 13, 2019;
August 3, 2020; June 14, 2022; June 20, 2023; August 20, 2024; August 19, 2025

Purpose:	To establish a policy to be followed in the administration of the CHA payroll system.
Policy:	It is the policy of CHA to pay all employee payroll checks through direct deposit.
Policy Guidelines:	The following procedures will be followed in carrying out this payroll policy: <ol style="list-style-type: none">1. All CHA employees will be paid every two weeks; and2. All CHA employees will be paid by direct deposit through the bank of such employee's choice.

Approved: August 19, 2025

Signed: _____
Dr. Lara J. Pons, Board Chairman,
Cabarrus Health Alliance

Date: August 19, 2025

Signed: _____
Erin Shoe, Chief Executive Officer,
Cabarrus Health Alliance

Date: August 19, 2025

Public Health Authority of Cabarrus County

Section No. Admn. 012
Page 1 of 1

SUBJECT: Solicitation Policy

EFFECTIVE DATE: July 1, 1997

REVISION DATES: June 1, 2010; January 8, 2013; August 13, 2019; August 3, 2020, June 20, 2023

REVIEW DATES: May 12, 2009; June 14, 2011; January 8, 2013; February 11, 2014;
May 12, 2015; May 10, 2016; August 8, 2017; August 14 2018; August 13, 2019;
June 14, 2022, June 20, 2023; August 20, 2024; August 19, 2025

Purpose:	To establish a policy to be followed regarding solicitation.
Policy:	Soliciting to sell, actual sales or requests for donations, is prohibited on CHA property unless otherwise approved by the Chief Executive Officer.
Policy Guidelines:	<p>CHA does recognize the importance of voluntary support of charitable non-profit organizations within the community and will consider approving their fund-raising activities as exemptions to this general policy. These includes:</p> <ol style="list-style-type: none">1. Individual employee solicitations such as school fundraisers and club/organizational fundraisers may be exempt. In these cases, employees cannot solicit, distribute, be solicited or receive goods during normal working hours. Such approved activities may be conducted in non-public areas after normal working hours or during authorized meal and break periods. A designated non-public area within the CHA office may be used to display/post announcements for employees.2. The Chief Executive Officer may approve such exemptions under the above guidelines. A list of currently exempted organizations, activities, and funds will be maintained within the Administrative Office.3. Sale flyers, restaurant menus and other sales-like materials may be posted in the designated non-public area within the CHA office (see #1 above).4. There will be no posting of commercial advertisements on CHA property. Exemptions may be approved by the Chief Executive Office (see #4 above).

Approved: August 19, 2025

Signed: _____
Dr. Lara J. Pons, Board Chairman,
Cabarrus Health Alliance

Date: August 19, 2025

Signed: _____
Erin Shoe, Chief Executive Officer,
Cabarrus Health Alliance

Date: August 19, 2025

Public Health Authority of Cabarrus County

SUBJECT: Incurred But Not Reported (IBNR) Expenses

EFFECTIVE DATE: July 1, 1997

Section No. Admn. 013 Page 1 of 1

REVISION DATES: June 20, 2023

REVIEW DATES: May 12, 2009; June 1, 2010; June 14, 2011; January 8, 2013; February 11, 2014;
May 12, 2015; May 10, 2016; August 8, 2017; August 14 2018; August 13, 2019;
August 3, 2020; June 14, 2022; June 20, 2023; August 20, 2024, August 19, 2025

Purpose:	To establish a policy to be followed to allow for reimbursement for incurred but not reported expenses for CHA staff members and employees.
Policy:	CHA recognizes and appreciates the fact that staff sometimes uses their own cash resources to pay for expenses on behalf of CHA. In the spirit of integrity and honesty it is the CHA policy to reimburse these expenses as soon as possible.
Policy Guidelines:	<p>To ensure that funds will be available to reimburse these expenses as part of the ongoing budget process, it is <u>required</u> that staff members and employees request reimbursement no later than thirty (30) days after incurring an expense, with proper documentation. Failure to adhere to this policy may result in a decision to deny reimbursement.</p> <p>Responsibility for implementation:</p> <ol style="list-style-type: none">1. Staff person to produce supporting documentation and make request for reimbursement;2. Supervisor to revise supporting documentation and request for reimbursement made by staff member; and3. Chief Financial Officer to make all final decisions regarding reimbursement of staff member expenses.

