

MINUTES OF THE CASWELL COUNTY BOARD OF HEALTH

The Caswell County Board of Health met at 7:00 P.M. on February 25, 2014 in the Caswell County Health Department's downstairs meeting room in Yanceyville, North Carolina.

ATTENDANCE:

Position	Name	Present	Not Present
County Commissioner	Nate Hall	X	
Pharmacist	Andrew Foster, Pharm. D, R.Ph. (Chair)	X	
Dentist	Rose Satterfield, DMD	X	
Veterinarian	Donald Fuller, DVM	X	
Physician (Gen. Pub.)	Cecil Page	X	
Registered Nurse (Gen. Pub.)	Sharon Kupit		X
Engineer (Gen. Pub.)	Ricky McVey	X	
Optometrist (Gen. Pub.)	Carl Carroll, RS, MBA		X
General Public	Keisha King	X	
General Public	Elin Armeau-Claggett, PA-C, PhD (Vice-Chair)	X	
General Public	Vacant		X

Others Present: Frederick Moore, MD – Health Director
 Sharon Hendricks – Finance Officer
 Jennifer Eastwood, MPH – QI Specialist

I. Call to Order

- A. The February 25, 2014 meeting of the Caswell County Board of Health was called to order by the Chair at 7:00 P.M.
- B. Introduction of new Board of Health member
 1. Jennifer White, RN was asked to introduce herself to the board.
 2. Then the rest of the Board of Health and Health Department staff members who were present briefly introduced themselves.

II. Public Comment

- A. None

III. Action Items

- A. Approval of Minutes

A motion was made by Cecil Page and seconded by Elin Armeau-Claggett, to approve the February 4 2014 Minutes of the Board Of Health as distributed in the packet. The motion carried on a vote of 9 to 0.

- B. Budget Amendment #3
 1. Dr. Moore said that this amendment moved some funds around with no change in the total budget. There were no questions from the board.

A motion was made by Carl Carroll and seconded by Cecil Page to approve Health Department Budget Amendment #3 as presented. The motion was approved on a vote of 9 to 0.

- C. Remote Participation in Board Meetings
 1. Dr. Moore included in the packet an article from the School of Government discussing the possibility of allowing remote participation in Board of Health meetings.
 2. Several years ago the board had discussed this possibility but Dr. Moore had been told that that was not allowed under North Carolina law. With this new information Dr. Moore wanted to know if the board would like for him to pursue this matter with the County Manager.
 3. The article suggested that the two main, potential issues with such a policy would

be:

- a. the establishment of a quorum by a distant participant, and
 - b. the deciding vote being made by a member who was not physically present
4. The article did not say these were insurmountable issues but they could possibly result in a challenge to a decision made by the Board of Health. A policy could be written taking these issues into consideration.
 5. The consensus of the board was that they did not wish to pursue this matter at this time.

D. Strategic Plan

1. Jennifer Eastwood reminded the board that at the last meeting they had been told of the recommendation from strategic planning team that the word "sanitation" be changed to "environment" in the mission statement of the Health Department.

A motion was made by Carl Carroll and seconded by Sharon Kupit to approve the change in the Health Department's Mission Statement which substituted the word environment for sanitation. The motion was approved on a vote of 9 to 0.

2. At the last Board of Health meeting, during the discussion about "regrets" to include in the Strategic Plan, Dr. Fuller stated that he regretted that the Health Department had not instituted a plan to screen all patients for intestinal parasites.
3. The only change recommended to the "Circle of Concern" was the lack of local access to Mental Health services. This was also a concern that was raised in the most recent Community Health Assessment.
4. Dr. Moore said that he had a discussion with Nate Hall about his experience in using ACT Medical to provide tele-psychiatry services in the county. While using this service would require a major commitment by the Health Department and there would be a significant financial risk. Despite this cost, we have requested information from this company to learn some more details so we can explore this possible option.
5. There was a general discussion about the need for improved access to local Mental Health services in Caswell County and what the role of the Health Department in trying to address this problem. This discussion included the topics of funding, grants, transportation, no show rates, group homes and the responsibility of our society to help those dealing with Mental Health issues.

A motion was made by Donald Fuller and seconded by Rose Satterfield to look into the financial and logistic feasibility of the Health Department providing Mental Health services in the coming fiscal year. The motion was approved on a vote of 8 to 1.

6. There was discussion about seeing what Mental Health resources were currently available to Caswell County residents as a part of this process.
7. Another part of the Health Department's Strategic Plan is an effort to increase the use of technology by implementing an electronic health record and to digitize the Environmental Health records.
8. Another goal is to try to figure out a way to provide Environmental Health with more clerical support. The board discussed several potential options to accomplish this goal.
9. There was a discussion about the need for Environmental Health to have access to a shower when they come in from the field.
10. The Health Department hopes to continue to increase the number of private insurances that they participate with as a way of responding to the Affordable Care Act.
11. Our Health Educator is focusing her efforts on childhood obesity prevention

- which is another priority of the Community Health Assessment. She is developing relationships with other community organizations and is involved with the schools in promoting physical activity.
12. The plan encouraged the Health Department to create a QI friendly environment by having at least one activity a year.
 13. Jennifer Eastwood reminded the board that the Strategic Plan was a living document that will change as the need arises. She said that the board needed to vote on the general direction of the plan but there would be adjustments made as the agency works on these issues.
 14. Elin Armeau-Claggett suggested that it would be nice to include some patient focused items in the section that discussed what the staff were proud of. Dr. Moore agreed that he was proud of providing quality care to the underserved.
 15. There was some discussion about marketing strategies for the Health Department.

A motion was made by Sharon Kupit and seconded by Carl Carroll to approve the Strategic Plan as amended. The motion was approved on a vote of 9 to 0.

- E. Accreditation Site Visit
 1. Jennifer Eastwood reminded the board that the Accreditation Site visit was going to take place in a few weeks and there was still room for another board member to sign up to be interviewed on March 12th from 1:30 – 2:00 pm.
- F. Board of Commissioner Actions
 1. The electronic health record request discussed at the last board meeting was approved by the Board of Commissioners.
 2. The 10 foot smoking restriction around the Health Department was turned down by a vote of 4 to 3 which was closer than expected. This issue will probably come back before the board in the next several years.
- G. Coal Ash Spill
 1. Dr. Moore gave an update of the status of this event.
 2. He said that as far as human use of the Dan River in Caswell County, this has not yet had a major impact. The testing of water has not showed high levels of toxins and the you water supplied by Danville inside Caswell County has not been affected. However, the long-term effects are not understood at present. There may be impact on fish and other wildlife that won't be known for years. The impact on recreational use of the river is also not known.
 3. Duke Power is attempting to dredge out the collapse from the river but has not made as much progress as they had hoped due to weather and water levels in the river.
 4. There have been very few official recommendations on use of the Dan River except to say that people should probably limit their exposure.
 5. Carl Carroll said that he had attended the meeting in Rockingham County last week and there were all sorts of TV cameras, reporters and governmental agencies in attendance. During this meeting there was a lot of “finger-pointing” and bureaucratic silo mentality. Hopefully there will be some lessons learned from this event. He said that in the last 10 years the recreational use of the Dan River has increased significantly and businesses have grown up around this use. This event may stifle this economic growth.
 6. Sharon Kupit said that she was concerned that this would end up just being a political and legal battle and that not enough attention would be paid to the environmental factors.
 7. Dr. Moore said that he was both hopeful and skeptical. When the head of Duke

Power said that his company would “make it right” that created some hope but that was not very specific and the devil is in the details. He hoped that a lot of resources would be used to clean up the river and that in 10 years it would be better than ever.

H. Finance Report

1. Next year's budget

- a. We have now received the fund balance figures from the county finance office for the beginning of this fiscal year. The county's numbers were more generous to us than our numbers showed so we are not going to dispute their calculations.
- b. The County Manager plays an important role in preparing budgets. The current County Manager has resigned and the County will be hiring an interim County Manager. We don't really know how the budget process will go this year under these circumstances but the law says that the County must have a budget by July 1.
- c. The process at the health department is that the health director develops a budget, the board of health approves the budget and then it is passed on to the County manager and the board of commissioners. The deadline for the Board of Health to approve a budget is the board's April meeting.
- d. Dr. Moore asked the board how they wanted to handle this process this year as it has been done in different ways in the past. After some discussion the board decided not to form a committee but to have a draft budget presented at the March meeting with a final vote at the April meeting.

2. Current Budget

- a. Dr. Moore said that in the current budget, and the expenditures were during well and were coming in under budget. However, revenues are having a major shortfall.
- b. A lot of time has been spent trying to figure out the causes of this revenue shortfall and it appears that there is no one major problem but a lot of little problems. The reasons were discussed in the packet in detail.
- c. Dr. Moore felt like there was enough money in the fund balance to cover this year but the fund balance is getting low and the revenue issue needs to be corrected.
- d. Dr. Moore said that in his view the health department was not here to compete with the private sector and if the private sector wanted to provide all the services that the health department did there really would not be a need for health department services. However the private sector usually accepts the paying patients and those with good insurance while the health department is committed to taking all patients whether they can pay for services or not. Our job is to make sure that everyone has access to care.
- e. The business model of the health department is to provide services to those that cannot pay for it; this is not a way to make a lot of money. This is why health departments are subsidized by local, state and federal funds. With one exception, all healthcare in Caswell County receives state or federal subsidy, why should our home health agency be any different. In the past home health has been a very lucrative program at the health department and it has paid for two thirds of the health department building as well as subsidizing many of the programs for many years. For many reasons those days seem to be over and the best

we can expect is to keep our head above water. The home health agency has had a few rough years and I think we need to work hard to try to make it viable but it may need some help in the form of a subsidy.

- f. Jennifer White said that there was a role for marketing of our agency as many of the healthcare referral sources may not be aware of our services or may just want to use the same companies they are used to. Dr. Moore agreed that there was a role for some marketing and education of referral sources.
- g. Cecil Paige asked if the health department had seen any impact of the Affordable Care Act. Dr. Moore said that when the North Carolina government decided not to expand Medicaid that limited the impact on health departments. However, private insurances seem to be more willing to contract with health departments now as a result of the ACA requiring them to deal with safety net providers. This has resulted in us becoming participating providers with more private insurances than we ever have before. Dr. Moore said that he thought the private insurance companies were taking a wait and see attitude about expanding care.

IV. Closed Session For Reasons of Personnel

A motion was made by Donald Fuller and seconded by Cecil Page to go into closed session to discuss the health director's annual evaluation. The motion was approved on a vote of 9 to 0.

A motion was made to come out of closed session. The motion was approved on a vote of 9 to 0.

V. Adjournment

- A. The Chair adjourned the meeting without objection.

Approved By: _____
Health Director _____ Date _____

_____ Date _____
Board of Health _____

Health Director's Report – March 25, 2014

I. Board of Health

A. Meeting schedule

1. The regular meetings of the Board of Health are held on the 4th Tuesday of each month and NC law requires the board to meet at least quarterly.
2. Most years the board has agreed to cancel the August and December meetings for vacation and holiday reasons. Does the board wish to continue this tradition?

II. Finance

A. Current Year's Budget

1. Budget Amendment #4
 - a. This amendment moves money between various line items to cover expenses but there is no net increase or decrease in the budget.
2. Budget Status (66.67%)
 - a. Expenses: the health department has spent 60% of this year's budget.
 - b. Revenue: total revenue is at 52% while earned revenue is that 48%.
 - c. We are currently running a deficit of about \$201,000 which is an improvement over last month but they still have a long way to go to reach a balanced budget.

B. Next Year's Budget

1. The draft budget included in the packet is a very rough first draft that is presented for discussion and help with making some choices for next year.
2. Fund Balance Status

Health Department Fund Balance Status	
Calculations for FY 12-13	
Beginning Fund Balance as of July 1, 2012	712,991
Non-County Revenue (7/1/2012 to 6/30/2013)	2,431,103
County Appropriation	387,076
Total Expenses (7/1/2012 to 6/30/2013)	2,864,386
Ending Fund Balance as of June 30, 2013	666,784
The above total is broken down into the following three individual fund balances as required by state rules	
Unrestricted	297,140
Women & Child Health	87,777
Pediatric Primary Care	281,867
Based on what was budgeted for the current fiscal year and what we think we will need based on the revenue shortfall this year, the amount of fund balance that is available for use in the next fiscal year is estimated to be the following:	
Unrestricted	0
Women & Child Health	156,944
Pediatric Primary Care	37,696

3. Draft Budget Summary

- a. **Total budget:** \$3,017,958 – this is a \$93,000 reduction from the current fiscal year. Salaries and benefits were calculated to show a \$3000 increase and operating expenses decreased by \$96,000.
- b. **County contribution:** \$639,926 – this is a \$268,000 increase over the current fiscal year and makes up approximately 21% of our budget. To put this in perspective, most of the surrounding counties contribute anywhere from 40% to 70% of their health department budget. The reason for the major increase is the revenue shortfall this year and the need to use a large portion of our fund balance to balance this year's budget. We based our revenue projections on the current years income so next year's revenue is also down. We are projecting a \$250,000 decrease in earned revenue for next year.