Approved: August 19, 2025

Signed: _____
Dr. Lara J. Pons, Board Chairman,
Cabarrus Health Alliance

Date: August 19, 2025

Signed: _____
Erin Shoe, Chief Executive Officer,
Cabarrus Health Alliance

Date: August 19, 2025

Public Health Authority of Cabarrus County

Section No. Admn. 014
Page 1 of 1

SUBJECT: Fleet Policy

EFFECTIVE DATE: July 1, 1997

REVISION DATES: June 17, 2008; June 1, 2010; August 13, 2019; August 3, 2020; June 20, 2023

REVIEW DATES: May 12, 2009; June 14, 2011; January 8, 2013; February 11, 2014;
May 12, 2015; May 10, 2016; August 8, 2017; August 14 2018; August 13, 2019;
June 14, 2022; June 20, 2023; August 20, 2024; August 19, 2025

Purpose:	To establish a policy to clearly define standard operating procedures for use, care, and maintenance of CHA owned vehicles.
Policy Guidelines:	<p>The following guidelines are established to regulate the use of CHA vehicles in the performance of their duties.</p> <p><u>Use of CHA Owned Vehicles</u></p> <p>A. Permitted Uses</p> <ol style="list-style-type: none">1. Only CHA employees or drivers authorized by departments may drive or operate CHA vehicles and equipment.2. CHA owned vehicles shall be used for official CHA business only.3. No passengers will be permitted unless they are on or for official CHA business. <p>B. Driver Requirements</p> <ol style="list-style-type: none">1. Each driver of any CHA owned vehicle must have a valid North Carolina operator's license. CHA employees who are drivers of vehicles weighing more than 26,000 pounds or a vehicle carrying sixteen (16) or more passengers, must have a valid North Carolina Commercial Class B license with a passenger endorsement.2. Employees will be responsible for any vehicle or equipment assigned to them.3. Employees driving CHA vehicles are required to obey all traffic laws including wearing seat belts in compliance with seat belt laws.4. CHA will not pay traffic tickets or parking fines of employees driving CHA owned vehicles, nor will CHA pay if the employee is authorized to use their personal vehicle on CHA business. Employees found guilty of a moving violation may be subject to disciplinary action by their supervisor.5. Employee driving record must meet the safe driver requirements of the CHA auto liability insurance carrier. <p>C. Vehicle Assignment</p> <ol style="list-style-type: none">1. CHA vehicles are normally assigned to an individual at the start of their work period and are the employee's responsibility until the completion of the assigned work period.2. A CHA vehicle may be assigned to an individual employee who regularly requires vehicular transportation in the performance of his or her assigned duties and responsibilities and requires the use of the vehicle during off duty time. The assignment may be of a permanent nature or for a specified time period, such as a week of on-call duty.3. During vacation periods or leaves of absences, an employee who is assigned a vehicle on a permanent basis, will turn the vehicle into their department or a manager of CHA

responsible for fleet management (the "Fleet Manager").

D. Personal Use of CHA Vehicles

1. No employee may use the vehicle assigned to him or her for personal business.
2. When the vehicle is not being used for CHA business purposes, it is to be kept on the premises of CHA except as specifically exempted by the Chief Executive Officer.
3. No CHA vehicle will be allowed to be driven to an employee's home unless the employee is subject to frequent and emergency duty after normal working hours. Exceptions to this policy will be made with the approval of the Chief Executive Officer.
4. An employee's title or position will not be regarded as justification for taking a CHA vehicle home; rather, justification is to be based on the above criteria without regard to official capacity.

Accident Policy

Regardless of the situation, the following procedures must be followed in the event of an accident involving a CHA vehicle:

1. Immediate notification of proper law enforcement agency for accident investigation and report.
2. Notification to the Fleet Manager within same business day.
3. Immediate notification of the Chief Executive Officer and/or delegate of CHA and the employee or staff members' immediate supervisor.
4. It is necessary to prepare a proper CHA accident report. The accident report forms are located in the glove box of each vehicle. This accident report must be completed legibly or the information called into the CHA Human Resources Department. This report along with one copy of the law enforcement agency report, should be submitted to the CHA Human Resources Department.
5. Complete an occurrence report, if there were any personal injuries, and submit to the CHA Human Resources Department.
6. The above forms are required to be filed within three (3) business days of an accident. Failure to file the proper reports can result in loss of vehicle driving privileges, suspension, demotion or dismissal.
7. The Fleet Manager will secure damage repairs estimates and submit to the CHA Human Resources Department within seventy-two (72) hours of the accident.

Operation and Care of CHA Vehicles

A. Cleaning of Vehicles

1. Vehicles must be kept clean at all times. It is the assigned driver's obligation and responsibility to maintain the vehicle in clean condition.
2. Car washes and other appearance conditions are the responsibility of the driver assigned a car on a permanent basis. The Fleet Manager will be responsible for periodic washes of cars assigned to the CHA fleet pool.

B. Maintenance of Vehicles

1. A vehicle number will be assigned by the Fleet Manager and affixed to the left rear window.
2. Each employee assigned a CHA owned vehicle is responsible for making an appointment and insuring periodic maintenance of the vehicle. The driver is obligated to

	<p>schedule the appointment when the vehicle mileage is within 500 miles of the next service, which is indicated on the red bordered sticker on the inside of the driver's door.</p> <ol style="list-style-type: none">3. Repairs other than scheduled maintenance which are non-safety or non-essential must be submitted on a maintenance request form and require approval of the Fleet Manager.4. Emergency repairs during normal working hours will be completed by an approved garage /service center.5. For afterhours repairs, call the Fleet Manager.6. Necessary action will be taken (wrecker called, etc.) as the Fleet Manager requests.7. Gas cards for fuel sites are issued to each vehicle by the Fleet Manager. Gas cards are to stay with the vehicle, not with the driver.8. Special equipment installed on the vehicle, such as fire extinguisher, flashlights, gas cards, and first aid kits, must stay within that vehicle at all times. Drivers are responsible for security of these items.9. Fleet Manager will arrange the installation of snow tires and chains, as needed or required, by request of CEO.10. The following items are the responsibility of the driver, if permanently assigned a car, to be replaced or repaired by outside services, unless otherwise specified by the Fleet Manager. Dealers which offer the State Contract price for tires will be used, if applicable.<ol style="list-style-type: none">a. Replacement tires11. The Fleet Manager will schedule other outside work unless specified otherwise (i.e. suspension alignment, upholstery repair, warranty work, exhaust system repair, etc.). It is the driver's responsibility, if permanently assigned a car, to have the vehicle at the contracted service at the designated time and to also pick up the vehicle when finished.12. CHA is not responsible for personal items which are lost or stolen when the vehicle is serviced.13. Any warranty booklet, tag registration cards, state inspection certificate and owner's manuals must remain in the vehicle's glove compartment at all times.14. No employee or staff member is authorized to alter any equipment installed in a vehicle. <p>C. Vehicle Replacement</p> <ol style="list-style-type: none">1. Vehicles may be replaced at 100,000 miles, or at the Fleet Manager's request.2. Mileage for trucks will not be used, only vehicle mechanical condition will warrant replacement, or as Fleet Manager requests. <p>D. Regulatory Compliance</p> <p>Any CHA vehicle that will be used by CHA requiring compliance with the Americans with Disabilities or any other applicable statute or regulation pertaining to the vehicle, shall comply in full with all such statutes and regulations.</p> <p>During the annual budget process, the Fleet Manager will determine if a vehicle is to be removed from service. The Fleet Manager will send a written recommendation to the Chief Executive Officer with a copy to the Chief Financial Officer when it is determined to remove vehicles from service.</p>
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Approved: August 19, 2025

Signed: _____
Dr. Lara J. Pons, Board Chairman,
Cabarrus Health Alliance

Date: August 19, 2025

Signed: _____
Erin Shoe, Chief Executive Officer,
Cabarrus Health Alliance

Date: August 19, 2025

Public Health Authority of Cabarrus County

SUBJECT: Provision of CHA Vehicles

Section No. Admn. 015
Page 1 of 1

EFFECTIVE DATE: March 1, 2000

REVISION DATES: June 17, 2008; June 1, 2010; June 20, 2023

REVIEW DATES: May 12, 2009; June 14, 2011; January 8, 2013; February 11, 2014;
May 12, 2015; May 10, 2016; August 8, 2017; August 14 2018; August 13, 2019;
August 3, 2020; June 14, 2022; June 20, 2023; August 20, 2024; August 19, 2025

Purpose:	To establish guidelines for the purchase and provision of CHA vehicles.
Policy:	<p>To establish guidelines for the purchase and provision of CHA vehicles.</p> <p>At the Board's election, the Board may provide a mid-sized vehicle (or the equivalent dollar amount in a monthly car allowance) for the Chief Executive Officer, and other employees, who travel more than 1,000 miles per month or require an agency vehicle for official business.</p> <p>The Chief Executive Officer must follow these principles in implementing this policy:</p> <ol style="list-style-type: none">1. Vehicle must be no larger than a mid-sized vehicle as defined by the State of North Carolina purchasing contracts.2. If the Chief Executive Officer or other appointed employee elects a monthly travel allowance, the allowance must be based on an annual cost of a mid-sized vehicle. The real cost is to be determined by the Chief Financial Officer.3. Purchased vehicles may be considered for trade or provided as motor pool vehicles after 100,000 miles.4. The Chief Executive Officer shall report to the Board every June under this policy if provided a vehicle.

Approved: August 19, 2025

Signed: _____
Dr. Lara J. Pons, Board Chairman,
Cabarrus Health Alliance

Date: August 19, 2025

Signed: _____
Erin Shoe, Chief Executive Officer,
Cabarrus Health Alliance

Date: August 19, 2025

Public Health Authority of Cabarrus County

Section No. Admn. 016
Page 1 of 1

SUBJECT: Fee Policy

EFFECTIVE DATE: July 1, 1997

REVISION DATES: May 16, 2000; June 17, 2008; June 1, 2010; June 20, 2023

REVIEW DATES: May 12, 2009; June 14, 2011; January 8, 2013; February 11, 2014;
May 12, 2015; May 10, 2016; August 8, 2017; August 14 2018; August 13, 2019;
August 3, 2020; June 14, 2022; June 20, 2023, August 20, 2024; August 19, 2025

Purpose:	To establish a methodology to be followed by the Board and the Chief Executive Officer in the formulation, approval, and execution of establishing new fees for new services, and the establishment of new fees for existing services.
Policy Guidelines:	<ol style="list-style-type: none">1. New fees for new or existing services can be set at any time. The fees will be determined by studying the cost of providing the service current "UCR" (usual, customary, reasonable) rates, Medicare and Medicaid rates, market rates, and insurance carrier reimbursement rates. The fees will be effective the date the service is provided. The CHA Board does not have to review new fees; however, the CHA Board can review all fees at any given time and also a Geographic Adjustment Factor ("GAF") and/or Customized Fee Analyzer may be used to determine charges.2. Fee increases/decreases are to be in place by CHA by October 1 of any given year.3. The Chief Executive Officer, as delegated to the Chief Financial Officer, has the authority to deviate from this standard. Should this occur, a cost analysis of the given fee(s) in question must be available to the Board.4. The Board may review and change this policy from time to time. The Board does not have to approve CHA fees.
Responsibility:	Responsibility for this policy is given to the Chief Executive Officer who may delegate it to the Chief Financial Officer.