- c. Fund Balance – this budget uses all of our remaining fund balance. If things work out as budgeted it would mean that a year from now we would have no fund balance to use in FY 15-16. We have been talking about this possibility for several years and it looks like it may actually happen.
- 4. Proposed changes for discussion
 - a. Personnel
 - 1) No pay increases were included in this budget other than the standard 4% increase for coming off of probation and the taking on of supervision responsibilities. I discussed the possibility of merit increases with the County Manager but he told me not to include those in the budget. The board of commissioners, as in most years, are discussing an across-the-board pay increase but will not make a decision on that until late in the budget process. Any across-the-board increase in salary and benefits would be on top of this draft budget
 - 2) With the transition to an electronic medical record, we have included a part-time temporary position to work on scanning of medical records. We have looked into contracting for this service but that is extremely expensive and hiring a part-time temporary employee gives us more flexibility in getting the job done.
 - 3) We have eliminated a vacant home health RN position and there are some other options we can discuss if further personnel cuts are needed.
 - b. Non-Personnel
 - 1) Board of Health stipend – several years ago the Board of Health decided to stop the payment of \$40 per meeting attended to each board member. Does the board want to reinstate this stipend?
 - 2) With the hiring of a 60% nurse practitioner, we have eliminated the contract with UNC for a nurse midwife several days a month.
 - 3) The Home Health billing contract with CareAnyware has not met our expectations. This proposed budget brings the billing back into Home Health where for better or worse we will have more control over what is done and definitely more motivation to get it done.
 - 4) Our Environmental Health staff do not have access to shower facilities in their office. They spend a lot of time out in the field and can get quite dirty. This budget includes funds for a shower/bathroom in their current office.
 - 5) Our Environmental Health staff use their own trucks to haul equipment and drive on rough terrain. This budget includes the purchase of three Environmental Health trucks.

III. **Public Health Accreditation**

- A. The accreditation site visit went off in early March without significant problems.
- B. The reviewers had good things to say about our health department but we will not hear about their official recommendations for another week or so.
- C. The final Accreditation Board vote on whether we pastor not will not happen until June.

IV. **Miscellaneous Informational Items**

- A. Environmental Health Statistics
- B. NC and Caswell County Child Health Report Card

CASWELL COUNTY BUDGET AMENDMENT # _____
Health Department Amendment # 4

Be it ordained, the FY 2013-2014 Annual Budget Ordinance is hereby amended as follows:

PUBLIC HEALTH - 5110

<i>Expenditure Line</i>	<i>Account Code</i>	<i>Increase / (Decrease)</i>	<i>Amended Budget</i>
Salary 121	100.5110.121.000	(\$1,002.00)	\$1,578,120.00
Longevity 127	100.5110.127.000	(\$459.00)	\$22,731.00
SS / FICA 181	100.5110.181.000	(\$176.00)	\$118,828.00
Retirement 182	100.5110.182.000	(\$1,216.00)	\$108,294.00
Health Insurance 183	100.5110.183.000	(\$1,073.00)	\$211,390.00
Contracted Services 199	100.5110.199.000	(\$99.00)	\$516,553.00
Food & Provisions 220	100.5110.220.000	\$71.00	\$573.00
Program Supplies 230	100.5110.230.000	\$350.00	\$34,161.00
Pharmaceuticals 238	100.5110.238.000	\$429.00	\$38,882.00
Office Supplies 260	100.5110.260.000	(\$2,000.00)	\$9,843.00
Small Tools & Equip. 295	100.5110.295.000	(\$1,700.00)	\$42,733.00
Mileage 311	100.5110.311.000	(\$90.00)	\$107,463.00
Travel Subsistence 312	100.5110.312.000	\$400.00	\$5,333.00
Telephone 321	100.5110.321.000	(\$1,500.00)	\$9,156.00
Postage 325	100.5110.325.000	\$14.00	\$4,399.00
Printing 340	100.5110.340.000	(\$250.00)	\$1,634.00
Maint & Repair 352	100.5110.352.000	(\$500.00)	\$6,149.00
Advertising 370	100.5110.370.000	(\$25.00)	\$2,826.00
Laundry 392	100.5110.392.000	\$18.00	\$1,250.00
Training 395	100.5110.395.000	\$568.00	\$10,666.00
Rental of Copier 431	100.5110.431.000	(\$3,000.00)	\$6,500.00
Rental of Post Meter 432	100.5110.432.000	(\$200.00)	\$650.00
Dues, Subsc. & Pub. 491	100.5110.491.000	\$1,065.00	\$20,386.00
Capital Outlay 500	100.5110.500.000	\$10,375.00	\$16,792.00
TOTAL EXPENSE BUDGET:		\$0.00	\$3,111,620.00

<i>Revenue Lines</i>	<i>Account Code</i>	<i>Increase / (Decrease)</i>	<i>Amended Budget</i>
TOTAL REVENUE BUDGET:		\$0.00	\$3,111,620.00

Justification:

Move funds between lines to cover expenses.

That all Ordinances or portions of Ordinances in conflict are hereby repealed.

Approved by Health Director _____ Date _____

Approved by Board of Health _____ Date _____

Paula Seamster, Clerk to the Board _____ Date _____

Approved by the Caswell County Board of Commissioners

CASWELL COUNTY HEALTH DEPARTMENT (FY 2013-2014)

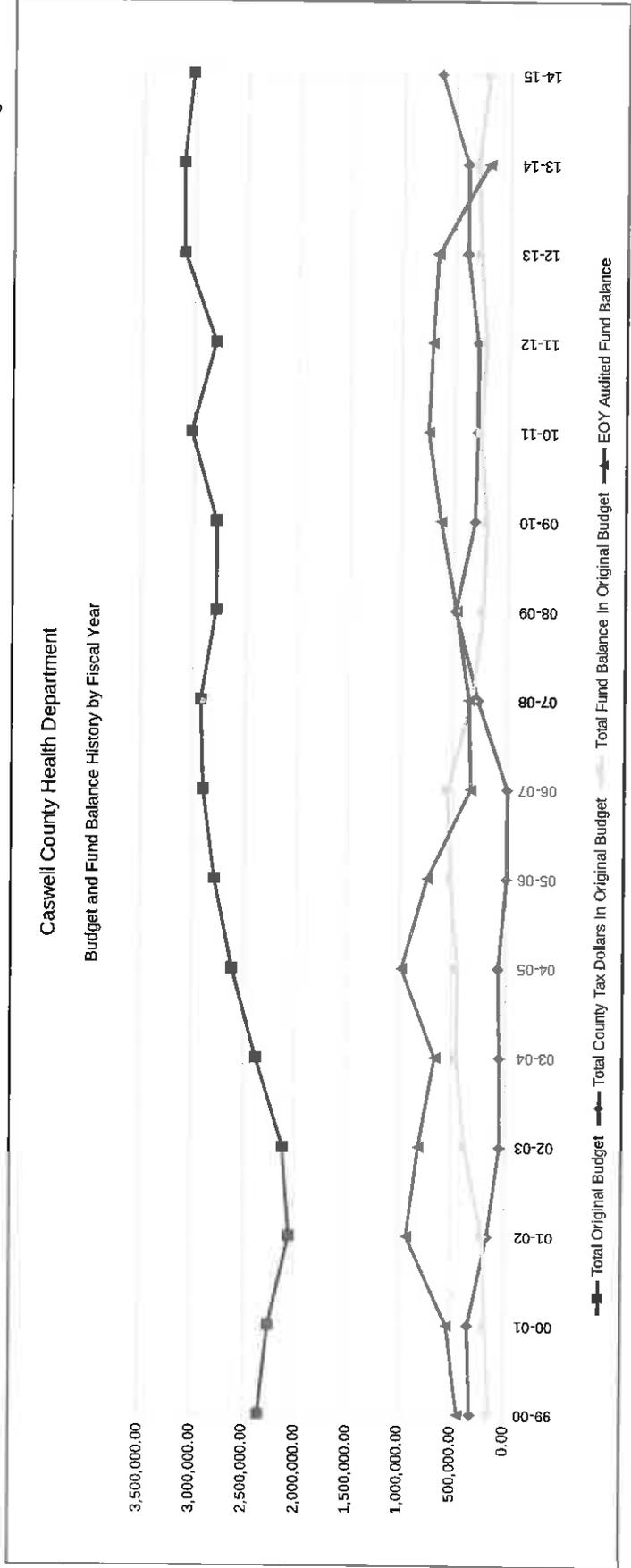
	Budget	Actual YTD	Balance	YTD = 66.67%
SALARY & BENEFITS SUBTOTAL	2,083,206.00	1,306,384.29	776,821.71	62.71%
Board Expenses 120	0.00	0.00	0.00	0.00%
Salary 121	1,578,120.00	983,551.88	594,568.12	62.32%
Call 122	43,843.00	23,231.00	20,612.00	52.99%
Longevity 127	22,731.00	21,764.52	966.48	95.75%
SS / FICA 181	118,828.00	75,935.55	42,892.45	63.90%
Retirement 182	108,294.00	70,858.37	37,435.63	65.43%
Health Insurance 183	211,390.00	131,042.97	80,347.03	61.99%
OPERATIONAL EXPENSE SUBTOTAL	1,028,414.00	562,682.47	465,731.53	54.71%
Contracted Services 199	516,553.00	248,785.91	267,767.09	48.16%
Food & Provisions 220	573.00	358.29	214.71	62.53%
Program Supplies 230	34,161.00	12,980.17	21,180.83	38.00%
Pharmaceuticals 238	38,882.00	25,432.60	13,449.40	65.41%
HH/CAP Med Supplies 239	188,000.00	118,187.68	69,812.32	62.87%
Office Supplies 260	9,843.00	6,435.50	3,407.50	65.38%
Small Tools & Equip. 295	42,733.00	29,868.39	12,864.61	69.90%
Mileage 311	107,463.00	59,014.97	48,448.03	54.92%
Travel Subsistence 312	5,333.00	3,212.60	2,120.40	60.24%
Telephone 321	9,156.00	6,412.92	2,743.08	70.04%
Postage 325	4,399.00	2,506.50	1,892.50	56.98%
Printing 340	1,634.00	763.65	870.35	46.74%
Maint & Repair 352	6,149.00	4,000.80	2,148.20	65.06%
Advertising 370	2,826.00	2,362.64	463.36	83.60%
Laundry 392	1,250.00	437.38	812.62	34.99%
Training 395	10,666.00	3,552.50	7,113.50	33.31%
Rental of Copier 431	6,500.00	5,868.28	631.72	90.28%
Rental of Post Meter 432	650.00	408.00	242.00	62.77%
Ins & Bonding 450	4,465.00	4,283.55	181.45	95.94%
Dues, Subsc. & Pub. 491	20,386.00	17,435.14	2,950.86	85.53%
Capital Outlay 500	16,792.00	10,375.00	6,417.00	61.79%
TOTAL EXPENSES	3,111,620.00	1,869,066.76	1,242,553.24	60.07%
TOTAL REVENUE	3,111,620.00	1,618,243.47	1,493,376.53	52.01%
STATE SUBTOTAL	635,330.00	286,707.86	348,622.14	45.13%
(101) COUNTY APPROP	371,576.00	228,110.52	143,465.48	61.39%
(103) UR FUND BAL	96,042.00	69,016.64	27,025.36	71.86%
(102) WCH FUND BAL	134,923.00	123,708.01	11,214.99	91.69%
(102) PPC FUND BAL	55,081.00	37,242.44	17,838.56	67.61%
OTHER SUBTOTAL	657,622.00	458,077.61	199,544.39	69.66%
(102) MCD - REGULAR	973,583.00	529,626.96	443,956.04	54.40%
(102) MCD - SETTLEMENT	0.00	0.00	0.00	0.00%
(103) MCR - REGULAR	703,801.00	273,747.40	430,053.60	38.90%
(103) MCR - HMO	57,437.00	21,392.14	36,044.86	37.24%
(103) PRIVATE INS	15,047.00	10,937.07	4,109.93	72.69%
(103) DIRECT FEES	68,800.00	37,754.43	31,045.57	54.88%
EARNED SUBTOTAL	1,818,668.00	873,458.00	945,210.00	48.03%
BALANCE	0.00	-250,823.29		

Caswell County Health Department Recent Budget & Fund Balance History

Fiscal Year	Original Budget		County Tax Dollars		Fund Balance		
	Total Original Budget	% Change From Prior FY	Total County Tax Dollars In Original Budget	% of Budget	Total Fund Balance In Original Budget	% of Budget	EOY Audited Fund Balance
99-00	2,344,628.00		315,625.00	13.46%	131,000.00	5.59%	436,655.00
00-01	2,250,377.00	-4.02%	339,241.00	15.07%	169,373.00	7.53%	538,850.00
01-02	2,056,049.00	-8.64%	159,828.00	7.77%	204,183.00	9.93%	923,802.00
02-03	2,120,474.00	3.13%	53,019.00	2.50%	371,356.00	17.51%	810,050.00
03-04	2,385,359.00	12.49%	57,468.00	2.41%	451,254.00	18.92%	660,551.00
04-05	2,611,872.00	9.50%	74,804.00	2.86%	444,230.00	17.01%	977,874.00
05-06	2,787,941.00	6.74%	0.00	0.00%	517,505.00	18.56%	738,525.00
06-07	2,896,919.00	3.91%	0.00	0.00%	549,750.00	18.98%	335,518.00
07-08	2,925,271.00	0.98%	269,957.00	9.23%	322,146.00	11.01%	355,517.00
08-09	2,782,496.00	-4.88%	481,769.00	17.31%	219,148.00	7.88%	477,210.00
09-10	2,778,888.00	-0.13%	308,421.00	11.10%	195,350.00	7.03%	630,036.00
10-11	3,021,153.00	8.72%	285,253.00	9.44%	251,909.00	8.34%	748,016.00
11-12	2,790,669.00	-7.63%	285,253.00	10.22%	204,966.00	7.34%	712,991.00
12-13	3,093,245.00	10.84%	387,076.00	12.51%	256,526.00	8.29%	666,784.00
13-14	3,105,817.00	0.41%	387,290.00	12.47%	286,046.00	9.21%	194,640.00
14-15	3,017,958.00	-2.83%	639,926.00	21.20%	194,429.00	6.44%	-472,144.00