Approved: August 19, 2025

Signed: _____
Dr. Lara J. Pons, Board Chairman,
Cabarrus Health Alliance

Date: August 19, 2025

Signed: _____
Erin Shoe, Chief Executive Officer,
Cabarrus Health Alliance

Date: August 19, 2025

**SUBJECT: Cabarrus County Public Health Authority Board of Commissioners
Operating Procedures****EFFECTIVE DATE:** April 8, 2008**REVIEW DATES:** February 14, 2012; January 8, 2013; February 11, 2014;
May 12, 2015; May 10, 2016; August 8, 2017; August 14, 2018;
February 11, 2020; June 14, 2022; June 20, 2023; August 20, 2024
August 19, 2025**REVISION DATES:** February 14, 2012; January 8, 2013; June 14, 2022**Name and Office**

The name of this organization is the Cabarrus County Public Health Authority and the governing body is the Cabarrus County Public Health Authority Board of Commissioners (hereinafter 'Board'). The principal office of the Board is located at 300 Mooresville Road, Kannapolis, North Carolina 28081.

Officers

- a. Chair**
- b. Vice-Chair**

The Board members shall elect a Chair and Vice-Chair by majority vote each year at the June meeting.

Secretary

The local health director shall serve as Secretary to the Board, but the director is not a member of the Board. The local health director may delegate the duties of the Secretary that are set forth in these operating procedures to an appropriate local health department employee (Clerk to the Board).

Meetings

- c. Regular Meetings**

The Board shall hold regular meetings at least six times per year. Regular meetings shall be held on Tuesday evenings, and shall be held in the Board Room of Cabarrus Health Alliance, 300 Mooresville Road, Kannapolis, North Carolina, and shall begin at 5:30 p.m.

- d. Agenda**

The Clerk to the Board shall prepare an agenda for each meeting. Any board member who wishes to place an item of business on the agenda shall submit a request to the Clerk at least ten working days before the meeting. For regular meetings, the Board may add items to the agenda or subtract items from the agenda by a majority vote. The agenda for a special or emergency meeting may be altered only if permitted by and in accordance with the North Carolina open meetings laws. Any person may request that an item be placed on

the Board agenda by submitting a written request to the Clerk at least ten working days before the meeting.

e. Presiding Officer

The Chairman of the Board shall preside at Board meetings if he or she is present. If the chair is absent, the vice-chair shall preside.

Quorum

A majority of the actual membership of the Board, excluding vacant seats, shall constitute a quorum. A member who has withdrawn from a meeting without being excused by a majority vote of the remaining members shall be counted as present for purposes of determining whether or not a quorum is present.

f. Voting

Each Board member shall be permitted to abstain from voting, by so indicating when the vote is taken. A member must abstain from voting in cases involving conflicts of interest as defined by North Carolina law. If a member has withdrawn from a meeting without being excused by a majority vote of the remaining members, the member's vote shall be recorded as an abstention.

g. Minutes

The Clerk to the Board shall prepare minutes of each Board meeting. Copies of the minutes shall be made available to each Board member before the next regular Board meeting. At each regular meeting, the Board shall review the minutes of the previous regular meeting as well as any special or emergency meetings that have occurred since the previous regular meeting, make any necessary revisions, and approve the minutes as originally drafted or as revised. The public may obtain copies of Cabarrus County Public Health Authority Board of Commissioners meeting minutes from the Board Clerk at 300 Mooresville Road, Kannapolis North Carolina, once they are approved by the Board.

Amendments to Operating Procedures

These operating procedures may be amended at any regular meeting or at any properly called special meeting that includes amendment of the operating procedures as one of the stated purposes of the meeting. A quorum must be present at the meeting at which amendments are discussed and approved, and any amendments must be approved by a majority of the members present at the meeting.

1. Other Procedural Matters

The Board shall refer to the current edition of *Robert's Rules of Order Newly Revised* to answer procedural questions not addressed in this document, so long as the procedures

prescribed in *Robert's Rules of Order Newly Revised* do not conflict with North Carolina law.

2. Compliance with North Carolina Law

In conducting its business, the Board shall comply with all applicable North Carolina laws, including but not limited to open meetings laws, public records laws, and the laws setting forth the powers and duties of local boards of health. To assist the Board in compliance, the local health director shall maintain a current copy of relevant North Carolina General Statutes and make them available to Board members on request.

Adopted by the Cabarrus County Public Health Authority Board on April 8, 2008, and reviewed and adopted by the Board on August 19, 2025.

Lara J. Pons, MD, Chairperson
Cabarrus County Public Health Authority
Board of Commissioners

Mariah Kendrick, Clerk
Cabarrus Health Alliance

SUBJECT: CONFLICT OF INTEREST POLICY

EFFECTIVE DATE: January 1, 2018

REVISION DATE(S): June 20, 2023

REVIEW DATE(S): January 1, 2018; January 1, 2019; December 20, 2019; February 9, 2021; July 28, 2022; June 20, 2023; August 19, 2025

POLICY STATEMENT: The purpose of this policy is to protect the interests and perception of CHA when entering into a transaction or arrangement that might benefit the private interest of one of its Board members. Board members must also adhere to Section No. Admen. 006 of the CHA Corporate Resolution regarding Conflict of Interest. This Policy is intended to supplement, but in no way replace, any applicable federal and state laws governing conflicts of interest.

The Public Health Authority of Cabarrus County d/b/a Cabarrus Health Alliance (“CHA”) requires the members of its Board of Commissioners (the “Board”) and employees to observe high standards of business and personal ethics in the conduct of their duties and responsibilities. CHA depends on the active involvement and leadership of its Board, staff and employees to accomplish its mission and it is essential that the public have confidence in the integrity of CHA as its local public health authority to maintain its credibility as a valued resource. It is expected that staff and employees of CHA and Board members will not use their position(s) for their own personal benefit, whether direct or indirect, in any manner, and shall avoid Conflicts of Interest (defined below) and any conduct which may create or even suggests a Conflict of Interest. This policy is specifically for the Board.

All shall carefully avoid any conflict between their own respective personal, professional, or business interests and the interest of CHA, in any and all actions taken by them in their respective capacities on behalf of CHA. CHA strives to avoid conflicts of interest to ensure that it preserves the highest standards of integrity and ethical principles. When in a leadership position, CHA requires that leaders conduct themselves with honesty and integrity. The Board of CHA, recognizing that it is entrusted with resources devoted to public health, has adopted this Conflict of Interest Policy (the “Policy”).

In the course of performing their duties, a Board member’s participation may be conflicted, biased, or illegal when one promotes or advocates decisions that are based on expected personal gain or benefits other than the best interest of CHA. For this purpose, the term "Conflict of Interest" means any financial interest or potential for gain that (1) could impair the individual's objectivity; or, (2) could create an unfair competitive advantage.

PROCEDURES TO BE FOLLOWED:

1. CONTRACT FOR PERSONAL BENEFIT

- 1.1. Board members should ensure that contracting, purchasing, and other decisions are made in a neutral, objective way based on what is in CHA's interest and not in consideration of actual or potential benefit to the decision maker.
- 1.2. N.C.G.S. §14-234, prohibits a Board member from deriving a direct benefit from any contract, including purchase contracts, in which he or she is involved on behalf of the public agency he or she serves. Even if a Board member is not involved in making a contract from which he or she will derive a direct benefit, the Board member is prohibited from influencing or attempting to influence anyone in CHA who is involved in making the contract/decision/purchase.

- 1.3. A person "derives a direct benefit" from a contract/purchase if the person or his or her spouse:
 - 1.3.1. Has more than a 10% interest in the company that is a party to the contract/purchase,
 - 1.3.2. Derives any income or commission directly from the contract/purchase, or
 - 1.3.3. Acquires property under the contract.
- 1.4. Although the statutory definition does not extend to other family members, friends, or to unmarried partners, Board members should still consider the public perception of such transactions/decisions.
- 1.5. Board members who are involved in the disposal of surplus property are prohibited from purchasing said property from CHA unless the property is purchased via publicly advertised and publicly available sale, such as sales made through GovDeals.
- 1.6. A person is assumed to be involved in the "making or administering" of the contract if they:
 - 1.6.1. Participate in the development of specifications or contract terms,
 - 1.6.2. Participate in the preparation or award of the contract,
 - 1.6.3. Have the authority to make decisions about or interpret the contract.
- 1.7. A Board member is considered to be involved in making the contract when the Board takes action on the contract, even if said Board member does not participate unless an exception applies. Being excused from voting on the contract does not absolve a Board member with a conflict of interest from potential criminal liability.
- 1.8. Board members may legally benefit from a contract with CHA as long as they are not involved in making or administering it.
- 1.9. All Board members are prohibited from soliciting or receiving any gift, reward, or promise of reward, including a promise of future employment, in exchange for recommending, influencing, or attempting to influence the award of a contract, even if they do not derive a direct benefit under the contract.

2. GIFTS AND FAVORS

- 2.1. N.C.G.S. §133-32 prevents the use of gifts and favors to influence the award and administration of public contracts. Violation of this statute is a Class 1 misdemeanor.
- 2.2. N.C.G.S. §133-32 prohibits a current contractor, a contractor who has performed under a contract with CHA within the past year, or a person who anticipates bidding on a contract in the future to give any gift or favor to Board members who have responsibility for preparing, awarding, or overseeing contracts.
- 2.3. A gift or favor is defined as anything of value acquired or received without fair compensation, unless it is covered by a statutory exception. Exceptions include:
 - 2.3.1. Advertising items or souvenirs of nominal value including inexpensive pens, mugs, and calendars bearing the name of the donor firm, etc.
 - 2.3.2. Honoraria for participating in meetings, and meals at banquets.