Budgeted FB + County Tax Dollars	Variance From Average Budget	% of Orig Budget
446,625.00	(\$85,358.07)	19%
508,614.00	(\$23,369.07)	23%
364,011.00	(\$167,972.07)	18%
424,375.00	(\$107,608.07)	20%
508,722.00	(\$23,261.07)	21%
519,034.00	(\$12,949.07)	20%
517,505.00	(\$14,478.07)	19%
549,750.00	\$17,766.93	19%
592,103.00	\$60,119.93	20%
700,917.00	\$168,933.93	25%
503,771.00	(\$28,212.07)	18%
537,162.00	\$5,178.93	18%
490,219.00	(\$41,764.07)	18%
643,602.00	\$111,618.93	21%
673,336.00	\$141,352.93	22%

531,983.07 = Average



		1	4	5	6
	Net →	0.00	0.00	0.00	0.00
		ADM	PHP	EH	CAP
REVENUE					
82	TOTAL STATE GRANTS	293,154.00	30,720.00	5,000.00	0.00
83	Medicaid	0.00	0.00	0.00	100,000.00
84	Medicare	0.00	0.00	0.00	0.00
85	MCR-HMO	0.00	0.00	0.00	0.00
86	Private Ins.	0.00	0.00	0.00	0.00
87	Direct Fees	0.00	0.00	50,000.00	0.00
89	County Tax Appropriation	11,178.00	0.00	249,882.00	38,565.00
90	WCH Fund Balance	0.00	0.00	0.00	0.00
91	UR Fund Balance	0.00	0.00	0.00	0.00
92	PPC Fund Balance	0.00	0.00	0.00	0.00
99	TOTAL NON-STATE REVENUE	11,178.00	0.00	299,882.00	138,565.00
100	GRAND TOTAL REVENUE	304,332.00	30,720.00	304,882.00	138,565.00

EXPENSES					
1	Board Salary & Expenses (120)	5,280.00	0.00	0.00	0.00
2	Salary (121)	23,988.00	19,911.00	146,538.00	74,717.00
3	On Call (122)	0.00	0.00	0.00	0.00
4	Longevity (127)	168.00	80.00	2,383.00	692.00
5	SS/FICA (181)	1,848.00	1,530.00	11,393.00	5,769.00
6	Retirement (182)	1,048.00	1,434.00	10,678.00	5,395.00
7	Health Ins. (183)	2,510.00	3,779.00	19,240.00	12,342.00
8	Vacation Pay Out	0.00	0.00	0.00	0.00
13	TOTAL SALARY & BENEFITS	34,842.00	26,734.00	190,232.00	98,915.00
14	Contracted Services (199)	215,000.00	0.00	3,500.00	2,000.00
15	Food & Provisions (220)	0.00	0.00	0.00	0.00
16	Program Supplies (230)	0.00	1,936.00	4,500.00	0.00
17	Pharmaceuticals (238)	0.00	0.00	0.00	0.00
18	HH/CAP Medical Supplies (239)	0.00	0.00	0.00	32,000.00
19	Office Supplies (260)	11,390.00	0.00	0.00	0.00
20	Small Tools/Equipment (295)	2,500.00	0.00	1,000.00	500.00
21	Travel Mileage (311)	2,500.00	1,500.00	5,000.00	4,500.00
22	Travel Subsistence (312)	500.00	250.00	2,500.00	0.00
23	Telephone (321)	6,800.00	0.00	900.00	500.00
24	Postage (325)	100.00	50.00	1,000.00	100.00
25	Printing (340)	250.00	0.00	100.00	50.00
26	Maintenance & Repair (352)	5,000.00	0.00	1,000.00	0.00
27	Advertising (370)	300.00	0.00	300.00	0.00
28	Laundry & Dry Cleaning (392)	0.00	0.00	0.00	0.00
29	Training/Employee Ed. Exp. (395)	1,000.00	250.00	1,500.00	0.00
30	Rental of Copier (431)	9,500.00	0.00	0.00	0.00
31	Rental of Postage Meter (432)	650.00	0.00	0.00	0.00
32	Insurance & Bonding (450)	6,000.00	0.00	3,000.00	0.00
33	Dues & Subscriptions (491)	8,000.00	0.00	350.00	0.00
34	Capital Outlay (550)	0.00	0.00	90,000.00	0.00
99	TOT. OPERATING EXPENSES	269,490.00	3,986.00	114,650.00	39,650.00
100	GRAND TOTAL	304,332.00	30,720.00	304,882.00	138,565.00

		7	8	9	10
Net →		0.00	0.00	0.00	0.00
		HH	AH	CC4C	CH
REVENUE					
82	TOTAL STATE GRANTS	0.00	0.00	691.00	23,539.00
83	Medicaid	427,000.00	40,000.00	37,500.00	85,000.00
84	Medicare	550,000.00	500.00	0.00	0.00
85	MCR-HMO	35,000.00	0.00	0.00	0.00
86	Private Ins.	13,000.00	1,250.00	0.00	50.00
87	Direct Fees	1,500.00	6,000.00	0.00	250.00
89	County Tax Appropriation	85,124.00	147,527.00	0.00	0.00
90	WCH Fund Balance	0.00	0.00	7,583.00	68,199.00
91	UR Fund Balance	0.00	0.00	0.00	0.00
92	PPC Fund Balance	0.00	0.00	0.00	0.00
99	TOTAL NON-STATE REVENUE	1,111,624.00	195,277.00	45,083.00	153,499.00
100	GRAND TOTAL REVENUE	1,111,624.00	195,277.00	45,774.00	177,038.00

EXPENSES					
1	Board Salary & Expenses (120)	0.00	0.00	0.00	0.00
2	Salary (121)	568,255.00	140,879.00	32,627.00	122,120.00
3	On Call (122)	26,748.00	0.00	0.00	0.00
4	Longevity (127)	6,866.00	2,085.00	0.00	2,222.00
5	SS/FICA (181)	46,043.00	10,937.00	2,496.00	9,513.00
6	Retirement (182)	39,820.00	9,781.00	2,340.00	8,661.00
7	Health Ins. (183)	70,092.00	19,320.00	5,661.00	15,847.00
8	Vacation Pay Out	0.00	0.00	0.00	0.00
13	TOTAL SALARY & BENEFITS	757,824.00	183,002.00	43,124.00	158,363.00
14	Contracted Services (199)	115,000.00	2,500.00	0.00	6,000.00
15	Food & Provisions (220)	300.00	0.00	0.00	0.00
16	Program Supplies (230)	0.00	2,700.00	0.00	2,000.00
17	Pharmaceuticals (238)	0.00	4,500.00	0.00	4,000.00
18	HH/CAP Medical Supplies (239)	150,000.00	0.00	0.00	0.00
19	Office Supplies (260)	0.00	0.00	0.00	0.00
20	Small Tools/Equipment (295)	500.00	250.00	0.00	4,000.00
21	Travel Mileage (311)	75,000.00	500.00	2,100.00	1,200.00
22	Travel Subsistence (312)	500.00	50.00	100.00	100.00
23	Telephone (321)	1,200.00	0.00	0.00	0.00
24	Postage (325)	500.00	400.00	75.00	300.00
25	Printing (340)	300.00	150.00	200.00	100.00
26	Maintenance & Repair (352)	0.00	300.00	0.00	0.00
27	Advertising (370)	1,500.00	150.00	50.00	150.00
28	Laundry & Dry Cleaning (392)	0.00	175.00	0.00	100.00
29	Training/Employee Ed. Exp. (395)	4,000.00	500.00	50.00	700.00
30	Rental of Copier (431)	0.00	0.00	0.00	0.00
31	Rental of Postage Meter (432)	0.00	0.00	0.00	0.00
32	Insurance & Bonding (450)	0.00	0.00	0.00	0.00
33	Dues & Subscriptions (491)	5,000.00	100.00	75.00	25.00
34	Capital Outlay (550)	0.00	0.00	0.00	0.00
99	TOT. OPERATING EXPENSES	353,800.00	12,275.00	2,650.00	18,675.00
100	GRAND TOTAL	1,111,624.00	195,277.00	45,774.00	177,038.00

		11	12	15	16
	Net →	0.00	0.00	0.00	0.00
		CD	FP	MH	PPC
REVENUE					
82	TOTAL STATE GRANTS	10,911.00	68,029.00	15,466.00	53,000.00
83	Medicaid	0.00	60,000.00	26,000.00	75,000.00
84	Medicare	0.00	0.00	0.00	0.00
85	MCR-HMO	0.00	0.00	0.00	0.00
86	Private Ins.	0.00	2,000.00	100.00	500.00
87	Direct Fees	0.00	2,000.00	200.00	150.00
89	County Tax Appropriation	2,232.00	0.00	11,520.00	3,350.00
90	WCH Fund Balance	0.00	35,951.00	45,000.00	0.00
91	UR Fund Balance	0.00	0.00	0.00	0.00
92	PPC Fund Balance	0.00	0.00	0.00	37,696.00
99	TOTAL NON-STATE REVENUE	2,232.00	99,951.00	82,820.00	116,696.00
100	GRAND TOTAL REVENUE	13,143.00	167,980.00	98,286.00	169,696.00

EXPENSES					
1	Board Salary & Expenses (120)	0.00	0.00	0.00	0.00
2	Salary (121)	9,948.00	99,339.00	66,748.00	81,509.00
3	On Call (122)	0.00	0.00	0.00	17,101.00
4	Longevity (127)	389.00	2,104.00	1,806.00	1,508.00
5	SS/FICA (181)	791.00	7,761.00	5,245.00	7,659.00
6	Retirement (182)	742.00	7,032.00	4,902.00	6,951.00
7	Health Ins. (183)	1,098.00	12,744.00	8,460.00	10,410.00
8	Vacation Pay Out	0.00	0.00	0.00	0.00
13	TOTAL SALARY & BENEFITS	12,968.00	128,980.00	87,161.00	125,138.00
14	Contracted Services (199)	50.00	2,500.00	4,000.00	41,208.00
15	Food & Provisions (220)	0.00	0.00	50.00	0.00
16	Program Supplies (230)	0.00	4,000.00	2,000.00	1,500.00
17	Pharmaceuticals (238)	0.00	30,000.00	1,000.00	350.00
18	HH/CAP Medical Supplies (239)	0.00	0.00	0.00	0.00
19	Office Supplies (260)	0.00	0.00	0.00	0.00
20	Small Tools/Equipment (295)	0.00	100.00	2,000.00	50.00
21	Travel Mileage (311)	0.00	200.00	200.00	200.00
22	Travel Subsistence (312)	0.00	200.00	100.00	100.00
23	Telephone (321)	0.00	0.00	0.00	0.00
24	Postage (325)	50.00	350.00	300.00	250.00
25	Printing (340)	0.00	125.00	75.00	150.00
26	Maintenance & Repair (352)	0.00	250.00	200.00	50.00
27	Advertising (370)	0.00	300.00	100.00	200.00
28	Laundry & Dry Cleaning (392)	25.00	125.00	75.00	175.00
29	Training/Employee Ed. Exp. (395)	50.00	800.00	1,000.00	300.00
30	Rental of Copier (431)	0.00	0.00	0.00	0.00
31	Rental of Postage Meter (432)	0.00	0.00	0.00	0.00
32	Insurance & Bonding (450)	0.00	0.00	0.00	0.00
33	Dues & Subscriptions (491)	0.00	50.00	25.00	25.00
34	Capital Outlay (550)	0.00	0.00	0.00	0.00
99	TOT. OPERATING EXPENSES	175.00	39,000.00	11,125.00	44,558.00
100	GRAND TOTAL	13,143.00	167,980.00	98,286.00	169,696.00

		17	18	19	20
Net →		0.00	0.00	0.00	0.00
		PCM	STI	TB	WBF
REVENUE					
82	TOTAL STATE GRANTS	0.00	1,554.00	2,199.00	24,278.00
83	Medicaid	45,000.00	3,500.00	200.00	0.00
84	Medicare	0.00	0.00	0.00	0.00
85	MCR-HMO	0.00	0.00	0.00	0.00
86	Private Ins.	0.00	100.00	0.00	0.00
87	Direct Fees	0.00	0.00	1,000.00	0.00
89	County Tax Appropriation	13,702.00	62,555.00	7,358.00	601.00
90	WCH Fund Balance	0.00	0.00	0.00	0.00
91	UR Fund Balance	0.00	0.00	0.00	0.00
92	PPC Fund Balance	0.00	0.00	0.00	0.00
99	TOTAL NON-STATE REVENUE	58,702.00	66,155.00	8,558.00	601.00
100	GRAND TOTAL REVENUE	58,702.00	67,709.00	10,757.00	24,879.00
EXPENSES					
1	Board Salary & Expenses (120)	0.00	0.00	0.00	0.00
2	Salary (121)	44,647.00	46,432.00	5,109.00	16,018.00
3	On Call (122)	0.00	0.00	0.00	0.00
4	Longevity (127)	0.00	1,008.00	150.00	150.00
5	SS/FICA (181)	3,416.00	3,630.00	403.00	1,237.00
6	Retirement (182)	3,202.00	3,268.00	377.00	1,160.00
7	Health Ins. (183)	6,047.00	5,542.00	863.00	3,764.00
8	Vacation Pay Out	0.00	0.00	0.00	0.00
13	TOTAL SALARY & BENEFITS	57,312.00	59,880.00	6,902.00	22,329.00
14	Contracted Services (199)	0.00	3,000.00	700.00	100.00
15	Food & Provisions (220)	0.00	0.00	0.00	0.00
16	Program Supplies (230)	0.00	2,000.00	100.00	250.00
17	Pharmaceuticals (238)	0.00	2,054.00	2,000.00	0.00
18	HH/CAP Medical Supplies (239)	0.00	0.00	0.00	0.00
19	Office Supplies (260)	0.00	0.00	0.00	0.00
20	Small Tools/Equipment (295)	0.00	100.00	0.00	0.00
21	Travel Mileage (311)	1,000.00	100.00	500.00	1,000.00
22	Travel Subsistence (312)	0.00	0.00	200.00	500.00
23	Telephone (321)	0.00	0.00	0.00	0.00
24	Postage (325)	75.00	150.00	30.00	0.00
25	Printing (340)	0.00	50.00	25.00	0.00
26	Maintenance & Repair (352)	0.00	100.00	0.00	0.00
27	Advertising (370)	0.00	100.00	0.00	500.00
28	Laundry & Dry Cleaning (392)	0.00	50.00	25.00	0.00
29	Training/Employee Ed. Exp. (395)	250.00	100.00	250.00	200.00
30	Rental of Copier (431)	0.00	0.00	0.00	0.00
31	Rental of Postage Meter (432)	0.00	0.00	0.00	0.00
32	Insurance & Bonding (450)	0.00	0.00	0.00	0.00
33	Dues & Subscriptions (491)	65.00	25.00	25.00	0.00
34	Capital Outlay (550)	0.00	0.00	0.00	0.00
99	TOT. OPERATING EXPENSES	1,390.00	7,829.00	3,855.00	2,550.00
100	GRAND TOTAL	58,702.00	67,709.00	10,757.00	24,879.00