- 2.4. Although meals at banquets are allowed, free meals offered by contractors under other circumstances, such as lunch, should be refused.
- 2.5. Any gift that is allowed under local law must still be refused if it violates state law.
- 2.6. Board members may accept customary gifts or favors from friends and relatives as long as the existing relationship, rather than the desire to do business with CHA, is the motivation for the gift.
- 2.7. A contractor/vendor may donate goods and services for use by CHA, but not to a Board member for their personal use.

3. MISUSE OF CONFIDENTIAL INFORMATION

- 3.1. N.C.G.S. §14-2341 makes it a Class 1 misdemeanor for a Board member to use Confidential Information (defined below) for personal gain, to acquire a pecuniary benefit in anticipation of his or her own official action, or to help another person acquire a pecuniary benefit from such actions.
- 3.2. "Confidential Information" is defined as any non-public information that the Board member has learned in the course of performing his or her duties on behalf of and for CHA.

4. PROCEDURES TO DISCLOSE AND RESOLVE CONFLICTS

- 4.1. *Duty to Self-Disclose* - The primary obligation of any person subject to this Policy who may be involved in a Conflict of Interest situation is to bring it promptly to the attention of those designated under the disclosure procedures so that the potential conflict can be evaluated and addressed.
- 4.2. *Duty of Loyalty* - The duty of loyalty requires that Board member act in the best interest of CHA despite potential conflicting interests.
- 4.3. *Disclosure of Conflicts of Others* - If a Board Member becomes aware of a situation in which an individual is potentially taking advantage of his or her position and acting for his or her own interest, they should inform the individual of the basis of such a belief and afford the person an opportunity to explain the alleged failure to disclose.
- 4.4. *Recusal of Self* - Any Board member may recuse himself or herself at any time from involvement in any decision or discussion in which the individual believes he or she has or may have a conflict of interest, without going through the process for determining whether a conflict of interest exists, as long as they are not involved in the making of the contract as per clause 1.7 of this Policy.
- 4.5. *Evaluation of Potential Conflict* - After disclosure of all material facts and any follow-up discussion with the Board member with a potential Conflict of Interest, a determination must be made about whether a material financial interest, self-dealing transaction or other kind of actual conflict exists.

- 4.5.1. If the potential conflict is first disclosed during a Board meeting at which the Board member with the potential conflict is in attendance, that person shall leave the meeting while the determination of whether a Conflict of Interest exists is discussed and voted upon. The chairman of the Board (the “Chairman”) will evaluate the disclosures by the Board member and will determine on a case-by-case basis whether the disclosed activities constitute an actual conflict of interest. The Board Chairman should consider the proximity of the Board member to the decision-making authority of the other entity involved in the transaction, and the degree to which the Board member might benefit personally if a particular transaction were approved when determining whether an actual conflict exists.
- 4.5.2. If the disclosure is made outside of the context of a Board meeting, then the determination of whether a conflict exists will be directed to the CEO for discussion, decision and action. The CEO may, as needed, consult with the Chairman or legal team of CHA.
- 4.5.3. Where it is determined that an actual Conflict of Interest exists, the Chairman or CEO will recommend an appropriate course of action to protect the interests of CHA. All disclosures and the outcome of the deliberation about whether a conflict of interest exists will be recorded in the meeting minutes.

5. RECORDS OF PROCEEDINGS

- 5.1. The minutes of the Board meeting or other meeting shall contain:
 - 5.1.1. The name(s) of the Board member who disclosed or who otherwise were found to have a financial or other interest in connection with an actual or possible Conflict of Interest, the nature of the financial or other interest, any action taken to determine whether a Conflict of Interest was present, and the Board's decision as to whether a Conflict of Interest in fact existed.
 - 5.1.2. The name(s) of the persons who were present for discussions and votes relating to the transaction or arrangement, the content of the discussion, including any alternatives to the proposed transaction or arrangement, and a record of any votes taken in connection with the proceedings.

6. ANNUAL STATEMENTS

- 6.1. Persons who shall be asked to annually sign a statement on the Conflict-of-Interest Acknowledgement form or such other form as the Board adopts include all Board members. This activity, at a minimum, affirms that such a person:
 - 6.1.1. has received a copy of the Policy,
 - 6.1.2. has read and understands the Policy,
 - 6.1.3. has agreed to comply with the Policy,
 - 6.1.4. and discloses personal financial interests and family relationships that could give rise to Conflict of Interest.
- 6.2. Record of Potential or Actual Conflict of Interest forms will be submitted when appropriate, at or prior to action on relevant business transactions.

Dr. Lara J. Pons, M.D.
Board Chairman,
Cabarrus Health Alliance

August 19, 2025
Date

Erin Shoe
Chief Executive Officer
Cabarrus Health Alliance

August 19, 2025
Date

RECORD OF POTENTIAL OR ACTUAL CONFLICT OF INTEREST

As a CHA Board member, the following is a record of my disclosure of a potential or actual conflict of interest as per clause 6.2 of the Conflict of Interest Policy.

CONFLICT OF INTEREST:

Name: _____

Title: _____

Signature

Date

**SUBJECT: RULE MAKING AND ADJUDICATION FOR PUBLIC HEALTH
AUTHORITY BOARD OF COMMISSIONERS**

EFFECTIVE DATE: March 12, 2013

REVISION(S): June 20, 2023

REVIEW DATE(S): February 11, 2014; May 12, 2016; August 8, 2017; August 14, 2018;
August 13, 201; June 9, 2020; July 28, 2022, June 20, 2023; August 20, 2024
August 19, 2025

POLICY:

The Public Health Authority of Cabarrus County (“CHA”) Board of Commissioners (the “Board”) has the responsibility to protect and promote the public health and has the authority to adopt rules necessary for that purpose. The rules of Board apply to all municipalities within Cabarrus County. The Board follows the procedures outlined in the NC General Statutes §130A-39. In the event that anyone appeals the enforcement of any rules adopted by the Board, the adjudication process described in the NC General Statutes §130A-24 is followed.

PROCEDURES:

I. Rule Making

- A. The Board can make a rule whenever the Board considers it necessary or when an issue is brought to them by the Chief Executive Officer/Public Health Director (“CEO”) or other CHA staff.
- B. At least ten (10) days prior to adopting, amending, or repealing a rule, the Board must make the proposed rule available to the office of the Cabarrus County Clerk.
- C. A notice of the proposed rule must be published in a newspaper having general circulation in Cabarrus County at least ten (10) days prior to the adoption of the rule. The notice will contain:
 - 1. A statement of the substance of the proposed rule or a description of the subjects and issues involved
 - 2. The proposed effective date of the rule
 - 3. A statement that a copy of the proposed rule is available at the CHA principal office or the website www.CabarrusHealth.org.
- D. The Board rule will become effective upon adoption unless a later effective date is specified in the rule.

II. Copies of all rules are filed with the Secretary or Clerk to the Board

III. Appeals Process

- A. Any person appealing the enforcement and/or the imposition of administrative penalties needs to give written notice of the appeal to the CEO within thirty (30) days of the challenged action. The notice should contain:
 - 1. Name and address of the aggrieved person
 - 2. A description of the challenged action
 - 3. A statement of the reasons why the challenged action is incorrect.
- B. The CEO/Public Health Director will, within five (5) working days, transmit to the Board the notice of the appeal and any papers or materials upon which the challenged action was taken.

C. The Board will hold a hearing within fifteen (15) days of the receipt of the notice of appeal, giving the aggrieved person at least ten (10) days' notice of the date, time and place of the hearing.

D. On appeal, the Board had the authority to affirm, modify, or reverse the challenged action.

E. The Board will issue a written decision based on the evidence presented at the hearing. The decision will contain a concise statement of the reasons for the decision.

F. If the person wishes to contest the decision of the Board, he has the right of appeal to the district court within thirty (30) days after the date of the decision by the Board. The scope of the review in district court is the same as in the NC General Statutes 150B-51.

Dr. Lara J. Pons, M.D.
Board Chairman,
Cabarrus Health Alliance

August 19, 2025
Date

Erin Shoe
Chief Executive Officer
Cabarrus Health Alliance

August 19, 2025
Date

SUBJECT: PUBLIC COMMENTS AT THE CABARRUS COUNTY PUBLIC HEALTH AUTHORITY (“CHA”) BOARD OF COMMISSIONERS (“BOARD”) MEETINGS

EFFECTIVE DATE: August 16, 2022

REVISION DATES: June 20, 2023

REVIEW DATES: June 20, 2023; August 20, 2024; August 19, 2025

POLICY STATEMENT:

The CHA Board invites members of the public to comment at its meetings and reserves space at each meeting for that opportunity. The Board will accomplish this by ensuring that reasonable and fair mechanisms exist for community/public input.

PROCEDURE:

1. Members of the public must request to speak during the public comments portion of the meeting no less than 24 hours in advance of the meeting. Individuals can request to speak by emailing the Clerk to the Board at publiccomments@cabarrushealth.org or by calling 704-920-1915.
2. After submission of the request to speak, public members will receive the Public Comments Request Form from the Clerk to the Board. The form must be completed at least 15 minutes prior to the meeting or can be completed on-site prior to the meetings start.
3. For those not wishing to speak in-person, public comments can be submitted in writing to publiccomments@cabarrushealth.org. All comments go directly to members of the Board and will be read aloud by the Board Chair or his or her designee at the next scheduled meeting.
4. The Board will reserve a public comment period on each regularly scheduled Board meeting. Speakers will be acknowledged to speak in the order in which their names appear on the sign-up sheet. Each individual will be given a maximum of three (3) minutes for comments, and the public comment period will be limited to fifteen (15) minutes each meeting.
 - a. At the end of the time allotted for public comment, those who signed-up or submitted to speak but have not yet been recognized may be requested to hold their comments until the next meeting’s public comment period, at which time they will be given priority for expression. Alternatively, the Board, in its discretion, may extend the time allotted for public comment.