		22	23	24	50
Net →		0.00	0.00	0.00	0.00
		WCS	WGA	WNE	WIC-TOTAL
REVENUE					
82	TOTAL STATE GRANTS	61,068.00	8,989.00	22,205.00	116,540.00
83	Medicaid	0.00	0.00	0.00	0.00
84	Medicare	0.00	0.00	0.00	0.00
85	MCR-HMO	0.00	0.00	0.00	0.00
86	Private Ins.	0.00	0.00	0.00	0.00
87	Direct Fees	0.00	0.00	0.00	0.00
89	County Tax Appropriation	5,377.00	503.00	452.00	6,933.00
90	WCH Fund Balance	0.00	0.00	0.00	0.00
91	UR Fund Balance	0.00	0.00	0.00	0.00
92	PPC Fund Balance	0.00	0.00	0.00	0.00
99	TOTAL NON-STATE REVENUE	5,377.00	503.00	452.00	6,933.00
100	GRAND TOTAL REVENUE	66,445.00	9,492.00	22,657.00	123,473.00

EXPENSES					
1	Board Salary & Expenses (120)	0.00	0.00	0.00	0.00
2	Salary (121)	46,616.00	6,492.00	14,875.00	84,001.00
3	On Call (122)	0.00	0.00	0.00	0.00
4	Longevity (127)	984.00	146.00	311.00	1,591.00
5	SS/FICA (181)	3,642.00	508.00	1,162.00	6,549.00
6	Retirement (182)	3,413.00	476.00	1,089.00	6,138.00
7	Health Ins. (183)	9,440.00	1,145.00	2,321.00	16,670.00
8	Vacation Pay Out	0.00	0.00	0.00	0.00
13	TOTAL SALARY & BENEFITS	64,095.00	8,767.00	19,758.00	114,949.00
14	Contracted Services (199)	200.00	0.00	0.00	300.00
15	Food & Provisions (220)	0.00	0.00	0.00	0.00
16	Program Supplies (230)	2,000.00	0.00	2,499.00	4,749.00
17	Pharmaceuticals (238)	0.00	0.00	0.00	0.00
18	HH/CAP Medical Supplies (239)	0.00	0.00	0.00	0.00
19	Office Supplies (260)	0.00	0.00	0.00	0.00
20	Small Tools/Equipment (295)	50.00	0.00	0.00	50.00
21	Travel Mileage (311)	100.00	100.00	100.00	1,300.00
22	Travel Subsistence (312)	0.00	100.00	0.00	600.00
23	Telephone (321)	0.00	0.00	0.00	0.00
24	Postage (325)	0.00	200.00	0.00	200.00
25	Printing (340)	0.00	125.00	0.00	125.00
26	Maintenance & Repair (352)	0.00	0.00	0.00	0.00
27	Advertising (370)	0.00	200.00	100.00	800.00
28	Laundry & Dry Cleaning (392)	0.00	0.00	0.00	0.00
29	Training/Employee Ed. Exp. (395)	0.00	0.00	200.00	400.00
30	Rental of Copier (431)	0.00	0.00	0.00	0.00
31	Rental of Postage Meter (432)	0.00	0.00	0.00	0.00
32	Insurance & Bonding (450)	0.00	0.00	0.00	0.00
33	Dues & Subscriptions (491)	0.00	0.00	0.00	0.00
34	Capital Outlay (550)	0.00	0.00	0.00	0.00
99	TOT. OPERATING EXPENSES	2,350.00	725.00	2,899.00	8,524.00
100	GRAND TOTAL	66,445.00	9,492.00	22,657.00	123,473.00

		51	52	53	54
Net --		0.00	0.00	0.00	0.00
		GA-TOTAL	EH-TOTAL	HH-TOTAL	PH-TOTAL
REVENUE					
82	TOTAL STATE GRANTS	323,874.00	5,000.00	0.00	175,389.00
83	Medicaid	0.00	0.00	527,000.00	372,200.00
84	Medicare	0.00	0.00	550,000.00	500.00
85	MCR-HMO	0.00	0.00	35,000.00	0.00
86	Private Ins.	0.00	0.00	13,000.00	4,000.00
87	Direct Fees	0.00	50,000.00	1,500.00	9,600.00
89	County Tax Appropriation	11,178.00	249,882.00	123,689.00	248,244.00
90	WCH Fund Balance	0.00	0.00	0.00	156,733.00
91	UR Fund Balance	0.00	0.00	0.00	0.00
92	PPC Fund Balance	0.00	0.00	0.00	37,696.00
99	TOTAL NON-STATE REVENUE	11,178.00	299,882.00	1,250,189.00	828,973.00
100	GRAND TOTAL REVENUE	335,052.00	304,882.00	1,250,189.00	1,004,362.00

EXPENSES					
1	Board Salary & Expenses (120)	5,280.00	0.00	0.00	0.00
2	Salary (121)	43,899.00	146,538.00	642,972.00	649,358.00
3	On Call (122)	0.00	0.00	26,748.00	17,101.00
4	Longevity (127)	248.00	2,383.00	7,558.00	11,272.00
5	SS/FICA (181)	3,378.00	11,393.00	51,812.00	51,851.00
6	Retirement (182)	2,482.00	10,678.00	45,215.00	47,256.00
7	Health Ins. (183)	6,289.00	19,240.00	82,434.00	85,992.00
8	Vacation Pay Out	0.00	0.00	0.00	0.00
13	TOTAL SALARY & BENEFITS	61,576.00	190,232.00	856,739.00	862,830.00
14	Contracted Services (199)	215,000.00	3,500.00	117,000.00	59,958.00
15	Food & Provisions (220)	0.00	0.00	300.00	50.00
16	Program Supplies (230)	1,936.00	4,500.00	0.00	14,300.00
17	Pharmaceuticals (238)	0.00	0.00	0.00	43,904.00
18	HH/CAP Medical Supplies (239)	0.00	0.00	182,000.00	0.00
19	Office Supplies (260)	11,390.00	0.00	0.00	0.00
20	Small Tools/Equipment (295)	2,500.00	1,000.00	1,000.00	6,500.00
21	Travel Mileage (311)	4,000.00	5,000.00	79,500.00	6,000.00
22	Travel Subsistence (312)	750.00	2,500.00	500.00	850.00
23	Telephone (321)	6,800.00	900.00	1,700.00	0.00
24	Postage (325)	150.00	1,000.00	600.00	1,980.00
25	Printing (340)	250.00	100.00	350.00	875.00
26	Maintenance & Repair (352)	5,000.00	1,000.00	0.00	900.00
27	Advertising (370)	300.00	300.00	1,500.00	1,050.00
28	Laundry & Dry Cleaning (392)	0.00	0.00	0.00	750.00
29	Training/Employee Ed. Exp. (395)	1,250.00	1,500.00	4,000.00	4,000.00
30	Rental of Copier (431)	9,500.00	0.00	0.00	0.00
31	Rental of Postage Meter (432)	650.00	0.00	0.00	0.00
32	Insurance & Bonding (450)	6,000.00	3,000.00	0.00	0.00
33	Dues & Subscriptions (491)	8,000.00	350.00	5,000.00	415.00
34	Capital Outlay (550)	0.00	90,000.00	0.00	0.00
99	TOT. OPERATING EXPENSES	273,476.00	114,650.00	393,450.00	141,532.00
100	GRAND TOTAL	335,052.00	304,882.00	1,250,189.00	1,004,362.00

		55	FY 13-14		Prop. Line
Net →		0.00	Budget	Variance	% of Tot.
		HD-TOTAL			
REVENUE					
82	TOTAL STATE GRANTS	620,803.00	635,330.00	-14,527.00	20.57%
83	Medicaid	899,200.00	973,583.00	-74,383.00	29.79%
84	Medicare	550,500.00	703,801.00	-153,301.00	18.24%
85	MCR-HMO	35,000.00	57,437.00	-22,437.00	1.16%
86	Private Ins.	17,000.00	15,047.00	1,953.00	0.56%
87	Direct Fees	61,100.00	68,800.00	-7,700.00	2.02%
89	County Tax Appropriation	639,926.00	371,576.00	268,350.00	21.20%
90	WCH Fund Balance	156,733.00	184,923.00	-28,190.00	5.19%
91	UR Fund Balance	0.00	46,042.00	-46,042.00	0.00%
92	PPC Fund Balance	37,696.00	55,081.00	-17,385.00	1.25%
99	TOTAL NON-STATE REVENUE	2,397,155.00	2,476,290.00	-79,135.00	79.43%
100	GRAND TOTAL REVENUE	3,017,958.00	3,111,620.00	-93,662.00	100.00%
EXPENSES					
1	Board Salary & Expenses (120)	5,280.00	0.00	5,280.00	0.17%
2	Salary (121)	1,566,768.00	1,578,120.00	-11,352.00	51.91%
3	On Call (122)	43,849.00	43,843.00	6.00	1.45%
4	Longevity (127)	23,052.00	22,731.00	321.00	0.76%
5	SS/FICA (181)	124,983.00	118,828.00	6,155.00	4.14%
6	Retirement (182)	111,769.00	108,294.00	3,475.00	3.70%
7	Health Ins. (183)	210,625.00	211,390.00	-765.00	6.98%
8	Vacation Pay Out	0.00	0.00	0.00	0.00%
13	TOTAL SALARY & BENEFITS	2,086,326.00	2,083,206.00	3,120.00	69.13%
14	Contracted Services (199)	395,758.00	516,553.00	-120,795.00	13.11%
15	Food & Provisions (220)	350.00	573.00	-223.00	0.01%
16	Program Supplies (230)	25,485.00	34,161.00	-8,676.00	0.84%
17	Pharmaceuticals (238)	43,904.00	38,882.00	5,022.00	1.45%
18	HH/CAP Medical Supplies (239)	182,000.00	188,000.00	-6,000.00	6.03%
19	Office Supplies (260)	11,390.00	9,843.00	1,547.00	0.38%
20	Small Tools/Equipment (295)	11,050.00	42,733.00	-31,683.00	0.37%
21	Travel Mileage (311)	95,800.00	107,463.00	-11,663.00	3.17%
22	Travel Subsistence (312)	5,200.00	5,333.00	-133.00	0.17%
23	Telephone (321)	9,400.00	9,156.00	244.00	0.31%
24	Postage (325)	3,930.00	4,399.00	-469.00	0.13%
25	Printing (340)	1,700.00	1,634.00	66.00	0.06%
26	Maintenance & Repair (352)	6,900.00	6,149.00	751.00	0.23%
27	Advertising (370)	3,950.00	2,826.00	1,124.00	0.13%
28	Laundry & Dry Cleaning (392)	750.00	1,250.00	-500.00	0.02%
29	Training/Employee Ed. Exp. (395)	11,150.00	10,666.00	484.00	0.37%
30	Rental of Copier (431)	9,500.00	6,500.00	3,000.00	0.31%
31	Rental of Postage Meter (432)	650.00	650.00	0.00	0.02%
32	Insurance & Bonding (450)	9,000.00	4,465.00	4,535.00	0.30%
33	Dues & Subscriptions (491)	13,765.00	20,386.00	-6,621.00	0.46%
34	Capital Outlay (550)	90,000.00	16,792.00	73,208.00	2.98%
99	TOT. OPERATING EXPENSES	931,632.00	1,028,414.00	-96,782.00	30.87%
100	GRAND TOTAL	3,017,958.00	3,111,620.00	-93,662.00	100.00%

Net →	0.00	0.00	0.00	0.00
	ADM	PHP	EH	CAP
REVENUE				
EXPENSE VARIANCE				
Board Salary & Expenses (120)	5,280	0	0	0
Salary (121)	17,266	3,579	3,942	(27,476)
On Call (122)	0	0	0	0
Longevity (127)	116	(2)	104	94
SS/FICA (181)	1,200	274	210	(1,555)
Retirement (182)	457	273	343	(1,647)
Health Ins. (183)	949	671	326	(4,250)
Vacation Pay Out	0	0	0	0
TOTAL SALARY & BENEFITS	25,268	4,795	4,925	(34,834)
Contracted Services (199)	(55,983)	(74)	(800)	1,000
Food & Provisions (220)	(146)	0	0	0
Program Supplies (230)	0	(3,161)	500	0
Pharmaceuticals (238)	0	(500)	0	0
HH/CAP Medical Supplies (239)	0	0	0	(6,000)
Office Supplies (260)	1,547	0	0	0
Small Tools/Equipment (295)	(14,349)	0	0	(2,036)
Travel Mileage (311)	659	(500)	(8,000)	(423)
Travel Subsistence (312)	0	0	500	0
Telephone (321)	1,800	(560)	0	50
Postage (325)	0	0	0	0
Printing (340)	250	0	34	16
Maintenance & Repair (352)	750	0	600	0
Advertising (370)	300	0	300	0
Laundry & Dry Cleaning (392)	0	0	0	0
Training/Employee Ed. Exp. (395)	500	0	216	(250)
Rental of Copier (431)	3,000	0	0	0
Rental of Postage Meter (432)	0	0	0	0
Insurance & Bonding (450)	1,535	0	3,000	0
Dues & Subscriptions (491)	2,428	0	200	0
Capital Outlay (550)	(10,375)	0	90,000	0
TOT. OPERATING EXPENSES	(68,084)	(4,795)	86,550	(7,643)
GRAND TOTAL EXPENSE VARIANCE	(42,816)	0	91,475	(42,477)