- b. To avoid repetitiveness, groups are encouraged to select a spokesperson to speak on their behalf. At the request of the Board, groups of persons wishing to speak on the same topic, may be asked to designate a spokesperson to speak, and the designated spokesperson may be allotted up to eight (8) minutes.
- 5. Comments may be directed to agenda and non-agenda items.
- 6. Public comments are not intended to require the Board members to answer impromptu questions. Speakers should expect the Board members to refrain from engaging in a dialogue. The allotted time for speaking is the method to address the Board during the public comments period. The Board will not entertain questions or comments called out from the audience. The Board will not take action on an item presented during public comment. When appropriate, the Board may refer inquiries and items brought up during public comment to the CHA CEO/Director of Public Health.
- 7. Members of the public are asked to follow basic guidelines, including but not limited to:
 - a. Be respectful and observe proper decorum in their statements and refrain from vulgarity, obscenities, profanity, and speaking in a tone or manner that threatens disruption or other breaches of respect.
 - b. Speakers may not personally attack Board members, CHA staff members, employees or members of the public.
 - c. Speakers may not disclose personally identifiable information about minors, such as names, birthdays, addresses or pictures, without permission from the minor's parent or legal guardian.

Dr. Lara J. Pons, M.D.
Board Chairman,
Cabarrus Health Alliance

August 19, 2025
Date

Erin Shoe
Chief Executive Officer
Cabarrus Health Alliance

August 19, 2025
Date



WAIVER OF COMPETITIVE PROCESS FOR SERVICES

DATE: 7/24/2025
TO: Erin Shoe/ Sue Yates
FROM: Monica Shelley-Henson on behalf of Tammy Alexander
RE: Wavier of Competitive Process for Services – IT software

This form must be completed for all Service Waiver of Competitive Process and submitted to the Finance Office- Procurement for approval **prior** to obtaining the service; or entering a requisition into CHA system. *This is not applicable to procurements that use federal funds.*

Department: School Health
Service: Professional Software for Nurses
Dollar Amount: \$42,500 USD/ annually - *Annual amount may increase/decrease based on usage
Term: Annually (7/1/2025- 6/30/2026) until 6/2030 (5 years)
Funding Source: 0029-5840-9352-102

NC GS 143-129 mandates that Cabarrus Health Alliance procure all services above \$1,000 via competitive solicitation process. However, I am requesting a Service Wavier of Competitive Process approval based on the following criteria:

- Performance competition is not available
- Service is only available from one source
- Emergency action – Public Exigency
- Competition was solicited but no satisfactory offer(s) received
- Standardization or compatibility
- The funding source (donation/grant) predicates the source
- Particular professional service is required
- Particular medical service is required
- Overriding considerations is in use for the blind or severely disabled
- Additional service is needed to complete an ongoing job
- Service is desired for educational, training, experimental, developmental, or research work
- Amount is too small to justify the competitive process
- A satisfactory price is available from a previous contract

1. Recommended Service Vendor

Company Name: Professional Software for Nurses Inc
Contact Name: Natalie Couture
Address: 4 Limbo Lane
City, State and Zip Code: Amherst, NH 03031
Telephone Number: 1-800-889-7627 option 3

2. Background Information

Explain why the Service Waiver of Competition is needed. The rationale must be clear. Do not include any generalities and unsupported conclusions. Use additional sheets if necessary.

PSNI is the leading provider of student health software designed specifically for the K-12 school health clinic. For over 26 years, SNAP Health Center, has remained the most trusted and widely used comprehensive school-based HER. Utilizing superior design and hands-on school nursing experience, SNAP Health Center enables schools to achieve better student health outcomes by streamlining workflow, increasing communication, and providing comprehensive health data analysis. With a focus on flexibility and security, districts of all sizes benefit from increased efficiency and reduced liabilities.

Term of Contract: annually

Amount: \$42,500 USD/ annually with the ability to renew on an annual basis up to 5 years (Not to Exceed \$220,000 USD)

What is the future plan to obtain the same service via the competitive process if this is approved? On an annual basis, this agreement will be reviewed and compared to other providers, if any. If a compatible/comparable system is available, the dept will meet with the Contracting Office to determine next best step.

I certify that the above information is true and correct. I have no financial or other beneficial interest in the vendor or the product.

Additionally, I verify that I have made an honest effort to negotiated this service at the best price, delivery, and terms.

Requestor/ Responsible Person Signature _____

Department Head _____

Finance Office – Procurement _____

Approval for Services Waiver of Competition

The appropriate signature authority waves the requirement to issue a solicitation of services when it is in Cabarrus Health Alliance’s best interest to do so. The reasons stated above establish that a waiver is appropriate with respect to the services described above. Accordingly, this form indicates that Cabarrus Health Alliance will forego the solicitation requirement and allows a contract to the above listed vendor to be created.

Date: _____

Signature: _____

Title: _____