REVENUE VARIANCE				
State	6,006	0	250	0
Medicaid	0	0	0	(40,000)
Medicare	0	0	0	0
MCR-HMO	0	0	0	0
Private Ins.	0	0	0	0
Direct Fees	0	0	399	0
County	(28,822)	0	90,826	38,565
WCH FB	(10,000)	0	0	0
UR FB	(5,000)	0	0	(41,042)
PPC FB	(5,000)	0	0	0
GRAND TOTAL REVENUE VARIANCE	(42,816)	0	91,475	(42,477)

Net →	0.00	0.00	0.00	0.00
	HH	AH	CC4C	CH
REVENUE				
EXPENSE VARIANCE				
Board Salary & Expenses (120)	0	0	0	0
Salary (121)	2,647	10,696	22	5,515
On Call (122)	(4,495)	0	0	0
Longevity (127)	(1,123)	559	(11)	605
SS/FICA (181)	(777)	2,236	0	2,990
Retirement (182)	(1,505)	538	34	2,575
Health Ins. (183)	(383)	(65)	0	2,803
Vacation Pay Out	0	0	0	0
TOTAL SALARY & BENEFITS	(5,636)	13,964	45	14,488
Contracted Services (199)	(54,929)	510	(741)	(435)
Food & Provisions (220)	(77)	0	0	0
Program Supplies (230)	0	500	0	(567)
Pharmaceuticals (238)	(700)	0	0	125
HH/CAP Medical Supplies (239)	0	0	0	0
Office Supplies (260)	0	0	0	0
Small Tools/Equipment (295)	(18,365)	33	0	3,947
Travel Mileage (311)	0	89	(1,994)	(437)
Travel Subsistence (312)	100	0	0	(550)
Telephone (321)	(46)	0	0	0
Postage (325)	0	(95)	0	(109)
Printing (340)	0	9	(276)	15
Maintenance & Repair (352)	0	27	0	0
Advertising (370)	483	(127)	25	(50)
Laundry & Dry Cleaning (392)	0	(100)	0	26
Training/Employee Ed. Exp. (395)	1,300	0	25	(1,035)
Rental of Copier (431)	0	0	0	0
Rental of Postage Meter (432)	0	0	0	0
Insurance & Bonding (450)	0	0	0	0
Dues & Subscriptions (491)	(9,000)	(25)	50	14
Capital Outlay (550)	0	0	0	(6,417)
TOT. OPERATING EXPENSES	(81,234)	821	(2,911)	(5,473)
GRAND TOTAL EXPENSE VARIANCE	(86,870)	14,785	(2,866)	9,015

REVENUE VARIANCE				
State	0	0	0	(14,742)
Medicaid	(656)	0	(4,500)	8,125
Medicare	(152,301)	(1,000)	0	0
MCR-HMO	(22,437)	0	0	0
Private Ins.	3,000	0	0	(150)
Direct Fees	400	(6,424)	0	(750)
County	85,124	72,209	0	(12,116)
WCH FB	0	(50,000)	1,634	28,648
UR FB	0	0	0	0
PPC FB	0	0	0	0
GRAND TOTAL REVENUE VARIANCE	(86,870)	14,785	(2,866)	9,015

Net →	0.00	0.00	0.00	0.00
	CD	FP	MH	PPC
REVENUE				
EXPENSE VARIANCE				
Board Salary & Expenses (120)	0	0	0	0
Salary (121)	(695)	(16,309)	15,422	(18,257)
On Call (122)	0	0	0	4,501
Longevity (127)	164	(13)	(870)	267
SS/FICA (181)	214	2,006	1,004	(1,133)
Retirement (182)	283	1,780	1,982	(1,144)
Health Ins. (183)	192	555	1,924	(3,124)
Vacation Pay Out	0	0	0	0
TOTAL SALARY & BENEFITS	158	(11,981)	19,462	(18,890)
Contracted Services (199)	0	(7,733)	(5,120)	3,099
Food & Provisions (220)	0	0	0	0
Program Supplies (230)	0	(2,084)	(205)	(100)
Pharmaceuticals (238)	0	5,745	(3,458)	131
HH/CAP Medical Supplies (239)	0	0	0	0
Office Supplies (260)	0	0	0	0
Small Tools/Equipment (295)	0	44	(514)	(2)
Travel Mileage (311)	(100)	(203)	(100)	87
Travel Subsistence (312)	(50)	0	0	0
Telephone (321)	0	0	0	(300)
Postage (325)	22	(47)	41	32
Printing (340)	0	15	24	43
Maintenance & Repair (352)	0	6	(300)	16
Advertising (370)	0	(16)	(100)	(45)
Laundry & Dry Cleaning (392)	15	(136)	(75)	(125)
Training/Employee Ed. Exp. (395)	1	(20)	(86)	(92)
Rental of Copier (431)	0	0	0	0
Rental of Postage Meter (432)	0	0	0	0
Insurance & Bonding (450)	0	0	0	0
Dues & Subscriptions (491)	0	(63)	(125)	(50)
Capital Outlay (550)	0	0	0	0
TOT. OPERATING EXPENSES	(112)	(4,492)	(10,018)	2,694
GRAND TOTAL EXPENSE VARIANCE	46	(16,473)	9,444	(16,196)
REVENUE VARIANCE				
State	0	(1,875)	0	0
Medicaid	0	(18,000)	1,000	0
Medicare	0	0	0	0
MCR-HMO	0	0	0	0
Private Ins.	0	1,250	(2,527)	300
Direct Fees	0	375	(300)	(100)
County	46	0	11,520	(4,011)
WCH FB	0	1,777	(249)	0
UR FB	0	0	0	0
PPC FB	0	0	0	(12,385)
GRAND TOTAL REVENUE VARIANCE	46	(16,473)	9,444	(16,196)

Net →	0.00	0.00	0.00	0.00
	PCM	STI	TB	WBF
REVENUE				
EXPENSE VARIANCE				
Board Salary & Expenses (120)	0	0	0	0
Salary (121)	(407)	(1,200)	(6,022)	401
On Call (122)	0	0	0	0
Longevity (127)	(7)	303	(167)	43
SS/FICA (181)	(35)	(69)	(500)	34
Retirement (182)	13	(151)	(458)	48
Health Ins. (183)	(60)	(76)	(771)	230
Vacation Pay Out	0	0	0	0
TOTAL SALARY & BENEFITS	(496)	(1,193)	(7,918)	756
Contracted Services (199)	(75)	1,500	(800)	(14)
Food & Provisions (220)	0	0	0	0
Program Supplies (230)	0	300	0	(200)
Pharmaceuticals (238)	0	2,029	1,650	0
HH/CAP Medical Supplies (239)	0	0	0	0
Office Supplies (260)	0	0	0	0
Small Tools/Equipment (295)	0	(456)	0	0
Travel Mileage (311)	(54)	0	(500)	150
Travel Subsistence (312)	(100)	0	0	0
Telephone (321)	(700)	0	0	0
Postage (325)	0	0	5	0
Printing (340)	(75)	0	0	0
Maintenance & Repair (352)	0	2	0	(350)
Advertising (370)	(25)	0	(25)	204
Laundry & Dry Cleaning (392)	0	(100)	(5)	0
Training/Employee Ed. Exp. (395)	125	0	0	(200)
Rental of Copier (431)	0	0	0	0
Rental of Postage Meter (432)	0	0	0	0
Insurance & Bonding (450)	0	0	0	0
Dues & Subscriptions (491)	0	0	0	0
Capital Outlay (550)	0	0	0	0
TOT. OPERATING EXPENSES	(904)	3,275	325	(410)
GRAND TOTAL EXPENSE VARIANCE	(1,400)	2,082	(7,593)	346

REVENUE VARIANCE				
State	0	1,054	0	1,115
Medicaid	(15,102)	(5,250)	0	0
Medicare	0	0	0	0
MCR-HMO	0	0	0	0
Private Ins.	0	100	(20)	0
Direct Fees	0	0	(1,300)	0
County	13,702	6,178	(6,273)	(769)
WCH FB	0	0	0	0
UR FB	0	0	0	0
PPC FB	0	0	0	0
GRAND TOTAL REVENUE VARIANCE	(1,400)	2,082	(7,593)	346

Net →	0.00	0.00	0.00	0.00
	WCS	WGA	WNE	WIC-TOTAL
REVENUE				
EXPENSE VARIANCE				
Board Salary & Expenses (120)	0	0	0	0.00
Salary (121)	(1,317)	859	(18)	-75.00
On Call (122)	0	0	0	0.00
Longevity (127)	164	47	48	302.00
SS/FICA (181)	(49)	62	43	90.00
Retirement (182)	(30)	68	16	102.00
Health Ins. (183)	(31)	323	22	544.00
Vacation Pay Out	0	0	0	0.00
TOTAL SALARY & BENEFITS	(1,263)	1,359	111	963.00
Contracted Services (199)	(100)	0	(100)	-214.00
Food & Provisions (220)	0	0	0	0.00
Program Supplies (230)	(2,319)	0	(1,340)	-3,859.00
Pharmaceuticals (238)	0	0	0	0.00
HH/CAP Medical Supplies (239)	0	0	0	0.00
Office Supplies (260)	0	0	0	0.00
Small Tools/Equipment (295)	15	0	0	15.00
Travel Mileage (311)	(100)	(137)	(100)	-187.00
Travel Subsistence (312)	0	(33)	0	-33.00
Telephone (321)	0	0	0	0.00
Postage (325)	0	(318)	0	-318.00
Printing (340)	0	11	0	11.00
Maintenance & Repair (352)	0	0	0	-350.00
Advertising (370)	0	200	0	404.00
Laundry & Dry Cleaning (392)	0	0	0	0.00
Training/Employee Ed. Exp. (395)	0	0	0	-200.00
Rental of Copier (431)	0	0	0	0.00
Rental of Postage Meter (432)	0	0	0	0.00
Insurance & Bonding (450)	0	0	0	0.00
Dues & Subscriptions (491)	(50)	0	0	-50.00
Capital Outlay (550)	0	0	0	0.00
TOT. OPERATING EXPENSES	(2,554)	(277)	(1,540)	-4,781.00
GRAND TOTAL EXPENSE VARIANCE	(3,817)	1,082	(1,429)	-3,818.00

REVENUE VARIANCE				
State	(7,373)	1,585	(547)	-5,220.00
Medicaid	0	0	0	0.00
Medicare	0	0	0	0.00
MCR-HMO	0	0	0	0.00
Private Ins.	0	0	0	0.00
Direct Fees	0	0	0	0.00
County	3,556	(503)	(882)	1,402.00
WCH FB	0	0	0	0.00
UR FB	0	0	0	0.00
PPC FB	0	0	0	0.00
GRAND TOTAL REVENUE VARIANCE	(3,817)	1,082	(1,429)	(3,818)

Net →	0.00	0.00	0.00	0.00
	GA-TOTAL	EH-TOTAL	HH-TOTAL	PH-TOTAL
REVENUE				
EXPENSE VARIANCE				
Board Salary & Expenses (120)	5,280.00	0.00	0.00	0.00
Salary (121)	20,845.00	3,942.00	-24,829.00	-11,235.00
On Call (122)	0.00	0.00	-4,495.00	4,501.00
Longevity (127)	114.00	104.00	-1,029.00	830.00
SS/FICA (181)	1,474.00	210.00	-2,332.00	6,713.00
Retirement (182)	730.00	343.00	-3,152.00	5,452.00
Health Ins. (183)	1,620.00	326.00	-4,633.00	1,378.00
Vacation Pay Out	0.00	0.00	0.00	0.00
TOTAL SALARY & BENEFITS	30,063.00	4,925.00	-40,470.00	7,639.00
Contracted Services (199)	-56,057.00	-800.00	-53,929.00	-9,795.00
Food & Provisions (220)	-146.00	0.00	-77.00	0.00
Program Supplies (230)	-3,161.00	500.00	0.00	-2,156.00
Pharmaceuticals (238)	-500.00	0.00	-700.00	6,222.00
HH/CAP Medical Supplies (239)	0.00	0.00	-6,000.00	0.00
Office Supplies (260)	1,547.00	0.00	0.00	0.00
Small Tools/Equipment (295)	-14,349.00	0.00	-20,401.00	3,052.00
Travel Mileage (311)	159.00	-8,000.00	-423.00	-3,212.00
Travel Subsistence (312)	0.00	500.00	100.00	-700.00
Telephone (321)	1,240.00	0.00	4.00	-1,000.00
Postage (325)	0.00	0.00	0.00	-151.00
Printing (340)	250.00	34.00	16.00	-245.00
Maintenance & Repair (352)	750.00	600.00	0.00	-249.00
Advertising (370)	300.00	300.00	483.00	-363.00
Laundry & Dry Cleaning (392)	0.00	0.00	0.00	-500.00
Training/Employee Ed. Exp. (395)	500.00	216.00	1,050.00	-1,082.00
Rental of Copier (431)	3,000.00	0.00	0.00	0.00
Rental of Postage Meter (432)	0.00	0.00	0.00	0.00
Insurance & Bonding (450)	1,535.00	3,000.00	0.00	0.00
Dues & Subscriptions (491)	2,428.00	200.00	-9,000.00	-199.00
Capital Outlay (550)	-10,375.00	90,000.00	0.00	-6,417.00
TOT. OPERATING EXPENSES	-72,879.00	86,550.00	-88,877.00	-16,795.00
GRAND TOTAL EXPENSE VARIANCE	-42,816.00	91,475.00	-129,347.00	-9,156.00

REVENUE VARIANCE				
State	6,006.00	750.00	0.00	-15,563.00
Medicaid	0.00	0.00	-40,656.00	-33,727.00
Medicare	0.00	0.00	-152,301.00	-1,000.00
MCR-HMO	0.00	0.00	-22,437.00	0.00
Private Ins.	0.00	0.00	3,000.00	-1,047.00
Direct Fees	0.00	399.00	400.00	-8,499.00
County	-28,822.00	90,826.00	123,689.00	81,255.00
WCH FB	-10,000.00	0.00	0.00	-18,190.00
UR FB	-5,000.00	0.00	-41,042.00	0.00
PPC FB	-5,000.00	0.00	0.00	-12,385.00
GRAND TOTAL REVENUE VARIANCE	(42,816)	91,475	(129,347)	(9,156)

Net →	0.00
	HD-TOTAL
REVENUE	
EXPENSE VARIANCE	
Board Salary & Expenses (120)	5,280.00
Salary (121)	-11,352.00
On Call (122)	6.00
Longevity (127)	321.00
SS/FICA (181)	6,155.00
Retirement (182)	3,475.00
Health Ins. (183)	-765.00
Vacation Pay Out	0.00
TOTAL SALARY & BENEFITS	3,120.00
Contracted Services (199)	-120,795.00
Food & Provisions (220)	-223.00
Program Supplies (230)	-8,676.00
Pharmaceuticals (238)	5,022.00
HH/CAP Medical Supplies (239)	-6,000.00
Office Supplies (260)	1,547.00
Small Tools/Equipment (295)	-31,683.00
Travel Mileage (311)	-11,663.00
Travel Subsistence (312)	-133.00
Telephone (321)	244.00
Postage (325)	-469.00
Printing (340)	66.00
Maintenance & Repair (352)	751.00
Advertising (370)	1,124.00
Laundry & Dry Cleaning (392)	-500.00
Training/Employee Ed. Exp. (395)	484.00
Rental of Copier (431)	3,000.00
Rental of Postage Meter (432)	0.00
Insurance & Bonding (450)	4,535.00
Dues & Subscriptions (491)	-6,621.00
Capital Outlay (550)	73,208.00
TOT. OPERATING EXPENSES	-96,782.00
GRAND TOTAL EXPENSE VARIANCE	-93,662.00

FY 13-14		Prop. Line
Budget	Variance	% of Tot.

REVENUE VARIANCE	
State	-14,527.00
Medicaid	-74,383.00
Medicare	-153,301.00
MCR-HMO	-22,437.00
Private Ins.	1,953.00
Direct Fees	-7,700.00
County	268,350.00
WCH FB	-28,190.00
UR FB	-46,042.00
PPC FB	-17,385.00
GRAND TOTAL REVENUE VARIANCE	(93,662)



North Carolina

2013



2013

Child Health Report Card

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Annie E. Casey Foundation



Access to Care and Preventive Health

Access to care and receipt of high quality preventive, acute, and chronic disease services is one of the pillars of good health. Children in North Carolina continue to make gains in rates of insurance. The percentage of uninsured children declined from 12.0% in 2007 to 8.4% in 2012, with dramatic declines among children living at less than 200% of the Federal Poverty Level (20.6% to 11.4%, respectively).

The Affordable Care Act, despite its rocky start, may increase the rates of insurance for children in North Carolina. The North Carolina Division of Medical Assistance estimated that 70,000 additional people, mostly children, will enroll in Medicaid in 2014. In addition, uninsurance rates among children living in families with incomes between 200 and 400% of the Federal Poverty Level may improve as families learn about subsidies available in the Health Insurance Marketplace and the penalties which they will incur if they chose to go without health insurance.

Under the Affordable Care Act, most children with private insurance are eligible for recommended preventive services at no additional cost to their families. With this is the opportunity to improve the receipt of preventive services for many children. In addition, a majority of children enrolled in Medicaid received preventive services in 2012 (59.2%). Recommended preventive services are detailed by the American Academy of Pediatrics in *Bright Futures*.

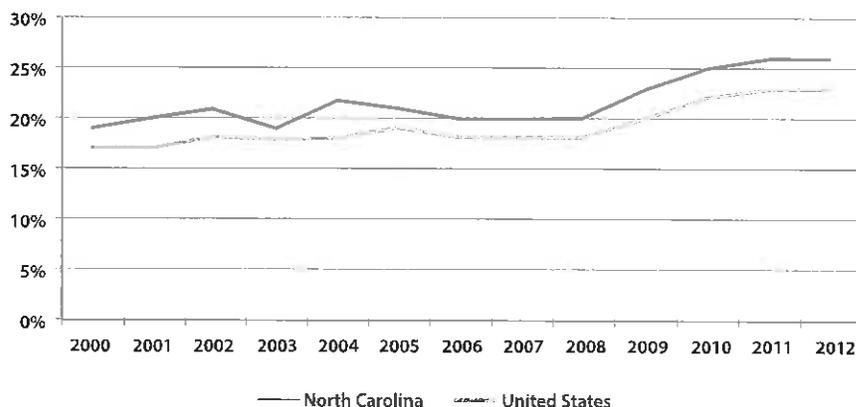
Families can more easily obtain dental coverage for their children in plans offered in the Health Insurance Marketplace. In addition, the North Carolina Medicaid program and North Carolina Health Choice covers dental services for children. The changes in Medicaid enrollment and dental care available in the Health Insurance Marketplace may lead to more children getting preventive oral health services.

Grade	Health Indicator	Current Year	Benchmark Year	Percent Change	Trend
Insurance Coverage		2012	2007		
B	Percent of all children (ages 0-17) uninsured*	8.4%	12.0%	-30.0%	Better
	Percent of children below 200% of poverty uninsured*	11.4%	20.6%	-44.7%	Better
	Number of children covered by public health insurance (Medicaid or Health Choice) (in December)	1,135,016	896,792	26.6%	Better
	Percent of Medicaid-enrolled children receiving preventive care*	59.2%	-	-	-
School Health		2011-2012	2006-2007		
D	School nurse ratio	1:1,179	1:1,340	-	-
Breastfeeding		2010	2005		
B	Percent of infants ever breastfed	74.9%	69.2%	8.2%	Better
	Percent of infants breastfed at least six months	48.5%	39.4%	23.1%	Better
Immunization Rates		2012	2007		
C	Percent of children with appropriate immunizations:				
	Ages 19-35 months ¹	76.2%	77.3%	-1.4%	No Change
	At school entry*	97.1%	97.3%	-0.2%	No Change
Early Intervention		2012	2007		
A	Number of children (ages 0-3) enrolled in early intervention services to reduce effects of developmental delay, emotional disturbance, and/or chronic illness*	19,664	15,048	30.7%	Better
Environmental Health		2011	2006		
A	Lead: Percent of children (ages 1-2):²				
	Screened for elevated blood levels	52.0%	42.8%	21.5%	Better
	Found to have elevated blood lead levels	0.4%	0.8%	-50.0%	Better
	Asthma:	2012	2007		
	Percent of children ever diagnosed	17.5%	17.1%	2.3%	No Change
	Hospital discharges per 100,000 children (ages 0-14)	163.7	166.2	-1.5%	No Change
Dental Health		2010	2005		
B	Percent of children: ⁴				
	With untreated tooth decay (kindergarten)	15.0%	22.0%	-31.8%	Better
	With one or more sealants (grade 5)	44.0%	43.0%	2.3%	No Change
	Percent of Medicaid-eligible children enrolled for at least 6 months who use dental services:	2012	2007		
	Ages 1-5	61.0%	47.0%	29.8%	Better
	Ages 6-14	67.0%	57.0%	17.5%	Better
	Ages 15-20	51.0%	45.0%	13.3%	Better

Health Risk Behaviors

The link between poverty and health outcomes is well documented. Poor children fare worse in almost every indicator of health, including birth outcomes, access to care, health-risk behaviors, and mortality. More than 160,000 children in North Carolina slipped into poverty during the recent recession, as the percentage of poor children increased from 19.5% of the child population in 2007 to 26%—more than one in every four children—in 2012. Studies show poverty and financial stress can impede children's cognitive development; impair their ability to learn; and contribute to behavioral, social, emotional and health problems later in life. The risks posed by poverty are greatest among children who experience poverty during their earliest developmental years (before age five), as well as those who experience persistent and deep poverty.

Percent of Children Living in Poverty 2000-2012, North Carolina and United States



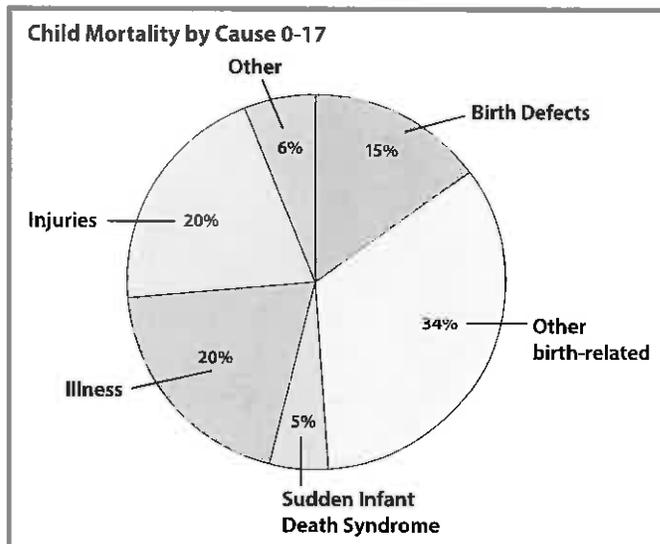
Grade	Health Indicator	Current Year	Benchmark Year	Percent Change	Trend
	High School Graduation	2011-2012	2006-2007		
B	Percent of high school students graduating on time with their peers*	80.2%	69.5%	17.4%	Better
	Child Poverty	2012	2007		
D	The percent of children in poverty				
	Ages 0-5	30.2%	22.6%	33.6%	Worse
	Ages 0-18	26.0%	19.5%	33.3%	Worse
	Teen Pregnancy	2011	2006		
C	Number of pregnancies per 1,000 girls (ages 15-17):	19.7	34.8	-43.4%	Better
	Weight Related	2011	2006		
	Percent of Children:				
	Meeting the recommended guidelines of 60 minutes or more of exercise 6 or 7 days a week				
D	Ages 2-9	30.8%	-	-	-
	Ages 10-17	27.5%	-	-	-
	Meeting the recommended guidelines of two or fewer hours of screen time every day ³				
	Ages 2-9	81.4%	-	-	-
	Ages 10-17	60.6%	-	-	-
	Ages 10-17 who are overweight or obese ⁴	30.6%	30.9%	-1.0%	No Change
	Tobacco Use	2011	2007		
C	Percent of students (grades 9-12) who used the following in the past 30 days:				
	Cigarettes	15.5%	19.0%	-18.4%	Better
	Smokeless tobacco	6.6%	8.6%	-23.3%	Better
	Alcohol & Substance Abuse	2011	2007		
D	Percent of students (grades 9-12) who used the following:				
	Marijuana (past 30 days)	24.2%	19.1%	26.7%	Worse
	Alcohol (including beer) (past 30 days)	34.3%	37.7%	-9.0%	Better
	Cocaine (lifetime)	7.1%	7.0%	1.4%	No Change
	Methamphetamines (lifetime)	4.1%	4.0%	2.5%	No Change
	Prescription drugs without a doctor's prescription (lifetime)	20.4%	17.0%	20.0%	Worse

Death and Injury

After a steady decline over twenty years, child mortality has remained stable for the last three years. The child mortality rate improved from 105.2 per 100,000 children in 1990 to 57.5 in 2010, and remains steady at 58.6 in 2012. Declines in infant mortality have been responsible for much of this change, with an infant mortality rate of 10.6/1000 in 1990 and an infant mortality rate of 7.0/1000 in 2010. The infant mortality rate for 2012 was 7.4/1000. Much of this decline can be attributed to improvements in obstetric and neonatal care. Smaller declines in child mortality can be attributed to improved motor vehicle safety, access to trauma services, declines in vaccine preventable deaths, and improvements in access to preventive and chronic care.

The largest contributors to child mortality remain prematurity (the majority of 'Other birth-related' conditions in the figure), birth defects, and sudden infant death syndrome. These conditions account for 50% of child mortality. Infant mortality accounts for 66% of all child mortality. In addition to continued improvements in neonatal care, efforts to reduce prematurity will likely improve child mortality. Community Care of North Carolina's Pregnancy Medical Home initiative, among other things, seeks to improve the delivery of progesterone to women at risk for prematurity, provide assistance with behavioral risk factors, and offer care management services to women with high risk pregnancies. This type of multi-faceted approach to preventing prematurity is likely to be an important part of North Carolina's approach to child mortality reduction in the coming years. The other essential opportunity for decreasing infant mortality is to ensure that women are in optimum health at the time of conception and pregnancies are planned and appropriately spaced.

After birth related conditions, injury and illness are the next most common causes of child death. Of the 298 injuries in 2012, 72% were unintentional, with motor vehicle crashes responsible for 108 child deaths. Homicide and suicide accounted for 82 child deaths in 2012. Improvements in supervision, environmental controls to keep children safe, and mental health services may hold the potential to decrease child mortality from injury.



Grade	Health Indicator	Current Year	Benchmark Year	Percent Change	Trend
	Birth Outcomes	2012	2007		
B	Number of infant deaths per 1,000 live births	7.4	8.5	-12.9%	Better
	Percent of infants born weighing less than 5 lbs., 8 ozs (2,500 grams)	8.9	9.2	-3.3%	No Change
	Maternal Risk Factors	2012			
C	Percent of babies born to women who smoke	10.6			
	Child Fatality	2012	2007		
B	Number of deaths (ages 0-17) per 100,000	58.6	75.1	-22.0%	Better
	Number of deaths:				
	Motor Vehicle-related	108	142		
	Drowning	29	26		
	Fire/Burn	8	24		
	Bicycle	2	4		
	Suicide	35	26		
	Homicide	47	61		
	Child Abuse and Neglect	2012	2007		
C	Number of children: ⁴				
	Children investigated for child abuse or neglect	133,949	122,369		
	Substantiated as victims of abuse or neglect ⁵	11,170	14,522		
	Recommended services ⁵	22,931	19,632		
	Recurrence of Maltreatment	7.1	7.0	1.4%	No Change
	Confirmed child deaths due to abuse	28	25		

For 19 years, the *North Carolina Child Health Report Card* has tracked the wellness of children in our state. The *Report Card* compiles 40 indicators of child health and safety into one easy-to-read document. Indicators are selected by a panel of experts for their timeliness, consistency and ability to convey salient information about the health and safety of children in North Carolina. Our hope is that this document will enrich state and community discussions about strategies to improve child health, illuminate emerging data trends, and support strategic planning for future investments.

Statewide data are presented for the most recent year available (usually 2012) and a benchmark year (usually 2007). Comparing data from before and after the recession reveals positive developments: more children in North Carolina are insured than at any other time in state history and, in general, child health has improved. It is important to note, however, that this timeframe obscures recent data shifts that show our children are now losing ground in important areas.

Due to space constraints data by race and ethnicity are not presented in this document, though observable disparities exist among several indicators. Visit the North Carolina state profile on the KIDS COUNT Data Center at datacenter.kidscount.org/nc to view disaggregated data, where available, and www.ncchild.org to download corresponding county-level data cards to see how children fare in your community.

**“For these are all our children, we will all profit by or pay
for what they become.”—James Baldwin**

Good health during the earliest years forms a solid foundation for success in school and in life. Children who have insurance are more likely to have a regular care provider, to get the treatment they need when they are sick or injured, and have better health outcomes than uninsured children.

The Patient Protection and Affordable Care Act of 2010 (ACA) was enacted to reduce costs, improve health care quality and expand access to health coverage for uninsured populations. The Affordable Care Act fundamentally changes the health insurance landscape for children and their families:

- Young adults under the age of 26 are able to stay on their parents’ health plan.
- The Children’s Health Insurance Program has been extended until 2015, with an enhanced federal match until 2019.
- Pediatric care (including dental), maternity and newborn care, and preventive and wellness services are now covered as essential benefits.
- Insurance companies are no longer able to refuse coverage to children with preexisting conditions.
- Lifetime limits have been eliminated for most benefits.
- School-Based Health Centers have been strengthened.

Though findings are mixed, this year’s *Report Card* shows progress for children in several areas. These gains reflect sustained investments made by the North Carolina General Assembly, as well as health care improvements implemented under ACA:

- Although child poverty rates remain elevated, the share of uninsured children in North Carolina continues to decline.
- Enrollment in Medicaid and North Carolina Health Choice remains strong. Participation has increased 27% since the start of the economic downturn.
- The school nurse ratio has improved slightly in recent years.

Yet challenges remain. Despite long-term progress in infant mortality there has been a non-significant increase in the rate for two consecutive years as racial disparities have widened. North Carolina continues to compare poorly with other states ranking 46th in the nation for infant deaths. Studies show women’s health status before pregnancy is a strong predictor of her newborn’s health. Addressing women’s health needs and improving the quality and continuity of care they receive throughout their childbearing years would prepare more women to enter pregnancy in good health and improve women’s chances for safe deliveries and positive birth outcomes.

The majority of uninsured children in North Carolina are eligible for Medicaid and CHIP, but are currently not enrolled. Research shows that extending health insurance coverage to parents increases the likelihood that their children will gain coverage and remain insured once they do, while improving parents’ health and boosting families’ economic security. Many families have access to more affordable health insurance coverage through the newly established marketplaces; however, without Medicaid expansion many low-income parents will not be able to purchase affordable coverage.

As the picture of health reform continues to evolve in North Carolina gains in insurance coverage and other important indicators should not be assumed. Instead, advocates, providers, community and business leaders, state and federal governments must collaborate to strengthen investments in prevention programs and ensure that public health insurance programs remain strong.

Data Sources 2013 Child Health Report Card

Access to Care and Preventive Health

Uninsured: U.S. Current Population Survey, Annual Social and Economic Supplement. CPS Table Creator. Available online at: <http://www.census.gov/cps/data/cpstablecreator.html>; *Public Health Insurance:* Division of Medical Assistance, North Carolina Department of Health and Human Services. Special data request in August 2013; *Medicaid-Enrolled Preventive Care:* Calculated using data from the Division of Medical Assistance, North Carolina Department of Health and Human Services. Health Check Participation Data. Available online at: <http://www.dhhs.state.nc.us/dma/healthcheck/>; *Breastfeeding:* Centers for Disease Control and Prevention. Breastfeeding Practices—Results from the National Immunization Survey. Available online at: http://www.cdc.gov/breastfeeding/data/NIS_data/index.htm; *Immunization Rates for 2-year-olds:* Centers for Disease Control and Prevention, National Immunization Survey. Available online at <http://www.cdc.gov/vaccines/stats-surv/imz-coverage.htm#nis>; *Kindergarten Immunization and Early Intervention:* Women and Children's Health Section, Division of Public Health, North Carolina Department of Health and Human Services. Special data request in August 2013; *Lead:* North Carolina Childhood Lead Poisoning Prevention Program, Department of Environment and Natural Resources. 2012 data were not available at time of publication; *Asthma Diagnosed:* State Center for Health Statistics, North Carolina Department of Health and Human Services. Child Health Assessment and Monitoring Program. Available online at: <http://www.schs.state.nc.us/SCHS/about/chai.html>; *Asthma Hospitalizations:* State Center for Health Statistics, North Carolina Department of Health and Human Services. County Health Data Book. Available online at: <http://www.schs.state.nc.us/SCHS/about/chai.html>; *Untreated Tooth Decay and Sealants:* Oral Health Section, Division of Public Health, North Carolina Department of Health and Human Services. 2012 data were not available at time of publication; *Medicaid-Enrolled Children Receiving Dental Services:* Division of Medical Assistance, North Carolina Department of Health and Human Services. Special data request in August 2013.

Health Risk Behaviors

Graduation Rate: North Carolina Department of Public Instruction. State Four-Year Cohort Graduation Rate. Available online at <http://www.ncpublicschools.org/graduate/statistics/>; *Poverty:* U.S. Census Bureau, American Fact Finder. Table CP02. Available online at www.americanfactfinder2.census.gov; *Teen Pregnancy:* State Center for Health Statistics, North Carolina Department of Health and Human Services. North Carolina Reported Pregnancies. Available online at <http://www.schs.state.nc.us/SCHS/data/vitalstats.cfm>; *Weight Related:* State Center for Health Statistics, North Carolina Department of Health and Human Services. Child Health Assessment and Monitoring Program. 2012 data were not available at time of publication. Overweight and obese data are available online at: <http://www.schs.state.nc.us/SCHS/champ/>; *Tobacco Use:* Tobacco Prevention Branch, Division of Public Health, North Carolina Department of Health and Human Services. North Carolina Youth Tobacco Survey. Available online at <http://www.tobaccopreventionandcontrol.ncdhhs.gov/data/index.htm>; *Physical Activity, Alcohol and Substance Abuse:* North Carolina Department of Public Instruction. Youth Risk Behavior Survey, North Carolina High School Survey detailed tables. Available online at <http://www.nchealthyschools.org/data/yrebs/>.

Death and Injury

Infant Mortality, Low Birth-Weight Infants, and Babies Born to Women Who Smoke: State Center for Health Statistics, North Carolina Department of Health and Human Services. Table 1 and 10. Available online at: <http://www.schs.state.nc.us/SCHS/data/vitalstats.cfm>; *Child Fatality and Deaths Due to Injury:* State Center for Health Statistics, North Carolina Department of Health and Human Services. Available online at: <http://www.schs.state.nc.us/SCHS/data/vitalstats.cfm>; *Poisoning ages 10-17:* North Carolina Department of Health and Human Services. NC DETECT. Special data request in September 2013; *Child Abuse and Neglect and Recurrence of Maltreatment:* Duncan, D.F., Kum, H.C., Flair, K.A., Stewart, C.J., Vaughn, J., Bauer, R, and Reese, J. (2013). Management Assistance for Child Welfare, Work First, and Food & Nutrition Services in North Carolina. Special data request in July 2013. Data available online from the University of North Carolina at Chapel Hill Jordan Institute for Families website. URL:<http://ssw.unc.edu/cw/>; *Firearm Deaths and Child Abuse and Neglect Homicides:* North Carolina Child Fatality Prevention Team, Office of the Chief Medical Examiner, North Carolina Department of Health and Human Services. Special data request in August 2013. Please note the analysis, conclusions, opinions and statements expressed within this report are not necessarily those of the CPPT or OCME.

Data Notes 2013 Child Health Report Card

1. Immunization is measured for children 19-35 months of age using the 4:3:1:3:3:1 measure.
 2. Elevated blood lead level is defined as 5 micrograms per deciliter or greater. This definition has been revised from 10 micrograms per deciliter or greater.
 3. Screen time includes TV, videos, or DVDs OR playing video games, computer games or using the Internet.
 4. Overweight is defined as a body mass index equal to or greater than the 85th percentile using federal guidelines; obese is defined as a body mass index equal to or greater than the 95th percentile.
 5. Findings represent exclusive counts of reports investigated in a state fiscal year. The number substantiated includes those substantiated of abuse, neglect, or abuse and neglect.
- * Updated lead, tooth decay, dental sealant and CHAMP data were not available at the time of publication.
+ Data for indicators followed by a + sign are fiscal or school year data ending in the year given. For example, immunization rates at school entry labeled 2010 are for the 2009-2010 school year.

Grades and Trends

Grades are assigned by a panel of health experts to bring attention to the current status of North Carolina children in salient indicators of health and safety. Grades are a subjective measure of how well children in North Carolina are faring in a particular area, and are not meant to judge the performance of the state agency or agencies providing the data or the service. Please note that several agencies have made a great deal of progress in recent years, which may not be reflected in these grades.

Data trends are described as "Better," "Worse," or "No Change." Indicators with trends described as "Better" or "Worse" experienced a change of more than 5% during the period. A percentage change of 5% or less is described as "No Change." Percent change and trends have not been given for population count data involving small numbers of cases. Due to data limitations, only the indicators for alcohol and drug use have been tested for statistical significance. Grades and trends are based on North Carolina's performance year-to-year and what level of child health and safety North Carolina should aspire to, regardless of how we compare nationally.

Laila A. Bell from Action for Children North Carolina and Kimberly Alexander-Bratcher and Adam Zolotor, MD from the North Carolina Institute of Medicine led the development of this publication, with valuable input from child health experts, and many staff members of the North Carolina Department of Health and Human Services.

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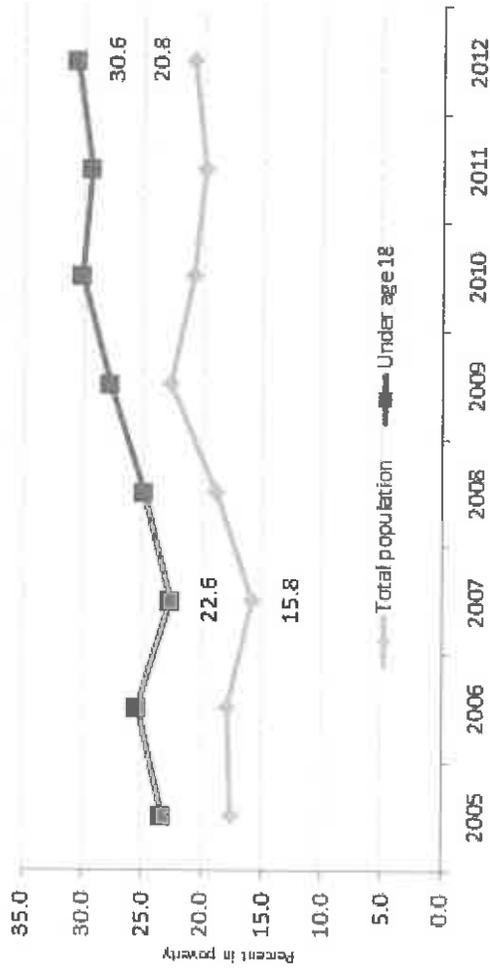
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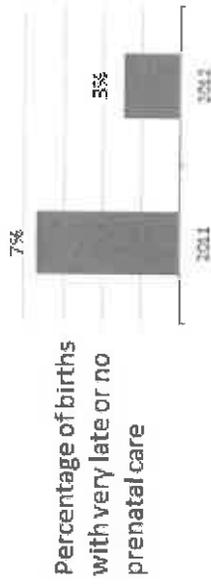
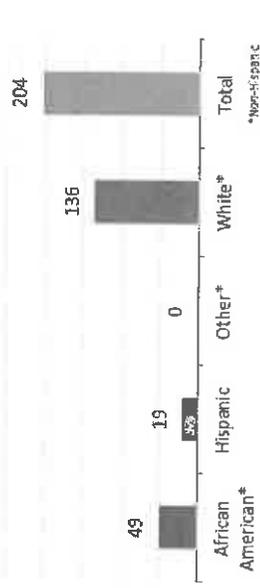
Caswell

2013 Child Health County Data Card

Child poverty in Caswell has increased 35% since 2007



Live Births by Race and Ethnicity, 2012



DEMOGRAPHICS

	CASWELL		Percent Change	Trend	NORTH CAROLINA	
	Base	Current			Base	Current
Total population (2007, 2010)	23,601	23,557	-0.2%	-	9,090,572	9,765,229
Under age 5	1,244	1,071	-13.9%	-	616,945	619,940
Under age 18	5,152	4,505	-12.6%	-	2,219,168	2,286,528
Child population by race and ethnicity (2007, 2012)						
Asian and Pacific Islander*	20	26	30.0%	-	54,838	67,835
American Indian*	11	10	-9.1%	-	31,947	31,530
Black*	1,724	1,546	-10.3%	-	567,378	570,777
Hispanic	249	248	-0.4%	-	255,897	329,913
White*	3,148	2,675	-15.0%	-	1,309,108	1,286,473
*Non-Hispanic						
Median household income in 2012 dollars (2007, 2012)	\$41,816	\$39,615	-5.3%	Worse	\$49,577	\$45,195

ACCESS TO CARE AND PREVENTIVE HEALTH

	CASWELL		Percent Change	Trend	NORTH CAROLINA	
	Base	Current			Base	Current
Public health enrollment (in December) (2007, 2012):						
<i>Medicaid</i>	2,431	2,733	12.4%	Better	896,792	1,135,016
<i>NC Health Choice</i>	2,108	2,406	14.1%	Better	770,612	978,640
	323	327	1.2%	No Change	126,180	156,376
Medicaid enrolled children receiving preventive care (2012)	N/A	51.3%	-	-	N/A	59.2%
Children ages 0-3 enrolled in early intervention services (2007, 2012)	15	27	0.0%	Better	15,048	19,664
Lead: Percent of children ages 1-2 (2006, 2011)						
<i>Screened for elevated blood levels</i>	33.7%	54.1%	60.5%	Better	42.8%	52.0%
<i>Found to have elevated blood lead levels</i>	1.9%	0.5%	-73.7%	Better	0.8%	0.4%
Asthma hospital discharges per 100,00 children ages 0-14 (2007, 2012)	47.8	108.3	126.6%	Worse	166.2	163.7
Medicaid-eligible children enrolled for at least 6 months who use dental services (2007, 2012)						
Ages 1-5	53.1%	57.3%	7.9%	Better	47.0%	61.0%
Ages 6-14	60.6%	59.2%	-2.3%	No Change	57.0%	67.0%
Ages 15-20	43.5%	47.6%	9.5%	Better	45.0%	51.0%

DEATH AND INJURY

	CASWELL		Percent Change	Trend	NORTH CAROLINA	
	Base	Current			Base	Current
Infant mortality per 1,000 live births (2007, 2012)	33.3	0.0	*	*	8.5	7.4
Child deaths under age 18: (2007,2012)						
<i>Motor vehicle-related</i>	7	4	-	-	75.1	58.6
Drowning	0	1	-	-	142	108
Fire/Burn	0	1	-	-	26	29
Bicycle	0	0	-	-	24	8
Suicide	0	0	-	-	4	2
Homicide	0	0	-	-	26	35
Firearm	0	1	-	-	61	47
	0	1	-	-	52	36

	CASWELL		Percent	Trend	NORTH CAROLINA	
	Base	Current			Base	Current
Poisoning	0	0	-	-	17	13
Number of children (2007, 2012)						
Investigated for abuse or neglect	254	291	-	-	122,369	133,949
Substantiated as victims of abuse or neglect	26	39	-	-	14,522	11,170
Recommended services	30	9	-	-	19,632	22,931
Recurrence of maltreatment	0.0	0.0	*	-	7.0	7.1
Confirmed child deaths due to abuse	0	0	-	-	25	28

SOCIAL DETERMINANTS AND HEALTH RISKS

	CASWELL		Percent Change	Trend	NORTH CAROLINA	
	Base	Current			Base	Current
Babies born to mothers who smoke (2012)	NO DATA	15.2%	-	-	NO DATA	10.6
Low birthweight births (2007, 2012)	10.5	6.9	-34.3%	Better	9.2	8.9
Four-Year cohort graduation rate (2006-07, 2011-12)	72.1%	77.6%	7.6%	Better	69.5%	80.4%
Unemployment rate (2007, 2012)	6.7%	9.7%	44.8%	Worse	4.8%	9.5%
Food insecurity (2011)						
Total population	NO DATA	19.7%	-	-	-	19.3%
Under age 18	NO DATA	27.9%	-	-	-	27.3%
Teen pregnancies per 1,000 girls ages 15-17 (2007, 2012)	28.6	19.3	-32.5	Better	34.8	19.7

(-) Trends are not presented for data points involving few events, or for certain population counts

(*) Low number event



ncchild.org

@ncchildcount

Data Notes and Sources

Note: Rates based on small numbers should be interpreted with caution. Percent change and trends have not been provided for rates with a numerator smaller than 10 events, or for population counts involving few cases. Indicators with trends described as *Better* or *Worse* experienced a change of more than 5% during the period. A percentage change of 5% or less is described as *No Change*. Changes in methodology prevent comparison of some indicators over time. For questions about this data, contact Laila A. Bell at laila@nccchild.org.

DEMOGRAPHICS

Population: Population Reference Bureau, analysis of Centers for Disease Control (CDC), National Center for Health Statistics (NCHS), "Vintage 2012 Bridged-Race Postcensal Population Estimates," and "July 1, 2000-July 2009 Revised Bridged-Race Intercensal Population Estimates," data files prepared under a collaborative agreement between CDC/NCHS and the U.S. Census Bureau. Available online at http://www.cdc.gov/nchs/invss/bridged_race/data_documentation.htm#vintage2012; *Median household income and Poverty:* U.S. Census Bureau, Small Area Income and Poverty Estimates. Available online at: <http://www.census.gov/did/www/saie/data/interactive/> Income calculated as real dollars using the U.S. Department of Labor Bureau of Labor Statistics annual average Consumer Price Index for 2007 (207.32) and 2012 (229.594).

ACCESS TO CARE AND PREVENTIVE HEALTH

Public health enrollment: Division of Medical Assistance, North Carolina Department of Health and Human Services. Special data request in August 2013; *Medicaid-enrolled children receiving preventive care:* Calculated using data from the Division of Medical Assistance, North Carolina Department of Health and Human Services. Health Check Participation Data. Available online at: <http://www.dhhs.state.nc.us/dma/healthcheck/>; *Children enrolled in early intervention services:* Women and Children's Health Section, Division of Public Health, North Carolina Department of Health and Human Services. Special data request in August 2013; *Lead:* North Carolina Childhood Lead Poisoning Prevention Program, Department of Environment and Natural Resources. 2012 data were not available at time of publication; *Asthma hospital discharges:* State Center for Health Statistics, North Carolina Department of Health and Human Services. County Health Data Book. Available online at: <http://www.schs.state.nc.us/SCHS/about/chai.html>; *Medicaid-eligible children using dental services:* Division of Medical Assistance, North Carolina Department of Health and Human Services. Special data request in August 2013.

DEATH AND INJURY

Infant mortality: State Center for Health Statistics, North Carolina Department of Health and Human Services. Table 1. Available online at: <http://www.schs.state.nc.us/SCHS/data/vitalstats.cfm>; *Child fatality and deaths due to injury:* State Center for Health Statistics, North Carolina Department of Health and Human Services. Available online at: <http://www.schs.state.nc.us/SCHS/data/vitalstats.cfm>; *Child abuse, neglect and recurrence of maltreatment:* Duncan, D.F., Kum, H.C., Flair, K.A., Stewart, C.J., Vaughn, J., Bauer, R, and Reese, J. (2013). Management Assistance for Child Welfare, Work First, and Food & Nutrition Services in North Carolina. Special data request in July 2013. Data available online from the University of North Carolina at Chapel Hill Jordan Institute for Families website. URL:<http://ssw.unc.edu/cw/FirearmDeaths> and *child abuse and neglect homicides:* North Carolina Child Fatality Prevention Team, Office of the Chief Medical Examiner, North Carolina Department of Health and Human Services. Special data request in August 2013.

SOCIAL DETERMINANTS AND HEALTH RISKS

Babies born to mothers who smoke: State Center for Health Statistics, North Carolina Department of Health and Human Services. Special data request, August 2013. *Low birthweight babies and Infant live births:* State Center for Health Statistics, North Carolina Department of Health and Human Services. Table 1 and 10. Available online at: <http://www.schs.state.nc.us/SCHS/data/vitalstats.cfm>; *Four-year cohort graduation rate:* North Carolina Department of Public Instruction. State Four-Year Cohort Graduation Rate. Available online at <http://www.ncpublicschools.org/graduate/statistics/>; *Unemployment rate:* U.S. Department of Labor Bureau of Labor Statistics. Local Area Unemployment Statistics. Available online at <http://www.bls.gov/lau/>; *Food insecurity:* Feeding America. Map the Meal Gap, 2011. Available online at <http://feedingamerica.org/hunger-in-america/hunger-studies/map-the-meal-gap.aspx>; *Teen pregnancies:* State Center for Health Statistics, North Carolina Department of Health and Human Services. North Carolina Reported Pregnancies. Available online at <http://www.schs.state.nc.us/SCHS/data/vitalstats.cfm>.

Caswell County Environmental Health Statistics - FY 2013-2014

Service	AUG		OCT		DEC		FEB		TOTAL										
	#	\$	#	\$	#	\$	#	\$	#	\$									
Improvement Permit / Site Evaluation (< 600 gpd & less than 4 bedrooms)	4	600	1	150	7	1,050	6	900	2	300	3	450	6	900	1	150	30	4,500	
Improvement Permit / Site Evaluation for each additional bedroom over 3	1	75			1	75							1	75			3	225	
Improvement Permit / Site Evaluation (> 600 & < 3000 gpd)																	0	0	
Improvement Permit / Site Evaluation (> 3000 gpd)																	0	0	
New Construction Authorization & Operating Permit (Type I & II)	2	300	3	450	3	450	9	1,350	3	450	7	1,050	3	450	2	300	32	4,800	
New Construction Authorization & Operating Permit (Type III)													2	400			2	400	
New Construction Authorization & Operating Permit (Type IV)																	0	0	
New Construction Authorization & Operating Permit (Type V)																	0	0	
Expansion or Repair of OSWW Treatment System (< 600 gpd)	1	50	4	200	2	100											2	100	
Expansion or Repair of OSWW Treatment System (> 600 & < 3000 gpd)																	1	50	
Expansion or Repair of OSWW Treatment System (> 3000 gpd)																	0	0	
Inspection of Existing OSWW Treatment System (Type I & II Addition)	3	150	1	50	3	150	4	200			4	200	2	100	1	50	18	900	
Inspection of Existing OSWW Treatment System (Type I & II Change Out)	1	100	2	200	6	600	1	100			3	300			2	200	15	1,500	
Inspection of Existing OSWW Treatment System (5 yr Type III Inspection)																	0	0	
Inspection of Existing OSWW Treatment System (3 yr Type IV Inspection)																	0	0	
Inspection of Existing OSWW Treatment System (Annual Type V Inspection)																	0	0	
Well Permit	5	1,500	6	1,800	6	1,800	7	2,100	8	2,400	7	2,100	6	1,800	1	300	46	13,800	
Well Camera Evaluation							1	200	1	200							2	400	
Well Repair Permit	2	400	2	400	5	1,000			1	200			1	200	1	200	12	2,400	
Bacteria Water Sample					3	150			2	100			1	50	2	100	8	400	
Chemical Water Sample	1	50			1	50			1	50	1	50					4	200	
Petroleum Water Sample																	1	50	
Pesticides Water Sample																	0	0	
Nitrate/Nitrite Sample																	1	50	
Water Sample Revisit																	1	50	
Swimming Pool Annual Permit																	0	0	
Swimming Pool Plan Review																	0	0	
Restaurant Plan Review	1	200					1	200	1	200							3	600	
Tattoo Artist Permit Annual Fee																	0	0	
Five Sample Package	1	170	1	170												1	170	1	170
Water Sample Revisit-additional test																	0	0	
Bad Check																	0	0	
Temporary Food Stand	1	75			1	75											2	150	
Additional Charge (100.00)																	1	100	
Additional Charge (50.00)																	0	0	
	23	3,670	21	3,470	38	5,500	29	5,050	19	3,900	27	4,550	25	3,995	12	1,520	194	31,655	

**ENVIRONMENTAL HEALTH MONTHLY STATISTICAL REPORT
FEBRUARY 2014**

ACTIVITY DESCRIPTION	#	COMMENTS
FOOD, LODGING, AND INSTITUTIONAL		
Field Visits	37	
Inspections	30	
Permits Issued-New or Revised Business		
Permits Suspended/Revoked-Business Closed		
Food Service Plan Review	2	
Consultation Contacts	19	
Complaints		
ON SITE WASTE WATER PROGRAM		
Field Visits	58	
Soil/Site Evaluations	5	
Improvement Permits	10	
Construction Authorizations	5	
Operation Permits	4	
Denials		
Failing System Evaluations		
IP, CA, & OP Permits-Repairs	1	
Existing System Inspections/Authorizations	29	
OSWW Violations Notices	1	
Consultation Contacts	49	
Migrant Housing Inspections	22	
Pending Applications-Not Addressed	2	
Complaints	2	
WATER SAMPLES		
Field Visits	61	
Bacteria Samples	48	
Chemical Samples	10	
Petroleum Samples	2	
Pesticide Samples	3	
Nitrate/Nitrite Samples	8	
Consultation Contacts	27	
Migrant Housing Inspections		
WELL PERMITS		
Well Site Field Visits	20	
Number of Permits (New)	4	
Number of Permits(Repair)	2	
Grout Inspections	13	
Well Head Inspections	8	
Well Abandonment Inspections	2	
Bore Hole Camera Inspections	3	
Consultation Contacts	32	
Complaints		
SWIMMING POOLS		
Permits/Inspections		
OTHER		
Clerical Time (hours)	40.5	
Phone Contacts (Documented)	68	Office contacts (14)
Dan River Incident (Hours)	14.5	Conference calls/data review/GIS well survey
Matt's Soil Authorization(completed 3-5-14)	23.5 hrs	